

## Checklists for Procedures Not Encompassing Definitive Resection for Cancer

Organ Group	Protocol	Checklist	Procedure	Element Requirements
Central Nervous System	Brain	Combined with Resection Checklist	Open biopsy	Mandatory
			Stereotactic biopsy	Mandatory
Gastrointestinal	Anus	Combined with Local Excision Checklist	Excisional biopsy (polypectomy)	Mandatory
Gastrointestinal	Colon	Separate checklist	Excisional biopsy (polypectomy)	Mandatory
Gastrointestinal	Esophagus	Combined with Resection Checklist	Endoscopic mucosal resections only	Mandatory
Genitourinary	Kidney	Separate checklist	Incisional biopsy, Needle	Optional
			Incisional biopsy, Wedge	Optional
Genitourinary	Penis	Combined with Resection Checklist	Excisional biopsy	Mandatory
Genitourinary	Prostate	Separate checklist	TURP	Mandatory
			Needle biopsy	Mandatory
Genitourinary	Ureter/Renal Pelvis	Separate checklist	Biopsy	Optional
Genitourinary	Urethra	Separate checklist	Biopsy	Optional
Genitourinary	Urinary Bladder	Separate checklist	TURBT	Mandatory
			Incisional biopsy	Optional
Gynecologic	Uterine Cervix	Separate checklist	Cold knife cone excision	Mandatory
			LEEP/LLETZ/LOOP	Mandatory
			Radical trachelectomy	Mandatory
Gynecologic	Vagina	Separate checklist	Excisional biopsy	Mandatory
			Incisional biopsy	Optional
Gynecologic	Vulva	Combined with Resection Checklist	Excisional biopsy	Mandatory
Head and Neck	Larynx	Combined with Resection Checklist	Excisional biopsy	Mandatory
			Incisional biopsy	Optional
Head and Neck	Lip and Oral Cavity	Combined with Resection Checklist	Excisional biopsy	Mandatory
			Incisional biopsy	Optional
Head and Neck	Nasal Cavity and Paranasal Sinuses	Combined with Resection Checklist	Excisional biopsy	Mandatory
			Incisional biopsy	Optional
Head and Neck	Pharynx	Combined with Resection Checklist	Excisional biopsy	Mandatory
			Incisional biopsy	Optional

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Organ Group	Protocol	Checklist	Procedure	Element Requirements
Hematologic	Bone Marrow	Combined with Aspirate, Blood Film and Cell Block Checklists	Peripheral blood smear	Mandatory
			Bone marrow aspiration	Mandatory
			Bone marrow aspirate clot (cell block)	Mandatory
			Bone marrow core (trephine) biopsy	Mandatory
			Bone marrow core touch preparation (imprint)	Mandatory
Hematologic	Lymphoma, Hodgkin	Combined with Resection Checklist	Biopsy	Mandatory
Hematologic	Lymphoma, Non-Hodgkin	Combined with Resection Checklist	Biopsy	Mandatory
Hematologic	Ocular Adnexal Lymphoma	Combined with Resection Checklist	Biopsy	Mandatory
Skin	Skin Melanoma	Combined with Excision, Re-excision and lymphadenectomy Checklists	Shave	Mandatory
			Punch	Mandatory
			Incisional biopsy	Mandatory
Skin	Skin Merkel Cell	Combined with Excision, Re-excision and Lymphadenectomy Checklists	Shave	Optional
			Punch	Optional
			Incisional biopsy	Mandatory
			Excisional biopsy	Mandatory
Skin	Skin Squamous Cell Carcinoma	Combined with Excision, Re-excision and Lymphadenectomy	Tumor greater than or equal to 2 cm	Mandatory
			Tumor less than 2 cm	Optional
Other	Bone	Separate checklist	Core needle biopsy	Mandatory
			Curettage	Mandatory
			Excisional biopsy	Mandatory
Other	Gastrointestinal Stromal Tumor (GIST)	Separate checklist	Core needle biopsy	Mandatory
			Endoscopic biopsy	Mandatory
			Excisional biopsy	Mandatory
Other	Soft Tissue	Separate checklist	Core needle biopsy	Mandatory
			Incisional biopsy	Mandatory
			Excisional biopsy	Mandatory