

Specimens Submitted:

- 1: UTERUS, CERVIX, BILATERAL FALLOPIAN TUBES AND OVARIES, TOTAL HYSTERECTOMY AND BILATERAL SALPINGO-OOPHORECTOMY
- 2: Sentinel lymph node, right external iliac; excision
- 3: Lymph nodes, left obturator; excision
- 4: Lymph nodes, left external iliac; excision
- 5: Lymph nodes, left common iliac; excision

## DIAGNOSIS:

1. UTERUS, CERVIX, BILATERAL FALLOPIAN TUBES AND OVARIES, TOTAL HYSTERECTOMY AND BILATERAL SALPINGO-OOPHORECTOMY:

Tumor Type:

Adenocarcinoma, endometrioid type Architectural Grade (For Endometrioid Types only):

I (<6% solid growth)

Nuclear Grade (For Endometrioid Types only):

Grade 1

FIGO Grade (For Endometrioid Types only): Grade 1

Myometrial Invasion:

Not identified

Endocervical Invasion: Not identified

Lymphovascular invasion:

Not identified

Endometrium:

Exhibits complex hyperplasia with atypia

Myometrium:

Unremarkable

Adnexa:

Unremarkable

Comment: Benign endocervical polyp is noted

2. SENTINEL LYMPH NODE, RIGHT EXTERNAL ILIAC; EXCISION:

- ONE BENIGN LYMPH NODE (0/1)
- MULTIPLE LEVELS AND CYTOKERATIN IMMUNOSTAINED SLIDES WERE EXAMINED.
  - \*\* Continued on next page \*\*

100-0-3

adenocarcinoma, indometrioid, NOS 8380/3 Site: Indonetruin C54.1 per 5/2/11

Criteria	Yes	No
Diagnosis Discrepancy		4,
Primary Tumor Site Discrepancy		$\top X$
HIPAA Discrepancy		7.2
Prior Malignancy Hintory		T.
Dual/Synchronous Primary New Co.		
Case is (rircle): /	DISQUALIFIED	
Reviewer Initials Date Review	ed: 5 /2-/	



- Page 2 of 4 3. LYMPH NODES, LEFT OBTURATOR; EXCISION: -ONE BENIGN LYMPH NODE (0/1)
- 4. LYMPH NODES, LEFT EXTERNAL ILIAC; EXCISION: -BENIGN FIBROADIPOSE TISSUE (TISSUE ENTIRELY SUBMITTED)
- 5. LYMPH NODES, LEFT COMMON ILIAC; EXCISION: -TWO BENIGN LYMPH NODES (0/2)

I ATTEST THAT THE ABOVE DIAGNOSIS IS BASED UPON MY PERSONAL EXAMINATION OF THE SLIDES (AND/OR OTHER MATERIAL), AND THAT I HAVE REVIEWED AND APPROVED



