

ParotidGland**Parotid Gland****C07.9**

C07.9 Parotid gland

Note: Laterality must be coded for C07.9.**ParotidGland****CS Tumor Size**

Note 1: Code the specific tumor size as stated in the medical record. Use code 992 or 994 if the physician's statement about T value is the ONLY information available about the size of the tumor. (Refer to the CS Extension table for instructions on coding extension.)

| 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, 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" Stated as T1 with no other information on size |
| 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" Stated as T2 with no other information on size |
| 995 | Described as "less than 5 cm," or "greater than 4 cm," or "between 4 cm and 5 cm" |
| 996 | Described as "greater than 5cm" |
| 999 | Unknown; size not stated Not documented in patient record |

ParotidGland**CS Extension**

Note 1: AJCC considers "in situ carcinoma of salivary gland" an impossible diagnosis. Any case so coded will be mapped to an unknown AJCC stage, in situ Summary Stage.

Note 2: Periosteum is a fibrous membrane that wraps the outer surface of bones. Mucoperiosteum is a compound structure of mucous membrane and periosteum. Cortical bone is the dense compact outer layer of bone.

Note 3: Use code 300 for localized tumor ONLY if no information is available to assign codes 100, 305, or 310.

Note 4: Use code 305, 310, 410, 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; non-invasive; intraepithelial | TX | TX | IS | IS |
| 100 | Invasive tumor confined to gland/duct of origin Multiple foci confined to substance of parotid gland | ^ | * | L | L |
| 300 | Localized, NOS | ^ | * | L | L |
| 305 | Stated as T1 with no other information on extension | ^ | * | L | L |
| 310 | Stated as T2 with no other information on extension | ^ | * | L | L |
| 350 | Microscopic extraparenchymal extension ONLY to periglandular soft/connective tissue | ^ | * | RE | RE |
| 400 | Macroscopic extraparenchymal extension to: Periglandular soft/connective tissue Another major salivary gland (submaxillary, sublingual) Pharyngeal mucosa Skeletal muscle: Digastric Masseter | T3 | T3 | RE | RE |

| Code | Description | TNM 7 Map | TNM 6 Map | SS77 Map | SS2000 Map |
|---------------|--|-----------|-----------|----------|------------|
| 400 cont'd | Pterygoid Sternocleidomastoid Stylohyoid | T3 | T3 | RE | RE |
| 402 | Maxillary artery Facial artery or vein | T3 | T3 | RE | RE |
| 405 | Spinal accessory nerve | T3 | T3 | RE | D |
| 408 | Stated as T3 with no other information on extension | T3 | T3 | RE | RE |
| 420 | External auditory meatus Skin overlying gland | T4a | T4a | RE | RE |
| 450 | Periosteum of mandible | T4a | T4a | RE | RE |
| 500 | Auricular nerve Mandible Mastoid process | T4a | T4a | RE | RE |
| 510 | (420-500) + 405 (Any structure in codes 420-500 + Spinal accessory nerve) | T4a | T4a | RE | D |
| 700 | Facial (7th) nerve | T4a | T4a | RE | D |
| 720 | OBSOLETE DATA CONVERTED V0200 Moved to code 405 to correct AJCC mapping Spinal accessory nerve | ERROR | ERROR | ERROR | ERROR |
| 725 | Stated as T4a with no other information on extension | T4a | T4a | RE | RE |
| 740 | Carotid artery (encased) Jugular vein | T4b | T4b | RE | RE |

| Code | Description | TNM 7 Map | TNM 6 Map | SS77 Map | SS2000 Map |
|------|--|-----------|-----------|----------|------------|
| 750 | OBSOLETE DATA RETAINED V0200 Note: Maxillary artery, Facial artery or vein moved to code 402 to correct AJCC mapping Major blood vessel(s): Carotid artery Facial artery or vein Jugular vein Maxillary artery | ERROR | T4b | RE | RE |
| 755 | 740 + 405 (Any structure in code 740 + Spinal accessory) | T4b | T4b | RE | D |
| 758 | 740 + 700 (Any structure in code 740 +Facial nerve) | T4b | T4b | RE | D |
| 760 | Base of skull Skull, NOS | T4b | T4b | RE | D |
| 770 | Pterygoid plates | T4b | T4b | D | D |
| 800 | Further contiguous extension | T4b | T4b | D | D |
| 810 | Stated as T4b with no other information on extension | T4b | T4b | RE | RE |
| 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 |

^ For Extension codes 100-350 ONLY, the T category for AJCC 7th Edition staging is assigned based on the value of CS Tumor Size as shown in the Extension Size Table for this site.

* For Extension codes 100-350 ONLY, the T category for AJCC 6th Edition staging is assigned based on the value of CS Tumor Size as shown in the Extension Size Table for this site.

ParotidGland
CS Tumor Size/Ext Eval
See Standard Table

ParotidGland
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.

Note 5: The description of lymph nodes has been standardized across the head and neck schemas. All lymph node levels and groups listed here are considered regional nodes for AJCC staging. Summary Stage 1977 and Summary Stage 2000 divide these nodes into regional and distant groups.

Note 6: Submental and Cervical nodes NOS moved from code 100 in CSV1 to code 110, Facial and Deep cervical nodes NOS moved from code 100 in CSV1 to code 120, Levels II, II, and IV nodes moved from code 110 in CSV1 to code 120.

| 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 I node Level IB - Submandibular (submaxillary), sublingual Parotid: Infraauricular Intraparotid Periparotid Preauricular Regional lymph node, NOS | ^ | * | RN | RN |

| Code | Description | TNM 7 Map | TNM 6 Map | SS77 Map | SS2000 Map |
|------|---|-----------|-----------|----------|------------|
| 110 | Single positive ipsilateral regional node: Level I Level IA node - Submental Cervical NOS | ^ | * | D | RN |
| 120 | Single positive ipsilateral regional node: Level II node - Upper jugular Upper deep cervical Level III node - Middle jugular Middle deep cervical Level IV node - Lower jugular Lower deep cervical Virchow node Level V node - Posterior triangle group Posterior cervical Level VA - Spinal accessory Level VB - Transverse cervical, supraclavicular Level VI node - Anterior compartment group Laterotracheal Paralaryngeal Paratracheal - above suprasternal notch Perithyroidal Precricoid (Delphian) Prelaryngeal Pretracheal - above suprasternal notch Recurrent laryngeal Level VII node - Superior mediastinal group (for other mediastinal nodes see CS Mets at DX) Esophageal groove Paratracheal - below suprasternal notch Pretracheal - below | ^ | * | D | D |

| Code | Description | TNM 7 Map | TNM 6 Map | SS77 Map | SS2000 Map |
|---------------|---|-----------|-----------|----------|------------|
| 120 cont'd | suprasternal notch Other groups: Facial: Buccinator (buccal) Mandibular Nasolabial Parapharyngeal Retroauricular Retropharyngeal Suboccipital Deep cervical NOS | ^ | * | 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 |

| Code | Description | TNM 7 Map | TNM 6 Map | SS77 Map | SS2000 Map |
|------|---|-----------|-----------|----------|------------|
| 320 | Regional lymph nodes listed in code 120: Positive ipsilateral node(s), not stated if single or multiple | ^ | * | D | D |
| 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 (WITH or WITHOUT nodes listed in code 100) | ^ | * | 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 as 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: | ^ | * | D | D |

| Code | Description | TNM 7 Map | TNM 6 Map | SS77 Map | SS2000 Map |
|---------------|--|-----------|-----------|----------|------------|
| 520 cont'd | 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 |
| 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 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 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.

ParotidGland

Reg LN Pos

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

See Standard Table

ParotidGland

Reg LN Exam

See Standard Table

ParotidGland 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 |