

ICD-0.3  
Adenocarcinoma, endometrioid, NOS

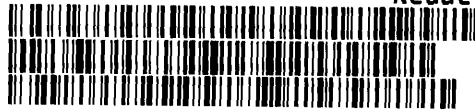
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Site: Endometrium, NOS

C54.1

QW 11/29/12

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TCGA-BK-A56F-01A-PR Redacted



# Final Surgical Pathology Report

## Procedure:

## Diagnosis

- A. Uterus, ovaries and fallopian tubes, hysterectomy with bilateral salpingo-oophorectomy: Endometrioid endometrial adenocarcinoma, FIGO grade 1, with invasion into 60% of the myometrial wall; negative margins of excision.
- B. Lymph nodes, right pelvic, regional resection: Seven negative lymph nodes (0/7).
- C. Lymph nodes, left pelvic, regional resection: Three negative lymph nodes (0/3).
- D. Lymph nodes, periaortic, regional resection: Three negative lymph nodes (0/3).

## Microscopic Description:

Histologic type: Endometrial adenocarcinoma, endometrioid type ✓

Histologic grade: FIGO grade I

### Myometrial invasion:

- 11 mm depth of invasion
- 18 mm depth of myometrial thickness
- 60 % of myometrial wall

Cervix: Negative for malignancy or dysplasia

Primary tumor (pT) TNM (FIGO): pT1b

Margins of resection: Negative

Vascular invasion: Not identified

Regional lymph nodes: Thirteen lymph nodes negative for carcinoma (0/13)

Additional findings: Unremarkable ovaries and fallopian tubes; adenomyosis; leiomyoma.

MSI testing: Ordered on block AFS1

## Specimen

- A. Uterus, cervix, bilateral tubes and ovaries
- B. Right pelvic lymph nodes
- C. Left pelvic lymph nodes
- D. Periaortic lymph nodes

## Clinical Information

Endometrial cancer - For grade and depth of invasion ✓

## Intraoperative Consultation

Uterus, ovaries and tubes, TAH/BSO: Grade 1 endometrioid adenocarcinoma, with 50% myometrial invasion.

## Gross Description

- A. Received unfixed for frozen section and tissue procurement, labeled uterus, cervix, tubes, and ovaries, is a uterus with bilateral adnexae. The uterine corpus is 69 grams and 8 cm from fundus to cervix, 6 cm from cornu to cornu, and 4 cm in maximum AP dimension. The ectocervix is 3.5 cm in diameter, with slit-like os, 1.4 cm. No ectocervical lesions are identified. The endocervix is 4 cm long, without lesions. The endometrial cavity is distorted by an anterior and posterior wall mass lesion, and fibrotic mural nodule, with depth of invasion of at least 50% of the myometrium. The myometrial thickness is 2.2 cm. The

right ovary is 4 x 3.2 x 1.0 cm. No mass lesions identified. There is an attached right fallopian tube, 6.5 cm long and 0.5 cm in diameter at the isthmus, with fimbriated end. The left ovary is 3.5 x 2.5 x 1.0 cm, with an attached left fallopian tube, 6.0 cm long and 0.5 cm in diameter at the isthmus, with fimbriated end. Representative sections as follows: AFS1 - full thickness mass lesion; 1 right adnexa, 2 left adnexa, 3-4 cervix, 5-9 representative tumor.

B. Received fresh labeled "right pelvic lymph nodes" is a 6.5 x 5.3 x 2.2 cm aggregate of soft, lobulated tan gold adipose tissue. Several slightly rubbery tan-pink-gold tissues in keeping with lymph nodes ranging from minute up to 5.4 cm in greatest dimension are recovered. The lymphoid tissues are entirely submitted. RS 8  
Summary: 1 - one lymph node, 2 - 3 lymph nodes, 3 and 4 - 1 bisected lymph node per cassette, 5 through 8 - largest lymph node

C. Received fresh labeled "left pelvic lymph nodes" is a 6.4 x 5.0 x 2.3 cm aggregate of soft, lobulated tan gold adipose tissue. A few soft tan-pink-gold tissues in keeping with lymph nodes measuring up to 4.3 cm in greatest dimension are recovered. The lymphoid tissues are entirely submitted. RS 5  
Summary: 1 - 1 bisected lymph node, 2 and 3 - 1 bisected lymph node, 4 and 5 - largest lymph node

D. Received fresh labeled "periaortic lymph nodes" is a 4.0 x 3.5 x 1.8 cm aggregate of soft, lobulated tan gold adipose tissue. A few soft tan-pink-gold tissues in keeping with lymph nodes measuring up to 1.3 cm in greatest dimension are recovered. The lymphoid tissues are entirely submitted. RS 3  
Summary: 1 - 2 lymph nodes, 2 and 3 - 1 bisected lymph node per cassette

	Yes	No
Review		
Diagnostic Discrepancy		
Primary Tumor Site Discrepancy		
Metastatic Discrepancy		
Prior Malignancy History		
Dual/Synchronous Primary Noted		
Case is (circle):	QUALIFIED	DISQUALIFIED
Reviewer Initials	Date Reviewed: 1/8/12	