

FORM FOR REPORTING HYSTERECTOMY DIAGNOSIS

FORMAT FOR HYSTERECTOMY DIAGNOSIS

CERVIX:

- a.
- b.
- c.
- d.

ENDOMETRIUM:

- a.
- b.

MYOMETRIUM:

- a.
- b.

RIGHT OVARY:

- a.
- b.

LEFT OVARY:

- a.
- b.

RIGHT FALLOPIAN TUBE:

- a.
- b.

LEFT FALLOPIAN TUBE:

- a.
- b.

APPENDIX:

- a.
- b.

G. REPORTS FOR HYSTERECTOMIES DONE FOR SQUAMOUS, ADENOSQUAMOUS OR ADENOCARCINOMA OF THE CERVIX SHOULD INCLUDE TUMOR SIZE, DEPTH OF TUMOR EXTENSION INTO CERVICAL STROMA AND INVOLVEMENT OF VASCULAR SPACES

H. DEFINITION OF MICROINVASIVE SQUAMOUS CELL CARCINOMA OF UTERINE CAVITY

Since FIGO/WHO has finally promulgated a definition of uterine cervical microinvasive squamous cell carcinoma, which is currently not being widely used in the United States, the Division of Surgical Pathology at OHSU will continue to use the definition of microinvasive squamous cell carcinoma of the cervix as defined by the Society of Gynecologic Oncologists: no grossly visible lesion, less than 3 mm of stromal invasion measured from the nearest adjacent basement membrane, no vascular or lymphatic invasion, and no confluence.