# A guide to the Histopathology Reporting of an Endoscopic Resection of the Oesophageal & Gastro-oesophageal Junction

## Clinical details

<table>
<thead>
<tr>
<th>S1.02</th>
<th>Clinical information provided on request form (complete as narrative or use the structured format below)</th>
<th>Text</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>Tumour morphology</td>
<td>See p2</td>
</tr>
</tbody>
</table>

## Lesion type

<table>
<thead>
<tr>
<th>If focal record site(s)of lesion</th>
<th>cervical oesophagus</th>
<th>upper thoracic</th>
<th>middle thoracic</th>
<th>lower thoracic</th>
<th>GOJ</th>
</tr>
</thead>
<tbody>
<tr>
<td>If focal record location of lesion</td>
<td>Clock - face</td>
<td>Text</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>If focal, record distal extent</td>
<td>___ cm</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>If focal, record proximal extent</td>
<td>___ cm</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

## Type of procedure

| See p2 |

## Previous pathological diagnosis

| Text |

## Macroscopic findings

<table>
<thead>
<tr>
<th>S2.02</th>
<th>Specimen dimensions (length x width) Record for each specimen received</th>
<th>X X mm</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>Maximum lesion size (length x width) Record for each macroscopically visible lesion</td>
<td>X X mm OR No visible lesions</td>
</tr>
<tr>
<td>G2.01</td>
<td>Gross appearance of lesion(s)</td>
<td>Text</td>
</tr>
<tr>
<td>S2.03</td>
<td>Distance of lesion from closest margin</td>
<td>___ mm OR Not identifiable</td>
</tr>
<tr>
<td>S2.04</td>
<td>Nature and site of all blocks</td>
<td>Text</td>
</tr>
<tr>
<td>G2.02</td>
<td>Other macroscopic comment</td>
<td>Text</td>
</tr>
</tbody>
</table>

## Microscopic findings

<table>
<thead>
<tr>
<th>S3.01</th>
<th>Tissue layers present</th>
<th>See p2</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>If Carcinoma or IEN, record if neoplastic elements are in a subsquamous location?</td>
<td>Text</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>S3.02</th>
<th>Type of lesion</th>
<th>Carcinoma</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>Indefinite IEN/Dys.</td>
<td>IEN/Dysplasia</td>
</tr>
<tr>
<td></td>
<td>IEN/Dysplasia</td>
<td>Carcinoma</td>
</tr>
</tbody>
</table>

## If IEN/Dysplasia complete S3.03 – S3.04

<table>
<thead>
<tr>
<th>S3.03</th>
<th>Histological type - IEN/dysplasia</th>
<th>Squamous Glandular</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>Low</td>
<td>Indefinite</td>
</tr>
</tbody>
</table>

## If Carcinoma complete S3.05-S3.09, consider G3.01-2

<table>
<thead>
<tr>
<th>S3.05</th>
<th>Histologic type - carcinoma</th>
<th>See p2</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>Intestinal</td>
<td>Gastric</td>
</tr>
</tbody>
</table>

## S3.06 | Histologic grade - carcinoma | See p2 |

<table>
<thead>
<tr>
<th>G3.01</th>
<th>Phenotype (if adenocarcinoma)</th>
<th>Intestinal Gastric Mixed/hybrid</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>Absent</td>
<td>Present</td>
</tr>
</tbody>
</table>

## S3.07 | Tumour size (Record for each tumour identified) | ___ mm |

## S3.08 | Depth of invasion | See p2 |

## S3.09 | Additional details - depth of invasion | See p2 |

## S3.10 | Lymphatic and capillary space invasion | Absent | Present |

| Vein and artery space invasion | Absent | Present |

## G3.02 | Perineural invasion | Absent | Present |

## G3.03 | Tumour budding | Absent | Present |

## S3.11 | SURGICAL MARGIN STATUS | Involved | Not involved |

<table>
<thead>
<tr>
<th>Deep margin</th>
<th>Carcinoma IEN/Dysplasia Both IEN &amp; Carcin.</th>
</tr>
</thead>
<tbody>
<tr>
<td>If involved, specify what it is “involved by”.</td>
<td></td>
</tr>
<tr>
<td>If not involved, record dist. to closest margin</td>
<td>___ mm</td>
</tr>
</tbody>
</table>
### Microscopic findings (cont.)

<table>
<thead>
<tr>
<th>Lateral margin</th>
<th>Involved</th>
<th>Not involved</th>
</tr>
</thead>
<tbody>
<tr>
<td>If involved, specify what it is “involved by”.</td>
<td>Carcinoma</td>
<td>IEN/Dysplasia</td>
</tr>
<tr>
<td></td>
<td>Both IEN &amp; Carcin.</td>
<td></td>
</tr>
</tbody>
</table>

| If not involved, record distance to closest margin | ___mm |
| | OR Not applicable |

#### S3.12 Other pathologies
- See p2

#### G3.04 Other microscopic comment
- Text

### Ancillary test findings

#### G4.01 Ancillary tests
- Performed
- Not performed

<table>
<thead>
<tr>
<th>If performed, record</th>
<th>Test type eg IHC</th>
<th>Result</th>
<th>Interpretation</th>
</tr>
</thead>
</table>

| If Immunohistochem., record antibodies | Positive Ab | Negative Ab | Equivocal Ab |

### Synthesis and overview

#### G5.01 Diagnostic summary.
- Text

Include:
- Type of lesion (S3.02)
- If carcinoma record:
  - Histologic type
  - Histologic grade
  - Depth of invasion
  - Margin status
  - Vascular invasion
  - Presence of other pathologies
- If IEN record:
  - Histologic grade
  - Margin status
  - Presence of other pathologies

#### G5.02 Overarching comment
- Text

### NOTES

#### S1.02 Tumour morphology
Select all that apply:
- Polypoid
  - 0-1p (protruded, pedunculated)
  - 0-1s (protruded, sessile; >2.5mm above baseline)
- Non-Polypoid
  - 0-IIa (superficial, elevated; < 2.5mm above baseline)
  - 0-IIb (flat)
  - 0-IIc (superficial shallow, depressed)
  - 0-III (excavated/ulcerated)

#### S1.02 Type of procedure
- Endoscopic Resection (ER)
- Endoscopic Submucosal Dissection (ESD)
- Other (specify)

### S3.01 Tissue layers
- Mucosa
  - Squamous
  - Glandular
  - Glandular & squamous
- Muscularis mucosae
- Submucosa
- Muscularis propria

### S3.05 Histologic type - carcinoma
- Squamous cell carcinoma
- Adenocarcinoma
- Adenoid cystic carcinoma
- Adenosquamous carcinoma
- Basaloid squamous cell carcinoma
- Mucoepidermoid carcinoma
- Spindle cell (squamous) carcinoma
- Verrucous (squamous) carcinoma
- Undifferentiated carcinoma

### S3.06 Hist. grade - carcinoma
- Not applicable
- GX Grade cannot be assessed
- G1 Well differentiated
- G2 Moderately differentiated
- G3 Poorly differentiated
- G4 Undifferentiated

### S3.08 Depth of invasion
- Cannot be assessed
- T1a – tumour invades lamina propria or muscularis mucosae
- T1b - Tumour invades submucosa

### S3.09 Additional detail - Depth of invasion
Note: 1 or both of the below subdivisions may be reported. This response is conditional on adenocarcinoma or squamous cell carcinoma being recorded in S3.02.

3-tiered AJCC
- m1 - In situ
- m2 - into the lamina propria
- m3 – into the muscularis mucosae
- sm1 – superficial 1/3 submucosa
- sm2 – intermediate one third of submucosa
- sm3 – outer one third of submucosa

4 tiered Stolte
- m1 - into the lamina propria
- m2 - into the superficial/inner muscularis mucosae
- m3 - into the space between the layers of the muscularis mucosae
- m4 - into the outer/true muscularis mucosae

### S3.12 Other pathologies
- IEN in cases of carcinoma
- Ulceration
- Scar formation
- Columnar metaplasia
- Goblet cells
- Infection
- Foreign body
- Other changes related to previous treatment
- Other neoplasms eg granular cell tumours
- Other (specify)