

Diagnosis Discrepancy	Yes	No
Primary Tumor Site Discrepancy		
HPAA Discrepancy		
Prior Malignancy History		
Local/Synchronous Primary Noted		
Case # (circle)	QUALIFIED	DISQUALIFIED
Reviewer Initials	AB	Date Reviewed: 3/4/11

ICD-0-3

Adenocarcinoma, endometrioid, NOS 8380/3

Site: Endometrium C54.1 3/4/11 JW

UUID: AA0FFBF8-693C-484E-A29D-02F859E1E4C5  
TCGA-B5-A0V4-01A-PR



Redacted

## Surgical Pathology Report

Patient Name: [REDACTED]  
Med Rec No: [REDACTED]  
DOB: [REDACTED]  
Gender: F  
Physician(s): [REDACTED]  
cc: [REDACTED]

Client: [REDACTED]  
Location: [REDACTED]  
Pt. Phone no: [REDACTED]

Accession #: [REDACTED]  
Taken: [REDACTED]  
Received: [REDACTED]  
Reported: [REDACTED]

History/Clinical Dx: Endometrial cancer, pelvic organ prolapse

Postoperative Dx: Same, pending pathology examination

### Specimen(s) Received:

- A: Uterus, cervix, tubes and ovaries
- B: Left pelvic lymph nodes
- C: Left aortic lymph nodes
- D: Right pelvic lymph nodes
- E: Right caval lymph nodes

### DIAGNOSIS:

#### A. Uterus, cervix tubes and ovaries:

**WELL-DIFFERENTIATED ENDOMETRIAL ADENOCARCINOMA, ENDOMETRIOID TYPE WITH MUCINOUS DIFFERENTIATION (FIGO grade 1)**

Type of specimen: Hysterectomy and bilateral salpingoopherectomy  
Tumor location: Endometrium  
Tumor size: 3.5 cm  
Histologic type: Endometrioid type with mucinous differentiation  
Histologic grade: Well differentiated (FIGO grade 1)  
Depth of myometrial invasion: Less than 1 mm out of a 2.5 cm myometrial thickness  
Cervical involvement: Not involved  
Vaginal involvement: Vaginal cuff not involved  
Adnexal involvement: Not involved  
Parametrial involvement: Not involved  
Invasion of contiguous structures: Not involved  
Lymphovascular invasion: None identified  
Perineural invasion: None identified  
Resection margins: Free of carcinoma  
Lymph node involvement: 35 lymph nodes free of metastatic tumor (see parts B through E)  
Peritoneal cytology: Negative for malignancy  
Other findings:  
1. Cervix with moderate to severe squamous dysplasia (CIN II-III); vaginal cuff margin free of dysplasia  
2. Cervical and vaginal hyperkeratosis  
3. Myometrial adenomyosis and leiomyoma

#### Regulatory Statement:

The following statement may be applicable to some of the reagents and/or methods used in developing the above report. This test was developed and its performance characteristics determined by the manufacturer. The FDA has determined that such reagents or methods are appropriate for use in the laboratory. This laboratory is certified under the Clinical Laboratory Improvement Amendments of 1988 (CLIA) as qualified to perform high complexity clinical laboratory testing.

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- B. Left pelvic lymph nodes:  
15 lymph nodes free of metastatic tumor
- C. Left aortic lymph nodes  
Benign fibroadipose and muscular tissue; no lymphoid tissue identified
- D. Right pelvic lymph nodes:  
18 lymph nodes free of metastatic tumor
- E. Right caval lymph nodes:  
2 lymph nodes free of metastatic tumor

**Comments:**

has reviewed this case and concurs.

**Gross Description**

- A. Received in formalin labeled "uterus, cervix, bilateral tubes and ovaries" is a previously opened uterus and cervix with attached right and left fallopian tubes and ovaries, 336.0 grams. The uterus is symmetrical in configuration, 11.0 cm in length, 7.5 cm in broadest extent, and up to 5.5 cm anterior-posteriorly. The serosa is pink-tan, smooth and glistening. The cervix with attached vaginal cuff is 4.0 x 4.0 x 4.0 cm, and appears grossly normal. A portion of the cervix has been removed intraoperatively and submitted for cancer research. Cross sectioning reveals a thin pink, slightly hemorrhagic endometrium, 0.1 cm in greatest thickness. A portion of the endometrium has been removed intraoperatively and submitted for cancer research. Situated along the posterior aspect of the endometrial canal is a friable, red-tan polypoid lesion, 3.5 x 3.5 cm across. The cut surface of the tumor reveals it to be grossly confined to the endometrium. At this level, the myometrium is at least 2.5 cm in thickness. There is an area of circumscribed nodularity in the uterine wall, grossly consistent with a leiomyoma of 1.0 cm. The right and left fallopian tubes are unremarkable. The right and left ovaries are each approximately 2.0 x 1.5 x 1.0 cm, and appear grossly normal. A portion of each ovary has been removed intraoperatively and submitted for cancer research. Representative sections, blocks A1-A13.

**KEY TO CASSETTES:**

- |         |   |                              |
|---------|---|------------------------------|
| A1-A2   | - | Cervix                       |
| A3      | - | Upper cervical canal         |
| A4-A8   | - | Tumor                        |
| A9      | - | Right adnexa                 |
| A10     | - | Left adnexa                  |
| A11     | - | Right parametrium            |
| A12     | - | Left parametrium             |
| A13     | - | Fibroid                      |
| A14-A15 | - | Additional cervical sections |
| A16     | - | Vaginal cuff margin          |

- B. Received in formalin labeled "left pelvic lymph node" is a fragment of yellow-tan fatty soft tissue, 18.0 grams, 5.0 x 4.0 x 3.0 cm. By palpation and cross sectioning, there are multiple pink-tan rubbery lymphoid nodules, 1.5 cm in greatest dimension. The specimen in toto, blocks B1-B6.

**KEY TO CASSETTES:**

- |       |   |                     |
|-------|---|---------------------|
| B1    | - | Two lymph nodes     |
| B2    | - | Two lymph nodes     |
| B3    | - | Two lymph nodes     |
| B4-B6 | - | Remainder of sample |

- C. Received in formalin labeled "left aortic lymph node" is a fragment of yellow-tan fatty soft tissue, <1.0 grams, 1.0 x 0.5 x 0.5 cm. By palpation and cross sectioning, no lymph nodes are grossly identified. The specimen in toto, block C.
- D. Received in formalin labeled "right pelvic lymph node" is a fragment of yellow-tan fatty soft tissue, 16.0 grams, 4.5 x 3.5 x 2.5 cm. By palpation and cross sectioning, there are multiple pink-tan rubbery lymphoid nodules, 2.0 cm in greatest dimension. The specimen in toto, blocks D1-D4.

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**KEY TO CASSETTES:**

D1 - Two lymph nodes  
D2 - Three lymph nodes  
D3-D4 - Remainder of sample

- E. Received in formalin labeled [REDACTED] right caval lymph node" is a fragment of yellow-tan fatty soft tissue, 3.0 grams, 2.0 x 1.5 x 1.0 cm. By palpation and cross sectioning, there are multiple pink-tan rubbery lymphoid nodules, 1.0 cm in greatest dimension. The specimen in toto, blocks E1-E2.

**KEY TO CASSETTES:**

E1 - Two lymph nodes  
E2 - Remainder of sample

**Microscopic Description**

A/E. The microscopic findings support the above diagnoses.

\*\*\*Electronically Signed Out By [REDACTED]

**Addendum**

Patient Name:

Med. Rec. #:

DOB:

Gender:

Physician(s):

Client:

Location:

Accession #:

Taken:

Received:

Reported:

**Specimen(s) Received:**

A: Uterus, cervix, tubes and ovaries

B: Left pelvic lymph nodes

C: Left aortic lymph nodes

D: Right pelvic lymph nodes

E: Right caval lymph nodes

**Date Ordered:**

**Status:** Signed Out

**Addendum Comment**

The mucinous differentiation involves less than 10% of the endometrial tumor.

\*\*\*Electronically Signed Out\*\*\*

**Regulatory Statement:**

The following statement may be applicable to some of the reagents/antibodies used in developing the above report: This test was developed and its performance characteristics determined by F. [redacted] been cleared or approved by the U.S. Food and Drug Administration. The FDA has determined that such clearance or approval is not necessary. This test is used for clinical purposes. It should not be regarded as investigational or for research. This laboratory is certified under the Clinical Laboratory Improvement Amendments of 1988 (CLIA) as qualified to perform high complexity clinical laboratory testing.