


GESTATIONAL TROPHOBLASTIC TUMORS

Hospital Name/Address
 <div style="display: inline-block; vertical-align: middle; margin-left: 10px;"> Presbyterian Hospital of Dallas <small>Texas Health Resources</small> </div>
8200 Walnut Hill Lane <input type="checkbox"/> Dallas, Texas 75231

Patient Name/Information
Patient name _____ <input type="checkbox"/> <input type="checkbox"/>
Medical Record # _____ <input type="checkbox"/> <input type="checkbox"/>
Date of Classification _____

Type of Specimen _____

Histopathologic Type _____

Tumor Size _____

DEFINITIONS

		Primary Tumor (T)⁽¹⁾		
<i>Clinical</i>	<i>Pathologic</i>	<i>TNM*</i>	<i>FIGO</i>	
<input type="checkbox"/>	<input type="checkbox"/>	<i>Categories</i>	<i>Stages</i>	
<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"/>	T1	I	Disease limited to uterus
<input type="checkbox"/>	<input type="checkbox"/>	T2	II	Disease outside of uterus but limited to genital structures (ovary, tube, vagina, broad ligaments)

Notes

1. See prognostic indicator section for substage definitions.
2. See prognostic indicators for substage grouping

		Distant Metastasis (M)		
<input type="checkbox"/>	<input type="checkbox"/>	<i>MX</i>		
<input type="checkbox"/>	<input type="checkbox"/>	MX		Metastasis cannot be assessed
<input type="checkbox"/>	<input type="checkbox"/>	M0		No distant metastasis
<input type="checkbox"/>	<input type="checkbox"/>	M1		Distant metastasis
<input type="checkbox"/>	<input type="checkbox"/>	M1a	III	Lung metastasis
<input type="checkbox"/>	<input type="checkbox"/>	M1b	IV	All other distant metastasis

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

Source of pathologic metastatic specimen _____

*Note: There is no regional nodal staging for this tumor.

Stage Grouping⁽²⁾			
<input type="checkbox"/>	<input type="checkbox"/>	<i>Stage</i>	<i>T M Risk Factors</i>
<input type="checkbox"/>	<input type="checkbox"/>	I	T1 M0 Unknown
<input type="checkbox"/>	<input type="checkbox"/>	IA	T1 M0 Low risk
<input type="checkbox"/>	<input type="checkbox"/>	IB	T1 M0 High risk
<input type="checkbox"/>	<input type="checkbox"/>	II	T2 M0 Unknown
<input type="checkbox"/>	<input type="checkbox"/>	IIA	T2 M0 Low risk
<input type="checkbox"/>	<input type="checkbox"/>	IIB	T2 M0 High risk
<input type="checkbox"/>	<input type="checkbox"/>	III	Any T M1a Unknown
<input type="checkbox"/>	<input type="checkbox"/>	IIIA	Any T M1a Low risk
<input type="checkbox"/>	<input type="checkbox"/>	IIIB	Any T M1a High risk
<input type="checkbox"/>	<input type="checkbox"/>	IV	Any T M1b Unknown
<input type="checkbox"/>	<input type="checkbox"/>	IVA	Any T M1b Low risk
<input type="checkbox"/>	<input type="checkbox"/>	IVB	Any T M1b High risk

Histopathologic Type

- Hydatidiform mole
 - Complete
 - Partial
- Invasive hydatidiform mole
- Choriocarcinoma
- Placental site trophoblastic tumors

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 Scoring Index

<i>Prognostic Factor</i>	<i>Risk Score</i>			
	0	1	2	4
Age	<40	≥40		
Antecedent Pregnancy	H. mole	Abortion	Term Pregnancy	
Interval months from index pregnancy	<4	4-<7	7-12	>12
Pretreatment hCG (IU/ml)	<10 ³	≥10 ³ -<10 ⁴	10 ⁴ -<10 ⁵	≥10 ⁵
Largest tumor size including uterus	<3cm	3-<5cm	≥5cm	
Site of metastases	Lung	Spleen, kidney	Gastrointestinal tract	Brain, liver
Number of metastases identified		1-4	5-8	>8
Previous failed chemotherapy			Single drug	Two or more drugs
<i>Total Score</i>				

Low Risk is a score of 7 or less. *High risk* is a score of 8 or greater.

Notes

Additional Descriptors

Lymphatic Vessel Invasion (L)

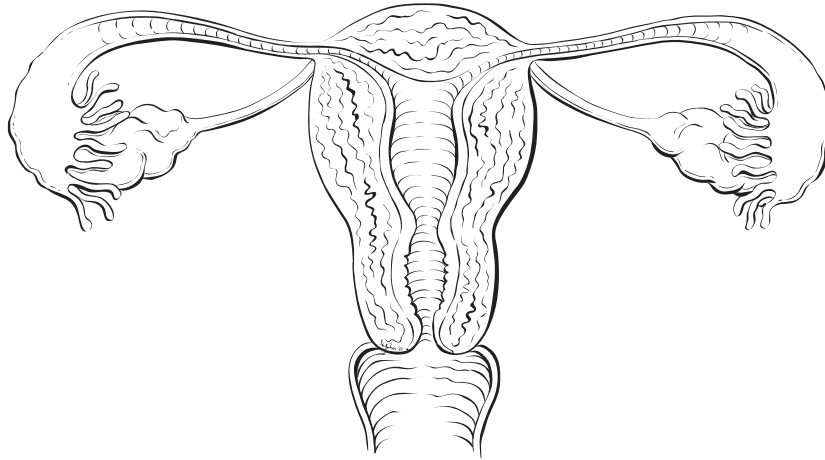
- LX Lymphatic vessel invasion cannot be assessed
- L0 No lymphatic vessel invasion
- L1 Lymphatic vessel invasion

Venous Invasion (V)

- VX Venous invasion cannot be assessed
- V0 No venous invasion
- V1 Microscopic venous invasion
- V2 Macroscopic venous invasion

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 _____