

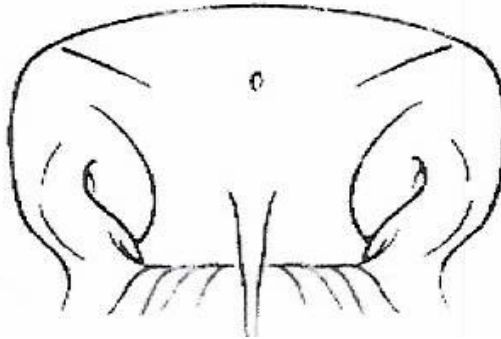


BC Cancer Agency

CARE + RESEARCH

An agency of the Provincial Health Services Authority

NASOPHARYNX STAGING DIAGRAM



<input type="checkbox"/> New	<input type="checkbox"/> Recurrent Disease	<input type="checkbox"/> Referred for Follow up
Referred as part of definitive treatment (initial treatment of disease).	Definitive treatment already received. Referred at recurrence.	Previously treated and followed elsewhere before referral.

TNM 2009 Clinical	T	X	0	<i>is</i>	1	2	3	4
	N	X	0	1	2	3a	3b	
	M		0	1				
TNM 2009 Pathological	T	X	0	<i>is</i>	1	2	3	4
	N	X	0	1	2	3a	3b	
	M		0	1				

Primary Laterality	<input type="checkbox"/> Right	<input type="checkbox"/> Left	<input type="checkbox"/> Bilateral
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Previous Treatment	<input type="checkbox"/> Surgery <input type="checkbox"/> Chemotherapy <input type="checkbox"/> Radiation <input type="checkbox"/> Nil	ECOG	<input type="checkbox"/> 0 <input type="checkbox"/> 1 <input type="checkbox"/> 2 <input type="checkbox"/> 3 <input type="checkbox"/> 4
Smoking Status	<input type="checkbox"/> Never (<100 cig/life) <input type="checkbox"/> Former <input type="checkbox"/> Quit <1 year <input type="checkbox"/> Current	Metastatic Sites <i>(check all that apply)</i>	<input type="checkbox"/> Adrenal <input type="checkbox"/> Bone <input type="checkbox"/> Brain <input type="checkbox"/> Distant Nodes <input type="checkbox"/> Liver <input type="checkbox"/> Lung <input type="checkbox"/> Skin <input type="checkbox"/> Other: _____
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 \geq 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 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