	Primary Tumer Site Discrepancy	1-2
	HIP/A Discrepancy	- 5. -
	Prior Mailgnancy History	1//
	Dual/Synchronous Primary Noted	1 7
RUN DATE:	Case is (circle): QUALIFIED DISQUALIFIED	· · · · · · · · · · · · · · · · · · ·
RUN TIME:	Reviewer Initials Date Reviewed 150	
3Y :	W 10/30/11	

UUID: 5938A010-17E7-41FB-9F4D-8B4F1A3C0F2F TCGA-AX-A05Z-01A-PR Redacted

Jecumen Inquiry

ATIENT:

ACCT #:

LOC:

U#:

REG DR:

AGE/SX: F STATUS: DIS IN

RM/BED: TLOC:

REG:

SPEC #: PN:

Obtained:

DIS:

STATUS: SOUT

Received:

Subm Dr:

CLINICAL HISTORY:

ADENOCARCINOMA OF ENDOMETRIUM

SPECIMEN/PROCEDURE:

- 1. UTERUS RT. FALLOPIAN TU, RT. OVARY, LT. FALLOPIAN TU, LT. OVARY, CERVIX
- 2. LYMPH NODE RT. PARA-AORTIC
- 3. LYMPH NODE LT. COMMON ILIAC
- 4. LYMPH NODE LT.PARA-AORTIC
- 5. LYMPH NODE RT.PELVIC
- 6. LYMPH NODE LT.PELVIC 7. LYMPH NODE - RT. COMMON ILIAC

Site: Intometrium E54.1 (m)

IMPRESSION:

- UTERUS, BILATERAL TUBES AND OVARIES:
 - ENDOMETRIUM:
 - Adenocarcinoma of endometrium, endometrioid type, FIGO grade II, nuclear grade II invading 6 mm where the wall measures 9 mm (> 50%).
 - Vascular space invasion is focally identified.
 - CERVIX:
 - Stromal involvement of the upper endocervix is present.
 - The margins appear negative.
 - MYOMETRIUM:
 - No intrinsic myometrial disease (see above).
 - RIGHT OVARY:
 - Metastatic adenocarcinoma (5 mm) penetrating to < 1 mm from the serosal surface.
 - LEFT OVARY:
 - Physiological changes.
 - No tumor identified.
 - FALLOPIAN TUBES, BILATERAL:
 - No pathologic diagnosis.
- 2) RIGHT PARA-AORTIC LYMPH NODES:
 - Three lymph nodes are negative for tumor (0/3).
- 3) LEFT COMMON ILIAC LYMPH NODES:
 - Two lymph nodes are negative for tumor (0/2).
- 4) LEFT PARA-AORTIC LYMPH NODES:
 - Four lymph nodes are negative for tumor (0/4).
- 5) RIGHT PELVIC LYMPH NODES:

** CONTINUED ON NEXT PAGE **

Page: 2 (Continued)

MPRESSION: (continued)

- Six lymph nodes are negative for tumor (0/6).
- 6) LEFT PELVIC LYMPH NODES:
 - . Five lymph nodes are negative for tumor (0/5).
- 7) RIGHT COMMON ILIAC LYMPH NODES:
 - . No lymph node material identified.

ENDOMETRIAL CARCINOMA CHECKLIST:

MACROSCOPIC

SPECIMEN TYPE
Hysterectomy

TUMOR SITE

Specify location(s): Corpus

TUMOR SIZE

Greatest dimension: 7.0 x 5.0 x 1.0 cm posteriorially and 6.0 x 4.5 x 1.0 anteriorially

OTHER ORGANS PRESENT

Right ovary Left ovary Right fallopian tube Left fallopian tube

TICROSCOPIC

HISTOLOGIC TYPE

Endometrioid adenocarcinoma, not otherwise characterized

HISTOLOGIC GRADE

G1: 5% or less nonsquamous solid growth

MYONETRIAL INVASION

Invasion present

Maximal depth of myometrial invasion: 6 mm

Thickness of myometrium in area of maximal tumor invasion: 9 mm

The % of myometrial involvement: 66%

EXTENT OF INVASION

PRIMARY TUMOR (pT)

TNM (FIGO)

pT3a (IIIA): Tumor involves serosa, parametria, and/or adnexa (direct extension or metastasis)

REGIONAL LYMPH NODES (PN)

IMPRESSION: (continued)

TNM (FIGO)

PNO: No lymph node metastasis.

Number examined: 20

DISTANT METASTASIS (PM)

TNM (FIGO)

PMX: Cannot be assessed

MARGINS

Uninvolved by invasive carcinoma

VENOUS/LYMPHATIC (LARGE/SMALL VESSEL) INVASION (V/L) Present

Pathologic TNM: pT3a NO MX

Dictated by: Entered:

GROSS DESCRIPTION:

Received fresh, labeled with the patient's name and "uterus, left fallopian tube, left ovary, right fallopian tube, right ovary", is a 145 gram hysterectomy with bilateral salpingo-oophorectomy specimen including an intact uterus with attached bilateral fallopian tubes and ovaries. The uterus measures 9.3 cm long x 3.0 cm cornu to cornu and 5.0 cm anterior to posterior. The serosa is pink-tan, smooth. The exocervix measures 2.5 x 2.5 cm and it is covered by smooth, pink-tan mucosa. The endocervical canal is covered by pink-tan granular mucosa. There is an exophytic ulcerating friable tumor located in the anterior and posterior lower uterine segment, measuring $7.0 \times 5.0 \times 1.0$ cm posteriorly and $6.0 \times 4.5 \times 1.0$ cm anteriorly. The tumor is 2.0 cm from external os posteriorly and 3.0 cm from external os anteriorly. There is a tumor nodule in the endocervical surface, 0.6 cm from external os anteriorly, measuring 0.7 \times 0.4 \times 0.4 cm. The tumor appears no underneath myometrium/stroma invasion. The tumor is 0.5 cm from closest resection margin which is anterior and posterior radial lower uterine segment/endocervical wall. The endometrium near the fundus is pink-tan, smooth and measures 0.4 cm thick. The endometrial cavity without tumor involvement measures 2.0 x 1.5 cm. The right fallopian tube measures 4.5 cm long x 0.5 cm in diameter and the left measures 4.0 cm long x 0.5 cm in diameter. Both fallopian tubes have fimbriated ends, smooth, external surface and unremarkable cut surface. The right ovary measures 2.0 \times 1.3 \times 0.8 cm and it has a smooth glistening and nodular yellow-tan cut surface. The left ovary measures 2.5 \times 2.0 \times 1.5 cm. It has a smooth, glistening external surface and multi-cystic cut surface. The cysts measure 0.5 to 1.5 cm in greatest diameter and all the cysts are thin-walled (<0.1 cm) and filled with clear fluid. Representative sections submitted.

Ink Code: Anterior - blue, posterior - black.

CASSETTE SUMMARY:

Cassette 1A,1B:

Anterior (12 o'clock) cervix through lower uterine segment,

bisected, yellow ink indicating bisection site.

GROSS DESCRIPTION: (continued)

Cassette 1C,1D: Posterior (6 o'clock) cervix through lower uterine segment,

bisected, yellow ink indicating bisection site.

Cassette 1E: Anterior endocervix with surface nodule.

Cassette 1G,1H: Full thickness of tumor at anterior wall, bisected, yellow ink

indicating bisection site.

Cassette 1J,1K: Full thickness of tumor at anterior wall, bisected, yellow ink

indicating bisection site.

Cassette 1L-1N: Full thickness of tumor at posterior wall.

Cassette 1P: Full thickness of tumor uninvolved anterior wall.

Cassette 1Q: Full thickness of tumor uninvolved posterior wall.

Cassette 1R: Right ovary and fallopian tube.
Cassette 1S: Left ovary and fallopian tube.

Received labeled with the patient's name and "right para-aortic" is a 3.7 x 2.0 x 1.0 cm specimen. The specimen is dissected for possible lymph nodes. Three possible lymph nodes identified ranging from 1.0 cm to 3.5 cm in greatest dimension and submitted as follows:

CASSETTE SUMMARY

Cassette 2A: One possible lymph node.
Cassette 2B: One lymph node trisected.

Cassettes 2C-2D: One lymph node serially sectioned and entirely submitted.

Received labeled with the patient's name and "left common iliac" are two portions of yellow gold to pink tan fibroadipose tissue ranging from 1.3 cm to 1.6 cm in greatest dimension and dissected for possible lymph nodes. Two possible lymph nodes identified ranging from 0.8 cm to 1.4 cm in greatest dimension and submitted as follows:

CASSETTE SUMMARY

Cassette 3A: One lymph node bisected.
Cassette 3B: One lymph node bisected.

4) Received labeled with the patient's name and "left para-aortic" is a 3.0 x 2.0 x 1.0 cm aggregate of yellow gold to pink tan fibroadipose tissue dissected for possible lymph nodes. Four possible lymph nodes identified ranging from 0.2 cm to 1.5 cm in greatest dimension and submitted as follows:

CASSETTE SUMMARY

Cassette 4A: Two possible lymph nodes.
Cassette 4B: One lymph node bisected.
Cassette 4C: One lymph node bisected.

Received labeled with the patient's name and "right pelvic lymph nodes" is a 6.0 x 3.7 x 2.4 cm aggregate of yellow gold to pink tan fibroadipose tissue dissected for possible lymph nodes. Seven possible lymph nodes identified ranging from 0.5 cm to 2.4 cm in greatest dimension and submitted as follows:

CASSETTE SUMMARY

Cassette 5A: One lymph node bisected. Cassette 5B: One lymph node bisected.

GROSS DESCRIPTION: (continued)

Cassette 5C:
Cassette 5D:
Cassette 5D:
Cassette 5E:
Cassette 5G:
Cassette 5G:
Cassette 5H:
One lymph node bisected.
One lymph node bisected.
One lymph node bisected.
One lymph node bisected.

Received labeled with the patient's name and "left pelvic lymph nodes" is a 4.5 x 3.5 x 1.7 cm aggregate of yellow gold to pink tan portion of fibroadipose tissue dissected for possible lymph nodes. Five possible lymph nodes identified ranging from 0.9 cm to 2.6 cm in greatest dimension and submitted as follows:

CASSETTE SUMMARY

Cassette 6A: Two possible lymph nodes.
Cassette 6B: One lymph node bisected.
Cassette 6C: One lymph node bisected.
Cassette 6D: One lymph node bisected.

7) Received labeled with the patient's name and "right common iliac" are two portions of yellow gold to pink tan fibroadipose tissue ranging from 0.9 cm to 1.0 cm in greatest dimension. No lymph nodes are grossly identifiable. The specimen is entirely submitted in cassette #7.

Dictated by: Entered:

COPIES TO:

No PCP/Family Physician

CPT Codes:

ESTROGEN-

CEA-

LYMPH NODE, REGIONAL RESECT/ UTERUS W/WO ADNEXAE, TUMOR- , SOFT TISSUE, LIPOMA/ADIPOSE IHC P53 ;, IHC P16

ICD9 Codes:

Resident Physician:

I have personally reviewed the material (specimen/slide) and approve this final report.

Slectronically Signed by: