### GALLBLADDER STAGING FORM

<table>
<thead>
<tr>
<th>Clinical Extent of Disease before any treatment</th>
<th>Stage Category Definitions</th>
<th>Pathologic Extent of disease through completion of definitive surgery</th>
</tr>
</thead>
<tbody>
<tr>
<td>☐ y clinical-staging completed after neoadjuvant therapy but before subsequent surgery</td>
<td>Tumor size: ___________</td>
<td>☐ y pathologic-staging completed after neoadjuvant therapy AND subsequent surgery</td>
</tr>
</tbody>
</table>

#### PRIMARY TUMOR (T)
- □ T0: No evidence of primary tumor
- □ Tis: Carcinoma in situ
- □ T1: Tumor invades lamina propria or muscular layer
- □ T1a: Tumor invades lamina propria
- □ T1b: Tumor invades muscular layer
- □ T2: Tumor invades perimuscular connective tissue; no extension beyond serosa or into liver
- □ T3: Tumor perforates the serosa (visceral peritoneum) and/or directly invades the liver and/or one or more adjacent organ or structure, such as the stomach, duodenum, colon, pancreas, omentum, or extrahepatic bile ducts
- □ T4: Tumor invades main portal vein or hepatic artery or invades two or more extrahepatic organs or structures

#### REGIONAL LYMPH NODES (N)
- ☐ NX: Regional lymph nodes cannot be assessed
- □ N0: No regional lymph node metastasis
- □ N1: Metastases to nodes along the cystic duct, common bile duct, hepatic artery, and/or portal vein
- □ N2: Metastases to periportal, pericaval, superior mesenteric artery and/or celiac artery lymph nodes

#### DISTANT METASTASIS (M)
- □ M0: No distant metastasis (no pathologic M0; use clinical M to complete stage group)
- □ M1: Distant metastasis

### ANATOMIC STAGE + PROGNOSTIC GROUPS

<table>
<thead>
<tr>
<th>GROUP</th>
<th>T</th>
<th>N</th>
<th>M</th>
<th>PATHOLOGIC GROUP</th>
<th>T</th>
<th>N</th>
<th>M</th>
</tr>
</thead>
<tbody>
<tr>
<td>0</td>
<td>Tis</td>
<td>N0</td>
<td>M0</td>
<td>0</td>
<td>Tis</td>
<td>N0</td>
<td>M0</td>
</tr>
<tr>
<td>I</td>
<td>T1</td>
<td>N0</td>
<td>M0</td>
<td>I</td>
<td>T1</td>
<td>N0</td>
<td>M0</td>
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<tr>
<td>II</td>
<td>T2</td>
<td>N0</td>
<td>M0</td>
<td>II</td>
<td>T2</td>
<td>N0</td>
<td>M0</td>
</tr>
<tr>
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<td>T3</td>
<td>N0</td>
<td>M0</td>
<td>IIIA</td>
<td>T3</td>
<td>N0</td>
<td>M0</td>
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<td>N1</td>
<td>M0</td>
<td>IIIB</td>
<td>T1-3</td>
<td>N1</td>
<td>M0</td>
</tr>
<tr>
<td>IVA</td>
<td>T4</td>
<td>N0-1</td>
<td>M0</td>
<td>IVA</td>
<td>T4</td>
<td>N0-1</td>
<td>M0</td>
</tr>
<tr>
<td>IVB</td>
<td>Any T</td>
<td>N2</td>
<td>M0</td>
<td>IVB</td>
<td>Any T</td>
<td>N2</td>
<td>M0</td>
</tr>
<tr>
<td></td>
<td>Any T</td>
<td>Any N</td>
<td>M1</td>
<td></td>
<td>Any T</td>
<td>Any N</td>
<td>M1</td>
</tr>
</tbody>
</table>

☐ Stage unknown
Data Form for Cancer Staging
GALLBLADDER STAGING FORM

PROGNOSTIC FACTORS (SITE-SPECIFIC FACTORS)

REQUIRED FOR STAGING: None
CLINICALLY SIGNIFICANT:
  Tumor location ____________________________
  Specimen type ____________________________
  Extent of liver resection ____________________
  Free peritoneal side vs hepatic side for T2 ______

Histologic Grade (G) (also known as overall grade)

- [ ] 2 grade system
- [ ] 3 grade system
- [ ] 4 grade system
- [ ] No 2, 3, or 4 grade system is available

Grade
- [ ] Grade I or 1
- [ ] Grade II or 2
- [ ] Grade III or 3
- [ ] Grade IV or 4

ADDITIONAL DESCRIPTORS
Lymphatic Vessel Invasion (L) and Venous Invasion (V) have been combined into Lymph-Vascular Invasion (LVI) for collection by cancer registrars. The College of American Pathologists’ (CAP) Checklist should be used as the primary source. Other sources may be used in the absence of a Checklist. Priority is given to positive results.

- [ ] Lymph-Vascular Invasion Not Present (absent)/Not Identified
- [ ] Lymph-Vascular Invasion Present/Identified
- [ ] Not Applicable
- [ ] Unknown/Indeterminable

Residual Tumor (R)
The absence or presence of residual tumor after treatment. In some cases treated with surgery and/or with neoadjuvant therapy there will be residual tumor at the primary site after treatment because of incomplete resection or local and regional disease that extends beyond the limit of ability of resection.

- [ ] RX Presence of residual tumor cannot be assessed
- [ ] R0 No residual tumor
- [ ] R1 Microscopic residual tumor
- [ ] R2 Macroscopic residual tumor

Clinical stage was used in treatment planning (describe):

National guidelines were used in treatment planning [ ] NCCN [ ] Other (describe): ____________________________

Physician signature ____________________________ Date/Time ____________________________

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EC App 12/97 Revised EC 05/10
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Illustration
Indicate on diagram primary tumor and regional nodes involved.