

# NHSBSP HISTOPATHOLOGY REPORTING FORM

Surname	Forenames	Date of birth
Screening number	Hospital number	NHS number
Pathologist	Laboratory	
Date of reporting	Report number	
Side	<input type="checkbox"/> Right <input type="checkbox"/> Left	

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Specimen radiograph seen	<input type="checkbox"/> Yes	<input type="checkbox"/> No
Mammographic abnormality present in specimen	<input type="checkbox"/> Yes	<input type="checkbox"/> No <input type="checkbox"/> Unsure
Histological calcification	<input type="checkbox"/> Absent	<input type="checkbox"/> Benign <input type="checkbox"/> Malignant <input type="checkbox"/> Both
Specimen type	<input type="checkbox"/> Localisation biopsy	<input type="checkbox"/> Open biopsy
	<input type="checkbox"/> Wide local excision	<input type="checkbox"/> Segmental excision
	<input type="checkbox"/> Mastectomy	
Specimen weight	..... g	
Axillary procedure	<input type="checkbox"/> No lymph node procedure	<input type="checkbox"/> Sentinel node biopsy
	<input type="checkbox"/> Axillary node sample	<input type="checkbox"/> Axillary node clearance

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<b>Benign lesion present</b>	<input type="checkbox"/> Yes <input type="checkbox"/> No	<b>Malignant lesion present</b>	<input type="checkbox"/> Yes <input type="checkbox"/> No
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## Benign lesion

<input type="checkbox"/> Complex sclerosing lesion/radial scar	<input type="checkbox"/> Fibroadenoma	<input type="checkbox"/> Multiple papilloma
<input type="checkbox"/> Periductal mastitis/duct ectasia	<input type="checkbox"/> Fibrocystic change	<input type="checkbox"/> Solitary papilloma
<input type="checkbox"/> Sclerosing adenosis	<input type="checkbox"/> Solitary cyst	<input type="checkbox"/> Columnar cell change
<input type="checkbox"/> Other (please specify) .....		

## Epithelial proliferation

<input type="checkbox"/> Not present	<input type="checkbox"/> Present without atypia
<input type="checkbox"/> Present with atypia (ductal)	<input type="checkbox"/> Present with atypia (lobular)

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## Malignant lesion

<i>In situ carcinoma</i>	<input type="checkbox"/> Not present
<input type="checkbox"/> Ductal	
DCIS grade	<input type="checkbox"/> High <input type="checkbox"/> Intermediate <input type="checkbox"/> Low <input type="checkbox"/> Not assessable
DCIS growth pattern(s)	<input type="checkbox"/> Solid <input type="checkbox"/> Cribriform <input type="checkbox"/> Micropapillary <input type="checkbox"/> Papillary
	<input type="checkbox"/> Apocrine <input type="checkbox"/> Flat <input type="checkbox"/> Other (please specify) .....
Size .....	mm (ductal only)
<input type="checkbox"/> Lobular	
<input type="checkbox"/> Paget's disease	
Microinvasion	<input type="checkbox"/> Not present <input type="checkbox"/> Present

*Invasive carcinoma*  Not present

Size Invasive tumour size ..... mm (largest dimension of dominant invasive tumour focus)

Whole tumour size ..... mm (invasive plus surrounding DCIS if DCIS extends > 1 mm beyond invasive)

Type  No special type (ductal NST)

Pure special type (90% purity, specify components present below)

Mixed tumour type (50–90% special type component, specify components present below)

Other malignant tumour (please specify) .....

Specify type component(s) present for pure special type and mixed tumour types:

Tubular/cribriform  Lobular  Mucinous  Medullary like  Ductal/no special type

Other (please specify) .....

Invasive grade  1  2  3  Not assessable

Tumour extent  Localised  Multiple invasive foci

Vascular invasion  Not seen  Present  Possible

Axillary nodes present:  No  Yes Total number ..... Number positive .....

For single node positivity, specify  Metastasis (> 2mm)

Micrometastasis ( $\leq 2$ mm to  $> 0.2$ mm)

Isolated tumour cells ( $\leq 0.2$ mm)

Other nodes present  No  Yes Total number ..... Number positive .....

Site of other nodes .....

Excision margins (for DCIS or invasive carcinoma)

Not assessable  Reaches relevant margin  Does not reach relevant margin

Closest relevant margin ..... mm

Oestrogen receptor status  Positive  Negative ..... Quick (Allred) score

Not performed

*Optional additional fields*

Progesterone receptor status  Positive  Negative ..... Quick (Allred) score

Not performed

HER 2 status  Positive  Negative ..... Score

Not performed

Comments/additional information

**Final histological diagnosis**

Normal  Benign  Malignant