

Mesothelioma in the Pleura and Peritoneum RESECTION SPECIMENS Reporting Proforma



Includes the  International Collaboration on Cancer Reporting dataset elements denoted by *

Family name

Sex

- Male
 Female

Given name(s)

Ethnicity

- Unknown
 Aboriginal/Torres Strait Islander
 Other ethnicity:

Date of birth

Date of request

Patient identifiers

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

Date of request

S1.03 Accession number

Requesting doctor - name and contact details

*CLINICAL HISTORY

Radiological appearance

History of previous cancer

Other (describe)

*NEOADJUVANT THERAPY

- Not administered
 Administered (describe)

OPERATIVE PROCEDURE

- Decortication
 Radical pleurectomy
 Extrapleural pneumonectomy
 Debulking
 Other (specify)

NEW PRIMARY CANCER OR RECURRENCE

New primary Regional (local) recurrence

Distant metastases

Details:

S1.04 PRINCIPAL CLINICIAN

G1.01 OTHER RELEVANT COMMENTS

Macroscopic findings

S2.02 SPECIMEN LABELLED AS

S2.03 *OPERATIVE PROCEDURE

- Not provided
 Decortication
 Radical pleurectomy
 Extrapleural pneumonectomy
 Debulking
 Other (specify)

G2.02 OTHER MACROSCOPIC DESCRIPTION

Microscopic findings

S3.01 *HISTOLOGICAL TUMOUR TYPE

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

G3.01 *MITOTIC COUNT

(Applicable to peritoneal specimens only)

/mm²

G3.02 *RESPONSE TO NEOADJUVANT THERAPY

- Not applicable
- Cannot be determined
- Greater than 50% residual tumour
- Less than 50% residual tumour
- No tumour found

S3.02 *EXTENT OF DIRECT INVASION

- Cannot be assessed
- No evidence of primary tumour
- 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)

S3.03 *MARGIN STATUS

(Applicable to extrapleural pneumonectomy specimens only)

- Not applicable
- Cannot be assessed
- Not involved
- Involved (specify margin(s) if possible)

S3.04 *LYMPH NODE STATUS

- No nodes submitted or found
- Cannot be assessed

*Lymph node station/location or specimen identification



- *Not involved
- *Involved

G3.03 Number of positive nodes

 /

(no. of positive nodes over the total no. of nodes per station)

- *Not involved
- *Involved

G3.03 Number of positive nodes

 /

(no. of positive nodes over the total no. of nodes per station)

- *Not involved
- *Involved

G3.03 Number of positive nodes

 /

(no. of positive nodes over the total no. of nodes per station)

- *Not involved
- *Involved

G3.03 Number of positive nodes

 /

(no. of positive nodes over the total no. of nodes per station)

G3.04 *COEXISTENT PATHOLOGY

- None identified, or ...

G3.05 ADDITIONAL MICROSCOPIC COMMENT

Empty text box for additional microscopic comment.

Ancillary test findings

G4.01 *ANCILLARY TESTS

- Not performed
- Performed



S4.01 *IMMUNOHISTOCHEMISTRY

(List stains)

Empty text box for immunohistochemistry stains.

G4.02 *OTHER ANCILLARY STUDIES

Empty text box for other ancillary studies.

Synthesis and overview

S5.01 *PATHOLOGICAL STAGING (TNM 7TH EDITION) (pleural specimens only Refer adjacent table)

*Suffices

*Primary tumour (T)

*Regional lymph nodes (N)

S5.02 YEAR OF PUBLICATION AND EDITION OF CANCER STAGING SYSTEM

Empty text box for year of publication and edition of cancer staging system.

G5.01 DIAGNOSTIC SUMMARY Include: Operative procedure; Tumour site; Tumour type.

Empty text box for diagnostic summary.

S5.03 OVERARCHING COMMENT

Empty text box for overarching comment.

G5.02 EDITION/VERSION NUMBER OF THE RCPA PROTOCOL ON WHICH THE REPORT IS BASED MESOTHELIOMA OF THE PLEURA AND PERTONEUM STRUCTURED REPORTING PROTOCOL (1st Edition 2016)

PATHOLOGICAL STAGING (TNM 7th edition)##

PLEURAL SPECIMENS

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 pluera 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 endothoracic 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)