



Surgical Pathology Report

Final

100-0-3 Carcinoma, serous, NOS 8441/3 Site: endo metrium

(54.1

2-28-12

Gynecology

(Age:

Patient Type:

Reported:

DIAGNOSIS:

UTERUS, ENDOMETRIUM, PROCEDURE NOT STATED

- HIGH GRADE SEROUS CARCINOMA
- CARCINOMA INVOLVES THE LOWER UTERINE SEGMENT
- SEE SYNOPTIC

UTERUS, MYOMETRIUM, PROCEDURE NOT STATED

- HIGH GRADE SEROUS CARCINOMA BY DIRECT EXTENSION
- CARCINOMA INVADES TO A DEPTH OF 12 MM WHERE THE MYOMETRIAL THICKNESS IS 13 MM
- EXTENSIVE LYMPHVASCULAR SPACE INVASION BY CARCINOMA IS PRESENT

UTERUS, CERVIX, PROCEDURE NOT STATED

- HIGH GRADE SEROUS CARCINOMA BY DIRECT EXTENSION, WITH SURFACE AND STROMAL INVOLVEMENT

UTERUS, SEROSA, PROCEDURE NOT STATED

- NO HISTOPATHOLOGIC ABNORMALITY

OVARIES, RIGHT AND LEFT, EXCISION

- NO HISTOPATHOLOGIC ABNORMALITY

FALLOPIAN TUBES, RIGHT AND LEFT, EXCISION

- NO HISTOPATHOLOGIC ABNORMALITY

SOFT TISSUE, LABELED "LYMPH NODE, RIGHT EXTERNAL ILIAC," EXCISION

- NO EVIDENCE OF MALIGNANCY
- NO LYMPH NODES IDENTIFIED (ENTIRE SPECIMEN SUBMITTED FOR MICROSCOPIC EXAMINATION)

LYMPH NODE, RIGHT OBTURATOR, EXCISION

- METASTATIC HIGH GRADE SEROUS CARCINOMA IN ONE OF ONE LYMPH NODE (1/1), WITH EXTRACAPSULAR EXTENSION

LYMPH NODES, LEFT EXTERNAL ILIAC, EXCISION

- METASTATIC HIGH GRADE SEROUS CARCINOMA IN ONE OF SIX LYMPH NODES (1/6)

LYMPH NODE, LEFT OBTURATOR, EXCISION

- METASTATIC HIGH GRADE SEROUS CARCINOMA IN TWO OF THREE LYMPH NODES (2/3)

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LYMPH NODE, RIGHT PERIADRTIC, EXCISION

- METASTATIC HIGH GRADE SEROUS CARCINOMA IN TWO OF THREE LYMPH NODES (2/3)

LYMPH NODE, LEFT PERIAORTIC, EXCISION

- NO EVIDENCE OF MALIGNANCY IN TWO LYMPH NODES

OMENTUM, OMENTECTOMY

- NO EVIDENCE OF MALIGNANCY

intraoperative Consultation:

An intraoperative non-microscopic consultation was obtained and interpreted as: "Called to pick up 'uterus, cervix, bilateral tubes and ovaries, consists of a 145-gram specimen that measures 5.5 cm from cornu to cornu, 7.5 cm from inferior to superior, and 5.0 cm from anterior to posterior. Opened in OR to show extensive endometrial tumor on both anterior and posterior surfaces and measures 6.5 x 6.0 cm on posterior half. . Tissue laken for tumor bank. Rest for permanents," by

Microscopic Description and Comment:

Microscopic examination substantiates the above cited diagnosis.

History:

The patient is a ____ear old woman with no clinical history provided. Operative procedure: Not stated.

Specimen(s) Received:

A: UTERUS, CERVIX, BILATERAL TUBES AND OVARIES B: LYMPH NODE, RIGHT EXTERNAL ILIAC

8: LYMPH NODE, RIGHT OBTURATOR
D: LYMPH NODE, REGHT OBTURATOR
D: LYMPH NODE, LEFT EXTERNAL ILIAC
E: LYMPH NODE, LEFT OBTURATOR
F: LYMPH NODE, RIGHT PERIAORTIC
G: LYMPH NODE, LEFT PERIAORTIC

H: OMENTUM

Gross Description:

The specimens are received in eight formalin-filled containers, each labeled labeled "uterus, cervix, bilateral tubes and ovaries." It holds a 145-gram uterus with attached cervix and bilateral The first container is adnexa. It measures 5.5 x 7.5 x 5.0 cm. The ectocervix is 1.3 cm in maximum diameter, and the external os measures 0.3 cm. The serosa, both anteriorly and posteriorly, are smooth and shiny. The uterus has been previously opened to show the entire 6.5 x 6.0 cm endometrial cavity is replaced by gray-white papillomatous neoplasm. This is additionally sectioned to show the tumor has extends more than two thirds of the 1.5 cm endometrial thickness. The lower uterine segment and the 1.7 cm long cervical canal are involved by turnor grossly. The left ovary is gray-white, bosselated, measuring 2.2 x 1.5 x 0.6 cm. This has grossly normal ovarian parenchyma on cut surface. The attached fallopian tube, which shows 0.3 cm gray-white plaques on its external aspect, measures 5.0 \times 0.5 cm. The right overy is gray-white, cerebriform, measuring 2.0 x 0.9 x 0.7 cm. This has grossly normal ovarian parenchyma on cut surface. The attached fallopian tube segment, which exhibits similar 0.2 - 0.3 cm gray-white plaques, measures 4.0 x 0.5 cm. Labeled A1 and A2 - anterior and posterior cervix; A3 and A4 - anterior and posterior lower uterine segment; A5 to A7 -

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contiguous sections of anterior endomyometrium; A8 to A10 - contiguous sections of posterior endomyometrium; A11 to A14 - left adnexa in its entirety; A15 to A18 - right adnexa in its entirety. Jar 2.

The second container is labeled "right external iliac." It holds irregular fragments of fatty tissue, containing one palpable lymph node, measuring $3.2 \times 3.0 \times 0.6$ cm in aggregate. Labeled B1-B3. Jar 0.

The third container is labeled "right obturator." It holds an enlarged lymph node, with attached fat, measuring $4.2 \times 1.9 \times 1.7$ cm in overall dimension. Labeled C1 and C2. Jar 1.

The fourth container is labeled "left external iliac." It holds an irregular portion of fatty tissue, containing matted lymph nodes, measuring 5.5 x 2.8 x 0.9 cm. Labeled D1 and D2 - one bisected lymph node; D3 - remaining lymph nodes.

The fifth container is labeled "left obturator." It holds three lymph nodes, with attached fat, ranging from 3.2 cm to 0.6 cm in dimension. Labeled E1 and E2 - one bisected lymph node; E3 - one bisected lymph node; E4 - a single lymph node. Jar 1.

The sixth container is labeled "right periaortic lymph node." It holds an irregular portion of fatty tissue, containing two palpable lymph nodes, measuring $2.5 \times 1.1 \times 0.4$ cm. Labeled F1. Jar 0.

The seventh container is labeled "left perisortic lymph node." It holds an irregular portion of fatty tissue, containing matted lymph nodes, measuring $3.5 \times 1.3 \times 0.7$ cm. The lymph nodes are submitted in its entirety. Labeled G1 - G2 two lymph nodes, bisected. Jar 1.

The eighth container is labeled "ornentum biopsy." It holds a $20.0 \times 6.9 \times 1.1$ cm portion of fatty omental tissue. There are no grossly visible or palpable densities. Labeled H1 to H5. Jar 2.

SYNOPTIC REPORTING FORM FOR MALIGNANT ENDOMETRIAL TUMORS

HISTOPATHOLOGIC TYPE

The histologic diagnosis is adenocarcinoma, serous papillary type

TUMOR INVASION

Invasive tumor is present with invasion into the tuminal 2/3 of the myometrium

TUMOR SIZE

The tumor invades to a depth of 12 mm. The myometrial thickness is 13 mm.

LOWER UTERINE SEGMENT INVOLVEMENT

(does not change the stage)

The lower uterine segment is involved by tumor

ENDOCERVICAL INVOLVEMENT

The endocervix is involved by invasive tumor in the mucosa and stroma

LYMPHVASCULAR SPACE INVASION

Lymphvascular space invasion by tumor is present and widespread in scope

REGIONAL LYMPH NODES (N)

Regional lymph node metastasis (N1)

The regional lymph nodes are involved by tumor in 6 nodes

The total number of lymph nodes examined is 15

Extranodal extension by tumor metastases is present

PRIMARY TUMOR (TNM Category/FIGO Stage)

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Invasion of the stromal connective tissue of the cervix (T2b/IIB)

STAGE GROUPING T2b/N1/MX (Slage X)

The pathologic stage assigned here should be regarded as provisional, and may change after integration of clinical data not provided with this specimen.

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