<table>
<thead>
<tr>
<th>New</th>
<th>Recurrent Disease</th>
<th>Referred for Follow up</th>
</tr>
</thead>
<tbody>
<tr>
<td>Referred as part of definitive treatment (initial treatment of disease).</td>
<td>Definitive treatment already received.</td>
<td>Previously treated and followed elsewhere before referral.</td>
</tr>
</tbody>
</table>

**TNM 2009**

<table>
<thead>
<tr>
<th>Clinical</th>
<th>Pathological</th>
</tr>
</thead>
<tbody>
<tr>
<td>T</td>
<td>T</td>
</tr>
<tr>
<td>N</td>
<td>N</td>
</tr>
<tr>
<td>X</td>
<td>X</td>
</tr>
<tr>
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<td>0</td>
</tr>
<tr>
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<td>1</td>
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<tr>
<td>3</td>
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<tr>
<td>4</td>
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</table>

**ECOG**

<table>
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<th>0</th>
<th>1</th>
<th>2</th>
<th>3</th>
<th>4</th>
</tr>
</thead>
</table>

**Smoking Status**

<table>
<thead>
<tr>
<th>Never (&lt;100 cig/life)</th>
<th>Former</th>
<th>Quit&lt;1year</th>
<th>Current</th>
</tr>
</thead>
</table>

**Metastatic Sites**

- Adrenal
- Bone
- Brain
- Distant Nodes
- Liver
- Lung
- Skin
- Other: ______________________

**Primary Laterality**

- Right
- Left
- Bilateral

**Previous Treatment**

- Surgery
- Chemotherapy
- Radiation
- Nil

**Pack Years**

_____________________________

Completed by: ___________________________ Date: ________________ (dd/mm/yy)

Diagnosis/Stage Amended to: ___________________________

Reason: ___________________________

By: ___________________________ Date: ________________ (dd/mm/yy)

NOTIFY DATA QUALITY & REGISTRY IF STAGE/DIAGNOSIS IS AMENDED
NASOPHARYNX
AJCC 7th Edition for Diagnosis Date > 01 January 2010
Definitions for T, N, and M Descriptors

PRIMARY TUMOR (T)
TX Primary tumor cannot be assessed
T0 No evidence of primary tumor
Tis Carcinoma in situ
T1 Tumor confined to the nasopharynx, or extends to oropharynx and/or nasal cavity without parapharyngeal extension*
T2 Tumor with parapharyngeal extension*
T3 Tumor involves bony structures of skull base and/or paranasal sinuses
T4 Tumor with intracranial extension and/or involvement of cranial nerves, hypopharynx, orbit, or with extension to the infratemporal fossa/masticator space

* Parapharyngeal extension denotes posterolateral infiltration of tumor.

REGIONAL LYMPH NODES (N)
NX Regional lymph nodes cannot be assessed
N0 No regional lymph node metastasis
N1 Unilateral metastasis in lymph node(s), 6cm or less in greatest dimension, above the supraclavicular fossa and/or unilateral or bilateral, retropharyngeal lymph nodes, 6cm or less, in greatest dimension*
N2 Bilateral metastasis in lymph node(s), 6cm or less in greatest dimension, above the supraclavicular fossa*
N3 Metastasis in a lymph node(s)* >6cm and/or extension to supraclavicular fossa
N3a Greater than 6cm in dimension
N3b Extension to the supraclavicular fossa**

* Midline nodes are considered ipsilateral nodes.

**Supraclavicular zone or fossa is relevant to the staging of nasopharyngeal carcinoma and is the triangular region originally described by Ho. It is defined by three points: (1) the superior margin of the sternal end of the clavicle, (2) the superior margin of the lateral end of the clavicle, (3) the point where the neck meets the shoulder. Note that this would include caudal portions of Levels IV and VB. All cases with lymph nodes (whole or part) in the fossa are considered N3b.

DISTANT METASTASIS (M)
M0 No distant metastasis (no pathologic M0; use clinical M to complete stage group)
M1 Distant metastasis