Supplementary Figure 1 – The PACT-UK template

Supplementary Figure 1a – Tabular format

**PACT-UK**

**PAncratic Cancer reporting Template-UK**

*Imaging reviewed:
Radiologist:
Clinical details:*

If liver metastatic disease complete only part A. If post neoadjuvant treatment, complete only part B. Delete the irrelevant parts accordingly.

<table>
<thead>
<tr>
<th>Summary (optional - key positive findings):</th>
</tr>
</thead>
</table>

### Part A Initial staging

1. **Tumour information**
   - Location (tick all that apply): Head, Body, Tail
   - Maximum diameter: ___ cm / Reference pre-treatment to estimate size
   - Pancreatic duct size: ___ cm

2. **Adjacent organ involvement (including abdominal):**
   - No Yes Specify -

3. **Regional lymphadenopathy:**
   - No Yes Specify -

4. **Metastatic disease:**
   - No Yes Oesophagus, Liver, Lymph nodes -

5. **Predicted tumour type:**
   - Pancreatic Ampulla, Duodenal carcinoma, Other -

6. **Predicted radiological staging:**
   - T N M -

### Part B Venous involvement

<table>
<thead>
<tr>
<th>Venous contact</th>
<th>Contact</th>
<th>Degree</th>
<th>Length (cm)</th>
<th>Narrowing / obstructions</th>
</tr>
</thead>
<tbody>
<tr>
<td>PV</td>
<td>No/Yes</td>
<td>0–50 50–100 100–250 250–380 380–500 500+</td>
<td>N Y Y Y Y</td>
<td></td>
</tr>
<tr>
<td>SMV</td>
<td>No/Yes</td>
<td>0–50 50–100 100–250 250–380 380–500 500+</td>
<td>N Y Y Y Y</td>
<td></td>
</tr>
<tr>
<td>Other veins</td>
<td>No/Yes</td>
<td>0–50 50–100 100–250 250–380 380–500 500+</td>
<td>N Y Y Y Y</td>
<td></td>
</tr>
</tbody>
</table>

**Additional findings:

### Part C Post neoadjuvant treatment

*If answer to 1 is Yes, do not complete the remaining questions*

**Baseline CT data for comparison:**

<table>
<thead>
<tr>
<th>Baseline CT data</th>
<th>Response</th>
<th>Specify</th>
</tr>
</thead>
<tbody>
<tr>
<td>1 New metastasis</td>
<td>No/Yes</td>
<td></td>
</tr>
<tr>
<td>Tumour size</td>
<td>Decreased</td>
<td>Stable</td>
</tr>
<tr>
<td>Venous involvement</td>
<td>Decreased</td>
<td>Stable</td>
</tr>
<tr>
<td>Arterial involvement</td>
<td>Decreased</td>
<td>Stable</td>
</tr>
<tr>
<td>Increased local invasion</td>
<td>No/Yes</td>
<td>Not applicable</td>
</tr>
<tr>
<td>Other findings</td>
<td>No/Yes</td>
<td></td>
</tr>
<tr>
<td>Subjective overall response</td>
<td>Partial</td>
<td>Stable</td>
</tr>
</tbody>
</table>

[BMJ Oncology](https://doi.org/10.1136/bmjonc-2023-000055)
Supplementary Figure 1b – Plain text format

**Pancreatic Cancer Synoptic Report**

**Imaging reviewed:**

**Radiologist:**

**Clinical details:**

*If clear metastatic disease complete only part A. If post neo-adjuvant treatment, complete only part D. Delete the irrelevant parts accordingly, including instructions in italics.*

**Summary (optional - key positive findings):**

**PART A - Initial Staging**

1) **Tumour**
   - Location: Uncinate/head/neck/body/tail
   - Maximum diameter: [.....] mm / isodense precluding ability to estimate size
   - Biliary involvement: Yes stented/ Yes un-stented/ No
   - Pancreatic duct size: [.....] mm

2) **Adjacent organ involvement (including duodenum): No / Yes [.....]**

3) **Regional lymphadenopathy: No / Yes [.....]**

4) **Metastatic disease: No / Indeterminate / Yes**
   - Specify location and volume: [.....]

5) **Predicted tumour type: PDAC / Ampullary / Cholangiocarcinoma / Other [.....]**

6) **Predicted radiological staging T[.....] N[.....] M[.....]**

**PART B - Vessel Involvement**

1) **Variant vascular anatomy (including accessory/replaced RHA/CHA)? No / Yes [.....]**

2) **Venous contact:**
   - PV: No / Yes [.....] [.....]
   - SMV: No / Yes [.....] [.....]
   - PV/SMV total contact length: [.....] mm
   - Other vein contact: No/ Yes [specify vessel.....] [.....] [.....]
   - Presence of venous collaterals if PV/SMV occlusion? No / Yes

3) **Arterial contact:**
   - SMA: No / Yes [.....] [.....]
   - SMA total contact length: [.....] mm
   - CHA: No / Yes [.....] [.....]
   - Coeliac axis: No / Yes [.....] [.....]
   - Jejunal / colic branch: No / Yes [.....]
   - GDA: No / Yes
   - Other arterial contact (including accessory/replaced): No / Yes [specify vessel.....] [.....] [.....]
4) Stenosed coeliac axis/SMA origin: No / Yes [.....]

*For each involved vessel, state degrees of contact in first box (state range 0-90, 90-180, 180-270, 270-360) and presence of narrowing, occlusion or thrombosis in second box.

**PART C – Additional Findings**

**PART D - Post Neo-adjuvant Treatment**

Baseline CT date for comparison – xx/xx/xxxx

*If Answer to 1 is Yes, do not complete the remaining questions*

1) New metastases: No / Indeterminate / Yes  
   Specify:

2) Tumour size: Decreased / Stable / Increased  
   Specify:

3) Venous involvement: Decreased / Stable / Increased / Nil  
   Specify:

4) Arterial involvement: Decreased / Stable / Increased / Nil  
   Specify:

5) Increased local invasion: No / Yes / Not applicable  
   Specify:

6) Other findings: No / Yes  
   Specify:

7) Subjective overall response: Partial / Stable / Progression