

Bile Ducts Perihilar**Perihilar Bile Ducts****C24.0 Extrahepatic bile duct**

Note: Extrahepatic Bile Duct was a single chapter in the AJCC 6th Edition. It has been divided into two chapters in the AJCC 7th Edition: Perihilar Bile Ducts and Distal Bile Duct.

Bile Ducts Perihilar**CS Tumor Size**

See Standard Table

Bile Ducts Perihilar**CS Extension**

Note 1: Perihilar bile duct tumors arise at the confluence of the right and left hepatic ducts in the hilar area of the liver.

Note 2: The biliary radicals are the ducts or tubes that drain bile into the intestine as part of the digestive process. The second-order biliary radicals are the next largest branches or ducts of the biliary system which join to form or empty into the main hepatic bile duct.

Note 3: For AJCC 7 staging, T3 and T4 are defined strictly in terms of invasion into specific large blood vessels and the biliary radicals within the liver. Give priority to coding invasion into blood vessels and biliary radicals over the named structures in codes 605, 651, 700, 760, and 800. Use combination codes 665, 720, and 815 when information is available regarding extension to the specified vessels and/or the biliary radicals within the liver plus involvement of other named organs.

Note 4: Involvement within the porta hepatis is coded according to the structures involved: portal vein, common hepatic artery, and common hepatic duct.

Code	Description	TNM 7 Map	TNM 6 Map	SS77 Map	SS2000 Map
000	In situ, intraepithelial, noninvasive	Tis	Tis	IS	IS
100	Invasive tumor of perihilar (proximal) bile duct(s) confined to: Lamina propria Mucosa, NOS Submucosa (superficial invasion)	T1	T1	L	L
200	Muscularis propria	T1	T1	L	L
300	Localized, NOS	T1	T1	L	L
350	Stated as T1 with no other information on extension	T1	T1	L	L
400	Beyond wall of bile duct	T2a	T2	RE	RE

Code	Description	TNM 7 Map	TNM 6 Map	SS77 Map	SS2000 Map
400 cont'd	Periductal/fibromuscular connective tissue	T2a	T2	RE	RE
450	Stated as T2a with no other information on extension	T2a	T2	RE	RE
500	Adjacent hepatic parenchyma	T2b	T3	RE	RE
510	Liver extension, NOS Liver, NOS	T2b	T3	RE	RE
550	Stated as T2b with no other information on extension	T2b	T2	RE	RE
555	Stated as T2 [NOS] with no other information on extension	T2NOS	T2	RE	RE
560	OBSELETE DATA REVIEWED V0203 See codes 100, 510, 661, and 665 Liver, porta hepatis	T2b	T3	RE	RE
600	OBSELETE DATA RETAINED V0200 ; See codes 560 and 605 Gallbladder Liver, porta hepatis Pancreas	ERROR	T3	RE	RE
605	Gallbladder Pancreas	TX	T3	RE	RE
610	Unilateral branches of portal vein (right or left) Unilateral branches of hepatic artery (right or left)	T3	T3	RE	RE
612	610 + 605	T3	T3	RE	RE
615	Stated as T3 with no other information on extension	T3	T3	RE	RE

Code	Description	TNM 7 Map	TNM 6 Map	SS77 Map	SS2000 Map
650	OBsolete DATA RETAINED V0200 ; See code 651 Colon, NOS Transverse including flexure Duodenum, NOS Omentum, NOS Lesser Stomach, distal	ERROR	T4	RE	RE
651	Colon, NOS: Transverse including flexures Duodenum, NOS Omentum, NOS: Lesser Stomach, distal	TX	T4	RE	RE
660	OBsolete DATA RETAINED V0200 See code 661 Main portal vein or its branches bilaterally Common hepatic artery Hepatic artery, NOS Portal vein, NOS	ERROR	T4	RE	RE
661	Main portal vein or its branches bilaterally Common hepatic artery Hepatic artery, NOS Portal vein, NOS	T4	T4	RE	RE
665	661 + (605 and/or 651)	T4	T4	RE	RE
670	Tumor invades second-order biliary radicals bilaterally OR Tumor invades unilateral second-order biliary radicals with contralateral portal vein or hepatic artery involvement	T4	T4	RE	RE

Code	Description	TNM 7 Map	TNM 6 Map	SS77 Map	SS2000 Map
700	Other parts of colon Greater omentum Stomach, proximal	TX	T4	D	RE
720	700 + (661, 665, or 670)	TX	T4	D	RE
750	OBSOLETE DATA RETAINED V0200 ; See code 760 Abdominal wall	ERROR	T4	D	D
760	Abdominal wall	TX	T4	D	D
800	Further contiguous extension	TX	T4	D	D
810	800 + (700 or 760)	TX	T4	D	D
815	(760, 800, or 810) + (661 or 670) Involvement of structures in 760, 800, or 810 plus involvement of blood vessels as described in 661 or blood vessels and biliary radicals as described in 670	T4	T4	D	D
820	Stated as T4 with no other information on extension	T4	T4	RE	RE
950	No evidence of primary tumor	T0	T0	U	U
999	Unknown; extension not stated Primary tumor cannot be assessed Not documented in patient record	TX	TX	U	U

Bile Ducts Perihilar**CS Tumor Size/Ext Eval**

See Standard Table

Bile Ducts Perihilar**CS Lymph Nodes**

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

Note 2: Para-aortic and pericaval lymph nodes are classified as regional nodes for AJCC 7 staging. They are now coded in CS Lymph Nodes.

Code	Description	TNM 7 Map	TNM 6 Map	SS77 Map	SS2000 Map
000	No regional lymph node involvement	N0	N0	NONE	NONE
150	Regional lymph nodes: Cystic duct (node of the neck of the gallbladder) (Calot's node) Hepatic Hepatic artery Hilar (in the hepatoduodenal ligament) Node of the foramen of Winslow (omental) (epiploic) Pancreaticoduodenal Pericholedochal (node around common bile duct) Periduodenal Peripancreatic (near head of pancreas only) Periportal Porta hepatis (portal) (hilar) (in hilus of liver) Portal vein Regional lymph node(s), NOS	N1	N1	RN	RN
200	Stated as N1 with no other information on lymph nodes	N1	N1	RN	RN
350	Regional lymph nodes: Celiac artery Superior mesenteric artery Superior mesenteric vein	N2	N1	D	D
400	Regional lymph nodes: Para-aortic Pericaval	N2	N0	D	D
450	400 + (150 and/or 350) Any regional lymph node(s) as listed in code 150 or 350 + para-aortic and/or pericaval lymph node(s)	N2	N1	D	D

Code	Description	TNM 7 Map	TNM 6 Map	SS77 Map	SS2000 Map
750	Stated as N2 with no other information on lymph nodes	N2	N1	D	D
800	Lymph nodes, NOS	N1	N1	RN	RN
999	Unknown; regional lymph nodes not stated Regional lymph node(s) cannot be assessed Not documented in patient record	NX	NX	U	U

**Bile Ducts Perihilar
CS Lymph Nodes Eval
See Standard Table**

Note 1: This field is used primarily to derive the staging basis for the N category in the TNM

**Bile Ducts Perihilar
Regional Nodes Positive
See Standard Table**

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

**Bile Ducts Perihilar
Regional Nodes Examined
See Standard Table**

**Bile Ducts Perihilar
CS Mets at DX**

Note 1: Para-aortic and pericaval lymph nodes are classified as regional nodes for AJCC 7 staging and are coded in CS Lymph Nodes.

Code	Description	TNM 7 Map	TNM 6 Map	SS77 Map	SS2000 Map
00	No distant metastasis	M0	*	NONE	NONE
10	OBSELETE DATA RETAINED V0200 Para-aortic nodes reclassified from distant to regional nodes in AJCC 7th Edition; See code 15 or CS Lymph Nodes code 400	ERROR	M1	D	D

Code	Description	TNM 7 Map	TNM 6 Map	SS77 Map	SS2000 Map
10 cont'd	Distant lymph node(s) including: Para-aortic Peripancreatic (along body and tail of pancreas only) Distant lymph nodes, NOS	ERROR	M1	D	D
15	Distant lymph node(s) including: Peripancreatic (along body and tail of pancreas only) Distant lymph nodes, NOS	M1	M1	D	D
40	Distant metastasis except distant lymph nodes Carcinomatosis	M1	M1	D	D
50	OBSELETE DATA RETAINED V0200 ; See code 51 Para-aortic nodes reclassified from distant to regional nodes in AJCC 7th Edition (10 + 40)	ERROR	M1	D	D
51	40 + 15 Distant metastasis plus distant lymph nodes in code 15	M1	M1	D	D
60	Distant metastasis, NOS Stated as M1 with no other information on metastasis	M1	M1	D	D
99	Unknown; distant metastasis not stated Distant metastasis cannot be assessed Not documented in patient record	M0	*	U	U

* For CS Mets at DX codes 00 and 99, the M category for AJCC 6 staging is assigned based on the value of CS Lymph Nodes as shown in the Lymph Nodes Mets at DX AJCC 6 Table for this schema.

Bile Ducts Perihilar

CS Mets Eval

See Standard Table

Note: This item reflects the validity of the classification of the item CS Mets at DX only according to the diagnostic methods employed.

Bile Ducts Perihilar**CS Site-Specific Factor 25****Schema Discriminator: Bile Ducts Distal/Bile Ducts Perihilar/Cystic Duct****Note: See page A-105**

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 Or subsite stated as middle extrahepatic bile duct) AND treated with combined hepatic and hilar resection	BileDuctsPerihilar
070	Subsite of extrahepatic bile ducts not stated Or subsite stated as middle extrahepatic bile duct AND treated with pancreaticoduodenectomy	BileDuctsDistal
100	OBSOLETE DATA RETAINED V0200 C24.0 - originally coded in CSv1 and case diagnosed before 1/1/2010	BileDuctsPerihilar
999	Subsite of extrahepatic bile ducts not stated and not classifiable in codes 050-070	BileDuctsPerihilar