Sex: Female D.O.B.: MRN #: Ref Physic

. (Age:

UUID:8FC0BB09-C917-4552-96A4-B4868FD33D27 Redacted TCGA-AJ-A3NH-01A-PR

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ary Tumor Site Discrepancy

HIPAA Discrepancy

Prior Malignancy History

Dual/Synchronous Pri

		SPECIMEN	ı
ted:	1		_

Received: Reported:

Collec

SURGICAL PATHOLOGY REPORT

DIAGNOSIS

DIAGNOSIS:

Uterus with bilateral adnexa, hysterectomy with bilateral salpingo-oophorectomy:

Tumor Characteristics:

- Histologic type: Serous carcinoma.
- Histologic grade: High grade.
- 3. Tumor site: Endometrium.
- Tumor size: 4.9 by 4.8 cm.
- 5. Myometrial invasion: Tumor focally extends throughout the entire myometrial wall, 1.8 cm.
- 6. Involvement of cervix: No.
- 7. Extent of involvement of other organs: Not seen.
- 8. Lymphovascular space invasion: Not seen.

Surgical Margin Status:

- Margins uninvolved: Cervix, bilateral parametria.
- 2. Margins involved: Tumor extends to the inked serosal surface of the uterus, but does not microscopically perforate it. Lymph Node Status:
- 1. No lymph nodes present.

Other:

1. Other significant findings: Leiomyomata.

Bilateral ovaries and fallopian tubes without significant pathologic abnormality.

pTNM stage: pT1b NX (FIGO IB).

Electronic Signature:

COMMENTS:

Appropriately control stain for P53 performed on blocks 6 and 7 show strong nuclear positivity in majority of tumor cells, consistent with a serous carcinoma

CLINICAL INFORMATION

CLINICAL HISTORY:

Preoperative Diagnosis: year old female G2 adenocarcinoma of endometrium on D&C

Postoperative Diagnosis:

Symptoms/Radiologic Findings:

SPECIMENS:

Uterus, bilateral tubes and ovaries

1CD-0-3

adenocarcinoma, perous, NOS 8441/3 Site: endometrium C54.1

SPECIMEN DATA

GROSS DESCRIPTION

Received labeled #1, uterus, bilateral tubes and ovaries is a 150 gram previously opened hysterectomy specimen consisting of a 6.8 x 6.2 x 4.2 cm uterine body and an attached 3.1 x 2.8 x 2.6 cm cervix. The left ovary and fallopian tube are attached to the comu.

The serosa is smooth to shaggy and tan red. The ectocervix is smooth and pink white with a 0.4 cm slit like os, The endocervical canal is tan and 1.9 cm in length. The endometrial cavity is 3.7 cm from cornu to cornu and 4.8 cm in length. The cavity diffusely consists of a 4.9 x 4.8 cm polypoid, friable gray white mass. The mass extends into the lower uterine segment. The cut surface of the mass is gray white and diffusely involved the underlying myometrium, extending to the inked serosa, with a depth of 1.8 cm.

No uninvolved endometrium is identified. There is a minimal amount of residual tan pink trabeculated myometrium. There are three intramural and one subserosal whorled gray white dense nodules ranging from 0.8 cm to 2.1 cm in greatest dimension. No areas of hemorrhage or necrosis are identified in the nodules.

The 1.5 x 0.9 x 0.5 cm left ovary has a lobulated tan outer surface. The cut surface is tan with gray white corpora albicans. The attached 5.1 x 0.4 cm fimbriated left fallopian tube has a tan pink serosa and a pinpoint lumen.

Also received in the same container is a 2.3 x 1.0 x 0.5 cm overy with an attached 4.3 x 0.4 cm fimbriated fallopian tube. The outer surface of the overy is smooth to lobulated and tan pink. The cut surface is tan with gray white corpora albicans. The fallopian tube has a tan pink serosa and a pinpoint lumen.

The specimen is inked, serially sectioned and representative sections are submitted as labeled: Block 1- anterior cervix; block 2- posterior cervix; block 3-- anterior lower uterine segment; block 4-- posterior lower uterine segment; blocks 5 and 6 -- anterior full thickness mass in each; blocks 7-8posterior full thickness mass in each, to include a myometrial nodule in block 8; block 9 - three myometrial nodules; block 10- left parametrium; block 11- right parametrium; block 12- left ovary and fallopian tube; block 13- right ovary and fallopian tube. The blocks are labeled Also received in the same container is a green and yellow cassette labeled t.) for genomic research studies.