Primary Tumor (T) Classification

TX: Primary tumor cannot be assessed, or tumor proven by the presence of malignant cells in sputum or bronchial washings but not visualized by imaging or bronchoscopy.

T0: No evidence of primary tumor

Tis: Carcinoma in situ

T1: Tumor 3 cm or less in greatest dimension, surrounded by lung or visceral pleura, without bronchoscopic evidence of invasion more proximal than the lobar bronchus

T1a: Tumor 2 cm or less in greatest dimension

T1b: Tumor more than 2 cm but 3 cm or less in greatest dimension

T2: Tumor more than 3 cm but 7 cm or less or tumor with any of the following features (T2 tumors with these features are classified T2a if 5 cm or less): involves main bronchus, 2 cm or more distal to the carina; invades visceral pleura (PL1 or PL2); associated with atelectasis or obstructive pneumonitis that extends to the hilar region but does not involve the entire lung

T2a: Tumor more than 3 cm but 5 cm or less in greatest dimension

T2b: Tumor more than 5 cm but 7 cm or less in greatest dimension

T3: Tumor more than 7 cm or one that directly invades any of the following: parietal pleural (PL3), chest wall (including superior sulcus tumors), diaphragm, phrenic nerve, mediastinal pleura, parietal pericardium; or tumor in the main bronchus less than 2 cm distal to the carina but without involvement of the carina; or associated atelectasis or obstructive pneumonitis of the entire lung or separate tumor node(s) in the same lobe

T4: Tumor of any size that invades any of the following: mediastinum, heart, great vessels, trachea, recurrent laryngeal nerve, esophagus, vertebral body, carina, separate tumor node(s) in a different ipsilateral lobe

Distant Metastasis (M) Classification

M0: No distant metastasis

M1: Distant metastasis

M1a: Separate tumor node(s) in a contralateral lobe, tumor with pleural nodules or malignant pleural (or pericardial) effusion

M1b: Distant metastasis (in extrathoracic organs)

Anatomic Stage/Prognostic Groups

<table>
<thead>
<tr>
<th>Stage</th>
<th>T</th>
<th>N</th>
<th>M</th>
</tr>
</thead>
<tbody>
<tr>
<td>Occult Carcinoma</td>
<td>TX</td>
<td>N0</td>
<td>M0</td>
</tr>
<tr>
<td>Stage I</td>
<td>T1a</td>
<td>N0</td>
<td>M0</td>
</tr>
<tr>
<td>Stage IA</td>
<td>T1b</td>
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</tr>
<tr>
<td>Stage IIB</td>
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<tr>
<td>Stage IIIB</td>
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<tr>
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<td>T3</td>
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<td>T4</td>
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<tr>
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<tr>
<td>Stage IV</td>
<td>T4</td>
<td>N3</td>
<td>M0</td>
</tr>
</tbody>
</table>
Regional Lymph Node (N) Classification

NX Regional lymph nodes cannot be assessed

N0 No regional lymph node metastases

N1 Metastasis in ipsilateral peribronchial and/or ipsilateral hilar lymph nodes and intrapulmonary nodes, including involvement by direct extension

N2 Metastasis in ipsilateral mediastinal and/or subcarinal lymph node(s)

N3 Metastasis in contralateral mediastinal, contralateral hilar, ipsilateral or contralateral scalene, or supraclavicular lymph node(s)

Supraclavicular zone
- 1 Low cervical, supraclavicular, and sternal notch nodes

Superior Mediastinal Nodes
- 2R Upper Paratracheal (right)
- 2L Upper Paratracheal (left)
- 3a Pre-vascular
- 3p Retrotracheal
- 4R Lower Paratracheal (right)
- 4L Lower Paratracheal (left)

Aortic Nodes
- 5 Subaortic
- 6 Para-aortic (ascending aorta or phrenic)

Inferior Mediastinal Nodes
- 7 Subcarinal

N4 Nodes
- 10 Hilar
- 11 Interlobar

Hilar/Interlobar zone

Peripheral zone
- 12 Lobar
- 13 Segmental
- 14 Subsegmental

Illustration

The IASLC lymph node map shown with the proposed amalgamation of lymph into zones. (© Memorial Sloan-Kettering Cancer Center, 2009.)