

**Collaborative Staging Codes**

**Nasal Cavity**

**C30.0**

C30.0 Nasal cavity (excludes nose, NOS C76.0)

**Note:** Laterality must be coded for this site, except subsites Nasal cartilage and Nasal septum, for which laterality is coded 0.

<p>CS Tumor Size CS Extension CS TS/Ext-Eval CS Lymph Nodes CS Reg Nodes Eval Reg LN Pos Reg LN Exam CS Mets at DX CS Mets Eval</p>	<p><b>CS Site-Specific Factor 1</b> - Size of Lymph Nodes <b>CS Site-Specific Factor 2</b> - Extracapsular Extension, Lymph Nodes for Head and Neck <b>CS Site-Specific Factor 3</b> - Levels I-III, Lymph Nodes for Head and Neck <b>CS Site-Specific Factor 4</b> - Levels IV-V and Retropharyngeal Lymph Nodes for Head and Neck <b>CS Site-Specific Factor 5</b> - Levels VI-VII and Facial Lymph Nodes for Head and Neck <b>CS Site-Specific Factor 6</b> - Parapharyngeal, Parotid, Preauricular, and Sub-Occipital Lymph Nodes, Lymph Nodes for Head and Neck</p>	<p>The following tables are available at the collaborative staging website: Histology Exclusion Table AJCC Stage Lymph Nodes Size Table</p>
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**Nasal Cavity**

**CS Tumor Size**

**SEE STANDARD TABLE**

**Nasal Cavity**

**CS Extension**

Code	Description	TNM	SS77	SS2000
00	In situ; non-invasive	Tis	IS	IS
10	Invasive tumor confined to site of origin Meatus (superior, middle, inferior) Nasal chonchae (superior, middle, inferior) Septum Tympanic membrane	T1	L	L
30	Localized, NOS	T1	L	L
40	Extending to adjacent connective tissue within the nasoethomoidal complex Nasolacrimal duct	T2	RE	RE
60	Adjacent organs/structures including: Bone of skull Choana Frontal sinus Hard palate Nasopharynx	T3	RE	RE
65	Cribriform plate	T3	RE	RE

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66	Maxillary sinus	T3	RE	RE
67	Medial wall or floor of the orbit	T3	RE	RE
70	Tumor invades: Anterior orbital contents Skin of cheek Skin of nose Minimal extension to: Anterior cranial fossa Pterygoid plates Sphenoid or frontal sinuses	T4a	D	D
71	Tumor invades: Orbital apex Dura Brain Middle cranial fossa Cranial nerves other than (V2), nasopharynx, or clivus	T4b	D	D
95	No evidence of primary tumor	T0	U	U
99	Unknown extension Primary tumor cannot be assessed Not documented in patient record	TX	U	U

**Nasal Cavity**

**CS TS/Ext-Eval**

**SEE STANDARD TABLE**

**Nasal Cavity**

**CS Lymph Nodes**

**Note 1:** For head and neck schemas, this field includes all lymph nodes defined as Levels I-VII and Other by AJCC. The complete definitions are provided in the General Instructions.

**Note 2:** For head and neck schemas, additional information about lymph nodes (size of involved nodes, extracapsular extension, and levels involved) is coded in Site-Specific Factors 1-6.

**Note 3:** If laterality of lymph nodes is not specified, assume nodes are ipsilateral. Midline nodes are considered ipsilateral.

**Note 4:** For head and neck cancers, if lymph nodes are described only as "supraclavicular", try to determine if they are in Level IV (deep to the sternocleidomastoid muscle, in the lower jugular chain) or Level V (in the posterior triangle, inferior to the transverse cervical artery) and code appropriately. If the specific level cannot be determined, consider them as Level V nodes.

Code	Description	TNM	SS77	SS2000
00	None; no regional lymph node involvement	N0	NONE	NONE
10	Single positive ipsilateral regional node: Level I node Sublingual Submandibular (submaxillary) Submental Level II node Jugulodigastric (subdigastric) Upper deep cervical Upper jugular	*	RN	RN

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10, cont'd	Cervical, NOS Deep cervical, NOS Internal jugular, NOS Mandibular, NOS Retropharyngeal Regional lymph node, NOS			
12	Single positive ipsilateral regional node: Level III node Middle deep cervical Mid jugular Level IV node Jugulo-omohyoid (supraomohyoid) Lower deep cervical Lower jugular Level V node Posterior cervical Posterior triangle (spinal accessory and transverse cervical) (upper, middle, and lower corresponding to the levels that define upper, middle, and lower jugular nodes) Level VI node Anterior deep cervical Laterotrachea Paralaryngeal Paratracheal Prelaryngeal Pretracheal Recurrent laryngeal Level VII node Upper mediastinum (for other mediastinal nodes see CS Mets at DX) Other groups Intraparotid Parapharyngeal Periparotid Retropharyngeal Sub-occipital Supraclavicular, NOS (See Note 4)	*	D	D
18	Stated as N1, no other information	N1	RN	RN
19	Stated as N2a, no other information	N2a	RN	RN
20	Multiple positive ipsilateral nodes listed in code 10	*	RN	RN
22	Multiple positive ipsilateral nodes listed in code 12	*	D	D
29	Stated as N2b, no other information	N2b	RN	RN
30	Regional lymph nodes as listed in code 10: Positive ipsilateral node(s), not stated if single or multiple or regional	*	RN	RN
32	Regional lymph nodes as listed in code 12: Positive ipsilateral node(s), not stated if single or multiple	*	D	D
40	Regional lymph nodes as listed in code 10: Positive bilateral or contralateral nodes	*	RN	RN

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42	Regional lymph nodes as listed in code 12: Positive bilateral or contralateral nodes	*	D	D
49	Stated as N2c, no other information	N2c	RN	RN
50	Regional lymph nodes as listed in code 10: Positive node(s), not stated if ipsilateral, or bilateral, or contralateral AND not stated if single or multiple	*	RN	RN
52	Regional lymph nodes as listed in code 12: Positive node(s), not stated if ipsilateral, or bilateral, or contralateral AND not stated if single or multiple	*	D	D
60	Stated as N2, NOS	N2NOS	RN	RN
70	Stated as N3, no other information	N3	RN	RN
80	Lymph nodes, NOS	*	RN	RN
99	Unknown; not stated Regional lymph node(s) cannot be assessed Not documented in patient record	NX	U	U

\*For codes 10, 12, 20, 22, 30, 32, 40, 42, 50, 52 and 80 ONLY, the N category is assigned based on the value of Site-Specific Factor 1, Size of Lymph Nodes, using the extra table, Lymph Nodes Size Table for this site.

**Nasal Cavity**

**CS Reg Nodes Eval**

**SEE STANDARD TABLE**

**Nasal Cavity**

**Reg LN Pos**

**SEE STANDARD TABLE**

**Nasal Cavity**

**Reg LN Exam**

**SEE STANDARD TABLE**

**Nasal Cavity**

**CS Mets at DX**

**SEE STANDARD TABLE**

**Nasal Cavity**

**CS Mets Eval**

**SEE STANDARD TABLE**

**Nasal Cavity**

**CS Site-Specific Factor 1 Size of Lymph Nodes**

**Note:** Code the largest diameter, whether measured clinically or pathologically, of any involved regional lymph node(s). Do not code the size of any nodes coded in CS Mets at DX.

Code	Description
000	No involved regional nodes
001-988	001-988 millimeters (code exact size in millimeters)
989	989 millimeters or larger
990	Microscopic focus or foci only, no size of focus given
991	Described as less than 1 cm
992	Described as less than 2 cm
993	Described as less than 3 cm
994	Described as less than 4 cm
995	Described as less than 5 cm
996	Described as less than 6 cm
997	Described as more than 6 cm
999	Regional lymph node(s) involved, size not stated Unknown if regional lymph node(s) involved Not documented in patient record

**Nasal Cavity**

**CS Site-Specific Factor 2 Extracapsular Extension, Lymph Nodes for Head and Neck**

**Note 1:** Code the status of extracapsular extension whether assessed clinically or pathologically of any involved regional lymph node(s) coded in the CS Lymph Nodes field. Do not code the status of any nodes coded in CS Mets at DX. Pathologic assessment takes priority over clinical assessment.

**Note 2:** According to AJCC (page 24), "Imaging studies showing amorphous spiculated margins of involved nodes or involvement of internodal fat resulting in loss of normal oval-to-round nodal shape strongly suggest extracapsular (extranodal) tumor spread; however, pathologic examination is necessary for documentation of the extent of such disease."

Code	Description
000	No extracapsular extension
001	Extracapsular extension clinically, not assessed pathologically Nodes described as "fixed", not assessed pathologically
005	Extracapsular extension present pathologically
888	Not applicable; no lymph node involvement
999	Unknown if regional lymph node(s) involved, not stated Regional lymph node(s) cannot be assessed Not documented in patient record

**Nasal Cavity**

**CS Site-Specific Factor 3 Levels I-III, Lymph Nodes for Head and Neck**

**Note:** Site-Specific Factors 3-6 are used to code the presence or absence of lymph node involvement in each of 7 different levels and other groups defined by AJCC. The definitions of the levels are the same for all applicable head and neck sites. One digit is used to represent lymph nodes of a single level, with the three digits of Site-Specific Factor 3 representing lymph nodes of, respectively, Levels I-III; the digits of Site-Specific Factor 4 representing lymph nodes of Levels IV and V and the retropharyngeal nodes; the digits of Site-Specific Factor 5 representing lymph nodes of Levels VI and VII and the facial nodes; and the digits of Site-Specific Factor 6 representing the remaining Other groups as defined by AJCC. In each digit, a code 1 means Yes, the nodes are involved.

Code	Description
000	No lymph node involvement in Levels I, II, or III
100	Level I lymph node(s) involved
010	Level II lymph node(s) involved
001	Level III lymph node(s) involved
110	Level I and II lymph nodes involved
101	Level I and III lymph nodes involved
011	Level II and III lymph nodes involved
111	Level I, II and III lymph nodes involved
999	Unknown if regional lymph node(s) involved, not stated Regional lymph node(s) cannot be assessed Not documented in patient record

**Nasal Cavity**

**CS Site-Specific Factor 4 Levels IV-V and Retropharyngeal Lymph Nodes for Head and Neck**

**Note:** Site-Specific Factors 3-6 are used to code the presence or absence of lymph node involvement in each of 7 different levels and other groups defined by AJCC. The definitions of the levels are the same for all applicable head and neck sites. One digit is used to represent lymph nodes of a single level, with the three digits of Site-Specific Factor 3 representing lymph nodes of, respectively, Levels I-III; the digits of Site-Specific Factor 4 representing lymph nodes of Levels IV and V and the retropharyngeal nodes; the digits of Site-Specific Factor 5 representing lymph nodes of Levels VI and VII and the facial nodes; and the digits of Site-Specific Factor 6 representing the remaining Other groups as defined by AJCC. In each digit, a code 1 means Yes, the nodes are involved.

Code	Description
000	No lymph node involvement in Levels IV or V or retropharyngeal
100	Level IV lymph node(s) involved
010	Level V lymph node(s) involved
001	Retropharyngeal nodes involved
110	Level IV and V lymph nodes involved
101	Level IV and retropharyngeal nodes involved
011	Level V and retropharyngeal nodes involved

111	Level IV and V and retropharyngeal lymph nodes involved
999	Unknown if regional lymph node(s) involved, not stated Regional lymph node(s) cannot be assessed Not documented in patient record

**Nasal Cavity**

**CS Site-Specific Factor 5 Levels VI-VII and Facial Lymph Nodes for Head and Neck**

**Note:** Site-Specific Factors 3-6 are used to code the presence or absence of lymph node involvement in each of 7 different levels and other groups defined by AJCC. The definitions of the levels are the same for all applicable head and neck sites. One digit is used to represent lymph nodes of a single level, with the three digits of Site-Specific Factor 3 representing lymph nodes of, respectively, Levels I-III; the digits of Site-Specific Factor 4 representing lymph nodes of Levels IV and V and the retropharyngeal nodes; the digits of Site-Specific Factor 5 representing lymph nodes of Levels VI and VII and the facial nodes; and the digits of Site-Specific Factor 6 representing the remaining Other groups as defined by AJCC. In each digit, a code 1 means Yes, the nodes are involved.

Code	Description
000	No lymph node involvement in Levels VI or VII or facial nodes
100	Level VI lymph node(s) involved
010	Level VII lymph node(s) involved
001	Facial (buccinator, nasolabial) lymph node(s) involved
110	Level VI and VII lymph nodes involved
101	Level VI and facial (buccinator, nasolabial) nodes involved
011	Level VII and facial (buccinator, nasolabial) nodes involved
111	Level VI and VII and facial (buccinator, nasolabial) lymph nodes involved
999	Unknown if regional lymph node(s) involved, not stated Regional lymph node(s) cannot be assessed Not documented in patient record

**Nasal Cavity**

**CS Site-Specific Factor 6 Parapharyngeal, Parotid, Preauricular, and Sub-Occipital Lymph Nodes, Lymph Nodes for Head and Neck**

**Note:** Site-Specific Factors 3-6 are used to code the presence or absence of lymph node involvement in each of 7 different levels and other groups defined by AJCC. The definitions of the levels are the same for all applicable head and neck sites. One digit is used to represent lymph nodes of a single level, with the three digits of Site-Specific Factor 3 representing lymph nodes of, respectively, Levels I-III; the digits of Site-Specific Factor 4 representing lymph nodes of Levels IV and V and the retropharyngeal nodes; the digits of Site-Specific Factor 5 representing lymph nodes of Levels VI and VII and the facial nodes; and the digits of Site-Specific Factor 6 representing the remaining Other groups as defined by AJCC. In each digit, a code 1 means Yes, the nodes are involved.

Code	Description
000	No parapharyngeal, parotid (preauricular, periparotid, and/or intraparotid), or sub-occipital lymph node involvement
100	Parapharyngeal lymph node(s) involved
010	Parotid (preauricular, periparotid, and/or intraparotid) lymph node(s) involved

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001	Sub-occipital lymph node(s) involved
110	Parapharyngeal and parotid (preauricular, periparotid, and/or intraparotid) lymph nodes involved
101	Parapharyngeal and sub-occipital lymph nodes involved
011	Parotid (preauricular, periparotid, and/or intraparotid) and sub-occipital lymph nodes involved
111	Parapharyngeal, parotid (preauricular, periparotid, and/or intraparotid), and sub-occipital lymph nodes involved
999	Unknown if regional lymph node(s) involved, not stated Regional lymph node(s) cannot be assessed Not documented in patient record



**Collaborative Staging Codes**

**Middle Ear**

**C30.1**

C30.1 Middle ear

**Note 1:** Laterality must be coded for this site.

**Note 2:** AJCC does not define TNM staging for this site.

CS Tumor Size CS Extension CS TS/Ext-Eval CS Lymph Nodes CS Reg Nodes Eval Reg LN Pos Reg LN Exam CS Mets at DX CS Mets Eval	<b>CS Site-Specific Factor 1</b> - Size of Lymph Nodes <b>CS Site-Specific Factor 2</b> - Extracapsular Extension, Lymph Nodes for Head and Neck <b>CS Site-Specific Factor 3</b> - Levels I-III, Lymph Nodes for Head and Neck <b>CS Site-Specific Factor 4</b> - Levels IV-V and Retropharyngeal Lymph Nodes for Head and Neck <b>CS Site-Specific Factor 5</b> - Levels VI-VII and Facial Lymph Nodes for Head and Neck <b>CS Site-Specific Factor 6</b> - Parapharyngeal, Parotid, Preauricular, and Sub-Occipital Lymph Nodes, Lymph Nodes for Head and Neck	The following tables are available at the collaborative staging website: Histology Exclusion Table AJCC Stage
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**Middle Ear**

**CS Tumor Size**

**SEE STANDARD TABLE**

**Middle Ear**

**CS Extension**

Code	Description	TNM	SS77	SS2000
00	In situ; non-invasive	NA	IS	IS
10	Invasive tumor confined to: Cochlea Incus Malleus Semicircular ducts, NOS: Ampullae Saccule Utricle Septum Stapes Tympanic membrane	NA	L	L
30	Localized, NOS	NA	L	L
40	Adjacent connective tissue: Auditory tube Nerve(s) Pharyngotympanic tube	NA	RE	RE

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60	Adjacent organs/structures: External auditory meatus Internal carotid artery Mastoid antrum Nasopharynx Temporal bone	NA	RE	RE
80	Further contiguous extension Meninges	NA	D	D
95	No evidence of primary tumor	NA	U	U
99	Unknown extension Primary tumor cannot be assessed Not documented in patient record	NA	U	U

**Middle Ear  
CS TS/Ext-Eval**

Code	Description	Staging Basis
9	Not applicable for this site	NA

**Middle Ear  
CS Lymph Nodes**

**Note 1:** For head and neck schemas, this field includes all lymph nodes defined as Levels I-VII and Other by AJCC. The complete definitions are provided in the General Instructions.

**Note 2:** For head and neck schemas, additional information about lymph nodes (size of involved nodes, extracapsular extension, and levels involved) is coded in Site-Specific Factors 1-6.

**Note 3:** If laterality of lymph nodes is not specified, assume nodes are ipsilateral. Midline nodes are considered ipsilateral.

**Note 4:** For head and neck cancers, if lymph nodes are described only as "supraclavicular", try to determine if they are in Level IV (deep to the sternocleidomastoid muscle, in the lower jugular chain) or Level V (in the posterior triangle, inferior to the transverse cervical artery) and code appropriately. If the specific level cannot be determined, consider them as Level V nodes.

Code	Description	TNM	SS77	SS2000
00	None; no regional lymph node involvement	NA	NONE	NONE
10	Single positive ipsilateral regional node: Level I node Sublingual Submandibular (submaxillary) Submental Level II node Jugulodigastric (subdigastric) Upper deep cervical Upper jugular Cervical, NOS Deep cervical, NOS Internal jugular, NOS Mandibular, NOS Retropharyngeal Regional lymph node, NOS	NA	RN	RN

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12	<p>Single positive ipsilateral regional node:</p> <p>Level III node</p> <p>    Middle deep cervical</p> <p>    Mid jugular</p> <p>Level IV node</p> <p>    Jugulo-omohyoid (supraomohyoid)</p> <p>    Lower deep cervical</p> <p>    Lower jugular</p> <p>Level V node</p> <p>    Posterior cervical</p> <p>    Posterior triangle (spinal accessory and transverse cervical)     (upper, middle, and lower corresponding to the levels that     define upper, middle, and lower jugular nodes)</p> <p>Level VI node</p> <p>    Anterior deep cervical</p> <p>    Laterotrachea</p> <p>    Paralaryngeal</p> <p>    Paratracheal</p> <p>    Prelaryngeal</p> <p>    Pretracheal</p> <p>    Recurrent laryngeal</p> <p>Level VII node</p> <p>    Upper mediastinum (for other mediastinal nodes see CS Mets     at DX)</p> <p>Other groups</p> <p>    Intraparotid</p> <p>    Parapharyngeal</p> <p>    Periparotid</p> <p>    Retropharyngeal</p> <p>    Sub-occipital</p> <p>    Supraclavicular, NOS (See Note 4)</p>	NA	D	D
80	Lymph nodes, NOS	NA	RN	RN
99	<p>Unknown; not stated</p> <p>Regional lymph node(s) cannot be assessed</p> <p>Not documented in patient record</p>	NA	U	U

**Middle Ear**

**CS Reg Nodes Eval**

Code	Description	Staging Basis
9	Not applicable for this site	NA

**Middle Ear**

**Reg LN Pos**

SEE STANDARD TABLE

**Middle Ear**

**Reg LN Exam**

SEE STANDARD TABLE

**Middle Ear  
CS Mets at DX**

Code	Description	TNM	SS77	SS2000
00	No; none	NA	NONE	NONE
10	Distant lymph node(s), NOS	NA	D	D
40	Distant metastases except distant lymph node(s) (code 10) Distant metastasis, NOS Carcinomatosis	NA	D	D
50	(10) + (40) Distant lymph node(s) plus other distant metastases	NA	D	D
99	Unknown if distant metastasis Cannot be assessed Not documented in patient record	NA	U	U

**Middle Ear  
CS Mets Eval**

Code	Description	Staging Basis
9	Not applicable for this site	NA

**Middle Ear  
CS Site-Specific Factor 1 Size of Lymph Nodes**

**Note:** Code the largest diameter, whether measured clinically or pathologically, of any involved regional lymph node(s). Do not code the size of any nodes coded in CS Mets at DX.

Code	Description
000	No involved regional nodes
001-988	001-988 millimeters (code exact size in millimeters)
989	989 millimeters or larger
990	Microscopic focus or foci only, no size of focus given
991	Described as less than 1 cm
992	Described as less than 2 cm
993	Described as less than 3 cm
994	Described as less than 4 cm
995	Described as less than 5 cm
996	Described as less than 6 cm
997	Described as more than 6 cm
999	Regional lymph node(s) involved, size not stated Unknown if regional lymph node(s) involved Not documented in patient record

**Middle Ear**

**CS Site-Specific Factor 2 Extracapsular Extension, Lymph Nodes for Head and Neck**

**Note 1:** Code the status of extracapsular extension whether assessed clinically or pathologically of any involved regional lymph node(s) coded in the CS Lymph Nodes field. Do not code the status of any nodes coded in CS Mets at DX. Pathologic assessment takes priority over clinical assessment.

**Note 2:** According to AJCC (page 24), "Imaging studies showing amorphous spiculated margins of involved nodes or involvement of internodal fat resulting in loss of normal oval-to-round nodal shape strongly suggest extracapsular (extranodal) tumor spread; however, pathologic examination is necessary for documentation of the extent of such disease."

Code	Description
000	No extracapsular extension
001	Extracapsular extension clinically, not assessed pathologically Nodes described as "fixed", not assessed pathologically
005	Extracapsular extension present pathologically
888	Not applicable; no lymph node involvement
999	Unknown if regional lymph node(s) involved, not stated Regional lymph node(s) cannot be assessed Not documented in patient record

**Middle Ear**

**CS Site-Specific Factor 3 Levels I-III, Lymph Nodes for Head and Neck**

**Note:** Site-Specific Factors 3-6 are used to code the presence or absence of lymph node involvement in each of 7 different levels and other groups defined by AJCC. The definitions of the levels are the same for all applicable head and neck sites. One digit is used to represent lymph nodes of a single level, with the three digits of Site-Specific Factor 3 representing lymph nodes of, respectively, Levels I-III; the digits of Site-Specific Factor 4 representing lymph nodes of Levels IV and V and the retropharyngeal nodes; the digits of Site-Specific Factor 5 representing lymph nodes of Levels VI and VII and the facial nodes; and the digits of Site-Specific Factor 6 representing the remaining Other groups as defined by AJCC. In each digit, a code 1 means Yes, the nodes are involved.

Code	Description
000	No lymph node involvement in Levels I, II, or III
100	Level I lymph node(s) involved
010	Level II lymph node(s) involved
001	Level III lymph node(s) involved
110	Level I and II lymph nodes involved
101	Level I and III lymph nodes involved
011	Level II and III lymph nodes involved
111	Level I, II and III lymph nodes involved
999	Unknown if regional lymph node(s) involved, not stated Regional lymph node(s) cannot be assessed Not documented in patient record

**Middle Ear**

**CS Site-Specific Factor 4 Levels IV-V and Retropharyngeal Lymph Nodes for Head and Neck**

**Note:** Site-Specific Factors 3-6 are used to code the presence or absence of lymph node involvement in each of 7 different levels and other groups defined by AJCC. The definitions of the levels are the same for all applicable head and neck sites. One digit is used to represent lymph nodes of a single level, with the three digits of Site-Specific Factor 3 representing lymph nodes of, respectively, Levels I-III; the digits of Site-Specific Factor 4 representing lymph nodes of Levels IV and V and the retropharyngeal nodes; the digits of Site-Specific Factor 5 representing lymph nodes of Levels VI and VII and the facial nodes; and the digits of Site-Specific Factor 6 representing the remaining Other groups as defined by AJCC. In each digit, a code 1 means Yes, the nodes are involved.

Code	Description
000	No lymph node involvement in Levels IV or V or retropharyngeal
100	Level IV lymph node(s) involved
010	Level V lymph node(s) involved
001	Retropharyngeal nodes involved
110	Level IV and V lymph nodes involved
101	Level IV and retropharyngeal nodes involved
011	Level V and retropharyngeal nodes involved
111	Level IV and V and retropharyngeal lymph nodes involved
999	Unknown if regional lymph node(s) involved, not stated Regional lymph node(s) cannot be assessed Not documented in patient record

**Middle Ear**

**CS Site-Specific Factor 5 Levels VI-VII and Facial Lymph Nodes for Head and Neck**

**Note:** Site-Specific Factors 3-6 are used to code the presence or absence of lymph node involvement in each of 7 different levels and other groups defined by AJCC. The definitions of the levels are the same for all applicable head and neck sites. One digit is used to represent lymph nodes of a single level, with the three digits of Site-Specific Factor 3 representing lymph nodes of, respectively, Levels I-III; the digits of Site-Specific Factor 4 representing lymph nodes of Levels IV and V and the retropharyngeal nodes; the digits of Site-Specific Factor 5 representing lymph nodes of Levels VI and VII and the facial nodes; and the digits of Site-Specific Factor 6 representing the remaining Other groups as defined by AJCC. In each digit, a code 1 means Yes, the nodes are involved.

Code	Description
000	No lymph node involvement in Levels VI or VII or facial nodes
100	Level VI lymph node(s) involved
010	Level VII lymph node(s) involved
001	Facial (buccinator, nasolabial) lymph node(s) involved
110	Level VI and VII lymph nodes involved
101	Level VI and facial (buccinator, nasolabial) nodes involved
011	Level VII and facial (buccinator, nasolabial) nodes involved

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111	Level VI and VII and facial (buccinator, nasolabial) lymph nodes involved
999	Unknown if regional lymph node(s) involved, not stated Regional lymph node(s) cannot be assessed Not documented in patient record

**Middle Ear**

**CS Site-Specific Factor 6 Parapharyngeal, Parotid, Preauricular, and Sub-Occipital Lymph Nodes, Lymph Nodes for Head and Neck**

**Note:** Site-Specific Factors 3-6 are used to code the presence or absence of lymph node involvement in each of 7 different levels and other groups defined by AJCC. The definitions of the levels are the same for all applicable head and neck sites. One digit is used to represent lymph nodes of a single level, with the three digits of Site-Specific Factor 3 representing lymph nodes of, respectively, Levels I-III; the digits of Site-Specific Factor 4 representing lymph nodes of Levels IV and V and the retropharyngeal nodes; the digits of Site-Specific Factor 5 representing lymph nodes of Levels VI and VII and the facial nodes; and the digits of Site-Specific Factor 6 representing the remaining Other groups as defined by AJCC. In each digit, a code 1 means Yes, the nodes are involved.

Code	Description
000	No parapharyngeal, parotid (preauricular, periparotid, and/or intraparotid), or sub-occipital lymph node involvement
100	Parapharyngeal lymph node(s) involved
010	Parotid (preauricular, periparotid, and/or intraparotid) lymph node(s) involved
001	Sub-occipital lymph node(s) involved
110	Parapharyngeal and parotid (preauricular, periparotid, and/or intraparotid) lymph nodes involved
101	Parapharyngeal and sub-occipital lymph nodes involved
011	Parotid (preauricular, periparotid, and/or intraparotid) and sub-occipital lymph nodes involved
111	Parapharyngeal, parotid (preauricular, periparotid, and/or intraparotid), and sub-occipital lymph nodes involved
999	Unknown if regional lymph node(s) involved, not stated Regional lymph node(s) cannot be assessed Not documented in patient record

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**Site-Specific Surgery Codes**

**All Other Sites**

C142–C148, C170–C179, C239, C240–C249, C260–C269, **C300–C301**, C310–C319, C339, C379, C380–C388, C390–C399, C480–C488, C510–C519, C529, C570–C579, C589, C600–C609, C630–C639, C680–C689, C690–C699, C740–C749, C750–C759

(Except for M-9750, 9760-9764, 9800-9820, 9826, 9831-9920, 9931-9964, 9980-9989)

Codes

00 None; **no surgery** of primary site; **autopsy ONLY**

10 Local tumor destruction, NOS

11 Photodynamic therapy (PDT)

12 Electrocautery; fulguration (includes use of hot forceps for tumor destruction)

13 Cryosurgery

14 Laser

No specimen sent to **pathology** from surgical events 10–14

20 **Local tumor excision**, NOS

26 Polypectomy

27 Excisional biopsy

Any **combination** of 20 or 26–27 WITH

21 Photodynamic therapy (PDT)

22 Electrocautery

23 Cryosurgery

24 Laser ablation

25 Laser excision

[**SEER Note:** Codes 21 to 25 above combine 20 local tumor excision, 26 Polypectomy or 27 Excisional biopsy with 21 PDT, 22 Electrocautery, 23 Cryosurgery, 24 Laser ablation, or 25 Laser excision]

**Specimen** sent to **pathology** from surgical events 20–27

30 Simple/partial surgical removal of primary site

40 **Total surgical removal** of primary site; enucleation

41 Total enucleation (for eye surgery only)

50 Surgery stated to be “**debulking**”

60 Radical surgery

Partial or total removal of the primary site WITH a resection in continuity (partial or total removal) with other organs

[**SEER Note:** In continuity with or “en bloc” means that all of the tissues were removed during the same procedure, but not necessarily in a single specimen]

90 Surgery, NOS

99 **Unknown** if surgery performed; **death certificate ONLY**

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**Collaborative Staging Codes**

**Maxillary Sinus**

**C31.0**

C31.0 Maxillary sinus

**Note:** Laterality must be coded for this site.

<p>CS Tumor Size                  CS Extension                  CS TS/Ext-Eval                  CS Lymph Nodes                  CS Reg Nodes Eval                  Reg LN Pos                  Reg LN Exam                  CS Mets at DX                  CS Mets Eval</p>	<p><b>CS Site-Specific Factor 1</b> - Size of Lymph Nodes  <b>CS Site-Specific Factor 2</b> - Extracapsular Extension, Lymph Nodes for Head and Neck  <b>CS Site-Specific Factor 3</b> - Levels I-III, Lymph Nodes for Head and Neck  <b>CS Site-Specific Factor 4</b> - Levels IV-V and Retropharyngeal Lymph Nodes for Head and Neck  <b>CS Site-Specific Factor 5</b> - Levels VI-VII and Facial Lymph Nodes for Head and Neck  <b>CS Site-Specific Factor 6</b> - Parapharyngeal, Parotid, Preauricular, and Sub-Occipital Lymph Nodes, Lymph Nodes for Head and Neck</p>	<p>The following tables are available at the collaborative staging website:                  Histology Exclusion Table                  AJCC Stage                  Lymph Nodes Size Table</p>
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**Maxillary Sinus**

**CS Tumor Size**

**SEE STANDARD TABLE**

**Maxillary Sinus**

**CS Extension**

Code	Description	TNM	SS77	SS2000
00	In situ; non-invasive; intraepithelial	Tis	IS	IS
10	Invasive tumor confined to mucosa of maxillary antrum (sinus) without erosion or destruction of bone	T1	L	L
30	Localized, NOS	T1	L	L
40	Invasion of infrastructure: Hard palate except extension to posterior wall of sinus pterygoid plates (code 68) Middle nasal meatus, except extension to posterior wall of sinus and pterygoid plates (code 68) Nasal cavity (floor, lateral wall, septum, turbinates) Palatine bone Tumor causing bone erosion or destruction, except for the posterior antral wall	T2	RE	RE
60	Invasion of suprastructure: Ethmoid sinus, anterior Floor or medial wall of orbit Floor or posterior wall of maxillary sinus Subcutaneous tissues	T3	RE	RE

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65	Bone of the posterior wall of maxillary sinus Invasion of maxilla, NOS	T3	RE	RE
66	Ethmoid sinus Posterior ethmoid, NOS Pterygoid sinus	T3	RE	RE
68	Anterior orbital contents Cribriform plate Frontal sinus Infratemporal fossa Pterygoid plates Skin of cheek Sphenoid sinus	T4a	RE	RE
70	Base of skull Nasopharynx Orbital contents, including eye Pterygomaxillary or temporal fossa Soft palate	T4b	RE	RE
75	Brain Clivus Cranial nerves other than (V2) Dura Middle cranial fossa Nasopharynx Orbital apex	T4b	RE	RE
80	Further contiguous extension	T4NOS	D	D
95	No evidence of primary tumor	T0	U	U
99	Unknown extension Primary tumor cannot be assessed Not documented in patient record	TX	U	U

**Maxillary Sinus**

**CS TS/Ext-Eval**

**SEE STANDARD TABLE**

**Maxillary Sinus**

**CS Lymph Nodes**

**Note 1:** For head and neck schemas, this field includes all lymph nodes defined as Levels I-VII and Other by AJCC. The complete definitions are provided in the General Instructions.

**Note 2:** For head and neck schemas, additional information about lymph nodes (size of involved nodes, extracapsular extension, and levels involved) is coded in Site-Specific Factors 1-6.

**Note 3:** If laterality of lymph nodes is not specified, assume nodes are ipsilateral. Midline nodes are considered ipsilateral.

**Note 4:** For head and neck cancers, if lymph nodes are described only as "supraclavicular", try to determine if they are in Level IV (deep to the sternocleidomastoid muscle, in the lower jugular chain) or Level V (in the posterior triangle, inferior to the transverse cervical artery) and code appropriately. If the specific level cannot be determined, consider them as Level V nodes.

Code	Description	TNM	SS77	SS2000
00	None; no regional lymph node involvement	N0	NONE	NONE

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10	<p>Single positive ipsilateral regional node:</p> <ul style="list-style-type: none"> <li>Level I node <ul style="list-style-type: none"> <li>Submandibular (submaxillary)</li> <li>Submental</li> </ul> </li> <li>Level II node <ul style="list-style-type: none"> <li>Jugulodigastric (subdigastric)</li> <li>Upper deep cervical</li> <li>Upper jugular</li> </ul> </li> <li>Level III node <ul style="list-style-type: none"> <li>Middle deep cervical</li> <li>Mid jugular</li> </ul> </li> <li>Level IV node <ul style="list-style-type: none"> <li>Jugulo-omohyoid (supramohyoid)</li> <li>Lower deep cervical</li> <li>Lower jugular</li> </ul> </li> </ul> <p>Cervical, NOS  Deep cervical, NOS  Internal jugular, NOS  Mandibular, NOS  Regional lymph node, NOS</p>	*	RN	RN
12	<p>Single positive ipsilateral regional node:</p> <ul style="list-style-type: none"> <li>Level V node <ul style="list-style-type: none"> <li>Posterior cervical</li> <li>Posterior triangle (spinal accessory and transverse cervical)  (upper, middle, and lower corresponding to the levels that define upper, middle, and lower jugular nodes)</li> </ul> </li> <li>Level VI node <ul style="list-style-type: none"> <li>Anterior deep cervical</li> <li>Laterotracheal</li> <li>Paralaryngeal</li> <li>Paratracheal</li> <li>Prelaryngeal</li> <li>Pretracheal</li> <li>Recurrent laryngeal</li> </ul> </li> <li>Level VII node <ul style="list-style-type: none"> <li>Upper mediastinum (for other mediastinal nodes see CS Mets at DX)</li> </ul> </li> </ul> <p>Other groups</p> <ul style="list-style-type: none"> <li>Intraparotid</li> <li>Parapharyngeal</li> <li>Periparotid</li> <li>Retropharyngeal</li> <li>Sub-occipital</li> <li>Supraclavicular, NOS (See Note 4)</li> </ul>	*	D	D
18	Stated as N1, no other information	N1	RN	RN
19	Stated as N2a, no other information	N2a	RN	RN
20	Multiple positive ipsilateral nodes listed in code 10	*	RN	RN
22	Multiple positive ipsilateral nodes listed in code 12	*	D	D
29	Stated as N2b, no other information	N2b	RN	RN
30	<p>Regional lymph nodes as listed in code 10:  Positive ipsilateral nodes(s), not stated if single or multiple or regional</p>	*	RN	RN

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32	Regional lymph nodes as listed in code 12: Positive ipsilateral node(s), not stated if single or multiple	*	D	D
40	Regional lymph nodes as listed in code 10: Positive bilateral or contralateral nodes	*	RN	RN
42	Regional lymph nodes as listed in code 12: Positive bilateral or contralateral nodes	*	D	D
49	Stated as N2c, no other information	N2c	RN	RN
50	Regional lymph nodes as listed in code 10: Positive node(s), not stated if ipsilateral, or bilateral, or contralateral AND not stated if single or multiple	*	RN	RN
52	Regional lymph nodes as listed in code 12: Positive node(s), not stated if ipsilateral, or bilateral, or contralateral AND not stated if single or multiple	*	D	D
60	Stated as N2, NOS	N2NOS	RN	RN
70	Stated as N3, no other information	N3	RN	RN
80	Lymph nodes, NOS	*	RN	RN
99	Unknown; not stated Regional lymph node(s) cannot be assessed Not documented in patient record	NX	U	U

\*For codes 10, 12, 20, 22, 30, 32, 40, 42, 50, 52 and 80 ONLY, the N category is assigned based on the value of Site-Specific Factor 1, Size of Lymph Nodes, using the extra table, Lymph Nodes Size Table for this site.

**Maxillary Sinus**

**CS Reg Nodes Eval**

**SEE STANDARD TABLE**

**Maxillary Sinus**

**Reg LN Pos**

**SEE STANDARD TABLE**

**Maxillary Sinus**

**Reg LN Exam**

**SEE STANDARD TABLE**

**Maxillary Sinus**

**CS Mets at DX**

**SEE STANDARD TABLE**

**Maxillary Sinus**

**CS Mets Eval**

**SEE STANDARD TABLE**

**Maxillary Sinus**

**CS Site-Specific Factor 1 Size of Lymph Nodes**

**Note:** Code the largest diameter, whether measured clinically or pathologically, of any involved regional lymph node(s). Do not code the size of any nodes coded in CS Mets at DX.

Code	Description
000	No involved regional nodes
001-988	001-988 millimeters (code exact size in millimeters)
989	989 millimeters or larger
990	Microscopic focus or foci only, no size of focus given
991	Described as less than 1 cm
992	Described as less than 2 cm
993	Described as less than 3 cm
994	Described as less than 4 cm
995	Described as less than 5 cm
996	Described as less than 6 cm
997	Described as more than 6 cm
999	Regional lymph node(s) involved, size not stated Unknown if regional lymph node(s) involved Not documented in patient record

**Maxillary Sinus**

**CS Site-Specific Factor 2 Extracapsular Extension, Lymph Nodes for Head and Neck**

**Note 1:** Code the status of extracapsular extension whether assessed clinically or pathologically of any involved regional lymph node(s) coded in the CS Lymph Nodes field. Do not code the status of any nodes coded in CS Mets at DX. Pathologic assessment takes priority over clinical assessment.

**Note 2:** According to AJCC (page 24), "Imaging studies showing amorphous spiculated margins of involved nodes or involvement of internodal fat resulting in loss of normal oval-to-round nodal shape strongly suggest extracapsular (extranodal) tumor spread; however, pathologic examination is necessary for documentation of the extent of such disease."

Code	Description
000	No extracapsular extension
001	Extracapsular extension clinically, not assessed pathologically Nodes described as "fixed", not assessed pathologically
005	Extracapsular extension present pathologically
888	Not applicable; no lymph node involvement
999	Unknown if regional lymph node(s) involved, not stated Regional lymph node(s) cannot be assessed Not documented in patient record

**Maxillary Sinus**

**CS Site-Specific Factor 3 Levels I-III, Lymph Nodes for Head and Neck**

**Note:** Site-Specific Factors 3-6 are used to code the presence or absence of lymph node involvement in each of 7 different levels and other groups defined by AJCC. The definitions of the levels are the same for all applicable head and neck sites. One digit is used to represent lymph nodes of a single level, with the three digits of Site-Specific Factor 3 representing lymph nodes of, respectively, Levels I-III; the digits of Site-Specific Factor 4 representing lymph nodes of Levels IV and V and the retropharyngeal nodes; the digits of Site-Specific Factor 5 representing lymph nodes of Levels VI and VII and the facial nodes; and the digits of Site-Specific Factor 6 representing the remaining Other groups as defined by AJCC. In each digit, a code 1 means Yes, the nodes are involved.

Code	Description
000	No lymph node involvement in Levels I, II, or III
100	Level I lymph node(s) involved
010	Level II lymph node(s) involved
001	Level III lymph node(s) involved
110	Level I and II lymph nodes involved
101	Level I and III lymph nodes involved
011	Level II and III lymph nodes involved
111	Level I, II and III lymph nodes involved
999	Unknown if regional lymph node(s) involved, not stated Regional lymph node(s) cannot be assessed Not documented in patient record

**Maxillary Sinus**

**CS Site-Specific Factor 4 Levels IV-V and Retropharyngeal Lymph Nodes for Head and Neck**

**Note:** Site-Specific Factors 3-6 are used to code the presence or absence of lymph node involvement in each of 7 different levels and other groups defined by AJCC. The definitions of the levels are the same for all applicable head and neck sites. One digit is used to represent lymph nodes of a single level, with the three digits of Site-Specific Factor 3 representing lymph nodes of, respectively, Levels I-III; the digits of Site-Specific Factor 4 representing lymph nodes of Levels IV and V and the retropharyngeal nodes; the digits of Site-Specific Factor 5 representing lymph nodes of Levels VI and VII and the facial nodes; and the digits of Site-Specific Factor 6 representing the remaining Other groups as defined by AJCC. In each digit, a code 1 means Yes, the nodes are involved.

Code	Description
000	No lymph node involvement in Levels IV or V or retropharyngeal
100	Level IV lymph node(s) involved
010	Level V lymph node(s) involved
001	Retropharyngeal nodes involved
110	Level IV and V lymph nodes involved
101	Level IV and retropharyngeal nodes involved
011	Level V and retropharyngeal nodes involved



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111	Level IV and V and retropharyngeal lymph nodes involved
999	Unknown if regional lymph node(s) involved, not stated Regional lymph node(s) cannot be assessed Not documented in patient record

### Maxillary Sinus

#### CS Site-Specific Factor 5 Levels VI-VII and Facial Lymph Nodes for Head and Neck

**Note:** Site-Specific Factors 3-6 are used to code the presence or absence of lymph node involvement in each of 7 different levels and other groups defined by AJCC. The definitions of the levels are the same for all applicable head and neck sites. One digit is used to represent lymph nodes of a single level, with the three digits of Site-Specific Factor 3 representing lymph nodes of, respectively, Levels I-III; the digits of Site-Specific Factor 4 representing lymph nodes of Levels IV and V and the retropharyngeal nodes; the digits of Site-Specific Factor 5 representing lymph nodes of Levels VI and VII and the facial nodes; and the digits of Site-Specific Factor 6 representing the remaining Other groups as defined by AJCC. In each digit, a code 1 means Yes, the nodes are involved.

Code	Description
000	No lymph node involvement in Levels VI or VII or facial nodes
100	Level VI lymph node(s) involved
010	Level VII lymph node(s) involved
001	Facial (buccinator, nasolabial) lymph node(s) involved
110	Level VI and VII lymph nodes involved
101	Level VI and facial (buccinator, nasolabial) nodes involved
011	Level VII and facial (buccinator, nasolabial) nodes involved
111	Level VI and VII and facial (buccinator, nasolabial) lymph nodes involved
999	Unknown if regional lymph node(s) involved, not stated Regional lymph node(s) cannot be assessed Not documented in patient record

### Maxillary Sinus

#### CS Site-Specific Factor 6 Parapharyngeal, Parotid, Preauricular, and Sub-Occipital Lymph Nodes, Lymph Nodes for Head and Neck

**Note:** Site-Specific Factors 3-6 are used to code the presence or absence of lymph node involvement in each of 7 different levels and other groups defined by AJCC. The definitions of the levels are the same for all applicable head and neck sites. One digit is used to represent lymph nodes of a single level, with the three digits of Site-Specific Factor 3 representing lymph nodes of, respectively, Levels I-III; the digits of Site-Specific Factor 4 representing lymph nodes of Levels IV and V and the retropharyngeal nodes; the digits of Site-Specific Factor 5 representing lymph nodes of Levels VI and VII and the facial nodes; and the digits of Site-Specific Factor 6 representing the remaining Other groups as defined by AJCC. In each digit, a code 1 means Yes, the nodes are involved.

Code	Description
000	No parapharyngeal, parotid (preauricular, periparotid, and/or intraparotid), or sub-occipital lymph node involvement
100	Parapharyngeal lymph node(s) involved
010	Parotid (preauricular, periparotid, and/or intraparotid) lymph node(s) involved
001	Sub-occipital lymph node(s) involved

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110	Parapharyngeal and parotid (preauricular, periparotid, and/or intraparotid) lymph nodes involved
101	Parapharyngeal and sub-occipital lymph nodes involved
011	Parotid (preauricular, periparotid, and/or intraparotid) and sub-occipital lymph nodes involved
111	Parapharyngeal, parotid (preauricular, periparotid, and/or intraparotid), and sub-occipital lymph nodes involved
999	Unknown if regional lymph node(s) involved, not stated Regional lymph node(s) cannot be assessed Not documented in patient record

**Collaborative Staging Codes**

**Ethmoid Sinus**

**C31.1**

C31.1 Ethmoid sinus

<p>CS Tumor Size                  CS Extension                  CS TS/Ext-Eval                  CS Lymph Nodes                  CS Reg Nodes Eval                  Reg LN Pos                  Reg LN Exam                  CS Mets at DX                  CS Mets Eval</p>	<p><b>CS Site-Specific Factor 1</b> - Size of Lymph Nodes  <b>CS Site-Specific Factor 2</b> - Extracapsular Extension, Lymph Nodes for Head and Neck  <b>CS Site-Specific Factor 3</b> - Levels I-III, Lymph Nodes for Head and Neck  <b>CS Site-Specific Factor 4</b> - Levels IV-V and Retropharyngeal Lymph Nodes for Head and Neck  <b>CS Site-Specific Factor 5</b> - Levels VI-VII and Facial Lymph Nodes for Head and Neck  <b>CS Site-Specific Factor 6</b> - Parapharyngeal, Parotid, Preauricular, and Sub-Occipital Lymph Nodes, Lymph Nodes for Head and Neck</p>	<p>The following tables are available at the collaborative staging website:                  Histology Exclusion Table                  AJCC Stage                  Lymph Nodes Size Table</p>
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**Ethmoid Sinus**

**CS Tumor Size**

**SEE STANDARD TABLE**

**Ethmoid Sinus**

**CS Extension**

Code	Description	TNM	SS77	SS2000
00	In situ; non-invasive; intraepithelial	Tis	IS	IS
12	Invasive tumor confined to left or right ethmoid sinus without bone erosion	T1	L	L
14	Confined to both ethmoid sinuses without bone erosion	T2	L	L
16	Confined to ethmoid, NOS without bone erosion	T1	L	L
22	Invasive tumor confined to either left or right ethmoid with bone erosion (cribriform plate)	T1	L	L
24	Confined ethmoid sinuses with bone erosion (cribriform plate)	T1	L	L
26	Confined ethmoid, NOS with bone erosion (cribriform plate)	T1	L	L
30	Localized, NOS	T1	L	L
40	More than one ethmoid sinus invaded WITH or WITHOUT bony involvement: Nasal cavity, NOS Floor Lateral wall Nasal vestibule Septum Turbinates	T2	RE	RE

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65	Maxillary sinus	T3	RE	RE
66	Cribriform plate Palate	T3	D	D
70	Anterior orbit Base of skull Frontal sinus Intracranial extension Minimum extension to anterior cranial fossa Nasopharynx Orbital extension including apex Pterygoid plate Skin of external nose or cheek Sphenoid	T4a	RE	RE
72	(66) + (70)	T4a	D	D
76	Brain Clivus Cranial nerves other than (V2) Dura Middle cranial fossa Nasopharynx Orbital extension including apex	T4b	RE	RE
78	(66) + (76)	T4b	D	D
80	Further contiguous extension	T4NOS	D	D
95	No evidence of primary tumor	T0	U	U
99	Unknown extension Primary tumor cannot be assessed Not documented in patient record	TX	U	U

**Ethmoid Sinus**

**CS TS/Ext-Eval**

**SEE STANDARD TABLE**

**Ethmoid Sinus**

**CS Lymph Nodes**

**Note 1:** For head and neck schemas, this field includes all lymph nodes defined as Levels I-VII and Other by AJCC. The complete definitions are provided in the General Instructions.

**Note 2:** For head and neck schemas, additional information about lymph nodes (size of involved nodes, extracapsular extension, and levels involved) is coded in Site-Specific Factors 1-6.

**Note 3:** If laterality of lymph nodes is not specified, assume nodes are ipsilateral. Midline nodes are considered ipsilateral.

**Note 4:** For head and neck cancers, if lymph nodes are described only as "supraclavicular", try to determine if they are in Level IV (deep to the sternocleidomastoid muscle, in the lower jugular chain) or Level V (in the posterior triangle, inferior to the transverse cervical artery) and code appropriately. If the specific level cannot be determined, consider them as Level V nodes.

Code	Description	TNM	SS77	SS2000
00	None; no regional lymph node involvement	N0	NONE	NONE

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10	<p>Single positive ipsilateral regional node:</p> <ul style="list-style-type: none"> <li>Level I node <ul style="list-style-type: none"> <li>Submandibular (submaxillary)</li> <li>Submental</li> </ul> </li> <li>Level II node <ul style="list-style-type: none"> <li>Jugulodigastric (subdigastric)</li> <li>Upper deep cervical</li> <li>Upper jugular</li> </ul> </li> <li>Level III node <ul style="list-style-type: none"> <li>Middle deep cervical</li> <li>Mid jugular</li> </ul> </li> <li>Level IV node <ul style="list-style-type: none"> <li>Jugulo-omohyoid (supraomohyoid)</li> <li>Lower deep cervical</li> <li>Lower jugular</li> </ul> </li> <li>Cervical, NOS</li> <li>Deep cervical, NOS</li> <li>Internal jugular, NOS</li> <li>Mandibular, NOS</li> <li>Regional lymph node, NOS</li> </ul>	*	RN	RN
12	<p>Single positive ipsilateral regional node:</p> <ul style="list-style-type: none"> <li>Level V node <ul style="list-style-type: none"> <li>Posterior cervical</li> <li>Posterior triangle (spinal accessory and transverse cervical) (upper, middle, and lower corresponding to the levels that define upper, middle, and lower jugular nodes)</li> </ul> </li> <li>Level VI node <ul style="list-style-type: none"> <li>Anterior deep cervical</li> <li>Laterotracheal</li> <li>Paralaryngeal</li> <li>Paratracheal</li> <li>Prelaryngeal</li> <li>Pretracheal</li> <li>Recurrent laryngeal</li> </ul> </li> <li>Level VII node <ul style="list-style-type: none"> <li>Upper mediastinum (for other mediastinal nodes see CS Mets at DX)</li> </ul> </li> <li>Other groups <ul style="list-style-type: none"> <li>Intraparotid</li> <li>Parapharyngeal</li> <li>Periparotid</li> <li>Retropharyngeal</li> <li>Sub-occipital</li> <li>Supraclavicular, NOS (See Note 4)</li> </ul> </li> </ul>	*	D	D
18	Stated as N1, no other information	N1	RN	RN
19	Stated as N2a, no other information	N2a	RN	RN
20	Multiple positive ipsilateral nodes listed in code 10	*	RN	RN
22	Multiple positive ipsilateral nodes listed in code 12	*	D	D
29	Stated as N2b, no other information	N2b	RN	RN
30	Regional lymph nodes as listed in code 10: Positive ipsilateral nodes(s), not stated if single or multiple or regional	*	RN	RN

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32	Regional lymph nodes as listed in code 12: Positive ipsilateral node(s), not stated if single or multiple	*	D	D
40	Regional lymph nodes as listed in code 10: Positive bilateral or contralateral nodes	*	RN	RN
42	Regional lymph nodes as listed in code 12: Positive bilateral or contralateral nodes	*	D	D
49	Stated as N2c, no other information	N2c	RN	RN
50	Regional lymph nodes as listed in code 10: Positive node(s), not stated if ipsilateral, or bilateral, or contralateral AND not stated if single or multiple	*	RN	RN
52	Regional lymph nodes as listed in code 12: Positive node(s), not stated if ipsilateral, or bilateral, or contralateral AND not stated if single or multiple	*	D	D
60	Stated as N2, NOS	N2NOS	RN	RN
70	Stated as N3, no other information	N3	RN	RN
80	Lymph nodes, NOS	*	RN	RN
99	Unknown; not stated Regional lymph node(s) cannot be assessed Not documented in patient record	NX	U	U

\*For codes 10, 12, 20, 22, 30, 32, 40, 42, 50, 52 and 80 ONLY, the N category is assigned based on the value of Site-Specific Factor 1, Size of Lymph Nodes, using the extra table, Lymph Nodes Size Table for this site.

**Ethmoid Sinus**

**CS Reg Nodes Eval**

**SEE STANDARD TABLE**

**Ethmoid Sinus**

**Reg LN Pos**

**SEE STANDARD TABLE**

**Ethmoid Sinus**

**Reg LN Exam**

**SEE STANDARD TABLE**

**Ethmoid Sinus**

**CS Mets at DX**

**SEE STANDARD TABLE**

**Ethmoid Sinus**

**CS Mets Eval**

**SEE STANDARD TABLE**

**Ethmoid Sinus**

**CS Site-Specific Factor 1 Size of Lymph Nodes**

**Note:** Code the largest diameter, whether measured clinically or pathologically, of any involved regional lymph node(s). Do not code the size of any nodes coded in CS Mets at DX.

Code	Description
000	No involved regional nodes
001-988	001-988 millimeters (code exact size in millimeters)
989	989 millimeters or larger
990	Microscopic focus or foci only, no size of focus given
991	Described as less than 1 cm
992	Described as less than 2 cm
993	Described as less than 3 cm
994	Described as less than 4 cm
995	Described as less than 5 cm
996	Described as less than 6 cm
997	Described as more than 6 cm
999	Regional lymph node(s) involved, size not stated Unknown if regional lymph node(s) involved Not documented in patient record

**Ethmoid Sinus**

**CS Site-Specific Factor 2 Extracapsular Extension, Lymph Nodes for Head and Neck**

**Note 1:** Code the status of extracapsular extension whether assessed clinically or pathologically of any involved regional lymph node(s) coded in the CS Lymph Nodes field. Do not code the status of any nodes coded in CS Mets at DX. Pathologic assessment takes priority over clinical assessment.

**Note 2:** According to AJCC (page 24), "Imaging studies showing amorphous spiculated margins of involved nodes or involvement of internodal fat resulting in loss of normal oval-to-round nodal shape strongly suggest extracapsular (extranodal) tumor spread; however, pathologic examination is necessary for documentation of the extent of such disease."

Code	Description
000	No extracapsular extension
001	Extracapsular extension clinically, not assessed pathologically Nodes described as "fixed", not assessed pathologically
005	Extracapsular extension present pathologically
888	Not applicable; no lymph node involvement
999	Unknown if regional lymph node(s) involved, not stated Regional lymph node(s) cannot be assessed Not documented in patient record

**Ethmoid Sinus**

**CS Site-Specific Factor 3 Levels I-III, Lymph Nodes for Head and Neck**

**Note:** Site-Specific Factors 3-6 are used to code the presence or absence of lymph node involvement in each of 7 different levels and other groups defined by AJCC. The definitions of the levels are the same for all applicable head and neck sites. One digit is used to represent lymph nodes of a single level, with the three digits of Site-Specific Factor 3 representing lymph nodes of, respectively, Levels I-III; the digits of Site-Specific Factor 4 representing lymph nodes of Levels IV and V and the retropharyngeal nodes; the digits of Site-Specific Factor 5 representing lymph nodes of Levels VI and VII and the facial nodes; and the digits of Site-Specific Factor 6 representing the remaining Other groups as defined by AJCC. In each digit, a code 1 means Yes, the nodes are involved.

Code	Description
000	No lymph node involvement in Levels I, II, or III
100	Level I lymph node(s) involved
010	Level II lymph node(s) involved
001	Level III lymph node(s) involved
110	Level I and II lymph nodes involved
101	Level I and III lymph nodes involved
011	Level II and III lymph nodes involved
111	Level I, II and III lymph nodes involved
999	Unknown if regional lymph node(s) involved, not stated Regional lymph node(s) cannot be assessed Not documented in patient record

**Ethmoid Sinus**

**CS Site-Specific Factor 4 Levels IV-V and Retropharyngeal Lymph Nodes for Head and Neck**

**Note:** Site-Specific Factors 3-6 are used to code the presence or absence of lymph node involvement in each of 7 different levels and other groups defined by AJCC. The definitions of the levels are the same for all applicable head and neck sites. One digit is used to represent lymph nodes of a single level, with the three digits of Site-Specific Factor 3 representing lymph nodes of, respectively, Levels I-III; the digits of Site-Specific Factor 4 representing lymph nodes of Levels IV and V and the retropharyngeal nodes; the digits of Site-Specific Factor 5 representing lymph nodes of Levels VI and VII and the facial nodes; and the digits of Site-Specific Factor 6 representing the remaining Other groups as defined by AJCC. In each digit, a code 1 means Yes, the nodes are involved.

Code	Description
000	No lymph node involvement in Levels IV or V or retropharyngeal
100	Level IV lymph node(s) involved
010	Level V lymph node(s) involved
001	Retropharyngeal nodes involved
110	Level IV and V lymph nodes involved
101	Level IV and retropharyngeal nodes involved
011	Level V and retropharyngeal nodes involved



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111	Level IV and V and retropharyngeal lymph nodes involved
999	Unknown if regional lymph node(s) involved, not stated Regional lymph node(s) cannot be assessed Not documented in patient record

**Ethmoid Sinus**

**CS Site-Specific Factor 5 Levels VI-VII and Facial Lymph Nodes for Head and Neck**

**Note:** Site-Specific Factors 3-6 are used to code the presence or absence of lymph node involvement in each of 7 different levels and other groups defined by AJCC. The definitions of the levels are the same for all applicable head and neck sites. One digit is used to represent lymph nodes of a single level, with the three digits of Site-Specific Factor 3 representing lymph nodes of, respectively, Levels I-III; the digits of Site-Specific Factor 4 representing lymph nodes of Levels IV and V and the retropharyngeal nodes; the digits of Site-Specific Factor 5 representing lymph nodes of Levels VI and VII and the facial nodes; and the digits of Site-Specific Factor 6 representing the remaining Other groups as defined by AJCC. In each digit, a code 1 means Yes, the nodes are involved.

Code	Description
000	No lymph node involvement in Levels VI or VII or facial nodes
100	Level VI lymph node(s) involved
010	Level VII lymph node(s) involved
001	Facial (buccinator, nasolabial) lymph node(s) involved
110	Level VI and VII lymph nodes involved
101	Level VI and facial (buccinator, nasolabial) nodes involved
011	Level VII and facial (buccinator, nasolabial) nodes involved
111	Level VI and VII and facial (buccinator, nasolabial) lymph nodes involved
999	Unknown if regional lymph node(s) involved, not stated Regional lymph node(s) cannot be assessed Not documented in patient record

**Ethmoid Sinus**

**CS Site-Specific Factor 6 Parapharyngeal, Parotid, Preauricular, and Sub-Occipital Lymph Nodes, Lymph Nodes for Head and Neck**

**Note:** Site-Specific Factors 3-6 are used to code the presence or absence of lymph node involvement in each of 7 different levels and other groups defined by AJCC. The definitions of the levels are the same for all applicable head and neck sites. One digit is used to represent lymph nodes of a single level, with the three digits of Site-Specific Factor 3 representing lymph nodes of, respectively, Levels I-III; the digits of Site-Specific Factor 4 representing lymph nodes of Levels IV and V and the retropharyngeal nodes; the digits of Site-Specific Factor 5 representing lymph nodes of Levels VI and VII and the facial nodes; and the digits of Site-Specific Factor 6 representing the remaining Other groups as defined by AJCC. In each digit, a code 1 means Yes, the nodes are involved.

Code	Description
000	No parapharyngeal, parotid (preauricular, periparotid, and/or intraparotid), or sub-occipital lymph node involvement
100	Parapharyngeal lymph node(s) involved
010	Parotid (preauricular, periparotid, and/or intraparotid) lymph node(s) involved

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001	Sub-occipital lymph node(s) involved
110	Parapharyngeal and parotid (preauricular, periparotid, and/or intraparotid) lymph nodes involved
101	Parapharyngeal and sub-occipital lymph nodes involved
011	Parotid (preauricular, periparotid, and/or intraparotid) and sub-occipital lymph nodes involved
111	Parapharyngeal, parotid (preauricular, periparotid, and/or intraparotid), and sub-occipital lymph nodes involved
999	Unknown if regional lymph node(s) involved, not stated Regional lymph node(s) cannot be assessed Not documented in patient record

**Collaborative Staging Codes**  
**Accessory (Paranasal) Sinuses**  
**C31.2-C31.3, C31.8-C31.9**

C31.2 Frontal sinus  
 C31.3 Sphenoid sinus  
 C31.8 Overlapping lesion of accessory sinuses  
 C31.9 Accessory sinus, NOS

**Note 1:** Laterality must be coded for Frontal sinus, C31.2

**Note 2:** AJCC does not define TNM staging for this site.

CS Tumor Size CS Extension CS TS/Ext-Eval CS Lymph Nodes CS Reg Nodes Eval Reg LN Pos Reg LN Exam CS Mets at DX CS Mets Eval	<b>CS Site-Specific Factor 1</b> - Size of Lymph Nodes <b>CS Site-Specific Factor 2</b> - Extracapsular Extension, Lymph Nodes for Head and Neck <b>CS Site-Specific Factor 3</b> - Levels I-III, Lymph Nodes for Head and Neck <b>CS Site-Specific Factor 4</b> - Levels IV-V and Retropharyngeal Lymph Nodes for Head and Neck <b>CS Site-Specific Factor 5</b> - Levels VI-VII and Facial Lymph Nodes for Head and Neck <b>CS Site-Specific Factor 6</b> - Parapharyngeal, Parotid, Preauricular, and Sub-Occipital Lymph Nodes, Lymph Nodes for Head and Neck	The following tables are available at the collaborative staging website: Histologies for Which AJCC Staging Is Not Generated AJCC Stage
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**Accessory (Paranasal) Sinuses**  
**CS Tumor Size**  
**SEE STANDARD TABLE**

**Accessory (Paranasal) Sinuses**  
**CS Extension**

Code	Description	TNM	SS77	SS2000
00	In situ; non-invasive; intraepithelial	NA	IS	IS
10	Invasive tumor confined to mucosa of one of the following: Frontal sinus Sphenoid sinus	NA	L	L
30	Localized, NOS	NA	L	L
40	More than one accessory sinus invaded Destruction of bony wall of sinus	NA	RE	RE
50	Palate Nasal cavity, NOS: Floor Lateral wall Septum Turbinates	NA	RE	RE

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60	Bone: Facial bones Maxilla Orbital structures Pterygoid fossa Zygoma	NA	RE	RE
70	Brain Cranial nerves Muscles: Masseter Pterygoid Nasopharynx Orbital contents, including eye Soft tissue Skin	NA	RE	RE
80	Further contiguous extension	NA	D	D
95	No evidence of primary tumor	NA	U	U
99	Unknown extension Primary tumor cannot be assessed Not documented in patient record	NA	U	U

**Accessory (Paranasal) Sinuses**

**CS TS/Ext-Eval**

Code	Description	Staging Basis
9	Not applicable for this site	NA

**Accessory (Paranasal) Sinuses**

**CS Lymph Nodes**

**Note 1:** For head and neck schemes, this field includes all lymph nodes defined as Levels I-VII and Other by AJCC. The complete definitions are provided in the General Instructions.

**Note 2:** For head and neck schemes, additional information about lymph nodes (size of involved nodes, extracapsular extension, and levels involved) is coded in Site-Specific Factors 1-6.

**Note 3:** If laterality of lymph nodes is not specified, assume nodes are ipsilateral. Midline nodes are considered ipsilateral.

**Note 4:** For head and neck cancers, if lymph nodes are described only as "supraclavicular", try to determine if they are in Level IV (deep to the sternocleidomastoid muscle, in the lower jugular chain) or Level V (in the posterior triangle, inferior to the transverse cervical artery) and code appropriately. If the specific level cannot be determined, consider them as Level V nodes.

Code	Description	TNM	SS77	SS2000
00	None; no regional lymph node involvement	NA	NONE	NONE
10	Single positive ipsilateral regional node: Level I node Sublingual Submandibular (submaxillary) Submental Level II node Jugulodigastric (subdigastric) Upper deep cervical Upper jugular	NA	RN	RN

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10, cont'd	Cervical, NOS Deep cervical, NOS Internal jugular, NOS Mandibular, NOS Retropharyngeal Regional lymph node, NOS			
12	Single positive ipsilateral regional node: Level III node Middle deep cervical Mid jugular Level IV node Jugulo-omohyoid (supramohyoid) Lower deep cervical Lower jugular Level V node Posterior cervical Posterior triangle (spinal accessory and transverse cervical) (upper, middle, and lower corresponding to the levels that define upper, middle, and lower jugular nodes) Level VI node Anterior deep cervical Laterotrachea Paralaryngeal Paratracheal Prelaryngeal Pretracheal Recurrent laryngeal Level VII node Upper mediastinum (for other mediastinal nodes see CS Mets at DX) Other groups Intraparotid Parapharyngeal Periparotid Retropharyngeal Sub-occipital Supraclavicular, NOS (See Note 4)	NA	D	D
80	Lymph nodes, NOS	NA	RN	RN
99	Unknown; not stated Regional lymph node(s) cannot be assessed Not documented in patient record	NA	U	U

**Accessory (Paranasal) Sinuses**

**CS Reg Nodes Eval**

Code	Description	Staging Basis
9	Not applicable for this site	NA

**Accessory (Paranasal) Sinuses**

**Reg LN Pos**

**SEE STANDARD TABLE**

**Accessory (Paranasal) Sinuses**

**Reg LN Exam**

**SEE STANDARD TABLE**

**Accessory (Paranasal) Sinuses**

**CS Mets at DX**

Code	Description	TNM	SS77	SS2000
00	No; none	NA	NONE	NONE
10	Distant lymph node(s), NOS	NA	D	D
40	Distant metastases except distant lymph node(s) (code 10) Distant metastasis, NOS Carcinomatosis	NA	D	D
50	(10) + (40) Distant lymph node(s) plus other distant metastases	NA	D	D
99	Unknown if distant metastasis Cannot be assessed Not documented in patient record	NA	U	U

**Accessory (Paranasal) Sinuses**

**CS Mets Eval**

Code	Description	Staging Basis
9	Not applicable for this site	NA

**Accessory (Paranasal) Sinuses**

**CS Site-Specific Factor 1 Size of Lymph Nodes**

**Note:** Code the largest diameter, whether measured clinically or pathologically, of any involved regional lymph node(s). Do not code the size of any nodes coded in CS Mets at DX.

Code	Description
000	No involved regional nodes
001-988	001-988 millimeters (code exact size in millimeters)
989	989 millimeters or larger
990	Microscopic focus or foci only, no size of focus given
991	Described as less than 1 cm
992	Described as less than 2 cm
993	Described as less than 3 cm
994	Described as less than 4 cm
995	Described as less than 5 cm
996	Described as less than 6 cm

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997	Described as more than 6 cm
999	Regional lymph node(s) involved, size not stated Unknown if regional lymph node(s) involved Not documented in patient record

**Accessory (Paranasal) Sinuses**

**CS Site-Specific Factor 2 Extracapsular Extension, Lymph Nodes for Head and Neck**

**Note 1:** Code the status of extracapsular extension whether assessed clinically or pathologically of any involved regional lymph node(s) coded in the CS Lymph Nodes field. Do not code the status of any nodes coded in CS Mets at DX. Pathologic assessment takes priority over clinical assessment.

**Note 2:** According to AJCC (page 24), "Imaging studies showing amorphous spiculated margins of involved nodes or involvement of internodal fat resulting in loss of normal oval-to-round nodal shape strongly suggest extracapsular (extranodal) tumor spread; however, pathologic examination is necessary for documentation of the extent of such disease."

Code	Description
000	No extracapsular extension
001	Extracapsular extension clinically, not assessed pathologically Nodes described as "fixed", not assessed pathologically
005	Extracapsular extension present pathologically
888	Not applicable; no lymph node involvement
999	Unknown if regional lymph node(s) involved, not stated Regional lymph node(s) cannot be assessed Not documented in patient record

**Accessory (Paranasal) Sinuses**

**CS Site-Specific Factor 3 Levels I-III, Lymph Nodes for Head and Neck**

**Note:** Site-Specific Factors 3-6 are used to code the presence or absence of lymph node involvement in each of 7 different levels and other groups defined by AJCC. The definitions of the levels are the same for all applicable head and neck sites. One digit is used to represent lymph nodes of a single level, with the three digits of Site-Specific Factor 3 representing lymph nodes of, respectively, Levels I-III; the digits of Site-Specific Factor 4 representing lymph nodes of Levels IV and V and the retropharyngeal nodes; the digits of Site-Specific Factor 5 representing lymph nodes of Levels VI and VII and the facial nodes; and the digits of Site-Specific Factor 6 representing the remaining Other groups as defined by AJCC. In each digit, a code 1 means Yes, the nodes are involved.

Code	Description
000	No lymph node involvement in Levels I, II, or III
100	Level I lymph node(s) involved
010	Level II lymph node(s) involved
001	Level III lymph node(s) involved
110	Level I and II lymph nodes involved
101	Level I and III lymph nodes involved
011	Level II and III lymph nodes involved
111	Level I, II and III lymph nodes involved

999	Unknown if regional lymph node(s) involved, not stated Regional lymph node(s) cannot be assessed Not documented in patient record
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**Accessory (Paranasal) Sinuses**

**CS Site-Specific Factor 4 Levels IV-V and Retropharyngeal Lymph Nodes for Head and Neck**

**Note:** Site-Specific Factors 3-6 are used to code the presence or absence of lymph node involvement in each of 7 different levels and other groups defined by AJCC. The definitions of the levels are the same for all applicable head and neck sites. One digit is used to represent lymph nodes of a single level, with the three digits of Site-Specific Factor 3 representing lymph nodes of, respectively, Levels I-III; the digits of Site-Specific Factor 4 representing lymph nodes of Levels IV and V and the retropharyngeal nodes; the digits of Site-Specific Factor 5 representing lymph nodes of Levels VI and VII and the facial nodes; and the digits of Site-Specific Factor 6 representing the remaining Other groups as defined by AJCC. In each digit, a code 1 means Yes, the nodes are involved.

Code	Description
000	No lymph node involvement in Levels IV or V or retropharyngeal
100	Level IV lymph node(s) involved
010	Level V lymph node(s) involved
001	Retropharyngeal nodes involved
110	Level IV and V lymph nodes involved
101	Level IV and retropharyngeal nodes involved
011	Level V and retropharyngeal nodes involved
111	Level IV and V and retropharyngeal lymph nodes involved
999	Unknown if regional lymph node(s) involved, not stated Regional lymph node(s) cannot be assessed Not documented in patient record

**Accessory (Paranasal) Sinuses**

**CS Site-Specific Factor 5 Levels VI-VII and Facial Lymph Nodes for Head and Neck**

**Note:** Site-Specific Factors 3-6 are used to code the presence or absence of lymph node involvement in each of 7 different levels and other groups defined by AJCC. The definitions of the levels are the same for all applicable head and neck sites. One digit is used to represent lymph nodes of a single level, with the three digits of Site-Specific Factor 3 representing lymph nodes of, respectively, Levels I-III; the digits of Site-Specific Factor 4 representing lymph nodes of Levels IV and V and the retropharyngeal nodes; the digits of Site-Specific Factor 5 representing lymph nodes of Levels VI and VII and the facial nodes; and the digits of Site-Specific Factor 6 representing the remaining Other groups as defined by AJCC. In each digit, a code 1 means Yes, the nodes are involved.

Code	Description
000	No lymph node involvement in Levels VI or VII or facial nodes
100	Level VI lymph node(s) involved
010	Level VII lymph node(s) involved
001	Facial (buccinator, nasolabial) lymph node(s) involved
110	Level VI and VII lymph nodes involved



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101	Level VI and facial (buccinator, nasolabial) nodes involved
011	Level VII and facial (buccinator, nasolabial) nodes involved
111	Level VI and VII and facial (buccinator, nasolabial) lymph nodes involved
999	Unknown if regional lymph node(s) involved, not stated Regional lymph node(s) cannot be assessed Not documented in patient record

**Accessory (Paranasal) Sinuses**

**CS Site-Specific Factor 6 Parapharyngeal, Parotid, Preauricular, and Sub-Occipital Lymph Nodes, Lymph Nodes for Head and Neck**

**Note:** Site-Specific Factors 3-6 are used to code the presence or absence of lymph node involvement in each of 7 different levels and other groups defined by AJCC. The definitions of the levels are the same for all applicable head and neck sites. One digit is used to represent lymph nodes of a single level, with the three digits of Site-Specific Factor 3 representing lymph nodes of, respectively, Levels I-III; the digits of Site-Specific Factor 4 representing lymph nodes of Levels IV and V and the retropharyngeal nodes; the digits of Site-Specific Factor 5 representing lymph nodes of Levels VI and VII and the facial nodes; and the digits of Site-Specific Factor 6 representing the remaining Other groups as defined by AJCC. In each digit, a code 1 means Yes, the nodes are involved.

Code	Description
000	No parapharyngeal, parotid (preauricular, periparotid, and/or intraparotid), or sub-occipital lymph node involvement
100	Parapharyngeal lymph node(s) involved
010	Parotid (preauricular, periparotid, and/or intraparotid) lymph node(s) involved
001	Sub-occipital lymph node(s) involved
110	Parapharyngeal and parotid (preauricular, periparotid, and/or intraparotid) lymph nodes involved
101	Parapharyngeal and sub-occipital lymph nodes involved
011	Parotid (preauricular, periparotid, and/or intraparotid) and sub-occipital lymph nodes involved
111	Parapharyngeal, parotid (preauricular, periparotid, and/or intraparotid), and sub-occipital lymph nodes involved
999	Unknown if regional lymph node(s) involved, not stated Regional lymph node(s) cannot be assessed Not documented in patient record

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**Site-Specific Surgery Codes**

**All Other Sites**

C142–C148, C170–C179, C239, C240–C249, C260–C269, C300–C301, **C310–C319**, C339, C379, C380–C388, C390–C399, C480–C488, C510–C519, C529, C570–C579, C589, C600–C609, C630–C639, C680–C689, C690–C699, C740–C749, C750–C759

(Except for M-9750, 9760-9764, 9800-9820, 9826, 9831-9920, 9931-9964, 9980-9989)

Codes

00 None; **no surgery** of primary site; **autopsy ONLY**

10 Local tumor destruction, NOS

11 Photodynamic therapy (PDT)

12 Electrocautery; fulguration (includes use of hot forceps for tumor destruction)

13 Cryosurgery

14 Laser

No specimen sent to **pathology** from surgical events 10–14

20 **Local tumor excision**, NOS

26 Polypectomy

27 Excisional biopsy

Any **combination** of 20 or 26–27 WITH

21 Photodynamic therapy (PDT)

22 Electrocautery

23 Cryosurgery

24 Laser ablation

25 Laser excision

[**SEER Note:** Codes 21 to 25 above combine 20 local tumor excision, 26 Polypectomy or 27 Excisional biopsy with 21 PDT, 22 Electrocautery, 23 Cryosurgery, 24 Laser ablation, or 25 Laser excision]

**Specimen** sent to **pathology** from surgical events 20–27

30 Simple/partial surgical removal of primary site

40 **Total surgical removal** of primary site; enucleation

41 Total enucleation (for eye surgery only)

50 Surgery stated to be “**debulking**”

60 Radical surgery

Partial or total removal of the primary site WITH a resection in continuity (partial or total removal) with other organs

[**SEER Note:** In continuity with or “en bloc” means that all of the tissues were removed during the same procedure, but not necessarily in a single specimen]

90 Surgery, NOS

99 **Unknown** if surgery performed; **death certificate ONLY**

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**Collaborative Staging Codes**

**Glottic Larynx**

**C32.0**

C32.0 Glottis

CS Tumor Size	<b>CS Site-Specific Factor 1 - Size of Lymph Nodes</b>	The following tables are available at the collaborative staging website: Histology Exclusion Table AJCC Stage Lymph Nodes Size Table
CS Extension	<b>CS Site-Specific Factor 2 - Extracapsular Extension, Lymph Nodes for Head and Neck</b>	
CS TS/Ext-Eval	<b>CS Site-Specific Factor 3 - Levels I-III, Lymph Nodes for Head and Neck</b>	
CS Lymph Nodes	<b>CS Site-Specific Factor 4 - Levels IV-V and Retropharyngeal Lymph Nodes for Head and Neck</b>	
CS Reg Nodes Eval	<b>CS Site-Specific Factor 5 - Levels VI-VII and Facial Lymph Nodes for Head and Neck</b>	
Reg LN Pos	<b>CS Site-Specific Factor 6 - Parapharyngeal, Parotid, Preauricular, and Sub-Occipital Lymph Nodes, Lymph Nodes for Head and Neck</b>	
Reg LN Exam		
CS Mets at DX		
CS Mets Eval		

**Glottic Larynx**

**CS Tumor Size**

SEE STANDARD TABLE

**Glottic Larynx**

**CS Extension**

Code	Description	TNM	SS77	SS2000
00	In situ; noninvasive; intraepithelial	Tis	IS	IS
10	Invasive tumor with normal vocal cord mobility Confined to glottis, NOS; intrinsic larynx; laryngeal commissure(s) anterior, posterior; vocal cord(s), NOS, true vocal cord(s), true cord(s)	T1NOS	L	L
11	One vocal cord	T1a	L	L
12	Both vocal cords	T1b	L	L
30	Tumor involves adjacent regions(s) of larynx: Subglottis Supraglottis False vocal cord (s)	T2	L	L
35	Impaired vocal cord mobility	T2	L	L
40	Tumor limited to larynx WITH vocal cord fixation Involvement of intrinsic muscle(s): Aryepiglottic: Corniculate tubercle Cuneiform tubercle	T3	L	L

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40, cont'd	Arytenoid Cricoarytenoid Cricothyroid Thyroarytenoid Thyroepiglottic Vocalis			
45	Localized, NOS	T1NOS	L	L
51	Paraglottic space	T3	RE	RE
52	Minor thyroid cartilage erosion (e.g., inner cortex)	T3	RE	D
60	Base of tongue Hypopharynx, NOS Postcricoid area Pre-epiglottic tissues Pyriform sinus Vallecula	T4a	RE	RE
68	Extension to/through Cricoid cartilage Thyroid cartilage except minor erosion, see code 52	T4a	RE	D
70	Extension to/through tissues beyond larynx: Extrinsic (strap) muscles: Omohyoid Sternohyoid Sternothyroid Thyrohyoid Oropharynx Skin Soft tissue of neck Thyroid gland Trachea	T4a	D	D
71	Cervical esophagus	T4a	D	D
73	Deep extrinsic muscle(s) of tongue	T4a	D	D
80	Further contiguous extension, including: Mediastinal structures Prevertebral space Tumor encases carotid artery	T4b	D	D
95	No evidence of primary tumor	T0	U	U
99	Unknown extension Primary tumor cannot be assessed Not documented in patient record	TX	U	U

**Glottic Larynx**  
**CS TS/Ext-Eval**  
**SEE STANDARD TABLE**

**Glottic Larynx**

**CS Lymph Nodes**

**Note 1:** For head and neck schemas, this field includes all lymph nodes defined as Levels I-VII and Other by AJCC. The complete definitions are provided in the General Instructions.

**Note 2:** For head and neck schemas, additional information about lymph nodes (size of involved nodes, extracapsular extension, and levels involved) is coded in Site-Specific Factors 1-6.

**Note 3:** If laterality of lymph nodes is not specified, assume nodes are ipsilateral. Midline nodes are considered ipsilateral.

**Note 4:** For head and neck cancers, if lymph nodes are described only as "supraclavicular", try to determine if they are in Level IV (deep to the sternocleidomastoid muscle, in the lower jugular chain) or Level V (in the posterior triangle, inferior to the transverse cervical artery) and code appropriately. If the specific level cannot be determined, consider them as Level V nodes.

Code	Description	TNM	SS77	SS2000
00	None; no regional lymph node involvement	N0	NON E	NONE
10	Single positive ipsilateral regional node: Level II Jugulodigastric (subdigastric) Upper deep cervical Upper jugular Level III Middle deep cervical Mid-jugular Level IV Jugulo-omohyoid (supraomohyoid) Lower deep cervical Lower jugular Level VI Anterior deep cervical Delphian node Laterotracheal Paralaryngeal Paratracheal Prelaryngeal (Delphian) Pretracheal Recurrent laryngeal Cervical, NOS Deep cervical, NOS Internal jugular NOS: Regional lymph node, NOS Stated as N1, NOS	*	RN	RN
11	Single positive ipsilateral regional node: Level I Submandibular (submaxillary) Submental Other groups Retropharyngeal Mandibular, NOS	*	D	RN
12	Single positive ipsilateral regional node: Level V node Posterior cervical Posterior triangle (spinal accessory and transverse cervical) (upper, middle, and lower corresponding to the levels that define upper, middle, and lower jugular nodes) Level VII node Upper mediastinum (for other mediastinal nodes see CS Mets at DX)	*	D	RN

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12 cont'd	Other groups Intraparotid Parapharyngeal Periparotid Sub-occipital Supraclavicular, NOS (See Note 4)			
18	Stated as N1, no other information	N1	RN	RN
19	Stated as N2a, no other information	N2a	RN	RN
20	Multiple positive ipsilateral nodes listed in code 10	*	RN	RN
21	Multiple positive ipsilateral nodes listed in code 11	*	D	RN
22	Multiple positive ipsilateral nodes listed in code 12	*	D	D
29	Stated as N2b, no other information	N2b	RN	RN
30	Regional lymph nodes as listed in code 10: Positive ipsilateral node(s), not stated if single or multiple	*	RN	RN
31	Regional lymph nodes as listed in code 11: Positive ipsilateral node(s), not stated if single or multiple	*	D	RN
32	Regional lymph nodes as listed in code 12: Positive ipsilateral node(s), not stated if single or multiple	*	D	D
40	Regional lymph nodes as listed in code 10: Positive bilateral or contralateral nodes	*	RN	RN
41	Regional lymph nodes as listed in code 11: Positive bilateral or contralateral nodes	*	D	RN
42	Regional lymph nodes as listed in code 12: Positive bilateral or contralateral nodes	*	D	D
49	Stated as N2c, no other information	N2c	RN	RN
50	Regional lymph nodes as listed in code 10: Positive node(s) not stated if ipsilateral, or bilateral, or contralateral AND not stated if single or multiple	*	RN	RN
51	Regional lymph nodes as listed in code 11: Positive node(s) not stated if ipsilateral, or bilateral, or contralateral AND not stated if single or multiple	*	D	RN
52	Regional lymph nodes as listed in code 12: Positive node(s), not stated if ipsilateral, or bilateral, or contralateral AND not stated if single or multiple	*	D	D
60	Stated as N2NOS	N2NOS	RN	RN
70	Stated as N3, no other information	N3	RN	RN
80	Lymph nodes, NOS, no other information	*	RN	RN
99	Unknown; not stated Regional lymph node(s) cannot be assessed Not documented in patient record	NX	U	U

\* For codes 10-12, 20-22, 30-32, 40-42, 50-52, and 80 ONLY, the N category is assigned based on the value of Site-Specific Factor 1, Size of Lymph Nodes, using the extra table, Lymph Nodes Size Table for this site.



**Glottic Larynx**  
**CS Reg Nodes Eval**  
**SEE STANDARD TABLE**

**Glottic Larynx**  
**Reg LN Pos**  
**SEE STANDARD TABLE**

**Glottic Larynx**  
**Reg LN Exam**  
**SEE STANDARD TABLE**

**Glottic Larynx**  
**CS Mets at DX**

**Note:** Supraclavicular and transverse cervical lymph nodes are now coded in CS Lymph Nodes because they are categorized as N rather than M in AJCC TNM. Any cases coded to 10 or 50 can be reviewed and recoded. The volume of cases affected should be small.

Code	Description	TNM	SS77	SS2000
00	No; none	M0	NONE	NONE
10	Distant lymph node(s) Mediastinal Distant lymph node(s), NOS	M1	D	D
40	Distant metastases except distant lymph node(s) (code 10) Distant metastasis, NOS Carcinomatosis	M1	D	D
50	(10) + (40) Distant lymph node(s) plus other distant metastases	M1	D	D
99	Unknown if distant metastasis Distant metastasis cannot be assessed Not documented in patient record	MX	U	U

**Glottic Larynx**  
**CS Mets Eval**  
**SEE STANDARD TABLE**

**Glottic Larynx**  
**CS Site-Specific Factor 1 Size of Lymph Nodes**

**Note:** Code the largest diameter, whether measured clinically or pathologically, of any involved regional lymph node(s). Do not code the size of any nodes coded in CS Mets at DX.

Code	Description
000	No involved regional nodes
001-988	001-988 millimeters (code exact size in millimeters)
989	989 millimeters or larger
990	Microscopic focus or foci only, no size of focus given
991	Described as less than 1 cm

992	Described as less than 2 cm
993	Described as less than 3 cm
994	Described as less than 4 cm
995	Described as less than 5 cm
996	Described as less than 6 cm
997	Described as more than 6 cm
999	Regional lymph node(s) involved, size not stated Unknown if regional lymph node(s) involved Not documented in patient record

**Glottic Larynx**

**CS Site-Specific Factor 2 Extracapsular Extension, Lymph Nodes for Head and Neck**

**Note 1:** Code the status of extracapsular extension whether assessed clinically or pathologically of any involved regional lymph node(s) coded in the CS Lymph Nodes field. Do not code the status of any nodes coded in CS Mets at DX. Pathologic assessment takes priority over clinical assessment.

**Note 2:** According to AJCC (page 24), "Imaging studies showing amorphous spiculated margins of involved nodes or involvement of internodal fat resulting in loss of normal oval-to-round nodal shape strongly suggest extracapsular (extranodal) tumor spread; however, pathologic examination is necessary for documentation of the extent of such disease."

Code	Description
000	No extracapsular extension
001	Extracapsular extension clinically, not assessed pathologically Nodes described as "fixed", not assessed pathologically
005	Extracapsular extension present pathologically
888	Not applicable; no lymph node involvement
999	Unknown if regional lymph node(s) involved, not stated Regional lymph node(s) cannot be assessed Not documented in patient record

**Glottic Larynx**

**CS Site-Specific Factor 3 Levels I-III, Lymph Nodes for Head and Neck**

**Note:** Site-Specific Factors 3-6 are used to code the presence or absence of lymph node involvement in each of 7 different levels and other groups defined by AJCC. The definitions of the levels are the same for all applicable head and neck sites. One digit is used to represent lymph nodes of a single level, with the three digits of Site-Specific Factor 3 representing lymph nodes of, respectively, Levels I-III; the digits of Site-Specific Factor 4 representing lymph nodes of Levels IV and V and the retropharyngeal nodes; the digits of Site-Specific Factor 5 representing lymph nodes of Levels VI and VII and the facial nodes; and the digits of Site-Specific Factor 6 representing the remaining Other groups as defined by AJCC. In each digit, a code 1 means Yes, the nodes are involved.

Code	Description
000	No lymph node involvement in Levels I, II, or III
100	Level I lymph node(s) involved
010	Level II lymph node(s) involved
001	Level III lymph node(s) involved
110	Level I and II lymph nodes involved

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101	Level I and III lymph nodes involved
011	Level II and III lymph nodes involved
111	Level I, II and III lymph nodes involved
999	Unknown if regional lymph node(s) involved, not stated Regional lymph node(s) cannot be assessed Not documented in patient record

**Glottic Larynx**

**CS Site-Specific Factor 4 Levels IV-V and Retropharyngeal Lymph Nodes for Head and Neck**

**Note:** Site-Specific Factors 3-6 are used to code the presence or absence of lymph node involvement in each of 7 different levels and other groups defined by AJCC. The definitions of the levels are the same for all applicable head and neck sites. One digit is used to represent lymph nodes of a single level, with the three digits of Site-Specific Factor 3 representing lymph nodes of, respectively, Levels I-III; the digits of Site-Specific Factor 4 representing lymph nodes of Levels IV and V and the retropharyngeal nodes; the digits of Site-Specific Factor 5 representing lymph nodes of Levels VI and VII and the facial nodes; and the digits of Site-Specific Factor 6 representing the remaining Other groups as defined by AJCC. In each digit, a code 1 means Yes, the nodes are involved.

Code	Description
000	No lymph node involvement in Levels IV or V or retropharyngeal
100	Level IV lymph node(s) involved
010	Level V lymph node(s) involved
001	Retropharyngeal nodes involved
110	Level IV and V lymph nodes involved
101	Level IV and retropharyngeal nodes involved
011	Level V and retropharyngeal nodes involved
111	Level IV and V and retropharyngeal lymph nodes involved
999	Unknown if regional lymph node(s) involved, not stated Regional lymph node(s) cannot be assessed Not documented in patient record

**Glottic Larynx**

**CS Site-Specific Factor 5 Levels VI-VII and Facial Lymph Nodes for Head and Neck**

**Note:** Site-Specific Factors 3-6 are used to code the presence or absence of lymph node involvement in each of 7 different levels and other groups defined by AJCC. The definitions of the levels are the same for all applicable head and neck sites. One digit is used to represent lymph nodes of a single level, with the three digits of Site-Specific Factor 3 representing lymph nodes of, respectively, Levels I-III; the digits of Site-Specific Factor 4 representing lymph nodes of Levels IV and V and the retropharyngeal nodes; the digits of Site-Specific Factor 5 representing lymph nodes of Levels VI and VII and the facial nodes; and the digits of Site-Specific Factor 6 representing the remaining Other groups as defined by AJCC. In each digit, a code 1 means Yes, the nodes are involved.

Code	Description
000	No lymph node involvement in Levels VI or VII or facial nodes
100	Level VI lymph node(s) involved

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010	Level VII lymph node(s) involved
001	Facial (buccinator, nasolabial) lymph node(s) involved
110	Level VI and VII lymph nodes involved
101	Level VI and facial (buccinator, nasolabial) nodes involved
011	Level VII and facial (buccinator, nasolabial) nodes involved
111	Level VI and VII and facial (buccinator, nasolabial) lymph nodes involved
999	Unknown if regional lymph node(s) involved, not stated Regional lymph node(s) cannot be assessed Not documented in patient record

**Glottic Larynx**

**CS Site-Specific Factor 6 Parapharyngeal, Parotid, Preauricular, and Sub-Occipital Lymph Nodes, Lymph Nodes for Head and Neck**

**Note:** Site-Specific Factors 3-6 are used to code the presence or absence of lymph node involvement in each of 7 different levels and other groups defined by AJCC. The definitions of the levels are the same for all applicable head and neck sites. One digit is used to represent lymph nodes of a single level, with the three digits of Site-Specific Factor 3 representing lymph nodes of, respectively, Levels I-III; the digits of Site-Specific Factor 4 representing lymph nodes of Levels IV and V and the retropharyngeal nodes; the digits of Site-Specific Factor 5 representing lymph nodes of Levels VI and VII and the facial nodes; and the digits of Site-Specific Factor 6 representing the remaining Other groups as defined by AJCC. In each digit, a code 1 means Yes, the nodes are involved.

Code	Description
000	No parapharyngeal, parotid (preauricular, periparotid, and/or intraparotid), or sub-occipital lymph node involvement
100	Parapharyngeal lymph node(s) involved
010	Parotid (preauricular, periparotid, and/or intraparotid) lymph node(s) involved
001	Sub-occipital lymph node(s) involved
110	Parapharyngeal and parotid (preauricular, periparotid, and/or intraparotid) lymph nodes involved
101	Parapharyngeal and sub-occipital lymph nodes involved
011	Parotid (preauricular, periparotid, and/or intraparotid) and sub-occipital lymph nodes involved
111	Parapharyngeal, parotid (preauricular, periparotid, and/or intraparotid), and sub-occipital lymph nodes involved
999	Unknown if regional lymph node(s) involved, not stated Regional lymph node(s) cannot be assessed Not documented in patient record

**Collaborative Staging Codes**

**Supraglottic Larynx**

**C32.1**

C32.1 Supraglottis

**Note:** Excludes Anterior Surface of Epiglottis - see separate schema (C10.1).

<p>CS Tumor Size                  CS Extension                  CS TS/Ext-Eval                  CS Lymph Nodes                  CS Reg Nodes Eval                  Reg LN Pos                  Reg LN Exam                  CS Mets at DX                  CS Mets Eval</p>	<p><b>CS Site-Specific Factor 1</b> - Size of Lymph Nodes  <b>CS Site-Specific Factor 2</b> - Extracapsular Extension, Lymph Nodes for Head and Neck  <b>CS Site-Specific Factor 3</b> - Levels I-III, Lymph Nodes for Head and Neck  <b>CS Site-Specific Factor 4</b> - Levels IV-V and Retropharyngeal Lymph Nodes for Head and Neck  <b>CS Site-Specific Factor 5</b> - Levels VI-VII and Facial Lymph Nodes for Head and Neck  <b>CS Site-Specific Factor 6</b> - Parapharyngeal, Parotid, Preauricular, and Sub-Occipital Lymph Nodes, Lymph Nodes for Head and Neck</p>	<p>The following tables are available at the collaborative staging website:                  Histology Exclusion Table                  AJCC Stage                  Lymph Nodes Size Table</p>
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**Supraglottic Larynx**

**CS Tumor Size**

**SEE STANDARD TABLE**

**Supraglottic Larynx**

**CS Extension**

Code	Description	TNM	SS77	SS2000
00	In situ; noninvasive; intraepithelial	Tis	IS	IS
10	Invasive tumor with normal vocal cord mobility confined to: Supraglottis (one subsite): Aryepiglottic fold Arytenoid cartilage Corniculate cartilage Cuneiform cartilage Epilarynx, NOS False cords Ventricular bands Ventricular cavity Ventricular fold Infrahyoid epiglottis Laryngeal cartilage, NOS Laryngeal (posterior) surface of epiglottis Suprahyoid epiglottis (including tip, lingual {anterior} and laryngeal surfaces)	T1	L	L
20	Tumor involves more than one subsite of supraglottis WITHOUT fixation or NOS	T2	L	L
30	Tumor involves adjacent region(s) of larynx	T2	L	L

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35	Impaired vocal cord mobility	T2	L	L
40	Tumor limited to larynx WITH vocal cord fixation	T3	L	L
45	Localized, NOS	T1	L	L
52	Paraglottic space	T3	RE	RE
60	Tumor involves region outside the supraglottis WITHOUT fixation, including: Medial wall of pyriform sinus Mucosa of base of tongue Vallecula	T2	RE	RE
62	Code 60 WITH fixation	T3	RE	RE
65	Hypopharynx, NOS Postcricoid area Pre-epiglottic tissues	T3	RE	RE
66	Deep base of tongue	T3	RE	RE
67	Cricoid cartilage	T3	RE	RE
68	Minor thyroid cartilage erosion (e.g., inner cortex)	T3	RE	D
70	Extension to/through: Esophagus Oropharynx Soft tissues of neck Thyroid cartilage (except minor erosion, see code 68) Thyroid gland	T4a	D	D
72	Extension to/through: Extrinsic (strap) muscle(s) Omohyoid Sternohyoid Sternothyroid Thyrohyoid Skin	T4a	D	D
73	Extension to/through: Deep extrinsic muscle of tongue Trachea	T4a	D	D
80	Further contiguous extension, including: Mediastinal structures Prevertebral space Tumor encases carotid artery	T4b	D	D
95	No evidence of primary tumor	T0	U	U
99	Unknown extension Primary tumor cannot be assessed Not documented in patient record	TX	U	U

**Supraglottic Larynx**  
**CS TS/Ext-Eval**  
**SEE STANDARD TABLE**

**Supraglottic Larynx**

**CS Lymph Nodes**

**Note 1:** For head and neck schemas, this field includes all lymph nodes defined as Levels I-VII and Other by AJCC. The complete definitions are provided in the General Instructions.

**Note 2:** For head and neck schemas, additional information about lymph nodes (size of involved nodes, extracapsular extension, and levels involved) is coded in Site-Specific Factors 1-6.

**Note 3:** If laterality of lymph nodes is not specified, assume nodes are ipsilateral. Midline nodes are considered ipsilateral.

**Note 4:** For head and neck cancers, if lymph nodes are described only as "supraclavicular", try to determine if they are in Level IV (deep to the sternocleidomastoid muscle, in the lower jugular chain) or Level V (in the posterior triangle, inferior to the transverse cervical artery) and code appropriately. If the specific level cannot be determined, consider them as Level V nodes.

Code	Description	TNM	SS77	SS2000
00	None; no regional lymph node involvement	N0	NONE	NONE
10	Single positive ipsilateral regional node: Level II Jugulodigastric (subdigastric) Upper deep cervical Upper jugular Level III Middle deep cervical Mid-jugular Level VI Anterior deep cervical Delphian node Laterotracheal Paralaryngeal Paratracheal Prelaryngeal Pretracheal Recurrent laryngeal Cervical, NOS Deep cervical, NOS Internal jugular, NOS: Regional lymph node, NOS Stated as N1, NOS	*	RN	RN
11	Single positive ipsilateral regional node: Level I Submandibular (submaxillary) Submental Other groups Retropharyngeal Mandibular, NOS	*	D	RN
12	Single positive ipsilateral regional node: Level V node Posterior cervical Posterior triangle (spinal accessory and transverse cervical) (upper, middle, and lower corresponding to the levels that define upper, middle, and lower jugular nodes) Level VII node Upper mediastinum (for other mediastinal nodes see CS Mets at DX)	*	D	D

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12 cont'd	Other groups Intraparotid Parapharyngeal Periparotid Sub-occipital Supraclavicular, NOS (See Note 4)			
18	Stated as N1, no other information	N1	RN	RN
19	Stated as N2a, no other information	N2a	RN	RN
20	Multiple positive ipsilateral nodes listed in code 10	*	RN	RN
21	Multiple positive ipsilateral nodes listed in code 11	*	D	RN
22	Multiple positive ipsilateral nodes listed in code 12	*	D	D
29	Stated as N2b, no other information	N2b	RN	RN
30	Regional lymph nodes as listed in code 10: Positive ipsilateral node(s), not stated if single or multiple	*	RN	RN
31	Regional lymph nodes as listed in code 11: Positive ipsilateral node(s), not stated if single or multiple	*	D	RN
32	Regional lymph nodes as listed in code 12: Positive ipsilateral node(s), not stated if single or multiple	*	D	D
40	Regional lymph nodes as listed in code 10: Positive bilateral or contralateral nodes	*	RN	RN
41	Regional lymph nodes as listed in code 11: Positive bilateral or contralateral nodes	*	D	RN
42	Regional lymph nodes as listed in code 12: Positive bilateral or contralateral nodes	*	D	D
49	Stated as N2c, no other information	N2c	RN	RN
50	Regional lymph nodes as listed in code 10: Positive node(s) not stated if ipsilateral, or bilateral, or contralateral AND not stated if single or multiple	*	RN	RN
51	Regional lymph nodes as listed in code 11: Positive node(s) not stated if ipsilateral, or bilateral, or contralateral AND not stated if single or multiple	*	D	RN
52	Regional lymph nodes as listed in code 12: Positive node(s), not stated if ipsilateral, or bilateral, or contralateral AND not stated if single or multiple	*	D	D
60	Stated as N2, NOS	N2NOS	RN	RN
70	Stated as N3, no other information	N3	RN	RN
80	Lymph nodes, NOS, no other information	*	RN	RN
99	Unknown; not stated Regional lymph node(s) cannot be assessed Not documented in patient record	NX	U	U

\* For codes 10-12, 20-22, 30-32, 40-42, 50-52, and 80 ONLY, the N category is assigned based on the value of Site-Specific Factor 1, Size of Lymph Nodes, using the extra table, Lymph Nodes Size Table for this site.



**Supraglottic Larynx**  
**CS Reg Nodes Eval**  
**SEE STANDARD TABLE**

**Supraglottic Larynx**  
**Reg LN Pos**  
**SEE STANDARD TABLE**

**Supraglottic Larynx**  
**Reg LN Exam**  
**SEE STANDARD TABLE**

**Supraglottic Larynx**  
**CS Mets at DX**

**Note:** Supraclavicular and transverse cervical lymph nodes are now coded in CS Lymph Nodes because they are categorized as N rather than M in AJCC TNM. Any cases coded to 10 or 50 can be reviewed and recoded. The volume of cases affected should be small.

Code	Description	TNM	SS77	SS2000
00	No; none	M0	NONE	NONE
10	Distant lymph node(s) Mediastinal Supraclavicular (transverse cervical) Distant lymph node(s), NOS	M1	D	D
40	Distant metastases except distant lymph node(s) (code 10) Distant metastasis, NOS Carcinomatosis	M1	D	D
50	(10) + (40) Distant lymph node(s) plus other distant metastases	M1	D	D
99	Unknown if distant metastasis Distant metastasis cannot be assessed Not documented in patient record	MX	U	U

**Supraglottic Larynx**  
**CS Mets Eval**  
**SEE STANDARD TABLE**

**Supraglottic Larynx**  
**CS Site-Specific Factor 1 Size of Lymph Nodes**

**Note:** Code the largest diameter, whether measured clinically or pathologically, of any involved regional lymph node(s). Do not code the size of any nodes coded in CS Mets at DX.

Code	Description
000	No involved regional nodes
001-988	001-988 millimeters (code exact size in millimeters)
989	989 millimeters or larger
990	Microscopic focus or foci only, no size of focus given

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991	Described as less than 1 cm
992	Described as less than 2 cm
993	Described as less than 3 cm
994	Described as less than 4 cm
995	Described as less than 5 cm
996	Described as less than 6 cm
997	Described as more than 6 cm
999	Regional lymph node(s) involved, size not stated Unknown if regional lymph node(s) involved Not documented in patient record

**Supraglottic Larynx**

**CS Site-Specific Factor 2 Extracapsular Extension, Lymph Nodes for Head and Neck**

**Note 1:** Code the status of extracapsular extension whether assessed clinically or pathologically of any involved regional lymph node(s) coded in the CS Lymph Nodes field. Do not code the status of any nodes coded in CS Mets at DX. Pathologic assessment takes priority over clinical assessment.

**Note 2:** According to AJCC (page 24), "Imaging studies showing amorphous spiculated margins of involved nodes or involvement of internodal fat resulting in loss of normal oval-to-round nodal shape strongly suggest extracapsular (extranodal) tumor spread; however, pathologic examination is necessary for documentation of the extent of such disease."

Code	Description
000	No extracapsular extension
001	Extracapsular extension clinically, not assessed pathologically Nodes described as "fixed", not assessed pathologically
005	Extracapsular extension present pathologically
888	Not applicable; no lymph node involvement
999	Unknown if regional lymph node(s) involved, not stated Regional lymph node(s) cannot be assessed Not documented in patient record

**Supraglottic Larynx**

**CS Site-Specific Factor 3 Levels I-III, Lymph Nodes for Head and Neck**

**Note:** Site-Specific Factors 3-6 are used to code the presence or absence of lymph node involvement in each of 7 different levels and other groups defined by AJCC. The definitions of the levels are the same for all applicable head and neck sites. One digit is used to represent lymph nodes of a single level, with the three digits of Site-Specific Factor 3 representing lymph nodes of, respectively, Levels I-III; the digits of Site-Specific Factor 4 representing lymph nodes of Levels IV and V and the retropharyngeal nodes; the digits of Site-Specific Factor 5 representing lymph nodes of Levels VI and VII and the facial nodes; and the digits of Site-Specific Factor 6 representing the remaining Other groups as defined by AJCC. In each digit, a code 1 means Yes, the nodes are involved.

Code	Description
000	No lymph node involvement in Levels I, II, or III
100	Level I lymph node(s) involved
010	Level II lymph node(s) involved

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001	Level III lymph node(s) involved
110	Level I and II lymph nodes involved
101	Level I and III lymph nodes involved
011	Level II and III lymph nodes involved
111	Level I, II and III lymph nodes involved
999	Unknown if regional lymph node(s) involved, not stated Regional lymph node(s) cannot be assessed Not documented in patient record

**Supraglottic Larynx**

**CS Site-Specific Factor 4 Levels IV-V and Retropharyngeal Lymph Nodes for Head and Neck**

**Note:** Site-Specific Factors 3-6 are used to code the presence or absence of lymph node involvement in each of 7 different levels and other groups defined by AJCC. The definitions of the levels are the same for all applicable head and neck sites. One digit is used to represent lymph nodes of a single level, with the three digits of Site-Specific Factor 3 representing lymph nodes of, respectively, Levels I-III; the digits of Site-Specific Factor 4 representing lymph nodes of Levels IV and V and the retropharyngeal nodes; the digits of Site-Specific Factor 5 representing lymph nodes of Levels VI and VII and the facial nodes; and the digits of Site-Specific Factor 6 representing the remaining Other groups as defined by AJCC. In each digit, a code 1 means Yes, the nodes are involved.

Code	Description
000	No lymph node involvement in Levels IV or V or retropharyngeal
100	Level IV lymph node(s) involved
010	Level V lymph node(s) involved
001	Retropharyngeal nodes involved
110	Level IV and V lymph nodes involved
101	Level IV and retropharyngeal nodes involved
011	Level V and retropharyngeal nodes involved
111	Level IV and V and retropharyngeal lymph nodes involved
999	Unknown if regional lymph node(s) involved, not stated Regional lymph node(s) cannot be assessed Not documented in patient record

**Supraglottic Larynx**

**CS Site-Specific Factor 5 Levels VI-VII and Facial Lymph Nodes for Head and Neck**

**Note:** Site-Specific Factors 3-6 are used to code the presence or absence of lymph node involvement in each of 7 different levels and other groups defined by AJCC. The definitions of the levels are the same for all applicable head and neck sites. One digit is used to represent lymph nodes of a single level, with the three digits of Site-Specific Factor 3 representing lymph nodes of, respectively, Levels I-III; the digits of Site-Specific Factor 4 representing lymph nodes of Levels IV and V and the retropharyngeal nodes; the digits of Site-Specific Factor 5 representing lymph nodes of Levels VI and VII and the facial nodes; and the digits of Site-Specific Factor 6 representing the remaining Other groups as defined by AJCC. In each digit, a code 1 means Yes, the nodes are involved.

*table begins on next page*

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Code	Description
000	No lymph node involvement in Levels VI or VII or facial nodes
100	Level VI lymph node(s) involved
010	Level VII lymph node(s) involved
001	Facial (buccinator, nasolabial) lymph node(s) involved
110	Level VI and VII lymph nodes involved
101	Level VI and facial (buccinator, nasolabial) nodes involved
011	Level VII and facial (buccinator, nasolabial) nodes involved
111	Level VI and VII and facial (buccinator, nasolabial) lymph nodes involved
999	Unknown if regional lymph node(s) involved, not stated Regional lymph node(s) cannot be assessed Not documented in patient record

**Supraglottic Larynx**

**CS Site-Specific Factor 6 Parapharyngeal, Parotid, Preauricular, and Sub-Occipital Lymph Nodes, Lymph Nodes for Head and Neck**

**Note:** Site-Specific Factors 3-6 are used to code the presence or absence of lymph node involvement in each of 7 different levels and other groups defined by AJCC. The definitions of the levels are the same for all applicable head and neck sites. One digit is used to represent lymph nodes of a single level, with the three digits of Site-Specific Factor 3 representing lymph nodes of, respectively, Levels I-III; the digits of Site-Specific Factor 4 representing lymph nodes of Levels IV and V and the retropharyngeal nodes; the digits of Site-Specific Factor 5 representing lymph nodes of Levels VI and VII and the facial nodes; and the digits of Site-Specific Factor 6 representing the remaining Other groups as defined by AJCC. In each digit, a code 1 means Yes, the nodes are involved.

Code	Description
000	No parapharyngeal, parotid (preauricular, periparotid, and/or intraparotid), or sub-occipital lymph node involvement
100	Parapharyngeal lymph node(s) involved
010	Parotid (preauricular, periparotid, and/or intraparotid) lymph node(s) involved
001	Sub-occipital lymph node(s) involved
110	Parapharyngeal and parotid (preauricular, periparotid, and/or intraparotid) lymph nodes involved
101	Parapharyngeal and sub-occipital lymph nodes involved
011	Parotid (preauricular, periparotid, and/or intraparotid) and sub-occipital lymph nodes involved
111	Parapharyngeal, parotid (preauricular, periparotid, and/or intraparotid), and sub-occipital lymph nodes involved
999	Unknown if regional lymph node(s) involved, not stated Regional lymph node(s) cannot be assessed Not documented in patient record

**Collaborative Staging Codes**

**Subglottic Larynx**

**C32.2**

C32.2 Subglottis

CS Tumor Size CS Extension CS TS/Ext-Eval CS Lymph Nodes CS Reg Nodes Eval Reg LN Pos Reg LN Exam CS Mets at DX CS Mets Eval	<b>CS Site-Specific Factor 1</b> - Size of Lymph Nodes <b>CS Site-Specific Factor 2</b> - Extracapsular Extension, Lymph Nodes for Head and Neck <b>CS Site-Specific Factor 3</b> - Levels I-III, Lymph Nodes for Head and Neck <b>CS Site-Specific Factor 4</b> - Levels IV-V and Retropharyngeal Lymph Nodes for Head and Neck <b>CS Site-Specific Factor 5</b> - Levels VI-VII and Facial Lymph Nodes for Head and Neck <b>CS Site-Specific Factor 6</b> - Parapharyngeal, Parotid, Preauricular, and Sub-Occipital Lymph Nodes, Lymph Nodes for Head and Neck	The following tables are available at the collaborative staging website: Histology Exclusion Table AJCC Stage Lymph Nodes Size Table
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**Subglottic Larynx**

**CS Tumor Size**

**SEE STANDARD TABLE**

**Subglottic Larynx**

**CS Extension**

Code	Description	TNM	SS77	SS2000
00	In situ; noninvasive; intraepithelial	Tis	IS	IS
10	Invasive tumor with normal vocal cord mobility confined to subglottis	T1	L	L
30	Tumor involves adjacent regions(s) of larynx Vocal cords with normal or impaired mobility	T2	L	L
40	Tumor limited to larynx WITH vocal cord fixation	T3	L	L
45	Localized, NOS	T1	L	L
60	Base of tongue Hypopharynx, NOS Postcricoid area Pre-epiglottic tissues Pyriform sinus (pyriform fossa) Vallecula	T4a	RE	RE
68	Extension to/through cricoid cartilage or thyroid cartilage	T4a	RE	D
70	Extension to/through: Cervical esophagus Deep extrinsic muscles of tongue	T4a	D	D

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70, cont'd	Extrinsic (strap) muscles Omohyoid Sternohyoid Sternothyroid Thyrohyoid Oropharynx Skin Soft tissues of neck Thyroid gland Trachea			
73	Contiguous extension to other tissues beyond larynx not specified in codes 70 or 80	T4a	D	D
80	Further contiguous extension: Mediastinal structures Prevertebral space Tumor encases carotid artery	T4b	D	D
95	No evidence of primary tumor	T0	U	U
99	Unknown extension Primary tumor cannot be assessed Not documented in patient record	TX	U	U

**Subglottic Larynx**

**CS TS/Ext-Eval**

**SEE STANDARD TABLE**

**Subglottic Larynx**

**CS Lymph Nodes**

**Note 1:** For head and neck schemas, this field includes all lymph nodes defined as Levels I-VII and Other by AJCC. The complete definitions are provided in the General Instructions.

**Note 2:** For head and neck schemas, additional information about lymph nodes (size of involved nodes, extracapsular extension, and levels involved) is coded in Site-Specific Factors 1-6.

**Note 3:** If laterality of lymph nodes is not specified, assume nodes are ipsilateral. Midline nodes are considered ipsilateral.

**Note 4:** For head and neck cancers, if lymph nodes are described only as "supraclavicular", try to determine if they are in Level IV (deep to the sternocleidomastoid muscle, in the lower jugular chain) or Level V (in the posterior triangle, inferior to the transverse cervical artery) and code appropriately. If the specific level cannot be determined, consider them as Level V nodes.

Code	Description	TNM	SS77	SS2000
00	None; no regional lymph node involvement	N0	NONE	NONE
10	Single positive ipsilateral regional node: Level II Jugulodigastric (subdigastric) Upper deep cervical Upper jugular Level III Middle deep cervical Mid-jugular Level VI Anterior deep cervical Delphian node	*	RN	RN

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10, cont'd	Laterotracheal Paralaryngeal Paratracheal Prelaryngeal Pretracheal Recurrent laryngeal Cervical, NOS Deep cervical, NOS Internal jugular, NOS: Regional lymph node, NOS Stated as N1, NOS			
11	Single positive ipsilateral regional node: Level I Submandibular (submaxillary) Submental Other groups Retropharyngeal Mandibular, NOS	*	D	RN
12	Single positive ipsilateral regional node: Level V node Posterior cervical Posterior triangle (spinal accessory and transverse cervical) (upper, middle, and lower corresponding to the levels that define upper, middle, and lower jugular nodes) Level VII node Upper mediastinum (for other mediastinal nodes see CS Mets at DX) Other groups Intraparotid Parapharyngeal Periparotid Sub-occipital Supraclavicular, NOS (See Note 4)	*	D	D
18	Stated as N1, no other information	N1	RN	RN
19	Stated as N2a, no other information	N2a	RN	RN
20	Multiple positive ipsilateral nodes listed in code 10	*	RN	RN
21	Multiple positive ipsilateral nodes listed in code 11	*	D	RN
22	Multiple positive ipsilateral nodes listed in code 12	*	D	D
29	Stated as N2b, no other information	N2b	RN	RN
30	Regional lymph nodes as listed in code 10: Positive ipsilateral node(s), not stated if single or multiple	*	RN	RN
31	Regional lymph nodes as listed in code 11: Positive ipsilateral node(s), not stated if single or multiple	*	D	RN
32	Regional lymph nodes as listed in code 12: Positive ipsilateral node(s), not stated if single or multiple	*	D	D
40	Regional lymph nodes as listed in code 10: Positive bilateral or contralateral nodes	*	RN	RN

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41	Regional lymph nodes as listed in code 11: Positive bilateral or contralateral nodes	*	D	RN
42	Regional lymph nodes as listed in code 12: Positive bilateral or contralateral nodes	*	D	D
49	Stated as N2c, no other information	N2c	RN	RN
50	Regional lymph nodes as listed in code 10: Positive node(s) not stated if ipsilateral, or bilateral, or contralateral AND not stated if single or multiple	*	RN	RN
51	Regional lymph nodes as listed in code 11: Positive node(s) not stated if ipsilateral, or bilateral, or contralateral AND not stated if single or multiple	*	D	RN
52	Regional lymph nodes as listed in code 12: Positive node(s), not stated if ipsilateral, or bilateral, or contralateral AND not stated if single or multiple	*	D	D
60	Stated as N2NOS	N2NOS	RN	RN
70	Stated as N3, no other information	N3	RN	RN
80	Lymph nodes, NOS, no other information	*	RN	RN
99	Unknown; not stated Regional lymph node(s) cannot be assessed Not documented in patient record	NX	U	U

\* For codes 10-12, 20-22, 30-32, 40-42, 50-52, and 80 ONLY, the N category is assigned based on the value of Site-Specific Factor 1, Size of Lymph Nodes, using the extra table, Lymph Nodes Size Table for this site.

**Subglottic Larynx  
CS Reg Nodes Eval  
SEE STANDARD TABLE**

**Subglottic Larynx  
Reg LN Pos  
SEE STANDARD TABLE**

**Subglottic Larynx  
Reg LN Exam  
SEE STANDARD TABLE**



**Subglottic Larynx**

**CS Mets at DX**

**Note:** Supraclavicular and transverse cervical lymph nodes are now coded in CS Lymph Nodes because they are categorized as N rather than M in AJCC TNM. Any cases coded to 10 or 50 can be reviewed and recoded. The volume of cases affected should be small.

Code	Description	TNM	SS77	SS2000
00	No; none	M0	NONE	NONE
10	Distant lymph node(s) Mediastinal Supraclavicular (transverse cervical) Distant lymph node(s), NOS	M1	D	D
40	Distant metastases except distant lymph node(s) (code 10) Distant metastasis, NOS Carcinomatosis	M1	D	D
50	(10) + (40) Distant lymph node(s) plus other distant metastases	M1	D	D
99	Unknown if distant metastasis Distant metastasis cannot be assessed Not documented in patient record	MX	U	U

**Subglottic Larynx**

**CS Mets Eval**

**SEE STANDARD TABLE**

**Subglottic Larynx**

**CS Site-Specific Factor 1 Size of Lymph Nodes**

**Note:** Code the largest diameter, whether measured clinically or pathologically, of any involved regional lymph node(s). Do not code the size of any nodes coded in CS Mets at DX.

Code	Description
000	No involved regional nodes
001-988	001-988 millimeters (code exact size in millimeters)
989	989 millimeters or larger
990	Microscopic focus or foci only, no size of focus given
991	Described as less than 1 cm
992	Described as less than 2 cm
993	Described as less than 3 cm
994	Described as less than 4 cm
995	Described as less than 5 cm
996	Described as less than 6 cm
997	Described as more than 6 cm
999	Regional lymph node(s) involved, size not stated Unknown if regional lymph node(s) involved Not documented in patient record

**Subglottic Larynx**

**CS Site-Specific Factor 2 Extracapsular Extension, Lymph Nodes for Head and Neck**

**Note 1:** Code the status of extracapsular extension whether assessed clinically or pathologically of any involved regional lymph node(s) coded in the CS Lymph Nodes field. Do not code the status of any nodes coded in CS Mets at DX. Pathologic assessment takes priority over clinical assessment.

**Note 2:** According to AJCC (page 24), "Imaging studies showing amorphous spiculated margins of involved nodes or involvement of internodal fat resulting in loss of normal oval-to-round nodal shape strongly suggest extracapsular (extranodal) tumor spread; however, pathologic examination is necessary for documentation of the extent of such disease."

Code	Description
000	No extracapsular extension
001	Extracapsular extension clinically, not assessed pathologically Nodes described as "fixed", not assessed pathologically
005	Extracapsular extension present pathologically
888	Not applicable; no lymph node involvement
999	Unknown if regional lymph node(s) involved, not stated Regional lymph node(s) cannot be assessed Not documented in patient record

**Subglottic Larynx**

**CS Site-Specific Factor 3 Levels I-III, Lymph Nodes for Head and Neck**

**Note:** Site-Specific Factors 3-6 are used to code the presence or absence of lymph node involvement in each of 7 different levels and other groups defined by AJCC. The definitions of the levels are the same for all applicable head and neck sites. One digit is used to represent lymph nodes of a single level, with the three digits of Site-Specific Factor 3 representing lymph nodes of, respectively, Levels I-III; the digits of Site-Specific Factor 4 representing lymph nodes of Levels IV and V and the retropharyngeal nodes; the digits of Site-Specific Factor 5 representing lymph nodes of Levels VI and VII and the facial nodes; and the digits of Site-Specific Factor 6 representing the remaining Other groups as defined by AJCC. In each digit, a code 1 means Yes, the nodes are involved.

Code	Description
000	No lymph node involvement in Levels I, II, or III
100	Level I lymph node(s) involved
010	Level II lymph node(s) involved
001	Level III lymph node(s) involved
110	Level I and II lymph nodes involved
101	Level I and III lymph nodes involved
011	Level II and III lymph nodes involved
111	Level I, II and III lymph nodes involved
999	Unknown if regional lymph node(s) involved, not stated Regional lymph node(s) cannot be assessed Not documented in patient record

**Subglottic Larynx**

**CS Site-Specific Factor 4 Levels IV-V and Retropharyngeal Lymph Nodes for Head and Neck**

**Note:** Site-Specific Factors 3-6 are used to code the presence or absence of lymph node involvement in each of 7 different levels and other groups defined by AJCC. The definitions of the levels are the same for all applicable head and neck sites. One digit is used to represent lymph nodes of a single level, with the three digits of Site-Specific Factor 3 representing lymph nodes of, respectively, Levels I-III; the digits of Site-Specific Factor 4 representing lymph nodes of Levels IV and V and the retropharyngeal nodes; the digits of Site-Specific Factor 5 representing lymph nodes of Levels VI and VII and the facial nodes; and the digits of Site-Specific Factor 6 representing the remaining Other groups as defined by AJCC. In each digit, a code 1 means Yes, the nodes are involved.

Code	Description
000	No lymph node involvement in Levels IV or V or retropharyngeal
100	Level IV lymph node(s) involved
010	Level V lymph node(s) involved
001	Retropharyngeal nodes involved
110	Level IV and V lymph nodes involved
101	Level IV and retropharyngeal nodes involved
011	Level V and retropharyngeal nodes involved
111	Level IV and V and retropharyngeal lymph nodes involved
999	Unknown if regional lymph node(s) involved, not stated Regional lymph node(s) cannot be assessed Not documented in patient record

**Subglottic Larynx**

**CS Site-Specific Factor 5 Levels VI-VII and Facial Lymph Nodes for Head and Neck**

**Note:** Site-Specific Factors 3-6 are used to code the presence or absence of lymph node involvement in each of 7 different levels and other groups defined by AJCC. The definitions of the levels are the same for all applicable head and neck sites. One digit is used to represent lymph nodes of a single level, with the three digits of Site-Specific Factor 3 representing lymph nodes of, respectively, Levels I-III; the digits of Site-Specific Factor 4 representing lymph nodes of Levels IV and V and the retropharyngeal nodes; the digits of Site-Specific Factor 5 representing lymph nodes of Levels VI and VII and the facial nodes; and the digits of Site-Specific Factor 6 representing the remaining Other groups as defined by AJCC. In each digit, a code 1 means Yes, the nodes are involved.

Code	Description
000	No lymph node involvement in Levels VI or VII or facial nodes
100	Level VI lymph node(s) involved
010	Level VII lymph node(s) involved
001	Facial (buccinator, nasolabial) lymph node(s) involved
110	Level VI and VII lymph nodes involved
101	Level VI and facial (buccinator, nasolabial) nodes involved
011	Level VII and facial (buccinator, nasolabial) nodes involved
111	Level VI and VII and facial (buccinator, nasolabial) lymph nodes involved

999	Unknown if regional lymph node(s) involved, not stated Regional lymph node(s) cannot be assessed Not documented in patient record
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**Subglottic Larynx**

**CS Site-Specific Factor 6 Parapharyngeal, Parotid, Preauricular, and Sub-Occipital Lymph Nodes, Lymph Nodes for Head and Neck**

**Note:** Site-Specific Factors 3-6 are used to code the presence or absence of lymph node involvement in each of 7 different levels and other groups defined by AJCC. The definitions of the levels are the same for all applicable head and neck sites. One digit is used to represent lymph nodes of a single level, with the three digits of Site-Specific Factor 3 representing lymph nodes of, respectively, Levels I-III; the digits of Site-Specific Factor 4 representing lymph nodes of Levels IV and V and the retropharyngeal nodes; the digits of Site-Specific Factor 5 representing lymph nodes of Levels VI and VII and the facial nodes; and the digits of Site-Specific Factor 6 representing the remaining Other groups as defined by AJCC. In each digit, a code 1 means Yes, the nodes are involved.

Code	Description
000	No parapharyngeal, parotid (preauricular, periparotid, and/or intraparotid), or sub-occipital lymph node involvement
100	Parapharyngeal lymph node(s) involved
010	Parotid (preauricular, periparotid, and/or intraparotid) lymph node(s) involved
001	Sub-occipital lymph node(s) involved
110	Parapharyngeal and parotid (preauricular, periparotid, and/or intraparotid) lymph nodes involved
101	Parapharyngeal and sub-occipital lymph nodes involved
011	Parotid (preauricular, periparotid, and/or intraparotid) and sub-occipital lymph nodes involved
111	Parapharyngeal, parotid (preauricular, periparotid, and/or intraparotid), and sub-occipital lymph nodes involved
999	Unknown if regional lymph node(s) involved, not stated Regional lymph node(s) cannot be assessed Not documented in patient record

**Collaborative Staging Codes**

**Larynx, Overlapping Lesion or Not Otherwise Specified**

**C32.3, C32.8-C32.9**

C32.3 Laryngeal cartilage

C32.8 Overlapping lesion of larynx

C32.9 Larynx, NOS

<p>CS Tumor Size CS Extension CS TS/Ext-Eval CS Lymph Nodes CS Reg Nodes Eval Reg LN Pos Reg LN Exam CS Mets at DX CS Mets Eval</p>	<p><b>CS Site-Specific Factor 1</b> - Size of Lymph Nodes <b>CS Site-Specific Factor 2</b> - Extracapsular Extension, Lymph Nodes for Head and Neck <b>CS Site-Specific Factor 3</b> - Levels I-III, Lymph Nodes for Head and Neck <b>CS Site-Specific Factor 4</b> - Levels IV-V and Retropharyngeal Lymph Nodes for Head and Neck <b>CS Site-Specific Factor 5</b> - Levels VI-VII and Facial Lymph Nodes for Head and Neck <b>CS Site-Specific Factor 6</b> - Parapharyngeal, Parotid, Preauricular, and Sub-Occipital Lymph Nodes, Lymph Nodes for Head and Neck</p>	<p>The following tables are available at the collaborative staging website: Histology Exclusion Table AJCC Stage Lymph Nodes Size Table</p>
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**Larynx, Overlapping Lesion or Not Otherwise Specified**

**CS Tumor Size**

**SEE STANDARD TABLE**

**Larynx, Overlapping Lesion or Not Otherwise Specified**

**CS Extension**

Code	Description	TNM	SS77	SS2000
00	In situ; noninvasive	Tis	IS	IS
10	Invasive tumor confined to site of origin	T1	L	L
20	Tumor involves more than one subsite, WITHOUT fixation or NOS	T2	L	L
30	Tumor involves adjacent regions(s) of larynx	T2	L	L
35	Impaired vocal cord mobility	T2	L	L
40	Tumor limited to larynx WITH vocal cord fixation	T3	L	L
45	Localized, NOS	T1	L	L
60	Hypopharynx, NOS Postcricoid area Pre-epiglottic tissues Pyriform sinus (pyriform fossa) Vallecula	T3	RE	RE
68	Extension to/through cricoid cartilage and thyroid cartilage	T4a	RE	D

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70	Extension to/through: Cervical esophagus Deep muscle of tongue Extrinsic (strap) muscles Omohyoid Sternohyoid Sternothyroid Thyrohyoid Oropharynx Skin Soft tissues of neck Thyroid gland Trachea	T4a	D	D
80	Further contiguous extension, including: Mediastinal structures Prevertebral space Tumor encases carotid artery	T4b	D	D
95	No evidence of primary tumor	T0	U	U
99	Unknown extension Primary tumor cannot be assessed Not documented in patient record	TX	U	U

**Larynx, Overlapping Lesion or Not Otherwise Specified**

**CS TS/Ext-Eval**

**SEE STANDARD TABLE**

**Larynx, Overlapping Lesion or Not Otherwise Specified**

**CS Lymph Nodes**

**Note 1:** For head and neck schemas, this field includes all lymph nodes defined as Levels I-VII and Other by AJCC. The complete definitions are provided in the General Instructions.

**Note 2:** For head and neck schemas, additional information about lymph nodes (size of involved nodes, extracapsular extension, and levels involved) is coded in Site-Specific Factors 1-6.

**Note 3:** If laterality of lymph nodes is not specified, assume nodes are ipsilateral. Midline nodes are considered ipsilateral.

**Note 4:** For head and neck cancers, if lymph nodes are described only as "supraclavicular", try to determine if they are in Level IV (deep to the sternocleidomastoid muscle, in the lower jugular chain) or Level V (in the posterior triangle, inferior to the transverse cervical artery) and code appropriately. If the specific level cannot be determined, consider them as Level V nodes.

Code	Description	TNM	SS77	SS2000
00	None; no regional lymph node involvement	N0	NONE	NONE
10	Single positive ipsilateral regional node: Level II Jugulodigastric (subdigastric) Upper deep cervical Upper jugular Level III Middle deep cervical Mid-jugular Level IV Jugulo-omohyoid (supraomohyoid) Lower deep cervical Lower jugular	*	RN	RN

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10, cont'd	<p>Level VI</p> <ul style="list-style-type: none"> <li>Anterior deep cervical</li> <li>Delphian node</li> <li>Laterotracheal</li> <li>Paralaryngeal</li> <li>Paratracheal</li> <li>Prelaryngeal</li> <li>Pretracheal</li> <li>Recurrent laryngeal</li> </ul> <p>Cervical, NOS          Deep cervical, NOS          Internal jugular, NOS          Regional lymph node, NOS          Stated as N1, NOS</p>			
11	<p>Single positive ipsilateral regional node:</p> <ul style="list-style-type: none"> <li>Level I</li> <li>Submandibular (submaxillary)</li> <li>Submental</li> <li>Other groups</li> <li>Retropharyngeal</li> <li>Mandibular, NOS</li> </ul>	*	D	RN
12	<p>Single positive ipsilateral regional node:</p> <ul style="list-style-type: none"> <li>Level V node</li> <li>Posterior cervical</li> <li>Posterior triangle (spinal accessory and transverse cervical)                      (upper, middle, and lower corresponding to the levels that                      define upper, middle, and lower jugular nodes)</li> <li>Level VII node</li> <li>Upper mediastinum (for other mediastinal nodes see CS Mets                      at DX)</li> <li>Other groups</li> <li>Intraparotid</li> <li>Parapharyngeal</li> <li>Periparotid</li> <li>Sub-occipital</li> <li>Supraclavicular, NOS (See Note 4)</li> </ul>	*	D	RN
18	Stated as N1, no other information	N1	RN	RN
19	Stated as N2a, no other information	N2a	RN	RN
20	Multiple positive ipsilateral nodes listed in code 10	*	RN	RN
21	Multiple positive ipsilateral nodes listed in code 11	*	D	RN
22	Multiple positive ipsilateral nodes listed in code 12	*	D	D
29	Stated as N2b, no other information	N2b	RN	RN
30	Regional lymph nodes as listed in code 10: Positive ipsilateral node(s), not stated if single or multiple	*	RN	RN
31	Regional lymph nodes as listed in code 11: Positive ipsilateral node(s), not stated if single or multiple	*	D	RN
32	Regional lymph nodes as listed in code 12: Positive ipsilateral node(s), not stated if single or multiple	*	D	D

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40	Regional lymph nodes as listed in code 10: Positive bilateral or contralateral nodes	*	RN	RN
41	Regional lymph nodes as listed in code 11: Positive bilateral or contralateral nodes	*	D	RN
42	Regional lymph nodes as listed in code 12: Positive bilateral or contralateral nodes	*	D	D
49	Stated as N2c, no other information	N2c	RN	RN
50	Regional lymph nodes as listed in code 10: Positive node(s) not stated if ipsilateral, or bilateral, or contralateral AND not stated if single or multiple	*	RN	RN
51	Regional lymph nodes as listed in code 11: Positive node(s) not stated if ipsilateral, or bilateral, or contralateral AND not stated if single or multiple	*	D	RN
52	Regional lymph nodes as listed in code 12: Positive node(s), not stated if ipsilateral, or bilateral, or contralateral AND not stated if single or multiple	*	D	D
60	Stated as N2, NOS	N2NOS	RN	RN
70	Stated as N3, no other information	N3	RN	RN
80	Lymph nodes, NOS, no other information	*	RN	RN
99	Unknown; not stated Regional lymph node(s) cannot be assessed Not documented in patient record	NX	U	U

\* For codes 10-12, 20-22, 30-32, 40-42, 50-52, and 80 ONLY, the N category is assigned based on the value of Site-Specific Factor 1, Size of Lymph Nodes, using the extra table, Lymph Nodes Size Table for this site.

**Larynx, Overlapping Lesion or Not Otherwise Specified**  
**CS Reg Nodes Eval**  
**SEE STANDARD TABLE**

**Larynx, Overlapping Lesion or Not Otherwise Specified**  
**Reg LN Pos**  
**SEE STANDARD TABLE**

**Larynx, Overlapping Lesion or Not Otherwise Specified**  
**Reg LN Exam**  
**SEE STANDARD TABLE**



**Larynx, Overlapping Lesion or Not Otherwise Specified  
CS Mets at DX**

Note: Supraclavicular and transverse cervical lymph nodes are now coded in CS Lymph Nodes because they are categorized as N rather than M in AJCC TNM. Any cases coded to 10 or 50 can be reviewed and recoded. The volume of cases affected should be small.

Code	Description	TNM	SS77	SS2000
00	No; none	M0	NONE	NONE
10	Distant lymph node(s) Mediastinal Supraclavicular (transverse cervical) Distant lymph node(s), NOS	M1	D	D
40	Distant metastases except distant lymph node(s) (code 10) Distant metastasis, NOS Carcinomatosis	M1	D	D
50	(10) + (40) Distant lymph node(s) plus other distant metastases	M1	D	D
99	Unknown if distant metastasis Distant metastasis cannot be assessed Not documented in patient record	MX	U	U

**Larynx, Overlapping Lesion or Not Otherwise Specified  
CS Mets Eval**

**SEE STANDARD TABLE**

**Larynx, Overlapping Lesion or Not Otherwise Specified  
CS Site-Specific Factor 1 Size of Lymph Nodes**

**Note:** Code the largest diameter, whether measured clinically or pathologically, of any involved regional lymph node(s). Do not code the size of any nodes coded in CS Mets at DX.

Code	Description
000	No involved regional nodes
001-988	001-988 millimeters (code exact size in millimeters)
989	989 millimeters or larger
990	Microscopic focus or foci only, no size of focus given
991	Described as less than 1 cm
992	Described as less than 2 cm
993	Described as less than 3 cm
994	Described as less than 4 cm
995	Described as less than 5 cm
996	Described as less than 6 cm
997	Described as more than 6 cm
999	Regional lymph node(s) involved, size not stated Unknown if regional lymph node(s) involved Not documented in patient record

**Larynx, Overlapping Lesion or Not Otherwise Specified**

**CS Site-Specific Factor 2 Extracapsular Extension, Lymph Nodes for Head and Neck**

**Note 1:** Code the status of extracapsular extension whether assessed clinically or pathologically of any involved regional lymph node(s) coded in the CS Lymph Nodes field. Do not code the status of any nodes coded in CS Mets at DX. Pathologic assessment takes priority over clinical assessment.

**Note 2:** According to AJCC (page 24), "Imaging studies showing amorphous spiculated margins of involved nodes or involvement of internodal fat resulting in loss of normal oval-to-round nodal shape strongly suggest extracapsular (extranodal) tumor spread; however, pathologic examination is necessary for documentation of the extent of such disease."

Code	Description
000	No extracapsular extension
001	Extracapsular extension clinically, not assessed pathologically Nodes described as "fixed", not assessed pathologically
005	Extracapsular extension present pathologically
888	Not applicable; no lymph node involvement
999	Unknown if regional lymph node(s) involved, not stated Regional lymph node(s) cannot be assessed Not documented in patient record

**Larynx, Overlapping Lesion or Not Otherwise Specified**

**CS Site-Specific Factor 3 Levels I-III, Lymph Nodes for Head and Neck**

**Note:** Site-Specific Factors 3-6 are used to code the presence or absence of lymph node involvement in each of 7 different levels and other groups defined by AJCC. The definitions of the levels are the same for all applicable head and neck sites. One digit is used to represent lymph nodes of a single level, with the three digits of Site-Specific Factor 3 representing lymph nodes of, respectively, Levels I-III; the digits of Site-Specific Factor 4 representing lymph nodes of Levels IV and V and the retropharyngeal nodes; the digits of Site-Specific Factor 5 representing lymph nodes of Levels VI and VII and the facial nodes; and the digits of Site-Specific Factor 6 representing the remaining Other groups as defined by AJCC. In each digit, a code 1 means Yes, the nodes are involved.

Code	Description
000	No lymph node involvement in Levels I, II, or III
100	Level I lymph node(s) involved
010	Level II lymph node(s) involved
001	Level III lymph node(s) involved
110	Level I and II lymph nodes involved
101	Level I and III lymph nodes involved
011	Level II and III lymph nodes involved
111	Level I, II and III lymph nodes involved
999	Unknown if regional lymph node(s) involved, not stated Regional lymph node(s) cannot be assessed Not documented in patient record

**Larynx, Overlapping Lesion or Not Otherwise Specified  
CS Site-Specific Factor 4 Levels IV-V and Retropharyngeal Lymph Nodes for Head and Neck**

**Note:** Site-Specific Factors 3-6 are used to code the presence or absence of lymph node involvement in each of 7 different levels and other groups defined by AJCC. The definitions of the levels are the same for all applicable head and neck sites. One digit is used to represent lymph nodes of a single level, with the three digits of Site-Specific Factor 3 representing lymph nodes of, respectively, Levels I-III; the digits of Site-Specific Factor 4 representing lymph nodes of Levels IV and V and the retropharyngeal nodes; the digits of Site-Specific Factor 5 representing lymph nodes of Levels VI and VII and the facial nodes; and the digits of Site-Specific Factor 6 representing the remaining Other groups as defined by AJCC. In each digit, a code 1 means Yes, the nodes are involved.

Code	Description
000	No lymph node involvement in Levels IV or V or retropharyngeal
100	Level IV lymph node(s) involved
010	Level V lymph node(s) involved
001	Retropharyngeal nodes involved
110	Level IV and V lymph nodes involved
101	Level IV and retropharyngeal nodes involved
011	Level V and retropharyngeal nodes involved
111	Level IV and V and retropharyngeal lymph nodes involved
999	Unknown if regional lymph node(s) involved, not stated Regional lymph node(s) cannot be assessed Not documented in patient record

**Larynx, Overlapping Lesion or Not Otherwise Specified  
CS Site-Specific Factor 5 Levels VI-VII and Facial Lymph Nodes for Head and Neck**

**Note:** Site-Specific Factors 3-6 are used to code the presence or absence of lymph node involvement in each of 7 different levels and other groups defined by AJCC. The definitions of the levels are the same for all applicable head and neck sites. One digit is used to represent lymph nodes of a single level, with the three digits of Site-Specific Factor 3 representing lymph nodes of, respectively, Levels I-III; the digits of Site-Specific Factor 4 representing lymph nodes of Levels IV and V and the retropharyngeal nodes; the digits of Site-Specific Factor 5 representing lymph nodes of Levels VI and VII and the facial nodes; and the digits of Site-Specific Factor 6 representing the remaining Other groups as defined by AJCC. In each digit, a code 1 means Yes, the nodes are involved.

Code	Description
000	No lymph node involvement in Levels VI or VII or facial nodes
100	Level VI lymph node(s) involved
010	Level VII lymph node(s) involved
001	Facial (buccinator, nasolabial) lymph node(s) involved
110	Level VI and VII lymph nodes involved
101	Level VI and facial (buccinator, nasolabial) nodes involved
011	Level VII and facial (buccinator, nasolabial) nodes involved
111	Level VI and VII and facial (buccinator, nasolabial) lymph nodes involved

999	Unknown if regional lymph node(s) involved, not stated Regional lymph node(s) cannot be assessed Not documented in patient record
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**Larynx, Overlapping Lesion or Not Otherwise Specified  
CS Site-Specific Factor 6 Parapharyngeal, Parotid, Preauricular, and Sub-Occipital  
Lymph Nodes, Lymph Nodes for Head and Neck**

**Note:** Site-Specific Factors 3-6 are used to code the presence or absence of lymph node involvement in each of 7 different levels and other groups defined by AJCC. The definitions of the levels are the same for all applicable head and neck sites. One digit is used to represent lymph nodes of a single level, with the three digits of Site-Specific Factor 3 representing lymph nodes of, respectively, Levels I-III; the digits of Site-Specific Factor 4 representing lymph nodes of Levels IV and V and the retropharyngeal nodes; the digits of Site-Specific Factor 5 representing lymph nodes of Levels VI and VII and the facial nodes; and the digits of Site-Specific Factor 6 representing the remaining Other groups as defined by AJCC. In each digit, a code 1 means Yes, the nodes are involved.

Code	Description
000	No parapharyngeal, parotid (preauricular, periparotid, and/or intraparotid), or sub-occipital lymph node involvement
100	Parapharyngeal lymph node(s) involved
010	Parotid (preauricular, periparotid, and/or intraparotid) lymph node(s) involved
001	Sub-occipital lymph node(s) involved
110	Parapharyngeal and parotid (preauricular, periparotid, and/or intraparotid) lymph nodes involved
101	Parapharyngeal and sub-occipital lymph nodes involved
011	Parotid (preauricular, periparotid, and/or intraparotid) and sub-occipital lymph nodes involved
111	Parapharyngeal, parotid (preauricular, periparotid, and/or intraparotid), and sub-occipital lymph nodes involved
999	Unknown if regional lymph node(s) involved, not stated Regional lymph node(s) cannot be assessed Not documented in patient record

**Site-Specific Surgery Codes**

**Larynx**

**C320–C329**

(Except for M-9750, 9760-9764, 9800-9820, 9826, 9831-9920, 9931-9964, 9980-9989)

Codes

00 None; **no surgery** of primary site; **autopsy ONLY**

10 Local tumor destruction, NOS

11 Photodynamic therapy (PDT)

12 Electrocautery; fulguration (includes use of hot forceps for tumor destruction)

13 Cryosurgery

14 Laser

15 Stripping

**No specimen sent to pathology** from surgical events 10–15

20 **Local tumor excision**, NOS

26 Polypectomy

27 Excisional biopsy

Any combination of 20 or 26–27 WITH

21 Photodynamic therapy (PDT)

22 Electrocautery

23 Cryosurgery

24 Laser ablation

25 Laser excision

28 Stripping

[**SEER Note:** Codes 21 to 25 and 28 above combine 20 Local tumor excision, 26 Polypectomy or 27 Excisional biopsy with 21 PDT, 22 Electrocautery, 23 Cryosurgery, 24 Laser ablation, 25 Laser excision, or 28 Stripping]

**Specimen sent to pathology** from surgical events 20–28

30 Partial excision of the primary site, NOS; subtotal/partial laryngectomy NOS; hemilaryngectomy NOS

31 Vertical laryngectomy

32 Anterior commissure laryngectomy

33 Supraglottic laryngectomy

[**SEER Note:** Vertical laryngectomy: Removal of involved true vocal cord, ipsilateral false vocal cord, intervening ventricle, ipsilateral thyroid and may include removal of the arytenoids. Supraglottic laryngectomy: Conservative surgery intended to preserve the laryngeal function. Standard procedure involves removal of epiglottis, false vocal cords, aryepiglottic folds, arytenoid cartilages, ventricle, upper one third of thyroid cartilage, thyroid membrane. The true vocal cords and arytenoids remain in place to allow vocalization and deglutition.]

40 Total or radical laryngectomy, NOS

41 Total laryngectomy ONLY

42 Radical laryngectomy ONLY

[**SEER Note:** Radical laryngectomy: Includes removal of adjacent sites. Do not code the removal of adjacent sites in Surgical Procedure of Other Site.]

50 Pharyngolaryngectomy

- 80 Laryngectomy, NOS
- 90 Surgery, NOS
- 99 **Unknown** if surgery performed; **death certificate** ONLY

**Collaborative Staging Codes**

**Trachea**

**C33.9**

C33.9 Trachea

**Note:** AJCC does not define TNM staging for this site.

CS Tumor Size	CS Site-Specific Factor 1	The following tables are available at the collaborative staging website: Histologies for Which AJCC Staging Is Not Generated AJCC Stage
CS Extension	CS Site-Specific Factor 2	
CS TS/Ext-Eval	CS Site-Specific Factor 3	
CS Lymph Nodes	CS Site-Specific Factor 4	
CS Reg Nodes Eval	CS Site-Specific Factor 5	
Reg LN Pos	CS Site-Specific Factor 6	
Reg LN Exam		
CS Mets at DX		
CS Mets Eval		

**Trachea**

**CS Tumor Size**

**SEE STANDARD TABLE**

**Trachea**

**CS Extension**

Code	Description	TNM	SS77	SS2000
00	In situ; noninvasive; intraepithelial	NA	IS	IS
10	Invasive tumor confined to trachea	NA	L	L
30	Localized, NOS	NA	L	L
40	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	NA	RE	RE
60	Adjacent organs/structures Cricoid cartilage Esophagus Pleura Right and left main bronchi Sternum Thymus Thyroid gland Vertebral column	NA	RE	RE
80	Further contiguous extension	NA	D	D

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95	No evidence of primary tumor	NA	U	U
99	Unknown extension Primary tumor cannot be assessed Not documented in patient record	NA	U	U

**Trachea**

**CS TS/Ext-Eval**

Code	Description	Staging Basis
9	Not applicable for this site	NA

**Trachea**

**CS Lymph Nodes**

**Note:** Code only regional nodes and nodes, NOS, in this field. Distant nodes are coded in the field Mets at DX.

Code	Description	TNM	SS77	SS2000
00	None; no regional lymph node involvement	NA	NONE	NONE
10	Regional lymph node(s): Mediastinal, NOS: Posterior (tracheoesophageal) Paratracheal Pretracheal Tracheal, NOS Regional lymph node(s), NOS	NA	RN	RN
80	Lymph nodes, NOS	NA	RN	RN
99	Unknown; not stated Regional lymph node(s) cannot be assessed Not documented in patient record	NA	U	U

**Trachea**

**CS Reg Nodes Eval**

Code	Description	Staging Basis
9	Not applicable for this site	NA

**Trachea**

**Reg LN Pos**

SEE STANDARD TABLE

**Trachea**

**Reg LN Exam**

SEE STANDARD TABLE



**Trachea**

**CS Mets at DX**

Code	Description	TNM	SS77	SS2000
00	No; none	NA	NONE	NONE
10	Distant lymph node(s), NOS	NA	D	D
40	Distant metastases except distant lymph node(s) (code 10) Distant metastasis, NOS Carcinomatosis	NA	D	D
50	(10) + (40) Distant lymph node(s) plus other distant metastases	NA	D	D
99	Unknown if distant metastasis Cannot be assessed Not documented in patient record	NA	U	U

**Trachea**

**CS Mets Eval**

Code	Description	Staging Basis
9	Not applicable for this site	NA

**Trachea**

**CS Site-Specific Factor 1**

Code	Description
888	Not applicable for this site

**Trachea**

**CS Site-Specific Factor 2**

Code	Description
888	Not applicable for this site

**Trachea**

**CS Site-Specific Factor 3**

Code	Description
888	Not applicable for this site

**Trachea**

**CS Site-Specific Factor 4**

Code	Description
888	Not applicable for this site

**Trachea**

**CS Site-Specific Factor 5**

Code	Description
888	Not applicable for this site

**Trachea**

**CS Site-Specific Factor 6**

Code	Description
888	Not applicable for this site

**Site-Specific Surgery Codes**

**All Other Sites**

C142–C148, C170–C179, C239, C240–C249, C260–C269, C300–C301, C310–C319, **C339**, C379, C380–C388, C390–C399, C480–C488, C510–C519, C529, C570–C579, C589, C600–C609, C630–C639, C680–C689, C690–C699, C740–C749, C750–C759

(Except for M-9750, 9760-9764, 9800-9820, 9826, 9831-9920, 9931-9964, 9980-9989)

Codes

00 None; **no surgery** of primary site; **autopsy ONLY**

10 **Local** tumor destruction, NOS

11 Photodynamic therapy (PDT)

12 Electrocautery; fulguration (includes use of hot forceps for tumor destruction)

13 Cryosurgery

14 Laser

No specimen sent to **pathology** from surgical events 10–14

20 **Local** tumor **excision**, NOS

26 Polypectomy

27 Excisional biopsy

Any **combination** of **20** or **26–27** WITH

21 Photodynamic therapy (PDT)

22 Electrocautery

23 Cryosurgery

24 Laser ablation

25 Laser excision

[**SEER Note:** Codes 21 to 25 above combine 20 local tumor excision, 26 Polypectomy or 27 Excisional biopsy with 21 PDT, 22 Electrocautery, 23 Cryosurgery, 24 Laser ablation, or 25 Laser excision]

**Specimen** sent to **pathology** from surgical events 20–27

30 Simple/partial surgical removal of primary site

40 **Total surgical removal** of primary site; enucleation

41 Total enucleation (for eye surgery only)

50 Surgery stated to be “**debulking**”

60 Radical surgery

Partial or total removal of the primary site WITH a resection in continuity (partial or total removal) with other organs

[**SEER Note:** In continuity with or “en bloc” means that all of the tissues were removed during the same procedure, but not necessarily in a single specimen]

90 Surgery, NOS

99 **Unknown** if surgery performed; **death certificate ONLY**

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## SEER Site-Specific Coding Guidelines

### LUNG

C340–C349

#### Primary Site

C340	Main bronchus Carina Hilum
C341	<b>Upper lobe</b> , lung Lingula Apex
C342	<b>Middle lobe</b> , lung (Right lung only)
C343	<b>Lower lobe</b> , lung Base
C348	<b>Overlapping</b> lesion of lung
C349	Lung, NOS Bronchus, NOS

#### Laterality

Laterality **must** be **coded** for all subsites except carina.

#### Tumor Size

Priorities for coding size

1. **Pathology** report
2. **Operative** report
3. **Endoscopic** examination, where applicable
4. **Imaging** reports  
Imaging reports do not have a priority  
Code the largest size of tumor recorded on any of the imaging reports

General Instructions for Coding Tumor Size

DO **NOT** CODE size of **hilar mass** unless primary is stated to be in the hilum.

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**Collaborative Staging Codes**

**Lung**

**C34.0-C34.3, C34.8-C34.9**

- C34.0 Main bronchus
- C34.1 Upper lobe, lung
- C34.2 Middle lobe, lung
- C34.3 Lower lobe, lung
- C34.8 Overlapping lesion of lung
- C34.9 Lung, NOS

**Note:** Laterality must be coded for this site (except carina).

CS Tumor Size	CS Site-Specific Factor 1	The following tables are available at the collaborative staging website: Histology Exclusion Table AJCC Stage Extension Size Table Mets Size Table for Mets at DX 00 Mets Size Table for Mets at DX 99
CS Extension	CS Site-Specific Factor 2	
CS TS/Ext-Eval	CS Site-Specific Factor 3	
CS Lymph Nodes	CS Site-Specific Factor 4	
CS Reg Nodes Eval	CS Site-Specific Factor 5	
Reg LN Pos	CS Site-Specific Factor 6	
Reg LN Exam		
CS Mets at DX		
CS Mets Eval		

**Lung**

**CS Tumor Size**

**Note:** Do not code size of hilar mass unless primary is stated to be in the hilum.

Code	Description
000	No mass/tumor found
001-988	001 - 988 millimeters (code exact size in millimeters)
989	989 millimeters or larger
990	Microscopic focus or foci only, no size of focus given
991	Described as less than 1 cm
992	Described as less than 2 cm
993	Described as less than 3 cm
994	Described as less than 4 cm
995	Described as less than 5 cm
996	Malignant cells present in bronchopulmonary secretions, but no tumor seen radiographically or during bronchoscopy; "occult" carcinoma
997	Diffuse (entire lobe)
998	Diffuse (entire lung or NOS)
999	Unknown; size not stated Not documented in patient record

**Lung**

**CS Extension**

**Note 1:** Direct extension to or other involvement of structures considered M1 in AJCC staging is coded in the data item CS Mets at DX. This includes: sternum; skeletal muscle; skin of chest; contralateral lung or mainstem bronchus; separate tumor nodule(s) in different lobe, same lung, or in contralateral lung.

**Note 2:** Distance from Carina. Assume tumor is greater than or equal to 2 cm from carina if lobectomy, segmental resection, or wedge resection is done.

**Note 3:** Opposite Lung. If no mention is made of the opposite lung on a chest x-ray, assume it is not involved.

**Note 4:** Bronchopneumonia. "Bronchopneumonia" is not the same thing as "obstructive pneumonitis" and should not be coded as such.

**Note 5:** Pulmonary Artery/Vein. An involved pulmonary artery/vein in the mediastinum is coded to 70 (involvement of major blood vessel). However, if the involvement of the artery/vein appears to be only within lung tissue and not in the mediastinum, it would not be coded to 70.

**Note 6:** Pleural Effusion.

A. Note from SEER manual: Ignore pleural effusion that is negative for tumor. Assume that a pleural effusion is negative if a resection is done.

B. Note from AJCC manual: Most pleural effusions associated with lung cancers are due to tumor. However, there are a few patients in whom multiple cytopathologic examinations of pleural fluid are negative for tumor.

In these cases, fluid is non-bloody and is not an exudate. When these elements and clinical judgement dictate that the effusion is not related to the tumor, the effusion should be excluded as a staging element and the patient should be staged T1, T2, or T3.

**Note 7:** Vocal cord paralysis (resulting from involvement of recurrent branch of the vagus nerve), superior vena cava obstruction, or compression of the trachea or the esophagus may be related to direct extension of the primary tumor or to lymph node involvement. The treatment options and prognosis associated with these manifestations of disease extent fall within the T4-Stage IIIB category; therefore, generally use code 70 for these manifestations. HOWEVER, if the primary tumor is peripheral and clearly unrelated to vocal cord paralysis, vena cava obstruction, or compression of the trachea or the esophagus, code these manifestations as mediastinal lymph node involvement (code 20) in CS Lymph Nodes unless there is a statement of involvement by direct extension from the primary tumor.

Code	Description	TNM	SS77	SS2000
00	In situ; noninvasive; intraepithelial	Tis	IS	IS
10	Tumor confined to one lung, WITHOUT extension or conditions described in codes 20-80 (excluding primary in main stem bronchus) (EXCLUDES superficial tumor as described in code 11)	*	L	L
11	Superficial tumor of any size with invasive component limited to bronchial wall, WITH or WITHOUT proximal extension to the main stem bronchus	T1	L	L
20	Extension from other parts of lung to main stem bronchus, NOS (EXCLUDES superficial tumor as described in code 11) Tumor involving main stem bronchus greater than or equal to 2.0 cm from carina (primary in lung or main stem bronchus)	T2	L	L
21	Tumor involving main stem bronchus, NOS (distance from carina not stated and no surgery as described in Note 2)	T2	L	L
23	Tumor confined to hilus	*	L	L
25	Tumor confined to the carina	*	L	L
30	Localized, NOS	*	L	L
40	Atelectasis/obstructive pneumonitis that extends to the hilar region but does not involve the entire lung (or atelectasis/obstructive pneumonitis, NOS) WITHOUT pleural effusion	T2	RE	RE



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45	Extension to: Pleura, visceral or NOS (WITHOUT pleural effusion) Pulmonary ligament (WITHOUT pleural effusion)	T2	RE	RE
50	Tumor of/involving main stem bronchus less than 2.0 cm from carina	T3	L	RE
52	(40) + (50)	T3	RE	RE
53	(45) + (50)	T3	RE	RE
55	Atelectasis/obstructive pneumonitis involving entire lung	T3	RE	RE
56	Parietal pericardium or pericardium, NOS	T3	RE	RE
59	Invasion of phrenic nerve	T3	RE	RE
60	Direct extension to: Brachial plexus, inferior branches or NOS, from superior sulcus Chest (thoracic) wall Diaphragm Pancoast tumor (superior sulcus syndrome), NOS Parietal pleura Note: For separate lesion in chest wall or diaphragm, see CS Mets at DX.	T3	D	RE
61	Superior sulcus tumor WITH encasement of subclavian vessels OR WITH unequivocal involvement of superior branches of brachial plexus (C8 or above)	T4	D	RE
65	Multiple masses/separate tumor nodule(s) in the SAME lobe "Satellite nodules" in SAME lobe	T4	L	RE
70	Blood vessel(s), major (EXCEPT aorta and inferior vena cava, see codes 74 and 77) Azygos vein Pulmonary artery or vein Superior vena cava (SVC syndrome) Carina from lung/mainstem bronchus Compression of esophagus or trachea not specified as direct extension Esophagus Mediastinum, extrapulmonary or NOS Nerve(s): Cervical sympathetic (Horner's syndrome) Recurrent laryngeal (vocal cord paralysis) Vagus Trachea	T4	RE	RE
71	Heart Visceral pericardium	T4	D	D
72	Malignant pleural effusion Pleural effusion, NOS	T4	D	D
73	Adjacent rib	T3	D	D
74	Aorta	T4	D	RE

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75	Vertebra(s) Neural foramina	T4	D	D
76	Pleural tumor foci separate from direct pleural invasion	T4	D	D
77	Inferior vena cava	T4	D	D
79	Pericardial effusion, NOS; malignant pericardial effusion	T4	D	D
78	(73) plus any of [(61-72) or (74-77)]	T4	D	D
80	Further contiguous extension (except to structures specified in CS Mets at DX)	T4	D	D
95	No evidence of primary tumor	T0	U	U
98	Tumor proven by presence of malignant cells in sputum or bronchial washings but not visualized by imaging or bronchoscopy; "occult" carcinoma	TX	U	U
99	Unknown extension Primary tumor cannot be assessed Not documented in patient record	TX	U	U

\*For Extension codes 10, 23, and 25 ONLY, the T category is assigned based on the value of tumor size, as shown in the Extension Size table for this site.

**Lung**

**CS TS/Ext-Eval**

Code	Description	Staging Basis
0	No surgical resection done. Evaluation based on physical examination, imaging examination, or other non-invasive clinical evidence. No autopsy evidence used.	c
1	No surgical resection done. Evaluation based on endoscopic examination, diagnostic biopsy, including fine needle aspiration biopsy, or other invasive techniques including surgical observation without biopsy. No autopsy evidence used.	p
2	No surgical resection done, but evidence derived from autopsy (tumor was suspected or diagnosed prior to autopsy)	p
3	Surgical resection performed WITHOUT pre-surgical systemic treatment or radiation OR surgical resection performed, unknown if pre-surgical systemic treatment or radiation performed. Evidence acquired before treatment, supplemented or modified by the additional evidence acquired during and from surgery, particularly from pathologic examination of the resected specimen	p
5	Surgical resection performed WITH pre-surgical systemic treatment or radiation, BUT tumor size/extension based on clinical evidence.	c
6	Surgical resection performed WITH pre-surgical systemic treatment or radiation; tumor size/extension based on pathologic evidence	y
8	Evidence from autopsy only (tumor was unsuspected or undiagnosed prior to autopsy)	a
9	Unknown if surgical resection done Not assessed; cannot be assessed Unknown if assessed Not documented in patient record	c

**Lung  
CS Lymph Nodes**

Note 1: Code only regional nodes and nodes, NOS, in this field. Distant nodes are coded in the field Mets at DX.  
 Note 2: If at mediastinoscopy/x-ray, the description is "mass", "adenopathy", or "enlargement" of any of the lymph nodes named as regional in codes 10 and 20, assume that at least regional lymph nodes are involved.

Note 3: The words "no evidence of spread" or "remaining examination negative" are sufficient information to consider regional lymph nodes negative in the absence of any statement about nodes.

Note 4: Vocal cord paralysis (resulting from involvement of recurrent branch of the vagus nerve), superior vena cava obstruction, or compression of the trachea or the esophagus may be related to direct extension of the primary tumor or to lymph node involvement. The treatment options and prognosis associated with these manifestations of disease extent fall within the T4-Stage IIIB category; therefore, generally use code 70 for these manifestations. **HOWEVER**, if the primary tumor is peripheral and clearly unrelated to vocal cord paralysis, vena cava obstruction, or compression of the trachea or the esophagus, code these manifestations as mediastinal lymph node involvement (code 20) in CS Lymph Nodes unless there is a statement of involvement by direct extension from the primary tumor.

Code	Description	TNM	SS77	SS2000
00	None; no regional lymph node involvement	N0	NONE	NONE
10	Regional lymph node(s), ipsilateral: Bronchial Hilar (bronchopulmonary) (proximal lobar) (pulmonary root) Intrapulmonary nodes, including involvement by direct extension: Interlobar Lobar Segmental Subsegmental Peri/parabronchial	N1	RN	RN
20	Regional lymph node(s), ipsilateral: Aortic [above diaphragm], NOS: Peri/para-aortic, NOS: Ascending aorta (phrenic) Subaortic (aortico-pulmonary window) Carinal (tracheobronchial) (tracheal bifurcation) Mediastinal, NOS: Anterior Posterior (tracheoesophageal) Pericardial Peri/paraesophageal Peri/paratracheal, NOS: Azygos (lower peritracheal) Pre- and retrotracheal, NOS: Precarinal Pulmonary ligament Subcarinal	N2	RN	RN
50	Regional lymph node(s), NOS	N1	RN	RN
60	Contralateral/bilateral hilar (bronchopulmonary) (proximal lobar) (pulmonary root) Contralateral/bilateral mediastinal Scalene (inferior deep cervical), ipsilateral or contralateral Supraclavicular (transverse cervical), ipsilateral or contralateral	N3	D	D
80	Lymph nodes, NOS	N1	RN	RN
99	Unknown; not stated Regional lymph node(s) cannot be assessed Not documented in patient record	NX	U	U

**Lung**

**CS Reg Nodes Eval**

**Note:** This item reflects the validity of the classification of the item CS Lymph Nodes only according to diagnostic methods employed.

Code	Description	Staging Basis
0	No regional lymph nodes removed for examination. Evidence based on physical examination, imaging examination, or other non-invasive clinical evidence. No autopsy evidence used.	c
1	No regional lymph nodes removed for examination. Evidence based on endoscopic examination, diagnostic biopsy including fine needle aspiration of lymph node(s) or other invasive techniques, including surgical observation without biopsy. No autopsy evidence used.	p
2	No regional lymph nodes removed for examination, but evidence derived from autopsy (tumor was suspected or diagnosed prior to autopsy)	p
3	Regional lymph nodes removed for examination (removal of at least 1 lymph node) WITHOUT pre-surgical systemic treatment or radiation OR lymph nodes removed for examination, unknown if pre-surgical systemic treatment or radiation performed	p
5	Regional lymph nodes removed for examination WITH pre-surgical systemic treatment or radiation, BUT lymph node evaluation based on clinical evidence.	c
6	Regional lymph nodes removed for examination WITH pre-surgical systemic treatment or radiation, and lymph node evaluation based on pathologic evidence	y
8	Evidence from autopsy; tumor was unsuspected or undiagnosed prior to autopsy	a
9	Unknown if lymph nodes removed for examination Not assessed; cannot be assessed Unknown if assessed Not documented in patient record	c

**Lung**

**Reg LN Pos**

**SEE STANDARD TABLE**

**Lung**

**Reg LN Exam**

**SEE STANDARD TABLE**

**Lung  
CS Mets at DX**

Code	Description	TNM	SS77	SS2000
00	No; none	*	NONE	NONE
10	Distant lymph node(s), including cervical nodes	M1	D	D
35	Separate tumor nodule(s) in different lobe, same lung	M1	L	D
37	Extension to: Sternum Skeletal muscle Skin of chest	M1	D	D
39	Extension to: Contralateral lung Contralateral main stem bronchus Separate tumor nodule(s) in contralateral lung	M1	D	D
40	Abdominal organs Distant metastases except distant lymph node(s) (code 10) except those specified in codes 35 to 39, including separate lesion in chest wall or diaphragm Distant metastasis, NOS Carcinomatosis	M1	D	D
50	Distant metastases + Distant node(s) (10) + any of [(35) to (40)]	M1	D	D
99	Unknown if distant metastasis Distant metastasis cannot be assessed Not documented in patient record	**	U	U

\*For CS Mets at DX code 00 only, the M category is assigned based on the value of CS Tumor Size, using the Mets Size Table for Mets at DX code 00 for this site.

\*\*For CS Mets at DX code 99 only, the M category is assigned on the value of CS Tumor Size, using the Mets Size Table for Mets at DX code 99 for this site.

**Lung  
CS Mets Eval  
SEE STANDARD TABLE**

**Lung  
CS Site-Specific Factor 1**

Code	Description
888	Not applicable for this site

**Lung  
CS Site-Specific Factor 2**

Code	Description
888	Not applicable for this site

**Lung**

**CS Site-Specific Factor 3**

Code	Description
888	Not applicable for this site

**Lung**

**CS Site-Specific Factor 4**

Code	Description
888	Not applicable for this site

**Lung**

**CS Site-Specific Factor 5**

Code	Description
888	Not applicable for this site

**Lung**

**CS Site-Specific Factor 6**

Code	Description
888	Not applicable for this site

**Site-Specific Surgery Codes**

**Lung**

**C340–C349**

(Except for M-9750, 9760-9764, 9800-9820, 9826, 9831-9920, 9931-9964, 9980-9989)

Codes

00 None; **no surgery** of primary site; **autopsy ONLY**

19 **Local tumor destruction** or excision, NOS

**Unknown** whether a specimen was sent to **pathology** for surgical events coded 19 (Used principally for cases diagnosed prior to January 1, 2003)

15 Local tumor destruction, NOS

12 Laser ablation or cryosurgery

13 Electrocautery; fulguration (includes use of hot forceps for tumor destruction)

**No specimen sent to pathology** from surgical events 12-13 and 15

20 Excision or resection of less than one lobe, NOS

23 Excision, NOS

24 Laser excision

25 Bronchial sleeve resection **ONLY**

21 Wedge resection

22 Segmental resection, including lingulectomy

**Specimen sent to pathology** from surgical events 20–25

30 **Resection** of [at least one] **lobe** or **bilobectomy**, but less than the whole lung (partial pneumonectomy, NOS)

33 Lobectomy **WITH** mediastinal lymph node dissection

The lymph node dissection should also be coded under *Scope of Regional Lymph Node Surgery* (NAACCR Item # 1292).

45 Lobe or bilobectomy extended, NOS

46 **WITH** chest wall

47 **WITH** pericardium

48 **WITH** diaphragm

55 Pneumonectomy, NOS

[**SEER Note:** Code 55 includes complete pneumonectomy, Sleeve pneumonectomy, Standard pneumonectomy, Total pneumonectomy, Resection of whole lung]

56 **WITH** mediastinal lymph node dissection (radical pneumonectomy)

The lymph node dissection should also be coded under *Scope of Regional Lymph Node Surgery* (NAACCR Item # 1292).

65 Extended pneumonectomy

66 Extended pneumonectomy plus pleura or diaphragm

- 70     Extended radical pneumonectomy  
The lymph node dissection should also be coded under *Scope of Regional Lymph Node Surgery* (NAACCR Item # 1292).
- [**SEER Note:** An extended radical pneumonectomy is a radical pneumonectomy (including removal of mediastinal nodes) and the removal of other tissues or nodes]
- 80     Resection of lung, NOS
- 90     Surgery, NOS
- 99     **Unknown** if surgery performed; **death certificate ONLY**



**Collaborative Staging Codes**

**Heart, Mediastinum**

**C38.0-C38.3, C38.8**

- C38.0 Heart
- C38.1 Anterior mediastinum
- C38.2 Posterior mediastinum
- C38.3 Mediastinum, NOS
- C38.8 Overlapping lesion of heart, mediastinum and pleura

CS Tumor Size CS Extension CS TS/Ext-Eval CS Lymph Nodes CS Reg Nodes Eval Reg LN Pos Reg LN Exam CS Mets at DX CS Mets Eval	CS Site-Specific Factor 1 CS Site-Specific Factor 2 CS Site-Specific Factor 3 CS Site-Specific Factor 4 CS Site-Specific Factor 5 CS Site-Specific Factor 6	The following tables are available at the collaborative staging website: Histology Exclusion Table AJCC Stage Extension Size Table
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**Heart, Mediastinum**

**CS Tumor Size**

**SEE STANDARD TABLE**

**Heart, Mediastinum**

**CS Extension**

**Note:** Sarcomas of the heart and mediastinum are classified as deep tumors. A deep tumor is located either exclusively beneath the superficial fascia, superficial to the fascia with invasion of or through the fascia, or both superficial yet beneath the fascia.

Code	Description	TNM	SS77	SS2000
10	Invasive tumor confined to site of origin	*	L	L
30	Localized, NOS	*	L	L
40	Adjacent connective tissue: Heart: Visceral pericardium (epicardium) (See note in General Instructions on adjacent connective tissue)	*	RE	RE
60	Adjacent organs/structures: Heart: Ascending aorta Parietal pericardium Vena cava Mediastinum: Descending aorta Esophagus Large (named) artery(ies) Large (named) vein(s) Pericardium, NOS Parietal Visceral (epicardium) Phrenic nerve(s)	*	RE	RE

60, cont'd	Pleura, NOS Parietal pleura Visceral pleura of lung Sternum Sympathetic nerve trunk(s) Thoracic duct Thymus Trachea, parietal pleura Vertebra(e)			
80	Further contiguous extension	*	D	D
95	No evidence of primary tumor	T0	U	U
99	Unknown extension Primary tumor cannot be assessed Not documented in patient record	TX	U	U

\*For Extension codes 10-80 ONLY, the T category is assigned based on value of CS Tumor Size from the Extension Size Table for this site.

### Heart, Mediastinum

#### CS TS/Ext-Eval

SEE STANDARD TABLE

### Heart, Mediastinum

#### CS Lymph Nodes

**Note 1:** Regional lymph nodes are defined as those in the vicinity of the primary tumor.

**Note 2:** Regional lymph node involvement is rare. For this schema, if there is no mention of lymph node involvement clinically, assume that lymph nodes are negative (code 00). Use code 99 (Unknown) only when there is no available information on the extent of the patient's disease, for example, when a lab-only case is abstracted from a biopsy report and no clinical history is available.

Code	Description	TNM	SS77	SS2000
00	None; no regional lymph node involvement	N0	NONE	NONE
10	Regional lymph node(s): Aortic (above diaphragm), NOS: Peri/para-aortic, NOS Ascending aorta (phrenic) Subaortic (aortico-pulmonary window) Carinal (tracheobronchial) (tracheal bifurcation) Mediastinal, NOS: Anterior Posterior (tracheoesophageal) Pericardial Peri/paraesophageal Peri/paratracheal, NOS: Azygos (lower peritracheal) Pre- and retrotracheal, NOS: Precarinal Pulmonary ligament Subcarinal Regional lymph node(s), NOS	N1	RN	RN

80	Lymph nodes, NOS	N1	RN	RN
99	Unknown (see Note 2)	NX	U	U

**Heart, Mediastinum  
CS Reg Nodes Eval  
SEE STANDARD TABLE**

**Heart, Mediastinum  
Reg LN Pos  
SEE STANDARD TABLE**

**Heart, Mediastinum  
Reg LN Exam  
SEE STANDARD TABLE**

**Heart, Mediastinum  
CS Mets at DX  
SEE STANDARD TABLE**

**Heart, Mediastinum  
CS Mets Eval  
SEE STANDARD TABLE**

**Heart, Mediastinum  
CS Site-Specific Factor 1**

Code	Description
888	Not applicable for this site

**Heart, Mediastinum  
CS Site-Specific Factor 2**

Code	Description
888	Not applicable for this site

**Heart, Mediastinum  
CS Site-Specific Factor 3**

Code	Description
888	Not applicable for this site

**Heart, Mediastinum**  
**CS Site-Specific Factor 4**

Code	Description
888	Not applicable for this site

**Heart, Mediastinum**  
**CS Site-Specific Factor 5**

Code	Description
888	Not applicable for this site

**Heart, Mediastinum**  
**CS Site-Specific Factor 6**

Code	Description
888	Not applicable for this site

**Collaborative Staging Codes**

**Pleura**

**C38.4**

C38.4 Pleura, NOS

CS Tumor Size	<b>CS Site-Specific Factor 1 -</b>	The following tables are available at the collaborative staging website: Histology Exclusion Table AJCC Stage Pleural Effusion Extension Table
CS Extension	Pleural Effusion	
CS TS/Ext-Eval	CS Site-Specific Factor 2	
CS Lymph Nodes	CS Site-Specific Factor 3	
CS Reg Nodes Eval	CS Site-Specific Factor 4	
Reg LN Pos	CS Site-Specific Factor 5	
Reg LN Exam	CS Site-Specific Factor 6	
CS Mets at DX		
CS Mets Eval		

**Pleura**

**CS Tumor Size**

**SEE STANDARD TABLE**

**Pleura**

**CS Extension**

**Note:** Pleural effusion does not affect the coding of the CS Extension field, but is coded as Site-Specific Factor 1.

Code	Description	TNM	SS77	SS2000
10	Invasive tumor (mesothelioma) confined to pleura, NOS	T1NOS	*	*
12	Ipsilateral parietal pleura, including mediastinal or diaphragmatic pleura, WITHOUT involvement of visceral pleura	T1a	*	*
14	Ipsilateral parietal pleura, including mediastinal or diaphragmatic pleura, WITH focal involvement of visceral pleura	T1b	*	*
16	Ipsilateral parietal pleura, including mediastinal or diaphragmatic pleura, involvement of visceral pleura not stated	T1NOS	*	*
20	Ipsilateral pleura WITH nodule(s) beneath visceral pleural surface Ipsilateral pleural surface with confluent visceral pleural tumor (including fissure)	T2	*	*
30	Localized, NOS	T1NOS	*	*
42	Diaphragm (diaphragmatic muscle)	T2	*	*
50	Mesothelioma nodule(s) which have broken through the visceral pleural surface to the lung surface Lung parenchyma, or lung involvement, NOS	T2	*	*
52	Adjacent connective tissue: Endothoracic fascia Pericardium, non-transmural or NOS	T3	*	*
61	Chest wall, solitary focus of tumor ONLY Mediastinal tissues, mediastinal fat	T3	*	*
63	Diffuse or multifocal invasion of soft tissues of chest wall Heart muscle, myocardium	T4	*	*

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63, cont'd	Medistinal organs Rib			
65	Extension to internal surface of pericardium	T4	*	*
69	Pericardial effusion with positive cytology	T4	*	*
78	Contralateral pleura (For contralateral lung, see CS Mets at DX)	T4	*	*
80	Further contiguous extension: Brachial plexus Cervical tissues Intra-abdominal organs Peritoneum Spine	T4	*	*
95	No evidence of primary tumor	T0	*	*
99	Unknown extension Primary tumor cannot be assessed Not documented in patient record	TX	*	*

\* The mapping to Summary Stage 1977 and Summary Stage 2000 depends on the value of Site-Specific Factor 1, Pleural Effusion. See the extra table, Extension Pleural Effusion Table, for details.

**Pleura**

**CS TS/Ext-Eval**

**SEE STANDARD TABLE**

**Pleura**

**CS Lymph Nodes**

Code	Description	TNM	SS77	SS2000
00	No regional lymph node involvement	N0	NONE	NONE
10	Regional lymph node(s), ipsilateral, intrapulmonary: Hilar: Bronchopulmonary Proximal lobar Pulmonary root Intrapulmonary: Interlobar Lobar Segmental Subsegmental Peri/parabronchial	N1	RN	RN
20	Regional lymph node(s), ipsilateral, mediastinal: Aortic [above diaphragm], NOS: Aorto-pulmonary window Ascending aorta Peri/para-aortic Phrenic Subaortic Carinal: Tracheobronchial Tracheal bifurcation Internal mammary (parasternal)	N2	RN	RN

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20, cont'd	Mediastinal, NOS: Anterior Posterior (tracheoesophageal) Pericardial Peri/paraesophageal [below carina] Peri/paratracheal, NOS: Lower peritracheal (azygos) Upper paratracheal Pretracheal and retrotracheal, NOS: Precarinal Prevascular Pulmonary ligament Subcardial Subcarinal			
50	Regional lymph node(s), NOS	N1	RN	RN
70	Contralateral or bilateral nodes specified in codes 10 or 20 Ipsilateral, contralateral or bilateral nodes: Scalene (inferior deep cervical) Supraclavicular (transverse cervical)	N3	D	D
80	Lymph nodes, NOS	N1	RN	RN
99	Unknown; not stated Regional lymph node(s) cannot be assessed Not documented in patient record	NX	U	U

**Pleura**

**CS Reg Nodes Eval**

**SEE STANDARD TABLE**

**Pleura**

**Reg LN Pos**

**SEE STANDARD TABLE**

**Pleura**

**Reg LN Exam**

**SEE STANDARD TABLE**

**Pleura**

**CS Mets at DX**

Code	Description	TNM	SS77	SS2000
00	No; none	M0	NONE	NONE
10	Distant lymph node(s), including cervical nodes	M1	D	D
35	Direct extension to contralateral lung	M1	D	D
40	Distant metastases, except code [(10) or (35)] Distant metastasis, NOS (includes discontinuous involvement of contralateral pleura/chest wall) Carcinomatosis	M1	D	D
50	(10) + (40) Distant lymph node(s) plus distant metastases	M1	D	D

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99	Unknown if distant metastasis Distant metastasis cannot be assessed Not documented in patient record	MX	U	U
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**Pleura**

**CS Mets Eval**

**SEE STANDARD TABLE**

**Pleura**

**CS Site-Specific Factor 1 Pleural Effusion**

Code	Description
000	No pleural effusion
010	Pleural effusion, non-malignant
020	Pleural effusion, malignant
030	Pleural effusion, NOS
999	Unknown if pleural effusion

**Pleura**

**CS Site-Specific Factor 2**

Code	Description
888	Not applicable for this site

**Pleura**

**CS Site-Specific Factor 3**

Code	Description
888	Not applicable for this site

**Pleura**

**CS Site-Specific Factor 4**

Code	Description
888	Not applicable for this site

**Pleura**

**CS Site-Specific Factor 5**

Code	Description
888	Not applicable for this site



**Pleura**

**CS Site-Specific Factor 6**

Code	Description
888	Not applicable for this site

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**Collaborative Staging Codes**

**Other and Ill-Defined Respiratory Sites and Intrathoracic Organs**

**C39.0, C39.8-C39.9**

C39.0 Upper respiratory tract, NOS

C39.8 Overlapping lesion of respiratory system and intrathoracic organs

C39.9 Ill-defined sites within respiratory system

**Note:** AJCC does not define TNM staging for this site.

CS Tumor Size	CS Site-Specific Factor 1	The following tables are available at the collaborative staging website: Histologies for Which AJCC Staging Is Not Generated AJCC Stage
CS Extension	CS Site-Specific Factor 2	
CS TS/Ext-Eval	CS Site-Specific Factor 3	
CS Lymph Nodes	CS Site-Specific Factor 4	
CS Reg Nodes Eval	CS Site-Specific Factor 5	
Reg LN Pos	CS Site-Specific Factor 6	
Reg LN Exam		
CS Mets at DX		
CS Mets Eval		

**Other and Ill-Defined Respiratory Sites and Intrathoracic Organs**

**CS Tumor Size**

SEE STANDARD TABLE

**Other and Ill-Defined Respiratory Sites and Intrathoracic Organs**

**CS Extension**

Code	Description	TNM	SS77	SS2000
00	In situ; noninvasive; intraepithelial	NA	IS	IS
10	Invasive tumor confined to site of origin	NA	L	L
30	Localized, NOS	NA	L	L
40	Adjacent connective tissue	NA	RE	RE
60	Adjacent organs/structures Descending aorta Esophagus Large (named) artery(ies) Large (named) vein(s) Pericardium, NOS Parietal Visceral (epicardium) Phrenic nerve(s) Pleura, NOS Parietal Visceral Sternum Sympathetic nerve trunk(s) Thoracic duct Thymus Trachea Vertebra(e) Visceral pleura of lung	NA	RE	RE

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80	Further contiguous extension	NA	D	D
95	No evidence of primary tumor	NA	U	U
99	Unknown extension Primary tumor cannot be assessed Not documented in patient record	NA	U	U

**Other and Ill-Defined Respiratory Sites and Intrathoracic Organs**

**CS TS/Ext-Eval**

Code	Description	Staging Basis
9	Not applicable for this site	NA

**Other and Ill-Defined Respiratory Sites and Intrathoracic Organs**

**CS Lymph Nodes**

**Note:** Code only regional nodes and nodes, NOS, in this field. Distant nodes are coded in the field Mets at DX.

Code	Description	TNM	SS77	SS2000
00	None; no regional lymph node involvement	NA	NONE	NONE
10	Regional lymph nodes: 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	NA	RN	RN
80	Lymph nodes, NOS	NA	RN	RN
99	Unknown; not stated Regional lymph node(s) cannot be assessed Not documented in patient record	NA	U	U

**Other and Ill-Defined Respiratory Sites and Intrathoracic Organs**

**CS Reg Nodes Eval**

Code	Description	Staging Basis
9	Not applicable for this site	NA

**Other and Ill-Defined Respiratory Sites and Intrathoracic Organs**

**Reg LN Pos**

SEE STANDARD TABLE

**Other and Ill-Defined Respiratory Sites and Intrathoracic Organs**

**Reg LN Exam**

SEE STANDARD TABLE

**Other and Ill-Defined Respiratory Sites and Intrathoracic Organs**

**CS Mets at DX**

Code	Description	TNM	SS77	SS2000
00	No; none	NA	NONE	NONE
10	Distant lymph node(s), NOS	NA	D	D
40	Distant metastases except distant lymph node(s) (code 10) Distant metastasis, NOS Carcinomatosis	NA	D	D
50	(10) + (40) Distant lymph node(s) plus other distant metastases	NA	D	D
99	Unknown if distant metastasis Distant metastasis cannot be assessed Not documented in patient record	NA	U	U

**Other and Ill-Defined Respiratory Sites and Intrathoracic Organs**

**CS Mets Eval**

Code	Description	Staging Basis
9	Not applicable for this site	NA

**Other and Ill-Defined Respiratory Sites and Intrathoracic Organs**

**CS Site-Specific Factor 1**

Code	Description
888	Not applicable for this site

**Other and Ill-Defined Respiratory Sites and Intrathoracic Organs**

**CS Site-Specific Factor 2**

Code	Description
888	Not applicable for this site

**Other and Ill-Defined Respiratory Sites and Intrathoracic Organs**

**CS Site-Specific Factor 3**

Code	Description
888	Not applicable for this site

**Other and Ill-Defined Respiratory Sites and Intrathoracic Organs**

**CS Site-Specific Factor 4**

Code	Description
888	Not applicable for this site

**Other and Ill-Defined Respiratory Sites and Intrathoracic Organs**

**CS Site-Specific Factor 5**

Code	Description
888	Not applicable for this site

**Other and Ill-Defined Respiratory Sites and Intrathoracic Organs**

**CS Site-Specific Factor 6**

Code	Description
888	Not applicable for this site

## Site-Specific Surgery Codes

### All Other Sites

C142–C148, C170–C179, C239, C240–C249, C260–C269, C300–C301, C310–C319, C339, C379, **C380–C388**, **C390–C399**, C480–C488, C510–C519, C529, C570–C579, C589, C600–C609, C630–C639, C680–C689, C690–C699, C740–C749, C750–C759

(Except for M-9750, 9760-9764, 9800-9820, 9826, 9831-9920, 9931-9964, 9980-9989)

#### Codes

00 None; **no surgery** of primary site; **autopsy ONLY**

10 Local tumor destruction, NOS

11 Photodynamic therapy (PDT)

12 Electrocautery; fulguration (includes use of hot forceps for tumor destruction)

13 Cryosurgery

14 Laser

No specimen sent to **pathology** from surgical events 10–14

20 **Local tumor excision**, NOS

26 Polypectomy

27 Excisional biopsy

Any **combination** of 20 or 26–27 WITH

21 Photodynamic therapy (PDT)

22 Electrocautery

23 Cryosurgery

24 Laser ablation

25 Laser excision

[**SEER Note:** Codes 21 to 25 above combine 20 local tumor excision, 26 Polypectomy or 27 Excisional biopsy with 21 PDT, 22 Electrocautery, 23 Cryosurgery, 24 Laser ablation, or 25 Laser excision]

**Specimen** sent to **pathology** from surgical events 20–27

30 Simple/partial surgical removal of primary site

40 **Total surgical removal** of primary site; enucleation

41 Total enucleation (for eye surgery only)

50 Surgery stated to be “**debulking**”

60 Radical surgery

Partial or total removal of the primary site WITH a resection in continuity (partial or total removal) with other organs

[**SEER Note:** In continuity with or “en bloc” means that all of the tissues were removed during the same procedure, but not necessarily in a single specimen]

90 Surgery, NOS

99 **Unknown** if surgery performed; **death certificate ONLY**

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**SEER Site-Specific Coding Guidelines**

**BONES, JOINTS, AND ARTICULAR CARTILAGE C400–C419**

**PERIPHERAL NERVES AND AUTONOMIC NERVOUS SYSTEM C470–C479**

**CONNECTIVE, SUBCUTANEOUS, AND OTHER SOFT TISSUES C490–C499**

(Except for M-9750, 9760-9764, 9800-9820, 9826, 9831-9920, 9931-9964, 9980-9989)

**Laterality**

Laterality is required for sites C40.0-C40.3, C41.3-C41.4, C47.1-C47.2, and C49.1-C49.2.

**Three Grade System (Nuclear Grade)**

There are several sites for which a three-grade system is used. The patterns of cell growth are measured on a scale of 1, 2, and 3 (also referred to as low, medium, and high grade). This system measures the proportion of cancer cells that are growing and making new cells and how closely they resemble the cells of the host tissue. Thus, it is similar to a four-grade system, but simply divides the spectrum into three rather than four categories (see comparison table below). The expected outcome is more favorable for lower grades. Soft tissue sarcomas are evaluated using a three-grade system.

If a grade is written as 2/3 that means this is a grade 2 of a three-grade system. Do not simply code the numerator. Use the following table to convert the grade to SEER codes.

Term	Grade	SEER Code
1/3, 1/2	Low grade	2
2/3	Intermediate grade	3
3/3, 2/2	High grade	4

**Sarcoma**

Sarcomas are graded low, intermediate or high grade by the pathologist. Use the following table to convert these terms to a histologic grade.

Term	Grade	SEER Code
Well differentiated	I	1
Fairly well differentiated	II	2
Low grade	I-II	2
Mid differentiated	II	2
Moderately differentiated	II	2
Partially differentiated	II	2
Partially well differentiated	I-II	2
Partially well differentiated	II	2
Relatively or generally well differentiated	II	2
Medium grade, intermediate grade	II-III	3
Moderately poorly differentiated	III	3
Moderately undifferentiated	III	3
Pleomorphic	III	3
Poorly differentiated	III	3
Relatively poorly differentiated	III	3
Relatively undifferentiated	III	3
Slightly differentiated	III	3
High grade	III-IV	4
Undifferentiated, anaplastic, not differentiated	IV	4

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**Collaborative Staging Codes**

**Bone**

**C40.0-C40.3, C40.8-C40.9, C41.0-C41.4, C41.8-C41.9**

- C40.0 Long bones of upper limb, scapula and associated joints
- C40.1 Short bones of upper limb and associated joints
- C40.2 Long bones of lower limb and associated joints
- C40.3 Short bones of lower limb and associated joints
- C40.8 Overlapping lesion of bones, joints and articular cartilage of limbs
- C40.9 Bone of limb, NOS
- C41.0 Bones of skull and face and associated joints (excludes mandible C41.1)
- C41.1 Mandible
- C41.2 Vertebral column (excludes sacrum and coccyx C41.4)
- C41.3 Rib, sternum, clavicle and associated joints
- C41.4 Pelvic bones, sacrum, coccyx and associated joints
- C41.8 Overlapping lesion of bones, joints and articular cartilage
- C41.9 Bone, NOS

**Note:** Laterality must be coded for C40.0-C40.3, and C41.3-C41.4. For sternum, sacrum, coccyx, and symphysis pubis, laterality is coded 0.

CS Tumor Size	CS Site-Specific Factor 1	The following tables are available at the collaborative staging website: Histology Exclusion Table AJCC Stage Extension Size Table
CS Extension	CS Site-Specific Factor 2	
CS TS/Ext-Eval	CS Site-Specific Factor 3	
CS Lymph Nodes	CS Site-Specific Factor 4	
CS Reg Nodes Eval	CS Site-Specific Factor 5	
Reg LN Pos	CS Site-Specific Factor 6	
Reg LN Exam		
CS Mets at DX		
CS Mets Eval		

**Bone**

**CS Tumor Size**

**SEE STANDARD TABLE**

**Bone**

**CS Extension**

**Note:** 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.

Code	Description	TNM	SS77	SS2000
10	Invasive tumor confined to cortex of bone	*	L	L
20	Extension beyond cortex to periosteum (no break in periosteum)	*	L	L
30	Localized, NOS	*	L	L
40	Extension beyond periosteum to surrounding tissues, including adjacent skeletal muscle(s)	*	RE	RE
60	Adjacent bone/cartilage	*	RE	RE
70	Skin	*	D	D
80	Further contiguous extension	*	D	D

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82	Skip metastases or discontinuous tumors in the same bone	T3	D	D
95	No evidence of primary tumor	T0	U	U
99	Unknown extension Primary tumor cannot be assessed Not documented in patient record	TX	U	U

\* For codes 10, 20, 30, 40, 60, 70, and 80 ONLY, the T category is assigned based on the value of CS Tumor Size, as shown in the Extension Size Table for this site.

**Bone**

**CS TS/Ext-Eval**

**SEE STANDARD TABLE**

**Bone**

**CS Lymph Nodes**

**Note 1:** Code only regional nodes and nodes, NOS, in this field. Distant nodes are coded in the field Mets at DX.

**Note 2:** Regional lymph nodes are defined as those in the vicinity of the primary tumor.

**Note 3:** Regional lymph node involvement is rare. If there is no mention of lymph node involvement clinically, assume that lymph nodes are negative.

Code	Description	TNM	SS77	SS2000
00	None; no regional lymph node involvement	N0	NONE	NONE
10	Regional lymph node(s)	N1	RN	RN
80	Lymph nodes, NOS	N1	RN	RN
99	Unknown; not stated Regional lymph node(s) cannot be assessed Not documented in patient record	NX	U	U

**Bone**

**CS Reg Nodes Eval**

**SEE STANDARD TABLE**

**Bone**

**Reg LN Pos**

**SEE STANDARD TABLE**

**Bone**

**Reg LN Exam**

**SEE STANDARD TABLE**

**Bone**

**CS Mets at DX**

Code	Description	TNM	SS77	SS2000
00	No; none	M0	NONE	NONE
10	Distant lymph node(s)	M1b	D	D
30	Distant metastasis to lung only	M1a	D	D
40	Distant metastases except distant lymph node(s) or lung Distant metastasis, NOS Carcinomatosis	M1b	D	D
50	(10) + [(30) + 40] Distant lymph node(s) plus other distant metastases	M1b	D	D
55	Stated as M1, NOS	M1NOS	D	D
99	Unknown if distant metastasis Distant metastasis cannot be assessed Not documented in patient record	MX	U	U

**Bone**

**CS Mets Eval**

**SEE STANDARD TABLE**

**Bone**

**CS Site-Specific Factor 1**

Code	Description
888	Not applicable for this site

**Bone**

**CS Site-Specific Factor 2**

Code	Description
888	Not applicable for this site

**Bone**

**CS Site-Specific Factor 3**

Code	Description
888	Not applicable for this site

**Bone**

**CS Site-Specific Factor 4**

Code	Description
888	Not applicable for this site

**Bone**

**CS Site-Specific Factor 5**

Code	Description
888	Not applicable for this site

**Bone**

**CS Site-Specific Factor 6**

Code	Description
888	Not applicable for this site

**Site-Specific Surgery Codes**

**Bones, Joints, And Articular Cartilage C400–C419**

Peripheral Nerves And Autonomic Nervous System C470–C479

Connective, Subcutaneous, And Other Soft Tissues C490–C499

(Except for M-9750, 9760-9764, 9800-9820, 9826, 9831-9920, 9931-9964, 9980-9989)

Codes

00 None; **no surgery** of primary site; **autopsy ONLY**

19 Local tumor destruction or excision, NOS

**Unknown** whether a specimen was sent to **pathology** for surgical events coded 19 (Principally for cases diagnosed prior to January 1, 2003)

15 Local tumor destruction

**No** specimen sent to **pathology** from surgical event 15

25 Local excision

26 Partial resection

**Specimen** sent to **pathology** from surgical events 25–26

30 **Radical excision** or **resection** of lesion WITH limb salvage

40 Amputation of limb

41 Partial amputation of limb

42 Total amputation of limb

50 Major amputation, NOS

51 Forequarter, including scapula

52 Hindquarter, including ilium/hip bone

53 Hemipelvectomy, NOS

54 Internal hemipelvectomy

90 Surgery, NOS

99 **Unknown** if surgery performed; **death certificate ONLY**

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**Collaborative Staging Codes**

**Skin [excl. Skin of Eyelid] [excl. Malignant Melanoma, Kaposi Sarcoma, Mycosis Fungoides, Sezary Disease, and Other Lymphomas]**

**C44.0, C44.2-C44.9**

- C44.0 Skin of lip, NOS
- C44.2 External ear
- C44.3 Skin of ear and unspecified parts of face
- C44.4 Skin of scalp and neck
- C44.5 Skin of trunk
- C44.6 Skin of upper limb and shoulder
- C44.7 Skin of lower limb and hip
- C44.8 Overlapping lesion of skin
- C44.9 Skin, NOS

**Note:** Laterality must be coded for C44.2-C44.3 and C44.5-C44.7. For codes C44.3 and C44.5, if the tumor is midline (e.g., chin), code as 9, midline, in the laterality field.

CS Tumor Size	CS Site-Specific Factor 1	The following tables are available at the collaborative staging website: Histology Exclusion Table AJCC Stage Extension Size Table
CS Extension	CS Site-Specific Factor 2	
CS TS/Ext-Eval	CS Site-Specific Factor 3	
CS Lymph Nodes	CS Site-Specific Factor 4	
CS Reg Nodes Eval	CS Site-Specific Factor 5	
Reg LN Pos	CS Site-Specific Factor 6	
Reg LN Exam		
CS Mets at DX		
CS Mets Eval		

**Skin [excl. Skin of Eyelid] [excl. Malignant Melanoma, Kaposi Sarcoma, Mycosis Fungoides, Sezary Disease, and Other Lymphomas]**

**CS Tumor Size**

SEE STANDARD TABLE

**Skin [excl. Skin of Eyelid] [excl. Malignant Melanoma, Kaposi Sarcoma, Mycosis Fungoides, Sezary Disease, and Other Lymphomas]**

**CS Extension**

**Note 1:** In the case of multiple simultaneous tumors, code the tumor with greatest extension.

**Note 2:** Skin ulceration does not alter the Collaborative Stage classification.

**Note 3:** Skin of genital sites is not included in this schema. These sites are skin of vulva (C51.0-C51.2, C51.8-C51.9), skin of penis (C60.0-C60.1, C60.8, C60.9) and skin of scrotum (C63.2).

Code	Description	TNM	SS77	SS2000
00	In situ: noninvasive; intraepidermal; Bowen disease	Tis	IS	IS
10	Lesion(s) confined to dermis	*	L	L
40	Localized, NOS	*	L	L
50	Subcutaneous tissue (through entire dermis)	*	L	L
70	Underlying cartilage, bone, skeletal muscle	T4	D	RE
80	Further contiguous extension	T4	D	D
95	No evidence of primary tumor	T0	U	U

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99	Unknown extension Primary tumor cannot be assessed Not documented in patient record	TX	U	U
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\* For Extension codes 10, 40 and 50 ONLY, the T category is assigned based on value of CS Tumor Size from Extension Size Table for this site.

**Skin [excl. Skin of Eyelid] [excl. Malignant Melanoma, Kaposi Sarcoma, Mycosis Fungoides, Sezary Disease, and Other Lymphomas]  
CS TS/Ext-Eval  
SEE STANDARD TABLE**

**Skin [excl. Skin of Eyelid] [excl. Malignant Melanoma, Kaposi Sarcoma, Mycosis Fungoides, Sezary Disease, and Other Lymphomas]  
CS Lymph Nodes**

**Note:** Code only regional nodes and nodes, NOS, in this field. Distant nodes are coded in the field Mets at DX.

Code	Description	TNM	SS77	SS2000
00	None; no regional lymph node involvement	N0	NONE	NONE
10	Regional lymph node(s) by primary site (includes bilateral or contralateral nodes for head, neck, and trunk) Head and Neck: All subsites: Cervical Lip: Mandibular, NOS: Submandibular (submaxillary) External ear/auditory canal: Mastoid (post-/retro-auricular) (occipital) Preauricular Face, Other (cheek, chin, forehead, jaw, nose and temple): Facial, NOS: Buccinator (buccal) Nasolabial Mandibular, NOS: Submandibular (submaxillary) Parotid, NOS: Infra-auricular Preauricular Scalp: Mastoid (post-/retro-auricular) (occipital) Parotid, NOS: Infra-auricular Preauricular Spinal accessory (posterior cervical) Neck: Axillary Mandibular, NOS Mastoid (post-/retro-auricular) (occipital) Parotid, NOS: Infra-auricular Preauricular Spinal accessory (posterior cervical) Supraclavicular (transverse cervical)	N1	RN	RN

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10, cont'd	Upper Trunk: Axillary Cervical Internal mammary (parasternal) Supraclavicular (transverse cervical) Lower Trunk: Femoral (superficial inguinal) Arm/Shoulder: Axillary Epitrochlear for hand/forearm Spinal accessory for shoulder Leg/Hip: Femoral (superficial inguinal) Popliteal for heel and calf All sites: Regional lymph node(s), NOS			
20	Head and Neck: Lip: Facial, NOS: Buccinator (buccal) Nasolabial Submental Parotid, NOS: Infra-auricular Preauricular Face, Other (cheek, chin, forehead, jaw, nose, and temple): Submental Neck: Submental	N1	D	RN
30	(10) + (20)	N1	D	RN
80	Lymph nodes, NOS	N1	RN	RN
99	Unknown; not stated Regional lymph node(s) cannot be assessed Not documented in patient record	NX	U	U

**Skin [excl. Skin of Eyelid] [excl. Malignant Melanoma, Kaposi Sarcoma, Mycosis Fungoides, Sezary Disease, and Other Lymphomas]**

**CS Reg Nodes Eval**

**SEE STANDARD TABLE**

**Skin [excl. Skin of Eyelid] [excl. Malignant Melanoma, Kaposi Sarcoma, Mycosis Fungoides, Sezary Disease, and Other Lymphomas]**

**Reg LN Pos**

**SEE STANDARD TABLE**

**Skin [excl. Skin of Eyelid] [excl. Malignant Melanoma, Kaposi Sarcoma, Mycosis Fungoides, Sezary Disease, and Other Lymphomas]**

**Reg LN Exam**

**SEE STANDARD TABLE**

**Skin [excl. Skin of Eyelid] [excl. Malignant Melanoma, Kaposi Sarcoma, Mycosis Fungoides, Sezary Disease, and Other Lymphomas]**

**CS Mets at DX**

**SEE STANDARD TABLE**

**Skin [excl. Skin of Eyelid] [excl. Malignant Melanoma, Kaposi Sarcoma, Mycosis Fungoides, Sezary Disease, and Other Lymphomas]**

**CS Mets Eval**

**SEE STANDARD TABLE**

**Skin [excl. Skin of Eyelid] [excl. Malignant Melanoma, Kaposi Sarcoma, Mycosis Fungoides, Sezary Disease, and Other Lymphomas]**

**CS Site-Specific Factor 1**

Code	Description
888	Not applicable for this site

**Skin [excl. Skin of Eyelid] [excl. Malignant Melanoma, Kaposi Sarcoma, Mycosis Fungoides, Sezary Disease, and Other Lymphomas]**

**CS Site-Specific Factor 2**

Code	Description
888	Not applicable for this site

**Skin [excl. Skin of Eyelid] [excl. Malignant Melanoma, Kaposi Sarcoma, Mycosis Fungoides, Sezary Disease, and Other Lymphomas]**

**CS Site-Specific Factor 3**

Code	Description
888	Not applicable for this site

**Skin [excl. Skin of Eyelid] [excl. Malignant Melanoma, Kaposi Sarcoma, Mycosis Fungoides, Sezary Disease, and Other Lymphomas]**

**CS Site-Specific Factor 4**

Code	Description
888	Not applicable for this site

**Skin [excl. Skin of Eyelid] [excl. Malignant Melanoma, Kaposi Sarcoma, Mycosis Fungoides, Sezary Disease, and Other Lymphomas]**

**CS Site-Specific Factor 5**

Code	Description
888	Not applicable for this site

**Skin [excl. Skin of Eyelid] [excl. Malignant Melanoma, Kaposi Sarcoma, Mycosis Fungoides, Sezary Disease, and Other Lymphomas]**

**CS Site-Specific Factor 6**

Code	Description
888	Not applicable for this site

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**Collaborative Staging Codes**

**Skin of Eyelid**

**C44.1**

C44.1 Eyelid

**Note:** Laterality must be coded for this site.

CS Tumor Size	CS Site-Specific Factor 1	The following tables are available at the collaborative staging website: Histology Exclusion Table AJCC Stage for TNM sites with no stage groupings Extension Size Table
CS Extension	CS Site-Specific Factor 2	
CS TS/Ext-Eval	CS Site-Specific Factor 3	
CS Lymph Nodes	CS Site-Specific Factor 4	
CS Reg Nodes Eval	CS Site-Specific Factor 5	
Reg LN Pos	CS Site-Specific Factor 6	
Reg LN Exam		
CS Mets at DX		
CS Mets Eval		

**Skin of Eyelid**

**CS Tumor Size**

**SEE STANDARD TABLE**

**Skin of Eyelid**

**CS Extension**

**Note 1:** In the case of multiple simultaneous tumors, code the tumor with greatest extension.

**Note 2:** Skin ulceration does not alter the Collaborative Stage classification.

**Note 3:** Presence of tumor at eyelid margin takes priority over depth of invasion in dermis/tarsal plate; i.e., code 25 takes priority over codes 10-20.

Code	Description	TNM	SS77	SS2000
00	In situ; noninvasive; intraepithelial Bowen disease; intraepidermal	Tis	IS	IS
10	Lesion(s) confined to dermis Minimal infiltration of dermis (not invading tarsal plate)	T1	L	L
20	Infiltrates deeply into dermis (invading tarsal plate)	T2	L	L
25	Tumor at eyelid margin	*	L	L
30	Involves full eyelid thickness	T3	L	L
40	Localized, NOS	T1	L	L
50	Subcutaneous tissue (through entire dermis)	T3	L	L
60	Adjacent structures, including Bulbar conjunctiva Globe Perineural space Sclera Soft tissues of orbit	T4	D	RE
70	Bone/periosteum of orbit Skeletal muscle Underlying cartilage	T4	D	RE

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72	Nasal cavity Paranasal sinuses	T4	D	D
74	Central nervous system	T4	D	D
75	Metastatic skin lesion(s)	T4	D	D
80	Further contiguous extension	T4	D	D
95	No evidence of primary tumor	T0	U	U
99	Unknown extension Primary tumor cannot be assessed Not documented in patient record	TX	U	U

\* For Extension code 25 ONLY, the T category is assigned based on value of CS Tumor Size as shown in Extension Size Table. Tumors 5mm or less are T1, tumors 6-10mm are T2, and tumors more than 10mm are T3.

**Skin of Eyelid**  
**CS TS/Ext-Eval**  
**SEE STANDARD TABLE**

**Skin of Eyelid**  
**CS Lymph Nodes**

**Note:** Code only regional nodes and nodes, NOS, in this field. Distant nodes are coded in the field Mets at DX.

Code	Description	TNM	SS77	SS2000
00	None; no regional lymph node involvement	N0	NONE	NONE
10	Regional lymph node(s) Cervical, NOS Facial, NOS: Buccinator (buccal) Nasolabial Mandibular, NOS: Submandibular (submaxillary) Submental Parotid, NOS: Infra-auricular Preauricular Regional lymph node(s), NOS	N1	RN	RN
80	Lymph nodes, NOS	N1	RN	RN
99	Unknown; not stated Regional lymph node(s) cannot be assessed Not documented in patient record	NX	U	U

**Skin of Eyelid**  
**CS Reg Nodes Eval**  
**SEE STANDARD TABLE**



**Skin of Eyelid**  
**Reg LN Pos**  
**SEE STANDARD TABLE**

**Skin of Eyelid**  
**Reg LN Exam**  
**SEE STANDARD TABLE**

**Skin of Eyelid**  
**CS Mets at DX**  
**SEE STANDARD TABLE**

**Skin of Eyelid**  
**CS Mets Eval**  
**SEE STANDARD TABLE**

**Skin of Eyelid**  
**CS Site-Specific Factor 1**

Code	Description
888	Not applicable for this site

**Skin of Eyelid**  
**CS Site-Specific Factor 2**

Code	Description
888	Not applicable for this site

**Skin of Eyelid**  
**CS Site-Specific Factor 3**

Code	Description
888	Not applicable for this site

**Skin of Eyelid**  
**CS Site-Specific Factor 4**

Code	Description
888	Not applicable for this site

**Skin of Eyelid**  
**CS Site-Specific Factor 5**

Code	Description
888	Not applicable for this site

**Skin of Eyelid**

**CS Site-Specific Factor 6**

Code	Description
888	Not applicable for this site

**Site-Specific Surgery Codes**

**Skin**

**C440–C449**

(Except for M-9750, 9760-9764, 9800-9820, 9826, 9831-9920, 9931-9964, 9980-9989)

Codes

00 None; **no surgery** of primary site; **autopsy ONLY**

10 Local tumor destruction, NOS

11 Photodynamic therapy (PDT)

12 Electrocautery; fulguration (includes use of hot forceps for tumor destruction)

13 Cryosurgery

14 Laser ablation

**No specimen sent to pathology** from surgical events 10–14

20 **Local tumor excision**, NOS

26 Polypectomy

27 Excisional biopsy

Any **combination** of 20 or 26–27 WITH

21 Photodynamic therapy (PDT)

22 Electrocautery

23 Cryosurgery

24 Laser ablation

25 Laser excision

[**SEER Note:** Codes 21 to 25 above combine 20 Local tumor excision, 26 Polypectomy or 27 Excisional biopsy with 21 PDT, 22 Electrocautery, 23 Cryosurgery, 24 Laser ablation, or 25 Laser excision]

**Specimen sent to pathology** from surgical events 20–27

[**SEER Notes:** Code UVB phototherapy for mycosis fungoides primaries under Surgery of Primary Site for skin. Assign code 11 if there is no pathology specimen. Assign code 21 if there is a pathology specimen. Codes 20-27 include shave and wedge resection]

30 **Biopsy** of primary tumor **followed by a gross excision** of the lesion (does not have to be done under the same anesthesia)

31 Shave biopsy followed by a gross excision of the lesion

32 Punch biopsy followed by a gross excision of the lesion

33 Incisional biopsy followed by a gross excision of the lesion

34 Mohs surgery, NOS

35 Mohs with 1-cm margin or less

36 Mohs with more than 1-cm margin

[**SEER Notes:** Codes 30 to 33 include less than a wide excision, less than 1 cm margin or margins are unknown. If it is stated to be a **wide excision** or **reexcision**, but the **margins are unknown**, code to 30. Code 45 represents a wide excision in which it is known that the margins of excision are greater than 1 cm.]

45 **Wide excision** or **reexcision** of lesion or **minor** (local) **amputation** with margins more than 1 cm, NOS. Margins **MUST** be microscopically negative.

46 WITH margins more than 1 cm and less than or equal to 2 cm

47 WITH margins greater than 2 cm

If the excision does not have microscopically negative margins greater than 1 cm, use the appropriate code, 20-36.

- 60 Major amputation
- 90 Surgery, NOS
- 99 **Unknown** if surgery performed; **death certificate** ONLY

**Collaborative Staging Codes**

**Malignant Melanoma of Skin, Vulva, Penis, Scrotum**

**C44.0-C44.9, C51.0-C51.2, C51.8-C51.9, C60.0-C60.2, C60.8-C60.9, C63.2**

(M-8720-8790)

C44.0 Skin of lip, NOS

C44.1 Eyelid

C44.2 External ear

C44.3 Skin of ear and unspecified parts of face

C44.4 Skin of scalp and neck

C44.5 Skin of trunk

C44.6 Skin of upper limb and shoulder

C44.7 Skin of lower limb and hip

C44.8 Overlapping lesion of skin

C44.9 Skin, NOS

C51.0 Labium majus

C51.1 Labium minus

C51.2 Clitoris

C51.8 Overlapping lesion of vulva

C51.9 Vulva, NOS

C60.0 Prepuce

C60.1 Glans penis

C60.2 Body of penis

C60.8 Overlapping lesion of penis

C60.9 Penis

C63.2 Scrotum, NOS

**Note 1:** Laterality must be coded for C44.1-C44.3, and C44.5-C44.7. For codes C44.3 and C44.5, if the tumor is midline (e.g., chin), code as 9, midline, in the laterality field.

**Note 2:** For melanoma of sites other than those above, use the site-specific schema for the appropriate site.

**Note 3:** The level of invasion, as defined by Dr. Wallace Clark, is used when defining subcategories of T1 melanomas, but not for thicker melanoma (i.e, T2, T3 or T4).

CS Tumor Size	<b>CS Site-Specific Factor 1 -</b>	The following tables are available at the collaborative staging website: Histologies for Which AJCC Staging Is Not Generated AJCC Stage Thickness and Ulceration Extension and Ulceration CS Reg Nodes Positive Clinical Status Code for Lymph Node (N1) Clinical Status Code for Lymph Node Category N (N2) Mets at DX and LDH
CS Extension	Measured Thickness (Depth),	
CS TS/Ext-Eval	Breslow's Measurement	
CS Lymph Nodes	<b>CS Site-Specific Factor 2 -</b>	
CS Reg Nodes Eval	Ulceration	
Reg LN Pos	<b>CS Site-Specific Factor 3 -</b>	
Reg LN Exam	Clinical Status of Lymph Node	
CS Mets at DX	Mets	
CS Mets Eval	<b>CS Site-Specific Factor 4 - LDH</b>	
	CS Site-Specific Factor 5	
	CS Site-Specific Factor 6	

**Malignant Melanoma of Skin, Vulva, Penis, Scrotum**

**CS Tumor Size**

**Note:** Record the size of the tumor in the CS Tumor Size table below, not depth or thickness. Depth or thickness is recorded in Site-Specific Factor 1 in the Measured Thickness (Depth), Breslow's Measurement table.

Code	Description
000	No mass/tumor found
001-988	001 - 988 millimeters (code exact size in millimeters)
989	989 millimeters or larger

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990	Microscopic focus or foci only, no size of focus given
991	Described as less than 1 cm
992	Described as less than 2 cm
993	Described as less than 3 cm
994	Described as less than 4 cm
995	Described as less than 5 cm
999	Unknown; size not stated Not documented in patient record

**Malignant Melanoma of Skin, Vulva, Penis, Scrotum**

**CS Extension**

**Note 1:** If there is a discrepancy between the Clark level and the pathologic description of extent, use the higher (more extensive) code.

**Note 2:** Satellite lesions/nodules or in-transit metastasis are coded under CS Lymph Nodes.

**Note 3:** Ulceration of melanoma is coded in Site-Specific Factor 2.

Code	Description	TNM	SS77	SS2000
00	In situ: noninvasive; intraepidermal Clark's level I Basement membrane of the epidermis is intact	Tis	IS	IS
10	Papillary dermis invaded Clark's level II	*	L	L
20	Papillary-reticular dermal interface invaded Clark's level III	*	L	L
30	Reticular dermis invaded Clark's level IV	*	L	L
40	Skin/dermis, NOS Localized, NOS	*	L	L
50	Subcutaneous tissue invaded (through entire dermis) Clark's level V	*	L	RE
80	Further contiguous extension: Underlying cartilage, bone, skeletal muscle	*	D	D
95	No evidence of primary tumor	T0	U	U
99	Unknown extension Primary tumor cannot be assessed (e.g., shave biopsy or regressed melanoma) Not documented in patient record	*	U	U

\* For Extension codes 10 - 80, and 99 ONLY, the T category is assigned based on the values of CS Site-Specific Factor 1, Measured Thickness and CS Site-Specific Factor 2, Ulceration, as shown in Extra Table 1, Thickness and Ulceration and Extra Table 2, Extension and Ulceration.

**Malignant Melanoma of Skin, Vulva, Penis, Scrotum**

**CS TS/Ext-Eval**

**SEE STANDARD TABLE**

**Malignant Melanoma of Skin, Vulva, Penis, Scrotum  
CS Lymph Nodes**

**Note 1:** Code only regional nodes and nodes, NOS, in this field. Distant nodes are coded in the field Mets at DX.

**Note 2:** Satellite lesions/nodules or in-transit metastasis are coded under CS Lymph Nodes.

**Note 3:** Use codes 10-12 if there is regional node involvement without satellite nodule(s) or in-transit metastases. Use codes 13-15 if there are satellite nodule(s) or in-transit metastases but there is either no regional lymph node involvement, or involvement of regional lymph nodes is not stated. Use codes 20-22 if both satellite nodule(s)/intransit metastases and regional lymph node(s) are present.

Code	Description	TNM	SS77	SS2000
00	None; no regional lymph node involvement	N0	NONE	NONE
10	Regional lymph node(s) by primary site: (includes bilateral or contralateral nodes for head, neck, and trunk) HEAD AND NECK SITES: All subsites: Cervical, NOS Lip: Mandibular, NOS: Submandibular(submaxillary) Eyelid/canthus: Facial, NOS: Buccinator (buccal) Nasolabial Mandibular, NOS: Submandibular (submaxillary) Parotid, NOS: Infra-auricular External ear/auditory canal: Mastoid (post-/retro-auricular) (occipital) Preauricular Face, Other (cheek, chin forehead, jaw, nose and temple): Facial, NOS: Buccinator (buccal) Nasolabial Mandibular, NOS: Submandibular (submaxillary) Parotid, NOS: Infra-auricular Preauricular Scalp: Mastoid (post-/retro-auricular) (occipital) Parotid, NOS: Infra-auricular Preauricular Spinal accessory (posterior cervical) Neck: Axillary Mandibular, NOS Mastoid (post-/retro-auricular) Parotid, NOS: Infra-auricular Preauricular Spinal accessory (posterior cervical) Supraclavicular (transverse cervical) UPPER TRUNK: Axillary Cervical Internal mammary Supraclavicular	*	RN	RN

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10, cont'd	<p>LOWER TRUNK: Superficial inguinal (femoral)</p> <p>ARM/SHOULDER: Axillary Epitrochlear for hand/forearm Spinal accessory (posterior cervical) for shoulder</p> <p>LEG/HIP: Popliteal for heel and calf Superficial inguinal (femoral)</p> <p>VULVA/PENIS/SCROTUM: Deep inguinal: Rosenmuller or Cloquet node Superficial inguinal (femoral)</p> <p>ALL SITES: Regional lymph node(s), NOS</p>			
12	<p>Regional lymph node(s) by primary site: HEAD AND NECK SITES: Lip: Facial, NOS Buccinator (buccal) Nasolabial Mandibular, NOS Submental Parotid, NOS Infra-auricular Preauricular Eyelid/canthus: Facial, NOS: Mandibular, NOS Submental Face, Other (cheek, chin, forehead, jaw, nose, and temple) Mandibular, NOS Submental Neck: Mandibular, NOS Submental</p>	*	D	RN
13	Satellite nodule(s) or in-transit metastases, NOS (distance from primary tumor not stated) WITHOUT regional lymph node involvement or involvement of regional nodes not stated.	N2c	RE	RE
14	Satellite nodule(s) or in-transit metastases less than or equal to 2 cm from primary tumor WITHOUT regional lymph node involvement or involvement of regional nodes not stated.	N2c	RE	RE
15	Satellite nodule(s) or in-transit metastases greater than 2 cm from primary tumor WITHOUT regional lymph node involvement or involvement of regional nodes not stated.	N2c	RE	RN
17	Matted nodes in code 10	N3	RN	RN
18	Matted nodes in code 12	N3	D	RN
20	Satellite nodule(s) or in-transit metastases WITH regional lymph nodes listed in code 10.	N3	RE + RN	RE + RN
22	Satellite nodule(s) or in-transit metastases WITH regional lymph nodes listed in code 12.	N3	D	RE + RN
80	Lymph nodes, NOS	*	RN	RN



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99	Unknown; not stated Regional lymph node(s) cannot be assessed Not documented in patient record	NX	U	U
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\*Mapping of N depends on the values in Reg LN Pos and the Site-Specific Factor 3 Table, Clinical Status of Lymph Node Mets.

### Malignant Melanoma of Skin, Vulva, Penis, Scrotum

#### CS Reg Nodes Eval

**Note:** This item reflects the validity of the classification of the item CS Lymph Nodes only according to diagnostic methods employed.

Code	Description	Staging Basis
	No regional lymph nodes, satellite nodule(s) or in-transit metastases (nodules) removed for examination. Evidence based on physical examination, imaging examination, or other non invasive clinical evidence. No autopsy evidence used.	c
1	No regional lymph nodes, satellite nodule(s) or in-transit metastases (nodules) removed for examination. Evidence based on endoscopic examination, diagnostic biopsy including fine needle aspiration of lymph node(s) or other invasive techniques, including surgical observation without biopsy. No autopsy evidence used.	p
2	No regional lymph nodes, satellite nodule(s) or in-transit metastases (nodules) removed for examination, but evidence derived from autopsy (tumor was suspected or diagnosed prior to autopsy).	p
3	Regional lymph nodes, satellite nodules(s) or in-transit metastases (nodules) removed for examination (removal of at least 1 lymph node, satellite nodule(s) or in-transit metastasis) WITHOUT pre-surgical systemic treatment or radiation OR lymph nodes, satellite nodule(s) or in-transit metastases (nodules) removed for examination, unknown if presurgical systemic treatment or radiation performed.	p
5	Regional lymph nodes, satellite nodule(s) or in-transit metastases (nodules) removed for examination WITH pre-surgical systemic treatment or radiation, BUT lymph node, satellite nodule(s) or in-transit metastases (nodules) evaluation based on clinical evidence.	c
6	Regional lymph nodes, satellite nodule(s) or in-transit metastases (nodules) removed for examination WITH pre-surgical systemic treatment or radiation, and lymph node(s), satellite nodule(s) or in-transit metastases (nodules) evaluation based on pathologic evidence.	y
8	Evidence from autopsy; tumor was unsuspected or undiagnosed prior to autopsy.	a
9	Unknown if lymph nodes, satellite nodule(s) or in-transit metastases (nodules) removed for examination Not assessed; cannot be assessed Unknown if assessed Not documented in patient record	c

### Malignant Melanoma of Skin, Vulva, Penis, Scrotum

#### Reg LN Pos

**Note 1:** Record this field even if there has been preoperative treatment.

**Note 2:** Although satellite nodules and in-transit metastasis are coded under CS Lymph Nodes, DO NOT count as Reg LN Pos in this field.

Code	Description
00	All nodes examined negative.

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01-89	01 - 89 nodes positive (code exact number of nodes positive)
90	90 or more nodes positive
95	Positive aspiration of lymph node(s)
97	Positive nodes - number unspecified
98	No nodes examined
99	Unknown if nodes are positive; not applicable Not documented in patient record

**Malignant Melanoma of Skin, Vulva, Penis, Scrotum**

**Reg LN Exam**

**Note:** Although satellite nodules and in-transit metastasis are coded under CS Lymph Nodes, DO NOT count as Reg LN Exam in this field.

Code	Description
00	No nodes examined
01-89	01 - 89 nodes examined (code exact number of regional lymph nodes examined)
90	90 or more nodes examined
95	No regional nodes removed, but aspiration of regional nodes performed
96	Regional lymph node removal documented as sampling and number of nodes unknown/not stated
97	Regional lymph node removal documented as dissection and number of nodes unknown/not stated
98	Regional lymph nodes surgically removed but number of lymph nodes unknown/not stated and not documented as sampling or dissection; nodes examined, but number unknown
99	Unknown if nodes were examined; not applicable or negative Not documented in patient record

**Malignant Melanoma of Skin, Vulva, Penis, Scrotum**

**CS Mets at DX**

Code	Description	TNM	SS77	SS2000
00	No; none	M0	NONE	NONE
05	Underlying cartilage, bone, skeletal muscle	*	D	D
10	Distant lymph node(s)	*	D	D
40	Distant metastasis, NOS	*	D	D
42	Metastases to skin or subcutaneous tissue beyond regional lymph nodes	*	D	D
43	Lung	*	D	D
44	Other distant metastases	M1c	D	D
52	(10) + (42)	*	D	D
53	(10) + (43)	*	D	D
54	(10) + (44)	M1c	D	D

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99	Unknown Distant metastasis cannot be assessed Not documented in patient record	MX	U	U
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\*For codes 05, 10, 40, 42, 43, 52 and 53 ONLY, the M category is assigned based on the status of serum LDH as coded in Site-Specific Factor 4 LDH table and shown in the Special Mets at DX and LDH table.

**Malignant Melanoma of Skin, Vulva, Penis, Scrotum**

**CS Mets Eval**

**SEE STANDARD TABLE**

**Malignant Melanoma of Skin, Vulva, Penis, Scrotum**

**CS Site-Specific Factor 1 Measured Thickness (Depth), Breslow's Measurement**

**Note:** Code MEASURED THICKNESS (Depth) of tumor (Breslow's measurement), not size. Record actual thickness measurement in hundredths of millimeters from the pathology report.

Code	Description
000	No mass/tumor found
001-988	0.01 - 9.88 millimeters Code exact measurement in HUNDREDTHS of millimeters. Examples: Code Measured thickness 001 0.01 millimeter 002 0.02 millimeters 010 0.1 millimeter 074 0.74 millimeters 100 1 millimeters 105 1.05 millimeters 988 9.88 millimeters
989	9.89 millimeters or larger
990	OBSOLETE See Code 999
999	Microinvasion; microscopic focus or foci only; no size given Not documented in patient record Unknown; measured thickness not stated

**Malignant Melanoma of Skin, Vulva, Penis, Scrotum**

**CS Site-Specific Factor 2 Ulceration**

**Note 1:** Melanoma ulceration is the absence of an intact epidermis overlying the primary melanoma based upon histopathological examination.

**Note 2:** If the pathology report does not mention ulceration in diagnosis, No Ulceration Present, code 000.

Code	Description
000	No ulceration present
001	Ulceration present
999	Unknown Not stated Not documented in patient record

**Malignant Melanoma of Skin, Vulva, Penis, Scrotum**

**CS Site-Specific Factor 3 Clinical Status of Lymph Node Mets**

**Note:** Use code 000, No lymph node metastases, if either: A) there is no lymph node involvement, i.e., CS Lymph Nodes is coded 00, or B) there are satellite nodules or in-transit metastases, but no regional lymph node metastases, i.e., CS Lymph Nodes is coded 13-15.

Code	Description
000	No lymph node metastases
001	Clinically occult (microscopic) lymph node metastases only
002	Clinically apparent (macroscopic) lymph node metastases
999	Unknown Not stated Not documented in patient record

**Malignant Melanoma of Skin, Vulva, Penis, Scrotum**

**CS Site-Specific Factor 4 LDH**

**Note:** Per AJCC, "An elevated serum LDH should be used only when there are 2 or more determinations obtained more than 24 hours apart, because an elevated serum LDH on a single determination can be falsely positive as a result of hemolysis or other factors unrelated to melanoma metastases."

Code	Description
000	Test not done, test was not ordered and was not performed
002	Within normal limits
004	Range 1 less than 1.5 x upper limit of normal for LDH assay Stated as elevated, NOS
005	Range 2 1.5 - 10 x upper limit of normal for LDH assay
006	Range 3 more than 10 x upper limit of normal for LDH assay
008	Ordered, but results not in chart
999	Unknown Not stated Not documented in patient record

**Malignant Melanoma of Skin, Vulva, Penis, Scrotum**

**CS Site-Specific Factor 5**

Code	Description
888	Not applicable for this site

**Malignant Melanoma of Skin, Vulva, Penis, Scrotum**

**CS Site-Specific Factor 6**

Code	Description
888	Not applicable for this site

**Site-Specific Surgery Codes**

**Skin**

**C440–C449**

(Except for M-9750, 9760-9764, 9800-9820, 9826, 9831-9920, 9931-9964, 9980-9989)

Codes

00 None; **no surgery** of primary site; **autopsy ONLY**

10 Local tumor destruction, NOS

11 Photodynamic therapy (PDT)

12 Electrocautery; fulguration (includes use of hot forceps for tumor destruction)

13 Cryosurgery

14 Laser ablation

**No specimen sent to pathology** from surgical events 10–14

20 **Local tumor excision**, NOS

26 Polypectomy

27 Excisional biopsy

Any **combination** of 20 or 26–27 WITH

21 Photodynamic therapy (PDT)

22 Electrocautery

23 Cryosurgery

24 Laser ablation

25 Laser excision

[**SEER Note:** Codes 21 to 25 above combine 20 Local tumor excision, 26 Polypectomy or 27 Excisional biopsy with 21 PDT, 22 Electrocautery, 23 Cryosurgery, 24 Laser ablation, or 25 Laser excision]

**Specimen sent to pathology** from surgical events 20–27

[**SEER Notes:** Code UVB phototherapy for mycosis fungoides primaries under Surgery of Primary Site for skin. Assign code 11 if there is no pathology specimen. Assign code 21 if there is a pathology specimen. Codes 20-27 include shave and wedge resection]

30 **Biopsy** of primary tumor **followed by a gross excision** of the lesion (does not have to be done under the same anesthesia)

31 Shave biopsy followed by a gross excision of the lesion

32 Punch biopsy followed by a gross excision of the lesion

33 Incisional biopsy followed by a gross excision of the lesion

34 Mohs surgery, NOS

35 Mohs with 1-cm margin or less

36 Mohs with more than 1-cm margin

[**SEER Notes:** Codes 30 to 33 include less than a wide excision, less than 1 cm margin or margins are unknown. If it is stated to be a **wide excision** or **reexcision**, but the **margins are unknown**, code to 30. Code 45 represents a wide excision in which it is known that the margins of excision are greater than 1 cm.]

45 **Wide excision** or **reexcision** of lesion or **minor** (local) **amputation** with margins more than 1 cm, NOS. Margins **MUST** be microscopically negative.

46 WITH margins more than 1 cm and less than or equal to 2 cm

47 WITH margins greater than 2 cm

If the excision does not have microscopically negative margins greater than 1 cm, use the appropriate code, 20-36.

- 60 Major amputation
- 90 Surgery, NOS
- 99 **Unknown** if surgery performed; **death certificate** ONLY

**Site-Specific Surgery Codes**

**All Other Sites**

C142–C148, C170–C179, C239, C240–C249, C260–C269, C300–C301, C310–C319, C339, C379, C380–C388, C390–C399, C480–C488, C510–C519, C529, C570–C579, C589, **C600–C609, C630–C639**, C680–C689, C690–C699, C740–C749, C750–C759

(Except for M-9750, 9760-9764, 9800-9820, 9826, 9831-9920, 9931-9964, 9980-9989)

Codes

00 None; **no surgery** of primary site; **autopsy ONLY**

10 Local tumor destruction, NOS

11 Photodynamic therapy (PDT)

12 Electrocautery; fulguration (includes use of hot forceps for tumor destruction)

13 Cryosurgery

14 Laser

No specimen sent to **pathology** from surgical events 10–14

20 **Local tumor excision**, NOS

26 Polypectomy

27 Excisional biopsy

Any **combination** of 20 or 26–27 WITH

21 Photodynamic therapy (PDT)

22 Electrocautery

23 Cryosurgery

24 Laser ablation

25 Laser excision

[**SEER Note:** Codes 21 to 25 above combine 20 local tumor excision, 26 Polypectomy or 27 Excisional biopsy with 21 PDT, 22 Electrocautery, 23 Cryosurgery, 24 Laser ablation, or 25 Laser excision]

**Specimen** sent to **pathology** from surgical events 20–27

30 Simple/partial surgical removal of primary site

40 **Total surgical removal** of primary site; enucleation

41 Total enucleation (for eye surgery only)

50 Surgery stated to be “**debulking**”

60 Radical surgery

Partial or total removal of the primary site WITH a resection in continuity (partial or total removal) with other organs

[**SEER Note:** In continuity with or “en bloc” means that all of the tissues were removed during the same procedure, but not necessarily in a single specimen]

90 Surgery, NOS

99 **Unknown** if surgery performed; **death certificate ONLY**

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**Collaborative Staging Codes**

**Mycosis Fungoides and Sezary Disease of Skin, Vulva, Penis, Scrotum (M-9700-9701)**

**C44.0-C44.9, C51.0-C51.2, C51.8-C51.9, C60.0-C60.2, C60.8-C60.9, C63.2**

- C44.0 Skin of lip, NOS
- C44.1 Eyelid
- C44.2 External ear
- C44.3 Skin of ear and unspecified parts of face
- C44.4 Skin of scalp and neck
- C44.5 Skin of trunk
- C44.6 Skin of upper limb and shoulder
- C44.7 Skin of lower limb and hip
- C44.8 Overlapping lesion of skin
- C44.9 Skin, NOS
- C51.0 Labium majus
- C51.1 Labium minus
- C51.2 Clitoris
- C51.8 Overlapping lesion of vulva
- C51.9 Vulva, NOS
- C60.0 Prepuce
- C60.1 Glans penis
- C60.2 Body of penis
- C60.8 Overlapping lesion of penis
- C60.9 Penis
- C63.2 Scrotum, NOS

**Note 1:** Laterality must be coded for C44.1-C44.3 and C44.5-C44.7. For codes C44.3 and C44.5, if the tumor is midline (e.g., chin), code as 9 (midline) in the laterality field.

**Note 2:** Source: Developed by the Mycosis Fungoides Cooperative Group (MFCG)

CS Tumor Size	<b>CS Site-Specific Factor 1 -</b>	The following tables are available at the collaborative staging website: Histology Exclusion Table AJCC Stage
CS Extension	Peripheral Blood Involvement	
CS TS/Ext-Eval	CS Site-Specific Factor 2	
CS Lymph Nodes	CS Site-Specific Factor 3	
CS Reg Nodes Eval	CS Site-Specific Factor 4	
Reg LN Pos	CS Site-Specific Factor 5	
Reg LN Exam	CS Site-Specific Factor 6	
CS Mets at DX		
CS Mets Eval		

**Mycosis Fungoides and Sezary Disease of Skin, Vulva, Penis, Scrotum**

**CS Tumor Size**

**SEE STANDARD TABLE**

**Mycosis Fungoides and Sezary Disease of Skin, Vulva, Penis, Scrotum**

**CS Extension**

**Note 1:** In approximating body surface, the palmar surface of the hand, including digits, is about 1%.

**Note 2:** Use code 25 when skin involvement is present but only a general location/site is mentioned (i.e., face, legs, torso, arms). Use code 30 when there is skin involvement but there is no mention of location/site.

Code	Description	TNM	SS77	SS2000
10	Plaques, papules, or erythematous patches plaque stage"): Less than 10% of skin surface, no tumors	T1	L	L

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10, Cont'd	Limited plaques/patches MFCG Stage I			
20	Plaques, papules, or erythematous patches ("plaque stage"): Greater than or equal to 10% of skin surface, no tumors Generalized plaques/patches MFCG Stage II	T2	L	L
25	Plaques, papules, or erythematous patches ("plaque stage"): % or body surface not stated, no tumors	T2	L	L
30	Skin involvement, NOS: Extent not stated, no tumors Localized, NOS	T1	L	L
50	One or more tumors (tumor stage) Cutaneous tumors	T3	RE	RE
70	Generalized erythroderma (greater than 50% of body involved with diffuse redness) Sezary syndrome/Sezary disease MFCG Stage III	T4	RE	RE
95	No evidence of primary tumor	T0	U	U
99	Unknown extension Primary tumor cannot be assessed Not documented in patient record	TX	U	U

**Mycosis Fungoides and Sezary Disease of Skin, Vulva, Penis, Scrotum  
CS TS/Ext-Eval  
SEE STANDARD TABLE**

**Mycosis Fungoides and Sezary Disease of Skin, Vulva, Penis, Scrotum  
CS Lymph Nodes**

**Note:** For this site, code ALL lymph node (regional and distant) involvement in this field.

Code	Description	TNM	SS77	SS2000
00	None; no regional lymph node involvement	N0	NONE	NONE
10	Clinically enlarged palpable lymph node(s) (adenopathy), and either pathologically negative nodes or no pathological statement	N1	RN	RN
20	No clinically enlarged palpable lymph node(s) (adenopathy); pathologically positive lymph node(s)	N2	RN	RN
30	Both clinically enlarged palpable lymph node(s) (adenopathy) and pathologically positive lymph node(s)	N3	RN	RN
80	Lymph nodes, NOS	N1	RN	RN
99	Unknown; not stated Regional lymph node(s) cannot be assessed Not documented in patient record	NX	U	U

**Mycosis Fungoides and Sezary Disease of Skin, Vulva, Penis, Scrotum**  
**CS Reg Nodes Eval**  
**SEE STANDARD TABLE**

**Mycosis Fungoides and Sezary Disease of Skin, Vulva, Penis, Scrotum**  
**Reg LN Pos**  
**SEE STANDARD TABLE**

**Mycosis Fungoides and Sezary Disease of Skin, Vulva, Penis, Scrotum**  
**Reg LN Exam**  
**SEE STANDARD TABLE**

**Mycosis Fungoides and Sezary Disease of Skin, Vulva, Penis, Scrotum**  
**CS Mets at DX**

**Note:** For this site, code ALL lymph node (regional and distant) involvement in the CS Lymph Nodes field.

Code	Description	TNM	SS77	SS2000
00	No; none	M0	NONE	NONE
40	Visceral (non-cutaneous, extra nodal) involvement: MFCG Stage IV Carcinomatosis Distant metastasis, NOS	M1	D	D
99	Unknown if distant metastasis Distant metastasis cannot be assessed Not documented in patient record	MX	U	U

**Mycosis Fungoides and Sezary Disease of Skin, Vulva, Penis, Scrotum**  
**CS Mets Eval**  
**SEE STANDARD TABLE**

**Mycosis Fungoides and Sezary Disease of Skin, Vulva, Penis, Scrotum**  
**CS Site-Specific Factor 1 Peripheral Blood Involvement**

Code	Description
000	No peripheral blood involvement Less than 1000 Sezary cells
001	Atypical circulating cells in peripheral blood: Less than 5% Greater than or equal to 1000 Sezary cells
002	Atypical circulating cells in peripheral blood: Greater than 5%
003	% not stated
999	Insufficient information Not documented in patient record

**Mycosis Fungoides and Sezary Disease of Skin, Vulva, Penis, Scrotum  
CS Site-Specific Factor 2**

Code	Description
888	Not applicable for this site

**Mycosis Fungoides and Sezary Disease of Skin, Vulva, Penis, Scrotum  
CS Site-Specific Factor 3**

Code	Description
888	Not applicable for this site

**Mycosis Fungoides and Sezary Disease of Skin, Vulva, Penis, Scrotum  
CS Site-Specific Factor 4**

Code	Description
888	Not applicable for this site

**Mycosis Fungoides and Sezary Disease of Skin, Vulva, Penis, Scrotum  
CS Site-Specific Factor 5**

Code	Description
888	Not applicable for this site

**Mycosis Fungoides and Sezary Disease of Skin, Vulva, Penis, Scrotum  
CS Site-Specific Factor 6**

Code	Description
888	Not applicable for this site

**Site-Specific Surgery Codes**

**Skin**

**C440–C449**

(Except for M-9750, 9760-9764, 9800-9820, 9826, 9831-9920, 9931-9964, 9980-9989)

Codes

00 None; **no surgery** of primary site; **autopsy ONLY**

10 Local tumor destruction, NOS

11 Photodynamic therapy (PDT)

12 Electrocautery; fulguration (includes use of hot forceps for tumor destruction)

13 Cryosurgery

14 Laser ablation

**No specimen sent to pathology** from surgical events 10–14

20 **Local tumor excision**, NOS

26 Polypectomy

27 Excisional biopsy

Any **combination** of 20 or 26–27 WITH

21 Photodynamic therapy (PDT)

22 Electrocautery

23 Cryosurgery

24 Laser ablation

25 Laser excision

[**SEER Note:** Codes 21 to 25 above combine 20 Local tumor excision, 26 Polypectomy or 27 Excisional biopsy with 21 PDT, 22 Electrocautery, 23 Cryosurgery, 24 Laser ablation, or 25 Laser excision]

**Specimen sent to pathology** from surgical events 20–27

[**SEER Notes:** Code UVB phototherapy for mycosis fungoides primaries under Surgery of Primary Site for skin. Assign code 11 if there is no pathology specimen. Assign code 21 if there is a pathology specimen.

Codes 20-27 include shave and wedge resection]

30 **Biopsy** of primary tumor **followed by a gross excision** of the lesion (does not have to be done under the same anesthesia)

31 Shave biopsy followed by a gross excision of the lesion

32 Punch biopsy followed by a gross excision of the lesion

33 Incisional biopsy followed by a gross excision of the lesion

34 Mohs surgery, NOS

35 Mohs with 1-cm margin or less

36 Mohs with more than 1-cm margin

[**SEER Notes:** Codes 30 to 33 include less than a wide excision, less than 1 cm margin or margins are unknown. If it is stated to be a **wide excision** or **reexcision**, but the **margins are unknown**, code to 30. Code 45 represents a wide excision in which it is known that the margins of excision are greater than 1 cm.]

45 **Wide excision** or **reexcision** of lesion or **minor** (local) **amputation** with margins more than 1 cm, NOS. Margins **MUST** be microscopically negative.

46 WITH margins more than 1 cm and less than or equal to 2 cm

47 WITH margins greater than 2 cm

If the excision does not have microscopically negative margins greater than 1 cm, use the appropriate code, 20-36.

- 60 Major amputation
- 90 Surgery, NOS
- 99 **Unknown** if surgery performed; **death certificate** ONLY

**Site-Specific Surgery Codes**

**All Other Sites**

C142–C148, C170–C179, C239, C240–C249, C260–C269, C300–C301, C310–C319, C339, C379, C380–C388, C390–C399, C480–C488, **C510–C519**, C529, C570–C579, C589, **C600–C609**, **C630–C639**, C680–C689, C690–C699, C740–C749, C750–C759

(Except for M-9750, 9760-9764, 9800-9820, 9826, 9831-9920, 9931-9964, 9980-9989)

Codes

00 None; **no surgery** of primary site; **autopsy ONLY**

10 Local tumor destruction, NOS

11 Photodynamic therapy (PDT)

12 Electrocautery; fulguration (includes use of hot forceps for tumor destruction)

13 Cryosurgery

14 Laser

No specimen sent to **pathology** from surgical events 10–14

20 **Local tumor excision**, NOS

26 Polypectomy

27 Excisional biopsy

Any **combination** of 20 or 26–27 WITH

21 Photodynamic therapy (PDT)

22 Electrocautery

23 Cryosurgery

24 Laser ablation

25 Laser excision

[**SEER Note:** Codes 21 to 25 above combine 20 local tumor excision, 26 Polypectomy or 27 Excisional biopsy with 21 PDT, 22 Electrocautery, 23 Cryosurgery, 24 Laser ablation, or 25 Laser excision]

**Specimen** sent to **pathology** from surgical events 20–27

30 Simple/partial surgical removal of primary site

40 **Total surgical removal** of primary site; enucleation

41 Total enucleation (for eye surgery only)

50 Surgery stated to be “**debulking**”

60 Radical surgery

Partial or total removal of the primary site WITH a resection in continuity (partial or total removal) with other organs

[**SEER Note:** In continuity with or “en bloc” means that all of the tissues were removed during the same procedure, but not necessarily in a single specimen]

90 Surgery, NOS

99 **Unknown** if surgery performed; **death certificate ONLY**

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**SEER Site-Specific Coding Guidelines**

**BONES, JOINTS, AND ARTICULAR CARTILAGE C400–C419**

**PERIPHERAL NERVES AND AUTONOMIC NERVOUS SYSTEM C470–C479**

**CONNECTIVE, SUBCUTANEOUS, AND OTHER SOFT TISSUES C490–C499**

(Except for M-9750, 9760-9764, 9800-9820, 9826, 9831-9920, 9931-9964, 9980-9989)

Three Grade System (Nuclear Grade)

There are several sites for which a three-grade system is used. The patterns of cell growth are measured on a scale of 1, 2, and 3 (also referred to as low, medium, and high grade). This system measures the proportion of cancer cells that are growing and making new cells and how closely they resemble the cells of the host tissue. Thus, it is similar to a four-grade system, but simply divides the spectrum into three rather than four categories (see comparison table below). The expected outcome is more favorable for lower grades. Soft tissue sarcomas are evaluated using a three-grade system.

If a grade is written as 2/3 that means this is a grade 2 of a three-grade system. Do not simply code the numerator. Use the following table to convert the grade to SEER codes.

Term	Grade	SEER Code
1/3, 1/2	Low grade	2
2/3	Intermediate grade	3
3/3, 2/2	High grade	4

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**Sarcoma**

Sarcomas are graded low, intermediate or high grade by the pathologist. Use the following table to convert these terms to a histologic grade.

Term	Grade	SEER Code
Well differentiated	I	1
Fairly well differentiated	II	2
Low grade	I-II	2
Mid differentiated	II	2
Moderately differentiated	II	2
Partially differentiated	II	2
Partially well differentiated	I-II	2
Partially well differentiated	II	2
Relatively or generally well differentiated	II	2
Medium grade, intermediate grade	II-III	3
Moderately poorly differentiated	III	3
Moderately undifferentiated	III	3
Pleomorphic	III	3
Poorly differentiated	III	3
Relatively poorly differentiated	III	3
Relatively undifferentiated	III	3
Slightly differentiated	III	3
High grade	III-IV	4
Undifferentiated, anaplastic, not differentiated	IV	4

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**Collaborative Staging Codes**

**Peripheral Nerves and Autonomic Nervous System; Connective, Subcutaneous, and Other Soft Tissues**

**C47.0-C47.6, C47.8-C47.9, C49.0-C49.6, C49.8-C49.9**

- C47.0 Peripheral nerves and autonomic nervous system of head, face and neck
- C47.1 Peripheral nerves and autonomic nervous system of upper limb and shoulder
- C47.2 Peripheral nerves and autonomic nervous system of lower limb and hip
- C47.3 Peripheral nerves and autonomic nervous system of thorax
- C47.4 Peripheral nerves and autonomic nervous system of abdomen
- C47.5 Peripheral nerves and autonomic nervous system of pelvis
- C47.6 Peripheral nerves and autonomic nervous system of trunk, NOS
- C47.8 Overlapping lesion of peripheral nerves and autonomic nervous system
- C47.9 Autonomic nervous system, NOS
- C49.0 Connective, subcutaneous and other soft tissues of head, face, and neck
- C49.1 Connective, subcutaneous and other soft tissues of upper limb and shoulder
- C49.2 Connective, subcutaneous and other soft tissues of lower limb and hip
- C49.3 Connective, subcutaneous and other soft tissues of thorax
- C49.4 Connective, subcutaneous and other soft tissues of abdomen
- C49.5 Connective, subcutaneous and other soft tissues of pelvis
- C49.6 Connective, subcutaneous and other soft tissues of trunk
- C49.8 Overlapping lesion of connective, subcutaneous and other soft tissues
- C49.9 Connective, subcutaneous and other soft tissues, NOS

**Note 1:** Laterality must be coded for C47.1-C47.2 and C49.1-C49.2.

**Note 2:** Soft tissue sarcomas of the heart and mediastinum (C38.0-C38.3 and C38.9) use the Heart, Mediastinum schema.

CS Tumor Size	CS Site-Specific Factor 1	The following tables are available at the collaborative staging website: Histology Exclusion Table AJCC Stage Special Extension Size Table 1 Special Extension Size Table 2 Special Extension Size Table 3
CS Extension	CS Site-Specific Factor 2	
CS TS/Ext-Eval	CS Site-Specific Factor 3	
CS Lymph Nodes	CS Site-Specific Factor 4	
CS Reg Nodes Eval	CS Site-Specific Factor 5	
Reg LN Pos	CS Site-Specific Factor 6	
Reg LN Exam		
CS Mets at DX		
CS Mets Eval		

**Peripheral Nerves and Autonomic Nervous System; Connective, Subcutaneous, and Other Soft Tissues**

**CS Tumor Size**

SEE STANDARD TABLE

**Peripheral Nerves and Autonomic Nervous System; Connective, Subcutaneous, and Other Soft Tissues**

**CS Extension**

**Note 1:** Connective tissue includes adipose tissue; aponeuroses; arteries; blood vessels; bursa; connective tissue, NOS; fascia; fatty tissue; fibrous tissue; ligaments; lymphatic channels (not nodes); muscle; skeletal muscle; subcutaneous tissue; synovia; tendons; tendon sheaths; veins; and vessels, NOS. Peripheral nerves and autonomic nervous system includes: ganglia, nerve, parasympathetic nervous system, peripheral nerves, spinal nerves, sympathetic nervous system.

**Note 2:** If a vessel has a name, for example, brachial artery or recurrent laryngeal nerve, consider it a structure (code 60).

**Note 3:** For tumors of the extremities and trunk ONLY, superficial lesions are defined as those not involving the superficial muscular fascia. Deep lesions are those that involve or are beneath the superficial fascia.

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**Note 4:** According to AJCC, "All intraperitoneal visceral lesions, retroperitoneal lesions, and intrathoracic lesions, and the majority of head and neck tumors are considered deep." For coding extension of soft tissue tumors in these sites (C47.0, C47.3-5, C49.0, C49.3-5), use only codes 12, 32, 42, 62, 80, 95, or 99.

**Note 5:** Definition of Adjacent Connective Tissue: Some of the schemes for ill-defined or non-specific sites in this manual contain a code 40, adjacent connective tissue, which is defined here as the unnamed tissues that immediately surround an organ or structure containing a primary cancer. Use this code 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. 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. Blood, cartilage and bone are sometimes considered connective tissues, but in this manual they are listed separately.

Code	Description	TNM	SS77	SS2000
10	Invasive tumor confined to site/tissue of origin, NOS	***	L	L
11	Superficial invasive tumor confined to site/tissue of origin (lesion does not involve superficial fascia)	*	L	L
12	Deep tumor confined to site/tissue of origin	**	L	L
30	Localized, NOS	***	L	L
31	Superficial: localized tumor, NOS	*	L	L
32	Deep: localized tumor, NOS	**	L	L
40	Adjacent connective tissue (see Note 5)	***	RE	RE
41	Superficial tumor involving adjacent connective tissue	*	RE	RE
42	Deep tumor involving adjacent connective tissue	**	RE	RE
60	Adjacent organs/structures including bone/cartilage (including major vessel invasion) (see Note 5)	***	RE	RE
61	Superficial tumor involving adjacent organs/structures including bone/cartilage (including major vessel invasion) (see Note 5)	*	RE	RE
62	Deep tumor involving adjacent organs/structures including bone/cartilage (including major vessel invasion) (see Note 5)	**	RE	RE
80	Further contiguous extension	**	D	D
95	No evidence of primary tumor	T0	U	U
99	Unknown extension Primary tumor cannot be assessed Not documented in patient record	TX	U	U

\* For Extension codes 11, 31, 41, and 61 ONLY, the T category is assigned based on the value of CS Tumor Size as shown in the Special Extension Size Table 1 for this site.

\*\* For Extension codes 12, 32, 42, 62 and 80 ONLY, the T category is assigned based on the value of CS Tumor Size as shown in the Special Extension Size Table 2 for this site.

\*\*\* For Extension codes 10, 30, 40, and 60 ONLY, the T category is assigned based on the value of CS Tumor Size as shown in the Special Extension Size Table 3 for this site.

**Peripheral Nerves and Autonomic Nervous System; Connective, Subcutaneous, and Other Soft Tissues**

**CS TS/Ext-Eval**

**SEE STANDARD TABLE**

**Peripheral Nerves and Autonomic Nervous System; Connective, Subcutaneous, and Other Soft Tissues**

**CS Lymph Nodes**

**Note 1:** Regional lymph nodes are defined as those in the vicinity of the primary tumor.

**Note 2:** Regional lymph node involvement is rare. For this schema, if there is no mention of lymph node involvement clinically, assume that lymph nodes are negative (code 00). Use code 99 (Unknown) only when there is no available information on the extent of the patient's disease, for example, when a lab-only case is abstracted from a biopsy report and no clinical history is available.

Code	Description	TNM	SS77	SS2000
00	None; no regional lymph node involvement	N0	NONE	NONE
10	Regional lymph node(s) by primary site (bilateral or contralateral for head, neck, trunk) Head and Neck: All subsites: Cervical, NOS Lip: Facial, NOS: Buccinator (buccal) Nasolabial Mandibular, NOS: Submandibular (submaxillary) Submental Parotid, NOS: Infra-auricular Preauricular Eyelid/canthus: Facial, NOS: Buccinator (buccal) Nasolabial Mandibular, NOS: 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, NOS: Submandibular (submaxillary) Submental Parotid, NOS: Infra-auricular Preauricular Scalp: Mastoid (posterior, retro-auricular) (occipital) Parotid, NOS: Infra-auricular Preauricular Spinal accessory (posterior cervical) Neck: Axillary Mastoid (posterior, retro-auricular) (occipital) Mandibular, NOS:	N1	RN	RN

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10, cont'd	Parotid, NOS: Infra-auricular Preauricular Spinal accessory (posterior cervical) Supraclavicular (transverse cervical) Arm/shoulder: Axillary Spinal accessory for shoulder Epitrochlear for hand/forearm 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) All sites: Regional lymph node(s), NOS			
12	Submental nodes for neck primary only (bilateral or contralateral)	N1	D	RN
15	Neck primary only: (10) + (12)	N1	D	RN
80	Lymph nodes, NOS	N1	RN	RN
99	Unknown (see Note 2)	NX	U	U

**Peripheral Nerves and Autonomic Nervous System; Connective, Subcutaneous, and Other Soft Tissues**

**CS Reg Nodes Eval**

**SEE STANDARD TABLE**

**Peripheral Nerves and Autonomic Nervous System; Connective, Subcutaneous, and Other Soft Tissues**

**Reg LN Pos**

**SEE STANDARD TABLE**



**Peripheral Nerves and Autonomic Nervous System; Connective, Subcutaneous, and Other Soft Tissues**

**Reg LN Exam**

SEE STANDARD TABLE

**Peripheral Nerves and Autonomic Nervous System; Connective, Subcutaneous, and Other Soft Tissues**

**CS Mets at DX**

SEE STANDARD TABLE

**Peripheral Nerves and Autonomic Nervous System; Connective, Subcutaneous, and Other Soft Tissues**

**CS Mets Eval**

SEE STANDARD TABLE

**Peripheral Nerves and Autonomic Nervous System; Connective, Subcutaneous, and Other Soft Tissues**

**CS Site-Specific Factor 1**

Code	Description
888	Not applicable for this site

**Peripheral Nerves and Autonomic Nervous System; Connective, Subcutaneous, and Other Soft Tissues**

**CS Site-Specific Factor 2**

Code	Description
888	Not applicable for this site

**Peripheral Nerves and Autonomic Nervous System; Connective, Subcutaneous, and Other Soft Tissues**

**CS Site-Specific Factor 3**

Code	Description
888	Not applicable for this site

**Peripheral Nerves and Autonomic Nervous System; Connective, Subcutaneous, and Other Soft Tissues**

**CS Site-Specific Factor 4**

Code	Description
888	Not applicable for this site

**Peripheral Nerves and Autonomic Nervous System; Connective, Subcutaneous, and Other Soft Tissues**

**CS Site-Specific Factor 5**

Code	Description
888	Not applicable for this site

**Peripheral Nerves and Autonomic Nervous System; Connective, Subcutaneous, and Other Soft Tissues**

**CS Site-Specific Factor 6**

Code	Description
888	Not applicable for this site

**Collaborative Staging Codes  
Retroperitoneum and Peritoneum**

**C48.0-C48.2, C48.8**

C48.0 Retroperitoneum

C48.1 Specified parts of peritoneum (including omentum and mesentery)

C48.2 Peritoneum, NOS

C48.8 Overlapping lesion of retroperitoneum and peritoneum

**Note:** AJCC includes these sites with soft tissue sarcomas (C47.0-C48.9)

CS Tumor Size	CS Site-Specific Factor 1	The following tables are available at the collaborative staging website: Histology Exclusion Table AJCC Stage Extension Size Table
CS Extension	CS Site-Specific Factor 2	
CS TS/Ext-Eval	CS Site-Specific Factor 3	
CS Lymph Nodes	CS Site-Specific Factor 4	
CS Reg Nodes Eval	CS Site-Specific Factor 5	
Reg LN Pos	CS Site-Specific Factor 6	
Reg LN Exam		
CS Mets at DX		
CS Mets Eval		

**Retroperitoneum and Peritoneum**

**CS Tumor Size**

SEE STANDARD TABLE

**Retroperitoneum and Peritoneum**

**CS Extension**

**Note:** For AJCC TNM staging, all retroperitoneal lesions are considered deep lesions.

Code	Description	TNM	SS77	SS2000
10	Tumor confined to site of origin	*	L	L
30	Localized, NOS	*	L	L
40	Adjacent connective tissue see definition of adjacent connective tissue in General Instructions.	*	RE	RE
60	Adjacent organs/structures including bone/cartilage Retroperitoneum: Adrenal(s) (suprarenal gland(s)) Aorta Ascending colon Descending colon Kidney(s) Pancreas Vena cava Vertebra Peritoneum: Colon (except ascending and descending colon) Esophagus Gallbladder Liver Small intestine Spleen Stomach	*	RE	RE

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80	Further contiguous extension, including: For retroperitoneum: extension to colon other than ascending or descending For peritoneum: extension to ascending or descending colon	*	D	D
95	No evidence of primary tumor	T0	U	U
99	Unknown extension Primary tumor cannot be assessed Not documented in patient record	TX	U	U

\* For codes 10-80 ONLY, the T category is assigned based on value of CS Tumor Size, as shown in the Extension Size Table for this site.

**Retroperitoneum and Peritoneum  
CS TS/Ext-Eval  
SEE STANDARD TABLE**

**Retroperitoneum and Peritoneum  
CS Lymph Nodes**

**Note 1:** Regional lymph nodes are defined as those in the vicinity of the primary tumor.

**Note 2:** Regional lymph node involvement is rare. For this schema, if there is no mention of lymph node involvement clinically, assume that lymph nodes are negative (code 00). Use code 99 (Unknown) only when there is no available information on the extent of the patient's disease, for example, when a lab-only case is abstracted from a biopsy report and no clinical history is available.

Code	Description	TNM	SS77	SS2000
00	None; no regional lymph node involvement	N0	NONE	NONE
10	Regional lymph node(s): Intra-abdominal Paracaval Pelvic Subdiaphragmatic Regional lymph node(s), NOS	N1	RN	RN
80	Lymph nodes, NOS	N1	RN	RN
99	Unknown (see Note 2)	NX	U	U

**Retroperitoneum and Peritoneum  
CS Reg Nodes Eval  
SEE STANDARD TABLE**

**Retroperitoneum and Peritoneum  
Reg LN Pos  
SEE STANDARD TABLE**

**Retroperitoneum and Peritoneum  
Reg LN Exam  
SEE STANDARD TABLE**

**Retroperitoneum and Peritoneum  
CS Mets at DX  
SEE STANDARD TABLE**

**Retroperitoneum and Peritoneum  
CS Mets Eval  
SEE STANDARD TABLE**

**Retroperitoneum and Peritoneum  
CS Site-Specific Factor 1**

Code	Description
888	Not applicable for this site

**Retroperitoneum and Peritoneum  
CS Site-Specific Factor 2**

Code	Description
888	Not applicable for this site

**Retroperitoneum and Peritoneum  
CS Site-Specific Factor 3**

Code	Description
888	Not applicable for this site

**Retroperitoneum and Peritoneum  
CS Site-Specific Factor 4**

Code	Description
888	Not applicable for this site

**Retroperitoneum and Peritoneum  
CS Site-Specific Factor 5**

Code	Description
888	Not applicable for this site

**Retroperitoneum and Peritoneum  
CS Site-Specific Factor 6**

Code	Description
888	Not applicable for this site

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**Site-Specific Surgery Codes**

**BONES, JOINTS, AND ARTICULAR CARTILAGE C400–C419**

**PERIPHERAL NERVES AND AUTONOMIC NERVOUS SYSTEM C470–C479**

**CONNECTIVE, SUBCUTANEOUS, AND OTHER SOFT TISSUES C490–C499**

(Except for M-9750, 9760-9764, 9800-9820, 9826, 9831-9920, 9931-9964, 9980-9989)

Codes

00 None; **no surgery** of primary site; **autopsy ONLY**

19 Local tumor destruction or excision, NOS

**Unknown** whether a specimen was sent to **pathology** for surgical events coded 19 (Principally for cases diagnosed prior to January 1, 2003)

15 Local tumor destruction

**No** specimen sent to **pathology** from surgical event 15

25 Local excision

26 Partial resection

**Specimen** sent to **pathology** from surgical events 25–26

30 **Radical excision** or **resection** of lesion WITH limb salvage

40 Amputation of limb

41 Partial amputation of limb

42 Total amputation of limb

50 Major amputation, NOS

51 Forequarter, including scapula

52 Hindquarter, including ilium/hip bone

53 Hemipelvectomy, NOS

54 Internal hemipelvectomy

90 Surgery, NOS

99 **Unknown** if surgery performed; **death certificate ONLY**

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## Site-Specific Surgery Codes

### All Other Sites

C142–C148, C170–C179, C239, C240–C249, C260–C269, C300–C301, C310–C319, C339, C379, C380–C388, C390–C399, **C480–C488**, C510–C519, C529, C570–C579, C589, C600–C609, C630–C639, C680–C689, C690–C699, C740–C749, C750–C759

(Except for M-9750, 9760-9764, 9800-9820, 9826, 9831-9920, 9931-9964, 9980-9989)

#### Codes

00 None; **no surgery** of primary site; **autopsy ONLY**

10 Local tumor destruction, NOS

11 Photodynamic therapy (PDT)

12 Electrocautery; fulguration (includes use of hot forceps for tumor destruction)

13 Cryosurgery

14 Laser

No specimen sent to **pathology** from surgical events 10–14

20 **Local tumor excision**, NOS

26 Polypectomy

27 Excisional biopsy

Any **combination** of 20 or 26–27 WITH

21 Photodynamic therapy (PDT)

22 Electrocautery

23 Cryosurgery

24 Laser ablation

25 Laser excision

[**SEER Note:** Codes 21 to 25 above combine 20 local tumor excision, 26 Polypectomy or 27 Excisional biopsy with 21 PDT, 22 Electrocautery, 23 Cryosurgery, 24 Laser ablation, or 25 Laser excision]

**Specimen** sent to **pathology** from surgical events 20–27

30 Simple/partial surgical removal of primary site

40 **Total surgical removal** of primary site; enucleation

41 Total enucleation (for eye surgery only)

50 Surgery stated to be “**debulking**”

60 Radical surgery

Partial or total removal of the primary site WITH a resection in continuity (partial or total removal) with other organs

[**SEER Note:** In continuity with or “en bloc” means that all of the tissues were removed during the same procedure, but not necessarily in a single specimen]

90 Surgery, NOS

99 **Unknown** if surgery performed; **death certificate ONLY**

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