CARCINOMA OF THE VULVA

- 1. **Specimen(s):** *list all specimens removed during case*
- 2. **Procedure(s):** *select all that apply*
 - a. [Incisional biopsy]
 - b. [Excisional biopsy]
 - c. [Wide-local excisional biopsy]
 - d. [Radical vulvectomy]
 - e. [Total vulvectomy]
 - f. [Partial vulvectomy]
 - g. [Vulvectomy] (can further specify, e.g. "anterior vaginectomy")
- 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, non-sentinel 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
- 6. **Primary Tumor Site:** *specify location of tumor primary*
 - a. [<SPECIFY PRIMARY TUMOR LOCATION>]
- 7. **Tumor Size:** provide greatest dimension and total dimensions
 - a. [Greatest dimension: <SPECIFY>]
 - b. [Total dimensions: <SPECIFY>]
 - c. [Cannot be determined]
- 8. **Tumor Focality:** *specify tumor focality*
 - a. [Unifocal]
 - b. [Multifocal]
 - c. [Cannot be determined]
- 9. **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. [Verrucous carcinoma]

- f. [Paget disease, <SPECIFY INVASIVE OR NON-INVASIVE>]
- g. [Adenocarcinoma, mammary type]
- h. [Adenocarcinoma, sweat gland type]
- i. [Adenocarcinoma, intestinal type]
- j. [Mesonephric carcinoma]
- k. [Clear cell carcinoma]
- I. [Mucinous carcinoma]
- m. [Endometrioid carcinoma]
- n. [Adenosquamous carcinoma]
- o. [Undifferentiated carcinoma]
- p. [Merkel cell carcinoma]
- q. [Neuroendocrine carcinoma, <SPECIFY LOW OR HIGH-GRADE>]
- r. [Small cell carcinoma]
- s. [Carcinoma, not-otherwise-specified]
- t. [Other, <SPECIFY>]
- 10. **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>]
 - f. [Not applicable]
- 11. **Stromal Invasion:** *specify presence of stromal invasion*
 - a. [Not identified]
 - b. [Present, <PROVIDE DEPTH OF INVASION>]
- 12. Lymph-Vascular Space Invasion: state whether LVI is present
 - a. [Not identified]
 - b. [Present]
 - c. [Suspicious]
 - d. [Cannot be determined]
- 13. **Perineural Invasion:** *state whether PNI is present*
 - a. [Not identified]
 - b. [Present]
 - c. [Suspicious]
 - d. [Cannot be determined]
- 14. Other Sites/Organs Involved: state whether there is disease outside the vulva
 - a. [Negative]

b. [Positive: <LIST OTHER ORGANS INVOLVED> ; <PROVIDE SIZE OF LARGEST METASTATIC FOCUS>]

- 15. Additional Pathologic Findings: if possible, select all that apply
 - a. [None identified]
 - b. [Low-grade squamous intraepithelial lesion (LSIL)]
 - c. [High-grade squamous intraepithelial lesion (HSIL)]
 - d. [Differentiated vulvar intraepithelial neoplasia (D-VIN)]
 - e. [Lichen sclerosus]
 - f. [Lichen simplex chronicus]
 - g. [Adenosis]
 - h. [Adenocarcinoma in-situ]
 - i. [Other, <SPECIFY>]
- 16. Regional Lymph Node Status: provide total sentinel and non-sentinel lymph node status
 - a. It is important to indicate how big the metastasis is because this affects staging.
 - b. Sentinel Lymph Nodes:
 - i. [Not performed]
 - ii. If all lymph nodes are negative: [Negative: 0 / <PROVIDE TOTAL # OF SENTINEL LYMPH NODES>]
 - iii. If there are lymph nodes with carcinoma:
 - 1. [Number of lymph nodes with metastasis greater than or equal to 0.5 cm]
 - 2. [Number of lymph nodes with metastasis less than 0.5 cm but greater than 0.02 cm]
 - 3. [Number of lymph nodes with isolated tumor cells (ITCs; single cells or small clusters of cells not more than 0.02 cm in greatest dimension)]
 - 4. [State presence/absence of extranodal extension]
 - 5. [Give total number of sentinel lymph nodes]
 - c. Total Lymph Nodes:
 - i. [Not performed]
 - ii. If all lymph nodes are negative: [Negative: 0 / <PROVIDE TOTAL LYMPH NODES>]
 - iii. If there are lymph nodes with carcinoma:
 - 1. [Total number of lymph nodes with metastasis greater than or equal to 0.5 cm]
 - 2. [Total number of lymph nodes with metastasis less than 0.5 cm but greater than 0.02 cm]
 - 3. [Total number of lymph nodes with isolated tumor cells (ITCs; single cells or small clusters of cells not more than 0.02 cm in greatest dimension)]
 - 4. [Indicate the anatomic site of the positive lymph node(s)]

- 5. [State presence/absence of extranodal extension]
- 6. [Give grand total number of lymph nodes]
- 17. Cytology: state whether or not cytology was performed and results, include accession number
 - a. [Not performed]
 - b. [Performed]:
 - i. [Positive, <PROVIDE ACCESSION NUMBER IF AVAILABLE>]
 - ii. [Negative, <PROVIDE ACCESSION NUMBER IF AVAILABLE>]
- 18. **Surgical Margins:** *select all that apply*
 - a. [Negative for carcinoma] (use if there is no significant background SIL or D-VIN)
 - b. [Negative for invasive and in-situ carcinoma] (use if there is significant background SIL or D-VIN)
 - c. [Positive for invasive carcinoma; <STATE SPECIFIC MARGIN>, <STATE FOCAL OR DIFFUSE>, <PROVIDE APPROXIMATE LINEAR EXTENT>]
 - d. [Positive for in-situ carcinoma only; <STATE SPECIFIC MARGIN>, <STATE FOCAL OR DIFFUSE>, <PROVIDE APPROXIMATE LINEAR EXTENT>]
 - e. [Cannot be determined]
- 19. Pathologic Staging: use AJCC and FIGO; refer to staging manuals
- *Depth of invasion of squamous cell carcinoma is the measurement in millimeters (or centimeters) from the epithelial-stromal junction of the adjacent most superficial dermal papilla to the deepest point of invasion. Invasion in glandular tumors is not as well defined, therefore use your best estimate.
- *Tumor thickness of squamous cell carcinoma is the measurement in millimeters (or centimeters) from the surface of the tumor to the deepest point of invasion.
- *Caution is recommended when using terms such as "microinvasive" or "early stromal invasion" as the former has a specific requirement while the latter is not well-defined, varies from observer to observer, and is often used when invasion is suspected but not definitive morphologically
- *Non-epithelial vulvar malignancies include mesenchymal (sarcoma botryoides, leiomyosarcoma, aggressive angiomyxoma, dermatofibrosarcoma protuberans), melanocytic, and germ cell tumors. Grading and staging of these tumors is not included in the TNM system for the vulva and instead may use different grading and staging schema.