

Extrahepatic Bile Ducts

Protocol applies to all invasive carcinomas of the extrahepatic bile ducts. Sarcomas and carcinoid tumors are excluded.

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

Procedures

- **Local or Segmental Bile Duct Resection**
- **Pancreaticoduodenectomy**

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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

No changes have been made to the data elements of the checklist(s) since the January 2004 protocol revision.

Surgical Pathology Cancer Case Summary (Checklist)

*Protocol revision date: January 2005
Applies to invasive carcinomas only
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EXTRAHEPATIC BILE DUCTS: Resection

Patient name:

Surgical pathology number:

Note: Check 1 response unless otherwise indicated.

MACROSCOPIC**Specimen Type**

- Pancreaticoduodenectomy
 Segmental resection of bile ducts(s)
 Choledochal cyst resection
 Other (specify): _____
 Not specified

Tumor Site (check all that apply)

- Right hepatic duct
 Left hepatic duct
 Junction of right and left hepatic ducts
 Cystic duct
 Common bile duct
 Proximal
 Middle
 Distal
 Not specified

Tumor Size

Greatest dimension: ___ cm

*Additional dimensions: ___ x ___ cm

 Cannot be determined (see Comment)

MICROSCOPIC**Histologic Type**

- Adenocarcinoma (not otherwise characterized)
 Papillary adenocarcinoma
 Adenocarcinoma, intestinal type
 Adenocarcinoma, gastric foveolar type
 Mucinous adenocarcinoma
 Clear cell adenocarcinoma
 Signet-ring cell carcinoma
 Adenosquamous carcinoma
 Other (specify): _____
 Carcinoma, type cannot be determined

Histologic Grade

- Not applicable
 GX: Cannot be assessed
 G1: Well differentiated
 G2: Moderately differentiated
 G3: Poorly differentiated
 G4: Undifferentiated

Pathologic Staging (pTNM)Primary Tumor (pT)

- pTX: Cannot be assessed
 pT0: No evidence of primary tumor
 pTis: Carcinoma in situ
 pT1: Tumor confined to the bile duct histologically
 pT2: Tumor invades beyond the wall of the bile duct
 pT3: Tumor invades the liver, gallbladder, pancreas, and/or unilateral branches of the portal vein (right or left) or hepatic artery (right or left)
 pT4: Tumor invades any of the following: main portal vein or its branches bilaterally, common hepatic artery, or other adjacent structures such as the colon, stomach, duodenum, or abdominal wall

Regional Lymph Nodes (pN)

- pNX: Cannot be assessed
 pN0: No regional lymph node metastasis
 pN1: Regional lymph node metastasis
 Specify: Number examined ____
 Number involved ____

Distant Metastasis (pM)

- pMX: Cannot be assessed
 pM1: Distant metastasis
 *Specify site(s), if known: _____

* Data elements **with asterisks** are **not required** for accreditation purposes for the Commission on Cancer. These elements may be clinically important, but are not yet validated or regularly used in patient management. Alternatively, the necessary data may not be available to the pathologist at the time of pathologic assessment of this specimen.

Margins (check all that apply)

- Cannot be assessed
- Margins uninvolved by invasive carcinoma
 Distance of invasive carcinoma from closest margin: ___ mm
 Specify margin: _____
- Margins involved by invasive carcinoma
 - Proximal bile duct margin
 - Distal bile duct margin
 - Other (specify): _____
- Carcinoma in situ absent at bile duct margin
- Carcinoma in situ present at bile duct margin

***Perineural Invasion**

- * Absent
- * Present
- * Indeterminate

***Venous (Large Vessel) Invasion (V)**

- * Absent
- * Present
- * Indeterminate

***Lymphatic (Small Vessel) Invasion (L)**

- * Absent
- * Present
- * Indeterminate

***Additional Pathologic Findings (check all that apply)**

- * None identified
- * Dysplasia
- * Cholangitis
- * Stones
- * Other (specify): _____

***Comment(s)**

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