

UUID:040F4583-2683-42A8-B185-56A08874F3A0

TCGA-PG-A5BC-01A-PR

Redacted



ICD-C-3

Adenocarcinoma, serous^M
8441/3

Site: Endometrium
C54.1
1/9/13 JW

Patient Name: [REDACTED]

Med Rec #: [REDACTED]

Surg Path Case - STATUS: Final

**SEE NOTE

Collect/Perform

Ordered Date

Department: PATH

Physician Who Perfor.

Requesting Physician:

DIAGNOSIS:

1. Uterus, cervix, bilateral ovaries and tubes, omentum, hysterectomy and bilateral salpingo-oophorectomy:

SUMMARY DIAGNOSIS:

- High grade serous carcinoma with endocervical stromal invasion.
 - Myometrial invasion 12.5%.
 - Bilateral ovaries and tubes, negative for carcinoma.
 - Omentum, negative for carcinoma.
 - See synoptic report at end.
2. RIGHT periaortic lymph node, excision:
 - Four lymph nodes, negative for carcinoma (0/4).
 3. LEFT periaortic lymph nodes, excision:
 - Three lymph nodes, negative for carcinoma (0/3).
 4. LEFT external iliac and obturator lymph nodes, excision:
 - Five lymph nodes, negative for carcinoma (0/5).
 5. RIGHT external iliac and obturator lymph nodes, excision:
 - Four lymph nodes, negative for carcinoma (0/4).

PARTS 1-5: FULL REPORT (incorporates relevant findings from all specimens)

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Patient Name: [REDACTED]

Med Rec #: [REDACTED]

Requested By:

Ordered By:

in this case):

- Histologic Type: Adenocarcinoma, serous type
- Histologic Grade: High grade
- Nuclear grade: High grade
- Tumor Size:
 - Greatest dimension: 7.5cm; other two dimensions: 3 x 0.9cm
- Specimen Integrity: Intact
- Tumor Site: Anterior and posterior endometrium
- Myometrial Invasion: Present
 - Depth of invasion: 2mm
 - Myometrial thickness: 16mm
- Cervical Stromal Invasion: Present
- Lymph-vascular Invasion: Absent
- Paracervical Soft Tissue Margin: Negative for invasive carcinoma
- Other Tissues/Organs Involved: no tumor identified.
- Peritoneal Ascitic Fluid (from cytology report): negative
- Regional Lymph Node Metastasis:
 - Pelvic nodes (number of positive/number examined): 0/7
 - Para-aortic nodes (number of positive/number examined): 0/9
- Distant Metastasis (including abdominal lymph nodes): Can not determined
- Additional Pathologic Findings: RIGHT ovary with inclusion cyst, myometrium with adenomyosis and leiomyoma.
- Ancillary Studies:
 - ER (immunohistochemical stain): Negative
 - PR (immunohistochemical stain): Positive
 - P53 (immunohistochemical stain): Positive
- AJCC Pathologic Staging: pT2 N0 M not applicable; FIGO: II

COMMENT: This case has been reviewed by one or more pathologists in the Division of Surgical Pathology.

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CLINICAL INFORMATION:

Pelvic mass. Laparoscopy robotic hysterectomy.

GROSS DESCRIPTION:

1. The specimen is received fresh and labeled cervix, uterus, tubes, ovaries and omentum. It consists of a uterus, cervix with attached bilateral ovary and fallopian tubes and a portion of the omentum and attached to the fundus of the serosa. The specimen weighs 215 gram in toto

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Patient Name: [REDACTED]

Med Rec #: [REDACTED]

Requested By:

Ordered By:

and with following measurements: 9.5cm from fundus to exocervix; 6.0cm from cornu to cornu; 4.0cm from anterior to posterior. The right ovary and fallopian tube measures 2.0 x 1.6 x 1.1cm and 6.0 x 0.5 x 0.4cm respectively. The left ovary and fallopian tube measures 2.5 x 1.0 x 0.9cm and 5.8 x 0.5 x 0.4cm respectively. The omentum measures 8.0 x 7.0 x 4.0cm. The ectocervix is tan white and smooth. On opening, the endocervical canal measures 2.0cm in length and 1.2cm across. It has a tan smooth mucosa. The endometrial cavity measures 5.5cm in length and 3.8cm from cornu to cornu. The endometrium is tan and focally nodular, polyploid mass on the anterior and posterior wall, measuring 7.5 x 3.0 x 0.9cm in overall. The mass appears to be confined in the mucosa, grossly. The myometrium measures 1.6cm in maximum thickness. The mass is located 0.5cm from the lower uterine segment. There is a 1.0cm of tan-white, rubbery whorled and well-circumscribed mass within the myometrium. The right and left ovaries have tan-white smooth outer surface with several white corpora albicantia. The both fallopian tubes have grossly identifiable pinpoint lumen with fimbriated ends. The omentum is serially sectioned and no gross lesion identified. Representative sections are submitted as follows:

AFSC: Frozen section from posterior wall mass

B: Posterior cervix

C: Posterior endometrial lower segment

D-E: Posterior endometrial tumor with deepest invasion

F: Tumor at the fundus

G-H: Anterior endometrial tumor with deepest invasion

I: Anterior endometrial lower segment

J: Anterior cervix

K: Omentum with serosa of the fundus

L: Omentum

M-N: Entire right ovary

O-P: Entire right fallopian tube

Q-R: Entire left ovary

S-T: Entire left fallopian tube

U: Intramural mass

INTRAOPERATIVE CONSULT: High grade carcinoma, compatible with serous carcinoma, no invasion seen.

2. The specimen is received fresh and labeled RIGHT periaortic lymph node. It consists of a piece of tan-red soft tissue, measuring 3.0 x 2.0 x 0.8cm. The specimen is entirely submitted in two cassettes labeled A, B.

3. The specimen is received fresh and labeled LEFT periaortic lymph node. It consists of a piece of tan-red soft tissue, measuring 3.0 x 2.5 x 0.6cm.

Patient Name: [REDACTED]

Med Rec #: [REDACTED]

Requested By: [REDACTED]

Ordered By: [REDACTED]

The specimen is serially sectioned and two tan-red possible lymph nodes identified, measuring up to 0.6cm in greatest dimension. The specimen is entirely submitted in two cassettes labeled A, B.

4. The specimen is received fresh and labeled LEFT external iliac and LEFT obturator. It consists of two fragments of tan-red soft tissue, measuring 5.0 x 2.5 x 1.2cm. The specimen is serially sectioned and five tan-red possible lymph nodes identified, measuring up to 1.8cm in greatest dimension. The specimen is entirely submitted in four cassettes labeled A-D.

5. The specimen is received fresh and labeled RIGHT external iliac and obturator. It consists of a piece of tan-red soft tissue, measuring 4.0 x 2.5 x 1.0cm. The specimen is serially sectioned and two tan-red possible lymph nodes identified, measuring up to 2.2cm in greatest dimension. The specimen is entirely submitted in five cassettes labeled A-E.

The following special studies were performed on this case and the interpretation is incorporated in the diagnostic report above:
2xESTROGEN RECEPTOR, 2xPROGESTERONE RECEPTOR, 4xP53

** Electronic Signature **

I certify that I personally conducted the diagnostic evaluation of the above specimen(s) and have rendered the final diagnosis(es).

Note: The histology, immunochemistry and in situ hybridization components for this case were performed at

The Attending Pathologist reviewed this case and made the diagnosis.

Where applicable, immunohistochemistry and in situ hybridization tests were developed and the performance characteristics determined by the Immunohistochemistry Laboratory. These tests have not been cleared or approved by the US Food and Drug Administration and the results should be correlated with other clinical and laboratory data. Appropriate controls were performed for all immunohistochemistry, in situ hybridization and histochemical tests.

Criteria	Yes	No
Diagnosis Discrepancy		✓
Primary Tumor Site Discrepancy		✓
HIPRA Discrepancy		✓
Prior Malignancy history		✓
Qual/Synchronous Primary Noted		
Case is (circle):	QUALIFIED	DISQUALIFIED
Reviewer Initials: [Signature]	Date Reviewed: 12/12/12	

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