

ICD-O-3

Path Adenocarcinoma, papillary serous.  
 CECF Adenocarcinoma, serous NOS  
 Site: Endometrium 846013  
 NOS 844113  
 JAD 2/18/13

Surg Path

UUID: 82A668E5-6889-4C94-BEED-F4FF2278D8B1  
 TCGA-B5-A50E-01A-PR

Redacted



CLINICAL HISTORY:

Malignant neoplasm cervix uteri NOS=180.9. Per  
 papillary carcinoma of the uterus.

history of serous

GROSS EXAMINATION:

A. "Uterus, cervix, bilateral tubes and ovaries", received fresh and placed in formalin on [redacted] is a 852 gram, 19.8 x 13.7 x 7.4 cm hysterectomy specimen with bilateral attached adnexa. The cervix is 4.9 cm in diameter with a 2.3 cm diameter os. The serosa is tan and dull with no adhesions. The endometrial cavity is filled with serosanguinous fluid and the endometrial lining is covered by a 13.7 x 8.5 x 1.4 cm tan, friable, papillomatous mass replacing the entire endometrium and extending through the lower uterine segment up to the cervical squamocolumnar junction grossly. The paracervical soft tissue and serosa underlying the tumor is inked blue. Grossly, the tumor invades 0.6 cm into a 1.1 cm thick myometrium (deepest invasion). The myometrium ranges from 1.1 to 2.3 cm thick. Additionally, the myometrium has multiple intramural nodules with a tan-white whorled appearance up to 2.3 cm in greatest dimension.

The right ovary (2 x 1.5 x 0.9 cm) has a smooth tan external surface and a tan unremarkable cut surface. The right fimbriated fallopian tube (5.2 cm long, 0.5 cm in diameter) has multiple paratubal cysts up to 0.4 cm and a 0.2 x 0.2 x 0.1 cm white plaque on the external surface. The tube has a patent lumen with a tan lining. The left ovary (2.5 x 1.5 x 1 cm) has a smooth tan external surface with a 0.5 cm diameter simple cyst. The cut surface is tan and unremarkable. The left fimbriated fallopian tube (5 cm long, 0.7 cm diameter) has a purple external surface with multiple paratubal cysts up to 0.4 cm diameter. On section, the lumen is grossly dilated up to 0.4 cm with a tan lining. The tube appears to be looped around onto itself. In the periadnexal soft tissue there is a 0.4 x 0.3 x 0.2 cm tan calcified nodule.

BLOCK SUMMARY:

- A1-2- anterior cervix
- A3- anterior and lower uterine segment
- A4-5- posterior cervix 1
- A6- posterior lower uterine segment
- A7-9- mass-anterior endomyometrium, full thickness
- A10-12- mass-posterior endomyometrium, full thickness (A10- deepest invasion)
- A13- additional myometrial nodule with respect to primary mass and normal myometrium
- A14- right ovary
- A15- right fallopian tube (with plaque)
- A16- left ovary
- A17- left tube
- A18- left periadnexal calcified nodule following decalcification

B. "Right vaginal margin", received fresh and placed in formalin on [redacted] at is a 2.8 x 1.4 x 1 cm fragment of tan-brown tissue composed of 2 cm of tan smooth mucosa with an opposite roughened deep stromal margin (inked blue). The specimen is serially sectioned and submitted entirely in blocks B1-4.

C. "Right pelvic lymph nodes", received fresh and placed in formalin on [redacted] is a 4 x 3.5 x 2 cm fragment of adipose tissue containing multiple lymph nodes up to 1.5 cm in greatest dimension. The lymph nodes display a firm, tan-white cut surface. There are several matted lymph nodes which appear grossly positive.

BLOCK SUMMARY:

- C1- one lymph node, serially sectioned
- C2- multiple lymph nodes
- C3- multiple lymph nodes
- C4- matted lymph nodes, representative sections

D. "Left pelvic lymph nodes", received fresh and placed in formalin on [REDACTED] at [REDACTED] is a 4.5 x 3.5 x 1.5 cm aggregate of two fragments of adipose tissue containing multiple tan, firm lymph nodes up to 1.4 cm in greatest dimension. Multiple lymph nodes are matted and appear grossly positive on cut section.

BLOCK SUMMARY:

- D1- one lymph node, bisected
- D2- matted (grossly positive) lymph nodes, representative sections

E. "Omentum", received fresh and placed in formalin on [REDACTED] is a 5 x 5 x 1.5 cm fragment of adipose tissue consistent with omentum. Upon thorough examination no masses or lesions are grossly identified. Representative sections submitted in blocks E1-4.

[REDACTED]

MICROSCOPIC EXAMINATION:

Microscopic examination is performed.

PATHOLOGIC STAGE:

PROCEDURE: Hysterectomy salpingo-oophorectomy, omentectomy, lymph node dissection

PATHOLOGIC STAGE (AJCC 7th Edition): pT3b pN1 pMX

NOTE: Information on pathology stage and the operative procedure is transmitted to this Institution's Cancer Registry as required for accreditation by the Commission on Cancer. Pathology stage is based solely upon the current tissue specimen being evaluated, and does not incorporate information on any specimens submitted separately to our Cytology section, past pathology information, imaging studies, or clinical or operative findings. Pathology stage is only a component to be considered in determining the clinical stage, and should not be confused with nor substituted for it. The exact operative procedure is available in the surgeon's operative report.

DIAGNOSIS:

- A. "UTERUS, CERVIX, BILATERAL TUBES AND OVARIES" (HYSTERECTOMY, BILATERAL SALPINGO-OOPHORECTOMY):

CARCINOMA OF THE ENDOMETRIUM:

TUMOR SITE: DIFFUSE.

HISTOLOGIC TYPE: SEROUS PAPILLARY ADENOCARCINOMA.

FIGO GRADE: 3 OF 3.

TUMOR SIZE: 13.7 CM (LARGEST DIMENSION).

MAXIMUM DEPTH OF MYOMETRIAL INVASION: THROUGH FULL THICKNESS OF MYOMETRIUM (1.1 CM), TO ABUT THE SEROSAL SURFACE.

LYMPHATIC/VASCULAR INVASION: PRESENT, EXTENSIVE.

ADJACENT NON-NEOPLASTIC ENDOMETRIUM: ABSENT.

REMAINING MYOMETRIUM: LEIOMYOMATA (LARGEST 2.3 CM).

CERVIX: EXTENSIVELY INVOLVED BY INVASIVE CARCINOMA.

SEROSA: FREE OF TUMOR.

SPECIMEN MARGINS: SEE SEPARATELY SUBMITTED VAGINAL CUFF MARGIN BELOW.

OVARIES, RIGHT AND LEFT: POSITIVE FOR CARCINOMA (BILATERALLY).

FALLOPIAN TUBE, RIGHT AND LEFT: POSITIVE FOR CARCINOMA (BILATERALLY).

[REDACTED]

B. "RIGHT VAGINAL MARGIN" (EXCISION):

SQUAMOUS MUCOSA, POSITIVE FOR ADENOCARCINOMA, WITH EXTENSIVE INVOLVEMENT OF LYMPHATIC/VASCULAR SPACES.

C. "RIGHT PELVIC LYMPH NODES" (LYMPHADENECTOMY):

METASTATIC ADENOCARCINOMA IN FIVE OF FOURTEEN LYMPH NODES (5/14).

D. "LEFT PELVIC LYMPH NODES" (LYMPHADENECTOMY):

METASTATIC ADENOCARCINOMA IN SEVEN OF EIGHT LYMPH NODES (7/8).

E. "OMENTUM" (OMENECTOMY):

BENIGN ADIPOSE TISSUE.  
NEGATIVE FOR MALIGNANCY.

I certify that I personally conducted the diagnostic evaluation of the above specimen(s) and have rendered the above diagnosis(es).

Performed by:

Attending MD:

Ordering MD:

Consulting MDs:

Criteria	Yes	No
Diagnosis Discrepancy		
Primary Tumor Site Discrepancy		
HP/AA Discrepancy		
Prior Malignancy History		
Dual/Synchronous Primary		
Case is (circle):	QUALIFIED	DISQUALIFIED
Reviewer Initials	Date Reviewed: 1/28/13	