

Data element	Response					
Fresh tissue received	No	Yes	<i>If yes, describe any additional tests/ frozen sections/biobanking performed</i>			
Procedure and specimen site	Text		<i>As stated by the clinician</i>			
Laterality	Right	Left	Midline	Not specified		
Specimen components and dimensions <i>(as applicable)</i>						
Total specimen	__ x __ x __ mm					
Palatine tonsil	__ x __ x __ mm					
Adenoid	__ x __ x __ mm					
Oral mucosa	__ x __ x __ mm					
Bone, <i>specify</i>	Text	__ x __ x __ mm				
Mucosal surface abnormalities/lesion(s)	Absent	Present	<i>If present describe and measure</i>			
			Tumour __ x __ x __ mm	Polyp __ x __ x __ mm	Ulcer __ x __ x __ mm	Other, specify
Specimen orientation and key to coloured inks	Text					
<i>For each tumour: (if >1 designate accordingly)</i>						
Tumour site	Text					
Tumour dimensions	__ x __ x __ mm					
Oropharyngeal tumours macroscopic depth of invasion	__ mm					
Tumour description	Exophytic	Endophytic	Ulcerated	Polypoid	Nodular	
Distance to closest margin(s)	<i>Specify margin</i>	Text	__ mm			
Other relevant macroscopic information	Text	<i>E.g. any additional orientation; specimen integrity (if disrupted); relationship of tumour to other structures included in "anatomical components"</i>				
Describe nature and site of blocks	Text					