# A guide to Mesothelioma in the Pleura and Peritoneum Histopathology Reporting - RESECTION SPECIMENS

Includes the International Collaboration on Cancer reporting dataset denoted by *

## Clinical details

<table>
<thead>
<tr>
<th>S1.02</th>
<th>Clinical information provided on request form (complete as narrative or use the structured format below)</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>Text</td>
</tr>
</tbody>
</table>

### *CLINICAL HISTORY*

- Radiological appearance
- History of previous cancer
- Other

### Neoadjuvant therapy

- Not administered
- Administ. (describe)

<table>
<thead>
<tr>
<th>Operative procedure</th>
</tr>
</thead>
<tbody>
<tr>
<td>Decortication</td>
</tr>
<tr>
<td>Radical pleurectomy</td>
</tr>
<tr>
<td>Extrapleural -pneumonectomy</td>
</tr>
<tr>
<td>Debulking</td>
</tr>
<tr>
<td>Other (specify)</td>
</tr>
</tbody>
</table>

### New primary cancer or recurrence

- New primary
- Local recurrence
- Distant metastasis

If regional (local) recurrence or distant metastasis describe

<table>
<thead>
<tr>
<th>S1.03</th>
<th>Pathology accession number</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>Text</td>
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</tbody>
</table>

<table>
<thead>
<tr>
<th>S1.04</th>
<th>Principal clinician</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>Text</td>
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</table>

<table>
<thead>
<tr>
<th>G1.01</th>
<th>Other relevant comments</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>Text</td>
</tr>
</tbody>
</table>

## Macroscopic findings

<table>
<thead>
<tr>
<th>S2.02</th>
<th>Specimen labelled as</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>Not provided</td>
</tr>
</tbody>
</table>

### Specimens submitted

<table>
<thead>
<tr>
<th>G2.01</th>
<th>TUMOUR SIZE - PLEURAL SPECIMENS</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>Maximum thickness of any mass</td>
</tr>
<tr>
<td></td>
<td>And Dimensions of dominant mass</td>
</tr>
</tbody>
</table>

| OR | Dimensions of largest nodule |
|    | Aggregate dimension of specimen/tumour nodules |

<table>
<thead>
<tr>
<th>G2.02</th>
<th>Other macroscopic description</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>Text</td>
</tr>
</tbody>
</table>

## Microscopic findings

### Histological tumour type

- Epithelioid (Epithelial)
- Sarcomatoid (Sarcomatous)
- Biphasic (Mixed epithelial and sarcomatous)
- Malignant mesothelioma, NOS

<table>
<thead>
<tr>
<th>S3.01</th>
<th>Histological tumour type</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>See adjacent list</td>
</tr>
</tbody>
</table>

### Mitotic count (applicable to peritoneal specimens only)

- ___ per mm2

<table>
<thead>
<tr>
<th>G3.01</th>
<th>Mitotic count</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>___ per mm2</td>
</tr>
</tbody>
</table>

## Microscopic findings (cont.)

### Response to neoadjuvant therapy

- Not applicable
- Can’t be determined
- >50% residual tum.
- <50% residual tum.
- No tumour found

### Extent of direct invasion

<table>
<thead>
<tr>
<th>S3.02</th>
<th>Not applicable</th>
</tr>
</thead>
</table>

### Margin status (Applicable to extrapleural pneumonectomy specimens only)

- Not applicable
- Cannot be assessed
- Involved

If involved:

- Specify margin(s)

### Lymph node status

- Cannot be assessed
- No nodes submitted -or found
- Involved

<table>
<thead>
<tr>
<th>LN station/location or specimen identification (Note: repeat as needed)</th>
</tr>
</thead>
<tbody>
<tr>
<td>Text (id or location) AND Not involved</td>
</tr>
</tbody>
</table>

### Coexistent pathology

- None identified
- OR
- Text

### Additional microscopic comment

<table>
<thead>
<tr>
<th>G3.05</th>
<th>Additional microscopic comment</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>Text</td>
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## Ancillary test findings

<table>
<thead>
<tr>
<th>G4.01</th>
<th>Ancillary studies</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>Not performed</td>
</tr>
</tbody>
</table>

If performed, report S4.01 and consider reporting G4.01.

### Immunohistochemistry

<table>
<thead>
<tr>
<th>S4.01</th>
<th>Immunohistochemistry</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>Text (List stains)</td>
</tr>
</tbody>
</table>

### Other ancillary studies

<table>
<thead>
<tr>
<th>G4.02</th>
<th>Other ancillary studies</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>Text</td>
</tr>
</tbody>
</table>

## Synthesis and overview

### Pathologic staging TNM 7th edition (pleural specimens only)

<table>
<thead>
<tr>
<th>S5.01</th>
<th>See p2</th>
</tr>
</thead>
</table>

### Year and edition of staging system(s).

<table>
<thead>
<tr>
<th>G5.01</th>
<th>Diagnostic summary</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>Text</td>
</tr>
</tbody>
</table>

Include:

- a. Operative procedure
- b. Tumour site
- c. Tumour type

### Overarching comment (if applicable)

<table>
<thead>
<tr>
<th>G5.02</th>
<th>Edition/version number of the RCPA protocol on which the report is based</th>
</tr>
</thead>
<tbody>
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</table>

## Histological tumour type

- Epithelioid (Epithelial)
- Sarcomatoid (Sarcomatous)
- Biphasic (Mixed epithelial and sarcomatous)
- Malignant mesothelioma, NOS

V1.0 Guide derived from Mesothelioma of the Pleura and Peritoneum Structured Reporting Protocol 1st Edition
S2.04 Specimens submitted
Not provided
OR Multi select value list (select all that apply):

**Pleura/Thoracic**
- Diaphragm
- Lung
  - Right
  - Wedge
  - Lobe
  - Entire Lung
  - Left
  - Wedge
  - Lobe
  - Entire Lung
- Mediastinal fat
- Pericardium
- Parietal pleura
- Contralateral pleura
- Visceral pleura
- Endothoracic fascia

**Thoracic**
- Chest wall
- Rib
- Spine
- Port site

**Peritoneum**
- Peritoneum
- Omentum
- Left ovary
- Right ovary
- Left fallopian tube
- Right fallopian tube
- Uterus
- Other intra-abdominal organs (specify)

**Other submitted specimens**
- Lymph nodes (specify site(s))
- Other submitted specimens (specify)

S2.05 Macroscopic tumour site(s)
Indeterminate
OR Multi select value list (select all that apply):

**Pleura/Thoracic**
- Diaphragm
- Lung
  - Right
  - Wedge
  - Lobe
  - Entire Lung
  - Left
  - Wedge
  - Lobe
  - Entire Lung
- Mediastinal fat
- Pericardium
- Parietal pleura
- Contralateral pleura
- Visceral pleura
- Endothoracic fascia
- Chest wall
- Rib
- Spine
- Port site

**Peritoneum**
- Peritoneum
- Omentum
- Left ovary
- Right ovary
- Left fallopian tube
- Right fallopian tube
- Uterus
- Other intra-abdominal organs (specify)

**Other**
- Lymph nodes
- Other site (specify)

S3.02 Extent of direct invasion
- Cannot be assessed
- No evidence of primary tumour
OR Multi select value list (select all that apply):

- Parietal pleura without involvement of the ipsilateral visceral pleura
- Parietal pleura with focal involvement of the ipsilateral visceral pleura
- Endothoracic fascia (as determined by surgeon/radiologist)
- Mediastinal fat
- Localised focus of tumour invading the soft tissue of the chest wall
- Diffuse or multiple foci invading soft tissue of chest wall
- Through the pericardium or diaphragm
- Into but not through the pericardium or diaphragm
- Rib(s)
- Peritoneum through the diaphragm
- Great vessels/oesophagus/trachea or other mediastinal organ
- Extension into contralateral pleura
- Spine
- Myocardium
- Confluent visceral and parietal pleural tumour (including fissure)
- Mediastinal organ(s) (specify)
- Other (specify)

S5.01 Pathological staging (TNM 7th edition)##

**PLEURAL SPECIMENS ONLY**

m - multiple primary tumours at a single site
r - recurrent tumours after a disease free period
y - classification is performed during or following multimodality treatment

### T - Primary tumour

**TX** Primary tumour cannot be assessed
**T0** No evidence of primary tumour
**T1** Tumour involves ipsilateral parietal pleura, with or without focal involvement of visceral pleura
  - T1a Tumour involves ipsilateral parietal (mediastinal, diaphragmatic) pleura. No involvement of the visceral pleura
  - T1b Tumour involves ipsilateral parietal (mediastinal, diaphragmatic) pleura, with focal involvement of the visceral pleura
**T2** Tumour involves any of the ipsilateral pleural surfaces with at least one of the following:
- Confluent visceral pleura tumour (including the fissure)
- Invasion of diaphragmatic muscle
- Invasion of lung parenchyma

**T3** Tumour involves any ipsilateral pleural surfaces with at least one of the following:
- Invasion of endoathoracic fascia
- Invasion of mediastinal fat
- Solitary focus of tumour invading soft tissues of the chest wall
- Non-transmural involvement of the pericardium

**T4** Tumour involves any ipsilateral pleural surfaces with at least one of the following:
- Diffuse or multifocal invasion of soft tissues of chest wall
- Any involvement of rib
- Invasion through diaphragm to peritoneum
- Invasion of any mediastinal organ(s)
- Direct extension to contralateral pleura
- Invasion into the spine
- Extension to internal surface of pericardium
- Pericardial effusion with positive cytology
- Invasion of myocardium
- Invasion of brachial plexus

* T3 describes locally advanced, but potentially resectable tumour.
** T4 describes locally advanced, technically unresectable tumour.

### N - Regional lymph nodes

**NX** Regional lymph nodes cannot be assessed
**N0** No regional lymph node metastases
**N1** Metastasis in ipsilateral bronchopulmonary and/or hilar lymph node(s)
**N2** Metastasis in subcarinal lymph node(s) and/or ipsilateral internal mammary or mediastinal lymph node(s)
**N3** Metastasis in contralateral mediastinal, internal mammary, or hilar node(s) and/or ipsilateral or contralateral supraclavicular or scalene lymph node(s)