


MALIGNANT MELANOMA OF THE CONJUNCTIVA

 <div style="display: inline-block; vertical-align: middle; margin-left: 10px;"> <p style="margin: 0;">Hospital Name/Address</p> <p style="margin: 0;">Presbyterian Hospital of Dallas</p> <p style="margin: 0; font-size: small;">Texas Health Resources</p> <p style="margin: 0;">8200 Walnut Hill Lane <input type="checkbox"/></p> <p style="margin: 0;">Dallas, Texas 75231</p> </div>
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<p style="margin: 0;">Patient Name/Information</p> <p style="margin: 0;">Patient name _____ <input type="checkbox"/></p> <p style="margin: 0;"><input type="checkbox"/></p> <p style="margin: 0;">Medical Record # _____ <input type="checkbox"/></p> <p style="margin: 0;"><input type="checkbox"/></p> <p style="margin: 0;">Date of Classification _____</p>
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Type of Specimen _____
 Tumor Size _____

Histopathologic Type _____
 Laterality: Bilateral Left Right

DEFINITIONS

<i>Clinical</i>	Primary Tumor (T)	
<input type="checkbox"/>	TX	Primary tumor cannot be assessed
<input type="checkbox"/>	T0	No evidence of primary tumor
<input type="checkbox"/>	T1	Tumor of the bulbar conjunctiva
<input type="checkbox"/>	T2	Tumor of the bulbar conjunctiva with corneal extension
<input type="checkbox"/>	T3	Tumor extending into the conjunctival fornix, palpebral conjunctiva, or caruncle
<input type="checkbox"/>	T4	Tumor invades the eyelid, globe, orbit, sinuses, or central nervous system

<i>Pathologic</i>	Primary Tumor (T)	
<input type="checkbox"/>	pTX	Primary tumor cannot be assessed
<input type="checkbox"/>	pT0	No evidence of primary tumor
<input type="checkbox"/>	pT1	Tumor of the bulbar conjunctiva confined to the epithelium
<input type="checkbox"/>	pT2	Tumor of the bulbar conjunctiva not more than 0.8 mm in thickness with invasion of the substantia propria
<input type="checkbox"/>	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
<input type="checkbox"/>	pT4	Tumor invades the eyelid, globe, orbit, sinuses, or central nervous system

<i>Clinical</i>	<i>Pathologic</i>	Regional Lymph Nodes (N)	
<input type="checkbox"/>	<input type="checkbox"/>	pNX	Regional lymph nodes cannot be assessed
<input type="checkbox"/>	<input type="checkbox"/>	pN0	No regional lymph node metastasis
<input type="checkbox"/>	<input type="checkbox"/>	pN1	Regional lymph node metastasis present

<i>Clinical</i>	<i>Pathologic</i>	Distant Metastasis (M)	
<input type="checkbox"/>	<input type="checkbox"/>	pMX	Distant metastasis cannot be assessed
<input type="checkbox"/>	<input type="checkbox"/>	pM0	No distant metastasis
<input type="checkbox"/>	<input type="checkbox"/>	pM1	Distant metastasis
Bopsy of metastatic site performed <input type="checkbox"/> Y <input type="checkbox"/> 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

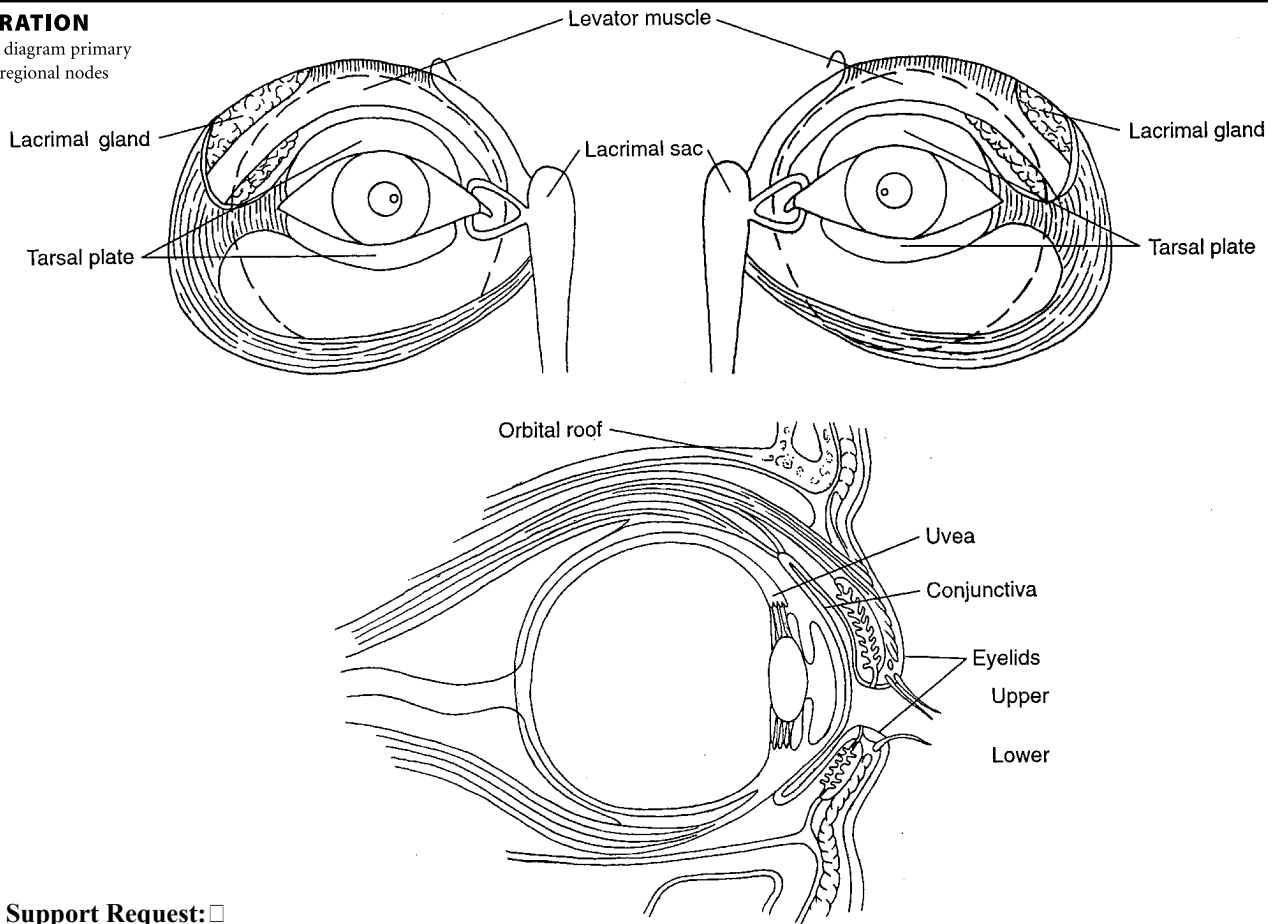
Additional Descriptors

- 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 _____