

Carcinoma of the Renal Pelvis & Ureter

Histopathology Request Information



Family name

Given name(s)

Date of birth

Date of request

Indigenous Status

- Aboriginal but not Torres Strait Islander origin
 Torres Strait Islander but not Aboriginal origin
 Both Aboriginal and Torres Strait Islander origin
 Neither Aboriginal nor Torres Strait Islander origin
 Not stated/inadequately described

Patient identifiers

e.g. MRN, IHI or NHI (please indicate which)

Requesting doctor - name and contact details

Copy to doctor
name and contact details

CLINICAL INFORMATION

Previous history of urinary tract disease or distant metastasis

- Non-invasive papillary No previous history
 Carcinoma in situ, flat
 Invasion into lamina propria
 Muscle invasive disease
 Distant metastasis
 Other, *specify*

Previous therapy

- Radiation therapy No previous therapy
 Chemotherapy, systemic
 Bacillus Calmette-Guerin (BCG)
 Chemotherapy, intravesical, *specify*

Other, *specify*

Other clinical information

CLINICAL EXTENT OF DISEASE

OPERATIVE PROCEDURE

- Nephroureterectomy
 Ureterectomy, partial
 Ureterectomy, complete
 Ureterectomy with cystectomy
 Ureterectomy with cystoprostatectomy
 Other, *specify*

ADDITIONAL SPECIMEN(S) SUBMITTED

Not submitted

PRINCIPAL CLINICIAN

OTHER COMMENTS