

Gynecologic Pathology Grossing Guidelines

Specimen Type: POC (curettings, vaginal/uterine contents)

Procedure:

1. Consider cytogenetic studies and check the clinical history
2. Weigh and describe
 - a. If grossly obvious embryonic/fetal parts are admixed with placental tissues/blood clot, separate embryonic/fetal from placental tissues/blood clot and weigh & measure each separately.

Note: If POC is from a later term pregnancy, please review the Fetus Grossing Guidelines.

Gross Template:

MMODAL COMMAND: "INSERT P O C" – FOR SPECIMENS WITHOUT FETAL TISSUE

It consists of a [*weight****] gram, [*measure in three dimensions****] cm aggregate of pink-red tissue fragments. Chorionic villi [*are/ are not****] identified. There [*are/ are no****] fetal or embryonic tissues identified. Representative sections are submitted in cassette [*****].

MMODAL COMMAND: "INSERT FETAL TISSUE" – FOR SPECIMENS WITH FETAL TISSUE

It consists of a [*weight****] gram, [*measure in three dimensions****] cm aggregate of pink-red tissue fragments. Additionally received within the specimen container is a [*weight****] gram, [*measure in three dimensions****] cm aggregate of fetal tissue. Identifiable fetal tissues include [*lung, heart, upper and lower appendages*]. The intact foot length measures [*****] cm. Representative sections are submitted.

CASSETTE SUMMARY:

[*****]1 Representative fetal tissue, placental tissue [*umbilical cord if present****]

Cassette Submission: 1-5 cassettes

- If chorionic villi or fetal tissues (do not say fetal parts) are identified, submit one cassette.
- If NO chorionic villi or fetal tissues are identified, submit several (3-5) cassettes.
- **If hydropic villous changes are present and a molar pregnancy is suspected, but not definitive, store fresh tissue in RPMI for possible cytogenetic studies.**