

The Anatomy of Staging: Head and Neck Cancers

TNM7, CS version 0203



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Head and Neck Issues

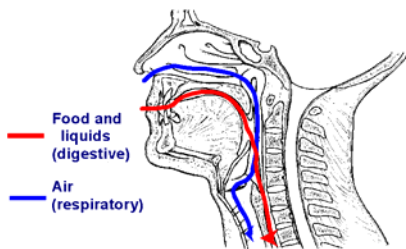
- So many structures, so close together
- So many names and synonyms
- So many staging schemes

TNM Chapters	6
Summary Stage Sites	22
Collaborative Staging	31 + 26 melanoma

- Determining the correct primary site is **VERY important!**
- In CS, site-specific factors are the same for all head and neck sites.

Head and Neck Cancer Staging and Coding 2

Passageways of Head and Neck



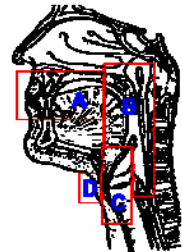
Head and Neck Cancer Staging and Coding 3

Head and Neck Groups

- A. Lip and oral cavity (C00 – C05.0)
- B. Pharynx
 - Oropharynx (C05.1, C05.2, C10)
 - Nasopharynx (C11)
 - Hypopharynx (C12.9, C13)
- C. Larynx (C32)
- D. Thyroid (C73.9)

Others

- Salivary glands (C07)
- Paranasal sinuses (C31)
 - Maxillary (C31.0)
 - Ethmoid (C31.1)
- Nasal cavity and middle ear (C30)



Head and Neck Cancer Staging and Coding 4

Determining the Primary Site

- **MP/H Rule priorities**
 - 1. Tumor board
 - a. Specialty
 - b. General
 - 2. Staging MD's site assignment
 - a. AJCC staging form
 - b. TNM statement in medical record
 - 3. Total (complete) resection of primary tumor
 - a. Surgeon's statement from operative report
 - b. Final diagnosis from pathology report
 - 4. No resection (biopsy only):
 - a. Endoscopy (physical exam with scope)
 - b. Radiation oncologist
 - c. Diagnosing MD
 - d. Primary care MD
 - e. Other MD
 - f. Radiologist impression from diagnostic imaging
 - g. MD statement based on physical exam (clinical impression)

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MP/H Head and Neck Multiple Primaries Rules – SUMMARY

- **Unknown number**
 - M1. If unknown whether single or multiple tumors, treat as single.
- **One tumor**
 - M2. A single tumor = single primary

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MP/H Head and Neck Multiple Primaries Rules – SUMMARY

- **Multiple tumors**
 - M3. Table 1 bilateral primaries = multiple
 - Salivary glands, tonsils, nasal cavity, sinuses, middle ear
 - M4. Upper lip and lower lip = multiple
 - M5. Upper gum and lower gum = multiple
 - M6. Nasal cavity and middle ear = multiple
 - M7. Different topography codes = multiple
 - Cxx.x, Cx_x
 - M8. Invasive after in situ > 60 days = multiple
 - M9. Diagnosis dates > 5 years apart = multiple
 - M10. Multiple tumors, one histology non-specific, the other more specific = single
 - M11. Histology different = multiple
 - M12. All other scenarios = single

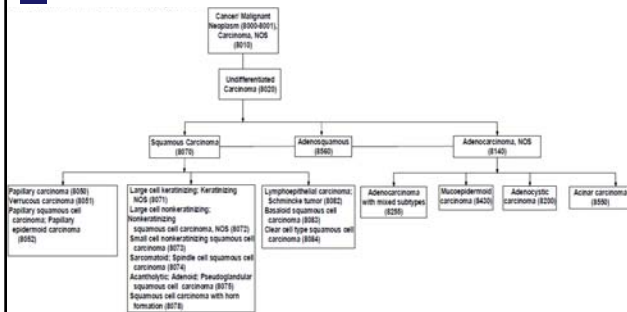
Head and Neck Cancer Staging and Coding 7

MP/H Head and Neck Histology Rules – SUMMARY

- **Single tumor**
 - H1. If no tissue, code physician's statement
 - H2. If no primary tissue, code metastasis
 - H3. Single histologic type
 - H4. Invasive type if both invasive and in situ
 - H5. Most specific term (Chart 1)
 - H6. Higher code

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MP/H Head and Neck Histology Rules – Chart 1



Head and Neck Cancer Staging and Coding 9

MP/H Head and Neck Histology Rules – SUMMARY

Multiple tumors abstracted as a single primary

- H7. If no tissue, code physician's statement
- H8. If no primary tissue, code metastasis
- H9. Single histologic type
- H10. Most invasive tumor
- H11. Most specific histology (Chart 1)
- H12. Higher histology code

Head and Neck Cancer Staging and Coding 10

TNM General Guidelines

- Carcinomas only, predominantly squamous
- Histologic diagnosis required
- T4 categories—all sites
 - T4a (moderately advanced)
 - T4b (very advanced)
- TNM7 revised stage groupings
 - Stage IVA moderately advanced disease
 - Stage IVB very advanced disease
 - Stage IVC advanced distant metastatic disease

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TNM Supplement Guidelines

- Tumor involving two sites
 - Classify to site in which greater part of tumor is located
 - Consider only invasive component if tumor as associated carcinoma in situ
- Extension
 - Superficial
 - spread limited to mucosa
 - not sufficient for T4
 - Deep
 - muscles, bones or other deep structures (vertical or horizontal invasion)

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■ Head and Neck Carcinoma – CS Fields

■ Collaborative Stage fields (in general)

- Tumor Size—standard
- Extension
- TS/Ext Eval—standard
- Lymph Nodes
- LN Eval—standard
- LN Pos—standard
- LN Exam—standard
- Mets at Dx
- Mets Eval—standard

■ Site-Specific Factors

1. SSF1 Size of LN
2. OBSOLETE
3. SSF3 Levels I-III
4. SSF4 Levels IV-V, Retrophar
5. SSF5 Levels VI-VII, Facial
6. SSF6 Other H&N nodes
7. Upper/Lower Cervical Node Levels
8. Extracaps Exten Clinical
9. Extracaps Exten Path
10. HPV Status
11. Measured Thickness (Depth)

Head and Neck Cancer Staging and Coding 13

■ Head and Neck Carcinomas Tumor Size Required

- Lip
 - Upper
 - Lower
 - Tongue
 - Base
 - Anterior
 - Gum
 - Upper
 - Lower
 - Other
 - Floor of Mouth
 - Hard
 - Soft
 - Palate
 - Hard
 - Soft
 - Other Mouth
 - Buccal Mucosa
 - Salivary Glands
 - Parotid
 - Submandibular
 - Other Salivary
 - Pharynx
 - Oropharynx
 - Anterior Epiglottis
 - Nasopharynx
 - Hypopharynx
 - Other Pharynx *
 - Nasal Cavity
 - Middle Ear
 - Sinus
 - Maxillary
 - Ethmoid
 - Other *
 - Larynx
 - Glottic
 - Supraglottic
 - Subglottic
 - Other
- Thyroid is NOT included
 • Melanomas NOT included
 * no TNM staging
 ABC requires Tumor Size for TNM
 XYZ Tumor Size not a factor in TNM

Head and Neck Cancer Staging and Coding 14

■ Head and Neck – CS Extension

■ General format

- 000 In situ
- 100 Lamina propria/submucosa
- 300 Localized, NOS
- 400-590 Adjacent structures (T3)
- 600-690 Mixed T3-T4 (site specific)
- 700-800 Adjacent structures (T4)
- 950 No evidence of primary tumor (T0)

Head and Neck Cancer Staging and Coding 15

■ CS TS/Ext Eval, CS Reg Nodes Eval, CS Mets Eval

- All standard tables
- General structure
 - 0 clinical only
 - 1 invasive techniques, no bx; or needle bx
 - does not meet criteria for pathologic T or N
 - 2 autopsy (known or suspected dx)
 - 3 pathology
 - meets criteria for pathologic T, N or M
 - 5 pre-op tx, clinical eval
 - 6 pre-op tx, path eval
 - 8 autopsy (dx not suspected)
 - 9 unknown, not assessed

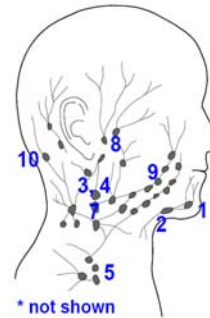
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When to Code TS/Ext Eval for Size versus Extension

- **Accessible sites**
 - Code for **size** when
 - Tumor is localized and size determines the T category (T1 vs T2 vs T3)
 - Code for **extension** when
 - Tumor involves involves structures that map to T4
- **Inaccessible sites**
 - Code for **extension** because size is not a factor in TNM mapping

Head and Neck Cancer Staging and Coding 17

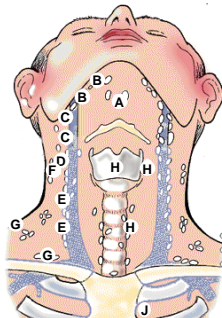
Head and Neck Regional Nodes



1. Submental
2. Submandibular
3. Jugular (deep cervical)
4. Superficial cervical
5. Supraclavicular
6. Prelaryngeal* and paratracheal*
7. Retropharyngeal
8. Parotid
9. Buccal
10. Retroauricular and occipital

Head and Neck Cancer Staging and Coding 18

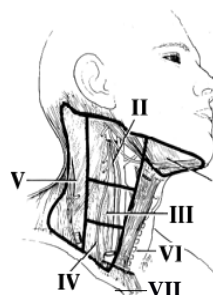
Head and Neck Lymph Nodes Overview



- Level I (* = not shown)
 - A Submental
 - B Submandibular (submaxillary)
- Level II
 - C Upper deep cervical (upper jugular)
 - * Jugulodigastric (subdigastric)
- Level III
 - D Middle deep cervical (mid-jugular)
- Level IV
 - E Lower deep cervical (lower jugular)
 - * Jugulo-omohyoid (supraomohyoid)
- Level V
 - F Posterior cervical
 - G Posterior triangle
 - * Supraclavicular, NOS
- Level VI
 - H Pre/paralaryngeal and pre/paratracheal (anterior deep cervical)
- Level VII
 - J Upper mediastinal

Adapted from: TNM Interactive (CD-ROM), Wiley-Liss
Head and Neck Cancer Staging and Coding 19

Lymph Node Levels



- I Submental and submandibular
- II Upper jugular
- III Middle jugular
- IV Lower jugular and supraclavicular
- V Superficial cervical (along spinal accessory nerve)
- VI Anterior compartment (prelaryngeal and paratracheal)
- VII Upper mediastinal

Image source: voice-center.com (The Voice Center, Norfolk, VA)
Head and Neck Cancer Staging and Coding 20

Lymph Node Metastases at Diagnosis

- Pyriform sinus – 70%
- Postcricoid area – 40%
- Posterior hypopharynx – 50%
- Nasopharynx – 75%
- Tonsil – 70%
- Base of tongue – 70%
- Soft palate – 30-65%
- Pharyngeal wall – 30-65%
- Paranasal sinuses – 20%
- Medullary ca of thyroid – 50%

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TNM General Guidelines – N

- N definitions the same for all sites except nasopharynx and thyroid
- N category by size of lymph node mass:
 - ≤ 3 cm; > 3 < 6 cm; > 6 cm
- N category by number of lymph nodes involved
 - SEER rule: if laterality of lymph nodes is not stated, assume they are ipsilateral
- "Fixed" and "matted" are considered involvement.
- "Enlarged," "palpable," "shotty," "lymphadenopathy" are NOT considered involvement.

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Head and Neck Lymph Nodes CS Overview

- Regional lymph node information coded in several fields
 - CS Lymph Nodes field
 - nodes involved, their number and laterality
 - Site-Specific Factor 1
 - size of involved lymph nodes
 - Site-Specific Factors 3-6
 - presence or absence of lymph node involvement in each of 7 different levels and other groups defined by AJCC.
 - Site-Specific Factor 7
 - presence of extracapsular extension
 - Site-specific Factors 8-9
 - Extracapsular extension, clinical and pathologic

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Lymph Nodes—Specific Fields

- CS LN: Which nodes, number and laterality
- SSF1: Size of involved node
- SSF3: Levels I-III
- SSF4: Levels IV-V
- SSF5: Levels VI-VII and face
- SSF6: Other LN groups
- SSF7: Upper and lower cervical node levels
- SSF8: Extracapsular extension clinical
- SSF9: Extracapsular extension pathologic



Image source: AJCC Cancer Staging Manual, 6th edition

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Head and Neck Lymph Nodes CS Lymph Nodes—Notes

- Contains information about the nodes involved, their general number and laterality
- Code ranges vary by primary site
- Code any regional LN involvement in this field
- Major categories:
 - Single positive ipsilateral node involved
 - Multiple positive ipsilateral nodes
 - Bilateral or contralateral positive nodes
 - Positive regional nodes, NOS
- If laterality not specified, assume nodes are ipsilateral
- Midline nodes grouped with ipsilateral nodes

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Head and Neck Lymph Nodes CS Lymph Nodes – Example

- Parotid Gland
 - 000 None
 - 100-190 Single positive ipsilateral node involved
 - 200-290 Multiple positive ipsilateral nodes
 - 300-320 Positive ipsilateral nodes, unk. if 1 or > 1
 - 400-490 Bilateral or contralateral positive nodes
 - 500-520 Regional nodes, NOS, unk. number and laterality
 - 800 Lymph nodes, NOS

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Head and Neck Lymph Nodes CS Lymph Nodes—N Categories

Example—Parotid Gland

- 000 N0
- 180 N1, no other information
- 190 N2a, no other information
- 290 N2b, no other information
- 490 N2c, no other information
- 600 N2, NOS
- 700 N3, no other information

When to Code 100-700 vs. 800

- Codes 100 - 700**
- Nodes are definitely regional
- Code 800**
- Can't tell whether regional or distant nodes
 - Rarely used

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Site-Specific Factor 1 Size of Involved Node—Notes

- Required by COC, SEER
- Code size of NODE, not size of metastasis
- Code largest diameter measured clinically or pathologically
- Code regional nodes only
- Size format same as tumor size with extra choices
 - 996 Described as less than 6 cm
 - 997 Described as more than 6 cm

Site-Specific Factor 2 Extracapsular Extension

- **OBSOLETE**—Data now collected in SSFs 8 – 9

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Site-Specific Factors 3 – 6

- Required by COC, SEER
- Definitions of levels are the same for all applicable head and neck sites.
- SSF 3 Levels I – III
- SSF 4 Levels IV and V and retropharyngeal nodes
- SSF 5 Levels VI and VII and facial nodes
- SSF 6 Other groups as defined by AJCC

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Coding Site-Specific Factors 3 – 6

- SSF 3 Levels I – III
- SSF 4 Levels IV - V, retropharyngeal (RP)
- SSF 5 Levels VI – VII, Facial (F)
- SSF 6 Other groups Parapharyngeal (PP), Parotid (PA), Suboccipital (S)
- Default is 0, not involved.
- If any level/chain is involved, code as 1, involved.

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Coding SSF 3 – 6 Example

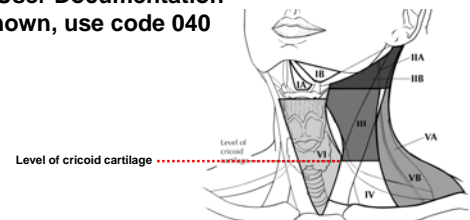
- LRND: 2 positive parotid node (< 3 cm with extracapsular exten.), 1 positive buccal (facial) node (2 cm), and 1 positive 2 cm submandibular node.

SSF 3 Levels I – III	$\frac{1}{I}$	$\frac{0}{II}$	$\frac{0}{III}$
SSF 4 Levels IV – V, Retropharyngeal (RP)	$\frac{0}{IV}$	$\frac{0}{V}$	$\frac{0}{RP}$
SSF 5 Levels VI – VII, Facial (F)	$\frac{0}{VI}$	$\frac{0}{VII}$	$\frac{1}{F}$
SSF 6 Other groups Parapharyngeal (PP), Parotid (PA), Suboccipital (S)	$\frac{0}{PP}$	$\frac{1}{PA}$	$\frac{0}{S}$

Head and Neck Cancer Staging and Coding 31

Site-Specific Factor 7 Upper/Lower Cervical Node Levels

- Documents whether involved nodes are above or below level of cricoid cartilage
 - Lower cervical nodes have worse prognosis
- If not obvious, refer to list in Part I, Section 2 of CS User Documentation
- If unknown, use code 040



Head and Neck Cancer Staging and Coding 32

Image source: CSv2 User Documentation, Part I Section 2

Table I-2-3 Example

Lymph Nodes of the Head and Neck Showing Level and Site-Specific Factor Positions

Name	Level	SSF7 Code	SSF3-6	Position
Anterior compartment	VI	Note 1	5	1
Anterior deep cervical	VI	Note 1	5	1
Buccinator (buccal)	F	10	5	3
Central compartment	VI	Note 1	5	1
Cervical, NOS	--	40	--	--
Deep cervical, NOS	--	40	--	--
Delphian	VI	20	5	1
Facial (NOS)	F	10	5	3
Infra-auricular	PA	10	6	2
Internal jugular, NOS	--	40	--	--
Intraparotid	PA	10	5	2
Jugulodigastric	II	10	3	2

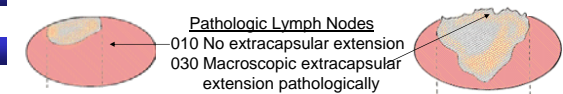
Note 1. Look for a statement of upper or lower cervical nodes or that the involved nodes are above or below the lower border of the cricoid cartilage and code appropriately. If no further information, use code 40 in SSF 4.

Head and Neck Cancer Staging and Coding 33

Site-Specific Factors 8 – 9

Extracapsular Extension—Notes

- Code extracapsular extension identified clinically (SSF 8) and/or pathologically (SSF 9)
 - Code regional nodes only
 - Code 000 if nodes are negative
 - Read carefully—codes differ
 - If extracapsular extension not mentioned in PE/imaging (SSF 8) or path report (SSF 9), use code 010.



Head and Neck Cancer Staging and Coding 34

Image source: TNM Interactive (CD-ROM), Wiley-Liss

Site-Specific Factor 8

Extracapsular Extension Clinically

- Clinical information
 - Physical exam may show
 - matted mass of nodes
 - Imaging studies may show
 - amorphous spiculated margins on nodes
 - involvement of internodal fat
 - loss of normal oval to round shape
- Codes
 - 000 No lymph nodes involved
 - 010 Nodes involved, no extracapsular extension
 - 020 Nodes involved, extracapsular extension
 - 030 Nodes involved, unk if extracapsular exten.
 - 988 Not applicable: no node involvement
 - 997 Clinical exam of nodes, unk results
 - 998 No clinical exam of nodes
 - 999 Unknown; not documented; not assessed

Head and Neck Cancer Staging and Coding 35 Image source: TNM Interactive (CD-ROM), Wiley-Liss

Site-Specific Factor 9

Extracapsular Extension Pathologic

- Required by COC, SEER
- Pathologic information
 - Priority: “macroscopic” over “microscopic”
 - Macro or micro from final diagnosis
 - Macro from gross section
 - Micro from microscopic section
- Codes
 - 000 No lymph nodes involved
 - 010 Nodes involved, no extracapsular extension
 - 020 Nodes involved, microscopic extracap exten
 - 030 Nodes involved, macroscopic extracap exten
 - 040 Nodes involved, extracap exten, unk micro/macro
 - 050 Nodes involved, unknown if extracap exten
 - 997 Clin exam of nodes, unk results
 - 998 No clin exam of nodes

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Coding SSF 1 – 9 Example

- LRND: 2 positive parotid node (< 3 cm with extra-capsular exten.), 1 positive buccal (facial) node (2 cm), and 1 positive 2 cm submandibular node.
- SSF 1 Size of node 993 Described as < 3 cm
- SSF 2 [obsolete]
- SSF 3 Levels I-III 100 Level 1 only
- SSF 4 Levels IV-V, RP 000 All nodes neg
- SSF 5 Levels VI-VII, F 001 Facial nodes only
- SSF 6 Other groups 010 Parotid nodes only
- SSF 7 Upper/Lower 010 All above cricoid cartilage
- SSF 8 Clin extracap ext 999 Unknown if clin involved
- SSF9 Path extracap ext 040 Extracap exten, unk if micro or macro

Computer derived N: pN2b

Head and Neck Cancer Staging and Coding 37

Site-Specific Factor 10 HPV Status

- • Required by COC, SEER for some H&N sites
- • Human papilloma virus (HPV) infection may be risk factor for oral and other mucosal cancers
 - Highest risk strains for cancer are types 16 and 18
- • Code results from any tissue, not just primary site
- • Many codes—read carefully

Head and Neck Cancer Staging and Coding 38

Site-Specific Factor 10 HPV Status

- • Codes
 - 000 HPV test neg; not pos for any HPV types; Negative, NOS
 - 010 LOW RISK pos (all pos type(s) low risk)
 - 020 HIGH RISK pos, spec type(s) other than 16 or 18*
 - 030 HIGH RISK pos for HPV 16 WITHOUT pos results for HPV 18 or pos of HPV 18 unknown* ^
 - 040 HIGH RISK pos for HPV 18 WITHOUT pos results for HPV 16 or pos of HPV 16 unknown* ^
 - 050 HIGH RISK pos for HPV 16 AND HPV 18 * ^
 - 060 HIGH RISK positive, NOS, type(s) not specified
 - 070 Positive, NOS, risk and type(s) not stated
 - 988 Not applicable: Information not collected
 - 997 Test ordered, results not in chart
 - 998 Test not done (not ordered and not performed), including no pathologic specimen available for HPV testing
 - 999 Unknown or no information; Not documented

* WITH or WITHOUT positive results for low risk type(s)

^ WITH or WITHOUT positive results for other high-risk types

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Site-Specific Factor 11 Measured Thickness (Depth)

- • Required by COC, SEER where listed in schema
- • Not in all schemas
 - All H&N melanomas require thickness for T mapping
- • Measurement different from skin melanomas
- • Codes
 - 000 No mass/tumor found
 - 001-979 Exact thickness in tenths of mm
 - 980 98.0 millimeters or larger
 - 987 Not applicable: in situ carcinoma
 - 988 Not applicable: Information not collected
 - 990 Microinvasion; Microscopic focus or foci only; no depth given
 - 998 No surgical specimen
 - 999 Not documented in patient record; Unknown

Head and Neck Cancer Staging and Coding 40

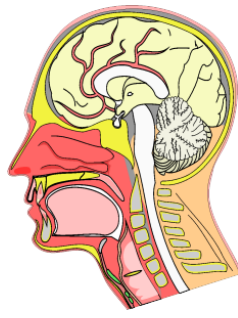
■ Related CS Fields for Head & Neck

- -
 -
 -
 -
 -
 -
 -
 -
- CS Tumor Size
 - CS Extension
 - CS TS/Ext Eval
 - SSF11 Measured thickness (depth)
- CS Lymph Nodes
 - CS Reg Nodes Eval
 - Reg LN Pos
 - Reg LN Exam
 - SSF1 Size of LN
 - SSF3 Levels I-III
 - SSF4 Levels IV-V, Retrophar
 - SSF5 Levels VI-VII, Facial
 - SSF6 Other H&N nodes
 - SSF7 Upper/lower cervical LN
 - SSF8 Extracaps exten clin
 - SSF9 Extracaps exten path
- CS Mets at Dx
 - Mets Eval
 - SSF10 HPV status

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Anatomical References for TNM Staging and Coding of Head and Neck Cancers



18. TNM Staging: Head and Neck Cancers 42

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LIP AND ORAL CAVITY

18. TNM Staging: Head and Neck Cancers 43

■ Lip and Oral Cavity

- • T category by size of primary
 - • T1 ≤ 2 cm
 - • T2 > 2 and ≤ 4 cm
 - • T3 > 4 cm
- • T4 Direct invasion of other structures (bone, muscle)
 - • T4a (lip) cortical bone, floor of mouth, inferior alveolar nerve, skin of face
 - • T4b (oral cavity) adjacent structures: cortical bone, deep muscle of tongue, maxillary sinus, skin of face
 - • T4b masticator space, pterygoid plates, skull base, encasing internal carotid artery

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■ Lip and Oral Cavity

- • Lip
 - • Assign to lip (C00. _) if more than 50% of tumor is located on vermillion surface.
- • Oral Cavity
 - • Tumor that extends to oropharynx via mucosa is classified only by size.
- • Tongue
 - • Anterior 2/3 = mobile tongue
 - • Base (root) of tongue in oropharynx

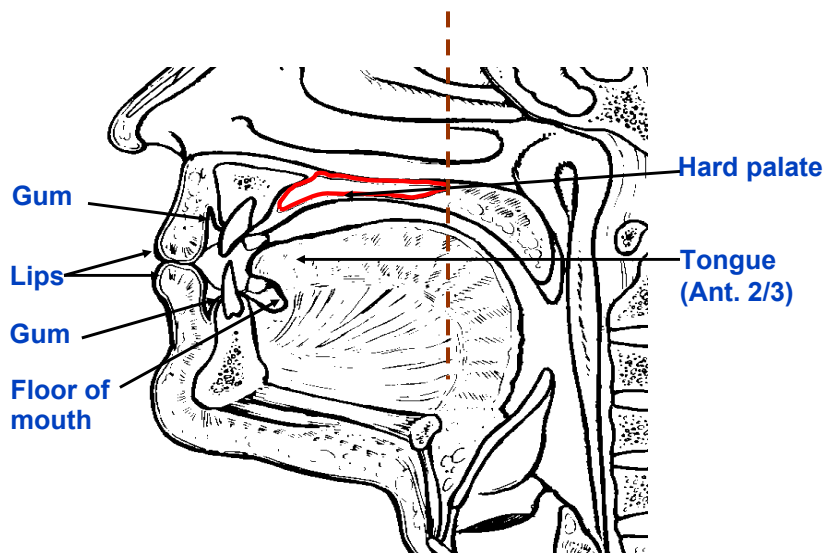
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■ Head and Neck – CS Extension

- • **Muscles of the tongue**
 - Used in shaping the mouth for speech, chewing and swallowing
- • **Intrinsic musculature**
 - Muscles within the tongue (no bony attachment)
 - Also called lingual
 - Used to curl sides of tongue upward
 - When mentioned as involved, code in Ext 200 range (T1-T3)
 - NOT part of T4 category in TNM
- • **Extrinsic musculature**
 - Muscles anchoring the tongue in the mouth
 - Attached to mandible, hyoid bone, styloid process of temporal bone, or palate
 - When mentioned as involved, code in CS Extension 700-750 (T4) range (except sites: floor of mouth and submandibular gland)
 - When involved, map to T4 in TNM

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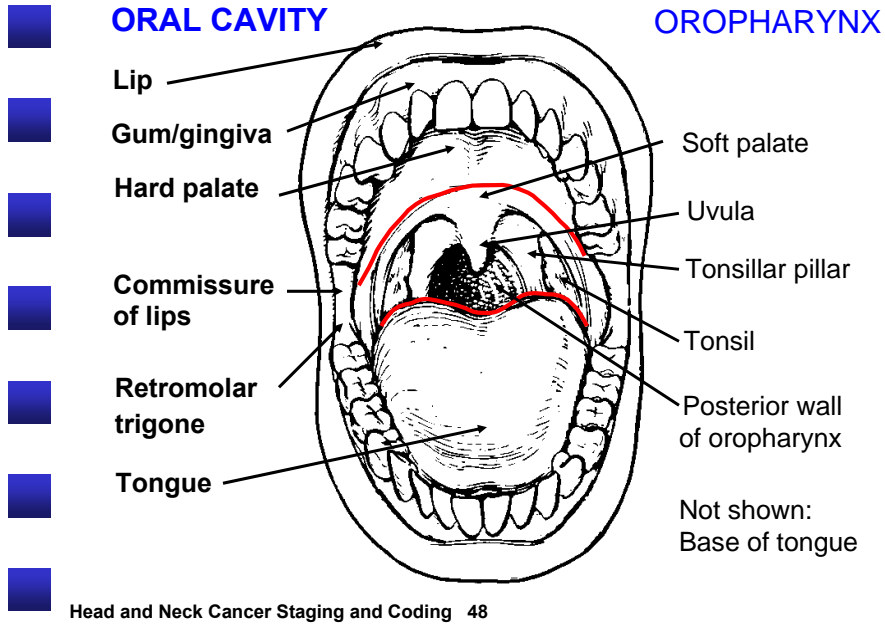
■ Lip and Oral Cavity Structures



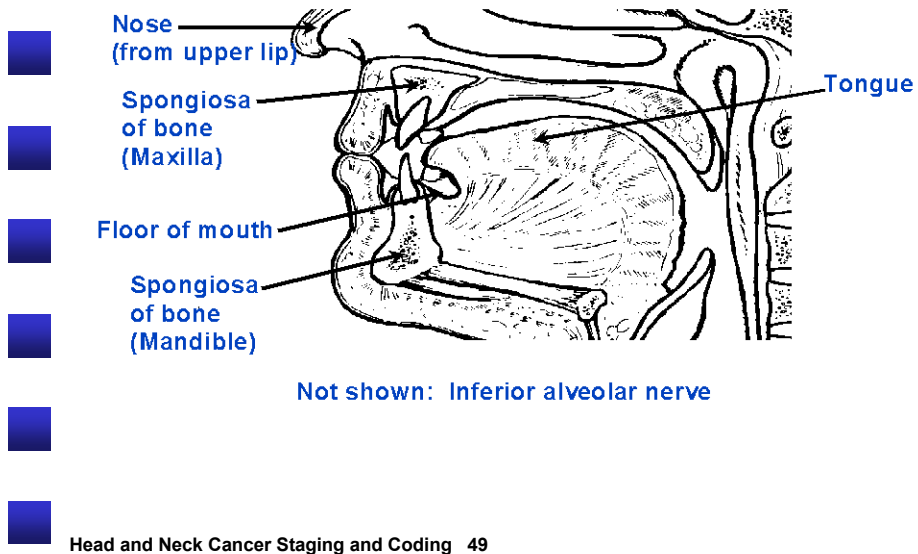
■ Not shown: Cheek Mucosa, Retromolar Trigone

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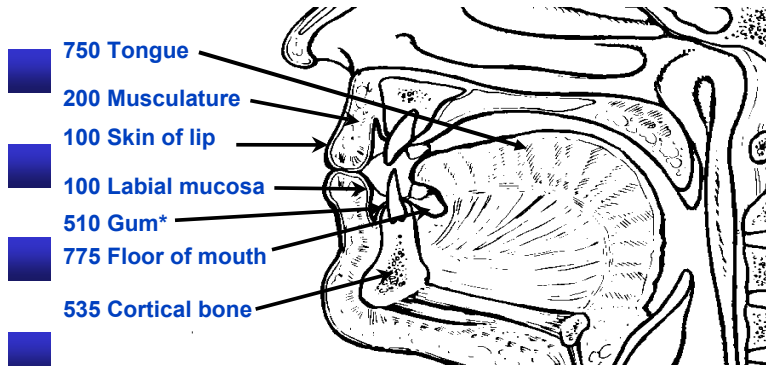
Structures of the Mouth



T4a Examples – Lip



CS Extension Codes – Lip



Not shown: 300 Localized, NOS

500 Cheek mucosa

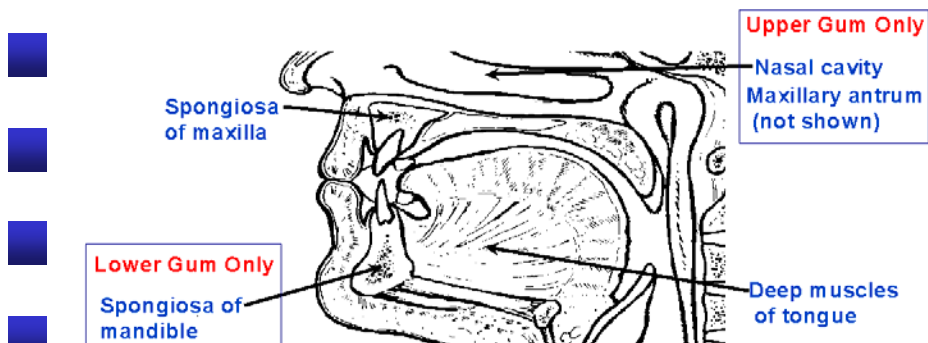
760 Skin of face/neck

800 Further contiguous extension

* Lower gum from lower lip;
lower gum from upper lip
is 780

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T4a Examples – Gum/Gingiva



Not shown: Skull
Skin

Head and Neck Cancer Staging and Coding 51

CS Extension Codes – Gum/Gingiva

Not shown: 100 Mucoperiosteum (stroma)

510 Lip, labial mucosa*

Lower Gum Only

510 Mucosa of tongue

510 Floor of mouth

535 Mandible

Upper Gum Only

740 Nasal cavity

650 Hard palate

650 Soft palate

535 Maxilla (not shown)

720 Deep muscles of tongue

Not shown: 300 Localized, NOS

510 Buccal mucosa

550 Subcutaneous soft tissue of face

600 Tonsils, lateral pharyngeal wall

805 Skull

760 Skin of face

805 Further contiguous extension

* Upper lip from upper gum; lower lip from upper gum is 780

Head and Neck Cancer Staging and Coding 52

T4a Examples – Mobile Tongue

Spongiosa of bone (Maxilla)

Spongiosa of bone (Mandible)

Not shown: Maxillary sinus

Skin

Extrinsic muscles of tongue:

Genioglossus

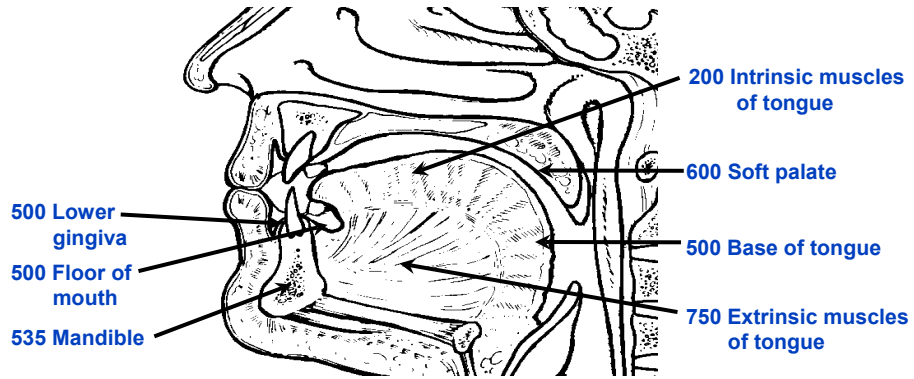
Hyoglossus

Palatoglossus

Styloglossus

Head and Neck Cancer Staging and Coding 53

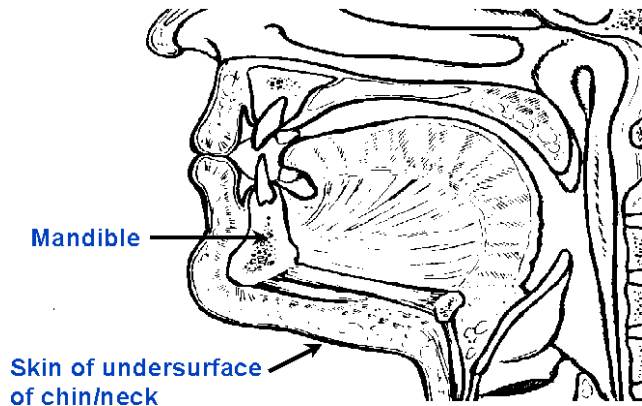
CS Extension Codes – Mobile Tongue



Not shown: 300 Localized, NOS
 400 Tumor crosses midline
 800 Further contiguous extension

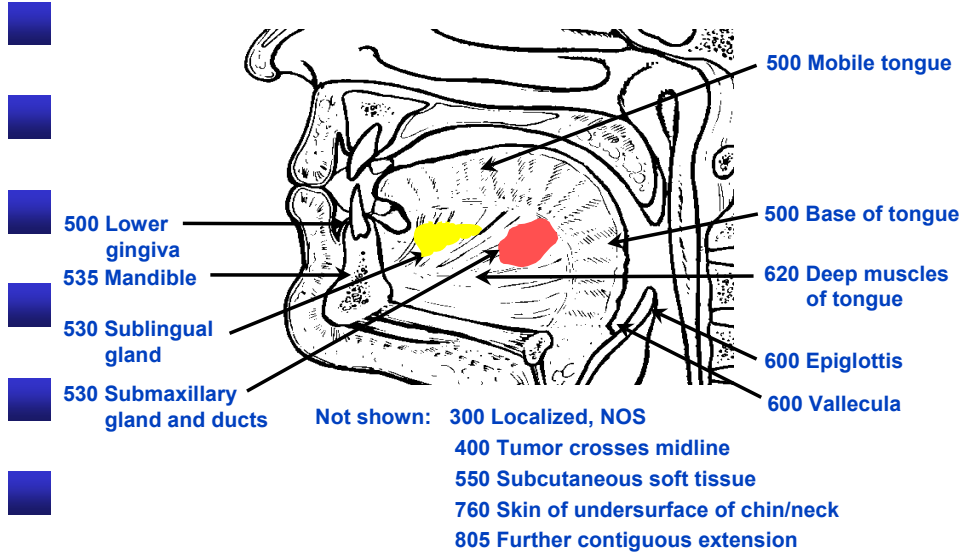
Head and Neck Cancer Staging and Coding 54

T4a Examples – Floor of Mouth



Head and Neck Cancer Staging and Coding 55

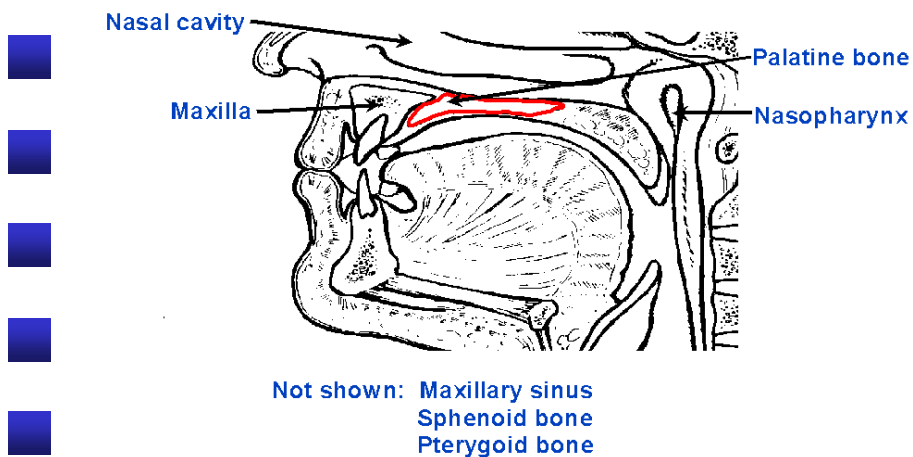
CS Extension Codes – Floor of Mouth



Head and Neck Cancer Staging and Coding 56

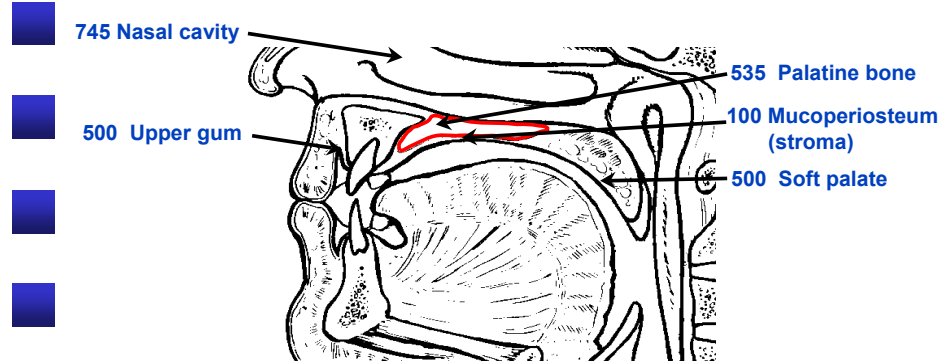
T4 Examples – Hard Palate

See TNM 7th Ed for T4a, T4b



Head and Neck Cancer Staging and Coding 57

CS Extension Codes – Hard Palate



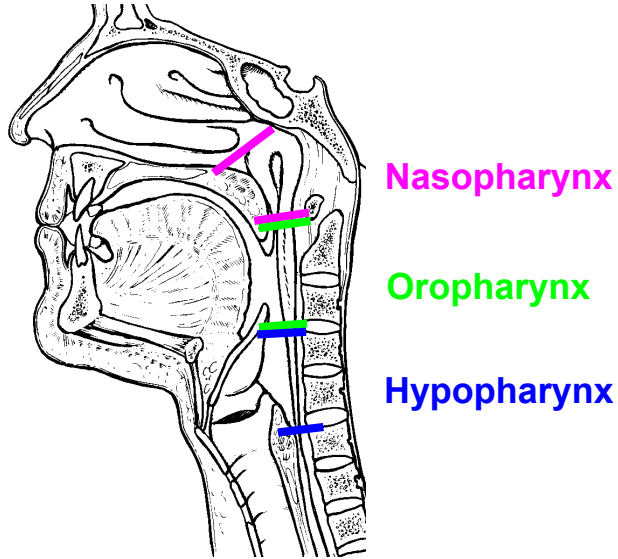
Not shown: 300 Localized, NOS
 400 Tumor crosses midline
 500 Buccal mucosa
 535 Maxillary bone
 745 Maxillary sinus
 790 Pterygoid plates
 800 Further contiguous extension

Head and Neck Cancer Staging and Coding 58

PHARYNX

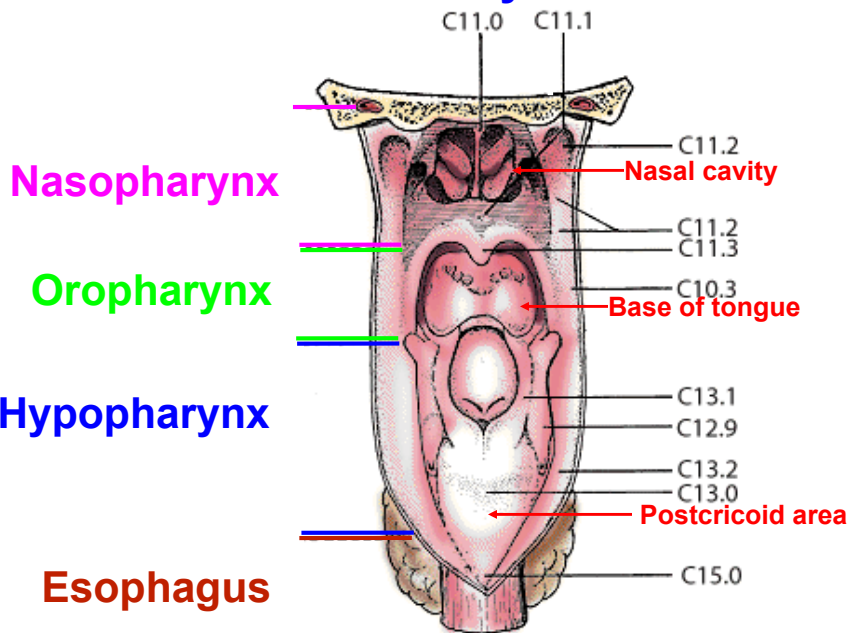
18. TNM Staging: Head and Neck Cancers 59

Three Subsites of Pharynx



Head and Neck Cancer Staging and Coding 60

Three Subsites of Pharynx from back



Head and Neck Cancer Staging and Coding 61

Subsites of Oropharynx

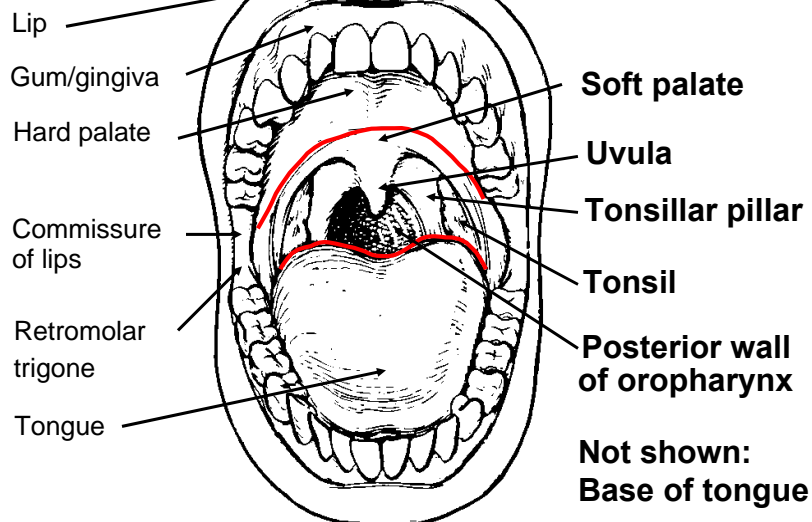
- C01.9 Base of tongue
- C05.1 Soft palate
- C05.2 Uvula
- C09.1 Tonsillar fossa
- C09.2 Tonsillar pillar
- C09.9 Tonsil, NOS
- C10.0 Vallecula
- C10.2 Lateral wall
- C10.3 Posterior wall
- C10.9 Oropharynx, NOS

Head and Neck Cancer Staging and Coding 62

Structures of the Mouth

ORAL CAVITY

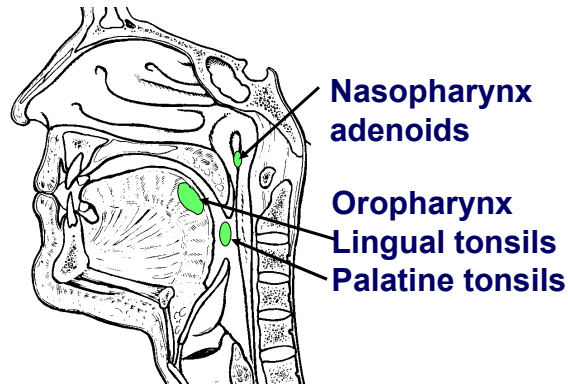
OROPHARYNX



Head and Neck Cancer Staging and Coding 63

■ Pharynx, NOS: Waldeyer's ring

- Lymphoid tissue in nasopharynx and oropharynx
 - No TNM staging for pharynx, NOS
 - Lymphomas are coded with lymphoma schema



Head and Neck Cancer Staging and Coding 64

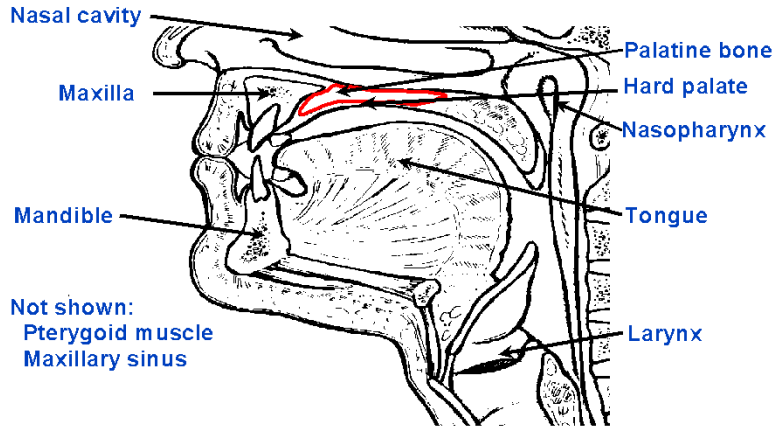
■ Oropharynx – T

- T category by size of primary
 - T1 ≤ 2 cm
 - T2 > 2 and ≤ 4 cm
 - T3 > 4 cm; extension to lingual surface of epiglottis
 - T4a Extension to larynx, extrinsic muscle of tongue, hard palate, mandible
 - T4b Extension to lateral pterygoid muscle, pterygoid plates, lateral nasopharynx, skull base, encasing carotid artery
- Tumor extension to nasopharynx, hypopharynx, or oral cavity via mucosa is classified only according to size.

Head and Neck Cancer Staging and Coding 65

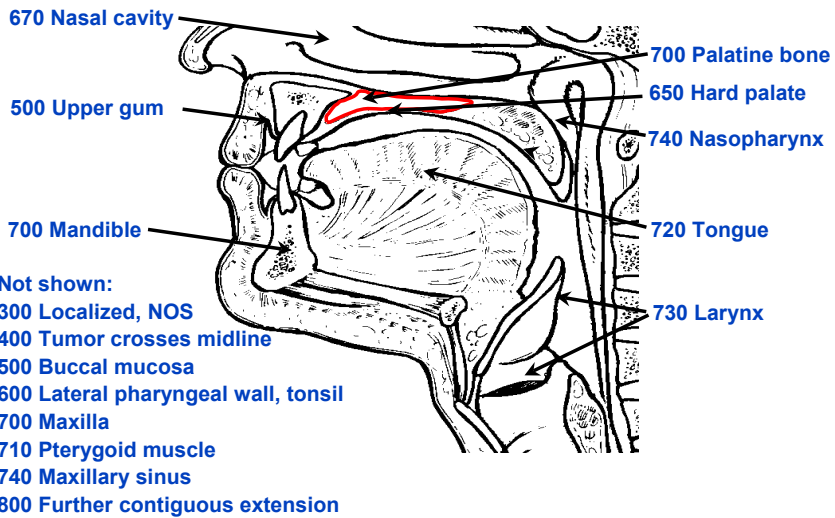
T4 Examples – Soft Palate and Uvula

See TNM 7th Ed for T4a, T4b



Head and Neck Cancer Staging and Coding 66

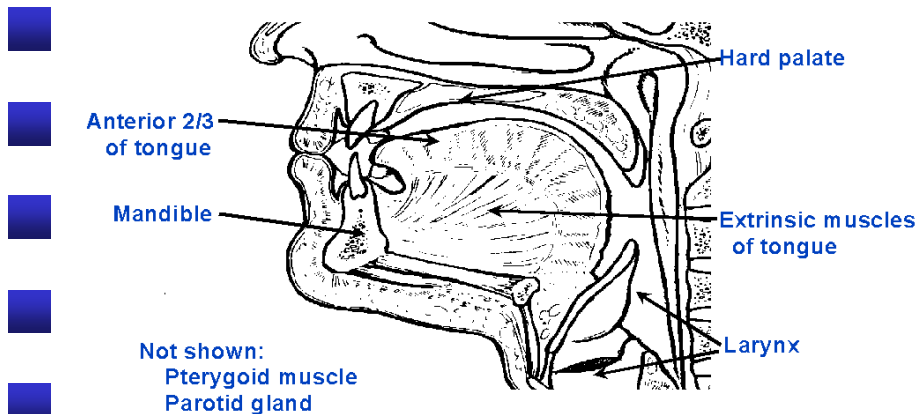
CS Extension Codes – Soft Palate and Uvula



Head and Neck Cancer Staging and Coding 67

T4 Examples – Tonsil and Other Oropharynx

See TNM 7th Ed for T4a, T4b



Head and Neck Cancer Staging and Coding 68

CS Extension Codes – Tonsil and Other Oropharynx (1)

150 Confined to one:

Anterior wall

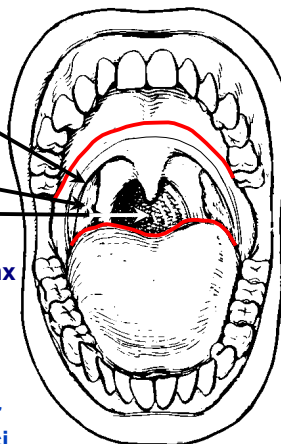
Lateral wall

Posterior wall

200 Two or more subsites involved

300 Localized, NOS

Tonsillar pillar
Tonsil
Posterior wall of oropharynx



Definitions

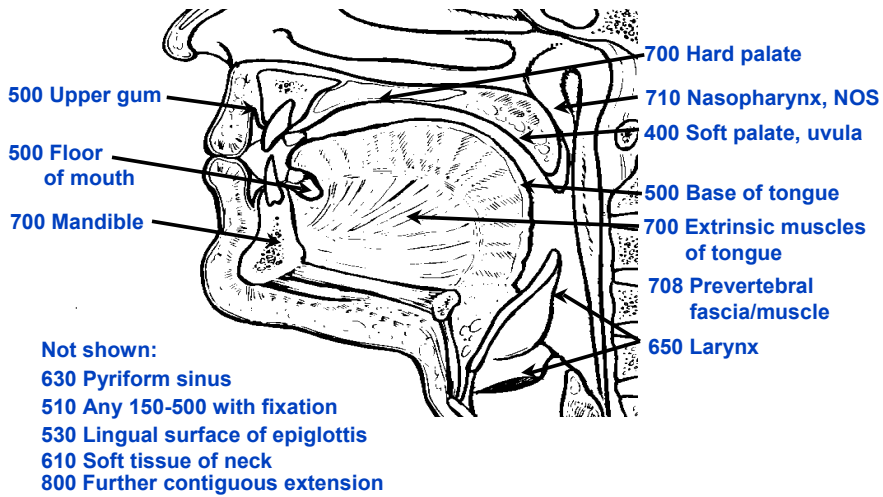
Anterior wall Base of tongue and vallecula

Lateral wall Tonsil, tonsillar fossa, tonsillar pillars and glossotonsillar sulci

Posterior wall Mucosa at back of throat

Head and Neck Cancer Staging and Coding 69

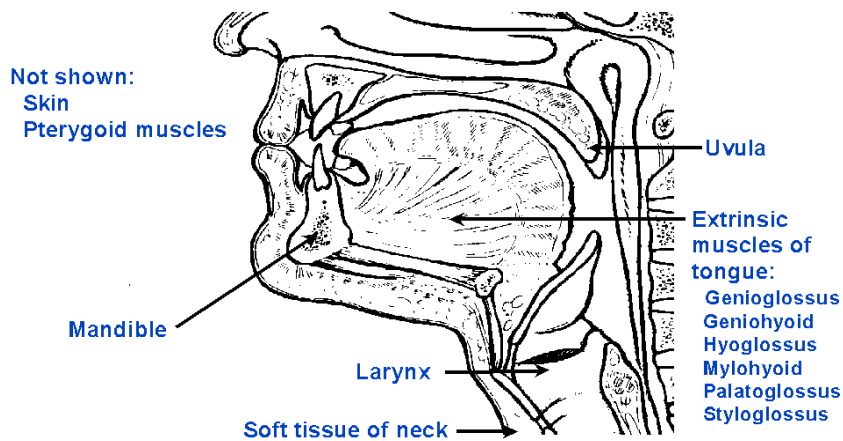
CS Extension Codes – Tonsil and Other Oropharynx (2)



Head and Neck Cancer Staging and Coding 70

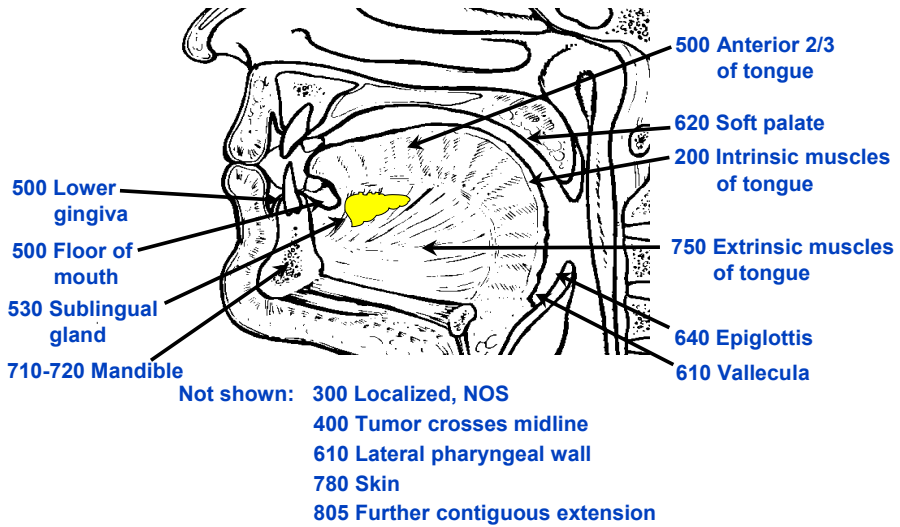
T4 Examples – Base of Tongue and Lingual Tonsil

See TNM 7th Ed for T4a, T4b



Head and Neck Cancer Staging and Coding 71

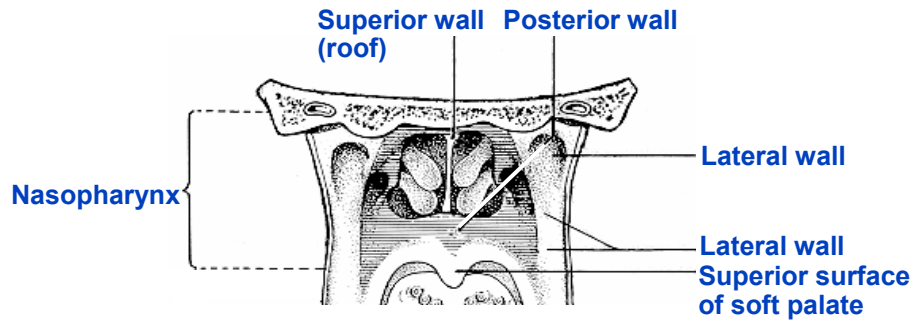
CS Extension Codes – Base of Tongue and Lingual Tonsil



Head and Neck Cancer Staging and Coding 72

Nasopharynx Structures

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



Head and Neck Cancer Staging and Coding 73

Nasopharynx – T

- T category by extension of tumor: subsite(s) of nasopharynx / adjacent sites / skull or nerves
- Subsites of nasopharynx
 - C11.0 Superior wall
 - C11.1 Posterior wall
 - C11.2 Lateral wall
 - C11.3 Anterior wall
 - C11.8 Overlapping lesion
 - C11.9 Nasopharynx, NOS
- Special lymph node categories
- Histologic study of surgically resected specimen required for pathologic staging

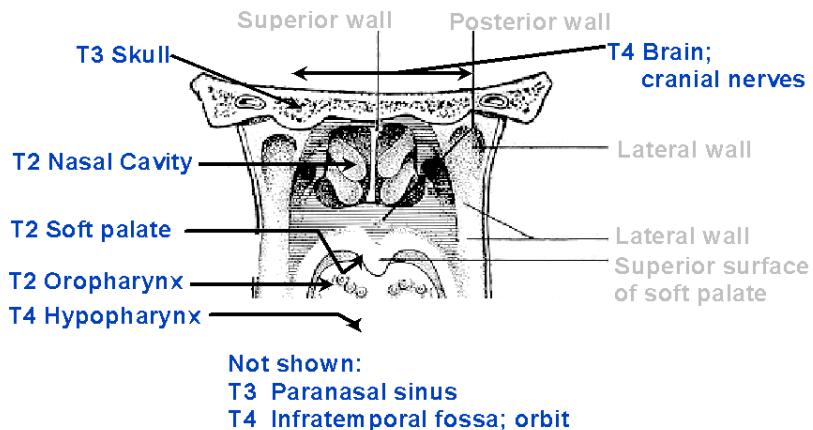
Head and Neck Cancer Staging and Coding 74

Nasopharynx T Classification

- T1 Confined to nasopharynx or extension to soft tissues of oropharynx and/or nasal cavity without parapharyngeal extension
 - T2 Tumor with parapharyngeal extension*
 - T3 Invades bony structures and/or paranasal sinuses
 - T4 Intracranial extension and/or involvement of cranial nerves, orbit, infratemporal fossa, hypopharynx, or masticator space
- * posterolateral tumor infiltration beyond pharyngobasilar fascia

Head and Neck Cancer Staging and Coding 75

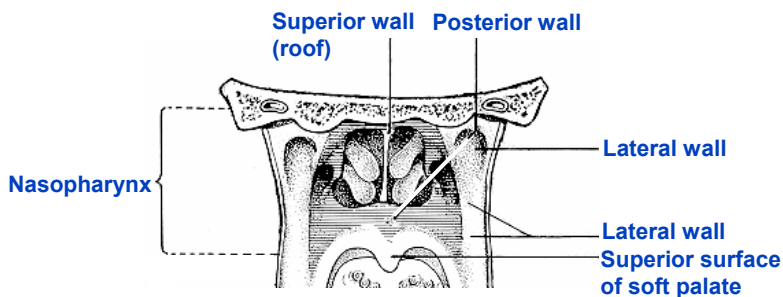
T Classification – Nasopharynx



Head and Neck Cancer Staging and Coding 76

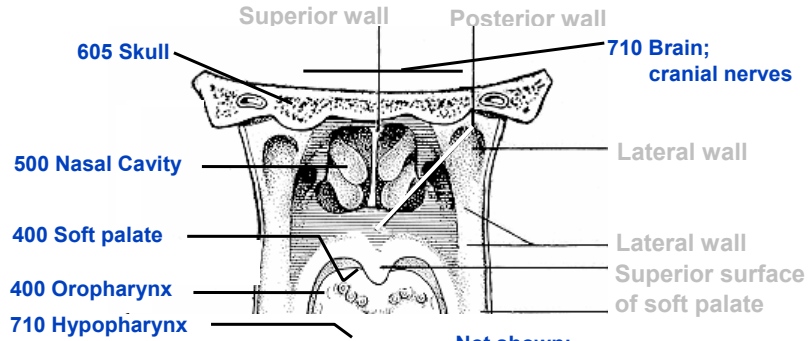
CS Extension Codes – Nasopharynx ⁽¹⁾

- 105 Confined to one:
Posterior superior wall
Lateral wall
Inferior wall
- 205 Two or more subsites involved
- 305 Localized, NOS



Head and Neck Cancer Staging and Coding 77

CS Extension Codes – Nasopharynx (2)



Not shown:
 585 Pterygopalatine fossa
 565 Any 105-500 with fixation
 620 Paranasal sinus
 710 Infratemporal fossa; orbit
 800 Further contiguous extension

Head and Neck Cancer Staging and Coding 78

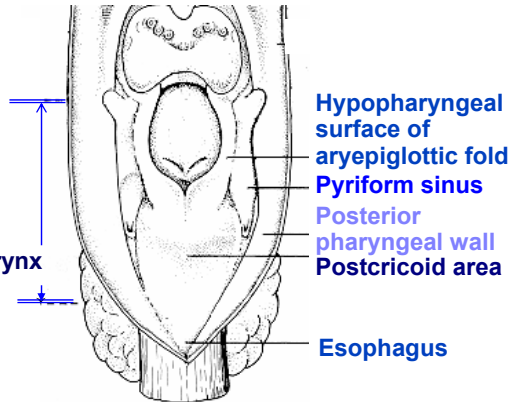
Hypopharynx Sites

- C12.9 Pyriform sinus
- C13.0 Postcricoid region
- C13.1 Hypopharyngeal aspect of aryepiglottic fold
- C13.4 Posterior wall
- C13.9 Hypopharynx, NOS

Head and Neck Cancer Staging and Coding 79

T Classification – Hypopharynx

- T1 ≤ 2 cm in size and/or
Confined to one:
Postcricoid area
Pyriform sinus
Posterior pharyngeal wall
- T2 > 2 and ≤ 4 cm OR
Invades > 1 subsite
or adjacent sites;
not fixed
- T3 > 4 cm OR
Fixation of hemi
larynx or extension
to esophagus



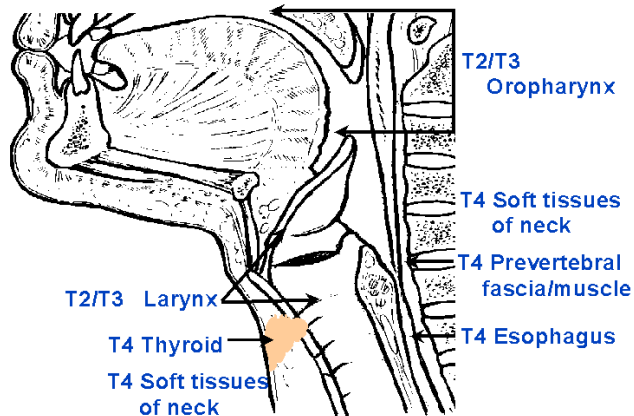
Head and Neck Cancer Staging and Coding 80

T Examples – Hypopharynx

See TNM 7th Ed for T4a, T4b

-
-
-
-
-
-
-

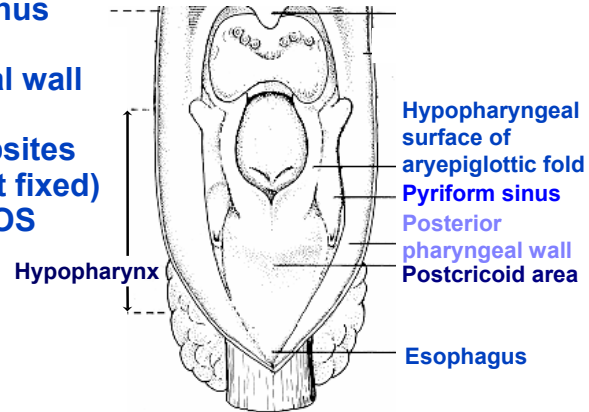
Not shown:
T4 Carotid artery
T4 Cricoid cartilage



Head and Neck Cancer Staging and Coding 81

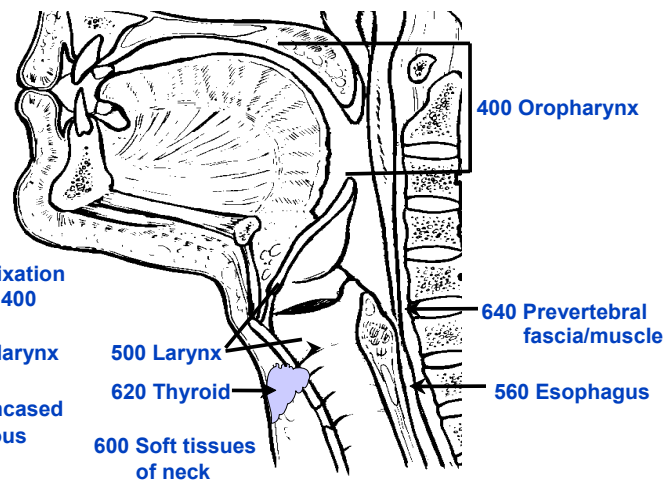
CS Extension Codes – Hypopharynx (1)

- 100 Confined to one:
Postcricoid area
Pyriform sinus
Posterior
pharyngeal wall
- 200 Two or more
adjacent subsites
involved (not fixed)
- 300 Localized, NOS



CS Extension Codes – Hypopharynx (2)

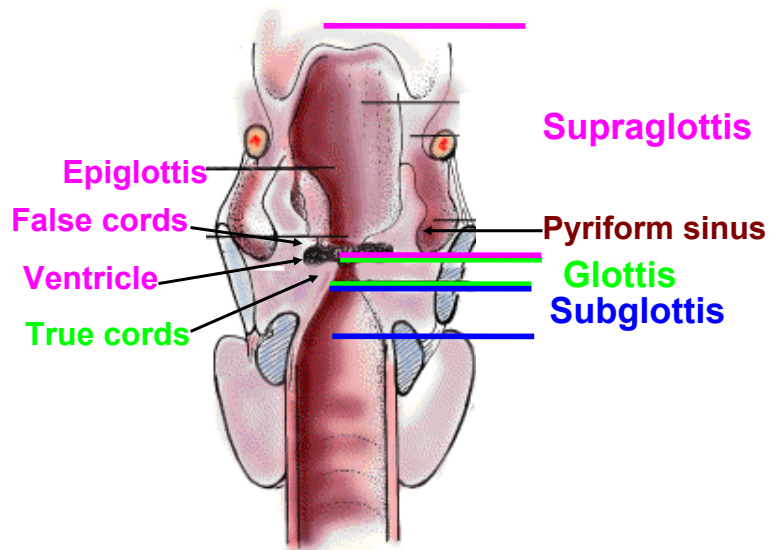
- Not shown:
- 420 100 with tumor fixation
- 450 Any 200, 300, or 400 with fixation
- 550 Fixation of hemilarynx or larynx
- 650 Carotid artery encased
- 800 Further contiguous extension



LARYNX

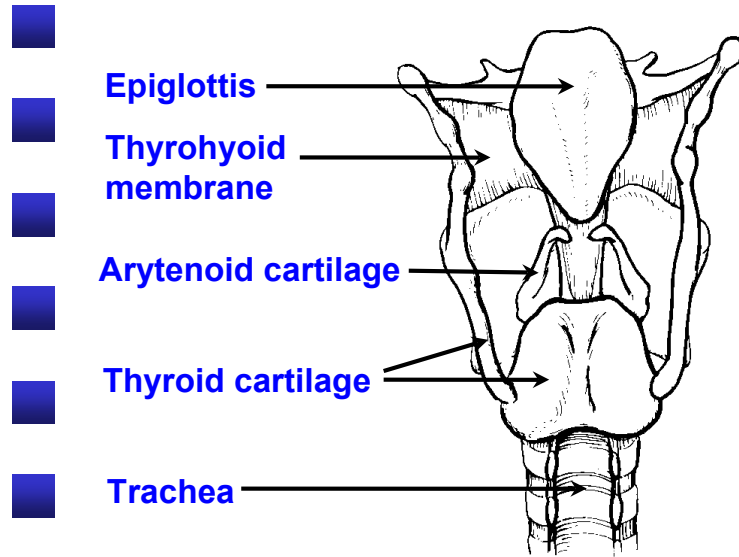
18. TNM Staging: Head and Neck Cancers 84

Subsites of Larynx



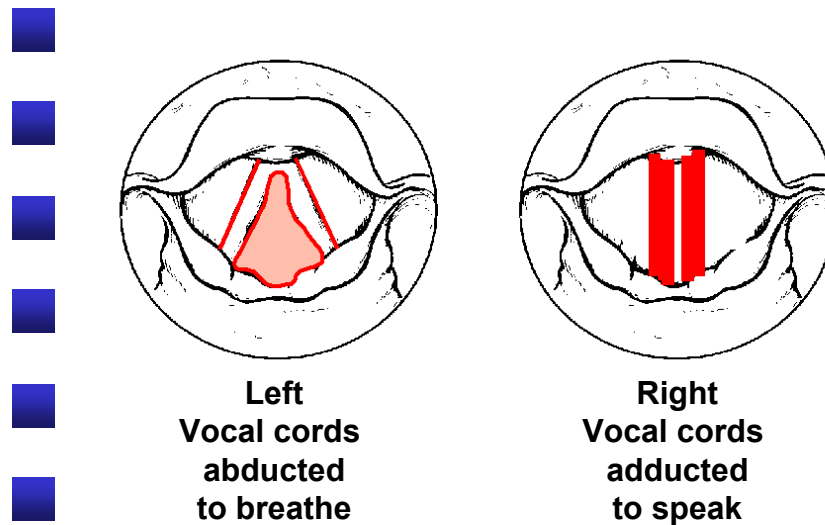
Head and Neck Cancer Staging and Coding 85

■ Front of Larynx from behind



Head and Neck Cancer Staging and Coding 86

■ Larynx – View from Above



Head and Neck Cancer Staging and Coding 87

Structures of Glottis and Supraglottis

Supraglottic/Glottic

Epiglottis

Anterior commissure

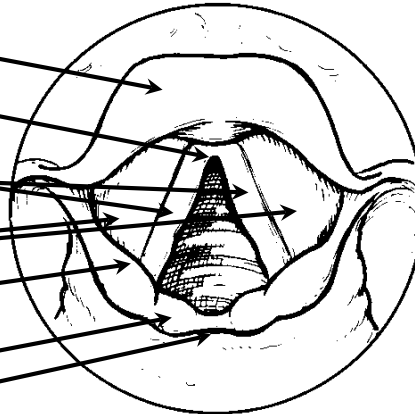
True vocal cords

False vocal cords

Aryepiglottic fold

Arytenoid

Posterior commissure



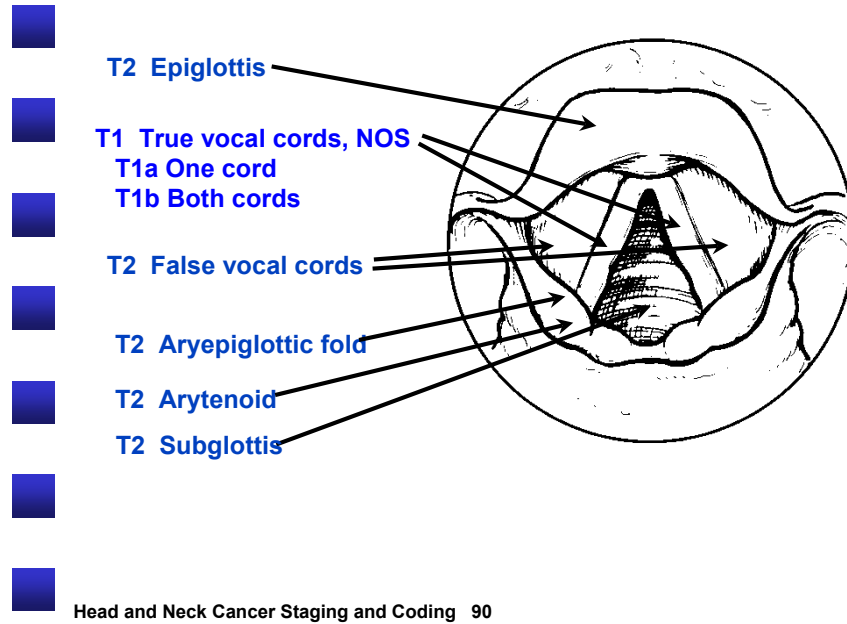
Head and Neck Cancer Staging and Coding 88

Glottic Larynx Guidelines

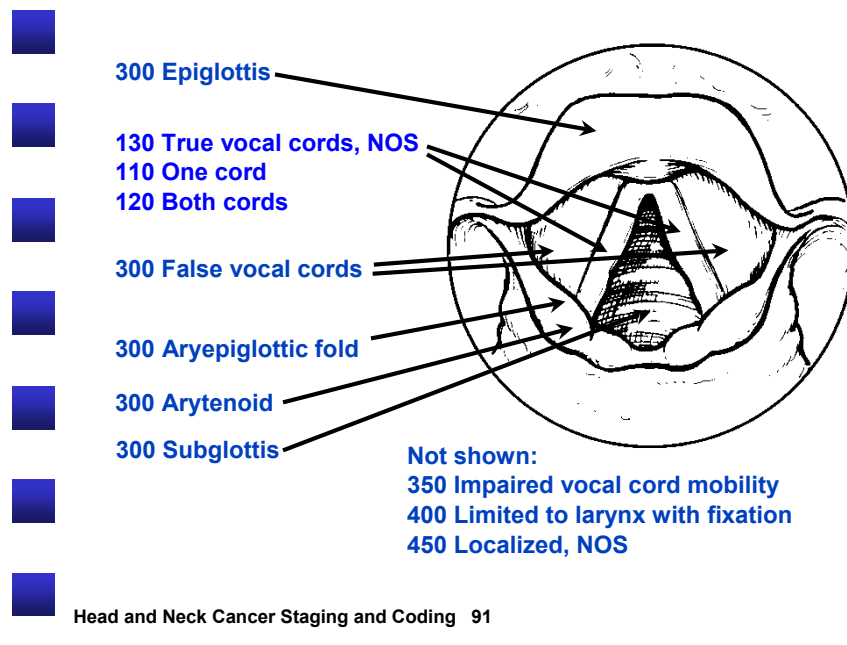
- Subsites of glottic larynx
 - C32.0 Vocal cord, NOS (true cord)
Laryngeal commissures (anterior and posterior)
- T category by extension of tumor
 - T1a One vocal cord only
 - T1b Both vocal cords
 - T2 Extension within larynx
 - T3 Within larynx with fixation
 - T4a Through thyroid cartilage, trachea, soft tissues of neck, strap muscles, deep muscles of tongue, thyroid, esophagus
 - T4b Prevertebral space, encasing carotid artery, mediastinal structures
- T1-T2 Use these categories when there is normal or only impaired vocal cord mobility

Head and Neck Cancer Staging and Coding 89

T1-T2 Glottic Larynx



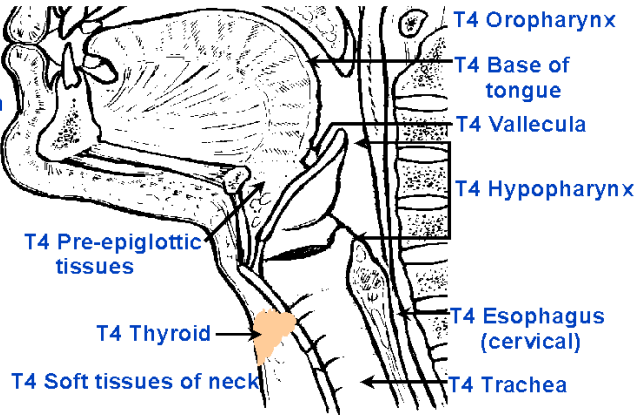
CS Extension Codes – Glottic Larynx (1)



T3-T4 Glottic Larynx

See TNM 7th Ed for T4a, T4b

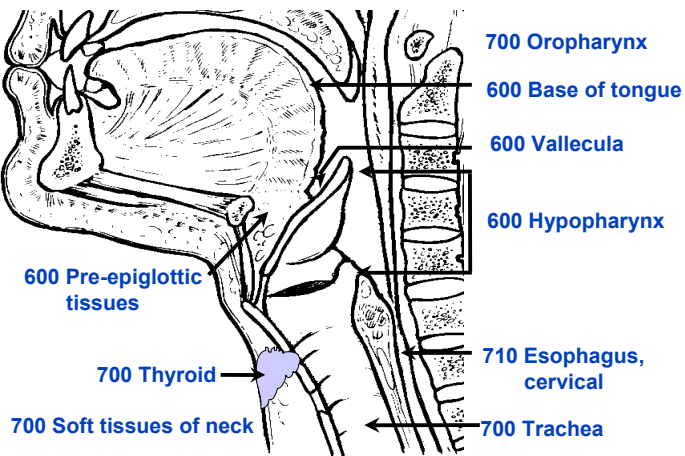
Not shown:
 T3 Within larynx with
 cord fixation
 T4 Pyriform sinus;
 postcricoid
 T4 Thyroid/cricoid
 cartilage



Head and Neck Cancer Staging and Coding 92

CS Extension Codes – Glottic Larynx (2)

Not shown:
 600 Pyriform sinus;
 postcricoid
 680 Cricoid cartilage
 800 Further
 contiguous
 extension



Head and Neck Cancer Staging and Coding 93

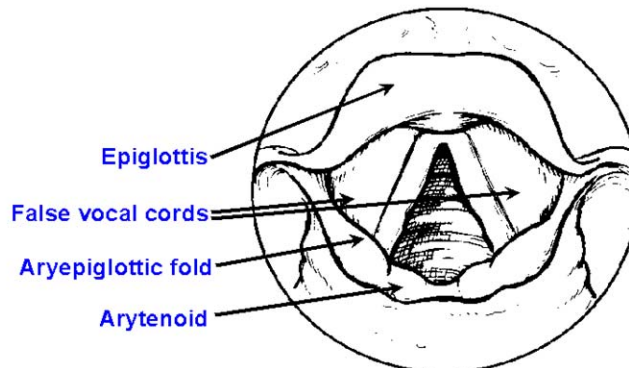
Supraglottic Larynx Guidelines

- **Subsites of supraglottic larynx**
 - C10.1 Anterior surface of epiglottis
 - C32.1 Epiglottis, NOS
 - Laryngeal aspect of aryepiglottic fold
 - Posterior surface of epiglottis
 - False vocal cord (ventricular band)
- **T category by extension of tumor: subsite(s) of supraglottis / fixation / adjacent structures**
- **Histologic study of surgically resected specimen required for pathologic staging**

Head and Neck Cancer Staging and Coding 94

T1-T2 Supraglottic Larynx

- T1 Confined to one subsite (normal vocal cord mobility)**
- T2 Involves more than one subsite**



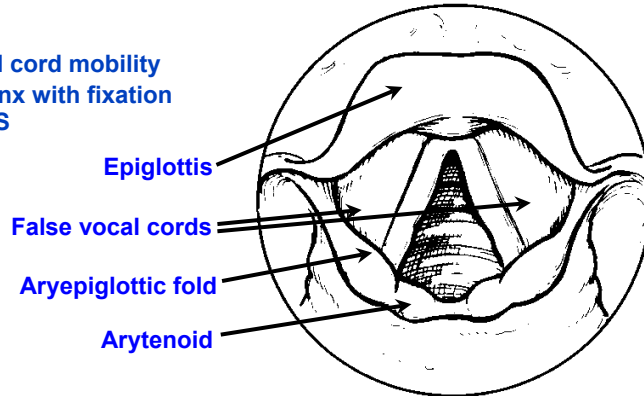
Note: T2 also includes adjacent regions outside supraglottis: mucosa of base of tongue, vallecula, medial wall of pyriform sinus with no fixation

Head and Neck Cancer Staging and Coding 95

CS Extension Codes – Supraglottic Larynx ⁽¹⁾

- 100 Confined to one subsite (normal vocal cord mobility)
- 200 Involves more than one subsite in supraglottis
- 230 Involves glottis, no fixation
- 390 Involves subglottis, no fixation

- Not shown:
- 250 Impaired vocal cord mobility
 - 400 Limited to larynx with fixation
 - 450 Localized, NOS

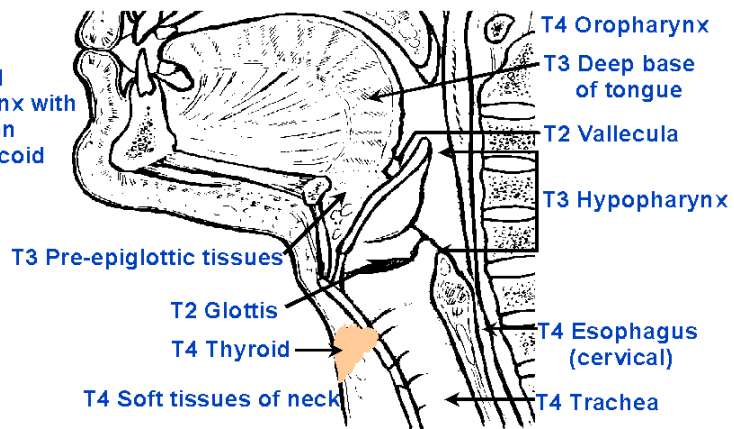


Head and Neck Cancer Staging and Coding 96

T3-T4 Supraglottic Larynx

See TNM 7th Ed for T4a, T4b

- Not shown:
- T3 Postcricoid
 - T3 Within larynx with cord fixation
 - T4 Thyroid/cricoid cartilage



Head and Neck Cancer Staging and Coding 97

CS Extension Codes – Supraglottic Larynx⁽²⁾

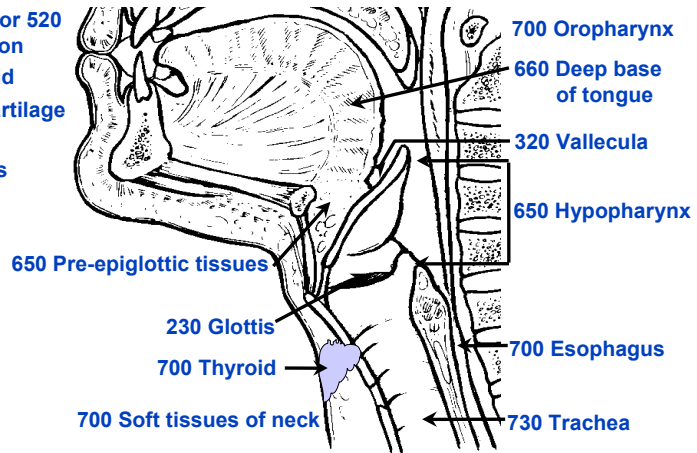
Not shown:

625 Code 320 or 520
with fixation

650 Postcricoid

690 Cricoid cartilage

800 Further
contiguous
extension



Head and Neck Cancer Staging and Coding 98

T Classification – Subglottic Larynx

- T1 Subglottis (normal vocal cord mobility)
- T2 Extends to vocal cords (normal or impaired mobility)
- T3 Limited to larynx with cord fixation
- T4a Thyroid/cricoid cartilage; other tissues beyond larynx; oropharynx; cervical esophagus; soft tissues of neck; strap muscles; thyroid gland; trachea; esophagus; skin
- T4b Prevertebral space; encasing carotid artery; mediastinal structures

Head and Neck Cancer Staging and Coding 99

■ CS Extension Codes – Subglottic Larynx

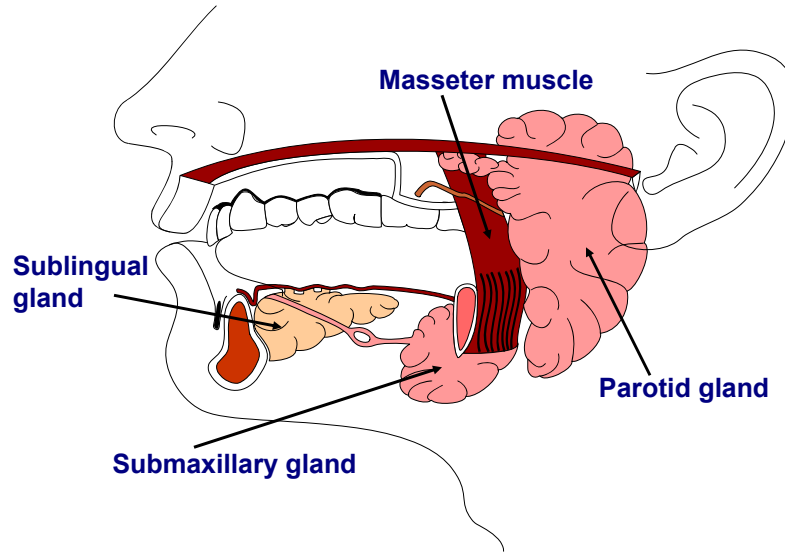
- 100 Subglottis (normal vocal cord mobility) (T1)
- 300 Involves adjacent region of larynx; no fixation (T2)
- 400 Limited to larynx with fixation (T3)
- 450 Localized, NOS
- 600 Base of tongue; hypopharynx; postcricoid area; pyriform sinus; vallecula (T4a)
- 680 Thyroid/cricoid cartilage; other tissues beyond (T4a)
- 700 Oropharynx; cervical esophagus; soft tissues of neck; strap muscles; thyroid gland; trachea; skin (T4a)
- 800 Further contiguous extension (T4b)

■ Head and Neck Cancer Staging and Coding 100

■ SALIVARY GLANDS

■ 18. TNM Staging: Head and Neck Cancers 101

Major Salivary Glands



Head and Neck Cancer Staging and Coding 102

Minor Salivary Gland Cancers

- Code and stage minor salivary gland cancers according to the site of origin
- Example: adenoid cystic carcinoma of minor salivary gland in hard palate
C05.0
Oral cavity TNM scheme
- If no site of origin is described, use C06.9

Head and Neck Cancer Staging and Coding 103

■ Salivary Gland Guidelines

- • Applies to MAJOR salivary glands
- • T categories by size of tumor
- • Lymph node scheme same as other head and neck sites
- • Resection required for pathologic staging



Head and Neck Cancer Staging and Coding 104

■ T Classification – Salivary Glands

- • T1 \leq 2 cm, no extraparenchymal extension
- • T2 $>$ 2 to 4 cm, no extraparenchymal extension
- • T3 $>$ 4 cm OR extraparenchymal extension
- • T4a Further extension: skin, mandible, ear canal, facial nerve
- • T4b Further extension: skull base, pterygoid plates, encases carotid artery
- • Extraparenchymal extension
 - • Clinical or macroscopic evidence of invasion of soft tissues
Microscopic evidence alone does not constitute extraparenchymal extension for classification purposes.



Head and Neck Cancer Staging and Coding 105

T3-T4 Salivary Gland

See TNM 7th Ed for T4a, T4b

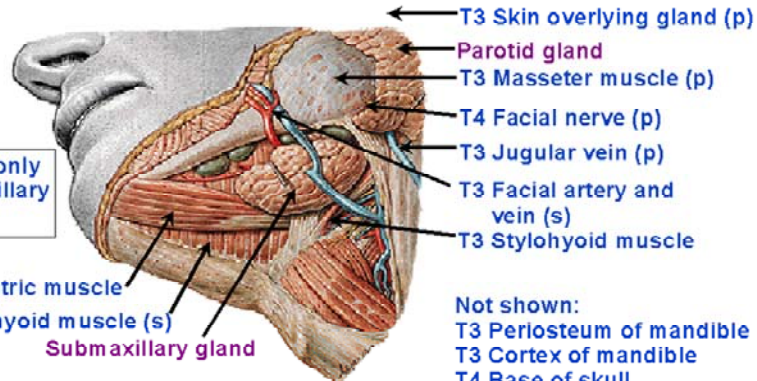
T3 Other major salivary gland involved

(p) Parotid only
(s) Submaxillary only

T3 Digastric muscle

T3 Mylohyoid muscle (s)

Submaxillary gland



Not shown:
T3 Periosteum of mandible
T3 Cortex of mandible
T4 Base of skull
T4 Spinal accessory nerve

Head and Neck Cancer Staging and Coding 106

CS Extension Codes for Major Salivary Glands

100 Confined to gland of origin

400 Other major salivary gland involved

(p) Parotid only
(s) Submaxillary only

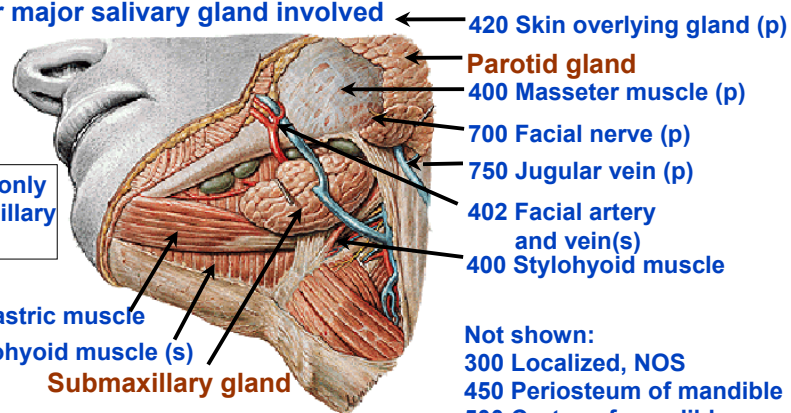
400 Digastric muscle

400 Mylohyoid muscle (s)

Submaxillary gland

Not shown:

800 Further contiguous extension



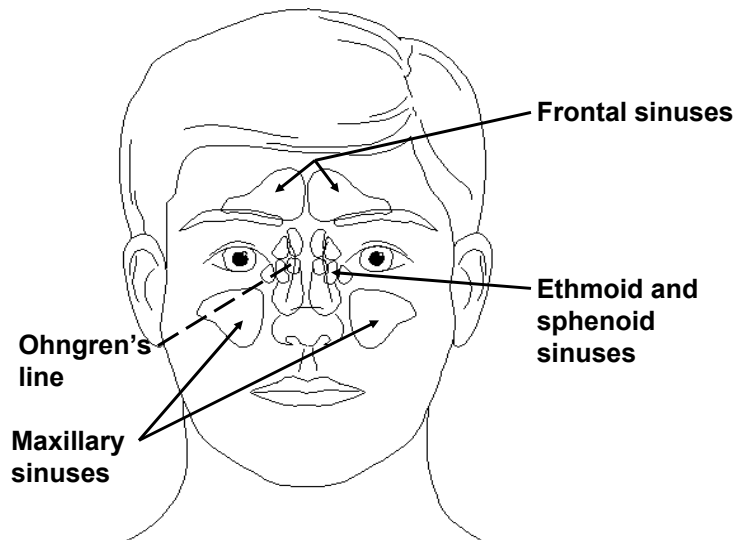
Not shown:
300 Localized, NOS
450 Periosteum of mandible
500 Cortex of mandible
760 Base of skull (p)
405 Spinal accessory nerve

Head and Neck Cancer Staging and Coding 107

PARANASAL SINUSES

18. TNM Staging: Head and Neck Cancers 108

Paranasal Sinuses



Head and Neck Cancer Staging and Coding 109

■ Maxillary Sinus – Ohngren's Line

■ Divides maxillary sinus into

■ Infrastructure (anterior and inferior) (T2)

- Hard palate; middle nasal meatus; nasal cavity; palatine bone

■ Suprastructure (superior and posterior) (T3)

- Anterior ethmoid sinus; floor of orbit; posterior wall of maxillary sinus

Head and Neck Cancer Staging and Coding 110

■ T Classification – Maxillary Sinus

- T1 Limited to maxillary sinus mucosa; no erosion or destruction of bone
- T2 Bone erosion or destruction including extension into the hard palate and/or the middle of the nasal meatus, except extension to the posterior wall of maxillary sinus and pterygoid plates
- T3 Invasion of any of the following: bone of the posterior wall of maxillary sinus, subcutaneous tissues, floor or medial wall of orbit, pterygoid fossa, ethmoid sinuses

Head and Neck Cancer Staging and Coding 111

T4 Classification–Maxillary Sinus

- **T4a** Invades anterior orbital contents, skin of cheek, pterygoid plates, infratemporal fossa, cribriform plate, sphenoid or frontal sinuses
- **T4b** Invades any of the following: orbital apex, dura, brain, middle cranial fossa, cranial nerves other than maxillary division of trigeminal nerve (V2), nasopharynx, or clivus

Head and Neck Cancer Staging and Coding 112

CS Extension Codes – Maxillary Sinus

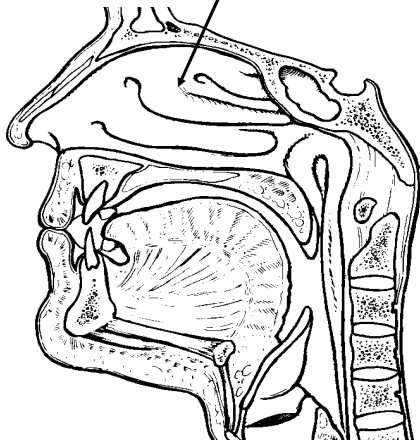
- 100** Confined to maxillary sinus
- 300** Localized, NOS
- **Ohngren’s line divides maxillary sinus into**
 - 400** Infrastructure (anterior and inferior)
 - Hard palate; middle nasal meatus; nasal cavity; palatine bone
 - 600** Suprastructure (superior and posterior)
 - Anterior ethmoid sinus; floor of orbit; posterior wall of maxillary sinus
- 660** Ethmoid sinus; pterygoid sinus
- 675** Base of skull
- 680** Anterior orbit; frontal sinus; sphenoid sinus; eye
- 710** Soft palate
- 750** Brain; cranial nerves; dura; nasopharynx

Head and Neck Cancer Staging and Coding 113

■ Nasal Cavity and Ethmoid Sinuses

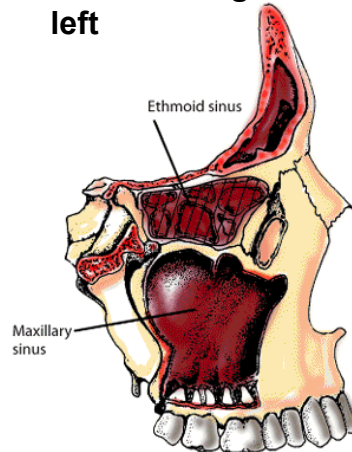


C30.0
Nasal cavity



Nasal cavity subsites: septum, floor,
lateral wall, and vestibule

Ethmoid sinus
subsites: right and
left



Head and Neck Cancer Staging and Coding 114

■ T1-T3 Nasal Cavity / Ethmoid Sinuses



- T1 Limited to any one subsite, with or without bony invasion
- T2 Invading 2 subsites in a single region or extending to involve an adjacent region within the nasoethmoidal complex, with or without bony invasion
- T3 Extension to invade the medial wall or floor of the orbit, maxillary sinus, palate, or cribriform plate

Head and Neck Cancer Staging and Coding 115

T4 Nasal Cavity / Ethmoid Sinuses

- T4a Invades any of the following: anterior orbital contents, skin of nose or cheek, minimal extension to anterior cranial fossa, pterygoid plates, sphenoid or frontal sinuses
- T4b Invades any of the following: orbital apex, dura, brain, middle cranial fossa, cranial nerves other than V2, nasopharynx, or clivus

Head and Neck Cancer Staging and Coding 116

Extension Codes – Nasal Cavity

- 000 In situ; non-invasive (Tis)
- 100 Invasive tumor confined to site of origin, no bony invasion
Meatus (superior, middle, inferior); Nasal conchae (superior, middle, inferior); Septum; Tympanic membrane (T1)
- 105 Any in 100 with bony invasion
- 200 Two or more subsites in 100, no bony invasion
- 205 Two or more subsites in 100 with bony invasion
- 300 Localized, NOS (T1)
- 400 Extending to adjacent connective tissue within nasoethmoidal complex; Nasolacrimal duct; Choana (T2)
- 610 Adjacent organs/structures including: Bone of skull; Hard palate

Head and Neck Cancer Staging and Coding 117

■ Extension Codes – Nasal Cavity

- 650 Cribriform plate (T3)
- 660 Maxillary sinus (T3)
- 670 Medial wall or floor of the orbit (T3)
- 690 Frontal sinus; Pterygoid plates (T4a)
- 705 Tumor invades: Anterior orbital contents; Skin of nose; Skin of cheek; Anterior cranial fossa; Sphenoid sinus (T4a)
- 730 Nasopharynx (T4b)
- 760 Tumor invades: Orbital apex; Dura; Brain; Middle cranial fossa; Cranial nerves (other than V2), nasopharynx, or clivus (T4b)

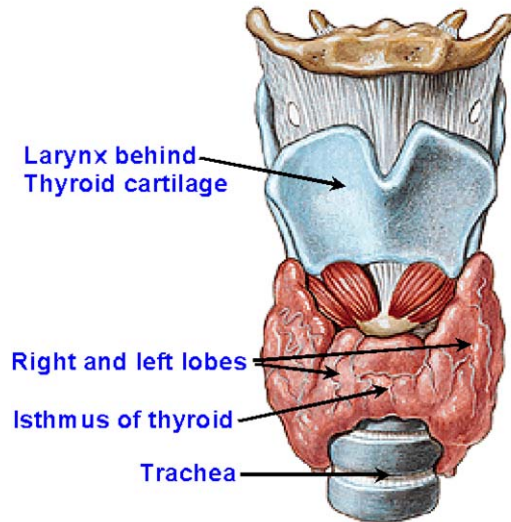
Head and Neck Cancer Staging and Coding 118

■ Extension Codes – Ethmoid Sinuses

- 000 In situ; non-invasive; intraepithelial
- 120, 160 Confined to one ethmoid sinus (or NOS) without bone involvement (T1)
- 220, 260 Confined to one ethmoid sinus (or NOS) WITH bony invasion (involvement of perpendicular plate of ethmoid bone or ethmoid air cells) (T1)
- 300 Localized, NOS (T1)
- 320 Confined to both ethmoid sinuses without bone involvement (T2)
- 340 Confined to both ethmoid sinuses (or NOS) WITH bony invasion (involvement of perpendicular plate of ethmoid bone or ethmoid air cells) (T2)
- 400 Extension to nasal cavity with/without bony invasion (involvement of perpendicular plate of ethmoid bone or ethmoid air cells) (T2)

■ Floor; Lateral wall; Nasal vestibule; Septum; Turbinates
Head and Neck Cancer Staging and Coding 119

■ Thyroid Gland



Head and Neck Cancer Staging and Coding 122

■ Thyroid MP/H Rules

- Included in “Other Sites” rules
- Multiple primaries rules specific to thyroid
 - M6. Follicular and papillary tumors in thyroid < 60 days = single
- Histology coding rules specific to thyroid
 - H14, H26. Code papillary carcinoma of thyroid to papillary adenocarcinoma, NOS (8260)
 - H15, H27. Code follicular and papillary carcinoma of the thyroid to papillary carcinoma, follicular variant (8340).
 - H16, H30. Code the appropriate combination/ mixed code (Table 2)
 - Papillary and follicular; medullary and follicular or papillary

Head and Neck Cancer Staging and Coding 123

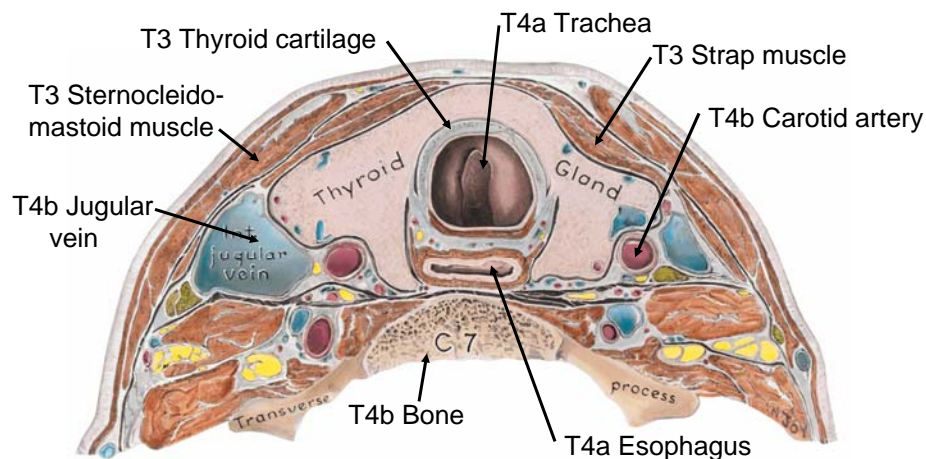
Thyroid Gland - T

• Tumor categories

- T1 ≤ 2 cm
 - T1a ≤ 1 cm
 - T1b >1 to ≤ 2
 - T2 > 2 to ≤ 4 cm
 - T3 > 4 cm; extrathyroid extension
 - T4a Extracapsular extension: subcutaneous soft tissues, larynx, trachea, esophagus, recurrent laryngeal nerve
 - T4b Prevertebral fascia; encasing carotid artery; mediastinal vessels
- Largest tumor determines the classification

Head and Neck Cancer Staging and Coding 124

T3-T4 Examples – Thyroid



Source: Medi-clip: Grant's Atlas Images 4, Head and Neck. Williams and Wilkins, 1998.

Head and Neck Cancer Staging and Coding 125

CS Extension - Thyroid (1)

- 000 In situ (CIS)
- 100 Single invasive tumor confined to thyroid
- 200 Multiple foci confined to thyroid
- 300 Localized, NOS
- 400 Into thyroid capsule but not beyond
- 450 Minimal extrathyroid extension including strap muscles (T3)
- 480 Pericapsular soft/connective tissue (T3)



Code 450
Minimal
extension

Head and Neck Cancer Staging and Coding 126

Source: TNM-Interactive, UICC, 1998

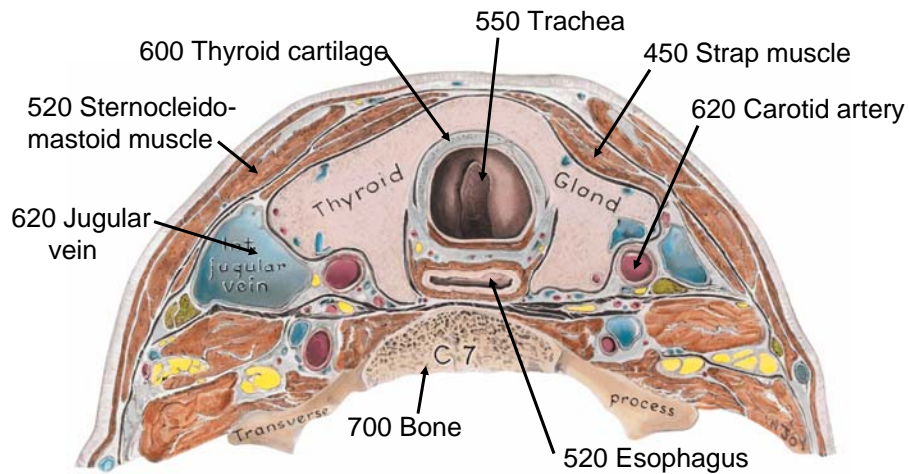
CS Extension - Thyroid (2)

- 500 Parathyroid; Recurrent laryngeal or vagus nerve
- 520 Cricoid cartilage; esophagus; larynx; SCM muscle
- 550 Trachea
- 600 Thyroid cartilage; fixed to adjacent tissues
- 620 Major blood vessels; carotid artery, jugular vein, thyroid artery/vein
- 700 Bone; skeletal muscle
- 800 Further contiguous extension; mediastinal tissues; prevertebral fascia



Head and Neck Cancer Staging and Coding 127

CS Extension Codes



Source: Medi-clip: Grant's Atlas Images 4, Head and Neck. Williams and Wilkins, 1998.

Head and Neck Cancer Staging and Coding 128

Thyroid Gland - N

• Node categories

- N0 No regional lymph node metastasis
- N1 Regional lymph node metastasis
 - N1a Metastasis to Level VI (pretracheal, paratracheal, and prelaryngeal/Delphian lymph nodes)
 - N1b Metastasis to unilateral, bilateral, or contralateral cervical or superior mediastinal lymph nodes

Head and Neck Cancer Staging and Coding 129

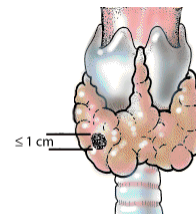
CS Lymph Nodes

- 000 No regional lymph node involvement
- 120 Level VI nodes
- 135 Cervical nodes, levels II – V; cervical, NOS
- 155 Level VB nodes; transverse cervical; supraclavicular
- 158 Level VII nodes (superior mediastinum)
- 160 Level I nodes
- 500 Regional nodes, NOS
- 800 Lymph nodes, NOS
- 999 Unknown; not stated

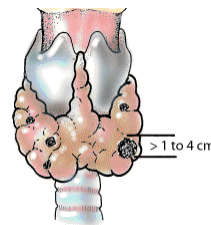
Head and Neck Cancer Staging and Coding 130

Site-specific Factor 1 Solitary vs. Multifocal

- 000 None
- 010 Solitary tumor (s)
- 020 Multifocal tumor (m)
- 999 Insufficient information; not documented in patient record



Code 001



Code 002

Head and Neck Cancer Staging and Coding 131

Source: TNM-Interactive, UICC, 1998

■ Thyroid Gland – Stage Grouping

- • All anaplastic carcinomas are T4 / Stage IV
 - • T4a (intrathyroidal anaplastic carcinoma)
 - • T4b (extrathyroidal anaplastic carcinoma)
- • Medullary carcinomas have separate stage grouping

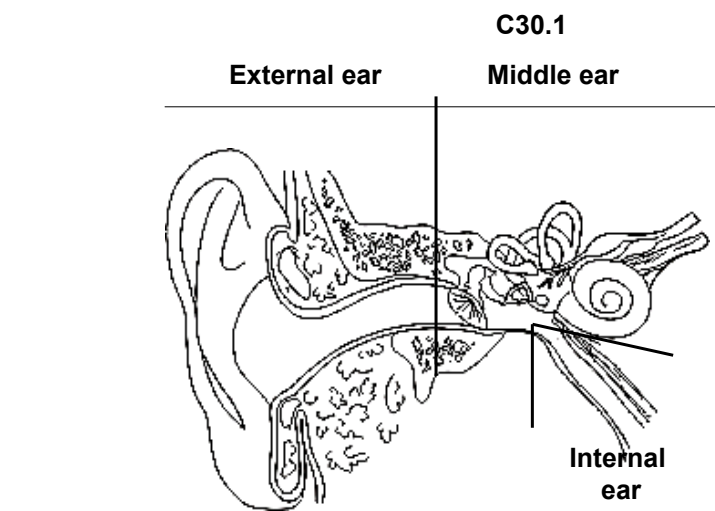
■ Head and Neck Cancer Staging and Coding 132

■ Papillary and Follicular Carcinomas

- • < 45 years:
 - • Stage I: Any T, any N, M0
 - • Stage II: Any T, any N, M1
- • Age 45 years and older
 - • Stage I: T1, N0, M0
 - • Stage II: T2, N0, M0
 - • Stage III: Minimal extrathyroid extension or positive Level VI nodes
 - • Stage IVA: Tumors (any size) beyond the thyroid capsule, invading subcutaneous soft tissues, larynx, trachea, esophagus, recurrent laryngeal nerve
 - • Stage IVB: Invasion of prevertebral fascia, carotid artery, or mediastinal vessels
 - • Stage IVC: Advanced tumors, distant mets

■ Head and Neck Cancer Staging and Coding 133

■ Middle Ear



Head and Neck Cancer Staging and Coding 134