

Melanoma Hypopharynx**Malignant Melanoma of Pyriform Sinus, Hypopharynx, and Laryngopharynx****C12.9, C13.0-C13.2, C13.8-C13.9****M-8720-8790**

C12.9 Pyriform sinus

C13.0 Postcricoid region

C13.1 Hypopharyngeal aspect of aryepiglottic fold

C13.2 Posterior wall of hypopharynx

C13.8 Overlapping lesion of hypopharynx

C13.9 Hypopharynx, NOS (laryngopharynx)

Melanoma Hypopharynx**CS Tumor Size****See Standard Table****Melanoma Hypopharynx****CS Extension**

Note 1: AJCC does not include a Tis or TX category for melanoma of mucosa of head and neck sites. CS Extension codes of 000 and 999 are mapped to NA and AJCC stage group is derived as NA.

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

Note 3: Use codes 205 and 310 for extension involving the mucosa only of adjacent sites. Use higher codes for extension involving the deeper tissues of the primary or adjacent sites.

Note 4: Use code 300 for localized tumor only if no information is available to assign code 105, 205, or 320.

Note 5: Use code 320, 638, 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, intraepithelial, noninvasive	NA	NA	IS	IS
100	OBSOLETE DATA RETAINED V0200 Invasive tumor confined to one of the following subsites: Laryngopharynx Postcricoid area Posterior pharyngeal wall Pyriform sinus	ERROR	NA	L	L
105	Tumor confined to mucosa of one of the following subsites: Laryngopharynx Postcricoid area	T3	NA	L	L

Code	Description	TNM 7 Map	TNM 6 Map	SS77 Map	SS2000 Map
105 cont'd	Posterior pharyngeal wall Pyriform sinus	T3	NA	L	L
150	OBSOLETE DATA CONVERTED V0200 See code 420 Code 100 with tumor fixation	ERROR	ERROR	ERROR	ERROR
200	OBSOLETE DATA RETAINED V0200 Tumor invades more than one subsite of hypopharynx (listed in code 10) WITHOUT fixation	ERROR	NA	L	L
205	Tumor involves mucosa of more than one subsite of hypopharynx (listed in code 105) WITHOUT fixation	T3	NA	L	L
300	Localized, NOS	T3	NA	L	L
310	Involvement of mucosa only: Larynx Nasopharynx Oropharynx	T3	NA	RE	RE
320	Stated as T3 with no other information on extension	T3	NA	L	L
400	OBSOLETE DATA RETAINED V0200 Oropharynx	ERROR	NA	RE	RE
410	Involvement of deep soft tissue or musculature of any structure in code 105 or 205 Soft tissue, NOS	T4a	NA	L	L
415	410 + 310 Involvement of deep soft tissue or	T4a	NA	RE	RE

Code	Description	TNM 7 Map	TNM 6 Map	SS77 Map	SS2000 Map
415 cont'd	musculature of any structure in code 105 or 205 plus mucosal involvement of any structure in code 310	T4a	NA	RE	RE
420	Involvement of any structure in code 105 or 205 WITH tumor fixation	T4a	NA	RE	RE
430	Involvement of deep soft tissue or musculature of any structure in code 310	T4a	NA	RE	RE
450	OBSOLETE DATA RETAINED V0200 Code 200, 300, or 400 with tumor fixation	ERROR	NA	RE	RE
500	OBSOLETE DATA RETAINED V0200 Larynx	ERROR	NA	RE	RE
510	OBSOLETE DATA CONVERTED V0104 ; See code 450 Any of codes 100-400 WITH fixation of tumor or fixation, NOS	ERROR	ERROR	ERROR	ERROR
550	Fixation of hemilarynx or larynx	T4a	NA	RE	RE
600	Central compartment soft tissues of neck including: Prelaryngeal strap muscles Subcutaneous fat	T4a	NA	D	D
610	Esophagus	T4a	NA	RE	RE
620	Thyroid gland	T4a	NA	D	RE
630	Cricoid cartilage Thyroid cartilage Cartilage, NOS	T4a	NA	D	RE

Code	Description	TNM 7 Map	TNM 6 Map	SS77 Map	SS2000 Map
635	Hyoid bone Bone excluding base of skull Bone, NOS Overlying skin	T4a	NA	D D	D D
638	Stated as T4a with no other information on extension	T4a	NA	L	L
640	Prevertebral fascia/muscle(s)	T4b	NA	RE	RE
645	640 + 635 Prevertebral fascia/muscles plus any structure in code 635	T4b	NA	D	D
650	Carotid artery (encased)	T4b	NA	D	RE
655	650 + 635 Carotid artery plus any structure in code 635	T4b	NA	D	D
660	OBSOLETE DATA CONVERTED V0200 See code 635 Hyoid bone	ERROR	ERROR	ERROR	ERROR
700	Mediastinal structures	T4b	NA	D	D
800	OBSOLETE DATA RETAINED V0200 Further contiguous extension	ERROR	NA	D	D
801	Further contiguous extension including: Base of skull Brain Dura 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 T4 [NOS] with no other	T4NOS	NA	L	L

Code	Description	TNM 7 Map	TNM 6 Map	SS77 Map	SS2000 Map
815 cont'd	information on extension	T4NOS	NA	L	L
950	OBSOLETE DATA RETAINED V0200 No evidence of primary tumor	ERROR	NA	U	U
999	Unknown; extension not stated Primary tumor cannot be assessed Not documented in patient record	NA	NA	U	U

Melanoma Hypopharynx**CS Tumor Size/Ext Eval**

See Standard Table

Melanoma Hypopharynx**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 Rules, Section 2.

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 CSSite-Specific Factors 1, 3-9.

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.

Note 4: 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 5: Level II nodes have been moved from code 100 in CS Version 1 to code 120. Mandibular nodes are included with Facial nodes.

Code	Description	TNM 7 Map	TNM 6 Map	SS77 Map	SS2000 Map
000	No regional lymph node involvement	N0	NA	NONE	NONE
100	Positive regional node(s): Level III - Middle jugular: Middle deep cervical Level IV - Lower jugular: Jugulo-omohyoid (supraomohyoid)	N1	NA	RN	RN

Code	Description	TNM 7 Map	TNM 6 Map	SS77 Map	SS2000 Map
100 cont'd	Lower deep cervical Virchow node Retropharyngeal Cervical, NOS Deep cervical, NOS Internal jugular, NOS Regional lymph node(s), NOS	N1	NA	RN	RN
110	Positive regional node(s): Level I: Level IA - Submental Level IB - Submandibular (submaxillary), sublingual Level VI - Anterior compartment group: Laterotracheal Paralaryngeal Paratracheal - above suprasternal notch Perithyroidal Precricoid (Delphian) Prelaryngeal Pretracheal - above suprasternal notch Recurrent laryngeal Parapharyngeal	N1	NA	D	RN
120	Positive regional node(s): Level II - Upper jugular: Jugulodigastric (subdigastric) Upper deep cervical Level IIA - Anterior Level IIB - Posterior Level V node - Posterior triangle group: Posterior cervical 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):	N1	NA	D	D

Code	Description	TNM 7 Map	TNM 6 Map	SS77 Map	SS2000 Map
120 cont'd	Esophageal groove Paratracheal - below suprasternal notch Pretracheal - below suprasternal notch Other groups: Facial: Buccinator (buccal) Mandibular Nasolabial Parotid: Infraauricular Intraparotid Periparotid Preauricular Retroauricular (mastoid) Suboccipital	N1	NA	D	D
180	Stated as N1 with no other information on regional lymph nodes	N1	NA	RN	RN
190	OBSOLETE DATA RETAINED V0200 Stated as N2a, no other information	ERROR	NA	RN	RN
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 listed in code 120	ERROR	NA	D	D
290	OBSOLETE DATA RETAINED V0200 Stated as N2b, no other information	ERROR	NA	RN	RN

Code	Description	TNM 7 Map	TNM 6 Map	SS77 Map	SS2000 Map
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 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

Code	Description	TNM 7 Map	TNM 6 Map	SS77 Map	SS2000 Map
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: 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	N1	NA	RN	RN
999	Unknown; regional lymph nodes not stated Regional lymph nodes cannot be assessed Not documented in patient record	NX	NA	U	U

**Melanoma Hypopharynx
CS Lymph Nodes Eval
See Standard Table**

Melanoma Hypopharynx**Regional Nodes Positive****See Standard Table**

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

Melanoma Hypopharynx**Regional Nodes Examined****See Standard Table****Melanoma Hypopharynx****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 distant metastasis	M0	NA	NONE	NONE
10	Distant lymph node(s): Mediastinal (excluding superior mediastinal nodes) Distant lymph node(s), NOS	M1	NA	D	D
40	Distant metastasis except distant lymph node(s) Carcinomatosis	M1	NA	D	D
50	40 + 10 Distant metastasis plus distant lymph node(s)	M1	NA	D	D
60	Distant metastasis, NOS Stated as M1 with no other information on distant metastasis	M1	NA	D	D
99	Unknown; distant metastasis not stated Distant metastasis cannot be assessed Not documented in patient record	M0	NA	U	U

Melanoma Hypopharynx**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