

Gynecologic Pathology Grossing Guidelines

PLACENTA

COMMENT: PLEASE TAKE GROSS PHOTOS OF INTACT PLACENTAS WITH SIGNIFICANT GROSS FINDINGS; IF UNSURE, TAKE A PHOTO!

SINGLETON

1. Weigh and measure (after umbilical cord and membranes are removal). Note disc shape and measure any succinturiate lobes, length and appearance of intramembranous vessels.
2. Measure length and diameter of umbilical cord.
3. Describe insertion of cord (central, marginal, velamentous; record distance to nearest edge if < 3 cm). Note presence of knots, strictures, thinning of Wharton's jelly, thrombi, and other deformities, and number of vessels seen on cross section. Estimate number of coils per 10 cm of cord, coil direction (handedness), and note deep coil grooves, if present.
4. Describe membranes (insertion (Percentage involved by circumvallation or circummargination, if extrachorial), color, opaque or translucent, intact?). Measure distance of point of rupture to placental margin.
5. Describe fetal surface. Note exudate, hemorrhage, cysts, tumors, meconium staining, thrombi, condition of vessels.
6. Describe maternal surface, noting infarcts, adherent blood clots. Measure volume of clot. State whether placenta is complete or incomplete.
7. Serially section the placenta at 0.5 – 1.0 cm intervals. Describe cut surface, measure disc thickness, note areas of depression, note and describe infarcts, clots, intervillous thrombin, and other abnormalities and include location (peripheral vs. central, maternal vs. fetal side vs. intervillous space) and age (recent or old?). If multiple infarcts or lesions are present, report the number of lesions and measure the largest one. **INCLUDE PERCENTAGE OF PLACENTAL DISC VOLUME OCCUPIED BY INFARCT(S).**
8. Make a roll of the membranes including edge representing point of rupture and if possible a small portion of peripheral disc, wrapping them around a wooden stick and fixing in formalin or Bouin's solution. Ensure both amnion and chorion are included in roll.
9. Submit sections as follows:
 - a) Cross sections of umbilical cord, near fetal end and approximately 5 cm from insertion site, and membrane roll.
 - b) Full thickness sections of placenta near umbilical cord insertion site to include chorionic vessels.
 - c) Two full thickness sections from the central 2/3 of the disc (May be split into 2 cassettes each – maternal and fetal halves – if placenta is too thick for a single cassette)
 - d) One full thickness section of placenta from margin (optional).
 - e) Sections of any lesion(s) or succenturiate lobes.

Gynecologic Pathology Grossing Guidelines

Gross Template:

Labeled with the patient's name (***), medical record number (***), designated "****", and received [*fresh/in formalin*] is a singleton placenta with an attached tan-white, [*eccentrically, centrally, peripherally, velamentously*] located trivascular umbilical cord (** cm in length x ** cm in average diameter), which inserts ** cm from the margin. There [*are/are no*] cord knots, thromboses, or focal lesions present. There are [#] [*right, left*] handed coils per 10 cm.

The fetal surface is [*pink-purple and smooth*]. There is [*scant, moderate, extensive-quantify if extensive*] subchorionic fibrin present. There [*is/is no*] squamous metaplasia, amnion nodosum, or gross meconium. Surface vessels are [*normal/congested/focally thrombosed*]. The [*pink-tan, thin and translucent, green, thickened, opaque*] membranes insert [*peripherally, circummarginate, circumvallate over #% of the disc circumference*]. The nearest point of rupture measures ** cm from the margin. There [*is/is no*] accessory lobe present.

The [*ovoid, discoid, bi-lobed, etc.*] placental disc (devoid of cord and membranes) weighs ** grams and measures ** x ** x ** cm. The cotyledons are [*all present and intact or disrupted or incomplete*]. There [*is no/is- if present give size and location*] retroplacental hemorrhage. Sectioning reveals [*a red-brown cut surface, describe lesions-intervillous hematomas and infarcts (color, consistency, location)-provide % of placental disc involved*]. The remaining parenchyma is [*dark red-purple or light pink-red*] and soft with [*normal, increased*] calcifications. No additional lesions or masses are grossly identified. Representative sections are submitted.

Cassette Submission:

- | | |
|-------|-------------------------------------------------------------------------------------------------------------------------|
| A1 | Umbilical cord cross sections and membranes |
| A2 | Central placenta near cord insertion |
| A3-A4 | Central 2/3 of placenta |
| A5-.. | <i>Submit any intervillous hematomas and/or infarcts (include interface between lesion and unremarkable parenchyma)</i> |