___ Grade 3 ___ Grade 4 Grade 5

Surgical Pathology Cancer Case Summary

Protocol web posting date: June 2012 PROSTATE GLAND: Radical Prostatectomy Select a single response unless otherwise indicated. **Procedure** (Note G) Radical prostatectomy ___ Other (specify): ____ ___ Not specified Prostate Size (Note G) Weight: ___ g Size: ___ x ___ x ___ cm Lymph Node Sampling (Note G) ___ No lymph nodes present ___ Pelvic lymph node dissection Histologic Type (Note A) ___ Adenocarcinoma (acinar, not otherwise specified) ___ Prostatic duct adenocarcinoma ___ Mucinous (colloid) adenocarcinoma ___ Signet-ring cell carcinoma ___ Adenosquamous carcinoma ___ Small cell carcinoma ___ Sarcomatoid carcinoma ___ Undifferentiated carcinoma, not otherwise specified ___ Other (specify): _____ **Histologic Grade (Note B)** Gleason Pattern If 3 patterns are present, record the most predominant and second most common patterns; the tertiary pattern should be recorded if higher than the primary and secondary patterns but it is not incorporated into the Gleason score. Not applicable ___ Cannot be determined Primary Pattern ___ Grade 1 ___ Grade 2

⁺ Data elements preceded by this symbol are not required. However, these elements may be clinically important but are not yet validated or regularly used in patient management.

Secondary Pattern Grade 1 Grade 2 Grade 3 Grade 4 Grade 5
Tertiary Pattern Grade 3 Grade 4 Grade 5 Not applicable
Total Gleason Score:
Tumor Quantitation (Note C) Proportion (percentage) of prostate involved by tumor:% and/or Tumor size (dominant nodule, if present): Greatest dimension: mm + Additional dimensions: x mm
Extraprostatic Extension (select all that apply) (Note H) Not identified Present Focal + Specify site(s): Nonfocal (established, extensive) + Specify site(s): Indeterminate
Seminal Vesicle Invasion (invasion of muscular wall required) (select all that apply) (Note D) Not identified Present + Right + Left + Bilateral No seminal vesicle present

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Margins (select all that apply) Cannot be assessed + Benign glands at surgical marg Margins uninvolved by invasive of Margin(s) involved by invasive of Unifocal + Multifocal Apical Bladder neck Anterior Lateral Postero-lateral (neurovasce) Posterior Other(s) (specify):	gin carcinoma arcinoma ular bundle)
Treatment Effect on Carcinomo Not identified Radiation therapy effect presen Hormonal therapy effect presen Other therapy effect(s) present	† †
Lymph-Vascular Invasion Not identified Present Indeterminate	
+ Perineural Invasion (Note E) + Not identified + Present	
Pathologic Staging (pTNM) (Note	K)
TNM Descriptors (required only if approximation of the control of	olicable) (select all that apply)
+ pT2c: Bilateral disease pT3: Extraprostatic extension pT3a: Extraprostatic extension pT3b: Seminal vesicle invasion pT4: Invasion of rectum, levat	half of 1 side or less than one-half of 1 side but not both sides or microscopic invasion of bladder neck or muscles and/or pelvic wall (Note J) ation. Subdivision of pT2 disease is problematic and has not proven to be o

prognostic significance.

Regional Lymph Nodes (pN)
pNX: Cannot be assessed
pN0: No regional lymph node metastasis
pN1: Metastasis in regional lymph node or nodes
No nodes submitted or found
Number of Lymph Nodes Examined
Specify: Number cannot be determined (explain):
Number of Lymph Nodes Involved
Specify: Number cannot be determined (explain):
Diameter of largest lymph node metastasis: (mm)
Didnierer of largest lymph hode metasiasis (min)
Distant Metastasis (pM)
Not applicable
pM1: Distant metastasis
pM1a: Nonregional lymph nodes(s) pM1b: Bone(s)
pM1c: Other site(s) with or without bone disease
Note: When more than 1 site of metastasis is present, the most advanced category is used. pM1c is most advanced.
+ Additional Pathologic Findings (select all that apply)
+ None identified
+ High-grade prostatic intraepithelial neoplasia (PIN) (Note F)
+ Inflammation (specify type):
+ Atypical adenomatous hyperplasia (adenosis)
+ Nodular prostatic hyperplasia
+ Other (specify):
+ Ancillary Studies
+ Specify:
+ Not performed
+ Comment(s)

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