

Malignant Melanoma of Other Larynx**C32.3, C32.8-C32.9**

C32.3 Laryngeal cartilage

C32.8 Overlapping lesion of larynx

C32.9 Larynx, NOS

MelanomaLarynxOther**CS Tumor Size**

See Standard Table

MelanomaLarynxOther**CS Extension**

Note 1: AJCC does not include a T category or stage grouping for in situ melanoma of mucosa of head and neck sites, considering this a very rare tumor. Any case so coded will be mapped to an unknown AJCC stage and in situ Summary Stage.

Note 2: AJCC does not include a T1 or T2 category for mucosal melanoma of head and neck sites.

Note 3: Use code 310 for localized tumor ONLY if no information is available to assign code 105, 115, 125, 305, or 320.

Note 4: Use code 320, 775, 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; noninvasive; intraepithelial	NA	NA	IS	IS
100	OBSOLETE DATA RETAINED V0200 Invasive tumor confined to site of origin	ERROR	NA	L	L
105	Tumor confined to mucosa of site of origin	T3	NA	L	L
200	OBSOLETE DATA RETAINED V0200 Tumor involves more than one subsite, WITHOUT fixation or NOS	ERROR	NA	L	L
205	Tumor involves mucosa of more than one subsite of supraglottis, glottis, or subglottis without impairment of vocal cord mobility or	T3	NA	L	L

Code	Description	TNM 7 Map	TNM 6 Map	SS77 Map	SS2000 Map
205 cont'd	fixation of larynx or NOS	T3	NA	L	L
300	OBSOLETE DATA RETAINED V0200 Tumor involves adjacent regions(s) of larynx	ERROR	NA	L	L
305	Tumor involves mucosa of adjacent region(s) or larynx without impairment of vocal cord mobility or fixation of larynx or NOS	T3	NA	L	L
310	Localized, NOS	T3	NA	L	L
315	Involvement of mucosa of adjacent regions: Base of tongue Hypopharynx, NOS Pre-epiglottic tissues Postcricoid area Pyriform sinus Vallecula	T3	NA	RE	RE
320	Stated as T3 NOS with no other information on extension	T3	NA	L	L
340	Involvement of deep tissues of any structures in codes 105, 115, 125, or 305 Soft tissue NOS	T4a	NA	L	L
345	Involvement of any structures in code 105, 205, or 305 with impaired vocal cord mobility	T4a	NA	L	L
350	OBSOLETE DATA RETAINED V0200 Impaired vocal cord mobility	ERROR	NA	L	L

Code	Description	TNM 7 Map	TNM 6 Map	SS77 Map	SS2000 Map
400	Tumor limited to larynx WITH vocal cord fixation	T4a	NA	L	L
450	OBSOLETE DATA RETAINED V0200 Localized, NOS	ERROR	NA	L	L
460	(340, 350, or 400) + 315 (Involvement of any structures in codes 340, 350, or 400 + Mucosal involvement of any structures in code 315)	T4a	NA	RE	RE
500	Involvement of deep tissue or musculature of any structure in code 315 with or without vocal impairment or fixation of larynx or NOS	T4a	NA	RE	RE
600	OBSOLETE DATA RETAINED V0200 Hypopharynx, NOS Postcricoid area Pre-epiglottic tissues Pyriform sinus (pyriform fossa) Vallecula	ERROR	NA	RE	RE
680	Extension to/through cricoid cartilage and thyroid cartilage	T4a	NA	RE	D
700	Extension to/through: Cervical esophagus Deep muscle of tongue Extrinsic (strap) muscles Omohyoid Sternohyoid Sternothyroid Thyrohyoid	T4a	NA	D	D

Code	Description	TNM 7 Map	TNM 6 Map	SS77 Map	SS2000 Map
700 cont'd	Oropharynx Skin Soft tissues of neck Thyroid gland Trachea	T4a	NA	D	D
775	Stated as T4a with no other information on extension	T4a	NA	L	L
800	Further contiguous extension, including Mediastinal structures Prevertebral space Carotid artery (encased)	T4b	NA	D	D
801	Further contiguous extension including: Brain Dura Skull base Lower cranial nerves (IX, X, XI, XII) Masticator space	T4b	NA	D	D
810	Stated as T4b with no other information on extension	T4b	NA	D	D
815	Stated as T4NOS with no other information on extension	T4NOS	NA	L	L
950	OBSOLETE DATA RETAINED V0200 No evidence of primary tumor	ERROR	NA	U	U
999	Unknown extension Primary tumor cannot be assessed Not documented in patient record	NA	NA	U	U

MelanomaLarynxOther
CS Tumor Size/Ext Eval
See Standard Table

MelanomaLarynxOther**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 cricoids cartilage) is coded in Site-Specific Factors 1-7.

Note 3: 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.

Code	Description	TNM 7 Map	TNM 6 Map	SS77 Map	SS2000 Map
000	None; no regional lymph node involvement	N0	NA	NON E	NONE
100	Positive regional node(s): Level II node - Upper jugular Jugulodigastric (subdigastric) Upper deep cervical Level VI node - Anterior compartment group Laterotracheal Paralaryngeal Paratracheal - above suprasternal notch Perithyroidal Precricoid (Delphian) Pretracheal - above suprasternal notch Recurrent laryngeal Cervical, NOS Deep cervical, NOS Internal, jugular NOS: Regional lymph node, NOS	N1	NA	RN	RN
110	Positive regional node(s): Level I node Level IA - Submental Level IB - Submandibular (submaxillary), sublingual Level III node - Middle jugular Middle deep cervical	N1	NA	D	RN

Code	Description	TNM 7 Map	TNM 6 Map	SS77 Map	SS2000 Map
110 cont'd	Level IV node - Lower jugular Jugulo-omohyoid (supraomohyoid) Lower deep cervical Virchow node Retropharyngeal	N1	NA	D	RN
120	Positive regional node(s): Level V node - Posterior triangle group Level VA - Spinal accessory Level VB - Transverse cervical, supraclavicular (see Note 3) 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 Parapharyngeal Retroauricular (mastoid) Suboccipital	N1	NA	D	D
180	Stated as N1, no other information	N1	NA	RN	RN
190	OBSOLETE DATA RETAINED V0200 Stated as N2a, no other information	ERROR	NA	RN	RN

Code	Description	TNM 7 Map	TNM 6 Map	SS77 Map	SS2000 Map
200	OBSOLETE DATA RETAINED V0200 Multiple positive ipsilateral nodes listed in code 100	ERROR	NA	RN	RN
210	OBSOLETE DATA RETAINED V0200 Multiple positive ipsilateral nodes listed in code 110	ERROR	NA	D	RN
220	OBSOLETE DATA RETAINED V0200 Multiple positive ipsilateral nodes, any listed in code 120	ERROR	NA	D	D
290	OBSOLETE DATA RETAINED V0200 Stated as N2b, no other information	ERROR	NA	RN	RN
300	OBSOLETE DATA RETAINED V0200 Regional lymph nodes as listed in code 100: Positive ipsilateral node(s), not stated if single or multiple	ERROR	NA	RN	RN
310	OBSOLETE DATA RETAINED V0200 Regional lymph nodes as listed in code 110 Positive ipsilateral node(s), not stated if single or multiple	ERROR	NA	D	RN
320	OBSOLETE DATA RETAINED V0200 Regional lymph nodes as listed in code 120: Positive ipsilateral node(s), not stated if single or multiple	ERROR	NA	D	D
400	OBSOLETE DATA RETAINED V0200	ERROR	NA	RN	RN

Code	Description	TNM 7 Map	TNM 6 Map	SS77 Map	SS2000 Map
400 cont'd	Regional lymph nodes as listed in code 100: Positive bilateral or contralateral nodes	ERROR	NA	RN	RN
410	OBSOLETE DATA RETAINED V0200 Regional lymph nodes as listed in code 110 Positive bilateral or contralateral nodes	ERROR	NA	D	RN
420	OBSOLETE DATA RETAINED V0200 Regional lymph nodes as listed in code 120: Positive bilateral or contralateral nodes	ERROR	NA	D	D
490	OBSOLETE DATA RETAINED V0200 Stated as N2c, no other information	ERROR	NA	RN	RN
500	OBSOLETE DATA RETAINED V0200 Regional lymph nodes as listed in code 100: Positive node(s), not stated if ipsilateral, or bilateral, or contralateral, AND not stated if single or multiple	ERROR	NA	RN	RN
510	OBSOLETE DATA RETAINED V0200 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	ERROR	NA	D	RN
520	OBSOLETE DATA RETAINED V0200 Regional lymph nodes as listed in code 120:	ERROR	NA	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	ERROR	NA	D	D
600	OBSOLETE DATA RETAINED V0200 Stated as N2, NOS	ERROR	NA	RN	RN
700	OBSOLETE DATA RETAINED V0200 Stated as N3, no other information	ERROR	NA	RN	RN
800	Lymph nodes, NOS, no other information	N1	NA	RN	RN
999	Unknown; not stated Regional lymph nodes cannot be assessed Not documented in patient record	NX	NA	U	U

MelanomaLarynxOther**Reg LN Pos**

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

See Standard Table

MelanomaLarynxOther**Reg LN Exam**

See Standard Table

**MelanomaLarynxOther
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	NA	NONE	NONE
10	Distant lymph node(s) Mediastinal Distant lymph node(s), NOS	M1	NA	D	D
40	Distant metastases except distant lymph node(s)(code 10) Carcinomatosis	M1	NA	D	D
50	(10 + 40)	M1	NA	D	D
60	Distant metastasis, NOS Stated as M1, NOS	M1	NA	D	D
99	Unknown if distant metastasis Distant metastasis cannot be assessed Not documented in patient record	M0	NA	U	U