

MRI pelvis Rectal Cancer RESTAGING (12/2020)

CLINICAL INFORMATION: Rectal Cancer RESTAGING.

Pretreatment Tumor staging: [pretreatment TN stage]

Prior treatment: [induction chemotherapy/CRT/TNT/transanal excision/surveillance etc]

TECHNIQUE: Multiplanar, multisequence imaging of the pelvis.

Magnet strength: []

IV gadolinium contrast: []

COMPARISON: []

TREATED PRIMARY TUMOR CHARACTERISTICS (compare to pre-treatment):

DWI (with associated low ADC) – restricted diffusion and low ADC in tumor or tumor bed

- Present [(if yes, is it regressed from prior?)]
- Absent
- Artifact/equivocal or N/A

MRI-T2W:

- Intermediate signal intensity, no dark T2/scar
- Mixed dark T2/scar and intermediate signal
- Entirely dark T2 signal/scar
- nearly normalized appearance of rectal wall
- T2 bright mucin (cannot distinguish between cellular and acellular mucin)

[free text to describe above findings]

Distance of the inferior margin of treated tumor to the anal verge: [] cm

Distance of inferior margin to the top of the sphincter complex/anorectal junction: [] cm

Relationship of treated tumor to the anterior peritoneal reflection:

[]Above []Straddles []Below

Craniocaudal length: [] cm Pretreatment craniocaudal length: [] cm

Maximal wall thickness: [] cm Previous wall thickness [] cm

[** FOR LOW RECTAL TUMORS - Invasion of anal sphincter complex:

- Absent
- Invades internal sphincter (IS) only
- Invades IS and extends into intersphincteric space (ISS)
- Invades IS + ISS + extends into or through external sphincter (describe)

[IF present: upper anal canal mid anal canal distal anal canal]]

Extramural Vascular Invasion (EMVI):

- No (none evident pre-treatment)
- No, complete regression
- Yes, partial regression
- Yes, present and unchanged from baseline

[Mesorectal Fascia (MRF), for T3 disease only:

Shortest distance of tumor/fibrosis to the Mesorectal Fascia: [] mm (location)

- N/A if tumor above the peritoneal reflection

Tumor deposit, LN or EMVI threatening (≥ 1 mm and ≤ 2 mm) or invading (< 1 mm) the MRF?

- No
- Yes (if yes, note location)]

[For T4 disease, comment on interval change]

LYMPH NODES:

Mesorectal/superior rectal lymph nodes and/or tumor deposits:

- N0 (no visible lymph nodes/deposits or only < 5 mm short axis)
- N+ (any lymph nodes ≥ 5 mm short axis)

Extra-mesorectal lymph nodes: any suspicious?

- No
- Yes [if yes, location and change from prior]

Other: [free text: bones, peritoneal mets, other incidental findings]

IMPRESSION:

Since [date of prior], post treatment primary tumor assessment:

- Complete/near complete response
- Incomplete response (likely residual tumor)
- No response (tumor stable or increased from baseline)

[free text summary of relevant findings/interval change]

Suspicious Mesorectal lymph nodes: No Yes

Suspicious Extramesorectal lymph nodes: No Yes (provide location)