

SEER EXTENT OF DISEASE -- 1988

CODES AND CODING INSTRUCTIONS

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## Definitions of Abbreviations and Symbols

AJCC	American Joint Committee on Cancer
cm	centimeter
incl.	including, inclusive
L	left
M-	Morphology code of the International Classification of Diseases for Oncology, Field Trial Edition (ICD-O, FTE, 1988)
mm	millimeter
NOS	Not otherwise specified
R	right
SEER	Surveillance, Epidemiology and End Results
T-	Topography code of the International Classification of Diseases for Oncology (ICD-O), 1976
<	less than
>	greater than
≤	less than or equal to
≥	greater than or equal to

**General Instructions  
for Using the SEER Extent of Disease--1988  
Codes and Coding Instructions**

The Extent of Disease schemes consist of a ten-digit code to be submitted for each and every site. It will be identified by a '4' in Section IV, Field 12. This scheme replaces the 13-digit (SEER), the 2-digit (ERG), the non-specific, and the SEER 1983-87 four-digit schemes. It will apply to January 1, 1988 diagnoses and later. Do NOT replace schemes for cases diagnosed prior to January 1, 1988 with this scheme; cases diagnosed prior to 1988 will remain coded to whatever scheme was in operation at that time.

For ALL sites, extent of disease is based on a combined clinical and operative/pathological assessment. Gross observations at surgery are particularly important when all malignant tissue is not removed. In the event of a discrepancy between pathology and operative reports concerning excised tissue, priority is given to the pathology report.

Clinical information, such as description of skin involvement for breast cancer and size of the primary lesion and distant lymph nodes for any site, can change the stage. Thus, be sure to peruse the clinical information carefully to ensure accurate extent of disease. If the operative/pathology information disproves the clinical information, code the operative/pathology information.

Autopsy reports are used in coding Extent of Disease just as are pathology reports, applying the same rules for inclusion and exclusion.

Death Certificate only cases are coded as '9999999999' in the SEER Extent of Disease 1988 scheme.

Extent of Disease should be limited to all information available within two months after diagnosis for all cases.

Metastasis which is known to have developed after the original diagnosis was made should be excluded.

## General Instructions (cont'd)

### Interpreting Ambiguous Terminology

- A. Tumor invasion "to", "into", "onto", or "encroaching upon" an organ or structure is to be interpreted as involvement whether the description is clinical or operative/pathological.
- B. "Probable", "suspected", "suspicious", "compatible with", or "consistent with" are to be interpreted as involvement by tumor.
- C. "Questionable", "possible", "suggests", or "equivocal" are NOT to be considered as evidence of involvement by tumor.
- D. "Induration" is used to describe surrounding fibrous or connective tissue adjacent to the tumor and is to be interpreted as extension of the malignant growth.

## General Instructions (cont'd)

### Extent of Disease Fields

The fields of information required for extent of disease are Tumor Size, Extension, Lymph Nodes, and the Pathology Review of Lymph Nodes.

#### I. TUMOR SIZE

Record the exact size of the primary tumor for all sites except where stated to be 'not applicable'. Record in tenths of CENTIMETERS (.\_. cm) beginning with 002 for tumors  $\leq 0.2$  cm to 990 for tumors 99.0 cm. Code '999' is reserved for unknown size.

Always code the size of the tumor, not the size of the polyp, ulcer, or cyst.

Do NOT add pieces or chips together to create a whole; they may not be from the same location, or they may represent only a very small portion of a large tumor. However, if an excisional biopsy is performed, and residual tumor is found at time of resection of the primary, code the size of the excisional biopsy tumor.

The descriptions in code '998' take precedence over any mention of size. Code '998' is used only for the following sites:

Esophagus (150.0-150.5, 150.8-150.9): Entire circumference  
Stomach (151.0-151.6, 151.8-151.9): Diffuse, widespread--3/4's or more, linitis plastica  
Colorectal (M-8220/8221 with /2 or /3): Familial/multiple polyposis  
Lung and main stem bronchus (162.2-162.5, 162.8-162.9): Diffuse, entire lobe or lung  
Breast (174.0-174.6, 174.8-174.9, 175.9): Diffuse, widespread--3/4's or more of breast, inflammatory carcinoma

For the following sites, size is not applicable:

Hematopoietic neoplasms, p. 148-149  
Hodgkin's and non-Hodgkin's lymphoma, p. 146-147  
Immunoproliferative diseases, p. 148-149  
Kaposi's sarcoma, p. 144-145  
Mycosis fungoides, p. 96-97  
Myeloproliferative diseases, p. 148-149  
Malignant melanoma of skin, vulva, penis, and scrotum, p. 94-95  
Sezary's disease of skin, p. 96-97  
Unknown and ill-defined primary sites (~~exclude ill-defined digestive and peritoneal sites, page 68, and respiratory/intra-thoracic organs, page 86~~), p. 150-151

For melanoma of skin, vulva, penis, and scrotum, SEER requires information on thickness of tumor instead of size to be coded in this field.

If size is not recorded, code as '999'.

For in situ lesions, code the size as stated.

General Instructions (cont'd)

Determining Descriptive Tumor Size

CENTIMETER EQUIVALENCES FOR DESCRIPTIVE TERMS

<u>Fruits</u>	<u>cm</u>	<u>Miscellaneous Food</u>	<u>cm</u>
Apple	7	Doughnut	9
Apricot	4	Egg	5
Cherry	2	Bantam	1
Date	4	Goose	7
Fig (dried)	4	Hen	3
Grape	2	Pigeon	3
Grapefruit	10	Robin	2
Kumquat	5	Lentil	<1
Lemon	8	Millet	<1
Olive	2		
Orange	9	<u>Money</u>	
Peach	6	Dime	1
Pear	9	Dollar (silver)	4
Plum	3	Dollar (half)	3
Tangerine	6	Nickel	2
		Quarter	2
		Penny	1
<u>Nuts</u>		<u>Other</u>	
Almond	3	Ball (golf)	4
Chestnut	4	Ball (ping-pong)	3
Chestnut (horse)	4	Ball (tennis)	6
Hazel	2	Baseball	7
Hickory	3	Eraser on pencil	<1
Peanut	1	Fist	9
Pecan	3	Marble	1
Walnut	3	Match (head)	<1
		Microscopic	<1
<u>Vegetables</u>			
Bean	1		
Bean (lima)	2		
Pea	<1		
Pea (split)	<1		

SIZES IN CENTIMETERS, MILLIMETERS, INCHES

10 millimeters (mm) = 1 centimeter (cm)

2.5 centimeters (cm) = 1 inch (in)

1 millimeter (mm) = 1/10 centimeter (cm)

1 centimeter (cm) = .394 inch (in)

## General Instructions (cont'd)

### II. EXTENSION

The description of the primary tumor growth within the organ of origin or its extension to neighboring organs, or its metastasis to distant sites is summarized in a two-digit code. It is a hierarchical code in which the most extensive disease is all that is coded. Thus, information about the extent of the tumor within the primary site is lost if the tumor extends to neighboring organs, and extension to neighboring organs is lost if there is distant metastasis. Code '99' is reserved for unknown extension.

A "localized, NOS" category is provided for those cases in which the only description is "localized with no further information." "NOS" codes should be used only after an exhaustive search for more specific information.

If a tumor is described as "confined to mucosa," determine if it is limited to the epithelium (in situ) or if it has penetrated the basement membrane to invade the lamina propria.

### III. LYMPH NODES

Regional lymph nodes are listed for each site and then, as necessary, the regional (first station) lymph nodes are classified in terms of size, laterality, number of involved nodes, and distance of the lymph nodes from the primary site. It is a one-digit field, a hierarchical code, in which once distant lymph node involvement is observed, all mention of regional nodal involvement is lost.

Since in situ by definition means noninvasive, code lymph node involvement as '0'. If there is evidence of nodal involvement of a tumor described as in situ, it would indicate that an area of invasion was simply missed, and it is NOT an in situ lesion.

For solid tumors, the terms "fixed" or "matted" and "mass in the mediastinum, retroperitoneum, and/or mesentery" (with no specific information as to tissue involved) are considered involvement of lymph nodes. Any other terms, such as "palpable", "enlarged", "visible swelling", "shotty", or "lymphadenopathy" should be ignored; look for a statement of involvement, either clinical or pathological.

For lymphomas, any mention of lymph nodes is indicative of involvement.

## General Instructions (cont'd)

Regional lymph nodes are not palpable for inaccessible sites such as bladder, kidney, lung, liver, and ovary. The best description you will have concerning regional lymph nodes will be the surgeon's evaluation at the time of exploratory surgery or definitive surgery.

The terms "homolateral" and "ipsilateral" are used interchangeably. Any unidentified nodes included with the resected primary site specimen are to be considered as "Regional, NOS."

Codes are provided for "regional lymph node(s), NOS" and for "lymph nodes, NOS." "NOS" codes should be used only after an exhaustive search for more specific information.

General Instructions (cont'd)

IV. PATHOLOGY REVIEW OF REGIONAL LYMPH NODES

Number of REGIONAL lymph nodes: POSITIVE nodes (first two-characters) and nodes EXAMINED (second two-characters) for all sites except the hematopoietic, reticuloendothelial, and immunoproliferative and the myeloproliferative neoplasms, the brain, cerebral meninges, and other parts of the nervous system, and unknown or ill-defined primary sites. (This is based on pathology information ONLY.)

NUMBER OF REGIONAL NODES

<u>POSITIVE</u>	<u>EXAMINED</u>
00 All nodes examined negative	00 No nodes examined
01 One positive lymph node	01 One node examined
02 Two positive lymph nodes	02 Two nodes examined
..	..
..	..
10 Ten positive lymph nodes	10 Ten nodes examined
11 Eleven positive lymph nodes	11 Eleven nodes examined
..	..
..	..
96 96+	..
97 Positive nodes but number of positive nodes not specified	97+
98 No nodes examined	98 Nodes examined, but number unknown
99 Unknown if nodes are positive or negative	99 Unknown if nodes were examined

UNKNOWN AND NOT APPLICABLE

UNKNOWN will only be used when there is no descriptive information or when there is insufficient information because of an inadequate workup. It is to be used only if more specific information cannot be found except for Death Certificate only cases which are always coded '9999999999'.

Size of the Primary Tumor	999 - Not stated
Extension	99 - UNKNOWN
Lymph Nodes	9 - UNKNOWN; not stated
Pathology Review	9999 - UNKNOWN

Code 9's to indicate that a field is not applicable. For example, "Lymph Nodes" is not an applicable field for brain tumors, leukemia, or lymphomas.

## General Instructions (cont'd)

### DISEASES DISSEMINATED AT DIAGNOSIS

Hematopoietic and reticuloendothelial neoplasms such as leukemia, multiple myeloma, reticuloendotheliosis, and Letterer-Siwe's disease, as well as immunoproliferative and myeloproliferative neoplasms are considered disseminated disease at diagnosis. These conditions will always be coded as systemic disease under Extension, and 9's in the remaining fields.

### HODGKIN'S DISEASE and NON-HODGKIN'S LYMPHOMA

All lymphomas, both nodal and extranodal, will be coded to the lymphoma scheme (histology codes (M-9590-9694, 9650-9698, 9702-9704) except for mycosis fungoides (M-9700) and Sezary's disease (M-9701) which have a separate scheme found under the skin site codes 173.\_.

### KAPOSI'S SARCOMA

Kaposi's sarcoma (M-9140) also has a separate scheme found just preceding the lymphomas.



## HEAD AND NECK SITES

### **DISTINGUISHING "IN SITU" AND "LOCALIZED" TUMORS FOR HEAD/NECK SITES**

One of the problems that needs to be resolved is the ambiguity of the term "confined to mucosa" for head and neck sites.

Historically, carcinomas described as "confined to mucosa" have been coded as localized. In order to provide greater specificity and to rule out the possibility of classifying noninvasive tumors in this category, abstractors should determine:

- 1) if the tumor was confined to the epithelium, in which case it would be in situ,

OR

- 2) if the tumor had penetrated the basement membrane to invade the lamina propria, in which case it would be localized and coded to invasion of the lamina propria.

The EPITHELIAL LAYER borders on the lumen. It contains no blood vessels or lymphatics.

The BASEMENT MEMBRANE, a sheet of extracellular material, functions as a filtration barrier and a boundary involved in generating and maintaining tissue structure.

The LAMINA PROPRIA, composed of areolar connective tissue, contains blood vessels, nerves, and, in some regions, glands. Once tumor has broken through the basement membrane into the lamina propria, it can spread by way of the lymphatics and blood vessels to other parts of the body.

The head and neck sites do NOT have a MUSCULARIS MUCOSAE. Therefore, the lamina propria and the submucosa tend to merge, and the two terms are used interchangeably.

The SUBMUCOSA is a thick layer of either dense or areolar connective tissue. It contains blood vessels, lymphatic vessels, nerves, and, in some regions, glands. Only the GUM and HARD PALATE do NOT have a submucosa, but rather a mucoperiosteum.

The MUSCULARIS PROPRIA is muscle tissue which constitutes the wall of the organ. Only the GUM and HARD PALATE do NOT have a muscularis.

There is no SEROSA on any of the head and neck sites.

HEAD AND NECK SITES

PRIMARY SITE	MUCOSA		SUBMUCOSA	MUSCULARIS PROPRIA	SEROSA	
	Epithelium	: : :	Lamina Propria			
Lip (140._)	Yes	: :	Yes	Yes	Yes	No
Tongue (141._)	Yes	B A S E	Yes	Yes	Yes	No
Gum (143._)	Yes	M E N	Yes	No	No	No
Floor of Mouth (144._)	Yes	T : :	Yes	Yes	Yes	No
Buccal Mucosa (145.0-145.1)	Yes	: M E	Yes	Yes	Yes	No
Hard Palate (145.2)	Yes	M B R	Yes	No	No	No
Soft Palate (145.3-145.4)	Yes	A N E	Yes	Yes	Yes	No
Other Mouth (145.5, .8-.9)	Yes	: : :	Yes	Yes	Yes	No

For the above head and neck sites and for the pharynx and its subsites, if a tumor is described as "confined to mucosa," determine if it is limited to the epithelium (in situ) or if it has penetrated the basement membrane to invade the lamina propria.

LIP (Vermilion or Labial Mucosa)  
 140.0-140.1, 140.3-140.6, 140.8-140.9

**SIZE OF PRIMARY TUMOR**

(from pathology report; operative report; physical examination--in priority order)

000 No mass; no tumor found  
 001 Microscopic focus or foci only

	mm	cm
002	≤2	≤0.2
003	3	0.3
...		
...		
009	9	0.9
010	10	1.0
...		
...		
099	99	9.9
100	100	10.0
...		
...		
990	990+	99.0+
999	Not stated	

**EXTENSION**

- 00 IN SITU: Noninvasive; intraepithelial
- 10 Invasive tumor confined to:
  - Lamina propria
  - Submucosa (superficial invasion)
  - Vermilion surface
  - Labial mucosa
  - Subcutaneous soft tissue of lip
  - Skin of lip
- 20 Musculature
- 30 Localized, NOS
- 50 Buccal mucosa (inner cheek)  
 Opposite (both) lip(s); commissure
- 51 Gingiva
- 70 Upper lip/commissure:
  - Maxilla
  - Lower lip/commissure:
    - Mandible
- 75 Tongue
- 76 Nose for upper lip/commissure  
 Skin of neck
- 80 FURTHER extension
- 85 Metastasis
- 99 UNKNOWN if extension or metastasis

**Note:** AJCC includes labial mucosa (140.3-140.5) with buccal mucosa (145.0).

LIP (Vermilion or Labial Mucosa)  
140.0-140.1, 140.3-140.6, 140.8-140.9

**LYMPH NODES**

0 No lymph node involvement  
-----

REGIONAL Lymph Nodes

**Upper Lip:**

Facial: Buccinator  
Submandibular (submaxillary)  
Parotid: Infra-auricular/pre-auricular

**Lower Lip:**

Facial: Mandibular  
Submandibular (submaxillary)  
Submental  
Internal jugular (upper deep cervical):  
jugulodigastric  
jugulo-omohyoid  
Cervical, NOS

**Commissure:** All nodes listed above

Regional lymph node(s), NOS

- 1 One positive ipsilateral node  
≤3 cm in greatest diameter
- 2 One positive ipsilateral node  
>3-6 cm in greatest diameter
- 3 Multiple positive ipsilateral  
nodes ≤6 cm
- 4 Ipsilateral, node size not stated
- 5 Bilateral and/or contralateral  
positive nodes ≤6 cm or size  
not stated
- 6 Any positive node(s),  
at least one >6 cm

-----  
DISTANT Lymph Nodes

7 Other than above  
-----

8 Lymph Nodes, NOS

9 UNKNOWN; not stated

**Note:** If laterality not specified,  
assume nodes are ipsilateral.

**BASE OF TONGUE, LINGUAL TONSIL**  
 141.0, 141.6

**SIZE OF PRIMARY TUMOR**

(from pathology report; operative report; physical examination--in priority order)

000 No mass; no tumor found  
 001 Microscopic focus or foci only

	<u>mm</u>	<u>cm</u>
002	≤2	≤0.2
003	3	0.3
...		
...		
009	9	0.9
010	10	1.0
...		
...		
099	99	9.9
100	100	10.0
...		
...		
990	990+	99.0+
999	Not stated	

**EXTENSION**

- 00 IN SITU: Noninvasive; intraepithelial
- 10 Invasive tumor on one side confined to:  
 Lamina propria  
 Submucosa
- 20 Musculature, intrinsic or NOS
- 30 Localized, NOS
- 40 Tumor crosses midline
- 50 Anterior 2/3's of tongue  
 Lower gingiva  
 Floor of mouth
- 53 Sublingual gland
- 60 Lateral pharyngeal wall (tonsillar pillars and fossae, tonsils)  
 Vallecula, incl. pharyngoepiglottic and glossoepiglottic folds  
 Epiglottis, lingual (pharyngeal surface)  
 Soft palate, inferior surface/NOS
- 70 Mandible
- 75 Musculature, extrinsic: Hyoglossus, genioglossus, styloglossus
- 76 Skin
- 80 FURTHER extension
- 85 Metastasis
- 99 UNKNOWN if extension or metastasis

**Note:** AJCC includes base of tongue (141.0) with oropharynx (146.\_).

BASE OF TONGUE, LINGUAL TONSIL

141.0, 141.6

LYMPH NODES

0 No lymph node involvement

REGIONAL Lymph Nodes

Submandibular (submaxillary)

Internal jugular (upper and lower deep cervical):

jugulodigastric

jugulo-omohyoid

Cervical, NOS

Regional lymph node(s), NOS

1 One positive ipsilateral node  
≤3 cm in greatest diameter

2 One positive ipsilateral node  
>3-6 cm in greatest diameter

3 Multiple positive ipsilateral  
nodes ≤6 cm

4 Ipsilateral, node size not stated

5 Bilateral and/or contralateral  
positive nodes ≤6 cm or size  
not stated

6 Any positive node(s),  
at least one >6 cm

DISTANT Lymph Nodes

7 Other than above

8 Lymph Nodes, NOS

9 UNKNOWN; not stated

**Note:** If laterality not specified,  
assume nodes are ipsilateral.

**ANTERIOR 2/3's of TONGUE, TIP, BORDER, AND NOS**  
 141.1-141.5, 141.8-141.9

**SIZE OF PRIMARY TUMOR**

(from pathology report; operative report; physical examination--in priority order)

000 No mass; no tumor found  
 001 Microscopic focus or foci only

	<u>mm</u>	<u>cm</u>
002	≤2	≤0.2
003	3	0.3
...		
...		
009	9	0.9
010	10	1.0
...		
...		
099	99	9.9
100	100	10.0
...		
...		
990	990+	99.0+
999	Not stated	

**EXTENSION**

- 00 IN SITU: Noninvasive; intraepithelial
- 10 Invasive tumor on one side confined to:  
Lamina propria  
Submucosa
- 20 Musculature, intrinsic or NOS
- 30 Localized, NOS
- 40 Tumor crosses midline
- 50 Base of tongue  
Gingiva, lower (incl. retromolar trigone)  
Floor of mouth
- 53 Sublingual gland
- 60 Lateral pharyngeal wall (tonsillar pillars and fossae, tonsils)  
Soft palate, inferior surface
- 70 Mandible  
Maxilla
- 75 Musculature, extrinsic: Hyoglossus  
genioglossus, styloglossus
- 80 FURTHER extension
- 85 Metastasis
- 99 UNKNOWN if extension or metastasis

ANTERIOR 2/3's of TONGUE, TIP, BORDER, AND NOS  
141.1-141.5, 141.8-141.9

LYMPH NODES

0 No lymph node involvement  
-----

REGIONAL Lymph Nodes

Submandibular (submaxillary)  
Submental  
Sublingual  
Internal jugular (upper and  
lower deep cervical):  
jugulodigastric  
jugulo-omohyoid  
Cervical, NOS  
Regional lymph node(s), NOS

Note: If laterality not specified,  
assume nodes are ipsilateral.

- 1 One positive ipsilateral node  
≤3 cm in greatest diameter
- 2 One positive ipsilateral node  
>3-6 cm in greatest diameter
- 3 Multiple positive ipsilateral  
nodes ≤6 cm
- 4 Ipsilateral, node size not stated
- 5 Bilateral and/or contralateral  
positive nodes ≤6 cm or size  
not stated
- 6 Any positive node(s),  
at least one >6 cm

-----  
DISTANT Lymph Nodes

7 Other than above  
-----

8 Lymph Nodes, NOS

9 UNKNOWN; not stated

**MAJOR SALIVARY GLANDS**  
 142.0-142.2, 142.8-142.9

**SIZE OF PRIMARY TUMOR**

(from pathology report; operative report; physical examination--in priority order)

000 No mass; no tumor found  
 001 Microscopic focus or foci only

	mm	cm
002	≤2	≤0.2
003	3	0.3
...		
...		
009	9	0.9
010	10	1.0
...		
...		
099	99	9.9
100	100	10.0
...		
...		
990	990+	99.0+
999	Not stated	

**EXTENSION**

- 00 IN SITU; noninvasive
- 10 Invasive tumor confined to gland of origin
- 30 Localized, NOS
- 40 Periglandular soft/connective tissue  
 Other major salivary gland (parotid, submaxillary, sublingual)  
 Periosteum of mandible  
 Skeletal muscle: Digastric, pterygoid, stylohyoid  
  
**Parotid gland only:**  
 Skin overlying gland  
 External auditory meatus  
 Facial nerve  
 Pharyngeal mucosa  
 Skeletal muscle: Sternocleidomastoid, masseter  
  
**Submandibular gland only:**  
 Skeletal muscle: Mylohyoid, hyoglossus, styloglossus
- 50 **Parotid gland only:**  
 Skull; mastoid  
 Mandible  
 Nerves: Auricular, spinal accessory  
 Major blood vessel(s): Carotid artery and jugular vein  
  
**Submandibular gland only:**  
 Mandible  
 Nerves: Facial, lingual  
 Major blood vessels: Facial artery or vein, maxillary artery
- 80 FURTHER extension
- 85 Metastasis
- 99 UNKNOWN if extension or metastasis

MAJOR SALIVARY GLANDS  
142.0-142.2, 142.8-142.9

LYMPH NODES

0 No lymph node involvement  
-----

Note: If laterality not specified,  
assume nodes are ipsilateral.

REGIONAL Lymph Nodes

Parotid gland only:

Intraparotid, infra-auricular,  
preauricular

Submandibular gland only:

Submandibular (submaxillary)  
Submental  
Internal jugular (upper deep  
cervical):  
jugulodigastric

Parotid and Submandibular glands:

Cervical, NOS  
Regional lymph node(s), NOS

- 1 One positive ipsilateral node  
≤3 cm in greatest diameter
- 2 One positive ipsilateral node  
>3-6 cm in greatest diameter
- 3 Multiple positive ipsilateral  
nodes ≤6 cm
- 4 Ipsilateral, node size not stated
- 5 Bilateral and/or contralateral  
positive nodes ≤6 cm or size  
not stated
- 6 Any positive node(s),  
at least one >6 cm

-----  
DISTANT Lymph Nodes

7 Other than above

-----  
8 Lymph Nodes, NOS

9 UNKNOWN; not stated

GUM (Gingiva), RETROMOLAR AREA  
 143.0-143.1, 143.8-143.9, 145.6

**SIZE OF PRIMARY TUMOR**

(from pathology report; operative report; physical examination--in priority order)

000 No mass; no tumor found  
 001 Microscopic focus or foci only

	mm	cm
002	≤2	≤0.2
003	3	0.3
...		
...		
009	9	0.9
010	10	1.0
...		
...		
099	99	9.9
100	100	10.0
...		
...		
990	990+	99.0+
999	Not stated	

**EXTENSION**

- 00 IN SITU: Noninvasive; intraepithelial
- 10 Invasive tumor confined to mucoperiosteum (stroma)
- 30 Localized, NOS
- 50 Extension to:
  - Buccal mucosa (inner cheek)
  - Labial mucosa, lip
  - Upper gum only:
    - Hard palate
    - Soft palate
  - Lower gum/retromolar trigone only:
    - Floor of mouth
    - Tongue
- 55 Subcutaneous soft tissue of face
- 60 Lateral pharyngeal wall (tonsillar pillars and fossae, tonsils)
- 70 Upper gum only:
  - Maxilla
 Lower gum/retromolar trigone only:
  - Mandible
- 73 Skull
- 74 Upper gum only:
  - Nasal cavity
  - Maxillary antrum (sinus)
- 76 Skin
- 80 FURTHER extension
- 85 Metastasis
- 99 UNKNOWN if extension or metastasis

GUM (Gingiva), RETROMOLAR AREA  
143.0-143.1, 143.8-143.9, 145.6

LYMPH NODES

0 No lymph node involvement  
-----

REGIONAL Lymph Nodes

Facial: Mandibular  
Submandibular (submaxillary)  
Submental for lower gum  
Retropharyngeal for upper gum  
Internal jugular (upper and  
lower deep cervical):  
jugulodigastric  
jugulo-omohyoid  
Cervical, NOS  
Regional lymph node(s), NOS

Note: If laterality not specified,  
assume nodes are ipsilateral.

- 1 One positive ipsilateral node  
≤3 cm in greatest diameter
- 2 One positive ipsilateral node  
>3-6 cm in greatest diameter
- 3 Multiple positive ipsilateral  
nodes ≤6 cm
- 4 Ipsilateral, node size not stated
- 5 Bilateral and/or contralateral  
positive nodes ≤6 cm or size  
not stated
- 6 Any positive node(s),  
at least one >6 cm

-----  
DISTANT Lymph Nodes

7 Other than above  
-----

8 Lymph Nodes, NOS

9 UNKNOWN; not stated

**FLOOR OF MOUTH**  
 144.0-144.1, 144.8-144.9

**SIZE OF PRIMARY TUMOR**

(from pathology report; operative report; physical examination--in priority order)

000 No mass; no tumor found  
 001 Microscopic focus or foci only

	<u>mm</u>	<u>cm</u>
002	≤2	≤0.2
003	3	0.3
...		
...		
009	9	0.9
010	10	1.0
...		
...		
099	99	9.9
100	100	10.0
...		
...		
990	990+	99.0+
999	Not stated	

**EXTENSION**

- 00 IN SITU: Noninvasive; intraepithelial
- 10 Invasive tumor on one side confined to:  
     Lamina propria  
     Submucosa
- 20 Musculature, extrinsic: Mylohyoid and hyoglossus
- 30 Localized, NOS
- 40 Tumor crosses midline
- 50 Gingiva (alveolar ridge), lower Anterior 2/3's of tongue  
     Base of tongue
- 53 Sublingual gland, incl. ducts  
     Submandibular (submaxillary) glands, incl. ducts
- 55 Subcutaneous soft tissue
- 60 Epiglottis, pharyngeal (lingual) surface  
     Lateral pharyngeal wall (tonsillar pillars and fossae, tonsils)  
     Vallecula, incl. pharyngo-epiglottic and glosso-epiglottic folds
- 70 Mandible
- 76 Skin of undersurface of chin/neck
- 80 FURTHER extension
- 85 Metastasis
- 99 UNKNOWN if extension or metastasis

FLOOR OF MOUTH  
144.0-144.1, 144.8-144.9

LYMPH NODES

0 No lymph node involvement  
-----

REGIONAL Lymph Nodes

- Submandibular (submaxillary)
- Submental
- Sublingual
- Internal jugular (upper and lower deep cervical):
  - jugulodigastric
  - jugulo-omohyoid
- Cervical, NOS
- Regional lymph node(s), NOS

Note: If laterality not specified, assume nodes are ipsilateral.

- 1 One positive ipsilateral node  $\leq 3$  cm in greatest diameter
- 2 One positive ipsilateral node  $>3-6$  cm in greatest diameter
- 3 Multiple positive ipsilateral nodes  $\leq 6$  cm
- 4 Ipsilateral, node size not stated
- 5 Bilateral and/or contralateral positive nodes  $\leq 6$  cm or size not stated
- 6 Any positive node(s), at least one  $>6$  cm

-----  
DISTANT Lymph Nodes

- 7 Other than above  
-----
- 8 Lymph Nodes, NOS
- 9 UNKNOWN; not stated

**CHEEK (Buccal) MUCOSA, VESTIBULE**  
**145.0-145.1**

**SIZE OF PRIMARY TUMOR**

(from pathology report; operative report; physical examination--in priority order)

000 No mass; no tumor found  
 001 Microscopic focus or foci only

	<u>mm</u>	<u>cm</u>
002	≤2	≤0.2
003	3	0.3
...		
...		
009	9	0.9
010	10	1.0
...		
...		
099	99	9.9
100	100	10.0
...		
...		
990	990+	99.0+
999	Not stated	

**EXTENSION**

- 00 IN SITU: Noninvasive; intraepithelial
- 10 Invasive tumor confined to:  
Lamina propria  
Submucosa
- 20 Musculature (buccinator)
- 30 Localized, NOS
- 50 Lip(s), incl. commissure
- 51 Gingiva
- 55 Subcutaneous soft tissue of cheek
- 60 Lateral pharyngeal wall (tonsillar pillars and fossae, tonsils)
- 70 Bone: Maxilla, mandible
- 73 Skull
- 75 Tongue
- 76 Skin of cheek (WITH or WITHOUT ulceration)
- 80 FURTHER extension
- 85 Metastasis
- 99 UNKNOWN if extension or metastasis

**Note:** ICD-O, T-145.0 for buccal mucosa includes the membrane lining of the cheeks but not of the lips. (AJCC includes labial mucosa with buccal mucosa.)

CHEEK (Buccal) MUCOSA, VESTIBULE  
145.0-145.1

LYMPH NODES

0 No lymph node involvement  
-----

REGIONAL Lymph Nodes

Facial: Buccinator, mandibular  
Submandibular (submaxillary)  
Parotid: Preauricular, infra-  
auricular  
Upper cervical (incl. cervical,  
NOS)  
Regional lymph node(s), NOS

Note: If laterality not specified,  
assume nodes are ipsilateral.

- 1 One positive ipsilateral node  
≤3 cm in greatest diameter
- 2 One positive ipsilateral node  
>3-6 cm in greatest diameter
- 3 Multiple positive ipsilateral  
nodes ≤6 cm
- 4 Ipsilateral, node size not stated
- 5 Bilateral and/or contralateral  
positive nodes ≤6 cm or size  
not stated
- 6 Any positive node(s),  
at least one >6 cm

-----  
DISTANT Lymph Nodes

- 7 Other than above  
-----
- 8 Lymph Nodes, NOS
- 9 UNKNOWN; not stated

**HARD PALATE**

145.2

**SIZE OF PRIMARY TUMOR**

(from pathology report; operative report; physical examination--in priority order)

000 No mass; no tumor found  
001 Microscopic focus or foci only

	<u>mm</u>	<u>cm</u>
002	≤2	≤0.2
003	3	0.3
...		
...		
009	9	0.9
010	10	1.0
...		
...		
099	99	9.9
100	100	10.0
...		
...		
990	990+	99.0+
999	Not stated	

**EXTENSION**

00	IN SITU: Noninvasive; intraepithelial
10	Invasive tumor on one side confined to mucoperiosteum (stroma)
30	Localized, NOS
40	Tumor crosses midline
50	Extension to: Soft palate Gingiva, upper Buccal mucosa (inner cheek)
70	Palatine bone Maxillary bone
74	Nasal cavity Maxillary antrum (sinus)
80	FURTHER extension
85	Metastasis
99	UNKNOWN if extension or metastasis

LYMPH NODES

0 No lymph node involvement  
-----

REGIONAL Lymph Nodes

Submandibular (submaxillary)  
Internal jugular (upper and  
lower deep cervical):  
jugulodigastric  
jugulo-omohyoid  
Retropharyngeal  
Cervical, NOS  
Regional lymph node(s), NOS

Note: If laterality not specified,  
assume nodes are ipsilateral.

- 1 One positive ipsilateral node  
≤3 cm in greatest diameter
- 2 One positive ipsilateral node  
>3-6 cm in greatest diameter
- 3 Multiple positive ipsilateral  
nodes ≤6 cm
- 4 Ipsilateral, node size not stated
- 5 Bilateral and/or contralateral  
positive nodes ≤6 cm or size  
not stated
- 6 Any positive node(s),  
at least one >6 cm

-----  
DISTANT Lymph Nodes

- 7 Other than above  
-----
- 8 Lymph Nodes, NOS
- 9 UNKNOWN; not stated

**SOFT PALATE, UVULA**  
145.3-145.4

**SIZE OF PRIMARY TUMOR**

(from pathology report; operative report; physical examination--in priority order)

000 No mass; no tumor found  
001 Microscopic focus or foci only

	<u>mm</u>	<u>cm</u>
002	≤2	≤0.2
003	3	0.3
...		
...		
009	9	0.9
010	10	1.0
...		
...		
099	99	9.9
100	100	10.0
...		
...		
990	990+	99.0+
999	Not stated	

**EXTENSION**

- 00 IN SITU: Noninvasive; intraepithelial
- 10 Invasive tumor on one side confined to:  
Lamina propria  
Submucosa
- 20 Musculature
- 30 Localized, NOS
- 40 Tumor crosses midline
- 50 Extension to:  
Hard palate  
Gum (gingiva), upper  
Buccal mucosa (inner cheek)
- 60 Extension to:  
Lateral pharyngeal wall  
(tonsillar pillars and fossae, tonsils)
- 70 Palatine bone (bone of hard palate)  
Maxilla  
Mandible
- 74 Nasopharynx  
Nasal cavity  
Maxillary antrum (sinus)
- 75 Tongue
- 80 FURTHER extension
- 85 Metastasis
- 99 UNKNOWN if extension or metastasis

**Note 1:** AJCC includes inferior surface of the soft palate (145.3) and uvula (145.4) with oropharynx (146.\_).

**Note 2:** Soft palate excludes nasopharyngeal (superior) surface of soft palate (147.3).

**Note 3:** Code 145.6 retromolar area, is included with gum (143.\_).

**LYMPH NODES**

0 No lymph node involvement  
-----

REGIONAL Lymph Nodes

Submandibular (submaxillary)  
Retropharyngeal  
Internal jugular (upper and  
lower deep cervical):  
jugulodigastric  
jugulo-omohyoid  
Cervical, NOS  
Regional lymph node(s), NOS

**Note:** If laterality not specified,  
assume nodes are ipsilateral.

- 1 One positive ipsilateral node  
≤3 cm in greatest diameter
- 2 One positive ipsilateral node  
>3-6 cm in greatest diameter
- 3 Multiple positive ipsilateral  
nodes ≤6 cm
- 4 Ipsilateral, node size not stated
- 5 Bilateral and/or contralateral  
positive nodes ≤6 cm or size  
not stated
- 6 Any positive node(s),  
at least one >6 cm

-----  
DISTANT Lymph Nodes

7 Other than above  
-----

8 Lymph Nodes, NOS

9 UNKNOWN; not stated

OTHER MOUTH  
145.5, 145.8-145.9

**SIZE OF PRIMARY TUMOR**

(from pathology report; operative report; physical examination--in priority order)

000 No mass; no tumor found  
001 Microscopic focus or foci only

	<u>mm</u>	<u>cm</u>
002	≤2	≤0.2
003	3	0.3
...		
...		
009	9	0.9
010	10	1.0
...		
...		
099	99	9.9
100	100	10.0
...		
...		
990	990+	99.0+
999	Not stated	

**EXTENSION**

00 IN SITU: Noninvasive;  
intraepithelial

10 Invasive tumor confined to:  
Lamina propria  
Submucosa

20 Musculature

30 Localized, NOS

50 Extension to adjacent oral cavity

60 Extension to oropharynx:  
Lateral pharyngeal wall  
Vallecula  
Lingual surface of epiglottis  
Inferior surface of soft palate

70 Invasion of adjacent structures:  
Maxilla, mandible, skull  
Maxillary antrum; nasal cavity  
Tongue  
Skin of face/neck

80 FURTHER extension

85 Metastasis

99 UNKNOWN if extension or metastasis

OTHER MOUTH  
145.5, 145.8-145.9

LYMPH NODES

0 No lymph node involvement  
-----

REGIONAL Lymph Nodes

Submandibular (submaxillary)  
Internal jugular (upper and  
lower deep cervical):  
jugulodigastric  
jugulo-omohyoid

Cervical, NOS  
Regional lymph node(s), NOS

Note: If laterality not specified,  
assume nodes are ipsilateral.

- 1 One positive ipsilateral node  
≤3 cm in greatest diameter
- 2 One positive ipsilateral node  
>3-6 cm in greatest diameter
- 3 Multiple positive ipsilateral  
nodes ≤6 cm
- 4 Ipsilateral, node size not stated
- 5 Bilateral and/or contralateral  
positive nodes ≤6 cm or size  
not stated
- 6 Any positive node(s),  
at least one >6 cm

-----  
DISTANT Lymph Nodes

7 Other than above  
-----

8 Lymph Nodes, NOS

9 UNKNOWN; not stated

**OROPHARYNX**  
146.0-146.9

**SIZE OF PRIMARY TUMOR**

(from pathology report; operative report; physical examination--in priority order)

000 No mass; no tumor found  
001 Microscopic focus or foci only

	<u>mm</u>	<u>cm</u>
002	≤2	≤0.2
003	3	0.3
...		
...		
009	9	0.9
010	10	1.0
...		
...		
099	99	9.9
100	100	10.0
...		
...		
990	990+	99.0+

999 Not stated

**Anatomic Limits of Oropharynx**

ANTERIOR WALL consists of the lingual (anterior) surface of the epiglottis and the pharyngoepiglottic and glossoepiglottic folds which bound the vallecula (the hollow formed at the junction of the base of the tongue and the epiglottis).

LATERAL WALLS include the tonsillar pillars, the tonsillar fossae, and the palatine (faucial) tonsils. On each side, the anterior pillar (glossopalatine fold) extends from the base of the tongue to the soft palate lying in front of the tonsillar fossa.

POSTERIOR WALL extends from a level opposite the free borders of the soft palate to the tip of the epiglottis.

AJCC has added a new subsite, Superior Wall, to the site of OROPHARYNX, which includes the inferior surface of the soft palate and uvula. SEER codes soft palate and uvula to ICD-0, 145.3 and 145.4.

**EXTENSION**

- 00 IN SITU: Noninvasive; intraepithelial
- 10 Invasive tumor confined to one of the following subsites:  
Anterior wall (incl. vallecula)  
One lateral wall  
Posterior wall
- 20 Involvement of two or more subsites  
Posterior, anterior or lateral wall(s)
- 30 Localized, NOS
- 40 Soft palate, inferior surface, incl. uvula
- 41 Pyriform sinus (incl. hypopharynx, NOS)
- 42 Soft palate, superior (nasopharyngeal) surface  
Nasopharynx, NOS
- 50 Base of tongue  
Larynx, laryngeal (posterior) surface of epiglottis, or larynx, NOS  
Floor of mouth  
Gum (gingiva)  
Buccal mucosa
- 55 Any of above WITH fixation
- 60 Prevertebral fascia  
Soft tissue of neck
- 70 Bone  
Extrinsic muscles: Mylohyoid, hyoglossus, styloglossus
- 80 FURTHER extension
- 85 Metastasis
- 99 UNKNOWN if extension or metastasis

LYMPH NODES

0 No lymph node involvement  
-----

REGIONAL Lymph Nodes

Retropharyngeal  
Internal jugular (upper and  
lower deep cervical):  
jugulodigastric  
jugulo-omohyoid  
Cervical, NOS  
Regional lymph node(s), NOS

Note: If laterality not specified,  
assume nodes are ipsilateral.

- 1 One positive ipsilateral node  
≤3 cm in greatest diameter
- 2 One positive ipsilateral node  
>3-6 cm in greatest diameter
- 3 Multiple positive ipsilateral  
nodes ≤6 cm
- 4 Ipsilateral, node size not stated
- 5 Bilateral and/or contralateral  
positive nodes ≤6 cm or size  
not stated
- 6 Any positive node(s),  
at least one >6 cm

-----  
DISTANT Lymph Nodes

- 7 Other than above  
-----
- 8 Lymph Nodes, NOS
- 9 UNKNOWN; not stated

Note 1: AJCC includes base of tongue  
(141.0) with oropharynx (146.\_).

Note 2: AJCC includes lingual (an-  
terior) surface of epiglottis (146.4)  
with larynx (161.\_).

**NASOPHARYNX**  
147.0-147.3, 147.8-147.9

**SIZE OF PRIMARY TUMOR**

(from pathology report; operative report; endoscopic examination; physical examination--in priority order)

000 No mass; no tumor found  
001 Microscopic focus or foci only

	<u>mm</u>	<u>cm</u>
002	≤2	≤0.2
003	3	0.3
...		
...		
009	9	0.9
010	10	1.0
...		
...		
099	99	9.9
100	100	10.0
...		
...		
990	990+	99.0+
999	Not stated	

**EXTENSION**

- 00 IN SITU: Noninvasive; intraepithelial
- 10 Invasive tumor confined to one of the following subsites:  
Posterior superior wall (vault)  
One lateral wall  
Inferior wall (superior surface of soft palate)
- 20 Involvement of two or more subsites:  
Posterior, inferior, or lateral wall(s)  
Lateral wall extending into eustachian tube/middle ear
- 30 Localized, NOS
- 40 Soft palate, inferior surface  
Oropharynx
- 50 Nasal cavity
- 52 Pterygopalatine fossa
- 55 Any of the above WITH fixation or tumor described only as FIXED
- 60 Bone, including skull
- 70 Brain, incl. cranial nerves
- 80 FURTHER extension
- 85 Metastasis
- 99 UNKNOWN if extension or metastasis

**Anatomic Limits of Nasopharynx**

POSTERIOR SUPERIOR WALL extends from the choana, or the opening of the nasal cavities into the nasopharynx, posteriorly to a level opposite the soft palate. The pharyngeal tonsils (adenoids) are located in this part of the nasopharynx.

LATERAL WALLS extend from the base of the skull to the level of the soft palate and include Rosenmuller's fossa (pharyngeal recess).

INFERIOR ANTERIOR WALL consists of the superior surface of the soft palate.

**LYMPH NODES**

0 No lymph node involvement  
-----

REGIONAL Lymph Nodes

Retropharyngeal  
Internal jugular (upper and  
lower deep cervical):  
jugulodigastric  
jugulo-omohyoid  
Cervical, NOS  
Regional lymph node(s), NOS

**Note:** If laterality not specified,  
assume nodes are ipsilateral.

- 1 One positive ipsilateral node  
≤3 cm in greatest diameter
- 2 One positive ipsilateral node  
>3-6 cm in greatest diameter
- 3 Multiple positive ipsilateral  
nodes ≤6 cm
- 4 Ipsilateral, node size not stated
- 5 Bilateral and/or contralateral  
positive nodes ≤6 cm or size  
not stated
- 6 Any positive node(s),  
at least one >6 cm

-----  
DISTANT Lymph Nodes

- 7 Other than above  
-----
- 8 Lymph Nodes, NOS
- 9 UNKNOWN; not stated

**HYPOPHARYNX (Laryngopharynx)**  
 148.0-148.3, 148.8-148.9

**SIZE OF PRIMARY TUMOR**

(from pathology report; operative report; endoscopic examination; physical examination--in priority order)

000 No mass; no tumor found  
 001 Microscopic focus or foci only

	<u>mm</u>	<u>cm</u>
002	≤2	≤0.2
003	3	0.3
...		
...		
009	9	0.9
010	10	1.0
...		
...		
099	99	9.9
100	100	10.0
...		
...		
990	990+	99.0+
999	Not stated	

**Anatomic Limits of Hypopharynx**

**POSTCRICOID AREA** (pharyngoesophageal junction) extends from the level of the arytenoid cartilages and connecting folds to the inferior border of the cricoid cartilage.

**PYRIFORM SINUS** extends from the pharyngoepiglottic fold to the upper edge of the esophagus. It is bounded laterally by the thyroid cartilage and medially by the hypopharyngeal surface of the aryepiglottic fold and the arytenoid and cricoid cartilages.

**POSTERIOR HYPOPHARYNGEAL WALL** extends from the level of the tip of the epiglottis to the inferior margin of the cricoid cartilage and laterally to the posterior margins of the pyriform sinus.

**EXTENSION**

- 00 IN SITU: Noninvasive; intraepithelial
- 10 Invasive tumor confined to one of the following subsites:  
 Postcricoid area  
 Pyriform sinus  
 Posterior pharyngeal wall
- 20 Tumor involves adjacent subsite(s) (listed above) WITHOUT fixation
- 30 Localized, NOS
- 40 Oropharynx
- 50 Larynx  
 Cervical esophagus
- 51 Any of the above WITH fixation of tumor or fixation, NOS
- 55 Fixation of hemilarynx or larynx
- 60 Prevertebral muscle(s)  
 Soft tissue of neck, cartilage
- 80 FURTHER extension
- 85 Metastasis
- 99 UNKNOWN if extension or metastasis

HYPOPHARYNX (Laryngopharynx)  
148.0-148.3, 148.8-148.9

LYMPH NODES

0 No lymph node involvement  
-----

REGIONAL Lymph Nodes

Retropharyngeal  
Internal jugular (upper and  
lower deep cervical):  
jugulodigastric  
jugulo-omohyoid  
Cervical, NOS  
Regional lymph node(s), NOS

- 1 One positive ipsilateral node  
≤3 cm in greatest diameter
- 2 One positive ipsilateral node  
>3-6 cm in greatest diameter
- 3 Multiple positive ipsilateral  
nodes ≤6 cm
- 4 Ipsilateral, node size not stated
- 5 Bilateral and/or contralateral  
positive nodes ≤6 cm or size  
not stated
- 6 Any positive node(s),  
at least one >6 cm

-----  
DISTANT Lymph Nodes

7 Other than above  
-----

8 Lymph Nodes, NOS

9 UNKNOWN; not stated

Note: If laterality not specified,  
assume nodes are ipsilateral.

PHARYNX NOS AND OTHER ILL-DEFINED ORAL CAVITY SITES  
 149.0-149.1, 149.8-149.9

**SIZE OF PRIMARY TUMOR**

(from pathology report; operative report; endoscopic examination; physical examination--in priority order)

000 No mass; no tumor found  
 001 Microscopic focus or foci only

	<u>mm</u>	<u>cm</u>
002	≤2	≤0.2
003	3	0.3
...		
...		
009	9	0.9
010	10	1.0
...		
...		
099	99	9.9
100	100	10.0
...		
...		
990	990+	99.0+
999	Not stated	

**EXTENSION**

- 00 IN SITU: Noninvasive; intraepithelial
- 10 Invasive tumor confined to tissue of origin
- 30 Localized, NOS
- 40 More than one region of pharynx involved
- 50 Pharynx and oral cavity involved
- 55 Any of the above WITH fixation
- 60 Extension to adjacent structures
- 80 FURTHER extension
- 85 Metastasis
- 99 UNKNOWN if extension or metastasis

PHARYNX NOS AND OTHER ILL-DEFINED ORAL CAVITY SITES  
149.0-149.1, 149.8-149.9

LYMPH NODES

0 No lymph node involvement  
-----

REGIONAL Lymph Nodes

Submandibular (submaxillary)  
Internal jugular (upper and  
lower deep cervical):  
jugulodigastric  
jugulo-omohyoid  
Retropharyngeal  
Cervical, NOS  
Regional lymph node(s), NOS

Note: If laterality not specified,  
assume nodes are ipsilateral.

- 1 One positive ipsilateral node  
≤3 cm in greatest diameter
- 2 One positive ipsilateral node  
>3-6 cm in greatest diameter
- 3 Multiple positive ipsilateral  
nodes ≤6 cm
- 4 Ipsilateral, node size not stated
- 5 Bilateral and/or contralateral  
positive nodes ≤6 cm or size  
not stated
- 6 Any positive node(s),  
at least one >6 cm

-----  
DISTANT Lymph Nodes

7 Other than above  
-----

8 Lymph Nodes, NOS

9 UNKNOWN; not stated

## DIGESTIVE SYSTEM SITES

### DISTINGUISHING "IN SITU" AND "LOCALIZED" TUMORS FOR THE DIGESTIVE SYSTEM

One of the problems that needs to be resolved is the ambiguity of the term "confined to mucosa" for the esophagus, stomach, small intestine, colon and rectum.

Historically, carcinomas described as "confined to mucosa" have been coded as localized. In order to provide greater specificity and to rule out the possibility of classifying noninvasive tumors in this category, abstractors should determine:

- 1) if the tumor was confined to the epithelium, in which case it would be in situ,

OR

- 2) if the tumor had penetrated the basement membrane to invade the lamina propria, in which case it would be localized and coded to invasion of the lamina propria.

The EPITHELIAL LAYER borders on the lumen. It contains no blood vessels or lymphatics.

The BASEMENT MEMBRANE, a sheet of extracellular material, functions as a filtration barrier and a boundary involved in generating and maintaining tissue structure.

The LAMINA PROPRIA, composed of areolar connective tissue, contains blood vessels, nerves, and, in some regions, glands. Once tumor has broken through the basement membrane into the lamina propria, it can spread by way of the lymphatics and blood vessels to other parts of the body.

The MUSCULARIS MUCOSAE is a thin layer of smooth muscle fibers.

The SUBMUCOSA is a thick layer of either dense or areolar connective tissue. It contains blood vessels, lymphatic vessels, nerves, and, in some regions, glands.

The MUSCULARIS PROPRIA is a double layer of muscle tissue in most of the digestive tract; it constitutes the wall of the organ.

The SEROSA, the outermost layer covering most of the digestive tract, is a single layer of squamous epithelial cells, part of the visceral peritoneum. For the esophagus and the rectum below the peritoneal reflection, there is no serosa. For the esophagus, the connective tissue of surrounding structures merges with the connective tissue of the esophagus and is called ADVENTITIA.

**DIGESTIVE SYSTEM SITES**

PRIMARY SITE	MUCOSA			SUB-MUCOSA	MUSCULARIS PROPRIA	SEROSA	
	Epithelium	: : Lamina : Propria	Muscularis Mucosae				
Esophagus (150._)	Yes	: B A S E	Yes	Yes	Yes	Yes	No
Stomach (151._)	Yes	S E M E N T	Yes	Yes	Yes	Yes	Yes
Sm. Intestine (152._)	Yes	: M E M B R A N E	Yes	Yes	Yes	Yes	Yes
Colon (153._)	Yes		Yes	Yes	Yes	Yes	Yes
Rectosigmoid (154.0)	Yes		Yes	Yes	Yes	Yes	Yes
Rectum (154.1)	Yes		Yes	Yes	Yes	Yes	No

**ESOPHAGUS**

150.0-150.5, 150.8-150.9

**SIZE OF PRIMARY TUMOR/LENGTH OF INVOLVED ESOPHAGUS,**

(from pathology report; operative report endoscopic examination; radiographic report--in priority order)

000	No mass; no tumor found	
001	Microscopic focus or foci only	
	<u>mm</u>	<u>cm</u>
002	≤2	≤0.2
003	3	0.3
...		
009	9	0.9
010	10	1.0
...		
099	99	9.9
100	100	10.0
...		
990	990+	99.0+
998	Entire circumference	
999	Not stated	

**CERVICAL ESOPHAGUS (150.0):** From the lower border of the cricoid cartilage to the thoracic inlet (suprasternal notch), about 18 cm from the incisors.

**INTRATHORACIC ESOPHAGUS (150.1-.5):**  
Upper thoracic portion (150.3,)  
 From the thoracic inlet to the level of the tracheal bifurcation (18-24 cm)

Mid-thoracic portion (150.4):  
 From the tracheal bifurcation midway to the gastroesophageal junction (24-32 cm)

Lower thoracic portion (150.5):  
 From midway between the tracheal bifurcation and the gastroesophageal junction to the GE junction, including the abdominal esophagus (150.2) between 32-40 cm.

**Note:** Ignore intraluminal extension to adjacent segment(s) of esophagus and code depth of invasion or extra-esophageal spread as indicated.

**EXTENSION**

- 00 IN SITU: Noninvasive; intraepithelial
- Invasive tumor confined to:**
  - 10 Mucosa, NOS
  - 11 Lamina propria
  - 12 Muscularis mucosae
  - 16 Submucosa
- 20 Muscularis propria invaded
- 30 Localized, NOS
- 40 Adventitia and/or soft tissue invaded; esophagus is described as "FIXED"
- 60 **Cervical esophagus:**
  - Major blood vessel(s): Carotid and subclavian arteries, jugular vein
  - Thyroid gland
- Intrathoracic, upper or mid-portion, esophagus:**
  - Major blood vessel(s): Aorta, pulmonary artery/vein, vena cava, azygos vein
  - Trachea, incl. carina
  - Main stem bronchus
- Intrathoracic, lower portion (abdominal), esophagus:**
  - Major blood vessel(s): Aorta, gastric artery/vein, vena cava
  - Diaphragm
  - Stomach, cardia
- 65 **Cervical esophagus:**
  - Hypopharynx
  - Larynx
  - Trachea, incl. carina
  - Cervical vertebra(e)
- Intrathoracic esophagus:**
  - Lung via bronchus
  - Pleura
  - Mediastinal structure(s), NOS
  - Rib(s); thoracic vertebra(e)

ESOPHAGUS  
150.0-150.5, 150.8-150.9

**EXTENSION (cont'd)**

- 80 FURTHER extension
- 85 Metastasis
- 99 UNKNOWN if extension  
or metastasis

**LYMPH NODES**

- 0 No lymph node involvement  
-----
- 1 REGIONAL Lymph Nodes (incl.  
contralateral or bilateral)

**Cervical only:**

- Peri-/paraesophageal
- Superior mediastinal
- Internal jugular (upper  
deep cervical):
  - jugulodigastric
  - jugulo-omohyoid
- Cervical, NOS

**Intrathoracic, upper or  
middle, only:**

- Peri-/Paraesophageal
- Internal jugular (upper and  
lower deep cervical):
  - jugulodigastric
  - jugulo-omohyoid
- Cervical, NOS
- Intratracheobronchial:
  - peritracheal, carinal  
(bifurcation), hilar  
(pulmonary roots)
- Left gastric: Cardiac, lesser  
curvature, perigastric, NOS
- Posterior mediastinal

**Intrathoracic, lower (abdominal).  
only:**

- Peri-/Paraesophageal
- Left gastric: Cardiac, lesser  
curvature, perigastric, NOS
- Posterior mediastinal

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

**DISTANT Lymph Nodes**

- 6 Supraclavicular lymph nodes
- 7 Other than above  
-----

- 8 Lymph nodes, NOS
- 9 UNKNOWN; not stated

**STOMACH**

151.0-151.6, 151.8-151.9

**SIZE OF PRIMARY TUMOR**

(from pathology report; operative report; endoscopic examination; radiographic report--in priority order)

000	No mass; no tumor found	
001	Microscopic focus or foci only	
	<u>mm</u>	<u>cm</u>
002	≤2	≤0.2
003	3	0.3
...		
...		
009	9	0.9
010	10	1.0
...		
...		
099	99	9.9
100	100	10.0
...		
...		
990	990+	99.0+
998	Diffuse; widespread; 3/4's or more: Linitis plastica	
999	Not stated	

**EXTENSION**

- 00 IN SITU: Noninvasive; intraepithelial (Adeno)ca in head of polyp, stalk not invaded
- Invasive tumor confined to:**
  - 10 Mucosa, NOS
  - 11 Lamina propria
  - 12 Muscularis mucosae
  - 13 Head of polyp
  - 14 Stalk of polyp
  - 15 Polyp, NOS
  - 16 Submucosa (superficial invasion)
- 20 Muscularis propria invaded
- 30 Localized, NOS
- 40 Invasion thru muscularis propria or muscularis, NOS; extension thru wall, NOS; perimuscular tissue Subserosal tissue/fat invaded
- 45 Extension to adjacent (connective) tissue:
  - Perigastric fat
  - Omentum, lesser, greater, NOS
  - Ligaments: Gastrocolic, gastrohepatic, gastrosplenic
  - Gastric artery
- 50 Invasion of/through serosa (mesothelium)
- 55 (45) + (50)
- 60 Extension to:
  - Spleen
  - Transverse colon (incl. flexures)
  - Liver
  - Diaphragm
  - Pancreas
  - Esophagus via serosa
  - Duodenum via serosa or NOS
  - Jejunum, ileum, small intestine, NOS
- 70 Extension to:
  - Abdominal wall
  - L Kidney
  - Adrenal gland(s)
  - Retroperitoneum

**Note:** Ignore intraluminal extension to esophagus and duodenum; code depth of invasion through stomach wall.

STOMACH  
151.0-151.6, 151.8-151.9

**EXTENSION (cont'd)**

- 80 FURTHER extension
- 85 Metastasis
- 99 UNKNOWN if extension  
or metastasis

**LYMPH NODES**

- 0 No lymph node involvement
- 
- REGIONAL Lymph Nodes
- Inferior (R) gastric:**
  - Greater curvature
  - Greater omental
  - Gastrooduodenal
  - Gastrocolic
  - Gastroepiploic, Right or NOS
  - Gastrohepatic
  - Pyloric, incl. sub-/infrapyloric
  - Pancreaticoduodenal
- Splenic:**
  - Gastroepiploic, L
  - Pancreaticolienal
  - Peripancreatic
  - Splenic hilar
- Superior (L) gastric:**
  - Lesser curvature
  - Lesser omentum
  - Gastropancreatic, L
  - Gastric, L
  - Paracardial; cardial
  - Cardioesophageal
- Perigastric, NOS
- Nodule(s) in perigastric fat
- 1 Perigastric nodes  $\leq 3$  cm from the  
primary tumor
- 2 Perigastric nodes  $> 3$  cm from the  
primary tumor
- 4 Celiac
- Hepatic (excl. gastrohepatic)
- 5 Regional lymph node(s), NOS
- 
- DISTANT Lymph Nodes
- 7 Other than above
- 
- 8 Lymph nodes, NOS
- 9 UNKNOWN; not stated

**SMALL INTESTINE**  
152.0-152.3, 152.8-152.9

**SIZE OF PRIMARY TUMOR**

(from pathology report; operative report; endoscopic examination; radiographic report--in priority order)

000	No mass; no tumor found	
001	Microscopic focus or foci only	
	<b>mm</b>	<b>cm</b>
002	≤2	≤0.2
003	3	0.3
...		
...		
009	9	0.9
010	10	1.0
...		
...		
099	99	9.9
100	100	10.0
...		
...		
990	990+	99.0+
999	Not stated	

**EXTENSION**

- 00 IN SITU: Noninvasive; intraepithelial (Adeno)ca in head of polyp, stalk not invaded
- Invasive tumor confined to:**
- 10 Mucosa, NOS
- 11 Lamina propria
- 12 Muscularis mucosae
- 13 Head of polyp
- 14 Stalk of polyp
- 15 Polyp, NOS
- 16 Submucosa (superficial invasion)
- 20 Muscularis propria invaded
- 30 Localized, NOS
- 40 Invasion thru muscularis propria or muscularis, NOS; extension thru wall, NOS; perimuscular tissue Subserosal tissue/fat invaded
- 45 Adjacent (connective) tissue; mesentery, incl. mesenteric fat
- 50 Invasion of/thru serosa (mesothelium)
- 55 (45) + (50)
- 60 **Duodenum only:**  
Extrahepatic bile ducts, incl. ampulla of Vater  
Pancreas, incl. pancreatic duct

**Note:** Ignore intraluminal extension to adjacent segment(s) of small intestine and code depth of invasion or spread outside the small intestine as indicated.

SMALL INTESTINE  
152.0-152.3, 152.8-152.9

**EXTENSION (cont'd)**

- 65 **Duodenum only:**  
 Stomach  
 Transverse colon, hepatic flexure  
 Greater omentum; omentum, NOS  
 R or quadrate lobe of liver; direct extension to liver, NOS  
 Right kidney or ureter; kidney, NOS  
 Major blood vessel(s): Aorta, superior mesenteric artery or vein, vena cava, portal vein, renal vein, gastroduodenal artery
- Jejunum and Ileum:**  
 Large intestine, incl. appendix
- All small intestine sites:**  
 Small intestine via serosa  
 Abdominal wall  
 Retroperitoneum
- 80 **FURTHER extension**
- 85 **Metastasis**
- 99 **UNKNOWN if extension or metastasis**

**LYMPH NODES**

- 0 No lymph node involvement  
 - - - - -
- 1 **REGIONAL Lymph Nodes**
- Duodenum only:**  
 Hepatic: Pancreaticoduodenal; infrapyloric, gastroduodenal
- Jejunum and Ileum only:**  
 Posterior cecal (terminal ileum only)  
 Ileocolic (terminal ileum only)  
 Superior mesenteric; mesenteric, NOS
- Regional lymph node(s), NOS**  
 - - - - -
- DISTANT Lymph Nodes**
- 7 Other than above  
 - - - - -
- 8 **Lymph Nodes, NOS**
- 9 **UNKNOWN; not stated**

COLON (incl. Flexures and Appendix)  
153.0-153.9

**SIZE OF PRIMARY TUMOR**

(from pathology report; operative report; endoscopic examination; radiographic report--in priority order)

000	No mass; no tumor found	
001	Microscopic focus or foci only	
	<u>mm</u>	<u>cm</u>
002	≤2	≤0.2
003	3	0.3
...		
009	9	0.9
010	10	1.0
...		
099	99	9.9
100	100	10.0
...		
990	990+	99.0+
998	Familial/multiple polyposis (M-8220/8221)	
999	Not stated	

**EXTENSION**

- 00 IN SITU: Noninvasive; intraepithelial (Adeno)ca in head of polyp, stalk not invaded
- Invasive tumor confined to:
  - 10 Mucosa, NOS
  - 11 Lamina propria
  - 12 Muscularis mucosae
  - 13 Head of polyp
  - 14 Stalk of polyp
  - 15 Polyp, NOS
  - 16 Submucosa (superficial invasion)
- 20 Muscularis propria invaded
- 30 Localized, NOS/confined to colon, NOS
- 40 Invasion thru muscularis propria or muscularis, NOS; extension thru wall, NOS; perimuscular tissue Subserosal tissue/fat invaded
- 45 Extension to adjacent (connective) tissue:
  - Mesentery (incl. mesenteric fat); mesocolon--transverse
  - Retroperitoneal fat--ascending and descending colon
  - Greater omentum; gastrocolic ligament--transverse colon
  - Pericolic fat
- 50 Invasion of/through serosa (mesothelium)
- 55 (45) + (50)
- 60 Cecum, appendix, ascending, descending, and sigmoid colon:
  - Greater omentum
  - Spleen--descending
  - Pelvic wall--descending/sigmoid
  - Ureter/kidney, R--ascending/cecum L--descending
  - Liver, R lobe--ascending/cecum

COLON (incl. Flexures and  
153.0-153.9

**EXTENSION** (cont'd)

**LYMPH NODES**

<p><b>Transverse colon and flexures:</b> Stomach Spleen; liver Pancreas Gallbladder/bile ducts Kidney</p> <p><b>All colon sites:</b> Small intestine</p> <p>65 <b>All colon sites:</b> Abdominal wall Retroperitoneum</p> <p>70 <b>Cecum, appendix, ascending, descending, and sigmoid colon:</b> Uterus Ovary; fallopian tube Cul de sac--sigmoid</p> <p>75 <b>Cecum, appendix, ascending, descending, and sigmoid colon:</b> Urinary bladder--cecum/ ascending/sigmoid Gallbladder for cecum/ascending</p> <p><b>Transverse colon and flexures:</b> Ureter Adrenal gland Diaphragm</p> <p><b>All colon sites:</b> Other segment of colon via serosa Fistula to skin</p> <p>80 <b>FURTHER extension</b></p> <p>85 <b>Metastasis</b></p> <p>99 <b>UNKNOWN if extension or metastasis</b></p>	<p>0 No lymph node involvement -----</p> <p><b>REGIONAL Lymph Nodes</b></p> <p>1 <b>All colon subsites:</b> Epicolic (adjacent to bowel wall) Paracolic/pericolic Colic, NOS Nodule(s) in pericolic fat</p> <p>2 <b>Cecum and Appendix:</b> Cecal, anterior, posterior, NOS Ileocolic Right colic</p> <p><b>Ascending colon:</b> Ileocolic Right colic Middle colic</p> <p><b>Transverse colon and flexures:</b> Middle colic R colic for hepatic flexure only L colic for splenic flexure only Inferior mesenteric for splenic flexure only</p> <p><b>Descending colon:</b> Left colic Sigmoid Inferior mesenteric</p> <p><b>Sigmoid:</b> Sigmoidal (sigmoid mesenteric) Inferior mesenteric Superior hemorrhoidal Superior rectal</p> <p>3 Mesenteric, NOS Regional lymph node(s), NOS -----</p> <p><b>DISTANT Lymph Nodes</b></p> <p>7 Other than above -----</p> <p>8 Lymph Nodes, NOS</p> <p>9 UNKNOWN; not stated</p>
--	---

**Note:** Ignore intraluminal extension to adjacent segment(s) of colon; code depth of invasion or extracolonic spread as indicated.

RECTOSIGMOID, RECTUM  
154.0-154.1

**SIZE OF PRIMARY TUMOR**

(from pathology report; operative report; endoscopic examination; radiographic report; physical examination--in priority order)

000	No mass; no tumor found	
001	Microscopic focus or foci only	
	<u>mm</u>	<u>cm</u>
002	≤2	≤0.2
003	3	0.3
...		
...		
009	9	0.9
010	10	1.0
...		
099	99	9.9
100	100	10.0
...		
990	990+	99.0+
998	Familial/multiple polyposis (M-8220/8221)	
999	Not stated	

**EXTENSION**

- 00 IN SITU: Noninvasive; intraepithelial  
(Adeno)ca in head of polyp, stalk not invaded
- Invasive tumor confined to:**
- 10 Mucosa, NOS
- 11 Lamina propria
- 12 Muscularis mucosae
- 13 Head of polyp
- 14 Stalk of polyp
- 15 Polyp, NOS
- 16 Submucosa (superficial invasion)
- 20 Muscularis propria invaded
- 30 Localized, NOS
- 40 Invasion thru muscularis propria or muscularis, NOS; extension thru wall, NOS; perimuscular tissue  
Subserosal tissue/fat invaded
- 45 Extension to adjacent (connective tissue):  
Mesentery (incl. mesenteric fat); mesocolon--rectosigmoid  
Pericolic fat--rectosigmoid  
Rectovaginal septum--rectum  
Perirectal fat
- 50 Invasion of/through serosa (mesothelium)
- 55 (45) + (50)
- 60 Extension:  
**Rectosigmoid:**  
Small intestine  
Cul de sac (rectouterine pouch)  
Pelvic wall  
  
**Rectum:**  
Rectovesical fascia, male  
Vagina  
Bladder, male  
Prostate  
Ductus deferens  
Seminal vesicle(s)  
Cul de sac (rectouterine pouch)  
Pelvic wall  
Skeletal muscle

**EXTENSION (cont'd)**

70 Extension:

**Rectosigmoid:**

Prostate  
Uterus, incl. cervix  
Ovary; fallopian tube  
Urinary bladder  
and/or ureter

**Rectum:**

Uterus, incl. cervix  
Bladder, female  
Urethra  
Bones of pelvis  
Perineum; perianal skin

75 Extension:

**Rectosigmoid:**

Vagina  
Skeletal muscles of pelvic  
floor

**Rectum:**

Ovary; fallopian tube  
Sacrum  
Sacral plexus

80 FURTHER extension

85 Metastasis

99 UNKNOWN if extension  
or metastasis

**LYMPH NODES**

0 No lymph node involvement

REGIONAL Lymph Nodes

1 **Rectosigmoid:**

Paracolic  
Perirectal  
Nodule(s) in pericolic fat

**Rectum:**

Perirectal  
Nodule(s) in perirectal fat

2 **Rectosigmoid:**

Hemorrhoidal, superior or middle  
Left colic (incl. colic, NOS)  
Superior rectal  
Sigmoidal (sigmoid mesenteric)  
Inferior mesenteric

**Rectum:**

Sigmoidal (sigmoid mesenteric)  
Inferior mesenteric  
Hemorrhoidal, superior, or  
inferior  
Sacral (lateral, presacral,  
promontory (Gerota's), or NOS)  
Internal iliac (hypogastric)

3 Mesenteric, NOS

Regional lymph node(s), NOS

DISTANT Lymph Nodes

7 Other than above

8 Lymph Nodes, NOS

9 UNKNOWN; not stated

**Note:** Ignore intraluminal extension to adjacent segment(s) of colon/rectum and code depth of invasion or extracolonic spread as indicated.

ANAL CANAL, ANUS NOS, OTHER PARTS OF RECTUM  
154.2-154.3, 154.8

**SIZE OF PRIMARY TUMOR**

(from pathology report;  
operative report; endoscopic  
examination; radiographic  
report; physical examination--in  
priority order)

000 No mass; no tumor found  
001 Microscopic focus or foci only

	mm	cm
002	≤2	≤0.2
003	3	0.3
...		
...		
009	9	0.9
010	10	1.0
...		
...		
099	99	9.9
100	100	10.0
...		
...		
990	990+	99.0+
999	Not stated	

**EXTENSION**

- 00 IN SITU: Noninvasive;  
intraepithelial
- Invasive tumor confined to:**
- 10 Mucosa, NOS
- 11 Lamina propria
- 12 Muscularis mucosae
- 16 Submucosa (superficial invasion)
- 20 Muscularis propria (internal  
sphincter)
- 30 Localized, NOS
- 40 Extension to:  
Rectal mucosa or submucosa  
Subcutaneous perianal tissue  
Perianal skin  
Skeletal muscles: Anal  
sphincter (external),  
levator ani  
Ischiorectal fat/tissue
- 60 Extension to:  
Perineum  
Vulva
- 70 Extension to:  
Bladder  
Urethra  
Vagina
- 75 Extension to:  
Prostate  
Cervix Uteri  
Corpus Uteri  
Broad ligament(s)
- 80 FURTHER extension
- 85 Metastasis
- 99 UNKNOWN if extension or metastasis

ANAL CANAL, ANUS NOS, OTHER PARTS OF RECTUM  
154.2-154.3, 154.8

LYMPH NODES

0 No lymph node involvement  
-----

REGIONAL Lymph Nodes

1 Anorectal; perirectal

2 Internal iliac (hypogastric) and  
lateral sacral, unilateral

3 Superficial inguinal (femoral),  
unilateral

4 (3) plus (1) or (2)

5 Bilateral internal iliac  
(hypogastric), lateral  
sacral, and/or superficial  
inguinal (femoral)

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

DISTANT Lymph Nodes

7 Other than above  
-----

8 Lymph Nodes, NOS

9 UNKNOWN; not stated

**LIVER, INTRAHEPATIC BILE DUCTS**  
155.0-155.1

**SIZE OF PRIMARY TUMOR**

(from pathology report; operative report; radiographic report--in priority order)

000 No mass; no tumor found  
001 Microscopic focus or foci only

	<u>mm</u>	<u>cm</u>
002	≤2	≤0.2
003	3	0.3
...		
...		
009	9	0.9
010	10	1.0
...		
...		
099	99	9.9
100	100	10.0
...		
...		
990	990+	99.0+
999	Not stated	

**EXTENSION**

- 00 IN SITU: Noninvasive
- 10 Single lesion (one lobe)  
WITHOUT intrahepatic vascular invasion, incl. NOS
- 20 Single lesion (one lobe)  
WITH intrahepatic vascular invasion, incl. NOS
- 30 Multiple tumors (one lobe)  
WITHOUT intrahepatic vascular invasion, incl. NOS
- 40 Multiple tumors (one lobe)  
WITH intrahepatic vascular invasion
- 50 Confined to liver, NOS  
Localized, NOS
- 60 More than one lobe  
involved by contiguous growth (single lesion)  
Extrahepatic blood vessel(s):  
hepatic artery, vena cava,  
portal vein
- 65 Multiple (satellite) nodules in  
more than one lobe of liver or  
on surface of parenchyma  
Satellite nodules, NOS
- 70 Extension to:  
Extrahepatic bile duct(s)  
Diaphragm  
Pleura
- 75 Extension to:  
Parietal peritoneum  
Gallbladder  
Ligament(s): Falciform,  
coronary, hepatogastric,  
hepatoduodenal, triangular  
Lesser omentum
- 80 FURTHER extension
- 85 Metastasis
- 99 UNKNOWN if extension or metastasis

LIVER, INTRAHEPATIC BILE DUCTS  
155.0-155.1

LYMPH NODES

0 No lymph node involvement  
-----

REGIONAL Lymph Nodes

1 Hepatic: Hepatic pedicle, inferior  
vena cava, hepatic artery, porta  
hepatis (hilar)

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

DISTANT Lymph Nodes

6 Cardiac  
Diaphragmatic: Pericardial  
Posterior mediastinal, incl.  
juxtaphrenic nodes  
Aortic (para-, peri-, lateral)  
Retroperitoneal, NOS

7 Other than above  
-----

8 Lymph Nodes, NOS

9 UNKNOWN; not stated

GALLBLADDER  
 OTHER AND BILIARY TRACT, NOS  
 156.0, 156.8-156.9

SIZE OF PRIMARY TUMOR

(from pathology report; operative report; radiographic report--in priority order)

000 No mass; no tumor found  
 001 Microscopic focus or foci only

	<u>mm</u>	<u>cm</u>
002	≤2	≤0.2
003	3	0.3
...		
...		
009	9	0.9
010	10	1.0
...		
...		
099	99	9.9
100	100	10.0
...		
...		
990	990+	99.0+
999	Not stated	

EXTENSION

- 00 IN SITU: Noninvasive; intraepithelial
- 10 Invasive tumor confined to:  
Mucosa, NOS  
Lamina propria  
Submucosa (superficial invasion)
- 20 Muscularis propria
- 30 Localized, NOS
- 40 Invasion of perimuscular connective tissue
- 50 Invasion of/thru serosa
- 55 (40) + (50)
- 60 Extension into liver, NOS
- 61 Extension into liver ≤2 cm
- 62 Extension to one of the following:  
Extrahepatic bile duct(s), incl. ampulla of Vater  
Pancreas  
Omentum  
Duodenum; small intestine, NOS
- 65 Extension to one of the following:  
Large intestine  
Stomach
- 70 Extension into liver >2 cm  
Extension to two or more adjacent organs listed above in '62' and/or '65', OR liver involvement with any organ above in '62' and/or '65'
- 80 FURTHER extension
- 85 Metastasis
- 99 UNKNOWN if extension or metastasis

GALLBLADDER  
OTHER AND BILIARY TRACT, NOS  
156.0, 156.8-156.9

LYMPH NODES

0 No lymph node involvement  
-----

REGIONAL Lymph Nodes

1 Cystic duct (node of the neck of  
the gallbladder)  
Pericholedochal (node around common  
bile duct)  
Hilar (in hilus of liver--in  
hepatoduodenal ligament)  
Node of the foramen of Winslow

2 Hepatic: Periportal,  
periduodenal, peripancreatic  
(near head of pancreas only)

3 Regional lymph node(s), NOS

5 Celiac

6 Mesenteric, superior  
-----

DISTANT Lymph Nodes

7 Other than above  
-----

8 Lymph Nodes, NOS

9 UNKNOWN; not stated

**EXTRAHEPATIC BILE DUCT(S)**  
156.1

**SIZE OF PRIMARY TUMOR**

(from pathology report; operative report; radiographic report--in priority order)

000 No mass; no tumor found  
001 Microscopic focus or foci only

	<u>mm</u>	<u>cm</u>
002	≤2	≤0.2
003	3	0.3
...		
...		
009	9	0.9
010	10	1.0
...		
...		
099	99	9.9
100	100	10.0
...		
...		
990	990+	99.0+
999	Not stated	

**EXTENSION**

- 00 IN SITU: Noninvasive
- 10 Invasive tumor of bile duct(s) (cystic, hepatic, and common) confined to:
  - Mucosa, NOS
  - Lamina propria
  - Submucosa
- 20 Invasion of muscle wall (muscularis propria)
- 30 Localized, NOS
- 40 Invasion of periductal/perimuscular connective tissue
- 60 Extension to:
  - Duodenum
  - Gallbladder
  - Pancreas
  - Liver, porta hepatis
- 65 Extension to:
  - Blood vessels: Portal vein, hepatic artery
  - Stomach
  - Colon
  - Omentum
- 80 FURTHER extension
- 85 Metastasis
- 99 UNKNOWN if extension or metastasis

**Note:** Codes 156.8-156.9, biliary tract, NOS, are included with gallbladder, 156.0

EXTRAHEPATIC BILE DUCT(S)  
156.1

LYMPH NODES

0 No lymph node involvement  
-----

REGIONAL Lymph Nodes

1 Cystic duct (node of the neck of  
the gallbladder)  
Pericholedochal (node around  
common bile duct)  
Node of the foramen of Winslow  
Hilar (in the hepatoduodenal  
ligament)

2 Hepatic: Periportal,  
periduodenal,  
peripancreatic (near head of  
pancreas only)

3 Regional lymph node(s), NOS

5 Celiac

6 Mesenteric, superior  
-----

DISTANT Lymph Nodes

7 Other than above  
-----

8 Lymph Nodes, NOS

9 UNKNOWN; not stated

**AMPULLA OF VATER**

156.2

**SIZE OF PRIMARY TUMOR**

(from pathology report; operative report; endoscopic examination; radiographic report--in priority order)

000 No mass; no tumor found  
 001 Microscopic focus or foci only

	<u>mm</u>	<u>cm</u>
002	≤2	≤0.2
003	3	0.3
...		
...		
009	9	0.9
010	10	1.0
...		
...		
099	99	9.9
100	100	10.0
...		
...		
990	990+	99.0+
999	Not stated	

**EXTENSION**

- 00 IN SITU: Noninvasive; intraepithelial
- 10 Invasive tumor confined to ampulla of Vater
- 30 Localized, NOS
- 40 Extension to duodenum; extrahepatic bile ducts
- 50 Tumor invasion into pancreas, incl. pancreatic duct, ≤2 cm
- 60 Tumor invasion into pancreas >2 cm
- 70 Extension to other adjacent organs
- 80 FURTHER extension
- 85 Metastasis
- 99 UNKNOWN if extension or metastasis

LYMPH NODES

0 No lymph node involvement  
-----

1 REGIONAL Lymph Nodes

- Peripancreatic
- Hepatic
- Infrapyloric
- Subpyloric
- Celiac
- Pancreaticoduodenal
- Superior mesenteric
- Retroperitoneal
- Lateral aortic

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

DISTANT Lymph Nodes

7 Other than above  
-----

8 Lymph Nodes, NOS

9 UNKNOWN; not stated

**PANCREAS, Head, body, and tail**  
157.0-157.4

**SIZE OF PRIMARY TUMOR**

(from pathology report; operative report; radiographic report--in priority order)

000 No mass; no tumor found  
001 Microscopic focus or foci only

	<u>mm</u>	<u>cm</u>
002	≤2	≤0.2
003	3	0.3
...		
...		
009	9	0.9
010	10	1.0
...		
...		
099	99	9.9
100	100	10.0
...		
...		
990	990+	99.0+
999	Not stated	

**EXTENSION**

- 00 IN SITU: Noninvasive
- 10 Confined to head, body, or tail or any combination
- 30 Localized, NOS, incl. pancreas, NOS
- 40 Extension to peripancreatic tissue NOS  
Fixation to adj. structures/NOS
- 45 Extrahepatic bile ducts (Includes external right and left hepatic ducts, common hepatic duct, and common bile duct)  
Ampulla of Vater  
Duodenum
- 60 **Head of pancreas:** Stomach  
**Body and/or tail of pancreas:** Left kidney; kidney, NOS  
Left ureter  
Spleen  
Left adrenal (suprarenal) gland  
Retroperitoneal soft tissue (retroperitoneal space)
- 65 **Head of pancreas:** Major blood vessel(s): Hepatic, pancreaticoduodenal and/or gastroduodenal arteries, superior mesenteric artery/vein, portal vein  
Transverse colon, incl. hepatic flexure  
Peritoneum, mesentery, mesocolon  
mesenteric fat  
Greater/lesser omentum  
  
**Body and/or tail of pancreas:** Splenic flexure  
Small intestine  
Peritoneum, mesentery, mesocolon, mesenteric fat  
Major blood vessel(s): Aorta, celiac artery, hepatic artery, splenic artery/vein, superior mesenteric artery/vein, portal vein

PANCREAS, Head, body, and tail  
157.0-157.4

**EXTENSION (cont'd)**

- 66 Stomach from body and tail
- 67 Liver (incl. porta hepatis)  
Gallbladder
- 70 Extension from head of  
pancreas to:
  - Kidney
  - Ureter
  - Adrenal gland
  - Retroperitoneum
  - Jejunum
  - Ileum
- Extension from body and/or tail  
of pancreas to:
  - Right kidney/right ureter
  - Right adrenal gland
  - Diaphragm
  - Large intestine (other  
than splenic flexure)
- 80 FURTHER extension
- 85 Metastasis
- 99 UNKNOWN if extension  
or metastasis

**LYMPH NODES**

- 0 No lymph node involvement  
-----
- 1 REGIONAL Lymph Nodes
  - Peripancreatic
  - Hepatic
  - Infrapyloric (head only)
  - Subpyloric (head only)
  - Celiac (head only)
  - Superior mesenteric
  - Pancreaticocolial (body and tail  
only)
  - Splenic (body and tail only)
  - Retroperitoneal
  - Lateral aortic
  - Regional lymph node(s), NOS
  -
- DISTANT Lymph Nodes
- 7 Other than above  
-----
- 8 Lymph Nodes, NOS
- 9 UNKNOWN; not stated

**PANCREAS, Unspecified**  
157.8-157.9

**SIZE OF PRIMARY TUMOR**

(from pathology report; operative report; radiographic report--in priority order)

000 No mass; no tumor found  
001 Microscopic focus or foci only

	<u>mm</u>	<u>cm</u>
002	≤2	≤0.2
003	3	0.3
...		
...		
009	9	0.9
010	10	1.0
...		
...		
099	99	9.9
100	100	10.0
...		
...		
990	990+	99.0+
999	Not stated	

**EXTENSION**

00 IN SITU: Noninvasive

10 Invasive tumor confined to pancreas

30 Localized, NOS

40 Extension to adjacent (connective) tissue

60 Extension to adjacent organs/structures

80 FURTHER extension

85 Metastasis

99 UNKNOWN if extension or metastasis

PANCREAS, Unspecified  
157.8-157.9

LYMPH NODES

- 0 No lymph node involvement  
-----
- 1 REGIONAL Lymph Nodes
  - Peripancreatic
  - Hepatic
  
  - Superior mesenteric
  - Retroperitoneal
  - Lateral aortic
  
  - Regional lymph node(s), NOS
- 
- DISTANT Lymph Nodes
- 7 Other than above  
-----
- 8 Lymph Nodes, NOS
- 9 UNKNOWN; not stated

**RETROPERITONEUM AND PERITONEAL SITES**  
 158.0, 158.8-158.9

**SIZE OF PRIMARY TUMOR**

(from pathology report; operative report; radiographic report--in priority order)

000 No mass; no tumor found  
 001 Microscopic focus or foci only

	<u>mm</u>	<u>cm</u>
002	≤2	≤0.2
003	3	0.3
...		
009	9	0.9
010	10	1.0
...		
...		
099	99	9.9
100	100	10.0
...		
...		
990	990+	99.0+
999	Not stated	

**EXTENSION**

- 10 Tumor confined to tissue of origin
- 30 Localized, NOS
- 40 Extension to adjacent connective tissue
- 60 Extension to adjacent organs/structures
- 80 FURTHER extension
- 85 Metastasis
- 99 UNKNOWN if extension or metastasis

RETROPERITONEUM AND PERITONEAL SITES  
158.0, 158.8-158.9

LYMPH NODES

- 0 No lymph node involvement  
-----
- 1 REGIONAL Lymph Nodes
  - Subdiaphragmatic
  - Intra-abdominal
  - Paracaval
  - Pelvic
  - Regional lymph node(s), NOS-----
- DISTANT Lymph Nodes
- 7 Other than above  
-----
- 8 Lymph Nodes, NOS
- 9 UNKNOWN; not stated

**ILL-DEFINED DIGESTIVE AND PERITONEAL SITES**  
 159.0, 159.8-159.9

**SIZE OF PRIMARY TUMOR**

(from pathology report; operative report; radiographic report--in priority order)

000 No mass; no tumor found  
 001 Microscopic focus or foci only

	<u>mm</u>	<u>cm</u>
002	≤2	≤0.2
003	3	0.3
...		
...		
009	9	0.9
010	10	1.0
...		
...		
099	99	9.9
100	100	10.0
...		
...		
990	990+	99.0+
999	Not stated	

**EXTENSION**

- 00 IN SITU: Noninvasive
- 10 Invasion of submucosa
- 30 Localized, NOS
- 40 Extension to adjacent connective tissue
- 60 Extension to adjacent organs/structures
- 80 FURTHER extension
- 85 Metastasis
- 99 UNKNOWN if extension or metastasis

ILL-DEFINED DIGESTIVE AND PERITONEAL SITES  
159.0, 159.8-159.9

LYMPH NODES

- 0 No lymph node involvement  
-----
- 1 REGIONAL Lymph Nodes
  - Subdiaphragmatic
  - Intra-abdominal
  - Paracaval
  - Pelvic
  - Regional lymph node(s), NOS-----
- DISTANT Lymph Nodes
- 7 Other than above  
-----
- 8 Lymph Nodes, NOS
- 9 UNKNOWN; not stated

**NASAL CAVITY, MIDDLE EAR**  
 160.0, 160.1

**SIZE OF PRIMARY TUMOR**

(from pathology report; operative report; radiographic report--in priority order)

000 No mass; no tumor found  
 001 Microscopic focus or foci only

	<u>mm</u>	<u>cm</u>
002	≤2	≤0.2
003	3	0.3
...		
...		
009	9	0.9
010	10	1.0
...		
...		
099	99	9.9
100	100	10.0
...		
...		
990	990+	99.0+
999	Not stated	

**EXTENSION**

- 00 IN SITU: Noninvasive
- 10 Invasive tumor confined to site of origin
- 30 Localized, NOS
- 40 Extension to adjacent connective tissue
- 60 Extension to adjacent organs/structures
- 80 FURTHER extension
- 85 Metastasis
- 99 UNKNOWN if extension or metastasis

NASAL CAVITY, MIDDLE EAR  
160.0, 160.1

LYMPH NODES

- 0 No lymph node involvement  
-----
- 1 REGIONAL Lymph Nodes  
-----
- 7 DISTANT Lymph Nodes  
-----
- 8 Lymph Nodes, NOS
- 9 UNKNOWN; not stated

MAXILLARY SINUS  
160.2

SIZE OF PRIMARY TUMOR

(from pathology report; operative report; physical examination--in priority order)

000 No mass; no tumor found  
001 Microscopic focus or foci only

	<u>mm</u>	<u>cm</u>
002	≤2	≤0.2
003	3	0.3
...		
...		
009	9	0.9
010	10	1.0
...		
...		
099	99	9.9
100	100	10.0
...		
...		
990	990+	99.0+
999	Not stated	

EXTENSION

- 00 IN SITU: Noninvasive; intraepithelial
- 10 Invasive tumor confined to mucosa of maxillary antrum (sinus)
- 30 Localized, NOS
- 40 Invasion of infrastructure:
  - Palatine bone
  - Palate, hard
  - Middle nasal meatus
  - Nasal cavity (lateral wall, floor, septum, turbinates)
- 60 Invasion of suprastructure:
  - Skin of cheek
  - Floor or posterior wall of maxillary sinus
  - Floor or medial wall of orbit
  - Ethmoid sinus, anterior
- 70 Extension to:
  - Nasopharynx
  - Ethmoid sinus, posterior
  - Sphenoid sinus
  - Palate, soft
  - Base of skull
  - Cribiform plate
  - Pterygomaxillary or temporal fossa
  - Orbital contents, including eye
- 80 FURTHER extension
- 85 Metastasis
- 99 UNKNOWN if extension or metastasis

LYMPH NODES

0 No lymph node involvement  
-----

REGIONAL Lymph Nodes

Submental  
Submandibular (submaxillary)  
Internal jugular (upper and  
lower deep cervical):  
    jugulodigastric  
    jugulo-omohyoid  
Retropharyngeal  
Cervical, NOS  
Regional lymph node(s), NOS

1 One positive ipsilateral node  
    ≤3 cm in greatest diameter

2 One positive ipsilateral node  
    >3-6 cm in greatest diameter

3 Multiple positive ipsilateral  
    nodes ≤6 cm

4 Ipsilateral, node size not stated

5 Bilateral and/or contralateral  
    positive nodes ≤6 cm or size  
    not stated

6 Any positive node(s),  
    at least one >6 cm  
-----

DISTANT Lymph Nodes

7 Other than above  
-----

8 Lymph Nodes, NOS

9 UNKNOWN; not stated

**ACCESSORY (Paranasal) SINUSES**  
(excl. Maxillary Sinuses)  
160.3-160.5, 160.8-160.9

**SIZE OF PRIMARY TUMOR**

(from pathology report; operative report; physical examination--in priority order)

000 No mass; no tumor found  
001 Microscopic focus or foci only

	<u>mm</u>	<u>cm</u>
002	≤2	≤0.2
003	3	0.3
...		
...		
009	9	0.9
010	10	1.0
...		
...		
099	99	9.9
100	100	10.0
...		
...		
990	990+	99.0+
999	Not stated	

**EXTENSION**

- 00 IN SITU: Noninvasive; intraepithelial
- 10 Invasive tumor confined to mucosa in one of the following:  
Ethmoid air cells (sinus), unilateral  
Frontal sinus  
Sphenoid sinus
- 30 Localized, NOS
- 40 More than one accessory sinus  
Destruction of bony wall of sinus
- 50 Palate  
Nasal cavity (floor, septum, turbinates)
- 60 Bone: Orbital structures, facial bones, pterygoid fossa, zygoma, maxilla
- 70 Extension to:  
Nasopharynx  
Muscles: Masseter, pterygoid  
Soft tissue  
Skin  
Brain, incl. cranial nerves  
Orbital contents, including eye
- 80 FURTHER extension
- 85 Metastasis
- 99 UNKNOWN if extension or metastasis

ACCESSORY (Paranasal) SINUSES  
(excl. Maxillary Sinuses)  
160.3-160.5, 160.8-160.9

**LYMPH NODES**

0 No lymph node involvement

-----  
REGIONAL Lymph Nodes

Retropharyngeal

Internal jugular (upper deep  
cervical):

jugulodigastric

jugulo-omohyoid

Cervical, NOS

Regional lymph node(s), NOS

1 One positive ipsilateral node  
≤3 cm in greatest diameter

2 One positive ipsilateral node  
>3-6 cm in greatest diameter

3 Multiple positive ipsilateral  
nodes ≤6 cm

4 Ipsilateral, node size not stated

5 Bilateral and/or contralateral  
positive nodes ≤6 cm or size  
not stated

6 Any positive node(s),  
at least one >6 cm

-----  
DISTANT Lymph Nodes

7 Other than above

-----  
8 Lymph Nodes, NOS

9 UNKNOWN; not stated

LARYNX  
161.0-161.3, 161.8-161.9

**SIZE OF PRIMARY TUMOR**

(from pathology report; operative report; endoscopic examination; physical examination--in priority order)

- 000 No mass; no tumor found
- 001 Microscopic focus or foci only

	<u>mm</u>	<u>cm</u>
002	≤2	≤0.2
003	3	0.3
...		
...		
009	9	0.9
010	10	1.0
...		
...		
099	99	9.9
100	100	10.0
...		
...		
990	990+	99.0+
999	Not stated	

**EXTENSION**

- 00 IN SITU: Noninvasive
- 10 Invasive tumor confined to:  
  - Supraglottis (one subsite)-- laryngeal (posterior) surface of epiglottis, aryepiglottic fold, arytenoid, ventricular band (false cord)
  - Subglottis
- 11 One vocal cord (glottic tumors)
- 12 Both vocal cords (glottic tumors)
- 20 Tumor involves: More than one subsite of supraglottis
- 30 Tumor involves adjacent regions(s) of larynx
- 35 Impaired vocal cord mobility (glottic tumors)
- 40 Tumor limited to larynx WITH vocal cord fixation
- 50 Localized, NOS
- 60 Extension to pre-epiglottic tissue postcricoid area, pyriform sinus, hypopharynx, NOS, vallecula, base of tongue
- 70 Extension thru thyroid or cricoid cartilage and/or extends to oropharynx, cervical esophagus, soft tissues of neck, extrinsic (strap muscles), skin
- 80 FURTHER extension
- 85 Metastasis
- 99 UNKNOWN if extension or metastasis

**Note:** AJCC includes lingual (anterior) surface of epiglottis (146.4) with larynx.

LARYNX  
161.0-161.3, 161.8-161.9

LYMPH NODES (incl. contralateral or  
bilateral nodes)

Note: If laterality not specified,  
assume nodes are ipsilateral.

0 No lymph node involvement  
-----

REGIONAL Lymph Nodes

Internal jugular (upper and  
lower deep cervical) for glottic  
and supraglottic:  
jugulodigastric  
jugulo-omohyoid  
Anterior cervical: Prelaryngeal,  
pretracheal, paratracheal,  
laterotracheal (recurrent  
laryngeal)  
Cervical, NOS  
Regional lymph node(s), NOS

- 1 One positive ipsilateral node  
≤3 cm in greatest diameter
- 2 One positive ipsilateral node  
>3-6 cm in greatest diameter
- 3 Multiple positive ipsilateral  
nodes ≤6 cm
- 4 Ipsilateral, node size not stated
- 5 Bilateral and/or contralateral  
positive nodes ≤6 cm or size  
not stated
- 6 Any positive node(s),  
at least one >6 cm

-----  
DISTANT Lymph Nodes

- 7 Other than above  
-----
- 8 Lymph Nodes, NOS
- 9 UNKNOWN; not stated

TRACHEA  
162.0

**SIZE OF PRIMARY TUMOR**

(from pathology report; operative report; endoscopic examination; radiographic report--in priority order)

000 No mass; no tumor found  
001 Microscopic focus or foci only

	<u>mm</u>	<u>cm</u>
002	≤2	≤0.2
003	3	0.3
...		
...		
009	9	0.9
010	10	1.0
...		
...		
099	99	9.9
100	100	10.0
...		
...		
990	990+	99.0+
999	Not stated	

**EXTENSION**

00 IN SITU: Noninvasive  
10 Invasive tumor confined to trachea  
30 Localized, NOS  
40 Extension to adjacent connective tissue  
60 Extension to adjacent organs/structures  
80 FURTHER extension  
85 Metastasis  
99 UNKNOWN if extension or metastasis

**LYMPH NODES**

- 0 No lymph node involvement  
- - - - -
- 1 REGIONAL Lymph Nodes  
- - - - -
- 7 DISTANT Lymph Nodes  
- - - - -
- 8 Lymph Nodes, NOS
- 9 UNKNOWN; not stated

**LUNG, MAIN STEM BRONCHUS**  
 162.2-162.5, 162.8-162.9

**SIZE OF PRIMARY TUMOR**

(from pathology report; operative report; radiographic report; endoscopic examination--in priority order)

000	No primary tumor found	
001	Microscopic focus or foci only	
002	Malignant cells present in bronchopulmonary secretions	
	<u>mm</u>	<u>cm</u>
003	≤3	≤0.3
...		
...		
009	9	0.9
010	10	1.0
...		
...		
099	99	9.9
100	100	10.0
...		
...		
990	990+	99.0+
998	Diffuse (entire lobe or lung)	
999	Not stated	

**Note 1:** Assume tumor ≥2 cm from carina if lobectomy is done.

**Note 2:** If no mention is made of the opposite lung on a chest x-ray, assume it is not involved.

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

**Note 4:** Ignore pleural effusion which is negative for tumor.

**Note 5:** If at mediastinoscopy/x-ray the description is mediastinal mass, assume the mass is involved mediastinal nodes.

**Note 6:** 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.

**EXTENSION**

00	IN SITU: Noninvasive; intraepithelial
10	Tumor confined to one lung (excl. primary in MSB)
20	Tumor involving main stem bronchus ≥2 cm from carina (primary in lung or MSB)
30	Localized, NOS
40	Extension to: Visceral pleura, pleura, NOS Pulmonary ligament Atelectasis/obstructive pneumonitis involving entire lung (or NOS) WITHOUT pleural effusion
50	Tumor of/involving main stem bronchus <2.0 cm from carina
60	Extension to: Chest (thoracic) wall Parietal pericardium or NOS Parietal (mediastinal) pleura Brachial plexus from superior sulcus or Pancoast tumor (superior sulcus syndrome) Diaphragm Atelectasis/obstructive pneumonitis involving entire lung

**EXTENSION (cont'd)**

- 70 Extension to:  
Carina; trachea; esophagus  
Mediastinum, extrapulmonary  
or NOS  
Major blood vessel(s):  
Pulmonary artery or vein;  
superior vena cava (SVC  
syndrome); aorta  
Nerve(s):  
Recurrent laryngeal  
(vocal cord paralysis);  
vagus; phrenic; cervical  
sympathetic (Horner's  
syndrome)
- 71 Extension to:  
Heart; visceral pericardium  
Vertebral body
- 72 Malignant pleural effusion;  
Pleural effusion, NOS
- 73 Extension to adjacent rib
- 75 Extension to:  
Sternum  
Skeletal muscle  
Skin of chest
- 78 Extension to:  
Contralateral lung/MSB  
~~Abdominal organs~~
- 80 FURTHER extension
- 85 Metastasis
- 99 UNKNOWN if extension  
or metastasis

**LYMPH NODES**

- 0 No lymph node involvement  
- - - - -
- REGIONAL Lymph Nodes (Ipsilateral)
- 1 Intrapulmonary  
Hilar (pulmonary root)  
Peribronchial
- 2 Subcarinal; carinal  
Mediastinal, anterior,  
posterior, NOS  
Paratracheal; pretracheal  
Paraesophageal  
Aortic (para-, peri-) (above  
diaphragm)
- 5 Regional lymph node(s), NOS  
- - - - -
- DISTANT Lymph Nodes
- 6 Contralateral hilar or mediastinal  
(incl. bilateral)  
Supraclavicular (transverse  
cervical)  
Scalene  
Cervical, NOS
- 7 Other than above  
- - - - -
- 8 Lymph Nodes, NOS
- 9 UNKNOWN; not stated

**PLEURA**

163.0-163.1, 163.8-163.9

**SIZE OF PRIMARY TUMOR**

(from pathology report; operative report; endoscopic examination; radiographic report--in priority order)

000 No mass; no tumor found  
001 Microscopic focus or foci only

	<u>mm</u>	<u>cm</u>
002	≤2	≤0.2
003	3	0.3
...		
...		
009	9	0.9
010	10	1.0
...		
...		
099	99	9.9
100	100	10.0
...		
...		
990	990+	99.0+
999	Not stated	

**EXTENSION**

- 10 Invasive tumor confined to pleura
- 20 Mesothelioma WITH nodule(s) beneath visceral pleural surface
- 30 Localized, NOS
- 40 Extension to adjacent (connective) tissue
- 50 Mesothelioma nodule(s) which have broken through the visceral pleural surface to the lung surface; lung involvement, NOS
- 60 Extension to adjacent organs/structures such as:
  - Chest wall
  - Rib
  - Heart muscle
  - Diaphragm
- 70 Mesothelioma WITH malignant pleural fluid
- 80 FURTHER extension
- 85 Metastasis
- 99 UNKNOWN if extension or metastasis

PLEURA  
163.0-163.1, 163.8-163.9

LYMPH NODES

- 0 No lymph node involvement  
- - - - -
- 1 REGIONAL Lymph Nodes  
- - - - -
- 7 DISTANT Lymph Nodes  
- - - - -
- 8 Lymph Nodes, NOS
- 9 UNKNOWN; not stated

**HEART, MEDIASTINUM**  
 164.1-164.3, 164.8-164.9

**SIZE OF PRIMARY TUMOR**

(from pathology report; operative report; radiographic report--in priority order)

000 No mass; no tumor found  
 001 Microscopic focus or foci only

	<u>mm</u>	<u>cm</u>
002	≤2	≤0.2
003	3	0.3
...		
...		
009	9	0.9
010	10	1.0
...		
...		
099	99	9.9
100	100	10.0
...		
...		
990	990+	99.0+
999	Not stated	

**EXTENSION**

10 Invasive tumor confined to site of origin  
 30 Localized, NOS  
 40 Extension to adjacent connective tissue  
 60 Extension to adjacent organs/structures  
 80 FURTHER extension  
 85 Metastasis  
 99 UNKNOWN if extension or metastasis

**Note:** Code 164.0, thymus, is included with other endocrine glands, 194.\_.

HEART, MEDIASTINUM  
164.1-164.3, 164.8-164.9

**LYMPH NODES**

- 0 No lymph node involvement  
- - - - -
- 1 REGIONAL Lymph Nodes  
- - - - -
- 7 DISTANT Lymph Nodes  
- - - - -
- 8 Lymph Nodes, NOS
- 9 UNKNOWN; not stated

**ILL-DEFINED RESPIRATORY AND INTRATHORACIC ORGANS**  
**165.0, 165.8-165.9**

**SIZE OF PRIMARY TUMOR**

(from pathology report; operative report; radiographic report--in priority order)

**EXTENSION**

000	No mass; no tumor found		10	Invasive tumor confined to site of origin
001	Microscopic focus or foci only		30	Localized, NOS
	<u>mm</u>	<u>cm</u>	40	Extension to adjacent connective tissue
002	≤2	≤0.2	60	Extension to adjacent organs/structures
003	3	0.3		
...			80	FURTHER extension
009	9	0.9	85	Metastasis
010	10	1.0		
...			99	UNKNOWN if extension or metastasis
099	99	9.9		
100	100	10.0		
...				
990	990+	99.0+		
999	Not stated			

**ILL-DEFINED RESPIRATORY AND INTRATHORACIC ORGANS**  
165.0, 165.8-165.9

**LYMPH NODES**

- 0 No lymph node involvement  
- - - - -
- 1 REGIONAL Lymph Nodes  
- - - - -
- 7 DISTANT Lymph Nodes  
- - - - -
- 8 Lymph Nodes, NOS
- 9 UNKNOWN; not stated

**BONE**  
170.0-170.9

**SIZE OF PRIMARY TUMOR**

(from pathology report; operative report; radiographic report; physical examination--in priority order)

000 No mass; no tumor found  
001 Microscopic focus or foci only

	<u>mm</u>	<u>cm</u>
002	≤2	≤0.2
003	3	0.3
...		
...		
009	9	0.9
010	10	1.0
...		
...		
099	99	9.9
100	100	10.0
...		
...		
990	990+	99.0+
999	Not stated	

**EXTENSION**

- 10 Invasive tumor confined to cortex of bone
- 20 Extension beyond cortex to periosteum (no break in periosteum)
- 30 Localized, NOS
- 40 Extension beyond periosteum to surrounding tissues, incl. adjacent muscle(s)
- 60 Adjacent bone
- 70 Skin
- 80 FURTHER extension
- 85 Metastasis
- 99 UNKNOWN if extension or metastasis

LYMPH NODES

- 0 No lymph node involvement  
-----
- 1 REGIONAL Lymph Nodes  
-----
- 7 DISTANT Lymph Nodes  
-----
- 8 Lymph Nodes, NOS
- 9 UNKNOWN; not stated

**CONNECTIVE AND OTHER SOFT TISSUE**  
 171.0, 171.2-171.9

**SIZE OF PRIMARY TUMOR**

(from pathology report; operative report; radiographic report; physical examination--in priority order)

000 No mass; no tumor found  
 001 Microscopic focus or foci only

	<u>mm</u>	<u>cm</u>
002	≤2	≤0.2
003	3	0.3
...		
...		
009	9	0.9
010	10	1.0
...		
...		
099	99	9.9
100	100	10.0
...		
...		
990	990+	99.0+

999 Not stated

**EXTENSION**

- 10 Invasive tumor confined to tissue of origin
- 30 Localized, NOS
- 40 Extension to adjacent connective tissue
- 60 Extension to adjacent organs/structures
- 80 FURTHER extension
- 85 Metastasis
- 99 UNKNOWN if extension or metastasis

CONNECTIVE AND OTHER SOFT TISSUE  
171.0, 171.2-171.9

LYMPH NODES

- 0 No lymph node involvement  
- - - - -  
1 REGIONAL by primary site (bilateral or contralateral for head, neck, trunk)

Head and Neck - cervical:

All subsites

Lip: Preauricular, facial, submental, submandibular

Eyelid/canthus:

Preauricular, facial, submandibular, infra-auricular

External ear/auditory canal:

Pre-/post-auricular (mastoid)

Face, Other (cheek, chin, forehead, jaw, nose and temple): Preauricular, facial, submental, submandibular

Scalp/neck:

Preauricular, occipital, spinal accessory (posterior cervical); mastoid (post-auricular) for scalp; submental, supraclavicular, axillary for neck

LYMPH NODES (cont'd)

Upper trunk

Cervical, supraclavicular, Internal mammary, axillary

Lower trunk

Femoral (superficial inguinal)

Arm/shoulder

Axillary  
Spinal accessory for shoulder  
Epitrochlear for hand/forearm

Leg/hip

Femoral (superficial inguinal)  
Popliteal for heel and calf

All Sites

Regional lymph node(s), NOS

- - - - -  
DISTANT Lymph Nodes

7 Other than above

- - - - -  
8 Lymph Nodes, NOS

9 UNKNOWN; not stated



SKIN, (excl. Malignant Melanoma, Kaposi's Sarcoma,  
 Mycosis Fungoides, Sezary's Disease, and Other Lymphomas)  
 173.0-173.9

**LYMPH NODES**

- 0 No lymph node involvement  
 - - - - -
- 1 REGIONAL by primary site (bilat-  
 eral or contralateral for  
 head, neck, trunk)

Head and Neck - cervical:  
 All subsites

- Lip: Preauricular, facial,  
 submental, submandibular
- Eyelid/canthus:  
 Preauricular, facial, sub-  
 mandibular, infra-auricular
- External ear/auditory canal:  
 Pre-/post-auricular  
 (mastoid)
- Face, Other (cheek, chin,  
 forehead, jaw, nose and  
 temple): Preauricular, fa-  
 cial, submental, subman-  
 dibular
- Scalp/neck:  
 Preauricular, occipital,  
 spinal accessory (posterior  
 cervical); mastoid (post-  
 auricular) for scalp; sub-  
 mental, supraclavicular,  
 axillary for neck

**LYMPH NODES** (cont'd)

- Upper trunk  
 Cervical, supraclavicular,  
 internal mammary, axillary
- Lower trunk  
 Femoral (superficial inguinal)
- Arm/shoulder  
 Axillary  
 Spinal accessory for shoulder  
 Epitrochlear for hand/forearm
- Leg/hip  
 Femoral (superficial inguinal)  
 Popliteal for heel and calf
- All sites  
 Regional lymph node(s), NOS  
 - - - - -  
 DISTANT Lymph Nodes
- 7 Other than above  
 - - - - -
- 8 Lymph Nodes, NOS
- 9 UNKNOWN; not stated

**MALIGNANT MELANOMA OF SKIN, VULVA, PENIS, SCROTUM**  
 173.0-173.9, 184.1-184.4, 187.1-187.2, 187.4, 187.7  
 (M-8720-8790)

**MEASURED THICKNESS\* OF TUMOR**  
 (Breslow)

Record Actual Measurement (in mm)  
 from Pathology Department

000 No mass; no tumor found

mm

001 0.01

002 0.02

...

...

074 0.74

075 0.75

076 0.76

...

...

103 1.03

104 1.04

105 1.05

...

...

990 9.90 +

999 Not stated

**EXTENSION**

00 IN SITU: Noninvasive;  
 intraepithelial  
 (Clark's level 1)  
 Basement membrane of the  
 epidermis is intact.

10 Papillary dermis (Clark's level 2)

11 (10) WITH ulceration

20 Papillary-reticular dermal  
 interface (Clark's level 3)

21 (20) WITH ulceration

30 Reticular dermis (Clark's level 4)

31 (30) WITH ulceration

40 Skin/dermis, NOS  
 Localized, NOS

41 (40) WITH ulceration

50 Subcutaneous tissue (through  
 entire dermis) (Clark's level 5)

51 (50) WITH ulceration

60 Satellite nodule(s), NOS

62 Satellite nodule(s),  $\leq 2$  cm from  
 primary tumor

64 (50-51) plus (60) or (62)

70 Underlying cartilage, bone, muscle

80 FURTHER extension

85 ~~Metastasis, including visceral~~  
 metastasis

99 UNKNOWN if extension  
 or metastasis

\*Thickness, NOT size, is coded.

**Note 1:** Melanoma of sites other  
 than those above use site-specific  
 schemes.

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

MALIGNANT MELANOMA OF SKIN, VULVA, PENIS, SCROTUM  
 173.0-173.9, 184.1-184.4, 187.1-187.2, 187.4, 187.7  
 (M-8720-8790)

LYMPH NODES

0 No lymph node involvement  
 - - - - -  
 REGIONAL by primary site (bilateral or contralateral for head, neck, trunk)

Head and Neck - cervical:  
 All subsites

Lip: Preauricular, facial, submental, submandibular

Eyelid/canthus: Preauricular, facial, submandibular, infra-auricular

External ear/auditory canal:  
 Pre-/post-auricular (mastoid)

Face, Other (cheek, chin, forehead, jaw, nose, and temple): Preauricular, facial, submental, submandibular

Scalp/neck: Preauricular, occipital, spinal accessory (post. cervical); mastoid (postauricular) for scalp; submental, supraclavicular, axillary for neck

LYMPH NODES (cont'd)

Upper trunk  
 Cervical, supraclavicular, internal mammary, axillary

Lower trunk  
 Femoral (superficial inguinal)

Arm/shoulder  
 Axillary  
 Spinal accessory for shoulder  
 Epitrochlear for hand/forearm

Leg/hip  
 Femoral (superficial inguinal)  
 Popliteal for heel and calf

Vulva/penis/scrotum  
 Femoral (superficial inguinal)  
 Deep inguinal

All sites  
 Regional, NOS

1 Lymph node metastasis  $\leq$ 3 cm  
 2 Lymph node metastasis  $>$ 3 cm  
 3 In-transit metastasis (Satellite lesion(s)/subcutaneous nodule(s)  $>$ 2 cm from the primary tumor, but not beyond the site of primary lymph node drainage)  
 4 (2) plus (3)  
 5 Size not given  
 - - - - -

DISTANT Lymph Nodes

7 Other than above  
 - - - - -

8 Lymph Nodes, NOS

9 UNKNOWN; not stated

MYCOSIS FUNGOIDES AND SEZARY'S DISEASE OF SKIN  
 173.0-173.9  
 (M-9700-9701)

PERIPHERAL BLOOD INVOLVEMENT

000 No peripheral blood involvement

Atypical circulating cells in  
 peripheral blood:

001 <5%

002 >5%

003 % not stated

999 Not applicable

EXTENSION

Plaques, papules, or erythematous  
 patches ("plaque stage"):

10 <10% of skin surface\*, no  
 tumors

20 ≥10% of skin surface\*, no  
 tumors

25 % of body surface not stated

30 Skin involvement, NOS: extent  
 not stated; localized, NOS

50 One or more tumors (tumor stage)

70 Generalized erythroderma (>50%  
 of body involved with diffuse  
 redness); Sezary's syndrome

85 Visceral (non-cutaneous, extra-  
 nodal) involvement (other  
 than peripheral blood)

99 UNKNOWN if extension or metastasis

Note 1: Developed by the Mycosis  
 Fungoides Cooperative Group

\*The palmar surface of the hand,  
 including digits, is approxi-  
 mately 1% of the body surface.

MYCOSIS FUNGOIDES AND SEZARY'S DISEASE OF SKIN  
173.0-173.9  
(M-9700-9701)

LYMPH NODES

0 No lymph node involvement (No  
clinical adenopathy, pathology  
negative for Mycosis Fungoides)

-----  
REGIONAL lymph nodes

1 Clinically enlarged palpable  
regional lymph node(s)  
(adenopathy), pathologically  
negative regional lymph node(s)

2 No clinically enlarged palpable  
regional lymph nodes(s)  
(adenopathy); pathologically  
positive regional lymph node(s)

3 Both clinically enlarged palpable  
lymph node(s) (adenopathy) and  
pathologically positive regional  
lymph nodes

-----  
DISTANT Lymph Nodes

7 Other than above

-----

8 Lymph Nodes, NOS

9 UNKNOWN; not stated

**BREAST**

174.0-174.6, 174.8-174.9, 175.9

**SIZE OF PRIMARY TUMOR**

(from pathology report; operative report; physical examination; mammography examination--in priority order; if multiple masses, code largest diameter)

000	No mass; no tumor found; no Paget's disease	
001	Microscopic focus or foci only	
002	Mammography/xerography diagnosis only with no size given (tumor not clinically palpable)	
	<u>mm</u>	<u>cm</u>
003	≤3	≤0.3
...		
...		
009	9	0.9
010	10	1.0
...		
...		
090	99	9.9
100	100	10.0
...		
...		
990	990+	99.0+
997	Paget's Disease of nipple with no demonstrable tumor	
998	Diffuse; widespread: 3/4's or more of breast; inflammatory carcinoma	
999	Not stated	

**Note 1:** Changes such as dimpling of the skin, tethering, and nipple retraction are caused by tension on Cooper's ligament(s), not by actual skin involvement. They do not alter the classification.

**Note 2:** Consider adherence, attachment, fixation, induration, and thickening as clinical evidence of extension to skin or subcutaneous tissue; code '20'.

**Note 3:** Consider "fixation, NOS" as involvement of pectoralis muscle; code '30'.

**EXTENSION**

- 00 IN SITU: Noninfiltrating; intraductal WITHOUT infiltration; lobular neoplasia
- 05 Paget's disease (WITH no underlying tumor)
- 10 Confined to breast tissue and fat including nipple and/or areola
- 20 Invasion of subcutaneous tissue  
Skin infiltration of primary breast including skin of nipple and/or areola  
Local infiltration of dermal lymphatics adjacent to primary tumor involving skin by direct extension
- 30 Invasion of (or fixation to) pectoral fascia or muscle; deep fixation; attachment or fixation to pectoral muscle or underlying tissue
- 40 Invasion of (or fixation to) chest wall, ribs, intercostal or serratus anterior muscles
- 50 Extensive skin involvement: Skin edema, peau d'orange, "pigskin," en cuirasse, lenticular nodule(s), inflammation of skin, erythema, ulceration of skin of breast, satellite nodule(s) in skin of primary breast
- 60 (50) plus (40)
- 70 Inflammatory carcinoma, incl. diffuse (beyond that directly overlying the tumor) dermal lymphatic permeation or infiltration

**Note 4:**

If extension code is:	Behavior code must be:
00	2
05	2 or 3
10+	3

BREAST  
174.0-174.6, 174.8-174.9, 175.9

**EXTENSION (cont'd)**

- 80 FURTHER extension:  
Skin over sternum, upper abdomen, axilla or opposite breast
  
- 85 Metastasis:  
Bone, other than adjacent rib  
Lung  
Breast, contralateral--if metastatic  
Adrenal gland  
Ovary  
Satellite nodule(s) in skin other than primary breast
  
- 99 UNKNOWN if extension or metastasis

**LYMPH NODES**

- 0 No lymph node involvement  
-----  
REGIONAL Lymph Nodes (ipsilateral)  
  
Axillary Level I/low: Adjacent to tail of breast;  
Level II/mid: Central, interpectoral, (Rotter's node);  
Level III/high: Subclavicular, apical  
  
Nodule(s) in axillary fat  
  
Size of largest axillary node, ipsilateral (codes 1-4):
  - 1 Micrometastasis ( $\leq 0.2$  cm)
  - 2  $>0.2$ - $<2.0$  cm, no extension beyond capsule
  - 3  $<2.0$  cm WITH extension beyond capsule
  - 4  $\geq 2.0$  cm
  - 5 Fixed/matted ipsilateral axillary nodes
  - 6 Axillary/regional lymph nodes, NOS  
Lymph nodes, NOS
  - 7 Internal mammary node(s), ipsilateral  
-----  
DISTANT Lymph Nodes
  - 8 Cervical, NOS  
Contralateral/bilateral axillary and/or internal mammary  
Infraclavicular  
Supraclavicular (transverse cervical)  
Other than above  
-----  
9 UNKNOWN; not stated

**CERVIX UTERI**  
180.0-180.1, 180.8-180.9

**SIZE OF PRIMARY TUMOR**

(from pathology report; operative report; endoscopic examination; physical examination--in priority order)

000 No mass; no tumor found  
001 Microscopic focus or foci only

	<u>mm</u>	<u>cm</u>
002	≤2	≤0.2
003	3	0.3
...		
...		
009	9	0.9
010	10	1.0
...		
...		
099	99	9.9
100	100	10.0
...		
...		
990	990+	99.0+
999	Not stated	

**EXTENSION**

00 IN SITU: Preinvasive; noninvasive; intraepithelial Cancer in situ WITH endocervical gland involvement  
FIGO Stage 0

01 CIN Grade III

11 Minimal microscopic stromal invasion  
FIGO Stage IA1

12 FIGO Stage IA2, "microinvasion"  
Tumor with invasive component ≤5 mm in depth, taken from the base of the epithelium, and ≤7 mm in horizontal spread

20 Invasive cancer confined to cervix  
Tumor extension beyond that in code 12  
FIGO Stage IB

25 Extension to corpus uteri

30 Localized, NOS

40 Extension to:  
Upper 2/3's of vaginal wall (incl. fornices and vagina/vaginal wall, NOS)  
Cul de sac (rectouterine pouch)  
FIGO Stage IIA

50 Extension to:  
Parametrium (paracervical soft tissue)  
Ligaments: Broad, uterosacral, cardinal  
FIGO Stage IIB

60 Extension to:  
Lower 1/3 of vaginal wall  
Rectal and/or bladder wall or NO:  
Bullous edema of bladder mucosa  
Ureter, intra- and extramural  
FIGO Stage IIIA

**Note 1:** Involvement of anterior and/or posterior septum is coded as involvement of the vaginal wall.

**Note 2:** "Frozen pelvis" is a clinical term which means tumor extends to pelvic sidewall(s). In the absence of a statement of involvement, code to '65'.

**Note 3:** If the clinician says "adnexa palpated" but doesn't mention lymph nodes, assume lymph nodes are not involved.

**Note 4:** If either exploratory/definitive surgery is done with no mention of lymph nodes, assume nodes are negative.

CERVIX UTERI  
180.0-180.1, 180.8-180.9

**EXTENSION** (cont'd)

**LYMPH NODES**

65	Extension to: Pelvic wall(s) Hydronephrosis or nonfunctioning kidney (except if other cause) FIGO Stage IIIB	0 No lymph node involvement ----- 1 REGIONAL Lymph Nodes
		Paracervical Parametrial Iliac: Common Internal (hypogastric): Obturator External Pelvic, NOS Sacral (lateral, presacral, sacral promontory (Gerota's), uterosacral, or NOS)
70	Extension to: Rectal or bladder <u>mucosa</u> FIGO Stage IVA	
80	FURTHER extension beyond true pelvis FIGO Stage IVA	
85	Metastasis FIGO Stage IVB	Regional lymph node(s), NOS ----- DISTANT Lymph Nodes
99	UNKNOWN if extension or metastasis	6 Aortic (para-, peri-, lateral) 7 Other than above ----- 8 Lymph Nodes, NOS 9 UNKNOWN; not stated



CORPUS UTERI

**DISTINGUISHING "IN SITU" AND "LOCALIZED" TUMORS FOR THE CORPUS UTERI**

One of the problems that needs to be resolved is the ambiguity of the term "confined to endometrium" for corpus uteri.

- 1) Determine if the tumor is confined to the columnar epithelium, in which case it would be in situ,

OR

- 2) if the tumor has penetrated the basement membrane to invade the stroma (lamina propria), in which case it would be localized and coded to invasion of the stroma.

The EPITHELIAL LAYER contains no blood vessels or lymphatics.

The BASEMENT MEMBRANE, a sheet of extracellular material, functions as a filtration barrier and a boundary involved in generating and maintaining tissue structure.

The LAMINA PROPRIA, composed of areolar connective tissue, contains blood vessels, nerves, and, in some regions, glands. Once tumor has broken through the basement membrane into the lamina propria, it can spread by way of the lymphatics and blood vessels to other parts of the body.

There is NO MUSCULARIS MUCOSAE or SUBMUCOSA in the endometrium.

The MYOMETRIUM (muscularis) is composed of three layers of smooth muscle fibers; it constitutes the wall of the organ.

The SEROSA, the outermost layer covering the corpus uteri, is a serous membrane, part of the visceral peritoneum.

CORPUS UTERI

PRIMARY SITE	ENDOMETRIUM (mucosa)			MYOMETRIUM (3 layers)	Serosa
	Columnar Epithelium	B A S E : M E M : :	Stroma (lamina propria)		
Corpus Uteri (182._)	Yes		Yes	Yes	Yes

**CORPUS UTERI, PLACENTA AND UTERUS, NOS**  
 179.9, 181.9, 182.0-182.1, 182.8

**SIZE OF PRIMARY TUMOR**

(from pathology report; operative report; endoscopic examination; physical examination--in priority order)

000 No mass; no tumor found  
 001 Microscopic focus or foci only

	mm	cm
002	≤2	≤0.2
003	3	0.3
...		
...		
009	9	0.9
010	10	1.0
...		
...		
099	99	9.9
100	100	10.0
...		
...		
990	990+	99.0+
999	Not stated	

**Note 1:** Adnexa=tubes, ovaries and ligament(s)

**Note 2:** "Frozen pelvis" is a clinical term which means tumor extends to pelvic sidewall(s). In the absence of a statement of involvement code to '60'.

**Note 3:** If the clinician says "adnexa palpated" but doesn't mention lymph nodes, assume lymph nodes are not involved.

**Note 4:** If either exploratory/definitive surgery is done with no mention of lymph nodes, assume nodes are negative.

**EXTENSION**

- 00 IN SITU: Preinvasive, noninvasive  
FIGO Stage 0
- No sounding done; sounding, NOS**
- 10 FIGO Stage I not further specified
- 11 Confined to endometrium  
Extension to:
- 12 Myometrium--inner half
- 13 Myometrium--outer half
- 14 Myometrium--NOS
- 15 Serosa
- Sounding of uterine cavity is ≤8. cm from cervical os**
- 20 FIGO Stage IA not further specified
- 21 Confined to endometrium  
Extension to:
- 22 Myometrium--inner half
- 23 Myometrium--outer half
- 24 Myometrium--NOS
- 25 Serosa
- Sounding of uterine cavity is > 8. cm from cervical os**
- 30 FIGO Stage IB not further specified
- 31 Confined to endometrium  
Extension to:
- 32 Myometrium--inner half
- 33 Myometrium--outer half
- 34 Myometrium--NOS
- 35 Serosa
- 40 Localized, NOS
- 50 Cervix uteri, incl. endocervix  
FIGO Stage II
- 60 Extension to true pelvis:  
Parametrium  
Ligaments: Broad, round, uterosacral  
Pelvic wall(s)  
Ovary and/or fallopian tubes(s)  
Rectal and/or bladder wall  
or NOS  
Cul de sac (rectouterine pouch)  
Omentum  
Vagina  
FIGO Stage III

**CORPUS UTERI, PLACENTA AND UTERUS, NOS**  
 179.9, 181.9, 182.0-182.1, 182.8

**EXTENSION (cont'd)**

- 70 Rectal or bladder mucosa  
FIGO Stage IVA
- 80 Extension outside true pelvis  
FIGO Stage IVA\*
- 85 Metastasis  
FIGO Stage IVB
- 99 UNKNOWN if extension  
or metastasis

\*FIGO "Stage IVA, NOS" is coded  
to code '80'.

**LYMPH NODES**

- 0 No lymph node involvement  
- - - - -
- REGIONAL Lymph Nodes**
- 1 Parametrial  
Iliac: Common  
Internal (hypogastric):  
Obturator  
External  
Pelvic, NOS  
Sacral (lateral, presacral,  
sacral promontory (Gerota's),  
uterosacral, or NOS)
- 2 Aortic (para-, peri-, lateral)
- 5 Regional Lymph Nodes, NOS  
- - - - -
- DISTANT Lymph Nodes**
- 6 Superficial inguinal
- 7 Other than above (incl.  
deep inguinal)
- If both codes 6 and 7 apply, code  
to the higher number, 7.**  
- - - - -
- 8 Lymph Nodes, NOS
- 9 UNKNOWN; not stated

OVARY  
183.0

**SIZE OF PRIMARY TUMOR**

(from pathology report; operative report; endoscopic examination; physical examination--in priority order)

**SIZE**

000 No mass; no tumor found  
001 Microscopic focus or foci only

	<u>mm</u>	<u>cm</u>
002	≤2	≤0.2
003	3	0.3
...		
...		
009	9	0.9
010	10	1.0
...		
...		
099	99	9.9
100	100	10.0
...		
...		
990	990+	99.0+
999	Not stated	

**Note 1:** Code size of tumor, not size of the cyst.

**Note 2:** Ascites WITH malignant cells changes FIGO Stages I and II to IC and IIC, respectively. Ascites, NOS is considered negative.

**Note 3:** Peritoneal implants outside the pelvis (codes 70-72) must be microscopically confirmed.

**EXTENSION**

- 00 IN SITU: Preinvasive; noninvasive; intraepithelial
- 10 Tumor confined to one ovary, capsule intact, no tumor on ovarian surface  
FIGO Stage IA
- 20 Tumor limited to both ovaries, capsule(s) intact, no tumor on ovarian surface  
FIGO Stage IB
- 30 Localized, NOS; unknown if capsule ruptured or one or both ovaries involved
- 40 Tumor limited to ovary(ies), capsules ruptured or tumor on ovarian surface  
FIGO Stage IC
- 41 Tumor limited to ovary(ies) WITH malignant cells in ascites (peritoneal washings)  
FIGO Stage IC
- 42 (40) plus (41)
- 50 Extension to or implants on:  
Uterus  
Fallopian tube(s)  
Adnexa, NOS  
FIGO Stage IIA
- 60 Extension to or implants on:  
Pelvic wall  
Pelvic tissue (broad ligament, adjacent peritoneum--mesovarium)  
FIGO Stage IIB
- 62 (50) and/or (60) WITH malignant cells in ascites or peritoneal washings  
FIGO Stage IIC

**EXTENSION (cont'd)**

- 70 Microscopic peritoneal implants outside pelvis,\* including peritoneal surface of liver  
FIGO Stage IIIA
- 71 Macroscopic peritoneal implants beyond pelvis, ≤2 cm in diameter, including peritoneal surface of liver  
FIGO Stage IIIB
- 72 Peritoneal implants beyond pelvis, >2 cm in diameter, including peritoneal surface of liver  
FIGO Stage IIIC
- 80 FURTHER extension
- 85 Metastasis, including:  
Liver parenchymal metastasis  
Pleural fluid (positive cytology)  
FIGO Stage IV
- 99 UNKNOWN if extension or metastasis

**LYMPH NODES**

- 0 No lymph node involvement  
- - - - -
- REGIONAL Lymph Nodes
- 1 Iliac: Common  
Internal (hypogastric):  
Obturator  
External  
Lateral sacral  
Pelvic, NOS
- 2 Aortic (para-, peri-, lateral)  
Retroperitoneal, NOS
- 3 Inguinal
- 4 (2) plus (1) and/or (3)
- 5 Regional Lymph Nodes, NOS  
- - - - -
- DISTANT Lymph Nodes
- 7 Other than above  
- - - - -
- 8 Lymph Nodes, NOS
- 9 UNKNOWN; not stated

\*If omental implants are mentioned, determine whether they are in the pelvis or in the abdomen and code appropriately (60-62) or (70-72). If not specified, code as outside the pelvis (70-72).

**FALLOPIAN TUBE AND BROAD LIGAMENT**  
 183.2-183.5, 183.8-183.9

**SIZE OF PRIMARY TUMOR**

(from pathology report; operative report; endoscopic examination; physical examination--in priority order)

000 No mass; no tumor found  
 001 Microscopic focus or foci only

	<u>mm</u>	<u>cm</u>
002	≤2	≤0.2
003	3	0.3
...		
...		
009	9	0.9
010	10	1.0
...		
...		
099	99	9.9
100	100	10.0
...		
...		
990	990+	99.0+
999	Not stated	

**EXTENSION**

- 00 IN SITU: Noninvasive
- 10 Tumor confined to tissue or organ of origin
- 30 Localized, NOS
- 40 Extension to:  
 Ovary, ipsilateral  
 Corpus uteri; uterus, NOS
- 50 Extension to:  
 Peritoneum  
 Fallopian tube for ligaments  
 Broad ligament, ipsilateral for fallopian tube  
 Mesosalpinx, ipsilateral
- 70 Extension to:  
 Omentum  
 Cul de sac (rectouterine pouch)  
 Sigmoid  
 Rectosigmoid  
 Small intestine  
 Ovary, contralateral
- 80 FURTHER extension
- 85 Metastasis
- 99 UNKNOWN if extension or metastasi

FALLOPIAN TUBE AND BROAD LIGAMENT  
183.2-183.5, 183.8-183.9

LYMPH NODES

0 No lymph node involvement  
-----

REGIONAL Lymph Nodes

1 Iliac: Common  
          Internal (hypogastric):  
              Obturator  
              External  
          Lateral sacral  
          Pelvic, NOS

2 Aortic (para-, peri-, lateral)  
   Retroperitoneal, NOS

3 Inguinal

4 (2) plus (1) and/or (3)

5 Regional Lymph Nodes, NOS  
-----

DISTANT Lymph Nodes

7 Other than above  
-----

8 Lymph Nodes, NOS

9 UNKNOWN; not stated

VAGINA  
184.0

**SIZE OF PRIMARY TUMOR**

(from pathology report; operative report; endoscopic examination; physical examination--in priority order)

000 No mass; no tumor found  
001 Microscopic focus or foci only

	<u>mm</u>	<u>cm</u>
002	≤2	≤0.2
003	3	0.3
...		
...		
009	9	0.9
010	10	1.0
...		
...		
099	99	9.9
100	100	10.0
...		
...		
990	990+	99.0+
999	Not stated	

**EXTENSION**

- 00 IN SITU: Noninvasive; intraepithelial
- 10 Invasive cancer confined to: Submucosa (stroma) FIGO Stage I
- 20 Musculature involved
- 30 Localized, NOS
- 40 Extension to:
  - Paravaginal soft tissue
  - Cervix
  - Vulva
  - Vesicovaginal septum
  - Rectovaginal septum
  - FIGO Stage II
- 50 Extension to:
  - Bladder wall or NOS
  - Rectum wall or NOS
  - Cul de sac (rectouterine po )
  - FIGO Stage II
- 60 Extension to:
  - Pelvic wall
  - FIGO Stage III
- 70 Bladder or rectal mucosa  
FIGO Stage IVA
- 80 Extension beyond true pelvis
  - Urethra
  - FIGO Stage IVA
- 85 Metastasis:
  - FIGO Stage IVB
- 99 UNKNOWN if extension or metastasi

**Note:** "Frozen pelvis" is a clinical term which means tumor extends to pelvic sidewall(s). In the absence of a statement of involvement, code to '60'.

**LYMPH NODES**

0 No lymph node involvement  
-----

**REGIONAL Lymph Nodes**

**Upper two-thirds of vagina:**

1 Pelvic lymph nodes:  
    Iliac: Common  
          Internal (hypogastric)  
          External  
    Sacral  
    Pelvic, NOS

**Lower third of vagina:**

2 Unilateral inguinal lymph node(s)  
3 Bilateral inguinal lymph node(s)

**Both parts of vagina:**

5 Regional lymph node(s), unknown  
   whether primary in upper or  
   lower vagina

-----  
**DISTANT Lymph Nodes**

6 Inguinal (**upper two-thirds only**)  
   Aortic (para-, peri-, lateral)  
   Retroperitoneal, NOS  
7 Other than above

-----  
8 Lymph Nodes, NOS

9 UNKNOWN; not stated

VULVA (incl. Skin of Vulva)  
(excl. Malignant Melanoma)  
184.1-184.4

**SIZE OF PRIMARY TUMOR**

(from pathology report; operative report; endoscopic examination; physical examination--in priority order)

000 No mass; no tumor found  
001 Microscopic focus or foci only

	<u>mm</u>	<u>cm</u>
002	≤2	≤0.2
003	3	0.3
...		
...		
009	9	0.9
010	10	1.0
...		
...		
099	99	9.9
100	100	10.0
...		
...		
990	990+	99.0+
999	Not stated	

**EXTENSION**

00 IN SITU: Noninvasive; Bowen's disease, intraepidermal  
FIGO Stage 0

10 Invasive cancer confined to:  
Submucosa  
Musculature  
  
FIGO Stage I if size ≤2.0 cm  
FIGO Stage II if size >2.0 cm

30 Localized, NOS

60 Extension to:  
Vagina  
Urethra  
Perineum  
Perineal body  
Perianal skin  
Anus  
FIGO Stage III

70 Extension to:  
Rectal mucosa

75 Extension to:  
Upper urethral mucosa  
Bladder mucosa  
Pelvic bone  
FIGO Stage IVA

80 FURTHER extension

85 Metastasis  
FIGO Stage IVB

99 UNKNOWN if extension or metastasi

**Note:** Melanoma (M-8720-8790) of vulva is included in the melanoma scheme.

VULVA (incl. Skin of Vulva)  
(excl. Malignant Melanoma)  
184.1-184.4

LYMPH NODES

0 No lymph node involvement  
-----

REGIONAL Lymph Nodes

Superficial inguinal (femoral)  
Deep inguinal, Rosenmuller's  
or Cloquet's node  
Regional lymph nodes, NOS

1 Regional lymph node(s)

2 (1) WITH fixation or ulceration

3 External iliac  
Internal iliac (hypogastric)  
Pelvic, NOS

4 (3) WITH fixation or ulceration  
-----

DISTANT Lymph Nodes

7 Other than above  
-----

8 Lymph Nodes, NOS

9 UNKNOWN; not stated

**OTHER FEMALE GENITAL ORGANS**  
184.8-184.9

**SIZE OF PRIMARY TUMOR**

(from pathology report; operative report; endoscopic examination; physical examination--in priority order)

000 No mass; no tumor found  
001 Microscopic focus or foci only

	<u>mm</u>	<u>cm</u>
002	≤2	≤0.2
003	3	0.3
...		
...		
009	9	0.9
010	10	1.0
...		
...		
099	99	9.9
100	100	10.0
...		
...		
990	990+	99.0+
999	Not stated	

**EXTENSION**

00 IN SITU: Noninvasive; intraepithelial

10 Confined to site of origin

30 Localized, NOS

40 Extension to adjacent connective tissue

60 Extension to adjacent organs/structures

80 FURTHER extension

85 Metastasis

99 UNKNOWN if extension or metastasi

OTHER FEMALE GENITAL ORGANS  
184.8-184.9

LYMPH NODES

- 0 No lymph node involvement  
-----
- 1 REGIONAL Lymph Nodes  
-----
- 7 DISTANT Lymph Nodes  
-----
- 8 Lymph Nodes, NOS
- 9 UNKNOWN; not stated

PROSTATE GLAND  
185.9

**SIZE OF PRIMARY TUMOR**

(from pathology report; operative report; physical examination--in priority order)

000	No mass; no tumor found	
001	Microscopic focus or foci only	
	<u>mm</u>	<u>cm</u>
002	≤2	≤0.2
003	3	0.3
...		
...		
009	9	0.9
010	10	1.0
...		
...		
099	99	9.9
100	100	10.0
...		
...		
990	990+	99.0+
999	Not stated	

**EXTENSION**

- 00 IN SITU: Noninvasive; intraepithelial
- Incidentally found microscopic carcinoma (latent)**
- 10 Number of foci not specified
- 11 ≤3 microscopic foci (A1 Focal)\*
- 12 >3 microscopic foci (A2 Diffuse)
- 20 Palpable nodule within prostatic capsule (intracapsular)--one lobe (B1 Confined to prostate--~~small discrete nodule <1.5 cm~~)\*
- 25 Palpable nodules--more than one lobe (B2 Confined to prostate--~~nodule <1.5 cm~~; multiple nodules)
- 30 Localized, NOS
- 40 Invasion of prostatic capsule
- 50 Extension to:
  - Periprostatic tissue
  - Extracapsular extension (beyond prostatic capsule)
  - Extraprostatic urethra (membrane)
  - Bladder neck and prostatic apex (C1)\*
- 55 Extension to seminal vesicle(s) (C2)\*
- 60 Extension to or fixation of:
  - Neighboring structures
  - Rectovesical (Denonvilliers') fascia
  - Bladder, NOS; ureters
  - Rectum
  - Skeletal muscles (levator ani)
  - Fixation, NOS
- 70 Extension to:
  - Pelvic bone
  - Pelvic wall(s)
- 80 Further extension to bone, soft tissue or other organs (D1)\*
- 85 Metastasis (D2)
- 99 UNKNOWN if extension or metastasis

**Note 1:** Involvement of prostatic urethra does not alter the extension code.

**Note 2:** "Frozen pelvis" is a clinical term which means tumor extends to pelvic sidewall(s). In the absence of a statement of involvement, code to '70'.

\*The American Urological Staging System (A-D)

**LYMPH NODES**

0 No lymph node involvement

-----  
REGIONAL Lymph Nodes

Periprostatic

Iliac: Internal (hypogastric):  
Obturator  
External

Iliac, NOS

Pelvic, NOS

Sacral (lateral, presacral,  
promontory (Gerota's), or NOS)

Regional lymph node(s), NOS

1 Single lymph node  $\leq$ 2 cm

2 Single lymph node >2-5 cm OR  
multiple nodes, none  
greater than 5 cm

3 Lymph node(s), at least one >5 cm

5 Size not stated

-----  
DISTANT Lymph Nodes

6 Aortic (para-, peri-, lateral)  
Retroperitoneal, NOS  
Common iliac  
Inguinal

7 Other than above

-----  
8 Lymph Nodes, NOS

9 UNKNOWN; not stated

TESTIS  
186.0, 186.9

**SIZE OF PRIMARY TUMOR**

(from pathology report; operative report; physical examination--in priority order)

000 No mass; no tumor found  
001 Microscopic focus or foci only

	<u>mm</u>	<u>cm</u>
002	≤2	≤0.2
003	3	0.3
...		
...		
009	9	0.9
010	10	1.0
...		
...		
099	99	9.9
100	100	10.0
...		
...		
990	990+	99.0+
999	Not stated	

**EXTENSION**

- 00 IN SITU: Noninvasive; intratubular
- 10 Confined to body of testis/tunica albuginea; rete testis
- 20 Tunica vaginalis involved  
Surface implants
- 30 Localized, NOS  
Tunica, NOS
- 40 Extension to:  
Epididymis
- 50 Spermatic cord, ipsilateral  
Vas deferens
- 60 Scrotum, ipsilateral, incl.  
dartos muscle
- 70 Extension to:  
Ulceration of scrotum  
Scrotum, contralateral
- 75 Penis
- 80 FURTHER extension
- 85 Metastasis
- 99 UNKNOWN if extension or metastasi

TESTIS  
186.0, 186.9

LYMPH NODES

0 No lymph node involvement

-----  
REGIONAL Lymph Nodes

Paracaval  
Aortic (para-, peri-, lateral)  
External iliac  
Retroperitoneal, NOS  
Pelvic, NOS  
Regional lymph node(s), NOS

- 1 Single lymph node  $\leq 2$  cm
- 2 Single lymph node  $> 2-5$  cm OR  
multiple nodes, none  
greater than 5 cm
- 3 Lymph node(s), at least one  $> 5$  cm
- 5 Size not stated

-----  
DISTANT Lymph Nodes

- 6 Inguinal nodes
- 7 Other than above

-----  
8 Lymph Nodes, NOS

9 UNKNOWN; not stated

**PREPUCE, PENIS, NOS, AND GLANS PENIS**  
(excl. Malignant Melanoma)  
187.1-187.2, 187.4

**SIZE OF PRIMARY TUMOR**

(from pathology report; operative report; physical examination--in priority order)

000 No mass; no tumor found  
001 Microscopic focus or foci only

	<u>mm</u>	<u>cm</u>
002	≤2	≤0.2
003	3	0.3
...		
...		
009	9	0.9
010	10	1.0
...		
...		
099	99	9.9
100	100	10.0
...		
...		
990	990+	99.0+
999	Not stated	

**EXTENSION**

- 00 IN SITU: Noninvasive; Bowen's disease; intraepithelial
- 10 Invasive tumor limited to subepithelial connective tissue, but not involving corpus spongiosum
- 30 Localized, NOS
- 40 Extension to:  
Corpus cavernosum  
Corpus spongiosum
- 50 Satellite nodule(s) on prepuce or glans
- 60 Extension to:  
Urethra  
Prostate
- 70 Skin: Pubic, scrotal, abdominal, perineum
- 80 FURTHER extension
- 85 Metastasis
- 99 UNKNOWN if extension or metastasi

**Note:** Melanoma (M-8720-8790) of penis is included in the melanoma scheme.

PREPUCE, PENIS, NOS, AND GLANS PENIS  
(excl. Malignant Melanoma)  
187.1-187.2, 187.4

LYMPH NODES

0 No lymph node involvement  
-----

REGIONAL Lymph Nodes

1 SINGLE superficial inguinal  
(femoral)

2 Multiple OR bilateral  
superficial inguinal  
(femoral)

3 Deep inguinal: Rosenmuller's  
or Cloquet's node

5 Regional lymph node(s), NOS

6 External iliac  
Internal iliac (hypogastric)  
Pelvic nodes, NOS  
-----

DISTANT Lymph Nodes

7 Other than above  
-----

8 Lymph Nodes, NOS

9 UNKNOWN; not stated

**BODY OF PENIS, SCROTUM, AND OTHER MALE GENITAL ORGANS**  
(excl. Malignant Melanoma of Scrotum)  
187.3, 187.5-187.9

**SIZE OF PRIMARY TUMOR**

(from pathology report; operative report; endoscopic examination; physical examination--in priority order)

000 No mass; no tumor found  
001 Microscopic focus or foci only

	<u>mm</u>	<u>cm</u>
002	≤2	≤0.2
003	3	0.3
...		
...		
009	9	0.9
010	10	1.0
...		
...		
099	99	9.9
100	100	10.0
...		
...		
990	990+	99.0+
999	Not stated	

**EXTENSION**

00	IN SITU: Noninvasive; intraepithelial
10	Confined to site of origin
30	Localized, NOS
40	Extension to adjacent connective tissue
60	Extension to adjacent organs/structures
80	FURTHER extension
85	Metastasis
99	UNKNOWN if extension or metastasi

**Note:** Melanoma (M-8720-8790) of scrotum is included in the melanoma scheme

**BODY OF PENIS, SCROTUM, AND OTHER MALE GENITAL ORGANS**  
(excl. Malignant Melanoma of Scrotum)  
187.3, 187.5-187.9

**LYMPH NODES**

- 0 No lymph node involvement  
-----
- 1 REGIONAL Lymph Nodes
  - External iliac
  - Internal iliac (hypogastric)
  - Superficial inguinal  
(femoral)
  - Deep inguinal: Rosenmuller's  
or Cloquet's node
  - Regional lymph node(s), NOS-----
- DISTANT Lymph Nodes
- 7 Other than above  
-----
- 8 Lymph Nodes, NOS
- 9 UNKNOWN; not stated

## URINARY BLADDER, RENAL PELVIS and URETERS

### DISTINGUISHING "IN SITU" AND "LOCALIZED" FOR URINARY SITES

One of the problems that needs to be resolved is the ambiguity of the term "confined to mucosa" especially for the urinary bladder.

Historically, carcinomas described as "confined to mucosa" have been coded as localized. However, pathologists almost uniformly use this designation for non-invasive tumor (confined to the epithelium). In order to provide greater specificity and to rule out the possibility of classifying noninvasive tumors in this category, abstractors should determine:

- 1) if the tumor is confined to the epithelium, in which case it would be in situ,
- 2) if the tumor has penetrated the basement membrane to invade the lamina propria, in which case it would be localized and coded to invasion of the lamina propria. Only if this separation cannot be made should the tumor be coded to "confined to mucosa."

The EPITHELIAL LAYER contains no blood vessels or lymphatics.

The BASEMENT MEMBRANE, a sheet of extracellular material, functions as a filtration barrier and a boundary involved in generating and maintaining tissue structure.

The LAMINA PROPRIA, composed of areolar connective tissue, contains blood vessels, nerves, and, in some regions, glands. Once tumor has broken through the basement membrane into the lamina propria, it can spread by way of the lymphatics and blood vessels to other parts of the body.

The urinary sites have NO MUSCULARIS MUCOSAE, and, therefore, the lamina propria and the submucosa are difficult to separate. These terms will be used interchangeably.

The SUBMUCOSA is a thick layer of either dense or areolar connective tissue. It contains blood vessels, lymphatic vessels, nerves, and, in some regions, glands.

The MUSCULARIS PROPRIA is composed of multiple layers of muscle tissue; it constitutes the wall of the organ.

The SEROSA, the outermost layer covering, is a serous membrane, part of the visceral peritoneum. It covers only the superior surface of the urinary bladder. There is no serosa on the renal pelvis or ureters. Where there is no serosa, the connective tissue of surrounding structures merges with the connective tissue of the urinary organs and is called ADVENTITIA.

URINARY BLADDER, RENAL PELVIS and URETERS

PRIMARY SITE	MUCOSA	LAMINA PROPRIA/ SUBMUCOSA	MUSCULARIS PROPRIA	SEROSA
	Epithelium	B A S E : M E M B R A N E : :		
Urinary Bladder (188._)	Yes	Yes	Yes	Yes, on superior surface
Renal pelvis (189.1)	Yes	Yes	Yes	No
Ureter(s) (189.2)	Yes	Yes	Yes	No

**URINARY BLADDER**

188.0-188.9

**SIZE OF PRIMARY TUMOR**

(from pathology report; operative report; endoscopic examination; x-ray report (KUB); physical examination--in priority order)

000 No mass; no tumor found  
 001 Microscopic focus or foci only

	mm	cm
002	≤2	≤0.2
003	3	0.3
...		
...		
009	9	0.9
010	10	1.0
...		
...		
099	99	9.9
100	100	10.0
...		
...		
990	990+	99.0+
999	Not stated	

**Note 1:** The lamina propria and submucosa tend to merge when there is no muscularis mucosae, so these terms will be used interchangeably.

**Note 2:** The meaning of the terms "invasion of mucosa, Gr 1" and "invasion of mucosa, Gr. 2" vary with the pathologist who must be queried to determine whether carcinoma is "in situ" or "invasive."

**Note 3:**

If extension code is:	Behavior code must be:
00 or 05	2
10	2 or 3
15+	3

**EXTENSION**

- 00 Sessile carcinoma-IN SITU; Carcinoma-IN SITU, NOS
- 05 Noninvasive papillary (transitional) carcinoma
- 10 Confined to mucosa, NOS
- 15 Invasive tumor confined to: Subepithelial connective tissue (tunica propria, lamina propria, submucosa, stroma) invaded
  - Muscle (muscularis)
  - 20 NOS
  - 21 Superficial muscle--inner half
  - 22 Deep muscle--outer half
- 23 Invasion through full thickness of bladder wall
- 30 Localized, NOS
- 40 Invasion of subserosal tissue and/or perivesical fat
- 50 Invasion of (through) serosa (mesothelium); peritoneum
- 60 Invasion of:
  - Prostate
  - Urethra, including prostatic urethra
  - Ureter
- 65 Invasion of:
  - Vas deferens; seminal vesicle
  - Rectovesical/Denonvilliers' fascia
  - Parametrium
  - Uterus
  - Vagina
- 70 Bladder FIXED
- 75 Extension to:
  - Pelvic wall
  - Abdominal wall
- 80 FURTHER extension
- 85 Metastasis
- 99 UNKNOWN if extension or metastasi

**LYMPH NODES**

0 No lymph node involvement

-----  
REGIONAL Lymph Nodes (incl. contra-  
lateral and bilateral)

Iliac: Internal (hypogastric):  
Obturator  
External  
Iliac, NOS

Perivesical  
Sacral (lateral, presacral,  
sacral promontory (Gerota's),  
or NOS)  
Pelvic, NOS  
Regional lymph node(s), NOS

1 Single lymph node  $\leq$ 2 cm

2 Single lymph node >2-5 cm OR  
multiple nodes, none  
greater than 5 cm

3 Lymph node(s), at least one >5 cm

5 Size not stated

-----  
DISTANT Lymph Nodes

6 Common iliac

7 Other than above

-----  
8 Lymph Nodes, NOS

9 UNKNOWN; not stated

KIDNEY (Renal) PARENCHYMA  
189.0

SIZE OF PRIMARY TUMOR

(from pathology report; operative report; endoscopic examination; radiographic report--in priority order)

000 No mass; no tumor found  
001 Microscopic focus or foci only

	<u>mm</u>	<u>cm</u>
002	≤2	≤0.2
003	3	0.3
...		
...		
009	9	0.9
010	10	1.0
...		
...		
099	99	9.9
100	100	10.0
...		
...		
990	990+	99.0+
999	Not stated	

EXTENSION

- 00 IN SITU
- 10 Invasive cancer confined to kidney cortex and/or medulla
- 20 Renal pelvis or calyces involved  
Invasion of renal capsule
- 30 Localized, NOS
- 40 Extension to:  
Perirenal (perinephric) tissue  
Renal (Gerota's) fascia  
Adrenal gland, ipsilateral
- 60 Extension to:  
Blood vessels:  
extrarenal portion of renal vein, renal vein, NOS,  
Inferior vena cava
- 65 Extension beyond Gerota's fascia to:  
Ureter, incl. implant(s), ipsilateral  
Tail of pancreas  
Ascending colon from right kidney  
Descending colon from left kidney  
Duodenum from right kidney  
Ribs  
Peritoneum  
Diaphragm
- 80 FURTHER extension
- 85 Metastasis
- 99 UNKNOWN if extension or metastasis

KIDNEY (Renal) PARENCHYMA  
189.0

LYMPH NODES

- 0 No lymph node involvement  
-----  
REGIONAL Lymph Nodes (incl. contra-  
lateral and bilateral)
- Renal hilar  
Paracaval  
Aortic (para-, peri-, lateral)  
Retroperitoneal, NOS  
Regional lymph node(s), NOS
- 1 Single lymph node  $\leq 2$  cm
- 2 Single lymph node  $>2-5$  cm OR  
multiple nodes, none  
greater than 5 cm
- 3 Lymph node(s), at least one  $>5$  cm
- 5 Size not stated  
-----  
DISTANT Lymph Nodes
- 7 Other than above  
-----
- 8 Lymph Nodes, NOS
- 9 UNKNOWN; not stated

**RENAL (Kidney) PELVIS, URETER,  
AND URINARY SYSTEM, NOS**  
189.1-189.2, 189.8-189.9

**SIZE OF PRIMARY TUMOR**

(from pathology report; operative report; endoscopic examination; radiographic report--in priority order)

000 No mass; no tumor found  
001 Microscopic focus or foci only

	<u>mm</u>	<u>cm</u>
002	≤2	≤0.2
003	3	0.3
...		
...		
009	9	0.9
010	10	1.0
...		
...		
099	99	9.9
100	100	10.0
...		
...		
990	990+	99.0+
999	Not stated	

**Note 1:**

If extension code is:	Behavior code must be:
00 or 05	2
10	3

**EXTENSION**

- 00 Carcinoma-IN SITU, NOS
- 05 Papillary noninvasive carcinoma
- 10 Subepithelial connective tissue (lamina propria, submucosa) invaded
- 20 Muscularis invaded
- 30 Localized, NOS
- 40 Extension to adjacent (connective tissue:
  - Peripelvic/periureteral tissue
  - Retroperitoneal soft/connective tissue
- 60 Extension to:
  - Kidney parenchyma and kidney, NOS from renal pelvis
  - Ureter to or from renal pelvis
- 65 Extension to:
  - Bladder (ureteral orifice from distal ureter)
  - Implants in distal ureter
- 70 Extension to:
  - Perinephric fat via kidney
  - Major blood vessel(s): Aorta, renal artery/vein, vena cava (inferior)
  - Spleen
  - Pancreas
  - Liver
  - Ascending colon from R kidney pelvis
  - Descending colon from L kidney pelvis
  - Colon, NOS
  - Kidney parenchyma from other than renal pelvis
  - Bladder, other than from distal ureter, i.e., renal pelvis
- 80 FURTHER extension
- 85 Metastasis
- 99 UNKNOWN if extension or metastasi

RENAL (Kidney) PELVIS, URETER,  
AND URINARY SYSTEM, NOS  
189.1-189.2, 189.8-189.9

LYMPH NODES

0 No lymph node involvement  
-----

REGIONAL Lymph Nodes (incl. contra-  
lateral and bilateral)

**Renal Pelvis:**

Renal hilar  
Paracaval  
Aortic (para-, peri-, lateral)  
Retroperitoneal, NOS  
Regional lymph node(s), NOS

**Ureter:**

Renal hilar  
Iliac: Common  
          Internal (hypogastric)  
          External  
Paracaval  
Periureteral  
Pelvic, NOS  
Regional lymph node(s), NOS

- 1 Single lymph node  $\leq$ 2 cm
- 2 Single lymph node >2-5 cm OR  
multiple nodes, none  
greater than 5 cm
- 3 Lymph node(s), at least one >5 cm
- 5 Size not stated

-----  
DISTANT Lymph Nodes

7 Other than above  
-----

- 8 Lymph Nodes, NOS
- 9 UNKNOWN; not stated

**URETHRA and PARAURETHRAL GLAND**  
189.3-189.4

**SIZE OF PRIMARY TUMOR**

(from pathology report; operative report; endoscopic examination; radiographic report--in priority order)

000 No mass; no tumor found  
001 Microscopic focus or foci only

	<u>mm</u>	<u>cm</u>
002	≤2	≤0.2
003	3	0.3
...		
...		
009	9	0.9
010	10	1.0
...		
...		
099	99	9.9
100	100	10.0
...		
...		
990	990+	99.0+
999	Not stated	

**EXTENSION**

- 00 Carcinoma-IN SITU, NOS
- 05 Noninvasive papillary, polypoid, or verrucous carcinoma
- 10 Subepithelial connective tissue (lamina propria, submucosa) invaded
- 20 Muscularis
- 30 Localized, NOS
- 40 Invasion of:  
Periurethral muscle (sphincter)  
Corpus spongiosum  
Prostate
- 60 Invasion of:  
Corpus cavernosum  
Vagina  
Bladder neck  
Seminal vesicle(s)
- 70 Extension to other adjacent organs
- 80 FURTHER extension
- 85 Metastasis
- 99 UNKNOWN if extension or metastasis

**Note 1:**

If extension code is:	Behavior code must be:
00 or 05	2
10	3

URETHRA and PARAURETHRAL GLAND  
189.3-189.4

LYMPH NODES

0 No lymph node involvement

-----  
REGIONAL Lymph Nodes (incl. contra-  
lateral and bilateral)

Iliac: Common  
Internal (hypogastric):  
Obturator  
External  
Inguinal (superficial or deep)  
Presacral, sacral NOS  
Pelvic, NOS  
Regional lymph node(s), NOS

1 Single lymph node  $\leq$ 2 cm

2 Single lymph node >2-5 cm OR  
multiple nodes, none  
greater than 5 cm

3 Lymph node(s), at least one >5 cm

5 Size not stated

-----  
DISTANT Lymph Nodes

7 Other than above

-----  
8 Lymph Nodes, NOS

9 UNKNOWN; not stated

**EYE AND LACRIMAL GLAND**  
190.0-190.9

**SIZE OF PRIMARY TUMOR**

(from pathology report; operative report; radiographic report; physical examination--in priority order)

000 No mass; no tumor found  
001 Microscopic focus or foci only

	<u>mm</u>	<u>cm</u>
002	≤2	≤0.2
003	3	0.3
...		
...		
009	9	0.9
010	10	1.0
...		
...		
099	99	9.9
100	100	10.0
...		
...		
990	990+	99.0+
999	Not stated	

**EXTENSION**

- 00 IN SITU
- 10 Tumor confined to site of origin:
  - Iris
  - Ciliary body
  - Choroid
  - Retina
  - Lacrimal gland
  - Cornea
  - Conjunctiva
  - Soft tissue of orbit (sarcomas)
- 20 Intraocular extension
- 30 Localized, NOS
- 40 Extraocular extension *(incl conjunctiva)*
  - Paranasal sinuses
  - Cranium/skull
  - Eyelid
  - Optic nerve
  - Orbit for confocal*
- 80 FURTHER extension
- 85 Metastasis
- 99 UNKNOWN if extension or metastasi

EYE AND LACRIMAL GLAND  
190.0-190.9

LYMPH NODES

- 0 No lymph node involvement  
-----
- 1 REGIONAL Lymph Nodes
  - Submandibular nodes
  - Parotid (preauricular) nodes
  - Upper cervical
  - Regional lymph node(s), NOS-----
- 7 DISTANT Lymph Nodes  
-----
- 8 Lymph Nodes, NOS
- 9 UNKNOWN; not stated

**BRAIN and CEREBRAL MENINGES**  
 191.0-191.9, 192.1

**SIZE OF PRIMARY TUMOR**

(from pathology report; operative report; radiographic report--in priority order. EXCEPTION: Code the first size given for pre-irradiated surgical cases.

000 No mass; no tumor found  
 001 Microscopic focus or foci only

	mm	cm
002	≤2	≤0.2
003	3	0.3
...		
...		
009	9	0.9
010	10	1.0
...		
...		
099	99	9.9
100	100	10.0
...		
...		
990	990+	99.0+
999	Not stated	

**EXTENSION**

- 00 IN SITU
- 10 Supratentorial tumor confined to CEREBRAL HEMISPHERE (cerebrum) on one side:
  - Frontal lobe
  - Temporal lobe
  - Parietal lobe
  - Occipital lobe
- 11 Infratentorial tumor confined to CEREBELLUM on one side:
  - Vermis: Median lobe of cerebellum
  - Lateral lobes
- 12 Infratentorial tumor confined to BRAIN STEM on one side:
  - Thalamus, hypothalamus
  - Midbrain (mesencephalon)
  - Pons
  - Medulla oblongata
- 20 Infratentorial tumor: Both cerebellum and brain stem involved WITH tumor on one side
- 30 Confined to ventricles or tumor invades or encroaches upon ventricular system
- 40 Tumor crosses the midline, involves corpus callosum (incl. splenium), or contralateral hemisphere
- 50 Supratentorial tumor extends infratentorially to involve cerebellum or brain stem
- 51 Infratentorial tumor extends supratentorially to involve cerebrum
- 60 Tumor invades:
  - Bone (skull)
  - Meninges (dura)
  - Major blood vessel(s)
  - Nerves--cranial nerves
  - spinal cord/canal

BRAIN and CEREBRAL MENINGES  
191.0-191.9, 192.1

EXTENSION (cont'd)

- 70 Extension to:  
Nasopharynx  
Posterior pharynx  
Nasal cavity  
Outside central nervous  
system (CNS)  
Circulating cells in cerebral  
spinal fluid (CSF)
- 80 FURTHER extension
- 85 Metastasis
- 99 UNKNOWN if extension  
or metastasis

LYMPH NODES

- 9 Not Applicable

**OTHER PARTS OF NERVOUS SYSTEM**  
 192.0, 192.2-192.3, 192.8-192.9

**SIZE OF PRIMARY TUMOR**

(from pathology report; operative report; radiographic report--in priority order)

000	No mass; no tumor found	
001	Microscopic focus or foci only	
	<u>mm</u>	<u>cm</u>
002	≤2	≤0.2
003	3	0.3
...		
...		
009	9	0.9
010	10	1.0
...		
...		
099	99	9.9
100	100	10.0
...		
...		
990	990+	99.0+
999	Not stated	

**EXTENSION**

- 10 Tumor confined to tissue or site of origin
- 30 Localized, NOS
- 40 Meningeal tumor infiltrates nerve  
Nerve tumor infiltrates meninges (dura)
- 50 Adjacent connective/soft tissue involved  
Adjacent muscle involved
- 60 Extension to:  
Major blood vessel(s)  
Sphenoid and frontal sinuses (skull)  
Brain for cranial meninges and nerve tumors
- 70 Extension to:  
Brain, except for cranial meninges and nerve tumors  
Eye  
Bone, other than skull
- 80 FURTHER extension:
- 85 Metastasis
- 99 UNKNOWN if extension or metastasis

OTHER PARTS OF NERVOUS SYSTEM  
192.0, 192.2-192.3, 192.8-192.9

LYMPH NODES

9 Not Applicable

THYROID GLAND  
193.9

SIZE OF PRIMARY TUMOR

(from pathology report; operative report; radiographic report; physical examination--in priority order)

000 No mass; no tumor found  
001 Microscopic focus or foci only

	<u>mm</u>	<u>cm</u>
002	≤2	≤0.2
003	3	0.3
...		
009	9	0.9
010	10	1.0
...		
099	99	9.9
100	100	10.0
...		
990	990+	99.0+
999	Not stated	

EXTENSION

- 00 IN SITU: Noninvasive
- 10 Single invasive tumor confined to thyroid
- 20 Multiple foci confined to thyroid
- 30 Localized, NOS
- 40 Into thyroid capsule, but not beyond
- 50 Extension to:
  - Pericapsular soft/connective tissue
  - Parathyroid
  - Strap muscle(s): Sternothyroid, omohyoid, sternohyoid
  - Nerves: Recurrent laryngeal, vagus
- 60 Extension to:
  - Major blood vessel(s): Carotid artery, thyroid artery or vein, jugular vein
  - Sternocleidomastoid muscles
  - Esophagus
  - Larynx, incl. thyroid and cricoid cartilages
  - Tumor is described as "FIXED to adjacent tissues"
- 70 Extension to:
  - Trachea
  - Skeletal muscle, other than strap or sternocleidomastoid muscles
  - Bone
- 80 FURTHER extension
- 85 Metastasis
- 99 UNKNOWN if extension or metastasi

**LYMPH NODES**

0 No lymph node involvement

-----  
REGIONAL Lymph Nodes

Delphian node

Anterior cervical:

    prelaryngeal, laterotracheal,  
    pretracheal (recurrent laryngeal  
    nerve chain)

Internal jugular (upper and  
lower deep cervical):

    jugulodigastric  
    jugulo-omohyoid

Retropharyngeal

Cervical, NOS

1 Ipsilateral cervical nodes

2 Bilateral, contralateral, or  
midline cervical nodes

3 Mediastinal nodes

5 Regional lymph node(s), NOS

-----  
DISTANT Lymph Nodes

6 Submandibular (submaxillary)  
Submental

7 Other than above

-----  
8 Lymph Nodes, NOS

9 UNKNOWN; not stated

THYMUS AND OTHER ENDOCRINE GLANDS

164.0, 194.0-194.1, 194.3-194.6, 194.8-194.9

SIZE OF PRIMARY TUMOR

(from pathology report; operative report; physical examination--in priority order)

000 No mass; no tumor found  
 001 Microscopic focus or foci only

	<u>mm</u>	<u>cm</u>
002	≤2	≤0.2
003	3	0.3
...		
...		
009	9	0.9
010	10	1.0
...		
...		
099	99	9.9
100	100	10.0
...		
...		
990	990+	99.0+
999	Not stated	

EXTENSION

00 IN SITU: Noninvasive  
 10 Invasive carcinoma confined to gland of origin  
 30 Localized, NOS  
 40 Extension to adjacent (connective tissue)  
 60 Extension to adjacent organs/structures  
 80 FURTHER extension  
 85 Metastasis  
 99 UNKNOWN if extension or metastasis

THYMUS AND OTHER ENDOCRINE GLANDS  
164.0, 194.0-194.1, 194.3-194.6, 194.8-194.9

LYMPH NODES

- 0 No lymph node involvement  
- - - - -
- 1 REGIONAL Lymph Nodes  
- - - - -
- 7 DISTANT Lymph Nodes  
- - - - -
- 8 Lymph Nodes, NOS
- 9 UNKNOWN; not stated

**KAPOSI'S SARCOMA  
(M-9140)**

**ASSOCIATED WITH AIDS**

001 Yes  
002 No  
999 Unknown

**EXTENSION**

**SINGLE LESION**

11 Skin  
12 Mucosa  
13 Visceral

**MULTIPLE LESIONS**

21 Skin  
22 Mucosa (e.g., oral cavity,  
anus, rectum, vagina, vulva)  
23 Visceral (e.g., pulmonary, GI,  
lymph nodes, incl. spleen, othe  
24 (21) plus (22)  
25 (21) plus (23)  
26 (22) plus (23)  
27 (21) plus (22) plus (23)  
29 Multiple lesions, NOS  
99 Unknown or not stated

KAPOSI'S SARCOMA  
(M-9140)

**LYMPH NODES**

0 No lymph node involvement (No  
clinical adenopathy, pathology  
negative for Mycosis Fungoides)

-----  
REGIONAL lymph nodes

1 Clinically enlarged palpable  
regional lymph node(s)  
(adenopathy), pathologically  
negative regional lymph node(s)

2 No clinically enlarged palpable  
regional lymph nodes(s)  
(adenopathy); pathologically  
positive regional lymph node(s)

3 Both clinically enlarged palpable  
lymph node(s) (adenopathy) and  
pathologically positive regional  
lymph nodes

-----  
9 UNKNOWN; not stated

**HODGKIN'S DISEASE AND NON-HODGKIN'S LYMPHOMA OF ALL SITES**  
 (excl. Mycosis Fungoides, and Sezary's Disease)  
 (M-9590-9594, 9650-9698, 9702-9704)

**SIZE OF PRIMARY TUMOR**

999 Not applicable

**Note 1:** If there is no mention of extranodal involvement but several diagnostic procedures were done, including laparotomy, interpret as no involvement.

**Note 2:** Involvement of adjacent soft tissue does not alter the classification.

E = Extralymphatic (extranodal site) involvement

S = Spleen involvement

**EXTENSION**

- 10 Involvement of one lymph node region  
Stage I
- 11 Localized involvement of one extralymphatic organ or site  
Stage IE
- 20 Involvement of two or more lymph node regions on the same side of the diaphragm  
Stage II
- 21 Tumor that begins in one extra-lymphatic organ or site and involves lymph node(s) on the same side of the diaphragm  
Stage IIE
- 30 Involvement of lymph nodes on both sides of the diaphragm  
Stage III
- 31 (30) plus associated involvement of an extralymphatic organ/site  
Stage IIIIE
- 32 (30) plus involvement of the spleen  
Stage IIIS
- 33 (31) + (32)  
Stage IIIIES
- 80 Disseminated (multifocal) involvement of 1 or more extralymphatic organ(s)  
Stage IV
- 99 UNSTAGED (Insufficient information)

**HODGKIN'S DISEASE AND NON-HODGKIN'S LYMPHOMA OF ALL SITES**  
(excl. Mycosis Fungoides, and Sezary's Disease)  
(M-9590-9594, 9650-9698, 9702-9704)

**SYSTEMIC SYMPTOMS AT DIAGNOSIS**

0 No B symptoms (Asymptomatic)  
-----

1 Any B symptom:  
    Night sweats  
    Unexplained fever (above 38° C)  
    Unexplained weight loss (gen-  
        erally >10% loss of body  
        weight in the six months  
        before admission)  
    B symptoms, NOS

2 Pruritus (if recurrent and  
    unexplained)

3 1 plus 2  
-----

9 UNKNOWN if symptoms; insufficient  
    information

**HEMATOPOIETIC, RETICULOENDOTHELIAL, IMMUNOPROLIFERATIVE,  
and MYELOPROLIFERATIVE NEOPLASMS  
(M-9720, 9722-9723, 9730-9731, 9760-9764, 9800-9940, 9950-9980)**

**SIZE OF PRIMARY TUMOR**

**EXTENSION**

999	Not applicable	10	Localized disease: <b>Solitary plasmacytoma only</b>
		80	Systemic Disease: All others

This scheme includes the following:

- 9720 = Malignant histiocytosis  
Histiocytic medullary reticulosis
- 9722 = Letterer-Siwe's disease
- 9723 = True histiocytic lymphoma
- 9730 = Multiple myeloma  
Myeloma, NOS  
Myelomatosis
- 9731 = Plasmacytoma, NOS  
Extramedullary plasmacytoma  
Solitary myeloma/plasmacytoma
- 9760 = Immunoproliferative disease, NOS
- 9761 = Waldenstrom's macroglobulinemia
- 9762 = Gamma heavy chain disease  
Franklin's disease
- 9763 = Immunoproliferative small intestinal disease
- 9764 = Malignant monoclonal gammopathy
- 9800 = Leukemia, NOS
- 9801 = Acute leukemia, NOS  
Blast cell leukemia  
Undifferentiated leukemia
- 9802 = Subacute leukemia, NOS
- 9803 = Chronic leukemia, NOS
- 9804 = Aleukemic leukemia, NOS
- 9820 = Lymphoid Leukemia, NOS  
Lymphocytic leukemia, NOS
- 9821 = Acute lymphoblastic leukemia  
Acute lymphocytic leukemia  
Acute lymphoid leukemia  
Acute lymphatic leukemia
- 9822 = Subacute lymphoid leukemia
- 9823 = Chronic lymphocytic leukemia
- 9824 = Aleukemic lymphoid leukemia
- 9825 = Prolymphocytic leukemia
- 9830 = Plasma cell leukemia  
Plasmacytic leukemia

**HEMATOPOIETIC, RETICULOENDOTHELIAL, IMMUNOPROLIFERATIVE,  
and MYELOPROLIFERATIVE NEOPLASMS  
(M-9720, 9722-9723, 9730-9731, 9760-9764, 9800-9940, 9950-9980)**

**LYMPH NODES**

9 Not applicable

- 9840 = Erythroleukemia  
Erythremic myelosis, NOS
- 9841 = Acute erythremia  
Di Guglielmo's disease  
Acute erythremic myelosis
- 9842 = Chronic erythremia
- 9850 = Lymphosarcoma cell leukemia
- 9860 = Myeloid leukemia, NOS  
Granulocytic leukemia
- 9861 = Acute myeloid leukemia  
Acute myeloblastic leukemia  
Acute granulocytic leukemia  
Acute myelocytic leukemia
- 9862 = Subacute myeloid leukemia
- 9863 = Chronic myeloid leukemia
- 9864 = Aleukemic myeloid leukemia
- 9866 = Acute promyelocytic leukemia
- 9867 = Acute myelomonocytic leukemia
- 9868 = Chronic myelomonocytic leukemia
- 9870 = Basophilic Leukemia
- 9880 = Eosinophilic Leukemia
- 9890 = Monocytic Leukemia, NOS
- 9891 = Acute monocytic leukemia  
Acute monoblastic leukemia  
Monoblastic leukemia, NOS
- 9892 = Subacute monocytic leukemia
- 9893 = Chronic monocytic leukemia
- 9894 = Aleukemic monocytic leukemia
- 9900 = Mast cell leukemia
- 9910 = Acute megakaryoblastic leukemia  
Megakaryocytic leukemia
- 9930 = Myeloid sarcoma  
Granulocytic sarcoma  
Chloroma
- 9931 = Acute panmyelosis
- 9932 = Acute myelofibrosis
- 9940 = Hairy cell leukemia  
Leukemic reticuloendotheliosis
- 9950 = Malignant polycythemia (rubra) vera
- 9960 = Malignant myeloproliferative disease, NOS
- 9961 = Malignant myelosclerosis with myeloid metaplasia
- 9962 = Malignant idiopathic/essential (hemorrhagic) thrombocythem
- 9970 = Malignant lymphoproliferative disease, NOS
- 9980 = Malignant myelodysplastic syndrome

**UNKNOWN AND ILL-DEFINED PRIMARY SITES**

199.9, 195.0-195.5, 195.8

169.\_ and 196.\_, Other than leukemia and lymphoma

**SIZE OF PRIMARY TUMOR**

**EXTENSION**

999 Not applicable

99 Not Applicable

**UNKNOWN AND ILL-DEFINED PRIMARY SITES**

199.9, 195.0-195.5, 195.8

169.\_ and 196.\_, Other than leukemia and lymphoma

**LYMPH NODES**

9 Not Applicable

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