

8200 Walnut Hill Lane □
Dallas, Texas 75231

Patient name _____ □

□

Medical Record # _____ □

□

Date of Classification _____

The diagnosis for ulceration is □
made histologically and □
therefore a tumor with □
ulceration by histology □
would be given a pathologic □
stage.

Pathologic Stage Grouping ⁽¹⁾			
<input type="checkbox"/>	0	Tis	N0 M0
<input type="checkbox"/>	IA	T1a	N0 M0
<input type="checkbox"/>	IB	T1b	N0 M0
<input type="checkbox"/>	IIA	T2a	N0 M0
<input type="checkbox"/>	IIB	T2b	N0 M0
<input type="checkbox"/>	IIC	T3a	N0 M0
<input type="checkbox"/>	IIB	T3b	N0 M0
<input type="checkbox"/>	IIC	T4a	N0 M0
<input type="checkbox"/>	IIC	T4b	N0 M0
<input type="checkbox"/>	IIIA	T1-4a	N1a M0
<input type="checkbox"/>	IIIB	T1-4a	N2a M0
<input type="checkbox"/>	IIIB	T1-4b	N1a M0
<input type="checkbox"/>	IIIB	T1-4b	N2a M0
<input type="checkbox"/>	IIIB	T1-4a	N1b M0
<input type="checkbox"/>	IIIB	T1-4a	N2b M0
<input type="checkbox"/>	IIIC	T1-4a/b	N2c M0
<input type="checkbox"/>	IIIC	T1-4b	N1b M0
<input type="checkbox"/>	IIIC	T1-4b	N2b M0
<input type="checkbox"/>	IV	Any T	N3 M0
<input type="checkbox"/>	IV	Any T	Any N M1

Clinical Stage Grouping ⁽²⁾			
<input type="checkbox"/>	0	Tis	N0 M0
<input type="checkbox"/>	IA	T1a	N0 M0
<input type="checkbox"/>	IB	T1b	N0 M0
<input type="checkbox"/>	IIA	T2a	N0 M0
<input type="checkbox"/>	IIB	T2b	N0 M0
<input type="checkbox"/>	IIB	T3a	N0 M0
<input type="checkbox"/>	IIB	T3b	N0 M0
<input type="checkbox"/>	IIB	T4a	N0 M0
<input type="checkbox"/>	IIC	T4b	N0 M0
<input type="checkbox"/>	III	Any T	N1 M0
<input type="checkbox"/>	III	Any T	N2 M0
<input type="checkbox"/>	III	Any T	N3 M0
<input type="checkbox"/>	IV	Any T	Any N M1

Notes

1. Pathologic staging includes microstaging of the primary melanoma and pathologic information about the regional lymph nodes after partial or complete lymphadenectomy. Pathologic Stage 0 or Stage IA patients are the exception; they do not require pathological evaluation of their lymph nodes.
2. Clinical staging includes microstaging of the primary melanoma and clinical/radiologic evaluation for metastases. By convention, it should be used after complete excision.

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

Additional Descriptors

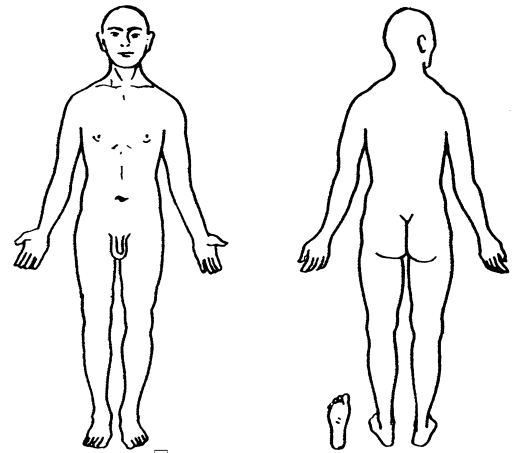
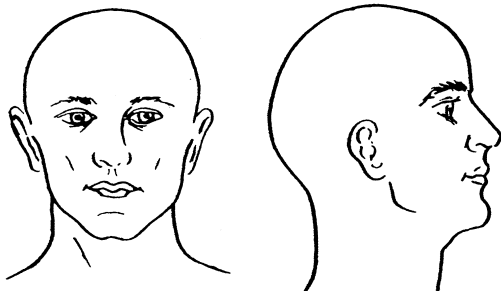
For identification of special cases of TNM or pTNM classifications, the "m" suffix and "y," "r," and "a" prefixes are used. Although they do not affect the stage grouping, they indicate cases needing separate analysis.

- 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) _____

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's initials _____ Date _____

Staging Summary: T _____ N _____ M _____ Stage Group _____

Physician's Signature _____ Date _____