

# Structured Pathology Reporting of Cancer Newsletter

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PDF versions of this newsletter are available from the structured pathology website.

Welcome to the last edition of the Structured Pathology Reporting of Cancer newsletter for 2013.

This newsletter is intended to provide information on the project to expand and promote the use of structured pathology reporting of cancer.



*Season's Greetings*

Wishing you all the very best for this holiday season and a very HAPPY NEW YEAR!

## RCPA's new website

As you will know the RCPA has moved over to a brand new website. You may like to re-bookmark the following pages:

Cancer Protocols:

<http://www.rcpa.edu.au/Library/Practising-Pathology/Structured-Pathology-Reporting-of-Cancer/Cancer-Protocols>

Macroscopic templates:

<http://www.rcpa.edu.au/Library/Practising-Pathology/Structured-Pathology-Reporting-of-Cancer/Macroscopic-reporting>

The International Collaboration on Cancer Reporting:

<http://www.rcpa.edu.au/Library/Practising-pathology/ICCR>

# Protocol update

## New editions!

The RCPA Council has recently endorsed the following structured pathology reporting protocols:

- Cervical Cancer
- Malignant Salivary Gland Neoplasms
- Polypectomy and Local Resections of the Colorectum
- 2nd edition Lung Cancer

The 2<sup>nd</sup> edition of the Lung Cancer protocol also includes the elements from the newly endorsed International Collaboration on Cancer Reporting datasets. These are indicated by a miniature ICCR logo: 

Macroscopic reporting templates coupled with the equivalent typist word document provide significant improvements in completeness and clarity of the Macroscopic section of a report whilst also offering improved efficiency in the laboratory:

<http://www.rcpa.edu.au/Library/Practising-Pathology/Structured-Pathology-Reporting-of-Cancer/Macroscopic-reporting>

The following cervical cancer macroscopic template is a typical example:

Standards and Guidelines for the Macroscopic Reporting of Cervical Cancer			
Specimen handling information...?			
S/G	Element	Response	
S2.02	<b>Specimen labelled as</b>	Text	
S2.03	<b>Orientation markers</b>	Text	
G2.01	Specimen-external appearance	Text	
S2.04	<b>SPECIMEN MEASUREMENTS</b>		
	<b>Cone biopsy or radical trachelectomy:</b>		
	Length of specimen	__mm	
	Length of canal	__mm	
	Diameter of ectocervix in 3-9 o'clock plane	__mm	
	Diameter of ectocervix in 6-12 o'clock plane	__mm	
	<b>Hysterectomy or radical hysterectomy:</b>		
	Uterine dimensions	__x__x__mm	
G2.02	Descrip. of uterus and accompanying organs/tissues	Text	
S2.05	<b>Macroscopically visible tumour</b>	Absent Present	?
	<b>If present, describe</b>	Text	
	<b>No. of visible tumours</b>	___	
	<b>IF TUMOUR VISIBLE, record the following:</b>		
G2.03	Tumour location within ectocervix/endocervix plane	Text	
	Tumour location radially (clock-face)	Text	
S2.06	<b>Tumour size</b>	__x__mm	
G2.04	Tumour appearance	Text	?
S2.07	<b>Tumour thickness</b>	__mm out of __mm	?
	(Record from the tumour surface to deepest point of invasion out of the total cervical wall thickness in this region)		
S2.08	<b>Closest distance of tumour to resection margin</b>	__mm	?
G2.05	Distance between tumours	__mm	?
	Outermost span of tumours	__mm	?
S2.09	<b>Macroscopic invasion</b>	Vaginal cuff Uterine body Parametrium Other organ/tissue (specify)	?
S2.10	<b>Nature and site of blocks</b>	Text	
S2.11	<b>Lymph nodes</b>	Not submitted Submitted	
	<b>If submitted, record for each site and laterality:</b>		
	<b>Number of nodes</b>	___	
	<b>LN appears macroscopically involved?</b>	No Yes	
G2.06	Other macroscopic description	Text	

## Public Consultation

One protocol is currently available for public consultation:

- Thyroid Cytology Structured Pathology Reporting Protocol

...with a further three protocols to be posted shortly:

- Cancer of the Exocrine Pancreas, Ampulla of Vater and Distal Common Bile Duct Structured Pathology Reporting Protocol
- 2<sup>nd</sup> edition of the Primary Cutaneous Melanoma Structured Pathology Reporting Protocol
- 2<sup>nd</sup> edition of the Prostate Cancer (Radical Prostatectomy) Structured Pathology Reporting Protocol

We would especially value your feedback using the interactive form available:

<http://www.rcpa.edu.au/Library/Practising-Pathology/Structured-Pathology-Reporting-of-Cancer/public-consultation>

Please note also that the second editions of the Melanoma and Prostate protocols include the elements from the newly endorsed International Collaboration on Cancer Reporting datasets.

## PITUS Project

The Structured Reporting Protocol project has joined forces with the **Pathology Information, Terminology and Units Standardisation Program (PITUS)** project to look at standardisation of the implementation of protocols in Laboratory Information Systems using the gastric protocol as the initial test case. This working group is also looking at developing a white paper regarding the standardisation of reports to cancer registries, an issue affecting all laboratories. A/Prof David Ellis "There is a currently wide variation both in the requirements of Australasian cancer registries, and in the way in which laboratories report to them." "This is a long term undertaking but the benefits of standardising this will be well worth the effort".

For more information on PITUS the website URL is:

<http://www.rcpa.edu.au/Library/Practising-Pathology/PTIS>

## ICCR update!



The ICCR now has agreement from the original quadripartite – the College of American Pathologists (CAP), The Royal College of Pathologists UK (RCPath), the Canadian Association of Pathologists - Association Canadienne des Pathologistes (CAP-ACP) in association with the Canadian Partnership Against Cancer and our own College (RCPA) – as well as the enthusiastic agreement of the European Society of Pathology (ESP) to become founding co-signatories to the

ICCR constitution. Incorporation will be completed early in the new year.

### **New ICCR Datasets**

The next series of datasets (in synchrony with the WHO Classification of Neoplastic Diseases updates) are:

- Heart
- Lung
- Mesothelioma of the pleura
- Thymus

(As a lung dataset has recently been tackled by the ICCR, it is expected that the 2nd edition will include only minor updates). The ICCR has nominated expert chairs and work will commence shortly.

### **Cancer datasets in progress**

The renal cancer dataset is nearing completion of its final draft and it is hoped it will go to open consultation in early 2014.

Datasets for Ovarian, Fallopian tube and Primary peritoneum are well underway and incorporate the new FIGO and WHO classifications.

## **Updates to 2<sup>nd</sup> editions**

Cancer Control New Zealand (CCNZ) have been working on the development of an electronic web-based form to provide structured reporting templates for pathologists in New Zealand. They have used the 2<sup>nd</sup> edition of the colorectal cancer protocol as their first effort and there has been extensive testing undertaken which has provided some valuable feedback. CCNZ have several other e-forms in development including:

- 2<sup>nd</sup> edition Lung Cancer
- 2<sup>nd</sup> edition Prostate Cancer (Radical Prostatectomy)
- 2<sup>nd</sup> edition Invasive Breast cancer

As a result, these protocols have been well tested and will incorporate a few minor changes which users of the protocol and implementation guides may like to note. Changes will be reported in this and future newsletters as they are agreed.

In the 2nd edition of the Colorectal cancer protocol, pathologists found the checklist entry "Distant metastases" present/absent confusing as this information is often not determined by pathologists alone. The element has been updated to "Histologically confirmed distant metastases" to better describe the intent of the question.

# Brain teaser

Here's something to relax with over the holidays.....

1. What letter comes next in these sequences....

1) W, L, C, N, I, T, \_

2) O, T, T, F, F, S, \_

3) A, S, D, F, G, H, \_

2. Place the arithmetical signs '+' and '-' between the consecutive numbers 123456789 so that the end result is 100

(For example, make 6, so that



12+3-4+5+6-7-8+9 but that would be the idea!!).

3. 9 matchsticks

... move just 3 matchsticks to produce 4 equilateral triangles (no overlapping of the matchsticks is allowed)

Good luck!

(To find out the answers email Meagan at [MeaganJ@RCPA.EDU.AU](mailto:MeaganJ@RCPA.EDU.AU)).

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You have received this message because you are listed as a stakeholder of the national structured pathology reporting project. If you do not want to receive this newsletter in the future, please email: [MeaganJ@RCPA.EDU.AU](mailto:MeaganJ@RCPA.EDU.AU)