

1CD-0-3

Carcinoma, endometrioid, NOS 8380/3  
Site: Endometrium 254.1

hw 3/28/11

**PATIENT HISTORY:**

CHIEF COMPLAINT/ PRE-OP/ POST-OP DIAGNOSIS: Endometrial cancer.  
LMP DATE: Postmenopausal.  
PROCEDURE: Total abdominal hysterectomy, bilateral salpingo-oophorectomy, omental biopsy.  
SPECIFIC CLINICAL QUESTION: Not provided.  
OUTSIDE TISSUE DIAGNOSIS: Not provided.  
PRIOR MALIGNANCY: Not provided.  
CHEMORADIATION THERAPY: Not provided.  
OTHER DISEASES: Not provided.

**FINAL DIAGNOSIS:**

PART 1: ABDOMINAL WALL NODULE, BIOPSY -  
INFARCTED APPENDICES EPIPLOICA WITH CALCIFICATION.

PART 2: OMENTUM, BIOPSY -  
BENIGN FIBROADIPOSE TISSUE.

PART 3: UTERUS, TUBES AND OVARIES, TOTAL ABDOMINAL HYSTERECTOMY AND BILATERAL SALPINGO-OOPHORECTOMY -

Collection Date:

- ADENOCARCINOMA OF THE ENDOMETRIUM, MIXED CLEAR CELL (APPROXIMATELY 10%) AND ENDOMETRIOID (APPROXIMATELY 90%) TYPES.
- FIGO GRADE 3 (ENDOMETRIOID COMPONENT).
- THE TUMOR IS LIMITED TO THE ENDOMETRIUM AND LIKELY ARISES WITHIN AN ENDOMETRIAL POLYP.
- THE TUMOR MEASURES 2.5 X 2.3 X 0.8 CM AND INVOLVES 25% OF THE ENDOMETRIAL CAVITY SURFACE.
- CERVIX IS NEGATIVE FOR TUMOR.
- NO LYMPHOVASCULAR SPACE INVASION IS IDENTIFIED.
- THE BACKGROUND ENDOMETRIUM SHOWS A PROLIFERATIVE PATTERN.
- THE MYOMETRIUM SHOWS FOCAL ADENOMYOSIS.
- ALL ADNEXA ARE UNREMARKABLE.

**COMMENT:**

The companion pelvic wash is negative for malignant cells (REDACTED)

The endometrial tumor appears to superficially involve the myometrium grossly. However, microscopic examination shows the presence of benign endometrial glands between the tumor and myometrial interface. Therefore, this is interpreted as tumor limited to the endometrium. Please note that the entire tumor and underlying endo-myometrial junction was submitted for histologic evaluation.

**CASE SYNOPSIS:**

SYNOPTIC - PRIMARY UTERINE ENDOMETRIAL CARCINOMA & CARCINOSARCOMA : HYSTERECTOMY

TUMOR TYPE: SPECIMENS  
Mixed carcinoma, Endometrioid: 90%, Clear cell: 10%

HISTOLOGIC GRADE (epithelial neoplasm) [combined architectural and nuclear]:  
Poorly differentiated (FIGO 3)

TUMOR SIZE: Maximum dimension: 25 mm

PERCENT OF ENDOMETRIAL SURFACE INVOLVEMENT:  
Anterior endomyometrium: 50 %, Posterior endomyometrium: 0 %

DEPTH OF INVASION: No invasion

ANGIOLYMPHATIC INVASION: No

LYMPH NODES EXAMINED: Total number of lymph nodes examined: 0

T STAGE, PATHOLOGIC: pT1a

N STAGE, PATHOLOGIC: pNX

M STAGE, PATHOLOGIC: Not applicable

FIGO STAGE: IA

Comment: FIGO stage is at least IA; however, no lymph node dissection was performed.

UUID: 59CD459F-FB2B-4B0E-9E16-3E26BDF252E1  
TCGA-BG-A220-01A-PR

Redacted



	Yes	No
Diagnosis Discrepancy		<input checked="" type="checkbox"/>
Primary Tumor Site Discrepancy		<input checked="" type="checkbox"/>
IIIPAA Discrepancy		<input checked="" type="checkbox"/>
Prior Malignancy History		<input checked="" type="checkbox"/>
Dual/Synchronous Primary Not		<input checked="" type="checkbox"/>
Case is (circle):	QUALIFIED	DISQUALIFIED
Reviewer Initials	202	3/28/11