MALIGNANT MELANOMA OF THE CONJUNCTIVA

Hospital Name/Address

Presbyterian Hospital of Dallas
Texas Health Resources

8200 Walnut Hill Lane
Dallas, Texas 75231

Patient Name/Information

Patient name _____

Medical Record # _____

Date of Classification _____

Type of Specimen _____ Histopathologic Type _____

Tumor Size _____ Laterality: ☐ Bilateral ☐ Left ☐ Right

DEFINITIONS

Clinical	**Primary Tumor (T)**	
☐	TX	Primary tumor cannot be assessed
☐	T0	No evidence of primary tumor
☐	T1	Tumor of the bulbar conjunctiva
☐	T2	Tumor of the bulbar conjunctiva with corneal extension
☐	T3	Tumor extending into the conjunctival fornix, palpebral conjunctiva, or caruncle
☐	T4	Tumor invades the eyelid, globe, orbit, sinuses, or central nervous system

Pathologic	**Primary Tumor (T)**	
☐	pTX	Primary tumor cannot be assessed
☐	pT0	No evidence of primary tumor
☐	pT1	Tumor of the bulbar conjunctiva confined to the epithelium
☐	pT2	Tumor of the bulbar conjunctiva not more than 0.8 mm in thickness with invasion of the substantia propria
☐	pT3	Tumor of the bulbar conjunctiva more than 0.8 mm in thickness with invasion of the substantia propria or tumors involving palpebral or caruncular conjunctiva
☐	pT4	Tumor invades the eyelid, globe, orbit, sinuses, or central nervous system

Clinical	*Pathologic*	**Regional Lymph Nodes (N)**	
☐	☐	pNX	Regional lymph nodes cannot be assessed
☐	☐	pN0	No regional lymph node metastasis
☐	☐	pN1	Regional lymph node metastasis present

Distant Metastasis (M)

☐	☐	pMX	Distant metastasis cannot be assessed
☐	☐	pM0	No distant metastasis
☐	☐	pM1	Distant metastasis

Biopsy of metastatic site performed ..... ☐Y ..... ☐N

Source of pathologic metastatic specimen _____

Stage Grouping

No stage grouping is presently recommended.

Histologic Grade (G)

Histopathologic grade represents the origin of the primary tumor.

☐	GX	Origin cannot be assessed
☐	G0	Primary acquired melanosis without cellular atypia
☐	G1	Conjunctival nevus
☐	G2	Primary acquired melanosis with cellular atypia (epithelial disease only)
☐	G3	*De novo* malignant melanoma

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.

Notes

Additional Descriptors

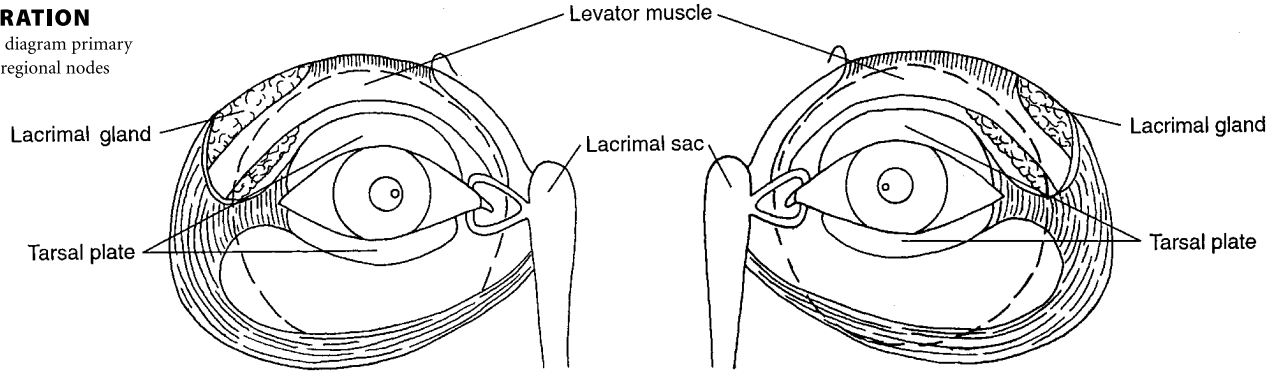
Lymphatic Vessel Invasion (L)
- LX Lymphatic vessel invasion cannot be assessed
- L0 No lymphatic vessel invasion
- L1 Lymphatic vessel invasion

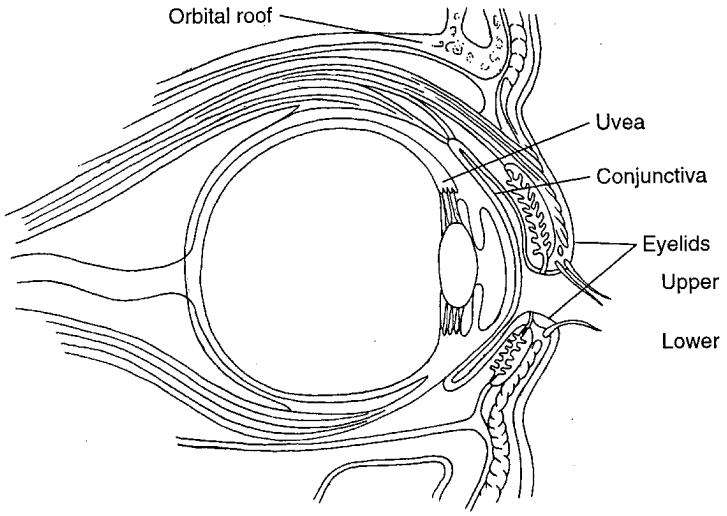
Venous Invasion (V)
- VX Venous invasion cannot be assessed
- V0 No venous invasion
- V1 Microscopic venous invasion
- V2 Macroscopic venous invasion

Prognostic Indicators (if applicable) _____

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: NA

Physician's Signature _____ Date_____