

Colorectal Excisional Biopsy (Polypectomy) Histopathology Reporting Guide



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er container)
OR Multiple (with no specific number given) CIMEN SITE(S) ^a (select all that apply) Not specified Caecum Ileocaecal valve Appendiceal orifice Ascending colon Hepatic flexure Transverse colon Splenic flexure Descending colon Sigmoid colon Rectosigmoid junction
Rectum Anorectal junction mm from the anal verge Other, specify OSCOPIC POLYP SIZE AND CLASSIFICATION ^a ize (mm) Not specified mm OR Size range mm to mm OR ize category Diminutive Small Large indicated on the container label, pathology request form or

Classification (select all that apply)	Hamartomatous polyp	
○ Not given	Inflammatory polyp	
Paris classification, specify	Mucosal prolapse polyp	
V	Other, specify	
Lateral spreading tumour classification, specify		
	Additional features	
Optical diagnosis, specify	For neuroendocrine neoplasms onl	y
	Not applicable	
	Mitotic count	′2 mm²
	AND/OR	
SPECIMEN DIMENSIONS (select all that apply)		
Manufacture discounting of intent an arising	Ki-67 proliferation index	%
Maximum dimensions of intact specimen	Adenoma with epithelial misplacement	
mm x mm	Other, specify	
Maximum dimension of intact polyp	V	
mm		
Aggregated dimensions for fragmented polyps		
mm x mm		
Maximum dimension of largest piece for fragmented polyps		
mm		
HISTOLOGICAL TYPE OF POLYP (select all that apply)		
(Value list from the World Health Organization (WHO)		
Classification of Tumours of the Digestive System (2019))		
No polyp identified (normal mucosa)		
☐ Tubular adenoma		
☐ Tubular adenoma, high grade		
☐ Tubulovillous adenoma		
Tubulovillous adenoma, high grade		
☐ Villous adenoma		
☐ Villous adenoma, high grade		
Hyperplastic polyp		
Sessile serrated lesion		
Sessile serrated lesion with dysplasiaTraditional serrated adenoma		
Traditional serrated adenoma, high grade		
Serrated adenoma unclassified		
Suspicious for adenocarcinoma		
☐ Adenocarcinoma ^b		
Neuroendocrine tumour		
Grade 1		
Grade 2		
Grade 3		
Neuroendocrine carcinoma		
Small cell type		
Large cell type		
Mixed neuroendocrine-non-neuroendocrine neoplasm (MiNEN)		
For adenocarcinoma, refer to HISTOLOGICAL TUMOUR TYPE describing all histological subtypes of adenocarcinomas.		

HISTOLOGICAL TUMOUR TYPE®	LYMPHATIC AND VENOUS INVASION
(Value list from the WHO Classification of Tumours of the Digestive System (2019))	O Not identified
Not applicable	Present
No evidence of residual tumour	Small vessel (lymphatic, capillary or venular)
Adenocarcinoma not otherwise specified (NOS)	Large vessel (venous)
Mucinous adenocarcinoma	▼ ○ Intramural
Signet-ring cell adenocarcinoma	Extramural
Medullary carcinoma	Extramulai
Serrated adenocarcinoma	
Micropapillary adenocarcinoma	TUMOUR BUDDING
Adenoma-like adenocarcinoma	(Should only be reported in non-mucinous and non-signet
Neuroendocrine carcinoma	ring cell adenocarcinoma areas)
Small cell type	Cannot be assessed
Large cell type	Number of tumour buds ^e
Mixed neuroendocrine-non-neuroendocrine neoplasm	Number of tumour bads
(MiNEN)	Tumour budding score
Other, specify	Bd1 - low budding (0-4 buds)
▼	Bd2 - intermediate budding (5-9 buds)
	☐ Bd3 - high budding (≥10 buds)
Precursor polyp/lesion	
Absent	e After scanning 10 fields on a 20x objective lens, the hotspot field normalised to represent a field of 0.785 mm².
Present, <i>specify type</i> ^d	normanisca to represent a nera or or os min r
•	
	PERINEURAL INVASION
^c To complete this and all following elements ONLY if an adenocarcinoma,	
neuroendocrine carcinoma or MiNEN is present. If multiple primary carcinomas are present, separate datasets should be used to record this	○ Not identified
and all following elements for each primary carcinoma.	○ Present
d Refer to HISTOLOGICAL TYPE OF POLYP.	
	MARGIN STATUS
HISTOLOGICAL GRADE OF ADENOCARCINOMA	Deep margin
(Only adenocarcinoma NOS and mucinous adenocarcinoma should be graded)	Cannot be assessed
	○ Involved
Not applicable	Not involved
Low grade (formerly well to moderately differentiated)	∀ 5
High grade (formerly poorly differentiated)	Distance to invasive carcinoma mm
	Lakanal manain
EXTENT OF INVASION	Lateral margin
Non-invasive neoplasia/high grade dysplasia	Cannot be assessed
Invasion into submucosa	Involved, specify
Invasion into submitcosa Invasion into muscularis propria	
Invasion through the muscularis propria into	
pericolorectal connective tissue	Not involved
Invasion onto the surface of the visceral peritoneum	Distance to neoplasia mm
Invasion into adjacent structure(s)/organ(s), specify	
V	
THINASTIVE CARCINOMA PANETICADAS PE	
INVASIVE CARCINOMA DIMENSIONS	
Cannot be assessed	
Maximum depth of invasion mm	
Cannot be assessed	
Maying up width of invasion	
Maximum width of invasion mm	