## Cellular pathology audit template

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| --- | --- |
| Date of completion | (To be inserted when completed) |
| Name of lead author/ participants | (To be inserted) |
| Specialty | Paediatric pathology |
| Title | **An audit of renal tumours in childhood reporting in resection specimens** |
| Background | Datasets published by the Royal College of Pathologists define the core data items that are to be included in the histopathology reports of different cancers to ensure that all necessary data is provided.  In 2023, the dataset for histopathological reporting of renal tumours in childhood1 was revised. It states the data items to be included when reporting renal tumours nephrectomy specimens. The dataset specifies certain data should be included in all reports. |
| Aim & objectives | To determine whether individual pathologists and/or departments are able to fulfil the below reporting standards including whether:  the full recommended datasets are being recorded  additional or alternative data are being regularly collected. |
| Standards & criteria | **Criteria range:** 100% or if not achieved, there is documentation in the case notes that explains the variance.  **The agreed standards:**  Each data item stated in the dataset for inclusion in histopathology reports.  **Additional standards:**  The dataset includes data that might be collected but is not included in the core data items. |
| Method | **Sample selection:**  All renal tumours in nephrectomy and biopsy specimens from a specified time period  Review of histopathology reports  Record whether or not data items are included  **Data to be collected on proforma (see below).** |
| Results | (To be completed by the author)  The results of this audit show the following compliance with the standards:   |  |  | | --- | --- | |  | % compliance | |  |  | |  |  | |  |  | |  |  | |  |  | |  |  | |  |  | |  |  | |  |  |   **Commentary:** |
| Conclusion | (To be completed by the author) |
| Recommend- ations for improvement | Present the result with recommendations, actions and responsibilities for action and a timescale for implementation. Assign a person(s) responsible to do the work within a timeframe.  **Some suggestions:**  highlight areas of practice that are different  present findings. |
| Action plan | (To be completed by the author – see attached action plan proforma) |
| Re-audit date | (To be completed by the author) |
| References | 1. Vujanić GM, Sebire NJ. *Dataset for Histopathological Reporting of Renal Tumours in Childhood.*London, UK: The Royal College of Pathologists. 2023. Accessed June 2023. Available at: <https://www.rcpath.org/profession/guidelines/cancer-datasets-and-tissue-pathways.html> |

## Data collection proforma for renal tumours in childhood reporting in resection specimens

## Audit reviewing turnaround times

Patient name:

Hospital number:

Date of birth:

Consultant:

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| **Are the following core data items recorded?** | **1**  **Yes** | **2**  **No** | **3**  If **No**, was there documentation to explain the variance?  **Yes/No** plus free-text comment | **4**  Compliant with guideline based on **Yes** from column 1 or an appropriate explanation from column 3. **Yes/No** |
| Macroscopic description |  |  |  |  |
| Total weight of nephrectomy |  |  |  |  |
| Size of specimen |  |  |  |  |
| Size of tumour (in all 3 dimensions) |  |  |  |  |
| Surface inked |  |  |  |  |
| Location of tumour |  |  |  |  |
| Is tumour multifocal? |  |  |  |  |
| Is the specimen received intact? |  |  |  |  |
| Is the capsule grossly intact? |  |  |  |  |
| The percentage of regressive changes on gross examination |  |  |  |  |
| The percentage of regressive changes on microscopic examination |  |  |  |  |
| The percentage of blastema as a portion of viable tumour |  |  |  |  |
| The presence of anaplasia (focal or diffuse) |  |  |  |  |
| The presence of perirenal fat invasion |  |  |  |  |
| The presence of renal sinus invasion |  |  |  |  |
| The presence of tumour in renal vein |  |  |  |  |
| Is the resection margin involved with viable tumour |  |  |  |  |
| Are lymph nodes involved? If yes, by a viable or non-viable tumour? |  |  |  |  |
| Histological diagnosis and subtype |  |  |  |  |
| Tumour risk group |  |  |  |  |
| Local tumour stage |  |  |  |  |
| Reason for staging |  |  |  |  |
| **Non-core data items recorded?** |  |  |  |  |

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| **Audit action plan**  An audit of renal tumours in childhood reporting in resection specimens | | | | | | |
| Audit recommendation | Objective | Action | Timescale | Barriers and constraints | Outcome | Monitoring |
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