

## CERVIX UTERI STAGING FORM

CLINICAL Extent of disease before any treatment		STAGE CATEGORY DEFINITIONS	PATHOLOGIC Extent of disease through completion of definitive surgery	
TNM CATEGORY	FIGO STAGE	TUMOR SIZE: _____	LATERALITY:	
<input type="checkbox"/> TX		Primary tumor cannot be assessed	<input type="checkbox"/> left	<input type="checkbox"/> right
<input type="checkbox"/> T0		No evidence of primary tumor	<input type="checkbox"/> bilateral	
<input type="checkbox"/> Tis	*	Carcinoma <i>in situ</i> (preinvasive carcinoma)		
<input type="checkbox"/> T1	I	Cervical carcinoma confined to uterus (extension to corpus should be disregarded)		
<input type="checkbox"/> T1a**	IA	Invasive carcinoma diagnosed only by microscopy. Stromal invasion with a maximum depth of 5.0 mm measured from the base of the epithelium and a horizontal spread of 7.0 mm or less. Vascular space involvement, venous or lymphatic, does not affect classification		
<input type="checkbox"/> T1a1	IA1	Measured stromal invasion 3.0 mm or less in depth and 7.0 mm or less in horizontal spread		
<input type="checkbox"/> T1a2	IA2	Measured stromal invasion more than 3.0 mm and not more than 5.0 mm with a horizontal spread 7.0 mm or less		
<input type="checkbox"/> T1b	IB	Clinically visible lesion confined to the cervix or microscopic lesion greater than T1a/IA2		
<input type="checkbox"/> T1b1	IB1	Clinically visible lesion 4.0 cm or less in greatest dimension		
<input type="checkbox"/> T1b2	IB2	Clinically visible lesion more than 4.0 cm in greatest dimension		
<input type="checkbox"/> T2	II	Cervical carcinoma invades beyond uterus but not to pelvic wall or to lower third of vagina		
<input type="checkbox"/> T2a	IIA	Tumor without parametrial invasion		
<input type="checkbox"/> T2a1	IIA1	Clinically visible lesion 4.0 cm or less in greatest dimension		
<input type="checkbox"/> T2a2	IIA2	Clinically visible lesion more than 4.0 cm in greatest dimension		
<input type="checkbox"/> T2b	IIB	Tumor with parametrial invasion		
<input type="checkbox"/> T3	III	Tumor extends to pelvic wall and/or involves lower third of vagina, and/or causes hydronephrosis or non-functioning kidney		
<input type="checkbox"/> T3a	IIIA	Tumor involves lower third of vagina, no extension to pelvic wall		
<input type="checkbox"/> T3b	IIIB	Tumor extends to pelvic wall and/or causes hydronephrosis or non-functioning kidney		
<input type="checkbox"/> T4	IVA	Tumor invades mucosa of bladder or rectum, and/or extends beyond true pelvis (bulloss edema is not sufficient to classify a tumor as T4)		
* FIGO staging no longer includes Stage 0 (Tis)				
** All macroscopically visible lesions—even with superficial invasion—are T1b/IB.				
TNM CATEGORY	FIGO STAGE	REGIONAL LYMPH NODES (N)	TNM CATEGORY	FIGO STAGE
<input type="checkbox"/> NX		Regional lymph nodes cannot be assessed	<input type="checkbox"/> NX	
<input type="checkbox"/> N0		No regional lymph node metastasis	<input type="checkbox"/> N0	
<input type="checkbox"/> N1	IIIB	Regional lymph node metastasis	<input type="checkbox"/> N1	IIIB

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TNM CATEGORY	FIGO STAGE	DISTANT METASTASIS (M)	TNM CATEGORY	FIGO STAGE
<input type="checkbox"/> M0		No distant metastasis (no pathologic M0; use clinical M to complete stage group)		
<input type="checkbox"/> M1	IVB	Distant metastasis (including peritoneal spread, involvement of supraclavicular, mediastinal, or paraaortic lymph nodes, lung, liver, or bone)	<input type="checkbox"/> M1	IVB

### ANATOMIC STAGE • PROGNOSTIC GROUPS (FIGO 2008)

CLINICAL			PATHOLOGIC					
GROUP	T	N	M	GROUP	T	N	M	
<input type="checkbox"/> Stage 0* Tis		N0	M0	<input type="checkbox"/> Stage 0* Tis		N0	M0	
<input type="checkbox"/> Stage I T1		N0	M0	<input type="checkbox"/> Stage I T1		N0	M0	
<input type="checkbox"/> Stage IA T1a		N0	M0	<input type="checkbox"/> Stage IA T1a		N0	M0	
<input type="checkbox"/> Stage IA1 T1a1		N0	M0	<input type="checkbox"/> Stage IA1 T1a1		N0	M0	
<input type="checkbox"/> Stage IA2 T1a2		N0	M0	<input type="checkbox"/> Stage IA2 T1a2		N0	M0	
<input type="checkbox"/> Stage IB T1b		N0	M0	<input type="checkbox"/> Stage IB T1b		N0	M0	
<input type="checkbox"/> Stage IB1 T1b1		N0	M0	<input type="checkbox"/> Stage IB1 T1b1		N0	M0	
<input type="checkbox"/> Stage IB2 T1b2		N0	M0	<input type="checkbox"/> Stage IB2 T1b2		N0	M0	
<input type="checkbox"/> Stage II T2		N0	M0	<input type="checkbox"/> Stage II T2		N0	M0	
<input type="checkbox"/> Stage IIA T2a		N0	M0	<input type="checkbox"/> Stage IIA T2a		N0	M0	
<input type="checkbox"/> Stage IIA1 T2a1		N0	M0	<input type="checkbox"/> Stage IIA1 T2a1		N0	M0	
<input type="checkbox"/> Stage IIA2 T2a2		N0	M0	<input type="checkbox"/> Stage IIA1 T2a2		N0	M0	
<input type="checkbox"/> Stage IIB T2b		N0	M0	<input type="checkbox"/> Stage IIB T2b		N0	M0	
<input type="checkbox"/> Stage III T3		N0	M0	<input type="checkbox"/> Stage III T3		N0	M0	
<input type="checkbox"/> Stage IIIA T3a		N0	M0	<input type="checkbox"/> Stage IIIA T3a		N0	M0	
<input type="checkbox"/> Stage IIIB T3b		Any N	M0	<input type="checkbox"/> Stage IIIB T3b		Any N	M0	
		T1-3	N1			T1-3	N1	
<input type="checkbox"/> Stage IVA T4		Any N	M0	<input type="checkbox"/> Stage IVA T4		Any N	M0	
<input type="checkbox"/> Stage IVB Any T		Any N	M1	<input type="checkbox"/> Stage IVB Any T		Any N	M1	

\*FIGO no longer includes Stage 0 (Tis)

Stage unknown

\*FIGO no longer includes Stage 0 (Tis)

Stage unknown

### PROGNOSTIC FACTORS (SITE-SPECIFIC FACTORS)

**REQUIRED FOR STAGING:** None

**CLINICALLY SIGNIFICANT:**

FIGO Stage: \_\_\_\_\_

Pelvic nodal status and method of assessment: \_\_\_\_\_

Paraaortic nodal status and method of assessment: \_\_\_\_\_

Distant (mediastinal, scalene) nodal status and method of assessment: \_\_\_\_\_

**Histologic Grade (G)** (also known as overall grade)

**Grading system**

- 2 grade system
- 3 grade system
- 4 grade system
- No 2, 3, or 4 grade system is available

**Grade**

- Grade I or 1
- Grade II or 2
- Grade III or 3
- Grade IV or 4

**General Notes:**

For identification of special cases of TNM or pTNM classifications, the "m" suffix and "y," "r," and "a" prefixes are used. Although they do not affect the stage grouping, they indicate cases needing separate analysis.

**m** **suffix** indicates the presence of multiple primary tumors in a single site and is recorded in parentheses: pT(m)NM.

**y** **prefix** indicates those cases in which classification is performed during or following initial multimodality therapy. The cTNM or pTNM category is identified by a "y" prefix. The ycTNM or ypTNM categorizes the extent of tumor actually present at the time of that examination. The "y" categorization is not an estimate of tumor prior to multimodality therapy.

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### **ADDITIONAL DESCRIPTORS**

**Lymphatic Vessel Invasion (L) and Venous Invasion (V)** have been combined into Lymph-Vascular Invasion (LVI) for collection by cancer registrars. The College of American Pathologists' (CAP) Checklist should be used as the primary source. Other sources may be used in the absence of a Checklist. Priority is given to positive results.

- Lymph-Vascular Invasion Not Present (absent)/Not Identified
- Lymph-Vascular Invasion Present/Identified
- Not Applicable
- Unknown/Indeterminate

### **Residual Tumor (R)**

The absence or presence of residual tumor after treatment. In some cases treated with surgery and/or with neoadjuvant therapy there will be residual tumor at the primary site after treatment because of incomplete resection or local and regional disease that extends beyond the limit of ability of resection.

- RX Presence of residual tumor cannot be assessed
- R0 No residual tumor
- R1 Microscopic residual tumor
- R2 Macroscopic residual tumor

### **General Notes (continued):**

**r** prefix indicates a recurrent tumor when staged after a disease-free interval, and is identified by the "r" prefix: rTNM.

**a** prefix designates the stage determined at autopsy: aTNM.

**surgical margins** is data field recorded by registrars describing the surgical margins of the resected primary site specimen as determined only by the pathology report.

**neoadjuvant treatment** is radiation therapy or systemic therapy (consisting of chemotherapy, hormone therapy, or immunotherapy) administered prior to a definitive surgical procedure. If the surgical procedure is not performed, the administered therapy no longer meets the definition of neoadjuvant therapy.

- Clinical stage was used in treatment planning (describe): \_\_\_\_\_
- National guidelines were used in treatment planning    NCCN    Other (describe): \_\_\_\_\_
- 

Physician signature

Date/Time

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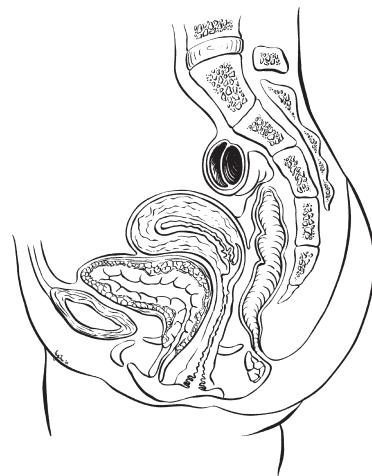
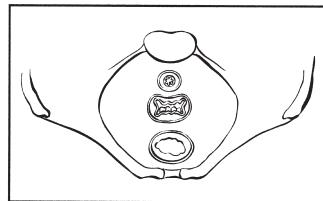
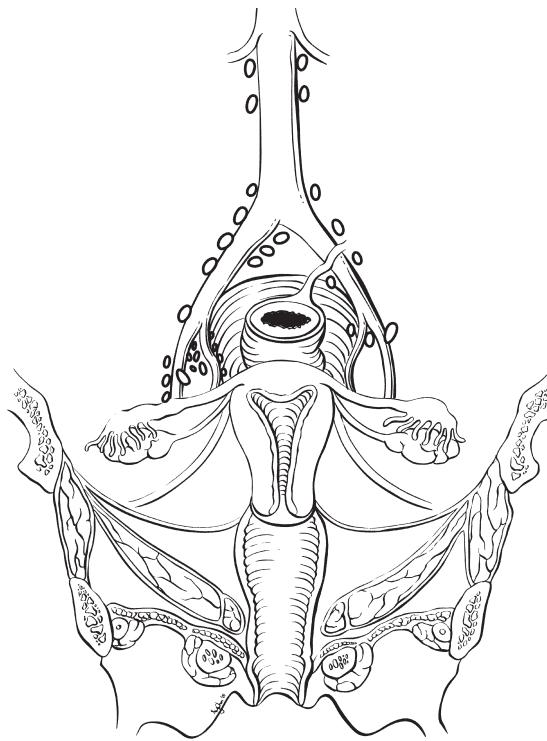
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## CERVIX UTERI STAGING FORM

### Illustration

Indicate on diagram primary tumor and regional nodes involved.



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