# A guide to Carcinomas of the Nasal Cavity and Paranasal Sinuses Histopathology Reporting

Includes the International Collaboration on Cancer reporting dataset denoted by *

## Clinical details

<table>
<thead>
<tr>
<th>Clinical info. on request form</th>
<th>Not provided OR Text OR Structured entry below:</th>
</tr>
</thead>
<tbody>
<tr>
<td>Neoadjuvant therapy</td>
<td>See p2</td>
</tr>
<tr>
<td>Operative procedure</td>
<td>See p2</td>
</tr>
<tr>
<td>Specimen submitted</td>
<td>See p2</td>
</tr>
<tr>
<td>Anatomical site of the lesion</td>
<td>Text</td>
</tr>
<tr>
<td>Laterality of the lesion</td>
<td>Left OR Right</td>
</tr>
<tr>
<td>Clinical history</td>
<td>Text</td>
</tr>
<tr>
<td>Clinical diagnosis or differential diagnosis</td>
<td>Text</td>
</tr>
</tbody>
</table>

## Macroscopic findings

<table>
<thead>
<tr>
<th>Specimen labelled as</th>
<th>Text</th>
</tr>
</thead>
<tbody>
<tr>
<td>Specimen dimensions</td>
<td>_ x _ mm Notes: Record measurements for each specimen submitted</td>
</tr>
<tr>
<td>Mucosal surface abnormalities/lesion(s)</td>
<td>Not identified, describe and measure</td>
</tr>
<tr>
<td>Tumour site</td>
<td>See p2</td>
</tr>
<tr>
<td>Tumour focality</td>
<td>See p2</td>
</tr>
<tr>
<td>Maximum dimension of largest tumour</td>
<td>Cannot be assessed OR _ mm</td>
</tr>
<tr>
<td>Additional dimensions of largest tumour</td>
<td>_ x _ mm</td>
</tr>
<tr>
<td>Tumour description</td>
<td>See p2</td>
</tr>
<tr>
<td>Macroscopic depth of invasion</td>
<td>_ mm</td>
</tr>
<tr>
<td>Surgical margins</td>
<td>Text AND _ mm Notes: Note that the margin and distance to lesion will need to be repeated for each surgical margin including the closest deep margin.</td>
</tr>
<tr>
<td>Block identification key</td>
<td>Text</td>
</tr>
<tr>
<td>Additional macroscopic comments</td>
<td>Text</td>
</tr>
</tbody>
</table>

## Microscopic findings

| Histological tumour type      | See p2                                         |
| Histological grade           | See p3                                         |
| Bone/cartilage invasion      | See p3                                         |
| Tumour size (greatest surface dimensions or diameter) | _ x _ mm Notes: length x width |
| Perineural invasion          | Cannot be assessed, specify Present, if possible |
| Lymphovascular invasion      | Cannot be assessed, specify Present, if possible |

## New primary lesion or recurrence

| New primary Recurrence - regional, describe |
| Recurrence - distant, describe |

## Margins

| Invasive carcinoma            | Not involved Involved |
| Carcinoma in situ/high grade dysplasia | If not involved by Carcinoma in situ/high grade dysplasia, record the distance of tumour from the closest margin. If involved, specify margin(s) if possible |
| Radiation induced tissue damage | Not identified OR Carcinoma in situ Sinonasal papilloma Intestinal metaplasia Squamous metaplasia Epithelial hyperplasia Epithelial dysplasia, specify Other, specify |

| Margin(s) involved            | Text |
| Margins involved              | Text |
| Distance from invasive tumour to deep margin | _ mm OR Distance not assessable |
| Distance from invasive tumour to mucosal margin | _ mm OR Distance not assessable |
| Distance from closest margin  | _ mm |
| Closest margin                | Text |
| Margin(s) involved            | Text |

## Coexistent pathology

| None identified OR Carcinoma in situ Sinonasal papilloma Intestinal metaplasia Squamous metaplasia Epithelial hyperplasia Epithelial dysplasia, specify Other, specify |
| Radiation induced tissue damage | Not identified OR Carcinoma in situ Sinonasal papilloma Intestinal metaplasia Squamous metaplasia Epithelial hyperplasia Epithelial dysplasia, specify Other, specify |

| Text |

## Additional microscopic comment

| Text |

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V1.0 Guide derived from Carcinomas of the Nasal cavity and Paranasal Sinuses Structured Reporting Protocol 1st Edition
**S1.02 Neoadjuvant therapy**

- Information not provided
- Not administered
- Administered, specify type (select all that are applicable)
  - Chemotherapy
  - Radiotherapy
  - Targeted therapy, specify if available
  - Immunotherapy, specify if available
  - Time interval since therapy, specify

**Operative procedure**

- Biopsy, specify
- Resection, specify
  - Endoscopic nasal procedure, specify
  - Partial maxillectomy
  - Radical maxillectomy
  - Orbito-maxillary resection
  - Open
  - Endoscopic
  - Other, specify
- Neck (lymph node) dissection*, specify
- Other, specify

**Specimen submitted**

Select all that apply:

- Nasal cavity
  - Lateral wall
  - Vestibule
  - Septum
  - Floor
- Paranasal sinus(es), maxillary
- Paranasal sinus(es), ethmoid
- Paranasal sinus(es), frontal
- Paranasal sinus(es), sphenoid
- Other, specify

---

**Ancillary test findings**

**G4.01 Ancillary studies**

- Not performed
- Performed, specify test, result, method

**Ancillary test performed**

- Immunohistochemistry
  - IHC
- In-situ hybridisation
  - ISH
- Cytogenetics
- + antibodies
- - antibodies
- Equiv antibodies

**Interpretation**

- Text

**Clinical significance**

- Text

**Performing laboratory**

- Text

**Result**

- Text

**Conclusion**

- Text

**Person responsible for reporting**

- Text

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**Synthesis and overview**

**S5.01 PATHOLOGICAL STAGING**

See p3

**S5.02 Year and Edition of staging system**

- Text

**G5.01 Diagnostic summary**

Include: Specimen(s) submitted; Tumour type; Tumour grade; Tumour stage

**S5.03 Overarching comment**

- Text

**S5.02 Edition/version of RCPA protocol**

- Text

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**S2.02 Tumour site**

Select all that apply:

- Cannot be assessed
- Nasal cavity
  - Septum
  - Left
  - Midline
  - Right
  - Laterality not specified
  - Floor
  - Left
  - Right
  - Laterality not specified
  - Lateral wall
  - 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), sphenoid
    - Left
    - Right
    - Laterality not specified
  - Cribriform plate
    - Left
    - Right
    - Laterality not specified
  - Other, specify including laterality

---

**S3.01 Histological tumour type**

Cannot be assessed, specify

**Or**

Select all that apply:

- 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
S3.02 Histological grade
- Not applicable
- GX: Cannot be assessed
- G1: Well differentiated
- G2: Moderately differentiated
- G3: Poorly differentiated
- G4: Undifferentiated
- Other, specify
- Cannot be assessed, specify

S3.03 Bone/cartilage invasion
- Cannot be assessed, specify
- Not identified
- Present
  - Erosive (cortical)
  - Infiltrative (medullary involvement)

S5.01 Pathological staging
(AJCC 8th Edition)##

TNM descriptors
m - multiple primary tumours; y - post therapy; r - recurrent

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 e 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

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