

Sex: Female  
D.O.B.:  
MRN #:  
Ref Phys:

Collected:  
Received:  
Reported:

Accession #:  
Acct/Reg:

# SPECIAL PATHOLOGY REPORT

## DIAGNOSIS

### DIAGNOSIS:

#### A. Uterus, radical hysterectomy:

##### Tumor Characteristics:

1. Histologic type: ~~Basaloid squamous cell carcinoma~~, Basaloid type, non-keratinizing
2. Histologic grade: 3/3
3. Tumor site: Endocervical mucosa.
4. Tumor size: 3.0 x 2.6 cm.
5. Stromal invasion: Tumor is diffusely invasive throughout the stroma, measuring at least 2.0 cm deep into the stromal tissue.
6. Lymphovascular space invasion: Present and diffuse.

##### Surgical Margin Status:

1. Margins uninvolved: Vaginal, paracervical soft tissue, uterine serosa.
2. Margins involved: None.

##### Lymph Node Status:

1. See parts B through G.

##### Other:

1. Other significant findings:

- a. Tumor confined to cervical region, not extending into the lower uterine segment, endometrium or myometrium.
- b. Endometrium with atrophic pattern with prominent stromal luteinization.
- c. No significant abnormality of myometrium.
- d. No significant abnormality of serosa.

2. pTNM stage: pT1b1(N1 FIGO IIIB)

- B. Left lower common and aortic, iliac lymph nodes, excision:  
Eight lymph nodes, negative for metastatic disease.

- C. Left external iliac lymph nodes, excision:  
Three lymph nodes, negative for metastatic disease.

- D. Left obturator lymph nodes, excision:  
Two lymph nodes, negative for metastatic disease.

- E. Right common iliac and lower aortic lymph nodes, excision:  
One of seven lymph nodes positive for metastatic carcinoma.

- F. Right external iliac lymph nodes, excision:  
Two lymph nodes, negative for metastatic disease.

- G. Right obturator lymph nodes, excision:  
Two lymph nodes, negative for metastatic disease.

- H. Omentum, excision:  
No diagnostic evidence of malignancy.

ICD-O-3

Carcinoma, Squamous cell,  
basaloid type 8083/3

Site: cervix, NOS C53.9

fw 4/19/11

UUID:D5E65FAE-5BC9-43A9-89D0-AA7D266F3C06  
TCGA-FU-A23K-01A-PR

Redacted



Criteria	Yes	No
Diagnosis Discrepancy		X
Primary Tumor Site Discrepancy		X
HIPAA Discrepancy		X
Prior Malignancy History		X
Dual/Synchronous Primary Malignancy		X
Cases (Final)		X
Reviewer Initials	QUALIFIED	DISQUALIFIED
Date Reviewed:	fw 4/19/11	

**CLINICAL HISTORY:**

Preoperative Diagnosis: Cervical cancer. Patient has IUD.

Postoperative Diagnosis:

Symptoms/Radiologic Findings:

**SPECIMENS:**

- A. Radical hysterectomy
- B. Left lower common and aortic iliac
- C. Left external iliac
- D. Left obturator
- E. Right common iliac and lower aortic
- F. Right external iliac
- G. Right obturator
- H. Omentum

**GROSS DESCRIPTION:**

The specimen is received in eight containers labeled with the patient's name.

Container A is additionally labeled radical hysterectomy specimen patient has IUD and contains a 111.4 g radical hysterectomy specimen comprised of uterine corpus (5.3 cm in length x 4.0 x 3.0 cm), uterine cervix (4.5 cm in length x 4.0 x 3.0 cm), vaginal cuff (0.1 up to 2.0 cm in length), right paracervical soft tissue (3.5 x 2.5 x 1.5 cm), and left paracervical soft tissue (4.0 x 3.0 x 1.0 cm). The paracervical soft tissues are inked. On section and palpation, a possible 0.3 cm firm fatty lymph node is identified within the right paracervical soft tissue. The endocervical mucosa is pink-tan and glistening and is remarkable for a 3.0 x 2.5 cm tan-brown fungating mass. This mass approaches to within 1.0 cm of the vaginal cuff margin. The endocervical canal is yellow-tan mucoid with the usual folds. The aforementioned mass is located on the posterior aspect of the cervix and approaches within 1.5 cm of the closest inked paracervical soft tissue margin. This mass does not involve the lower uterine segment. The endometrial canal contains a white T-shaped intrauterine device. The triangular endometrium is pink-tan and lush with an average thickness of 0.3 cm. The surrounding myometrium is pink-tan and fibrous with an average thickness of 1.4 cm. No nodules or lesions are identified. Representative sections are submitted in cassettes A1-17 labeled as follows: A1 one whole possible right-sided lymph node; A2 anterior vaginal cuff margin, en face; A3 posterior vaginal cuff margin, en face; A4 right paracervix, perpendicular; A5 left paracervix, perpendicular; A6 anterior endocervix; A7 anterior lower uterine segment; A8 and 9 posterior cervical mass to closest inked paracervical margin, perpendicular; A10 - 12 additional posterior cervical mass; A13 posterior lower uterine segment; A14 and 15 full-thickness anterior endomyometrium; A16 and 17 full-thickness posterior endomyometrium. Additionally, a yellow and green cassette are submitted for genotoxics each labeled.

Container B is additionally labeled left lower common and aortic iliac and contains a 5.3 x 4.0 x 1.5 cm aggregate of yellow-tan fibrofatty soft tissue. On palpation, eight possible firm fatty lymph nodes are identified ranging from 0.3 up to 1.5 cm in greatest dimension. They are entirely submitted in cassettes B1 - 4 labeled as follows: B1 four whole possible lymph nodes; B2 two whole possible bisected lymph nodes (one inked); B3 and 4 one whole possible uncut lymph node in each cassette.

Container C is additionally labeled left external iliac and contains a 5.0 x 4.0 x 2.0 cm aggregate of yellow-tan fibrofatty soft tissue. On palpation, three possible firm fatty lymph nodes are identified ranging from 1.5 up to 2.5 cm in greatest dimension. They are entirely submitted in cassettes C1 - 4 labeled as follows: C1 and 2 one whole possible lymph node in each cassette; C3 and 4 one whole possible bisected lymph node.

Container D is additionally labeled left obturator and contains a 4.5 x 3.0 x 1.3 cm yellow-tan fibrofatty soft tissue. On palpation, two possible firm fatty lymph nodes are identified 1.0 and 2.0 cm in greatest dimension. They are entirely submitted in cassettes D1 and 2 labeled as follows: D1 and 2 one whole possible bisected lymph node in each cassette.

Container E is additionally labeled right common iliac and lower aortic and contains a 5.0 x 4.0 x 3.0 cm aggregate of yellow-tan fibrofatty soft tissue. On palpation, seven possible firm fatty lymph nodes are identified ranging from 0.3 up to 3.0 cm in greatest dimension. They are entirely submitted in cassettes E1 - 3 labeled as follows: E1 five whole possible lymph nodes; E2 and 3 one whole possible bisected lymph node in each cassette.

Container F is additionally labeled right external iliac and contains a 7.0 x 4.0 x 2.0 cm aggregate of yellow-tan fibrofatty soft tissue. On palpation, two possible firm fatty lymph nodes are identified 1.0 and 2.5 cm in greatest dimension. They are entirely submitted in cassettes F1 - 3 labeled as follows: F1 one whole possible lymph node; F2 and 3 one whole possible bisected lymph node.

Container G is additionally labeled right obturator a 4.5 x 2.5 x 2.0 cm yellow-tan fibrofatty soft tissue. On palpation, two possible firm fatty lymph nodes are identified 0.7 and 1.5 cm in greatest dimension. They are entirely submitted in cassette G labeled as follows: G one whole possible lymph node.

Container H is additionally labeled omentum and contains a 30.0 x 5.5 x 2.0 cm yellow-tan finely lobulated fibrofatty soft tissue consistent with omentum. On section and palpation, no nodules or lesions are identified. The cut surface is yellow-tan and greasy. Representative sections are submitted in cassettes H1 - 4 labeled.