Odenocarcinoma, endometriord, Nos 8380/3 Sita: undometrium C54.1 H24/11 /w

Surgical Pathology

SLIDE DISPOSITION:



DIAGNOSIS:

- A. Abdomen, panniculectomy: Skin and subcutaneous tissue, 1720.0 grams identified grossly.
- B. Uterus, bilateral ovaries and fallopian tubes; hysterectomy and

bilateral salpingo-oophorectomy: FIGO grade I (of III)
endometrial

adenocarcinoma, endometrioid type, is identified forming a polypoid

mass $(3.2 \times 2.9 \times 1.0 \text{ cm})$ located in the posterior uterine wall.

The tumor invades 0.3 cm into the myometrium (total wall thickness

1.8 cm). The tumor does not involve the endocervix. Lymphovascular $\,$

space invasion is not identified. There is a single intramural

leiomyomata (0.6 cm in greatest dimension). Adenomyosis is present.

The bilateral ovaries and fallopian tubes are not involved.

Multiple (2 right, 0.8 cm and 1.2 cm in greatest dimension; 1 left,

- 1.4 cm in greatest dimension) paratubal cysts are identified.
- C. Lymph nodes, right pelvic, lymphadenectomy: Multiple
 (23) right
 pelvic lymph nodes are negative for tumor.
- D. Lymph nodes, left pelvic, lymphadenectomy: Multiple (18) left pelvic lymph nodes are negative for tumor.

With available surgical materials, [AJCC pT1N0] (7th edition, 2010).

This final pathology report is based on the gross/macroscopic

examination and the frozen section histologic evaluation of the

specimen(s). Hematoxylin and Eosin (H&E) permanent sections are

reviewed to confirm these findings. Any substantive changes

identified on permanent section review will be reflected in a revised report.

GROSS DESCRIPTION:

A. Received fresh labeled "pannus" is a 1720.0 gram portion of skin

and subcutaneous tissue, without umbilicus. No lesions identified.

Gross only. Grossed by

B. Received fresh labeled "uterus, right and left fallopian tubes

and ovaries" is a 95.0 gram uterus with attached bilateral fallopian

tubes and ovaries. The uterine serosa is smooth. There is a 3.2 \boldsymbol{x}

 2.9×1.0 cm polypoid mass in the posterior wall of the endometrial

cavity, grossly invading 0.3 cm. The myometrial thickness is 1.8

cm. There is a single intramural leiomyoma (0.6 cm in greatest

dimension). There is a 1.7 \times 1.0 \times 1.0 cm right ovary with a smooth

outer surface and a solid cut surface with a 4.2 \times 0.5 cm right

fallopian tube which has multiple (2) paratubal cysts (0.8 cm and

1.2 cm in greatest dimension). There is a 1.8 x 1.1 x 0.9 cm left

ovary with a smooth outer surface and a solid cut surface with a 6.5

 \times 0.5 cm left fallopian tube with a 1.4 cm in greatest dimension

paratubal cyst. Representative sections are submitted.

- C. Received fresh labeled "right pelvic lymph nodes" is an $8.3\ x$
- $5.0 \times 2.4 \text{ cm}$ aggregate of adipose and lymphatic tissue. Multiple
- (24) lymph nodes are identified. All lymph nodes submitted.
- D. Received fresh labeled "left pelvic lymph nodes" is a 7.3×4.6
- x 1.8 cm aggregate of adipose and lymphatic tissue. Multiple (19)

lymph nodes are identified. All lymph nodes submitted.

Criteria		Yes	No
Diagnosis Discrepancy			
Primary Tumor Site Discrepancy			
HIPAA Discrepancy			
Prior Malignancy History			
Dual/Synchronous Primary Nated	7	7	
Case is (circle): // QUALIFIED / DEQUALIFIED/			
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