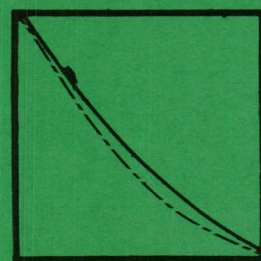
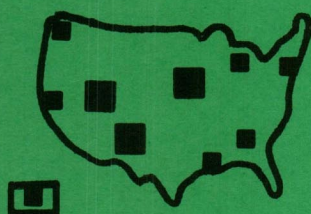


APRIL 1977

SUMMARY STAGING GUIDE

Cancer Surveillance Epidemiology and End Results Reporting

SEER Program



SUMMARY STAGING GUIDE
For
The Cancer Surveillance, Epidemiology and
End Results Reporting (SEER) Program

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SUMMARY STAGING GUIDE

Edited by

Evelyn W. Shambaugh, M.A.
Field Liaison Section, Biometry Branch
National Cancer Institute
Bethesda, Maryland

Mildred A. Weiss, B.A.
UCLA Tumor Registry
University of California at Los Angeles
Los Angeles, California

Lillian M. Axtell, M.A.
End Results Section, Biometry Branch
National Cancer Institute
Bethesda, Maryland

Medical Consultants

Robert F. Ryan, M.D., Chairman
Department of Surgery
Tulane University School of Medicine
New Orleans, Louisiana

Charles E. Platz, M.D.
Department of Pathology, College of Medicine
University of Iowa
Iowa City, Iowa

FOREWARD

For ease in coding, the SEER Program favors the expanded extent of disease schemes. They act as a guide to complete reporting, and they indicate the usual progression of disease patterns. Often, however, comparisons are necessary with historical or other series for which only general staging categories are available. Therefore, this staging guide was developed which summarizes the expanded extent of disease categories into three general staging groups (i.e., localized, regional, and distant). Sometimes a series is so small that only general categories produce enough cases for a meaningful analysis. Many conditions may be grouped together which may seem incongruous, but such groupings are unavoidable if the extent of disease codes are to be summarized into three or four staging categories. Stage categories are based on a combination of clinical observations and operative-pathological evaluations. The priority order is pathologic, operative, clinical.

In order to make the staging groups, insofar as we are able, consistent with categories developed by the American Joint Committee for Cancer Staging and End Results Reporting (AJC) and by the International Union Against Cancer (UICC) and to give consideration to the prognostic significance (survival probability) of various factors, a grouping subdividing the localized, regional, and distant categories was necessary. The subdivisions can always be summarized into the three familiar

stage categories--localized, regional, and distant, or other alternative groupings. For example, for colon and rectum "confined to the mucosa" is coded L₁. These cases can then be included with either the "in situ" or the "localized" stage of disease depending on the rules of the series with which the comparison is being made. For melanoma, localized cases are subdivided into four groups (L₁ through L₄) in order to indicate Clark's levels of invasion. Sites considered to be distant involvement by direct extension are coded D₁ as distinct from D₂ or D₃ which are reserved for metastatic involvement.

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ORGANIZATION OF SUMMARY STAGING GUIDE

I. Summary staging definitions

IN_SITU: Intraepithelial, noninvasive, noninfiltrating

LOCALIZED: Within organ

- a. Invasive cancer confined to the organ
of origin
- b. Intraluminal extension where specified
For example, intraluminal extension to
immediately contiguous segments of the
large bowel is coded L unless the
3
invaded segment has an identifiably
different pattern of lymph node drain-
age.

REGIONAL: Beyond the organ of origin

- a. By direct extension to adjacent organs/tissues
- b. To regional lymph nodes
- c. (a) and (b)

DISTANT: Direct extension or metastasis

- a. Direct continuity to organs other than above
- b. Discontinuous metastasis
- c. To distant lymph nodes

II. Site definitions

The international Classification of Diseases for Oncology (ICD-O) codes are included at the top of the page for each scheme, however, the first digit (1) has been dropped in compliance with the practice of the SEER program.

III. Summary staging guide

A. Site-Specific staging schemes (See pages 8 through 141)

B. Nonspecific staging scheme

In situ
Localized
Regional, direct extension only
Regional, nodes only
Regional, direct extension and regional nodes
Regional, NOS
Non-localized, NOS
Distant
Unstaged

This nonspecific staging scheme applies to the following primary sites:

ICD-O Number	PRIMARY SITE CODE
405	Mucosa of lips, NOS
408	Two or more categories of lip
409	Lips, NOS
415	Junctional zone of tongue
418	Two or more categories of tongue
419	Tongue, NOS
422	Sublingual gland
428	Two or more categories of major salivary glands
429	Major salivary gland, NOS
438	Two or more categories of gum
439	Gum, NOS
455	Palate, NOS
458	Two or more categories of other parts of mouth
459	Oral cavity

490 Pharynx, NOS
 491 Waldeyer's ring, NOS
 498 Neoplasms of lip, oral cavity and pharynx whose
 point of origin cannot be assigned to any one of
 the categories 40 through 48
 499 Ill-defined sites in lip, oral cavity, and pharynx

 508 Junctions of esophagus
 509 Esophagus, NOS

 510 Cardioesophageal junction (excluding cardia of
 stomach)

 523 Meckel's diverticulum
 528 Two or more categories of the small intestine
 529 Small intestine, NOS

 535 Appendix
 538 Two or more categories of colon
 539 Colon, NOS

 548 Other parts of rectum

 568 Two or more categories of gallbladder and
 extrahepatic bile ducts
 569 Biliary tract, NOS

 573 Pancreatic duct
 574 Islets of Langerhans
 578 Two or more categories of pancreas
 579 Pancreas, NOS

 580 Retroperitoneum
 588 Specified parts of peritoneum
 589 Peritoneum, NOS

 590 Intestinal tract
 598 Neoplasms of digestive organs and peritoneum whose
 points of origin cannot be assigned to any one of
 the categories 50- through 58-
 599 Gastrointestinal tract, NOS

 600-605, 608, 609
 Nasal cavities, accessory sinuses, middle ear,
 inner ear

613 Laryngeal cartilage
 618 Two or more categories of larynx
 619 Larynx, NOS

 620 Trachea
 622 Carina (excluding main bronchus)

 630 Parietal pleura
 631 Visceral pleura
 638 Two or more categories of pleura
 639 Pleura, NOS

 640-643, 648, 649
 Thymus and mediastinum (excluding histology 959
 thru 969)

 650, 658, 659
 Other and ill-defined sites within respiratory
 system and intrathoracic organs

 690-691, 699
 Blood, bone marrow (hematopoietic system)

 692 Spleen (excluding histology 959 thru 969, 975)

 693 Reticuloendothelial system, NOS

 710, 712-719
 Connective tissue and other soft tissue

 738 Two or more categories of skin (melanotic
 and nonmelanotic)
 739 Skin, NOS (melanotic and nonmelanotic)

 799 Uterus, NOS

 819 Placenta

 833 Broad ligament
 834 Parametrium
 835 Round ligament
 838 Other uterine adnexa
 839 Uterine adnexa

 848 Two or more categories of other and unspecified
 female genital organs
 849 Female genital tract, NOS

 873 Body of penis
 875 Epididymis
 876 Spermatic cord
 877 Scrotum, NOS
 878 Other parts of male genital organs
 879 Male genital tract, NOS

887 Urachus

 893 Urethra
 894 Paraurethral gland
 898 Two or more categories of other urinary organs
 899 Urinary system, NOS

 900-909
 Eye and lacrimal gland

 910-919
 Brain

 920-923, 928, 929
 Other and unspecified parts of nervous system

 940, 941, 943-946, 948, 949
 Other endocrine glands

 950-955, 958 Other ill-defined sites

 999 Unknown primary site

IV. Definition of Anatomic Sites Within The Oral Cavity
According To The American Joint Committee on Cancer Staging

LIPS, upper and lower, form the upper and lower anterior wall of the oral cavity. They consist of an exposed surface of modified epidermis commonly referred to as the vermillion surface, which extends from commissure to commissure and the mucous membrane lining the inner surface of the lips.

COMMISSURE OF LIP is the point of union of upper and lower lips (corner of mouth).

POSTERIOR ONE-THIRD OF TONGUE (base of tongue) consists of the less mobile portion of the tongue which extends inferiorly from the line of circumvallate papillae to the base of the epiglottis, the pharyngoepiglottic and glossoepiglottic folds (which bound the vallecula).

ANTERIOR TWO-THIRDS OF TONGUE consists of the freely movable portion of the tongue which extends anteriorly from the line of circumvallate papillae to the root of the tongue at the junction of the floor of the mouth. It is composed of four areas: (1) Tip, (2) Lateral borders, (3) Dorsum, and (4) Undersurface (non-villous surface).

FLOOR OF MOUTH consists of a semilunar shaped space over the mylohyoid and hypoglossus muscles, extending from the inner surface of the lower alveolar ridge to the root of the tongue. Its posterior boundary is the base of the anterior pillar of the tonsil. It is divided into two sides by the frenulum of the tongue and contains the ostia of the submaxillary and lingual salivary glands.

LOWER GINGIVA includes the alveolar process of the mandible and its covering mucosa, which extends from the line of attachment of mucosa in the buccal gutter to the line of free mucosa of the floor of the mouth. Posteriorly it extends to the ascending ramus of the mandible (retromolar trigone).

UPPER GINGIVA is the covering mucosa of the upper alveolar ridge, extending from the line of attachment of mucosa in the upper gingival buccal gutter to the junction with the hard palate. Its posterior margin is the upper end of the pterygopalatine arch.

BUCCAL MUCOSA includes all the mucous membrane lining the inner surface of the cheek.

HARD PALATE consists of the semilunar area between the upper alveolar ridges and the mucous membrane covering the palatine process of maxillary palatine bones. It extends from the inner surface of the superior alveolar ridge to the posterior edge of the palatine bone.

SOFT PALATE consists of mucosa covering the oral cavity side of the palatine muscles and extends from the posterior edge of the hard palate to the free border of the soft palate and includes the uvula. Its superior lateral margin is the pterygomandibular raphe. The inferior lateral margin completes the faucial arch (glossopalatine arch) and includes the anterior surface of the anterior tonsillar pillar.

NASOPHARYNX

Posterior Superior Wall (vault) extends from the superior border of the choana to the level of the free border of the soft palate. The lateral limit is the groove between the lateral wall and the base of the skull.

Lateral Wall extends from the base of the skull on each side to the level of the free border of the soft palate. It includes Rosenmuller's fossae (pharyngeal recesses).

OROPHARYNX

Posterior Wall extends from the free borders of the soft palate to the tip of the epiglottis.

Lateral Wall includes the tonsillar pillars, tonsillar fossae, and tonsils.

Anterior Wall consists of the lingual (anterior) surface of the epiglottis, and the pharyngoepiglottic and glossoepiglottic folds which bound the vallecula.

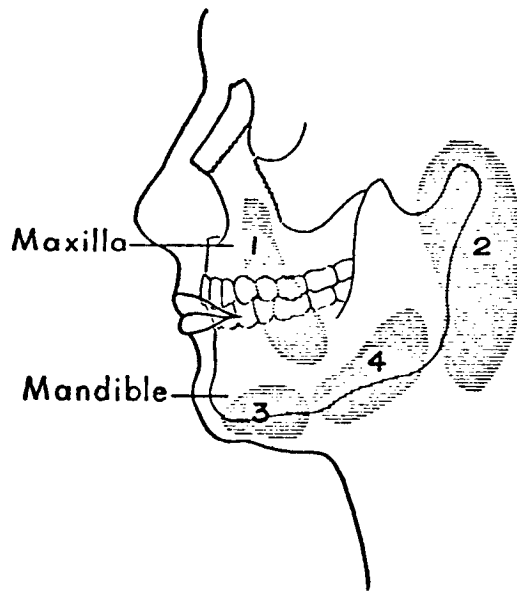
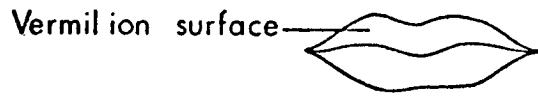
HYPOPHARYNX

Pyriform Sinus extends from the pharyngoepiglottic fold to the upper edge of the esophagus, between the inner surface of the thyroid cartilage and the posterior lateral surface of the arytenoid and cricoid cartilages.

Post-Cricoid Area extends from the posterior surface of the arytenoid cartilages and their connecting folds to the inferior surface of the cricoid. The lateral margin is the anterior part of the pyriform sinus.

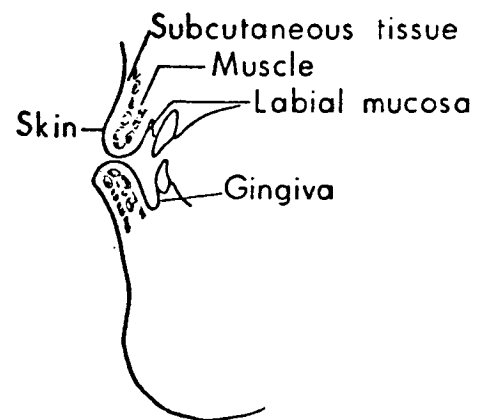
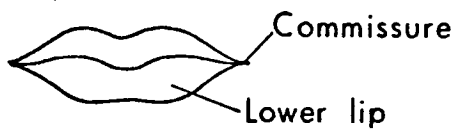
Posterior Pharyngeal Wall extends from the level of the tip of the epiglottis to the inferior margin of the cricoid cartilage, and laterally to the posterior margins of the pyriform sinus.

VERMILION SURFACE OF UPPER LIP



REGIONAL NODES

1. Facial
2. Parotid
3. Submental
4. Submaxillary



IN_SITU; noninvasive

LOCALIZED (Invasion, but not to muscle)

Vermilion surface
Skin of lip
Labial mucosa (inner lip)
Multiple foci but confined to vermillion surface,
labial mucosa and/or skin

Localized, NOS

REGIONAL, Direct Extension

R if:
1
Commissure(s) of lips
Lower lip
Musculature

R if:
2
Buccal mucosa (inner cheek)
Gingiva, upper

R if:
3
Maxilla
Nose

REGIONAL, Lymph Nodes

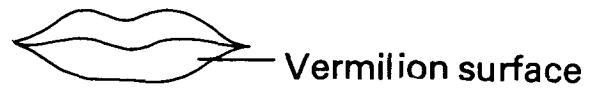
Facial: buccinator
Parotid: infra-auricular, preauricular
Submental
Submandibular (submaxillary)

DISTANT, Direct Extension or Metastasis

DISTANT, Lymph Nodes

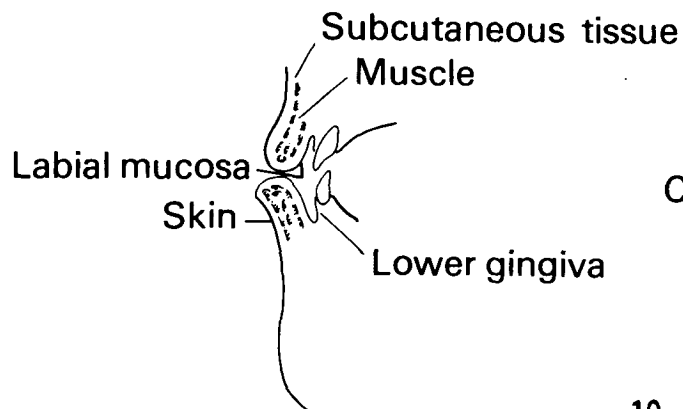
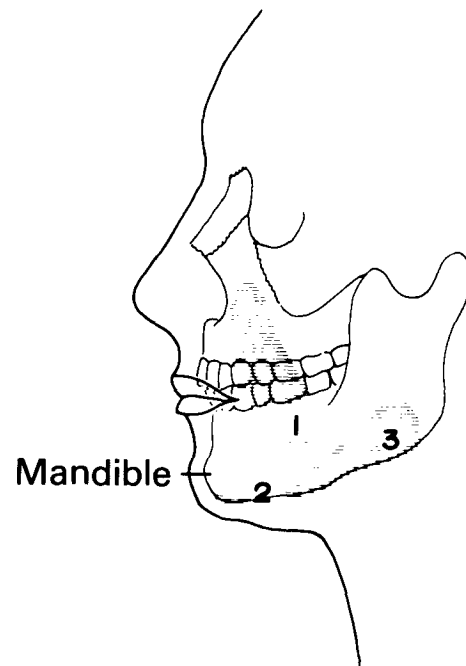
Internal jugular
Upper cervical (including cervical, NOS)
Supraclavicular (transverse cervical)
Other distant nodes

LOWER LIP



REGIONAL NODES

1. Facial
2. Submental
3. Submandibular



IN_SITU; noninvasive

LOCALIZED (Invasion, but not to muscle)

Vermilion surface

Skin of lip

Labial mucosa (inner lip)

Multiple foci but confined to vermillion surface,
labial mucosa and/or skin

Localized, NOS

REGIONAL, Direct Extension

R if:

1

Commissure(s) of lips

Upper lip

Musculature

R if:

2

Buccal mucosa (inner cheek)

Gingiva, lower

R if:

3

Mandible

REGIONAL, Lymph Nodes

Facial: mandibular

Submental

Submandibular (submaxillary)

DISTANT, Direct Extension or Metastasis

DISTANT, Lymph Nodes

Internal jugular

Upper cervical (including cervical, NOS)

Supraclavicular (transverse cervical)

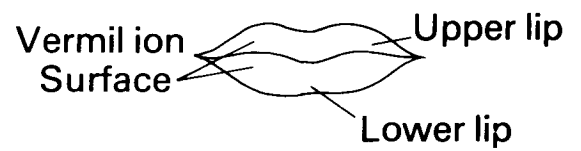
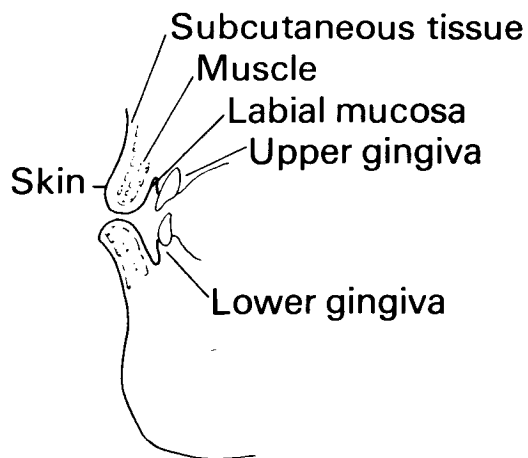
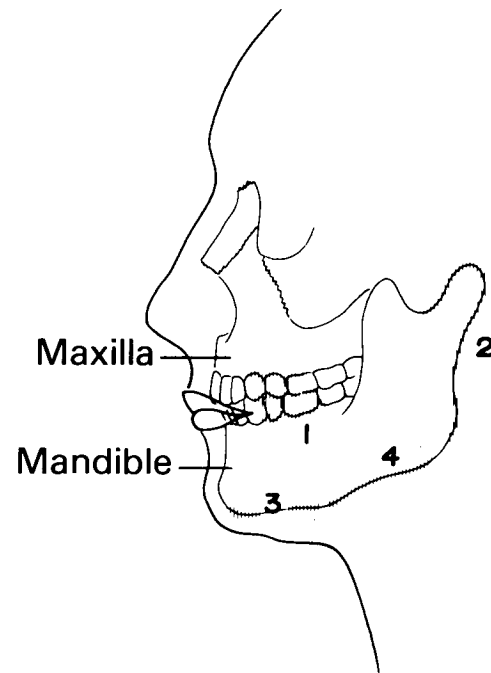
Other distant nodes

COMMISSURE OF LIPS



REGIONAL NODES

1. Facial
2. Parotid
3. Submental
4. Submandibular



IN_SITU; noninvasive

LOCALIZED

Vermilion surface
Skin of lip
Labial mucosa (inner lip)

Localized, NOS

REGIONAL, Direct Extension

R if:
1

Both lips
Musculature

R if:
2

Buccal mucosa (inner cheek)
Gingiva

R if:
3

Maxilla
Mandible
Nose

REGIONAL, Lymph Nodes

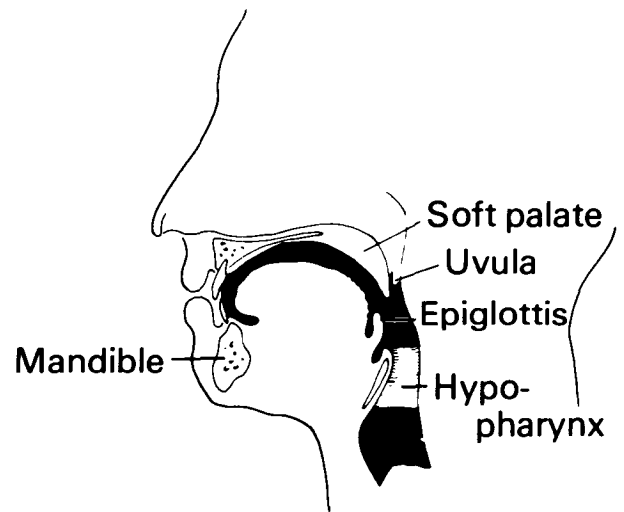
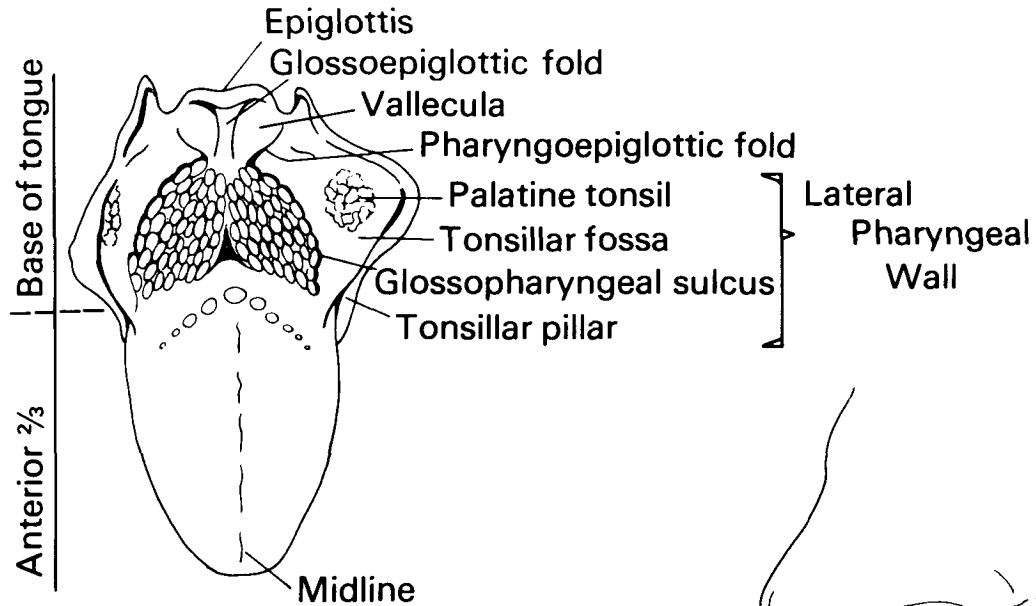
Facial: mandibular
Parotid: infra-auricular, preauricular
Submental
Submandibular (submaxillary)

DISTANT, Direct Extension or Metastasis

DISTANT, Lymph Nodes

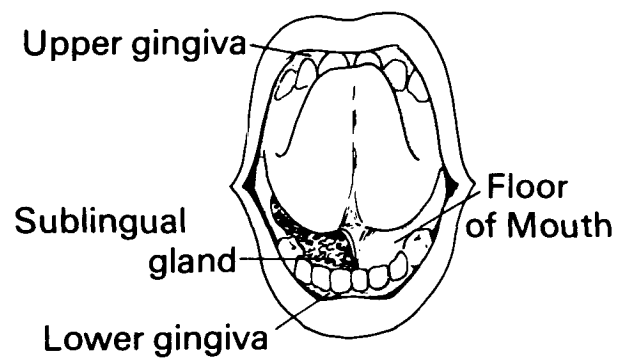
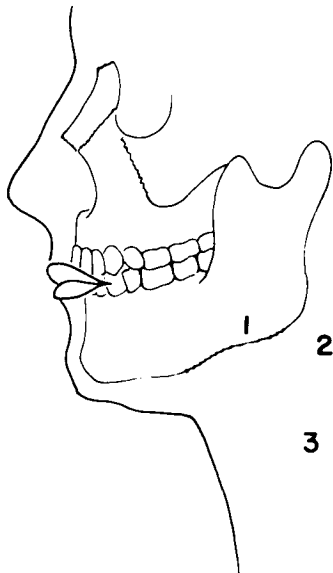
Internal jugular
Upper cervical (including cervical, NOS)
Supraclavicular (transverse cervical)
Other distant nodes

BASE OF TONGUE



REGIONAL NODES

1. Submandibular
2. Upper cervical
3. Internal jugular



IN_SITU; noninvasive

LOCALIZED

L if:

1

Confined to posterior 1/3 of tongue on one side

L if:

2

Midline tumor; tumor has crossed midline

L if:

x

Localized, NOS

REGIONAL, Direct Extension

R if:

1

Anterior 2/3 of tongue
Gingiva, lower
Sublingual gland

R if:

2

Vallecula, including pharyngoepiglottic and glossoepiglottic folds
Epiglottis, lingual (pharyngeal) surface
Floor of mouth
Lateral pharyngeal wall (tonsillar pillars, tonsillar fossae,
tonsils)

REGIONAL, Lymph Nodes

Submandibular (submaxillary)
Internal jugular: subdigastric
Upper cervical (including cervical, NOS)

DISTANT, Direct Extension or Metastasis

D if extension to:

1

Mandible
Larynx
Hypopharynx
Soft palate, including uvula

D if:

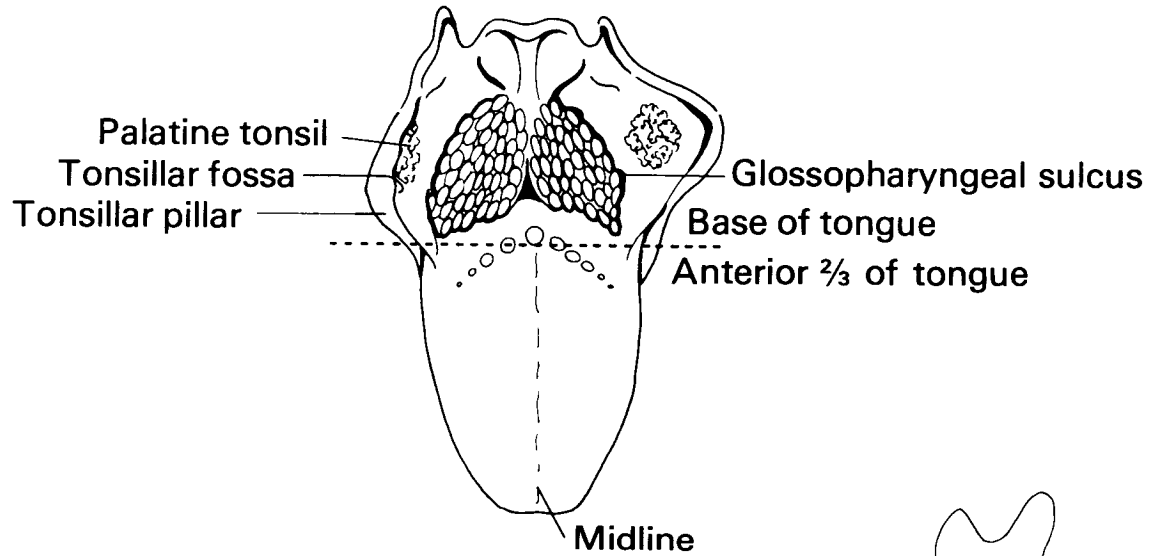
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Other distant involvement

DISTANT, Lymph Nodes

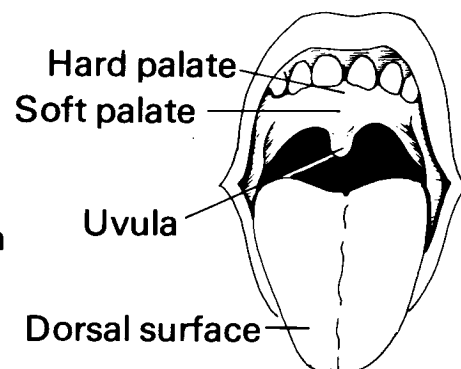
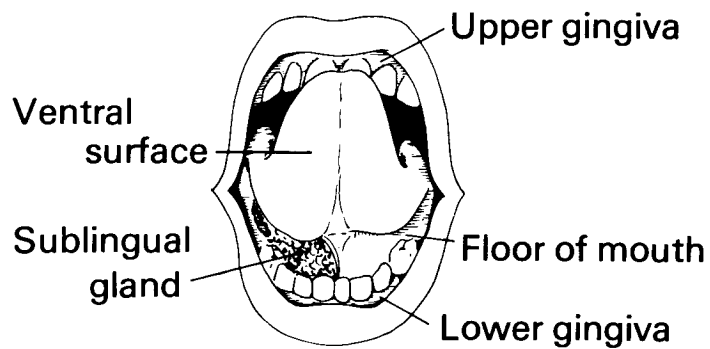
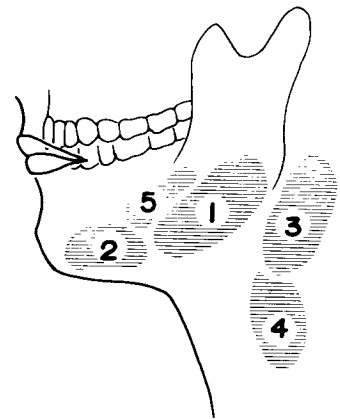
Supraclavicular (transverse cervical)
Other distant nodes

ANTERIOR $\frac{2}{3}$ OF TONGUE



REGIONAL NODES

1. Submandibular
2. Submental
3. Upper cervical
4. Internal jugular
5. Sublingual



IN_SITU; noninvasive

LOCALIZED

L if:

1

Confined to anterior 1/3 of tongue on one side
with or without invasion of musculature

L if:

2

Midline tumor; tumor has crossed midline

L if:

x

Localized, NOS

REGIONAL, Direct Extension

R if:

1

Floor of mouth
Base of tongue
Sublingual gland

R if:

2

Gingiva, lower

R if:

3

Mandible

REGIONAL, Lymph Nodes

Submandibular (submaxillary)

Submental

Internal jugular: subdigastric, supraomohyoid

Upper cervical (including cervical, NOS)

Sublingual

DISTANT, Direct Extension or Metastasis

D if extension to:

1

Lateral pharyngeal wall (tonsillar pillars, tonsillar fossae, tonsils)
Soft palate, including uvula
Maxilla

D if:

2

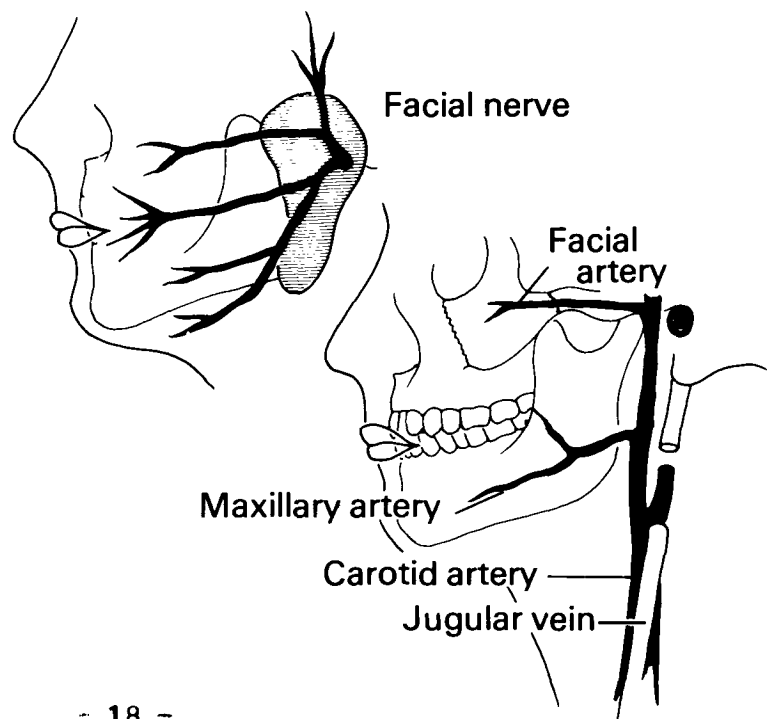
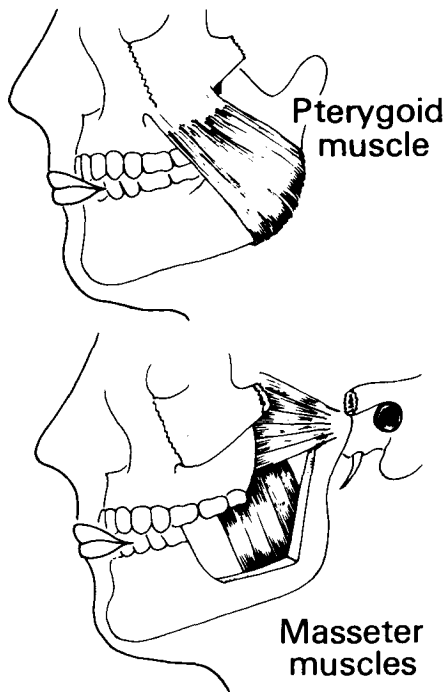
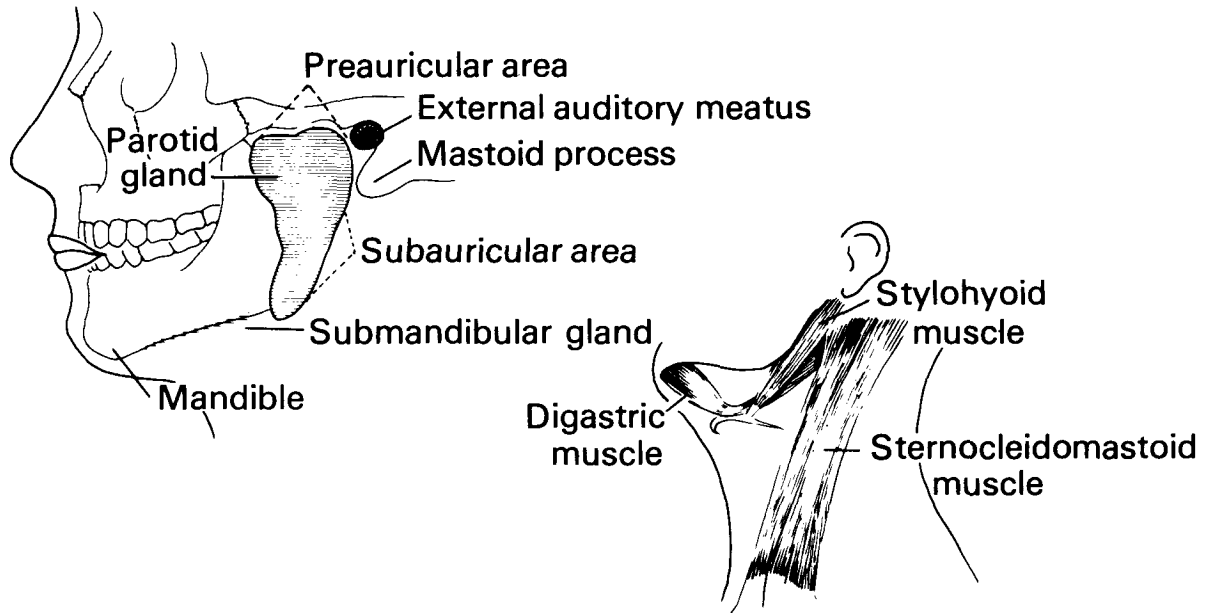
Other distant involvement

DISTANT, Lymph Nodes

Supraclavicular (transverse cervical)

Other distant nodes

PAROTID GLAND



IN SITU; noninvasive

LOCALIZED

Entirely within benign tumor capsule
Substance of parotid gland invaded
Multiple foci but confined to substance of parotid gland

Localized, NOS

REGIONAL, Direct Extension

R if:

1

Periglandular soft tissue
Nerve(s): facial, auricular, spinal accessory
Skeletal muscle(s): digastric, sternocleidomastoid, masseter,
pterygoid, styloid
Periosteum of mandible
Pharyngeal mucosa
Submandibular (submaxillary) gland

R if:

2

Skin

R if:

3

Mandible
Major blood vessel(s): carotid artery, facial artery or vein,
maxillary artery, jugular vein
Mastoid process
External auditory meatus
Skull

REGIONAL, Lymph Nodes

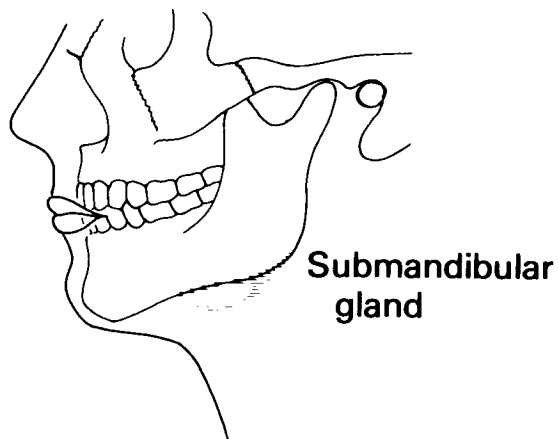
Parotid: intra-parotid, infra-auricular, preauricular
Submandibular (submaxillary)

DISTANT, Direct Extension or Metastasis

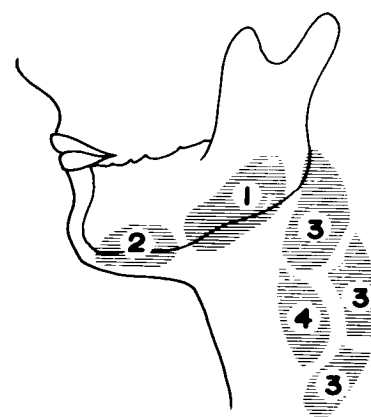
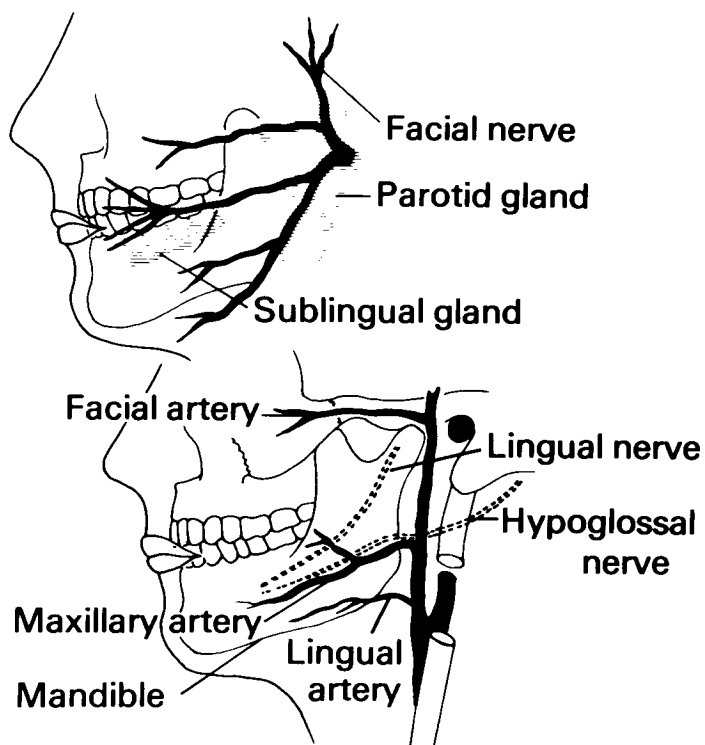
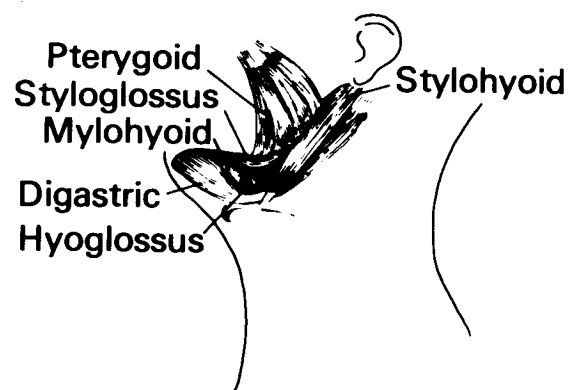
DISTANT, Lymph Nodes

Upper cervical (including cervical, NOS)
Supraclavicular (transverse cervical)
Other distant nodes

SUBMANDIBULAR GLAND



MUSCLES



REGIONAL NODES

1. Submandibular
2. Submental
3. Cervical, NOS
4. Upper jugular

IN SITU; noninvasive

LOCALIZED

Entirely within benign tumor capsule
Substance of parotid gland invaded
Multiple foci but confined to substance of submandibular gland

Localized, NOS

REGIONAL, Direct Extension

R if:

1

Periglandular soft tissue
Skeletal muscle(s): digastric, mylohyoid, stylohyoid, hyoglossus,
styloglossus; pterygoid
Periosteum of mandible
Parotid gland
Sublingual gland

R if:

2

Nerve(s)
Major blood vessel(s): facial artery or vein, maxillary artery
Mandible

REGIONAL, Lymph Nodes

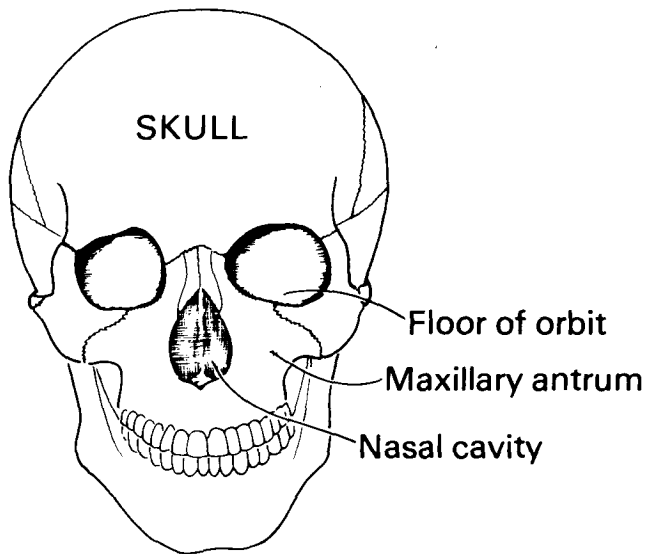
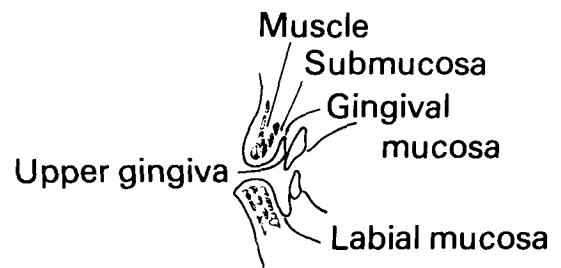
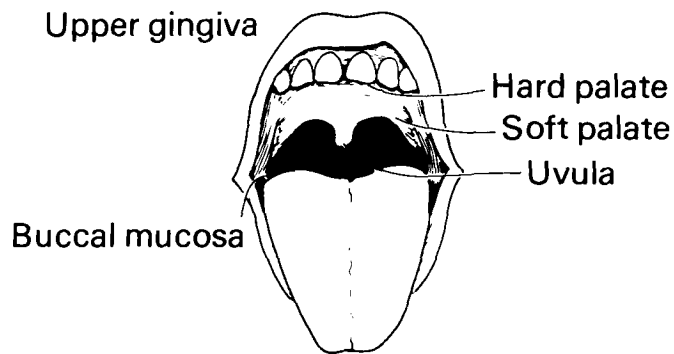
Submental
Submandibular (submaxillary)
Internal jugular (subdigastric)
Upper cervical (including cervical, NOS)

DISTANT, Direct Extension or Metastasis

DISTANT, Lymph Nodes

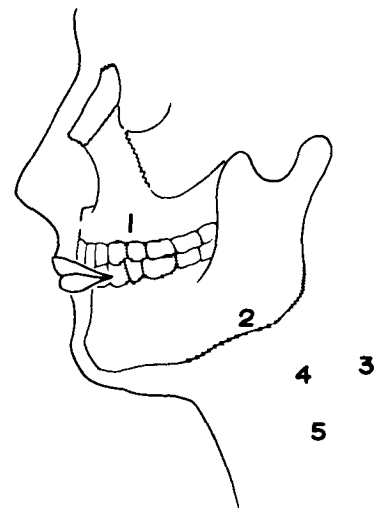
Supraclavicular (transverse cervical)
Other distant nodes

UPPER GUM (GINGIVA)



REGIONAL NODES

1. Facial
2. Submandibular
3. Retropharyngeal
4. Internal jugular
5. Upper cervical



IN_SITU; noninvasive

LOCALIZED

L if:

1

Confined to mucosa

L if invading:

2

Lamina propria (mucoperiosteum)

L if:

x

Localized, NOS

REGIONAL, Direct Extension

R if:

1

Maxilla

Hard and/or soft palate

Buccal mucosa (inner cheek)

Labial mucosa, upper lip

R if:

2

Lateral pharyngeal wall (tonsillar pillars, tonsillar fossae, tonsils)

Soft tissue of face

REGIONAL, Lymph Nodes

Facial: mandibular

Submandibular (submaxillary)

Retropharyngeal

Internal jugular

Upper cervical (including cervical, NOS)

DISTANT, Direct Extension or Metastasis

D if extension to:

1

Skin

Nasal cavity

Maxillary antrum (sinus)

Skull, including floor of orbit

D if:

2

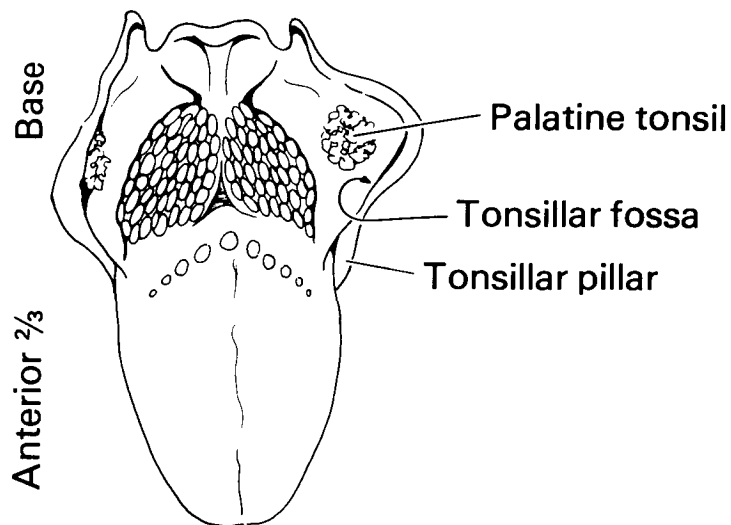
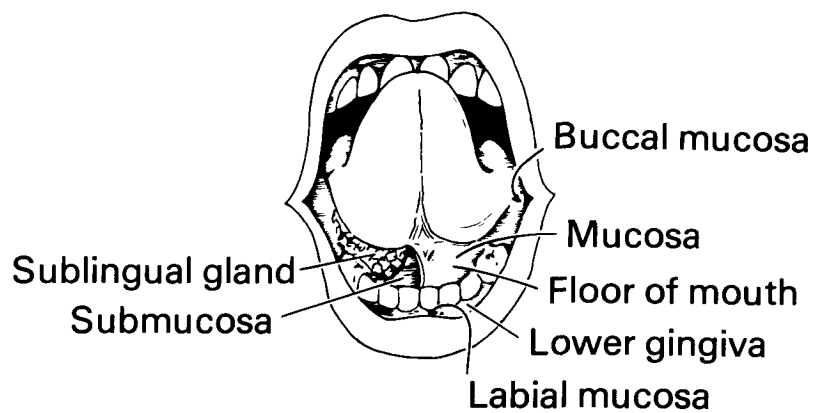
Other distant involvement

DISTANT, Lymph Nodes

Supraclavicular (transverse cervical)

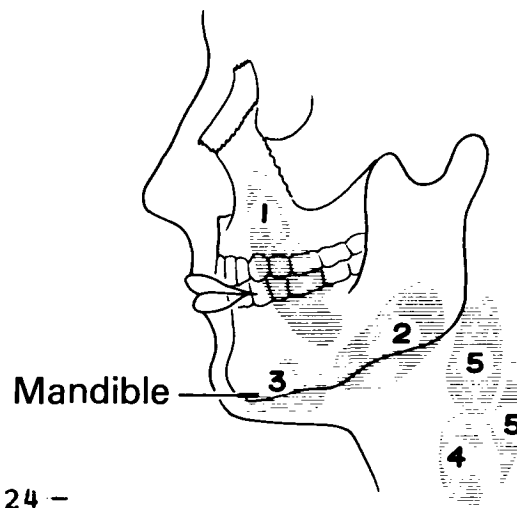
Other distant nodes

LOWER GUM (GINGIVA)



REGIONAL NODES

1. Facial
2. Submandibular
3. Submental
4. Internal jugular
5. Upper cervical



IN_SITU; noninvasive

LOCALIZED

L if:

1

Confined to mucosa

L if invading:

2

Lamina propria (mucoperiosteum)

L if:

x

Localized, NOS

REGIONAL, Direct Extension

R if:

1

Mandible; periosteum of mandible

Floor of mouth

Buccal mucosa (inner cheek)

Labial mucosa, lower lip

Tongue

R if:

2

Lateral pharyngeal wall (tonsillar pillars, tonsillar fossae, tonsils)

Soft palate, including uvula

Soft tissue of face

REGIONAL, Lymph Nodes

Facial: mandibular

Submandibular (submaxillary)

Submental

Internal jugular: subdigastric, supraomohyoid

Upper cervical (including cervical, NOS)

DISTANT, Direct Extension or Metastasis

D if extension to:

1

Skin

Skull

D if:

2

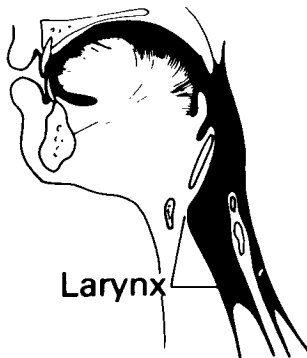
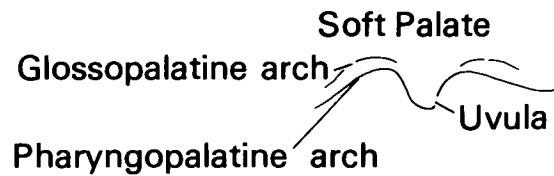
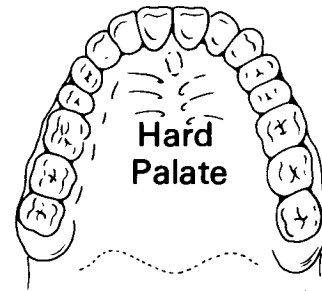
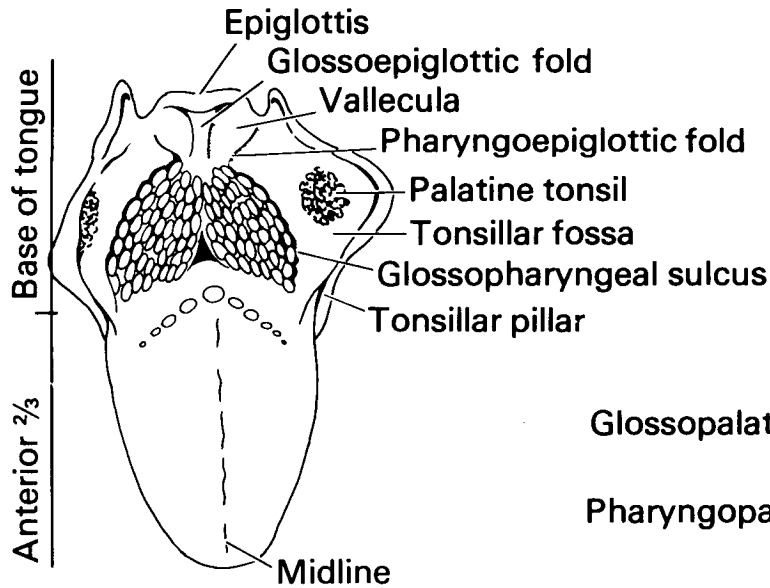
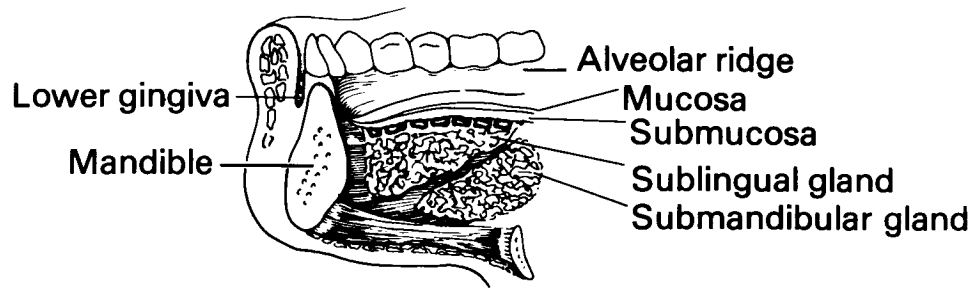
Other distant involvement

DISTANT, Lymph Nodes

Supraclavicular (transverse cervical)

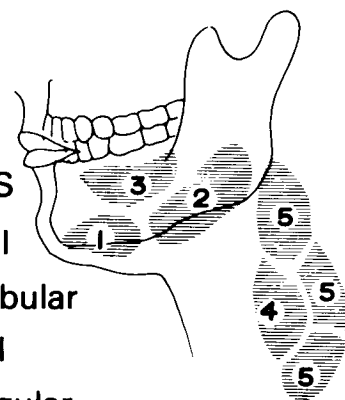
Other distant nodes

FLOOR OF MOUTH



REGIONAL NODES

1. Submental
2. Submandibular
3. Sublingual
4. Internal jugular
5. Cervical, NOS



IN_SITU; noninvasive

LOCALIZED

L if:

1

Confined to mucosa on one side

L if:

2

Confined to one side:

Submucosa invaded

Musculature invaded

L if:

3

Midline tumor; tumor has crossed midline

L if:

x

Localized, NOS

REGIONAL, Direct Extension

R if:

1

Gingiva, lower

Anterior 2/3 of tongue

Submandibular (submaxillary) gland(s)

Sublingual gland

Periosteum of mandible

R if:

2

Mandible

Base of tongue

Vallecula, including pharyngoepiglottic and glossoepiglottic folds

R if:

3

Epiglottis, pharyngeal (lingual) surface

Lateral pharyngeal wall (tonsillar pillars, tonsillar fossae, tonsils)

Underlying soft tissues

R if:

4

Skin

REGIONAL, Lymph Nodes

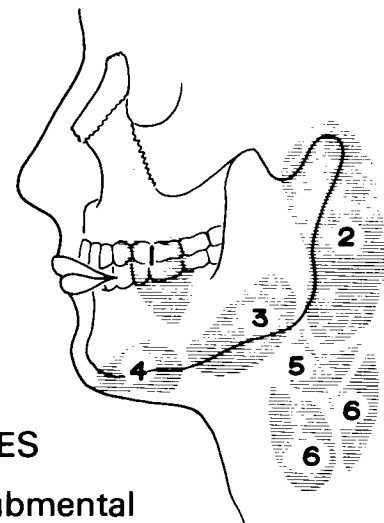
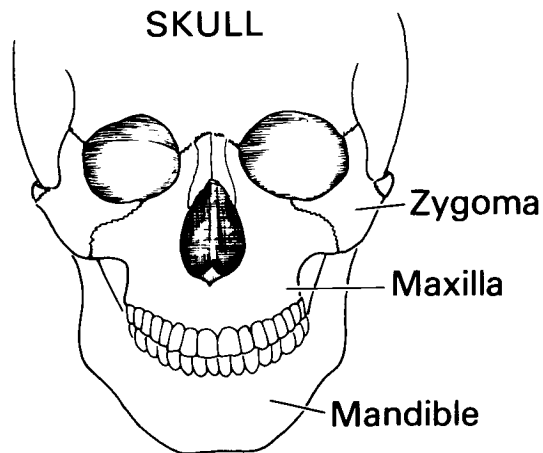
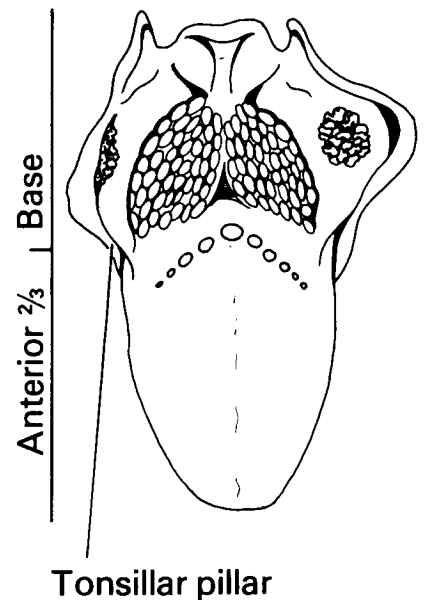
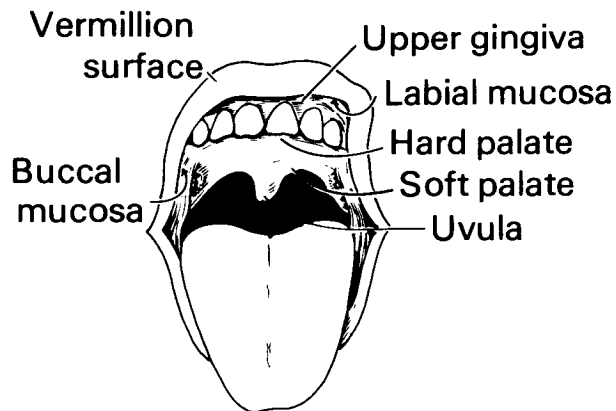
Submandibular (submaxillary)
Submental
Sublingual
Internal jugular: subdigastric, supraomohyoid
Upper cervical (including cervical, NOS)

DISTANT, Direct Extension or Metastasis

DISTANT, Lymph Nodes

Supraclavicular (transverse cervical)
Other distant nodes

CHEEK (BUCCAL) MUCOSA



REGIONAL NODES

- | | |
|------------------|---------------------|
| 1. Facial | 4. Submental |
| 2. Parotid | 5. Internal jugular |
| 3. Submandibular | 6. Upper cervical |

IN SITU; noninvasive

LOCALIZED

L if:

1

Confined to mucosa
Submucosa invaded

Localized, NOS

REGIONAL, Direct Extension

R if:

1

Soft tissue of cheek (including muscle)
Gingiva
Lip(s)
Lateral pharyngeal wall (tonsillar pillars, tonsillar fossae, tonsils)

R if:

2

Skin

REGIONAL, Lymph Nodes

Facial: buccinator, mandibular
Parotid: preauricular, infra-auricular
Submandibular (submaxillary)
Internal jugular: subdigastric
Upper cervical (including cervical, NOS)

DISTANT, Direct Extension or Metastasis

D if extension to:

1

Base or anterior 2/3 of tongue
Hard or soft palate
Bone: maxilla, mandible, skull

D if:

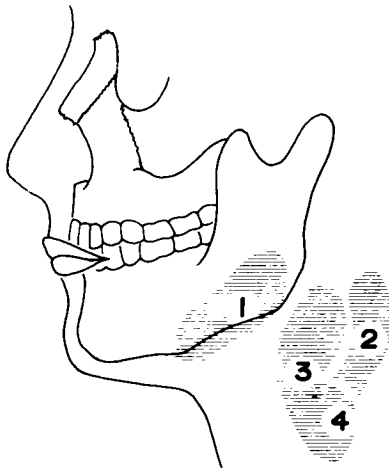
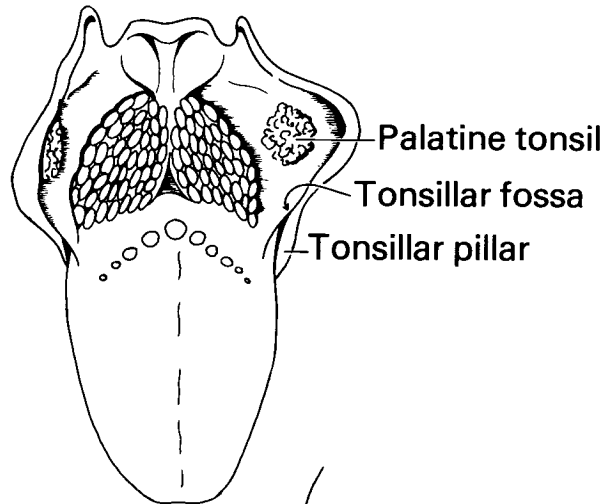
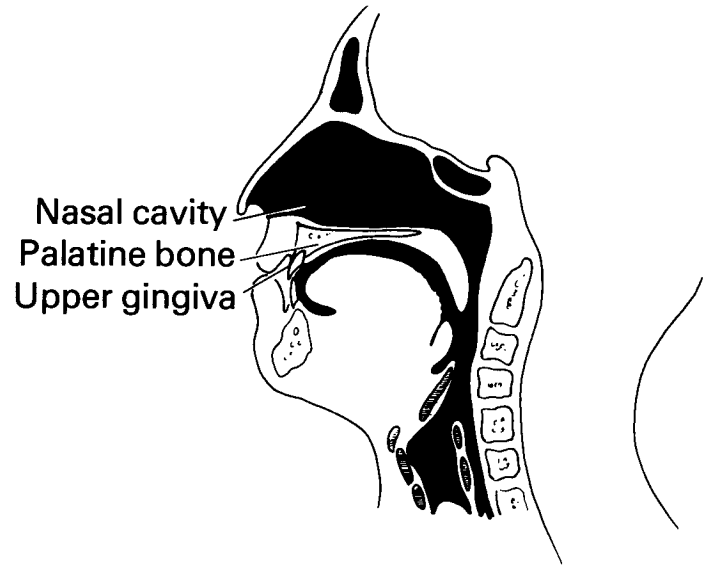
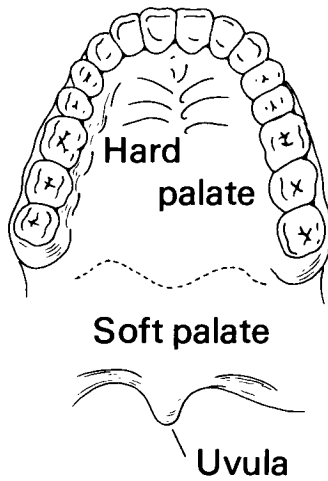
2

Other distant involvement

DISTANT, Lymph Nodes

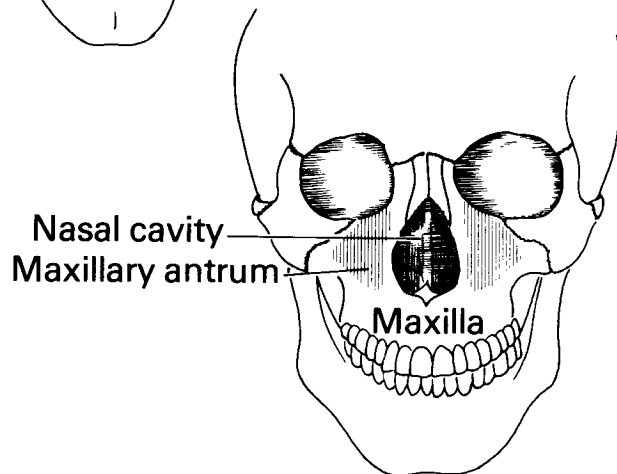
Supraclavicular (transverse cervical)
Other distant nodes

HARD PALATE



REGIONAL NODES

1. Submandibular
2. Retropharyngeal
3. Internal jugular
4. Cervical, NOS



IN_SITU; noninvasive

LOCALIZED

- L if:
1
Confined to mucosa on one side
- L if:
2
Midline tumor; tumor has crossed midline
- L if:
x
Localized, NOS

REGIONAL, Direct Extension

- R if:
1
Soft palate, including uvula
Gingiva, upper
Palatine bone
Maxilla
- R if:
2
Buccal mucosa (inner cheek)

REGIONAL, Lymph Nodes

Submandibular (submaxillary)
Retropharyngeal
Internal jugular: subdigastric
Upper cervical (including cervical, NOS)

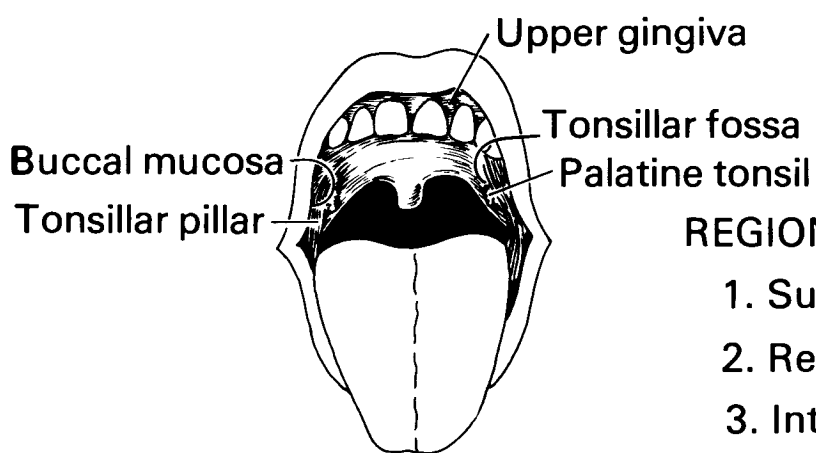
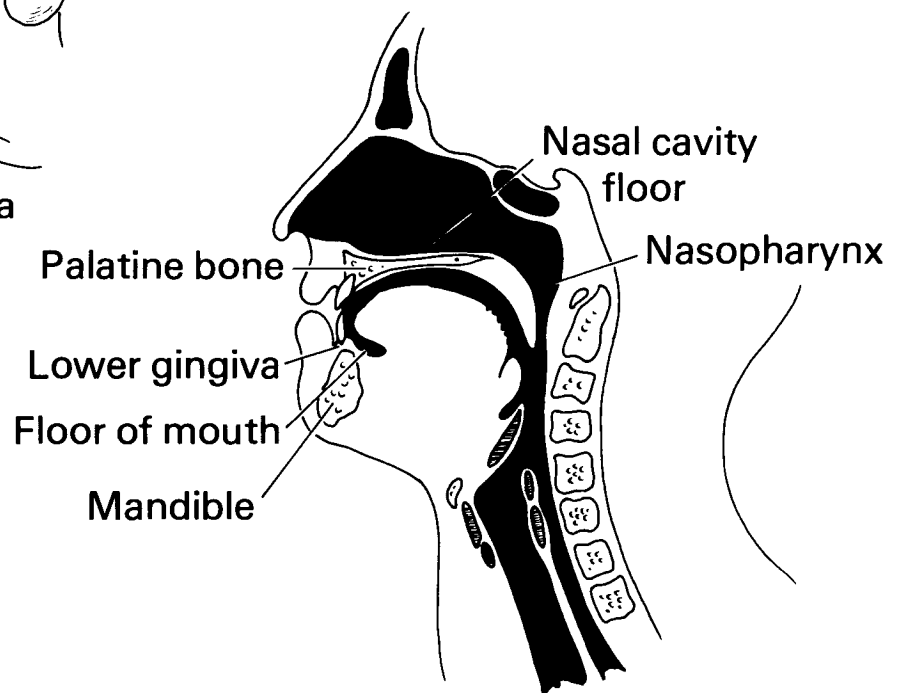
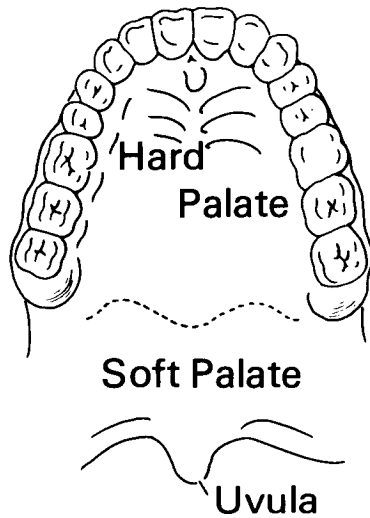
DISTANT, Direct Extension or Metastasis

- D if extension to:
1
Nasal cavity; floor of nose
Maxillary antrum (sinus)
Nasopharynx
- D if:
2
Other distant involvement

DISTANT, Lymph Nodes

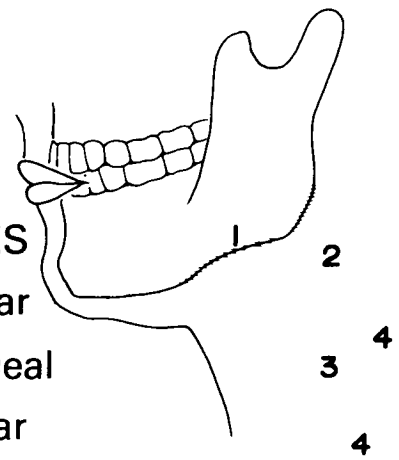
Supraclavicular (transverse cervical)
Other distant nodes

SOFT PALATE AND UVULA



REGIONAL NODES

1. Submandibular
2. Retropharyngeal
3. Internal jugular
4. Upper cervical



IN_SITU; noninvasive

LOCALIZED

L if:

1

Confined to mucosa on one side

L if:

2

Submucosa and/or musculature invaded on one side

L if:

3

Midline tumor; tumor has crossed midline

L if:

x

Localized, NOS

REGIONAL, Direct Extension

R if:

1

Hard palate, mucosa

Gingiva, upper

Lateral pharyngeal wall (tonsillar pillars, tonsillar fossae,
tonsils)

R if:

2

Buccal mucosa (inner cheek)

Nasal cavity floor

REGIONAL, Lymph Nodes

Submandibular (submaxillary)

Retropharyngeal

Internal jugular: subdigastric

Upper cervical (including cervical, NOS)

DISTANT, Direct Extension or Metastasis

D if extension to:

1

Tongue
Nasopharynx
Palatine bone
Maxilla
Maxillary antrum (sinus)
Mandible

D if:

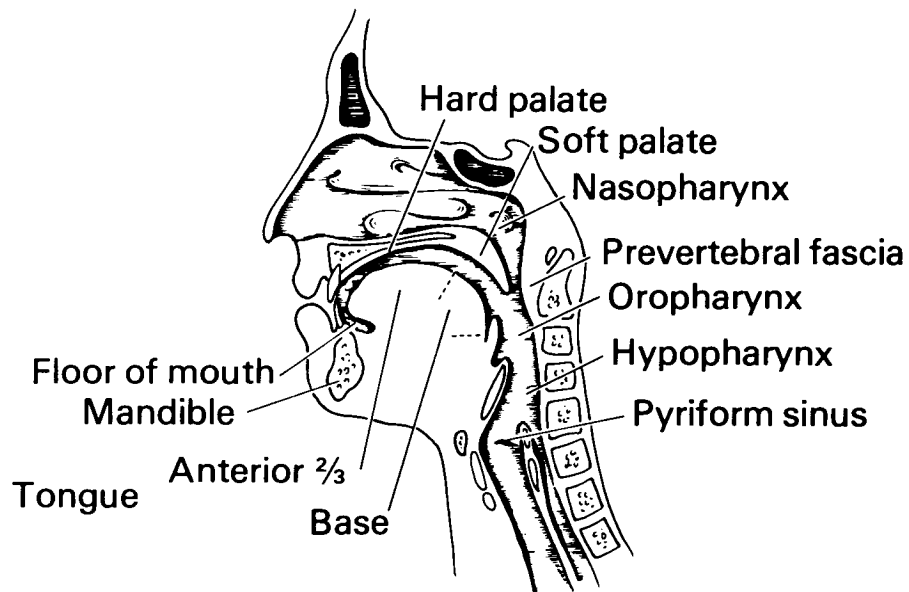
2

Other distant involvement

DISTANT, Lymph Nodes

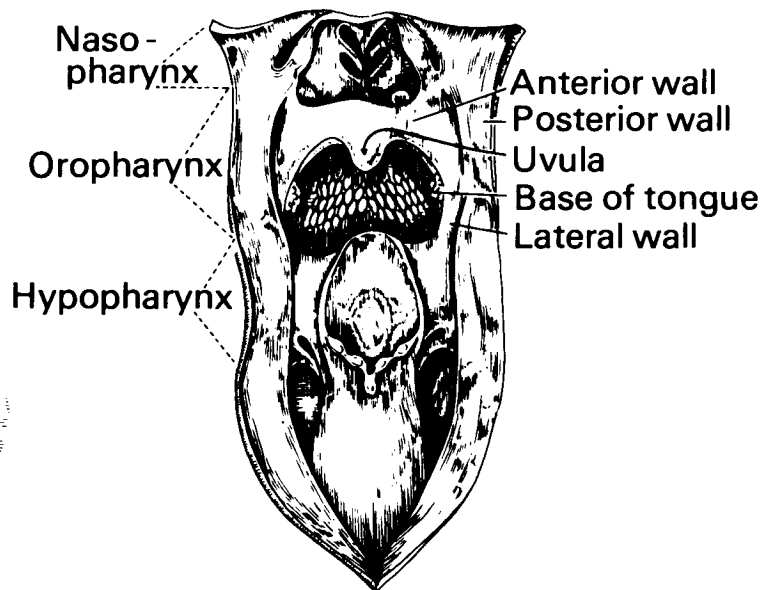
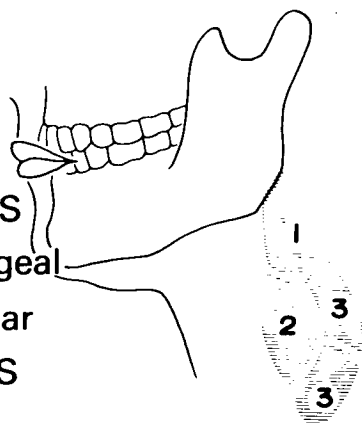
Supraclavicular (transverse cervical)
Other distant nodes

OROPHARYNX



REGIONAL NODES

1. Retropharyngeal
2. Internal jugular
3. Cervical, NOS



PHARYNX (from behind)

IN SITU; noninvasive

LOCALIZED (Tumor is not fixed)

L if confined to:

1

Posterior wall

One lateral wall

Anterior wall (including laryngeal (anterior) surface of epiglottis,
vallecula epiglottis, and junctional region of oropharynx)

L if tumor involves:

2

Lateral wall(s) and posterior (or anterior) wall

L if:

x

Localized, NOS

REGIONAL, Direct Extension

R if:

1

Tumor is not fixed, but extends into:

Soft tissue of neck

Prevertebral fascia

Base of tongue

Larynx

Pyramidal sinus

Hypopharynx, NOS

Soft palate, including uvula

Nasopharynx

Floor of mouth

Gum (gingiva), posterior

Buccal mucosa (inner cheek)

R if:

2

Tumor is described as "fixed to adjacent tissues"

REGIONAL, Lymph Nodes

Retropharyngeal

Internal jugular: subdigastric, supraomohyoid

Upper cervical (including cervical, NOS)

DISTANT, Direct Extension or Metastasis

D if extension to:

1

Both lateral walls involved via soft palate or base of tongue

Anterior 2/3 of tongue

Hard palate

Mandible

Parotid gland

D if:

2

Other distant involvement

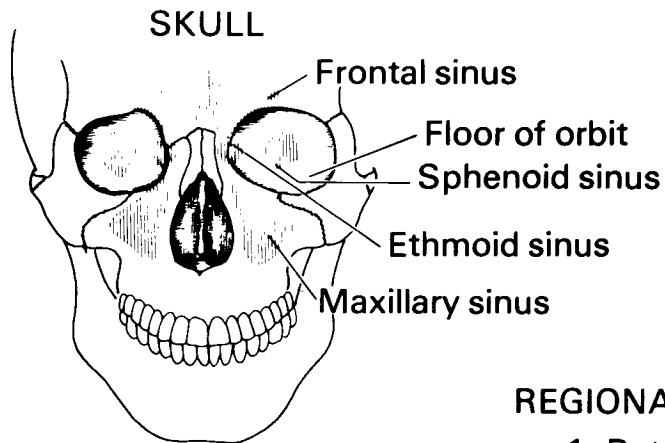
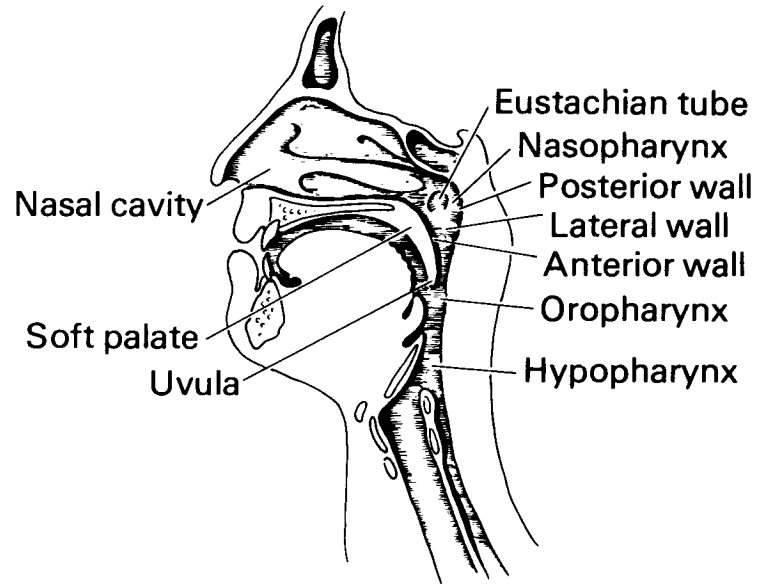
DISTANT, Lymph Nodes

Submandibular

Supraclavicular (transverse cervical)

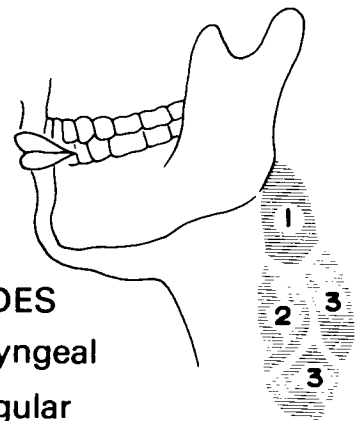
Other distant nodes

NASOPHARYNX



REGIONAL NODES

1. Retropharyngeal
2. Internal jugular
3. Cervical, NOS



IN_SITU; noninvasive

LOCALIZED (Tumor is not fixed)

L if confined to:

1

Posterior superior wall (vault)

One lateral wall (including aryepiglottic fold, NOS)

L if tumor involves:

2

Posterior superior wall (vault) and lateral wall(s)

Lateral wall into eustachian tube/ middle ear

L if:

x

Localized, NOS

REGIONAL, Direct Extension

R if:

1

Tumor is not fixed, but extends into:

Oropharynx; nasal cavity

Skull, including floor of orbit

Pterygopalatine fossa

Soft palate, including uvula

R if:

2

Tumor is described as "fixed to adjacent tissues"

REGIONAL, Lymph Nodes

Retropharyngeal

Internal jugular

Upper cervical (including cervical, NOS)

DISTANT, Direct Extension or Metastasis

D if extension to:

1

Brain, including cranial nerves

Accessory sinus: maxillary, sphenoid, ethmoid, frontal

Hard palate

Hypopharynx

Soft tissues of neck

D if:

2

Other distant involvement

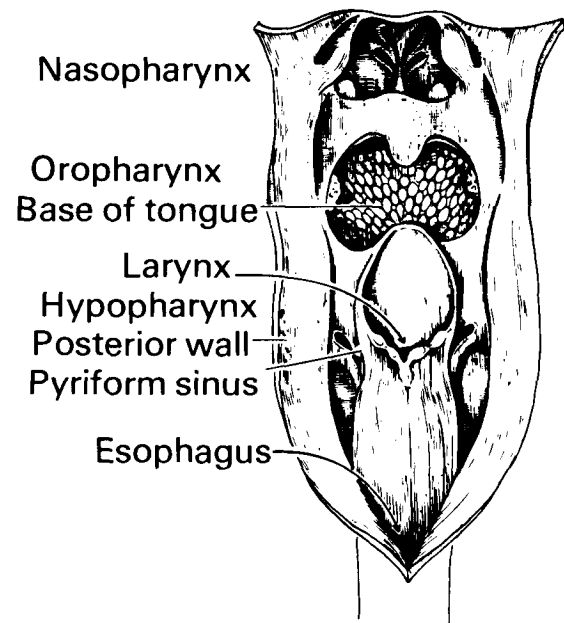
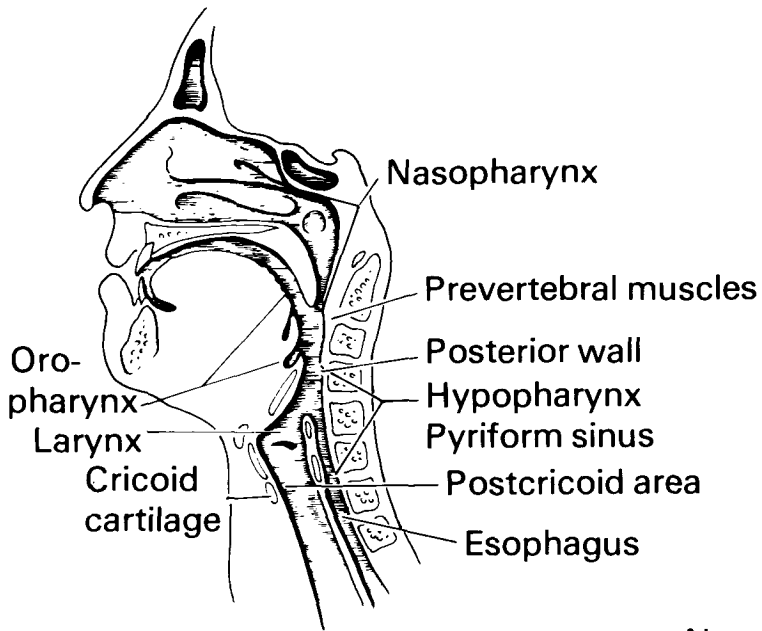
DISTANT, Lymph Nodes

Supraclavicular (transverse cervical)

Submandibular

Other distant nodes

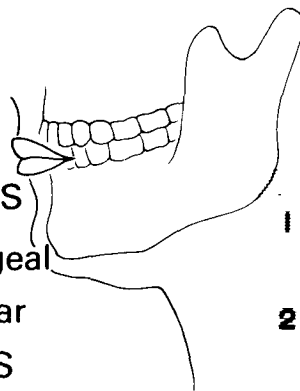
HYPOPHARYNX



PHARYNX (posterior view)

REGIONAL NODES

1. Retropharyngeal
2. Internal jugular
3. Cervical, NOS



IN_SITU; noninvasive

LOCALIZED (Tumor is not fixed)

L if confined to:

1

Pyriiform sinus
Postericoid area
Posterior pharyngeal wall

L if tumor involves:

2

Pyriiform sinus and postericoid area
Pyriiform sinus and posterior pharyngeal wall
Postericoid area and posterior pharyngeal wall
Pyriiform sinus, postericoid area and posterior pharyngeal wall

L if:

x

Localized, NOS

REGIONAL, Direct Extension

P if:

1

Tumor is not fixed, but extends into:
Oropharynx; larynx
Soft tissues of neck
Prevertebral muscle(s)
Upper esophagus

R if:

2

Tumor is described as "fixed to adjacent tissues"

REGIONAL, Lymph Nodes

Retropharyngeal
Internal jugular: subdigastric, supraomohyoid
Upper cervical (including cervical, NOS)

DISTANT, Direct Extension or Metastasis

D if extension to:

1

Nasopharynx
Base of tongue
Floor of mouth

D if:

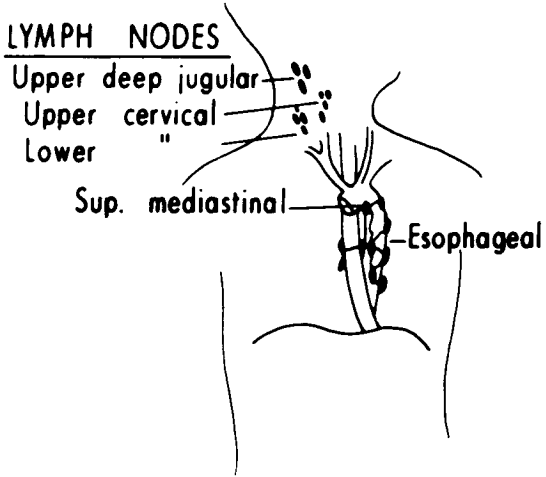
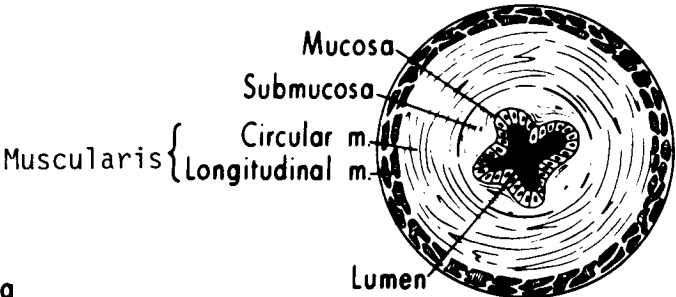
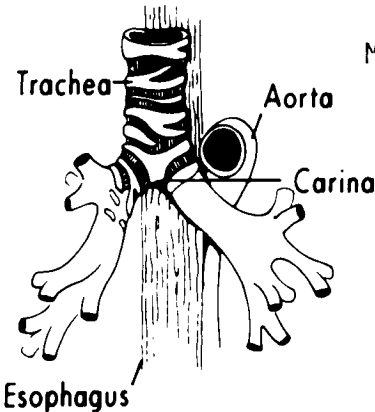
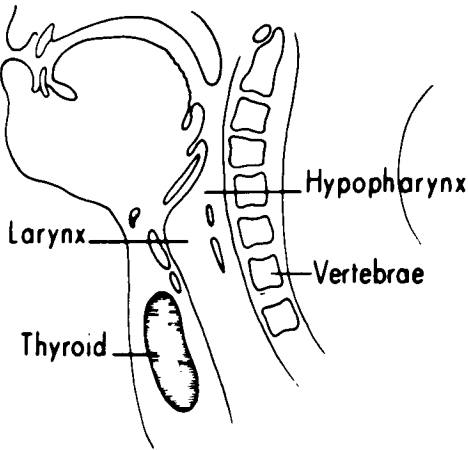
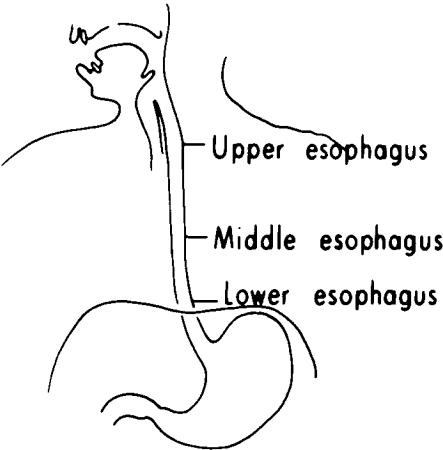
2

Other distant involvement

DISTANT, Lymph Nodes

Supraclavicular (transverse cervical)
Other distant nodes

UPPER OR CERVICAL ESOPHAGUS



IN_SITU; noninvasive

LOCALIZED

L if confined to:

1

Mucosa of upper esophagus

Mucosa but extends to middle esophagus

L if tumor invades:

2

Muscularis

L if:

x

Localized, NOS

REGIONAL, Direct Extension

R if:

1

Adventitia and/or soft tissues of neck

Major blood vessel(s): carotid artery, subclavian artery,
jugular vein

Thyroid gland

Esophagus is described as "fixed"

R if:

2

Hypopharynx; larynx

Trachea, including carina

Cervical vertebra(e)

REGIONAL, Lymph Nodes

Paraesophageal

Internal jugular

Anterior deep cervical: laterotracheal (recurrent)

Upper cervical (including cervical, NOS)

DISTANT, Direct Extension or Metastasis

D if extension to:

1

Main stem bronchus

Lung and/or pleura

D if:

2

Other distant involvement

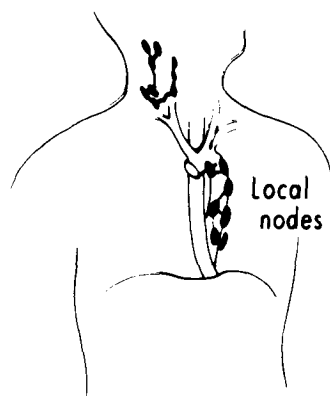
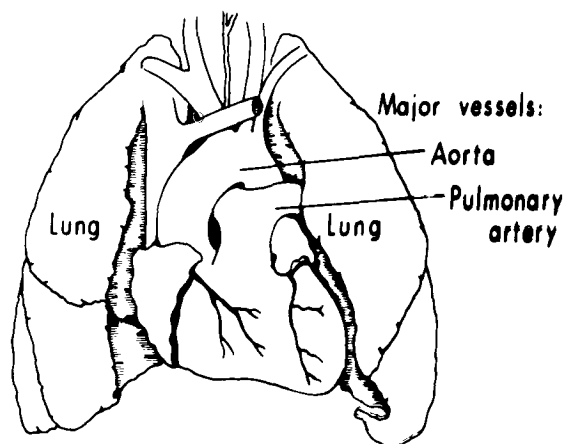
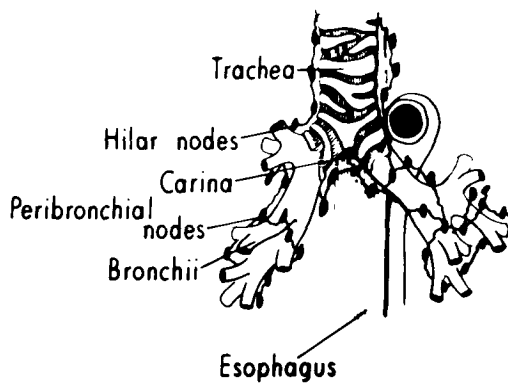
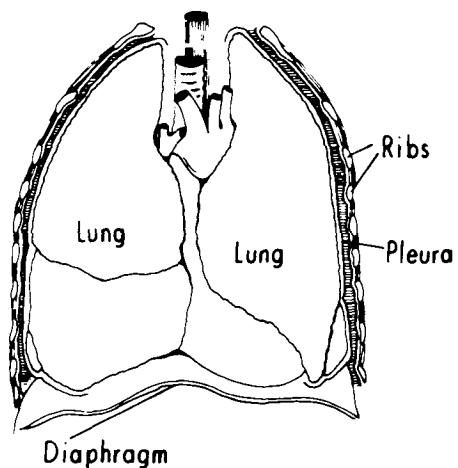
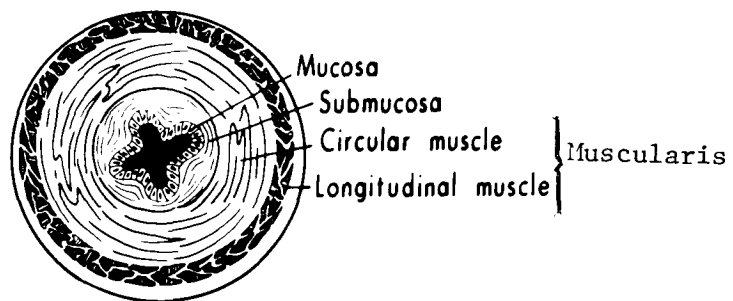
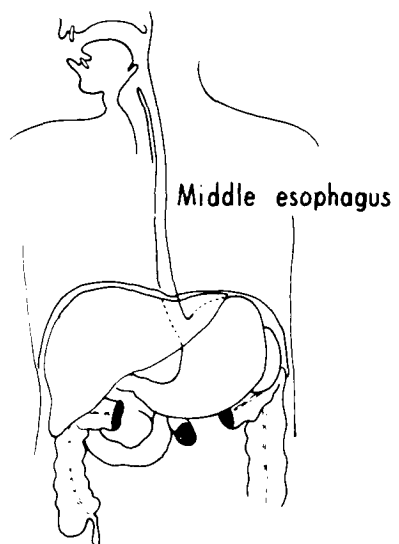
DISTANT, Lymph Nodes

Posterior mediastinal

Supraclavicular (transverse cervical)

Other distant nodes

MIDDLE OR THORACIC ESOPHAGUS



IN_SITU; noninvasive

LOCALIZED

L if confined to:

1

Mucosa of middle esophagus

Mucosa but extends to upper and/or lower esophagus

L if tumor involves:

2

Muscularis

L if:

x

Localized, NOS

REGIONAL, Direct Extension

R if:

1

Adventitia and/or soft tissues

Major blood vessel(s): aorta, pulmonary artery or vein, vena cava

Trachea

Carina

Main stem bronchus

Esophagus is described as "fixed"

R if:

2

Lung via bronchus

Pleura

Pericardium

Mediastinal structure(s) NOS

Rib(s)

Thoracic vertebra(e)

Diaphragm

REGIONAL, Lymph Nodes

Paraesophageal

Tracheobronchial: peritracheal, carinal (bifurcation), hilar
(pulmonary roots)

Posterior mediastinal

Internal jugular

Left gastric: cardiac, lesser curvature

Upper cervical (including cervical, NOS)

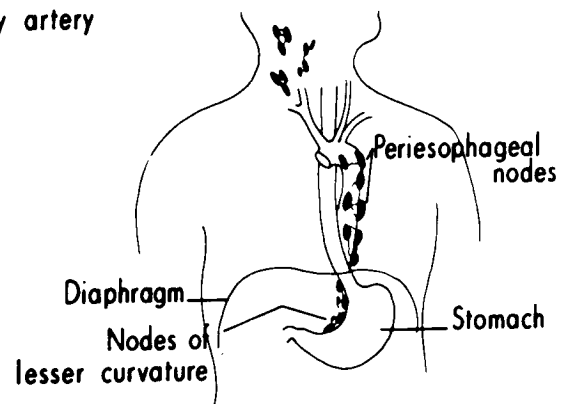
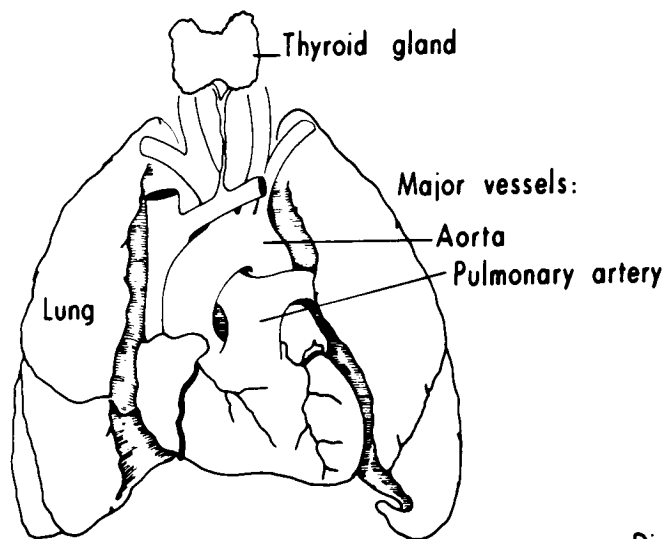
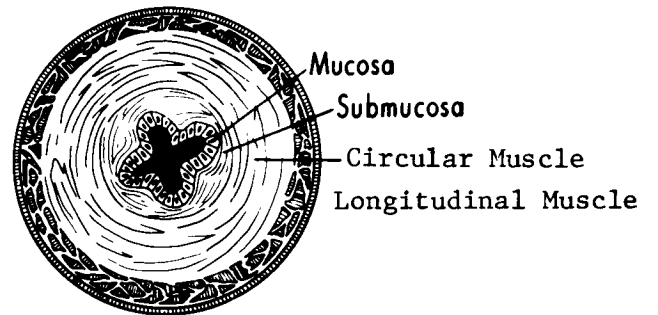
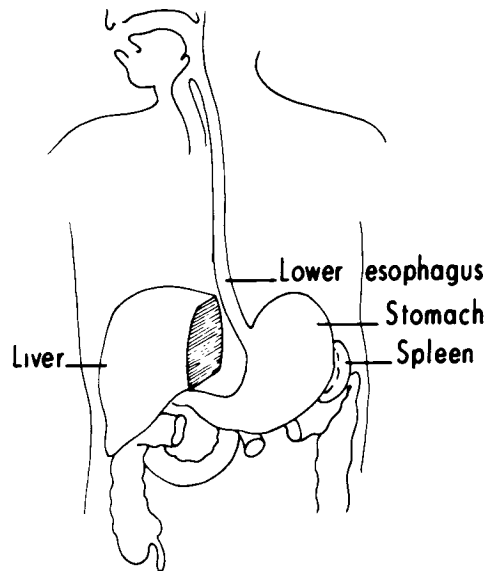
DISTANT, Direct Extension or Metastasis

DISTANT, Lymph Nodes

Supraclavicular (transverse cervical)

Other distant nodes

LOWER OR DISTAL ESOPHAGUS



IN_SITU; noninvasive

LOCALIZED

L if confined to:

1

Mucosa of lower esophagus

Mucosa but extends to middle esophagus

L if tumor involves:

2

Muscularis

L if:

x

Localized, NOS

REGIONAL, Direct Extension

R if:

1

Adventitia and/or soft tissues

Esophagus is described as "fixed"

R if:

2

Diaphragm

Cardia of stomach

Major blood vessel(s): aorta, gastric artery or vein, vena cava

REGIONAL, Lymph Nodes

Paraesophageal

Left gastric: cardiac, lesser curvature, perigastric, NOS

Posterior mediastinal

DISTANT, Direct Extension or Metastasis

D if:

1

"Diaphragm is fixed" (indicates phrenic nerve involved by tumor)

D if:

2

Other distant involvement

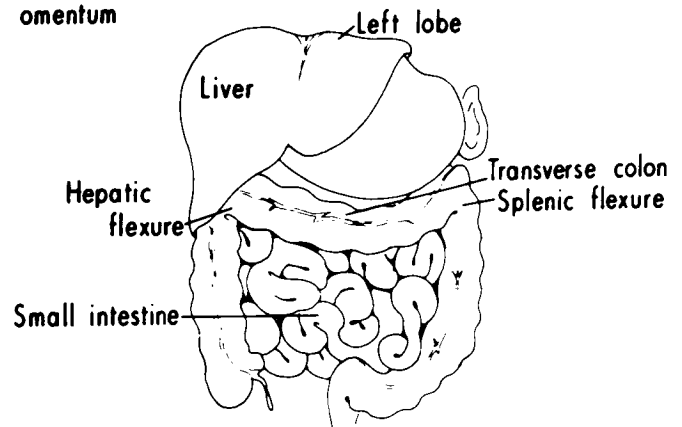
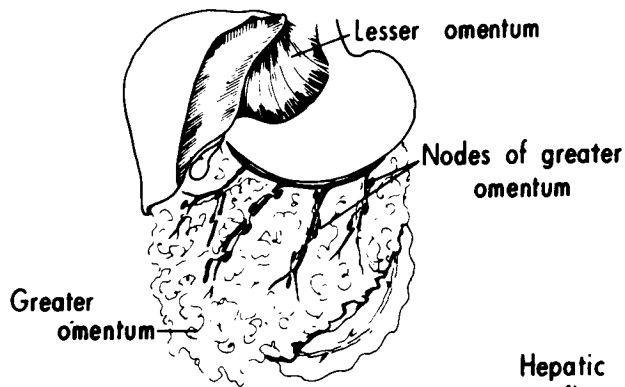
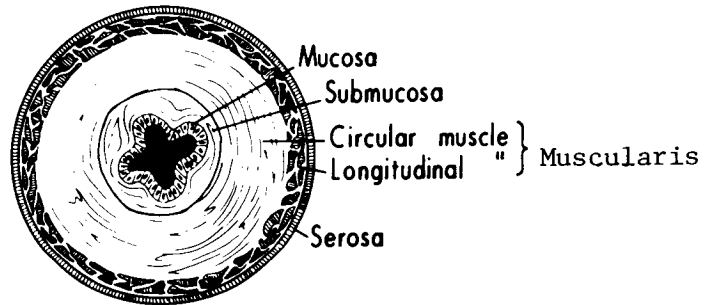
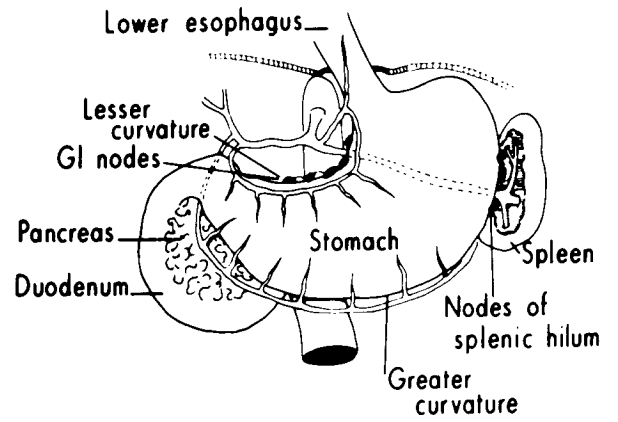
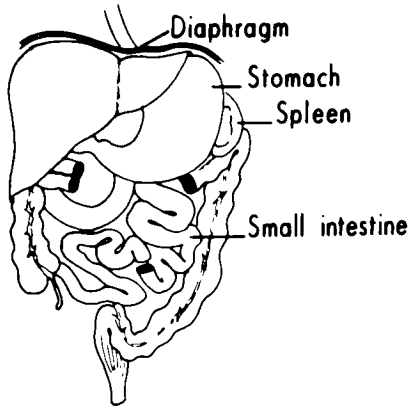
DISTANT, Lymph Nodes

Celiac

Para-aortic

Other distant nodes

STOMACH



IN_SITU; noninvasive

LOCALIZED

L if:

1

Confined to mucosa (lamina propria or muscularis mucosae; intramucosal)

L if:

2

Submucosa invaded (thru muscularis mucosae)

Stalk invaded (if polyp)

Superficial invasion

L if:

3

Muscularis propria invaded

Invasion through muscularis propria

Subserosal tissue invaded (including extension through the wall, NOS)

L if:

4

Implants inside the stomach

L if:

x

Localized, NOS

REGIONAL, Direct Extension

R if extension to:

1

Perigastric fat

Lesser omentum

Ligaments: gastocolic, gastrohepatic, gastrosplenic

Gastric artery

R if:

2

Invasion of (through) serosa*

Diffuse involvement of entire thickness of stomach wall
(linitis plastica)

R if extension to:

3

Esophagus (intraluminal)

Duodenum (intraluminal)

R if extension to:

4

Spleen

Omentum (greater)

Transverse colon (including hepatic and splenic flexures)

Diaphragm

*Invasion of serosa may be considered localized in historical comparisons.

R if extension to:

5

Esophagus via serosa
Duodenum via serosa
Liver
Pancreas
Jejunum, ileum

REGIONAL, Lymph Nodes

Inferior gastric:

Gastrocolic
Gastroepiploic, right or NOS
Greater curvature
Greater omentum
Infrapyloric
Pyloric
Subpyloric

Splenic hilar:

Left gastroepiploic
Pancreaticolienal
Peripancreatic
Splenic

Superior gastric:

Cardiac
Cardioesophageal
Gastrohepatic
Left gastric
Lesser curvature
Lesser omentum
Paracardial

Perigastric, NOS

Nodule(s) in perigastric fat

DISTANT, Direct Extension or Metastasis

D if extension to:

1

Left Kidney
Adrenal gland(s)
Retroperitoneum
Abdominal wall
Ovary (Krukenberg tumor)

D if:

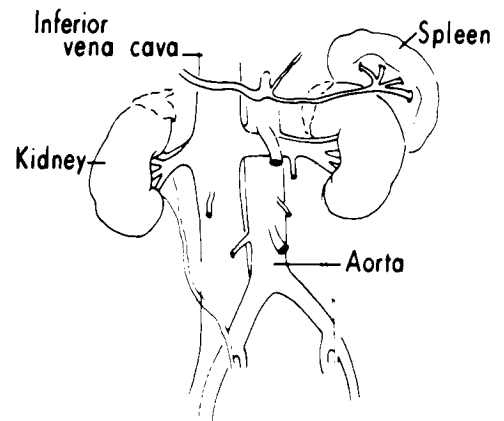
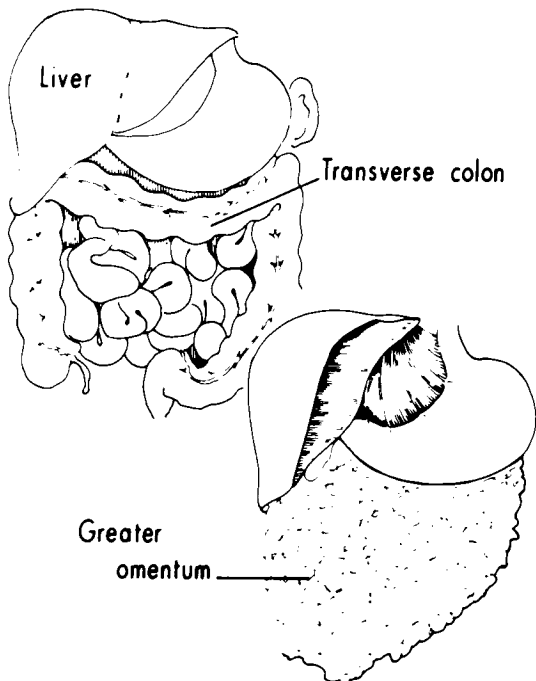
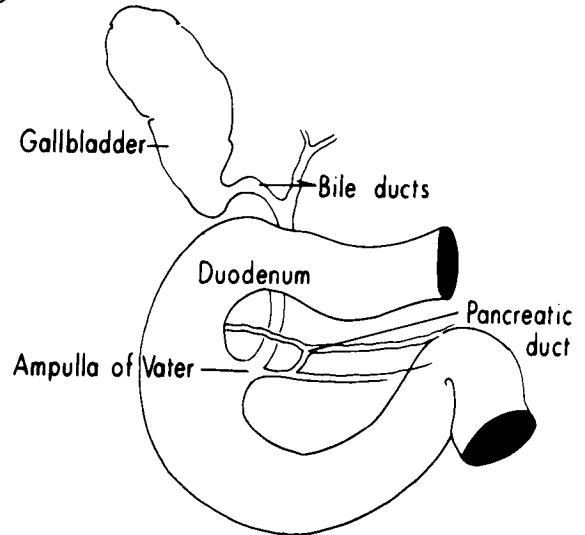
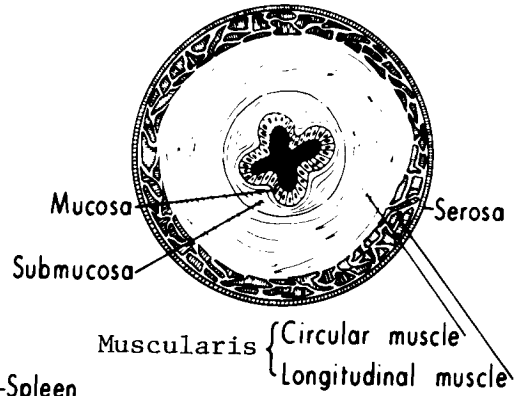
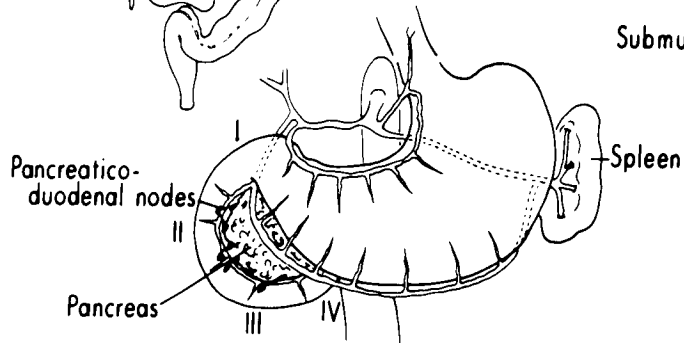
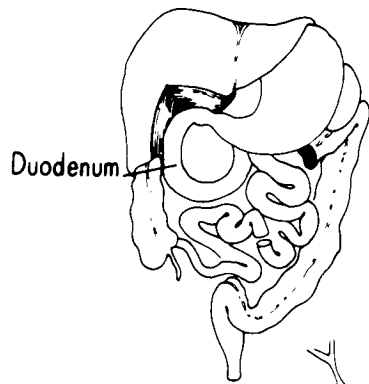
2

Other distant involvement

DISTANT, Lymph Nodes

Celiac
Hepatic
Mesenteric, superior or inferior
Para-aortic
Portal
Retroperitoneal
Other distant nodes

DUODENUM



IN_SITU; noninvasive

LOCALIZED

L if:

1

Invasive cancer confined to a polyp
Confined to submucosa

L if:

2

Muscularis and/or serosa invaded

L if:

3

Intraluminal to jejunum

L if:

x

Localized, NOS

REGIONAL, Direct Extension

R if:

1

Periduodenal tissue
Mesentery, including mesenteric fat
Stomach
Extrahepatic bile duct(s), including ampulla of Vater
Pancreas, including pancreatic duct

R if:

2

Greater omentum
Major blood vessel(s): aorta, superior mesenteric artery or vein,
vena cava, portal vein, renal vein, gastro-
duodenal artery

R if:

3

Small intestine via serosa
Transverse colon, including hepatic flexure
Right and/or quadrate lobe of liver
Gallbladder
Right kidney
Right ureter
Diaphragm
Abdominal wall
Retroperitoneum

REGIONAL, Lymph Nodes

Hepatic: pancreaticoduodenal, infrapyloric, gastroduodenal

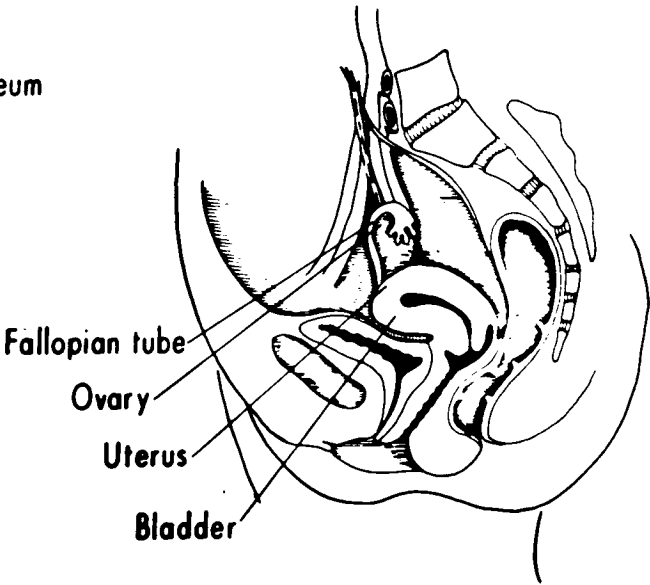
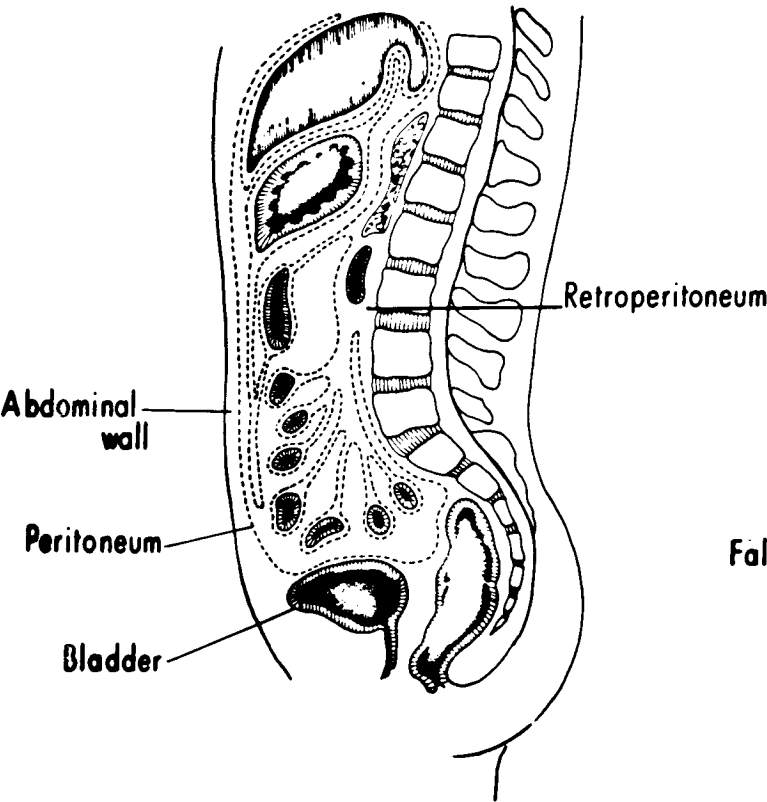
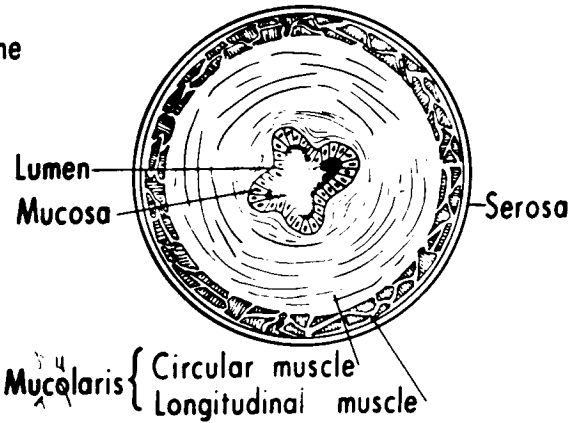
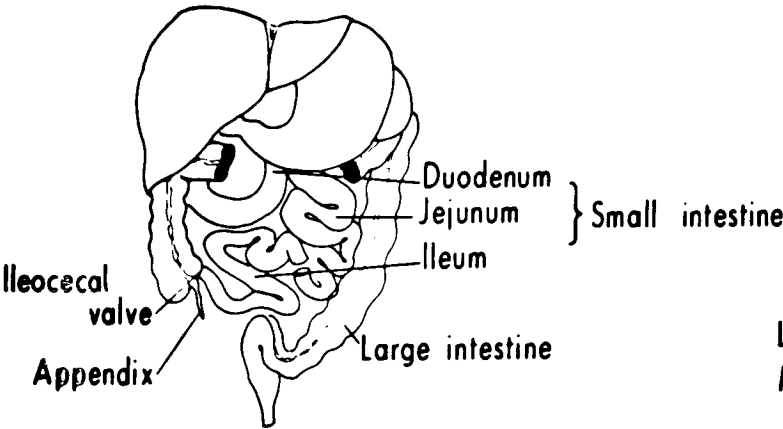
DISTANT, Direct Extension or Metastasis

DISTANT, Lymph Nodes

Superior mesenteric

Other distant nodes

JEJUNUM & ILEUM



IN_SITU; noninvasive

LOCALIZED

L if:

1

Invasive cancer confined to a polyp
Confined to submucosa

L if:

2

Muscularis and/or serosa invaded

L if:

3

Intraluminal to ileocecal valve or cecum from ileum
Intraluminal to duodenum from jejunum

L if:

x

Localized, NOS

REGIONAL, Direct Extension

R if:

1

Mesentery, including mesenteric fat

R if:

2

Abdominal wall
Retroperitoneum
Small intestine via serosa
Large intestine, including appendix

REGIONAL, Lymph Nodes

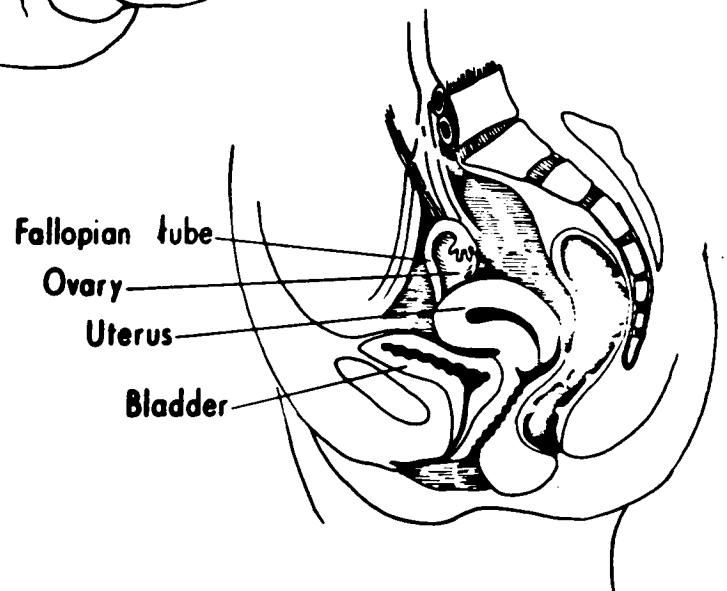
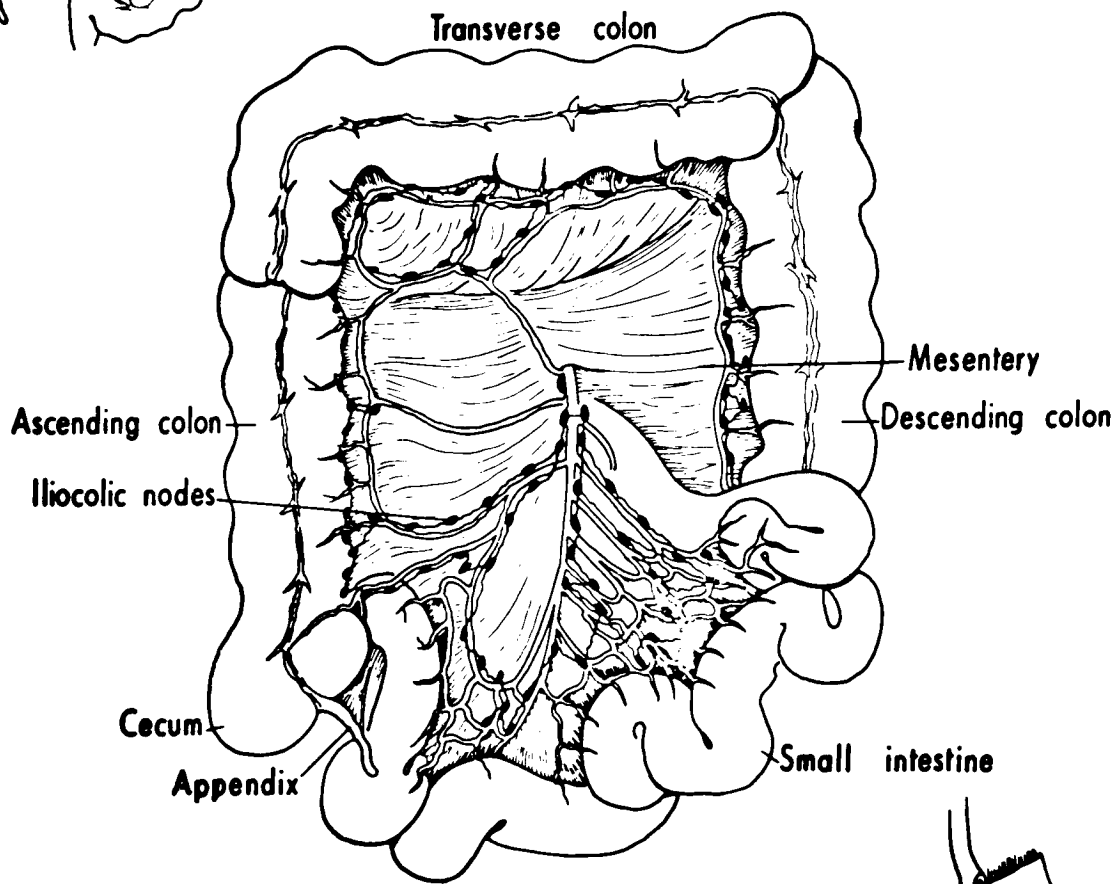
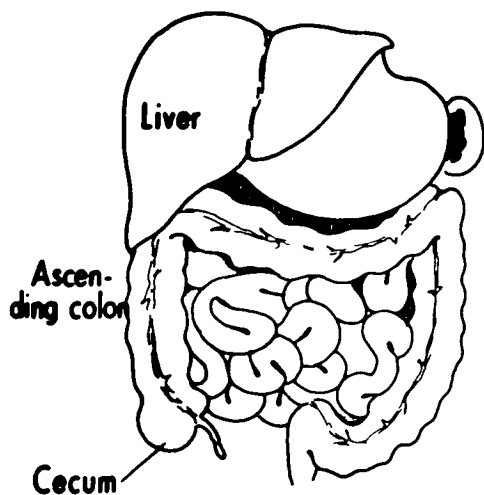
Posterior cecal (terminal ileum only)
Ileocolic (terminal ileum only)
Superior mesenteric

DISTANT, Direct Extension or Metastasis

Bladder
Uterus
Ovary
Fallopian tube
Other distant involvement

DISTANT, Lymph Nodes

CECUM & ASCENDING COLON



IN SITU; noninvasiveLOCALIZED

L if:

1

Confined to mucosa (lamina propria or muscularis mucosae;
intramucosal)

L if:

2

Submucosa invaded (thru muscularis mucosae)
Stalk invaded (if polyp)
Superficial invasion

L if:

3

Muscularis propria invaded
Invasion through muscularis propria
Subserosal tissue invaded (including extension through the wall, NOS)

L if:

4

Intraluminal to appendix, cecum or ileocecal valve, ileum, ascending colon
Implants inside the cecum

L if:

x

Localized, NOS

REGIONAL, Direct Extension

R if extension to:

1

Mesentery, including mesenteric fat
Pericolonic (pericecal) fat
Adjacent tissue(s), NOS

R if:

2

Invasion of (through) serosa*

R if extension to:

3

Greater omentum
Retroperitoneum
Abdominal wall
Small intestine, other than ileum

*Invasion of serosa may be considered localized in historical comparisons.

REGIONAL, Lymph Nodes

Epicolic
Paracolic
Cecal
Ileocolic
Right colic (including colic, NOS)
Mesenteric, superior or NOS

Nodule(s) in pericolic fat

DISTANT, Direct Extension or Metastasis

D if extension to:

1

Uterus
Ovary
Fallopian tube
Urinary bladder
Gallbladder
Right kidney or ureter
Liver
Other segment of colon via serosa

D if:

2

Other distant involvement

DISTANT, Lymph Nodes

Inferior mesenteric
Para-aortic
Retroperitoneal
Other distant nodes

IN SITU; noninvasive

LOCALIZED

L if:

1

Confined to mucosa (lamina propria or muscularis mucosae;
intramucosal)

L if:

2

Submucosa invaded (thru muscularis mucosae)
Stalk invaded (if polyp)
Superficial invasion

L if:

3

Muscularis propria invaded
Invasion through muscularis propria
Subserosal tissue invaded (including extension through the
wall, NOS)

L if:

4

Intraluminal to cecum, appendix, ileocecal valve, transverse colon
Implants inside the ascending colon

L if:

x

Localized, NOS

REGIONAL, Direct Extension

R if extension to:

1

Pericolic fat
Retroperitoneal fat
Adjacent tissue(s), NOS

R if:

2

Invasion of (through) serosa*

R if extension to:

3

Greater omentum
Retroperitoneum
Abdominal wall
Small intestine
Right ureter
Right kidney
Liver, right lobe

*Invasion of serosa may be considered localized in historical comparisons.

REGIONAL, Lymph Nodes

Epicolic
Paracolic
Ileocolic
Right colic (including colic, NOS)
Middle colic
Mesenteric, superior or NOS

Nodule(s) in pericolic fat

DISTANT, Direct Extension or Metastasis

D if extension to:
1

Uterus
Ovary
Fallopian tube
Urinary bladder
Gallbladder
Other segment of colon via serosa

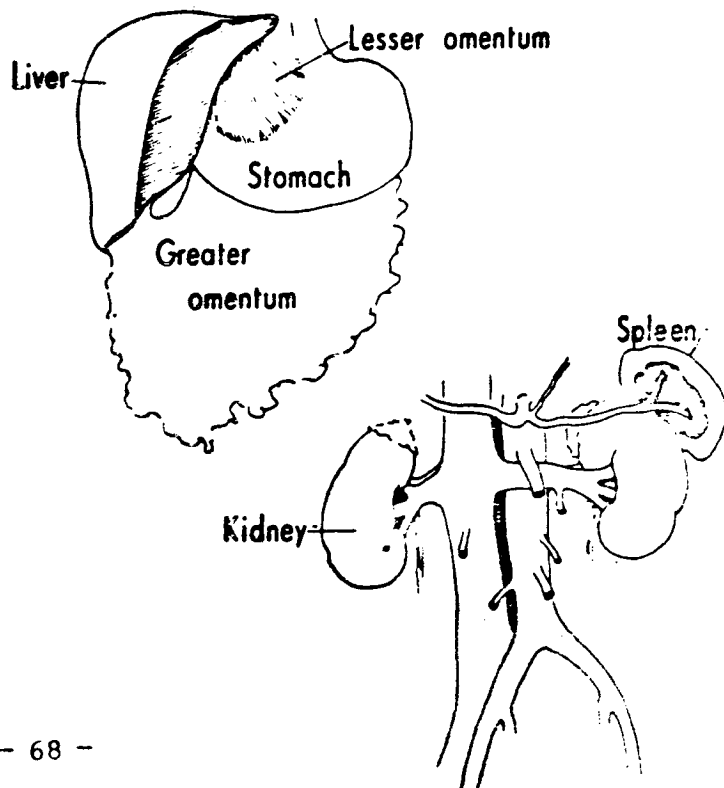
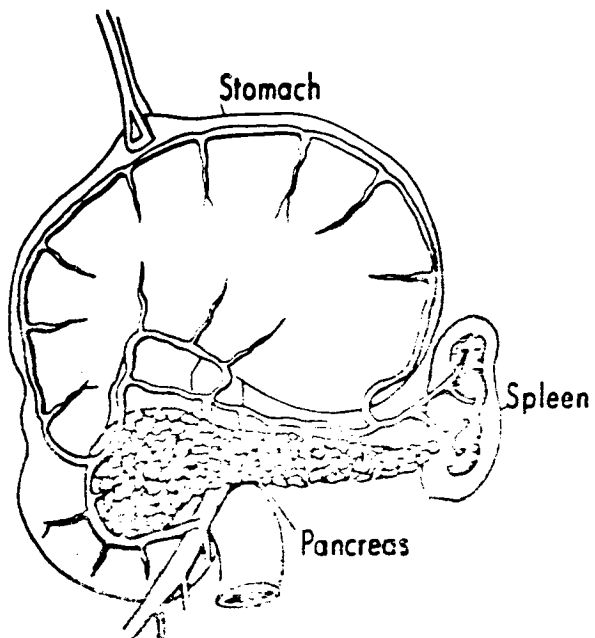
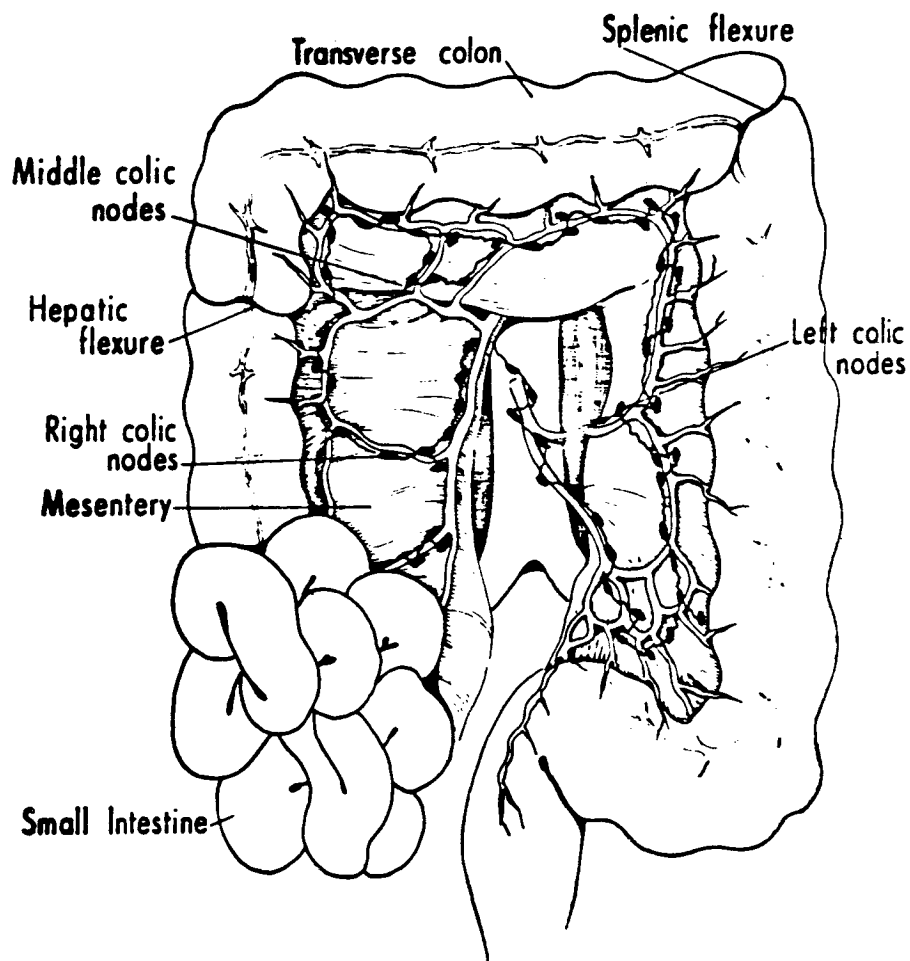
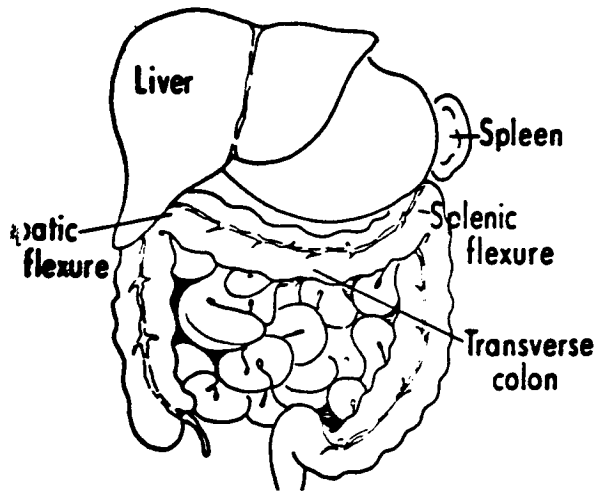
D if:
2

Other distant involvement

DISTANT, Lymph Nodes

Inferior mesenteric
Para-aortic
Retroperitoneal
Other distant nodes

HEPATIC FLEXURE, TRANSVERSE COLON & SPLENIC FLEXURE



IN_SITU; noninvasive

LOCALIZED

L if:

1

Confined to mucosa (lamina propria or muscularis mucosae;
intramucosal)

L if:

2

Submucosa invaded (thru muscularis mucosae)
Stalk invaded (if polyp)
Superficial invasion

L if:

3

Muscularis propria invaded
Invasion through muscularis propria
Subserosal tissue invaded (including extension through the
wall, NOS)

L if:

4

Intraluminal to ascending or descending colon

L if:

X

Localized, NOS

REGIONAL, Direct Extension

R if extension to:

1

Mesentery (including mesenteric fat); mesocolon
Pericolic fat
Greater omentum; gastrocolic ligament
Adjacent tissue(s), NOS

R if:

2

Invasion of (through) serosa*

R if extension to:

3

Stomach
Small intestine
Liver
Spleen
Pancreas
Retroperitoneum
Gallbladder/ bile ducts
Kidney
Abdominal wall

*Invasion of serosa may be considered localized in historical comparisons.

REGIONAL, Lymph Nodes

Epicolic
Paracolic
Right colic for hepatic flexure only
Middle colic
Colic, NOS
Left colic for splenic flexure only
Inferior mesenteric for splenic flexure only
Superior mesenteric for hepatic flexure and transverse
colon only
Mesenteric, NOS

Nodule(s) in pericolic fat

DISTANT, Direct Extension or Metastasis

D if extension to:

1

Other segment of colon via serosa
Diaphragm
Ureter
Adrenal gland
Ovary

D if:

2

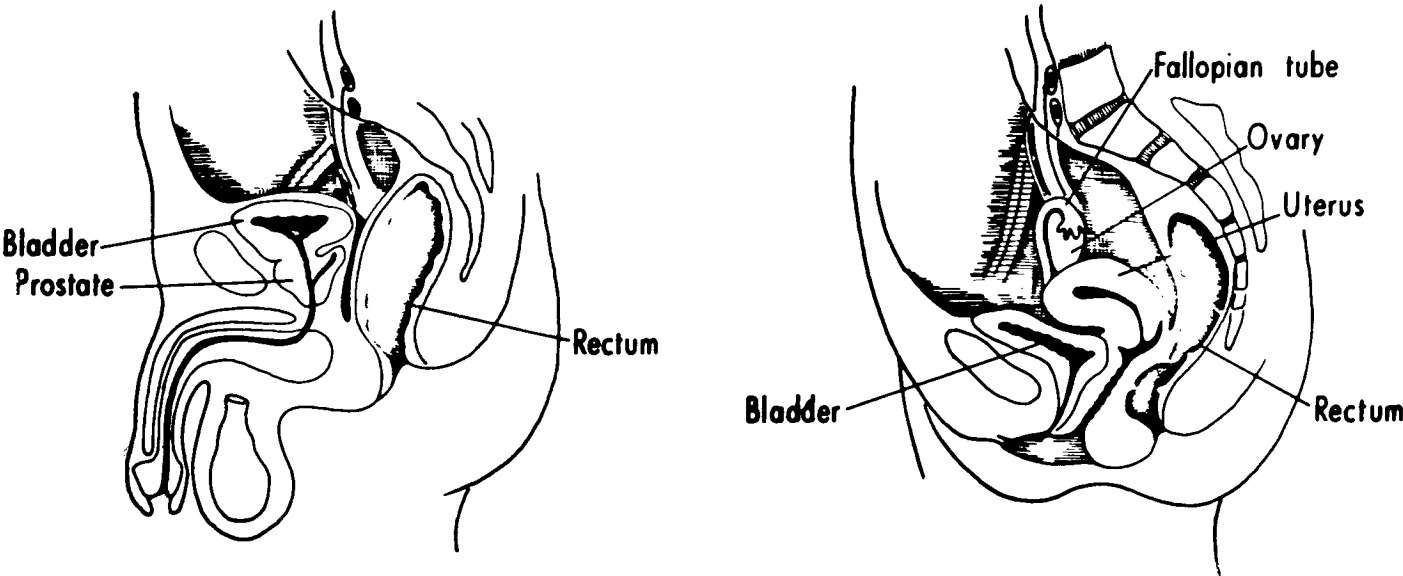
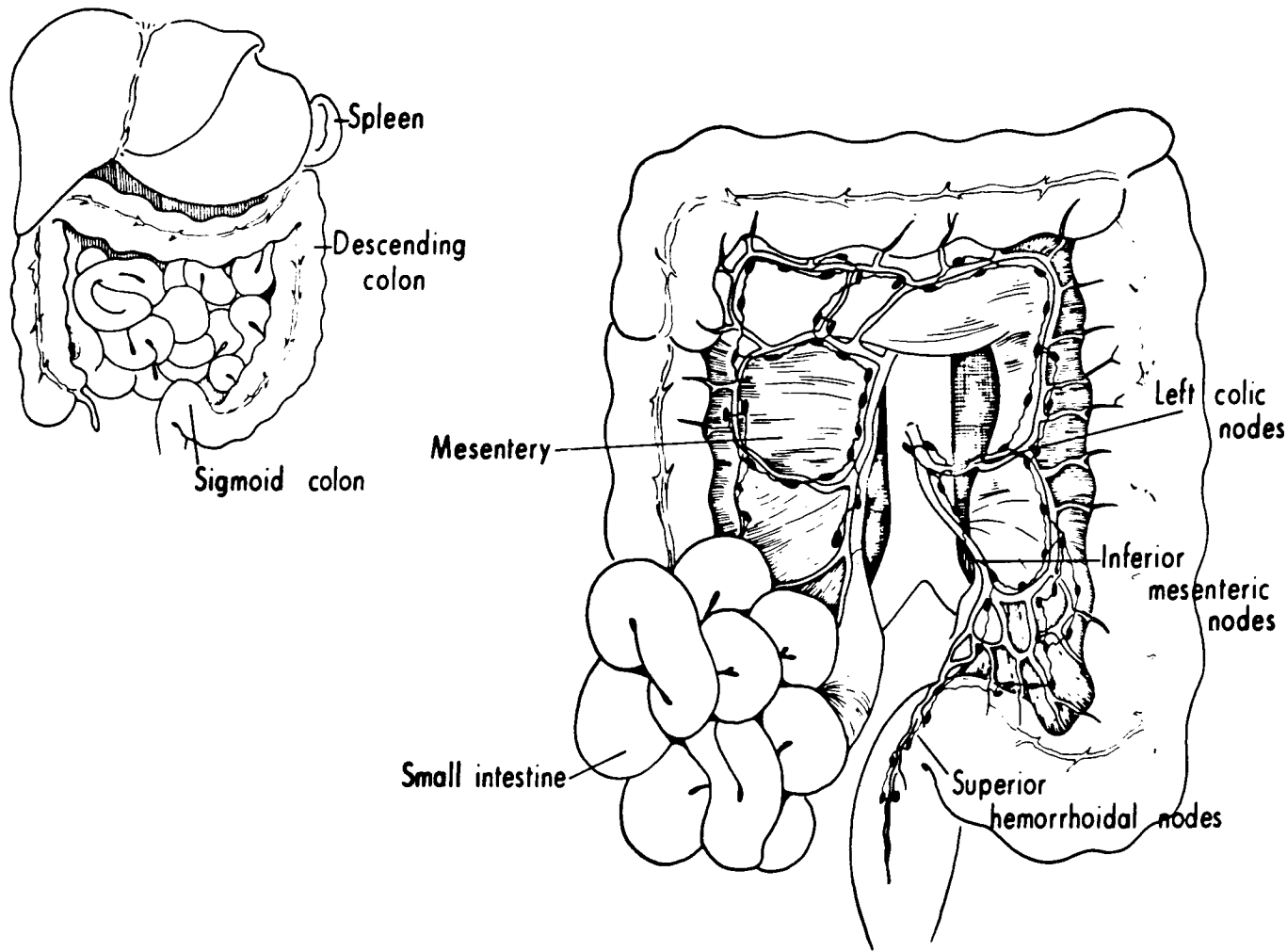
Other distant involvement

DISTANT, Lymph Nodes

Para-aortic or retroperitoneal

Inferior mesenteric for hepatic flexure and transverse colon only
Superior mesenteric for splenic flexure only

DESCENDING COLON & SIGMOID COLON



IN_SITU; noninvasive

LOCALIZED

L if:

1

Confined to mucosa (lamina propria or muscularis mucosae)

L if:

2

Submucosa invaded (thru muscularis mucosae)

Stalk invaded (if polyp)

Superficial invasion

L if:

3

Muscularis propria invaded

Invasion through muscularis propria

Subserosal tissue invaded (including extension through the wall, NOS)

L if:

4

Intraluminal to splenic flexure, transverse colon, sigmoid colon

L if:

X

Localized, NOS

REGIONAL, Direct Extension

R if extension to:

1

Pericolic fat, NOS

Retroperitoneal fat

Adjacent tissue(s), NOS

R if:

2

Invasion of (through) serosa*

R if extension to:

3

Small intestine

Retroperitoneum

Greater omentum

Abdominal or pelvic wall

Left ureter

Left kidney

Spleen

*Invasion of serosa may be considered localized in historical comparisons.

REGIONAL, Lymph Nodes

Epicolic
Paracolic
Left colic (including colic, NOS)
Mesenteric, inferior or NOS

Nodule(s) in pericolic fat

DISTANT, Direct Extension or Metastasis

D if extension to:

1

Uterus
Ovary
Fallopian tube
Other segment of colon via serosa

D if:

2

Other distant involvement

DISTANT, Lymph Nodes

Para-aortic
Retroperitoneal
Superior mesenteric
Other distant nodes

IN_SITU; noninvasive

LOCALIZED

L if:

1

Confined to mucosa (lamina propria or muscularis mucosae;
intramucosal)

L if:

2

Submucosa invaded (thru muscularis mucosae)
Stalk invaded (if polyp)
Superficial invasion

L if:

3

Muscularis propria invaded
Invasion through muscularis propria
Subserosal tissue invaded (including extension through the
wall, NOS)

L if:

4

Intraluminal to descending colon, rectosigmoid, or rectum

L if:

X

Localized, NOS

REGIONAL, Direct Extension

R if extension to:

1

Mesentery (including mesenteric fat); mesosigmoid
Pericolic fat
Adjacent tissue(s), NOS

R if:

2

Invasion of (through) serosa*

R if extension to:

3

Greater omentum
Abdominal or pelvic wall
Small intestine

*Invasion of serosa may be considered localized in historical comparisons.

REGIONAL, Lymph Nodes

Epicolic
Paracolic
Colic, NOS
Sigmoidal
Superior hemorrhoidal
Superior rectal
Mesenteric, inferior or NOS

Nodule(s) in pericolic fat

DISTANT, Direct Extension or Metastasis

D if extension to:

1

Uterus
Cul de sac (rectouterine pouch)
Ovary
Fallopian tube
Ureter
Urinary bladder
Other segment of colon via serosa

D if:

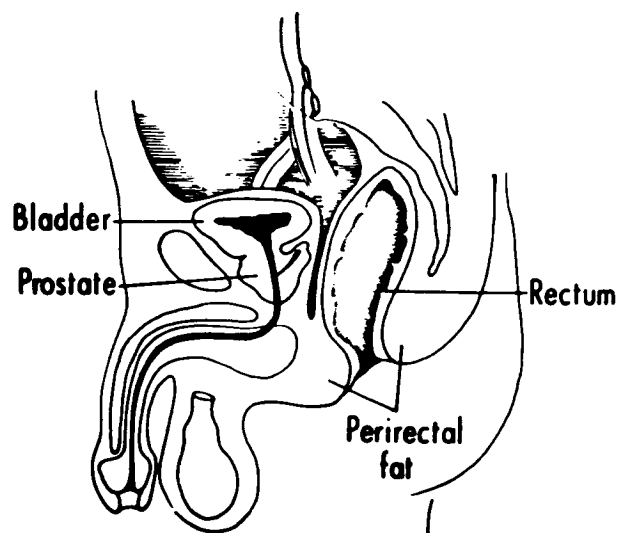
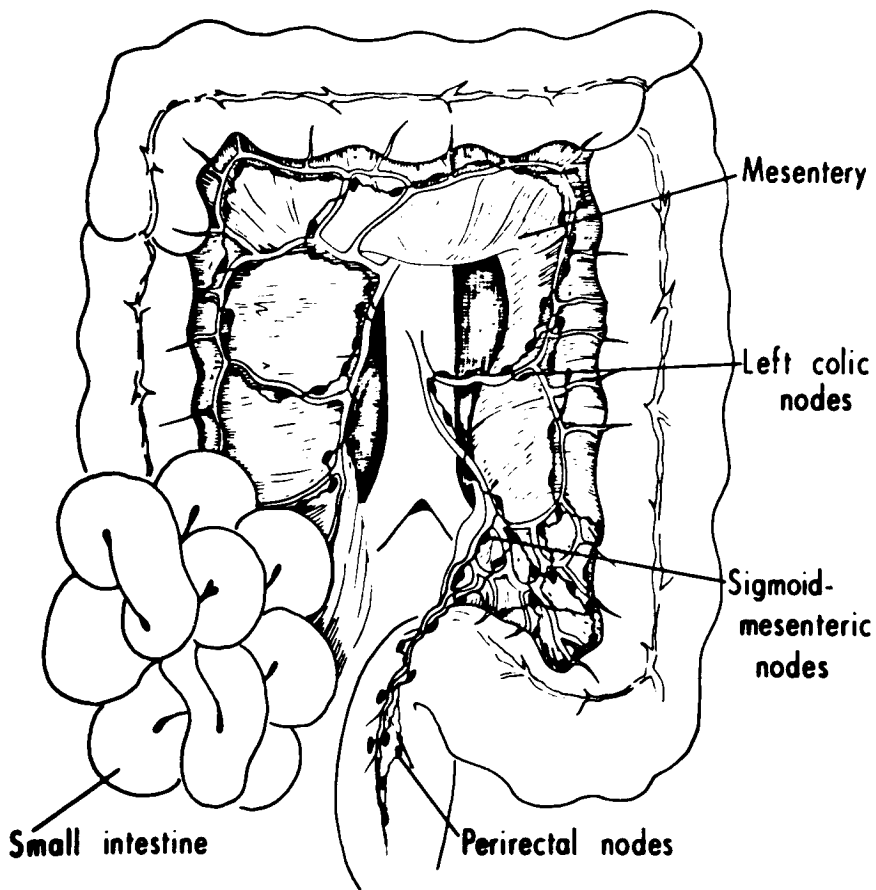
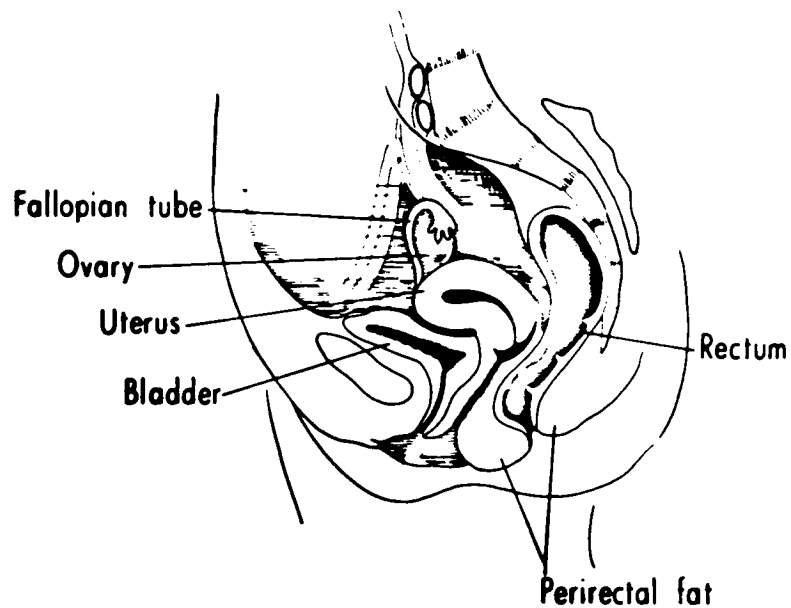
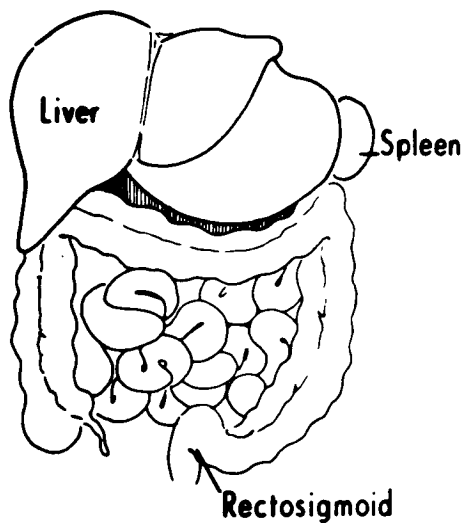
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Other distant involvement

DISTANT, Lymph Nodes

Para-aortic
Retroperitoneal
Superior mesenteric
Other distant nodes

RECTOSIGMOID



IN_SITU; noninvasive

LOCALIZED

L if:

1

Confined to mucosa (lamina propria or muscularis mucosae;
intramucosal)

L if:

2

Submucosa invaded (thru muscularis mucosae)
Stalk invaded (if polyp)
Superficial invasion

L if:

3

Muscularis propria invaded
Invasion through muscularis propria
Subserosal tissue invaded (including through the wall, NOS)

L if:

4

Intraluminal to sigmoid colon or rectum

L if:

X

Localized, NOS

REGIONAL, Direct Extension

R if extension to:

1

Mesentery, including mesenteric fat
Pericolic (perirectal) fat
Adjacent tissue(s), NOS

R if:

2

Invasion of (through) serosa*

R if extension to:

3

Small intestine
Cul de sac (rectouterine pouch)
Pelvic wall/ pelvic plexuses

*Invasion of serosa may be considered localized in historical comparisons.

REGIONAL, Lymph Nodes

Paracolic (including colic, NOS)
Pararectal
Hemorrhoidal, superior or middle
Sigmoidal
Internal iliac (hypogastric)
Mesenteric, inferior or NOS

Nodule(s) in pericolic fat

DISTANT, Direct Extension or Metastasis

D if extension to:

1

Uterus
Vagina
Urinary bladder and/or ureter
Prostate
Skeletal muscles of pelvic floor
Fallopian tube
Ovary
Other segment of colon via srosa

D if:

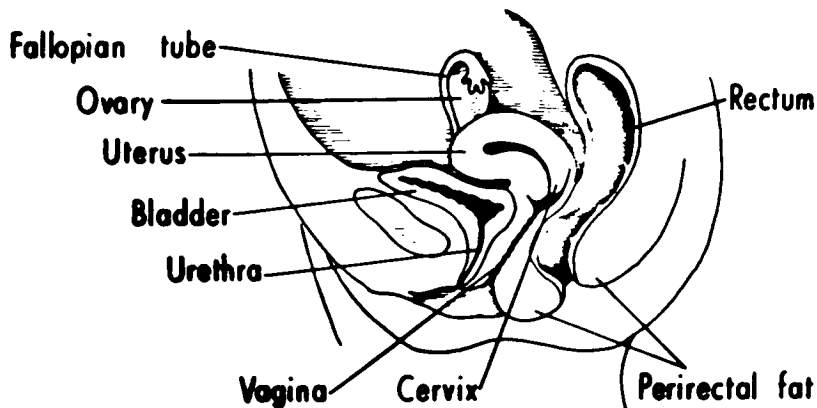
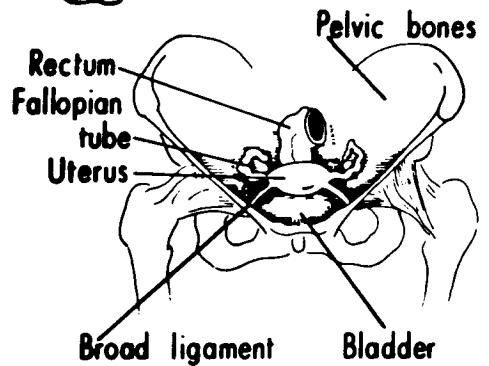
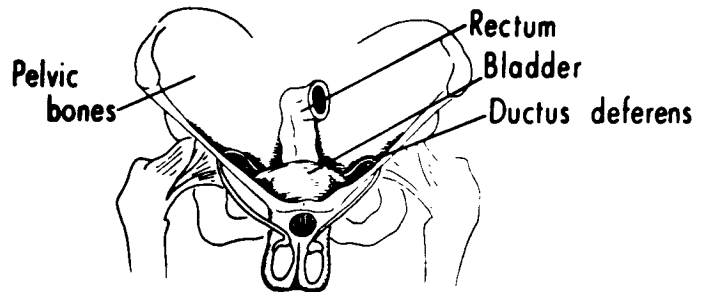
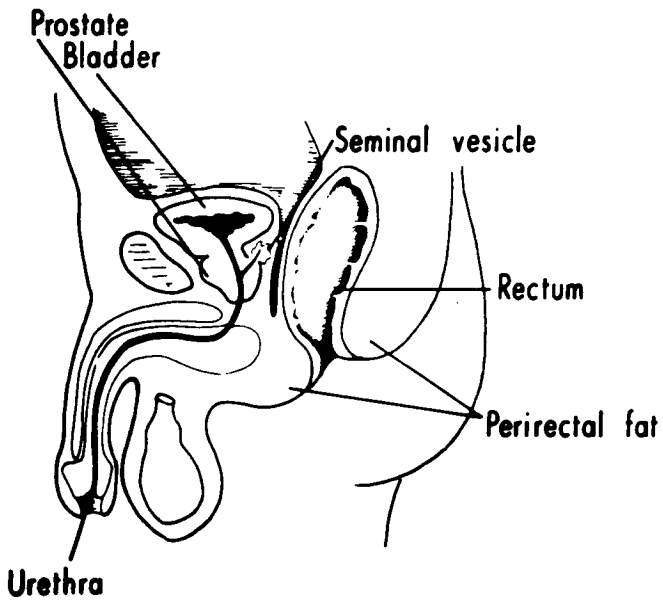
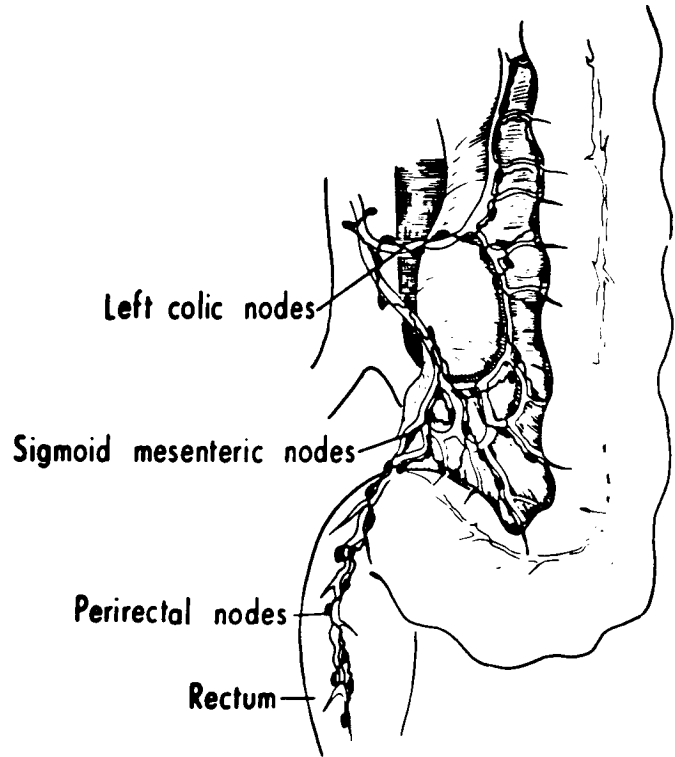
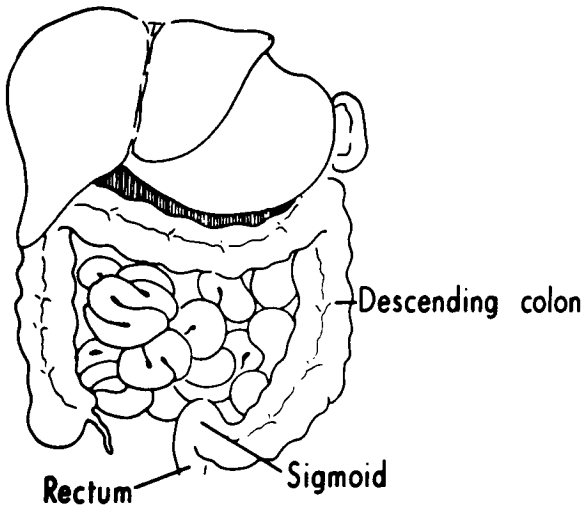
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Other distant involvement

DISTANT, Lymph Nodes

Para-aortic
Retroperitoneal
Superior mesenteric
Other distant nodes

RECTUM



IN_SITU; noninvasive

LOCALIZED

L if:

1

Confined to mucosa (lamina propria or muscularis mucosae)

L if:

2

Submucosa invaded (thru muscularis mucosae)

Stalk invaded (if polyp)

Superficial invasion

L if:

3

Muscularis propria invaded

Invasion through muscularis propria (including extension through wall, NOS)

L if:

X

Localized, NOS

REGIONAL, Direct Extension

R if extension to:

1

Perirectal fat

Rectovaginal septum

Adjacent tissue(s), NOS

R if:

2

Invasion of (through) serosa*

R if extension to:

3

Intraluminal to rectosigmoid or anus

R if extension to:

4

Colon, anus (except intraluminal)

Vagina

Cul de sac (rectouterine pouch)

*Invasion of serosa may be considered localized in historical comparisons.

R if extension to:

5

Urinary bladder/rectovesical fascia, male
Prostate
Seminal vesicle
Ductus deferens
Skeletal muscle of pelvic floor
Pelvic wall

REGIONAL, Lymph Nodes

Pararectal
Hemorrhoidal, superior or middle
Sacral
Sigmoidal
Mesenteric, inferior or NOS
Internal iliac (hypogastric)

Nodule(s) in perirectal fat

DISTANT, Direct Extension or Metastasis

D if extension to:

1

Uterus
Urinary bladder, female
Sacrum
Sacral plexus
Bones of pelvis
Ovary
Urethra
Perineum; perianal skin

D if:

2

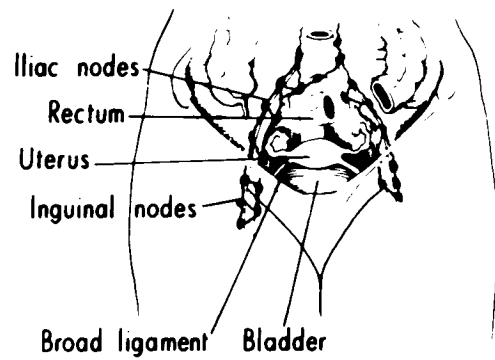
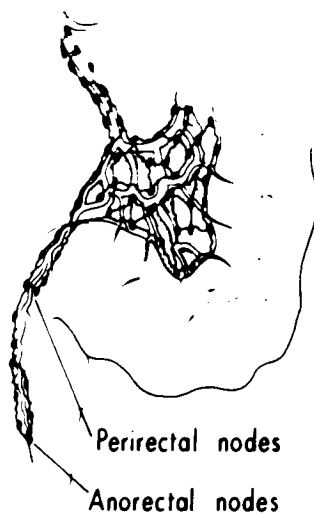
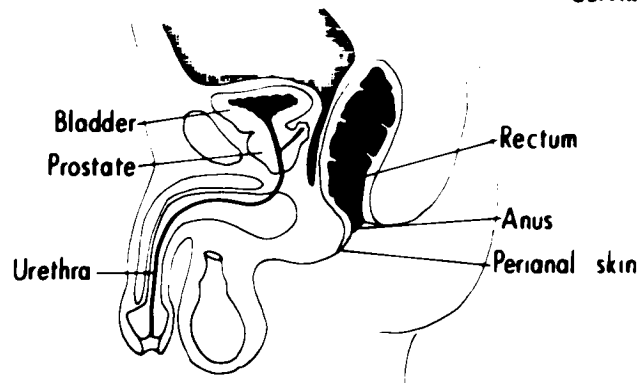
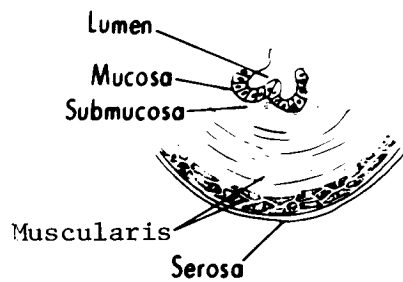
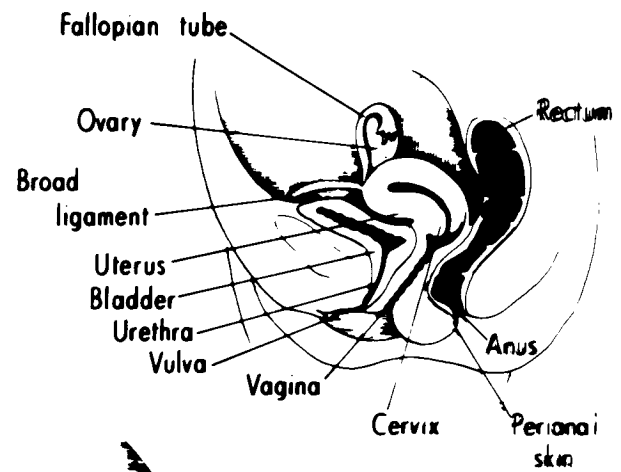
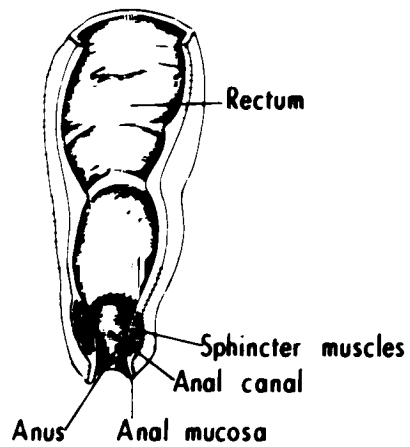
Other distant involvement

DISTANT_LYMPH_NODES

Para-aortic
Retroperitoneal
Superior mesenteric

Inguinal
Other distant nodes

ANUS, ANAL CANAL & ANAL MUCOSA



IN SITU; noninvasive

LOCALIZED

L if:

1

Incidental finding of malignancy in hemorrhoid
Invasive cancer confined to submucosa

L if:

2

Muscularis (internal sphincter)

L if:

x

Localized, NOS

REGIONAL, Direct Extension

R if:

1

Rectal mucosa or submucosa
Perianal skin
Skeletal muscle(s): anal sphincter (external), levator ani
Ischiorectal fat/tissue

R if:

2

Perineum
Vulva

REGIONAL, Lymph Nodes

Anorectal; pararectal
Internal iliac (hypogastric) for anal canal only
Lateral sacral for anal canal only
Superficial inguinal for anus only

DISTANT, Direct Extension or Metastasis

D if extension to:

1

Prostate
Peritoneum of pelvic floor
Bladder
Urethra
Vagina

D if:

2

Other distant involvement

DISTANT, Lymph Nodes

NOTE: Melanoma of the anus is classified according to the staging
scheme for melanoma.

LOCALIZED

Confined to one lobe
Satellite nodule(s) confined to one lobe

Localized, NOS

REGIONAL, Direct Extension

R if:

1

More than one lobe involved by contiguous growth
Gallbladder from right lobe of liver

R if:

2

Extrahepatic blood vessel(s): hepatic artery, vena cava, portal vein
Extrahepatic bile duct(s)
Diaphragm
Peritoneum
Ligament(s): falciform, coronary, triangular, hepatogastric,
hepatoduodenal
Lesser omentum

REGIONAL, Lymph Nodes

Cardiac
Diaphragmatic: pericardial
Posterior mediastinal
Hepatic: hepatic pedicle, inferior vena cava, hepatic artery
Lateral aortic (retroperitoneal): coronary, renal artery

DISTANT, Direct Extension or Metastasis

D if:

1

Satellite nodules in more than one lobe of liver, surface or parenchymal

D if extension to:

2

Pleura
Pancreas
Stomach

D if:

3

Other distant involvement

DISTANT, Lymph Nodes

LYMPHATICS OF THE GALLBLADDER

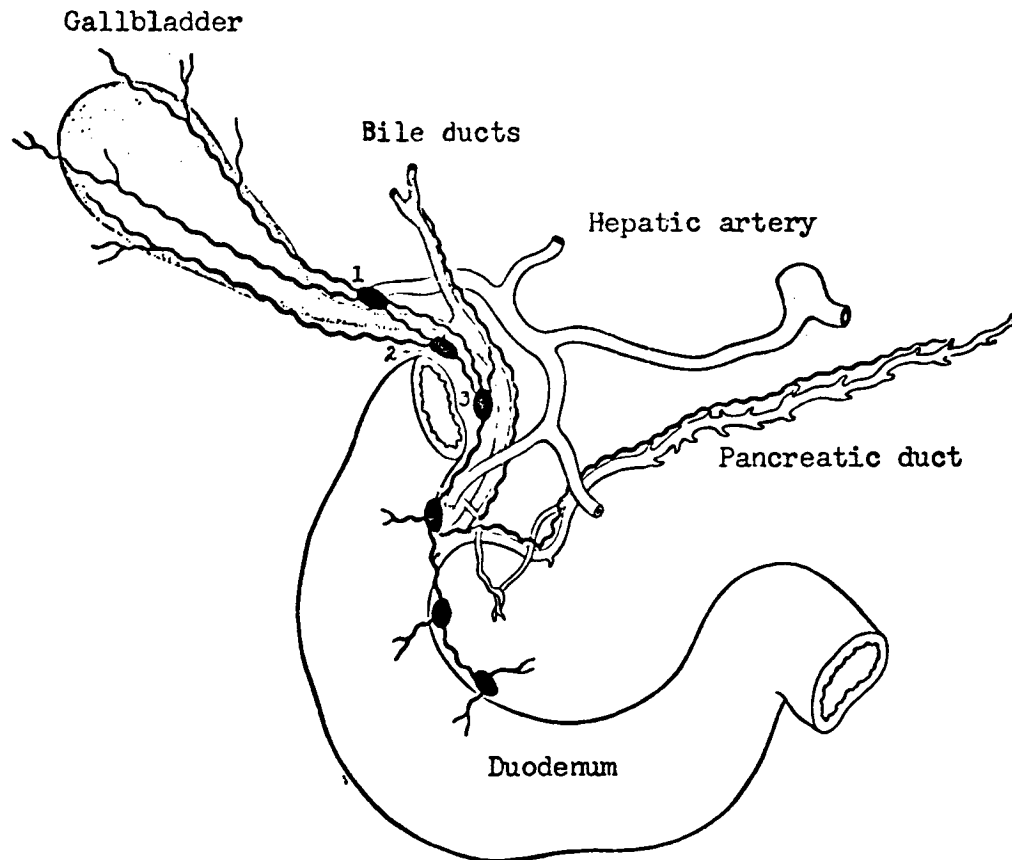


Fig. 504. Schematic representation of the lymphatics of the gallbladder showing the pathways to, 1, cystic node; 2, node of anterior border of foramen of Winslow; and, 3, superior retropancreaticoduodenal node.

Reproduced with permission from del Regato, Juan A., and Spjut, Harlan J.: *Ackerman and del Regato's Cancer*, ed. 5, St. Louis, 1977, The C. V. Mosby Co.

IN SITU; noninvasive

LOCALIZED

L if:

1

Invasive cancer confined to submucosa

L if:

2

Muscularis and/or serosa invaded

L if:

x

Localized, NOS

REGIONAL, Direct Extension

R if:

1

Right lobe of liver

Gallbladder is replaced by tumor (indicate extension to liver)

Extrahepatic bile duct(s), including ampulla of Vater

R if:

2

Blood vessels: cystic artery/vein, hepatic artery, portal vein

Pancreas via extrahepatic bile ducts

Greater omentum

Lesser omentum

Duodenum

REGIONAL, Lymph Nodes

Cystic (node of the neck of the gallbladder)

Node of the foramen of Winslow

Hepatic: periportal, pancreaticoduodenal

DISTANT, Direct Extension or Metastasis

D if extension to:

1

Pancreas (other than above)

Large intestine

Stomach

D if:

2

Other distant involvement

DISTANT, Lymph Nodes

Mesenteric

Para-aortic

Other distant nodes

IN_SITU; noninvasive

LOCALIZED

Confined to bile duct(s): cystic, hepatic, common, ampulla of Vater

Localized, NOS

REGIONAL, Direct Extension

R if:

1

Duodenum

Gallbladder

Pancreas

Liver, porta hepatis

Lesser omentum

R if:

2

Transverse colon, including hepatic flexure

Distal stomach

Blood vessels: portal vein, hepatic artery

REGIONAL, Lymph Nodes

Cystic (node of the neck of the gallbladder)

Node of the foramen of Winslow

Hepatic: periportal, pancreaticoduodenal

DISTANT, Direct Extension or Metastasis

DISTANT, Lymph Nodes

Mesenteric

Para-aortic

Other distant nodes

LOCALIZED

Confined to head of pancreas
Body of pancreas involved
With obstruction, but no invasion, of extrahepatic bile duct(s)

Localized, NOS

REGIONAL, Direct Extension

R if:

1

Extrahepatic bile duct(s), including ampulla of Vater
Duodenum
Stomach adjacent to head of pancreas, including stomach NOS

R if:

2

Liver
Major blood vessel(s): hepatic, pancreaticoduodenal and/or gastro-
duodenal arteries, superior mesenteric artery or vein, portal vein
Transverse colon, including hepatic flexure
Peritoneum
Mesentery, mesocolon, mesenteric fat
Greater and/or lesser omentum
Gallbladder

R if:

3

Tumor is described as "fixed to adjacent tissues"

REGIONAL, Lymph Nodes

Peripancreatic
Hepatic: pancreaticoduodenal, infrapyloric (subpyloric)
Superior mesenteric
Lateral aortic (retroperitoneal)
Celiac

DISTANT, Direct Extension or Metastasis

D if extension to:

1

Body of stomach
Kidney
Ureter
Adrenal gland
Retroperitoneum
Jejunum
Ileum

D if:

2

Other distant involvement

DISTANT, Lymph Nodes

LOCALIZED

Confined to body and/or tail of pancreas
Head of pancreas involved

Localized, NOS

REGIONAL, Direct Extension

R if:

1

Left kidney
Left ureter
Left adrenal gland
Retroperitoneal soft tissues (retroperitoneal space)

R if:

2

Spleen
Stomach
Liver, porta hepatis
Gallbladder

Small intestine
Splenic flexure
Peritoneum
Mesentery, mesocolon, mesenteric fat
Major blood vessel(s): aorta, celiac artery, hepatic artery, splenic
artery or vein, superior mesenteric artery or
vein, portal vein

REGIONAL, Lymph Nodes

Splenic: suprapancreatic, splenic hilum, pancreaticolienal
Superior mesenteric
Lateral aortic (retroperitoneal)

DISTANT, Direct Extension or Metastasis

D if extension to:

1

Right kidney
Right ureter
Right adrenal gland
Diaphragm
Large intestine (other than splenic flexure)

D if:

2

Other distant involvement

DISTANT, Lymph Nodes

LYMPH NODES OF THE PELVIS AND ABDOMEN

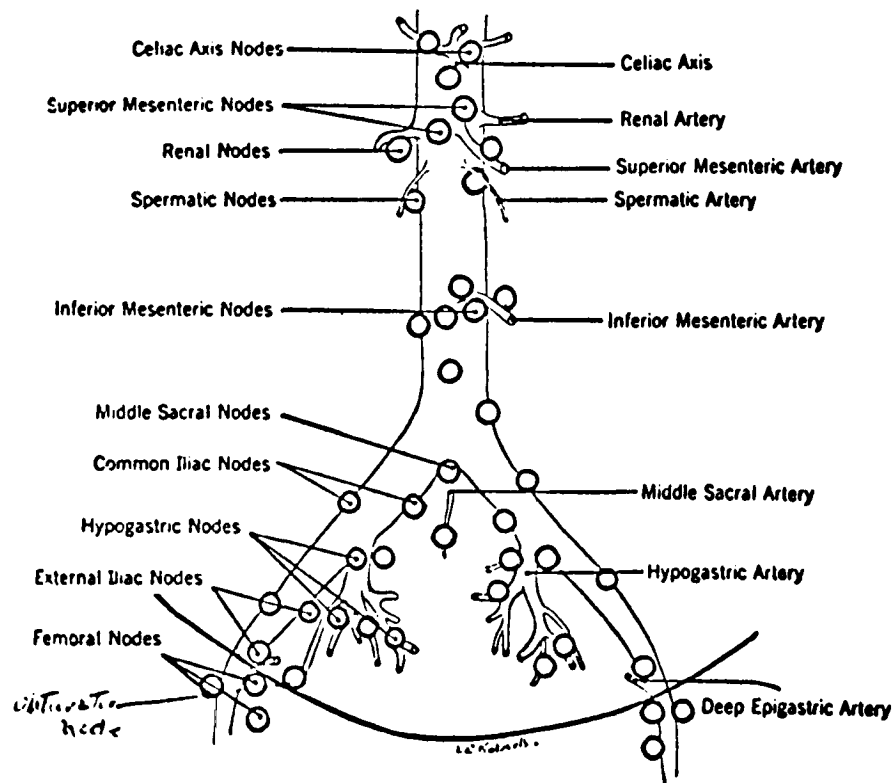


FIG. 5. PRINCIPAL LYMPH NODE GROUPS OF THE PELVIS AND ABDOMEN

Source: Taylor, G. W., Lymph Node Metastases, p. 44

DEFINITION OF ANATOMICAL LIMITS OF THE LARYNX ACCORDING
TO THE AMERICAN JOINT COMMITTEE ON CANCER STAGING

Anterior Limit is constituted by the anterior or lingual surface of the suprahypoid epiglottis, thyrohyoid membrane, the anterior commissure, and the anterior wall of the subglottic region, which is composed of the thyroid cartilage, the cricothyroid membrane, and the anterior arch of the cricoid cartilage.

Posterior Lateral Limits include the aryepiglottic folds, the arytenoid region, the interarytenoid space, and the posterior surface of the subglottic space represented by the mucous membrane covering the cricoid cartilage.

Superior Lateral Limits are constituted by the tip and the lateral border of the epiglottis.

Inferior Limits are constituted by a plane passing through the inferior edge of the cricoid cartilage.

The larynx is divided into the following anatomical regions and sites:

<u>Region</u>	<u>Site</u>
Supraglottic	Ventricular bands (false cords), right and left
	Arytenoids, right and left
	Epiglottis (both lingual and laryngeal aspects)
	Suprahypoid epiglottis Infrahyoid epiglottis Aryepiglottic folds
Glottic	True vocal cords, right and left
	Anterior and posterior commissures
Subglottic	Right and left walls of the subglottis, exclusive of the undersurface of the cords

IN SITU: noninvasive

LOCALIZED

L if:

1

Tumor limited to one area within a region

Supraglottic region

Laryngeal (posterior) surface of epiglottis

Arytenoid

Aryepiglottic fold

Ventricular band (false cord, vestibular fold)

Ventricular cavity

Glottic region (normal mobility)

Vocal cord, one side

Commissure

Subglottic region on one side

L if:

2

Tumor extends to adjacent area(s) within a region

Supraglottic region

More than one of the above areas

Glottic region (normal mobility)

Cord and commissure

Both vocal cords

Subglottic region on both sides

L if:

3

Glottic region: Fixation of cord(s)

L if:

4

Tumor involves adjacent region(s)

Supraglottic region

Glottic region (with or without fixation)

Subglottic region

Involves intrinsic muscle(s): aryepiglottic, arytenoid, cricoarytenoid,
cricothyroid, thyroepiglottic, thyroarytenoid,
vocalis

L if:

x

Localized, NOS

REGIONAL, Direct Extension

R if:

1

Pyriform sinus
Postcricoid area
Hypopharynx NOS
Vallecula, including pharyngoepiglottic and glossoepiglottic folds
Base of tongue from laryngeal surface of epiglottis

R if:

2

Extends into cricoid and/or thyroid cartilage

REGIONAL, Lymph Nodes

Internal jugular: subdigastric
Anterior deep cervical: prelaryngeal, pretracheal, laterotracheal
(recurrent)
Cervical, NOS

DISTANT, Direct Extension or Metastasis

D if extension to:

1

Extrinsic muscle(s): omohyoid, sternohyoid, sternothyroid, thyrohyoid
(strap muscles)
Soft tissues of neck
Thyroid
Skin
Trachea
Upper esophagus

D if:

2

Other distant involvement

DISTANT, Lymph Nodes

Supraclavicular
Submandibular
Other distant nodes

IN_SITU; noninvasive

LOCALIZED

Single tumor $\geq$ 2 cm. from carina and confined to one lung
and/or main stem bronchus

L if:

1

Tumor size is 3.0 cm. or less

L if:

2

Tumor size $>$ 3.0 cm.

L if:

3

Tumor size is unknown

L if:

4

Single tumor of any size $<$ 2 cm. from carina and confined to one
lung and/or main stem bronchus

L if:

5

Multiple masses confined to one lung and/or main stem bronchus

L if:

x

Localized, NOS

REGIONAL, Direct Extension

R if extension to:

1

Pleura, visceral/NOS
Pericardium, parietal/NOS
Pulmonary ligament

R if tumor involves:

2

Carina
Trachea
Esophagus

Nerve(s):

Recurrent laryngeal
Vagus
Phrenic
Cervical sympathetic (Horner's syndrome)

Major blood vessel(s):

Pulmonary artery or vein
Azygos vein
Superior vena cava

R if:

x

Extrapulmonary mediastinal extension, NOS

REGIONAL, Lymph Nodes

Intrapulmonary

Hilar (bronchial; parabronchial; pulmonary root)
Subcarinal; carinal

Mediastinal (paratracheobronchial; paratracheal; pericardial;
para-esophageal; para-aortic-above diaphragm)

DISTANT, Direct Extension or Metastasis

D if extension to:

1

Brachial plexus from superior sulcus or Pancoast tumor
Lung and/or main stem bronchus, contralateral
Pericardium, visceral
Heart
Pleura, parietal

D if extension to:

2

Rib, sternum, vertebra
Chest (thoracic) wall
Skeletal muscle
Skin of chest
Diaphragm
Abdominal organs

D if:

3

Other distant involvement

DISTANT, Lymph Nodes

Contralateral hilar or mediastinal (including bilateral)
Supraclavicular (transverse cervical)
Scalene
Cervical, NOS
Other distant nodes

LOCALIZED

Confined to bone
Tumor has broken through periosteum but not beyond
Abnormal configuration of bone

Localized, NOS

REGIONAL, Direct Extension

Surrounding tissues, including skeletal muscle(s)
Adjacent bone

REGIONAL, Lymph Nodes

First chain of nodes involved in the area of the
tumor

DISTANT, Direct Extension or Metastasis

Skin
Other distant involvement

DISTANT, Lymph Nodes

LYMPHATICS OF THE SKIN

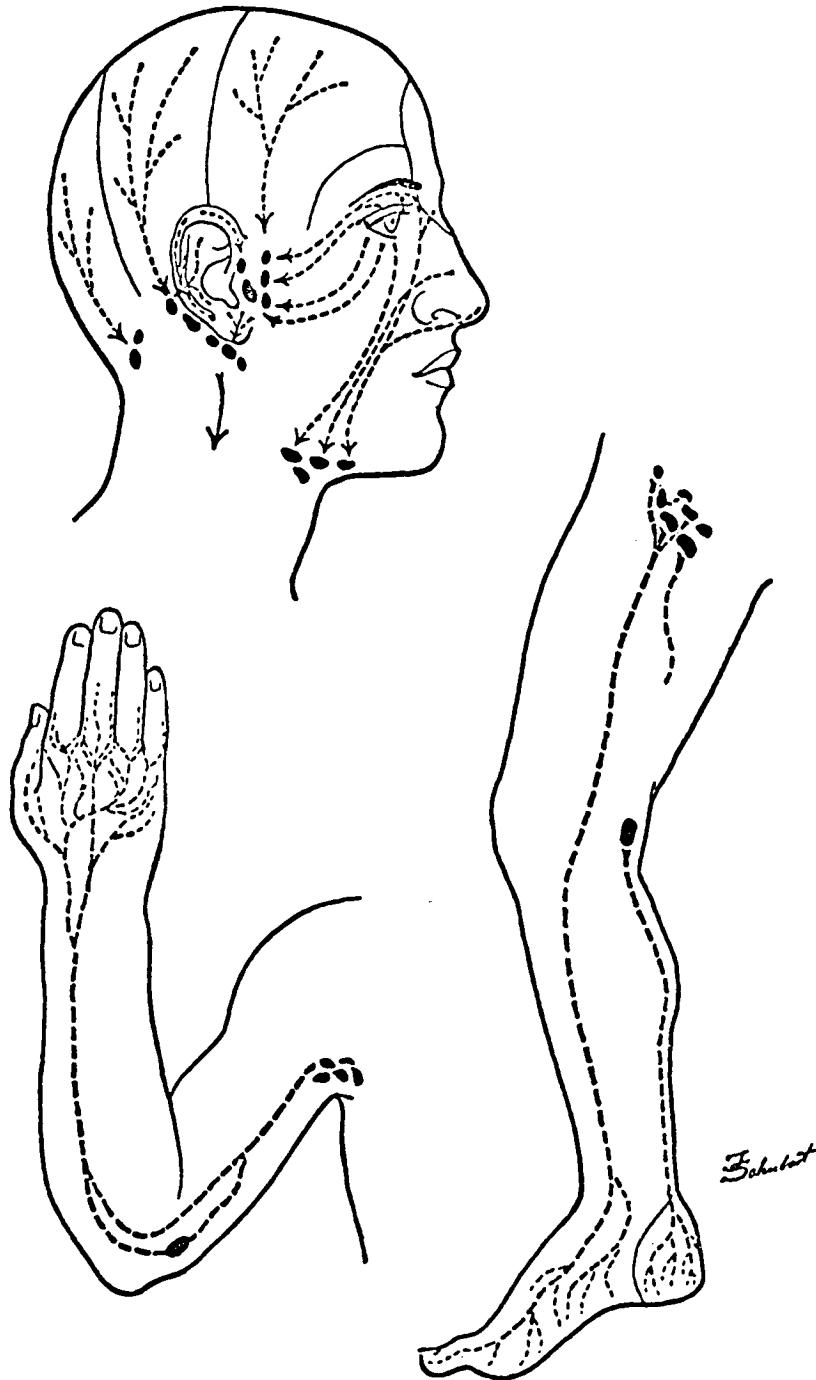


Fig. 100 Lymphatics of the skin of the face and upper and lower extremities.

Reproduced with permission from del Regato, Juan A., and Spjut, Harlan J.: Ackerman and del Regato's Cancer, ed. 5, St. Louis, 1977, The C. V. Mosby Co.

IN_SITU; intraepidermal (Clark's Level 1)

LOCALIZED

L if tumor invades:

1

Papillary dermis (Clark's Level 2)

L if tumor invades:

2

Papillary-reticular dermal interface (Clark's Level 3)

L if tumor invades:

3

Reticular dermis (Clark's Level 4)

L if:

4

Skin ulceration

Satellite nodule(s) within 2 cm. of outer border of
primary lesion

L if:

x

Localized, NOS; confined to skin/dermis, NOS

REGIONAL

R if tumor invades:

1

Subcutaneous tissue (through entire dermis) (Clark's Level 5)

R if:

2

Satellite nodule(s) more than 2 cm. from outer border
of primary lesion

REGIONAL, Lymph Nodes (by primary site)

Parotid: preauricular, infra-auricular

Forehead
 Temporal region
 Malar region
 Lateral half of eyelids
 Outer canthus
 Anterior half of ear

Submandibular (submaxillary)

Midline of forehead
 Medial half of eyelids
 Inner canthus
 Nose
 Lips
 Cheeks

Cervical

Head and neck tumors, any location
 Scapula, above transverse line

Supraclavicular (transverse cervical)

Chest wall
 Neck

Axillary

Arm
 Hand
 Shoulder
 Chest wall
 Scapula (upper back),
 below transverse line

Epitrochlear

Hand
 Forearm

Superficial inguinal

Lumbar region (lower back)
 Anterior abdominal wall
 Lower extremities (excluding
 heel)
 Perineum
 Perianal region

Popliteal

Heel
 Posterior leg

DISTANT, Direct Extension or Metastasis

D if extension to:

1

Underlying cartilage, bone, muscle

D if:

2

Metastatic (generalized) skin lesions

D if:

3

Other distant involvement

DISTANT, Lymph Nodes

NOTE: Skin of vulva use 841-844 schemes; penis use 871, 872, 874 schemes

IN SITU; intraepidermal

LOCALIZED

Single lesion confined to dermis

Localized, NOS

REGIONAL, Direct Extension

Skin ulceration

Subcutaneous tissues (through entire dermis)

DISTANT, Direct Extension or Metastasis

D if extension to:

1

Underlying cartilage, bone, muscle

D if:

2

Metastatic (generalized) skin lesions

REGIONAL, Lymph Nodes (by primary site)

Parotid: preauricular, infra-auricular

Forehead

Temporal region

Malar region

Lateral half of eyelids

Outer canthus

Anterior half of ear

Submandibular (submaxillary)

Midline of forehead

Medial half of eyelids

Inner canthus

Nose

Lips

Cheeks

Cervical

Head and neck tumors, any location

Scapula, above transverse line

Supraclavicular (transverse cervical)

Chest wall

Neck

Axillary

Arm

Hand

Shoulder

Chest wall

Scapula (upper back),
below transverse line

Epitrochlear

Hand

Forearm

Superficial inguinal

Lumbar region (lower back)

Anterior abdominal wall

Lower extremities (excluding
heel)

Perineum

Perianal region

Popliteal

Heel

Posterior leg

DISTANT, Direct Extension or Metastasis

D if extension to:

1

Underlying cartilage, bone, and muscle

D if:

2

Metastatic (generalized) skin lesions

D if:

3

Other distant involvement

DISTANT, Lymph Nodes

LYMPHATICS OF THE BREAST

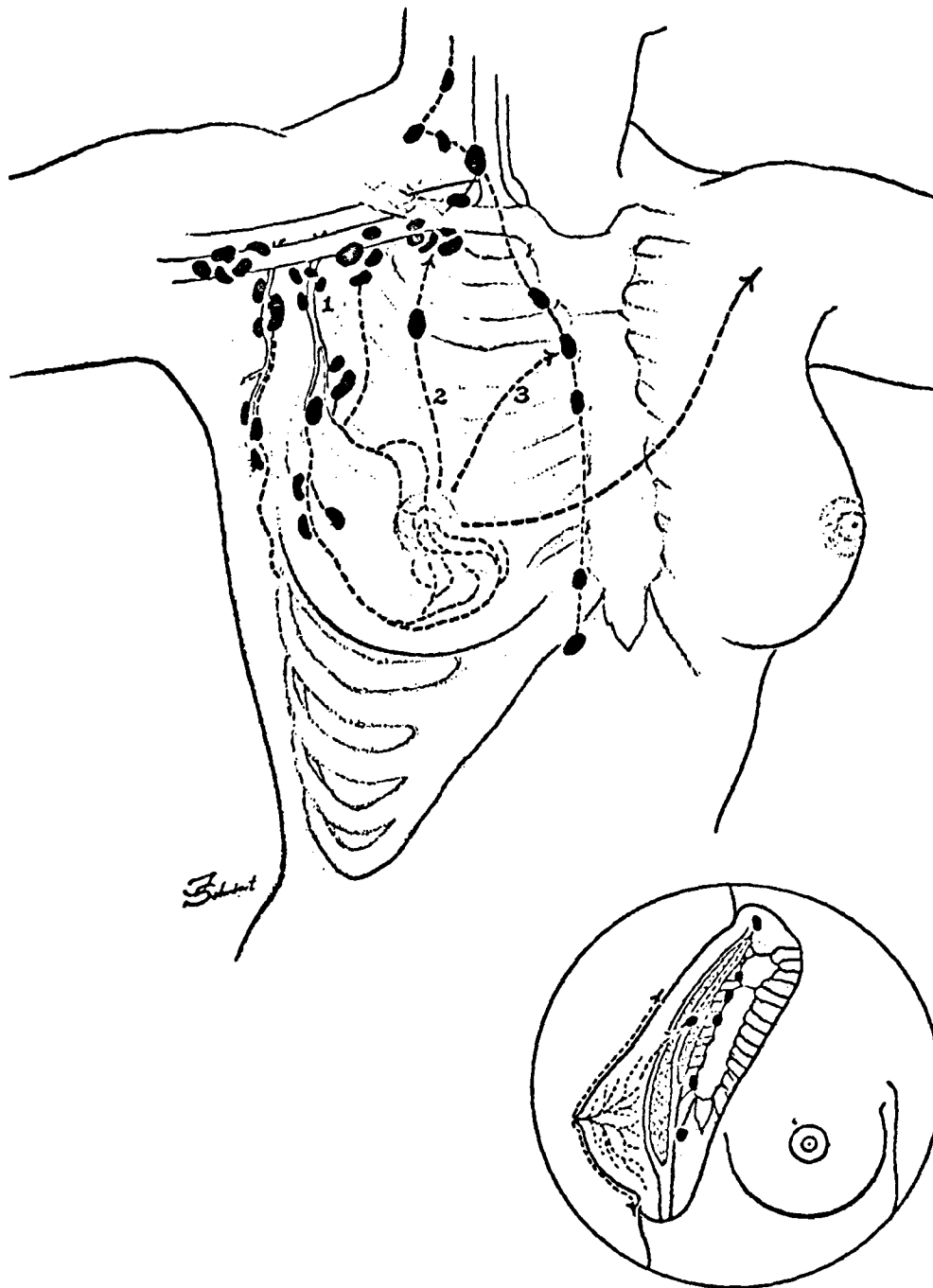


Fig. 669. Lymphatics of the breast leading to, 1, axillary nodes which are distributed over a large area from the lateral aspects of the breast proper to the axillary vessels; 2, interpectoral chain leading to interpectoral node (circle detail) and to high nodes in the axilla; 3, chain of the internal mammary leading frequently to node in second interspace and to supraclavicular and cervical nodes. The lymphatics of the breast may empty into the opposite axillary nodes.

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IN SITU (including noninfiltrating intraductal or lobular)

LOCALIZED

Primary tumor involving:

Breast tissue only

(may be described clinically as fixation of tumor within breast, but not to skin, skin dimpling, tethering, or retraction)

Nipple and/or areola

(may be described clinically as nipple and/or areolar attachment, thickening, induration, retraction, or involvement, Paget's disease of nipple (including ulceration of nipple))

- L if tumor size is <2 cm.
1
- L if tumor size is 2-4.9 cm.
2
- L if tumor size is $\geq$ 5 cm.
3
- L if tumor size is unknown
4
- L Localized, NOS
x

REGIONAL, Direct Extension

Primary tumor invading:

Subcutaneous tissue

Skin of primary breast

(may be described clinically as: adherence, attachment, fixation, induration, thickening of skin)

- R if tumor size is <2 cm.
1
- R if tumor size is 2-4.9 cm.
2
- R if tumor size is $\geq$ 5 cm.
3
- R if tumor size is unknown
4

Primary tumor of any size with:

Skin edema, peau d'orange, "pigskin"
En curraise, lenticular nodules
Inflammation of skin, erythema
Ulceration of skin of breast
Satellite nodules in skin of primary breast
Pectoral fascia or pectoral muscle involvement (may be described clinically as underlying tissue fixation or attachment)

R if:

5

Tumor of any size with above description

R if:

6

Invasion of (or fixation to) chest wall, ribs, intercostal or serratus anterior muscles

REGIONAL, Lymph Nodes

Low axillary (adjacent to tail of breast)
Mid axillary: central, interpectoral, Rotter's node
High axillary: subclavicular, axillary vein nodes, apical
Axillary, NOS
Internal mammary (parasternal)

Nodules in axillary fat

DISTANT, Direct Extension or Metastasis

D if

1

Skin over sternum, upper abdomen, axilla or opposite breast
Satellite nodule(s) in adjacent skin

D if tumor involves:

2

Breast, contralateral
Adrenal gland
Ovary

D if:

3

Other distant involvement

DISTANT, Lymph Nodes

Infraclavicular
Supraclavicular (transverse cervical)
Cervical, NOS
Axillary and/or internal mammary, contralateral
Other distant nodes

LYMPHATICS OF THE UTERUS

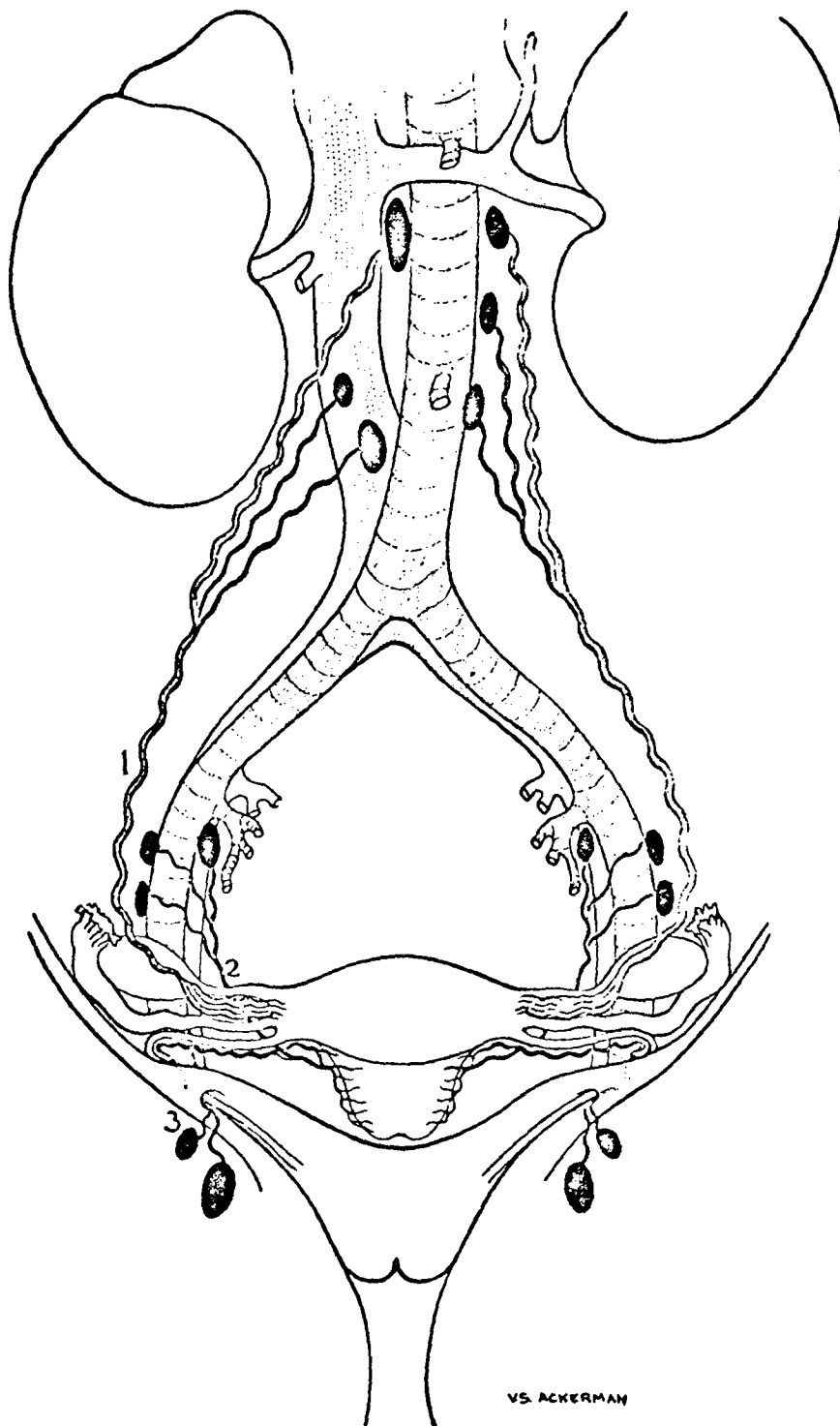


Fig. 619. Schematic representation of the lymphatics of the uterus showing, 1, the utero-ovarian pedicle; 2, the external iliac pedicle; and, 3, the round ligament pedicle leading to the inguinal lymph nodes.

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IN_SITU

Non-invasive, pre-invasive, intraepithelial
League of Nations Stage 0

LOCALIZED

L if:

1

Minimal stromal invasion; "microinvasion"

L if:

2

Invasive cancer confined to cervix

L if:

x

League of Nations Stage I

REGIONAL, Direct Extension

R if extension to:

1

Corpus uteri (body of uterus)

R if extension to:

2

Upper 2/3 of vaginal wall (including fornices and vagina, NOS)
Parametrium

Ligaments: broad, uterosacral, cardinal

League of Nations Stage II

R if extension to:

3

Lower 1/3 of vaginal wall

Pelvic wall(s)

League of Nations Stage III

R if extension to:

4

Rectal and/or bladder wall (excluding mucosa)

Bullous edema of bladder mucosa

Cul de sac (rectouterine pouch)

REGIONAL, Lymph Nodes

Hypogastric
Iliac (common, internal, external)
Obturator
Paracervical
Parametrial/pelvic, NOS
Sacral (laterosacral, presacral, sacral promontory, uterosacral)

DISTANT, Direct Extension or Metastasis

D if extension to:

1

Bladder mucosa
Rectal mucosa
Ureter
Urethra
Sigmoid colon
Small intestine
Vulva
Ovary and/or fallopian tube

D if:

2

"Frozen pelvis"

D if:

3

Other distant involvement

D if:

x

League of Nations Stage IV

DISTANT, Lymph Nodes

Aortic (para-aortic, periaortic, lumbar)
Inguinal
Other distant nodes

IN_SITU, pre-invasive, non-invasive

LOCALIZED

L if:

1

Invasive cancer confined to endometrium

L if:

2

Myometrium/serosa (perimetrium) invaded

Invasive cancer confined to corpus, clinically:
(Depth of invasion unknown)

L if:

3

Sounding of uterine cavity is $\leq$ 8 cm. from cervical os

L if:

4

Sounding of uterine cavity is $>$ 8 cm. from cervical os

L if:

x

Localized, NOS

REGIONAL, Direct Extension

R if extension to:

1

Cervix uteri, including endocervix

R if extension to:

2

Parametrium

Ligaments: broad, round, uterosacral

R if extension to:

3

Pelvic wall(s)

Ovary and/or fallopian tube(s)

R if extension to:

4

Rectal and/or bladder wall (excluding mucosa)

REGIONAL, Lymph Nodes

Hypogastric
Iliac (common, internal, external)
Obturator
Paracervical
Parametrial/pelvic, NOS
Sacral (laterosacral, sacral promontory, presacral, uterosacral)
Superficial inguinal
Lateral aortic, preaortic

DISTANT, Direct Extension or Metastasis

D if extension to:

1

Vagina
Vulva
Cul de sac (rectouterine pouch)
Rectum or bladder mucosa
Ureter
Sigmoid colon
Small intestine
Serosa of abdominal organs

D if:

2

"Frozen pelvis"

D if:

3

Other distant involvement

DISTANT, Lymph Nodes

LOCALIZED

Confined to ovarian tissue--one ovary or, if not specified to be metastatic, both ovaries

Localized, NOS

REGIONAL, Direct Extension

Peritoneum (pelvic; immediately adjacent, not implants)
Broad ligament, ipsilateral
Mesovarium, ipsilateral
Fallopian tube, ipsilateral
Adnexa, ipsilateral

REGIONAL, Lymph Nodes

Aortic (lateral and preaortic)
Hypogastric
Iliac (common, internal, external)
Ohturator
Retroperitoneal/pelvic, NOS

DISTANT, Direct Extension or Metastasis

D if extension to:

1

Sigmoid
Omentum
Cul de sac (rectouterine pouch)
Uterus
Rectosigmoid, rectum
Small intestine
Bladder, ureter

D if:

2

Implants on ovary, fallopian tube, cul de sac (rectouterine pouch),
peritoneum, omentum
Metastatic to contralateral ovary and/or fallopian tube

D if:

3

Other distant involvement

DISTANT, Lymph Nodes

Inguinal
Other distant nodes

LOCALIZED

Confined to fallopian tube(s) (specify bilateral involvement)

Localized, NOS

REGIONAL, Direct Extension

Peritoneum
Broad ligament, ipsilateral
Mesosalpinx, ipsilateral
Ovary, ipsilateral
Uterus (endometrium), ipsilateral

REGIONAL, Lymph Nodes

Aortic (lateral and preaortic)
Hypogastric
Iliac (common, internal, external)
Obturator
Retroperitoneal/pelvic, NOS

DISTANT, Direct Extension or Metastasis

D if extension to:

1

Omentum
Cul de sac (rectouterine pouch)
Sigmoid
Rectosigmoid
Ovary, contralateral
Small intestine

D if:

2

Other distant involvement

DISTANT, Lymph Nodes

Inguinal
Other distant nodes

IN SITU; noninvasive

LOCALIZED

L if:

1

Invasive cancer confined to submucosa (stroma)

L if:

2

Musculature invaded

L IF:

x

Localized, NOS

REGIONAL, Direct Extension

Cervix

Vulva

Cul de sac (rectouterine pouch)

Vesicovaginal septum (paracystium)

Rectovaginal septum

REGIONAL, Lymph Nodes

External iliac

Internal iliac (hypogastric)

Common iliac (sacral promontory)

DISTANT, Direct Extension or Metastasis

D if extension to:

1

Urethra

Bladder

Rectum

D if:

2

"Frozen pelvis"

DISTANT, Lymph Nodes

Inguinal

Periaortic

Other distant lymph nodes

LYMPHATICS OF THE VULVA

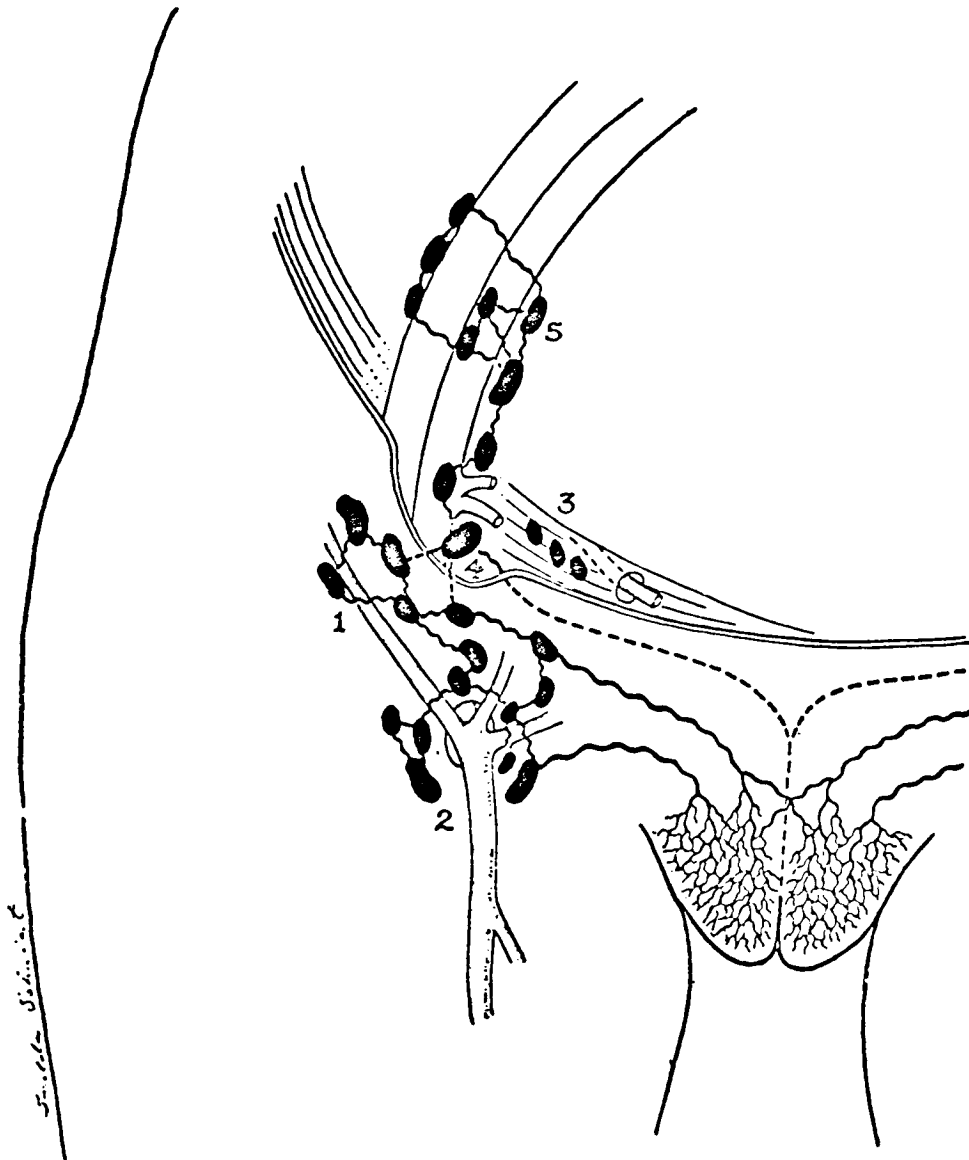


Fig. 662. Lymphatics of the vulva leading to, 1, the superficial inguinal lymph nodes; 2, the superficial femoral nodes; 3, the deep inguinal nodes through the main clearing station; 4, the node of Cloquet; 5, the external iliac nodes.

Reproduced with permission from del Regato, Juan A., and Spjut, Harlan J.: Ackerman and del Regato's Cancer, ed. 5, St. Louis, 1977, The C. V. Mosby Co.

IN_SITU; noninvasive; Bowen's disease

LOCALIZED

Invasive cancer confined to submucosa
Confined to skin of vulva
Musculature invaded

Localized, NOS

REGIONAL, Direct Extension

Vaginal wall or orifice
Urethral orifice
Perineum
Perianal skin
Anus

REGIONAL, Lymph Nodes

Superficial inguinal
Deep inguinal: Rosenmuller's or Cloquet's node
External iliac

DISTANT, Direct Extension or Metastasis

D if extension to:

1

Perineal body
Rectal mucosa

D if:

2

Other distant involvement

DISTANT, Lymph Nodes

*Except melanomas which are classified according to the
staging scheme for melanoma.

LYMPHATICS OF THE PROSTATE

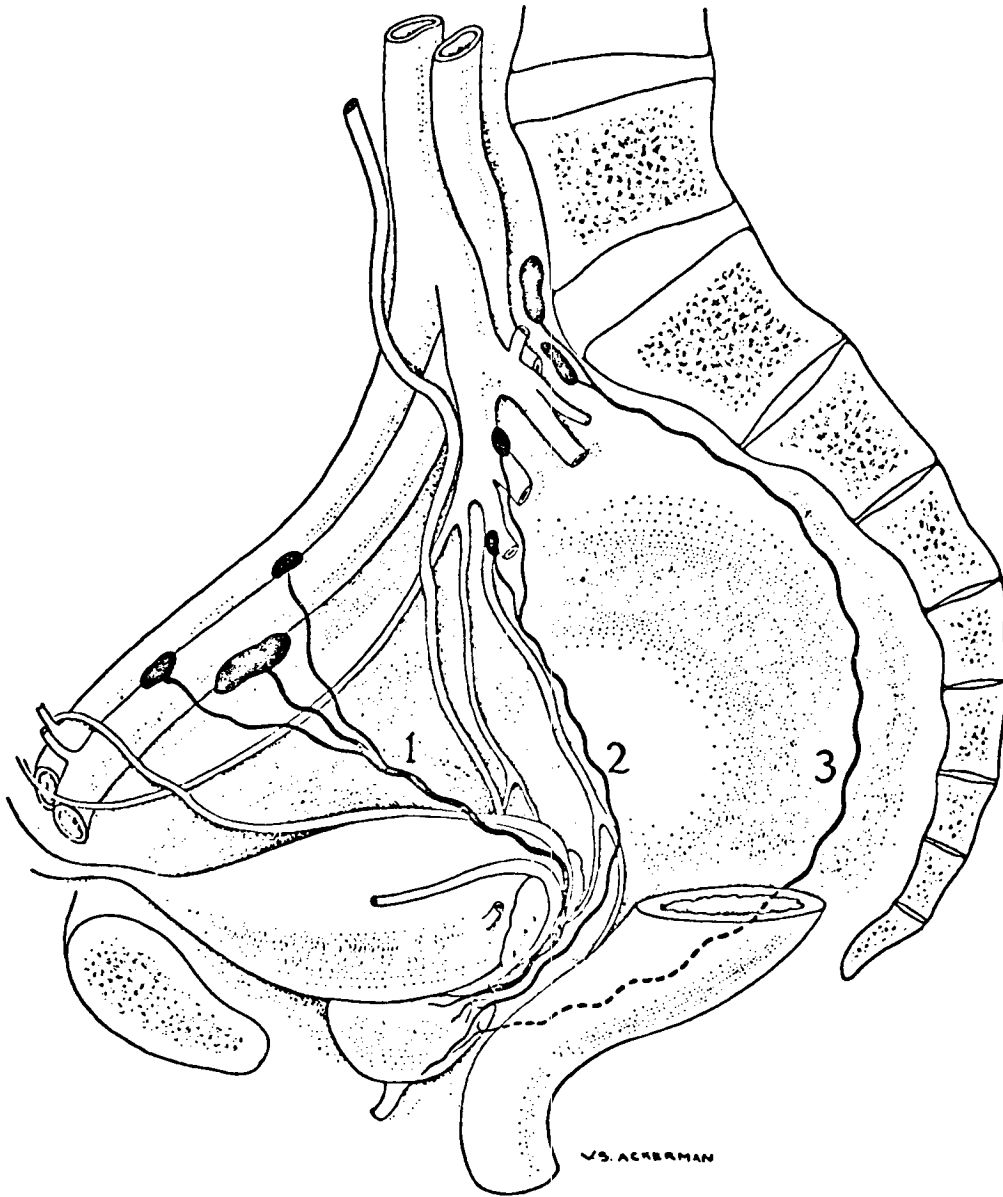


Fig. 542. Schematic representation of lymphatics of the prostate showing, 1, external iliac pedicle; 2, hypogastric pedicle; and 3, posterior pedicle. The inferior pedicle which follows a downward direction and ends in hypogastric nodes is not illustrated here.

Reproduced with permission from del Regato, Juan A., and Spjut, Harlan J.: *Ackerman and del Regato's Cancer*, ed. 5, St. Louis, 1977, The C. V. Mosby Co.

IN_SITU; noninvasive

LOCALIZED

L if:

1

Invasive cancer confined to prostatic capsule
(intra-capsular)

L if:

2

Invasion of prostatic capsule

L if:

3

Prostatic urethra involved

L if:

x

Localized, NOS

REGIONAL, Direct Extension

R if extension:

1

Periprostatic tissues
Seminal vesicle(s)

R if:

2

Through prostatic capsule, including "fixation"

R if extension to:

3

Rectovesical (Denonvillier's) fascia
Bladder
Rectum
Extraprostatic urethra (membranous urethra)

REGIONAL, Lymph Nodes

Hypogastric
Iliac (common, internal, external)
Obturator
Periprostatic/pelvic, NOS
Sacral (lateral sacral, sacral promontory, presacral)

DISTANT, Direct Extension or Metastasis

D if extension to:

1

Skeletal muscles: levator ani
Pelvic bone
Pelvic wall
Ureter
Sigmoid colon
Penis

D if:

2

"Frozen pelvis"

D if:

3

Other distant involvement

DISTANT, Lymph Nodes

Aortic (para-aortic, periaortic, lumbar)
Inguinal
Other distant nodes

LYMPHATICS OF THE TESTIS

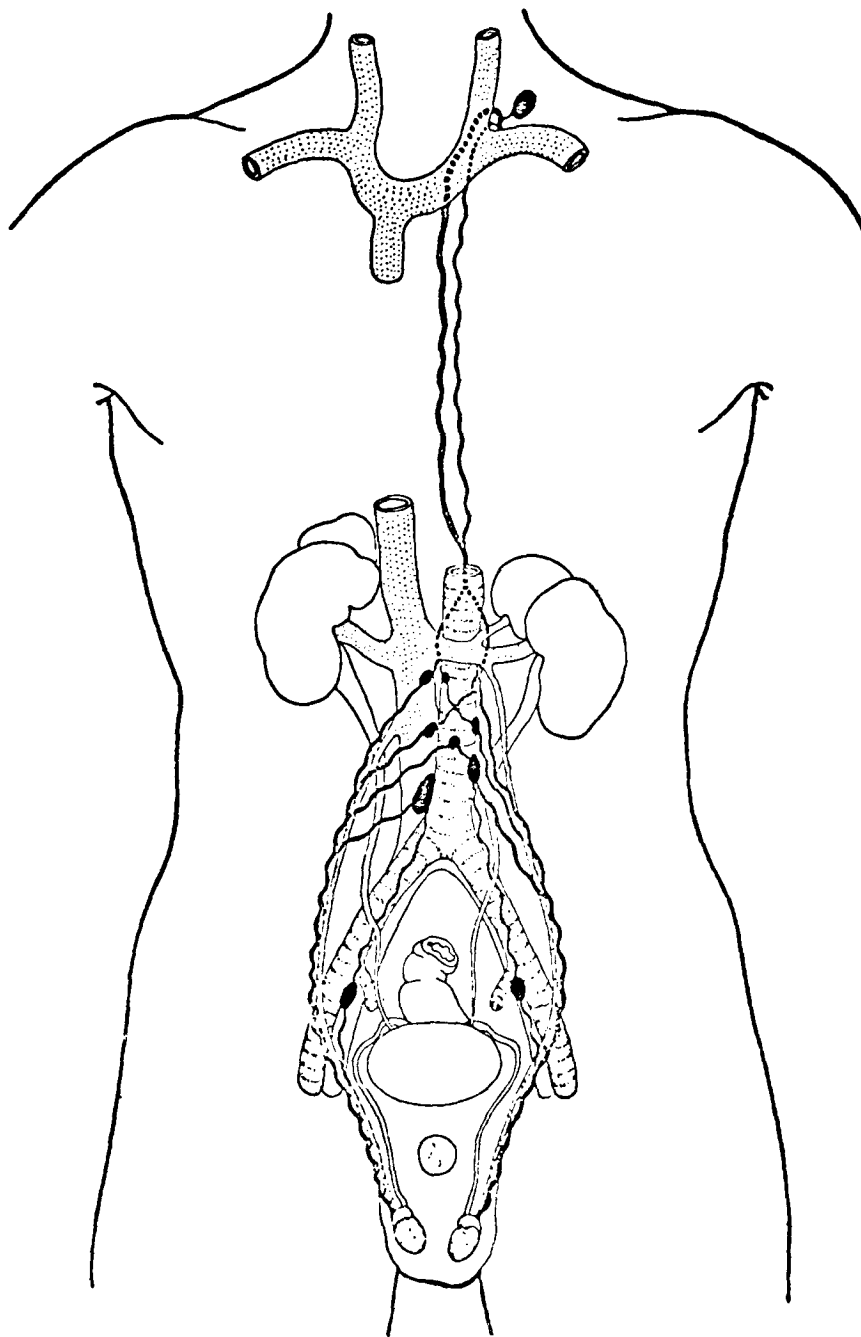


Fig. 562. Schematic representation of the lymphatics of the testis showing main drainage in the para-aortic lymphatics and further lymphatic extension by way of the thoracic duct. The left supraclavicular node is fairly frequently involved. The lymphatics of the epididymis drain into the external iliac lymph nodes.

Reproduced with permission from del Regato, Juan A., and Spjut, Harlan J.: *Ackerman and del Regato's Cancer*, ed. 5, St. Louis, 1977, The C. V. Mosby Co.

LOCALIZED

Confined to tunica albuginea (encapsulated tumor)
Tunica vaginalis involved

Localized, NOS

REGIONAL, Direct Extension

Epididymis
Scrotum, ipsilateral
Spermatic cord, ipsilateral
Vas deferens

REGIONAL, Lymph Nodes

Aortic, below level of renal arteries
External iliac
Retroperitoneal/pelvic, NOS

DISTANT, Direct Extension or Metastasis

D if extension to:

1

Ulceration of scrotum
Scrotum, contralateral
Testis, bilateral
Penis

Kidney
Adrenal gland
Retroperitoneum

D if:

2

Other distant involvement

DISTANT, Lymph Nodes

Inguinal
Other distant nodes

IN_SITU; noninvasive (Bowen's Disease)

LOCALIZED

Invasive cancer confined to skin of penis, prepuce and/or glans

Localized, NOS

REGIONAL, Direct Extension

R if:

1

Corpus cavernosum

R if:

2

Urethra

Satellite nodule(s) on prepuce or glans

Skin: pubic, scrotal, abdominal, perineum

REGIONAL, Lymph Nodes

External iliac

Internal iliac (hypogastric)

Superficial inguinal

Deep inguinal: Rosenmuller's or Cloquet's node

DISTANT, Direct Extension or Metastasis

Testis

Other distant involvement

DISTANT LYMPH NODE

*Except melanomas which are classified according to the
staging scheme for melanoma.

LYMPHATICS OF THE BLADDER

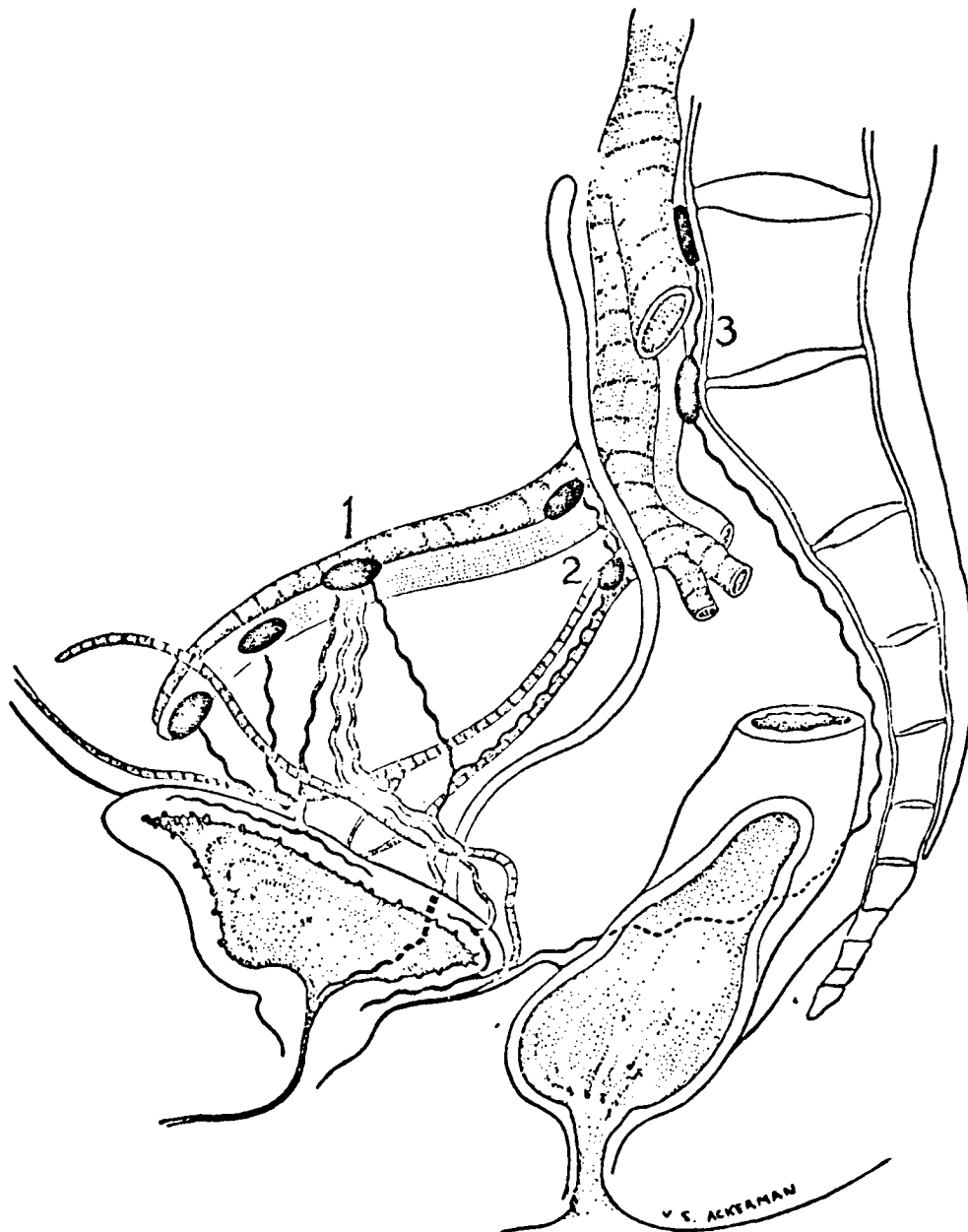


Fig. 534. Anatomic sketch of the lymphatics of the bladder drained mainly by, 1, the external iliac nodes but also by, 2, hypogastric and, 3, common iliac nodes.

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IN_SITU; noninvasive; intraepithelial

LOCALIZED

L if:

1

Confined to mucosa

L if:

2

Submucosa (subepithelial connective tissue; tunica propria; lamina propria) invaded

L if:

3

Superficial muscle (less than one half way through the muscle coat)

L if:

4

Deep muscle (half-way or more through the muscle coat)

L if:

x

Localized, NOS; no detailed information of above

REGIONAL, Direct Extension

R if:

1

Invasion of perivesical fat
Invasion of (through) serosa; peritoneum
Surrounding connective tissue (including periprostatic tissue); adjacent tissue, NOS

R if extension to:

2

Prostate, including prostatic urethra
Ureter
Vas deferens
Seminal vesicle
Rectovesical (Denonvillier's) fascia

R if extension to:

3

Rectum, male
Parametrium and uterus, female
Bladder is "fixed"
Vagina
Pubic Bone
Urethra, female

REGIONAL, Lymph Nodes

Perivesical
Hypogastric
Iliac (common, internal, external)
Obturator
Sacral (laterosacral, presacral, sacral promontory)
Pelvic, NOS; regional, NOS

DISTANT, Direct Extension or Metastasis

D if extension to:

1

Tumor fixed to (invading) pelvic wall
Abdominal wall
Rectum, female
Bones, excluding pubic bone
Sigmoid

D if:

2

Other distant involvement

DISTANT, Lymph Nodes

Aortic (para-aortic, periaortic, lumbar)
Inguinal
Other distant node(s)

LOCALIZED

L if tumor confined to:

1

Kidney cortex

Kidney medulla

L if:

2

Renal pelvis or calyces involved

L if:

x

Localized, NOS

REGIONAL, Direct Extension

R if:

1

Perirenal tissue (fat)

Renal (Gerota's) fascia

Retroperitoneal soft tissues (retroperitoneal space)

Blood vessels: perirenal veins, extrarenal portion of renal vein, aorta, renal artery, hilar blood vessels, vena cava

Adrenal gland, ipsilateral

Ureter, including implant(s), ipsilateral

R if:

2

Peritoneum

Diaphragm

Tail of pancreas

Ascending colon from right kidney

Descending colon from left kidney

Duodenum from right kidney

REGIONAL, Lymph Nodes

Hilar (small nodes at renal pelvis)

Lateral aortic (retroperitoneal)

DISTANT, Direct Extension or Metastasis

D if extension to:

1

Kidney, bilateral
Ureter, contralateral
Adrenal gland, contralateral
Ribs
Stomach
Spleen
Liver

D if:

2

Other distant involvement

DISTANT, Lymph Nodes

IN_SITU; noninvasive; intraepithelial

LOCALIZED

Invasive cancer confined to:

Submucosa
Musculature

Localized, NOS

REGIONAL, Direct Extension

Peripelvic tissue
Retroperitoneal soft tissue (retroperitoneal space)
Major blood vessel(s): aorta, renal artery or vein, vena cava
Ureter, including implants
Kidney parenchyma
Adrenal gland
Duodenum from right renal pelvis

REGIONAL, Lymph Nodes

Hilar (renal hilus)
Lateral aortic (retroperitoneal)

DISTANT, Direct Extension or Metastasis

D if extension to:

1

Bladder
Spleen
Pancreas
Liver
Descending colon

D if:

2

Other distant involvement

DISTANT, Lymph Nodes

IN_SITU; noninvasive; intraepithelial

LOCALIZED

Invasive cancer confined to:
Submucosa
Musculature

Localized, NOS

REGIONAL, Direct Extension

Periurethral tissue
Retroperitoneal soft tissue (retroperitoneal space)
Psoas muscle

Implant(s) distal in ureter
Bladder
Kidney, ipsilateral

Duodenum from right ureter
Ascending colon from right ureter
Descending colon from left ureter

REGIONAL, Lymph Nodes

Periureteral
Hypogastric
Iliac (common, internal, external)
Lateral aortic
Retroperitoneal/pelvic, NOS

DISTANT, Direct Extension or Metastasis

D if extension to:
1

Uterus
Pancreas
Implants in bladder
Prostate

D if:
2

Other distant involvement

DISTANT, Lymph Nodes

IN_SITU; noninvasive

LOCALIZED

L if:

1

Confined to one lobe and/or isthmus

L if:

2

Both lobes involved

Thyroid gland capsule involved

Multiple foci but confined to thyroid gland

L if:

3

Through capsule of gland, but not beyond

L if:

x

Localized, NOS

REGIONAL, Direct Extension

R if:

1

Pericapsular tissues

Strap muscle(s): sternothyroid, omohyoid, sternohyoid

Nerve(s): recurrent laryngeal, vagus

R if:

2

Major blood vessel(s): carotid artery, thyroid artery or vein,
jugular vein

Soft tissues of neck

Esophagus

Larynx, including thyroid and cricoid cartilages

Sternocleidomastoid muscle

Tumor is described as "fixed to adjacent tissues"

REGIONAL, Lymph Nodes

Anterior deep cervical: prelaryngeal, pretracheal, laterotracheal
(recurrent)

Internal jugular: subdigastric

Retropharyngeal

Cervical, NOS

DISTANT, Direct Extension or Metastasis

D if extension to:

1

Trachea

Mediastinal tissues

Skeletal muscle, other than strap muscles and sternocleidomastoid

Bone

D if:

2

Other distant involvement

DISTANT, Lymph Nodes

Submandibular (submaxillary)

Submental

Other distant nodes

LYMPH NODES AND LYMPHOID April, 1977
TISSUE
960-969, 416, 460,
471, 491, 640, 692
Histology: 959 thru 969, 975

Stage I (Localized)

Confined to one lymphatic region above or below
the diaphragm

Stage II (Regional)

Involvement of more than one lymphatic region on only
one side of the diaphragm

Stage III (Distant)

1
Involvement of lymphatic regions on both sides of the
diaphragm

Stage IV (Distant)

2
Bone
Bone marrow
Lung and/or pleura
Liver
Kidney
Gastrointestinal tract (but not primary G.I.)
Skin lesions or subcutaneous nodules (but not primary skin)

SYSTEMIC SYMPTOMS

Night sweats
Unexplained fever
Pruritis
Unexplained weight loss

NOTE: Lymphoid tissue includes spleen, lingual and palatine tonsils,
adenoids (pharyngeal tonsils), thymus and Waldeyer's ring, NOS.