

**Retroperitoneum****C48.0****C48.0 Retroperitoneum****Retroperitoneum****CS Tumor Size**

**Note:** The assignment of T1 and T2 categories for soft tissue sarcomas is based on tumor size. A physician's statement of the T category may be used to code CS Tumor Size and/or CS Extension if this is the only information in the medical record regarding one or both of these fields. However the two fields are coded independently: for example the record may document size but not extension, other than the physician's statement of the T category. Use codes 995 and 996 as appropriate to code CS Tumor Size based on a statement of T when no other size information is available.

Code	Description
000	No mass/tumor found
001-988	001 - 988 millimeters (mm) (Exact size in mms)
989	989 mm or larger
990	Microscopic focus or foci only and no size of focus given
991	Described as "less than 1 centimeter (cm)"
992	Described as "less than 2 cm," or "greater than 1 cm," or "between 1 cm and 2 cm"
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 T1b or T1 [NOS] with no other information on size
996	Described as "greater than 5 cm" Stated as T2b or T2 [NOS] with no other information on size
999	Unknown; size not stated Size of tumor cannot be assessed Not documented in patient record

**Retroperitoneum****CS Extension**

**Note 1:** For AJCC TNM staging, retroperitoneal sarcomas are classified as deep tumors.

**Note 2:** The assignment of T1 and T2 categories for soft tissue sarcomas is based on tumor size. A physician's statement of the T category may be used to code CS Tumor Size and/or CS Extension if this is the only information in the medical record regarding one or both of these fields. However the two fields are coded independently: for example the record may document size but not extension, other than the physician's statement of the T category. Use codes 350 and 375 as appropriate to code CS Extension based on a statement of T when no other extension information is available.

Code	Description	TNM 7 Map	TNM 6 Map	SS77 Map	SS2000 Map
100	Tumor confined to site of origin	^	*	L	L
300	Localized, NOS	^	*	L	L
350	Stated as T1b or T1 [NOS] with no other information on extension	^	*	L	L
375	Stated as T2b or T2 [NOS] with no other information on extension	^	*	L	L
400	Adjacent connective tissue (See definition of adjacent connective tissue in General Rules)	^	*	RE	RE
600	Adjacent organs/structures: Adrenal(s) (suprarenal gland(s)) Aorta Ascending colon Bone/cartilage Descending colon Kidney(s) Pancreas Vena cava Vertebra	^	*	RE	RE
800	Further contiguous extension, including: Extension to colon other than ascending or descending	^	*	D	D

Code	Description	TNM 7 Map	TNM 6 Map	SS77 Map	SS2000 Map
950	No evidence of primary tumor	T0	T0	U	U
999	Unknown; extension not stated Primary tumor cannot be assessed Not documented in patient record	TX	TX	U	U

^ For CS Extension codes 100-800 ONLY, the T category for AJCC 7 staging is assigned based on value of CS Tumor Size, as shown in the Extension Size Table for this schema.

\* For CS Extension codes 100-800 ONLY, the T category for AJCC 6 staging is assigned based on value of CS Tumor Size, as shown in the Extension Size Table for this schema.

### Retroperitoneum

#### CS Tumor Size/Ext Eval

See Standard Table

### Retroperitoneum

#### CS Lymph Nodes

**Note 1:** Code only regional nodes and nodes, NOS in this field. Distant nodes are coded in CS Mets at DX.

**Note 2:** Regional lymph nodes are defined as those in the vicinity of the primary tumor.

**Note 3:** 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 Use code 999 (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 7 Map	TNM 6 Map	SS77 Map	SS2000 Map
000	No regional lymph node involvement	N0	N0	NONE	NONE
100	Regional lymph nodes: Intra-abdominal Paracaval Pelvic Subdiaphragmatic Regional lymph nodes, NOS  Stated as N1 with no other information on regional lymph nodes	N1	N1	RN	RN
800	Lymph nodes, NOS	N1	N1	RN	RN

Code	Description	TNM 7 Map	TNM 6 Map	SS77 Map	SS2000 Map
999	Unknown; regional lymph nodes not stated Regional lymph nodes cannot be assessed Not documented in patient record (See Note 3)	NX	NX	U	U

**Retroperitoneum****CS Lymph Nodes Eval**

See Standard Table

**Retroperitoneum****Regional Nodes Positive**

See Standard Table

**Note:** Record this field even if there has been preoperative treatment.**Retroperitoneum****Regional Nodes Examined**

See Standard Table

**Retroperitoneum****CS Mets at DX**

Code	Description	TNM 7 Map	TNM 6 Map	SS77 Map	SS2000 Map
00	No distant metastasis	M0	M0	NONE	NONE
10	Distant lymph node(s)	M1	M1	D	D
40	Distant metastasis except distant lymph node(s) Carcinomatosis	M1	M1	D	D
50	40 + 10 Distant metastasis plus distant lymph nodes	M1	M1	D	D
60	Distant metastasis, NOS Stated as M1 with no other information on distant metastasis	M1	M1	D	D

Code	Description	TNM 7 Map	TNM 6 Map	SS77 Map	SS2000 Map
99	Unknown; distant metastasis not stated Distant metastasis cannot be assessed Not documented in patient record	M0	MX	U	U

**Retroperitoneum****CS Mets Eval****See Standard Table**

**Note:** This item reflects the validity of the classification of the item CS Mets at DX only according to the diagnostic methods employed.

**Retroperitoneum****CS Site-Specific Factor 1****Grade for Sarcomas****Note: See page A-116**

**Note 1:** Comprehensive grading of soft tissue sarcomas is strongly correlated with disease specific survival and incorporates differentiation, mitotic rate, and extent of necrosis. The grading system of the French Federation of Cancer Centers Sarcoma Group (FNCLCC) is preferred system.

**Note 2:** Record the grade from any 3 grade sarcoma grading system the pathologist uses. Do not code terms such as "well differentiated" or "poorly differentiated" in this field.

**Note 3:** In some cases, especially for needle biopsies, grade may be specified only as "low grade" or "high grade". Use code 100, which maps to G1, or 200, which maps to G3. Codes 010-030 take priority over codes 100 and 200.

**Note 4:** The mapping of grade as shown in this table is used in the derivation of AJCC 7 staging.

Code	Description	Mapping of Grade
010	Specified as Grade 1 [of 3]	1
020	Specified as Grade 2 [of 3]	2
030	Specified as Grade 3 [of 3]	3
100	Grade stated as low grade, NOS	1
200	Grade stated as high grade, NOS	3
888	<b>OBSOLETE DATA CONVERTED V0200</b> See code 988 Not applicable for this schema	9

<b>Code</b>	<b>Description</b>	<b>Mapping of Grade</b>
988	Not applicable: Information not collected for this case (May include cases converted from code 888 used in CSV1 for "Not applicable" or when the item was not collected. If this item is required to derive T, N, M, or any stage, use of code 988 may result in an error.)	9
998	No histologic examination of primary site	9
999	Unknown or no information Not documented in patient record	9