

AJCC Staging

Determine if case is eligible for clinical and/or pathologic staging		
	Clinical	Pathologic
Purpose	Used to determine treatment	Used to provide prognosis, outcomes and determine if adjuvant treatment is needed
Rules for Classification	<ul style="list-style-type: none"> • Must have cancer diagnosis and an exam • Workup could include: <ul style="list-style-type: none"> ○ Physical exam ○ Diagnostic biopsy ○ Imaging reports ○ Scopes ○ Exploratory surgery without resection ○ Endoscopy, colonoscopy • Statement that “rest of exam negative” is enough to consider LNs and mets as negative 	<ul style="list-style-type: none"> • Requires excision of primary tumor or organ • Exceptions <ul style="list-style-type: none"> ○ Pathologic confirmation of metastatic disease ○ Pathologic evidence of highest T and highest N • Removal of at least 1 regional LN • Includes what is known from clinical stage and adds operative findings and surgical resection path report <p>Three roads to pathologic stage</p> <ol style="list-style-type: none"> 1. Surgical resection of primary tumor and at removal of at least 1 LN <ul style="list-style-type: none"> ○ LN exception for in situ tumors, additional exceptions for AJCC 8th edition 2. Pathologic confirmation of BOTH highest T and highest N categories 3. Pathologic evidence of M1 disease
Timing	<ul style="list-style-type: none"> • Starts with cancer diagnosis • Ends when definitive treatment starts • Or, within 4 months of diagnosis, whichever is <i>shorter</i> 	<ul style="list-style-type: none"> • Starts with cancer diagnosis • Ends with completion of first course definitive surgery • Or, within 4 months of date of diagnosis, whichever is <i>longer</i>
Common errors	<ul style="list-style-type: none"> • Assigning clinical stage when cancer was incidental finding at surgery. Leave TNM fields blank and assign Stage Group 99 • Not assigning T when information is available in physician statement or imaging report 	<ul style="list-style-type: none"> • Assigning pathologic TNM or stage group with incorrect use of clinical values and X value

Understand the use of Blank and X

Blank

Blank = info not available OR doesn't meet staging criteria

- Valid only for TNM categories
- Use when you know staging was done, but info is not in chart
- don't default to X

X

X = cannot be assessed

- Valid only with T and N categories
- Not a default
- Not equivalent to unknown

Clinical

- cTX – patient not examined, no imaging or workup
- cT blank – no access to information when abstracting case
- cT blank – incidental finding at surgery

Pathologic

- pTX – resection performed, but the specimen was lost or destroyed
- pT blank – no surgical resection
- pT blank – no access to information when abstracting case

Have the rules for classification for T been met?

Yes

T and N will not be blank
Must be valid value or X

Data Item	Value
Clinical T	cT2
Clinical N	cN0
Clinical M	cM0
Clinical Stage	2
Pathologic T	pT2
Pathologic N	pNX
Pathologic M	cM0
Pathologic Stage	99

No

T and N will be blank

Data Item	Value
Clinical T	
Clinical N	
Clinical M	
Clinical Stage	99
Pathologic T	
Pathologic N	
Pathologic M	
Pathologic Stage	99