

Surgical Pathology

ICD-C-3

Adenocarcinoma, endometrioid, NOS 8380/3

Site Code: Endometrium, NOS 054.1

1/9/11

lw

Not Official Copy: Surgical Pathology

Flowsheet Date:

Result status:

Final

Result title:

Surgical Pathology

Performed by:

PATHOLOGY -STAFF,

Verified by:

PATHOLOGY -STAFF,

Encounter info:

* Final Report *

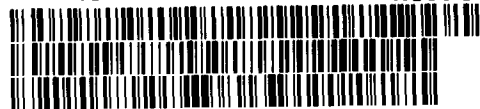
Surgical Pathology

CASE NUMBER:

UUID:81C6DDE6-ACC3-4659-91EC-D986671B592A

TCGA-AX-A1C4-01A-PR

Redacted



FINAL DIAGNOSIS:

A. Abdomen, anterior, biopsy:

- Fibroadipose tissue with no evidence of malignancy.

B. Colic gutter, biopsy:

- Fibroadipose tissue with no evidence of malignancy.

C. Omentum, omentectomy:

- Benign fibroadipose tissue with focal fat necrosis and multinucleated giant cells.
- No evidence of malignancy.

D. Uterus, cervix, fallopian tubes and ovaries

MACROSCOPIC

- Specimen Type: Total hysterectomy and bilateral salpingo-oophorectomy
- Tumor Site: Endometrium at cornu/fundus of right side of the uterus
- Tumor Size: 3.5 cm largest dimension.
- Other Organs Present: Right ovary, Right fallopian tube, Left fallopian tube.

MICROSCOPIC

- Histologic Type: Endometrioid adenocarcinoma, not otherwise characterized
- Histologic Grade: G2

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- Myometrial Invasion: Present, less than 50% of myometrial wall involved.
 - Deepest myometrial invasion: 0.3 cm (D13).
 - Myometrial thickness in the area of deepest invasion: 1.9 cm.

PATHOLOGIC STAGING

- Primary Tumor (pT): pT1b
- Regional Lymph Nodes (pN): pN0 (0/21)
- Distant Metastasis (pM): pMX
- Margins: Uninvolved by carcinoma
- Venous/Lymphatic (large/small vessel) Invasion: Absent
- Additional Pathologic Findings:
 - Cervix with squamous metaplasia and nabothian cysts.
 - Adenomyosis.
 - Numerous leiomyomata (largest one is 10 cm), some are hyalinized and partially calcified.
 - Right ovary with benign Brenner's tumor (2 cm).
 - Left ovary is surgically absent.
 - Right and left fallopian tubes are negative for tumor.

E. Pelvic sidewall, biopsy:

- Fibroadipose tissue with no evidence of malignancy.

Cul-de-sac, biopsy:

- Fibroadipose tissue with no evidence of malignancy.

G. Bladder peritoneum, biopsy:

- Fibroadipose tissue with no evidence of malignancy.

H. Lymph nodes, left pelvic, excision:

- Five benign lymph nodes negative for malignancy (0/5).

I. Lymph nodes, left para-aortic, excision:

- Four benign lymph nodes negative for malignancy (0/4).

J. Lymph nodes, right pelvic, excision:

- Eight benign lymph nodes negative for malignancy (0/8).

K. Lymph nodes, right para-aortic, excision:

- Four benign lymph nodes negative for malignancy (0/4).

L. Appendix, appendectomy:

- Negative for malignancy.

I attest that the above diagnosis is based upon my personal

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examination of the slides (and/or other material) and that I have reviewed and approved this report.

CLINICAL HISTORY:

Endometrial adenocarcinoma

GROSS DESCRIPTION:

A. The specimen is received in formalin with proper patient identification, labeled "anterior abdomen" and consists of three pieces of soft tan tissue measuring 1.6 x 1.0 x 0.4 cm in aggregate. The specimen is entirely submitted in one cassette.

B. The specimen is received in formalin with proper patient identification, labeled "colic gutter is" and consists of four pieces of soft tan tissue measuring 0.9 x 0.8 x 0.3 cm in aggregate. The specimen is entirely submitted in one cassette.

C. Specimen is received in formalin with proper patient identification labeled "omentum" and consists of an omentectomy specimen measuring 15 x 10 x 1.8 cm. The specimen is sectioned to reveal unremarkable fibroadipose tissue. No nodules or mass lesions are identified. The specimen is representatively submitted in four cassettes.

D. Specimen is received fresh with proper patient identification labeled "Uterus, cervix, tubes, and ovaries". The specimen weighs 1990 grams and measures 19 x 17 x 16 cm. The external surface of the uterus is distorted by multiple firm fibroid nodules. The ectocervix measures 2.9 cm in diameter with 0.8 cm patent. The ectocervical mucosa is smooth, glistening and unremarkable. The endocervical canal measures 3.5 cm in length and 0.4 cm in diameter with a smooth glistening mucosa. The endometrial cavity measures 4.5 cm in length and 2.9 cm in width. The cavity is distorted by multiple nodules. There is a mass extending from the endometrium into the myometrial wall. The tumor measures 3.5 x 3.0 x 3.0 cm (with 3.0 cm representing depth from endometrial surface to tumor base). It is friable and has a white-tan cut surface with hemorrhagic areas. It extends from the anterior aspect of the endometrial cavity in the fundic/cornu region to within 1.6 cm of the peritoneum over the anterior portion of the uterus. The mass extends to within 2.1 cm of the anterior peritoneal surface of the uterus. Sectioning through the myometrium reveals numerous tan-white whorled, well circumscribed nodules without areas of hemorrhage, necrosis, or degeneration. The largest of these nodules measures 10 cm in greatest dimension. The right fallopian tube measures 7.2 x 0.6 cm with an unremarkable serosa and a pinpoint

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Page 3 of 6
(Continued)

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lumen. The right ovary measures 2.6 x 2.4 x 2.0 cm and has an unremarkable granular white-tan appearance both on the external and internal aspects. The left fallopian tube measures 4.5 x 0.6 cm and is distorted by sutures. There is no obvious ovarian tissue on the left side (patient underwent left salpingo-oophorectomy in). Pieces of fresh tumor are saved for study. The specimen is representatively submitted in 22 cassettes.

Summary of sections:

- 1- anterior cervix
- 2- anterior LUS
- 3-4 anterior full thickness section of the uterus
- 5- posterior cervix
- 6- posterior LUS
- 7-8 posterior full thickness section of the uterus
- 9- tumor to anterior surface of uterus
- 10- tumor to anterior surface of uterus (piece cut in half to fit in one cassette)
- 11- hemorrhagic area of tumor
- 12- tumor and endometrial cavity
- 13- tumor and anterior myometrium
- 14-16 possible extension of tumor to posterior fundic uterine wall
- 17-18 large posterior nodule
- 19-20 nodules on the surface of the uterus
- 21- right tube and ovary
- 22- left adnexa

E. The specimen is received in formalin with proper patient identification, labeled "pelvic sidewall" and consists of 4 pieces of soft tan tissue measuring 1.2 x 1.0 x 0.3 cm in aggregate. The specimen is entirely submitted in one cassette.

F. The specimen is received in formalin with proper patient identification, labeled "cul-de-sac" and consists of 4 pieces of soft tan tissue measuring 0.8 x 0.6 x 0.3 cm in aggregate. The specimen is entirely submitted in one cassette.

G. The specimen is received in formalin with proper patient identification, labeled "bladder peritoneum" and consists of 4 pieces of soft tan tissue measuring 1.2 x 0.9 x 0.4 cm in aggregate. The specimen is entirely submitted in one cassette.

H. The specimen is received in formalin with proper patient identification, labeled "left pelvic nodes" and consists of a piece of fibroadipose tissue measuring 6.5 x 4.0 x 1.5 cm. Multiple pink-tan firm lymph nodes are identified ranging from 0.4 to 1.6 cm in greatest

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Page 4 of 6
(Continued)

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Criteria	Yes	No
Diagnosis Discrepancy		
Primary Tumor Site Discrepancy		
HPAA Discrepancy		
Prior Malignancy History		
Dual/Synchronous Primary Noted		
Case is (circle):	QUALIFIED	DISQUALIFIED
Reviewer Initials	RB	
Date Reviewed	7/5/10	

dimension. The largest lymph node is bisected and is unremarkable. The lymph nodes are entirely submitted in 4 cassettes.

Summary of sections:

- 1-2 possible lymph nodes
- 2-largest lymph node bisected
- 3-2 possible lymph nodes
- 4-one possible lymph node

I. Specimen is received in formalin with proper patient identification labeled "left para-aortic nodes" and consists of 2 pieces of fibroadipose tissue containing multiple lymph nodes ranging in size from 0.4-0.7 cm. The specimen is entirely submitted in 2 cassettes.

J. Specimen is received in formalin with proper patient identification labeled "right pelvic nodes" and consists of one piece of fibroadipose tissue measuring 6 x 4 x 3 cm. The tissue contains no obvious lymph nodes. The fibrous tissue is entirely submitted 5 cassettes.

K. Specimen is received in formalin with proper patient identification labeled "right para-aortic nodes" and consists of one piece of fibroadipose tissue containing multiple lymph nodes ranging in size from 0.4-0.9 centimeters. Specimen is entirely submitted in 2 cassettes.

L. The specimen is received in formalin with proper patient identification labeled "Appendix" and consists of a vermiform appendix measuring 3.2 cm long and 0.3 cm in average diameter with attached mesoappendix measuring 3.0 x 1.9 x 1.6 cm. The surface of the appendix shows unremarkable serosa. Serial sectioning reveals no lesions or signs of inflammation. Representative sections are submitted in one cassette.

Receive Date/Time:

Encounter Number:

Medical Record Number:

Electronically Signed Out

By:

M.D. on

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