adenocarcinoma indometrioned, NOS 8380/3 Sita indometrium C54.1 4/21/11 /h

# **Surgical Pathology Consultation Report**

UUID: 4D919902-FBCE-4AAC-ACD2-38A2F1D8E901
TCGA-FO-A22X-01A-PR Redacted

Gender:

### Specimen(s) Received

- 1. Uterus: Hysterectomy BSO
- 2. Ovary:residual ovey RT side
- 3. Lymph node:Left common Iliac node
- 4. Lymph node: Left External iliac node -QS
- 5. Soft Tissue: Left obtrator
- 6. Lymph node: Right external iliac node
- 7. Soft Tissue: Right obtrator
- 8. Lymph node: Left para aortic node
- 9. Lymph node: Right para aortic node

### Diagnosis

1. Uterus, cervix, bilateral tubes and ovaries, Total hysterectomy and bilateral salpingooophorectomy:

### \*ENDOMETRIAL" ADENOCARCINOMÁ, ENDOMETRIOID TYPE, FIGO GRADE III 💜

Depth: Through myometrium to serosa

Cervix: Negative for glandular and stromal involvement but encroaching on lower uterine

segment

Lymphovascular space invasion: negative (see comment)

Ovary and tubes, bilateral Negative for carcinoma Cystic follicles Tube, right **Endometriosis** 

2. Ovary:residual ovary, right side:

Negative for carcinoma

Cystic follicles

3. Lymph node:Left common lliac node:

Criteria		Yes	No
Diagn isis Discrepant	V		
Primary Tumor Site D	iscrepancy		<del></del>
HIP! A Discrepancy			
Frior Malignancy His	tery		— <b>-</b> -
Durd/Synchronous I'	iman i loted		
Com is FINNU: A	QUALIFILD	CISQUALIFIED	
Reviewer littles	Date Seviewed:		
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Negative for carcinoma, two nodes (0/2)

- 4. Lymph node: Left External iliac node -QS: Negative for carcinoma, three nodes (0/3)
- 5. Soft Tissue: Left obtrator:

Negative for carcinoma, nine nodes (0/9)

- 6. Lymph node: Right external iliac node: Negative for carcinoma, six nodes (0/6)
- 7. Soft Tissue: Right obtrator:

Negative for carcinoma, six nodes (0/6)

- 8. Lymph node: Left para aortic node: Negative for carcinoma, seven nodes (0/7)
- 9. Lymph node: Right para aortic node: Negative for carcinoma, three nodes (0/3)

### **Synoptic Data**

Specimen Type: Total Hysterectomy Tumor Site: Fundus Tumor Size: Cannot be determined (see Comment) Other Organs Present: Lymph nodes ----- MICROSCOPIC ------Histologic Type: Endometrioid adenocarcinoma, not otherwise characterized Histologic Grade: G3: More than 50% nonsquamous solid growth Myometrial Invasion: Invasion Present Greater than 50% myometrial invasion, Myometrial invasion percentage: 100 Cervix Involvement: None LUS Involvement: Yes Venous/Lymphatic Invasion: Absent Nodal Involvement: None Margins: Uninvolved by invasive carcinoma pT3a (IIIA): Tumor involves serosa, parametria, and/or adnexa Primary Tumor (pT): (direct extension or metastasis) Regional Lymph Nodes (pN): pN0: No regional lymph node metastasis Number of regional lymph nodes examined: 36 Number of regional lymph nodes involved: 0 Distant Metatstais (pM): pMX: Distant metastasis cannot be assessed Additional Pathologic Findings: None identified NeoAdjuvant Treatment: Unknown Collaborative Staging Extension: Not applicable

#### Comment

No definitive lymphovascular invasion is identified, but the tumor is growing in sheets and diffusely infiltrating the myometrium.

Electronically

verified by:

**Gross Description** 

1. The specimen is labeled with the patient's name and as "hysterectomy BSO". It consists of a uterus with bilateral adnexa weighing 221g. The uterus measures 9.2Sl x 6.6ML x 4.1 AP cm and the cervix measures 3.1 cm in diameter. The slit os measures 0.3cm long. The right fallopian tube measures 6x0.7 cm and the right ovary is not well defined. The left fallopian tube measures 6x0.8cm and the left ovary 3.1x2.4x1.6cm.

The serosal surface of the uterus shows hemorrhagic adhesions. A tumor is present predominantly in the left fundus extending into the myometrium. There are central areas of necrosis. It is forming a mass and measures 2.1 SI x 3.3 ML x 3.8 AP cm. The posterior lower endomyometrium shows a friable papillary lesion measuring 2.8 SI x 1.4 ML x 1.3 APcm. Grossly the lesion does not reach the lower uterine segment. A large intramural fibroid with whorllike appearance also identified measuring 3.5 cm in diameter. The exocervix is smooth and shows nabothian cysts. The right fallopian tube shows hemorrhagic adhesions on the outer surface but is patent on sectioning. The right fallopian tube is ill-defined but the area is somewhat hemorrhagic with membraneous tissue. The left fallopian tube also shows hemorrhagic adhesions on the surface and patent on sectioning. Hemorrhagic adhesions identified on the tanwhite surface of the left ovary. Translucent follicular cyst also seen at the surface. On sectioning corpus luteum is identified measuring 0.6 cm in diameter.

1A left ovary and fallopian tube Biobank

1B right ovary and fallopian tube Biobank

1C endometrial tumor Biobank

1D-1F right fallopian tube

1G-11 right ovarian region

1J-1M left fallopian tube

1N-1R left ovary

1S-1T anterior cervix, cervical canal

1U anterior lower uterine segment

1V anterior endomyometrium

1W-1X posterior cervix, cervical canal, lower uterine segment

1Y posterior lower endomyometrium (papillary lesion)

1Z posterior endometrium (papillary lesion)

1AA-1AB posterior endomyometrium

1AC -1AF the bulging lesion at the superior fundus

1AG hemorrhagic adhesion and uterine serosa

Additional blocks:

1AH-1AK tumor with serosa

2. The specimen is labeled with the patient's name and as "residual ovary right side". It consists of a piece of congested soft tissue measuring 6 x 3.5 x 0.8 cm. Grossly no ovarian tissue identified. One cyst identified on sectioning measuring 0.8 cm in diameter containing clear fluid. The specimen is submitted in toto.

2A cystic portion

2B-2E remaining tissue

3. The specimen container, labeled with the patient's name and as "left common iliac node", contains a piece of fibrofatty tissue measuring 4 x 1.6 x 0.5 cm, received in 10% NBF. This contains 2 lymph node measuring 0.8 x 0.3 x 0.2 cm and 1.8 x 1.2 x 0.4 cm. The specimen is submitted in toto.

3A one node bisected

3B one node

3C fat

4. The specimen container, labeled with the patient's name and as "left external iliac node", contains a piece of fibrofatty tissue measuring 2 x 1 x 0.5 cm cm, received in 10% NBF. This contains 2 lymph nodes measuring 1.8 x 1.4 x 0.6 cm and 1 x 0.8 x 0.2 cm . Intraoperative consultation performed on a frozen by quick section. The specimen is submitted in toto. 4A-4B bisected node frozen section

4C node

4D one node

5. The specimen container, labeled with the patient's name and as "left obturator", contains a piece of fibrofatty tissue measuring 3.5 x 2 x 0.8 cm, received in 10% NBF. This contains 3 lymph node measuring  $0.3 \times 0.2 \times 0.2$  cm to  $1.2 \times 1 \times 0.4$  cm . The specimen is submitted in toto. 5A 2 nodes

5B two nodes

5C multiple small nodes

6. The specimen container, labeled with the patient's name and as "right external iliac node", contains a piece of fibrofatty tissue measuring 3.8 x 2.2 x 1.6 cm, received in 10% NBF. This contains 3 lymph node measuring 0.3 x0.3x0.3 to 1.6 x 0.7 and 0.4 cm . The specimen is submitted in toto.

6A 2 nodes

6B one node bisected

6C-6D fat and three nodes

7. The specimen container, labeled with the patient's name and as "right obturator", contains a piece of fibrofatty tissue measuring 5 x 1.3 x 0.9 cm, received in 10% NBF. This contains 3 lymph node measuring  $0.4 \times 0.3 \times 0.2$  to  $2.2 \times 1.2 \times 0.8$  cm . The specimen is submitted in toto. 7A 2 nodes

7B one node bisected

7C three nodes and fat

8. The specimen container, labeled with the patient's name and as "left paraortic node", contains a piece of fibrofatty tissue measuring 1.8 x 1.5 x 0.9 cm, received in 10% NBF. This contains one lymph node measuring  $1.7 \times 0.5 \times 0.3$  cm . The specimen is submitted in toto.

8A 4 nodes, bisected

8B remaining fat and three nodes

9. The specimen container, labeled with the patient's name and as "right paraaortic node", contains a piece of fibrofatty tissue measuring 3 x 1.4 x 1 cm, received in 10% NBF. This contains multiple lymph nodes, the larger measuring 1 x 0.5 x 0.4 cm and 2 x 0.9 x 0.5 cm . The specimen is submitted in toto.

9A 2 node

9B one node bisected

9C fat

## **Quick Section Diagnosis**

4A,B. Lymph node, left external iliac: Negative for malignancy.

Slide received: OR called:

MD