Diagnosis Discrepancy Primary Tumor Site Discrepancy HPAA Discrepancy rier Malignancy History oncus Primary Noted QUALIFIED adinocacinoma, Indometriora, NOS 8380/3 Sita: Endometrian C54.1 hr d.1.





Surgical Pathology Report

Patient Name: Accession #: Med. Rec. #: Client: Taken: DOB: Location: Received: Gender: Reported: Physician(s):

History/Clinical Dx: Endometrial cancer

Postoperative Dx: {Not Provided}

Specimen(s) Received:

A: Right tube and ovary B: Left tube and ovary C: Uterus, cervix

DIAGNOSIS:

A. Right tube and ovary:

1. Ovary with physiologic changes

2. Acute salpingitis

Free of tumor

B. Left tube and ovary:

1. Ovary with physiologic changes

2. Acute salpingitis 3. Free of tumor

C. Uterus, cervix:

ENDOMETRIAL ADENOCARCINOMA, endometrioid type; well

0.4 cm out of a 1.5 cm thick myometrium (<1/3 of the myometrial

differentiated (FIGO grade I)

Tumor Information:

Type of specimen: **Tumor location:** Tumor size: Histologic type:

Hysterectomy **Endometrium** 3.5 x 2.0 x 1.0 cm **Endometrioid**

Histologic grade:

Well differentiated (FIGO grade 1)

Tumor extent: Depth of invasion:

thickness) 3.5 cm

Horizontal extent: Lower third of vagina involvement:

N/A

Lower uterine segment involvement: Not present

Pelvic wall extension:

Not present Not present

Parametrial invasion:

N/A

Bladder/rectal mucosal extension:

Lymphovascular invasion:

None identified Free of involvement

Resection margins:

Lymph node involvement:

N/A

Bendence Statement.
The bibliotics Statement may be imprisoned to when the resignation of the whole report. This rest was environment and as performance consistency the above report. This rest was environment and performance construction. This files determined that such measures or approved is not determined. This test is intend to obtain a performance of the such measures or approved is not determined. This test is intend to obtain a performance of 1988 (CCLA) as quantitied to perform the completely design reportably indeed an approved to perform the completely design reportably indeed.

Surgical Pathology Report

Other findings:

Adenomyosis

Comments:

has reviewed this case and concurs.

Intraoperative Consultation:

C. Frozen Section Interpretation: Endometrial adenocarcinoma, well differentiated; possible myometrial invasion

Gross Description

- A. Received in formalin labeled "right tube and ovary" consists of an ovary attached fallopian tube weighing 7 grams. The ovary is tan measuring 2.0 cm in greatest dimensions. Cut surface is unremarkable. The fallopian tube measures 5.0 cm in length and 0.3 cm in diameter. Representative sections are submitted in cassette A.
- B. Received in formalin labeled "left tube and ovary" consists of an ovary and attached fallopian tube weighing 7 grams. The ovary is tan measuring 1.5 cm in greatest dimensions. Cut sections are unremarkable. The attached fallopian tube measures 4.0 cm in length and 0.5 cm in diameter. Representative sections are submitted in cassette B.
- C. Received fresh labeled "cervix and uterus" consists of a uterus and cervix weighing 57 grams. The uterus is received bivalved. The uterine corpus measures 5.0 x 4.5 x 3.5 cm. The serosal surface is tan and smooth. The cervix measures 3.0 cm in length and 3.0 cm in diameter. The ectocervical mucosa is white-tan and smooth. A tan polypoid mass is present on the endometrial surface measuring approximately 3.5 x 2.0 cm in area. The tumor measures 1.0 cm in thickness. Possible myometrial invasion is identified grossly. A portion of tissue is submitted for frozen section. , < ½ of myometrial thickness. The myometrium measures approximately 1.5 cm in thickness. The endocervical canal is unremarkable grossly. The myometrium is serially sectioned to reveal a well-circumscribed tan mass measuring 0.7 cm in greatest dimension. Representative sections are submitted as follows:

KEY TO CASSETTES:

C1	-	Frozen	section	residual
----	---	--------	---------	----------

C2 - Cervix

C3 - Lower uterine segment

C4 - Anterior endometrium

C5-C7 - Anterior endo/myometrium, full thickness

C8-C9 - Posterior endo/myometrium, full thickness

C10 - Myometrial mass and serosa

C11 - Parametrial tissue

Microscopic Description

A-C. The microscopic findings support the above diagnoses.