NIH NATIONAL CANCER INSTITUTE BBRB Biorepositories and Biospecimen Research Branch		Biospecimen Pre-Analytical Variables (BPV) Ovary Local Pathology Review Form	
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BPV Case		Form Completed By:	
ID:		Date on Which Form Was Completed:	
Affix BPV Case ID Label		//	

/	
(MM/DD/YYYY)	

Tissue Bank ID: _____

Ovarian Slide Pathology Review

- 1. Slide ID examined by pathologist:
- 2. Parent specimen ID of the sample from which this slide was derived:

3. Organ of origin:

- Select one:
 - O Ovary
 - O Peritoneum
 - O Fallopian tube
 - O Indeterminate
 - \circ Other (specify)

If Other was selected, record other organ of origin:

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Form Comple	eted By:		_ Date Completed: / / /		
4. Histol	ogic type:				
Select	one:				
0	Brenner Tun	nor, malignant type (WHO o	code: 9000/3)		
0	Carcinosarco	oma (Malignant mullerian m	nixed tumor) (WHO code: 8950/3	3)	
0	Clear cell bo	rderline tumor (WHO code:	: 8310/1)		
0	Clear cell ca	cinoma (WHO code: 8310/	3)		
0	Endometrioi	d borderline tumor (WHO o	code: 8380/1)		
0	Endometrioid carcinoma (WHO code: 8380/3)				
0	Granulosa cell tumor (WHO code 8620/1)				
0	Malignant germ cell tumor (WHO code: 9064/3) Specify types and %:				
0	Mixed epithelial borderline tumor (WHO code: 8323/1) Specify types and %:				
0	Mixed epithelial carcinoma (WHO code: 8323/3) Specify types and %:				
0	Mucinous bo	orderline tumor, endocervio	cal (seromuninous) type (WHO co	ode: 8472/1)	
0	Mucinous bo	orderline tumor, intestinal t	type (WHO code: 3472/1)		
0	Mucinous ca	rcinoma (WHO code: 8480,	/3)		
0	Mucinous cy	stadenocarcinoma (WHO c	ode: 8470/3)		
0	Serous bord	erline tumor (WHO code: 84	441/1)		
0	Serous carci	noma (WHO code: 8441/3)			
0	Serous cysta	denocarcinoma (WHO code	e: 8441/3)		
0	Squamous c	ell carcinoma			
0	Transitional	cell borderline carcinoma ('	WHO code: 8120/1)		
0	Transitional	cell carcinoma (WHO code:	8120/3)		
0	Undifferenti	Undifferentiated carcinoma (WHO code: 8020/3)			
0	Other sex co Specify type	rd-stromal tumor (WHO co s and %:	de: 8590/1)		
0	Other Specify oth e	r histologic type or histolo	gic type details:		

Specify histologic type details where applicable:

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5. Greatest tumor dimension on slide:	(mm)	
6. Percent of cross-sectional surface area of enti tumor):%	re slide composed of tumor focus (includes necrotic	
7. Percent of tumor nuclei by cell count of the er compared to all cell nuclei):	ntire slide (number of tumor epithelial cell nuclei as %	
8. Percent of cross-sectional surface area of enti	re slide composed of necrotic tissue:	
Note: BPV case acceptance criteria require necros content of ≥50% tumor nuclei.	sis percentage of <20% of the entire slide AND tumor	
Histologic Profile Quantitative Assessment of Tumor	Should Total 100%.	
 Histologic profile quantitative assessment: Percent viable tumor by surface area (not inclu Percent necrotic tumor by surface area: Percent tumor stroma by surface area: Percent non-cellular component by surface area (i.e., mucin, hemorrhage, blood clot, etc.) If present, describe non-cellular component: 	% %	
Histologic profile total % (should equal 100%):	%	
 10. What histologic grading system was applied? Select One: WHO grading system Record WHO histologic grade: G1: Well differentiated G2: Moderately differentiated G3: Poorly differentiated G4: Undifferentiated GX: Cannot be assessed OR Two-tier grading system Record two-tier histologic grade: Low grade High grade 		

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Tumor Staging per AJCC 7th	n Edition		

11. pT: Pathologic spread primary tumor (AJCC 7th edition):

- Select one:
- O pTX
- o pT0o pT1
 - O pT1a
 - o p11ao p71b
 - 0 pT1c
- 0 pT2
 - o pT2a
 - o pT2b
 - o pT2c
- 0 pT3
 - O pT3a
 - O pT3b
 - O pT3c

12. pN: Pathologic spread lymph nodes (AJCC 7th edition):

- Select one:
- о рNX
- 0 pN0
- 0 pN1
- 13. M: Distant metastases (AJCC 7th edition):
 - Select one:
 - 0 cM0
 - 0 cM1
 - 0 pM1

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Form Completed By:		Date Completed:/	// 1M/DD/YYYY)	
	-	age grouping (FIGO):		
Se	elect One:			
0	Stage 1			
0	Stage 1A			
0	Stage 1B			
0	Stage 1C			
0	Stage 2			
0	Stage 2A			
0	Stage 2B			
0	Stage 2C			
0	Stage 3			
0	Stage 3A			
0	Stage 3B			

- O Stage 3C
- O Stage 4
- O Stage unknown
- 15. Did pathology review of the hematoxylin and eosin slide derived from quality control formalin-fixed paraffin-embedded tumor tissue confirm the histological type to be eligible for BPV study? Select One:
 - O Yes
 - 0 **No**
- 16. This slide meets the microscopic analysis criteria of the BPV project of necrosis percentage of <20% AND tumor content of ≥50% tumor nuclei: Select One:

• Yes

- O Yes
- O No

If No is selected, specify what findings do not meet the microscopic analysis criteria of the BPV project:

17. Pathology review comments:

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Concordance With Diagnostic Pathology Report

- 18. This slide is consistent with the findings of the diagnostic pathology report for this case: Select One:
 - O Yes
 - 0 **No**

If No is selected, specify what findings are not consistent with the diagnostic pathology report:

- 19. Name of local biospecimen source site reviewing pathologist:
- 20. Date of slide review by the pathologist:
- 21. Data entry in local pathology review form was performed by: