# Liver Recipient Explant Pathology Worksheet

**FORM APPROVED: O.M.B. NO. 0915-0157 Expiration Date: 08/31/2023**

Note: These worksheets are provided to function as a guide to what data will be required in the online TIEDI® application. Currently in the worksheet, a red asterisk is displayed by fields that are required, independent of what other data may be provided. Based on data provided through the online TIEDI® application, additional fields that are dependent on responses provided in these required fields may become required as well. However, since those fields are not required in every case, they are not marked with a red asterisk.

## Provider Information

Recipient Center:

## Recipient Information

<table>
<thead>
<tr>
<th>Name:</th>
<th>DOB:</th>
</tr>
</thead>
<tbody>
<tr>
<td>Tx Date:</td>
<td></td>
</tr>
<tr>
<td>SSN:</td>
<td>Gender:</td>
</tr>
</tbody>
</table>

## Clinical Information

**Was evidence of HCC (viable or non-viable tumor) found in the explant?**

- [ ] YES
- [ ] NO

**Number of Tumors:**

- [ ] 1
- [ ] 2
- [ ] 3
- [ ] 4
- [ ] 5
- [ ] >5 Infiltrative

**Tumor #1:**

- Size: [ ] cm
- Location: [ ] Right Lobe
- [ ] Left Lobe
- Tumor Necrosis: [ ] None
- [ ] Incomplete
- [ ] Complete

**Tumor #2:**

- Size: [ ] cm
- Location: [ ] Right Lobe
- [ ] Left Lobe
- Tumor Necrosis: [ ] None
- [ ] Incomplete
- [ ] Complete

**Tumor #3:**

- Size: [ ] cm
- Location: [ ] Right Lobe
- [ ] Left Lobe
- Tumor Necrosis: [ ] None
- [ ] Incomplete
- [ ] Complete

**Tumor #4:**

- Size: [ ] cm
- Location: [ ] Right Lobe
- [ ] Left Lobe
- Tumor Necrosis: [ ] None
- [ ] Incomplete
- [ ] Complete

**Tumor #5:**

- Size: [ ] cm
- Location: [ ] Right Lobe
- [ ] Left Lobe
- Tumor Necrosis: [ ] None
- [ ] Incomplete
- [ ] Complete

**Worst Tumor Differentiation:**

- [ ] Well
- [ ] Moderate
- [ ] Poor
- [ ] Complete Tumor Necrosis

**Vascular Invasion:**

- [ ] None
- [ ] Microvascular
- [ ] Macrovascular

**Lymph Node Involvement:**

- [ ] YES
- [ ] NO

**Other Extrahepatic Spread:**

- [ ] YES
- [ ] NO

**Satellite Lesions:**

- [ ] YES
- [ ] NO

**Pre-transplant treatment for HCC?**

- [ ] YES
- [ ] NO