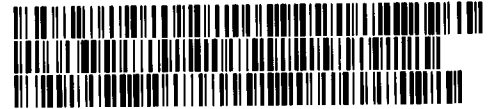


Criteria	Yes	No
Diagnosis Discrepancy		<input checked="" type="checkbox"/>
Primary Tumor Site Discrepancy		<input checked="" type="checkbox"/>
HPAA Discrepancy		<input checked="" type="checkbox"/>
Prior Malignancy History		<input checked="" type="checkbox"/>
Dual/Synchronous Primary NOTED		
Case Is (circle): QUALIFIED DISQUALIFIED		
Reviewer Initials: <i>BB</i> Date Reviewed: <i>6/9/11</i>		

UID: 76630DF8-2D08-4CF8-8B07-ACCE872B3ED1

TCGA-AX-A2H7-01A-PR

Redacted



Patient Name: [REDACTED]  
DOB: [REDACTED]

## Surgical Pathology Report

1CD-0-3

adenocarcinoma, endometrioid, NOS

8380/3

Site: endometrium c54.1

lw  
6/19/11

### SURGICAL PATHOLOGY REPORT

FINAL

Patient Name: [REDACTED]

Address: [REDACTED]

Gender: [REDACTED]

DOB: [REDACTED]

Service: [REDACTED]

Location: [REDACTED]

MRN: [REDACTED]

Hospital #: [REDACTED]

Patient Type: [REDACTED]

Accession #: [REDACTED]

Taken: [REDACTED]

Received: [REDACTED]

Accessioned: [REDACTED]

Reported: [REDACTED]

Physician(s): [REDACTED]

#### DIAGNOSIS:

A. UTERUS, CERVIX, BILATERAL FALLOPIAN TUBES AND OVARIES, TOTAL ABDOMINAL HYSTERECTOMY AND BILATERAL SALPINGO-OOPHORECTOMY

-POORLY DIFFERENTIATED (FIGO GRADE 3) ENDOMETRIOID ADENOCARCINOMA OF THE ENDOMETRIUM

-THE CARCINOMA INVADES THE MYOMETRIUM TO A DEPTH OF 1.13 CM IN AN AREA WHERE THE MYOMETRIUM MEASURES 1.2 CM IN THICKNESS (WITHIN 1 MM TO THE SEROSA)

-FOCAL LYMPHOVASCULAR SPACE INVASION IS IDENTIFIED

-MYOMETRIUM WITH LEIOMYOMA

-CERVIX IS NEGATIVE FOR TUMOR

-BILATERAL OVARIES AND FALLOPIAN TUBES NEGATIVE FOR TUMOR

B. LYMPH NODES, LEFT EXTERNAL ILIAC, LYMPH NODE DISSECTION

-FOUR LYMPH NODES NEGATIVE FOR TUMOR (0/4)

C. LYMPH NODES, LEFT OBTURATOR, LYMPH NODE DISSECTION

-THREE LYMPH NODES NEGATIVE FOR TUMOR (0/3)

D. LYMPH NODES, RIGHT ILIAC, LYMPH NODE DISSECTION

-FOUR LYMPH NODES NEGATIVE FOR TUMOR (0/4)

E. LYMPH NODES, RIGHT OBTURATOR, LYMPH NODE DISSECTION

-ONE LYMPH NODE NEGATIVE FOR TUMOR (0/1)

F. LYMPH NODES, LEFT PERIAORTIC, LYMPH NODE DISSECTION

-TWO LYMPH NODES NEGATIVE FOR TUMOR (0/2)

G. LYMPH NODES, LEFT PERIAORTIC, LYMPH NODE DISSECTION

-ONE LYMPH NODE NEGATIVE FOR TUMOR (0/1)

H. OMENTUM, BIOPSY

-FIBROADIPOSE TISSUE NEGATIVE FOR TUMOR

By this signature, I attest that the above diagnosis is based upon my personal examination of the slides (and/or other material indicated in the diagnosis).

Page 1 of 4

Patient Name: [REDACTED]  
DOB: [REDACTED]

## Surgical Pathology Report

### SURGICAL PATHOLOGY REPORT

\*\*\*Report Electronically Reviewed and Signed Out B

#### Intraoperative Consultation:

An intraoperative non-microscopic consultation was obtained and interpreted as: "Called to pick up 'uterus, cervix, and bilateral tubes and ovaries,' consisting of a 113 gram specimen. The uterus measures 9 cm from inferior to superior, 5.7 cm from cornu to cornu and 4 cm anterior to posterior. Opened to show an endometrial tumor that measures 4.5 x 2.7 cm with a maximal thickness of 1.6 cm. Tissue taken for study. Remainder for permanents," by

#### Microscopic Description and Comment:

Microscopic examination substantiates the above cited diagnosis.

#### History:

The patient is a 68-year-old woman with FIGO grade III endometrial cancer. Operative procedure: Not stated.

#### Specimen(s) Received:

- A: UTERUS, LEFT FALLOPIAN TUBE, LEFT OVARY, RIGHT FALLOPIAN TUBE, RIGHT OVARY, AND CERVIX
- B: LYMPH NODES, LEFT EXTERNAL ILIAC
- C: LYMPH NODES, LEFT OBTURATOR
- D: LYMPH NODES, RIGHT ILIAC
- E: LYMPH NODES, RIGHT OBTURATOR
- F: LYMPH NODES, LEFT PERIAORTIC
- G: LYMPH NODES, LEFT PERIAORTIC
- H: OMENTUM

#### Gross Description:

The specimens are received in eight formalin-filled containers, each labeled "uterus, cervix, bilateral tubes and ovaries." The first container is labeled "uterus, cervix, bilateral tubes and ovaries." It contains a uterus with attached cervix and bilateral fallopian tubes weighing 114 grams. The uterus and cervix measure 8.4 cm from superior to inferior x 5.5 cm from cornu to cornu x 4.5 cm from anterior to posterior. The cervix itself measures 3.2 x 3.5 x 2.5 cm. The serosal surface of the uterus is tan-pink to purple and unremarkable. The ectocervix measures 3.0 x 2.8 cm. The cervical os is slit-like, measuring 0.9 x 0.3 cm. The ectocervix is tan-pink and slightly hemorrhagic. Nabothian cysts are noted at the 6 to 8 o'clock position. The uterus and cervix have been previously opened. The endometrial cavity is expanded by a tumor mass. The endometrial cavity measures 4.0 x 5.0 cm. The tumor measures 4.2 x 4.1 x 3.3 cm. The tumor involves both the anterior and the posterior endometrium. It is predominantly on the anterior endometrium. The tumor is tan-yellow to gray and polypoid. Serially sectioning through the tumor reveals another area of significant myometrial invasion, where the tumor appears to invade into the myometrium at a depth of 1.1 cm, where the entire myometrial wall thickness is 1.2 cm. A circumscribed nodular mass is located within the myometrium of the anterior, lower, and mid-uterine segment. On cut surface, it has a white-pink, whorled texture. It measures 1.5 x 0.9 x 1.3 cm. It most resembles a well circumscribed leiomyoma. The portion of myometrium not involved by tumor measures 1.4 cm in thickness. The remainder of the endometrium that does not appear to be involved by tumor measures - 0.2 cm in thickness. The tumor approaches the lower uterine segment at the border between the middle and lower uterine segment. It lies 1.7 cm from the endocervical canal. The endocervical canal measures 2.2 cm in length x 1.4 cm. The endocervical mucosa is tan-pink and contains some endocervical cysts. The right ovary measures 2.2 x 1.4 x 1.0 cm. The serosal surface is tan-pink to yellow and unremarkable. The right fallopian tube measures 5.2 cm in length with an average diameter of 0.5 cm. There are multiple associated paratubal cysts, ranging from 0.1 x 0.2 x < 0.1 cm to 0.5 x 0.3 x 0.3 cm. The fallopian tube lumen is pinpoint and the fallopian tube wall thickness is 0.2 cm. The right ovary is serially sectioned and reveals unremarkable ovarian tissue. The left ovary measures 2.3 x 1.5 x 0.9 cm. The serosal

Patient Name: [REDACTED]  
DOB: [REDACTED]

## Surgical Pathology Report

Final

### SURGICAL PATHOLOGY REPORT

surface is tan-yellow and unremarkable. The left ovary is serially sectioned and reveals unremarkable ovarian parenchyma. The left fallopian tube measures 5.5 cm in length with an average diameter of 0.5 cm. There are multiple associated paratubal cysts, ranging from 0.1 x 0.1 x 0.1 cm to 1.5 x 1.3 x 1.0 cm. The lumen of the fallopian tube is pinpoint, and the wall thickness measures 0.2 cm. Labeled A1 - anterior ectocervix and endocervix at 12 o'clock; A2 - posterior ectocervix and endocervix at 6-7 o'clock; A3 - anterior lower and middle uterine segment where the tumor most closely approaches the endocervical canal; A4, A5 - contiguous sections of middle and upper uterine segment; A6 to A8 - additional sections of tumor in the anterior endometrium, where it appears to most closely approach the serosal surface; A9 - anterior endomyometrium, containing circumscribed nodule; A10, A11 - contiguous sections of posterior lower, mid, to upper uterine segments; A12 - right ovary and fallopian tube including paratubal cyst; A13 - left ovary and fallopian tube including paratubal cyst. Jar 4.

The second container is labeled "left external iliac lymph nodes." It contains two yellow-maroon, fibrofatty, soft tissue fragments, measuring 2.0 x 1.5 x 0.4 cm and 4.3 x 3.8 x 0.8 cm. Within this tissue, four possible lymph nodes are identified, ranging from 0.7 x 0.3 x 0.2 cm to 3.0 x 1.8 x 0.8 cm. The possible lymph nodes are entirely submitted in B1, B2 - one lymph node bisected; B3 - three possible lymph nodes. Jar 1.

The third container is labeled "left obturator lymph nodes." It contains a yellow to maroon, fibrofatty, soft tissue fragment, measuring 3.7 x 2.0 x 0.4 cm. Within this tissue, three possible lymph nodes are identified, ranging from 0.3 x 0.2 x 0.1 cm to 2.3 x 1.2 x 0.4 cm. The lymph nodes are entirely submitted in cassette C1 - one possible lymph node; C2 - two possible lymph nodes. Jar 1.

The fourth container is labeled "right external iliac lymph node." It contains within this tissue, five possible lymph nodes, ranging from 0.4 x 0.2 x 0.3 cm to 1.2 x 0.9 x 0.3 cm. The lymph nodes are entirely submitted. Labeled D1 - three possible lymph nodes; D2 - two possible lymph nodes. Jar 1.

The fifth container is labeled "right obturator lymph nodes." It contains multiple fragments of maroon to yellow fibrofatty tissue, measuring 1.5 x 1.5 x 0.8 cm in aggregate. Within this tissue, five possible lymph nodes are identified measuring 0.2 x 0.1 x 0.1 cm to 2.0 x 0.7 x 0.3 cm. The lymph nodes are entirely submitted in cassettes E1 - one possible lymph node; and E2 - four possible lymph nodes. Jar 1.

The sixth container is labeled "right periaortic lymph nodes." It contains two, yellow to maroon, fibrofatty, soft tissue fragments, measuring 1.2 x 1.0 x 0.4 cm and 2.2 x 1.3 x 0.8 cm. Within this tissue, two possible lymph nodes are identified, measuring 1.2 x 1.0 x 0.3 cm and 2.1 x 1.3 x 0.4 cm. The lymph nodes are entirely submitted in cassette F1. Jar 1.

The seventh container is labeled "left periaortic lymph nodes." It contains a yellow to maroon, fibrofatty, soft tissue fragment, measuring 1.6 x 1.5 x 0.4 cm. Within this tissue, one possible lymph node is identified, measuring 0.9 x 0.6 x 0.3 cm. Labeled G1 - one possible lymph node entirely submitted. Jar 1.

The eighth container is labeled "omentum." It contains a portion of yellow to maroon omentum measuring 4.8 x 4.6 x 1.3 cm. Sectioning through the tissue reveals the same. No gross tumor implants are identified. Entirely submitted in H1 to H5. Jar 0.

U.

### SYNOPTIC REPORTING FORM FOR MALIGNANT ENDOMETRIAL TUMORS

#### HISTOPATHOLOGIC TYPE

The histologic diagnosis is adenocarcinoma, endometrioid type

#### FIGO GRADE

The FIGO Grade of the tumor is 51 to 100% solid growth pattern (FIII)

#### TUMOR INVASION

Invasive tumor is present with invasion of the outer 1/3 of the myometrium

#### TUMOR SIZE

The tumor invades to a depth of 11.3 mm

Patient Name: [REDACTED]  
DOB: [REDACTED]

## Surgical Pathology Report

### SURGICAL PATHOLOGY REPORT

The myometrial thickness is 12 mm

#### ENDOCERVICAL INVOLVEMENT

The endocervix is not involved by tumor

#### LYMPHVASCULAR SPACE INVASION

Lymphovascular space invasion by tumor is present but limited in scope

#### REGIONAL LYMPH NODES (N)

No regional lymph node metastasis (N0)

#### DISTANT METASTASIS (M)

Distant metastasis cannot be assessed (MX)

#### PRIMARY TUMOR (TNM Category/FIGO Stage)

Tumor invades one-half or more of the myometrium (T1c/IC)

#### STAGE GROUPING

pT1cN0Mx

The pathologic stage assigned here should be regarded as provisional, and may change after integration of clinical data not provided with this specimen.

### Surgical Pathology report is available on-line on

The performance characteristics of using microarray-based assays, including the ability to detect copy number changes, are not yet fully established. The use of microarray-based assays for clinical purposes is not yet established.

Microarray-based assays may only be performed in a facility that is certified by the College of American Pathologists (CAP) for microarray-based assays.

at a high-resolution microarray assay. The use of microarray-based assays for clinical purposes is not yet established. The use of microarray-based assays for clinical purposes is not yet established.

Microarray-based assays may only be performed in a facility that is certified by the College of American Pathologists (CAP) for microarray-based assays.

This report was generated and its performance characteristics determined by the Surgical Pathology Department of [REDACTED] Hospital. It was not used for clinical purposes.