Lung cancer staging according to IASLC staging system for lung cancer, 8th edition

This module adopts the latest guidelines for lung cancer staging based on the TNM-8 model.

> *The American Joint Committee on Cancer (AJCC) staging manual has become the benchmark for classifying patients with cancer, defining prognosis, and determining the best treatment approaches. Many view the primary role of the tumor, lymph node, metastasis (TNM) system as that of a standardized classification system for evaluating cancer at a population level in terms of the extent of disease, both at initial presentation and after surgical treatment, and the overall impact of improvements in cancer treatment. The rapid evolution of knowledge in cancer biology and the discovery and validation of biologic factors that predict cancer outcome and response to treatment with better accuracy have led some cancer experts to question the utility of a TNM-based approach in clinical care at an individualized patient level. In the Eighth Edition of the AJCC Cancer Staging Manual, the goal of including relevant, nonanatomic (including molecular) factors has been foremost, although changes are made only when there is strong evidence for inclusion.* [CA Cancer J Clin 2017;67:93–99. © 2017 American Cancer Society.]

The module can be launched via any of the following voice commands: “lung mass,” “lung tumor,” “lung nodule,” “pulmonary mass,” “pulmonary tumor,” or “pulmonary nodule.” For a complete list of voice commands used in this module, see Appendix A below.

Upon launching the module, clinicians are initially presented with two data entry fields (Dominant Tumor Size and Location), a blank findings template showing all possible headers, and placeholders for display of T-stage, N-stage, M-stage, and overall stage. See Figure 1 below.

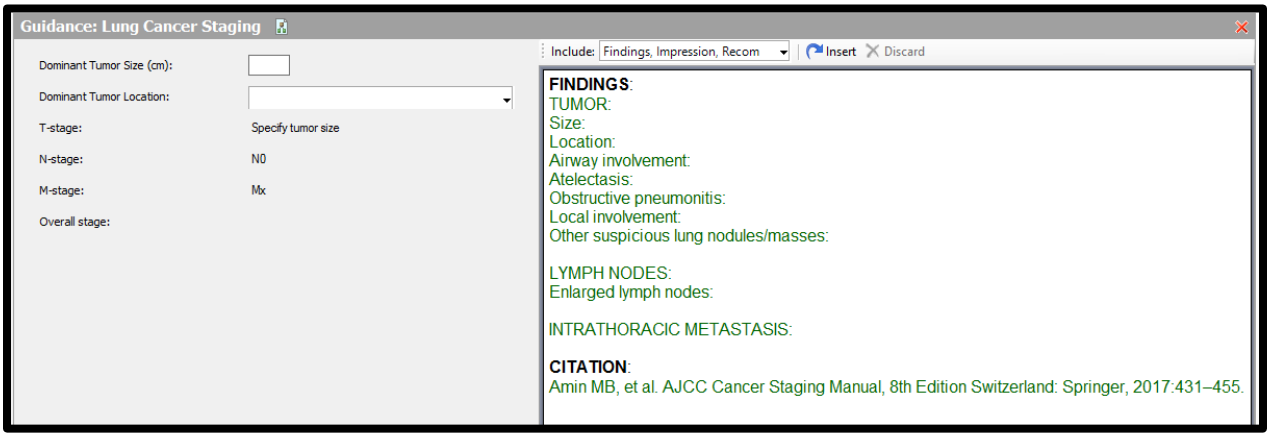

Figure 1

Upon entering values for Dominant Tumor Size and Location, additional data entry fields appear, and the Findings begin to populate. All other fields default to no/blank and are reflected as such in the Findings until that field is updated by the clinician. To include staging information in the Findings, be sure to select “Yes” on “Include stage in report”. See Figure 2 below.

To enter lymph node nodules, select the icon on that field to launch the image map and make selections as appropriate. Clinicians may select either the nodule on the anatomical illustration or on the text description of that lymph node station on the image map. See Figure 3 below.

A full TNM-8 Lung Cancer Staging graphic is included below in Appendix B.

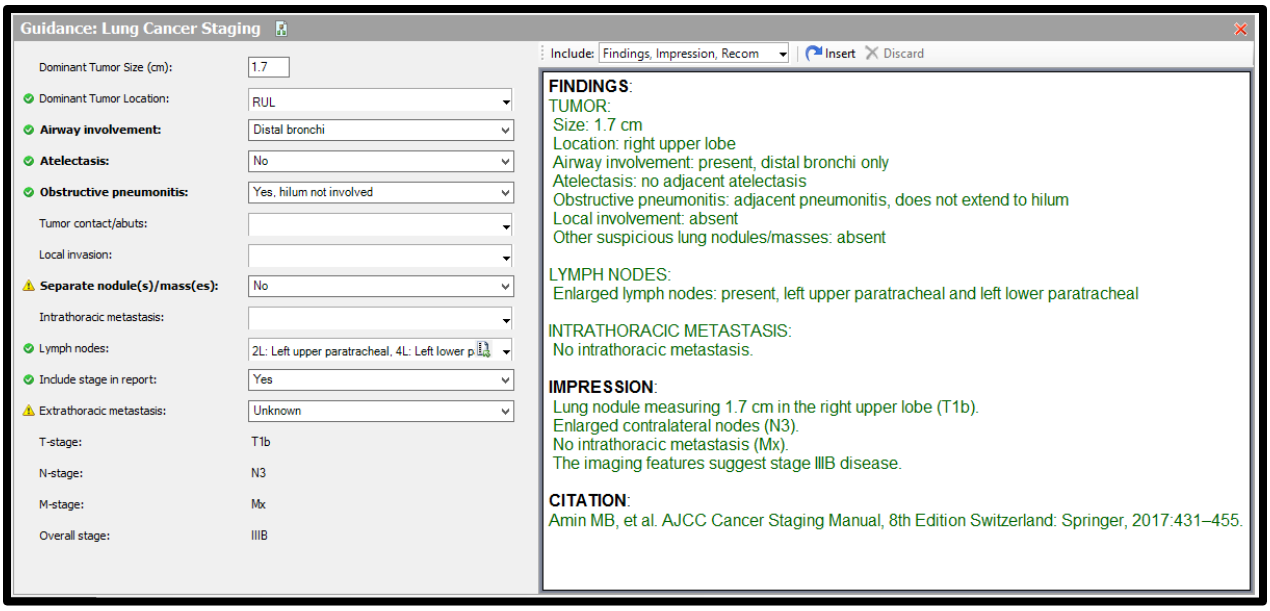

Figure 2.

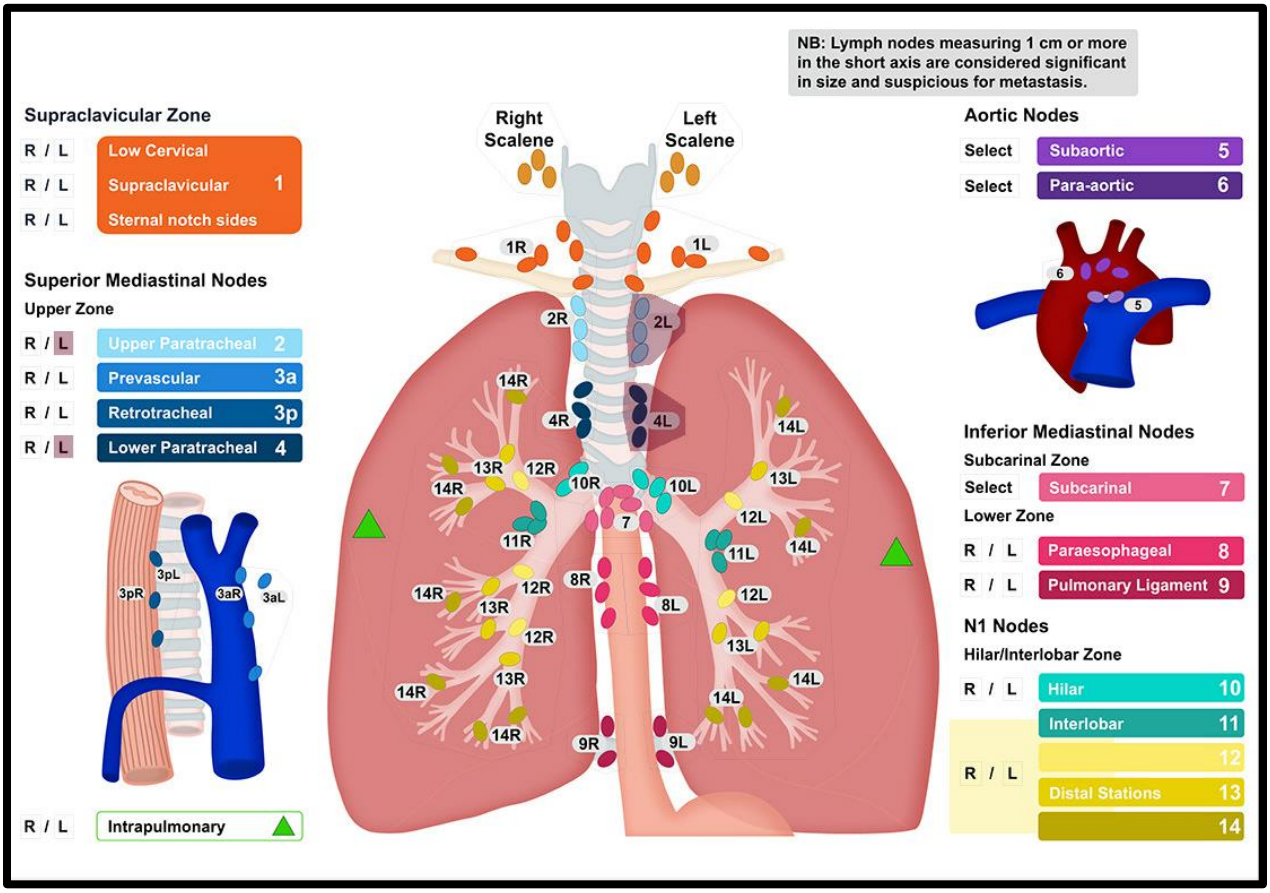

Figure 3.

Appendix A – Lung Cancer Staging module voice commands

Dominant Tumor Size (cm)	**size**
Dominant Tumor Location	**location**
---RUL	---right upper lobe
---RML	---right middle lobe
---RLL	---right lower lobe
---LUL	---left upper lobe
---Lingula	---lingula
---LLL	---left lower lobe
Airway involvement	**airway involvement**
---No	---absent
---Main bronchi	---main bronchi
---Distal bronchi	---distal bronchi
---Invades carina	---invades carina
---Invades trachea	---invades trachea
Atelectasis	**atelectasis**
---No	---absent
---Yes, does not extend to hilum	---does not extend to hilum
---Yes, extends to hilum	---extends to hilum
---Yes, complete lung collapse	---complete lung collapse
Obstructive pneumonitis	**obstructive pneumonitis**
---No	---absent
---Yes, hilum involved	---hilum involved
---Yes, hilum not involved	---hilum not involved
Tumor contacts/abuts	**contacts abuts**
---visceral pleura	--- visceral pleura
---chest wall	---chest wall
---diaphragm	---diaphragm
---parietal pericardium	---parietal pericardium
---mediastinum	---mediastinum
---heart	---heart
---great vessels	---great vessels
---esophagus	---esophagus
---vertebral body	---vertebral body
---superior sulcus	---superior sulcus
Local invasion	**local invasion**
---*same selection options as Tumor Contacts/Abuts*	
Separate nodule(s)/mass(es)	**separate nodules**
---No	---no
---Same lobe	---same lobe
---Different lobe, same lung	---different lobe same lung
---Contralateral lung	---contralateral lung
---Mult, all same lobe	---multiple same lobe
---Mult, different lobes, all same lung	---multiple different lobe same lung
---Mult, some contralateral lung	---multiple contralateral lung

Separate nodule max diameter (cm)	separate nodule diameter
Separate nodule/mass location	separate nodule location
---*same selection options as Dominant Tumor Location*	
Intrathoracic metastasis	intrathoracic metastasis
---Suspicious pleural effusion	---pleural effusion
---Pleural nodule(s)	---pleural nodule
---Suspicious pericardial effusion	---pericardial effusion
---Pericardial nodule(s)	---pericardial nodule
Lymph Nodes	**lymph nodes**
---Right scalene	---right scalene
---Left scalene	---left scalene
---1: Right low cervical/supraclavicular	---right supraclavicular
---1: Left low cervical/supraclavicular	---left supraclavicular
---2R: Right upper paratracheal	---right upper paratracheal
---2L: Left upper paratracheal	---left upper paratracheal
---3A: Right prevascular	---right prevascular
---3A: Left prevascular	---left prevascular
---3P: Right retrotracheal	---right retrotracheal
---3P: Left retrotracheal	---left retrotracheal
---4R: Right lower paratracheal	---right lower paratracheal
---4L: Left lower paratracheal	---left lower paratracheal
---5: Subaortic	---subaortic
---6: Para-aortic	---para-aortic
---7: Subcarinal	---subcarinal
---8R: Right paraesophageal	---right paraesophageal
---8L: Left paraesophageal	---left paraesophageal
---9R: Right pulmonary ligament	---right pulmonary ligament
---9L: Left pulmonary ligament	---left pulmonary ligament
---10R: Right hilar	---right hilar
---10L: Left hilar	---left hilar
---Right peribronchial/more distal	---right peribronchial
---Left peribronchial/more distal	---left peribronchial
---Right intrapulmonary	---right intrapulmonary
---Left intrapulmonary	---left intrapulmonary
Include stage in report	**include stage**
---No	---no
---Yes	---yes
Extrathoracic metastasis	**extrathoracic metastasis**
---Unknown	---unknown
---No	---no
---Yes	---yes

Appendix B – TNM-8 Lung Cancer Staging graphic