

# Summary

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# Staging

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# Guide

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Cancer Surveillance  
Epidemiology and  
End Results Reporting

SEER Program  
April 1977

## **SUNNARY STAGING GUIDE**

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## 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 L<sub>1</sub>. 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 (L<sub>1</sub> through L<sub>4</sub>) in order to indicate Clark's levels of invasion. Sites considered to be distant involvement by direct extension are coded D<sub>1</sub> as distinct from D<sub>2</sub> or D<sub>3</sub> 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:

<u>ICD-O</u> <u>Number</u>	<u>PRIMARY SITE CODE</u>
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, NCS (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 vermilion 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.

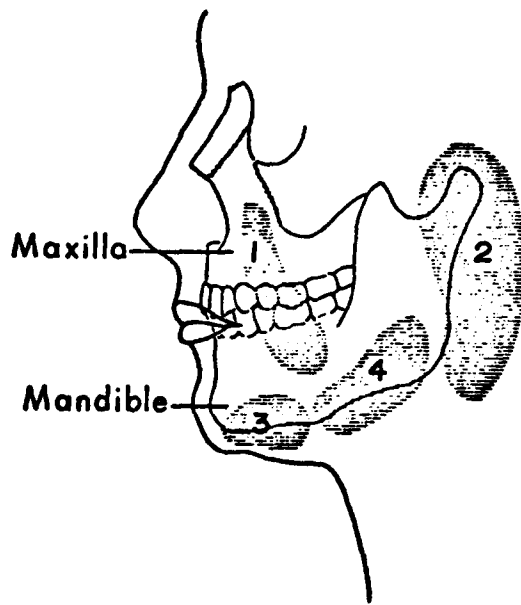
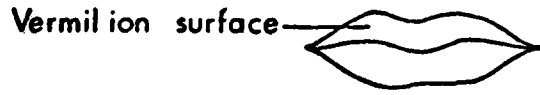
## **HYPOPHARYNX**

**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.

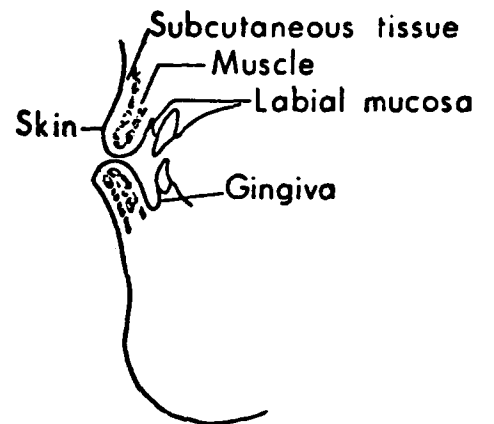
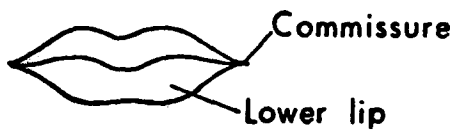
**Posterior Pharyngeal Wall** extends from the level of the tip of the epiglottis to the inferior margin of the cricoid cartilage, and laterally to the posterior margins of the pyriform sinus.

# VERMILION SURFACE OF UPPER LIP



## REGIONAL NODES

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



**IN\_SITU: noninvasive**

**LOCALIZED**

Vermilion surface  
Skin of lip  
Labial mucosa (inner lip)  
Musculature  
Multiple foci  
  
Localized, NCS

**REGIONAL. Direct Extension**

R<sub>1</sub> if:  
Commissure(s) of lips  
Lower lip

R<sub>2</sub> if:  
Buccal mucosa (inner cheek)  
Gingiva, upper

R<sub>3</sub> if:  
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

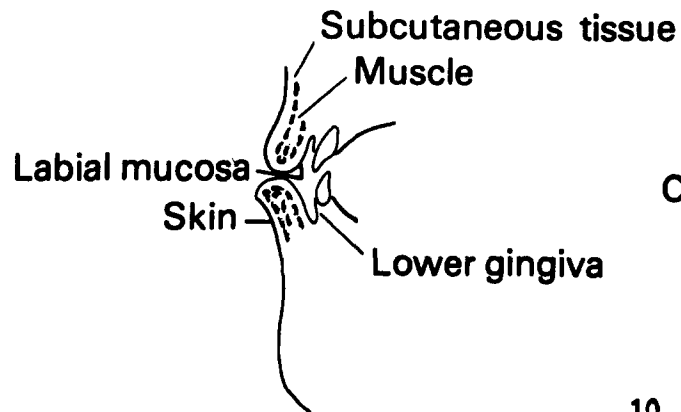
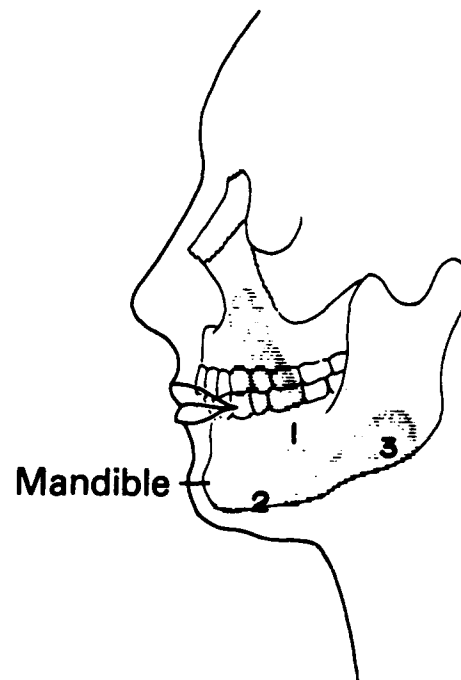


# LOWER LIP



## REGIONAL NODES

1. Facial
2. Submental
3. Submandibular



**IN\_SITU; noninvasive**

**LOCALIZED**

Versilion surface  
Skin of lip  
Labial mucosa (inner lip)  
Musculature  
Multiple foci

Localized, NOS

**REGIONAL. Direct Extension**

R<sub>1</sub> if:  
Commissure(s) of lips  
Upper lip

R<sub>2</sub> if:  
Buccal mucosa (inner cheek)  
Gingiva, lower

R<sub>3</sub> if:  
Mandible

**REGIONAL. Lymph Nodes**

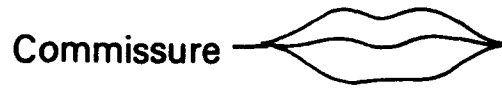
Facial: mandibular  
Submental  
Submandibular (submaxillary)

**DISTANT. Direct Extension or Metastasis**

**DISTANT. Lymph Nodes**

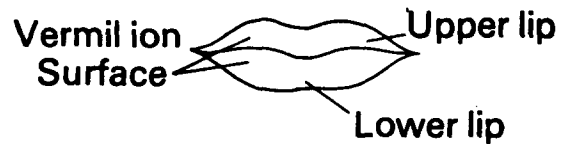
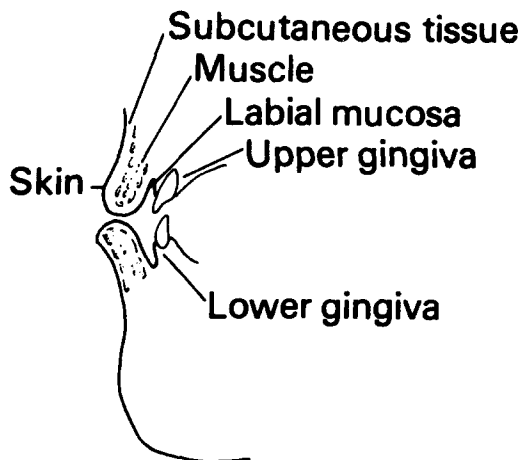
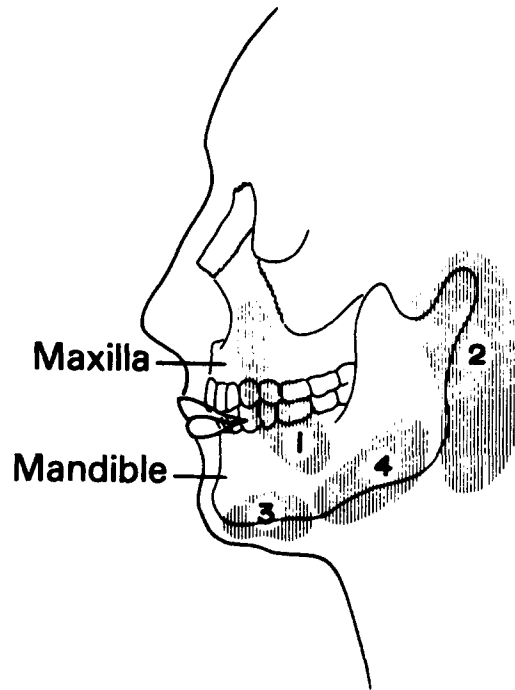
Internal jugular  
Upper cervical (including cervical, NOS)  
Supraclavicular (transverse cervical)  
Other distant nodes

# 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)  
Musculature

Localized, NOS

**REGIONAL. Direct Extension**

$R_1$  if:  
Both lips

$R_2$  if:  
Buccal mucosa (inner cheek)  
Gingiva

$R_3$  if:  
Maxilla  
Mandible  
Nose

**REGIONAL. Lymph Nodes**

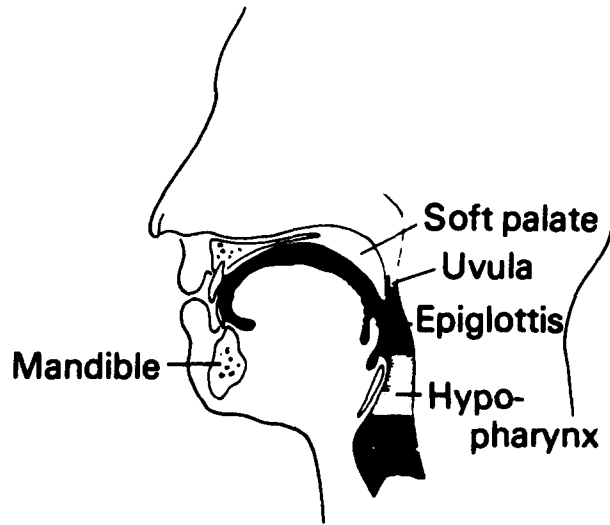
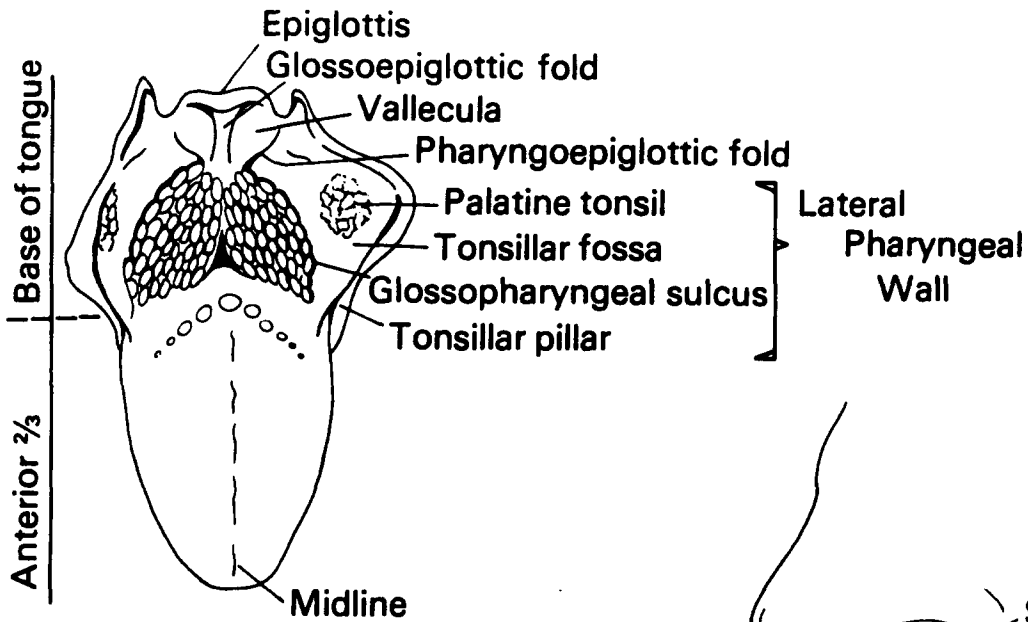
Facial: mandibular  
Parotid: infra-auricular, preauricular  
Submental  
Submandibular (submaxillary)

**DISTANT. Direct Extension or Metastasis**

**DISTANT. Lymph Nodes**

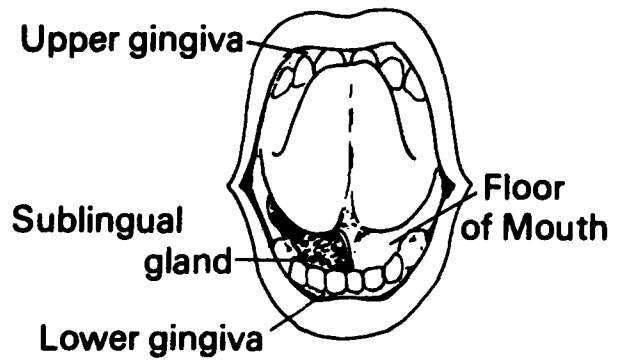
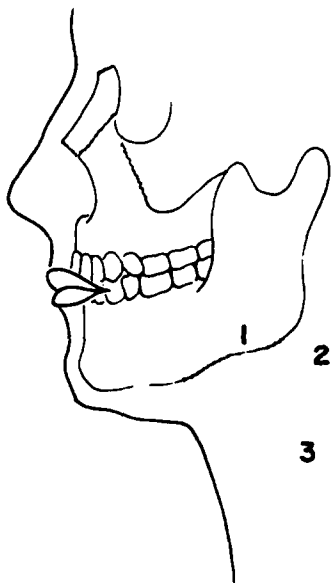
Internal jugular  
Upper cervical (including cervical, NOS)  
Supraclavicular (transverse cervical)  
Other distant nodes

# 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:

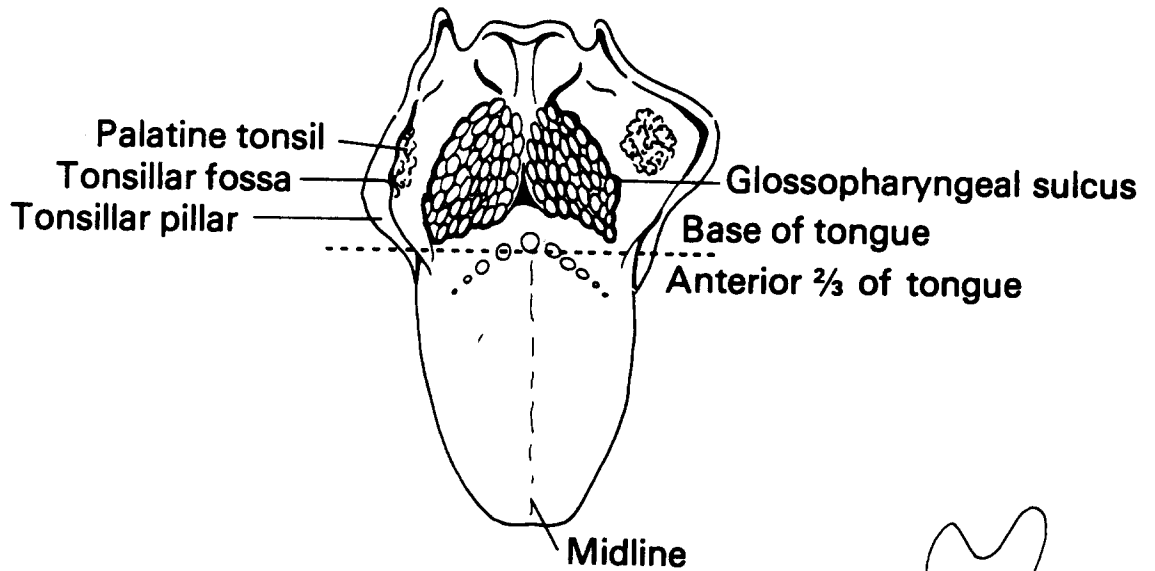
2

Other distant involvement

DISTANT, Lymph Nodes

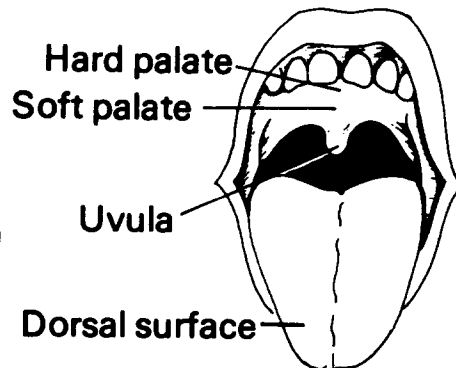
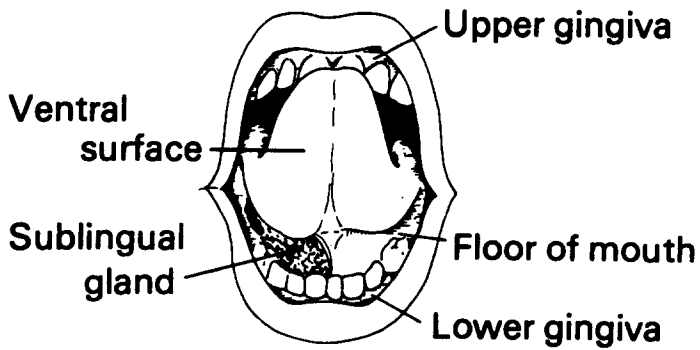
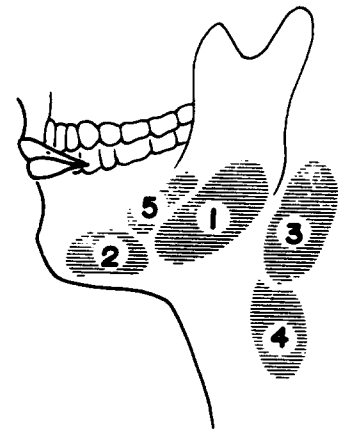
Supraclavicular (transverse cervical)  
Other distant nodes

# ANTERIOR 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

**DISIANT, 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

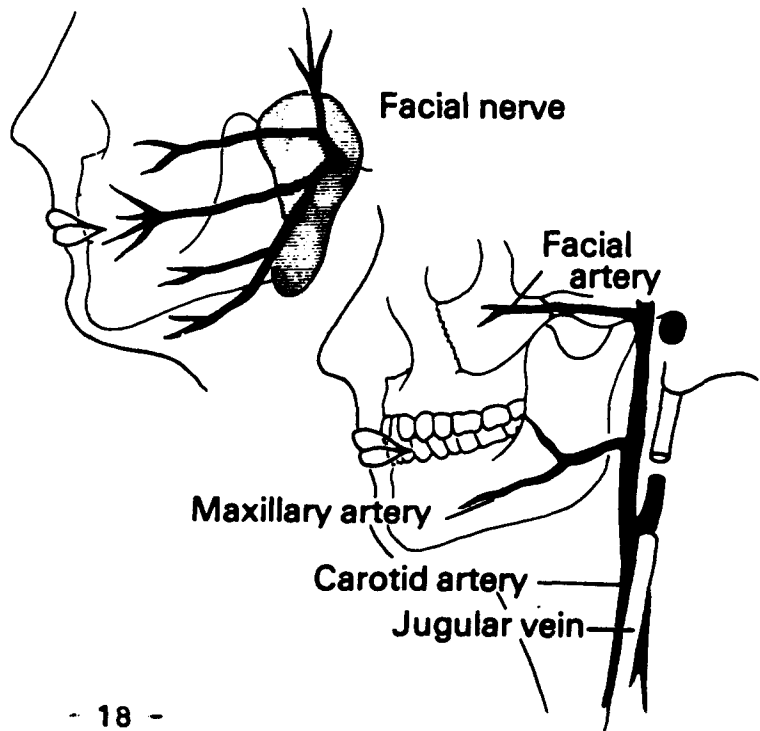
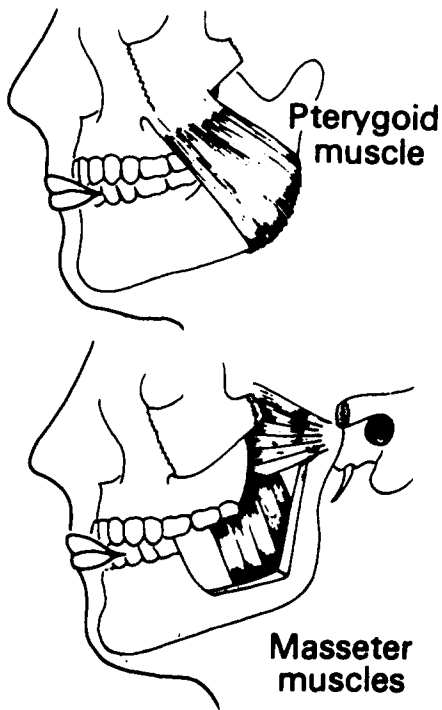
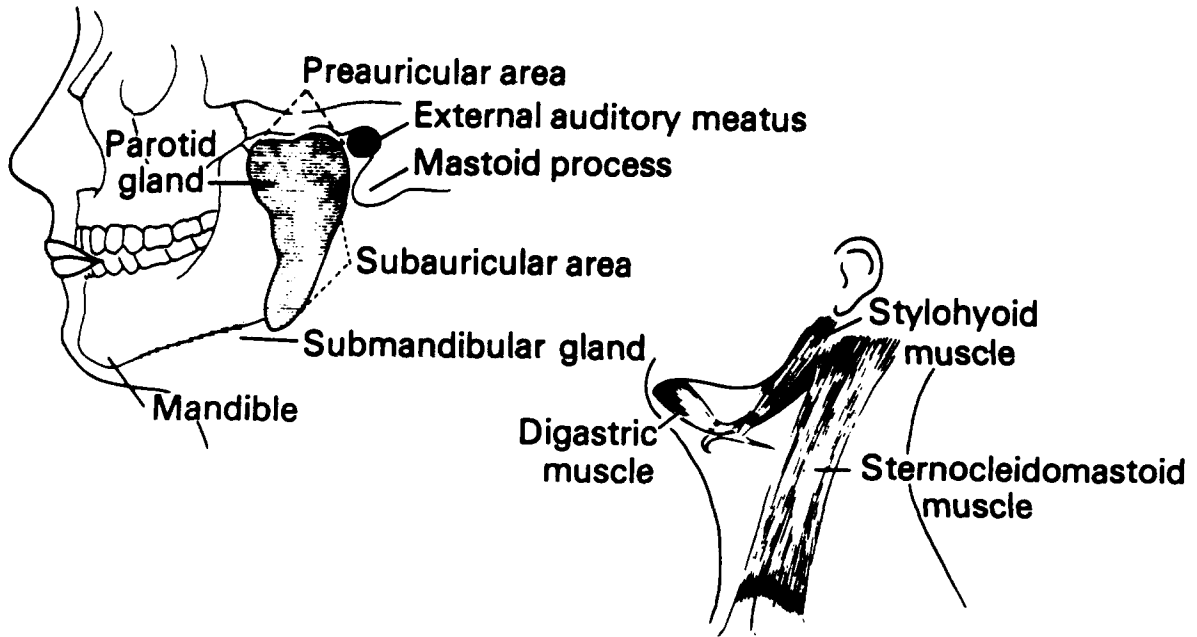
Other distant involvement

**DISIANT, 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

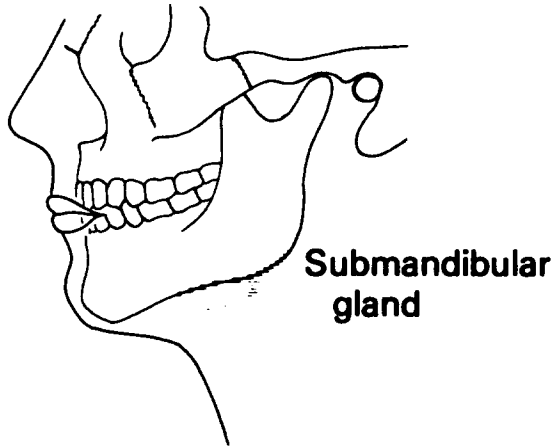
Parotid: intra-parotid, infra-auricular, preauricular  
Submandibular (submaxillary)

DISTANT, Direct Extension or Metastasis

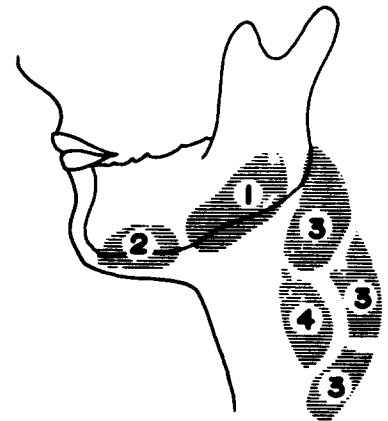
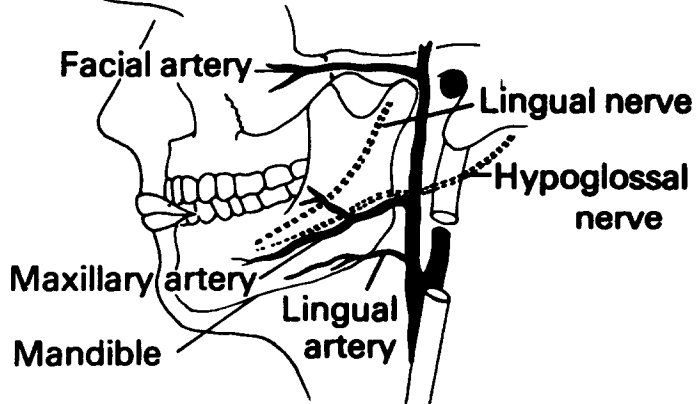
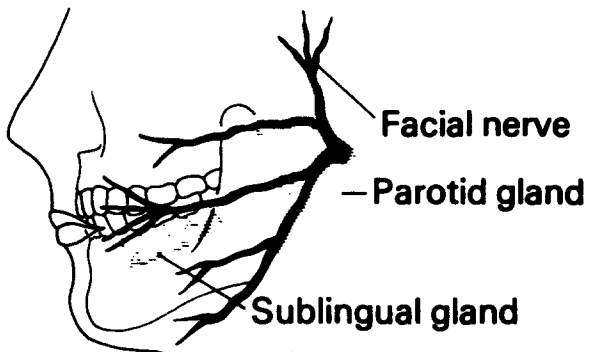
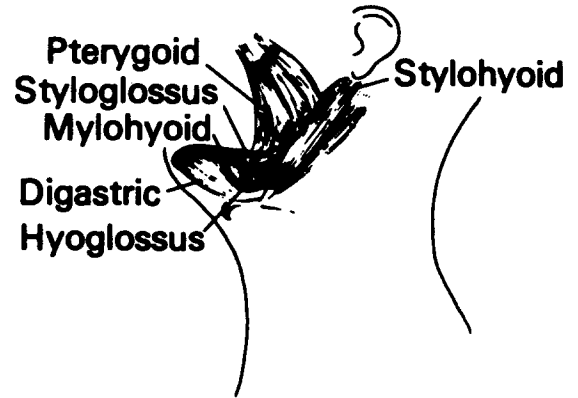
DISTANT, Lymph Nodes

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

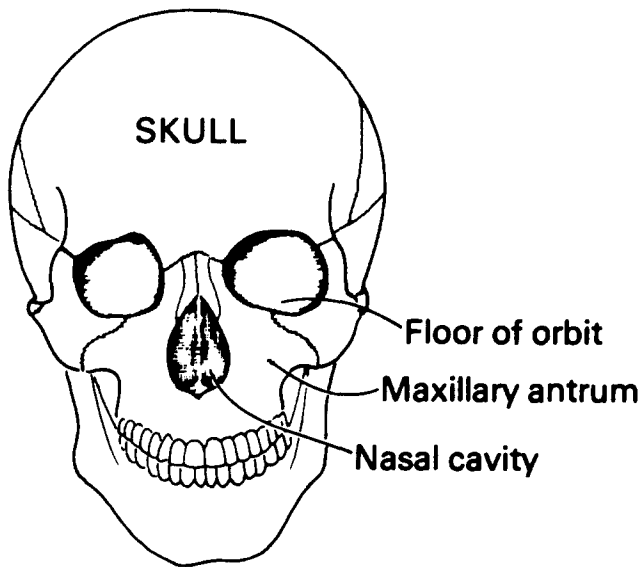
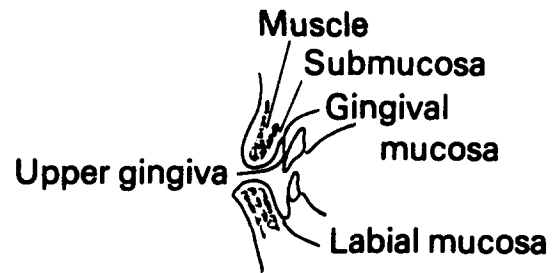
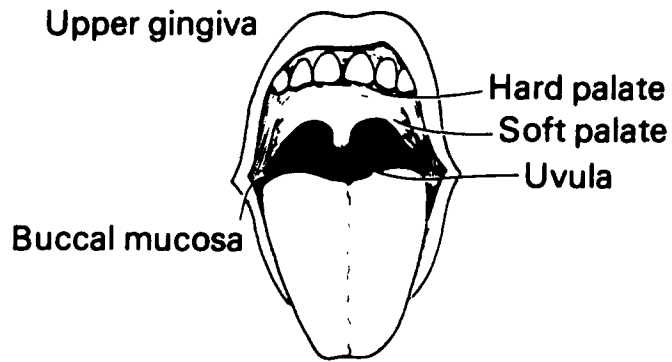
Submental  
Submandibular (submaxillary)  
Internal jugular (subdigastric)  
Upper cervical (including cervical, NOS)

DISTANT, Direct Extension or Metastasis

DISTANT, Lymph Nodes

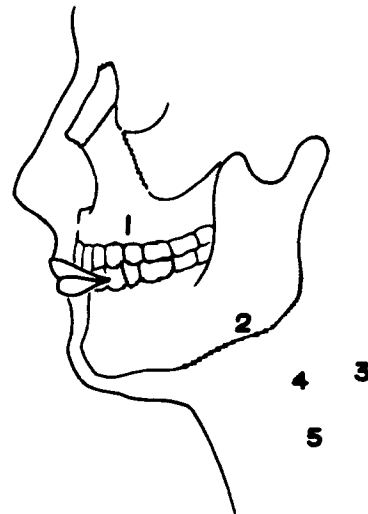
Supraclavicular (transverse cervical)  
Other distant nodes

# 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

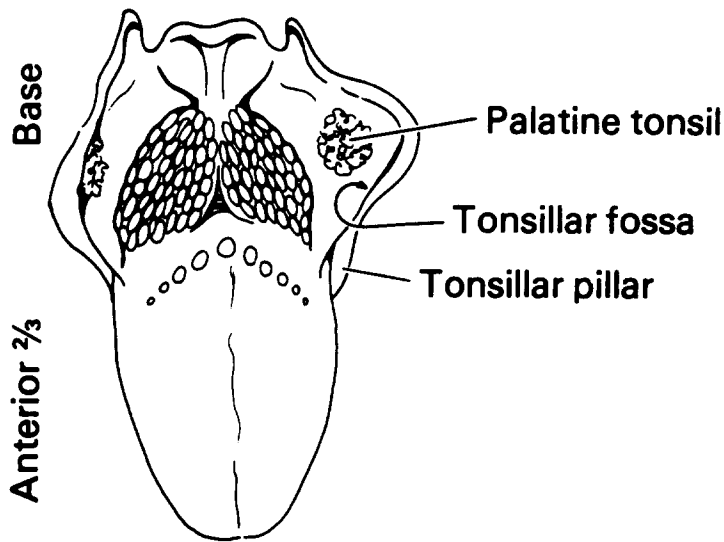
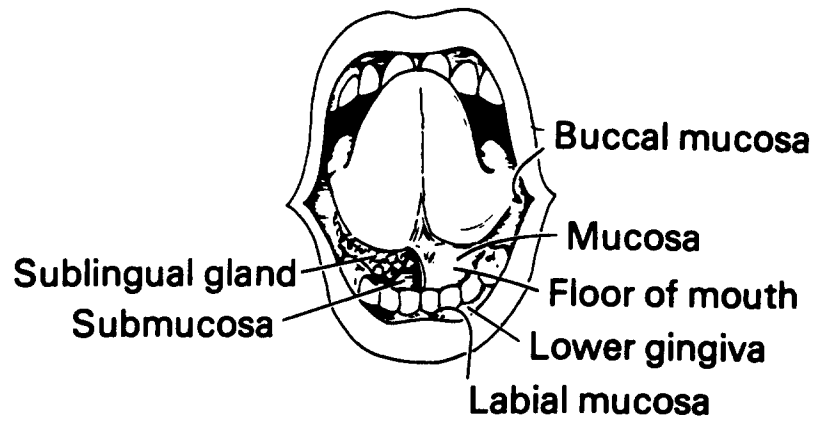
Other distant involvement

DISTANT, Lymph Nodes

Supraclavicular (transverse cervical)

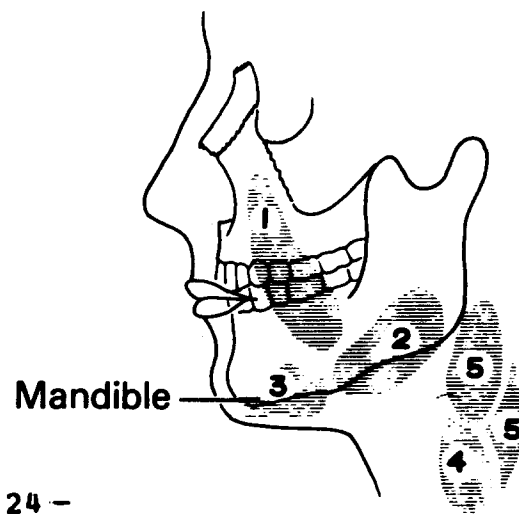
Other distant nodes

## 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

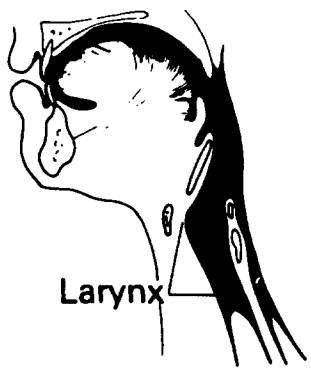
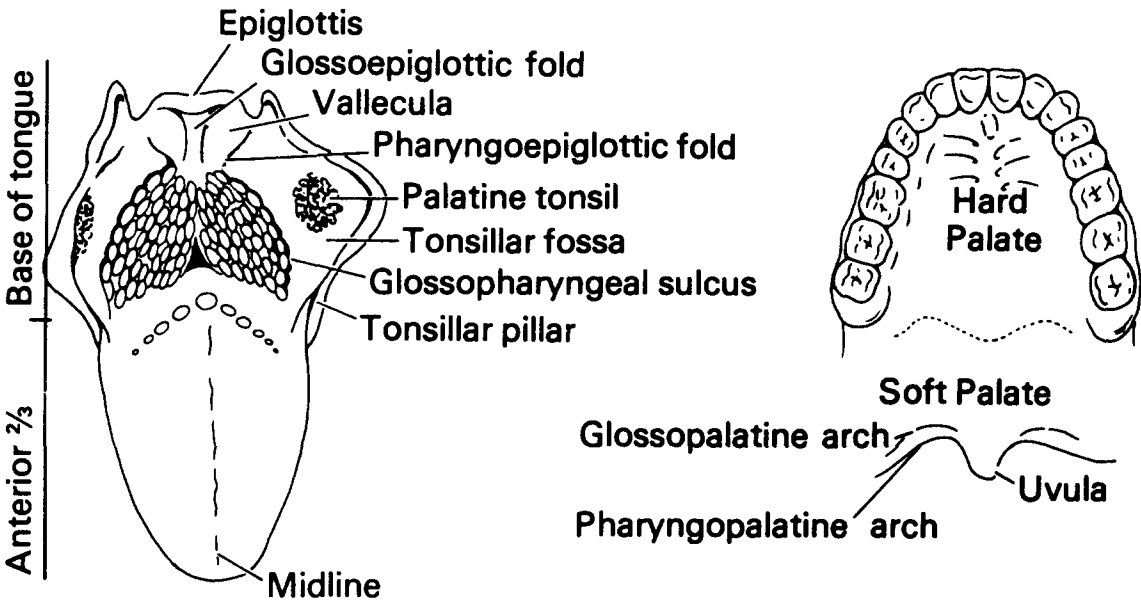
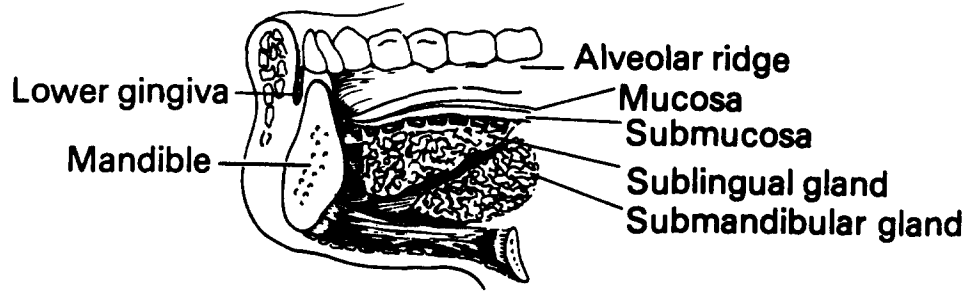
**DISTANT, Lymph Nodes**

Supraclavicular (transverse cervical)

Other distant nodes

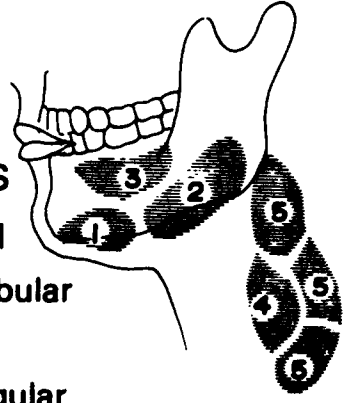


# FLOOR OF MOUTH



## 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)

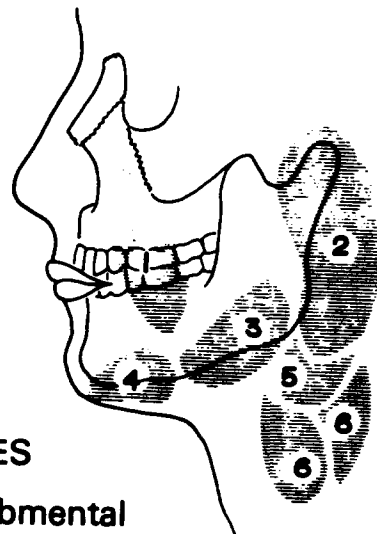
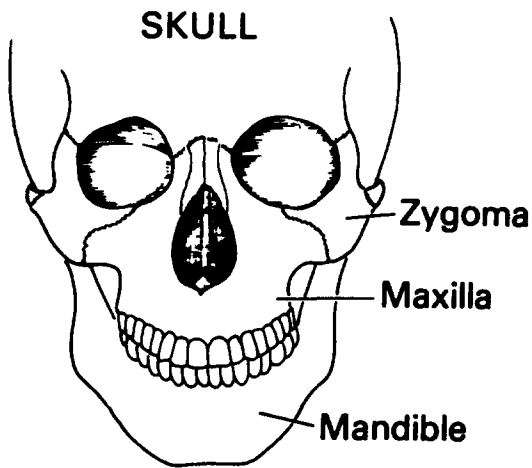
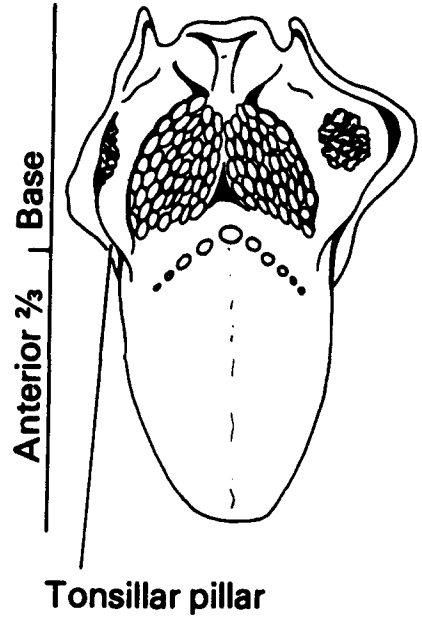
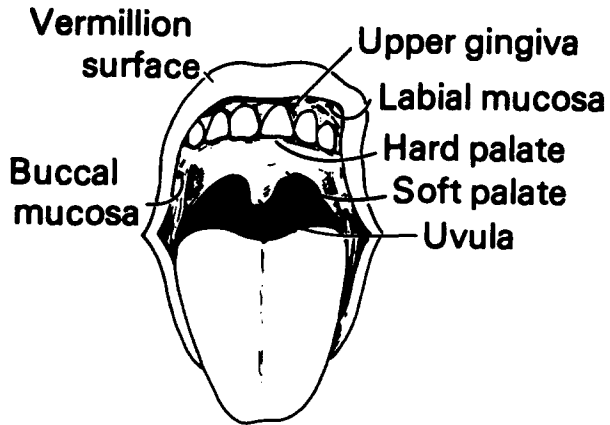
**DISTANT, Direct Extension or Metastasis**

**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:

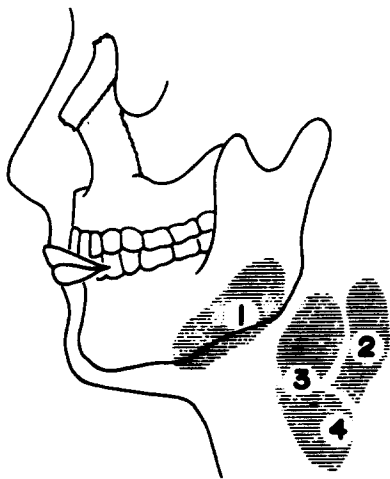
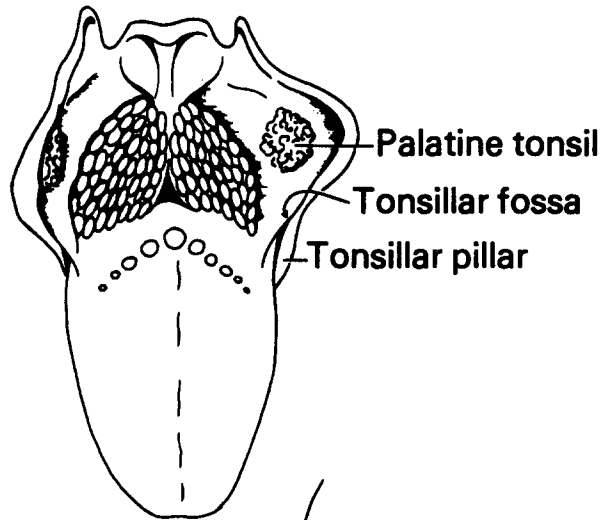
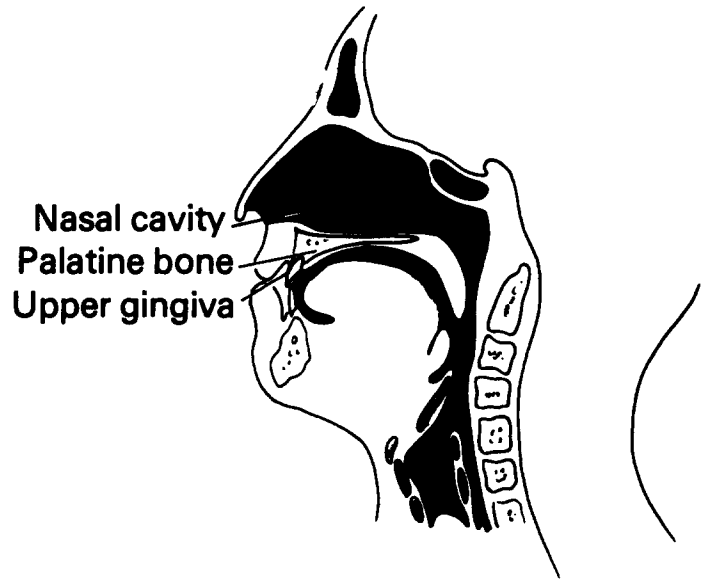
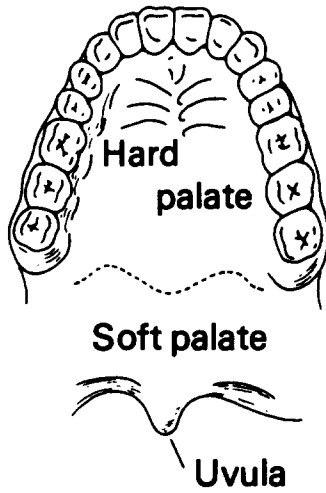
2

Other distant involvement

DISTANT, Lymph Nodes

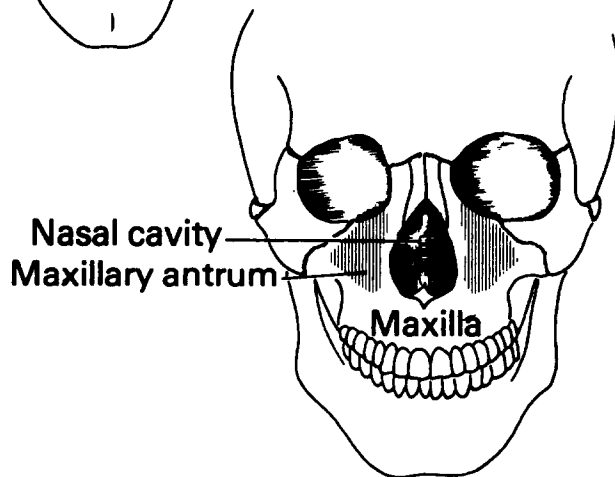
Supraclavicular (transverse cervical)  
Other distant nodes

# 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

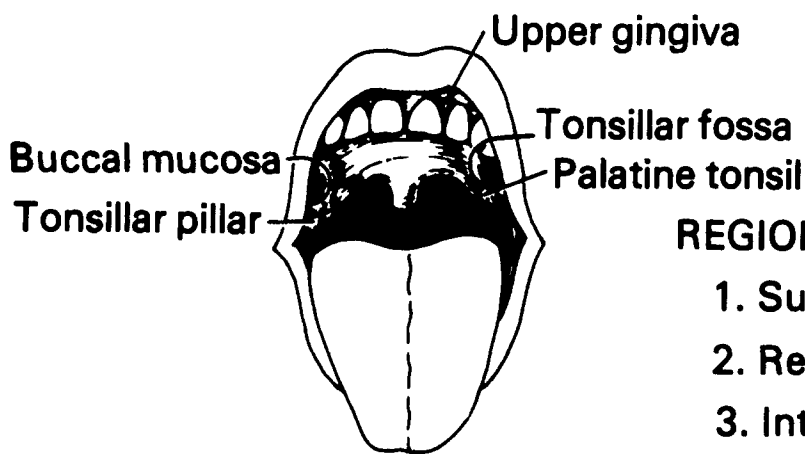
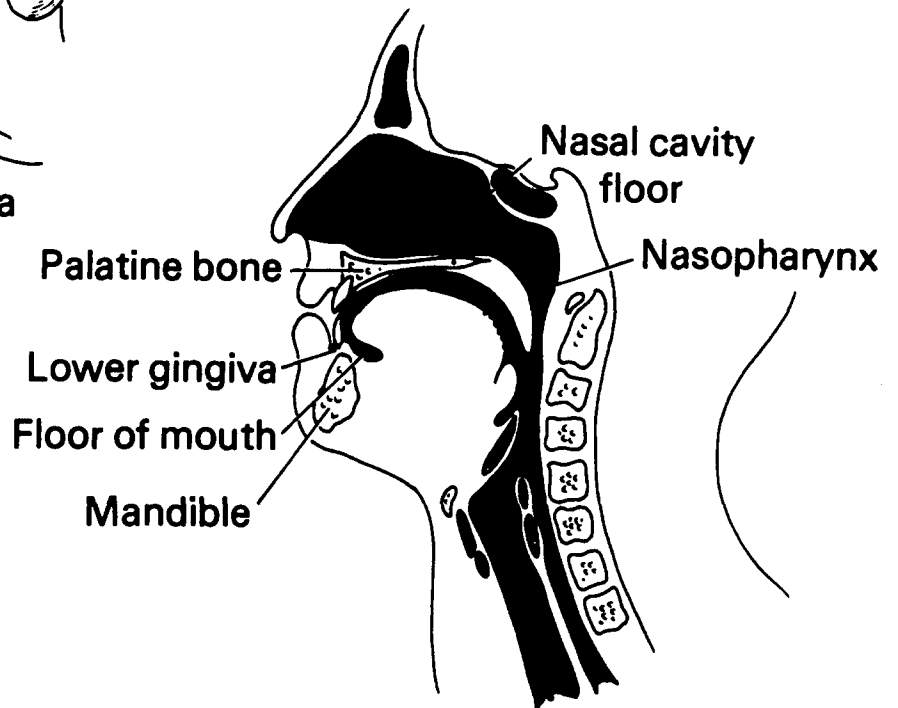
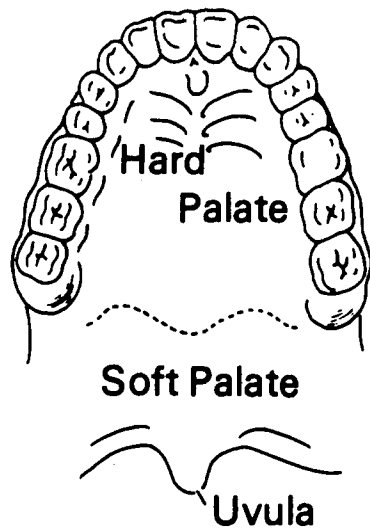
Other distant involvement

DISTANT, Lymph Nodes

Supraclavicular (transverse cervical)  
Other distant nodes

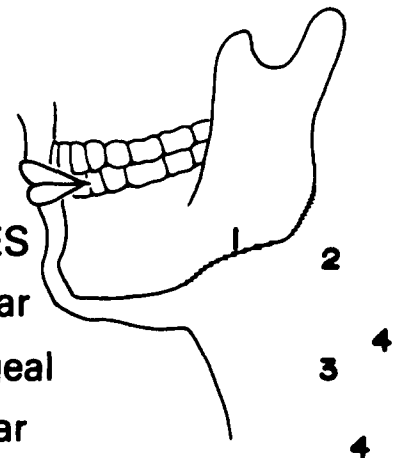


# SOFT PALATE AND UVULA



## 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

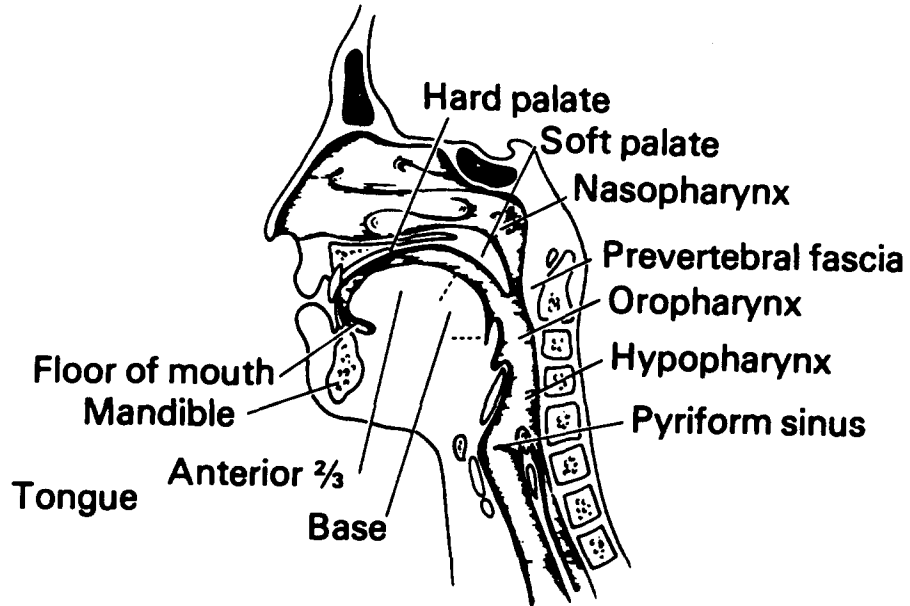
Other distant involvement

**DISTANT, Lymph Nodes**

Supraclavicular (transverse cervical)  
Other distant nodes

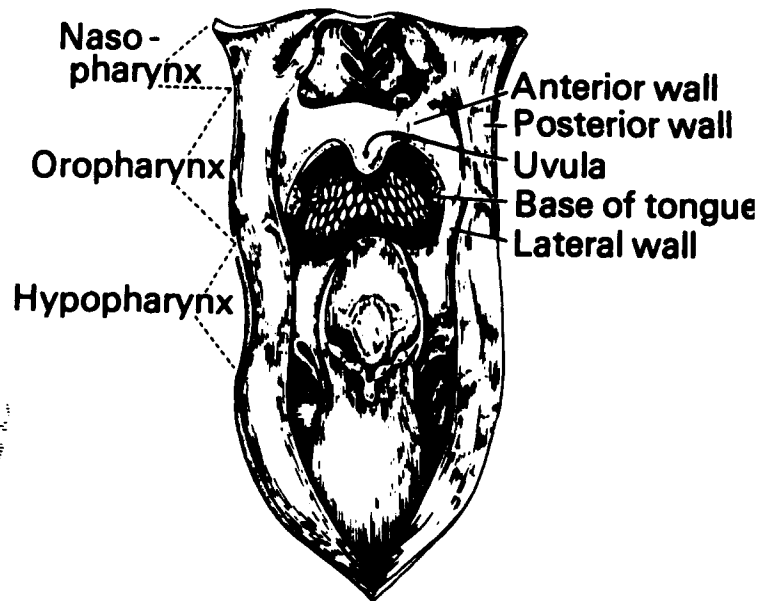
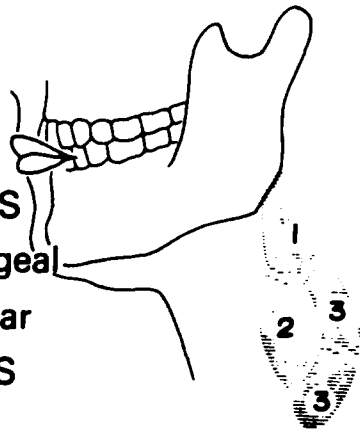


# OROPHARYNX



## 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: subdiaphragmatic, 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

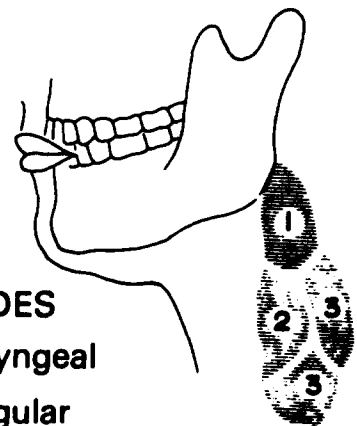
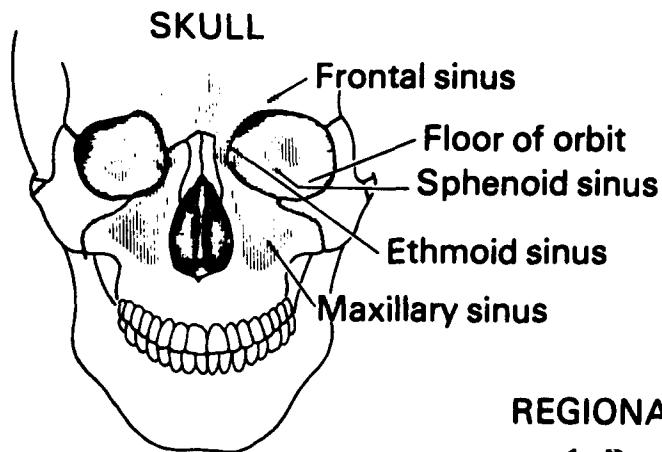
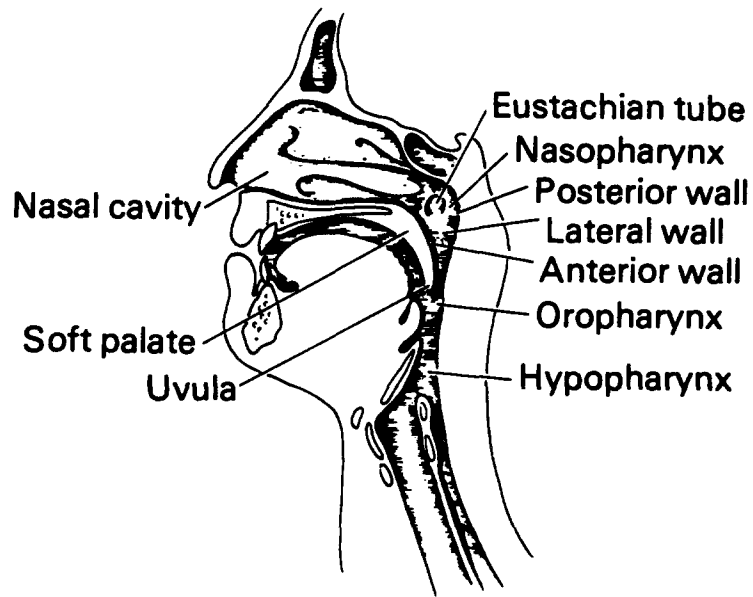
**DISTANT, Lymph Nodes**

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:

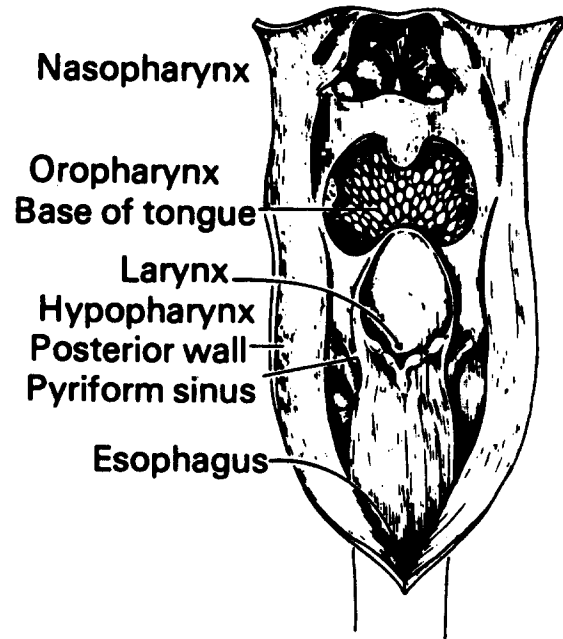
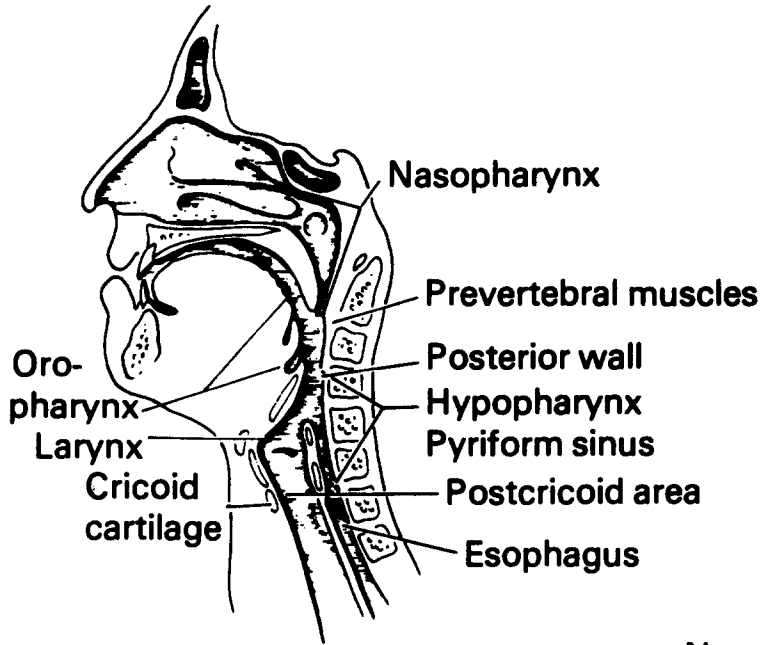
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Other distant involvement

**DISTANT, Lymph Nodes**

Supraclavicular (transverse cervical)  
Submandibular  
Other distant nodes

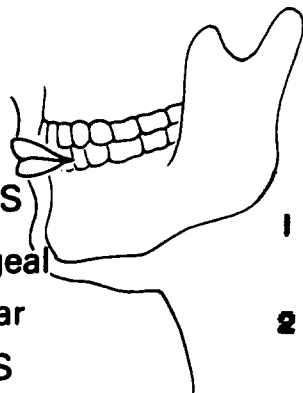
# HYPOPHARYNX



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  
Postcricoid area  
Posterior pharyngeal wall

L if tumor involves:

2

Pyriiform sinus and postcricoid area  
Pyriiform sinus and posterior pharyngeal wall  
Postcricoid area and posterior pharyngeal wall  
Pyriiform sinus, postcricoid 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: subdiaphragic, 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:

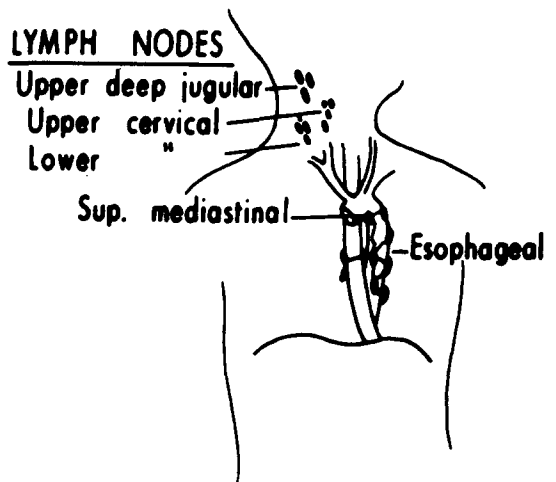
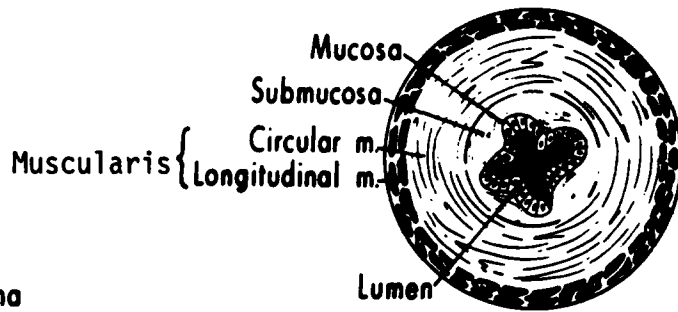
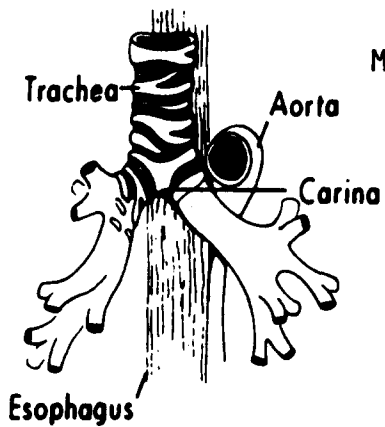
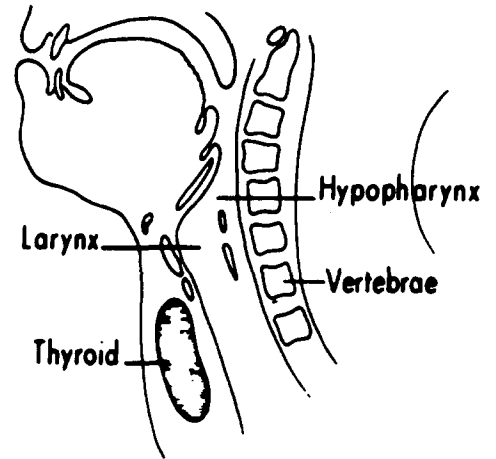
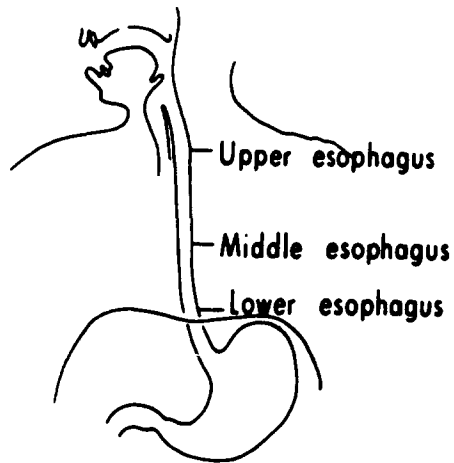
2

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:

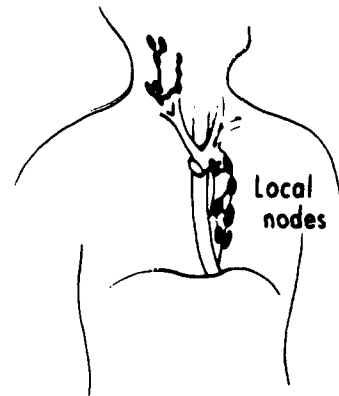
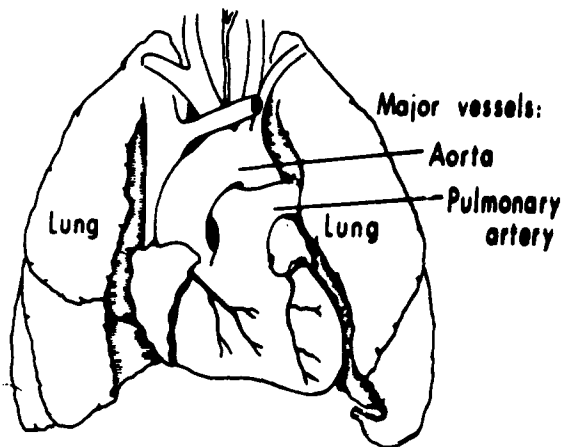
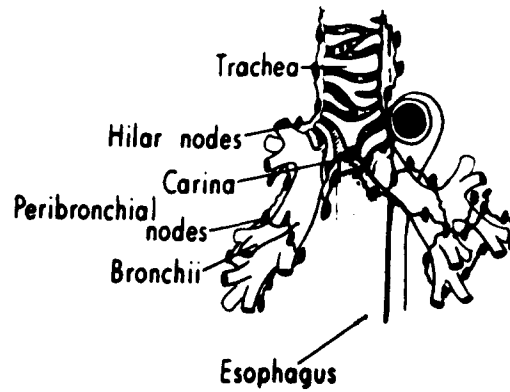
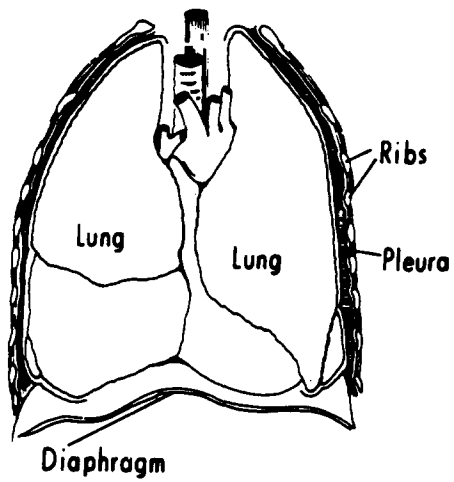
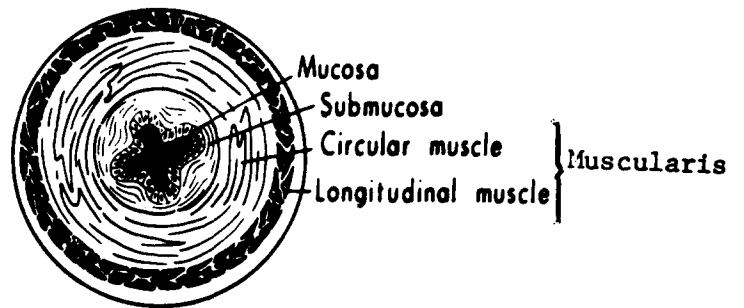
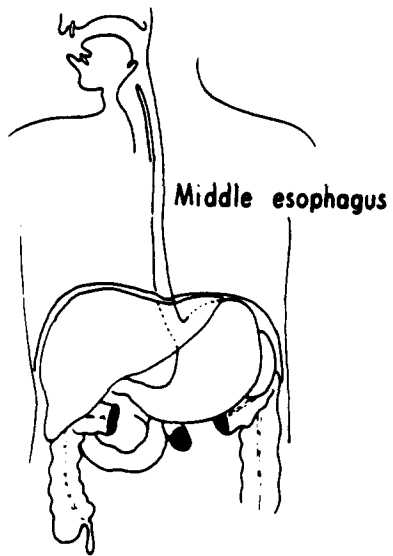
2

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

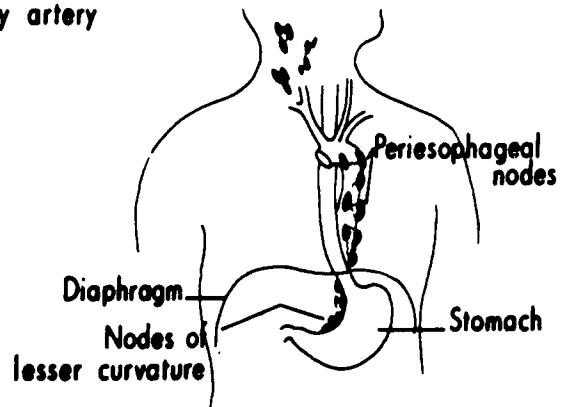
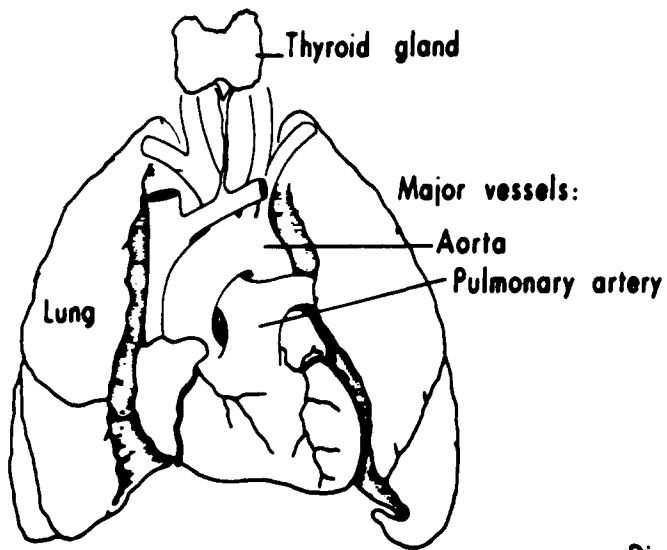
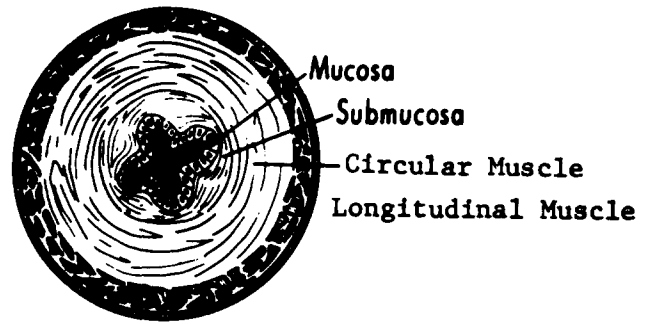
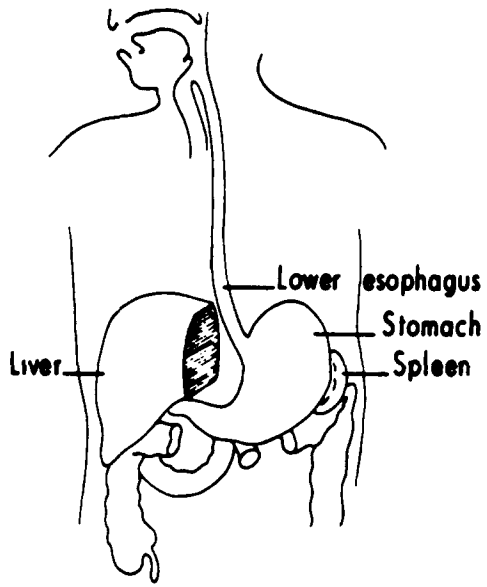
DISTANT, Lymph Nodes

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

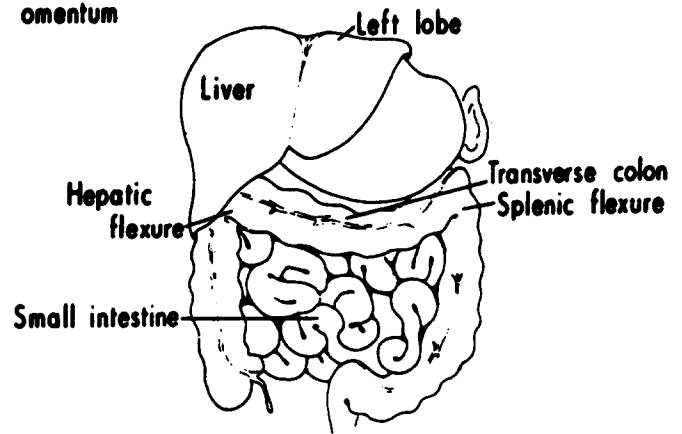
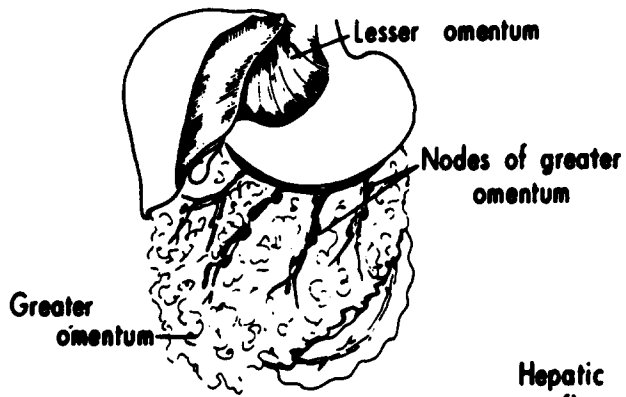
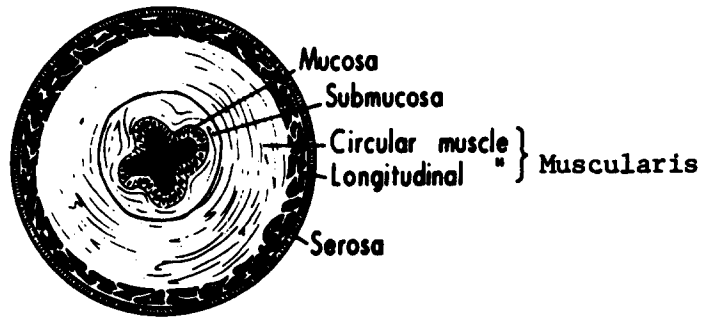
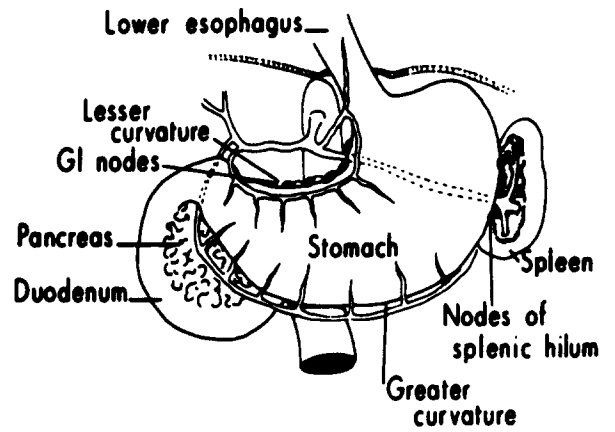
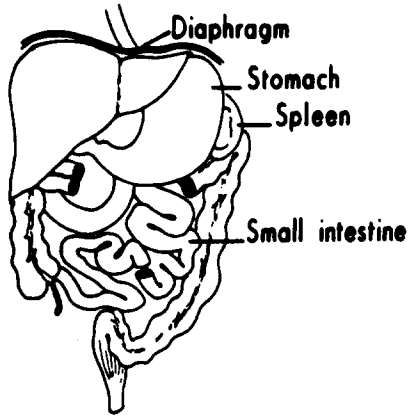
**DISTANT, Lymph Nodes**

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: gastrocolic, 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.

STOMACH (excluding April, 1977  
cardioesophageal junction)  
510-516, 518-519

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

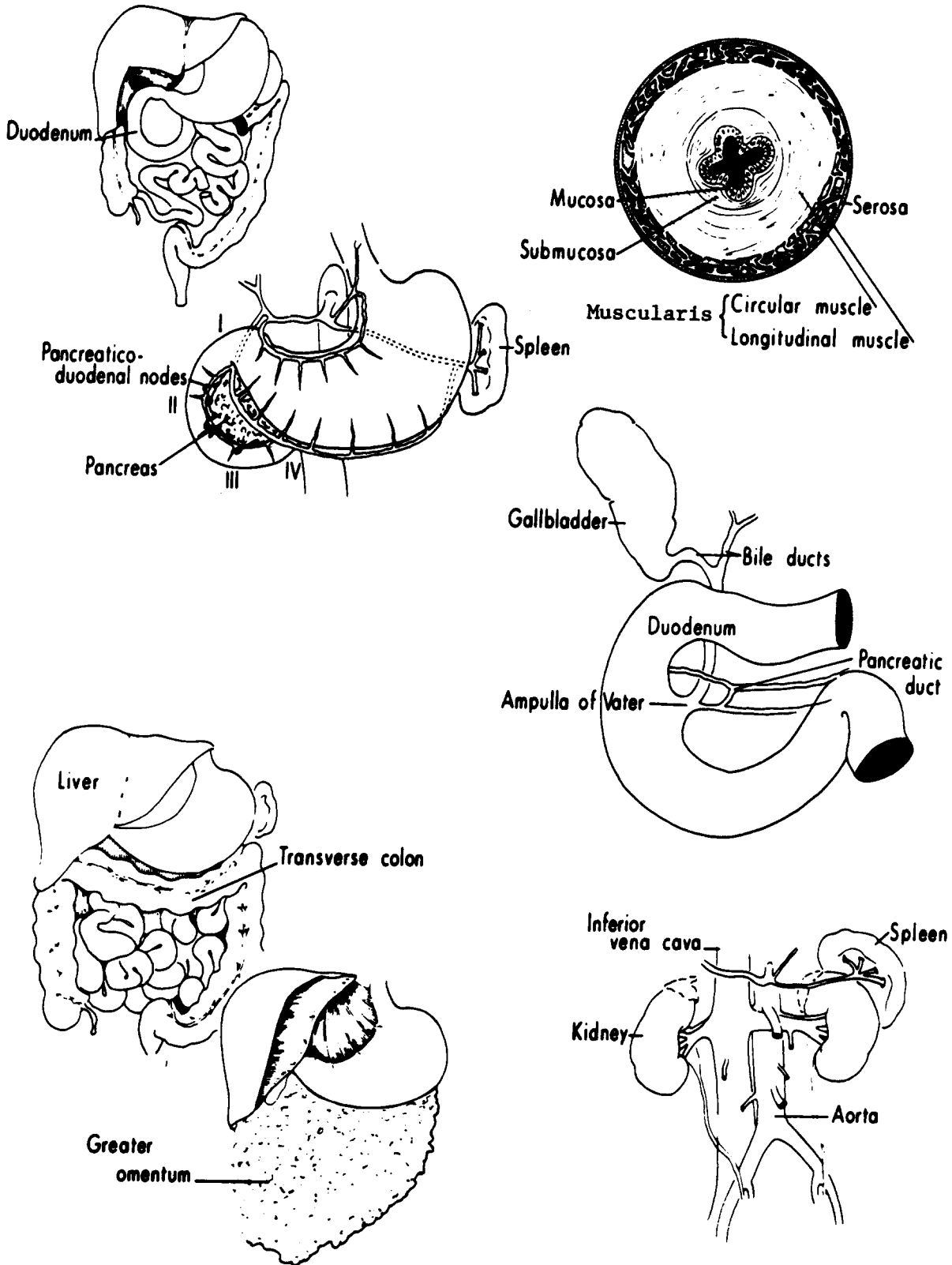
Other distant involvement

**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

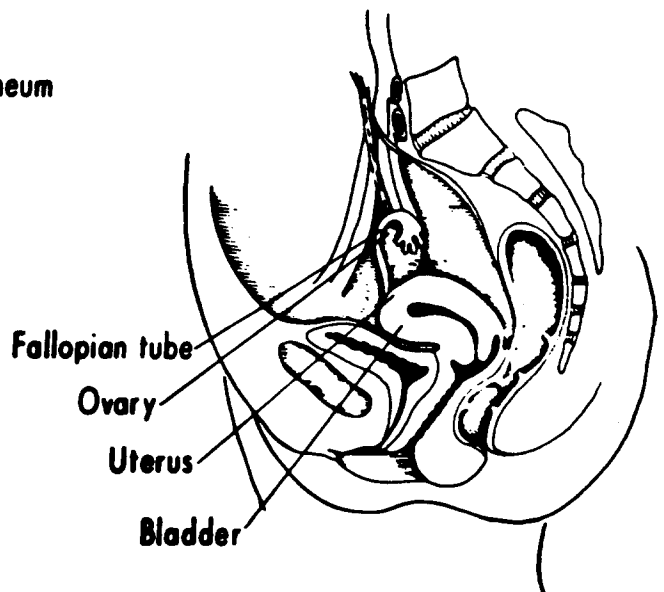
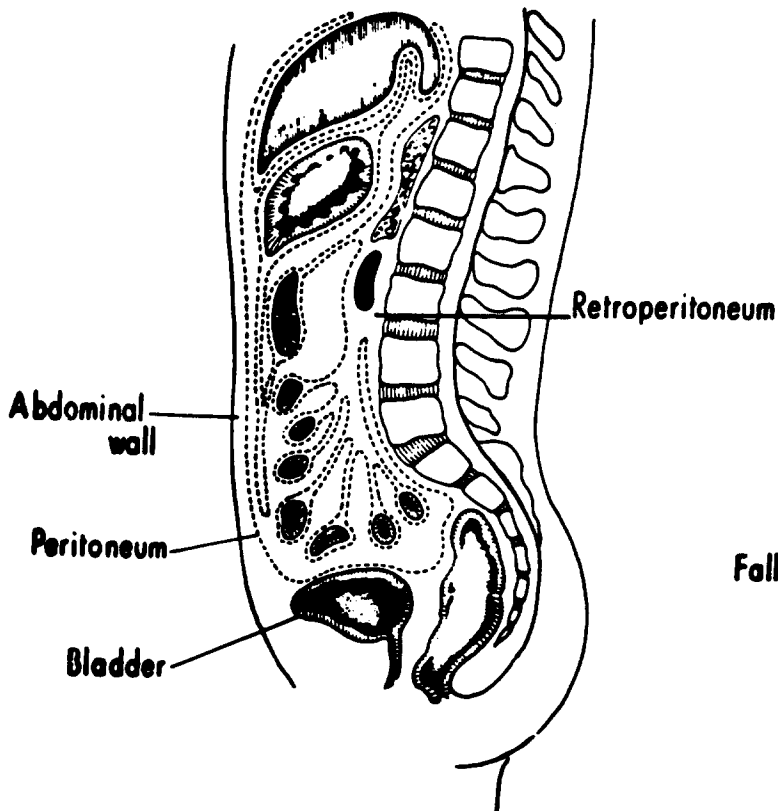
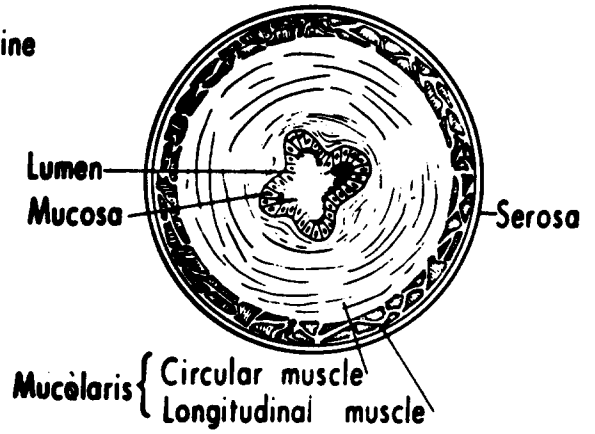
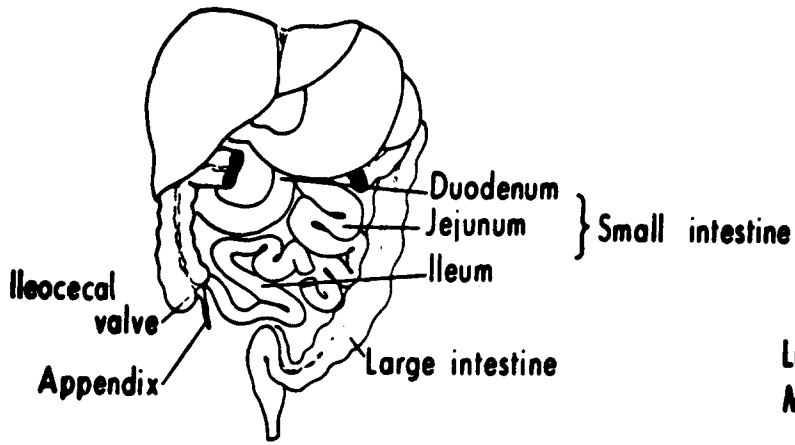
**DISTANT, Direct Extension or Metastasis**

**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**

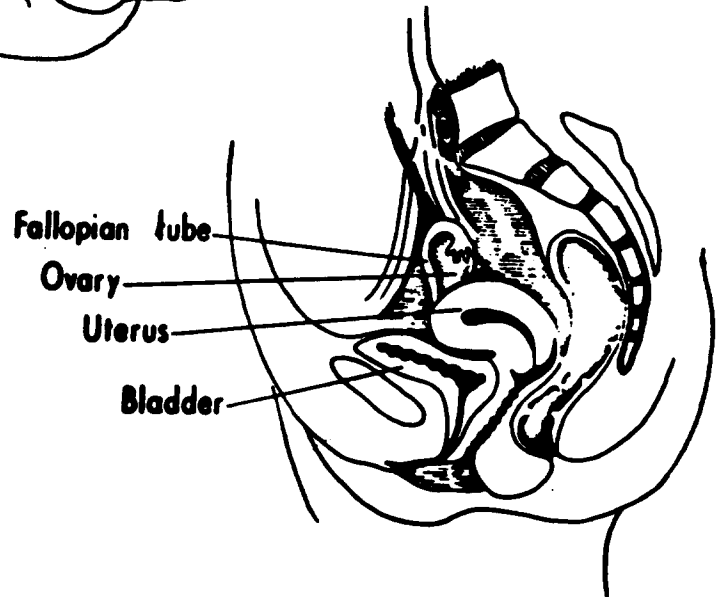
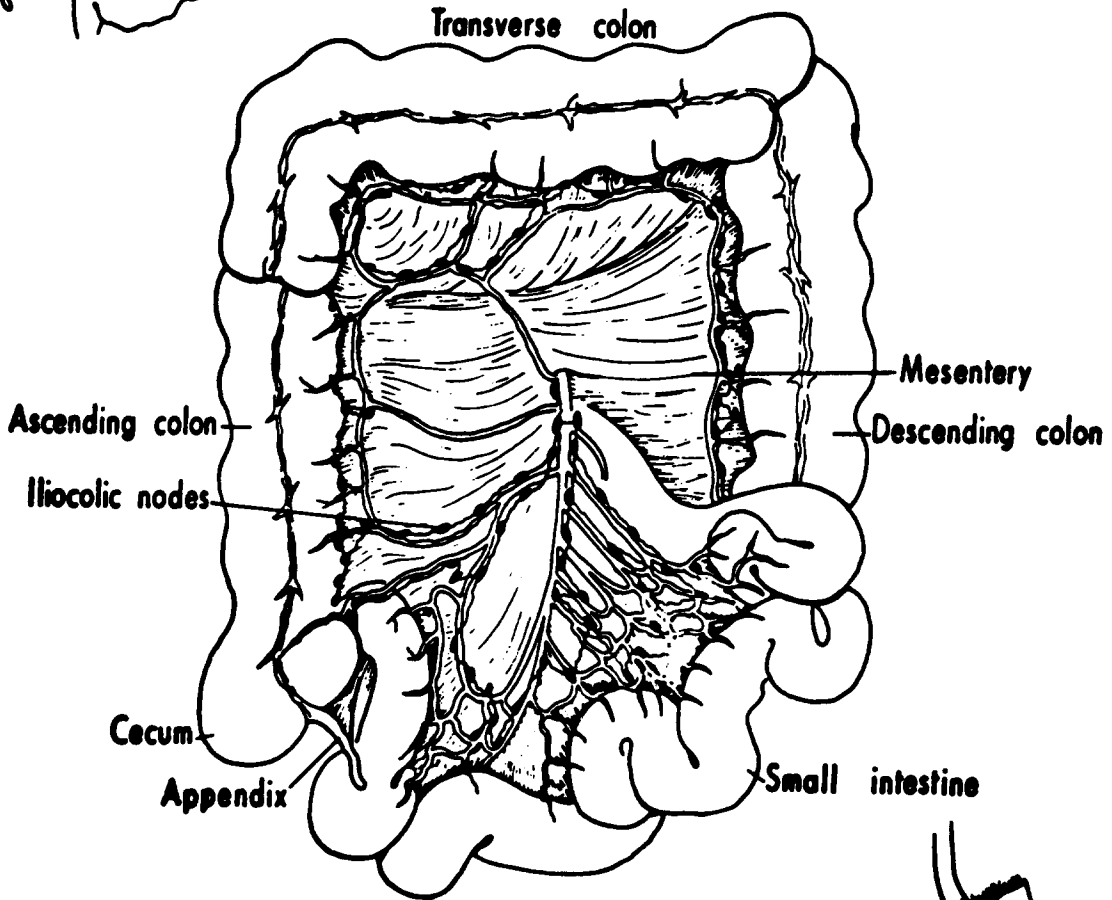
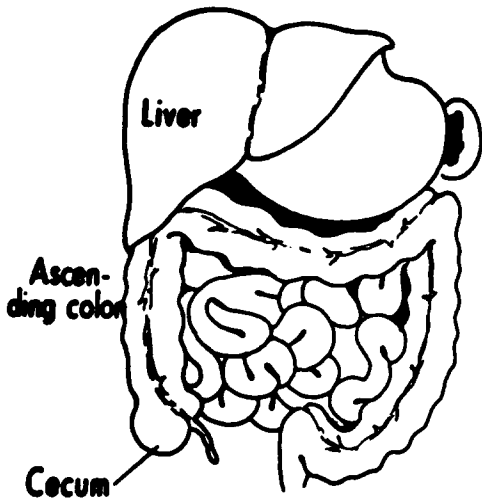
Posterior cecal (terminal ileum only)  
Ileocolic (terminal ileum only)  
Superior mesenteric

**DISTANT, Direct Extension or Metastasis**

Bladder  
Uterus  
Ovary  
Fallopian tube  
Other distant involvement

**DISTANT, Lymph Nodes**

# CECUM & ASCENDING COLON



**IN SITU**: 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 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  
Pericolic (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

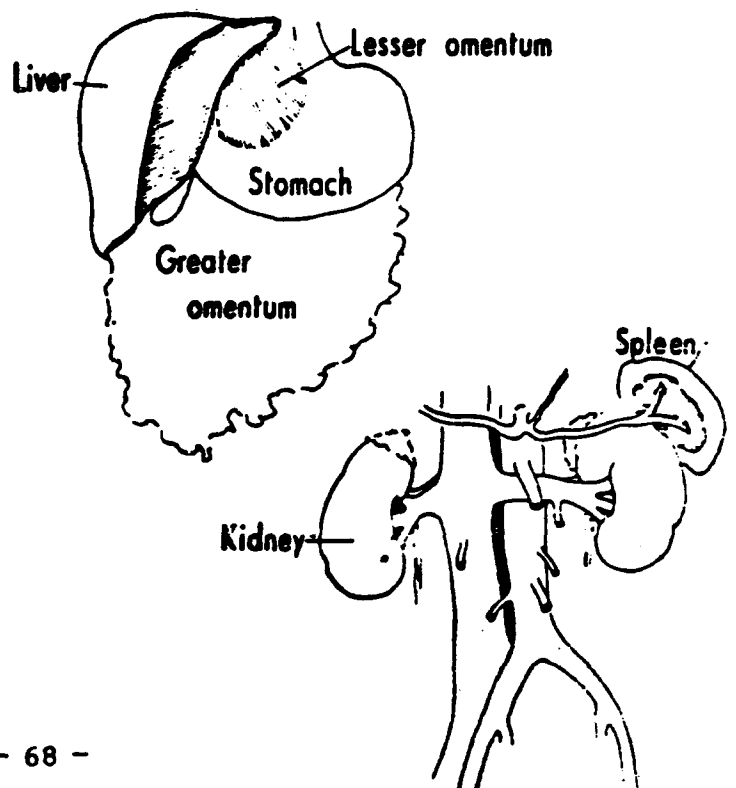
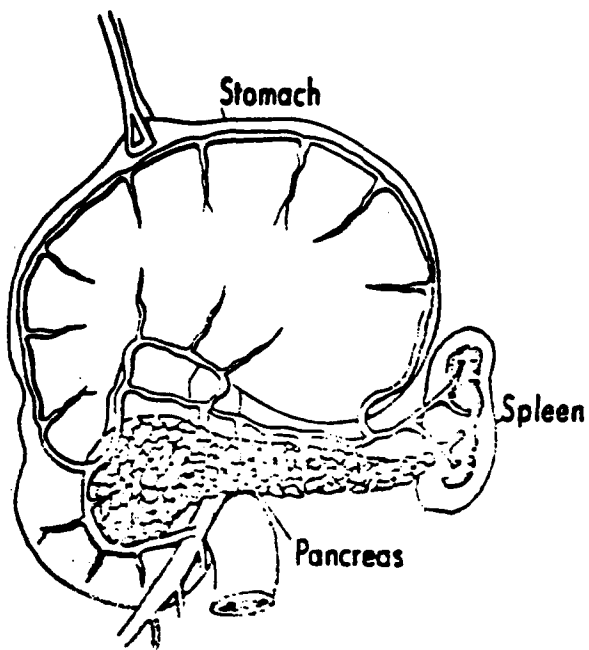
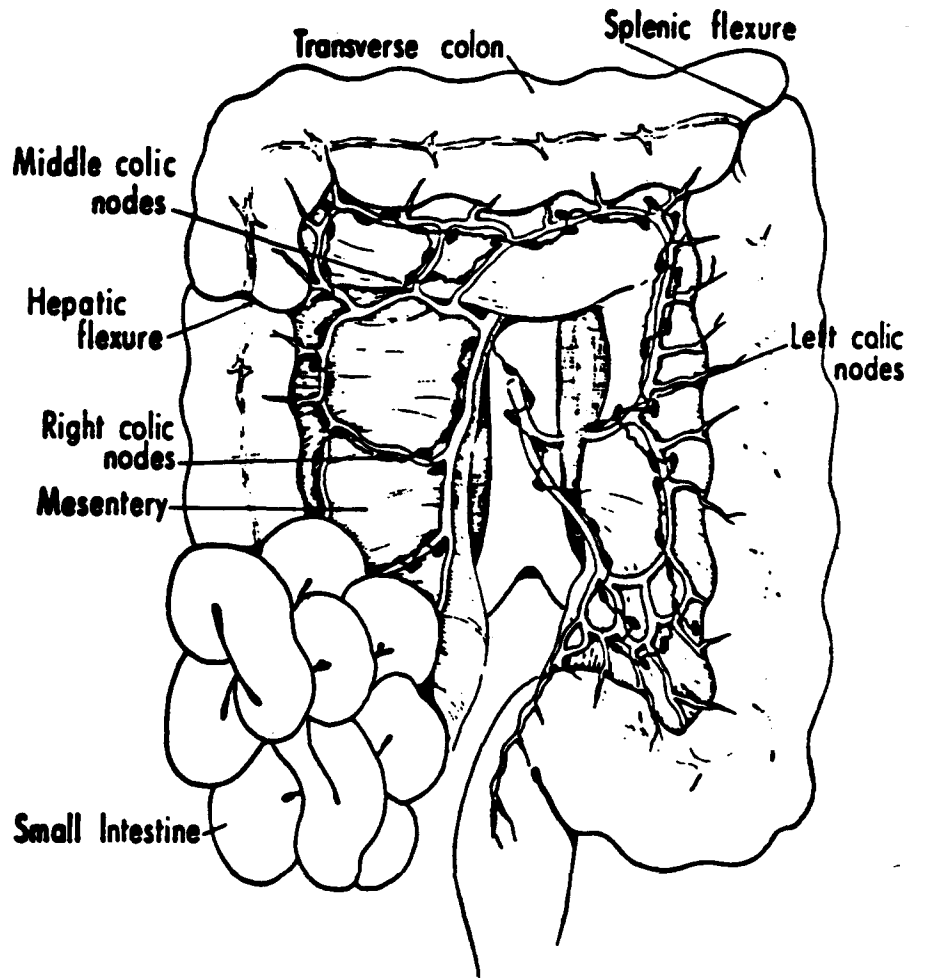
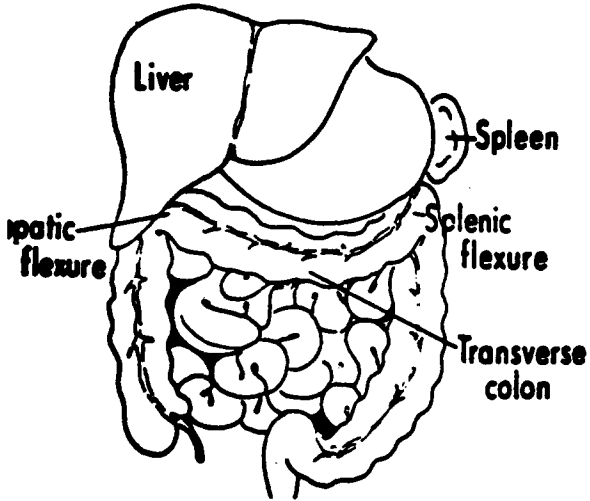
Other distant involvement

**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

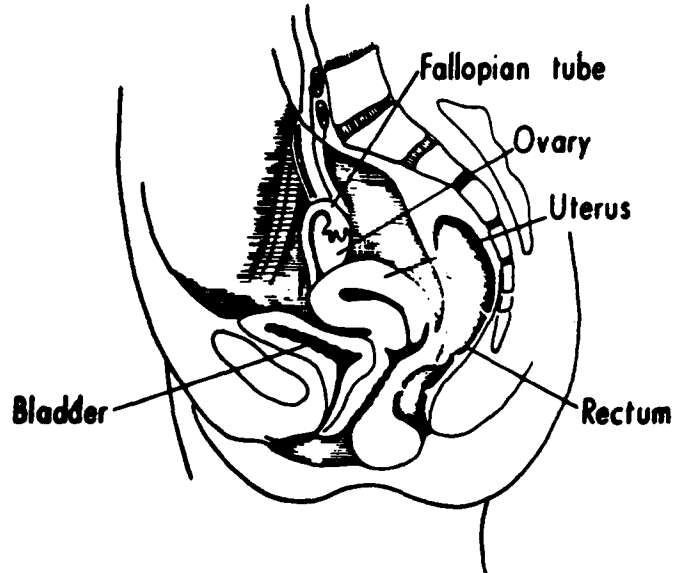
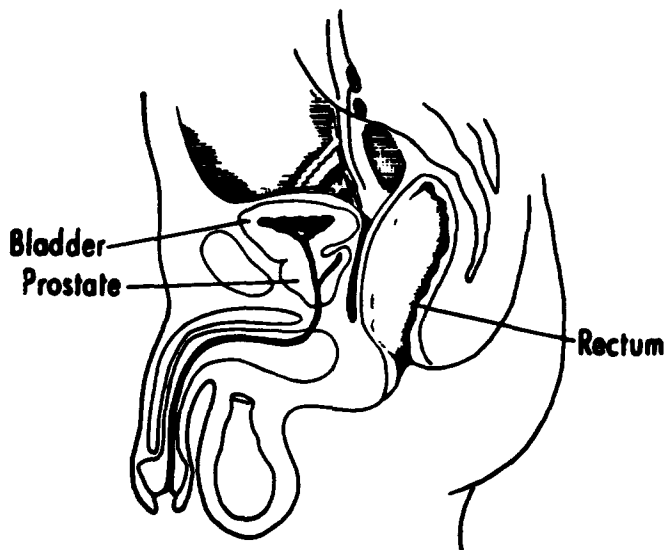
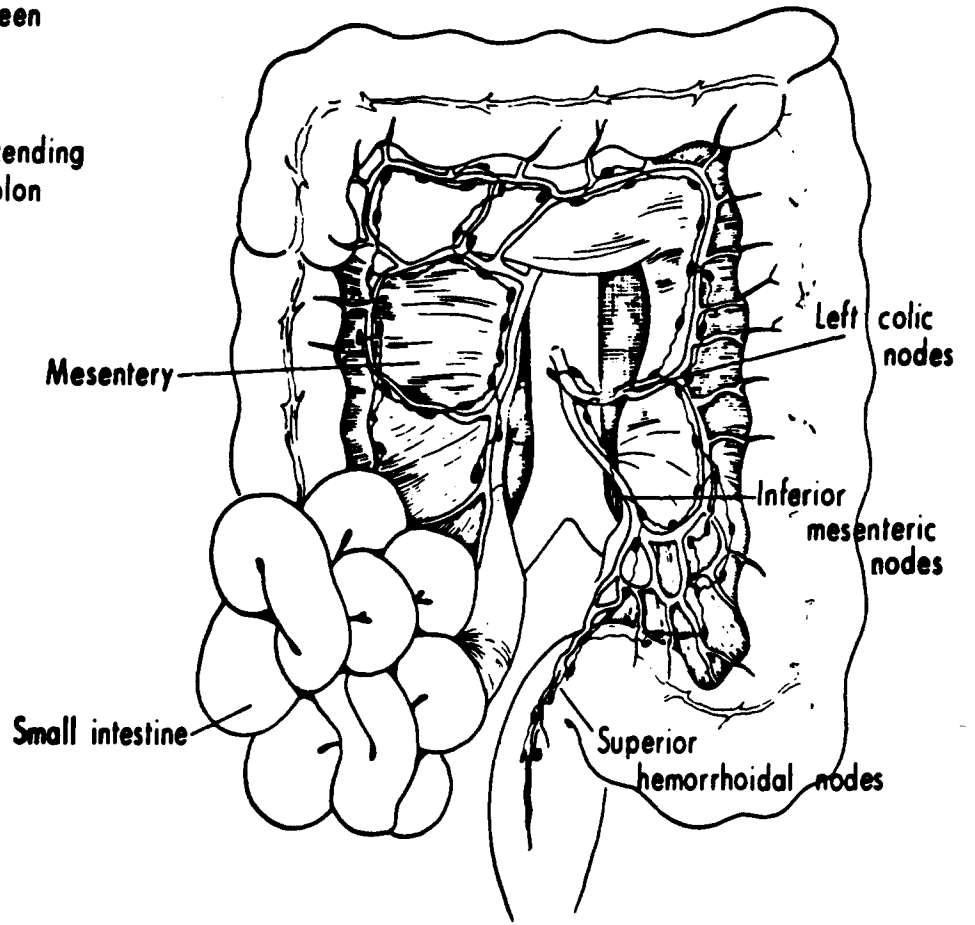
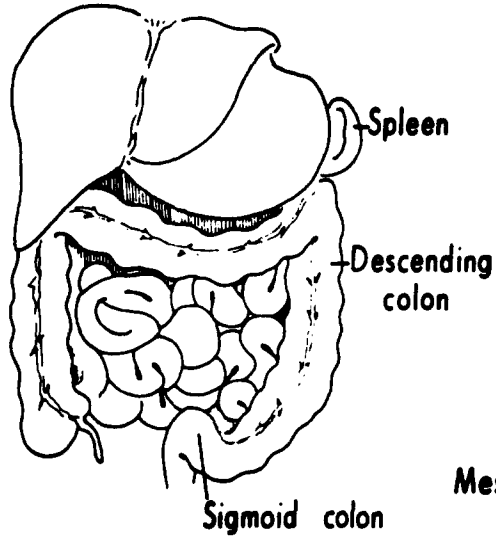
**DISTANT, Lymph Nodes**

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:

2

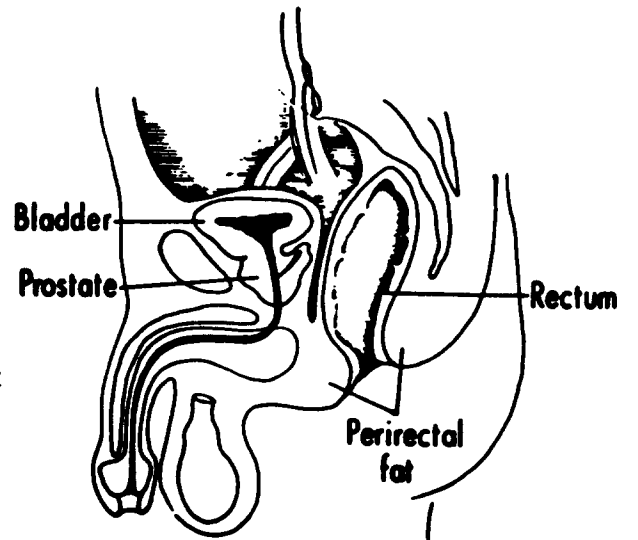
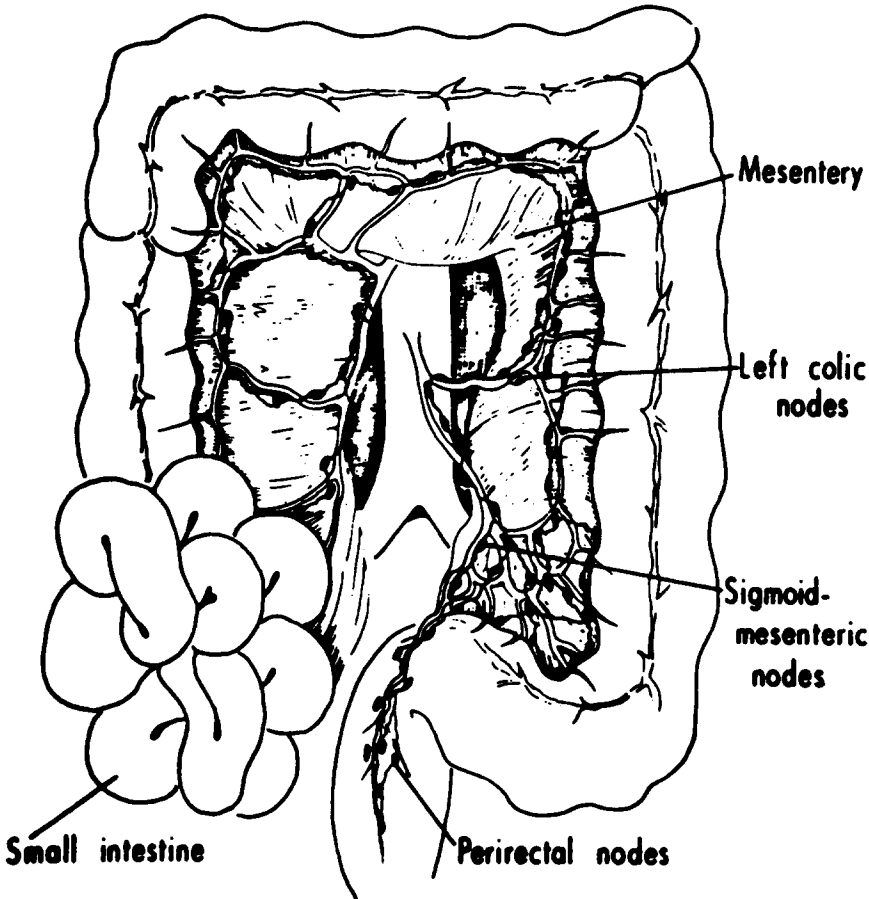
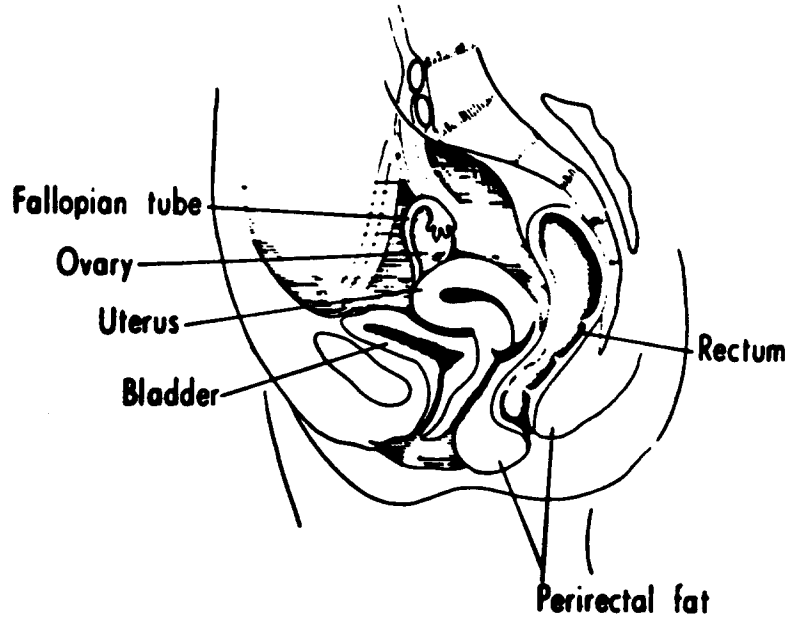
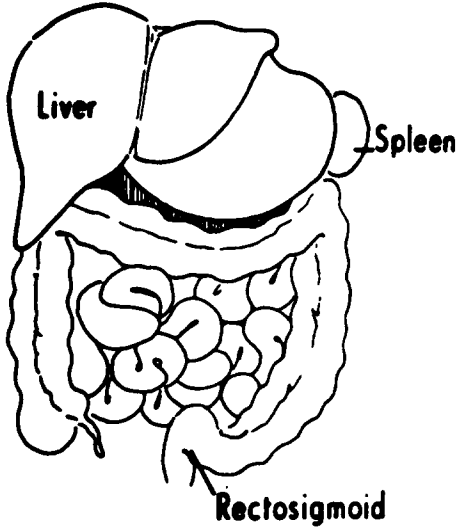
Other distant involvement

**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:

2

Other distant involvement

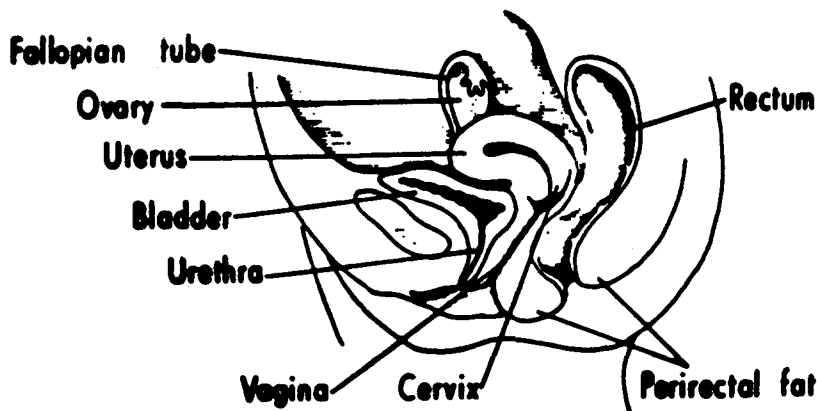
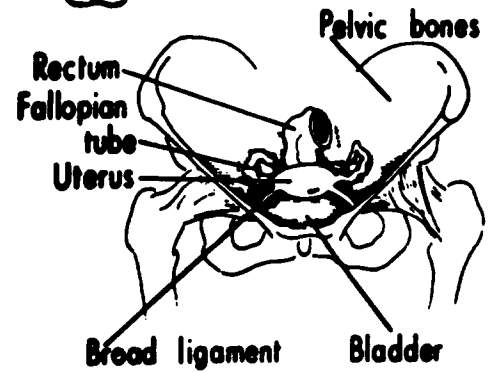
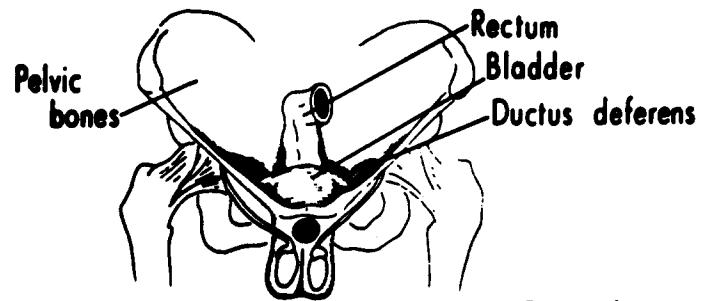
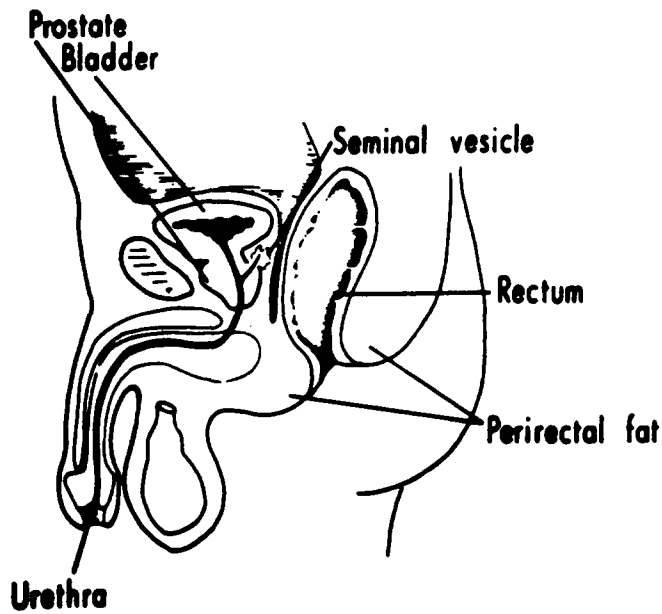
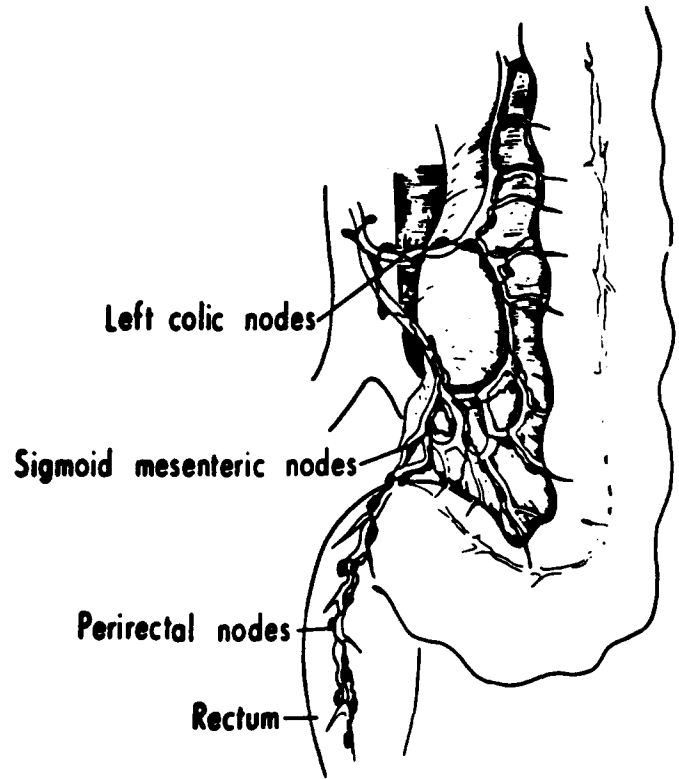
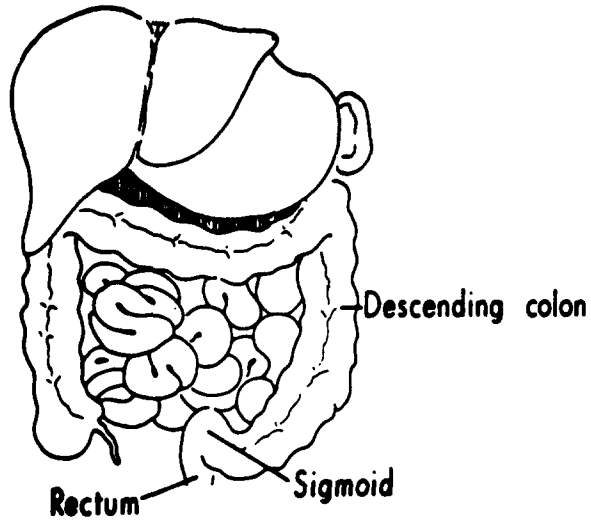
**DISTANT, Lymph Nodes**

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.

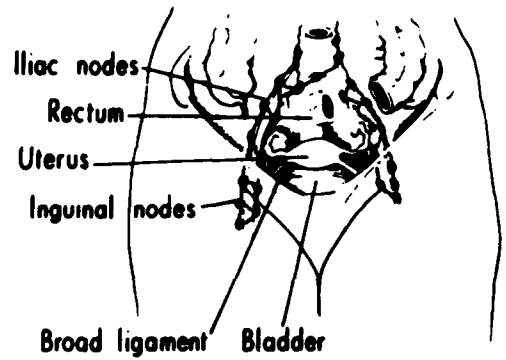
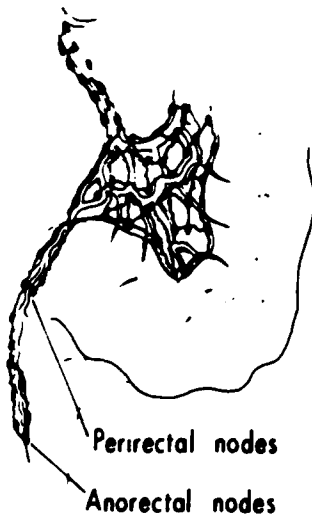
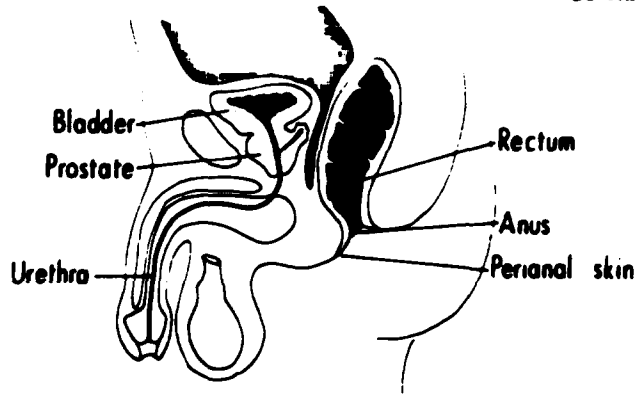
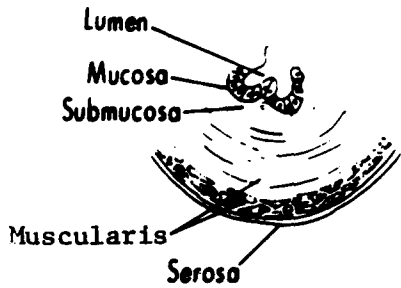
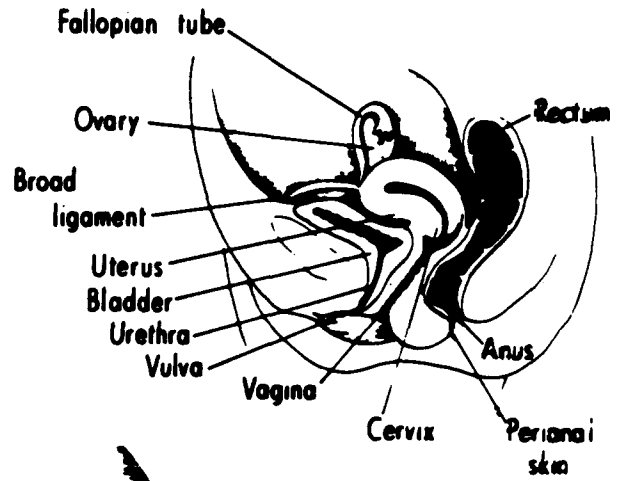
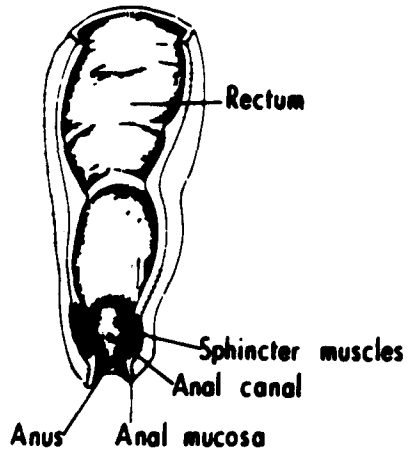
DISTANT LYMPH NODES

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

Interal 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

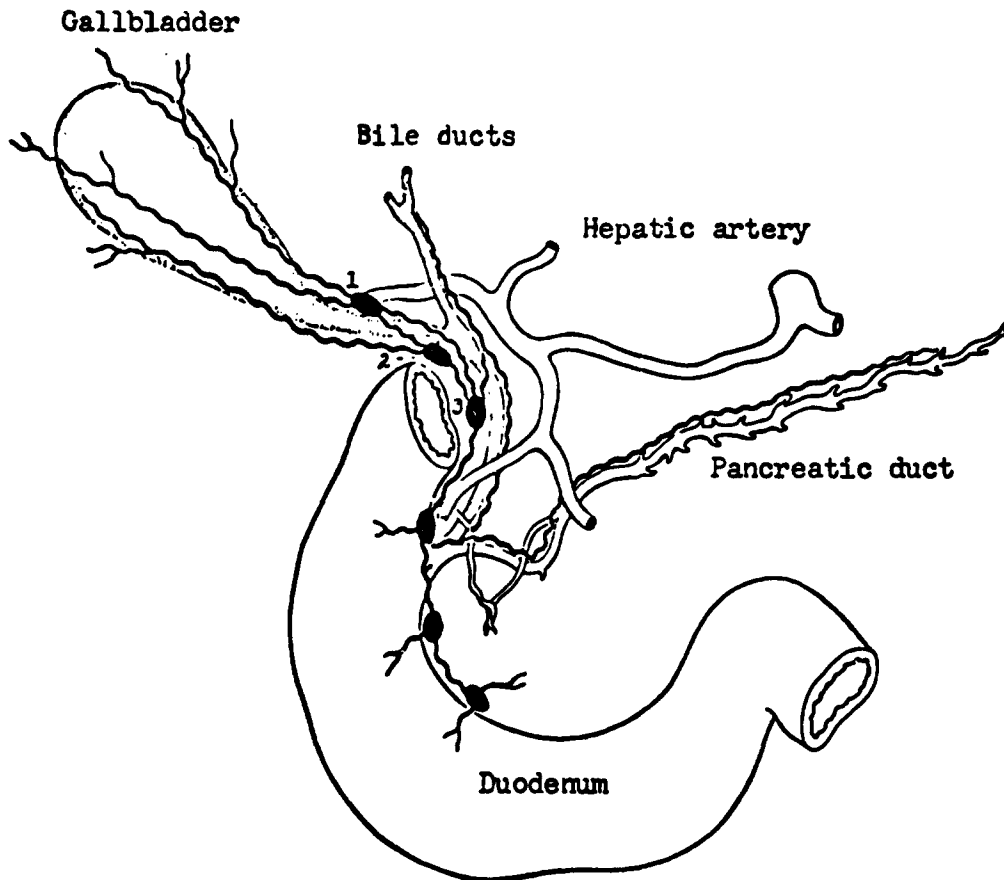
Other distant involvement

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)

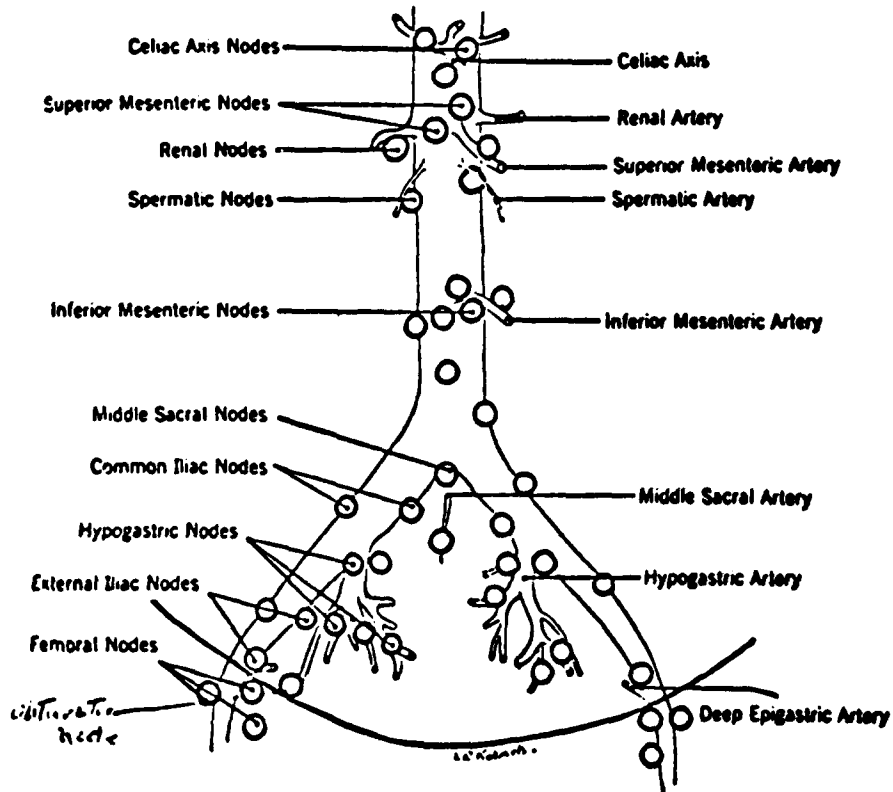
D if:

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, thyrohypoid 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 Infrahypoid 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

Pyeliform 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

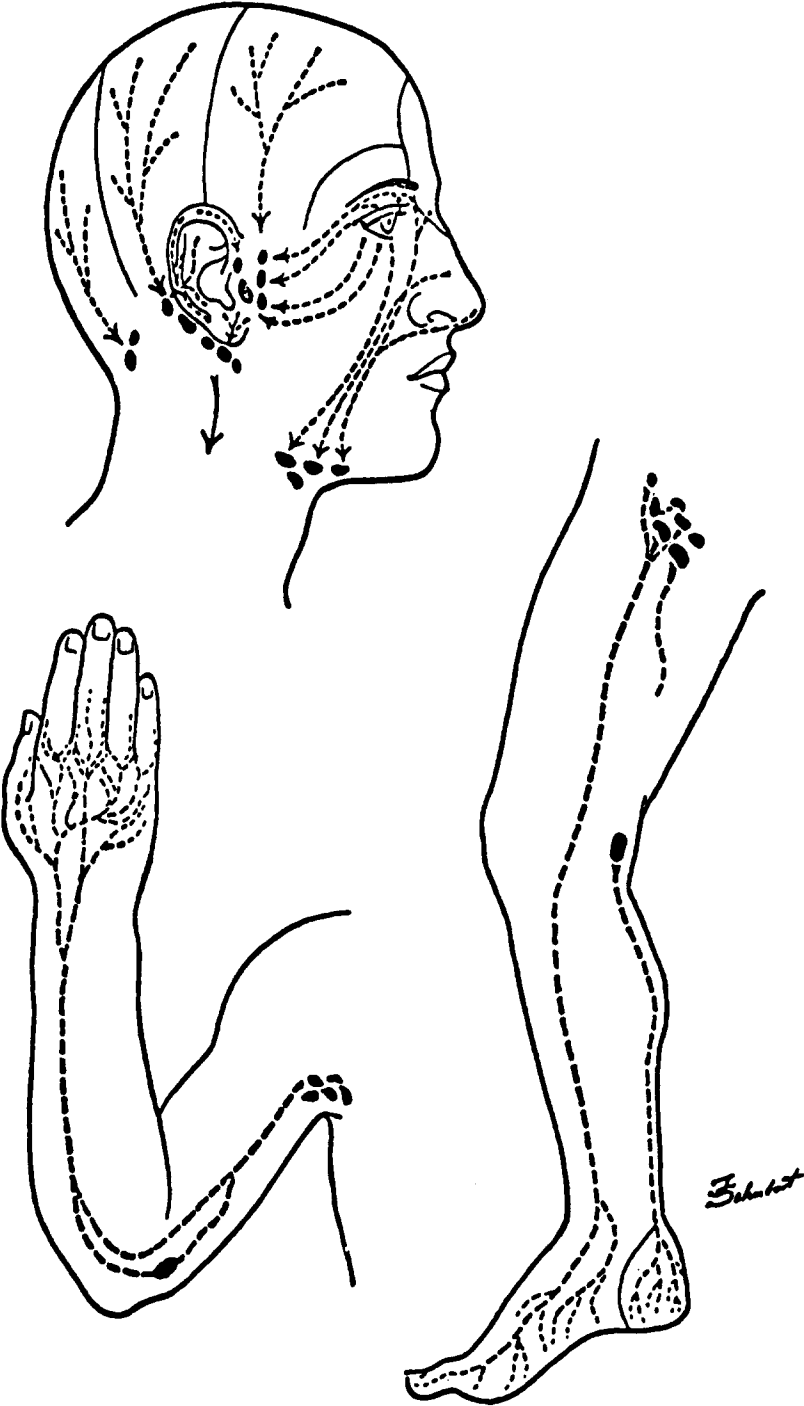


Fig. 100 Lymphatics of the skin of the face and upper and lower extremities.

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.

MALIGNANT MELANOMA OF SKIN Revised July, 1983  
730-737, 841-844, 871-872, 874  
HISTOLOGY: 872 thru 879

**IN\_SITU**; intraepidermal (Clark's Level 1)

**LOCALIZED**

L<sub>1</sub> if tumor invades:  
Papillary dermis (Clark's Level 2)  
OR  
Thickness/Depth of invasion  $\leq 0.75$  mm

L<sub>2</sub> if tumor invades:  
Papillary-reticular dermal interface (Clark's Level 3)  
OR  
Thickness/Depth of invasion 0.76 - 1.50 mm

L<sub>3</sub> if tumor invades:  
Reticular dermis (Clark's Level 4)  
OR  
Thickness/Depth of invasion  $> 1.50$  mm

L<sub>4</sub> if:  
Subcutaneous tissue (through entire dermis) (Clark's Level 5)

L<sub>x</sub> if:  
Localized, NOS; confined to skin/dermis, NOS

**REGIONAL**

R<sub>1</sub> if:  
Satellite nodule(s) within immediate area ( $\leq 2$  cm from the primary lesion)

R<sub>2</sub> if:  
Intransit metastasis directed toward regional lymph nodes  
(including satellite nodule(s)  $> 2$  cm from the primary lesion)

NOTE 1: Skin ulceration does not alter the classification.

NOTE 2: Clark's level takes precedence over thickness/depth of invasion in case of discrepancy



MALIGNANT MELANOMA OF SKIN Revised July, 1983  
730-737, 841-844, 871-872, 874  
HISTOLOGY: 872 thru 879

**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  
Cheeks, Nose

**Cervical**

Occipital scalp, posterior ear  
Head and neck tumors, any location  
Scapula, above transverse line

**Supraclavicular (transverse cervical)**

Chest wall, anterior and posterior  
Neck

**Popliteal**

Heel  
Posterior leg

**Axillary**

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

**Epitrochlear**

Hand  
Forearm

**Superficial inguinal**

Lumbar region (lower back)  
Abdominal wall,  
    anterior and posterior  
Perineum  
Perianal region

**Femoral**

Lower extremities  
    (excluding heel)  
Perineum  
Perianal region

**DISTANT, Direct Extension or Metastasis**

D<sub>1</sub> if:

Underlying cartilage, bone, muscle

D<sub>2</sub> if:

Metastatic (generalized) skin lesions

D<sub>3</sub> if:

Other distant involvement

**DISTANT, Lymph Nodes**

Other than above

SKIN OTHER THAN MELANOMA Revised July, 1983  
730-737

NOTE: For skin of vulva, use 841-844 schemes;  
for penis, use 871, 872, 874 schemes.

IN SITU; intraepidermal

LOCALIZED

Single lesion confined to dermis  
Skin ulceration  
Subcutaneous tissues (through entire dermis)  
Localized, NOS

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

Occipital scalp, posterior ear  
Head and neck tumors, any location  
Scapula, above transverse line

Supraclavicular (transverse cervical)

Chest wall, anterior and posterior  
Neck

Axillary

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

Epitrochlear

Hand  
Forearm

Superficial inguinal

Lumbar region (lower back)  
Abdominal wall,  
anterior and posterior  
Perineum  
Perianal region

Femoral

Lower extremities  
(excluding heel)  
Perineum  
Perianal region

Popliteal

Heel  
Posterior leg

**DISTANT. Direct Extension or Metastasis**

D<sub>1</sub> if:

Underlying cartilage, bone, and muscle

D<sub>2</sub> if:

Metastatic (generalized) skin lesions

D<sub>3</sub> if:

Other distant involvement

**DISTANT. Lymph Nodes**

Other than above



## LYMPHATICS OF THE BREAST

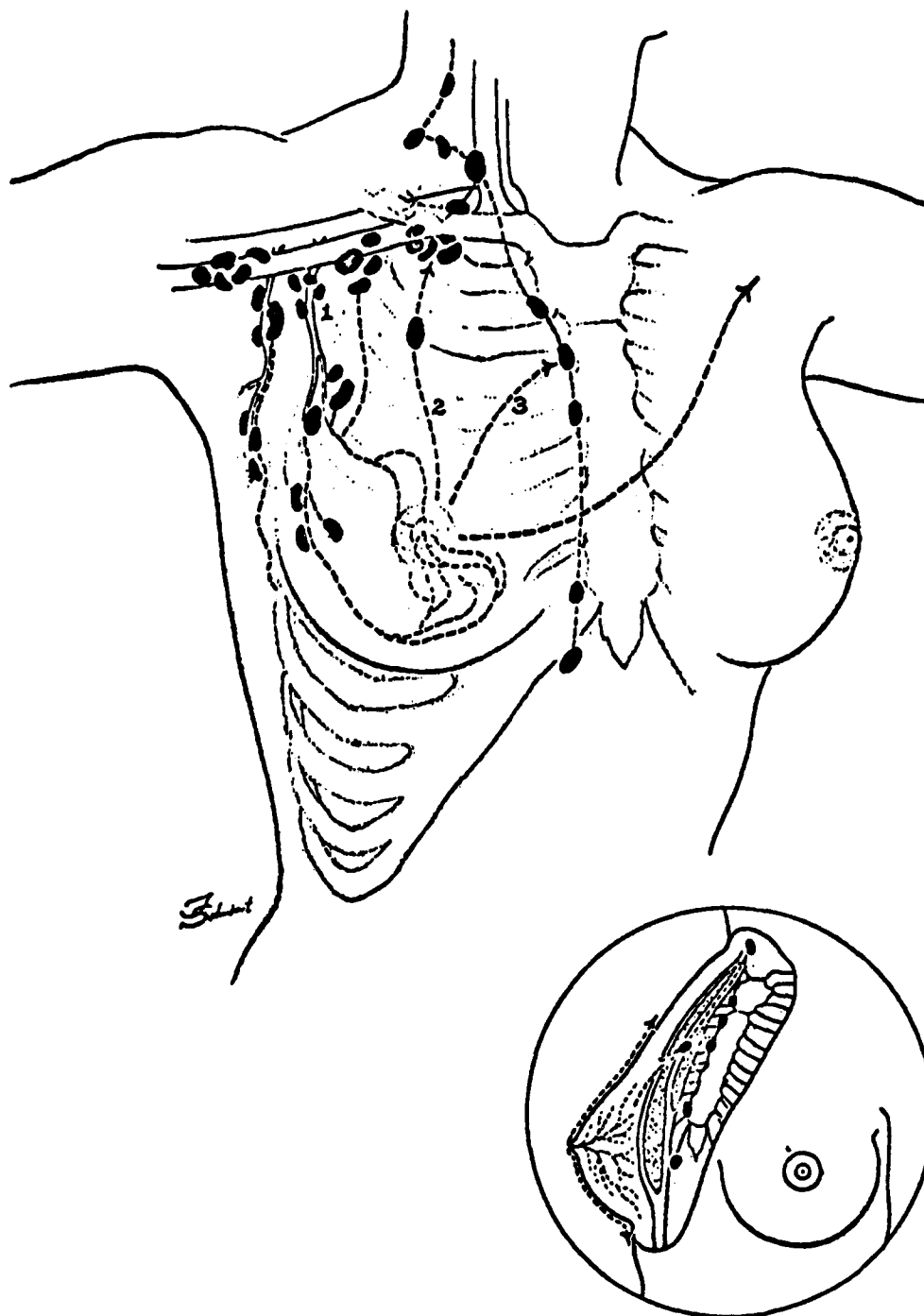


Fig. 669. Lymphatics of the breast leading to, 1, axillary nodes which are distributed over a large area from the lateral aspects of the breast proper to the axillary vessels; 2, interpectoral chain leading to interpectoral node (circle detail) and to high nodes in the axilla; 3, chain of the internal 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.

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 (including noninfiltrating, intraductal without infiltration)

LOCALIZED

Confined to breast, including nipple and/or areola:

- L<sub>1</sub> if tumor size is <2 cm
- L<sub>2</sub> if tumor size is 2-4.9 cm
- L<sub>3</sub> if tumor size is ≥ 5 cm
- L<sub>4</sub> if tumor size is unknown
- L<sub>x</sub> Localized, NOS

Note: Skin changes such as dimpling, tethering, attachment, fixation, induration and thickening or Paget's disease of nipple do not alter the classification.

REGIONAL, Direct Extension

R<sub>1</sub> if tumor of any size with:

- Invasion of subcutaneous tissue
- Skin infiltration of primary breast
- 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

R<sub>2</sub> if:

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

**REGIONAL. Lymph Nodes**

Axillary (low, adjacent to tail of breast;  
mid. central, interpectoral, Rotter's node;  
high, subclavicular, axillary vein nodes, apical)  
Internal mammary (parasternal)

Nodules in axillary fat

**DISTANT. Direct Extension or Metastasis**

D<sub>1</sub> if  
Skin over sternum, upper abdomen, axilla or opposite breast  
Satellite nodule(s) in skin other than primary breast

D<sub>2</sub> if tumor involves:  
Breast, contralateral

D<sub>3</sub> if:  
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

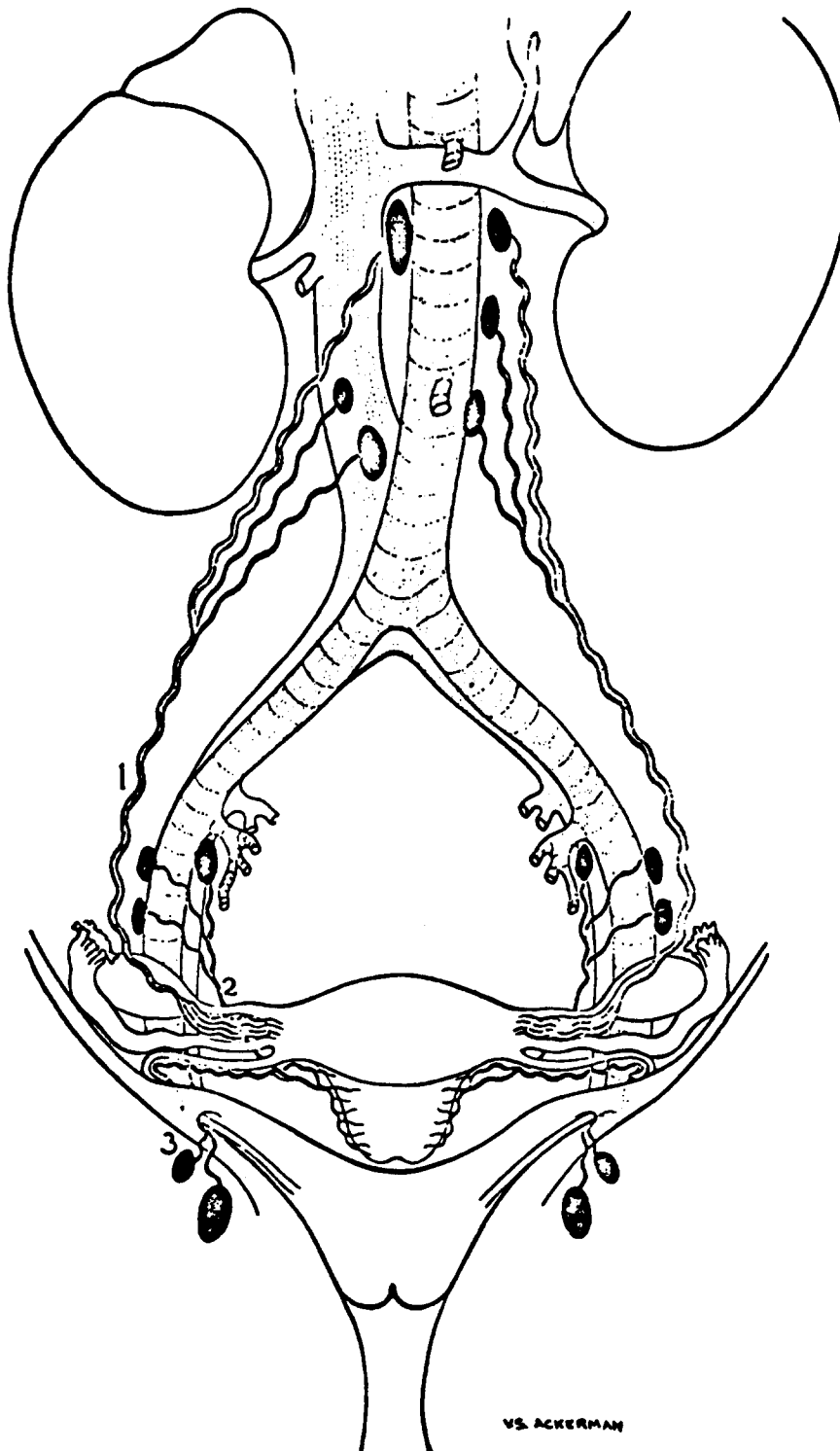


Fig. 619. Schematic representation of the lymphatics of the uterus showing, 1, the utero-ovarian pedicle; 2, the external iliac pedicle; and, 3, the round ligament pedicle leading to the inguinal lymph nodes.

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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:

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)  
Obturator  
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

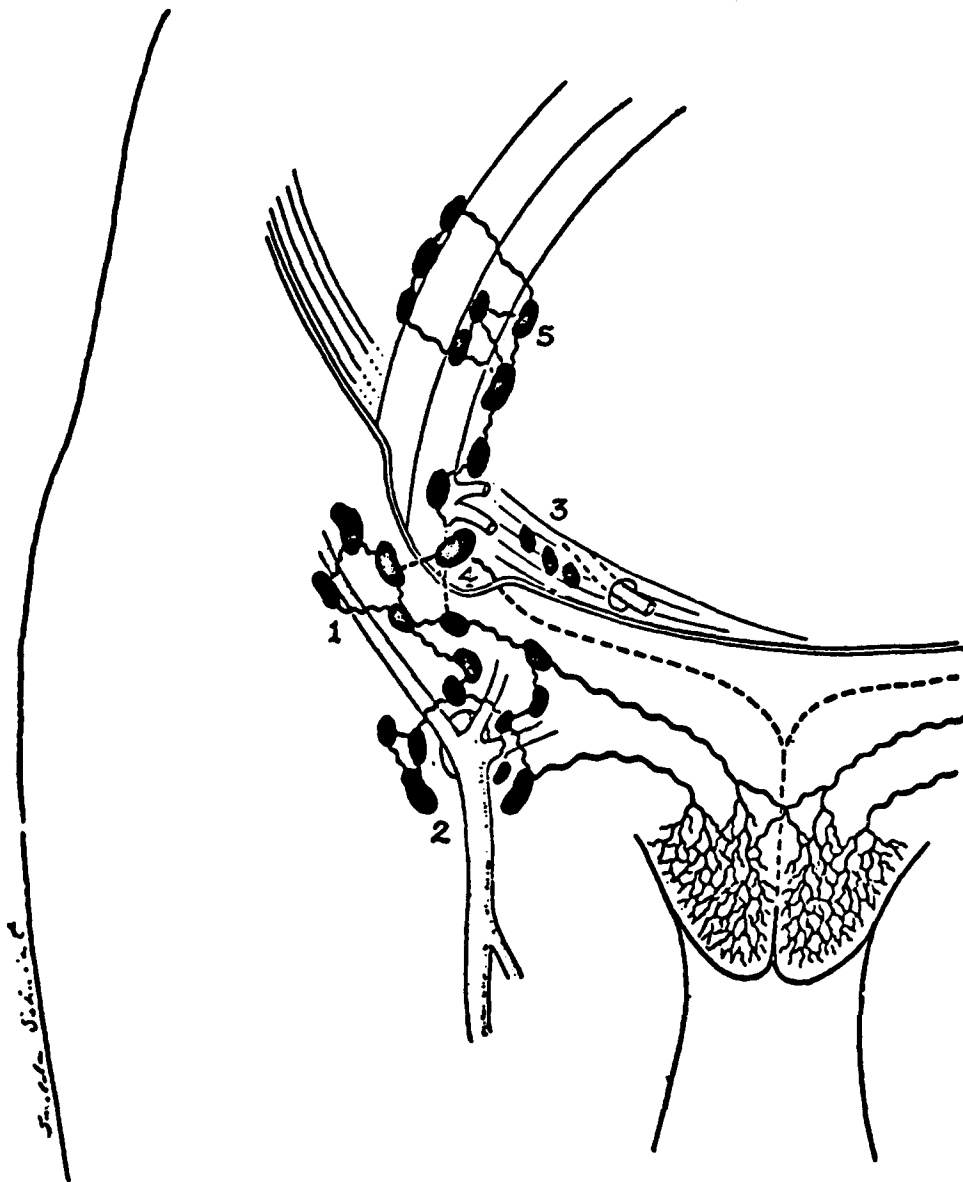


Fig. 662. Lymphatics of the vulva leading to, 1, the superficial inguinal lymph nodes; 2, the superficial femoral nodes; 3, the deep inguinal nodes through the main clearing station; 4, the node of Cloquet; 5, the external iliac nodes.

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:

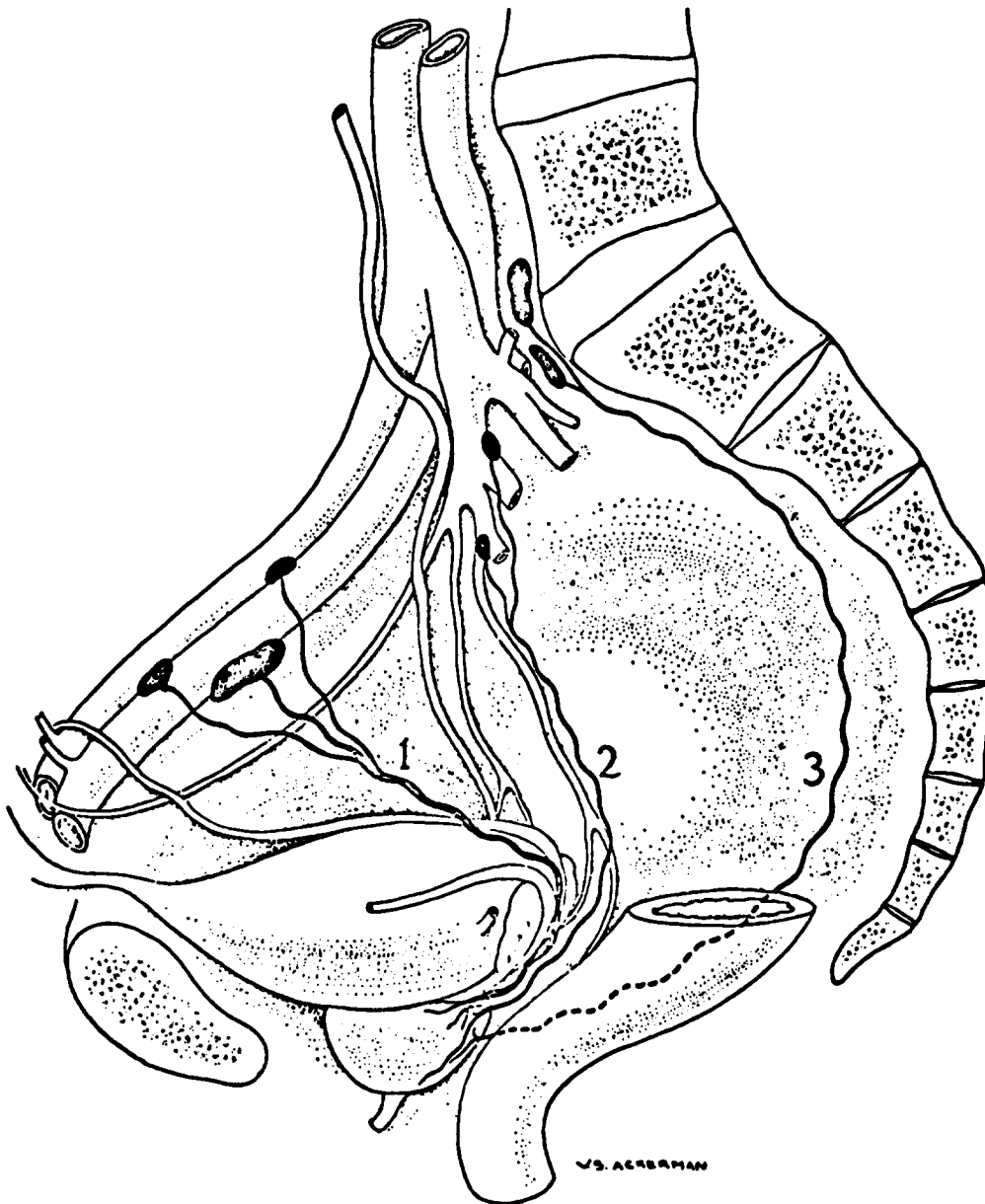
2

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

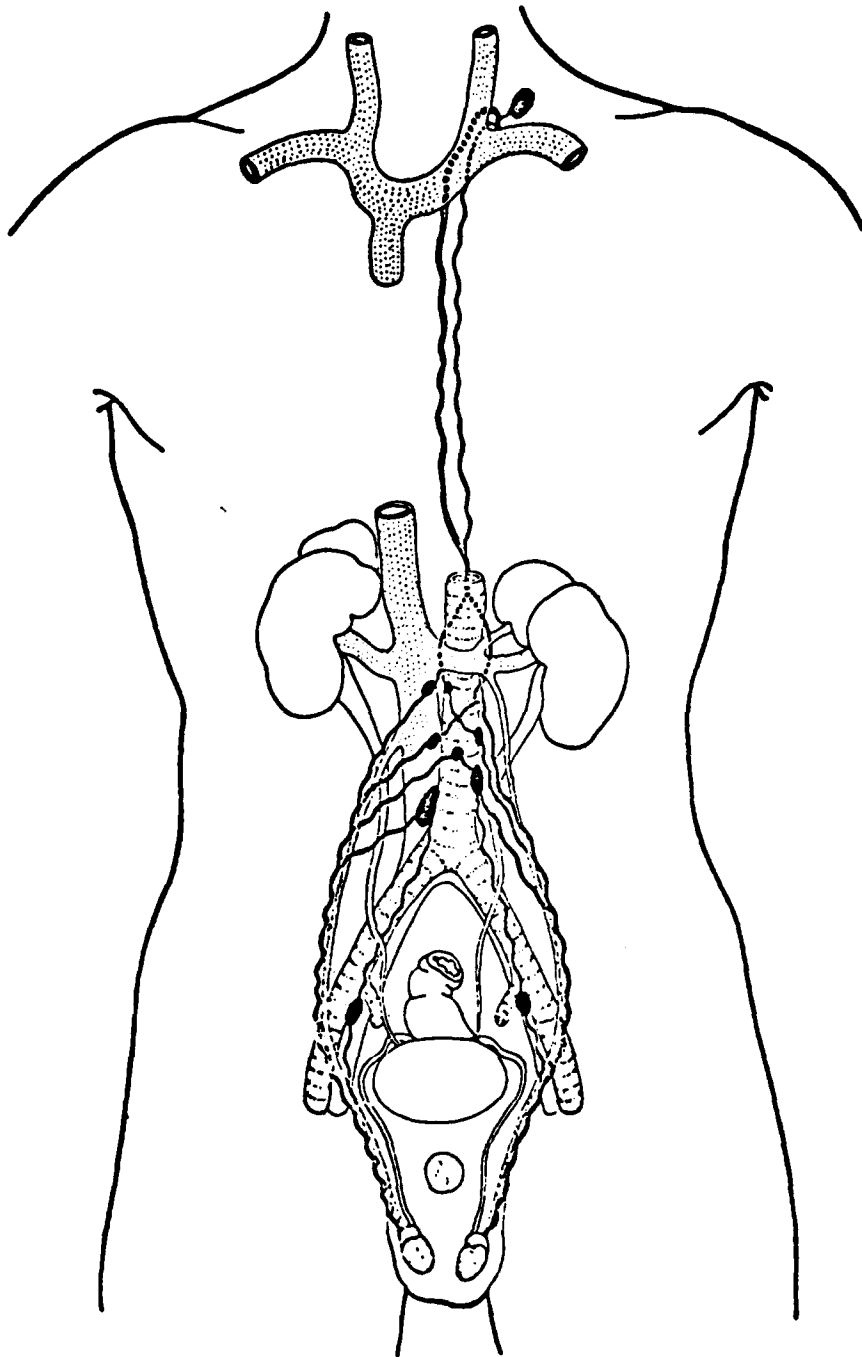


Fig. 562. Schematic representation of the lymphatics of the testis showing main drainage in the para-aortic lymphatics and further lymphatic extension by way of the thoracic duct. The <sup>6</sup> left supraclavicular node is fairly frequently involved. The lymphatics of the epididymis drain into the 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

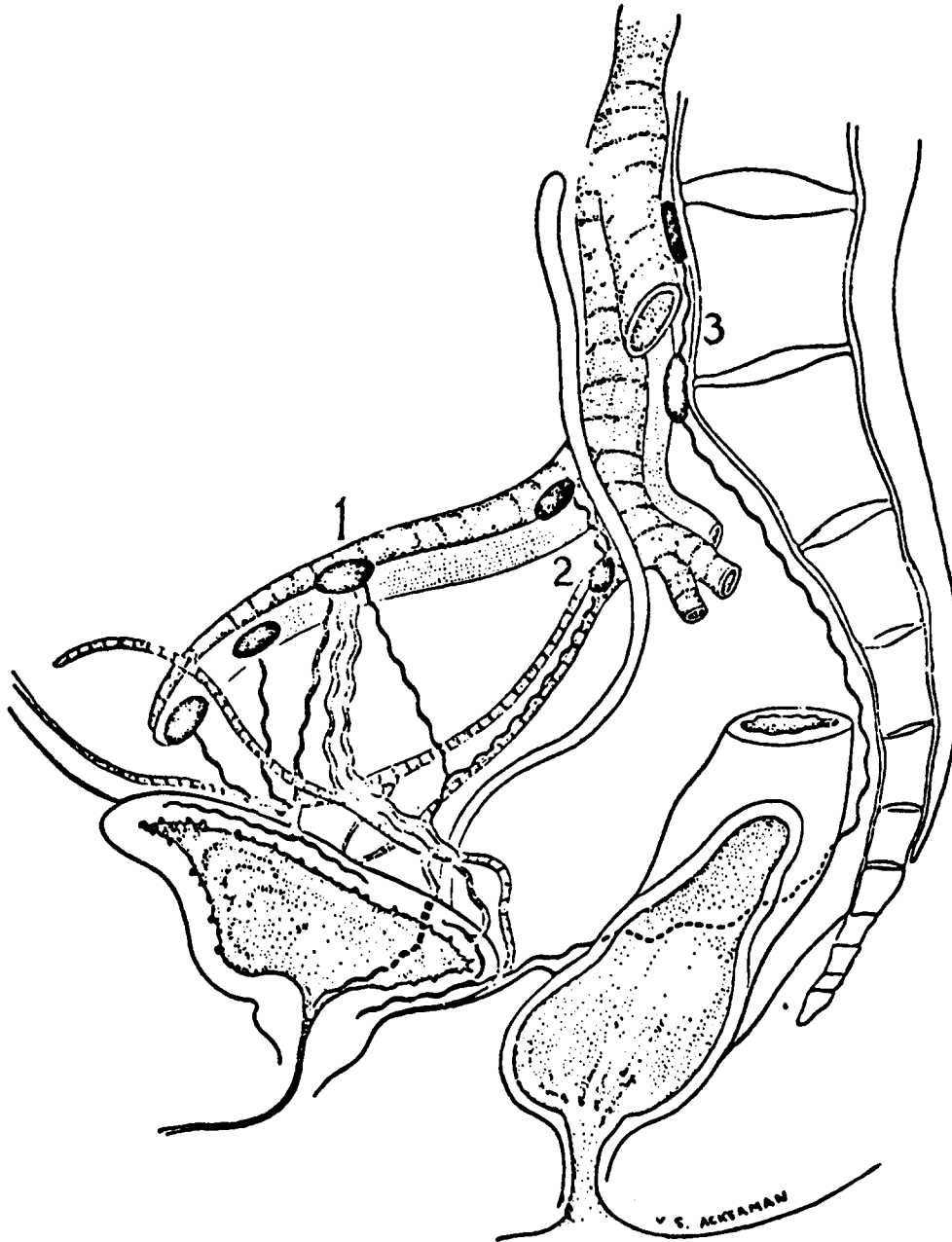


Fig. 534. Anatomic sketch of the lymphatics of the bladder drained mainly by, 1, the external iliac nodes but also by, 2, hypogastric and, 3, common iliac nodes.

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; 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: subdiaphragic

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 TISSUE Revised July, 1983  
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 <sub>1</sub>)**

Involvement of lymphatic regions on both sides of the  
diaphragm

**Stage IV (Distant <sub>2</sub>)**

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.

HODGKIN'S DISEASE and NON-HODGKIN'S LYMPHOMA\*\* Revised July, 1983  
Histology: 959 thru 969, 975  
(Applicable to all primary site codes)

Stage I (Localized)

Confined to one lymphatic region above or below the diaphragm

OR

Confined to a single extranodal organ or site

Stage II (Regional)

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

OR

Involvement of an extranodal organ or site with  
(1) direct extension to adjacent organs or tissues, or  
(2) involvement of one or more lymphatic regions on the same  
side of the diaphragm, or (3) both (1) and (2)

Stage III (Distant <sub>1</sub>)

Involvement of lymphatic regions on both sides of the diaphragm

OR

Involvement of an extranodal organ or site with involvement  
of lymphatic regions on opposite or both sides of the diaphragm

Stage IV (Distant <sub>2</sub>)

Diffuse or disseminated involvement of one or more meta-  
static sites with or without associated lymph node enlargement

Bone	Gastrointestinal tract
Bone marrow	Skin lesions or subcutaneous nodules
Lung and/or pleura	Brain
Liver	Eye
Kidney	

SYSTEMIC SYMPTOMS

Night sweats	Pruritis
Unexplained fever	Unexplained weight loss

\*\*An alternative scheme for ONLY those hospitals wishing to stage lymphoma of extranodal sites. This scheme will not be used in the Certification Examination.