


## CERVIX UTERI

<b>Hospital Name/Address</b>  <b>Presbyterian Hospital of Dallas</b> Texas Health Resources 8200 Walnut Hill Lane <input type="checkbox"/> Dallas, Texas 75231
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<b>Patient Name/Information</b> Patient name _____ <input type="checkbox"/> <input type="checkbox"/> Medical Record # _____ <input type="checkbox"/> <input type="checkbox"/> Date of Classification _____
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Type of Specimen \_\_\_\_\_

Histopathologic Type \_\_\_\_\_

Tumor Size \_\_\_\_\_

### DEFINITIONS

		<b>Primary Tumor (T)</b>		
Clinical	Pathologic	TNM	FIGO	
<input type="checkbox"/>	<input type="checkbox"/>	Categories	Stages	Definitions
<input type="checkbox"/>	<input type="checkbox"/>	TX		Primary tumor cannot be assessed
<input type="checkbox"/>	<input type="checkbox"/>	T0		No evidence of primary tumor
<input type="checkbox"/>	<input type="checkbox"/>	Tis	0	Carcinoma <i>in situ</i>
<input type="checkbox"/>	<input type="checkbox"/>	T1	I	Cervical carcinoma confined to uterus (extension to corpus should be disregarded)
<input type="checkbox"/>	<input type="checkbox"/>	T1a	IA	Invasive carcinoma diagnosed only by microscopy. <sup>(1)</sup> All macroscopically visible lesions – even with superficial invasion – are T1b/IB. Stromal invasion with a maximal 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"/>	<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"/>	<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"/>	<input type="checkbox"/>	T1b	IB	Clinically visible lesion confined to the cervix or microscopic lesion greater than T1a2/IA2
<input type="checkbox"/>	<input type="checkbox"/>	T1b1	IB1	Clinically visible lesion 4.0 cm or less in greatest dimension
<input type="checkbox"/>	<input type="checkbox"/>	T1b2	IB2	Clinically visible lesion more than 4.0 cm in greatest dimension
<input type="checkbox"/>	<input type="checkbox"/>	T2	II	Cervical carcinoma invades beyond uterus but not to pelvic wall or to lower third of vagina
<input type="checkbox"/>	<input type="checkbox"/>	T2a	IIA	Tumor without parametrial invasion
<input type="checkbox"/>	<input type="checkbox"/>	T2b	IIB	Tumor with parametrial invasion
<input type="checkbox"/>	<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"/>	<input type="checkbox"/>	T3a	IIIA	Tumor involves lower third of vagina, no extension to pelvic wall
<input type="checkbox"/>	<input type="checkbox"/>	T3b	IIIB	Tumor extends to pelvic wall and/or causes hydronephrosis or non-functioning kidney
<input type="checkbox"/>	<input type="checkbox"/>	T4	IVA	Tumor invades mucosa of bladder or rectum and/ or extends beyond true pelvis (bullous edema is not sufficient evidence to classify a tumor as T4)

### Notes

1. The depth of invasion is defined as the measurement of the tumor from the epithelial-stromal junction of the adjacent most superficial dermal papilla to the deepest point of invasion.

### Regional Lymph Nodes (N)

<input type="checkbox"/>	<input type="checkbox"/>	NX	Regional lymph nodes cannot be assessed
<input type="checkbox"/>	<input type="checkbox"/>	N0	No regional lymph node metastasis
<input type="checkbox"/>	<input type="checkbox"/>	N1	Regional lymph node metastasis

### Distant Metastasis (M)

<input type="checkbox"/>	<input type="checkbox"/>	MX	Distant metastasis cannot be assessed
<input type="checkbox"/>	<input type="checkbox"/>	M0	No distant metastasis
<input type="checkbox"/>	<input type="checkbox"/>	M1	IVB Distant metastasis
Biopsy of metastatic site performed..... <input type="checkbox"/> Y ..... <input type="checkbox"/> N			
Source of pathologic metastatic specimen _____			

<b>Clinical</b>	<b>Pathologic</b>	<b>Stage Grouping (AJCC/UICC/FIGO)</b>		
<input type="checkbox"/>	<input type="checkbox"/>	0	Tis	N0 M0
<input type="checkbox"/>	<input type="checkbox"/>	I	T1	N0 M0
<input type="checkbox"/>	<input type="checkbox"/>	IA	T1a	N0 M0
<input type="checkbox"/>	<input type="checkbox"/>	IA1	T1a1	N0 M0
<input type="checkbox"/>	<input type="checkbox"/>	IA2	T1a2	N0 M0
<input type="checkbox"/>	<input type="checkbox"/>	IB	T1b	N0 M0
<input type="checkbox"/>	<input type="checkbox"/>	IB1	T1b1	N0 M0
<input type="checkbox"/>	<input type="checkbox"/>	IB2	T1b2	N0 M0
<input type="checkbox"/>	<input type="checkbox"/>	II	T2	N0 M0
<input type="checkbox"/>	<input type="checkbox"/>	IIA	T2a	N0 M0
<input type="checkbox"/>	<input type="checkbox"/>	IIB	T2b	N0 M0
<input type="checkbox"/>	<input type="checkbox"/>	III	T3	N0 M0
<input type="checkbox"/>	<input type="checkbox"/>	IIIA	T3a	N0 M0
<input type="checkbox"/>	<input type="checkbox"/>	IIIB	T1	N1 M0
			T2	N1 M0
			T3a	N1 M0
			T3b	Any N M0
<input type="checkbox"/>	<input type="checkbox"/>	IVA	T4	Any N M0
<input type="checkbox"/>	<input type="checkbox"/>	IVB	Any T	Any N M1

**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)**

- GX Grade cannot be assessed
- G1 Well differentiated
- G2 Moderately differentiated
- G3 Poorly differentiated
- G4 Undifferentiated

**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.

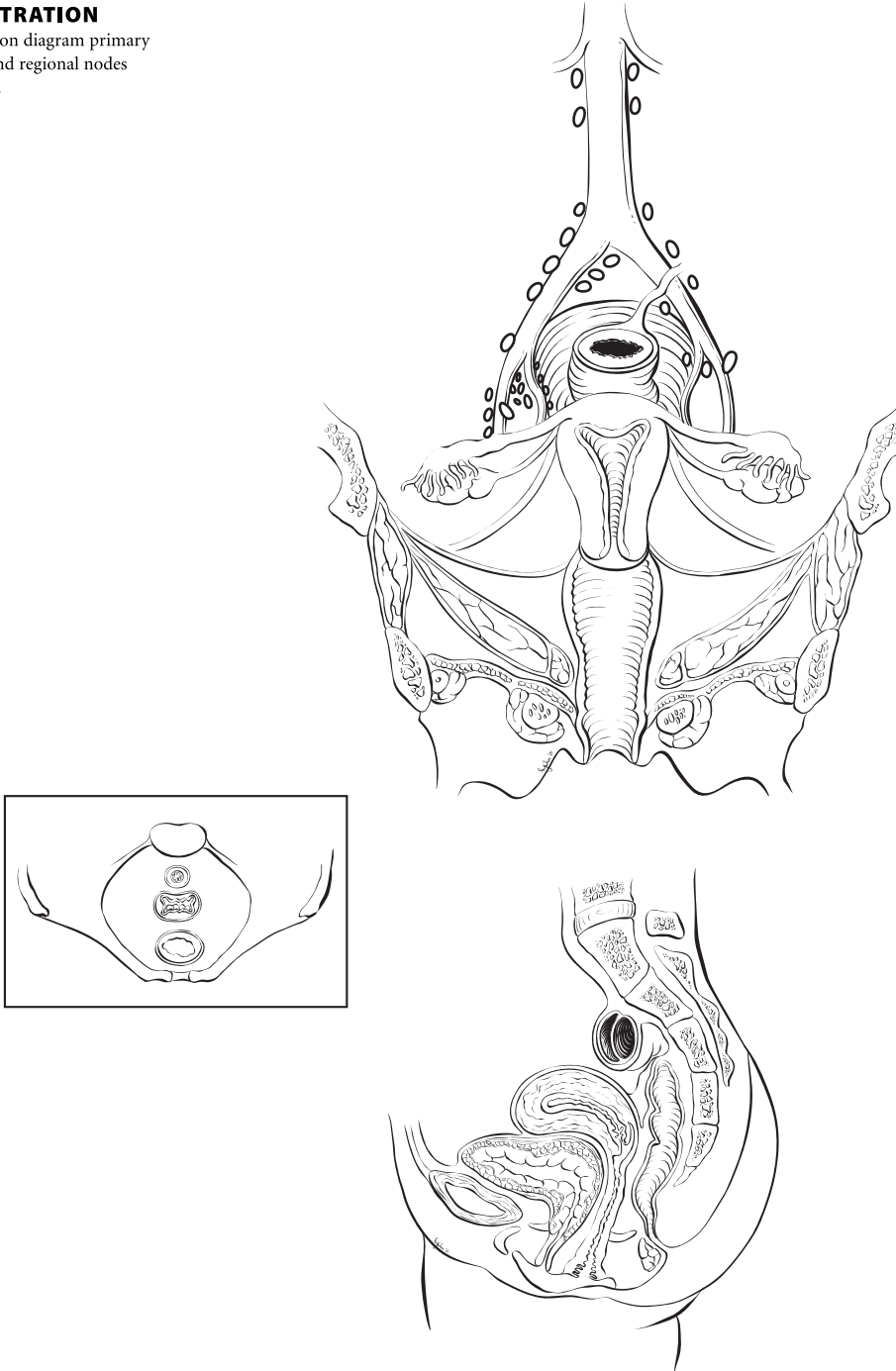
- m suffix** indicates the presence of multiple primary tumors in a single site and is recorded in parentheses: pT(m)NM.
- y prefix** indicates those cases in which classification is performed during or following initial multimodality therapy. The cTNM or pTNM category is identified by a “y” prefix. 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 (if applicable)**

# CERVIX UTERI

## ILLUSTRATION

Indicate on diagram primary tumor and regional nodes involved.



Staging Support Request:

Please fax staging form to my office for completion at fax # \_\_\_\_\_

Please assign staging form to Dr. \_\_\_\_\_

I am unable to stage at this time because workup is incomplete. Please return chart to me in 60 days.

Physician initials \_\_\_\_\_ Date \_\_\_\_\_

Staging Summary: T \_\_\_\_\_ N \_\_\_\_\_ M \_\_\_\_\_ Stage Group \_\_\_\_\_

Physician's Signature \_\_\_\_\_ Date \_\_\_\_\_