

Appendix C

Site-Specific Coding Modules

Note: The pages with “updated July 1, 2005” in the footer are replacement pages that incorporate *Collaborative Staging Manual* revisions from version 1.01 (August 12, 2004) and/or version 1.02 (April 25, 2005). Page numbering in this appendix has not changed.

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Collaborative Staging Codes

Lip, Upper

Lip (Vermilion or Labial Mucosa)

C00.0, C00.3

C00.0 External upper lip

C00.3 Mucosa of upper lip

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

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

CS Tumor Size

SEE STANDARD TABLE

Lip, Upper

CS Extension

Code	Description	TNM	SS77	SS2000
00	In situ; noninvasive; intraepithelial	Tis	IS	IS
10	Invasive tumor confined to: Labial mucosa (inner lip) Lamina propria Multiple foci Submucosa (superficial invasion) Vermilion surface Superficial extension to: Skin of lip Subcutaneous soft tissue of lip	*	L	L
20	Musculature	*	L	L
30	Localized, NOS	*	L	L
50	Buccal mucosa (inner cheek) Commissure Opposite (both) lip(s)	*	RE	RE
51	Gingiva	*	RE	RE

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70	Maxilla	T4	RE	RE
74	Upper lip/commissure: Nose	T4	RE	D
75	Tongue	T4	D	D
76	Skin of face/neck	T4	D	D
77	Cortical bone (other than code 70) Floor of mouth Inferior alveolar nerve	T4	D	D
80	Further contiguous extension	T4	D	D
95	No evidence of primary tumor	T0	U	U
99	Unknown extension Primary tumor cannot be assessed Not documented in patient record	TX	U	U

*For Extension codes 10, 20, 30, 50, and 51 ONLY, the T category is assigned based on the value of CS Tumor Size, as shown in the Extension Size Table for this site.

Lip, Upper
CS TS/Ext-Eval
SEE STANDARD TABLE

Lip, Upper
CS Lymph Nodes

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

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

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

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

Code	Description	TNM	SS77	SS2000
00	None; no regional lymph node involvement	N0	NONE	NONE
10	Single positive ipsilateral regional node: Other groups Facial Buccinator (buccal) Nasolabial Parotid Infra-auricular Intraparotid Periparotid Preauricular Regional lymph node, NOS	*	RN	RN
11	Single positive ipsilateral regional node: Level I node Submandibular (submaxillary) Submental	*	D	RN

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

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

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

Lip, Upper
CS Reg Nodes Eval
SEE STANDARD TABLE

Lip, Upper
Reg LN Pos
SEE STANDARD TABLE

Lip, Upper
Reg LN Exam
SEE STANDARD TABLE

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Lip, Upper CS Mets at DX

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

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

Lip, Upper CS Mets Eval SEE STANDARD TABLE

Lip, Upper CS Site-Specific Factor 1 Size of Lymph Nodes

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

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

Lip, Upper

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

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

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

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

Lip, Upper

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

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

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

Collaborative Staging Codes

Lip, Lower

Lip (Vermilion or Labial Mucosa)

C00.1, C00.4, C00.6

C00.1 External lower lip

C00.4 Mucosa of lower lip

C00.6 Commissure of lip

Note: AJCC includes labial mucosa (C00.4) with buccal mucosa (C06.0)

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

CS Tumor Size

SEE STANDARD TABLE

Lip, Lower

CS Extension

Code	Description	TNM	SS77	SS2000
00	In situ; noninvasive; intraepithelial	Tis	IS	IS
10	Invasive tumor confined to: Labial mucosa (inner lip) Lamina propria Multiple foci Submucosa (superficial invasion) Vermilion surface Superficial extension to: Skin of lip Subcutaneous soft tissue of lip	*	L	L
20	Musculature	*	L	L
30	Localized, NOS	*	L	L
50	Buccal mucosa (inner cheek) Commissure Opposite (both) lip(s)	*	RE	RE
51	Gingiva	*	RE	RE

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70	Mandible	T4	RE	RE
74	Nose	T4	RE	D
75	Tongue	T4	D	D
76	Skin of face/neck	T4	D	D
77	Cortical bone (other than code 70) Floor of mouth Inferior alveolar nerve	T4	D	D
80	Further contiguous extension	T4	D	D
95	No evidence of primary tumor	T0	U	U
99	Unknown extension Primary tumor cannot be assessed Not documented in patient record	TX	U	U

*For Extension codes 10, 20, 30, 50, and 51 ONLY, the T category is assigned based on the value of CS Tumor Size, as shown in the Extension Size Table for this site.

Lip, Lower

CS TS/Ext-Eval

SEE STANDARD TABLE

Lip, Lower

CS Lymph Nodes

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

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

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

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

Code	Description	TNM	SS77	SS2000
00	None; no regional lymph node involvement	N0	NONE	NONE
10	Single positive ipsilateral regional node: Level I node Submandibular (submaxillary) Submental Other groups Facial: Mandibular Regional lymph node, NOS	*	RN	RN
11	Single positive ipsilateral regional node: Level II node Upper deep cervical Upper jugular	*	D	RN

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

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

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

Lip, Lower
CS Reg Nodes Eval
SEE STANDARD TABLE

Lip, Lower
Reg LN Pos
SEE STANDARD TABLE

Lip, Lower
Reg LN Exam
SEE STANDARD TABLE

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Lip, Lower CS Mets at DX

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

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

Lip, Lower CS Mets Eval SEE STANDARD TABLE

Lip, Lower CS Site-Specific Factor 1 Size of Lymph Nodes

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

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

Lip, Lower

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

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

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

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

Lip, Lower

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

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

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

Collaborative Staging Codes

Other Lip

Lip (Vermilion or Labial Mucosa)

C00.2, C00.5, C00.8-C00.9

C00.2 External lip, NOS

C00.5 Mucosa of lip, NOS

C00.8 Overlapping lesion of lip

C00.9 Lip, NOS (excludes skin of lip C44.0)

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

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

CS Tumor Size

SEE STANDARD TABLE

Other Lip

CS Extension

Code	Description	TNM	SS77	SS2000
00	In situ; noninvasive; intraepithelial	Tis	IS	IS
10	Invasive tumor confined to: Labial mucosa (inner lip) Lamina propria Multiple foci Submucosa (superficial invasion) Vermilion surface Superficial extension to: Skin of lip Subcutaneous soft tissue of lip	*	L	L
20	Musculature	*	L	L
30	Localized, NOS	*	L	L
50	Buccal mucosa (inner cheek) Commissure Opposite (both) lip(s)	*	RE	RE

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51	Gingiva	*	RE	RE
75	Tongue	T4	D	D
76	Skin of face/neck	T4	D	D
77	Cortical bone Floor of mouth Inferior alveolar nerve	T4	D	D
80	Further contiguous extension	T4	D	D
95	No evidence of primary tumor	T0	U	U
99	Unknown extension Primary tumor cannot be assessed Not documented in patient record	TX	U	U

*For Extension codes 10, 20, 30, 50, and 51 ONLY, the T category is assigned based on the value of CS Tumor Size, as shown in the Extension Size Table for this site.

Other Lip

CS TS/Ext-Eval

SEE STANDARD TABLE

Other Lip

CS Lymph Nodes

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

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

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

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

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

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12	<p>Single positive ipsilateral regional node:</p> <p>Level V node</p> <p>Posterior cervical</p> <p>Posterior triangle (spinal accessory and transverse cervical) (upper, middle, and lower corresponding to the levels that define upper, middle, and lower jugular nodes)</p> <p>Level VI node</p> <p>Anterior deep cervical</p> <p>Laterotracheal</p> <p>Paralaryngeal</p> <p>Paratracheal</p> <p>Prelaryngeal</p> <p>Pretracheal</p> <p>Recurrent laryngeal</p> <p>Level VII node</p> <p>Upper mediastinum (for other mediastinal nodes see CS Mets at DX)</p> <p>Other groups</p> <p>Intraparotid</p> <p>Parapharyngeal</p> <p>Periparotid</p> <p>Retropharyngeal</p> <p>Sub-occipital</p> <p>Supraclavicular, NOS (See Note 4)</p>	*	D	D
18	Stated as N1, no other information	N1	RN	RN
19	Stated as N2a, no other information	N2a	RN	RN
20	Multiple positive ipsilateral nodes listed in code 10	*	RN	RN
21	Multiple positive ipsilateral nodes listed in code 11	*	D	RN
22	Multiple positive ipsilateral nodes listed in code 12	*	D	D
29	Stated as N2b, no other information	N2b	RN	RN
30	Regional lymph nodes as listed in code 10: Positive ipsilateral node(s), not stated if single or multiple	*	RN	RN
31	Regional lymph nodes as listed in code 11: Positive ipsilateral node(s), not stated if single or multiple	*	D	RN
32	Regional lymph nodes as listed in code 12: Positive ipsilateral node(s), not stated if single or multiple	*	D	D
40	Regional lymph nodes as listed in code 10: Positive bilateral or contralateral nodes	*	RN	RN
41	Regional lymph nodes as listed in code 11: Positive bilateral or contralateral nodes	*	D	RN
42	Regional lymph nodes as listed in code 12: Positive bilateral or contralateral nodes	*	D	D
49	Stated as N2c, no other information	N2c	RN	RN
50	Regional lymph nodes as listed in code 10: Positive node(s) not stated if ipsilateral, or bilateral, or contralateral AND not stated if single or multiple	*	RN	RN

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

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

Other Lip
CS Reg Nodes Eval
SEE STANDARD TABLE

Other Lip
Reg LN Pos
SEE STANDARD TABLE

Other Lip
Reg LN Exam
SEE STANDARD TABLE

Other Lip
CS Mets at DX

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

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

Other Lip

CS Mets Eval

SEE STANDARD TABLE

Other Lip

CS Site-Specific Factor 1 Size of Lymph Nodes

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

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

Other Lip

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

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

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

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

Other Lip

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

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

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

Other Lip

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

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

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

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

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

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

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

Other Lip

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

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

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

Base of Tongue, Lingual Tonsil

CS Lymph Nodes

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

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

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

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

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

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

*For codes 10, 12, 20, 22, 30, 32, 40, 42, 49, 50, 52 and 80 ONLY, the N category is assigned based on the value of Site-Specific Factor 1, Size of Lymph Nodes, using the extra table, Lymph Nodes Size Table for this site.

Base of Tongue, Lingual Tonsil

CS Reg Nodes Eval

SEE STANDARD TABLE

Base of Tongue, Lingual Tonsil

Reg LN Pos

SEE STANDARD TABLE

Base of Tongue, Lingual Tonsil

Reg LN Exam

SEE STANDARD TABLE

Base of Tongue, Lingual Tonsil

CS Mets at DX

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

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

Base of Tongue, Lingual Tonsil

CS Mets Eval

SEE STANDARD TABLE

Base of Tongue, Lingual Tonsil

CS Site-Specific Factor 1 Size of Lymph Nodes

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

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

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

Base of Tongue, Lingual Tonsil

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

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

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

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

Base of Tongue, Lingual Tonsil

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

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

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

Collaborative Staging Codes

Anterior 2/3 of Tongue, Tip, Border, and Tongue, NOS

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

- C02.0 Dorsal surface of tongue, NOS
- C02.1 Border of tongue
- C02.2 Ventral surface of tongue, NOS
- C02.3 Anterior 2/3 of tongue, NOS
- C02.8 Overlapping lesion of tongue
- C02.9 Tongue, NOS

<ul style="list-style-type: none"> CS Tumor Size CS Extension CS TS/Ext-Eval CS Lymph Nodes CS Reg Nodes Eval Reg LN Pos Reg LN Exam CS Mets at DX CS Mets Eval 	<p>CS Site-Specific Factor 1 - Size of Lymph Nodes</p> <p>CS Site-Specific Factor 2 - Extracapsular Extension, Lymph Nodes for Head and Neck</p> <p>CS Site-Specific Factor 3 - Levels I-III, Lymph Nodes for Head and Neck</p> <p>CS Site-Specific Factor 4 - Levels IV-V and Retropharyngeal Lymph Nodes for Head and Neck</p> <p>CS Site-Specific Factor 5 - Levels VI-VII and Facial Lymph Nodes for Head and Neck</p> <p>CS Site-Specific Factor 6 - Parapharyngeal, Parotid, Preauricular, and Sub-Occipital Lymph Nodes, Lymph Nodes for Head and Neck</p>	<p>The following tables are available at the collaborative staging website:</p> <ul style="list-style-type: none"> Histology Exclusion Table AJCC Stage Extension Size Table Lymph Nodes Size Table
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Anterior 2/3 of Tongue, Tip, Border, and Tongue, NOS

CS Tumor Size

SEE STANDARD TABLE

Anterior 2/3 of Tongue, Tip, Border, and Tongue, NOS

CS Extension

Code	Description	TNM	SS77	SS2000
00	In situ; noninvasive; intraepithelial	Tis	IS	IS
10	Invasive tumor on one side confined to: Lamina propria Submucosa	*	L	L
20	Musculature, intrinsic or NOS	*	L	L
30	Localized, NOS Midline tumor	*	L	L
40	Tumor crosses midline	*	L	L
50	Base of tongue Floor of mouth Gingiva, lower Retromolar trigone	*	RE	RE
53	Sublingual gland	*	RE	RE

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60	Lateral pharyngeal wall Soft palate, inferior surface Tonsillar pillars and fossae Tonsils	*	D	RE
70	Mandible	T4a	RE	D
72	(60) + (70)	T4a	D	D
74	Maxilla Maxillary sinus	T4a	D	D
75	Musculature, extrinsic: Genioglossus Geniohyoid Hyoglossus Mylohyoid Palatoglossus Styloglossus	T4a	D	D
80	Further contiguous extension	T4b	D	D
95	No evidence of primary tumor	T0	U	U
99	Unknown extension Primary tumor cannot be assessed Not documented in patient record	TX	U	U

*For codes 10, 20, 30, 40, 50, 53, and 60 ONLY, the T category is assigned based on the value of CS Tumor Size, as shown in the Extension Size Table for this site.

Anterior 2/3 of Tongue, Tip, Border, and Tongue, NOS
CS TS/Ext-Eval
SEE STANDARD TABLE

Anterior 2/3 of Tongue, Tip, Border, and Tongue, NOS
CS Lymph Nodes

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

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

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

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

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

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

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

*For codes 10, 12, 20, 22, 30, 32, 40, 42, 49, 50, 52 and 80 ONLY, the N category is assigned based on the value of Site-Specific Factor 1, Size of Lymph Nodes, using the extra table, Lymph Nodes Size Table for this site.

Anterior 2/3 of Tongue, Tip, Border, and Tongue, NOS

CS Reg Nodes Eval

SEE STANDARD TABLE

Anterior 2/3 of Tongue, Tip, Border, and Tongue, NOS

Reg LN Pos

SEE STANDARD TABLE

Anterior 2/3 of Tongue, Tip, Border, and Tongue, NOS

Reg LN Exam

SEE STANDARD TABLE

Anterior 2/3 of Tongue, Tip, Border, and Tongue, NOS

CS Mets at DX

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

Code	Description	TNM	SS77	SS2000
00	No; none	M0	NONE	NONE
10	Distant lymph node(s) Mediastinal Distant lymph node(s), NOS	M1	D	D
40	Distant metastases except distant lymph node(s) (code 10) Distant metastasis, NOS Carcinomatosis	M1	D	D

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50	(10) + (40) Distant lymph node(s) plus other distant metastases	M1	D	D
99	Unknown if distant metastasis Distant metastasis cannot be assessed Not documented in patient record	MX	U	U

**Anterior 2/3 of Tongue, Tip, Border, and Tongue, NOS
CS Mets Eval
SEE STANDARD TABLE**

**Anterior 2/3 of Tongue, Tip, Border, and Tongue, NOS
CS Site-Specific Factor 1 Size of Lymph Nodes**

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

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

Anterior 2/3 of Tongue, Tip, Border, and Tongue, NOS

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

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

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

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

Anterior 2/3 of Tongue, Tip, Border, and Tongue, NOS

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

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

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

Collaborative Staging Codes

Gum, Upper

C03.0

C03.0 Upper gum

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

CS Tumor Size

SEE STANDARD TABLE

Gum, Upper

CS Extension

Note: Superficial erosion alone of bone/tooth socket by gingival primary is not sufficient to code as bone involvement.

Code	Description	TNM	SS77	SS2000
00	In situ; noninvasive; intraepithelial	Tis	IS	IS
10	Invasive tumor confined to lamina propria (mucoperiosteum) (stroma)	*	L	L
30	Localized, NOS	*	L	L
50	Buccal mucosa (inner cheek) Floor of mouth Labial mucosa (inner lip), lip Tongue	*	RE	RE
55	Facial muscle, NOS Subcutaneous soft tissue of face	*	RE	RE
60	Lateral pharyngeal wall (tonsillar pillars and fossae, tonsils)	*	RE	RE
70	Maxilla	T4a	RE	RE
72	Deep muscle of tongue: Genioglossus Hyoglossus Palatoglossus Styloglossus	T4a	RE	RE

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74	Maxillary antrum (sinus) Nasal cavity	T4a	D	D
76	Skin	T4a	D	D
79	Skull	T4b	D	D
80	Further contiguous extension, including: Masticator space Pterygoid plates Skull base Encases internal carotid artery	T4b	D	D
95	No evidence of primary tumor	T0	U	U
99	Unknown extension Primary tumor cannot be assessed Not documented in patient record	TX	U	U

*For codes 10, 30, 50, 55, 60, and 65 ONLY, the T category is assigned based on the value of CS Tumor Size, as shown in the Extension Size Table for this site.

Gum, Upper

CS TS/Ext-Eval

SEE STANDARD TABLE

Gum, Upper

CS Lymph Nodes

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

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

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

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

Code	Description	TNM	SS77	SS2000
00	None; no regional lymph node involvement	N0	NONE	NONE
10	Single positive ipsilateral regional node: Retropharyngeal, NOS Regional lymph node, NOS	*	RN	RN
12	Single positive ipsilateral regional node: Level V node Posterior cervical Posterior triangle (spinal accessory and transverse cervical) (upper, middle, and lower corresponding to the levels that define upper, middle, and lower jugular nodes) Level VI node Anterior deep cervical Laterotracheal Paralaryngeal Paratracheal Prelaryngeal	*	D	D

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

*For codes 10, 12, 20, 22, 30, 32, 40, 42, 49, 50, 52 and 80 ONLY, the N category is assigned based on the value of Site-Specific Factor 1, Size of Lymph Nodes, using the extra table, Lymph Nodes Size Table for this site.

Gum, Upper
CS Reg Nodes Eval
SEE STANDARD TABLE

Gum, Upper
Reg LN Pos
SEE STANDARD TABLE

Gum, Upper
Reg LN Exam
SEE STANDARD TABLE

Gum, Upper
CS Mets at DX

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

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

Gum, Upper
CS Mets Eval
SEE STANDARD TABLE

Gum, Upper

CS Site-Specific Factor 1 Size of Lymph Nodes

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

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

Gum, Upper

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

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

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

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

Gum, Upper

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

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

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

Gum, Upper

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

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

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

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

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

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

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

Gum, Upper

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

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

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

**Collaborative Staging Codes
Gum, Lower and Retromolar Area
Retromolar gingiva (trigone)**

C03.1, C06.2

C03.1 Lower gum

C06.2 Retromolar area

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

**Gum, Lower and Retromolar Area
CS Extension**

Note: Superficial erosion alone of bone/tooth socket by gingival primary is not sufficient to code as bone involvement (code 70).

Code	Description	TNM	SS77	SS2000
00	In situ; noninvasive; intraepithelial	Tis	IS	IS
10	Invasive tumor confined to lamina propria (mucoperiosteum)(stroma)	*	L	L
30	Localized, NOS	*	L	L
50	Buccal mucosa (inner cheek) Floor of mouth Labial mucosa (inner lip), lip Tongue	*	RE	RE
55	Facial muscle, NOS Subcutaneous soft tissue of face	*	RE	RE
60	Lateral pharyngeal wall (tonsillar pillars and fossae, tonsils)	*	RE	RE
65	Soft palate including uvula	*	RE	RE
70	Mandible	T4a	RE	RE

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72	Deep muscle of tongue: Genioglossus Hyoglossus Palatoglossus Styloglossus	T4a	RE	RE
76	Skin	T4a	D	D
79	Skull	T4b	D	D
80	Further contiguous extension, including: Masticator space Pterygoid plates Skull base Encases internal carotid artery	T4b	D	D
95	No evidence of primary tumor	T0	U	U
99	Unknown extension Primary tumor cannot be assessed Not documented in patient record	TX	U	U

*For codes 10, 30, 50, 55, 60, and 65 ONLY, the T category is assigned based on the value of CS Tumor Size, as shown in the Extension Size Table for this site.

Gum, Lower and Retromolar Area

CS TS/Ext-Eval

SEE STANDARD TABLE

Gum, Lower and Retromolar Area

CS Lymph Nodes

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

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

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

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

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

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

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

*For codes 10, 12, 20, 22, 30, 32, 40, 42, 49, 50, 52 and 80 ONLY, the N category is assigned based on the value of Site-Specific Factor 1, Size of Lymph Nodes, using the extra table, Lymph Nodes Size Table for this site.

**Gum, Lower and Retromolar Area
CS Reg Nodes Eval
SEE STANDARD TABLE**

**Gum, Lower and Retromolar Area
Reg LN Pos
SEE STANDARD TABLE**

**Gum, Lower and Retromolar Area
Reg LN Exam
SEE STANDARD TABLE**

**Gum, Lower and Retromolar Area
CS Mets at DX**

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

Code	Description	TNM	SS77	SS2000
00	No; none	M0	NONE	NONE
10	Distant lymph node(s) Mediastinal Distant lymph node(s), NOS	M1	D	D
40	Distant metastases except distant lymph node(s) (code 10) Distant metastasis, NOS Carcinomatosis	M1	D	D
50	(10) + (40) Distant lymph node(s) plus other distant metastases	M1	D	D

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99	Unknown if distant metastasis Distant metastasis cannot be assessed Not documented in patient record	MX	U	U
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Gum, Lower and Retromolar Area

CS Mets Eval

SEE STANDARD TABLE

Gum, Lower and Retromolar Area

CS Site-Specific Factor 1 Size of Lymph Nodes

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

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

Gum, Lower and Retromolar Area

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

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

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

Code	Description
000	No extracapsular extension
001	Extracapsular extension clinically, not assessed pathologically Nodes described as "fixed", not assessed pathologically

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005	Extracapsular extension present pathologically
888	Not applicable; no lymph node involvement
999	Unknown if regional lymph node(s) involved, not stated Regional lymph node(s) cannot be assessed Not documented in patient record

Gum, Lower and Retromolar Area

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

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

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

Gum, Lower and Retromolar Area

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

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

Code	Description
000	No lymph node involvement in Levels IV or V or retropharyngeal
100	Level IV lymph node(s) involved
010	Level V lymph node(s) involved

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

Gum, Lower and Retromolar Area

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

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

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

Gum, Lower and Retromolar Area

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

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

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

Collaborative Staging Codes

Gum, NOS

C03.9

C03.9 Gum, NOS

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

CS Tumor Size

SEE STANDARD TABLE

Gum, NOS

CS Extension

Note: Superficial erosion alone of bone/tooth socket by gingival primary is not sufficient to code as bone involvement.

Code	Description	TNM	SS77	SS2000
00	In situ; noninvasive; intraepithelial	Tis	IS	IS
10	Invasive tumor confined to lamina propria (mucoperiosteum) (stroma)	*	L	L
30	Localized, NOS	*	L	L
50	Buccal mucosa (inner cheek) Labial mucosa (inner lip), lip	*	RE	RE
55	Facial muscle, NOS Subcutaneous soft tissue of face	*	RE	RE
60	Lateral pharyngeal wall (tonsillar pillars and fossae, tonsils)	*	RE	RE
72	Deep muscle of tongue: Genioglossus Hyoglossus Palatoglossus Styloglossus	T4a	RE	RE

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76	Skin	T4a	D	D
79	Skull	T4b	D	D
80	Further contiguous extension, including: Masticator space Pterygoid plates Skull base Encases internal carotid artery	T4b	D	D
95	No evidence of primary tumor	T0	U	U
99	Unknown extension Primary tumor cannot be assessed Not documented in patient record	TX	U	U

*For codes 10, 30, 50, 55, 60, and 65 ONLY, the T category is assigned based on the value of CS Tumor Size, as shown in the Extension Size Table for this site.

Gum, NOS

CS TS/Ext-Eval

SEE STANDARD TABLE

Gum, NOS

CS Lymph Nodes

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

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

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

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

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

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10, cont'd	Cervical, NOS Deep cervical, NOS Internal jugular, NOS Mandibular, NOS Regional lymph node, NOS			
12	Single positive ipsilateral regional node: Level V node Posterior cervical Posterior triangle (spinal accessory and transverse cervical) (upper, middle, and lower corresponding to the levels that define upper, middle, and lower jugular nodes) Level VI node Anterior deep cervical Laterotracheal Paralaryngeal Paratracheal Prelaryngeal Pretracheal Recurrent laryngeal Level VII node Upper mediastinum (for other mediastinal nodes see CS Mets at DX) Other groups Intraparotid Parapharyngeal Periparotid Retropharyngeal Sub-occipital Supraclavicular, NOS (See Note 4)	*	D	D
18	Stated as N1, no other information	N1	RN	RN
19	Stated as N2a, no other information	N2a	RN	RN
20	Multiple positive ipsilateral nodes listed in code 10	*	RN	RN
22	Multiple positive ipsilateral nodes listed in code 12	*	D	D
29	Stated as N2b, no other information	N2b	RN	RN
30	Regional lymph nodes as listed in code 10: Positive ipsilateral node(s), not stated if single or multiple	*	RN	RN
32	Regional lymph nodes as listed in code 12: Positive ipsilateral node(s), not stated if single or multiple	*	D	D
40	Regional lymph nodes as listed in code 10: Positive bilateral or contralateral nodes	*	RN	RN
42	Regional lymph nodes as listed in code 12: Positive bilateral or contralateral nodes	*	D	D
49	Stated as N2c, no other information	N2c	RN	RN
50	Regional lymph nodes as listed in code 10: Positive node(s), not stated if ipsilateral, or bilateral, or contralateral AND not stated if single or multiple	*	RN	RN
52	Regional lymph nodes as listed in code 12: Positive node(s), not stated if ipsilateral, or bilateral, or contralateral AND not stated if single or multiple	*	D	D

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60	Stated as N2, NOS	N2NOS	RN	RN
70	Stated as N3, no other information	N3	RN	RN
80	Lymph nodes, NOS	*	RN	RN
99	Unknown; not stated Regional lymph node(s) cannot be assessed Not documented in patient record	NX	U	U

*For codes 10, 20, 30, 40, 49, 50 and 80 ONLY, the N category is assigned based on the value of Site-Specific Factor 1, Size of Lymph nodes, using the extra table, Lymph Nodes Size Table for this site.

Gum, NOS
CS Reg Nodes Eval
SEE STANDARD TABLE

Gum, NOS
Reg LN Pos
SEE STANDARD TABLE

Gum, NOS
Reg LN Exam
SEE STANDARD TABLE

Gum, NOS
CS Mets at DX

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

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

Gum, NOS
CS Mets Eval
SEE STANDARD TABLE

Collaborative Staging Codes

Floor of Mouth

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

- C04.0 Anterior floor of mouth
- C04.1 Lateral floor of mouth
- C04.8 Overlapping lesion of floor of mouth
- C04.9 Floor of mouth, NOS

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

CS Tumor Size

SEE STANDARD TABLE

Floor of Mouth

CS Extension

Code	Description	TNM	SS77	SS2000
00	In situ; noninvasive; intraepithelial	Tis	IS	IS
10	Invasive tumor on one side confined to: Lamina propria Submucosa	*	L	L
30	Localized, NOS	*	L	L
40	Tumor crosses midline	*	L	L
50	Anterior 2/3 of tongue Base of tongue Gingiva (alveolar ridge), lower	*	RE	RE
53	Sublingual gland, including ducts Submandibular (submaxillary) glands, including ducts	*	RE	RE
60	Epiglottis Glossoepiglottic fold Glossopharyngeal sulcus Lateral pharyngeal wall Pharyngeal (lingual) surface	*	RE	RE

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60, cont'd	Pharyngoepiglottic fold Tonsillar pillars and fossae Tonsils Vallecula			
62	Extension to deep extrinsic muscle of tongue: Genioglossus Geniohyoid Hyoglossus Mylohyoid Palatoglossus Styloglossus	T4a	L	L
63	(62) + any of [(50) or (53) or (60)]	T4a	RE	RE
64	Subcutaneous soft tissue of chin/neck	T4a	RE	RE
70	Mandible	T4a	RE	RE
76	Skin of undersurface of chin/neck	T4a	RE	RE
77	Further contiguous extension: Maxillary sinus	T4a	D	D
80	Further contiguous extension: Base of skull Masticator space Pterygoid plates	T4b	D	D
95	No evidence of primary tumor	T0	U	U
99	Unknown extension Primary tumor cannot be assessed Not documented in patient record	TX	U	U

***Note:** For Extension codes 10, 20, 30, 40, 50, 53, and 60 ONLY, the T category is assigned based on the value of CS Tumor Size, as shown in the Extension Size Table for this site.

Floor of Mouth

CS TS/Ext-Eval

SEE STANDARD TABLE

Floor of Mouth

CS Lymph Nodes

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

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

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

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

table begins on next page

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Code	Description	TNM	SS77	SS2000
00	None; no regional lymph node involvement	N0	NONE	NONE
10	Single positive ipsilateral regional node: Level I node Submandibular (submaxillary) Submental Level II node Jugulodigastric (subdigastric) Upper deep cervical Upper jugular Level III node Middle deep cervical Mid jugular Level IV node Jugulo-omohyoid (supraomohyoid) Lower deep cervical Lower jugular Cervical, NOS Deep cervical, NOS Internal jugular, NOS Mandibular, NOS Sublingual Regional lymph node, NOS	*	RN	RN
12	Single positive ipsilateral regional node: Level V node Posterior cervical Posterior triangle (spinal accessory and transverse cervical) (upper, middle, and lower corresponding to the levels that define upper, middle, and lower jugular nodes) Level VI node Anterior deep cervical Laterotracheal Paralaryngeal Paratracheal Prelaryngeal Pretracheal Recurrent laryngeal Level VII node Upper mediastinum (for other mediastinal nodes see CS Mets at DX) Other groups Intraparotid Parapharyngeal Periparotid Retropharyngeal Sub-occipital Supraclavicular, NOS (See Note 4)	*	D	D
18	Stated as N1, no other information	N1	RN	RN
19	Stated as N2a, no other information	N2a	RN	RN
20	Multiple positive ipsilateral nodes listed in code 10	*	RN	RN
22	Multiple positive ipsilateral nodes listed in code 12	*	D	D

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29	Stated as N2b, no other information	N2b	RN	RN
30	Regional lymph nodes as listed in code 10: Positive ipsilateral nodes(s), not stated if single or multiple	*	RN	RN
32	Regional lymph nodes as listed in code 12: Positive ipsilateral node(s), not stated if single or multiple	*	D	D
40	Regional lymph nodes as listed in code 10: Positive bilateral or contralateral nodes	*	RN	RN
42	Regional lymph nodes as listed in code 12: Positive bilateral or contralateral nodes	*	D	D
49	Stated as N2c, no other information	N2c	RN	RN
50	Regional lymph nodes as listed in code 10: Positive node(s), not stated if ipsilateral, or bilateral, or contralateral AND not stated if single or multiple	*	RN	RN
52	Regional lymph nodes as listed in code 12: Positive node(s), not stated if ipsilateral, or bilateral, or contralateral AND not stated if single or multiple	*	D	D
60	Stated as N2, NOS	N2NOS	RN	RN
70	Stated as N3, no other information	N3	RN	RN
80	Lymph nodes, NOS	*	RN	RN
99	Unknown; not stated Regional lymph node(s) cannot be assessed Not documented in patient record	NX	U	U

*For codes 10, 20, 30, 40, 49, 50 and 80 ONLY, the N category is assigned based on the value of Site-Specific Factor 1, Size of Lymph Nodes, using the extra table, Lymph Nodes Size Table for this site.

Floor of Mouth
CS Reg Nodes Eval
SEE STANDARD TABLE

Floor of Mouth
Reg LN Pos
SEE STANDARD TABLE

Floor of Mouth
Reg LN Exam
SEE STANDARD TABLE

Floor of Mouth

CS Mets at DX

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

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

Floor of Mouth

CS Mets Eval

SEE STANDARD TABLE

Floor of Mouth

CS Site-Specific Factor 1 Size of Lymph Nodes

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

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

Floor of Mouth

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

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

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

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

Floor of Mouth

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

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

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

Floor of Mouth

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

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

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

Floor of Mouth

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

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

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

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

Floor of Mouth

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

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

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

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Collaborative Staging Codes

Hard Palate

C05.0

C05.0 Hard palate

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

CS Tumor Size

SEE STANDARD TABLE

Hard Palate

CS Extension

Code	Description	TNM	SS77	SS2000
00	In situ; noninvasive; intraepithelial	Tis	IS	IS
10	Invasive tumor on one side confined to mucoperiosteum (stroma)	*	L	L
30	Localized, NOS	*	L	L
40	Tumor crosses midline	*	L	L
50	Buccal mucosa (inner cheek) Gingiva, upper Glossopalatine arch Pharyngopalatine arch Soft palate Uvula	*	RE	RE
70	Maxillary bone Palatine bone	T4a	RE	RE
74	Deep muscle of tongue Floor of nose Maxillary antrum (sinus) Nasal cavity Nasopharynx Skin of face Sphenoid bone	T4a	D	D

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76	Pterygoid plate	T4b	D	D
80	Further contiguous extension	T4b	D	D
95	No evidence of primary tumor	T0	U	U
99	Unknown extension Primary tumor cannot be assessed Not documented in patient record	TX	U	U

*For Extension codes 10, 30, 40, and 50 ONLY, the T category is assigned based on the value of CS Tumor Size, as shown in the Extension Size Table for this site.

Hard Palate

CS TS/Ext-Eval

SEE STANDARD TABLE

Hard Palate

CS Lymph Nodes

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

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

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

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

Code	Description	TNM	SS77	SS2000
00	None; no regional lymph node involvement	N0	NONE	NONE
10	Single positive ipsilateral regional node: Level I node Submandibular (submaxillary) Submental Level II node Jugulodigastric (subdigastric) Upper deep cervical Upper jugular Level III node Middle deep cervical Mid jugular Level IV node Jugulo-omohyoid (supraomohyoid) Lower deep cervical Lower jugular Cervical, NOS Deep cervical, NOS Internal jugular, NOS Mandibular, NOS Retropharyngeal Regional lymph node, NOS	*	RN	RN
11	Single positive ipsilateral regional node: Level I node Submental	*	D	RN

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12	<p>Single positive ipsilateral regional node:</p> <p>Level V node</p> <p>Posterior cervical</p> <p>Posterior triangle (spinal accessory and transverse cervical) (upper, middle, and lower corresponding to the levels that define upper, middle, and lower jugular nodes)</p> <p>Level VI node</p> <p>Anterior deep cervical</p> <p>Laterotracheal</p> <p>Paralaryngeal</p> <p>Paratracheal</p> <p>Prelaryngeal</p> <p>Pretracheal</p> <p>Recurrent laryngeal</p> <p>Level VII node</p> <p>Upper mediastinum (for other mediastinal nodes see CS Mets at DX)</p> <p>Other groups</p> <p>Parapharyngeal</p> <p>Retropharyngeal</p> <p>Sub-occipital</p> <p>Supraclavicular, NOS (See Note 4)</p>	*	D	D
18	Stated as N1, no other information	N1	RN	RN
19	Stated as N2a, no other information	N2a	RN	RN
20	Multiple positive ipsilateral nodes listed in code 10	*	RN	RN
21	Multiple positive ipsilateral nodes listed in code 11	*	D	RN
22	Multiple positive ipsilateral nodes listed in code 12	*	D	D
29	Stated as N2b, no other information	N2b	RN	RN
30	Regional lymph nodes as listed in code 10: Positive ipsilateral node(s), not stated if single or multiple	*	RN	RN
31	Regional lymph nodes as listed in code 11: Positive ipsilateral node(s), not stated if single or multiple	*	D	RN
32	Regional lymph nodes as listed in code 12: Positive ipsilateral node(s), not stated if single or multiple	*	D	D
40	Regional lymph nodes as listed in code 10: Positive bilateral or contralateral nodes	*	RN	RN
41	Regional lymph nodes as listed in code 11: Positive bilateral or contralateral nodes	*	D	RN
42	Regional lymph nodes as listed in code 12: Positive bilateral or contralateral nodes	*	D	D
49	Stated as N2c, no other information	N2c	RN	RN
50	Regional lymph nodes as listed in code 10: Positive node(s) not stated if ipsilateral, or bilateral, or contralateral AND not stated if single or multiple	*	RN	RN
51	Regional lymph nodes as listed in code 11: Positive node(s) not stated if ipsilateral, or bilateral, or contralateral AND not stated if single or multiple	*	D	RN

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

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

Hard Palate
CS Reg Nodes Eval
SEE STANDARD TABLE

Hard Palate
Reg LN Pos
SEE STANDARD TABLE

Hard Palate
Reg LN Exam
SEE STANDARD TABLE

Hard Palate
CS Mets at DX

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

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

Hard Palate

CS Mets Eval

SEE STANDARD TABLE

Hard Palate

CS Site-Specific Factor 1 Size of Lymph Nodes

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

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

Hard Palate

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

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

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

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

Hard Palate

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

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

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

Hard Palate

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

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

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

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

Hard Palate

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

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

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

Hard Palate

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

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

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

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

Collaborative Staging Codes

Soft Palate, Uvula

C05.1-C05.2

C05.1 Soft Palate, NOS

C05.2 Uvula

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 (C11.3).

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

CS Tumor Size

SEE STANDARD TABLE

Soft Palate, Uvula

CS Extension

Code	Description	TNM	SS77	SS2000
00	In situ; noninvasive; intraepithelial	Tis	IS	IS
10	Invasive tumor on one side confined to: Lamina propria Submucosa	*	L	L
20	Musculature invaded	*	L	L
30	Localized, NOS	*	L	L
40	Tumor crosses midline	*	L	L
50	Buccal mucosa (inner cheek) Gum (gingiva), upper	*	RE	RE
60	Lateral pharyngeal wall Tonsillar pillars and fossae Tonsils	*	RE	RE
65	Hard palate	T4a	RE	RE

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70	Mandible Maxilla Palatine bone (bone of hard palate)	T4a	D	D
71	Pterygoid muscle, medial or NOS	T4a	D	D
72	Tongue Deep extrinsic muscle of tongue	T4a	D	D
73	Larynx	T4a	D	D
74	Maxillary antrum (sinus) Nasopharynx, lateral or NOS	T4b	D	D
77	Nasal cavity	T4a	RE	D
78	Pterygoid muscle, lateral Pterygoid plates Note: For medial pterygoid muscle or pterygoid muscle, NOS, see code 71	T4b	RE	D
79	[(77) or (78)] with any of [(70) to (76)]	T4b	D	D
80	Further contiguous extension Carotid artery Skull base	T4b	D	D
95	No evidence of primary tumor	T0	U	U
99	Unknown extension Primary tumor cannot be assessed Not documented in patient record	TX	U	U

*For Extension codes 10, 20, 40, 50, and 60 ONLY, the T category is assigned based on the value of CS Tumor Size, as shown in the Extension Size Table for this site.

Soft Palate, Uvula

CS TS/Ext-Eval

SEE STANDARD TABLE

Soft Palate, Uvula

CS Lymph Nodes

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

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

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

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

table begins on next page

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Code	Description	TNM	SS77	SS2000
00	None; no regional lymph node involvement	N0	NONE	NONE
10	Single positive ipsilateral regional node: Level I node Submandibular (submaxillary) Submental Level II node Jugulodigastric (subdigastric) Upper deep cervical Upper jugular Level III node Middle deep cervical Mid jugular Level IV node Jugulo-omohyoid (supraomohyoid) Lower deep cervical Lower jugular Cervical, NOS Deep cervical, NOS Internal jugular, NOS Mandibular, NOS Regional lymph node, NOS	*	RN	RN
11	Single positive ipsilateral regional node: Other groups Retropharyngeal	*	D	RN
12	Single positive ipsilateral regional node: Level V node Posterior cervical Posterior triangle (spinal accessory and transverse cervical) (upper, middle, and lower corresponding to the levels that define upper, middle, and lower jugular nodes) Level VI node Anterior deep cervical Laterotracheal Paralaryngeal Paratracheal Prelaryngeal Pretracheal Recurrent laryngeal Level VII node Upper mediastinum (for other mediastinal nodes see CS Mets at DX) Other groups Parapharyngeal Retropharyngeal Sub-occipital Supraclavicular, NOS (See Note 4)	*	D	D
18	Stated as N1, no other information	N1	RN	RN
19	Stated as N2a, no other information	N2a	RN	RN
20	Multiple positive ipsilateral nodes listed in code 10	*	RN	RN
21	Multiple positive ipsilateral nodes listed in code 11	*	D	RN

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22	Multiple positive ipsilateral nodes listed in code 12	*	D	D
29	Stated as N2b, no other information	N2b	RN	RN
30	Regional lymph nodes as listed in code 10: Positive ipsilateral node(s), not stated if single or multiple	*	RN	RN
31	Regional lymph nodes as listed in code 11: Positive ipsilateral node(s), not stated if single or multiple	*	D	RN
32	Regional lymph nodes as listed in code 12: Positive ipsilateral node(s), not stated if single or multiple	*	D	D
40	Regional lymph nodes as listed in code 10: Positive bilateral or contralateral nodes	*	RN	RN
41	Regional lymph nodes as listed in code 11: Positive bilateral or contralateral nodes	*	D	RN
42	Regional lymph nodes as listed in code 12: Positive bilateral or contralateral nodes	*	D	D
49	Stated as N2c, no other information	N2c	RN	RN
50	Regional lymph nodes as listed in code 10: Positive node(s) not stated if ipsilateral, or bilateral, or contralateral AND not stated if single or multiple	*	RN	RN
51	Regional lymph nodes as listed in code 11: Positive node(s) not stated if ipsilateral, or bilateral, or contralateral AND not stated if single or multiple	*	D	RN
52	Regional lymph nodes as listed in code 12: Positive node(s), not stated if ipsilateral, or bilateral, or contralateral AND not stated if single or multiple	*	D	D
60	Stated as N2, NOS	N2NOS	RN	RN
70	Stated as N3, no other information	N3	RN	RN
80	Lymph nodes, NOS, no other information	*	RN	RN
99	Unknown; not stated Regional lymph node(s) cannot be assessed Not documented in patient record	NX	U	U

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

Soft Palate, Uvula
CS Reg Nodes Eval
SEE STANDARD TABLE

Soft Palate, Uvula
Reg LN Pos
SEE STANDARD TABLE

Soft Palate, Uvula

Reg LN Exam

SEE STANDARD TABLE

Soft Palate, Uvula

CS Mets at DX

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

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

Soft Palate, Uvula

CS Mets Eval

SEE STANDARD TABLE

Soft Palate, Uvula

CS Site-Specific Factor 1 Size of Lymph Nodes

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

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

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

Soft Palate, Uvula

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

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

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

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

Soft Palate, Uvula

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

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

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

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

Soft Palate, Uvula

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

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

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

Soft Palate, Uvula

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

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

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

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

Soft Palate, Uvula

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

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

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

Collaborative Staging Codes

Other Mouth

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

C05.8 Overlapping lesion of palate

C05.9 Palate, NOS

C06.8 Overlapping lesion of other and unspecified parts of mouth

C06.9 Mouth, NOS

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

CS Tumor Size

SEE STANDARD TABLE

Other Mouth

CS Extension

Code	Description	TNM	SS77	SS2000
00	In situ; noninvasive; intraepithelial	Tis	IS	IS
10	Invasive tumor confined to: Lamina propria Submucosa	*	L	L
20	Musculature invaded	*	L	L
30	Localized, NOS	*	L	L
50	Adjacent oral cavity	*	RE	RE
60	Extension to oropharynx: Inferior surface of soft palate Lateral pharyngeal wall Lingual surface of epiglottis Vallecula	*	RE	RE
70	Extension to adjacent structures: Mandible Maxilla Maxillary antrum (sinus) Nasal cavity	T4a	D	D

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70 cont'd	Skin of face/neck Tongue			
71	Deep extrinsic muscle of tongue	T4a	D	D
72	Skull	T4b	D	D
75	Base of skull Encases internal carotid artery Masticator space Pterygoid plates	T4b	D	D
80	Further contiguous extension	T4b	D	D
95	No evidence of primary tumor	T0	U	U
99	Unknown extension Primary tumor cannot be assessed Not documented in patient record	TX	U	U

*For Extension codes 10, 20, 30, 50, and 60 ONLY, the T category is assigned based on the value of Tumor Size, as shown in the Extension Size Table for this site.

Other Mouth

CS TS/Ext-Eval

SEE STANDARD TABLE

Other Mouth

CS Lymph Nodes

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

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

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

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

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

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10, cont'd	Cervical, NOS Deep cervical, NOS Internal jugular, NOS Mandibular, NOS Regional lymph node, NOS			
12	Single positive ipsilateral regional node: Level V node Posterior cervical Posterior triangle (spinal accessory and transverse cervical) (upper, middle, and lower corresponding to the levels that define upper, middle, and lower jugular nodes) Level VI node Anterior deep cervical Laterotracheal Paralaryngeal Paratracheal Prelaryngeal Pretracheal Recurrent laryngeal Level VII node Upper mediastinum (for other mediastinal nodes see CS Mets at DX) Other groups Intraparotid Parapharyngeal Periparotid Retropharyngeal Sub-occipital Supraclavicular, NOS (See Note 4)	*	D	D
18	Stated as N1, no other information	N1	RN	RN
19	Stated as N2a, no other information	N2a	RN	RN
20	Multiple positive ipsilateral nodes listed in code 10	*	RN	RN
22	Multiple positive ipsilateral nodes listed in code 12	*	D	D
29	Stated as N2b, no other information	N2b	RN	RN
30	Regional lymph nodes as listed in code 10: Positive ipsilateral node(s), not stated if single or multiple	*	RN	RN
32	Regional lymph nodes as listed in code 12: Positive ipsilateral node(s), not stated if single or multiple	*	D	D
40	Regional lymph nodes as listed in code 10: Positive bilateral or contralateral nodes	*	RN	RN
42	Regional lymph nodes as listed in code 12: Positive bilateral or contralateral nodes	*	D	D
49	Stated as N2c, no other information	N2c	RN	RN
50	Regional lymph nodes as listed in code 10: Positive node(s), not stated if ipsilateral, or bilateral, or contralateral AND not stated if single or multiple	*	RN	RN
52	Regional lymph nodes as listed in code 12: Positive node(s), not stated if ipsilateral, or bilateral, or contralateral AND not stated if single or multiple	*	D	D

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60	Stated as N2, NOS	N2NOS	RN	RN
70	Stated as N3, no other information	N3	RN	RN
80	Lymph nodes, NOS	*	RN	RN
99	Unknown; not stated Regional lymph node(s) cannot be assessed Not documented in patient record	NX	U	U

*For codes 10, 12, 20, 22, 30, 32, 40, 42, 49, 50, 52 and 80 ONLY, the N category is assigned based on the value of Site-Specific Factor 1, Size of Lymph Nodes, using the extra table, Lymph Nodes Size Table for this site.

Other Mouth

CS Reg Nodes Eval

SEE STANDARD TABLE

Other Mouth

Reg LN Pos

SEE STANDARD TABLE

Other Mouth

Reg LN Exam

SEE STANDARD TABLE

Other Mouth

CS Mets at DX

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

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

Other Mouth

CS Mets Eval

SEE STANDARD TABLE

Collaborative Staging Codes

Cheek (Buccal) Mucosa, Vestibule

C06.0-C06.1

C06.0 Cheek mucosa

C06.1 Vestibule of mouth

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

CS Tumor Size

SEE STANDARD TABLE

Cheek (Buccal) Mucosa, Vestibule

CS Extension

Code	Description	TNM	SS77	SS2000
00	In situ; noninvasive; intraepithelial	Tis	IS	IS
10	Invasive tumor confined to: Lamina propria Submucosa	*	L	L
20	Musculature (buccinator)	*	RE	L
30	Localized, NOS	*	L	L
50	Lip(s) including commissure	*	RE	RE
51	Gingiva	*	RE	RE
60	Lateral pharyngeal wall Tonsillar pillars and fossae Tonsils	*	RE	RE
65	Subcutaneous soft tissue of cheek	T4a	RE	RE
66	Skin of cheek (WITH or WITHOUT ulceration)	T4a	RE	D
67	Maxillary sinus	T4a	D	D

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70	Bone (cortical): Mandible Maxilla	T4a	D	D
73	Skull	T4b	D	D
75	Tongue Deep extrinsic muscle of tongue	T4a	D	D
79	Other contiguous extension: Base of skull Encases internal carotid artery Masticator space Pterygoid plates	T4b	D	D
80	Further contiguous extension: Hard palate Soft palate	T4b	D	D
95	No evidence of primary tumor	T0	U	U
99	Unknown extension Primary tumor cannot be assessed Not documented in patient record	TX	U	U

*For Extension codes 10, 20, 30, 50, 51, and 60 ONLY, the T category is assigned based on the value of CS Tumor Size, as shown in the Extension Size Table for this site.

Cheek (Buccal) Mucosa, Vestibule CS TS/Ext-Eval SEE STANDARD TABLE

Cheek (Buccal) Mucosa, Vestibule CS Lymph Nodes

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

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

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

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

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

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

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

*For codes 10, 12, 20, 22, 30, 32, 40, 42, 49, 50, 52 and 80 ONLY, the N category is assigned based on the value of Site-Specific Factor 1, Size of Lymph Nodes, using the extra table, Lymph Nodes Size Table for this site.

**Cheek (Buccal) Mucosa, Vestibule
CS Reg Nodes Eval
SEE STANDARD TABLE**

**Cheek (Buccal) Mucosa, Vestibule
Reg LN Pos
SEE STANDARD TABLE**

**Cheek (Buccal) Mucosa, Vestibule
Reg LN Exam
SEE STANDARD TABLE**

**Cheek (Buccal) Mucosa, Vestibule
CS Mets at DX**

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

Code	Description	TNM	SS77	SS2000
00	No; none	M0	NONE	NONE
10	Distant lymph node(s) Mediastinal Distant lymph node(s), NOS	M1	D	D

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40	Distant metastases except distant lymph node(s) (code 10) Distant metastasis, NOS Carcinomatosis	M1	D	D
50	(10) + (40) Distant lymph node(s) plus other distant metastases	M1	D	D
99	Unknown if distant metastasis Distant metastasis cannot be assessed Not documented in patient record	MX	U	U

Cheek (Buccal) Mucosa, Vestibule

CS Mets Eval

SEE STANDARD TABLE

Cheek (Buccal) Mucosa, Vestibule

CS Site-Specific Factor 1 Size of Lymph Nodes

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

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

Cheek (Buccal) Mucosa, Vestibule

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

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

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

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

Cheek (Buccal) Mucosa, Vestibule

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

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

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

Collaborative Staging Codes

Parotid Gland

C07.9

C07.9 Parotid gland

Note: Laterality must be coded for C07.9.

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

Parotid Gland

CS Tumor Size

SEE STANDARD TABLE

Parotid Gland

CS Extension

Code	Description	TNM	SS77	SS2000
00	In situ; non-invasive; intraepithelial	Tis	IS	IS
10	Invasive tumor confined to gland/duct of origin Multiple foci confined to substance of parotid gland	*	L	L
30	Localized, NOS	*	L	L
35	Microscopic extraparenchymal extension ONLY	*	RE	RE
40	Another major salivary gland (submaxillary, sublingual) Periglandular soft/connective tissue including macroscopic extraparenchymal extension Pharyngeal mucosa Skeletal muscle: Digastric Masseter Pterygoid Sternocleidomastoid Stylohyoid	T3	RE	RE
42	External auditory meatus Skin overlying gland	T4a	RE	RE
45	Periosteum of mandible	T4a	RE	RE

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50	Auricular nerve Mandible Mastoid	T4a	RE	RE
70	Facial (7th) nerve	T4a	RE	D
72	Spinal accessory nerve	T4a	RE	D
75	Major blood vessel(s): Carotid artery Facial artery or vein Jugular vein Maxillary artery	T4b	RE	RE
76	Base of skull Skull, NOS	T4b	RE	D
77	Pterygoid plates	T4b	D	D
80	Further contiguous extension	T4b	D	D
95	No evidence of primary tumor	T0	U	U
99	Unknown extension Primary tumor cannot be assessed Not documented in patient record	TX	U	U

* For Extension codes 10, 30, 35, and 40 ONLY, the T category is assigned based on the value of CS Tumor Size as shown in the Extension by Size Table for this site.

Parotid Gland

CS TS/Ext-Eval

SEE STANDARD TABLE

Parotid Gland

CS Lymph Nodes

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

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

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

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

Code	Description	TNM	SS77	SS2000
00	None; no regional lymph node involvement	N0	NONE	NONE
10	Single positive ipsilateral regional node: Level I node Submandibular (submaxillary) Submental Parotid nodes Infra-auricular Intraparotid Preauricular	*	RN	RN

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

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

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

Parotid Gland
CS Reg Nodes Eval
SEE STANDARD TABLE

Parotid Gland
Reg LN Pos
SEE STANDARD TABLE

Parotid Gland
Reg LN Exam
SEE STANDARD TABLE

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Parotid Gland

CS Mets at DX

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

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

Parotid Gland

CS Mets Eval

SEE STANDARD TABLE

Parotid Gland

CS Site-Specific Factor 1 Size of Lymph Nodes

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

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

Parotid Gland

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

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

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

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

Parotid Gland

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

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

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

Collaborative Staging Codes

Submandibular Gland

C08.0

C08.0 Submandibular Gland

Note: Laterality must be coded for C08.0.

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

CS Tumor Size

SEE STANDARD TABLE

Submandibular Gland

CS Extension

Code	Description	TNM	SS77	SS2000
00	In situ; non-invasive; intraepithelial	Tis	IS	IS
10	Invasive tumor confined to gland/duct of origin	*	L	L
30	Localized, NOS	*	L	L
35	Microscopic extraparenchymal extension ONLY	*	RE	RE
40	Another major salivary gland (parotid, sublingual) Periglandular soft/connective tissue including macroscopic extraparenchymal extension Skeletal muscle: Digastric Genioglossus Geniohyoid Hyoglossus Mylohyoid Palatoglossus Pterygoid Styloglossus Stylohyoid	T3	RE	RE
45	Periosteum of mandible	T4a	RE	RE

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50	Mandible Nerves: Facial (7th) Lingual	T4a	RE	RE
51	External auditory meatus	T4a	D	D
52	Major blood vessels: Carotid artery Facial artery or vein Maxillary artery	T4b	RE	RE
71	Base of skull Skull, NOS	T4b	RE	D
72	Spinal accessory nerve	T4a	RE	D
77	Pterygoid plates	T4b	D	D
80	Further contiguous extension	T4b	D	D
95	No evidence of primary tumor	T0	U	U
99	Unknown extension Primary tumor cannot be assessed Not documented in patient record	TX	U	U

* For Extension codes 10, 30, 35, and 40 ONLY, the T category is assigned based on value of CS Tumor Size as shown in the Extension Size Table for this site.

Submandibular Gland CS TS/Ext-Eval SEE STANDARD TABLE

Submandibular Gland CS Lymph Nodes

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

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

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

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

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

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10, cont'd	Level III node Middle deep cervical Mid jugular Cervical, NOS Deep cervical, NOS Internal jugular, NOS Mandibular, NOS Regional lymph node, NOS			
12	Single positive ipsilateral regional node: Level IV node Lower deep cervical Lower jugular Level V node Posterior cervical Posterior triangle (spinal accessory and transverse cervical) (upper, middle, and lower corresponding to the levels that define upper, middle, and lower jugular nodes) Level VI node Anterior deep cervical Laterotracheal Paralaryngeal Paratracheal Prelaryngeal Pretracheal Recurrent laryngeal Level VII node Upper mediastinum (for other mediastinal nodes see CS Mets at DX) Other groups Intraparotid Parapharyngeal Periparotid Retropharyngeal Sub-occipital Supraclavicular, NOS (See Note 4)	*	D	D
18	Stated as N1, no other information	N1	RN	RN
19	Stated as N2a, no other information	N2a	RN	RN
20	Multiple positive ipsilateral nodes listed in code 10	*	RN	RN
22	Multiple positive ipsilateral nodes listed in code 12	*	D	D
29	Stated as N2b, no other information	N2b	RN	RN
30	Regional lymph nodes as listed in code 10: Positive ipsilateral node(s), not stated if single or multiple	*	RN	RN
32	Regional lymph nodes as listed in code 12: Positive ipsilateral node(s), not stated if single or multiple	*	D	D
40	Regional lymph nodes as listed in code 10: Positive bilateral or contralateral nodes	*	RN	RN
42	Regional lymph nodes as listed in code 12: Positive bilateral or contralateral nodes	*	D	D
49	Stated as N2c, no other information	N2c	RN	RN

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

*For codes 10, 12, 20, 22, 30, 32, 40, 42, 49, 50, 52 and 80 ONLY, the N category is assigned based on the value of Site-Specific Factor 1, Size of Lymph Nodes, using the extra table, Lymph Nodes Size Table for this site.

Submandibular Gland CS Reg Nodes Eval SEE STANDARD TABLE

Submandibular Gland Reg LN Pos SEE STANDARD TABLE

Submandibular Gland Reg LN Exam SEE STANDARD TABLE

Submandibular Gland CS Mets at DX

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

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

Collaborative Staging Codes

Other and Unspecified Major Salivary Glands

C08.1, C08.8-C08.9

C08.1 Sublingual gland

C08.8 Overlapping lesion of major salivary glands

C08.9 Major salivary gland, NOS

Note: Laterality must be coded for C08.1.

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

CS Tumor Size

SEE STANDARD TABLE

Other and Unspecified Major Salivary Glands

CS Extension

Code	Description	TNM	SS77	SS2000
00	In situ; non-invasive; intraepithelial	Tis	IS	IS
10	Invasive tumor confined to gland/duct of origin	*	L	L
30	Localized, NOS	*	L	L
35	Microscopic extraparenchymal extension ONLY	*	RE	RE
40	Extension to: Another major salivary gland (parotid, submandibular) Periglandular soft/connective tissue including extraparenchymal extension Skeletal muscle: Digastric Pterygoid Stylohyoid	T3	RE	RE
45	Periosteum of mandible	T4a	RE	RE
51	Mandible Nerves: Facial (7th) Lingual	T4a	RE	RE

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60	Skin	T4a	D	D
62	External auditory meatus	T4a	D	D
65	Blood vessel(s): Carotid artery Facial artery or vein Maxillary artery	T4b	RE	RE
71	Base of skull Skull, NOS	T4b	RE	D
72	Spinal accessory nerve	T4a	RE	D
79	Pterygoid plates	T4b	D	D
80	Further contiguous extension	T4b	D	D
95	No evidence of primary tumor	T0	U	U
99	Unknown extension Primary tumor cannot be assessed Not documented in patient record	TX	U	U

* For Extension codes 10, 30, and 35 ONLY, the T category is assigned based on value of CS Tumor Size as shown in the Extension Size Table for this site.

Other and Unspecified Major Salivary Glands

CS TS/Ext-Eval

SEE STANDARD TABLE

Other and Unspecified Major Salivary Glands

CS Lymph Nodes

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

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

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

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

Code	Description	TNM	SS77	SS2000
00	None; no regional lymph node involvement	N0	NONE	NONE
10	Single positive ipsilateral regional node: Level I node Submandibular (submaxillary) Submental Cervical, NOS Mandibular, NOS Regional lymph node, NOS	*	RN	RN
12	Single positive ipsilateral regional node: Level II node Upper deep cervical Upper jugular	*	D	D

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12, cont'd	<p>Level III node Middle deep cervical Mid jugular</p> <p>Level IV node Lower deep cervical Lower jugular</p> <p>Level V node Posterior cervical Posterior triangle (spinal accessory and transverse cervical) (upper, middle, and lower corresponding to the levels that define upper, middle, and lower jugular nodes)</p> <p>Level VI node Anterior deep cervical Laterotracheal Paralaryngeal Paratracheal Prelaryngeal Pretracheal Recurrent laryngeal</p> <p>Level VII node Upper mediastinum (for other mediastinal nodes see CS Mets at DX)</p> <p>Other groups Intraparotid Parapharyngeal Periparotid Retropharyngeal Sub-occipital Supraclavicular, NOS (See Note 4)</p>			
18	Stated as N1, no other information	N1	RN	RN
19	Stated as N2a, no other information	N2a	RN	RN
20	Multiple positive ipsilateral nodes listed in code 10	*	RN	RN
22	Multiple positive ipsilateral nodes listed in code 12	*	D	D
29	Stated as N2b, no other information	N2b	RN	RN
30	Regional lymph nodes as listed in code 10: Positive ipsilateral node(s), not stated if single or multiple	*	RN	RN
32	Regional lymph nodes as listed in code 12: Positive ipsilateral node(s), not stated if single or multiple	*	D	D
40	Regional lymph nodes as listed in code 10: Positive bilateral or contralateral nodes	*	RN	RN
42	Regional lymph nodes as listed in code 12: Positive bilateral or contralateral nodes	*	D	D
49	Stated as N2c, no other information	N2c	RN	RN
50	Regional lymph nodes as listed in code 10: Positive node(s), not stated if ipsilateral, or bilateral, or contralateral AND not stated if single or multiple	*	RN	RN
52	Regional lymph nodes as listed in code 12: Positive node(s), not stated if ipsilateral, or bilateral, or contralateral AND not stated if single or multiple	*	D	D

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60	Stated as N2, NOS	N2NOS	RN	RN
70	Stated as N3, no other information	N3	RN	RN
80	Lymph nodes, NOS	*	RN	RN
99	Unknown; not stated Regional lymph node(s) cannot be assessed Not documented in patient record	NX	U	U

*For codes 10, 12, 20, 22, 30, 32, 40, 42, 49, 50, 52 and 80 ONLY, the N category is assigned based on the value of Site-Specific Factor 1, Size of Lymph Nodes, using the extra table, Lymph Nodes Size Table for this site.

**Other and Unspecified Major Salivary Glands
CS Reg Nodes Eval
SEE STANDARD TABLE**

**Other and Unspecified Major Salivary Glands
Reg LN Pos
SEE STANDARD TABLE**

**Other and Unspecified Major Salivary Glands
Reg LN Exam
SEE STANDARD TABLE**

**Other and Unspecified Major Salivary Glands
CS Mets at DX**

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

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

Tonsil, Oropharynx
CS TS/Ext-Eval
SEE STANDARD TABLE

Tonsil, Oropharynx
CS Lymph Nodes

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

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

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

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

Code	Description	TNM	SS77	SS2000
00	None; no regional lymph node involvement	N0	NONE	NONE
10	Single positive ipsilateral regional node: Level II node Jugulodigastric (subdigastric) Upper deep cervical Upper jugular Level III node Middle deep cervical Mid jugular Level IV node Lower deep cervical Lower jugular Cervical, NOS Deep cervical, NOS Internal jugular, NOS Mandibular Regional lymph node, NOS	*	RN	RN
11	Single positive ipsilateral regional node: Level I node Submandibular (submaxillary) Submental	*	D	RN
12	Single positive ipsilateral regional node: Level V node Posterior cervical Posterior triangle (spinal accessory and transverse cervical) (upper, middle, and lower corresponding to the levels that define upper, middle, and lower jugular nodes) Level VI node Anterior deep cervical Laterotracheal Paralaryngeal Paratracheal Prelaryngeal Pretracheal Recurrent laryngeal	*	D	D

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12, cont'd	Level VII node Upper mediastinum (for other mediastinal nodes see CS Mets at DX) Other groups Intraparotid Parapharyngeal Periparotid Retropharyngeal Sub-occipital Supraclavicular, NOS (See Note 4)			
18	Stated as N1, no other information	N1	RN	RN
19	Stated as N2a, no other information	N2a	RN	RN
20	Multiple positive ipsilateral nodes listed in code 10	*	RN	RN
21	Multiple positive ipsilateral nodes listed in code 11	*	D	RN
22	Multiple positive ipsilateral nodes listed in code 12	*	D	D
29	Stated as N2b, no other information	N2b	RN	RN
30	Regional lymph nodes as listed in code 10: Positive ipsilateral node(s), not stated if single or multiple	*	RN	RN
31	Regional lymph nodes as listed in code 11: Positive ipsilateral node(s), not stated if single or multiple	*	D	RN
32	Regional lymph nodes as listed in code 12: Positive ipsilateral node(s), not stated if single or multiple	*	D	D
40	Regional lymph nodes as listed in code 10: Positive bilateral or contralateral nodes	*	RN	RN
41	Regional lymph nodes as listed in code 11: Positive bilateral or contralateral nodes	*	D	RN
42	Regional lymph nodes as listed in code 12: Positive bilateral or contralateral nodes	*	D	D
49	Stated as N2c, no other information	N2c	RN	RN
50	Regional lymph nodes as listed in code 10: Positive node(s) not stated if ipsilateral, or bilateral, or contralateral AND not stated if single or multiple	*	RN	RN
51	Regional lymph nodes as listed in code 11: Positive node(s) not stated if ipsilateral, or bilateral, or contralateral AND not stated if single or multiple	*	D	RN
52	Regional lymph nodes as listed in code 12: Positive node(s), not stated if ipsilateral, or bilateral, or contralateral AND not stated if single or multiple	*	D	D
60	Stated as N2, NOS	N2NOS	RN	RN
70	Stated as N3, no other information	N3	RN	RN
80	Lymph nodes, NOS, no other information	*	RN	RN

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99	Unknown; not stated Regional lymph node(s) cannot be assessed Not documented in patient record	NX	U	U
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* For codes 10-12, 20-22, 30-32, 40-42, 50-52, and 80 ONLY, the N category is assigned based on the value of Site-Specific Factor 1, Size of Lymph Nodes, using the extra table, Lymph Nodes Size Table for this site.

Tonsil, Oropharynx
CS Reg Nodes Eval
SEE STANDARD TABLE

Tonsil, Oropharynx
Reg LN Pos
SEE STANDARD TABLE

Tonsil, Oropharynx
Reg LN Exam
SEE STANDARD TABLE

Tonsil, Oropharynx
CS Mets at DX

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

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

Tonsil, Oropharynx
CS Mets Eval
SEE STANDARD TABLE

Tonsil, Oropharynx

CS Site-Specific Factor 1 Size of Lymph Nodes

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

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

Tonsil, Oropharynx

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

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

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

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

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99	Unknown extension Primary tumor cannot be assessed Not documented in patient record	TX	U	U
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Anterior Surface of Epiglottis

CS TS/Ext-Eval

SEE STANDARD TABLE

Anterior Surface of Epiglottis

CS Lymph Nodes

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

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

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

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

Code	Description	TNM	SS77	SS2000
00	None; no regional lymph node involvement	N0	NONE	NONE
10	Single positive ipsilateral regional node: Level II node Jugulodigastric (subdigastric) Upper deep cervical Upper jugular Level III node Middle deep cervical Mid jugular Level IV node Lower deep cervical Lower jugular Retropharyngeal Cervical, NOS Deep cervical, NOS Internal jugular, NOS Mandibular Regional lymph node, NOS	*	RN	RN
11	Single positive ipsilateral regional node: Level I node Submandibular (submaxillary) Submental	*	D	RN
12	Single positive ipsilateral regional node: Level V node Posterior cervical Posterior triangle (spinal accessory and transverse cervical) (upper, middle, and lower corresponding to the levels that define upper, middle, and lower jugular nodes)	*	D	D

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12, cont'd	Level VI node Anterior deep cervical Laterotracheal Paralaryngeal Paratracheal Prelaryngeal Pretracheal Recurrent laryngeal Level VII node Upper mediastinum (for other mediastinal nodes see CS Mets at DX) Other groups Intraparotid Parapharyngeal Periparotid Retropharyngeal Sub-occipital Supraclavicular fossa Supraclavicular, NOS (See Note 4)			
18	Stated as N1, no other information	N1	RN	RN
19	Stated as N2a, no other information	N2a	RN	RN
20	Multiple positive ipsilateral nodes listed in code 10	*	RN	RN
21	Multiple positive ipsilateral nodes listed in code 11	*	D	RN
22	Multiple positive ipsilateral nodes listed in code 12	*	D	D
29	Stated as N2b, no other information	N2b	RN	RN
30	Regional lymph nodes as listed in code 10: Positive ipsilateral node(s), not stated if single or multiple	*	RN	RN
31	Regional lymph nodes as listed in code 11: Positive ipsilateral node(s), not stated if single or multiple	*	D	RN
32	Regional lymph nodes as listed in code 12: Positive ipsilateral node(s), not stated if single or multiple	*	D	D
40	Regional lymph nodes as listed in code 10: Positive bilateral or contralateral nodes	*	RN	RN
41	Regional lymph nodes as listed in code 11: Positive bilateral or contralateral nodes	*	D	RN
42	Regional lymph nodes as listed in code 12: Positive bilateral or contralateral nodes	*	D	D
49	Stated as N2c, no other information	N2c	RN	RN
50	Regional lymph nodes as listed in code 10: Positive node(s) not stated if ipsilateral, or bilateral, or contralateral AND not stated if single or multiple	*	RN	RN
51	Regional lymph nodes as listed in code 11: Positive node(s) not stated if ipsilateral, or bilateral, or contralateral AND not stated if single or multiple	*	D	RN

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

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

**Anterior Surface of Epiglottis
CS Reg Nodes Eval
SEE STANDARD TABLE**

**Anterior Surface of Epiglottis
Reg LN Pos
SEE STANDARD TABLE**

**Anterior Surface of Epiglottis
Reg LN Exam
SEE STANDARD TABLE**

**Anterior Surface of Epiglottis
CS Mets at DX**

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

**Anterior Surface of Epiglottis
CS Mets Eval
SEE STANDARD TABLE**

Anterior Surface of Epiglottis

CS Site-Specific Factor 1 Size of Lymph Nodes

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

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

Anterior Surface of Epiglottis

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

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

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

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

Collaborative Staging Codes

Nasopharynx

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

- C11.0 Superior wall of nasopharynx
- C11.1 Posterior wall of nasopharynx
- C11.2 Lateral wall of nasopharynx
- C11.3 Anterior wall of nasopharynx
- C11.8 Overlapping lesion of nasopharynx
- C11.9 Nasopharynx, NOS

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

CS Tumor Size

SEE STANDARD TABLE

Nasopharynx

CS Extension

Note: Parapharyngeal involvement denotes postero-lateral infiltration of tumor beyond the pharyngobasilar fascia. Involvement of the masticator space denotes extension of tumor beyond the anterior surface of the lateral pterygoid muscle, or lateral extension beyond the postero-lateral wall of the maxillary antrum, pterygo-maxillary fissure.

Code	Description	TNM	SS77	SS2000
00	In situ; noninvasive; intraepithelial	Tis	IS	IS
10	Invasive tumor confined to one of the following subsites: Inferior wall (superior surface of soft palate) One lateral wall Posterior superior wall (vault)	T1	L	L
20	Involvement of two or more subsites: Lateral wall extending into eustachian tube/middle ear Posterior, inferior, or lateral wall(s)	T1	L	L
30	Confined to nasopharynx Localized, NOS	T1	L	L
40	Oropharynx Soft palate, inferior surface	T2a	RE	RE
50	Nasal cavity	T2a	RE	RE

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55	Any extension coded in 10-50 WITH fixation or tumor Described only as FIXED	T4	RE	RE
56	Any extension coded in 10-50 WITH parapharyngeal extension	T2b	RE	RE
57	Hard palate	T4	D	RE
58	Pterygopalatine fossa	T4	RE	RE
60	Bone, including skull	T3	RE	RE
62	Paranasal sinus	T3	D	RE
65	Orbit	T4	RE	D
70	Brain Cranial nerves Hypopharynx Infratemporal fossa Orbit Intracranial extension, NOS	T4	D	D
75	Masticator space	T4	D	D
80	Further contiguous extension Soft tissues of the neck	T4	D	D
95	No evidence of primary tumor	T0	U	U
99	Unknown extension Primary tumor cannot be assessed Not documented in patient record	TX	U	U

Nasopharynx

CS TS/Ext-Eval

SEE STANDARD TABLE

Nasopharynx

CS Lymph Nodes

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

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

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

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

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

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

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40	Regional lymph nodes as listed in code 10: Positive bilateral or contralateral nodes	*	RN	RN
41	Regional lymph nodes as listed in code 11: Positive bilateral or contralateral nodes	*	D	RN
42	Regional lymph nodes as listed in code 12: Positive bilateral or contralateral nodes	*	D	D
50	Regional lymph nodes as listed in code 10: Positive node(s) not stated if ipsilateral, or bilateral, or contralateral AND not stated if single or multiple	*	RN	RN
51	Regional lymph nodes as listed in code 11: Positive node(s) not stated if ipsilateral, or bilateral, or contralateral AND not stated if single or multiple	*	D	RN
52	Regional lymph nodes as listed in code 12: Positive node(s), not stated if ipsilateral, or bilateral, or contralateral AND not stated if single or multiple	*	D	D
60	Stated as N2, no other information	N2	RN	RN
70	Stated as N3, NOS	N3NOS	RN	RN
75	Regional lymph nodes in the supraclavicular fossa: Inferior deep cervical (scalene) Spinal accessory (posterior cervical) Supraclavicular (transverse cervical) (See Note 4)	N3b	D	D
80	Lymph nodes, NOS, no other information	*	RN	RN
99	Unknown; not stated Regional lymph node(s) cannot be assessed Not documented in patient record	NX	U	U

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

Nasopharynx

CS Reg Nodes Eval

SEE STANDARD TABLE

Nasopharynx

Reg LN Pos

SEE STANDARD TABLE

Collaborative Staging Codes

Pyriform Sinus, Hypopharynx, Laryngopharynx

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

C12.9 Pyriform sinus

C13.0 Postericoid region

C13.1 Hypopharyngeal aspect of aryepiglottic fold

C13.2 Posterior wall of hypopharynx

C13.8 Overlapping lesion of hypopharynx

C13.9 Hypopharynx, NOS

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

Pyriform Sinus, Hypopharynx, Laryngopharynx

CS Tumor Size

SEE STANDARD TABLE

Pyriform Sinus, Hypopharynx, Laryngopharynx

CS Extension

Note: If fixation of hemilarynx or larynx code to 55 not 51.

Code	Description	TNM	SS77	SS2000
00	In situ; noninvasive; intraepithelial	Tis	IS	IS
10	Invasive tumor confined to one of the following subsites: Laryngopharynx Postericoid area Posterior pharyngeal wall Pyriform sinus	*	L	L
20	Tumor involves adjacent subsite(s) (listed in code 10) WITHOUT fixation	*	L	L
30	Localized, NOS	*	L	L
40	Oropharynx	*	RE	RE
50	Larynx	*	RE	RE
51	Any of codes 10-40 WITH fixation of tumor or fixation, NOS	*	RE	RE

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55	Fixation of hemilarynx or larynx	T3	RE	RE
60	Soft tissues of neck including Prelaryngeal strap muscles and subcutaneous fat	T4a	RE	RE
61	Esophagus	T4a	RE	RE
62	Thyroid gland	T4a	D	RE
63	Cricoid cartilage Thyroid cartilage	T4a	D	RE
64	Prevertebral fascia/muscle(s)	T4b	RE	RE
65	Carotid artery	T4b	D	RE
66	Hyoid bone	T4a	D	D
70	Mediastinal structures	T4b	D	D
80	Further contiguous extension	T4b	D	D
95	No evidence of primary tumor	T0	U	U
99	Unknown extension Primary tumor cannot be assessed Not documented in patient record	TX	U	U

*For Extension codes 10, 20, 30, 40, 50, and 51 ONLY, the T category is assigned based on value of CS Tumor Size as shown in the Extension Size Table for this site.

**Pyriform Sinus, Hypopharynx, Laryngopharynx
CS TS/Ext-Eval
SEE STANDARD TABLE**

**Pyriform Sinus, Hypopharynx, Laryngopharynx
CS Lymph Nodes**

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

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

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

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

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

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

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

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

Pyriform Sinus, Hypopharynx, Laryngopharynx

CS Reg Nodes Eval

SEE STANDARD TABLE

Pyriform Sinus, Hypopharynx, Laryngopharynx

Reg LN Pos

SEE STANDARD TABLE

Pyriform Sinus, Hypopharynx, Laryngopharynx

Reg LN Exam

SEE STANDARD TABLE

**Pyriform Sinus, Hypopharynx, Laryngopharynx
CS Mets at DX**

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

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

**Pyriform Sinus, Hypopharynx, Laryngopharynx
CS Mets Eval**

SEE STANDARD TABLE

**Pyriform Sinus, Hypopharynx, Laryngopharynx
CS Site-Specific Factor 1 Size of Lymph Nodes**

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

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

Pyriform Sinus, Hypopharynx, Laryngopharynx

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

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

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

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

Pyriform Sinus, Hypopharynx, Laryngopharynx

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

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

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

Collaborative Staging Codes

Pharynx, NOS, and Other Ill-Defined Oral Cavity Sites

C14.0, C14.2, C14.8

C14.0 Pharynx, NOS

C14.2 Waldeyer ring

C14.8 Overlapping lesion of lip, oral cavity

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

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

Pharynx, NOS, and Other Ill-Defined Oral Cavity Sites

CS Tumor Size

SEE STANDARD TABLE

Pharynx, NOS, and Other Ill-Defined Oral Cavity Sites

CS Extension

Note: Definition of Adjacent Structures: Connective tissues large enough to be given a specific name would be considered adjacent structures. For example, the brachial artery has a name, as does the broad ligament. Continuous tumor growth from one organ into an adjacent named structure would be coded to less than 60 in the schemes for ill-defined or non-specific sites.

Code	Description	TNM	SS77	SS2000
00	In situ; noninvasive; intraepithelial	NA	IS	IS
10	Invasive tumor confined to site of origin	NA	L	L
30	Localized, NOS	NA	L	L
40	More than one region of pharynx involved (oropharynx, nasopharynx, hypopharynx)	NA	RE	RE
50	Pharynx and oral cavity involved	NA	RE	RE
55	Any of codes 10-50 WITH fixation	NA	RE	RE
60	Extension to adjacent structures (See note)	NA	RE	RE
80	Further contiguous extension	NA	D	D
95	No evidence of primary tumor	NA	U	U

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99	Unknown extension Primary tumor cannot be assessed Not documented in patient record	NA	U	U
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Pharynx, NOS, and Other Ill-Defined Oral Cavity Sites

CS TS/Ext-Eval

Code	Description	Staging Basis
9	Not applicable for this site	NA

Pharynx, NOS, and Other Ill-Defined Oral Cavity Sites

CS Lymph Nodes

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

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

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

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

Code	Description	TNM	SS77	SS2000
00	None; no regional lymph node involvement	NA	NONE	NONE
10	Regional lymph node(s) bilateral and/or contralateral: Cervical, NOS Internal jugular, NOS Deep cervical, NOS: Lower, NOS Jugulo-omohyoid (supraomohyoid) Middle Upper, NOS: Jugulodigastric (subdigastric) Mandibular, NOS Submandibular (submaxillary) Submental Paratracheal Recurrent laryngeal nerve chain Pre-laryngeal Delphian node Retropharyngeal Regional lymph node(s), NOS	NA	RN	RN
12	Regional lymph node(s) bilateral and/or contralateral: Supraclavicular, NOS (See Note 4)	NA	D	D
80	Lymph nodes, NOS	NA	RN	RN
99	Unknown; not stated Regional lymph node(s) cannot be assessed Not documented in patient record	NA	U	U

**Pharynx, NOS, and Other Ill-Defined Oral Cavity Sites
CS Reg Nodes Eval**

Code	Description	Staging Basis
9	Not applicable for this site	NA

**Pharynx, NOS, and Other Ill-Defined Oral Cavity Sites
Reg LN Pos
SEE STANDARD TABLE**

**Pharynx, NOS, and Other Ill-Defined Oral Cavity Sites
Reg LN Exam
SEE STANDARD TABLE**

**Pharynx, NOS, and Other Ill-Defined Oral Cavity Sites
CS Mets at DX**

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

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

**Pharynx, NOS, and Other Ill-Defined Oral Cavity Sites
CS Mets Eval**

Code	Description	Staging Basis
9	Not applicable for this site	NA

Pharynx, NOS, and Other Ill-Defined Oral Cavity Sites

CS Site-Specific Factor 1 Size of Lymph Nodes

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

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

Pharynx, NOS, and Other Ill-Defined Oral Cavity Sites

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

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

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

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

Collaborative Staging Codes

Colon

C18.0-C18.9

- C18.0 Cecum
- C18.1 Appendix
- C18.2 Ascending colon
- C18.3 Hepatic flexure of colon
- C18.4 Transverse colon
- C18.5 Splenic flexure of colon
- C18.6 Descending colon
- C18.7 Sigmoid colon
- C18.8 Overlapping lesion of colon
- C18.9 Colon, NOS

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

CS Tumor Size

Code	Description
000	No mass/tumor found
001-988	001 - 988 millimeters (code exact size in millimeters)
989	989 millimeters or larger
990	Microscopic focus or foci only, no size of focus given
991	Described as less than 1 cm
992	Described as less than 2 cm
993	Described as less than 3 cm
994	Described as less than 4 cm
995	Described as less than 5 cm
998	Familial/multiple polyposis (M-8220/8221)
999	Unknown; size not stated Not documented in patient record

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Colon

CS Extension

Note 1: Ignore intraluminal extension to adjacent segment(s) of colon/rectum or to the ileum from the cecum; code depth of invasion or extracolonic spread as indicated.

Note 2: A tumor nodule in the pericolic adipose tissue of a primary carcinoma without histologic evidence of residual lymph node in the nodule is classified as a regional lymph node metastasis if the nodule has the form and smooth contour of a lymph node, or if the contour is not described. If the nodule has an irregular contour, it should be coded in CS Extension as code 45.

Note 3: Codes 60-80 are used for contiguous extension from the site of origin. Discontinuous involvement is coded in CS Mets at DX.

Code	Description	TNM	SS77	SS2000
00	In situ; noninvasive; intraepithelial	Tis	IS	IS
05	(Adeno)carcinoma in a polyp or adenoma, noninvasive	Tis	IS	IS
10	Invasive tumor confined to mucosa, NOS (including intramucosal, NOS)	Tis	L	L
11	Lamina propria, including lamina propria in the stalk of a polyp	Tis	L	L
12	Muscularis mucosae, including muscularis mucosae in the stalk of a polyp	T1	L	L
13	Confined to head of polyp, NOS	T1	L	L
14	Confined to stalk of polyp, NOS	T1	L	L
15	Invasive tumor in polyp, NOS	T1	L	L
16	Invades submucosa (superficial invasion), including submucosa in the stalk of a polyp	T1	L	L
20	Muscularis propria invaded	T2	L	L
30	Localized, NOS Confined to colon, NOS	T1	L	L
40	Extension through wall, NOS Invasion through muscularis propria or muscularis, NOS Non-peritonealized pericolic tissues invaded Perimuscular tissue invaded Subserosal tissue/(sub)serosal fat invaded Transmural, NOS	T3	L	L
42	Fat, NOS	T3	RE	RE
45	Extension to: All colon sites: Adjacent tissue(s), NOS Connective tissue Mesenteric fat Mesentery Mesocolon Pericolic fat Ascending and descending colon Retroperitoneal fat Transverse colon/flexures Gastrocolic ligament Greater omentum	T3	RE	RE

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11	Regional lymph node(s): Porta hepatis (portal) (periportal) (hilar) (in hilus of liver)	N1	D	RN
20	Regional lymph node(s): Pancreaticoduodenal	N1	RN	RN
21	Regional lymph node(s): Periduodenal Peripancreatic (near head of pancreas only)	N1	D	RN
25	(11) + (20)	N1	D	RN
30	Regional lymph node(s), NOS	N1	RN	RN
50	Celiac lymph node(s)	N1	D	RN
60	Superior mesenteric lymph node(s)	N1	D	RN
80	Lymph nodes, NOS	N1	RN	RN
99	Unknown; not stated Regional lymph node(s) cannot be assessed Not documented in patient record	NX	U	U

Gallbladder

CS Reg Nodes Eval

SEE STANDARD TABLE

Gallbladder

Reg LN Pos

SEE STANDARD TABLE

Gallbladder

Reg LN Exam

SEE STANDARD TABLE

Gallbladder

CS Mets at DX

Code	Description	TNM	SS77	SS2000
00	No; none	M0	NONE	NONE
10	Distant lymph node(s), including: Para-aortic Peripancreatic (along body and tail of pancreas only) Distant lymph node(s), NOS	M1	D	D
40	Distant metastases except distant lymph node(s) (code 10) Distant metastasis, NOS Carcinomatosis	M1	D	D
50	(10) + (40) Distant lymph node(s) plus other distant metastases	M1	D	D

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

CS Mets Eval

SEE STANDARD TABLE

Gallbladder

CS Site-Specific Factor 1

Code	Description
888	Not applicable for this site

Gallbladder

CS Site-Specific Factor 2

Code	Description
888	Not applicable for this site

Gallbladder

CS Site-Specific Factor 3

Code	Description
888	Not applicable for this site

Gallbladder

CS Site-Specific Factor 4

Code	Description
888	Not applicable for this site

Gallbladder

CS Site-Specific Factor 5

Code	Description
888	Not applicable for this site

Gallbladder

CS Site-Specific Factor 6

Code	Description
888	Not applicable for this site

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21	Regional lymph node(s): Periduodenal Peripancreatic (near head of pancreas only)	N1	D	RN
30	Regional lymph node(s), NOS	N1	RN	RN
50	Celiac	N1	D	RN
60	Superior mesenteric	N1	D	RN
80	Lymph nodes, NOS	N1	RN	RN
99	Unknown; not stated Regional lymph node(s) cannot be assessed Not documented in patient record	NX	U	U

Other Biliary and Biliary, NOS
CS Reg Nodes Eval
SEE STANDARD TABLE

Other Biliary and Biliary, NOS
Reg LN Pos
SEE STANDARD TABLE

Other Biliary and Biliary, NOS
Reg LN Exam
SEE STANDARD TABLE

Other Biliary and Biliary, NOS
CS Mets at DX

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

Other Biliary and Biliary, NOS
CS Mets Eval
SEE STANDARD TABLE

Other Biliary and Biliary, NOS

CS Site-Specific Factor 1

Code	Description
888	Not applicable for this site

Other Biliary and Biliary, NOS

CS Site-Specific Factor 2

Code	Description
888	Not applicable for this site

Other Biliary and Biliary, NOS

CS Site-Specific Factor 3

Code	Description
888	Not applicable for this site

Other Biliary and Biliary, NOS

CS Site-Specific Factor 4

Code	Description
888	Not applicable for this site

Other Biliary and Biliary, NOS

CS Site-Specific Factor 5

Code	Description
888	Not applicable for this site

Other Biliary and Biliary, NOS

CS Site-Specific Factor 6

Code	Description
888	Not applicable for this site

Collaborative Staging Codes

Pancreas: Head

C25.0

C25.0 Head of pancreas

Note: For tumors of the islet cells, determine which subsite of the pancreas is involved and use that primary site code and the corresponding Collaborative Stage scheme. If the subsite cannot be determined, use the general code for Islets of Langerhans, C25.4, and use the Collaborative Stage scheme for Pancreas, Other and Unspecified.

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

Pancreas: Head

CS Tumor Size

SEE STANDARD TABLE

Pancreas: Head

CS Extension

Note 1: Islets of Langerhans are distributed throughout the pancreas, and therefore any extension code can be used.

Note 2: Codes 40-80 are used for contiguous extension of tumor from the site of origin. Discontinuous involvement is coded in CS Mets at DX.

Code	Description	TNM	SS77	SS2000
00	In situ; non-invasive PanIn III Pancreatic Intraepithelial Neoplasia III	Tis	IS	IS
10	Confined to pancreas	*	L	L
30	Localized, NOS	*	L	L
40	Extension to peripancreatic tissue, NOS Fixation to adjacent structures, NOS	T3	RE	RE
44	Ampulla of Vater Duodenum Extrahepatic bile duct(s)	T3	RE	RE
50	Adjacent stomach Stomach, NOS	T3	RE	RE
54	Blood vessel(s) (major): Gastroduodenal artery Hepatic artery Pancreaticoduodenal artery Portal vein Superior mesenteric vein Transverse colon, including hepatic flexure	T3	RE	RE

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55	Mesenteric fat Mesentery Mesocolon Peritoneum	T3	RE	D
57	Gallbladder	T3	RE	D
58	Body of stomach	T3	D	RE
59	(58) + [(55) or (57)]	T3	D	D
60	Tumor is inseparable from the superior mesenteric artery Superior mesenteric artery	T4	RE	RE
61	Omentum	T4	RE	D
63	Liver (including porta hepatis)	T4	RE	D
65	(60) + [(55) or (57)]	T4	RE	D
66	(60) + (58)	T4	D	RE
67	(60 + 59) OR Any of [(61 to 65)] + [(58) or (59)] OR (66) + any of [(55) or (57) or (59) or (61) or (63) or (65)]	T4	D	D
68	Tumor is inseparable from the celiac axis Aorta Celiac artery	T4	D	D
69	Colon (other than transverse colon including hepatic flexure) Spleen	T4	D	D
78	Adrenal (suprarenal) gland Ileum Jejunum Kidney Retroperitoneum Ureter	T4	D	D
80	Further contiguous extension	T4	D	D
95	No evidence of primary tumor	T0	U	U
99	Unknown extension Primary tumor cannot be assessed Not documented in patient record	TX	U	U

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

Pancreas: Head

CS TS/Ext-Eval

SEE STANDARD TABLE

Collaborative Staging Codes

Nasal Cavity

C30.0

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

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

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

CS Tumor Size

SEE STANDARD TABLE

Nasal Cavity

CS Extension

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

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

Nasal Cavity

CS TS/Ext-Eval

SEE STANDARD TABLE

Nasal Cavity

CS Lymph Nodes

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

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

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

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

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

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

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

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

Nasal Cavity
CS Reg Nodes Eval
SEE STANDARD TABLE

Nasal Cavity
Reg LN Pos
SEE STANDARD TABLE

Nasal Cavity
Reg LN Exam
SEE STANDARD TABLE

Nasal Cavity
CS Mets at DX
SEE STANDARD TABLE

Nasal Cavity
CS Mets Eval
SEE STANDARD TABLE

Nasal Cavity

CS Site-Specific Factor 1 Size of Lymph Nodes

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

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

Nasal Cavity

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

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

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

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

Nasal Cavity

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

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

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

Nasal Cavity

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

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

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

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

Nasal Cavity

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

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

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

Nasal Cavity

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

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

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

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

Collaborative Staging

Middle Ear

C30.1

C30.1 Middle ear

Note 1: Laterality must be coded for this site.

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

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

CS Tumor Size

SEE STANDARD TABLE

Middle Ear

CS Extension

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

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

Middle Ear CS TS/Ext-Eval

Code	Description	Staging Basis
9	Not applicable for this site	NA

Middle Ear CS Lymph Nodes

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

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

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

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

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

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12	<p>Single positive ipsilateral regional node:</p> <ul style="list-style-type: none"> Level III node <ul style="list-style-type: none"> Middle deep cervical Mid jugular Level IV node <ul style="list-style-type: none"> Jugulo-omohyoid (supraomohyoid) Lower deep cervical Lower jugular Level V node <ul style="list-style-type: none"> Posterior cervical Posterior triangle (spinal accessory and transverse cervical) (upper, middle, and lower corresponding to the levels that define upper, middle, and lower jugular nodes) Level VI node <ul style="list-style-type: none"> Anterior deep cervical Laterotrachea Paralaryngeal Paratracheal Prelaryngeal Pretracheal Recurrent laryngeal Level VII node <ul style="list-style-type: none"> Upper mediastinum (for other mediastinal nodes see CS Mets at DX) Other groups <ul style="list-style-type: none"> Intraparotid Parapharyngeal Periparotid Retropharyngeal Sub-occipital Supraclavicular, NOS (See Note 4) 	NA	D	D
80	Lymph nodes, NOS	NA	RN	RN
99	<p>Unknown; not stated</p> <p>Regional lymph node(s) cannot be assessed</p> <p>Not documented in patient record</p>	NA	U	U

Middle Ear

CS Reg Nodes Eval

Code	Description	Staging Basis
9	Not applicable for this site	NA

Middle Ear

Reg LN Pos

SEE STANDARD TABLE

Middle Ear

Reg LN Exam

SEE STANDARD TABLE

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Middle Ear CS Mets at DX

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

Middle Ear CS Mets Eval

Code	Description	Staging Basis
9	Not applicable for this site	NA

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

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

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

Collaborative Staging Codes

Maxillary Sinus

C31.0

C31.0 Maxillary sinus

Note: Laterality must be coded for this site.

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

CS Tumor Size

SEE STANDARD TABLE

Maxillary Sinus

CS Extension

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

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

Maxillary Sinus

CS TS/Ext-Eval

SEE STANDARD TABLE

Maxillary Sinus

CS Lymph Nodes

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

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

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

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

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

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

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

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

Maxillary Sinus

CS Reg Nodes Eval

SEE STANDARD TABLE

Maxillary Sinus

Reg LN Pos

SEE STANDARD TABLE

Maxillary Sinus

Reg LN Exam

SEE STANDARD TABLE

Maxillary Sinus

CS Mets at DX

SEE STANDARD TABLE

Maxillary Sinus

CS Mets Eval

SEE STANDARD TABLE

Collaborative Staging Codes

Ethmoid Sinus

C31.1

C31.1 Ethmoid sinus

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

CS Tumor Size

SEE STANDARD TABLE

Ethmoid Sinus

CS Extension

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

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

Ethmoid Sinus

CS TS/Ext-Eval

SEE STANDARD TABLE

Ethmoid Sinus

CS Lymph Nodes

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

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

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

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

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

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

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

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

Ethmoid Sinus

CS Reg Nodes Eval

SEE STANDARD TABLE

Ethmoid Sinus

Reg LN Pos

SEE STANDARD TABLE

Ethmoid Sinus

Reg LN Exam

SEE STANDARD TABLE

Ethmoid Sinus

CS Mets at DX

SEE STANDARD TABLE

Ethmoid Sinus

CS Mets Eval

SEE STANDARD TABLE

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

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

Note 1: Laterality must be coded for Frontal sinus, C31.2
Note 2: AJCC does not define TNM staging for this site.

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

Accessory (Paranasal) Sinuses
CS Extension

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

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

Accessory (Paranasal) Sinuses

CS TS/Ext-Eval

Code	Description	Staging Basis
9	Not applicable for this site	NA

Accessory (Paranasal) Sinuses

CS Lymph Nodes

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

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

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

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

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

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

Accessory (Paranasal) Sinuses

CS Reg Nodes Eval

Code	Description	Staging Basis
9	Not applicable for this site	NA

Accessory (Paranasal) Sinuses

Reg LN Pos

SEE STANDARD TABLE

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Accessory (Paranasal) Sinuses
Reg LN Exam
SEE STANDARD TABLE

Accessory (Paranasal) Sinuses
CS Mets at DX

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

Accessory (Paranasal) Sinuses
CS Mets Eval

Code	Description	Staging Basis
9	Not applicable for this site	NA

Accessory (Paranasal) Sinuses
CS Site-Specific Factor 1 Size of Lymph Nodes

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

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

Glottic Larynx
CS Lymph Nodes

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

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

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

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

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

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

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

Glottic Larynx
CS Reg Nodes Eval
SEE STANDARD TABLE

Glottic Larynx
Reg LN Pos
SEE STANDARD TABLE

Glottic Larynx
Reg LN Exam
SEE STANDARD TABLE

Glottic Larynx
CS Mets at DX

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

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

Glottic Larynx
CS Mets Eval
SEE STANDARD TABLE

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

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

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

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

Glottic Larynx

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

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

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

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

Glottic Larynx

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

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

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

Supraglottic Larynx

CS Lymph Nodes

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

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

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

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

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

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

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

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

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

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

**Supraglottic Larynx
CS Mets at DX**

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

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

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

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

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

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

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

Supraglottic Larynx

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

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

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

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

Supraglottic Larynx

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

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

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

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

Supraglottic Larynx

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

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

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

Supraglottic Larynx

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

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

table begins on next page

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

Supraglottic Larynx

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

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

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

Collaborative Staging Codes

Subglottic Larynx

C32.2

C32.2 Subglottis

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

CS Tumor Size

SEE STANDARD TABLE

Subglottic Larynx

CS Extension

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

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

Subglottic Larynx

CS TS/Ext-Eval

SEE STANDARD TABLE

Subglottic Larynx

CS Lymph Nodes

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

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

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

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

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

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

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

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

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

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

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

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Subglottic Larynx

CS Mets at DX

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

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

Subglottic Larynx

CS Mets Eval

SEE STANDARD TABLE

Subglottic Larynx

CS Site-Specific Factor 1 Size of Lymph Nodes

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

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

Subglottic Larynx

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

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

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

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

Subglottic Larynx

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

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

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

Collaborative Staging Codes

Larynx, Overlapping Lesion or Not Otherwise Specified

C32.3, C32.8-C32.9

C32.3 Laryngeal cartilage

C32.8 Overlapping lesion of larynx

C32.9 Larynx, NOS

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

CS Tumor Size

SEE STANDARD TABLE

Larynx, Overlapping Lesion or Not Otherwise Specified

CS Extension

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

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

Larynx, Overlapping Lesion or Not Otherwise Specified

CS TS/Ext-Eval

SEE STANDARD TABLE

Larynx, Overlapping Lesion or Not Otherwise Specified

CS Lymph Nodes

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

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

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

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

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

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

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

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

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

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

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

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

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

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

Larynx, Overlapping Lesion or Not Otherwise Specified CS Mets Eval SEE STANDARD TABLE

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

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

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

Larynx, Overlapping Lesion or Not Otherwise Specified

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

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

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

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

Larynx, Overlapping Lesion or Not Otherwise Specified

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

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

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

Collaborative Staging Codes

Lung

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

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

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

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

Lung

CS Tumor Size

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

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

Lung

CS Extension

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

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

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

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

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

Note 6: Pleural Effusion.

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

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

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

Note 7: Vocal cord paralysis (resulting from involvement of recurrent branch of the vagus nerve), superior vena cava obstruction, or compression of the trachea or the esophagus may be related to direct extension of the primary tumor or to lymph node involvement. The treatment options and prognosis associated with these manifestations of disease extent fall within the T4-Stage IIIB category; therefore, generally use code 70 for these manifestations.

HOWEVER, if the primary tumor is peripheral and clearly unrelated to vocal cord paralysis, vena cava obstruction, or compression of the trachea or the esophagus, code these manifestations as mediastinal lymph node involvement (code 20) in CS Lymph Nodes unless there is a statement of involvement by direct extension from the primary tumor.

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

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

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

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

Lung

CS TS/Ext-Eval

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

Lung

CS Lymph Nodes

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

Note 2: If at mediastinoscopy/x-ray, the description is "mass", "adenopathy", or "enlargement" of any of the lymph nodes named as regional in codes 10 and 20, assume that at least regional lymph nodes are involved.

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

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

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

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Lung

CS Reg Nodes Eval

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

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

Lung

Reg LN Pos

SEE STANDARD TABLE

Lung

Reg LN Exam

SEE STANDARD TABLE

Collaborative Staging Codes

Malignant Melanoma of Skin, Vulva, Penis, Scrotum

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

(M-8720-8790)

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

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

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

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

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

CS Tumor Size

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

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

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

Malignant Melanoma of Skin, Vulva, Penis, Scrotum

CS Extension

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

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

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

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

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

Malignant Melanoma of Skin, Vulva, Penis, Scrotum

CS TS/Ext-Eval

SEE STANDARD TABLE

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

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

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

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

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

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

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99	Unknown; not stated Regional lymph node(s) cannot be assessed Not documented in patient record	NX	U	U
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*For codes 10, 12, and 80 ONLY, the N category depends on the values in Reg LN Pos and SSF3, as shown in the CS Nodes Pos and Clinical Status table.

Malignant Melanoma of Skin, Vulva, Penis, Scrotum

CS Reg Nodes Eval

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

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

Malignant Melanoma of Skin, Vulva, Penis, Scrotum

Reg LN Pos

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

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

Code	Description
00	All nodes examined negative.

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

Malignant Melanoma of Skin, Vulva, Penis, Scrotum

Reg LN Exam

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

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

Malignant Melanoma of Skin, Vulva, Penis, Scrotum

CS Mets at DX

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

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

Malignant Melanoma of Skin, Vulva, Penis, Scrotum

CS Mets Eval

SEE STANDARD TABLE

Malignant Melanoma of Skin, Vulva, Penis, Scrotum

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

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

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

Malignant Melanoma of Skin, Vulva, Penis, Scrotum

CS Site-Specific Factor 2 Ulceration

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

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

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

Malignant Melanoma of Skin, Vulva, Penis, Scrotum

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

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

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

Malignant Melanoma of Skin, Vulva, Penis, Scrotum

CS Site-Specific Factor 4 LDH

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

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

Malignant Melanoma of Skin, Vulva, Penis, Scrotum

CS Site-Specific Factor 5

Code	Description
888	Not applicable for this site

Malignant Melanoma of Skin, Vulva, Penis, Scrotum

CS Site-Specific Factor 6

Code	Description
888	Not applicable for this site

Collaborative Staging Codes

Breast

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

- C50.0 Nipple
- C50.1 Central portion of breast
- 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

Note: Laterality must be coded for this site.

CS Tumor Size CS Extension CS TS/Ext-Eval CS Lymph Nodes CS Reg Nodes Eval Reg LN Pos Reg LN Exam CS Mets at DX CS Mets Eval	CS Site-Specific Factor 1 - Estrogen Receptor Assay (ERA) CS Site-Specific Factor 2 - Progesterone Receptor Assay (PRA) CS Site-Specific Factor 3 - Number of Positive Ipsilateral Axillary Lymph Nodes CS Site-Specific Factor 4 - Immunohistochemistry (IHC) of Regional Lymph Nodes CS Site-Specific Factor 5 - Molecular Studies of Regional Lymph Nodes CS Site-Specific Factor 6 - Size of Tumor--Invasive Component	The following tables are available at the collaborative staging website: Histology Exclusion Table AJCC Stage Extension Size Table Extension Behavior Table Lymph Nodes Positive Axillary Nodes Table IHC MOL Table
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Breast

CS Tumor Size

Note 1: For tumor size, some breast cancers cannot be sized pathologically.

Note 2: When coding pathologic size, code the measurement of the invasive component. For example, if there is a large in situ component (e.g., 4 cm) and a small invasive component see Site-Specific Factor 6 to code more information about the reported tumor size. If the size of invasive component is not given, code the size of the entire tumor and record what it represents in Site-Specific Factor 6.

Note 3: Microinvasion is the extension of cancer cells beyond the basement membrane into the adjacent tissues with no focus more than 0.1 cm in greatest dimension. When there are multiple foci of microinvasion, the size of only the largest focus is used to classify the microinvasion. (Do not use the sum of all the individual foci.)

Code	Description
000	No mass/tumor found
001-988	001 - 988 millimeters (code exact size in millimeters)
989	989 millimeters or larger
990	Microinvasion; microscopic focus or foci only, no size given; described as less than 1 mm
991	Described as less than 1 cm
992	Described as less than 2 cm
993	Described as less than 3 cm
994	Described as less than 4 cm
995	Described as less than 5 cm

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996	Mammographic/xerographic diagnosis only, no size given; clinically not palpable
997	Paget's Disease of nipple with no demonstrable tumor
998	Diffuse
999	Unknown; size not stated Not documented in patient record

Breast

CS Extension

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'.

Note 4: If extension code is 00, then Behavior code must be 2; if extension code is 05 or 07, then behavior code may be 2 or 3; and, if extension code is 10, then behavior code must be 3.

Note 5: Inflammatory Carcinoma. AJCC includes the following text in the 6th edition Staging Manual (p. 225-6), "Inflammatory carcinoma is a clinicopathologic entity characterized by diffuse erythema and edema (peau d'orange) of the breast, often without an underlying palpable mass. These clinical findings should involve the majority of the skin of the breast. Classically, the skin changes arise quickly in the affected breast. Thus the term of inflammatory carcinoma should not be applied to a patient with neglected locally advanced cancer of the breast presenting late in the course of her disease. On imaging, there may be a detectable mass and characteristic thickening of the skin over the breast. This clinical presentation is due to tumor emboli within dermal lymphatics, which may or may not be apparent on skin biopsy. The tumor of inflammatory carcinoma is classified T4d. It is important to remember that inflammatory carcinoma is primarily a clinical diagnosis. Involvement of the dermal lymphatics alone does not indicate inflammatory carcinoma in the absence of clinical findings. In addition to the clinical picture, however, a biopsy is still necessary to demonstrate cancer either within the dermal lymphatics or in the breast parenchyma itself."

Note 6: For Collaborative Staging, the abstractor should record a stated diagnosis of inflammatory carcinoma, and also record any clinical statement of the character and extent of skin involvement in the text area. Code 71 should be used if there is a stated diagnosis of inflammatory carcinoma and a clinical description of the skin involvement in less than 50% of the skin of the breast. Code 73 should be used if there is a stated diagnosis of inflammatory carcinoma and a clinical description of the skin involvement in more than 50% (majority) of the skin of the breast. Cases with a stated diagnosis of inflammatory carcinoma but no such clinical description should be coded 71. A clinical description of inflammation, erythema, edema, peau d'orange, etc. without a stated diagnosis of inflammatory carcinoma should be coded 51 or 52, depending on described extent of the condition.

Code	Description	TNM	SS77	SS2000
00	In situ: noninfiltrating; intraepithelial Intraductal WITHOUT infiltration Lobular neoplasia	Tis	IS	IS
05	Paget Disease of nipple (WITHOUT underlying tumor)	Tis	**	**
07	Paget Disease of nipple (WITHOUT underlying invasive carcinoma pathologically)	Tis	**	**
10	Confined to breast tissue and fat including nipple and/or areola Localized, NOS	*	L	L
20	Invasion of 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	*	RE	RE

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30	Attached or fixation to pectoral muscle(s) or underlying tissue Deep fixation Invasion of (or fixation to) pectoral fascia or muscle	*	RE	RE
40	Invasion of (or fixation to): Chest wall Intercostal or serratus anterior muscle(s) Rib(s)	T4a	RE	RE
51	Extensive skin involvement, including: Satellite nodule(s) in skin of primary breast Ulceration of skin of breast Any of the following conditions described as involving not more than 50% of the breast, or amount or percent of involvement not stated: Edema of skin En cuirasse Erythema Inflammation of skin Peau d'orange ("pigskin")	T4b	RE	RE
52	Any of the following conditions described as involving more than 50% of the breast WITHOUT a stated diagnosis of inflammatory carcinoma: Edema of skin En cuirasse Erythema Inflammation of skin Peau d'orange ("pigskin")	T4b	RE	RE
61	(40) + (51)	T4c	RE	RE
62	(40) + (52)	T4c	RE	RE
71	Diagnosis of inflammatory carcinoma WITH a clinical description of inflammation, erythema, edema, peau d'orange, etc., involving less than 50% of the skin of the breast, or percent of involvement not stated, WITH or WITHOUT dermal lymphatic infiltration Inflammatory carcinoma, NOS	T4d	RE	RE
72	OBSOLETE Code 72 has been combined with code 71. Any cases coded to 72 should be re-coded to 71.	T4d	RE	RE
73	Diagnosis of inflammatory carcinoma WITH a clinical description of inflammation, erythema, edema, peau d'orange, etc., of more than 50% of the breast, WITH or WITHOUT dermal lymphatic infiltration	T4d	RE	RE
95	No evidence of primary tumor	T0	U	U
99	Unknown extension Primary tumor cannot be assessed Not documented in patient record	TX	U	U

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

** For codes 05 and 07 ONLY, summary stage is assigned based on the value of Behavior Code ICD-0-3 as shown in the Extension Behavior Table for this site.

Breast

CS TS/Ext-Eval

SEE STANDARD TABLE

Breast

CS Lymph Nodes

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

Note 2: If the pathology report indicates that nodes are positive but size of the metastases is not stated, assume the metastases are greater than 0.2 mm and code the lymph nodes as positive in this field. Use code 60 in the absence of other information about regional nodes.

Note 3: If no lymph nodes were removed surgically, then use only the following codes for clinical evaluation of axillary nodes: 00 - Clinically negative 50 - Fixed/matted nodes, 60 - Clinically positive axillary nodes 99 - Unknown/not stated.

Note 4: If pre-surgical therapy was given and there is a clinical evaluation (positive or negative) of lymph nodes, then use only the following codes for clinical evaluation of axillary nodes: 00 - Clinically negative 50 - Fixed/matted nodes 60 - Clinically positive axillary nodes AND Code a '5' in the nodes evaluation field. If there is no clinical evaluation of nodes, use the information from the pathologic evaluation and code a '6' in the nodes evaluation field.

Note 5: Isolated tumor cells (ITC) are defined as single tumor cells or small clusters not greater than 0.2 mm, usually detected only by immunohistochemical (IHC) or molecular methods but which may be verified on H and E stains. ITCs do not usually show evidence of malignant activity (e.g., proliferation or stromal reaction). Lymph nodes with ITCs only are not considered positive lymph nodes.

Note 6: Codes 13-50 are used for positive axillary nodes without internal mammary nodes.

Code	Description	TNM	SS77	SS2000
00	None; no regional lymph node involvement, or ITCs detected by immunohistochemistry or molecular methods ONLY. (See Note 5 and Site-specific Factors 4 and 5.)	*	NONE	NONE
05	None; no regional lymph node(s) but with ITCs detected on routine H and E stains. (See Note 5)	N0(i+)	NONE	NONE
13	Axillary lymph node(s), ipsilateral, micrometastasis ONLY detected by immunohistochemical (IHC) means ONLY (at least one micrometastasis greater than 0.2 mm and all micrometastases less than or equal to 2 mm)	N1mi	RN	RN
15	Axillary lymph node(s), ipsilateral, micrometastasis ONLY detected or verified on H&E (at least one micrometastasis greater than 0.2 mm and all micrometastases less than or equal to 2 mm) Micrometastasis, NOS	N1mi	RN	RN
25	Movable axillary lymph node(s), ipsilateral, positive with more than micrometastasis (i.e., at least one metastasis greater than 2 mm)	**	RN	RN
26	Stated as N1, NOS	**	RN	RN
28	Stated as N2, NOS	**	RN	RN
50	Fixed/matted ipsilateral axillary nodes, positive with more than micrometastasis (i.e., at least one metastasis greater than 2 mm) Fixed/matted ipsilateral axillary nodes, NOS	**	RN	RN
60	Axillary/regional lymph node(s), NOS Lymph nodes NOS	**	RN	RN
71	Internal mammary node(s), ipsilateral, positive on sentinel nodes but not clinically apparent (no positive imaging or clinical exam) WITHOUT axillary lymph node(s), ipsilateral	**	RN	RN

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72	Internal mammary node(s), ipsilateral, positive on sentinel nodes but not clinically apparent (no positive imaging or clinical exam) WITH axillary lymph node(s), ipsilateral	**	RN	RN
73	Internal mammary node(s), ipsilateral, positive on sentinel nodes but not clinically apparent (no positive imaging or clinical exam) UNKNOWN if positive axillary lymph node(s), ipsilateral	**	RN	RN
74	Internal mammary node(s), ipsilateral, clinically apparent (on imaging or clinical exam) WITHOUT axillary lymph node(s), ipsilateral	N2b	RN	RN
75	Infraclavicular lymph node(s) (subclavicular)	N3a	D	RN
76	Internal mammary node(s), ipsilateral, clinically apparent (on imaging or clinical exam) WITH axillary lymph node(s), ipsilateral, codes 15 to 60 WITH or WITHOUT infraclavicular lymph node(s)	N3b	RN	RN
77	Internal mammary node(s), ipsilateral, clinically apparent (on imaging or clinical exam) UNKNOWN if positive axillary lymph node(s), ipsilateral	N2b	RN	RN
78	(75) + (77)	N3a	D	RN
79	Stated as N3, NOS	N3NOS	RN	RN
80	Supraclavicular node(s)	N3c	D	D
99	Unknown; not stated Regional lymph node(s) cannot be assessed Not documented in patient record	NX	U	U

* For code 00 ONLY, the N category is assigned based on the coding of Site-Specific Factors 4 and 5 using the IHC MOL Table for this site.

**For codes 25, 26, 28, 50, 60, 71, 72, and 73 ONLY, the N category is assigned based on the value of Site-Specific Factor 3, Number of Positive Ipsilateral Axillary LymphNodes. See Lymph Nodes Positive Axillary Nodes Table.

Breast

CS Reg Nodes Eval

SEE STANDARD TABLE

Breast

Reg LN Pos

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

Note 2: Lymph nodes with only isolated tumor cells (ITCs) are NOT counted as positive lymph nodes. Only lymph nodes with metastases greater than 0.2mm (micrometastases or larger) should be counted as positive. If the pathology report indicates that nodes are positive but size of the metastases is not stated, assume the metastases are > 0.2mm and code the lymph nodes as positive in this field.

Note 3: Record all positive regional lymph nodes in this field. Record the number of positive regional axillary nodes separately in the appropriate Site-Specific Factor field.

Code	Description
00	All nodes examined negative.
01-89	1 - 89 nodes positive (code exact number of nodes positive)
90	90 or more nodes positive

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

Breast

Reg LN Exam

SEE STANDARD TABLE

Breast

CS Mets at DX

Note: Supraclavicular (transverse cervical) is moved to CS Lymph Nodes.

Code	Description	TNM	SS77	SS2000
00	No; none	M0	NONE	NONE
10	Distant lymph node(s) Cervical, NOS Contralateral/bilateral axillary and/or internal mammary Other than above Distant lymph node(s), NOS	M1	D	D
40	Distant metastases except distant lymph node(s) (code 10) Distant metastasis, NOS Carcinomatosis	M1	D	D
42	Further contiguous extension: Skin over: Axilla Contralateral (opposite) breast Sternum Upper abdomen	M1	D	D
44	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	M1	D	D
50	(10) + any of [(40) to (44)] Distant lymph node(s) plus other distant metastases	M1	D	D
99	Unknown if distant metastasis Distant metastasis cannot be assessed Not documented in patient record	MX	U	U

Breast

CS Mets Eval

SEE STANDARD TABLE

Breast

CS Site-Specific Factor 1 Estrogen Receptor Assay (ERA)

Code	Description
000	Test not done (test was not ordered and was not performed)
010	Positive/elevated
020	Negative/normal; within normal limits
030	Borderline; undetermined whether positive or negative
080	Ordered, but results not in chart
999	Unknown or no information Not documented in patient record

Breast

CS Site-Specific Factor 2 Progesterone Receptor Assay (PRA)

Code	Description
000	Test not done (test was not ordered and was not performed)
010	Positive/elevated
020	Negative/normal; within normal limits
030	Borderline, undetermined whether positive or negative
080	Ordered, but results not in chart
999	Unknown or no information Not documented in patient record

Breast

CS Site-Specific Factor 3 Number of Positive Ipsilateral Axillary Lymph Nodes

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

Note 2: Lymph nodes with only isolated tumor cells (ITCs) are NOT counted as positive lymph nodes. Only lymph nodes with metastases greater than 0.2 mm (micrometastases or larger) should be counted as positive. If the pathology report indicates that nodes are positive but size of the metastases is not stated, assume the metastases are greater than 0.2 mm and code the lymph nodes as positive in this field.

Note 3: This field is based on pathologic information only. If no ipsilateral axillary nodes were removed for examination, or if an ipsilateral axillary lymph node drainage area was removed but no lymph nodes were found, code 098.

Note 4: The general coding instructions in Part I for Regional Nodes Positive also apply to this field (although the codes in Regional Nodes Positive are 2 digits rather than 3). When positive ipsilateral axillary lymph nodes are coded in this field, the number of positive ipsilateral axillary lymph nodes must be less than or equal to the number coded in Regional Nodes Positive (i.e., the number of positive ipsilateral axillary nodes will always be a subset of the number of positive regional nodes).

Code	Description
000	All ipsilateral axillary nodes examined negative
001-089	1 - 89 nodes positive (code exact number of nodes positive)
090	90 or more nodes positive

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095	Positive aspiration of lymph node(s)
097	Positive nodes - number unspecified
098	No axillary nodes examined
099	Unknown if axillary nodes are positive; not applicable Not documented in patient record

Breast

CS Site-Specific Factor 4 Immunohistochemistry (IHC) of Regional Lymph Nodes

Note 1: Use codes 000-009 only to report results of IHC on otherwise histologically negative lymph nodes on routine H and E stains., i.e., only when CS Lymph Nodes is coded 00. Otherwise code 888 in this field.

Note 2: Isolated tumor cells (ITC) are defined as single tumor cells or small clusters 0.2 mm, usually detected only by immunohistochemical (IHC) or molecular methods (RT-PCR: Reverse Transcriptase Polymerase Chain Reaction) but which may be verified on H and E stains. ITCs do not usually show evidence of malignant activity (e.g., proliferation or stromal reaction.)

Note 3: If it is unstated whether or not IHC tests were done, assume they were not done.

Code	Description
000	Regional lymph nodes negative on H and E, no IHC studies done or unknown if IHC studies done Nodes clinically negative, not examined pathologically
001	Regional lymph nodes negative on H and E, IHC studies done, negative for tumor
002	Regional lymph nodes negative on H and E, IHC studies done, positive for ITCs (tumor cell clusters not greater than 0.2mm)
009	Regional lymph nodes negative on H and E, positive for tumor detected by IHC, size of tumor cell clusters or metastases not stated
888	Not applicable CS Lymph Nodes not coded 00

Breast

CS Site-Specific Factor 5 Molecular Studies of Regional Lymph Nodes

Note 1: Use codes 000-002 only to report results of molecular studies on otherwise histologically negative lymph nodes on routine H and E stains., i.e., only when CS Lymph Nodes is coded 00. Otherwise code 888 in this field.

Note 2: Isolated tumor cells (ITC) are defined as single tumor cells or small clusters less than or equal to 0.2 mm, usually detected only by immunohistochemical (IHC) or molecular methods (RT-PCR: Reverse Transcriptase Polymerase Chain Reaction) but which may be verified on H and E stains. ITCs do not usually show evidence of malignant activity (e.g., proliferation or stromal reaction.)

Note 3: If it is not stated whether molecular tests were done, assume they were not done.

Code	Description
000	Regional lymph nodes negative on H and E, no RT-PCR molecular studies done or unknown if RT-PCR studies done Nodes clinically negative, not examined pathologically
001	Regional lymph nodes negative on H and E, RT-PCR molecular studies done, negative for tumor
002	Regional lymph nodes negative on H and E, RT-PCR molecular studies done, positive for tumor
888	Not applicable CS Lymph Nodes not coded 00

Breast

CS Site-Specific Factor 6 Size of Tumor--Invasive Component

Note 1: Record the code that indicates how the tumor size coded in CS Tumor Size was determined.

Note 2: For this field, "mixed" indicates a tumor with both invasive and in situ components. Such a "mixed" tumor may be a single histology such as mixed infiltrating ductal and ductal carcinoma in situ or combined histology such as mixed infiltrating ductal and lobular carcinoma in situ. "Pure" indicates a tumor that contains only invasive or only in situ tumor.

Note 3: This information is collected for analytic purposes and does not affect the stage grouping algorithm. Different codes in this field may explain differences in outcome for patients in the same T category or stage group. Example: Patient 1 has a "mixed" (see Note 2) tumor measuring 2.5 cm with extensive areas of in situ tumor, and the size of the invasive component is not stated. This would be coded 025 in CS Tumor Size, and would be classified as T2. It would be coded 040 in Site-Specific Factor 6. Patient 2 has a purely invasive tumor measuring 2.5 cm. This would also be coded 025 in CS Tumor Size and would also be classified as T2. However, it would be coded 000 in Site-Specific Factor 6. Patient 1's tumor would probably have a better survival than Patient 2's tumor, since it would more likely be a T1 lesion if the true dimensions of the invasive component were known.

Code	Description
000	Entire tumor reported as invasive (no in situ component reported)
010	Entire tumor reported as in situ (no invasive component reported)
020	Invasive and in situ components present, size of invasive component stated and coded in CS Tumor Size
030	Invasive and in situ components present, size of entire tumor coded in CS Tumor Size because size of invasive component not stated AND in situ described as minimal (less than 25%)
040	Invasive and in situ components present, size of entire tumor coded in CS Tumor Size because size of invasive component not stated AND in situ described as extensive (25% or more)
050	Invasive and in situ components present, size of entire tumor coded in CS Tumor Size because size of invasive component not stated AND proportions of in situ and invasive not known
060	Invasive and in situ components present, unknown size of tumor (CS Tumor Size coded 999)
888	Unknown if invasive and in situ components present, unknown if tumor size represents mixed tumor or a "pure" tumor. (See Note 2.) Clinical tumor size coded.

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99	Unknown extension Primary tumor cannot be assessed Not documented in patient record	TX	U	U
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* For Extension codes 20, 25, 30, 31, 38 and 39, the T category is assigned based on the CS Tumor Size, as shown in the Extension Size Table for this site.

Cervix Uteri
CS TS/Ext-Eval
SEE STANDARD TABLE

Cervix Uteri
CS Lymph Nodes

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

Note 2: If the clinician says "adnexa palpated" but doesn't mention lymph nodes, assume lymph nodes are not involved.

Note 3: If either exploratory or definitive surgery is done with no mention of lymph nodes, assume nodes are negative, code 00.

Code	Description	TNM	SS77	SS2000
00	No regional lymph node involvement	N0	NONE	NONE
10	Regional lymph node(s): Iliac, NOS: Common External Internal (hypogastric) Obturator Paracervical Parametrial Pelvic, NOS Sacral, NOS: Lateral (laterosacral) Middle (promontorial) (Gerota's node) Presacral Uterosacral Regional lymph node(s), NOS	N1	RN	RN
80	Lymph nodes, NOS	N1	RN	RN
99	Unknown; not stated Regional lymph node(s) cannot be assessed Not documented in patient record	NX	U	U

Cervix Uteri
CS Reg Nodes Eval
SEE STANDARD TABLE

Cervix Uteri
Reg LN Pos
SEE STANDARD TABLE

Cervix Uteri
Reg LN Exam
SEE STANDARD TABLE

Cervix Uteri
CS Mets at DX

Code	Description	TNM	SS77	SS2000
00	No; none	M0	NONE	NONE
10	Distant lymph node(s) including: Aortic (para-, peri-, lateral) Inguinal (femoral) Mediastinal Distant lymph node(s), NOS FIGO Stage IVB	M1	D	D
40	Distant metastases, except distant lymph node(s) (code 10) Distant metastasis, NOS Carcinomatosis	M1	D	D
50	(10) + (40) Distant lymph node(s) plus other distant metastases	M1	D	D
99	Unknown if distant metastasis Distant metastasis cannot be assessed Not documented in patient record	MX	U	U

Cervix Uteri
CS Mets Eval
SEE STANDARD TABLE

Cervix Uteri
CS Site-Specific Factor 1

Code	Description
888	Not applicable for this site

Cervix Uteri
CS Site-Specific Factor 2

Code	Description
888	Not applicable for this site

Cervix Uteri
CS Site-Specific Factor 3

Code	Description
888	Not applicable for this site

Collaborative Staging Codes

Corpus Uteri; Uterus, NOS (excluding Placenta)

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

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

CS Tumor Size

SEE STANDARD TABLE

Corpus Uteri; Uterus, NOS (excluding Placenta)

CS Extension

Note 1: According to the AJCC, extension to the bowel or bladder mucosa must be proven by biopsy in order to rule out bullous edema.

Note 2: Since "cancer cells in ascites or in peritoneal washings" was not specifically categorized in the 1977 Summary Stage Guide, is unclear to which stage previous cases may have been coded.

Code	Description	TNM	SS77	SS2000
00	In situ: preinvasive; noninvasive; intraepithelial Cancer in situ FIGO Stage 0	Tis	IS	IS
10	FIGO Stage I not further specified Invasive cancer confined to corpus uteri	T1NOS	L	L
11	Confined to endometrium (stroma) FIGO Stage IA	T1a	L	L
12	Tumor invades less than one-half of myometrium Invasion of inner half of myometrium FIGO Stage IB	T1b	L	L
13	Tumor invades one-half or more of myometrium Invasion of outer half of myometrium FIGO Stage IC	T1c	L	L
14	Invasion of myometrium, NOS	T1NOS	L	L
16	Tunica serosa of visceral peritoneum (serosa covering the corpus)	T1NOS	L	L
40	Localized, NOS	T1NOS	L	L

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50	Cervix uteri, NOS, but not beyond uterus FIGO Stage II, NOS	T2NOS	RE	RE
51	Endocervical glandular involvement only FIGO Stage IIA	T2a	RE	RE
52	Cervical stromal invasion FIGO Stage IIB	T2b	RE	RE
60	Extension or metastasis within true pelvis: Adnexa Fallopian tube(s) Ligaments: Broad, round, uterosacral Ovary(ies) Parametrium Pelvic serosa Tunica serosa (parietal lining of the pelvic or abdominal cavity) FIGO Stage IIIA FIGO Stage III, NOS	T3a	RE	RE
61	Cancer cells in ascites Cancer cells in peritoneal washings FIGO Stage IIIA	T3a	RE	RE
62	Ureter and vulva	T3a	D	RE
64	Extension or metastasis to vagina FIGO Stage IIIB	T3b	D	RE
65	Extension or metastasis to pelvic wall(s) Described clinically as "frozen pelvis", NOS FIGO Stage IIIB	T3b	RE	RE
66	Extension or metastasis to: Bladder wall Bladder, NOS excluding mucosa Rectal wall Rectum, NOS excluding mucosa FIGO Stage IIIB	T3b	RE	RE
67	[(65) or (66)] and [(62) or (64)]	T3b	D	RE
70	Extension to bowel mucosa or bladder mucosa (excluding bullous edema) FIGO Stage IVA FIGO Stage IV, NOS	T4	D	D
80	Further contiguous extension Abdominal serosa (peritoneum) Cul de sac Sigmoid colon Small intestine	T4	D	D
95	No evidence of primary tumor	T0	U	U
99	Unknown extension Primary tumor cannot be assessed Not documented in patient record	TX	U	U

Collaborative Staging Codes

Ovary

C56.9

C56.9 Ovary

Note: Laterality must be coded for this site.

CS Tumor Size	CS Site-Specific Factor 1 -	The following tables are available at the collaborative staging website: Histology Exclusion Table AJCC Stage
CS Extension	Carbohydrate Antigen 125 (CA-125)	
CS TS/Ext-Eval	CS Site-Specific Factor 2	
CS Lymph Nodes	CS Site-Specific Factor 3	
CS Reg Nodes Eval	CS Site-Specific Factor 4	
Reg LN Pos	CS Site-Specific Factor 5	
Reg LN Exam	CS Site-Specific Factor 6	
CS Mets at DX		
CS Mets Eval		

Ovary

CS Tumor Size

SEE STANDARD TABLE

Ovary

CS Extension

Note 1: Ascites WITH malignant cells changes FIGO stages I and II to IC and IIC, respectively. Ascites, NOS is considered negative.

Note 2: "Both extension to and discontinuous metastasis to any of the following pelvic organs is considered FIGO Stage II and coded in the range 50-65: adnexae, NOS; bladder, bladder serosa; broad ligament (mesovarium); cul-de-sac; fallopian tubes; parametrium; pelvic peritoneum; pelvic wall; rectum; sigmoid colon; sigmoid mesentery; ureter; uterus; uterine serosa.

Note 3: Peritoneal implants outside the pelvis (codes 70-73) must be microscopically confirmed. Peritoneal implants may also be called seeding, salting, talcum powder appearance, or studding.

Note 4: If implants are mentioned, determine whether they are in the pelvis or in the abdomen and code appropriately (60-64) or (70-73). If the location is not specified, code as 75.

Note 5: Both extension to and discontinuous metastasis to any of the following abdominal organs is considered FIGO Stage III and coded in the range 70-75: abdominal mesentery; diaphragm; gallbladder; infracolic omentum; kidneys; large intestine except rectum and sigmoid colon; liver (peritoneal surface); omentum; pancreas; pericolic gutter; peritoneum, NOS; small intestine; spleen; stomach; ureters.

Note 6: Excludes parenchymal liver nodules, which are coded in CS Mets at DX

Note 7: Since "cancer cells in ascites or in peritoneal washings" was not specifically categorized in the 1977 Summary Stage Guide, it is unclear to which stage previous cases may have been coded.

Code	Description	TNM	SS77	SS2000
00	In situ; pre-invasive; non-invasive; intraepithelial	Tis	IS	IS
10	Tumor limited to one ovary, capsule intact, no tumor on ovarian surface, no malignant cells in ascites or peritoneal washings FIGO Stage IA	T1a	L	L
20	Tumor limited to both ovaries, capsule(s) intact, no tumor on ovarian surface, no malignant cells in ascites or peritoneal washings FIGO Stage IB	T1b	L	L
30	Tumor limited to ovaries, unknown if capsule(s) ruptured or if one or both ovaries involved Localized, NOS FIGO Stage I, NOS	T1NOS	L	L

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35	Tumor limited to ovary(ies), capsule(s) ruptured FIGO Stage 1C	T1c	L	RE
36	Tumor on ovarian surface FIGO Stage 1C	T1c	D	RE
41	Tumor limited to ovary(ies) WITH malignant cells in ascites or peritoneal washings FIGO Stage 1C	T1c	RE	RE
43	(35) + (41) FIGO Stage 1C	T1c	RE	RE
44	(36) + any of [(35) or (41)] FIGO Stage 1C	T1c	D	RE
50	Extension to or implants on (but no malignant cells in ascites or peritoneal washings): Adnexa, NOS, ipsilateral or NOS Fallopian tube(s), ipsilateral or NOS FIGO Stage IIA	T2a	RE	RE
52	Extension to or implants on (but no malignant cells in ascites or peritoneal washings): Adnexa, NOS, contralateral Fallopian tube(s), contralateral Uterus FIGO Stage IIA	T2a	D	RE
60	Extension to or implants on other pelvic structures (but no malignant cells in ascites or peritoneal washings): Pelvic tissue: Adjacent peritoneum Ligament(s): Broad, ipsilateral, NOS Ovarian Round Suspensory Mesovarium, ipsilateral, NOS Pelvic wall FIGO Stage IIB	T2b	RE	RE
61	Extension to or implants on other pelvic structures (but no malignant cells in ascites or peritoneal washings): Broad ligament(s), contralateral Mesovarium, contralateral FIGO Stage IIB	T2b	D	RE
62	[(50) and/or (60)] WITH malignant cells in ascites or peritoneal washings FIGO Stage IIC	T2c	RE	RE
63	[(52) and/or (60)] WITH malignant cells in ascites or peritoneal washings FIGO Stage IIC	T2c	D	RE
64	(61) WITH malignant cells in ascites or peritoneal washings FIGO IIC	T2c	D	RE

Collaborative Staging Codes

Prostate

C61.9

C61.9 Prostate gland

Note: Transitional cell carcinoma of the prostatic urethra is to be coded to primary site C68.0, Urethra, and assigned Collaborative Stage codes according to the urethra scheme.

CS Tumor Size	CS Site-Specific Factor 1 -	The following tables are available at the collaborative staging website: Histology Exclusion Table AJCC Stage
CS Extension-Clinical Extension	Prostatic Specific Antigen (PSA)	
CS TS/Ext-Eval	Lab Value	
CS Lymph Nodes	CS Site-Specific Factor 2 -	
CS Reg Nodes Eval	Prostatic Specific Antigen (PSA)	
Reg LN Pos	CS Site-Specific Factor 3 - CS	
Reg LN Exam	Extension - Pathologic Extension	
CS Mets at DX	CS Site-Specific Factor 4 -	
CS Mets Eval	Prostate Apex Involvement	
	CS Site-Specific Factor 5 -	
	Gleason's Primary Pattern and	
	Secondary Pattern Value	
	CS Site-Specific Factor 6 -	
	Gleason's Score	

Prostate

CS Tumor Size

SEE STANDARD TABLE

Prostate

CS Extension-Clinical Extension

Note 1: This field and Site-Specific Factor 3, CS Extension – Pathologic Extension, must both be coded, whether or not a prostatectomy was performed. Information from prostatectomy is EXCLUDED from this field and coded only in Site-Specific Factor 3.

Note 2:

A. Codes 10-15: 1) CODES 10 to 15 are used only for clinically inapparent tumor not palpable or visible by imaging and incidentally found microscopic carcinoma (latent, occult) in one or both lobes. Within this range, give priority to codes 13-15 over code 10. 2) When tumor is found in one lobe or in both lobes by needle biopsy but is not palpable or visible by imaging, use code 15.

B. CODES 20 to 24 are used only for clinically/radiographically apparent tumor, i.e., that which is palpable or visible by imaging. Codes 21 and 22 have precedence over code 20. Code 20 has precedence over code 24.

C. CODE 30 is used for localized cancer when it is unknown if clinically or radiographically apparent. An example would be when a diagnosis is made prior to admission for a prostatectomy with no details provided on clinical findings prior to admission.

D. CODES 31, 33 and 34 have been made OBSOLETE, CODES NO LONGER USED. Information about prostate apex involvement has been moved to Site-Specific Factor 4, Prostate Apex Involvement. AJCC does not use prostate apex involvement in the T classification.

E. CODES 41 to 49 are used for extension beyond the prostate.

Note 3: Prostate Apex Involvement: This field and Site-Specific Factor 4, Prostate Apex Involvement, are both coded whether or not a prostatectomy was performed.

Note 4: Use codes 13-14 when a TURP is done, not for a biopsy only. Do not use code 15 when a TURP is done.

Note 5: Involvement of the prostatic urethra does not alter the extension code.

Note 6: "Frozen pelvis" is a clinical term which means tumor extends to pelvic sidewall(s). In the absence of a more detailed statement of involvement, assign this to code 60.

Note 7: AUA stage. Some of the American Urological Association (AUA) stages A-D are provided as guidelines for coding in the absence of more specific information in the medical record. If physician-assigned AUA stage D1-D2 is based on involvement of lymph nodes only, code under CS Lymph Nodes or CS Mets at DX, not CS Extension.

Note 8: This schema includes evaluation of other pathologic tissue such as a biopsy of the rectum.

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Note 9: For the extension fields for this site, the mapping values for TNM, SS77, and SS2000 and the associated c, p, y, or a indicator are assigned based on the values in CS Extension, CS TS/Ext Eval, and Site-Specific Factor 3. If the value of Site-Specific Factor 3 is greater than 000 and less than 096 (i.e., prostatectomy was done, extension information is available for staging, and invasive tumor was present in the prostatectomy specimen), the mapping values are taken from the Site-Specific Factor 3 mapping, and the T category is identified as a pT. If Site-Specific Factor 3 (Pathologic Extension) code is 096 or greater (meaning that prostatectomy was not performed, or it was performed but the information is not usable for staging), the mapping values are taken from the CS Extension (Clinical Extension) mapping, and the c, p, y, or a indicator is taken from the TS/Ext Eval mapping. If Site-Specific Factor 3 (Pathologic Staging) code is 000 (in situ), and if CS Extension code (Clinical Extension) is greater than 00 and less than 95 (not in situ), the mapping values are taken from the CS Extension (Clinical Extension) mapping and the c, p, y, or a indicator is taken from the TX Ext Eval mapping. If Site-Specific Factor 3 is 000 (in situ) and CS Extension code is 00 (in situ) or greater than 94, the mapping values are taken from the Site-Specific Factor 3 mapping, and the T category is identified as a pT.

Prostate

CS Extension-Clinical Extension

Code	Description	TNM	SS77	SS2000
00	In situ: noninvasive; intraepithelial	Tis	IS	IS
10	Clinically inapparent tumor, number of foci or percent involved tissue not specified Stage A, NOS	T1NOS	L	L
13	Incidental histologic finding in 5% or less of tissue resected (clinically inapparent)	T1a	L	L
14	Incidental histologic finding more than 5% of tissue resected (clinically inapparent)	T1b	L	L
15	Tumor identified by needle biopsy, e.g., for elevated PSA (clinically inapparent)	T1c	L	L
20	Involvement in one lobe, NOS (clinically apparent only)	T2NOS	L	L
21	Involves one half of one lobe or less (clinically apparent only)	T2a	L	L
22	Involves more than one half of one lobe, but not both lobes (clinically apparent only)	T2b	L	L
23	Involves both lobes (clinically apparent only)	T2c	L	L
24	Clinically apparent tumor confined to prostate, NOS Stage B, NOS	T2NOS	L	L
30	Localized, NOS Confined to prostate, NOS Intracapsular involvement only Not stated if Stage A or B, T1 or T2, clinically apparent or inapparent	T2NOS	L	L
31	OBSOLETE (See Notes 2, 3 and Site-Specific Factor 4)	T2NOS	L	L
33	OBSOLETE (See Notes 2, 3 and Site-Specific Factor 4)	T2NOS	L	L
34	OBSOLETE (See Notes 2, 3 and Site-Specific Factor 4)	T2NOS	L	L
41	Extension to periprostatic tissue (Stage C1) Extracapsular extension (beyond prostatic capsule), NOS Through capsule, NOS	T3NOS	RE	RE
42	Unilateral extracapsular extension	T3a	RE	RE
43	Bilateral extracapsular extension	T3a	RE	RE

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45	Extension to seminal vesicle(s) (Stage C2)	T3b	RE	RE
49	Periprostatic extension, NOS (Unknown if seminal vesicle(s) involved) Stage C, NOS	T3NOS	RE	RE
50	Extension to or fixation to adjacent structures other than seminal vesicles: Bladder neck Bladder, NOS Fixation, NOS Rectovesical (Denonvillier's) fascia Rectum; external sphincter	T4	RE	RE
52	Levator muscles Skeletal muscle, NOS Ureter(s)	T4	D	RE
60	Extension to or fixation to pelvic wall or pelvic bone "Frozen pelvis", NOS (See Note 5)	T4	D	D
70	Further contiguous extension (Stage D2) including to: Bone Other organs Penis Sigmoid colon Soft tissue other than periprostatic	T4	D	D
95	No evidence of primary tumor	T0	U	U
99	Extension unknown Primary tumor cannot be assessed Not documented in patient record	TX	U	U

Prostate

CS TS/Ext-Eval

Note 1: For this site, use this item to evaluate the coding of tumor size and extension as coded in both CS Extension (clinical for prostate) and Site-Specific Factor 3, Pathologic Extension if prostatectomy was performed.

Note 2: The codes for this item for prostate differ from the codes used for most other sites. AJCC allows pathologic staging to be assigned on the basis of some biopsies without resection. According to the AJCC manual, "In general, total prostatoseminal-vesiculectomy, including regional node specimen, and histologic confirmation are required for pathologic T classification. However, under certain circumstances, pathologic T classification can be determined with other means. For example, (1) positive biopsy of the rectum permits a pT4 classification without prostatoseminal-vesiculectomy, and (2) a biopsy revealing carcinoma in extraprostatic soft tissue permits a pT3 classification, as does a biopsy revealing adenocarcinoma infiltrating the seminal vesicles." (P. 310)

Note 3: For this site, the T category and its associated c, p, y, or a indicator are assigned based on the values in CS Extension, CS TS/Ext Eval, and Site-Specific Factor 3. For details, see Note 7 under CS Extension.

Note 4: According to AJCC, staging basis for transurethral resection of prostate (TURP) is clinical and is recorded as CS TS/Ext-Eval "1" (c).

Code	Description	Staging Basis
0	No surgical resection done. Evaluation based on physical examination, imaging examination, or other non-invasive clinical evidence. No autopsy evidence used.	c
1	No surgical resection done. Evaluation based on endoscopic examination, diagnostic biopsy, including fine needle aspiration biopsy, or other invasive techniques including surgical observation without biopsy. No autopsy evidence used. Does not meet criteria for AJCC pathological T staging.	c

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2	No surgical resection done, but positive biopsy of extraprostatic tissue allows assignment to CS Extension Codes [(41) to (70)] (see Note 2)	p
3	No surgical resection done, but evidence derived from autopsy (tumor was suspected or diagnosed prior to autopsy)	p
4	Surgical resection performed WITHOUT pre-surgical systemic treatment or radiation OR surgical resection performed, unknown if pre-surgical systemic treatment or radiation performed. Evidence acquired before treatment, supplemented or modified by the additional evidence acquired during and from surgery, particularly from pathologic examination of the resected specimen. Meets criteria for AJCC pathologic T staging.	p
5	Surgical resection performed WITH pre-surgical systemic treatment or radiation, BUT tumor size/extension based on clinical evidence	c
6	Surgical resection performed WITH pre-surgical systemic treatment or radiation; BUT tumor size/extension based on pathologic evidence	y
8	Evidence from autopsy only (tumor was unsuspected or undiagnosed prior to autopsy)	a
9	Unknown if surgical resection done Not assessed; cannot be assessed Unknown if assessed Not documented in patient record	c

Prostate

CS Lymph Nodes

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

Code	Description	TNM	SS77	SS2000
00	None; no regional lymph node involvement	N0	NONE	NONE
10	Regional nodes, including contralateral or bilateral lymph nodes: Iliac, NOS External Internal (hypogastric), NOS: Obturator Pelvic, NOS Periprostatic Sacral, NOS Lateral (laterosacral) Middle (promontorial) (Gerota's node) Presacral Regional lymph node(s), NOS	N1	RN	RN
80	Lymph nodes, NOS	N1	RN	RN
99	Unknown; not stated Regional lymph node(s) cannot be assessed	NX	U	U

Prostate

CS Reg Nodes Eval

SEE STANDARD TABLE

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Prostate

Reg LN Pos

SEE STANDARD TABLE

Prostate

Reg LN Exam

SEE STANDARD TABLE

Prostate

CS Mets at DX

Code	Description	TNM	SS77	SS2000
00	No; none	M0	NONE	NONE
11	Distant lymph node(s), NOS Common iliac	M1a	RN	D
12	Distant lymph node(s): Aortic, NOS: Lateral (lumbar) Para-aortic Periaortic Cervical Inguinal, NOS Deep, NOS Node of Coquet or Rosenmuller (highest deep inguinal) Superficial (femoral) Retroperitoneal, NOS Scalene (inferior deep cervical) Supraclavicular (transverse cervical) Distant lymph node(s), NOS	M1a	D	D
30	Metastasis in bone(s)	M1b	D	D
35	(30) + [(11) or (12)]	M1b	D	D
40	Distant metastasis, other than distant lymph node(s) (codes 11 or 12) or bone(s) Carcinomatosis	M1c	D	D
45	Distant metastasis, NOS Stage D2, NOS	M1NOS	D	D
50	(40) + any of [(11) or (12)]	M1c	D	D
55	(40) + any of [(30) or (35)]	M1c	D	D
99	Unknown if distant metastasis Distant metastasis cannot be assessed Not documented in patient record	MX	U	U

Prostate

CS Mets Eval

SEE STANDARD TABLE

Prostate

CS Site-Specific Factor 1 Prostatic Specific Antigen (PSA) Lab Value

Note 1: Record the highest PSA lab value prior to diagnostic biopsy or treatment. For example, a pretreatment PSA of 20.0 ng/ml would be recorded as 200.

Note 2: Lab values for SSFs 1 and 2 should be from the same laboratory test.

Code	Description
000	Test not done (test was not ordered and was not performed)
001	0.1 or less ng/ml (actual value with implied decimal point)
002-989	0.2 - 98.9 ng/ml (actual value with implied decimal point)
990	99.0 or greater ng/ml
999	Unknown or no information Not documented in patient record

Prostate

CS Site-Specific Factor 2 Prostatic Specific Antigen (PSA)

Note 1: Use the highest PSA lab value prior to diagnostic biopsy or treatment.

Note 2: Lab values for SSFs 1 and 2 should be from the same laboratory test.

Code	Description
000	Test not done (test was not ordered and was not performed)
010	Positive/elevated
020	Negative/normal; within normal limits
030	Borderline; undetermined whether positive or negative
080	Ordered, but results not in chart
999	Unknown or no information Not documented in patient record

Prostate

CS Site-Specific Factor 3 CS Extension - Pathologic Extension

Note 1: Include information from prostatectomy in this field and not in CS Extension - Clinical Extension. Use all histologic information including the prostatectomy if it was done within the first course of treatment. Code 097 if there was no prostatectomy performed within the first course of treatment.

Note 2: Limit information in this field to first course of treatment in the absence of disease progression.

Note 3: Involvement of the prostatic urethra does not alter the extension code.

Note 4: When the apical margin, distal urethral margin, bladder base, or bladder neck margin is involved and there is no extracapsular extension, use code 040.

Note 5: Codes 031, 033 and 034 have been made OBSOLETE, CODES NO LONGER USED. Information about prostate apex involvement has been moved to Site-Specific Factor 4, Prostate Apex Involvement. AJCC does not use prostate apex involvement in the T classification.

Note 6: When prostate cancer is an incidental finding during a prostatectomy for other reasons (for example, a cystoprostatectomy for bladder cancer), use the appropriate code for the extent of disease found (for example, one lobe, or both lobes, or more).

Note 7: "Frozen pelvis" is a clinical term which means tumor extends to pelvic sidewall(s). In the absence of a more detailed statement of involvement, assign this to code 060.

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Note 8: AUA stage. Some of the American Urological Association (AUA) stages A-D are provided as guidelines for coding in the absence of more specific information in the medical record. If physician-assigned AUA stage D1-D2 is based on involvement of lymph nodes only, code under CS Lymph Nodes or CS Mets at DX, not CS Extension - Pathologic Extension.

Note 9: For the extension fields for this site, the mapping values for TNM, SS77, and SS2000 and the associated c, p, y, or a indicator are assigned based on the values in CS Extension, CS TS/Ext Eval, and Site-Specific Factor 3. If the value of Site-Specific Factor 3 is greater than 000 and less than 095 (i.e., prostatectomy was done, extension information is available for staging, and invasive tumor was present in the prostatectomy specimen), the mapping values are taken from the Site-Specific Factor 3 mapping, and the T category is identified as a pT. If Site-Specific Factor 3 (Pathologic Extension) code is 095 or greater (meaning that prostatectomy was not performed, or it was performed but the information is not usable for staging), the mapping values are taken from the CS Extension (Clinical Extension) mapping, and the c, p, y, or a indicator is taken from the TS/Ext Eval mapping. If Site-Specific Factor 3 (Pathologic Staging) code is 000 (in situ), and if CS Extension code (Clinical Extension) is greater than 00 and less than 95 (not in situ), the mapping values are taken from the CS Extension (Clinical Extension) mapping and the c, p, y, or a indicator is taken from the TX Ext Eval mapping. If Site-Specific Factor 3 is 000 (in situ) and CS Extension code is 00 (in situ) or greater than 95, the mapping values are taken from the Site-Specific Factor 3 mapping, and the T category is identified as a pT.

Prostate

CS Site-Specific Factor 3 CS Extension - Pathologic Extension

Code	Description	TNM	SS77	SS2000
000	In situ; non-invasive; intraepithelial	Tis	IS	IS
020	Involvement in one lobe, NOS	T2NOS	L	L
021	Involves one half of one lobe or less	T2a	L	L
022	Involves more than one half of one lobe, but not both lobes	T2b	L	L
023	Involves both lobes	T2c	L	L
030	Localized, NOS Confined to prostate, NOS Intracapsular involvement only Stage B, NOS	T2NOS	L	L
031	OBSOLETE (See Note 5 and Site-Specific Factor 4)	T2NOS	L	L
032	Invasion into (but not beyond) prostatic capsule	T2NOS	L	L
033	OBSOLETE (See Note 5 and Site-Specific Factor 4)	T2NOS	L	L
034	OBSOLETE (See Note 5 and Site-Specific Factor 4)	T2NOS	L	L
040	No extracapsular extension but margins involved (See Note 4)	T2NOS	L	RE
041	Extension to periprostatic tissue (Stage C1): Extracapsular extension (beyond prostatic capsule), NOS Through capsule, NOS	T3a	RE	RE
042	Unilateral extracapsular extension	T3a	RE	RE
043	Bilateral extracapsular extension	T3a	RE	RE
045	Extension to seminal vesicle(s) (Stage C2)	T3b	RE	RE
048	Extracapsular extension and margins involved (Excluding seminal vesicle margins—see code 045)	T3a	RE	RE

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050	Extension to or fixation to adjacent structures other than seminal vesicles: Bladder neck Bladder, NOS Fixation, NOS Rectovesical (Denonvillier's) fascia Rectum; external sphincter	T4	RE	RE
052	Levator muscle Skeletal muscle, NOS Ureter	T4	D	RE
060	Extension to or fixation to pelvic wall or pelvic bone "Frozen pelvis", NOS (See Note 6)	T4	D	D
070	Further contiguous extension (Stage D2) including to: Bone Penis Sigmoid colon Soft tissue other than periprostatic tissue Other organs	T4	D	D
095	No evidence of primary tumor	T0	U	U
096	Unknown if prostatectomy done	TX	U	U
097	No prostatectomy done within first course of treatment	TX	U	U
098	Prostatectomy performed, but not considered first course of treatment because of, for example, disease progression.	TX	U	U
099	Prostatectomy done: Extension unknown Primary tumor cannot be assessed Not documented in patient record	TX	U	U

Prostate

CS Site-Specific Factor 4 Prostate Apex Involvement (OBSOLETE: Prostatic Acid Phosphatase (PAP))

Note: Historically, apex involvement has affected the stage classification, although it does not affect the AJCC 6th edition. This item allows collection of information about the involvement of the prostate apex with cancer, both clinically and at prostatectomy. In codes 110-550, the first digit represents the clinical status of apex involvement and the second digit represents apex involvement found at prostatectomy, following these definitions:

- 1 – No involvement of prostatic apex
- 2 – Into prostatic apex/arising in prostatic apex, NOS
- 3 – Arising in prostatic apex
- 4 – Extension into prostatic apex
- 5 – Apex extension unknown

When abstracting and coding apex involvement, try to determine if the cancer has extended into the apex from another part of the prostate or has arisen in the apex.

Code	Description
000	OBSOLETE PAP: Test not done (test was not ordered and was not performed)
010	OBSOLETE PAP: Positive/elevated
020	OBSOLETE PAP: Negative/normal; within normal limits
030	OBSOLETE PAP: Borderline; undetermined whether positive or negative

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080	OBSOLETE PAP: Ordered, but results not in chart
110	No involvement of prostatic apex.
120	Clinical apex involvement: No involvement AND Prostatectomy apex involvement: Into/arising in, NOS.
130	Clinical apex involvement: No involvement AND Prostatectomy apex involvement: Arising in.
140	Clinical apex involvement: No involvement AND Prostatectomy apex involvement: Extension into.
150	Clinical apex involvement: No involvement AND Prostatectomy apex involvement: Unknown.
210	Clinical apex involvement: Into/arising in, NOS AND Prostatectomy apex involvement: No involvement.
220	Clinical apex involvement: Into/arising in, NOS AND Prostatectomy apex involvement: Into/arising in, NOS.
230	Clinical apex involvement: Into/arising in, NOS AND Prostatectomy apex involvement: Arising in.
240	Clinical apex involvement: Into/arising in, NOS AND Prostatectomy apex involvement: Extension into.
250	Clinical apex involvement: Into/arising in, NOS AND Prostatectomy apex involvement: Unknown.
310	Clinical apex involvement: Arising in AND Prostatectomy apex involvement: No involvement.
320	Clinical apex involvement: Arising in AND Prostatectomy apex involvement: Into/arising in, NOS.
330	Clinical apex involvement: Arising in AND Prostatectomy apex involvement: Arising in.
340	Clinical apex involvement: Arising in AND Prostatectomy apex involvement: Extension into.
350	Clinical apex involvement: Arising in AND Prostatectomy apex involvement: Unknown.
410	Clinical apex involvement: Extension into AND Prostatectomy apex involvement: No involvement.
420	Clinical apex involvement: Extension into AND Prostatectomy apex involvement: Into/arising in, NOS.
430	Clinical apex involvement: Extension into AND Prostatectomy apex involvement: Arising in.
440	Clinical apex involvement: Extension into AND Prostatectomy apex involvement: Extension into.
450	Clinical apex involvement: Extension into AND Prostatectomy apex involvement: Unknown.
510	Clinical apex involvement: Unknown AND Prostatectomy apex involvement: No involvement.
520	Clinical apex involvement: Unknown AND Prostatectomy apex involvement: Into/arising in, NOS.
530	Clinical apex involvement: Unknown AND Prostatectomy apex involvement: Arising into.

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540	Clinical apex involvement: Unknown AND Prostatectomy apex involvement: Extension into.
550	Clinical apex involvement: Unknown AND Prostatectomy apex involvement: Unknown.
999	OBSOLETE PAP: Unknown or no information. Not documented in patient record

Prostate

CS Site-Specific Factor 5 Gleason's Primary Pattern and Secondary Pattern Value

Note 1: Usually prostate cancers are graded using Gleason's score or pattern. Gleason's grading for prostate primaries is based on a 5-component system (5 histologic patterns). Prostatic cancer generally shows two main histologic patterns. The primary pattern, that is, the pattern occupying greater than 50% of the cancer is usually indicated by the first number of the Gleason's grade and the secondary pattern is usually indicated by the second number. These two numbers are added together to create a pattern score ranging from 2 to 10.

If there are two numbers, assume that they refer to two patterns (the first number being the primary and the second number being the secondary) and sum them to obtain the score.

If only one number is given and it is less than or equal to 5, assume that it describes a pattern and uses the number as the primary pattern and code the secondary as '9'.

If only one number is given and it is greater than 5, assume that it is a score.

If the pathology report specifies a specific number out of a total of 10, the first number given is the score.
Example: The pathology report says "Gleason's 3/10". The Gleason's score would be 3.

Note 2: Following AJCC guidelines for coding multiple Gleason's Scores for prostate cancer, if there is more than one primary and secondary pattern value, the value to be coded is the one based on the larger tumor specimen.

Please note that this rule is not the same as the rule for coding grade.

Code	Description
000	Test not done (test was not ordered and was not performed)
011	Primary pattern 1, secondary pattern 1
012	Primary pattern 1, secondary pattern 2
013	Primary pattern 1, secondary pattern 3
014	Primary pattern 1, secondary pattern 4
015	Primary pattern 1, secondary pattern 5
019	Primary pattern 1, secondary pattern 9
021	Primary pattern 2, secondary pattern 1
022	Primary pattern 2, secondary pattern 2
023	Primary pattern 2, secondary pattern 3
024	Primary pattern 2, secondary pattern 4
025	Primary pattern 2, secondary pattern 5
029	Primary pattern 2, secondary pattern unknown
031	Primary pattern 3, secondary pattern 1
032	Primary pattern 3, secondary pattern 2
033	Primary pattern 3, secondary pattern 3
034	Primary pattern 3, secondary pattern 4

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035	Primary pattern 3, secondary pattern 5
039	Primary pattern 3, secondary pattern unknown
041	Primary pattern 4, secondary pattern 1
042	Primary pattern 4, secondary pattern 2
043	Primary pattern 4, secondary pattern 3
044	Primary pattern 4, secondary pattern 4
045	Primary pattern 4, secondary pattern 5
049	Primary pattern 4, secondary pattern unknown
051	Primary pattern 5, secondary pattern 1
052	Primary pattern 5, secondary pattern 2
053	Primary pattern 5, secondary pattern 3
054	Primary pattern 5, secondary pattern 4
055	Primary pattern 5, secondary pattern 5
059	Primary pattern 5, secondary pattern unknown
099	Primary pattern unknown
999	Unknown or no information Not documented in patient record

Prostate

CS Site-Specific Factor 6 Gleason's Score

Note 1: Usually prostate cancers are graded using Gleason's score or pattern. Gleason's grading for prostate primaries is based on a 5-component system (5 histologic patterns). Prostatic cancer generally shows two main histologic patterns. The primary pattern, that is, the pattern occupying greater than 50% of the cancer, is usually indicated by the first number of the Gleason's grade and the secondary pattern is usually indicated by the second number. These two numbers are added together to create a pattern score, ranging from 2 to 10.

If there are two numbers, assume that they refer to two patterns (the first number being the primary and the second number being the secondary) and sum them to obtain the score.

If only one number is given and it is less than or equal to 5, assume that it describes a pattern and uses the number as the primary pattern and code the secondary as '9'.

If only one number is given and it is greater than 5, assume that it is a score.

If the pathology report specifies a specific number out of a total of 10, the first number given is the score.

Example: The pathology report says "Gleason's 3/10". The Gleason's score would be 3.

Note 2: Record the Gleason's score based on the addition of the primary and secondary pattern.

Note 3: Following AJCC guidelines for coding multiple Gleason's Scores in prostate cancer, if there is more than one primary and secondary pattern value, the value to be coded is the one based on the larger tumor specimen. Please note that this rule is not the same as the rule for coding grade.

Code	Description
000	Test not done (test was not ordered and was not performed)
002-010	Gleason's Score (See Notes 1 and 2)
999	Unknown or no information Not documented in patient record

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30	Regional lymph node(s) (bilateral and contralateral): Pelvic, NOS External iliac WITH previous scrotal or inguinal surgery	*	RN	RN
40	Inguinal nodes, NOS: Deep, NOS Node of Cloquet or Rosenmuller (highest deep inguinal) Superficial (femoral) WITH previous scrotal or inguinal surgery	*	D	D
50	Regional lymph node(s), NOS	*	RN	RN
80	Lymph nodes, NOS	*	RN	RN
99	Unknown; not stated Regional lymph node(s) cannot be assessed Not documented in patient record	NX	U	U

* For codes 10, 20, 30, 40, 50, and 80 the N category is assigned from the Number Positive Lymph Nodes and Size of Metastasis in Lymph Nodes extra table using the values of Site Specific Factor 5 (Size of Metastasis in Lymph Nodes) and Reg LN Pos.

Testis

CS Reg Nodes Eval

SEE STANDARD TABLE

Testis

Reg LN Pos

SEE STANDARD TABLE

Testis

Reg LN Exam

SEE STANDARD TABLE

Testis

CS Mets at DX

Note: Involvement of inguinal, pelvic, or external iliac lymph nodes after previous scrotal or inguinal surgery is coded under CS Lymph Nodes, as regional node involvement.

Code	Description	TNM	SS77	SS2000
00	No; none	M0	NONE	NONE
11	Distant lymph node(s): Pelvic, NOS External iliac WITHOUT previous scrotal or inguinal surgery, or unknown if previous scrotal or inguinal surgery	M1a	RN	RN
12	Distant lymph node(s): Inguinal nodes, NOS: Deep, NOS Node of Cloquet or Rosenmuller (highest deep inguinal) Superficial (femoral) WITHOUT previous scrotal or inguinal surgery, or unknown if previous scrotal or inguinal surgery	M1a	D	D

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13	Specified distant lymph node(s), other than code (11) or (12) Distant lymph node(s), NOS	M1a	D	D
20	Distant metastasis to lung	M1a	D	D
25	Distant metastases to lung and lymph node(s) (20) + any of [(11) to (13)]	M1a	D	D
40	Metastasis to other distant sites (WITH or WITHOUT metastasis to lung and/or distant lymph node(s)) Carcinomatosis	M1b	D	D
45	Distant metastasis, NOS	MINOS	D	D
99	Unknown Distant metastasis cannot be assessed Not documented in patient record	MX	U	U

Testis

CS Mets Eval

SEE STANDARD TABLE

Testis

CS Site-Specific Factor 1 Alpha Fetoprotein (AFP)

Code	Description
000	Test not done (SX)
020	Within normal limits (S0)
040	Range 1 (S1) less than 1,000 ng/ml
050	Range 2 (S2) 1,000 -10,000 ng/ml
060	Range 3 (S3) greater than 10,000 ng/ml
080	Ordered, but results not in chart
999	Unknown or no information Not documented in patient record

Testis

CS Site-Specific Factor 2 Human Chorionic Gonadotropin (hCG)

Code	Description
000	Test not done (SX)
020	Within normal limits (S0)
040	Range 1 (S1) less than 5,000 mIU/ml
050	Range 2 (S2) 5,000 - 50,000 mIU/ml
060	Range 3 (S3) greater than 50,000 mIU/ml
080	Ordered, but results not in chart
999	Unknown or no information Not documented in patient record

Testis

CS Site-Specific Factor 3 LDH (Lactate Dehydrogenase)

Code	Description
000	Test not done (SX)
020	Within normal limits (S0)
040	Range 1 (S1) less than 1.5 x N (N equals the upper limit of normal for LDH)
050	Range 2 (S2) 1.5 - 10 x N (N equals the upper limit of normal for LDH)
060	Range 3 (S3) greater than 10 x N (N equals the upper limit of normal for LDH)
080	Ordered, but results not in chart
999	Unknown or no information Not documented in patient record

Testis

CS Site-Specific Factor 4 Radical Orchiectomy Performed

Code	Description
000	Radical orchiectomy not performed
001	Radical orchiectomy performed
999	Unknown if radical orchiectomy performed

Testis

CS Site-Specific Factor 5 Size of Metastasis in Lymph Nodes

Note 1: For CS Lymph Nodes codes 10, 20, 30, 40 and 50, the N category is assigned based on the values in the Site Specific Factor 5 Table below and the Number Lymph Nodes Positive and Size of Lymph Node Metastasis Extra Table.

Note 2: When coding cases with clinically positive lymph nodes, use Code 001 for clinical N1, Code 002 for clinical N2, and Code 003 for clinical N3.

Code	Description
000	No lymph node metastasis
001	Lymph node metastasis mass 2 cm or less in greatest dimension AND no extranodal extension of tumor
002	Lymph node metastasis mass more than 2 cm but not more than 5 cm in greatest dimension Extranodal extension of tumor
003	Lymph node metastasis mass more than 5 cm in greatest dimension
998	Regional lymph node(s) involved, size of lymph node mass, number of positive lymph nodes and extranodal extension status not stated
999	Unknown if regional nodes involved Not documented in patient record

Testis

CS Site-Specific Factor 6

Code	Description
888	Not applicable for this site

Collaborative Staging Codes

Renal Pelvis and Ureter

C65.9, C66.9

C65.9 Renal pelvis

C66.9 Ureter

Note: Laterality must be coded for this site.

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

Renal Pelvis and Ureter

CS Tumor Size

SEE STANDARD TABLE

Renal Pelvis and Ureter

CS Extension

Note: If CS Extension code is 00 or 05, Behavior Code must be 2. If CS Extension code is 10, Behavior Code must be 3.

Code	Description	TNM	SS77	SS2000
00	Carcinoma in situ, NOS Non-invasive, intraepithelial	Tis	IS	IS
05	Papillary noninvasive carcinoma	Ta	IS	IS
10	Subepithelial connective tissue (lamina propria, submucosa) invaded	T1	L	L
20	Muscularis invaded	T2	L	L
30	Localized, NOS	T1	L	L
35	Extension to ureter from renal pelvis	T2	RE	RE
40	Extension to adjacent (connective) tissue: Peripelvic/periureteric tissue Retroperitoneal soft/connective tissue	T3	RE	RE
60	For renal pelvis only: Ipsilateral kidney parenchyma and kidney, NOS	T3	RE	RE
62	OBSOLETE: Ureter from renal pelvis (cases coded to 35)	T4	RE	RE
63	Psoas muscle from ureter	T4	RE	RE
65	Extension to bladder from ureter Implants in ureter	T4	RE	RE

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66	Extension to major blood vessel(s): Aorta Renal artery/vein Vena cava (inferior) Tumor thrombus in a renal vein, NOS	T4	RE	RE
67	Adrenal (suprarenal) gland from renal pelvis	T4	RE	RE
68	Duodenum from right renal pelvis or right ureter	T4	RE	RE
70	Extension to: Ascending colon from right renal pelvis Bladder (wall or mucosa) from renal pelvis Colon, NOS Descending colon from left renal pelvis Ipsilateral kidney parenchyma from ureter Liver Pancreas Perinephric fat via kidney Spleen	T4	D	D
75	Ascending colon from right ureter Descending colon from left ureter	T4	RE	D
80	Further contiguous extension, including: For ureter: Prostate Uterus	T4	D	D
95	No evidence of primary tumor	T0	U	U
99	Unknown extension Primary tumor cannot be assessed Not documented in patient record	TX	U	U

Renal Pelvis and Ureter CS TS/Ext-Eval SEE STANDARD TABLE

Renal Pelvis and Ureter CS Lymph Nodes

Note: Measure the size of the metastasis in the lymph node to determine codes 10-30, not the size of the lymph node itself.

Code	Description	TNM	SS77	SS2000
00	No regional lymph node involvement	N0	NONE	NONE
10	Single regional lymph node, less than or equal to 2 cm: Renal pelvis: Aortic, NOS: Lateral (lumbar) Para-aortic Periaortic Paracaval Renal hilar Retroperitoneal, NOS Regional lymph node(s), NOS	N1	RN	RN

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10, cont'd	Ureter: Iliac, NOS: Common External Internal (hypogastric), NOS Obturator Lateral aortic (lumbar) Paracaval Pelvic, NOS Periureteral Renal hilar Retroperitoneal, NOS Regional lymph node(s), NOS			
20	Regional lymph nodes as listed in code 10 Single regional lymph node greater than 2 - 5 cm OR multiple regional nodes, none greater than 5 cm	N2	RN	RN
30	Regional lymph nodes as listed in code 10 Regional lymph node(s), at least one greater than 5 cm	N3	RN	RN
50	Regional lymph node(s), NOS (size and/or number not stated)	N1	RN	RN
80	Lymph nodes, NOS	N1	RN	RN
99	Unknown; not stated Regional lymph node(s) cannot be assessed Not documented in patient record	NX	U	U

**Renal Pelvis and Ureter
CS Reg Nodes Eval
SEE STANDARD TABLE**

**Renal Pelvis and Ureter
Reg LN Pos
SEE STANDARD TABLE**

**Renal Pelvis and Ureter
Reg LN Exam
SEE STANDARD TABLE**

**Renal Pelvis and Ureter
CS Mets at DX
SEE STANDARD TABLE**

**Renal Pelvis and Ureter
CS Mets Eval
SEE STANDARD TABLE**

**Renal Pelvis and Ureter
CS Site-Specific Factor 1**

Code	Description
888	Not applicable for this site

**Renal Pelvis and Ureter
CS Site-Specific Factor 2**

Code	Description
888	Not applicable for this site

**Renal Pelvis and Ureter
CS Site-Specific Factor 3**

Code	Description
888	Not applicable for this site

**Renal Pelvis and Ureter
CS Site-Specific Factor 4**

Code	Description
888	Not applicable for this site

**Renal Pelvis and Ureter
CS Site-Specific Factor 5**

Code	Description
888	Not applicable for this site

**Renal Pelvis and Ureter
CS Site-Specific Factor 6**

Code	Description
888	Not applicable for this site

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80	Lymph nodes, NOS	N1	RN	RN
99	Unknown; not stated Regional lymph node(s) cannot be assessed Not documented in patient record	NX	U	U

**Malignant Melanoma of Conjunctiva
CS Reg Nodes Eval
SEE STANDARD TABLE**

**Malignant Melanoma of Conjunctiva
Reg LN Pos
SEE STANDARD TABLE**

**Malignant Melanoma of Conjunctiva
Reg LN Exam
SEE STANDARD TABLE**

**Malignant Melanoma of Conjunctiva
CS Mets at DX
SEE STANDARD TABLE**

**Malignant Melanoma of Conjunctiva
CS Mets Eval
SEE STANDARD TABLE**

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

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

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

**Malignant Melanoma of Conjunctiva
CS Site-Specific Factor 2**

Code	Description
888	Not applicable for this site

**Malignant Melanoma of Conjunctiva
CS Site-Specific Factor 3**

Code	Description
888	Not applicable for this site

**Malignant Melanoma of Conjunctiva
CS Site-Specific Factor 4**

Code	Description
888	Not applicable for this site

**Malignant Melanoma of Conjunctiva
CS Site-Specific Factor 5**

Code	Description
888	Not applicable for this site

**Malignant Melanoma of Conjunctiva
CS Site-Specific Factor 6**

Code	Description
888	Not applicable for this site

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60	FOR IRIS PRIMARY ONLY: Tumor confluent with or extending into the ciliary body and/or choroid WITH scleral extension, WITHOUT melanolytic glaucoma, or not stated if melanolytic glaucoma	T3NOS	L	L
61	FOR IRIS PRIMARY ONLY: Tumor confluent with or extending into the ciliary body and/or choroid WITH scleral extension, AND melanolytic glaucoma	T3a	L	L
65	FOR IRIS PRIMARY ONLY: Extraocular extension	T4	RE	RE
71	FOR CILIARY BODY PRIMARY ONLY: Tumor more than 16 mm in greatest basal diameter and/or greater than 10 mm in maximum height (thickness), WITHOUT extraocular extension or not stated if extraocular extension present. (See Note 1.)	T3NOS	L	L
75	FOR CILIARY BODY PRIMARY ONLY: Tumor more than 16 mm in greatest basal diameter and/or greater than 10 mm in maximum height (thickness), WITH extraocular extension. (See Note 1.)	T4	RE	RE
80	Further contiguous extension	T4	D	D
95	No evidence of primary tumor	T0	U	U
99	Unknown extension Primary tumor cannot be assessed Not documented in patient record	TX	U	U

**Malignant Melanoma of Iris and Ciliary Body
CS TS/Ext-Eval
SEE STANDARD TABLE**

**Malignant Melanoma of Iris and Ciliary Body
CS Lymph Nodes**

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

Malignant Melanoma of Iris and Ciliary Body
CS Reg Nodes Eval
SEE STANDARD TABLE

Malignant Melanoma of Iris and Ciliary Body
Reg LN Pos
SEE STANDARD TABLE

Malignant Melanoma of Iris and Ciliary Body
Reg LN Exam
SEE STANDARD TABLE

Malignant Melanoma of Iris and Ciliary Body
CS Mets at DX
SEE STANDARD TABLE

Malignant Melanoma of Iris and Ciliary Body
CS Mets Eval
SEE STANDARD TABLE

Malignant Melanoma of Iris and Ciliary Body
CS Site-Specific Factor 1 Measured Thickness (Depth), Breslow's Measurement

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

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

Collaborative Staging Codes
Malignant Melanoma of Choroid
C69.3

(M-8720-8790)

C69.3 Choroid

Note: Laterality must be coded for these sites

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

Malignant Melanoma of Choroid
CS Tumor Size
SEE STANDARD TABLE

Malignant Melanoma of Choroid
CS Extension

Note: AJCC 6th Edition states that when basal dimension and apical height do not fit this classification, the largest diameter should be used for classification. In clinical practice the tumor base may be estimated in optic disc diameters (dd) (average: 1 dd = 1.5mm). The elevation may be estimated in diopters (average: 3 diopters = 1 mm). Other techniques, such as ultrasonography and computerized stereometry, may provide a more accurate measurement.

Code	Description	TNM	SS77	SS2000
00	In situ	Tis	IS	IS
22	Tumor 10 mm or less in greatest diameter and 2.5 mm or less in greatest height (thickness), AND extraocular invasion unknown	T1NOS	L	L
24	Tumor 10 mm or less in greatest diameter and 2.5 mm or less in greatest height (thickness), WITHOUT microscopic extraocular extension	T1a	L	L
26	Tumor 10 mm or less in greatest diameter and 2.5 mm or less in greatest height (thickness), WITH microscopic extraocular extension	T1b	L	L
28	Tumor 10 mm or less in greatest diameter and 2.5 mm or less in greatest height (thickness), WITH macroscopic extraocular extension	T1c	L	L
30	Localized, NOS	T1NOS	L	L
42	Tumor greater than 10 mm but not more than 16 mm in greatest basal diameter and between 2.5 mm and 10 mm in maximum height (thickness), AND extraocular invasion unknown	T2NOS	L	L

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44	Tumor greater than 10 mm but not more than 16 mm in greatest basal diameter and between 2.5 mm and 10 mm in maximum height (thickness), WITHOUT microscopic extraocular invasion	T2a	L	L
46	Tumor greater than 10 mm but not more than 16 mm in greatest basal diameter and between 2.5 mm and 10 mm in maximum height (thickness), WITH microscopic extraocular invasion	T2b	RE	RE
48	Tumor greater than 10 mm but not more than 16 mm in greatest basal diameter and between 2.5 mm and 10 mm in maximum height (thickness), WITH macroscopic extraocular invasion	T2c	RE	RE
66	Tumor greater than 16 mm in greatest diameter and/or greater than 10 mm in maximum height (thickness) WITHOUT extraocular extension	T3	RE	RE
68	Tumor greater than 16 mm in greatest diameter and/or greater than 10 mm in maximum height (thickness) WITH extraocular extension	T4	RE	RE
80	Further contiguous extension	T4	D	D
95	No evidence of primary tumor	T0	U	U
99	Unknown extension Primary tumor cannot be assessed Not documented in patient record	TX	U	U

Malignant Melanoma of Choroid

CS TS/Ext-Eval

SEE STANDARD TABLE

Malignant Melanoma of Choroid

CS Lymph Nodes

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

Malignant Melanoma of Choroid

CS Reg Nodes Eval

SEE STANDARD TABLE

Malignant Melanoma of Choroid
Reg LN Pos
SEE STANDARD TABLE

Malignant Melanoma of Choroid
Reg LN Exam
SEE STANDARD TABLE

Malignant Melanoma of Choroid
CS Mets at DX
SEE STANDARD TABLE

Malignant Melanoma of Choroid
CS Mets Eval
SEE STANDARD TABLE

Malignant Melanoma of Choroid
CS Site-Specific Factor 1 Measured Thickness (Depth), Breslow's Measurement

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

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

Malignant Melanoma of Choroid
CS Site-Specific Factor 2

Code	Description
888	Not applicable for this site

Malignant Melanoma of Choroid

CS Site-Specific Factor 3

Code	Description
888	Not applicable for this site

Malignant Melanoma of Choroid

CS Site-Specific Factor 4

Code	Description
888	Not applicable for this site

Malignant Melanoma of Choroid

CS Site-Specific Factor 5

Code	Description
888	Not applicable for this site

Malignant Melanoma of Choroid

CS Site-Specific Factor 6

Code	Description
888	Not applicable for this site

Collaborative Staging Codes

Retinoblastoma

C69.0-C69.6, C69.8-C69.9

(9510-9514)

C69.0 Conjunctiva

C69.1 Cornea, NOS

C69.2 Retina

C69.3 Choroid

C69.4 Ciliary Body

C69.5 Lacrimal Gland

C69.6 Orbit, NOS

C69.8 Overlapping lesion of eye and adnexa

C69.9 Eye, NOS

Note 1: Laterality must be coded for this site.

Note 2: Code all retinoblastomas using this scheme, including conjunctiva, uvea and other parts of eye.

CS Tumor Size	CS Site-Specific Factor 1 - Extension	The following tables are available at the collaborative staging website: Histologies for Which AJCC Staging Is Not Generated AJCC Stage for TNM sites with no stage groupings CS Mets at DX, CS Mets Eval
CS Extension	Evaluated at Enucleation	
CS TS/Ext-Eval	CS Site-Specific Factor 2	
CS Lymph Nodes	CS Site-Specific Factor 3	
CS Reg Nodes Eval	CS Site-Specific Factor 4	
Reg LN Pos	CS Site-Specific Factor 5	
Reg LN Exam	CS Site-Specific Factor 6	
CS Mets at DX		
CS Mets Eval		

Retinoblastoma

CS Tumor Size

SEE STANDARD TABLE

Retinoblastoma

CS Extension

Note 1: For correct calculation of derived staging fields for this schema, CS Extension and Site-Specific Factor 1, Extension Evaluated at Enucleation, must both be coded, whether or not an enucleation was performed. Information from enucleation is EXCLUDED from CS Extension and coded only in Site-Specific Factor 1.

Note 2: For the extension fields for this site, the mapping values for TNM, SS77, and SS2000 and the associated c, p, y, or a indicator are assigned based on the values in CS Extension, CS TS/Ext Eval, and Site-Specific Factor 1. If the value of Site-specific Factor 1 is a valid code between 030 and 080 (i.e., enucleation was done and extension information is available for staging), the mapping values are taken from the Site-Specific Factor 1 mapping, and the T category is identified as a pT. Otherwise (i.e., Site-Specific Factor 1 code is not between 030 and 080, or is invalid or blank, meaning that enucleation was not performed, or it was performed but the information is not usable for staging), the mapping values are taken from the CS Extension mapping, and the c, p, y, or a indicator is taken from the TS/Ext Eval mapping.

Code	Description	TNM	SS77	SS2000
11	Any eye in which the largest tumor is less than or equal to 3 mm in height AND no tumor is located closer than 1 DD (1.5 mm) to the optic nerve or fovea	T1a	L	L
13	All other eyes in which the tumor(s) are confined to retina regardless of location or size (up to half the volume of the eye) AND no vitreous seeding AND no retinal detachment or subretinal fluid greater than 5 mm from the base of the tumor	T1b	L	L

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31	Tumor confined to retina (no vitreous seeding or significant retinal detachment), NOS	T1NOS	L	L
41	Minimal tumor spread to vitreous and/or subretinal space. Fine local or diffuse vitreous seeding and/or serous retinal detachment up to total detachment may be present but no clumps, lumps, snowballs, or avascular masses are allowed in the vitreous or subretinal space. Calcium flecks in the vitreous or subretinal space are allowed. Tumor may fill up to 2/3 the volume of the eye.	T2a	L	L
43	Massive tumor spread to vitreous and/or subretinal space. Vitreous seeding and/or subretinal implantation may consist of lumps, clumps, snowballs, or avascular tumor masses. Retinal detachment may be total. Tumor may fill up to 2/3 the volume of the eye.	T2b	L	L
45	Unsalvageable intraocular disease. Tumor fills more than 2/3 the eye No possibility of visual rehabilitation. One or more of the following are present: Tumor-associated glaucoma, either neovascular or angle closure Anterior segment extension of tumor Ciliary body extension of tumor Hyphema (significant) Massive vitreous hemorrhage Tumor in contact with lens Orbital cellulitis-like clinical presentation	T2c	L	L
47	Tumor with contiguous spread to adjacent tissues or spaces (vitreous or subretinal space), NOS	T2NOS	L	L
59	Invasion of optic nerve and/or optic coats, NOS	T3	RE	RE
75	Extraocular tumor	T4	RE	RE
80	Further contiguous extension	T4	D	D
95	No evidence of primary tumor	T0	U	U
99	Unknown extension Primary tumor cannot be assessed Not documented in patient record	TX	U	U

Note: If enucleation done (i.e., SSF1 code 030 to 080) the T category is derived from Site-Specific Factor 1 and assigned "pT". If no enucleation done, the T category is derived from CS Extension and assigned based on CS TS/Ext-Eval field.

Retinoblastoma

CS TS/Ext-Eval

Note: This item reflects the validity of the classification of the Tumor Size and CS Extension were determined based on the diagnostic methods employed.

Code	Description	Staging Basis
0	No surgical resection done. Evaluation based on physical examination, imaging examination, or other non-invasive clinical evidence. No autopsy evidence used.	c

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

Retinoblastoma

CS Lymph Nodes

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

Retinoblastoma

CS Reg Nodes Eval

SEE STANDARD TABLE

Retinoblastoma

Reg LN Pos

SEE STANDARD TABLE

Retinoblastoma
Reg LN Exam
SEE STANDARD TABLE

Retinoblastoma
CS Mets at DX

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

* For Mets at DX codes 10, 30, 40, 50, and 55 ONLY, the M category is assigned based on the value of CS Mets at DX, as shown in the table CS Mets, Mets Eval for this site.

Retinoblastoma
CS Mets Eval
SEE STANDARD TABLE

Retinoblastoma
CS Site-Specific Factor 1 Extension Evaluated at Enucleation

Note 1: For correct calculation of derived staging fields for this schema, CS Extension and Site-Specific Factor 1, Extension Evaluated at Enucleation, must both be coded, whether or not an enucleation was performed. Information from enucleation is EXCLUDED from CS Extension and coded only in Site-Specific Factor 1.

Note 2: For the extension fields for this site, the mapping values for TNM, SS77, and SS2000 and the associated c, p, y, or a indicator are assigned based on the values in CS Extension, CS TS/Ext Eval, and Site-Specific Factor 1. If the value of Site-specific Factor 1 is a valid code between 030 and 080 (i.e., enucleation was done and extension information is available for staging), the mapping values are taken from the Site-Specific Factor 1 mapping, and the T category is identified as a pT. Otherwise (i.e., Site-Specific Factor 1 code is not between 030 and 080, or is invalid or blank, meaning that enucleation was not performed, or it was performed but the information is not usable for staging), the mapping values are taken from the CS Extension mapping, and the c, p, y, or a indicator is taken from the TS/Ext Eval mapping.

Code	Description	TNM	SS77	SS2000
000	No enucleation performed	TX	U	U
030	Tumor(s) confined to retina, NOS	T1	L	L
041	Tumor cells in the vitreous body	T1	L	L

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043	Tumor(s) confined to subretinal space. No optic nerve or choroidal invasion	T1	L	L
044	Tumor invades optic nerve up to, but not through, level of lamina cribrosa	T2a	L	L
046	Tumor invades choroid focally	T2b	L	L
047	Tumor invades optic nerve up to, but not through, level of lamina cribrosa AND invades the choroid focally	T2c	L	L
048	Optic nerve as far as lamina cribrosa, NOS	T2NOS	L	L
049	Minimal invasion of optic nerve and/or optic coats, NOS	T2NOS	L	L
054	Tumor invades optic nerve through the level of lamina cribrosa but not to line of resection	T3a	RE	RE
056	Tumor massively invades choroid	T3b	RE	RE
057	Tumor invades optic nerve through level of lamina cribrosa but not to line and resection AND massively invades choroid	T3c	RE	RE
059	Significant invasion of optic nerve and/or optic coats, NOS	T3NOS	RE	RE
072	Extraocular extension including: Both anteriorly or posteriorly into orbit Optic nerve to line of resection Orbit through sclera Extension into subarachnoidal space of optic nerve Extension to apex of orbit	T4	RE	RE
074	Extraocular extension including into: Brain Brain beyond the chiasm	T4	D	D
075	Other adjacent extraocular extension	T4	RE	RE
080	Further contiguous extension	T4	D	D
095	No evidence of primary tumor	T0	U	U
096	Unknown if enucleation done	TX	U	U
999	Enucleation done: Extension unknown	TX	U	U

Retinoblastoma

CS Site-Specific Factor 2

Code	Description
888	Not applicable for this site

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Retinoblastoma

CS Site-Specific Factor 3

Code	Description
888	Not applicable for this site

Retinoblastoma

CS Site-Specific Factor 4

Code	Description
888	Not applicable for this site

Retinoblastoma

CS Site-Specific Factor 5

Code	Description
888	Not applicable for this site

Retinoblastoma

CS Site-Specific Factor 6

Code	Description
888	Not applicable for this site

Collaborative Staging Codes

Brain and Cerebral Meninges

C70.0, C71.0-C71.9

C70.0 Cerebral meninges

C71.0 Cerebrum

C71.1 Frontal lobe

C71.2 Temporal lobe

C71.3 Parietal lobe

C71.4 Occipital lobe

C71.5 Ventricle, NOS

C71.6 Cerebellum, NOS

C71.7 Brain stem

C71.8 Overlapping lesion of brain

C71.9 Brain, NOS

Note 1: This scheme is compatible with the AJCC fourth edition scheme TNM for brain. The AJCC opted not to recommend a TNM scheme in the sixth edition.

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

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

Brain and Cerebral Meninges

CS Tumor Size

SEE STANDARD TABLE

Brain and Cerebral Meninges

CS Extension

Note: C71.0 is SUPRAtentorial, except the following subsites coded to C71.0 are INFRAtentorial: hypothalamus, pallium, thalamus. C71.1-C71.5 are SUPRAtentorial. C71.6-C71.7 are INFRAtentorial. The following subsites coded to C71.8 are SUPRAtentorial: corpus callosum, tapetum. The following sites coded to C71.9 are SUPRAtentorial: anterior cranial fossa, middle cranial fossa, suprasellar. The following subsites coded to C71.9 are INFRAtentorial: posterior cranial fossa.

Code	Description	TNM	SS77	SS2000
05	Benign or borderline brain tumors	NA	NA	NA
10	Supratentorial tumor confined to: CEREBRAL HEMISPHERE (cerebrum) or MENINGES of CEREBRAL HEMISPHERE on one side: Frontal lobe Occipital lobe Parietal lobe Temporal lobe	NA	L	L
11	Infratentorial tumor confined to: CEREBELLUM or MENINGES of CEREBELLUM on one side: Vermis: Lateral lobes Median lobe of cerebellum	NA	L	L

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12	Infratentorial tumor confined to: BRAIN STEM or MENINGES of BRAIN STEM on one side: Medulla oblongata Midbrain (mesencephalon) Pons Hypothalamus Thalamus	NA	L	L
15	Confined to brain, NOS Confined to meninges, NOS	NA	L	L
20	Infratentorial tumor: Both cerebellum and brain stem involved with tumor on one side	NA	L	L
30	Confined to ventricles Tumor invades or encroaches upon ventricular system	NA	L	L
40	Tumor crosses the midline Tumor involves contralateral hemisphere Tumor involves corpus callosum (including splenium)	NA	RNOS	RNOS
50	Supratentorial tumor extends infratentorially to involve cerebellum or brain stem	NA	RNOS	RNOS
51	Infratentorial tumor extends supratentorially to involve cerebrum (cerebral hemisphere)	NA	RNOS	RNOS
60	Tumor invades: Bone (skull) Major blood vessel(s) Meninges (dura) Nerves, NOS Cranial nerves Spinal cord/canal	NA	RNOS	RNOS
70	Circulating cells in cerebral spinal fluid (CSF) Nasal cavity Nasopharynx Posterior pharynx Outside central nervous system (CNS)	NA	D	D
80	Further contiguous extension	NA	D	D
95	No evidence of primary tumor	NA	U	U
99	Unknown extension Primary tumor cannot be assessed Not documented in patient record	NA	U	U

**Collaborative Staging System
Other Parts of Central Nervous System
C70.1, C70.9, C72.0-C72.5, C72.8-C72.9**

- C70.1 Spinal meninges
- C70.9 Meninges, NOS
- C72.0 Spinal cord
- C72.1 Cauda equina
- C72.2 Olfactory nerve
- C72.3 Optic nerve
- C72.4 Acoustic nerve
- C72.5 Cranial nerve, NOS
- C72.8 Overlapping lesion of brain and central nervous system
- C72.9 Nervous system, NOS

Note: This schema is compatible with the AJCC fourth edition TNM for spinal cord. AJCC does not define TNM staging for this site in the sixth edition.

CS Tumor Size CS Extension CS TS/Ext-Eval CS Lymph Nodes CS Reg Nodes Eval Reg LN Pos Reg LN Exam CS Mets at DX CS Mets Eval	CS Site-Specific Factor 1 - WHO Grade Classification CS Site-Specific Factor 2 CS Site-Specific Factor 3 CS Site-Specific Factor 4 CS Site-Specific Factor 5 CS Site-Specific Factor 6	The following tables are available at the collaborative staging website: Histologies for Which AJCC Staging Is Not Generated AJCC Stage
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**Other Parts of Central Nervous System
CS Tumor Size
SEE STANDARD TABLE**

**Other Parts of Central Nervous System
CS Extension**

Code	Description	TNM	SS77	SS2000
05	Benign or borderline brain tumors	NA	NA	NA
10	Tumor confined to tissue or site of origin	NA	L	L
30	Localized, NOS	NA	L	L
40	Meningeal tumor infiltrates nerve Nerve tumor infiltrates meninges (dura)	NA	RNOS	RNOS
50	Adjacent connective/soft tissue Adjacent muscle	NA	RNOS	RNOS
60	Brain, for cranial nerve tumors Major blood vessel(s) Sphenoid and frontal sinuses (skull)	NA	RNOS	RNOS
70	Brain except for cranial nerve tumors Bone, other than skull Eye	NA	D	D
80	Further contiguous extension	NA	D	D

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

Other Parts of Central Nervous System

CS TS/Ext-Eval

Code	Description	Staging Basis
9	Not applicable for this site	NA

Other Parts of Central Nervous System

CS Lymph Nodes

Code	Description	TNM	SS77	SS2000
88	Not applicable	NA	U	U

Other Parts of Central Nervous System

CS Reg Nodes Eval

Code	Description	Staging Basis
9	Not applicable for this site	NA

Other Parts of Central Nervous System

Reg LN Pos

Code	Description
99	Not applicable

Other Parts of Central Nervous System

Reg LN Exam

Code	Description
99	Not applicable

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Other Parts of Central Nervous System

CS Mets at DX

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

Other Parts of Central Nervous System

CS Mets Eval

Code	Description	Staging Basis
9	Not applicable for this site	NA

Other Parts of Central Nervous System

CS Site-Specific Factor 1 WHO Grade Classification

Note: Code the WHO Grade Classification as documented in the medical record for sites C70.1 and C70.9 only.

Code	Description
010	Grade I
020	Grade II
030	Grade III
040	Grade IV
999	Clinically diagnosed/grade unknown Not documented in medical record Grade unknown, NOS

Other Parts of Central Nervous System

CS Site-Specific Factor 2

Code	Description
888	Not applicable for this site

Other Parts of Central Nervous System

CS Site-Specific Factor 3

Code	Description
888	Not applicable for this site

Other Parts of Central Nervous System

CS Site-Specific Factor 4

Code	Description
888	Not applicable for this site

Other Parts of Central Nervous System

CS Site-Specific Factor 5

Code	Description
888	Not applicable for this site

Other Parts of Central Nervous System

CS Site-Specific Factor 6

Code	Description
888	Not applicable for this site

Collaborative Staging Codes

Thyroid Gland

C73.9

C73.9 Thyroid gland

CS Tumor Size CS Extension CS TS/Ext-Eval CS Lymph Nodes CS Reg Nodes Eval Reg LN Pos Reg LN Exam CS Mets at DX CS Mets Eval	CS Site-Specific Factor 1 - Solitary vs Multifocal CS Site-Specific Factor 2 CS Site-Specific Factor 3 CS Site-Specific Factor 4 CS Site-Specific Factor 5 CS Site-Specific Factor 6	The following tables are available at the collaborative staging website: Histology Exclusion Table AJCC Stage-Thyroid: Papillary and Follicular - Age less than 45 Extension Size Table Histologies-Thyroid AJCC Stage-Thyroid: Papillary and Follicular - Age 45 and older AJCC Stage-Thyroid: Medullary AJCC Stage-Thyroid: Anaplastic
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Thyroid Gland

CS Tumor Size

SEE STANDARD TABLE

Thyroid Gland

CS Extension

Note: AJCC considers all anaplastic carcinomas to be T4. Collaborative Staging has implemented this as follows: If histology is equal to 8020 or 8021 and if CS Extension is equal to 00, 10, 20, 30, 40, 45, or 48, then T category is equal to T4a. For these histologies, if CS Extension is equal to 50, 52, 60, 62, 70, 72, or 80, then T category is equal to T4b. If CS Extension is equal to 95 or 99, the T category is T4NOS. For all other histologies, follow the rules as shown in the tables.

Code	Description	TNM	SS77	SS2000
00	In situ; non-invasive	Tis	IS	IS
10	Single invasive tumor confined to thyroid	*	L	L
20	Multiple foci confined to thyroid	*	L	L
30	Localized, NOS	*	L	L
40	Into thyroid capsule, but not beyond	*	L	L
45	Minimal extrathyroid extension including: Strap muscle(s): Omohyoid Sternohyoid Sternothyroid	T3	RE	RE
48	Pericapsular soft/connective tissue	T3	RE	RE
50	Parathyroid Nerves: Recurrent laryngeal Vagus	T4a	RE	RE
52	Cricoid cartilages Esophagus Larynx Sternocleidomastoid muscle	T4a	RE	RE

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60	Thyroid cartilage Tumor is described as "FIXED to adjacent tissues"	T4b	RE	RE
62	Blood vessel(s) (major): Carotid artery Jugular vein Thyroid artery or vein	T4b	RE	RE
70	Bone Skeletal muscle, other than strap or sternocleidomastoid muscle	T4b	D	D
72	Trachea	T4a	D	D
80	Further contiguous extension Mediastinal tissues Prevertebral fascia	T4b	D	D
95	No evidence of primary tumor	T0	U	U
99	Unknown extension Primary tumor cannot be assessed Not documented in patient record	TX	U	U

* For Extension codes 10, 20, 30, and 40 ONLY, the T category is assigned based on value of CS Tumor Size from Extension Size Table.

Thyroid Gland

CS TS/Ext-Eval

SEE STANDARD TABLE

Thyroid Gland

CS Lymph Nodes

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

Note 2: This field includes all lymph nodes defined as Levels I – VI and Other by AJCC. The complete definitions are provided in the General Instructions for head and neck cancers.

Note 3: Codes 12-15 include ipsilateral, bilateral, contralateral, and midline lymph nodes.

Code	Description	TNM	SS77	SS2000
00	None; no regional lymph node involvement	N0	NONE	NONE
10	OBSOLETE: Ipsilateral regional lymph nodes: Review and recode in 12-15.	N1a	RN	RN
11	OBSOLETE: Regional lymph nodes: Review and recode in 12-15.	N1a	D	RN
12	Level VI nodes (central compartment of the neck) Anterior deep cervical Laterotracheal Paralaryngeal Paratracheal Prelaryngeal/Delphian Pretracheal Recurrent laryngeal Stated as N1a, NOS	N1a	RN	RN

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13	<p>Cervical nodes (other than those in central compartment) Levels I-III and Levels IV-V (except supraclavicular nodes, see code 14)</p> <ul style="list-style-type: none"> Level I node <ul style="list-style-type: none"> Submandibular (submaxillary) Submental Level II node <ul style="list-style-type: none"> Jugulodigastric (subdigastric) Upper deep cervical Upper jugular Level III node <ul style="list-style-type: none"> Middle deep cervical Mid jugular Level IV node <ul style="list-style-type: none"> Jugulo-omohyoid (supraomohyoid) Lower deep cervical Lower jugular Level V node <ul style="list-style-type: none"> Posterior cervical Posterior triangle (spinal accessory and transverse cervical) Other Groups <ul style="list-style-type: none"> Parapharyngeal Retropharyngeal Sub-occipital Cervical, NOS Deep cervical, NOS Internal jugular, NOS Mandibular, NOS <p>Stated as N1b, NOS</p>	N1b	RN	RN
14	Supraclavicular nodes (transverse cervical)	N1b	D	RN
15	<ul style="list-style-type: none"> Level VII node Posterior mediastinal (tracheoesophageal) Superior mediastinal nodes Upper anterior mediastinal nodes Upper mediastinal nodes <p>Mediastinal, NOS</p>	N1b	D	RN
20	<p>OBSOLETE: Regional lymph nodes as listed in code 10 Bilateral, contralateral, or midline cervical nodes Review and recode in 12-15</p>	N1b	RN	RN
21	<p>OBSOLETE: Regional lymph nodes as listed in code 11 Bilateral, contralateral, or midline cervical nodes Review and recode in 12-15</p>	N1b	D	RN
30	<p>OBSOLETE: Tracheoesophageal (posterior mediastinal) Review and recode in 15</p>	N1b	RN	RN
31	<p>OBSOLETE: Mediastinal, NOS Upper anterior mediastinal Review and recode in 15</p>	N1b	D	RN
50	Regional lymph node(s), NOS	N1NOS	RN	RN
80	Lymph nodes, NOS	N1NOS	RN	RN

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99	Unknown; not stated Regional lymph node(s) cannot be assessed Not documented in patient record	NX	U	U
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Thyroid Gland

CS Reg Nodes Eval

SEE STANDARD TABLE

Thyroid Gland

Reg LN Pos

SEE STANDARD TABLE

Thyroid Gland

Reg LN Exam

SEE STANDARD TABLE

Thyroid Gland

CS Mets at DX

Code	Description	TNM	SS77	SS2000
00	No; none	M0	NONE	NONE
10	OBSOLETE: Mandibular (facial) node. Review and recode in CS Lymph Nodes	M1	D	D
11	OBSOLETE: Level I nodes. Review and recode in CS Lymph Nodes	M1	D	D
12	Distant lymph node(s), NOS	M1	D	D
40	Distant metastases except distant lymph node(s) (code 12) Carcinomatosis Distant metastasis, NOS	M1	D	D
50	OBSOLETE: (40) + or any of [(10) to (12)] Distant lymph node(s) plus other distant metastasis Review and recode to 40 or to 51 and appropriate code in CS Lymph Nodes	M1	D	D
51	(40) + (12) Distant lymph node(s) plus other distant metastasis	M1	D	D
99	Unknown if distant metastasis Distant metastasis cannot be assessed Not documented in patient record	MX	U	U

Thyroid Gland

CS Mets Eval

SEE STANDARD TABLE

Thyroid Gland

CS Site-Specific Factor 1 Solitary vs Multifocal

Code	Description
000	None
001	Solitary tumor
002	Multifocal tumor [AJCC descriptor (m)]
999	Insufficient information Not documented in patient record

Thyroid Gland

CS Site-Specific Factor 2

Code	Description
888	Not applicable for this site

Thyroid Gland

CS Site-Specific Factor 3

Code	Description
888	Not applicable for this site

Thyroid Gland

CS Site-Specific Factor 4

Code	Description
888	Not applicable for this site

Thyroid Gland

CS Site-Specific Factor 5

Code	Description
888	Not applicable for this site

Thyroid Gland

CS Site-Specific Factor 6

Code	Description
888	Not applicable for this site

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Thymus, Adrenal (Suprarenal) Gland, and Other Endocrine Glands

CS Reg Nodes Eval

Code	Description	Staging Basis
9	Not applicable for this site	NA

Thymus, Adrenal (Suprarenal) Gland, and Other Endocrine Glands

Reg LN Pos

SEE STANDARD TABLE

Thymus, Adrenal (Suprarenal) Gland, and Other Endocrine Glands

Reg LN Exam

SEE STANDARD TABLE

Thymus, Adrenal (Suprarenal) Gland, and Other Endocrine Glands

CS Mets at DX

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

Thymus, Adrenal (Suprarenal) Gland, and Other Endocrine Glands

CS Mets Eval

Code	Description	Staging Basis
9	Not applicable for this site	NA

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Thymus, Adrenal (Suprarenal) Gland, and Other Endocrine Glands

CS Site-Specific Factor 1 WHO Grade Classification

Note 1: WHO grade applies only to C75.1 pituitary gland, C75.2 craniopharyngeal duct, C75.3 pineal gland. For all other sites in this schema, enter code 999.

Note 2: Code the WHO Grade Classification as documented in the medical record.

Code	Description
010	Grade I
020	Grade II
030	Grade III
040	Grade IV
999	Clinically diagnosed/grade unknown Does not apply Not documented in medical record Grade unknown, NOS

Thymus, Adrenal (Suprarenal) Gland, and Other Endocrine Glands

CS Site-Specific Factor 2

Code	Description
888	Not applicable for this site

Thymus, Adrenal (Suprarenal) Gland, and Other Endocrine Glands

CS Site-Specific Factor 3

Code	Description
888	Not applicable for this site

Thymus, Adrenal (Suprarenal) Gland, and Other Endocrine Glands

CS Site-Specific Factor 4

Code	Description
888	Not applicable for this site

Thymus, Adrenal (Suprarenal) Gland, and Other Endocrine Glands

CS Site-Specific Factor 5

Code	Description
888	Not applicable for this site

Thymus, Adrenal (Suprarenal) Gland, and Other Endocrine Glands

CS Site-Specific Factor 6

Code	Description
888	Not applicable for this site