## Cellular pathology audit template

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| Date of completion | (To be inserted when completed) |
| Name of lead author/ participants | (To be inserted) |
| Specialty | Histopathology/genitourinary |
| Title | **Audit of prostate cancer reporting** |
| Background | Datasets published by the Royal College of Pathologists define the core data items that should be included in histopathology reports to ensure all necessary data is provided.  In 2024, the College’s *Dataset for histopathology reports for prostatic carcinoma* was published, which lists and discusses the data items to be included when reporting prostatic biopsy specimens.1 |
| Aim & objectives | This audit template is a tool to determine whether pathological core data items are included in histopathology reports in prostatic biopsy specimens. |
| Standards & criteria | **Criteria range:** 100%, or if not achieved, there is documentation in the text of the report that explains the variance.  **The agreed standards:** Each core data item stated in the dataset for inclusion in histology reports of prostatic biopsy specimens should be included in the histology reports. |
| Method | **Sample selection:** (To be completed by the author)  All cases of prostatic cancer within the time period from …. to …  Data to be collected from proformas and textual histology reports for resected specimens.  Data from either or all: prostate core biopsies/transurethral resections (TURP)/radical prostatectomies.  **Data to be collected on proforma (see below).** |
| Results | (To be completed by the author)  The results of this audit show the following compliance with the standards.  **Prostatic core biopsies**   |  |  | | --- | --- | | **Core data items** | % compliance | | **Clinical information** |  | | Prostate specific antigen (PSA) |  | | MRI findings |  | | Number of cores taken |  | | **Macroscopic description** |  | | Number of cores |  | | Location |  | | **Microscopic** |  | | Histological type |  | | Number of cores involved – right/left/target |  | | Longest length of tumour in any 1 core |  | | Invasive cribriform or intraductal carcinoma (IDC) |  | | Perineural invasion |  | | Extraprostatic extension |  | | Gleason sum score |  | | Grade group |  | | Percentage pattern 4 |  | | Representative block for molecular studies with % tumour content |  | | SNOMED |  |   **TURP**   |  |  | | --- | --- | | **Core data items** | % compliance | | **Clinical information** |  | | PSA |  | | Type of specimen |  | | **Macroscopic description** |  | | Specimen weight |  | | **Microscopic** |  | | Histological type |  | | Gleason score |  | | Grade group |  | | Percentage pattern 4 |  | | Invasive cribriform or IDC |  | | Prostatic tissue involved by tumour |  | | Representative block for molecular studies with % tumour content |  | | TNM stage |  | | SNOMED |  |   **Radical prostatectomies**   |  |  | | --- | --- | | **Core data items** | % compliance | | **Clinical information** |  | | PSA |  | | Type of specimen |  | | **Macroscopic description** |  | | Specimen weight |  | | Lymph nodes |  | | **Microscopic** |  | | Histological type |  | | Gleason score |  | | Grade group |  | | Extraprostatic extension (EPE) status with extent |  | | Bladder neck status |  | | Seminal vesicle invasion |  | | Margin status – with location and extent |  | | Vascular invasion |  | | Invasive cribriform or IDC |  | | Representative block for molecular studies with % tumour content |  | | TNM stage |  | | If lymph nodes – number positive and diameter of largest deposit |  | | SNOMED |  |   **Commentary:** |
| Conclusion | (To be completed by the author) |
| Recommend- ations for improvement | Present the result with recommendations, actions and responsibilities for action and a timescale for implementation. Assign a person(s) responsible to do the work within a timeframe.  **Some suggestions:**  highlight areas of practice that are different  present findings. |
| Action plan | (To be completed by the author – see attached action plan proforma) |
| Re-audit date | (To be completed by the author) |
| Reference | 1. Royal College of Pathologists. *Dataset for histopathology reports for prostatic carcinoma.* Accessed November 2024. Available at: <https://www.rcpath.org/profession/guidelines/cancer-datasets-and-tissue-pathways.html> |

## Data collection proforma for prostate cancer reporting

## Audit reviewing practice

Patient name:

Hospital number:

Date of birth:

Consultant:

Case number:

**For prostate cores:**

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| **Standards** | **1**  **Yes** | **2**  **No** | **3** If no, was there documentation to explain the variance?  **Yes/No** plus free-text comment | **4** Compliant with guideline based on **Yes** from column 1 or an appropriate explanation from column 3. **Yes/No** |
| **Clinical information** |  |  |  |  |
| PSA |  |  |  |  |
| MRI findings |  |  |  |  |
| Number of cores taken |  |  |  |  |
| **Macroscopic description** |  |  |  |  |
| Number of cores |  |  |  |  |
| Location |  |  |  |  |
| **Microscopic** |  |  |  |  |
| Histological type |  |  |  |  |
| Number of cores involved – right/left/target |  |  |  |  |
| Longest length of tumour in any 1 core |  |  |  |  |
| Invasive cribriform or IDC |  |  |  |  |
| Perineural invasion |  |  |  |  |
| Extraprostatic extension |  |  |  |  |
| Gleason sum score |  |  |  |  |
| Grade group |  |  |  |  |
| Percentage pattern 4 |  |  |  |  |
| Representative block for molecular studies with % tumour content |  |  |  |  |
| SNOMED |  |  |  |  |

**For TURPs**

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| **Standards** | **1**  **Yes** | **2**  **No** | **3** If no, was there documentation to explain the variance?  **Yes/No** plus free-text comment | **4** Compliant with guideline based on **Yes** from column 1 or an appropriate explanation from column 3. **Yes/No** |
| **Clinical information** |  |  |  |  |
| PSA |  |  |  |  |
| Type of specimen |  |  |  |  |
| **Macroscopic description** |  |  |  |  |
| Specimen weight |  |  |  |  |
| **Microscopic** |  |  |  |  |
| Histological type |  |  |  |  |
| Gleason score |  |  |  |  |
| Grade group |  |  |  |  |
| Percentage pattern 4 |  |  |  |  |
| Invasive cribriform or IDC |  |  |  |  |
| Prostatic tissue involved by tumour |  |  |  |  |
| Representative block for molecular studies with % tumour content |  |  |  |  |
| TNM stage |  |  |  |  |
| SNOMED |  |  |  |  |

**For radical prostatectomies**

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| **Standards** | **1**  **Yes** | **2**  **No** | **3** If no, was there documentation to explain the variance?  **Yes/No** plus free-text comment | **4** Compliant with guideline based on **Yes** from column 1 or an appropriate explanation from column 3. **Yes/No** |
| **Clinical information** |  |  |  |  |
| PSA |  |  |  |  |
| Type of specimen |  |  |  |  |
| **Macroscopic description** |  |  |  |  |
| Specimen weight |  |  |  |  |
| Lymph nodes |  |  |  |  |
| **Microscopic** |  |  |  |  |
| Histological type |  |  |  |  |
| Gleason score |  |  |  |  |
| Grade group |  |  |  |  |
| EPE Status with extent |  |  |  |  |
| Bladder neck status |  |  |  |  |
| Seminal vesicle invasion |  |  |  |  |
| Margin status – with location and extent |  |  |  |  |
| Vascular invasion |  |  |  |  |
| Invasive cribriform or IDC |  |  |  |  |
| Representative block for molecular studies with % tumour content |  |  |  |  |
| TNM stage |  |  |  |  |
| If lymph nodes – number positive and diameter of largest deposit |  |  |  |  |
| SNOMED |  |  |  |  |

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| **Audit action plan**  An audit of prostate cancer reporting | | | | | | |
| Audit recommendation | Objective | Action | Timescale | Barriers and constraints | Outcome | Monitoring |
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