

Uterine D&C, Products of Conception

(6.5 Uterine_DC_Products_Of_Conception); Updated December 25th, 2018 by Jeremy Deisch, MD

SAMPLE DICTATION

(Labeled: ____, ____, ____; ____) Received (*fresh/in formalin*) is a __ x __ x __ cm aggregate of (*clotted blood/tan friable tissue/spongy tan tissue*).

Major pathologic finding(s): Placental membranes (*are/are not*) grossly identified. There are no recognizable fetal parts identified.

Specimen Handling: (RS / TE, ____ caps)

SUGGESTED SAMPLING

- If there is grossly evident placental or fetal tissue (i.e. membranes, spongy placental parenchyma, fetal parts), only submit one representative section of diagnostic tissue is needed (RS, 1 cap)
- If there is no grossly evident placental or fetal tissue seen (i.e. only clotted blood and decidua), sample the specimen generously
 - If possible, totally embed the specimen in up to 5 caps
 - If there is a larger volume of tissue, submit 5 caps in initial sampling. Focus on sampling all different colors and textures of tissue. If no “products of conception” are seen in the initial five caps, a second sampling will likely be indicated

STAGING CRITERIA (AJCC 8TH EDITION)

- N/A

ADDITIONAL CONSIDERATIONS

- It can be difficult to distinguish between decidua and placental parenchyma. Both are tan and somewhat spongy. One trick that can be helpful is by grabbing a tissue fragment and “pulling it apart”. Decidua tends to crumble, whereas placental parenchyma is more “stringy” when pulled apart, revealing it’s villous nature.
- In cases where placental parenchyma is not grossly seen, sample the clotted blood generously. Small clusters and single chorionic villi are often trapped in the clotted blood. Often, these specimens will require additional sections submitted after the initial review to increase the sensitivity of the pathologic examination.
- The reason for confirming the presence of chorionic villi in uterine D&C specimens is to **document the presence of an intrauterine pregnancy**. Remember that patients with ectopic tubal pregnancies will have elevated bHCG levels and may pass blood and tan tissue (“decidual cast”), without having chorionic villi, membranes, or fetal parts seen in the specimen, even after extended sampling (as the pregnancy is not intrauterine).