The Royal College of Pathologists of Australasia
ABN 52 000 173 231

Durham Hall 207 Albion Street Surry Hills NSW 2010 Australia
Telephone 61 2 8356 5858 Facsimile 61 2 8356 5828

RCPA
The Royal College of Pathologists of Australasia

Level 3 Structured Pathology Reporting of Cancer Implementation Guide

Scope

Structured pathology reporting of cancer refers to the reporting of cancer specimens for which there are published RCPA protocols:

http://www.rcpa.edu.au/Library/Practising-Pathology/Structured-Pathology-Reporting-of-Cancer/Cancer-Protocols

Level 3

Figure 1 describes the spectrum of reporting from traditional narrative reports with no prescribed content or format - Level 1, to fully conformant, structured and encoded information at Level 6.

Level 3 requires that cancer reports:

1. comply with the available RCPA published protocols and
2. that a structured format is used (though not necessarily using advanced data entry tools).

This level of compliance does not require investment in new technology, a simple template in MS word or other word processing application is adequate. However, many laboratories will find it advantageous to implement with appropriate electronic data entry tools (achieving level 4 or above compliance).

Format

Compliance with Level 3 requires the reporting elements (subject to the below considerations) to be reported in a columnar or Q&A format.

For example: columnar

Histological tumour type:	Ductal adenocarcinoma
Histological grade:	Grade 1: Well differentiated (greater than 95% of tumour composed of glands)
Microscopic tumour site:	Pancreas
Maximum extent of tumour invasion:	Peripancreatic soft tissues
Maximum tumour diameter:	30mm
Lymphovascular invasion:	Present

For example: Q&A format

Histological tumour type: Ductal adenocarcinoma
Histological grade: Grade 1: Well differentiated (greater than 95% of tumour composed of glands)
Microscopic tumour site: Pancreas
Maximum extent of tumour invasion: Peripancreatic soft tissues
Maximum tumour diameter: 30mm
Lymphovascular invasion: Present

Formatting in regard to font, spacing, tabulation and sequencing are at the discretion of the laboratory/pathologist.

The Royal College of Pathologists of Australasia
ABN 52 000 173 231

Durham Hall 207 Albion Street Surry Hills NSW 2010 Australia
Telephone 61 2 8356 5858 Facsimile 61 2 8356 5828

General considerations

General content

Each protocol includes a reporting checklist in Chapter 6. This checklist includes the elements to be reported and the value lists to be used to record the responses. The checklists include both *standards* and *guidelines*.

Standards are the mandatory or required minimum for reporting of the specific cancer. All standards MUST be included in the report. Guidelines are optional and those which are deemed not applicable may be removed from the checklist or report.

The element names eg tumour site, perineural invasion, and value list responses eg positive, not identified etc should be used in the report as per the relevant protocol checklist.

The numbering of Standards and Guidelines which appears in the protocol eg S2.03 is not required in the report.

Additional items for local use may be added to the report.

Additional text/narrative may be added to the report for clarification purposes.

Macroscopic information

As most macroscopic data is still dictated, dictation templates for the reporting of macroscopic data have been published to facilitate compliance to the protocol content:

https://www.rcpa.edu.au/Manuals/Macroscopic-Cut-Up-Manual

In recognition of the shortcomings of both the dictation process and Laboratory System functionality, laboratories may be deemed compliant in regard to macroscopic data if the *content* of the published protocol is included in the report. That is, a columnar or Q&A formatting is desirable but not required for the macroscopic report.

Clinical Information

The desired detailed clinical information to be included on the request form is included in the protocols as *advisory* information. In the older protocols the detailed clinical information was in included in chapter 1; in the newer protocols the detailed clinical information is included in Appendix 1 to emphasise the advisory nature of the information. In all cases, the required inclusions in the report are:

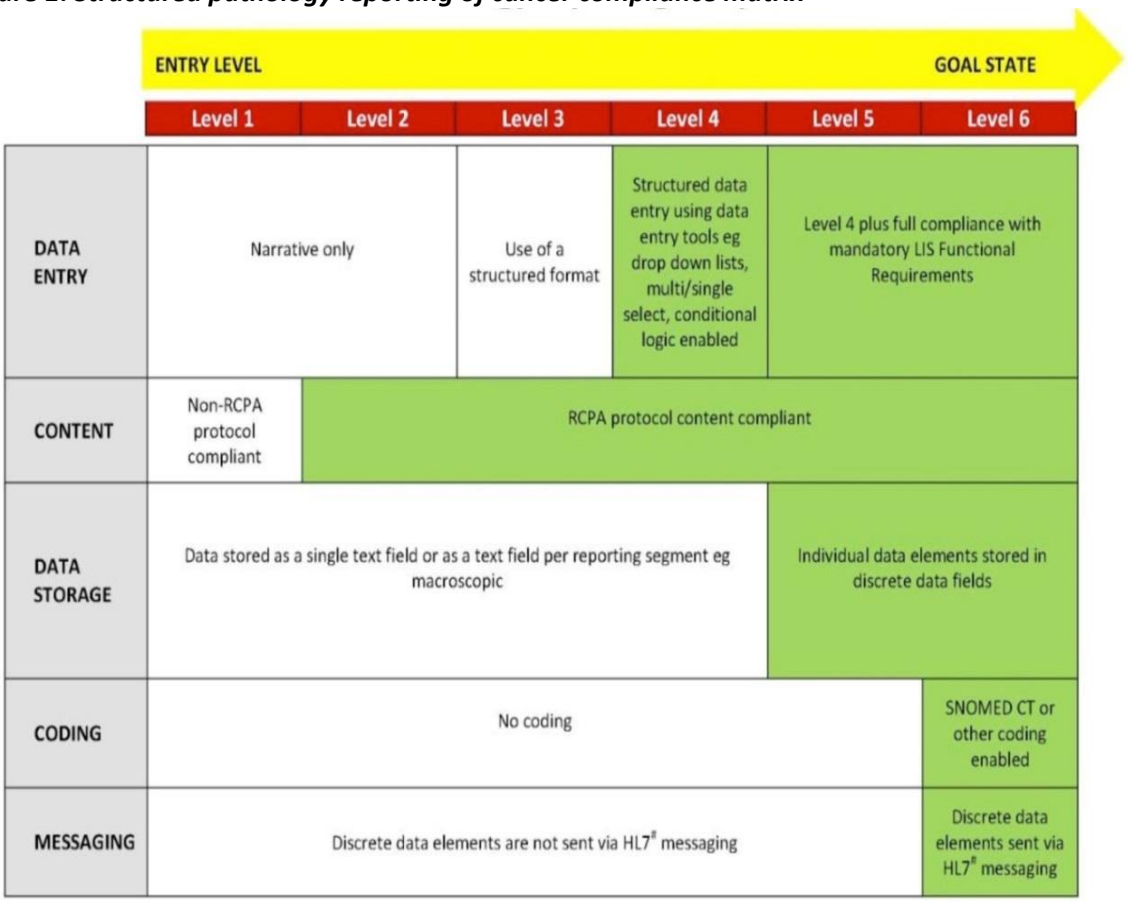
1. the patient demographics/identifiers,
2. all clinical information as documented on the request form (ie detailed clinical information),
3. the laboratory accession number,
4. any clinical information received in other communications from the requestor or other clinician
5. and in some protocols the identity of the primary clinician caring for the patient.

The Royal College of Pathologists of Australasia
ABN 52 000 173 231

Durham Hall 207 Albion Street Surry Hills NSW 2010 Australia
Telephone **61 2 8356 5858** Facsimile **61 2 8356 5828**

RCPA
The Royal College of Pathologists of Australasia

Figure 1: Structured pathology reporting of cancer compliance matrix



*Adapted from Srigley JR, McGowan T, Maclean A et al "Standardized Synoptic Cancer Pathology Reporting: A Population-Based Approach". Journal of Surgical Oncology 2009;99:517–524

Health Level 7 is a not-for-profit organisation defining interoperability and standards in healthcare information technology