CERVICAL CARCINOMA

EXAMPLE OF A CERVICAL CARCINOMA USING PROPOSED TEMPLATE

- Case: Cervical squamous cell carcinoma
  - Radical hysterectomy, bilateral salpingo-oophorectomy, omentectomy
  - Lymph nodes removed (pelvic and para-aortic)
  - Tumor circumferentially involved cervix, depth of invasion 1.0 cm into a 3.3 cm-thick cervix; greatest dimension 2.9 cm
  - Focal extension to left parametrial soft tissue
  - Positive LVI
  - Metastatic to left pelvic lymph node (1 of 11); no extranodal extension
  - 18 additional negative lymph nodes
  - Negative cytology
  - Left parametrial soft tissue margin focally positive (< 0.1 cm linear extent)

CERVICAL CARCINOMA

1. Specimens: Cervix, upper vagina, uterus, bilateral fallopian tubes and ovaries, omentum, regional lymph nodes (bilateral pelvic and para-aortic)
2. Procedures: Radical hysterectomy, bilateral salpingo-oophorectomy, omentectomy, regional lymphadenectomy
3. Sentinel Lymph Node Sampling: Not performed
4. Regional Lymph Node Sampling: Performed (bilateral pelvic and para-aortic lymph nodes)
5. Specimen Integrity: Intact
6. Primary Tumor Site: Cervix, circumferential
7. Tumor Size:
   a. Greatest dimension: 2.9 cm
   b. Total dimensions: Cannot be determined
8. Histologic Type: Squamous cell carcinoma, non-keratinizing type
9. Histologic Grade: Moderately-differentiated (grade 2)
10. Stromal Invasion: Present, 1.0 cm, < 33% cervical stromal thickness
11. Lymph-Vascular Space Invasion: Present
12. Other Sites/Organs Involved: Left parametrial soft tissue
13. Sentinel Lymph Nodes: Not performed
14. Total Lymph Nodes: Positive; 1/29; extranodal extension negative
15. Cytology: Negative, CN-XX-XXXX
16. Surgical Margins:
   a. Left parametrial soft tissue margin positive for invasive carcinoma; focal; < 0.1 cm linear extent
   b. All other margins negative for invasive and in-situ carcinoma
17. Pathologic Staging: AJCC [pT2b  N1]; FIGO [IIB]
CERVICAL CARCINOMA (specific details to be added into SOFT)

1. Specimen(s): list all specimens removed during case

2. Procedure(s): select all that apply
   a. [Loop electrical excision procedure (LEEP)]
   b. [Large loop excision of the transformation zone (LLETZ)]
   c. [Cold knife cone excision]
   d. [Trachelectomy]
   e. [Total abdominal hysterectomy]
   f. [Radical hysterectomy]
   g. [Pelvic exenteration]
      a. [Bilateral salpingo-oophorectomy]
      b. [Bilateral oophorectomy]
      c. [Bilateral salpingectomy]
      d. [Right salpingo-oophorectomy]
      e. [Right oophorectomy]
      f. [Right salpingectomy]
      g. [Left salpingo-oophorectomy]
      h. [Left oophorectomy]
      i. [Left salpingectomy]
      j. [Omentectomy]
      k. [Peritoneal biopsies]
      l. [Peritoneal washings]
      h. [Other, <SPECIFY>]

3. Sentinel Lymph Node Sampling: select whether or not sentinel lymph nodes were removed
   a. [Performed]
   b. [Not performed]
   c. [Not applicable]
   d. [Cannot be determined]

4. Regional Lymph Node Sampling: select whether or not regional lymph nodes were removed
   a. [Performed]
   b. [Not performed]
   c. [Not applicable]
   d. [Cannot be determined]

5. Specimen Integrity: document whether intact or received fragmented. This absolutely requires correlating with the operative report.

6. Primary Tumor Site: select all that apply
   a. [Left superior quadrant (12 to 3 o’clock)]
b. [Left inferior quadrant (3 to 6 o’clock)]
c. [Right inferior quadrant (6 to 9 o’clock)]
d. [Right superior quadrant (9 to 12 o’clock)]
e. [Multicentric, <SPECIFY>]
f. [Circumferential]
g. [Other, <SPECIFY>]
h. [Cannot be determined]

7. **Tumor Size:** provide greatest dimension and total dimensions
   a. [Greatest dimension: <PROVIDE GREATEST DIMENSION>]
   b. [Total dimensions: <PROVIDE ADDITIONAL ]
   c. [Cannot be determined]

8. **Histologic Type:** select appropriate tumor type
   a. [Squamous cell carcinoma, keratinizing type]
   b. [Squamous cell carcinoma, non-keratinizing type]
   c. [Squamous cell carcinoma, basaloid type]
   d. [Squamous cell carcinoma, papillary type]
   e. [Squamous cell carcinoma, lymphoepithelioma-like]
   f. [Verrucous carcinoma]
   g. [Adenocarcinoma, endocervical/usual type (HPV-related)]
   h. [Adenocarcinoma, gastric type (not HPV-related; includes minimal deviation adenocarcinoma)]
   i. [Clear cell carcinoma]
   j. [Serous carcinoma]
   k. [Mesonephric carcinoma]
   l. [Adenosquamous carcinoma]
   m. [Adenoid basal cell carcinoma]
   n. [Adenoid cystic carcinoma]
   o. [Small cell carcinoma]
   p. [Neuroendocrine carcinoma, low-grade]
   q. [Neuroendocrine carcinoma, high-grade]
   r. [Undifferentiated carcinoma]
   s. [Carcinosarcoma (malignant mixed Mullerian tumor, MMMT)]
   t. [Carcinoma, not-otherwise-specified]
   u. [Other, <SPECIFY>]

9. **Histologic Grade:** specify histologic grade of tumor
   a. [Well-differentiated (grade 1)]
   b. [Moderately-differentiated (grade 2)]
   c. [Poorly-differentiated (grade 3)]
   d. [Undifferentiated (grade 4)]
   e. [Other, <SPECIFY>]
10. **Stromal Invasion:** specify presence of stromal invasion
   a. [Absent]
   b. [Present, <PROVIDE DEPTH OF INVASION>]
      i. [< 33% cervical stromal thickness]
      ii. [≥ 33% to < 66% cervical stromal thickness]
      iii. [≥ 66% cervical stromal thickness]

11. **Lymph-Vascular Space Invasion:** state whether LVI is present
   d. [Absent]
   e. [Present]
   f. [Suspicious]
   g. [Cannot be determined]

12. **Other Sites/Organs Involved:** state whether there is disease outside the cervix
   h. [Negative]
   i. [Positive: <LIST OTHER ORGANS INVOLVED> ; <PROVIDE SIZE OF LARGEST METASTATIC FOCUS>]

13. **Sentinel Lymph Nodes:** provide sentinel lymph node status
   a. [Not performed]
   b. [Negative: 0 / <PROVIDE TOTAL LYMPH NODES>] (specify site of sentinel lymph node)
   c. [Positive: <PROVIDE TOTAL NUMBER OF POSITIVE SENTINEL LYMPH NODES> / <PROVIDE TOTAL SENTINEL LYMPH NODES>] (specify site of sentinel lymph node)
   d. [Extranodal extension: <STATE IF EXTRANODAL EXTENSION IS PRESENT OR ABSENT>]

14. **Total Lymph Nodes:** provide total sentinel and non-sentinel lymph node status
   a. [Not performed]
   b. [Negative: 0 / <PROVIDE TOTAL SENTINEL AND NON-SENTINEL LYMPH NODES>]
   c. [Positive: <PROVIDE TOTAL NUMBER OF POSITIVE SENTINEL AND NON-SENTINEL LYMPH NODES> / <PROVIDE TOTAL NUMBER OF SENTINEL AND NON-SENTINEL LYMPH NODES> ; <PROVIDE SIZE OF LARGEST LYMPH NODE METASTASIS AND IF THERE IS EXTRANODAL EXTENSION> (can specify location of positive lymph nodes)]

15. **Cytology:** state whether or not cytology was performed and results, include accession number
   j. [Not performed]
   k. [Performed]:
      i. [Positive, <PROVIDE ACCESSION NUMBER IF AVAILABLE>]

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ii. [Negative, <PROVIDE ACCESSION NUMBER IF AVAILABLE>]

16. **Surgical Margins**: select all that apply

a. Endocervical margin:
   i. [Endocervical margin: Negative for invasive and in-situ carcinoma]
   ii. [Endocervical margin: Positive for invasive carcinoma; [Focal] OR [Diffuse, <PROVIDE APPROXIMATE LINEAR EXTENT>]]
   iii. [Endocervical margin: Positive for in-situ carcinoma only; [Focal] OR [Diffuse, <PROVIDE APPROXIMATE LINEAR EXTENT>]]

b. Ectocervical margin:
   i. [Ectocervical margin: Negative for invasive and in-situ carcinoma]
   ii. [Ectocervical margin: Positive for invasive carcinoma; [Focal] OR [Diffuse, <PROVIDE APPROXIMATE LINEAR EXTENT>]]
   iii. [Ectocervical margin: Positive for in-situ carcinoma only; [Focal] OR [Diffuse, <PROVIDE APPROXIMATE LINEAR EXTENT>]]

c. Deep margin:
   i. [Deep margin: Negative for invasive and in-situ carcinoma]
   ii. [Deep margin: Positive for invasive carcinoma; [Focal] OR [Diffuse, <PROVIDE APPROXIMATE LINEAR EXTENT>]]
   iii. [Deep margin: Positive for in-situ carcinoma only; [Focal] OR [Diffuse, <PROVIDE APPROXIMATE LINEAR EXTENT>]]

d. Other margins: (including parametrial soft tissue margins)
   i. [Negative for invasive and in-situ carcinoma]
   ii. [Positive for invasive carcinoma; [Focal] OR [Diffuse, <PROVIDE APPROXIMATE LINEAR EXTENT>]]
   iii. [Positive for in-situ carcinoma only; [Focal] OR [Diffuse, <PROVIDE APPROXIMATE LINEAR EXTENT>]]

17. **Pathologic Staging**: may use AJCC and/or FIGO; refer to staging manuals