**LUNG STAGING DIAGRAM**

| T1a (<2cm) | IA | IA | IA | IB |
| T1b (>2-3cm) | IA | IA | IA | IB |
| T2a (>3-5cm) | IB | IA | IA | IB |
| T2b (>5-7cm) | IA | IB | IA | IB |
| T3 (>7cm) Invasion | IB | IA | IA | IB |
| Same lobe nodules | IB | IA | IA | IB |
| T4 Extension | IA | IA | IB | IB |
| Ipsilateral lung | IA | IA | IB | IB |
| M1a Pleural effusion | IV | IV | IV | IV |
| M1b Distant lung | IV | IV | IV | IV |

**TNM 2009**

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**TNM 2009 Pathological**

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**Small Cell Clinical 1995**

- Limited □
- Extensive □

**ECOG**

| □ 0 | □ 1 | □ 2 | □ 3 | □ 4 |

**Weight loss within 3 months prior to diagnosis**

| □ <5% | □ 5-10% | □ >10% |

**Smoking status**

| □ Never (<100 cig/life) | □ Former □ Current/quit<1yr |

**Pack years**

**Brain imaging within 3 months of diagnosis**

| □ Yes | □ No |

**PET within 3 months of diagnosis**

| □ Yes | □ No |

**Metastasis (check all that apply)**

| □ Lung | □ Bone | □ Liver |
| □ Brain | □ Distant nodes |
| □ Pleura | □ Peritoneum |
| □ Adrenal | □ Skin | □ Other |

**Site**

- □ RUL
- □ RML
- □ RLL
- □ R hilum
- □ LUL
- □ LLL
- □ L hilum
- □ Unknown

**Primary tumor resected**

| □ Yes | □ No | □ Unknown |

**Post-operative residual tumor**

- □ R0
- □ R1(Microscopic)
- □ R2(Macroscopic)
- □ Unknown

**Max tumor size (mm)**

**Type**

- □ SCLC
- □ NSCLC
- □ Mixed

**Histology**

**Grade**

- □ Well
- □ Moderately
- □ Poorly
- □ Undifferentiated
- □ Unknown

Completed by: ____________________________ Date: ________________

Diagnosis/Stage amended to: ____________________________________________

Reason: ____________________________________________________________

By: ____________________________ Date: ________________

NOTIFY DATA QUALITY AND REGISTRY IF DIAGNOSIS/STAGE IS AMENDED
**Proposed Definitions for T, N, and M Descriptors**

**T (Primary Tumor)**

- **TX**: Primary tumor cannot be assessed, or tumor proven by the presence of malignant cells in sputum or bronchial washings but not visualized by imaging or bronchoscopy
- **T0**: No evidence of primary tumor
- **Tis**: Carcinoma in situ
- **T1**: Tumor ≤3 cm in greatest dimension, surrounded by lung or visceral pleura, without bronchoscopic evidence of invasion more proximal than the lobar bronchus (i.e., not in the main bronchus)
  - **T1a**: Tumor ≤2 cm in greatest dimension
  - **T1b**: Tumor >2 cm but ≤3 cm in greatest dimension
- **T2**: Tumor >3 cm but ≤7 cm or tumor with any of the following features (T2 tumors with these features are classified **T2a** if <5 cm)
  - Involves main bronchus, >2 cm distal to the carina
  - Invades visceral pleura
  - Associated with atelectasis or obstructive pneumonitis that extends to the hilar region but does not involve the entire lung
  - **T2a**: Tumor >3 cm but ≤5 cm in greatest dimension
  - **T2b**: Tumor >5 cm but ≤7 cm in greatest dimension
- **T3**: Tumor >7 cm or one that directly invades any of the following: chest wall (including superior sulcus tumors), diaphragm, phrenic nerve, mediastinal pleura, parietal pericardium; or tumor in the main bronchus <2 cm distal to the carina but without involvement of the carina; or associated atelectasis or obstructive pneumonitis of the entire lung or separate tumor nodule(s) in the same lobe
- **T4**: Tumor of any size that invades any of the following: mediastinum, heart, great vessels, trachea, recurrent laryngeal nerve, esophagus, vertebral body, carina; separate tumor nodule(s) in a different ipsilateral lobe

**N (Regional Lymph Nodes)**

- **NX**: Regional lymph nodes cannot be assessed
- **N0**: No regional lymph node metastasis
- **N1**: Metastasis in ipsilateral peribronchial and/or ipsilateral hilar lymph nodes and intrapulmonary nodes, including involvement by direct extension
- **N2**: Metastasis in ipsilateral mediastinal and/or subcarinal lymph node(s)
- **N3**: Metastasis in contralateral mediastinal, hilar, ipsilateral or contralateral scalene, or supraclavicular lymph node(s)

**M (Distant Metastasis)**

- **MX**: Distant metastasis cannot be assessed
- **M0**: No distant metastasis
- **M1**: Distant metastasis
  - **M1a**: Separate tumor nodule(s) in a contralateral lobe; tumor with pleural nodules or malignant pleural (or pericardial) effusion
  - **M1b**: Distant metastasis

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*The uncommon superficial spreading tumor of any size with its invasive component limited to the bronchial wall, which may extend proximally to the main bronchus, is also classified as T1*

*Most pleural (and pericardial) effusions with lung cancer are due to tumor. In a few patients, however, multiple cytopathologic examinations of pleural (pericardial) fluid are negative for tumor, and the fluid is nonbloody and is not an exudate. Where these elements and clinical judgment dictate that the effusion is not related to the tumor, the effusion should be excluded as a staging element and the patient should be classified as T1, T2, T3, or T4.*