

Ethmoid Sinus**C31.1**

C31.1 Ethmoid sinus

SinusEthmoid**CS Tumor Size**

See Standard Table

SinusEthmoid**CS Extension**

Note 1: Involvement of or extension to bone includes any type of tumor extension to the bone, such as erosion, invasion, extension, penetration, or destruction.

Note 2: Extension to structures in codes 400 and higher may be from one or both ethmoid sinuses.

Note 3: In code 700, "minimal extension to anterior cranial fossa" implies tumor pushing through cribriform plate, but without invasion of the dura or brain.

Note 4: Code Base of skull NOS only if no information available to code to more specific bony structures in skull.

Note 5: Use code 300 for localized tumor ONLY if no information is available to assign codes 100, 120, 160, or 315.

Note 6: Use code 315 410, 680, 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	Tis	Tis	IS	IS
120	Invasive tumor confined to left or right ethmoid sinus WITHOUT bony involvement	T1	T1	L	L
140	OBSOLETE DATA CONVERTED V0200 Better mapping, see code 320 Confined to both ethmoid sinuses WITHOUT bony involvement	ERROR	ERROR	ERROR	ERROR
160	Confined to ethmoid, NOS, WITHOUT bony involvement	T1	T1	L	L
220	Invasive tumor confined to either left or right ethmoid WITH bony invasion (involvement of perpendicular plate of ethmoid bone or ethmoid air cells)	T1	T1	L	L

Code	Description	TNM 7 Map	TNM 6 Map	SS77 Map	SS2000 Map
240	OBSOLETE DATA CONVERTED V0200 Better mapping, see code 340 Confined to both ethmoid sinuses WITH bony invasion (involvement of perpendicular plate of ethmoid bone or ethmoid air cells)	ERROR	ERROR	ERROR	ERROR
260	Confined to ethmoid, NOS with bony invasion (involvement of perpendicular plate of ethmoid bone or ethmoid air cells)	T1	T1	L	L
300	Localized, NOS	T1	T1	L	L
315	Stated as T1 with no further information on extension	T1	T1	L	L
320	Confined to both ethmoid sinuses WITHOUT bony involvement	T2	T2	RE	RE
340	Confined to both ethmoid sinuses WITH bony invasion (involvement of perpendicular plate of ethmoid bone or ethmoid air cells)	T2	T2	RE	RE
400	Extension to nasal cavity with or without bony invasion (involvement of perpendicular plate of ethmoid bone or ethmoid air cells) Floor Lateral wall Nasal vestibule Septum Turbinates Nasal cavity NOS	T2	T2	RE	RE
410	Stated as T2 with no	T2	T2	RE	RE

Code	Description	TNM 7 Map	TNM 6 Map	SS77 Map	SS2000 Map
410 cont'd	other information on extension	T2	T2	RE	RE
620	Base of skull, NOS	T3	T3	RE	RE
630	Cribriform plate	T3	T3	RE	RE
640	Medial wall or floor of orbit; orbital plate	T3	T3	RE	RE
650	Maxillary sinus	T3	T3	RE	RE
660	Palate	T3	T3	D	D
680	Stated as T3 with no other information on extension	T3	T3	RE	RE
700	Anterior orbital contents Skin of nose Skin of cheek Anterior cranial fossa (minimal extension) (see Note 3) Pterygoid plates Sphenoid sinus Frontal sinus	T4a	T4a	RE	RE
720	700 + 660 (Any structure in code 700 + Palate)	T4a	T4a	D	D
725	Stated as T4a with no other information on extension	T4a	T4a	RE	RE
760	Orbital apex Dura Brain Middle cranial fossa Cranial nerves (other than V2, maxillary division of trigeminal nerve) Nasopharynx	T4b	T4b	RE	RE

Code	Description	TNM 7 Map	TNM 6 Map	SS77 Map	SS2000 Map
760 cont'd	Clivus	T4b	T4b	RE	RE
780	760 + 660 (Any structure in code 760 + Palate)	T4b	T4b	D	D
800	Further contiguous extension	T4b	T4b	D	D
810	Stated as T4b with no other information on extension	T4b	T4b	D	D
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

SinusEthmoid**CS Tumor Size/Ext Eval**

See Standard Table

SinusEthmoid**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: Level III and Level IV nodes moved from code 100 in CSv1 to code 120, Retropharyngeal nodes moved from code 120 to code 100.

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 IA - Submental Level IB - Submandibular (submaxillary) Level II node - Upper jugular Jugulodigastric (subdigastric) Upper deep cervical Other groups: Retropharyngeal Cervical, NOS Deep cervical, NOS Internal jugular, NOS Regional lymph node, NOS	^	*	RN	RN
120	Single positive ipsilateral regional node: Level III node - Middle jugular	^	*	D	D

Code	Description	TNM 7 Map	TNM 6 Map	SS77 Map	SS2000 Map
120 cont'd	<p>Middle deep cervical Level IV node - Lower jugular Jugulo-omohyoid (supramohyoid) 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 suprasternal notch Other groups: Facial: Buccinator (buccal) Mandibular Nasolabial Parotid: Infraauricular Intraparotid Periparotid Preparotid</p>	^	*	D	D

Code	Description	TNM 7 Map	TNM 6 Map	SS77 Map	SS2000 Map
120 cont'd	Parapharyngeal Retropharyngeal Sublingual Suboccipital	^	*	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
220	Multiple positive ipsilateral nodes, any listed in code 120 (WITH or WITHOUT nodes listed in code 100)	^	*	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 or regional	^	*	RN	RN
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
420	Regional lymph nodes, any listed in code 120: Positive bilateral or contralateral nodes (WITH or WITHOUT nodes listed in code 100)	^	*	D	D
490	Stated as N2c, no other information	N2c	N2c	RN	RN

Code	Description	TNM 7 Map	TNM 6 Map	SS77 Map	SS2000 Map
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
520	Regional lymph nodes listed in code 120: 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	^	*	RN	RN
999	Unknown; not stated Regional lymph nodes 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.

SinusEthmoid

Reg LN Pos

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

See Standard Table

SinusEthmoid

Reg LN Exam

See Standard Table

**SinusEthmoid
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