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HOLOGY REVISED REPORT

166-0-3
adeno carcinoma, indometriora, Nos
Siti: Endometrium C54.1 8380/3

Diagnosis:

A: Vulva, biopsy

- Skin with hyperkeratosis, marked dermal sclerosis, and chronic inflammation consistent with lichen sclerosus
- Tangential sectioning artifact present
- No evidence of dysplasia, HPV effect, or malignancy
- B: Lymph node, sentinel, periaortic #1, right, biopsy - One lymph node, no tumor seen, based on evaluation of 3 H & E levels per block (0/1)
- C: Lymph node, sentinel, periaortic #2, right, biopsy - One lymph node, no tumor seen, based on evaluation of 3 H & E levels per block (0/1)
- D: Lymph node, sentinel, periaortic #1, left, biopsy - One lymph node, no tumor seen, based on evaluation of 3 H & E levels per block (0/1)
- E: Lymph nodes, periaortic, left, removal - Ten lymph nodes, many which are quite minute, no tumor seen (0/10)
- F: Lymph node, sentinel, pelvic lymph node #1, right, removal - One lymph node, no tumor seen, based on evaluation of 3 H & E levels per block (0/1)
- G: Lymph node, pelvic, sentinel #2, right, biopsy - One lymph node, no tumor seen, based on evaluation of 3 H & E levels per block (0/1)
- H: Lymph node, sentinel, pelvic, left, biopsy - One lymph node, no tumor seen, based on evaluation of 3 H & E levels per block (0/1)
- I: Uterus, cervix, hysterectomy and bilateral salpingooophorectomy

Location of tumor: endometrium

Histologic type: endometrioid adenocarcinoma with focal squamous differentiation (I4)

Criteria	ı		ł	
Diagnosis Discrepancy		Yes	Ne.	
Leitnary Tumor Site Discrepancy			4	_
HIPAA Discrepancy			$+ \sim$	
Price Malignancy History				,
Dual/Synchronous Primary Noted			1 - 8	.
Case is (circle): 1 C QUALIFIED	/) CISQUAL	IFIED 6	 	-
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Histologic grade (FIGO): overall FIGO grade 3 (architectural grade 2, nuclear grade 3) (I4)

Extent of invasion:

Myometrial invasion: Inner half

Depth: 0.5 cm Wall thickness: 1.7 cm

Percent: 29% (I2)

Serosal involvement: absent

Lower uterine segment involvement: absent

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: 37

Other Pathologic findings: none

Tumor estrogen receptor and progesterone receptor immunohistochemistry results: pending; final results will be issued in an addendum report (I4)

AJCC Pathologic stage: pTla pN0 pMx FIGO (2008 classification) Stage grouping: IA

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

J: Soft tissue, pelvic nodes, right, removal
- Thirteen lymph nodes, no tumor seen (0/13)

K: Soft tissue, pelvic nodes, left, removal
- Six lymph nodes, no tumor seen (0/6)

L: Soft tissue, right periaortic nodes, removal - Two lymph nodes, no tumor seen (0/2)

Clinical History: Right vulvar epithelium and grade III endometrial cancer.

Gross Description: Specimen A is labeled " τ and holds a 2 x 2 x 2 mm white firm tissue fragment, Al, τ

Specimen B is labeled ":

" and holds a $1.5 \times 1.1 \times 0.5$ cm yellow firm tissue fragment. The tissue fragment is bisected and submitted in B1,

and holds two fragments of yellow lobulated adipose tissue, 1.6 x 1.5 x 0.5 cm in aggregate. No lymph node tissue is palpated within the fragment, which is submitted in C1,

Specimen D is labeled " and holds a 2.5 x 1.1 x 0.5 cm fragment of yellow firm adipose tissue. The fragment is bisected and submitted in D1,

Specimen E is labeled " and holds a $3.3 \times 2.5 \times 1.5$ cm aggregate of yellow lobulated adipose tissue. Within the fragments are multiple lymph node candidates measuring up to 0.5 cm in greatest dimension. The specimen is submitted in E1-E3,

Specimen F is labeled "1

" and holds a 2.5 \times 2.0 \times 0.6 cm fragment of yellow lobulated adipose tissue. The fragment is bisected and submitted in F1-F2,

Specimen G is labeled ": #2, biopsy" and holds a 1.6 x 1.0 x 0.4 cm tragment of yellow lobulated adipose tissue which is submitted in G1,

Specimen H is labeled " and holds a $1.9 \times 0.4 \times 0.4$ cm fragment of yellow focally cauterized tissue, which is submitted in H1,

Specimen I is received is one appropriately labeled container.

Adnexa: Present Weight: 124.3 grams

Shape: Pear Dimensions: height: 9.4 cm

anterior to posterior width: 4.4 cm

breadth at fundus: 7.0 cm

Serosa: Tan/pink with focal erythema on the anterior wall.

Cervix: 2.7×2.5 cm with a 0.9 cm patent os.

length of endocervical canal: 1.5 cm

ectocervix: Tan/pink with diffuse erythema

endocervix: Tan and trabeculated

Endomyometrium:

length of endometrial cavity: 3.9 cm

width of endometrial cavity at fundus: 2.8 cm

tumor findings:

dimensions: $4.0 \times 3.7 \times 1.2 \text{ cm}$

appearance: Tan/pink soft and exophytic

location and extent: The majority is on the posterior corpus

extending to involve the anterior upper corpus

myometrial invasion: No apparent invasion

thickness of myometrial wall at deepest gross invasion: 2.1 cm other findings or comments: The uninvolved endometrium is tan/firm and up to 0.2 cm thick. The myometrium is focally trabeculated. There is single white rubbery nodule within the posterior wall 0.4 cm in greatest dimension

Adnexa:

Right ovary:

dimensions: $3.1 \times 2.1 \times 1.0 \text{ cm}$

external surface: Tan/pink and glistening cut surface: Tan/white and unremarkable

Right fallopian tube: (Previous tubal ligation)

dimensions: Distal end 1.5 cm in length x 0.4 cm in diameter;

proximal end 1.1 cm in length x 0.4 cm in diameter

other findings: The outer surface is tan/pink and glistening and the lumen is patent.

Left ovary:

dimensions: $2.5 \times 1.1 \times 1.0 \text{ cm}$

external surface: Tan/pink and smooth

cut surface: Tan/white firm and unremarkable

Left fallopian tube:

dimensions: 1.5 cm in length x 0.4 cm in diameter

other findings: The outer surface is tan/pink and glistening and

the cut surface reveals a patent unremarkable lumen.

Lymph nodes: See remaining parts

Other comments:

Digital photograph taken:

Tissue submitted for special investigations: Tissue submitted to tissue procurement.

Block Summary:

- I1 Anterior cervix, lower uterine segment
- I2 Full thickness tumor at fundus
- I3 Tumor anterior wall
- ${\tt I4}$ ${\tt Tumor}$ full thickness posterior wall to include myometrial nodule
- I5 Uninvolved endomyometrium, anterior wall
- I6 Posterior cervix, lower uterine segment
- I7 Right ovary and fallopian tube
- I8 Left ovary and fallopian tube

Specimen J is labeled " " and holds a $9.0 \times 3.6 \times 1.1$ cm aggregate of yellow lobulated adipose tissue. Within the fragments there are multiple lymph node candidates. The largest is 2 cm in greatest dimension. The specimen is submitted in eight cassettes per block summary.

Block Summary:

J1-J6 - Multiple lymph node candidates, each cassette

J7-J8 - One lymph node candidate, bisected

Specimen K is labeled " " and holds multiple fragments of yellow firm adipose tissue, $4.5 \times 4.2 \times 1.5$ cm in aggregate. Both fragments contain multiple lymph node candidates, the largest is 2.2 cm in greatest dimension. The specimen is sampled in 8 cassettes per block summary.

Block Summary:

K1-K3 - Multiple lymph node candidates in each cassette

K4-K5 - One lymph node candidate bisected

K6-K7 - One lymph node candidate bisected

K8 - Adipose tissue, adipose tissue remains in formalin

Specimen L is labeled " $_{\rm r}$ and holds a 7.2 x 3.6 x 0.8 cm aggregate of yellow lobulated adipose tissue fragments. In the fragments there are two lymph node candidates up to 1.5 cm in greatest dimension. The specimen is submitted in four cassettes per block summary.

Block Summary:

L1 - One lymph node candidate L2 - One lymph node candidate L3-L4 - Adipose tissue,

Procedures/Addenda: Addendum

Addendum

Immunostains for ER and PR are performed on a representative block of endometrial tumor (I4). The tumor is ER negative (0) and PR negative (2+, <1%).