CLINICAL Extent of disease before any treatment	STAGE CATEGOR	PATHOLOGIC Extent of disease through completion of definitive surgery		
y clinical – staging completed after neoadjuvant therapy but before subsequent surgery	eoadjuvant therapy but TUMOR SIZE:			
□ TX □ T0 □ T1 □ T2 □ T3 □ T4a □ T4b	Primary tumor cannot be assessed No evidence of primary tumor Tumor 2 cm or less in greatest dimer extension* Tumor more than 2 cm but not more without extraparenchymal extens Tumor more than 4 cm and/or tumor extension* Moderately advanced disease Tumor invades skin, mandible, ea Very advanced disease Tumor invades skull base and/or carotid artery  *Note: Extraparenchymal extension i invasion of soft tissues. Micro	than 4 cm in greatest dimension ion* having extraparenchymal ar canal, and/or facial nerve	subsequent surgery  TX T0 T1 T2 T3 T4a T4b	
□ NX □ N0 □ N1 □ N2 □ N2a □ N2b □ N2c □ N3	Regional lymph nodes cannot be ass No regional lymph node metastasis Metastasis in a single ipsilateral ly dimension Metastasis in a single ipsilateral lymp than 6 cm in greatest dimension, none more than 6 cm in great contralateral lymph nodes, none Metastasis in a single ipsilateral lymp than 6 cm in greatest dimension Metastasis in multiple ipsilateral lym greatest dimension	mph node, 3 cm or less in greatest oh node, more than 3 cm but not more or in multiple ipsilateral lymph nodes, atest dimension, or in bilateral or more than 6 cm in greatest dimension oh node, more than 3 cm but not more mph nodes, none more than 6 cm in all lymph nodes, none more than 6 cm	□ NX □ N0 □ N1 □ N2 □ N2a □ N2b □ N2c □ N3	
□ M0 □ M1	DISTANT ME	TASTASIS (M) ); use clinical M to complete stage group)	□ M1	

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			CLINI	CAL						Рати	OLOGIC
GF	ROUP	Т	N	M			GR	OUP	Т	N	M
	I II III IIVA	T1 T2 T3 T1 T2 T3 T4a T4a T1 T2 T3 T4a T4b Any T Any T	N0 N0 N1 N1 N1 N0 N1 N2 N2 N2 N2 N2 N2 N2 N2	M0 M0 M0 M0 M0 M0 M0 M0 M0 M0 M0 M0 M0				I II III IIVA	T1 T2 T3 T1 T2 T3 T4a T4a T1 T2 T3 T4a T4b Any T	N0 N0 N1 N1 N1 N0 N1 N2 N2 N2 N2 N2 Any N	MO
_	100	Ally I	Ally N	IVI I			_	100	Ally I	Ally IN	IVI I
	Stage un	nknown						Stage un	known		
REQUIRED FOR STAGING: None  CLINICALLY SIGNIFICANT:  Size of Lymph Nodes  Extracapsular Extension from Lymph Nodes for Head & Neck  Head & Neck Lymph Nodes Levels I-III  Head & Neck Lymph Nodes Levels IV-V  Head & Neck Lymph Nodes Levels VI-VII  Other Lymph Nodes Group  Clinical Location of cervical nodes  Extracapsular spread (ECS) Clinical  Extracapsular spread (ECS) Pathologic			- - -				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 multimodalit therapy. The cTNM or pTNM category is identified by a "y" prefix.				
Hist	Gradi	ing system	also known as	overall grade)	G	rade					The ycTNM or ypTNM categorizes the extent of tumor actually present at the time of that examination. The "y"
	•	de system				Grade I or 1					categorization is not an estimate of tumor prior to multimodality therapy.
_	•	de system de system	de system is a	vailable		Grade II or 2 Grade III or 3 Grade IV or 4					r prefix indicates a recurrent tumor when staged after a disease-free interval and is identified by the "r" prefix: rTNM.
	•	3, 01 4 grad	20 0 J 0 10 11 10 1								prenx. i rivivi.

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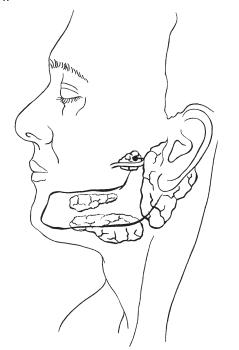
Additional Descriptors		General Notes (continued):
Lymphatic Vessel Invasion (L) and Venous Invasion (V) have been convasion (LVI) for collection by cancer registrars. The College of American should be used as the primary source. Other sources may be used in the significant given to positive results.	Pathologist (CAP) Checklist	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.
<ul> <li>□ Lymph-vascular Invasion Not Present (absent)/Not Identified</li> <li>□ Lymph-vascular Invasion Present/Identified</li> <li>□ Not Applicable</li> <li>□ Unknown/Indeterminate</li> </ul>		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
Residual Tumor (R) The absence or presence of residual tumor after treatment. In some cases with neoadjuvant therapy there will be residual tumor at the primary site at incomplete resection or local and regional disease that extends beyond the	fter treatment because of	procedure is not performed, the administered therapy no longer meets the definition of neoadjuvant therapy.
<ul> <li>□ RX Presence of residual tumor cannot be assessed</li> <li>□ R0 No residual tumor</li> <li>□ R1 Microscopic residual tumor</li> </ul>		
R2 Macroscopic residual tumor		
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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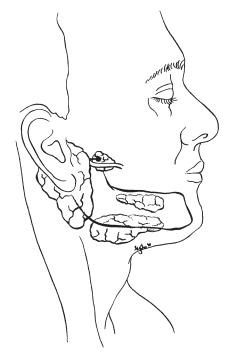
## Illustration

Indicate on diagram primary tumor and regional nodes involved.

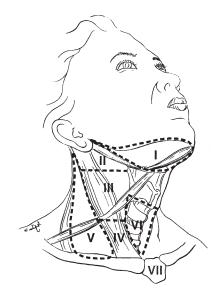
1.



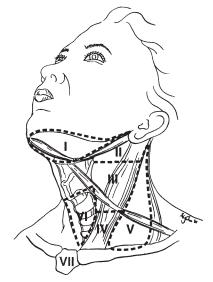
2.



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