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TCGA-HM-A6W2-06A-PR

Redacted



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

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.

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	lw 7/14/13	Yes	No
Diagnosis Discrepancy		✓	
Primary Tumor Site Discrepancy		✓	
HIAA Discrepancy		✓	
Prior Malignancy History		✓	
Dual/Synchronous Primary Nodes		✓	
Case is (circle):	QUALIFIED / DISQUALIFIED	✓	
Reviewer Initials	lw	Date Reviewed:	7/14/13

BCR