

APPENDIX J Communication and Description in Pathology

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DESCRIPTIVE GUIDELINES

The goal of precision in description and communication may be accomplished by the following:

1. Be simple and direct.
2. Be concise and clear.
3. Describe precisely; do not diagnose.
4. Minimize words and maximize information.
5. Describe in present and active tense.
6. Be responsible for your observations.

Prevent obscurity in description and communication by avoiding the following:

1. Long words, long phrases, and lengthy sentences.
2. Obscure words, worn out words, and jargon.
3. Needless words and adjectives.
4. Unnecessary qualifying words and superfluous phrases.
5. Several words (instead of a single *apt* one).
6. Past tense or passive tense.

Specific Examples

1. Do not use superfluous or redundant phrases such as those listed here.

Nodule "is present"	Dark "in appearance"
Lesion "is noted"	Rough "in texture"
Lesion "is seen"	Large "in size"
Ulcer "is identified"	10 grams "in weight"
Red "in color"	Basophilic "in staining"
Round "in shape"	Lateral "in position"
Smooth "in contour"	Three "in number"
Oval "in outline"	Firm "in consistency"
Patchy "in distribution"	Severe "in nature"
Conical "in form"	Mild "in degree"
Noxious "in odor"	Granular "in touch"

2. Avoid words ending in "ish," especially when referring to colors and shapes.

Red, not "reddish"	Round, not "roundish"
Gray, not "grayish"	Square, not "suarish"
White-tan, not "whitish-tan"	Dark, not "darkish"

3. Avoid words ending in "ion."

Infarct, not "infarction"
 Congested, not "shows congestion"

4. Avoid analogies to fruits, vegetables, or other foods.
 - Cordate or spatulate, not "pear-shaped"
 - Serially sectioned, not "bread-loafed"
 - Nodular clusters, not "grapelike clusters"
 - Purple, not "wine-stained"
 - Soft, not "jello-like consistency"
 - Soft-purple, not "currant jelly clot"
 - Soft friable nodules, not "cottage cheese-like material"
5. Avoid beginning sentences as follows:
 - "There is"
 - "Slides show"
 - "Sections of the specimen show"
6. Avoid using several words when one is sufficient.
 - Near, not "adjacent to"
 - Many, not "a large number of"
 - Most, not "a majority of"
 - Mononuclears, not "cells of the mononuclear type"
 - Narrow, not "decreased in width"
 - Paravertebral, not "in a paravertebral position"
 - Foci, not "focal areas"
 - Abundant, not "in considerable quantities"
 - Leg, not "inferior extremity"
 - Mainly, not "for the most part"
 - Near, not "in the vicinity of"
 - Mild, not "of a mild nature"
 - Back, not "posterior aspect of"
 - Top, not "superior aspect of"
 - Halves, not "two equal halves"
 - Changed, not "undergone transformation"
 - Is pale, not "shows pallor"
 - Is chronic, not "a course of long duration"
 - Before, not "prior to"
7. Avoid the following worn-out words; they are often obscure. At best, they have only general meanings that are noninformative.

Basically	Obviously	Really
Actually	Fairly	Just
Definitely	Very	Quite
Primarily	Rather	Idiopathic
Essentially	Marked	Scientific

8. Avoid sentences longer than 20 words; sentences less than 20 words are easier to dictate, write, read, and understand.
9. Avoid discontinuity (jumping around) when communicating a description by employing the following step-by-step procedure:
 - a. Identify the data and specimen(s), including number.
 - b. Measure weight and dimensions.
 - c. Describe overall shape and margins.
 - d. Describe tips and bases if applicable.
 - e. Describe surface appearance, texture, and contour.
 - f. Describe the consistency of the specimen.
 - g. Describe the cut surface(s) of the specimen.
 - h. Describe processing of tissue; for example, what is blocked in which cassette.

A DESCRIPTIVE LEXICON
Specific Specimen
Characteristics

1. *Size*: Measure the weight and dimensions.
2. *Color*: Use primary, secondary, or other common colors

3. *Overall shape* (Figure J-1):

Cuboidal	Circular	Cordate
Rectangular	Spherical	Polypoid
Irregular polygon	Ovoid	Spatulate
Irregular polyhedron	Elliptical	Ribbon
Cylindrical	Lenticular	Concave
Trapezoidal	Oblong	Convex
Conical	Linear	Multifaceted
Triangular	Lanceolate	Stellate
Pyramidal	Fusiform	Filamentous
Tetrahedron	Reniform	Acuminate
Wedge		

4. *Margins* (Figure J-2):

Smooth	Curvilinear	Cleft
Sinuate	Angulated	Interdigitated
Serpiginous	Papillary	Circumscribed
Undulating	Villous	Pushing
Serrate	Lobate	Infiltrating
Dentate	Sharp	Macerated
Semilunar	Indistinct	Sawtooth

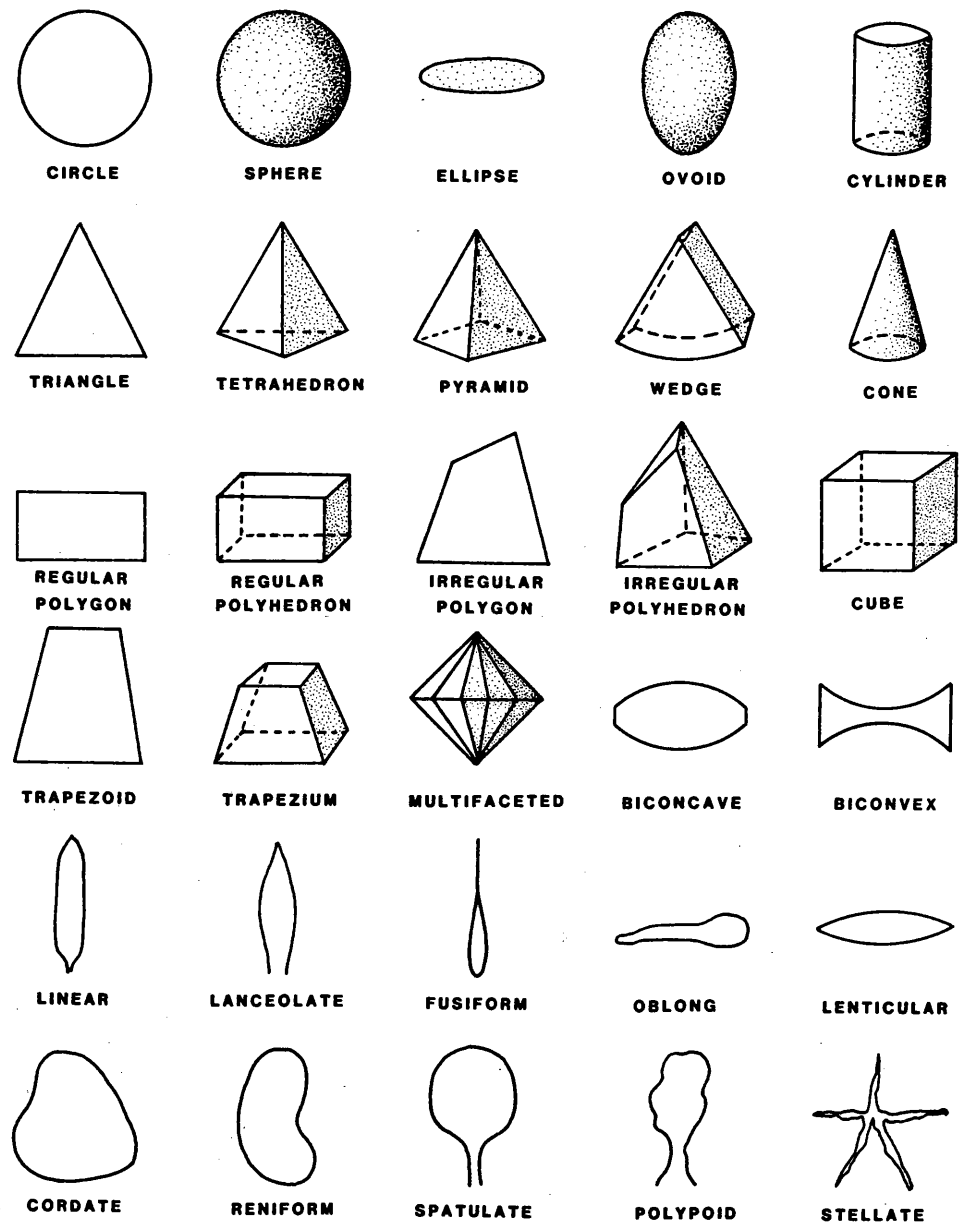


FIGURE J-1
Overall shapes.

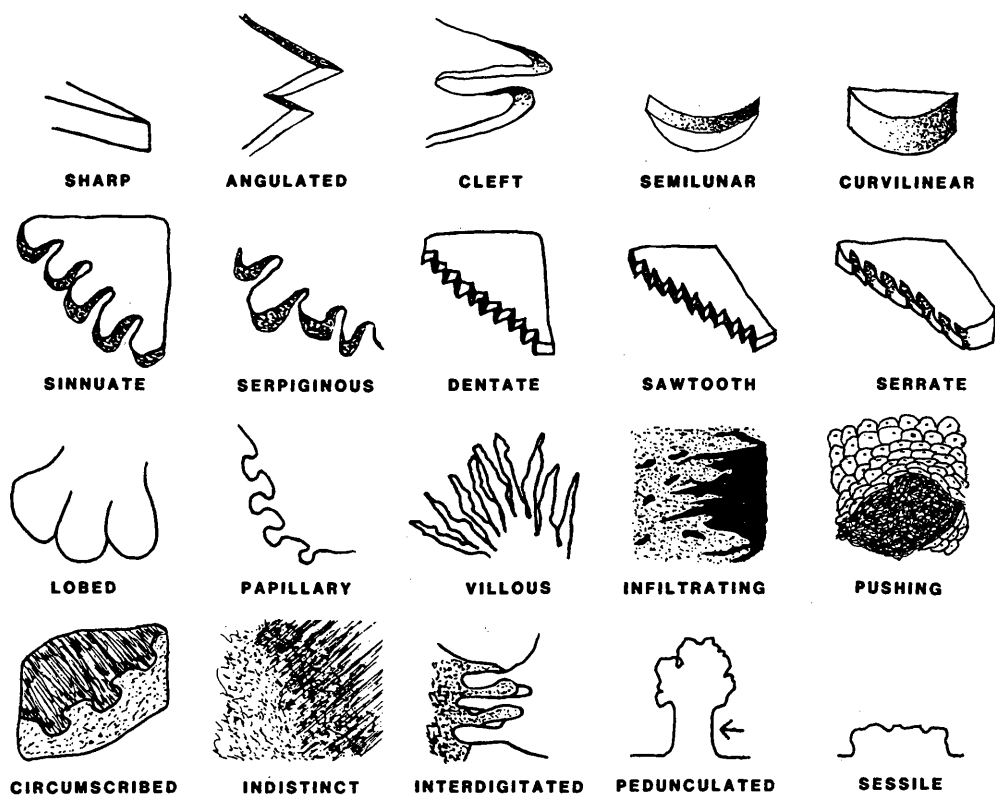


FIGURE J-2
Margins.

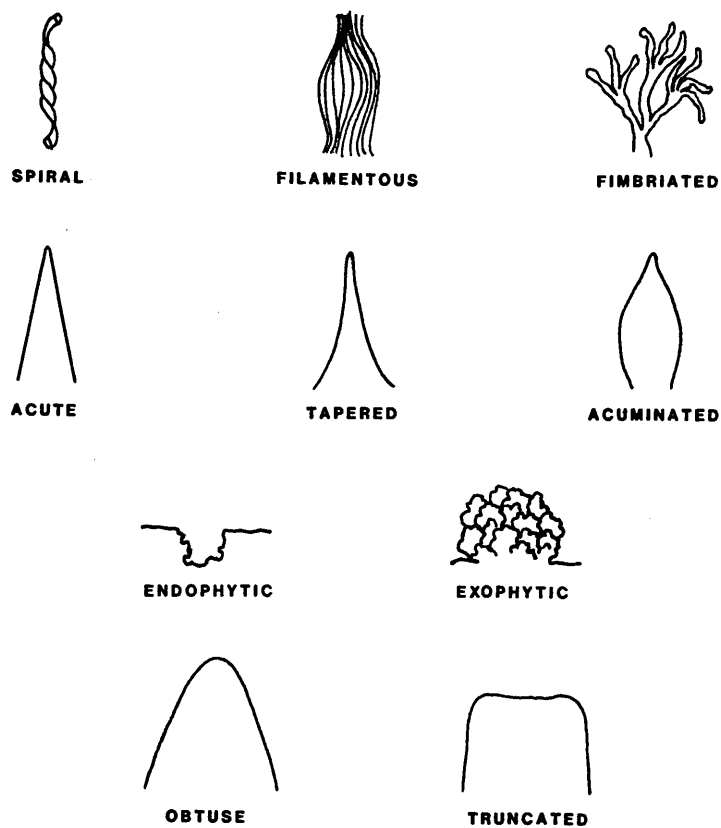


FIGURE J-3
Tips and bases.

5. Tips & Bases (Figure J-3):

Acute	Filamentous	Truncated
Sharp	Threadlike	Avulsed
Tapered	Emarginate	Amputated
Spiral	Angulated	Severed
Obtuse	Fimbriated	Exophytic
Dull	Villous	Endophytic
Rounded	Frondlike	Concave
Acuminate	Pedunculated	Convex
Coiled	Sessile	

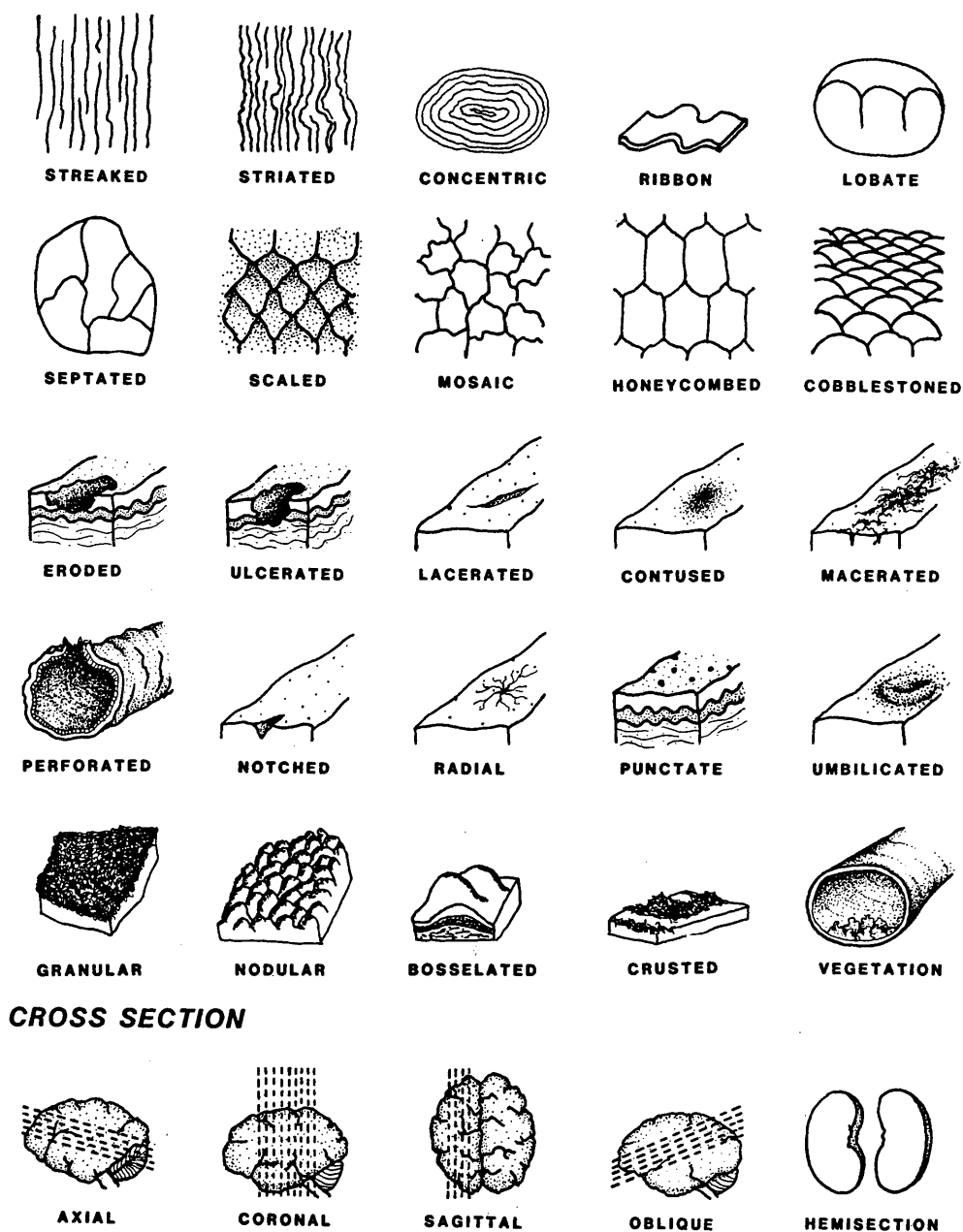


FIGURE J-4
Surface appearance and texture;
cross sections.

6. *Surface appearance* (visual sense) (Figure J-4):

Solid	Mosaic	Scalelike
Cystic	Striated	Punctated
Dull	Septated	Petechial
Glistening	Subdivided	Hemorrhagic
Shiny	Cobweb	Eroded
Opaque	Honeycombed	Ulcerated
Pale	Lobulated	Perforated
Dark	Concentric	Contused
Clear	Homogenous	Lacerated
Transparent	Bulging	Macerated
Translucent	Tense	Drawn
Sparkling	Cobblestone	Notched
Streaked	Arcuate	Grooved
Geographic	Stellate	Radial
Undulating	Wrinkled	Indurated

7. *Surface texture and contour* (visual and touch senses):

Smooth	Granular	Friable
Rough	Nodular	Invaginated
Velvety	Lobulated	Puckered
Moist	Bosselated	Dimpled
Fine	Grooved	Lacerated
Coarse	Hollowed	Crusted
Flat	Bumpy	Macerated
Elevated	Vegetation	Pedunculated
Depressed	Cobblestone	Pseudomembrane
Umbilicated		

8. *Specimen consistency* (sense of touch):

Soft	Gritty	Puttylike
Firm	Elastic	Pulpaceous
Rubbery	Plastic	Grumous
Resilient	Leathery	Moist
Compressible	Flocculant	Cystic
Resistant	Spongy	Solid
Loculated	Friable	Swollen
Hard	Mobile	Viscous
Stony	Fixed	Thick

9. *Specific specimen parts*:

Surface	Parenchyma	Neurovascular bundle
Serosa	Cortex	Lumen

Mucosa	Paracortex	Sinus
Margins	Medulla	Fibrovascular soft tissues
Capsule	Vessels	Fibroadipose soft tissues
Membrane	Nerves	Fibroconnective tissues
Base	Stalk	Adnexae
Apex	Sides	Supporting tissues

Specific Modifiers
of Specimen Characteristics

1. Modifiers of action (powerful verbs, adverbs and adjectives):

Infiltrate	Alternate	Dilate
Invade	Interface	Compressed
Erode	Arborize	Constrict
Slough	Circumscribe	Confines
Efface	Branching	Stenotic
Obscure	Septate	Structure
Fade	Separate	Loculate
Obliterate	Divides	Adhese
Replace	Subdivides	Indent
Distort	Cleave	Pucker
Deform	Attach	Dimple
Perforate	Encroach	Bind
Ulcerate	Fusion	Obstruct
Fissure	Bivalve	Impinge
Contuse	Hemisection	Restrict
Lacerate	Cross-section	Mottle
Fracture	Folded	Project
Amputate	Disappear	Protrude
Avulsed	Disintegrate	Splinter
Severed	Duplication	Mold

2. Modifiers of distribution and position (words and prefixes):

Focal	Cephalad	Central
Patchy	Caudad	Peripheral
Localized	Supra	Lateral
Diffuse	Para	Contralateral
Random	Infra	Ipsilateral
Segmental	Apical	Unilateral
Continuous	Superficial	Bilateral
Zonal	Intermediate	Afferent
Laminar	Deep	Efferent
Top	Basilar	Proximal
Bottom	Epi	Distal

Superior	Sub	Front
Inferior	Side	Back
Contiguous	Border	

3. Modifiers of size and number:

Mild	Many	Prominent
Minimal	Several	Inconspicuous
Moderate	Multiple	Majority
Severe	Predominant	Minority
Tiny	Abundant	Occasional
Minute	Simple	Homogenous
Few	Thick	Mixed
Scanty	Thin	Biphasic
Equal	Narrow	Massive
Unequal	Widened	Extensive
Fragment	Subtotal	Portion

4. Modifiers of other specimen qualities:

Viable (dx)*	Putrid	Plaquelike
Necrotic (dx)	Sweet	Crusted
Infarct (dx)	Frothy	Fresh
Gangrenous (dx)	Wet	Fixed
Purulent (dx)	Moist	Inspissated
Suppurative (dx)	Dry	Intact
Edematous (dx)	Dehydrated	Residual
Excrescence (dx)	Swollen	Preserved
Vegetation (dx)	Tense	Patent
Granuloma (dx)	Loose	Occluded
Normal (dx)	Mobile	Cuff
Unremarkable (dx)	Immobile	Platelike
Uninvolved (dx)	Frayed	Apparent
Sero-sanguinous (dx)	Watery	Alleged
Thrombus (dx)	Knobby	Festoon
Embolus (dx)	Monotonous	Variegated
Fibrinous (dx)	Conspicuous	Remnant
Viscous (dx)	Prominent	Ramify
Serous (dx)		Fragmented

*(dx) A modifier or descriptive term with diagnostic or prognostic implication; should be used after experience with gross pathology is achieved and then used with caution.

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