# LABORATORY MEDICINE PROGRAM

Accession #:

Collected:

Received:

Reported:

100-0-3 carcinoma, serous, NOS 8441/3 Site: Indometrium C54.1 3/4/11 hu

# **Surgical Pathology Consultation Report** \* Addended \*

Patient

Name:

MRN:

DOB:

Gender:

HCN:

Ordering MD: Copy To: Service:

Visit #: Location:

Facility:

Specimen(s) Received

1. Lymph-Node: Pre-Caval Lymph Node

2. Uterus: Uterus, cervix & BSO

3. Omentum

4. Lymph node: RT. Common & external iliac lymph node

# **Diagnosis**

- 1. Pre-caval lymph nodes
- Metastatic serous carcinoma in one lymph node. (1/1)
- 2. "Uterus, cervix, bilateral fallopian tubes and ovaries, robotic-assisted total hysterectomy, bilateral salpingo-oophorectomy:

**Endometrium:** 

-SEROUS CARCINOMA.

## Myometrium:

- Involved by serous carcinoma to uterine serosa .

#### Cervix:

- Serous carcinoma, present in lymphatic/vascular spaces

#### Right & left ovaries:

- Serous carcinoma, present in lymphatic/vascular spaces
- Epithelial inclusion cysts.

#### Right & left fallopian tubes:

- Serous carcinoma, present in lymphatic/vascular spaces
- 3. Omentum, partial omentectomy:
- Negative for malignancy.
- 4. Right common and external iliac lymph nodes:
- Metastatic serous carcinoma in 8 out 17. (8/17)



Diagnosis Discrepancy Primary Tumor Site Discrepancy HPAA Discrepancy		*
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		<del></del>
Prior Malignancy History		-∤&
Dual/Synchronous Primary Notes	├	+-
Ase is (circle): QUALIFIED / DISQUA	TIFIED	

## **Synoptic Data**

Specimen: Uterine corpus

Cervix Right ovary Left ovary

Right fallopian tube Left fallopian tube

Omentum

Procedure: Simple hysterectomy

Bilateral salpingo-oophorectomy

Omentectomy

Lymph Node Sampling:

Performed: Pelvic lymph nodes

Specimen Integrity:

Intact hysterectomy specimen

Tumor Site: Tumor Size: Other: both sides
Greatest dimension: 2 cm
Serous adenocarcinoma

Histologic Type: Histologic Grade:

G3: Poorly differentiated

Myometrial Invasion:

Present
Depth of invasion: 10 mm
Myometrial thickness: 10 mm

Involvement of Cervix:

Not involved

Extent of Involvement of Other Organs:

Right ovary not involved Left ovary not involved

Right fallopian tube not involved Left fallopian tube not involved

Omentum not involved

Lymph-Vascular Invasion:

Present Not applicable

TNM Descriptors: Primary Tumor (pT):

pT3a (IIIA): Tumor involves serosa and/or adnexa (direct extension or

metastasis)

Regional Lymph Nodes (pN):

pN1 (IIIC2): Regional lymph node metastasis to para-aortic

lymph nodes, with or without positive pelvic lymph nodes

Pelvic lymph nodes examined: 17
Pelvic lymph nodes involved: 8
Para-aortic lymph nodes examined: 1
Para-aortic lymph nodes involved: 1

Distant Metastasis (pM):

Not applicable

None identified

Additional Pathologic Findings: None

**Electronically verified** 

by:

## **Clinical History**

Endo Ca

## **Gross Description**

1. The specimen container is labeled with the patient's name and as "Lymph Node: Precaval lymph node" consists of a piece of tissue measuring 1.5 x 1.1 x 0.5 cm received fresh. This is examined at intraoperative consultation by frozen section performed on part of the specimen. The specimen is submitted in toto as follows

1A- frozen section block resubmitted.

1B-1D- remainder of the specimen.

2. The specimen container is labeled with the patient's name and as "Uterus: Uterus, cervix and BSO" contains a uterus, cervix, bilateral fallopian tube and bilateral ovaries received in 10% buffered formalin. The uterus measures 8.0 cm SI x 5.7 cm ML x 3.0 cm AP and the cervix measures 2.9 cm. in diameter with a 0.9 cm slit-shaped os. The right and left fallopian tubes measures 7.5 cm in length and 0.7 cm in diameter and 3.5 cm in length and 0.7 cm in diameter respectively. The right and left ovaries measure  $2.4 \times 1.4 \times 0.7$  cm and  $2.5 \times 1.2 \times 1.0$  cm respectively. The entire specimen weighs 102.8 g. The cut surface of the right and left ovaries are solid in consistency with a yellow-tan to gray-tan appearance otherwise grossly unremarkable. The left fallopian tube grossly appears fimbriated but the right fallopian tube has no identifiable fimbria. The endocervical mucosa and ectocervical mucosa is congested but otherwise grossly unremakable. There is a polypoid tan-brown endometrial tumor mass noted on the anterior left side cornual area measuring  $2.0 \times 1.8 \times 1.0$  cm in depth. The remainder of the endometrium is flattened, lush and slightly nodular. The uterine serosa is congested, with fibrous adhesions and an area on the posterior serosa which is nodular measuring  $1.8 \times 1.0$  cm. Representative sections are submitted as follows:

2A-2B- remainder of right ovary submitted in toto.

2C-2D- remainder of right fallopian tube submitted in toto.

2E-2F-remainder of left ovary submitted in toto.

2G-2H-remainder of left fallopian tube and query left fimbria submitted in toto.

2I-2K-full transverse sections of anterior endomyometrium with tumor

2L-2M-longitudinal section of the anterior lower uterine segment

2N-2O- anterior cervix

2P-2R-full transverse sections of the posterior endomyometrium

2S-2U-transverse sections of the posterior left myometrium with serosal nodularity

2V-2W-longitudinal section of the posterior lower uterine segment

2X-2Y-posterior cervix

One piece left fallopian tube, left ovary, right fallopian tube, right ovary, and one piece endometrial CA are stored frozen.

3. The specimen container is labeled with the patient's name and as "omentum" contains a single piece of an unoriented fibroadipose tissue received in 10% buffered formalin. The tissue measures  $10.5 \times 7.5 \times 0.7$  cm and weighs 24.7 g.

On serial sectioning, the cut surface is predominantly fatty with no nodules identified grossly. Representative sections are submitted as follows:

3A-3E-representative sections submitted

4. The specimen container is labeled with the patient's name and as "Lymph Node: Right common and external iliac lymph node" consists of multiple fragments of unoriented fatty tissue measuring in aggregate 6.5 x 3.0 x 1.3 cm received in 10% buffered formalin. Within the fatty tissue, multiple lymph nodes are identified ranging in size from 0.5 cm to 1.7 cm. The specimen is submitted in toto as follows:

4A- one lymph node bisected

4B- one lymph node bisected

4C-multiple lymph nodes

4D- multiple lymph nodes

4E-one lymph node bisected

4F-4H-remainder of fatty tissue.

Quick Section Diagnosis  1. Pre-caval lymph node: Positive for high-grade adenocarcinoma.		
Called at '		
<u>Add</u> endum	Status: Date Re	MD Signed Out ported:
Addendum Diagnosis Tumor cells are show diffuse and strong positivity for P53, p16 and focal positivity negative for WT-1 and PR. MMR repair gene assessment for MSH-6, PMS-2, ML intact genes.	y for ER. <sub>-</sub> H-1 and	They are MLH-2 show