## 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 | Cellular pathology/breast |
| Title | **An audit of breast cancer grading** |
| Background | Accurate grading of breast cancer is important for patient management and prognosis. It is recommended that this is undertaken for all types of breast carcinoma. Recording grade is a core data item in the pathology report. This audit reviews compliance with completeness of data collection and distribution of reported breast cancer grades.  Strict adherence to grading methodology improves the accuracy and reproducibility of breast cancer grading. The Royal College of Pathologists' guidelines should be carefully followed to ensure consistency and quality in reporting.1 |
| Aim & objectives | This audit template is a tool to review:   * completeness of the recording of breast cancer grade in resection specimens. * the distribution of breast cancer grades in resected cases  (all cases and if appropriate symptomatic and screen detected subgroups). * the distribution of breast cancer grades reported for individual pathologists (all cases and symptomatic and screen detected subgroups if appropriate). |
| Standards & criteria | **Criteria range:** 100% or, if not achieved, there is documentation in the case notes that explains the variance.  The department should have a written protocol stating the methodology used to grade breast cancers.  Published reports have shown the distribution of breast cancer grades for symptomatic and screen-detected breast cancers in the UK.1,2 (These can be used to assess a departments or individual performance).  Pathology reports should include data items listed on recommended proforma.1 |
| Method | For the period of study, data is obtained from the pathology computer (or other source) for all breast cancer resections reported.  Each case is identified as either symptomatic or screening.  The grade (either Grade 1, 2, 3 or not assessable) allocated with the reporting pathologist is recorded.  The data is collated and summarised. |
| Results | (To be completed by the author)  The results of this audit show the following compliance with the standards.   |  |  | | --- | --- | | Department protocol detailing methodology for grading breast cancer | Yes/No | |  | % compliance | | Grade recorded for each case |  | | Distribution of grades for all breast cancers  Grade 1  Grade 2  Grade 3  Not assessable |  | | Distribution of grades for symptomatic breast cancers  Grade 1  Grade 2  Grade 3  Not assessable |  | | Distribution of grades for screen detected cancers  Grade 1  Grade 2  Grade 3  Not assessable |  | | Distribution of grades all cancers – individual pathologists  Grade 1  Grade 2  Grade 3  Not assessable | Pathologist  A B C D | | Distribution of grades for symptomatic cancers – individual pathologists  Grade 1  Grade 2  Grade 3  Not assessable | Pathologist  A B C D | | Distribution of grades for screen detected cancers – individual pathologists  Grade 1  Grade 2  Grade 3  Not assessable | Pathologist  A B C D |   **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:**  if the audit shows variation from the expected grade distribution, a review of grading protocol (including variation in TPM scoring) and specimen fixation should be undertaken. Identify any areas of practice that are different and may affect grade and address |
| Action plan | (To be completed by the author – see attached action plan proforma) |
| Re-audit date | (To be completed by the author) |
| References | 1. Royal College of Pathologists. *Dataset for histopathological reporting of breast disease in surgical excision specimens of breast cancer.* Available at: [https://www.rcpath.org/profession/guidelines/cancer-datasets-and-tissue-pathways.html](https://gbr01.safelinks.protection.outlook.com/?url=https%3A%2F%2Fwww.rcpath.org%2Fprofession%2Fguidelines%2Fcancer-datasets-and-tissue-pathways.html&data=05%7C02%7Crahul.deb%40nhs.net%7C7d24c54243d749d7183908dd0f95ad52%7C37c354b285b047f5b22207b48d774ee3%7C0%7C0%7C638683857713602930%7CUnknown%7CTWFpbGZsb3d8eyJFbXB0eU1hcGkiOnRydWUsIlYiOiIwLjAuMDAwMCIsIlAiOiJXaW4zMiIsIkFOIjoiTWFpbCIsIldUIjoyfQ%3D%3D%7C0%7C%7C%7C&sdata=oDT9yPratF%2BC1qwwEdzTfvWP1sp5Zwa3rpnmcCXf%2FS8%3D&reserved=0) 2. UK Government. *National breast screening pathology audit*. Available at: <https://www.gov.uk/government/publications/national-breast-screening-pathology-audit> |

## Data collection proforma for breast cancer grading

## Audit reviewing practice

Patient name:

Hospital number:

Date of birth:

Consultant:

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