

**North, South East and West of Scotland
Cancer Networks**

**Sarcoma
National Managed Clinical Network**



Sarcoma

Bone and Soft Tissue Pathology

National Guideline

Prepared by	Professor Donald Salter
Approved by	SSN, NMSN and SPAN
Issue date	May 2019
Review date	April 2022
Version	4.0 (replaces v3.0 June 2015)

Background

The histological diagnosis of Bone and Soft Tissue Sarcomas within the Scottish Sarcoma Network (SSN) follows the Guidance on Cancer Services and Quality Standard 78 issued by the National Institute for Health and Clinical Excellence (NICE)^{1 and 2}. Please note Gastrointestinal Stromal Tumours (GISTs) are reported by Gastrointestinal Pathologists and are not included in this guideline.

All bone and soft tissue sarcomas will either be first reported or reviewed by specialist bone and/or soft tissue sarcoma pathologist within the SSN. In some instances sarcomas will be dealt with through the Paediatric Pathology services and as such will be reported by specialist paediatric pathologists who participate in the appropriate Paediatric pathology external quality assessment (EQA).

Specialist bone and soft tissue sarcoma pathologists are defined as pathologists who regularly report bone and soft tissue tumours as a significant component of their workload.

Specialist pathologists should participate in EQA, normally through the soft tissue and/or the bone part of the UK National Orthopaedic Pathology EQA scheme, and must be a member of the sarcoma multidisciplinary team.

Regional Specialists

Current histopathologists in Scotland who fulfil these criteria are;

Dr Sinclair Dundas in Aberdeen,

Dr Anca Oniscu and Professor Donald Salter in Edinburgh,

Dr Elaine MacDuff, Dr Fiona Roberts and Dr Amy Young in Glasgow.

Specialist Paediatric Pathologists involved in reporting sarcomas in children include;

Dr Paul Brown in Aberdeen,

Dr Katherine McKenzie in Edinburgh,

Dr Clair Evans, Dr Dawn Penman, Dr Amanda Murphy and Dr Paul French in Glasgow.

Reporting

Histopathological reporting of sarcomas is based on assessment of haematoxylin and eosin stained tissue sections with the additional information being provided by appropriate immunohistochemical staining and fluorescence in-situ hybridization, molecular and cytogenetic studies available locally or within the network.

Pathology reports include where appropriate description and comment on pathological features that are related to management and clinical outcome including histological type, grade, size, depth, stage (based on TNM 8) and completeness of resection and follow the [Royal College of Pathologists' histopathology datasets for bone and soft tissue sarcomas](#).

To ensure consistency of reporting, terminology and grading, development and maintenance of expertise, close working relationships are maintained between the Scottish Sarcoma Network specialist sarcoma pathologists in the three centres (Aberdeen, Edinburgh and Glasgow) where sarcoma surgery is undertaken.

A system of 'double or triple reporting' introduced by the Pathology working group is established. Following primary reporting cases are circulated within the SSN for review and auditing. In situations of diagnostic uncertainty histological sections will be shared with other pathologists in the SSN to allow a consensus diagnosis to inform clinical management.

Paediatric Pathologists reporting sarcomas also have a 'double-reporting' policy.

1. Guidance on Cancer Services *Improving Outcomes for People with Sarcoma. The Manual*. London: National Institute for Health and Clinical Excellence, 2006.
2. Quality Standard 78 (Sarcoma): National Institute for Health and Clinical Excellence, January 2015. <https://www.nice.org.uk/guidance/qs78> accessed 19th December 2018.