

UTERINE CORPUS TUMOR

EXAMPLE OF A UTERINE CORPUS TUMOR USING PROPOSED TEMPLATE

- Case: Endometrial endometrioid carcinoma
 - TAH, BSO; intact specimen
 - FIGO grade 1, involves anterior endometrium, 3.5 cm
 - Non-myoinvasive
 - No ALI
 - Confined to uterus
 - LUS positive
 - Cervical stromal invasion negative
 - Lymph node dissection not performed
 - Cytology positive
 - Surgical margins negative
 - ER: positive, 90%, strong
 - PR: positive, 50%, moderate
 - Loss of MLH1 and PMS2

UTERINE CORPUS CARCINOMA

1. **Specimen(s):** Uterus, cervix, bilateral fallopian tubes and ovaries
2. **Procedure(s):** Total abdominal hysterectomy, bilateral salpingo-oophorectomy
3. **Sentinel Lymph Node Sampling:** Not performed
4. **Regional Lymph Node Sampling:** Not performed
5. **Specimen Integrity:** Intact
6. **Primary Tumor Site:** Anterior endometrium
7. **Tumor Size:**
 - a. Greatest dimension: 3.5 cm
 - b. Other dimensions: Cannot be determined
8. **Histologic Type:** Endometrioid carcinoma
9. **Histologic Grade:** FIGO grade 1
10. **Myometrial Invasion:** Absent
11. **Lower Uterine Segment Involvement:** Present
12. **Cervical Stromal Involvement:** Absent
13. **Lymph-Vascular Space Invasion:** Absent
14. **Other Sites/Organs Involved:** Negative
15. **Sentinel Lymph Nodes:** Not performed
16. **Total Lymph Nodes:** Not performed
17. **Cytology:** Positive, CN-XX-XXXXX
18. **Surgical Margins:** Negative
19. **Hormone Receptor Expression (by immunohistochemistry):**
 - a. ER: Positive; 90%, strong

- b. PR: Positive; 50%, moderate
- 20. Mismatch Repair (MMR) Protein Expression (by immunohistochemistry):**
- a. The neoplastic cells demonstrate a loss of MLH1 and PMS2 protein expression with intact expression MSH2 and MSH6. This finding indicates that the patient may be at risk for Lynch syndrome. Genetic counseling and additional genetic testing may be indicated. Additional testing for MLH1 promotor hypermethylation will be performed the results of which will be provided in a separate molecular pathology report.
- 21. Pathologic Staging:** AJCC [pT1a]; FIGO [IA]

UTERINE CORPUS CARCINOMA (specific details to be added into SOFT)

1. **Specimen(s):** *list all specimens removed during case*
2. **Procedure(s):** *select all that apply*
 - a. [Total abdominal hysterectomy]
 - b. [Radical hysterectomy]
 - c. [Supracervical hysterectomy]
 - d. [Bilateral salpingo-oophorectomy]
 - e. [Bilateral oophorectomy]
 - f. [Bilateral salpingectomy]
 - g. [Right salpingo-oophorectomy]
 - h. [Right oophorectomy]
 - i. [Right salpingectomy]
 - j. [Left salpingo-oophorectomy]
 - k. [Left oophorectomy]
 - l. [Left salpingectomy]
 - m. [Omentectomy]
 - n. [Peritoneal biopsies]
 - o. [Peritoneal washings]
 - p. [Other, <SPECIFY>]
3. **Sentinel Lymph Node Sampling:** *select whether or not sentinel lymph nodes were removed*
 - a. [Performed]
 - b. [Not performed]
 - c. [Not applicable]
 - d. [Cannot be determined]
4. **Regional Lymph Node Sampling:** *select whether or not regional, non-sentinel lymph nodes were removed*
 - a. [Performed]
 - b. [Not performed]
 - c. [Not applicable]

- d. [Cannot be determined]
- 5. **Specimen Integrity:** *document whether intact or received fragmented*
- 6. **Primary Tumor Site:** *select all that apply*
 - a. [Anterior endometrium]
 - b. [Posterior endometrium]
 - c. [Fundus]
 - d. [Lower uterine segment]
 - e. [Multicentric, <SPECIFY>]
 - f. [Other, <SPECIFY>]
 - g. [Cannot be determined]
- 7. **Tumor Size:** *provide greatest dimension and total dimensions*
 - a. [Greatest dimension: <SPECIFY>]
 - b. [Total dimensions: <SPECIFY>]
 - c. [Cannot be determined]
- 8. **Histologic Type:** *select appropriate tumor type*
 - a. [Endometrioid carcinoma]
 - b. [Endometrioid carcinoma with squamous differentiation]
 - c. [Endometrioid carcinoma, villoglandular type]
 - d. [Mucinous carcinoma]
 - e. [Serous carcinoma (includes serous endometrial intraepithelial carcinoma)]
 - f. [Clear cell carcinoma]
 - g. [Mixed carcinoma <SPECIFY TYPES AND APPROXIMATE PERCENTAGES>]
 - h. [Undifferentiated carcinoma (includes dedifferentiated carcinoma)]
 - i. [Carcinosarcoma (malignant mixed Mullerian tumor, MMMT)]
 - j. [Carcinoma, not-otherwise-specified]
 - k. [Other, <SPECIFY>]
- 9. **Histologic Grade:** *provide a FIGO grade or state if tumor is low- or high-grade*
 - a. [FIGO grade:] (*If endometrioid, mucinous, or endometrioid with squamous/mucinous differentiation, use FIGO grading system*)
 - b. [Low-grade] (*we will probably never use this designation*)
 - c. [High-grade] (*Clear cell carcinoma, MMMT, and the vast majority of uterine serous carcinomas are high-grade by definition and are not given a FIGO grade*)
- 10. **Myometrial Invasion:** *select if myometrial invasion is absent, present, or cannot be determined*
 - a. [Absent]
 - b. [Present: <PROVIDE DEPTH OF INVASION> / <PROVIDE TOTAL MYOMETRIAL THICKNESS>]

- i. [\geq 50% myoinvasion]
 - ii. [$<$ 50% myoinvasion]
 - iii. (give depth of invasion and myometrial thickness (if a specific measurement cannot be determined, provide the approximate percentage of myometrial involvement))
 - c. [Cannot be determined]
11. **Lower Uterine Segment Involvement:** *state whether the lower uterine segment is involved*
 - a. [Absent]
 - b. [Present]
 - c. [Indeterminate]
 - d. [Cannot be determined]
12. **Cervical Stromal Involvement:** *state whether cervical stroma is involved*
 - a. [Absent]
 - b. [Present]
 - c. [Indeterminate]
 - d. [Cannot be determined]
13. **Lymph-Vascular Space Invasion:** *state whether LVI is present*
 - a. [Absent]
 - b. [Present]
 - c. [Suspicious]
 - d. [Cannot be determined]
14. **Other Sites/Organs Involved:** *state whether there is disease outside the uterus*
 - a. [Negative]
 - b. [Positive: <LIST OTHER ORGANS INVOLVED> ; [PROVIDE SIZE OF LARGEST METASTATIC FOCUS]]
15. **Sentinel Lymph Nodes:** *provide sentinel lymph node status*
 - a. [Not performed]
 - b. [Negative: 0 / <PROVIDE TOTAL LYMPH NODES>] (specify site of sentinel lymph node)
 - c. [Positive: <PROVIDE TOTAL NUMBER OF POSITIVE SENTINEL LYMPH NODES> / <PROVIDE TOTAL SENTINEL LYMPH NODES>] (specify site of sentinel lymph node)
 - d. [Extranodal extension: <STATE IF EXTRANODAL EXTENSION IS PRESENT OR ABSENT>]
16. **Total Lymph Nodes:** *provide total sentinel and non-sentinel lymph node status*
 - a. [Not performed]
 - b. [Negative: 0 / <PROVIDE TOTAL SENTINEL AND NON-SENTINEL LYMPH NODES>]

- c. [Positive: <PROVIDE TOTAL NUMBER OF POSITIVE SENTINEL AND NON-SENTINEL LYMPH NODES> / <PROVIDE TOTAL NUMBER OF SENTINEL AND NON-SENTINEL LYMPH NODES> ; <PROVIDE SIZE OF LARGEST LYMPH NODE METASTASIS AND IF THERE IS EXTRANODAL EXTENSION>]
17. **Cytology:** *state whether or not cytology was performed and results, include accession number*
- a. [Not performed]
 - b. [Performed]:
 - iv. [Positive, <PROVIDE ACCESSION NUMBER IF AVAILABLE>]
 - v. [Negative, <PROVIDE ACCESSION NUMBER IF AVAILABLE>]
18. **Surgical Margins:** *provide margin status*
- a. [Negative] (can specify if close)
 - b. [Positive] (specify)
19. **Hormone Receptor Expression (by immunohistochemistry):** *provide ER and PR expression if applicable*
- a. [PENDING]
 - b. [ER: POSITIVE; <PROVIDE PERCENTAGE OF TUMOR CELLS STAINING AND STRENGTH OF STAINING>]
 - c. [ER: NEGATIVE]
 - d. [PR: POSITIVE; <PROVIDE PERCENTAGE OF TUMOR CELLS STAINING AND STRENGTH OF STAINING>]
 - e. [PR: NEGATIVE]
20. **Mismatch Repair (MMR) Protein Expression (by immunohistochemistry):** *provide MMR status if performed*
- a. [Not performed]
 - b. [<INPUT WHETHER STAINS ARE INTACT OR THERE IS LOSS OF EXPRESSION HOWEVER YOU WANT>]
21. **Pathologic Staging:** *may use AJCC and/or FIGO; refer to staging manuals*