

ASSOCIATION OF DIRECTORS OF ANATOMIC AND SURGICAL PATHOLOGY

Final Anatomic Diagnosis Checklist

ESOPHAGUS CARCINOMA

(Ver 1.1, 11-03)

Accession No.:

Part No(s).

Date:

Patient Name:

ORGAN,

SITE,

OPERATION

Esophagus

upper third
middle third
lower third

esophagectomy

Esophagus and lymph nodes

esophagectomy and
lymphadenectomy

esophagogastrectomy and
lymphadenectomy

Other _____

-Primary Tumor Diagnosis *Required*

Squamous Cell Carcinoma

Spindle Cell (squamous) carcinoma

Adenocarcinoma

Adenosquamous Cell Carcinoma

Basaloid Squamous Cell Carcinoma

Small Cell Carcinoma

Lymphoepithelioma-like Carcinoma

Verrucous Carcinoma

Mucoepidermoid Carcinoma

Adenoid Cystic carcinoma

Other _____

Note: For clinical purposes, a tumor arising within the gastroesophageal junction and gastric cardia that involves less than 2 cm of the esophagus, is considered a primary gastric carcinoma.

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A. Tumor Grade: *Required* **I** **II** **III** **IV**

Note: Squamous cell carcinoma should be graded according to the severity of nuclear anaplasia. Adenocarcinoma should be graded as follows I (>95% of tumor composed of glands), II (50% to 95% of tumor composed of glands), III (5% to 49% of tumor composed of glands); IV (undifferentiated).

B. Size of Tumor: *Required* _____ cm x _____ cm x _____ cm.

C. Depth of Invasion: *Required*

Carcinoma in-situ (high grade dysplasia)

Tumor is limited to mucosa (intramucosal carcinoma)

Tumor invades into submucosa

Tumor invades into submucosa and muscularis propria

Tumor invades through muscularis propria into the adventitia, but does not invade surrounding structures

Tumor invades through the muscularis propria into _____

(specify the structures that the tumor invades)

D. Location of tumor: *Required*

Tumor is located _____ cm. from the tubular esophageal-gastric junction.

Tumor location cannot be determined based upon specimen examination.

Other: _____

Note: For clinical purposes, a tumor arising within the gastroesophageal junction and gastric cardia that involves less than 2 cm of the esophagus, is considered a primary gastric carcinoma.

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Final Anatomic Diagnosis Checklist

ESOPHAGUS CARCINOMA

-Margins of Excision: *Required*

Proximal (esophageal), distal (gastric), and radial (adventitial) margins are free of tumor.

Squamous epithelium is present at the proximal margin (proximal margin is free of Barrett's epithelium)

Proximal (esophageal), distal (gastric), and radial (adventitial) margins are free of tumor, however tumor approaches the proximal/distal/adventitial margin of excision within _____ cm.

Proximal (esophageal), distal (gastric), and radial (adventitial) margins are free of tumor, however Barrett's mucosa without/with low grade/with high grade dysplasia is present at the proximal margin

Proximal margin is free of tumor

Distal margin is free of tumor

Radial margin is free of tumor

Tumor is present at the proximal (esophageal)/distal (gastric)/adventitial margin(s) of excision grossly/microscopically

Other _____

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-Lymph Nodes, *(specify site):^{Required}*

A. Number examined: _____

B. Number positive: _____

C. Comment: _____

(specify extranodal extension into perinodal adipose tissue.)

Definition of regional lymph nodes:

Cervical Esophagus: *scalene, internal jugular, upper and lower cervical, supraclavicular.*

Intrathoracic Esophagus (upper, middle and lower): *upper periesophageal (above azygous vein), subcarinal, lower periesophageal (below the azygous vein)*

Gastroesophageal Junction: *Lower periesophageal (below the azygous vein), diaphragmatic, pericardial, left gastric, celiac.*

Metastasis to nodes outside the limits of these regional nodes are classified as distant metastasis.

-Additional Tumor Features: *Optional*

A. Focal/Multifocal Barrett's mucosa:	Identified	Not Identified
B. Blood vessel invasion:	Identified	Not Identified
C. Lymphatic vessel invasion:	Identified	Not Identified
D. Perineural invasion:	Identified	Not Identified
E. Submucosal extension:	Identified	Not Identified
F. Comment:	_____	

-Additional Findings and Comments: *Optional*

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-Ancillary Studies: *Optional*

Special stains are performed, the results are as follows:

- A. _____
- B. _____
- C. _____
- D. _____

Interpretation _____

Immunohistochemical studies are performed, the results are as follows:

- A. _____
- B. _____
- C. _____
- D. _____

Interpretation _____

ESOPHAGUS CARCINOMA

pTN Stage: *Required*

A. Primary Tumor:

- pTX** Primary tumor cannot be assessed
- pT0** No evidence of primary tumor
- pTis** Carcinoma in-situ (high grade dysplasia)
- pT1** Tumor invades lamina propria or submucosa
- pT2** Tumor invades muscularis propria
- pT3** Tumor invades adventitia (tumor through muscularis propria)
- pT4** Tumor invades adjacent structures

B. Regional Lymph Nodes:

- pNX** Regional lymph nodes cannot be assessed
- pN0** No regional lymph node metastasis
- pN1** Regional lymph node metastasis

C. Distant Metastasis

- pMX** Cannot be assessed
- pM0** No distant metastasis
- pM1** Distant metastasis

References:

1. AJCC Cancer Staging Manual. Lippincott-Raven Press, 6th edition, 2002 (pg. 91-98).