

CARCINOMA OF SKIN OF THE HEAD AND NECK REGION DATA SHEET (ICD10 C00.0-2, C00.6, C44.0, C44.2-4)

UICC TNM 9th EDITION STAGING SUMMARY

Stage Group	T stage	N stage	M stage
Stage 0	Tis	N0	M0
Stage I	T1	N0	M0
Stage II	T2	N0	M0
Stage III	T3	N0	M0
	T1, T2, T3	N1	M0
Stage IVA	T1, T2, T3	N2, N3	M0
	T4	Any N	M0
Stage IVB	Any T	Any N	M1

TNM Clinical Classification	
T – Primary Tumour	
cTX	Primary tumour cannot be identified
cT0	No evidence of primary tumour
cTis	Carcinoma in situ
cT1	Tumour 2 cm or less in greatest dimension
cT2	Tumour >2 cm and ≤4 cm in greatest dimension
cT3	Tumour >4 cm in greatest dimension or minor bone erosion or perineural invasion or deep invasion ¹
cT4a	Tumour with gross cortical bone/marrow invasion
cT4b	Tumour with foraminal involvement of the axial skeleton ² , invasion with foraminal involvement or invasion into the epidural space
¹ Deep invasion is defined as invasion beyond the subcutaneous fat or >6 mm (as measured from the granular layer of adjacent normal epidermis to the base of the tumour). Perineural invasion is defined as tumour cells within the nerve sheath of a nerve lying deeper than the dermis or measuring 0.1 mm or larger in calibre or involvement of five or more nerves per section, without foramen or skull base invasion or transgression.	
² Axial skeleton includes the skull, vertebrae and sacrum.	

N – Regional Lymph Nodes	
cNX	Regional lymph nodes cannot be assessed
cN0	No regional lymph node metastasis
cN1	Metastasis in a single ipsilateral lymph node, 3 cm or less in greatest dimension without extranodal extension
cN2	Metastasis described as: cN2a - Metastasis in a single ipsilateral lymph node more than 3 cm but not more than 6 cm in greatest dimension without extranodal extension cN2b - Metastasis in multiple ipsilateral lymph nodes, not more than 6 cm in greatest dimension, without extranodal extension cN2c - Metastasis in bilateral or contralateral lymph nodes, not more than 6 cm in greatest dimension, without extranodal extension
cN3a	Metastasis in a lymph node more than 6 cm in greatest dimension without extranodal extension
cN3b	Metastasis in a single or multiple lymph nodes with clinical extranodal extension*
Note * Clinical extranodal extension is defined as the presence of skin involvement or soft tissue invasion with deep fixation to underlying muscle or adjacent anatomical structures or clinical signs of nerve involvement. Image detected unequivocal extranodal extension is becoming standard.	

M – Distant Metastasis	
cM0	No distant metastasis
cM1	Distant metastasis

TNM Pathological Classification	
<i>The pT categories correspond to the cT categories</i>	
<i>pN – Regional Lymph Nodes - Histological examination of a selective neck dissection specimen should ordinarily include 10 or more lymph nodes. Histological examination of a radical or modified radical neck dissection specimen should ordinarily include 15 or more lymph nodes.</i>	
pNX	Regional lymph nodes cannot be assessed
pN0	No regional lymph node metastasis
pN1	Metastasis in a single ipsilateral lymph node, 3 cm or less in greatest dimension without extranodal extension
pN2	Metastasis described as: pN2a - Metastasis in a single ipsilateral lymph node, less than 3 cm in greatest dimension with extranodal extension or, more than 3 cm but not more than 6 cm in greatest dimension without extranodal extension pN2b - Metastasis in multiple ipsilateral lymph nodes, not more than 6 cm in greatest dimension, without extranodal extension pN2c - Metastasis in bilateral or contralateral lymph nodes, not more than 6 cm in greatest dimension, without extranodal extension
pN3a	Metastasis in a lymph node more than 6 cm in greatest dimension without extranodal extension
pN3b	Metastasis in a lymph node more than 3 cm in greatest dimension with extranodal extension or multiple ipsilateral, or any contralateral or bilateral node(s) with extranodal extension

Note

Pathological extranodal extension (pENE) should only be diagnosed when tumour that is present within the confines of a lymph node definitively transgresses through the entire thickness of the lymph node capsule into the surrounding connective tissue, with or without stromal reaction. A soft tissue deposit should be considered as at least one lymph node with extranodal extension if it occurs at a site where a regional lymph node would be expected