**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** | Histopathology |
| **Title** | **An audit of the histopathological reporting of soft tissue sarcomas** |
| **Background** | The histopathological reporting of soft tissue sarcomas plays a vital role in the diagnosis and management of such specimens. Sarcomas are such rare tumours that there is an absolute necessity to collect comprehensive and uniform datasets across the UK if the country is to contribute to a better global understanding of the incidence, nature, management and outcomes of soft tissue sarcomas.  The *Dataset for histopathological reporting of soft tissue sarcomas (6th edition)* provides guidance on current accepted practice for the diagnostic approach and reporting of such specimens. |
| **Aim & objectives** | To determine whether:   * the full recommended datasets are being recorded * additional or alternative data are being regularly collected when soft tissue sarcomas are reported in each of the sarcoma multidisciplinary teams (MDTs) in the UK. |
| **Standards & criteria** | **Criteria range:** 100%  In keeping with the [recommended key performance indicators published by RCPath](https://www.rcpath.org/profession/guidelines/kpis-for-laboratory-services.html), reports on soft tissue sarcomas should be audited for the following:   * the inclusion of SNOMED or SNOMED-CT codes:   + - standard: 95% reports should have T, M and P codes.   + the availability of pathology reports and data at MDT meetings:     - standard: 90% of cases discussed at MDT meetings where biopsies or resections have been taken should have pathology reports/core data available for discussion     - standard: 90% of cases where pathology has been reviewed for the MDT meeting should have the process of review recorded.   + the use of electronic structured reports or locally agreed proformas (it is assumed that these processes will ensure that 90% of core data items are recorded):     - standard: 80% of resection specimens will include 100% of data items presented in a structured format.   + turnaround times for biopsies and resection specimens (not a dataset item):     - standard: 80% diagnostic biopsies have at least a preliminary report within 7 calendar days of the biopsy being taken.   **Standard:** 80% of all histopathology specimens (excluding those requiring decalcification) will have at least a preliminary report within 10 calendar days of the specimen being taken. |
| **Method** | **Sample selection:**   * Retrospective selection of all soft tissue sarcoma resections, undertaken in a primary sarcoma treatment centre following positive needle biopsy. * Review of histopathology resection reports. * Record whether the following data items are/are not included in each report: * site of tumour * depth from surface * maximum tumour dimension (in mm) * histological type (and subtype): grade (FNCLCC) * tissue planes involved (indicate all planes) * distance to nearest margin .......... mm * type of tissue at margin ..................………. * immunohistochemical profile * cytogenetic and molecular genetic data (for small round cell tumours) * SNOMED codes. * Note whether other data are routinely collected.   **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 in:   |  |  | | --- | --- | |  | **% compliance** | | Birmingham |  | | Edinburgh |  | | Leeds |  | | Liverpool |  | | London Royal Marsden |  | | London RNOH |  | | Manchester |  | | Manchester Christie |  | | Newcastle |  | | Nottingham |  | | Oswestry |  | | Oxford Nuffield |  | | Sheffield |  | | Plymouth |  |   **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** | Fisher C, Thway K. *Dataset for Histopathological Reporting of Soft Tissue Sarcomas.* London, UK: The Royal College of Pathologists, 2022. Available at: <https://www.rcpath.org/uploads/assets/369456b0-f7b4-4631-a0c6d161176f5782/Dataset-for-histopathological-reporting-of-soft-tissue-sarcoma.pdf>  Shah C, Wang J, Mubako T, Fisher C, Thway K. Gross examination and reporting of soft tissue tumours: evaluation of compliance with the UK Royal College of Pathologists soft tissue sarcoma dataset*. J Clin Pathol* 2016;69:761–766. |

**Data collection proforma for soft tissue sarcoma reporting**

**Audit reviewing practice**

Patient name:

Hospital number:

Date of birth:

Consultant:

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| **Current dataset parameters** | **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** |
| Site of tumour |  |  |  |  |
| Depth from surface |  |  |  |  |
| Maximum tumour dimension: ………………..… mm |  |  |  |  |
| Histological type (and subtype) |  |  |  |  |
| Grade (FNCLCC) |  |  |  |  |
| Tissue planes involved (indicate all planes) |  |  |  |  |
| Distance to nearest margin .......... mm |  |  |  |  |
| Type of tissue at margin ..................………. |  |  |  |  |
| Immunohistochemical profile |  |  |  |  |
| Cytogenetic and molecular genetic data (for small round cell tumours) |  |  |  |  |
| SNOMED codes: P…………………. T…………… M………….. |  |  |  |  |
| **Routinely collected data, not part of current dataset parameters** | | | | |
| Vascular invasion |  |  |  |  |

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| **Audit action plan**  An audit of the histopathological reporting of soft tissue sarcomas | | | | | | |
| **Audit recommendation** | **Objective** | **Action** | **Timescale** | **Barriers and constraints** | **Outcome** | **Monitoring** |
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