

Surgical Pathology Report

SPECIMEN(S) RECEIVED

A: Uterus, cervix, right ovary
B: Vaginal mucosa

CLINICAL INFORMATION

Female stress incontinence polymenorrhea endometriosis of pelvic peritoneum, secondary dysmenorrhea, midline cystocele, excessive or frequent menstruation

PRE OP DIAGNOSIS

FEMALE STRESS INCONTINENCE, POLYMENORRHEA, ENDOMETRIOSIS OF PELVIC PERITONEUM, SECONDARY DYSMENORRHE

FINAL DIAGNOSIS

- A. Uterus, cervix, right ovary:
- Endometrial polyp
 - Leiomyoma(s)
 - Adenomyosis
 - Inactive endometrium
 - Ovary with surface adhesions
 - Unremarkable cervix and fallopian tube
- B. Vaginal mucosa:
- Unremarkable squamous mucosa

GROSS DESCRIPTION

A. Received in formalin labeled "uterus, cervix, right ovary" is a hysterectomy specimen with attached right adnexa. The uterus weighs 120 g and measures 8.0 cm from fundus to ectocervix, 4.3 cm from cornu to cornu, and 4.5 cm from anterior to posterior. Serosa is tan-brown and smooth. The ectocervix measures 3.6 cm in diameter and contains a slit like os that measures 1.5 cm in diameter. The ectocervical mucosa is pale tan and smooth. The uterus is bivalved to demonstrate a triangular endometrial cavity that measures 4.5 x 3.5 cm and is remarkable for a pink-red possible polyp at the anterior left cornual region that measures 3.1 x 1.8 x 0.8 cm and comes to within 2.3 cm from the lower uterine segment and 5.3 cm from the ectocervix. Upon sectioning, the possible polyp demonstrates tan-pink, densely trabeculated surfaces that extend to a depth of 1.2 cm within the 2.2 cm thick myometrium, coming to within 0.8 cm from the serosal surface. The remaining endometrium is red-pink and measures 0.2 cm thick. Multiple firm

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white, whorled intramural nodules are identified within the anterior and posterior myometrium, ranging from 0.2 x 0.2 x 0.2 cm to 1.2 x 0.9 x 0.8 cm. The right fimbriated fallopian tube measures 4.5 cm in length by 0.5 cm in diameter. The serosa is gray-tan and smooth. Sectioning reveals a complete lumen. The right ovary measures 3.6 x 3.3 x 1.5 cm. The external surface is tan-gray focally adhered. Sectioning reveals a collapsed biloculated hemorrhagic cyst that measures 2.9 cm in greatest dimension. The remaining cut surfaces are tan and grossly unremarkable. No excrescences are grossly identified. Representative sections are submitted in 12 cassettes as follows:

A1-anterior cervix

A2-posterior cervix

A3-A7-entire possible anterior endometrial polyp submitted from superior to inferior (full-thickness sections in A4 and A5)

A8-background anterior endomyometrium and intramural nodule

A9-A10-full-thickness posterior uterine wall to include intramural nodules

A11-right fallopian tube

A12-right ovary

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Part B, received in formalin is (are) 3 piece(s) of white tissue fragments measuring 2.2 cm. in greatest dimension/or aggregate. Entirely submitted in B1.

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MICROSCOPIC DESCRIPTION

Unless "gross only" is specified, the final diagnosis for each specimen is based on a microscopic examination of representative sections of tissue.

Digital image analysis assistance provided by using the Roche Ventana® DP 600 Scanner & navify® Digital Pathology software.

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