

This diagram should be used to determine tumor focality and for the Gleason grade:

- 1) Make a systematic assessment of the tumor nodules in the prostate (single dominant nodule with other small non-dominant nodule/ separate co-dominant tumor nodules). Use the diagram below to map out the tumor of the entire prostate
- 2) The slices are usually submitted from base to apex
- 3) Determine the total number of slices and the details of slices (how many, which slices etc) submitted for research. In diagram, while filling tumor details, leave those slices blank.
- 4) Attempt to determine the Gleason score of each separate tumor nodule. Most often, the dominant nodule (i.e. largest tumor nodule) is also the tumor nodule associated with the highest Gleason grade, which is then to be reported as final Gleason grade (in template and diagnosis). Other patterns can be reported as a “comment” for the correlation of needle biopsy purpose, if necessary.
- 5) In those unusual situations, where a non-dominant nodule (i.e. smaller nodule) is of higher Gleason grade than the dominant nodule, the guidelines are not clear. We currently use the higher grade of non-dominant nodule as the primary Gleason pattern and lower grade of the dominant nodule(s) as secondary pattern [e.g. non-dominant (smaller) nodule with 4+4=8 with dominant nodule of 3+4, is to be reported as 4+3=7 in template and diagnosis, with a “comment” that there is small non-dominant nodule (size of nodule), with 4+4=8].

