**URINARY BLADDER 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)

- **T5**: Primary tumor cannot be assessed
- **T0**: No evidence of primary tumor
- **Ta**: Invasive papillary carcinoma
- **Tis**: Carcinoma in situ: "flat tumor"
- **T1**: Tumor invades subepithelial connective tissue
- **T2**: Tumor invades muscularis propria
- **pT2a**: Tumor invades superficial muscularis propria (inner half)
- **pT2b**: Tumor invades deep muscularis propria (outer half)
- **T3**: Tumor invades perivesical tissue
  - Microscopically
  - Macroscopically (extravesical mass)
- **pT3a**: Tumor invades any of the following: prostatic stroma, seminal vesicles, uterus, vagina, pelvic wall, abdominal wall
- **pT3b**: Tumor invades prostatic stroma, uterus, vagina
- **T4**: Tumor invades perivesical wall, abdominal wall

### REGIONAL LYMPH NODES (N)

- **NX**: Lymph nodes cannot be assessed
- **N0**: No lymph node metastasis
- **N1**: Single regional lymph node metastasis in the true pelvis (hypogastric, obturator, external iliac or presacral lymph node)
- **N2**: Multiple regional lymph node metastasis in the true pelvis (hypogastric, obturator, external iliac or presacral lymph node metastasis)
- **N3**: Lymph node metastasis to the common iliac lymph nodes

### DISTANT METASTASIS (M)

- **MX**: No distant metastasis
- **M0**: No distant metastasis (no pathologic M; use clinical M to complete stage group)
- **M1**: Distant metastasis

**ANATOMIC STAGE • PROGNOSTIC GROUPS**

<table>
<thead>
<tr>
<th>GROUP</th>
<th>CLINICAL</th>
<th>PATHOLOGIC</th>
</tr>
</thead>
<tbody>
<tr>
<td>GROUP</td>
<td>T</td>
<td>N</td>
</tr>
<tr>
<td>0a</td>
<td>Ta</td>
<td>N0</td>
</tr>
<tr>
<td>0is</td>
<td>Tis</td>
<td>N0</td>
</tr>
<tr>
<td>I</td>
<td>T1</td>
<td>N0</td>
</tr>
<tr>
<td>II</td>
<td>T2a</td>
<td>N0</td>
</tr>
<tr>
<td>III</td>
<td>T3a</td>
<td>N0</td>
</tr>
<tr>
<td>IV</td>
<td>T4b</td>
<td>N0</td>
</tr>
<tr>
<td>Any T</td>
<td>N1-3</td>
<td>M0</td>
</tr>
<tr>
<td>Stage unknown</td>
<td></td>
<td></td>
</tr>
</tbody>
</table>
NAME: ___________________________________  MRN: ___________________________________

Data Form for Cancer Staging
URINARY BLADDER STAGING FORM

PROGNOSTIC FACTORS (SITE-SPECIFIC FACTORS)

REQUIRED FOR STAGING: None

CLINICALLY SIGNIFICANT:

Presence or absence of extranodal extension: ________________________________

Size of the largest tumor deposit in the lymph nodes: __________________________

World Health Organization/International Society of Urologic Pathology (WHO/ISUP) grade: _______

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

Grading system  Grade

☐ 2 grade system  ☐ Grade I or 1

☐ 3 grade system  ☐ Grade II or 2

☐ 4 grade system  ☐ Grade III or 3

☐ No 2, 3, or 4 grade system is available  ☐ Grade IV or 4

ADDITIONAL DESCRIPTORS

Lymphatic Vessel Invasion (L) and Venous Invasion (V) have been combined into Lymph-Vascular Inversion (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/Indeterminate

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

General Notes:

For identification of special cases of TNM or pTNM classifications, the "m" suffix and "y", "r," and "a" prefixes are used. Although they do not affect the stage grouping, they indicate cases needing separate analysis.

m suffix indicates the presence of multiple primary tumors in a single site and is recorded in parentheses: pT(mN)NM.

y prefix indicates those cases in which caesarectomy is performed during or following initial multimodality therapy. The cTNM or pTNM category is identified by a "y" prefix. The pT(y)NM or pTNM categorizes the extent of tumor actually present at the time of that examination. The "y" categorization is not an estimate of tumor prior to multimodality therapy.

r prefix indicates a recurrent tumor when staged after a disease-free interval, and is identified by the "r" prefix rTNM.

a prefix designates the stage determined at autopsy: aTNM.

surgical margins is data field recorded by registrants describing the surgical margins of the resected primary specimen as determined only by the pathology report.

neoadjuvant treatment is radiation therapy or systemic therapy (consisting of chemotherapy, hormone therapy, or immunotherapy) administered prior to a definitive surgical procedure. If the surgical procedure is not performed, the administered therapy no longer meets the definition of neoadjuvant therapy.
Illustration
Indicate on diagram primary tumor and regional nodes involved.

Male

Posterior

Anterior

Right wall

Left wall

Right ureteral orifice

Left ureteral orifice

Posterior wall

Anterior wall

TR

D

N

PU

PS

Female

Posterior

Anterior

Right wall

Left wall

Right ureteral orifice

Left ureteral orifice

Posterior wall

Anterior wall

TR

D

N

PU

PS