

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>
---	---	---

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
70	Maxilla	T4	RE	RE

Collaborative Staging Manual and Coding Instructions Part II: Primary Site Schema

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.

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 Level II node Jugulodigastric (subdigastric) Upper deep cervical Upper jugular	*	D	RN

Collaborative Staging Manual and Coding Instructions Part II: Primary Site Schema

11, cont'd	<p>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</p>			
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 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</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

Collaborative Staging Manual and Coding Instructions Part II: Primary Site Schema

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

Collaborative Staging Manual and Coding Instructions Part II: Primary Site Schema

**Lip, Upper
CS Mets at DX**

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

**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

Lip, 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
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 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

Collaborative Staging Manual and Coding Instructions Part II: Primary Site Schema

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

Lip, 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

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>
---	--	---

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

Collaborative Staging Manual and Coding Instructions Part II: Primary Site Schema

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.

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 Level III node Middle deep cervical Mid-jugular Level IV node Jugulo-omohyoid (supraomohyoid)	*	D	RN

Collaborative Staging Manual and Coding Instructions Part II: Primary Site Schema

11, cont'd	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	*	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

Collaborative Staging Manual and Coding Instructions Part II: Primary Site Schema

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

Lip, Lower

CS Mets at DX

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

Collaborative Staging Manual and Coding Instructions Part II: Primary Site Schema

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

Lip, Lower

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

Lip, Lower

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

Collaborative Staging Manual and Coding Instructions Part II: Primary Site Schema

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

Lip, Lower

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

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>
---	--	---

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

Collaborative Staging Manual and Coding Instructions Part II: Primary Site Schema

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.

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

Collaborative Staging Manual and Coding Instructions Part II: Primary Site Schema

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>	*	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

Collaborative Staging Manual and Coding Instructions Part II: Primary Site Schema

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

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

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

Collaborative Staging Manual and Coding Instructions Part II: Primary Site Schema

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

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

C01.9, C02.4

C01.9 Base of tongue, NOS

C02.4 Lingual tonsil

Note: AJCC includes base of tongue (C01.9) with oropharynx (C10.).

<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>
---	--	---

Base of Tongue, Lingual Tonsil

CS Tumor Size

SEE STANDARD TABLE

Base of Tongue, Lingual Tonsil

CS Extension

Code	Description	TNM	SS77	SS2000
00	In situ; noninvasive; intraepithelial	Tis	IS	IS
10	Invasive tumor on one side confined to posterior 1/3 of tongue: 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	Anterior 2/3 of tongue for base of tongue Base of tongue for lingual tonsil Floor of mouth Lower gingiva	*	RE	RE
53	Sublingual gland	*	RE	RE
60	Epiglottis, lingual (pharyngeal) surface Glossoepiglottic fold Glossopharyngeal fold Lateral pharyngeal wall	*	RE	RE

Collaborative Staging Manual and Coding Instructions Part II: Primary Site Schema

60, cont'd	Pharyngoepiglottic fold Tonsillar pillars and fossae Tonsils Vallecula			
62	Soft palate, inferior surface or NOS	*	D	RE
71	Mandible for lingual tonsil	T4a	RE	D
72	Mandible for base of tongue	T4a	D	D
74	Medial pterygoid Hard palate	T4a	D	D
75	Musculature, extrinsic: Genioglossus Geniohyoid Hyoglossus Mylohyoid Palatoglossus Styloglossus	T4a	D	D
77	Larynx	T4a	D	D
78	Skin	T4b	D	D
80	Contiguous extension to: Base of skull Carotid artery Hypopharynx Lateral nasopharynx Lateral pterygoid muscle Pterygoid plates Uvula	T4b	D	D
82	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, 53, 60, and 62 ONLY, the T category is assigned based on the value of CS Tumor Size, as shown in the Extension Size Table for this site.

**Base of Tongue, Lingual Tonsil
CS TS/Ext-Eval
SEE STANDARD TABLE**

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.

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 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	*	D	D
18	Stated as N1, no other information	N1	RN	RN

Collaborative Staging Manual and Coding Instructions Part II: Primary Site Schema

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

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

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
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
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 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

Base of Tongue, Lingual Tonsil

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

Collaborative Staging Manual and Coding Instructions Part II: Primary Site Schema

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

Base of Tongue, Lingual Tonsil

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

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
--	---	--

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

Collaborative Staging Manual and Coding Instructions Part II: Primary Site Schema

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.

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	*	RN	RN

Collaborative Staging Manual and Coding Instructions Part II: Primary Site Schema

10, cont'd	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 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	*	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

Collaborative Staging Manual and Coding Instructions Part II: Primary Site Schema

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

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

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 nodes 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

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

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

Collaborative Staging Manual and Coding Instructions Part II: Primary Site Schema

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

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

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

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

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

Collaborative Staging Manual and Coding Instructions Part II: Primary Site Schema

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

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>
---	---	---

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

Collaborative Staging Manual and Coding Instructions Part II: Primary Site Schema

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.

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 Prealaryngeal Pretracheal Recurrent laryngeal Level VII node Upper mediastinum (for other mediastinal nodes see CS Mets at DX)	*	D	D

Collaborative Staging Manual and Coding Instructions Part II: Primary Site Schema

12, cont'd	Other groups Intraparotid Parapharyngeal Periparotid Retropharyngeal Sub-occipital			
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

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

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

Collaborative Staging Manual and Coding Instructions Part II: Primary Site Schema

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, 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

Gum, Lower and Retromolar Area

Retromolar gingiva (trigone)

C03.1, C06.2

C03.1 Lower gum

C06.2 Retromolar area

<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>
---	--	---

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

Collaborative Staging Manual and Coding Instructions Part II: Primary Site Schema

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.

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

Collaborative Staging Manual and Coding Instructions Part II: Primary Site Schema

10, cont'd	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	*	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

Collaborative Staging Manual and Coding Instructions Part II: Primary Site Schema

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

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

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
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
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

Collaborative Staging Manual and Coding Instructions Part II: Primary Site Schema

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

Collaborative Staging Manual and Coding Instructions Part II: Primary Site Schema

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 Manual and Coding Instructions Part II: Primary Site Schema

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>
---	---	---

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
76	Skin	T4a	D	D

Collaborative Staging Manual and Coding Instructions Part II: Primary Site Schema

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.

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 Cervical, NOS Deep cervical, NOS Internal jugular, NOS Mandibular, NOS Regional lymph node, NOS	*	RN	RN

Collaborative Staging Manual and Coding Instructions Part II: Primary Site Schema

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 	*	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
60	Stated as N2, NOS	N2NOS	RN	RN
70	Stated as N3, no other information	N3	RN	RN

Collaborative Staging Manual and Coding Instructions Part II: Primary Site Schema

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

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

Gum, NOS
CS Mets Eval
SEE STANDARD TABLE

Gum, 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

Gum, 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

Gum, 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

Gum, NOS

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

Collaborative Staging Manual and Coding Instructions Part II: Primary Site Schema

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, NOS

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, NOS

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

Collaborative Staging Manual and Coding Instructions Part II: Primary Site Schema

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

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>
---	---	---

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 Pharyngoepiglottic fold	*	RE	RE

Collaborative Staging Manual and Coding Instructions Part II: Primary Site Schema

60, cont'd	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.

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	*	RN	RN

Collaborative Staging Manual and Coding Instructions Part II: Primary Site Schema

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 Sublingual 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	*	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

Collaborative Staging Manual and Coding Instructions Part II: Primary Site Schema

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

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

Collaborative Staging Manual and Coding Instructions Part II: Primary Site Schema

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

Collaborative Staging Manual and Coding Instructions Part II: Primary Site Schema

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

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>
---	---	---

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

Collaborative Staging Manual and Coding Instructions Part II: Primary Site Schema

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.

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
12	Single positive ipsilateral regional node: Level V node Posterior cervical	*	D	D

Collaborative Staging Manual and Coding Instructions Part II: Primary Site Schema

12, cont'd	<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 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 Parapharyngeal Retropharyngeal Sub-occipital</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
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

Collaborative Staging Manual and Coding Instructions Part II: Primary Site Schema

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**

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

**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

Collaborative Staging Manual and Coding Instructions Part II: Primary Site Schema

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

Collaborative Staging Manual and Coding Instructions Part II: Primary Site Schema

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

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
--	--	--

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

Collaborative Staging Manual and Coding Instructions Part II: Primary Site Schema

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.

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)	*	RN	RN

Collaborative Staging Manual and Coding Instructions Part II: Primary Site Schema

10, cont'd	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			
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	*	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

Collaborative Staging Manual and Coding Instructions Part II: Primary Site Schema

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

Collaborative Staging Manual and Coding Instructions Part II: Primary Site Schema

Soft Palate, Uvula

CS Mets at DX

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

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
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
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
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

Collaborative Staging Manual and Coding Instructions Part II: Primary Site Schema

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

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>
---	---	---

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 Skin of face/neck Tongue	T4a	D	D

Collaborative Staging Manual and Coding Instructions Part II: Primary Site Schema

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.

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

Collaborative Staging Manual and Coding Instructions Part II: Primary Site Schema

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>	*	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
60	Stated as N2, NOS	N2NOS	RN	RN
70	Stated as N3, no other information	N3	RN	RN

Collaborative Staging Manual and Coding Instructions Part II: Primary Site Schema

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

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

Other Mouth

CS Mets Eval

SEE STANDARD TABLE

Other 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

Other 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

Other 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

Other 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

Collaborative Staging Manual and Coding Instructions Part II: Primary Site Schema

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

Other 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
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 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

Collaborative Staging Manual and Coding Instructions Part II: Primary Site Schema

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

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>
---	--	---

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

Collaborative Staging Manual and Coding Instructions Part II: Primary Site Schema

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.

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	*	RN	RN

Collaborative Staging Manual and Coding Instructions Part II: Primary Site Schema

10, cont'd	Lower jugular Other groups Facial: Buccinator (buccal) Nasolabial Parotid, NOS Infra-auricular Preauricular 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	*	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
42	Regional lymph nodes as listed in code 12: Positive bilateral or contralateral nodes	*	D	D

Collaborative Staging Manual and Coding Instructions Part II: Primary Site Schema

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

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

**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

Collaborative Staging Manual and Coding Instructions Part II: Primary Site Schema

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

Cheek (Buccal) Mucosa, Vestibule

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

Collaborative Staging Manual and Coding Instructions Part II: Primary Site Schema

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

Cheek (Buccal) Mucosa, Vestibule

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

Cheek (Buccal) Mucosa, Vestibule

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

Parotid Gland

C07.9

C07.9 Parotid gland

Note: Laterality must be coded for C07.9.

<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>
---	---	---

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	*	RE	RE
42	External auditory meatus Skin overlying gland	T4a	RE	RE
45	Periosteum of mandible	T4a	RE	RE

Collaborative Staging Manual and Coding Instructions Part II: Primary Site Schema

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.

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 Cervical, NOS Deep cervical, NOS Internal jugular Mandibular, NOS Regional lymph node, NOS	*	RN	RN

Collaborative Staging Manual and Coding Instructions Part II: Primary Site Schema

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	*	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

Collaborative Staging Manual and Coding Instructions Part II: Primary Site Schema

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

Parotid Gland
CS Mets at DX

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

Collaborative Staging Manual and Coding Instructions Part II: Primary Site Schema

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

Parotid Gland

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

Parotid Gland

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

Collaborative Staging Manual and Coding Instructions Part II: Primary Site Schema

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

Parotid Gland

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

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>
---	---	---

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	*	RE	RE
45	Periosteum of mandible	T4a	RE	RE

Collaborative Staging Manual and Coding Instructions Part II: Primary Site Schema

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.

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 Cervical, NOS	*	RN	RN

Collaborative Staging Manual and Coding Instructions Part II: Primary Site Schema

10, cont'd	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	*	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

Collaborative Staging Manual and Coding Instructions Part II: Primary Site Schema

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**

Code	Description	TNM	SS77	SS2000
00	No; none	M0	NONE	NONE
10	Distant lymph node(s) Supraclavicular (transverse cervical)	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

**Submandibular Gland
CS Mets Eval
SEE STANDARD TABLE**

Submandibular 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

Submandibular 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

Submandibular 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

Submandibular Gland

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

Collaborative Staging Manual and Coding Instructions Part II: Primary Site Schema

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

Submandibular Gland

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

Submandibular Gland

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

Collaborative Staging Manual and Coding Instructions Part II: Primary Site Schema

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

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.

<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>
---	---	---

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

Collaborative Staging Manual and Coding Instructions Part II: Primary Site Schema

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.

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 Level III node Middle deep cervical Mid jugular	*	D	D

Collaborative Staging Manual and Coding Instructions Part II: Primary Site Schema

12, cont'd	<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</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
60	Stated as N2, NOS	N2NOS	RN	RN
70	Stated as N3, no other information	N3	RN	RN

Collaborative Staging Manual and Coding Instructions Part II: Primary Site Schema

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

Code	Description	TNM	SS77	SS2000
00	No; none	M0	NONE	NONE
10	Distant lymph node(s) Supraclavicular (transverse cervical)	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 and Unspecified Major Salivary Glands
CS Mets Eval
SEE STANDARD TABLE

Other and Unspecified Major Salivary Glands

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 and Unspecified Major Salivary Glands

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 and Unspecified Major Salivary Glands

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 and Unspecified Major Salivary Glands

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

Collaborative Staging Manual and Coding Instructions Part II: Primary Site Schema

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

Other and Unspecified Major Salivary Glands

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 and Unspecified Major Salivary Glands

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

Collaborative Staging Manual and Coding Instructions Part II: Primary Site Schema

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

Tonsil, Oropharynx

C09.0-C09.1, C09.8-C09.9, C10.0, C10.2-C10.4, C10.8-C10.9

- C09.0 Tonsillar fossa
- C09.1 Tonsillar pillar
- C09.8 Overlapping lesion of tonsil
- C09.9 Tonsil, NOS (excludes lingual tonsil C02.4)
- C10.0 Vallecula
- C10.2 Lateral wall of oropharynx
- C10.3 Posterior wall of oropharynx
- C10.4 Branchial cleft (site of neoplasm)
- C10.8 Overlapping lesion of oropharynx
- C10.9 Oropharynx, NOS

Note 1: Laterality must be coded for C09.0, C09.1, C09.8, and C09.9.

Note 2: AJCC includes base of tongue (C01.9) with oropharynx (C09. , C10.).

<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
--	---	--

Tonsil, Oropharynx

CS Tumor Size

SEE STANDARD TABLE

Tonsil, Oropharynx

CS Extension

Code	Description	TNM	SS77	SS2000
00	In situ; noninvasive; intraepithelial	Tis	IS	IS
10	Invasive tumor confined to one of the following subsites: Anterior wall (including vallecula and lingual (anterior) surface of epiglottis) One lateral wall Posterior wall	*	L	L
20	Involvement of two or more subsites: Posterior, anterior or lateral wall(s)	*	L	L
30	Localized, NOS	*	L	L
40	Soft palate, inferior surface including uvula, or soft palate, NOS	*	RE	RE

Collaborative Staging Manual and Coding Instructions Part II: Primary Site Schema

41	Hypopharynx NOS Pyriform sinus	*	RE	RE
42	Soft palate, superior (nasopharyngeal) surface	*	RE	RE
50	Base of tongue Buccal mucosa (inner cheek) Floor of mouth Gum (gingiva)	*	RE	RE
55	Any extension coded in 10-50 WITH fixation	*	RE	RE
60	Prevertebral fascia or muscle Soft tissue of neck	*	RE	RE
62	Nasopharynx, lateral, or NOS	T4b	RE	RE
65	Larynx, NOS Medial pterygoid muscle, or pterygoid muscle, NOS Posterior surface of epiglottis	T4a	RE	RE
70	Deep extrinsic muscles of tongue: Genioglossus Geniohyoid Hyoglossus Mylohyoid Palatoglossus Styloglossus Hard palate Mandible	T4a	D	D
72	Lateral pterygoid muscle Pterygoid plates	T4b	D	D
75	Bone of skull	T4b	D	D
76	Bone	T4b	D	D
77	Carotid artery	T4b	D	D
80	Further contiguous extension: Anterior 2/3 of tongue Parotid gland	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, 40, 41, 42, 50, 55, 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.

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

Collaborative Staging Manual and Coding Instructions Part II: Primary Site Schema

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.

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 Level VII node Upper mediastinum (for other mediastinal nodes see CS Mets at DX) Other groups Intraparotid Parapharyngeal Periparotid Retropharyngeal Sub-occipital	*	D	D
18	Stated as N1, no other information	N1	RN	RN

Collaborative Staging Manual and Coding Instructions Part II: Primary Site Schema

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.

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

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

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

Collaborative Staging Manual and Coding Instructions Part II: Primary Site Schema

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

Tonsil, Oropharynx

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

Collaborative Staging Manual and Coding Instructions Part II: Primary Site Schema

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

Tonsil, Oropharynx

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

Tonsil, Oropharynx

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

Collaborative Staging Manual and Coding Instructions Part II: Primary Site Schema

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

Tonsil, Oropharynx

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

Anterior Surface of Epiglottis

C10.1

C10.1 Anterior surface of epiglottis

Note: AJCC includes lingual (anterior) surface of epiglottis (C10.1) with larynx. SEER Extent of Disease included it with oropharynx.

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
--	--	--

Anterior Surface of Epiglottis

CS Tumor Size

SEE STANDARD TABLE

Anterior Surface of Epiglottis

CS Extension

Code	Description	TNM	SS77	SS2000
00	In situ; noninvasive; intraepithelial	Tis	IS	IS
10	Invasive tumor confined to anterior surface of epiglottis with normal vocal cord mobility	T1	L	L
20	Mucosa of adjacent subsite(s) of oropharynx	T2	L	L
30	Localized, NOS	T1	L	L
31	Vallecula without fixation of larynx	T2	L	L
32	Mucosa of adjacent subsite(s) of supraglottis (including posterior surface of epiglottis) without fixation of larynx	T2	RE	RE
33	Larynx, glottic or NOS, without fixation of larynx	T2	RE	RE
34	Pyramidal sinus, medial wall or NOS, without fixation of larynx	T2	RE	RE
35	Mucosa of base of tongue without fixation of larynx	T2	RE	RE
36	Any of (10) to (35) with vocal cord fixation	T3	RE	RE
37	Paraglottic space Pre-epiglottic tissues	T3	RE	RE
38	Minor thyroid cartilage erosion (inner cortex) (see also code 67)	T3	D	D

Collaborative Staging Manual and Coding Instructions Part II: Primary Site Schema

39	Hypopharynx, NOS Postcricoid area Pyramidal sinus except medial wall (see code 34)	T3	RE	RE
43	(38) + (39)	T3	D	D
45	Soft palate, inferior surface including uvula, or soft palate, NOS	T4a	RE	RE
47	Nasopharynx, NOS Soft palate, superior (nasopharyngeal) surface	T4a	RE	RE
50	Base of tongue, except mucosa (see code 35) Buccal mucosa (inner cheek) Floor of mouth Gum (gingiva)	T4a	RE	RE
62	Soft tissues of neck	T4a	RE	RE
65	Pterygoid muscle	T4a	RE	RE
66	[(38) or (43)] + any of [(45) to (65)]	T4a	D	D
67	Invasion through thyroid cartilage (see also code 38) Thyroid cartilage, NOS	T4a	D	D
68	Trachea	T4a	D	D
69	Esophagus Strap muscles Thyroid	T4a	D	D
70	Extrinsic muscles of tongue: Genioglossus Geniohyoid Hyoglossus Mylohyoid Palatoglossus Styloglossus	T4a	D	D
75	Prevertebral fascia or muscle Prevertebral space	T4b	RE	RE
77	(75) + any of [(66) to (70)]	T4b	D	D
80	Further contiguous extension, including: Anterior 2/3 of tongue Bone Encases carotid artery Hard palate Mandible Mediastinal structures Parotid gland	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

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.

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) 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	*	D	D

Collaborative Staging Manual and Coding Instructions Part II: Primary Site Schema

12, cont'd	Parapharyngeal Periparotid Retropharyngeal Sub-occipital Supraclavicular fossa			
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.

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) (codes 08 -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

Collaborative Staging Manual and Coding Instructions Part II: Primary Site Schema

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

Anterior Surface of Epiglottis

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

Collaborative Staging Manual and Coding Instructions Part II: Primary Site Schema

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

Anterior Surface of Epiglottis

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

Anterior Surface of Epiglottis

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

Collaborative Staging Manual and Coding Instructions Part II: Primary Site Schema

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

Anterior Surface of Epiglottis

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

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
--	--	--

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

Collaborative Staging Manual and Coding Instructions Part II: Primary Site Schema

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.

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	*	RN	RN

Collaborative Staging Manual and Coding Instructions Part II: Primary Site Schema

10, cont'd	Level IV node Lower deep cervical Lower jugular Retropharyngeal Cervical, NOS Deep cervical, NOS Internal jugular, NOS Mandibular Regional lymph node, NOS			
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 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	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

Collaborative Staging Manual and Coding Instructions Part II: Primary Site Schema

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)	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

Nasopharynx
Reg LN Exam
SEE STANDARD TABLE

Collaborative Staging Manual and Coding Instructions Part II: Primary Site Schema

**Nasopharynx
CS Mets at DX**

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

**Nasopharynx
CS Mets Eval
SEE STANDARD TABLE**

**Nasopharynx
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

Nasopharynx

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

Nasopharynx

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

Nasopharynx

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

Nasopharynx

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

Collaborative Staging Manual and Coding Instructions Part II: Primary Site Schema

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

Nasopharynx

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

**Pyriform Sinus, Hypopharynx, Laryngopharynx
C12.9, C13.0-C13.2, C13.8-C13.9**

- C12.9 Pyriform sinus
- C13.0 Postcricoid 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 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
--	--	--

**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 Postcricoid 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
55	Fixation of hemilarynx or larynx	T3	RE	RE

Collaborative Staging Manual and Coding Instructions Part II: Primary Site Schema

60	Soft tissues of neck including Pre-laryngeal 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.

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	*	RN	RN

Collaborative Staging Manual and Coding Instructions Part II: Primary Site Schema

10, cont'd	Cervical, NOS Deep cervical, NOS Internal jugular, NOS Mandibular Regional lymph node, NOS			
11	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	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
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

Collaborative Staging Manual and Coding Instructions Part II: Primary Site Schema

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**

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

Collaborative Staging Manual and Coding Instructions Part II: Primary Site Schema

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

**Pyriiform Sinus, Hypopharynx, Laryngopharynx
CS Mets Eval
SEE STANDARD TABLE**

**Pyriiform 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

Pyriiform 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

Pyriiform 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

**Pyriiform Sinus, Hypopharynx, Laryngopharynx
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

**Pyriiform Sinus, Hypopharynx, Laryngopharynx
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

Collaborative Staging Manual and Coding Instructions Part II: Primary Site Schema

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

**Pyriiform Sinus, Hypopharynx, Laryngopharynx
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

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

CS Tumor Size

SEE STANDARD TABLE

Pharynx, NOS, and Other III-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
99	Unknown extension Primary tumor cannot be assessed Not documented in patient record	NA	U	U

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

CS TS/Ext-Eval

Code	Description	Staging Basis
9	Not applicable for this site	NA

Pharynx, NOS, and Other III-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.

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
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 III-Defined Oral Cavity Sites

CS Reg Nodes Eval

Code	Description	Staging Basis
9	Not applicable for this site	NA

Pharynx, NOS, and Other III-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

Code	Description	TNM	SS77	SS2000
00	No; none	NA	NONE	NONE
10	Distant lymph node(s), including: Mediastinal Supraclavicular (transverse cervical)	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

Collaborative Staging Manual and Coding Instructions Part II: Primary Site Schema

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 III-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

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

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

Collaborative Staging Manual and Coding Instructions Part II: Primary Site Schema

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

**Pharynx, NOS, and Other III-Defined Oral Cavity Sites
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

**Pharynx, NOS, and Other III-Defined Oral Cavity Sites
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

Collaborative Staging Manual and Coding Instructions Part II: Primary Site Schema

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

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

Esophagus

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

- C15.0 Cervical esophagus
- C15.1 Thoracic esophagus
- C15.2 Abdominal esophagus
- C15.3 Upper third of esophagus
- C15.4 Middle third of esophagus
- C15.5 Lower third of esophagus
- C15.8 Overlapping lesion of esophagus
- C15.9 Esophagus, NOS

Anatomic Limits of Esophagus:

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

Intrathoracic (including abdominal esophagus) (C15.1 - C15.5): Upper thoracic portion (C15.3): From the thoracic inlet to the level of the tracheal bifurcation (18-24 cm). Mid-thoracic portion (C15.4): From the tracheal bifurcation midway to the gastroesophageal (GE) junction (24-32 cm).

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

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	<p>The following tables are available at the collaborative staging website: Histology Exclusion Table AJCC Stage</p>
--	--	---

Esophagus

CS Tumor Size

Note: For esophagus, this field is used for size of tumor/length of involved esophagus.

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	Circumferential
999	Unknown; size not stated Not documented in patient record

Collaborative Staging Manual and Coding Instructions Part II: Primary Site Schema

**Esophagus
CS Extension**

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

Code	Description	TNM	SS77	SS2000
00	In situ; non-invasive; intraepithelial	Tis	IS	IS
10	Invasive tumor confined to mucosa, NOS (including intramucosal, NOS)	T1	L	L
11	Invades lamina propria	T1	L	L
12	Invades muscularis mucosae	T1	L	L
16	Invades submucosa	T1	L	L
20	Muscularis propria invaded	T2	L	L
30	Localized, NOS	T1	L	L
40	Adventitia and/or soft tissue invaded Esophagus is described as "FIXED"	T3	RE	RE
60	Tumor invades adjacent structures Cervical esophagus: Blood vessel(s): Carotid artery Jugular vein Subclavian artery Thyroid gland Intrathoracic, upper or mid-portion, esophagus: Blood vessel(s), major: Aorta Azygos vein Pulmonary artery/vein Vena cava Carina Diaphragm Main stem bronchus Trachea Intrathoracic, lower portion (abdominal), esophagus: Blood vessel(s): Aorta Gastric artery/vein Vena cava Diaphragm, not fixed, or NOS Stomach, cardia (via serosa)	T4	RE	RE
65	Cervical esophagus: Carina Cervical vertebra(e) Hypopharynx Larynx Trachea Intrathoracic esophagus: Lung via bronchus Mediastinal structure(s), NOS Pleura	T4	RE	RE

Collaborative Staging Manual and Coding Instructions Part II: Primary Site Schema

65, cont'd	Rib(s) Thoracic vertebra(e)			
78	Thoracic/middle esophagus: Pericardium	T4	RE	D
80	Further contiguous extension: Cervical/upper esophagus: Lung Main stem bronchus Pleura Abdominal/lower esophagus: Diaphragm fixed	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

Esophagus

CS TS/Ext-Eval

SEE STANDARD TABLE

Esophagus

CS Lymph Nodes

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

Code	Description	TNM	SS77	SS2000
00	None; no regional lymph node involvement	N0	NONE	NONE
10	Regional lymph node(s) (including contralateral or bilateral) For all subsites: Peri-/paraesophageal Cervical esophagus only: Cervical, NOS Anterior deep cervical (laterolateral) (recurrent laryngeal) Internal jugular, NOS: Deep cervical, NOS: Upper, NOS: Jugulodigastric (subdigastric) Intrathoracic esophagus, upper or middle, only: Internal jugular, NOS: Deep cervical, NOS: Lower, NOS: Jugulo-omohyoid (supraomohyoid) Middle Upper cervical, NOS: Jugulodigastric (subdigastric) Intrabronchial: Carinal (tracheobronchial) (tracheal bifurcation) Hilar (bronchopulmonary) (proximal lobar) (pulmonary root) Peritracheal Left gastric (superior gastric): Cardiac (cardial) Lesser curvature	N1	RN	RN

Collaborative Staging Manual and Coding Instructions Part II: Primary Site Schema

10, cont'd	Perigastric, NOS Posterior mediastinal (tracheoesophageal) Intrathoracic esophagus, lower (abdominal) only: Left gastric (superior gastric): Cardiac (cardial) Lesser curvature Perigastric, NOS Posterior mediastinal (tracheoesophageal)			
20	Cervical Esophagus only: Scalene (inferior deep cervical) Supraclavicular (transverse cervical)	N1	D	RN
22	Intrathoracic, upper thoracic or middle, only: Superior mediastinal	N1	D	RN
30	All esophagus subsites: Anterior mediastinal Mediastinal, NOS Cervical esophagus only: Aortopulmonary Paratracheal Posterior mediastinal Superior mediastinal Intrathoracic esophagus, upper or middle, only: Aortopulmonary Pulmonary ligament Intrathoracic esophagus, lower (abdominal) only: Common hepatic Diaphragmatic Paratracheal Splenic Superior mediastinal	N1	RN	RN
50	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

Esophagus

CS Reg Nodes Eval

SEE STANDARD TABLE

Esophagus

Reg LN Pos

SEE STANDARD TABLE

Esophagus

Reg LN Exam

SEE STANDARD TABLE

Collaborative Staging Manual and Coding Instructions Part II: Primary Site Schema

**Esophagus
CS Mets at DX**

Code	Description	TNM	SS77	SS2000
00	No; none	M0	NONE	NONE
10	Distant lymph node(s), NOS	M1NOS	D	D
11	Upper thoracic esophagus only: Cervical lymph node(s) Lower thoracic (abdominal) esophagus only: Celiac lymph node(s)	M1a	D	D
12	Specified distant lymph node(s), other than code 11, including: Cervical esophagus only: Common hepatic Diaphragmatic Pulmonary ligament Splenic Intrathoracic esophagus, upper or middle, only: Common hepatic Diaphragmatic Splenic Lower thoracic (abdominal) esophagus only: Aortopulmonary Pulmonary ligament	M1NOS	D	D
40	Distant metastases except distant lymph node(s) (codes 10 - 12) Distant metastasis, NOS Carcinomatosis	M1b	D	D
50	(40) + any of [(10) to (12)] Distant lymph node(s) plus other distant metastases	M1b	D	D
99	Unknown if distant metastasis Distant metastasis cannot be assessed Not documented in patient record	MX	U	U

**Esophagus
CS Mets Eval
SEE STANDARD TABLE**

**Esophagus
CS Site-Specific Factor 1**

Code	Description
888	Not applicable for this site

**Esophagus
CS Site-Specific Factor 2**

Code	Description
888	Not applicable for this site

Esophagus

CS Site-Specific Factor 3

Code	Description
888	Not applicable for this site

Esophagus

CS Site-Specific Factor 4

Code	Description
888	Not applicable for this site

Esophagus

CS Site-Specific Factor 5

Code	Description
888	Not applicable for this site

Esophagus

CS Site-Specific Factor 6

Code	Description
888	Not applicable for this site

Stomach

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

- C16.0 Cardia, NOS
- C16.1 Fundus of stomach
- C16.2 Body of stomach
- C16.3 Gastric antrum
- C16.4 Pylorus
- C16.5 Lesser curvature of stomach, NOS
- C16.6 Greater curvature of stomach, NOS
- C16.8 Overlapping lesion of stomach
- C16.9 Stomach, 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	<p>The following tables are available at the collaborative staging website:</p> Histology Exclusion Table AJCC Stage Lymph Nodes Number Positive Table
--	--	---

Stomach

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	Diffuse; widespread; 3/4's or more: linitis plastica
999	Unknown; size not stated Not documented in patient record

Collaborative Staging Manual and Coding Instructions Part II: Primary Site Schema

Stomach

CS Extension

Note 1: INTRALUMINAL or INTRAMURAL extension to esophagus and duodenum is classified by the depth of greatest invasion in any of these sites, including stomach. (For extension to esophagus or duodenum via serosa, see code 60.)

Note 2: If the diagnosis states "linitis plastica" and no other information regarding extension is available, use code 35.

Code	Description	TNM	SS77	SS2000
00	In situ; noninvasive; intraepithelial	Tis	IS	IS
05	(Adeno)carcinoma in a polyp, noninvasive	Tis	IS	IS
10	Invasive tumor confined to mucosa, NOS (including intramucosal, NOS)	T1	L	L
11	Invades lamina propria	T1	L	L
12	Invades muscularis mucosae	T1	L	L
13	Confined to head of polyp Extension to stalk	T1	L	L
14	Confined to stalk of polyp	T1	L	L
15	Tumor in polyp, NOS	T1	L	L
16	Invades submucosa (superficial invasion)	T1	L	L
20	Invades into but not through muscularis propria	T2a	L	L
30	Localized, NOS Implants inside stomach	T1	L	L
35	Linitis plastica (see Note 2) and no other information regarding extension is available.	T2a	RE	L
40	Invasion through muscularis propria or muscularis, NOS Extension through wall, NOS Perimuscular tissue invaded Subserosal tissue/(sub)serosal fat invaded	T2b	L	L
45	Extension to adjacent (connective) tissue WITHOUT perforation of visceral peritoneum: Gastric artery Ligaments: Gastrocolic Gastrohepatic Gastrosplenic Omentum, NOS Greater Lesser Perigastric fat	T2b	RE	RE
50	Invasion of/through serosa (mesothelium) (tunica serosa) (visceral peritoneum), including perforation of visceral peritoneum covering the gastric ligaments or the omentum WITHOUT invasion of adjacent structures	T3	RE	RE

Collaborative Staging Manual and Coding Instructions Part II: Primary Site Schema

55	(45) + (50)	T3	RE	RE
60	Diaphragm Duodenum via serosa or NOS Esophagus via serosa Ileum Jejunum Liver Pancreas Small intestine, NOS Spleen Transverse colon (including flexures)	T4	RE	RE
70	Abdominal wall Adrenal gland Kidney Retroperitoneum	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

Stomach

CS TS/Ext-Eval

SEE STANDARD TABLE

Stomach

CS Lymph Nodes

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

Code	Description	TNM	SS77	SS2000
00	None; no regional lymph node involvement	N0	NONE	NONE
10	Regional lymph node(s): Left gastric (superior gastric), NOS: Cardial Cardioesophageal Gastric, left Gastropancreatic, left Lesser curvature Lesser omental Paracardial Pancreaticosplenic (pancreaticolienal) Pancreatoduodenal Perigastric, NOS Peripancreatic Right gastric (inferior gastric), NOS: Gastrocolic Gastroduodenal Gastroepiploic (gastro-omental), right or NOS Gastrohepatic Greater curvature	*	RN	RN

Collaborative Staging Manual and Coding Instructions Part II: Primary Site Schema

10, cont'd	Greater omental Pyloric, NOS Infrapyloric (subpyloric) Suprapyloric Splenic (lienal), NOS: Gastroepiploic (gastro-omental), left Splenic hilar Nodule(s) in perigastric fat			
40	Celiac Hepatic (excluding gastrohepatic, [see code 10] and hepatoduodenal [see code 42])	*	D	RN
42	For lesser curvature only: Hepatoduodenal	*	D	D
50	Regional lymph node(s), NOS	*	RN	RN
80	Lymph node(s), NOS	*	RN	RN
99	Unknown; not stated Regional lymph node(s) cannot be assessed Not documented in patient record	NX	U	U

* For codes 10-80 ONLY, the N category is assigned based on the value of the Reg LN Pos using the Lymph Nodes Number Positive table for this site.

Stomach

CS Reg Nodes Eval

SEE STANDARD TABLE

Stomach

Reg LN Pos

SEE STANDARD TABLE

Stomach

Reg LN Exam

SEE STANDARD TABLE

Stomach

CS Mets at DX

Code	Description	TNM	SS77	SS2000
00	No; none	M0	NONE	NONE
10	Distant lymph node(s): For all subsites: Inferior mesenteric Para-aortic Porta hepatis (portal) (hilar) (in hilus of liver) Retropancreatic Retroperitoneal Superior mesenteric or mesenteric, NOS For all subsites EXCEPT lesser curvature Hepatoduodenal	M1	D	D

Collaborative Staging Manual and Coding Instructions Part II: Primary Site Schema

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

Stomach

CS Mets Eval

SEE STANDARD TABLE

Stomach

CS Site-Specific Factor 1

Code	Description
888	Not applicable for this site

Stomach

CS Site-Specific Factor 2

Code	Description
888	Not applicable for this site

Stomach

CS Site-Specific Factor 3

Code	Description
888	Not applicable for this site

Stomach

CS Site-Specific Factor 4

Code	Description
888	Not applicable for this site

Collaborative Staging Manual and Coding Instructions Part II: Primary Site Schema

Stomach

CS Site-Specific Factor 5

Code	Description
888	Not applicable for this site

Stomach

CS Site-Specific Factor 6

Code	Description
888	Not applicable for this site

Small Intestine

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

C17.0 Duodenum

C17.1 Jejunum

C17.2 Ileum (excludes ileocecal valve C18.0)

C17.3 Meckel diverticulum (site of neoplasm)

C17.8 Overlapping lesion of small intestine

C17.9 Small intestine, NOS

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		

Small Intestine

CS Tumor Size

SEE STANDARD TABLE

Small Intestine

CS Extension

Note 1: Ignore intraluminal or lateral extension to adjacent segment(s) of small intestine and code depth of invasion or spread outside the small intestine as indicated.

Note 2: The nonperitonealized perimuscular tissue is, for jejunum and ileum, part of the mesentery and, for duodenum in areas where serosa is lacking, part of the retroperitoneum.

Code	Description	TNM	SS77	SS2000
00	In situ; non-invasive; intraepithelial	Tis	IS	IS
05	(Adeno)carcinoma in a polyp, noninvasive	Tis	IS	IS
10	Invasive tumor confined to mucosa, NOS, including intramucosal, NOS	T1	L	L
11	Invasion of lamina propria	T1	L	L
12	Invasion of muscularis mucosae	T1	L	L
13	Confined to head of polyp	T1	L	L
14	Confined to stalk of polyp	T1	L	L
15	Invasion of polyp, NOS	T1	L	L
16	Invasion of submucosa (superficial invasion)	T1	L	L
20	Muscularis propria invaded	T2	L	L
30	Localized, NOS Intraluminal spread to other segments of small intestine or cecum	T1	L	L

Collaborative Staging Manual and Coding Instructions Part II: Primary Site Schema

40	Invasion through muscularis propria or muscularis, NOS Extension through wall, NOS Subserosal tissue/(sub) serosal fat invaded Transmural, NOS	T3	L	L
42	Fat, NOS	T3	RE	RE
45	Adjacent connective tissue Mesentery, including mesenteric fat, invaded less than or equal to 2 cm in depth or NOS Nonperitonealized perimuscular tissue invaded less than or equal to 2 cm in depth or NOS Retroperitoneum invaded less than or equal to 2 cm in depth or NOS	T3	RE	RE
50	Invasion of/through serosa(mesothelium)(tunica serosa) (visceral peritoneum)	T4	L	RE
55	(50) + [(42) or (45)]	T4	RE	RE
60	For duodenum primary only: Ampulla of Vater Diaphragm Extrahepatic bile ducts Gallbladder Pancreas Pancreatic duct	T4	RE	RE
65	For duodenum primary only: Blood vessel(s), major: Aorta Gastroduodenal artery Portal vein Renal vein Superior mesenteric artery or vein Vena cava Greater omentum Hepatic flexure Kidney, NOS Kidney, right Liver, NOS Liver, quadrate lobe Liver, right lobe Omentum, NOS Transverse colon Ureter, right For jejunum or ileum primary only: Colon, including appendix	T4	RE	RE
66	For duodenum primary only: Stomach	T4	RE	RE
67	For all small intestine sites: Abdominal wall Mesentery invaded greater than 2 cm in depth Non-peritonealized perimuscular tissue invaded greater than 2 cm in depth Retroperitoneum invaded greater than 2 cm in depth	T4	RE	RE

Collaborative Staging Manual and Coding Instructions Part II: Primary Site Schema

68	For all small intestine sites: Other segments of the small intestine via serosa	T4	RE	RE
70	For jejunum or ileum primary only: Bladder Fallopian tube Ovary Uterus	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

Small Intestine

CS TS/Ext-Eval

SEE STANDARD TABLE

Small Intestine

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	No regional lymph node involvement	N0	NONE	NONE
10	Regional lymph node(s): For duodenum primaries only: Duodenal Gastroduodenal Hepatic Infrapyloric (subpyloric) Pancreaticoduodenal Pyloric For jejunum or ileum primaries only: Ileocolic for terminal ileum primary Mesenteric, NOS Posterior cecal (retrocecal) for terminal ileum primary Superior mesenteric	N1	RN	RN
20	Regional lymph node(s) for duodenum primaries only: Pericholodochal (common bile duct) Superior mesenteric (See code 11 in CS Mets at DX for other lymph nodes of of small intestine)	N1	D	RN
30	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

Small Intestine
CS Reg Nodes Eval
SEE STANDARD TABLE

Small Intestine
Reg LN Pos
SEE STANDARD TABLE

Small Intestine
Reg LN Exam
SEE STANDARD TABLE

Small Intestine
CS Mets at DX

Code	Description	TNM	SS77	SS2000
00	No; none	M0	NONE	NONE
10	Distant lymph node(s), other than those listed in code 11 including celiac lymph node(s) Distant lymph node(s), NOS	M1	D	D
11	For jejunum and ileum primaries only: Pericholodochal (For duodenal primary, see Lymph Nodes field)	M1	D	RN
40	Distant metastases except distant lymph node(s) (code 10) Distant metastasis, NOS Carcinomatosis	M1	D	D
50	(40) + any of [(10) or (11)] 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

Small Intestine
CS Mets Eval
SEE STANDARD TABLE

Small Intestine
CS Site-Specific Factor 1

Code	Description
888	Not applicable for this site

Small Intestine

CS Site-Specific Factor 2

Code	Description
888	Not applicable for this site

Small Intestine

CS Site-Specific Factor 3

Code	Description
888	Not applicable for this site

Small Intestine

CS Site-Specific Factor 4

Code	Description
888	Not applicable for this site

Small Intestine

CS Site-Specific Factor 5

Code	Description
888	Not applicable for this site

Small Intestine

CS Site-Specific Factor 6

Code	Description
888	Not applicable for this site

Page left blank.

Collaborative Staging Manual and Coding Instructions Part II: Primary Site Schema

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
--	---	---

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

Collaborative Staging Manual and Coding Instructions Part II: Primary Site Schema

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	T1	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

Collaborative Staging Manual and Coding Instructions Part II: Primary Site Schema

46	Adherent to other organs or structures, but no microscopic tumor found in adhesion(s)	T3	RE	RE
50	Invasion of/through serosa (mesothelium) (visceral peritoneum)	T4	RE	RE
55	Any of [(42) to (45)] + (50)	T4	RE	RE
57	Adherent to other organs or structures, NOS	T4	RE	RE
60	All colon sites: Small intestine Cecum and appendix: Greater omentum Ascending colon: Greater omentum Liver, right lobe Transverse colon and flexures: Gallbladder/bile ducts Kidney Liver Pancreas Spleen Stomach Descending colon: Greater omentum Pelvic wall Spleen Sigmoid colon: Greater omentum Pelvic wall	T4	RE	RE
65	All colon sites: Abdominal wall Retroperitoneum (excluding fat)	T4	RE	RE
66	Ascending colon: Right kidney Right ureter Descending colon: Left kidney Left ureter	T4	RE	RE
70	Cecum, appendix, ascending, descending and sigmoid colon: Fallopian tube Ovary Uterus	T4	D	D
75	All colon sites unless otherwise stated above: Adrenal (suprarenal) gland Bladder Diaphragm Fistula to skin Gallbladder Other segment(s) of colon via serosa	T4	D	D
80	Further contiguous extension: Cecum and appendix: Kidney Liver Ureter	T4	D	D

Collaborative Staging Manual and Coding Instructions Part II: Primary Site Schema

80, cont'd	Transverse colon and flexures: Ureter Sigmoid colon: Cul de sac (rectouterine pouch) Ureter Other contiguous extension			
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

Colon

CS TS/Ext-Eval

SEE STANDARD TABLE

Colon

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: 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: Inferior mesenteric nodes are coded in CS Mets at DX for cecum, appendix, ascending colon, transverse colon, and hepatic flexure. Superior mesenteric nodes are coded in CS Mets at DX for all colon sites.

Code	Description	TNM	SS77	SS2000
00	None; no regional lymph node involvement	N0	NONE	NONE
10	Regional lymph node(s) for all colon sites: Colic (NOS) Epicolic (adjacent to bowel wall) Mesocolic (NOS) Paracolic/pericolic Nodule(s) or foci in pericolic fat/adjacent mesentery/ mesocolic fat	*	RN	RN
20	Regional lymph node(s), for specific subsites: Cecum and appendix: Cecal: anterior (prececal), posterior (retrocecal); NOS Ileocolic Right colic Ascending colon: Ileocolic Middle colic Right colic Transverse colon and flexures: Inferior mesenteric for splenic flexure only Left colic for splenic flexure only Middle colic Right colic for hepatic flexure only Descending colon: Inferior mesenteric Left colic Sigmoid	*	RN	RN

Collaborative Staging Manual and Coding Instructions Part II: Primary Site Schema

20, cont'd	Sigmoid colon: Inferior mesenteric Sigmoidal (sigmoid mesenteric) Superior hemorrhoidal Superior rectal			
30	Regional lymph node(s) for all colon sites: Mesenteric, NOS 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 10-80 ONLY, the N category is assigned based on the value of Reg LN Pos, using the Lymph Nodes Number Positive Table for this site.

Colon

CS Reg Nodes Eval

SEE STANDARD TABLE

Colon

Reg LN Pos

SEE STANDARD TABLE

Colon

Reg LN Exam

SEE STANDARD TABLE

Colon

CS Mets at DX

Code	Description	TNM	SS77	SS2000
00	No; none	M0	NONE	NONE
08	Cecum, appendix, ascending, hepatic flexure and transverse colon: Superior mesenteric lymph node(s)	M1	RN	D
10	Distant lymph node(s) other than code 08 For all colon sites: Common iliac Distant lymph node(s), NOS External iliac Para-aortic Retroperitoneal For cecum, appendix, ascending colon, transverse colon, and hepatic flexure: Inferior mesenteric For splenic flexure, descending colon, and sigmoid colon: Superior mesenteric	M1	D	D
40	Distant metastases except distant lymph node(s) (codes 08-10) Distant metastasis, NOS Carcinomatosis	M1	D	D

Collaborative Staging Manual and Coding Instructions Part II: Primary Site Schema

50	(40) + [(08) or (10)] 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

Colon
CS Mets Eval
SEE STANDARD TABLE

Colon
CS Site-Specific Factor 1 Carcinoembryonic Antigen (CEA)

Code	Description
000	Test not done
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

Colon
CS Site-Specific Factor 2

Code	Description
888	Not applicable for this site

Colon
CS Site-Specific Factor 3

Code	Description
888	Not applicable for this site

Colon
CS Site-Specific Factor 4

Code	Description
888	Not applicable for this site

Collaborative Staging Manual and Coding Instructions Part II: Primary Site Schema

Colon

CS Site-Specific Factor 5

Code	Description
888	Not applicable for this site

Colon

CS Site-Specific Factor 6

Code	Description
888	Not applicable for this site

Page left blank.

Rectosigmoid, Rectum

C19.9, C20.9

C19.9 Rectosigmoid junction

C20.9 Rectum, NOS

CS Tumor Size	CS Site-Specific Factor 1 -	The following tables are available at the collaborative staging website: Histology Exclusion Table AJCC Stage Lymph Nodes Number Positive Table
CS Extension	Carcinoembryonic Antigen (CEA)	
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		

Rectosigmoid, Rectum

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 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

Collaborative Staging Manual and Coding Instructions Part II: Primary Site Schema

Rectosigmoid, Rectum

CS Extension

Note 1: Ignore intraluminal extension to adjacent segment(s) of colon/rectum and 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; non-invasive; 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	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 rectum, NOS	TX	L	L
40	Extension through wall, NOS Invasion through muscularis propria or muscularis, NOS Perimuscular tissue invaded Subserosal tissue/(sub)serosal fat invaded Non-peritonealized pericolic tissues invaded Transmural, NOS	T3	L	L
42	Fat, NOS	T3	RE	RE
45	Adjacent (connective) tissue: For all sites: Perirectal fat For rectosigmoid: Mesentery (including mesenteric fat, mesocolon) Pericolic fat For rectum: Extension to anus Rectovaginal septum	T3	RE	RE
46	Adherent to other organs or structures but no tumor found in adhesion(s)	T3	RE	RE
50	Invasion of/through serosa (mesothelium) (visceral peritoneum)	T4	RE	RE

Collaborative Staging Manual and Coding Instructions Part II: Primary Site Schema

55	(50) with [(42) or (45)]	T4	RE	RE
57	Adherent to other organs or structures, NOS	T4	RE	RE
60	Rectosigmoid: Cul de sac (rectouterine pouch) Pelvic wall Small intestine Rectum: Bladder for males only Cul de sac (rectouterine pouch) Ductus deferens Pelvic wall Prostate Rectovesical fascia for male only Seminal vesicle(s) Skeletal muscle of pelvic floor Vagina	T4	RE	RE
70	Rectosigmoid: Bladder Colon via serosa Fallopian tube(s) Ovary(ies) Prostate Ureter(s) Uterus Rectum: Bladder for female only Bone(s) of pelvis Urethra Uterus	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

Rectosigmoid, Rectum
CS TS/Ext-Eval
SEE STANDARD TABLE

Collaborative Staging Manual and Coding Instructions Part II: Primary Site Schema

Rectosigmoid, Rectum

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: A tumor nodule in the perirectal 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.

Code	Description	TNM	SS77	SS2000
00	None; no regional lymph node involvement	N0	NONE	NONE
10	Regional lymph node(s): Rectosigmoid: Paracolic/pericolic Perirectal Rectal Nodule(s) or foci in pericolic fat/adjacent mesentery/mesocolic fat Rectum: Perirectal Rectal, NOS Nodule(s) or foci in perirectal fat	*	RN	RN
20	Regional lymph node(s): Rectosigmoid: Colic, NOS Left colic Hemorrhoidal, superior or middle Inferior mesenteric Middle rectal Sigmoidal (sigmoid mesenteric) Superior rectal Rectum: Hemorrhoidal, superior, middle or inferior Inferior mesenteric Internal iliac (hypogastric) Obturator Rectal, superior, middle, or inferior Sacral, NOS Lateral (laterosacral) Middle (promontorial) (Gerota's node) Presacral Sacral promotory Sigmoidal (sigmoid mesenteric)	*	RN	RN
30	Mesenteric, NOS 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 Lymph Nodes codes 10-80 ONLY, the N category is assigned based on the value of Reg LN Pos, using the Lymph Nodes Number Positive Table for this site:

**Rectosigmoid, Rectum
CS Reg Nodes Eval
SEE STANDARD TABLE**

**Rectosigmoid, Rectum
Reg LN Pos
SEE STANDARD TABLE**

**Rectosigmoid, Rectum
Reg LN Exam
SEE STANDARD TABLE**

**Rectosigmoid, Rectum
CS Mets at DX**

Code	Description	TNM	SS77	SS2000
00	No; none	M0	NONE	NONE
10	Distant lymph node(s), NOS	M1	D	D
11	Rectosigmoid: Internal iliac (hypogastric) Obturator	M1	RN	D
12	Other distant lymph node(s), including external iliac or common iliac	M1	D	D
40	Distant metastases except distant lymph node(s) codes 10-12 Distant metastasis, NOS Carcinomatosis	M1	D	D
50	(40) + any of [(10) to (12)] 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

**Rectosigmoid, Rectum
CS Mets Eval
SEE STANDARD TABLE**

Rectosigmoid, Rectum

CS Site-Specific Factor 1 Carcinoembryonic Antigen (CEA)

Note: The Site-Specific Factors section includes factors that are needed to derive TNM or AJCC stage and also includes items that are considered important but are not needed for AJCC. This includes prognostic and predictive factors and tumor markers. There are many sites for which there are no Site-Specific Factors required at this time.

Code	Description
000	Test none done
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

Rectosigmoid, Rectum

CS Site-Specific Factor 2

Code	Description
888	Not applicable for this site

Rectosigmoid, Rectum

CS Site-Specific Factor 3

Code	Description
888	Not applicable for this site

Rectosigmoid, Rectum

CS Site-Specific Factor 4

Code	Description
888	Not applicable for this site

Rectosigmoid, Rectum

CS Site-Specific Factor 5

Code	Description
888	Not applicable for this site

Rectosigmoid, Rectum

CS Site-Specific Factor 6

Code	Description
888	Not applicable for this site

Anus

Anal Canal; Anus, NOS; Other Parts of Rectum

C21.0-C21.2, C21.8

C21.0 Anus, NOS (excludes skin of anus and perianal skin C44.5)

C21.1 Anal canal

C21.2 Cloacogenic zone

C21.8 Overlapping lesion of rectum, anus and anal canal

Note: Skin of anus is coded separately (C44.5).

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		

Anus

CS Tumor Size

SEE STANDARD TABLE

Anus

CS Extension

Note: 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
10	Invasive tumor confined to mucosa, NOS (including intramucosal, NOS)	*	L	L
11	Invades lamina propria	*	L	L
12	Invades muscularis mucosae	*	L	L
16	Invades submucosa (superficial invasion)	*	L	L
20	Invades muscularis propria (internal sphincter)	*	L	L
30	Localized, NOS	*	L	L
40	Ischiorectal fat/tissue Perianal skin Perirectal skin Rectal mucosa or submucosa Rectal wall Skeletal muscles: Anal sphincter (external) Levator ani Subcutaneous perianal tissue	*	RE	RE
60	Perineum Vulva	T4	RE	RE

Collaborative Staging Manual and Coding Instructions Part II: Primary Site Schema

70	Bladder Pelvic peritoneum Urethra Vagina	T4	D	D
75	Broad ligament(s) Cervix uteri Corpus uteri Prostate	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 codes 10-40 ONLY, the T category is assigned based on the value of CS Tumor Size, as shown in the Extension Size Table for this site.

Anus

CS TS/Ext-Eval

SEE STANDARD TABLE

Anus

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	No regional lymph node involvement	N0	NONE	NONE
10	Unilateral and bilateral: For all subsites: Anorectal Inferior hemorrhoidal Lateral sacral (laterosacral) Perirectal	N1	RN	RN
20	Unilateral: For anal canal: Internal iliac (hypogastric) Obturator	N2	RN	RN
21	Unilateral: For anus: Internal iliac (hypogastric) Obturator	N2	D	RN
30	Unilateral: For anal canal: Superficial inguinal (femoral)	N2	RN	RN
31	Unilateral: For anus: Superficial inguinal (femoral)	N2	D	RN
40	(20) + (30)	N2	RN	RN

Collaborative Staging Manual and Coding Instructions Part II: Primary Site Schema

41	(10) + (30)	N3	RN	RN
42	(10) + (31)	N3	D	RN
50	Bilateral: For anal canal: Internal iliac (hypogastric) Obturator Superficial inguinal (femoral)	N3	RN	RN
51	Bilateral: For anus: Internal iliac (hypogastric) Obturator Superficial inguinal (femoral)	N3	D	RN
60	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

Anus

CS Reg Nodes Eval

SEE STANDARD TABLE

Anus

Reg LN Pos

SEE STANDARD TABLE

Anus

Reg LN Exam

SEE STANDARD TABLE

Anus

CS Mets at DX

SEE STANDARD TABLE

Anus

CS Mets Eval

SEE STANDARD TABLE

Anus

CS Site-Specific Factor 1

Code	Description
888	Not applicable for this site

Anus

CS Site-Specific Factor 2

Code	Description
888	Not applicable for this site

Anus

CS Site-Specific Factor 3

Code	Description
888	Not applicable for this site

Anus

CS Site-Specific Factor 4

Code	Description
888	Not applicable for this site

Anus

CS Site-Specific Factor 5

Code	Description
888	Not applicable for this site

Anus

CS Site-Specific Factor 6

Code	Description
888	Not applicable for this site

Liver and Intrahepatic Bile Ducts

C22.0-C22.1

C22.0 Liver

C22.1 Intrahepatic bile duct

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	Alpha Fetoprotein (AFP)	
CS TS/Ext-Eval	CS Site-Specific Factor 2 -	
CS Lymph Nodes	Fibrosis Score	
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		

Liver and Intrahepatic Bile Ducts

CS Tumor Size

SEE STANDARD TABLE

Liver and Intrahepatic Bile Ducts

CS Extension

Note 1: In codes 30, 40, and 65, "multiple (satellite) nodules/tumors" includes satellitosis, multifocal tumors, and intrahepatic metastases.

Note 2: Major vascular invasion (code 63) is defined as invasion of the branches of the main portal vein (right or left portal vein, not including sectoral or segmental branches) or as invasion of one or more of the three hepatic veins (right, middle, or left). Invasion of hepatic artery or vein is coded to 66.

Code	Description	TNM	SS77	SS2000
10	Single lesion (one lobe) WITHOUT intrahepatic vascular invasion, including vascular invasion not stated	T1	L	L
20	Single lesion (one lobe) WITH intrahepatic vascular invasion	T2	L	L
30	Multiple (satellite) nodules/tumors (one lobe) WITHOUT intrahepatic vascular invasion, including vascular invasion not stated	*	L	L
40	Multiple (satellite) nodules/tumors (one lobe) WITH intrahepatic vascular invasion	*	L	L
50	Confined to liver, NOS Localized, NOS	T1	L	L
51	More than one lobe involved by contiguous growth (single lesion) WITHOUT vascular invasion, including vascular invasion not stated	T1	RE	RE
52	More than one lobe involved by contiguous growth (single lesion) WITH vascular invasion	T2	RE	RE
53	Extension to gallbladder, extent within liver not stated	T1	RE	RE
54	Single lesion with extension to gallbladder + [(10) or (51)]	T1	RE	RE
55	Single lesion with extension to gallbladder + [(20) or (52)]	T2	RE	RE

Collaborative Staging Manual and Coding Instructions Part II: Primary Site Schema

56	Extension to gallbladder + [(30) or (40)]	*	RE	RE
58	Extrahepatic bile ducts	T2	RE	RE
63	Major vascular invasion: major branch(es) of portal or hepatic vein(s) (see Note 2)	T3	RE	RE
64	Direct extension/perforation of visceral peritoneum	T4	RE	RE
65	Multiple (satellite) nodules/tumors in more than one lobe of liver or on surface of parenchyma Satellite nodules, NOS	*	D	RE
66	Extension to hepatic artery or vena cava	T4	RE	RE
70	Diaphragm	T4	RE	RE
75	Lesser omentum Ligament(s): Coronary Falciform Round [of liver] Hepatoduodenal Hepatogastric Triangular Parietal peritoneum	T4	RE	RE
76	(65) + any of [(64) or (66) or (70) or (75)]	T4	D	RE
80	Further contiguous extension: Pancreas Pleura Stomach Other 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 30, 40, 56, 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.

Liver and Intrahepatic Bile Ducts

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

Collaborative Staging Manual and Coding Instructions Part II: Primary Site Schema

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

Liver and Intrahepatic Bile Ducts

CS Lymph Nodes

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

Code	Description	TNM	SS77	SS2000
00	None; no regional lymph node involvement	N0	NONE	NONE
10	Regional lymph node(s): Hepatic NOS: Hepatic artery Hepatic pedicle Inferior vena cava Porta hepatis (hilar) [in hilus of liver] Hepatoduodenal ligament Periportal Portal vein 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

Liver and Intrahepatic Bile Ducts

CS Reg Nodes Eval

SEE STANDARD TABLE

Liver and Intrahepatic Bile Ducts

Reg LN Pos

SEE STANDARD TABLE

Liver and Intrahepatic Bile Ducts

Reg LN Exam

SEE STANDARD TABLE

Liver and Intrahepatic Bile Ducts

CS Mets at DX

Code	Description	TNM	SS77	SS2000
00	No; none	M0	NONE	NONE
10	Distant lymph node(s), NOS	M1	D	D
11	Distant lymph node(s): Cardiac Lateral (aortic) (lumbar) Pericardial (pericardiac) Posterior mediastinal (tracheoesophageal) including juxtaphrenic nodes Retroperitoneal, NOS	M1	RN	D
12	Distant lymph node(s): Coronary artery Renal artery	M1	RN	D
13	Distant lymph node(s): Aortic (para-, peri-) Diaphragmatic, NOS Peripancreatic (near head of pancreas only)	M1	D	D
15	Distant lymph node(s) other than codes 10-13, including inferior phrenic nodes	M1	D	D
40	Distant metastasis except distant lymph node(s) (codes 10-15) Distant metastasis, NOS Carcinomatosis	M1	D	D
50	(40) + any of [(10) or (11) or (15)] Distant lymph node(s) plus other distant metastases	M1	D	D
52	(40) + [(12) or (13)] Distant lymph node(s) plus other distant metastases	M1	D	D
99	Unknown if distant metastasis Primary tumor cannot be assessed Not documented in patient record	MX	U	U

Liver and Intrahepatic Bile Ducts

CS Mets Eval

SEE STANDARD TABLE

Liver and Intrahepatic Bile Ducts

CS Site-Specific Factor 1 Alpha Fetoprotein (AFP)

Code	Description
000	Test not done
010	Positive/elevated
020	Negative/normal; within normal limits
030	Borderline; undetermined whether positive or negative

Collaborative Staging Manual and Coding Instructions Part II: Primary Site Schema

080	Ordered, but results not in chart
999	Unknown or no information Not documented in patient record

Liver and Intrahepatic Bile Ducts

CS Site-Specific Factor 2 Fibrosis Score

Note: AJCC classifies fibrosis scores 0-4 (none to moderate fibrosis) as F0, and fibrosis scores 5-6 (severe fibrosis or cirrhosis) as F1. Fibrosis score is also called Ishak score.

Code	Description
000	F0: Fibrosis score 0-4 (none to moderate fibrosis)
001	F1: Fibrosis score 5-6 (severe fibrosis or cirrhosis)
999	Fibrosis score not recorded Insufficient information Not documented in patient record

Liver and Intrahepatic Bile Ducts

CS Site-Specific Factor 3

Code	Description
888	Not applicable for this site

Liver and Intrahepatic Bile Ducts

CS Site-Specific Factor 4

Code	Description
888	Not applicable for this site

Liver and Intrahepatic Bile Ducts

CS Site-Specific Factor 5

Code	Description
888	Not applicable for this site

Liver and Intrahepatic Bile Ducts

CS Site-Specific Factor 6

Code	Description
888	Not applicable for this site

Page left blank.

Gallbladder

C23.9

C23.9 Gallbladder

CS Tumor Size	CS Site-Specific Factor 1	<p>The following tables are available at the collaborative staging website: Histology Exclusion Table AJCC Stage</p>
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		

Gallbladder

CS Tumor Size

SEE STANDARD TABLE

Gallbladder

CS Extension

Code	Description	TNM	SS77	SS2000
00	In situ; non-invasive; intraepithelial	Tis	IS	IS
10	Invasive tumor confined to: Lamina propria Mucosa, NOS Submucosa (superficial invasion)	T1a	L	L
20	Muscularis propria	T1b	L	L
30	Localized, NOS	T1NOS	L	L
40	Perimuscular connective tissue	T2	RE	RE
50	Invasion of/through serosa (visceral peritoneum)	T3	L	RE
55	(40) + (50)	T3	RE	RE
60	Extension into liver, NOS	T3	RE	RE
61	Extension into liver less than or equal to 2 cm	T3	RE	RE
62	Extension to ONE of the following: Ampulla of Vater Duodenum Extrahepatic bile duct(s) Omentum, NOS Greater Lesser Pancreas Small intestine, NOS	T3	RE	RE
65	Extension to ONE of the following WITHOUT extension to any structure in (62): Colon Stomach	T3	RE	RE

Collaborative Staging Manual and Coding Instructions Part II: Primary Site Schema

66	Extension to cystic artery/vein WITHOUT extension to any structure in [(62) to (65)]	T3	RE	D
67	[(60) or (61)] PLUS extension to ONE structure in codes [(62) to (65)]	T3	RE	RE
68	(66) + [(60) or (61)]	T3	RE	D
71	Extension into liver greater than 2 cm WITHOUT extension to any structure in codes [(62) to (66)]	T3	D	D
72	Extension into liver greater than 2 cm PLUS extension to ONE structure in codes [(62) to (66)]	T3	D	D
73	Extension to two or more structures in codes [(62) to (66)], WITH or WITHOUT extension into liver of any depth	T4	D	D
75	Extension to: Hepatic artery Portal vein	T4	RE	D
78	(75) + any of [(60) to (73)]	T4	D	D
80	Further contiguous extension, including: Abdominal wall Diaphragm	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

Gallbladder

CS TS/Ext-Eval

SEE STANDARD TABLE

Gallbladder

CS Lymph Nodes

Note: Code only regional nodes and nodes, NOS, in this field. Distant nodes are coded in the field Mets at DX. Also note that celiac and superior mesenteric nodes are listed in this field rather than Mets at DX, because AJCC classifies them as N1 and not M1.

Code	Description	TNM	SS77	SS2000
00	None; no regional lymph node involvement	N0	NONE	NONE
10	Regional lymph node(s): Cystic duct (Calot's node) Node of foramen of Winslow (omental) (epiploic) Pericholedochal (common bile duct)	N1	RN	RN
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

Collaborative Staging Manual and Coding Instructions Part II: Primary Site Schema

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	D
60	Superior mesenteric lymph node(s)	N1	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

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

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

Extrahepatic Bile Duct(s)

C24.0

C24.0 Extrahepatic bile duct

CS Tumor Size	CS Site-Specific Factor 1	<p>The following tables are available at the collaborative staging website: Histology Exclusion Table AJCC Stage</p>
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		

Extrahepatic Bile Duct(s)

CS Tumor Size

SEE STANDARD TABLE

Extrahepatic Bile Duct(s)

CS Extension

Code	Description	TNM	SS77	SS2000
00	In situ; non-invasive; intraepithelial	Tis	IS	IS
10	Invasive tumor of extrahepatic bile duct(s) (choledochal, common, cystic, and hepatic) confined to: Lamina propria Mucosa, NOS Submucosa (superficial invasion)	T1	L	L
20	Muscularis propria	T1	L	L
30	Localized, NOS	T1	L	L
40	Beyond wall of bile duct Periductal/fibromuscular connective tissue	T2	RE	RE
60	Gallbladder Liver, porta hepatis Pancreas	T3	RE	RE
61	Unilateral branches of hepatic artery (right or left) Unilateral branches of portal vein (right or left)	T3	RE	RE
65	Colon, NOS Transverse including flexure Duodenum, NOS Omentum, NOS Lesser Stomach, distal	T4	RE	RE
66	Common hepatic artery Hepatic artery, NOS Main main portal vein or its branches bilaterally Portal vein, NOS	T4	RE	RE

Collaborative Staging Manual and Coding Instructions Part II: Primary Site Schema

70	Other parts of colon Greater omentum Stomach, proximal	T4	D	RE
75	Abdominal wall	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

Extrahepatic Bile Duct(s)
CS TS/Ext-Eval
SEE STANDARD TABLE

Extrahepatic Bile Duct(s)
CS Lymph Nodes

Note: Code only regional nodes and nodes, NOS, in this field.

Code	Description	TNM	SS77	SS2000
00	No regional lymph node involvement	N0	NONE	NONE
15	Regional lymph node(s): Cystic duct (node of the neck of the gallbladder) (Calot's node) Hepatic Hilar (in the hepatoduodenal ligament) Node of the foramen of Winslow (omental) (epiploic) Pancreaticoduodenal Pericholedochal (node around common bile duct) Periduodenal Peripancreatic (near head of pancreas only) Periportal Porta hepatis (portal) (hilar) (in hilus of liver) Regional lymph node(s), NOS	N1	RN	RN
35	Regional lymph node(s): Celiac Superior mesenteric	N1	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

Extrahepatic Bile Duct(s)
CS Reg Nodes Eval
SEE STANDARD TABLE

Extrahepatic Bile Duct(s)
Reg LN Pos
SEE STANDARD TABLE

**Extrahepatic Bile Duct(s)
Reg LN Exam
SEE STANDARD TABLE**

**Extrahepatic Bile Duct(s)
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 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 patientrecord	MX	U	U

**Extrahepatic Bile Duct(s)
CS Mets Eval
SEE STANDARD TABLE**

**Extrahepatic Bile Duct(s)
CS Site-Specific Factor 1**

Code	Description
888	Not applicable for this site

**Extrahepatic Bile Duct(s)
CS Site-Specific Factor 2**

Code	Description
888	Not applicable for this site

**Extrahepatic Bile Duct(s)
CS Site-Specific Factor 3**

Code	Description
888	Not applicable for this site

**Extrahepatic Bile Duct(s)
CS Site-Specific Factor 4**

Code	Description
888	Not applicable for this site

**Extrahepatic Bile Duct(s)
CS Site-Specific Factor 5**

Code	Description
888	Not applicable for this site

**Extrahepatic Bile Duct(s)
CS Site-Specific Factor 6**

Code	Description
888	Not applicable for this site

Ampulla of Vater

C24.1

C24.1 Ampulla of Vater

CS Tumor Size	CS Site-Specific Factor 1	<p>The following tables are available at the collaborative staging website: Histology Exclusion Table AJCC Stage</p>
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		

Ampulla of Vater

CS Tumor Size

SEE STANDARD TABLE

Ampulla of Vater

CS Extension

Code	Description	TNM	SS77	SS2000
00	In situ; non-invasive; intraepithelial	Tis	IS	IS
10	Invasive tumor confined/limited to ampulla of Vater or extending to sphincter of Oddi	T1	L	L
30	Localized, NOS	T1	L	L
42	Duodenal wall	T2	RE	RE
52	Pancreas	T3	RE	RE
62	Common bile duct	T4	RE	RE
65	Extrahepatic bile ducts other than common bile duct or sphincter of Oddi	T4	RE	RE
70	Extension to other adjacent organs or tissues: Blood vessels(major): Hepatic artery Portal vein Gallbladder Hepatic flexure Lesser omentum Liver including porta hepatis Peripancreatic soft tissues Stomach, NOS: Distal Transverse colon	T4	RE	RE
75	Stomach, proximal	T4	RE	D
80	Further contiguous extension Other adjacent organs	T4	D	D

Collaborative Staging Manual and Coding Instructions Part II: Primary Site Schema

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

Ampulla of Vater

CS TS/Ext-Eval

SEE STANDARD TABLE

Ampulla of Vater

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: Splenic lymph nodes and those located at the tail of the pancreas are not considered regional and should be coded under Mets at DX.

Code	Description	TNM	SS77	SS2000
00	No regional lymph node involvement	N0	NONE	NONE
10	Regional lymph node(s): Hepatic Hepatic artery Node of the foramen of Winslow (epiploic) (omental) Pancreaticoduodenal Peripancreatic (except at tail of pancreas, see CS Mets at DX) Periportal Lymph node(s): Anterior to the ampulla of Vater Inferior to the ampulla of Vater Posterior to the ampulla of Vater Superior to the ampulla of Vater Regional lymph node(s), NOS	N1	RN	RN
11	Regional lymph node(s): Celiac Infrapyloric (subpyloric) Lateral aortic (lumbar) Proximal mesenteric Retroperitoneal 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

Ampulla of Vater

CS Reg Nodes Eval

SEE STANDARD TABLE

Ampulla of Vater

Reg LN Pos

SEE STANDARD TABLE

Ampulla of Vater

Reg LN Exam

SEE STANDARD TABLE

Ampulla of Vater

CS Mets at DX

Code	Description	TNM	SS77	SS2000
00	No; none	M0	NONE	NONE
10	Distant lymph node(s) Node(s) at the tail of the pancreas Para-aortic Splenic lymph node(s) Distant lymph node(s), NOS	M1	D	D
40	Distant metastases except distant lymph node(s) (code 10) Carcinomatosis Distant metastasis, NOS (Includes seeding of peritoneum, even if limited to the lesser sac region; positive peritoneal cytology)	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

Ampulla of Vater

CS Mets Eval

SEE STANDARD TABLE

Ampulla of Vater

CS Site-Specific Factor 1

Code	Description
888	Not applicable for this site

Ampulla of Vater

CS Site-Specific Factor 2

Code	Description
888	Not applicable for this site

Ampulla of Vater

CS Site-Specific Factor 3

Code	Description
888	Not applicable for this site

Ampulla of Vater

CS Site-Specific Factor 4

Code	Description
888	Not applicable for this site

Ampulla of Vater

CS Site-Specific Factor 5

Code	Description
888	Not applicable for this site

Ampulla of Vater

CS Site-Specific Factor 6

Code	Description
888	Not applicable for this site

Other Biliary and Biliary, NOS

C24.8-C24.9

C24.8 Overlapping lesion of biliary tract (neoplasms involving both intrahepatic and extrahepatic bile ducts)

C24.9 Biliary tract, NOS

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		

Other Biliary and Biliary, NOS

CS Tumor Size

SEE STANDARD TABLE

Other Biliary and Biliary, NOS

CS Extension

Code	Description	TNM	SS77	SS2000
00	In situ; non-invasive; intraepithelial	Tis	IS	IS
10	Invasive tumor confined to: Lamina propria Mucosa, NOS Submucosa (superficial invasion)	T1	L	L
20	Muscularis propria	T1	L	L
30	Localized, NOS Tumor confined to bile duct	T1	L	L
40	Perimuscular connective tissue Tumor invades beyond the wall of the bile duct	T2	RE	RE
50	Invasion of/through serosa	T2	L	RE
55	(40) + (50)	T2	RE	RE
60	Extension into liver, NOS	T3	RE	RE
61	Extension into liver less than or equal to 2 cm	T3	RE	RE
62	Extension to ONE of the following: Ampulla of Vater Omentum, NOS Greater Lesser Pancreas Small intestine, NOS	T3	RE	RE
63	Gallbladder Unilateral branches of the right or left portal vein Unilateral branches of the right or left hepatic artery	T3	RE	RE

Collaborative Staging Manual and Coding Instructions Part II: Primary Site Schema

65	Extension to ONE of the following: Colon Stomach	T4	D	D
66	Abdominal wall Duodenum	T4	RE	RE
70	Extension into liver greater than 2 cm Extension to two or more adjacent organs listed in codes [(60) to (63)]	T3	D	D
71	Extension to two or more adjacent organs any of which are in codes [(65) to (66)]	T4	D	D
75	Common hepatic artery Cystic artery/vein Hepatic artery, NOS Portal vein or its branches bilaterally Portal vein, NOS	T4	RE	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

Other Biliary and Biliary, NOS

CS TS/Ext-Eval

SEE STANDARD TABLE

Other Biliary and Biliary, NOS

CS Lymph Nodes

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

Code	Description	TNM	SS77	SS2000
00	None; no regional lymph node involvement	N0	NONE	NONE
10	Regional lymph node(s): Cystic duct (Calot's node) Node of foramen of Winslow (epiploic) (omental) Pericholedochal (common bile duct)	N1	RN	RN
11	Regional lymph node(s): Porta hepatis (portal) (hilar) [in hilus of liver]	N1	D	RN
20	Regional lymph node(s): Pancreaticoduodenal Periportal	N1	RN	RN
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	D

Collaborative Staging Manual and Coding Instructions Part II: Primary Site Schema

60	Superior mesenteric	N1	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

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 Manual and Coding Instructions Part II: Primary Site Schema

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 artery Transverse colon, including hepatic flexure	T3	RE	RE
55	Mesenteric fat Mesentery Mesocolon Peritoneum	T3	RE	D

Collaborative Staging Manual and Coding Instructions Part II: Primary Site Schema

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

Pancreas: Head

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	No regional lymph node involvement	N0	NONE	NONE
10	Regional lymph node(s): Celiac	N1	RN	RN

Collaborative Staging Manual and Coding Instructions Part II: Primary Site Schema

10, cont'd	Gastroepiploic (gastro-omental), left Hepatic Infrapyloric (subpyloric) Lateral aortic (lumbar) Peripancreatic, NOS: Anterior, NOS: Anterior pancreaticoduodenal Anterior proximal mesenteric Pyloric Inferior to the head and body of pancreas Posterior, NOS: Pericholedochal (common bile duct) Posterior pancreaticoduodenal Posterior proximal mesentery Superior to the head and body of pancreas Retroperitoneal Superior mesenteric Regional lymph node(s), NOS			
20	Pancreaticosplenic (pancreaticolienal) Splenic (lienal), NOS Superior hilum Suprapancreatic	N1	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

Pancreas: Head
CS Reg Nodes Eval
SEE STANDARD TABLE

Pancreas: Head
Reg LN Pos
SEE STANDARD TABLE

Pancreas: Head
Reg LN Exam
SEE STANDARD TABLE

Pancreas: Head
CS Mets at DX

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 (includes seeding of peritoneum, even if limited to the lesser sac region; positive peritoneal cytology) Carcinomatosis	M1	D	D

Collaborative Staging Manual and Coding Instructions Part II: Primary Site Schema

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

Pancreas: Head

CS Mets Eval

SEE STANDARD TABLE

Pancreas: Head

CS Site-Specific Factor 1

Code	Description
888	Not applicable for this site

Pancreas: Head

CS Site-Specific Factor 2

Code	Description
888	Not applicable for this site

Pancreas: Head

CS Site-Specific Factor 3

Code	Description
888	Not applicable for this site

Pancreas: Head

CS Site-Specific Factor 4

Code	Description
888	Not applicable for this site

Pancreas: Head

CS Site-Specific Factor 5

Code	Description
888	Not applicable for this site

Pancreas: Head

CS Site-Specific Factor 6

Code	Description
888	Not applicable for this site

Pancreas: Body and Tail

C25.1-C25.2

C25.1 Body of pancreas

C25.2 Tail of pancreas

Note: For tumors of the islet cells, determine which subsite of the pancreas is involved and use that primary site code and corresponding the 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: Body and Tail

CS Tumor Size

SEE STANDARD TABLE

Pancreas: Body and Tail

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	Duodenum	T3	RE	RE
48	Ampulla of Vater Extrahepatic bile duct(s)	T3	RE	RE
50	Spleen	T3	RE	RE
56	Blood vessel(s): Hepatic artery Portal vein Splenic artery/vein Superior mesenteric vein Splenic flexure of colon	T3	RE	RE
57	Kidney, NOS Left adrenal (suprarenal) gland Left kidney Left ureter	T3	RE	D

Collaborative Staging Manual and Coding Instructions Part II: Primary Site Schema

58	Mesenteric fat Mesentery Mesocolon Peritoneum	T3	RE	D
59	Retroperitoneal soft tissue (retroperitoneal space)	T3	D	D
60	Tumor is inseparable from the celiac axis or superior mesenteric artery Aorta Celiac artery Superior mesenteric artery	T4	RE	RE
62	Stomach	T4	RE	RE
70	[(60) or (62)] + [(57) or (58)]	T4	RE	D
71	Ileum Jejunum	T4	RE	D
73	Gallbladder Liver (including porta hepatis)	T4	RE	D
75	(59) + any of [(60) or (62) or (71) or (73)]	T4	D	D
77	Colon (other than splenic flexure)	T4	D	D
78	Diaphragm Right adrenal (suprarenal) gland Right kidney Right 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: Body and Tail

CS TS/Ext-Eval

SEE STANDARD TABLE

Pancreas: Body and Tail

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	No regional lymph node involvement	N0	NONE	NONE
10	Regional lymph node(s): Hepatic Lateral aortic (lumbar) Pancreaticosplenic (pancreaticolienal)	N1	RN	RN

Collaborative Staging Manual and Coding Instructions Part II: Primary Site Schema

10, cont'd	Peripancreatic, NOS: Anterior, NOS: Anterior pancreaticoduodenal Anterior proximal mesenteric Pyloric Inferior to the head and body of pancreas Posterior, NOS: Pericholedochal (common bile duct) Posterior pancreaticoduodenal Posterior proximal mesentery Superior to the head and body of pancreas Retroperitoneal Splenic (lienal) Gastroepiploic Splenic hilum Suprapancreatic Superior mesenteric Regional lymph node(s), NOS			
20	Regional lymph node(s): Celiac Infrapyloric (subpyloric)	N1	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

Pancreas: Body and Tail
CS Reg Nodes Eval
SEE STANDARD TABLE

Pancreas: Body and Tail
Reg LN Pos
SEE STANDARD TABLE

Pancreas: Body and Tail
Reg LN Exam
SEE STANDARD TABLE

Pancreas: Body and Tail
CS Mets at DX

Code	Description	TNM	SS77	SS2000
00	No; none	M0	NONE	NONE
10	Distant lymph node(s) Distant lymph node(s), NOS	M1	D	D
40	Distant metastases except distant lymph node(s) (code 10) Distant metastasis, NOS (includes seeding of peritoneum, even if limited to the lesser sac region; positive peritoneal cytology) Carcinomatosis	M1	D	D

Collaborative Staging Manual and Coding Instructions Part II: Primary Site Schema

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

**Pancreas: Body and Tail
CS Mets Eval
SEE STANDARD TABLE**

**Pancreas: Body and Tail
CS Site-Specific Factor 1**

Code	Description
888	Not applicable for this site

**Pancreas: Body and Tail
CS Site-Specific Factor 2**

Code	Description
888	Not applicable for this site

**Pancreas: Body and Tail
CS Site-Specific Factor 3**

Code	Description
888	Not applicable for this site

**Pancreas: Body and Tail
CS Site-Specific Factor 4**

Code	Description
888	Not applicable for this site

**Pancreas: Body and Tail
CS Site-Specific Factor 5**

Code	Description
888	Not applicable for this site

**Pancreas: Body and Tail
CS Site-Specific Factor 6**

Code	Description
888	Not applicable for this site

Pancreas: Other and Unspecified

C25.3-C25.4, C25.7-C25.9

C25.3 Pancreatic duct

C25.4 Islets of Langerhans

C25.7 Other specified parts of pancreas

C25.8 Overlapping lesion of pancreas

C25.9 Pancreas, NOS

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: Other and Unspecified

CS Tumor Size

SEE STANDARD TABLE

Pancreas: Other and Unspecified

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	Peripancreatic tissue	T3	RE	RE
45	Ampulla of Vater Duodenum Extra hepatic bile duct(s)	T3	RE	RE
50	Adjacent large vessel(s) (except as listed in code 60) Colon Spleen Stomach	T3	RE	RE
60	Tumor is inseparable from the celiac axis or superior mesenteric artery Aorta Celiac artery Superior mesenteric artery	T4	RE	RE

Collaborative Staging Manual and Coding Instructions Part II: Primary Site Schema

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: Other and Unspecified

CS TS/Ext-Eval

SEE STANDARD TABLE

Pancreas: Other and Unspecified

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	No regional lymph node involvement	N0	NONE	NONE
10	Regional lymph node(s): Celiac Hepatic Infrapyloric (subpyloric) Lateral aortic (lumbar) Pancreaticosplenic (pancreaticolienal) Peripancreatic, NOS: Anterior, NOS: Anterior pancreaticoduodenal Anterior proximal mesenteric Pyloric Inferior to the head and body of pancreas Posterior, NOS: Pericholedochal (common bile duct) Posterior pancreaticoduodenal Posterior proximal mesentery Superior to the head and body of pancreas Retroperitoneal Splenic (lienal), NOS Gastroepiploic (gastro-omental), left Splenic hilum Suprapancreatic Superior mesenteric 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

Pancreas: Other and Unspecified

CS Reg Nodes Eval

SEE STANDARD TABLE

Pancreas: Other and Unspecified

Reg LN Pos

SEE STANDARD TABLE

Pancreas: Other and Unspecified

Reg LN Exam

SEE STANDARD TABLE

Pancreas: Other and Unspecified

CS Mets at DX

Code	Description	TNM	SS77	SS2000
00	No; none	M0	NONE	NONE
10	Distant lymph node(s) Distant lymph node(s), NOS	M1	D	D
40	Distant metastases except distant lymph node(s) (code 10) Distant metastasis, NOS (includes seeding of peritoneum, even if limited to the lesser sac region; positive peritoneal cytology) 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

Pancreas: Other and Unspecified

CS Mets Eval

SEE STANDARD TABLE

Pancreas: Other and Unspecified

CS Site-Specific Factor 1

Code	Description
888	Not applicable for this site

Pancreas: Other and Unspecified

CS Site-Specific Factor 2

Code	Description
888	Not applicable for this site

Pancreas: Other and Unspecified

CS Site-Specific Factor 3

Code	Description
888	Not applicable for this site

**Pancreas: Other and Unspecified
CS Site-Specific Factor 4**

Code	Description
888	Not applicable for this site

**Pancreas: Other and Unspecified
CS Site-Specific Factor 5**

Code	Description
888	Not applicable for this site

**Pancreas: Other and Unspecified
CS Site-Specific Factor 6**

Code	Description
888	Not applicable for this site

Other and Ill-Defined Digestive Organs

C26.0, C26.8-C26.9

C26.0 Intestinal tract, NOS

C26.8 Overlapping lesion of digestive system

C26.9 Gastrointestinal tract, NOS

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

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

Other and Ill-Defined Digestive Organs

CS Tumor Size

SEE STANDARD TABLE

Other and Ill-Defined Digestive Organs

CS Extension

Note 1: Definition of Adjacent Connective Tissue: Some of the schemes for ill-defined or non-specific sites in this manual contain a code 40, adjacent connective tissue, which is defined here as the unnamed tissues that immediately surround an organ or structure containing a primary cancer. Use this code when a tumor has invaded past the outer border (capsule, serosa, or other edge) of the primary organ into the organ's surrounding supportive structures but has not invaded into larger structures or adjacent organs.

Note 2: 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 60 in the schemes for ill-defined or non-specific sites.

Code	Description	TNM	SS77	SS2000
00	In situ; non-invasive; intraepithelial	NA	IS	IS
10	Invasion of submucosa	NA	L	L
30	Localized, NOS	NA	L	L
40	Adjacent connective tissue (see Note 1)	NA	RE	RE
60	Adjacent organs/structures (see Note 2)	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

Other and Ill-Defined Digestive Organs

CS TS/Ext-Eval

Code	Description	Staging Basis
9	Not applicable for this site	NA

Other and Ill-Defined Digestive Organs

CS Lymph Nodes

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

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

Other and Ill-Defined Digestive Organs

CS Reg Nodes Eval

Code	Description	Staging Basis
9	Not applicable for this site	NA

Other and Ill-Defined Digestive Organs

Reg LN Pos

SEE STANDARD TABLE

Other and Ill-Defined Digestive Organs

Reg LN Exam

SEE STANDARD TABLE

Other and Ill-Defined Digestive Organs

CS Mets at DX

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

Other and Ill-Defined Digestive Organs

CS Mets Eval

Code	Description	Staging Basis
9	Not applicable for this site	NA

Other and Ill-Defined Digestive Organs

CS Site-Specific Factor 1

Code	Description
888	Not applicable for this site

Other and Ill-Defined Digestive Organs

CS Site-Specific Factor 2

Code	Description
888	Not applicable for this site

Other and Ill-Defined Digestive Organs

CS Site-Specific Factor 3

Code	Description
888	Not applicable for this site

Other and Ill-Defined Digestive Organs

CS Site-Specific Factor 4

Code	Description
888	Not applicable for this site

**Other and Ill-Defined Digestive Organs
CS Site-Specific Factor 5**

Code	Description
888	Not applicable for this site

**Other and Ill-Defined Digestive Organs
CS Site-Specific Factor 6**

Code	Description
888	Not applicable for this site

Collaborative Staging Manual and Coding Instructions Part II: Primary Site Schema

Nasal Cavity

C30.0

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

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

<p>CS Tumor Size CS Extension CS TS/Ext-Eval CS Lymph Nodes CS Reg Nodes Eval Reg LN Pos Reg LN Exam CS Mets at DX CS Mets Eval</p>	<p>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>
---	---	---

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
66	Maxillary sinus	T3	RE	RE

Collaborative Staging Manual and Coding Instructions Part II: Primary Site Schema

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

Nasal Cavity

CS TS/Ext-Eval

SEE STANDARD TABLE

Nasal Cavity

CS Lymph Nodes

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

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

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

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 Cervical, NOS Deep cervical, NOS Internal jugular, NOS Mandibular, NOS Retropharyngeal Regional lymph node, NOS	*	RN	RN

Collaborative Staging Manual and Coding Instructions Part II: Primary Site Schema

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 	*	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
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

Collaborative Staging Manual and Coding Instructions Part II: Primary Site Schema

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

Collaborative Staging Manual and Coding Instructions Part II: Primary Site Schema

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

Collaborative Staging Manual and Coding Instructions Part II: Primary Site Schema

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

Nasal Cavity

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

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

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

Nasal Cavity

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

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

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

Nasal Cavity

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

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

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

Collaborative Staging Manual and Coding Instructions Part II: Primary Site Schema

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

Middle Ear

C30.1

C30.1 Middle ear

Note 1: Laterality must be coded for this site.

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

CS Tumor Size CS Extension CS TS/Ext-Eval CS Lymph Nodes CS Reg Nodes Eval Reg LN Pos Reg LN Exam CS Mets at DX CS Mets Eval	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
--	--	--

Middle Ear

CS Tumor Size

SEE STANDARD TABLE

Middle Ear

CS Extension

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

Collaborative Staging Manual and Coding Instructions Part II: Primary Site Schema

60, cont'd	Mastoid antrum Nasopharynx Temporal bone			
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.

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
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	NA	D	D

Collaborative Staging Manual and Coding Instructions Part II: Primary Site Schema

12, cont'd	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			
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

Middle Ear

CS Reg Nodes Eval

Code	Description	Staging Basis
9	Not applicable for this site	NA

Middle Ear

Reg LN Pos

SEE STANDARD TABLE

Middle Ear

Reg LN Exam

SEE STANDARD TABLE

Middle Ear

CS Mets at DX

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

Collaborative Staging Manual and Coding Instructions Part II: Primary Site Schema

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

**Middle Ear
CS Mets Eval**

Code	Description	Staging Basis
9	Not applicable for this site	NA

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

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

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

Middle Ear

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

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

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

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

Middle Ear

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

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

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

Middle Ear

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

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

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

Middle Ear

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

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

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

Collaborative Staging Manual and Coding Instructions Part II: Primary Site Schema

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

Middle Ear

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

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

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

Page left blank.

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>
---	---	---

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
65	Bone of the posterior wall of maxillary sinus Invasion of maxilla, NOS	T3	RE	RE

Collaborative Staging Manual and Coding Instructions Part II: Primary Site Schema

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.

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

Collaborative Staging Manual and Coding Instructions Part II: Primary Site Schema

10, cont'd	<p>Level III node Middle deep cervical Mid jugular Level IV node Jugulo-omohyoid (supramohyoid) Lower deep cervical Lower jugular Cervical, NOS Deep cervical, NOS Internal jugular, NOS Mandibular, NOS Regional lymph node, NOS</p>			
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 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</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
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
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

Collaborative Staging Manual and Coding Instructions Part II: Primary Site Schema

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

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

Maxillary Sinus
CS Reg Nodes Eval
SEE STANDARD TABLE

Maxillary Sinus
Reg LN Pos
SEE STANDARD TABLE

Maxillary Sinus
Reg LN Exam
SEE STANDARD TABLE

Maxillary Sinus
CS Mets at DX
SEE STANDARD TABLE

Maxillary Sinus
CS Mets Eval
SEE STANDARD TABLE

Maxillary Sinus

CS Site-Specific Factor 1 Size of Lymph Nodes

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

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

Maxillary Sinus

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

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

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

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

Maxillary Sinus

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

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

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

Maxillary Sinus

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

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

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

Collaborative Staging Manual and Coding Instructions Part II: Primary Site Schema

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

Maxillary Sinus

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

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

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

Maxillary Sinus

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

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

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

Collaborative Staging Manual and Coding Instructions Part II: Primary Site Schema

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

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>
---	---	---

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

Collaborative Staging Manual and Coding Instructions Part II: Primary Site Schema

65	Maxillary sinus	T3	RE	RE
66	Cribiform 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.

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	*	RN	RN

Collaborative Staging Manual and Coding Instructions Part II: Primary Site Schema

<p>10, cont'd</p>	<p>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</p>			
<p>12</p>	<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 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</p>	<p>*</p>	<p>D</p>	<p>D</p>
<p>18</p>	<p>Stated as N1, no other information</p>	<p>N1</p>	<p>RN</p>	<p>RN</p>
<p>19</p>	<p>Stated as N2a, no other information</p>	<p>N2a</p>	<p>RN</p>	<p>RN</p>
<p>20</p>	<p>Multiple positive ipsilateral nodes listed in code 10</p>	<p>*</p>	<p>RN</p>	<p>RN</p>
<p>22</p>	<p>Multiple positive ipsilateral nodes listed in code 12</p>	<p>*</p>	<p>D</p>	<p>D</p>
<p>29</p>	<p>Stated as N2b, no other information</p>	<p>N2b</p>	<p>RN</p>	<p>RN</p>
<p>30</p>	<p>Regional lymph nodes as listed in code 10: Positive ipsilateral nodes(s), not stated if single or multiple or regional</p>	<p>*</p>	<p>RN</p>	<p>RN</p>
<p>32</p>	<p>Regional lymph nodes as listed in code 12: Positive ipsilateral node(s), not stated if single or multiple</p>	<p>*</p>	<p>D</p>	<p>D</p>
<p>40</p>	<p>Regional lymph nodes as listed in code 10: Positive bilateral or contralateral nodes</p>	<p>*</p>	<p>RN</p>	<p>RN</p>

Collaborative Staging Manual and Coding Instructions Part II: Primary Site Schema

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

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

Ethmoid Sinus
CS Reg Nodes Eval
SEE STANDARD TABLE

Ethmoid Sinus
Reg LN Pos
SEE STANDARD TABLE

Ethmoid Sinus
Reg LN Exam
SEE STANDARD TABLE

Ethmoid Sinus
CS Mets at DX
SEE STANDARD TABLE

Ethmoid Sinus
CS Mets Eval
SEE STANDARD TABLE

Ethmoid Sinus

CS Site-Specific Factor 1 Size of Lymph Nodes

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

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

Ethmoid Sinus

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

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

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

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

Ethmoid Sinus

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

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

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

Ethmoid Sinus

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

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

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

Collaborative Staging Manual and Coding Instructions Part II: Primary Site Schema

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

Ethmoid Sinus

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

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

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

Ethmoid Sinus

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

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

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

Collaborative Staging Manual and Coding Instructions Part II: Primary Site Schema

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

Accessory (Paranasal) Sinuses

C31.2-C31.3, C31.8-C31.9

C31.2 Frontal sinus

C31.3 Sphenoid sinus

C31.8 Overlapping lesion of accessor 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
--	--	--

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
60	Bone: Facial bones Maxilla Orbital structures	NA	RE	RE

Collaborative Staging Manual and Coding Instructions Part II: Primary Site Schema

60, cont'd	Pterygoid fossa Zygoma			
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.

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

Collaborative Staging Manual and Coding Instructions Part II: Primary Site Schema

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

Accessory (Paranasal) Sinuses

CS Reg Nodes Eval

Code	Description	Staging Basis
9	Not applicable for this site	NA

Accessory (Paranasal) Sinuses

Reg LN Pos

SEE STANDARD TABLE

Accessory (Paranasal) Sinuses

Reg LN Exam

SEE STANDARD TABLE

Collaborative Staging Manual and Coding Instructions Part II: Primary Site Schema

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

Accessory (Paranasal) Sinuses

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

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

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

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

Accessory (Paranasal) Sinuses

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

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

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

Accessory (Paranasal) Sinuses

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

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

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

Accessory (Paranasal) Sinuses

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

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

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

Collaborative Staging Manual and Coding Instructions Part II: Primary Site Schema

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

Accessory (Paranasal) Sinuses

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

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

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

Page left blank.

Glottic Larynx

C32.0

C32.0 Glottis

<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>
---	--	--

Glottic Larynx

CS Tumor Size

SEE STANDARD TABLE

Glottic Larynx

CS Extension

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

Collaborative Staging Manual and Coding Instructions Part II: Primary Site Schema

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

Glottic Larynx
CS TS/Ext-Eval
SEE STANDARD TABLE

Collaborative Staging Manual and Coding Instructions Part II: Primary Site Schema

Glottic Larynx

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 laterality of lymph nodes is not specified, assume nodes are ipsilateral. Midline nodes are considered ipsilateral.

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) Other groups Intraparotid Parapharyngeal Periparotid Sub-occipital	*	D	RN

Collaborative Staging Manual and Coding Instructions Part II: Primary Site Schema

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

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

Glottic Larynx

CS Mets Eval

SEE STANDARD TABLE

Glottic Larynx

CS Site-Specific Factor 1 Size of Lymph Nodes

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

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

Collaborative Staging Manual and Coding Instructions Part II: Primary Site Schema

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
101	Level I and III lymph nodes involved

Collaborative Staging Manual and Coding Instructions Part II: Primary Site Schema

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

Glottic Larynx

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

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

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

Glottic Larynx

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

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

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

Collaborative Staging Manual and Coding Instructions Part II: Primary Site Schema

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

Glottic Larynx

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

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

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

Supraglottic Larynx

C32.1

C32.1 Supraglottis

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

<p>CS Tumor Size CS Extension CS TS/Ext-Eval CS Lymph Nodes CS Reg Nodes Eval Reg LN Pos Reg LN Exam CS Mets at DX CS Mets Eval</p>	<p>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>
---	---	---

Supraglottic Larynx

CS Tumor Size

SEE STANDARD TABLE

Supraglottic Larynx

CS Extension

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

Collaborative Staging Manual and Coding Instructions Part II: Primary Site Schema

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

Supraglottic Larynx
CS TS/Ext-Eval
SEE STANDARD TABLE

Collaborative Staging Manual and Coding Instructions Part II: Primary Site Schema

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.

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) Other groups Intraparotid Parapharyngeal Periparotid Sub-occipital	*	D	D
18	Stated as N1, no other information	N1	RN	RN

Collaborative Staging Manual and Coding Instructions Part II: Primary Site Schema

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

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

Supraglottic Larynx
CS Mets Eval
SEE STANDARD TABLE

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

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

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

Collaborative Staging Manual and Coding Instructions Part II: Primary Site Schema

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
001	Level III lymph node(s) involved
110	Level I and II lymph nodes involved
101	Level I and III lymph nodes involved

Collaborative Staging Manual and Coding Instructions Part II: Primary Site Schema

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.

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

Collaborative Staging Manual and Coding Instructions Part II: Primary Site Schema

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

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>
---	---	---

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 region(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 Extrinsic (strap) muscles Omohyoid	T4a	D	D

Collaborative Staging Manual and Coding Instructions Part II: Primary Site Schema

70, cont'd	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.

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	*	RN	RN

Collaborative Staging Manual and Coding Instructions Part II: Primary Site Schema

10, cont'd	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	*	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

Collaborative Staging Manual and Coding Instructions Part II: Primary Site Schema

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

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

Subglottic Larynx
CS Reg Nodes Eval
SEE STANDARD TABLE

Subglottic Larynx
Reg LN Pos
SEE STANDARD TABLE

Subglottic Larynx
Reg LN Exam
SEE STANDARD TABLE

Subglottic Larynx
CS Mets at DX

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

Collaborative Staging Manual and Coding Instructions Part II: Primary Site Schema

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

Subglottic Larynx

CS Mets Eval

SEE STANDARD TABLE

Subglottic Larynx

CS Site-Specific Factor 1 Size of Lymph Nodes

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

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

Subglottic Larynx

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

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

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

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

Subglottic Larynx

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

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

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

Subglottic Larynx

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

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

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

Subglottic Larynx

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

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

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

Collaborative Staging Manual and Coding Instructions Part II: Primary Site Schema

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

Subglottic Larynx

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

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

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

Larynx, Overlapping Lesion or Not Otherwise Specified

C32.3, C32.8-C32.9

C32.3 Laryngeal cartilage

C32.8 Overlapping lesion of larynx

C32.9 Larynx, NOS

<p>CS Tumor Size CS Extension CS TS/Ext-Eval CS Lymph Nodes CS Reg Nodes Eval Reg LN Pos Reg LN Exam CS Mets at DX CS Mets Eval</p>	<p>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>
---	--	--

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 Postericoid area Pre-epiglottic tissues Pyriform sinus (pyriform fossa) Vallecula	T3	RE	RE
68	Extension to/through cricoid cartilage and thyroid cartilage	T4a	RE	D

Collaborative Staging Manual and Coding Instructions Part II: Primary Site Schema

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.

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	*	RN	RN

Collaborative Staging Manual and Coding Instructions Part II: Primary Site Schema

10, cont'd	Laterotracheal Paralaryngeal Paratracheal Prelaryngeal Pretracheal Recurrent laryngeal Cervical, NOS Deep cervical, NOS Internal jugular, NOS Regional lymph node, NOS Stated as N1, NOS			
11	Single positive ipsilateral regional node: Level I Submandibular (submaxillary) Submental Other groups Retropharyngeal Mandibular, NOS	*	D	RN
12	Single positive ipsilateral regional node: Level V node Posterior cervical Posterior triangle (spinal accessory and transverse cervical) (upper, middle, and lower corresponding to the levels that define upper, middle, and lower jugular nodes) Level VII node Upper mediastinum (for other mediastinal nodes see CS Mets at DX) Other groups Intraparotid Parapharyngeal Periparotid Sub-occipital	*	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
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

Collaborative Staging Manual and Coding Instructions Part II: Primary Site Schema

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

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

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

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

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

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

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

Collaborative Staging Manual and Coding Instructions Part II: Primary Site Schema

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

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

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

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

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

Larynx, Overlapping Lesion or Not Otherwise Specified

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

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

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

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

Larynx, Overlapping Lesion or Not Otherwise Specified

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

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

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

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

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

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

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

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

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

Collaborative Staging Manual and Coding Instructions Part II: Primary Site Schema

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

**Larynx, Overlapping Lesion or Not Otherwise Specified
CS Site-Specific Factor 6 Parapharyngeal, Parotid, Preauricular, and Sub-Occipital
Lymph Nodes, Lymph Nodes for Head and Neck**

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

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

Collaborative Staging Manual and Coding Instructions Part II: Primary Site Schema

Trachea

C33.9

C33.9 Trachea

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

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

Trachea

CS Tumor Size

SEE STANDARD TABLE

Trachea

CS Extension

Code	Description	TNM	SS77	SS2000
00	In situ; noninvasive; intraepithelial	NA	IS	IS
10	Invasive tumor confined to trachea	NA	L	L
30	Localized, NOS	NA	L	L
40	Adjacent connective tissue Arch of aorta Azygos vein, right Brachiocephalic vein Carotid sheath Common carotid artery(ies) Jugular arch Phrenic nerves Pretracheal fascia Recurrent laryngeal nerve Subclavian artery(ies) Vagus nerve	NA	RE	RE
60	Adjacent organs/structures Cricoid cartilage Esophagus Pleura Right and left main bronchi Sternum Thymus Thyroid gland Vertebral column	NA	RE	RE
80	Further contiguous extension	NA	D	D

Collaborative Staging Manual and Coding Instructions Part II: Primary Site Schema

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

Trachea

CS TS/Ext-Eval

Code	Description	Staging Basis
9	Not applicable for this site	NA

Trachea

CS Lymph Nodes

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

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

Trachea

CS Reg Nodes Eval

Code	Description	Staging Basis
9	Not applicable for this site	NA

Trachea

Reg LN Pos

SEE STANDARD TABLE

Trachea

Reg LN Exam

SEE STANDARD TABLE

Collaborative Staging Manual and Coding Instructions Part II: Primary Site Schema

Trachea

CS Mets at DX

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

Trachea

CS Mets Eval

Code	Description	Staging Basis
9	Not applicable for this site	NA

Trachea

CS Site-Specific Factor 1

Code	Description
888	Not applicable for this site

Trachea

CS Site-Specific Factor 2

Code	Description
888	Not applicable for this site

Trachea

CS Site-Specific Factor 3

Code	Description
888	Not applicable for this site

Trachea

CS Site-Specific Factor 4

Code	Description
888	Not applicable for this site

Collaborative Staging Manual and Coding Instructions Part II: Primary Site Schema

Trachea

CS Site-Specific Factor 5

Code	Description
888	Not applicable for this site

Trachea

CS Site-Specific Factor 6

Code	Description
888	Not applicable for this site

Collaborative Staging Manual and Coding Instructions Part II: Primary Site Schema

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

Collaborative Staging Manual and Coding Instructions Part II: Primary Site Schema

Lung

CS Extension

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

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

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

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

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

Note 6: Pleural Effusion.

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

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

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

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

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

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

Collaborative Staging Manual and Coding Instructions Part II: Primary Site Schema

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

Collaborative Staging Manual and Coding Instructions Part II: Primary Site Schema

75	Vertebra(s) Neural foramina	T4	D	D
76	Pleural tumor foci separate from direct pleural invasion	T4	D	D
77	Inferior vena cava	T4	D	D
79	Pericardial effusion, NOS; malignant pericardial effusion	T4	D	D
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

Collaborative Staging Manual and Coding Instructions Part II: Primary Site Schema

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 in Regional Lymph Nodes, 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

Collaborative Staging Manual and Coding Instructions Part II: Primary Site Schema

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 Manual and Coding Instructions Part II: Primary Site Schema

**Lung
CS Mets at DX**

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

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

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

**Lung
CS Mets Eval
SEE STANDARD TABLE**

**Lung
CS Site-Specific Factor 1**

Code	Description
888	Not applicable for this site

**Lung
CS Site-Specific Factor 2**

Code	Description
888	Not applicable for this site

Lung

CS Site-Specific Factor 3

Code	Description
888	Not applicable for this site

Lung

CS Site-Specific Factor 4

Code	Description
888	Not applicable for this site

Lung

CS Site-Specific Factor 5

Code	Description
888	Not applicable for this site

Lung

CS Site-Specific Factor 6

Code	Description
888	Not applicable for this site

Heart, Mediastinum

C38.0-C38.3, C38.8

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

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

Heart, Mediastinum

CS Tumor Size

SEE STANDARD TABLE

Heart, Mediastinum

CS Extension

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

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

Collaborative Staging Manual and Coding Instructions Part II: Primary Site Schema

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

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

Heart, Mediastinum

CS TS/Ext-Eval

SEE STANDARD TABLE

Heart, Mediastinum

CS Lymph Nodes

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

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

Code	Description	TNM	SS77	SS2000
00	None; no regional lymph node involvement	N0	NONE	NONE
10	Regional lymph node(s): Aortic (above diaphragm), NOS: Peri/para-aortic, NOS Ascending aorta (phrenic) Subaortic (aortico-pulmonary window) Carinal (tracheobronchial) (tracheal bifurcation) Mediastinal, NOS: Anterior Posterior (tracheoesophageal) Pericardial Peri/paraesophageal Peri/paratracheal, NOS: Azygos (lower peritracheal) Pre- and retrotracheal, NOS: Precarinal Pulmonary ligament Subcarinal Regional lymph node(s), NOS	N1	RN	RN
80	Lymph nodes, NOS	N1	RN	RN
99	Unknown (see Note 2)	NX	U	U

Heart, Mediastinum
CS Reg Nodes Eval
SEE STANDARD TABLE

Heart, Mediastinum
Reg LN Pos
SEE STANDARD TABLE

Heart, Mediastinum
Reg LN Exam
SEE STANDARD TABLE

Heart, Mediastinum
CS Mets at DX
SEE STANDARD TABLE

Heart, Mediastinum
CS Mets Eval
SEE STANDARD TABLE

Heart, Mediastinum
CS Site-Specific Factor 1

Code	Description
888	Not applicable for this site

Heart, Mediastinum
CS Site-Specific Factor 2

Code	Description
888	Not applicable for this site

Heart, Mediastinum
CS Site-Specific Factor 3

Code	Description
888	Not applicable for this site

Heart, Mediastinum
CS Site-Specific Factor 4

Code	Description
888	Not applicable for this site

Heart, Mediastinum

CS Site-Specific Factor 5

Code	Description
888	Not applicable for this site

Heart, Mediastinum

CS Site-Specific Factor 6

Code	Description
888	Not applicable for this site

Collaborative Staging Manual and Coding Instructions Part II: Primary Site Schema

Pleura

C38.4

C38.4 Pleura, 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 - Pleural Effusion 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 Pleural Effusion Extension Table
--	---	--

Pleura

CS Tumor Size

SEE STANDARD TABLE

Pleura

CS Extension

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

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

Collaborative Staging Manual and Coding Instructions Part II: Primary Site Schema

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

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

Pleura

CS TS/Ext-Eval

SEE STANDARD TABLE

Pleura

CS Lymph Nodes

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

Collaborative Staging Manual and Coding Instructions Part II: Primary Site Schema

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

Pleura

CS Reg Nodes Eval

SEE STANDARD TABLE

Pleura

Reg LN Pos

SEE STANDARD TABLE

Pleura

Reg LN Exam

SEE STANDARD TABLE

Pleura

CS Mets at DX

Code	Description	TNM	SS77	SS2000
00	No; none	M0	NONE	NONE
10	Distant lymph node(s), including cervical nodes	M1	D	D
35	Direct extension to contralateral lung	M1	D	D
40	Distant metastases, except code [(10) or (35)] Distant metastasis, NOS (includes discontinuous involvement of contralateral pleura/chest wall) Carcinomatosis	M1	D	D
50	(10) + (40) Distant lymph node(s) plus distant metastases	M1	D	D
99	Unknown if distant metastasis Distant metastasis cannot be assessed Not documented in patient record	MX	U	U

Pleura
CS Mets Eval
SEE STANDARD TABLE

Pleura
CS Site-Specific Factor 1 Pleural Effusion

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

Pleura
CS Site-Specific Factor 2

Code	Description
888	Not applicable for this site

Pleura
CS Site-Specific Factor 3

Code	Description
888	Not applicable for this site

Pleura
CS Site-Specific Factor 4

Code	Description
888	Not applicable for this site

Pleura
CS Site-Specific Factor 5

Code	Description
888	Not applicable for this site

Pleura
CS Site-Specific Factor 6

Code	Description
888	Not applicable for this site

Other and Ill-Defined Respiratory Sites and Intrathoracic Organs

C39.0, C39.8-C39.9

C39.0 Upper respiratory tract, NOS

C39.8 Overlapping lesion of respiratory system and intrathoracic organs

C39.9 Ill-defined sites within respiratory system

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

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

Other and Ill-Defined Respiratory Sites and Intrathoracic Organs

CS Tumor Size

SEE STANDARD TABLE

Other and Ill-Defined Respiratory Sites and Intrathoracic Organs

CS Extension

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

Collaborative Staging Manual and Coding Instructions Part II: Primary Site Schema

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

Other and Ill-Defined Respiratory Sites and Intrathoracic Organs

CS TS/Ext-Eval

Code	Description	Staging Basis
9	Not applicable for this site	NA

Other and Ill-Defined Respiratory Sites and Intrathoracic Organs

CS Lymph Nodes

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

Code	Description	TNM	SS77	SS2000
00	None; no regional lymph node involvement	NA	NONE	NONE
10	Regional lymph nodes: Aortic [above diaphragm], NOS: Peri/para-aortic, NOS: Ascending aorta (phrenic) Subaortic (aortico-pulmonary window) Carinal (tracheobronchial) (tracheal bifurcation) Hilar (bronchopulmonary) (proximal lobar) (pulmonary root) Intrapulmonary, NOS: Interlobar Lobar Segmental Subsegmental Mediastinal, NOS: Anterior Posterior (tracheoesophageal) Peri/parabronchial Pericardial Peri/paraesophageal Peri/paratracheal, NOS: Azygos (lower peritracheal) Pre- and retrotracheal, NOS: Precarinal Pulmonary ligament Subcarinal Regional lymph node(s), NOS	NA	RN	RN
80	Lymph nodes, NOS	NA	RN	RN
99	Unknown; not stated Regional lymph node(s) cannot be assessed Not documented in patient record	NA	U	U

Other and Ill-Defined Respiratory Sites and Intrathoracic Organs

CS Reg Nodes Eval

Code	Description	Staging Basis
9	Not applicable for this site	NA

Other and Ill-Defined Respiratory Sites and Intrathoracic Organs

Reg LN Pos

SEE STANDARD TABLE

Other and Ill-Defined Respiratory Sites and Intrathoracic Organs

Reg LN Exam

SEE STANDARD TABLE

Other and Ill-Defined Respiratory Sites and Intrathoracic Organs

CS Mets at DX

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

Other and Ill-Defined Respiratory Sites and Intrathoracic Organs

CS Mets Eval

Code	Description	Staging Basis
9	Not applicable for this site	NA

Other and Ill-Defined Respiratory Sites and Intrathoracic Organs

CS Site-Specific Factor 1

Code	Description
888	Not applicable for this site

Other and Ill-Defined Respiratory Sites and Intrathoracic Organs

CS Site-Specific Factor 2

Code	Description
888	Not applicable for this site

Other and Ill-Defined Respiratory Sites and Intrathoracic Organs

CS Site-Specific Factor 3

Code	Description
888	Not applicable for this site

Other and Ill-Defined Respiratory Sites and Intrathoracic Organs

CS Site-Specific Factor 4

Code	Description
888	Not applicable for this site

Other and Ill-Defined Respiratory Sites and Intrathoracic Organs

CS Site-Specific Factor 5

Code	Description
888	Not applicable for this site

Other and Ill-Defined Respiratory Sites and Intrathoracic Organs

CS Site-Specific Factor 6

Code	Description
888	Not applicable for this site

Collaborative Staging Manual and Coding Instructions Part II: Primary Site Schema

Bone

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

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

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

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

Bone

CS Tumor Size

SEE STANDARD TABLE

Bone

CS Extension

Note: The cortex of a bone is the dense outer shell that provides strength to the bone; the spongy center of a bone is the cancellous portion. The periosteum of the bone is the fibrous membrane covering of a bone that contains the blood vessels and nerves; the periosteum is similar to the capsule on a visceral organ.

Code	Description	TNM	SS77	SS2000
10	Invasive tumor confined to cortex of bone	*	L	L
20	Extension beyond cortex to periosteum (no break in periosteum)	*	L	L
30	Localized, NOS	*	L	L
40	Extension beyond periosteum to surrounding tissues, including adjacent skeletal muscle(s)	*	RE	RE
60	Adjacent bone/cartilage	*	RE	RE
70	Skin	*	D	D
80	Further contiguous extension	*	D	D
82	Skip metastases or discontinuous tumors in the same bone	T3	D	D

Collaborative Staging Manual and Coding Instructions Part II: Primary Site Schema

95	No evidence of primary tumor	T0	U	U
99	Unknown extension Primary tumor cannot be assessed Not documented in patient record	TX	U	U

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

Bone

CS TS/Ext-Eval

SEE STANDARD TABLE

Bone

CS Lymph Nodes

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

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

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

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

Bone

CS Reg Nodes Eval

SEE STANDARD TABLE

Bone

Reg LN Pos

SEE STANDARD TABLE

Bone

Reg LN Exam

SEE STANDARD TABLE

Collaborative Staging Manual and Coding Instructions Part II: Primary Site Schema

Bone

CS Mets at DX

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

Bone

CS Mets Eval

SEE STANDARD TABLE

Bone

CS Site-Specific Factor 1

Code	Description
888	Not applicable for this site

Bone

CS Site-Specific Factor 2

Code	Description
888	Not applicable for this site

Bone

CS Site-Specific Factor 3

Code	Description
888	Not applicable for this site

Bone

CS Site-Specific Factor 4

Code	Description
888	Not applicable for this site

Collaborative Staging Manual and Coding Instructions Part II: Primary Site Schema

Bone

CS Site-Specific Factor 5

Code	Description
888	Not applicable for this site

Bone

CS Site-Specific Factor 6

Code	Description
888	Not applicable for this site

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

C44.0, C44.2-C44.9

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

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

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

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

CS Tumor Size

SEE STANDARD TABLE

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

CS Extension

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

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

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

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

Collaborative Staging Manual and Coding Instructions Part II: Primary Site Schema

99	Unknown extension Primary tumor cannot be assessed Not documented in patient record	TX	U	U
----	---	----	---	---

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

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

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

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

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

Collaborative Staging Manual and Coding Instructions Part II: Primary Site Schema

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

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

CS Reg Nodes Eval

SEE STANDARD TABLE

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

Reg LN Pos

SEE STANDARD TABLE

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

Reg LN Exam

SEE STANDARD TABLE

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

CS Mets at DX

SEE STANDARD TABLE

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

**Skin [excl. Skin of Eyelid] [excl. Malignant Melanoma, Kaposi Sarcoma, Mycosis Fungoides, Sezary Disease, and Other Lymphomas]
CS Site-Specific Factor 1**

Code	Description
888	Not applicable for this site

**Skin [excl. Skin of Eyelid] [excl. Malignant Melanoma, Kaposi Sarcoma, Mycosis Fungoides, Sezary Disease, and Other Lymphomas]
CS Site-Specific Factor 2**

Code	Description
888	Not applicable for this site

**Skin [excl. Skin of Eyelid] [excl. Malignant Melanoma, Kaposi Sarcoma, Mycosis Fungoides, Sezary Disease, and Other Lymphomas]
CS Site-Specific Factor 3**

Code	Description
888	Not applicable for this site

**Skin [excl. Skin of Eyelid] [excl. Malignant Melanoma, Kaposi Sarcoma, Mycosis Fungoides, Sezary Disease, and Other Lymphomas]
CS Site-Specific Factor 4**

Code	Description
888	Not applicable for this site

**Skin [excl. Skin of Eyelid] [excl. Malignant Melanoma, Kaposi Sarcoma, Mycosis Fungoides, Sezary Disease, and Other Lymphomas]
CS Site-Specific Factor 5**

Code	Description
888	Not applicable for this site

**Skin [excl. Skin of Eyelid] [excl. Malignant Melanoma, Kaposi Sarcoma, Mycosis Fungoides, Sezary Disease, and Other Lymphomas]
CS Site-Specific Factor 6**

Code	Description
888	Not applicable for this site

Skin of Eyelid

C44.1

C44.1 Eyelid

Note: Laterality must be coded for this site.

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

Skin of Eyelid

CS Tumor Size

SEE STANDARD TABLE

Skin of Eyelid

CS Extension

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

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

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

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

Collaborative Staging Manual and Coding Instructions Part II: Primary Site Schema

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

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

Skin of Eyelid

CS TS/Ext-Eval

SEE STANDARD TABLE

Skin of Eyelid

CS Lymph Nodes

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

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

Skin of Eyelid

CS Reg Nodes Eval

SEE STANDARD TABLE

Skin of Eyelid

Reg LN Pos

SEE STANDARD TABLE

Skin of Eyelid
Reg LN Exam
SEE STANDARD TABLE

Skin of Eyelid
CS Mets at DX
SEE STANDARD TABLE

Skin of Eyelid
CS Mets Eval
SEE STANDARD TABLE

Skin of Eyelid
CS Site-Specific Factor 1

Code	Description
888	Not applicable for this site

Skin of Eyelid
CS Site-Specific Factor 2

Code	Description
888	Not applicable for this site

Skin of Eyelid
CS Site-Specific Factor 3

Code	Description
888	Not applicable for this site

Skin of Eyelid
CS Site-Specific Factor 4

Code	Description
888	Not applicable for this site

Collaborative Staging Manual and Coding Instructions Part II: Primary Site Schema

Skin of Eyelid

CS Site-Specific Factor 5

Code	Description
888	Not applicable for this site

Skin of Eyelid

CS Site-Specific Factor 6

Code	Description
888	Not applicable for this site

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
--	---	--

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

Collaborative Staging Manual and Coding Instructions Part II: Primary Site Schema

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 or in-transit metastasis are coded under CS Lymph Nodes.

Note 3: If there is no documentation of ulceration in the pathology report, assume ulceration is not present.

Note 4: Ulceration is determined by histopathological examination and not on clinical evaluation.

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 value the of CS Site-Specific Factor 1, Measured Thickness and CS Site-Specific Factor 2, Ulceration, as well as 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 or in-transit metastasis are coded under CS Lymph Nodes.

Code	Description	TNM	SS77	SS2000
00	None; no regional lymph node involvement	N0	NONE	NONE
10	Regional lymph node(s) by primary site: (includes bilateral or contralateral nodes for head, neck, and trunk) Head and Neck - All subsites: Cervical, 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-/reto-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	*	RN	RN

Collaborative Staging Manual and Coding Instructions Part II: Primary Site Schema

10, cont'd	<p>Internal mammary Supraclavicular</p> <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	Only satellite nodule(s), NOS, with regional nodes not stated	*	RN	RN
14	Only satellite nodule(s), less than or equal to 2 cm from primary tumor with regional nodes not stated	*	RN	RN
15	Intralymphatic metastases (in-transit metastases between the primary melanoma and the regional lymph nodes)	N3	RN	RN
20	Satellite nodule(s) and regional lymph node(s)	N3	RN	RN
80	Lymph nodes, NOS	*	RN	RN
99	<p>Unknown; not stated Regional lymph node(s) cannot be assessed Not documented in patient record</p>	NX	U	U

*Mapping of N depends on the values in Reg LN Pos and the Site-Specific Factor 3 Table, Clinical Status of Lymph Node Mets.

Malignant Melanoma of Skin, Vulva, Penis, Scrotum

CS Reg Nodes Eval

SEE STANDARD TABLE

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.
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
99	Unknown Distant metastasis cannot be assessed Not documented in patient record	MX	U	U

*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

Collaborative Staging Manual and Coding Instructions Part II: Primary Site Schema

990	Microinvasion; microscopic focus or foci only; no size given
999	Unknown; measured thickness not stated Not documented in patient record

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

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
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

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

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

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

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

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

CS Tumor Size 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 - Peripheral Blood Involvement 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
--	---	--

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

CS Tumor Size

SEE STANDARD TABLE

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

CS Extension

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

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

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

Collaborative Staging Manual and Coding Instructions Part II: Primary Site Schema

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

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

CS TS/Ext-Eval

SEE STANDARD TABLE

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

CS Lymph Nodes

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

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

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

CS Reg Nodes Eval

SEE STANDARD TABLE

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

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

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

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

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

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

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

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

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

CS Site-Specific Factor 2

Code	Description
888	Not applicable for this site

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

CS Site-Specific Factor 3

Code	Description
888	Not applicable for this site

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

CS Site-Specific Factor 4

Code	Description
888	Not applicable for this site

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

CS Site-Specific Factor 5

Code	Description
888	Not applicable for this site

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

CS Site-Specific Factor 6

Code	Description
888	Not applicable for this site

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

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

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

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

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

CS Tumor Size CS 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	<p>The following tables are available at the collaborative staging website:</p> Histology Exclusion Table AJCC Stage Special Extension Size Table 1 Special Extension Size Table 2 Special Extension Size Table 3
--	--	--

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

CS Tumor Size

SEE STANDARD TABLE

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

CS Extension

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

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

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

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

Collaborative Staging Manual and Coding Instructions Part II: Primary Site Schema

Note 5: Definition of Adjacent Connective Tissue: Some of the schemes for ill-defined or non-specific sites in this manual contain a code 40, adjacent connective tissue, which is defined here as the unnamed tissues that immediately surround an organ or structure containing a primary cancer. Use this code when a tumor has invaded past the outer border (capsule, serosa, or other edge) of the primary organ into the organ's surrounding supportive structures but has not invaded into larger structures or adjacent organs. In general, these tissues do not have specific names. These tissues form the framework of many organs, provide support to hold organs in place, bind tissues and organs together, and serve as storage sites for nutrients. Blood, cartilage and bone are sometimes considered connective tissues, but in this manual they are listed separately.

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

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

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

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

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

CS TS/Ext-Eval

SEE STANDARD TABLE

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

CS Lymph Nodes

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

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

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

Collaborative Staging Manual and Coding Instructions Part II: Primary Site Schema

10, cont'd	Infra-auricular Preauricular Spinal accessory (posterior cervical) Supraclavicular (transverse cervical) Arm/shoulder: Axillary Spinal accessory for shoulder Epitrochlear for hand/forearm Leg/hip: Femoral (superficial inguinal) Popliteal for heel and calf Thorax: Hilar (bronchopulmonary) (proximal lobar) (pulmonary root) Mediastinal Abdomen: Celiac Iliac Para-aortic Pelvis: Deep inguinal, NOS: Rosenmuller or Cloquet node Superficial inguinal (femoral) Upper trunk: Axillary Cervical Internal mammary Supraclavicular (transverse cervical) Lower trunk: Superficial inguinal (femoral) All sites: Regional lymph node(s), NOS			
12	Submental nodes for neck primary only (bilateral or contralateral)	N1	D	RN
15	Neck primary only: (10) + (12)	N1	D	RN
80	Lymph nodes, NOS	N1	RN	RN
99	Unknown (see Note 2)	NX	U	U

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

CS Reg Nodes Eval

SEE STANDARD TABLE

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

Reg LN Pos

SEE STANDARD TABLE

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

Reg LN Exam

SEE STANDARD TABLE

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

CS Mets at DX

SEE STANDARD TABLE

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

CS Mets Eval

SEE STANDARD TABLE

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

CS Site-Specific Factor 1

Code	Description
888	Not applicable for this site

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

CS Site-Specific Factor 2

Code	Description
888	Not applicable for this site

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

CS Site-Specific Factor 3

Code	Description
888	Not applicable for this site

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

CS Site-Specific Factor 4

Code	Description
888	Not applicable for this site

Collaborative Staging Manual and Coding Instructions Part II: Primary Site Schema

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

CS Site-Specific Factor 5

Code	Description
888	Not applicable for this site

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

CS Site-Specific Factor 6

Code	Description
888	Not applicable for this site

Retroperitoneum and Peritoneum

C48.0-C48.2, C48.8

C48.0 Retroperitoneum

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

C48.2 Peritoneum, NOS

C48.8 Overlapping lesion of retroperitoneum and peritoneum

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

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

Retroperitoneum and Peritoneum

CS Tumor Size

SEE STANDARD TABLE

Retroperitoneum and Peritoneum

CS Extension

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

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

Collaborative Staging Manual and Coding Instructions Part II: Primary Site Schema

95	No evidence of primary tumor	T0	U	U
99	Unknown extension Primary tumor cannot be assessed Not documented in patient record	TX	U	U

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

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

**Retroperitoneum and Peritoneum
CS Lymph Nodes**

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

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

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

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

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

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

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

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

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

Code	Description
888	Not applicable for this site

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

Code	Description
888	Not applicable for this site

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

Code	Description
888	Not applicable for this site

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

Code	Description
888	Not applicable for this site

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

Code	Description
888	Not applicable for this site

**Retroperitoneum and Peritoneum
CS Site-Specific Factor 6**

Code	Description
888	Not applicable for this site

Page left blank.

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
--	---	--

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

Collaborative Staging Manual and Coding Instructions Part II: Primary Site Schema

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 72 should be used if there is a stated diagnosis of inflammatory carcinoma and a clinical description of the skin involvement in more than 50% of the breast. All other 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

Collaborative Staging Manual and Coding Instructions Part II: Primary Site Schema

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)	T4b	RE	RE
71	Diagnosis of inflammatory carcinoma WITHOUT a clinical description of inflammation, erythema, edema, peau d'orange, etc., of more than 50% of the breast, WITH or WITHOUT dermal lymphatic infiltration Inflammatory carcinoma, NOS	T4b	RE	RE
72	Diagnosis of inflammatory carcinoma WITH a clinical description of inflammation, erythema, edema, peau d'orange, etc. of LESS THAN OR EQUAL TO 50% of the breast, WITH or WITHOUT dermal lymphatic infiltration	T4b	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.

Collaborative Staging Manual and Coding Instructions Part II: Primary Site Schema

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, including ITCs detected by immunohistochemistry or molecular methods ONLY. (See Note 5 and Site-specific Factors 4 and 5.)	*	NONE	NONE
05	Regional lymph node(s) 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

Collaborative Staging Manual and Coding Instructions Part II: Primary Site Schema

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

Collaborative Staging Manual and Coding Instructions Part II: Primary Site Schema

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.

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
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 or 05

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.)

Page left blank.

Vulva (incl. Skin of Vulva)

[excl. Melanoma of Vulva, Kaposi Sarcoma of vulva, Mycosis Fungoides of vulva, Sezary Disease of vulva, and Other Lymphomas of vulva]

C51.0-C51.2, C51.8-C51.9

C51.0 Labium majus

C51.1 Labium minus

C51.2 Clitoris

C51.8 Overlapping lesion of vulva

C51.9 Vulva, NOS

Note: This schema is NOT used for Malignant Melanoma, Kaposi's Sarcoma, Mycosis Fungoides, Sezary Disease, or Other Lymphomas. Each of these diseases has a separate schema.

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

Vulva (incl. Skin of Vulva)

CS Tumor Size

SEE STANDARD TABLE

Vulva (incl. Skin of Vulva)

CS Extension

Note 1: FIGO Stage 1, 1A and 1B are defined by size of tumor (less than or equal to 2 cm), involvement of vulva or vulva and perineum, and depth of stromal invasion as defined in codes 10, 11, 12, 30, 40, 41, and 42. FIGO Stage II is greater than 2 cm, but would be coded in the same range of codes.

Note 2: The depth of invasion is defined as the measurement of the tumor from the epithelial-stromal junction of the adjacent most superficial dermal papilla to the deepest point of invasion.

Code	Description	TNM	SS77	SS2000
00	In situ: Noninvasive; intraepithelial Bowen's disease, intraepidermal; preinvasive carcinoma FIGO Stage 0	Tis	IS	IS
10	Invasive cancer confined to: Musculature Submucosa Vulva including skin	*	L	L
11	Vulva only: Stromal invasion less than or equal to 1 mm	**	L	L
12	Vulva only: Stromal invasion greater than 1 mm	***	L	L
30	Localized, NOS	*	L	L
40	Vulva and perineum, level of invasion in mm not stated	*	RE	RE
41	Vulva and perineum, stromal invasion less than or equal to 1 mm	**	RE	RE
42	Vulva and perineum, stromal invasion greater than 1 mm	***	RE	RE

Collaborative Staging Manual and Coding Instructions Part II: Primary Site Schema

60	Anus Perianal skin Urethra (See code 75 for upper urethral mucosa) Vagina FIGO Stage III	T3	RE	RE
62	Bladder wall or bladder, NOS excluding mucosa Rectal wall or rectum, NOS excluding mucosa	T3	D	RE
70	Perineal body Rectal mucosa	T4	D	D
75	Bladder mucosa Fixed to pubic bone Upper urethral mucosa FIGO Stage IVA	T4	D	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

* For Extension codes 10, 30, and 40 ONLY, the T category is assigned based on the value of CS Tumor Size as shown in the Special Extension Size Table 1 for this site.

** For Extension codes 11 and 41 ONLY, the T category is assigned based on the value of CS Tumor Size as shown in the Special Extension Size Table 2 for this site.

*** For Extension codes 12 and 42 ONLY, the T category is assigned based on the value of CS Tumor Size as shown in the Special Extension Size Table 3 for this site.

Vulva (incl. Skin of Vulva)

CS TS/Ext-Eval

SEE STANDARD TABLE

Vulva (incl. Skin of Vulva)

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	No regional lymph node involvement	N0	NONE	NONE
10	Unilateral regional lymph nodes: Inguinal, NOS: Deep inguinal, NOS: Node of Cloquet or Rosenmuller (highest deep inguinal) Superficial inguinal (femoral) Regional lymph node(s), NOS (unilateral) FIGO Stage III	N1	RN	RN
50	Bilateral or contralateral regional lymph nodes: Inguinal, NOS: Deep inguinal, NOS: Node of Cloquet or Rosenmuller (highest deep inguinal) Superficial inguinal (femoral) Regional lymph node(s), NOS (bilateral or contralateral) FIGO Stage IVA	N2	RN	RN

Collaborative Staging Manual and Coding Instructions Part II: Primary Site Schema

60	Regional lymph node(s), NOS (not stated if unilateral, bilateral or contralateral)	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

Vulva (incl. Skin of Vulva)

CS Reg Nodes Eval

SEE STANDARD TABLE

Vulva (incl. Skin of Vulva)

Reg LN Pos

SEE STANDARD TABLE

Vulva (incl. Skin of Vulva)

Reg LN Exam

SEE STANDARD TABLE

Vulva (incl. Skin of Vulva)

CS Mets at DX

Code	Description	TNM	SS77	SS2000
00	No; none	M0	NONE	NONE
10	Distant lymph node(s), NOS	M1	D	D
11	Distant lymph node(s): External iliac	M1	RN	D
12	Distant lymph node(s): Internal iliac (hypogastric) Obturator Pelvic, NOS	M1	D	D
13	Distant lymph node(s) other than code 11 and 12, including common iliac	M1	D	D
40	Distant metastases other than distant lymph node(s) (codes 10 to 13) Distant metastasis, NOS Carcinomatosis	M1	D	D
50	(40) + any of [(10) to (13)] 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

Vulva (incl. Skin of Vulva)

CS Mets Eval

SEE STANDARD TABLE

Vulva (incl. Skin of Vulva)

CS Site-Specific Factor 1

Code	Description
888	Not applicable for this site

Vulva (incl. Skin of Vulva)

CS Site-Specific Factor 2

Code	Description
888	Not applicable for this site

Vulva (incl. Skin of Vulva)

CS Site-Specific Factor 3

Code	Description
888	Not applicable for this site

Vulva (incl. Skin of Vulva)

CS Site-Specific Factor 4

Code	Description
888	Not applicable for this site

Vulva (incl. Skin of Vulva)

CS Site-Specific Factor 5

Code	Description
888	Not applicable for this site

Vulva (incl. Skin of Vulva)

CS Site-Specific Factor 6

Code	Description
888	Not applicable for this site

Collaborative Staging Manual and Coding Instructions Part II: Primary Site Schema

Vagina

C52.9

C52.9 Vagina, NOS

CS Tumor Size	CS Site-Specific Factor 1	<p>The following tables are available at the collaborative staging website: Histology Exclusion Table AJCC Stage</p>
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		

Vagina

CS Tumor Size

SEE STANDARD TABLE

Vagina

CS Extension

Note: According to AJCC, pelvic wall is defined as muscle, fascia, neurovascular structures, or skeletal portions of the bony pelvis.

Code	Description	TNM	SS77	SS2000
00	In situ: Noninvasive; intraepithelial FIGO Stage 0	Tis	IS	IS
10	Invasive cancer confined to Submucosa (stroma) (vagina) FIGO Stage I	T1	L	L
20	Musculature involved	T1	L	L
30	Localized, NOS	T1	L	L
40	Cervix Paravaginal soft tissue Rectovaginal septum Vesicovaginal septum Vulva FIGO Stage II	T2	RE	RE
50	Cul de sac (rectouterine pouch) FIGO Stage II	T2	RE	RE
52	Extension to bladder wall or bladder, NOS excluding mucosa Rectal wall or rectum, NOS excluding mucosa	T3	D	RE
60	Extension to pelvic wall Described clinically as "frozen pelvis", NOS FIGO Stage III	T3	D	RE
70	Extension to bladder mucosa (excluding bullous edema) or rectal mucosa FIGO Stage IVA	T4	D	D

Collaborative Staging Manual and Coding Instructions Part II: Primary Site Schema

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

Vagina

CS TS/Ext-Eval

SEE STANDARD TABLE

Vagina

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	No regional lymph node involvement	N0	NONE	NONE
10	All parts of vagina, regional nodes: Pelvic lymph nodes: Iliac, NOS: Common External Internal (hypogastric) Obturator Middle sacral (promontorial) (Gerota's node)	N1	RN	RN
20	Lower third of vagina, regional nodes: Ipsilateral: Inguinal, NOS: Superficial inguinal (femoral)	N1	D	RN
30	Lower third of vagina, regional nodes: Bilateral: Inguinal, NOS: Superficial inguinal (femoral)	N1	D	RN
40	Upper two-thirds of vagina, regional nodes: Pelvic lymph node(s), NOS	N1	D	RN
50	Regional lymph node(s), unknown whether primary is in upper or lower vagina 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

Vagina

CS Reg Nodes Eval

SEE STANDARD TABLE

Vagina

Reg LN Pos

SEE STANDARD TABLE

Vagina

Reg LN Exam

SEE STANDARD TABLE

Vagina

CS Mets at DX

Code	Description	TNM	SS77	SS2000
00	No; none	M0	NONE	NONE
10	Distant lymph node(s), NOS	M1	D	D
11	Distant lymph node(s): Aortic, NOS: Lateral (lumbar) Para-aortic Periaortic Inguinal (for primary in upper two-thirds of vagina only) Retroperitoneal, NOS	M1	D	D
12	Distant lymph node(s) other than code 11	M1	D	D
40	Distant metastases except distant lymph node(s) (codes 10 to 12) FIGO Stage IVB Distant metastasis, NOS Carcinomatosis	M1	D	D
50	(40) + any of [(10) to (12)] 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

Vagina

CS Mets Eval

SEE STANDARD TABLE

Vagina

CS Site-Specific Factor 1

Code	Description
888	Not applicable for this site

Vagina

CS Site-Specific Factor 2

Code	Description
888	Not applicable for this site

Vagina

CS Site-Specific Factor 3

Code	Description
888	Not applicable for this site

Vagina

CS Site-Specific Factor 4

Code	Description
888	Not applicable for this site

Vagina

CS Site-Specific Factor 5

Code	Description
888	Not applicable for this site

Vagina

CS Site-Specific Factor 6

Code	Description
888	Not applicable for this site

Cervix Uteri

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

C53.0 Endocervix

C53.1 Exocervix

C53.8 Overlapping lesion of cervix

C53.9 Cervix uteri

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		

Cervix Uteri

CS Tumor Size

SEE STANDARD TABLE

Cervix Uteri

CS Extension

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

Code	Description	TNM	SS77	SS2000
00	In situ: Preinvasive; noninvasive; intraepithelial Cancer in situ WITH endocervical gland involvement FIGO Stage 0	Tis	IS	IS
01	CIN (Cervical intraepithelial neoplasia) Grade III	Tis	IS	IS
11	Minimal microscopic stromal invasion less than or equal to 3 mm in depth and less than or equal to 7 mm in horizontal spread FIGO Stage IA1	T1a1	L	L
12	"Microinvasion" Tumor WITH invasive component greater than 3 mm and less than or equal to 5 mm in depth, taken from the base of the epithelium, and less than or equal to 7 mm in horizontal spread FIGO Stage IA2	T1a2	L	L
20	Invasive cancer confined to cervix and tumor larger than that in code 12 FIGO Stage IB	*	L	L
25	Invasive cancer confined to cervix and clinically visible lesion	*	L	L
30	Localized, NOS Confined to cervix uteri or uterus, NOS, except corpus uteri, NOS (Not clinically visible or unknown if clinically visible.)	*	L	L
31	FIGO Stage I, not further specified	*	L	L

Collaborative Staging Manual and Coding Instructions Part II: Primary Site Schema

35	Corpus uteri, NOS	T1NOS	RE	RE
36	(35) + (11)	T1a1	RE	RE
37	(35) + (12)	T1a2	RE	RE
38	(35) + [(20) or (25)]	*	RE	RE
39	(35) + [(30) or (31)]	*	RE	RE
40	Extension to: Cul de sac (rectouterine pouch) Upper 2/3's of vagina including fornices Vagina, NOS Vaginal wall, NOS FIGO Stage IIA FIGO Stage II, NOS	T2a	RE	RE
50	Extension to: Ligament(s): Broad Cardinal Uterosacral Parametrium (paracervical soft tissue) FIGO Stage IIB	T2b	RE	RE
60	Extension to: Bladder wall Bladder, NOS excluding mucosa Bullous edema of bladder mucosa Lower 1/3 of vagina Rectal wall Rectum, NOS excluding mucosa FIGO Stage IIIA	T3a	RE	RE
62	Extension to: Ureter, intra- and extramural Vulva FIGO Stage IIIA	T3a	D	RE
63	Tumor causes hydronephrosis or nonfunctioning kidney FIGO Stage IIIB	T3b	RE	RE
65	Extension to pelvic wall(s) (Described clinically as "frozen pelvis", NOS) FIGO Stage IIIB	T3b	D	RE
68	Extension to: Fallopian tube Ovary(ies) Urethra	T3NOS	D	RE
70	Extension to rectal or bladder mucosa (Note: for bullous edema of bladder mucosa, see code 60.) FIGO Stage IVA	T4	D	D
80	Further contiguous extension beyond true pelvis Sigmoid colon Small intestine FIGO Stage IVA, not further specified	T4	D	D

Collaborative Staging Manual and Coding Instructions Part II: Primary Site Schema

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 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

Collaborative Staging Manual and Coding Instructions Part II: Primary Site Schema

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 IV	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

Cervix Uteri

CS Site-Specific Factor 4

Code	Description
888	Not applicable for this site

Cervix Uteri

CS Site-Specific Factor 5

Code	Description
888	Not applicable for this site

Cervix Uteri

CS Site-Specific Factor 6

Code	Description
888	Not applicable for this site

Page left blank.

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	<p>The following tables are available at the collaborative staging website: Histology Exclusion Table AJCC Stage</p>
--	--	---

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	Serosa of corpus (tunica serosa)	T1NOS	L	L
40	Localized, NOS	T1NOS	L	L

Collaborative Staging Manual and Coding Instructions Part II: Primary Site Schema

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 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 IVNOS	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 Manual and Coding Instructions Part II: Primary Site Schema

Corpus Uteri; Uterus, NOS (excluding Placenta)

CS TS/Ext-Eval

SEE STANDARD TABLE

Corpus Uteri; Uterus, NOS (excluding Placenta)

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/definitive surgery is done with no mention of lymph nodes, assume nodes are negative.

Note 4: Regional nodes includes bilateral and contralateral involvement of named nodes.

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	N1	RN	RN
20	Regional lymph node(s): Aortic, NOS: Lateral (lumbar) Para-aortic Periaortic	N1	RN	RN
50	Regional lymph node(s): FIGO Stage IIIC, NOS	N1	RN	RN
80	Regional lymph node(s), NOS	N1	RN	RN
99	Unknown; not stated Regional lymph node(s) cannot be assessed Not documented in patient record	NX	U	U

Corpus Uteri; Uterus, NOS (excluding Placenta)

CS Reg Nodes Eval

SEE STANDARD TABLE

Corpus Uteri; Uterus, NOS (excluding Placenta)

Reg LN Pos

SEE STANDARD TABLE

Corpus Uteri; Uterus, NOS (excluding Placenta)

Reg LN Exam

SEE STANDARD TABLE

Corpus Uteri; Uterus, NOS (excluding Placenta)

CS Mets at DX

Code	Description	TNM	SS77	SS2000
00	No; none	M0	NONE	NONE
11	Distant lymph node(s): Superficial inguinal	M1	RN	D
12	Distant lymph node(s) other than code 11: Deep inguinal, NOS: Node of Cloquet or Rosenmuller (highest deep inguinal) Distant lymph node(s), NOS	M1	D	D
40	Distant metastases, except distant lymph node(s) (codes 11-12) Distant metastasis, NOS Carcinomatosis Stage IVB Stage IV, NOS	M1	D	D
50	(40) + any of [(11) or (12)] 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

Corpus Uteri; Uterus, NOS (excluding Placenta)

CS Mets Eval

SEE STANDARD TABLE

Corpus Uteri; Uterus, NOS (excluding Placenta)

CS Site-Specific Factor 1

Code	Description
888	Not applicable for this site

Corpus Uteri; Uterus, NOS (excluding Placenta)

CS Site-Specific Factor 2

Code	Description
888	Not applicable for this site

Corpus Uteri; Uterus, NOS (excluding Placenta)

CS Site-Specific Factor 3

Code	Description
888	Not applicable for this site

Corpus Uteri; Uterus, NOS (excluding Placenta)

CS Site-Specific Factor 4

Code	Description
888	Not applicable for this site

Corpus Uteri; Uterus, NOS (excluding Placenta)

CS Site-Specific Factor 5

Code	Description
888	Not applicable for this site

Corpus Uteri; Uterus, NOS (excluding Placenta)

CS Site-Specific Factor 6

Code	Description
888	Not applicable for this site

Page left blank.

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; non-invasive; intraepithelial; preinvasive	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

Collaborative Staging Manual and Coding Instructions Part II: Primary Site Schema

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	WITH malignant cells in ascites or peritoneal washings [(50) and/or (60)] FIGO Stage IIC	T2c	RE	RE
63	WITH malignant cells in ascites or peritoneal washings [(52) and/or (61)] FIGO Stage IIC	T2c	D	RE
64	(61) WITH malignant cells in ascites or peritoneal washings FIGO IIC	T2c	D	RE
65	Tumor involves one or both ovaries with pelvic extension, NOS FIGO Stage II, NOS	T2NOS	RE	RE

Collaborative Staging Manual and Coding Instructions Part II: Primary Site Schema

70	Microscopic peritoneal implants beyond pelvis, including peritoneal surface/capsule of liver FIGO Stage IIIA (See Note 5)	T3a	D	D
71	Macroscopic peritoneal implants beyond pelvis, less than or equal to 2 cm in diameter, including peritoneal surface of liver FIGO Stage IIIB (See Note 5)	T3b	D	D
72	Peritoneal implants beyond pelvis, greater than 2 cm in diameter, including peritoneal surface of liver (liver capsule) FIGO Stage IIIC (See Note 5)	T3c	D	D
73	Tumor involves one or both ovaries with microscopically confirmed peritoneal metastasis outside the pelvis, NOS FIGO Stage III, NOS (See Note 5)	T3NOS	D	D
75	Peritoneal implants, NOS (See Note 5)	T3NOS	D	D
80	Further contiguous extension	T3NOS	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

Ovary

CS TS/Ext-Eval

SEE STANDARD TABLE

Ovary

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, code "00".

Note 3: If either exploratory/definitive surgery is done with no mention of lymph nodes, assume nodes are negative.

Note 4: Regional nodes includes bilateral and contralateral involvement of named nodes.

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), NOS Obturator Pelvic, NOS	N1	RN	RN
12	Regional lymph node(s): Lateral sacral (laterosacral)	N1	D	RN
20	Regional lymph node(s): Aortic (para-, peri-, lateral) Retroperitoneal, NOS	N1	RN	RN

Collaborative Staging Manual and Coding Instructions Part II: Primary Site Schema

30	Regional lymph node(s): Inguinal	N1	D	RN
40	(10) + (20)	N1	RN	RN
42	[(12) or (30)] + [(10) or (20)]	N1	D	RN
50	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

Ovary

CS Reg Nodes Eval

SEE STANDARD TABLE

Ovary

Reg LN Pos

SEE STANDARD TABLE

Ovary

Reg LN Exam

SEE STANDARD TABLE

Ovary

CS Mets at DX

Code	Description	TNM	SS77	SS2000
00	No; none	M0	NONE	NONE
10	Distant lymph node(s), NOS	M1	D	D
40	Distant metastases, except distant lymph node(s) (code 10), including: Liver parenchymal metastasis Pleural effusion WITH positive cytology Distant metastasis, NOS Carcinomatosis Stage IV, NOS	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

Ovary

CS Mets Eval

SEE STANDARD TABLE

Ovary

CS Site-Specific Factor 1 Carbohydrate Antigen 125 (CA-125)

Code	Description
000	Test None Done
010	Positive/elevated
020	Negative/normal; within normal limits
030	Borderline; undetermined whether positive or negative
080	Ordered, but results not in chart
999	Not documented in patient record Unknown or no information

Ovary

CS Site-Specific Factor 2

Code	Description
888	Not applicable for this site

Ovary

CS Site-Specific Factor 3

Code	Description
888	Not applicable for this site

Ovary

CS Site-Specific Factor 4

Code	Description
888	Not applicable for this site

Ovary

CS Site-Specific Factor 5

Code	Description
888	Not applicable for this site

Ovary

CS Site-Specific Factor 6

Code	Description
888	Not applicable for this site

Page left blank.

Fallopian Tube

C57.0

C57.0 Fallopian tube

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		

Fallopian Tube

CS Tumor Size

SEE STANDARD TABLE

Fallopian Tube

CS Extension

Note 1: Positive regional lymph nodes (FIGO Stage IIIC) are coded in the CS Lymph Nodes field.

Note 2: Codes 13 and 71: Since "malignant ascites or malignant peritoneal washings" was not specifically categorized in the 1977 Summary Staging Guide, it is unclear to which stage previous cases may have been coded.

Note 3: Liver capsule metastases are coded to 75-78 in the Extension field; liver parenchymal metastases are coded in the Mets at DX field.

Code	Description	TNM	SS77	SS2000
00	In situ: noninvasive, intraepithelial Limited to tubal mucosa FIGO Stage 0	Tis	IS	IS
10	Confined to fallopian tube, NOS FIGO Stage I	T1NOS	L	L
11	Confined to one fallopian tube WITHOUT penetrating serosal surface; no ascites FIGO Stage IA	T1a	L	L
12	Confined to both fallopian tubes WITHOUT penetrating serosal surface; no ascites FIGO Stage IB	T1b	L	L
13	Extension onto or through tubal serosa Malignant ascites Malignant peritoneal washings FIGO Stage IC	T1c	L	L
30	Localized, NOS FIGO Stage I	T1NOS	L	L
35	Pelvic extension, NOS with no malignant cells in peritoneal washings FIGO Stage II	T2NOS	RE	RE

Collaborative Staging Manual and Coding Instructions Part II: Primary Site Schema

40	Extension or metastasis to: Corpus uteri Ovary, ipsilateral Uterus, NOS FIGO Stage IIA	T2a	RE	RE
50	Extension or metastasis to: Broad ligament, ipsilateral Mesosalpinx, ipsilateral Peritoneum FIGO Stage IIB	T2b	RE	RE
60	Ovary, contralateral FIGO Stage IIA	T2a	D	RE
65	Extension or metastasis to: Cul de sac (rectouterine pouch) Rectosigmoid Sigmoid Small intestine FIGO IIB	T2b	D	RE
70	Extension or metastasis to: Omentum FIGO Stage IIB	T2b	D	RE
71	Pelvic extension (codes 35 to 70) WITH malignant cells in ascites or peritoneal washings FIGO Stage IIC	T2c	D	RE
75	Peritoneal implants outside the pelvis, NOS FIGO Stage III	T3NOS	D	D
76	Microscopic peritoneal metastasis outside the pelvis FIGO Stage IIIA	T3a	D	D
77	Macroscopic peritoneal metastasis less than or equal to 2 cm outside the pelvis FIGO Stage IIIB	T3b	D	D
78	Peritoneal metastases greater than 2 cm FIGO Stage IIIC	T3c	D	D
80	Further contiguous extension FIGO Stage III	T3NOS	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

Fallopian Tube
CS TS/Ext-Eval
SEE STANDARD TABLE

Collaborative Staging Manual and Coding Instructions Part II: Primary Site Schema

Fallopian Tube

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/definitive surgery is done with no mention of lymph nodes, assume nodes are negative.

Note 4: Regional nodes includes bilateral and contralateral involvement of named nodes.

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 Pelvic, NOS	N1	RN	RN
12	Regional lymph node(s): Lateral sacral (laterosacral) Presacral	N1	D	RN
20	Regional lymph node(s): Aortic, NOS: Lateral (lumbar) Para-aortic Periaortic Retroperitoneal, NOS	N1	RN	RN
22	(12) + (20)	N1	D	RN
30	Regional lymph node(s): Inguinal	N1	D	RN
50	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

Fallopian Tube

CS Reg Nodes Eval

SEE STANDARD TABLE

Fallopian Tube

Reg LN Pos

SEE STANDARD TABLE

Fallopian Tube

Reg LN Exam

SEE STANDARD TABLE

**Fallopian Tube
CS Mets at DX**

Code	Description	TNM	SS77	SS2000
00	No; none	M0	NONE	NONE
10	Distant lymph node(s), NOS	M1	D	D
40	Distant metastases, except distant lymph node(s) (code 10), including: Liver parenchymal metastasis Pleural effusion WITH positive cytology 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

**Fallopian Tube
CS Mets Eval
SEE STANDARD TABLE**

**Fallopian Tube
CS Site-Specific Factor 1**

Code	Description
888	Not applicable for this site

**Fallopian Tube
CS Site-Specific Factor 2**

Code	Description
888	Not applicable for this site

**Fallopian Tube
CS Site-Specific Factor 3**

Code	Description
888	Not applicable for this site

**Fallopian Tube
CS Site-Specific Factor 4**

Code	Description
888	Not applicable for this site

Fallopian Tube

CS Site-Specific Factor 5

Code	Description
888	Not applicable for this site

Fallopian Tube

CS Site-Specific Factor 6

Code	Description
888	Not applicable for this site

Page left blank.

Broad and Round Ligaments, Parametrium, Uterine Adnexa

C57.1-C57.4

C57.1 Broad ligament

C57.2 Round ligament

C57.3 Parametrium

C57.4 Uterine adnexa

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

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

Broad and Round Ligaments, Parametrium, Uterine Adnexa

CS Tumor Size

SEE STANDARD TABLE

Broad and Round Ligaments, Parametrium, Uterine Adnexa

CS Extension

Code	Description	TNM	SS77	SS2000
00	In situ; non-invasive; intraepithelial	NA	IS	IS
10	Confined to tissue or organ of origin	NA	L	L
30	Localized, NOS	NA	L	L
40	Corpus uteri Ovary, ipsilateral Uterus, NOS	NA	RE	RE
50	Fallopian tube for ligaments Mesosalpinx, ipsilateral Peritoneum	NA	RE	RE
70	Cervix uteri Cul de sac (rectouterine pouch) Omentum Ovary, contralateral Rectosigmoid Sigmoid Small intestine	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

**Broad and Round Ligaments, Parametrium, Uterine Adnexa
CS TS/Ext-Eval**

Code	Description	Staging Basis
9	Not applicable for this site	NA

**Broad and Round Ligaments, Parametrium, Uterine Adnexa
CS Lymph Nodes**

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

Code	Description	TNM	SS77	SS2000
00	None; no regional lymph node involvement	NA	NONE	NONE
10	Regional lymph node(s): Aortic, NOS: Lateral (lumbar) Para-aortic Periaortic Iliac, NOS: Common External Internal (hypogastric): Obturator Inguinal Lateral sacral (laterosacral) Pelvic, NOS Retroperitoneal, NOS Regional lymph node(s), NOS	NA	RN	RN
80	Lymph nodes, NOS	NA	RN	RN
99	Unknown; not stated Regional lymph node(s) cannot be assessed Not documented in patient record	NA	U	U

**Broad and Round Ligaments, Parametrium, Uterine Adnexa
CS Reg Nodes Eval**

Code	Description	Staging Basis
9	Not applicable for this site	NA

**Broad and Round Ligaments, Parametrium, Uterine Adnexa
Reg LN Pos
SEE STANDARD TABLE**

**Broad and Round Ligaments, Parametrium, Uterine Adnexa
Reg LN Exam
SEE STANDARD TABLE**

**Broad and Round Ligaments, Parametrium, Uterine Adnexa
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

**Broad and Round Ligaments, Parametrium, Uterine Adnexa
CS Mets Eval**

Code	Description	Staging Basis
9	Not applicable for this site	NA

**Broad and Round Ligaments, Parametrium, Uterine Adnexa
CS Site-Specific Factor 1**

Code	Description
888	Not applicable for this site

**Broad and Round Ligaments, Parametrium, Uterine Adnexa
CS Site-Specific Factor 2**

Code	Description
888	Not applicable for this site

**Broad and Round Ligaments, Parametrium, Uterine Adnexa
CS Site-Specific Factor 3**

Code	Description
888	Not applicable for this site

Broad and Round Ligaments, Parametrium, Uterine Adnexa

CS Site-Specific Factor 4

Code	Description
888	Not applicable for this site

Broad and Round Ligaments, Parametrium, Uterine Adnexa

CS Site-Specific Factor 5

Code	Description
888	Not applicable for this site

Broad and Round Ligaments, Parametrium, Uterine Adnexa

CS Site-Specific Factor 6

Code	Description
888	Not applicable for this site

Other and Unspecified Female Genital Organs

C57.7-C57.9

C57.7 Other specified parts of female genital organs

C57.8 Overlapping lesion of female genital organs

C57.9 Female genital tract, NOS

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

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

Other and Unspecified Female Genital Organs

CS Tumor Size

SEE STANDARD TABLE

Other and Unspecified Female Genital Organs

CS Extension

Code	Description	TNM	SS77	SS2000
00	In situ; non-invasive; intraepithelial	NA	IS	IS
10	Confined to site of origin	NA	L	L
30	Localized, NOS	NA	L	L
40	Adjacent connective tissue (See definition in General Instructions)	NA	RE	RE
60	Adjacent organs/structures: Female genital organs: Adnexa Broad ligament(s) Cervix uteri Corpus uteri Fallopian tube(s) Ovary(ies) Parametrium Round ligament(s) Uterus, NOS Vagina	NA	RE	RE
80	Further contiguous extension: Other organs of pelvis	NA	D	D
95	No evidence of primary tumor	NA	U	U
99	Unknown extension Primary tumor cannot be assessed Not documented in patient record	NA	U	U

Other and Unspecified Female Genital Organs

CS TS/Ext-Eval

Code	Description	Staging Basis
9	Not applicable for this site	NA

Other and Unspecified Female Genital Organs

CS Lymph Nodes

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

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

Other and Unspecified Female Genital Organs

CS Reg Nodes Eval

Code	Description	Staging Basis
9	Not applicable for this site	NA

Other and Unspecified Female Genital Organs

Reg LN Pos

SEE STANDARD TABLE

Other and Unspecified Female Genital Organs

Reg LN Exam

SEE STANDARD TABLE

Other and Unspecified Female Genital Organs

CS Mets at DX

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

Other and Unspecified Female Genital Organs

CS Mets Eval

Code	Description	Staging Basis
9	Not applicable for this site	NA

Other and Unspecified Female Genital Organs

CS Site-Specific Factor 1

Code	Description
888	Not applicable for this site

Other and Unspecified Female Genital Organs

CS Site-Specific Factor 2

Code	Description
888	Not applicable for this site

Other and Unspecified Female Genital Organs

CS Site-Specific Factor 3

Code	Description
888	Not applicable for this site

Other and Unspecified Female Genital Organs

CS Site-Specific Factor 4

Code	Description
888	Not applicable for this site

Other and Unspecified Female Genital Organs

CS Site-Specific Factor 5

Code	Description
888	Not applicable for this site

Other and Unspecified Female Genital Organs

CS Site-Specific Factor 6

Code	Description
888	Not applicable for this site

Collaborative Staging Manual and Coding Instructions Part II: Primary Site Schema

Placenta

C58.9

C58.9 Placenta

Note 1: This schema correlates to the AJCC's Gestational Trophoblastic Tumors scheme. In most cases, gestational trophoblastic tumors (ICD-O-3 morphology codes 9100-9105) are coded to placenta, C58.9.

Note 2: If a trophoblastic tumor is not associated with a pregnancy and arises in another site, such as ovary, use the primary site code and Collaborative Staging schema for that site.

CS Tumor Size CS Extension CS TS/Ext-Eval CS Lymph Nodes Reg Nodes Eval Reg LN Pos Reg LN Exam CS Mets at DX CS Mets Eval	CS Site-Specific Factor 1 - Prognostic Scoring Index Table 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
---	---	--

Placenta

CS Tumor Size

SEE STANDARD TABLE

Placenta

CS Extension

Note 1: Substaging of gestational trophoblastic tumors are determined by the value coded in the Prognostic Scoring Index Table, using Site Specific Factor 1. See note in Site Specific Factor 1, Prognostic Index Table to determine the prognostic index score.

Note 2: For this schema, according to AJCC, involvement of genital structures may be either by direct extension or metastasis and is still T2. For Collaborative Staging, metastasis to genital structures should be coded 70 in CS Extension and not coded in CS Mets at DX.

Code	Description	TNM	SS77	SS2000
00	In situ: Noninvasive; intraepithelial FIGO Stage 0	Tis	IS	IS
10	Confined to placenta FIGO Stage I	T1	L	L
30	Localized, NOS FIGO Stage I	T1	L	L
40	Adjacent connective tissue, NOS FIGO Stage II	T2	RE	RE
60	Other genital structures by direct extension or NOS: Broad ligament Cervix Corpus uteri Fallopian tube(s) Genital structures, NOS Ovary(ies) Uterus, NOS Vagina FIGO Stage II	T2	RE	RE

Collaborative Staging Manual and Coding Instructions Part II: Primary Site Schema

70	Other genital structures, by metastasis: Broad ligament Cervix Corpus uteri Fallopian tube(s) Genital structures, NOS Ovary(ies) Uterus, NOS Vagina FIGO Stage II	T2	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

Note: For codes 10 - 80, the substaging is determined by using the Risk Scores in the Prognostic Scoring Index in Site Specific Factor 1 Table.

Placenta

CS TS/Ext-Eval

SEE STANDARD TABLE

Placenta

CS Lymph Nodes

Code	Description	TNM	SS77	SS2000
88	Not applicable	NA	U	U

Placenta

Reg Nodes Eval

Code	Description	
9	Does not apply	NA

Placenta

Reg LN Pos

Code	Description
99	Does not apply

Placenta

Reg LN Exam

Code	Description
99	Does not apply

Collaborative Staging Manual and Coding Instructions Part II: Primary Site Schema

Placenta

CS Mets at DX

Note 1: All lymph node involvement is considered M1 in TNM, so all lymph node involvement, whether regional or distant nodes, is coded in the field Mets at DX.

Note 2: According to AJCC, metastasis to genital structures is considered T2 and not M1 for GTT. For this Collaborative Staging schema, metastasis to genital structures is coded 70 in CS Extension and not coded in CS Mets at DX.

Code	Description	TNM	SS77	SS2000
00	No; none	M0	NONE	NONE
10	Metastasis to lung(s) only, NOS FIGO III	M1a	D	D
20	Regional lymph nodes: Iliac, NOS: Common External Internal (hypogastric), NOS Obturator Parametrial Pelvic, NOS Sacral, NOS: Lateral Presacral Promontory (Gerota's) Uterosacral	M1b	RN	RN
30	Regional lymph nodes: Aortic, NOS: Lateral Para-aortic Periaortic	M1b	RN	RN
35	(20) + (30)	M1b	RN	RN
40	Regional lymph node(s), NOS	M1b	RN	RN
50	Distant lymph node(s), NOS	M1b	D	D
51	Distant lymph node(s): Superficial inguinal (femoral)	M1b	D	D
52	Specified distant lymph node(s) other than in code 51	M1b	D	D
60	Lymph nodes, NOS	M1b	D	D
70	Distant metastases, other than lymph node(s) or lung Distant metastasis, NOS Carcinomatosis	M1b	D	D
80	(70) + any of [(10) to (60)]	M1b	D	D
99	Unknown Distant metastasis cannot be assessed Not documented in patient record	MX	U	U

Placenta

CS Mets Eval

SEE STANDARD TABLE

Placenta

CS Site-Specific Factor 1 Prognostic Scoring Index Table 1

Note: Clinician scoring is recommended. If any one of the factors is unknown, stop trying to assign score, unless you have already determined with the factors you have - low risk or high risk. The score on the Prognostic Scoring Index is used to substage patients. Substage A (low risk) and Substage B (high risk) are assigned on the basis of a non-anatomic risk factor scoring system:

- AGE [Score 0: age less than or equal to 40; Score 1: age 40 or more]
- ANTECEDENT PREG [Score 0: Hydatidiform mole; Score 1: Abortion; Score 2: Term pregnancy]
- MONTHS FROM INDEX PREG [Score 0: less than 4; Score 1: 4 months and less than 7 months; Score 2: 7 months to 12 months; Score 4: More than 12 months]
- PRETREATMENT SERUM hCG(IU/ml) [Score 0: <10 to 3rd power, (1,000); Score 1: 10-3rd power to 10-4th power (1,000 to less than 10,000); Score 2: 10-4th power to less than 10-5th power (10,000 to less than 100,000); Score 4: greater than or equal to 10-5th power (100,000 or greater)]
- LARGEST TUMOR SIZE, INCLUDING UTERUS [Score 0: < 3 cm; Score 1: 3-<5 cm; Score 2: greater than or equal to 5 cm]
- SITES OF METS [Score 0: Lung only or None; Score 1: Spleen, kidney; Score 2: Gastrointestinal tract; Score 4: Liver, brain]
- NUMBER OF METS [Score 0: 0; Score 1: 1-4; Score 2: 5-8; Score 4: >8]
- PREVIOUS FAILED CHEMOTHERAPY [Score 2: Single drug; Score 4: 2 or more drugs]. Sum the score of each prognostic risk factor(s) to determine the final Prognostic Scoring Index in the table below:

Code	Description
000	Clinician stated no risk factors
001	Clinician stated low risk (sum score of 7 or less) Stated to be substage A, but score not specified
002	Clinician stated high risk (sum score of 8 or greater or NOS) Stated to be substage B, but score not specified
200	Clinician stated to have risk factors, but unknown whether low or high risk.
999	Unknown Risk factors cannot be assessed Not documented in patient record

Placenta

CS Site-Specific Factor 2

Code	Description
888	Not applicable for this site

Placenta

CS Site-Specific Factor 3

Code	Description
888	Not applicable for this site

Placenta

CS Site-Specific Factor 4

Code	Description
888	Not applicable for this site

Collaborative Staging Manual and Coding Instructions Part II: Primary Site Schema

Placenta

CS Site-Specific Factor 5

Code	Description
888	Not applicable for this site

Placenta

CS Site-Specific Factor 6

Code	Description
888	Not applicable for this site

Page left blank.

Penis [excl Malignant Melanoma, Kaposi Sarcoma, Mycosis Fungoides, Sezary Disease and Other Lymphomas]

C60.0-C60.2, C60.8-C60.9

C60.0 Prepuce

C60.1 Glans penis

C60.2 Body of penis

C60.8 Overlapping lesion of penis

C60.9 Penis, NOS

Note: This schema is NOT used for Malignant Melanoma, Kaposi Sarcoma, Mycosis Fungoides, Sezary Disease, or Other Lymphomas. Each of these diseases has a separate schema.

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		

Penis [excl Malignant Melanoma, Kaposi Sarcoma, Mycosis Fungoides, Sezary Disease and Other Lymphomas]

CS Tumor Size

SEE STANDARD TABLE

Penis [excl Malignant Melanoma, Kaposi Sarcoma, Mycosis Fungoides, Sezary Disease and Other Lymphomas]

CS Extension

Code	Description	TNM	SS77	SS2000
00	In situ: noninvasive; Bowen disease; intraepithelial	Tis	IS	IS
05	Noninvasive verrucous carcinoma	Ta	IS	IS
10	Invasive tumor limited to subepithelial connective tissue, but not involving corpus spongiosum or cavernosum If primary is skin: invasive tumor limited to skin of penis, prepuce (foreskin) and/or glans	T1	L	L
30	Localized, NOS	T1	L	L
35	For body of penis ONLY: Corpus cavernosum Corpus spongiosum Tunica albuginea of corpus spongiosum	T2	L	L
40	Corpus cavernosum except for tumor in body of penis Corpus spongiosum except for tumor in body of penis Tunica albuginea of corpus spongiosum except for tumor in body of penis	T2	RE	RE
50	Satellite nodule(s) on prepuce or glans	T1	RE	RE

Collaborative Staging Manual and Coding Instructions Part II: Primary Site Schema

60	Urethra Prostate	T3	RE	RE
70	Adjacent structures: Muscle, NOS: Bulbospongiosus Ischiocavernosus Superficial transverse perineal Skin: Abdominal Perineum Pubic Scrotal	T4	RE	RE
80	Further contiguous extension Testis	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

Penis [excl Malignant Melanoma, Kaposi Sarcoma, Mycosis Fungoides, Sezary Disease and Other Lymphomas]

CS TS/Ext-Eval

SEE STANDARD TABLE

Penis [excl Malignant Melanoma, Kaposi Sarcoma, Mycosis Fungoides, Sezary Disease and Other Lymphomas]

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/definitive surgery is done with no mention of lymph nodes, assume nodes are negative.

Code	Description	TNM	SS77	SS2000
00	No regional lymph node involvement	N0	NONE	NONE
10	SINGLE superficial inguinal (femoral) regional lymph node	N1	RN	RN
20	Multiple OR bilateral superficial inguinal (femoral) regional lymph nodes	N2	RN	RN
30	Regional lymph nodes: Deep inguinal, NOS: Node of Cloquet or Rosenmuller (highest deep inguinal)	N3	RN	RN
40	Regional lymph nodes: External iliac Internal iliac (hypogastric) Obturator Pelvic nodes, NOS	N3	RN	RN
50	Regional Lymph Node(s), NOS	N1	RN	RN

Collaborative Staging Manual and Coding Instructions Part II: Primary Site Schema

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

**Penis [excl Malignant Melanoma, Kaposi Sarcoma, Mycosis Fungoides, Sezary Disease and Other Lymphomas]
CS Reg Nodes Eval
SEE STANDARD TABLE**

**Penis [excl Malignant Melanoma, Kaposi Sarcoma, Mycosis Fungoides, Sezary Disease and Other Lymphomas]
Reg LN Pos
SEE STANDARD TABLE**

**Penis [excl Malignant Melanoma, Kaposi Sarcoma, Mycosis Fungoides, Sezary Disease and Other Lymphomas]
Reg LN Exam
SEE STANDARD TABLE**

**Penis [excl Malignant Melanoma, Kaposi Sarcoma, Mycosis Fungoides, Sezary Disease and Other Lymphomas]
CS Mets at DX
SEE STANDARD TABLE**

**Penis [excl Malignant Melanoma, Kaposi Sarcoma, Mycosis Fungoides, Sezary Disease and Other Lymphomas]
CS Mets Eval
SEE STANDARD TABLE**

**Penis [excl Malignant Melanoma, Kaposi Sarcoma, Mycosis Fungoides, Sezary Disease and Other Lymphomas]
CS Site-Specific Factor 1**

Code	Description
888	Not applicable for this site

**Penis [excl Malignant Melanoma, Kaposi Sarcoma, Mycosis Fungoides, Sezary Disease and Other Lymphomas]
CS Site-Specific Factor 2**

Code	Description
888	Not applicable for this site

Collaborative Staging Manual and Coding Instructions Part II: Primary Site Schema

Penis [excl Malignant Melanoma, Kaposi Sarcoma, Mycosis Fungoides, Sezary Disease and Other Lymphomas]

CS Site-Specific Factor 3

Code	Description
888	Not applicable for this site

Penis [excl Malignant Melanoma, Kaposi Sarcoma, Mycosis Fungoides, Sezary Disease and Other Lymphomas]

CS Site-Specific Factor 4

Code	Description
888	Not applicable for this site

Penis [excl Malignant Melanoma, Kaposi Sarcoma, Mycosis Fungoides, Sezary Disease and Other Lymphomas]

CS Site-Specific Factor 5

Code	Description
888	Not applicable for this site

Penis [excl Malignant Melanoma, Kaposi Sarcoma, Mycosis Fungoides, Sezary Disease and Other Lymphomas]

CS Site-Specific Factor 6

Code	Description
888	Not applicable for this site

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 - Prostatic Specific Antigen (PSA) Lab Value	The following tables are available at the collaborative staging website: Histology Exclusion Table AJCC Stage
CS Extension-Clinical Extension	CS Site-Specific Factor 2 - Prostatic Specific Antigen (PSA)	
CS TS/Ext-Eval	CS Site-Specific Factor 3 - CS Extension - Pathologic Extension	
CS Lymph Nodes	CS Site-Specific Factor 4 - Prostatic Acid Phosphatase (PAP)	
CS Reg Nodes Eval	CS Site-Specific Factor 5 - Gleason's Primary Pattern and Secondary Pattern Value	
Reg LN Pos	CS Site-Specific Factor 6 - Gleason's Score	
Reg LN Exam		
CS Mets at DX		
CS Mets Eval		

Prostate

CS Tumor Size

SEE STANDARD TABLE

Prostate

CS Extension-Clinical Extension

Note 1: Information from prostatectomy is EXCLUDED from this field. See Site-Specific Factor 3, CS Extension - Pathologic Extension.

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 33 and 34 have precedence over code 31.

E. CODES 41 to 49 are used for extension beyond the prostate.

Note 3: 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 4: Involvement of the prostatic urethra does not alter the extension code.

Note 5: "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 6: 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 7: This schema includes evaluation of other pathologic tissue such as a biopsy of the rectum.

Note 8: 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. If the value of Site-Specific Factor 3 is less than 096 (i.e., prostatectomy was done and extension information is available for staging), the T category is taken from the Site-Specific Factor 3 mapping, and identified as a pT. Otherwise (i.e., Site-Specific Factor 3 code is 096 or greater, meaning that prostatectomy was not performed, or it was performed but the information is not usable for staging), the T category is taken from the CS Extension mapping, and the c, p, y, or a indicator is taken from the TS/Ext Eval mapping.

Collaborative Staging Manual and Coding Instructions Part II: Primary Site Schema

Prostate

CS Extension-Clinical Extension, *continued*

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	Into prostatic apex/arising in prostatic apex, NOS	T2NOS	L	L
33	Arising in prostatic apex	T2NOS	L	L
34	Extending into prostatic apex	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
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	T4	RE	RE

Collaborative Staging Manual and Coding Instructions Part II: Primary Site Schema

50, cont'd	Fixation, NOS Rectovesical (Denonvillier's) fascia Rectum; external sphincter			
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 prostatectomy, 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 prostatectomy, 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
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

Collaborative Staging Manual and Coding Instructions Part II: Primary Site Schema

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

Prostate

Reg LN Pos

SEE STANDARD TABLE

Collaborative Staging Manual and Coding Instructions Part II: Primary Site Schema

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)
002-899	0.2 - 89.9 ng/ml (actual value with implied decimal point)
990	99.0 or greater ng/ml (actual value with implied decimal point)
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: 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 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 060.

Note 6: 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 7: 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.

Collaborative Staging Manual and Coding Instructions Part II: Primary Site Schema

Prostate

CS Site-Specific Factor 3 CS Extension - Pathologic Extension, *continued*

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	Into prostatic apex/arising in prostatic apex, NOS (see also codes 033 and 034)	T2NOS	L	L
032	Invasion into (but not beyond) prostatic capsule	T2NOS	L	L
033	Arising in prostatic apex	T2NOS	L	L
034	Extending into prostatic apex	T2NOS	L	L
040	No extracapsular extension but margins involved (See Note 4)	T3NOS	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	T3NOS	RE	RE
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	T4	D	D

Collaborative Staging Manual and Coding Instructions Part II: Primary Site Schema

70, cont'd	Soft tissue other than periprostatic tissue Other organs			
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 was done within first course of treatment, but there was 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 Prostatic Acid Phosphatase (PAP)

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 5 Gleason's Primary Pattern and Secondary Pattern Value

Note: 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'.

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

Collaborative Staging Manual and Coding Instructions Part II: Primary Site Schema

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
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 the pathologist gives only one number and it is less than or equal to 5, assume that it describes a pattern. If only one number is given and it is greater than 5, assume that it is a score. 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.

Note 2: Record the Gleason's score based on the addition of the primary and secondary pattern.

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

Collaborative Staging Manual and Coding Instructions Part II: Primary Site Schema

Testis

C62.0-C62.1, C62.9

C62.0 Undescended testis

C62.1 Descended testis

C62.9 Testis, 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 - Alpha Fetoprotein (AFP) CS Site-Specific Factor 2 - Human chorionic gonadotropin (hCG) CS Site-Specific Factor 3 - LDH CS Site-Specific Factor 4 - Radical Orchiectomy Performed CS Site-Specific Factor 5 - Size of Metastasis in Lymph Nodes CS Site-Specific Factor 6	The following tables are available at the collaborative staging website: Histology Exclusion Table AJCC Stage Serum Marker S Value Table Extension Orchiectomy Table Number Positive Lymph Nodes and Size of Metastasis in Lymph Nodes
--	--	--

Testis

CS Tumor Size

SEE STANDARD TABLE

Testis

CS Extension

Note 1: Laterality must be coded for this site.

Note 2: According to AJCC, "Except for pTis and pT4, extent of primary tumor for TNM is classified by radical orchiectomy. TX is used for other categories in the absence of radical orchiectomy." For Collaborative Staging, this means that the categories of T1, T2, and T3 are derived only when Site Specific Factor 4 indicates that a radical orchiectomy was performed. See the Extension Orchiectomy table for details.

Code	Description	TNM	SS77	SS2000
00	In situ: noninvasive; intraepithelial Intratubular germ cell neoplasia	Tis	IS	IS
10	Invasive tumor WITHOUT vascular/lymphatic invasion, or presence of vascular/lymphatic invasion or NOS Body of testis Rete testis Tunica albuginea	*	L	L
15	Invasive tumor WITH vascular/lymphatic invasion Body of testis Rete testis Tunica albuginea	*	L	L
20	Tunica vaginalis involved Surface implants	*	L	L
30	Localized, NOS	*	L	L
31	Tunica, NOS	TX	L	L
40	Epididymis involved WITHOUT vascular/lymphatic invasion, or presence of vascular/lymphatic invasion not stated	*	RE	RE
45	Epididymis involved WITH vascular/lymphatic invasion	*	RE	RE

Collaborative Staging Manual and Coding Instructions Part II: Primary Site Schema

50	Spermatic cord, ipsilateral Vas deferens	*	RE	RE
60	Dartos muscle, ipsilateral Scrotum, ipsilateral	T4	RE	RE
70	Extension to scrotum, contralateral Ulceration of scrotum	T4	D	D
75	Penis	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, 15, 20, 30, 40, 45, and 50, the T category is assigned based on the values of CS Extension and Site-Specific Factor 4 (Radical Orchiectomy Performed), using the Extension/Orchiectomy extra table.

Testis

CS TS/Ext-Eval

SEE STANDARD TABLE

Testis

CS Lymph Nodes

Note 1: Regional nodes in codes 10-30 include contralateral and bilateral nodes.

Note 2: Involvement of inguinal, pelvic, or external iliac lymph nodes in the absence of previous scrotal or inguinal surgery is coded in CS Mets at DX, as distant lymph node involvement.

Code	Description	TNM	SS77	SS2000
00	No regional lymph node involvement	N0	NONE	NONE
10	Regional lymph node(s) (bilateral and contralateral): Aortic, NOS: Lateral (lumbar) Para-aortic Periaortic Preaortic Retroaortic Retroperitoneal, NOS Spermatic vein Regional lymph node(s), NOS	*	RN	RN
20	Regional lymph node(s) (bilateral and contralateral): Pericaval, NOS: Interaortocaval Paracaval Precaval Retrocaval	*	D	RN
30	Regional lymph node(s) (bilateral and contralateral): Pelvic, NOS External iliac WITH previous scrotal or inguinal surgery	*	RN	RN

Collaborative Staging Manual and Coding Instructions Part II: Primary Site Schema

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
13	Specified distant lymph node(s), other than code (11) or (12) Distant lymph node(s), NOS	M1a	D	D

Collaborative Staging Manual and Coding Instructions Part II: Primary Site Schema

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	M1NOS	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) 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: 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.

Code	Description
000	No lymph node metastasis
001	Lymph node metastasis mass 2 cm or less in greatest dimension 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

Collaborative Staging Manual and Coding Instructions Part II: Primary Site Schema

Testis

CS Site-Specific Factor 6

Code	Description
888	Not applicable for this site

**Other and Unspecified Male Genital Organs (excluding: Kaposi Sarcoma and Lymphoma)
C63.0-C63.1, C63.7-C63.9**

- C63.0 Epididymis
- C63.1 Spermatic cord
- C63.7 Other specified parts of male genital organs
- C63.8 Overlapping lesion of male genital organs
- C63.9 Male genital organs, NOS

Note 1: AJCC does not define TNM staging for this site.

Note 2: Laterality must be coded for C63.0-C63.1.

Note 3: Carcinoma of the scrotum is included in the scrotum schema. Melanoma (M-8720-8790) of scrotum is included in the melanoma skin schema. Mycosis fungoides (M-9700) or Sezary disease (M-9701) of scrotum is included in the mycosis fungoides schema. Melanoma, mycosis fungoides, or Sezary disease of any other site listed is coded using this schema. Kaposi sarcoma of all sites is included in the Kaposi sarcoma schema, and lymphomas of all sites are included in the lymphoma schema.

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

**Other and Unspecified Male Genital Organs (excluding: Kaposi Sarcoma and Lymphoma)
CS Tumor Size
SEE STANDARD TABLE**

**Other and Unspecified Male Genital Organs (excluding: Kaposi Sarcoma and Lymphoma)
CS Extension**

Code	Description	TNM	SS77	SS2000
00	In situ: noninvasive; intraepithelial	NA	IS	IS
10	Confined to site of origin	NA	L	L
30	Localized, NOS	NA	L	L
40	Adjacent connective tissue (See definition of connective tissue in the general instructions)	NA	RE	RE
60	Adjacent organs/structures: Male genital organs: Penis Prostate Testis Sites in this schema which are not the primary	NA	RE	RE
80	Further contiguous extension Other organs and structures in male pelvis: Bladder Rectum Urethra	NA	D	D

Collaborative Staging Manual and Coding Instructions Part II: Primary Site Schema

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

**Other and Unspecified Male Genital Organs (excluding: Kaposi Sarcoma and Lymphoma)
CS TS/Ext-Eval**

Code	Description	Staging Basis
9	Not applicable for this site	NA

**Other and Unspecified Male Genital Organs (excluding: Kaposi Sarcoma and Lymphoma)
CS Lymph Nodes**

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

Code	Description	TNM	SS77	SS2000
00	None; no regional lymph node involvement	NA	NONE	NONE
10	Regional lymph node(s) Iliac, NOS: External Internal (hypogastric), NOS: Obturator Inguinal, NOS: Deep inguinal, NOS: Node of Cloquet or Rosenmuller (highest deep inguinal) Superficial inguinal (femoral) Pelvic, NOS Regional lymph node(s), NOS	NA	RN	RN
80	Lymph nodes, NOS	NA	RN	RN
99	Unknown; not stated Regional lymph node(s) cannot be assessed	NA	U	U

**Other and Unspecified Male Genital Organs (excluding: Kaposi Sarcoma and Lymphoma)
CS Reg Nodes Eval**

Code	Description	Staging Basis
9	Not applicable for this site	NA

**Other and Unspecified Male Genital Organs (excluding: Kaposi Sarcoma and Lymphoma)
Reg LN Pos
SEE STANDARD TABLE**

**Other and Unspecified Male Genital Organs (excluding: Kaposi Sarcoma and Lymphoma)
Reg LN Exam
SEE STANDARD TABLE**

Collaborative Staging Manual and Coding Instructions Part II: Primary Site Schema

**Other and Unspecified Male Genital Organs (excluding: Kaposi Sarcoma and Lymphoma)
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 and Unspecified Male Genital Organs (excluding: Kaposi Sarcoma and Lymphoma)
CS Mets Eval**

Code	Description	Staging Basis
9	Not applicable for this site	NA

**Other and Unspecified Male Genital Organs (excluding: Kaposi Sarcoma and Lymphoma)
CS Site-Specific Factor 1**

Code	Description
888	Not applicable for this site

**Other and Unspecified Male Genital Organs (excluding: Kaposi Sarcoma and Lymphoma)
CS Site-Specific Factor 2**

Code	Description
888	Not applicable for this site

**Other and Unspecified Male Genital Organs (excluding: Kaposi Sarcoma and Lymphoma)
CS Site-Specific Factor 3**

Code	Description
888	Not applicable for this site

**Other and Unspecified Male Genital Organs (excluding: Kaposi Sarcoma and Lymphoma)
CS Site-Specific Factor 4**

Code	Description
888	Not applicable for this site

**Other and Unspecified Male Genital Organs (excluding: Kaposi Sarcoma and Lymphoma)
CS Site-Specific Factor 5**

Code	Description
888	Not applicable for this site

**Other and Unspecified Male Genital Organs (excluding: Kaposi Sarcoma and Lymphoma)
CS Site-Specific Factor 6**

Code	Description
888	Not applicable for this site

Collaborative Staging Manual and Coding Instructions Part II: Primary Site Schema

Scrotum [excl. Malignant Melanoma, Kaposi Sarcoma, Mycosis Fungoides, Sezary Disease, and Other Lymphomas]

C63.2 Scrotum, NOS

Note: Melanoma (M-8720-8790) of scrotum is included in the melanoma schema. Mycosis Fungoides (M-9700) or Sezary disease (M-9701) of scrotum is included in the Mycosis Fungoides schema. Kaposi sarcoma of the scrotum is included in the Kaposi Sarcoma schema. Lymphoma of the scrotum is included in the lymphoma schema.

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		

Scrotum [excl. Malignant Melanoma, Kaposi Sarcoma, Mycosis Fungoides, Sezary Disease, and Other Lymphomas]

CS Tumor Size

SEE STANDARD TABLE

Scrotum [excl. Malignant Melanoma, Kaposi Sarcoma, Mycosis Fungoides, Sezary Disease, and Other Lymphomas]

CS Extension

Code	Description	TNM	SS77	SS2000
00	In situ; noninvasive; intraepidermal	Tis	IS	IS
10	Confined to scrotum	*	L	L
30	Localized, NOS	*	L	L
40	Adjacent connective tissue (See definition of connective tissue in general instructions)	*	RE	RE
60	Adjacent organs/structures Male genital organs: Epididymis Penis Prostate Spermatic cord Testis	T4	RE	RE
80	Further contiguous extension Other organs and structures in male pelvis: Bladder Rectum Urethra	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 CS Extension codes 10, 30 and 40 ONLY, the T category is assigned based on the value of CS Tumor Size, as shown in the Extension Size table for this site.

Collaborative Staging Manual and Coding Instructions Part II: Primary Site Schema

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

Scrotum [excl. Malignant Melanoma, Kaposi Sarcoma, Mycosis Fungoides, Sezary Disease, and Other Lymphomas]
CS Lymph Nodes

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

Code	Description	TNM	SS77	SS2000
00	None; no regional lymph node involvement	N0	NONE	NONE
10	Regional lymph nodes Iliac, NOS: External Internal (hypogastric), NOS: Obturator Inguinal, NOS: Deep inguinal, NOS Node of Cloquet or Rosenmuller (highest deep inguinal) Superficial inguinal (femoral) 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

Scrotum [excl. Malignant Melanoma, Kaposi Sarcoma, Mycosis Fungoides, Sezary Disease, and Other Lymphomas]
CS Reg Nodes Eval
SEE STANDARD TABLE

Scrotum [excl. Malignant Melanoma, Kaposi Sarcoma, Mycosis Fungoides, Sezary Disease, and Other Lymphomas]
Reg LN Pos
SEE STANDARD TABLE

Scrotum [excl. Malignant Melanoma, Kaposi Sarcoma, Mycosis Fungoides, Sezary Disease, and Other Lymphomas]
Reg LN Exam
SEE STANDARD TABLE

Scrotum [excl. Malignant Melanoma, Kaposi Sarcoma, Mycosis Fungoides, Sezary Disease, and Other Lymphomas]
CS Mets at DX
SEE STANDARD TABLE

**Scrotum [excl. Malignant Melanoma, Kaposi Sarcoma, Mycosis Fungoides, Sezary Disease, and Other Lymphomas]
CS Mets Eval
SEE STANDARD TABLE**

**Scrotum [excl. Malignant Melanoma, Kaposi Sarcoma, Mycosis Fungoides, Sezary Disease, and Other Lymphomas]
CS Site-Specific Factor 1**

Code	Description
888	Not applicable for this site

**Scrotum [excl. Malignant Melanoma, Kaposi Sarcoma, Mycosis Fungoides, Sezary Disease, and Other Lymphomas]
CS Site-Specific Factor 2**

Code	Description
888	Not applicable for this site

**Scrotum [excl. Malignant Melanoma, Kaposi Sarcoma, Mycosis Fungoides, Sezary Disease, and Other Lymphomas]
CS Site-Specific Factor 3**

Code	Description
888	Not applicable for this site

**Scrotum [excl. Malignant Melanoma, Kaposi Sarcoma, Mycosis Fungoides, Sezary Disease, and Other Lymphomas]
CS Site-Specific Factor 4**

Code	Description
888	Not applicable for this site

**Scrotum [excl. Malignant Melanoma, Kaposi Sarcoma, Mycosis Fungoides, Sezary Disease, and Other Lymphomas]
CS Site-Specific Factor 5**

Code	Description
888	Not applicable for this site

**Scrotum [excl. Malignant Melanoma, Kaposi Sarcoma, Mycosis Fungoides, Sezary Disease, and Other Lymphomas]
CS Site-Specific Factor 6**

Code	Description
888	Not applicable for this site

Page left blank.

Kidney (Renal Parenchyma)

C64.9

C64.9 Kidney, NOS (Renal parenchyma)

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 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		

Kidney (Renal Parenchyma)

CS Tumor Size

SEE STANDARD TABLE

Kidney (Renal Parenchyma)

CS Extension

Note: The parenchyma of the kidney includes the following structures: cortex (outer layer of kidney) and renal columns; medulla, medullary rays, renal pyramids, and renal papillae; nephrons (renal corpuscle, loops of Henle, proximal and distal tubules, collecting duct), glomerulus, and Bowman's capsule. The most common site for renal parenchymal cancer to develop is in the proximal convoluted tubule. Tumor extension from one of these structures into another would be coded to 10 unless there were further signs of involvement.

Code	Description	TNM	SS77	SS2000
00	In situ	Tis	IS	IS
10	Invasive cancer confined to kidney cortex and/or medulla	*	L	L
20	Invasion of renal capsule Renal pelvis or calyces involved Separate focus of tumor in renal pelvis/calyx	*	L	L
30	Localized, NOS	*	L	L
39	Stated as T3, NOS	T3NOS	RE	RE
40	Adrenal (suprarenal) gland, ipsilateral Perirenal (perinephric) tissue/fat Renal (Gerota's) fascia Renal sinus fat Retroperitoneal soft tissue	T3a	RE	RE
60	Blood vessels: Extrarenal portion of renal vein or segmental branches Hilar blood vessel Inferior vena cava below diaphragm Perirenal vein Renal artery Renal vein, NOS Tumor thrombus in a renal vein, NOS	T3b	RE	RE
62	Vena cava above diaphragm or invades the wall of the vena cava	T3c	RE	RE

Collaborative Staging Manual and Coding Instructions Part II: Primary Site Schema

65	Extension beyond Gerota's fascia to: Ascending colon from right kidney Descending colon from left kidney Diaphragm Duodenum from right kidney Peritoneum Tail of pancreas Ureter, including implant(s), ipsilateral	T4	RE	RE
67	Extension beyond Gerota's fascia to: Psoas muscle	T4	D	RE
70	Ribs	T4	D	D
75	Liver Spleen Stomach	T4	D	D
80	Further contiguous extension Aorta Contralateral Adrenal (suprarenal) gland Kidney Ureter Other direct 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 codes 10, 20, and 30 ONLY, the T category is assigned based on the value of tumor size, as shown in the Extension Size Table for this site.

Kidney (Renal Parenchyma)

CS TS/Ext-Eval

SEE STANDARD TABLE

Kidney (Renal Parenchyma)

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	No regional lymph node involvement	N0	NONE	NONE
10	Single regional lymph node: Aortic, NOS: Lateral (lumbar) Para-aortic Periaortic Renal hilar Retroperitoneal, NOS Regional lymph node(s), NOS	N1	RN	RN
11	Single regional lymph node: Paracaval	N1	D	RN

Collaborative Staging Manual and Coding Instructions Part II: Primary Site Schema

15	(10) + (11) including: Single regional lymph node as specified in code 10 PLUS single paracaval node	N2	D	RN
40	More than one regional lymph node (including contralateral or bilateral nodes) other than as defined in code 15	N2	D	RN
70	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

Kidney (Renal Parenchyma)

CS Reg Nodes Eval

SEE STANDARD TABLE

Kidney (Renal Parenchyma)

Reg LN Pos

SEE STANDARD TABLE

Kidney (Renal Parenchyma)

Reg LN Exam

SEE STANDARD TABLE

Kidney (Renal Parenchyma)

CS Mets at DX

SEE STANDARD TABLE

Kidney (Renal Parenchyma)

CS Mets Eval

SEE STANDARD TABLE

Kidney (Renal Parenchyma)

CS Site-Specific Factor 1

Code	Description
888	Not applicable for this site

Kidney (Renal Parenchyma)

CS Site-Specific Factor 2

Code	Description
888	Not applicable for this site

Kidney (Renal Parenchyma)

CS Site-Specific Factor 3

Code	Description
888	Not applicable for this site

Kidney (Renal Parenchyma)

CS Site-Specific Factor 4

Code	Description
888	Not applicable for this site

Kidney (Renal Parenchyma)

CS Site-Specific Factor 5

Code	Description
888	Not applicable for this site

Kidney (Renal Parenchyma)

CS Site-Specific Factor 6

Code	Description
888	Not applicable for this site

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
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	Ureter from renal pelvis	T4	RE	RE
63	Psoas muscle from ureter	T4	RE	RE
65	Extension to bladder from ureter Implants in ureter	T4	RE	RE
66	Extension to major blood vessel(s): Aorta Renal artery/vein Vena cava (inferior) Tumor thrombus in a renal vein, NOS	T4	RE	RE

Collaborative Staging Manual and Coding Instructions Part II: Primary Site Schema

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 Ureter: Iliac, NOS: Common External Internal (hypogastric), NOS Obturator	N1	RN	RN

Collaborative Staging Manual and Coding Instructions Part II: Primary Site Schema

10, cont'd	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

Bladder

C67.0-C67.9

- C67.0 Trigone of bladder
- C67.1 Dome of bladder
- C67.2 Lateral wall of bladder
- C67.3 Anterior wall of bladder
- C67.4 Posterior wall of bladder
- C67.5 Bladder neck
- C67.6 Ureteric orifice
- C67.7 Urachus
- C67.8 Overlapping lesion of bladder
- C67.9 Bladder, 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 	<ul style="list-style-type: none"> 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 	<p>The following tables are available at the collaborative staging website:</p> <ul style="list-style-type: none"> Histology Exclusion Table AJCC Stage
--	--	--

Bladder

CS Tumor Size

SEE STANDARD TABLE

Bladder

CS Extension

Note 1: DISTINGUISHING NONINVASIVE AND INVASIVE BLADDER CANCER The two main types of bladder cancer are the flat (sessile) variety and the papillary type. Only the flat (sessile) variety is called in situ when tumor has not penetrated the basement membrane. Papillary tumor that has not penetrated the basement membrane is called non-invasive, and pathologists use many different descriptive terms for noninvasive papillary transitional cell carcinoma. Frequently, the pathology report does not contain a definite statement of noninvasion; however, noninvasion can be inferred from the microscopic description. The more commonly used descriptions for noninvasion are listed below. Careful attention must be given to the use of the term "confined to mucosa" for urinary bladder. Historically, carcinomas described as "confined to mucosa" were coded as localized. However, pathologists use this designation for non-invasion as well.

In order to rule out the possibility of coding noninvasive tumors in this category, abstractors should determine:

- 1) If the tumor is confined to the epithelium, then it is noninvasive.
- 2) If the tumor has penetrated the basement membrane to invade the lamina propria, then it is invasive. The terms lamina propria, submucosa, stroma, and subepithelial connective tissue are used interchangeably.
- 3) Only if this distinction cannot be made should the tumor be coded to "confined to mucosa."

For Bladder Cases Only, Definite Statements of Non-invasion (Extension code 01) include: 'Non-infiltrating; non-invasive'; 'No evidence of invasion'; 'No extension into lamina propria'; 'No stromal invasion'; 'No extension into underlying supporting tissue'; 'Negative lamina propria and superficial muscle'; 'Negative muscle and (subepithelial) connective tissue'; 'No infiltrative behavior/component'. For Bladder Cases Only, Inferred Descriptions of Non-invasion (Extension code 03) include: 'No involvement of muscularis propria and no mention of subepithelium/submucosa'; 'No statement of invasion (microscopic description present)'; '(Underlying) Tissue insufficient to judge depth of invasion'; 'No invasion of bladder wall; no involvement of muscularis propria'; 'Benign deeper tissue'; 'Microscopic description problematic for pathologist (non-invasion versus superficial invasion)'; 'Froned surfaced by transitional cells'; 'No mural infiltration'; 'No evidence of invasion (no sampled stroma)'.

Note 2: The lamina propria and submucosa tend to merge when there is no muscularis mucosae, so these terms will be used interchangeably.

Collaborative Staging Manual and Coding Instructions Part II: Primary Site Schema

Note 3: The meaning of the terms "invasion of mucosa, grade 1" and "invasion of mucosa, grade 2" varies with the pathologist who must be queried to determine whether the carcinoma is noninvasive" or "invasive."

Note 4: If Extension code is 00-06, Behavior Code must be 2. If Extension code is 10, Behavior Code may be 2 or 3. If Extension code is 15 or greater, Behavior Code must be 3.

Note 5: Statements meaning Confined to Mucosa, NOS (code 10): Confined to mucosal surface Limited to mucosa, no invasion of submucosa and muscularis No infiltration/invasion of fibromuscular and muscular stroma Superficial, NOS.

Note 6: If a tumor is described as confined to mucosa (or the equivalents in Note 5) AND as papillary, use extension code 01 or 03. Use code 10 (confined to mucosa) only if the tumor is described as confined to mucosa but is not described as papillary.

Note 7: Periureteral in code 40 refers only to that portion of the ureter that is intramural to the bladder. All other periureteral involvement would be coded to 60.

Code	Description	TNM	SS77	SS2000
01	PAPILLARY transitional cell carcinoma, stated to be noninvasive Papillary non-infiltrating Jewett-Strong-Marshall Stage 0 TNM/AJCC Ta (See Note 1.)	Ta	IS	IS
03	PAPILLARY transitional cell carcinoma, with inferred description of non-invasion (See Note 1.)	Ta	IS	IS
06	Sessile (flat) (solid) carcinoma in situ Carcinoma in situ, NOS Transitional cell carcinoma in situ TNM/AJCC Tis Jewett-Strong-Marshall CIS	Tis	IS	IS
10	Confined to mucosa, NOS	Tis	L	L
15	Invasive tumor confined to subepithelial connective tissue (tunica propria, lamina propria, submucosa, stroma) TNM/AJCC T1 Jewett-Strong-Marshall Stage A	T1	L	L
20	Muscle (muscularis) invaded, NOS	T2NOS	L	L
21	Muscle (muscularis) invaded: Superficial muscle--inner half	T2a	L	L
22	Muscle (muscularis) invaded: Deep muscle--outer half	T2b	L	L
23	Extension through full thickness of bladder wall	T3a	L	L
30	Localized, NOS	T1	L	L
40	Adventitia Perivesical fat/tissue, NOS Periureteral fat/tissue Extension to/through serosa (mesothelium) Peritoneum	T3NOS	RE	RE
41	Extension to perivesical fat (microscopic)	T3a	RE	RE
42	Extension to perivesical fat (macroscopic) Extravesical mass	T3b	RE	RE
45	Stated as T4, NOS	T4NOS	RE	RE

Collaborative Staging Manual and Coding Instructions Part II: Primary Site Schema

60	Prostate Urethra, including prostatic urethra Ureter	T4a	RE	RE
65	Vas deferens; seminal vesicle Rectovesical/Denonvilliers' fascia Parametrium	T4a	RE	RE
67	Uterus Vagina	T4a	RE	RE
70	Bladder is FIXED	T4b	RE	RE
75	Pelvic wall Abdominal wall	T4b	D	D
80	Further contiguous extension, including: Rectum, male Pubic bone Sigmoid	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

Bladder

CS TS/Ext-Eval

Note: According to AJCC, staging basis for transurethral resection of bladder tumor (TURBT) 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.	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.	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

Collaborative Staging Manual and Coding Instructions Part II: Primary Site Schema

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

Bladder

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: 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	Regional lymph nodes (including contralateral or bilateral nodes): Perivesical Iliac: Internal (hypogastric) Obturator External Iliac, NOS Sacral (lateral, presacral, sacral promontory (Gerota's), or NOS) Pelvic, NOS Regional lymph node(s), NOS Single regional lymph node less than or equal to 2 cm	N1	RN	RN
20	Single regional lymph node greater than 2 cm and less than or equal to 5 cm OR multiple regional nodes, none greater than 5 cm	N2	RN	RN
30	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

Bladder

CS Reg Nodes Eval

SEE STANDARD TABLE

Bladder

Reg LN Pos

SEE STANDARD TABLE

Bladder

Reg LN Exam

SEE STANDARD TABLE

Collaborative Staging Manual and Coding Instructions Part II: Primary Site Schema

Bladder

CS Mets at DX

Code	Description	TNM	SS77	SS2000
00	No; none	M0	NONE	NONE
10	Distant lymph node(s): Common iliac	M1	D	D
11	Distant lymph node(s), NOS Specified distant lymph node(s) other than code (10)	M1	D	D
40	Distant metastases, except distant lymph node(s) (code 10 or 11) Distant metastasis, NOS Carcinomatosis	M1	D	D
50	(40) + any of [(10) or (11)]	M1	D	D
99	Unknown Distant metastasis cannot be assessed Not documented in patient record	MX	U	U

Bladder

CS Mets Eval

SEE STANDARD TABLE

Bladder

CS Site-Specific Factor 1

Code	Description
888	Not applicable for this site

Bladder

CS Site-Specific Factor 2

Code	Description
888	Not applicable for this site

Bladder

CS Site-Specific Factor 3

Code	Description
888	Not applicable for this site

Bladder

CS Site-Specific Factor 4

Code	Description
888	Not applicable for this site

Bladder

CS Site-Specific Factor 5

Code	Description
888	Not applicable for this site

Bladder

CS Site-Specific Factor 6

Code	Description
888	Not applicable for this site

Collaborative Staging Manual and Coding Instructions Part II: Primary Site Schema

Urethra

C68.0

C68.0 Urethra

Note: Transitional cell carcinoma of the prostatic ducts and prostatic urethra are to be coded to urethra (C68.0) according to this schema.

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		

Urethra

CS Tumor Size

SEE STANDARD TABLE

Urethra

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	Tis	IS	IS
01	Carcinoma in situ, involvement of prostatic urethra	Tispu	IS	IS
02	Carcinoma in situ, involvement of prostatic ducts	Tispd	IS	IS
05	Noninvasive papillary, polypoid, or verrucous carcinoma Note: Code 05 does not apply to transitional cell carcinoma of prostatic urethra or prostatic ducts	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
40	Corpus spongiosum Periurethral muscle (sphincter) Prostate	T2	RE	RE
60	Beyond the prostatic capsule Bladder neck Corpus cavernosum Vagina, anterior or NOS	T3	RE	RE
70	Other adjacent organs, including Bladder (excluding bladder neck) Seminal vesicle(s)	T4	D	D
80	Further contiguous extension	T4	D	D

Collaborative Staging Manual and Coding Instructions Part II: Primary Site Schema

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

Urethra

CS TS/Ext-Eval

SEE STANDARD TABLE

Urethra

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: 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	Regional lymph nodes (including contralateral or bilateral nodes): Iliac, NOS: Common External Internal (hypogastric), NOS: Obturator Inguinal, NOS: Deep Node of Cloquet or Rosenmuller (highest deep inguinal) Superficial (femoral) Pelvic, NOS Sacral, NOS Presacral Regional lymph node(s), NOS Single regional lymph node less than or equal to 2 cm	N1	RN	RN
20	Single regional lymph node greater than 2 - 5 cm OR multiple regional nodes, none greater than 5 cm	N2	RN	RN
30	Regional lymph node(s), at least one greater than 5 cm	N2	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

Urethra

CS Reg Nodes Eval

SEE STANDARD TABLE

Urethra
Reg LN Pos
SEE STANDARD TABLE

Urethra
Reg LN Exam
SEE STANDARD TABLE

Urethra
CS Mets at DX
SEE STANDARD TABLE

Urethra
CS Mets Eval
SEE STANDARD TABLE

Urethra
CS Site-Specific Factor 1

Code	Description
888	Not applicable for this site

Urethra
CS Site-Specific Factor 2

Code	Description
888	Not applicable for this site

Urethra
CS Site-Specific Factor 3

Code	Description
888	Not applicable for this site

Urethra
CS Site-Specific Factor 4

Code	Description
888	Not applicable for this site

Collaborative Staging Manual and Coding Instructions Part II: Primary Site Schema

Urethra

CS Site-Specific Factor 5

Code	Description
888	Not applicable for this site

Urethra

CS Site-Specific Factor 6

Code	Description
888	Not applicable for this site

Paraurethral Gland, Overlapping Lesion of Urinary Organs, and Unspecified Urinary Organs

C68.1, C68.8-C68.9

C68.1 Paraurethral gland

C68.8 Overlapping lesion of urinary organs

C68.9 Urinary system, NOS

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

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

Paraurethral Gland, Overlapping Lesion of Urinary Organs, and Unspecified Urinary Organs

CS Tumor Size

SEE STANDARD TABLE

Paraurethral Gland, Overlapping Lesion of Urinary Organs, and Unspecified Urinary Organs

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 (See Note)	NA	IS	IS
05	Noninvasive papillary, polypoid, or verrucous carcinoma (See Note)	NA	IS	IS
10	Subepithelial connective tissue (lamina propria, submucosa) invaded (See Note)	NA	L	L
20	Muscularis invaded	NA	L	L
30	Localized, NOS	NA	L	L
40	Corpus spongiosum Periurethral muscle (sphincter) Prostate	NA	RE	RE
60	Beyond the prostatic capsule Bladder neck Corpus cavernosum Vagina, anterior or NOS	NA	RE	RE
70	Other adjacent organs, including Bladder (excluding bladder neck) Seminal vesicle(s)	NA	D	D
80	Further contiguous extension	NA	D	D

Collaborative Staging Manual and Coding Instructions Part II: Primary Site Schema

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

Paraurethral Gland, Overlapping Lesion of Urinary Organs, and Unspecified Urinary Organs

CS TS/Ext-Eval

Code	Description	Staging Basis
9	Not applicable for this site	NA

Paraurethral Gland, Overlapping Lesion of Urinary Organs, and Unspecified Urinary Organs

CS Lymph Nodes

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

Code	Description	TNM	SS77	SS2000
00	No regional lymph node involvement	NA	NONE	NONE
10	Regional lymph nodes (including contralateral or bilateral nodes): Iliac, NOS: Common External Internal (hypogastric), NOS: Obturator Inguinal, NOS: Deep Node of Cloquet or Rosenmuller (highest deep inguinal) Superficial (femoral) Pelvic, NOS Sacral, NOS Presacral Regional lymph node(s), NOS	NA	RN	RN
80	Lymph nodes, NOS	NA	RN	RN
99	Unknown; not stated Regional lymph node(s) cannot be assessed Not documented in patient record	NA	U	U

Paraurethral Gland, Overlapping Lesion of Urinary Organs, and Unspecified Urinary Organs

CS Reg Nodes Eval

Code	Description	Staging Basis
9	Not applicable for this site	NA

Paraurethral Gland, Overlapping Lesion of Urinary Organs, and Unspecified Urinary Organs
Reg LN Pos
SEE STANDARD TABLE

Paraurethral Gland, Overlapping Lesion of Urinary Organs, and Unspecified Urinary Organs
Reg LN Exam
SEE STANDARD TABLE

Paraurethral Gland, Overlapping Lesion of Urinary Organs, and Unspecified Urinary Organs
CS Mets at DX

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

Paraurethral Gland, Overlapping Lesion of Urinary Organs, and Unspecified Urinary Organs
CS Mets Eval

Code	Description	Staging Basis
9	Not applicable for this site	NA

Paraurethral Gland, Overlapping Lesion of Urinary Organs, and Unspecified Urinary Organs
CS Site-Specific Factor 1

Code	Description
888	Not applicable for this site

Paraurethral Gland, Overlapping Lesion of Urinary Organs, and Unspecified Urinary Organs

CS Site-Specific Factor 2

Code	Description
888	Not applicable for this site

Paraurethral Gland, Overlapping Lesion of Urinary Organs, and Unspecified Urinary Organs

CS Site-Specific Factor 3

Code	Description
888	Not applicable for this site

Paraurethral Gland, Overlapping Lesion of Urinary Organs, and Unspecified Urinary Organs

CS Site-Specific Factor 4

Code	Description
888	Not applicable for this site

Paraurethral Gland, Overlapping Lesion of Urinary Organs, and Unspecified Urinary Organs

CS Site-Specific Factor 5

Code	Description
888	Not applicable for this site

Paraurethral Gland, Overlapping Lesion of Urinary Organs, and Unspecified Urinary Organs

CS Site-Specific Factor 6

Code	Description
888	Not applicable for this site

Conjunctiva [excl. Retinoblastoma, Malignant Melanoma, Kaposi Sarcoma, and Lymphoma]

C69.0

C69.0 Conjunctiva

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 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		

Conjunctiva [excl. Retinoblastoma, Malignant Melanoma, Kaposi Sarcoma, and Lymphoma]

CS Tumor Size

SEE STANDARD TABLE

Conjunctiva [excl. Retinoblastoma, Malignant Melanoma, Kaposi Sarcoma, and Lymphoma]

CS Extension

Code	Description	TNM	SS77	SS2000
00	In situ; noninvasive; intraepithelial	Tis	IS	IS
10	Tumor confined to conjunctiva	*	L	L
30	Localized, NOS	*	L	L
40	Intraocular extension	T3	L	L
50	Adjacent extraocular extension, excluding orbit Eyelid	T3	RE	RE
70	Orbit, NOS	T4NOS	RE	RE
71	Orbital soft tissues without bone invasion	T4a	RE	RE
72	Bone of orbit	T4b	RE	RE
78	Adjacent paranasal sinuses	T4c	RE	RE
79	Brain	T4d	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

* For Extension codes 10 and 30 ONLY, T category is assigned based on value of CS Tumor Size, as shown in Extension Size Table. Tumors 5mm or less are T1. Tumors more than 5mm are T2.

Conjunctiva [excl. Retinoblastoma, Malignant Melanoma, Kaposi Sarcoma, and Lymphoma]

CS TS/Ext-Eval

SEE STANDARD TABLE

Conjunctiva [excl. Retinoblastoma, Malignant Melanoma, Kaposi Sarcoma, and Lymphoma]

CS Lymph Nodes

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

Conjunctiva [excl. Retinoblastoma, Malignant Melanoma, Kaposi Sarcoma, and Lymphoma]

CS Reg Nodes Eval

SEE STANDARD TABLE

Conjunctiva [excl. Retinoblastoma, Malignant Melanoma, Kaposi Sarcoma, and Lymphoma]

Reg LN Pos

SEE STANDARD TABLE

Conjunctiva [excl. Retinoblastoma, Malignant Melanoma, Kaposi Sarcoma, and Lymphoma]

Reg LN Exam

SEE STANDARD TABLE

Conjunctiva [excl. Retinoblastoma, Malignant Melanoma, Kaposi Sarcoma, and Lymphoma]

CS Mets at DX

SEE STANDARD TABLE

Conjunctiva [excl. Retinoblastoma, Malignant Melanoma, Kaposi Sarcoma, and Lymphoma]
CS Mets Eval
SEE STANDARD TABLE

Conjunctiva [excl. Retinoblastoma, Malignant Melanoma, Kaposi Sarcoma, and Lymphoma]
CS Site-Specific Factor 1

Code	Description
888	Not applicable for this site

Conjunctiva [excl. Retinoblastoma, Malignant Melanoma, Kaposi Sarcoma, and Lymphoma]
CS Site-Specific Factor 2

Code	Description
888	Not applicable for this site

Conjunctiva [excl. Retinoblastoma, Malignant Melanoma, Kaposi Sarcoma, and Lymphoma]
CS Site-Specific Factor 3

Code	Description
888	Not applicable for this site

Conjunctiva [excl. Retinoblastoma, Malignant Melanoma, Kaposi Sarcoma, and Lymphoma]
CS Site-Specific Factor 4

Code	Description
888	Not applicable for this site

Conjunctiva [excl. Retinoblastoma, Malignant Melanoma, Kaposi Sarcoma, and Lymphoma]
CS Site-Specific Factor 5

Code	Description
888	Not applicable for this site

Conjunctiva [excl. Retinoblastoma, Malignant Melanoma, Kaposi Sarcoma, and Lymphoma]
CS Site-Specific Factor 6

Code	Description
888	Not applicable for this site

Page left blank.

Malignant Melanoma of Conjunctiva

C69.0

(M-8720-8790)

C69.0 Conjunctiva

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: Histologies for Which AJCC Staging Is Not Generated AJCC Stage for TNM sites with no stage groupings
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 Conjunctiva

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
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 Conjunctiva

CS Extension

Code	Description	TNM	SS77	SS2000
00	In situ	Tis	IS	IS
10	Tumor(s) of bulbar conjunctiva confined to the epithelium occupying more one quadrant or less	T1	L	L
12	Tumor(s) of bulbar conjunctiva confined to the epithelium occupying more than one quadrant	T1	L	L

Collaborative Staging Manual and Coding Instructions Part II: Primary Site Schema

15	Tumor(s) of bulbar conjunctiva, NOS	T1	L	L
30	Localized, NOS	T1	L	L
40	Tumor of bulbar conjunctiva, thickness not stated, WITH invasion of substantia propria (or with corneal extension, NOS)	T2	RE	RE
41	Tumor of bulbar conjunctiva, not more than 0.8 mm in thickness, WITH invasion of substantia propria (or with corneal extension, NOS)	T2	RE	RE
42	Tumor of bulbar conjunctiva, more than 0.8 mm in thickness, WITH invasion of substantia propria (or with corneal extension, NOS)	T3	RE	RE
44	Tumor involves: Caruncle Conjunctival fornix Palpebral conjunctiva	T3	L	L
46	(44) + any of [(40) or (42)]	T3	RE	RE
70	Extension to: Eyelid Globe Orbit	T4	RE	RE
80	Further contiguous extension, including: Central nervous system Sinuses	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 Conjunctiva

CS TS/Ext-Eval

SEE STANDARD TABLE

Malignant Melanoma of Conjunctiva

CS Lymph Nodes

Code	Description	TNM	SS77	SS2000
00	None; no regional lymph node involvement	N0	NONE	NONE
10	Regional lymph nodes Cervical Mandibular, NOS: Submandibular (submaxillary) Parotid, NOS: Infra-auricular Preauricular Regional lymph node(s), NOS	N1	RN	RN

Collaborative Staging Manual and Coding Instructions Part II: Primary Site Schema

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 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	Microinvasion; microscopic focus or foci only; no size given
999	Unknown; size not stated Not documented in patient record

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

Collaborative Staging Manual and Coding Instructions Part II: Primary Site Schema

**Cornea, Retina, Choroid, Ciliary Body (Iris, Lens, Sclera, Uveal Tract), Eyeball, Overlapping and Other Eye [Excluding Melanoma and Retinoblastoma]
C69.1-C69.4, C69.8-C69.9**

C69.1 Cornea, NOS

C69.2 Retina

C69.3 Choroid

C69.4 Ciliary body

C69.8 Overlapping lesion of eye and adnexa

C69.9 Eye, NOS

Note 1: Laterality must be coded for this site.

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

Note 3: AJCC includes primary site C69.8 (Overlapping lesions of eye and adnexa) in its chapter 46, Sarcoma of the Orbit. Collaborative Staging excludes melanomas and retinoblastomas from this schema. All other histologies are included with this schema.

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

Cornea, Retina, Choroid, Ciliary Body (Iris, Lens, Sclera, Uveal Tract), Eyeball, Overlapping and Other Eye [Excluding Melanoma and Retinoblastoma]

CS Tumor Size

SEE STANDARD TABLE

Cornea, Retina, Choroid, Ciliary Body (Iris, Lens, Sclera, Uveal Tract), Eyeball, Overlapping and Other Eye [Excluding Melanoma and Retinoblastoma]

CS Extension

Code	Description	TNM	SS77	SS2000
00	In situ	NA	IS	IS
10	Tumor confined to site of origin	NA	L	L
30	Localized, NOS	NA	L	L
40	Intraocular extension	NA	L	L
70	Adjacent extraocular extension: Eyelid Orbit	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

Collaborative Staging Manual and Coding Instructions Part II: Primary Site Schema

**Cornea, Retina, Choroid, Ciliary Body (Iris, Lens, Sclera, Uveal Tract), Eyeball, Overlapping and Other Eye [Excluding Melanoma and Retinoblastoma]
CS TS/Ext-Eval**

Code	Description	Staging Basis
9	Not applicable for this site	NA

**Cornea, Retina, Choroid, Ciliary Body (Iris, Lens, Sclera, Uveal Tract), Eyeball, Overlapping and Other Eye [Excluding Melanoma and Retinoblastoma]
CS Lymph Nodes**

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

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

**Cornea, Retina, Choroid, Ciliary Body (Iris, Lens, Sclera, Uveal Tract), Eyeball, Overlapping and Other Eye [Excluding Melanoma and Retinoblastoma]
CS Reg Nodes Eval**

Code	Description	Staging Basis
9	Not applicable for this site	NA

Cornea, Retina, Choroid, Ciliary Body (Iris, Lens, Sclera, Uveal Tract), Eyeball, Overlapping and Other Eye [Excluding Melanoma and Retinoblastoma]

Reg LN Pos

SEE STANDARD TABLE

Cornea, Retina, Choroid, Ciliary Body (Iris, Lens, Sclera, Uveal Tract), Eyeball, Overlapping and Other Eye [Excluding Melanoma and Retinoblastoma]

Reg LN Exam

SEE STANDARD TABLE

Collaborative Staging Manual and Coding Instructions Part II: Primary Site Schema

Cornea, Retina, Choroid, Ciliary Body (Iris, Lens, Sclera, Uveal Tract), Eyeball, Overlapping and Other Eye [Excluding Melanoma and Retinoblastoma]

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

Cornea, Retina, Choroid, Ciliary Body (Iris, Lens, Sclera, Uveal Tract), Eyeball, Overlapping and Other Eye [Excluding Melanoma and Retinoblastoma]

CS Mets Eval

Code	Description	Staging Basis
9	Not applicable for this site	NA

Cornea, Retina, Choroid, Ciliary Body (Iris, Lens, Sclera, Uveal Tract), Eyeball, Overlapping and Other Eye [Excluding Melanoma and Retinoblastoma]

CS Site-Specific Factor 1

Code	Description
888	Not applicable for this site

Cornea, Retina, Choroid, Ciliary Body (Iris, Lens, Sclera, Uveal Tract), Eyeball, Overlapping and Other Eye [Excluding Melanoma and Retinoblastoma]

CS Site-Specific Factor 2

Code	Description
888	Not applicable for this site

Cornea, Retina, Choroid, Ciliary Body (Iris, Lens, Sclera, Uveal Tract), Eyeball, Overlapping and Other Eye [Excluding Melanoma and Retinoblastoma]

CS Site-Specific Factor 3

Code	Description
888	Not applicable for this site

**Cornea, Retina, Choroid, Ciliary Body (Iris, Lens, Sclera, Uveal Tract), Eyeball,
Overlapping and Other Eye [Excluding Melanoma and Retinoblastoma]
CS Site-Specific Factor 4**

Code	Description
888	Not applicable for this site

**Cornea, Retina, Choroid, Ciliary Body (Iris, Lens, Sclera, Uveal Tract), Eyeball,
Overlapping and Other Eye [Excluding Melanoma and Retinoblastoma]
CS Site-Specific Factor 5**

Code	Description
888	Not applicable for this site

**Cornea, Retina, Choroid, Ciliary Body (Iris, Lens, Sclera, Uveal Tract), Eyeball,
Overlapping and Other Eye [Excluding Melanoma and Retinoblastoma]
CS Site-Specific Factor 6**

Code	Description
888	Not applicable for this site

Malignant Melanoma of Iris and Ciliary Body

C69.4

(M-8720-8790)

C69.4 Ciliary Body and Iris

Note: Laterality must be coded for these sites

CS Tumor Size	CS Site-Specific Factor 1 - Measured Thickness (Depth),	The following tables are available at the collaborative staging website: Histologies for Which AJCC Staging Is Not Generated AJCC Stage
CS Extension	Breslow's Measurement	
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		

Malignant Melanoma of Iris and Ciliary Body

CS Tumor Size

SEE STANDARD TABLE

Malignant Melanoma of Iris and Ciliary Body

CS Extension

Note 1: 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.

Note 2: Iris and ciliary body are both included in the ICD-O-3 site code of C69.4, so they are in the same Collaborative Staging schema. However, they are staged with different criteria by AJCC. Many of the extension codes below are marked as applicable to either iris or ciliary body only. Any code not so marked may be used for either site.

Code	Description	TNM	SS77	SS2000
00	In situ; noninvasive; intraepithelial	Tis	IS	IS
10	FOR IRIS PRIMARY ONLY: Confined to iris, NOS	T1NOS	L	L
11	FOR IRIS PRIMARY ONLY: Limited to iris not more than 3 clock hours in size, WITHOUT melanolytic glaucoma, or not stated if melanolytic glaucoma	T1a	L	L
13	FOR IRIS PRIMARY ONLY: Limited to iris more than 3 clock hours in size, WITHOUT melanolytic glaucoma, or not stated if melanolytic glaucoma	T1b	L	L
14	FOR IRIS PRIMARY ONLY: Limited to iris WITH melanolytic glaucoma	T1c	L	L
21	FOR CILIARY BODY PRIMARY ONLY: Tumor 10 mm or less in greatest diameter and 2.5 mm or less in greatest height (thickness), not stated if extraocular extension present (See Note 1.)	T1NOS	L	L

Collaborative Staging Manual and Coding Instructions Part II: Primary Site Schema

22	FOR CILIARY BODY PRIMARY ONLY: Tumor 10 mm or less in greatest diameter and 2.5 mm or less in greatest height (thickness), WITHOUT microscopic or macroscopic extraocular extension. (See Note 1.)	T1a	L	L
23	FOR CILIARY BODY PRIMARY ONLY: Tumor 10 mm or less in greatest diameter and 2.5 mm or less in greatest height (thickness), WITH microscopic extraocular extension. (See Note 1.)	T1b	L	L
24	FOR CILIARY BODY PRIMARY ONLY: Tumor 10 mm or less in greatest diameter and 2.5 mm or less in greatest height (thickness), WITH macroscopic extraocular extension. (See Note 1.)	T1c	L	L
30	Localized, NOS Diameter and/or thickness in clock hours or mm not stated	T1NOS	L	L
41	FOR IRIS PRIMARY ONLY: Tumor confluent with or extending into the ciliary body and/or choroid WITHOUT melanolytic glaucoma, or not stated if melanolytic glaucoma	T2NOS	L	L
42	FOR IRIS PRIMARY ONLY: Tumor confluent with or extending into the ciliary body and/or choroid WITH melanolytic glaucoma	T2a	L	L
51	FOR CILIARY BODY PRIMARY ONLY: 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), not stated if extraocular extension present (See Note 1.)	T2NOS	L	L
52	FOR CILIARY BODY PRIMARY ONLY: 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 or macroscopic extraocular extension present. (See Note 1.)	T2a	L	L
53	FOR CILIARY BODY PRIMARY ONLY: 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 extension present. (See Note 1.)	T2b	RE	RE
54	FOR CILIARY BODY PRIMARY ONLY: 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 extension present. (See Note 1.)	T2c	RE	RE
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

Collaborative Staging Manual and Coding Instructions Part II: Primary Site Schema

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 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	Microinvasion; microscopic focus or foci only; no size given
999	Unknown; size not stated Not documented in patient record

Malignant Melanoma of Iris and Ciliary Body

CS Site-Specific Factor 2

Code	Description
888	Not applicable for this site

Malignant Melanoma of Iris and Ciliary Body

CS Site-Specific Factor 3

Code	Description
888	Not applicable for this site

Malignant Melanoma of Iris and Ciliary Body

CS Site-Specific Factor 4

Code	Description
888	Not applicable for this site

Malignant Melanoma of Iris and Ciliary Body

CS Site-Specific Factor 5

Code	Description
888	Not applicable for this site

Malignant Melanoma of Iris and Ciliary Body

CS Site-Specific Factor 6

Code	Description
888	Not applicable for this site

Page left blank.

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

Collaborative Staging Manual and Coding Instructions Part II: Primary Site Schema

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) WITH microscopic 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 macroscopic 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 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	Microinvasion; microscopic focus or foci only; no size given
999	Unknown; size not stated Not documented in patient record

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

Malignant Melanoma of Other Eye

C69.1, C69.2, C69.5, C69.8-C69.9

(M-8720-8790)

C69.1 Cornea

C69.2 Retina

C69.5 Lacrimal gland

C69.8 Overlapping lesion of eye and adnexa

C69.9 Eye, NOS

Excludes 69.0 Conjunctiva, C69.3 Choroid, and C69.4 Ciliary Body

Note 1: Laterality must be coded for these sites

Note 2: AJCC includes primary site C69.8 (Overlapping lesions of eye and adnexa) in its chapter 46, Sarcoma of the Orbit. This schema includes only melanomas of the sites listed above.

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

Malignant Melanoma of Other Eye

CS Tumor Size

SEE STANDARD TABLE

Malignant Melanoma of Other Eye

CS Extension

Code	Description	TNM	SS77	SS2000
00	In situ; noninvasive; intraepithelial	NA	IS	IS
10	Tumor limited to other part of eye WITH or WITHOUT intraocular extension	NA	L	L
30	Localized, NOS	NA	L	L
70	Adjacent extraocular extension	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

Malignant Melanoma of Other Eye

CS TS/Ext-Eval

SEE STANDARD TABLE

Malignant Melanoma of Other Eye

CS Lymph Nodes

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

Malignant Melanoma of Other Eye

CS Reg Nodes Eval

SEE STANDARD TABLE

Malignant Melanoma of Other Eye

Reg LN Pos

SEE STANDARD TABLE

Malignant Melanoma of Other Eye

Reg LN Exam

SEE STANDARD TABLE

Malignant Melanoma of Other Eye

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

Malignant Melanoma of Other Eye

CS Mets Eval

SEE STANDARD TABLE

**Malignant Melanoma of Other Eye
CS Site-Specific Factor 1**

Code	Description
888	Not applicable for this site

**Malignant Melanoma of Other Eye
CS Site-Specific Factor 2**

Code	Description
888	Not applicable for this site

**Malignant Melanoma of Other Eye
CS Site-Specific Factor 3**

Code	Description
888	Not applicable for this site

**Malignant Melanoma of Other Eye
CS Site-Specific Factor 4**

Code	Description
888	Not applicable for this site

**Malignant Melanoma of Other Eye
CS Site-Specific Factor 5**

Code	Description
888	Not applicable for this site

**Malignant Melanoma of Other Eye
CS Site-Specific Factor 6**

Code	Description
888	Not applicable for this site

Page left blank.

Lacrimal Gland

C69.5

C69.5 Lacrimal gland

Note: Laterality must be coded for this site.

CS Tumor Size	CS Site-Specific Factor 1	<p>The following tables are available at the collaborative staging website: Histology Exclusion Table AJCC Stage Extension Size Table Extension Size Table 2</p>
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		

Lacrimal Gland

CS Tumor Size

SEE STANDARD TABLE

Lacrimal Gland

CS Extension

Code	Description	TNM	SS77	SS2000
00	In situ; noninvasive; intraepithelial	Tis	IS	IS
10	Tumor confined to lacrimal gland/duct	*	L	L
30	Localized, NOS	*	L	L
40	Invading periosteum of fossa of lacrimal gland/duct	**	RE	RE
60	Extension to any of the following WITHOUT bone invasion: Globe (eyeball) Optic nerve Orbital soft tissues	T4	RE	RE
70	Adjacent bone	T4	RE	RE
75	Brain	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 Extension Size Table. Tumors 2.5 cm or less are T1, and tumors between 2.5 and 5 cm are T2.

**For Extension code 40 ONLY, the T category is assigned based on the value of CS Tumor Size as shown in Extension Size Table 2. Tumors 5 cm or less are T3a, and tumors more than 5 cm are T3b.

Lacrimal Gland

CS TS/Ext-Eval

SEE STANDARD TABLE

**Lacrimal Gland
CS Lymph Nodes**

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

**Lacrimal Gland
CS Reg Nodes Eval
SEE STANDARD TABLE**

**Lacrimal Gland
Reg LN Pos
SEE STANDARD TABLE**

**Lacrimal Gland
Reg LN Exam
SEE STANDARD TABLE**

**Lacrimal Gland
CS Mets at DX
SEE STANDARD TABLE**

**Lacrimal Gland
CS Mets Eval
SEE STANDARD TABLE**

**Lacrimal Gland
CS Site-Specific Factor 1**

Code	Description
888	Not applicable for this site

Lacrimal Gland

CS Site-Specific Factor 2

Code	Description
888	Not applicable for this site

Lacrimal Gland

CS Site-Specific Factor 3

Code	Description
888	Not applicable for this site

Lacrimal Gland

CS Site-Specific Factor 4

Code	Description
888	Not applicable for this site

Lacrimal Gland

CS Site-Specific Factor 5

Code	Description
888	Not applicable for this site

Lacrimal Gland

CS Site-Specific Factor 6

Code	Description
888	Not applicable for this site

Page left blank.

Collaborative Staging Manual and Coding Instructions Part II: Primary Site Schema

Orbit

C69.6

C69.6 Orbit, NOS

Note 1: Laterality must be coded for this site.

Note 2: AJCC uses this scheme only for sarcomas of the orbit.

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		

Orbit

CS Tumor Size

SEE STANDARD TABLE

Orbit

CS Extension

Code	Description	TNM	SS77	SS2000
00	In situ; noninvasive; intraepithelial	Tis	IS	IS
10	Tumor confined to orbit Localized, NOS	*	L	L
40	Diffuse invasion of orbital tissues and/or bony walls	T3	RE	RE
60	Extension to: Adjacent paranasal sinuses Cranium	T4	RE	RE
70	Central nervous system	T4	D	D
80	Further contiguous extension	T4	L	L
95	No evidence of primary tumor	T0	U	U
99	Unknown extension Primary tumor cannot be assessed Not documented in patient record	TX	U	U

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

Orbit

CS TS/Ext-Eval

SEE STANDARD TABLE

Orbit

CS Lymph Nodes

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

Orbit

CS Reg Nodes Eval

SEE STANDARD TABLE

Orbit

Reg LN Pos

SEE STANDARD TABLE

Orbit

Reg LN Exam

SEE STANDARD TABLE

Orbit

CS Mets at DX

SEE STANDARD TABLE

Orbit

CS Mets Eval

SEE STANDARD TABLE

Orbit

CS Site-Specific Factor 1

Code	Description
888	Not applicable for this site

Collaborative Staging Manual and Coding Instructions Part II: Primary Site Schema

Orbit

CS Site-Specific Factor 2

Code	Description
888	Not applicable for this site

Orbit

CS Site-Specific Factor 3

Code	Description
888	Not applicable for this site

Orbit

CS Site-Specific Factor 4

Code	Description
888	Not applicable for this site

Orbit

CS Site-Specific Factor 5

Code	Description
888	Not applicable for this site

Orbit

CS Site-Specific Factor 6

Code	Description
888	Not applicable for this site

Page left blank.

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

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
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

Collaborative Staging Manual and Coding Instructions Part II: Primary Site Schema

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
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.	p

Collaborative Staging Manual and Coding Instructions Part II: Primary Site Schema

3, cont'd	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.	
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**

Collaborative Staging Manual and Coding Instructions Part II: Primary Site Schema

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: If no enucleation has been performed, code 000.

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
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

Collaborative Staging Manual and Coding Instructions Part II: Primary Site Schema

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

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

Collaborative Staging Manual and Coding Instructions Part II: Primary Site Schema

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

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 -	The following tables are available at the collaborative staging website: Histologies for Which AJCC Staging Is Not Generated AJCC Stage
CS Extension	WHO 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 C 71.0 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

Collaborative Staging Manual and Coding Instructions Part II: Primary Site Schema

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	RE	RE
50	Supratentorial tumor extends infratentorially to involve cerebellum or brain stem	NA	RE	RE
51	Infratentorial tumor extends supratentorially to involve cerebrum (cerebral hemisphere)	NA	RE	RE
60	Tumor invades: Bone (skull) Major blood vessel(s) Meninges (dura) Nerves, NOS Cranial nerves Spinal cord/canal	NA	RE	RE
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

Brain and Cerebral Meninges

CS TS/Ext-Eval

Code	Description	Staging Basis
9	Not applicable for this site.	NA

Collaborative Staging Manual and Coding Instructions Part II: Primary Site Schema

Brain and Cerebral Meninges

CS Lymph Nodes

Code	Description	TNM	SS77	SS2000
88	Not applicable	NA	U	U

Brain and Cerebral Meninges

CS Reg Nodes Eval

Code	Description	Staging Basis
9	Not applicable for this site.	NA

Brain and Cerebral Meninges

Reg LN Pos

Code	Description
99	Not applicable.

Brain and Cerebral Meninges

Reg LN Exam

Code	Description
99	Not applicable.

Brain and Cerebral Meninges

CS Mets at DX

Code	Description	TNM	SS77	SS2000
00	No; none	NA	NONE	NONE
10	Distant metastases	NA	D	D
85	"Drop" metastases	NA	D	D
99	Unknown Distant metastasis cannot be assessed Not documented in patient record	NA	U	U

Brain and Cerebral Meninges

CS Mets Eval

Code	Description	Staging Basis
9	Not applicable for this site.	NA

Brain and Cerebral Meninges

CS Site-Specific Factor 1 WHO Grade Classification

Note: 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 Not documented in medical record Grade unknown, NOS

Brain and Cerebral Meninges

CS Site-Specific Factor 2

Code	Description
888	Not applicable for this site

Brain and Cerebral Meninges

CS Site-Specific Factor 3

Code	Description
888	Not applicable for this site

Brain and Cerebral Meninges

CS Site-Specific Factor 4

Code	Description
888	Not applicable for this site

Brain and Cerebral Meninges

CS Site-Specific Factor 5

Code	Description
888	Not applicable for this site

Brain and Cerebral Meninges

CS Site-Specific Factor 6

Code	Description
888	Not applicable for this site

**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
--	---	--

**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	RE	RE
50	Adjacent connective/soft tissue Adjacent muscle	NA	RE	RE
60	Brain, for cranial nerve tumors Major blood vessel(s) Sphenoid and frontal sinuses (skull)	NA	RE	RE
70	Brain except for cranial nerve tumors Bone, other than skull Eye	NA	D	D
80	Further contiguous extension	NA	D	D

Collaborative Staging Manual and Coding Instructions Part II: Primary Site Schema

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.

Collaborative Staging Manual and Coding Instructions Part II: Primary Site Schema

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

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
--	---	--

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

Collaborative Staging Manual and Coding Instructions Part II: Primary Site Schema

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: 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	Ipsilateral regional lymph nodes: Anterior deep cervical (laterotracheal) (recurrent laryngeal): Paralaryngeal Paratracheal Prelaryngeal Pretracheal Cervical, NOS Internal jugular, NOS: Deep cervical, NOS: Lower, NOS Jugulo-omohyoid (supraomohyoid) Middle Retropharyngeal Spinal accessory (posterior cervical)	N1a	RN	RN
11	Regional lymph nodes: Delphian node Mediastinal, NOS Posterior mediastinal (tracheoesophageal) Upper anterior mediastinal Supraclavicular (transverse cervical)	N1a	D	RN

Collaborative Staging Manual and Coding Instructions Part II: Primary Site Schema

20	Regional lymph nodes as listed in code 10 Bilateral, contralateral, or midline cervical nodes	N1b	RN	RN
21	Regional lymph nodes as listed in code 11 Bilateral, contralateral, or midline cervical nodes	N1b	D	RN
30	Tracheoesophageal (posterior mediastinal)	N1b	RN	RN
31	Mediastinal, NOS Upper anterior mediastinal	N1b	D	RN
50	Regional lymph node(s), NOS	N1NOS	RN	RN
80	Lymph nodes, NOS	N1NOS	RN	RN
99	Unknown; not stated Regional lymph node(s) cannot be assessed Not documented in patient record	NX	U	U

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	Distant lymph node(s) Mandibular, NOS	M1	D	D
11	Distant lymph node(s) Submandibular (submaxillary) Submental	M1	D	D
12	Distant lymph node(s) other than in code 10 or 11 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	(40) + or any of [(10) to (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

Thymus, Adrenal (Suprarenal) Gland, and Other Endocrine Glands

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

Note: Laterality must be coded for sites C74.0, C74.1, C74.9, and C75.4.

- C37.9 Thymus
- C74.0 Cortex of adrenal gland
- C74.1 Medulla of adrenal gland
- C74.9 Adrenal gland, NOS
- C75.0 Parathyroid gland
- C75.1 Pituitary gland
- C75.2 Craniopharyngeal duct
- C75.3 Pineal gland
- C75.4 Carotid body
- C75.5 Aortic body and other paraganglia
- C75.8 Overlapping lesion of endocrine glands and related structures
- C75.9 Endocrine gland, NOS

Note: 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 - 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
--	---	--

Thymus, Adrenal (Suprarenal) Gland, and Other Endocrine Glands

CS Tumor Size

SEE STANDARD TABLE

Thymus, Adrenal (Suprarenal) Gland, and Other Endocrine Glands

CS Extension

Code	Description	TNM	SS77	SS2000
00	In situ; non-invasive; intraepithelial	NA	IS	IS
05	For C75.1 pituitary gland, C75.2 craniopharyngeal duct and C75.3 pineal gland ONLY: Benign or borderline tumors	NA	NA	NA
10	Invasive carcinoma confined to gland of origin	NA	L	L
30	Localized, NOS	NA	L	L
40	Adjacent connective tissue (see definition in General Instructions)	NA	RE	RE
60	Adjacent organs/structures Thymus and aortic body: Organs/structures in mediastinum Adrenal (suprarenal): Kidney Retroperitoneal structures Parathyroid Thyroid Thyroid cartilage	NA	RE	RE

Collaborative Staging Manual and Coding Instructions Part II: Primary Site Schema

60, cont'd	Pituitary and craniopharyngeal duct: Cavernous sinus Infundibulum Pons Sphenoid body and sinuses Pineal: Infratentorial and central brain Carotid body: Upper neck			
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

Thymus, Adrenal (Suprarenal) Gland, and Other Endocrine Glands

CS TS/Ext-Eval

Code	Description	Staging Basis
9	Not applicable for this site	NA

Thymus, Adrenal (Suprarenal) Gland, and Other Endocrine Glands

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: Use code 99, not applicable, for the following sites: Pituitary gland (C75.1), Craniopharyngeal duct (C75.2), and Pineal gland (C75.3)

Code	Description	TNM	SS77	SS2000
00	None; no regional lymph node involvement	NA	NONE	NONE
10	Regional lymph nodes Cervical for carotid body and parathyroid only Mediastinal for aortic body and thymus only Retroperitoneal for adrenal (suprarenal) gland only	NA	RN	RN
80	Lymph nodes, NOS	NA	RN	RN
99	Unknown; not stated Regional lymph node(s) cannot be assessed Not documented in patient record For Pituitary gland (C75.1), Craniopharyngeal duct (C75.2), and Pineal gland (C75.3): Not applicable	NA	U	U

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

Revised: 12/09/2003

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

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.

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 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

Collaborative Staging Manual and Coding Instructions Part II: Primary Site Schema

Kaposi Sarcoma of All Sites

(M-9140)

Note: This scheme cannot be compared to either the Historic Stage or the 1977 Summary Stage schemes.

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

Kaposi Sarcoma of All Sites

CS Tumor Size

Code	Description
888	Not applicable

Kaposi Sarcoma of All Sites

CS Extension

Code	Description	TNM	SS77	SS2000
11	Single lesion: Skin	NA	U	L
12	Single lesion: Mucosa (e.g., oral cavity, anus, rectum, vagina, vulva)	NA	U	L
13	Single lesion: Viscera (e.g., pulmonary, gastrointestinal tract, spleen, other)	NA	U	L
21	Multiple lesions: Skin	NA	U	L
22	Multiple lesions: Mucosa (e.g., oral cavity, anus, rectum, vagina, vulva)	NA	U	L
23	Multiple lesions: Viscera (e.g., pulmonary, gastrointestinal tract, spleen, other)	NA	U	L
24	(21) + (22)	NA	U	RE
25	(21) + (23)	NA	U	RE
26	(22) + (23)	NA	U	RE
27	(21) + (22) + (23)	NA	U	D
29	Multiple lesions, NOS	NA	U	U
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

**Kaposi Sarcoma of All Sites
CS TS/Ext-Eval**

Code	Description	Staging Basis
9	Not applicable for this site	NA

**Kaposi Sarcoma of All Sites
CS Lymph Nodes**

Note: For this site, code ALL lymph node involvement in this field.

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

**Kaposi Sarcoma of All Sites
CS Reg Nodes Eval**

Code	Description	Staging Basis
9	Not applicable for this site	NA

**Kaposi Sarcoma of All Sites
Reg LN Pos
SEE STANDARD TABLE**

**Kaposi Sarcoma of All Sites
Reg LN Exam
SEE STANDARD TABLE**

Collaborative Staging Manual and Coding Instructions Part II: Primary Site Schema

Kaposi Sarcoma of All Sites

CS Mets at DX

Code	Description	TNM	SS77	SS2000
88	Not applicable	NA	U	U

Kaposi Sarcoma of All Sites

CS Mets Eval

Code	Description	Staging Basis
9	Not applicable for this site	NA

Kaposi Sarcoma of All Sites

CS Site-Specific Factor 1 Associated with HIV/AIDS

* HIV (Human Immunodeficiency Virus) includes types I and II. Older terminology includes HTLV-3 and LAV.

Code	Description
001	Yes/Present
002	No/Not present
999	Unknown if present or not Insufficient information Not documented in patient record

Kaposi Sarcoma of All Sites

CS Site-Specific Factor 2

Code	Description
888	Not applicable for this site

Kaposi Sarcoma of All Sites

CS Site-Specific Factor 3

Code	Description
888	Not applicable for this site

Kaposi Sarcoma of All Sites

CS Site-Specific Factor 4

Code	Description
888	Not applicable for this site

**Kaposi Sarcoma of All Sites
CS Site-Specific Factor 5**

Code	Description
888	Not applicable for this site

**Kaposi Sarcoma of All Sites
CS Site-Specific Factor 6**

Code	Description
888	Not applicable for this site

Hodgkin and Non-Hodgkin Lymphomas of All Sites (excl. Mycosis Fungoides and Sezary Disease)

(ICD-O-3 M-959-972 EXCEPT 9700/3 and 9701/3)

CS Tumor Size	CS Site-Specific Factor 1 - Associated with HIV/AIDS	The following tables are available at the collaborative staging website: Histologies for Which AJCC Staging Is Not Generated AJCC Stage Extension Stage Table
CS Extension	CS Site-Specific Factor 2 - Systemic Symptoms at Diagnosis	
CS TS/Ext-Eval	CS Site-Specific Factor 3 - IPI Score	
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		

Hodgkin and Non-Hodgkin Lymphomas of All Sites (excl. Mycosis Fungoides and Sezary Disease)

CS Tumor Size

Code	Description
888	Not applicable

Hodgkin and Non-Hodgkin Lymphomas of All Sites (excl. Mycosis Fungoides and Sezary Disease)

CS Extension

Note 1: For Hodgkin Lymphoma an E lesion is defined as disease that involves extralymphatic site(s). Extralymphatic means other than lymph nodes and other lymphatic structures. These lymphatic structures include spleen, thymus gland, Waldeyer's ring (tonsils), Peyer's patches (ileum) and lymphoid nodules in the appendix. Any lymphatic structure is to be coded the same as a lymph node region.

Note 2: S equals Spleen involvement.

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

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

Code	Description	TNM	SS77	SS2000
10	Involvement of a single lymph node region Stage I	*	L	L
11	Localized involvement of a single extralymphatic organ/ site in the absence of any lymph node involvement Multifocal involvement of one extralymphatic organ/site Stage IE	*	L	L
12	Involvement of spleen only Stage IS	*	L	L
20	Involvement of two or more lymph node regions on the SAME side of the diaphragm Stage II	*	RNOS	RNOS
21	Localized involvement of a single extralymphatic organ/site WITH involvement of its regional lymph node(s) or WITH or WITHOUT involvement of other lymph node(s) on the SAME side of the diaphragm Direct extension to adjacent organs or tissues Stage IIE	*	RNOS	RNOS

Collaborative Staging Manual and Coding Instructions Part II: Primary Site Schema

22	Involvement of spleen PLUS lymph node(s) BELOW the diaphragm Stage IIS	*	RNOS	RNOS
23	Involvement of spleen PLUS involvement of a single extralymphatic organ/site BELOW the diaphragm WITH or WITHOUT involvement of lymph node(s) BELOW the diaphragm Stage IIES	*	RNOS	RNOS
30	Involvement of lymph node regions on BOTH sides of the diaphragm Stage III	*	D	D
31	Involvement of an extralymphatic organ/site PLUS involvement of lymph node(s) on the OPPOSITE side of the diaphragm Stage IIIE	*	D	D
32	Involvement of the spleen PLUS lymph node(s) ABOVE the diaphragm Stage IIIS	*	D	D
33	(31) + (32) OR Involvement of the spleen PLUS a single extralymphatic site ABOVE the diaphragm WITH or WITHOUT involvement of lymph node(s) Involvement of the spleen PLUS involvement of lymph node region(s) ABOVE the diaphragm PLUS involvement of a single extralymphatic organ/site on either side of the diaphragm Stage IIIES	*	D	D
80	Diffuse or disseminated (multifocal) involvement of ONE OR MORE extralymphatic organ(s)/site(s) WITH or WITHOUT associated lymph node involvement Multifocal involvement of MORE THAN ONE extralymphatic organ/site Involvement of isolated extralymphatic organ in absence of involvement of adjacent lymph nodes, but in conjunction with disease in distant sites Metastasis/involvement: Bone marrow Liver Nodular involvement of lung(s) Stage IV	*	D	D
99	Unknown extension Primary tumor cannot be assessed Not documented in patient record	*	U	U

* AJCC stage group for this site is derived directly from the extension code, as shown in the Extension Stage Table. For extension codes 10-80, the AJCC Stages Groups I-IV are subdivided into A and B based on presence or absence of symptoms as shown in the Symptom Stage Subgroup Table.

Collaborative Staging Manual and Coding Instructions Part II: Primary Site Schema

Hodgkin and Non-Hodgkin Lymphomas of All Sites (excl. Mycosis Fungoides and Sezary Disease)

CS TS/Ext-Eval

Note: According to AJCC, "The use of the term pathologic staging is reserved for patients who undergo staging laparotomy with an explicit intent to assess the presence of abdominal disease or to define histologic microscopic disease extent in the abdomen. Staging laparotomy and pathological staging have been essentially abandoned as useful procedures." (6th ed., page 396) Therefore, Collaborative Staging uses a modified evaluation scheme for lymphomas, and it applies to the CS TS/EXT-EVAL field only. The other EVAL fields are coded as "not applicable" for this schema

Code	Description	Staging Basis
0	No staging laparotomy done. No autopsy evidence used.	c
3	Staging laparotomy done.	p
8	Evidence from autopsy only (tumor was unsuspected or undiagnosed prior to autopsy)	a
9	Unknown if staging laparotomy done Not assessed; cannot be assessed Unknown if assessed Not documented in patient record	c

Hodgkin and Non-Hodgkin Lymphomas of All Sites (excl. Mycosis Fungoides and Sezary Disease)

CS Lymph Nodes

Code	Description	TNM	SS77	SS2000
88	Not applicable	NA	U	U

Hodgkin and Non-Hodgkin Lymphomas of All Sites (excl. Mycosis Fungoides and Sezary Disease)

CS Reg Nodes Eval

Code	Description	Staging Basis
9	Not applicable for this site.	NA

Hodgkin and Non-Hodgkin Lymphomas of All Sites (excl. Mycosis Fungoides and Sezary Disease)

Reg LN Pos

Code	Description
99	Not applicable for this site

Collaborative Staging Manual and Coding Instructions Part II: Primary Site Schema

Hodgkin and Non-Hodgkin Lymphomas of All Sites (excl. Mycosis Fungoides and Sezary Disease)

Reg LN Exam

Code	Description
99	Not applicable for this site

Hodgkin and Non-Hodgkin Lymphomas of All Sites (excl. Mycosis Fungoides and Sezary Disease)

CS Mets at DX

Code	Description	TNM	SS77	SS2000
88	Not applicable	NA	U	U

Hodgkin and Non-Hodgkin Lymphomas of All Sites (excl. Mycosis Fungoides and Sezary Disease)

CS Mets Eval

Code	Description	Staging Basis
9	Not applicable for this site.	NA

Hodgkin and Non-Hodgkin Lymphomas of All Sites (excl. Mycosis Fungoides and Sezary Disease)

CS Site-Specific Factor 1 Associated with HIV/AIDS

Note: HIV (Human Immunodeficiency Virus) includes types I and II. Older terminology includes HTLV-3 and LAV.

Code	Description
001	Yes/Present
002	No/Not present
999	Unknown if present or not insufficient information Not documented in patient record

Hodgkin and Non-Hodgkin Lymphomas of All Sites (excl. Mycosis Fungoides and Sezary Disease)

CS Site-Specific Factor 2 Systemic Symptoms at Diagnosis

Note 1. Each stage should be classified as either A or B according to the absence or presence of defined constitutional symptoms, such as: 1. Fevers: Unexplained fever with temperature above 38 degrees C; 2. Night sweats: Drenching sweats that require change of bedclothes; 3. Weight loss: Unexplained weight loss of more than 10% of the usual body weight in the 6 months prior to diagnosis.

Note 2. Pruritus alone does not qualify for B classification, nor does alcohol intolerance, fatigue, or a short, febrile illness associated with suspected infections.

Code	Description	Modifier
000	No B symptoms (Asymptomatic)	A
010	Any B symptoms: Night sweats Unexplained fever (above 38 degrees C) Unexplained weight loss (generally greater than 10% loss of body weight in the six months before admission) B symptoms, NOS	B
020	Pruritis (if recurrent and unexplained)	B
030	(010) + (020)	B
999	Unknown if symptoms; insufficient information Not documented in patient record	BLANK

The "A" or "B" is appended to the stage I-IV as determined in the data item CS Site-Specific Factor 2, Systemic Symptoms at Diagnosis.

Hodgkin and Non-Hodgkin Lymphomas of All Sites (excl. Mycosis Fungoides and Sezary Disease)

CS Site-Specific Factor 3 IPI Score

Note: Record the IPI (International Prognostic Index) as stated in the medical record.

Code	Description	Risk Group
000	0 points	Low
001	1 point	Low
002	2 points	Low intermediate
003	3 points	High intermediate
004	4 points	High
005	5 points	High
999	Unknown Insufficient information Not documented in patient record	

Hodgkin and Non-Hodgkin Lymphomas of All Sites (excl. Mycosis Fungoides and Sezary Disease)

CS Site-Specific Factor 4

Code	Description
888	Not applicable for this site

Hodgkin and Non-Hodgkin Lymphomas of All Sites (excl. Mycosis Fungoides and Sezary Disease)

CS Site-Specific Factor 5

Code	Description
888	Not applicable for this site

Hodgkin and Non-Hodgkin Lymphomas of All Sites (excl. Mycosis Fungoides and Sezary Disease)

CS Site-Specific Factor 6

Code	Description
888	Not applicable for this site

Hematopoietic, Reticuloendothelial, Immunoproliferative, and Myeloproliferative Neoplasms

(M-9731-9734, 9740-9742, 9750-9758, 9760-9762, 9764-9769, 9800-9801, 9805, 9820, 9823, 9826-9827, 9831-9837, 9840, 9860-9861, 9863, 9866-9867, 9870-9876, 9891, 9895-9897, 9910, 9920, 9930-9931, 9940, 9945-9946, 9948, 9950, 9960-9964, 9970, 9975, 9980, 9982-9987, 9989)

Note: This list includes only preferred terms from ICD-O-3

9731 Plasmacytoma, NOS	9866 Acute promyelocytic leukemia
9732 Multiple myeloma	9867 Acute myelomonocytic leukemia
9733 Plasma cell leukemia	9870 Acute basophilic leukemia
9734 Plasmacytoma, extramedullary	9871 Acute myeloid leukemia with abnormal marrow, eosinophils
9740 Mast cell sarcoma	9872 Acute myeloid leukemia, minimal differentiation
9741 Malignant mastocytosis	9873 Acute myeloid leukemia without maturation
9742 Mast cell leukemia	9874 Acute myeloid leukemia with maturation
9750 Malignant histiocytosis	9875 Chronic myelogenous leukemia, BCR/ABL positive
9751 Langerhans cell histiocytosis, NOS*	9876 Atypical chronic myeloid leukemia BCR/ABL negative
9752 Langerhans cell histiocytosis, unifocal*	9891 Acute monocytic leukemia
9753 Langerhans cell histiocytosis, multifocal*	9895 Acute myeloid leukemia with multilineage dysplasia
9754 Langerhans cell histiocytosis disseminated	9896 Acute myeloid leukemia, t(8;21)(q22;q22)
9755 Histiocytic sarcoma	9897 Acute myeloid leukemia, 11q23 abnormalities
9756 Langerhans cell sarcoma	9910 Acute megakaryoblastic leukemia
9757 Interdigitating dendritic cell sarcoma	9920 Therapy-related acute myeloid leukemia, NOS
9758 Follicular dendritic cell sarcoma	9930 Myeloid sarcoma
9760 Immunoproliferative disease, NOS	9931 Acute panmyelosis with myelofibrosis
9761 Waldenstrom macroglobulinemia	9940 Hairy cell leukemia
9762 Heavy chain disease, NOS	9945 Chronic myelomonocytic leukemia, NOS
9764 Immunoproliferative small intestinal disease	9946 Juvenile myelomonocytic leukemia
9765 Monoclonal gammopathy of undetermined significance*	9948 Aggressive NK-cell leukemia
9766 Angiocentric immunoproliferative lesion*	9950 Polycythemia (rubra) vera
9767 Angioimmunoblastic lymphadenopathy*	9960 Chronic myeloproliferative disease, NOS
9768 T-gamma lymphoproliferative disease*	9961 Myelosclerosis with myeloid metaplasia
9769 Immunoglobulin deposition disease*	9962 Essential thrombocythemia
9800 Leukemia, NOS	9963 Chronic neutrophilic leukemia
9801 Acute leukemia, NOS	9964 Hypereosinophilic syndrome
9805 Acute biphenotypic leukemia	9970 Lymphoproliferative disorder, NOS*
9820 Lymphoid leukemia, NOS	9975 Myeloproliferative disease, NOS*
9823 B-cell chronic lymphocytic leukemia/small lymphocytic lymphoma	9980 Refractory anemia, NOS
9826 Burkitt cell leukemia	9982 Refractory anemia with sideroblasts
9827 Adult T-cell leukemia/lymphoma (HTLV-1 positive)	9983 Refractory anemia with excess blasts
9831 T-cell large granular lymphocytic leukemia*	9984 Refractory anemia with excess blasts in transformation
9832 Prolymphocytic leukemia, NOS	9985 Refractory cytopenia with multilineage dysplasia
9833 Prolymphocytic leukemia, B-cell type	9986 Myelodysplastic syndrome with 5q deletion (5q-) syndrome
9834 Prolymphocytic leukemia, T-cell type	9987 Therapy-related myelodysplastic syndrome, NOS
9835 Precursor cell lymphoblastic leukemia, NOS	9989 Myelodysplastic syndrome, NOS
9836 Precursor B-cell lymphoblastic leukemia	
9837 Precursor T-cell lymphoblastic leukemia	
9840 Acute myeloid leukemia, M6 type	
9860 Myeloid leukemia, NOS	
9861 Acute myeloid leukemia, NOS	
9863 Chronic myeloid leukemia	

*Usually considered of uncertain/borderline behavior

Hematopoietic, Reticuloendothelial, Immunoproliferative, and Myeloproliferative Neoplasms

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

CS Tumor Size	CS Site-Specific Factor 1	<p>The following tables are available at the collaborative staging website: Histologies for Which AJCC Staging Is Not Generated AJCC Stage</p>
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		

Hematopoietic, Reticuloendothelial, Immunoproliferative, and Myeloproliferative Neoplasms

CS Tumor Size

Code	Description
888	Not applicable

Hematopoietic, Reticuloendothelial, Immunoproliferative, and Myeloproliferative Neoplasms

CS Extension

Code	Description	TNM	SS77	SS2000
10	Localized disease: (single/solitary/unifocal/isolated/mono-ostotic) may be coded for: Plasmacytoma, NOS (M-9731/3) (solitary myeloma) Mast cell sarcoma (M-9740) Malignant histiocytosis (M-9750) Histiocytic sarcoma (M-9755) Langerhans cell sarcoma (M-9756) Dendritic cell sarcoma (M-9757, M-9758) Myeloid sarcoma (M-9930)	NA	L	L
80	Systemic disease (poly-ostotic): All histologies including those in 10	NA	D	D
99	Unknown	NA	D	D

Hematopoietic, Reticuloendothelial, Immunoproliferative, and Myeloproliferative Neoplasms

CS TS/Ext-Eval

Code	Description	Staging Basis
9	Not applicable for this site	NA

**Hematopoietic, Reticuloendothelial, Immunoproliferative, and Myeloproliferative Neoplasms
CS Lymph Nodes**

Code	Description	TNM	SS77	SS2000
88	Not applicable	NA	U	U

**Hematopoietic, Reticuloendothelial, Immunoproliferative, and Myeloproliferative Neoplasms
CS Reg Nodes Eval**

Code	Description	Staging Basis
9	Not applicable for this site	NA

**Hematopoietic, Reticuloendothelial, Immunoproliferative, and Myeloproliferative Neoplasms
Reg LN Pos**

Code	Description
99	Not applicable.

**Hematopoietic, Reticuloendothelial, Immunoproliferative, and Myeloproliferative Neoplasms
Reg LN Exam**

Code	Description
99	Not applicable.

**Hematopoietic, Reticuloendothelial, Immunoproliferative, and Myeloproliferative Neoplasms
CS Mets at DX**

Code	Description	TNM	SS77	SS2000
88	Not applicable	NA	U	U

**Hematopoietic, Reticuloendothelial, Immunoproliferative, and Myeloproliferative Neoplasms
CS Mets Eval**

Code	Description	Staging Basis
9	Not applicable for this site	NA

Hematopoietic, Reticuloendothelial, Immunoproliferative, and Myeloproliferative Neoplasms

CS Site-Specific Factor 1

Code	Description
888	Not applicable for this site

Hematopoietic, Reticuloendothelial, Immunoproliferative, and Myeloproliferative Neoplasms

CS Site-Specific Factor 2

Code	Description
888	Not applicable for this site

Hematopoietic, Reticuloendothelial, Immunoproliferative, and Myeloproliferative Neoplasms

CS Site-Specific Factor 3

Code	Description
888	Not applicable for this site

Hematopoietic, Reticuloendothelial, Immunoproliferative, and Myeloproliferative Neoplasms

CS Site-Specific Factor 4

Code	Description
888	Not applicable for this site

Hematopoietic, Reticuloendothelial, Immunoproliferative, and Myeloproliferative Neoplasms

CS Site-Specific Factor 5

Code	Description
888	Not applicable for this site

Hematopoietic, Reticuloendothelial, Immunoproliferative, and Myeloproliferative Neoplasms

CS Site-Specific Factor 6

Code	Description
888	Not applicable for this site

Other and Ill-Defined Sites, Unknown Primary Site

C42.0-C42.4, C76.0-C76.5, C76.7-C76.8, C77.0-C77.5, C77.8-C77.9, C80.9

Note: C42._ and C77._, Other than hematopoietic, reticuloendothelial, immunoproliferative and myeloproliferative neoplasms, Hodgkin and non-Hodgkin lymphomas, and Kaposi sarcoma

- C42.0 Blood
- C42.1 Bone marrow
- C42.2 Spleen
- C42.3 Reticuloendothelial system, NOS
- C42.4 Hematopoietic system, NOS
- C76.0 Head, face or neck, NOS
- C76.1 Thorax, NOS
- C76.2 Abdomen, NOS
- C76.3 Pelvis, NOS
- C76.4 Upper limb, NOS
- C76.5 Lower limb, NOS
- C76.7 Other ill-defined sites
- C76.8 Overlapping lesion of ill-defined sites
- C77.0 Head, face and neck
- C77.1 Intrathoracic
- C77.2 Intra-abdominal
- C77.3 Axilla or arm
- C77.4 Inguinal region or leg
- C77.5 Pelvis
- C77.8 Lymph nodes of multiple regions
- C77.9 Lymph nodes, NOS
- C80.9 Unknown primary site

Note: 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 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	<p>The following tables are available at the collaborative staging website:</p> Histologies for Which AJCC Staging Is Not Generated AJCC Stage
--	--	--

Other and Ill-Defined Sites, Unknown Primary Site

CS Tumor Size

SEE STANDARD TABLE

Other and Ill-Defined Sites, Unknown Primary Site

CS Extension

Code	Description	TNM	SS77	SS2000
88	Not applicable for this site	NA	U	U

Collaborative Staging Manual and Coding Instructions Part II: Primary Site Schema

Other and Ill-Defined Sites, Unknown Primary Site

CS TS/Ext-Eval

Code	Description	Staging Basis
9	Not applicable for this site	NA

Other and Ill-Defined Sites, Unknown Primary Site

CS Lymph Nodes

Code	Description	TNM	SS77	SS2000
88	Not applicable	NA	U	U

Other and Ill-Defined Sites, Unknown Primary Site

CS Reg Nodes Eval

Code	Description	Staging Basis
9	Not applicable for this site	NA

Other and Ill-Defined Sites, Unknown Primary Site

Reg LN Pos

Code	Description
99	Not applicable.

Other and Ill-Defined Sites, Unknown Primary Site

Reg LN Exam

Code	Description
99	Not applicable.

Other and Ill-Defined Sites, Unknown Primary Site

CS Mets at DX

Code	Description	TNM	SS77	SS2000
88	Not applicable	NA	U	U

Other and Ill-Defined Sites, Unknown Primary Site

CS Mets Eval

Code	Description	Staging Basis
9	Not applicable for this site	NA

**Other and Ill-Defined Sites, Unknown Primary Site
CS Site-Specific Factor 1**

Code	Description
888	Not applicable for this site

**Other and Ill-Defined Sites, Unknown Primary Site
CS Site-Specific Factor 2**

Code	Description
888	Not applicable for this site

**Other and Ill-Defined Sites, Unknown Primary Site
CS Site-Specific Factor 3**

Code	Description
888	Not applicable for this site

**Other and Ill-Defined Sites, Unknown Primary Site
CS Site-Specific Factor 4**

Code	Description
888	Not applicable for this site

**Other and Ill-Defined Sites, Unknown Primary Site
CS Site-Specific Factor 5**

Code	Description
888	Not applicable for this site

**Other and Ill-Defined Sites, Unknown Primary Site
CS Site-Specific Factor 6**

Code	Description
888	Not applicable for this site

Page left blank.

Standard Tables

ICD-O-3 Site Code, Histology, Behavior

CS Tumor Size CS TS/Ext-Eval CS Reg Nodes Eval CS Mets Eval Reg LN Pos Reg LN Exam CS Mets at DX	<p>The following tables are available at the collaborative staging website:</p> Summary Stage Valid ICD-O-3 Site Codes Valid ICD-O-3 Histology Codes T Allowable Codes N Allowable Codes M Allowable Codes Stage Allowable Codes Summary Stage Allowable Codes
--	--

Standard Tables

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
999	Unknown; size not stated Not documented in patient record

Standard Tables

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. 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

Collaborative Staging Manual and Coding Instructions Part II: Primary Site Schema

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/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

Standard Tables

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.	c
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

Collaborative Staging Manual and Coding Instructions Part II: Primary Site Schema

Standard Tables

Reg LN Pos

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

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
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

Standard Tables

Reg LN Exam

Code	Description
00	No nodes examined
01-89	1 - 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

Collaborative Staging Manual and Coding Instructions Part II: Primary Site Schema

Standard Tables

CS Mets at DX

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

Standard Tables

CS Mets Eval

Note: This item reflects the validity of the classification of the item CS Mets at DX only according to the diagnostic methods employed.

Code	Description	Staging Basis
0	No pathologic examination of metastatic tissue performed. Evaluation based on physical examination, imaging examination, and/or other non-invasive clinical evidence. No autopsy evidence used.	c
1	No pathologic examination of metastatic tissue performed. Evaluation of distant metastasis based on endoscopic examination or other invasive technique, including surgical observation without biopsy. No autopsy evidence used.	c
2	No pathologic examination of metastatic tissue done prior to death, but evidence derived from autopsy (tumor was suspected or diagnosed prior to autopsy).	p
3	Pathologic examination of metastatic tissue performed WITHOUT pre-surgical systemic treatment or radiation OR pathologic examination of metastatic tissue performed, unknown if pre-surgical systemic treatment or radiation performed.	p
5	Pathologic examination of metastatic tissue performed WITH pre-surgical systemic treatment or radiation, BUT metastasis based on clinical evidence.	c
6	Pathologic examination of metastatic tissue performed WITH pre-surgical systemic treatment or radiation, and metastasis based on pathologic evidence.	y
8	Evidence from autopsy, and; tumor was unsuspected or undiagnosed prior to autopsy.	a
9	Not assessed; cannot be assessed Unknown if assessed Not documented in patient record	c

INDEX OF SCHEMA BY ICD-O-3 PRIMARY SITE CODE

(excluding histology-based schemas for malignant lymphoma, Kaposi sarcoma, and the hematopoietic diseases)

- Hematopoietic and reticuloendothelial system neoplasms of all sites** page 629
 (ICD-O-3 morphology codes: M-9731-9734, 9740-9742, 9750-9758, 9760-9762, 9764-69, 9800-9801, 9805, 9820, 9823, 9826-9827, 9831-9837, 9840, 9860-9861, 9863, 9866-9867, 9870-9876, 9891, 9895-9897, 9910, 9920, 9930-9931, 9940, 9945-9946, 9948, 9950, 9960-9964, 9970, 9975, 9980, 9982-9987, 9989)
- Hodgkin and non-Hodgkin lymphomas of all sites** page 623
 (ICD-O-3 morphology codes: M-9590-9591, 9596, 9650-9655, 9659, 9661-9665, 9667, 9670-9671, 9673, 9675, 9678-9680, 9684, 9687, 9689-9691, 9695, 9698-9699, 9705, 9708-9709, 9714, 9716-9719, 9727-9729)
- Kaposi sarcoma of all sites** (ICD-O-3 morphology code M-9140) page 619

	Page		Page
C00.0 External upper lip (vermillion border)	87	C10.0 Vallecula	215
C00.1 External lower lip (vermillion border)	95	C10.1 Anterior surface of epiglottis	223
C00.2 External lip, NOS (vermillion border)	103	C10.2 Lateral wall of oropharynx	215
C00.3 Mucosa of upper lip	87	C10.3 Posterior wall of oropharynx	215
C00.4 Mucosa of lower lip	95	C10.4 Branchial cleft	215
C00.5 Mucosa of lip, NOS	103	C10.8 Overlapping lesion of oropharynx	215
C00.6 Commissure of lip	95	C10.9 Oropharynx, NOS	215
C00.8 Overlapping lesion of lip	103	C11.0 Superior wall of nasopharynx	231
C00.9 Lip, NOS (excludes skin of lip C44.0)	103	C11.1 Posterior wall of nasopharynx	231
C01.9 Base of tongue, NOS	111	C11.2 Lateral wall of nasopharynx	231
C02.0 Dorsal surface of tongue, NOS	119	C11.3 Anterior wall of nasopharynx	231
C02.1 Border of tongue	119	C11.8 Overlapping lesion of nasopharynx	231
C02.2 Ventral surface of tongue, NOS	119	C11.9 Nasopharynx, NOS	231
C02.3 Anterior two-thirds of tongue, NOS	119	C12.9 Pyriform sinus	239
C02.4 Lingual tonsil	111	C13.0 Postcricoid region	239
C02.8 Overlapping lesion of tongue	119	C13.1 Hypopharyngeal aspect of aryepiglottic fold	239
C02.9 Tongue, NOS	119	C13.2 Posterior wall of hypopharynx	239
C03.0 Upper gum	127	C13.8 Overlapping lesion of hypopharynx	239
C03.1 Lower gum	135	C13.9 Hypopharynx, NOS	239
C03.9 Gum, NOS	143	C13.9 Laryngopharynx	239
C04.0 Anterior floor of mouth	151	C14.0 Pharynx, NOS	247
C04.1 Lateral floor of mouth	151	C14.2 Waldeyer ring	247
C04.8 Overlapping lesion of floor of mouth	151	C14.8 Overlapping lesion of lip, oral cavity and pharynx	247
C04.9 Floor of mouth, NOS	151	C15.0 Cervical esophagus	253
C05.0 Hard palate	159	C15.1 Thoracic esophagus	253
C05.1 Soft palate, NOS	167	C15.2 Abdominal esophagus	253
C05.2 Uvula	167	C15.3 Upper third of esophagus	253
C05.8 Overlapping lesion of palate	175	C15.4 Middle third of esophagus	253
C05.9 Palate, NOS	175	C15.5 Lower third of esophagus	253
C06.0 Cheek mucosa	183	C15.8 Overlapping lesion of esophagus	253
C06.1 Vestibule of mouth	183	C15.9 Esophagus, NOS	253
C06.2 Retromolar area	135	C16.0 Cardia, NOS	259
C06.8 Overlapping lesion of other and unspecified parts of mouth	175	C16.1 Fundus of stomach	259
C06.9 Minor salivary gland, NOS	175	C16.2 Body of stomach	259
C06.9 Mouth, NOS	175	C16.3 Gastric antrum	259
C07.9 Parotid gland	191	C16.4 Pylorus	259
C08.0 Submandibular gland	199	C16.5 Lesser curvature of stomach, NOS	259
C08.1 Sublingual gland	207	C16.6 Greater curvature of stomach, NOS	259
C08.8 Overlapping lesion of major salivary glands	207	C16.8 Overlapping lesion of stomach	259
C08.9 Major salivary gland, NOS	207	C16.9 Stomach, NOS	259
C09.0 Tonsillar fossa	215	C17.0 Duodenum	265
C09.1 Tonsillar pillar	215	C17.1 Jejunum	265
C09.8 Overlapping lesion of tonsil	215	C17.2 Ileum (excludes ileocecal valve, C18.0)	265
C09.9 Tonsil, NOS	215		

Collaborative Staging Manual and Coding Instructions Part II: Primary Site Schema

	Page		Page
C17.3 Meckel diverticulum (as site of neoplasm)	265	C34.2 Middle lobe of lung	403
C17.8 Overlapping lesion of small intestine	265	C34.3 Lower lobe of lung	403
C17.9 Small intestine, NOS	265	C34.8 Overlapping lesion of lung	403
C18.0 Cecum	271	C34.9 Lung, NOS	403
C18.1 Appendix	271	C37.9 Thymus	615
C18.2 Ascending (right) colon	271	C38.0 Heart	411
C18.3 Hepatic flexure of colon	271	C38.1 Anterior mediastinum	411
C18.4 Transverse colon	271	C38.2 Posterior mediastinum	411
C18.5 Splenic flexure of colon	271	C38.3 Mediastinum, NOS	411
C18.6 Descending (left) colon	271	C38.4 Pleura, NOS (including visceral and parietal)	415
C18.7 Sigmoid colon	271	C38.8 Overlapping lesion of heart, mediastinum and pleura	411
C18.8 Overlapping lesion of colon	271	C39.0 Upper respiratory tract, NOS	419
C18.9 Colon, NOS	271	C39.8 Overlapping lesion of respiratory system and intrathoracic organs	419
C19.9 Rectosigmoid junction	279	C39.9 Ill-defined sites within respiratory system	419
C20.9 Rectum, NOS	279	C40.0 Long bones of upper limb, scapula and associated joints	423
C21.0 Anus, NOS	285	C40.1 Short bones of upper limb and associated joints	423
C21.1 Anal canal	285	C40.2 Long bones of lower limb and associated joints	423
C21.2 Cloacogenic zone	285	C40.3 Short bones of lower limb and associated joints	423
C21.8 Overlapping lesion of rectum, anus and anal canal	285	C40.8 Overlapping lesion of bones, joints and articular cartilage of limbs	423
C22.0 Liver	289	C40.9 Bone of limb, NOS	423
C22.1 Intrahepatic bile duct	289	C41.0 Bones of skull and face and associated joints	423
C23.9 Gallbladder	295	C41.1 Mandible	423
C24.0 Extrahepatic bile duct(s) (choledochal, common, cystic, and hepatic bile duct(s); sphincter of Oddi)	299	C41.2 Vertebral column	423
C24.1 Ampulla of Vater	303	C41.3 Rib, sternum, clavicle and associated joints	423
C24.8 Overlapping lesion of biliary tract	307	C41.4 Pelvic bones, sacrum, coccyx and associated joints	423
C24.9 Biliary tract, NOS	307	C41.8 Overlapping lesion of bones, joints and articular cartilage	423
C25.0 Head of pancreas	311	C41.9 Bone, NOS (including articular cartilage)	423
C25.1 Body of pancreas	315	C41.9 Bone, NOS	423
C25.2 Tail of pancreas	315	C42.0 Blood (other than hematopoietic, reticuloendothelial, immunoproliferative and myeloproliferative neoplasms)	633
C25.3 Pancreatic duct	319	C42.1 Bone marrow (other than hematopoietic, reticuloendothelial, immunoproliferative and myeloproliferative neoplasms)	633
C25.4 Islets of Langerhans	319	C42.2 Spleen (other than hematopoietic, reticuloendothelial, immunoproliferative and myeloproliferative neoplasms)	633
C25.7 Other and unspecified parts of pancreas (neck)	319	C42.3 Reticuloendothelial system, NOS	633
C25.8 Overlapping lesion of pancreas	319	C42.4 Hematopoietic system, NOS	633
C25.9 Pancreas, NOS	319	C44.0 Skin of lip, NOS (excluding vermilion surface C00._) (excluding melanoma, Kaposi sarcoma, mycosis fungoides, Sezary disease and other lymphomas)	427
C26.0 Intestinal tract, NOS	323		
C26.8 Overlapping lesion of digestive system	323		
C26.9 Gastrointestinal tract, NOS	323		
C30.0 Nasal cavity (excludes nose, NOS C76.0)	327		
C30.1 Middle ear (tympanic cavity)	335		
C31.0 Maxillary sinus (antrum)	343		
C31.1 Ethmoid sinus	351		
C31.2 Frontal sinus	359		
C31.3 Sphenoid sinus	359		
C31.8 Overlapping lesion of accessory sinuses	359		
C31.9 Accessory sinus, NOS	359		
C32.0 Glottis (vocal cord)	367		
C32.1 Supraglottic larynx	375		
C32.2 Subglottic larynx	383		
C32.3 Laryngeal cartilage	391		
C32.8 Overlapping lesion of larynx	391		
C32.9 Larynx, NOS	391		
C33.9 Trachea	399		
C34.0 Main bronchus, incl. carina, hilus	403		
C34.1 Upper lobe of lung, incl. lingula	403		

Collaborative Staging Manual and Coding Instructions Part II: Primary Site Schema

	Page		Page
C44.0 Skin of lip, NOS (excl. vermilion surface C00._) (melanoma)	435	C44.8 Overlapping lesion of skin (excluding melanoma, Kaposi sarcoma, mycosis fungoides, Sezary disease and other lymphomas)	427
C44.0 Skin of lip, NOS (excl. vermilion surface C00._) (mycosis fungoides and Sezary disease)	443	C44.8 Overlapping lesion of skin (melanoma)	435
C44.1 Eyelid (excluding melanoma, Kaposi sarcoma, mycosis fungoides, Sezary disease and other lymphomas)	431	C44.8 Overlapping lesion of skin (mycosis fungoides and Sezary disease)	443
C44.1 Eyelid (melanoma)	435	C44.9 Skin, NOS (excluding melanoma, Kaposi sarcoma, mycosis fungoides, Sezary disease and other lymphomas)	427
C44.1 Eyelid (mycosis fungoides and Sezary disease)	443	C44.9 Skin, NOS (melanoma)	435
C44.2 External ear (excluding melanoma, Kaposi sarcoma, mycosis fungoides, Sezary disease and other lymphomas)	427	C44.9 Skin, NOS (mycosis fungoides and Sezary disease)	443
C44.2 External ear (melanoma)	435	C47.0 Peripheral nerves and autonomic nervous system of head, face and neck	447
C44.2 External ear (mycosis fungoides and Sezary disease)	443	C47.1 Peripheral nerves and autonomic nervous system of upper limb and shoulder	447
C44.3 Skin of other and unspecified parts of face (excluding melanoma, Kaposi sarcoma, mycosis fungoides, Sezary disease and other lymphomas)	427	C47.2 Peripheral nerves and autonomic nervous system of lower limb and hip	447
C44.3 Skin of other and unspecified parts of face (melanoma)	435	C47.3 Peripheral nerves and autonomic nervous system of thorax	447
C44.3 Skin of other and unspecified parts of face (mycosis fungoides and Sezary disease)	443	C47.4 Peripheral nerves and autonomic nervous system of abdomen	447
C44.4 Skin of scalp and neck (excluding melanoma, Kaposi sarcoma, mycosis fungoides, Sezary disease and other lymphomas)	427	C47.5 Peripheral nerves and autonomic nervous system of pelvis	447
C44.4 Skin of scalp and neck (melanoma)	435	C47.6 Peripheral nerves and autonomic nervous system of trunk, NOS	447
C44.4 Skin of scalp and neck (mycosis fungoides and Sezary disease)	443	C47.8 Overlapping lesion of peripheral nerves and autonomic nervous system	447
C44.5 Skin of trunk (excluding melanoma, Kaposi sarcoma, mycosis fungoides, Sezary disease and other lymphomas)	427	C47.9 Autonomic nervous system, NOS	447
C44.5 Skin of trunk (melanoma)	435	C48.0 Retroperitoneum	453
C44.5 Skin of trunk (mycosis fungoides and Sezary disease)	443	C48.1 Specified parts of peritoneum (incl. omentum and mesentery)	453
C44.6 Skin of upper limb and shoulder (excluding melanoma, Kaposi sarcoma, mycosis fungoides, Sezary disease and other lymphomas)	427	C48.2 Peritoneum, NOS	453
C44.6 Skin of upper limb and shoulder (melanoma)	435	C48.8 Overlapping lesion of retroperitoneum and peritoneum	453
C44.6 Skin of upper limb and shoulder (mycosis fungoides and Sezary disease)	443	C49.0 Connective, subcutaneous and other soft tissues of head, face and neck	447
C44.7 Skin of lower limb and hip (excluding melanoma, Kaposi sarcoma, mycosis fungoides, Sezary disease and other lymphomas)	427	C49.1 Connective, subcutaneous and other soft tissues of upper limb and shoulder	447
C44.7 Skin of lower limb and hip (melanoma)	435	C49.2 Connective, subcutaneous and other soft tissues of lower limb and hip	447
C44.7 Skin of lower limb and hip (mycosis fungoides and Sezary disease)	443	C49.3 Connective, subcutaneous and other soft tissues of thorax	447
		C49.4 Connective, subcutaneous and other soft tissues of abdomen	447
		C49.5 Connective, subcutaneous and other soft tissues of pelvis	447
		C49.6 Connective, subcutaneous and other soft tissues of trunk, NOS	447
		C49.8 Overlapping lesion of connective, subcutaneous and other soft tissues	447
		C49.9 Connective, subcutaneous and other soft tissue, NOS	447

Collaborative Staging Manual and Coding Instructions Part II: Primary Site Schema

	Page		Page
C50.0 Nipple	457	C57.7 Other specified parts of female genital organs	503
C50.1 Central portion of breast (subareolar)	457	C57.8 Overlapping lesion of female genital organs	503
C50.2 Upper-inner quadrant of breast	457	C57.9 Female genital tract, NOS	503
C50.3 Lower-inner quadrant of breast	457	C58.9 Placenta	507
C50.4 Upper-outer quadrant of breast	457	C60.0 Prepuce (excluding melanoma, Kaposi sarcoma, mycosis fungoides, Sezary disease and other lymphomas)	513
C50.5 Lower-outer quadrant of breast	457	C60.0 Prepuce (melanoma)	435
C50.6 Axillary tail of breast	457	C60.0 Prepuce (mycosis fungoides and Sezary disease)	443
C50.8 Overlapping lesion of breast	457	C60.1 Glans penis (excluding melanoma, Kaposi sarcoma, mycosis fungoides, Sezary disease and other lymphomas)	513
C50.9 Breast, NOS	457	C60.1 Glans penis (melanoma)	435
C51.0 Labia majus (excluding melanoma, Kaposi sarcoma, mycosis fungoides, Sezary disease and other lymphomas)	467	C60.1 Glans penis (mycosis fungoides and Sezary disease)	443
C51.0 Labia majus (melanoma)	435	C60.2 Body of penis (excluding melanoma, Kaposi sarcoma, mycosis fungoides, Sezary disease and other lymphomas)	513
C51.0 Labia majus (mycosis fungoides and Sezary disease)	443	C60.2 Body of penis (melanoma)	435
C51.1 Labia minus (excluding melanoma, Kaposi sarcoma, mycosis fungoides, Sezary disease and other lymphomas)	467	C60.2 Body of penis (mycosis fungoides and Sezary disease)	443
C51.1 Labia minus (melanoma)	435	C60.8 Overlapping lesion of penis (excluding melanoma, Kaposi sarcoma, mycosis fungoides, Sezary disease and other lymphomas)	513
C51.1 Labia minus (mycosis fungoides and Sezary disease)	443	C60.8 Overlapping lesion of penis (melanoma)	435
C51.2 Clitoris (excluding melanoma, Kaposi sarcoma, mycosis fungoides, Sezary disease and other lymphomas)	467	C60.8 Overlapping lesion of penis (mycosis fungoides and Sezary disease)	443
C51.2 Clitoris (melanoma)	435	C60.9 Penis, NOS (excluding melanoma, Kaposi sarcoma, mycosis fungoides, Sezary disease and other lymphomas)	513
C51.2 Clitoris (mycosis fungoides and Sezary disease)	443	C60.9 Penis, NOS (melanoma)	435
C51.8 Overlapping lesion of vulva (excluding melanoma, Kaposi sarcoma, mycosis fungoides, Sezary disease and other lymphomas)	467	C60.9 Penis, NOS (mycosis fungoides and Sezary disease)	443
C51.8 Overlapping lesion of vulva (melanoma)	435	C61.9 Prostate	517
C51.8 Overlapping lesion of vulva (mycosis fungoides and Sezary disease)	443	C62.0 Undescended testis	527
C51.9 Vulva, NOS (excluding melanoma, Kaposi sarcoma, mycosis fungoides, Sezary disease and other lymphomas)	467	C62.1 Descended testis	527
C51.9 Vulva, NOS (melanoma)	435	C62.9 Testis, NOS	527
C51.9 Vulva, NOS (mycosis fungoides and Sezary disease)	443	C63.0 Epididymis	533
C52.9 Vagina, NOS	471	C63.1 Spermatic cord	533
C53.0 Endocervix	475	C63.2 Scrotum, NOS (excluding melanoma, Kaposi sarcoma, mycosis fungoides, Sezary disease and other lymphomas)	537
C53.1 Exocervix	475	C63.2 Scrotum, NOS (melanoma)	435
C53.8 Overlapping lesion of cervix uteri	475	C63.2 Scrotum, NOS (mycosis fungoides and Sezary disease)	443
C53.9 Cervix uteri	475	C63.7 Other specified parts of male genital organs	533
C54.0 Isthmus uteri	481	C63.8 Overlapping lesion of male genital organs	533
C54.1 Endometrium	481	C63.9 Male genital organs, NOS	533
C54.2 Myometrium	481	C64.9 Kidney, NOS (renal parenchyma)	541
C54.3 Fundus uteri	481	C65.9 Renal pelvis	545
C54.8 Overlapping lesion of corpus uteri	481	C66.9 Ureter	545
C54.9 Corpus uteri	481		
C55.9 Uterus, NOS	481		
C56.9 Ovary	487		
C57.0 Fallopian tube	493		
C57.1 Broad ligament	499		
C57.2 Round ligament	499		
C57.3 Parametrium	499		
C57.4 Uterine adnexa	499		

Collaborative Staging Manual and Coding Instructions Part II: Primary Site Schema

	Page		Page
C67.0 Trigone of bladder	549	C71.0 Cerebrum	603
C67.1 Dome of bladder	549	C71.1 Frontal lobe	603
C67.2 Lateral wall of bladder	549	C71.2 Temporal lobe	603
C67.3 Anterior wall of bladder	549	C71.3 Parietal lobe	603
C67.4 Posterior wall of bladder	549	C71.4 Occipital lobe	603
C67.5 Bladder neck	549	C71.5 Ventricle, NOS	603
C67.6 Ureteric orifice	549	C71.6 Cerebellum, NOS	603
C67.7 Urachus	549	C71.7 Brain stem	603
C67.8 Overlapping lesion of bladder	549	C71.8 Overlapping lesion of brain	603
C67.9 Bladder, NOS	549	C71.9 Brain, NOS	603
C68.0 Urethra (incl. transitional cell carcinoma of prostatic urethra M-8120-8130)	555	C72.0 Spinal cord	607
C68.1 Paraurethral gland	559	C72.1 Cauda equina	607
C68.8 Overlapping lesion of urinary organs	559	C72.2 Olfactory nerve	607
C68.9 Urinary system, NOS	559	C72.3 Optic nerve	607
C69.0 Conjunctiva (excluding melanoma, retinoblastoma, Kaposi sarcoma, and lymphoma)	563	C72.4 Acoustic nerve	607
C69.0 Conjunctiva (melanoma)	567	C72.5 Cranial nerve, NOS	607
C69.0 Conjunctiva (retinoblastoma)	597	C72.8 Overlapping lesion of brain and central nervous system	607
C69.1 Cornea (excluding melanoma and retinoblastoma)	571	C72.9 Nervous system, NOS	607
C69.1 Cornea (melanoma)	585	C73.9 Thyroid gland	611
C69.1 Cornea (retinoblastoma)	597	C74.0 Adrenal (suprarenal) cortex	615
C69.2 Retina (excluding melanoma and retinoblastoma)	571	C74.1 Adrenal (suprarenal) medulla	615
C69.2 Retina (melanoma)	585	C74.9 Adrenal (suprarenal) gland, NOS	615
C69.2 Retina (retinoblastoma)	597	C75.0 Parathyroid gland	615
C69.3 Choroid (excluding melanoma and retinoblastoma)	571	C75.1 Pituitary gland	615
C69.3 Choroid (melanoma)	581	C75.2 Craniopharyngeal duct	615
C69.3 Choroid (retinoblastoma)	597	C75.3 Pineal gland	615
C69.4 Ciliary body (iris, sclera, lens, eyeball) (excluding melanoma and retinoblastoma)	571	C75.4 Carotid body	615
C69.4 Ciliary body (iris, sclera, lens, eyeball) (melanoma)	575	C75.5 Aortic body and other paraganglia	615
C69.4 Ciliary body (iris, sclera, lens, eyeball) (retinoblastoma)	597	C75.8 Overlapping lesion of endocrine glands and related structures	615
C69.5 Lacrimal gland (excluding melanoma and retinoblastoma)	589	C75.9 Endocrine gland, NOS	615
C69.5 Lacrimal gland (melanoma)	585	C76.0 Other and ill-defined sites of head, face or neck, NOS	633
C69.5 Lacrimal gland (retinoblastoma)	597	C76.1 Other and ill-defined sites of thorax, NOS	633
C69.6 Orbit, NOS (excluding retinoblastoma)	593	C76.2 Other and ill-defined sites of abdomen, NOS	633
C69.6 Orbit, NOS (retinoblastoma)	597	C76.3 Other and ill-defined sites of pelvis, NOS	633
C69.8 Overlapping lesion of eye and adnexa (excluding melanoma and retinoblastoma)	571	C76.4 Other and ill-defined sites of upper limb, NOS	633
C69.8 Overlapping lesion of eye and adnexa (melanoma)	585	C76.5 Other and ill-defined sites of lower limb, NOS	633
C69.8 Overlapping lesion of eye and adnexa (retinoblastoma)	597	C76.7 Other ill-defined sites	633
C69.9 Eye, NOS (excluding melanoma and retinoblastoma)	571	C76.8 Overlapping lesion of ill-defined sites	633
C69.9 Eye, NOS (melanoma)	585	C77.0 Head, face and neck, lymph nodes of	633
C69.9 Eye, NOS (retinoblastoma)	597	C77.1 Intrathoracic lymph nodes	633
C70.0 Cerebral meninges	603	C77.2 Intra-abdominal lymph nodes	633
C70.1 Spinal meninges	607	C77.3 Axilla or arm, lymph nodes of	633
C70.9 Meninges, NOS	607	C77.4 Inguinal region or leg, lymph nodes of	633
		C77.5 Pelvic lymph nodes	633
		C77.8 Lymph nodes of multiple regions	633
		C77.9 Lymph node, NOS	633
		C80.9 Unknown primary site	633

ALPHABETIC INDEX TO PART II: SITE SCHEMA

Page references are to the schema and do not list every reference to an organ or structure in the codes

	Page		Page
A			
Abdomen, connective tissue of	447	Bone, NOS (including articular cartilage)	423
Abdomen, nervous system of	447	Bone of limb, NOS	423
Abdomen, NOS , other and ill-defined sites of	633	Bones of skull and face and associated joints	423
Abdominal esophagus	253	Border of tongue	119
Accessory sinus, NOS	359	Brain, NOS	603
Acoustic nerve	607	Brain stem	603
Adnexa, uterine	499	Branchial cleft	215
Adrenal (suprarenal) cortex	615	Breast, NOS	457
Adrenal (suprarenal) gland, NOS	615	Broad ligament	499
Adrenal (suprarenal) medulla	615	Bronchus	403
Ampulla of Vater	303	Buccal mucosa	183
Anal canal	285	C	
Anterior floor of mouth	151	Canal, anal	285
Anterior mediastinum	411	Cardia, NOS	259
Anterior surface of epiglottis	223	Carotid body	615
Anterior two-thirds of tongue, NOS	119	Cartilage: articular	423
Anterior wall of bladder	549	Cartilage: laryngeal, arytenoid, cricoid, cuneiform, thyroid	391
Anterior wall of nasopharynx	231	Cauda equina	607
Antrum, gastric	259	Cecum	271
Anus, NOS	285	Central nervous system, other parts of	607
Aortic body and other paraganglia	615	Central portion of breast (subareolar)	457
Appendix	271	Cerebellum, NOS	603
Articular cartilage	423	Cerebral meninges	603
Aryepiglottic fold	375	Cerebrum	603
Aryepiglottic fold, hypopharyngeal aspect of	239	Cervical esophagus	253
Aryepiglottic fold, laryngeal aspect of	375	Cervix uteri	475
Arytenoid cartilage	391	Cheek mucosa	183
Ascending (right) colon	271	Choledochal bile duct(s)	299
Autonomic nervous system, NOS	447	Choroid (excluding melanoma and retinoblastoma)	571
Axilla or arm, Lymph nodes of	633	Choroid (melanoma)	581
Axillary tail of breast	457	Choroid (retinoblastoma)	597
B			
Base of tongue, NOS	111	Ciliary body (iris, sclera, lens, eyeball) (excluding melanoma and retinoblastoma)	571
Bile duct, intrahepatic	289	Ciliary body (iris, sclera, lens, eyeball) (melanoma)	575
Bile duct(s): choledochal, common, cystic, and hepatic	299	Ciliary body (iris, sclera, lens, eyeball) (retinoblastoma)	597
Biliary tract, NOS	307	Clavicle	423
Bladder neck	549	Cleft, branchial	215
Bladder, NOS	549	Clitoris (excluding melanoma, Kaposi sarcoma, mycosis fungoides, Sezary disease and other lymphomas)	467
Blood (other than hematopoietic, reticulo- endothelial, immunoproliferative and myeloproliferative neoplasms)	633	Clitoris (melanoma)	435
Body of pancreas	315	Clitoris (mycosis fungoides and Sezary disease)	443
Body of penis (excluding melanoma, Kaposi sarcoma, mycosis fungoides, Sezary disease and other lymphomas)	513	Cloacogenic zone	285
Body of penis (melanoma)	435	Coccyx	423
Body of penis (mycosis fungoides and Sezary disease)	443	Colon, NOS	271
Body of stomach	259	Column, vertebral	423
Bone marrow (other than hematopoietic, reticuloendothelial, immunoproliferative and myeloproliferative neoplasms)	633	Commissure of lip	95
		Common bile duct(s)	299

Collaborative Staging Manual and Coding Instructions Part II: Primary Site Schema

	Page		Page
Conjunctiva (excluding melanoma, retinoblastoma, Kaposi sarcoma, and lymphoma)	563	Epiglottis, anterior surface of	223
Conjunctiva (melanoma)	567	Esophagus, NOS	253
Conjunctiva (retinoblastoma)	597	Ethmoid sinus	351
Connective, subcutaneous and other soft tissues, NOS	447	Exocervix	475
Connective, subcutaneous and other soft tissues of abdomen	447	External ear (excluding melanoma, Kaposi sarcoma, mycosis fungoides, Sezary disease and other lymphomas)	427
Connective, subcutaneous and other soft tissues of head, face and neck	447	External ear (melanoma)	435
Connective, subcutaneous and other soft tissues of lower limb and hip	447	External ear (mycosis fungoides and Sezary disease)	443
Connective, subcutaneous and other soft tissues of pelvis	447	External lip, NOS (vermilion border)	103
Connective, subcutaneous and other soft tissues of thorax	447	External lower lip (vermilion border)	95
Connective, subcutaneous and other soft tissues of trunk, NOS	447	External upper lip (vermilion border)	87
Connective, subcutaneous and other soft tissues of upper limb and shoulder	447	Extrahepatic bile duct(s) (choledochal, common, cystic, and hepatic bile duct(s); sphincter of Oddi)	299
Connective tissue	447	Eye, NOS (excluding melanoma and retinoblastoma)	571
Cord, false	375	Eye, NOS (melanoma)	585
Cord, spermatic	533	Eye, NOS (retinoblastoma)	597
Cord, spinal	607	Eyeball (excluding melanoma and retinoblastoma)	571
Cord, vocal	367	Eyeball (melanoma)	575
Cornea (excluding melanoma and retinoblastoma)	571	Eyeball (retinoblastoma)	597
Cornea (melanoma)	585	Eyelid (excluding melanoma, Kaposi sarcoma, mycosis fungoides, Sezary disease and other lymphomas)	431
Cornea (retinoblastoma)	597	Eyelid (melanoma)	435
Corpus uteri	481	Eyelid (mycosis fungoides and Sezary disease)	443
Cranial nerve, NOS	607	Eyelid, skin of (excluding melanoma, Kaposi sarcoma, mycosis fungoides, Sezary disease and other lymphomas)	431
Craniopharyngeal duct	615		
Cricoid cartilage	391	F	
Cul de sac	453	Fallopian tube	493
Cuneiform cartilage	391	False cord	375
Cystic bile duct(s)	299	Female genital tract, NOS	503
		Floor of mouth, NOS	151
D		Fossa, tonsillar	215
Descended testis	527	Frontal lobe	603
Descending (left) colon	271	Frontal sinus	359
Digestive system, ill-defined site of	323	Fundus of stomach	259
Digestive system, NOS	323	Fundus uteri	481
Dome of bladder	549		
Dorsal surface of tongue, NOS	119	G	
Duct (choledochal, common, cystic, and hepatic)	299	Gallbladder	295
Duct, bile, NOS	299	Gastric antrum	259
Duct, extrahepatic	299	Gastrointestinal tract, NOS	323
Duct, intrahepatic bile	289	Genital organs (male)	533
Duct, pancreatic	319	Genital tract (female)	503
Duodenum	265	Gingiva <i>see Gum</i>	
		Gland, lacrimal (excluding melanoma and retinoblastoma)	589
E		Gland, lacrimal (melanoma)	585
Ear (excluding melanoma, Kaposi sarcoma, mycosis fungoides, Sezary disease and other lymphomas)	427	Gland, lacrimal (retinoblastoma)	597
Ear (melanoma)	435	Gland, major salivary, NOS	207
Ear, middle	335	Gland, minor salivary, NOS	175
Ear (mycosis fungoides and Sezary disease)	443	Gland: parathyroid, pituitary, endocrine	615
Endocervix	475	Gland, paraurethral	559
Endocrine gland, NOS	615	Gland, parotid	191
Endometrium	481	Gland, prostate	517
Epididymis	533	Gland, sublingual	207
Epiglottis (posterior surface)	375	Gland, submandibular	199
Epiglottis, NOS	375	Gland, submaxillary	199

Collaborative Staging Manual and Coding Instructions Part II: Primary Site Schema

	Page		Page
Glans penis (excluding melanoma, Kaposi sarcoma, mycosis fungoides, Sezary disease and other lymphomas)	513	L	
Glans penis (melanoma)	435	Labia majus (excluding melanoma, Kaposi sarcoma, mycosis fungoides, Sezary disease and other lymphomas)	467
Glans penis (mycosis fungoides and Sezary disease)	443	Labia majus (melanoma)	435
Glottis (vocal cord)	367	Labia majus (mycosis fungoides and Sezary disease)	443
Greater curvature of stomach, NOS	259	Labia minus (excluding melanoma, Kaposi sarcoma, mycosis fungoides, Sezary disease and other lymphomas)	467
Gum, lower (gingiva)	135	Labia minus (melanoma)	435
Gum, NOS (gingiva)	143	Labia minus (mycosis fungoides and Sezary disease)	443
Gum, upper (gingiva)	127	Lacrimal gland (excluding melanoma and retinoblastoma)	589
H		Lacrimal gland (melanoma)	585
Hard palate	159	Lacrimal gland (retinoblastoma)	597
Head of pancreas	311	Langerhans, islets of, NOS	319
Head, face and neck, connective tissue of	447	Laryngeal cartilage	391
Head, face and neck, lymph nodes of	633	Laryngopharynx	239
Head, face and neck, nervous system of	447	Larynx: extrinsic	375
Head, face or neck, NOS, other and ill-defined sites of	633	Larynx: glottis	367
Heart	411	Larynx: NOS	391
Heart, mediastinum and pleura: overlapping lesion	411	Larynx: overlapping lesion	391
Hematopoietic system, NOS	633	Larynx: subglottis	383
Hematopoietic, reticuloendothelial, immunoproliferative, and myeloproliferative neoplasms (all sites)	629	Larynx: supraglottis	375
Hepatic bile duct(s)	299	Lateral floor of mouth	151
Hepatic flexure of colon	271	Lateral wall of bladder	549
Hilus of lung	403	Lateral wall of nasopharynx	231
Hypopharyngeal aspect of aryepiglottic fold	239	Lateral wall of oropharynx	215
Hypopharynx, NOS	239	Lens (excluding melanoma and retinoblastoma)	571
I		Lens (melanoma)	575
Ileum (excludes ileocecal valve, C18.0)	265	Lens (retinoblastoma)	597
Ill-defined site, other	633	Lesser curvature of stomach, NOS	259
Ill-defined sites within respiratory system	419	Ligament: broad, round	499
Immunoproliferative neoplasms (all sites)	629	Lingual tonsil	111
Inguinal region or leg, lymph nodes	633	Lip, lower (excludes skin of lip C44.0)	95
Intestinal tract, NOS	323	Lip, NOS (excludes skin of lip C44.0)	103
Intestine, large	271	Lip, upper (excludes skin of lip C44.0)	87
Intestine, small	265	Lip, oral cavity and pharynx, overlapping lesion of	247
Intra-abdominal lymph nodes	633	Liver	289
Intrahepatic bile duct	289	Lobe: frontal, temporal, parietal, occipital (brain)	603
Intrathoracic lymph nodes	633	Lobe: upper, middle, lower (lung)	403
Iris (excluding melanoma and retinoblastoma)	571	Long bones of lower limb and associated joints	423
Iris (melanoma)	575	Long bones of upper limb, scapula and associated joints	423
Iris (retinoblastoma)	597	Lower gum	135
Islets of Langerhans	319	Lower limb and hip, connective tissue of	447
Isthmus uteri	481	Lower limb and hip, nervous system of	447
J		Lower limb, NOS, other and ill-defined sites of	633
Jejunum	265	Lower lobe of lung	403
Joints	423	Lower third of esophagus	253
Junction, rectosigmoid	279	Lower-inner quadrant of breast	457
K		Lower-outer quadrant of breast	457
Kaposi sarcoma of all sites (M-9140)	619	Lung, NOS	403
Kidney, NOS (renal parenchyma)	541	Lymph node, NOS	633
		Lymph nodes of multiple regions	633
		Lymphoma (all sites)	623
		Lymphoma, Hodgkin (all sites)	623
		Lymphoma, non-Hodgkin (all sites)	623

Collaborative Staging Manual and Coding Instructions Part II: Primary Site Schema

	Page		Page
M		O	
Main bronchus, incl. carina, hilus	403	Occipital lobe	603
Major salivary gland, NOS	207	Olfactory nerve	607
Male genital organs, NOS	533	Optic nerve	607
Mandible	423	Oral cavity, ill-defined, NOS	175
Maxillary sinus (antrum)	343	Orbit, NOS (excluding retinoblastoma)	593
Meckel diverticulum (as site of neoplasm)	265	Orbit, NOS (retinoblastoma)	597
Mediastinum, NOS	411	Organs, male genital	533
Melanoma of choroid	581	Oropharynx, NOS	215
Melanoma of ciliary body	575	Other and unspecified parts of pancreas (neck)	319
Melanoma of clitoris	435	Other ill-defined sites	633
Melanoma of conjunctiva	567	Other specified parts of female genital organs	503
Melanoma of cornea	585	Other specified parts of male genital organs	533
Melanoma of external ear	435	Ovary	487
Melanoma of eyeball	575	Overlapping lesion of accessory sinuses	359
Melanoma of eyelid	435	Overlapping lesion of biliary tract	307
Melanoma of glans penis	435	Overlapping lesion of bladder	549
Melanoma of iris	575	Overlapping lesion of bones, joints and articular cartilage	423
Melanoma of labium majus	435	Overlapping lesion of bones, joints and articular cartilage of limbs	423
Melanoma of labium minus	435	Overlapping lesion of brain and central nervous system	607
Melanoma of lens	575	Overlapping lesion of brain	603
Melanoma of penis	435	Overlapping lesion of breast	457
Melanoma of prepuce	435	Overlapping lesion of cervix uteri	475
Melanoma of retina	585	Overlapping lesion of colon	271
Melanoma of sclera	575	Overlapping lesion of connective, subcutaneous and other soft tissues	447
Melanoma of scrotum	435	Overlapping lesion of corpus uteri	481
Melanoma of skin	435	Overlapping lesion of digestive system	323
Melanoma of vulva	435	Overlapping lesion of endocrine glands and related structures	615
Meninges: cerebral	603	Overlapping lesion of esophagus	253
Meninges, NOS	607	Overlapping lesion of eye and adnexa, (excluding melanoma and retinoblastoma)	571
Meninges: spinal	607	Overlapping lesion of eye and adnexa (melanoma)	585
Middle ear (tympanic cavity)	335	Overlapping lesion of eye and adnexa (retinoblastoma)	597
Middle lobe of lung	403	Overlapping lesion of female genital organs	503
Middle third of esophagus	253	Overlapping lesion of floor of mouth	151
Minor salivary gland, NOS	175	Overlapping lesion of heart, mediastinum and pleura	411
Mouth, floor of	151	Overlapping lesion of hypopharynx	239
Mouth, NOS	175	Overlapping lesion of ill-defined sites	633
Mouth, vestibule	183	Overlapping lesion of larynx	391
Mucosa, cheek	183	Overlapping lesion of lip	103
Mucosa of lip, NOS	103	Overlapping lesion of lip, oral cavity and pharynx	247
Mucosa of lower lip	95	Overlapping lesion of lung	403
Mucosa of upper lip	87	Overlapping lesion of major salivary glands	207
Mycosis fungoides of clitoris	443	Overlapping lesion of male genital organs	533
Mycosis fungoides of ear	443	Overlapping lesion of nasopharynx	231
Mycosis fungoides of eyelid	443	Overlapping lesion of oropharynx	215
Mycosis fungoides of labia majus	443	Overlapping lesion of other and unspecified parts of mouth	175
Mycosis fungoides of labia minus	443	Overlapping lesion of palate	175
Mycosis fungoides of penis	443	Overlapping lesion of pancreas	319
Mycosis fungoides of prepuce	443	Overlapping lesion of penis (excluding melanoma, Kaposi sarcoma, mycosis fungoides, Sezary disease and other lymphomas)	513
Mycosis fungoides of scrotum	443		
Mycosis fungoides of skin	443		
Mycosis fungoides of vulva	443		
Myeloproliferative neoplasms (all sites)	629		
Myometrium	481		
N			
Nasal cavity (excludes nose, NOS C76.0)	327		
Nasopharynx, NOS	231		
Nerve: olfactory, optic, acoustic, cranial	607		
Nerves, peripheral	447		
Nervous system, NOS	607		
Nipple	457		

Collaborative Staging Manual and Coding Instructions Part II: Primary Site Schema

	Page		Page
Overlapping lesion of penis (melanoma)	435	Peripheral nerves and autonomic nervous system of abdomen	447
Overlapping lesion of penis (mycosis fungoides and Sezary disease)	443	Peripheral nerves and autonomic nervous system of head, face and neck	447
Overlapping lesion of peripheral nerves and autonomic nervous system	447	Peripheral nerves and autonomic nervous system of lower limb and hip	447
Overlapping lesion of rectum, anus and anal canal	285	Peripheral nerves and autonomic nervous system of pelvis	447
Overlapping lesion of respiratory system and intrathoracic organs	419	Peripheral nerves and autonomic nervous system of thorax	447
Overlapping lesion of retroperitoneum and peritoneum	453	Peripheral nerves and autonomic nervous system of trunk, NOS	447
Overlapping lesion of skin (excluding melanoma, Kaposi sarcoma, mycosis fungoides, Sezary disease and other lymphomas)	427	Peripheral nerves and autonomic nervous system of upper limb and shoulder	447
Overlapping lesion of skin (melanoma)	435	Peritoneum, NOS	453
Overlapping lesion of skin (mycosis fungoides and Sezary disease)	443	Pharynx, NOS	247
Overlapping lesion of small intestine	265	Pillar, tonsillar	215
Overlapping lesion of stomach	259	Pineal gland	615
Overlapping lesion of tongue	119	Pituitary gland	615
Overlapping lesion of tonsil	215	Placenta	507
Overlapping lesion of urinary organs	559	Pleura, NOS (including visceral and parietal)	415
Overlapping lesion of vulva (excluding melanoma, Kaposi sarcoma, mycosis fungoides, Sezary disease and other lymphomas)	467	Pleura: visceral, parietal	415
Overlapping lesion of vulva (melanoma)	435	Postcricoid region	239
Overlapping lesion of vulva (mycosis fungoides and Sezary disease)	443	Posterior mediastinum	411
		Posterior wall of bladder	549
		Posterior wall of hypopharynx	239
		Posterior wall of nasopharynx	231
		Posterior wall of oropharynx	215
		Prepuce (excluding melanoma, Kaposi sarcoma, mycosis fungoides, Sezary disease and other lymphomas)	513
		Prepuce (melanoma)	435
		Prepuce (mycosis fungoides and Sezary disease)	443
		Prostate	517
		Pylorus	259
		Pyramidal sinus	239
P		R	
Palate, hard	159	Rectosigmoid junction	279
Palate, NOS	175	Rectum, NOS	279
Palate, soft	167	Renal parenchyma	541
Pancreas: body, tail	315	Renal pelvis	545
Pancreas: head	311	Respiratory system, ill-defined sites	419
Pancreas: neck of	319	Reticuloendothelial neoplasms (all sites)	629
Pancreas: NOS	319	Reticuloendothelial system, NOS (other than hematopoietic, reticuloendothelia, immunoproliferative and myeloproliferative neoplasms)	633
Pancreas: other and unspecified part of	319	Retina (excluding melanoma and retinoblastoma)	571
Pancreas: overlapping lesion	319	Retina (melanoma)	585
Pancreatic duct	319	Retina (retinoblastoma)	597
Parametrium	499	Retinoblastoma of eye	597
Paranasal sinus, NOS	359	Retinoblastoma of retina	597
Parathyroid gland	615	Retromolar area	135
Paraurethral gland	559	Retroperitoneum	453
Parenchyma, kidney (renal)	541	Rib, sternum, clavicle and associated joints	423
Parietal lobe	603	Round ligament	499
Parietal pleura	415		
Parotid gland	191		
Pelvic bones, sacrum, coccyx and associated joints	423		
Pelvic lymph nodes	633		
Pelvic peritoneum	453		
Pelvis, connective tissue of	447		
Pelvis, nervous system of	447		
Pelvis, NOS, other and ill-defined sites of	633		
Pelvis, renal	545		
Penis, NOS (excluding melanoma, Kaposi sarcoma, mycosis fungoides, Sezary disease and other lymphomas)	513		
Penis, NOS (melanoma)	435		
Penis, NOS (mycosis fungoides and Sezary disease)	443		

Collaborative Staging Manual and Coding Instructions Part II: Primary Site Schema

	Page		Page
S			
Sacrum	423	Skin of trunk (mycosis fungoides and Sezary disease)	443
Salivary gland (minor), NOS	175	Skin of upper limb and shoulder (excluding melanoma, Kaposi sarcoma, mycosis fungoides, Sezary disease and other lymphomas)	427
Salivary gland (major), NOS	207	Skin of upper limb and shoulder (melanoma)	435
Sclera (excluding melanoma and retinoblastoma)	571	Skin of upper limb and shoulder (mycosis fungoides and Sezary disease)	443
Sclera (melanoma)	575	Skin, NOS (excluding melanoma, Kaposi sarcoma, mycosis fungoides, Sezary disease and other lymphomas)	427
Sclera (retinoblastoma)	597	Skin, NOS (melanoma)	435
Scrotum, NOS (excluding melanoma, Kaposi sarcoma, mycosis fungoides, Sezary disease and other lymphomas)	537	Skin, NOS (mycosis fungoides and Sezary disease)	443
Scrotum, NOS (melanoma)	435	Skin, overlapping lesion (excluding melanoma, Kaposi sarcoma, mycosis fungoides, Sezary disease and other lymphomas)	427
Scrotum, NOS (mycosis fungoides and Sezary disease)	443	Skin, overlapping lesion (melanoma)	435
Short bones of lower limb and associated joints	423	Skin, overlapping lesion (mycosis fungoides and Sezary disease)	443
Short bones of upper limb and associated joints	423	Small intestine, NOS	265
Sigmoid colon	271	Soft palate, NOS	167
Sinus, accessory, NOS	359	Soft tissue, NOS	447
Sinus, ethmoid	351	Specified parts of peritoneum (incl. omentum and mesentery)	453
Sinus, frontal	359	Spermatic cord	533
Sinus, maxillary	343	Sphenoid sinus	359
Sinus, paranasal, NOS	359	Sphincter of Oddi	299
Sinus, pyriform	239	Spinal cord	607
Sinus, sphenoid	359	Spinal meninges	607
Skin (except eyelid) (excluding melanoma, Kaposi sarcoma, mycosis fungoides, Sezary disease and other lymphomas)	427	Spleen (other than hematopoietic, reticulo-endothelial, immunoproliferative and myeloproliferative neoplasms)	633
Skin of eyelid (excluding melanoma, Kaposi sarcoma, mycosis fungoides, Sezary disease and other lymphomas)	431	Splenic flexure of colon	271
Skin of lip, NOS (excl. vermilion surface C00._) (excluding melanoma, Kaposi sarcoma, mycosis fungoides, Sezary disease and other lymphomas)	427	Stomach, NOS	259
Skin of lip, NOS (excl. vermilion surface C00._) (melanoma)	435	Subcutaneous tissue, NOS	447
Skin of lip, NOS (excl. vermilion surface C00._) (mycosis fungoides and Sezary disease)	443	Subglottic larynx	383
Skin of lower limb and hip (excluding melanoma, Kaposi sarcoma, mycosis fungoides, Sezary disease and other lymphomas)	427	Sublingual gland	207
Skin of lower limb and hip (melanoma)	435	Submandibular gland	199
Skin of lower limb and hip (mycosis fungoides and Sezary disease)	443	Submaxillary gland	199
Skin of other and unspecified parts of face (excluding melanoma, Kaposi sarcoma, mycosis fungoides, Sezary disease and other lymphomas)	427	Superior wall of nasopharynx	231
Skin of other and unspecified parts of face (melanoma)	435	Supraglottic larynx	375
Skin of other and unspecified parts of face (mycosis fungoides and Sezary disease)	443	Supraglottis (false cord, epiglottis {posterior surface}, aryepiglottic fold)	375
Skin of scalp and neck (excluding melanoma, Kaposi sarcoma, mycosis fungoides, Sezary disease and other lymphomas)	427		
Skin of scalp and neck (melanoma)	435	T	
Skin of scalp and neck (mycosis fungoides and Sezary disease)	443	Tail of pancreas	315
Skin of trunk (excluding melanoma, Kaposi sarcoma, mycosis fungoides, Sezary disease and other lymphomas)	427	Temporal lobe	603
Skin of trunk (melanoma)	435	Testicle	527
		Testis, NOS	527
		Testis: undescended, descended	527
		Thoracic esophagus	253
		Thorax, connective tissue of	447
		Thorax, nervous system of	447
		Thorax, NOS, other and ill-defined sites of	633
		Thymus	615
		Thyroid cartilage	391
		Thyroid gland	611
		Tongue, anterior 2/3 of	119
		Tongue, base of	111
		Tongue, NOS	119

Collaborative Staging Manual and Coding Instructions Part II: Primary Site Schema

	Page		Page
Tonsil, NOS	215	V	
Tonsil, lingual	111	Vagina, NOS	471
Tonsillar fossa	215	Vallecula	215
Tonsillar pillar	215	Vater, ampulla of	303
Trachea	399	Ventral surface of tongue, NOS	119
Tract, biliary, NOS	307	Ventricle, NOS	603
Tract, female genital	503	Vermilion border <i>see Lip</i>	
Tract, gastrointestinal, NOS	323	Vertebral column	423
Transverse colon	271	Vestibule of mouth	183
Trigone of bladder	549	Visceral pleura	415
Trunk, NOS, connective tissue of	447	Vocal cord	367
Trunk, NOS, nervous system of	447	Vulva, NOS (excluding melanoma, Kaposi sarcoma, mycosis fungoides, Sezary disease and other lymphomas)	467
Tympanic cavity	335	Vulva, NOS (melanoma)	435
		Vulva, NOS (mycosis fungoides and Sezary disease)	443
U		W	
Undescended testis	527	Waldeyer ring	247
Unknown primary site	633		
Upper gum	127	Z	
Upper-inner quadrant of breast	457	Zone, cloacogenic	285
Upper limb and shoulder, connective tissue of	447		
Upper limb and shoulder, nervous system of	447		
Upper limb, NOS, other and ill-defined sites of	633		
Upper lobe of lung, incl. lingula	403		
Upper-outer quadrant of breast	457		
Upper respiratory tract, NOS	419		
Upper third of esophagus	253		
Urachus	549		
Ureter	545		
Ureteric orifice	549		
Urethra (incl. transitional cell carcinoma of prostatic urethra M-8120-8130)	555		
Urinary bladder	549		
Urinary system, NOS	559		
Uteri, cervix	475		
Uteri, corpus	481		
Uteri, fundus	481		
Uteri, isthmus	481		
Uterine adnexa	499		
Uterus, NOS	481		
Uvea (excluding melanoma and retinoblastoma)	571		
Uvea (melanoma)	575		
Uvea (retinoblastoma)	597		
Uvula	167		