PARANASAL SINUSES, ANTRUM, ETHMOID SINUS & NASAL CAVITY STAGING DIAGRAM

**FORM #TH-44 Revised September 2011**

- New
- Recurrent Disease
- Referred for Follow up

<table>
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<tr>
<th>TNM 2009</th>
<th>Clinical</th>
<th>Pathological</th>
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**Site**
- (Nasal Cavity)
  - Floor
  - Septum
  - Lateral Wall
  - Septum
  - Vestibule
- (Paranasal Sinus)
  - Ethmoid
  - Maxilla
  - Frontal
  - Sphenoid

**Laterality (primary)**
- Right
- Left

**Previous Treatment**
- Surgery
- Chemotherapy
- Radiation
- Nil

**Smoking Status**
- Never (<100 cig/life)
- Former
- Former/Unk Pack Years
- Current/Quit <1 year
- Current/Unk Pack Years
- Unknown

**ECOG**
- 0
- 1
- 2
- 3
- 4

**Pack Years**

**Metastatic Sites (check all that apply)**
- Lung
- Bone
- Liver
- Brain
- Distant Nodes
- Pleura
- Peritoneum
- Adrenals
- Skin
- Other:

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**
PARanasal Sinuses, Antrum, Ethmoid Sinus & Nasal Cavity
Staging Diagram
AJCC 7th Edition for Diagnosis Date ≥ 01 January 2010
Definitions for T, N, and M Descriptors

primary Tumour (T)

TX Primary tumour cannot be assessed
T0 No evidence of primary tumour
Tis Carcinoma in situ

Maxillary Sinus

T1 Tumour limited to maxillary sinus mucosa with no erosion or destruction of bone
T2 Tumour causing bone erosion or destruction including extension into the hard palate and/or middle nasal meatus, except extension to posterior wall of maxillary sinus and pterygoid plates
T3 Tumour invades any of the following: bone of the posterior wall of maxillary sinus, subcutaneous tissues, floor or medial wall of orbit, pterygoid fossa, ethmoid sinuses
T4a Moderately advanced local disease. Tumour invades anterior orbital contents, skin of cheek, pterygoid plates, infratemporal fossa, cribiform plate, sphenoid or frontal sinuses
T4b Very advanced local disease. Tumour invades any of the following: orbital apex, dura, brain, middle cranial fossa, cranial nerves other than maxillary division of trigeminal nerve (V2), nasopharynx, or clivus

Nasal Cavity and Ethmoid Sinus

T1 Tumour restricted to any one subsite, with or without bony invasion
T2 Tumour invading two subsites in a single region or extending to involve an adjacent region within the nasoethmoidal complex, with or without bony invasion
T3 Tumour extends to invade the medial wall or floor of the orbit, maxillary sinus, palate, or cribiform plate
T4a Moderately advanced local disease. Tumour invades any of the following: anterior orbital contents, skin of nose or cheek, minimal extension to anterior cranial fossa, pterygoid plates, sphenoid or frontal sinuses
T4b Very advanced local disease. Tumour invades any of the following: orbital apex, dura, brain, middle cranial fossa, cranial nerves other than (V2), nasopharynx, or clivus

Regional Lymph Nodes (N)

NX Regional lymph nodes cannot be assessed
N0 No regional lymph node metastasis
N1 Metastasis in a single ipsilateral lymph node, 3cm or less in greatest dimension
N2 Metastasis in a single ipsilateral lymph node, more than 3cm but not more than 6cm in greatest dimension, or in multiple ipsilateral lymph nodes, none more than 6cm in greatest dimension, or in bilateral or contralateral lymph nodes, none more than 6cm in greatest dimension
N2a Metastasis in a single ipsilateral lymph node, more than 3cm but not more than 6cm in greatest dimension
N2b Metastasis in multiple ipsilateral lymph nodes, none more than 6cm in greatest dimension
N2c Metastasis in bilateral or contralateral lymph nodes, none more than 6cm in greatest dimension
N3 Metastasis in a lymph node, more than 6cm in greatest dimension

Distant Metastasis (M)

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