## American Joint Committee on Cancer

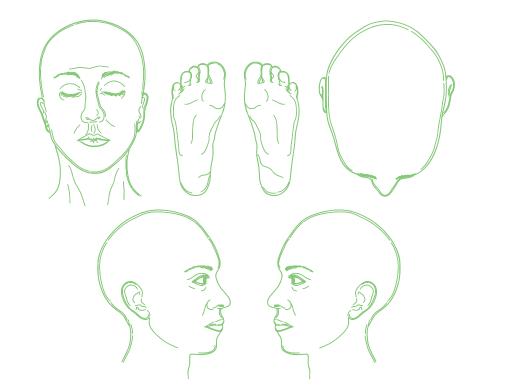
# Melanoma of the Skin Staging

### **D**efinitions

#### **Primary Tumor (T)**

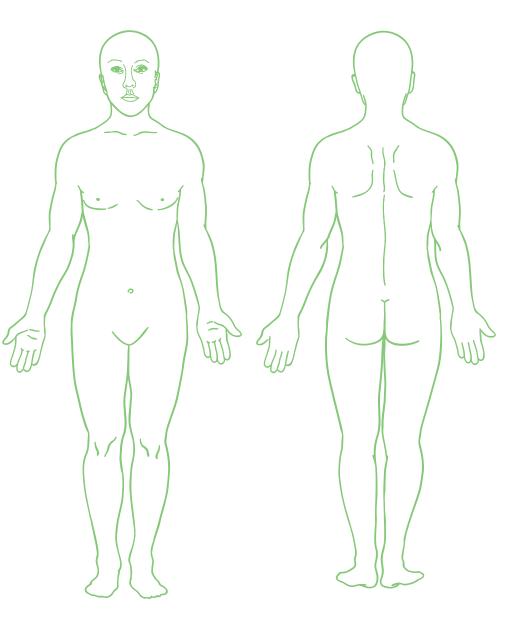
- **TX** Primary tumor cannot be assessed (for example, curettaged or severely regressed melanoma)
- No evidence of primary tumor TO
- Melanoma in situ Tis
- Melanomas 1.0 mm or less in thickness
- Melanomas 1.01–2.0 mm **T2**
- Melanomas 2.01–4.0 mm **T3**
- Melanomas more than 4.0 mm
- **NOTE:** a and b subcategories of T are assigned based on ulceration and number of mitoses per mm<sup>2</sup>, as shown below:

T CLASSIFICATION	THICKNESS (mm)	ULCERATION STATUS/MITOSES
<b>T1</b>	≤1.0	a: w/o ulceration and mitosis $<1/mm^2$ b: with ulceration or mitoses $\ge 1/mm^2$



#### **Distant Metastatis (M)**

- No detectable evidence of **MO** distant metastases
- Metastases to skin, subcutaneous, M1a or distant lymph nodes
- Metastases to lung M1b
- Metastases to all other visceral sites or distant metastases M<sub>1</sub>c to any site combined with an elevated serum LDH
- **NOTE:** Serum LDH is incorporated into the M category as shown below:



<b>T2</b>	1.01–2.0	a: w/o ulceration b: with ulceration
<b>T</b> 3	2.01–4.0	a: w/o ulceration b: with ulceration
<b>T4</b>	>4.0	a: w/o ulceration b: with ulceration

#### **Regional Lymph Nodes (N)**

- Patients in whom the regional nodes cannot be assessed NX (for example, previously removed for another reason)
- No regional metastases detected NO
- Regional metastases based upon the number of metastatic N1-3 nodes and presence or absence of intralymphatic metastases (in transit or satellite metastases)

**NOTE:** N1–3 and a–c subcategories assigned as shown below:

N CLASSIFICATION	NO. OF METASTATIC NODES	NODAL METASTATIC MASS
N1	1 node	a: micrometastasis <sup>1</sup> b: macrometastasis <sup>2</sup>
<b>N2</b>	2–3 nodes	a: micrometastasis <sup>1</sup> b: macrometastasis <sup>2</sup> c: in transit met(s)/satellite(s) <i>without</i> metastatic nodes
NO	1 or more moto	static padac or mattad padac

4 or more metastatic nodes, or matted nodes, **N**3 or in transit met(s)/satellite(s) with metastatic node(s)

M CLASSIFICATION	SITE	SERUM LDH
M1a	Distant skin, subcutaneous, or nodal mets	Normal
M1b	Lung metastases	Normal
M1c	All other visceral metastases	Normal
	Any distant metastasis	Elevated

	AN	ATOMIC	STAGE/P	ROGNOSTIC O	ROUPS		
Clinical Staging <sup>3</sup>			Pathologic Staging <sup>4</sup>				
Stage 0	Tis	NO	MO	0	Tis	NO	MO
Stage IA	T1a	NO	MO	IA	T1a	NO	MO
Stage IB	T1b	NO	MO	IB	T1b	NO	MO
	T2a	NO	MO		T2a	NO	MO
Stage IIA	T2b	NO	MO	IIA	T2b	NO	MO
	T3a	NO	MO		T3a	NO	MO
Stage IIB	T3b	NO	MO	IIB	T3b	NO	MO
	T4a	NO	MO		T4a	NO	MO
Stage IIC	T4b	NO	MO	IIC	T4b	NO	MO
Stage III	Any T	$\ge$ N1	MO	IIIA	T1-4a	N1a	MO
					T1-4a	N2a	MO
				IIIB	T1-4b	N1a	MO
					T1-4b	N2a	MO
					T1-4a	N1b	MO
					T1-4a	N2b	M0
					T1-4a	N2c	M0
				IIIC	T1-4b	N1b	MO
					T1-4b	N2b	MO
	•••••	•••••••••••••••••••••••••••••••••••••••			T1-4h	N2c	MO

7th EDITION





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INIU I I-4D **INZC** N3 M0 Any T M1 IV M1 Stage IV Any T Any N Any T Any N

#### Notes

<sup>1</sup> Micrometastases are diagnosed after sentinel lymph node biopsy and completion lymphadenectomy (if performed). <sup>2</sup> Macrometastases are defined as clinically detectable nodal metastases confirmed by therapeutic lymphadenectomy or when nodal metastasis exhibits gross extracapsular extension.

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<sup>3</sup> Clinical staging includes microstaging of the primary melanoma and clinical/radiologic evaluation for metastases. By convention, it should be used after complete excision of the primary melanoma with clinical assessment for regional and distant metastases.

<sup>4</sup> Pathologic staging includes microstaging of the primary melanoma and pathologic information about the regional lymph nodes after partial or complete lymphadenectomy. Pathologic Stage 0 or Stage IA patients are the exception; they do not require pathologic evaluation of their lymph nodes.