



QR code for mobile view

Consult Hematology/Oncology  
Email Solid Tumor Group for timing and setting of biopsy plan:  
[HONewSolidTumor@cmh.edu](mailto:HONewSolidTumor@cmh.edu)

**Ovarian malignancy suspected based on a combination of the following:**

- >8 cm mass
- >2 cm solid component and/or papillary projections
- Ill-defined Mass with peritoneal free fluid
- Precocious Puberty
- Virilization

**Ensure to rule out:**

- Pregnancy with a urine pregnancy test
- Pelvic inflammatory disease with a thorough history and STI testing
- Torsion (which may occur with a malignancy although this represents <3% of torsions)

**Ovarian Sparing Surgery considerations:**

- Ovarian sparing surgery may be **avoided** when malignancy is suspected to avoid capsular penetration and allow for optimal resection of disease.
- For both dermoids and cystadenomas ovarian sparing surgery may be **preferred**
- Benign ovarian neoplasms are much more common than ovarian cancers

Molecular and genetic testing on bone marrow specimens must be ordered by Oncology

