

SUMMARY STAGE 2018 GENERAL CODING INSTRUCTIONS September 2019

Effective with cases diagnosed January 1, 2018 and forward

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The original 2-digit Historic Coding was prepared for the National Cancer Institute End Results Group by an Extent of Disease Advisory Group. While this code had been in use since the early 1950s, it was not printed as a formal document until 1967.

The 1977 Summary Staging Guide was prepared by the Demographic Analysis Section of the National Cancer Institute and was edited by Evelyn M. Shambaugh and Mildred A. Weiss. This manual has been reprinted numerous times in the ensuing years.

The Summary Staging Guide 2000 (SS2000) was a follow-on to the two previous staging versions, Summary Stage 1977 and historic stage. SS2000 updated medical terminology and newer concepts of stage. In order to document the SS2000 changes, footnotes designated terms that changed their stage designation and what they would have been in the two previous versions.

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SUMMARY STAGE

Summary Stage is the most basic way of categorizing how far a cancer has spread from its point of origin. Historically, Summary Stage has also been called General Stage, California Stage, historic stage, and SEER Stage.

The 2018 version of Summary Stage applies to every site and/or histology combination, including lymphomas and leukemias.

Summary Stage uses all information available in the medical record; in other words, it is a combination of the most precise clinical and pathological documentation of the extent of disease. Many central registries report their data by Summary Stage as the staging categories are broad enough to measure the success of cancer control efforts and other epidemiologic efforts.

There are six main categories in Summary Stage, each of which is discussed in detail. In addition, the main category of Regional stage is subcategorized by the method of spread. The code structure is:

Code	Definition
0	In situ
1	Localized only
2	Regional by direct extension only
3	Regional lymph nodes only
4	Regional by BOTH direct extension AND lymph node involvement
7	Distant site(s)/node(s) involved
8	Benign/borderline*
9	Unknown if extension or metastasis (unstaged, unknown, or unspecified) Death certificate only case

*Applicable for the following SS2018 chapters: Brain, CNS Other, Intracranial Gland

Note: For SS2018, code 5 for “Regional, NOS” can no longer be coded. Code 5 (Regional, NOS) is still applicable for SS2000.

GUIDELINES BY STAGE

Code 0: In situ

Note: ALWAYS check site-specific SS2018 chapters for exceptions and/or additional information

1. In situ means “in place”. The technical definition of in situ is the presence of malignant cells within the cell group from which they arose. There is no penetration of the basement membrane of the tissue and no stromal invasion. Generally, a cancer begins in the rapidly dividing cells of the epithelium or lining of an organ and grows from the inside to the outside of the organ. An in situ cancer fulfills all pathological criteria for malignancy except that it has not invaded the supporting structure of the organ or tissue in which it arose.
Note: If the pathology report indicates an in situ tumor but there is evidence of positive lymph nodes or distant metastases, code to the regional nodes/distant metastases.
2. An in situ diagnosis **can only be made microscopically**, because a pathologist must identify the basement membrane and determine that it has not been penetrated. If the basement membrane has been disrupted (in other words, the pathologist describes the tumor as microinvasive, microinvasion), the case is no longer in situ and is at least localized (code 1).
3. Pathologists have many ways of describing in situ cancer
 - Intracystic
 - Intra-epithelial
 - No penetration below the basement membrane
 - No stromal invasion
 - Non-infiltrating
 - Noninvasive
 - Pre-invasive
4. Organs and tissues that have no epithelial layer cannot be staged as in situ, since they do not have a basement membrane.
5. Code 0 is not applicable for the following Summary Stage chapters
 - Bone
 - Brain
 - Cervical Lymph Nodes, Occult Head and Neck
 - CNS Other
 - Corpus Sarcoma
 - Heart, Mediastinum and Pleura
 - HemeRetic
 - Ill-defined other
 - Kaposi Sarcoma
 - Lymphoma
 - Lymphoma Ocular Adnexa
 - Mycosis Fungoides
 - Myeloma Plasma Cell Disorder
 - Pleural Mesothelioma
 - Primary Cutaneous Lymphoma (non-MF and SS)
 - Retinoblastoma
 - Retroperitoneum
 - Soft Tissue

Code 1: Localized

Note: ALWAYS check site-specific SS2018 chapters for exceptions and/or additional information

1. A localized cancer is defined as
 - a. Malignancy limited to the site of origin
 - b. Spread no farther than the site of origin in which it started
 - c. Infiltration past the basement membrane of the epithelium into parenchyma (the functional part of the organ), but there is no spread beyond the boundaries of the organ

Note: A tumor can be widely invasive or even show metastases within the organ itself and still be “confined to organ of origin” or localized in Summary Stage.

2. For organs that have definite boundaries (such as prostate, testis, or stomach) or sites where there is a clear line between the organ of origin and the surrounding region (such as breast or bladder), it is usually straightforward to determine if the cancer is localized.
 - a. An exception is skin, because it is sometimes difficult to determine where the dermis ends and subcutaneous tissue begins.
 - b. For many internal organs, it is difficult to determine whether the tumor is localized without surgery; however, with the increasing sophistication of imaging, it may be possible to determine whether a cancer is localized or regional without surgery.
3. It is important to know and recognize the names of different structures within the organ (such as lamina propria, myometrium, muscularis) so that a description of invasion or involvement of these structures will not be interpreted inappropriately, which may lead to over-staging.
4. Because Summary Stage uses both clinical and pathological information, it is important to review and read the pathology and operative report(s) for comments on gross evidence of spread, microscopic extension and metastases, as well as physical exam and diagnostic imaging reports for mention of regional or distant disease.
 - a. If any of these reports provides evidence that the cancer has spread beyond the boundaries of the organ of origin, the case is not localized.
 - b. If the pathology report, operative report and other investigations show no evidence of spread, the tumor may be assumed to be localized.
5. Code 1 is not applicable for the following Summary Stage chapters:
 - Cervical Lymph Nodes and Unknown Primary
 - Ill-defined other

Regional Stage: Codes 2-4

There are several codes to describe the different methods of regional spread of tumor.

Code	Definition
2	Regional by direct extension only
3	Regional lymph node(s) involved only
4	Regional by BOTH direct extension AND regional lymph node(s) involved

Clinicians may use some terms differently than cancer registrars. Therefore, it is important to understand the words used to describe the spread of the cancer and how they are used in staging. For example:

1. “Local” as in “carcinoma of the stomach with involvement of the local lymph nodes.” Local nodes are the first group of nodes to drain the primary site and often are referred to as “regional” nodes. Unless evidence of distant or regional spread is present, such a case should be staged as regional, lymph node(s) involved only, assign 3.
2. “Metastases” as in “carcinoma of lung with peribronchial lymph node metastases”. Metastases in this sense means involvement by tumor. The name of the involved lymph node will determine whether it is a regional node or distant node. In this case, it would be a regional node. It is important to learn the names of regional nodes for each primary site.

Code 2: Regional by direct extension only

Note: ALWAYS check site-specific SS2018 chapters for exceptions and/or additional information

1. Regional stage by direct extension is perhaps the broadest category as well as the most difficult to properly identify. The brief definition is direct tumor extension beyond the limits of the site of origin. Although the boundary between localized and regional tumor extension is usually well-identified, the boundary between regional and distant spread is not always clear and can be defined differently by physicians in various specialties.
2. Cancer becomes regional by direct extension when there is potential for spread by more than one vascular supply route. For example, if the tumor goes outside of the wall and invades another organ, it regional by direct extension.
3. The formal (scientific) definition of regional used by surgeons is that area extending from the periphery of an involved organ that lends itself to removal en bloc with a portion of, or an entire organ with outer limits to include at least the first level nodal basin. However, en bloc resection (removal of multiple organs or tissues in one piece at the same time) is not always feasible or may have been shown not to be necessary. For example, many clinical trials have shown that lumpectomy or modified radical mastectomy has equivalent survival to the very disfiguring radical mastectomy for treatment of breast cancer.
4. In contrast, radiation oncologists define the term regional as including any organs or tissues encompassed in the radiation field used to treat the primary site and regional lymph nodes.
5. For primary sites that have “walls” (e.g. colon, rectum), regional by direct extension is invasion through entire wall of organ into surrounding organs and/or adjacent tissues, direct extension or contiguous spread. For those primary sites without defined walls, regional by direct extension is when the tumor has spread beyond the primary site or capsule into adjacent structures.
6. Do NOT use code 2 if there is direct extension and also regional nodes positive (see code 4).
7. Code 2 is not applicable for the following Summary Stage chapters:
 - Cervical Lymph Nodes and Unknown Primary
 - HemeRetic
 - Ill-defined other
 - Myeloma Plasma Cell Disorder

Code 3: Regional lymph nodes only

Note: ALWAYS check site-specific SS2018 chapters for exceptions and/or additional information

1. Regional lymph nodes are listed for each chapter/site.
 - a. If a lymph node chain is not listed in code 3, then the following resources can be used to help identify regional lymph nodes:
 - i. Appendix I
 - ii. Anatomy textbook
 - iii. ICD-O manual
 - iv. Medical dictionary (synonym)
2. If no preoperative treatment was administered and there is a discrepancy between clinical information and pathological information about the same lymph nodes, pathological information takes precedence. It is not necessary to biopsy every lymph node in the suspicious area to disprove involvement. Use the following priority order:
 - a. Pathology report
 - b. Imaging
 - i. If nodes are determined positive based on imaging and then confirmed to be negative on pathological exam, treat the regional nodes as negative when assigning Summary Stage
 - c. Physical exam
 - i. If nodes are determined positive based on physical exam and then confirmed to be negative on pathological exam, treat the regional nodes as negative when assigning Summary Stage
3. If the patient receives neoadjuvant (preoperative) systemic therapy (chemotherapy, immunotherapy) or radiation therapy, code the clinical information if that is the most extensive lymph node involvement documented. If the post-neoadjuvant surgery shows more extensive lymph node involvement, code the regional nodes based on the post-neoadjuvant information.
4. For solid tumors, the terms “fixed” or “matted” and “mass in the hilum, mediastinum, retroperitoneum, and/or mesentery” (with no specific information as to tissue involved) are recorded as involvement of lymph nodes.
 - a. Other terms, such as “palpable,” “enlarged,” “visible swelling,” “shotty,” or “lymphadenopathy” should be ignored for solid tumors. If these terms are used and there is no treatment to indicate lymph node involvement, treat the case as having no lymph node involvement.
5. The terms “homolateral,” “ipsilateral,” and “same side” are used interchangeably.

6. **Accessible lymph nodes:** For “accessible” lymph nodes that can be observed, palpated, or examined without instruments, such as the regional nodes for the breast, oral cavity, salivary gland, skin, thyroid, and other organs, look for some description of the regional lymph nodes. **A statement such as “remainder of examination negative” is sufficient to determine negative regional lymph nodes.**
7. **Inaccessible lymph nodes:** For certain primary sites, regional lymph nodes are not easily examined by palpation, observation, physical examination, or other clinical methods. These are lymph nodes within body cavities that in most situations cannot be palpated, making them inaccessible. Bladder, colon, corpus uteri, esophagus, kidney, liver, lung, ovary, prostate, and stomach are examples of inaccessible sites (this is not an all-inclusive list). When the tumor is Localized and standard treatment for a localized site is done, it is sufficient to determine negative regional lymph nodes.
8. Involved nodes found during sentinel lymph node procedures are classified as positive regional nodes.
 - a. The sentinel lymph node is the first lymph node to receive lymphatic drainage from a primary tumor.
 - b. If it contains metastatic tumor, this indicates that other lymph nodes may contain tumor. If it does not contain metastatic tumor, other lymph nodes are not likely to contain tumor. Occasionally there is more than one sentinel lymph node
9. For some chapters, ITCs are counted as positive regional nodes, while other chapters count them as negative. See the individual chapters to determine how to count ITCs.
10. Discontinuous (satellite) tumor deposits (peritumoral nodules) for colon, appendix, rectosigmoid and rectum can occur WITH or WITHOUT regional lymph node involvement. Assign the appropriate code according to guidelines in individual chapters. Tumor nodules in pericolic or perirectal fat without evidence of residual lymph node structures can be one of several aspects of the primary cancer: discontinuous spread, venous invasion with extravascular spread, or a totally replaced lymph node. If there are Tumor Deposits AND node involvement, code only the information on node involvement in Summary Stage.
11. If direct extension of the primary tumor into a regional lymph node is shown, code as involved regional nodes.
12. Any positive unidentified nodes included with the resected primary site specimen are to be coded as “Regional Lymph Nodes, NOS”.
13. If the only indication of positive regional lymph node involvement in the record is the physician’s statement of a positive N category from the TNM staging system or a stage from a site-specific staging system, use that information to code regional lymph node involvement.
14. If a specific chain of lymph nodes is named, but not listed as regional, first determine if the name is synonymous with a listed lymph node. Otherwise, assume distant lymph node(s) are involved.

15. Code 3 is not applicable for the following Summary Stage chapters:

- Brain
- CNS Other
- HemeRetic
- Ill-defined other (includes unknown primary site, C809)
- Intracranial Gland
- Lymphoma
 - Primary Cutaneous Lymphoma and Ocular Adnexal Lymphoma have separate chapters from Lymphoma and regional lymph node involvement is assigned in these chapters.

16. Do NOT use code 3 if there are regional nodes positive AND also direct extension (see code 4).

Code 4: Regional by BOTH direct extension AND regional lymph node(s) involved

Note: ALWAYS check site-specific SS2018 chapters for exceptions and/or additional information

1. For tumors that are regional (see definition of code 2) and have regional lymph node involvement (see definition of code 3), use code 4.
2. If there is only localized involvement (see definition of code 1) with regional lymph node involvement, assign code 3.
3. Code 4 is not applicable for the following Summary Stage chapters:
 - Brain
 - Cervical Lymph Nodes and Unknown Primary
 - CNS Other
 - HemeRetic
 - Ill-defined other (includes unknown primary site)
 - Intracranial Gland
 - Lymphoma
 - Primary Cutaneous Lymphoma and Ocular Adnexal Lymphoma have separate chapters from Lymphoma and regional lymph node involvement is assigned in these chapters.
 - Myeloma Plasma Cell Disorder

Code 7: Distant

Note: ALWAYS check site-specific SS2018 chapters for exceptions and/or additional information

1. Distant metastases are tumor cells that have broken away from the primary tumor, have travelled to other parts of the body, and have begun to grow at the new location. Distant stage is also called remote, diffuse, disseminated, metastatic, or secondary disease. The point is that in most cases there is no visible continuous trail of tumor cells involving only the primary site and the distant site.
2. Cancer cells can travel from the primary site in any of four ways.
 - a. Extension from primary organ beyond adjacent tissue into next organ; for example, from the lung through the pleura into bone or nerve
 - b. Travel in lymph channels beyond the first (regional) drainage area. Tumor cells can be filtered, trapped and begin to grow in any lymph nodes in the body.
 - c. Hematogenous or blood-borne metastases. Invasion of blood vessels within the primary tumor (veins are more susceptible to invasion than thicker-walled arteries) allows escape of tumor cells or tumor emboli which are transported through the blood stream to another part of the body where it lodges in a capillary or arteriole. At that point, the tumor penetrates the vessel wall and grows back into the surrounding tissue.
 - d. Spread through fluids in a body cavity.
 - i. Example: malignant cells rupture the surface of the primary tumor and are released into the thoracic or peritoneal cavity. They float in the fluid and can land and grow on any tissue reached by the fluid.
 - ii. This type of spread is also called implantation or seeding metastases. Some tumors form large quantities of fluid called ascites that can be removed, but the fluid rapidly re-accumulates. However, the presence of fluid or ascites does not automatically indicate dissemination. There must be cytologic evidence of malignant cells. A subsequent clinical diagnosis should be able to override a negative cytology. Malignant cells in ascites or peritoneal washings may not be distant involvement in some schemas.
3. Common sites of distant spread are liver, lung, brain, and bones, but they are not listed specifically for each chapter. These organs receive blood flow from all parts of body and thus are a target for distant metastases. However, if the primary site is adjacent to the liver, lung, brain or bone, it is important to review the Summary Stage chapter for the primary site to assure that the stage is not regional by direct extension.
 - a. Example: Liver involvement from a primary in the gallbladder. It is likely that this is regional by direct extension rather than distant stage, since the gallbladder is adjacent to the liver.
4. Read the diagnostic imaging reports to determine whether the cancer involves the surface of the secondary organ, which could either be regional by direct (contiguous) extension or distant (if determined to be a discontinuous surface implant). If the tumor is identified growing from one organ onto/through the surface of the secondary organ, then it is contiguous extension. But if the tumor is only found in the parenchyma of the secondary organ well away from the primary organ, then it is discontinuous mets.
5. Hematopoietic, immunoproliferative, and myeloproliferative neoplasms are distant except as noted in the Summary Stage chapter.
6. Code 7 is not applicable for the following Summary Stage chapters:
 - Ill-defined other

Code 8: Benign/Borderline

1. Code 8 is for Benign/borderline neoplasms. Benign/borderline neoplasms are collected **ONLY** for the following chapters:
 - Brain
 - CNS Other
 - Intracranial Gland
2. If a registry collects other benign/borderline tumors that are not reportable, use code 9 for Summary Stage 2018. Code 8, at this time, will not be allowed for other sites.

Code 9: Unknown if extension or metastasis (unstaged, unknown or unspecified)

Note: ALWAYS check site-specific SS2018 chapters for exceptions and/or additional information

1. If the primary site is unknown (C809), then Summary Stage must be unknown.
2. Assign 9 very sparingly. If possible, contact the physician to see if there is more information about the case which is not in the record, such as diagnostic studies performed prior to admission or documentation in the physician's office record.
3. There will be cases for which sufficient evidence is not available to adequately assign a stage. Examples include:
 - a. The patient expires before workup is completed
 - b. A patient refuses a diagnostic or treatment procedure
 - c. There is limited workup due to the patient's age or a simultaneous comorbid or contraindicating condition
 - d. Only a biopsy is done and does not provide enough information to assign stage
4. Code 9 is to be used by default for Death Certificate Only (DCO) cases; however, assign the appropriate Summary Stage when specific staging information is available on a DCO.

GENERAL INSTRUCTIONS FOR USING THE SUMMARY STAGE 2018 MANUAL

The 2018 Summary Stage Manual chapters consist of a one-digit hierarchical code. In the United States, these chapters will apply to January 1, 2018 diagnoses and forward. It is extremely important to thoroughly read all clinical and pathological documentation, including imaging studies, operative and pathology reports, and the clinician's narrative descriptions of tumor involvement.

1. Updates to the Summary Stage 2018 manual were based on the AJCC 8th edition. Although the two systems are similar, there are many differences between them. For example, something that is regional in AJCC (recorded in T or N) may be distant in Summary Stage. If a structure or lymph node cannot be found in localized (code 1) or regional (codes 2-4), then review distant (code 7).
2. Summary Stage chapters apply to ALL primary sites and histologies. Most chapters are based on primary site, while some are based on histology alone, or both primary site and histology.
3. Chapter-specific guidelines take precedence over general guidelines. Always read the information pertaining to a specific primary site or histology chapter.
4. For ALL primary sites and histologies, Summary Stage is based on a combined clinical and operative/pathological assessment. Gross observations at surgery are particularly important when all malignant tissue cannot be, or was not, removed.
 - a. In the event of a discrepancy between pathology and operative reports concerning excised tissue, priority is given to the pathology report
5. Summary Stage should include all information available within **four months of diagnosis** in the absence of disease progression or upon completion **of surgery(ies)** in first course of treatment, whichever is longer.
6. Clinical information, such as description of skin involvement for breast cancer and distant lymph nodes for any site, can change the Summary Stage. Be sure to review the clinical information carefully to accurately determine the extent of disease.
 - a. If the operative/pathology information disproves the clinical information, use the operative/pathology information.
7. When multiple tumors are reported as a single primary, assign the greatest Summary Stage from any tumor.
8. Information for Summary Stage from a surgical resection **after neoadjuvant treatment may be used**, but **ONLY** if the extent of disease is greater than the pre-treatment clinical findings.
9. Disease progression, including metastatic involvement, known to have developed after the initial stage workup, should be excluded when assigning Summary Stage.
10. Autopsy reports are used in Summary Stage just as are pathology reports, applying the same rules for inclusion and exclusion.

11. T, N, M information may be used to assign Summary Stage when it is the only information available.
12. Use the medical record documentation to assign Summary Stage when there is a discrepancy between the T, N, M information and the documentation in the medical record. If you have access to the physician, please query to resolve the discrepancy.
 - a. When there is doubt that documentation in the medical record is complete, assign Summary Stage corresponding to the physician staging
13. It is strongly recommended that the assessment of the Summary Stage be documented, as well as the choice of the Summary Stage assignment in a related STAGE text field on the abstract.
14. Death Certificate Only (DCO) cases and unknown primaries are assigned '9' for Summary Stage; however, assign the appropriate Summary Stage when specific staging information is available on a DCO.

GUIDELINES FOR SUMMARY STAGE

For efficient assignment of Summary Stage, here are some additional guidelines. Three of the Summary Stage categories can be ruled out quickly: in situ, distant, and localized.

Note 1: These guidelines do not apply to benign/borderline tumors.

Note 2: ALWAYS check site-specific SS2018 chapters for exceptions and/or additional information

In situ

1. Rule out in situ stage disease. Carcinomas and melanomas are the only types of cancer that can be classified as in situ, since they arise only in organs with a basement membrane. Sarcomas are never described as in situ. A pathologist must examine the primary tissue and state that the tumor is in situ. If the cancer is anything except a carcinoma or melanoma, it cannot be in situ.
2. If there is any evidence of invasion (or extension beyond the basement membrane), nodal involvement or metastatic spread, the case is not in situ even if the pathology report so states.

Distant

3. Rule out distant disease. If distant metastases can be documented, there is no need to spend a great deal of time identifying local or regional spread. If distant metastases are recorded on imaging or needle biopsy, the stage is already determined and the patient does not need to undergo a lot of other tests.
4. Hematopoietic diseases, such as leukemia and multiple myeloma, are disseminated or distant at time of diagnosis.
5. Determine distant spread by reading the operative report for comments about seeding, implants, liver nodules, or other indications of metastases to determine if they are indicators of distant disease for a particular chapter. Read diagnostic reports for references to distant disease.
6. If nodes, organs, or adjacent tissues are not specifically mentioned for the primary site of the cancer in the description of the various staging categories, approximate the location and assign Summary Stage based on the stage listed for organs or tissues in the same anatomic area. If there is no match, assume the involved organ/tissues, nodes in question represents distant disease.

Localized if not in Situ or Distant above

7. Rule out that the cancer is “confined to the organ of origin.” In order for a lesion to be classified as localized, it must not extend beyond the outer limits of the organ, and there must be no evidence of metastases anywhere else.
8. Terms such as “blood vessel invasion” or “perineural lymphatic invasion” do not necessarily indicate that the cancer has spread beyond the primary organ – see specific chapter. If tumor at the primary site has invaded lymph or blood vessels, there is the potential for malignant cells to be transported throughout the body. Minor vessel or lymph-vascular invasion within the primary site is not a determining factor in changing Summary Stage unless there is definite evidence of tumor at distant sites.

Regional

9. If in situ, distant, and localized categories have been ruled out, the stage is regional.
10. For tissues, structures, and lymph nodes, assume ipsilateral unless stated to be contralateral or bilateral.
11. For solid tumors, if there are lymph nodes involved with the tumor, the stage is at least regional.
12. Determine whether it is regional by direct extension, regional nodes, or both.

Unknown if Extension or Metastasis

13. If there is not enough information in the record to categorize a case, and contacting the physician is not possible or has not resulted in additional information, the case must be recorded as unknown.

HOW TO ASSIGN SUMMARY STAGE

Answers to four basic questions will determine the correct Summary Stage.

1. Where did the cancer start?

- a. In what organ or tissue did the tumor originate?
- b. Is there a specific subsite of the organ involved?
- c. Information about the primary site and histology will usually come from the physical examination, a diagnostic imaging report, the operative report or the pathology report.
- d. Code the primary site and histology according to the rules in the *International Classification of Diseases for Oncology, Third Edition; 2018 Solid Tumor Rules; and the Hematopoietic Manual and Database*.
- e. In addition to recording this code in the primary site and histology fields on the cancer abstract, this code will be useful later in the staging process.

2. Where did the cancer go?

- a. Once the primary site is known, determine what other organs or structures are involved.
- b. Review the physical examination, diagnostic imaging reports, operative report(s), pathology report(s), and laboratory tests to identify any structures that are involved by cancer cells.
- c. Any of these reports can provide a piece of information that might change the stage.
- d. Note whether there is lymphatic or vascular invasion and/or spread, which organs are involved, and whether there is a single focus or multiple foci of tumor.
- e. It is important to know the names of the substructures within the primary site as well as the names of surrounding organs and structures. Note the names of any tissues that are reported to be involved by cancer cells.

3. How did the cancer spread to the other organ or structure?

- a. Did the cancer spread to the new organ/tissue in a continuous line of tumor cells from the primary site?
- b. If the pathologist can identify a trail of tumor cells from one organ to another, the stage may be regional by direct extension or distant by direct extension.
- c. Did the cancer spread by breaking away from the primary cancer and floating to the new site in the blood stream or body fluids (includes lymph within lymph vessels, blood within blood vessels, fluid outside of vessels such as pleural, pericardial, peritoneal)?
- d. If there is no direct trail of tumor cells from the primary organ to another site, the stage is probably distant.

4. What are the stage and correct code for this cancer?

- a. In the Summary Staging Manual 2018, go to the appropriate chapter that includes the ICD-O primary site and/or histology code identified earlier.
- b. Review the chapter looking for the names of the structures and organs that were reported as involved. If more than one structure or organ is involved, select the highest category that includes an involved structure.

DEFINITIONS OF TERMS USED IN THIS MANUAL

Adjacent connective tissue

These are unnamed tissues that immediately surround an organ or structure containing a primary cancer. Use this category when a tumor has invaded past the outer border (capsule, serosa, or other edge) of the primary organ into the organ's surrounding supportive structures but has not invaded into larger structures or adjacent organs. The structures considered in ICD-O as connective tissue include the following: adipose tissue; aponeuroses; arteries; blood vessels; bursa; connective tissue, NOS; fascia; fatty tissue; fibrous tissue; ganglia; ligaments; lymphatic channels (not nodes); muscle; nerves (spinal, sympathetic and peripheral); skeletal muscle; subcutaneous tissue; synovia; tendons; tendon sheaths; veins, and vessels, NOS. In general, these tissues do not have specific names. These tissues form the framework of many organs, provide support to hold organs in place, bind tissues and organs together, and serve as storage sites for nutrients.

Adjacent organs/structures

Organs are anatomic structures with specific physiologic functions other than (or in addition to) support and storage. There are two types:

- Unnamed: Contiguous growth into an unnamed organ lying next to the primary is coded to 'adjacent organs/structures.'
- Named: Connective tissues may be large enough to be given a specific name.
 - Examples: Blood, cartilage and bone are sometimes considered connective tissues, but in this manual, they would be listed separately.
 - Contiguous growth from one organ into an adjacent named structure would be coded to 'adjacent organs/structures.' For example, the brachial artery has a name, as does the broad ligament and both are structures.

Circulating Tumor Cells (CTCs)

See Isolated Tumor Cells

Contiguous

Directly adjacent; continuously adjoining; without lapse or intervening space; used in reference to regionalized cancers and extent of disease.

Cortex (adjective: cortical)

The external or outer surface layer of an organ, as distinguished from the core, or medulla, of the organ. In some organs, such as the adrenal glands, the cortex has a different function than the medulla.

Discontinuous

Tumors that are not connected; tumors in more than one area with normal tissue between them; often a sign of metastatic disease.

Disseminated Tumor Cells (DTCs)

See Isolated Tumor Cells

Direct extension

A term used in staging to indicate contiguous growth of tumor from the primary into an adjacent organ or surrounding tissue.

Distant

Refers to cancer that has spread from the original (primary) tumor to distant organs or distant lymph nodes.

Isolated tumor cells (ITCs), Circulating tumor cells (CTCs), Disseminated tumor cells (DTCs)

Isolated tumor cells (ITCs) are single tumor cells or small clusters of cells not more than 0.2 mm in greatest extent that can be detected by routine H and E stains or immunohistochemistry. An additional criterion has been proposed to include a cluster of fewer than 200 cells in a single histological cross-section. The same applies to cases with findings suggestive of tumor cells or their components by non-morphological techniques such as flow cytometry or DNA analysis.

ITCs do not typically show evidence of metastatic activity (e.g. proliferation or stromal reaction) or penetration of lymphatic sinus walls.

This definition also refers to circulating tumor cells (CTCs) and disseminated tumor cells (DTCs)

Localized

In medicine, describes disease that is limited to a certain part of the body. For example, localized cancer is usually found only in the tissue or organ where it began, and has not spread to nearby lymph nodes or to other parts of the body. Some localized cancers can be completely removed by surgery.

Medulla (adjective: medullary)

The medulla (central) portion of an organ, in contrast to the outer layer or cortex. It is sometimes called marrow. In some organs, such as bone, the medulla or marrow has a different physiologic role than the cortex.

Parenchyma

The parenchyma is the functional portion of an organ, in contrast to its framework or stroma. For example, the parenchyma of the kidney contains all the structures which filter and remove waste products from the blood. In general, malignancies tend to arise in the parenchyma of an organ.

Regional

In oncology, describes the body area right around a tumor.

Stroma

The stroma are the cells and tissues that support, store nutrients, and maintain viability within an organ. Stroma consists of connective tissue, vessels and nerves, and provides the framework of an organ. In general, spread of tumor to the stroma of an organ is still localized or confined to the organ of origin.

AMBIGUOUS TERMINOLOGY

Most of the time, registrars will find definitive statements of involvement; however, for those situations where involvement is described with non-definitive (ambiguous) terminology, use the guidelines below to interpret and determine the appropriate assignment of Summary Stage 2018.

Determination of the cancer stage is both a subjective and objective assessment by the physician(s) of how far the cancer has spread. When it is not possible to determine the extent of involvement because terminology is ambiguous, look at the documentation that the physician used to make informed decisions on how the patient is being treated. For example, assign Summary Stage 2018 based on involvement when the patient was treated as though adjacent organs or nodes were involved.

Use the following lists to interpret the intent of the clinician **ONLY** when further documentation is not available and/or there is no specific statement of involvement in the medical record. The physician's definitions/descriptions and choice of therapy have priority over these lists because individual clinicians may use these terms differently.

Note 1: Terminology in the chapter takes priority over this list. Some chapters interpret certain words as involvement; such as 'encasing' the carotid artery for a head and neck site or "abutment," "encases," or "encasement" for pancreas primaries.

Note 2: Use this list only for Summary Stage 2018 or EOD 2018.

Note 3: This is **not** the same list used for determining reportability as published in the [SEER manual](#), [Hematopoietic Manual](#) or in Section 1 of the Standards for Oncology Registry Entry (STORE). This is **not** the same list of ambiguous terminology provided in the [Solid Tumors Rules](#) published and maintained by the SEER Program.

Use the following lists as a guide **when no other information is available.**

Involved

Adherent	Incipient invasion
Apparent(ly)	Induration
Appears to	Infringe/infringing
Comparable with	Into*
Compatible with	Intrude
Consistent with	Most likely
Contiguous/continuous with	Onto*
Encroaching upon*	Overstep
Extension to, into, onto, out onto	Presumed
Features of	Probable
Fixation to a structure other than primary**	Protruding into (unless encapsulated)
Fixed to another structure**	Suspected
Impending perforation of	Suspicious
Impinging upon	To*
Impose/imposing on	Up to

Not Involved

Abuts	Extension to without invasion/involvement of
Approaching	Kiss/kissing
Approximates	Matted (except for lymph nodes)
Attached	Possible
Cannot be excluded/ruled out	Questionable
Efface/effacing/effacement	Reaching
Encased/encasing	Rule out
Encompass(ed)	Suggests
Entrapped	Very close to
Equivocal	Worrisome

* interpret as involvement whether the description is clinical or operative/pathological

** interpret as involvement of other organ or tissue

SUMMARY STAGE 2018 CHAPTERS

The Summary Stage site-specific chapters are based on historical staging, Summary Stage 2000 and the AJCC 8th Edition. Some of the AJCC 8th edition chapters were divided to line up with historical Summary Stage chapters.

SS Chapter	EOD Schema	AJCC Chap. No	AJCC Chapter Name
Adnexa Uterine Other	Adnexa Uterine Other	N/A	N/A
Adrenal Gland (including NET)	Adrenal Gland	76	Adrenal Cortical Carcinoma
Adrenal Gland (including NET)	NET Adrenal Gland	77	Adrenal-Neuroendocrine Tumors
Ampulla Vater (including NET)	Ampulla Vater	27	Ampulla of Vater
Ampulla Vater (including NET)	NET Ampulla of Vater	30	Neuroendocrine Tumors of the Duodenum and Ampulla of Vater
Anus	Anus	21	Anus
Appendix (including NET)	Appendix	19	Appendix-Carcinoma
Appendix (including NET)	NET Appendix	32	Neuroendocrine Tumors of the Appendix
Biliary Other	Biliary Other	N/A	N/A
Bladder	Bladder	62	Urinary Bladder
Bone	Bone Appendicular Skeleton	38	Bone
Bone	Bone Pelvis	38	Bone
Bone	Bone Spine	38	Bone
Brain	Brain	72	Brain and Spinal Cord
Breast	Breast	48	Breast
Buccal Mucosa	Buccal Mucosa	7	Lip and Oral Cavity
Cervical Lymph Nodes and Unknown Primary	Cervical Lymph Nodes and Unknown Primary Tumor of The Head and Neck	6	Cervical Lymph Nodes and Unknown Primary Tumors of Head and Neck
Cervix	Cervix	52	Cervix Uteri
CNS Other	CNS Other	72	Brain and Spinal Cord
Colon and Rectum (including NET)	Colon and Rectum	20	Colon and Rectum
Colon and Rectum (including NET)	NET Colon and Rectum	33	Neuroendocrine Tumors of the Colon and Rectum
Conjunctiva	Conjunctiva	65	Conjunctival Carcinoma
Corpus Carcinoma and Carcinosarcoma	Corpus Carcinoma	53	Corpus Uteri-Carcinoma and Carcinosarcoma

SS Chapter	EOD Schema	AJCC Chap. No	AJCC Chapter Name
Corpus Sarcoma (including Adenosarcoma)	Corpus Adenosarcoma	54	Corpus Uteri-Sarcoma
Corpus Sarcoma (including Adenosarcoma)	Corpus Sarcoma	54	Corpus Uteri-Sarcoma
Digestive Other	Digestive Other	N/A	N/A
Endocrine Other	Endocrine Other	N/A	N/A
Esophagus (including GE junction)	Esophagus (including GE junction) Squamous	16	Esophagus and Esophagogastric Junction
Esophagus (including GE junction)	Esophagus (including GE junction) (excluding Squamous)	16	Esophagus and Esophagogastric Junction
Extrahepatic Bile Ducts	Bile Ducts Distal	26	Distal Bile Duct
Extrahepatic Bile Ducts	Bile Ducts Perihilar	25	Perihilar Bile Ducts
Extrahepatic Bile Ducts	Cystic Duct	24	Gallbladder
Eye Other	Eye Other	N/A	N/A
Fallopian Tube	Fallopian Tube	55	Ovary, Fallopian Tube, and Primary Peritoneal Carcinoma
Floor of Mouth	Floor of Mouth	7	Lip and Oral Cavity
Gallbladder	Gallbladder	24	Gallbladder
Genital Female Other	Genital Female Other	N/A	N/A
Genital Male Other	Genital Male Other	N/A	N/A
GIST	GIST	43	Gastrointestinal Stromal Tumors
Gum	Gum	7	Lip and Oral Cavity
Heart and Mediastinum	Heart and Mediastinum	42	Soft Tissue Sarcoma of the Abdomen and Thoracic Visceral Organs
HemeRetic	HemeRetic	83	Leukemia
Hypopharynx	Hypopharynx	11	Oropharynx (p16-) and Hypopharynx
Ill-Defined Other	Ill-Defined Other	N/A	N/A
Intracranial Gland	Intracranial Gland	72	Brain and Spinal Cord
Intrahepatic Bile Ducts	Bile Ducts Intrahepatic	23	Intrahepatic Bile Duct
Kaposi Sarcoma	Kaposi Sarcoma	45	Soft Tissue Sarcoma of Unusual Sites and Histologies
Kidney Parenchyma	Kidney Parenchyma	60	Kidney
Kidney Renal Pelvis	Kidney Renal Pelvis	61	Renal Pelvis and Ureter
Lacrimal Gland/Sac	Lacrimal Gland	69	Lacrimal Gland Carcinoma
Lacrimal Gland/Sac	Lacrimal Sac	N/A	N/A
Larynx Glottic	Larynx Glottic	13	Larynx

SS Chapter	EOD Schema	AJCC Chap. No	AJCC Chapter Name
Larynx Other	Larynx Other	13	Larynx
Larynx SubGlottic	Larynx SubGlottic	13	Larynx
Larynx SupraGlottic	Larynx SupraGlottic	13	Larynx
Lip	Lip	7	Lip and Oral Cavity
Liver	Liver	22	Liver
Lung	Lung	36	Lung
Lymphoma	Lymphoma	79, 80	Hodgkin and Non-Hodgkin Lymphoma <i>(Adult and Pediatric chapters)</i>
Lymphoma	Lymphoma-CLL/SLL	79, 80	Hodgkin and Non-Hodgkin Lymphoma <i>(Adult and Pediatric chapters)</i>
Lymphoma Ocular Adnexa	Lymphoma Ocular Adnexa	71	Ocular Adnexal Lymphoma
Major Salivary Glands	Major Salivary Glands	8	Major Salivary Glands
Melanoma Conjunctiva	Melanoma Conjunctiva	66	Conjunctival Melanoma
Melanoma Head and Neck	Melanoma Head and Neck	14	Mucosal Melanoma of the Head and Neck
Melanoma Skin	Melanoma Skin	47	Melanoma of the Skin
Melanoma Uvea	Melanoma Choroid and Ciliary Body	67	Uveal Melanoma
Melanoma Uvea	Melanoma Iris	67	Uveal Melanoma
Merkel Cell Skin	Merkel Cell Skin	46	Merkel Cell Skin
Middle Ear	Middle Ear	N/A	N/A
Mouth Other	Mouth Other	7	Lip and Oral Cavity
Mycosis Fungoides	Mycosis Fungoides and Sézary Syndrome	81	Primary Cutaneous Lymphomas
Myeloma Plasma Cell Disorder	Plasma Cell Myeloma	82	Plasma Cell Myeloma and Plasma Cell Disorders
Myeloma Plasma Cell Disorder	Plasmacytomas	82	Plasma Cell Myeloma and Plasma Cell Disorders
Nasal Cavity and Paranasal Sinuses	Maxillary Sinus	12	Nasal Cavity and Paranasal Sinus
Nasal Cavity and Paranasal Sinuses	Nasal Cavity and Ethmoid Sinus	12	Nasal Cavity and Paranasal Sinus
Nasopharynx	Nasopharynx	9	Nasopharynx
Orbit	Orbital Sarcoma	70	Orbital Sarcoma
Oropharynx	Oropharynx HPV-Mediated (p16+)	10	HPV-Mediated (p16+) Oropharyngeal Cancer
Oropharynx	Oropharynx (p16-)	11	Oropharynx (p16-) and Hypopharynx

SS Chapter	EOD Schema	AJCC Chap. No	AJCC Chapter Name
Ovary and Primary Peritoneal Carcinoma	Ovary	55	Ovary, Fallopian Tube, and Primary Peritoneal Carcinoma
Ovary and Primary Peritoneal Carcinoma	Primary Peritoneal Carcinoma	55	Ovary, Fallopian Tube, and Primary Peritoneal Carcinoma
Palate Hard	Palate Hard	7	Lip and Oral Cavity
Pancreas (including NET)	Pancreas	28	Exocrine Pancreas
Pancreas (including NET)	NET Pancreas	34	Neuroendocrine Tumors of the Pancreas
Parathyroid	Parathyroid	75	Parathyroid
Penis	Penis	57	Penis
Pharynx Other	Pharynx Other	N/A	N/A
Placenta	Placenta	56	Gestational Trophoblastic Neoplasms
Pleural Mesothelioma	Pleural Mesothelioma	37	Malignant Pleural Mesothelioma
Primary Cutaneous Lymphomas: Non-MF/SS	Primary Cutaneous Lymphomas: Non-MF/SS	81	Primary Cutaneous Lymphomas
Prostate	Prostate	58	Prostate
Respiratory Other	Respiratory Other	N/A	N/A
Retinoblastoma	Retinoblastoma	68	Retinoblastoma
Retroperitoneum	Retroperitoneum	44	Soft Tissue Sarcoma of the Retroperitoneum
Sinus Other	Sinus Other	N/A	N/A
Skin (except Eyelid)	Cutaneous Carcinoma of Head and Neck	15	Cutaneous Carcinoma of the Head and Neck
Skin (except Eyelid)	Skin Other	N/A	N/A
Skin Eyelid	Skin Eyelid	64	Eyelid Carcinoma
Small Intestine (including NET)	Small Intestine	18	Small Intestine
Small Intestine (including NET)	NET Duodenum	30	Neuroendocrine Tumors of the Duodenum and Ampulla of Vater
Small Intestine (including NET)	NET Jejunum and Ileum	31	Neuroendocrine Tumors of the Jejunum and Ileum
Soft Tissue	Soft Tissue Head and Neck	40	Soft Tissue Sarcoma of the Head and Neck
Soft Tissue	Soft Tissue Trunk and Extremities	41	Soft Tissue Sarcoma of the Trunk and Extremities
Soft Tissue	Soft Tissue Abdomen and Thoracic (excluding Heart, Mediastinum, Pleura)	42	Soft Tissue Sarcoma of the Abdomen and Thoracic Visceral Organs

SS Chapter	EOD Schema	AJCC Chap. No	AJCC Chapter Name
Soft Tissue	Soft Tissue Other	45	Soft Tissue Sarcoma of Unusual Sites and Histologies
Stomach (including NET)	Stomach	17	Stomach
Stomach (including NET)	NET Stomach	29	Neuroendocrine Tumors of the Stomach
Testis	Testis	59	Testis
Thymus	Thymus	35	Thymus
Thyroid (including Medullary)	Thyroid	73	Thyroid-Differentiated and Anaplastic Carcinoma
Thyroid (including Medullary)	Thyroid Medullary	74	Thyroid-Medullary
Tongue Anterior	Tongue Anterior	7	Lip and Oral Cavity
Trachea	Trachea	N/A	N/A
Urethra (including prostatic)	Urethra	63	Urethra
Urethra (including prostatic)	Urethra-Prostatic	63	Urethra
Urinary Other	Urinary Other	N/A	N/A
Vagina	Vagina	51	Vagina
Vulva	Vulva	50	Vulva

HEAD AND NECK

DEFINITION OF ANATOMIC SITES WITHIN THE HEAD AND NECK

Note: Not all sites in the lip, oral cavity, pharynx and salivary glands are listed below.

All sites to which a Summary Stage chapter applies are listed at the beginning of the chapter.

LIP, ORAL CAVITY and PHARYNX

The oral cavity extends from the skin-vermilion junction of the lips to the junction of the hard and soft palate above and to the line of circumvallate papillae below.

LIP AND ORAL CAVITY

Site	ICD-O	Description
LIPS	C00_	Vermilion surface, mucosal lip, labial (mucosa) upper and lower, form the upper and lower anterior wall of the oral cavity. They consist of an exposed surface of modified epidermis beginning at the junction of the vermilion border with the skin and including only the vermilion surface or that portion of the lip that meets the opposing lip. The lips extend from commissure to commissure.
COMMISSURE OF LIP	C006	(corner of mouth) is the point of union of upper and lower lips and is part of the lip
ANTERIOR 2/3 OF TONGUE	C02_	(mobile or oral 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: tip, lateral borders, dorsum, and undersurface or ventral surface (non-villous surface).
UPPER GUM	C030	(upper alveolar ridge) is the covering mucosa of the alveolar process of the maxilla, extending from the line of attachment of mucosa in the upper gingival buccal gutter to the junction of the hard palate. Its posterior margin is the upper end of the pterygopalatine arch.
LOWER GUM	C031	(lower alveolar ridge) 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 (see retromolar area).
FLOOR OF MOUTH	C04_	Consists of a semilunar shaped space over the mylohyoid and hypoglossus muscles, extending from the inner surface of the lower alveolar ridge to the undersurface 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.
HARD PALATE	C050	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.

Site	ICD-O	Description
OTHER MOUTH	C058, C059, C068, C069	Includes overlapping lesions of the palate, overlapping lesions of other and unspecified parts of mouth, and non-specific terms roof of mouth (palate, NOS); mouth, NOS (oral cavity, oral mucosa, buccal cavity); and minor salivary gland, NOS.
BUCCAL MUCOSA	C060	Includes all the mucous membrane lining the inner surface of the cheek. In ICD-O and the Summary Stage system, buccal mucosa includes the inner surface of the cheeks but not the inner mucosal surface of the lips. In the AJCC staging system, the inner mucosa of the lips is included with the buccal mucosa in the oral cavity chapter.
VESTIBULE OF MOUTH	C061	Buccal sulcus, alveolar sulcus, labial sulcus is the space between the teeth and the lips or cheeks and the mucosa that covers it.
RETROMOLAR AREA	C062	Retromolar triangle, retromolar gingiva, retromolar area is the attached mucosa overlying the ascending ramus of the mandible from the level of the posterior surface of the last molar tooth to the apex superiorly. The retromolar trigone is coded using the same Summary Stage chapter as the gingiva or gums.

PAROTID GLAND AND OTHER MAJOR SALIVARY GLANDS

Site	ICD-O	Description
MAJOR SALIVARY GLANDS	C079, C080, C081	The parotid glands (C079) and the other major salivary glands, submandibular (submaxillary) (C080) and sublingual/submental (C081) are paired glands lying along the mandible and beneath the floor of the mouth which produce serous or mucous secretions to moisten the mouth and begin the process of digestion.

OROPHARYNX

The oral pharynx (oropharynx) is that portion of the continuity of the pharynx extending from the plane of the inferior surface of the soft palate to the plane of the superior surface of the hyoid bone (or floor of the vallecula) and includes the base of tongue, inferior surface of the soft palate and the uvula, the anterior and posterior tonsillar pillars, the glossotonsillar sulci, the pharyngeal tonsils, and the lateral and posterior walls.

Site	ICD-O	Description
BASE OF TONGUE	C019	Base of tongue, tongue (root 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).
LINGUAL TONSIL	C024	The lymphoid tissue that is contained in the base of the tongue. In the Summary Stage system, lingual tonsil is coded using the same chapter as base of tongue.
TONSILS	C099, C111, C142	Tonsils are the mucosa-covered lymphoid tissues lying between the palatoglossal and palatopharyngeal arches on the sidewalls of the oropharynx (palatine tonsils, C099), on the posterior wall of the nasopharynx (pharyngeal tonsils or adenoids, C111) and embedded in the base of the tongue (lingual tonsil, C024; described above). These three areas appear to form a ring of lymphoid tissue around the pharynx, which is referred to as Waldeyer ring (C142)
UVULA	C052	A soft tissue projection on the free border of the soft palate in the midline of the body. In Summary Stage, the uvula is coded using the same chapter as the soft palate.

Site	ICD-O	Description
SOFT PALATE	C051	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.
OROPHARYNX LATERAL WALL	C090, C091, C099, C102	Includes the tonsillar fossae (C090), tonsillar pillars (C091) and tonsils (C099) of the oropharynx.
OROPHARYNX ANTERIOR WALL	C100, C101	Consists of the pharyngoepiglottic and glossoepiglottic folds which bound the vallecula (C100), and the lingual (anterior) surface of the epiglottis (C101). The vallecula is the hollow or sulcus formed at the junction of the base of the tongue and the epiglottis.
OROPHARYNX POSTERIOR WALL	C103	Extends from the free borders of the soft palate to the tip of the epiglottis in the oropharynx.

NASOPHARYNX

The nasopharynx begins anteriorly at the posterior choana and extends along the plane of the airway to the level of the free border of the soft palate. It includes the vault, floor (superior surface of soft palate), posterior wall, lateral walls including the fossae of Rosenmuller and the mucosa covering the torus tubarius forming the eustachian tube orifice. According to the AJCC, the posterior margins of the choanal orifices and of the nasal septum are included in the nasal fossa (which has no AJCC chapter), and are excluded from the nasopharynx staging system. However, all subsites listed above (except nasal fossa) are included in the nasopharynx Summary Stage chapter. Specific anatomic descriptions of major nasopharyngeal subsites include:

Site	ICD-O	Description
SUPERIOR, POSTERIOR	C110, C111	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	C112	Extends from the base of the skull on each side to the level of the free border of the soft palate. It includes Rosenmuller fossae (pharyngeal recesses).

HYPOPHARYNX

The hypopharynx is that portion of the pharynx extending from the plane of the superior border of the hyoid bone (or floor of the vallecula) to the plane corresponding to the lower border of the cricoid cartilage and includes the pyriform fossae, the lateral and posterior hypopharyngeal walls and the postcricoid region.

Site	ICD-O	Description
PYRIFORM SINUS	C129	Extends from the pharyngoepiglottic fold to the upper edge of the esophagus at the lower border of the cricoid cartilage and is bounded laterally by the inner surface of the thyroid cartilage and medially by the hypopharyngeal surface of the aryepiglottic fold, posterior lateral surface of the arytenoid and cricoid cartilages.

Site	ICD-O	Description
POSTCRICOID AREA	C130	Postcricoid region or cricopharynx extends from the posterior surface of the arytenoid cartilages and their connecting folds to the inferior surface of the cricoid cartilage and connects the two pyriform sinuses. The lateral margin is the anterior portion of the pyriform sinus.
POSTERIOR PHARYNGEAL WALL	C132	Extends from the superior level of the hyoid bone (or floor of the vallecula) to the inferior margin of the cricoid cartilage, and from the apex of one pyriform sinus to the other.

LARYNX

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

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

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

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

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

Site	ICD-O	Description
Glottic	C320	Glottis Anterior and posterior commissures True vocal cords
Supraglottic	C321	Arytenoids Epiglottis (both lingual and laryngeal aspects) Aryepiglottic folds Infrahyoid epiglottis Supraglottis Left Right Suprahyoid epiglottis Ventricular bands (false cord)
Subglottic	C322	Right and left walls of the subglottis Subglottis (rima glottidis) Exclusive of the undersurface of the cords

REGIONAL LYMPH NODES FOR HEAD AND NECK PRIMARIES

With the release of AJCC 7th edition in 2010, Level I-Level VII and “other” regional nodes in the head and neck region were made regional for all head and neck subsites. This change was not incorporated into Summary Stage 2000. For Summary Stage 2018, the head and neck nodes listed below, which are regional for AJCC 8th edition, will be made regional. This change is effective for cases diagnosed for 1/1/2018 and forward only.

The lymph nodes below are regional for all Head and Neck sites (C00-C14, C30-C33) and include: Single, Multiple, Bilateral and Contralateral lymph nodes.

Level I

Level IA - Submental

Level IB - Submandibular (submaxillary),
sublingual

Level II - Upper jugular

Jugulodigastric (subdigastric)

Upper deep cervical

Level IIA - Anterior

Level IIB - Posterior

Level III - Middle jugular

Middle deep cervical

Level IV - Lower jugular

Jugulo-omohyoid (supraomohyoid)

Lower deep cervical

Virchow node

Level V - Posterior triangle group

Posterior cervical

Level VA - Spinal accessory

Level VB - Transverse cervical,
supraclavicular

Level VI - Anterior compartment group

Laterotracheal

Paralaryngeal

Paratracheal - above suprasternal notch

Perithyroidal

Precricoid (Delphian)

Prelaryngeal

Pretracheal - above suprasternal notch

Recurrent laryngeal

Level VII - Superior mediastinal group (other mediastinal nodes are distant nodes)

Esophageal groove

Paratracheal - below suprasternal notch

Pretracheal - below suprasternal notch

Other groups

Cervical, NOS

Deep cervical, NOS

Facial

Buccinator (buccal)

Mandibular

Nasolabial

Internal jugular, NOS

Parapharyngeal

Parotid

Infraauricular

Intraparotid

Periparotid

Preauricular

Retroauricular (mastoid)

Retropharyngeal

Suboccipital

DISTINGUISHING “IN SITU” AND “LOCALIZED” TUMORS FOR LIP, ORAL CAVITY, AND PHARYNX

LIP AND ORAL CAVITY

PRIMARY SITE	ICD-O	MUCOSA -Epithelium -Basement Membrane -Lamina Propria	SUBMUCOSA	MUSCULARIS PROPRIA	SEROSA
LIP	C00_	Yes	Yes	Yes	No
TONGUE ANTERIOR	C01_, C02-	Yes	Yes	Yes	No
GUM	C03_, C062	Yes (muco-periosteum)	No	No	No
FLOOR of MOUTH	C04_	Yes	Yes	Yes	No
BUCCAL MUCOSA	C060, C061	Yes	Yes	Yes	No
HARD PALATE	C050	Yes	No	No	No
OTHER MOUTH	C058, C059, C068, C069	Yes	Yes	Yes	No

1. Historically, carcinomas described as “confined to mucosa” have been assigned 1 (localized). In order to provide greater specificity and to rule out the possibility of classifying noninvasive tumors in this category, abstractors should determine if
 - a. The tumor is confined to the epithelium, in which case it is in situ **OR**
 - b. The tumor has penetrated the basement membrane to invade the lamina propria, in which case Summary Stage is assigned 1 (localized).
2. The layers the oral cavity consist of
 - a. The **EPITHELIAL LAYER** which borders on the lumen and contains no blood vessels or lymphatics
 - b. The **BASEMENT MEMBRANE**, a sheet of extracellular material, functions as a filtration barrier and a boundary involved in generating and maintaining tissue structure
 - c. The **LAMINA PROPRIA**, composed of areolar connective tissue, contains blood vessels, nerves, and, in some regions, glands. Once tumor has broken through the basement membrane into the lamina propria, it can spread by way of the lymphatics and blood vessels to other parts of the body
3. The lip, oral cavity and pharynx lack a **MUSCULARIS MUCOSAE**. Therefore, the lamina propria and the submucosa tend to merge, and the two terms are used interchangeably.
4. The **SUBMUCOSA** is a thick layer of either dense or areolar connective tissue. It contains blood vessels, lymphatic vessels, nerves, and, in some regions, glands. Only the GUM and HARD PALATE lack a submucosa, but rather a mucoperiosteum.

5. The **MUSCULARIS PROPRIA** is muscle tissue which constitutes the wall of the organ. The GUM and HARD PALATE lack a muscularis.
6. There is no **SEROSA** on any of the head and neck sites.

CERVICAL LYMPH NODES AND UNKNOWN PRIMARY TUMORS OF HEAD AND NECK

8000-8700, 8720-8790, 8941, 9700-9701

Schema Discriminator 1 Occult Head and Neck Lymph Nodes: 2, 3, 4, 5

C760

C760 Head, face & neck, NOS

Note 1: The following sources were used in the development of this chapter

- SEER Extent of Disease 1988: Codes and Coding Instructions (3rd Edition, 1998) (<https://seer.cancer.gov/archive/manuals/EOD10Dig.3rd.pdf>)
- SEER Summary Staging Manual-2000: Codes and Coding Instructions (<https://seer.cancer.gov/tools/ssm/>)
- Collaborative Stage Data Collection System, version 02.05: <https://cancerstaging.org/cstage/Pages/default.aspx>
- Chapter 6 *Cervical Lymph Nodes and Unknown Primary Tumors of the Head and Neck*, in the AJCC Cancer Staging Manual, Eighth Edition (2017) published by Springer International Publishing. Used with permission of the American College of Surgeons, Chicago, Illinois.

Note 2: *Schema Discriminator 1: Occult Head and Neck Lymph Nodes* is used to discriminate between Cervical Lymph Nodes and Unknown Primary Tumor of the Head and Neck, Ill-Defined Other and Soft Tissue Other when primary site is C760.

Note 3: See the following chapters for the listed histologies

- 8000-8700, 8720-8790, 9700-9701 (Schema Discriminator 1 Occult Head and Neck Lymph Nodes: 0,1): *Ill-defined Other*
- 8941(Schema Discriminator 1 Occult Head and Neck Lymph Nodes: 0,1): *Soft Tissue*
- 8710-8714, 8800-8934, 8940, 8950-9137, 9141-9582: *Soft Tissue*
- 8935-8936: *GIST*
- 9140: *Kaposi Sarcoma*

Note 4: Codes 0, 1, 2, and 4 are not applicable for this chapter.

Note 5: This chapter applies when cervical lymph nodes are involved with cancer and the primary site is not known but is suspected to be in the head and neck, i.e., in one or more of the sites listed below. Cancer registry standard setters have agreed that such cancers should be coded to primary site code C760 to accommodate staging recommended by AJCC.

- Lip: C003-C005, C008-C009
- Base of Tongue: C019
- Other and Unspecified Parts of Tongue: C020-C024, C028, C029
- Gum: C030-C031, C039

- Floor of Mouth: C040-C041, C048-C049
- Palate: C050-C052, C058-C059
- Other and Unspecified Parts of Mouth: C060-C062, C068-C069
- Parotid gland: C079
- Major Salivary Glands: C080-C81, C088-C089
- Tonsil: C090-C91, C098-C099
- Oropharynx: C100-C104, C108-C109
- Nasopharynx: C110-C113, C118-C119
- Pyriform sin: C129
- Hypopharynx: C130-C132. C138-C139
- Other and Ill-defined Sites in Lip, Oral Cavity and Pharynx: C140, C142, C148
- Nasal cavity: C300
- Middle ear: C301
- Accessory Sinuses: C310-C313, C318-C319
- Larynx: C320-C323, C328-C329
- Skin of lip: C440
- Skin of ear & external auricular canal: C442
- Skin of other & unspecified parts of face: C443
- Skin of scalp & neck: C444

Note 6: If the physician indicates that the metastatic cervical lymph node is most likely from a head and neck primary, then code primary site as C760. If the differential diagnosis includes non-head and neck sites, for example, the path report states metastasis to the cervical lymph node could be from a head and neck primary, lung primary, or gynecologic primary OR if there is no information indicating origin of primary tumor, then code primary site as C809 (Ill Defined Other)

SUMMARY STAGE

3 Regional lymph node(s) involved only

- Level I
 - Level IA - Submental
 - Level IB - Submandibular (submaxillary), sublingual
- Level II - Upper jugular
 - Jugulodigastric (subdigastric)
 - Upper deep cervical
 - Level IIA - Anterior
 - Level IIB - Posterior
- Level III - Middle jugular
 - Middle deep cervical
- Level IV - Lower jugular
 - Jugulo-omohyoid (supraomohyoid)
 - Lower deep cervical
 - Virchow node
- Level V - Posterior triangle group

- Posterior cervical
- Level VA - Spinal accessory
- Level VB - Transverse cervical, supraclavicular
- Level VI - Anterior compartment group
 - Laterotracheal
 - Paralaryngeal
 - Paratracheal - above suprasternal notch
 - Perithyroidal
 - Precricoid (Delphian)
 - Prelaryngeal
 - Pretracheal - above suprasternal notch
 - Recurrent laryngeal
- Level VII - Superior mediastinal group (for other mediastinal node(s) see code 7)
 - Esophageal groove
 - Paratracheal - below suprasternal notch
 - Pretracheal - below suprasternal notch
- Other groups
 - Cervical, NOS
 - Deep cervical, NOS
 - Facial
 - Buccinator (buccal)
 - Mandibular
 - Nasolabial
 - Internal jugular, NOS
 - Parapharyngeal
 - Parotid
 - Infraauricular
 - Intraparotid
 - Periparotid
 - Preauricular
 - Retroauricular (mastoid)
 - Retropharyngeal
 - Suboccipital
- Regional lymph node(s), NOS
 - Lymph node(s), NOS

7 Distant site(s)/lymph node(s) involved

- Distant site(s) (including further contiguous extension)
 - Bone, NOS
 - Cartilage, NOS
 - Cortical bone (mandible, maxilla, NOS)
 - Deep (extrinsic) muscle of tongue
 - Genioglossus
 - Hyoglossus

- Palatoglossus
 - Styloglossus
- Hard palate including cortical palatine bone
- Internal carotid artery (encased)
- Mandible, NOS
- Masticator space
- Maxilla, NOS
- Maxillary sinus (antrum)
- Nasal cavity
- Pterygoid plates
- Skin of cheek (WITH or WITHOUT ulceration)
- Skull base
- Soft palate
- Specified bone (other than maxilla, mandible, palatine)
- Tongue
- Trabecular bone (mandible, maxilla, palatine, NOS)
- Distant lymph node(s), NOS
 - Mediastinal (excluding superior mediastinal node(s))
- Distant metastasis, NOS
 - Carcinomatosis
 - Distant metastasis WITH or WITHOUT distant lymph node(s)

9 Unknown if extension or metastasis

LIP

8000-8040, 8042-8180, 8191-8246, 8248-8700, 8982, 9700-9701

C003-C005, C008-C009

C003 Mucosa of upper lip

C004 Mucosa of lower lip

C005 Mucosa of lip, NOS

C008 Overlapping lesion of lip

C009 Lip, NOS (excludes skin of lip C440)

Note 1: The following sources were used in the development of this chapter

- SEER Extent of Disease 1988: Codes and Coding Instructions (3rd Edition, 1998) (<https://seer.cancer.gov/archive/manuals/EOD10Dig.3rd.pdf>)
- SEER Summary Staging Manual-2000: Codes and Coding Instructions (<https://seer.cancer.gov/tools/ssm/>)
- Collaborative Stage Data Collection System, version 02.05: <https://cancerstaging.org/cstage/Pages/default.aspx>
- Chapter 7 *Lip and Oral Cavity*, in the AJCC Cancer Staging Manual, Eighth Edition (2017) published by Springer International Publishing. Used with permission of the American College of Surgeons, Chicago, Illinois.

Note 2: See the following chapters for the listed histologies

- 8041, 8190, 8247: *Merkel Cell Skin*
- 8710-8714, 8800-8934, 8940-8981, 8983-9137, 9141-9582: *Soft Tissue*
- 8720-8790: *Melanoma Head and Neck*
- 8935-8936: *GIST*
- 9140: *Kaposi Sarcoma*

Note 3: Periosteum is a fibrous membrane that wraps the outer surface of bones. Cortical bone is the dense compact outer layer of the bone. Trabecular, cancellous, or spongy bone (spongiosa) is a porous network of tissue filling the interior of bone, decreasing weight and allowing room for blood vessels and marrow.

Note 4: Involvement through cortical bone is required for assignment of code 2.

SUMMARY STAGE

0 In situ: noninvasive, intraepithelial

1 Localized only (localized, NOS)

- Confined to lip, NOS
- Labial mucosa (inner lip)

- Lamina propria
 - Multiple foci
 - Submucosa (superficial invasion)
- Musculature
- Skin of lip
- Subcutaneous soft tissue of lip

2 Regional by direct extension only

- Bone, NOS
 - Cartilage (mandible, maxilla, NOS)
 - Cortical (mandible, maxilla, NOS)
 - Mandible, NOS
 - Maxilla, NOS
 - Trabecular (mandible, maxilla, NOS)
- Buccal mucosa (inner cheek)
- Commissure
- Gingiva, NOS
 - Lower gingiva
 - Upper gingiva
- Opposite lip (both lips)

3 Regional lymph node(s) involved only

- Level I
 - Level IA - Submental
 - Level IB - Submandibular (submaxillary), sublingual
- Level II - Upper jugular
 - Jugulodigastric (subdigastric)
 - Upper deep cervical
 - Level IIA - Anterior
 - Level IIB - Posterior
- Level III - Middle jugular
 - Middle deep cervical
- Level IV - Lower jugular
 - Jugulo-omohyoid (supraomohyoid)
 - Lower deep cervical
 - Virchow node
- Level V - Posterior triangle group
 - Posterior cervical
 - Level VA - Spinal accessory
 - Level VB - Transverse cervical, supraclavicular
- Level VI - Anterior compartment group
 - Laterotracheal

- Paralaryngeal
- Paratracheal - above suprasternal notch
- Perithyroidal
- Precricoid (Delphian)
- Prelaryngeal
- Pretracheal - above suprasternal notch
- Recurrent laryngeal
- Level VII - Superior mediastinal group (for other mediastinal node(s) see code 7)
 - Esophageal groove
 - Paratracheal - below suprasternal notch
 - Pretracheal - below suprasternal notch
- Other groups
 - Cervical, NOS
 - Deep cervical, NOS
 - Facial
 - Buccinator (buccal)
 - Mandibular
 - Nasolabial
 - Internal jugular, NOS
 - Parapharyngeal
 - Parotid
 - Infraauricular
 - Intraparotid
 - Periparotid
 - Preauricular
 - Retroauricular (mastoid)
 - Retropharyngeal
 - Suboccipital
- Regional lymph node(s), NOS
 - Lymph node(s), NOS

4 Regional by BOTH direct extension AND regional lymph node(s) involved

- Codes (2) + (3)

7 Distant site(s)/lymph node(s) involved

- Distant site(s) (including further contiguous extension)
 - Floor of mouth
 - Inferior alveolar nerve
 - Internal carotid artery (encased)
 - Masticator space
 - Nose
 - Pterygoid plates

- Skin of face/neck
 - Skull base
 - Specified bone (other than mandible and maxilla)
- Distant lymph node(s), NOS
 - Mediastinal (excluding superior mediastinal node(s))
- Distant metastasis, NOS
 - Carcinomatosis
 - Distant metastasis WITH or WITHOUT distant lymph node(s)

9 Unknown if extension or metastasis

TONGUE ANTERIOR

8000-8700, 8982, 9700-9701

C020-C023, C028-C029

C020 Dorsal surface of tongue, NOS

C021 Border of tongue (Tip)

C022 Ventral surface of tongue, NOS

C023 Anterior 2/3 of tongue, NOS

C028 Overlapping lesion of tongue

C029 Tongue, NOS

Note 1: The following sources were used in the development of this chapter

- SEER Extent of Disease 1988: Codes and Coding Instructions (3rd Edition, 1998) (<https://seer.cancer.gov/archive/manuals/EOD10Dig.3rd.pdf>)
- SEER Summary Staging Manual-2000: Codes and Coding Instructions (<https://seer.cancer.gov/tools/ssm/>)
- Collaborative Stage Data Collection System, version 02.05: <https://cancerstaging.org/cstage/Pages/default.aspx>
- Chapter 7 *Lip and Oral Cavity*, in the AJCC Cancer Staging Manual, Eighth Edition (2017) published by Springer International Publishing. Used with permission of the American College of Surgeons, Chicago, Illinois.

Note 2: See the following chapters for the listed histologies

- 8710-8714, 8800-8934, 8940-8981, 8983-9137, 9141-9582: *Soft Tissue*
- 8720-8790: *Melanoma Head and Neck*
- 8935-8936: *GIST*
- 9140: *Kaposi Sarcoma*

Note 3: Periosteum is a fibrous membrane that wraps the outer surface of bones. Cortical bone is the dense compact outer layer of the bone. Trabecular, cancellous, or spongy bone (spongiosa) is a porous network of tissue filling the interior of bone, decreasing weight and allowing room for blood vessels and marrow.

SUMMARY STAGE

0 In situ: noninvasive, intraepithelial

1 Localized only (localized, NOS)

- Confined to anterior tongue, NOS
- Crosses midline/midline tumor
- Invasive tumor on one side confined to
 - Lamina propria

- Musculature of tongue, intrinsic or NOS
- Submucosa

2 Regional by direct extension only

- Base of tongue
- Bone, NOS
 - Bone (mandible, maxilla, palatine)
 - Cartilage (mandible, maxilla, NOS)
 - Cortical bone, invasion of (mandible, maxilla, NOS)
- Floor of mouth
- Gingiva, lower
- Lateral pharyngeal wall
- Retromolar trigone
- Soft palate, inferior surface
- Sublingual gland
- Tonsillar pillars and fossae
- Tonsils

3 Regional lymph node(s) involved only

- Level I
 - Level IA - Submental
 - Level IB - Submandibular (submaxillary), sublingual
- Level II - Upper jugular
 - Jugulodigastric (subdigastric)
 - Upper deep cervical
 - Level IIA - Anterior
 - Level IIB - Posterior
- Level III - Middle jugular
 - Middle deep cervical
- Level IV - Lower jugular
 - Jugulo-omohyoid (supraomohyoid)
 - Lower deep cervical
 - Virchow node
- Level V - Posterior triangle group
 - Posterior cervical
 - Level VA - Spinal accessory
 - Level VB - Transverse cervical, supraclavicular
- Level VI - Anterior compartment group
 - Laterotracheal
 - Paralaryngeal
 - Paratracheal - above suprasternal notch
 - Perithyroidal

- Precricoid (Delphian)
- Prelaryngeal
- Pretracheal - above suprasternal notch
- Recurrent laryngeal
- Level VII - Superior mediastinal group (for other mediastinal node(s) see code 7)
 - Esophageal groove
 - Paratracheal - below suprasternal notch
 - Pretracheal - below suprasternal notch
- Other groups
 - Cervical, NOS
 - Deep cervical, NOS
 - Facial
 - Buccinator (buccal)
 - Mandibular
 - Nasolabial
 - Internal jugular, NOS
 - Parapharyngeal
 - Parotid
 - Infraauricular
 - Intraparotid
 - Periparotid
 - Preauricular
 - Retroauricular (mastoid)
 - Retropharyngeal
 - Suboccipital
- Regional lymph node(s), NOS
 - Lymph node(s), NOS

4 Regional by BOTH direct extension AND regional lymph node(s) involved

- Codes (2) + (3)

7 Distant site(s)/lymph node(s) involved

- Distant site(s) (including further contiguous extension)
 - Deep (extrinsic) muscles of tongue
 - Genioglossus
 - Geniohyoid
 - Hyoglossus
 - Mylohyoid
 - Palatoglossus
 - Styloglossus
 - Internal carotid artery (encased)
 - Masticator space

- Maxillary sinus (antrum)
- Pterygoid plates
- Skin of face
- Skull base
- Specified bone (other than mandible, maxilla)
- Trabecular bone (mandible, maxilla, NOS)
- Distant lymph node(s), NOS
 - Mediastinal (excluding superior mediastinal node(s), Level VII)
- Distant metastasis, NOS
 - Carcinomatosis
 - Distant metastasis WITH or WITHOUT distant lymph node(s)

9 Unknown if extension or metastasis

GUM

8000-8700, 8982, 9700-9701

C030-C031, C039, C062

C030 Upper gum

C031 Lower gum

C039 Gum, NOS

C062 Retromolar area (gingiva, trigone)

Note 1: The following sources were used in the development of this chapter

- SEER Extent of Disease 1988: Codes and Coding Instructions (3rd Edition, 1998) (<https://seer.cancer.gov/archive/manuals/EOD10Dig.3rd.pdf>)
- SEER Summary Staging Manual-2000: Codes and Coding Instructions (<https://seer.cancer.gov/tools/ssm/>)
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Note 2: See the following chapters for the listed histologies

- 8710-8714, 8800-8934, 8940-8981, 8983-9137, 9141-9582: *Soft Tissue*
- 8720-8790: *Melanoma Head and Neck*
- 8935-8936: *GIST*
- 9140: *Kaposi Sarcoma*

Note 3: Periosteum is a fibrous membrane that wraps the outer surface of bones. Cortical bone is the dense compact outer layer of the bone. Trabecular, cancellous, or spongy bone (spongiosa) is a porous network of tissue filling the interior of bone, decreasing weight and allowing room for blood vessels and marrow.

SUMMARY STAGE

0 In situ: noninvasive, intraepithelial

1 Localized only (localized, NOS)

- Confined to gum, NOS
- Invasive tumor confined to lamina propria (mucoperiosteum) (stroma)

2 Regional by direct extension only

- Bone, NOS
- Bone (mandible, maxilla, palatine)
- Buccal mucosa (inner cheek)
- Cartilage (mandible, maxilla, NOS)
- Cortical bone (mandible, maxilla, NOS)
- Deep (extrinsic) muscle of tongue
 - Genioglossus
 - Hyoglossus
 - Palatoglossus
 - Styloglossus
- Facial muscle, NOS
- Floor of mouth
- Hard palate (includes cortical palatine bone)
- Labial mucosa (inner lip)
- Lateral pharyngeal wall
- Lip, NOS
- Soft palate including uvula
- Subcutaneous soft tissue of face
- Tongue mucosa/intrinsic muscle
- Tonsillar pillars and fossae
- Tonsils
- Trabecular bone (mandible, maxilla, palatine, NOS)

3 Regional lymph node(s) involved only

- Level I
 - Level IA - Submental
 - Level IB - Submandibular (submaxillary), sublingual
- Level II - Upper jugular
 - Jugulodigastric (subdigastric)
 - Upper deep cervical
 - Level IIA - Anterior
 - Level IIB - Posterior
- Level III - Middle jugular
 - Middle deep cervical
- Level IV - Lower jugular
 - Jugulo-omohyoid (supraomohyoid)
 - Lower deep cervical
 - Virchow node
- Level V - Posterior triangle group
 - Posterior cervical
 - Level VA - Spinal accessory
 - Level VB - Transverse cervical, supraclavicular

- Level VI - Anterior compartment group
 - Laterotracheal
 - Paralaryngeal
 - Paratracheal - above suprasternal notch
 - Perithyroidal
 - Precricoid (Delphian)
 - Prelaryngeal
 - Pretracheal - above suprasternal notch
 - Recurrent laryngeal
- Level VII - Superior mediastinal group (for other mediastinal node(s) see code 7)
 - Esophageal groove
 - Paratracheal - below suprasternal notch
 - Pretracheal - below suprasternal notch
- Other groups
 - Cervical, NOS
 - Deep cervical, NOS
 - Facial
 - Buccinator (buccal)
 - Mandibular
 - Nasolabial
 - Internal jugular, NOS
 - Parapharyngeal
 - Parotid
 - Infraauricular
 - Intraparotid
 - Periparotid
 - Preauricular
 - Retroauricular (mastoid)
 - Retropharyngeal
 - Suboccipital
- Regional lymph node(s), NOS
 - Lymph node(s), NOS

4 Regional by BOTH direct extension AND regional lymph node(s) involved

- Codes (2) + (3)

7 Distant site(s)/lymph node(s) involved

- Distant site(s) (including further contiguous extension)
 - Internal carotid artery (encased)
 - Masticator space
 - Maxillary sinus/antrum
 - Nasal cavity

- Nose
- Pterygoid plates
- Skin of face
- Skull base
- Specified bone (other than mandible, maxilla, palatine)
- Distant lymph node(s), NOS
 - Mediastinal (excluding superior mediastinal node(s), Level VII)
- Distant metastasis, NOS
 - Carcinomatosis
 - Distant metastasis WITH or WITHOUT distant lymph node(s)

9 Unknown if extension or metastasis

FLOOR OF MOUTH

8000-8700, 8982, 9700-9701

C040-C041, C048-C049

C040 Anterior floor of mouth

C041 Lateral floor of mouth

C048 Overlapping lesion of floor of mouth

C049 Floor of mouth, NOS

Note 1: The following sources were used in the development of this chapter

- SEER Extent of Disease 1988: Codes and Coding Instructions (3rd Edition, 1998) (<https://seer.cancer.gov/archive/manuals/EOD10Dig.3rd.pdf>)
- SEER Summary Staging Manual-2000: Codes and Coding Instructions (<https://seer.cancer.gov/tools/ssm/>)
- Collaborative Stage Data Collection System, version 02.05: <https://cancerstaging.org/cstage/Pages/default.aspx>
- Chapter 7 *Lip and Oral Cavity*, in the AJCC Cancer Staging Manual, Eighth Edition (2017) published by Springer International Publishing. Used with permission of the American College of Surgeons, Chicago, Illinois.

Note 2: See the following chapters for the listed histologies

- 8710-8714, 8800-8934, 8940-8981, 8983-9137, 9141-9582: *Soft Tissue*
- 8720-8790: *Melanoma Head and Neck*
- 8935-8936: *GIST*
- 9140: *Kaposi Sarcoma*

Note 3: Periosteum is a fibrous membrane that wraps the outer surface of bones. Cortical bone is the dense compact outer layer of the bone. Trabecular, cancellous, or spongy bone (spongiosa) is a porous network of tissue filling the interior of bone, decreasing weight and allowing room for blood vessels and marrow.

SUMMARY STAGE

0 In situ: noninvasive, intraepithelial

1 Localized only (localized, NOS)

- Confined to floor of mouth, NOS
- Invasive tumor on one side confined to
 - Lamina propria
 - Submucosa
 - Tumor crosses midline
- Deep (extrinsic) muscle of tongue

- Genioglossus
- Geniohyoid
- Hyoglossus
- Mylohyoid
- Palatoglossus
- Styloglossus

2 Regional by direct extension only

- Anterior 2/3 of tongue
- Base of tongue
- Bone, NOS
 - Cartilage, NOS
 - Cortical bone (mandible, NOS)
 - Mandible, NOS
 - Periosteum of mandible
 - Trabecular bone (mandible, NOS)
- Epiglottis
- Gingiva (alveolar ridge), lower
- Glossoepiglottic fold
- Glossopharyngeal sulcus
- Lateral pharyngeal wall
- Pharyngeal (lingual) surface
- Pharyngoepiglottic fold
- Skin of undersurface of chin/neck
- Subcutaneous soft tissue of chin/neck
- Sublingual gland, including ducts
- Submandibular (submaxillary) glands, including ducts
- Tonsillar pillars and fossae
- Tonsils
- Vallecula

3 Regional lymph node(s) involved only

- Level I
 - Level IA - Submental
 - Level IB - Submandibular (submaxillary), sublingual
- Level II - Upper jugular
 - Jugulodigastric (subdigastric)
 - Upper deep cervical
 - Level IIA - Anterior
 - Level IIB - Posterior
- Level III - Middle jugular
 - Middle deep cervical

- Level IV - Lower jugular
 - Jugulo-omohyoid (supraomohyoid)
 - Lower deep cervical
 - Virchow node
- Level V - Posterior triangle group
 - Posterior cervical
 - Level VA - Spinal accessory
 - Level VB - Transverse cervical, supraclavicular
- Level VI - Anterior compartment group
 - Laterotracheal
 - Paralaryngeal
 - Paratracheal - above suprasternal notch
 - Perithyroidal
 - Precricoid (Delphian)
 - Prelaryngeal
 - Pretracheal - above suprasternal notch
 - Recurrent laryngeal
- Level VII - Superior mediastinal group (for other mediastinal node(s) see code 7)
 - Esophageal groove
 - Paratracheal - below suprasternal notch
 - Pretracheal - below suprasternal notch
- Other groups
 - Cervical, NOS
 - Deep cervical, NOS
 - Facial
 - Buccinator (buccal)
 - Mandibular
 - Nasolabial
 - Internal jugular, NOS
 - Parapharyngeal
 - Parotid
 - Infraauricular
 - Intraparotid
 - Periparotid
 - Preauricular
 - Retroauricular (mastoid)
 - Retropharyngeal
 - Suboccipital
- Regional lymph node(s), NOS
 - Lymph node(s), NOS

4 Regional by BOTH direct extension AND regional lymph node(s) involved

- Codes (2) + (3)

7 Distant site(s)/lymph node(s) involved

- Distant site(s) (including further contiguous extension)
 - Cortical bone (maxilla)
 - Internal carotid artery (encased)
 - Masticator space
 - Maxilla, NOS
 - Maxillary sinus (antrum)
 - Pterygoid plates
 - Skull base
 - Specified bone (other than mandible, maxilla)
 - Trabecular bone (maxilla)
- Distant lymph node(s), NOS
 - Mediastinal (excluding superior mediastinal node(s), Level VII)
- Distant metastasis, NOS
 - Carcinomatosis
 - Distant metastasis WITH or WITHOUT distant lymph node(s)

9 Unknown if extension or metastasis

PALATE HARD

8000-8700, 8982, 9700-9701

C050

C050 Hard palate

Note 1: The following sources were used in the development of this chapter

- SEER Extent of Disease 1988: Codes and Coding Instructions (3rd Edition, 1998) (<https://seer.cancer.gov/archive/manuals/EOD10Dig.3rd.pdf>)
- SEER Summary Staging Manual-2000: Codes and Coding Instructions (<https://seer.cancer.gov/tools/ssm/>)
- Collaborative Stage Data Collection System, version 02.05: <https://cancerstaging.org/cstage/Pages/default.aspx>
- Chapter 7 *Lip and Oral Cavity*, in the AJCC Cancer Staging Manual, Eighth Edition (2017) published by Springer International Publishing. Used with permission of the American College of Surgeons, Chicago, Illinois.

Note 2: See the following chapters for the listed histologies

- 8710-8714, 8800-8934, 8940-8981, 8983-9137, 9141-9582: *Soft Tissue*
- 8720-8790: *Melanoma Head and Neck*
- 8935-8936: *GIST*
- 9140: *Kaposi Sarcoma*

Note 3: Periosteum is a fibrous membrane that wraps the outer surface of bones. Cortical bone is the dense compact outer layer of the bone. Trabecular, cancellous, or spongy bone (spongiosa) is a porous network of tissue filling the interior of bone, decreasing weight and allowing room for blood vessels and marrow.

SUMMARY STAGE

0 In situ: noninvasive, intraepithelial

1 Localized only (localized, NOS)

- Confined to hard palate, NOS
- Crosses midline
- Invasive tumor on one side confined to mucoperiosteum (stroma)

2 Regional by direct extension only

- Bone, NOS
 - Cortical bone (maxilla, palatine, NOS)

- Maxilla, NOS
- Palatine bone, NOS
- Trabecular bone (maxilla, palatine)
- Buccal mucosa (inner cheek)
- Cortical bone (mandible, maxilla, NOS)
- Gingiva, upper
- Glossopalatine arch
- Pharyngopalatine arch
- Soft palate including uvula

3 Regional lymph node(s) involved only

- Level I
 - Level IA - Submental
 - Level IB - Submandibular (submaxillary), sublingual
- Level II - Upper jugular
 - Jugulodigastric (subdigastric)
 - Upper deep cervical
 - Level IIA - Anterior
 - Level IIB - Posterior
- Level III - Middle jugular
 - Middle deep cervical
- Level IV - Lower jugular
 - Jugulo-omohyoid (supraomohyoid)
 - Lower deep cervical
 - Virchow node
- Level V - Posterior triangle group
 - Posterior cervical
 - Level VA - Spinal accessory
 - Level VB - Transverse cervical, supraclavicular
- Level VI - Anterior compartment group
 - Laterotracheal
 - Paralaryngeal
 - Paratracheal - above suprasternal notch
 - Perithyroidal
 - Precricoid (Delphian)
 - Prelaryngeal
 - Pretracheal - above suprasternal notch
 - Recurrent laryngeal
- Level VII - Superior mediastinal group (for other mediastinal node(s) see code 7)
 - Esophageal groove
 - Paratracheal - below suprasternal notch
 - Pretracheal - below suprasternal notch
- Other groups
 - Cervical, NOS

- Deep cervical, NOS
- Facial
 - Buccinator (buccal)
 - Mandibular
 - Nasolabial
- Internal jugular, NOS
- Parapharyngeal
- Parotid
 - Infraauricular
 - Intraparotid
 - Periparotid
 - Preauricular
- Retroauricular (mastoid)
- Retropharyngeal
- Suboccipital
- Regional lymph node(s), NOS
 - Lymph node(s), NOS

4 Regional by BOTH direct extension AND regional lymph node(s) involved

- Codes (2) + (3)

7 Distant site(s)/lymph node(s) involved

- Distant site(s) (including further contiguous extension)
 - Deep (extrinsic) muscle of tongue
 - Genioglossus
 - Hyoglossus
 - Palatoglossus
 - Styloglossus
 - Floor of nose
 - Internal carotid artery (encased)
 - Mandible
 - Masticator space
 - Maxillary sinus (antrum)
 - Nasal cavity
 - Nasopharynx
 - Pterygoid plates
 - Skin of face
 - Skull base
 - Specified bone (other than mandible, maxilla)
 - Sphenoid bone
- Distant lymph node(s), NOS
 - Mediastinal (excluding superior mediastinal node(s), Level VII)

- Distant metastasis, NOS
 - Carcinomatosis
 - Distant metastasis WITH or WITHOUT distant lymph node(s)

9 Unknown if extension or metastasis

BUCCAL MUCOSA

8000-8700, 8982, 9700-9701

C060-C061

C060 Cheek mucosa

C061 Vestibule of mouth

Note 1: The following sources were used in the development of this chapter

- SEER Extent of Disease 1988: Codes and Coding Instructions (3rd Edition, 1998) (<https://seer.cancer.gov/archive/manuals/EOD10Dig.3rd.pdf>)
- SEER Summary Staging Manual-2000: Codes and Coding Instructions (<https://seer.cancer.gov/tools/ssm/>)
- Collaborative Stage Data Collection System, version 02.05: <https://cancerstaging.org/cstage/Pages/default.aspx>
- Chapter 7 *Lip and Oral Cavity*, in the AJCC Cancer Staging Manual, Eighth Edition (2017) published by Springer International Publishing. Used with permission of the American College of Surgeons, Chicago, Illinois.

Note 2: See the following chapters for the listed histologies

- 8710-8714, 8800-8934, 8940-8981, 8983-9137, 9141-9582: *Soft Tissue*
- 8720-8790: *Melanoma Head and Neck*
- 8935-8936: *GIST*
- 9140: *Kaposi Sarcoma*

Note 3: Periosteum is a fibrous membrane that wraps the outer surface of bones. Cortical bone is the dense compact outer layer of the bone. Trabecular, cancellous, or spongy bone (spongiosa) is a porous network of tissue filling the interior of bone, decreasing weight and allowing room for blood vessels and marrow.

Note 4: Involvement through cortical bone is required for assignment of code 2.

SUMMARY STAGE

0 In situ: noninvasive, intraepithelial

1 Localized only (localized, NOS)

- Confined to buccal mucosa (inner cheek), NOS
- Lamina propria
- Musculature (buccinator)
- Submucosa

2 Regional by direct extension only

- Gingiva
- Lateral pharyngeal wall
- Lip(s) including commissure
- Subcutaneous soft tissue of cheek
- Tonsillar pillars and fossae
- Tonsils

3 Regional lymph node(s) involved only

- Level I
 - Level IA - Submental
 - Level IB - Submandibular (submaxillary), sublingual
- Level II - Upper jugular
 - Jugulodigastric (subdigastric)
 - Upper deep cervical
 - Level IIA - Anterior
 - Level IIB - Posterior
- Level III - Middle jugular
 - Middle deep cervical
- Level IV - Lower jugular
 - Jugulo-omohyoid (supraomohyoid)
 - Lower deep cervical
 - Virchow node
- Level V - Posterior triangle group
 - Posterior cervical
 - Level VA - Spinal accessory
 - Level VB - Transverse cervical, supraclavicular
- Level VI - Anterior compartment group
 - Laterotracheal
 - Paralaryngeal
 - Paratracheal - above suprasternal notch
 - Perithyroidal
 - Precricoid (Delphian)
 - Prelaryngeal
 - Pretracheal - above suprasternal notch
 - Recurrent laryngeal
- Level VII - Superior mediastinal group (for other mediastinal node(s) see code 7)
 - Esophageal groove
 - Paratracheal - below suprasternal notch
 - Pretracheal - below suprasternal notch
- Other groups
 - Cervical, NOS
 - Deep cervical, NOS

- Facial
 - Buccinator (buccal)
 - Mandibular
 - Nasolabial
- Internal jugular, NOS
- Parapharyngeal
- Parotid
 - Infraauricular
 - Intraparotid
 - Periparotid
 - Preauricular
- Retroauricular (mastoid)
- Retropharyngeal
- Suboccipital
- Regional lymph node(s), NOS
 - Lymph node(s), NOS

4 Regional by BOTH direct extension AND regional lymph node(s) involved

- Codes (2) + (3)

7 Distant site(s)/lymph node(s) involved

- Distant site(s) (including further contiguous extension)
 - Bone, NOS
 - Cartilage (mandible, maxilla, NOS)
 - Cortical bone (mandible, maxilla, NOS)
 - Mandible, NOS
 - Maxilla, NOS
 - Palatine, NOS
 - Trabecular bone (mandible, maxilla, palatine, NOS)
 - Deep (extrinsic) muscle of tongue
 - Genioglossus
 - Hyoglossus
 - Palatoglossus
 - Styloglossus
 - Internal carotid artery (encased)
 - Masticator space
 - Maxillary sinus (antrum)
 - Nasal cavity
 - Pterygoid plates
 - Skin of cheek (WITH or WITHOUT ulceration)
 - Skull base
 - Specified bone (other than maxilla, mandible, palatine)

- Tongue
- Distant lymph node(s), NOS
 - Mediastinal (excluding superior mediastinal node(s))
- Distant metastasis, NOS
 - Carcinomatosis
 - Distant metastasis WITH or WITHOUT distant lymph node(s)

9 Unknown if extension or metastasis

MOUTH OTHER

8000-8700, 8982, 9700-9701

C058-C059, C068-C069

C058 Overlapping lesion of palate

C059 Palate, NOS

C068 Overlapping lesion of other and unspecified parts of mouth

C069 Mouth, NOS

Note 1: The following sources were used in the development of this chapter

- SEER Extent of Disease 1988: Codes and Coding Instructions (3rd Edition, 1998) (<https://seer.cancer.gov/archive/manuals/EOD10Dig.3rd.pdf>)
- SEER Summary Staging Manual-2000: Codes and Coding Instructions (<https://seer.cancer.gov/tools/ssm/>)
- Collaborative Stage Data Collection System, version 02.05: <https://cancerstaging.org/cstage/Pages/default.aspx>
- Chapter 7 *Lip and Oral Cavity*, in the AJCC Cancer Staging Manual, Eighth Edition (2017) published by Springer International Publishing. Used with permission of the American College of Surgeons, Chicago, Illinois.

Note 2: See the following chapters for the listed histologies

- 8710-8714, 8800-8934, 8940-8981, 8983-9137, 9141-9582: *Soft Tissue*
- 8720-8790: *Melanoma Head and Neck*
- 8935-8936: *GIST*
- 9140: *Kaposi Sarcoma*

Note 3: Periosteum is a fibrous membrane that wraps the outer surface of bones. Cortical bone is the dense compact outer layer of the bone. Trabecular, cancellous, or spongy bone (spongiosa) is a porous network of tissue filling the interior of bone, decreasing weight and allowing room for blood vessels and marrow.

Note 4: Involvement through cortical bone is required for assignment of code 2.

SUMMARY STAGE

0 In situ: noninvasive, intraepithelial

1 Localized only (localized, NOS)

- Confined to mouth, NOS
- Lamina propria
- Musculature (buccinator)
- Submucosa

2 Regional by direct extension only

- Adjacent oral cavity
- Oropharynx
 - Inferior surface of soft palate
 - Lateral pharyngeal wall
 - Lingual surface of epiglottis
 - Vallecula

3 Regional lymph node(s) involved only

- Level I
 - Level IA - Submental
 - Level IB - Submandibular (submaxillary), sublingual
- Level II - Upper jugular
 - Jugulodigastric (subdigastric)
 - Upper deep cervical
 - Level IIA - Anterior
 - Level IIB - Posterior
- Level III - Middle jugular
 - Middle deep cervical
- Level IV - Lower jugular
 - Jugulo-omohyoid (supraomohyoid)
 - Lower deep cervical
 - Virchow node
- Level V - Posterior triangle group
 - Posterior cervical
 - Level VA - Spinal accessory
 - Level VB - Transverse cervical, supraclavicular
- Level VI - Anterior compartment group
 - Laterotracheal
 - Paralaryngeal
 - Paratracheal - above suprasternal notch
 - Perithyroidal
 - Precricoid (Delphian)
 - Prelaryngeal
 - Pretracheal - above suprasternal notch
 - Recurrent laryngeal
- Level VII - Superior mediastinal group (for other mediastinal node(s) see code 7)
 - Esophageal groove
 - Paratracheal - below suprasternal notch
 - Pretracheal - below suprasternal notch
- Other groups
 - Cervical, NOS
 - Deep cervical, NOS

- Facial
 - Buccinator (buccal)
 - Mandibular
 - Nasolabial
- Internal jugular, NOS
- Parapharyngeal
- Parotid
 - Infraauricular
 - Intraparotid
 - Periparotid
 - Preauricular
- Retroauricular (mastoid)
- Retropharyngeal
- Suboccipital
- Regional lymph node(s), NOS
 - Lymph node(s), NOS

4 Regional by BOTH direct extension AND regional lymph node(s) involved

- Codes (2) + (3)

7 Distant site(s)/lymph node(s) involved

- Distant site(s) (including further contiguous extension)
 - Bone, NOS
 - Cartilage (mandible, maxilla, NOS)
 - Cortical bone (mandible, maxilla, NOS)
 - Trabecular bone (mandible, maxilla, palatine, NOS)
 - Deep (extrinsic) muscle of tongue
 - Genioglossus
 - Hyoglossus
 - Palatoglossus
 - Styloglossus
 - Internal carotid artery (encased)
 - Mandible, NOS
 - Masticator space
 - Maxilla, NOS
 - Maxillary antrum (sinus)
 - Nasal cavity
 - Pterygoid plates
 - Skin of face/neck
 - Skull base
 - Specified bone (other than mandible, maxilla)
 - Tongue

- Distant lymph node(s)
 - Mediastinal (excluding superior mediastinal node(s))
- Distant metastasis, NOS
 - Carcinomatosis
 - Distant metastasis WITH or WITHOUT distant lymph node(s)

9 Unknown if extension or metastasis

MAJOR SALIVARY GLANDS

8000-8700, 8720-8790, 8941, 8974, 8980, 8982, 9700-9701

C079-C081, C088-C089

C079 Parotid gland

C080 Submandibular gland

C081 Sublingual gland

C088 Overlapping lesion of major salivary glands

C089 Major salivary gland, NOS

Note 1: The following sources were used in the development of this chapter

- SEER Extent of Disease 1988: Codes and Coding Instructions (3rd Edition, 1998) (<https://seer.cancer.gov/archive/manuals/EOD10Dig.3rd.pdf>)
- SEER Summary Staging Manual-2000: Codes and Coding Instructions (<https://seer.cancer.gov/tools/ssm/>)
- Collaborative Stage Data Collection System, version 02.05: <https://cancerstaging.org/cstage/Pages/default.aspx>
- Chapter 8 *Major Salivary Glands*, in the AJCC Cancer Staging Manual, Eighth Edition (2017) published by Springer International Publishing. Used with permission of the American College of Surgeons, Chicago, Illinois.

Note 2: See the following chapters for the listed histologies

- 8710-8714, 8800-8934, 8940, 8950-8973, 8975, 8981, 8983-9137, 9141-9582: *Soft Tissue*
- 8935-8936: *GIST*
- 9140: *Kaposi Sarcoma*"

SUMMARY STAGE

0 In situ: noninvasive, intraepithelial

1 Localized only (localized, NOS)

- Confined to gland/duct of origin
- Confined to parotid gland, NOS
- Confined to salivary gland, NOS
- Confined to submandibular gland, NOS
- Multiple foci confined to substance of parotid gland

2 Regional by direct extension only

- Extension to another major salivary gland (parotid, sublingual, submandibular, submaxillary)
- Deep extrinsic muscles (submandibular gland only)
 - Genioglossus
 - Geniohyoid
 - Hyoglossus
 - Mylohyoid
 - Styloglossus
- Ear canal
- External auditory meatus (parotid gland only)
- Facial artery or vein
- Internal carotid artery (encased)
- Jugular vein (parotid gland only)
- Mandible
- Masseter (parotid gland only)
- Mastoid/mastoid process (parotid gland only)
- Maxillary artery
- Nerves
 - Auricular (parotid gland only)
 - Facial (7th nerve) (submandibular and salivary gland only)
 - Lingual (submandibular and salivary gland only)
- Periglandular soft/connective tissue (microscopic, macroscopic, NOS)
- Periosteum of mandible
- Maxillary artery
- Pharyngeal mucosa (parotid gland only)
- Skeletal muscle
 - Digastric
 - Masseter (parotid gland only)
 - Pterygoid
 - Sternocleidomastoid (parotid gland only)
 - Stylohyoid
- Skin overlying gland (parotid gland only)

3 Regional lymph node(s) involved only

- Level I
 - Level IA - Submental
 - Level IB - Submandibular (submaxillary), sublingual
- Level II - Upper jugular
 - Jugulodigastric (subdigastric)
 - Upper deep cervical
 - Level IIA - Anterior
 - Level IIB - Posterior

- Level III - Middle jugular
 - Middle deep cervical
- Level IV - Lower jugular
 - Jugulo-omohyoid (supraomohyoid)
 - Lower deep cervical
 - Virchow node
- Level V - Posterior triangle group
 - Posterior cervical
 - Level VA - Spinal accessory
 - Level VB - Transverse cervical, supraclavicular
- Level VI - Anterior compartment group
 - Laterotracheal
 - Paralaryngeal
 - Paratracheal - above suprasternal notch
 - Perithyroidal
 - Precricoid (Delphian)
 - Prelaryngeal
 - Pretracheal - above suprasternal notch
 - Recurrent laryngeal
- Level VII - Superior mediastinal group (for other mediastinal node(s) see code 7)
 - Esophageal groove
 - Paratracheal - below suprasternal notch
 - Pretracheal - below suprasternal notch
- Other groups
 - Cervical, NOS
 - Deep cervical, NOS
 - Facial
 - Buccinator (buccal)
 - Mandibular
 - Nasolabial
 - Internal jugular, NOS
 - Parapharyngeal
 - Parotid
 - Infraauricular
 - Intraparotid
 - Periparotid
 - Preauricular
 - Retroauricular (mastoid)
 - Retropharyngeal
 - Suboccipital
- Regional lymph node(s), NOS
 - Lymph node(s), NOS

4 Regional by BOTH direct extension AND regional lymph node(s) involved

- Codes (2) + (3)

7 Distant site(s)/lymph node(s) involved

- Distant sites (including further contiguous extension)
 - External auditory meatus (submandibular and salivary gland only)
 - Nerves
 - Facial (7th nerve) (parotid gland only)
 - Lingual (parotid gland only)
 - Pterygoid plates
 - Skin overlying gland (submandibular and salivary gland only)
 - Skull (base, NOS)
 - Spinal accessory nerve
- Distant lymph node(s), NOS
 - Mediastinal (excluding superior mediastinal node(s), Level VII)
- Distant metastasis, NOS
 - Carcinomatosis
 - Distant mets WITH or WITHOUT distant lymph node(s)

9 Unknown if extension or metastasis

NASOPHARYNX

C110, C112-C113, C118-C119: 8000-8700, 9700-9701

C111 and Schema Discriminator 1: Nasopharynx/PharyngealTonsil: 1 (8000-8700, 9700-9701)

C110-C113, C118-C119

C110 Superior wall of nasopharynx

C111 Posterior wall of nasopharynx (excluding pharyngeal tonsil)

C112 Lateral wall of nasopharynx

C113 Anterior wall of nasopharynx

C118 Overlapping lesion of nasopharynx

C119 Nasopharynx, NOS

Note 1: The following sources were used in the development of this chapter

- SEER Extent of Disease 1988: Codes and Coding Instructions (3rd Edition, 1998) (<https://seer.cancer.gov/archive/manuals/EOD10Dig.3rd.pdf>)
- SEER Summary Staging Manual-2000: Codes and Coding Instructions (<https://seer.cancer.gov/tools/ssm/>)
- Collaborative Stage Data Collection System, version 02.05: <https://cancerstaging.org/cstage/Pages/default.aspx>
- Chapter 9 *Nasopharynx*, in the AJCC Cancer Staging Manual, Eighth Edition (2017) published by Springer International Publishing. Used with permission of the American College of Surgeons, Chicago, Illinois.

Note 2: See the following chapters for the listed histologies

- C111 and Schema Discriminator 1: Nasopharynx/PharyngealTonsil: 2 (8000-8700, 9700-9701): **Oropharynx (p16-)* and *Oropharynx HPV-Mediated (p16+)*
- 8710-8714, 8800-8934, 8940-9137, 9141-9582: *Soft Tissue*
- 8720-8790: *Melanoma Head and Neck*
- 8935-8936: *GIST*
- 9140: *Kaposi Sarcoma*

Note 3: The Schema Discriminator *Nasopharynx/Pharyngeal Tonsil* is used to discriminate between Posterior wall of nasopharynx (adenoid) and Pharyngeal tonsil which are coded to ICD-O-3 code C111

SUMMARY STAGE

0 In situ: noninvasive, intraepithelial

1 Localized only (localized, NOS)

- Confined to nasopharynx, NOS
- Invasive tumor confined to one of the following subsites

- Inferior wall (superior surface of soft palate)
- Lateral wall
- Posterior superior wall (vault)
- Involvement of two or more subsites
 - Lateral wall extending into eustachian tube/middle ear
 - Posterior, inferior, or lateral wall(s)

2 Regional by direct extension only

- Any structure listed in Code 1 WITH fixation
- Bone, NOS
- Bony structures of skull base
- Cartilage, NOS
- Cervical vertebra
- Floor of orbit
- Hard palate
- Nasal cavity WITHOUT pharyngeal extension
- Oropharynx
- Paranasal sinus
- Pterygoid structures
- Skull base
- Soft palate, inferior surface including uvula WITHOUT pharyngeal extension
- Soft tissue, NOS (excluding soft tissue of neck)

3 Regional lymph node(s) involved only

- Level I
 - Level IA - Submental
 - Level IB - Submandibular (submaxillary), sublingual
- Level II - Upper jugular
 - Jugulodigastric (subdigastric)
 - Upper deep cervical
 - Level IIA - Anterior
 - Level IIB - Posterior
- Level III - Middle jugular
 - Middle deep cervical
- Level IV - Lower jugular
 - Jugulo-omohyoid (supraomohyoid)
 - Lower deep cervical
 - Virchow node
- Level V - Posterior triangle group
 - Posterior cervical
 - Level VA - Spinal accessory
 - Level VB - Transverse cervical, supraclavicular

- Level VI - Anterior compartment group
 - Laterotracheal
 - Paralaryngeal
 - Paratracheal - above suprasternal notch
 - Perithyroidal
 - Precricoid (Delphian)
 - Prelaryngeal
 - Pretracheal - above suprasternal notch
 - Recurrent laryngeal
- Level VII - Superior mediastinal group (for other mediastinal node(s) see code 7)
 - Esophageal groove
 - Paratracheal - below suprasternal notch
 - Pretracheal - below suprasternal notch
- Other groups
 - Cervical, NOS
 - Deep cervical, NOS
 - Facial
 - Buccinator (buccal)
 - Mandibular
 - Nasolabial
 - Internal jugular, NOS
 - Parapharyngeal
 - Parotid
 - Infraauricular
 - Intraparotid
 - Periparotid
 - Preauricular
 - Retroauricular (mastoid)
 - Retropharyngeal
 - Suboccipital
- Regional lymph node(s), NOS
 - Lymph node(s), NOS

4 Regional by BOTH direct extension AND regional lymph node(s) involved

- Codes (2) + (3)

7 Distant site(s)/lymph node(s) involved

- Distant site(s) (including further contiguous extension)
 - Brain
 - Cranial nerve involvement
 - Hypopharynx
 - Infratemporal fossa/masticator space

- Intracranial extension, NOS
- Orbit except bone of floor of orbit
- Parotid gland
- Soft tissues of neck
- Distant lymph node(s), NOS
 - Mediastinal (excluding superior mediastinal node(s))
- Distant metastasis, NOS
 - Carcinomatosis
 - Distant mets WITH or WITHOUT distant lymph node(s)

9 Unknown if extension or metastasis

OROPHARYNX

C019, C024, C051-C052, C090-C091, C098-C099, C100, C102-C104, C108-C109 (8000-8700, 9700-9701)

C111 and Schema Discriminator 1: Nasopharynx/PharyngealTonsil: 2 (8000-8700, 9700-9701)

C019, C024, C051-C052, C090-C091, C098-C099, C100, C102-C104, C108-C109, C111

C019 Base of tongue, NOS

C024 Lingual tonsil

C051 Soft palate, NOS

C052 Uvula

C090 Tonsillar fossa

C091 Tonsillar pillar

C098 Overlapping lesion of tonsil

C099 Tonsil, NOS

C100 Vallecula

C102 Lateral wall of oropharynx

C103 Posterior wall of oropharynx

C104 Branchial cleft (site of neoplasm)

C108 Overlapping lesion of oropharynx

C109 Oropharynx, NOS

C111 Pharyngeal tonsil

Note 1: The following sources were used in the development of this chapter

- SEER Extent of Disease 1988: Codes and Coding Instructions (3rd Edition, 1998) (<https://seer.cancer.gov/archive/manuals/EOD10Dig.3rd.pdf>)
- SEER Summary Staging Manual-2000: Codes and Coding Instructions (<https://seer.cancer.gov/tools/ssm/>)
- Collaborative Stage Data Collection System, version 02.05: <https://cancerstaging.org/cstage/Pages/default.aspx>
- Chapter 10 *HPV-Mediated (p16+) Oropharyngeal Cancer*, in the AJCC Cancer Staging Manual, Eighth Edition (2017) published by Springer International Publishing. Used with permission of the American College of Surgeons, Chicago, Illinois.
- Chapter 11 *Oropharynx (p16-) and Hypopharynx*, in the AJCC Cancer Staging Manual, Eighth Edition (2017) published by Springer International Publishing. Used with permission of the American College of Surgeons, Chicago, Illinois.

Note 2: See the following chapters for the listed histologies

- C111 and Schema Discriminator 1: Nasopharynx/PharyngealTonsil:1 (8000-8700, 9700-9701): *Nasopharynx*
- 8710-8714, 8800-8934, 8940-9137, 9141-9582: *Soft Tissue*
- 8720-8790: *Melanoma Head and Neck*
- 8935-8936: *GIST*
- 9140: *Kaposi Sarcoma*

Note 3: The intrinsic muscles of tongue are four paired muscles within the tongue which control its shape. The extrinsic muscles originate from structures outside the tongue and control its positioning.

Note 4: Parapharyngeal involvement (pharyngeal space invasion) (code 7) denotes posterolateral infiltration of tumor beyond the pharyngobasilar fascia. The pharyngobasilar fascia is the fibrous layer of the pharyngeal wall between the mucosa and the muscular layer, attached superiorly to the basilar part of the occipital bone and diminishing in thickness as it descends.

Note 5: The masticator space (code 7) primarily consists of the muscles of mastication, the medial and lateral pterygoid, masseter, and temporalis muscles. The space also includes the ramus of the mandible and the third division of cranial nerve V as it passes through the foramen ovale into the suprahyoid neck.

SUMMARY STAGE

0 In situ: noninvasive, intraepithelial

1 Localized only (localized, NOS)

- All sites
 - Confined to site of origin
 - Epiglottis, lingual surface
- Oropharynx (C090-C091, C098-C099, C100, C102-C104, C108-C109)
 - Tonsil (palatine, NOS)
 - Tonsillar pillar/fossa
 - Wall (anterior [including vallecular], lateral, posterior)
- Pharyngeal Tonsil (C111)
 - Adenoid
 - Nasopharynx (inferior wall, superior surface of soft palate)
 - Pharyngeal tonsil (nasopharyngeal tonsil)
 - Posterior superior wall (vault)
- Soft Palate (C051, C052)
 - Lamina propria, submucosa, musculature
 - Tumor crosses midline
- Tongue Base (C019, C024)
 - Lamina propria, submucosa, musculature (intrinsic)
 - Tumor crosses midline

2 Regional by direct extension only

- All sites
 - Epiglottis, lingual surface plus both lateral walls through soft palate or base of tongue
 - Epiglottis WITH fixation

- Oropharynx (C090-C091, C098-C099, C100, C102-C104, C108-C109)
 - Base of tongue (including lingual tonsil)
 - Buccal mucosa
 - Floor of mouth
 - Gum (gingiva)
 - Hypopharynx
 - Larynx, NOS
 - Lateral walls (both) through soft palate or base of tongue
 - Posterior surface of epiglottis
 - Prevertebral fascia/muscle
 - Pyrifiform sinus
 - Soft palate (inferior surface including uvula, superior [nasopharyngeal] surface, NOS)
 - Soft tissue of neck
- Pharyngeal Tonsil (C111)
 - Hard palate
 - Mandible
 - Nasal cavity
 - Oropharynx
 - Paranasal sinuses
 - Pterygopalatine fossa
 - Soft palate, inferior surface including uvula
- Soft Palate (C051, C052)
 - Buccal mucosa (inner cheek)
 - Gum (gingiva), upper
 - Hard palate
 - Lateral pharyngeal wall
 - Mandible
 - Tonsils, including tonsillar pillars and fossae
- Tongue Base (posterior 1/3 of tongue) (C019, C024)
 - Anterior two-thirds of tongue for base of tongue
 - Base of tongue tumor crosses midline
 - Floor of mouth
 - Glossoepiglottic fold
 - Glossopharyngeal sulcus
 - Lateral pharyngeal wall
 - Lingual tonsil for base of tongue
 - Lower gingiva
 - Pharyngoepiglottic fold
 - Soft palate, inferior surface or NOS including uvula
 - Sublingual gland
 - Tonsil, tonsillar pillars and fossae

3 Regional lymph node(s) involved only

- Level I
 - Level IA - Submental
 - Level IB - Submandibular (submaxillary), sublingual
- Level II - Upper jugular
 - Jugulodigastric (subdigastric)
 - Upper deep cervical
 - Level IIA - Anterior
 - Level IIB - Posterior
- Level III - Middle jugular
 - Middle deep cervical
- Level IV - Lower jugular
 - Jugulo-omohyoid (supraomohyoid)
 - Lower deep cervical
 - Virchow node
- Level V - Posterior triangle group
 - Posterior cervical
 - Level VA - Spinal accessory
 - Level VB - Transverse cervical, supraclavicular
- Level VI - Anterior compartment group
 - Laterotracheal
 - Paralaryngeal
 - Paratracheal - above suprasternal notch
 - Perithyroidal
 - Precricoid (Delphian)
 - Prelaryngeal
 - Pretracheal - above suprasternal notch
 - Recurrent laryngeal
- Level VII - Superior mediastinal group (for other mediastinal node(s), see code 7)
 - Esophageal groove
 - Paratracheal - below suprasternal notch
 - Pretracheal - below suprasternal notch
- Other groups
 - Cervical, NOS
 - Deep cervical, NOS
 - Facial
 - Buccinator (buccal)
 - Mandibular
 - Nasolabial
 - Internal jugular, NOS
 - Parapharyngeal
 - Parotid
 - Infraauricular
 - Intraparotid
 - Periparotid

- Preauricular
 - Retroauricular (mastoid)
 - Retropharyngeal
 - Suboccipital
- Regional lymph node(s), NOS
 - Lymph node(s), NOS

4 Regional by BOTH direct extension AND regional lymph node(s) involved

- Codes (2) + (3)

7 Distant site(s)/lymph node(s) involved

- Distant site(s) (including further contiguous extension)
 - All sites
 - Carotid artery (encasing)
 - Deep/extrinsic muscles of tongue
 - Genioglossus
 - Hyoglossus
 - Palatoglossus
 - Styloglossus
 - Lateral nasopharynx
 - Masseter muscle
 - Masticator space
 - Cranial nerve V-third division
 - Muscles of mastication
 - Pterygoid muscle (lateral, medial)
 - Ramus of mandible
 - Temporalis muscles
 - Parapharyngeal extension (pharyngeal space invasion)
 - Pterygoid plates
 - Skull (base, bone, NOS)
 - Oropharynx (C090-C091, C098-C099, C100, C102-C104, C108-C109)
 - Anterior 2/3 of tongue
 - Hard palate
 - Mandible
 - Parotid gland
 - Pharyngeal Tonsil (C111)
 - Brain
 - Cranial nerve involvement
 - Hypopharynx
 - Infratemporal fossa/masticator space
 - Orbit (floor, NOS)
 - Paranasal sinus

- Soft tissues of neck
- Soft palate (C051, C052)
 - Hypopharynx
 - Maxilla
 - Maxillary sinus (antrum)
 - Nasal cavity
 - Nasopharynx (lateral, NOS)
 - Palatine bone (bone of hard palate)
 - Tongue
- Tongue Base (posterior 1/3 of tongue) (C019, C024)
 - Hard palate
 - Hypopharynx
 - Larynx
 - Mandible
 - Skin
- Distant lymph node(s)
 - Mediastinal (excluding superior mediastinal node(s), Level VII)
- Distant metastasis, NOS
 - Carcinomatosis
 - Distant mets WITH or WITHOUT distant lymph node(s)

9 Unknown if extension or metastasis

HYPOPHARYNX

8000-8700, 9700-9701

C129-C132, C138-C139

C129 Pyriform sinus

C130 Postcricoid region

C131 Hypopharyngeal aspect of aryepiglottic fold

C132 Posterior wall of hypopharynx

C138 Overlapping lesion of hypopharynx

C139 Hypopharynx, NOS (laryngopharynx)

Note 1: The following sources were used in the development of this chapter

- SEER Extent of Disease 1988: Codes and Coding Instructions (3rd Edition, 1998) (<https://seer.cancer.gov/archive/manuals/EOD10Dig.3rd.pdf>)
- SEER Summary Staging Manual-2000: Codes and Coding Instructions (<https://seer.cancer.gov/tools/ssm/>)
- Collaborative Stage Data Collection System, version 02.05: <https://cancerstaging.org/cstage/Pages/default.aspx>
- Chapter 11 *Oropharynx (p16-) and Hypopharynx*, in the AJCC Cancer Staging Manual, Eighth Edition (2017) published by Springer International Publishing. Used with permission of the American College of Surgeons, Chicago, Illinois.

Note 2: See the following chapters for the listed histologies

- 8710-8714, 8800-8934, 8940-9137, 9141-9582: *Soft Tissue*
- 8720-8790: *Melanoma Head and Neck*
- 8935-8936: *GIST*
- 9140: *Kaposi Sarcoma*"

Note 3: Code 2 If there is fixation of hemilarynx or larynx.

SUMMARY STAGE

0 In situ: noninvasive, intraepithelial

1 Localized only (localized, NOS)

- Confined to hypopharynx
- Laryngopharynx
- Postcricoid area
- Posterior pharyngeal wall
- Pyriform fossa or sinus

2 Regional by direct extension only

- Carotid artery (encased)
- Central compartment soft tissues of neck including
 - Prelaryngeal strap muscle(s)
 - Subcutaneous fat
- Cricoid cartilage
- Esophagus
- Extrinsic muscle of tongue
- Fixation of structures in code 1 (localized with fixation)
- Fixation of hemilarynx, larynx or oropharynx
- Hard palate
- Hemilarynx
- Mandible
- Medial pterygoid
- Oropharynx
- Prevertebral fascia/muscle(s)
- Soft tissues of neck
- Thyroid cartilage/gland

3 Regional lymph node(s) involved only

- Level I
 - Level IA - Submental
 - Level IB - Submandibular (submaxillary), sublingual
- Level II - Upper jugular
 - Jugulodigastric (subdigastric)
 - Upper deep cervical
 - Level IIA - Anterior
 - Level IIB - Posterior
- Level III - Middle jugular
 - Middle deep cervical
- Level IV - Lower jugular
 - Jugulo-omohyoid (supraomohyoid)
 - Lower deep cervical
 - Virchow node
- Level V - Posterior triangle group
 - Posterior cervical
 - Level VA - Spinal accessory
 - Level VB - Transverse cervical, supraclavicular
- Level VI - Anterior compartment group
 - Laterotracheal
 - Paralaryngeal
 - Paratracheal - above suprasternal notch
 - Perithyroidal
 - Precricoid (Delphian)
 - Prelaryngeal

- Pretracheal - above suprasternal notch
 - Recurrent laryngeal
- Level VII - Superior mediastinal group (for other mediastinal node(s) see code 7)
 - Esophageal groove
 - Paratracheal - below suprasternal notch
 - Pretracheal - below suprasternal notch
- Other groups
 - Cervical, NOS
 - Deep cervical, NOS
 - Facial
 - Buccinator (buccal)
 - Mandibular
 - Nasolabial
 - Internal jugular, NOS
 - Parapharyngeal
 - Parotid
 - Infraauricular
 - Intraparotid
 - Periparotid
 - Preauricular
 - Retroauricular (mastoid)
 - Retropharyngeal
 - Suboccipital
- Regional lymph node(s), NOS
 - Lymph node(s), NOS

4 Regional by BOTH direct extension AND regional lymph node(s) involved

- Codes (2) + (3)

7 Distant site(s)/lymph node(s) involved

- Distant site(s) (including further contiguous extension)
 - Base of tongue
 - Floor of tongue
 - Hyoid bone
 - Mediastinal structure(s)
 - Nasopharynx
- Distant lymph node(s), NOS
 - Mediastinal (excluding superior mediastinal node(s))
- Distant metastasis, NOS
 - Carcinomatosis
 - Distant mets WITH or WITHOUT distant lymph node(s)

9 Unknown if extension or metastasis

PHARYNX OTHER

8000-8700, 9700-9701

C140, C142, C148

C140 Pharynx, NOS

C142 Waldeyer ring

C148 Overlapping lesion of lip, oral cavity

Note 1: The following sources were used in the development of this chapter

- SEER Extent of Disease 1988: Codes and Coding Instructions (3rd Edition, 1998) (<https://seer.cancer.gov/archive/manuals/EOD10Dig.3rd.pdf>)
- SEER Summary Staging Manual-2000: Codes and Coding Instructions (<https://seer.cancer.gov/tools/ssm/>)
- Collaborative Stage Data Collection System, version 02.05: <https://cancerstaging.org/cstage/Pages/default.aspx>

Note 2: See the following chapters for the listed histologies

- 8710-8714, 8800-8934, 8940-9137, 9141-9582: *Soft Tissue*
- 8720-8790: *Melanoma Head and Neck*
- 8935-8936: *GIST*
- 9140: *Kaposi Sarcoma*

Note 3: Summary Stage is the only applicable staging system for this site/histology/schema.

SUMMARY STAGE

0 In situ: noninvasive, intraepithelial

1 Localized only (localized, NOS)

- Invasive tumor confined to site of origin

2 Regional by direct extension only

- Extension to adjacent structure(s)
- Fixation
- More than one region of pharynx involved
 - Hypopharynx
 - Nasopharynx
 - Oropharynx
- Pharynx and oral cavity involved

3 Regional lymph node(s) involved only

- Level I
 - Level IA - Submental
 - Level IB - Submandibular (submaxillary), sublingual
- Level II - Upper jugular
 - Jugulodigastric (subdigastric)
 - Upper deep cervical
 - Level IIA - Anterior
 - Level IIB - Posterior
- Level III - Middle jugular
 - Middle deep cervical
- Level IV - Lower jugular
 - Jugulo-omohyoid (supraomohyoid)
 - Lower deep cervical
 - Virchow node
- Level V - Posterior triangle group
 - Posterior cervical
 - Level VA - Spinal accessory
 - Level VB - Transverse cervical, supraclavicular
- Level VI - Anterior compartment group
 - Laterotracheal
 - Paralaryngeal
 - Paratracheal - above suprasternal notch
 - Perithyroidal
 - Precricoid (Delphian)
 - Prelaryngeal
 - Pretracheal - above suprasternal notch
 - Recurrent laryngeal
- Level VII - Superior mediastinal group (for other mediastinal node(s) see code 7)
 - Esophageal groove
 - Paratracheal - below suprasternal notch
 - Pretracheal - below suprasternal notch
- Other groups
 - Cervical, NOS
 - Deep cervical, NOS
 - Facial
 - Buccinator (buccal)
 - Mandibular
 - Nasolabial
 - Internal jugular, NOS
 - Parapharyngeal
 - Parotid
 - Infraauricular
 - Intraparotid
 - Periparotid

- Preauricular
 - Retroauricular (mastoid)
 - Retropharyngeal
 - Suboccipital
- Regional lymph node(s), NOS
 - Lymph node(s), NOS

4 Regional by BOTH direct extension AND regional lymph node(s) involved

- Codes (2) + (3)

7 Distant site(s)/lymph node(s) involved

- Distant site(s) (including further contiguous extension)
 - Meninges
- Distant lymph node(s), NOS
 - Mediastinal (excluding superior mediastinal node(s))
- Distant metastasis, NOS
 - Carcinomatosis
 - Distant metastasis WITH or WITHOUT distant lymph node(s)

9 Unknown if extension or metastasis

MIDDLE EAR

8000-8700, 9700-9701

C301

C301 Middle ear

Note 1: The following sources were used in the development of this chapter

- SEER Extent of Disease 1988: Codes and Coding Instructions (3rd Edition, 1998) (<https://seer.cancer.gov/archive/manuals/EOD10Dig.3rd.pdf>)
- SEER Summary Staging Manual-2000: Codes and Coding Instructions (<https://seer.cancer.gov/tools/ssm/>)
- Collaborative Stage Data Collection System, version 02.05: <https://cancerstaging.org/cstage/Pages/default.aspx>

Note 2: See the following chapters for the listed histologies

- 8710-8714, 8800-8934, 8940-9137, 9141-9582: *Soft Tissue*
- 8720-8790: *Melanoma Head and Neck*
- 8935-8936: *GIST*
- 9140: *Kaposi Sarcoma*

Note 3: Summary Stage is the only applicable staging system for this site/histology/schema.

SUMMARY STAGE

0 In situ: noninvasive, intraepithelial

1 Localized only (localized, NOS)

- Confined to
 - Auditory bone(s) (incus, malleus, stapes)
 - Vestibulocochlear organ
 - Cochlea
 - Semicircular ducts (ampullae, saccule, utricle)
 - Septum
 - Tympanic membrane (ear drum)

2 Regional by direct extension only

- Adjacent connective tissue
 - Auditory tube (Eustachian tube, pharyngotympanic tube)
 - Nerve(s)
- Adjacent organ(s)/structure(s)

- External auditory meatus (ear canal)
- Internal carotid artery
- Mastoid antrum
- Nasopharynx
- Temporal bone

3 Regional lymph node(s) involved only

- Level I
 - Level IA - Submental
 - Level IB - Submandibular (submaxillary), sublingual
- Level II - Upper jugular
 - Jugulodigastric (subdigastric)
 - Upper deep cervical
 - Level IIA - Anterior
 - Level IIB - Posterior
- Level III - Middle jugular
 - Middle deep cervical
- Level IV - Lower jugular
 - Jugulo-omohyoid (supraomohyoid)
 - Lower deep cervical
 - Virchow node
- Level V - Posterior triangle group
 - Posterior cervical
 - Level VA - Spinal accessory
 - Level VB - Transverse cervical, supraclavicular
- Level VI - Anterior compartment group
 - Laterotracheal
 - Paralaryngeal
 - Paratracheal - above suprasternal notch
 - Perithyroidal
 - Precricoid (Delphian)
 - Prelaryngeal
 - Pretracheal - above suprasternal notch
 - Recurrent laryngeal
- Level VII - Superior mediastinal group (for other mediastinal node(s) see code 7)
 - Esophageal groove
 - Paratracheal - below suprasternal notch
 - Pretracheal - below suprasternal notch
- Other groups
 - Cervical, NOS
 - Deep cervical, NOS
 - Facial
 - Buccinator (buccal)
 - Mandibular

- Nasolabial
- Internal jugular, NOS
- Parapharyngeal
- Parotid
 - Infraauricular
 - Intraparotid
 - Periparotid
 - Preauricular
- Retroauricular (mastoid)
- Retropharyngeal
- Suboccipital
- Regional lymph node(s), NOS
 - Lymph node(s), NOS

4 Regional by BOTH direct extension AND regional lymph node(s) involved

- Codes (2) + (3)

7 Distant site(s)/lymph node(s) involved

- Distant site(s) (including further contiguous extension)
 - Meninges
- Distant lymph node(s), NOS
 - Mediastinal (excluding superior mediastinal node(s))
- Distant metastasis, NOS
 - Carcinomatosis
 - Distant metastasis WITH or WITHOUT distant lymph node(s)

9 Unknown if extension or metastasis

NASAL CAVITY AND PARANASAL SINUSES

8000-8700, 8941, 8982, 9700-9701

C300, C310-C311

C300 Nasal cavity (excluding nose, NOS C760)

C310 Maxillary sinus

C311 Ethmoid sinus

Note 1: The following sources were used in the development of this chapter

- SEER Extent of Disease 1988: Codes and Coding Instructions (3rd Edition, 1998) (<https://seer.cancer.gov/archive/manuals/EOD10Dig.3rd.pdf>)
- SEER Summary Staging Manual-2000: Codes and Coding Instructions (<https://seer.cancer.gov/tools/ssm/>)
- Collaborative Stage Data Collection System, version 02.05: <https://cancerstaging.org/cstage/Pages/default.aspx>
- Chapter 12 *Nasal Cavity and Paranasal Sinuses*, in the AJCC Cancer Staging Manual, Eighth Edition (2017) published by Springer International Publishing. Used with permission of the American College of Surgeons, Chicago, Illinois.

Note 2: See the following chapters for the listed histologies

- 8710-8714, 8800-8934, 8940, 8950-8981, 8983-9137, 9141-9582: *Soft Tissue*
- 8720-8790: *Melanoma Head and Neck*
- 8935-8936: *GIST*
- 9140: *Kaposi Sarcoma*

Note 3: The bones of the lateral wall of the nasal cavity include the maxilla, the perpendicular plate of the palatine bone, the medial pterygoid plate, the labyrinth and inferior concha of the ethmoid. The roof of the nasal cavity is formed by the nasal bone. The floor of the nasal cavity, which forms the roof of the mouth, is composed of the bones of the hard palate: the horizontal plate of the palatine bone posteriorly and the palatine process of the maxilla anteriorly.

Note 4: Involvement of or extension to bone includes any type of tumor extension to the bone, such as erosion, invasion, extension, penetration, or destruction.

Note 5: "Bony invasion" does not include extension to palate, cribriform plate, or pterygoid plates. Extension to these structures is coded separately.

Note 6: "Bony invasion" does include involvement of perpendicular plate of ethmoid bone or ethmoid air cells.

Note 7: Code 2 for base of skull, NOS when there is no information available for more specific bony structures in the skull.

Note 8: Minimal extension to anterior cranial fossa implies tumor pushing through the cribriform plate, but without invasion of the dura or brain.

SUMMARY STAGE

0 In situ: noninvasive, intraepithelial

1 Localized only (localized, NOS)

- Nasal Cavity (C300)
 - Confined to nasal cavity, NOS
 - Invasive tumor confined to one or more of the following subsites **WITHOUT** bony invasion
 - Floor
 - Lateral wall, including
 - Meatus (superior, middle, inferior)
 - Nasal conchae (superior, middle, inferior)
 - Septum
 - Vestibule (edge of naris to mucocutaneous junction)
- Maxillary Sinus (C310)
 - Confined to maxillary sinus, NOS
 - Confined to mucosa of maxillary sinus (antrum)
 - **WITHOUT** erosion or destruction of bone
- Ethmoid Sinus (C311)
 - Confined to ethmoid sinus
 - **WITH** or **WITHOUT** bony invasion (involvement of perpendicular plate of ethmoid bone or ethmoid air cells)

2 Regional by direct extension only

- All sites
 - Adjacent organs/structures, NOS
 - Base of skull, NOS
 - Nasopharynx
 - Pterygoid plates
- Nasal Cavity (C300)
 - Confined to one or more subsites listed in code 1 **WITH** bony invasion
 - Choana
 - Cribriform plate
 - Ethmoid sinus
 - Frontal sinus
 - Hard palate
 - Nasolacrimal duct
 - Palatine bone
- Maxillary sinus (C310)

- Bone erosion or destruction
- Ethmoid sinuses (anterior, posterior, NOS)
- Floor or medial wall of orbit
- Floor or posterior wall of maxillary sinus
- Frontal sinus
- Hard palate
- Infratemporal fossa
- Maxilla, NOS
- Middle nasal meatus
- Nasal cavity (floor, lateral wall, septum, turbinates)
- Orbital contents including eye
- Palatine bone
- Pterygoid fossa
- Pterygomaxillary fossa
- Soft palate
- Subcutaneous tissues
- Temporal fossa
- Ethmoid Sinus (C311)
 - Confined to both ethmoid sinuses
 - WITH or WITHOUT bony invasion (involvement of perpendicular plate of ethmoid bone or ethmoid air cells)
 - Anterior cranial fossa (minimal extension)
 - Anterior orbital contents
 - Brain
 - Clivus
 - Cranial nerves (other than V2, maxillary division of trigeminal nerve)
 - Cribriform plate
 - Dura
 - Frontal sinus
 - Maxillary sinus
 - Medial wall or floor of orbit
 - Middle cranial fossa
 - Nasal cavity WITH or WITHOUT bony invasion, one or more subsites
 - Floor
 - Lateral wall
 - Meatus (superior, middle, inferior)
 - Nasal conchae (superior, middle, inferior)
 - Septum
 - Turbinates
 - Vestibule (edge of naris to mucocutaneous junction)
 - Orbital apex
 - Orbital plate
 - Skin of cheek
 - Skin of nose
 - Sphenoid sinus

3 Regional lymph node(s) involved only

- Level I
 - Level IA - Submental
 - Level IB - Submandibular (submaxillary), sublingual
- Level II - Upper jugular
 - Jugulodigastric (subdigastric)
 - Upper deep cervical
 - Level IIA - Anterior
 - Level IIB - Posterior
- Level III - Middle jugular
 - Middle deep cervical
- Level IV - Lower jugular
 - Jugulo-omohyoid (supraomohyoid)
 - Lower deep cervical
 - Virchow node
- Level V - Posterior triangle group
 - Posterior cervical
 - Level VA - Spinal accessory
 - Level VB - Transverse cervical, supraclavicular
- Level VI - Anterior compartment group
 - Laterotracheal
 - Paralaryngeal
 - Paratracheal - above suprasternal notch
 - Perithyroidal
 - Precricoid (Delphian)
 - Prelaryngeal
 - Pretracheal - above suprasternal notch
 - Recurrent laryngeal
- Level VII - Superior mediastinal group (for other mediastinal node(s), see code 7)
 - Esophageal groove
 - Paratracheal - below suprasternal notch
 - Pretracheal - below suprasternal notch
- Other groups
 - Cervical, NOS
 - Deep cervical, NOS
 - Facial
 - Buccinator (buccal)
 - Mandibular
 - Nasolabial
 - Internal jugular, NOS
 - Parapharyngeal
 - Parotid
 - Infraauricular
 - Intraparotid
 - Periparotid

- Preauricular
 - Retroauricular (mastoid)
 - Retropharyngeal
 - Suboccipital
- Regional lymph node(s), NOS
 - Lymph node(s)

4 Regional by BOTH direct extension AND regional lymph node(s) involved

- Codes (2) + (3)

7 Distant site(s)/lymph node(s) involved

- Distant site(s) (including further contiguous extension)
 - Nasal Cavity (C300)
 - Anterior cranial fossa (minimal extension)
 - Anterior orbital contents
 - Brain
 - Clivus
 - Cranial nerves (other than V2, maxillary division of trigeminal nerve)
 - Dura
 - Maxillary sinus
 - Medial wall or floor of orbit
 - Middle cranial fossa
 - Orbital apex
 - Orbital plate
 - Skin of cheek
 - Skin of nose
 - Sphenoid sinus
 - Ethmoid Sinus (C311)
 - Hard palate
- Distant lymph node(s), NOS
 - Mediastinal (excluding superior mediastinal node(s), Level VII)
- Distant metastasis, NOS
 - Carcinomatosis
 - Distant metastasis WITH or WITHOUT distant lymph node(s)

9 Unknown if extension or metastasis

SINUS OTHER

8000-8700, 9700-9701

C312-C313, C318-C319

C312 Frontal sinus

C313 Sphenoid sinus

C318 Overlapping lesion of accessory sinuses

C319 Accessory sinus, NOS

Note 1: The following sources were used in the development of this chapter

- SEER Extent of Disease 1988: Codes and Coding Instructions (3rd Edition, 1998) (<https://seer.cancer.gov/archive/manuals/EOD10Dig.3rd.pdf>)
- SEER Summary Staging Manual-2000: Codes and Coding Instructions (<https://seer.cancer.gov/tools/ssm/>)
- Collaborative Stage Data Collection System, version 02.05: <https://cancerstaging.org/cstage/Pages/default.aspx>

Note 2: See the following chapters for the listed histologies

- 8710-8714, 8800-8934, 8940-9137, 9141-9582: *Soft Tissue*
- 8720-8790: *Melanoma Head and Neck*
- 8935-8936: *GIST*
- 9140: *Kaposi Sarcoma*

Note 3: Summary Stage is the only applicable staging system for this site/histology/schema.

SUMMARY STAGE

0 In situ: noninvasive, intraepithelial

1 Localized only (localized, NOS)

- Confined to mucosa of one of the following
 - Frontal sinus
 - Sphenoid sinus

2 Regional by direct extension only

- Accessory sinuses invaded (more than one)
 - Destruction of bony wall of sinus
- Bone, cartilage
 - Facial bones
 - Maxilla

- Orbital structures
 - Pterygoid fossa
 - Zygoma
- Brain
- Cranial nerves
- Hard palate
- Muscles
 - Masseter
 - Pterygoid
- Nasal cavity
 - Floor
 - Lateral wall
 - Nasal cavity, NOS
 - Septum
 - Turbinates
- Nasopharynx
- Orbital contents, including eye
- Soft tissue
- Skin

3 Regional lymph node(s) involved only

- Level I
 - Level IA - Submental
 - Level IB - Submandibular (submaxillary), sublingual
- Level II - Upper jugular
 - Jugulodigastric (subdigastric)
 - Upper deep cervical
 - Level IIA - Anterior
 - Level IIB - Posterior
- Level III - Middle jugular
 - Middle deep cervical
- Level IV - Lower jugular
 - Jugulo-omohyoid (supraomohyoid)
 - Lower deep cervical
 - Virchow node
- Level V - Posterior triangle group
 - Posterior cervical
 - Level VA - Spinal accessory
 - Level VB - Transverse cervical, supraclavicular
- Level VI - Anterior compartment group
 - Laterotracheal
 - Paralaryngeal
 - Paratracheal - above suprasternal notch
 - Perithyroidal

- Precricoid (Delphian)
- Prelaryngeal
- Pretracheal - above suprasternal notch
- Recurrent laryngeal
- Level VII - Superior mediastinal group (for other mediastinal node(s) see code 7)
 - Esophageal groove
 - Paratracheal - below suprasternal notch
 - Pretracheal - below suprasternal notch
- Other groups
 - Cervical, NOS
 - Deep cervical, NOS
 - Facial
 - Buccinator (buccal)
 - Mandibular
 - Nasolabial
 - Internal jugular, NOS
 - Parapharyngeal
 - Parotid
 - Infraauricular
 - Intraparotid
 - Periparotid
 - Preauricular
 - Retroauricular (mastoid)
 - Retropharyngeal
 - Suboccipital
- Regional lymph node(s), NOS
 - Lymph node(s), NOS

4 Regional by BOTH direct extension AND regional lymph node(s) involved

- Codes (2) + (3)

7 Distant site(s)/lymph node(s) involved

- Distant site(s) (including further contiguous extension)
 - Meninges
- Distant lymph node(s), NOS
 - Mediastinal (excluding superior mediastinal node(s))
- Distant metastasis, NOS
 - Carcinomatosis
 - Distant metastasis WITH or WITHOUT distant lymph node(s)

9 Unknown if extension or metastasis

LARYNX SUPRAGLOTTIC

8000-8700, 9700-9701

C101, C321

C101 Epiglottis anterior

C321 Supraglottis

Note 1: The following sources were used in the development of this chapter

- SEER Extent of Disease 1988: Codes and Coding Instructions (3rd Edition, 1998) (<https://seer.cancer.gov/archive/manuals/EOD10Dig.3rd.pdf>)
- SEER Summary Staging Manual-2000: Codes and Coding Instructions (<https://seer.cancer.gov/tools/ssm/>)
- Collaborative Stage Data Collection System, version 02.05: <https://cancerstaging.org/cstage/Pages/default.aspx>
- Chapter 13 *Larynx*, in the AJCC Cancer Staging Manual, Eighth Edition (2017) published by Springer International Publishing. Used with permission of the American College of Surgeons, Chicago, Illinois.

Note 2: See the following chapters for the listed histologies

- 8710-8714, 8800-8934, 8940-9137, 9141-9582: *Soft Tissue*
- 8720-8790: *Melanoma Head and Neck*
- 8935-8936: *GIST*
- 9140: *Kaposi Sarcoma*

Note 3: Impaired vocal cord mobility, also described as vocal cord paresis, may suggest invasion of intrinsic laryngeal muscle. Fixation of the vocal cord may be described as immobility of the arytenoids noted on endoscopy, vocal cord paralysis, or deviation of larynx to fixed side.

Note 4: Code 1 for localized tumor only if no information is available to identify further extension.

Note 5: Tumor limited to the larynx (code 1) includes tumor involving, but limited to, the supraglottis, glottis and subglottis

SUMMARY STAGE

0 In situ: noninvasive, intraepithelial

1 Localized only (localized, NOS)

- Confined to
 - Epiglottis, NOS
 - One supraglottis subsite with normal vocal cord mobility

- Supraglottis, NOS
- Limited to larynx with vocal cord fixation
- Mucosa of more than one subsite of supraglottis and/or glottis
- Supraglottis
 - Aryepiglottic fold
 - Cartilage (arytenoid, corniculate, cuneiform, laryngeal, NOS)
 - Epiglottis (infrahyoid, laryngeal [posterior] surface of epiglottis)
 - Epiglottis (suprahyoid) (including tip, lingual (anterior) and laryngeal surfaces)
 - Epilarynx, NOS
 - False cords: ventricular bands/cavity/vestibular fold

2 Regional by direct extension only

- All sites
 - Cricoid cartilage
 - Hypopharynx, NOS
 - Mucosa of
 - Base of tongue
 - Pyriform sinus (medial wall)
 - Vallecula
 - Paraglottic space
 - Postcricoid area
 - Pre-epiglottic space
 - Pre-epiglottic tissues
 - Vocal cord fixation of larynx with extension to structures listed in code 2
- Epiglottis (anterior surface, NOS) primaries only
 - Buccal mucosa
 - Floor of mouth
 - Gum (gingiva)
 - Nasopharynx
 - Pterygoid muscle
 - Soft palate

3 Regional lymph node(s) involved only

- Level I
 - Level IA - Submental
 - Level IB - Submandibular (submaxillary), sublingual
- Level II - Upper jugular
 - Jugulodigastric (subdigastric)
 - Upper deep cervical
 - Level IIA - Anterior
 - Level IIB - Posterior
- Level III - Middle jugular

- Middle deep cervical
- Level IV - Lower jugular
 - Jugulo-omohyoid (supraomohyoid)
 - Lower deep cervical
 - Virchow node
- Level V - Posterior triangle group
 - Posterior cervical
 - Level VA - Spinal accessory
 - Level VB - Transverse cervical, supraclavicular
- Level VI - Anterior compartment group
 - Laterotracheal
 - Paralaryngeal
 - Paratracheal - above suprasternal notch
 - Perithyroidal
 - Precricoid (Delphian)
 - Prelaryngeal
 - Pretracheal - above suprasternal notch
 - Recurrent laryngeal
- Level VII - Superior mediastinal group (for other mediastinal node(s) see code 7)
 - Esophageal groove
 - Paratracheal - below suprasternal notch
 - Pretracheal - below suprasternal notch
- Other groups
 - Cervical, NOS
 - Deep cervical, NOS
 - Facial
 - Buccinator (buccal)
 - Mandibular
 - Nasolabial
 - Internal jugular, NOS
 - Parapharyngeal
 - Parotid
 - Infraauricular
 - Intraparotid
 - Periparotid
 - Preauricular
 - Retroauricular (mastoid)
 - Retropharyngeal
 - Suboccipital
- Regional lymph node(s), NOS
 - Lymph node(s), NOS

4 Regional by BOTH direct extension AND regional lymph node(s) involved

- Codes (2) + (3)

7 Distant site(s)/lymph node(s) involved

- Distant site(s) (including further contiguous extension)
 - Anterior 2/3 of tongue
 - Bone
 - Carotid artery (encased)
 - Esophagus
 - Extrinsic muscle(s) of tongue
 - Genioglossus
 - Geniohyoid
 - Hyoglossus
 - Mylohyoid
 - Palatoglossus
 - Styloglossus
 - Mandible
 - Mediastinal structure(s)
 - Oropharynx, NOS
 - Parotid gland
 - Prevertebral space
 - Skin
 - Soft tissues of neck
 - Strap muscle(s)
 - Omohyoid
 - Sternohyoid
 - Sternothyroid
 - Thyrohyoid
 - Thyroid cartilage (inner cortex, outer cortex, NOS)
 - Thyroid gland
 - Trachea
- Distant lymph node(s), NOS
 - Mediastinal (excluding superior mediastinal node(s), Level VII)
- Distant metastasis, NOS
 - Carcinomatosis
 - Distant metastasis WITH or WITHOUT distant lymph node(s)

9 Unknown if extension or metastasis

LARYNX GLOTTIC

8000-8700, 9700-9701

C320

C320 Glottis

Note 1: The following sources were used in the development of this chapter

- SEER Extent of Disease 1988: Codes and Coding Instructions (3rd Edition, 1998) (<https://seer.cancer.gov/archive/manuals/EOD10Dig.3rd.pdf>)
- SEER Summary Staging Manual-2000: Codes and Coding Instructions (<https://seer.cancer.gov/tools/ssm/>)
- Collaborative Stage Data Collection System, version 02.05: <https://cancerstaging.org/cstage/Pages/default.aspx>
- Chapter 13 *Larynx*, in the AJCC Cancer Staging Manual, Eighth Edition (2017) published by Springer International Publishing. Used with permission of the American College of Surgeons, Chicago, Illinois.

Note 2: See the following chapters for the listed histologies

- 8710-8714, 8800-8934, 8940-9137, 9141-9582: *Soft Tissue*
- 8720-8790: *Melanoma Head and Neck*
- 8935-8936: *GIST*
- 9140: *Kaposi Sarcoma*

Note 3: Impaired vocal cord mobility, also described as vocal cord paresis, may suggest invasion of intrinsic laryngeal muscle. Fixation of the vocal cord may be described as immobility of the arytenoids noted on endoscopy, vocal cord paralysis, or deviation of larynx to fixed side.

Note 4: Code 1 for localized tumor only if no information is available to identify further extension.

SUMMARY STAGE

0 In situ: noninvasive, intraepithelial

1 Localized only (localized, NOS)

- Confined to glottis, NOS
- Limited to larynx WITH or WITHOUT vocal cord fixation
 - Intrinsic larynx
 - Laryngeal commissure(s) (anterior, posterior)
 - One or both vocal cord(s) involved WITH or WITHOUT normal vocal cord mobility
 - Vocal cord(s) (true cord(s), true vocal cord(s), NOS)

- Adjacent region(s) of larynx involved
 - Intrinsic muscle(s) of larynx
 - Aryepiglottic
 - Arytenoid
 - Cricoarytenoid
 - Cricothyroid
 - Thyroarytenoid
 - Thyroepiglottic
 - Vocalis
 - Subglottis
 - Supraglottis
 - Aryepiglottic fold
 - Arytenoid cartilage
 - Corniculate tubercle
 - Cuneiform tubercle
 - Ventricular bands (false vocal cord(s))

2 Regional by direct extension only

- Base of tongue
- Hypopharynx, NOS
- Paraglottic space
- Postcricoid area
- Pre-epiglottic space
- Pre-epiglottic tissues
- Piriform sinus (piriform fossa)
- Thyroid cartilage (inner cortex)
- Vallecula

3 Regional lymph node(s) involved only

- Level I
 - Level IA - Submental
 - Level IB - Submandibular (submaxillary), sublingual
- Level II - Upper jugular
 - Jugulodigastric (subdigastric)
 - Upper deep cervical
 - Level IIA - Anterior
 - Level IIB - Posterior
- Level III - Middle jugular
 - Middle deep cervical
- Level IV - Lower jugular
 - Jugulo-omohyoid (supraomohyoid)
 - Lower deep cervical

- Virchow node
- Level V - Posterior triangle group
 - Posterior cervical
 - Level VA - Spinal accessory
 - Level VB - Transverse cervical, supraclavicular
- Level VI - Anterior compartment group
 - Laterotracheal
 - Paralaryngeal
 - Paratracheal - above suprasternal notch
 - Perithyroidal
 - Precricoid (Delphian)
 - Prelaryngeal
 - Pretracheal - above suprasternal notch
 - Recurrent laryngeal
- Level VII - Superior mediastinal group (for other mediastinal node(s) see code 7)
 - Esophageal groove
 - Paratracheal - below suprasternal notch
 - Pretracheal - below suprasternal notch
- Other groups
 - Cervical, NOS
 - Deep cervical, NOS
 - Facial
 - Buccinator (buccal)
 - Mandibular
 - Nasolabial
 - Internal jugular, NOS
 - Parapharyngeal
 - Parotid
 - Infraauricular
 - Intraparotid
 - Periparotid
 - Preauricular
 - Retroauricular (mastoid)
 - Retropharyngeal
 - Suboccipital
- Regional lymph node(s), NOS
 - Lymph node(s), NOS

4 Regional by BOTH direct extension AND regional lymph node(s) involved

- Codes (2) + (3)

7 Distant site(s)/lymph node(s) involved

- Distant site(s) (including further contiguous extension)
 - Carotid artery (encased)
 - Cricoid cartilage
 - Esophagus
 - Extrinsic muscle(s) of tongue
 - Genioglossus
 - Geniohyoid
 - Hyoglossus
 - Mylohyoid
 - Palatoglossus
 - Styloglossus
 - Mediastinal structure(s)
 - Oropharynx, NOS
 - Prevertebral space
 - Skin
 - Soft tissues of neck
 - Strap muscle(s)
 - Omohyoid
 - Sternohyoid
 - Sternothyroid
 - Thyrohyoid
 - Thyroid cartilage (outer cortex, NOS)
 - Thyroid gland
 - Trachea
- Distant lymph node(s), NOS
 - Mediastinal (excluding superior mediastinal node(s), Level VII)
- Distant metastasis, NOS
 - Carcinomatosis
 - Distant metastasis WITH or WITHOUT distant lymph node(s)

9 Unknown if extension or metastasis

LARYNX SUBGLOTTIC

8000-8700, 9700-9701

C322

C322 Subglottis

Note 1: The following sources were used in the development of this chapter

- SEER Extent of Disease 1988: Codes and Coding Instructions (3rd Edition, 1998) (<https://seer.cancer.gov/archive/manuals/EOD10Dig.3rd.pdf>)
- SEER Summary Staging Manual-2000: Codes and Coding Instructions (<https://seer.cancer.gov/tools/ssm/>)
- Collaborative Stage Data Collection System, version 02.05: <https://cancerstaging.org/cstage/Pages/default.aspx>
- Chapter 13 *Larynx*, in the AJCC Cancer Staging Manual, Eighth Edition (2017) published by Springer International Publishing. Used with permission of the American College of Surgeons, Chicago, Illinois.

Note 2: See the following chapters for the listed histologies

- 8710-8714, 8800-8934, 8940-9137, 9141-9582: *Soft Tissue*
- 8720-8790: *Melanoma Head and Neck*
- 8935-8936: *GIST*
- 9140: *Kaposi Sarcoma*

Note 3: Impaired vocal cord mobility, also described as vocal cord paresis, may suggest invasion of intrinsic laryngeal muscle. Fixation of the vocal cord may be described as immobility of the arytenoids noted on endoscopy, vocal cord paralysis, or deviation of larynx to fixed side.

Note 4: Code 1 for localized tumor only if no information is available to identify further extension.

Note 5: Tumor limited to the larynx (code 1) includes tumor involving, but limited to, the supraglottis, glottis and subglottis.

SUMMARY STAGE

0 In situ: noninvasive, intraepithelial

1 Localized only (localized, NOS)

- Confined to subglottis
- Inner cortex of the thyroid cartilage
- Involvement adjacent region(s) of larynx WITH normal or impaired mobility
 - Glottis

- Supraglottis
- Limited to larynx with vocal cord fixation
- Paraglottic space

2 Regional by direct extension only

- Base of tongue
- Hypopharynx, NOS
- Postcricoid area
- Pre-epiglottic tissues
- Pyriform sinus (pyriform fossa)
- Vallecula

3 Regional lymph node(s) involved only

- Level I
 - Level IA - Submental
 - Level IB - Submandibular (submaxillary), sublingual
- Level II - Upper jugular
 - Jugulodigastric (subdigastric)
 - Upper deep cervical
 - Level IIA - Anterior
 - Level IIB - Posterior
- Level III - Middle jugular
 - Middle deep cervical
- Level IV - Lower jugular
 - Jugulo-omohyoid (supraomohyoid)
 - Lower deep cervical
 - Virchow node
- Level V - Posterior triangle group
 - Posterior cervical
 - Level VA - Spinal accessory
 - Level VB - Transverse cervical, supraclavicular
- Level VI - Anterior compartment group
 - Laterotracheal
 - Paralaryngeal
 - Paratracheal - above suprasternal notch
 - Perithyroidal
 - Precricoid (Delphian)
 - Prelaryngeal
 - Pretracheal - above suprasternal notch
 - Recurrent laryngeal
- Level VII - Superior mediastinal group (for other mediastinal node(s) see code 7)
 - Esophageal groove

- Paratracheal - below suprasternal notch
- Pretracheal - below suprasternal notch
- Other groups
 - Cervical, NOS
 - Deep cervical, NOS
 - Facial
 - Buccinator (buccal)
 - Mandibular
 - Nasolabial
 - Internal jugular, NOS
 - Parapharyngeal
 - Parotid
 - Infraauricular
 - Intraparotid
 - Periparotid
 - Preauricular
 - Retroauricular (mastoid)
 - Retropharyngeal
 - Suboccipital
- Regional lymph node(s), NOS
 - Lymph node(s), NOS

4 Regional by BOTH direct extension AND regional lymph node(s) involved

- Codes (2) + (3)

7 Distant site(s)/lymph node(s) involved

- Distant site(s) (including further contiguous extension)
 - Carotid artery
 - Cricoid cartilage or thyroid cartilage
 - Esophagus
 - Extrinsic muscles of tongue
 - Genioglossus
 - Geniohyoid
 - Hyoglossus
 - Mylohyoid
 - Palatoglossus
 - Styloglossus
 - Mediastinal structure(s)
 - Oropharynx
 - Prevertebral space
 - Skin
 - Soft tissues of neck

- Strap muscle(s)
 - Omohyoid
 - Sternohyoid
 - Sternothyroid
 - Thyrohyoid
- Thyroid gland
- Trachea
- Distant lymph node(s), NOS
 - Mediastinal (excluding superior mediastinal node(s))
- Distant metastasis, NOS
 - Carcinomatosis
 - Distant metastasis WITH or WITHOUT distant lymph node(s)

9 Unknown if extension or metastasis

LARYNX OTHER

8000-8700, 9700-9701

C323, C328-C329

C323 Laryngeal cartilage

C328 Overlapping lesion of larynx

C329 Larynx, NOS

Note 1: The following sources were used in the development of this chapter

- SEER Extent of Disease 1988: Codes and Coding Instructions (3rd Edition, 1998) (<https://seer.cancer.gov/archive/manuals/EOD10Dig.3rd.pdf>)
- SEER Summary Staging Manual-2000: Codes and Coding Instructions (<https://seer.cancer.gov/tools/ssm/>)
- Collaborative Stage Data Collection System, version 02.05: <https://cancerstaging.org/cstage/Pages/default.aspx>
- Chapter 13 *Larynx*, in the AJCC Cancer Staging Manual, Eighth Edition (2017) published by Springer International Publishing. Used with permission of the American College of Surgeons, Chicago, Illinois.

Note 2: See the following chapters for the listed histologies

- 8710-8714, 8800-8934, 8940-9137, 9141-9582: *Soft Tissue*
- 8720-8790: *Melanoma Head and Neck*
- 8935-8936: *GIST*
- 9140: *Kaposi Sarcoma*

Note 3: Impaired vocal cord mobility, also described as vocal cord paresis, may suggest invasion of intrinsic laryngeal muscle. Fixation of the vocal cord may be described as immobility of the arytenoids noted on endoscopy, vocal cord paralysis, or deviation of larynx to fixed side.

Note 4: Code 1 for localized tumor only if no information is available to identify further extension.

SUMMARY STAGE

0 In situ: noninvasive, intraepithelial

1 Localized only (localized, NOS)

- Confined to larynx, NOS
- Involvement adjacent region(s) of larynx WITH normal or impaired mobility
 - Glottis
 - Supraglottis
- Limited to larynx with vocal cord fixation

2 Regional by direct extension only

- Base of tongue
- Hypopharynx, NOS
- Paraglottic space
- Postcricoid area
- Pre-epiglottic tissues
- Piriform sinus (piriform fossa)
- Thyroid cartilage (inner cortex)
- Vallecula

3 Regional lymph node(s) involved only

- Level I
 - Level IA - Submental
 - Level IB - Submandibular (submaxillary), sublingual
- Level II - Upper jugular
 - Jugulodigastric (subdigastric)
 - Upper deep cervical
 - Level IIA - Anterior
 - Level IIB - Posterior
- Level III - Middle jugular
 - Middle deep cervical
- Level IV - Lower jugular
 - Jugulo-omohyoid (supraomohyoid)
 - Lower deep cervical
 - Virchow node
- Level V - Posterior triangle group
 - Posterior cervical
 - Level VA - Spinal accessory
 - Level VB - Transverse cervical, supraclavicular
- Level VI - Anterior compartment group
 - Laterotracheal
 - Paralaryngeal
 - Paratracheal - above suprasternal notch
 - Perithyroidal
 - Precricoid (Delphian)
 - Prelaryngeal
 - Pretracheal - above suprasternal notch
 - Recurrent laryngeal
- Level VII - Superior mediastinal group (for other mediastinal node(s) see code 7)
 - Esophageal groove
 - Paratracheal - below suprasternal notch
 - Pretracheal - below suprasternal notch
- Other groups

- Cervical, NOS
- Deep cervical, NOS
- Facial
 - Buccinator (buccal)
 - Mandibular
 - Nasolabial
- Internal jugular, NOS
- Parapharyngeal
- Parotid
 - Infraauricular
 - Intraparotid
 - Periparotid
 - Preauricular
- Retroauricular (mastoid)
- Retropharyngeal
- Suboccipital
- Regional lymph node(s), NOS
 - Lymph node(s), NOS

4 Regional by BOTH direct extension AND regional lymph node(s) involved

- Codes (2) + (3)

7 Distant site(s)/lymph node(s) involved

- Distant site(s) (including further contiguous extension)
 - Carotid artery (encased)
 - Cricoid cartilage
 - Esophagus
 - Extrinsic muscle(s) of tongue
 - Genioglossus
 - Geniohyoid
 - Hyoglossus
 - Mylohyoid
 - Palatoglossus
 - Styloglossus
 - Mediastinal structure(s)
 - Oropharynx
 - Prevertebral space
 - Skin
 - Soft tissues of neck
 - Strap muscle(s)
 - Omohyoid
 - Sternohyoid

- Sternothyroid
 - Thyrohyoid
- Thyroid cartilage (outer cortex, NOS)
- Thyroid gland
- Trachea
- Distant lymph node(s), NOS
 - Mediastinal (excluding superior mediastinal node(s))
- Distant metastasis, NOS
 - Carcinomatosis
 - Distant metastasis WITH or WITHOUT distant lymph node(s)

9 Unknown if extension or metastasis

MELANOMA HEAD AND NECK (8720-8790)

8720-8790 (C003-C005, C008-C069, C090-C148, C300-C329)

Note 1: The following sources were used in the development of this chapter

- SEER Extent of Disease 1988: Codes and Coding Instructions (3rd Edition, 1998) (<https://seer.cancer.gov/archive/manuals/EOD10Dig.3rd.pdf>)
- SEER Summary Staging Manual-2000: Codes and Coding Instructions (<https://seer.cancer.gov/tools/ssm/>)
- Collaborative Stage Data Collection System, version 02.05: <https://cancerstaging.org/cstage/Pages/default.aspx>
- Chapter 14 *Mucosal Melanoma of the Head and Neck*, in the AJCC Cancer Staging Manual, Eighth Edition (2017) published by Springer International Publishing. Used with permission of the American College of Surgeons, Chicago, Illinois.

Note 2: Mucosal melanomas occur throughout the mucosa of the lip and oral cavity (C003-C005, C008-C069, C090-C148) and the nasal cavity and middle ear (C300-C301), accessory sinuses (C310-C319) and the larynx (C320-C329). For a more detailed description of anatomy, refer to the appropriate Summary Stage 2018 chapter based on the location of the mucosal melanoma.

Note 3: Code 1 for localized tumors when no other information is available or for extension involving the mucosa only of adjacent sites.

Note 4: Extension involving the deeper tissues of the primary or adjacent sites are either regional or distant, depending on the involvement.

- Code 2 for regional when the only information available is “deep tissue involvement.”

Note 5: The description of lymph nodes has been standardized across the head and neck chapters. Levels I-VII and the “other” lymph nodes are regional (code 3).

SUMMARY STAGE

0 In situ: noninvasive, intraepithelial

1 Localized only (localized, NOS)

- Confined to site of origin, NOS
- Mucosa WITH or WITHOUT soft tissue (immediately underlying)

2 Regional by direct extension only

- Deep soft tissue involvement
- Moderately advanced disease, NOS
- Overlying skin

3 Regional lymph node(s) involved only

- Level I
 - Level IA - Submental
 - Level IB - Submandibular (submaxillary), sublingual
- Level II - Upper jugular
 - Jugulodigastric (subdigastric)
 - Upper deep cervical
 - Level IIA - Anterior
 - Level IIB - Posterior
- Level III - Middle jugular
 - Middle deep cervical
- Level IV - Lower jugular
 - Jugulo-omohyoid (supraomohyoid)
 - Lower deep cervical
 - Virchow node
- Level V - Posterior triangle group
 - Posterior cervical
 - Level VA - Spinal accessory
 - Level VB - Transverse cervical, supraclavicular
- Level VI - Anterior compartment group
 - Laterotracheal
 - Paralaryngeal
 - Paratracheal - above suprasternal notch
 - Perithyroidal
 - Precricoid (Delphian)
 - Prelaryngeal
 - Pretracheal - above suprasternal notch
 - Recurrent laryngeal
- Level VII - Superior mediastinal group (for other mediastinal node(s) see code 7)
 - Esophageal groove
 - Paratracheal - below suprasternal notch
 - Pretracheal - below suprasternal notch
- Other groups
 - Cervical, NOS
 - Deep cervical, NOS
 - Facial
 - Buccinator (buccal)
 - Mandibular

- Nasolabial
 - Internal jugular, NOS
 - Parapharyngeal
 - Parotid
 - Infraauricular
 - Intraparotid
 - Periparotid
 - Preauricular
 - Retroauricular (mastoid)
 - Retropharyngeal
 - Suboccipital
- Regional lymph node(s), NOS
 - Lymph node(s), NOS

4 Regional by BOTH direct extension AND regional lymph node(s) involved

- Codes (2) + (3)

7 Distant site(s)/lymph node(s) involved

- Distant site(s) (including further contiguous extension)
 - Bone
 - Brain
 - Cartilage
 - Carotid artery
 - Deep extrinsic muscle of tongue
 - Genioglossus
 - Hyoglossus
 - Palatoglossus
 - Styloglossus
 - Dura
 - Lower cranial nerves (IX, X, XI, XII)
 - Masticator space
 - Mediastinal structures
 - Prevertebral space
 - Skull base
 - Very advanced disease, NOS
- Distant lymph node(s), NOS
 - Mediastinal (excluding superior mediastinal node(s))
- Distant metastasis, NOS
 - Carcinomatosis
 - Distant metastasis WITH or WITHOUT distant lymph node(s)

9 Unknown if extension or metastasis

DIGESTIVE AND HEPATOBILIARY SYSTEMS

DIGESTIVE SYSTEM SITES

Below is information about the subsites of the colon

- The *ascending colon*, measuring 15 to 20 cm, begins with the *cecum*, a 6 to 9 cm pouch that arises at the proximal segment of the right colon at the end of the terminal ileum. It is covered with a visceral peritoneum (serosa) and measures 15 to 20 cm. The ascending colon ends at the *hepatic flexure*, which transitions the ascending colon into the *transverse colon*, passing just inferior to the liver and anterior to the duodenum.
- The *transverse colon*, measuring 18 to 22 cm long, is completely intraperitoneal and supported on a mesentery that is attached to the pancreas. Anteriorly the serosa is continuous with the gastrocolic ligament. The transverse colon ends at the *splenic flexure*, which transitions into the *descending colon*.
- The *descending colon*, measuring 10 to 15 cm long, passes inferiorly to the spleen and anterior to the tail of the pancreas. The posterior aspect lacks serosa and is in direct contact with the retroperitoneum.
- The *sigmoid colon*, measuring 15 to 20 cm long, is completely intraperitoneal with a mesentery that develops at the medial border of the left psoas major muscle and extends to the *rectum*. The transition from the sigmoid colon to the rectum is marked by the fusion of the taenia of the sigmoid colon to the circumferential muscle of the rectum.
- The *rectum*, measuring 12 to 16 cm, is covered by peritoneum in front and on both sides.

TABLE OF ANATOMIC STRUCTURES

PRIMARY SITE	ICD-O	MUCOSA: -Epithelium -Lamina Propria -Muscularis	SUB- MUCOSA	MUSCU- LARIS	SUB- SEROSAL TISSUE	SUB- SEROSA	OUTSIDE THE SEROSA
ESOPHAGUS	C15_	Yes	Yes	Yes	See note 4	No	See note 4
STOMACH	C16_	Yes	Yes	Yes	No	Yes	Greater and lesser omentum
SMALL INTESTINE	C17_	Yes	Yes	Yes	No	Yes	Mesentery of small intestine
COLON	C18_	Yes	Yes	Yes			
CECUM	C180	Yes	Yes	Yes	Yes	Yes	
APPENDIX	C181	Yes	Yes	Yes	Yes	Yes	
ASCENDING	C182	Yes	Yes	Yes	No	See note 5	
HEPATIC FLEXURE	C183	Yes	Yes	Yes	Yes	Yes	Mesenteric or pericolic fat
TRANSVERSE	C184	Yes	Yes	Yes	Yes	Yes	

PRIMARY SITE	ICD-O	MUCOSA: -Epithelium -Lamina Propria -Muscularis	SUB- MUCOSA	MUSCU- LARIS	SUB- SEROSAL TISSUE	SUB- SEROSEA	OUTSIDE THE SEROSA
SPLNIC FLEXURE	C185	Yes	Yes	Yes	Yes	Yes	
DESCENDING	C186	Yes	Yes	Yes	No	See note 5	
SIGMOID	C187	Yes	Yes	Yes	Yes	Yes	
OVERLAPPING	C188	Yes	Yes	Yes		Yes	
COLON, NOS	C189	Yes	Yes	Yes			
RECTO- SIGMOID	C199	Yes	Yes	Yes	Yes	Yes	Mesenteric or pericolic perirectal fat
RECTUM	C209	Yes	Yes	Yes	No	No	See note 6

1 Subserosal tissues include fat and flesh between the muscularis and the serosa.

2 Serosa is also called mesothelium and visceral peritoneum. For the stomach and small intestine, serosa is also referred to as tunica serosa. The term “serosa” is sometimes generically used to include both the serosa and the subserosa, and therefore, the clinician should be consulted to determine if the use of “serosa” includes the subserosa also.

3 Mesenteric fat is also called pericolic fat.

4 The tissue outside the muscularis of the esophagus is composed of fibrous connective tissue and referred to as adventitia.

5 Anterior and/or medial aspects, but not lateral.

6 Referred to as perirectal tissue.

DISTINGUISHING “IN SITU” AND “LOCALIZED” TUMORS FOR THE DIGESTIVE SYSTEM

1. Historically, carcinomas described as “confined to mucosa” have been assigned 1 (localized). In order to provide greater specificity and to rule out the possibility of classifying noninvasive tumors in this category, abstractors should determine
 - a. If the tumor is confined to the epithelium, in which case it is in situ, OR
 - b. If the tumor has penetrated the basement membrane to invade the lamina propria, in which case it is localized and assigned Summary Stage 1 (localized) for invasion of the lamina propria
 - Exception:** Code 0 (behavior code 2) includes cancer cells confined within the glandular basement membrane (intraepithelial); includes in situ plus intramucosal carcinoma (involvement of the lamina propria and may involve but not penetrate through the muscularis mucosa) (penetration through the muscularis mucosa is behavior code 3.)
2. The layers of the digestive tract consist of
 - a. The **EPITHELIAL LAYER** borders on the lumen. It contains no blood vessels or lymphatics
 - b. The **BASEMENT MEMBRANE**, a sheet of extracellular material, functions as a filtration barrier and a boundary involved in generating and maintaining tissue structure
 - c. The **LAMINA PROPRIA**, composed of areolar connective tissue, contains blood vessels, nerves, and, in some regions, glands. Once tumor has broken through the basement membrane into the lamina propria, it can spread by way of the lymphatics and blood vessels to other parts of the body
 - d. The **MUSCULARIS MUCOSAE** is a thin layer of smooth muscle fibers. It is found in the wall of the digestive tract from the esophagus to the anal canal
 - e. The **SUBMUCOSA** is a thick layer of either dense or areolar connective tissue. It contains blood vessels, lymphatic vessels, nerves, and, in some regions, glands
 - f. The **MUSCULARIS PROPRIA** is a double layer of muscle tissue in most of the digestive tract; it constitutes the wall of the organ.
 - g. The **SEROSA**, the outermost layer covering most of the digestive tract, is a single layer of squamous epithelial cells, part of the visceral peritoneum.
 - h. The **SUBSEROA** is inside the serosa (mesothelium), and sometimes part of the serosa. The serosa and subserosa are present only in the peritonealized portions of the digestive tract.
 - i. For the esophagus and in the rectum below the peritoneal reflection, there is no serosa
 - ii. For the esophagus, the connective tissue of surrounding structures merges with the connective tissue of the esophagus and is called **ADVENTITIA**.

ESOPHAGUS

C150-C155, C158-C159 (8000-8700, 8720-8790, 9700-9701)

C160 and Schema Discriminator 1: EsophagusGEJunction (EGJ)/Stomach: 2 (8000-8149, 8154, 8157, 8160-8231, 8243-8248, 8250-8682, 8690-8700, 8720-8790, 9700-9701)

C150-C155, C158-C160

C150 Cervical esophagus

C151 Thoracic esophagus

C152 Abdominal esophagus

C153 Upper third of esophagus

C154 Middle third of esophagus

C155 Lower third of esophagus

C158 Overlapping lesion of esophagus

C159 Esophagus, NOS

C160 Cardia, esophagogastric junction (EGJ)

Note 1: The following sources were used in the development of this chapter

- SEER Extent of Disease 1988: Codes and Coding Instructions (3rd Edition, 1998) (<https://seer.cancer.gov/archive/manuals/EOD10Dig.3rd.pdf>)
- SEER Summary Staging Manual-2000: Codes and Coding Instructions (<https://seer.cancer.gov/tools/ssm/>)
- Collaborative Stage Data Collection System, version 02.05: <https://cancerstaging.org/cstage/Pages/default.aspx>
- Chapter 16 *Esophagus and Esophagogastric Junction*, in the AJCC Cancer Staging Manual, Eighth Edition (2017) published by Springer International Publishing. Used with permission of the American College of Surgeons, Chicago, Illinois.

Note 2: See the following chapters for the listed histologies

- 8710-8714, 8800-8934, 8940-9137, 9141-9582: *Soft Tissue*
- 8935-8936: *GIST*
- 9140: *Kaposi Sarcoma*

Note 3: Cancers involving the EGJ that have their epicenter within the proximal 2 cm of the cardia (Siewert types I/II) are to be staged as esophageal cancers (see the Esophagus (excluding GIST) chapter). Cancers whose epicenter is more than 2 cm distal from the EGJ, even if the EGJ is involved, will be staged using the stomach cancer chapter.

- The Schema Discriminator *EsophagusGEJunction (EGJ)/Stomach* is used to discriminate between EsophagusGEJunction and Stomach which are coded to ICD-O-3 code C160

Note 4: Non-invasive carcinomas in the esophagus formerly called in situ are now called high grade dysplasia. High grade dysplasia and severe dysplasia are generally not reportable in cancer registries.

- Code 0 if your registry collects these tumors

SUMMARY STAGE

0 In situ, intraepithelial, non-invasive; high-grade dysplasia

- (Adeno)carcinoma, noninvasive, in a polyp

1 Localized only (localized, NOS)

- Confined to esophagus, NOS
- Extension through wall, NOS
- Invasion of
 - Intramucosa, NOS
 - Lamina propria
 - Mucosa, NOS
 - Muscularis mucosae
 - Muscularis, NOS
 - Muscularis propria
 - Submucosa (superficial invasion)
- Perimuscular tissue invaded
- Subserosal tissue/(sub)serosal fat invaded

2 Regional by direct extension only

- All sites
 - Adjacent structure(s), NOS
 - Adventitia and/or soft tissue invaded
 - Aorta
 - Azygos vein
 - Diaphragm (excluding abdominal/lower esophagus, see code 7)
 - Esophagus is described as "FIXED"
 - Extension to adjacent (connective) tissue WITHOUT perforation of visceral peritoneum covering these structures
 - Gastric artery
 - Ligaments
 - Gastrocolic
 - Gastrohepatic
 - Gastrosplenic
 - Omentum (greater, lesser, NOS)

- Mesothelium
- Pericardium (excluding thoracic/middle esophagus, see code 7)
- Perigastric fat
- Peritoneum, NOS
- Pleura (excluding cervical/upper esophagus, see code 7)
- Serosa (invasion of/or through)
- Tunica serosa
- Vertebral body
- Visceral peritoneum (including perforation)
- Cervical esophagus
 - Blood vessel(s)
 - Carotid artery
 - Subclavian artery
 - Carina
 - Cervical vertebra(e)
 - Hypopharynx
 - Jugular vein
 - Larynx
 - Thyroid
 - Trachea
- Intrathoracic, upper or mid-portion, esophagus
 - Blood vessel(s), major
 - Gastric artery/vein
 - Pulmonary artery/vein
 - Vena cava
 - Carina
 - Stomach, cardia (via serosa)
 - Trachea
- Intrathoracic, lower portion (abdominal), esophagus
 - Blood vessel(s)
 - Vena cava
- Intrathoracic esophagus (all portions)
 - Adjacent rib(s)
 - Lung via bronchus
 - Mediastinal structure(s), NOS
 - Thoracic vertebra(e)
- Esophagus GE Junction
 - Liver
 - Pancreas
 - Small intestine (duodenum [via serosa], ileum, jejunum)
 - Spleen
 - Transverse colon (including flexures)

3 Regional lymph node(s) involved only

- All subsites
 - Nodule(s) in perigastric fat
 - Peri-/paraesophageal (8L, 8M) (excluding GE junction)
 - Regional lymph node(s), NOS
 - Lymph node(s), NOS
- Cervical esophagus only
 - Cervical, NOS
 - Anterior deep cervical (laterotracheal) (recurrent laryngeal)
 - Deep cervical, NOS
 - Internal jugular, NOS
 - Jugulodigastric (subdigastric)
 - Upper, NOS
 - Scalene (inferior deep cervical) (1)
 - Supraclavicular (transverse cervical) (1)
- Intrathoracic esophagus, upper or middle, only
 - Internal jugular, NOS
 - Deep cervical, NOS
 - Jugulodigastric (subdigastric)
 - Jugulo-omohyoid (supraomohyoid)
 - Lower, NOS
 - Middle
 - Upper cervical, NOS
 - Intra-bronchial
 - Carinal (tracheobronchial) (10R, 10L) (tracheal bifurcation)
 - Hilar (bronchopulmonary) (proximal lobar) (pulmonary root)
 - Left gastric (superior gastric) (17)
 - Cardiac (cardial)
 - Lesser curvature
 - Perigastric, NOS
 - Peritracheal
 - Posterior mediastinal (tracheoesophageal)
 - Superior mediastinal
- Intrathoracic esophagus, lower (abdominal) only
 - Left gastric (superior gastric) (17)
 - Cardiac (cardial)
 - Lesser curvature
 - Perigastric, NOS
 - Posterior mediastinal (3P) (tracheoesophageal)
- Esophagus GE Junction
 - Celiac (20)
 - Hepatic (excluding gastrohepatic and hepatoduodenal)
 - Left gastric (superior gastric), NOS
 - Cardiac
 - Cardioesophageal

- Gastric, left (17)
 - Gastropancreatic, left
 - Lesser curvature
 - Lesser omental
 - Pericardial (16)
- Pancreaticosplenic (pancreaticolineal)
- Pancreatoduodenal
- Perigastric, NOS
- Peripancreatic
- Right gastric (inferior gastric), NOS
 - Gastrocolic
 - Gastroduodenal
 - Gastroepiploic (gastro-omental), right or NOS
 - Gastrohepatic
 - Greater curvature
 - Greater omental
 - Pyloric, NOS
 - Infrapyloric (subpyloric)
 - Suprapyloric
- Splenic (lienal), NOS
 - Gastroepiploic (gastro-omental), left
 - Splenic hilar

4 Regional by BOTH direct extension AND regional lymph node(s) involved

- Codes (2) + (3)

7 Distant site(s)/lymph node(s) involved

- Distant site(s) (including further contiguous extension)
 - All subsites
 - Airway
 - Stated as unresectable, NOS
 - Vertebral body
 - Abdomen/lower esophagus
 - Diaphragm fixed
 - Cervical/upper esophagus
 - Lung
 - Pleura
 - Mainstem bronchus
 - Thoracic/middle esophagus
 - Pericardium
 - Esophagus GE Junction

- Abdominal wall
 - Adrenal (suprarenal) gland
 - Kidney
 - Pulmonary ligament (9)
 - Retroperitoneum
 - Trachea
- Distant lymph node(s), NOS
 - All subsites
 - Anterior mediastinal (6)
 - Common hepatic (18)
 - Diaphragmatic (15)
 - Mediastinal, NOS
 - Splenic (19)
 - Subcarinal (tracheal carina) (7)
 - Cervical esophagus
 - Aortopulmonary (5)
 - Para-aortic (ascending aorta or phrenic)
 - Subaortic
 - Paratracheal (2R, 2L, 4R, 4L)
 - Posterior mediastinal (3P)
 - Superior mediastinal
 - Intrathoracic esophagus, upper or middle, only
 - Aortopulmonary (5)
 - Para-aortic (ascending aorta or phrenic)
 - Cervical
 - Lower thoracic (abdominal) esophagus
 - Aortopulmonary (5)
 - Para-aortic (ascending aorta or phrenic)
 - Subaortic
 - Celiac (20)
 - Paratracheal (2R, 2L, 4R, 4L)
 - Superior mediastinal
 - Esophagus GE Junction
 - Hepatoduodenal
 - Mesenteric, NOS
 - Inferior mesenteric
 - Superior mesenteric
 - Para-aortic
 - Paraesophageal, NOS
 - Periesophageal, NOS
 - Anterior mediastinal (6)
 - Aortopulmonary (5)
 - Paraesophageal, lower (8l)
 - Paraesophageal, middle (8m)
 - Paratracheal, lower (4L, 4R)
 - Paratracheal, upper (2L, 2R)

- Posterior mediastinal (3p)
 - Supraclavicular (1)
 - Tracheobronchial (hilar) (10L, 10R)
- Porta hepatis (portal) (hilar) (in hilus of liver)
- Retropancreatic
- Retroperitoneal
- Distant metastasis, NOS
 - Carcinomatosis
 - Distant metastasis WITH or WITHOUT distant lymph node(s)

9 Unknown if extension or metastasis

STOMACH

C160 and Schema Discriminator 1: EsophagusGEJunction (EGJ)/Stomach: 0, 3, 9 (8000-8149, 8154, 8157, 8160-8231, 8243-8248, 8250-8682, 8690-8700, 8720-8790, 9700-9701)

All Other sites: 8000-8149, 8154, 8157, 8160-8231, 8243-8248, 8250-8682, 8690-8700, 8720-8790, 9700-9701

All sites: 8150-8153, 8155-8156, 8158, 8240-8242, 8249, 8683

C160-C166, C168-C169

C160 Cardia of stomach

C161 Fundus of stomach

C162 Body of stomach

C163 Gastric antrum

C164 Pylorus

C165 Lesser curvature of stomach, NOS

C166 Greater curvature of stomach, NOS

C168 Overlapping lesion of stomach

C169 Stomach, NOS

Note 1: The following sources were used in the development of this chapter

- SEER Extent of Disease 1988: Codes and Coding Instructions (3rd Edition, 1998) (<https://seer.cancer.gov/archive/manuals/EOD10Dig.3rd.pdf>)
- SEER Summary Staging Manual-2000: Codes and Coding Instructions (<https://seer.cancer.gov/tools/ssm/>)
- Collaborative Stage Data Collection System, version 02.05: <https://cancerstaging.org/cstage/Pages/default.aspx>
- Chapter 17 *Stomach*, in the AJCC Cancer Staging Manual, Eighth Edition (2017) published by Springer International Publishing. Used with permission of the American College of Surgeons, Chicago, Illinois.
- Chapter 29 *Neuroendocrine Tumors of the Stomach*, in the AJCC Cancer Staging Manual, Eighth Edition (2017) published by Springer International Publishing. Used with permission of the American College of Surgeons, Chicago, Illinois.

Note 2: See the following chapters for the listed histologies

- C160 and Schema Discriminator 1: EsophagusGEJunction (EGJ)/Stomach: 2 (8000-8149, 8154, 8157, 8160-8231, 8243-8248, 8250-8682, 8690-8700, 8720-8790, 9700-9701): *Esophagus*
- 8710-8714, 8800-8934, 8940-9137, 9141-9582: *Soft Tissue*
- 8935-8936: *GIST*
- 9140: *Kaposi Sarcoma*

Note 3: If a tumor involves the esophagogastric junction (EGJ) and its epicenter is less than or equal to 2 cm into the proximal stomach (i.e. less than or equal to 2 cm distal to the EGJ), use the esophageal cancer chapter for summary stage (see the Esophagus (excluding GIST) chapter). Tumors involving the EGJ with their epicenter >2 cm into the proximal stomach (i.e., >2cm distal to the EGJ) are now classified using the stomach chapter. Cardia cancers that do not invade the EGJ should be classified based on the stomach cancer chapter for summary stage.

- Schema Discriminator 1: EsophagusGEJunction (EGJ)/Stomach is used to discriminate between EsophagusGEjunction and Stomach which are coded to ICD-O-3 code C160.

SUMMARY STAGE

0 In situ, intraepithelial, noninvasive

- (Adeno)carcinoma, noninvasive, in a polyp

1 Localized only (localized, NOS)

- Confined to stomach, NOS
- Extension through wall, NOS
- Implants within stomach
- Intraluminal spread to esophagus or duodenum
- Invasion of
 - Intramucosa, NOS
 - Lamina propria
 - Mucosa, NOS
 - Muscularis mucosae
 - Muscularis, NOS
 - Muscularis propria
 - Submucosa (superficial, NOS)
- Linitis plastica (diffuse involvement of the entire stomach wall)
- Perimuscular tissue invaded
- Polyp (head, stalk, NOS)
- Subserosal tissue/(sub)serosal fat

2 Regional by direct extension only

- Adjacent (connective) tissue, NOS
- Colon/mesocolon (including transverse and flexures)
- Diaphragm
- Duodenum (via serosa)
- Esophagus (via serosa)
- Gastric artery
- Ileum

- Jejunum
- Ligaments
 - Gastrocolic
 - Gastrohepatic
 - Gastrosplenic
- Liver
- Mesothelium
- Omentum (greater, lesser, NOS)
- Pancreas
- Perigastric fat
- Serosa
- Small intestine, NOS
- Spleen
- Tunica serosa
- Visceral peritoneum

3 Regional lymph node(s) involved only

- Celiac artery
- Common hepatic artery
- Hepatic, NOS
- Left gastric (superior gastric), NOS
 - Cardial, NOS
 - Cardioesophageal
 - Gastric artery
 - Gastric, left
 - Gastrohepatic
 - Gastropancreatic, left
 - Lesser curvature
 - Lesser omentum
 - Paracardial
- Pancreaticosplenic (pancreaticolineal)
- Perigastric, NOS
- Peripancreatic
- Pyloric, NOS
 - Infrapyloric (subpyloric)
 - Suprapyloric
- Right gastric (inferior gastric, NOS)
 - Gastrocolic
 - Gastroduodenal
 - Gastroepiploic (gastro-omental), right or NOS
 - Gastrohepatic
 - Greater curvature
 - Greater omentum
 - Pancreaticoduodenal

- Splenic (lineal), NOS
 - Gastroepiploic (gastro-omental), left
 - Splenic hilar/hilum
- Nodule(s) in perigastric fat
- Regional lymph node(s), NOS
 - Lymph node(s), NOS

4 Regional by BOTH direct extension AND regional lymph node(s) involved

- Codes (2) + (3)

7 Distant site(s)/lymph node(s) involved

- Distant site(s) (including further contiguous extension)
 - Abdominal wall
 - Adrenal (suprarenal) gland
 - Aorta
 - Celiac axis
 - Kidney
 - Retroperitoneum
- Distant lymph node(s), NOS
 - Hepatoduodenal (along the proper hepatic artery, including portal)
 - Intra-abdominal
 - Mesenteric (inferior, superior, NOS)
 - Middle colic
 - Pancreaticoduodenal (all subsites EXCEPT greater curvature)
 - Para-aortic
 - Porta hepatic (portal) (hilar) (in hilus of liver)
 - Retropancreatic
 - Retroperitoneal
- Distant metastasis, NOS
 - Carcinomatosis
 - Krukenberg tumor (metastasis to ovary(ies))
 - Malignant (positive) peritoneal cytology
 - Distant metastasis WITH or WITHOUT distant lymph node(s)

9 Unknown if extension or metastasis

SMALL INTESTINE

8000-8700, 8720-8790, 9700-9701

C170-C173, C178-C179

C170 Duodenum

C171 Jejunum

C172 Ileum (excluding ileocecal valve C18.0)

C173 Meckel diverticulum (site of neoplasm)

C178 Overlapping lesion of small intestine

C179 Small intestine, NOS

Note 1: The following sources were used in the development of this chapter

- SEER Extent of Disease 1988: Codes and Coding Instructions (3rd Edition, 1998) (<https://seer.cancer.gov/archive/manuals/EOD10Dig.3rd.pdf>)
- SEER Summary Staging Manual-2000: Codes and Coding Instructions (<https://seer.cancer.gov/tools/ssm/>)
- Collaborative Stage Data Collection System, version 02.05: <https://cancerstaging.org/cstage/Pages/default.aspx>
- Chapter 18 *Small Intestine*, in the AJCC Cancer Staging Manual, Eighth Edition (2017) published by Springer International Publishing. Used with permission of the American College of Surgeons, Chicago, Illinois.
- Chapter 30 *Neuroendocrine Tumors of the Duodenum and Ampulla of Vater*, in the AJCC Cancer Staging Manual, Eighth Edition (2017) published by Springer International Publishing. Used with permission of the American College of Surgeons, Chicago, Illinois.
- Chapter 31 *Neuroendocrine Tumors of the Jejunum and Ileum*, in the AJCC Cancer Staging Manual, Eighth Edition (2017) published by Springer International Publishing. Used with permission of the American College of Surgeons, Chicago, Illinois.

Note 2: See the following chapters for the listed histologies

- 8710-8714, 8800-8934, 8940-9137, 9141-9582: *Soft Tissue*
- 8935-8936: *GIST*
- 9140: *Kaposi Sarcoma*

SUMMARY STAGE

0 In situ, intraepithelial, noninvasive

- (Adeno)carcinoma, noninvasive, in a polyp or adenoma

1 Localized only (localized, NOS)

- Confined to small intestine, NOS
- Extension through wall, NOS
- Intraluminal spread to other segments of small intestine or cecum
- Invasion of
 - Intramucosa, NOS
 - Lamina propria
 - Mucosa, NOS
 - Muscularis mucosae
 - Muscularis, NOS
 - Muscularis propria
 - Submucosa (superficial invasion)
- Polyp (head, stalk, NOS)
- Subserosal tissue/(sub)serosal fat invaded
- Transmural, NOS
- Wall, NOS

2 Regional by direct extension only

- All sites
 - Abdominal wall (via serosa)
 - Adjacent organ(s)/structure(s)
 - Adjacent tissue(s) (connective), NOS
 - Fat, NOS
 - Mesenteric fat
 - Mesentery (adjacent loops of bowel)
 - Mesothelium
 - Nonperitonealized perimuscular tissue
 - Other loops of small intestine
 - Other segments of small intestine (via serosa)
 - Retroperitoneum
 - Serosa
 - Tunica serosa
 - Visceral peritoneum
- Duodenum (C170)
 - Ampulla of Vater
 - Blood vessel(s), major
 - Aorta
 - Gastroduodenal artery
 - Portal vein
 - Renal vein
 - Superior mesenteric artery or vein
 - Vena cava
 - Diaphragm

- Extrahepatic bile duct(s)
- Gallbladder
- Hepatic flexure
- Kidney (right or NOS)
- Liver (quadrate lobe, right lobe or NOS)
- Omentum
- Pancreas (pancreatic duct)
- Stomach
- Transverse colon
- Ureter, right
- Jejunum and Ileum (C171, C172)
 - Colon including appendix

3 Regional lymph node(s) involved only

- All sites
 - Regional lymph node(s), NOS
 - Lymph node(s), NOS
- Duodenum (C170)
 - Duodenal
 - Gastroduodenal
 - Hepatic
 - Pancreaticoduodenal (inferior)
 - Pericholodochal (common bile duct)
 - Pyloric (infrapyloric, subpyloric, NOS)
 - Retropancreatic
 - Superior mesenteric
- Jejunum and ileum (C171, C172)
 - Cecal (anterior, posterior, retrocecal) (terminal ileum only)
 - Ileocecal (ileocolic) (terminal ileum only)
 - Mesenteric, NOS
 - Superior mesenteric

4 Regional by BOTH direct extension AND regional lymph node(s) involved

- Codes (2) + (3)

7 Distant site(s)/lymph node(s) involved

- Distant site(s) (including further contiguous extension)
 - Jejunum and Ileum (C171, C172)
 - Bladder
 - Fallopian tube(s)

- Ovary(ies)
 - Uterus
- Distant lymph node(s), NOS
 - Celiac
 - Pericholedochal (jejunum and ileum only)
- Distant metastasis, NOS
 - Carcinomatosis
 - Distant metastasis WITH or WITHOUT distant lymph node(s)

9 Unknown if extension or metastasis

APPENDIX

8000-8700, 8720-8790, 9700-9701

C181

C181 Appendix

Note 1: The following sources were used in the development of this chapter

- SEER Extent of Disease 1988: Codes and Coding Instructions (3rd Edition, 1998) (<https://seer.cancer.gov/archive/manuals/EOD10Dig.3rd.pdf>)
- SEER Summary Staging Manual-2000: Codes and Coding Instructions (<https://seer.cancer.gov/tools/ssm/>)
- Collaborative Stage Data Collection System, version 02.05: <https://cancerstaging.org/cstage/Pages/default.aspx>
- Chapter 19 *Appendix – Carcinoma*, in the AJCC Cancer Staging Manual, Eighth Edition (2017) published by Springer International Publishing. Used with permission of the American College of Surgeons, Chicago, Illinois.
- Chapter 32 *Neuroendocrine Tumors of the Appendix*, in the AJCC Cancer Staging Manual, Eighth Edition (2017) published by Springer International Publishing. Used with permission of the American College of Surgeons, Chicago, Illinois.

Note 2: See the following chapters for the listed histologies

- 8710-8714, 8800-8934, 8940-9137, 9141-9582: *Soft Tissue*
- 8935-8936: *GIST*
- 9140: *Kaposi Sarcoma*

SUMMARY STAGE

0 In situ, intraepithelial, noninvasive

- Acellular mucin or mucinous epithelium may invade into the muscularis propria
- (Adeno) carcinoma, noninvasive, in a polyp or adenoma
- Low-grade appendiceal mucinous neoplasm confined by the muscularis propria (LAMN)

1 Localized only (localized, NOS)

- Confined to appendix, NOS
- Confined to polyp, NOS
- Extension through wall, NOS
- Invasion through muscularis propria
- Lamina propria
- Mucosa (intramucosal, NOS)
- Muscularis mucosae

- Non-peritonealized pericolic tissues invaded
- Perimuscular tissue invaded
- Submucosa
- Subserosa
- Transmural, NOS
- Wall, NOS

2 Regional by direct extension only

- Abdominal wall
- Adherent to other organs or structures
- Adjacent tissue(s), NOS
- Connective tissue
- Fat, NOS
- Greater omentum
- Mesenteric fat
- Mesentery
- Mesoappendix
- Pericolic fat
- Retroperitoneum
- Serosa (mesothelium) (visceral peritoneum)
- Small intestine
- Tumor found in adhesion(s) if microscopic examination performed

3 Regional lymph node(s) involved only

- Tumor deposits (TD) in subserosa or mesentery WITHOUT regional lymph node metastases
- Cecal
 - Anterior (prececal)
 - Posterior (retrocecal)
 - Right colic
- Colic, NOS
- Epicolic (adjacent to bowel wall)
- Ileocolic
- Mesenteric, NOS
- Mesocolic, NOS
- Paracolic/pericolic
- Regional lymph node(s), NOS
 - Lymph node(s), NOS

4 Regional by BOTH direct extension AND regional lymph node(s) involved

- Codes (2) + (3)

7 Distant site(s)/lymph node(s) involved

- Distant site(s) (including further contiguous extension)
 - Adrenal (suprarenal) gland
 - Bladder
 - Diaphragm
 - Fallopian tube
 - Fistula to skin
 - Gallbladder
 - Intraperitoneal spread/peritoneal metastasis
 - Kidney
 - Liver
 - Other segment(s) of colon/rectum via serosa
 - Ovary
 - Ureter
 - Uterus
- Distant lymph node(s), NOS
 - Inferior mesenteric
 - Superior mesenteric
- Distant metastasis, NOS
 - Carcinomatosis
 - Distant metastasis WITH or WITHOUT distant lymph node(s)

9 Unknown if extension or metastasis

COLON AND RECTUM

8000-8700, 8720-8790, 9700-9701

C180, C182-C189, C199, C209

C180 Cecum

C182 Ascending colon

C183 Hepatic flexure of colon

C184 Transverse colon

C185 Splenic flexure of colon

C186 Descending colon

C187 Sigmoid colon

C188 Overlapping lesion of colon

C189 Colon, NOS

C199 Rectosigmoid junction

C209 Rectum, NOS

Note 1: The following sources were used in the development of this chapter

- SEER Extent of Disease 1988: Codes and Coding Instructions (3rd Edition, 1998) (<https://seer.cancer.gov/archive/manuals/EOD10Dig.3rd.pdf>)
- SEER Summary Staging Manual-2000: Codes and Coding Instructions (<https://seer.cancer.gov/tools/ssm/>)
- Collaborative Stage Data Collection System, version 02.05: <https://cancerstaging.org/cstage/Pages/default.aspx>
- Chapter 20 *Colon and Rectum*, in the AJCC Cancer Staging Manual, Eighth Edition (2017) published by Springer International Publishing. Used with permission of the American College of Surgeons, Chicago, Illinois.
- Chapter 33 *Neuroendocrine Tumors of the Colon and Rectum*, in the AJCC Cancer Staging Manual, Eighth Edition (2017) published by Springer International Publishing. Used with permission of the American College of Surgeons, Chicago, Illinois.

Note 2: See the following chapters for the listed histologies

- 8710-8714, 8800-8934, 8940-9137, 9141-9582: *Soft Tissue*
- 8935-8936: *GIST*
- 9140: *Kaposi Sarcoma*

Note 3: Code 0 (behavior code 2) includes cancer cells confined within the glandular basement membrane (intraepithelial), or described as in situ.

Note 4: For the following, AJCC 8th edition stages these as in situ tumors. SS2018 stages these as localized (behavior code 3)

- Intramucosal, NOS
- Lamina propria

- Mucosa, NOS
- Confined to, but not through muscularis mucosa

Note 5: Ignore intraluminal extension to adjacent segment(s) of colon/rectum or to the ileum from the cecum; code depth of invasion or extracolonic spread as indicated.

Note 6: Invasion into "pericolonic/ pericorectal tissue" can be either Localized or Regional, depending on the primary site. Some sites are entirely peritonealized; some sites are only partially peritonealized or have no peritoneum. Localized may not be used for sites that are entirely peritonealized (cecum, transverse colon, sigmoid colon, rectosigmoid colon, upper third of rectum).

- Localized
 - Invasion through muscularis propria or muscularis, NOS
 - Non-peritonealized pericolic/perirectal tissues invaded [Ascending Colon/Descending Colon/Hepatic Flexure/Splenic Flexure: Posterior surface; Middle third of rectum: Anterior surface; Lower third of rectum]
 - Subserosal tissue/(sub)serosal fat invaded
- Regional
 - Mesentery
 - Pericolic/Perirectal fat
 - Peritonealized pericolic/perirectal tissues invaded [Ascending Colon/Descending Colon/Hepatic Flexure/Splenic Flexure: anterior and lateral surfaces; Cecum; Sigmoid Colon; Transverse Colon; Rectosigmoid; Rectum: middle third anterior surface]
- If the pathologist does not further describe the “pericolic/perirectal tissues” as either “non-peritonealized pericolic/perirectal tissues” vs “peritonealized pericolic/perirectal tissues” fat and the gross description does not describe the tumor relation to the serosa/peritoneal surface, and it cannot be determined whether the tumor arises in a peritonealized portion of the colon, code Localized.

Note 7: Tumor that is adherent to other organs or structures, macroscopically, is coded as regional (code 2) or distant (code 7). However, if no tumor is present in the adhesion, microscopically, the classification should be coded to localized (code 1) or regional (code 2).

Note 8: Tumors characterized by involvement of the serosal surface (visceral peritoneum) by direct extension or perforation in which the tumor cells are continuous with the serosal surface through inflammation are coded to regional (code 2).

SUMMARY STAGE

0 In situ, intraepithelial, noninvasive

1 Localized only (localized, NOS)

- Confined to colon, rectum, rectosigmoid, NOS
- Extension through wall, NOS
- Intraluminal extension to colon and/or anal canal/anus (rectum only)
- Invasion of
 - Intramucosal, NOS
 - Lamina propria
 - Mucosa, NOS
 - Muscularis mucosae
 - Muscularis, NOS
 - Muscularis propria
 - Submucosa (superficial invasion)
- Non-peritonealized pericolic tissues invaded (see Regional for peritonealized pericolic/perirectal tissues invaded. See Note 6)
- Pericolic/perirectal tissues invaded, NOS (unknown whether non-peritonealized or peritonealized. See Note 6)
- Perimuscular tissue invaded
- Polyp (head, stalk, NOS)
- Subserosal tissue/(sub)serosal fat invaded
- Transmural, NOS
- Wall, NOS

2 Regional by direct extension only

- All sites
 - Abdominal wall
 - Adherent to other organs or structures clinically with no microscopic examination
 - Adjacent (connective) tissue(s), NOS
 - Fat, NOS
 - Mesentery (including mesenteric fat, mesocolon)
 - Mesothelium
 - Pericolic fat
 - Perirectal fat
 - Peritonealized pericolic/perirectal tissues invaded (see Localized for non-peritonealized pericolic/perirectal tissues invaded. See Note 6)
 - Retroperitoneum (excluding fat)
 - Serosa
 - Small intestine
 - Tumor found in adhesion(s) if microscopic examination performed
 - Tunica serosa
 - Visceral peritoneum
- Cecum (C180)
 - Greater omentum
- Ascending colon (C182)

- Kidney, right
- Liver, right lobe
- Retroperitoneal fat
- Ureter, right
- Transverse colon and flexures (C183, C184, C185)
 - Bile ducts
 - Gallbladder
 - Gastrocolic ligament
 - Greater omentum
 - Kidney
 - Liver
 - Pancreas
 - Spleen
 - Stomach
- Descending colon (C186)
 - Kidney, left
 - Pelvic wall
 - Retroperitoneal fat
 - Spleen
 - Ureter, left
- Sigmoid colon (C187)
 - Pelvic wall
- Rectosigmoid (C199)
 - Cul de sac (rectouterine pouch)
 - Pelvic wall
 - Small intestine
- Rectum (C209)
 - Anus
 - Bladder (males only)
 - Cul de sac (rectouterine pouch)
 - Ductus deferens
 - Pelvic wall
 - Prostate
 - Rectovaginal septum
 - Rectovesical fat (males only)
 - Seminal vesicle(s)
 - Skeletal muscles of pelvic floor
 - Vagina

3 Regional lymph node(s) involved only

- All sites
 - Colic, NOS
 - Epicolic (adjacent to bowel wall)
 - Mesenteric, NOS

- Mesocolic, NOS
- Paracolic
- Pericolic
- Tumor deposits (TD) in the subserosa, mesentery, mesorectal or nonperitonealized pericolic or perirectal tissues WITHOUT regional nodal metastasis
- Regional lymph node(s), NOS
 - Lymph node(s), NOS
- Cecum (C180)
 - Cecal, NOS
 - Anterior cecal (prececal)
 - Posterior cecal (retrocecal)
 - Colic (right)
 - Ileocolic
 - Periappendiceal
- Ascending colon (C182)
 - Colic (middle-right branch, right)
 - Ileocolic
- Hepatic flexure (C183)
 - Colic (middle, right)
 - Ileocolic
- Transverse colon (C184)
 - Colic (middle)
- Splenic flexure (C185)
 - Colic (left, middle)
 - Mesenteric (inferior)
- Descending colon (C186)
 - Colic (left)
 - Mesenteric (inferior)
 - Sigmoid
- Sigmoid colon (C187)
 - Colic (left)
 - Mesenteric (inferior)
 - Rectal (superior) (hemorrhoidal)
 - Rectosigmoid
 - Sigmoid (sigmoidal) (sigmoid mesenteric)
 - Superior rectal (hemorrhoidal)
- Rectosigmoid (C199)
 - Hemorrhoidal (middle, superior)
 - Mesenteric (inferior)
 - Mesorectal
 - Pericolic
 - Perirectal
 - Rectal (middle, superior)
 - Sigmoid (mesenteric)
- Rectum (C209)

- Hemorrhoidal (middle, superior)
- Iliac (hypogastric, internal, obturator) (see code 7 for common, external, NOS)
- Mesenteric (inferior)
- Mesorectal
- Perirectal
- Rectal (inferior)
- Sacral, NOS
 - Lateral sacral (laterosacral)
 - Middle sacral (promontorial) (Gerota's node)
 - Presacral
- Sigmoidal (sigmoid mesenteric)

4 Regional by BOTH direct extension AND regional lymph node(s) involved

- Codes (2) + (3)

7 Distant site(s)/lymph node(s) involved

- Distant site(s) (including further contiguous extension)
 - All sites
 - Adrenal (suprarenal) gland
 - Bladder
 - Diaphragm
 - Fallopian tube
 - Fistula to skin
 - Gallbladder
 - Other segment(s) of colon via serosa
 - Ovary(ies)
 - Uterus
 - Cecum (C180)
 - Kidney, right
 - Liver
 - Ureter, right
 - Transverse colon and flexures (C183-C185)
 - Ureter
 - Sigmoid colon (C187)
 - Cul de sac (rectouterine pouch)
 - Ureter
 - Rectosigmoid (C199)
 - Bladder
 - Colon via serosa
 - Fallopian tube
 - Ovary
 - Prostate

- Skeletal muscles of pelvic floor
 - Ureter
 - Vagina
 - Rectum (C209)
 - Bladder (for females only)
 - Bone(s) of pelvis
 - Cervix
 - Perineum, perianal skin
 - Sacral plexus
 - Sacrum
 - Ureter
 - Urethra
 - Uterus
- Distant lymph node(s), NOS
 - Colon
 - Iliac (common, external, hypogastric, internal, obturator, NOS)
 - Inferior mesenteric (cecum, ascending colon, hepatic flexure, transverse colon)
 - Para-aortic
 - Retroperitoneal
 - Superior mesenteric
 - Rectosigmoid
 - Hemorrhoidal, inferior (rectosigmoid)
 - Iliac (common, external, hypogastric, internal, obturator, NOS)
 - Rectal, inferior
 - Superior mesenteric
 - Rectum
 - Colic (left) (rectum)
 - Iliac (common, external, NOS) (see code 3 for hypogastric, internal, obturator)
 - Superior mesenteric
- Distant metastasis, NOS
 - Carcinomatosis
 - Peritoneal surface metastasis (peritoneum)
 - Distant metastasis WITH or WITHOUT distant lymph node(s)

9 Unknown if extension or metastasis

ANUS

8000-8700, 8720-8790, 9700-9701

C210-C212, C218

C210 Anus, NOS (excluding skin of anus and perianal skin C445)

C211 Anal canal

C212 Cloacogenic zone

C218 Overlapping lesion of rectum, anus and anal canal

Note 1: The following sources were used in the development of this chapter

- SEER Extent of Disease 1988: Codes and Coding Instructions (3rd Edition, 1998) (<https://seer.cancer.gov/archive/manuals/EOD10Dig.3rd.pdf>)
- SEER Summary Staging Manual-2000: Codes and Coding Instructions (<https://seer.cancer.gov/tools/ssm/>)
- Collaborative Stage Data Collection System, version 02.05: <https://cancerstaging.org/cstage/Pages/default.aspx>
- Chapter 21 *Anus*, in the AJCC Cancer Staging Manual, Eighth Edition (2017) published by Springer International Publishing. Used with permission of the American College of Surgeons, Chicago, Illinois.

Note 2: See the following chapters for the listed histologies

- 8710-8714, 8800-8803, 8810-8921, 8932-8934, 8940-8990, 9000-9016, 9030-9043, 9045-9137, 9141-9230, 9240-9580, 9582: *Soft Tissue Abdomen and Thoracic*
- 8804-8806, 8930-8931, 8991, 9020, 9044, 9231, 9581: *Soft Tissue Other*
- 8935-8936: *GIST*
- 9140: *Kaposi Sarcoma*

SUMMARY STAGE

0 In situ, intraepithelial, noninvasive

- Anal intraepithelial neoplasia III
- Bowen disease

1 Localized only (localized, NOS)

- Confined to anus, NOS
- Incidental finding of malignancy in hemorrhoid, NOS
- Intramucosa
- Lamina propria
- Mucosa, NOS
- Muscularis mucosae
- Muscularis propria (internal sphincter)
- Submucosa (superficial invasion)

2 Regional by direct extension only

- Ischiorectal fat/tissue
- Perianal skin
- Perineum
- Perirectal skin
- Rectal mucosa or submucosa
- Rectal wall
- Skeletal muscle(s)
 - Anal sphincter (external)
 - Levator ani
- Subcutaneous perianal tissue
- Vulva

3 Regional lymph node(s) involved only

- Anorectal
- External iliac
- Inferior hemorrhoidal
- Inguinal (femoral) (deep, superficial)
- Internal iliac (hypogastric)
- Lateral sacral (laterosacral)
- Mesorectal
- Obturator
- Perirectal
- Superior rectal (hemorrhoidal) (femoral)
- Regional lymph node(s), NOS
 - Lymph node(s), NOS

4 Regional by BOTH direct extension AND regional lymph node(s) involved

- Codes (2) + (3)

7 Distant site(s)/lymph node(s) involved

- Distant site(s) (including further contiguous extension)
 - Bladder
 - Broad ligament(s)
 - Cervix uteri
 - Corpus uteri
 - Pelvic peritoneum
 - Prostate
 - Urethra

- Vagina
- Distant lymph node(s), NOS
- Distant metastasis, NOS
 - Carcinomatosis
 - Distant metastases WITH or WITHOUT distant lymph node(s)

9 Unknown if extension or metastasis

LIVER

8000-8700, 8720-8790, 9700-9701

C220

C220 Liver

Note 1: The following sources were used in the development of this chapter

- SEER Extent of Disease 1988: Codes and Coding Instructions (3rd Edition, 1998) (<https://seer.cancer.gov/archive/manuals/EOD10Dig.3rd.pdf>)
- SEER Summary Staging Manual-2000: Codes and Coding Instructions (<https://seer.cancer.gov/tools/ssm/>)
- Collaborative Stage Data Collection System, version 02.05: <https://cancerstaging.org/cstage/Pages/default.aspx>
- Chapter 22 *Liver*, in the AJCC Cancer Staging Manual, Eighth Edition (2017) published by Springer International Publishing. Used with permission of the American College of Surgeons, Chicago, Illinois.

Note 2: See the following chapters for the listed histologies

- 8710-8714, 8800-8934, 8940-9137, 9141-9582: *Soft Tissue*
- 8935-8936: *GIST*
- 9140: *Kaposi Sarcoma*

SUMMARY STAGE

0 In situ: noninvasive, intraepithelial

1 Localized only (localized, NOS)

- Confined to liver, NOS
- Single tumor (one lobe)
 - WITHOUT or UNKNOWN vascular invasion
- Multiple (satellite) nodules/tumors (one lobe)
 - WITHOUT or UNKNOWN vascular invasion

2 Regional by direct extension only

- Diaphragm
- Extrahepatic bile duct(s)
- Extrahepatic blood vessel(s)
 - Hepatic artery
 - Portal vein
 - Vena cava

- Gallbladder
- Lesser omentum
- Ligament(s)
 - Coronary
 - Falciform
 - Hepatoduodenal
 - Hepatogastric
 - Round (of liver)
 - Triangular
- Peritoneum, NOS
 - Parietal
 - Visceral
- Major vascular invasion, NOS
- More than one lobe involved by contiguous growth (single lesion)
 - WITH or WITHOUT vascular invasion
- Multiple (satellite) nodules/ tumors in more than one lobe of liver or on surface of parenchyma
 - WITH or WITHOUT vascular invasion
- Single lesion (one lobe) WITH vascular invasion

3 Regional lymph node(s) involved only

- Caval
- Hepatic, NOS
 - Hepatic artery
 - Hepatic pedicle
 - Inferior vena cava
 - Porta hepatis (portal) (hilar) [in hilus of liver]Hepatoduodenal ligament
- Periportal
- Portal vein
- Regional lymph node(s), NOS
 - Lymph node(s), NOS

4 Regional by BOTH direct extension AND regional lymph node(s) involved

- Codes (2) + (3)

7 Distant site(s)/lymph node(s) involved

- Distant site(s) (including further contiguous extension)
 - Pancreas
 - Pleura
 - Stomach

- Distant lymph node(s), NOS
 - Aortic (para-aortic, periaortic)
 - Cardiac
 - Coronary artery
 - Diaphragmatic, NOS
 - Inferior phrenic nodes
 - Lateral (aortic) (lumbar)
 - Pericardial (pericardiac)
 - Peripancreatic (near head of pancreas only)
 - Posterior mediastinal (tracheoesophageal) including juxtaphrenic nodes
 - Renal artery
 - Retroperitoneal, NOS
- Distant metastasis, NOS
 - Carcinomatosis
 - Distant metastasis WITH or WITHOUT distant lymph node(s)

9 Unknown if extension or metastasis

INTRAHEPATIC BILE DUCTS

8000-8700, 8720-8790, 8980, 9700-9701

C221

C221 Intrahepatic bile duct

Note 1: The following sources were used in the development of this chapter

- SEER Extent of Disease 1988: Codes and Coding Instructions (3rd Edition, 1998) (<https://seer.cancer.gov/archive/manuals/EOD10Dig.3rd.pdf>)
- SEER Summary Staging Manual-2000: Codes and Coding Instructions (<https://seer.cancer.gov/tools/ssm/>)
- Collaborative Stage Data Collection System, version 02.05: <https://cancerstaging.org/cstage/Pages/default.aspx>
- Chapter 23 *Intrahepatic Bile Ducts*, in the AJCC Cancer Staging Manual, Eighth Edition (2017) published by Springer International Publishing. Used with permission of the American College of Surgeons, Chicago, Illinois.

Note 2: See the following chapters for the listed histologies

- 8710-8714, 8800-8934, 8940-8975, 8981-9137, 9141-9582: *Soft Tissue*
- 8935-8936: *GIST*
- 9140: *Kaposi Sarcoma*

Note 3: Intrahepatic vascular invasion (code 1) includes the following

- Major hepatic vessel invasion
 - First and second-order branches of the portal veins or hepatic arteries
- Hepatic veins (right, middle, or left)
- Microscopic invasion of smaller intraparenchymal vascular structures (identified on histopathological examination)

SUMMARY STAGE

0 In situ, intraepithelial, noninvasive

- Biliary intraepithelial neoplasia grade 3 (BiIIN-3)
- Intraductal tumor

1 Localized only (localized, NOS)

- Confined to intrahepatic bile duct, NOS
- Solitary or Multiple tumors WITH or WITHOUT intrahepatic vascular invasion

2 Regional by direct extension only

- Abdominal wall
- Adjacent (connective) tissue, NOS
- Colon
- Common bile duct
- Diaphragm
- Duodenum
- Extrahepatic bile ducts PLUS satellite nodules in more than one lobe
- Extrahepatic structure(s), NOS
 - Retrohepatic vena cava
 - Vena cava
- Hepatic artery (proper)
- Gallbladder
- Lesser omentum ligament(s)
 - Coronary
 - Falciform
 - Hepatoduodenal
 - Hepatogastric
 - Round (of liver)
 - Triangular
- Peritoneum, NOS
 - Parietal
 - Visceral
- Multiple tumors with major vascular invasion
- Retrohepatic vena cava

3 Regional lymph node(s) involved only

- Common bile duct
- Cystic duct
- Hepatic, NOS
- Hepatic artery
- Hepatic pedicle
- Hepatoduodenal ligament
- Hilar
- Portal vein
 - Periportal
 - Porta hepatis
 - Portal
- Portocaval (portacaval)
- Regional lymph node(s), NOS
 - Lymph node(s), NOS

4 Regional by BOTH direct extension AND regional lymph node(s) involved

- Codes (2) + (3)

7 Distant site(s)/lymph node(s) involved

- Distant site(s) (including further contiguous extension)
 - Multiple (satellite) nodules on surface of liver parenchyma
 - Pancreas
 - Pleura
 - Stomach
- Distant lymph node(s), NOS
 - Aortic (para-aortic, periaortic)
 - Aortocaval
 - Cardiac
 - Caval (inferior vena cava)
 - Celiac
 - Diaphragmatic, NOS
 - Gastrohepatic
 - Inferior phrenic
 - Lateral (aortic) (lumbar)
 - Pancreaticoduodenal
 - Pericardial (pericardiac)
 - Periduodenal
 - Peripancreatic
 - Posterior mediastinal (tracheoesophageal) including juxtaphrenic nodes
 - Renal artery
 - Retroperitoneal, NOS
- Distant metastasis, NOS
 - Carcinomatosis
 - Distant metastasis WITH or WITHOUT distant lymph node(s)

9 Unknown if extension or metastasis

GALLBLADDER

8000-8700, 8720-8790, 9700-9701

C239

C239 Gallbladder

Note 1: The following sources were used in the development of this chapter

- SEER Extent of Disease 1988: Codes and Coding Instructions (3rd Edition, 1998) (<https://seer.cancer.gov/archive/manuals/EOD10Dig.3rd.pdf>)
- SEER Summary Staging Manual-2000: Codes and Coding Instructions (<https://seer.cancer.gov/tools/ssm/>)
- Collaborative Stage Data Collection System, version 02.05: <https://cancerstaging.org/cstage/Pages/default.aspx>
- Chapter 24 *Gallbladder*, in the AJCC Cancer Staging Manual, Eighth Edition (2017) published by Springer International Publishing. Used with permission of the American College of Surgeons, Chicago, Illinois.

Note 2: See the following chapters for the listed histologies

- 8710-8714, 8800-8934, 8940-9137, 9141-9582: *Soft Tissue*
- 8935-8936: *GIST*
- 9140: *Kaposi Sarcoma*

SUMMARY STAGE

0 In situ: noninvasive, intraepithelial

1 Localized only (localized, NOS)

- Confined to gallbladder, NOS
- Lamina propria
- Mucosa, NOS
- Muscularis propria (layer)
- Submucosa (superficial invasion)

2 Regional by direct extension only

- Ampulla of Vater
- Branch(es) of hepatic artery (right or left)
- Branch(es) of portal vein (right or left)
- Duodenum
- Extrahepatic bile duct(s)
- Liver, less than or equal to 2 cm OR distance not stated

- Omentum (greater, lesser, NOS)
- Pancreas
- Perimuscular connective tissue (peritoneal and hepatic side)
- Serosa (visceral peritoneum)
- Small intestine, NOS

3 Regional lymph node(s) involved only

- Celiac artery
- Cystic duct (Calot's node)
- Hepatic artery
- Node of foramen of Winslow (omental) (epiploic)
- Pancreaticoduodenal
- Pericholedochal (common bile duct)
- Periduodenal
- Peripancreatic (near head of pancreas only)
- Porta hepatis (portal) (periportal) (hilar) (in hilus of liver)
- Portal vein
- Retroperitoneal, NOS
- Superior mesenteric
- Regional lymph node(s), NOS
 - Lymph node(s), NOS

4 Regional by BOTH direct extension AND regional lymph node(s) involved

- Codes (2) + (3)

7 Distant site(s)/lymph node(s) involved

- Distant site(s) (including further contiguous extension)
 - Abdominal wall
 - Colon
 - Cystic artery/vein
 - Diaphragm
 - Hepatic artery (common, NOS)
 - Liver, greater than 2 cm
 - Portal vein (main, NOS)
 - Stomach
 - Two or more extrahepatic organs or structures
- Distant lymph node(s), NOS
 - Para-aortic
 - Pericaval
 - Peripancreatic (along body and tail of pancreas only)

- Distant metastasis, NOS
 - Carcinomatosis
 - Distant metastasis WITH or WITHOUT distant lymph node(s)

9 Unknown if extension or metastasis

EXTRAHEPATIC BILE DUCTS

8000-8700, 8720-8790, 9700-9701

C240

C240 Cystic duct

C240 Distal bile ducts

C240 Perihilar bile ducts

Note 1: The following sources were used in the development of this chapter

- SEER Extent of Disease 1988: Codes and Coding Instructions (3rd Edition, 1998) (<https://seer.cancer.gov/archive/manuals/EOD10Dig.3rd.pdf>)
- SEER Summary Staging Manual-2000: Codes and Coding Instructions (<https://seer.cancer.gov/tools/ssm/>)
- Collaborative Stage Data Collection System, version 02.05: <https://cancerstaging.org/cstage/Pages/default.aspx>
- Chapter 24 *Gallbladder*, in the AJCC Cancer Staging Manual, Eighth Edition (2017) published by Springer International Publishing. Used with permission of the American College of Surgeons, Chicago, Illinois.
- Chapter 25 *Perihilar Bile Ducts*, in the AJCC Cancer Staging Manual, Eighth Edition (2017) published by Springer International Publishing. Used with permission of the American College of Surgeons, Chicago, Illinois.
- Chapter 26 *Distal Bile Duct*, in the AJCC Cancer Staging Manual, Eighth Edition (2017) published by Springer International Publishing. Used with permission of the American College of Surgeons, Chicago, Illinois.

Note 2: See the following chapters for the listed histologies

- 8710-8714, 8800-8934, 8940-9137, 9141-9582: *Soft Tissue*
- 8935-8936: *GIST*
- 9140: *Kaposi Sarcoma*

SUMMARY STAGE

0 In situ, intraepithelial, noninvasive

High-grade biliary intraepithelial neoplasia (BilIn-3)

1 Localized only (localized, NOS)

- Confined to
 - Cystic duct, NOS
 - Distal bile duct(s), NOS
 - Extrahepatic bile duct(s), NOS

- Perihilar bile duct(s), NOS
- Lamina propria
- Mucosa, NOS
- Muscle layer of fibrous tissue (bile ducts perihilar only)
- Muscularis propria
- Subepithelial connective tissue (tunica mucosa) (bile ducts perihilar only)
- Submucosa (superficial invasion)

2 Regional by direct extension only

- All sites
 - Adipose tissue
 - Adjacent (connective) tissue, NOS
 - Colon
 - Duodenum
 - Gallbladder
 - Hepatic artery (common, NOS)
 - Liver
 - Main portal vein or its branches bilaterally
 - Omentum (greater, lesser, NOS)
 - Pancreas
 - Periductal/fibromuscular connective tissue
 - Portal vein, NOS
 - Stomach
- Cystic duct
 - Ampulla of Vater
 - Beyond wall of cystic duct
 - Perimuscular connective tissue
 - Perimuscular tissue, NOS
 - Serosa (visceral peritoneum)
 - Small intestine
 - Unilateral branches of hepatic artery (right or left)
 - Unilateral branches of portal vein (right or left)
- Distal bile duct(s)
 - Adipose tissue
 - Adjacent hepatic parenchyma
 - Beyond wall of bile duct
 - Porta hepatis
 - Unilateral branches of hepatic artery (right or left)
 - Unilateral branches of portal vein (right or left)
- Perihilar bile duct(s)
 - Beyond wall of bile duct
 - Second-order biliary radicals bilaterally
 - Unilateral second-order biliary radicals
 - WITH contralateral portal vein or hepatic artery involvement

- Unilateral branches of hepatic artery (right or left)
- Unilateral branches of portal vein (right or left)

3 Regional lymph node(s) involved only

- Adipose tissue
- Adjacent (connective) tissue, NOS
- Choledochal (bile ducts perihilar only)
- Cystic duct (node of the neck of the gallbladder) (Calot's node)
- Hepatic/hepatic artery nodes (common, NOS)
- Hilar (porta hepatic) (portal) (in hilus of liver)
- Node of the foramen of Winslow (omental) (epiploic)
- Pancreaticoduodenal (anterior, posterior) (bile ducts distal only)
- Pancreaticoduodenal, NOS (cystic duct only)
- Pericholedochal (node along common bile duct)
- Periduodenal
- Peripancreatic (near head of pancreas only)
- Periportal
- Portal vein
- Regional lymph node(s), NOS
 - Lymph node(s), NOS

4 Regional by BOTH direct extension AND regional lymph node(s) involved

- Codes (2) + (3)

7 Distant site(s)/lymph node(s) involved

- Distant site(s) (including further contiguous extension)
 - Abdominal wall
 - Celiac axis (bile ducts distal only)
 - Superior mesenteric artery (bile ducts distal only)
- Distant lymph node(s), NOS
 - Celiac (axis) artery
 - Para-aortic
 - Periaortic (cystic duct only)
 - Pericaval
 - Peripancreatic (along body and tail of pancreas only)
 - Superior mesenteric artery
 - Superior mesenteric vein
- Distant metastasis, NOS
 - Carcinomatosis
 - Distant metastasis WITH or WITHOUT distant lymph node(s)

9 Unknown if extension or metastasis

AMPULLA OF VATER

8000-8700, 8720-8790, 9700-9701

C241

C241 Ampulla of Vater

Note 1: The following sources were used in the development of this chapter

- SEER Extent of Disease 1988: Codes and Coding Instructions (3rd Edition, 1998) (<https://seer.cancer.gov/archive/manuals/EOD10Dig.3rd.pdf>)
- SEER Summary Staging Manual-2000: Codes and Coding Instructions (<https://seer.cancer.gov/tools/ssm/>)
- Collaborative Stage Data Collection System, version 02.05: <https://cancerstaging.org/cstage/Pages/default.aspx>
- Chapter 27 *Ampulla of Vater*, in the AJCC Cancer Staging Manual, Eighth Edition (2017) published by Springer International Publishing. Used with permission of the American College of Surgeons, Chicago, Illinois.
- Chapter 30 *Neuroendocrine Tumors of the Duodenum and Ampulla of Vater*, in the AJCC Cancer Staging Manual, Eighth Edition (2017) published by Springer International Publishing. Used with permission of the American College of Surgeons, Chicago, Illinois.

Note 2: See the following chapters for the listed histologies

- 8710-8714, 8800-8934, 8940-9137, 9141-9582: *Soft Tissue*
- 8935-8936: *GIST*
- 9140: *Kaposi Sarcoma*

SUMMARY STAGE

0 In situ, intraepithelial, noninvasive

1 Localized only (localized, NOS)

- Ampulla of Vater
- Confined to ampulla, NOS
- Duodenal submucosa
- Perisphincteric invasion (invasion beyond sphincter of Oddi)
- Sphincter of Oddi

2 Regional by direct extension only

- Blood vessel(s) (major)
 - Common hepatic artery
 - Portal vein
 - Superior mesenteric artery
- Celiac axis
- Common bile duct
- Duodenum, NOS
- Extrahepatic bile duct(s)
- Gallbladder
- Hepatic flexure of colon
- Lesser omentum
- Liver including porta hepatis
- Muscularis propria of the duodenum (duodenal wall)
- Pancreas
- Stomach (distal, proximal, NOS)
- Transverse colon

3 Regional lymph node(s) involved only

- Anterior to ampulla of Vater
- Inferior to ampulla of Vater
- Posterior to ampulla of Vater
- Superior to ampulla of Vater
- Celiac
- Hepatic
- Hepatic artery
- Lateral aortic (lumbar)
- Node of foramen of the Winslow (epiploic) (omental)
- Pancreaticoduodenal
- Peripancreatic (excluding nodes at tail of pancreas)
- Periportal (portal vein)
- Proximal mesenteric
- Pyloric (infrapyloric, subpyloric)
- Retroperitoneal
- Superior mesenteric
- Regional lymph node(s), NOS
 - Lymph node(s), NOS

4 Regional by BOTH direct extension AND regional lymph node(s) involved

- Codes (2) + (3)

7 Distant site(s)/lymph node(s) involved

- Distant sites (including further contiguous extension)
 - Peripancreatic soft tissue
- Distant lymph node(s), NOS
 - At tail of pancreas
 - Para-aortic
 - Splenic
- Distant metastasis, NOS
 - Carcinomatosis
 - Distant mets WITH or WITHOUT distant lymph node(s)

9 Unknown if extension or metastasis

BILIARY OTHER

8000-8700, 8720-8790, 9700-9701

C248, C249

C248 Overlapping lesion of biliary tract (neoplasms involving both intrahepatic and extrahepatic bile ducts)

C249 Biliary tract, NOS

Note 1: The following sources were used in the development of this chapter

- SEER Extent of Disease 1988: Codes and Coding Instructions (3rd Edition, 1998) (<https://seer.cancer.gov/archive/manuals/EOD10Dig.3rd.pdf>)
- SEER Summary Staging Manual-2000: Codes and Coding Instructions (<https://seer.cancer.gov/tools/ssm/>)
- Collaborative Stage Data Collection System, version 02.05: <https://cancerstaging.org/cstage/Pages/default.aspx>

Note 2: See the following chapters for the listed histologies

- 8710-8714, 8800-8934, 8940-9137, 9141-9582: *Soft Tissue*
- 8935-8936: *GIST*
- 9140: *Kaposi Sarcoma*

Note 3: Summary Stage is the only applicable staging system for this site/histology/schema.

SUMMARY STAGE

0 In situ, intraepithelial, noninvasive

1 Localized only (localized, NOS)

- Confined to bile duct, NOS
- Lamina propria
- Mucosa, NOS
- Muscularis propria
- Submucosa (superficial invasion)

2 Regional by direct extension only

- Ampulla of Vater
- Beyond wall of bile duct
- Duodenum
- Gallbladder
 - Unilateral branches of the right or left hepatic artery OR portal vein

- Invasion of/through serosa
- Liver, less than or equal to 2 cm or UNKNOWN
- Omentum (greater or lesser)
- Pancreas
- Perimuscular connective tissue
- Small intestine

3 Regional lymph node(s) involved only

- Celiac
- Cystic duct (node of Calot)
- Node of foramen of Winslow (epiploic) (omental)
- Pancreaticoduodenal
- Pericholedochal (common bile duct)
- Periduodenal
- Peripancreatic (near head of pancreas only)
- Porta hepatis (portal) (periportal) (hilar)
- Superior mesenteric
- Regional lymph node(s), NOS
 - Lymph node(s), NOS

4 Regional by BOTH direct extension AND regional lymph node(s) involved

- Codes (2) + (3)

7 Distant site(s)/lymph node(s) involved

- Distant site(s) (including further contiguous extension)
 - Abdominal wall
 - Colon
 - Common hepatic artery
 - Cystic artery/vein
 - Hepatic artery, NOS
 - Liver greater than 2 cm
 - Portal vein or its branches bilaterally
 - Portal vein, NOS
 - Stomach
- Distant lymph node(s), NOS
 - Para-aortic
 - Peripancreatic (along body and tail of pancreas only)
- Distant metastasis, NOS
 - Carcinomatosis
 - Distant metastasis WITH or WITHOUT distant lymph node(s)

9 Unknown if extension or metastasis

PANCREAS

8000-8700, 8720-8790, 8971, 9700-9701

C250-C254, C257-C259

C250 Head of pancreas

C251 Body of pancreas

C252 Tail of pancreas

C253 Pancreatic duct

C254 Islets of Langerhans

C257 Other specified parts of pancreas

C258 Overlapping lesion of pancreas

C259 Pancreas, NOS

Note 1: The following sources were used in the development of this chapter

- SEER Extent of Disease 1988: Codes and Coding Instructions (3rd Edition, 1998) (<https://seer.cancer.gov/archive/manuals/EOD10Dig.3rd.pdf>)
- SEER Summary Staging Manual-2000: Codes and Coding Instructions (<https://seer.cancer.gov/tools/ssm/>)
- Collaborative Stage Data Collection System, version 02.05: <https://cancerstaging.org/cstage/Pages/default.aspx>
- Chapter 28 *Exocrine Pancreas*, in the AJCC Cancer Staging Manual, Eighth Edition (2017) published by Springer International Publishing. Used with permission of the American College of Surgeons, Chicago, Illinois.
- Chapter 34 *Neuroendocrine Tumors of the Pancreas*, in the AJCC Cancer Staging Manual, Eighth Edition (2017) published by Springer International Publishing. Used with permission of the American College of Surgeons, Chicago, Illinois.

Note 2: See the following chapters for the listed histologies

- 8710-8714, 8800-8934, 8940-8970, 8972-9137, 9141-9582: *Soft Tissue*
- 8935-8936: *GIST*
- 9140: *Kaposi Sarcoma*

Note 3: For tumors of the islet cells, determine which subsite of the pancreas is involved and use that primary site code. If the subsite cannot be determined, use the general code for Islets of Langerhans, C254.

Note 4: The terms “abutment,” “abut(s),” “encases,” or “encasement” of the major blood vessels can be interpreted as involvement of these structures.

SUMMARY STAGE

0 In situ, intraepithelial, noninvasive

- High-grade pancreatic intraepithelial neoplasia (PanIn-3)
- Intraductal papillary mucinous neoplasm with high grade dysplasia
- Intraductal tubulopapillary neoplasm with high grade neoplasm
- Mucinous cystic neoplasm with high-grade dysplasia

1 Localized only (localized, NOS)

- Confined to pancreas

2 Regional by direct extension only

- All sites
 - Ampulla of Vater
 - Blood vessel(s) (major)
 - Aortic artery
 - Celiac artery
 - Common hepatic artery
 - Further contiguous extension to other major arteries
 - Portal vein
 - Superior mesenteric artery/vein
 - Duodenum
 - Extrahepatic bile duct(s)
 - Fixation to adjacent structure(s), NOS
 - Peripancreatic tissue, NOS
 - Stomach
- Pancreas Head (C250)
 - Adjacent stomach
 - Blood vessel(s) (major)
 - Gastroduodenal artery
 - Transverse colon, including hepatic flexure
- Pancreas Body Tail (C251, C252)
 - Spleen
 - Splenic artery/vein
 - Splenic flexure

3 Regional lymph node(s) involved only

- All sites
 - Anterior, NOS
 - Common hepatic artery
 - Hepatic, NOS
 - Inferior to head and body of pancreas
 - Lateral aortic (lumbar)
 - Pancreaticoduodenal (anterior, posterior)
 - Peripancreatic, NOS
 - Posterior, NOS
 - Proximal mesentery (anterior, posterior)
 - Retroperitoneal
 - Superior mesenteric
 - Superior to head and body of pancreas
 - Regional lymph node(s), NOS
 - Lymph node(s), NOS
- Pancreas Head (C250)
 - Common bile duct (pericholedochal)
 - Lateral wall (right)
 - Portal vein
 - Pyloric (infrapyloric, retropyloric, subpyloric, suprapyloric)
 - Pyloric, NOS
- Pancreas Body Tail (C251, C252)
 - Gastroepiploic (gastro-omental, left)
 - Pancreaticosplenic (pancreaticolineal)
 - Splenic (artery, hilum, lineal)
 - Suprapancreatic

4 Regional by BOTH direct extension AND regional lymph node(s) involved

- Codes (2) + (3)

7 Distant site(s)/lymph node(s) involved

- Distant site(s) (including further contiguous extension to other organs)
 - All sites
 - Adrenal gland/suprarenal gland
 - Gallbladder
 - Kidney
 - Liver, including porta hepatis
 - Mesenteric fat
 - Mesentery
 - Mesocolon

- Peritoneum
 - Retroperitoneum
 - Small intestine (excluding duodenum)
 - Ureter
- Pancreas Head (C250)
 - Colon (other than transverse colon including hepatic flexure)
 - Omentum
 - Spleen
- Pancreas Body Tail (C251, C252)
 - Colon (other than splenic flexure)
 - Diaphragm
- Distant lymph node(s), NOS
 - Pancreas Head (C250)
 - Celiac
 - Gastroepiploic (gastro-omental), left
 - Pancreaticosplenic (pancreaticolienal)
 - Splenic (lineal), NOS
 - Splenic artery
 - Splenic hilum
 - Suprapancreatic
 - Pancreas Body Tail (C251, C252)
 - Celiac
 - Pericholedochal (common bile duct)
 - Porta hepatic
 - Pyloric (infrapyloric, retropyloric, subpyloric, suprapyloric)
- Distant metastasis, NOS
 - Carcinomatosis
 - Distant metastasis except distant lymph node(s)
 - Seeding of peritoneum, even if limited to the lesser sac region
 - Positive peritoneal cytology

9 Unknown if extension or metastasis

DIGESTIVE OTHER

8000-8700, 8720-8790, 9700-9701

C260, C268, C269

C260 Intestinal tract, NOS

C268 Overlapping lesion of digestive system

C269 Gastrointestinal tract, NOS

Note 1: The following sources were used in the development of this chapter

- SEER Extent of Disease 1988: Codes and Coding Instructions (3rd Edition, 1998) (<https://seer.cancer.gov/archive/manuals/EOD10Dig.3rd.pdf>)
- SEER Summary Staging Manual-2000: Codes and Coding Instructions (<https://seer.cancer.gov/tools/ssm/>)
- Collaborative Stage Data Collection System, version 02.05: <https://cancerstaging.org/cstage/Pages/default.aspx>

Note 2: See the following chapters for the listed histologies

- 8710-8714, 8800-8934, 8940-9137, 9141-9582: *Soft Tissue*
- 8935-8936: *GIST*
- 9140: *Kaposi Sarcoma*

Note 3: Summary Stage is the only applicable staging system for this site/histology/schema.

SUMMARY STAGE

0 In situ: noninvasive, intraepithelial

1 Localized only (localized, NOS)

- Invasion of submucosa

2 Regional by direct extension only

- Adjacent connective tissue(s)
- Adjacent organ(s)/structure(s)
- Regional extension, NOS

3 Regional lymph node(s) involved only

- Intra-abdominal
- Paracaval
- Pelvic
- Subdiaphragmatic
- Regional lymph node(s), NOS
 - Lymph node(s), NOS

4 Regional by BOTH direct extension AND regional lymph node(s) involved

- Codes (2) + (3)

7 Distant site(s)/lymph node(s) involved

- Distant site(s) (including further contiguous extension)
- Distant lymph node(s), NOS
- Distant metastasis, NOS
 - Carcinomatosis
 - Distant metastasis WITH or WITHOUT distant lymph node(s)

9 Unknown if extension or metastasis

RESPIRATORY TRACT AND THORAX

Trachea:

The trachea is a cartilaginous and fibromuscular tube that extends from the inferior aspect of the cricoid cartilage (sixth cervical vertebra level) to the main carina (fifth thoracic vertebra level). Its length is 10-12 cm in adults (of which 2-4 cm is extrathoracic and 6-9 cm intrathoracic). The tracheal wall has four different layers: mucosa, submucosa, cartilage or muscle, and adventitia. The posterior tracheal wall lacks cartilage and instead is supported by a thin band of smooth muscle.

Lungs:

The lungs are covered by the visceral pleura, which is contiguous with the parietal pleura as it reflects from the lateral surfaces of the mediastinum. The visceral pleura forms in-foldings into both lungs, which are called fissures. There are two complete fissures in the right lung and one complete fissure with an incomplete fissure in the left; these separate the different lung lobes. The pleura also forms the pulmonary ligament, which is a double layer of pleura that extends posteriorly along the mediastinum from the inferior pulmonary vein to the diaphragm.

Penetration of the visceral pleura indicates a progression of invasion, even in small (≤ 3 cm) tumors. Visceral pleural invasion is considered present both in tumors that extend to the visceral pleural surface (type PL2 invasion), and in tumors that penetrate beyond the elastic layer of the visceral pleura (type PL1 invasion).

There are two mainstem bronchi (right and left) and three lobar bronchi (right), with a total of ten segmental bronchi; two lobar bronchi are found on the left, with a total of eight segmental bronchi. The functional subunits of each lung are called segments and have a close relation with the segmental bronchi, as described. The right lung comprises ten segments: three in the right upper lobe, two in the right middle lobe, and five in the right lower lobe. The left lung comprises eight segments: four in the left upper lobe and four in the left lower lobe.

RESPIRATORY TRACT AND THORAX

TRACHEA

8000-8700, 8720-8790, 9700-9701

C339

C339 Trachea

Note 1: The following sources were used in the development of this chapter

- SEER Extent of Disease 1988: Codes and Coding Instructions (3rd Edition, 1998) (<https://seer.cancer.gov/archive/manuals/EOD10Dig.3rd.pdf>)
- SEER Summary Staging Manual-2000: Codes and Coding Instructions (<https://seer.cancer.gov/tools/ssm/>)
- Collaborative Stage Data Collection System, version 02.05: <https://cancerstaging.org/cstage/Pages/default.aspx>

Note 2: See the following chapters for the listed histologies

- 8710-8714, 8800-8934, 8940-9137, 9141-9582: *Soft Tissue*
- 8935-8936: *GIST*
- 9140: *Kaposi Sarcoma*

Note 3: Summary Stage is the only applicable staging system for this site/histology/schema.

SUMMARY STAGE

0 In situ, intraepithelial, noninvasive

1 Localized only (localized, NOS)

- Invasive tumor confined to trachea

2 Regional by direct extension only

- Adjacent connective tissue
 - Arch of aorta
 - Azygos vein, right
 - Brachiocephalic vein
 - Carotid sheath
 - Common carotid artery(ies)
 - Jugular arch
 - Phrenic nerves
 - Pretracheal fascia

- Recurrent laryngeal nerve
- Subclavian artery(ies)
- Vagus nerve
- Adjacent organ(s)/structure(s)
 - Cricoid cartilage
 - Esophagus
 - Pleura, NOS
 - Parietal
 - Visceral
 - Right and left main bronchi
 - Sternum
 - Thymus
 - Thyroid gland
 - Vertebral column

3 Regional lymph node(s) involved only

- Mediastinal, NOS
 - Posterior (tracheoesophageal)
- Paratracheal
- Pretracheal
- Tracheal, NOS
- Regional lymph node(s), NOS
 - Lymph node(s), NOS

4 Regional by BOTH direct extension AND regional lymph node(s) involved

- Codes (2) + (3)

7 Distant site(s)/lymph node(s) involved

- Distant site(s) (including further contiguous extension)
- Distant lymph node(s), NOS
- Distant metastasis, NOS
 - Carcinomatosis
 - Distant metastasis WITH or WITHOUT distant lymph node(s)

9 Unknown if extension or metastasis

THYMUS

8000-8700, 8720-8790, 9700-9701

C379

C379 Thymus

Note 1: The following sources were used in the development of this chapter

- SEER Extent of Disease 1988: Codes and Coding Instructions (3rd Edition, 1998) (<https://seer.cancer.gov/archive/manuals/EOD10Dig.3rd.pdf>)
- SEER Summary Staging Manual-2000: Codes and Coding Instructions (<https://seer.cancer.gov/tools/ssm/>)
- Collaborative Stage Data Collection System, version 02.05: <https://cancerstaging.org/cstage/Pages/default.aspx>
- Chapter 35 *Thymus*, in the AJCC Cancer Staging Manual, Eighth Edition (2017) published by Springer International Publishing. Used with permission of the American College of Surgeons, Chicago, Illinois.

Note 2: See the following chapters for the listed histologies

- 8710-8714, 8800-8934, 8940-9137, 9141-9582: *Soft Tissue*
- 8935-8936: *GIST*
- 9140: *Kaposi Sarcoma*

SUMMARY STAGE

0 In situ: noninvasive, intraepithelial

1 Localized only (localized, NOS)

- Confined to thymus, NOS
- No mediastinal or pleura involvement or UNKNOWN if involved

2 Regional by direct extension only

- Brachiocephalic vein
- Chest wall
- Confined to thymus WITH mediastinal or pleural involvement
- Direct invasion of pericardium
- Extrapericardial pulmonary artery or vein
- Lung
- Phrenic nerve
- Superior vena cava

3 Regional lymph node(s) involved only

- Ascending aorta
- Cervical (low anterior)
- Hilar
- Internal mammary
- Lower jugular
- Mediastinal (lower, middle, NOS)
- Para-aortic
- Paratracheal (lower, upper, NOS)
- Peri-thymic
- Peri-thyroid
- Pericardial
- Phrenic (inferior, superior)
- Precricoid/delphian
- Pretracheal
- Prevascular
- Subaortic/aortopulmonary window
- Subcarinal
- Supraclavicular/venous angle: confluence of internal jugular and subclavian vein
- Regional lymph node(s), NOS
 - Lymph node(s), NOS

4 Regional by BOTH direct extension AND regional lymph node(s) involved

- Codes (2) + (3)

7 Distant site(s)/lymph node(s) involved

- Distant site(s) (including further contiguous extension)
 - Extrathoracic sites
 - Separate pleural or pericardial nodule(s)
- Distant lymph node(s), NOS
- Distant metastasis, NOS
 - Carcinomatosis
 - Distant metastasis WITH or WITHOUT distant lymph node(s)
 - OR with pleural or pericardial nodule(s) metastasis

9 Unknown if extension or metastasis

LUNG

8000-8700, 8720-8790, 8972, 8980, 9700-9701

C340-C343, C348-C349

C340 Main bronchus

C341 Upper lobe, lung

C342 Middle lobe, lung

C343 Lower lobe, lung

C348 Overlapping lesion of lung

C349 Lung, NOS

Note 1: The following sources were used in the development of this chapter

- SEER Extent of Disease 1988: Codes and Coding Instructions (3rd Edition, 1998) (<https://seer.cancer.gov/archive/manuals/EOD10Dig.3rd.pdf>)
- SEER Summary Staging Manual-2000: Codes and Coding Instructions (<https://seer.cancer.gov/tools/ssm/>)
- Collaborative Stage Data Collection System, version 02.05: <https://cancerstaging.org/cstage/Pages/default.aspx>
- Chapter 36 *Lung*, in the AJCC Cancer Staging Manual, Eighth Edition (2017) published by Springer International Publishing. Used with permission of the American College of Surgeons, Chicago, Illinois.

Note 2: See the following chapters for the listed histologies

- 8710-8714, 8800-8934, 8940-8971, 8973-8975, 8981-9045, 9054-9137, 9141-9582: *Soft Tissue*
- 8935-8936: *GIST*
- 9050-9053: *Pleural Mesothelioma*
- 9140: *Kaposi Sarcoma*

Note 3: “Bronchopneumonia” is not the same thing as “obstructive pneumonitis” and should not be coded as such.

Note 4: Atelectasis is the failure of the lung to expand (inflate) completely. This may be caused by a blocked airway, a tumor, general anesthesia, pneumonia or other lung infections, lung disease, or long-term bedrest with shallow breathing. Sometimes called a collapsed lung.

- For staging purposes, atelectasis must present with an obstructing tumor (code 2)

Note 5: Specific information about visceral pleura invasion (PL1 or PL2) or parietal pleural invasion (PL3) are coded as regional (code 2). Elastic layer involvement has prognostic significance for lung cancer.

Note 6: Separate ipsilateral tumor nodules of the same histopathological type (intrapulmonary metastases) are coded either regional (code 2) for same lobe or distant (code 7) for different ipsilateral lobe or contralateral lung.

Note 7: “Vocal cord paralysis,” “superior vena cava syndrome,” and “compression of the trachea or the esophagus” are classified as mediastinal lymph node involvement (code 3) unless there is a statement of involvement by direct extension from the primary tumor.

Note 8: Most pleural and pericardial effusions with lung cancer are due to tumor. In a few patients, however, multiple cytopathological examinations of pleural and/or pericardial fluid are negative for tumor, and the fluid is nonbloody and is not an exudate. Where these elements and clinical judgment dictate that the effusion is not related to the tumor, the effusion should be excluded as a staging element.

Note 9: Occult carcinoma occurs when tumor is proven by the presence of malignant cells or bronchial washings, but there is no other evidence of the tumor. These cases are coded as unknown (code 9).

SUMMARY STAGE

0 In situ, intraepithelial, noninvasive

- Adenocarcinoma in situ (AIS): adenocarcinoma with pure lepidic pattern, less than or equal to 3 cm in greatest dimension
- Squamous cell carcinoma in situ (SCIS)

1 Localized only (localized, NOS)

- Adjacent ipsilateral lobe
- Confined to carina, NOS
- Confined to hilus
- Confined to lung, NOS
- Main stem bronchus, NOS (without involvement of the carina)
 - Including extension from other part of lung
- Minimally invasive adenocarcinoma
 - Adenocarcinoma tumor WITH predominantly lepidic pattern (AIS) measuring less than or equal to 3 cm in greatest dimension
 - WITH invasive component measuring less than or equal to 5 mm in greatest dimension
- Superficial tumor, WITH invasive component limited to bronchial wall
 - WITH or WITHOUT proximal extension to main stem bronchus

2 Regional by direct extension only

- Atelectasis/obstructive pneumonitis
 - Extends to hilar region, involving part or all of lung
- Blood vessel(s) (major)
 - Aorta
 - Azygos vein
 - Pulmonary artery or vein
 - Superior vena cava (SVC syndrome)
- Brachial plexus
- Carina from lung
- Chest wall (thoracic wall)
- Compression of esophagus or trachea not specified as direct extension
- Diaphragm (separate lesion-see code 7)
- Esophagus
- Mediastinum, extrapulmonary or NOS
- Nerve(s)
 - Cervical sympathetic (Horner's syndrome)
 - Recurrent laryngeal (vocal cord paralysis)
 - Vagus
- Pancoast tumor (superior sulcus syndrome), NOS
- Parietal pericardium
- Parietal pleura
- Pericardium, NOS
- Phrenic nerve
- Pleura, NOS
- Pulmonary ligament
- Separate tumor nodule(s) in the same lobe as the primary
- Visceral pleura invasion (PL1, PL2, PL3, or NOS)
- Trachea

3 Regional lymph node(s) involved only

- IPSILATERAL nodes only
 - Bronchial
 - Carinal (tracheobronchial) (tracheal bifurcation)
 - Hilar (bronchopulmonary) (proximal lobar) (pulmonary root)
 - Intrapulmonary
 - Interlobar
 - Lobar
 - Segmental
 - Subsegmental
 - Mediastinal, NOS
 - Anterior
 - Aortic (above diaphragm), NOS

- Peri/para-aortic, NOS
 - Ascending aorta (phrenic)
 - Subaortic (aortic-pulmonary window)
 - Inferior mediastinal
 - Paraesophageal
 - Pulmonary ligament
 - Subcarinal
 - Posterior (tracheoesophageal)
 - Superior mediastinal
 - Paratracheal (left, right, upper, low, NOS)
 - Prevascular
 - Retrotracheal
- Peri/parabronchial
- Periesophageal
- Pericardial
- Peritracheal, NOS
 - Azygos (lower peritracheal)
- Precarinal
- Pretracheal, NOS
- Regional lymph node(s), NOS
 - Lymph node(s), NOS

4 Regional by BOTH direct extension AND regional lymph node(s) involved

- Codes (2) + (3)

7 Distant site(s)/lymph node(s) involved

- Distant site(s) (including further contiguous extension)
 - Abdominal organs
 - Adjacent rib
 - Contralateral lung/main stem bronchus
 - Contralateral main stem bronchus
 - Heart
 - Inferior vena cava
 - Neural foramina
 - Pericardial nodules or pleural effusion (malignant) (ipsilateral, contralateral, bilateral, NOS)
 - Pleural tumor foci or nodules on ipsilateral lung (separate from direct extension) or contralateral lung
 - Rib
 - Separate tumor nodule(s) in contralateral lung
 - Separate tumor nodule(s) in a different ipsilateral lobe
 - Skeletal muscle

- Skin of chest
- Sternum
- Vertebra(e) (vertebral body)
- Visceral pericardium
- Distant lymph node(s), NOS
 - IPSILATERAL or CONTRALATERAL
 - Low cervical
 - Proximal root
 - Scalene (inferior deep cervical)
 - Sternal notch
 - Supraclavicular (transverse cervical)
 - CONTRALATERAL/BILATERAL nodes
 - Bronchial
 - Cervical
 - Hilar (bronchopulmonary) (proximal lobar) (pulmonary root)
 - Mediastinal
 - Anterior
 - Aortic (above diaphragm), NOS
 - Peri/para-aortic, NOS
 - Ascending aorta (phrenic)
 - Subaortic (aortic-pulmonary window)
 - Inferior mediastinal
 - Paraesophageal
 - Pulmonary ligament
 - Subcarinal
 - Periesophageal
 - Posterior (tracheoesophageal)
 - Pretracheal
 - Superior mediastinal
 - Paratracheal (left, right, upper, low, NOS)
 - Prevascular
 - Retrotracheal
- Distant metastasis, NOS
 - Carcinomatosis
 - Distant metastasis WITH or WITHOUT distant lymph node(s)

9 Unknown if extension or metastasis

PLEURAL MESOTHELIOMA

9050-9053

C340-C343, C348-C349, C384

C340 Main bronchus

C341 Upper lobe, lung

C342 Middle lobe, lung

C343 Lower lobe, lung

C348 Overlapping lesion of lung

C349 Lung, NOS

C384 Pleura

Note 1: The following sources were used in the development of this chapter

- SEER Extent of Disease 1988: Codes and Coding Instructions (3rd Edition, 1998) (<https://seer.cancer.gov/archive/manuals/EOD10Dig.3rd.pdf>)
- SEER Summary Staging Manual-2000: Codes and Coding Instructions (<https://seer.cancer.gov/tools/ssm/>)
- Collaborative Stage Data Collection System, version 02.05: <https://cancerstaging.org/cstage/Pages/default.aspx>
- Chapter 37 *Malignant Pleural Mesothelioma*, in the AJCC Cancer Staging Manual, Eighth Edition (2017) published by Springer International Publishing. Used with permission of the American College of Surgeons, Chicago, Illinois.

Note 2: Code 0 is not applicable for this chapter.

Note 3: Most pleural effusions are due to tumor. When the cytopathological examinations of pleural fluid are negative for tumor, the effusion should be excluded as a staging element and the tumor should not be classified as metastasis.

- The physician statement of pleural effusion can be used to code this data item
- If the physician feels the pleural effusion is due to tumor, despite negative cytology, the physician's assessment can be used.
- If pleural fluid cytology is described as suspicious/suspicious for mesothelioma, code 7

SUMMARY STAGE

1 Localized only (localized, NOS)

- Confined to pleura, NOS
- Invasive tumor (mesothelioma) confined to pleura, NOS
- Ipsilateral parietal pleura WITH or WITHOUT involvement of
 - Diaphragmatic pleural
 - Mediastinal pleura
 - Parietal pleura
 - Visceral pleura

2 Regional by direct extension only

- Adjacent (connective) tissue, NOS
- Chest wall
- Confluent visceral pleural tumor (including any involvement of interlobar fissure)
- Diaphragmatic muscle
- Endothoracic fascia
- Ipsilateral pleural surfaces all involved
 - Diaphragmatic, parietal, mediastinal, and visceral
- Lung parenchyma, or lung involvement, NOS
- Mediastinal fat (mediastinal tissues)
- Mediastinal organs (direct extension)
- Nodule(s) beneath visceral pleural surface (ipsilateral pleura)
- Pericardium (extension through the internal surface) (non-transmural, NOS) WITHOUT pericardial effusion
- Pulmonary parenchyma (visceral pleural extension)
- Rib

3 Regional lymph node(s) involved only

- Aortic (above diaphragm), NOS
 - Ascending aorta (phrenic)
 - Peri/para-aortic
 - Subaortic (aortico-pulmonary window)
- Carinal (tracheobronchial) (tracheal bifurcation)
- Hilar (ipsilateral)
 - Bronchopulmonary
 - Proximal lobar
 - Pulmonary root
- Intercostal
- Internal mammary (parasternal)
- Intrapulmonary
 - Interlobar
 - Lobar
 - Segmental
 - Subsegmental
- Mediastinal, NOS (ipsilateral)
 - Anterior
 - Posterior (tracheoesophageal)
- Pericardial
- Peri/parabronchial
- Peri/paraesophageal (below carina)
- Peri/paratracheal (lower [azygos], upper, NOS)
- Pretracheal and retrotracheal (precarinal), NOS
- Prevascular
- Pulmonary ligament

- Subcardial
- Subcarinal
- Regional lymph node(s), NOS
 - Lymph node(s), NOS

4 Regional by BOTH direct extension AND regional lymph node(s) involved

- Codes (2) + (3)

7 Distant site(s)/lymph node(s) involved

- Distant site(s) (including further contiguous extension)
 - Brachial plexus
 - Cervical (neck) tissues
 - Contralateral lung
 - Contralateral pleura (direct contiguous extension)
 - Contralateral pleura/chest wall (discontinuous involvement)
 - Heart muscle
 - Intra-abdominal organs
 - Mediastinal organs (discontinuous involvement)
 - Mesothelioma WITH malignant pleural fluid
 - Pericardial effusion, malignant
 - Pericardium WITH pericardial effusion
 - Peritoneum (direct transdiaphragmatic extension of tumor)
 - Peritoneum (discontinuous extension of tumor)
 - Pleural effusion (see Note 3)
 - Spine
- Distant lymph node(s), NOS
 - Hilar (contralateral, bilateral)
 - Bronchopulmonary
 - Proximal lobar
 - Pulmonary root
 - Mediastinal (contralateral, bilateral)
 - Anterior
 - Posterior (tracheoesophageal)
 - Peridiaphragmatic (ipsilateral, contralateral)
 - Mediastinal
 - Scalene (ipsilateral, contralateral)
 - Inferior deep cervical
 - Supraclavicular (ipsilateral or contralateral)
 - Transverse cervical
- Distant metastasis, NOS
 - Carcinomatosis
 - Distant metastasis WITH or WITHOUT distant lymph node(s)

9 Unknown if extension or metastasis

RESPIRATORY OTHER

8000-8700, 8720-8790, 9700-9701

C390, C398-C399

C390 Upper respiratory tract, NOS

C398 Overlapping lesion of respiratory system and intrathoracic organs

C399 Ill-defined sites within respiratory system

Note 1: The following sources were used in the development of this chapter

- SEER Extent of Disease 1988: Codes and Coding Instructions (3rd Edition, 1998) (<https://seer.cancer.gov/archive/manuals/EOD10Dig.3rd.pdf>)
- SEER Summary Staging Manual-2000: Codes and Coding Instructions (<https://seer.cancer.gov/tools/ssm/>)
- Collaborative Stage Data Collection System, version 02.05: <https://cancerstaging.org/cstage/Pages/default.aspx>

Note 2: See the following chapters for the listed histologies

- 8710-8714, 8800-8934, 8940-9137, 9141-9582: *Soft Tissue*
- 8935-8936: *GIST*
- 9140: *Kaposi Sarcoma*

Note 3: Summary Stage is the only applicable staging system for this site/histology/schema.

SUMMARY STAGE

0 In situ, intraepithelial, noninvasive

1 Localized only (localized, NOS)

- Confined to site of origin

2 Regional by direct extension only

- Adjacent connective tissue
- Adjacent organ(s)/structure(s)
 - Descending aorta
 - Esophagus
 - Large (named) artery(ies)
 - Large (named) vein(s)
 - Pericardium (parietal, visceral [pericardium])
 - Phrenic nerve(s)
 - Pleura (parietal, visceral, NOS)

- Sternum
- Sympathetic nerve trunk(s)
- Thoracic duct
- Thymus
- Trachea
- Vertebra(e)

3 Regional lymph node(s) involved only

- Aortic (above diaphragm), NOS
 - Peri/para-aortic, NOS
 - Ascending aorta (phrenic)
 - Subaortic (aortico-pulmonary window)
- Carinal (tracheobronchial) (tracheal bifurcation)
- Hilar (bronchopulmonary) (proximal lobar) (pulmonary root)
- Intrapulmonary, NOS
 - Interlobar
 - Lobar
 - Segmental
 - Subsegmental
- Mediastinal, NOS
 - Anterior
 - Posterior (tracheoesophageal)
- Peri/parabronchial
- Pericardial
- Peri/paraesophageal
- Peri/paratracheal, NOS
 - Azygos (lower peritracheal)
- Pre- and retrotracheal, NOS:
 - Precarinal
- Pulmonary ligament
- Subcarinal
- Regional lymph node(s), NOS
 - Lymph node(s), NOS

4 Regional by BOTH direct extension AND regional lymph node(s) involved

- Codes (2) + (3)

7 Distant site(s)/lymph node(s) involved

- Distant site(s) (including further contiguous extension)
- Distant lymph node(s), NOS
- Distant metastasis, NOS
 - Carcinomatosis
 - Distant metastasis WITH or WITHOUT distant lymph node(s)

9 Unknown if extension or metastasis

BONE (INCLUDING JOINTS AND ARTICULAR CARTILAGE)

8000-8934, 8940-9137, 9141-9582, 9700-9701

C400-C403, C408-C414, C418-C419

C400 Long bones of upper limb, scapula and associated joints

C401 Short bones of upper limb and associated joints

C402 Long bones of lower limb and associated joints

C403 Short bones of lower limb and associated joints

C408 Overlapping lesion of bones, joints and articular cartilage of limbs

C409 Bone of limb, NOS

C410 Bones of skull and face and associated joints (excludes mandible C411)

C411 Mandible

C412 Vertebral column

C413 Rib, sternum, clavicle, and associated joints

C414 Pelvic bones, sacrum, coccyx and associated joints

C418 Overlapping lesion of bones, joints and articular cartilage

C419 Bone, NOS

Note 1: The following sources were used in the development of this chapter

- SEER Extent of Disease 1988: Codes and Coding Instructions (3rd Edition, 1998) (<https://seer.cancer.gov/archive/manuals/EOD10Dig.3rd.pdf>)
- SEER Summary Staging Manual-2000: Codes and Coding Instructions (<https://seer.cancer.gov/tools/ssm/>)
- Collaborative Stage Data Collection System, version 02.05: <https://cancerstaging.org/cstage/Pages/default.aspx>
- Chapter 38 *Bone*, in the AJCC Cancer Staging Manual, Eighth Edition (2017) published by Springer International Publishing. Used with permission of the American College of Surgeons, Chicago, Illinois.

Note 2: See the following chapters for the listed histologies

- 8935-8936: *GIST*
- 9140: *Kaposi Sarcoma*

Note 3: Code 0 is not applicable for this chapter.

Note 4: The cortex of a bone is the dense outer shell that provides strength to the bone; the spongy center of a bone is the cancellous portion. The periosteum of the bone is the fibrous membrane covering of a bone that contains the blood vessels and nerves; the periosteum is similar to the capsule on a visceral organ.

Note 5: Regional lymph nodes are defined as those in the vicinity of the primary tumor.

Note 6: Regional lymph node involvement is rare. If there is no mention of lymph node involvement clinically, assume that lymph nodes are negative.

SUMMARY STAGE

1 Localized only (localized, NOS)

- Appendicular (C400-C403, C408-C411, C413, C418-C419)
 - Confined to cortex of bone
 - Extension beyond cortex to periosteum (no break in periosteum)
- Spine (C412)
 - Confined to spine, NOS (number of segments involved not known)
 - Involvement of single or multiple adjacent vertebral segment(s)
- Pelvis (C414)
 - Confined to pelvis, NOS (number of segments involved not known)
 - One to two pelvic segments involved WITHOUT or UNKNOWN if extrasosseous extension

2 Regional by direct extension only

- All sites
 - Extrasosseous extension (beyond periosteum to surrounding tissues, including adjacent skeletal muscle(s))
- Appendicular (C400-C403, C408-C411, C413, C418-C419)
 - Adjacent bone/cartilage
- Spine (C412)
 - Involvement of multiple non-adjacent vertebral segments
- Pelvis (C414)
 - One to two pelvic segments involved WITH extrasosseous extension

3 Regional lymph node(s) involved only

- Regional lymph node(s), NOS
 - Lymph node(s), NOS

4 Regional by BOTH direct extension AND regional lymph node(s) involved

- Codes (2) + (3)

7 Distant site(s)/lymph node(s) involved

- Distant site(s) (including further contiguous extension)
 - All bone sites
 - Bone (other than primary site)
 - Lung
 - Appendicular (C400-C403, C408-C411, C413, C418-C419)
 - Discontinuous tumors in the primary bone site
 - Skin
 - Spine (C412)
 - Gross vascular invasion
 - Spinal canal
 - Tumor thrombus in great vessels
 - Pelvis (C414)
 - Encasement of external iliac vessels
 - Gross tumor thrombus in major pelvic vessels
 - Sacral neuroforamen
 - Sacroiliac joint
- Distant lymph node(s), NOS
- Distant metastasis, NOS
 - Carcinomatosis
 - Distant metastasis WITH or WITHOUT distant lymph node(s)

9 Unknown if extension or metastasis

SOFT TISSUE

GASTROINTESTINAL TUMORS (GIST)

8935-8936 (C000-C539, C571-C809)

Note 1: The following sources were used in the development of this chapter

- SEER Extent of Disease 1988: Codes and Coding Instructions (3rd Edition, 1998) (<https://seer.cancer.gov/archive/manuals/EOD10Dig.3rd.pdf>)
- SEER Summary Staging Manual-2000: Codes and Coding Instructions (<https://seer.cancer.gov/tools/ssm/>)
- Collaborative Stage Data Collection System, version 02.05: <https://cancerstaging.org/cstage/Pages/default.aspx>
- Chapter 43 *Gastrointestinal Stromal Tumor*, in the AJCC Cancer Staging Manual, Eighth Edition (2017) published by Springer International Publishing. Used with permission of the American College of Surgeons, Chicago, Illinois.

Note 2: GIST of the corpus, ovary and fallopian tube are collected in the following:

- C540-C549, C559: *Corpus Sarcoma*
- C569: *Ovary*
- C570: *Fallopian Tube*

Note 3: For GIST tumors arising in the tubular organs of the digestive system (Esophagus, Stomach, Small Intestine, Appendix, Colon and Rectum), any extension beyond the muscular wall (e.g. invasion beyond the muscularis propria/muscularis, NOS) into adjacent tissues, sites or organs is no longer considered confined to the site of origin (code 1).

- Extension through the wall, NOS, or through the muscularis propria/muscularis, NOS without further extension would be code 1 (confined to the site of origin).
- Extension through the wall, NOS or through the muscularis propria/muscularis, NOS with any further extension into underlying tissues/fat, organs or structures would be included code 2 or 7 (Adjacent (connective) tissue, NOS or Extension to organs/structures, NOS).

Note 4: See the chapter corresponding to the primary site for information about the site's anatomy. The corresponding chapter can be used to help determine what the adjacent (connective) tissues, structures or organs are, but the site-specific chapter codes are not to be used to determine whether a GIST tumor is localized, regional or distant.

Note 5: For GIST tumors arising in the Retroperitoneum (C480-C482, C488), refer to the Summary Stage General Instructions for the definition of adjacent (connective) tissue. Refer to the General Instructions to determine whether the GIST tumor involves adjacent tissues, or is confined to the primary site.

Note 6: Nodal metastasis is very rare in gastrointestinal stromal tumors (GISTs) and surgeons generally agree that nodal dissection is not indicated. In the absence of information on regional lymph node status for a localized tumor, assume nodes are negative.

SUMMARY STAGE

0 In situ, intraepithelial, noninvasive

1 Localized only (localized, NOS)

- Confined to site of origin

2 Regional by direct extension only

- Adjacent (connective) tissue, NOS

3 Regional lymph node(s) involved only

- Regional lymph node(s), NOS
 - Lymph node(s), NOS

4 Regional by BOTH direct extension AND regional lymph node(s) involved

- Codes (2) + (3)

7 Distant site(s)/lymph node(s) involved

- Distant site(s) (including further contiguous extension)
 - Adherent to organs/structure, NOS
 - Extension to organs/structures, NOS
 - Liver parenchymal nodules
 - Peritoneal nodules
- Distant lymph node(s), NOS
- Distant metastasis, NOS
 - Carcinomatosis
 - Distant metastasis WITH or WITHOUT distant lymph node(s)

9 Unknown if extension or metastasis

HEART, MEDIASTINUM AND PLEURA

8000-8803, 8810-8921, 8932-8934, 8940-8990, 9000-9016, 9030, 9040-9043, 9045-9137, 9141-9230, 9240-9580, 9582, 9700-9701 (excluding 9050-9053 for C384)

C380-C384, C388

C380 Heart

C381 Anterior mediastinum

C382 Posterior mediastinum

C383 Mediastinum, NOS

C384 Pleura

C388 Overlapping lesion of heart, mediastinum, and pleura

Note 1: The following sources were used in the development of this chapter

- SEER Extent of Disease 1988: Codes and Coding Instructions (3rd Edition, 1998) (<https://seer.cancer.gov/archive/manuals/EOD10Dig.3rd.pdf>)
- SEER Summary Staging Manual-2000: Codes and Coding Instructions (<https://seer.cancer.gov/tools/ssm/>)
- Collaborative Stage Data Collection System, version 02.05: <https://cancerstaging.org/cstage/Pages/default.aspx>
- Chapter 42 *Soft Tissue Sarcoma of the Abdomen and Thoracic Visceral Organs*, in the AJCC Cancer Staging Manual, Eighth Edition (2017) published by Springer International Publishing. Used with permission of the American College of Surgeons, Chicago, Illinois.

Note 2: See the following schemas for the listed histologies

- 8804-8806, 8930-8931, 8991, 9020, 9044, 9231, 9581: *Soft Tissue*
- 8935-8936: *GIST*
- 9050-9053 (C384): *Pleural Mesothelioma*
- 9140: *Kaposi Sarcoma*

Note 3: Code 0 is not applicable for this chapter.

SUMMARY STAGE

1 Localized only (localized, NOS)

- Confined to site of origin

2 Regional by direct extension only

- All sites
 - Adjacent (connective) tissue, NOS

- Adjacent organ(s)/structure(s), NOS
- Mesentery
- Serosa
- Visceral peritoneum
- Heart (C380)
 - Ascending aorta
 - Parietal pericardium
 - Vena cava
- Mediastinum (C381-C383, C388)
 - Descending aorta
 - Esophagus
 - Large (named) artery(ies) or vein(s)
 - Pericardium (parietal, visceral [pericardium], NOS)
 - Phrenic nerve(s)
 - Pleura (parietal, visceral, NOS)
 - Sternum
 - Sympathetic nerve trunk(s)
 - Thoracic duct
 - Thymus
 - Trachea, parietal pleura
 - Vertebra(e)
- Pleura (C384)
 - Chest wall
 - Diaphragm
 - Endothoracic fascia
 - Heart muscle
 - Lung involvement, NOS
 - Mediastinal organs or tissues
 - Pericardium
 - Rib

3 Regional lymph node(s) involved only

- All sites
 - Aortic (above diaphragm), NOS
 - Peri/para-aortic, NOS
 - Ascending aorta (phrenic)
 - Subaortic (aortico-pulmonary window)
 - Carinal (tracheobronchial) (tracheal bifurcation)
 - Mediastinal (anterior, posterior [tracheoesophageal], NOS)
 - Pericardial
 - Peri-/paraesophageal
 - Peri-/paratracheal (lower [azygos], upper, NOS)
 - Pretracheal and retrotracheal (precarinal), NOS
 - Pulmonary ligament

- Subcarinal
- Regional lymph node(s), NOS
 - Lymph node(s), NOS
- Pleura (C384)
 - Hilar (bronchopulmonary) (proximal lobar) (pulmonary root)
 - Intrapulmonary, NOS
 - Interlobar
 - Lobar
 - Segmental
 - Subsegmental
 - Peri/parabronchial
 - Precarinal

4 Regional by BOTH direct extension AND regional lymph node(s) involved

- Codes (2) + (3)

7 Distant site(s)/lymph node(s) involved

- Distant site(s) (including further contiguous extension)
 - Pleura
 - Cervical (neck) tissues
 - Contralateral lung
 - Contralateral pleura
 - Intra-abdominal organs
 - Peritoneum
 - Pleural effusion
- Distant lymph node(s), NOS
 - Pleura
 - Contralateral/bilateral hilar (bronchopulmonary) (proximal lobar) (pulmonary root)
 - Contralateral/bilateral mediastinal
 - Scalene (inferior deep cervical), ipsilateral or contralateral
 - Supraclavicular (transverse cervical), ipsilateral or contralateral
- Distant metastasis, NOS
 - Carcinomatosis
 - Distant metastasis WITH or WITHOUT distant lymph node(s)

9 Unknown if extension or metastasis

RETROPERITONEUM

C480 (8000-8803, 8810-8921, 8932-8934, 8940-8990, 9000-9016, 9030-9043, 9045-9137, 9141-9230, 9240-9580, 9582, 9700-9701)

C481- C482, C488 (8710-8714, 8800-8803, 8810-8821, 8823-8921, 8932, 8934, 8940-8941, 8951-8959, 8963-8975, 8981-8990, 9010-9016, 9030-9043, 9045, 9051, 9053-9055, 9061-9065, 9072, 9081-9084, 9086, 9101-9105, 9120-9137, 9141-9230, 9240-9580, 9582)

C481-C482, C488 and Sex: 1, 3, 4, 5, 9 (8000-8700, 8720-8790, 8822, 8933, 8950, 8960, 8980, 9000, 9050, 9052, 9060, 9070-9071, 9073, 9080, 9085, 9090-9091, 9100, 9110, 9700-9701)

C480-C482, C488

C480 Retroperitoneum

C481 Specified parts of peritoneum (including omentum and mesentery)

C482 Peritoneum, NOS

C488 Overlapping lesion of retroperitoneum and peritoneum

Note 1: The following sources were used in the development of this chapter

- SEER Extent of Disease 1988: Codes and Coding Instructions (3rd Edition, 1998) (<https://seer.cancer.gov/archive/manuals/EOD10Dig.3rd.pdf>)
- SEER Summary Staging Manual-2000: Codes and Coding Instructions (<https://seer.cancer.gov/tools/ssm/>)
- Collaborative Stage Data Collection System, version 02.05: <https://cancerstaging.org/cstage/Pages/default.aspx>
- Chapter 44 *Soft Tissue Sarcoma of the Retroperitoneum*, in the AJCC Cancer Staging Manual, Eighth Edition (2017) published by Springer International Publishing. Used with permission of the American College of Surgeons, Chicago, Illinois.

Note 2: See the following chapters for the listed histologies

- C481-C482, C488 and Sex: 2, 6 (8000-8700, 8720-8790, 8806, 8822, 8930-8931, 8933, 8950, 8960, 8980, 9000, 9050, 9052, 9060, 9070-9071, 9073, 9080, 9085, 9090-9091, 9100, 9110, 9700-9701): *Primary Peritoneal Carcinoma*
- 8804-8805, 8991, 9020, 9044, 9231, 9581: *Soft Tissue*
- 8806, 8930-8931 (C480; C481-C488 with Sex 1, 3, 5, 9): *Soft Tissue*
- 8935-8936: *GIST*
- 9140: *Kaposi Sarcoma*

Note 3: Code 0 is not applicable for this chapter.

SUMMARY STAGE

1 Localized only (localized, NOS)

- Confined to site of origin

2 Regional by direct extension only

- Adjacent connective tissue, NOS
- Adjacent organs/structures, NOS
- Bone/cartilage
- Retroperitoneum (C480)
 - Adrenal(s) (suprarenal gland(s))
 - Aorta
 - Colon (ascending and descending)
 - Kidney(s)
 - Pancreas
 - Vena cava
 - Vertebra
- Peritoneum (C481, C482, C488)
 - Colon (except ascending and descending colon)
 - Esophagus
 - Gallbladder
 - Liver
 - Small intestine
 - Spleen
 - Stomach

3 Regional lymph node(s) involved only

- Intra-abdominal
- Paracaval
- Pelvic
- Subdiaphragmatic
- Regional lymph node(s), NOS
 - Lymph node(s), NOS

4 Regional by BOTH direct extension AND regional lymph node(s) involved

- Codes (2) + (3)

7 Distant site(s)/lymph node(s) involved

- Distant site(s) (including further contiguous extension)
 - Peritoneum (C481, C482, C488)
 - Colon (ascending and descending colon)
- Distant lymph node(s), NOS
- Distant metastasis, NOS
 - Carcinomatosis
 - Distant mets WITH or WITHOUT distant lymph node(s)

9 Unknown if extension or metastasis

SOFT TISSUES AND SARCOMAS

C470-C479, C490-C499: 8000-8934, 8940-9137, 9141-9582, 9700-9701

C000-C399, C420-C449, C480-C488, C500-C539, C569-C574, C577-C579, C589-C809
(varying histologies between 8710-8714, 8800-8934, 8940-9137, 9141-9582)

- See *Summary Stage 2018 Manual, Appendix II* by primary site for a detailed listing of primary site/histology combinations for this schema

Note 1: The following sources were used in the development of this chapter

- SEER Extent of Disease 1988: Codes and Coding Instructions (3rd Edition, 1998) (<https://seer.cancer.gov/archive/manuals/EOD10Dig.3rd.pdf>)
- SEER Summary Staging Manual-2000: Codes and Coding Instructions (<https://seer.cancer.gov/tools/ssm/>)
- Collaborative Stage Data Collection System, version 02.05: <https://cancerstaging.org/cstage/Pages/default.aspx>
- Chapter 40 *Soft Tissue Sarcoma of the Head and Neck*, in the AJCC Cancer Staging Manual, Eighth Edition (2017) published by Springer International Publishing. Used with permission of the American College of Surgeons, Chicago, Illinois.
- Chapter 41 *Soft Tissue Sarcoma of the Trunk and Extremities*, in the AJCC Cancer Staging Manual, Eighth Edition (2017) published by Springer International Publishing. Used with permission of the American College of Surgeons, Chicago, Illinois.
- Chapter 42 *Soft Tissue Sarcoma and of the Abdomen and Thoracic Visceral Organs*, in the AJCC Cancer Staging Manual, Eighth Edition (2017) published by Springer International Publishing. Used with permission of the American College of Surgeons, Chicago, Illinois.
- Chapter 45 *Soft Tissue Sarcoma – Unusual Histologies and Sites*, in the AJCC Cancer Staging Manual, Eighth Edition (2017) published by Springer International Publishing. Used with permission of the American College of Surgeons, Chicago, Illinois.

Note 2: For C470-C479, C490-C499 only, see the following schemas for the listed histologies

- 8935-8936: *GIST*
- 9140: *Kaposi Sarcoma*

Note 3: Code 0 is not applicable for this chapter.

SUMMARY STAGE

1 Localized only (localized, NOS)

- Confined to site of origin
- Deep tumor, NOS
- Superficial tumor, NOS

2 Regional by direct extension only

- Adjacent (connective) tissue, NOS
 - Into tissue beyond organ
- Adjacent organ(s)/structure(s), NOS
- Major vessel invasion
- Superficial or deep tumor WITH involvement of
 - adjacent (connective) tissue or adjacent organ(s)/structure(s)
- Abdomen and Thoracic Visceral Organs
 - Mesentery
 - Serosa
 - Visceral peritoneum

3 Regional lymph node(s) involved only

- Head and Neck
 - Cervical
- Lip
 - Facial, NOS
 - Buccinator (buccal)
 - Mandibular (submandibular, submaxillary, submental)
 - Nasolabial
 - Parotid (infra-auricular, preauricular)
- Eyelid/canthus
 - Facial (buccinator [buccal], nasolabial, NOS)
 - Mandibular (submandibular, submaxillary, submental)
 - Parotid, NOS (infra-auricular)
- External ear and auditory canal
 - Mastoid (posterior, retro-auricular) (occipital)
 - Preauricular
- Face, Other (cheek, chin, forehead, jaw, nose, and temple):
 - Facial, NOS (buccinator [buccal], nasolabial)
 - Mandibular (submandibular, submaxillary, submental)
 - Parotid (infra-auricular, preauricular)
- Scalp
 - Mastoid (posterior, retro-auricular) (occipital)
 - Parotid (infra-auricular, preauricular)
 - Spinal accessory (posterior cervical)
- Neck
 - Axillary
 - Mandibular
 - Mastoid (posterior, retro-auricular) (occipital)
 - Parotid (infra-auricular, preauricular)
 - Spinal accessory (posterior cervical)
 - Submental (bilateral or contralateral)

- Supraclavicular (transverse cervical)
- Arm/shoulder
 - Axillary
 - Epitrochlear for hand/forearm
 - Spinal accessory for shoulder
- Leg/hip
 - Femoral (superficial inguinal)
 - Popliteal for heel and calf
- Thorax
 - Hilar (bronchopulmonary) (proximal lobar) (pulmonary root)
 - Mediastinal
- Abdomen
 - Celiac
 - Iliac
 - Para-aortic
- Pelvis
 - Deep inguinal, NOS
 - Rosenmuller or Cloquet node
 - Superficial inguinal (femoral)
- Upper trunk
 - Axillary
 - Cervical
 - Internal mammary
 - Supraclavicular (transverse cervical)
- Lower trunk
 - Superficial inguinal (femoral)
- Regional lymph node(s), NOS
 - Lymph node(s), NOS

4 Regional by BOTH direct extension AND regional lymph node(s) involved

- Codes (2) + (3)

7 Distant site(s)/lymph node(s) involved

- Distant site(s) (including further contiguous extension)
 - Head and Neck subsites
 - Brain parenchymal invasion
 - Carotid artery encasement
 - Central compartment visceral
 - Central nervous system involvement via perineural spread
 - Fascial skeleton
 - Orbital invasion
 - Prevertebral muscle invasion

- Pterygoid muscles
 - Skull base/dural invasion
- Distant lymph node(s), NOS
- Distant metastasis, NOS
 - Carcinomatosis
 - Distant metastasis WITH or WITHOUT distant lymph node(s)

9 Unknown if extension or metastasis

SKIN

RELATIONSHIP BETWEEN THICKNESS, DEPTH OF INVASION, AND CLARK LEVEL

(Use Only for Melanoma of the Skin; Vulva, Penis, and Scrotum)

Below is a guideline for melanoma of the skin for Breslow's depth and/or Clark's Level.

Note: Clark's level is not routinely used, but is kept here for historical purposes.

Summary Stage	Breslow's: Thickness/Depth	Clark's Level
In Situ	In Situ	Level I
Localized	≤ 0.75 mm	Level II
	0.76 to 1.50 mm	Level III
	≥1.50 mm	Level IV
Regional Direction Extension	Through entire dermis	Level V
Regional LN	(See LNs by primary site)	
Distant	Underlying cartilage, bone, muscle, or metastatic (generalized) skin lesions	

SKIN (EXCEPT EYELID)

8000-8040, 8042-8180, 8191-8246, 8248-8700, 8940, 8982

C000-C002, C006, C440, C442-C449

C000 Vermilion border of upper lip (excludes external upper lip)

C001 Vermilion border of lower lip (excludes external lower lip)

C002 Vermilion border of lip, NOS (excludes external lip, NOS)

C006 Commissure of lip

C440 Skin of lip, NOS

C442 External ear

C443 Skin of other and unspecified parts of face

C444 Skin of scalp and neck

C445 Skin of trunk

C446 Skin of upper limb and shoulder

C447 Skin of lower limb and hip

C448 Overlapping lesion of skin

C449 Skin, NOS

Note 1: The following sources were used in the development of this chapter

- SEER Extent of Disease 1988: Codes and Coding Instructions (3rd Edition, 1998) (<https://seer.cancer.gov/archive/manuals/EOD10Dig.3rd.pdf>)
- SEER Summary Staging Manual-2000: Codes and Coding Instructions (<https://seer.cancer.gov/tools/ssm/>)
- Collaborative Stage Data Collection System, version 02.05: <https://cancerstaging.org/cstage/Pages/default.aspx>
- For *primary sites C000-C002, C006, C440, C442-C444*, Chapter 15 *Cutaneous Squamous Cell Carcinoma Head and Neck*, in the AJCC Cancer Staging Manual, Eighth Edition (2017) published by Springer International Publishing. Used with permission of the American College of Surgeons, Chicago, Illinois.

Note 2: See the following chapters for the listed histologies

- 8041, 8190, 8247: *Merkel Cell Skin*
- 8710-8714, 8800-8934, 8941-8981, 8983-9137, 9141-9582: *Soft Tissue*
- 8720-8790: *Melanoma Skin*
- 8935-8936: *GIST*
- 9140: *Kaposi Sarcoma*
- 9700-9701: *Mycosis Fungoides*

Note 3: Summary Stage is the only applicable staging system for primary sites C445-C449.

Note 4: Bilateral or contralateral nodes are classified as regional nodes for head, neck, and truncal tumors with bidirectional drainage to primary nodal basins, as shown on

lymphoscintigraphy. Truncal tumors may also drain to both cephalad and caudal primary nodal basins as shown on lymphoscintigraphy.

- Clinical assessment of bilateral/contralateral or cephalad/caudal regional nodal involvement is required for tumors where lymphoscintigraphy is not performed

Note 5: Contiguous or secondary nodal basins are the next nodal drainage basins beyond the primary nodal basins and are coded as regional nodes.

SUMMARY STAGE

0 In situ, intraepidermal, intraepithelial, noninvasive

- Carcinoma in situ

1 Localized only (localized, NOS)

- Lesion(s) confined to dermis
- Subcutaneous tissue (through entire dermis)

2 Regional by direct extension only

- All Sites
 - Bone
 - Cartilage
 - Skeletal muscle
 - Underlying cartilage
- Head and Neck skin primaries only (C000-C002, C006, C440, C442-C444)
 - Bone erosion (minor or NOS)
 - Deep invasion
 - Gross cortical bone/marrow
 - Mandible
 - Maxilla
 - Orbital bone
 - Perineural invasion
 - Skull base foramen
 - Skull base invasion
 - Temporal bone

3 Regional lymph node(s) involved only

Regional lymph node(s) involved only

- All sites (Single, Multiple, Ipsilateral) (See Code 7 for contralateral or bilateral nodes (except for head and neck skin primaries))
 - Regional lymph node(s), NOS
 - Lymph node(s), NOS
- Head and Neck skin primaries only (C000-C002, C006, C440, C442-C444) (includes contralateral and bilateral nodes)
 - Levels I-VII
 - Axillary (neck only, C444)
 - Cervical, NOS
 - Deep cervical, NOS
 - Facial (buccinator, buccal, nasolabial)
 - Internal jugular, NOS
 - Parapharyngeal
 - Parotid (infraauricular, intraparotid, periparotid, preauricular)
 - Retroauricular (mastoid)
 - Retropharyngeal
 - Suboccipital
- Skin of trunk (C445)
 - Upper trunk
 - Axillary
 - Cervical
 - Internal mammary
 - Supraclavicular
 - Lower trunk
 - Superficial inguinal (femoral) (lower trunk only)
- Skin of upper limb and shoulder (C446)
 - Axillary
 - Cervical
 - Epitrochlear for hand/forearm
 - Internal mammary (parasternal)
 - Spinal accessory for shoulder
 - Supraclavicular (transverse cervical)
- Skin of lower limb and hip (C447)
 - Femoral (superficial inguinal)
 - Inguinal
 - Popliteal for heel and calf

4 Regional by BOTH direct extension AND regional lymph node(s) involved

- Codes (2) + (3)

7 Distant site(s)/lymph node(s) involved

- Distant site(s) (including further contiguous extension)
- Distant lymph node(s), NOS
- Distant metastasis, NOS
 - Carcinomatosis
 - Distant metastasis WITH or WITHOUT distant lymph node(s)

9 Unknown if extension or metastasis

KAPOSI SARCOMA

9140 Kaposi Sarcoma (C000-C699, C739-C750, C754-C809)

Note 1: The following sources were used in the development of this chapter

- SEER Extent of Disease 1988: Codes and Coding Instructions (3rd Edition, 1998) (<https://seer.cancer.gov/archive/manuals/EOD10Dig.3rd.pdf>)
- SEER Summary Staging Manual-2000: Codes and Coding Instructions (<https://seer.cancer.gov/tools/ssm/>)
- Collaborative Stage Data Collection System, version 02.05: <https://cancerstaging.org/cstage/Pages/default.aspx>
- Chapter 45 *Soft Tissue Sarcoma – Unusual Histologies and Sites*, in the AJCC Cancer Staging Manual, Eighth Edition (2017) published by Springer International Publishing. Used with permission of the American College of Surgeons, Chicago, Illinois.

Note 2: Kaposi Sarcoma of the brain, central nervous system and intracranial glands is now collected in the following:

- C700, C710-C719: Brain
- C701, C709, C720-C725, C728-C729: CNS Other
- C751-C753: Intracranial Gland

Note 3: Summary Stage is the only applicable staging system for this site/histology/schema.

Note 4: Code 0 is not applicable for this chapter.

SUMMARY STAGE

1 Localized only

- Single or multiple lesion(s)
 - Mucosa (e.g., oral cavity, anus, rectum, vagina, vulva)
 - Skin and/or connective tissue
 - Viscera (e.g., pulmonary, gastrointestinal tract, spleen, other)

2 Regional by direct extension only

- Multiple lesion(s)
 - Mucosa plus skin and/or connective tissue
 - Viscera plus mucosa
 - Viscera plus skin and/or connective tissue

3 Regional lymph node(s) involved only

- Both clinically enlarged palpable lymph node(s) (adenopathy) and pathologically positive lymph node(s)
- Clinically enlarged palpable lymph node(s) (adenopathy) and either pathologically negative node(s) or no pathological statement
- No clinically enlarged palpable lymph node(s) (adenopathy) but pathologically positive lymph node(s)
- Regional lymph node(s), NOS
 - Lymph node(s), NOS

4 Regional by BOTH direct extension AND regional lymph node(s) involved

- Codes (2) + (3)

7 Distant site(s)/lymph node(s) involved

- Distant site(s) (including further contiguous extension)
 - Multiple lesions in all THREE of following: viscera plus mucosa plus skin and/or connective tissue
- Distant lymph node(s), NOS
- Distant metastasis, NOS
 - Carcinomatosis
 - Distant metastasis WITH or WITHOUT distant lymph node(s)

9 Unknown if extension or metastasis

MERKEL CELL SKIN

8041, 8190, 8247 (C000-C006, C008-C009, C440-C449, C510-C512, C518-C519, C600-C602, C608-C609, C632)

8190, 8247 (C809)

Note 1: The following sources were used in the development of this chapter

- SEER Extent of Disease 1988: Codes and Coding Instructions (3rd Edition, 1998) (<https://seer.cancer.gov/archive/manuals/EOD10Dig.3rd.pdf>)
- SEER Summary Staging Manual-2000: Codes and Coding Instructions (<https://seer.cancer.gov/tools/ssm/>)
- Collaborative Stage Data Collection System, version 02.05: <https://cancerstaging.org/cstage/Pages/default.aspx>
- Chapter 46 *Merkel Cell Carcinoma*, in the AJCC Cancer Staging Manual, Eighth Edition (2017) published by Springer International Publishing. Used with permission of the American College of Surgeons, Chicago, Illinois.

Note 2: Merkel cell carcinoma presenting in nodal or visceral site with primary site unknown is coded to C449, Skin, NOS.

Note 3: Isolated tumor cells (ITCs) are defined as single tumor cells or small clusters not greater than 0.2 mm, usually detected by immunohistochemical (IHC) or molecular methods. ITCs do not usually show evidence of malignant activity (e.g., proliferation or stromal reaction).

- Lymph nodes with isolated tumor cells (ITCs) are counted as positive lymph nodes

Note 4: In transit metastasis is defined as a tumor distinct from the primary lesion and located either between the primary lesion and the draining regional lymph node(s) or distal to the primary lesion. In transit metastasis with positive lymph node(s) are coded under regional lymph nodes.

- In-transit metastasis are counted as positive nodes

Note 5: Bilateral or contralateral nodes are classified as regional nodes for head, neck, and truncal tumors with bidirectional drainage to primary nodal basins, as shown on lymphoscintigraphy. Truncal tumors may also drain to both cephalad and caudal primary nodal basins as shown on lymphoscintigraphy.

- Clinical assessment of bilateral/contralateral or cephalad/caudal regional nodal involvement is required for tumors where lymphoscintigraphy is not performed

Note 6: Contiguous or secondary nodal basins are the next nodal drainage basins beyond the primary nodal basins and are coded as regional nodes.

SUMMARY STAGE

0 In situ, intraepidermal, intraepithelial, noninvasive

1 Localized only (localized, NOS)

- Confined to site of origin
- Lesion(s) confined to dermis
- Subcutaneous tissue (through entire dermis)

2 Regional by direct extension only

- Bone
- Cartilage
- Fascia
- Skeletal muscle

3 Regional lymph node(s) involved only

Regional lymph node(s) involved only

- All sites (Single, Multiple, Ipsilateral) (See Code 7 for contralateral or bilateral nodes (except for head and neck skin primaries))
 - Isolated tumor cells (ITCs) WITH or WITHOUT regional lymph node involvement
 - In-transit mets WITH or WITHOUT regional lymph node involvement
 - Regional lymph node(s), NOS
 - Lymph node(s), NOS
- Head and Neck skin primaries only (C000-C002, C006, C440, C442-C444) (includes contralateral and bilateral nodes)
 - Levels I-VII
 - Axillary (neck only, C444)
 - Cervical, NOS
 - Deep cervical, NOS
 - Facial (buccinator, buccal, nasolabial)
 - Internal jugular, NOS
 - Parapharyngeal
 - Parotid (infraauricular, intraparotid, periparotid, preauricular)
 - Retroauricular (mastoid)
 - Retropharyngeal
 - Suboccipital
- Skin of trunk (C445)
 - Upper trunk
 - Axillary
 - Cervical

- Internal mammary
 - Supraclavicular
 - Lower trunk
 - Superficial inguinal (femoral)
- Skin of upper limb and shoulder (C446)
 - Axillary
 - Cervical
 - Epitrochlear for hand/forearm
 - Internal mammary (parasternal)
 - Spinal accessory for shoulder
 - Supraclavicular (transverse cervical)
- Skin of lower limb and hip (C447)
 - Femoral (superficial inguinal)
 - Inguinal
 - Popliteal for heel and calf
- Vulva (C510-C512, C518-C519)
 - Deep inguinal, NOS
 - Femoral
 - Inguinal, NOS
 - Inguinofemoral (groin)
 - Node of Cloquet or Rosenmuller (highest deep inguinal)
 - Superficial inguinal (femoral)
- Penis (C600-C602, C608-C609)
 - Iliac, NOS
 - External
 - Internal (hypogastric, obturator)
 - Inguinal, NOS
 - Node of Cloquet or Rosenmuller (highest deep inguinal)
 - Superficial [femoral]
 - Pelvic, NOS
- Scrotum (C632)
 - Iliac, NOS
 - External
 - Internal (hypogastric), NOS
 - Obturator
 - Inguinal, NOS
 - Deep inguinal, NOS
 - Node of Cloquet or Rosenmuller (highest deep inguinal)
 - Superficial inguinal (femoral)

4 Regional by BOTH direct extension AND regional lymph node(s) involved

- Codes (2) + (3)

7 Distant site(s)/lymph node(s) involved

- Distant site(s) (including further contiguous extension)
 - Bone
 - Cartilage
 - Fascia
 - Lung
 - Other visceral sites
 - Skeletal muscle (excluding direct extension)
 - Skin or subcutaneous tissue beyond regional lymph nodes
 - Underlying cartilage
- Distant lymph node(s), NOS
 - Axillary (lower trunk)
 - Femoral (cephalad/caudal) (upper trunk)
 - Iliac (leg/hip)
 - Supraclavicular (head and neck, arm/shoulder)
- Distant metastasis, NOS
 - Carcinomatosis
 - Distant metastasis WITH or WITHOUT distant lymph node(s)

9 Unknown if extension or metastasis

MELANOMA SKIN

8720-8790 (C000-C002, C006, C440-C449, C500, C510-C512, C518-C519, C600-C602, C608-C609, C632)

Note 1: The following sources were used in the development of this chapter

- SEER Extent of Disease 1988: Codes and Coding Instructions (3rd Edition, 1998) (<https://seer.cancer.gov/archive/manuals/EOD10Dig.3rd.pdf>)
- SEER Summary Staging Manual-2000: Codes and Coding Instructions (<https://seer.cancer.gov/tools/ssm/>)
- Collaborative Stage Data Collection System, version 02.05: <https://cancerstaging.org/cstage/Pages/default.aspx>
- Chapter 47 *Melanoma of the Skin*, in the AJCC Cancer Staging Manual, Eighth Edition (2017) published by Springer International Publishing. Used with permission of the American College of Surgeons, Chicago, Illinois.

Note 2: For melanoma of sites other than those above

- C003-C005, C008-C069, C090-C148, C300-C329: See Melanoma Head and Neck
- C690: See Melanoma Conjunctiva
- C693, C694: See Melanoma Uvea
- For all other sites, use the appropriate site-specific schema

Note 3: If there is a discrepancy between the Clark level and the pathological description of extent (invasion into the layers of the dermis), use the higher (more extensive) code.

Note 4: Code the greatest extent of invasion from any procedure performed on the lesion, whether it is described as a biopsy or an excision. For example, if a punch biopsy with involvement of Clark level IV is followed by a re-excision with residual tumor involving Clark level II, code 2 (Clark level IV).

Note 5: If a Breslow's depth is given in the pathology report and there is no other indication of involvement, the following guidelines may be used (*Note: If a physician documents a different Clark's Level then provided by these guidelines, go with the physician's Clark Level*)

- In situ: Level 1
- Localized
 - Level II (< 0.75 mm Breslow's Depth)
 - Level III (0.76 mm to 1.50 mm Breslow's Depth)
 - Level IV (> 1.50 mm Breslow's Depth)
- Regional
 - Level V: Through entire dermis

Note 6: Isolated tumor cells (ITCs) are defined as single tumor cells or small clusters not greater than 0.2 mm, usually detected by immunohistochemical (IHC) or molecular methods. ITCs do not usually show evidence of malignant activity (e.g., proliferation or stromal reaction).

- Lymph nodes with isolated tumor cells (ITCs) are counted as positive lymph nodes

Note 7: In-transit, satellite, and/or microsatellite metastasis are metastasis that have occurred via lymphatic or angiolymphatic spread. Satellite nodules are subcutaneous metastasis that occur within 2 cm of the primary tumor. Microsatellite metastasis are microscopic cutaneous metastasis found adjacent or deep to a primary melanoma tumor.

- In-transit, satellite, and/or microsatellite metastasis are counted as positive nodes

Note 8: Bilateral or contralateral nodes are classified as regional nodes for head, neck, and truncal tumors with bidirectional drainage to primary nodal basins, as shown on lymphoscintigraphy. Truncal tumors may also drain to both cephalad and caudal primary nodal basins as shown on lymphoscintigraphy.

- Clinical assessment of bilateral/contralateral or cephalad/caudal regional nodal involvement is required for tumors where lymphoscintigraphy is not performed

Note 9: Contiguous or secondary nodal basins are the next nodal drainage basins beyond the primary nodal basins and are coded as regional nodes.

SUMMARY STAGE

0 In situ, intraepithelial, noninvasive

- Basement membrane of the epidermis is intact
- In situ, intraepidermal, intraepithelial, noninvasive
 - Clark level I

1 Localized only (localized, NOS)

- Papillary dermis invaded
 - Clark level II
- Papillary-reticular dermal interface invaded
 - Clark level III
- Reticular dermis invaded
 - Clark level IV
- Skin/dermis, NOS

2 Regional by direct extension only

- Subcutaneous tissue (through entire dermis)
 - Clark level V

3 Regional lymph node(s) involved only

- All sites (Single, Multiple, Ipsilateral) (See Code 7 for contralateral or bilateral nodes (except for head and neck skin primaries))
 - Isolated tumor cells (ITCs) WITH or WITHOUT regional lymph node involvement
 - In-transit, satellite, and/or microsatellite metastasis WITH or WITHOUT regional lymph node involvement
 - Regional lymph node(s), NOS
 - Lymph node(s), NOS
- Head and Neck skin primaries only (C000-C002, C006, C440, C442-C444) (includes contralateral and bilateral nodes)
 - Levels I-VII
 - Axillary (neck only, C444)
 - Cervical, NOS
 - Deep cervical, NOS
 - Facial (buccinator, buccal, nasolabial)
 - Internal jugular, NOS
 - Parapharyngeal
 - Parotid (infraauricular, intraparotid, periparotid, preauricular)
 - Retroauricular (mastoid)
 - Retropharyngeal
 - Suboccipital
- Skin of trunk (C445)
 - Upper trunk
 - Axillary
 - Cervical
 - Internal mammary
 - Supraclavicular
 - Lower trunk
 - Superficial inguinal (femoral)
- Skin of upper limb and shoulder (C446)
 - Axillary
 - Cervical
 - Epitrochlear for hand/forearm
 - Internal mammary (parasternal)
 - Spinal accessory for shoulder
 - Supraclavicular (transverse cervical)
- Skin of lower limb and hip (C447)
 - Femoral (superficial inguinal)

- Inguinal
 - Popliteal for heel and calf
- Vulva (C510-C512, C518-C519)
 - Deep inguinal, NOS
 - Femoral
 - Inguinal, NOS
 - Inguinofemoral (groin)
 - Node of Cloquet or Rosenmuller (highest deep inguinal)
 - Superficial inguinal (femoral)
- Penis (C600-C602, C608-C609)
 - Iliac, NOS
 - External
 - Internal (hypogastric, obturator)
 - Inguinal, NOS
 - Node of Cloquet or Rosenmuller (highest deep inguinal)
 - Superficial [femoral]
 - Pelvic, NOS
- Scrotum (C632)
 - Iliac, NOS
 - External
 - Internal (hypogastric), NOS
 - Obturator
 - Inguinal, NOS
 - Deep inguinal, NOS
 - Node of Cloquet or Rosenmuller (highest deep inguinal)
 - Superficial inguinal (femoral)

4 Regional by BOTH direct extension AND regional lymph node(s) involved

- Codes (2) + (3)

7 Distant site(s)/lymph node(s) involved

- Distant site(s) (including further contiguous extension)
 - Bone
 - Central nervous system (CNS)
 - Lung
 - Skeletal muscle (including direct extension)
 - Skin or subcutaneous tissue beyond regional lymph nodes
 - Underlying cartilage
 - Visceral metastasis, NOS
- Distant lymph node(s), NOS
 - Axillary (lower trunk)
 - Femoral (cephalad/caudal) (upper trunk)
 - Iliac (leg/hip)
- Distant metastasis, NOS

- Carcinomatosis
- Distant metastasis WITH or WITHOUT distant lymph node(s)

9 Unknown if extension or metastasis

BREAST

8000-8700, 8720-8790 [except C500], 8982-8983, 9700-9701

C500-C506, C508-C509

C500 Nipple

C501 Central portion of breast

C502 Upper-inner quadrant of breast

C503 Lower-inner quadrant of breast

C504 Upper-outer quadrant of breast

C505 Lower-outer quadrant of breast

C506 Axillary Tail of breast

C508 Overlapping lesion of breast

C509 Breast, NOS

Note 1: The following sources were used in the development of this chapter

- SEER Extent of Disease 1988: Codes and Coding Instructions (3rd Edition, 1998) (<https://seer.cancer.gov/archive/manuals/EOD10Dig.3rd.pdf>)
- SEER Summary Staging Manual-2000: Codes and Coding Instructions (<https://seer.cancer.gov/tools/ssm/>)
- Collaborative Stage Data Collection System, version 02.05: <https://cancerstaging.org/cstage/Pages/default.aspx>
- Chapter 48 *Breast*, in the AJCC Cancer Staging Manual, Eighth Edition (2017) published by Springer International Publishing. Used with permission of the American College of Surgeons, Chicago, Illinois.

Note 2: See the following chapters for the listed histologies

- 8720-8790: *Melanoma Skin* (C500 only)
- 8710-8714, 8800-8934, 8940-8981, 8990-9137, 9141-9582: *Soft Tissue*
- 8935-8936: *GIST*
- 9140: *Kaposi Sarcoma*

Note 3: Changes such as dimpling of the skin, tethering, and nipple retraction are caused by tension on Cooper's ligament(s), not by actual skin involvement. They do not alter the classification.

Note 4: Adherence, attachment, fixation, induration, and thickening are clinical evidence of extension to skin or subcutaneous tissue; assign code 2 for regional extension.

Note 5: "Fixation, NOS" is involvement of pectoralis muscle; assign code 2 for regional extension.

Note 6: For a clinical description of inflammation, erythema, edema, peau d'orange, or other terms describing skin changes with or without a stated diagnosis of inflammatory carcinoma, assign code 2 for regional extension.

Note 7: Isolated tumor cells (ITCs) are defined as single tumor cells or small clusters not greater than 0.2 mm, usually detected by immunohistochemical (IHC) or molecular methods. ITCs do not usually show evidence of malignant activity (e.g., proliferation or stromal reaction). RT-PCR is a molecular method designed to find evidence of unique tumor or epithelial cell markers.

- Lymph nodes with ITCs only or positive molecular findings (RT-PCR), or both ITCs and RT-PCR are not counted as positive nodes for Summary Stage

Note 8: If the pathology report indicates that nodes are positive but size of the metastases is not stated, assume the metastases are greater than 0.2 mm and code the lymph nodes as positive in this field.

Note 9: Bone marrow micrometastasis, circulating tumor cells (CTCs) or disseminated tumor cells and clusters (DTCs) that are less than or equal to 0.2 mm are negative for metastasis in Summary Stage.

SUMMARY STAGE

0 In situ, intraepithelial, noninvasive

- In situ: noninfiltrating; intraepithelial
- Intraductal WITHOUT infiltration
- Lobular neoplasia, grade 3 (LIN 3)
- Paget disease, in situ

1 Localized only (localized, NOS)

- Confined to breast tissue and fat including nipple and/or areola
- Paget disease WITH or WITHOUT underlying tumor

2 Regional by direct extension only

- Attachment or fixation to pectoral muscle(s) or underlying tumor
- Chest wall
- Deep fixation
- Extensive skin involvement WITH or WITHOUT dermal lymphatic filtration
 - Edema of skin
 - En cuirasse
 - Erythema
 - Inflammation of skin

- Lenticular nodule(s)
- Peau d'orange ("pigskin")
- Satellite nodules
- Skin edema
- Ulceration of skin of breast
- Inflammatory carcinoma, NOS
- Intercostal or serratus anterior muscle(s)
- Local infiltration of dermal lymphatics adjacent to primary tumor involving skin by direct extension
- Pectoral fascia or muscle(s)
- Rib(s)
- Subcutaneous tissue
- Skin infiltration of primary breast including skin of nipple and/or areola

3 Regional lymph node(s) involved only

- Axillary, NOS (ipsilateral)
 - Level I (low-axilla) (low) (superficial), NOS [adjacent to tail of breast]
 - Anterior (pectoral)
 - Lateral (brachial)
 - Posterior (subscapular)
 - Level II (mid-axilla) (central), NOS
 - Interpectoral (Rotter's)
 - Level III (high) (deep), NOS
 - Apical (subclavian)
 - Axillary vein
- Fixed/matted axillary (level I and II) (ipsilateral)
- Infraclavicular (subclavicular) (ipsilateral)
- Internal mammary (parasternal) (ipsilateral)
- Intramammary (ipsilateral)
- Regional lymph node(s), NOS
 - Lymph node(s), NOS

4 Regional by BOTH direct extension AND regional lymph node(s) involved

- Codes (2) + (3)

7 Distant site(s)/lymph node(s) involved

- Distant site(s) (including further contiguous extension)
 - Adrenal (suprarenal) gland
 - Bone other than adjacent rib
 - Contralateral (opposite) breast-if stated as metastatic

- Lung
- Ovary
- Satellite nodule(s) in skin other than primary breast
- Skin over
 - Axilla
 - Contralateral (opposite) breast
 - Sternum
 - Upper abdomen
- Distant lymph node(s), NOS
 - Axillary (contralateral or bilateral)
 - Cervical, NOS
 - Fixed/matted axillary (level I and II) (contralateral or bilateral)
 - Infraclavicular (subclavicular) (contralateral or bilateral)
 - Internal mammary (parasternal) (contralateral or bilateral)
 - Intramammary (contralateral or bilateral)
 - Supraclavicular (transverse cervical) (ipsilateral, contralateral or bilateral)
- Distant metastasis, NOS
 - Carcinomatosis
 - Distant metastasis WITH or WITHOUT distant lymph node(s)

9 Unknown if extension or metastasis

FEMALE GENITAL SYSTEM

VULVA

8000-8040, 8042-8180, 8191-8246, 8248-8700, 9020, 9071

C510-C512, C518-C519

C510 Labium majus

C511 Labium minus

C512 Clitoris

C518 Overlapping lesion of vulva

C519 Vulva, NOS

Note 1: The following sources were used in the development of this chapter

- SEER Extent of Disease 1988: Codes and Coding Instructions (3rd Edition, 1998) (<https://seer.cancer.gov/archive/manuals/EOD10Dig.3rd.pdf>)
- SEER Summary Staging Manual-2000: Codes and Coding Instructions (<https://seer.cancer.gov/tools/ssm/>)
- Collaborative Stage Data Collection System, version 02.05: <https://cancerstaging.org/cstage/Pages/default.aspx>
- Chapter 50 *Vulva*, in the AJCC Cancer Staging Manual, Eighth Edition (2017) published by Springer International Publishing. Used with permission of the American College of Surgeons, Chicago, Illinois.

Note 2: See the following chapters for the listed histologies

- 8041, 8190, 8247: *Merkel Cell Skin*
- 8710-8714, 8800-8934, 8940-9016, 9030-9070, 9072-9137, 9141-9582: *Soft Tissue*
- 8720-8790: *Melanoma Skin*
- 8935-8936: *GIST*
- 9140: *Kaposi Sarcoma*
- 9700-9701: *Mycosis Fungoides*

Note 3: Basal and squamous cell carcinomas of the skin of the vulva are coded to C519 and are reportable; basal and squamous carcinomas of the skin of the perineum would be coded to C445 and would not be reportable.

Note 4: Isolated tumor cells (ITCs) are defined as single tumor cells or small clusters not greater than 0.2 mm, usually detected by immunohistochemical (IHC) or molecular methods. ITCs do not usually show evidence of malignant activity (e.g., proliferation or stromal reaction).

- Lymph nodes with ITCs only are **not** counted as positive nodes for Summary Stage

SUMMARY STAGE

0 In situ: noninvasive, intraepithelial

1 Localized only (localized, NOS)

- FIGO Stage IA, IB, I [NOS]
 - Invasive carcinoma WITH or WITHOUT stromal invasion confined to
 - Musculature
 - Submucosa
 - Vulva including skin

2 Regional by direct extension only

- FIGO Stage II
 - Adjacent perineal structures
 - Anus
 - Bladder wall or bladder, NOS excluding mucosa
 - Perianal skin
 - Rectal wall or rectum, NOS excluding mucosa
 - Urethra, NOS
 - Lower/distal third of urethra
 - Vagina, NOS
 - Vulva and perineum involved WITH or WITHOUT stromal invasion

3 Regional lymph node(s) involved only

- FIGO Stage IIIA, IIIB, IIIC, III [NOS]
 - Deep inguinal, NOS
 - Femoral
 - Inguinal, NOS
 - Inguinofemoral (groin)
 - Node of Cloquet or Rosenmuller (highest deep inguinal)
 - Superficial inguinal (femoral)
 - Regional lymph node(s), NOS
 - Lymph node(s), NOS
- FIGO Stage IVA based on regional lymph node involvement

4 Regional by BOTH direct extension AND regional lymph node(s) involved

- Codes (2) + (3)

7 Distant site(s)/lymph node(s) involved

- Distant site(s) (including further contiguous extension)
 - FIGO Stage IVA, IVB, IV [NOS]
 - Bladder mucosa
 - Fixed to pubic bone (pelvic bone)
 - Perineal body
 - Rectal mucosa
 - Urethra: upper/proximal two-thirds
- Distant lymph node(s), NOS
 - Common iliac
 - External iliac
 - Internal iliac (hypogastric)
 - Obturator
 - Pelvic, NOS
- Distant metastasis, NOS
 - Carcinomatosis
 - Distant metastasis WITH or WITHOUT distant lymph node(s)

9 Unknown if extension or metastasis

VAGINA

8000-8700, 8720-8790, 8933, 8980, 9071, 9110, 9700-9701

C529

C529 Vagina, NOS

Note 1: The following sources were used in the development of this chapter

- SEER Extent of Disease 1988: Codes and Coding Instructions (3rd Edition, 1998) (<https://seer.cancer.gov/archive/manuals/EOD10Dig.3rd.pdf>)
- SEER Summary Staging Manual-2000: Codes and Coding Instructions (<https://seer.cancer.gov/tools/ssm/>)
- Collaborative Stage Data Collection System, version 02.05: <https://cancerstaging.org/cstage/Pages/default.aspx>
- Chapter 51 *Vagina*, in the AJCC Cancer Staging Manual, Eighth Edition (2017) published by Springer International Publishing. Used with permission of the American College of Surgeons, Chicago, Illinois.

Note 2: See the following chapters for the listed histologies

- 8710-8714, 8800-8932, 8934, 8940-8975, 8981-9070, 9072-9105, 9120-9137, 9141-9582: *Soft Tissue*
- 8935-8936: *GIST*
- 9140: *Kaposi Sarcoma*

Note 3: Isolated tumor cells (ITCs) are defined as single tumor cells or small clusters not greater than 0.2 mm, usually detected by immunohistochemical (IHC) or molecular methods. ITCs do not usually show evidence of malignant activity (e.g., proliferation or stromal reaction).

- Lymph nodes with ITCs only are **not** counted as positive nodes for Summary Stage

SUMMARY STAGE

0 In situ: noninvasive, intraepithelial

1 Localized only (localized, NOS)

- FIGO Stage I
 - Confined to vagina
 - Musculature involved
 - Submucosa (stroma) (vagina)

2 Regional by direct extension only

- FIGO Stage II
 - Bladder wall or bladder, NOS (excluding mucosa)
 - Cervix
 - Cul de sac (rectouterine pouch)
 - Extension to lower third of the vagina (from proximal vagina)
 - “Frozen pelvis” (clinically diagnosed)
 - Hydronephrosis or nonfunctioning kidney
 - Parametrium
 - Paravaginal soft tissue
 - Pelvic wall
 - Fascia
 - Muscle
 - Neurovascular structures
 - Skeletal portions of bony pelvis
 - Rectal wall or rectum, NOS excluding mucosa
 - Rectovaginal septum
 - Vesicovaginal septum
 - Vulva

3 Regional lymph node(s) involved only

- Lower third of vagina
 - Femoral [superficial inguinal]
 - Inguinal, NOS
- Upper two thirds of vagina
 - Iliac (common, external, NOS)
 - Internal iliac (hypogastric)
 - Middle sacral (promontorial) (Gerota’s node)
 - Obturator
 - Para-aortic
 - Parametrial
 - Pelvic, NOS
 - Presacral
 - Sacral
- Regional lymph node(s), NOS
 - Lymph node(s), NOS

4 Regional by BOTH direct extension AND regional lymph node(s) involved

- Codes (2) + (3)

7 Distant site(s)/lymph node(s) involved

- Distant site(s) (including further contiguous extension)
 - FIGO Stage IVA
 - Bladder mucosa (excluding bullous edema)
 - Extension beyond true pelvis
 - Rectal mucosa
 - Urethra
- Distant lymph node(s), NOS
 - All sites
 - Aortic (lateral [lumbar], para-aortic, periaortic, NOS)
 - Retroperitoneal, NOS
 - Lower third of vagina
 - Iliac (common, external, NOS)
 - Internal iliac (hypogastric)
 - Middle sacral (promontorial) (Gerota's node)
 - Obturator
 - Para-aortic
 - Parametrial
 - Pelvic, NOS
 - Presacral
 - Sacral
 - Superficial inguinal (femoral)
 - Upper two thirds of vagina
 - Inguinal, NOS
- Distant metastasis, NOS
 - Carcinomatosis
 - Distant metastasis WITH or WITHOUT distant lymph node(s)

9 Unknown if extension or metastasis

CERVIX

8000-8700, 8720-8790, 8805, 8933, 8980, 9110, 9581, 9700-9701

C530-C531, C538-C539

C530 Endocervix

C531 Exocervix

C538 Overlapping lesion of cervix

C539 Cervix uteri

Note 1: The following sources were used in the development of this chapter

- SEER Extent of Disease 1988: Codes and Coding Instructions (3rd Edition, 1998) (<https://seer.cancer.gov/archive/manuals/EOD10Dig.3rd.pdf>)
- SEER Summary Staging Manual-2000: Codes and Coding Instructions (<https://seer.cancer.gov/tools/ssm/>)
- Collaborative Stage Data Collection System, version 02.05: <https://cancerstaging.org/cstage/Pages/default.aspx>
- Chapter 52 *Cervix Uteri*, in the AJCC Cancer Staging Manual, Eighth Edition (2017) published by Springer International Publishing. Used with permission of the American College of Surgeons, Chicago, Illinois.

Note 2: See the following chapters for the listed histologies

- 8710-8714, 8800-8804, 8806-8932, 8934, 8940-8975, 8981-9105, 9120-9137, 9141-9580, 9582: *Soft Tissue*
- 8935-8936: *GIST*
- 9140: *Kaposi Sarcoma*

Note 3: Isolated tumor cells (ITCs) are defined as single tumor cells or small clusters not greater than 0.2 mm, usually detected by immunohistochemical (IHC) or molecular methods. ITCs do not usually show evidence of malignant activity (e.g., proliferation or stromal reaction).

- Lymph nodes with ITCs only are **not** counted as positive nodes for Summary Stage

Note 4: Para-aortic nodes are now regional instead of distant.

SUMMARY STAGE

0 In situ, intraepithelial, noninvasive

- Cancer in situ WITH endocervical gland involvement
- Cervical intraepithelial neoplasia (CIN) Grade III
- Preinvasive

1 Localized only (localized, NOS)

- FIGO Stage IA1
 - Measured stromal invasion 3.0 mm or less and 7.0 mm or less in horizontal spread
- FIGO Stage IA2
 - Measured stromal invasion 3.1 mm to 5.0 mm with a horizontal spread of 7.0 mm or less
- FIGO Stage IA [NOS]
 - Measured stromal invasion 5.0 mm or less measured from the base of the epithelium AND horizontal spread of 7.0 mm or less
- FIGO Stage IB
- FIGO Stage I [NOS]
 - Clinically visible lesion (macroscopic), including superficial invasion
 - Confined to cervix uteri or uterus, NOS, except corpus uteri, NOS
 - (Not clinically visible or unknown if clinically visible)

2 Regional by direct extension only

- FIGO Stage IIA, IIB, II [NOS]
 - Confined to corpus uteri, size, depth and horizontal spread unknown
 - Corpus uteri, NOS
 - Cul de sac (rectouterine pouch)
 - Invasion beyond uterus, NOS
 - Ligament(s) (broad, cardinal, uterosacral)
 - Parametrial (paracervical soft tissue) invasion
 - Upper two-thirds of vagina including fornices
 - Vagina, NOS
 - Vaginal wall, NOS
- FIGO Stage IIIA
 - Bladder wall
 - Bladder, NOS excluding mucosa
 - Bullous edema of bladder mucosa
 - Lower third of vagina
 - Rectal wall
 - Rectum, NOS excluding mucosa
 - Ureter, intra- and extramural
 - Vagina, lower third (not extending to pelvic wall)
 - Vulva
- FIGO Stage IIIB
 - Described clinically as frozen pelvis
 - Hydronephrosis or nonfunctioning kidney
 - Pelvic wall(s)
- FIGO Stage III [NOS]
 - Fallopian tube(s)
 - Ovary(ies)
 - Urethra

3 Regional lymph node(s) involved only

- Aortic
 - Lateral aortic
 - Para-aortic
 - Periaortic
- Iliac, NOS
 - Common
 - External
 - Internal (hypogastric) (obturator), NOS
- Paracervical
- Parametrial
- Pelvic, NOS
- Sacral, NOS
 - Lateral (laterosacral)
 - Middle (promontorial) (Gerota's node)
 - Presacral
 - Uterosacral
- Regional lymph node(s), NOS
 - Lymph node(s), NOS

4 Regional by BOTH direct extension AND regional lymph node(s) involved

- Codes (2) + (3)

7 Distant site(s)/lymph node(s) involved

- Distant site(s) (including further contiguous extension)
 - Bladder mucosa
 - Rectal mucosa
 - Sigmoid colon
 - Small intestine
 - FIGO Stage IVA, IVB, IV [NOS]
- Distant lymph node(s), NOS
 - Inguinal
 - Mediastinal
 - Scalene
 - Supraclavicular
- Distant metastasis, NOS
 - Carcinomatosis
 - Distant metastasis WITH or WITHOUT distant lymph node(s)

9 Unknown if extension or metastasis

CORPUS UTERI

Primary Site	ENDOMETRIAL MUCOSA - Columnar epithelium - Stroma (lamina propria)	Myometrium (3 layers)	Serosa (tunica serosa)
Corpus Uteri (C54_)	Yes	Yes	Yes

The layers of the corpus include:

1. The **EPITHELIAL LAYER** contains no blood vessels or lymphatics.
2. The **BASEMENT MEMBRANE**, a sheet of extracellular material, functions as a filtration barrier and a boundary involved in generating and maintaining tissue structure.
3. The **LAMINA PROPRIA**, composed of areolar connective tissue, contains blood vessels, nerves, and, in some regions, glands. Once tumor has broken through the basement membrane into the lamina propria, it can spread by way of the lymphatics and blood vessels to other parts of the body.
4. There is **NO MUSCULARIS MUCOSAE** or **SUBMUCOSA** in the endometrium.
5. The **MYOMETRIUM** (muscularis) is composed of three layers of smooth muscle fibers; it constitutes the wall of the organ.
6. The **SEROSA**, the outermost layer covering the corpus uteri, is a serous membrane, part of the visceral peritoneum.

DISTINGUISHING “IN SITU” AND “LOCALIZED” TUMORS FOR THE CORPUS UTERI

Careful attention must be given to the use of the term “confined to endometrium” for corpus uterus.

1. Determine if the tumor is confined to the columnar epithelium, in which case it is in situ, OR
2. If the tumor has penetrated the basement membrane to invade the stroma (lamina propria), in which case it is assigned 1 (localized).

CORPUS CARCINOMA AND CARCINOSARCOMA

8000-8700, 8720-8790, 8950, 8980, 9700-9701

C540-C543, C548-C549, C559

C540 Isthmus uteri

C541 Endometrium

C542 Myometrium

C543 Fundus uteri

C548 Overlapping lesion of corpus uteri

C549 Corpus uteri

C559 Uterus, NOS

Note 1: The following sources were used in the development of this chapter

- SEER Extent of Disease 1988: Codes and Coding Instructions (3rd Edition, 1998) (<https://seer.cancer.gov/archive/manuals/EOD10Dig.3rd.pdf>)
- SEER Summary Staging Manual-2000: Codes and Coding Instructions (<https://seer.cancer.gov/tools/ssm/>)
- Collaborative Stage Data Collection System, version 02.05: <https://cancerstaging.org/cstage/Pages/default.aspx>
- Chapter 53 *Corpus Uteri-Carcinoma and Carcinosarcoma*, in the AJCC Cancer Staging Manual, Eighth Edition (2017) published by Springer International Publishing. Used with permission of the American College of Surgeons, Chicago, Illinois.

Note 2: See the following schemas for the listed histologies

- 8710-8714, 8800-8941, 8951-8975, 8981-9137, 9141-9582: *Corpus Sarcoma*
- 9140: *Kaposi Sarcoma*

Note 3: Isolated tumor cells (ITCs) are defined as single tumor cells or small clusters not greater than 0.2 mm, usually detected by immunohistochemical (IHC) or molecular methods. ITCs do not usually show evidence of malignant activity (e.g., proliferation or stromal reaction).

- Lymph nodes with ITCs only are **not** counted as positive nodes for Summary Stage

SUMMARY STAGE

0 In situ, intraepithelial, noninvasive, preinvasive

1 Localized only (localized, NOS)

- FIGO Stage IA
 - Invasion of inner half of myometrium
- FIGO Stage IB
 - Invasion of outer half of myometrium

- FIGO Stage I [NOS]
 - Confined to uterus, NOS
 - Invasion of myometrium, NOS
 - Invasive cancer confined to corpus uteri

2 Regional by direct extension only

- FIGO Stage II
 - Cervix uteri, NOS
 - Cervical stromal invasion
 - Endocervical glandular involvement
 - Tumor invading the stromal connective tissue of the cervix but not extending beyond the uterus
- FIGO Stage IIIA
 - Adnexa (direct extension or metastasis)
 - Fallopian tube(s)
 - Ovary(ies)
 - Serosa, NOS
 - Tunica serosa (visceral peritoneum of corpus, serosa covering the corpus)
 - Tunica serosa of corpus
- FIGO Stage IIIB
 - Bladder, NOS (excluding mucosa)
 - Described clinically as "frozen pelvis", NOS
 - Ligaments (broad, round, uterosacral)
 - Parametrium, NOS
 - Parietal serosa of pelvic wall
 - Pelvic wall(s)
 - Peritoneal cytology positive for malignant cells
 - Rectal wall
 - Rectum, NOS excluding mucosa
 - Ureter
 - Vagina (direct extension or metastasis)
 - Visceral peritoneum of pelvic organs excluding serosa of corpus
 - Vulva
- FIGO Stage III [NOS]

3 Regional lymph node(s) involved only

- Aortic (lateral [lumbar], Periaortic, NOS)
- Iliac (external, internal [hypogastric], NOS)
- Lateral (laterosacral)
- Middle (promontorial) (Gerota's node)
- Obturator
- Para-aortic
- Paracervical
- Parametrial
- Pelvic, NOS

- Presacral
- Sacral
- Uterosacral
- Regional lymph node(s), NOS
 - Lymph node(s), NOS

4 Regional by BOTH direct extension AND regional lymph node(s) involved

- Codes (2) + (3)

7 Distant site(s)/lymph node(s) involved

- Distant site(s) (including further contiguous extension)
 - FIGO Stage IVA
 - Abdominal serosa (visceral or parietal peritoneum of abdomen)
 - Bladder mucosa (excluding bullous edema)
 - Bowel mucosa
 - Cul de sac (rectouterine pouch or Pouch of Douglas)
 - Sigmoid colon
 - Small intestine
 - FIGO Stage IVB
 - Bone
 - Intraperitoneal disease
 - Liver
 - Lung
 - FIGO Stage IV [NOS]
- Distant lymph node(s), NOS
 - Deep inguinal, NOS
 - Node of Cloquet or Rosenmuller (highest deep inguinal)
 - Inguinal, NOS
 - Superficial inguinal (femoral)
- Distant metastasis, NOS
 - Carcinomatosis
 - Distant metastasis WITH or WITHOUT distant lymph node(s)

9 Unknown if extension or metastasis

CORPUS SARCOMA

8710-8714, 8800-8941, 8951-8975, 8981-9137, 9141-9582

C540-C543, C548-C549, C559

C540 Isthmus uteri

C541 Endometrium

C542 Myometrium

C543 Fundus uteri

C548 Overlapping lesion of corpus uteri

C549 Corpus uteri

C559 Uterus, NOS

Note 1: The following sources were used in the development of this chapter

- SEER Extent of Disease 1988: Codes and Coding Instructions (3rd Edition, 1998) (<https://seer.cancer.gov/archive/manuals/EOD10Dig.3rd.pdf>)
- SEER Summary Staging Manual-2000: Codes and Coding Instructions (<https://seer.cancer.gov/tools/ssm/>)
- Collaborative Stage Data Collection System, version 02.05: <https://cancerstaging.org/cstage/Pages/default.aspx>
- Chapter 54 *Corpus Uteri-Sarcoma*, in the AJCC Cancer Staging Manual, Eighth Edition (2017) published by Springer International Publishing. Used with permission of the American College of Surgeons, Chicago, Illinois.

Note 2: Code 0 is not applicable for this chapter.

Note 3: Isolated tumor cells (ITCs) are defined as single tumor cells or small clusters not greater than 0.2 mm, usually detected by immunohistochemical (IHC) or molecular methods. ITCs do not usually show evidence of malignant activity (e.g., proliferation or stromal reaction).

- Lymph nodes with ITCs only are **not** counted as positive nodes for Summary Stage

SUMMARY STAGE

1 Localized only (localized, NOS)

- FIGO Stage IA
 - Confined to endometrium or endocervix
 - (Glandular, stromal, or both)
- FIGO Stage IB
 - Invasion of inner half of myometrium
 - Tumor invades less than one-half of myometrium
- FIGO Stage IC
 - Invasion of outer half of myometrium
 - Tumor invades one-half or more of myometrium

- FIGO Stage I [NOS]
 - Invasion of myometrium, NOS
 - Invasive cancer confined to corpus uteri
 - Tunica serosa of the visceral peritoneum (serosa covering the corpus)

2 Regional by direct extension only

- FIGO Stage IIA
 - Cervix uteri, NOS, but not beyond uterus
 - Confined to endocervix (Glandular, stromal, or both)
 - Extension or metastasis within true pelvis
 - Adnexa, NOS
 - Fallopian tube(s)
 - Ligaments (broad, round, uterosacral)
 - Ovary(ies)
 - Invasion of myometrium WITH involvement of endocervix
 - Parametrium
 - Visceral peritoneum of pelvic organs excluding serosa of corpus uteri
- FIGO Stage IIB
 - Described clinically as "frozen pelvis", NOS
 - Parietal serosa of pelvic cavity
 - Pelvic wall(s)
 - Ureter
 - Vagina
 - Vulva
- FIGO Stage II [NOS]
 - Bladder wall
 - Bladder, NOS excluding mucosa
 - Extension beyond uterus, within pelvis, NOS
 - Peritoneal cytology positive for malignant cells
 - Rectal wall
 - Rectum, NOS excluding mucosa

3 Regional lymph node(s) involved only

- Aortic (lateral [lumbar], Periaortic, NOS)
- Iliac (external, internal [hypogastric], NOS)
- Lateral (laterosacral)
- Middle (promontorial) (Gerota's node)
- Obturator
- Para-aortic
- Paracervical
- Parametrial
- Pelvic, NOS

- Presacral
- Sacral
- Uterosacral
- Regional lymph node(s), NOS
 - Lymph node(s), NOS

4 Regional by BOTH direct extension AND regional lymph node(s) involved

- Codes (2) + (3)

7 Distant site(s)/lymph node(s) involved

- Distant site(s) (including further contiguous extension)
 - Cul de sac (rectouterine pouch)
 - FIGO Stage IIIA, IIIB, III [NOS]
 - Abdominal serosa (visceral or parietal peritoneum of abdomen)
 - Infiltration of abdominal tissues
 - Sigmoid colon
 - Small intestine
 - Other abdominal structures
 - FIGO Stage IVA, IVB, IV [NOS]
- Distant lymph node(s), NOS
 - Deep inguinal, NOS
 - Node of Cloquet or Rosenmuller (highest deep inguinal)
 - Inguinal, NOS
 - Superficial inguinal (femoral)
- Distant metastasis, NOS
 - Carcinomatosis
 - Distant metastasis WITH or WITHOUT distant lymph node(s)

9 Unknown if extension or metastasis

OVARY AND PRIMARY PERITONEAL CARCINOMA

8000-8700, 8720-8790, 8806, 8822, 8930-8931, 8933, 8950, 8960, 8980, 9000, 9050, 9052, 9060, 9070-9071, 9073, 9080, 9085, 9090-9091, 9100, 9110, 9700-9701

C569: 8810, 8815, 8825, 8890, 8935-8936

C481-C482, C488, C569

C481 Specified parts of peritoneum (female only)

C482 Peritoneum (female only)

C488 Overlapping lesion of retroperitoneum and peritoneum (female only)

C569 Ovary

Note 1: The following sources were used in the development of this chapter

- SEER Extent of Disease 1988: Codes and Coding Instructions (3rd Edition, 1998) (<https://seer.cancer.gov/archive/manuals/EOD10Dig.3rd.pdf>)
- SEER Summary Staging Manual-2000: Codes and Coding Instructions (<https://seer.cancer.gov/tools/ssm/>)
- Collaborative Stage Data Collection System, version 02.05: <https://cancerstaging.org/cstage/Pages/default.aspx>
- Chapter 55 *Ovary, Fallopian Tube, and Primary Peritoneal Carcinoma*, in the AJCC Cancer Staging Manual, Eighth Edition (2017) published by Springer International Publishing. Used with permission of the American College of Surgeons, Chicago, Illinois.

Note 2: See the following chapters for the listed histologies

- C481-C482, C488 and Sex: 1, 3, 5, 9 (8000-8700, 8720-8790, 8822, 8933, 8950, 8960, 8980, 9000, 9050, 9052, 9060, 9070-9071, 9073, 9080, 9085, 9090-9091, 9100, 9110, 9700-9701): *Retroperitoneum*
- C481-C482, C488 and Sex: 1, 3, 5, 9 (8806, 8930-8931): *Soft Tissue*
- C481-C482, C488 (8710-8714, 8800-8803, 8810-8821, 8823-8921, 8932, 8934, 8940-8941, 8951-8959, 8963-8975, 8981-8990, 9010-9016, 9030-9043, 9045, 9051, 9053-9055, 9061-9065, 9072, 9081-9084, 9086, 9101-9105, 9120-9137, 9141-9230, 9240-9580, 9582): *Retroperitoneum*
- C481-C482, C488 (8804-8805, 8991, 9020, 9044, 9231, 9581): *Soft Tissue*
- C481-C482, C488 (8935-8936): *GIST*
- C569 (8710-8714, 8800-8805, 8811-8814, 8820-8821, 8823-8824, 8826-8881, 8891-8921, 8932, 8934, 8940-8941, 8951-8959, 8963-8975, 8981-8991, 9010-9045, 9051, 9053-9055, 9061-9065, 9072, 9081-9084, 9086, 9101-9105, 9120-9137, 9141-9582): *Soft Tissue*
- 9140: *Kaposi Sarcoma*

Note 3: Ascites, NOS is considered negative.

Note 4: Isolated tumor cells (ITCs) are defined as single tumor cells or small clusters not greater than 0.2 mm, usually detected by immunohistochemical (IHC) or molecular methods. ITCs do not usually show evidence of malignant activity (e.g., proliferation or stromal reaction).

- Lymph nodes with ITCs only are **not** counted as positive nodes for Summary Stage

Note 5: Peritoneal implants outside the pelvis must be microscopically confirmed. Peritoneal implants may also be called seeding, salting, talcum powder appearance, or studding.

Note 6: If implants are mentioned, determine whether they are in the pelvis or in the abdomen and code appropriately to regional by direct extension or to distant. If not stated, code to distant.

SUMMARY STAGE

0 In situ: noninvasive, intraepithelial

- Limited to tubal mucosa
- Preinvasive

1 Localized only (localized, NOS)

- FIGO Stage IA
 - Limited to one ovary (capsule intact)
- FIGO Stage IB
 - Limited to both ovaries (capsule intact)
- FIGO Stage IC1
 - Limited to both ovaries WITH surgical spill
- FIGO Stage I, IC (does not include IC2, IC3)
 - Limited to one or both ovary(ies), NOS
- Localized primary peritoneal cancer
 - (Primary sites C481, C482, C488)

2 Regional by direct extension only

- FIGO Stage IC2
 - Limited to one or both ovaries
 - WITH capsule ruptured before surgery
 - OR tumor on ovarian surface
- FIGO Stage IC3
 - Malignant cells in ascites or peritoneal washings
 - WITH or WITHOUT capsule rupture
- FIGO Stage IIA
 - Extension to or implants on
 - Adnexa

- Fallopian tube
 - Uterus, NOS
- FIGO Stage IIB
 - Extension to or implants on
 - Adjacent peritoneum
 - Bladder
 - Bladder serosa
 - Cul de sac (rectouterine pouch)
 - Ligament(s): (broad, ovarian, round, suspensory)
 - Mesovarium
 - Parametrium
 - Rectosigmoid
 - Rectum
 - Sigmoid colon (including sigmoid mesentery)
 - Ureter (pelvic portion)
- FIGO Stage II [NOS]
 - Confined to pelvis
 - Tumor involves one or both ovaries
 - WITH pelvic extension, NOS (below pelvic brim)
- FIGO Stage IIIA
 - Microscopic peritoneal implants beyond pelvis
 - Includes peritoneal surface/capsule of liver

3 Regional lymph node(s) involved only

- Aortic, NOS
 - Lateral (lumbar)
 - Para-aortic
 - Periaortic
- Iliac, NOS
 - Common
 - External
 - Internal (hypogastric, obturator, NOS)
- Intra-abdominal
- Lateral sacral (laterosacral)
- Pelvic, NOS
- Retroperitoneal, NOS
- Subdiaphragmatic (primary peritoneal carcinoma)
- Regional lymph node(s), NOS
 - Lymph node(s), NOS

4 Regional by BOTH direct extension AND regional lymph node(s) involved

- Codes (2) + (3)

7 Distant site(s)/lymph node(s) involved

- Distant site(s) (including further contiguous extension)
 - FIGO Stage IIIB
 - Macroscopic peritoneal implants beyond pelvis
 - Less than or equal to 2 cm in diameter
 - Includes peritoneal surface of liver
 - FIGO Stage IIIC
 - Macroscopic peritoneal implants beyond pelvis
 - Greater than 2 cm in diameter
 - Includes peritoneal surface of liver (liver capsule)
 - Includes tumor extension to liver and spleen **WITHOUT** parenchymal
 - Involvement of either organ
 - FIGO Stage III [NOS]
 - One or both ovaries involved
 - OR primary peritoneal cancer
 - **WITH** microscopic confirmed peritoneal metastasis outside of the pelvis
 - Peritoneal implants, NOS
 - FIGO Stage IVA
 - Pleural effusion with positive cytology
 - FIGO Stage IVB
 - Extra-abdominal organs
 - Liver parenchymal
 - Spleen parenchymal
 - Transmural involvement of intestine
 - FIGO Stage IV [NOS]
- Distant lymph node(s), NOS
 - Inguinal
- Distant metastasis, NOS
 - Carcinomatosis (involvement of multiple parenchymal organs
 - OR diffuse involvement of multiple non-abdominal organs)
 - Distant metastasis **WITH** or **WITHOUT** distant lymph node(s)

9 Unknown if extension or metastasis

FALLOPIAN TUBE

8000-8700, 8720-8790, 8806, 8810, 8815, 8822, 8825, 8890, 8930-8931, 8933, 8935-8936, 8950, 8960, 8980, 9000, 9050, 9052, 9060, 9070-9071, 9073, 9080, 9085, 9090-9091, 9100, 9110, 9700-9701

C570

C570 Fallopian tube

Note 1: The following sources were used in the development of this chapter

- SEER Extent of Disease 1988: Codes and Coding Instructions (3rd Edition, 1998) (<https://seer.cancer.gov/archive/manuals/EOD10Dig.3rd.pdf>)
- SEER Summary Staging Manual-2000: Codes and Coding Instructions (<https://seer.cancer.gov/tools/ssm/>)
- Collaborative Stage Data Collection System, version 02.05: <https://cancerstaging.org/cstage/Pages/default.aspx>
- Chapter 55 *Ovary, Fallopian Tube, and Primary Peritoneal Carcinoma*, in the AJCC Cancer Staging Manual, Eighth Edition (2017) published by Springer International Publishing. Used with permission of the American College of Surgeons, Chicago, Illinois.

Note 2: See the following schemas for the listed histologies

- 8710-8714, 8800-8805, 8811-8814, 8820-8821, 8823-8824, 8826-8881, 8891-8921, 8932, 8934, 8940-8941, 8951-8959, 8963-8975, 8981-8991, 9010-9045, 9051, 9053-9055, 9061-9065, 9072, 9081-9084, 9086, 9101-9105, 9120-9137, 9141-9582: *Soft Tissue*
- 9140: *Kaposi Sarcoma*

Note 3: Ascites, NOS is considered negative.

Note 4: Isolated tumor cells (ITCs) are defined as single tumor cells or small clusters not greater than 0.2 mm, usually detected by immunohistochemical (IHC) or molecular methods. ITCs do not usually show evidence of malignant activity (e.g., proliferation or stromal reaction).

- Lymph nodes with ITCs only are **not** counted as positive nodes for Summary Stage

Note 5: If implants are mentioned, determine whether they are in the pelvis or in the abdomen and code appropriately to regional by direct extension or to distant. If not stated, code to distant.

SUMMARY STAGE

0 In situ: noninvasive, intraepithelial

- Limited to tubal mucosa
- Preinvasive

1 Localized only (localized, NOS)

- FIGO Stage IA
 - Limited to one fallopian tube
- FIGO Stage IB
 - Limited to both fallopian tubes
- FIGO Stage IC1
 - Limited to both fallopian tubes WITH surgical spill
- FIGO Stage IC [NOS] (does not include IC2, IC3)
 - Limited to one or both fallopian tube(s), NOS
- FIGO Stage I [NOS]

2 Regional by direct extension only

- FIGO Stage IC2
 - Limited to one or both fallopian tubes
 - WITH capsule ruptured before surgery
 - OR tumor on fallopian tube surface
- FIGO Stage IC3
 - Malignant cells in ascites or peritoneal washings
 - WITH or WITHOUT capsule rupture
- FIGO Stage IIA
 - Extension to or implants on
 - Adnexa
 - Corpus uteri
 - Ovary(ies)
 - Uterus, NOS
- FIGO Stage IIB
 - Extension to or implants to other pelvic tissues
 - Adjacent peritoneum
 - Broad ligament, ipsilateral
 - Cul de sac (rectouterine pouch)
 - Mesosalpinx, ipsilateral
 - Rectosigmoid
 - Sigmoid
- FIGO Stage II [NOS]
 - Confined to pelvis

- Tumor involves one or both fallopian tubes
 - WITH pelvic extension, NOS (below pelvic brim)
- FIGO Stage IIIA
 - Microscopic peritoneal implants beyond pelvis
 - Includes peritoneal surface/capsule of liver
 - Omentum
 - Small intestine

3 Regional lymph node(s) involved only

- Aortic, NOS
 - Lateral (lumbar)
 - Para-aortic
 - Periaortic
- Iliac, NOS
 - Common
 - External
 - Internal (hypogastric, obturator, NOS)
- Intra-abdominal
- Lateral sacral (laterosacral)
- Pelvic, NOS
- Retroperitoneal, NOS
- Subdiaphragmatic (primary peritoneal carcinoma)
- Regional lymph node(s), NOS
 - Lymph node(s), NOS

4 Regional by BOTH direct extension AND regional lymph node(s) involved

- Codes (2) + (3)

7 Distant site(s)/lymph node(s) involved

- Distant site(s) (including further contiguous extension)
 - FIGO Stage IIIB
 - Includes peritoneal surface of liver
 - Macroscopic peritoneal implants beyond pelvis less than or equal to 2 cm in diameter
 - FIGO Stage IIIC
 - Includes peritoneal surface of liver (liver capsule)
 - Includes tumor extension to liver and spleen WITHOUT parenchymal
 - Involvement of either organ
 - Macroscopic peritoneal implants beyond pelvis greater than 2 cm in diameter
 - FIGO Stage III [NOS]

- One or both fallopian tubes involved WITH microscopic confirmed peritoneal metastasis outside of the pelvis
 - Peritoneal implants, NOS
 - FIGO Stage IVA
 - Pleural effusion with positive cytology
 - FIGO Stage IVB
 - Extra-abdominal organs
 - Liver parenchymal
 - Spleen parenchymal
 - Transmural involvement of intestine
 - FIGO Stage IV [NOS]
- Distant lymph node(s), NOS
 - Inguinal
- Distant metastasis, NOS
 - Carcinomatosis (involvement of multiple parenchymal organs)
 - WITH or WITHOUT distant lymph node(s) OR pleural effusion
 - Distant metastasis WITH or WITHOUT distant lymph node(s)

9 Unknown if extension or metastasis

ADNEXA UTERINE OTHER

8000-8700, 8720-8790, 9700-9701 (C571-C574)

C571-C574

C571 Broad ligament

C572 Round ligament

C573 Parametrium

C574 Uterine adnexa

Note 1: The following sources were used in the development of this schema

- SEER Extent of Disease 1988: Codes and Coding Instructions (3rd Edition, 1998) (<https://seer.cancer.gov/archive/manuals/EOD10Dig.3rd.pdf>)
- SEER Summary Staging Manual-2000: Codes and Coding Instructions (<https://seer.cancer.gov/tools/ssm/>)
- Collaborative Stage Data Collection System, version 02.05: <https://cancerstaging.org/cstage/Pages/default.aspx>

Note 2: See the following chapters for the listed histologies

- 8710-8714, 8800-8934, 8940-9137, 9141-9582: Soft Tissue
- 8935-8936: GIST
- 9140: Kaposi Sarcoma

Note 3: Summary Stage is the only applicable staging system for this site/histology/schema.

SUMMARY STAGE

0 In situ: noninvasive, intraepithelial

1 Localized only (localized, NOS)

- Confined to tissue or organ of origin

2 Regional by direct extension only

- Corpus uteri
- Fallopian tube for ligaments
- Mesosalpinx, ipsilateral
- Ovary, ipsilateral
- Peritoneum
- Uterus, NOS

3 Regional lymph node(s) involved only

- Aortic, NOS
 - Lateral (lumbar)
 - Para-aortic
 - Periaortic
- Iliac, NOS
 - Common
 - External
 - Internal (hypogastric)
 - Obturator
- Inguinal
- Lateral sacral (laterosacral)
- Pelvic, NOS
- Retroperitoneal, NOS
- Regional lymph node(s), NOS
 - Lymph node(s), NOS

4 Regional by BOTH direct extension AND regional lymph node(s) involved

- Codes (2) + (3)

7 Distant site(s)/lymph node(s) involved

- Distant site(s) (including further contiguous extension)
 - Cervix uteri
 - Cul de sac (rectouterine pouch)
 - Omentum
 - Ovary, contralateral
 - Rectosigmoid
 - Sigmoid
 - Small intestine
- Distant lymph node(s), NOS
- Distant metastasis, NOS
 - Carcinomatosis
 - Distant metastasis WITH or WITHOUT distant lymph node(s)

9 Unknown if extension or metastasis

GENITAL FEMALE OTHER

8000-8700, 8720-8790, 9700-9701

C577-C579

C577 Other specified parts of female genital organs

C578 Overlapping lesion of female genital organs

C579 Female genital tract, NOS

Note 1: The following sources were used in the development of this chapter

- SEER Extent of Disease 1988: Codes and Coding Instructions (3rd Edition, 1998) (<https://seer.cancer.gov/archive/manuals/EOD10Dig.3rd.pdf>)
- SEER Summary Staging Manual-2000: Codes and Coding Instructions (<https://seer.cancer.gov/tools/ssm/>)
- Collaborative Stage Data Collection System, version 02.05: <https://cancerstaging.org/cstage/Pages/default.aspx>

Note 2: See the following chapters for the listed histologies

- 8710-8714, 8800-8934, 8940-9137, 9141-9582: *Soft Tissue*
- 8935-8936: *GIST*
- 9140: *Kaposi Sarcoma*

Note 3: Summary Stage is the only applicable staging system for this site/histology/schema.

SUMMARY STAGE

0 In situ: noninvasive, intraepithelial

1 Localized only (localized, NOS)

- Confined to tissue or organ of origin

2 Regional by direct extension only

- Adjacent connective tissue
- Adjacent organ(s)/structure(s)
 - Adnexa
 - Broad ligament(s)
 - Cervix uteri
 - Corpus uteri
 - Fallopian tube(s)
 - Ovary(ies)
 - Parametrium

- Round ligament(s)
- Uterus, NOS
- Vagina

3 Regional lymph node(s) involved only

- Regional lymph node(s), NOS
 - Lymph node(s), NOS

4 Regional by BOTH direct extension AND regional lymph node(s) involved

- Codes (2) + (3)

7 Distant site(s)/lymph node(s) involved

- Distant site(s) (including further contiguous extension)
 - Other organ(s) of pelvis
- Distant lymph node(s), NOS
- Distant metastasis, NOS
 - Carcinomatosis
 - Distant metastasis WITH or WITHOUT distant lymph node(s)

9 Unknown if extension or metastasis

PLACENTA

8000-8700, 8720-8790, 9100-9105, 9700-9701

C589

C589 Placenta

Note 1: The following sources were used in the development of this chapter

- SEER Extent of Disease 1988: Codes and Coding Instructions (3rd Edition, 1998) (<https://seer.cancer.gov/archive/manuals/EOD10Dig.3rd.pdf>)
- SEER Summary Staging Manual-2000: Codes and Coding Instructions (<https://seer.cancer.gov/tools/ssm/>)
- Collaborative Stage Data Collection System, version 02.05: <https://cancerstaging.org/cstage/Pages/default.aspx>
- Chapter 56 *Gestational Trophoblastic Neoplasms*, in the AJCC Cancer Staging Manual, Eighth Edition (2017) published by Springer International Publishing. Used with permission of the American College of Surgeons, Chicago, Illinois.

Note 2: See the following chapters for the listed histologies

- 8710-8714, 8800-8934, 8940-9091, 9110-9137, 9141-9582: *Soft Tissue*
- 8935-8936: *GIST*
- 9140: *Kaposi Sarcoma*

Note 3: If a trophoblastic tumor is not associated with a pregnancy and arises in another site, such as ovary, use the primary site code and the appropriate Summary Stage chapter.

SUMMARY STAGE

0 In situ, intraepithelial, noninvasive

1 Localized only (localized, NOS)

- FIGO Stage I
 - Confined to placenta

2 Regional by direct extension only

- FIGO Stage II
 - Adjacent connective tissue, NOS
 - Cervix
 - Corpus uteri
 - Other genital structure(s) by DIRECT EXTENSION or NOS
 - Broad ligament

- Fallopian tube(s)
- Genital structure(s), NOS
- Ovary(ies)
- Vagina
- Uterus, NOS

3 Regional lymph node(s) involved only

- Aortic, NOS
 - Lateral (lumbar)
 - Para-aortic
 - Peri-aortic
- Iliac, NOS
 - Common
 - External
 - Internal (hypogastric), NOS
 - Obturator
- Parametrial
- Pelvic, NOS
- Sacral
 - Lateral (laterosacral)
 - Middle (promontorial) (Gerota's node)
 - Presacral
 - Uterosacral
- Regional lymph node(s), NOS
 - Lymph node(s), NOS

4 Regional by BOTH direct extension AND regional lymph node(s) involved

- Codes (2) + (3)

7 Distant site(s)/lymph node(s) involved

- Distant site(s) (including further contiguous extension)
 - Other genital structure(s) by METASTASIS
 - Broad ligament
 - Cervix uteri
 - Corpus uteri
 - Fallopian tube(s)
 - Genital structure(s), NOS
 - Ovary(ies)
 - Uterus, NOS
 - Vagina

- Distant lymph node(s), NOS
 - Superficial inguinal (femoral)
- Distant metastasis, NOS
 - Carcinomatosis
 - Distant metastasis WITH or WITHOUT distant lymph node(s)

9 Unknown if extension or metastasis

MALE GENITAL SYSTEM

PENIS

8000-8040, 8042-8180, 8191-8246, 8248-8700

C600-C602, C608-C609

C600 Prepuce

C601 Glans penis

C602 Body of penis

C608 Overlapping lesion of penis

C609 Penis, NOS

Note 1: The following sources were used in the development of this chapter

- SEER Extent of Disease 1988: Codes and Coding Instructions (3rd Edition, 1998) (<https://seer.cancer.gov/archive/manuals/EOD10Dig.3rd.pdf>)
- SEER Summary Staging Manual-2000: Codes and Coding Instructions (<https://seer.cancer.gov/tools/ssm/>)
- Collaborative Stage Data Collection System, version 02.05: <https://cancerstaging.org/cstage/Pages/default.aspx>
- Chapter 57 *Penis*, in the AJCC Cancer Staging Manual, Eighth Edition (2017) published by Springer International Publishing. Used with permission of the American College of Surgeons, Chicago, Illinois.

Note 2: See the following chapters for the listed histologies

- 8041, 8190, 8247: *Merkel Cell Skin*
- 8710-8714, 8800-8934, 8940-9137, 9141-9582: *Soft Tissue*
- 8720-8790: *Melanoma Skin*
- 8935-8936: *GIST*
- 9140: *Kaposi Sarcoma*
- 9700-9701: *Mycosis Fungoides*

Note 3: Code 0 if a verrucous carcinoma is described as noninvasive or as having a broad pushing border or penetration.

- If there is destructive invasion of verrucous carcinoma into structures in code 1 or greater, assign the appropriate higher code

SUMMARY STAGE

0 In situ, intraepithelial, noninvasive

- Bowen disease
- Carcinoma in situ (Penile intraepithelial neoplasia [PeIN])

- Erythroplasia of Queyrat
- Noninvasive localized squamous cell carcinoma
- Noninvasive verrucous carcinoma
- Verrucous carcinoma, NOS

1 Localized only (localized, NOS)

- Confined to penis
 - WITH or WITHOUT perineural and/or lymphovascular invasion
- Dartos fascia (foreskin)
- Dermis (foreskin)
- Lamina propria (glans and foreskin)
- Subepithelial connective tissue (shaft)
- Verrucous carcinoma, NOS

2 Regional by direct extension only

- Corpus (cavernosum or spongiosum, including tunica albuginea)
 - WITH or WITHOUT urethral invasion
- Muscle, NOS
 - Bulbospongiosus
 - Ischiocavernosus
 - Superficial transverse perineal
- Prostate
- Pubic bone
- Scrotum
- Skin (abdominal, perineum)

3 Regional lymph node(s) involved only

- Iliac, NOS
 - External
 - Internal (hypogastric, obturator)
 - Inguinal, NOS
 - Node of Cloquet or Rosenmuller (highest deep inguinal)
 - Superficial [femoral]
 - Pelvic, NOS
- Regional lymph node(s), NOS
 - Lymph node(s), NOS

4 Regional by BOTH direct extension AND regional lymph node(s) involved

- Codes (2) + (3)

7 Distant site(s)/lymph node(s) involved

- Distant site(s) (including further contiguous extension)
 - Testis
- Distant lymph node(s), NOS
- Distant metastasis, NOS
 - Carcinomatosis
 - Distant metastasis WITH or WITHOUT distant lymph node(s)

9 Unknown if extension or metastasis

PROSTATE

8000-8700, 8720-8790, 9700-9701

C619

C619 Prostate gland

Note 1: The following sources were used in the development of this chapter

- SEER Extent of Disease 1988: Codes and Coding Instructions (3rd Edition, 1998) (<https://seer.cancer.gov/archive/manuals/EOD10Dig.3rd.pdf>)
- SEER Summary Staging Manual-2000: Codes and Coding Instructions (<https://seer.cancer.gov/tools/ssm/>)
- Collaborative Stage Data Collection System, version 02.05: <https://cancerstaging.org/cstage/Pages/default.aspx>
- Chapter 58 *Prostate*, in the AJCC Cancer Staging Manual, Eighth Edition (2017) published by Springer International Publishing. Used with permission of the American College of Surgeons, Chicago, Illinois.

Note 2: See the following chapters for the listed histologies

- 8710-8714, 8800-8934, 8940-9137, 9141-9582: *Soft Tissue*
- 8935-8936: *GIST*
- 9140: *Kaposi Sarcoma*

Note 3: See the *Urethra* chapter for transitional cell (urothelial) carcinoma of the prostatic urethra (C680).

Note 4: Assign code 1 when there is only a TURP.

Note 5: Imaging is not used to determine the clinical extension unless the physician clearly incorporates imaging findings into their evaluation.

Note 6: If there is no information from the DRE, but the physician assigns a clinical extent of disease, the registrar can use that.

- *Example:* DRE reveals prostate is “firm.” Physician stages the patient as a cT2a. The T2a (localized) can be used since the physician has documented this.

Note 7: Involvement of prostatic urethra does not alter the Summary Stage code.

Note 8: “Frozen pelvis” is a clinical term which means tumor extends to pelvic sidewall(s) (code 7).

Note 9: When prostate cancer is an incidental finding during a prostatectomy for other reasons (for example, a cystoprostatectomy for bladder cancer), use the appropriate code for the extent of disease found.

SUMMARY STAGE

0 In situ, intraepithelial, noninvasive

1 Localized only (localized, NOS)

- Clinically apparent or inapparent tumor
- Confined to prostate, NOS
- Intracapsular involvement only
- Invasion into (but not beyond) prostatic capsule
- No extracapsular extension
- One or more lobes involved

2 Regional by direct extension only

- Bladder neck
- Bladder, NOS
- External sphincter
- Extraprostatic/extracapsular extension (beyond prostate capsule), unilateral, bilateral, NOS
- Extraprostatic urethra (membranous urethra)
- Fixation, NOS
- Levator muscles
- Periprostatic tissue
- Rectovesical (Denonvillier's) fascia
- Rectum
- Seminal vesicles
- Skeletal muscle
- Through capsule, NOS
- Ureter(s)

3 Regional lymph node(s) involved only

- Hypogastric
- Iliac, NOS
 - External
 - Internal (hypogastric) (obturator), NOS
- Pelvic, NOS
- Periprostatic
- Sacral, NOS

- Lateral (laterosacral)
- Middle (promontory) (Gerota's node)
- Presacral
- Regional lymph node(s), NOS
 - Lymph node(s), NOS

4 Regional by BOTH direct extension AND regional lymph node(s) involved

- Codes (2) + (3)

7 Distant site(s)/lymph node(s) involved

- Distant site(s) (including further contiguous extension)
 - Bone
 - Extension to or fixation to pelvic wall or pelvic bone
 - "Frozen pelvis", NOS
 - Other organs
 - Penis
 - Sigmoid colon
 - Soft tissue other than periprostatic
- Distant lymph node(s), NOS
 - Aortic (lateral [lumbar], para-aortic, periaortic, NOS)
 - Cervical
 - Common iliac
 - Inguinal (deep, NOS)
 - Node of Cloquet or Rosenmuller (highest deep inguinal)
 - Superficial (femoral)
 - Retroperitoneal, NOS
 - Scalene (inferior deep cervical)
 - Supraclavicular (transverse cervical)
- Distant metastasis, NOS
 - Carcinomatosis
 - Distant metastasis WITH or WITHOUT distant lymph node(s)

9 Unknown if extension or metastasis

TESTIS

8000-8700, 8720-8790, 9061, 9064-9065, 9070-9071, 9080-9081, 9084-9085, 9100-9101, 9104-9105, 9700-9701

C620-C621, C629

C620 Undescended testis

C621 Descended testis

C629 Testis, NOS

Note 1: The following sources were used in the development of this chapter

- SEER Extent of Disease 1988: Codes and Coding Instructions (3rd Edition, 1998) (<https://seer.cancer.gov/archive/manuals/EOD10Dig.3rd.pdf>)
- SEER Summary Staging Manual-2000: Codes and Coding Instructions (<https://seer.cancer.gov/tools/ssm/>)
- Collaborative Stage Data Collection System, version 02.05: <https://cancerstaging.org/cstage/Pages/default.aspx>
- Chapter 59 *Testis*, in the AJCC Cancer Staging Manual, Eighth Edition (2017) published by Springer International Publishing. Used with permission of the American College of Surgeons, Chicago, Illinois.

Note 2: See the following chapters for the listed histologies

- 8710-8714, 8800-8934, 8940-9060, 9062-9063, 9072-9073, 9082-9083, 9086-9091, 9102-9103, 9110-9137, 9141-9582: *Soft Tissue*
- 8935-8936: *GIST*
- 9140: *Kaposi Sarcoma*

SUMMARY STAGE

0 In situ, intraepithelial, noninvasive

- Germ cell neoplasia in situ
- Intratubular germ cell neoplasia

1 Localized only (localized, NOS)

- WITHOUT lymphovascular invasion or UNKNOWN if lymphovascular invasion
 - Body of testis
 - Rete testis
 - Surface implants (surface of tunica vaginalis)
 - Tunica albuginea
 - Tunica vaginalis involved
 - Tunica, NOS

2 Regional by direct extension only

- WITH lymphovascular invasion
 - Tumor limited to testis (including rete testis invasion)
- Any of the following sites WITH or WITHOUT lymphovascular invasion
 - Dartos muscle, ipsilateral
 - Epididymis
 - Hilar soft tissue
 - Mediastinum (of testis)
 - Scrotum, ipsilateral
 - Spermatic cord, ipsilateral
 - Vas deferens
 - Visceral mesothelial layer

3 Regional lymph node(s) involved only

- Lymph nodes WITH or WITHOUT previous scrotal or inguinal surgery
 - Aortic, NOS
 - Lateral (lumbar)
 - Para-aortic
 - Periaortic
 - Preaortic
 - Retroaortic
 - Pericaval, NOS
 - Interaortocaval
 - Paracaval
 - Precaval
 - Retrocaval
 - Retroperitoneal, NOS
 - Spermatic vein
 - Regional lymph node(s), NOS
 - Lymph node(s), NOS
- Lymph nodes WITH previous scrotal or inguinal surgery
 - External iliac
 - Inguinal node(s), NOS
 - Deep, NOS
 - Node of Cloquet or Rosenmuller (highest deep inguinal)
 - Superficial (femoral)
 - Pelvic, NOS

4 Regional by BOTH direct extension AND regional lymph node(s) involved

- Codes (2) + (3)

7 Distant site(s)/lymph node(s) involved

- Distant site(s) (including further contiguous extension)
 - Adrenal (suprarenal gland)
 - Kidney
 - Penis
 - Retroperitoneum
 - Scrotum, contralateral
 - Testis, bilateral
 - Ulceration of scrotum
- Distant lymph node(s), NOS
 - Deep, NOS
 - Node of Cloquet or Rosenmuller (highest deep inguinal)
 - Superficial (femoral)
 - Pelvic, NOS
 - Lymph nodes WITHOUT previous scrotal or inguinal surgery or UNKNOWN if previous scrotal or inguinal surgery
 - External iliac
 - Inguinal nodes, NOS
- Distant metastasis, NOS
 - Carcinomatosis
 - Distant metastasis WITH or WITHOUT distant lymph node(s)

9 Unknown if extension or metastasis

GENITAL MALE OTHER

8000-8700, 8720-8790, 9700-9701 (C630-C631, C637-C639)
8000-8040, 8042-8180, 8191-8246, 8248-8700 (C632)

C630-C632, C637-C639

C630 Epididymis

C631 Spermatic cord

C632 Scrotum, NOS

C637 Other specified parts of male genital organs

C638 Overlapping lesion of male genital organs

C639 Male genital organs, NOS

Note 1: The following sources were used in the development of this chapter

- SEER Extent of Disease 1988: Codes and Coding Instructions (3rd Edition, 1998) (<https://seer.cancer.gov/archive/manuals/EOD10Dig.3rd.pdf>)
- SEER Summary Staging Manual-2000: Codes and Coding Instructions (<https://seer.cancer.gov/tools/ssm/>)
- Collaborative Stage Data Collection System, version 02.05: <https://cancerstaging.org/cstage/Pages/default.aspx>

Note 2: See the following chapters for the listed histologies

- 8710-8714, 8800-8934, 8940-9137, 9141-9582: *Soft Tissue*
- 8935-8936: *GIST*
- 9140: *Kaposi Sarcoma*

Note 3: See the following chapters for scrotum (C632) for the listed histologies

- 8041, 8190, 8247 *Merkel Cell Skin*
- 8720-8790 *Melanoma Skin*
- 9700-9701 *Mycosis Fungoides*

Note 4: Summary Stage is the only applicable staging system for this site/histology/schema.

SUMMARY STAGE

0 In situ: noninvasive, intraepithelial

1 Localized only (localized, NOS)

- Confined to tissue or organ of origin

2 Regional by direct extension only

- Adjacent connective tissue
- Adjacent organ(s)/structure(s)
 - Epididymis (from other site)
 - Penis
 - Prostate
 - Seminal vesicle (from other site)
 - Skeletal muscle (scrotum only)
 - Spermatic cord (vas deferens) (from other site)
 - Testis
 - Tunica vaginalis (from other site)

3 Regional lymph node(s) involved only

- Iliac , NOS
 - External
 - Internal (hypogastric), NOS
 - Obturator
- Inguinal , NOS
 - Deep inguinal, NOS
 - Node of Cloquet or Rosenmuller (highest deep inguinal)
 - Superficial inguinal (femoral)
- Pelvic , NOS
- Regional lymph node(s), NOS
 - Lymph node(s), NOS

4 Regional by BOTH direct extension AND regional lymph node(s) involved

- Codes (2) + (3)

7 Distant site(s)/lymph node(s) involved

- Distant site(s) (including further contiguous extension)
- Other organ(s) and structure(s) in male pelvis
 - Bladder
 - Bone (axial or appendicular skeleton) (scrotum only)
 - Rectum
 - Underlying cartilage (scrotum only)
 - Urethra
- Distant lymph node(s), NOS
- Distant metastasis, NOS
 - Carcinomatosis
 - Distant metastasis WITH or WITHOUT distant lymph node(s)

9 Unknown if extension or metastasis

URINARY SYSTEM

BLADDER, RENAL PELVIS AND URETERS ANATOMIC STRUCTURES

Table of Anatomic Structures

PRIMARY SITE	MUCOSA -Epithelium -Lamina propria submucosa	MUSCULARIS PROPRIA	SEROSA
Bladder (C67_)	Yes	Yes	Yes, on superior surface
Renal pelvis (C659)	Yes	Yes	No
Ureter (C669)	Yes	Yes	No

The layers of the urinary tract include:

1. The **EPITHELIAL LAYER** contains no blood vessels or lymphatics
2. The **BASEMENT MEMBRANE**, a sheet of extracellular material, functions as a filtration barrier and a boundary involved in generating and maintaining tissue structure
3. The **LAMINA PROPRIA**, composed of areolar connective tissue, contains blood vessels, nerves, and, in some regions, glands. Once tumor has broken through the basement membrane into the lamina propria, it can spread by way of the lymphatics and blood vessels to other parts of the body
4. The urinary sites do NOT have a **MUSCULARIS MUCOSAE**, and, therefore, the lamina propria and the submucosa are difficult to separate. These terms are used interchangeably
5. The **SUBMUCOSA** is a thick layer of either dense or areolar connective tissue. It contains blood vessels, lymphatic vessels, nerves, and, in some regions, glands
6. The **MUSCULARIS PROPRIA** is composed of multiple layers of muscle tissue; it constitutes the wall of the organ
7. The **SEROSA**, the outermost layer covering, is a serous membrane, part of the visceral peritoneum. It covers only the superior surface of the bladder. There is no serosa on the renal pelvis or ureters.
 - a. Where there is no serosa, the connective tissue of surrounding structures merges with the connective tissue of the urinary organs and is called **ADVENTITIA**.

KIDNEY (RENAL PARENCHYMA)

8000-8700, 8720-8790, 9700-9701

C649

C649 Kidney, NOS (Renal parenchyma)

Note 1: The following sources were used in the development of this chapter

- SEER Extent of Disease 1988: Codes and Coding Instructions (3rd Edition, 1998) (<https://seer.cancer.gov/archive/manuals/EOD10Dig.3rd.pdf>)
- SEER Summary Staging Manual-2000: Codes and Coding Instructions (<https://seer.cancer.gov/tools/ssm/>)
- Collaborative Stage Data Collection System, version 02.05: <https://cancerstaging.org/cstage/Pages/default.aspx>
- Chapter 60 *Kidney*, in the AJCC Cancer Staging Manual, Eighth Edition (2017) published by Springer International Publishing. Used with permission of the American College of Surgeons, Chicago, Illinois.

Note 2: See the following chapters for the listed histologies

- 8710-8714, 8800-8934, 8940-9137, 9141-9582: *Soft Tissue*
- 8935-8936: *GIST*
- 9140: *Kaposi Sarcoma*

SUMMARY STAGE

0 In situ: noninvasive, intraepithelial

1 Localized only (localized, NOS)

- Confined (limited) to the kidney, NOS
- Invasion of renal capsule
- Invasive cancer confined to kidney cortex and/or medulla
- Pelvicalyceal system
- Renal pelvis or calyces involved
- Separate focus of tumor in renal pelvis/calyx

2 Regional by direct extension only

- Adrenal gland (ipsilateral) (contiguous metastasis)
- Ascending colon from right kidney
- Beyond Gerota's fascia, NOS
- Blood vessel(s) (major)
 - Extrarenal portion of renal vein or segmental (muscle containing branches)

- Hilar blood vessel
- Inferior vena cava
- Perirenal vein/fat
- Renal artery
- Renal vein, NOS/sinus fat
- Tumor thrombus in a renal vein, NOS
- Descending colon from left kidney
- Diaphragm
- Duodenum from right kidney
- Perinephric tissue
- Peritoneum
- Psoas muscle
- Quadratus lumborum muscle
- Retroperitoneal soft tissue
- Tail of pancreas
- Ureter (ipsilateral), including implant(s)

3 Regional lymph node(s) involved only

- Aortic, NOS
 - Lateral (lumbar)
 - Para-aortic
 - Periaortic
 - Preaortic
 - Retroaortic
- Caval, NOS
 - Interaortocaval
 - Paracaval
 - Pericaval
 - Precaval
 - Retrocaval
- Renal hilar
- Retroperitoneal, NOS
- Regional lymph node(s), NOS
 - Lymph node(s), NOS

4 Regional by BOTH direct extension AND regional lymph node(s) involved

- Codes (2) + (3)

7 Distant site(s)/lymph node(s) involved

- Distant site(s) (including further contiguous extension)
 - Adrenal gland
 - Contralateral
 - Ipsilateral, noncontiguous
 - Aorta
 - Contralateral kidney
 - Contralateral ureter
 - Liver
 - Ribs
 - Spleen
 - Stomach
- Distant lymph node(s), NOS
- Distant metastasis, NOS
 - Carcinomatosis
 - Distant metastasis WITH or WITHOUT distant lymph node(s)

9 Unknown if extension or metastasis

KIDNEY RENAL PELVIS

8000-8700, 8720-8790, 9700-9701

C659, C669

C659 Renal pelvis

C669 Ureter

Note 1: The following sources were used in the development of this chapter

- SEER Extent of Disease 1988: Codes and Coding Instructions (3rd Edition, 1998) (<https://seer.cancer.gov/archive/manuals/EOD10Dig.3rd.pdf>)
- SEER Summary Staging Manual-2000: Codes and Coding Instructions (<https://seer.cancer.gov/tools/ssm/>)
- Collaborative Stage Data Collection System, version 02.05: <https://cancerstaging.org/cstage/Pages/default.aspx>
- Chapter 61 *Renal Pelvis and Ureter*, in the AJCC Cancer Staging Manual, Eighth Edition (2017) published by Springer International Publishing. Used with permission of the American College of Surgeons, Chicago, Illinois.

Note 2: See the following chapters for the listed histologies

- 8710-8714, 8800-8934, 8940-9137, 9141-9582: *Soft Tissue*
- 8935-8936: *GIST*
- 9140: *Kaposi Sarcoma*

Note 3: Tumor involving both renal pelvis and ureter (unifocal or multifocal) is classified by the depth of greatest invasion in either organ.

Note 4: Direct invasion of the bladder by a ureteral tumor is classified by the depth of greatest invasion of the bladder or ureter.

SUMMARY STAGE

0 In situ, intraepithelial, noninvasive

- Flat, sessile
- Noninvasive papillary carcinoma

1 Localized only (localized, NOS)

- Confined to renal pelvis, NOS
- Confined to ureter, NOS
- Muscularis
 - Renal pelvis only

- Ureter only
- Subepithelial connective tissue (lamina propria, submucosa)
 - Renal pelvis only
 - Ureter only

2 Regional by direct extension only

- Extension to bladder from ureter
 - Muscularis of distal ureter and/or bladder
 - Subepithelial connective tissue of distal ureter and/or bladder
- Invasion beyond muscularis into
 - Peripelvic fat (renal pelvis)
 - Periureteric fat (ureter)
 - Retroperitoneal soft/connective tissue
- Renal pelvis and ureter (unifocal or multifocal)
 - Duodenum (from right renal pelvis or right ureter)
 - Ipsilateral adrenal gland (suprarenal) gland
 - Major blood vessel(s)
 - Aorta
 - Renal artery/vein
 - Vena cava (inferior)
 - Muscularis
 - Distal ureter from proximal ureter
 - Renal pelvis from ureter
 - Ureter from renal pelvis
 - Psoas muscle (ureter)
 - Subepithelial connective tissue
 - Distal ureter from proximal ureter
 - Renal pelvis from ureter
 - Ureter from renal pelvis
 - Tumor thrombus in a renal vein, NOS
- Renal pelvis only
 - Ipsilateral kidney parenchyma and kidney, NOS

3 Regional lymph node(s) involved only

- All sites
 - Lateral aortic (lumbar)
 - Paracaval
 - Renal hilar
 - Retroperitoneal, NOS
 - Regional lymph node(s), NOS
 - Lymph node(s), NOS
- Renal Pelvis

- Aortic (para-aortic, periaortic, NOS)
- Ureter
 - Iliac (common, external, NOS)
 - Internal (hypogastric) (obturator)
 - Pelvic, NOS
 - Periureteral

4 Regional by BOTH direct extension AND regional lymph node(s) involved

- Codes (2) + (3)

7 Distant site(s)/lymph node(s) involved

- Distant site(s) (including further contiguous extension)
 - Ascending colon (from right renal pelvis or right ureter)
 - Bladder (wall or mucosa) from renal pelvis
 - Colon, NOS
 - Descending colon (from right renal pelvis or right ureter)
 - Ipsilateral kidney parenchyma from ureter
 - Liver (from right renal pelvis or right ureter)
 - Pancreas
 - Perirenal (perinephric) fat (via kidney)
 - Prostate (ureter)
 - Spleen (from left renal pelvis or left ureter)
 - Uterus (ureter)
- Distant lymph node(s), NOS
- Distant metastasis, NOS
 - Carcinomatosis
 - Distant metastasis WITH or WITHOUT distant lymph node(s)

9 Unknown if extension or metastasis

DISTINGUISHING NONINVASIVE AND INVASIVE BLADDER CANCER

1. The two main types of bladder cancer are the flat (sessile) variety and the papillary type.
 - a. Only the flat (sessile) variety is called in situ when tumor has not penetrated the basement membrane
 - b. Papillary tumor that has not penetrated the basement membrane is called noninvasive, and pathologists use many different descriptive terms for noninvasive papillary transitional cell carcinoma.
 - c. Frequently, the pathology report does not contain a definite statement of noninvasion; however, noninvasion can be inferred from the microscopic description.
 - d. The more commonly used descriptions for noninvasion are listed below.
2. Careful attention must be given to the use of the term “confined to mucosa” for bladder. Historically, carcinomas described as “confined to mucosa” were coded as localized. However, pathologists use this designation for noninvasion as well. To rule out the possibility of assigning noninvasive tumors in this category, abstractors should determine:
 - a. If the tumor is confined to the epithelium, then it is noninvasive.
 - b. If the tumor has penetrated the basement membrane to invade the lamina propria, then it is invasive
3. The terms lamina propria, submucosa, stroma, and subepithelial connective tissue are used interchangeably.

Note: Only if the distinction cannot be made should the tumor be assigned 1 (localized) for “confined to mucosa.”

Definite statements of noninvasion for papillary transitional cell carcinomas include

Noninfiltrating
Noninvasive
No evidence of invasion
No extension into lamina propria
No stromal invasion
No extension into underlying supporting tissue
Negative lamina propria & superficial muscle
Negative muscle and (subepithelial) connective tissue
No infiltrative behavior/component

Inferred descriptions of noninvasion for papillary transitional cell carcinomas include

No involvement of muscularis propria and no mention of subepithelium/submucosa
No statement of invasion (microscopic description present)
(Underlying) Tissue insufficient to judge depth of invasion
No invasion of bladder wall
No involvement of muscularis propria
Benign deeper tissue
Microscopic description problematic (noninvasion versus superficial invasion)
Frond surfaced by transitional cell
No mural infiltration
No evidence of invasion (no sampled stroma)
Confined to mucosa

BLADDER

8000-8700, 8720-8790, 9700-9701

C670-C679

C670 Trigone of bladder

C671 Dome of bladder

C672 Lateral wall of bladder

C673 Anterior wall of bladder

C674 Posterior wall of bladder

C675 Bladder neck

C676 Ureteric orifice

C677 Urachus

C678 Overlapping lesion of bladder

C679 Bladder, NOS

Note 1: The following sources were used in the development of this chapter

- SEER Extent of Disease 1988: Codes and Coding Instructions (3rd Edition, 1998) (<https://seer.cancer.gov/archive/manuals/EOD10Dig.3rd.pdf>)
- SEER Summary Staging Manual-2000: Codes and Coding Instructions (<https://seer.cancer.gov/tools/ssm/>)
- Collaborative Stage Data Collection System, version 02.05: <https://cancerstaging.org/cstage/Pages/default.aspx>
- Chapter 62 *Urinary Bladder*, in the AJCC Cancer Staging Manual, Eighth Edition (2017) published by Springer International Publishing. Used with permission of the American College of Surgeons, Chicago, Illinois.

Note 2: See the following chapters for the listed histologies

- 8710-8714, 8800-8934, 8940-9137, 9141-9582: *Soft Tissue*
- 8935-8936: *GIST*
- 9140: *Kaposi Sarcoma*

Note 3: The two main types of bladder cancer are the flat (sessile) variety and the papillary type. The flat (sessile) variety is called in situ when tumor has not penetrated the basement membrane. Papillary tumor that has not penetrated the basement membrane is called noninvasive.

Note 4: Noninvasive papillary transitional carcinoma: Pathologists use many different descriptive terms for noninvasive papillary transitional cell carcinoma. Frequently, the pathology report does not contain a definite statement of non-invasion; however, non-invasion can be inferred from the microscopic description.

Definite statements of non-invasion for papillary transitional cell carcinomas (Ta) include

- Noninfiltrating
- Noninvasive
- No evidence of invasion
- No extension into lamina propria
- No stromal invasion
- No extension into underlying supporting tissue
- Negative lamina propria and superficial muscle
- Negative muscle and (subepithelial) connective tissue
- No infiltrative behavior/component

Inferred descriptions of non-invasion for papillary transitional cell carcinomas include

- No involvement of muscularis propria and no mention of subepithelium/submucosa
- No statement of invasion (microscopic description present)
- (Underlying) Tissue insufficient to judge depth of invasion
- No invasion of bladder wall
- No involvement of muscularis propria
- Benign deeper tissue
- Microscopic description problematic (non-invasion versus superficial invasion)
- Frond surfaced by transitional cell
- No mural infiltration
- No evidence of invasion (no sampled stroma)
- Confined to mucosa

Note 5: Noninvasive (in situ) flat transitional cell carcinoma: Careful attention must be given to the use of the term "confined to mucosa" for flat bladder carcinomas. Historically, carcinomas described as "confined to mucosa" were coded as localized. However, pathologists use this designation for non-invasion as well. Pathologists also vary in their use of the terms "invasion of mucosa, grade 1" and "invasion of mucosa, grade 2" to distinguish between noninvasive and invasive carcinomas. In order to accurately code tumors described as "confined to mucosa", abstractors should determine

- If the tumor is confined to the epithelium: then it is noninvasive (IS).
- If the tumor has penetrated the basement membrane to invade the lamina propria: then it is invasive and coded to 1 for localized. The lamina propria and submucosa tend to merge when there is no muscularis mucosa, so these terms may be used interchangeably, along with stroma and subepithelial connective tissue.
- If the distinction between involvement of the epithelium and lamina propria cannot be made, then the tumor should be coded as "confined to mucosa, NOS" (IS).
- Statements meaning confined to mucosa, NOS for flat transitional cell carcinomas include
 - Confined to mucosal surface
 - Limited to mucosa, no invasion of submucosa and muscularis
 - No infiltration/invasion of fibromuscular and muscular stroma
 - Superficial, NOS

Note 6: Code 2 for regional if the only description of extension is through full thickness of bladder wall, and there is no clear statement as to whether or not the cancer has extended into fat.

SUMMARY STAGE

0 In situ: noninvasive, intraepithelial

- Nonpapillary
 - Carcinoma in situ, NOS
 - Sessile (flat) (solid) carcinoma in situ
 - Transitional cell carcinoma in situ
- Papillary
 - Non-infiltrating
 - Transitional cell carcinoma, stated to be non-invasive
 - Transitional cell carcinoma, with inferred description of non-invasion

1 Localized only (localized, NOS)

- Mucosa, NOS
- Muscle (muscularis propria)
 - Deep muscle-outer half
 - Extension through full thickness of bladder wall
 - Superficial muscle-inner half
- Submucosa
 - Lamina propria
 - Stroma
 - Subepithelial connective tissue
 - Tunica propria
- Subserosa

2 Regional by direct extension only

- Adventitia
- Bladder is “fixed”
- Extravesical tumor, NOS
- Parametrium
- Periprostatic tissue
- Peritoneum
- Periureteral fat/tissue
- Perivesical fat/tissue
- Prostate
- Rectovesical/Denonvilliers’ fascia
- Seminal vesicle
- Serosa (mesothelium) (to/through)

- Tunica serosa (to/through)
- Ureter
- Urethra (including prostatic urethra)
- Uterus
- Vagina
- Vas deferens

3 Regional lymph node(s) involved only

- Iliac, NOS
 - External
 - Internal (hypogastric)
- Obturator
- Pelvic, NOS
- Perivesical pelvic, NOS
- Sacral, NOS
 - Lateral (laterosacral)
 - Presacral
 - Sacral promontory (Gerota's)
- Regional lymph node(s), NOS
 - Lymph node(s), NOS

4 Regional by BOTH direct extension AND regional lymph node(s) involved

- Codes (2) + (3)

7 Distant site(s)/lymph node(s) involved

- Distant site(s) (including further contiguous extension)
 - Abdominal wall
 - Bone
 - Colon
 - Large intestine including rectum
 - Pelvic wall
 - Pubic bone
 - Small intestine
- Distant lymph node(s), NOS
 - Common iliac
- Distant metastasis, NOS
 - Carcinomatosis
 - Distant metastasis WITH or WITHOUT distant lymph node(s)

9 Unknown if extension or metastasis

URETHRA

8000-8700, 8720-8790, 9700-9701

C680

C680 Urethra

C680 Prostatic Urethra

Note 1: The following sources were used in the development of this chapter

- SEER Extent of Disease 1988: Codes and Coding Instructions (3rd Edition, 1998) (<https://seer.cancer.gov/archive/manuals/EOD10Dig.3rd.pdf>)
- SEER Summary Staging Manual-2000: Codes and Coding Instructions (<https://seer.cancer.gov/tools/ssm/>)
- Collaborative Stage Data Collection System, version 02.05: <https://cancerstaging.org/cstage/Pages/default.aspx>
- Chapter 63 *Urethra*, in the AJCC Cancer Staging Manual, Eighth Edition (2017) published by Springer International Publishing. Used with permission of the American College of Surgeons, Chicago, Illinois.

Note 2: See the following chapters for the listed histologies

- 8710-8714, 8800-8934, 8940-9137, 9141-9582: *Soft Tissue*
- 8935-8936: *GIST*
- 9140: *Kaposi Sarcoma*

SUMMARY STAGE

0 In situ, intraepithelial, noninvasive

- Urethra
 - Non-invasive papillary carcinoma
 - Carcinoma in situ
- Prostatic Urethra
 - Non-invasive papillary carcinoma
 - Carcinoma in situ involving (WITHOUT stromal invasion)
 - Periurethral or prostatic ducts
 - Prostatic urethra

1 Localized only (localized, NOS)

- Muscularis invaded
- Subepithelial connective tissue (lamina propria, submucosa) invaded

2 Regional by direct extension only

- All sites
 - Bladder neck
- Urethra
 - Corpus cavernosum
 - Corpus spongiosum
 - Periurethral muscle (sphincter muscle)
 - Vagina (anterior, NOS)
- Prostatic urethra
 - Periprostatic fat (beyond prostate capsule)
 - Prostate (prostatic stroma)
 - Prostatic ducts

3 Regional lymph node(s) involved only

- Iliac (common, external, internal [hypogastric] [obturator], NOS)
- Inguinal (superficial [femoral], NOS)
- Inguinal, deep (Node of Cloquet or Rosenmuller [highest deep inguinal], NOS)
- Pelvic, NOS (including true pelvis)
- Perivesical
- Presacral
- Sacral, NOS
- Regional lymph node(s), NOS
 - Lymph node(s), NOS

4 Regional by BOTH direct extension AND regional lymph node(s) involved

- Codes (2) + (3)

7 Distant site(s)/lymph node(s) involved

- Distant site(s) (including further contiguous extension)
 - All sites
 - Adjacent organ(s), NOS
 - Bladder wall
 - Prostatic urethra
 - Rectal wall
- Distant lymph node(s), NOS
- Distant metastasis, NOS
 - Carcinomatosis
 - Distant metastasis WITH or WITHOUT distant lymph node(s)

9 Unknown if extension or metastasis

URINARY OTHER

8000-8700, 8720-8790, 9700-9701

C681, C688-C689

C681 Paraurethral gland

C688 Overlapping lesion of urinary organs

C689 Urinary system, NOS

Note 1: The following sources were used in the development of this chapter

- SEER Extent of Disease 1988: Codes and Coding Instructions (3rd Edition, 1998) (<https://seer.cancer.gov/archive/manuals/EOD10Dig.3rd.pdf>)
- SEER Summary Staging Manual-2000: Codes and Coding Instructions (<https://seer.cancer.gov/tools/ssm/>)
- Collaborative Stage Data Collection System, version 02.05: <https://cancerstaging.org/cstage/Pages/default.aspx>

Note 2: See the following chapters for the listed histologies

- 8710-8714, 8800-8934, 8940-9137, 9141-9582: *Soft Tissue*
- 8935-8936: *GIST*
- 9140: *Kaposi Sarcoma*

Note 3: Summary Stage is the only applicable staging system for this site/histology/schema.

SUMMARY STAGE

0 In situ, intraepithelial, noninvasive (flat, sessile)

- Noninvasive papillary, polypoid or verrucous carcinoma

1 Localized only (localized, NOS)

- Lamina propria
- Muscularis
- Subepithelial connective
- Submucosa

2 Regional by direct extension only

- Beyond prostate capsule
- Bladder neck
- Corpus cavernosum

- Corpus spongiosum
- Periurethral muscle (sphincter)
- Prostate
- Vagina, anterior or NOS

3 Regional lymph node(s) involved only

- Iliac, NOS
 - Common
 - External
 - Internal (hypogastric), NOS
 - Obturator
- Inguinal, NOS
 - Deep inguinal, NOS
 - Node of Cloquet or Rosenmuller (highest deep inguinal)
 - Superficial (femoral)
- Pelvic, NOS
- Sacral, NOS
 - Presacral
- Regional lymph node(s), NOS
 - Lymph node(s), NOS

4 Regional by BOTH direct extension AND regional lymph node(s) involved

- Codes (2) + (3)

7 Distant site(s)/lymph node(s) involved

- Distant sites (including further contiguous extension)
 - Other adjacent organs, including
 - Bladder (excluding bladder neck)
 - Seminal vesicle(s)
- Distant lymph node(s), NOS
- Distant metastasis, NOS
 - Carcinomatosis
 - Distant metastasis WITH or WITHOUT distant lymph node(s)

9 Unknown if extension or metastasis

OPHTHALMIC SITES

SKIN EYELID

8000-8040, 8042-8180, 8191-8246, 8248-8700, 8940-8941, 8980

C441

C441 Eyelid

Note 1: The following sources were used in the development of this chapter

- SEER Extent of Disease 1988: Codes and Coding Instructions (3rd Edition, 1998) (<https://seer.cancer.gov/archive/manuals/EOD10Dig.3rd.pdf>)
- SEER Summary Staging Manual-2000: Codes and Coding Instructions (<https://seer.cancer.gov/tools/ssm/>)
- Collaborative Stage Data Collection System, version 02.05: <https://cancerstaging.org/cstage/Pages/default.aspx>
- Chapter 64 *Eyelid Carcinoma*, in the AJCC Cancer Staging Manual, Eighth Edition (2017) published by Springer International Publishing. Used with permission of the American College of Surgeons, Chicago, Illinois.

Note 2: See the following chapters for the listed histologies

- 8041, 8190, 8247: *Merkel Cell Skin*
- 8710-8714, 8800-8934, 8950-8975, 8981-9137, 9141-9514, 9520-9582: *Soft Tissue*
- 8720-8790: *Melanoma Skin*
- 8935-8936: *GIST*
- 9140: *Kaposi Sarcoma*
- 9700-9701: *Mycosis Fungoides*

Note 3: Code the tumor with the greatest extension when there are multiple simultaneous tumors.

Note 4: Full eyelid thickness (code 1) is defined as including skin, orbicularis muscle, tarsus and conjunctiva (palpebral).

SUMMARY STAGE

0 In situ, intraepithelial, noninvasive

- Bowen disease

1 Localized only (localized, NOS)

- Eyelid margin
- Full thickness of eyelid
- Lesion(s) confined to dermis
- Minimal infiltration of dermis
- Subcutaneous tissue (through entire dermis)
- Underlying orbicularis muscle
- Tarsal plate
- Tarsus

2 Regional by direct extension only

- Adjacent structures, NOS
- Bone/periosteum of orbit
- Bony walls of orbit (invades or evades through)
- Bulbar conjunctiva
- Intraorbital structures, NOS
- Lacrimal sac
- Ocular structures
- Sclera
- Skeletal muscles (except orbicularis muscle of eyelid)
- Soft tissues of orbit
- Underlying cartilage

3 Regional lymph node(s) involved only

- Buccinator (buccal)
- Cervical, NOS
- Facial, NOS
- Intraparotid
- Nasolabial
- Parotid
 - Infra-auricular
 - Preauricular
- Submandibular [submaxillary]
- Submental
- Supraclavicular, NOS
- Regional lymph node(s), NOS
 - Lymph node(s), NOS

4 Regional by BOTH direct extension AND regional lymph node(s) involved

- Codes (2) + (3)

7 Distant site(s)/lymph node(s) involved

- Distant site(s) (including further contiguous extension)
 - Brain
 - Central nervous system (CNS)
 - Nasal cavity
 - Nasolacrimal duct
 - Other craniofacial structures
 - Paranasal sinus
- Distant lymph node(s), NOS
- Distant metastasis, NOS
 - Carcinomatosis
 - Distant metastasis WITH or WITHOUT distant lymph node(s), NOS
 - Metastatic skin lesions with or without distant lymph node(s)

9 Unknown if extension or metastasis

CONJUNCTIVA

8000-8700, 9700-9701

C690

C690 Conjunctiva

Note 1: The following sources were used in the development of this chapter

- SEER Extent of Disease 1988: Codes and Coding Instructions (3rd Edition, 1998) (<https://seer.cancer.gov/archive/manuals/EOD10Dig.3rd.pdf>)
- SEER Summary Staging Manual-2000: Codes and Coding Instructions (<https://seer.cancer.gov/tools/ssm/>)
- Collaborative Stage Data Collection System, version 02.05: <https://cancerstaging.org/cstage/Pages/default.aspx>
- Chapter 65 *Conjunctival Carcinoma*, in the AJCC Cancer Staging Manual, Eighth Edition (2017) published by Springer International Publishing. Used with permission of the American College of Surgeons, Chicago, Illinois.

Note 2: See the following chapters for the listed histologies

- 8710-8714, 8800-8921, 8932-8934, 8940-8990, 9000-9016, 9030-9137, 9141-9175, 9181-9230, 9240-9509, 9520-9582: *Orbital Sarcoma*
- 8720-8790: *Melanoma Conjunctiva*
- 8930-8931, 8991, 9020, 9180, 9231: *Soft Tissue*
- 8935-8936: *GIST*
- 9140: *Kaposi Sarcoma*
- 9510-9514: *Retinoblastoma*

SUMMARY STAGE

0 In situ, intraepithelial, noninvasive

- CIN III (conjunctival intraepithelial neoplasia III)
- SIN III (squamous intraepithelial neoplasia III)

1 Localized only (localized, NOS)

- Confined to conjunctiva, NOS
- Confined to one subsite of conjunctiva
 - Bulbar conjunctiva
 - Forniceal conjunctiva
 - Palpebral conjunctiva
 - Tarsal conjunctiva
- Cornea (3, 6, 9, or 12 o'clock hours)
- Intraocular compartments
- Intraocular extension WITHOUT invasion of adjacent structures

2 Regional by direct extension only

- More than one subsite of conjunctiva involved
- Adjacent extraocular extension
 - Anterior eyelid lamella
 - Caruncle
 - Eyelid margin (lower and/or upper)
 - Lacrimal punctum and canaliculi (lower and/or upper)
 - Plica
 - Posterior eyelid lamella
- Adjacent paranasal sinuses
- Bone, bone of orbit
- Orbit, NOS
- Orbital soft tissues WITHOUT bone invasion

3 Regional lymph node(s) involved only

- Cervical, NOS
- Mandibular, NOS
 - Submandibular (submaxillary)
- Parotid, NOS
 - Infra-auricular
 - Preauricular
- Regional lymph node(s), NOS
 - Lymph node(s), NOS

4 Regional by BOTH direct extension AND regional lymph node(s) involved

- Codes (2) + (3)

7 Distant site(s)/lymph node(s) involved

- Distant site(s) (including further contiguous extension)
 - Brain
 - Sinus
- Distant lymph node(s), NOS
- Distant metastasis, NOS
 - Carcinomatosis
 - Distant metastasis WITH or WITHOUT distant lymph node(s)

9 Unknown if extension or metastasis

MELANOMA CONJUNCTIVA

8720-8790

C690

C690 Conjunctiva

Note: The following sources were used in the development of this chapter

- SEER Extent of Disease 1988: Codes and Coding Instructions (3rd Edition, 1998) (<https://seer.cancer.gov/archive/manuals/EOD10Dig.3rd.pdf>)
- SEER Summary Staging Manual-2000: Codes and Coding Instructions (<https://seer.cancer.gov/tools/ssm/>)
- Collaborative Stage Data Collection System, version 02.05: <https://cancerstaging.org/cstage/Pages/default.aspx>
- Chapter 66 *Conjunctival Melanoma*, in the AJCC Cancer Staging Manual, Eighth Edition (2017) published by Springer International Publishing. Used with permission of the American College of Surgeons, Chicago, Illinois.

SUMMARY STAGE

0 In situ: noninvasive, intraepithelial

1 Localized only (localized, NOS)

- Bulbar conjunctiva tumor with invasion of substantia propria
- Involvement of caruncle WITH extension to cornea
- Less than 1 quadrant to greater than 3 quadrant involved
- Noncaruncular or caruncular tumor with involvement of quadrant(s)
- Tumor(s) of nonbulbar conjunctiva, NOS WITH or WITHOUT corneal extension

2 Regional by direct extension only

- Eyelid
- Globe
- Lacrimal Sac
- Local invasion, NOS
- Nasolacrimal duct
- Orbit
- Paranasal sinuses

3 Regional lymph node(s) involved only

- Cervical, NOS
- Mandibular, NOS
 - Submandibular (submaxillary)
- Parotid, NOS
 - Infra-auricular
 - Preauricular
- Regional lymph node(s), NOS
 - Lymph node(s), NOS

4 Regional by BOTH direct extension AND regional lymph node(s) involved

- Codes (2) + (3)

7 Distant site(s)/lymph node(s) involved

- Distant site(s) (including further contiguous extension)
 - Brain
 - Sinus
- Distant lymph node(s), NOS
- Distant metastasis, NOS
 - Carcinomatosis
 - Distant metastasis WITH or WITHOUT distant lymph node(s)

9 Unknown if extension or metastasis

MELANOMA UVEA

8720-8790

C693-C694

C693 Choroid

C694 Ciliary Body, Iris

Note: The following sources were used in the development of this chapter

- SEER Extent of Disease 1988: Codes and Coding Instructions (3rd Edition, 1998) (<https://seer.cancer.gov/archive/manuals/EOD10Dig.3rd.pdf>)
- SEER Summary Staging Manual-2000: Codes and Coding Instructions (<https://seer.cancer.gov/tools/ssm/>)
- Collaborative Stage Data Collection System, version 02.05: <https://cancerstaging.org/cstage/Pages/default.aspx>
- Chapter 67 *Uveal Melanoma*, in the AJCC Cancer Staging Manual, Eighth Edition (2017) published by Springer International Publishing. Used with permission of the American College of Surgeons, Chicago, Illinois.

SUMMARY STAGE

0 In situ: noninvasive, intraepithelial

1 Localized only (localized, NOS)

- Choroid and Ciliary Body
 - Any tumor size category WITH or WITHOUT ciliary body involvement
 - WITHOUT or UNKNOWN extraocular extension
 - Limited to choroid or ciliary body, NOS
- Iris
 - Tumor confluent with or extending into ciliary body, choroid or both
 - WITH or WITHOUT secondary glaucoma unknown
 - WITH scleral extension
- Limited to iris, NOS

2 Regional by direct extension only

- All sites
 - Local invasion, NOS
- Choroid and Ciliary Body
 - Extraocular extension
- Iris
 - Extrascleral extension

3 Regional lymph node(s) involved only

- Discrete tumor deposits in orbit not contiguous to the eye
 - WITH or WITHOUT positive regional lymph node(s)
- Cervical, NOS
- Mandibular, NOS
 - Submandibular (submaxillary)
- Parotid, NOS
 - Infra-auricular
 - Preauricular
- Regional lymph node(s), NOS
 - Lymph node(s), NOS

4 Regional by BOTH direct extension AND regional lymph node(s) involved

- Codes (2) + (3)

7 Distant site(s)/lymph node(s) involved

- Distant site(s) (including further contiguous extension)
- Distant lymph node(s), NOS
- Distant metastasis, NOS
 - Carcinomatosis
 - Distant metastasis WITH or WITHOUT distant lymph node(s)

9 Unknown if extension or metastasis

RETINOBLASTOMA

9510-9514

C690-C696, C698-C699

C690 Conjunctiva

C691 Cornea, NOS

C692 Retina

C693 Choroid

C694 Ciliary Body

C695 Lacrimal Gland

C696 Orbit, NOS

C698 Overlapping lesion of eye and adnexa

C699 Eye, NOS

Note 1: The following sources were used in the development of this chapter

- SEER Extent of Disease 1988: Codes and Coding Instructions (3rd Edition, 1998) (<https://seer.cancer.gov/archive/manuals/EOD10Dig.3rd.pdf>)
- SEER Summary Staging Manual-2000: Codes and Coding Instructions (<https://seer.cancer.gov/tools/ssm/>)
- Collaborative Stage Data Collection System, version 02.05: <https://cancerstaging.org/cstage/Pages/default.aspx>
- Chapter 68 *Retinoblastoma*, in the AJCC Cancer Staging Manual, Eighth Edition (2017) published by Springer International Publishing. Used with permission of the American College of Surgeons, Chicago, Illinois.

Note 2: Code 0 is not applicable for this chapter.

Note 3: Pathological staging information from an enucleation always takes precedence over clinical staging, except in cases with neoadjuvant treatment where clinical disease is as extensive as or more extensive than disease at surgery.

SUMMARY STAGE

1 Localized only (localized, NOS)

- Confined to retina, NOS
- Intraocular tumor(s) WITH local invasion, NOS
 - Choroid (concomitant focal invasion)
 - Pre- or intralaminar involvement of optic nerve head
 - Retinal detachment
 - Schlemm's canal
 - Stromal invasion iris
 - Subretinal seeding
 - Trabecular meshwork

- Vitreous seeding
- Advanced intraocular tumor(s) WITH significant local invasion
 - Anterior chamber
 - Aseptic orbital cellulitis
 - Buphthalmos
 - Choroid (multiple foci, focal, full-thickness involvement)
 - Ciliary body
 - Emissary channels
 - Hyphema AND/OR massive vitreous hemorrhage
 - Iris
 - Lens
 - Pars plana
 - Phthisis or pre-phthisis bulbi
 - Raised intraocular pressure with neovascularization
 - Retrolaminar invasion of optic nerve head
 - Sclera
 - Zonules

2 Regional by direct extension only

- Extraocular tumor
 - Adjacent adipose tissue
 - Bone
 - Conjunctiva
 - Episclera
 - Extraocular muscle
 - Eyelids
 - Meningeal spaces (around optic nerve)
 - Optic nerve (clinical thickening)
 - Optic nerve (retrobulbar, extraocular)
 - Orbit
 - Orbital tissue (includes clinical orbital tissue thickening)

3 Regional lymph node(s) involved only

- Cervical, NOS
- Mandibular, NOS
 - Submandibular (submaxillary)
- Parotid
 - Infra-auricular
 - Preauricular
- Regional lymph node(s), NOS
 - Lymph node(s), NOS

4 Regional by BOTH direct extension AND regional lymph node(s) involved

- Codes (2) + (3)

7 Distant site(s)/lymph node(s) involved

- Distant site(s) (including further contiguous extension)
 - Cerebrospinal fluid
 - CNS parenchyma
- Distant lymph node(s), NOS
- Distant metastasis, NOS
 - Carcinomatosis
 - Distant metastasis WITH or WITHOUT distant lymph node(s)

9 Unknown if extension or metastasis

LACRIMAL GLAND/SAC

8000-8700, 8941, 8980, 8982, 9700-9701

C695

C695 Lacrimal gland

C695 Lacrimal sac

Note 1: The following sources were used in the development of this chapter

- SEER Extent of Disease 1988: Codes and Coding Instructions (3rd Edition, 1998) (<https://seer.cancer.gov/archive/manuals/EOD10Dig.3rd.pdf>)
- SEER Summary Staging Manual-2000: Codes and Coding Instructions (<https://seer.cancer.gov/tools/ssm/>)
- Collaborative Stage Data Collection System, version 02.05: <https://cancerstaging.org/cstage/Pages/default.aspx>
- Chapter 69 *Lacrimal Gland Carcinoma*, in the AJCC Cancer Staging Manual, Eighth Edition (2017) published by Springer International Publishing. Used with permission of the American College of Surgeons, Chicago, Illinois.

Note 2: See the following chapters for the listed histologies

- 8710-8714, 8800-8921, 8932-8934, 8940, 8950-8975, 8981, 8983-8990, 9000-9016, 9030-9137, 9141-9175, 9181-9230, 9240-9509, 9520-9582: *Orbital Sarcoma*
- 8720-8790: *Eye Other*
- 8930-8931, 8991, 9020, 9180, 9231: *Soft Tissue*
- 8935-8936: *GIST*
- 9140: *Kaposi Sarcoma*
- 9510-9514: *Retinoblastoma*

Note 3: Summary Stage is the only applicable staging system for Lacrimal Sac.

SUMMARY STAGE

0 In situ: noninvasive, intraepithelial

1 Localized only (localized, NOS)

- Confined to lacrimal gland
 - WITH or WITHOUT extraglandular extension into the orbital soft tissue
 - No periosteal or orbital bone involvement or UNKNOWN if involved

2 Regional by direct extension only

- Confined to lacrimal gland
 - AND involvement of periosteum AND/OR periorbital bone

3 Regional lymph node(s) involved only

- Cervical, NOS
- Mandibular, NOS
 - Submandibular (submaxillary)
- Parotid, NOS
 - Infra-auricular
 - Preauricular
- Regional lymph node(s), NOS
 - Lymph node(s), NOS

4 Regional by BOTH direct extension AND regional lymph node(s) involved

- Codes (2) + (3)

7 Distant site(s)/lymph node(s) involved

- Distant site(s) (including further contiguous extension)
 - Adjacent structure(s), NOS
 - Brain
 - Cavernous sinus
 - Orbital bone
 - Periosteum
 - Pterygoid fossa
 - Sinuses
 - Superior orbital fissure
 - Temporal fossa
- Distant lymph node(s), NOS
- Distant metastasis, NOS
 - Carcinomatosis
 - Distant metastasis WITH or WITHOUT distant lymph node(s)

9 Unknown if extension or metastasis

ORBITAL SARCOMA

8710-8714, 8800-8921, 8932-8934, 8940-8990, 9000-9016, 9030-9137, 9141-9175, 9181-9230, 9240-9509, 9520-9582 (C690-C694, C696, C698-C699)

8710-8714, 8800-8921, 8932-8934, 8940, 8950-8975, 8981, 8983-8990, 9000-9016, 9030-9137, 9141-9175, 9181-9230, 9240-9509, 9520-9582 (C695)

8710-8714, 8800-8921, 8932-8934, 8940-8990, 9000-9016, 9030-9063, 9065, 9071-9073, 9081-9083, 9086-9091, 9101-9137, 9141-9175, 9181-9230, 9240-9361, 9363-9373, 9421, 9473, 9500, 9522, 9530, 9540-9582 (C723)

C690-C696, C698-C699, C723

C690 Conjunctiva

C691 Cornea, NOS

C692 Retina

C693 Choroid

C694 Ciliary Body

C695 Lacrimal Gland

C696 Orbit, NOS

C698 Overlapping lesion of eye and adnexa

C699 Eye, NOS

C723 Optic Nerve

Note 1: The following sources were used in the development of this chapter

- SEER Extent of Disease 1988: Codes and Coding Instructions (3rd Edition, 1998) (<https://seer.cancer.gov/archive/manuals/EOD10Dig.3rd.pdf>)
- SEER Summary Staging Manual-2000: Codes and Coding Instructions (<https://seer.cancer.gov/tools/ssm/>)
- Collaborative Stage Data Collection System, version 02.05: <https://cancerstaging.org/cstage/Pages/default.aspx>
- Chapter 70 *Orbital Sarcoma*, in the AJCC Cancer Staging Manual, Eighth Edition (2017) published by Springer International Publishing. Used with permission of the American College of Surgeons, Chicago, Illinois.

Note 2: Code 0 is not applicable for this chapter.

SUMMARY STAGE

1 Localized only (localized, NOS)

- Confined to orbit (including soft tissues)

2 Regional by direct extension only

- Adjacent paranasal sinuses
- Bony walls
- Conjunctiva
- Cranium
- Diffuse invasion of orbital tissue and bony walls
- Globe
- Orbital tissues (excluding orbit primary site)
- Periorbital structures

3 Regional lymph node(s) involved only

- Cervical, NOS
- Mandibular, NOS
 - Submandibular (submaxillary)
- Parotid, NOS
 - Infra-auricular
 - Preauricular
- Regional lymph node(s), NOS
 - Lymph node(s), NOS

4 Regional by BOTH direct extension AND regional lymph node(s) involved

- Codes (2) + (3)

7 Distant site(s)/lymph node(s) involved

- Distant site(s) (including further contiguous extension)
 - Central nervous system
 - Eyelid(s)
 - Nasal cavity
 - Temporal fossa
- Distant lymph node(s), NOS
- Distant metastasis, NOS
 - Carcinomatosis
 - Distant metastasis WITH or WITHOUT distant lymph node(s)

9 Unknown if extension or metastasis

LYMPHOMA OCULAR ADNEXA

9590-9699, 9702-9719, 9725-9726, 9734-9738, 9823, 9826-9827, 9930 (C441, C690, C695-C696)

Note 1: The following sources were used in the development of this chapter

- SEER Extent of Disease 1988: Codes and Coding Instructions (3rd Edition, 1998) (<https://seer.cancer.gov/archive/manuals/EOD10Dig.3rd.pdf>)
- SEER Summary Staging Manual-2000: Codes and Coding Instructions (<https://seer.cancer.gov/tools/ssm/>)
- Collaborative Stage Data Collection System, version 02.05: <https://cancerstaging.org/cstage/Pages/default.aspx>
- Chapter 71 *Ocular Adnexal Lymphoma*, in the AJCC Cancer Staging Manual, Eighth Edition (2017) published by Springer International Publishing. Used with permission of the American College of Surgeons, Chicago, Illinois.

Note 2: Code 0 is not applicable for this chapter.

Note 3: Ocular adnexal lymphomas (OAL) originate in conjunctiva, eyelids, lacrimal gland, lacrimal drainage apparatus, and other orbital tissues surrounding the eye. This chapter should not be used for secondary lymphomatous involvement of ocular adnexa or for intraocular lymphomas.

Note 4: If there is peripheral blood or bone marrow involvement, code 7.

SUMMARY STAGE

1 Localized only (localized, NOS)

- Lymphoma involving the conjunctiva alone WITHOUT or UNKNOWN eyelid or orbital involvement
- Lymphoma with orbital involvement WITH or WITHOUT conjunctival involvement
- Lymphoma with preseptal eyelid involvement WITH or WITHOUT orbital or conjunctival involvement

2 Regional by direct extension only

- Orbital adnexal lymphoma AND extraorbital lymphoma extending beyond the orbit to adjacent structures
 - Bone
 - Brain
 - Maxillofacial sinuses

3 Regional lymph node(s) involved only

- Cervical
- Parotid
- Preauricular
- Regions draining the ocular adnexal structures
- Submandibular
- Regional lymph node(s), NOS
 - Lymph node(s), NOS

4 Regional by BOTH direct extension AND regional lymph node(s) involved

Codes (2) + (3)

7 Distant site(s)/lymph node(s) involved

- Distant sites
 - Non-contiguous involvement of other extranodal sites including, but not limited to
 - Breast
 - Gastrointestinal tract
 - Kidney
 - Liver
 - Lung
 - Parotid gland
 - Salivary gland
 - Spleen
 - Submandibular gland
- Distant lymph node(s), NOS
 - Diffuse OR disseminated involvement of peripheral and central lymph node regions
 - Mediastinum
- Distant metastasis, NOS
 - Blood/peripheral blood
 - Bone marrow
 - Distant metastasis WITH or WITHOUT distant lymph node(s)

9 Unknown if extension or metastasis

EYE OTHER

8000-8700, 9700-9701 (C691-C694, C696, C698-C699)

8720-8790 (C691-C692, C695-C696, C698-C699)

C691-C696, C698-C699

C691 Cornea, NOS

C692 Retina

C693 Choroid

C694 Ciliary Body

C695 Lacrimal Gland

C696 Orbit, NOS

C698 Overlapping lesion of eye and adnexa

C699 Eye, NOS

Note 1: The following sources were used in the development of this chapter

- SEER Extent of Disease 1988: Codes and Coding Instructions (3rd Edition, 1998) (<https://seer.cancer.gov/archive/manuals/EOD10Dig.3rd.pdf>)
- SEER Summary Staging Manual-2000: Codes and Coding Instructions (<https://seer.cancer.gov/tools/ssm/>)
- Collaborative Stage Data Collection System, version 02.05: <https://cancerstaging.org/cstage/Pages/default.aspx>

Note 2: See the following chapters for the listed histologies

- C691-C694, C696, C698-C699 (8710-8714, 8800-8921, 8932-8934, 8940-8990, 9000-9016, 9030-9137, 9141-9175, 9181-9230, 9240-9509, 9520-9582): *Orbital Sarcoma*
- C693, C694 (8720-8790): *Melanoma Uvea*
- C695 (8000-8700, 8941, 8980, 8982, 9700-9701): *Lacrimal Gland* and *Lacrimal Sac*
- C695 (8710-8714, 8800-8921, 8932-8934, 8940, 8950-8975, 8981, 8983-8990, 9000-9016, 9030-9137, 9141-9175, 9181-9230, 9240-9509, 9520-9582): *Orbital Sarcoma*
- 8930-8931, 8991, 9020, 9180, 9231: *Soft Tissue*
- 8935-8936: *GIST*
- 9140: *Kaposi Sarcoma*
- 9510-9514: *Retinoblastoma*

Note 3: Summary Stage is the only applicable staging system for this site/histology/schema.

SUMMARY STAGE

0 In situ: noninvasive, intraepithelial

1 Localized only (localized, NOS)

- Confined to tissue or organ of origin
- Intraocular extension

2 Regional by direct extension only

- Adjacent extraocular extension
 - Eyelid
 - Orbit

3 Regional lymph node(s) involved only

- Cervical, NOS
 - Mandibular, NOS
 - Submandibular (submaxillary)
- Parotid, NOS
 - Infra-auricular
 - Preauricular
- Regional lymph node(s), NOS
 - Lymph node(s), NOS

4 Regional by BOTH direct extension AND regional lymph node(s) involved

- Codes (2) + (3)

7 Distant site(s)/lymph node(s) involved

- Distant site(s) (including further contiguous extension)
- Distant lymph node(s), NOS
- Distant metastasis, NOS
 - Carcinomatosis
 - Distant metastasis WITH or WITHOUT distant lymph node(s)

9 Unknown if extension or metastasis

BRAIN

BRAIN

8000-8700, 8720-8790, 8802, 8810, 8815, 8850, 8890, 8900, 9064, 9070-9071, 9080, 9084-9085, 9100-9105, 9120, 9133, 9140, 9180, 9220, 9362, 9364, 9380-9540, 9680, 9699, 9700-9714, 9751-9759

C700, C710-C719

C700 Cerebral meninges

C710 Cerebrum

C711 Frontal lobe

C712 Temporal lobe

C713 Parietal lobe

C714 Occipital lobe

C715 Ventricle, NOS

C716 Cerebellum, NOS

C717 Brain stem

C718 Overlapping lesion of brain

C719 Brain, NOS

Note 1: The following sources were used in the development of this chapter

- SEER Extent of Disease 1988: Codes and Coding Instructions (3rd Edition, 1998) (<https://seer.cancer.gov/archive/manuals/EOD10Dig.3rd.pdf>)
- SEER Summary Staging Manual-2000: Codes and Coding Instructions (<https://seer.cancer.gov/tools/ssm/>)
- Collaborative Stage Data Collection System, version 02.05: <https://cancerstaging.org/cstage/Pages/default.aspx>
- Chapter 72 *Brain and Spinal Cord*, in the AJCC Cancer Staging Manual, Eighth Edition (2017) published by Springer International Publishing. Used with permission of the American College of Surgeons, Chicago, Illinois.

Note 2: See the following chapters for the listed histologies

- 8710-8714, 8800-8801, 8803-8806, 8811-8814, 8820-8842, 8851-8881, 8891-8898, 8901-8934, 8940-9063, 9065, 9072-9073, 9081-9083, 9086-9091, 9110, 9121-9132, 9135-9137, 9141-9175, 9181-9210, 9221-9361, 9363, 9365-9373, 9541-9582: *Soft Tissue*
- 8935-8936: *GIST*

Note 3: Summary Stage is the only applicable staging system for this site/histology/schema.

Note 4: Assign code 8 for benign or borderline tumors.

Note 5: Codes 0, 3, and 4 are not applicable for this chapter.

Note 6: The following subsites code to C710 are INFRAtentorial:

- Hypothalamus
- Pallium
- Thalamus

Note 7: The following subsites coded to C718 are SUPRAtentorial

- Corpus callosum
- Tapetum

Note 8: The following sites coded to C719 are SUPRAtentorial

- Anterior cranial fossa
- Middle cranial fossa
- Suprasellar

Note 9: The following subsites coded to C719 are INFRAtentorial

- Posterior cranial fossa

Note 10: A midline shift is not the same thing as crossing the midline (code 2)

- It must state tumor **crosses the midline**

SUMMARY STAGE

1 Localized only (localized, NOS)

- Confined to brain, NOS
- Confined to ventricles
 - Tumor invades or encroaches upon ventricular system
- Infratentorial tumor confined to
 - Brain stem or meninges of brain stem (one side)
 - Medulla oblongata
 - Midbrain (mesencephalon)
 - Pons
 - Cerebellum or meninges of cerebellum (one side or midline)
 - Lateral lobes
 - Median lobe of cerebellum
 - Vermis
 - Hypothalamus
 - Thalamus
- Infratentorial tumor
 - Both cerebellum and brain stem involved with tumor on one side
- Supratentorial tumor confined to

- Cerebral hemisphere (cerebrum) or meninges of cerebral hemisphere (one side)
 - Frontal lobe
 - Occipital lobe
 - Parietal lobe
 - Temporal lobe

2 Regional, NOS

- Bone (skull)
- Contralateral hemisphere
- Corpus callosum (including splenium)
- Major blood vessel(s)
- Meninges (e.g., dura)
- Nerves (cranial, NOS)
- Spinal cord/canal
- Supratentorial tumor extends infratentorially to involve
 - Brain stem
 - Cerebellum
 - Hypothalamus
 - Pallium
 - Posterior cranial fossa
 - Thalamus
- Infratentorial tumor extends supratentorially to involve
 - Anterior cranial fossa
 - Cerebrum (cerebral hemisphere) (excluding hypothalamus, pallium, thalamus)
 - Corpus callosum
 - Middle cranial fossa
 - Suprasellar brain
 - Tapetum
- Tumor crosses the midline

7 Distant site(s)/lymph node(s) involved

- Distant site(s) (including further contiguous extension)
 - Circulating cells in cerebral spinal fluid (CSF)
 - Nasal cavity
 - Nasopharynx
 - Other direct extension outside CNS
 - Posterior pharynx
- Distant lymph node(s), NOS
- Distant metastasis, NOS
 - Carcinomatosis
 - Distant metastasis WITH or WITHOUT distant lymph node(s)
 - Metastasis within CNS and CSF pathways
 - "Drop" metastasis

- Extra-neural metastasis
- Metastasis outside the CNS

8 Benign or borderline brain

9 Unknown if extension or metastasis

CNS OTHER

C701, C709, C720-C721, C728-C729: 8000-8700, 8720-8790, 8802, 8810, 8815, 8850, 8890, 8900, 9064, 9070-9071, 9080, 9084-9085, 9100-9105, 9120, 9133, 9140, 9180, 9220, 9362, 9364, 9380-9540, 9680, 9699, 9700-9714, 9751-9759

C722, C724-C725: 8000-8700, 8720-8790, 8900, 9064, 9070-9071, 9080, 9084-9085, 9100, 9120, 9140, 9220, 9362, 9380-9539, 9680, 9699, 9700-9714, 9751-9759

C723: 8000-8700, 8720-8790, 9064, 9070, 9080, 9084-9085, 9100, 9140, 9180, 9362, 9380-9420, 9423-9472, 9474-9493, 9501-9521, 9523, 9531-9539, 9680, 9699, 9700-9714, 9751-9759

C701, C709, C720-C725, C728, C729

C701 Spinal meninges

C709 Meninges, NOS

C720 Spinal cord

C721 Cauda equina

C722 Olfactory nerve

C723 Optic nerve

C724 Acoustic nerve

C725 Cranial nerve, NOS

C728 Overlapping lesion of brain and central nervous system

C729 Nervous system, NOS

Note 1: The following sources were used in the development of this chapter

- SEER Extent of Disease 1988: Codes and Coding Instructions (3rd Edition, 1998) (<https://seer.cancer.gov/archive/manuals/EOD10Dig.3rd.pdf>)
- SEER Summary Staging Manual-2000: Codes and Coding Instructions (<https://seer.cancer.gov/tools/ssm/>)
- Collaborative Stage Data Collection System, version 02.05: <https://cancerstaging.org/cstage/Pages/default.aspx>
- Chapter 72 *Brain and Spinal Cord*, in the AJCC Cancer Staging Manual, Eighth Edition (2017) published by Springer International Publishing. Used with permission of the American College of Surgeons, Chicago, Illinois.

Note 2: See the following chapters for the listed histologies

- C701, C709, C720-C721, C728-C729 (8710-8714, 8800-8801, 8803-8806, 8811-8814, 8820-8842, 8851-8881, 8891-8898, 8901-8934, 8940-9063, 9065, 9072-9073, 9081-9083, 9086-9091, 9110, 9121-9132, 9135-9137, 9141-9175, 9181-9210, 9221-9361, 9363, 9365-9373, 9541-9582): *Soft Tissue*
- C722, C724-C725 (8710-8714, 8800-8806, 8810-8898, 8901-8905, 8910, 8912, 8920-8921, 8930-8934, 8940-8991, 9000-9016, 9020, 9030-9063, 9065, 9072-9073, 9081-9083, 9086-9091, 9101-9110, 9121-9137, 9141-9210, 9221-9231, 9240-9361, 9363-9373, 9540-9582): *Soft Tissue*

- C723 (8710-8714, 8800-8921, 8932-8934, 8940-8990, 9000-9016, 9030-9063, 9065, 9071-9073, 9081-9083, 9086-9091, 9101-9137, 9141-9175, 9181-9230, 9240-9361, 9363-9373, 9421, 9473, 9500, 9522, 9530, 9540-9582): *Orbital Sarcoma*
- C723 (8930-8931, 8991, 9020, 9231): *Soft Tissue*
- 8935-8936: GIST

Note 3: Summary Stage is the only applicable staging system for this site/histology/schema.

Note 4: Assign code 8 for benign or borderline tumors.

Note 5: Codes 0, 3, and 4 are not applicable for this chapter.

SUMMARY STAGE

1 Localized only (localized, NOS)

- Confined to tissue or site of origin

2 Regional, NOS

- Adjacent connective/soft tissue
- Adjacent muscle
- Brain for cranial nerve tumor(s)
- Major blood vessel(s)
- Meningeal tumor infiltrates nerve
- Nerve tumor infiltrates meninges (dura)
- Sphenoid and frontal sinuses (skull)

7 Distant site(s)/lymph node(s) involved

- Distant site(s) (including further contiguous extension)
 - Bone other than skull
 - Brain except for cranial nerve tumor(s)
 - Eye
- Distant lymph node(s), NOS
- Distant metastasis, NOS
 - Carcinomatosis
 - Distant metastasis WITH or WITHOUT distant lymph node(s)

8 Benign or borderline brain

9 Unknown if extension or metastasis

INTRACRANIAL GLAND

8000-8700, 8720-8790, 8900, 9064, 9070-9071, 9080, 9084-9085, 9100, 9120, 9140, 9220, 9362, 9380-9539, 9680, 9699, 9700-9714, 9751-9759

C751-C753

C751 Pituitary gland

C752 Craniopharyngeal duct

C753 Pineal Gland

Note 1: The following sources were used in the development of this chapter

- SEER Extent of Disease 1988: Codes and Coding Instructions (3rd Edition, 1998) (<https://seer.cancer.gov/archive/manuals/EOD10Dig.3rd.pdf>)
- SEER Summary Staging Manual-2000: Codes and Coding Instructions (<https://seer.cancer.gov/tools/ssm/>)
- Collaborative Stage Data Collection System, version 02.05: <https://cancerstaging.org/cstage/Pages/default.aspx>
- Chapter 72 *Brain and Spinal Cord*, in the AJCC Cancer Staging Manual, Eighth Edition (2017) published by Springer International Publishing. Used with permission of the American College of Surgeons, Chicago, Illinois.

Note 2: See the following chapters for the listed histologies

- 8710-8714, 8800-8806, 8810-8898, 8901-8905, 8910, 8912, 8920-8921, 8930-8934, 8940-8991, 9000-9016, 9020, 9030-9063, 9065, 9072-9073, 9081-9083, 9086-9091, 9101-9110, 9121-9137, 9141-9210, 9221-9231, 9240-9361, 9363-9373, 9540-9582: *Soft Tissue*
- 8935-8936: *GIST*

Note 3: Summary Stage is the only applicable staging system for this site/histology/schema.

Note 4: Assign code 8 for benign or borderline tumors.

Note 5: Codes 3 and 4 are not applicable for this chapter.

SUMMARY STAGE

0 In situ, intraepithelial, noninvasive

1 Localized only (localized, NOS)

- Confined to gland of origin

2 Regional by direct extension only

- Adjacent connective/soft tissue
- Adjacent organ(s)/structure(s) for pituitary and craniopharyngeal duct
 - Cavernous sinus
 - Infundibulum
 - Pons
 - Sphenoid body and sinuses
- Adjacent organ(s)/structure(s) for pineal
 - Infratentorial and central brain

7 Distant site(s)/lymph node(s) involved

- Distant site(s) (including further contiguous extension)
- Distant lymph node(s), NOS
- Distant metastasis, NOS
 - Carcinomatosis
 - Distant metastasis WITH or WITHOUT distant lymph node(s)

8 Benign or borderline brain

9 Unknown if extension or metastasis

ENDOCRINE SYSTEM

THYROID

8000-8700, 8720-8790, 9700-9701

C739

C739 Thyroid gland

Note 1: The following sources were used in the development of this chapter

- SEER Extent of Disease 1988: Codes and Coding Instructions (3rd Edition, 1998) (<https://seer.cancer.gov/archive/manuals/EOD10Dig.3rd.pdf>)
- SEER Summary Staging Manual-2000: Codes and Coding Instructions (<https://seer.cancer.gov/tools/ssm/>)
- Collaborative Stage Data Collection System, version 02.05: <https://cancerstaging.org/cstage/Pages/default.aspx>
- Chapter 73 *Thyroid-Differentiated and Anaplastic Carcinoma*, in the AJCC Cancer Staging Manual, Eighth Edition (2017) published by Springer International Publishing. Used with permission of the American College of Surgeons, Chicago, Illinois.
- Chapter 74 *Thyroid-Medullary*, in the AJCC Cancer Staging Manual, Eighth Edition (2017) published by Springer International Publishing. Used with permission of the American College of Surgeons, Chicago, Illinois.

Note 2: See the following chapters for the listed histologies

- 8710-8714, 8800-8934, 8940-9137, 9141-9582: *Soft Tissue*
- 8935-8936: *GIST*
- 9140: *Kaposi Sarcoma*

SUMMARY STAGE

0 In situ: noninvasive, intraepithelial

1 Localized only (localized, NOS)

- Confined to thyroid, NOS
- Into thyroid capsule, but not beyond
- Multiple foci confined to thyroid
- Single invasive tumor confined to thyroid

2 Regional by direct extension only

- Blood vessel(s) (major)
 - Carotid artery (encased)
 - Jugular vein
 - Thyroid artery or vein
- Cricoid cartilage
- Esophagus
- Extrathyroidal extension (microscopic, macroscopic, NOS)
- Larynx
- Nerves
 - Recurrent laryngeal
 - Vagus nerve
- Parathyroid
- Pericapsular soft tissue/connective tissue
- Sternocleidomastoid muscle
- Strap muscle(s)
 - Omohyoid
 - Sternohyoid
 - Sternothyroid
 - Thyrohyoid
- Subcutaneous soft tissue
- Thyroid cartilage
- Trachea
- Tumor described as “FIXED to adjacent tissues”

3 Regional lymph node(s) involved only

- Level I
 - Level IA - Submental
 - Level IB - Submandibular (submaxillary), sublingual
- Level II - Upper jugular
 - Jugulodigastric (subdigastric)
 - Upper deep cervical
 - Level IIA - Anterior
 - Level IIB - Posterior
- Level III - Middle jugular
 - Middle deep cervical
- Level IV - Lower jugular
 - Jugulo-omohyoid (supraomohyoid)
 - Lower deep cervical
 - Virchow node
- Level V - Posterior triangle group
 - Posterior cervical
 - Level VA - Spinal accessory

- Level VB - Transverse cervical, supraclavicular
- Level VI - Anterior compartment group
 - Laterotracheal
 - Paralaryngeal
 - Paratracheal - above suprasternal notch
 - Perithyroidal
 - Precricoid (Delphian)
 - Prelaryngeal
 - Pretracheal - above suprasternal notch
 - Recurrent laryngeal
- Level VII - Superior mediastinal group (for other mediastinal node(s) see code 7)
 - Esophageal groove
 - Paratracheal - below suprasternal notch
 - Pretracheal - below suprasternal notch
- Other groups
 - Cervical, NOS
 - Deep cervical, NOS
 - Facial
 - Buccinator (buccal)
 - Mandibular
 - Nasolabial
 - Internal jugular, NOS
 - Parapharyngeal
 - Parotid
 - Infraauricular
 - Intraparotid
 - Periparotid
 - Preauricular
 - Retroauricular (mastoid)
 - Retropharyngeal
 - Suboccipital
- Regional lymph node(s), NOS
 - Lymph node(s), NOS

4 Regional by BOTH direct extension AND regional lymph node(s) involved

- Codes (2) + (3)

7 Distant site(s)/lymph node(s) involved

- Distant site(s) (including further contiguous extension)
 - Gross extrathyroidal extension invading
 - Bone
 - Mediastinal tissues

- Prevertebral fascia
 - Skeletal muscle, other than strap or sternocleidomastoid muscle
- Distant lymph node(s), NOS
- Distant metastasis, NOS
 - Carcinomatosis
 - Distant mets WITH or WITHOUT distant lymph node(s)

9 Unknown if extension or metastasis

PARATHYROID

8000-8700, 8720-8790, 9700-9701

C750

C750 Parathyroid

Note 1: The following sources were used in the development of this chapter

- SEER Extent of Disease 1988: Codes and Coding Instructions (3rd Edition, 1998) (<https://seer.cancer.gov/archive/manuals/EOD10Dig.3rd.pdf>)
- SEER Summary Staging Manual-2000: Codes and Coding Instructions (<https://seer.cancer.gov/tools/ssm/>)
- Collaborative Stage Data Collection System, version 02.05: <https://cancerstaging.org/cstage/Pages/default.aspx>
- Chapter 75 *Parathyroid*, in the AJCC Cancer Staging Manual, Eighth Edition (2017) published by Springer International Publishing. Used with permission of the American College of Surgeons, Chicago, Illinois.

Note 2: See the following chapters for the listed histologies

- 8710-8714, 8800-8934, 8940-9137, 9141-9582: *Soft Tissue*
- 8935-8936: *GIST*
- 9140: *Kaposi Sarcoma*

Note 3: Parathyroid tumors are defined as left or right and superior (upper) or inferior (lower).

Note 4: Atypical parathyroid neoplasms (code 0) are defined as tumors that are histologically or clinically worrisome but do not fulfill the more robust criteria [i.e., invasion metastasis] for carcinoma.

Note 5: Metastases for the parathyroid is anything beyond the central and lateral part of the neck.

SUMMARY STAGE

0 In situ, intraepithelial, noninvasive

- Atypical parathyroid neoplasm (neoplasm of uncertain malignant potential)

1 Localized only (localized, NOS)

- Confined to parathyroid
- Extension to soft tissue

2 Regional by direct extension only

- Adjacent lymph nodes
- Esophagus
- Recurrent laryngeal nerve
- Thymus
- Thyroid gland
- Trachea
- Skeletal muscle

3 Regional lymph node(s) involved only

- Level I
 - Level IA - Submental
 - Level IB - Submandibular (submaxillary), sublingual
- Level II - Upper jugular
 - Jugulodigastric (subdigastric)
 - Upper deep cervical
 - Level IIA - Anterior
 - Level IIB - Posterior
- Level III - Middle jugular
 - Middle deep cervical
- Level IV - Lower jugular
 - Jugulo-omohyoid (supraomohyoid)
 - Lower deep cervical
 - Virchow node
- Level V - Posterior triangle group
 - Posterior cervical
 - Level VA - Spinal accessory
 - Level VB - Transverse cervical, supraclavicular
- Level VI - Anterior compartment group
 - Laterotracheal
 - Paralaryngeal
 - Paratracheal - above suprasternal notch
 - Perithyroidal
 - Precricoid (Delphian)
 - Prelaryngeal
 - Pretracheal - above suprasternal notch
 - Recurrent laryngeal
- Level VII - Superior mediastinal group (for other mediastinal node(s) see code 7)
 - Esophageal groove
 - Paratracheal - below suprasternal notch
 - Pretracheal - below suprasternal notch
- Other groups
 - Cervical, NOS

- Deep cervical, NOS
- Facial
 - Buccinator (buccal)
 - Mandibular
 - Nasolabial
- Internal jugular, NOS
- Parapharyngeal
- Parotid
 - Infraauricular
 - Intraparotid
 - Periparotid
 - Preauricular
- Retroauricular (mastoid)
- Retropharyngeal
- Suboccipital
- Regional lymph node(s), NOS
 - Lymph node(s), NOS

4 Regional by BOTH direct extension AND regional lymph node(s) involved

- Codes (2) + (3)

7 Distant site(s)/lymph node(s) involved

- Distant site(s) (including further contiguous extension)
 - Bone
 - Diaphragm
 - Liver
 - Lung
 - Pancreas
 - Spleen
- Distant lymph node(s), NOS
- Distant metastasis, NOS
 - Carcinomatosis
 - Distant metastasis WITH or WITHOUT distant lymph node(s)

9 Unknown if extension or metastasis

ADRENAL GLAND

8000-8700, 8720-8790, 9700-9701

C740-C741, C749, C755

C740 Cortex of adrenal gland

C741 Medulla of adrenal gland

C749 Adrenal gland, NOS

C755 Aortic body and other paraganglioma (*Histologies 8680, 8690, 8692-8693, 8700 only*)

Note 1: The following sources were used in the development of this chapter

- SEER Extent of Disease 1988: Codes and Coding Instructions (3rd Edition, 1998) (<https://seer.cancer.gov/archive/manuals/EOD10Dig.3rd.pdf>)
- SEER Summary Staging Manual-2000: Codes and Coding Instructions (<https://seer.cancer.gov/tools/ssm/>)
- Collaborative Stage Data Collection System, version 02.05: <https://cancerstaging.org/cstage/Pages/default.aspx>
- Chapter 76 *Adrenal Cortical Carcinoma*, in the AJCC Cancer Staging Manual, Eighth Edition (2017) published by Springer International Publishing. Used with permission of the American College of Surgeons, Chicago, Illinois.
- Chapter 77 *Adrenal-Neuroendocrine Tumors*, in the AJCC Cancer Staging Manual, Eighth Edition (2017) published by Springer International Publishing. Used with permission of the American College of Surgeons, Chicago, Illinois.

Note 2: See the following chapters for the listed histologies

- 8710-8714, 8800-8934, 8940-9137, 9141-9582: *Soft Tissue*
- 8935-8936: *GIST*
- 9140: *Kaposi Sarcoma*

SUMMARY STAGE

0 In situ: noninvasive, intraepithelial

1 Localized only (localized, NOS)

- Confined to adrenal gland, no extra-adrenal invasion

2 Regional by direct extension only

- Adjacent connective tissue
- Gerota's fascia
- Invasion of adjacent organs
 - Blood vessels (large)

- Renal vein
 - Vena cava
- Kidney
- Retroperitoneal structures including
 - Great vessels (aorta, inferior vena cava)

3 Regional lymph node(s) involved only

- Aortic, NOS
 - Para-aortic
 - Periaortic
- Pericaval, NOS
 - Paracaval
 - Precaval
 - Retrocaval
- Retroperitoneal, NOS
- Regional lymph node(s), NOS
 - Lymph node(s), NOS

4 Regional by BOTH direct extension AND regional lymph node(s) involved

- Codes (2) + (3)

7 Distant site(s)/lymph node(s) involved

- Distant site(s) (including further contiguous extension)
 - Bone
 - Diaphragm
 - Liver
 - Lung
 - Pancreas
 - Spleen
- Distant lymph node(s), NOS
- Distant metastasis, NOS
 - Carcinomatosis
 - Distant metastasis WITH or WITHOUT distant lymph node(s)

9 Unknown if extension or metastasis

ENDOCRINE OTHER

8000-8700, 8720-8790, 9700-9701 (C754, C758-C759)
8000-8671, 8681-8683, 8691, 8720-8790, 9700-9701 (C755)

C754-C755, C758-C759

C754 Carotid body

C755 Aortic body and other paraganglia

C758 Overlapping lesion of endocrine glands and related structures

C759 Endocrine gland, NOS

Note 1: The following sources were used in the development of this chapter

- SEER Extent of Disease 1988: Codes and Coding Instructions (3rd Edition, 1998) (<https://seer.cancer.gov/archive/manuals/EOD10Dig.3rd.pdf>)
- SEER Summary Staging Manual-2000: Codes and Coding Instructions (<https://seer.cancer.gov/tools/ssm/>)
- Collaborative Stage Data Collection System, version 02.05: <https://cancerstaging.org/cstage/Pages/default.aspx>

Note 2: See the following chapters for the listed histologies

- 8680, 8690, 8692-8693, 8700 (C755 only): *Adrenal Gland*
- 8710-8714, 8800-8934, 8940-9137, 9141-9582: *Soft Tissue*
- 8935-8936: *GIST*
- 9140: *Kaposi Sarcoma*

Note 3: Summary Stage is the only applicable staging system for this site/histology/schema.

SUMMARY STAGE

0 In situ: noninvasive, intraepithelial

1 Localized only (localized, NOS)

- Invasive tumor confined to gland of origin

2 Regional by direct extension only

- Adjacent connective tissue
- Adjacent organs/structures
 - Aortic body
 - Organs/structures in mediastinum
 - Carotid body
 - Upper neck

3 Regional lymph node(s) involved only

- Cervical for carotid body
- Mediastinal for aortic body
- Regional lymph node(s), NOS
 - Lymph node(s), NOS

4 Regional by BOTH direct extension AND regional lymph node(s) involved

- Codes (2) + (3)

7 Distant site(s)/lymph node(s) involved

- Distant site(s) (including further contiguous extension)
- Distant lymph node(s), NOS
- Distant metastasis, NOS
 - Carcinomatosis
 - Distant metastasis WITH or WITHOUT distant lymph node(s)

9 Unknown if extension or metastasis

HEMATOLOGIC MALIGNANCIES

LYMPH NODES AND LYMPHATIC STRUCTURES ABOVE AND BELOW THE DIAPHRAGM

Note: The most common terms are included in this table. For a more complete listing of lymph nodes, see **Appendix I**.

ABOVE THE DIAPHRAGM	BELOW THE DIAPHRAGM
Axillary	Celiac
Brachial (lateral axillary)	Colic
Buccal (buccinator)	Femoral (superficial, inguinal)
Cervical, NOS	Gastric
Epitrochlear	Hepatic
Facial	Ileocolic
Hilar (bronchopulmonary)	Iliac
Infraclavicular (subclavicular)	Inguinal
Internal jugular	Internal iliac (hypogastric)
Mastoid (post-/retro-auricular)	Mesenteric
Mediastinal	Obturator
Occipital	Pancreatic
Para/peritracheal	Para-aortic
Parasternal (internal mammary)	Peyer's patches
Parotid	Popliteal
Pectoral (anterior axillary)	Porta hepatis (portal)
Posterior triangle (spinal accessory)	Pyloric
Preauricular	Retroperitoneal
Prelaryngeal	Sacral
Retropharyngeal	Spleen
Scalene (inferior deep cervical)	Splenic (lineal)
Sublingual	
Submandibular (submaxillary)	
Submental	
Subscapular (posterior axillary)	
Supraclavicular (transverse cervical)	
Tonsil	
Thymus	
Waldeyer ring [ring of lymphoid tissue formed by the two palatine tonsils, the pharyngeal tonsil (adenoids) and the lingual tonsil]	

HEMATOLOGIC MALIGNANCIES

LYMPHOMA

9590, 9596-9663, 9673-9699, 9702-9719, 9725-9726, 9735, 9737-9738, 9823, 9826-9827 (varying primary sites and histologies)

- See *Summary Stage 2018 Manual, Appendix III* for a detailed listing of primary site/histology combinations for this schema

9591 and Schema Discriminator 1: 3, 9 (C000-C440, C442-C689, C691-C694, C698-C809)

Note 1: The following sources were used in the development of this chapter

- SEER Extent of Disease 1988: Codes and Coding Instructions (3rd Edition, 1998) (<https://seer.cancer.gov/archive/manuals/EOD10Dig.3rd.pdf>)
- SEER Summary Staging Manual-2000: Codes and Coding Instructions (<https://seer.cancer.gov/tools/ssm/>)
- Collaborative Stage Data Collection System, version 02.05: <https://cancerstaging.org/cstage/Pages/default.aspx>
- Chapter 79 *Hodgkin and Non-Hodgkin Lymphomas*, in the AJCC Cancer Staging Manual, Eighth Edition (2017) published by Springer International Publishing. Used with permission of the American College of Surgeons, Chicago, Illinois.
- Chapter 80 *Pediatric Hodgkin and Non-Hodgkin Lymphomas*, in the AJCC Cancer Staging Manual, Eighth Edition (2017) published by Springer International Publishing. Used with permission of the American College of Surgeons, Chicago, Illinois.

Note 2: See the following schemas for the listed histologies

- C441, C690, C695-C696 (9590-9699, 9702-9719, 9725-9726, 9735, 9737-9738, 9823, 9826-9827): *Lymphoma Ocular Adnexa*
- C440, C442-C449, C510, C609, C632 (9597, 9680, 9708-9709, 9712, 9718-9719, 9726): *Primary Cutaneous Lymphomas*
- C700, C710-C719 (9680, 9699, 9700-9714): *Brain*
- C701, C709, C720-C725, C728-C729 (9680, 9699, 9700-9714): *CNS Other*
- C751-C753 (9680, 9699, 9700-9714): *Intracranial Gland*
- 9591 and Schema Discriminator 1: 1, 2 (C000-C440, C442-C689, C691-C694, C698-C809): *HemeRetic*

Note 3: Chapter includes the preferred terms based on the *2017 WHO Classification of Haematopoietic and Lymphoid Tissues*

9590 Malignant lymphoma, NOS

9591 Non-Hodgkin lymphoma, NOS

9596 B-cell lymphoma, unclassifiable, with features intermediate between DLBCL and classic Hodgkin lymphoma

9597 Primary cutaneous follicle centre lymphoma
 9650 Classical Hodgkin lymphoma
 9651 Lymphocyte-rich classic Hodgkin lymphoma
 9652 Mixed cellularity classic Hodgkin lymphoma
 9653 Lymphocyte-depleted classic Hodgkin lymphoma
 9659 Nodular lymphocyte predominant Hodgkin lymphoma
 9663 Nodular sclerosis classic Hodgkin lymphoma
 9673 Mantle cell lymphoma
 9678 Primary effusion lymphoma
 9679 Primary mediastinal (thymic) large B-cell lymphoma
 9680 Diffuse large B-cell lymphoma (DLBCL)
 9687 Burkitt lymphoma
 9688 T-cell/histiocyte-rich large B-cell lymphoma
 9689 Splenic marginal zone lymphoma
 9690 Follicular lymphoma
 9691 Follicular lymphoma, grade 2
 9695 Follicular lymphoma, grade 1
 9698 Follicular lymphoma, grade 3
 9699 Extranodal marginal zone lymphoma of mucosa-associated lymphoid tissue (MALT lymphoma)
 9702 Peripheral T-cell lymphoma, NOS
 9705 Angioimmunoblastic T-cell lymphoma
 9708 Subcutaneous panniculitis-like T-cell lymphoma
 9709 Primary cutaneous peripheral T-cell lymphomas
 9712 Intravascular large B-cell lymphoma
 9714 Anaplastic large cell lymphoma, ALK-positive
 9716 Hepatosplenic T-cell lymphoma
 9717 Enteropathy-associated T-cell lymphoma
 9718 Primary cutaneous anaplastic large cell lymphoma
 9719 Extranodal NK/T-cell lymphoma, nasal type
 9725 Hydroa vacciniforme-like lymphoma
 9726 Primary cutaneous gamma-delta T-cell lymphoma
 9735 Plasmablastic lymphoma
 9737 ALK-positive large B-cell lymphoma
 9738 HHV8-positive DLBCL, NOS
 9823 Chronic lymphocytic leukemia (CLL)/small lymphocytic lymphoma
 9826 Burkitt cell leukemia
 9827 Adult T-cell leukemia/lymphoma

Note 4: Any mention of the terms including fixed, matted, mass in the hilum, mediastinum, retroperitoneum, and/or mesentery, palpable, enlarged, shotty, lymphadenopathy are all regarded as involvement for lymphomas when determining appropriate code.

Note 5: If there is peripheral blood or bone marrow involvement, code 7.

SUMMARY STAGE

1 Localized only

- Involvement of multiple nodal chains in the SAME lymph node region
- Multifocal involvement of one extralymphatic organ/site (except lung/liver) WITHOUT nodal involvement
- Single extralymphatic site WITHOUT nodal involvement
- Single lymph node region involved

2 Regional, NOS

- Bulky disease present
- Contiguous extension between extralymphatic sites and regional nodes
 - WITH or WITHOUT involvement of other nodal regions on SAME side of diaphragm
- Localized involvement of a single extralymphatic organ/site
 - WITH involvement of its regional lymph node(s) OR
 - WITH involvement of other lymph node(s) on the SAME side of the diaphragm
- Two or more lymph node regions involved SAME side of diaphragm

7 Distant site(s)/lymph node(s) involved

- Distant involvement
 - Diffuse or disseminated (multifocal) involvement of ONE extralymphatic organ/site
 - WITH associated lymph node involvement OR
 - Diffuse or disseminated (multifocal) involvement of ONE or MORE extralymphatic organ(s)/site(s)
 - WITH or WITHOUT associated lymph node involvement
 - Involvement of isolated extralymphatic organ in absence of involvement of adjacent lymph nodes, but in conjunction with disease in distant sites
 - Involvement of lymph node regions on BOTH sides of the diaphragm
 - OR nodes ABOVE the diaphragm involved WITH spleen involvement
 - Multifocal involvement of one extralymphatic organ/site WITH nodal involvement
 - Noncontiguous extralymphatic organ involvement in conjunction with nodal disease (two or more sites involved)
- Distant metastasis, NOS
 - Blood/peripheral blood
 - Bone marrow
 - Cerebrospinal fluid (CSF)
 - Liver
 - Lung (other than by direct extension in code 2)

9 Unknown if extension or metastasis

MYCOSIS FUNGOIDES

9700-9701 (C000-C002, C006, C440-C449, C510-C512, C518-C519, C600-C602, C608-C609, C632)

Note 1: The following sources were used in the development of this chapter

- SEER Extent of Disease 1988: Codes and Coding Instructions (3rd Edition, 1998) (<https://seer.cancer.gov/archive/manuals/EOD10Dig.3rd.pdf>)
- SEER Summary Staging Manual-2000: Codes and Coding Instructions (<https://seer.cancer.gov/tools/ssm/>)
- Collaborative Stage Data Collection System, version 02.05: <https://cancerstaging.org/cstage/Pages/default.aspx>
- Chapter 81 *Primary Cutaneous Lymphomas*, in the AJCC Cancer Staging Manual, Eighth Edition (2017) published by Springer International Publishing. Used with permission of the American College of Surgeons, Chicago, Illinois.

Note 2: For mycosis fungoides of sites other than those above, use the appropriate site-specific schema.

Note 3: Code 0 is not applicable for this chapter.

Note 4: All lymph node (regional and distant) involvement is coded as regional lymph node involvement.

Note 5: Visceral involvement is metastatic disease and should be questioned in the absence of node or blood involvement.

SUMMARY STAGE

1 Localized only (localized, NOS)

- MFCCG Stage I
 - Less than 10% of skin surface, no tumors
 - Limited to patches, papules, or plaques
- MFCCG Stage II
 - Greater than or equal to 10% of skin surface, no tumors
 - Generalized patches, papules, or plaques
- Not stated whether patches, papules, or plaques
 - % of body surface not stated, no tumors
 - Skin involvement, NOS: extent not stated, no tumors

2 Regional by direct extension only

- MFCG Stage III
 - Cutaneous tumor, size not stated
 - Generalized erythroderma (confluence of erythema)
 - (greater than 50% of body involved with diffuse redness)
 - One or more tumors equal to 1 cm or greater
 - Sezary syndrome
 - Skin lesion described as tumor less than 1 cm

3 Regional lymph node(s) involved only

- Both clinically enlarged palpable lymph node(s) (adenopathy) AND
 - pathologically positive nodes
- Clinically enlarged palpable lymph node(s) (adenopathy) AND
 - either pathologically negative nodes or no pathological statement
- No clinically enlarged palpable lymph node(s) (adenopathy) BUT
 - pathologically positive lymph node(s)
- Dutch grade 1-4 OR NCI LN 0-4
 - Clone positive, negative or unknown
- Regional lymph node(s), NOS
 - Lymph node(s), NOS

4 Regional by BOTH direct extension AND regional lymph node(s) involved

- Codes (2) + (3)

7 Distant site(s) involved

- Distant site(s) (including further contiguous extension)
 - MFCG Stage IV
 - Bone marrow
 - Involvement by at least one organ outside the skin, nodes, blood, or bone marrow
 - Liver
 - Spleen
 - Visceral (non-cutaneous, extranodal) involvement, pathologically confirmed
- Distant metastasis, NOS
 - Carcinomatosis

9 Unknown if extension or metastasis

PRIMARY CUTANEOUS LYMPHOMAS (EXCLUDING MF AND SS)

9597, 9680, 9708-9709, 9712, 9718-9719, 9726

C440, C442-C449, C510, C609, C632

C440 Skin of lip, NOS

C442 External ear

C443 Skin of other and unspecified parts of face

C444 Skin of scalp and neck

C445 Skin of trunk

C446 Skin of upper limb and shoulder

C447 Skin of lower limb and hip

C448 Overlapping lesion of skin

C449 Skin, NOS

C510 Labium majus

C609 Penis

C632 Scrotum, NOS

Note 1: The following sources were used in the development of this chapter

- SEER Extent of Disease 1988: Codes and Coding Instructions (3rd Edition, 1998) (<https://seer.cancer.gov/archive/manuals/EOD10Dig.3rd.pdf>)
- SEER Summary Staging Manual-2000: Codes and Coding Instructions (<https://seer.cancer.gov/tools/ssm/>)
- Collaborative Stage Data Collection System, version 02.05: <https://cancerstaging.org/cstage/Pages/default.aspx>
- Chapter 81 *Primary Cutaneous Lymphomas*, in the AJCC Cancer Staging Manual, Eighth Edition (2017) published by Springer International Publishing. Used with permission of the American College of Surgeons, Chicago, Illinois.

Note 2: Code 0 is not applicable for this chapter.

Note 3: See the *Mycosis Fungoides* chapter for Mycosis Fungoides (9700) and Sezary syndrome (9701).

Note 4: Chapter includes the preferred terms based on the 2017 *WHO Classification of Haematopoietic and Lymphoid Tissues*

9597 Primary cutaneous follicle center lymphoma

9680 Primary cutaneous diffuse large B-cell lymphoma, leg type

9708 Subcutaneous panniculitis-like T-cell lymphoma

9709 Primary cutaneous peripheral T-cell lymphomas

9712 Intravascular large B-cell lymphoma

9718 Primary cutaneous anaplastic large cell lymphoma

9719 Extranodal NK/T-cell lymphoma, nasal type

9726 Primary cutaneous gamma-delta t-cell lymphoma

Note 5: If there is peripheral blood or bone marrow involvement, code 7.

SUMMARY STAGE

1 Localized only

- Solitary lesion
- Solitary skin involvement

2 Regional by direct extension only

- Multiple lesions confined to one or two contiguous body regions
- Multiple lesions, NOS
- Regional skin involvement

3 Regional lymph node(s) involved only

- Cenrowal
- Peripheral node region that drains an area of current or prior skin involvement
- Regional lymph node(s), NOS
 - Lymph node(s), NOS

4 Regional by BOTH direct extension AND regional lymph node(s) involved

- Codes (2) + (3)

7 Distant site(s)/lymph node(s) involved

- Distant site(s) (including further contiguous extension)
 - Blood/peripheral blood
 - Bone marrow
 - Extracutaneous non-lymph node disease present
 - Generalized skin involvement
 - Multiple lesions confined to discontinuous body regions
 - Multiple lesions confined to three or more contiguous body regions
 - Visceral (non-cutaneous) metastasis
- Distant lymph node(s), NOS
- Distant metastasis, NOS
 - Carcinomatosis
 - Distant metastasis WITH or WITHOUT distant lymph node(s)

9 Unknown if extension or metastasis

MYELOMA AND PLASMA CELL DISORDERS

9671 Lymphoplasmacytic lymphoma (except C441, C690, C695-C696)
9731 Plasmacytoma, NOS
9732 Plasma cell myeloma/multiple myeloma
9734 Plasmacytoma, extramedullary (except C441, C690, C695-C696)
9761 Waldenstrom Macroglobulinemia

Note 1: The following sources were used in the development of this chapter

- SEER Extent of Disease 1988: Codes and Coding Instructions (3rd Edition, 1998) (<https://seer.cancer.gov/archive/manuals/EOD10Dig.3rd.pdf>)
- SEER Summary Staging Manual-2000: Codes and Coding Instructions (<https://seer.cancer.gov/tools/ssm/>)
- Collaborative Stage Data Collection System, version 02.05: <https://cancerstaging.org/cstage/Pages/default.aspx>
- Chapter 82 *Plasma Cell Myeloma and Plasma Cell Disorder*, in the AJCC Cancer Staging Manual, Eighth Edition (2017) published by Springer International Publishing. Used with permission of the American College of Surgeons, Chicago, Illinois.

Note 2: Codes 0, 2, and 4 are not applicable for this chapter.

Note 3: Plasma cell myeloma/multiple myeloma (9732) is a widely disseminated plasma cell neoplasm, characterized by a single clone of plasma cells derived from B cells that grows in the bone marrow. It is always coded to 7 for systemic involvement.

Note 4: Lymphoplasmacytic lymphoma (9671) and Waldenstrom Macroglobulinemia (9761) are now collected with the plasma cell disorders. These are systemic diseases and should always be coded 7.

SUMMARY STAGE

1 Localized only

- Single plasmacytoma occurring in bone (osseous or medullary) (9731)
 - WITH or WITHOUT soft tissue extension
- Single plasmacytoma, NOS (9734)
 - Single plasmacytoma occurring outside of bone (extraosseous or extramedullary) (9731)

3 Regional lymph node(s) involved only

- Extraosseous plasmacytomas only (9734)
 - Regional lymph node(s), NOS
 - Lymph node(s), NOS

7 Distant site(s)/lymph node(s) involved

- Lymphoplasmacytic lymphoma (9671)
- Plasmacytomas (9731, 9734)
 - Multiple extrasosseous or extramedullary plasmacytomas (9734)
 - Multiple osseous or medullary plasmacytomas (9731)
 - Multiple plasmacytomas, NOS (9731, 9734)
- Plasma cell myeloma (9732)
 - Multiple myeloma
 - Myeloma, NOS
- Waldenstrom Macroglobulinemia (9761)

9 Unknown if extension or metastasis (applicable for 9731 and 9734 only)

HEMERETIC

9724, 9727, 9740-9742, 9762-9809, 9811-9820, 9831-9920, 9931-9992

9591 and Schema Discriminator 1: 1, 2 (C000-C440, C442-C689, C691-C694, C698-C809)

9751, 9755-9759 (C000-C699, C739-C750, C754-C809)

9930 (C000-C440, C442-C689, C691-C694, C698-C809)

Note 1: The following sources were used in the development of this chapter

- SEER Extent of Disease 1988: Codes and Coding Instructions (3rd Edition, 1998) (<https://seer.cancer.gov/archive/manuals/EOD10Dig.3rd.pdf>)
- SEER Summary Staging Manual-2000: Codes and Coding Instructions (<https://seer.cancer.gov/tools/ssm/>)
- Collaborative Stage Data Collection System, version 02.05: <https://cancerstaging.org/cstage/Pages/default.aspx>
- Chapter 83 *Leukemia*, in the AJCC Cancer Staging Manual, Eighth Edition (2017) published by Springer International Publishing. Used with permission of the American College of Surgeons, Chicago, Illinois.

Note 2: See the following schemas for the listed histologies

- 9591 and Schema Discriminator 1: 3, 9 (C000-C440, C442-C689, C691-C694, C698-C809): *Lymphoma*
- 9751, 9755-9759 (C700, C710-C719): *Brain*
- 9751, 9755-9759 (C701, C709, C720-C725, C728-C729): *CNS Other*
- 9751, 9755-9759 (C751-C753): *Intracranial Gland*
- 9930 (C441, C690, C695-C696): *Lymphoma Ocular Adnexa*

Note 3: The following histologies can be localized (code 1), systemic (7) or unknown (9)

9740 Mast cell sarcoma

9751 Langerhans cell histiocytosis, disseminated (except C700-C729, C751-C753)

9755 Histiocytic sarcoma (except C700-C729, C751-C753)

9756 Langerhans cell sarcoma (except C700-C729, C751-C753)

9757 Interdigitating dendritic cell sarcoma (except C700-C729, C751-C753)

9758 Follicular dendritic cell sarcoma (except C700-C729, C751-C753)

9759 Fibroblastic reticular cell tumor (except C700-C729, C751-C753)

9930 Myeloid sarcoma (except C441, C690, C695-C696)

9971 Polymorphic PTLN

Note 4: For histologies listed in **Note 2**, it is possible to have lymph node involvement; however, at this time, lymph node involvement for these histologies is not collected.

Note 5: The following histologies are systemic (code 7):

9591 Splenic B-cell lymphoma/leukemia, unclassifiable (except C441, C690, C695-C696)
9724 Systemic EBV-positive T-cell lymphoma of childhood
9727 Blastic plasmacytoid dendritic cell neoplasm
9741 Systemic mastocytosis with an associated hematological neoplasm
9742 Mast cell leukemia
9762 Heavy chain diseases
9800 Leukemia, NOS
9801 Acute undifferentiated leukemia
9806 Mixed-phenotype acute leukemia with t(9;22)(q34.1;q11.2); *BCR-ABL1*
9807 Mixed-phenotype acute leukemia with t(v;11q23.3); *KMT2A*-rearranged
9808 Mixed-phenotype acute leukemia, B/myeloid, NOS
9809 Mixed-phenotype acute leukemia, T/myeloid, NOS
9811 B-lymphoblastic leukemia/lymphoma, NOS
9812 B-lymphoblastic leukemia/lymphoma with t(9;22)(q34.1;q11.2); *BCR-ABL1*
9813 B-lymphoblastic leukemia/lymphoma with t(v;11q23.3); *KMT2A*-rearranged
9814 B-lymphoblastic leukemia/lymphoma with t(12;21)(p13.2;q22.1); *ETV6-RUNX1*
9815 B-lymphoblastic/lymphoma with hyperdiploidy
9816 B-lymphoblastic/lymphoma with hypodiploidy (hypodiploid ALL)
9817 B-lymphoblastic/lymphoma with t(5;14)(q31.1;q32.1); *IGH/IL3*
9818 B-lymphoblastic/lymphoma with t(1;19)(q23;p13.3); *TCF3-PBX1*
9820 Lymphoid leukemia, NOS
9831 T-cell large granular lymphocytic leukemia
9832 Prolymphocytic leukemia, NOS
9833 B-cell prolymphocytic leukemia
9834 T-cell prolymphocytic leukemia
9837 T-lymphoblastic leukemia/lymphoma
9840 Pure erythroid leukemia
9860 Myeloid leukemia, NOS
9861 Acute myeloid leukemia, NOS
9863 Chronic myeloid leukemia
9865 Acute myeloid leukemia with t(6;9)(p23;q34.1); *DEK-NUP214*
9866 Acute promyelocytic leukemia with *PML-RARA*
9867 Acute myelomonocytic leukemia
9869 Acute myeloid leukemia with inv(3)(q21.3q26.2) or t(3;3)(q21.3;q26.2); *RBM15-MKLI*
9870 Acute basophilic leukemia
9871 Acute myeloid leukemia with inv(16)(p13.1q22) or t(16;16)(p13.1;q22); *CBFB-MYH11*
9872 Acute myeloid leukemia, minimal differentiation
9873 Acute myeloid leukemia without maturation
9874 Acute myeloid leukemia with maturation
9875 Chronic myeloid leukemia, *BCR-ABL1*-positive
9876 Atypical chronic myeloid leukemia *BCR-ABL1*-negative
9891 Acute monoblastic and monocytic leukemia
9895 Acute myeloid leukemia with myelodysplasia-related changes
9896 Acute myeloid leukemia with t(8;21)(q22;q22.1), *RUNX1-RUNX1T1*

9897 Acute myeloid leukemia with t(9;11)(p21.3;q23.3); *KMT2A-MLLT3*
 9898 Myeloid leukemia associated with Down Syndrome
 9910 Acute megakaryoblastic leukemia
 9911 Acute myeloid leukemia (megakaryoblastic) with t(1;22)(p13.3;q13.1); *RBM15-MKLI*
 9920 Therapy-related myeloid neoplasms
 9931 Acute panmyelosis with myelofibrosis
 9940 Hairy cell leukemia
 9945 Chronic myelomonocytic leukemia, NOS
 9946 Juvenile myelomonocytic leukemia
 9948 Aggressive NK-cell leukemia
 9950 Polycythemia vera
 9961 Primary myelofibrosis
 9962 Essential thrombocythemia
 9963 Chronic neutrophilic leukemia
 9964 Chronic eosinophilic leukemia, NOS
 9965 Myeloid/lymphoid neoplasms with *PDGFRA* rearrangement
 9966 Myeloid/lymphoid neoplasm with *PDGFRB* rearrangement
 9967 Myeloid/lymphoid neoplasm with *FGFR1* rearrangement
 9975 Myelodysplastic/myeloproliferative neoplasm, unclassifiable
 9980 Myelodysplastic syndrome with single lineage dysplasia
 9982 Myelodysplastic syndrome with ring sideroblasts and single lineage dysplasia
 9983 Myelodysplastic syndrome with excess blasts
 9985 Myelodysplastic syndrome with multilineage dysplasia
 9986 Myelodysplastic syndrome with isolated del(5q)
 9989 Myelodysplastic syndrome, unclassifiable
 9991 Refractory neutropenia
 9992 Refractory thrombocytopenia

Note 6: Summary Stage is the only applicable staging system for this site/histology/schema.

Note 7: Codes 0, 2, 3, 4, and 5 are not applicable for this chapter.

SUMMARY STAGE

1 Localized only

- Localized disease
- (Single/solitary/unifocal/isolated)
- See Notes 2 and 3

7 Distant site(s)/lymph node(s) involved

- Systemic disease
- See Note 4

9 Unknown if extension or metastasis

ILL-DEFINED OTHER

C420-C424, C761-C765, C767-C768, C770-C775, C778-C779: 8000-8700, 8720-8790, 9700-9701

C809: 8000-8180, 8191-8246, 8248-8700, 8720-8790, 9700-9701

C760 and Schema Discriminator 1: Occult Head and Neck Lymph Nodes: 0, 1 (8000-8700, 8720-8790, 9700-9701)

C760-C765, C767-C768, C809

C42 and C77, Other than Hematopoietic neoplasms (9590-9992)

C420 Blood

C421 Bone marrow

C422 Spleen

C423 Reticuloendothelial system, NOS

C424 Hematopoietic system, NOS

Other and ill-defined sites of

C760 Head, face or neck, NOS

C761 Thorax, NOS

C762 Abdomen, NOS

C763 Pelvis, NOS

C764 Upper limb, NOS

C765 Lower limb, NOS

C767 Other ill-defined sites

C768 Overlapping lesion of ill-defined sites

Lymph nodes of

C770 Lymph nodes of head, face and neck

C771 Lymph nodes of intrathoracic

C772 Lymph nodes of intra-abdominal

C773 Lymph nodes of axilla or arm

C774 Lymph nodes of inguinal region or leg

C775 Lymph nodes of pelvis

C778 Lymph nodes of multiple regions

C779 Lymph nodes, NOS

C809 Unknown primary site

Note 1: The following sources were used in the development of this chapter

- SEER Extent of Disease 1988: Codes and Coding Instructions (3rd Edition, 1998) (<https://seer.cancer.gov/archive/manuals/EOD10Dig.3rd.pdf>)
- SEER Summary Staging Manual-2000: Codes and Coding Instructions (<https://seer.cancer.gov/tools/ssm/>)

- Collaborative Stage Data Collection System, version 02.05:
<https://cancerstaging.org/cstage/Pages/default.aspx>

Note 2: *Schema Discriminator 1: Occult Head and Neck Lymph Nodes* is used to discriminate between Cervical Lymph Nodes and Unknown Primary Tumor of the Head and Neck, Ill-Defined Other and Soft Tissue Other when primary site is C760.

Note 3: See the following schemas for the listed histologies

- C760 (8000-8700, 8720-8790, 8941, 9700-9701: Schema Discriminator 1 Occult Head and Neck Lymph Nodes: 2, 3, 4, 5): *Cervical Lymph Nodes and Unknown Primary Tumors of the Head and Neck*
- C760 (8941: Schema Discriminator 1 Occult Head and Neck Lymph Nodes: 0,1): *Soft Tissue*
- C809 (8190, 8247): *Merkel Cell Skin*
- 8710-8714, 8800-8934, 8940-9137, 9141-9582: *Soft Tissue*
- 8935-8936: *GIST*
- 9140: *Kaposi Sarcoma*

Note 4: Summary Stage is the only applicable staging system for this site/histology/schema.

Note 5: Codes 0, 1, 2, 3, 4, and 7 are not applicable for this chapter.

SUMMARY STAGE

9 Unknown if extension or metastasis; unstageable

Appendix I: Lymph Node/Lymph Node Chain Reference Table

Use this table with the Primary Site and Histology Rules to determine whether involved lymph nodes are in a single ICD-O-3 lymph node region or in multiple ICD-O-3 lymph node regions.

This table contains the names of lymph nodes that have the capsule and sinus structure of true lymph nodes. Lymphoid tissue such as that in the GI tract, tonsils, etc., is not represented in this table.

Note: Pathology reports may identify lymph nodes within most organs, the most common being breast, parotid gland, lung, and pancreas. The lymph nodes in these organs are called intra- (organ name) lymph nodes such as intramammary lymph nodes. We have included the most common intra-organ lymph nodes on this table. For an intra-organ lymph node not listed on the table, code to the ICD-O-3 topography code for that organ's regional lymph node chain(s).

*The right and left are separate regions per AJCC

Lymph Node/Lymph Node Chain	ICD-O-3 Code	ICD-O-3 Lymph Node Region(s)	TNM Staging
Abdominal	C772	Intra-abdominal	Mesenteric
Anorectal (pararectal)	C775	Pelvic	Pelvic, right and left*
Anterior axillary (pectoral)	C773	Axilla or arm	Axillary, right and left*
Anterior cecal (prececal)	C772	Intra-abdominal	Mesenteric
Anterior deep cervical (laterotracheal, recurrent laryngeal, recurrent pharyngeal)	C770	Head, face and neck	Cervical, right and left*
Anterior jugular	C770	Head, face and neck	Cervical, right and left*
Anterior mediastinal	C771	Intrathoracic	Mediastinal
Aortic (ascending, lateral, lumbar, subaortic, NOS)	C772	Intra-abdominal	Para-aortic
Aortico-pulmonary window (subaortic)	C772	Intra-abdominal	Para-aortic
Apical (subclavian)	C770	Head, face and neck	Cervical, right and left*
Appendiceal	C772	Intra-abdominal	Mesenteric
Apical axillary (deep axillary, Level III axillary)	C773	Axilla or arm	Axillary, right and left*
Aselli's glands (nodes near pancreas)	C772	Intra-abdominal	Para-aortic
Auricular (infraauricular, postauricular, preauricular, retroauricular, NOS)	C770	Head, face and neck	Cervical, right and left*
Axillary (anterior, brachial, deep, lateral, superficial, NOS)	C773	Axilla or arm	Axillary, right and left*
Axillary (Level I [low axillary, superficial axillary], Level II, Level III [apical, deep])	C773	Axilla or arm	Infraclavicular, right and left*
Azygos (lower paratracheal)	C771	Intrathoracic	Mediastinal
Brachial (lateral axillary)	C773	Axilla or arm	Axillary, right and left*
Brachiocephalic	C773	Axilla or arm	Axillary, right and left*
Bronchial	C771	Intrathoracic	Hilar
Bronchopulmonary (hilar) (proximal lobar) (pulmonary root)	C771	Intrathoracic	Hilar
Buccal (buccinator)	C770	Head, face and neck	Cervical, right and left*

Lymph Node/Lymph Node Chain	ICD-O-3 Code	ICD-O-3 Lymph Node Region(s)	TNM Staging
Calot's node (cystic, cysto-hepatic triangle or hepato-biliary triangle)	C772	Intra-abdominal	Para-aortic
Cardiac (cardial)	C771	Intrathoracic	Mediastinal
Cardioesophageal (tracheobronchial, tracheal bifurcation)	C771	Intrathoracic	Mediastinal
Carinal (tracheal bifurcation, tracheobronchial)	C771	Intrathoracic	Mediastinal
Caval (para-)	C772	Intra-abdominal	Para-aortic
Cecal (anterior, posterior, prececal, retrocecal, NOS)	C772	Intra-abdominal	Mesenteric
Celiac	C772	Intra-abdominal	Para-aortic
Central compartment (paralaryngeal, prelaryngeal [Delphian]) adjacent to thyroid gland	C770	Head, face and neck	Cervical, right and left*
Cervical, NOS	C770	Head, face and neck	Cervical, right and left
Cervical paratracheal	C770	Head, face and neck	Cervical, right and left
Cervical periesophageal	C770	Head, face and neck	Cervical, right and left*
Cloquet's node (inguinal)	C774	Inguinal region or leg	Inguino-femoral, right and left*
Colic (ileocolic, left, mesocolic, middle, right, NOS)	C772	Intra-abdominal	Mesenteric
Common bile duct(pericholedochal)	C772	Intra-abdominal	Para-aortic
Common hepatic	C771	Intrathoracic	Mediastinal
Common iliac	C775	Pelvic	Pelvic, right and left*
Cubital	C773	Axilla or arm	Axillary, right and left*
Cystic (Calot's node, cysto-hepatic triangle or hepato-biliary triangle)	C772	Intra-abdominal	Para-aortic
Cystic duct	C772	Intra-abdominal	Para-aortic
Deep axillary	C773	Axilla or arm	Axillary, right and left*
Deep cervical (lower, middle, upper, NOS)	C771	Intrathoracic	Cervical, right and left*
Delphian node (precricoid)	C770	Head, face and neck	Cervical, right and left*
Deltopectoral	C773	Axilla or arm	Axillary, right and left*
Diaphragmatic, sub	C771	Intrathoracic	Mediastinal
Duodenal	C772	Intra-abdominal	Para-aortic
Epicolic (Foramen of Winslow, omental)	C772	Intra-abdominal	Mesenteric
Epitrochlear	C773	Axilla or arm	Axillary, right and left*
Esophageal (para-, peri-)	C771	Intrathoracic	Mediastinal
Esophageal groove	C770	Head, face and neck	Cervical, right and left*
External iliac	C775	Pelvic	Pelvic, right and left*
Facial (buccal, buccinator, nasolabial)	C770	Head, face and neck	Cervical, right and left*
Femoral (superficial inguinal)	C774	Inguinal region or leg	Inguino-femoral, right and left*
Foramen of Winslow (epicolic, omental)	C772	Intra-abdominal	Mesenteric
Gastric (inferior, left, right, superior, NOS)	C772	Intra-abdominal	Mesenteric

Lymph Node/Lymph Node Chain	ICD-O-3 Code	ICD-O-3 Lymph Node Region(s)	TNM Staging
Gastrocolic	C772	Intra-abdominal	Mesenteric
Gastroduodenal	C772	Intra-abdominal	Mesenteric
Gastroepiploic (gastro-omental)	C772	Intra-abdominal	Mesenteric
Gastrohepatic	C772	Intra-abdominal	Mesenteric
Gastropancreatic	C772	Intra-abdominal	Mesenteric
Gerota's node (promontorial, middle sacral)	C775	Pelvic	Para-aortic
Greater curvature	C772	Intra-abdominal	Mesenteric
Greater omentum (greater omental)	C772	Intra-abdominal	Mesenteric
Groin	C774	Inguinal region or leg	Inguino-femoral, right and left*
Hemorrhoidal (inferior, middle, superior, NOS)	C775	Pelvic	Pelvic, right and left*
Hepatic (hepatic artery, hepatic pedicle, inferior vena cava, lineal, porta hepatis [hilar], NOS)	C772	Intra-abdominal	Para-aortic
Hepatic artery	C772	Intra-abdominal	Para-aortic
Hepatic pedicle	C772	Intra-abdominal	Para-aortic
Hepatoduodenal ligament (hilar)	C772	Intra-abdominal	Para-aortic
Highest deep inguinal (Rosenmuller or Node of Cloquet)	C774	Inguinal region or leg	Inguino-femoral, right and left*
Hilar ([in hilus of liver], hepatoduodenal ligament, porta hepatis, portal, splenic, NOS)	C772	Intra-abdominal	Mesenteric
Hilar (bronchial, bronchopulmonary, proximal lobar, pulmonary root)	C771	Intrathoracic	Hilar, right and left*
Hypogastric (internal iliac)	C775	Pelvic	Pelvic, right and left*
Ileocolic	C772	Intra-abdominal	Mesenteric
Iliac (common, external, internal [hypogastric, obturator])	C775	Pelvic	Pelvic, right and left*
Inferior deep cervical (scalene)	C770	Head, face and neck	Cervical, right and left*
Inferior gastric (right, NOS)	C772	Intra-abdominal	Mesenteric
Inferior hemorrhoidal	C775	Pelvic	Pelvic, right and left*
Inferior (deep) jugular	C770	Head, face and neck	Cervical, right and left*
Inferior mesenteric	C772	Intra-abdominal	Mesenteric
Inferior rectal (hemorrhoidal)	C775	Pelvic	Pelvic, right and left*
Inferior phrenic vein	C771	Intra-thoracic	Mediastinal
Inferior vena cava	C772	Intra-abdominal	Para-aortic
Infraauricular	C770	Head, face and neck	Cervical, right and left*
Infraclavicular (subclavicular)	C773	Axilla or arm	Infraclavicular, right and left*
Infrapyloric	C772	Intra-abdominal	Para-aortic
Infundibulopelvic (utero-ovarian)	C775	Pelvic	Pelvic, right and left*

Lymph Node/Lymph Node Chain	ICD-O-3 Code	ICD-O-3 Lymph Node Region(s)	TNM Staging
Inguinal (deep, sublingual, superficial, NOS)	C774	Inguinal region or leg	Inguino-femoral, right and left*
Interaortocaval	C772	Intra-abdominal	Para-aortic
Intercostal	C771	Intrathoracic	Mediastinal
Interlobar (within the lung) (intrapulmonary)	C771	Intrathoracic	Mediastinal
Internal iliac (hypogastric, obturator)	C775	Pelvic	Pelvic, right and left*
Internal jugular (upper deep cervical)	C770	Head, face, and neck	Cervical, right and left*
Internal mammary (parasternal)	C771	Intrathoracic	Mediastinal
Interpectoral (Rotter's node)	C773	Axilla or arm	Axillary, right and left*
Intestinal	C772	Intra-abdominal	Mesenteric
Intra-abdominal	C772	Intra-abdominal	Mesenteric
Intrabronchial, NOS	C771	Intrathoracic	Hilar
Intramammary	C773	Axilla or arm	Axillary, right and left*
Intrapancreatic	C772	Intra-abdominal	Para-aortic
Intraparotid	C770	Head, face and neck	Cervical, right and left*
Intrapelvic	C775	Pelvic	Pelvic, right and left*
Intrapulmonary (segmental, subsegmental)	C771	Intrathoracic	Mediastinal
Jugular (anterior, inferior [deep], internal, lateral, lower, mid, superior, NOS)	C770	Head, face and neck	Cervical, right and left*
Jugulodigastric (subdigastric)	C770	Head, face and neck	Cervical, right and left*
Jugulo-omohyoid (supraomohyoid)	C770	Head, face and neck	Cervical, right and left*
Lateral aortic (ascending, lumbar, subaortic)	C772	Intra-abdominal	Para-aortic
Lateral axillary (brachial)	C773	Axilla or arm	Axillary, right and left*
Lateral compartment (jugular, mid and lower; supraclavicular; upper deep jugular; spinal accessory; retropharyngeal; submandibular; submental)	C770	Head, face and neck	Cervical, right and left*
Lateral jugular	C770	Head, face and neck	Cervical, right and left*
Laterosacral (lateral sacral)	C775	Pelvic	Pelvic, right and left*
Laterotracheal (anterior deep cervical)	C771	Intrathoracic	Cervical, right and left*
Left colic	C772	Intra-abdominal	Mesenteric
Left gastric (superior gastric)	C772	Intra-abdominal	Mesenteric
Left gastrocolic (superior gastrocolic)	C772	Intra-abdominal	Mesenteric
Left supraclavicular (Virchow's node, Trosier's node)	C770	Head, face, and neck	Cervical, right and left*
Leg/Lower limb	C774	Inguinal region or leg	Inguino-femoral, right and left*
Lesser curvature	C772	Intra-abdominal	Mesenteric
Lesser omentum (lesser omental)	C772	Intra-abdominal	Mesenteric
Level I axillary (low axillary) (superficial axillary)	C773	Axilla or arm	Infraclavicular, right and left*

Lymph Node/Lymph Node Chain	ICD-O-3 Code	ICD-O-3 Lymph Node Region(s)	TNM Staging
Level II axillary	C773	Axilla or arm	Infraclavicular, right and left*
Level III axillary (deep axillary, high axillary)	C773	Axilla or arm	Infraclavicular, right and left*
Lineal (splenic)	C772	Intra-abdominal	Mesenteric
Lobar (intrapulmonary)	C771	Intrathoracic	Hilar
Lobar (proximal, pulmonary)	C771	Intrathoracic	Hilar
Low axillary (Level I axillary)	C773	Axilla or arm	Infraclavicular, right and left*
Lower deep cervical	C771	Intrathoracic	Cervical, right and left*
Lower jugular	C770	Head, face and neck	Cervical, right and left*
Lower paratracheal (azygos)	C771	Intrathoracic	Mediastinal
Lower periesophageal (intrathoracic esophagus)	C771	Intrathoracic	Mediastinal
Lower peritracheal	C771	Intrathoracic	Mediastinal
Lower thoracic paraesophageal	C771	Intrathoracic	Mediastinal
Lumbar aortic (ascending, lateral, subaortic)	C772	Intra-abdominal	Para-aortic
Mandibular	C770	Head, face and neck	Cervical, right and left*
Mastoid (postauricular, retroauricular, NOS)	C770	Head, face and neck	Cervical, right and left*
Mediastinal (anterior, posterior, superior, NOS)	C771	Intrathoracic	Mediastinal
Mesenteric (inferior, sigmoid [sigmoidal], superior, NOS)	C772	Intra-abdominal	Mesenteric
Mesocolic	C772	Intra-abdominal	Mesenteric
Mid jugular	C770	Head, face and neck	Cervical, right and left*
Midcolic	C772	Intra-abdominal	Pelvic, right and left*
Middle deep cervical	C771	Intrathoracic	Cervical, right and left*
Middle (right) colic	C772	Intra-abdominal	Mesenteric
Middle hemorrhoidal	C775	Pelvic	Pelvic, right and left*
Middle sacral (Gerota's node, promontorial)	C775	Pelvic	Pelvic, right and left*
Middle thoracic paraesophageal	C771	Intrathoracic	Mediastinal
Nasolabial (facial)	C770	Head, face and neck	Cervical, right and left*
Node of Cloquet's or Rosenmuller (highest deep inguinal)	C774	Inguinal region or leg	Inguino-femoral, right and left*
Obturator (internal iliac)	C775	Pelvic	Pelvic, right and left*
Occipital (suboccipital)	C770	Head, face and neck	Cervical, right and left*
Pancreatic (Aselli's glands [nodes near pancreas], parapancreatic; peripancreatic, NOS)	C772	Intra-abdominal	Para-aortic
Pancreaticoduodenal (anterior, posterior, NOS)	C772	Intra-abdominal	Para-aortic

Lymph Node/Lymph Node Chain	ICD-O-3 Code	ICD-O-3 Lymph Node Region(s)	TNM Staging
Pancreaticosplenic (pancreaticolineal)	C772	Intra-abdominal	Mesenteric
Para-aortic	C772	Intra-abdominal	Para-aortic
Parabronchial (peribronchial)	C771	Intrathoracic	Mediastinal
Paracardial	C772	Intra-abdominal	Mesenteric
Paracaval	C772	Intra-abdominal	Para-aortic
Paracervical	C775	Pelvic	Pelvic, right and left*
Paracolic (pericolonic)	C772	Intra-abdominal	Para-aortic
Paraesophageal	C771	Intrathoracic	Mediastinal
Paralaryngeal	C770	Head, face and neck	Cervical, right and left*
Parametrial	C775	Pelvic	Pelvic, right and left*
Parapancreatic	C772	Intra-abdominal	Para-aortic
Parapharyngeal	C770	Head, face and neck	Cervical, right and left*
Pararectal (anorectal)	C775	Pelvic	Pelvic, right and left*
Parasternal (internal mammary)	C771	Intrathoracic	Mediastinal
Paratracheal (lower, NOS)	C771	Intrathoracic	Mediastinal
Parotid (peri-, NOS)	C770	Head, face and neck	Cervical, right and left*
Pectoral (anterior axillary)	C773	Axilla or arm	Axillary, right and left*
Pelvic, NOS	C775	Pelvic	Pelvic, right and left*
Peri-aortic	C772	Intra-abdominal	Para-aortic
Peri-parotid	C770	Head, face and neck	Cervical, right and left*
Peri-thymic	C770	Head, face and neck	Cervical, right and left*
Peribronchial (parabronchial)	C771	Intrathoracic	Mediastinal
Pericardial (pericardiac)	C771	Intrathoracic	Mediastinal
Pericaval	C772	Intra-abdominal	Para-aortic
Pericholedochal (common bile duct)	C772	Intra-abdominal	Para-aortic
Pericolonic (paracolic)	C772	Intra-abdominal	Mesenteric
Periduodenal	C772	Intra-abdominal	Para-aortic
Periesophageal	C771	Intrathoracic	Mediastinal
Perigastric (except cardiac)	C772	Intra-abdominal	Mesenteric
Peripancreatic	C772	Intra-abdominal	Para-aortic
Periportal	C772	Intra-abdominal	Pelvic, right and left*
Periprostatic	C775	Pelvic	Pelvic, right and left*
Perirectal	C775	Pelvic	Pelvic, right and left*
Periparotid	C770	Head, face and neck	Cervical, right and left*
Perithyroidal	C771	Intrathoracic	Mediastinal
Peritracheal (lower)	C771	Intrathoracic	Mediastinal
Periureteral	C772	Intra-abdominal	Para-aortic
Perivesical	C775	Pelvic	Pelvic, right and left*
Pharyngeal (Delphian node, prepharyngeal, retropharyngeal, NOS)	C770	Head, face and neck	Cervical, right and left*
Phrenic vein (inferior, superior, NOS)	C771	Intra-thoracic	Mediastinal
Popliteal	C774	Inguinal region or leg	Inguino-femoral, right and left*
Porta hepatis (in hilus of liver)	C772	Intra-abdominal	Para-aortic

Lymph Node/Lymph Node Chain	ICD-O-3 Code	ICD-O-3 Lymph Node Region(s)	TNM Staging
Portal (portal vein)	C772	Intra-abdominal	Para-aortic
Postauricular (mastoid, retroauricular)	C770	Head, face and neck	Cervical, right and left*
Posterior axillary (subscapular)	C773	Axilla or arm	Axillary, right and left*
Posterior cecal (retrocecal)	C772	Intra-abdominal	Para-aortic
Posterior cervical (spinal accessory)	C770	Head, face and neck	Cervical, right and left*
Posterior mediastinal (tracheoesophageal)	C771	Intrathoracic	Mediastinal
Postglandular	C770	Head, face and neck	Cervical, right and left*
Posterior triangle	C770	Head, face and neck	Cervical, right and left*
Postvascular	C770	Head, face and neck	Cervical, right and left*
Preaortic	C772	Intra-abdominal	Para-aortic
Preauricular	C770	Head, face and neck	Cervical, right and left*
Precarinal	C771	Intrathoracic	Mediastinal
Prececal (anterior cecal)	C772	Intra-abdominal	Mesenteric
Precricoid (Delphian node)	C770	Head, face and neck	Cervical, right and left*
Preglandular	C770	Head, face and neck	Cervical, right and left*
Prepharyngeal (Delphian node), adjacent to thyroid gland; anterior to thyroid isthmus	C770	Head, face and neck	Cervical, right and left*
Presacral	C775	Pelvic	Pelvic, right and left*
Presymphseal	C775	Pelvic	Pelvic, right and left*
Pretracheal	C770	Head, face and neck	Cervical, right and left*
Prevascular	C770	Head, face and neck	Cervical, right and left*
Promontorial (Gerota's node, middle sacral)	C775	Pelvic	Para-aortic
Proximal lobar (bronchopulmonary, hilar, pulmonary root)	C771	Intrathoracic	Hilar
Proximal mesentery	C772	Intra-abdominal	Mesenteric
Pulmonary ligament	C771	Intrathoracic	Mediastinal
Pulmonary (pulmonary root, NOS)	C771	Intrathoracic	Hilar
Pyloric (infrapyloric, subpyloric, suprapyloric)	C772	Intra-abdominal	Para-aortic
Rectal (superior, NOS)	C775	Pelvic	Pelvic, right and left*
Recurrent laryngeal (anterior deep cervical, laterotracheal)	C770	Head, face and neck	Cervical, right and left*
Recurrent pharyngeal (anterior deep cervical)	C770	Head, face and neck	Cervical, right and left*
Renal artery	C772	Intra-abdominal	Para-aortic
Renal hilar	C772	Intra-abdominal	Para-aortic
Retroaortic	C772	Intra-abdominal	Para-aortic
Retro-auricular (mastoid, postauricular)	C770	Head, face and neck	Cervical, right and left*
Retrocaval	C772	Intra-abdominal	Para-aortic
Retrocecal (posterior cecal)	C772	Intra-abdominal	Para-aortic
Retrocural	C771	Intra-thoracic	Mediastinal
Retropancreatic	C772	Intra-abdominal	Para-aortic

Lymph Node/Lymph Node Chain	ICD-O-3 Code	ICD-O-3 Lymph Node Region(s)	TNM Staging
Retroperitoneal	C772	Intra-abdominal	Para-aortic
Retropharyngeal	C770	Head, face and neck	Cervical, right and left*
Retrotracheal (tracheal)	C771	Intrathoracic	Mediastinal
Right colic	C772	Intra-abdominal	Mesenteric
Right gastric	C772	Intra-abdominal	Mesenteric
Rosenmuller or Node of Cloquet (highest deep inguinal)	C774	Inguinal region or leg	Inguino-femoral, right and left*
Rotter's nodes (interpectoral between major and minor pectoralis)	C773	Axilla or arm	Axillary, right and left*
Rouviere's node (retropharyngeal)	C770	Head, face and neck	Cervical, right and left*
Sacral (lateral sacral, laterosacral, middle sacral, presacral, NOS)	C775	Pelvic	Pelvic, right and left*
Sacral (uterosacral)	C774	Pelvic	Pelvic, right and left*
Scalene (inferior deep cervical)	C770	Head, face and neck	Cervical, right and left*
Segmental (intrapulmonary, subsegmental)	C771	Intrathoracic	Mediastinal
Sigmoid (sigmoidal mesenteric, NOS)	C772	Intra-abdominal	Mesenteric
Sister Mary Joseph	C772	Intra-abdominal	Mesenteric
Spermatic vein	C774	Inguinal region or leg	Inguino-femoral, right and left*
Spinal accessory (posterior cervical)	C770	Head, face and neck	Cervical, right and left*
Splenic (hilar, lineal)	C772	Intra-abdominal	Mesenteric
Subaortic (ascending, lateral, lumbar)	C772	Intra-abdominal	Para-aortic
Subcapsular (posterior axillary)	C773	Axilla or arm	Axillary, right and left*
Subcarinal	C771	Intrathoracic	Mediastinal
Subclavian (apical)	C770	Head, face and neck	Cervical, right and left*
Subclavicular (infraclavicular)	C773	Axilla or arm	Infraclavicular, right and left*
Subdigastric (jugulodigastric)	C770	Head, face and neck	Cervical, right and left*
Subinguinal (superficial inguinal)	C774	Inguinal region or leg	Inguino-femoral, right and left*
Sublingual	C770	Head, face and neck	Cervical, right and left*
Submandibular (submaxillary)	C770	Head, face and neck	Cervical, right and left*
Submaxillary (submandibular)	C770	Head, face and neck	Cervical, right and left*
Submental	C770	Head, face and neck	Cervical, right and left*
Suboccipital (occipital)	C770	Head, face and neck	Cervical, right and left*
Subpleural (in the periphery of the lung)	C771	Intrathoracic	Mediastinal
Subpyloric	C772	Intra-abdominal	Para-aortic
Subsegmental (intrapulmonary, segmental)	C771	Intrathoracic	Mediastinal
Substernal	C771	Intrathoracic	Mediastinal
Superficial axillary (Level I axillary)	C773	Axilla or arm	Infraclavicular, right and left*
Superficial inguinal (femoral, subinguinal)	C774	Inguinal region or leg	Inguino-femoral, right and left*
Superior gastric (left gastric)	C772	Intra-abdominal	Mesenteric

Lymph Node/Lymph Node Chain	ICD-O-3 Code	ICD-O-3 Lymph Node Region(s)	TNM Staging
Superior gastrocolic (left gastrocolic)	C772	Intra-abdominal	Mesenteric
Superior hemorrhoidal	C775	Pelvic	Pelvic, right and left*
Superior hilum	C772	Intra-abdominal	Pelvic, right and left*
Superior jugular	C770	Head, face and neck	Cervical, right and left*
Superior mediastinal	C771	Intrathoracic	Mediastinal
Superior mesenteric	C772	Intra-abdominal	Pelvic, right and left*
Superior phrenic vein	C771	Intra-thoracic	Mediastinal
Superior rectal (hemorrhoidal)	C775	Pelvic	Pelvic, right and left*
Supraclavicular (transverse cervical)	C770	Head, face and neck	Cervical, right and left*
Supraomohyoid (jugulo-omohyoid)	C770	Head, face and neck	Cervical, right and left*
Suprapancreatic	C772	Intra-abdominal	Para-aortic
Suprapyloric	C772	Intra-abdominal	Para-aortic
Thoracic	C771	Intrathoracic	Mediastinal
Thyroid	C770	Head, face and neck	Cervical, right and left*
Tibial	C774	Inguinal region or leg	Inguino-femoral, right and left*
Tracheal (retrotracheal, NOS)	C771	Intrathoracic	Mediastinal
Tracheal bifurcation (carinal, tracheobronchial)	C771	Intrathoracic	Mediastinal
Tracheobronchial (carinal, tracheal bifurcation)	C771	Intrathoracic	Mediastinal
Tracheoesophageal (posterior mediastinal)	C771	Intrathoracic	Mediastinal
Transverse cervical (supraclavicular)	C770	Head, face, and neck	Cervical, right and left*
Trosier's node (left supraclavicular)	C770	Head, face, and neck	Cervical, right and left*
Upper deep cervical (internal jugular)	C770	Head, face, and neck	Cervical, right and left*
Upper thoracic paraesophageal	C771	Intrathoracic	Mediastinal
Utero-ovarian (infundibulopelvic)	C775	Pelvic	Pelvic, right and left*
Uterosacral	C774	Pelvic	Pelvic, right and left*
Virchow's node (left supraclavicular)	C770	Head, face, and neck	Cervical, right and left*

*The right and left are separate regions per AJCC

Appendix II: Summary Stage 2018 (SS2018) Chapters Based on Primary Site and/or Histology-Solid Tumors (8000-9582)

This appendix covers the Summary Stage chapters related to Solid Tumors.

- **Exception 1:** Mycosis Fungoides (9700) and Sezary Syndrome (9701) for all primary sites are included in this appendix.
- **Exception 2:** For hematopoietic histologies 9680, 9699, 9700-9714, 9751-9755, see the appropriate Summary Stage chapter in this Appendix for the following primary sites:
 - C700, C710-C719: Brain
 - C701, C709, C720-C729: CNS Other
 - C751, C752, C753: Intracranial Gland
- **Exception 3:** The following primary sites with behavior of /0 (benign) or /1 (borderline) are collected in the following schemas:
 - C700, C710-C719: Brain
 - C701, C709, C720-C729: CNS Other
 - C751, C752, C753: Intracranial Gland

Primary Site(s)	Description	Histology	SS2018 Chapter
C000-C539, C571-C809	All sites (except C54_, C559, C569, C570)	8935-8936	Gastrointestinal Tumors (GIST)
C000-C699, C739-C750, C754-C809	All sites (except C70_, C71_, C72_, C751, C752, C753)	9140	Kaposi Sarcoma
C000-C002, C006	External lip (vermillion border) (upper, lower, NOS); Commissure of lip	8000-8040, 8042-8180, 8191-8246, 8248-8700, 8940, 8982	Skin (except eyelid)
C000-C002, C006	External lip (vermillion border) (upper, lower, NOS); Commissure of lip	8720-8790	Melanoma Skin
C000-C002, C006	External lip (vermillion border) (upper, lower, NOS); Commissure of lip	8710-8714, 8800-8934, 8941-8981, 8983-9137, 9141-9582	Soft Tissue
C000-C002, C006	External lip (vermillion border) (upper, lower, NOS); Commissure of lip	9700-9701	Mycosis Fungoides
C000-C006, C008-C009	Lip	8041, 8190, 8247	Merkel Cell Skin
C003-C005, C008-C069, C090-C148, C300-C329	Head and Neck (excluding C079, C80_)	8720-8790	Melanoma Head and Neck

Primary Site(s)	Description	Histology	SS2018 Chapter
C003-C005, C008-C009	Lip (excluding external lip, commissure of lip)	8000-8040, 8042-8180, 8191-8246, 8248-8700, 8982, 9700-9701	Lip
		8710-8714, 8800-8934, 8940-8981, 8983-9137, 9141-9582	Soft Tissue
C019	Base of tongue, NOS	8000-8700, 9700-9701	Oropharynx
		8710-8714, 8800-8934, 8940-9137, 9141-9582	Soft Tissue
C020-C023, C028-C029	Other sites of tongue (excluding Lingual Tonsil)	8000-8700, 8982, 9700-9701	Tongue Anterior
		8710-8714, 8800-8934, 8940-8981, 8983-9137, 9141-9582	Soft Tissue
C024	Lingual tonsil	8000-8700, 9700-9701	Oropharynx
		8710-8714, 8800-8934, 8940-9137, 9141-9582	Soft Tissue
C030-C031, C039, C062	Gum Retromolar area	8000-8700, 8982, 9700-9701	Gum
		8710-8714, 8800-8934, 8940-8981, 8983-9137, 9141-9582	Soft Tissue
C040-C041, C048-C049	Floor of mouth	8000-8700, 8982, 9700-9701	Floor of Mouth
		8710-8714, 8800-8934, 8940-8981, 8983-9137, 9141-9582	Soft Tissue
C050	Hard palate	8000-8700, 8982, 9700-9701	Palate Hard
		8710-8714, 8800-8934, 8940-8981, 8983-9137, 9141-9582	Soft Tissue
C051, C052	Soft palate, Uvula	8000-8700, 9700-9701	Oropharynx
		8710-8714, 8800-8934, 8940-9137, 9141-9582	Soft Tissue
C058-C059	Other sites of palate	8000-8700, 8982, 9700-9701	Mouth Other
		8710-8714, 8800-8934, 8940-8981, 8983-9137, 9141-9582	Soft Tissue
C060-C061	Cheek mucosa, vestibule of mouth	8000-8700, 8982, 9700-9701	Buccal Mucosa
		8710-8714, 8800-8934, 8940-8981, 8983-9137, 9141-9582	Soft Tissue
C068-C069	Other sites of mouth	8000-8700, 8982, 9700-9701	Mouth Other
		8710-8714, 8800-8934, 8940-8981, 8983-9137, 9141-9582	Soft Tissue

Primary Site(s)	Description	Histology	SS2018 Chapter
C079, C080-C081, C088-C089	Parotid gland, Other and unspecified major salivary glands	8000-8700, 8720-8790, 8941, 8974, 8980, 8982, 9700-9701 8710-8714, 8800-8934, 8940, 8950- 8973, 8975, 8981, 8983-9137, 9141- 9582	Major Salivary Glands Soft Tissue
C090-C091, C098-C099	Tonsil	8000-8700, 9700-9701 8710-8714, 8800-8934, 8940-9137, 9141-9582	Oropharynx Soft Tissue
C100, C102-C104, C108-C109	Oropharynx	8000-8700, 9700-9701 8710-8714, 8800-8934, 8940-9137, 9141-9582	Oropharynx Soft Tissue
C101	Anterior surface of epiglottis	8000-8700, 9700-9701 8710-8714, 8800-8934, 8940-9137, 9141-9582	Larynx Supraglottic Soft Tissue
C110, C112-C113, C118-C119	Nasopharynx (excluding Pharyngeal tonsil)	8000-8700, 9700-9701 8710-8714, 8800-8934, 8940-9137, 9141-9582	Nasopharynx Soft Tissue
C111	Posterior wall of nasopharynx	8000-8700, 9700-9701 (Schema Discriminator 1- Nasopharynx/Pharyngeal: 1) 8000-8700, 9700-9701 (Schema Discriminator 1- Nasopharynx/Pharyngeal: 2) 8710-8714, 8800-8934, 8940-9137, 9141-9582	Nasopharynx Oropharynx Soft Tissue
C129, C130-C132, C138-C139	Pyriform sinus, Hypopharynx	8000-8700, 9700-9701 8710-8714, 8800-8934, 8940-9137, 9141-9582	Hypopharynx Soft Tissue
C140, C142- C148	Other lip, oral cavity and pharynx sites	8000-8700, 9700-9701 8710-8714, 8800-8934, 8940-9137, 9141-9582	Pharynx Other Soft Tissue
C150-C155, C158-C159	Esophagus	8000-8700, 8720-8790, 9700-9701 8710-8714, 8800-8934, 8940-9137, 9141-9582	Esophagus (including GE Junction) Soft Tissue

Primary Site(s)	Description	Histology	SS2018 Chapter
C160	Esophagus GE Junction/Cardia	8000-8149, 8154, 8157, 8160-8231, 8243-8248, 8250-8682, 8690-8700, 8720-8790, 9700-9701 (Schema Discriminator 1- EsophagusGEJunction (EGJ)/Stomach: 2)	Esophagus (including GE Junction)
		8000-8149, 8154, 8157, 8160-8231, 8243-8248, 8250-8682, 8690-8700, 8720-8790, 9700-9701 (Schema Discriminator 1- EsophagusGEJunction (EGJ)/Stomach: 0, 3, 9)	Stomach
		8150-8153, 8155-8156, 8158, 8240-8242, 8249, 8683	Stomach
		8710-8714, 8800-8934, 8940-9137, 9141-9582	Soft Tissue
C161-C166, C168-C169	Stomach (excluding Esophagus GE Junction/Cardia)	8000-8700, 8720-8790, 9700-9701	Stomach
		8710-8714, 8800-8934, 8940-9137, 9141-9582	Soft Tissue
C170-C173, C178-C179	Small intestine	8000-8700, 8720-8790, 9700-9701	Small Intestine
		8710-8714, 8800-8934, 8940-9137, 9141-9582	Soft Tissue
C181	Appendix	8000-8700, 8720-8790, 9700-9701	Appendix
		8710-8714, 8800-8934, 8940-9137, 9141-9582	Soft Tissue
C180, C182-C189, C199, C209	Colon and Rectum (excluding Appendix)	8000-8700, 8720-8790, 9700-9701	Colon and Rectum
		8710-8714, 8800-8934, 8940-9137, 9141-9582	Soft Tissue
C210 C211-C212, C218	Anus, NOS Anal Canal, Cloacogenic zone and overlapping lesions	8000-8700, 8720-8790, 9700-9701	Anus
		8710-8714, 8800-8934, 8940-9137, 9141-9582	Soft Tissue

Primary Site(s)	Description	Histology	SS2018 Chapter
C220	Liver	8000-8700, 8720-8790, 9700-9701	Liver
		8710-8714, 8800-8934, 8940-9137, 9141-9582	Soft Tissue
C221	Intrahepatic bile duct	8000-8700, 8720-8790, 8980, 9700-9701	Intrahepatic Bile Ducts
		8710-8714, 8800-8934, 8940-8975, 8981-9137, 9141-9582	Soft Tissue
C239	Gallbladder	8000-8700, 8720-8790, 9700-9701	Gallbladder
		8710-8714, 8800-8934, 8940-9137, 9141-9582	Soft Tissue
C240	Extrahepatic bile duct	8000-8700, 8720-8790, 9700-9701	Extrahepatic Bile Ducts
C241	Ampulla of Vater	8000-8700, 8720-8790, 9700-9701	Ampulla of Vater
C248-C249	Other biliary sites	8000-8700, 8720-8790, 9700-9701	Biliary Other
C240-C241, C248-C249	Other and unspecified parts of biliary tract	8710-8714, 8800-8934, 8940-9137, 9141-9582	Soft Tissue
C250-C254, C257-C259	Pancreas	8000-8700, 8720-8790, 8971, 9700-9701	Pancreas
		8710-8714, 8800-8934, 8940-8970, 8972-9137, 9141-9582	Soft Tissue
C260, C268-C269	Other gastrointestinal sites	8000-8700, 8720-8790, 9700-9701	Digestive Other
		8710-8714, 8800-8934, 8940-9137, 9141-9582	Soft Tissue
C300, C310, C311	Nasal cavity, Maxillary sinus, Ethmoid sinus	8000-8700, 8941, 8982, 9700-9701	Nasal Cavity and Paranasal Sinuses
		8710-8714, 8800-8934, 8940, 8950-8981, 8983-9137, 9141-9582	Soft Tissue
C301	Middle Ear	8000-8700, 9700-9701	Middle Ear
		8710-8714, 8800-8934, 8940-9137, 9141-9582	Soft Tissue
C312-C313, C318-C319	Other accessory sinuses	8000-8700, 9700-9701	Sinus Other
		8710-8714, 8800-8934, 8940-9137, 9141-9582	Soft Tissue
C320	Glottis	8000-8700, 9700-9701	Larynx Glottic
C321	Supraglottis	8000-8700, 9700-9701	Larynx Supraglottic
C322	Subglottis	8000-8700, 9700-9701	Larynx Subglottic
C323, C328, C329	Other larynx sites	8000-8700, 9700-9701	Larynx Other

Primary Site(s)	Description	Histology	SS2018 Chapter
C320-C323, C328-C329	Larynx	8710-8714, 8800-8934, 8940-9137, 9141-9582	Soft Tissue
C339	Trachea	8000-8700, 8720-8790, 9700-9701	Trachea
		8710-8714, 8800-8934, 8940-9137, 9141-9582	Soft Tissue
C340-C343, C348-C349	Lung	8000-8700, 8720-8790, 8972, 8980, 9700-9701	Lung
		9050-9053	Pleural Mesothelioma
		8710-8714, 8800-8934, 8940-8971, 8973-8975, 8981-9045, 9054-9137, 9141-9582	Soft Tissue
C379	Thymus	8000-8700, 8720-8790, 9700-9701	Thymus
		8710-8714, 8800-8934, 8940-9137, 9141-9582	Soft Tissue
C380-C383, C388	Heart, Mediastinum, overlapping lesions	8000-8803, 8810-8921, 8932-8934, 8940-8990, 9000-9016, 9030, 9040- 9043, 9045-9137, 9141-9230, 9240- 9580, 9582, 9700-9701	Heart, Mediastinum, and Pleura
C384	Pleura	8000-8803, 8810-8921, 8932-8934, 8940-8990, 9000-9016, 9030, 9040- 9043, 9045, 9054-9137, 9141-9230, 9240-9580, 9582, 9700-9701	Heart, Mediastinum, and Pleura
		9050-9053	Pleural Mesothelioma
C380-C384, C388	Heart, Mediastinum, and Pleura	8804-8806, 8930-8931, 8991, 9020, 9044, 9231, 9581	Soft Tissue
C390, C398-C399	Other respiratory, intrathoracic organs	8000-8700, 8720-8790, 9700-9701	Respiratory Other
		8710-8714, 8800-8934, 8940-9137, 9141-9582	Soft Tissue
C400-C403, C408-C414, C418-C419	Bones, Joints and Articular Cartilage	8000-8934, 8940-9137, 9141-9582, 9700-9701	Bone
C420-C424	Hematopoietic and Reticuloendothelial Systems	8000-8700, 8720-8790, 9700-9701	Ill-Defined Other
		8710-8714, 8800-8934, 8940-9137, 9141-9582	Soft Tissue

Primary Site(s)	Description	Histology	SS2018 Chapter
C440, C442-C449	Skin (excluding Skin eyelid, C441)	8000-8040, 8042-8180, 8191-8246, 8248-8700, 8940, 8982	Skin (except eyelid)
		8710-8714, 8800-8934, 8941-8981, 8983-9137, 9141-9582	Soft Tissue
C441	Eyelid	8000-8040, 8042-8180, 8191-8246, 8248-8700, 8940-8941, 8980	Skin Eyelid
		8710-8714, 8800-8934, 8950-8975, 8981-9137, 9141-9582	Soft Tissue
C440-C449	Skin	8041, 8190, 8247	Merkel Cell Skin
		8720-8790	Melanoma Skin
		9700-9701	Mycosis Fungoides
C470-C476, C478-C479	Peripheral nerves	8000-8934, 8940-9137, 9141-9582, 9700-9701	Soft Tissue
C480	Retroperitoneum	8000-8803, 8810-8921, 8932-8934, 8940-8990, 9000-9016, 9030-9043, 9045-9137, 9141-9230, 9240-9580, 9582, 9700-9701	Retroperitoneum
		8804-8806, 8930-8931, 8991, 9020, 9044, 9231, 9581	Soft Tissue

Primary Site(s)	Description	Histology	SS2018 Chapter
C481, C482, C488	Peritoneum (Sex: 2, 6)	8000-8700, 8720-8790, 8806, 8822, 8930-8931, 8933, 8950, 8960, 8980, 9000, 9050, 9052, 9060, 9070-9071, 9073, 9080, 9085, 9090-9091, 9100, 9110, 9700-9701	Ovary and Primary Peritoneal Carcinoma
	Peritoneum (Sex: 1, 3, 5, 9)	8000-8700, 8720-8790, 8822, 8933, 8950, 8960, 8980, 9000, 9050, 9052, 9060, 9070-9071, 9073, 9080, 9085, 9090-9091, 9100, 9110, 9700-9701	Retroperitoneum
		8806, 8930-8931	Soft Tissue
	Peritoneum	8710-8714, 8800-8803, 8810-8821, 8823-8921, 8932, 8934, 8940-8941, 8951-8959, 8963-8975, 8981-8990, 9010-9016, 9030-9043, 9045, 9051, 9053-9055, 9061-9065, 9072, 9081-9084, 9086, 9101-9105, 9120-9137, 9141-9230, 9240-9580, 9582	Retroperitoneum
	8804-8805, 8991, 9020, 9044, 9231, 9581	Soft Tissue	
C490-C496, C498-C499	Connective & Other Soft tissues	8000-8934, 8940-9137, 9141-9582, 9700-9701	Soft Tissue
C500	Nipple	8720-8790	Melanoma Skin
C501-C506, C508-C509	Breast (excluding nipple)	8720-8790	Breast
C500-C506, C508-C509	Breast	8000-8700, 8982-8983, 9700-9701	Breast
		8710-8714, 8800-8934, 8940-8981, 8990-9137, 9141-9582	Soft Tissue
C510-C512, C518-C519	Vulva	8000-8040, 8042-8180, 8191-8246, 8248-8700, 9020, 9071	Vulva
		8041, 8190, 8247	Merkel Cell Skin
		8720-8790	Melanoma Skin
		8710-8714, 8800-8934, 8940-9016, 9030-9070, 9072-9137, 9141-9582	Soft Tissue
		9700-9701	Mycosis Fungoides

Primary Site(s)	Description	Histology	SS2018 Chapter
C529	Vagina	8000-8700, 8720-8790, 8933, 8980, 9071, 9110, 9700-9701	Vagina
		8710-8714, 8800-8932, 8934, 8940-8975, 8981-9070, 9072-9105, 9120-9137, 9141-9582	Soft Tissue
C530-C531, C538-C539	Cervix	8000-8700, 8720-8790, 8805, 8933, 8980, 9110, 9581, 9700-9701	Cervix
		8710-8714, 8800-8804, 8806-8932, 8934, 8940-8975, 8981-9105, 9120-9137, 9141-9580, 9582	Soft Tissue
C540-C543, C548-C549, C559	Corpus uteri Uterus, NOS	8000-8700, 8720-8790, 8950, 8980, 9700-9701	Corpus Carcinoma and Carcinosarcoma
		8710-8714, 8800-8941, 8951-8975, 8981-9137, 9140-9582	Corpus Sarcoma
C569	Ovary	8000-8700, 8720-8790, 8806, 8810, 8815, 8822, 8825, 8890, 8930-8931, 8933, 8935-8936, 8950, 8960, 8980, 9000, 9050, 9052, 9060, 9070-9071, 9073, 9080, 9085, 9090-9091, 9100, 9110, 9700-9701	Ovary and Primary Peritoneal Carcinoma
		8710-8714, 8800-8805, 8811-8814, 8820-8821, 8823-8824, 8826-8881, 8891-8921, 8932, 8934, 8940-8941, 8951-8959, 8963-8975, 8981-8991, 9010-9045, 9051, 9053-9055, 9061-9065, 9072, 9081-9084, 9086, 9101-9105, 9120-9137, 9141-9582	Soft Tissue

Primary Site(s)	Description	Histology	SS2018 Chapter
C570	Fallopian tube	8000-8700, 8720-8790, 8806, 8810, 8815, 8822, 8825, 8890, 8930-8931, 8933, 8935-8936, 8950, 8960, 8980, 9000, 9050, 9052, 9060, 9070-9071, 9073, 9080, 9085, 9090-9091, 9100, 9110, 9700-9701 8710-8714, 8800-8805, 8811-8814, 8820-8821, 8823-8824, 8826-8881, 8891-8921, 8932, 8934, 8940-8941, 8951-8959, 8963-8975, 8981-8991, 9010-9045, 9051, 9053-9055, 9061-9065, 9072, 9081-9084, 9086, 9101-9105, 9120-9137, 9141-9582	Fallopian Tube Soft Tissue
C571-C574	Broad ligament, Round ligament, Parametrium, Uterine adnexa	8000-8700, 8720-8790, 9700-9701 8710-8714, 8800-8934, 8940-9137, 9141-9582	Adnexa Uterine Other Soft Tissue
C577-C579	Other sites of female genital tract	8000-8700, 8720-8790, 9700-9701 8710-8714, 8800-8934, 8940-9137, 9141-9582	Genital Female Other Soft Tissue
C589	Placenta	8000-8700, 8720-8790, 9100-9105, 9700-9701 8710-8714, 8800-8934, 8940-9091, 9110-9137, 9141-9582	Placenta Soft Tissue
C600-C602, C608-C609	Penis	8000-8040, 8042-8180, 8191-8246, 8248-8700 8041, 8190, 8247 8720-8790 9700-9701 8710-8714, 8800-8934, 8940-9137, 9141-9582	Penis Merkel Cell Skin Melanoma Skin Mycosis Fungoides Soft Tissue
C619	Prostate	8000-8700, 8720-8790, 9700-9701 8710-8714, 8800-8934, 8940-9137, 9141-9582	Prostate Soft Tissue

Primary Site(s)	Description	Histology	SS2018 Chapter
C620-C621, C629	Testis	8000-8700, 8720-8790, 9061, 9064-9065, 9070-9071, 9080-9081, 9084-9085, 9100-9101, 9104-9105, 9700-9701	Testis
		8710-8714, 8800-8934, 8940-9060, 9062-9063, 9072-9073, 9082-9083, 9086-9091, 9102-9103, 9110-9137, 9141-9582	Soft Tissue
C630-C631, C637-C639	Other sites of male genital tract	8000-8700, 8720-8790, 9700-9701	Genital Male Other
		8710-8714, 8800-8934, 8940-9137, 9141-9582	Soft Tissue
C632	Scrotum	8000-8040, 8042-8180, 8191-8246, 8248-8700	Genital Male Other
		8041, 8190, 8247	Merkel Cell Skin
		8710-8714, 8800-8934, 8940-9137, 9141-9582	Soft Tissue
		8720-8790	Melanoma Skin
		9700-9701	Mycosis Fungoides
C649	Kidney	8000-8700, 8720-8790, 9700-9701	Kidney
		8710-8714, 8800-8934, 8940-9137, 9141-9582	Soft Tissue
C659 C669	Renal pelvis Ureter	8000-8700, 8720-8790, 9700-9701	Kidney Renal Pelvis
		8710-8714, 8800-8934, 8940-9137, 9141-9582	Soft Tissue
C670-C679	Bladder	8000-8700, 8720-8790, 9700-9701	Bladder
		8710-8714, 8800-8934, 8940-9137, 9141-9582	Soft Tissue
C680	Urethra	8000-8700, 8720-8790, 9700-9701	Urethra
		8710-8714, 8800-8934, 8940-9137, 9141-9582	Soft Tissue
C681, C688, C689	Other sites of urinary system	8000-8700, 8720-8790, 9700-9701	Urinary Other
		8710-8714, 8800-8934, 8940-9137, 9141-9582	Soft Tissue

Primary Site(s)	Description	Histology	SS2018 Chapter
C690-C696, C698-C699	Eye	8930-8931, 8991, 9020, 9180, 9231 9510-9514	Soft Tissue Retinoblastoma
C690	Conjunctiva	8000-8700, 9700-9701 8720-8790 8710-8714, 8800-8921, 8932-8934, 8940-8990, 9000-9016, 9030-9137, 9141-9175, 9181-9230, 9240-9509, 9520-9582	Conjunctiva Melanoma Conjunctiva Orbital Sarcoma
C691 C692	Cornea Retina	8000-8700, 8720-8790, 9700-9701 8710-8714, 8800-8921, 8932-8934, 8940-8990, 9000-9016, 9030-9137, 9141-9175, 9181-9230, 9240-9509, 9520-9582	Eye Other Orbital Sarcoma
C693 C694	Choroid Ciliary body	8000-8700, 9700-9701 8720-8790 8710-8714, 8800-8921, 8932-8934, 8940-8990, 9000-9016, 9030-9137, 9141-9175, 9181-9230, 9240-9509, 9520-9582	Eye Other Melanoma Uvea Orbital Sarcoma
C695	Lacrimal gland	8000-8700, 8941, 8980, 8982, 9700- 9701 8720-8790 8710-8714, 8800-8921, 8932-8934, 8940, 8950-8975, 8981, 8983-8990, 9000-9016, 9030-9137, 9141-9175, 9181-9230, 9240-9509, 9520-9582	Lacrimal Gland/Sac Eye Other Orbital Sarcoma
C696	Orbit	8000-8700, 8720-8790, 9700-9701 8710-8714, 8800-8921, 8932-8934, 8940-8990, 9000-9016, 9030-9137, 9141-9175, 9181-9230, 9240-9509, 9520-9582	Eye Other Orbital Sarcoma
C698, C699	Other sites of eye	8000-8700, 8720-8790, 9700-9701 8710-8714, 8800-8921, 8932-8934, 8940-8990, 9000-9016, 9030-9137, 9141-9175, 9181-9230, 9240-9509, 9520-9582	Eye Other Orbital Sarcoma

Primary Site(s)	Description	Histology	SS2018 Chapter
C700 C710-C719	Cerebral meninges Brain	8000-8700, 8720-8790, 8802, 8810, 8815, 8850, 8890, 8900, 9064, 9070-9071, 9080, 9084-9085, 9100-9105, 9120, 9133, 9140, 9180, 9220, 9362, 9364, 9380-9540, 9680, 9699, 9700-9714, 9751-9759 8710-8714, 8800-8801, 8803-8806, 8811-8814, 8820-8842, 8851-8881, 8891-8898, 8901-8934, 8940-9063, 9065, 9072-9073, 9081-9083, 9086-9091, 9110, 9121-9132, 9135-9137, 9141-9175, 9181-9210, 9221-9361, 9363, 9365-9373, 9541-9582	Brain Soft Tissue
C701 C709 C720 C721 C728, C729	Spinal meninges Meninges, NOS Spinal cord Cauda equina Other sites of brain, central nervous system	8000-8700, 8720-8790, 8802, 8810, 8815, 8850, 8890, 8900, 9064, 9070-9071, 9080, 9084-9085, 9100-9105, 9120, 9133, 9140, 9180, 9220, 9362, 9364, 9380-9540, 9680, 9699, 9700-9714, 9751-9759 8710-8714, 8800-8801, 8803-8806, 8811-8814, 8820-8842, 8851-8881, 8891-8898, 8901-8934, 8940-9063, 9065, 9072-9073, 9081-9083, 9086-9091, 9110, 9121-9132, 9135-9137, 9141-9175, 9181-9210, 9221-9361, 9363, 9365-9373, 9541-9582	CNS Other Soft Tissue
C723	Optic nerve	8000-8700, 8720-8790, 9064, 9070, 9080, 9084-9085, 9100, 9140, 9180, 9362, 9380-9420, 9423-9472, 9474-9493, 9501-9521, 9523, 9531-9539, 9680, 9699, 9700-9714, 9751-9759 8930-8931, 8991, 9020, 9231 8710-8714, 8800-8921, 8932-8934, 8940-8990, 9000-9016, 9030-9063, 9065, 9071-9073, 9081-9083, 9086-9091, 9101-9137, 9141-9175, 9181-9230, 9240-9361, 9363-9373, 9421, 9473, 9500, 9522, 9530, 9540-9582	CNS Other Soft Tissue Orbital Sarcoma

Primary Site(s)	Description	Histology	SS2018 Chapter
C722 C724 C725	Olfactory nerve Acoustic nerve Cranial nerve, NOS	8000-8700, 8720-8790, 8900, 9064, 9070-9071, 9080, 9084-9085, 9100, 9120, 9140, 9220, 9362, 9380-9539, 9680, 9699, 9700-9714, 9751-9759 8710-8714, 8800-8806, 8810-8898, 8901-8905, 8910, 8912, 8920-8921, 8930-8934, 8940-8991, 9000-9016, 9020, 9030-9063, 9065, 9072-9073, 9081-9083, 9086-9091, 9101-9110, 9121-9137, 9141-9210, 9221-9231, 9240-9361, 9363-9373, 9540-9582	CNS Other Soft Tissue
C739	Thyroid gland	8000-8700, 8720-8790, 9700-9701 8710-8714, 8800-8934, 8940-9137, 9141-9582	Thyroid (including Medullary) Soft Tissue
C740-C741, C749	Adrenal gland	8000-8700, 8720-8790, 9700-9701 8710-8714, 8800-8934, 8940-9137, 9141-9582	Adrenal Gland Soft Tissue
C750	Parathyroid gland	8000-8700, 8720-8790, 9700-9701 8710-8714, 8800-8934, 8940-9137, 9141-9582	Parathyroid Soft Tissue
C751 C752 C753	Pituitary gland Craniopharyngeal duct Pineal gland	8000-8700, 8720-8790, 8900, 9064, 9070-9071, 9080, 9084-9085, 9100, 9120, 9140, 9220, 9362, 9382, 9385-9401, 9411, 9424-9430, 9440-9442, 9445, 9450-9451, 9470-9471, 9473-9478, 9490, 9500-9501, 9505, 9508, 9530, 9538, 9680, 9699-9714, 9751, 9755-9759 8710-8714, 8800-8898, 8901-8934, 8940-9063, 9065, 9072-9073, 9081-9083, 9086-9091, 9101-9110, 9121-9137, 9141-9210, 9221-9361, 9363-9381, 9383-9384, 9410, 9412-9423, 9431-9432, 9444, 9460, 9472, 9480, 9491-9493, 9502-9504, 9506-9507, 9509-9523, 9531-9537, 9539-9582	Intracranial Gland Soft Tissue
C754, C758, C759	Carotid body Other endocrine gland sites	8000-8700, 8720-8790, 9700-9701 8710-8714, 8800-8934, 8940-9137, 9141-9582	Endocrine Other Soft Tissue

Primary Site(s)	Description	Histology	SS2018 Chapter
C755	Aortic body and other paraganglioma	8680, 8690, 8692-8693, 8700	Adrenal Gland
		8000-8671, 8681-8683, 8691, 8720-8790, 9700-9701	Endocrine Other
		8710-8714, 8800-8934, 8940-9137, 9141-9582	Soft Tissue
C760	Head, face or neck, NOS, other and ill-defined sites (Schema Discriminator 1-Occult Head and Neck Lymph Nodes: 0,1)	8000-8700, 8720-8790, 9700-9701	Ill-Defined Other
C760	Head, face or neck, NOS, other and ill-defined sites (Schema Discriminator 1-Occult Head and Neck Lymph Nodes: 0, 1)	8941	Soft Tissue
C760	Head, face or neck, NOS, other and ill-defined sites (Schema Discriminator 1-Occult Head and Neck Lymph Nodes: 2,3,4,5)	8000-8700, 8720-8790, 8941, 9700-9701	Cervical Lymph Nodes and Unknown Primary
C760	Head, face or neck, NOS, other and ill-defined sites	8710-8714, 8800-8934, 8940, 8950-9137, 9141-9582	Soft Tissue
C761-C765, C767-C768	Other and Ill-Defined sites (excluding head, face, or neck, NOS)	8000-8700, 8720-8790, 9700-9701	Ill-Defined Other
		8710-8714, 8800-8934, 8940-9137, 9141-9582	Soft Tissue
C770-C775, C778-C779	Lymph nodes	8000-8700, 8720-8790, 9700-9701	Ill-Defined Other
		8710-8714, 8800-8934, 8940-9137, 9141-9582	Soft Tissue
C809	Unknown primary site	8000-8180, 8191-8246, 8248-8700, 8720-8790, 9700-9701	Ill-Defined Other
		8190, 8247	Merkel Cell Skin
		8710-8714, 8800-8934, 8940-9137, 9141-9582	Soft Tissue

Appendix III: Summary Stage 2018 (SS2018) Chapters Based on Histology and/or Primary Site-Hematopoietic and Lymphoid Neoplasms (9590-9992)

This appendix covers the Summary Stage chapters related to Hematopoietic and Lymphoid Neoplasms.

- **Exception 1:** Mycosis Fungoides (9700) and Sezary Syndrome (9701) for all primary sites are included in Appendix II with Solid Tumors
- **Exception 2:** For histologies 9680, 9699, 9700-9714, 9751-9755, see the appropriate Summary Stage chapters for the following primary sites:
 - C700, C710-C719: Brain
 - C701, C709, C720-C729: CNS Other
 - C751, C752, C753: Intracranial Gland
- **Exception 3:** The following primary sites with behavior of /0 (benign) or /1 (borderline) are collected in the following schemas:
 - C700, C710-C719: Brain
 - C701, C709, C720-C729: CNS Other
 - C751, C752, C753: Intracranial Gland

Summary Stage Chapter	Histology(ies)	Primary Sites
Lymphoma Ocular Adnexa	9590-9699, 9702-9719, 9725-9726, 9734-9738, 9823, 9826-9827, 9930	C441, C690, C695-C696
Primary Cutaneous Lymphomas	9597, 9680, 9708-9709, 9712, 9718-9719, 9726	C440, C442-C449, C510, C609, C632
Lymphoma	9591 (Schema Discriminator 1-Histology Discriminator: 3, 9)	C000-C440, C442-C689, C691-C694, C698-C809
	9590, 9596-9663, 9673-9699, 9702-9719, 9725-9726, 9735, 9737-9738	C000-C424, C470-C509, C511-C608, C619-C631, C637-C689, C691-C694, C698-C699, C739-C749, C760-C809
	9590, 9596, 9650-9663, 9673-9679, 9687-9699, 9702-9705, 9714-9717, 9725, 9735, 9737-9738	C440, C442-C449, C510, C609, C632
	9590, 9596-9663, 9673-9679, 9687-9698, 9716-9719, 9725-9726, 9735, 9737-9738	C700-C729, C750-C759
	9680, 9699, 9702-9714	C750, C754-C759
	9823	C000-C440, C442-C689, C691-C694, C698-C809
	9826-9827	C000-C440, C442-C689, C691-C694, C698-C809

Summary Stage Chapter	Histology(ies)	Primary Sites
Myeloma and Plasma Cell Disorders	9671, 9734 9731, 9732, 9761	C000-C440, C442-C689, C691-C694, C698-C809 C000-C809
HemeRetic	9591 (Schema Discriminator 1-Histology Discriminator: 1, 2) 9724, 9727, 9740-9742, 9762-9809, 9811-9820, 9831-9920, 9931-9992 9751, 9755-9759 9930	C000-C440, C442-C689, C691-C694, C698-C809 C000-C809 C000-C699, C739-C750, C754-C809 C000-C440, C442-C689, C691-C694, C698-C809