

PROSTATE

Hospital Name/Address

Patient Name/Information

Type of Specimen _____

Histopathologic Type _____

Tumor Size _____

DEFINITIONS

Pathologic	Primary Tumor (T) ⁽¹⁾
<input type="checkbox"/>	pT2 Organ confined
<input type="checkbox"/>	pT2a Unilateral, one-half of one lobe or less
<input type="checkbox"/>	pT2b Unilateral, involving more than one-half of lobe but not both lobes
<input type="checkbox"/>	pT2c Bilateral disease
<input type="checkbox"/>	pT3 Extraprostatic extension
<input type="checkbox"/>	pT3a Extraprostatic extension ⁽²⁾
<input type="checkbox"/>	pT3b Seminal vesicle invasion
<input type="checkbox"/>	pT4 Invasion of bladder, rectum

Clinical	Primary Tumor (T)
<input type="checkbox"/>	TX Primary tumor cannot be assessed
<input type="checkbox"/>	T0 No evidence of primary tumor
<input type="checkbox"/>	T1 Clinically inapparent tumor neither palpable nor visible by imaging
<input type="checkbox"/>	T1a Tumor incidental histologic finding in 5% or less of tissue resected
<input type="checkbox"/>	T1b Tumor incidental histologic finding in more than 5% of tissue resected
<input type="checkbox"/>	T1c Tumor identified by needle biopsy (e.g., because of elevated PSA)
<input type="checkbox"/>	T2 Tumor confined within prostate ⁽³⁾
<input type="checkbox"/>	T2a Tumor involves one-half of one lobe or less
<input type="checkbox"/>	T2b Tumor involves more than one-half of one lobe but not both lobes
<input type="checkbox"/>	T2c Tumor involves both lobes
<input type="checkbox"/>	T3 Tumor extends through the prostate capsule ⁽⁴⁾
<input type="checkbox"/>	T3a Extracapsular extension (unilateral or bilateral)
<input type="checkbox"/>	T3b Tumor invades seminal vesicle(s)
<input type="checkbox"/>	T4 Tumor is fixed or invades adjacent structures other than seminal vesicles: bladder neck, external sphincter, rectum, levator muscles, and/or pelvic wall

Notes

1. There is no pathologic T1 classification.
2. Positive surgical margin should be indicated by an R1 descriptor (residual microscopic disease).
3. Tumor found in one or both lobes by needle biopsy, but not palpable or reliably visible by imaging, is classified as T1c.
4. Invasion into the prostatic apex or into (but not beyond) the prostatic capsule is classified not as T3, but as T2.
5. When more than one site of metastasis is present, the most advanced category is used. pM1c is most advanced.

Pathologic	Regional Lymph Nodes (N)
<input type="checkbox"/>	pNX Regional nodes not sampled
<input type="checkbox"/>	pN0 No positive regional nodes
<input type="checkbox"/>	pN1 Metastases in regional node(s)

Clinical	Regional Lymph Nodes (N)
<input type="checkbox"/>	NX Regional lymph nodes were not assessed
<input type="checkbox"/>	N0 No regional lymph node metastasis
<input type="checkbox"/>	N1 Metastasis in regional lymph node(s)

Clinical	Pathologic	Distant Metastasis (M) ⁽⁵⁾
<input type="checkbox"/>	<input type="checkbox"/>	MX Distant metastasis cannot be assessed (not evaluated by any modality)
<input type="checkbox"/>	<input type="checkbox"/>	M0 No distant metastasis
<input type="checkbox"/>	<input type="checkbox"/>	M1 Distant metastasis
<input type="checkbox"/>	<input type="checkbox"/>	M1a Non-regional lymph node(s)
<input type="checkbox"/>	<input type="checkbox"/>	M1b Bone(s)
<input type="checkbox"/>	<input type="checkbox"/>	M1c Other site(s) with or without bone disease.
Biopsy of metastatic site performed..... <input type="checkbox"/> Y..... <input type="checkbox"/> N		
Source of pathologic metastatic specimen _____		

(continued on reverse side)

Clinical	Pathological	Stage Grouping				
<input type="checkbox"/>	<input type="checkbox"/>	I	T1a	N0	M0	G1
<input type="checkbox"/>	<input type="checkbox"/>	II	T1a	N0	M0	G2, 3-4
			T1b	N0	M0	Any G
			T1c	N0	M0	Any G
			T1	N0	M0	Any G
			T2	N0	M0	Any G
<input type="checkbox"/>	<input type="checkbox"/>	III	T3	N0	M0	Any G
<input type="checkbox"/>	<input type="checkbox"/>	IV	T4	N0	M0	Any G
			Any T	N1	M0	Any G
			Any T	Any N	M1	Any G

Notes

Additional Descriptors

Lymphatic Vessel Invasion (L)

LX Lymphatic vessel invasion cannot be assessed

L0 No lymphatic vessel invasion

L1 Lymphatic vessel invasion

Venous Invasion (V)

VX Venous invasion cannot be assessed

V0 No venous invasion

V1 Microscopic venous invasion

V2 Macroscopic venous invasion

Histologic Grade (G)

Gleason score = ____ + ____

- ☐ GX Grade cannot be assessed
- ☐ G1 Well differentiated (slight anaplasia) (Gleason 2-4)
- ☐ G2 Moderately differentiated (moderate anaplasia) (Gleason 5-6)
- ☐ G3-4 Poorly differentiated/undifferentiated (marked anaplasia) (Gleason 7-10)

Residual Tumor (R)

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

Additional Descriptors

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.
- ☐ **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.

Prognostic Indicators

PSA

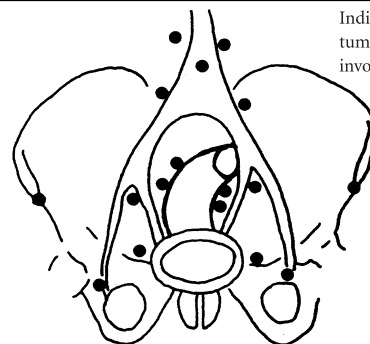
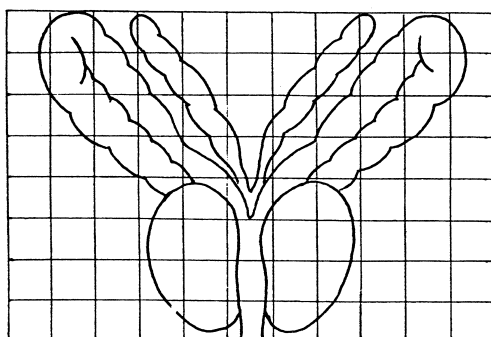
Gleason score

Ploidy

Molecular markers (e.g., p53, bcl-2)

ILLUSTRATION

This diagram is for use with the prostate diagram. Sketch in extent of tumor.



Indicate on diagram primary tumor and regional nodes involved.

Physician's Signature _____ Date _____