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CLINICAL INFORMATION

i) Clinical requisition: [Free Text]

IMAGING PROCEDURE DESCRIPTION

- i) Image quality: Adequate Suboptimal Non-diagnostic
- ii) Magnet: 1.5T 3T and Sequences
- iii) Sequences: [Free Text] [\[Insert rectal cancer staging protocol. Should include minimum sequences recommended in User's guide.\]](#)

FINDINGS

1. TUMOR LOCATION AND CHARACTERISTICS

- i) Tumor Location (from anal verge): Low 0- 5.0cm Mid 5.1- 10.0cm High 10.1- 15.0cm
- ii) Anal verge to distal tumor margin: [_____] cm
- iii) Tumor at or below the puborectalis sling: No Yes Uncertain
- iv) Distance of lowest extent of tumor from top of anal sphincter: [_____] cm
- v) Relationship to the anterior peritoneal reflection: above straddles below not able to assess
- vi) Craniocaudal length of the tumor: [_____] cm
- vii) Clock face of tumor: [_____] o'clock to [_____] o'clock
- viii) Polypoid/Annular/Semi-annular:[_____]
- ix) Mucinous: No Yes Uncertain

2. EXTRAMURAL DEPTH OF INVASION AND MR T-CATEGORY

- i) Extramural depth of invasion (Use 0mm for T1 or T2 tumour): [_____] mm
- ii) T category:
 - T1 or T2
 - T2/early T3 (including spiculations)
 - T3
 - T3/possible T4*
 - T4*

* please indicate structures with possible invasion. Specify laterality, sequence and slice#: (see list below)

• Anterior peritoneal reflection (T4a tumor)	• Piriformis	• Pelvic bones(specify)	• Sacrum (Specify Level)
• Puborectalis	• Levator ani	• Obturator	• Uterus
• Bladder	• Ureter(s)	• Prostate	• Vagina
• Urethra			
• Vasculature Involvement of Iliac Vessels	• Other		

- iii) For low rectal tumors (maximum tumor depth at or below the puborectalis sling):
 - Not applicable (tumor above the puborectalis sling)
 - Level 1 (submucosa only, no involvement of internal sphincter)
 - Level 2 (confined to the internal sphincter; no involvement of intersphincteric fat)
 - Level 3 (intersphincteric fat involved)
 - Level 4 (involves external sphincter or beyond)

3. RELATIONSHIP OF THE TUMOR TO MESORECTAL FASCIA (MRF)

i) Shortest distance ___ mm of the definitive tumour border to the MRF is: At [___] o'clock; OR
 Not able to assess; OR Not applicable (tumor only involves upper anterior peritonealized rectum [T4a])

ii) Are there any tumour spiculations closer to the MRF? No Yes*
*If Yes, spiculations are ___ mm from the MRF at ___ o'clock

4. EXTRAMURAL VENOUS INVASION

i) Extramural Venous Invasion (EMVI) : Absent Equivocal Positive*
*If Positive, EMVI is ___ mm from the MRF at ___ o'clock

5. MESORECTAL LYMPH NODES AND TUMOUR DEPOSITS

i) Any suspicious mesorectal lymph nodes/tumor deposits: No Yes*
(suspicious = mixed signal or irregular borders, and/or short axis ≥ 8 mm NB: Size threshold should not be used alone. Assess signal and borders to increase sensitivity):

* If Yes, the most suspicious node/tumor deposit is [above, at, below] the tumor with minimum distance ___ mm from the MRF at ___ o'clock.

6. EXTRAMESORECTAL LYMPH NODES

i) Any suspicious extramesorectal lymph nodes: No Yes*
(suspicious = mixed signal or irregular borders, and/or short axis ≥ 10 mm. NB: Size threshold should not be used alone. Assess signal and borders to increase sensitivity)

* If Yes, location and laterality of suspicious nodes:

<input type="checkbox"/> Int. Iliac <input type="checkbox"/> R <input type="checkbox"/> L	<input type="checkbox"/> Ext. Iliac <input type="checkbox"/> R <input type="checkbox"/> L	<input type="checkbox"/> Common Iliac <input type="checkbox"/> R <input type="checkbox"/> L	<input type="checkbox"/> Obturator <input type="checkbox"/> R <input type="checkbox"/> L	<input type="checkbox"/> Inguinal <input type="checkbox"/> R <input type="checkbox"/> L	<input type="checkbox"/> Other: _____ <input type="checkbox"/> R <input type="checkbox"/> L
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ii) Is the IMA node station in the field of view: No Yes*
*If Yes, are these nodes suspicious No Yes

7. OTHER FINDINGS (COMPLICATIONS, METASTASES, LIMITATIONS)

[Free Text]

IMPRESSIONS

MRI rectal cancer T category is: _____

Maximum EMD of invasion is: _____

Minimum tumor to MRF distance is: _____

Low rectal tumor component: Yes No

Mesorectal nodes/tumor deposits: Negative Suspicious

EMVI: Absent Equivocal Positive

Extramesorectal nodes: Negative Suspicious

Comment: [free text]