

Surg Path

UUID: E4AD1574-653C-444D-BB43-B4DE7018109F
TCGA-B5-A3F9-01A-PR

Redacted

Criteria	Yes	No
Diagnosis Discrepancy		<input checked="" type="checkbox"/>
Primary Tumor Site Discrepancy		<input checked="" type="checkbox"/>
HIPAA Discrepancy		<input checked="" type="checkbox"/>
Prior Malignancy History		<input checked="" type="checkbox"/>
Dual/Synchronous Primary	<input checked="" type="checkbox"/>	
Case is (circle):	QUALIFIED	DISQUALIFIED
Reviewer Initials	EW	11/13/14

CLINICAL HISTORY:

Malignant neoplasm corpus uteri.

GROSS EXAMINATION:

A. "Omentum", unfixed, transferred to formalin. Three fragments of adipose tissue measuring 9.0 x 8.0 x 2.0 cm in aggregate are sectioned to reveal no masses. Representative in block A1.

B. "Right tube and ovary", unfixed, transferred to formalin. A 13.7 gram adnexa consists of a 2.5 x 2.0 x 1.5 cm grossly unremarkable ovary and attached 4.0 cm long, 0.4 cm in diameter unremarkable fallopian tube. Representative in block B1.

C. "Left ovary", unfixed, transferred to formalin. A 7.9 gram, 2.5 x 2.5 x 2.0 cm tan ovary contains moderate amount of fibrous adhesions on the surface. Representative in block C1. No fallopian tube is identified.

D. "Uterus", unfixed, transferred to formalin. A 177.0 gram, 7.0 x 6.5 x 5.0 cm supracervical uterus is received opened. The serosa is disrupted and contains numerous adhesions at the fundus. The orientation is unable to determine. The 4.5 x 2.5 cm endometrial cavity is lined by tan, shaggy and sectioning demonstrates by multiple intramural leiomyomata from 1.0 to 4.0 cm in diameter. The tumor measures up to 0.8 cm in a 3.2 cm thick wall uninvolved by leiomyoma. The tumor extends to one margin while there is 0.8 cm from the opposite margin.

BLOCK SUMMARY:

- D1-D2 full thickness tumor and leiomyoma in one half.
- D3 tumor and margin in same half.
- D4-D5 full thickness endomyometrium in opposite half with serosal adhesions.
- D6- tumor and margin opposite half.
- D7 tumor overlying leiomyoma.
- D8 right parametrium
- D9 left parametrium

E. "Cervix #1", unfixed, transferred to formalin. A 68.2 gram, 6.0 x 5.5 x 5.0 cm lobulated specimen is partially covered by serosa. The remainder is covered by fibrovascular tissue. Sectioning demonstrates a pink, gray, whorled cut surface with multiple cysts from 0.1 cm to 1.0 cm filled with mucin. No definitive uterine anatomy is grossly identified. Representative in blocks E1-E6.

F. "Cervix #2", unfixed, transferred to formalin is a 49 gram, 3.5 x 3.0 x 2.0 cm cervix and 2.0 cm of the lower uterine segment is tan, smooth low uterine segment, tan trabeculated, 3 cm long endocervix. The squamocolumnar junction is distinct. The ectocervix is gray and smooth. There is a possible, attached 0.5 cm vaginal cuff. The attached fibrovascular tissue contains a 1.2 x 1.0 x 1.0 cm pedunculated leiomyoma.

BLOCK SUMMARY:

- F1 vaginal cuff.
- F2-F3 representative of cervix.
- F4 representative lower uterine segment and endocervical canal.
- F5 leiomyoma.

1CD-0-3
Carcinoma, endometrioid, NOS
Site: Endometrium (54.1)
8380/3
11/13/14

[REDACTED]

MICROSCOPIC EXAMINATION:
Microscopic examination is performed.

DIAGNOSIS:

A. "OMENTUM" (BIOPSY):

NEGATIVE FOR MALIGNANCY.

B. "RIGHT OVARY AND FALLOPIAN TUBE" (EXCISION):

NEGATIVE FOR MALIGNANCY.

C. "LEFT OVARY" (EXCISION):

NEGATIVE FOR MALIGNANCY.

D. "UTERUS" (SUPRACERVICAL HYSTERECTOMY):

CARCINOMA OF ENDOMETRIUM:

Histologic type:	ENDOMETRIOID
Histologic (FIGO) grade:	POORLY DIFFERENTIATED (GRADE 3)
Extent of invasion	
- Myometrial invasion:	POSITIVE, INNER-ONE HALF (0.2 CM/3.2 CM)
- Endocervical involvement	
- Surface extension:	NEGATIVE
- Stromal invasion:	NEGATIVE
- Uterine serosa:	NEGATIVE
Margins	NEGATIVE
Vascular invasion:	NEGATIVE
Non-cancer related findings	
- Myometrium:	ADENOMYOSIS, LEIOMYOMAS (LARGEST 4 CM)

E. "CERVIX #1" (EXCISION):

ENDOMETRIOID, SEE NOTE.
NEGATIVE FOR MALIGNANCY.

NOTE: [REDACTED]

F. "CERVIX #2" (EXCISION):

LEIOMYOMA.
NEGATIVE FOR MALIGNANCY.

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

[REDACTED]

[REDACTED]

CI ADDENDUM 1:
Please see Image Cytometry Report: [REDACTED] results of supplementary
tests.

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