



Final Surgical Pathology Report

Procedure:

Diagnosis

A. Right ovary, excision:

Metastatic poorly differentiated adenosquamous carcinoma  
Consistent with origin from the patient's cervical primary

B. Uterus, cervix, bilateral fallopian tubes, left ovary, upper vagina  
and parametrium, excision:

Cervical Adenosquamous carcinoma, poorly differentiated, 6 cm size  
Extension invasive tumor into lower uterine segment with  
lymphovascular space invasion  
Extension of *in situ* tumor into endometrial lining  
Vaginal and parametrial tissues including margins negative for tumor  
Bilateral fallopian tubes negative for malignancy  
Left ovary: Negative for malignancy

C. Para-aortic lymph nodes, dissection:

7 lymph nodes negative for malignancy (0/7)

Microscopic Description:

A-C. Microscopic examination performed and summarized in the cervical  
cancer template below:

Histologic type: Adenosquamous carcinoma

Histologic grade: Poorly differentiated

Primary tumor (pT) TNM (FIGO): Tumor was visible and 6 cm in greatest  
dimension without extension into vaginal tissue are parametrial tissue  
(pT2a) (FIGO IVB)

Margins of resection:

Distance of tumor to closest margin 1 mm from anterior cervical  
wall margin segment margin

Presence of carcinoma *in situ* at distal margin: Negative  
Vascular invasion: Venous and lymphatic space invasion are identified  
within the lower uterine segment and slide B12

Regional lymph nodes (pN): The seven para-aortic lymph nodes which were  
evaluated are negative for tumor (limited pN0)

Distant metastasis (pM): The right ovary is positive for metastatic  
poorly differentiated adenosquamous carcinoma (greater than 10 cm  
tumor) (pM1)

Other findings: The endometrium also contains tumor which mimics  
atypical complex hyperplasia but given the extensive amount of tumor  
within the cervix is compatible with *in situ* spread of cervical tumor  
into the endometrial cavity.

Specimen

A. Right ovary

B. Uterus, cervix, bilateral tubes, left ovary, upper vagina,  
parametrium

C. Para-aortic lymph nodes

Clinical Information

Cervical cancer

Intraoperative Consultation

A. Right ovary, excision: Consistent with metastatic adenosquamous  
carcinoma.

CSCF ICD-0-3  
Carcinoma, squamous cell NOS  
path 8070/3  
Carcinoma, adenosquamous 8566/3  
Site Right Ovary NOS C56.9  
JW 7/25/13

**Gross Description**

A. Received fresh labeled "right tube and ovary" is a 499 g, 13 x 10 x 8 cm soft lobulated dusky tan-yellow-pink ovary. On sectioning, the cut surfaces are soft and focally cystic pale tan and somewhat multinodular. A scant amount of residual ovarian stroma with identifiable corpora lutea and corpora albicantia is identified along one aspect (see block 10). No fallopian tube is present. Two frozen sections are performed. Tissue procurement was performed.

B. Received fresh labeled "uterus, cervix, bilateral tubes, left ovary, upper vagina, parametrium" is a 253 g, 6.7 x 5.3 x 4.3 cm symmetrical uterine corpus with attached 5.1 cm cervix, bilateral fallopian tube segments and left ovary. The serosa is smooth tan-pink. A rim of glistening tan-white vaginal mucosa surrounds a markedly dilated, annular, 6.2 cm dusky tan-pink ectocervix. A 6.0 x 4.5 cm rubbery glistening tan-white-pink tumor mass protrudes from the cervical os. The vaginal margin, paracervical margin, and parametrial tissues are inked blue. A portion of the tumor is submitted for tissue procurement as requested. On opening, a scant amount of residual glistening tan-pink oval mucosa is identified along the left and posterior aspect.

The aforementioned tumor mass measures 10.0 x 5.8 cm, involves the remainder of the cervix (predominantly from approximately 7 o'clock to 12 o'clock) and extending into the anterior and posterior lower uterine segment and anterior uterine cavity. The tumor has a maximal thickness of 4 cm, extending to within 0.3 cm of the inked paracervical surface. The uninvolved uterine cavity is lined by glistening tan-pink endometrium averaging 0.5 cm. The myometrium is smooth to mildly trabecular tan-pink and measures up to 3 cm. The left ovary measures 3.5 x 3.3 x 2.4 cm. Stroma is pale tan with identifiable corpora lutea and corpora albicantia. In addition, there are several smooth lined cystic structures averaging 0.3 cm. Bilaterally, the fimbriated right and left fallopian tube segments average 8 cm in length and 0.4 cm in diameter. The lumina are pinpoint and stellate.

Summary: 1 through 4 - vaginal cuff margin in a clockwise manner beginning at 12-3 o'clock, 5 and 6 - bisected cervix, 12 o'clock, 7 and 8 - anterior cervix/lower uterine segment with tumor full thickness to inked surface of specimen, 9 and 10 - bisected posterior cervix, continuity inked orange, 11 and 12 - bisected section posterior cervix/Lus including tumor full thickness to inked surface of specimen, continuity inked black, 13 and 14 - right parametrial tissue, 15 and 16 - left parametrial tissue 17 - anterior endomyometrium, 18 - posterior endomyometrium, 19 and 20 - left ovary and tube, 21 - right fallopian tube

C. Received fresh labeled "periaortic lymph nodes" is a 4.8 x 3.0 x 1.7 cm aggregate of soft, lobulated tan gold adipose tissue. Several soft to slightly rubbery tan-pink tissues measuring up to 1.4 cm are recovered.

Summary: 1 - 4 lymph nodes, 2 - 2 lymph nodes, 3 - trisected largest lymph node

*Metastatic adenosquamous carcinoma to ovary from primary cervical adeno, squamous cell*

Criteria	7/14/13	Yes	No
Diagnosis Discrepancy		✓	
Primary Tumor Site Discrepancy		✓	
HIPAA Discrepancy		✓	
Prior Malignancy History			
Dia/Synchronous Primary Notes			
Case is (circle):	QUALIFIED	/ DISQUALIFIED	
Reviewer Initials	JK	Date Reviewed:	7/16/13

BCR