

Cystic Duct**C24.0**

Note 1: Cystic Duct was removed from the Extrahepatic Bile Duct schema in the 7th ed. and added to the Gallbladder schema. A new schema was created for Cystic Duct in 7th ed. due to differences between schemas for Bile Duct and Gallbladder.

CysticDuct**CS Tumor Size**

See Standard Table

CysticDuct**CS Extension**

Note 1: Cystic Duct was removed from the Extrahepatic Bile Duct chapter in the 7th ed. and added to the Gallbladder chapter.

Note 2: Involvement of one of the stated organs or structures is classified as T3 and involvement of more than one structure is classified as T4.

Code	Description	TNM 7 Map	TNM 6 Map	SS77 Map	SS2000 Map
000	In situ; non-invasive; intraepithelial	Tis	Tis	IS	IS
100	Invasive tumor confined to: Lamina propria Mucosa, NOS Submucosa (superficial invasion)	T1a	T1	L	L
110	Stated as T1a [NOS]	T1a	T1	L	L
200	Muscularis propria	T1b	T1	L	L
210	Stated as T1b [NOS]	T1b	T1	L	L
220	Stated as T1 [NOS]	T1NOS	T1	L	L
300	Localized, NOS	T1NOS	T1	L	L
400	Beyond wall of cystic duct Periductal/fibromuscular connective tissue	T2	T2	RE	RE
410	Stated as T2 [NOS]	T2	T2	RE	RE

Code	Description	TNM 7 Map	TNM 6 Map	SS77 Map	SS2000 Map
600	OBSOLETE DATA RETAINED V0200 Gallbladder Liver, porta hepatis Pancreas	ERROR	T3	RE	RE
610	Unilateral branches of portal vein (right or left) Unilateral branches of hepatic artery (right or left)	T3	T3	RE	RE
620	Liver/porta hepatis	T3	T3	RE	RE
630	Extension to ONE of the following WITH or WITHOUT extension to liver (620) Gallbladder Pancreas	T3	T3	RE	RE
650	OBSOLETE DATA RETAINED V0200 See code 651 Extension to ONE of the following WITHOUT extension to any structure in 630, WITH OR WITHOUT extension to liver, (620): Colon, NOS Transverse including flexure Duodenum, NOS Omentum, NOS Lesser Stomach, distal	ERROR	T4	RE	RE
651	Extension to ONE of the following WITHOUT extension to any structure in 630, WITH OR WITHOUT extension to liver, (620): Colon, NOS	T3	T4	RE	RE

Code	Description	TNM 7 Map	TNM 6 Map	SS77 Map	SS2000 Map
651 cont'd	Transverse including flexure Duodenum, NOS Omentum, NOS Lesser Stomach, distal	T3	T4	RE	RE
655	Extension to gallbladder AND pancreas 630 WITHOUT extension to any structure in code 651, WITH or WITHOUT extension to liver (620)	T4	T3	RE	RE
660	OBSOLETE DATA RETAINED V0200 See code 790 for V2 Main portal vein or its branches bilaterally Common hepatic artery Hepatic artery, NOS Portal vein, NOS	ERROR	T4	RE	RE
670	Extension to MORE THAN ONE structure in code 651 OR Extension to one or more structure in code 651 PLUS one or more structures in code 630 WITH OR WITHOUT extension to liver (620)	T4	T4	RE	RE
700	Extension to ONE of the following WITHOUT extension to any structure in codes 630 or 651, WITH OR WITHOUT extension to liver: Other parts of colon Greater omentum Stomach, proximal	T3	T4	D	RE
705	Stated as T3 [NOS]	T3	T3	RE	RE

Code	Description	TNM 7 Map	TNM 6 Map	SS77 Map	SS2000 Map
710	Extension to MORE THAN ONE structure in code 700 OR Extension to one or more structures in code 700 PLUS one or more structures in codes 630 or 651 WITH OR WITHOUT extension to liver	T4	T4	D	RE
750	OBSOLETE DATA RETAINED V0200 See code 795 for V2 Abdominal wall	ERROR	T4	D	D
790	Main portal vein or its branches bilaterally Common hepatic artery Hepatic artery, NOS Portal vein, NOS	T4	ERROR	ERROR	ERROR
792	790 + any of 700 or 710	T4	T4	D	RE
795	Abdominal wall	T4	T4	D	D
800	Further contiguous extension	T4	T4	D	D
810	Stated as T4 [NOS]	T4	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

CysticDuct
CS Tumor Size/Ext Eval
See Standard Table

CysticDuct**CS Lymph Nodes****Note:** Code only regional nodes and nodes, NOS, in this field.

Code	Description	TNM 7 Map	TNM 6 Map	SS77 Map	SS2000 Map
000	None; no regional lymph node involvement	N0	N0	NONE	NONE
100	Regional lymph nodes: Cystic duct (node of the neck of the gallbladder) (Calot's node) Hepatic Hilar (in the hepatoduodenal ligament) Node of the foramen of Winslow (omental) (epiploic) Pericholedochal (node around common bile duct) Periportal Porta hepatis (portal) (hilar) (in hilus of liver) Regional lymph nodes, NOS	N1	N1	RN	RN
150	OBSOLETE DATA RETAINED V0200 (See codes 100 and 300) Regional lymph nodes: Cystic duct (node of the neck of the gallbladder) (Calot's node) Hepatic Hilar (in the hepatoduodenal ligament) Node of the foramen of Winslow (omental) (epiploic) Pancreaticoduodenal (N2) Pericholedochal (node around common bile duct) Periduodenal (N2) Peripancreatic (near head of pancreas only) (N2) Periportal Porta hepatis (portal) (hilar)	ERROR	N1	RN	RN

150 cont'd	(in hilus of liver) Regional lymph nodes, NOS	ERROR	N1	RN	RN
200	Stated as N1, NOS	N1	N1	RN	RN
300	Regional lymph nodes: Pancreaticoduodenal Periduodenal Peripancreatic (near head of pancreas only)	N2	N1	RN	RN
310	(300) + (100)	N2	N1	RN	RN
350	Regional lymph nodes: Celiac Superior mesenteric	N2	N1	D	D
360	(350) + (100)	N2	N1	D	D
400	Stated as N2, NOS	N2	N1	RN	RN
800	Lymph nodes, NOS	N1	N1	RN	RN
999	Unknown; not stated Regional lymph node(s) cannot be assessed Not documented in patient record	NX	NX	U	U

CysticDuct**Reg LN Pos**

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

See Standard Table

CysticDuct**Reg LN Exam**

See Standard Table

**CysticDuct
CS Mets at DX**

Code	Description	TNM 7 Map	TNM 6 Map	SS77 Map	SS2000 Map
00	No; none	M0	M0	NONE	NONE
10	Distant lymph node(s), including: Para-aortic Peripancreatic (along body and tail of pancreas only) 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	(40) + (10) Distant lymph node(s) plus other distant metastases	M1	M1	D	D
60	Distant metastases, 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

CysticDuct**CS Site-Specific Factor 25****Schema Discriminator: Subsite of Extrahepatic Bile Ducts**

Note 1: For cases coded to primary site code C24.0 (extrahepatic bile ducts), code the subsite in which the tumor arose. This information will be used to determine which CS schemas will be used to assign T, N, M, and AJCC stage group.

Note 2: According to AJCC, perihilar tumors are defined as those located in the extrahepatic biliary tree proximal to the origin of the cystic duct. These represent 70-80% of extrahepatic bile duct tumors. Distal bile duct tumors are those arising between the junction of the cystic duct and the ampulla of Vater, including those arising in the intrapancreatic portion of the common bile duct. These represent 20-30% of extrahepatic bile duct tumors.

Code	Description	Schema
010	Perihilar bile duct(s) Proximal extrahepatic bile duct(s) Hepatic duct(s)	BileDuctsPerihilar
020	Stated as Klatskin tumor	BileDuctsPerihilar
030	Cystic bile duct; cystic duct	CysticDuct
040	Common bile duct Common duct, NOS	BileDuctsDistal
050	Diffuse involvement More than one subsite involved, subsite of origin not stated	BileDuctsPerihilar
060	Subsite of extrahepatic bile ducts not stated, but treated with combined hepatic and hilar resection	BileDuctsPerihilar
070	Subsite of extrahepatic bile ducts not stated, but treated with pancreaticoduodenectomy	BileDuctsDistal
100	OBSOLETE DATA RETAINED V0200 C24.0 - originally coded in CSv1	BileDuctsPerihilar
999	Subsite of extrahepatic bile ducts not stated and not classifiable in codes 050-070	BileDuctsPerihilar