Colon and Rectum

Protocol applies to all invasive carcinomas of the colon and rectum. Carcinoid tumors, lymphomas, sarcomas, and tumors of the vermiform appendix are excluded.

Protocol revision date: January 2005
Based on AJCC/UICC TNM, 6th edition

Procedures
• Incisional Biopsy (No Accompanying Checklist)
• Excisional Biopsy (Polypectomy)
• Local Excision (Transanal Disk Excision)
• Segmental Resection
• Rectal Resection (Low Anterior Resection, Abdominoperineal Resection)

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The College of American Pathologists offers these protocols to assist pathologists in providing clinically useful and relevant information when reporting results of surgical specimen examinations of surgical specimens. The College regards the reporting elements in the “Surgical Pathology Cancer Case Summary (Checklist)” portion of the protocols as essential elements of the pathology report. However, the manner in which these elements are reported is at the discretion of each specific pathologist, taking into account clinician preferences, institutional policies, and individual practice.

The College developed these protocols as an educational tool to assist pathologists in the useful reporting of relevant information. It did not issue the protocols for use in litigation, reimbursement, or other contexts. Nevertheless, the College recognizes that the protocols might be used by hospitals, attorneys, payers, and others. Indeed, effective January 1, 2004, the Commission on Cancer of the American College of Surgeons mandated the use of the checklist elements of the protocols as part of its Cancer Program Standards for Approved Cancer Programs. Therefore, it becomes even more important for pathologists to familiarize themselves with the document. At the same time, the College cautions that use of the protocols other than for their intended educational purpose may involve additional considerations that are beyond the scope of this document.
Summary of Changes to Checklist(s)

Protocol revision date: January 2005

The following changes have been made to the data elements of the checklist(s) since the January 2004 protocol revision.

Polypectomy Checklist

Macroscopic

Distance of Invasive Carcinoma from Anal Verge and Distance of Adenoma from Anal Verge: these optional reporting elements have been added, as shown below

*Distance of Invasive Carcinoma from Anal Verge (per clinical report)
  *Specify: ___ cm
  *___ Distance from anal verge unknown

*Distance of Adenoma from Anal Verge (per clinical report)
  *Specify: ___ cm
  *___ Distance from anal verge unknown
Surgical Pathology Cancer Case Summary (Checklist)

Protocol revision date: January 2005
Applies to invasive carcinomas only
Based on AJCC/UICC TNM, 6th edition

COLON AND RECTUM: Excisional Biopsy (Polypectomy)

Patient name:
Surgical pathology number:

*Note: Check 1 response unless otherwise indicated.*

MACROSCOPIC

Tumor Site

___ Cecum
___ Right (ascending) colon
___ Hepatic flexure
___ Transverse colon
___ Splenic flexure
___ Left (descending) colon
___ Sigmoid colon
___ Rectum
___ Not specified

Polyp Size

Greatest dimension: ___ cm
*Additional dimensions: ___ x ___ cm
___ Cannot be determined (see Comment)

Polyp Configuration

___ Pedunculated with stalk
  Stalk length: ___ cm
___ Pedunculated, no stalk
___ Sessile
___ Fragmented

*Distance of Invasive Carcinoma from Anal Verge (per clinical report)
*Specify: ___ cm
*___ Distance from anal verge unknown

*Distance of Adenoma from Anal Verge (per clinical report)
*Specify: ___ cm
*___ Distance from anal verge unknown

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MICROSCOPIC

Histologic Type
___ Adenocarcinoma
___ Mucinous adenocarcinoma (greater than 50% mucinous)
___ Medullary carcinoma
___ Signet-ring cell carcinoma (greater than 50% signet-ring cells)
___ Small cell carcinoma
___ Undifferentiated carcinoma
___ Other (specify): __________________________
___ Carcinoma, type cannot be determined

Histologic Grade
___ Not applicable
___ Cannot be determined
___ Low-grade (well to moderately differentiated)
___ High-grade (poorly differentiated to undifferentiated)

Extent of Invasion
___ Cannot be determined
Invasion (deepest):
___ Lamina propria
___ Muscularis mucosae
___ Submucosa
___ Muscularis propria

Margins (check all that apply)

Deep Margin (Stalk Margin)
___ Cannot be assessed
___ Uninvolved by invasive carcinoma
   Distance of invasive carcinoma from margin: ___ mm
___ Involved by invasive carcinoma

Mucosal/Lateral Margin
___ Not applicable
___ Cannot be assessed
___ Uninvolved by invasive carcinoma
___ Involved by invasive carcinoma
___ Involved by in situ carcinoma/adenoma

Lymphatic (Small Vessel) Invasion (L)
___ Absent
___ Present
___ Indeterminate

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**Venous (Large Vessel) Invasion (V)**
- ___ Absent
- ___ Present
- ___ Indeterminate

**Type of Polyp in Which Invasive Carcinoma Arose**
- ___ Tubular
- ___ Villous
- ___ Tubulovillous
- ___ Serrated
- ___ Hamartomatous
- ___ Indeterminate

**Additional Pathologic Findings (check all that apply)**
- ___ None identified
- ___ Active colitis
- ___ Other (specify): ___________________________

**Comment(s)**

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Surgical Pathology Cancer Case Summary (Checklist)

Protocol revision date: January 2005
Applies to invasive carcinomas only
Based on AJCC/UICC TNM, 6th edition

RECTUM: Local Excision (Transanal Disk Excision)

Patient name:
Surgical pathology number:

Note: Check 1 response unless otherwise indicated.

MACROSCOPIC

Specimen Integrity
___ Intact
___ Fragmented
   *Number of pieces: ___

*Distance of Tumor from Anal Verge (per clinical report)
*Specify: ___ cm
*___ Distance from anal verge unknown

*Tumor Configuration
*___ Exophytic (polypoid)
*___ Infiltrative
*___ Ulcerating
*___ Other (specify): ___________________________

Tumor Size
Greatest dimension: ___ cm
*Additional dimensions: ___x ___ cm
___ Cannot be determined (see Comment)

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MICROSCOPIC

Histologic Type
___ Adenocarcinoma
___ Mucinous adenocarcinoma (greater than 50% mucinous)
___ Medullary carcinoma
___ Signet-ring cell carcinoma (greater than 50% signet-ring cells)
___ Small cell carcinoma
___ Undifferentiated carcinoma
___ Other (specify): ____________________________
___ Carcinoma, type cannot be determined

Histologic Grade
___ Not applicable
___ Cannot be assessed
___ Low-grade (well to moderately differentiated)
___ High-grade (poorly differentiated to undifferentiated)

Pathologic Staging (pTNM)

Primary Tumor (pT)
___ pTX: Cannot be assessed
___ pT0: No evidence of primary tumor
___ pTis: Carcinoma in situ, intraepithelial (no invasion)
___ pTis: Carcinoma in situ, invasion of lamina propria
___ pT1: Tumor invades submucosa
___ pT2: Tumor invades muscularis propria
___ pT3: Tumor invades through the muscularis propria into the subserosa or the nonperitonealized pericolic or perirectal soft tissues
* ___ pT3a/b: Tumor invades through the muscularis propria into the subserosa or the nonperitonealized pericolic or perirectal soft tissues, invades 5 mm or less beyond the border of the muscularis propria
* ___ pT3c/d: Tumor invades through the muscularis propria into the subserosa or the nonperitonealized pericolic or perirectal soft tissues, invades greater than 5 mm beyond the border of the muscularis propria
___ pT4: Tumor directly invades adjacent structures

Regional Lymph Nodes (pN)
___ pNX: Cannot be assessed
___ pN0: No regional lymph node metastasis
___ pN1: Metastasis in 1 to 3 lymph nodes
___ pN2: Metastasis in 4 or more lymph nodes
Specify: Number examined: ___
Number involved: ___

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Margins (check all that apply)

Lateral Margin
___ Cannot be assessed
___ Uninvolved by invasive carcinoma
     Distance of invasive carcinoma from closest lateral margin: ___ mm
     *Specify location (eg, o’clock position), if possible:

___ Involved by invasive carcinoma
     *Specify location (eg, o’clock position), if possible:

*___ Involved by carcinoma in situ/adenoma

Deep Margin
___ Cannot be assessed
___ Uninvolved by invasive carcinoma
     Distance of invasive carcinoma from margin: ___ mm
___ Focal involvement by invasive carcinoma
___ Multifocal involvement by invasive carcinoma

Lymphatic (Small Vessel) Invasion (L) (check all that apply)
___ Absent
___ Present
     *___ Intramural
     *___ Extramural
___ Indeterminate

Venous (Large Vessel) Invasion (V) (check all that apply)
___ Absent
___ Present
     *___ Intramural
     *___ Extramural
___ Indeterminate

*Perineural Invasion
*___ Absent
*___ Present

*Tumor Border Configuration
*___ Pushing
*___ Infiltrating

*Intratumoral/Peritumoral Lymphocytic Response
*___ None
*___ Mild to moderate
*___ Marked (including Crohn-like response)

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*Additional Pathologic Findings (check all that apply)
*___ None identified
*___ Adenoma(s)
*___ Chronic ulcerative proctocolitis
*___ Crohn disease
*___ Dysplasia
*___ Other polyps (type[s]): ________________________
*___ Other (specify): _________________________

*Comment(s)
Surgical Pathology Cancer Case Summary (Checklist)

Protocol revision date: January 2005
Applies to invasive carcinomas only
Based on AJCC/UICC TNM, 6th edition

COLON AND RECTUM: Resection

Patient name:
Surgical pathology number:
Other identifiers:

Note: Check 1 response unless otherwise indicated.

MACROSCOPIC

Specimen Type
___ Right hemicolectomy
___ Transverse colectomy
___ Left hemicolectomy
___ Sigmoidectomy
___ Rectal/rectosigmoid colon (low anterior resection)
___ Total abdominal colectomy
___ Abdominoperineal resection
___ Other (specify): ____________________________
___ Not specified

*Specimen Length (if applicable)
*Specify: ___ cm

Tumor Site
___ Cecum
___ Right (ascending) colon
___ Hepatic flexure
___ Transverse colon
___ Splenic flexure
___ Left (descending) colon
___ Sigmoid colon
___ Rectosigmoid
___ Rectum
___ Colon, not otherwise specified
___ Cannot be determined (see Comment)

*Tumor Configuration
*___ Exophytic (polypoid)
*___ Infiltrative
*___ Ulcerating
*___ Other (specify): ____________________________

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Tumor Size
Greatest dimension: ___ cm
*Additional dimensions: ___ x ___ cm
___ Cannot be determined (see Comment)

*Intactness of Mesorectum
*___ Not applicable
*___ Complete
*___ Near complete
*___ Incomplete

MICROSCOPIC

Histologic Type
___ Adenocarcinoma
___ Mucinous adenocarcinoma (greater than 50% mucinous)
___ Medullary carcinoma
___ Signet-ring cell carcinoma (greater than 50% signet-ring cells)
___ Small cell carcinoma
___ Undifferentiated carcinoma
___ Other (specify): ____________________________
___ Carcinoma, type cannot be determined

Histologic Grade
___ Not applicable
___ Cannot be assessed
___ Low-grade (well to moderately differentiated)
___ High-grade (poorly differentiated to undifferentiated)
___ Other (specify): ____________________________

Pathologic Staging (pTNM)

Primary Tumor (pT)
___ pTX: Cannot be assessed
___ pTO: No evidence of primary tumor
___ pTis: Carcinoma in situ, intraepithelial (no invasion)
___ pTis: Carcinoma in situ, invasion of lamina propria
___ pT1: Tumor invades submucosa
___ pT2: Tumor invades muscularis propria
___ pT3: Tumor invades through the muscularis propria into the subserosa or the nonperitonealized pericolic or perirectal soft tissues
*___ pT3a/b: Tumor invades through the muscularis propria into the subserosa or the nonperitonealized pericolic or perirectal soft tissues, invades 5 mm or less beyond the border of the muscularis propria
*___ pT3c/d: Tumor invades through the muscularis propria into the subserosa or the nonperitonealized pericolic or perirectal soft tissues, invades greater than 5 mm beyond the border of the muscularis propria
___ pT4a: Tumor directly invades other organs or structures
___ pT4b: Tumor penetrates the visceral peritoneum

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Regional Lymph Nodes (pN)
___ pNX: Cannot be assessed
___ pN0: No regional lymph node metastasis
___ pN1: Metastasis in 1 to 3 regional lymph nodes
___ pN2: Metastasis in 4 or more regional lymph nodes
Specify: Number examined: ____
Number involved: ____

Distant Metastasis (pM)
___ pMX: Cannot be assessed
___ pM1: Distant metastasis
*Specify site(s): ______________________________

Margins (check all that apply)

Proximal Margin
___ Cannot be assessed
___ Uninvolved by invasive carcinoma
___ Involved by invasive carcinoma
___ Carcinoma in situ/adenoma absent at proximal margin
___ Carcinoma in situ/adenoma present at proximal margin

Distal Margin
___ Cannot be assessed
___ Uninvolved by invasive carcinoma
___ Involved by invasive carcinoma
___ Carcinoma in situ/adenoma absent at distal margin
___ Carcinoma in situ/adenoma present at distal margin

Circumferential (Radial) Margin
___ Not applicable
___ Cannot be assessed
___ Uninvolved by invasive carcinoma
___ Involved by invasive carcinoma (tumor present 0-1 mm from CRM)

*Mesenteric Margin
* ___ Cannot be assessed
* ___ Uninvolved by invasive carcinoma
* ___ Involved by invasive carcinoma

If all margins uninvolved by invasive carcinoma:
Distance of invasive carcinoma from closest margin: ____ mm OR ____ cm
Specify margin: ______________________________

Lymphatic (Small Vessel) Invasion (L) (check all that apply)
___ Absent
___ Present
   * ___ Intramural
   * ___ Extramural
___ Indeterminate

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Venous (Large Vessel) Invasion (V) (check all that apply)
___ Absent
___ Present
* ___ Intramural
* ___ Extramural
___ Indeterminate

*Perineural Invasion
* ___ Absent
* ___ Present

*Tumor Border Configuration
* ___ Pushing
* ___ Infiltrating

*Intratumoral/Peritumoral Lymphocytic Response
* ___ None
* ___ Mild to moderate
* ___ Marked (including Crohn-like response)

*Additional Pathologic Findings (check all that apply)
* ___ None identified
* ___ Adenoma(s)
* ___ Chronic ulcerative proctocolitis
* ___ Crohn disease
* ___ Dysplasia
* ___ Other polyps (type[s]): ___________________________
* ___ Other (specify): ___________________________

*Comment(s)

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