# Appendix F Histopathology reporting proforma: urethrectomy or urethral diverticulectomy

(For squamous tumours of distal penile urethra refer to RCPath penile dataset, 2nd edition.27)

Surname: Forenames:

Date of birth: Sex:

Hospital: Hospital no: NHS/CHI no:

Date of reciept: Date of reporting: Report no:

Pathologist: Surgeon:

## Relevant clinical information

…………………………………………………………………………………………………………

## Nature of specimen/procedure

Urethrectomy □ Urethral diverticulectomy □

Other (specify)………………….......................

## Macroscopy

Other tissues/organs included (specify)……………………………...........................................

**Macroscopic tumour assessment**

No macroscopically visible tumour □

*or*

**Tumour location(s)** ………………………………………………………..

**Maximum tumour diameter**........ (mm) **Number of tumours**……….

### Macroscopic extent of invasion:

No invasion identified □

Tumour invades: Muscular wall □ Corpus spongiosum □ Corpus cavernosum □

Vagina □ Prostate □ Periprostatic tissue □

Other adjacent structure (specify)…………………………………...……….

### Resection margins:

Not assessable □ Not involved □ Involved □ Site(s)……………….

**Comments**…………………………………………………………………………………………….

## Microscopy

### Tumour type

Urothelial carcinoma □ Squamous cell carcinoma □ Adenocarcinoma □

Mullerian type tumour □ Small cell neuroendocrine carcinoma □

Large cell neuroendocrine carcinoma □ Other (specify)………………………………

### Urothelial carcinoma subtype/variant (specify percentage if present)

Not identified □

Squamous □……% Glandular □ ……% Micropapillary □……%

Nested □……% Plasmacytoid □……% Sarcomatoid □……%

Other (specify with percentages) □……………………………………

### Tumour grade

Not applicable □ Cannot be determined □

**Urothelial carcinoma**

WHO 1973: Grade 1 □ Grade 2 □ Grade 3 □

WHO 2004: Low grade □ High grade □

**Squamous cell carcinoma or adenocarcinoma**

Well differentiated □ Moderately differentiated □ Poorly differentiated □

### Associated CIS:

Yes (adjacent to tumour) □ Yes (elsewhere) □ No □ Not assessable □

### Lymphovascular invasion:

Yes □ No □ Not assessable □

### Resection margins:

Not assessable □ Not involved □ Involved □ Site(s)………….……

### Regional lymph nodes:

Not applicable □ Total number...…….... Number +ve……. Extracapsular spread: Yes □ No □ Not applicable □

**Non-regional nodal metastasis:** Yes □ No □ Not assessable □

**pTNM classification:** pT…… pN……. pM\*………

\*pM should either be pM1 or not applicable (N/A)

TNM edition number used: ……

**SNOMED codes:** T………………… M……………….

Further comments:

……………………………………….........................................................................................

**Pathologist………………………............ Date………………………**