Primary Lumor Site Discrepa	Incy			
HIPAA Discrepancy	<del></del>			<u> </u>
Prior Malignancy History				7
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Case is (circle):	WALIFIED /	DISQUALIF	!ED	<u> </u>
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##	# <b>01</b>

Patient Name:

Accession:

MRN: PAN:

Surgical Pathology Report

Final

101-0-3

Adenocarcinoma, indometrioid, NOS 8380/3 Sita: Indometrium C54.1 his

SURGICAL PATHOLOGY REPORT FINAL

Patient Name.

Address:

Gender: F

DOB:

(Age:

Service:Gynecology

Location: MRN'

Hospital 7:

Patient Type: SDSA

Accession #:

Taken: Received:

Accessioned: Reported:

physician(s):

, M.D.

other Related Clinical Data:

DIAGNOSIS:

UTERUS, ENDOMETRIUM, TOTAL ABDOMINAL HYSTERECTOMY
- ADENOCARCINOMA, ENDOMETRIOID TYPE WITH MUCINOUS FEATURES, FIGO GRADE 1

- ADENOCARCINOMA INVADES 4 MM WITH A TOTAL MYOMETRIAL THICKNESS OF 12 MM

- NO LYMPHVASCULAR SPACE INVASION IS IDENTIFIED

UTERUS, MYOMETRIUM, TOTAL ABDOMINAL HYSTERECTOMY - ADENOCARCINOMA BY DIRECT EXTENSION

UTERUS, CERVIX, TOTAL ABDOMINAL HYSTERECTOMY

- ADENOCARCINOMA INVOLVING STROMA AND MUCOSA

- ENDOCERVICAL POLYP

UTERUS, SEROSA, TOTAL ABDOMINAL HYSTERECTOMY - FIBROUS ADHESIONS

OVARY, RIGHT, BILATERAL SALPINGO-OOPHORECTOMY - NO HISTOPATHOLOGIC ABNORMALITY

FALLOPIAN TUBE, RIGHT, BILATERAL SALPINGO-OOPHORECTOMY

- MILD HYDROSALPINX

OVARY, LEFT, BILATERAL SALPINGO-OOPHORECTOMY
- PARAOVARIAN ADHESIONS

FALLOPIAN TUBE, LEFT, BILATERAL SALPINGO-OOPHORECTOMY

- NO HISTOPATHOLOGIC ABNORMALITY

LYMPH NODES, LEFT EXTERNAL ILIAC, EXCISION
- NO CARCINOMA IDENTIFIED IN SEVEN NODES (0/7)

- ENDOMETRIOSIS, FOCAL

LYMPH NODES, LEFT OBTURATOR, EXCISION

- NO CARCINOMA IDENTIFIED IN TWO NODES (0/2)

LYMPH NODES, RIGHT EXTERNAL ILIAC, EXCISION
- NO CARCINOMA IDENTIFIED IN THREE NODES (0/3)

LYMPH NODES, RIGHT OBTURATOR, EXCISION

- NO CARCINOMA IDENTIFIED IN THREE NODES (0/3)

LYMPH NODES, LEFT PERIAORTIC, EXCISION

- NO CARCINOMA IDENTIFIED IN TWO NODES (0/2) LYMPH NODES, RIGHT PERIAORTIC, EXCISION - NO CARCINOMA IDENTIFIED IN FOUR NODES (0/4)

Accession:

MRN: PAN:

APPENDIX, EXCISION - NO HISTOPATHOLOGIC ABNORMALITY

By this signature, I attest that the above diagnosis is based upon my personal examination of the slides(and/or other material indicated in the diagnosis).

\*\*\*Report Electronically Reviewed and Signed Out By M.D. \*\*\*

Intraoperative Consultation: "Called to pick up 'uterus, tubes, ovaries, cervix,' consisting of the above mentioned parts weighing overall 89 gm. The uterus measures 8 x 4.5 x 3.5 cm. The right ovary measures 2.7 x 3 x 1.cm, the right fallopian tube measures 5 x 0.5 x 0.5 cm, the left ovary measures 2.8 x 1.5 x 1.2 cm, and the left fallopian tube measures 5 x 0.5 x 0.5 cm. The left ovary is adherent to the left fallopian tube and there is a 1 cm cyst in the fallopian tube. One tan-pink, irregular mass occupies the entire endometrial cavity and measures 4 x 2.5 x 0.5 cm in the anterior endometrium and 4 x 2.5 x 0.5 cm in the posterior endometrium. The lower uterine segment appears involved on the anterior side by a skip lesion. Normal endometrium and tumor taken for and tumor bank. Rest for permanents, by . M.D. Intraoperative Consultation: M.D. Microscopic Description and Comment:

Microscopic examination substantiates the above cited diagnosis.

M.D.

History: The patient is a year old woman with endometrial cancer. Operative procedure: examination under anesthesia, exploratory laparotomy, total abdominal hysterectomy, and bilateral salpingo-oophorectomy with staging. Specimen(s) Received:

LYMPH NODE, LEFT EXTERNAL ILIAC LYMPH NODE, LEFT OBTURATOR

C: LYMPH NODE, RIGHT EXTERNAL ILIAC

LYMPH NODE, RIGHT OBTURATOR LYMPH NODE, LEFT PERIAORTIC LYMPH NODE, RIGHT PERIAORTIC D: E:

G: APPENDIX

UTERUS, TUBES, OVARIES AND CERVIX

Gross Description The specimens are received in eight formalin-filled containers, each labeled "The first container is labeled "left external iliac lymph nodes." It contains multiple pieces of yellow lobular fatty tissue aggregating to 2.5 x 3.2 x 1.2 cm. The fat is dissected to show multiple white-tan lymph nodes ranging from 0.4 to 1.3 cm in greatest dimension. Labeled Al and A2 entire largest lymph node; A3 and A4 - one lymph node each; A5 and A6 - multiple smaller lymph nodes. Tar 1 entire largest lymph node; A3 and A4 - one lymph node each; A5 and Ab - multiple smaller lymph nodes. Jar 1. The second container is labeled "left obturator lymph node." It contains a single piece of yellow lobular fatty tissue measuring 3.0 cm in greatest dimension that is sectioned to show two lymph nodes measuring 0.5 and 0.6 cm in greatest dimension. Labeled B1 and B2. Jar 1. The third container is labeled "right external iliac lymph nodes." It contains multiple pieces of yellow lobular fatty tissue that aggregate to 5.5 x 4.0 x 1.0 cm. The fat is dissected to show three putative lymph nodes ranging from 0.8 to 1.4 cm in greatest dimension. Labeled C1 and C2 - entire largest node; C3 and C4 - one lymph node each; C5 and C6 - sections of fatty tissue. Jar 1. The fourth container is labeled "right obturator lymph node." It contains multiple pieces of yellow lobular fatty tissue aggregating to 5.6 x 4.2 x 1.8 multiple pieces of yellow lobular fatty tissue aggregating to  $5.6 \times 4.2 \times 1.8$ 

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MRN: PAN:

cm. The fat is dissected to show three putative white-tan lymph nodes ranging cm. The fat is dissected to show three putative white-tan lymph nodes ranging from 1.4 to 2.4 cm in greatest dimension. Labeled DI and D2 - one entire node; D3 to D5 - one entire node; D6 - one entire node bisected. Jar 1. The fifth container is labeled "left periaortic lymph node." It contains two pieces of yellow fatty tissue measuring 1.5 and 3.0 cm in greatest dimension. The smaller piece is dissected to show only fatty tissue. The larger piece shows two putative tan lymph nodes measuring 0.3 and 2.0 cm in greatest dimension. Labeled E1 - smaller lymph node; E2 and E3 - entire larger lymph node; E4-remaining fatty tissue. Jar 0. E4-remaining fatty tissue. Jar 0.

The sixth container is labeled "right periaortic lymph node." It contains a single piece of yellow fatty tissue measuring 3.7 cm in greatest dimension that is sectioned to show two putative tan lymph nodes measuring 1.2 and 1.3 cm in greatest dimension. Labeled F1 and F2 - one lymph node each; F3 - remaining fatty tissue. Jar 0. The seventh container is labeled "appendix." It contains a 7.5  $\times$  0.6 cm appendix with minimal attached mesoappendix. The serosal surface is pink-tan and glistening. The appendix is sectioned to show unremarkable tan mucosa. Labeled glistening. The appendix is sectioned to snow unremarkable tan mucosa. Labeled G1. Jar 1. The eighth container is labeled "uterus, tubes, ovaries, cervix." It contains a composite specimen weighing 89 gm that is composed of uterus and bilateral tubes and ovaries. The uterus measures 8.0 cm from fundus to ectocervix, 4.5 cm from cornu to cornu, and 3.5 cm from anterior to posterior. The ectocervix is white-tan and focally hemorrhagic measuring 2.2 x 2.0 cm. The serosal surface is tan-brown and glistening with no fibrous adhesions noted grossly. The endocervical cavity is tan-brown with a herringbone pattern and measures 3.0 x 1.1 cm. There is an exophytic tan-brown nodule measuring 1.6 x 0.4 cm present in the anterior lower uterine segment extending grossly into the endocervical canal. Both the anterior and posterior portions of the endometrial cavity have been completely replaced by a fungating white-tan lesion measuring 3.5 x 3.0 cm in the anterior endometrium and 3.5 x 3.0 cm in the posterior endometrium. Grossly the endometrial lesion appears to extend to a maximum depth of 4 mm. The average gross myometrial thickness is 1.1 cm. The attached right ovary measures 2.7 x 2.0 x 1.0 cm and has a tan, glistening outer surface. It has been previously sectioned to show unremarkable white-tan ovarian tissue. The right end. It is unremarkable on section. The left ovary measures 2.8 x 1.5 x 1.2 cm and has a gray-tan, focally hemorrhagic outer surface. It has been previously sectioned to show unremarkable white-tan ovarian tissue. The left fallopian tube measures 5.0 x 0.5 cm and is sectioned to show unremarkable white-tan ovarian tissue. The left fallopian tube is adhesed to the left ovary. Labeled H1-anterior cervix; H2 - anterior lower uterine segment, including polypoid nodule; G1. Jar 1. anterior cervix; H2 - anterior lower uterine segment, including polypoid nodule; anterior endomyometrium; H4 and H5 - anterior endometrium; H6 - posterior cervix; H7 - posterior lower uterine segment; H8 - posterior endomyometrium; H9 and H10 - posterior endometrium; H11 - right adnexal structures; H12 - left adnexal structures. Jar 2.

SYNOPTIC REPORTING FORM FOR MALIGNANT ENDOMETRIAL TUMORS

HISTOPATHOLOGIC TYPE
The histologic diagnosis is adenocarcinoma, endometrioid type

FIGO GRADE
The FIGO Grade of the tumor is 0 to 5% solid growth pattern (FI)

TUMOR INVASION
Invasive tumor is present with superficial invasion into the luminal 1/3 of the myometrium

## Patient Name:

DOR:

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MRN: PAN:

TUMOR SIZE The tumor invades to a depth of 4 mm The myometrial thickness is 12 mm

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

LYMPHVASCULAR SPACE INVASION Lymphvascular space invasion by tumor is absent

REGIONAL LYMPH NODES (N) No regional lymph node metastasis (NO)

The regional lymph nodes are free of tumor in 21 nodes

The total number of lymph nodes examined is 21 Extranodal extension by tumor is not applicable; no nodal metastases are present

DISTANT METASTASIS (M) Distant metastasis cannot be assessed (MX)

PRIMARY TUMOR (TNM Category/FIGO Stage)
Tumor invades less than one-half of the myometrium (T1b/IB)

STAGE GROUPING The overall pathologic AJCC stage of the tumor is T2b/N0/MX

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