



MRN:
Patient:
Admission Date:
Ordering Physician:

Sex/DOB: Female
Discharge Date:

Pathology Addendum Report

Collected Date/Time:
Received Date/Time:

Accession Number:

ICD-0-3

*Adenocarcinoma
endometrioid 8380/3
Site Endometrium 854.1
JW 8/2/13*

Addendum Report

RESULT: p16 and p53 are not reactive

INTERPRETATION: supporting the issued diagnosis of papilloma.

Immunohistochemical studies for p53 were performed on formalin fixed, paraffin-embedded tissue (Block G1) with adequate positive and negative control sections.

The performance characteristics of these antibodies were determined by the

have not been cleared or approved by the FDA for use in clinical diagnosis. The FDA has determined that such clearance or approval is not necessary. These tests are used for clinical purposes. They should not be regarded as investigational or for research. This laboratory is certified under the Clinical Laboratory Improvement Amendments of 1988 (CLIA-88) as qualified to perform high-complexity clinical laboratory testing.

The technical component of the p16 immunohistochemical studies were performed on formalin fixed, paraffin-embedded tissue (Block G1) with adequate positive and negative control sections, at the

(Electronic signature)

Verified:

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Final Diagnosis

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

- ENDOMETRIAL ADENOCARCINOMA,
ENDOMETRIOID TYPE, FIGO GRADE 1, INVADING 1.5 CM OF A 2 CENTIMETER THICK

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MYOMETRIUM, CONFINED TO THE CORPUS.

- LEIOMYOMATA.
- CHRONIC CERVICITIS WITH NABOTHIAN CYSTS.
- OVARIES WITH PHYSIOLOGIC CHANGES.
- UNREMARKABLE FALLOPIAN TUBES WITH WALTHARD RESTS AND PARATUBAL CYSTS.
- SEE SYNOPSIS REPORT.

B. RIGHT PELVIC LYMPH NODES, LYMPHADENECTOMY:

- NO METASTATIC CARCINOMA IN 8 LYMPH NODES (0/8).
- ONE GROUP OF CARCINOMA CELLS WITHIN A LYMPHATIC SPACE IS NOTED.

C. LEFT PELVIC LYMPH NODES, LYMPHADENECTOMY:

- NO METASTATIC CARCINOMA IN 10 LYMPH NODES (0/10).

D. RIGHT PELVIC LYMPH NODES, LYMPHADENECTOMY:

- NO METASTATIC CARCINOMA IN 4 LYMPH NODES (0/4).

E. LEFT PARA-AORTIC LYMPH NODES, LYMPHADENECTOMY:

- NO METASTATIC CARCINOMA IN 5 LYMPH NODES (0/5).

F. OMENTUM, OMENTECTOMY:

- NO EVIDENCE OF CARCINOMA.

G. BLADDER LESION, BIOPSY:

- CYSTITIS CYSTICA-LIKE INVERTED PAPILLOMA.

(Electronic signature)
Verified.

Synopsis Report

SPECIMEN:

Uterine corpus
Cervix
Right ovary
Left ovary
Right fallopian tube
Left fallopian tube

PROCEDURE:

Radical hysterectomy
Bilateral salpingo-oophorectomy
Omentectomy
bladder biopsy

LYMPH NODE SAMPLING:

Performed:

MRN:
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Pelvic lymph nodes

Para-aortic lymph nodes

SPECIMEN INTEGRITY:

Intact hysterectomy specimen

TUMOR SITE:

Anterior and posterior

TUMOR SIZE:

Greatest dimension: 7.0 cm

HISTOLOGIC TYPE:

Endometrioid adenocarcinoma, not otherwise characterized

HISTOLOGIC GRADE:

FIGO grade 1

MYOMETRIAL INVASION:

Present

Depth of invasion: 15 mm

Myometrial thickness: 20 mm

INVOLVEMENT OF CERVIX:

Not involved

EXTENT OF INVOLVEMENT OF OTHER ORGANS:

Right ovary

Not involved

Left ovary

Not involved

Right fallopian tube

Not involved

Left fallopian tube

Not involved

Right parametrium

Not involved

Left parametrium

Not involved

Omentum

Not involved

Bladder wall

Not involved (please see part G for bladder biopsy.)

PERITONEAL ASCITIC FLUID:

Negative for malignancy/normal/benign

MARGINS:

Uninvolved by invasive carcinoma

LYMPH-VASCULAR INVASION:

Present

PRIMARY TUMOR (pT):

pT1b [IB]: Tumor invades greater than or equal to one-half of the myometrium

REGIONAL LYMPH NODES (pN):

pN0: No regional lymph node metastasis

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Pelvic lymph nodes:
Number examined: 18
Number involved: 0
Para-aortic lymph nodes:
Number examined: 9
Number involved: 0

DISTANT METASTASIS (pM):
Not applicable

Source of Specimen

- A Uterus, with Tubes & Ovaries & Cervix
- B Lymph Nodes, Right Pelvic
- C Lymph Nodes, Left Pelvic
- D Lymph Nodes, Right Para-Aortic
- E Lymph Nodes, Left Para-Aortic
- F Omentum
- G Urinary Bladder, Biopsy Lesion

Clinical Information

PRE-OP DIAGNOSIS: Endometrial adenocarcinoma
POST-OP DIAGNOSIS: Same
TYPE OF PROCEDURE: TAH, BSO

Gross Description

The specimen is received in 7 parts:

A. The specimen is received fresh labeled "UTERUS, TUBES, OVARIES, CERVIX" and consists of a 195 g distorted uterus with attached cervix and bilateral adnexa, 8.5 cm from anterior to posterior, 8 cm from fundus to ectocervix, and 7.5 cm from cornu to cornu. The serosa is tan-pink, smooth and glistening. The ectocervical mucosa is tan-pink, smooth and glistening, 4.8 cm in diameter which surrounds a 1 cm slitlike os. The serosa on the anterior surface is inked red and the serosa on the posterior surface is inked black. The endocervical canal is tan, glistening striated. Within the endometrial cavity and displacing the endometrium entirely, is a 7 x 4.5 x 1.5 cm tan, friable, polypoid mass. No uninvolved endometrium is grossly identified. This mass comes to within 3.5 cm from the anterior endo-ectocervical junction and 4 cm from the posterior endo-ectocervical junction, 1.8 cm from the anterior serosal surface and 0.5 cm from the posterior serosal surface. Sectioning beneath this mass on the anterior aspect reveals no gross invasion into the myometrium, but on the posterior aspect, grossly extends to within 0.5 cm of the serosa. There are also approximately 5 intramural and subserosal, tan-white, bulging, whorled, well-circumscribed nodules ranging from 0.5-5 cm in greatest dimension. No areas of hemorrhage or necrosis are identified.

The left adnexal unit consists of 4.3 x 2 x 1.5 cm ovary and a fimbriated fallopian tube, 5.8 cm in length and 0.7 cm in diameter. The right adnexal unit consists of a 3.5 x 2 x 1 cm ovary and a fimbriated fallopian tube 5.5 cm in length and 0.7 cm in diameter. A central portion of each fallopian tube is missing. The outer surfaces of the ovaries are tan pink and cerebriform. Sectioning reveals unremarkable cut surfaces. The serosa of the fallopian tubes is grey purple, smooth and glistening. Sectioning reveals patent, pinpoint lumens. Rep. sections are submitted as follows:

A1-anterior cervix

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A2-posterior cervix
A3-anterior lower uterine segment
A4-posterior lower uterine segment
A5-A6-anterior full thickness section, bisected, with mass
A7-A8- anterior full thickness section, bisected, with mass
A9-A11-anterior endomyometrium, with mass
A12-posterior full thickness section, with mass
A13-A14-posterior full thickness section, bisected, with mass
A15-A16-posterior full thickness section, bisected, with mass
A17-A18-posterior full thickness section, bisected, with mass
A19-nodules
A20-left parametrium
A21-right parametrium
A22-left ovary
A23-left fallopian tube
A24-left fimbriae, submitted entirely
A25-right ovary
A26-right fallopian tube
A27-A28-right fimbriae are submitted entirely

B. The specimen is labeled "RIGHT PELVIC LYMPH NODES" and is received in formalin. It consists of 5 x 5 x 1.5 cm fragment of fatty tissue. On sectioning multiple lymph nodes are identified. Largest lymph node measuring 1.3 x 1.0 x 0.8 cm. All lymph nodes are entirely submitted as follows:

B1 = possible 3 lymph nodes
B2 = 4 lymph nodes
B3 = bisection of a single lymph node
B4 = bisection of a single lymph node

C. The specimen is labeled "LEFT PELVIC LYMPH NODES" and is received in formalin. It consists of 5 x 5 x 2 cm fragment of fatty tissue. On sectioning multiple lymph nodes are identified. The largest lymph node measuring 1.8 x 1 x 1 cm. All lymph nodes are entirely submitted as follows:

C1 = 4 lymph nodes
C2 = bisection of a single lymph node
C3 = bisection of a single lymph node
C4 = bisection of a single lymph node
C5 = 3 lymph nodes

D. The specimen is labeled "RIGHT PARA AORTIC LYMPH NODES" and is received in formalin. It consists of 3 x 3 x 1 cm fragment of fatty tissue. On sectioning possible 4 lymph nodes are identified. Entirely submitted as follows:

D1 = possible 3 lymph nodes
D2 = bisection of a single lymph node

E. The specimen is labeled "LEFT PARA-AORTIC LYMPH NODES" and is received in formalin. It consists of 2 x 1 x 1 cm fragment of fatty tissue. On sectioning 5 lymph nodes are identified. The largest lymph node measuring 0.7 x 0.7 x 0.7 cm. All lymph nodes are entire is submitted as follows:

E1 = 3 lymph nodes

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E2 = 2 lymph nodes

F. The specimen is labeled "OMENTUM" and is received in formalin. It consists of an irregular piece of yellow-tan lobulated fatty tissue grossly consistent with omentum measuring 35 x 16 x 1.5 cm. On sectioning the cut surface shows yellow-tan lobulated adipose tissue without any grossly visible discrete nodule. Representative section is submitted in cassette F1-F2.

G. The specimen is labeled "BLADDER LESION BIOPSY " and is received in formalin. It consists of a fragment of gray-tan soft tissue measuring 0.1 cm in greatest dimension. Entirely submitted in cassette G1.

Dictated by:

Special Stains / Slides
44 H&E

Tissue Code

Criteria	Yes	No
Diagnosis Discrepancy		✓
Primary Tumor Site Discrepancy		✓
HIPAA Discrepancy		✓
Prior Malignancy History		✓
Dual/Synchronous Primary		✓
Case is (circle):	QUALIFIED	DISQUALIFIED
Reviewer Initials	DSH	Date Reviewed: 7/10/2013