SEER

SEER Extent of Disease1988 Codes and Coding Instructions

Second Edition

SEER EXTENT OF DISEASE -- 1988 CODES AND CODING INSTRUCTIONS

SECOND EDITION

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Preface to the Second Edition

This is the first complete reissue of <u>SEER Extent of Disease -- 1988:</u> Codes and Coding Instructions (EOD-88) since it was first published. The most significant difference between this edition and the first is that primary site codes are given in the World Health Organization's International Classification of Diseases for Oncology, 2nd ed. (WHO, 1990) (ICD-0-2).

Substantive changes from the first edition to the codes or rules are marked with change bars. Format changes, editorial changes, and changes necessitated by the adoption of ICD-0-2 are not so marked. Substantive changes made to the first edition in the past are not so marked, but are described in Appendix A.

Both the first and second editions of EOD-88 are compatible with the American Joint Committee on Cancer's (AJCC) Manual for Staging of Cancer, 3rd ed. (Lippincott, 1988). SEER intends to collect EOD-88 compatible with this third edition through 1993. A revision of EOD compatible with AJCC's Manual for Staging of Cancer, 4th ed., (Lippincott, 1992) is planned for implementation with 1994-diagnosed cases.

Interim versions of EOD-88, 2nd ed., have been previously distributed showing earlier dates. They should be discarded and replaced by the final published version.

Send suggestions and corrections to :

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Definitions of Abbreviations and Symbols

AJCC American Joint Committee on Cancer

C- Topography code of the International Classification of Diseases for Oncology, Second Edition (ICD-0, 1990)

cm centimeter

excl. excluding, exclusive

FIGO Federation Internationale de Gynecologie et d'Obstetrique

GE Gastroesophageal

GI Gastrointestinal

incl. including, inclusive

KUB Kidneys, Ureters, Bladder

L left

M- Morphology code of the International Classification of Diseases for Oncology, Second Edition (ICD-0, 1990)

mm millimeter

MSB Main Stem Bronchus

NOS Not Otherwise Specified

R right

SEER Surveillance, Epidemiology and End Results

TNM Primary Tumor, Regional Lymph Nodes, Distant Metastasis

< 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 '999999999' in the SEER Extent of Disease 1988 scheme.

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

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

In coding size of tumor, code the size given prior to radiation therapy for surgical patients pretreated by radiation therapy. Do NOT code size after radiation therapy is given.

Interpreting Ambiguous Terminology

- A. Tumor invasion "to", "into", "onto", or "encroaching upon" an organ or structure is to be interpreted as <u>involvement</u> whether the description is clinical or operative/pathological.
- B. "Probable", "suspected", "suspicious", "compatible with", or "consistent with" are to be interpreted as <u>involvement</u> by tumor.
- C. "Questionable", "possible", "suggests", or "equivocal" are NOT to be considered as evidence of <u>involvement</u> 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.
- E. "Fixation to another organ or tissue" or "fixed" should be interpreted as involvement of other organ or tissue.

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). 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 at time of resection of the primary is found to be larger than the excisional biopsy, code the size of the residual tumor.

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

Esophagus (C15.0-C15.5, C15.8-C15.9): Entire circumference Stomach (C16.0-C16.6, C16.8-C16.9): 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 (C34.0-C34.3, C34.8-C34.9): Diffuse, entire lobe or lung

Breast (C50.0-C50.6, C50.8-C50.9): Diffuse, widespread--3/4's or more of breast, inflammatory carcinoma

For the following sites, size is not applicable:

Hematopoietic neoplasms

Hodgkin's and non-Hodgkin's lymphoma; Kaposi's sarcoma

Immunoproliferative diseases

Mycosis fungoides of skin

Myeloproliferative diseases

Malignant melanoma of skin, vulva, penis, scrotum, and conjunctiva

Sezary's disease of skin

Unknown and ill-defined primary sites (C76.0-C76.5, C76.7-C76.8, C80.9, C42._ and C77._)

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

For Kaposi's sarcoma and lymphomas, SEER requires information on HIV/AIDS instead of size to be coded in this field.

For mycosis fungoides and Sezary's disease of skin, vulva, penis, and scrotum, SEER requires information on peripheral blood involvement 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.

<u>Determining Descriptive Tumor Size</u>

CENTIMETER EQUIVALENTS FOR DESCRIPTIVE TERMS

<u>Fruits</u>	<u>cm</u>	Miscellaneous Food	<u>cm</u>
Apple	7	Doughnut	9
Apricot	4	Egg	5
Cherry	2	Bantam	4
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		
0range	9	<u>Money</u>	
Peach	6		
Pear	9	Dime	1
Plum	3	Dollar (silver)	4
Tangerine	6	Dollar (half)	3
		Nickel	2
<u>Nuts</u>		Quarter	2
		Penny	1
Almond	3		
Chestnut	4	<u>Other</u>	
Chestnut (horse)	4		
Hazel	2	Ball (golf)	4
Hickory	3	Ball (ping-pong)	3
Peanut	1	Ball (tennis)	6
Pecan	3	Baseball	7
Walnut	3	Eraser on pencil	<1
		Fist	9
<u>Vegetables</u>		Marble	1
		Match (head)	<1
Bean	1	Microscopic	<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)
 - l centimeter (cm) = .394 inch (in)

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 <u>only</u> 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, <u>any</u> mention of lymph nodes is indicative of involvement.

When size of involved regional lymph nodes is required, code from pathology report. Code only the size of the largest <u>involved</u> node.

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 \underline{only} after an exhaustive search for more specific information.

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, immunoproliferative and myeloproliferative neoplasms, the brain, cerebral meninges, and other parts of the nervous system, and unknown or ill-defined primary sites which are coded 9999. (This is based on pathology information ONLY.)

NUMBER OF REGIONAL NODES

	<u>POSITIVE</u>		EXAMINED
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; not applicable	99	UNKNOWN if nodes were examined; not applicable

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; not applicable
Extension	99 - UNKNOWN; not applicable
Lymph Nodes	9 - UNKNOWN; not stated; not
	applicable
Pathology Review	9999 - UNKNOWN; not applicable

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

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-9590-9595, 9650-9698, 9702-9714) except for mycosis fungoides (M-9700) and Sezary's disease (M-9701) which have a separate scheme found under the skin site codes C44._.

KAPOSI'S SARCOMA and RETINOBLASTOMA

8

Kaposi's sarcoma (M-9140) and retinoblastoma (M-9510-9512) also have separate schemes based on morphology alone.

LIP, ORAL CAVITY, AND PHARYNX

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

Careful attention must be given to the use of the term "confined to mucosa" for lip, oral cavity, and pharynx.

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 is confined to the epithelium, in which case it is in situ, OR
- 2) if the tumor has penetrated the basement membrane to invade the lamina propria, in which case it is localized and is coded to invasion of the lamina propria.

The mucosa lining the oral cavity consists of:

The EPITHELIAL LAYER which borders on the lumen and 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 lip, oral cavity, and pharynx 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 these sites.

LIP, ORAL CAVITY, AND PHARYNX

{ 	L	IP AND ORAL	CAVITY		
 PRIMARY SITE) M 	UCOSA	 Submucosa 	MUSCULARIS PROPRIA	 serosa
 	 Epithelium 	: : Lamina : Propria :	 		
 Lip (COO)	 Yes 	: : Yes :		Yes	No
! Tongue (C01, C02)	 Yes 	B A Yes S E	Yes	Yes	No
 Gum (C03, C06.2)	Yes	E M Yes E N	1	No (No
 Floor of Mouth (C04) 	Yes 	T Yes : :	 Yes	Yes	No
Buccal Mucosa (C06.0-C06.1) 	Yes 	: Yes M E	Yes 	Yes	No
Hard Palate (C05.0) 	Yes 	M Yes B R	No 	No 	No
Soft Palate (C05.1-C05.2) 	Yes 	A Yes N E	Yes 	Yes 	No
Other Mouth (CO5.8-CO5.9, CO6.8-CO6.9) 	Yes 	: Yes : :	Yes	Yes 	No -

For lip, oral cavity, and pharynx, 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) C00.0-C00.6, C00.8-C00.9

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	<u><</u> 2	<u><</u> 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 st	tated	

EXTENSION

- 00 IN SITU: Noninvasive; intraepithelial
- 10 Invasive tumor confined to:
 Lamina propria
 Submucosa (superficial invasion)
 Vermilion surface
 Labial mucosa (inner lip)
 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 face/neck
- 80 FURTHER extension
- 85 Metastasis
- 99 UNKNOWN if extension or metastasis

Note: AJCC includes labial mucosa (C00.3-C00.5) with buccal mucosa (C06.0).

LIP (Vermilion or Labial Mucosa) C00.0-C00.6, C00.8-C00.9

LYMPH NODES

O No lymph node involvement ------REGIONAL Lymph Nodes Facial: Buccinator for upper lip Mandibular for lower lip Parotid: Infra-auricular/preauricular for upper lip Submandibular (submaxillary) Submental 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 <u>≤</u>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

(6/92)

Note: If laterality is not

specified, assume nodes are

ipsilateral.

BASE OF TONGUE, LINGUAL TONSIL CO1.9, CO2.4

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	<u>≤</u> 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 s	tated	

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
(CO1.9) with oropharynx (Cl0._).

BASE OF TONGUE, LINGUAL TONSIL C01.9, C02.4

0 No lymph node involvement

LYMPH NODES

	Submandibular (submaxillary)
	Submental 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 <u><</u> 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
DΙ	STANT Lymph Nodes
7	Other than above
-	
8	Lymph Nodes, NOS
9	UNKNOWN; not stated

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

ANTERIOR 2/3's of TONGUE, TIP, BORDER, AND TONGUE NOS C02.0-C02.3, C02.8-C02.9

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	<u>≤</u> 2	<u><</u> 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 st	tated	

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 TONGUE NOS C02.0-C02.3, C02.8-C02.9

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 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 is not specified, assume nodes are ipsilateral.

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	<u>≤</u> 2	<u>≤</u> 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 s	tated	

EXTENSION

- 00 IN SITU: Noninvasive; intraepithelial
- 10 Invasive tumor confined to mucoperiosteum (stroma)
- 30 Localized, NOS
- 50 Buccal mucosa (inner cheek)
 Labial mucosa (inner lip), lip

Upper gum only: Hard palate Soft palate

Lower gum/retromolar trigone only:

Floor of mouth Tongue

- 55 Subcutaneous soft tissue of face Facial muscle, NOS
- 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

0 No lymph node involvement

LYMPH NODES

REGIONAL Lymph Nodes
Facial: Mandibular Submandibular (submaxillary) Submental Retropharyngeal for upper gum Internal jugular (upper and lower deep cervical): jugulodigastric jugulo-omohyoid Cervical, NOS Regional lymph node(s), NOS
l 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 <u>≤</u> 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 is not specified, assume nodes are ipsilateral.

FLOOR OF MOUTH

C04.0-C04.1, C04.8-C04.9

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	<u>≤</u> 0.2	
	<u><</u> 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 st	tated	

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. pharyngoepiglottic and glossoepiglottic folds
- 70 Mandible
- 76 Skin of undersurface of chin/neck
- 80 FURTHER extension
- 85 Metastasis
- 99 UNKNOWN if extension or metastasis

FLOOR OF MOUTH C04.0-C04.1, C04.8-C04.9

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
l 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 <u>≤</u> 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 is not specified, assume nodes are ipsilateral.

21

C05.0

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	<u><</u> 2	<u>≤</u> 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 s	tated	

EXTENSION

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

LYMPH NODES

0 No lymph node involvement
REGIONAL Lymph Nodes
Submandibular (submaxillary) Submental
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 <u><</u> 6 cm
4 Ipsilateral, node size not stated
5 Bilateral and/or contralateral positive nodes ≤6 cm or size not stated
<pre>6 Any positive node(s), at least one >6 cm</pre>
DISTANT Lymph Nodes
7 Other than above
8 Lymph Nodes, NOS
9 UNKNOWN; not stated

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

SOFT PALATE, UVULA

C05.1-C05.2

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	<u><</u> 2	<u><</u> 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 st	tated	

EXTENSION

- 00 IN SITU: Noninvasive; intraepithelial
- 10 Invasive tumor on one side confined to:

 Lamina propria
 Submucosa
- 20 Musculature invaded
- 30 Localized, NOS
- 40 Tumor crosses midline
- 50 Hard palate
 Gum (gingiva), upper
 Buccal mucosa (inner cheek)
- 60 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 (C05.1) and uvula (C05.2) with oropharynx (C09._, C10._).

Note 2: Soft palate excludes nasopharyngeal (superior) surface of soft palate (Cll.3).

Note 3: Code C06.2, retromolar area, is included with gum (C03._).

LYMPH NODES

0 No lymph node involvement

-	
RE	GIONAL Lymph Nodes
	Submandibular (submaxillary) Submental
	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 <u>≤</u> 6 cm
4	Ipsilateral, node size not stated
5	Bilateral and/or contralateral
	positive nodes <u>≤</u> 6 cm or size
	not stated
6	Any positive node(s),
	at least one >6 cm
-	
DI	STANT Lymph Nodes
7	Other than above
-	
8	Lymph Nodes, NOS
9	UNKNOWN; not stated

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

OTHER MOUTH

C05.8-C05.9, C06.8-C06.9

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	<u><</u> 2	<u>≤</u> 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 s	tated	

EXTENSION

- 00 IN SITU: Noninvasive; intraepithelial
- 10 Invasive tumor confined to: Lamina propria Submucosa
- 20 Musculature
- 30 Localized, NOS
- 50 Adjacent oral cavity
- 60 Extension to oropharynx:
 Lateral pharyngeal wall
 Vallecula
 Lingual surface of epiglottis
 Inferior surface of soft palate
- 70 Extension to 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 C05.8-C05.9, C06.8-C06.9

LYMPH NODES

0 No lymph node involvement
REGIONAL Lymph Nodes
Submandibular (submaxillary) Submental
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 <u><</u> 6 cm
4 Ipsilateral, node size not stated
5 Bilateral and/or contralateral
positive nodes <u><</u> 6 cm or size not stated
not stated
<pre>6 Any positive node(s), at least one >6 cm</pre>
DISTANT Lymph Nodes
DISTART LYMPH ROGES
7 Other than above
8 Lymph Nodes, NOS

9 UNKNOWN; not stated

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

CHEEK (Buccal) MUCOSA, VESTIBULE C06.0-C06.1

SIZE OF PRIMARY TUMOR

mm

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

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

CM

	<u> </u>	<u>U111</u>	
002 003	<u><</u> 2 3	≤0.2 0.3	
009	9	0.9	
010	10	1.0	
• • •			
099	99	9.9	
100	100	10.0	
990	990+	99.0+	
000	M = 4 = 4	L_L_J	
999	Not st	tated	

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-0, C06.0 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 C06.0-C06.1

LYMPH NODES

0 No lymph node involvement
REGIONAL Lymph Nodes
Facial: Buccinator, mandibular Submandibular (submaxillary) Parotid: Preauricular, infra- auricular Submental 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 is not specified, assume nodes are ipsilateral.

PAROTID GLAND, OTHER MAJOR SALIVARY GLANDS

C07.9, C08.0-C08.1, C08.8-C08.9

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	<u>≤2</u>	<u>≤</u> 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 s	tated

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, 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

PAROTID GLAND, OTHER MAJOR SALIVARY GLANDS C07.9, C08.0-C08.1, C08.8-C08.9

LYMPH NODES

0 No lymph node involvement
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
l 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 <u><</u> 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

(6/92)

Note: If laterality is not
specified, assume nodes are

ipsilateral.

TONSIL, OROPHARYNX

C09.0-C09.1, C09.8-C09.9, C10.0-C10.4, C10.8-C10.9

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	<u>≤</u> 2	<u>≤</u> 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+	
770	3707	33.UT	
999	Not st	tatad	
フフフ	HUCS	cated	

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 OROPHAR-YNX, which includes the inferior surface of the soft palate and uvula. SEER codes soft palate and uvula to ICD-0, CO5.1 and CO5.2.

EXTENSION

- 00 IN SITU: Noninvasive; intraepithelial
- 10 Invasive tumor confined to one of the following subsites:
 Anterior wall (incl. vallecula and lingual (anterior) surface of epiglottis)
 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, or soft palate, NOS
- 41 Pyriform sinus (incl. hypopharynx, NOS)
- 42 Soft palate, superior (nasopharyngeal) surface Nasopharynx, NOS
- 50 Base of tongue
 Laryngeal (posterior) surface
 of epiglottis, or larynx, NOS
 Floor of mouth
 Gum (gingiva)
 Buccal mucosa (inner cheek)
- 55 Any of above WITH fixation
- 60 Prevertebral fascia or muscle Soft tissue of neck
- 70 Bone
 Extrinsic muscles of tongue:
 Mylohyoid, hyoglossus,
 styloglossus
- 80 FURTHER extension
- **85** Metastasis
- 99 UNKNOWN if extension or metastasi

TONSIL, OROPHARYNX

Note 1: If laterality is not

specified, assume nodes are

Note 2: AJCC includes base of tongue (CO1.9) with oro-

Note 3: AJCC includes lingual

(anterior) surface of epiglot-

tis (Cl0.1) with larynx

pharynx (C09._, C10._).

ipsilateral.

(C32._).

C09.0-C09.1, C09.8-C09.9, C10.0-C10.4, C10.8-C10.9

LYMPH NODES

O No lymph node involvement

REGIONAL Lymph Nodes

Retropharyngeal
Submandibular (submaxillary)
Submental
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</pre>
 - 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

NASOPHARYNX

C11.0-C11.3, C11.8-C11.9

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	<u><</u> 2	<u><</u> 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 st	tated	

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.

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)
- 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

NASOPHARYNX

C11.0-C11.3, C11.8-C11.9

LYMPH NODES

0 No lymph node involvement
REGIONAL Lymph Nodes
Retropharyngeal Submandibular (submaxillary) Submental Internal jugular (upper and lower deep cervical):
jugulodigastric
jugulo-omohyoid Cervical, NOS Regional lymph node(s), NOS
l 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
<pre>6 Any positive node(s), at least one >6 cm</pre>
DISTANT Lymph Nodes
7 Other than above
8 Lymph Nodes, NOS

9 UNKNOWN; not stated

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

PYRIFORM SINUS, HYPOPHARYNX, LARYNGOPHARYNX

C12.9, C13.0-C13.2, C13.8-C13.9, C14.1

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	<u>cm</u>	
002	<u><</u> 2	<u>≤</u> 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 s	tated	

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 (upper) 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

PYRIFORM SINUS, HYPOPHARYNX, LARYNGOPHARYNX C12.9, C13.0-C13.2, C13.8-C13.9, C14.1

LYMPH NODES

	0 No lymph node involvement
	REGIONAL Lymph Nodes
	Retropharyngeal Submandibular (submaxillary) Submental
Note : If laterality is not	Internal jugular (upper and lower deep cervical): jugulodigastric
specified, assume nodes are	jugulo-omohyoid
ipsilateral.	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
	<pre>6 Any positive node(s), at least one >6 cm</pre>
	DISTANT Lymph Nodes
	7 Other than above
	8 Lymph Nodes, NOS
	9 UNKNOWN; not stated

PHARYNX NOS AND OTHER ILL-DEFINED ORAL CAVITY SITES C14.0, C14.2, C14.8

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

	<u>mm</u>	<u>cm</u>	
002	<u><</u> 2	<u>≤</u> 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 st	tated	

EXTENSION

- 00 IN SITU: Noninvasive; intraepithelial
- 10 Invasive tumor confined to site of origin
- 30 Localized, NOS
- 40 More than one region of pharynx involved (oropharynx, nasopharynx, hypopharynx)
- 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 C14.0, C14.2, C14.8

0 No lymph node involvement

LYMPH NODES

REGIONAL Lymph Nodes
Submandibular (submaxillary)
Submental
Internal jugular (upper and
lower deep cervical):
jugulodigastric
jugulo-omohyoid
Retropharyngeal
Cervical, NOS
Regional lymph node(s), NOS
Regional Tymph Hode(3), No.
l 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 <u>≤</u> 6 cm
4 Ipsilateral, node size not stated
5 Bilateral and/or contralateral
positive nodes ≤6 cm or size
not stated
<pre>6 Any positive node(s),</pre>
at least one >6 cm
DISTANT Lymph Nodes
7 Other than above
To the than above
8 Lymph Nodes, NOS
O HANKAIOLIN
9 UNKNOWN; not stated

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

DIGESTIVE SYSTEM SITES

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

Careful attention must be given to the use 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 is confined to the epithelium, in which case it is in situ, **OR**
- 2) if the tumor has penetrated the basement membrane to invade the lamina propria, in which case it is localized and is coded to invasion of the lamina propria.

The mucosa of the digestive tract consists of:

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. It is found in the wall of the digestive tract from the esophagus to the anal canal.

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.

DIGESTIVE SYSTEM SITES

The SEROSA, the outermost layer covering most of the digestive tract, is a single layer of squamous epithelial cells, part of the visceral peritoneum. Just below the serosa (mesothelium) and sometimes considered part of the serosa, is a layer of connective tissue called the subserosa. The serosa and subserosa are present only in the peritonealized portions of the digestive tract. For the esophagus and in 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] [MUCO	SA		 SUB- <u> MUCOSA</u>	 MUSCULARIS <u>PROPRIA</u>	SEROSAI
1		1:1			I	I	i I
i	Epitheliu	ml: Lai	mina	Muscularis	İ	i	i
i	, _, 			Mucosae	J	i	i i
i	 	1.1	<u> </u>	11400340	<u>.</u> .	I	, ,
 Esophagus	Yes	IBI '	/es	Yes	' Yes	l Yes I	No I
(C15)	,	IAI		1	1		
1		ISI			i i	i i	
Stomach	Yes		es '	Yes	I Yes	l Yes	Yes
(C16)	, ,,,,	IMI		103	1	1 103	163
1 (010)	! 	IE!			1	1	
 Sm. Intestine	l Yes		es '	Yes	l Yes	l Yes	Yes
•	1 162	171	162	165	i ies	l les i	Tes
(C17)]]
10-1) 	:	,	V -	1		
Colon	Yes		es	Yes	Yes	Yes	Yes
(C18)		IEI			1	£ 1	
		[M]			1	! ,	
Rectosigmoid	Yes	. – .	es	Yes	Yes	Yes	Yes
(C19.9)		IRI			į.	į į	
1		IAI			1	1	l I
Rectum	Yes	• • • •	es	Yes	Yes	Yes	No I
(C20.9)		IEI	i		i	i i	1
1		1:1	I		1	!	1
<u></u>	<u> </u>	<u> </u>			L	<u> </u>	

ESOPHAGUS

C15.0-C15.5, C15.8-C15.9

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	Microsco	pic focus	or foci	only
	<u>mm</u>	<u>cm</u>		
002	<u><2</u>	<0.2		
003	3	0.3		
003	3	0.5		
• • •				
• • •				
009	9	0.9		
010	10	1.0		
099	99	9.9		
100	100	10.0		
990	990+	99.0+		
998	Entire	circumfere	ence	
999	Not sta	ated		

Anatomic Limits of Esophagus

CERVICAL ESOPHAGUS (C15.0): From the lower border of the cricoid cartilage to the thoracic inlet (suprasternal notch), about 18 cm from the incisors.

INTRATHORACIC ESOPHAGUS (C15.1-.5):

Upper thoracic portion (C15.3): From the thoracic inlet to the level of the tracheal bifurcation (18-24 cm)

Mid-thoracic portion (C15.4): From the tracheal bifurcation midway to the gastroesophageal (GE) junction (24-32 cm).

Lower thoracic portion (C15.5): From midway between the tracheal bifurcation and the gastroesophageal junction to the GE junction, including the abdominal esophagus (C15.2) between 32-40 cm.

EXTENSION

00 IN SITU: Noninvasive; intraepithelial

Invasive tumor confined to:

- 10 Mucosa, NOS (incl. intramucosal)
 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)

EXTENSION (cont'd)

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

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

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

1

C16.0-C16.6, C16.8-C16.9

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	<u>≤</u> 2	<u>≤</u> 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			espread; tis plas	or

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

EXTENSION

- 00 IN SITU: Noninvasive; intraepithelial
- 05 (Adeno)carcinoma in a polyp,

Invasive tumor confined to:

- 10 Mucosa, NOS (incl.
 intramucosal)
 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 through muscularis
 propria or muscularis, NOS
 Extension through wall, NOS
 Perimuscular tissue invaded
 (Sub)serosal 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)

NOS

60 Spleen
Transverse colon (incl.
flexures)
Liver
Diaphragm
Pancreas
Esophagus via serosa
Duodenum via serosa or NOS

Jejunum, ileum, small intestine,

999

Not stated

EXTENSION (cont'd)

- 70 Abdominal wall
 Retroperitoneum
 Kidney
 Adrenal gland
- 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
Gastroduodenal
Gastrocolic
Gastroepiploic, right or NOS
Gastrohepatic
Pyloric, incl. sub-/infrapyloric
Pancreaticoduodenal

Splenic:

Gastroepiploic, left Pancreaticolienal Peripancreatic Splenic hilar

Superior (L) gastric:

Lesser curvature Lesser omentum Gastropancreatic, left Gastric, left Paracardial; cardial Cardioesophageal

Perigastric, NOS Nodule(s) in perigastric fat

- 1 Perigastric nodes ≤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

C17.0-C17.3, C17.8-C17.9

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

	mm	<u>cm</u>
002	<u><</u> 2	<u>≤</u> 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 s	tated

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

EXTENSION

- 00 IN SITU: Noninvasive; intraepithelial
- 05 (Adeno)carcinoma in a polyp, noninvasive

Invasive tumor confined to:

- 10 Mucosa, NOS (incl.
 intramucosal)
 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 through muscularis
 propria or muscularis, NOS
 Extension through wall, NOS
 Perimuscular tissue invaded
 (Sub)serosal tissue/fat invaded
- 45 Adjacent connective tissue Mesentery, incl. mesenteric fat
- 50 Invasion of/through serosa (mesothelium)
- 55 (45) + (50)
- 60 **Duodenum**:

Extrahepatic bile ducts, incl. ampulla of Vater Pancreas Pancreatic duct

EXTENSION (cont'd)

65 **Duodenum**:

Transverse colon, hepatic flexure
Greater omentum;
omentum, NOS
Right or quadrate lobe of liver; 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

66 Duodenum:

Stomach

67 All small intestine sites:

Abdominal wall Retroperitoneum

68 All small intestine sites:

Small intestine via serosa

70 Jejunum and Ileum:

Bladder Uterus Ovary; fallopian tube

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

LYMPH NODES

Duodenum:

Hepatic:

Pancreaticoduodenal Infrapyloric Gastroduodenal

Jejunum and Ileum:

Posterior cecal (terminal ileum)
Ileocolic (terminal ileum)
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) C18.0-C18.9

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>	
002 003	<u>≤</u> 2 3	≤0.2 0.3	
	3	0.5	
• • •			
009	9	0.9	
010	10	1.0	
• • •			
• • •			
099	99	9.9	
100	100	10.0	
• • •			
990	990+	99.0+	
998		al/multiple polyposis (220/8221)	;
999	Not st	ated	

<u>Note</u>: Ignore intraluminal extension to adjacent segment(s) of colon/rectum; code depth of in- | vasion or extracolonic spread as indicated.

EXTENSION

- 00 IN SITU: Noninvasive; intraepithelial

Invasive tumor confined to:

- 10 Mucosa, NOS (incl.
 intramucosal)
 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 through muscularis
 propria or muscularis, NOS
 Extension through wall, NOS
 Perimuscular tissue invaded
 (Sub)serosal tissue/fat invaded
- 45 Extension to adjacent (connective) tissue:

Mesentery (incl. mesenteric fat, mesocolon)--all colon sites

Retroperitoneal fat--ascending and descending colon

Greater omentum; gastrocolic ligament--transverse colon/flexures

Pericolic fat--all colon sites

- 50 Invasion of/through serosa (mesothelium)
- 55 (45) + (50)
- 60 Greater omentum--cecum,appendix,
 ascending, descending and
 sigmoid colon
 Spleen--descending colon
 Pelvic wall--descending
 colon/sigmoid
 Liver, right lobe--ascending
 colon

COLON	(incl.	Flexures	and	Appendix:
C18.0-	C18.9			

EXTENSION (cont'd)

Transverse colon and flexures:

Stomach Spleen; liver Pancreas

Gallbladder/bile ducts

Kidney

All colon sites:

Small intestine

65 All colon sites:

Abdominal wall

Retroperitoneum (excl. fat)

66 Ureter/kidney

Right--ascending colon Left--descending colon

70 Cecum, appendix, ascending, descending, and sigmoid colon:

Uterus

Ovary; fallopian tube

75 All colon sites unless otherwise stated above:

Urinary bladder
Gallbladder
Adrenal gland
Diaphragm
Other segment(s) of colon
via serosa
Fistula to skin

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

LYMPH NODES

0 No lymph node involvement

REGIONAL Lymph Nodes

1 All colon subsites:

Epicolic (adjacent to bowel wall)

Paracolic/pericolic

Colic, NOS

Nodule(s) in pericolic fat

2 Cecum and Appendix:

Cecal, anterior, posterior, NOS

Ileocolic

Right colic

Ascending colon:

Ileocolic Right colic Middle colic

Transverse colon and flexures:

Middle colic

Right colic for **hepatic flexure**

only

Left colic for **splenic flexu**

Inferior mesenteric for **splenic** flexure only

Descending colon:

Left colic Sigmoid

Inferior mesenteric

Sigmoid:

Sigmoidal (sigmoid mesenteric)

Superior hemorrhoidal

Superior rectal

Inferior mesenteric

3 Mesenteric, NOS

Regional lymph node(s), NOS

DISTANT Lymph Nodes

7 Other than above, incl.

superior mesenteric

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

49

C19.9, C20.9

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	<u>≤</u> 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	Esmil:	ial/mul:	tiple polyposis		
,,0	Familial/multiple polyposis (M-8220/8221)				
999	Not st	tated			

EXTENSION

- 00 IN SITU: Noninvasive; intraepithelial

Invasive tumor confined to:

- 10 Mucosa, NOS (incl. intramucosal) 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 through muscularis
 propria or muscularis, NOS
 Extension through wall, NOS
 Perimuscular tissue invaded
 (Sub)serosal tissue/fat invaded
- 50 Invasion of/through serosa (mesothelium)
- 55 (45) + (50)

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

EXTENSION (cont'd) LYMPH NODES 60 Rectosigmoid: 0 No lymph node involvement Small intestine Cul de sac (rectouterine REGIONAL Lymph Nodes pouch) Pelvic wall 1 Rectosigmoid: Paracolic/pericolic Rectum: Perirectal Rectovesical fascia, male Nodule(s) in pericolic fat Bladder, male Prostate Rectum: Ductus deferens Perirectal Seminal vesicle(s) Nodule(s) in perirectal fat Cul de sac (rectouterine 2 Rectosigmoid: pouch) Hemorrhoidal, superior or Pelvic wall middle Skeletal muscle of pelvic Left colic (incl. colic, NOS) Superior rectal floor Sigmoidal (sigmoid mesenteric) 70 Rectosigmoid: Inferior mesenteric **Prostate** Uterus Rectum: Ovary; fallopian tube Sigmoidal I Bladder Sigmoid mesenteric Inferior mesenteric Ureter Hemorrhoidal, superior or Colon via serosa inferior Rectum: Sacral (lateral, presacral, Uterus sacral promontory (Gerota's), Bladder, female or NOS) Urethra Internal iliac (hypogastric) Bones of pelvis 3 Mesenteric, NOS Regional lymph node(s), NOS 80 FURTHER extension DISTANT Lymph Nodes 85 Metastasis 99 UNKNOWN if extension 7 Other than above or metastasis

_ . _ _

8 Lymph Nodes, NOS

9 UNKNOWN; not stated

ANAL CANAL, ANUS NOS, OTHER PARTS OF RECTUM C21.0-C21.2, C21.8

SIZE OF PRIMARY TUMOR

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

000	No	mass;	no	tumor	fo	und	
001	Mi	crosco	oic	focus	or	foci	only

	<u>mm</u>	<u>cm</u>	
002	<u>≤</u> 2	<u><</u> 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 st	tated	

EXTENSION

00 IN SITU: Noninvasive; intraepithelial

Invasive tumor confined to:

- 10 Mucosa, NOS (incl. intramucosal
- 11 Lamina propria
- 12 Muscularis mucosae
- 16 Submucosa (superficial invasion)
- 20 Muscularis propria (internal sphincter)
- 30 Localized, NOS
- 40 Rectal mucosa or submucosa
 Subcutaneous perianal tissue
 Perianal skin
 Skeletal muscles: Anal
 sphincter (external),
 levator ani
 Ischiorectal fat/tissue
- 60 Perineum Vulva
- 70 Bladder Urethra Vagina
- 75 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 C21.0-C21.2, C21.8

LYMPH NODES

0	No lymph node involvement
- RI	EGIONAL 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
- D:	STANT Lymph Nodes
7	Other than above
-	
8	Lymph Nodes, NOS
9	UNKNOWN; not stated

LIVER AND INTRAHEPATIC BILE DUCTS C22.0-C22.1

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	<u><</u> 2	<u><</u> 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 st	tated	

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
- 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)
 Extension to 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 Extrahepatic bile duct(s)
 Diaphragm
- 75 Parietal peritoneum
 Gallbladder
 Ligament(s): Falciform,
 coronary, hepatogastric,
 hepatoduodenal, triangular
 Lesser omentum
- 80 FURTHER extension
- 85 Metastasis
- 99 UNKNOWN if extension or metastasis

LIVER AND INTRAHEPATIC BILE DUCTS C22.0-C22.1

LYMPH NODES

0 No lymph node involvement
REGIONAL Lymph Nodes
<pre>1 Hepatic: Hepatic pedicle, in- ferior vena cava, hepatic ar- tery, porta hepatis (hilar) Regional lymph node(s), NOS</pre>
DISTANT Lymph Nodes
6 Cardiac Diaphragmatic: Pericardial Posterior mediastinal, incl. juxtaphrenic nodes Aortic (para-, peri-, lateral) Retroperitoneal, NOS
peripancreatic (near head of pancreas only) 7 Other than above
8 Lymph Nodes, NOS
9 UNKNOWN; not stated

GALLBLADDER, OTHER BILIARY, AND BILIARY NOS

C23.9, C24.8-C24.9

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

	mm	<u>cm</u>	
002	<u><</u> 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 s	tated	

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 Perimuscular connective tissue
- 50 Invasion of/through 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 code 62 and/or code 65, <u>OR</u>
 liver involvement with any
 organ above in code 62 and/or
 code 65
- 80 FURTHER extension
- 85 Metastasis
- 99 UNKNOWN if extension or metastasis

GALLBLADDER, OTHER BILIARY, AND BILIARY NOS C23.9, C24.8-C24.9

0 No lymph node involvement

LYMPH NODES

1	Cystic duct (node of the neck of the gallbladder)
	Pericholedochal (node around common bile duct)
	Hilar (in hilus of liverin
	hepatoduodenal ligament) Node of the foramen of Winslow
2	Periportal,
	Periduodenal
	Peripancreatic (near head of pancreas only)
3	Regional lymph node(s), NOS
5	Celiac
6	Mesenteric, superior
DΙ	STANT Lymph Nodes
7	Other than above
-	
8	Lymph Nodes, NOS
9	UNKNOWN: not stated

EXTRAHEPATIC BILE DUCT(S)

C24.0

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	<u>≤</u> 2	<u>≤</u> 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 st	tated	

EXTENSION

- 00 IN SITU: Noninvasive
- 20 Muscle wall (muscularis propria)
- 30 Localized, NOS
- 40 Periductal/perimuscular connective tissue
- 60 Duodenum
 Gallbladder
 Pancreas
 Liver, porta hepatis
- 65 Blood vessels: Portal vein,
 hepatic artery
 Stomach
 Colon
 Omentum
- 80 FURTHER extension
- 85 Metastasis
- 99 UNKNOWN if extension or metastasis

Note: Codes C24.8-C24.9, biliary tract, NOS, are included with gall-bladder, C23.9

EXTRAHEPATIC BILE DUCT(S) C24.0

LYMPH NODES

0	No lymph node involvement
RE	GIONAL 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	Periportal, Periduodenal Peripancreatic (near head of pancreas only)
3	Regional lymph node(s), NOS
5	Celiac
6 - DI	Mesenteric, superior
7	Other than above
-	
8	Lymph Nodes, NOS
9	UNKNOWN; not stated

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	<u>≤</u> 2	<u>≤</u> 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 s	tated	

EXTENSION

- 00 IN SITU: Noninvasive; intraepithelial
- 10 Invasive tumor confined to ampulla of Vater
- 30 Localized, NOS
- 40 Duodenum and/or distal common duct
- 50 Tumor invasion into pancreas, incl. pancreatic duct, ≤2 cm and/or common duct, ≤2 cm
- 55 Pancreas, NOS and/or common duct, NOS
- 60 Tumor invasion into
 pancreas >2 cm
 and/or common duct, >2 cm
- 65 Extrahepatic bile ducts
- 70 Other adjacent organs
- 80 FURTHER extension
- 85 Metastasis
- 99 UNKNOWN if extension or metastasis

1

AMPULLA OF VATER C24.1

LYMPH NODES

O 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

C25.0-C25.4

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	<u><</u> 2	<u><</u> 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 s	tated

Note: Islets of Langerhans are distributed throughout the pancreas, and, therefore, any extension code 00-85 can be used.

EXTENSION

- 00 IN SITU: Noninvasive
- 10 Confined to pancreas
- 30 Localized, NOS
- 40 Extension to peripancreatic tissue, NOS
 Fixation to adj. structures/NOS
- 44 Head of pancreas:

Extrahepatic bile ducts (incl. external right and left hepatic ducts, common hepatic duct, and common bile duct)
Ampulla of Vater
Duodenum

Body and/or tail of pancreas: Duodenum

48 Body and/or tail of pancreas:

Extrahepatic bile ducts (incl. external right and left hepatic ducts, common hepatic duct, and common bile duct)
Ampulla of Vater

50 Head of pancreas:

Adjacent stomach Stomach, NOS

Body and/or tail of pancreas: Spleen

52 **Head of pancreas**:

Body of stomach

54 Head of pancreas:

Major blood vessel(s): Hepatic,
pancreaticoduodenal and/or
gastroduodenal arteries,
superior mesenteric
artery/vein, portal vein
Transverse colon, incl. hepatic
flexure

56 Body and/or tail of pancreas:

Splenic flexure
Major blood vessel(s): Aortic,
celiac artery, hepatic
artery, splenic artery/vein,
superior mesenteric
artery/vein, portal vein

PANCREAS: HEAD, BODY, AND TAIL C25.0-C25.4

EXTENSION (cont'd)

62 Body and/or tail of pancreas: Stomach

64 Head of pancreas:

Large intestine (other than transverse colon incl. hepatic flexure) Spleen

Body and/or tail of pancreas:
Large intestine (other than splenic flexure)

72 Body and/or tail of pancreas: Left kidney; kidney, NOS; left ureter; left adrenal (suprarenal) gland; retroperitoneal soft tissue (retroperitoneal space)

74 Head of pancreas:

Peritoneum, mesentery,
mesocolon, mesenteric fat
Greater/lesser omentum

Body and/or tail of pancreas:

Ileum and jejunum
Peritoneum, mesentery,
mesocolon, mesenteric fat

- 76 Liver (incl. porta hepatis);
 gallbladder
- 78 **Head of pancreas**: Kidney; ureter; adrenal gland; retroperitoneum; jejunum; ileum

Body and/or tail of pancreas: Right kidney/right ureter; right adrenal gland Diaphragm

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

LYMPH NODES

- O No lymph node involvement
 - 1 REGIONAL Lymph Nodes

Peripancreatic
Hepatic
Infrapyloric (head only)
Subpyloric (head only)
Celiac (head only)

Superior mesenteric
Pancreaticolienal (body and tail
only)
Splenic (body and tail only)
Retroperitoneal
Lateral aortic

Regional lymph node(s), NOS

- - - **-** - - - - - - - - -

- 7 Other than above
- 8 Lymph Nodes, NOS

DISTANT Lymph Nodes

9 UNKNOWN; not stated

PANCREAS: OTHER AND UNSPECIFIED

C25.7-C25.9

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	<u>≤</u> 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 st	tated	
777	110 (5	cateu	

EXTENSION

- 00 IN SITU: Noninvasive
- 10 Invasive tumor confined to pancreas
- 30 Localized, NOS
- 40 Peripancreatic tissue
- 45 Duodenum
 Bile ducts
 Ampulla of Vater
- 50 Stomach
 Spleen
 Colon
 Adjacent large vessels
- 80 FURTHER extension
- 85 Metastasis
- 99 UNKNOWN if extension or metastasis

PANCREAS: OTHER AND UNSPECIFIED C25.7-C25.9

LYMPH NODES

OTHER AND ILL-DEFINED DIGESTIVE ORGANS

C26.0, C26.8-C26.9

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

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

OTHER AND ILL-DEFINED DIGESTIVE ORGANS C26.0, C26.8-C26.9

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 AND MIDDLE EAR

C30.0-C30.1

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

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

NASAL CAVITY AND MIDDLE EAR C30.0-C30.1

LYMPH NODES

9 UNKNOWN; not stated

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	<u><</u> 2	<u><</u> 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 s	tated	

- 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
- 65 Invasion of maxilla, NOS
- 70 Nasopharynx
 Ethmoid sinus, posterior
 Sphenoid sinus
 Palate, soft
 Base of skull
 Cribriform 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
- RE	GIONAL Lymph Nodes
	Submental Submandibular (submaxillary) Internal jugular (upper and
	<pre>lower deep cervical): jugulodigastric jugulo-omohyoid</pre>
	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
DIS	STANT Lymph Nodes
7	Other than above
8	Lymph Nodes, NOS

9 UNKNOWN; not stated

ACCESSORY (Paranasal) SINUSES

(excl. Maxillary Sinus) C31.1-C31.3, C31.8-C31.9

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	<u>≤</u> 2	<u>≤</u> 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 s	tated

- 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 invaded
 Destruction of bony wall of sinus
- 50 Palate
 Nasal cavity (floor, septum,
 turbinates)
- 60 Bone: Orbital structures, facial bones, pterygoid fossa, zygoma, maxilla
- 70 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 Sinus) C31.1-C31.3, C31.8-C31.9

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

C32.0-C32.3, C32.8-C32.9

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>	
002 003	<u><</u> 2 3	≤0.2 0.3	
	Ū	0.0	
009	9	0.9	
010	10	1.0	
 099	99	9.9	
100	100	10.0	
	0001	00.01	
990	990+	99.0+	
999	Not s	tated	

Note: AJCC includes lingual
(anterior) surface of epiglottis (C10.1) with larynx (C32._).

EXTENSION

- 00 IN SITU: Noninvasive
- 10 Invasive tumor confined to:
 Supraglottis (one subsite):
 i.e., laryngeal (posterior)
 surface of epiglottis,
 aryepiglottic fold,
 arytenoid cartilage,
 or ventricular band (false cord)

Subglottis

- 11 One vocal cord (glottic tumor)
- 12 Both vocal cords (glottic tumor)
- 20 Tumor involves: More than one subsite of **supraglottis**
- 30 Tumor involves adjacent region(s) of larvnx
- 35 Impaired vocal cord mobility
 (glottic tumor)
- 40 Tumor limited to larynx WITH vocal cord fixation
- 50 Localized, NOS
- 60 Pre-epiglottic tissues
 Postcricoid area
 Pyriform sinus
 Hypopharynx, NOS
 Vallecula
 Base of tongue
- 70 Extension to/through thyroid or cricoid cartilage and/or oropharynx, cervical esophagus, soft tissues of neck, extrinsic (strap) muscles, skin
- 80 FURTHER extension
- 85 Metastasis
- 99 UNKNOWN if extension or metastasis

LARYNX C32.0-C32.3, C32.8-C32.9

LYMPH NODES

0 No lymph node involvement
REGIONAL Lymph Nodes (incl. con- tralateral or bilateral nodes)
Internal jugular (upper and lower deep cervical) jugulodigastric
jugulo-omohyoid Anterior cervical: Prelaryngeal, pretracheal, paratracheal, laterotracheal (recurrent laryngeal)
Submandibular (submaxillary) Submental 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 <u>≤</u> 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
7 Other than above
8 Lymph Nodes, NOS
9 UNKNOWN; not stated

(6/92)

Note: If laterality is not specified, assume nodes are

ipsilateral.

C33.9

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

999 Not stated

- 00 IN SITU: Noninvasive
- 10 Invasive tumor confined to trachea
- 30 Localized, NOS
- 40 Adjacent connective tissue
- 60 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
•	Jionan Ijmpii maas
_	
	· - • • • • • • • • • • • • • • • • • •
_	
×	lymph Nodes, NAS

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

BRONCHUS AND LUNG

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

SIZE OF PRIMARY TUMOR

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

- 000 No primary tumor found
- 001 Microscopic focus or foci only
- 002 Malignant cells present in bronchopulmonary secretions

	mm	<u>cm</u>	
003	<u>≤</u> 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, segmental resection, or wedge resection is
- 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/adenopathy, assume that it is mediastinal 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)
- 25 Primary confined to the carina |
- 30 Localized, NOS
- 40 Extension to:
 Pleura, visceral or 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

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.

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EXTENSION (cont'd)

- 70 Carina; trachea; esophagus Mediastinum, extrapulmonary or NOS Major blood vessel(s): Pulmonary artery or vein; superior vena cava (SVC syndrome); aorta; azygos
 - vein Nerve(s):

Recurrent laryngeal (vocal cord paralysis); vagus; phrenic; cervical sympathetic (Horner's syndrome)

- 71 Heart Visceral pericardium
- 72 Malignant pleural effusion Pleural effusion, NOS
- 73 Adjacent rib
- 75 Sternum
 Vertebra(e)
 Skeletal muscle
 Skin of chest
- 78 Contralateral lung Contralateral MSB
- 80 FURTHER extension
- 85 Metastasis
- 99 UNKNOWN if extension or metastasis

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

LYMPH NODES

- O No lymph node involvement

 REGIONAL Lymph Nodes (Ipsilateral)
- 1 Intrapulmonary (incl.
 interlobar, lobar,
 segmental)

Hilar (proximal lobar)
Peribronchial

2 Subcarinal

Carinal
Mediastinal, anterior,
posterior, NOS
Peri/paratracheal (incl.
tracheobronchial,

lower peritracheal, azygos)

Pre- and retrotracheal

(incl. precarinal)
Peri/paraesophageal
Aortic (above diaphragm) (incl.

peri/para-aortic, subaortic, |
 aortico-pulmonary window, |
 ascending aorta or phrenic) |
Pulmonary ligament |

Pericardial

- 5 Regional lymph node(s), NOS
- 6 Contralateral hilar or mediastinal (incl. bilateral)
 Supraclavicular (transverse cervical), ipsilateral or contralateral
 Scalene, ipsilateral or contralateral

DISTANT Lymph Nodes

7 Other than above (incl. cervical neck nodes)

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

Note 8: AJCC (TNM) classifies the lymph nodes in code 6 to N3.

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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	<u><</u> 2	<u><</u> 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 st	tated	

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

HEART, MEDIASTINUM C38.0-C38.3, C38.8

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LYMPH NODES

O No lymph node involvement

REGIONAL Lymph Nodes

DISTANT Lymph Nodes

Lymph Nodes, NOS

9 UNKNOWN; not stated

C38.4

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	<u><</u> 2	<u>≤</u> 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 s	tated	

- 10 Invasive tumor (mesothelioma) confined to pleura
- 20 Mesothelioma WITH nodule(s) beneath visceral pleural surface
- 30 Localized, NOS
- 40 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; pleural effusion
- 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

OTHER AND ILL-DEFINED RESPIRATORY SITES AND INTRATHORACIC ORGANS C39.0, C39.8-C39.9

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>	
002 003	<u><</u> 2 3	≤0.2 0.3	
• • •			
009	9	0.9	
010	10	1.0	
• • •			
099	99	9.9	
100	100	10.0	
• • •			
990	990+	99.0+	
999	Not st	tated	

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

OTHER AND ILL-DEFINED RESPIRATORY SITES AND INTRATHORACIC ORGANS C39.0, C39.8-C39.9

LYMPH NODES

0	No lymph node involvement
-	
1	REGIONAL Lymph Nodes
-	
7	DISTANT Lymph Nodes
-	
8	Lymph Nodes, NOS

9 UNKNOWN; not stated

BONES, JOINTS, AND ARTICULAR CARTILAGE

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

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	<u><</u> 2	<u>≤</u> 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 s	tated	

- 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 skeletal muscle(s)
- 60 Adjacent Bone
- 70 Skin
- 80 FURTHER extension
- 85 Metastasis
- 99 UNKNOWN if extension or metastasis

BONES, JOINTS, AND ARTICULAR CARTILAGE C40.0-C40.3, C40.8-C40.9, C41.0-C41.4, C41.8-C41.9

9 UNKNOWN; not stated

LYMPH NODES

0 - 1	No lymph node involvement
- 7	DISTANT Lymph Nodes
-	
8	Lymph Nodes, NOS

SKIN (excl. Malignant Melanoma, Kaposi's Sarcoma, Mycosis Fungoides, Sezary's Disease, and Other Lymphomas) C44.0-C44.9

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	<u>cm</u>	
002	<u>≤</u> 2	<u><</u> 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 s	tated	

EXTENSION

- 00 IN SITU: Noninvasive; intraepidermal; Bowen's disease
- 10 Lesion(s) confined to dermis
 For eyelid: Minimal infiltration of dermis (not invading
 tarsal plate)
- 20 **For eyelid**: Infiltrates deeply into dermis (invading tarsal plate)
- 25 For eyelid: At eyelid margin
- 30 Involves full eyelid thickness
- 40 Localized, NOS
- 50 Subcutaneous tissue (through entire dermis)
- 60 Adjacent structures for eyelid, incl. orbit
- 70 Underlying cartilage, bone, skeletal muscle
- 75 Metastatic skin lesion(s)
- 80 FURTHER extension
- 85 Metastasis
- 99 UNKNOWN if extension or metastasis

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

Note 2: Skin ulceration does not alter the Extent of Disease classification.

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

SKIN (excl. Malignant Melanoma, Kaposi's Sarcoma, Mycosis Fungoides, Sezary's Disease, and Other Lymphomas) C44.0-C44.9

LYMPH NODES

0 No lymph node involvement

1 REGIONAL by primary site (bilateral or contralateral for head, neck, trunk)

<u>Head and Neck</u> - All subsites: Cervical

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, fa cial, submental, subman dibular

Scalp/neck:

Preauricular, occipital, spinal accessory (posterior 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

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

C44.0-C44.9, C51.0-C51.2, C51.8-C51.9, C60.0-C60.1, C60.8-C60.9, C63.2 (M-8720-8790)

MEASURED THICKNESS (Depth)* OF TUMOR (Breslow's measurement)

Record Actual Measurement (in mm) from Pathology Department

000 No mass; no tumor found

	11011
001	
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

mm

*Thickness, NOT size, is coded.

Note: For melanoma of sites other than those above, use site-specific schemes.

- 00 IN SITU: Noninvasive;
 intraepithelial
 Clark's level I
 Basement membrane of the
 epidermis is intact.
- 10 Papillary dermis invaded Clark's level II
- 11 (10) WITH ulceration
- 20 Papillary-reticular dermal interface invaded Clark's level III
- 21 (20) WITH ulceration
- 30 Reticular dermis invaded Clark's level IV
- 31 (30) WITH ulceration
- 40 Skin/dermis, NOS Localized, NOS
- 41 (40) WITH ulceration
- 50 Subcutaneous tissue invaded (through entire dermis)
 Clark's level V
- 51 (50) WITH ulceration
- 60 Satellite nodule(s), NOS
- 62 Satellite nodule(s), ≤2 cm from primary tumor
- 64 (50-51) plus (60) or (62)
- 70 Underlying cartilage, bone, skeletal muscle
- 80 FURTHER extension
- 85 Metastasis to skin or subcutaneous tissue beyond regional lymph nodes
- 87 Visceral metastasis; metastasis, NOS
- 99 UNKNOWN if extension or metastasis

MALIGNANT MELANOMA OF SKIN, VULVA, PENIS, SCROTUM

C44.0-C44.9, C51.0-C51.2, C51.8-C51.9, C60.0-C60.1, C60.8-C60.9, C63.2 (M-8720-8790)

LYMPH NODES

0 No lymph node involvement

REGIONAL by primary site (bilateral or contralateral for head, neck, trunk)

<u>Head and Neck</u> - All subsites: Cervical

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

<u>All sites</u>

Regional, NOS

- 1 Lymph node(s) metastasis ≤3 cm
- 2 Lymph node(s) 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, VULVA, PENIS, SCROTUM C44.0-C44.9, C51.0-C51.2, C51.8-C51.9, C60.0-C60.1, C60.8-C60.9, C63.2 (M-9700-9701)

PERIPHERAL BLOOD INVOLVEMENT

EXTENSION

000 No peripheral blood involvement

Atypical circulating cells in peripheral blood:

001 <5% 002 >5%

92

003 % not stated

999 Not applicable

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

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, no tumors

30 Skin involvement, NOS: extent not stated, no tumors 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, extranodal) involvement (other than peripheral blood)

99 UNKNOWN; not stated

Source: Developed by the Mycosis Fungoides Cooperative Group

MYCOSIS FUNGOIDES AND SEZARY'S DISEASE OF SKIN, VULVA, PENIS, SCROTUM C44.0-C44.9, C51.0-C51.2, C51.8-C51.9, C60.0-C60.1, C60.8-C60.9, C63.2 (M-9700-9701)

LYMPH NODES

0 No lymph node involvement (No clinical adenopathy and either pathologically negative or no pathological statement)

Lymph Nodes

- 1 Clinically enlarged palpable lymph node(s) (adenopathy), and either pathologically negative nodes or no pathological statement
- 2 No clinically enlarged palpable
 lymph nodes(s) (adenopathy);
 pathologically positive
 lymph node(s)
- 3 Both clinically enlarged palpable lymph node(s) (adenopathy) and pathologically positive lymph nodes

.

9 UNKNOWN; not stated

PERIPHERAL NERVES AND AUTONOMIC NERVOUS SYSTEM; CONNECTIVE, SUBCUTANEOUS, AND OTHER SOFT TISSUES

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

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>
002 003	<u>≤</u> 2 3	≤0.2 0.3
	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

<u>EXTENSION</u>

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

PERIPHERAL NERVES AND AUTONOMIC NERVOUS SYSTEM; CONNECTIVE, SUBCUTANEOUS, AND OTHER SOFT TISSUES

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

LYMPH NODES

0 No lymph node involvement

1 REGIONAL by primary site (bilateral or contralateral for head, neck, trunk)

<u>Head and Neck</u> - All subsites: Cervical

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 (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

All Sites

Regional lymph node(s), NOS

.

DISTANT Lymph Nodes

7 Other than above

_ _

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

RETROPERITONEUM AND PERITONEUM

C48.0-C48.2, C48.8

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>
002 003	<u>≤</u> 2 3	<u>≤</u> 0.2 0.3
• • •		
• • •		
009	9	0.9
010	10	1.0
099	99	9.9
100	100	10.0
990	990+	99.0+
999	Not st	tated

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

RETROPERITONEUM AND PERITONEUM C48.0-C48.2, C48.8

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

C50.0-C50.6, C50.8-C50.9

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	<u>≤</u> 3	<u>≤</u> 0.3	
009	9	0.9	
010	10	1.0	
099	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 (WITHOUT 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	Behavior code
code is:	must be:
00	2
05	2 or 3
10+	3

BREAST C50.0-C50.6, C50.8-C50.9

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

O 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

Infraclavicular
Intramammary
Nodule(s) in axillary fat

Size of largest metastasis¹ in axillary node(s), ipsilateral (codes 1-4):

- 1 Micrometastasis (≤0.2 cm)
- 2 >0.2-<2.0 cm, no extension beyond capsule</pre>
- 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
 Supraclavicular (transverse
 cervical)
 Other than above

9 UNKNOWN; not stated

¹Effective date January 1, 1992 diagnoses

VULVA (incl. Skin of Vulva)
(excl. Malignant Melanoma, Kaposi's Sarcoma,
Mycosis Fungoides, Sezary's Disease, and Other Lymphomas)
C51.0-C51.2, C51.8-C51.9

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	<u><</u> 2	<u>≤</u> 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 st	tated	

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
 Perianal skin
 Anus
 FIGO Stage III
- 70 Rectal mucosa Perineal body
- 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 metastasis

Note 1: Melanoma (M-8720-8790) of vulva is included in the melanoma scheme.

Note 2:Mycosis fungoides (M-9700) and Sezary's disease (M-9701) of vulva are included in the mycosis fungoides scheme.

VULVA (incl. Skin of Vulva)
(excl. Malignant Melanoma, Kaposi's Sarcoma,
Mycosis Fungoides, Sezary's Disease, and Other Lymphomas)
C51.0-C51.2, C51.8-C51.9

O No lymph node involvement
REGIONAL Lymph Nodes (incl. con- tralateral or bilateral)
<pre>1 Superficial inguinal (femoral) Deep inguinal, Rosenmuller's or Cloquet's node Regional lymph nodes, NOS</pre>
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

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	<u><</u> 2	<u><</u> 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 st	tated	

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
 Rectal wall or NOS
 Cul de sac (rectouterine pouch)
 FIGO Stage II
- 60 Extension to pelvic wall FIGO Stage III
- 70 Extension to bladder or rectal mucosa FIGO Stage IVA
- 80 Extension beyond true pelvis
 Extension to urethra
 FIGO Stage IVA, not further
 specified
- 85 Metastasis FIGO Stage IVB
- 99 UNKNOWN if extension or metastasis

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

0 No lymph node involvement
REGIONAL Lymph Nodes
Upper two-thirds of vagina:
<pre>Pelvic lymph nodes: Iliac: Common</pre>
Lower third of vagina:
2 Ipsilateral: Inguinal Femoral
3 Bilateral: Inguinal Femoral
Both parts of vagina:
5 Regional lymph node(s), unknown whether primary is 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

CERVIX UTERI

C53.0-C53.1, C53.8-C53.9

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	<u><</u> 2	<u>≤</u> 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 s	tated	

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 as 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.

EXTENSION

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

Ol CIN (Cervical intraepithelial neoplasia) Grade III

11 Minimal microscopic stromal
 invasion
 FIGO Stage IA1

12 "Microinvasion"

Tumor WITH invasive component

≤5 mm in depth, taken from
the base of the epithelium,
and ≤7 mm in horizontal spread
FIGO Stage IA2

20 Invasive cancer confined to cervix and tumor larger than that in code 12 FIGO Stage IB

30 Localized, NOS; confined to cervix uteri or uterus, NOS

31 FIGO Stage I, not further specified

35 Corpus uteri

40 Extension to:
 Upper 2/3's of vagina
 (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,
 cardial
 FIGO Stage IIB

CERVIX UTERI

C53.0-C53.1, C53.8-C53.9

EXTENSION (cont'd)

- 60 Extension to:
 - Lower 1/3 of vagina; vulva Rectal and/or bladder wall l or NOS
 Bullous edema of bladder mucosa
 Ureter, intra- and extramural
 FIGO Stage IIIA
- 65 Extension to:

Pelvic wall(s)
Hydronephrosis or
nonfunctioning kidney
(except if other cause)
FIGO Stage IIIB

- 70 Extension to rectal or bladder <u>mucosa</u>
 FIGO Stage IVA
- 80 FURTHER extension beyond true pelvis
 FIGO Stage IVA, not further specified
- 85 Metastasis FIGO Stage IVB
- metastasis

LYMPH NODES

- 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)

Regional lymph node(s), NOS

DISTANT Lymph Nodes

- 80 FURTHER extension beyond true 6 Aortic (para-, peri-, lateral)
 - 7 Other than above

- 8 Lymph Nodes, NOS
- 99 UNKNOWN if extension or 9 UNKNOWN; not stated

CORPUS UTERI

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

Careful attention must be given to the use of the term "confined to endometrium" for corpus uteri.

- 1) Determine if the tumor is confined to the columnar epithelium, in which case it is in situ, **OR**
- 2) if the tumor has penetrated the basement membrane to invade the stroma (lamina propria), in which case it is localized and is coded to invasion of the stroma.

The endometrium (mucosa) consists of:

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	 ENDOME 	TRIUM (mucosa)	 MYOMETRIUM (3 layers)	•
	Columnar Epithelium	B A Stroma S (lamina propr E _ :	ia) 	
Corpus Uteri (C54)	Yes 	M Yes E M :	Yes 	Yes

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	<u>≤</u> 2	<u>≤</u> 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 st	tated	

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 as 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 (stroma)

Extension to:

12 Myometrium--inner half
13 Myometrium--outer half

13 Myometrium--outer h
14 Myometrium--NOS

15 Serosa

Sounding of uterine cavity is ≤ 8.0 cm in length

20 FIGO Stage IA not further specified
21 Confined to endometrium

21 Confined to endometrium (stroma)

Extension to:

- 22 Myometrium--inner half
- 23 Myometrium--outer half
- 24 Myometrium--NOS
- 25 Serosa

Sounding of uterine cavity is >8.0 cm in length

30 FIGO Stage IB not further specified

Confined to endometrium (stroma)

Extension to:

- 32 Myometrium--inner half
- 33 Myometrium--outer half
- 34 Myometrium--NOS
- 35 Serosa
- 40 Localized, NOS
- 50 Cervix uteri, incl. endocervix invaded FIGO Stage II

EXTENSION (cont'd)

- 60 Extension within true pelvis: 0 No lymph node involvement Parametrium Ligaments: Broad, round, uterosacral Pelvic wall(s) Ovary(ies) and/or fallopian Rectal and/or bladder wall or NOS Vagina FIGO Stage III
- 70 Extension to rectal or bladder mucosa FIGO Stage IVA
- 80 Extension beyond true pelvis FIGO Stage IVA, not further specified
- 85 Metastasis FIGO Stage IVB
- 99 UNKNOWN if extension or metastasis

LYMPH NODES

- _ _ . _ _ _ . _ _ _ _ . _ . _
- REGIONAL Lymph Nodes
- 1 Parametrial Paracervical 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)

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

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	<u>≤</u> 2	<u>≤</u> 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 st	tatad	
フフブ	NOT S	lateu	

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 limited 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(s) ruptured or one or both ovaries involved FIGO Stage I, not further specified
- 40 Tumor limited to ovary(ies),
 capsule(s) ruptured or tumor
 on ovarian surface
 FIGO Stage IC
- 41 Tumor limited to ovary(ies) WITH malignant cells in ascites or peritoneal washings FIGO Stage IC
- 42 (40) plus (41) FIGO Stage IC, not further specified
- 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)

- 65 FIGO Stage II, not further specified
- 70 Microscopic peritoneal implants
 beyond 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
- 75 Peritoneal implants, NOS FIGO Stage III, not further specified
- 80 FURTHER extension
- 85 Metastasis, including:
 Liver parenchymal metastasis
 Pleural fluid (positive
 cytology)
 FIGO Stage IV
- 99 UNKNOWN if extension or metastasis

Note 4: If implants are mentioned, determine whether they are in the pelvis or in the abdomen and code appropriately (60-62) or (70-72). If the location is not specified, code as outside the pelvis (70-72 or 75).

LYMPH NODES

- 2 Aortic (para-, peri-, lateral) Retroperitoneal, NOS
- 3 Inguinal
- 4 (2) plus (1) and/or (3)
- 7 Other than above
- 8 Lymph Nodes, NOS
- 9 UNKNOWN; not stated

FALLOPIAN TUBE, BROAD AND ROUND LIGAMENTS, PARAMETRIUM, UTERINE ADNEXA C57.0-C57.4

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	<u>≤</u> 2	<u>≤</u> 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 s	tated	

EXTENSION

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

0	No lymph node involvement
RE	GIONAL Lymph Nodes
1	<pre>Iliac: Common</pre>
2	Aortic (para-, peri-, lateral) Retroperitoneal, NOS
3	Inguinal
4	(2) plus (1) and/or (3)
5	Regional Lymph Nodes, NOS
DIS	STANT Lymph Nodes
7	Other than above
8	Lymph Nodes, NOS
9	UNKNOWN; not stated

OTHER AND UNSPECIFIED FEMALE GENITAL ORGANS

C57.7-C57.9

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	<u><</u> 2	<u>≤</u> 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 Adjacent connective tissue
- 60 Adjacent organs/structures
- 80 FURTHER extension
- 85 Metastasis
- 99 UNKNOWN if extension or metastasis

OTHER AND UNSPECIFIED FEMALE GENITAL ORGANS C57.7-C57.9

LYMPH NODES

0	No lymph node involvement	
-		
1	REGIONAL Lymph Nodes	
_		
7	DISTANT Lymph Nodes	
-		
3	Lymph Nodes, NOS	

9 UNKNOWN; not stated

PENIS (excl. Body of Penis) (excl. Malignant Melanoma, Kaposi's Sarcoma, Mycosis Fungoides, Sezary's Disease, and Other Lymphomas)
C60.0-C60.1, C60.8-C60.9

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	<u><</u> 2	<u>≤</u> 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 st	tated	

EXTENSION

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

Note 1: Melanoma (M-8720-8790) of penis is included in the melanoma scheme.

Note 2: Mycosis fungoides (M-9700) or Sezary's disease (M-9701) of penis is included in the mycosis fungoides scheme.

PENIS (excl. Body of Penis) (excl. Malignant Melanoma, Kaposi's Sarcoma, Mycosis Fungoides, Sezary's Disease, and Other Lymphomas)
C60.0-C60.1, C60.8-C60.9

0 No lymph node involvement
REGIONAL Lymph Nodes
<pre>1 SINGLE superficial inguinal (femoral)</pre>
<pre>2 Multiple OR bilateral superficial inguinal (femoral)</pre>
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, OTHER AND UNSPECIFIED MALE GENITAL ORGANS

(excl. Malignant Melanoma, Kaposi's Sarcoma, Mycosis
Fungoides, Sezary's Disease, and Other Lymphomas of Scrotum)
C60.2, C63.0-C63.2, C63.7-C63.9

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

EXTENSION

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

Note 1: Melanoma (M-8720-8790) of scrotum only is included in the melanoma scheme.

Note 2: Mycosis fungoides (M-9700) or Sezary's disease (M-9701) of scrotum only is included in the mycosis fungoides scheme.

BODY OF PENIS, OTHER AND UNSPECIFIED MALE GENITAL ORGANS

(excl. Malignant Melanoma, Kaposi's Sarcoma, Mycosis Fungoides, Sezary's Disease, and Other Lymphomas of Scrotum) C60.2, C63.0-C63.2, C63.7-C63.9

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 Pelvic, NOS Regional lymph node(s), NOS
DISTANT Lymph Nodes
7 Other than above
8 Lymph Nodes, NOS
9 UNKNOWN; not stated

C61.9

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	<u>≤</u> 2	<u>≤</u> 0.2	
003	3	0.3	
003	3	0.5	
• • •			
• • •			
009	9	0.9	
010	10	1.0	
099	99	9.9	
100	100	10.0	
990	990+	99.0+	
999	Not sta	ated	

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 as 70.

Note 3: If D1-D2 is based on involvement of lymph nodes only, code under lymph nodes and not extension.

Note 4: B can be further classified: B1, Small, discrete nodule(s) ≤1.5 cm, and B2 Nodule(s) >1.5 cm or in more than one lobe.

Source: The American Urological Association Staging System (A-D)

EXTENSION

00 IN SITU: Noninvasive; intraepithelial

Incidentally found microscopic carcinoma (latent)

- 10 Number of foci not specified (A)
- 11 ≤3 microscopic foci (Al Focal)
- 20 Palpable nodule(s) confined to prostate (intracapsular)-- one lobe (B)
- 25 Multiple nodules confined to prostate (intracapsular)-more than one lobe (B)
- 30 Localized, NOS; confined to prostate, NOS (B, not further specified)
- 40 Invasion of prostatic capsule (C1)
- 50 Extension to periprostatic
 tissue (C1):
 Extracapsular extension
 (beyond prostatic capsule)
 Extraprostatic urethra
 (membranous)
 Bladder neck and/or
 prostatic apex
 Through capsule, NOS
- 55 Extension to seminal vesicle(s)
 (C2)
- 56 Extension to periprostatic tissue, NOS (C, not further specified)
- 60 Extension to or fixation of other adjacent structures:
 Rectovesical (Denonvilliers') fascia
 Bladder, NOS; ureter(s)
 Rectum
 Skeletal muscle (levatorani)
 Fixation, NOS

EXTENSION (cont'd)

- 70 Pelvic bone Pelvic wall(s)
- 80 FURTHER extension to bone, soft tissue or other organs (D2)
- 85 Metastasis (D2)
 D, not further specified
- 99 UNKNOWN if extension or metastasis

0 No lymph node involvement
REGIONAL Lymph Nodes (incl. con- tralateral or bilateral nodes)
Periprostatic Iliac: Internal (hypogastric):
Regional lymph node(s), NOS
l Single lymph node ≤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
<pre>6 Aortic (para-, peri-, lateral, lumbar) Retroperitoneal, NOS Common iliac Inguinal, superficial (femoral) and/or deep</pre>
7 Other than above
8 Lymph Nodes, NOS
9 UNKNOWN; not stated

TESTIS

C62.0-C62.1, C62.9

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	<u>cm</u>	
002	<u><</u> 2	<u>≤</u> 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 st	tated	

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 Epididymis
- 50 Spermatic cord, ipsilateral Vas deferens
- 60 Scrotum, ipsilateral, incl. dartos muscle
- 70 Extension to scrotum, contralateral Ulceration of scrotum
- 75 Penis
- 80 FURTHER extension
- 85 Metastasis
- 99 UNKNOWN if extension or metastasis

TESTIS C62.0-C62.1, C62.9

LYMPH NODES

O No lymph node involvement . *.* . REGIONAL Lymph Nodes (incl. contralateral or bilateral nodes) Paracaval Aortic (para-, peri-, lateral) External iliac Retroperitoneal, NOS Pelvic, NOS Regional lymph node(s), NOS l Single lymph node ≤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, superficial (femoral) and/or deep 7 Other than above 8 Lymph Nodes, NOS 9 UNKNOWN; not stated

Note: Regardless of previous inguinal or scrotal surgery, involvement of inguinal nodes is always considered distant by SEER.

URINARY BLADDER, RENAL PELVIS and URETERS

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

Careful attention must be given to the use of the term "confined to mucosa" for 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 as well. 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 is in situ. OR
- 2) if the tumor has penetrated the basement membrane to invade the lamina propria, in which case it is localized and is coded to invasion of the lamina propria. Only if this separation cannot be made should the tumor be coded to "confined to mucosa."

The mucosa of the urinary tract consists of:

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 do NOT have a MUSCULARIS MUCOSAE, and, therefore, the lamina propria and the submucosa are difficult to separate. These 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.

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

URINARY BLADDER, RENAL PELVIS and URETERS

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	1	 MUSCULARIS PROPRIA	 SEROSA
	1	B		1	1
1	Epitheliu	m A La	amina Propri	a/	
1	1	_181	Submucosa	1	1
1	1	E		1	1
Urinary Bladder	Yes	1:1	Yes	Yes	Yes, on supe-
(C67)	1	M		1	rior surface
	1	E		I	1
Renal pelvis	Yes	[M]	Yes	Yes	l No l
(C65.9)	1	B		1	
ł	ł	IRI		ł	!
Ureter(s)	l Yes	IAL	Yes	Yes	l No l
(C66.9)	I	INI		1	1
1	i	IEI		1	
1	1	1:1			L

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

	mm	<u>cm</u>	
002	<u><</u> 2	<u>≤</u> 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 Perirenal (perinephric) tissue/
 fat
 Renal (Gerota's) fascia
 Adrenal gland, ipsilateral
 Retroperitoneal soft tissue
- 60 Extension to:
 Blood vessels:
 Extrarenal portion of renal
 vein; renal vein, NOS
 Inferior vena cava
 Tumor thrombus in a renal vein,
 NOS
- 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
Peritoneum
Diaphragm

- 70 Ribs
- 75 Spleen Liver Stomach
- 80 FURTHER extension
- 85 Metastasis
- 99 UNKNOWN if extension or metastasis

KIDNEY (Renal Parenchyma) C64.9

0 No lymph node involvement
REGIONAL Lymph Nodes (incl. con-
tralateral and bilateral)
Renal hilar
Paracaval
Aortic (para-, peri-, lateral)
Retroperitoneal, NOS
Regional lymph node(s), NOS
1 Single lymph node ≤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 PELVIS, URETER, AND UNSPECIFIED URINARY ORGANS C65.9, C66.9, C68.8-C68.9

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

	mm	<u>cm</u>	
002	<u>≤</u> 2	<u>≤</u> 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 st	tated	

Note:

If extension	Behavior code
code is:	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/periureteric tissue Retroperitoneal soft/connective tissue

- 60 Kidney parenchyma and kidney, NOS, from renal pelvis Ureter from renal pelvis
- 65 Extension to bladder from distal ureter Implants in distal ureter
- 66 Extension to major blood vessel(s):
 Aorta, renal artery/vein,
 vena cava (inferior)
 Tumor thrombus in a renal vein,
 NOS
- 70 Perinephric fat via kidney
 Spleen
 Pancreas
 Liver
 Ascending colon from right renal
 pelvis/ureter
 Descending colon from left renal
 pelvis/ureter
 Colon, NOS
 Kidney parenchyma from other
 than renal pelvis
 Bladder, other than from distal
 ureter, i.e., renal pelvis

RENAL PELVIS, URETER, AND UNSPECIFIED URINARY ORGANS C65.9, C66.9, C68.8-C68.9

EXTENSION (cont'd)

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

LYMPH NODES

O No lymph node involvement

REGIONAL Lymph Nodes (incl. contralateral 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 ≤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
- 7 Other than above

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

C67.0-C67.9

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

	<u>mm</u>	<u>cm</u>	
002	<u>≤</u> 2	<u>≤</u> 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 s	tated	

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, grade 1" and "invasion of mucosa, grade 2" varies with the pathologist who must be queried to determine whether the carcinoma is "in situ" or "invasive."

Note 3:

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

EXTENSION

OO Sessile (flat) 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)

Muscle (muscularis) invaded

20 NOS

21 Superficial muscle--inner half

22 Deep muscle--outer half

23 Extension through full thickness of bladder wall

30 Localized, NOS

40 Subserosal tissue Perivesical fat/tissue Periureteral fat/tissue

50 Extension to/through serosa (mesothelium); peritoneum

60 Prostate
Urethra, including prostatic
urethra
Ureter

65 Vas deferens; seminal vesicle
Rectovesical/Denonvilliers'
fascia
Parametrium
Uterus
Vagina

Note 4: Periureteral in code 40 refers only to that portion of the ureter that is intramural to the bladder. All other periureteral involvement would be coded to 60.

EXTENSION (cont'd)

- 70 Bladder FIXED
- 75 Pelvic wall Abdominal wall
- 80 FURTHER extension
- 85 Metastasis
- 99 UNKNOWN if extension or metastasis

LYMPH NODES

0 No lymph node involvement _ _ . _ . _ . _ . _ REGIONAL Lymph Nodes (incl. contralateral and bilateral) Perivesical Iliac: Internal (hypogastric): Obturator External Iliac, NOS Sacral (lateral, presacral, sacral promontory (Gerota's), or NOS) Pelvic, NOS Regional lymph node(s), NOS 1 Single lymph node ≤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

8 Lymph Nodes, NOS

7 Other than above

9 UNKNOWN; not stated

URETHRA, PARAURETHRAL GLAND

C68.0-C68.1

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

EXTENSION

- 00 Carcinoma-IN SITU, NOS
- 05 Noninvasive papillary, polypoid, or verrucous carcinoma
- 10 Subepithelial connective tissue (lamina propria, submucosa) invaded
- 20 Muscularis invaded
- 30 Localized, NOS
- 40 Periurethral muscle
 (sphincter)
 Corpus spongiosum
 Prostate
- 60 Beyond the prostatic capsule | Corpus cavernosum | Vagina, anterior or NOS | Bladder neck
- 70 Other adjacent organs, incl. seminal vesicle(s)
- 80 FURTHER extension
- 85 Metastasis
- 99 UNKNOWN if extension or metastasis

Note:

999 Not stated

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

URETHRA, PARAURETHRAL GLAND C68.0-C68.1

0 No lymph node involvement
REGIONAL Lymph Nodes (incl. con- tralateral and bilateral)
Iliac: Common
Internal (hypogastric):
0bturator
External
Inguinal (superficial or deep) Presacral, sacral NOS
Pelvic, NOS
Regional lymph node(s), NOS
l Single lymph node <u>≤</u> 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

CONJUNCTIVA (excl. Retinoblastoma, Malignant Melanoma, Kaposi's Sarcoma, and Lymphomas)
C69.0

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>c</u> m
002 003	<u>≤</u> 2 3	≤0.2 0.3
	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 conjunctiva
- 40 Intraocular extension
- 50 Adjacent extraocular extension, excluding orbit
- 70 Orbit
- 80 FURTHER extension
- 85 Metastasis
- 99 UNKNOWN if extension or metastasis

CONJUNCTIVA (excl. Retinoblastoma, Malignant Melanoma, Kaposi's Sarcoma, and Lymphomas) C69.0

0 No lymph node involvement
1 REGIONAL Lymph Nodes
Submandibular
Parotid (preauricular)
Cervical
Regional lymph node(s), NOS
DISTANT Lymph Nodes
7 Other than above
8 Lymph Nodes, NOS
- Lymp Housey Hos
9 UNKNOWN; not stated

MALIGNANT MELANOMA OF CONJUNCTIVA

C69.0

(M-8720-8790)

MEASURED THICKNESS (Depth)* of TUMOR (Breslow's measurement)

Record actual measurement (in mm) from Pathology Department

000 No mass; no tumor found

	<u>mm</u>
001 002	0.01 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

¥Thickness, NOT size, is coded.

- 00 IN SITU
- 10 Tumor(s) of bulbar conjunctiva occupying one quadrant or less
- 12 Tumor(s) of bulbar conjunctiva occupying more than one quadrant
- 15 Tumor(s) of bulbar conjunctiva, NOS
- 20 Tumor involves:
 Conjunctival fornix
 Palpebral conjunctiva
 Caruncle
- 30 Localized, NOS
- 70 Eyelid Cornea Orbit
- 80 FURTHER extension
- 85 Metastasis
- 99 UNKNOWN if extension or metastasis

MALIGNANT MELANOMA OF CONJUNCTIVA C69.0 (M-8720-8790)

LYMPH NODES

0 No lymph node involvement
1 REGIONAL Lymph Nodes
Submandibular
Parotid (preauricular)
Cervical
Regional lymph node(s), NOS
DISTANT Lymph Nodes
7 Other than above
8 Lymph Nodes, NOS
9 UNKNOWN; not stated

UVEA AND OTHER EYE (excl. Retinoblastoma, Malignant Melanoma, Kaposi's Sarcoma, and Lymphomas)
C69.1-C69.4, C69.8-C69.9

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>	
002 003	<u>≤</u> 2 3	≤0.2 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		

- 00 IN SITU
- 10 Tumor confined to site of origin
- 40 Intraocular extension
- 70 Adjacent extraocular extension
- 80 FURTHER extension
- 85 Metastasis
- 99 UNKNOWN if extension or metastasis

UVEA AND OTHER EYE (excl. Retinoblastoma, Malignant Melanoma, Kaposi's Sarcoma, and Lymphomas) C69.1-C69.4, C69.8-C69.9

LYMPH NODES

0 No lymph node involvement
1 REGIONAL Lymph Nodes
Submandibular
Parotid (preauricular)
Cervical
Regional lymph node(s), NOS
DISTANT Lymph Nodes
7 Other than above
8 Lymph Nodes, NOS
9 UNKNOWN; not stated

MALIGNANT MELANOMA OF UVEA AND OTHER EYE

C69.1-C69.4, C69.8-C69.9 (M-8720-8790)

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>
000	40	40.0
002	<u><</u> 2	<u>≤</u> 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 s	tated

EXTENSION

00 IN SITU

Iris

- 10 Tumor confined to iris
- 40 Tumor involves 1 quadrant or less, with invasion into anterior chamber angle
- 43 Tumor involves more than one quadrant, with invasion into anterior chamber angle
- 45 Invasion into anterior chamber angle, NOS

Ciliary Body

- 12 Tumor limited to the ciliary body
- 50 Tumor invades into anterior chamber and/or iris
- 55 Tumor invades choroid

Other Eye

- 15 Tumor elevation ≤2mm
- 17 Tumor elevation >2mm ≤3mm
- 20 Tumor elevation >3mm ≤5mm
- 25 Tumor elevation >5mm
- 30 Localized, NOS

MALIGNANT MELANOMA OF UVEA AND OTHER EYE

C69.1-C69.4, C69.8-C69.9 (M-8720-8790)

EXTENSION (cont'd)

All Above Sites

- 70 Adjacent extraocular extension
- 80 FURTHER extension
- 85 Metastasis
- 99 UNKNOWN if extension or metastasis

LYMPH NODES

0 No lymph node involvement

1 REGIONAL Lymph Nodes

Submandibular
Parotid (preauricular)
Cervical
Regional lymph node(s), NOS

DISTANT Lymph Nodes

7 Other than above

8 Lymph Nodes, NOS

9 UNKNOWN; not stated

LACRIMAL GLAND

C69.5

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

Not stated

999

- 00 IN SITU
- 10 Tumor confined to lacrimal gland/duct
- 40 Invading periosteum of fossa of lacrimal gland/duct
- 60 Orbital soft tissues Optic nerve Globe (eyeball)
- 70 Adjacent bone
- 80 FURTHER extension
- 85 Metastasis
- 99 UNKNOWN if extension or metastasis

LACRIMAL GLAND C69.5

LYMPH NODES

0 No lymph node involvement
1 REGIONAL Lymph Nodes
Submandibular
Parotid (preauricular)
Cervical
Regional lymph node(s), NOS
DISTANT Lymph Nodes
7 Other than above
8 Lymph Nodes, NOS
9 UNKNOWN; not stated

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ORBIT NOS

C69.6

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>
002 003	<u>≤</u> 2 3	≤0.2 0.3
	3	0.5
009	9	0.9
010	10	1.0
 099	99	9.9
100	100	10.0
	0001	00.01
990	990+	99.0+

999 Not stated

- 00 IN SITU
- 10 Tumor confined to orbit
- 40 Diffuse invasion of orbital tissues and/or bony walls
- 60 Adjacent paranasal sinuses Cranium
- 80 FURTHER extension
- 85 Metastasis
- 99 UNKNOWN if extension or metastasis

LYMPH NODES

O No lymph node involvement
1 REGIONAL Lymph Nodes
Submandibular
Parotid (preauricular) Cervical
Regional lymph node(s), NOS
DISTANT Lymph Nodes
7 Other than above
8 Lymph Nodes, NOS

9 UNKNOWN; not stated

BRAIN AND CEREBRAL MENINGES

C70.0, C71.0-C71.9

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	<u><</u> 2	<u>≤</u> 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 s	tated	

EXTENSION

00 IN SITU

10 Supratentorial tumor confined to CEREBRAL HEMISPHERE (cerebrum) or MENINGES of CEREBRAL HEMI-SPHERE on one side:

Frontal lobe Temporal lobe Parietal lobe Occipital lobe

11 Infratentorial tumor confined to CEREBELLUM or MENINGES of CEREBELLUM on one side:

Vermis: Median lobe of cerebellum Lateral lobes

12 Infratentorial tumor confined to
BRAIN STEM or MENINGES of

BRAIN STEM on one side:
Thalamus, hypothalamus
Midbrain (mesencephalon)
Pons
Medulla oblongata

- 15 Confined to brain, NOS Confined to meninges, NOS
- 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 (cerebral hemisphere)

BRAIN AND CEREBRAL MENINGES

C70.0, C71.0-C71.9

EXTENSION (cont'd)

LYMPH NODES

- 60 Tumor invades:
 Bone (skull)
 Meninges (dura)
 Major blood vessel(s)
 Nerves-~cranial nerves;
 spinal cord/canal
- 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

9 Not Applicable

OTHER PARTS OF CENTRAL NERVOUS SYSTEM

C70.1, C70.9, C72.0-C72.5, C72.8-C72.9

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	<u><</u> 2	<u>≤</u> 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 s	tated	

- 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 Adjacent muscle
- 60 Major blood vessel(s)
 Sphenoid and frontal sinuses
 (skull)
 Brain, for cranial nerve tumors
- 70 Brain, except for cranial nerve tumors

 Eye
 Bone, other than skull
- 80 FURTHER extension
- 85 Metastasis
- 99 UNKNOWN if extension or metastasis

OTHER PARTS OF CENTRAL NERVOUS SYSTEM C70.1, C70.9, C72.0-C72.5, C72.8-C72.9

LYMPH NODES

9 Not Applicable

C73.9

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	<u><</u> 2	<u>≤</u> 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 st	tated

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 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 muscle
 Esophagus
 Larynx, incl. thyroid and
 cricoid cartilages
 Tumor is described as "FIXED to
- 70 Trachea Skeletal muscle, other than strap or sternocleidomastoid muscle Bone

adjacent tissues"

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

LYMPH NODES

0	No lymph node involvement
RE	GIONAL Lymph Nodes
	Delphian node
	Anterior cervical:
	prelaryngeal, laterotracheal,
	pretracheal (recurrent laryn-
	geal nerve chain)
	Internal jugular (upper,
	middle, and lower deep
	cervical):
	Jugulodigastric
	Jugulo-omohyoid
	Retropharyngeal
	Cervical, NOS
1	Ipsilateral cervical nodes
2	Bilateral, contralateral, or midline cervical nodes
3	Tracheoesophageal (posterior mediastinal)
	Upper anterior mediastinal Mediastinal, NOS
5	Regional lymph node(s), NOS
DI	STANT Lymph Nodes
6	Submandibular (submaxillary) Submental
7	Other than above
-	
8	Lymph Nodes, NOS
9	UNKNOWN; not stated

THYMUS, ADRENAL GLAND, AND OTHER ENDOCRINE GLANDS

C37.9, C74.0-C74.1, C74.9, C75.0-C75.5, C75.8-C75.9

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	<u>≤</u> 2	<u><</u> 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 s	tated

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

THYMUS, ADRENAL GLAND, AND OTHER ENDOCRINE GLANDS C37.9, C74.0-C74.1, C74.9, C75.0-C75.5, C75.8-C75.9

LYMPH NODES

O No lymph node involvement 1 REGIONAL Lymph Nodes 7 DISTANT Lymph Nodes 8 Lymph Nodes, NOS

- 9 UNKNOWN; not stated

KAPOSI'S SARCOMA OF ALL SITES (M-9140)

ASSOCIATED WITH HIVX/AIDS

EXTENSION

- 001 Yes/Present
- 002 No
- 999 Unknown

- SINGLE LESION
- 11 Skin
- 12 Mucosa (e.g., oral cavity, anus, rectum, vagina, vulva)

MULTIPLE LESIONS

- 21 Skin

- 24 (21) plus (22)
- 25 (21) plus (23)
- 26 (22) plus (23)
- 27 (21) plus (22) plus (23)
- 29 Multiple lesions, NOS
- 99 UNKNOWN; not stated

^{*} Synonyms are HTLV-3 and LAV.

KAPOSI'S SARCOMA OF ALL SITES (M-9140)

LYMPH NODES

0 No lymph node involvement (No clinical adenopathy and either pathologically negative or no pathological statement)

Lymph Nodes

- 1 Clinically enlarged palpable lymph node(s) (adenopathy), and either pathologically negative nodes or no pathological statement
- 2 No clinically enlarged palpable
 lymph nodes(s) (adenopathy);
 pathologically positive
 lymph node(s)
- 3 Both clinically enlarged palpable lymph node(s) (adenopathy) and pathologically positive lymph nodes

9 UNKNOWN; not stated

RETINOBLASTOMA

(M-9510-9512)

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	<u><</u> 2	<u>≤</u> 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 s	tated	

- 10 Tumor(s) ≤25% of retina
- 12 Tumor(s) >25% ≤50% of retina
- 15 Tumors >50% of retina
- 30 Tumor(s) confined to retina, NOS
- 40 Tumor cells in the vitreous body
- 45 Optic disc involved
- 48 Optic nerve as far as lamina cribrosa
- 50 Anterior chamber Uvea
- 55 Intrascleral invasion
- 60 Intraocular extension, NOS
- 70 Optic nerve beyond lamina cribrosa
- 72 Optic nerve, NOS
- 75 Other adjacent extraocular extension
- 80 FURTHER extension
- 85 Metastasis
- 99 UNKNOWN if extension or metastasis

RETINOBLASTOMA (M-9510-9512)

LYMPH NODES

0 No lymph node involvement
1 REGIONAL Lymph Nodes
Submandibular
Parotid (preauricular)
Cervical
Regional lymph node(s), NOS
DISTANT Lymph Nodes
7 011 11 1
7 Other than above
8 Lymph Nodes, NOS
8 Lymph Nodes, NOS 9 UNKNOWN; not stated

HODGKIN'S DISEASE AND NON-HODGKIN'S LYMPHOMA OF ALL SITES

(excl. Mycosis Fungoides and Sezary's Disease) (M-9590-9595, 9650-9698, 9702-9714)

ASSOCIATED WITH HIV*/AIDS**

001 Yes/Present

002 No

999 Unknown

Note 1: E = Extralymphatic means other than lymph nodes and other lymphatic structures.

These lymphatic structures include spleen, thymus gland, Waldeyer's ring (tonsils), Peyer's patches (ileum) and lymphoid nodules in the appendix.

Any lymphatic structure is to be coded the same as a lymph node region.

Note 2: S = Spleen involvement

Note 3: If there is no mention of extranodal involvement but several diagnostic procedures were done, including laparotomy, interpret as no involvement.

Note 4: Involvement of adjacent soft tissue does not alter the classification.

- * Synonyms are HTLV-3 and LAV.
- ** See Appendix A for cases diagnosed prior to 1990.

- 10 Involvement of a single lymph node region Stage I
- 20 Involvement of two or more lymph node regions on the same side of the diaphragm Stage II
- 21 Localized involvement of a single extralymphatic organ or site and its regional | lymph node(s) on the same side of the diaphragm with or without involvement | of other lymph node regions | on the same side of the | diaphragm | Stage IIE
- 30 Involvement of lymph node regions on both sides of the diaphragm
 Stage III
- 31 (30) plus localized involvement of an <u>extralymphatic</u> | organ or site
 Stage IIIE
- 32 (30) plus involvement of the spleen
 Stage IIIS
- 33 (31) + (32) Stage IIIES
- 80 Disseminated (multifocal)
 involvement of one or more
 extralymphatic organ(s)
 Stage IV
- 99 UNSTAGED; not stated

HODGKIN'S DISEASE AND NON-HODGKIN'S LYMPHOMA OF ALL SITES

(excl. Mycosis Fungoides and Sezary's Disease) (M-9590-9595, 9650-9698, 9702-9714)

SYSTEMIC SYMPTOMS AT DIAGNOSIS

O No B symptoms (Asymptomatic)

1 Any B symptom:
 Night sweats
 Unexplained fever (above 38° C)
 Unexplained weight loss (generally >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, 9731-9732, 9760-9768, 9800-9941, 9950-9989)

SIZE OF PRIMARY TUMOR

EXTENSION

999 Not applicable

- 10 Localized disease: Solitary plasmacytoma only
- 80 Systemic Disease: All others

This scheme includes the following*:

```
9720 = Malignant histiocytosis
```

9722 = Letterer-Siwe's disease

9723 = True histiocytic lymphoma

9731 = Plasmacytoma, NOS

9732 = Multiple myeloma

9760 = Immunoproliferative disease, NOS

9761 = Waldenstrom's macroglobulinemia

9762 = Alpha heavy chain disease

9763 = Gamma heavy chain disease

9764 = Immunoproliferative small intestinal disease

9765 = Malignant monoclonal gammopathy

9766 = Malignant angiocentric immunoproliferative lesion

9767 = Malignant angioimmunoblastic lymphadenopathy

9768 = Malignant T-gamma lymphoproliferative disease

9800 = Leukemia, NOS

9801 = Acute leukemia, NOS

9802 = Subacute leukemia, NOS

9803 = Chronic leukemia, NOS

9804 = Aleukemic leukemia, NOS

9820 = Lymphoid Leukemia, NOS

9821 = Acute lymphoblastic leukemia

9822 = Subacute lymphoid leukemia

9823 = Chronic lymphocytic leukemia

9824 = Aleukemic lymphoid leukemia

9825 = Prolymphocytic leukemia

9826 = Burkitt's cell leukemia

9827 = Adult T-cell leukemia/lymphoma

9830 = Plasma cell leukemia

9840 = Erythroleukemia

9841 = Acute erythremia

9842 = Chronic erythremia

9850 = Lymphosarcoma cell leukemia

9860 = Myeloid leukemia, NOS

9861 = Acute myeloid leukemia

9862 = Subacute myeloid leukemia

★ Only preferred terms from ICD-0 are given

HEMATOPOIETIC, RETICULOENDOTHELIAL, IMMUNOPROLIFERATIVE, AND MYELOPROLIFERATIVE NEOPLASMS

(M-9720, 9722-9723, 9731-9732, 9760-9768, 9800-9941, 9950-9989)

LYMPH NODES

9 Not applicable

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 9892 = Subacute monocytic leukemia 9893 = Chronic monocytic leukemia 9894 = Aleukemic monocytic leukemia 9900 = Mast cell leukemia 9910 = Acute megakaryoblastic leukemia 9930 = Myeloid sarcoma 9931 = Acute panmyelosis 9932 = Acute myelofibrosis 9940 = Hairy cell leukemia 9941 = Leukemic reticuloendotheliosis 9950 = Malignant polycythemia (rubra) vera 9960 = Malignant myeloproliferative disease, NOS 9961 = Malignant myelosclerosis with myeloid metaplasia 9962 = Malignant idiopathic/essential (hemorrhagic) thrombocythemia 9970 = Malignant lymphoproliferative disease, NOS 9980 = Malignant refractory anemia, NOS 9981 = Malignant refractory anemia without sideroblasts 9982 = Malignant refractory anemia with sideroblasts 9983 = Malignant refratory anemia with excess of blasts

9984 = Malignant refractory anemia with excess of blasts

with transformation 9989 = Malignant myelodysplastic syndrome, NOS

(6/92) SEER EOD-88 2nd ed. 161

OTHER AND ILL-DEFINED SITES, UNKNOWN PRIMARY SITE

C76.0-C76.5, C76.7-C76.8, C80.9

C42._ and C77._, Other than hematopoietic, reticuloendothelial,

immunoproliferative and myeloproliferative neoplasms, Hodgkin's disease and non-Hodgkin's lymphoma, and Kaposi's sarcoma

SIZE OF PRIMARY TUMOR

EXTENSION

999 Not applicable

99 Not Applicable

OTHER AND ILL-DEFINED SITES, UNKNOWN PRIMARY SITE

C76.0-C76.5, C76.7-C76.8, C80.9

C42._ and C77._, Other than hematopoietic, reticuloendothelial, immunoproliferative and myeloproliferative neoplasms, Hodgkin's disease and non-Hodgkin's lymphoma, and Kaposi's sarcoma

LYMPH NODES

9 Not Applicable

As questions arise, answers sometimes necessitate modification of the codes and/or definitions which are then expanded, pared down or otherwise clarified. When a change is made, its impact is evaluated; if it appears that many cases will be affected and/or problems will arise in the analysis of the data, all cases previously entered in the data base (diagnosed 1988 or later) are reviewed and recoded. The following are examples of changes and the rationale which determines the need for review.

- The addition of "Facial muscle, NOS" to code 55 for Gum and Retromolar Area clarifies the original definition of "Subcutaneous soft tissue of the face" but does not alter the definition. Thus this change should have no effect on previously coded cases.
- 2. Although the addition of "Submental" to the list of regional lymph nodes for Base of Tongue and Lingual Tonsil alters the definition, no review was required because few, if any, cases were felt to be affected. (Review in such an instance is not cost effective.)
- 3. For Lung and Bronchus code 50 "Tumor of/involving main stem bronchus <2.0 cm from carina; or primary in the carina" was split into:
 - 50 Tumor of/involving main stem bronchus <2.0 cm from carina
 - 55 Primary confined to the carina.

At that time review of all cases coded to primary site C34.0 (includes both main stem bronchus and carina) was required. Although few primaries arise in the carina, the distinction between these and those arising in the main stem bronchus was felt to be important enough to require review.

(Note: In 1992, code 55 was converted to 25.)

Changes, such as examples 1 and 2, are included in this appendix to provide a complete history of changes to the codes and definitions. However if substantial differences are seen in cases coded immediately before and after the change, they may be explained by these definition changes (a coding artifact). Care should be exercised when arriving at any conclusions concerning the observed differences. However for changes where review was required (example 3), one can assume that the same definitions were used to code all cases.

This appendix records all substantive changes that have been made to the definitions and/or codes. (Editorial and format changes are not included.) For each change the following are specified:

- o the original definition
- o the new (modified) definition
- o when the original definition was in effect
- o when the new change became effective
- o what review, if any, was required

1

GENERAL INSTRUCTIONS -- I. TUMOR SIZE

OLD DEFINITION Effective: 1/1/88 diagnoses

Do <u>NOT</u> 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.

CURRENT DEFINITION

Effective: 7/1/91 (No review of | previously coded cases was done.)

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 at time of resection of the primary is found to be larger than the excisional biopsy, code the size of the residual tumor.

LIP (Vermilion or Labial Mucosa) C00.0-C00.6, C00.8-C00.9

LYMPH NODES

OLD DEFINITION

Effective: 1/1/88 diagnoses

CURRENT DEFINITION

Effective: 5/15/90 (No review of previously coded cases was done.)

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

REGIONAL Lymph Nodes

Facial: Buccinator for upper lip

Mandibular for lower lip Parotid: Infra-auricular/pre-

anotio: imma adricular/pre auricular for upper lip

Submandibular (submaxillary)

Submental

Internal jugular (upper and

lower deep cervical):

Jugulodigastric

Jugulo-omohyoid

Cervical, NOS

BASE OF TONGUE, LINGUAL TONSIL COl.9, CO2.4

LYMPH NODES

OLD DEFINITION

Effective: 1/1/88 diagnoses

REGIONAL Lymph Nodes

REGIONAL Lymph Nodes

Submandibular (submaxillary)
Internal jugular (upper and
lower deep cervical):
Jugulodigastric

Jugulo-omohyoid

Cervical, NOS Regional lymph node(s), NOS CURRENT DEFINITION

Effective: 5/15/90 (No review of previously coded cases was done.)

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

GUM (Gingiva), RETROMOLAR AREA C03.0-C03.1, C03.9, C06.2

EXTENSION

OLD DEFINITION CURRENT DEFINITION

Effective: 1/1/88 diagnoses Effective: 5/15/90 (No review of

previously coded cases was done.)

55 Subcutaneous soft tissue of face 55 Subcutaneous soft tissue of face

Facial muscle, NOS

LYMPH NODES

OLD DEFINITION

Effective: 1/1/88 diagnoses

CURRENT DEFINITION

Effective: 5/15/90 (No review of

previously coded cases was done.)

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

REGIONAL Lymph Nodes

Facial: Mandibular

Submandibular (submaxillary)

Submental

Retropharyngeal for upper gum

Internal jugular (upper and

lower deep cervical):

Jugulodigastric

Jugulo-omohyoid

Cervical, NOS

HARD PALATE

C05.0

EXTENSION

OLD DEFINITION

Effective: 1/1/88 diagnoses

CURRENT DEFINITION

Effective: 5/15/90 (No review of previously coded cases was done.)

74 Nasal cavity

Maxillary antrum (sinus)

74 Nasal cavity

Maxillary antrum (sinus)

Sphenoid bone Pterygoid plate

LYMPH NODES

OLD DEFINITION

Effective: 1/1/88 diagnoses

CURRENT DEFINITION

Effective: 5/15/90 (No review of

previously coded cases was done.)

REGIONAL Lymph Nodes

Submandibular (submaxillary)

Internal jugular (upper and

lower deep cervical):

Jugulodigastric

Jugulo-omohyoid

Retropharyngeal

Cervical, NOS

Regional lymph node(s), NOS

REGIONAL Lymph Nodes

Submandibular (submaxillary)

Submental

Internal jugular (upper and

lower deep cervical):

Jugulodigastric

Jugulo-omohyoid

 ${\tt Retropharyngeal}$

Cervical, NOS

SOFT PALATE, UVULA C05.1-C05.2

LYMPH NODES

OLD DEFINITION

Effective: 1/1/88 diagnoses

CURRENT DEFINITION

Effective: 5/15/90 (No review of

previously coded cases was done.)

REGIONAL Lymph Nodes

Submandibular (submaxillary)

Retropharyngeal

Internal jugular (upper and lower deep cervical):

Jugulodigastric

Jugulo-omohyoid

Cervical, NOS

Regional lymph node(s), NOS

REGIONAL Lymph Nodes

Submandibular (submaxillary)

Submental

Retropharyngeal

Internal jugular (upper and

lower deep cervical):

Jugulodigastric

Jugulo-omohyoid

Cervical, NOS

OTHER MOUTH C05.8-C05.9, C06.8-C06.9

LYMPH NODES

OLD DEFINITION

Effective: 1/1/88 diagnoses

REGIONAL Lymph Nodes

Submandibular (submaxillary)
Internal jugular (upper and
lower deep cervical):
 Jugulodigastric
 Jugulo-omohyoid
Cervical, NOS

Regional lymph node(s), NOS

CURRENT DEFINITION

Effective: 5/15/90 (No review of previously coded cases was done.)

REGIONAL Lymph Nodes

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

CHEEK (Buccal) MUCOSA, VESTIBULE C06.0-C06.1

LYMPH NODES

OLD DEFINITION
Effective: 1/1/88 diagnoses

REGIONAL Lymph Nodes

Facial: Buccinator, mandibular
Submandibular (submaxillary)
Parotid: Preauricular, infraauricular
Internal jugular (upper deep
cervical):
 Jugulodigastric
 Jugulo-omohyoid
Cervical, NOS
Regional lymph node(s), NOS

CURRENT DEFINITION

Effective: 5/15/90 (No review of previously coded cases was done.)

REGIONAL Lymph Nodes

Facial: Buccinator, mandibular
Submandibular (submaxillary)
Parotid: Preauricular, infraauricular
Submental
Internal jugular (upper and
lower deep cervical):
Jugulodigastric
Jugulo-omohyoid
Cervical, NOS
Regional lymph node(s), NOS

TONSIL, OROPHARYNX C09.0-C09.1, C09.8-C09.9, C10.0-C10.4, C10.8-C10.9

EXTENSION

OLD DEFINITION

Effective: 1/1/88 diagnoses

CURRENT DEFINITION

Effective: 1/1/88 diagnoses. Change

made 5/88. No review needed.

70 Bone

Extrinsic muscles: Mylohyoid, hyoglossus, styloglossus

70 Bone

Extrinsic muscles of tongue:
Mylohyoid, hyoglossus,
styloglossus

EXTENSION

OLD DEFINITION

Effective: 1/1/88 diagnoses

CURRENT DEFINITION

Effective: Change made 1/89.
No review needed.

10 Invasive tumor confined to one of the following subsites:
Anterior wall (incl. vallecula)

One lateral wall Posterior wall 10 Invasive tumor confined to one of the following subsites:

Anterior wall (incl. vallecula and lingual (anterior) surface of epiglottis)

One lateral wall

- 40 Soft palate, inferior surface, incl. uvula
- 50 Base of tongue
 Larynx, laryngeal (posterior)
 surface of epiglottis, or
 larynx, NOS
 Floor of mouth
 Gum (gingiva)

Buccal mucosa (inner cheek)

60 Prevertebral fascia Soft tissue of neck 40 Soft palate, inferior surface, incl. uvula, or soft palate, NOS

Posterior wall

- 50 Base of tongue
 Laryngeal (posterior) surface
 of epiglottis, or larynx, NOS
 Floor of mouth
 Gum (gingiva)
 Buccal mucosa (inner cheek)
- 60 Prevertebral fascia or muscle Soft tissue of neck

(continued)

TONSIL, OROPHARYNX (continued)
C09.0-C09.1, C09.8-C09.9, C10.0-C10.4, C10.8-C10.9

LYMPH NODES

OLD DEFINITION

Effective: 1/1/88 diagnoses

CURRENT DEFINITION

Effective: 5/15/90 (No review of previously coded cases was done.)

REGIONAL Lymph Nodes

REGIONAL Lymph Nodes

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

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

NASOPHARYNX

C11.0-C11.3, C11.8-C11.9

LYMPH NODES

OLD DEFINITION

Effective: 1/1/88 diagnoses

CURRENT DEFINITION

Effective: 5/15/90 (No review of

previously coded cases was done.)

REGIONAL Lymph Nodes

Retropharyngeal

Internal jugular (upper and lower deep cervical):

Jugulodigastric Jugulo-omohyoid

Cervical, NOS

Regional lymph node(s), NOS

REGIONAL Lymph Nodes

Retropharyngeal

Submandibular (submaxillary)

Submental

Internal jugular (upper and
lower deep cervical):

Jugulodigastric

Jugulo-omohyoid

Cervical, NOS

Regional lymph node(s), NOS

PYRIFORM SINUS, HYPOPHARYNX, LARYNGOPHARYNX C12.9, C13.0-C13.2, C13.8-C13.9, C14.1

EXTENSION

OLD DEFINITION

CURRENT DEFINITION

Effective: 1/1/88 diagnoses

Effective: Change made 1/89.

No review needed.

50 Larynx

50 Larynx

Cervical esophagus

Cervical (upper) esophagus

LYMPH NODES

OLD DEFINITION

Effective: 1/1/88 diagnoses

CURRENT DEFINITION

Effective: 5/15/90 (No review of

previously coded cases was done.)

REGIONAL Lymph Nodes

Retropharyngeal

Internal jugular (upper and
 lower deep cervical):

Jugulodigastric

Jugulo-omohyoid

Cervical, NOS

Regional lymph node(s), NOS

REGIONAL Lymph Nodes

Retropharyngeal

Submandibular (submaxillary)

Submental

Internal jugular (upper and

lower deep cervical):

Jugulodigastric

Jugulo-omohyoid

Cervical, NOS

Regional lymph node(s), NOS

PHARYNX NOS AND OTHER ILL-DEFINED ORAL CAVITY SITES C14.0, C14.2, C14.8

LYMPH NODES

OLD DEFINITION

Effective: 1/1/88 diagnoses

CURRENT DEFINITION

Effective: 5/15/90 (No review of previously coded cases was done.)

REGIONAL Lymph Nodes

Cervical, NOS

REGIONAL Lymph Nodes

Submandibular (submaxillary) Internal jugular (upper and lower deep cervical): Jugulodigastric Jugulo-omohyoid

Regional lymph node(s), NOS

Retropharyngeal

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

Submandibular (submaxillary)

ESOPHAGUS

C15.0-C15.5, C15.8-C15.9

LYMPH NODES

OLD DEFINITION

CURRENT DEFINITION

Effective: 1/1/88 diagnoses Effective: Change made 1/1/92.

No review needed.

6 Supraclavicular

6 Supraclavicular

Scalene

STOMACH

C16.0-C16.6, C16.8-C16.9

EXTENSION

OLD DEFINITION CURRENT DEFINITION

Effective: 1/1/88 diagnoses

Effective: 1/1/88 diagnoses

00* IN SITU: Noninvasive; 00 IN SITU: Noninvasive; intraepithelial intraepithelial

05 (Adeno)carcinoma in head of polyp, stalk not invaded noninvasive

★ All cases coded using old definition (diagnosed from 1/1/88 to approximately 5/15/90) were reviewed and recoded.

SMALL INTESTINE C17.0-C17.3, C17.8-C17.9

EXTENSION

OLD DEFINITION **CURRENT DEFINITION** Effective: 1/1/88 diagnoses Effective: 1/1/88 diagnoses

00¥ IN SITU: Noninvasive; 00 IN SITU: Noninvasive; intraepithelial

05 (Adeno)carcinoma in head of 05 (Adeno)carcinoma in a polyp, polyp, stalk not invaded noninvasive

intraepithelial

★ All cases coded using old definition (diagnosed from 1/1/88 to approximately 5/15/90) were reviewed and recoded.

COLON (incl. Flexures and Appendix) C18.0-C18.9

Transverse colon and flexures:

Gallbladder/bile ducts

Stomach

Pancreas

Kidnev

Spleen; liver

All colon sites: Small intestine

EXTENSION

OLD DEFINITION CURRENT DEFINITION Effective: 1/1/88 diagnoses Effective: Changes made 1/89. Invasive tumor confined to: 10 Mucosa, NOS Mucosa, NOS (incl. 10 intramucosal) 45 Extension to adjacent (connective) 45 Extension to adjacent (connective) tissue: tissue: Mesentery (incl. mesenteric Mesentery (incl. mesenteric fat. mesocolon) -- transfat. mesocolon)--all colon sites verse Retroperitoneal fat--ascend-Retroperitoneal fat-- ascending and descending colon ing and descending colon Greater omentum; gastro-Greater omentum; gastrocolic colic ligament--transverse ligament--transverse colon colon Pericolic fat Pericolic fat--all colon sites 60 Cecum, appendix, ascending 60 Greater omentum--cecum, appendix, ascending, descending and descending, and sigmoid colon: Greater omentum sigmoid colon Spleen--descending Spleen--descending colon Pelvic wall -- descending/ Pelvic wall--descending sigmoid colon/sigmoid Ureter/kidney, Liver, right lobe--ascending R--ascending/cecum colon L--descending Transverse colon and flexures: Liver, R lobe--ascending/cecum Stomach Spleen; liver Transverse colon and flexures: Pancreas Stomach Gallbladder/bile ducts Spleen; liver Kidney Pancreas All colon sites: Gallbladder/bile ducts Small intestine Kidney

(continued)

Right--ascending colon

Left--descending colon

66 Ureter/kidney

COLON (incl. Flexures and Appendix) (continued) C18.0-C18.9

EXTENSION

OLD DEFINITION

Effective: 1/1/88 diagnoses

70 Cecum, appendix, ascending, 70 Cecum, appendix, ascending, descending, and sigmoid colon:

> Uterus Ovary; fallopian tube Cul de sac--sigmoid

75 Cecum, appendix, ascending, descending, and sigmoid colon:

> Urinary bladder--cecum/ ascending/sigmoid Gallbladder for cecum/ascending

Transverse colon and flexures:

Ureter Adrenal gland Diaphragm

All colon sites

Other segment of colon via serosa Fistula to skin

CURRENT DEFINITION

Effective: Changes made 1/89.

descending, and sigmoid colon:

Uterus

Ovary; fallopian tube

75 All colon sites

Urinary bladder Gallbladder Adrenal gland Diaphragm Other segment(s) of colon via serosa Fistula to skin

(continued)

COLON (incl. Flexures and Appendix) (continued) C18.0-C18.9

EXTENSION

<u>OLD DEFINITION</u>
Effective: 1/1/88 diagnoses

<u>CURRENT DEFINITION</u>
Effective: 1/1/88 diagnoses

(see notes below)

00¥ IN SITU: Noninvasive; 00 IN SITU: Noninvasive; intraepithelial intraepithelial

05 (Adeno)carcinoma in head of 05 (Adeno)carcinoma in a polyp,

polyp, stalk not invaded noninvasive

45 Extension to adjacent (connective)
tive) tissue:
tissue:
Mesentery (incl. mesenteric

45

★

Mesentery (incl. mesenteric

fat, mesocolon)--all
colon sites

Retroperitoneal fat--ascend
Retroperitoneal fat--ascend-

ing and descending colon
Greater omentum; gastrocolic
ligament--transverse colon
Pericolic fat--all colon sites
ing and descending colon
Greater omentum; gastrocolic
ligament--transverse
colon/flexures

Pericolic fat--all colon sites

★ All cases coded using old definition (diagnosed from 1/1/88 to approximately 5/15/90) were reviewed and recoded.

** Effective: 5/15/90 (No review of previously coded cases was done.)

EXTENSION

OLD DEFINITION CURRENT DEFINITION

Effective: 1/1/88 diagnoses Effective: Change made 1/1/92.

No review of cases needed.

75 All colon sites: 75 All colon sites unless otherwise stated above:

LYMPH NODES

OLD DEFINITION CURRENT DEFINITION

Effective: 1/1/88 diagnoses Effective: Change made 1/1/92.

No review of cases needed.

7 Other than above 7 Other than above, incl.

superior mesenteric

RECTOSIGMOID, RECTUM C19.9, C20.9

EXTENSION

OLD DEFINITION

00¥ IN SITU: Noninvasive;

intraepithelial

05 (Adeno)carcinoma in head of 05 (Adeno)carcinoma in a polyp,

polyp, stalk not invaded

CURRENT DEFINITION

Effective: 1/1/88 diagnoses Effective: 1/1/88 diagnoses

00 IN SITU: Noninvasive; intraepithelial

noninvasive

¥ All cases coded using old definition (diagnosed from 1/1/88 to approximately 5/15/90) were reviewed and recoded.

LIVER AND INTRAHEPATIC BILE DUCTS C22.0-C22.1

EXTENSION

OLD DEFINITION

Effective : 1/1/88 diagnoses

CURRENT DEFINITION

Effective: Change made 5/88.

70 Extension to:

Extrahepatic bile duct(s)

Diaphragm Pleura 70 Extension to:

Extrahepatic bile duct(s)

Diaphragm

OLD DEFINITION

Effective: 1/1/88 diagnoses

CURRENT DEFINITION

Effective: Change made 1/89.

20 Single lesion (one lobe)
WITH intrahepatic vascular

invasion, incl. NOS

20 Single lesion (one lobe)
WITH intrahepatic vascular

invasion

LYMPH NODES

OLD DEFINITION

Effective: 1/1/88 diagnoses

CURRENT DEFINITION

Effective: 1/1/88 diagnoses.

Change made 1/1/92. Cases coded using old definition of code 5 were converted to code 1.

l Hepatic: Hepatic pedicle, inferior

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

vena cava, hepatic artery, porta hepatis (hilar)

5 Regional lymph node(s), NOS

Regional lymph node(s), NOS

GALLBLADDER, OTHER BILIARY, AND BILIARY NOS C23.9, C24.8-C24.9

LYMPH NODES

OLD DEFINITION

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

Effective: 1/1/88 diagnoses Effective: Change made 1/1/92. No review of cases needed.

> 2 Periportal Periduodenal Peripancreatic (near head of pancreas only)

EXTRAHEPATIC BILE DUCT(S) C24.0

LYMPH NODES

OLD DEFINITION

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

Effective: 1/1/88 diagnoses Effective: Change made 1/1/92. No review of cases needed.

> 2 Periportal Periduodenal Peripancreatic (near head of pancreas only)

AMPULLA OF VATER C24.1

EXTENSION

<u>OLD DEFINITION</u> Effective: 1/1/88 diagnoses		E	CURRENT DEFINITION ffective: 1/1/88 diagnoses
40×	Duodenum Extrahepatic bile ducts	40	Duodenum and/or distal common duct
50	Tumor invasion into pancreas, incl. pancreatic duct, ≤2 cm	50	Tumor invasion into pancreas, incl. pancreatic duct, ≤2 cm and/or common duct, ≤2 cm
60	Tumor invasion into pancreas >2	cm	
		55	Pancreas, NOS and/or common duct, NOS
		60	Tumor invasion into pancreas >2 cm and/or common duct, >2 cm
		65	Extrahepatic bile ducts
			():

All cases coded using old definitions (diagnosed from 1/1/88 forward) were reviewed and recoded.

PANCREAS: HEAD, BODY, AND TAIL C25.0-C25.4

EXTENSION

OLD DEFINITION
Effective: 1/1/88 diagnoses

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 portal vein
Peritoneum, mesentery,
mesocolon, mesenteric fat
Greater/lesser omentum

Body and/or tail of pancreas:

Splenic flexure

Ileum and jejunum

Peritoneum, mesentery,

mesocolon, mesenteric fat

Major blood vessel(s): Aorta,

celiac artery, hepatic

artery, splenic artery/

vein, superior mesenteric

artery/vein, portal vein

(continued)

CURRENT DEFINITION

Effective: 1/1/91 diagnoses (Prior cases were not reviewed and recoded.)

44 Head of pancreas:

Extrahepatic bile ducts (incl. external right and left hepatic ducts, common hepatic duct, and common bile duct)
Ampulla of Vater
Duodenum

Body and/or tail of pancreas:
Duodenum

48 Body and/or tail of pancreas:

Extrahepatic bile ducts (incl.
external right and left hepatic ducts, common hepatic duct, and common bile duct)
Ampulla of Vater

50 Head of pancreas:

Adjacent stomach Stomach, NOS

Body and/or tail of pancreas: Spleen

52 **Head of pancreas**:
Body of stomach

54 Head of pancreas:

Major blood vessel(s): Hepatic,
pancreaticoduodenal and/or
gastroduodenal arteries,
superior mesenteric
artery/vein, portal vein
Transverse colon, incl. hepatic
flexure

56 Body and/or tail of pancreas:

Splenic flexure
Major blood vessel(s): Aortic,
celiac artery, hepatic
artery, splenic artery/vein,
superior mesenteric
artery/vein, portal vein
(continued)

PANCREAS: HEAD, BODY, AND TAIL (continued) C25.0-C25.4

EXTENSION

OLD DEFINITION
Effective: 1/1/88 diagnoses

- 66 Stomach from body and tail
- 67 Liver (incl. porta hepatis) Gallbladder
- 70 Head of pancreas

Kidney Ureter Adrenal gland Retroperitoneum Jejunum Ileum

Body and/or tail of pancreas
Right kidney/right ureter
Right adrenal gland
Diaphragm
Large intestine (other
than splenic flexure

CURRENT DEFINITION

Effective: 1/1/91 diagnoses (Prior cases were not reviewed and recoded.)

- 62 Body and/or tail of pancreas: Stomach
- 64 Head of pancreas:

 Large intestine (other than transverse colon incl.

hepatic flexure)

Spleen

Body and/or tail of pancreas:
Large intestine (other than splenic flexure)

- 72 Body and/or tail of pancreas:
 Left kidney; kidney, NOS;
 left ureter; left adrenal
 (suprarenal) gland; retroperitoneal soft tissue
 (retroperitoneal space)
- 74 Head of pancreas:

Peritoneum, mesentery, mesocolon, mesenteric fat Greater/lesser omentum

Body and/or tail of pancreas: Ileum and jejunum Peritoneum, mesentery,

mesocolon, mesenteric fat

- 76 Liver (incl. porta hepatis);
 gallbladder
- 78 **Head of pancreas**: Kidney; ureter; adrenal gland; retroperitoneum; jejunum; ileum

Body and/or tail of pancreas: Right kidney/right ureter; right adrenal gland Diaphragm

PANCREAS: OTHER AND UNSPECIFIED

C25.7-C25.9

EXTENSION

E	<u>OLD DEFINITION</u> ffective: 1/1/88 diagnoses	CURRENT DEFINITION Effective: 1/1/91 diagnoses (Prior cases were not reviewed and recoded.)
40	Adjacent connective tissue	40 Peripancreatic tissue
60	Adjacent organ/structures	45 Duodenum Bile ducts Ampulla of Vater
		50 Stomach Spleen Colon

Adjacent large vessels

NASAL CAVITY AND MIDDLE EAR C30.0-C30.1

LYMPH NODES

OLD DEFINITION

CURRENT DEFINITION Effective: 1/1/88 diagnoses Effective: 5/15/90 (No review of previously coded cases was done.)

1 REGIONAL Lymph Nodes

1 REGIONAL Lymph Nodes

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

MAXILLARY SINUS C31.0

EXTENSION

OLD DEFINITION CURRENT DEFINITION

Effective: 1/1/88 diagnoses Effective: 1/1/88 diagnoses

65 Invasion of maxilla, NOS

80× FURTHER extension 80 FURTHER extension

* All cases coded using old definition (diagnosed from 1/1/88 to approximately 5/15/90) were reviewed and recoded.

LARYNX

C32.0-C32-3, C32.8-C32.9

LYMPH NODES

OLD DEFINITION

Effective: 1/1/88 diagnoses

CURRENT DEFINITION

Effective: 1/1/88 diagnoses

Change made 1/1/92. See note below.*

REGIONAL Lymph Nodes (incl. con-

tralateral or bilateral nodes)

Internal jugular (upper and lower deep cervical) for glottic and supraglottic:

jugulodigastric jugulo-omohyoid

Anterior cervical: Prelaryngeal, pretracheal, paratracheal, laterotracheal (recurrent

laryngeal) Submaxillary

Submental Cervical, NOS

REGIONAL Lymph Nodes (incl. contralateral or bilateral nodes)

Internal jugular (upper and lower deep cervical) Jugulodigastric Jugulo-omohyoid Anterior cervical: Prelaryngeal, pretracheal, paratracheal, laterotracheal (recurrent laryngeal) Submandibular (submaxillary)

Submental Cervical, NOS

★ All cases primary in subglottic larynx (C32.2) with Lymph Nodes coded 7 (Distant lymph nodes) diagnosed 1/1/88 forward were reviewed and recoded to regional node involvement where necessary.

BRONCHUS AND LUNG

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

EXTENSION

OLD DEFINITION

Effective: 1/1/88 diagnoses

CURRENT DEFINITION

Effective: 1/1/88 diagnoses

(See note below)

50* Tumor of/involving main stem 50 Tumor of/involving main stem bronchus <2.0 cm from carina;

or primary in the carina

55 Primary confined to the carina

bronchus <2.0 cm from carina

¥ All cases of site C34.0 (includes main stem bronchus and carina) coded using old definition (diagnosed from 1/1/88 to approximately 5/15/90)

were reviewed and recoded.

Notes

OLD DEFINITION Effective: 1/1/88 diagnoses **CURRENT DEFINITION**

Effective: 1/1/88 diagnoses

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

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

*****×**Note** 1 Assume tumor ≥2 cm from carina if lobectomy, segmental resection, or wedge resection is done.

¥ Note 7 added 1/90.

** Note 1 revised 1/91.

(continued)

BRONCHUS AND LUNG (continued) C34.0-C34.3, C34.8-C34.9

EXTENSION

OLD DEFINITION

Effective: 1/1/88 diagnoses

CURRENT DEFINITION

Effective: 1/1/88 diagnoses.

Change made 1/1/92. (See notes below)

55* Primary confined to the carina 25 Primary confined to the carina

70**Carina; trachea; esophagus Mediastinum, extrapulmonary

or NOS

Major blood vessel(s): Pulmonary artery or vein; superior vena cava (SVC

syndrome); aorta

78**Contralateral lung/MSB

70 Carina; trachea; esophagus Mediastinum, extrapulmonary

or NOS

Major blood vessel(s): Pulmonary artery or vein;

superior vena cava (SVC syndrome); aorta; azygos

vein

78 Contralateral lung

Contralateral MSB

★ All cases diagnosed 1/1/88 forward and coded 55 were converted to code 25.

** No review of cases needed.

(continued)

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BRONCHUS AND LUNG (continued) C34.0-C34.3, C34.8-C34.9

LYMPH NODES

OLD DEFINITION
Effective: 1/1/88 diagnoses

- l Intrapulmonary
 Hilar (pulmonary root)
 Peribronchial
- 2 Subcarinal; carinal
 Mediastinal, anterior,
 posterior, NOS
 Paratracheal; pretracheal
 Paraesophageal
 Aortic (para-, peri-) (above diaphragm)

6 Contralateral hilar or mediastinal (incl. bilateral) Supraclavicular (transverse cervical) Scalene

CURRENT DEFINITION Effective: 1/1/88 diagnoses.

Change made 1/1/92. No review needed.

- 1 Intrapulmonary (incl.
 interlobar, lobar,
 segmental)
 Hilar (proximal lobar)
 Peribronchial
- 2 Subcarinal Carinal Mediastinal, anterior, posterior, NOS Peri/paratracheal (incl. tracheobronchial, lower peritracheal, azygos) Pre- and retrotracheal (incl. precarinal) Peri/paraesophageal Aortic (above diaphragm) (incl. peri/para-aortic, subaortic, aortico-pulmonary window, ascending aorta or phrenic) Pulmonary ligament Pericardial
- 6 Contralateral hilar or mediastinal (incl. bilateral)
 Supraclavicular (transverse cervical), ipsilateral or contralateral
 Scalene, ipsilateral or contralateral

SKIN (excl. Malignant Melanoma, Kaposi's Sarcoma, Mycosis Fungoides, Sezary's Disease, and Other Lymphomas) C44.0-C44.9

EXTENSION

OLD DEFINITION	CURRENT DEFINITION Effective: 1/1/88 diagnoses (see notes below)	
Effective: 1/1/88 diagnoses		
<pre>10* Lesion(s) confined to dermis For eyelid: Minimal infiltra- tion of dermis (not invading tarsal plate)</pre>	<pre>10 Lesion(s) confined to dermis For eyelid: Minimal infiltra- tion of dermis (not invading tarsal plate)</pre>	
20 * For eyelid: Infiltrates deeply into dermis (invading tarsal plate)	20 For eyelid: Infiltrates deeply into dermis (invading tarsal plate)	
	25 For eyelid: At eyelid margin	
60 Adjacent structures for eyelid	60 Adjacent structures for eyelid, incl. orbit	
70* Underlying cartilage, bone, skeletal muscle Orbit for eyelid	70 Underlying cartilage, bone, skeletal muscle	

* All cases of eyelid (C44.1) coded using old definitions (diagnosed from 1/1/88 to approximately 5/15/90) were reviewed and recoded.

MYCOSIS FUNGOIDES AND SEZARY'S DISEASE OF SKIN, VULVA, PENIS, SCROTUM C44.0-C44.9, C51.0-C51.2, C51.8-C51.9, C60.0-C60.1, C60.8-C60.9, C63.2 (M-9700-9701)

EXTENSION

<u>OLD DEFINITION</u>
Effective: 1/1/88 diagnoses

<u>CURRENT DEFINITION</u>
Effective: 1/1/88 diagnoses

REGIONAL Lymph Nodes

- 1 Clinically enlarged palpable
 regional lymph node(s)
 (adenopathy), and either
 pathologically negative re gional nodes or no patho logical statement
- 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
- ★ All cases coded using old definition (diagnosed from 1/1/88 to approximately 5/15/90) were reviewed and recoded.

Lymph Nodes

- 1 Clinically enlarged palpable lymph node(s) (adenopathy), and either pathologically negative nodes or no pathological statement
- 2 No clinically enlarged palpable
 lymph nodes(s) (adenopathy);
 pathologically positive
 lymph node(s)
- 3 Both clinically enlarged palpable lymph node(s) (adenopathy) and pathologically positive lymph nodes

9 UNKNOWN; not stated

BREAST

C50.0-C50.6, C50.8-C50.9

LYMPH NODES

OLD DEFINITION

Effective: 1/1/88 diagnoses

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

Intramammary

Nodule(s) in axillary fat

CURRENT DEFINITION

Effective: 1/1/88 diagnoses

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

Infraclavicular

Intramammary

Nodule(s) in axillary fat

DISTANT Lymph Nodes

DISTANT Lymph Nodes

8* Cervical, NOS

Contralateral/bilateral axillary and/or internal mammary

Infraclavicular

Supraclavicular (transverse

cervical)

Other than above

8 Cervical, NOS

Contralateral/bilateral axillary and/or internal mammary

Supraclavicular (transverse

cervical)

Other than above

★ All cases coded using old definition (diagnosed from 1/1/88 to approximately 5/15/90) were reviewed and recoded.

LYMPH NODES

OLD DEFINITION

Effective: 1/1/88 diagnoses

CURRENT DEFINITION

Effective: 1/1/92 diagnoses

Prior cases were not reviewed.

Size of largest axillary node,

ipsilateral (codes 1-4):

Size of largest metastasis in axillary node(s), ipsilateral

(codes 1-4):

VAGINA

C52.9

LYMPH NODES

OLD DEFINITION

Effective: 1/1/88 diagnoses

Change made 1/1/92.

No review needed.

2 Ipsilateral inguinal lymph node(s)

3 Bilateral inguinal lymph node(s)

3 Bilateral inguinal lymph node(s)

3 Bilateral:

Inguinal

Inguinal

Femoral

CERVIX UTERI

C53.0-C53.1, C53.8-C53.9

EXTENSION

(6/92)

OLD DEFINITION

Effective: 1/1/88 diagnoses

60 Extension to:

Lower 1/3 of vagina Rectal and/or bladder wall or NOS

Bullous edema of bladder mucosa

Ureter, intra- and extramural FIGO Stage IIIA

CURRENT DEFINITION

Effective: 5/15/90 (No review of previously coded cases was done.)

60 Extension to:

FIGO Stage IIIA

Lower 1/3 of vagina; vulva Rectal and/or bladder wall

Bullous edema of bladder

mucosa Ureter, intra- and extramural

BODY OF PENIS, OTHER AND UNSPECIFIED MALE GENITAL ORGANS C60.2, C63.0-C63.2, C63.8-C63.9

LYMPH NODES

OLD DEFINITION
Effective: 1/1/88 diagnoses

1 REGIONAL Lymph Nodes

External iliac
Internal iliac

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

CURRENT DEFINITION

Effective: Change made 1/1/92.

Prior cases were not reviewed.

REGIONAL Lymph Nodes
 External iliac
 Internal iliac
 Superficial inguinal (femoral)
 Deep inguinal, Rosenmuller's
 or Cloquet's node
 Pelvic, NOS
 Regional lymph nodes, NOS

PROSTATE GLAND C61.9

EXTENSION

OLD DEFINITION Effective: 1/1/88 diagnoses

CURRENT DEFINITION Effective: 5/15/90 (No review of previously coded cases was done.)

prostate--more than one lobe (B)

25 Multiple nodules confined to 25 Multiple nodules confined to prostate (intracapsular)-more than one lobe (B)

BLADDER

C67.0-C67.9

EXTENSION

OLD DEFINITION

Effective: 1/1/88 diagnoses

CURRENT DEFINITION

Effective: 1/1/88 diagnoses.

Change made 5/15/90.¥

40 Subserosal tissue Perivesical fat 40 Subserosal tissue Perivesical fat/tissue Periureteral fat/tissue

Note 4: Periureteral in code 40 refers only to that portion of the ureter that is intramural to the bladder. All other periureteral involvement would be coded to 60.

¥ All cases diagnosed 1/1/88 to approximately 5/15/90 and coded 60 were reviewed and recoded as necessary.

OLD DEFINITION

Effective: 1/1/88 diagnoses

CURRENT DEFINITION

Effective: Change made 1/1/92.

No review required.

00 Sessile carcinoma-IN SITU; Carcinoma-IN SITU, NOS 00 Sessile (flat) carcinoma -IN SITU;

Carcinoma-IN SITU, NOS

URETHRA, PARAURETHRAL GLAND C68.0-C68.1

EXTENSION

OLD DEFINITION

Effective: 1/1/88 diagnoses

60¥ Corpus cavernosum

Vagina

Bladder neck

Seminal vesicle(s)

70× Other adjacent organs

CURRENT DEFINITION

Effective: 1/1/88 diagnoses

60 Beyond the prostatic capsule

Corpus cavernosum

Vagina, anterior or NOS

Bladder neck

70 Other adjacent organs,

incl. seminal vesicle(s)

★ All cases coded using old definition (diagnosed from 1/1/88 forward) were reviewed and recoded.

EYE AND LACRIMAL GLAND* C69.0-C69.9

SIZE OF PRIMARY TUMOR

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

CURRENT DEFINITION OLD DEFINITION Effective: 1/1/88 diagnoses Effective: 1/1/88 diagnoses

000 No mass; no tumor found

001 Microscopic focus or foci only

	mm	<u>cm</u>
002	<u>≤</u> 2	<u>≤</u> 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 s	tated

Changed only for malignant melanoma of the conjunctiva (C69.0, M-8720-8790) (see page 182)

EXTENSION

OLD DEFINITION		CURRENT	DEFINITION
Effective:	1/1/88 diagnoses	Effective:	1/1/88 diagnoses

00 IN SITU

10 Tumor confined to conjunctiva

40 Intraocular extension

50 Adjacent extraocular extension, excluding orbit

70 Orbit

80 FURTHER extension

85 Metastasis

99 UNKNOWN if extension or metastasis

Replaced with individual schemes for each of the following (see code manual for codes):

C69.0 Conjunctiva

C69.0 Malignant Melanoma of Conjunctiva (M-8720-8790) C69.1-C69.4, C69.8-C69.9 Uvea and Other Eye C69.1-C69.4, C69.8-C69.9

Malignant Melanoma of Uvea and Other Eye (M-8720-8790)

C69.5 Lacrimal Gland

C69.6 Orbit NOS

Retinoblastoma (M-9510-9512)

★ All cases (diagnosed 1/1/88 to approximately 5/15/90) were reviewed and recoded. (continued)

EYE AND LACRIMAL GLAND (continued) C69.1-C69.9

LYMPH NODES

<u>OLD DEFINITION</u> Effective: 1/1/88 diagnoses		CURRENT DEFINITION Effective: 5/15/90 (No review of previously coded cases was done.)		
0	No lymph node involvement	0 No lymph node involvement		
1	REGIONAL Lymph Nodes	1 REGIONAL Lymph Nodes		
	Submandibular nodes Parotid (preauricular) nodes Upper cervical Regional lymph node(s), NOS	Submandibular Parotid (preauricular) Cervical Regional lymph node(s), NOS		
7	DISTANT Lymph Nodes	DISTANT Lymph Nodes		
		7 Other than above		
-				
8	Lymph Nodes, NOS	8 Lymph Nodes, NOS		
9	UNKNOWN; not stated	9 UNKNOWN; not stated		

MALIGNANT MELANOMA OF CONJUNCTIVA** C69.0 (M-8720-8790)

999

Not stated

<u>OLD D</u>	<u>EFINITION</u>	CURRENT	<u>DEFINITION</u>
Effective:	1/1/88 diagnoses	Effective:	1/1/88 diagnoses

SIZE OF PRIMARY TUMOR MEASURED THICKNESS (Depth)* of (from pathology report; operative TUMOR (Breslow's measurement) report; radiographic report; physical examination--in Record actual measurement (in mm) priority order) from Pathology Department 000 No mass; no tumor found 000 No mass; no tumor found 001 Microscopic focus or foci only <u>mm</u> <u>cm</u> mm 0.01 002 <u>≤</u>2 ≤0.2 001 003 3 0.3 002 0.02 009 9 0.9 0.74 074 010 10 1.0 075 0.75 076 0.76 99 9.9 099 . . . 100 100 10.0 1.03 103 104 1.04 . . . 1.05 105 . . . 990+ 99.0+ 990

999 Not stated

9.90+

990

¥Thickness, NOT size, is coded.

(6/92)

** All cases (diagnosed 1/1/88 to approximately 5/15/90) were reviewed and recoded.

BRAIN AND CEREBRAL MENINGES

C70.0, C71.0-C71.9*

OLD DEFINITION

10 Supratentorial tumor confined to 10 Supratentorial tumor confined to CEREBRAL HEMISPHERE (cerebrum) on one side:

Frontal lobe Temporal lobe Parietal lobe Occipital lobe

11 Infratentorial tumor confined to 11 Infratentorial tumor confined to CEREBELLUM on one side:

> Vermis: Median lobe of cerebellum Lateral lobes

BRAIN STEM on one side:

Thalamus, hypothalamus Midbrain (mesencephalon) Pons Medulla oblongata

- 30 Confined to ventricles or tumor invades or encroaches upon ventricular system
- 60 Tumor invades: Bone (skull) Meninges (dura) Major blood vessel(s) Nerves--cranial nerves: spinal cord/canal
- ★ All cases of cerebral meninges (C70.0) (diagnosed 1/1/88 to approximately 5/15/90) were reviewed and recoded.

CURRENT DEFINITION

Effective: 1/1/88 diagnoses Effective: 1/1/88 diagnoses

CEREBRAL HEMISPHERE (cerebrum) or MENINGES of CEREBRAL HEMI-SPHERE on one side:

> Frontal lobe Temporal lobe Parietal lobe Occipital lobe

CEREBELLUM or MENINGES of CEREBELLUM on one side:

> Vermis: Median lobe of cerebellum Lateral lobes

12 Infratentorial tumor confined to 12 Infratentorial tumor confined to BRAIN STEM or MENINGES of BRAIN STEM on one side: Thalamus, hypothalamus Midbrain (mesencephalon) Pons

15 Confined to meninges, NOS

30 Confined to ventricles or tumor invades or encroaches upon ventricular system

Medulla oblongata

60 Tumor invades: Bone (skull) Meninges (dura) Major blood vessel(s) Nerves--cranial nerves; spinal cord/canal

OLD DEFINITION

Effective: 1/1/88 diagnoses

CURRENT DEFINITION

Effective: 7/1/91 (No review of previously coded cases was done.)

15 Confined to meninges, NOS

15 Confined to brain, NOS Confined to meninges, NOS

THYROID GLAND C73.9

LYMPH NODES

OLD DEFINITION

Effective: 1/1/88 diagnoses

CURRENT DEFINITION

Effective: Change made 1/1/92.

Prior cases not reviewed and recoded.

3 Mediastinal nodes

3 Tracheoesophageal (posterior mediastinal Upper anterior mediastinal Mediastinal, NOS

KAPOSI'S SARCOMA OF ALL SITES (M-9140)

OLD DEFINITION

Effective: 1/1/88 diagnoses

CURRENT DEFINITION

Effective: 5/15/90 (No review of previously coded cases was done.)

ASSOCIATED WITH HIV*/AIDS

ASSOCIATED WITH HTLV-4 (AIDS)

001 Yes

002 No

999 Unknown

001 Yes/Present

002 No

999 Unknown

★ Synonyms are HTLV-3 and LAV.

LYMPH NODES

OLD DEFINITION

Effective: 1/1/88 diagnoses

CURRENT DEFINITION

Effective: 1/1/88 diagnoses
Change made 5/15/90. See below.

REGIONAL Lymph Nodes

1 Clinically enlarged palpable regional lymph node(s)

(adenopathy), and either
pathologically negative
regional nodes or no patho-

logical statement

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

7¥ DISTANT Lymph Nodes

Lymph Nodes

1 Clinically enlarged palpable lymph node(s) (adenopathy), and either pathologically negative nodes or no pathological statement

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

lymph node(s)

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

lymph nodes

8¥ Lymph Nodes, NOS

9 UNKNOWN; not stated

9 UNKNOWN; not stated

★ All cases coded using old definition (diagnosed from 1/1/88 to approximately 5/15/90) were reviewed and recoded.

HODGKIN'S DISEASE AND NON-HODGKIN'S LYMPHOMA OF ALL SITES

(excl. Mycosis Fungoides and Sezary's Disease) (M-9590-9595, 9650-9698, 9702-9714)

OLD DEFINITION

All cases diagnosed prior to 1/1/90 coded to:

999 Not stated

CURRENT DEFINITION

Effective: all cases diagnosed

1/1/90 forward

ASSOCIATED WITH HIV*/AIDS

001 Yes/Present

002 No

999 Unknown

¥ Synonyms are HTLV-3 and LAV.

EXTENSION

OLD DEFINITION Effective: 1/1/88 diagnoses

- 21 Localized involvement of a single <u>extralymphatic</u> organ or site and its associated regional lymph node(s) on the same side of the diaphragm with or without involvement of other lymph node regions on the same side of the diaphragm Stage IIE
- of an associated <u>extralymph</u>atic organ or site Stage IIIE

CURRENT DEFINITION Effective: Change made 1/1/92. Prior cases were not reviewed.

- 21 Localized involvement of a single <u>extralymphatic</u> organ or site and its regional lymph node(s) on the same side of the diaphragm with or without involvement of other lymph node regions on the same side of the diaphragm Stage IIE
- 31 (30) plus localized involvement 31 (30) plus localized involvement of an <u>extralymphatic</u> organ or site Stage IIIE

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