

LUNG C340–C349

Primary Site

- C340 **Main bronchus**
Carina
Hilum
- C341 **Upper lobe, lung**
Lingula
Apex
- C342 **Middle lobe, lung** (Right lung only)
- C343 **Lower lobe, lung**
Base
- C348 **Overlapping** lesion of lung
- C349 **Lung, NOS**
Bronchus, NOS

Laterality

Laterality **must** be **coded** for all subsites except carina.

Tumor Size

Priorities for coding size

1. **Pathology** report
2. **Operative** report
3. **Endoscopic** examination, where applicable
4. **Imaging** reports
Imaging reports do not have a priority
Code the largest size of tumor recorded on any of the imaging reports

General Instructions for Coding Tumor Size

DO **NOT** CODE size of **hilar mass** unless primary is stated to be in the hilum.

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Collaborative Staging Codes

Lung

C34.0-C34.3, C34.8-C34.9

C34.0 Main bronchus

C34.1 Upper lobe, lung

C34.2 Middle lobe, lung

C34.3 Lower lobe, lung

C34.8 Overlapping lesion of lung

C34.9 Lung, NOS

Note: Laterality must be coded for this site (except carina).

CS Tumor Size	CS Site-Specific Factor 1	The following tables are available at the collaborative staging website: Histology Exclusion Table AJCC Stage Extension Size Table Mets Size Table for Mets at DX 00 Mets Size Table for Mets at DX 99
CS Extension	CS Site-Specific Factor 2	
CS TS/Ext-Eval	CS Site-Specific Factor 3	
CS Lymph Nodes	CS Site-Specific Factor 4	
CS Reg Nodes Eval	CS Site-Specific Factor 5	
Reg LN Pos	CS Site-Specific Factor 6	
Reg LN Exam		
CS Mets at DX		
CS Mets Eval		

Lung

CS Tumor Size

Note: Do not code size of hilar mass unless primary is stated to be in the hilum.

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 1 cm
992	Described as less than 2 cm
993	Described as less than 3 cm
994	Described as less than 4 cm
995	Described as less than 5 cm
996	Malignant cells present in bronchopulmonary secretions, but no tumor seen radiographically or during bronchoscopy; "occult" carcinoma
997	Diffuse (entire lobe)
998	Diffuse (entire lung or NOS)
999	Unknown; size not stated Not documented in patient record

Lung

CS Extension

Note 1: Direct extension to or other involvement of structures considered M1 in AJCC staging is coded in the data item CS Mets at DX. This includes: sternum; skeletal muscle; skin of chest; contralateral lung or mainstem bronchus; separate tumor nodule(s) in different lobe, same lung, or in contralateral lung.

Note 2: Distance from Carina. Assume tumor is greater than or equal to 2 cm from carina if lobectomy, segmental resection, or wedge resection is done.

Note 3: Opposite Lung. If no mention is made of the opposite lung on a chest x-ray, assume it is not involved.

Note 4: Bronchopneumonia. "Bronchopneumonia" is not the same thing as "obstructive pneumonitis" and should not be coded as such.

Note 5: Pulmonary Artery/Vein. An involved pulmonary artery/vein in the mediastinum is coded to 70 (involvement of major blood vessel). However, if the involvement of the artery/vein appears to be only within lung tissue and not in the mediastinum, it would not be coded to 70.

Note 6: Pleural Effusion.

A. Note from SEER manual: Ignore pleural effusion that is negative for tumor. Assume that a pleural effusion is negative if a resection is done.

B. Note from AJCC manual: Most pleural effusions associated with lung cancers are due to tumor. However, there are a few patients in whom multiple cytopathologic examinations of pleural fluid are negative for tumor.

In these cases, fluid is non-bloody and is not an exudate. When these elements and clinical judgement dictate that the effusion is not related to the tumor, the effusion should be excluded as a staging element and the patient should be staged T1, T2, or T3.

Note 7: Vocal cord paralysis (resulting from involvement of recurrent branch of the vagus nerve), superior vena cava obstruction, or compression of the trachea or the esophagus may be related to direct extension of the primary tumor or to lymph node involvement. The treatment options and prognosis associated with these manifestations of disease extent fall within the T4-Stage IIIB category; therefore, generally use code 70 for these manifestations.

HOWEVER, if the primary tumor is peripheral and clearly unrelated to vocal cord paralysis, vena cava obstruction, or compression of the trachea or the esophagus, code these manifestations as mediastinal lymph node involvement (code 20) in CS Lymph Nodes unless there is a statement of involvement by direct extension from the primary tumor.

Code	Description	TNM	SS77	SS2000
00	In situ; noninvasive; intraepithelial	Tis	IS	IS
10	Tumor confined to one lung, WITHOUT extension or conditions described in codes 20-80 (excluding primary in main stem bronchus) (EXCLUDES superficial tumor as described in code 11)	*	L	L
11	Superficial tumor of any size with invasive component limited to bronchial wall, WITH or WITHOUT proximal extension to the main stem bronchus	T1	L	L
20	Extension from other parts of lung to main stem bronchus, NOS (EXCLUDES superficial tumor as described in code 11) Tumor involving main stem bronchus greater than or equal to 2.0 cm from carina (primary in lung or main stem bronchus)	T2	L	L
21	Tumor involving main stem bronchus, NOS (distance from carina not stated and no surgery as described in Note 2)	T2	L	L
23	Tumor confined to hilus	*	L	L
25	Tumor confined to the carina	*	L	L
30	Localized, NOS	T1	L	L

40	Atelectasis/obstructive pneumonitis that extends to the hilar region but does not involve the entire lung (or atelectasis/obstructive pneumonitis, NOS) WITHOUT pleural effusion	T2	RE	RE
45	Extension to: Pleura, visceral or NOS (WITHOUT pleural effusion) Pulmonary ligament (WITHOUT pleural effusion)	T2	RE	RE
50	Tumor of/involving main stem bronchus less than 2.0 cm from carina	T3	L	RE
52	(40) + (50)	T3	RE	RE
53	(45) + (50)	T3	RE	RE
55	Atelectasis/obstructive pneumonitis involving entire lung	T3	RE	RE
56	Parietal pericardium or pericardium, NOS	T3	RE	RE
59	Invasion of phrenic nerve	T3	RE	RE
60	Direct extension to: Brachial plexus, inferior branches or NOS, from superior sulcus Chest (thoracic) wall Diaphragm Pancoast tumor (superior sulcus syndrome), NOS Parietal pleura Note: For separate lesion in chest wall or diaphragm, see CS Mets at DX.	T3	D	RE
61	Superior sulcus tumor WITH encasement of subclavian vessels OR WITH unequivocal involvement of superior branches of brachial plexus (C8 or above)	T4	D	RE
65	Multiple masses/separate tumor nodule(s) in the SAME lobe "Satellite nodules" in SAME lobe	T4	L	RE
70	Blood vessel(s), major (EXCEPT aorta and inferior vena cava, see codes 74 and 77) Azygos vein Pulmonary artery or vein Superior vena cava (SVC syndrome) Carina from lung/mainstem bronchus Compression of esophagus or trachea not specified as direct extension Esophagus Mediastinum, extrapulmonary or NOS Nerve(s): Cervical sympathetic (Horner's syndrome) Recurrent laryngeal (vocal cord paralysis) Vagus Trachea	T4	RE	RE
71	Heart Visceral pericardium	T4	D	D

72	Malignant pleural effusion Pleural effusion, NOS	T4	D	D
73	Adjacent rib	T3	D	D
74	Aorta	T4	D	RE
75	Vertebra(s) Neural foramina	T4	D	D
76	Pleural tumor foci separate from direct pleural invasion	T4	D	D
77	Inferior vena cava	T4	D	D
79	Pericardial effusion, NOS; malignant pericardial effusion	T4	D	D
80	Further contiguous extension (except to structures specified in CS Mets at DX)	T4	D	D
95	No evidence of primary tumor	T0	U	U
98	Tumor proven by presence of malignant cells in sputum or bronchial washings but not visualized by imaging or bronchoscopy; "occult" carcinoma	TX	U	U
99	Unknown extension Primary tumor cannot be assessed Not documented in patient record	TX	U	U

*For Extension codes 10, 23, and 25 ONLY, the T category is assigned based on the value of tumor size, as shown in the Extension Size table for this site.

Lung CS TS/Ext-Eval

Code	Description	Staging Basis
0	No surgical resection done. Evaluation based on physical examination, imaging examination, or other non-invasive clinical evidence. No autopsy evidence used.	c
1	No surgical resection done. Evaluation based on endoscopic examination, diagnostic biopsy, including fine needle aspiration biopsy, or other invasive techniques including surgical observation without biopsy. No autopsy evidence used.	p
2	No surgical resection done, but evidence derived from autopsy (tumor was suspected or diagnosed prior to autopsy)	p
3	Surgical resection performed WITHOUT pre-surgical systemic treatment or radiation OR surgical resection performed, unknown if pre-surgical systemic treatment or radiation performed. Evidence acquired before treatment, supplemented or modified by the additional evidence acquired during and from surgery, particularly from pathologic examination of the resected specimen	p
5	Surgical resection performed WITH pre-surgical systemic treatment or radiation, BUT tumor size/extension based on clinical evidence.	c
6	Surgical resection performed WITH pre-surgical systemic treatment or radiation; tumor size/extension based on pathologic evidence	y
8	Evidence from autopsy only (tumor was unsuspected or undiagnosed prior to autopsy)	a

9	Unknown if surgical resection done Not assessed; cannot be assessed Unknown if assessed Not documented in patient record	c
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Lung

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 at mediastinoscopy/x-ray, the description is "mass", "adenopathy", or "enlargement" of any of the lymph nodes named in Regional Lymph Nodes, assume that at least regional lymph nodes are involved.

Note 3: The words "no evidence of spread" or "remaining examination negative" are sufficient information to consider regional lymph nodes negative in the absence of any statement about nodes.

Note 4: Vocal cord paralysis (resulting from involvement of recurrent branch of the vagus nerve), superior vena cava obstruction, or compression of the trachea or the esophagus may be related to direct extension of the primary tumor or to lymph node involvement. The treatment options and prognosis associated with these manifestations of disease extent fall within the T4-Stage IIIB category; therefore, generally use code 70 for these manifestations. HOWEVER, if the primary tumor is peripheral and clearly unrelated to vocal cord paralysis, vena cava obstruction, or compression of the trachea or the esophagus, code these manifestations as mediastinal lymph node involvement (code 20) in CS Lymph Nodes unless there is a statement of involvement by direct extension from the primary tumor.

Code	Description	TNM	SS77	SS2000
00	None; no regional lymph node involvement	N0	NONE	NONE
10	Regional lymph node(s), ipsilateral: Bronchial Hilar (bronchopulmonary) (proximal lobar) (pulmonary root) Intrapulmonary nodes, including involvement by direct extension: Interlobar Lobar Segmental Subsegmental Peri/parabronchial	N1	RN	RN
20	Regional lymph node(s), ipsilateral: Aortic [above diaphragm], NOS: Peri/para-aortic, NOS: Ascending aorta (phrenic) Subaortic (aortico-pulmonary window) Carinal (tracheobronchial) (tracheal bifurcation) Mediastinal, NOS: Anterior Posterior (tracheoesophageal) Pericardial Peri/paraesophageal Peri/paratracheal, NOS: Azygos (lower peritracheal) Pre- and retrotracheal, NOS: Precarinal Pulmonary ligament Subcarinal	N2	RN	RN
50	Regional lymph node(s), NOS	N1	RN	RN
60	Contralateral/bilateral hilar (bronchopulmonary) (proximal lobar) (pulmonary root) Contralateral/bilateral mediastinal	N3	D	D

60, cont'd	Scalene (inferior deep cervical), ipsilateral or contralateral Supraclavicular (transverse cervical), ipsilateral or contralateral			
80	Lymph nodes, NOS	N1	RN	RN
99	Unknown; not stated Regional lymph node(s) cannot be assessed Not documented in patient record	NX	U	U

Lung

CS Reg Nodes Eval

Note: This item reflects the validity of the classification of the item CS Lymph Nodes only according to diagnostic methods employed.

Code	Description	Staging Basis
0	No regional lymph nodes removed for examination. Evidence based on physical examination, imaging examination, or other non-invasive clinical evidence. No autopsy evidence used.	c
1	No regional lymph nodes removed for examination. Evidence based on endoscopic examination, diagnostic biopsy including fine needle aspiration of lymph node(s) or their invasive techniques, including surgical observation without biopsy. No autopsy evidence used.	p
2	No regional lymph nodes removed for examination, but evidence derived from autopsy (tumor was suspected or diagnosed prior to autopsy)	p
3	Regional lymph nodes removed for examination (removal of at least 1 lymph node) WITHOUT pre-surgical systemic treatment or radiation OR lymph nodes removed for examination, unknown if pre-surgical systemic treatment or radiation performed	p
5	Regional lymph nodes removed for examination WITH pre-surgical systemic treatment or radiation, BUT lymph node evaluation based on clinical evidence.	c
6	Regional lymph nodes removed for examination WITH pre-surgical systemic treatment or radiation, and lymph node evaluation based on pathologic evidence	y
8	Evidence from autopsy; tumor was unsuspected or undiagnosed prior to autopsy	a
9	Unknown if lymph nodes removed for examination Not assessed; cannot be assessed Unknown if assessed Not documented in patient record	c

Lung

Reg LN Pos

SEE STANDARD TABLE

Lung

Reg LN Exam

SEE STANDARD TABLE

**Lung
CS Mets at DX**

Code	Description	TNM	SS77	SS2000
00	No; none	*	NONE	NONE
10	Distant lymph node(s), including cervical nodes	M1	D	D
35	Separate tumor nodule(s) in different lobe, same lung	M1	L	D
37	Extension to: Sternum Skeletal muscle Skin of chest	M1	D	D
39	Extension to: Contralateral lung Contralateral main stem bronchus Separate tumor nodule(s) in contralateral lung	M1	D	D
40	Abdominal organs Distant metastases except distant lymph node(s) (code 10) except those specified in codes 35 to 39, including separate lesion in chest wall or diaphragm Distant metastasis, NOS Carcinomatosis	M1	D	D
50	Distant metastases + Distant node(s) (10) + any of [(35) to (40)]	M1	D	D
99	Unknown if distant metastasis Distant metastasis cannot be assessed Not documented in patient record	**	U	U

*For CS Mets at DX code 00 only, the M category is assigned based on the value of CS Tumor Size, using the Mets Size Table for Mets at DX code 00 for this site.

**For CS Mets at DX code 99 only, the M category is assigned on the value of CS Tumor Size, using the Mets Size Table for Mets at DX code 99 for this site.

**Lung
CS Mets Eval**

SEE STANDARD TABLE

**Lung
CS Site-Specific Factor 1**

Code	Description
888	Not applicable for this site

**Lung
CS Site-Specific Factor 2**

Code	Description
888	Not applicable for this site

Lung**CS Site-Specific Factor 3**

Code	Description
888	Not applicable for this site

Lung**CS Site-Specific Factor 4**

Code	Description
888	Not applicable for this site

Lung**CS Site-Specific Factor 5**

Code	Description
888	Not applicable for this site

Lung**CS Site-Specific Factor 6**

Code	Description
888	Not applicable for this site

Collaborative Staging Codes

Heart, Mediastinum

C38.0-C38.3, C38.8

C38.0 Heart

C38.1 Anterior mediastinum

C38.2 Posterior mediastinum

C38.3 Mediastinum, NOS

C38.8 Overlapping lesion of heart, mediastinum and pleura

CS Tumor Size	CS Site-Specific Factor 1	The following tables are available at the collaborative staging website: Histology Exclusion Table AJCC Stage Extension Size Table
CS Extension	CS Site-Specific Factor 2	
CS TS/Ext-Eval	CS Site-Specific Factor 3	
CS Lymph Nodes	CS Site-Specific Factor 4	
CS Reg Nodes Eval	CS Site-Specific Factor 5	
Reg LN Pos	CS Site-Specific Factor 6	
Reg LN Exam		
CS Mets at DX		
CS Mets Eval		

Heart, Mediastinum

CS Tumor Size

SEE STANDARD TABLE

Heart, Mediastinum

CS Extension

Note: Sarcomas of the heart and mediastinum are classified as deep tumors. A deep tumor is located either exclusively beneath the superficial fascia, superficial to the fascia with invasion of or through the fascia, or both superficial yet beneath the fascia.

Code	Description	TNM	SS77	SS2000
10	Invasive tumor confined to site of origin	*	L	L
30	Localized, NOS	*	L	L
40	Adjacent connective tissue: Heart: Visceral pericardium (epicardium) (See note in General Instructions on adjacent connective tissue)	*	RE	RE
60	Adjacent organs/structures: Heart: Ascending aorta Parietal pericardium Vena cava Mediastinum: Descending aorta Esophagus Large (named) artery(ies) Large (named) vein(s) Pericardium, NOS Parietal Visceral (epicardium) Phrenic nerve(s)	*	RE	RE

60, cont'd	Pleura, NOS Parietal pleura Visceral pleura of lung Sternum Sympathetic nerve trunk(s) Thoracic duct Thymus Trachea, parietal pleura Vertebra(e)			
80	Further contiguous extension	*	D	D
95	No evidence of primary tumor	T0	U	U
99	Unknown extension Primary tumor cannot be assessed Not documented in patient record	TX	U	U

*For Extension codes 10-80 ONLY, the T category is assigned based on value of CS Tumor Size from the Extension Size Table for this site.

Heart, Mediastinum

CS TS/Ext-Eval

SEE STANDARD TABLE

Heart, Mediastinum

CS Lymph Nodes

Note 1: Regional lymph nodes are defined as those in the vicinity of the primary tumor.

Note 2: Regional lymph node involvement is rare. For this schema, if there is no mention of lymph node involvement clinically, assume that lymph nodes are negative (code 00). Use code 99 (Unknown) only when there is no available information on the extent of the patient's disease, for example, when a lab-only case is abstracted from a biopsy report and no clinical history is available.

Code	Description	TNM	SS77	SS2000
00	None; no regional lymph node involvement	N0	NONE	NONE
10	Regional lymph node(s): Aortic (above diaphragm), NOS: Peri/para-aortic, NOS Ascending aorta (phrenic) Subaortic (aortico-pulmonary window) Carinal (tracheobronchial) (tracheal bifurcation) Mediastinal, NOS: Anterior Posterior (tracheoesophageal) Pericardial Peri/paraesophageal Peri/paratracheal, NOS: Azygos (lower peritracheal) Pre- and retrotracheal, NOS: Precarinal Pulmonary ligament Subcarinal Regional lymph node(s), NOS	N1	RN	RN

80	Lymph nodes, NOS	N1	RN	RN
99	Unknown (see Note 2)	NX	U	U

Heart, Mediastinum
CS Reg Nodes Eval
SEE STANDARD TABLE

Heart, Mediastinum
Reg LN Pos
SEE STANDARD TABLE

Heart, Mediastinum
Reg LN Exam
SEE STANDARD TABLE

Heart, Mediastinum
CS Mets at DX
SEE STANDARD TABLE

Heart, Mediastinum
CS Mets Eval
SEE STANDARD TABLE

Heart, Mediastinum
CS Site-Specific Factor 1

Code	Description
888	Not applicable for this site

Heart, Mediastinum
CS Site-Specific Factor 2

Code	Description
888	Not applicable for this site

Heart, Mediastinum
CS Site-Specific Factor 3

Code	Description
888	Not applicable for this site

Heart, Mediastinum**CS Site-Specific Factor 4**

Code	Description
888	Not applicable for this site

Heart, Mediastinum**CS Site-Specific Factor 5**

Code	Description
888	Not applicable for this site

Heart, Mediastinum**CS Site-Specific Factor 6**

Code	Description
888	Not applicable for this site

Collaborative Staging Codes

Pleura

C38.4

C38.4 Pleura, NOS

CS Tumor Size	CS Site-Specific Factor 1 - Pleural Effusion	The following tables are available at the collaborative staging website: Histology Exclusion Table AJCC Stage Pleural Effusion Extension Table
CS Extension	CS Site-Specific Factor 2	
CS TS/Ext-Eval	CS Site-Specific Factor 3	
CS Lymph Nodes	CS Site-Specific Factor 4	
CS Reg Nodes Eval	CS Site-Specific Factor 5	
Reg LN Pos	CS Site-Specific Factor 6	
Reg LN Exam		
CS Mets at DX		
CS Mets Eval		

Pleura

CS Tumor Size

SEE STANDARD TABLE

Pleura

CS Extension

Note: Pleural effusion does not affect the coding of the CS Extension field, but is coded as Site-Specific Factor 1.

Code	Description	TNM	SS77	SS2000
10	Invasive tumor (mesothelioma) confined to pleura, NOS	T1NOS	*	*
12	Ipsilateral parietal pleura, including mediastinal or diaphragmatic pleura, WITHOUT involvement of visceral pleura	T1a	*	*
14	Ipsilateral parietal pleura, including mediastinal or diaphragmatic pleura, WITH focal involvement of visceral pleura	T1b	*	*
16	Ipsilateral parietal pleura, including mediastinal or diaphragmatic pleura, involvement of visceral pleura not stated	T1NOS	*	*
20	Ipsilateral pleura WITH nodule(s) beneath visceral pleural surface Ipsilateral pleural surface with confluent visceral pleural tumor (including fissure)	T2	*	*
30	Localized, NOS	T1NOS	*	*
42	Diaphragm (diaphragmatic muscle)	T2	*	*
50	Mesothelioma nodule(s) which have broken through the visceral pleural surface to the lung surface Lung parenchyma, or lung involvement, NOS	T2	*	*
52	Adjacent connective tissue: Endothoracic fascia Pericardium, non-transmural or NOS	T3	*	*
61	Chest wall, solitary focus of tumor ONLY Mediastinal tissues, mediastinal fat	T3	*	*
63	Diffuse or multifocal invasion of soft tissues of chest wall Heart muscle, myocardium	T4	*	*

63, cont'd	Medistinal organs Rib			
65	Extension to internal surface of pericardium	T4	*	*
69	Pericardial effusion with positive cytology	T4	*	*
78	Contralateral pleura (For contralateral lung, see CS Mets at DX)	T4	*	*
80	Further contiguous extension: Brachial plexus Cervical tissues Intra-abdominal organs Peritoneum Spine	T4	*	*
95	No evidence of primary tumor	T0	*	*
99	Unknown extension Primary tumor cannot be assessed Not documented in patient record	TX	*	*

* The mapping to Summary Stage 1977 and Summary Stage 2000 depends on the value of Site-Specific Factor 1, Pleural Effusion. See the extra table, Extension Pleural Effusion Table, for details.

Pleura

CS TS/Ext-Eval

SEE STANDARD TABLE

Pleura

CS Lymph Nodes

Code	Description	TNM	SS77	SS2000
00	No regional lymph node involvement	N0	NONE	NONE
10	Regional lymph node(s), ipsilateral, intrapulmonary: Hilar: Bronchopulmonary Proximal lobar Pulmonary root Intrapulmonary: Interlobar Lobar Segmental Subsegmental Peri/parabronchial	N1	RN	RN
20	Regional lymph node(s), ipsilateral, mediastinal: Aortic [above diaphragm], NOS: Aorto-pulmonary window Ascending aorta Peri/para-aortic Phrenic Subaortic Carinal: Tracheobronchial Tracheal bifurcation Internal mammary (parasternal)	N2	RN	RN

20, cont'd	Mediastinal, NOS: Anterior Posterior (tracheoesophageal) Pericardial Peri/paraesophageal [below carina] Peri/paratracheal, NOS: Lower peritracheal (azygos) Upper paratracheal Pretracheal and retrotracheal, NOS: Precarinal Prevascular Pulmonary ligament Subcardial Subcarinal			
50	Regional lymph node(s), NOS	N1	RN	RN
70	Contralateral or bilateral nodes specified in codes 10 or 20 Ipsilateral, contralateral or bilateral nodes: Scalene (inferior deep cervical) Supraclavicular (transverse cervical)	N3	D	D
80	Lymph nodes, NOS	N1	RN	RN
99	Unknown; not stated Regional lymph node(s) cannot be assessed Not documented in patient record	NX	U	U

Pleura

CS Reg Nodes Eval

SEE STANDARD TABLE

Pleura

Reg LN Pos

SEE STANDARD TABLE

Pleura

Reg LN Exam

SEE STANDARD TABLE

Pleura

CS Mets at DX

Code	Description	TNM	SS77	SS2000
00	No; none	M0	NONE	NONE
10	Distant lymph node(s), including cervical nodes	M1	D	D
35	Direct extension to contralateral lung	M1	D	D
40	Distant metastases, except code [(10) or (35)] Distant metastasis, NOS (includes discontinuous involvement of contralateral pleura/chest wall) Carcinomatosis	M1	D	D

50	(10) + (40) Distant lymph node(s) plus distant metastases	M1	D	D
99	Unknown if distant metastasis Distant metastasis cannot be assessed Not documented in patient record	MX	U	U

Pleura

CS Mets Eval

SEE STANDARD TABLE

Pleura

CS Site-Specific Factor 1 Pleural Effusion

Code	Description
000	No pleural effusion
010	Pleural effusion, non-malignant
020	Pleural effusion, malignant
030	Pleural effusion, NOS
999	Unknown if pleural effusion

Pleura

CS Site-Specific Factor 2

Code	Description
888	Not applicable for this site

Pleura

CS Site-Specific Factor 3

Code	Description
888	Not applicable for this site

Pleura

CS Site-Specific Factor 4

Code	Description
888	Not applicable for this site

Pleura

CS Site-Specific Factor 5

Code	Description
888	Not applicable for this site

Pleura

CS Site-Specific Factor 6

Code	Description
888	Not applicable for this site

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Collaborative Staging Codes

Other and Ill-Defined Respiratory Sites and Intrathoracic Organs

C39.0, C39.8-C39.9

C39.0 Upper respiratory tract, NOS

C39.8 Overlapping lesion of respiratory system and intrathoracic organs

C39.9 Ill-defined sites within respiratory system

Note: AJCC does not define TNM staging for this site.

CS Tumor Size	CS Site-Specific Factor 1	The following tables are available at the collaborative staging website: Histologies for Which AJCC Staging Is Not Generated AJCC Stage
CS Extension	CS Site-Specific Factor 2	
CS TS/Ext-Eval	CS Site-Specific Factor 3	
CS Lymph Nodes	CS Site-Specific Factor 4	
CS Reg Nodes Eval	CS Site-Specific Factor 5	
Reg LN Pos	CS Site-Specific Factor 6	
Reg LN Exam		
CS Mets at DX		
CS Mets Eval		

Other and Ill-Defined Respiratory Sites and Intrathoracic Organs

CS Tumor Size

SEE STANDARD TABLE

Other and Ill-Defined Respiratory Sites and Intrathoracic Organs

CS Extension

Code	Description	TNM	SS77	SS2000
00	In situ; noninvasive; intraepithelial	NA	IS	IS
10	Invasive tumor confined to site of origin	NA	L	L
30	Localized, NOS	NA	L	L
40	Adjacent connective tissue	NA	RE	RE
60	Adjacent organs/structures Descending aorta Esophagus Large (named) artery(ies) Large (named) vein(s) Pericardium, NOS Parietal Visceral (epicardium) Phrenic nerve(s) Pleura, NOS Parietal Visceral Sternum Sympathetic nerve trunk(s) Thoracic duct Thymus Trachea Vertebra(e) Visceral pleura of lung	NA	RE	RE
80	Further contiguous extension	NA	D	D

95	No evidence of primary tumor	NA	U	U
99	Unknown extension Primary tumor cannot be assessed Not documented in patient record	NA	U	U

Other and Ill-Defined Respiratory Sites and Intrathoracic Organs

CS TS/Ext-Eval

Code	Description	Staging Basis
9	Not applicable for this site	NA

Other and Ill-Defined Respiratory Sites and Intrathoracic Organs

CS Lymph Nodes

Note: Code only regional nodes and nodes, NOS, in this field. Distant nodes are coded in the field Mets at DX.

Code	Description	TNM	SS77	SS2000
00	None; no regional lymph node involvement	NA	NONE	NONE
10	Regional lymph nodes: Aortic [above diaphragm], NOS: Peri/para-aortic, NOS: Ascending aorta (phrenic) Subaortic (aortico-pulmonary window) Carinal (tracheobronchial) (tracheal bifurcation) Hilar (bronchopulmonary) (proximal lobar) (pulmonary root) Intrapulmonary, NOS: Interlobar Lobar Segmental Subsegmental Mediastinal, NOS: Anterior Posterior (tracheoesophageal) Peri/parabronchial Pericardial Peri/paraesophageal Peri/paratracheal, NOS: Azygos (lower peritracheal) Pre- and retrotracheal, NOS: Precarinal Pulmonary ligament Subcarinal Regional lymph node(s), NOS	NA	RN	RN
80	Lymph nodes, NOS	NA	RN	RN
99	Unknown; not stated Regional lymph node(s) cannot be assessed Not documented in patient record	NA	U	U

Other and Ill-Defined Respiratory Sites and Intrathoracic Organs**CS Reg Nodes Eval**

Code	Description	Staging Basis
9	Not applicable for this site	NA

Other and Ill-Defined Respiratory Sites and Intrathoracic Organs**Reg LN Pos**

SEE STANDARD TABLE

Other and Ill-Defined Respiratory Sites and Intrathoracic Organs**Reg LN Exam**

SEE STANDARD TABLE

Other and Ill-Defined Respiratory Sites and Intrathoracic Organs**CS Mets at DX**

Code	Description	TNM	SS77	SS2000
00	No; none	NA	NONE	NONE
10	Distant lymph node(s), NOS	NA	D	D
40	Distant metastases except distant lymph node(s) (code 10) Distant metastasis, NOS Carcinomatosis	NA	D	D
50	(10) + (40) Distant lymph node(s) plus other distant metastases	NA	D	D
99	Unknown if distant metastasis Distant metastasis cannot be assessed Not documented in patient record	NA	U	U

Other and Ill-Defined Respiratory Sites and Intrathoracic Organs**CS Mets Eval**

Code	Description	Staging Basis
9	Not applicable for this site	NA

Other and Ill-Defined Respiratory Sites and Intrathoracic Organs**CS Site-Specific Factor 1**

Code	Description
888	Not applicable for this site

**Other and Ill-Defined Respiratory Sites and Intrathoracic Organs
CS Site-Specific Factor 2**

Code	Description
888	Not applicable for this site

**Other and Ill-Defined Respiratory Sites and Intrathoracic Organs
CS Site-Specific Factor 3**

Code	Description
888	Not applicable for this site

**Other and Ill-Defined Respiratory Sites and Intrathoracic Organs
CS Site-Specific Factor 4**

Code	Description
888	Not applicable for this site

**Other and Ill-Defined Respiratory Sites and Intrathoracic Organs
CS Site-Specific Factor 5**

Code	Description
888	Not applicable for this site

**Other and Ill-Defined Respiratory Sites and Intrathoracic Organs
CS Site-Specific Factor 6**

Code	Description
888	Not applicable for this site