## Lip and Oral Cavity Staging Form

### Clinical
- **Extent of disease before any treatment**
  - **Tumor Size:**
    - □ left
    - □ right
    - □ bilateral
  - **Latitude:**

<table>
<thead>
<tr>
<th>Tumor Size</th>
<th>Description</th>
</tr>
</thead>
<tbody>
<tr>
<td>T0</td>
<td>No evidence of primary tumor</td>
</tr>
<tr>
<td>Tis</td>
<td>Carcinoma in situ</td>
</tr>
<tr>
<td>T1</td>
<td>Tumor 2 cm or less in greatest dimension</td>
</tr>
<tr>
<td>T2</td>
<td>Tumor more than 2 cm but not more than 4 cm in greatest dimension</td>
</tr>
<tr>
<td>T3</td>
<td>Tumor more than 4 cm in greatest dimension</td>
</tr>
<tr>
<td>T4a</td>
<td>Moderately advanced local disease.</td>
</tr>
<tr>
<td>T4b</td>
<td>T4b Very advanced local disease.</td>
</tr>
</tbody>
</table>

**Note:** Superficial erosion alone of bone/tooth socket by gingival primary is not sufficient to classify a tumor as T4.

### Regional Lymph Nodes (N)
- **Regional lymph nodes cannot be assessed**
- **No regional lymph node metastasis**
- **Metastasis in a single ipsilateral lymph node, 3 cm or less in greatest dimension**
- **Metastasis in a single ipsilateral lymph node, more than 3 cm but not more than 6 cm in greatest dimension**
- **Metastasis in a single ipsilateral lymph node, more than 6 cm in greatest dimension**
- **Metastasis in multiple ipsilateral lymph nodes, none more than 6 cm in greatest dimension**
- **Metastasis in multiple ipsilateral lymph nodes, none more than 6 cm in greatest dimension**
- **Metastasis in bilateral or contralateral lymph nodes, none more than 6 cm in greatest dimension**
- **Metastasis in a lymph node more than 6 cm in greatest dimension**

### Pathologic
- **Extent of disease during and from surgery**

<table>
<thead>
<tr>
<th>Tumor Size</th>
<th>Description</th>
</tr>
</thead>
<tbody>
<tr>
<td>TX</td>
<td>Primary tumor cannot be assessed</td>
</tr>
<tr>
<td>T0</td>
<td>No evidence of primary tumor</td>
</tr>
<tr>
<td>Tis</td>
<td>Carcinoma in situ</td>
</tr>
<tr>
<td>T1</td>
<td>Tumor 2 cm or less in greatest dimension</td>
</tr>
<tr>
<td>T2</td>
<td>Tumor more than 2 cm but not more than 4 cm in greatest dimension</td>
</tr>
<tr>
<td>T3</td>
<td>Tumor more than 4 cm in greatest dimension</td>
</tr>
<tr>
<td>T4a</td>
<td>Moderately advanced local disease.</td>
</tr>
<tr>
<td>T4b</td>
<td>T4b Very advanced local disease.</td>
</tr>
</tbody>
</table>

**Note:** Superficial erosion alone of bone/tooth socket by gingival primary is not sufficient to classify a tumor as T4.

### Distant Metastasis (M)
- **No distant metastasis (no pathologic M0; use clinical M to complete stage group)**
- **Distant metastasis**

**Hospital Name/Address**

**Patient Name/Information**

(continued on next page)
**Lip and Oral Cavity Staging Form**

### Anatomic Stage & Prognostic Groups

<table>
<thead>
<tr>
<th>Group</th>
<th>Clinical</th>
<th>Pathologic</th>
</tr>
</thead>
<tbody>
<tr>
<td>0</td>
<td>Tis</td>
<td>0</td>
</tr>
<tr>
<td>I</td>
<td>T1</td>
<td>1</td>
</tr>
<tr>
<td>II</td>
<td>T2</td>
<td>2</td>
</tr>
<tr>
<td>III</td>
<td>T3</td>
<td>3</td>
</tr>
<tr>
<td>IVA</td>
<td>T4a</td>
<td>IVA</td>
</tr>
<tr>
<td>IVB</td>
<td>Any T</td>
<td>IVB</td>
</tr>
<tr>
<td>IVC</td>
<td>Any T</td>
<td>IVC</td>
</tr>
<tr>
<td>Stage unknown</td>
<td></td>
<td>Stage unknown</td>
</tr>
</tbody>
</table>

### Prognostic Factors (Site-Specific Factors)

**Required for Staging:** None

### Clinically Significant:
- Size of Lymph Nodes: ____________
- Extracapsular Extension from Lymph Nodes for Head & Neck: ________
- Head & Neck Lymph Nodes Levels I-III: ____________
- Head & Neck Lymph Nodes Levels IV-V: ____________
- Head & Neck Lymph Nodes Levels VI-VII: ____________
- Other Lymph Node Group: ________________________
- Clinical Location of cervical nodes: ____________
- Extracapsular spread (ECS) Clinical: ____________
- Extracapsular spread (ECS) Pathologic: ____________
- Human Papillomavirus (HPV) Status: ____________
- Tumor Thickness: ____________

### Histologic Grade (G) (also known as overall grade)

**Grading system**
- 2 grade system
- 3 grade system
- 4 grade system
- No 2, 3, or 4 grade system is available

**Grade**
- Grade I or 1
- Grade II or 2
- Grade III or 3
- Grade IV or 4

### 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.
- **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.

### Hospital Name/Address

### Patient Name/Information

(continued from previous page)
**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):**
- *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  
  - Q NCCN  
  - Q Other (describe): ____________________________

---

Physician signature

Date/Time

---

<table>
<thead>
<tr>
<th>HOSPITAL NAME/ADDRESS</th>
<th>PATIENT NAME/INFORMATION</th>
</tr>
</thead>
</table>

(continued on next page)
Illustration
Indicate on diagram primary tumor and regional nodes involved.

HOSPITAL NAME/ADDRESS

PATIENT NAME/INFORMATION

(continued from previous page)