


Thyroid Cancer Histopathology Reporting Proforma

Includes the  International Collaboration on Cancer reporting dataset denoted by *



Family name

Given name(s)

Date of birth

Patient identifiers

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

Date of request

S1.03 Accession number

Requesting doctor - name and contact details

Sex

- Male
 Female
 Intersex/indeterminate

Ethnicity

- Unknown
 Aboriginal/Torres Strait Islander (AU)
 Māori (NZ)
 Other ethnicity:

Mandatory questions (i.e. protocol standards) are in bold (e.g. **S1.03**).

Indicates multi-select Indicates single select

Clinical information

S1.02/S2.02

OR

***Previous history of thyroid tumour or related abnormality**

***Relevant biopsy/cytology results**

***Imaging findings**

***Previous surgery/therapy**

***Relevant family history**

***Presence of clinical syndrome**

G1.01 COPY TO DOCTORS

S1.04 PRINCIPAL CLINICIAN

G1.02 ***OTHER CLINICAL COMMENTS**

Macroscopic findings

S2.01 SPECIMEN LABELLED AS

S2.03 *OPERATIVE PROCEDURE (select all that apply)

- Not specified
 Total thyroidectomy
 Near total thyroidectomy
 Hemithyroidectomy
 Lobectomy
 Isthmusectomy
 Partial excision,^a *specify type if possible*

Lymph node dissection

Other, *specify*

^a Anything less than a lobectomy excluding isthmusectomy, including substernal excision.

S2.04 *OPERATIVE FINDINGS

Not specified

Intra-operative macroscopic evidence of extrathyroidal extension

Yes, *specify location and tissue invaded*

No

Information not available

Intra-operative impression of completeness of excision

R0/R1

R2, *specify location*

Information not available

Other, specify

S2.05 *SPECIMEN(S) SUBMITTED (select all that apply)

- Not specified
- Thyroid gland
 - Left
 - Right
 - Isthmus
- Parathyroid gland(s)
- Lymph node(s), *specify site(s) and laterality*

- Other, *specify site(s) and laterality*

G2.01 *SPECIMEN WEIGHT

S2.06 *TUMOUR FOCALITY

(For the most clinically relevant tumour)

- Unifocal
- Multifocal, *specify number of tumours in specimen (if >5 state such but no need to specify the number)*

- Cannot be assessed, *specify*

S2.07 *TUMOUR SITE (select all that apply)

(For the most clinically relevant tumour)

- Not specified
- Lobe
 - Left
 - Right
- Isthmus
- Pyramidal lobe
- Soft tissue or muscle, *specify site(s) and laterality*

- Other, *specify site(s) and laterality*

S2.08 MACROSCOPIC DESCRIPTION

G2.02 THYROID APPEARANCE

S2.09 BLOCK IDENTIFICATION KEY

G2.03 ADDITIONAL MACROSCOPIC COMMENTS

Microscopic findings

S3.01 *HISTOLOGICAL TUMOUR TYPE (select all that apply)

(Value list from the World Health Organization Classification of Tumours: Pathology and Genetics of Tumours of Endocrine Organs (2017))

- Papillary thyroid carcinoma
 - Classic (usual, conventional)
 - Columnar cell variant
 - Cribriform-morular variant
 - Diffuse sclerosing variant
 - Encapsulated variant
 - Encapsulated/well demarcated follicular variant with invasion
 - Infiltrative follicular variant
 - Hobnail variant
 - Microcarcinoma
 - Oncocytic variant
 - Solid variant
 - Tall cell variant
 - Warthin-like variant
 - Other variant, *specify*

- Follicular thyroid carcinoma (FTC)
 - FTC, minimally invasive
 - FTC, encapsulated angioinvasive
 - FTC, widely invasive
- Hürthle (oncocytic) cell tumours
 - Hürthle cell carcinoma, minimally invasive
 - Hürthle cell carcinoma, encapsulated angioinvasive
 - Hürthle cell carcinoma, widely invasive

- Poorly differentiated thyroid carcinoma
- Anaplastic thyroid carcinoma
- Squamous cell carcinoma
- Medullary thyroid carcinoma
- Mixed medullary and follicular thyroid carcinoma
- Mucoepidermoid carcinoma
- Sclerosing mucoepidermoid carcinoma with eosinophilia
- Mucinous carcinoma
- Spindle epithelial tumour with thymus-like differentiation
- Intrathyroid thymic carcinoma
- Other, *specify*

S3.02 *MICROSCOPIC TUMOUR DIMENSION

Maximum tumour dimension (largest tumour)

Additional dimensions (largest tumour)

 x

- Cannot be assessed, *specify*

S3.03 *MITOTIC ACTIVITY^b

- Not identified/low (<3 mitoses/2 mm²)
- High (≥3 mitoses/2 mm²)

Number of mitoses per 2 mm²

- Cannot be assessed

^b 2 mm² approximates 10 HPFs on some microscopes.

G3.01 *HISTOLOGICAL TUMOUR GRADE

- Well-differentiated
- Poorly differentiated
- Undifferentiated/anaplastic

S3.04 *TUMOUR ENCAPSULATION/CIRCUMSCRIPTION

- Encapsulated
- Infiltrative
- Other, *specify*

S3.05 *CAPSULAR INVASION

- Not applicable
- Uncertain
- Not identified
- Present
- Cannot be assessed, *specify*

S3.06 *LYMPHATIC INVASION

- Not identified
- Present
- Cannot be assessed, *specify*

***VASCULAR INVASION**

- Not identified
- Present, for encapsulated neoplasms, *specify*
- Focal, <4 foci
- Extensive, ≥4 foci

Extrathyroidal blood vessel invasion

- Not identified
- Present
- Small vessel, not otherwise classifiable
- Cannot be assessed, *specify*

S3.07 *NECROSIS

- Not identified
- Present

S3.08 *EXTRATHYROIDAL EXTENSION (select all that apply)

- Cannot be assessed
- Not identified
- Invasion into perithyroid fibroadipose tissue
- Invasion into skeletal muscle
- Invasion into subcutaneous soft tissue, larynx, trachea, oesophagus or recurrent laryngeal nerve
- Invasion into prevertebral fascia or encasing the carotid artery or mediastinal vessel

S3.09 *MARGIN STATUS

- Not involved
- Distance of tumour to closest margin mm

- Involved, *specify (anterior or posterior)*
-

- Cannot be assessed, *specify*
-

S3.10 *LYMPH NODE STATUS

- No nodes submitted or found
- Number of lymph nodes examined
- Not involved
- Involved
- Number of positive lymph nodes
- Number cannot be determined

Location of involved lymph nodes, *specify*

Greatest dimension of largest lymph node with metastasis mm

Greatest dimension of largest metastatic focus in lymph node mm

Extranodal extension

- Not identified
- Present
- Cannot be determined

G3.02 *C-CELL HYPERPLASIA (*Medullary carcinoma only*)

- Not identified
- Present
- Unilateral
- Bilateral

S3.11 *PARATHYROID GLAND STATUS

- Not identified
- Present
- Number of parathyroid gland(s) found
- Normal
- Involved by carcinoma
- Hypercellular/enlarged

S3.12 *DISTANT METASTASES

- Not identified
- Not assessed
- Present, *specify site(s)*

S3.13 *COEXISTENT PATHOLOGY (select all that apply)

- None identified
- Nodular hyperplasia
- Diffuse hyperplasia
- Dyshormonogenetic goitre
- Chronic lymphocytic thyroiditis
- Follicular adenoma
- Hürthle cell adenoma
- Noninvasive follicular thyroid neoplasm with papillary-like nuclear features (NIFTP)
- Other, *specify*

G3.04 ADDITIONAL MICROSCOPIC COMMENT

Ancillary findings

G4.01 *ANCILLARY STUDIES

- Not performed
- Performed, *specify*

G3.02 MOLECULAR STUDIES

G5.01 DIAGNOSTIC SUMMARY

Include: Specimen submitted, Histological tumour type, Diameter of largest tumour, Completeness of excision, Tumour stage.

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

Synthesis and overview

S5.01 *PATHOLOGICAL STAGING (AJCC TNM 8th edition)

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

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

Primary tumour (pT)*

- TX Primary tumour cannot be assessed
- T0 No evidence of primary tumour
- T1 Tumour ≤2 cm in greatest dimension limited to the thyroid
 - T1a Tumour ≤1 cm in greatest dimension limited to the thyroid
 - T1b Tumour >1 cm but ≤2 cm in greatest dimension limited to the thyroid
- T2 Tumour >2 cm but ≤4 cm in greatest dimension limited to the thyroid
- T3 Tumour >4 cm limited to the thyroid, or gross extrathyroidal extension invading only strap muscles
 - T3a Tumour >4 cm limited to the thyroid
 - T3b Gross extrathyroidal extension invading only strap muscles (sternohyoid, sternothyroid, thyrohyoid, or omohyoid muscles) from a tumour of any size
- T4 Includes gross extrathyroidal extension beyond the strap muscles
 - T4a Gross extrathyroidal extension invading subcutaneous soft tissues, larynx, trachea, oesophagus, recurrent laryngeal nerve from a tumour of any size
 - T4b Gross extrathyroidal extension invading prevertebral fascia or encasing the carotid artery or mediastinal vessels from a tumour of any size

*All categories may be subdivided: (s) solitary tumour and (m) multifocal tumour (the largest tumour determines the classification).

Regional lymph nodes (pN)

- NX Regional lymph nodes cannot be assessed
- N0 No evidence of locoregional lymph node metastasis
 - N0a One or more cytologically or histologically confirmed benign lymph nodes
 - N0b No radiologic or clinical evidence of locoregional lymph node metastasis
- N1 Metastasis to regional nodes
 - N1a Metastasis to level VI or VII (pretracheal, paratracheal, paratracheal, or prelaryngeal/Delphian, or upper mediastinal) lymph nodes. This can be unilateral or bilateral disease.
 - N1b Metastasis to unilateral, bilateral or contralateral lateral neck lymph nodes (levels I, II, III, IV or V) or retropharyngeal lymph nodes

Used with permission of the American College of Surgeons, Chicago, Illinois. The original source for this information is the AJCC Cancer Staging Manual, Eighth Edition (2016) published by Springer Science+Business Media

S5.02 Year and edition of staging system

S5.03 OVERARCHING COMMENT