Person with cancer—lung cancer immunohistochemistry type, code N[N]

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Person with cancer—lung cancer immunohistochemistry type, code N[N]

Identifying and definitional attributes

Metadata item type: Data Element

Short name: Lung cancer immunohistochemistry

METEOR identifier: 433027

Registration status: Health, Standard 08/05/2014

Definition: The type of <u>immunohistochemistry</u> stains used to assist in the identification of

abnormal cells and hence the diagnosis of a person with cancer, as represented by

a code.

Context: This should be collected for people with cancer where pathology data is available.

 Data Element Concept:
 Person with cancer—immunohistochemistry type

 Value Domain:
 Lung cancer immunohistochemistry type code N[N]

Value domain attributes

Representational attributes

Representation class: Code

Data type: Number

Format: N[N]

Maximum character length: 2

Maximum character length:	2	
	Value	Meaning
Permissible values:	1	Thyroid transcription factor-1 (TTF-1)
	2	Cytokeratin 5 (CK5)
	3	Cytokeratin 6 (CK6)
	4	Cytokeratin 7 (CK7)
	5	Cytokeratin 20 (CK20)
	6	p53-related transcription factor p63 (p63)
	7	Napsin
	88	Other
Supplementary values:	97	Not applicable-immunohistochemical staining not performed
	98	Unknown if imunohistochemistry performed
	99	Immunohistochemistry performed but stains not stated/inadequately described

Collection and usage attributes

Guide for use: Record the code for each immunohistochemical profile obtained to assist in the

diagnosis of lung cancer.

Comments: Thyroid transcription factor-1 and cytokeratin 7 and 20 can be useful, in conjunction

with tumour morphology and clinical and radiological findings, to help to distinguish

between primary and metastatic lung adenocarcinomas.

Cytokeratin 5/6 and p63 immunostaining is used by some pathologists to help to

determine whether a tumour is a squamous or non-squamous type.

The majority (about 75%) of primary lung adenocarcinomas are CK7 positive, CK20 negative and TTF-1 positive and Napsin stains are positive in approximately

80% of of primary lung adenocarcinomas.

Source and reference attributes

Submitting organisation: Cancer Australia

Reference documents: Royal College of Pathologists of Australasia 2010. Lung cancer structured

reporting protocol. 1st Edition (Version 1.0). Surry Hills, NSW: Royal College of

Pathologists of Australasia

Data element attributes

Collection and usage attributes

Guide for use: Record each immunohistochemical profile obtained to assist in the diagnosis of

cancer.

When "other" is recorded, record the immunohistochemistry stain in text in Person

with cancer—immunohistochemistry type, text X[49].

Collection methods: This information should be sought from the patient's medical record and may be

included as a supplementary report in the original pathology report, or a stand-

alone pathology report if a different laboratory performs the test.

Comments: Immunohistochemistry may be helpful in some instances for precise histological

subclassification of the tumour and the exclusion of metastasis.

Source and reference attributes

Submitting organisation: Cancer Australia

Relational attributes

Related metadata

See also Person with cancer—immunohistochemistry type, text X[X(49)]

references: Health, Standard 08/05/2014

Implementation in Data Set Lung cancer (clinical) DSS

Specifications: Health, Superseded 14/05/2015

Conditional obligation: Conditional on immunohistochemistry

testing being completed.

<u>Lung cancer (clinical) NBPDS</u> Health, Standard 14/05/2015

Conditional obligation:

Conditional on immunohistochemistry testing being completed.