

COLON AND RECTUM NEUROENDOCRINE TUMORS

For poorly differentiated high-grade neuroendocrine carcinomas, use template for colorectal carcinomas

Procedure

- Partial colectomy. Specify segment(s) resected:
- Low anterior resection
- Total abdominal colectomy
- Abdominoperineal resection
- Transanal disk excision (local excision)
- Other:

Tumor Site: (select all that apply)

- Colon - cecum
- Right (ascending) colon
- Colon - hepatic flexure
- Transverse colon
- Colon - splenic flexure
- Left (descending) colon
- Sigmoid colon
- Rectum
- Ileocecal valve
- Not specified

Tumor Size (greatest dimension): ____ cm

Tumor Focality

- Single
- Multiple; Number of tumors:
- Cannot be determined

Histologic Type and Grade

- G1: Well-differentiated neuroendocrine tumor
- G2: Well-differentiated neuroendocrine tumor
- G3: Well-differentiated neuroendocrine tumor
- Well-differentiated neuroendocrine tumor, grade cannot be assessed
- Other:

Grade	Mitotic rate (/10 HPF)	Ki67 index (%)
G1	<2	<3
G2	2-20	3-20
G3	>20	>20

Mitotic Rate:

- <2 mitoses per 2 mm²
- 2-20 mitoses per 2 mm²
- >20 mitoses per 2 mm²
- Cannot be determined (explain): _____

*Note: 10 HPF is defined as a 2 mm² area. AJCC recommends counting 10mm² and dividing by 5. The area will vary based on your eyepiece field number. If your field number is "22" (written on your eyepiece), using a 40x objective, **42 HPF = 10mm²** & **8.4 HPF = 2mm²***

Ki-67 Labeling Index:

AJCC recommends counting 500 to 2000 cells in area of highest labeling

- <3% in area of highest labeling
- 3-20% in area of highest labeling
- >20% in area of highest labeling
- Cannot be determined (explain): _____

Tumor Extension

- Invades lamina propria
- Invades muscularis mucosae
- Invades submucosa
- Invades muscularis propria
- Invades subserosal tissue
- Penetrates visceral peritoneum (serosa)
- Directly invades adjacent structures

Margins:

- Negative (all margins including proximal and distal margins uninvolved by tumor)
- Negative (mucosal and deep margins uninvolved by tumor)
- Involved by neuroendocrine tumor. Specify margin(s):
- Cannot be assessed

Lymph-Vascular Invasion

- Present
- Not identified
- Cannot be determined

Distant Metastases? Yes Unknown

Regional Lymph Nodes:

- No lymph nodes submitted or found
- Uninvolved
- Metastasis present
- Number of Lymph Nodes Involved/total Examined: ___ / ___

Pathologic Stage Classification (AJCC 8th Edition)

Primary Tumor (pT)**T0:** No evidence of primary tumor**T1:** Tumor invades lamina propria or submucosa and is 2 cm or less**T1a:** Tumor <1 cm in greatest dimension**T1b:** Tumor size 1 to 2 cm in greatest dimension**T2:** Tumor invades muscularis propria or size is >2 cm with invasion of lamina propria or submucosa**T3:** Tumor invades through the muscularis propria into subserosal tissue without penetration of overlying serosa**T4:** Tumor invades visceral peritoneum (serosa) or other organs or other adjacent structures*Note: For **multiple tumors**:*

- Add (m) TX(#) [where # = number of primary tumors identified] or TX(m)
 - Example: pT3(2) or T3(m) for two primary tumors
- For multiple tumors with different T, use the highest.

Example: If there are two primary tumors, only one of which invades through the muscularis propria into the subserosal tissue without penetration of the overlying serosa, we define the primary tumor as either T3(2) or T3(m).

Regional Lymph Nodes (pN)**N0:** No regional lymph node metastasis**N1:** Regional lymph node metastasis**Distant Metastasis (pM)****M1:** Distant metastasis**M1a:** Metastasis confined to liver**M1b:** Metastasis in at least one extrahepatic site (eg, lung, ovary, nonregional lymph node, peritoneum, bone)**M1c:** Both hepatic and extrahepatic metastases