

1CD-0-3
carcinoma, endometrioid, NOS
8380/3
Site: Endometrium c54.1
w/ 8/24/11

SURGICAL PATHOLOGY

Case Number :

Criteria	Yes	No
Diagnosis Discrepancy		
Primary Tumor Site Discrepancy		
HIPAA Discrepancy		
Prior Malignancy History		
Dual/Synchronous Primary Noted		
Case is (circle):		
Reviewer Initials	QUALIFIED	DISQUALIFIED
Date Reviewed	8/24/11	8/24/11

Diagnosis:

A: Uterus and cervix, hysterectomy:

Location of tumor: primary endometrial cancer

Histologic type: endometrioid adenocarcinoma with squamous differentiation

Histologic grade (FIGO): FIGO grade 3 (architectural grade 3, nuclear grade 3)

Extent of invasion: see below

Myometrial invasion: Inner half

Depth: 3 mm Wall thickness: 15 mm Percent: 20% (slide A3)

Serosal involvement: not identified

Lower uterine segment involvement: not identified

Cervical involvement: not identified

Adnexal involvement (see below): not identified

Other sites: not applicable

Cervical/vaginal margin and distance: negative, widely free

Lymphovascular space invasion: focally present

Regional lymph nodes (see other specimens):

Total number involved: 0

Total number examined: 13

Other pathologic findings: extensive adenomyosis

Tumor estrogen receptor and progesterone receptor immunohistochemistry results: the tumor is estrogen receptor positive (2+, 50%) and progesterone receptor negative (0%)

AJCC Pathologic Stage: pT1a pN0

FIGO (2008 classification) Stage grouping: IA

UUID: 7C46CE28-FC96-47FD-A133-B95EA93E1D8B
TCGA-EY-A20M-01A-PR

Redacted



These stages are based on information available at the time of this report, and are subject to change pending additional information and clinical review.

Ovary, right, oophorectomy:

- No tumor identified

Ovary, left, oophorectomy:

- No tumor identified

Fallopian tube, right, salpingectomy:

- No tumor identified

Fallopian tube, left, salpingectomy:

- No tumor identified

B: Pelvic lymph nodes, right, removal

- No tumor identified in eight lymph nodes (0/8)

C: Pelvic lymph nodes, left, removal

- No tumor identified in five lymph nodes (0/5)

Comment:

Histologic sections of the uterine corpus cancer reveal a poorly differentiated carcinoma with >50% solid growth in addition to gland formation. Squamous differentiation is noted, consistent with endometrioid subtype. Due to the presence of areas of tumor necrosis and other features, immunohistochemistry was performed to evaluate for other histologic subtypes. The carcinoma exhibits generally weak staining for P53, patchy staining for P16, and is negative for synaptophysin and chromogranin. These results do not support serous or neuroendocrine differentiation in this tumor.

Intraoperative Consult Diagnosis:

A frozen section was requested at am from

FS#1: Uterus, cervix, bilateral tubes and ovaries
- Endometrioid adenocarcinoma, Grade 2, with superficial myometrial invasion in representative sections.

Drs. at - am

Clinical History:

-year-old female with endometrial cancer.

Gross Description:

Received are three appropriately labeled containers.

Container A is received fresh for frozen section and is additionally labeled "uterus, cervix, bilateral tubes and ovaries." It holds a 120.1 gram, 9.4 x 6.0 x 4.5 cm uterus with attached bilateral adnexa. The serosa is tan/pink, smooth and glistening. The parametrial soft tissue margin is differentially inked: posterior/black, anterior/blue. The 2.5 x 2.2 cm ectocervix has a 0.9 cm patent os. The ectocervical mucosa is tan/red and erythematous. The 2.2 cm long endocervical canal is tan and trabeculated. On the right side of the endometrium involving both the anterior and posterior walls there is an 8.0 x 3.5 x 1.5 cm tan firm exophytic mass. The mass on section appears to superficially invade into the underlying myometrium (FSA1). The mass comes to within 1.5 cm of the serosal surface and is 1.0 cm from the lower uterine segment. The remainder of the endometrium is tan, firm, and 0.1 cm thick. The myometrium is tan, firm and up to 1.5 cm. No myometrial nodules are present. No additional abnormalities are noted.

The right ovary is 2.0 x 1.0 x 0.8 cm. The outer surface is tan/pink and focally red/brown. On section, the cut surface is tan and smooth. The 3 cm in length x 0.4 cm in diameter fimbriated fallopian tube has a tan smooth outer surface. On section, the lumen is patent.

The left ovary is 2.0 x 1.1 x 0.6 cm. The outer surface is tan and smooth. On section, the cut surface is tan/yellow and unremarkable. The 2.2 cm in length x 0.4 cm in diameter attached fimbriated fallopian tube has a tan, smooth outer surface and on section has a patent, unremarkable lumen.

Block summary:

- FSA1 - frozen section remnant
- A1-A2 - anterior cervix, lower uterine segment, bisected section
- A3-A4 - tumor, anterior wall, full thickness
- A5-A6 - tumor, posterior wall, full thickness
- A7 - posterior cervix, lower uterine segment, bisected section
- A8 - uninvolved endomyometrium, posterior wall

A9 - right ovary and fallopian tube
A10 - left ovary and fallopian tube

Container B is additionally labeled "right pelvic lymph node."
It holds a laparoscopic bag filled with a 5.5 x 3.7 x 1.0 cm aggregate of yellow fatty tissue. Within the tissue there are several palpable lymph node candidates, the largest is 2.5 cm in greatest dimension.

Block summary:

B1 - multiple lymph node candidates
B2,B3 - one lymph node candidate, bisected
B4-B8 - adipose tissue, NTR

Container C is additionally labeled "left pelvic lymph node." It holds a laparoscopic bag filled with a 6.2 x 3.0 x 1.1 cm aggregate of yellow lobulated tissue. Within the tissue there are multiple lymph node candidates, the largest is 3.0 cm.

Block summary:

C1 - multiple lymph node candidates
C2-C4 - one lymph node candidate, each cassette, each bisected
C5-C6 - one lymph node candidate, bisected
C7-C9 - adipose tissue, NTR