Lesson 9
T Category

Donna M. Gress, RHIT, CTR

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T Criteria

• T criteria based on size and/or direct extension

• Criteria specific to
  – Anatomy of primary site
    • Homogeneous or heterogeneous (different tissue layers)
  – Biologic behavior of cancers for that site
    • How it grows and spreads, involvement that changes the prognosis

• Criteria for clinical classification cT
  – Physical exam, imaging, endoscopy, biopsy, surgical exploration

• Criteria for pathologic classification pT
  – Resection of tumor, may require resection of organ/structure
Tumor Size

• Tumor size recorded and staged using whole millimeters

• For size reported
  – In smaller units such as tenth or hundredth of mm
  – Round to nearest whole millimeter for assigning stage
  – Round 1-4 down, 5-9 up

• Examples:
  – Breast tumor 1.2mm grouped with 1mm, T1mi \( \leq 1\text{mm} \)
  – Breast tumor 1.7mm grouped with 2mm, T1a \( >1\text{mm to} <5\text{mm} \)

• Rationale
  – Staging groups similar cases together
Multiple Tumor Pieces

• pT generally based on single resected specimen

• Tumor resected in multiple pieces
  – Reasonable estimate of size and extension
  – Guidance from disease specific rules

• Estimate may require
  – Orientation by surgeon
  – Comparison to imaging
  – Pathologist working with surgeon and radiologist to determine T

• Registrar
  – Cannot add tumor pieces to assign size and/or extension
  – Does not know orientation of tumor pieces
Uncertain Information

- Define uncertain information
  - Ambiguity about involvement
  - Details to meet staging criteria are unclear
  - Choosing between two categories

- Correct T category for uncertain information
  - Lower or less advanced category used

- Define unknown information
  - Unknown to the physician
  - Not used to describe situation where registrar does not have access to the information

- Correct T category for unknown information
  - Assign TX
  - Never assign lowest category
Thank you

Donna M. Gress, RHIT, CTR
AJCC Technical Specialist

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633 N. Saint Clair, Chicago, IL 6011-3211

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