

Histology Cytology Report

Clinical Information

Preoperative diagnosis: Abnormal estrogens; symptomatic postprocedural ovarian failure; Deep endometriosis of diaphragm

Clinical data:

Postoperative diagnosis: Pending

Special instructions:

Specimen source: A. Left Adnexal Adhesion; B. Uterine Serosa; C. Left Bladder Flap; D. Right Bladder Flap; E. Left Ovarian Adhesion; F. Rectal Wall Adhesion; G. Left Ovarian Cyst; H. Left Pelvic Sidewall; I. Left Abdominal Wall; J. Sigmoid; K. Right Periureteral; L. Right Uterosacral Ligament; M. Left Periureteral; N. Fibroid; O. Right Pelvic Sidewall; P. Right Adnexal Adhesion

Diagnosis

A. LEFT ADNEXAL ADHESION, EXCISION:

FIBROMEMBRANOUS TISSUE, CONSISTENT WITH PERITONEAL ADHESION.

B. UTERINE SEROSA, EXCISION:

GRANULOMATOUS PERITONITIS WITH PERITONEAL ADHESION.

C. LEFT BLADDER FLAP, EXCISION:

NO SIGNIFICANT HISTOPATHOLOGIC ABNORMALITY.

D. RIGHT BLADDER FLAP, EXCISION:

SUBPERITONEAL FIBROSIS.

E. LEFT OVARIAN ADHESION, EXCISION:

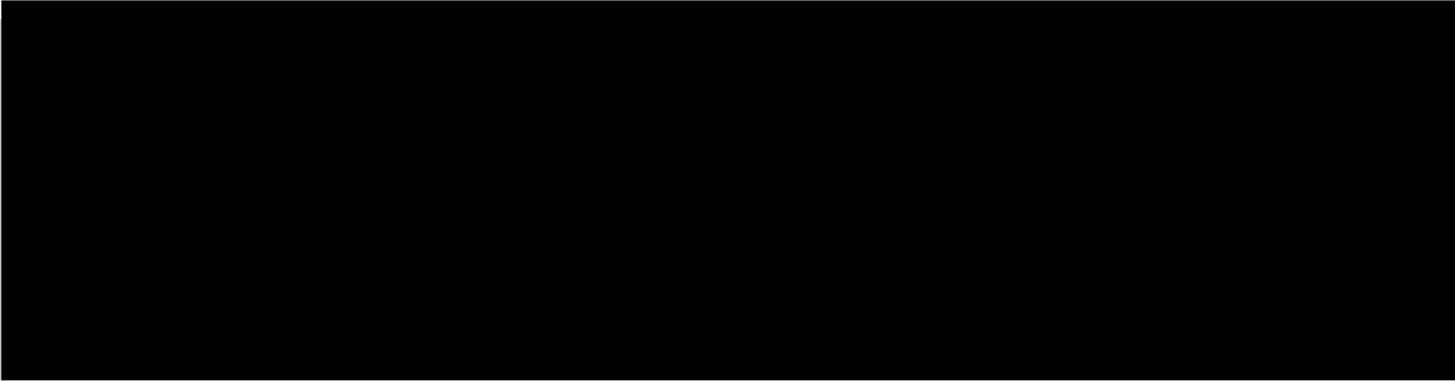
FIBROFATTY TISSUE WITH FOCAL ENDOMETRIOSIS.

F. RECTAL WALL ADHESION, EXCISION:

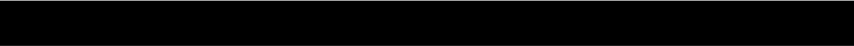
FIBROMEMBRANOUS TISSUE, CONSISTENT WITH PERITONEAL ADHESION.
FRAGMENT OF FALLOPIAN TUBE FIMBRIA WITH SEROSAL ENDOSALPINGOSIS.

G. LEFT OVARIAN CYST, EXCISION:


CORPUS LUTEUM CYST.



Diagnosis

- H. LEFT PELVIC SIDEWALL, EXCISION:
GRANULOMATOUS PERITONITIS.
 - I. LEFT ABDOMINAL WALL, EXCISION:
SUBPERITONEAL FIBROSIS.
 - J. SIGMOID COLON, EXCISION:
FRAGMENT OF OVARIAN CORTEX WITH ADHESED FIBROFATTY TISSUE.
 - K. RIGHT PERIURETERAL PERITONEUM, EXCISION:
SUBPERITONEAL FIBROSIS.
 - L. RIGHT UTEROSACRAL LIGAMENT, EXCISION:
GRANULOMATOUS PERITONITIS.
 - M. LEFT PERIURETERAL PERITONEUM, EXCISION:
FRAGMENT OF OVARIAN CORTEX WITH SURFACE ADHESIONS.
 - N. FIBROID, EXCISION:
LEIOMYOMA.
 - O. RIGHT PELVIC SIDEWALL, EXCISION:
MILD SUBPERITONEAL FIBROSIS.
 - P. LEFT ADNEXAL ADHESION, EXCISION:
HEMORRHAGIC FIBROMEMBRANOUS TISSUE, CONSISTENT WITH PERITONEAL ADHESION.
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Gross Description

- A. In formalin labeled "left adnexal adhesion": 1 x 1 x 0.1 cm aggregate of tissue piece(s). Totally submitted, 1 block.
 - B. In formalin labeled "uterine serosa": 1, 0.7 cm tissue piece(s). Totally submitted, 1 block.
 - C. In formalin labeled "L bladder flap": 1, 1 x 0.5 x 0.2 cm tissue piece(s). The specimen is sectioned. Totally submitted, 1 block.
 - D. In formalin labeled "R bladder flap": 1, 1 x 1 x 0.2 cm tissue piece(s). The specimen is sectioned. Totally submitted, 1 block.
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Gross Description

E. In formalin labeled "L ovarian adhesion": 1, 1 x 1 x 0.5 cm fatty tissue piece(s). The specimen is sectioned. Totally submitted, 1 block.

F. In formalin labeled "rectal wall adhesion": 1.5 x 1 x 0.2 cm tissue piece(s). The specimen is sectioned. Totally submitted, 1 block.

G. In formalin labeled "L ovarian cyst": 1, 2 x 1 x 0.2 cm tissue piece(s). The specimen is sectioned. Totally submitted, 1 block.

H. In formalin labeled "L pelvic sidewall": 1, 0.5 cm tissue piece(s). Totally submitted, 1 block.

I. In formalin labeled "L abdominal wall": 1 x 1.5 x 0.2 cm tissue piece(s). The specimen is sectioned. Totally submitted, 1 block.

J. In formalin labeled "sigmoid": 1, 1.5 x 0.5 x 0.2 cm tissue piece(s). The specimen is sectioned. Totally submitted, 1 block.

K. In formalin labeled "periureteral": 2, 0.6-1 x 0.5 x 0.2 cm tissue piece(s). Totally submitted, 1 block.


L. In formalin labeled "R uterosacral ligament": 1, 1.1 x 0.5 x 0.2 cm tissue piece(s). The specimen is sectioned. Totally submitted, 1 block.

M. In formalin labeled "L periureteral": 1, 1 x 0.9 x 0.2 cm tissue piece(s). The specimen is sectioned. Totally submitted, 1 block.

N. In formalin labeled "fibroid": 1, 2 x 1.5 x 0.5 cm tissue piece(s). The specimen is sectioned. Totally submitted, 1 block.

O. In formalin labeled "R pelvic sidewall": 1, 1 x 0.5 x 0.2 cm tissue piece(s). The specimen is sectioned. Totally submitted, 1 block.

P. In formalin labeled "R adnexal adhesion": 1, 0.6 cm tissue piece(s). Totally submitted, 1 block.



Microscopic Description

A through P. Gross description reviewed and microscopic examined.

