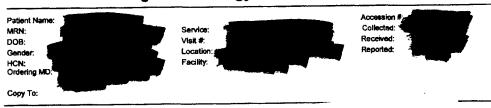
Surgical Pathology Consultation Report



Specimen(s) Received

- 1. Lymph-Node: Left Hiac, external
- 2. Uterus :Uterus cervix bilateral adnexal
- 3. Lymph node :Right pelvic Lymph nodes
- 4. Lymph node :Right common iliac node
- 5. Lymph node :Left pelvic Lymph node 6. Lymph node :Left para-aortic lymph node

Diagnosis

- 1. Lymph nodes (left external iliac):
- Positive for carcinoma, one of one node (1/1)
- 2. Uterus,cervix, ovaries and tubes:

Uterus:

- ENDOMETRIAL CARCINOMA, ENDOMETRIOID TYPE, FIGO 3/3, pT1b N1
- Outer half of myometrium
- No cervical involvement but tumor extends to lower uterine segment
- Lymphovascular space invasion present, extensive
- Adenomyosis

Ovaries:

- Endometriosis

Fallopian tubes:

- -No diagnostic pathology.
- 3. Lymph node: Right pelvic Lymph nodes:
- Positive for carcinoma, four of twenty four nodes (4/24)
- 4. Lymph node(right common iliac):
- Positive for carcinoma, one of one node (1/1)
- 5. Lymph nodes (left pelvic):
- Seven lymph nodes, negative for carcinoma (0/7)
- 6. Lymph nodes (left para-aortic):
- Three lymph node, negative for carcinoma (0/3)

105-0-3
Carcinoma indometrioid NOS
Sites Indometrion C54.1

M
11/13/11

Criteria

Ulagnosis Discrepancy

Primary Tumor Site Discrepancy

HiPAA Discrepancy

Prior Malignancy History

Doul/Synchronous Primary Noted

Case is (circle):

Reviewer pulsals

W 11 3 1

Page 1 or 4





Comment

Immunohistochemistry shows the tumor cells to be positive for ER and negative for P53 and p16.

Synoptic Data

Specimen:

Uterine corpus

Cervix Right ovary

Left ovary Right fallopian tube

Left fallopian tube

Procedure:

Simple hysterectomy

Bilateral salpingo-oophorectomy

Other (specify): nodes

Lymph Node Sampling:

Performed: Pelvic lymph nodes

Performed: Para-aortic lymph nodes

Performed: iliac

Specimen Integrity: Tumor Size:

Intact hysterectomy specimen Greatest dimension: 5.0 cm

Additional dimension: 4.0 cm Additional dimension: 3.5 cm

Endometrioid adenocarcinoma, not otherwise characterized

Histologic Type: Histologic Grade:

FIGO grade 3

Myometrial Invasion:

Present

Myometrial thickness: 15 mm

50% or greater myometrial invasion

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

Margins:

Uninvolved by invasive carcinoma

Lymph-Vascular Invasion:

Present

TNM Descriptors:

Not applicable

Primary Tumor (pT): Regional Lymph Nodes (pN): pT1b (IB): Tumor invades more than or one-half of the myometrium pN1 (IIIC1): Regional lymph node metastasis to pelvic lymph nodes Pelvic lymph nodes examined: 33

Pelvic lymph nodes involved: 6 Para-aortic lymph nodes examined: 3 Para-aortic lymph nodes involved: 0

Distant Metastasis (pM):

Not applicable

Electronically verified by:

Clinical History Endo ca

Gross Description

1. The specimen container labeled with the patient's name and as "left external iliac lymph node" contains one lymph node received fresh, bisected and examined in toto by frozen section.

1A, 1B frozen section blocks resubmitted.

Page 2 of 4







2. The specimen container labeled with the patient's name and as "uterus, cervix, bilateral adnexa" contains a uterus with cervix, bilateral ovarles and fallopian tubes received in 10% buffered formalin. The specimen weighs 249.2 g. The uterus with the cervix measures 9.4 cm SI x 7.4 cm ML x 6.0 cm AP. The uterine serosa has hemorrhagic, fibromembranous adhesions. The endometrial cavity measures 5.7 cm in length, 4.0 cm comu to cornu. There is a tumor mass occupying the entire endometrial cavity measuring 5.0 cm SI x 4.0 cm ML x 3.5 cm AP. The tumor is tan, soft to solid and extends from the fundus to the lower uterine segment. It extends superficially into the myometrium and it is at least 2 cm away from the serosal surface. The myometrium, firm, pink-tan, with focal hemorrhage measuring 1.5 x 1 x 1 cm. The cervix measures 3.1 cm ML x 3.0 cm AP. The exocervix is smooth and slightly hemorrhagic, more so anteriorly. The external cervical os is sit shaped and measures 0.9 cm. The endocervix has a 0.3 x 0.1 x 0.1 cm anterior cervical canal polyp and a 0.8 x 0.5 x 0.2 cm posterior cervical canal polyp. Both polyps are approximately 1 cm from the lower uterine segment tumor. The right ovary measures 1 x 0.4 x 0.4 cm. It is solid with some hemorrhagic, membranous adhesions on the surface and focally hemorrhagic on cut surface. The left ovary is not grossly identified. Right adnexal tissue with query ovarian tissue present measures 2.7 x 0.6 x 0.5 cm. The right fimbriated fallopian tube measures 7.5 cm in length and 0.6 cm in diameter and is grossly unremarkable. The left fimbriated fallopian tube measures 7.2 cm in length and 0.5 cm in diameter and is grossly unremarkable.

Sections of the right ovary, right and left fallopian tubes and endometrial tumor are stored frozen.

Representative sections are submitted as follows:

2A, 2B, right ovary in toto.

2C, 2D, left adnexal tissue query-ovary.

2E, 2F right fallopian tube, in toto (2F-longitudinally bisected fimbria.)

2G. 2H, left fallopian tube, in toto (2H-longitudinally bisected firmbria.)

21-2K sagittal anterior cervix (21- with small cervical canal polyp)

2L, 2M sagittal anterior lower uterine segment.

2N, 2O sagittal posterior cervix with cervical canal polyp in toto.

2P sagittal posterior lower uterine segment.

2Q, 2R full thickness anterior endomyometrium corpus, section bisected.

2S full thickness anterior endomyometrium fundus, section bisected.

2T uterine wall with focal hemorrhagic myometrium and serosal adhesions.

2U, 2V full thickness posterior endomyometrium, section bisected.

2W posterior endomyometrium with tumor.

- 3. The specimen container labeled with the patient's name and as "right pelvic lymph nodes" contains one piece(s) of fatty tissue measuring $6.5 \times 4 \times 1.7$ cm received in 10% buffered formalin. Multiple lymph node(s) are identified measuring from $0.4 \times 0.3 \times 0.2$ cm to $2.8 \times 1.3 \times 0.6$ cm in diameter. The specimen is submitted as follows:
- 3A-3C one lymph node bisected each block.

3D-3F multiple lymph nodes each block.

3G representative fatty tissue

- 4. The specimen container labeled with the patient's name and as "right common iliac node" contains one piece(s) of fatty tissue measuring 3.8 x 1.7 x 1.3 cm received in 10% buffered formalin. One lymph node(s) is identified measuring 2.8 x 1.4 x 1.0 cm in diameter. The specimen is submitted in toto as follows:
- 4A-4C one lymph node sectioned.
- 4D the remaining fatty tissue.
- 5. The specimen container labeled with the patient's name and as "left pelvic lymph node" contains two piece(s) of fatty tissue measuring $2.5 \times 1.2 \times 0.6$ cm and $3.8 \times 2 \times 1.2$ cm received in 10% buffered formalin. Three lymph node(s) are identified measuring from $0.8 \times 0.3 \times 0.2$ cm to $1.8 \times 0.8 \times 0.6$ cm in diameter. The specimen is submitted as follows: 5A two lymph nodes.
- 5B, one lymph node bisected
- 5C 4 nodes.
- 6. The specimen container labeled with the patient's name and as "left para-aortic lymph node" contains two piece(s) of fatty tissue measuring approximately $1.5 \times 0.5 \times 0.5$ cm each received in 10% buffered formalin. Three lymph node(s) are identified measuring from $0.6 \times 0.3 \times 0.2$ cm to $1.3 \times 0.4 \times 0.3$ cm in diameter. The specimen is submitted in toto as follows:

6A two lymph nodes.

2B one lymph node bisected



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Quick Section Diagnosis

1. External iliac lymph node, left, qs: - Negative for carcinoma OR called at

Page 4 of 4