

1CB-0-3

Adenocarcinoma, endometrioid, NOS 8380/3

Site Code: Endometrium C54.1

TSS Name/#: |

1/12/11

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Specimens Submitted:

- 1: SOFT TISSUE, "ADHESION" TO SIGMOID; BIOPSY
- 2: ADNEXA, RIGHT, "MASS"; EXCISION
- 3: ADNEXA, LEFT; EXCISION
- 4: PARAMETRIUM, LEFT; EXCISION
- 5: LYMPH NODE, RIGHT EXTERNAL ILIAC; EXCISION
- 6: UTERUS, CERVIX, BILATERAL PARAMETRIA; RADICAL HYSTERECTOMY
- 7: LYMPH NODE, LEFT EXTERNAL ILIAC; EXCISION
- 8: LYMPH NODE, LEFT OBTURATOR; EXCISION
- 9: LYMPH NODE, LEFT HYPOGASTRIC; EXCISION
- 10: LYMPH NODE, LEFT COMMON ILIAC; EXCISION
- 11: LYMPH NODE, LEFT PARA-AORTIC; EXCISION
- 12: LYMPH NODE, RIGHT PARA-AORTIC; EXCISION
- 13: LYMPH NODE, RIGHT COMMON ILIAC; EXCISION
- 14: LYMPH NODE, RIGHT EXTERNAL ILIAC; EXCISION
- 15: LYMPH NODE, RIGHT HYPOGASTRIC; EXCISION
- 16: LYMPH NODE, RIGHT OBTURATOR; EXCISION

DIAGNOSIS:

1. SOFT TISSUE, "ADHESION" TO SIGMOID; BIOPSY:
 - Benign fibroadipose tissue
2. ADNEXA, RIGHT, "MASS"; EXCISION:
 - Hydrosalpinx and chronic salpingitis
 - Benign ovary with adhesions
3. ADNEXA, LEFT; EXCISION:
 - Fallopian tube with chronic salpingitis
 - Benign ovary with adhesions
4. PARAMETRIUM, LEFT; EXCISION:
 - Two benign lymph nodes (0/2)
 - Benign fibroadipose tissue
5. LYMPH NODE, RIGHT EXTERNAL ILIAC; EXCISION:

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UUID: F3163501-DD37-4C13-A921-3C2A74928BA7
TCGA-AP-A1DV-01A-PR

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Criteria	Yes	No
Diagnostic Discrepancy		
Primary Tumor Site Discrepancy		
HIPAA Discrepancy		
Prior Malignancy History		
Dual/Synchronous Primary Malignancy		
Case is (circle): QUALIFIED / DISQUALIFIED		
Reviewer Initials	Date Reviewed: 1/12/11	

Lymph Nodes:

Number of nodes examined:3
Number of metastatic nodes:0

6. UTERUS, CERVIX, BILATERAL PARAMETRIA, RADICAL HYSTERECTOMY:

Tumor Type:

Adenocarcinoma, endometrioid type
see note

Architectural Grade (For Endometrioid Types only):

II (6-50% solid growth)

Nuclear Grade (For Endometrioid Types only):

Predominantly grade 2 with focal grade 3

FIGO Grade (For Endometrioid Types only):

Grade 3

Myometrial Invasion:

(>50%)

Measures 17mm in maximum depth

Myometrium thickness measures 18mm in the area of maximal tumor

invasion

Endocervical Invasion:

Mucosa and stroma

Depth of cervical stromal invasion:

Measures 12mm

Cervical wall thickness measures 13mm in the area of maximum tumor

invasion

Bilateral parametria are present and not involved by tumor; four
benign lymph nodes are also identified (0/4)

Lymphovascular invasion:

Identified

Endometrium:

Normal residual endometrium is not identified

Myometrium:

Unremarkable

Note: Immunohistochemical stains show the tumor cells to be focally and
weakly positive for PR, and negative for ER and vimentin. Previous stains
have shown this tumor to be negative for p16 with limited CEA(m) staining.
Given the morphology and immunophenotype, this is most consistent with an
endometrioid adenocarcinoma, possibly arising in the lower uterine segment.

7. LYMPH NODE, LEFT EXTERNAL ILIAC, EXCISION:

Lymph Nodes:

Number of nodes examined:1
Number of metastatic nodes:0

8. LYMPH NODE, LEFT OBTURATOR, EXCISION:

Lymph Nodes:

Number of nodes examined:1
Number of metastatic nodes:0

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9. LYMPH NODE, LEFT HYPOGASTRIC; EXCISION:

Lymph Nodes:

Number of nodes examined:1

Number of metastatic nodes:0

10. LYMPH NODE, LEFT COMMON ILIAC; EXCISION:

Lymph Nodes:

Number of nodes examined:1

Number of metastatic nodes:0

11. LYMPH NODE, LEFT PARA-AORTIC; EXCISION:

Lymph Nodes:

Number of nodes examined:4

Number of metastatic nodes:0

12. LYMPH NODE, RIGHT PARA-AORTIC; EXCISION:

Lymph Nodes:

Number of nodes examined:1

Number of metastatic nodes:0

13. LYMPH NODE, RIGHT COMMON ILIAC; EXCISION:

Lymph Nodes:

Number of nodes examined:3

Number of metastatic nodes:0

14. LYMPH NODE, RIGHT EXTERNAL ILIAC; EXCISION:

Lymph Nodes:

Number of nodes examined:3

Number of metastatic nodes:0

15. LYMPH NODE, RIGHT HYPOGASTRIC; EXCISION:

Lymph Nodes:

Number of nodes examined:1

Number of metastatic nodes:0

16. LYMPH NODE, RIGHT OBTURATOR; EXCISION:

Lymph Nodes:

Number of nodes examined:1

Number of metastatic nodes:0

[REDACTED]