



A guide to

Primary Cutaneous Melanoma Histopathology Reporting

Clinical details

G1.02	Pathology accession number	Text
G1.03	Anatomical site of the melanoma	Text
G1.04	Laterality	Left Midline Right Unknown
G1.05	Clinical or differential diagnosis	Text
G1.06	Specimen type If re-excision do G1.07	See p2
G1.07	Name of previous laboratory Previous pathology accession number Findings in previous biopsy	Text
G1.08	History and timing of lesional trauma, biopsy, irritation or treatment with topical agent	Text
G1.09	Past history of melanoma	Yes/No
	If yes, give details (e.g. site, size, timing, treatment etc)	Text
G1.10	Evidence of metastatic disease	Yes/No
	If yes, describe	Text
G1.11	Serum LDH (in IU)	___
G1.12	Other relevant history	Text
G1.13	Specimen orientation	Text
G1.14	Any clinically or dermatoscopically identified suspicious areas	Yes/No
	If yes, describe	Text
G1.15	Relevant diagnostic imaging results	Text
G1.16	Other comments or diagrams	Text

Macroscopic findings

S2.02	Specimen description	Text
S2.03	Specimen dimensions length x width x thickness (thickness is optional)	___ mm
S2.04	Specimen orientation	Text
S2.05	Description of primary lesion	Text
S2.06	Evidence of other lesions If yes, describe	Yes/No
G2.01	General macroscopic comments	Text

Microscopic findings

S3.01	Diagnosis of primary melanoma	Text
G3.01	Microscopic description	Text
S3.02	Breslow thickness in mm (to nearest 0.1mm)	___ mm
S3.03	Surgical margins involved If yes, specify margin	Yes/No
G3.02	Nearest peripheral margin to in-situ component	___ mm
	Nearest peripheral margin to invasive component	___ mm
	Distance from tumour to deep margin (To the nearest 1mm, unless the melanoma is within 2mm of resection line, in which case should be to nearest 0.1mm)	___ mm
S3.04	Ulceration If present, do G.303	Absent Present
G3.03	Extent of ulceration	___ mm
S3.05	Mitotic rate of the dermal invasive melanoma	_ per mm ²
S3.06	Microsatellites	Absent Present
G3.04	Clark level	See p2
G3.05	Lymphovascular invasion	Absent Present
G3.06	Tumour-infiltrating lymphocytes (TILs)	Absent Present
G3.07	Intermediate/late regression	Absent Present
G3.08	Desmoplasia If present, extent (% of invasive component)	Absent Present ___ %
G3.09	Neurotropism	Not-identif Present
G3.10	Evidence of an associated benign melanocytic lesion If yes, describe	Yes/No Text
G3.11	Growth pattern	Pagetoid Lentiginous Mixed pattern
G3.12	Subtype	See p2

Synthesis and overview

S5.01	AJCC melanoma tumour-node subcategory (pT_{pN})	See p2
G5.01	Diagnostic summary	See p2
S5.02	Overarching comment	Text

Notes

G1.06 Specimen type

- Re-excision
- Excision
- Punch
- Incision
- Shave
- Curette
- Other

G3.04 Clark level

- I Confined to epidermis
- II Infiltrate but do not fill papillary dermis
- III Cells fill/expand papillary dermis
- IV Infiltrate into reticular dermis
- V Infiltrate into subcutaneous fat

G3.12 Subtype

- Superficial spreading melanoma
- Nodular melanoma
- Lentigo maligna melanoma
- Acral-lentiginous melanoma
- Desmoplastic melanoma
- Melanoma arising from blue naevus
- Melanoma arising in giant congenital naevus
- Melanoma of childhood naevoid melanoma
- Persistent melanoma

G5.01 Diagnostic summary

Include:

- G1.03 Anatomical site of the melanoma
- G1.04 Laterality
- G1.06 Specimen type
- S3.01 Diagnosis of primary melanoma
- S3.03 Surgical margins involved
- S5.01 AJCC melanoma tumour-node subcategory

S5.01 TNM definitions##

T classification

- TX Primary Tumour cannot be assessed
- T0 No evidence of primary tumour
- Tis Melanoma in situ
- T1 Melanomas ≤ 1.0 mm in thickness
 - T1a Without ulceration and mitosis $< 1/\text{mm}^2$
 - T1b With ulceration or mitoses $\geq 1/\text{mm}^2$
- T2 Melanomas 1.01–2.0 mm
 - T2a without ulceration
 - T2b with ulceration
- T3 Melanomas 2.01–4.0 mm
 - T3a without ulceration
 - T3b with ulceration
- T4 Melanomas > 4.0 mm
 - T4a without ulceration
 - T4b with ulceration

N classification

- NX Regional lymph nodes cannot be assessed
 - N0 No regional lymph node metastasis
 - N1 1 node
 - N1a micrometastasis*
 - N1b macrometastasis**
 - N2 2–3 nodes
 - N2a micrometastasis*
 - N2b macrometastasis**
 - N2c in transit met(s)/satellite(s) without metastatic nodes
 - N3 Clinical: ≥ 1 node with in transit met(s)/satellite(s);
Pathologic: 4 or more metastatic nodes, or matted nodes, or in transit met(s)/satellite(s) with metastatic node(s)
- * Micrometastases are diagnosed after sentinel lymph node biopsy and completion lymphadenectomy (if performed).
- ** Macrometastases are defined as clinically detectable nodal metastases confirmed by therapeutic lymphadenectomy or when nodal metastasis exhibits gross extracapsular extension.

Used with the permission of the American Joint Committee on Cancer (AJCC), Chicago, Illinois. The original source for this material is the AJCC Cancer Staging Manual, Seventh Edition (2010) published by Springer Science and Business Media LLC, www.springerlink.com.