

Lesson 9

T Category

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AJCC

American Joint Committee on Cancer

Validating science. Improving patient care.

T Criteria

- T criteria based on size and/or direct extension
- Criteria specific to
 - Anatomy of primary site
 - Homogeneous or heterogeneous (different tissue layers)
 - Biologic behavior of cancers for that site
 - How it grows and spreads, involvement that changes the prognosis
- Criteria for clinical classification cT
 - Physical exam, imaging, endoscopy, biopsy, surgical exploration
- Criteria for pathologic classification pT
 - Resection of tumor, may require resection of organ/structure



Tumor Size

- Tumor size recorded and staged using whole millimeters
- For size reported
 - In smaller units such as tenth or hundredth of mm
 - Round to nearest whole millimeter for assigning stage
 - Round 1-4 down, 5-9 up
- Examples:
 - Breast tumor 1.2mm grouped with 1mm, T1mi ≤ 1 mm
 - Breast tumor 1.7mm grouped with 2mm, T1a >1 mm to <5 mm
- Rationale
 - Staging groups similar cases together



Multiple Tumor Pieces

- pT generally based on single resected specimen
- Tumor resected in multiple pieces
 - Reasonable estimate of size and extension
 - Guidance from disease specific rules
- Estimate may require
 - Orientation by surgeon
 - Comparison to imaging
 - Pathologist working with surgeon and radiologist to determine T
- Registrar
 - Cannot add tumor pieces to assign size and/or extension
 - Does not know orientation of tumor pieces



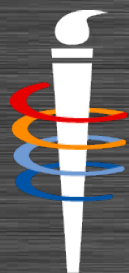
Uncertain Information

- Define uncertain information
 - Ambiguity about involvement
 - Details to meet staging criteria are unclear
 - Choosing between two categories
- Correct T category for uncertain information
 - Lower or less advanced category used
- Define unknown information
 - Unknown to the physician
 - Not used to describe situation where registrar does not have access to the information
- Correct T category for unknown information
 - Assign TX
 - Never assign lowest category



Thank you

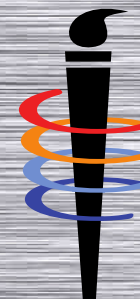
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