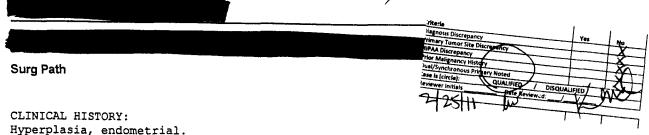
1CB-0-3 Adenocarcinoma indometriorid, NOS 8380/3 Sitz: Indometrium CS4.1 2/25/11 fu



myperprasta, endome

GROSS EXAMINATION:

A. "Uterus and cervix (AF1)", received is a 256 gram, $12.5 \times 8.5 \times 5.5 \text{ cm}$ uterus (cervix 3.6 cm diameter; cervical os 0.8 cm diameter) which is bivalved to reveal a $6.5 \times 5 \text{ cm}$ uterine cavity lined by diffusely thickened, shaggy endometrium (up to 1.6 cm thick anteriorly and 1.4 cm thick posteriorly) that extends into both anterior and posterior lower uterine segments and does not grossly invade the myometrium. A $2.5 \times 2 \text{ cm}$ area of posterior endometrium features flattening and white fibrous scarring (1.6 cm from the lower uterine segment). Representative anterior endomyometrium is frozen as AF1. The myometrium (3.1 cm maximal thickness) is diffusely trabeculated. Attached to the posterior cervix is a $3.2 \times 1.6 \times 0.2 \text{ cm}$ flap of unremarkable vaginal epithelium. The uterine serosal surface is unremarkable, and the ectocervix exhibits multiple pink wart-like nodules (0.1 to 0.2 cm in greatest dimension), more numerous on the anterior cervix.

BLOCK SUMMARY:

Al- frozen section remnant AFI, representative anterior endomyometrium

A2- tangential posterior vaginal flap margin

A3- anterior cervix

A4- posterior cervix

A5- anterior lower uterine segment

A6- posterior lower uterine segment (disrupted during sectioning)

A7-8- anterior endomyometrium, full thickness, bisected

A9-10- additional anterior endometrium

All-12- posterior endomyometrium, full thickness, bisected

Al3-14- additional posterior endometrium

BLOCK SUMMARY: B1- cyst wall

B2- ovary

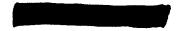
B3- fallopian tube

TCGA-BS-A11M-01A-PR Redacted

C. "Left tube and ovary", received is a 14 gram salpingo-oophorectomy specimen (ovary $3.1 \times 2.1 \times 1.8$ cm; fallopian tube 4.8 cm long $\times 0.5$ cm diameter). The ovary has a roughened pink-tan cerebriform serosal surface and is sectioned to reveal several cortical serous fluid-filled cyst up to 0.4 cm in greatest dimension. The fallopian tube has an unremarkable serosal surface and is sectioned to reveal an unremarkable patent lumen. Two paratubal serous fluid-filled cyst (up to 0.7 cm in greatest dimension) are noted. Ovary submitted in block C1, fallopian tube in block C2.

D. "Posterior vagina", received is a 1.7 x 1.2 x 0.5 cm piece of pink-tan tissue with a smooth epithelial lining on one surface bearing blue ink from a

marking pen. The deep margin of the specimen is inked blue, and the specimen is serially sectioned and submitted in blocks D1-2.



INTRA OPERATIVE CONSULTATION:

A. "Uterus and cervix":

AF1 (anterior endomyometrium) - 1 mm myometrial invasion in a 2.5 cm thick wall (Dr.

MICROSCOPIC EXAMINATION:

Microscopic examination is performed.

PATHOLOGIC STAGE:

PROCEDURE: HYSTERECTOMY & OOPHORECTOMY

PATHOLOGIC STAGE (AJCC 6th Edition): pTlB pNX 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: 256 GRAMS

ENDOMETRIUM:

TUMOR SITE: CORPUS

HISTOLOGIC TYPE: ENDOMETRIOID ADENOCARCINOMA.

FIGO GRADE: 1

TUMOR SIZE: DIFFUSE

MAXIMUM DEPTH OF MYOMETRIAL INVASION: 0.1 CM, IN A 2.5 THICK WALL.

LYMPHATIC/VASCULAR INVASION: NONE

ADJACENT NON-NEOPLASTIC ENDOMETRIUM: ENDOMETRIAL INTRAEPITHELIAL

NEOPLASIA (EIN)

REMAINING MYOMETRIUM: NO PATHOLOGIC DIAGNOSIS.

CERVIX: NO PATHOLOGIC DIAGNOSIS. SEROSA: NO PATHOLOGIC DIAGNOSIS. SPECIMEN MARGINS: NOT INVOLVED

- B. RIGHT OVARY AND FALLOPIAN TUBE: NO PATHOLOGIC DIAGNOSIS.
- C. LEFT OVARY AND FALLOPIAN TUBE: NO PATHOLOGIC DIAGNOSIS.
- D. POSTERIOR VAGINA: NO PATHOLOGIC DIAGNOSIS.

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

