# Appendix D Reporting proforma for mesothelioma resection specimens

|  |  |  |
| --- | --- | --- |
| Surname……………… | Forenames………………… | Date of birth………….Sex…....  |
| Hospital………….…… | Hospital no…………….……  | NHS/CHI no……………..  |
| Date of receipt………… | Date of reporting……..……  | Report no………………...  |
| Pathologist……….… | Surgeon………………….… |   |

Previous treatment (neoadjuvant chemotherapy/radiotherapy)

Yes □ No □

Laterality

Right □ Left □ Not stated □

## Specimen type

Decortication □ Radical pleurectomy □ Local chest wall/pleural resection □

Extrapleuropneumonectomy □ Debulking □

## Submitted material

Parietal pleura Yes □ No □ Visceral pleura Yes □ No □

Diaphragm Yes □ No □ Endothoracic fascia Yes □ No □

Lung Yes □ No □, details….............................................................

Mediastinal fat Yes □ No □ Chest wall Yes □ No □

Pericardium Yes □ No □ Rib Yes □ No □

Peritoneum Yes □ No □, details….............................................................

Contralateral pleura Yes □ No □ Spine Yes □ No □

## Histological type of mesothelioma

Mesothelioma in situ □ Localised mesothelioma □ Diffuse mesothelioma □

## Histological subtype

Epithelioid □ Biphasic □ Sarcomatoid □

If epi**thelioid**, grade □ Low □ High

## Histological variants

### Architectural patterns

Tubulopapillary Yes □ No □ ……%

Trabecular Yes □ No □ …….%

Adenomatoid Yes □ No □ …….%

Solid Yes □ No □ …….%

Micropapillary Yes □ No □ …….%

### Cytological features

Rhabdoid Yes □ No □

Deciduoid Yes □ No □

Small cell Yes □ No □

Clear cell Yes □ No □

Signet ring Yes □ No □

Lymphohistiocytoid Yes □ No □

Pleomorphic Yes □ No □

Transitional Yes □ No □

### Stromal features

Desmoplastic Yes □ No □

Myxoid Yes □ No □

Heterologous differentiation Yes □ No □

Tumour size (if localised)

…….mm

Ancillary investigations

Not used □

D-PAS mucin staining Positive □ Negative □

Alcian Blue mucin staining Positive □ Negative □

Immunohistochemistry (list antibodies used – minimum of 4 recommended)

Calretinin Positive □ Negative □

Cytokeratin 5/6 Positive □ Negative □

WT-1 Positive □ Negative □

BerEP4 Positive □ Negative □

CEA Positive □ Negative □

(Other: ….................... Positive □ Negative □)

## Extent of invasion

□ No evidence of primary tumour

□ Cannot be assessed

□ Parietal involvement without involvement of the

□ Ipsilateral visceral pleura

□ Mediastinal pleura

□ Diaphragmatic pleura

□ Parietal involvement with involvement of the

□ Ipsilateral visceral pleura

□ Mediastinal pleura

□ Diaphragmatic pleura

□ Diaphragmatic muscle

□ Lung parenchyma

□ Endothoracic fascia

□ Mediastinal fat

□ Localised focus of tumour invading the soft tissue of the chest wall

□ Into but not through the pericardium

□ Through the pericardium

□ Diffuse or multiple foci invading soft tissue of chest wall

□ Ribs

□ Peritoneum through the diaphragm

□ Great vessels/oesophagus/trachea or other mediastinal organ

□ Spine

□ Myocardium

□ Extension into contralateral pleura

□ Other, specify …………….

## Lymph node involvement

No nodes submitted □

Cannot be assessed □

Lymph node stations/location

……………………………. □ Involved □ Not involved

……………………………. □ Involved □ Not involved

……………………………. □ Involved □ Not involved

……………………………. □ Involved □ Not involved

……………………………. □ Involved □ Not involved

If neoadjuvant therapy, % of viable tumour on cross-section…........

## Margins

Excision complete (R0)□ Microscopic involvement (R1)□ Macroscopic involvement (R2)□

Sites of involvement if R1 or R2: …………………………

Closest margin if excision complete: …........... distance ….........mm

Site(s) of incomplete resection: …........... …............... …...............

## Metastases

Unknown □ Absent (M0) □ Present (M1) □ Details: …………………………

## Background lung (if sampled)

Asbestos bodies  Yes □ No □ N/A □

Asbestosis Yes □ No □ N/A □

Response to neoadjuvant therapy

N/A □ Complete/Near complete □ Partial □ None/Minimal □

## Ancillary studies (core for mesothelioma in situ only)

Performed Yes  No 

 *BAP1* (specify test(s) and result(s)) …………………………….

Performed Yes  No 

*CDKN2A* (specify test(s) and result(s)) …………………………….

Performed Yes  No 

*MTAP* (specify test(s) and result(s)) …………………………….

## Summary of pathological staging (UICC TNM 8th edition):

□ m – multiple primary tumours at a single site

□ r – recurrent tumours after a disease free period

□ y – classification is performed during or following multimodality treatment

### Primary tumour

□ Tx Primary tumour cannot be assessed

□ T0 No evidence of primary tumour

□ T1 Tumour involves ipsilateral pleura, with or without involvement of visceral, mediastinal or diaphragmatic pleura

□ T2 Tumour involves ipsilateral (parietal or visceral) pleura, with at least one of the following:

* Invasion of diaphragmatic muscle
* Invasion of lung parenchyma

□ T3 Tumour involves ipsilateral (parietal or visceral) pleura, with at least one of the following:

* Invasion of endothoracic fascia
* Invasion of mediastinal fat
* Solitary focus of tumour invading the soft tissues of the chest wall
* Non-transmural involvement of the pericardium

□ T4 Tumour involves ipsilateral pleura (parietal or visceral pleura), with at least one of the following:

* Chest wall, with or without associated rib destruction (diffuse or multifocal)
* Peritoneum (via direct transdiaphragmatic spread)
* Contralateral pleura
* Mediastinal organs (oesophagus, trachea, heart, great vessels)
* Vertebra, neuroforamen(s), spinal cord
* Internal surface of the pericardium (transmural invasion with or without a pericardial effusion)

## Regional lymph nodes (pN)

□ NX Regional lymph nodes cannot be assessed

□ N0 No regional lymph node metastasis

□ N1 Metastasis to ipsilateral intrathoracic lymph nodes (includes ipsilateral bronchopulmonary, hilar, subcarinal, paratracheal, aortopulmonary, paraoesophageal, peridiaphragmatic, pericardial pad, intercostal and internal mammary nodes)

□ N2 Metastases to contralateral intrathoracic lymph nodes. Metastases to ipsilateral or contralateral supraclavicular lymph nodes

## SNOMED codes:

## Comments:

**Signature .............……………………………………………….**

**Date ……..../….….../……....**