

Patient Name: [REDACTED]
DOB: [REDACTED]

MRN: [REDACTED]

Surgical Pathology Report

Final

UUID: 72D0C467-BF42-45A3-B472-0065287B1705
TCGA-C5-A902-01A-PR

Redacted

SURGICAL PATHOLOGY REPORT

* Consult Report *

FINAL

ICD-O-3
Carcinoma, squamous
cell NOS 0867013
Site: Cervix NOS C53.9

05/12/14

Patient Name:
Address:

Service:
Location:

Accession #:
Taken:

Gender:
DOB:

MRN:
Hospital #:
Patient Type:

Received:
Accessioned:
Reported:

Physician(s): [REDACTED] M.D.

DIAGNOSIS

UTERUS, CERVIX, BIOPSY

- INVASIVE POORLY DIFFERENTIATED SQUAMOUS CELL CARCINOMA ARISING IN SEVERE SQUAMOUS DYSPLASIA (CIN3) INVADING THE ENTIRE TISSUE THICKNESS (5 MM) (SEE COMMENT)

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

MD

Report Electronically Reviewed and Signed Out By [REDACTED] MD

Microscopic Description and Comment:

The tumor involves all the tissue material on the slide, and has a thickness of at least 5 mm. It is a solid poorly differentiated squamous cell carcinoma arising in severe squamous dysplasia (CIN3). While there is cytoplasmic clearing in many areas of the tumor, the cytologic atypia is not as severe as that seen in clear cell carcinoma. In addition, a single pattern is seen, solid, while clear cell carcinomas usually are composed of multiple patterns, glandular and papillary in addition to the solid pattern. Further support of the squamous origin of this tumor is that it is arising in squamous dysplasia.

History:
(Not Provided)

Materials Received:

Received one slide labeled [REDACTED] and sublabeled 2. The material is accompanied by a corresponding

Criteria:	fw 15/15/13	Yes	No
Diagnosis Discrepancy			
Primary Tumor Site Discrepancy			
HIPAA Discrepancy			
Prior Malignancy History			
Dual/Synchronous Primary Noted			
Case is [circle]: <input checked="" type="checkbox"/> QUALIFIED <input type="checkbox"/> DISQUALIFIED			
Reviewer Initials:		Date Reviewed:	2013