

SURGICAL PATHOLOGY REVISED REPORT

ICD-O-3

Adenocarcinoma, endometrioid, nos 8380/3

Site: endometrium C54.1

Case Number :

1/31/11
hu

Diagnosis:

A: Lymph nodes, right periaortic, removal
- Six lymph nodes, no tumor seen (0/6).

B: Lymph nodes, left periaortic, removal
- Four lymph nodes, no tumor seen (0/4).

C: Uterus and cervix, robotically assisted hysterectomy and bilateral salpingo-oophorectomy

Location of tumor: endometrium

Histologic type: endometrioid adenocarcinoma

Histologic grade (FIGO): FIGO grade 3 (architectural grade 2, nuclear grade 3)

Extent of invasion:

Myometrial invasion: Tumor is confined to the mucosa

Depth: 0% Wall thickness: 3.5 cm Percent: 0%

Serosal involvement: absent

Lower uterine segment involvement: present, involving mucosa only

Cervical involvement: absent

Adnexal involvement (see below): absent

Other sites: not applicable

Cervical/vaginal margin and distance: widely free of tumor

Lymphovascular Space Invasion: absent

Regional lymph nodes (see other specimens):

Total number involved: 0

Total number examined: 25

Criteria	Yes	No
Diagnosis Discrepancy		<input checked="" type="checkbox"/>
Primary Tumor Site Discrepancy		<input checked="" type="checkbox"/>
HPAA Discrepancy		<input checked="" type="checkbox"/>
Prior Malignancy History		<input checked="" type="checkbox"/>
Dual/Synchronous Primary Noted		<input checked="" type="checkbox"/>
Case is (circle):	QUALIFIED	DISQUALIFIED
Reviewer Initials	KMI	hu
Date Reviewed:		1/31/11

UUID:505FE080-068C-4B2A-AA40-4657FB2E0425
TCGA-EY-A1GJ-01A-PR

Redacted



Other Pathologic findings:

- Endometrial tumor is present overlying submucosal leiomyomas
- Leiomyomas, intramural and submucosal, with hyalinization, ranging in size from 0.5 to 1.9 cm.
- Uninvolved endometrium shows endometrial atrophy.

Tumor estrogen receptor and progesterone receptor immunohistochemistry results: Pending (C6); final results will be issued in an addendum report.

AJCC Pathologic stage: pT1a pN0 pMx

FIGO (2008 classification) Stage grouping: 1A

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:

- Atrophic ovary, no tumor seen.

Ovary, left, oophorectomy:

- Atrophic ovary, no tumor seen.

Fallopian tube, right, salpingectomy:

- No tumor seen.

Fallopian tube, left, salpingectomy:

- No tumor seen.

D: Lymph nodes, right pelvic, removal

- Seven lymph nodes, no tumor seen (0/7).

E: Lymph nodes, left pelvic, removal

- Eight lymph nodes, no tumor seen (0/8).

Clinical History:

The patient is with grade 3 endometrial cancer.

Gross Description:

Specimen A is received in a formalin-filled container, additionally labeled "right periaortic lymph nodes" and contains an aggregate of fibrofatty tissue that measures 3 x 3 x 2 cm. It will be palpated for lymph node candidates and submitted per the block summary.

Block Summary:

A1 - one lymph node candidate, bisected

A2 - one lymph node candidate, bisected

A3 - one lymph node candidate, bisected
A4 - one lymph node candidate, bisected
A5-A6 - remainder of fibrofatty tissue,

Specimen B is received in a formalin-filled container, additionally labeled "left periaortic nodes" and consists of a 3 x 1 x 1 cm aggregate of fibrofatty tissue, which will be palpated for lymph nodes and submitted per the block summary.

Block Summary:

B1 - one candidate lymph node, bisected
B2 - one lymph node candidate, bisected
B3 - remainder of fibrofatty tissue,

C: Received is one appropriately labeled container.

Adnexa: Present

Weight: 159.5 grams

Shape: Pear-shaped

Dimensions:

height: 10.5 cm

anterior to posterior width: 3.7 cm

breadth at fundus: 6.5 cm

Serosa: Tan/pink and unremarkable

Cervix:

length of endocervical canal: 3 cm

ectocervix: Tan/white and unremarkable

endocervix: Tan/yellow and trabeculated

Endomyometrium:

length of endometrial cavity: 4.5 cm

width of endometrial cavity at fundus: 4.5 cm

tumor findings:

dimensions: There are two separate lesions. Both are located on top of what appeared to be intramyometrial leiomyoma. Both are located on the anterior surface of the uterus. The more inferior tumor is polypoid in nature. It measures 1.5 x 1 cm and is raised 1 cm off the endometrial surface. A separate fragment of polypoid tissue is received with the specimen measuring 3 x 2 x .2 cm. It appears to have been continuous with this segment attached to the uterus, prior to removal. The second tumor candidate area measures 2.5 x 1.5 cm. It is tan/white and friable. But not raised off the endometrial surface. It does not appear to grossly communicate with the polypoid segment mentioned previously.

appearance: Please see above

location and extent: Please see above

myometrial invasion: Inner one-half

thickness of myometrial wall at deepest gross invasion: The myometrium at this portion measures 1.5 cm, but including the leiomyoma, measures up to 3.5 cm.

other findings or comments: Multiple leiomyoma are noted in the myometrium. They range in size from .5 to 1.9 cm. They are tan/white and whorled on cut section. No areas of hemorrhage or necrosis are noted grossly.

Adnexa:

Right ovary:

dimensions: 3.2 x 1.5 x .7 cm

external surface: Tan/white and cerebriform

cut surface: Tan/yellow and solid

Right fallopian tube:

dimensions: 4.5 x .5 cm

other findings: None

Left ovary:

dimensions: 4.2 x 1.0 x 1.0 cm

external surface: Tan/white and cerebriform

cut surface: Tan/yellow and solid

Left fallopian tube:

dimensions: 5.5 x .5 cm

other findings: None

Lymph nodes: Submitted separately

Other comments: None

Digital photograph taken: No taken

Tissue submitted for special investigations: No

Block Summary:

C1 - anterior cervix

C2-C3 - full thickness section, anterior lower uterine segment (at area of most inferior candidate tumor section, includes leiomyoma)

C4-C7 - additional representative sections, not full thickness of the most inferior candidate tumor section (block C7 contains entire separately received detached fragments likely to have abutted this area in vivo)

C8-C9 - full thickness section, mid portion, anterior corpus (includes second, more superior candidate tumor)

C10 - two additional representative sections of candidate tumor from C8-C9

C11-C12 - anterior upper corpus, full thickness section, bisected, also includes more superior noted tumor

C13 - posterior cervix

C14 - posterior lower uterine segment

C15 - posterior mid corpus

C16 - posterior upper corpus

C17 - right tube and ovary

C18 - left tube and ovary

Specimen D is received in formalin labeled "right pelvic nodes" and consists of a 5 x 4 x 3 cm aggregate of fibrofatty tissue, which will be palpated for lymph nodes and submitted per the block summary.

Block Summary:

D1 - one candidate lymph node, bisected

D2 - one candidate lymph node, bisected

D3 - one candidate lymph node, bisected

D4-D5 - remainder of fibrofatty tissue,

Specimen E is received in a formalin-filled container labeled "left pelvic nodes" and consists of an unoriented fibrofatty tissue fragment that measures 6 x 5 x 2 cm. It will be palpated for lymph nodes and submitted per the block summary.

Block Summary:

E1-E2 - one candidate lymph node, bisected (greatest dimension is 3.0 cm)

E3 - one candidate lymph node, bisected

E4 - one candidate lymph node, bisected

E5 - one candidate lymph node, bisected

E6 - remainder of fibrofatty tissue.

Grossing Pathologist:

Light Microscopy:

Light microscopic examination is performed by Dr.

Appropriate internal and/or external positive and negative controls have been evaluated. Some of the immunohistochemical reagents used in this case may be classified as analyte specific reagents (ASR). These were developed and have performance characteristics determined by the

manufacturer. These reagents have not been cleared or approved by the US Food and Drug Administration (FDA). The FDA has determined that such clearance or approval is not necessary. These tests are used for clinical purposes. They should not be regarded as investigational or for research. This laboratory is certified under the Clinical Laboratory Improvement Amendments of 1988 (CLIA-88) as qualified to perform high complexity clinical laboratory testing.

Signature

Resident Physician:

Attending Pathologist: I have personally conducted the evaluation of the above specimens and have rendered the above diagnosis(es).

Procedures/Addenda:

Addendum

Addendum

A representative block of tumor is submitted for immunohistochemical evaluation (C6). The tumor is ER positive (2+, 20%), PR weakly positive (2+, 5%), and P53 diffusely and strongly positive (3+, 100%).

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manufacturer. These reagents have not been cleared or approved by the US Food and Drug Administration (FDA). The FDA has determined that such clearance or approval is not necessary. These tests are used for clinical purposes. They should not be regarded as investigational or for research. This laboratory is certified under the Clinical Laboratory Improvement Amendments of 1988 (CLIA-88) as qualified to perform high complexity clinical laboratory testing.