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Study:

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SURGICAL PATHOLOGY REPORT

ACCESSION NO:

LOCATION: HOSPITAL INPATIENT

Physician(s):

Specimen:

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

 UUID: 54E63A5C-C0E4-408B-9911-CE822CECD362
 TCGA-AX-A1C9-01A-PR

Redacted



Clinical History:

Operation/Procedure: da Vinci hysterectomy / Bilateral salpingo-oophorectomy / Nodes / Biopsy

Gross: Tissue "A" - The 3 cm. piece of fat has 0.3-2.5 cm. lymph nodes submitted as follows:

Slide Key:

- A1 - Two nodes
- A2 - One node, bisected
- A3-4 - One node, bisected

Tissue "B" - A 50-gram, 5.5 x 4 x 3.5 cm. uterus and cervix has attached left adnexa and a separate right adnexa. The serosa is smooth (inked black). The ecto- and endocervical mucosae are unremarkable. The right anterior and posterior endometrium is involved by a papillary, bulky, friable tumor, 1.5 cm. from the lower uterine segment. The anterior and posterior tumors average 2.3 x 2 x 1 cm. each. The tumor seems to track along the isthmus. These tumor plaques appear to push into the underlying myometrium, but unequivocal myometrial invasion is not seen. The remaining endometrium is flat, except for a 0.7 cm., plaque-like nodule, possibly a subserosal fibroid. The remaining myometrium has an additional 0.5 cm. fibroid.

The right adnexa is 74 grams and includes a 6 x 4.5 x 3.5 cm. unilocular cyst with thin, clear colorless fluid. The inner lining is smooth. Normal ovarian parenchyma is identified. The right, 4.5 x 0.5 cm. fallopian tube has scant delicate adhesions. The left, 1.7 x 1.3 x 0.7 cm. ovary has atrophic cut surfaces and an adjacent 5 x 0.5 cm. fallopian tube with small paratubal cysts. Tissue is submitted from Parts B and D for research as requested.

Slide Key:

- B1 - Right parametrium
- B2 - Left parametrium
- B3-4 - Anterior cervix to lower uterine segment
- B5-6 - Posterior cervix to lower uterine segment

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Surgical Pathology Report by Female Birthdate: or service on

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B7-9 - Anterior tumor to normal at isthmus
B10 - Anterior endometrium
B11-14 - Posterior tumor to normal at isthmus
B15 - Endometrial plaque-like lesion (also seen in B12 and B13)
B16 - Normal posterior endometrium
B17 - Intramural fibroid
B18 - Right fallopian tube
B19-21 - Right ovarian cyst
B22 - Left ovary
B23 - Left fallopian tube

Tissue "C" - A 5 cm. aggregate of fat has a 0.2-3.5 cm. lymph node submitted as follows:

Slide Key:

C1 - Five possible nodes
C2-6 - Each have one node, bisected
C7-10 - One node, sectioned
C11-17 - One node, sectioned

Tissue "D" - A 5 cm. aggregate of fat has 0.4-4 cm. lymph nodes submitted as follows:

Slide Key:

D1 - Three possible nodes
D2 - One node, bisected
D3-4 - One node, bisected
D5-6 - One node, bisected
D7-8 - One node, bisected
D9-13 - One node, sectioned
D14-17 - One node, sectioned
D18-24 - One node, sectioned

Tissue "E" - A 7 x 5 x 1 cm., unremarkable piece of omentum is sampled in three cassettes.

Microscopic: Tissue "A" and "C" through "E" - Microscopic findings correspond to the diagnoses.

Tissue "B":

Specimen Type: Radical hysterectomy
Tumor Site: Right anterior and posterior endometrium
Tumor Size: Two tumor plaques, each measuring 2.3 x 2 x 1 cm.
Other Organs Present: Oviducts and ovaries
Histologic Type and Grade: Endometrioid adenocarcinoma, Grade II/III
Myometrial Invasion: Invasion present, tumor invades 0.1 cm. into a 0.7 cm., thick myometrium
Stage: T1N0Mx
Margins: Involved

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Criteria	Yes	No
Diagnostic Discrepancy		<input checked="" type="checkbox"/>
Primary Tumor Site Discrepancy		<input checked="" type="checkbox"/>
NIPAA Discrepancy		<input checked="" type="checkbox"/>
Prior Malignancy History		<input checked="" type="checkbox"/>
Qual/Synchronous Primary Noted		<input checked="" type="checkbox"/>
Case is (re-)evaluated / DISQUALIFIED		
Reviewer Initials: <u>RS</u>	Date Reviewed: <u>1/5/10</u>	

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Regional Lymph Nodes: Twenty (20) regional lymph nodes all free of metastatic tumor
Venous/Lymphatic Invasion: Not identified

Comment: Tissue "B" - The vast bulk of this tumor exhibits the histology of a moderately well-differentiated endometrioid-type adenocarcinoma. In a few small foci, however, this tumor exhibits high-grade features which closely approach, but do not quite attain the histologic character of serous carcinoma (Dr.). Therefore, an unequivocal serous component is not identified in this specimen.

Diagnoses:

Tissue "A" - Para-aortic lymph nodes - Three lymph nodes, all free of metastatic tumor.

Tissue "B":

Uterus - Adenocarcinoma of endometrium, endometrioid type, Grade II/III, with foci of superficial myometrial invasion (see comment).

Right ovary - Benign serous ovarian cyst.

Right fallopian tube - No diagnostic features.

Left ovary - No diagnostic features.

Left fallopian tube - No diagnostic features.

Tissue "C" - Right pelvic lymph nodes - Nine lymph nodes in adipose tissue, all free of metastatic tumor.

Tissue "D" - Left pelvic lymph nodes - Eight lymph nodes in adipose tissue, all free of metastatic tumor.

Tissue "E" - Omental adipose tissue - No tumor present.