Carcinomas of the Oral Cavity Histopathology Reporting Proforma

Includes the International Collaboration on Cancer reporting dataset denoted by *

**Clinical information**

**S1.02**  
Not provided OR

**Anatomical site of lesion**

**Laterality of the lesion**

- Left
- Right

**Clinical history**

**Human papilloma virus (HPV) status**

**Clinical diagnosis or differential diagnosis**

**Operative procedure** (select all that apply)

- Not specified
- Biopsy (excisional, incisional), specify
  - Glossectomy, specify
  - Buccal mucosa, specify
  - Lip, specify
  - Mandibulectomy, specify
  - Maxillectomy, specify
  - Palatectomy, specify
  - Neck (lymph node) dissection*, specify
  - Other, specify

* If a neck dissection is submitted, then a separate protocol is used to record the information.

**Any involvement of adjacent structures**

- Not stated
**Neoadjuvant therapy**
- Information not provided
- Not administered
- Administered, specify type (select all that apply)
  - Chemotherapy
  - Radiotherapy
  - Targeted therapy, specify if available
  - Immunotherapy, specify if available
- Time interval since therapy, specify

**New primary lesion or recurrence**
- New primary
- Recurrence - regional, describe
- Recurrence - distant, describe

**S2.01 SPECIMEN LABELLED AS**

**S2.02 OPERATIVE PROCEDURE**
- Not specified
- Biopsy (excisional, incisional), specify
- Resection, specify
- Glossectomy, specify
- Buccal mucosa, specify
- Lip, specify
- Mandibulectomy, specify
- Maxillectomy, specify
- Palatectomy, specify
- Neck (lymph node) dissection*, specify
- Other, specify

* If a neck dissection is submitted, then a separate protocol is used to record the information.

**S2.03 SPECIMENS SUBMITTED** (select all that apply)
- Not specified
- Buccal mucosa
- Buccal vestibule
- Tongue
- Retromolar trigone
- Alveolar process
- Mandible
- Maxilla
- Lip
- Floor of mouth
- Hard palate
- Other, specify

**Appearance**

**G1.01 COPY TO DOCTORS**

**S1.04 PRINCIPAL CLINICIAN**

**G1.02 ADDITIONAL COMMENTS**

**Macroscopic findings**
### S2.04 MACROSCOPIC TUMOUR SITE

**Lip**
- Vermilion border upper lip
  - Left
  - Midline
  - Right
  ○ Laterality not specified
- Vermilion border lower lip
  - Left
  - Midline
  - Right
  ○ Laterality not specified
- Mucosa of upper lip
  - Left
  - Midline
  - Right
  ○ Laterality not specified
- Mucosa of lower lip
  - Left
  - Midline
  - Right
  ○ Laterality not specified
- Commissure of lip
  - Left
  - Midline
  - Right
  ○ Laterality not specified

**Oral cavity**
- Lateral border of tongue
  - Left
  - Midline
  - Right
  ○ Laterality not specified
- Ventral surface of tongue, not otherwise specified (NOS)
  - Left
  - Midline
  - Right
  ○ Laterality not specified
- Dorsal surface of tongue, NOS
  - Left
  - Midline
  - Right
  ○ Laterality not specified
- Anterior two-thirds of tongue, NOS
  - Left
  - Midline
  - Right
  ○ Laterality not specified
- Upper gingiva (gum)
  - Left
  - Midline
  - Right
  ○ Laterality not specified
- Anterior floor of mouth
  - Left
  - Midline
  ○ Laterality not specified
- Floor of mouth, NOS
  - Left
  - Midline
  - Right
  ○ Laterality not specified
- Hard palate
  - Left
  - Midline
  - Right
  ○ Laterality not specified
- Buccal mucosa (inner cheek)
  - Left
  - Midline
  - Right
  ○ Laterality not specified
- Retromolar trigone
  - Left
  - Midline
  - Right
  ○ Laterality not specified
- Vestibule of mouth
  - Maxillary
    - Left
    - Midline
    - Right
    ○ Laterality not specified
  - Mandibular
    - Left
    - Midline
    - Right
    ○ Laterality not specified
- Alveolar process
  - Maxillary
    - Left
    - Midline
    - Right
    ○ Laterality not specified
  - Mandibular
    - Left
    - Midline
    - Right
    ○ Laterality not specified
- Other, specify including laterality

### S2.05 TUMOUR DIMENSIONS

- Cannot be determined/surgical resection margins involved
- Maximum tumour surface dimension (largest tumour)
  - mm

### S2.06 INK APPLICATION AND BLOCK IDENTIFICATION KEY

### G2.02 ADDITIONAL MACROSCOPIC COMMENTS

**Macroscopic findings**

### S3.01 TUMOUR TYPE

- Squamous cell carcinoma
  - Conventiona
  - Verrucous carcinoma
  - Basaloid squamous cell carcinoma
  - Papillary squamous cell carcinoma
  - Spindle cell carcinoma
  - Acantholytic squamous cell carcinoma
  - Adenosquamous cell carcinoma
  - Carcinoma cuniculatum
- Salivary gland neoplasm
- Neuroendocrine carcinoma, specify type
- Secretory carcinoma
- Mucopidermoid carcinoma
  - Low grade
  - Intermediate grade
  - High grade
### S3.01 TUMOUR TYPE (continued)
- **Adenoid cystic carcinoma**
  - Tubular/cribriform pattern predominant
  - Solid pattern *(specify if <30% or >30%)*

- **Polymorphous adenocarcinoma**
  - Classic, *specify grade*
  - Cribriform

- *(Hyalinizing)* Clear cell carcinoma

- **Myoepithelial carcinoma**

- **Adenocarcinoma, NOS**
  - Low grade
  - Intermediate grade
  - High grade

- **Carcinoma ex pleomorphic adenoma**, *specify tumour type(s)* eg salivary duct adenocarcinoma, NOS
  - Intracapsular
  - Minimally invasive
  - Widely invasive

- **Undifferentiated** (no or limited differentiation)

- **Other**, *specify type*

- Cannot be assessed, *specify*

### S3.02 HISTOLOGICAL TUMOUR GRADE
*(Conditional on squamous cell carcinoma selected in S3.01)*
- Not applicable
- GX: Cannot be assessed
- G1: Well differentiated
- G2: Moderately differentiated
- G3: Poorly differentiated
- Cannot be assessed, *specify*

### S3.03 TUMOUR SIZE (greatest surface dimensions or diameter)
- **length** mm × **width** mm

### S3.04 DEPTH OF INVASION
- ≤5 mm depth of invasion
- >5 mm and ≤10 mm depth of invasion
- >10 mm depth of invasion
- Cannot be assessed, *specify*

### S3.05 GROWTH PATTERN OF INVASION AT INVASIVE FRONT
- Cohesive
  - Broad bulbous islands of cells
  - Strands of cells (>15 cells across)

- Non-cohesive
  - Narrow strands or small islands of infiltrating cells
  - Single infiltrating keratinocytes
  - Widely dispersed

### G3.01 RESPONSE TO NEOADJUVANT THERAPY
- No prior treatment
- Incomplete response
- Complete response
- Response cannot be assessed, *explain reasons*

### S3.06 LYMPHOVASCULAR INVASION
- Not identified
- Present
- Cannot be assessed, *specify*

### S3.07 PERINEURAL INVASION AT TUMOUR FRONT
- Not identified
- Present
- Large (>1 mm diameter)
- Small (<1 mm diameter)
- Cannot be assessed, *specify*

### S3.08 BONE INVASION
- Absent
  - Present
  - Erosive
  - Infiltrative
  - Cannot be assessed, *specify*

### G3.02 INVOLVEMENT OF ADJACENT STRUCTURES
- Absent
- Present, *specify sites*
### Ancillary findings

#### G4.01 *ANCILLARY STUDIES*

- Not performed
- **Performed, specify**

#### IMMUNOHISTOCHEMICAL STAINS

**Antibodies (list as applicable)**

- **Positive**
- **Negative**
- **Equivocal**

**Interpretation**

- **Clinical significance**

#### IN SITU HYBRIDISATION

Record performing laboratory, result, conclusion, person responsible for reporting

#### CYTOGENETICS

Record performing laboratory, result, conclusion, person responsible for reporting

### Synthesis and overview

#### S5.01 *PATHOLOGICAL STAGING (AJCC 8th Edition)*

**TNM Descriptors** (only if applicable) (select all that apply)

- **m** - multiple primary tumours
- **r** - recurrent
- **y** - post-therapy

#### Primary tumour (T)

<table>
<thead>
<tr>
<th>Option</th>
<th>Description</th>
</tr>
</thead>
<tbody>
<tr>
<td>TX</td>
<td>Primary tumour cannot be assessed</td>
</tr>
<tr>
<td>Tis</td>
<td>Carcinoma in situ</td>
</tr>
<tr>
<td>T1</td>
<td>Tumour &lt;2 cm with depth of invasion (DOI)* &lt;5 mm</td>
</tr>
<tr>
<td>T2</td>
<td>Tumour &lt;2 cm, with DOI* &gt;5 mm and &lt;10 mm or tumour &gt;2 cm and &lt;4 cm, with DOI* &lt;10 mm</td>
</tr>
<tr>
<td>T3</td>
<td>Tumour &gt;2 cm and &lt;4 cm with DOI* &gt;10 mm or tumour &gt;4 cm with DOI* &lt;10 mm</td>
</tr>
<tr>
<td>T4</td>
<td>Moderately advanced or very advanced local disease</td>
</tr>
<tr>
<td>T4a</td>
<td>Moderately advanced local disease.</td>
</tr>
<tr>
<td>T4b</td>
<td>Very advanced local disease.</td>
</tr>
</tbody>
</table>

**Note:** Superficial erosion of bone/tooth socket (alone) by a gingival primary is not sufficient to classify a tumour as T4

*DOI is depth of invasion and not tumour thickness*
Regional lymph nodes (pN)

- **NX**: Regional lymph nodes cannot be assessed
- **N0**: No regional lymph node metastasis
- **N1**: Metastasis in a single ipsilateral lymph node, 3 cm or smaller in greatest dimension and ENE(-)
- **N2**: Metastasis in a single ipsilateral lymph node, 3 cm or smaller in greatest dimension and ENE(+); or larger than 3 cm but not larger than 6 cm in greatest dimension and ENE(-); or metastasis in multiple ipsilateral lymph nodes, none larger than 6 cm in greatest dimension and ENE(-); or in bilateral or contralateral lymph node(s), none larger than 6 cm in greatest dimension, ENE(-)
- **N2a**: Metastasis in single ipsilateral node 3 cm or smaller in greatest dimension, ENE(-)
- **N2b**: Metastasis in multiple ipsilateral nodes, none larger than 6 cm in greatest dimension, ENE(-)
- **N2c**: Metastasis in bilateral or contralateral lymph node(s), none larger than 6 cm in greatest dimension and ENE(-)
- **N3**: Metastasis in a lymph node larger than 6 cm in greatest dimension and ENE(-); or metastasis in a single ipsilateral node larger than 3 cm in greatest dimension and ENE(+); or multiple ipsilateral, contralateral or bilateral nodes any with ENE(+)
- **N3a**: Metastasis in a lymph node larger than 6 cm in greatest dimension and ENE(-)
- **N3b**: Metastasis in a single ipsilateral node larger than 3 cm in greatest dimension and ENE(+); or multiple ipsilateral, contralateral or bilateral nodes any with ENE(+); or a single contralateral node of any size and ENE(+); or multiple ipsilateral, contralateral or bilateral nodes any with ENE(+); or a single contralateral node of any size and ENE(+)

Note: A designation of "U" or "L" may be used for any N category to indicate metastasis above the lower border of the cricoid (U) or below the lower border of the cricoid (L). Similarly, clinical and pathological ENE should be recorded as ENE(-) or ENE(+)

Distant metastasis (pM)

- **M0**: No distant metastasis
- **M1**: Distant metastasis


### Anatomic Stage / Prognostic Group

<table>
<thead>
<tr>
<th>Stage</th>
<th>Tis</th>
<th>N0</th>
<th>M0</th>
</tr>
</thead>
<tbody>
<tr>
<td>Stage I</td>
<td>T1</td>
<td>N0</td>
<td>M0</td>
</tr>
<tr>
<td>Stage II</td>
<td>T2</td>
<td>N0</td>
<td>M0</td>
</tr>
<tr>
<td>Stage III</td>
<td>T3</td>
<td>N0</td>
<td>M0</td>
</tr>
<tr>
<td>Stage IVA</td>
<td>T4a</td>
<td>N0</td>
<td>M0</td>
</tr>
<tr>
<td>Stage IVB</td>
<td>Any T</td>
<td>N3</td>
<td>M0</td>
</tr>
<tr>
<td>Stage IVC</td>
<td>Any T</td>
<td>Any N</td>
<td>M1</td>
</tr>
</tbody>
</table>

**S5.02** Year of publication and edition of cancer staging system

**G5.01** DIAGNOSTIC SUMMARY

Include: Type of specimen; Anatomical site; Tumour type; Histological grade; Tumour dimensions; Depth of invasion; Pattern of invasion; Lymphovascular invasion; Perineural invasion; Bone invasion; Involvement or close margins with measurements.

**S5.03** OVERARCHING COMMENT

**G5.02** Edition/version number of the Structured Reporting Protocol.