

**Site-Specific Factor 2 – Peritoneal Cytology (Corpus – all histologies)**

**Source documents:** cytology reports (look for multiple reports), pathology report

**Other names:** peritoneal washings, peritoneal lavage, possibly paracentesis (if no surgery)

Peritoneal cytology looks for malignant cells in the fluid in the pelvic and peritoneal cavities. Excess natural fluid accumulation is called ascites. If at laparotomy an analyzable amount of ascites is not present, the surgeon may flood the pelvis and abdomen with saline solution then suction it out and send the fluid for cytology. Prior to the seventh edition of TNM, positive peritoneal cytology was coded in CS extension. In CS version 2 peritoneal cytology is reported separately but does not change the FIGO or TNM stage. The basic codes are 000 Negative and 010 Malignant cells positive. (See schema for additional code choices.) If there is no pathological specimen available for testing, use code 998.

**Corpus (Carcinoma of the endometrium and carcinosarcomas)****C54.0-C54.3, C54.8-C54.9, C55.9**

(M-8000-8790, 8980-8981, 9700-9701)

C54.0 Isthmus uteri

C54.1 Endometrium

C54.2 Myometrium

C54.3 Fundus uteri

C54.8 Overlapping lesion of corpus uteri

C54.9 Corpus uteri

C55.9 Uterus, NOS

**CorpusCarcinoma****CS Tumor Size****See Standard Table****CS Extension**

**Note 1:** The definition of TNM in AJCC 7th Edition for tumors in corpus uteri has changed from the 6th Edition and reflects the new staging adopted by the International Federation of Gynecology and Obstetrics (FIGO). There are three schemas of FIGO Stage for cancer of corpus uteri:

- A. Carcinoma of the endometrium and carcinosarcomas
- B. Leiomyosarcomas and endometrial stromal sarcomas (ESS)
- C. Adenosarcomas

Starting from AJCC 7th Edition and the new FIGO Edition, the above three diseases are staged separately. The table below is for carcinoma of the endometrium and carcinosarcomas only.

Alternative names of carcinoma of the endometrium include uterine cancer, endometrial cancer and carcinoma of corpus uteri. When coding, pay attention to the FIGO Editions and descriptions about cell and tumor types, disease extension, lymph node status and metastasis.

**Note 2:** FIGO stage is surgical, not clinical, staging.

**Note 3:** When both FIGO Staging and extension detail are available, record the code with extension detail over the FIGO Staging. For example, in a report stating "tumor is confined to endometrium (code 100)" and FIGO Stage IA (code 125), use code 100.

**Note 4:** The AJCC 6th and 7th Editions are different for staging of this disease.

**Note 5:** Endocervical glandular involvement only should be staged as T1N0S.

**Note 6:** By AJCC 7th and the new FIGO Editions, positive cytology has to be reported separately (see Site Specific Factor 2), without changing stage. Since "cancer cells in ascites or in peritoneal washings" was not specifically categorized in the 1977 Summary Stage Guide, it is unclear to which stage previous cases may have been coded.

**Note 7:** According to the AJCC, extension to the bowel or bladder mucosa must be proven by biopsy in order to rule out bullous edema.

**Note 8:** Simultaneous tumors of the uterine corpus and ovary/pelvis in association with ovarian/pelvic endometriosis should be classified as independent primary tumors.

Code	Description	TNM 7 Map	TNM 6 Map	SS77 Map	SS2000 Map
000	In situ: preinvasive; noninvasive; intraepithelial Cancer in situ (see Note 4)	Tis	Tis	IS	IS
100	Invasive cancer confined to corpus uteri	T1NOS	T1NOS	*	*
110	Confined to endometrium (stroma)	T1a	T1a	*	*
120	Tumor invades less than one-half of myometrium Invasion of inner half of myometrium (see Note 4)	T1a	T1b	*	*
125	FIGO Stage IA	T1a	T1a	*	*
130	Tumor invades one-half or more of myometrium Invasion of outer half of myometrium (see Note 4)	T1b	T1c	*	*
135	FIGO Stage IB	T1b	T1b	*	*
140	Invasion of myometrium, NOS	T1NOS	T1NOS	*	*
160	Tunica serosa of the visceral peritoneum (serosa covering the corpus)	T1NOS	T1NOS	*	*
180	FIGO Stage I [NOS]	T1NOS	T1NOS	*	*
400	Localized, NOS	T1NOS	T1NOS	*	*
500	Cervix uteri, NOS, but not beyond uterus (see Note 4)	T2	T2NOS	RE	RE
510	Endocervical glandular involvement only	T1NOS	T2a	RE	RE

Code	Description	TNM 7 Map	TNM 6 Map	SS77 Map	SS2000 Map
510 cont'd	(see Note 5)	T1NOS	T2a	RE	RE
520	Cervical stromal invasion (see Note 4)	T2	T2b	RE	RE
525	FIGO Stage II	T2	T2NOS	RE	RE
600	Extension or metastasis within true pelvis: Adnexa Fallopian tube(s) Ligaments: Broad, round, uterosacral Ovary(ies) Parametrium Pelvic serosa Tunica serosa (parietal lining of the pelvic or abdominal cavity)	T3a	T3a	RE	RE
610	OBSOLETE DATA RETAINED V0200  see Site Specific Factor 2 and Note 6 Cancer cells in ascites Cancer cells in peritoneal washings FIGO Stage IIIA	ERROR	T3a	RE	RE
620	OBSOLETE DATA CONVERTED V0200 (see code 645) Ureter and vulva	ERROR	ERROR	ERROR	ERROR
630	FIGO Stage IIIA	T3a	T3a	RE	RE
640	Extension or metastasis to vagina	T3b	T3b	D	RE
645	Extension to: Ureter Vulva	T3b	T3b	D	RE

Code	Description	TNM 7 Map	TNM 6 Map	SS77 Map	SS2000 Map
650	Extension or metastasis to pelvic wall(s) Described clinically as "frozen pelvis", NOS	T3b	T3b	RE	RE
660	Extension or metastasis to: Bladder wall Bladder, NOS excluding mucosa Rectal wall Rectum, NOS excluding mucosa	T3b	T3b	RE	RE
665	FIGO Stage IIIB	T3b	T3b	RE	RE
670	[(650) or (660)] + [(645) or (640)]	T3b	T3b	D	RE
680	FIGO Stage III [NOS]	T3NOS	T3NOS	RE	RE
700	OBSOLETE DATA CONVERTED V0200 (see code 710) Extension to bowel mucosa or bladder mucosa (excluding bullous edema)FIGO Stage IVA FIGO Stage IV, NOS	ERROR	ERROR	ERROR	ERROR
710	Extension to bowel mucosa or bladder mucosa (excluding bullous edema)	T4	T4	D	D
800	Further contiguous extension Abdominal serosa (peritoneum) Cul de sac Sigmoid colon Small intestine	T4	T4	D	D
810	FIGO Stage IVA	T4	T4	D	D
820	FIGO Stage IV [NOS]	T4	T4	D	D
950	No evidence of primary tumor	T0	T0	U	U

Code	Description	TNM 7 Map	TNM 6 Map	SS77 Map	SS2000 Map
999	Unknown extension Primary tumor cannot be assessed Not documented in patient record	TX	TX	U	U

\* For CS Extension codes 100-400 ONLY. The SS77 and SS2000 category are assigned based on the value of CS Extension and peritoneal cytology status as coded in Site Specific Factor 2. See the extra table, CS Tumor Extension Cytology Table.

### CorpusCarcinoma

#### CS Tumor Size/Ext Eval

See Standard Table

### CorpusCarcinoma

#### CS Lymph Nodes

**Note 1:** The definition of TNM in AJCC 7th Edition for tumors in corpus uteri have changed from the 6th Edition and reflects the new staging adopted by the International Federation of Gynecology and Obstetrics (FIGO). There are three schemas of FIGO Stage for cancer of corpus of uteri:

- A. Carcinoma of the endometrium and carcinosarcomas
- B. Leiomyosarcomas and endometrial stromal sarcomas (ESS)
- C. Adenosarcomas

Starting from AJCC 7th Edition and the new FIGO Edition, the above three types of diseases are staged separately. The table below is for carcinoma of the endometrium and carcinosarcomas only.

**Note 2:** Code only regional nodes and nodes, NOS, in this field. Distant nodes are coded in the field Mets at DX.

**Note 3:** If the clinician says "adnexa palpated" but doesn't mention lymph nodes, assume lymph nodes are not involved.

**Note 4:** If either exploratory/definitive surgery is done with no mention of lymph nodes, assume nodes are negative.

**Note 5:** Regional nodes include bilateral and contralateral involvement of named nodes.

**Note 6:** When both FIGO Staging and lymph node positivity detail are available, record the code with lymph node positivity detail over the FIGO Staging. For example, in a report stating "Iliac node positive (code 100) " and FIGO Stage IIIC1 (code 160), use code 100.

**Note 7:** By the definition of the AJCC 7th Edition, FIGO IIIC1 is for N1 diseases and FIGO IIIC2 is for N2 diseases.

Code	Description	TNM 7 Map	TNM 6 Map	SS77 Map	SS2000 Map
000	No regional lymph node involvement	N0	N0	NONE	NONE
100	Regional lymph node(s): Iliac, NOS:	N1	N1	RN	RN

100 cont'd	Common External Internal (hypogastric) Obturator Paracervical Parametrial (see Note 2) Sacral, NOS: Lateral (laterosacral) Middle (promontorial) (Gerota's node) Presacral Uterosacral	N1	N1	RN	RN
140	Pelvic lymph node(s), NOS (see Note 2)	N1	N1	RN	RN
160	FIGO Stage IIIC1	N1	N1	RN	RN
200	Regional lymph node(s): Aortic, NOS: Lateral (lumbar) Para-aortic Periaortic	N2	N1	RN	RN
250	FIGO Stage IIIC2	N2	N1	RN	RN
500	FIGO Stage IIIC, NOS (see Note 7)	N1	N1	RN	RN
800	Regional lymph node(s), 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

**CorpusCarcinoma****Reg LN Pos**

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

See Standard Table

**CorpusCarcinoma****Reg LN Exam**

See Standard Table

**CorpusCarcinoma****CS Mets at DX**

**Note 1:** The definition of TNM in AJCC 7th Edition for tumors in corpus uteri have changed from the 6th Edition and reflects the new staging adopted by the International Federation of Gynecology and Obstetrics (FIGO). There are three schemas of FIGO Stage for cancer of corpus of uteri:

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**Note 2:** By the definition of AJCC 7th Edition, metastasis to pelvic or para-aortic lymph nodes should be recorded as N1 or N2 diseases.

**Note 3:** When both FIGO Staging and metastasis detail are available, record the code with metastasis detail over the FIGO Staging. For example, in a report stating "Distant lymph node(s): Superficial inguinal (code 11) " and FIGO Stage IVB (code 60), use code 11.

Code	Description	TNM 7 Map	TNM 6 Map	SS77 Map	SS2000 Map
00	No; none	M0	M0	NONE	NONE
11	Distant lymph node(s): Superficial inguinal	M1	M1	RN	D
12	Distant lymph node(s) other than code 11: Deep inguinal, NOS: Node of Cloquet or Rosenmuller (highest deep inguinal) Distant lymph node(s), NOS (excluding metastasis to pelvic or para-aortic lymph nodes, see Note 2)	M1	M1	D	D
40	Distant metastases, except distant lymph node(s) (codes 11 to 12) Carcinomatosis (excluding metastasis to vagina, pelvic serosa, or adnexa)	M1	M1	D	D
50	(40) + any of [(11) to (12)] Distant lymph node(s) plus other distant metastases	M1	M1	D	D

<b>Code</b>	<b>Description</b>	<b>TNM 7 Map</b>	<b>TNM 6 Map</b>	<b>SS77 Map</b>	<b>SS2000 Map</b>
55	FIGO Stage IVB	M1	M1	D	D
60	Distant metastasis NOS	M1	M1	D	D
99	Unknown if distant metastasis Distant metastasis cannot be assessed Not documented in patient record	M0	MX	U	U

**CorpusCarcinoma**  
**CS Site-Specific Factor 2**  
**Peritoneal Cytology**

**Note:** This is a procedure to examine for malignant cells from ascites (fluid that has accumulated in the peritoneal cavity in excess amount) or the fluid (saline) that is introduced into the peritoneal cavity, and then removed by suction. The alternative terms are called peritoneal washing cytology or peritoneal lavage.

Code	Description
000	Negative
010	Malignant cells positive
020	Test done, results suspicious or undetermined if positive or negative
888	OBSOLETE DATA CONVERTED V0200 See code 988 Not applicable for this site
988	Not applicable: Information not collected for this case (May include cases converted from code 888 used in CSv1 for "Not applicable" or when the item was not collected. If this item is required to derive T, N, M, or any stage, use of code 988 may result in an error.)
997	Test ordered, results not in patient record
998	Test not done (test was not ordered and not performed), including no pathological specimen available for the test
999	Unknown or no information Not documented in patient record