

Anal Canal; Anus, NOS; Other Parts of Rectum**C21.0-C21.2, C21.8**

C21.0 Anus, NOS (excludes skin of anus and perianal skin C44.5)

C21.1 Anal canal

C21.2 Cloacogenic zone

C21.8 Overlapping lesion of rectum, anus and anal canal

Note: Skin of anus is coded separately (C44.5).**Anus****CS Tumor Size****Note:** Code the specific tumor size as documented in the medical record. If the ONLY information regarding tumor size is the clinician's statement of the "T" category, assign code 992 (T1, NOS), 995 (T2, NOS) or 996 (T3, NOS). (Refer to the CS Extension table for instructions on coding extension).

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," or "greater than 1 cm," or "between 1 cm and 2 cm" Stated as T1, NOS with no documentation of tumor size
993	Described as "less than 3 cm," or "greater than 2 cm," or "between 2 cm and 3 cm"
994	Described as "less than 4 cm," or "greater than 3 cm," or "between 3 cm and 4 cm"
995	Described as "less than 5 cm," or "greater than 4 cm," or "between 4 cm and 5 cm" Stated as T2, NOS with no documentation of tumor size
996	Greater than 5 cm Stated as T3, NOS with no documentation of tumor size
999	Unknown; size not stated Not documented in patient record

Anus**CS Extension**

Note 1: If the only information regarding the tumor extension is the clinician's physician's statement of the "T" category, assign code 310, 320, 330 or 850. (Refer to CS Tumor Size table for instructions on coding tumor size if assigning code 310, 320 or 330).

Note 2: Codes 600-800 are used for contiguous extension from the site of origin. Discontinuous involvement is coded in CS Mets at DX.

Code	Description	TNM 7 Map	TNM 6 Map	SS77 Map	SS2000 Map
000	In situ; noninvasive; intraepithelial; Bowen's disease; Anal Intraepithelial Neoplasia III (AIN III)	Tis	Tis	IS	IS
100	Invasive tumor confined to mucosa, NOS (including intramucosal, NOS)	^	*	L	L
110	Invades lamina propria	^	*	L	L
120	Invades muscularis mucosae	^	*	L	L
160	Invades submucosa (superficial invasion)	^	*	L	L
200	Invades muscularis propria (internal sphincter)	^	*	L	L
300	Localized, NOS	^	*	L	L
310	Stated as T1, NOS with no other information on extension	^	*	L	L
320	Stated as T2, NOS with no other information on extension	^	*	L	L
330	Stated as T3, NOS with no other information on extension	^	*	L	L
400	Ischiorectal fat/tissue Perianal skin	^	*	RE	RE

Code	Description	TNM 7 Map	TNM 6 Map	SS77 Map	SS2000 Map
400 cont'd	Perirectal skin Rectal mucosa or submucosa Rectal wall Skeletal muscles: Anal sphincter (external) Levator ani Subcutaneous perianal tissue	^	*	RE	RE
600	Perineum Vulva	T4	T4	RE	RE
700	Bladder Pelvic peritoneum Urethra Vagina	T4	T4	D	D
750	Broad ligament(s) Cervix uteri Corpus uteri Prostate	T4	T4	D	D
800	Further contiguous extension	T4	T4	D	D
850	Stated as T4,NOS	T4	T4	D	D
950	No evidence of primary tumor	T0	T0	U	U
999	Unknown extension Primary tumor cannot be assessed Not documented in patient record	TX	TX	U	U

^ For codes 100-400 ONLY, the T category is assigned based on the value of CS Tumor Size, as shown in the Extension Size Table for this site.

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Anus

CS Tumor Size/Ext Eval

See Standard Table

Anus**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 7 Map	TNM 6 Map	SS77 Map	SS2000 Map
000	No regional lymph node involvement	N0	N0	NONE	NONE
100	Unilateral and bilateral: For all subsites: Anorectal Inferior hemorrhoidal Lateral sacral (laterosacral) Perirectal Stated as N1 with no other information on regional lymph nodes	N1	N1	RN	RN
200	Unilateral: For anal canal: Internal iliac (hypogastric) Obturator	N2	N2	RN	RN
210	Unilateral: For anus: Internal iliac (hypogastric) Obturator	N2	N2	D	RN
300	Unilateral: For anal canal: Superficial inguinal (femoral)	N2	N2	RN	RN
310	Unilateral: For anus: Superficial inguinal (femoral)	N2	N2	D	RN
350	Stated as N2 with no other information on regional lymph nodes	N2	N2	RN	RN
400	(200) + (300)	N2	N2	RN	RN
410	(100) + (300)	N3	N3	RN	RN

Code	Description	TNM 7 Map	TNM 6 Map	SS77 Map	SS2000 Map
420	(100) + (310)	N3	N3	D	RN
500	Bilateral: For anal canal: Internal iliac (hypogastric) Obturator Superficial inguinal (femoral)	N3	N3	RN	RN
510	Bilateral: For anus: Internal iliac (hypogastric) Obturator Superficial inguinal (femoral)	N3	N3	D	RN
550	Stated as N3 with no other information on regional lymph nodes	N3	N3	RN	RN
600	Regional lymph node(s), NOS	N1	N1	RN	RN
800	Lymph nodes, NOS	N1	N1	RN	RN
999	Unknown; not stated Regional lymph node(s) cannot be assessed Not documented in patient record	NX	NX	U	U

Anus**Reg LN Pos**

Note: Record this field even if there has been preoperative treatment

See Standard Table

Anus**Reg LN Exam**

See Standard Table

Anus
CS Mets at DX

Code	Description	TNM 7 Map	TNM 6 Map	SS77 Map	SS2000 Map
00	No; none	M0	M0	NONE	NONE
10	Distant lymph node(s)	M1	M1	D	D
40	Distant metastases except distant lymph node(s) (code 10) Carcinomatosis	M1	M1	D	D
50	(10) + (40) Distant lymph node(s) plus other distant metastases	M1	M1	D	D
60	Distant metastasis, NOS Stated as M1, NOS	M1	M1	D	D
99	Unknown if distant metastasis Distant metastasis cannot be assessed Not documented in patient record	M0	MX	U	U