PLEURAL MESOTHELIOMA										
	н	ospital N	Name/Address Patient Name/Inform	Patient Name/Information						
Type of S	pecimen		Histopathologic Type	Histopathologic Type						
Tumor Siz	ze		Laterality:   Bilateral	Left □ Right						
		DEFI	NITIONS							
Clinical	Pathologic		ry Tumor (T)	<b>Notes</b> 1. T3 describes locally advanced						
		– TX T0	Primary tumor cannot be assessed	but potentially resectable tumor						
		- T0 T1	No evidence of primary tumor Tumor involves ipsilateral parietal pleura, with or without focal	2. T4 describes locally advanced,						
		- 11	involvement of visceral pleura	technically unresectable tumor						
		T1a	Tumor involves ipsilateral parietal (mediastinal, diaphragmatic)							
		_	pleura. No involvement of the visceral pleura							
		T1b	Tumor involves ipsilateral parietal (mediastinal, diaphragmatic)							
			pleura, with focal involvement of the visceral pleura							
		_ T2	Tumor involves any of the ipsilateral pleural surfaces with at least							
			one of the following:							
			• confluent visceral pleural tumor (including fissure)							
			<ul><li>invasion of diaphragmatic muscle</li><li>invasion of lung parenchyma</li></ul>							
		$T3^{(1)}$	Tumor involves any of the ipsilateral pleural surfaces, with at least							
		- 10	one of the following:							
			• invasion of the endothoracic fascia							
			• invasion into mediastinal fat							
			• solitary focus of tumor invading the soft tissues of the chest wall							
		TT 4(2)	• non-transmural involvement of the pericardium							
		_ T4 <sup>(2)</sup>	Tumor involves any of the ipsilateral pleural surfaces, with at least							
			one of the following: • diffuse or multifocal invasion of soft tissues of the chest wall							
			• any involvement of rib							
			• invasion through the diaphragm to the peritoneum							
			• invasion of any mediastinal organ(s)							
			direct extension to the contralateral pleura							
			• invasion into the spine							
			• extension to the internal surface of the pericardium							
			• pericardial effusion with positive cytology							
			<ul><li>invasion of the myocardium</li><li>invasion of the brachial plexus</li></ul>							
			•							
		Regio NX	nal Lymph Nodes (N)  Pagional lymph nodes cannot be assessed							
		-N0	Regional lymph nodes cannot be assessed No regional lymph node metastases							
		N1	Metastases in the ipsilateral bronchopulmonary and/or hilar lymph							
		- '-	node(s)							
		_ N2	Metastases in the subcarinal lymph node(s) and/or the ipsilateral							
_	_		internal mammary or mediastinal lymph node(s)							
		_ N3	Metastases in the contralateral mediastinal, internal mammary, or							
			hilar lymph node(s), and/or the ipsilateral or contralateral supra-							
			clavicular or scalene lymph node(s)							

(continued on reverse side)

				PLEURAL	. MESOTHELIOMA		(continued)		
Clinical	Pathologic	Distar	nt Metastasi	s (M)			Notes		
		MX	Distant r	Additional Descriptors					
		_M0	No dista	Lymphatic Vessel Invasion (L)					
		_M1	Distant r	LX Lymphatic vessel invasion					
			Biopsy o	f metastatic site	e performed 🗆 Y	$\square$ N	cannot be assessed  L0 No lymphatic vessel inva-		
			Source o	f pathologic me	etastatic specimen		sion		
							L1 Lymphatic vessel invasion		
		Stage	Grouping				Venous Invasion (V)		
		_ I	T1	N0	M0		VX Venous invasion cannot be assessed		
		_ IA	Tla	NO	M0		V0 No venous invasion		
		_ IB	T1b T2	NO	M0		V1 Microscopic venous inva- sion		
		_ III	T1, T2	N0 N1	M0 M0		V2 Macroscopic venous inva-		
		_ 111	T1, T2 T1, T2	N2	M0		sion		
			T3	N0, N1, N2	M0				
П		IV	T4	Any N	M0				
		_ 1 v	Any T	N3	M0				
			Any T	Any N	M1				
				·	1111				
		<b>Resid</b>   RX	ual Tumor (R		nor cannot be assessed				
		] R1 ] R2		ppic residual tur opic residual tu					
			ional Descri	-	IIIOI				
	ssifications, the "m"								
		suffix	and "y," "r,"	and "a" prefixe	s are used. Although the	ey do not affect the			
					es needing separate ana				
				•	of multiple primary tun	nors in a single site			
	_			n parentheses: p					
					which classification is p				
					herapy. The cTNM or p				
					TNM or ypTNM catego				
					ne of that examination.				
					prior to multimodality				
					nor when staged after a	disease-free interval,			
				by the "r" prefix	:: r1NM. ermined at autopsy: aTl	NIM.			
		a prei	i <b>ix</b> designad	es the stage dete	eriililed at autopsy: arr	NIVI.			
pl · ·	2 61					<b>.</b>			
Physician	n's Signatu	ıre				Date			

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