Carcinomas of the Adrenal Cortex Histopathology Reporting Proforma

Includes the ICCR International Collaboration on Cancer reporting dataset denoted by *

Family name

Given name(s)

Date of birth

DD – MM – YYYY

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

Sex
- ◯ Male
- ◯ Female
- ◯ Intersex/indeterminate

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

Date of request

DD – MM – YYYY

S1.03 Accession number

Requesting doctor - name and contact details

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 ◯ Not provided OR

OR

☐ *Previous history of endocrine/adrenal tumour or related abnormality

☐ *Relevant biopsy/cytology results

☐ *Previous surgery/therapy

☐ *Relevant familial history

☐ *Functional status
- ☐ Cushing syndrome
- ☐ Primary aldosteronism (PA)
- ☐ Conn syndrome
- ☐ Other, *specify*
- ☐ Virilization
- ☐ Feminization

☐ *Imaging findings

G1.01 COPY TO DOCTORS

S1.04 PRINCIPAL CLINICIAN

G1.02 *OTHER COMMENTS

Macroscopic findings

S2.01 SPECIMEN LABELLED AS

S2.03 *OPERATIVE PROCEDURE (select all that apply)
- ◯ Not specified
- ☐ Adrenalectomy, total
- ☐ Adrenalectomy, partial
  - ◯ Left ◯ Right
- ☐ Open or laproscopic
- ☐ Biopsy (incisional, excisional), *specify*
- ☐ Other, *specify*

S2.04 *SPECIMEN(S) SUBMITTED (select all that apply)
- ◯ Not specified
- ☐ Adrenal tumour
  - ☐ Left ☐ Right
- ☐ Lymph nodes, *specify site(s) and laterality*
- ☐ Other (e.g., metastatic site), *specify site(s) and laterality*

G2.01 *SPECIMEN DIMENSIONS

mm x mm x mm

S2.05 *TUMOUR SITE (select all that apply)
- ◯ Not specified
- ☐ Adrenal
  - ☐ Left ☐ Right
- ☐ Other, *specify site(s) and laterality*

S2.06 NUMBER OF LESIONS

S2.07 MACROSCOPIC APPEARANCE OF LESION(S)
Macroscopic appearance will need to be repeated for each primary tumour identified

Location

◯ Cortex ◯ Indeterminate ◯ Other

Details

Borders

◯ Encapsulated ◯ Infiltrative

Description

Size in greatest dimension

mm

Distance to nearest excision margin

mm

S2.08 APPEARANCE OF UNINVOLVED ADRENAL GLAND

Cortex

◯ Unremarkable ◯ Atrophic (thin)
◯ Not identified ◯ Hypertrophic (thickened)

Cortical nodules

◯ Absent ◯ Present
◯ Not assessable

Size of largest nodule

mm OR ◯ <10 mm

Distance to nearest excision margin

mm

S2.09 *SPECIMEN INTEGRITY

◯ Specimen intact
◯ Capsule disrupted
◯ Fragmented specimen
◯ Cannot be assessed, *specify*

S2.10 *TUMOUR DIMENSIONS
Repeat tumour identification and maximum dimension for each tumour identified

Tumour identification

Maximum tumour dimension (largest tumour)

mm

Additional dimensions (largest tumour)

mm x mm

◯ Cannot be assessed, *specify*

S2.11 *TUMOUR WEIGHT[a]

g

◯ Cannot be assessed, *specify*

[a] *With other organs and fat removed.*

G2.02 ANY ACCOMPANYING SPECIMENS

Lymph nodes

◯ Absent ◯ Present

Other adjacent structures

G2.03 BLOCK IDENTIFICATION KEY

G2.04 ADDITIONAL MACROSCOPIC COMMENTS

Microscopic findings

S3.01 *HISTOLOGICAL TUMOUR TYPE
(Value list based on the World Health Organization (WHO) Classification of Tumours: Pathology and Genetics of Tumours of Endocrine Organs (2017))

◯ Adrenal cortical carcinoma, not otherwise specified (NOS)
◯ Adrenal cortical carcinoma, oncocytic type
◯ Adrenal cortical carcinoma, myxoid type
◯ Adrenal cortical carcinoma, sarcomatoid type
◯ Adrenal cortical neoplasm of uncertain malignant potential[b]
◯ Other, *specify*

[b] *This is not considered a distinct entity under the WHO Classification.*

S3.02 *MICROSCOPIC TUMOUR DIMENSION
Repeat tumour identification and maximum dimension for each tumour identified

Maximum tumour dimension (largest tumour)

mm

Additional dimensions (largest tumour)

mm x mm

◯ Cannot be assessed, *specify*

S3.03 *EXTENT OF INVASION (select all that apply)

- ◯ Cannot be assessed
- ◯ Confined to adrenal gland
- ☐ Invasion into/through adrenal capsule
- ☐ Invasion into extra-adrenal structures, *specify*

  ▼
- ☐ Invasion into adjacent organs, *specify*

  ▼

S3.04 SINUSOIDAL INVASION

◯ Absent ◯ Present

Involved organs

S3.05 *TUMOUR ARCHITECTURE

- ◯ Not identified
- ◯ Indeterminate
- ◯ Diffuse (solid or pattern-less)
- ◯ Nested/non-diffuse

S3.06 *LIPID RICH CELLS

- ◯ Not identified
- ◯ Indeterminate
- ◯ ≤25%
- ◯ >25%

S3.07 *CAPSULAR INVASION

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

  ▼

S3.08 *LYMPHATIC INVASION

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

  ▼

S3.09 *VASCULAR INVASION

- ◯ Not identified
- ◯ Present (select all that apply)

  ▼
  - ☐ Capillary/lymphatic sized vessels
  - ☐ Vein size (select all that apply)

    ▼
    - ☐ Adrenal vein
    - ☐ Vena cava
    - ☐ Other, *specify*

      ▼
- ◯ Cannot be assessed, *specify*

  ▼

S3.10 *ATYPICAL MITOTIC FIGURES

- ◯ Not identified
- ◯ Present

S3.11 *NECROSIS

- ◯ Not identified
- ◯ Present

  ⇩

  Extent

  ◯ Focal ◯ Extensive

S3.12 *NUCLEAR GRADE (Fuhrman criteria)

- ◯ Low (Grade 1 or 2)
- ◯ High (Grade 3 or 4)

S3.13 *MITOTIC COUNT AND HISTOLOGICAL TUMOUR GRADE

Mitotic figures/10 mm^2 [c]

OR

- ◯ Low grade (≤20 mitoses)
- ◯ High grade (>20 mitoses)
- ◯ Cannot be assessed, *specify*

  ▼

[c] *10 mm^2 approximates 50 HPFs on some microscopes.*

S3.14 *Ki-67 PROLIFERATION INDEX

Ki-67 %

- ◯ Cannot be assessed, *specify*

G3.01 *RETICULIN FRAMEWORK

- ◯ Intact/preserved
- ◯ Altered/absent
- ◯ Cannot be assessed, *specify*

G3.02 *MULTIFACTORIAL SCORING SYSTEMS

- ◯ Specify scoring system(s) used and score(s)

  ▼
  - ☐ Weiss system for conventional adrenal cortical neoplasms ⇨
  - ☐ Modified Weiss system (Aubert) for conventional adrenal cortical neoplasms ⇨
  - ☐ Lin-Weiss-Bisceglia system for oncocytic adrenal cortical neoplasm ⇨
  - ☐ Helsinki system for diagnosis and prognosis of conventional and oncocytic adrenal cortical neoplasms ⇨
  - ☐ Reticulin algorithm for the diagnosis of conventional and oncocytic adrenal cortical neoplasms ⇨
  - ☐ Wieneke/AFIP algorithm for paediatric adrenal cortical neoplasms ⇨

S3.15 TUMOUR COMPRISING CLEAR OR VACUOLATED CELLS

%

S3.16 NON-TUMOUR ADRENAL GLAND (select all that apply)

- ◯ Unremarkable
- ◯ Not identified/not asessable
- ☐ Adrenal cortical atrophy
- ☐ Hyperplasia
- ☐ Cortical nodules
- ☐ Medullary hyperplasia/nodule

S3.17 *MARGIN STATUS

- ◯ Not involved (R0)
  - Distance of tumour to closest margin ____ mm
- ◯ Involved
  - Extent
    - ◯ R1 (microscopic), *specify if possible* ____ mm
    - ◯ R2 (macroscopic), *specify if possible* ____ mm
  - Location of involved margin(s), *specify if possible*
- ◯ Cannot be assessed, *specify*

S3.18 *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

Extranodal extension

- ◯ Not identified
- ◯ Present
- ◯ Cannot be determined

G3.03 *COEXISTENT PATHOLOGY (select all that apply)

- ◯ None identified
- ☐ Adenoma
- ☐ Hyperplasia
- ☐ Other, *specify*

S3.19 *DISTANT METASTASES

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

G3.04 ADDITIONAL MICROSCOPIC COMMENT

Ancillary findings

G4.01 *ANCILLARY STUDIES

- ◯ Not performed
- ◯ Performed, *specify*

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 (T)

- ◯ TX Primary tumour cannot be assessed
- ◯ T0 No evidence of primary tumour
- ◯ T1 Tumour ≤5 cm in greatest dimension, no extra-adrenal invasion
- ◯ T2 Tumour >5 cm, no extra-adrenal invasion
- ◯ T3 Tumour of any size with local invasion but not invading adjacent organs
- ◯ T4 Tumour of any size that invades adjacent organs (kidney, diaphragm, pancreas, spleen or liver) or large blood vessels (renal vein or vena cava)

Regional lymph nodes (N)

- ◯ NX Regional lymph nodes cannot be assessed
- ◯ N0 No regional lymph node metastasis
- ◯ N1 Metastasis in regional lymph node(s)

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S5.02 Year and edition of staging system

G5.01 DIAGNOSTIC SUMMARY
Include: Specimen submitted, Histological tumour type, Diameter of largest tumour, Completeness of excision, Tumour stage.

S5.03 OVERARCHING COMMENT

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