**Appendix H Reporting proforma for appendiceal goblet cell adenocarcinoma**

**(previously called goblet cell carcinoid) resections**

Surname: ………………………… Forename(s): ……………………….. Date of Birth: …………… Sex: ….…..

Hospital: …………………………….……………. Hospital No: ……………….…… NHS No: ..…………………..

Date of Surgery: ……………….… Date of Report Authorisation: …………… Report No: ………………………

Date of Receipt: ………………... Pathologist: ………………….…………… Clinician: ...…………………….......

**MACROSCOPIC EXAMINATION**

**Type of specimen**

Appendicectomy Not specified

Right hemicolectomy Other

Other (specify) …………………..

**Specimen dimensions Site of tumour (select all that apply)**

Length …… mm Base

Maximum width ....... mm Body

Depth of attached mesoappendix ....... mm Tail

Other ....... mm Other

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

**Tumour perforation** Present Not identified

**Number of tumours** SingleMultipleIf multiple, state number of tumours ……… **Maximum tumour dimension** .............mm (of largest if multiple)

v

**Distance tumour to nearest cut margin** ..……..mm

**MICROSCOPIC EXAMINATION**

**Tumour grade (Table 3)**

1 2 3 Not assessable

**PATHOLOGIC STAGE CLASSIFICATION: UICC TNM 8th EDITION**

**TNM descriptors (required only if applicable) (select all that apply)**

m (multiple tumours)

r (recurrent)

y (post-treatment)

**Maximum extent of invasion (pT)**

pTX Primary tumour cannot be assessed

pT0 No evidence of primary tumour

pT1 Tumour invades submucosa

pT2 Tumour invades muscularis propria

pT3 Tumour invades subserosa or mesoappendix

pT4a Tumour perforates visceral peritoneum

pT4b Tumour directly invades other organs or structures

For multiple tumours with different Ts, use the highest.

**Tumour involvement of margins**

Proximal margin Involved Not involved N/A

Distal margin Involved Not involved N/A

Circumferential margin: Involved Not involved N/A

If not involved, distance of tumour to nearest circumferential margin …….. mm

Doughnuts Involved Not involved N/A

**Resection status**

Complete resection at all surgical margins?

Yes (R0) No, microscopic (R1) No, macroscopic (R2)

**Metastatic spread**

Number of lymph nodes present ………………….

Number of involved lymph nodes …………………

**TNM N category:**

pNX Regional lymph node status cannot be assessed 

pN0 Regional lymph nodes not involved 

pN1a 1 regional node involved 

pN1b 2–3 regional nodes involved 

pN1c Tumour deposits only 

pN2 >4 regional nodes involved 

**Lymphovascular invasion** Present Not identified  Cannot be assessed 

**Perineural invasion** Present Not identified  Cannot be assessed 

**Tumour deposit** Present Not identified  Cannot be assessed 

**Histologically confirmed distant metastases (pM1):**

Present Not identified

M1a Intraperitoneal acellular mucin only 

M1b Intraperitoneal metastasis only, including mucinous epithelium 

M1c Non-peritoneal metastasis 

**Background abnormalities**

None identified

Appendicitis Adenoma Sessile serrated lesion

Other

Other (specify) ……… …………………………

**Please note:** Goblet cell tumours shouldbe managed as adenocarcinoma, therefore referral to colorectal MDT meeting is recommended.

**Signature: …………………….…….. Date: .…../…../……. SNOMED codes: ……………………………..**