

Appendix
Carcinomas of the Appendix Excluding Neuroendocrine Carcinomas
C18.1

Note: Carcinoid tumors and neuroendocrine carcinomas (histology codes 8153, 8240-8242, 8246, 8249) of the appendix are included in the "Carcinoid Appendix" schema.

Appendix
CS Tumor Size

Code	Description
000	No mass/tumor found
001-988	001 - 988 millimeters (code exact size in millimeters)
989	989 millimeters or larger
990	Microscopic focus or foci only and no size of focus given
991	Described as "less than 1 cm"
992	Described as "less than 2 cm," or "greater than 1 cm," or "between 1 cm and 2 cm"
993	Described as "less than 3 cm," or "greater than 2 cm," or "between 2 cm and 3 cm"
994	Described as "less than 4 cm," or "greater than 3 cm," or "between 3 cm and 4 cm"
995	Described as "less than 5 cm," or "greater than 4 cm," or "between 4 cm and 5 cm"
998	OBSOLETE DATA RETAINED V0200 Familial/multiple polyposis (M-8220/8221)
999	Unknown; size not stated Not documented in patient record

Appendix CS Extension

Note 1: Ignore intraluminal extension to adjacent segment(s) of colon; code depth of invasion or extracolonic spread as indicated.

Note 2: Codes 600-800 are used for contiguous extension from the site of origin. Discontinuous involvement is coded in CS Mets at DX.

Note 3: Tumor that is adherent to other organs or structures, macroscopically, is classified T4b. However, if no tumor is present in the adhesion, microscopically, the classification should be pT3.

Code	Description	TNM 7 Map	TNM 6 Map	SS77 Map	SS2000 Map
000	In situ; noninvasive; intraepithelial	Tis	Tis	IS	IS
050	(Adeno)carcinoma in a polyp or adenoma, noninvasive	Tis	Tis	IS	IS
100	Invasive tumor confined to mucosa, NOS (including intramucosal, NOS)	Tis	Tis	L	L
110	Lamina propria, including lamina propria in the stalk of a polyp	Tis	Tis	L	L
120	Confined to and not through the muscularis mucosae, including muscularis mucosae in the stalk of a polyp.	Tis	Tis	L	L
130	Confined to head of polyp, NOS	T1	T1	L	L
140	Confined to stalk of polyp, NOS	T1	T1	L	L
150	Invasive tumor in polyp, NOS	T1	T1	L	L
160	Invades submucosa (superficial invasion), including submucosa in the stalk of a polyp	T1	T1	L	L
170	Stated as T1[NOS] with no other information on extension	T1	T1	L	L
200	Muscularis propria invaded Stated as T2[NOS] with no other	T2	T2	L	L

Code	Description	TNM 7 Map	TNM 6 Map	SS77 Map	SS2000 Map
200 cont'd	information on extension	T2	T2	L	L
300	Confined to appendix, NOS Confined to colon, NOS Localized, NOS	T1	T1	L	L
400	Tumor invades mesoappendix Invasion through muscularis propria or muscularis, NOS Non-peritonealized pericolic tissues invaded Perimuscular tissue invaded Subserosal tissue/(sub)serosal fat invaded Transmural, NOS	T3	T3	L	L
410	Stated as T3[NOS] with no other information on extension	T3	T3	L	L
420	Fat, NOS	T3	T3	RE	RE
450	Extension to: Adjacent tissue(s), NOS Connective tissue Mesenteric fat Mesentery Mesocolon Pericolic fat	T3	T3	RE	RE
460	Adherent to other organs or structures, but no microscopic tumor found in adhesion(s)	T3	T3	RE	RE
500	Invasion of/through serosa (mesothelium) (visceral peritoneum)	T4a	T4	RE	RE
510	For mucinous tumors only: Peritoneal involvement confined within right lower quadrant ONLY	T4a	*	D	D

Code	Description	TNM 7 Map	TNM 6 Map	SS77 Map	SS2000 Map
511	(510) + (130-170) or (300) For mucinous tumors only: Peritoneal involvement confined within right lower quadrant PLUS local extension categorized as T1	T4a	*	D	D
512	(510) + (200) For mucinous tumors only: Peritoneal involvement confined within right lower quadrant PLUS invasion of muscularis propria or other local extension categorized as T2	T4a	*	D	D
513	(510) + (400-460) For mucinous tumors only: Peritoneal involvement confined within right lower quadrant PLUS local extension categorized as T3	T4a	*	D	D
550	Any of [(420) to (450)] + (500)	T4a	T4	RE	RE
560	Stated as T4a with no other information on extension	T4a	T4	RE	RE
570	Adherent to other organs or structures, NOS	T4b	T4	RE	RE
600	Small intestine Greater omentum	T4b	T4	RE	RE
650	Abdominal wall Retroperitoneum (excluding fat)	T4b	T4	RE	RE
660	OBSOLETE DATA RETAINED V0200 Ascending colon: Right kidney Right ureter Descending colon: Left kidney; Left ureter	ERROR	T4	RE	RE

Code	Description	TNM 7 Map	TNM 6 Map	SS77 Map	SS2000 Map
670	(570-650) + (510)	T4b	*	D	D
675	(570-650) + (511)	T4b	*	D	D
680	(570-650) + (512)	T4b	*	D	D
690	(570-650) + (513)	T4b	*	D	D
700	Fallopian tube Ovary Uterus	T4b	T4	D	D
750	Adrenal (suprarenal) gland Bladder Diaphragm Fistula to skin Gallbladder Other segment(s) of colon via serosa	T4b	T4	D	D
800	Kidney Liver Ureter Other contiguous extension	T4b	T4	D	D
850	Stated as T4b with no other information on extension	T4b	T4	RE	RE
900	Stated as T4[NOS] with no other information on extension	T4NOS	T4	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

* For Extension codes 510-513 and 660-690 ONLY, the T category is assigned based on the value of CS Mets at Dx, as shown in the AJCC 6th T and M from CS Extension and CS Mets at DX table for this site.

Appendix
CS Tumor Size/Ext Eval
See Standard Table

Appendix
CS Lymph Nodes

Note 1: Code only regional nodes and nodes, NOS, in this field. Distant nodes are coded in the field Mets at DX.

Note 2: One or more malignant satellite peritumoral nodules in the pericorectal adipose tissue of a primary carcinoma without histologic evidence of residual lymph node in the nodule may represent discontinuous spread, venous invasion with extravascular spread or a totally replaced lymph node. If the primary tumor is localized and maps to T1 or T2 and this is the only information you have, use code 050. The total number of tumor deposits must also be coded in SSF6.

Note 3: Superior and inferior mesenteric nodes are coded in CS Mets at DX.

Note 4: The number of positive regional nodes is required to calculate the correct N category for this site. Codes 400 and 450 are for use when this number is not available, but the pathology report assigns an N1 or N2 category. If information about the number of positive nodes is available, use codes 100, 200, or 300 rather than codes 400 - 450. The actual number of involved nodes will be coded in Reg LN Pos.

Code	Description	TNM 7 Map	TNM 6 Map	SS77 Map	SS2000 Map
000	None; no regional lymph node involvement	N0	N0	NONE	NONE
050	Tumor deposit(s) in the subserosa, or non-peritonealized pericolic or perirectal tissues WITHOUT regional nodal metastasis	^	N1	RN	RN
100	Colic (NOS) Epicolic (adjacent to bowel wall) Mesocolic (NOS) Paracolic/pericolic	^	*	RN	RN
200	Anterior cecal (prececal), Posterior (retrocecal); NOS	^	*	RN	RN
300	Mesenteric, NOS Regional lymph node(s), NOS	^	*	RN	RN
400	Stated as N1 pathologic, NOS	N1	N1	RN	RN

Code	Description	TNM 7 Map	TNM 6 Map	SS77 Map	SS2000 Map
450	Stated as N2 pathologic, NOS	N2	N2	RN	RN
800	Lymph nodes, NOS	^	*	RN	RN
999	Unknown; not stated Regional lymph node(s) cannot be assessed Not documented in patient record	NX	NX	U	U

^ For codes 050-300 and 800 ONLY: when CS Regional Nodes Eval is 0, 1, 5, or 9, the N category is assigned from the Lymph Nodes Clinical Evaluation 7th Table, using Reg LN Pos and CS Site-Specific Factor 2; when CS Regional Nodes Eval is 2, 3, 6, 8, or not coded, the N category is determined from the Lymph Nodes Pathologic Evaluation 7th Table using Reg LN Pos.

* For codes 050-300 and 800 ONLY: when CS Regional Nodes Eval is 0, 1, 5, or 9, the N category is assigned from the Lymph Nodes Clinical Evaluation 6th Table, using Reg LN Pos and CS Site-Specific Factor 2; when CS Regional Nodes Eval is 2, 3, 6, 8, or not coded, the N category is determined from the Lymph Nodes Pathologic Evaluation 6th Table Also Used When CS Reg Nodes Eval is Not Coded using Reg LN Pos.

Appendix

Reg LN Pos

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

See Standard Table

Appendix

Reg LN Exam

See Standard Table

Appendix

CS Mets at DX

Note: With the implementation of AJCC 7th edition, mucinous tumors with peritoneal involvement confined to the right lower quadrant were changed from M1 to T4a. Therefore, these should be coded in CS Extension.

Code	Description	TNM 7 Map	TNM 6 Map	SS77 Map	SS2000 Map
00	No; none	M0	M0	NONE	NONE
05	For mucinous tumors only: Intraperitoneal metastasis BEYOND the right lower quadrant, including	M1a	M1	D	D

Code	Description	TNM 7 Map	TNM 6 Map	SS77 Map	SS2000 Map
05 cont'd	pseudomyxoma peritonei	M1a	M1	D	D
07	For non-mucinous tumors: Any intraperitoneal spread	M1b	M1	D	D
08	Superior mesenteric lymph nodes	M1b	M1	RN	D
10	Distant lymph node(s) other than code 08	M1b	M1	D	D
20	For mucinous tumors only: (10 or 08) + (05) Distant lymph node(s) plus intraperitoneal metastasis BEYOND the right lower quadrant, including pseudomyxoma peritonei	M1b	M1	D	D
25	For non-mucinous tumors only: (10 or 08) + (07) Distant lymph node(s) plus intraperitoneal spread	M1b	M1	D	D
40	OBSOLETE DATA RETAINED V0200 See codes 45 and 60 Distant metastases except distant lymph node(s) (codes 08-10) Carcinomatosis	ERROR	M1	D	D
45	Distant metastases except distant lymph node(s) (codes 08-10) or peritoneal spread	M1b	M1	D	D
50	(45) + (10) Distant lymph node(s) plus other distant metastases	M1b	M1	D	D
60	Distant metastasis, NOS Stated as M1[NOS] with no other	M1NOS	M1	D	D

Code	Description	TNM 7 Map	TNM 6 Map	SS77 Map	SS2000 Map
60 cont'd	information on distant metastases	M1NOS	M1	D	D
99	Unknown if distant metastasis Cannot be assessed Not documented in patient record	M0	MX	U	U