

A guide to Adrenal Gland Tumours Histopathology Reporting



Clinical details

S1.02 Clinical information provided on request form	Text OR Structured entry as below:
Functionality of the adrenal gland	Functional Non-functional
If functional, specific type of presentation	Text
Operative procedure	Text
Any previous adrenal surgery	Text
Site of lesion(s)	Text
Laterality of lesion	Left Right Both
Any accompanying specimens	Lymph nodes Kidney Other
If other, provide details	Text
Any relevant clinical information	Text
Pre-operative biopsy	Not performed Performed
If performed, specify details	Text
Clinical stage	Text
Involvement of adjacent organs	Not involved Involved
If involved, describe involved organs	Text
Clinical or differential diagnosis	Text
New primary or recurrence	New primary Local recurr. Dist. met.
If distant metastasis, provide details	Text
S1.03 Pathology accession number	Text
S1.04 Principal clinician	Text
S1.05 Surgeon's identity and contact details	Text
G1.01 Other clinical info. received	Text

Macroscopic findings

S2.02 Specimen labelled as	Text
G2.01 Specimen dimensions	Cannot be recorded <i>OR</i> __x__x__mm
S2.03 Specimen weight	__g
S2.04 Tumour capsule	Intact Not intact
S2.05 Number of macroscopically visible tumour(s)	__
S2.06 Macro. appearance of lesion(s) (Complete for each lesion...)	
Location	Indeterminate Cortex Medulla Other
If other, provide details	Text

Macroscopic findings (cont.)

Borders	Encapsulated Infiltrative
Description	Text
Size in greatest dimension	__mm
Distance to nearest excision margin	__mm
S2.07 APPEARANCE OF UNINVOLVED ADRENAL GLAND	
Cortex	Unremarkable Atrophic (thin) Hypertrophic Not identified
Medulla	Unremarkable Atrophic (thin) Hypertrophic Not identified
Cortical nodules	Absent Present Not assessable
If present, record size of largest nodule	__mm <i>OR</i> <10mm
Medullary hyperplasia/nodule	Absent Present Not assessable

G2.02 ANY ACCOMPANYING SPECIMENS	
Lymph nodes	Absent Present
Other adjacent structures	Text
G2.03 Other macroscopic comment	Text

Microscopic findings

S3.01 Tumour type	See p2
G3.01 Tumour type variant	See p2
S3.02 Diameter of largest tumour	__mm
FOR PHEOCHROMOCYTOMA	
S3.13 Cellular pattern (diffuse architecture is defined as large nests or diffuse growth >10%)	Non-diffuse Zellballen Large & irregular cell nests Pseudorosette
S3.14 Cellularity	Low Moderate High
S3.10 Central or confluent necrosis	Absent Present
S3.03 Adrenal vein or vena cava invasion	Absent Present
S3.04 Capsular invasion	Absent Present
S3.06 Extension into adipose tissue	Absent Present
S3.07 Adjacent organs	Not involved Involved
If involved, list involved organs	Text

Microscopic findings (cont.)		Ancillary test findings	
S3.14	Cellular monotony	Absent Present	
	Tumour cell spindling	Absent Present	
	Profound nuclear pleomorphism	Absent Present	
	Nuclear hyperchromasia	Absent Present	
S3.08	Mitotic rate	____ /10HPF	
S3.09	Atypical mitotic figures	Absent Present	
FOR ADRENOCORTICAL TUMOURS			
S3.11	Nuclear grade (Fuhrman)	grade 1 grade 2 grade 3 grade 4	
S3.12	Tumour comprising clear or vacuolated cells	____%	
S3.08	Mitotic rate	____ /50HPF	
S3.09	Atypical mitotic figures	Absent Present	
S3.13	Cellular pattern (diffuse growth is defined as >1/3 of tumour forms patternless sheets of cells; trabecular, cord, columnar, alveolar or nesting is not considered diffuse)	Non-diffuse Diffuse archit.	
S3.10	Central or confluent necrosis	Absent Present	
S3.03	Adrenal vein or vena cava invasion	Absent Present	
S3.04	Capsular invasion	Absent Present	
S3.07	Adjacent organs	Not involved Involved	
	If involved, list involved organs	Text	
S3.05	Sinusoidal invasion (only if conventional or oncocytic adrenocortical neoplasm)	Absent Present	
FOR ALL TUMOURS			
G3.02	MALIGNANT POTENTIAL		
	Scoring system (eg PASS, Weiss)	Text	
	Score for malignant potential	Numeric	
S3.15	Non-tumour adrenal gland	See p2	
S3.16	Margin status	Clear Involved	
	If clear, record distance to closest margin	____mm	
	If involved, record involved margin(s)	Text	
S3.17	Lymph node status	Clear Involved	
	If involved, record no. of positive nodes out of total no. of nodes.	____/____	
G3.03	Coexistent pathological abnormalities	Absent Present	
	If present, describe	Text	
G3.04	Other relevant micro. comments	Text	
S4.01	Ancillary Tests	Not performed Performed	
	If performed, complete the following for each test performed....		
	Test result type eg FISH, IHC, cytogenetics etc	Text	
	Result	Text	
	Conclusion	Text	
	Laboratory performing the test	Text	
	Method	Text	
	Substrate (eg cytology smears, fluid in special media, paraffin block, fresh tissue, etc)	Text	
	Person responsible for reporting	Text	
Synthesis and overview			
S5.01	Pathological tumour stage & stage grouping (AJCC) (Required only for adrenal cortical cancer)	See p3	
S5.02	Year of publication & edition of cancer staging system	Text	
G5.01	Diagnostic summary. Include: specimen type, tumour type, diameter of largest tumour, tumour stage, completeness of excision	Text	
S5.03	Overarching comments	Text	
S3.15 Non-tumour adrenal gland			
> Unremarkable			
OR			
> Not identified/not assessable			
OR			
Multi select value list (select all that apply)			
<ul style="list-style-type: none"> • Adrenal cortical atrophy • Hyperplasia • Cortical nodules • Medullary hyperplasia/nodule 			
S3.01 Tumour type /G3.01 Variant			
Adrenal cortical tumours		Other adrenal tumours	
Adrenal cortical carcinoma		Adenomatoid tumour	
Adrenal cortical adenoma		Sex-cord stromal tumour	
Adrenal medullary tumours		Soft tissue and germ cell tumours	
Malignant pheochromocytoma		Myelolipoma	
Benign pheochromocytoma		Teratoma	
Composite pheochromocytoma/paraganglioma		Schwannoma	
		Ganglioneuroma	
		Angiosarcoma	
Extra-adrenal paraganglioma		Secondary tumours	
Carotid body			
Jugulotympanic			
Vagal			
Laryngeal			
Aortico-pulmonary			
Gangliocytic			
Cauda equina			
Orbital Nasopharyngeal			
Extra-adrenal sympathetic paraganglioma			
Superior and inferior para-aortic paraganglioma			
Urinary bladder			
Intrathoracic and cervical paravertebral			

S5.01 Tumour stage (AJCC)^{##}

Primary Tumour (T)

- TX Primary tumour cannot be assessed
- T0 No evidence of primary tumour
- T1 Tumour 5 cm or less in greatest dimension, no extra-adrenal invasion
- T2 Tumour greater than 5 cm, no extra-adrenal invasion
- T3 Tumour of any size with local invasion, but not invading adjacent organs*
- T4 Tumour of any size with invasion of adjacent organs*

*Adjacent organs include kidney, diaphragm, great vessels, pancreas, spleen, and liver.

Regional Lymph Nodes (N)

- NX Regional lymph nodes cannot be assessed
- N0 No regional lymph node metastasis
- N1 Metastasis in regional lymph node(s)

Distant Metastasis (M)

- M0 No distant metastasis
- M1 Distant metastasis

Stage Grouping

Stage	T	N	M
I	T1	N0	M0
II	T2	N0	M0
III	T1	N1	M0
	T2	N1	M0
III	T3	N0	M0
IV	T3	N1	M0
	T4	N0	M0
	T4	N1	M0
	Any T	Any N	M1

^{##} Used with the permission of the American Joint Committee on Cancer (AJCC), Chicago, Illinois. The original source for this material is the AJCC Cancer Staging Manual, Seventh Edition (2010) published by Springer Science and Business Media LLC, www.springerlink.com