

## PROSTATE STAGING FORM

CLINICAL <i>Extent of disease before any treatment</i>	STAGE CATEGORY DEFINITIONS	PATHOLOGIC <i>Extent of disease through completion of definitive surgery</i>
<input type="checkbox"/> y clinical – staging completed after neoadjuvant therapy but before subsequent surgery	<b>TUMOR SIZE:</b> _____  <b>LATERALITY:</b> <input type="checkbox"/> left <input type="checkbox"/> right <input type="checkbox"/> bilateral	<input type="checkbox"/> y pathologic – staging completed after neoadjuvant therapy AND subsequent surgery
<input type="checkbox"/> TX <input type="checkbox"/> T0 <input type="checkbox"/> T1 <input type="checkbox"/> T1a <input type="checkbox"/> T1b <input type="checkbox"/> T1c <input type="checkbox"/> T2 <input type="checkbox"/> pT2 <input type="checkbox"/> T2a <input type="checkbox"/> pT2a <input type="checkbox"/> T2b <input type="checkbox"/> pT2b <input type="checkbox"/> T2c <input type="checkbox"/> pT2c <input type="checkbox"/> T3 <input type="checkbox"/> pT3 <input type="checkbox"/> T3a <input type="checkbox"/> pT3a <input type="checkbox"/> T3b <input type="checkbox"/> pT3b <input type="checkbox"/> T4 <input type="checkbox"/> pT4	<p style="text-align: center;"><b>PRIMARY TUMOR (T)</b></p> <p>Primary tumor cannot be assessed</p> <p>No evidence of primary tumor</p> <p>Clinically inapparent tumor neither palpable nor visible by imaging</p> <p>Tumor incidental histologic finding in 5% or less of tissue resected</p> <p>Tumor incidental histologic finding in more than 5% of tissue resected</p> <p>Tumor identified by needle biopsy (e.g., because of elevated PSA)</p> <p>Tumor confined within prostate*</p> <p>Organ confined</p> <p>Tumor involves one-half of one lobe or less</p> <p>Unilateral, one-half of one side or less</p> <p>Tumor involves more than one-half of one lobe but not both lobes</p> <p>Unilateral, involving more than one-half of side but not both sides</p> <p>Tumor involves both lobes</p> <p>Bilateral disease</p> <p>Tumor extends through the prostate capsule**</p> <p>Extraprostatic extension</p> <p>Extracapsular extension (unilateral or bilateral)</p> <p>Extraprostatic extension or microscopic invasion of bladder neck ***</p> <p>Tumor invades seminal vesicle(s)</p> <p>Seminal vesicle invasion</p> <p>Tumor is fixed or invades adjacent structures other than seminal vesicles: such as external sphincter, rectum, bladder, levator muscles, and/or pelvic wall</p> <p>Invasion of rectum, levator muscles and/or pelvic wall</p> <p><i>Note:</i> There is no pathologic T1 classification.</p> <p><i>*Note:</i> Tumor found in one or both lobes by needle biopsy, but not palpable or reliably visible by imaging, is classified as T1c.</p> <p><i>**Note:</i> Invasion into the prostatic apex or into (but not beyond) the prostatic capsule is classified not as T3 but as T2.</p> <p><i>***Note:</i> Positive surgical margin should be indicated by an R1 descriptor (residual microscopic disease).</p>	<input type="checkbox"/> TX <input type="checkbox"/> T0  <input type="checkbox"/> pT2 <input type="checkbox"/> pT2a <input type="checkbox"/> pT2b <input type="checkbox"/> pT2c <input type="checkbox"/> pT3 <input type="checkbox"/> pT3a <input type="checkbox"/> pT3b <input type="checkbox"/> pT4
<input type="checkbox"/> NX <input type="checkbox"/> pNX <input type="checkbox"/> N0 <input type="checkbox"/> pN0 <input type="checkbox"/> N1 <input type="checkbox"/> pN1	<p style="text-align: center;"><b>REGIONAL LYMPH NODES (N)</b></p> <p>Regional lymph nodes were not assessed</p> <p>Regional nodes not sampled</p> <p>No regional lymph node metastasis</p> <p>No positive regional nodes</p> <p>Metastasis in regional lymph node(s)</p> <p>Metastases in regional node(s)</p>	<input type="checkbox"/> NX <input type="checkbox"/> pNX <input type="checkbox"/> N0 <input type="checkbox"/> pN0 <input type="checkbox"/> N1 <input type="checkbox"/> pN1

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- M0
- M1
- M1a
- M1b
- M1c

## DISTANT METASTASIS (M)

No distant metastasis  
 Distant metastasis  
 Non-regional lymph node(s)  
 Bone(s)  
 Other site(s) with or without bone disease

- M1
- M1a
- M1b
- M1c

*\*Note: When more than one site of metastasis is present, the most advanced category is used. pM1c is most advanced*

## ANATOMIC STAGE • PROGNOSTIC GROUPS

CLINICAL						PATHOLOGIC					
GROUP	T	N	M	PSA	Gleason	GROUP	T	N	M	PSA	Gleason
<input type="checkbox"/> I	T1a-c	N0	M0	PSA <10	Gleason ≤ 6	<input type="checkbox"/> I	T1a-c	N0	M0	PSA <10	Gleason ≤ 6
	T2a	N0	M0	PSA <10	Gleason ≤ 6		T2a	N0	M0	PSA <10	Gleason ≤ 6
	T1-2a	N0	M0	PSA X	Gleason X		T1-2a	N0	M0	PSA X	Gleason X
<input type="checkbox"/> IIA	T1a-c	N0	M0	PSA < 20	Gleason 7	<input type="checkbox"/> IIA	T1a-c	N0	M0	PSA < 20	Gleason 7
	T1a-c	N0	M0	PSA ≥10 < 20	Gleason ≤ 6		T1a-c	N0	M0	PSA ≥ 10 < 20	Gleason ≤ 6
	T2a	N0	M0	PSA < 20	Gleason ≤ 7		T2a	N0	M0	PSA < 20	Gleason ≤ 7
	T2b	N0	M0	PSA < 20	Gleason ≤ 7		T2b	N0	M0	PSA < 20	Gleason ≤ 7
<input type="checkbox"/> IIB	T2c	N0	M0	Any PSA	Any Gleason	<input type="checkbox"/> IIB	T2c	N0	M0	Any PSA	Any Gleason
	T1-2	N0	M0	PSA ≥ 20	Any Gleason		T1-2	N0	M0	PSA ≥ 20	Any Gleason
	T1-2	N0	M0	Any PSA	Gleason ≥ 8		T1-2	N0	M0	Any PSA	Gleason ≥ 8
<input type="checkbox"/> III	T3a-b	N0	M0	Any PSA	Any Gleason	<input type="checkbox"/> III	T3a-b	N0	M0	Any PSA	Any Gleason
<input type="checkbox"/> IV	T4	N0	M0	Any PSA	Any Gleason	<input type="checkbox"/> IV	T4	N0	M0	Any PSA	Any Gleason
	Any T	N1	M0	Any PSA	Any Gleason		Any T	N1	M0	Any PSA	Any Gleason
	Any T	Any N	M1	Any PSA	Any Gleason		Any T	Any N	M1	Any PSA	Any Gleason

*\*When either PSA or Gleason is not available, grouping should be determined by T stage and/or either PSA or Gleason as available.*

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Stage unknown

Stage unknown

### PROGNOSTIC FACTORS (SITE-SPECIFIC FACTORS)

**REQUIRED FOR STAGING:** Prostate Specific Antigen  
 Gleason score

**CLINICALLY SIGNIFICANT:**

Gleason primary and secondary patterns: \_\_\_\_\_

Gleason Tertiary Pattern: \_\_\_\_\_

Clinical Staging procedures performed: \_\_\_\_\_

Number of biopsy cores examined: \_\_\_\_\_

Number of biopsy cores positive for cancer: \_\_\_\_\_

**General Notes:**

For identification of special cases of TNM or pTNM classifications, the "m" suffix and "y," "r," and "a" prefixes are used. Although they do not affect the stage grouping, they indicate cases needing separate analysis.

**m suffix** indicates the presence of multiple primary tumors in a single site and is recorded in parentheses: pT(m)NM.

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## PROSTATE STAGING FORM

### Histologic Grade (G)

#### Grading system

- Gleason X Gleason score cannot be processed
- Gleason ≤ 6 Well differentiated (slight anaplasia)
- Gleason 7 Moderately differentiated (moderate anaplasia)
- Gleason 8-10 Poorly differentiated/undifferentiated (marked anaplasia)

#### ADDITIONAL DESCRIPTORS

**Lymphatic Vessel Invasion (L) and Venous Invasion (V)** have been combined into Lymph-Vascular Invasion (LVI) for collection by cancer registrars. The College of American Pathologists' (CAP) Checklist should be used as the primary source. Other sources may be used in the absence of a Checklist. Priority is given to positive results.

- Lymph-Vascular Invasion Not Present (absent)/Not Identified
- Lymph-Vascular Invasion Present/Identified
- Not Applicable
- Unknown/Indeterminate

#### Residual Tumor (R)

The absence or presence of residual tumor after treatment. In some cases treated with surgery and/or with neoadjuvant therapy there will be residual tumor at the primary site after treatment because of incomplete resection or local and regional disease that extends beyond the limit of ability of resection.

- RX Presence of residual tumor cannot be assessed
- R0 No residual tumor
- R1 Microscopic residual tumor
- R2 Macroscopic residual tumor

### General Notes (continued):

**y prefix** indicates those cases in which classification is performed during or following initial multimodality therapy. The cTNM or pTNM category is identified by a "y" prefix. The ycTNM or ypTNM categorizes the extent of tumor actually present at the time of that examination. The "y" categorization is not an estimate of tumor prior to multimodality therapy.

**r prefix** indicates a recurrent tumor when staged after a disease-free interval, and is identified by the "r" prefix: rTNM.

**a prefix** designates the stage determined at autopsy: aTNM.

**surgical margins** is data field recorded by registrars describing the surgical margins of the resected primary site specimen as determined only by the pathology report.

**neoadjuvant treatment** is radiation therapy or systemic therapy (consisting of chemotherapy, hormone therapy, or immunotherapy) administered prior to a definitive surgical procedure. If the surgical procedure is not performed, the administered therapy no longer meets the definition of neoadjuvant therapy.

Clinical stage was used in treatment planning (describe): \_\_\_\_\_

National guidelines were used in treatment planning     NCCN     Other (describe): \_\_\_\_\_

\_\_\_\_\_  
Physician signature

\_\_\_\_\_  
Date/Time

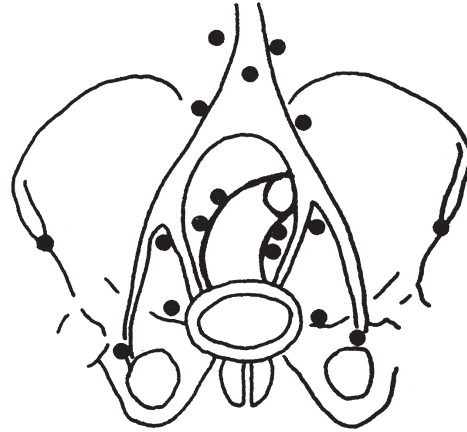
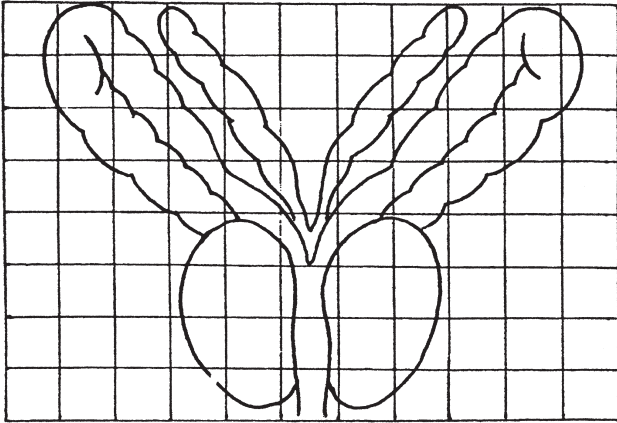
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# PROSTATE STAGING FORM

## Illustration

Indicate on diagram primary tumor and regional nodes involved.



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