BREAST
C50.0-C50.6, C50.8-C50.9
C50.0 Nipple <>
C50.1 Central portion of breast (subareolar) <>
C50.2 Upper-inner quadrant of breast <>
C50.3 Lower-inner quadrant of breast <>
C50.4 Upper-outer quadrant of breast <>
C50.5 Lower-outer quadrant of breast <>
C50.6 Axillary tail of breast <>
C50.8 Overlapping lesion of breast <>
C50.9 Breast, NOS <>
<> Laterality must be coded for this site.

SUMMARY STAGE

0 In situ: Noninvasive; intraepithelial

    Intraductal WITHOUT infiltration
    Lobular neoplasia
    Noninfiltrating

    In situ Paget disease

1 Localized only

    Confined to breast tissue and fat including nipple and/or areola
    Paget disease WITH or WITHOUT underlying tumor

    Localized, NOS

Continued on next page
2 Regional by direct extension only

Attachment or fixation to pectoral muscle or underlying tissue
Deep fixation
Extensive skin involvement:
  En cuirasse
  Erythema
  Inflammation of skin
  Lenticular nodule(s)
  Peau d’orange (skin of orange)
  “Pigskin”
  Satellite nodule(s) in skin of primary breast
  Skin edema
  Ulceration of skin of breast
Inflammatory carcinoma, including diffuse (beyond that directly overlying the tumor) dermal lymphatic permeation or infiltration

Invasion of (or fixation to):
  Chest wall
  Intercostal muscle(s)
  Pectoral fascia or muscle(s)
  Rib(s)
  Serratus anterior muscle(s)
  Subcutaneous tissue

Local infiltration of dermal lymphatics adjacent to primary tumor involving skin by direct extension

Skin infiltration of primary breast including skin of nipple and/or areola

3 Ipsilateral regional lymph node(s) involved only

REGIONAL Lymph Nodes

Axillary, NOS:
  Level I (low) (superficial), NOS [adjacent to tail of breast]:
    Anterior (pectoral)
    Lateral (brachial)
    Posterior (subscapular)
  Level II (mid-level) (central), NOS:
    Interpectoral (Rotter’s)
  Level III (high) (deep), NOS:
    Apical (subclavian)
    Axillary vein
    Infraclavicular (subclavicular)
Internal mammary (parasternal)
Intramammary
Node(s) in axillary fat

Regional lymph node(s), NOS
BREAST
C50.0-C50.6, C50.8-C50.9

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

Codes (2) + (3)

5 Regional, NOS

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

Distant lymph node(s):
  Cervical, NOS
  Contralateral/bilateral axillary
  Contralateral/bilateral internal mammary (parasternal)
  Supraclavicular (transverse cervical)
  Other distant lymph node(s)

Further contiguous extension:
  Skin over:
    Axilla
    Contralateral (opposite) breast
    Sternum
    Upper abdomen

Metastasis:
  Adrenal (suprarenal) gland
  Bone other than adjacent rib
  Contralateral (opposite) breast - if stated as metastatic
  Lung
  Ovary
  Satellite nodule(s) in skin other than primary breast

9 Unknown if extension or metastasis

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 regional by direct extension. These terms would have been ignored in the 1977 Summary Staging Guide and cases would have been considered localized in the absence of further disease.

Note 3: Consider “fixation, NOS” as involvement of pectoralis muscle; code regional by direct extension.

Note 4: Since “inflammatory carcinoma” was not specifically categorized in either the Historic Stage or the 1977 Staging Guide, previous cases of inflammatory carcinoma may have been coded to either regional or distant.

### Considered distant in Historic Stage
*** Considered distant in 1977 Summary Staging Guide
ANATOMIC DRAWINGS OF THE FEMALE GENITAL SYSTEM

Mesosalpinx (of broad ligament)
Infundibulum
Fimbriae
Suspensory ligament
(contains ovarian vessels)
Ovary
Mesometrium (of broad ligament)
Myometrium

The “broad ligament” is like drapery that covers the uterus and ovaries and fallopian tubes.

THE UTERUS, RIGHT FALLOPIAN TUBE, AND RIGHT OVARY

Fundus of uterus
Fallopian tube
OL
Infundibulum
Cervical canal
Cervix (of uterus)
External os
Vagina (cut open)

Body of uterus
Isthmus of uterus
Vaginal fornix
Internal os
Ovary

OL = Ovarian ligament

THE UTERUS, VAGINA, LEFT FALLOPIAN TUBE, AND LEFT OVARY
ANATOMIC DAWINGS OF THE FEMALE GENITAL SYSTEM

SAGITTAL CUT THROUGH THE FEMALE PELVIS

VULVA
VULVA (including Skin of Vulva) [excluding Melanoma (page 172), Kaposi Sarcoma (page 274), Mycosis Fungoides (page 176), Sezary Disease (page 176), and Other Lymphomas (page 278)]
C51.0-C51.2, C51.8-C51.9
C51.0 Labium majus
C51.1 Labium minus
C51.2 Clitoris
C51.8 Overlapping lesion of vulva
C51.9 Vulva, NOS

SUMMARY STAGE

0 In situ: Noninvasive; intraepithelial
           Bowen disease; intraepidermal
           FIGO Stage 0

1 Localized only

Invasive cancer WITH or WITHOUT stromal invasion confined to:
     Musculature
     Submucosa
     Vulva including skin

     Localized, NOS

2 Regional by direct extension only

Extension to perineum

Extension to:
     Anus
     Bladder, NOS excluding mucosa
           Bladder wall
     Perianal skin
     Rectal wall, NOS
     Rectum, NOS excluding mucosa
     Urethra
     Vagina

     FIGO Stage III
VULVA (including Skin of Vulva) [excluding Melanoma (page 172), Kaposi Sarcoma (page 274), Mycosis Fungoides (page 176), Sezary Disease (page 176), and Other Lymphomas (page 278)]
C51.0-C51.2, C51.8-C51.9

3 Regional lymph node(s) involved only

REGIONAL Lymph Nodes (including bilateral or contralateral nodes)

Inguinal, NOS:
  Deep, NOS:
    Node of Cloquet or Rosenmuller (highest deep inguinal)
    Superficial (femoral)
    FIGO Stage III

Regional lymph node(s), NOS

Bilateral/contralateral regional lymph node(s)
FIGO Stage IVA

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

Codes (2) + (3)

5 Regional, NOS

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

Distant lymph node(s):
  Iliac, NOS:
    Common
    External**
    Internal (hypogastric), NOS:
      Obturator
  Pelvic, NOS
  Other distant lymph node(s)

Extension to:
  Bladder mucosa
  Pelvic bone (pubic bone)
  Perineal body##
  Rectal mucosa##
  Upper urethral mucosa

Further contiguous extension

Metastasis
FIGO Stage IVB; IV, NOS
VULVA (including Skin of Vulva) [excluding Melanoma (page 172), Kaposi Sarcoma (page 274), Mycosis Fungoides (page 176), Sezary Disease (page 176), and Other Lymphomas (page 278)]
C51.0-C51.2, C51.8-C51.9

9 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 disease (M-9701) of vulva are included in the mycosis fungoides scheme.

Note 3: FIGO Stage I, IA, IB and II are defined by size of tumor, involvement of vulva or vulva and perineum, and depth of stromal invasion and are included as localized disease if only the vulva is involved and as regional if both the vulva and perineum are involved.

## Considered regional in Historic Stage
### Considered distant in Historic Stage
** Considered regional in 1977 Summary Staging Guide
*** Considered distant in 1977 Summary Staging Guide
VAGINA
C52.9
C52.9 Vagina, NOS

SUMMARY STAGE

0 **In situ:** Noninvasive; intraepithelial

1 **Localized only**

   Invasive cancer confined to submucosa (stroma##)
   FIGO Stage I

   Musculature involved##

   Localized, NOS

2 **Regional by direct extension only**

   Extension to:
   - Bladder, NOS excluding mucosa #####
   - Bladder wall#####
   - Cervix
   - Cul de sac (rectouterine pouch)###
   - Paravaginal soft tissue
   - Rectal wall, NOS#####
   - Rectum, NOS excluding mucosa ######
   - Rectovaginal septum
   - Vesicovaginal septum
   - Vulva
   FIGO Stage II

   Extension to pelvic wall#####
   FIGO Stage III

3 **Regional lymph node(s) involved only**

   REGIONAL Lymph Nodes

   All parts of vagina:
   - Pelvic lymph nodes:
     - Iliac, NOS:
       - Common
       - External
       - Internal (hypogastric), NOS:
       - Obturator
     - Middle sacral (promontorial) (Gerota’s node)

   Code 3 continued on next page
3 Regional lymph node(s) involved only (continued)

**Lower third of vagina:**
- Ipsilateral or bilateral: **###***
  - Inguinal, NOS: **###***
  - Superficial (femoral)**###***

**Upper two-thirds of vagina:**
- Pelvic, NOS **###***

Regional lymph node(s), NOS
FIGO Stage III

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

Codes (2) + (3)

5 Regional, NOS

FIGO Stage III, NOS

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

Distant lymph node(s):
- Aortic, NOS:
  - Lateral (lumbar)
  - Para-aortic
  - Periaortic
- Inguinal for upper two-thirds of the vagina only
- Retroperitoneal, NOS
- Other distant lymph node(s)

Extension to:
- Bladder mucosa (excluding bullous edema)**
- Rectal mucosa**
- FIGO Stage IVA

Extension beyond true pelvis:
- Extension to urethra
  - FIGO Stage IVA, not further specified

Further contiguous extension

Metastasis:
- FIGO Stage IVB

FIGO Stage IV, NOS

9 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 regional by direct extension.
CERVIX UTERI
C53.0-C53.1, C53.8-C53.9
C53.0 Endocervix
C53.1 Exocervix
C53.8 Overlapping lesion of cervix uteri
C53.9 Cervix uteri

SUMMARY STAGE

0 In situ: Noninvasive; intraepithelial
Preinvasive
Cancer in situ WITH endocervical gland involvement
FIGO Stage 0
CIN (Cervical intraepithelial neoplasia) Grade III

1 Localized only

Invasive cancer confined to cervix uteri:

Minimal microscopic stromal invasion ≤ 3 mm in depth and ≤ 7 mm in horizontal spread
FIGO Stage IA1

“Microinvasion”
Tumor WITH invasive component > 3 mm and ≤ 5 mm in depth, taken from the base
of the epithelium, and ≤ 7 mm in horizontal spread
FIGO Stage IA2

Invasive cancer confined to cervix and tumor > 5 mm in depth and/or > 7 mm in horizontal
spread
FIGO Stage IB

FIGO Stage I, not further specified

Localized, NOS:
Confined to cervix uteri
Confined to uterus, NOS (except corpus uteri, NOS )

2 Regional by direct extension only

Extension to/involvement of:
Corpus uteri
Cul de sac (rectouterine pouch)
Upper 2/3 of vagina including fornices
Vagina, NOS
Vaginal wall, NOS
FIGO Stage IIA

Code 2 continued on next page
2 Regional by direct extension only (continued)

Extension to:
   Ligament(s):
      Broad
      Cardinal
      Uterosacral
   Parametrium (paracervical soft tissue)
FIGO Stage IIB

Extension to:
   Bladder, NOS excluding mucosa
   Bladder wall
   Lower 1/3 of vagina
   Rectal wall, NOS
   Rectum, NOS excluding mucosa
   Ureter, intra- and extramural***
   Vulva
   Bullous edema of bladder mucosa
FIGO Stage IIIA

Extension to:
   Fallopian tube(s)#####
   Ovary(ies)#####
   Pelvic wall(s)
   Urethra#####
FIGO Stage IIIB

Tumor causes hydronephrosis or nonfunctioning kidney
FIGO Stage IIIB

FIGO Stage III, NOS

3 Regional lymph node(s) involved only

REGIONAL Lymph Nodes
   Iliac, NOS:
      Common
      External
      Internal (hypogastric), NOS:
         Obturator
   Paracervical
   Parametrial
   Pelvic, NOS
   Sacral, NOS:
      Lateral (laterosacral)
      Middle (promontorial) (Gerota’s node)
      Presacral
      Uterosacral

Regional lymph node(s), NOS
CERVIX UTERI
C53.0-C53.1, C53.8-C53.9

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

Codes (2) + (3)

5 Regional, NOS

FIGO Stage III, NOS

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

Distant lymph node(s):
  Aortic, NOS:
    Lateral (lumbar)
    Para-aortic
    Periaortic
  Inguinal
  Mediastinal
  Other distant lymph node(s)

Extension to:
  Bladder mucosa (excluding bullous edema)##
  Rectal mucosa##

Further contiguous extension beyond true pelvis:
  Sigmoid colon
  Small intestine

Metastasis

FIGO Stage IV, IVA, IVB

9 Unknown if extension or metastasis

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 regional by direct extension. In both the Historic Stage and the 1977 Summary Staging Guide “frozen pelvis” was considered distant.

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.

## Considered regional in Historic Stage
### Considered distant in Historic Stage
*** Considered distant in 1977 Summary Staging Guide
CORPUS UTERI

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.

<table>
<thead>
<tr>
<th>PRIMARY SITE</th>
<th>ENDOMETRIUM (mucosa)</th>
<th>MYOMETRIUM (3 layers)</th>
<th>SEROSA (tunica serosa)</th>
</tr>
</thead>
<tbody>
<tr>
<td>Corpus Uteri (C54._)</td>
<td>Columnar Epithelium</td>
<td>Basement Membrane</td>
<td>Stroma (lamina propria)</td>
</tr>
</tbody>
</table>

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.
CORPUS UTERI; UTERUS, NOS
C54.0-C54.3, C54.8-C54.9, C55.9
C54.0 Isthmus uteri
C54.1 Endometrium
C54.2 Myometrium
C54.3 Fundus uteri
C54.8 Overlapping lesion of corpus uteri
C54.9 Corpus uteri
C55.9 Uterus, NOS

Note: In most cases, gestational trophoblastic tumors (ICD-O-3 morphology codes M9100-9105) are coded to placenta, C58.9.

SUMMARY STAGE

0 In situ: Noninvasive; intraepithelial
Preinvasive
FIGO Stage 0

1 Localized only

Confined to endometrium (stroma)
FIGO Stage IA

Invasion of myometrium/serosa of corpus (tunica serosa)
FIGO Stage IB
FIGO Stage IC

Localized, NOS
FIGO Stage I not further specified

2 Regional by direct extension only

Extension to/involvement of:
Cervix uteri, NOS
FIGO Stage II, NOS

Endocervical glandular involvement only
FIGO Stage IIA

Cervical stromal invasion
FIGO Stage IIB

Extension or metastasis within true pelvis:
Fallopian tube(s)
Ligament(s):
   Broad
   Round
   Uterosacral

Code 2 continued on next page
2 Regional by direct extension only (continued)

Ovary(ies)
Parametrium
Pelvic serosa###
Pelvic tunica serosa###
Ureter***
Vulva***

Cancer cells in ascites
Cancer cells in peritoneal washings

FIGO Stage IIIA

Extension or metastasis###:
Bladder, NOS excluding mucosa
Bladder wall
Bowel wall, NOS
Rectum, NOS excluding mucosa***
Vagina
Pelvic wall(s)###

FIGO Stage IIIB

3 Regional lymph node(s) involved only

REGIONAL Lymph Nodes

Aortic, NOS###:
Lateral (lumbar)
Para-aortic
Periaortic
Iliac:
Common
External
Internal (hypogastric), NOS:
Obturator
Paracervical###
Parametrial
Pelvic, NOS
Sacral, NOS###:
Lateral (laterosaral)
Middle (promontorial) (Gerota’s node)
Presacral
Utersacral

FIGO Stage IIIC

Regional lymph node(s), NOS
CORPUS UTERI; UTERUS, NOS
C54.0-C54.3, C54.8-C54.9, C55.9

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

Codes (2) + (3)

5 Regional, NOS

FIGO Stage III, NOS

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

Distant lymph node(s):
   Inguinal, NOS:
      Deep, NOS:
         Node of Cloquet or Rosenmüller (highest deep inguinal)
         Superficial inguinal (femoral)**
      Other distant lymph node(s)

   Extension to:
      Bladder mucosa (excluding bullous edema)##
      Bowel mucosa##
      FIGO Stage IVA

   Further contiguous extension:##
      Abdominal serosa (peritoneum)
      Cul de sac (rectouterine pouch)
      Sigmoid colon
      Small intestine

Metastasis
   FIGO Stage IVB

Continued on next page
9 Unknown if extension or metastasis

Note 1: This scheme should also be used for sarcomas of the myometrium even though such cases are excluded from UICC/AJCC staging of corpus uteri.

Note 2: Adnexa is defined as the tubes, ovaries and ligament(s).

Note 3: “Frozen pelvis” is a clinical term which means tumor extends to pelvic sidewall(s). In the absence of a statement of involvement, code as regional by direct extension. In both the Historic Stage and the 1977 Summary Staging Guide “frozen pelvis” was considered distant.

Note 4: If the clinician says “adnexa palpated” but doesn’t mention lymph nodes, assume lymph nodes are not involved.

Note 5: If either exploratory/definitive surgery is done without mention of lymph nodes, assume nodes are negative.

Note 6: Sounding of the corpus is no longer a prognostic factor.

Note 7: Extension to the bowel mucosa or bladder mucosa must be proven by biopsy in order to rule out bullous edema.

\(^a\) Since “cancer cells in ascites or in peritoneal washings” was not specifically categorized in either the Historic Stage or in the 1977 Summary Staging Guide, previous cases may have been coded to either regional or distant.

### Considered regional in Historic Stage
### Considered distant in Historic Stage
*
** Considered localized in 1977 Summary Staging Guide
*** Considered distant in 1977 Summary Staging Guide
OVARY
C56.9
C56.9 Ovary <>
<>Laterality must be coded for this site.

SUMMARY STAGE

0 In situ: Noninvasive; intraepithelial
       Preinvasive

1 Localized only

   Tumor limited to one ovary, capsule intact, no tumor on ovarian surface
   FIGO Stage IA

   Tumor limited to both ovaries, capsule(s) intact, no tumor on ovarian surface
   FIGO Stage IB

   Tumor limited to ovary(ies):
       Unknown if capsule(s) ruptured or if one or both ovaries involved

       Localized, NOS
       FIGO Stage I, not further specified

2 Regional by direct extension only

   Implants on ovary(ies)#####
   Tumor limited to ovary(ies), capsule(s) ruptured#*
   Tumor limited to ovary(ies) WITH malignant cells in ascites or peritoneal washingsa
   Tumor on ovarian surface####
   FIGO Stage IC

   Extension to or implants##### on:
       Adnexa b
       Fallopian tube(s)b
       Uterus***
   FIGO Stage IIA

Code 2 continued on next page
2 Regional by direct extension only (continued)

Extension to or implants on:
Pelvic tissue:
Adjacent peritoneum
Ligament(s):
  Broad<sup>1</sup>
  Ovarian
  Round
  Suspensory
Mesovarium<sup>1</sup>
Pelvic wall
FIGO Stage IIB

Extension to pelvic tissues or pelvic wall WITH malignant cells in ascites or peritoneal washings<sup>a</sup>
FIGO Stage IIC
Extension or discontinuous metastasis to:
  Bladder
  Bladder serosa
  Cul de sac (rectouterine pouch)
  Parametrium
  Rectosigmoid
  Rectum
  Sigmoid colon
  Sigmoid mesentery
  Ureter (pelvic portion)
  Uterine serosa
FIGO Stage II, not further specified

3 Regional lymph node(s) involved only

REGIONAL Lymph Nodes (including contralateral or bilateral nodes)

Aortic, NOS:###
  Lateral (lumbar)
  Para-aortic
  Periaortic
Iliac, NOS:
  Common
  External
  Internal (hypogastric), NOS:
    Obturator
  Inguinal###
  Lateral sacral (laterosacral)###
Pelvic, NOS
Retroperitoneal, NOS###

Regional lymph node(s), NOS
OVARY
C56.9

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

Codes (2) + (3)

5 Regional, NOS

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

Microscopic peritoneal implants beyond pelvis, including peritoneal surface of liver
FIGO Stage IIIA

Macroscopic peritoneal implants beyond pelvis, ≤2 cm in diameter, including peritoneal
surface of liver
FIGO Stage IIIB

Peritoneal implants beyond pelvis, >2 cm in diameter, including peritoneal surface of liver
FIGO Stage IIIC

Peritoneal implants, NOS
FIGO Stage III, not further specified

Distant lymph node(s)

Further contiguous extension or metastasis:
   Abdominal mesentery
   Colon except sigmoid
   Diaphragm
   Gallbladder
   Kidney
   Liver (peritoneal surface)
   Omentum
   Pancreas
   Pericolic gutter
   Peritoneum, NOS (excluding adjacent pelvic peritoneum)
   Small intestine
   Spleen
   Stomach
   Ureter (retroperitoneal portion)

Metastasis, including:
   Liver parenchymal metastasis
   Pleural fluid (positive cytology)
FIGO Stage IV
9 Unknown if extension or metastasis

Note 1: Ascites, NOS is considered negative.

Note 2: Peritoneal implants outside the pelvis must be microscopically confirmed. Peritoneal implants may also be called seeding, salting, talcum powder appearance, or studding.

Note 3: If implants are mentioned, determine whether they are in the pelvis or in the abdomen and code appropriately to regional by direct extension or to distant. If not stated, code to distant.

a Since “cancer cells in ascites or in peritoneal washings” was not specifically categorized in either the Historic Stage or in the 1977 Summary Staging Guide, previous cases may have been coded to either regional or distant.

b Involvement of contralateral fallopian tube, broad ligament, mesovarium, or adnexa was considered distant in 1977 Summary Staging Guide.

# Considered localized in Historic Stage
### Considered distant in Historic Stage
* Considered localized in 1977 Summary Staging Guide
*** Considered distant in 1977 Summary Staging Guide
**FALLOPIAN TUBE**

C57.0

C57.0 Fallopian tube>

<>Laterality must be coded for this site.

**SUMMARY STAGE**

0 **In situ:** Noninvasive; intraepithelial  
FIGO Stage 0

1 **Localized only**

Confined to fallopian tube(s)  
Extension onto or through tubal serosa  
Malignant ascites\(^a\)  
Malignant peritoneal washings\(^a\)  
FIGO Stage I

Localized, NOS

2 **Regional by direct extension only**

Extension to:  
Broad ligament, ipsilateral  
Corpus uteri  
Cul de sac (rectouterine pouch)***  
Mesosalpinx, ipsilateral ***  
Omentum ***  
Ovary, contralateral***  
Ovary, ipsilateral  
Peritoneum  
Rectosigmoid ***  
Sigmoid ***  
Small intestine ***  
Uterus, NOS  
FIGO Stage II

3 **Regional lymph node(s) involved only**

REGIONAL Lymph Nodes

Aortic, NOS###:  
   Lateral (lumbar)  
   Para-aortic  
   Periaortie

**Code 3 continued on next page**
3 Regional lymph node(s) involved only (continued)

Iliac, NOS:
  Common
  External
  Internal (hypogastric), NOS:
    Obturator
    Inguinal***
  Lateral sacral (laterosacral)#####
  Pelvic, NOS
  Retroperitoneal, NOS###

Regional lymph node(s), NOS
FIGO Stage IIIC

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

  Codes (2) + (3)

5 Regional, NOS

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

  Distant lymph node(s)

  Further contiguous extension

  Metastasis:
    Pelvic extension with malignant cells in ascites or peritoneal washings
    Peritoneal implants outside the pelvis

  FIGO Stage IIIA, IIIB, III NOS; IV

9 Unknown if extension or metastasis

a Since “cancer cells in ascites or in peritoneal washings” was not specifically categorized in either the Historic Stage or in the 1977 Summary Staging Guide, previous cases may have been coded to either regional or distant.

### Considered distant in Historic Stage

*** Considered distant in 1977 Summary Staging Guide
BROAD AND ROUND LIGAMENTS, PARAMETRIUM, UTERINE ADNEXA
C57.1-C57.4
C57.1 Broad ligament
C57.2 Round ligament
C57.3 Parametrium
C57.4 Uterine adnexa

SUMMARY STAGE

0 In situ: Noninvasive; intraepithelial

1 Localized only

Confined to tissue or organ of origin

Localized, NOS

2 Regional by direct extension only

Extension to:
  Corpus uteri
  Fallopian tube for ligaments
  Mesosalpinx, ipsilateral
  Ovary, ipsilateral
  Peritoneum
  Uterus, NOS

3 Regional lymph node(s) involved only

REGIONAL Lymph Nodes

Aortic, NOS:
  Lateral (lumbar)
  Para-aortic
  Periaortic
Iliac, NOS:
  Common
  External
  Internal (hypogastric), NOS:
    Obturator
Inguinal
Lateral sacral (laterosacral)
Pelvic, NOS
Retroperitoneal, NOS

Regional lymph node(s), NOS
BROAD AND ROUND LIGAMENTS, PARAMETRIUM, UTERINE ADNEXA
C57.1-C57.4

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

Codes (2) + (3)

5 Regional, NOS

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

Distant lymph node(s)

Extension to:##
  Cervix uteri
  Cul de sac (rectouterine pouch)
  Omentum
  Ovary, contralateral
  Rectosigmoid
  Sigmoid
  Small intestine

Further contiguous extension

Metastasis

9 Unknown if extension or metastasis

##  Considered regional in Historic Stage
OTHER AND UNSPECIFIED FEMALE GENITAL ORGANS
C57.7-C57.9
C57.7 Other specified parts of female genital organs
C57.8 Overlapping lesion of female genital organs
C57.9 Female genital tract, NOS

SUMMARY STAGE

0 In situ: Noninvasive; intraepithelial

1 Localized only

Confined to site of origin

Localized, NOS

2 Regional by direct extension only

Extension to:
Adjacent tissue(s), NOS
Connective tissue
See definition of connective tissue on page 14.

Adjacent organs/structures

Female genital organs:
Adnexa
Broad ligament(s)
Cervix uteri
Corpus uteri
Fallopian tube(s)
Ovary(ies)
Parametrium
Round ligament(s)
Uterus, NOS
Vagina

3 Regional lymph node(s) involved only

Regional lymph node(s), NOS

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

Codes (2) + (3)

5 Regional, NOS
OTHER AND UNSPECIFIED FEMALE GENITAL ORGANS
C57.7-C57.9

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

Distant lymph node(s)

Further contiguous extension:
  Other organs of pelvis

Metastasis

9 Unknown if extension or metastasis
PLACENTA
C58.9
C58.9 Placenta

SUMMARY STAGE

0 In situ: Noninvasive; intraepithelial

1 Localized only

Confined to placenta

Localized, NOS

2 Regional by direct extension only

Extension to:
Adjacent connective tissue

Other genital structures:
Broad ligament(s)
Cervix uteri
Corpus uteri
Fallopian tube(s)
Ovary(ies)
Uterus, NOS
Vagina

3 Regional lymph node(s) involved only

REGIONAL Lymph Nodes

Aortic, NOS:
Lateral (lumbar)
Para-aortic
Peri-aortic
Iliac, NOS:
Common
External
Internal (hypogastric), NOS:
Obturator
Parametrial
Pelvic, NOS
Sacral:
Lateral (laterosacral)
Middle (promontorial) (Gerota’s node)
Presacral
Uterosacral

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

Codes 2 + 3

5 Regional, NOS

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

Distant lymph node(s):
   Superficial inguinal (femoral)
   Other distant node(s)

Further contiguous extension

Metastasis:
   Lung

9 Unknown if extension or metastasis