



Lesson 12

Stage Group



- Group numbers correlate with worsening prognosis
 - Stage 0
 - Carcinoma in situ and melanoma in situ
 - Stage I
 - Tumor confined to primary site with better prognosis
 - Stages II and III
 - Increasing local and regional nodal involvement
 - Stage IV
 - Distant metastatic disease
- Groups expand into subsets for more refined prognosis
 - Stage II becomes IIA and IIB

Define Separate Groups

- Must define separate stage groups for each classification
 - Each are different
 - Have different purposes
- Documenting stage in medical health care record
 - Critical to document clinical and pathological
 - Postneoadjuvant therapy (yc or yp) may replace pathological
 - If applicable, retreatment
- Once assigned, stage is **NOT** changed
 - Assigned based on appropriate timing and rules
 - Not changed based on information **after** appropriate timing
 - Not changed based on **subsequent** stage classifications

- Cases with similar prognosis are grouped together
- Clinical stage groups based on
 - cT cN c/pM
- Pathological stage groups based on
 - pT pN c/pM
- Disease specific groups of T, N, and M are defined
 - In each chapter
 - Unique for that site or disease

- Minimize use of TX and NX
- May be assigned for legitimate situations
 - Evaluation of tumor necessary to assign T category not done
 - Evaluation of nodes necessary to assign N category not done
- Use of X may render case unstageable
- Stage only assigned if other categories determine stage
 - Belongs in one and only one stage regardless of unknown category
- Cases without stage omitted from comparison analyses

Additional Non-Anatomic Factors in Group

- “Prognostic Stage Groups” is proper name
 - Commonly referred to as “stage groups”
 - Due to inclusion of non-anatomic factors as categories
- Certain stage groups **require** non-anatomic factors
 - These factors are a category
 - Included in the stage group tables
- If factor category information is not available or uncertain
 - Assign X for factor category, or
 - If physician assigns lowest category (best prognosis) of factor category, registrar assigns blank for that factor

- Define uncertain information
 - Ambiguity about involvement
 - Details to meet staging criteria are unclear
 - Choosing between two categories
- Correct stage group for uncertain information
 - For Physicians only: lower or less advanced stage group used
 - For Registrars: stage group blank
- Correct stage subgroup for uncertain information
 - For Physicians only: lower or less advanced stage subgroup used
 - For Registrars: main stage group used

- Uncertain is different from unknown
- Define unknown information
 - Unknown to the physician
 - Not used to describe situation where registrar does not have access to the information
- Correct stage group for unknown information
 - Never assign lowest stage group
 - For Physicians only: no stage group assigned or approximate stage group to provide patient prognosis
 - For Registrars:
 - If physicians approximates stage group, registrars assign stage group unknown



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Thank You