SARCOMA OF THE ORBIT STAGING FORM

CLINICAL Extent of disease before any treatment	Stage Category I	DEFINITIONS	PATHOLOGIC Extent of disease through completion of definitive surgery		
y clinical – staging completed after neoadjuvant therapy but before subsequent surgery	Turren Ciari	LATERALITY: □ left □ right □ bilateral	y pathologic – staging completed after neoadjuvant therapy AND subsequent surgery		
□ TX □ T0 □ T1 □ T2 □ T3 □ T4	PRIMARY TUMOR (T) Primary tumor cannot be assessed No evidence of primary tumor Tumor 15 mm or less in greatest dimension Tumor more than 15 mm in greatest dimension without invasion of globe or bony wall Tumor of any size with invasion of orbital tissues and/or bony walls Tumor invasion of globe or periorbital structure, such as eyelids, temporal fossa, nasal cavity and paranasal sinuses, and/or central nervous system		□ TX □ T0 □ T1 □ T2 □ T3 □ T4		
□ NX □ N0 □ N1	REGIONAL LYMPH NODES (N) Regional lymph nodes cannot be assessed No regional lymph node metastasis Regional lymph node metastasis		□ NX □ N0 □ N1		
□ M0 □ M1	No distant metastasis (no pathologic M0; use cl Distant metastasis		□ M1		
Anatomic Stage • Prognostic Groups					
CLINICAL No stage grouping is presently recommended No stage grouping is presently recommended.					
PROGNOSTIC FACTORS (SITE-SPECIFIC FACTORS) REQUIRED FOR STAGING: None CLINICALLY SIGNIFICANT: None Histologic Grade (G) (also known as overall grade)			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.		
Grading system □ 2 grade system □ 3 grade system	Grade ☐ Grade I or 1 ☐ Grade II or 2		n suffix indicates the presence of multiple primary tumors in a single site and is recorded in parentheses: oT(m)NM.		
☐ 4 grade system☐ No 2, 3, or 4 grade s	☐ Grade III or 3 ystem is available ☐ Grade IV or 4		y prefix indicates those cases in which classification is performed during or following initial multimodality herapy. The cTNM or pTNM category is identified by a "y" prefix. The ycTNM or ypTNM categorizes he extent of tumor actually present at the time of that examination. The "y" categorization is not an estimate of umor prior to multimodality therapy.		
Hospital Name/Addri	ESS	PATIENT NAME/INFORMATION			

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SARCOMA OF THE ORBIT STAGING FORM

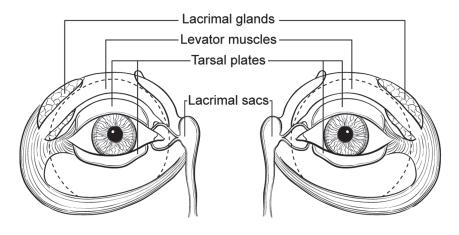
ADDITIONAL DESCRIPTORS Lymphatic Vessel Invasion (L) and Venous Invasion (V) have been considered in the control of the contr	n Pathologists' (CAP) Checklist absence of a Checklist. Priority is treated with surgery and/or fter treatment because of the limit of ability of resection.	
- National guidenies were used in treatment planning - Noon	Unier (describe).	
Hospital Name/Address	PATIENT NAME/INFORMATION	Time
MOSPITAL NAME/ADDRESS	PATIENT NAME/INFORMATION	

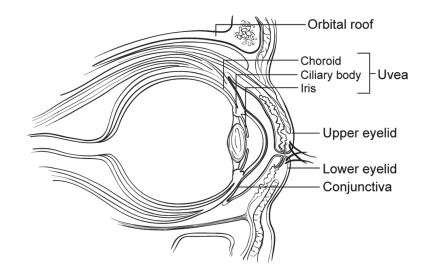
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SARCOMA OF THE ORBIT STAGING FORM

Illustration

Indicate on diagram primary tumor and regional nodes involved.





HOSPITAL NAME/ADDRESS	PATIENT NAME/INFORMATION	