**GATRA 2016 Ovary Case** 

Demographics

Name: Ali Pine

Sex: F

Date of Birth: 9/22/55

SSN: 123456789

Race: Caucasian

Marital Status: Divorced

Address: 3827 Sienna Lane, Helen, GA 37285, White County

Phone: 470-295-6719

Insurance: United Healthcare HMO

8/7/15 @ Reporting Hospital 59 year old divorced white female presents to ED w/ progressively worsening fatigue, dyspnea, & overall weakness, Pt also has abdominal pain & nausea, 1993 hx right breast ca, 1983 hx total abdominal hysterectomy with benign histology. Patient admitted for symptom management. Services included imaging studies and labs. Patient discharged 8/10/15 in stable condition with instructions to follow with Gynecologic surgical oncology consult.

8/7/15 @ Reporting Hospital CXR negative. 8/9/15 @ Reporting Hospital-CT- 7.9 cm solid & cystic mass centered in rt adnexa compatible w/ gynecologic malignancy, likely ovarian with multiple soft tissue mesenteric implants, one noted to be 3 cm. Large soft tissue implant adjacent to & likely invading a loop of ileum. Suggested bladder serosa metastatic implants. Pathologically enlarged aortocaval lymph node compatible w/ nodal mets.

8/22/15 @ Gyn Onc's office- Ms. Pine presents for surgical consult after emergency admission to hospital with imaging findings suspicious for ovarian cancer. Labs drawn today. Biopsy scheduled for next week. Today's tumor marker: CA-125 270.0 (H)

8/28/15 @ Outside Hospital B- Patient presents for FNA biopsy of rt lower quadrant pelvic mass

8/28/15 Pathology- Malignant cells present. High grade carcinoma consistent w/ papillary serous carcinoma of most likely ovarian origin

9/5/15 @ Gyn Onc's office- Ms. Pine presents for biopsy findings which were positive for ovarian cancer. Given positive nodal status on imaging a course of neoadjuvant chemo is recommended prior to surgical debulking with most likely additional chemo warranted after surgery. Ms. Pine is in agreement with this treatment plan. Surgery will be scheduled at earliest availability.

9/12/15-11/1/15 @ Gyn Onc's office- Neoadjuvant Carboplatin/Paclitaxel x 4

11/15/15 @ Outside Hospital B/Gyn Onc- ELAP, omentectomy, bilat salpingo-oophorectomy, cystoscopy, pelvic washings. Patient was optimally debulked @ end of procedure. Mid ileum constriction secondary to tumor implants. Multiple tumor implants constricting ileocecal area. Rt tube & ovary fixed to pelvic sidewall. Lt tube wnl. Normal abdominal exploration. Tumor nodularity on peritoneal surface in pelvis. Small omental tumor implants, all less than 1 cm. All visible implants removed.

11/15/15 Pathology: Omentum resection: high grade papillary serous carcinoma. Lt tube & ovary: high grade papillary serous carcinoma involving It ovarian surface & parenchyma. Lt tube negative. Lymphvascular invasion present. Rt tube & ovary: high grade papillary serous carcinoma involving rt ovarian surface & parenchyma. Rt tube positive for high grade papillary serous carcinoma. LVI+. Tumor site: Rt ovary. Rt ovary multifocal tumor sizes: 2.7 cm, 1.6 cm, & 0.4 cm. Lt ovary tumor size-0.2 cm. Histologic grade: G3: Poorly differentiated. High grade. 0/6 pelvic lymph nodes. 0/4 para-aortic lymph nodes C13-16494-pelvic washing cytology-malignant cells present: Adenocarcinoma.

12/1/15 @ Gyn Onc's office- Ms. Pine presents for postop visit. Pathology showed moderate response to neoadjuvant treatment. Patient will need to continue with postop chemo.

12/19/15-2/6/16 @ Gyn Onc's office- Adjuvant Cisplatin/Docetaxel x 4. Gemzar initiated 11/25/16 for progression.

## Ovary

ATION	FIELD NAME	FIELD#	
		Last Name	
		First Name	
		Address at DX-No and Street	
		Address at DX-City	
		Address at DX-State	
		Address at DX-Postal Code	
		County at DX	
		Telephone	
		Primary Payer at DX	
		Sex	
		Date of Birth	
		Age at Diagnosis	
		Birthplace	
		Social Security Number	
		Marital Status at DX	
		Race 1	
		Race 2	
		Race 3	
		Race 4	
		Race 5	
		Spanish Surname or Origin	
		IDENTIFICATION	CANCER
		Date of 1st Contact	
		Sequence Number	
		Class of Case	
		ate of Diagnosis	
		Primary Site	
		aterality	
		listology:	
		Behavior	
		Grade	
		ymph-vascular invasion	L
		Diagnostic Confirmation	
		COLLABORATIVE STAGE	
		S Tumor Size	(
		S Extension	(
		S Tumor Size/Ext Eval	
		S Lymph Nodes	
		S Lymph Nodes Eval	
		Regional Nodes Positive	
		Regional Nodes Examined	
		CS Mets at Dx	
		S Mets Eval	
		S Mets at Dx Bone	
		S Mets at Dx – Lung	
		S Mets at Dx – Liver	
		S Mets at DX – Brain	
		SF1 CA-125	
		Regional Nodes Examined CS Mets at Dx CS Mets Eval CS Mets at Dx Bone CS Mets at Dx Lung CS Mets at Dx - Liver CS Mets at DX - Brain	F ( ) ( ) ( ) ( ) ( ) ( ) ( ) ( ) ( ) (

## Ovary

Summary Stage		
TREATMENT — FIRST		
COURSE		
Date of Initial RX – SEER		
Date of 1st Crs RX – COC		
RX Hosp – Surg Prim Site		
RX Hosp – Scope RegLN Sur		
RX Hosp – Surg Oth Reg/Dis		
RX Hosp – Chemo		
RX Hosp – Hormone		
RX Hosp – BRM		
RX Hosp-Transplnt/Endo		
RX Hosp – Other		
Reason for No Surgery		
RX Date – Surgery		
RX Summ – Surg Prim Site		
RX Summ – Scope Reg LN		
RX Summ – Surg Oth Reg/Dist		
Site		
RX Summ – Radiation		
Reason for No Radiation		
Rad – Regional RX Modality		
Rad – Boost RX Modality		
RX Date – Radiation		
RX Summ – Surg/Rad Seq		
RX Date – Chemo		
RX Summ – Chemo		
RX Date – Hormone		
RX Summ – Hormone		
RX Date – BRM		
RX Summ – BRM		
RX Summ-Transplnt/Endo		
RX Date – Systemic		
RX Summ – Sys/Sur Seq		
RX Summ – Other		
RX Date Other		
RX Summ – Treatment Status		