Carcinomas of the Nasal Cavity & Paranasal Sinuses
Histopathology Reporting Proforma

Includes the International Collaboration on Cancer reporting dataset denoted by *

Clinical information

S1.02  Not provided  OR

* Neoadjuvant therapy
- Information not provided
- Not administered
- Administered, specify type (select all that apply)
  - Chemotherapy
  - Radiotherapy
  - Targeted therapy, specify if available

- Immunotherapy, specify if available

- Time interval since therapy, specify

* Operative procedure (select all that apply)
- Biopsy, specify
- Resection, specify
- Endoscopic nasal procedure, specify
- Partial maxillectomy
- Radical maxillectomy
- Orbito-maxillary resection
- Craniofacial resection
  - Open
  - Endoscopic
- Other, specify

* If a neck dissection is submitted, then a separate protocol is used to record the information.

* Specimen submitted (select all that apply)
- Nasal cavity
  - Septum
  - Lateral wall
  - Floor
  - Vestibule
- Paranasal sinus(es), maxillary
- Paranasal sinus(es), ethmoid
- Paranasal sinus(es), frontal
- Paranasal sinus(es), sphenoid
- Other, specify
Anatomical site of lesion

Laterality of the lesion
- Left
- Right

Clinical history

Clinical diagnosis or differential diagnosis

New primary lesion or recurrence
- New primary
- Recurrence - regional, describe
- Recurrence - distant, describe

G1.01 COPY TO DOCTORS

S1.04 PRINCIPAL CLINICIAN

G1.02 ADDITIONAL COMMENTS

Macroscopic findings

S2.01 SPECIMEN LABELLED AS

G2.01 SPECIMEN DIMENSIONS

Record for each specimen submitted

mm x mm

G2.02 MUCOSAL SURFACE ABNORMALITIES/LESION(S)
- Not identified
- Present, describe and measure

G2.03 TUMOUR SITE

**TUMOUR SITE** (select all that apply)

- Cannot be assessed
- Nasal cavity
  - Septum
    - Left
    - Midline
    - Laterality not specified
  - Floor
    - Left
    - Right
    - Laterality not specified
  - Lateral wall
    - Left
    - Right
    - Laterality not specified
  - Vestibule
    - Left
    - Right
    - Laterality not specified
- Paranasal sinus(es), maxillary
  - Left
  - Right
  - Laterality not specified
- Paranasal sinus(es), ethmoid
  - Left
  - Right
  - Laterality not specified
- Paranasal sinus(es), frontal
  - Left
  - Right
  - Laterality not specified
- Paranasal sinus(es), sphenoid
  - Left
  - Right
  - Laterality not specified
- Cribriform plate
  - Left
  - Right
  - Laterality not specified
- Other, specify including laterality

G2.03 TUMOUR FOCALITY

- Cannot be assessed
- Unifocal
- Multifocal, specify number of tumours in specimen

G2.04 MAXIMUM DIMENSION OF LARGEST TUMOUR

mm

G2.05 ADDITIONAL DIMENSIONS OF LARGEST TUMOUR

mm x mm

G2.06 TUMOUR DESCRIPTION

**TUMOUR DESCRIPTION** (select all that apply)

- Exophytic
- Polypoid
- Endophytic
- Nodular
- Ulcerated

S2.03 MACROSCOPIC DEPTH OF INVASION

mm
S2.04 SURGICAL MARGINS (specify margin)

AND distance to lesion mm

* Note that the margin and distance to lesion will need to be repeated for each surgical margin including the closest deep margin.

S2.05 BLOCK IDENTIFICATION KEY

G2.07 ADDITIONAL MACROSCOPIC COMMENTS

Microscopic findings

S3.01 *HISTOLOGICAL TUMOUR TYPE (select all that apply)
(Value list from the World Health Organization Classification of Head and Neck Tumours (2017))

- Keratinising squamous cell carcinoma
- Non-keratinising squamous cell carcinoma
- Spindle cell squamous carcinoma
- NUT carcinoma
- Other squamous cell carcinoma variant, specify
- Sinonasal undifferentiated carcinoma
- Lymphoepithelial carcinoma
- Neuroendocrine carcinoma
  - Small cell neuroendocrine carcinoma
  - Large cell neuroendocrine carcinoma
- Adenocarcinoma
  - Intestinal-type adenocarcinoma
  - Non-intestinal-type adenocarcinoma
- Salivary type carcinomas, specify
- Other carcinoma type, specify
- Cannot be assessed, specify

S3.02 *HISTOLOGICAL TUMOUR GRADE

- Not applicable
- GX: Cannot be assessed
- G1: Well differentiated
- G2: Moderately differentiated
- G3: Poorly differentiated
- G4: Undifferentiated
- Other, specify

S3.03 *BONE/CARTILAGE INVASION

- Not identified
- Present

- Erosive (cortical)
- Infiltrative (medullary involvement)

S3.05 TUMOUR SIZE (greatest surface dimensions or diameter)

length mm x width mm

S3.06 *PERINEURAL INVASION

- Not identified
- Present

- Cannot be assessed, specify

S3.07 *LYMPHOVASCULAR INVASION

- Not identified
- Present

- Cannot be assessed, specify
**S3.08** *MARGIN STATUS*

**Invasive carcinoma**
- **Involved**
  - Specify margin(s), if possible

- **Not involved**
  - Distance from invasive tumour to:
    - Deep margin: mm
    - Mucosal margin: mm
  - **Involved**
  - **Not involved**
  - Specify margin(s), if possible

**Carcinoma in situ/high-grade dysplasia**
- **Involved**
  - Specify margin(s), if possible

- **Not involved**
  - Distance from closest margin: mm
  - **Involved**
  - **Not involved**
  - Specify closest margin, if possible

- **Cannot be assessed, specify**

**High-grade dysplasia is synonymous with moderate/severe dysplasia.**

**G3.01** *COEXISTENT PATHOLOGY* (select all that apply)
- **None identified**
- Carcinoma in situ
- Sinonasal papilloma
- Intestinal metaplasia
- Squamous metaplasia
- Epithelial hyperplasia
- Epithelial dysplasia, specify

- **Other, specify**

**G2.02** RADIATION INDUCED TISSUE DAMAGE
- **Not identified**

- **Identified, specify** (describe induced damage, if possible)

- **Cannot be assessed, specify** (describe reason, if possible)

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**G3.03 ADDITIONAL MICROSCOPIC COMMENT**

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**Ancillary findings**

**G4.01** *ANCILLARY STUDIES*

- **Not performed**

- **Performed, specify**

  - Ancillary test performed
  - Immunohistochemistry (list as applicable positive/negative/equivocal antibodies)

  - In situ hybridisation (record performing lab, results, conclusions and person responsible for reporting)

  - Cytogenetics (record performing lab, results, conclusions and person responsible for reporting)

  - Interpretation

  - Clinical significance

  - Performing laboratory

  - Result

  - Conclusion

  - Person responsible for reporting
Synthesis and overview

**S5.01 PATHOLOGICAL STAGING (AJCC 8th Edition)**

**TNM Descriptors** (only if applicable) (select all that apply)
- m - multiple primary tumours
- r - recurrent
- y - post-therapy

**Primary tumour (pT)**

**Nasal cavity and Ethmoid Sinus**
- **TX** Primary tumour cannot be assessed
- **Tis** Carcinoma in situ
- **T1** Tumour restricted to any one subsite, with or without bony invasion
- **T2** Tumour invading two subsites in a single region or extending to involve an adjacent region within the nasoethmoidal complex, with or without bony invasion
- **T3** Tumour extends to invade the medial wall or floor of the orbit, maxillary sinus, palate, or cribriform plate
- **T4** Moderately advanced or very advanced local disease
  - **T4a** Moderately advanced local disease
    - Tumour invades any of the following: anterior orbital contents, skin of nose or cheek, minimal extension to anterior cranial fossa, pterygoid plates, sphenoid or frontal sinuses
  - **T4b** Very advanced local disease
    - Tumour invades any of the following: orbital apex, dura, brain, middle cranial fossa, cranial nerves other than (V2), nasopharynx, or clivus

**Maxillary Sinus**
- **TX** Primary tumour cannot be assessed
- **Tis** Carcinoma in situ
- **T1** Tumour limited to maxillary sinus mucosa with no erosion or destruction of bone
- **T2** Tumour causing bone erosion or destruction including extension into the hard palate and/or middle nasal meatus, except extension to posterior wall of maxillary sinus and pterygoid plates
- **T3** Tumour invades any of the following: bone of the posterior wall of maxillary sinus, subcutaneous tissues, floor or medial wall of orbit, pterygoid fossa, ethmoid sinuses
- **T4** Moderately advanced or very advanced local disease
  - **T4a** Moderately advanced local disease
    - Tumour invades anterior orbital contents, skin of cheek, pterygoid plates, infratemporal fossa, cribriform plate, sphenoid or frontal sinuses
  - **T4b** Very advanced local disease
    - Tumour invades any of the following: orbital apex, dura, brain, middle cranial fossa, cranial nerves other than maxillary division of trigeminal nerve(V2), nasopharynx, or clivus

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**S5.02 Year of publication and edition of cancer staging system**

**G5.01 DIAGNOSTIC SUMMARY**
Include: Specimen type/Operative procedure; Maximum tumour dimension; Histological tumour grade; Myometrial invasion and corresponding myometrial thickness; lymphovascular invasion; Involvement of cervix, adnexae, lymph nodes, omentum or other sites; Results of relevant ancillary studies (for example MMR IHC).

**S5.03 OVERARCHING COMMENT**

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