Lung Cancer Histopathology Reporting Proforma

Includes the International Collaboration on Cancer reporting dataset denoted by *

Family name

Given name(s)

Date of birth

Sex

- Male
- Female
- Intersex/indeterminate

Ethnicity

- Unknown
- Aboriginal/Torres Strait Islander
- Other ethnicity:

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

Date of request

Accession number

Requesting doctor - name and contact details

Nature of the resection

- Wedge resection
- Segmentectomy
- Bilobectomy
- Lobectomy
- Pneumonectomy
- Other:

Additional extrapulmonary tissue

- No
- Yes

Type of extrapulmonary tissue:

Site and laterality of tumour

- Right upper lobe
- Left upper lobe
- Right middle lobe
- Left lower lobe
- Right lower lobe
- Main bronchus

Results of previous cytological investigations or biopsies

Details of any previous treatment of the current tumour

Details of previous cancer diagnosis

Risk factors for lung cancer (including smoking history, ethnicity and asbestos exposure)

Clinical tumour stage

New primary cancer or recurrence

- New primary
- Recurrence – regional
- Recurrence – distant

Principal clinician caring for the patient

Other clinical information received
### Macroscopic findings

**S2.01 Operative procedure**
- Wedge resection
- Segmentectomy
- Bilobectomy
- Lobectomy
- Pneumonectomy
- Other: ___

**S2.02 Specimen laterality**
- Left
- Right
- Not provided

**S2.03 Attached anatomical structures**
- None submitted
- Submitted

**S2.04 Accompanying specimens**
- None submitted
- Lymph nodes
- Other

**S2.05 Block identification key**

**S2.06 Tumour site**
- Upper lobe
- Middle lobe
- Lower lobe
- Bronchus (specify site)

**G2.01 Tumour location**
- Peripheral
- Central
- Mainstem
- Lobar
- Segmental bronchus

**S2.07 Separate tumour nodules**
- Cannot be assessed
- Absent
- Synchronous primaries
  - Present
  - Not assessable

**S2.08 Maximum tumour dimension**

**S2.09 Macroscopic appearance of pleura overlying tumour**

**S2.10 Extent of direct spread of tumour to other tissues**

**S2.11 Distance of tumour to closest resection margin**

**S2.12 Tumour involves main bronchus within 20 mm of carina**
- Involved
- Not involved
- Not assessable

**S2.13 Lymph nodes**
- Absent
- Present
  - Site
    - Site 1
    - Number of LNs/site
    - Site 2
    - Number of LNs/site
**S2.14  *Atelectasis/obstructive pneumonitis***

<table>
<thead>
<tr>
<th>Extent:</th>
</tr>
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<tbody>
<tr>
<td>Involves entire lobe</td>
</tr>
<tr>
<td>Involves entire lung</td>
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</tbody>
</table>

**S2.15  Non-neoplastic lung**

**G2.02  Other relevant information and comments**

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**Microscopic findings**

**S3.01  *Histological tumour type***

<table>
<thead>
<tr>
<th>Tumour Type</th>
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<tbody>
<tr>
<td>Squamous cell carcinoma</td>
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<tr>
<td>Small cell carcinoma</td>
</tr>
<tr>
<td>Adenocarcinoma</td>
</tr>
<tr>
<td>Large cell carcinoma</td>
</tr>
<tr>
<td>Adenosquamous carcinoma</td>
</tr>
<tr>
<td>Sarcomatoid carcinoma</td>
</tr>
<tr>
<td>Carcinoid tumour</td>
</tr>
<tr>
<td>Other</td>
</tr>
</tbody>
</table>

**S3.02  *Histological grade***

<table>
<thead>
<tr>
<th>Grade</th>
</tr>
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<tbody>
<tr>
<td>Well differentiated</td>
</tr>
<tr>
<td>Moderately differentiated</td>
</tr>
<tr>
<td>Poorly differentiated</td>
</tr>
<tr>
<td>Undifferentiated</td>
</tr>
<tr>
<td>Not applicable</td>
</tr>
</tbody>
</table>

**S3.03  *Visceral pleural invasion***

<table>
<thead>
<tr>
<th>Invasion Type</th>
</tr>
</thead>
<tbody>
<tr>
<td>Cannot be assessed</td>
</tr>
<tr>
<td>Indeterminate</td>
</tr>
<tr>
<td>Not identified</td>
</tr>
<tr>
<td>Present</td>
</tr>
</tbody>
</table>

**G3.01  *Adenocarcinoma classification***

(Select all that apply)

- Adenocarcinoma in situ (AIS)
  - Non-mucinous
  - Mucinous
- Minimally invasive adenocarcinoma (MIA)
  - Non-mucinous
  - Mucinous
- Invasive adenocarcinoma
  - *Predominant pattern*
    - Lepidic
    - Acinar
    - Papillary
    - Micropapillary
    - Solid
- *Other patterns (if present)*
  - Other patterns

<table>
<thead>
<tr>
<th>TYPE OF PATTERN</th>
<th>%</th>
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</table>

**S3.04  *Lymphovascular invasion***

<table>
<thead>
<tr>
<th>Vessel(s) involved</th>
</tr>
</thead>
<tbody>
<tr>
<td>Artery</td>
</tr>
<tr>
<td>Vein</td>
</tr>
<tr>
<td>Lymphatic</td>
</tr>
</tbody>
</table>

**G3.03  Vessel(s) involved**

- Artery
  - Focal
  - Extensive
- Vein
  - Focal
  - Extensive
- Lymphatic
  - Focal
  - Extensive

**G3.04  *Perineural invasion***

<table>
<thead>
<tr>
<th>Invasion Type</th>
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<tbody>
<tr>
<td>Indeterminate</td>
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<tr>
<td>Not identified</td>
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<tr>
<td>Present</td>
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</tbody>
</table>
**S3.05** SURGICAL MARGIN STATUS

*Bronchial resection margin*
- Not applicable
- Not involved
- Involved by invasive carcinoma
- Involved by CIS only

If involved by invasive carcinoma, record:

Tissues involved
- Bronchial
- Peribronchial soft tissue
- Both

If not involved, record:

Microscopic clearance

mm

*Vascular resection margin*
- Not applicable
- Not involved
- Involved

If involved, record:

Nature of involvement


*Other margins*

*Margin 1*
- Not applicable
- Involved
- Not involved

Microscopic clearance

mm

*Margin 2*
- Not applicable
- Involved
- Not involved

Microscopic clearance

mm

**S3.06** *Direct invasion of adjacent structures*

Not identified
Not applicable
Trachea
Chest wall
Diaphragm
Oesophagus
Heart
Great vessels
Vertebral body
Phrenic nerve
Mediastinum
Mediastinal fat
Mediastinal pleura
Parietal pericardium
Recurrent laryngeal nerve

**Tumour at resection margin(s) for involved structures?** (list structure)

Structure 1
- Absent
- Present

Closest microscopic clearance

mm

Structure 2
- Absent
- Present

Closest microscopic clearance

mm

**S3.07** In situ carcinoma

Absent
Present
**Response to neoadjuvant therapy**
- Not applicable
- Less than 10% residual viable tumour
- Greater than 10% residual viable tumour
- Treatment history not known

**LYMPH NODES**

- Station(s) examined (specify)
- Involved
- Not involved
- Station(s) involved (specify)

**Ancillary test findings**

**Immunohistochemical markers**

- Positive Abs
- Negative Abs
- Equivocal Abs

**Conclusions:**

**EGFR result**

**Other molecular data**

<table>
<thead>
<tr>
<th>Test</th>
<th>Result</th>
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**Synthesis and overview**

**PATHOLOGICAL STAGING (AJCC 7TH EDITION)** (Refer page 6)

- Suffices
- Primary tumour (T)
- Regional lymph nodes (N)
- Distant metastasis (M)

**Year of publication and edition of cancer staging system**
**G5.01 Residual tumour status**
- RX: Presence of residual tumour cannot be assessed
- R0: No residual tumour
- R1: Microscopic residual tumour. Residual tumour at the bronchial margin may be:
  - R1: Invasive mucosal carcinoma or peribronchial infiltration
  - R1(is): Carcinoma in situ
  - R2: Macroscopic residual tumour.

**G5.02 Completeness of surgical resection**
- Complete
- Incomplete
- Uncertain

**G5.03 Diagnostic summary**
Include: Operative procedure; Specimen laterality; Tumour site; Tumour type; Tumour stage; Residual tumour status; Completeness of surgical resection

**S5.03 Overarching comment**

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**S5.01 Pathological Staging (AJCC 7th Ed.)**

**Suffixes (choose if applicable)**
- m - multiple primary tumours
- r - recurrent
- y - posttreatment

**Primary tumour (T)**
- TX: Primary tumour cannot be assessed, or tumour proven by the presence of malignant cells in sputum or bronchial washings but not visualised by imaging or bronchoscopy.
- T0: No evidence of primary tumour
- Tis: Carcinoma in situ
- T1: Tumour 3cm or less in greatest dimension, surrounded by lung or visceral pleura, without bronchoscopic evidence of invasion more proximal than the lobar bronchus (ie not in the main bronchus)
  - T1a: Tumour 2cm or less in greatest dimension
  - T1b: Tumour more than 2cm but 3cm or less in greatest dimension
- T2: Tumour more than 3cm but 7cm or less or tumour with any of the following features (T2 tumours with these features are classified T2a if 5cm or less):
  - Involves main bronchus 2cm or more distal to the carina
  - Invades visceral pleura (PL1 or PL2)
  - Associated with atelectasis or obstructive pneumonitis that extends to the hilar region but does not involve the entire lung
  - T2a: Tumour more than 3cm but 5cm or less in greatest dimension
  - T2b: Tumour more than 5cm but 7cm or less in greatest dimension
- T3: Tumour more than 7cm or one that directly invades any of the following:
  - Parietal pleural (PL3) chest wall (including superior sulcus tumours), diaphragm, phrenic nerve, mediastinal pleura, parietal pericardium
  - Or tumour in the main bronchus (less than 2cm distal to the carina*) but without involvement of the carina; or associated atelectasis or obstructive pneumonitis of the entire lung
  - Or separate tumour nodule(s) in a different ipsilateral lobe
  - T4: Tumour of any size that invades any of the following:
    - Mediastinum, heart, great vessels, trachea, recurrent laryngeal nerve, oesophagus, vertebral body, carina
    - Separate tumour nodule(s) in a different ipsilateral lobe
    - * The uncommon superficial spreading tumour of any size with its invasive component limited to the bronchial wall, which may extend proximally to the main bronchus, is also classified as T1a.

**Regional lymph nodes (N)**
- NX: Regional lymph nodes cannot be assessed
- N0: No regional node metastasis
- N1: Metastasis in ipsilateral peribronchial and/or ipsilateral hilar lymph nodes and intrapulmonary nodes, including involvement by direct extension
- N2: Metastasis in ipsilateral mediastinal and/or subcarinal lymph node(s)
- N3: Metastasis in contralateral mediastinal, contralateral hilar, ipsilateral or contralateral scalene, or supraclavicular lymph node(s)

**Distant metastasis (M)**
- M0: No distant metastasis
- M1: Distant metastasis
- M1a: Separate tumour nodule(s) in a contralateral lobe; tumour with pleural nodules or malignant pleural (or pericardial) effusion**
- M1b: Distant metastasis

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