

1C8-0-3  
 adenocarcinoma, endometrioid, NOS 8380/3  
 Site: endometrium C541 2/25/11

Criteria	Yes	No
Diagnosis Discrepancy		
Primary Tumor Site Discrepancy		
HIPAA Discrepancy		
Prior Malignancy History		
Dual/Synchronous Primary Noted		
Case is (circle):		
Reviewer Initials	2/25/11	
Date Reviewed		

Surg Path

CLINICAL HISTORY:

Malignant neocorpus uteri-182.0.

GROSS EXAMINATION:

A. "Uterus, cervix, bilateral tubes and ovaries (AF1-2)". Received fresh is a 99 gram uterus (9 x 6 x 3 cm) with attached left ovary (1.9 x 1.8 x 0.8 cm), left fimbriated fallopian tube (3.6 cm long x 0.4 cm in diameter, right ovary (2.6 x 1.5 x 1.2 cm) and right fimbriated fallopian tube (3.2 cm long x 0.5 cm in diameter). The endometrial cavity is 2.7 cm from cornu to cornu and expands 4.8 cm and contains an ill-defined fundal soft gray-tan endometrial mass (1.3 x 1 x 0.7 cm) that slightly traces into the anterior and posterior endometrium, 4.5 cm and 3.1 cm from the anterior and posterior lower uterine segments respectively. The mass penetrates 0.2 cm into a 1.5 cm thick trabeculated myometrium that contains a single white whorled intramural nodule (1 x 1 x 0.9 cm). The mass was partially frozen as representative AF1. The remainder of the endometrium is red-tan and diffusely coarse (0.1 cm thick) with a second soft gray-tan mass (1.6 x 1.3 x 0.2 cm) that is 1.1 cm from the lower uterine segment. The second mass extends 0.2 cm into the underlying myometrium. The uterine serosa is pink-tan, smooth and glistening. The exocervix is red-white and smooth with diffuse erythema surrounding a 1 cm cervical os that leads into a 2.5 cm trabeculated endocervical canal. The left and right ovary are grossly unremarkable. The left and right fimbriated fallopian tubes are both discontinuous and grossly unremarkable.

BLOCK SUMMARY:

- A1- frozen section remnant from AF1
- A2- anterior endomyometrium full thickness with mass
- A3- posterior endomyometrium full thickness with mass
- A4- anterior endomyometrium full thickness with second mass
- A5- perpendicular section of anterior lower uterine segment with second mass
- A6- perpendicular section of posterior lower uterine segment
- A7- intramural nodule
- A8- anterior cervix
- A9- posterior cervix
- A10- left tube and ovary
- A11- right tube and ovary
- A12- remnant from AF2 which is the deep tissue to from AF1 which was not frozen due to "chucking out" during frozen section.

B. "Left pelvic lymph node". Received unfixed and placed in formalin is a 9.3 x 5.8 x 2.4 cm aggregate of adipose tissue that has eight lymph node candidates ranging from 0.6 x 0.5 x 0.5 cm up to 2.1 x 1.7 x 1.6 cm. Each lymph node has a fatty cut surface.

BLOCK SUMMARY:

- B1- two lymph node candidates, one is inked black and bisected
- B2- one lymph node candidate bisected
- B3- one lymph node candidate bisected
- B4- one lymph node candidate bisected
- B5- one lymph node candidate bisected
- B6- one lymph node candidate bisected
- B7-8- one lymph node candidate serially sectioned

C. "Right pelvic lymph nodes". Received unfixed and placed in formalin is a 7.3 x 5.2 x 1.8 cm aggregate of adipose tissue that has eleven lymph node candidates ranging from 1 x 0.8 x 0.4 cm up to 2.1 x 1.2 x 0.5 cm. Each lymph node has a fatty cut surface.

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 TCGA-B5-A110-01A-PR

Redacted



## BLOCK SUMMARY:

- C1- three lymph node candidates
- C2- one lymph node candidate
- C3- one lymph node candidate
- C4- one lymph node candidate
- C5- two lymph node candidates, each bisected and one inked black
- C6- one lymph node candidate bisected
- C7- one lymph node candidate bisected
- C8- one lymph node candidate bisected

## INTRA OPERATIVE CONSULTATION:

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

- AF1 (mass at fundus): adenocarcinoma with mucinous features,  
FIGO grade 1, ?2 at most
- AF2 not frozen

## MICROSCOPIC EXAMINATION:

Microscopic examination is performed.

## PATHOLOGIC STAGE:

PROCEDURE: HYSTERECTOMY, OOPHORECTOMY & LYMPHADENECTOMY

PATHOLOGIC STAGE (AJCC 6th Edition): pT1B pN0 pMX

NOTE: Information on pathology stage and the operative procedure is transmitted to this Institution's Cancer Registry as required for accreditation by the Commission on Cancer. Pathology stage is based solely upon the current tissue specimen being evaluated, and does not incorporate information on any specimens submitted separately to our Cytology section, past pathology information, imaging studies, or clinical or operative findings. Pathology stage is only a component to be considered in determining the clinical stage, and should not be confused with nor substituted for it. The exact operative procedure is available in the surgeon's operative report.

## DIAGNOSIS:

## A. UTERUS: 99 GRAMS

## ENDOMETRIUM:

TUMOR SITE: FUNDUS

HISTOLOGIC TYPE: ENDOMETRIOID ADENOCARCINOMA.

FIGO GRADE: 1

TUMOR SIZE: 1.3 X 1 X 0.7 CM.

MAXIMUM DEPTH OF MYOMETRIAL INVASION: 0.2 CM, IN A 1.5 THICK WALL.

LYMPHATIC/VASCULAR INVASION: NEGATIVE

ADJACENT NON-NEOPLASTIC ENDOMETRIUM: ATROPHIC

REMAINING MYOMETRIUM: LEIOMYOMA, SMALL

CERVIX: NO PATHOLOGIC DIAGNOSIS.

SEROSA: NO PATHOLOGIC DIAGNOSIS.

SPECIMEN MARGINS: NOT INVOLVED

## THE FOLLOWING SPECIMENS ARE FREE OF TUMOR:

- A. OVARIES AND FALLOPIAN TUBES, BILATERAL: NO PATHOLOGIC DIAGNOSIS.
- B. LEFT PELVIC LYMPH NODES: NO TUMOR IN 7 LYMPH NODES (0/7).
- C. RIGHT PELVIC LYMPH NODES: NO TUMOR IN 11 LYMPH NODES (0/11).

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

## CI ADDENDUM 1:

Please see Image Cytometry Report tests.

or results of supplementary