

#### Tubular(Non-Pap) Ov Ca

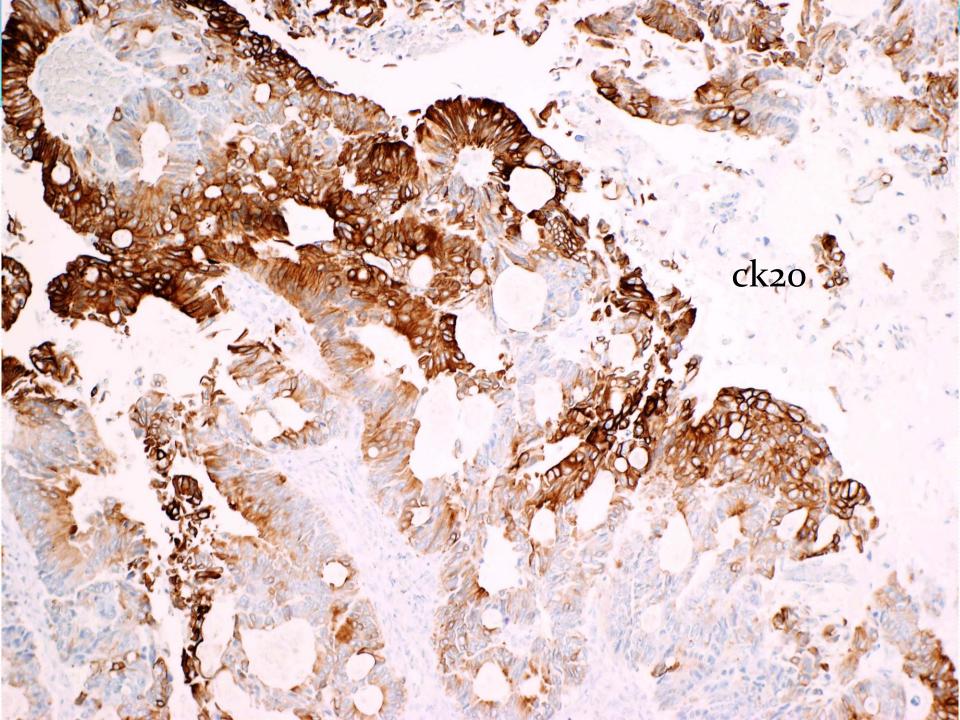
- O-EC
- O-Muc Ca (Mull/Int)
- Tubular (EC-like) SPC
- O-CCC
- Metastatic Tumor

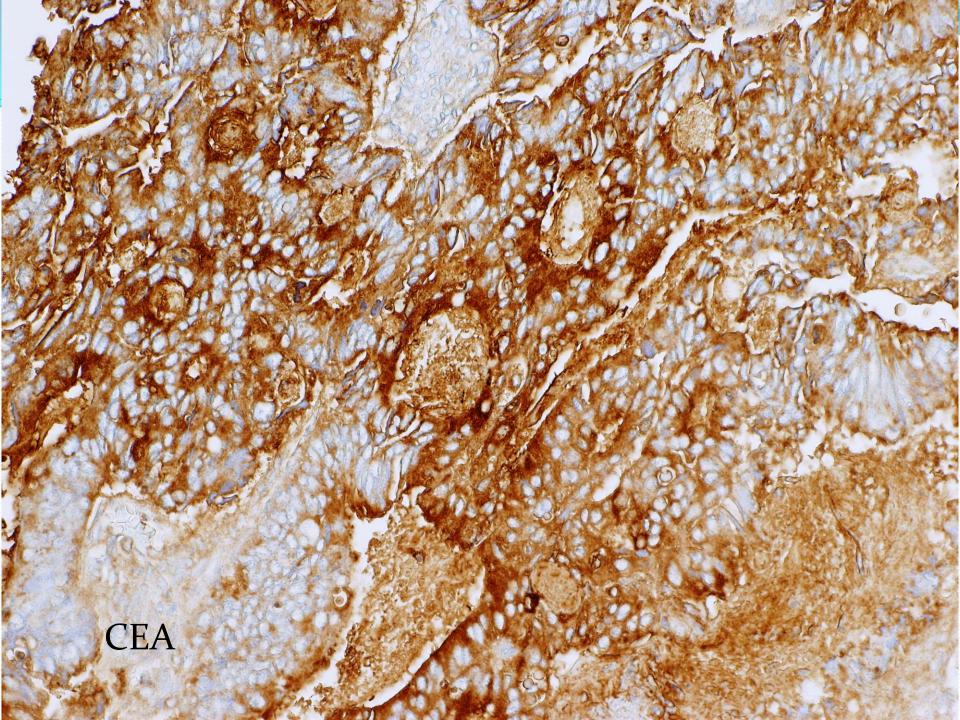
#### Metastases to Ovary

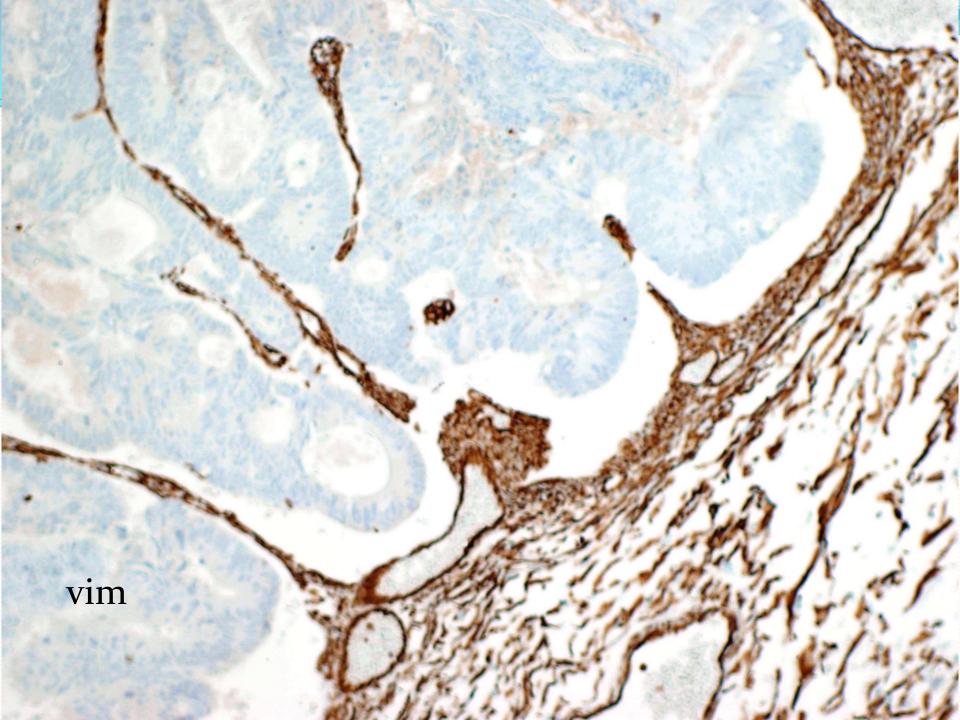
- Bilaterality
- Multinodular Growth
- Suface (plaque-like) Growth
- (dirty) necrosis
- (prominent) LVI
- organizing mucin
- interstitial mucin (pseudomyxoma ovarii)

# mucin poor CRC cell type ((pseudo)endometrioid)

- atypia/architect grade discordance (CRC)
- lack of Squamous Diff
- lack of background endometriosis and/or synchronous EH/EEC
- presence of prominent (dirty) necrosis
- immunophenotype (ER/vim/ck7(-); CEA/ck2o(+))







### METASTATIC COLONIC Ca PRESENTING AS A 'PRIMARY' OVARIAN CARCINOMA

- (1) Leen SL, Singh N. Pathology of primary and metastatic mucinous ovarian neoplasms. J Clin Pathol. 2012 Jul;65(7):591-5.
- (2) Judson K, McCormick C, Vang R, Yemelyanova AV, Wu LS, Bristow RE, Ronnett BM. Women with undiagnosed colorectal adenocarcinomas presenting with ovarian metastases: clinicopathologic features and comparison with women having known colorectal adenocarcinomas and ovarian involvement. Int J Gynecol Pathol. 2008. Apr;27(2):182-90.
- (3) Lerwill MF, Young RH. Ovarian metastases of intestinal-type gastric carcinoma: A clinicopathologic study of 4 cases with contrasting features to those of the Krukenberg tumor. Am J Surg Pathol. 2006 Nov;30(11):1382-8.

# Gynecologic Pathology [skm/VCjan2016]

**CASE V**