

Neuroendocrine Tumors of Stomach**C16.0-C16.6, C16.8-C16.9**

(M-8153, 8240-8242, 8246, 8249)

C16.0 Cardia of stomach

C16.1 Fundus of stomach

C16.2 Body of stomach

C16.3 Gastric antrum

C16.4 Pylorus

C16.5 Lesser curvature of stomach, NOS

C16.6 Greater curvature of stomach, NOS

C16.8 Overlapping lesion of stomach

C16.9 Stomach, NOS

Note 1: For this schema, AJCC only stages well-differentiated neuroendocrine tumors. Please note that the "concept" of well-differentiated is reflected in the histology code. The grade code is not needed in order to select the correct schema, but does need to be coded.

Note 2: This schema is also used for carcinoid tumors and malignant gastrinomas.

CS Tumor Size

Note: Code the specific tumor size as documented in the medical record. If the ONLY information regarding tumor size is the physician's statement of the "T" category, assign code 001 (T1, NOS), 011 (T2, NOS) or 999 (T3, NOS or T4, NOS) . (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 or equal to 1 cm"
992	OBSOLETE DATA RETAINED V0200 Described as "less than 2 cm," or "greater than 1 cm," or "between 1 cm and 2 cm"
993	OBSOLETE DATA RETAINED V0200 Described as "less than 3 cm," or "greater than 2 cm," or "between 2 cm and 3 cm"

Code	Description
994	OBSOLETE DATA RETAINED V0200 Described as "less than 4 cm," or "greater than 3 cm," or "between 3 cm and 4 cm"
995	OBSOLETE DATA RETAINED V0200 Described as "less than 5 cm," or "greater than 4 cm," or "between 4 cm and 5 cm"
998	OBSOLETE DATA RETAINED V0200 Diffuse; widespread; 3/4's or more: linitis plastica
999	Unknown; size not stated Not documented in patient record

NETStomach**CS Extension**

Note: INTRALUMINAL or INTRAMURAL extension to esophagus and duodenum is classified by the depth of greatest invasion in any of these sites, including stomach. (For extension to esophagus or duodenum via serosa, see code 600.)

Code	Description	TNM 7 Map	TNM 6 Map	SS77 Map	SS2000 Map
000	In situ; noninvasive; intraepithelial	^	Tis	IS	IS
050	(Adeno)carcinoma in a polyp, noninvasive	^	Tis	IS	IS
100	Invasive tumor confined to mucosa, NOS (including intramucosal, NOS)	^	T1	L	L
110	Invades lamina propria	^	T1	L	L
120	Invades muscularis mucosae	^	T1	L	L
130	Confined to head of polyp Extension to stalk	^	T1	L	L
140	Confined to stalk of polyp	^	T1	L	L

Code	Description	TNM 7 Map	TNM 6 Map	SS77 Map	SS2000 Map
150	Tumor in polyp, NOS	^	T1	L	L
160	Invades submucosa (superficial invasion)	^	T1	L	L
200	Invades into but not through muscularis propria	^	T2a	L	L
300	Localized, NOS Implants inside stomach	^	T1	L	L
340	Stated as T1, NOS with no other information on extension	^	T1	L	L
350	OBSOLETE DATA RETAINED V0200 Linitis plastica (see Note 2) and no other information regarding extension is available.	ERROR	T2a	RE	L
390	Stated as T2, NOS with no other information on extension	^	T2NOS	L	L
400	Invasion through muscularis propria or muscularis, NOS Extension through wall, NOS Perimuscular tissue invaded Subserosal tissue/(sub)serosal fat invaded	T3	T2b	L	L
450	Extension to adjacent (connective) tissue WITHOUT perforation of visceral peritoneum: Gastric artery Ligaments: Gastrocolic Gastrohepatic Gastrosplenic Omentum, NOS	T3	T2b	L	L

Code	Description	TNM 7 Map	TNM 6 Map	SS77 Map	SS2000 Map
450 cont'd	Greater Lesser Perigastric fat	T3	T2b	L	L
480	Stated as T3, NOS with no other information on extension	T3	T3	RE	RE
490	Stated as T4, NOS with no other information on extension	T3	T4	RE	RE
500	Invasion of/through serosa (mesothelium) (tunica serosa) (visceral peritoneum), including perforation of visceral peritoneum covering the gastric ligaments or the omentum WITHOUT invasion of adjacent structures	T4	T3	RE	RE
550	(450) + (500)	T4	T3	RE	RE
600	Diaphragm Duodenum via serosa or NOS Esophagus via serosa Ileum Jejunum Liver Pancreas Small intestine, NOS Spleen Transverse colon/mesocolon (including flexures) Celiac axis Aorta	T4	T4	RE	RE
700	Abdominal wall Adrenal gland Kidney Retroperitoneum	T4	T4	D	D

Code	Description	TNM 7 Map	TNM 6 Map	SS77 Map	SS2000 Map
800	Further contiguous extension	T4	T4	D	D
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 codes 000-300 ONLY, the T category is assigned based on the value of CS Tumor Size, as shown in the Extension Size 7th Table for this site.

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CS Tumor Size/Ext Eval

See Standard Table

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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: If information about named regional lymph nodes is available, use codes 100, 400, 420, or 500, rather than code 600.

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: Left gastric (superior gastric), NOS: Cardial Cardioesophageal Gastric, left Gastropancreatic, left Lesser curvature Lesser omental Paracardial Pancreaticosplenic (pancreaticolienal) Pancreatoduodenal Perigastric, NOS Peripancreatic	N1	*	RN	RN

Code	Description	TNM 7 Map	TNM 6 Map	SS77 Map	SS2000 Map
100 cont'd	Right gastric (inferior gastric), NOS: Gastrocolic Gastroduodenal Gastroepiploic (gastro-omental), right or NOS Gastrohepatic Greater curvature Greater omental Pyloric, NOS Infrapyloric (subpyloric) Suprapyloric Splenic (lienal), NOS: Gastroepiploic (gastro-omental), left Splenic hilar Superior mesenteric Nodule(s) in perigastric fat	N1	*	RN	RN
400	Celiac Hepatic (excluding gastrohepatic, [see code 100] and hepatoduodenal [see code 420])	N1	*	D	RN
420	For lesser curvature only: Hepatoduodenal	N1	*	D	D
500	Regional lymph nodes, NOS	N1	*	RN	RN
600	Stated as N1, NOS	N1	N1	RN	RN
650	OBSOLETE DATA RETAINED V0200 Stated as N2, NOS	ERROR	N2	RN	RN
700	OBSOLETE DATA RETAINED V0200 Stated as N3, NOS	ERROR	N3	RN	RN
800	Lymph nodes, NOS	N1	*	RN	RN

Code	Description	TNM 7 Map	TNM 6 Map	SS77 Map	SS2000 Map
999	Unknown; not stated Regional lymph node(s) cannot be assessed Not documented in patient record	NX	NX	U	U

* For codes 100-500 and 800 ONLY: when CS Lymph Nodes Eval is 0, 1, 5, or 9, the N category is assigned from the Lymph Nodes Clinical Evaluation Table, using Reg LN Pos and CS Site-Specific Factor 1; when CS Lymph Nodes Eval is 2, 3, 6, 8, or not coded, the N category is determined from the Lymph Nodes Pathologic Evaluation Table Also Used When CS Reg Nodes Eval is Not Coded using Reg LN Pos.

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Reg LN Pos

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

See Standard Table

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Reg LN Exam

See Standard Table

**NETStomach
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): For all subsites: Inferior mesenteric Para-aortic Porta hepatis (portal) (hilar) (in hilus of liver) Retropancreatic Retroperitoneal Superior mesenteric or mesenteric, NOS For all subsites EXCEPT lesser curvature Hepatoduodenal Distant lymph nodes, NOS	M1	M1	D	D
40	Distant metastases except distant lymph node(s) (code 10) Carcinomatosis Malignant peritoneal cytology	M1	M1	D	D
50	(10) + (40) Distant lymph node(s) plus other distant metastases	M1	M1	D	D
60	Distant metastasis, NOS 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