

EpiglottisAnterior
Anterior Surface of Epiglottis

C10.1

C10.1 Anterior surface of epiglottis

Note: AJCC includes lingual (anterior) surface of epiglottis (C10.1) with larynx. SEER Extent of Disease included it with oropharynx.

EpiglottisAnterior

CS Tumor Size

See Standard Table

EpiglottisAnterior

CS Extension

Note 1: Use code 300 for localized tumor ONLY if no information is available to assign codes 100, 200, or 310.

Note 2: Use code 355, 435, 725, 810, or 815 if the physician's assignment of T category is the ONLY information available about the extent of the tumor.

Code	Description	TNM 7 Map	TNM 6 Map	SS77 Map	SS2000 Map
000	In situ; noninvasive; intraepithelial	Tis	Tis	IS	IS
100	Invasive tumor confined to anterior surface of epiglottis with normal vocal cord mobility Stated as T1 with no other information on extension	T1	T1	L	L
200	OBSOLETE DATA CONVERTED V0200 Improve mapping, see code 305 Mucosa of adjacent subsite(s) of oropharynx	ERROR	ERROR	ERROR	ERROR
300	Localized, NOS	T1	T1	L	L
305	Mucosa of adjacent subsite(s) of oropharynx	T2	T2	L	L
310	Mucosa of vallecula without fixation of larynx	T2	T2	L	L

Code	Description	TNM 7 Map	TNM 6 Map	SS77 Map	SS2000 Map
320	Mucosa of adjacent subsite(s) of supraglottis (including posterior surface of epiglottis) WITHOUT fixation of larynx	T2	T2	RE	RE
330	Larynx, glottic or NOS, without fixation of larynx	T2	T2	RE	RE
340	Mucosa of pyriform sinus, medial wall or NOS, without fixation of larynx	T2	T2	RE	RE
350	Mucosa of base of tongue without fixation of larynx	T2	T2	RE	RE
355	Stated as T2 NOS with no other information on extension	T2	T2	L	L
360	Any structure coded in 350 to 200 with vocal cord fixation	T3	T3	RE	RE
370	Paraglottic space Pre-epiglottic tissues	T3	T3	RE	RE
380	Minor thyroid cartilage erosion (inner cortex)	T3	T3	D	D
390	Hypopharynx, NOS Postcricoid area Pyriform sinus except medial wall (see code 34)	T3	T3	RE	RE
430	390 + 280 (Any structure in 390 + Minor thyroid cartilage erosion)	T3	T3	D	D
435	Stated as T3 with no other information on extension	T3	T3	RE	RE
450	Soft palate, inferior surface including uvula, or soft palate, NOS	T4a	T4a	RE	RE

Code	Description	TNM 7 Map	TNM 6 Map	SS77 Map	SS2000 Map
470	Nasopharynx, NOS Soft palate, superior (nasopharyngeal) surface	T4a	T4a	RE	RE
500	Deep tissues of base of tongue Buccal mucosa (inner cheek) Floor of mouth Gum (gingiva)	T4a	T4a	RE	RE
620	Soft tissues of neck	T4a	T4a	RE	RE
650	Pterygoid muscle	T4a	T4a	RE	RE
660	(450 to 650) + (380 or 430) (Any structure in 450 to 650 + Minor thyroid cartilage erosion coded in 380 or 430)	T4a	T4a	D	D
670	Invasion through thyroid cartilage (see also code 380) Thyroid cartilage, NOS	T4a	T4a	D	D
680	Trachea	T4a	T4a	D	D
690	Esophagus Strap muscles Omohyoid Sternohyoid Sternothyroid Thyrohyoid Thyroid	T4a	T4a	D	D
700	Extrinsic muscles of tongue: Genioglossus Geniohyoid Hyoglossus Mylohyoid Palatoglossus Styloglossus	T4a	T4a	D	D

Code	Description	TNM 7 Map	TNM 6 Map	SS77 Map	SS2000 Map
725	Stated as T4a with no other information on extension	T4a	T4a	RE	RE
750	Prevertebral fascia or muscle Prevertebral space	T4b	T4b	RE	RE
770	750 + (660 to 700) (Any structure in 750 + any structure coded in 660 through 700)	T4b	T4b	D	D
800	Further contiguous extension, including: Anterior 2/3 of tongue Bone Carotid artery (encased) Hard palate Mandible Mediastinal structures Parotid gland	T4b	T4b	D	D
810	Stated as T4b with no other information on extension	T4b	T4b	D	D
815	Stated as T4 [NOS] with no other information on extension	T4NOS	T4NOS	RE	RE
950	No evidence of primary tumor	T0	T0	U	U
999	Unknown extension Primary tumor cannot be assessed Not documented in patient record	TX	TX	U	U

EpiglottisAnterior
CS Tumor Size/Ext Eval
See Standard Table

EpiglottisAnterior**CS Lymph Nodes**

Note 1: For head and neck schemas, this field includes all lymph nodes defined as Levels I-VII and Other by AJCC. The complete definitions are provided in the General Instructions.

Note 2: For head and neck schemas, additional information about lymph nodes (size of involved nodes, extracapsular extension, levels involved, and location of involved nodes above or below the lower border of the cricoid cartilage) is coded in Site-Specific Factors 1, 3-9.

Note 3: If laterality of lymph nodes is not specified, assume nodes are ipsilateral. Midline nodes are considered ipsilateral.

Note 4: For head and neck cancers, if lymph nodes are described only as "supraclavicular", try to determine if they are in Level IV (deep to the sternocleidomastoid muscle, in the lower jugular chain) or Level V (in the posterior triangle, inferior to the transverse cervical artery) and code appropriately. If the specific level cannot be determined, consider them as Level V nodes.

Code	Description	TNM 7 Map	TNM 6 Map	SS77 Map	SS2000 Map
000	None; no regional lymph node involvement	N0	N0	NONE	NONE
100	Single positive ipsilateral regional node: Level II node Upper jugular Jugulodigastric (subdigastric) Upper deep cervical Level III node Middle jugular Middle deep cervical Level IV node Lower jugular Lower deep cervical Virchow node Other groups: Retropharyngeal Cervical, NOS Deep cervical, NOS Internal jugular, NOS Regional lymph node, NOS	^	*	RN	RN
110	Single positive ipsilateral regional node: Level I node Level 1A - Submental	^	*	D	RN

Code	Description	TNM 7 Map	TNM 6 Map	SS77 Map	SS2000 Map
110 cont'd	Level 1B - Submandibular (submaxillary)	^	*	D	RN
120	<p>Single positive ipsilateral regional node:</p> <ul style="list-style-type: none"> Level V node <ul style="list-style-type: none"> Posterior triangle group Posterior cervical Level VA <ul style="list-style-type: none"> Spinal accessory Level VB <ul style="list-style-type: none"> Transverse cervical, supraclavicular Level VI node <ul style="list-style-type: none"> Anterior compartment group Laterotracheal Paralaryngeal Paratracheal - above suprasternal notch Perithyroidal Precricoid (Delphian) Prelaryngeal Pretracheal - above suprasternal notch Recurrent laryngeal Level VII node <ul style="list-style-type: none"> Superior mediastinal group (for other mediastinal nodes see CS Mets at DX) Esophageal groove Paratracheal - below suprasternal notch Pretracheal - below suprasternal notch Other groups: <ul style="list-style-type: none"> Facial: <ul style="list-style-type: none"> Buccinator (buccal) Mandibular Nasolabial Parotid: <ul style="list-style-type: none"> Infraauricular 	^	*	D	D

Code	Description	TNM 7 Map	TNM 6 Map	SS77 Map	SS2000 Map
120 cont'd	Intraparotid Periparotid Preauricular Parapharyngeal Retroauricular Sublingual Suboccipital	^	*	D	D
180	Stated as N1, no other information	N1	N1	RN	RN
190	Stated as N2a, no other information	N2a	N2a	RN	RN
200	Multiple positive ipsilateral nodes listed in code 100	^	*	RN	RN
210	Multiple positive ipsilateral nodes, any listed in code 110 (WITH or WITHOUT nodes listed in code 100)	^	*	D	RN
220	Multiple positive ipsilateral nodes, any listed in code 120 (WITH or WITHOUT nodes listed in code 100 or 110)	^	*	D	D
290	Stated as N2b, no other information	N2b	N2b	RN	RN
300	Regional lymph nodes listed in code 100: Positive ipsilateral node(s), not stated if single or multiple	^	*	RN	RN
310	Regional lymph nodes listed in code 110: Positive ipsilateral node(s), not stated if single or multiple	^	*	D	RN
320	Regional lymph nodes listed in code 120: Positive ipsilateral node(s), not stated if single or multiple	^	*	D	D

Code	Description	TNM 7 Map	TNM 6 Map	SS77 Map	SS2000 Map
400	Regional lymph nodes listed in code 100: Positive bilateral or contralateral nodes	^	*	RN	RN
410	Regional lymph nodes, any listed in code 110: Positive bilateral or contralateral nodes	^	*	D	RN
420	Regional lymph nodes, any listed in code 120: Positive bilateral or contralateral nodes (WITH or WITHOUT nodes listed in code 100 or 110)	^	*	D	D
490	Stated as N2c, no other information	N2c	N2c	RN	RN
500	Regional lymph nodes listed in code 100: Positive node(s), not stated if ipsilateral, or bilateral, or contralateral, AND not stated if single or multiple	^	*	RN	RN
510	Regional lymph nodes listed in code 110: Positive node(s), not stated if ipsilateral, or bilateral, or contralateral, AND not stated if single or multiple	^	*	D	RN
520	Regional lymph nodes listed in code 120: Positive node(s), not stated if ipsilateral, or bilateral, or contralateral, AND not stated if single or multiple	^	*	D	D
600	Stated as N2, NOS	N2NOS	N2NOS	RN	RN

Code	Description	TNM 7 Map	TNM 6 Map	SS77 Map	SS2000 Map
700	Stated as N3, no other information	N3	N3	RN	RN
800	Lymph nodes, NOS, no other information	^	*	RN	RN
999	Unknown; not stated Regional lymph node(s) cannot be assessed Not documented in patient record	NX	NX	U	U

^ For codes 100-120, 200-220, 300-320, 400-420, 500-520, and 800 ONLY, the N category for the AJCC 7th Edition staging is assigned based on the value of Site-Specific Factor 1, Size of Lymph nodes, using the extra table, Lymph Nodes Size Table for this site.

* For codes 100-120, 200-220, 300-320, 400-420, 500-520, and 800 ONLY, the N category for the AJCC 6th Edition staging is assigned based on the value of Site-Specific Factor 1, Size of Lymph nodes, using the extra table, Lymph Nodes Size Table for this site.

EpiglottisAnterior

Reg LN Pos

Note: Record this field even if there has been preoperative treatment.

See Standard Table

EpiglottisAnterior

Reg LN Exam

See Standard Table

EpiglottisAnterior
CS Mets at DX

Note: Supraclavicular and transverse cervical lymph nodes are coded in CS Lymph Nodes because they are categorized as N rather than M in AJCC TNM.

Code	Description	TNM 7 Map	TNM 6 Map	SS77 Map	SS2000 Map
00	No; none	M0	M0	NONE	NONE
10	Distant lymph node(s) Mediastinal Distant lymph node(s), NOS	M1	M1	D	D
40	Distant metastases except distant lymph node(s)(code 10) Carcinomatosis	M1	M1	D	D
50	(10) + (40) Distant lymph node(s) plus other distant metastases	M1	M1	D	D
60	Distant metastasis, NOS Stated as M1, NOS	M1	M1	D	D
99	Unknown if distant metastasis Distant metastasis cannot be assessed Not documented in patient record	M0	MX	U	U