WOMEN'S INTERAGENCY HIV STUDY

QUALITY CONTROL SHEET CENTRAL REVIEW OF SURGICAL SPECIMENS

FOR	M COMPLETED BY:		
DATI	E OF REVIEW:		
ID L	ABEL HERE>	- - -	VISIT #:
VER:	SION DATE: 10/01/00		
A1.	ACCESSION #:		
A2.	HOSPITAL:		
A3.	DATE OF ACCESSION:	//	
A4.	SLIDE #(s):		
A5.	SPECIMEN ADEQUACY	:	
	Satisfactory		1
	Limited, specimen eval	uated	2
B1.	SPECIMEN TYPE (enter of	code from box below):	
	a. SPECIFY (if code	in B1 = 99):	
	01 = adrenal 02 = anus 03 = appendix 04 = bone marrow 05 = brain 06 = breast 07 = cervix 08 = colon 09 = esophagus 10 = fallopian tube 11 = gall bladder 12 = head and neck 13 = heart 14 = kidney 15 = liver	16 = lung 17 = lymph node 18 = mediastinum (NOS) 19 = mouth 20 = ovary 21 = pancreas 22 = parathyroid 23 = pituitary 24 = retroperitoneum (NOS) 25 = rectum 26 = salivary gland 27 = serous body cavity 28 = sinus 29 = skeletal system	30 = skin 31 = small bowel 32 = soft tissue 33 = spinal cord 34 = spleen 35 = stomach 36 = thyroid 37 = tonsils/adenoid 38 = ureter 39 = urinary bladder 40 = uterus 41 = vagina 42 = vulva 99 = other (SPECIFY)

B2.	DIAG	NOSIS CODE (enter codes from b			
		01 = benign tumor (SPECIFY) 02 = carcinoma (NOS)	09 = Kaposi's sarcoma 10 = leukemia (SPECIFY)		
		03 = adenocarcinoma	11 = non-Hodgkin's lymphoma		
		04 = squamous cell	(SPECIFY)		
		05 = small cell carcinoma	12 = reactive process (NOS)		
		06 = large cell carcinoma	13 = typical (SPECIFY)		
		07 = Hodgkin's disease	14 = atypical (SPECIFY)		
		08 = infectious process (SPECIFY)	15 = sarcoma (SPECIFY) 99 = other (SPECIFY)		
	a.	ORIGINAL DIAGNOSIS (enter code):			
		i. SPECIFY (if code in B2	a = 0.1		
		08, 10, 11, 13, 14, 15 or			
		00, 10, 11, 13, 11, 13 01			
	b.	REVIEW DIAGNOSIS (enter code):			
		`			
		i. SPECIFY (if code in B2	b = 01,		
		08, 10, 11, 13, 14, 15 or	99):		
В3.	DOES	REVIEW DIAGNOSIS AGREE	WITH ORIGINAL DIAGNOSIS?		
	2020				
		YES			
		NO	2		
		MENTS (e.g., unusual features):			
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