Gynecologic Pathology Grossing Guidelines

Specimen Type: SALPINGO-OOPHRECTOMY (non-neoplastic)

Gross Template:
Labeled with the patient's name (***), medical record number (***), designated "***", and received [*fresh/in formalin*] is a [*disrupted/intact*] *** gram salpingo-oophrectomy. The ovary measures *** x *** x *** cm. The fallopian tube measures *** cm in length x *** cm in diameter. Fimbriae are [*present/absent*].

The ovarian capsule is *[smooth, tan-yellow, not extensive tubo-ovarian adhesions if present*]. Sectioning the ovary reveal [*color/cysts/lining/projections/describe contents/thickness of wall, atrophic changes*]. The external surface of the fallopian tube is remarkable for [*color, texture, adhesions, paratubal cysts*]. Representative sections are submitted [*describe cassette submission*].

Cassette Submission: 2-3 cassettes

- 1 cassette of ovary
- 1 cassette of fallopian tube
- For **suspected or confirmed high-grade serous carcinoma, BRCA +, or history of breast cancer**, in which no lesion is grossly identified, submit entire fallopian tube and ovary using SEE-FIM protocol, see sectioning diagram below:
    - This protocol entails submitting the entire fallopian tube as follows:
        - Amputate and longitudinally section the infundibulum and fimbrial segment (distal 2 cm) to allow maximal exposure of the tubal plicae.
        - The isthmus and ampulla are cut transversely at 0.2-0.3 cm intervals.
        - **In the gross description, mention in the summary of section that the fallopian tube has been submitted in its entirety per the SEE-FIM protocol.**
    - If ovary is replaced by a large cyst- submit 1 section per 1 cm of the greatest dimension of the ovary

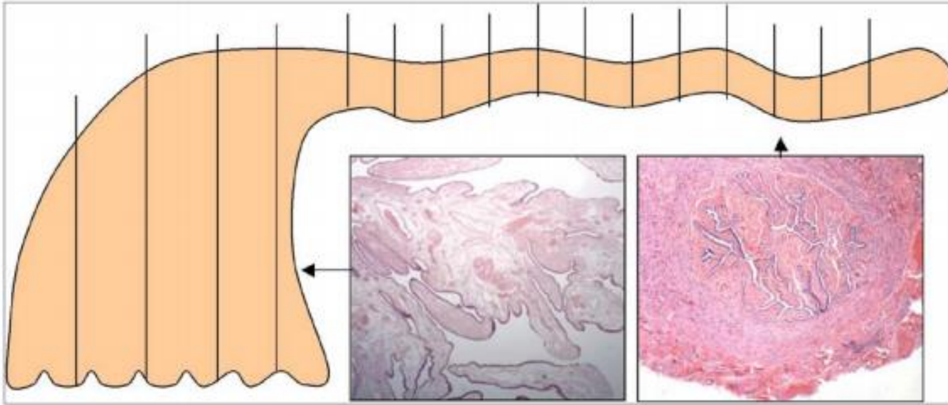

Figure 1. Protocol for Sectioning and Extensively Examining the Fimbriated End (SEE-FIM) of the Fallopian Tube. This protocol entails amputation and longitudinal sectioning of the infundibulum and fimbrial segment (distal 2 cm) to allow maximal exposure of the tubal plicae. The isthmus and ampulla are cut transversely at 2- to 3-mm intervals. From Crum et al.[10] Copyright © 2007 Lippincott Williams & Wilkins. Reproduced with permission.