# Quiz 1

1. A patient has a CT one week after his segmental resection for colon cancer that shows metastasis in the liver. The metastasis was not identified prior to surgery and the metastasis was never histologically confirmed.

What values would you enter in the cM and pM data items?

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| --- | --- |
| Data Item | Value |
| Clinical M | cM0 |
| Pathologic M | cM1a |

1. A patient presents for her annual mammogram and is found to have a .5cm mass in her left breast. An ultrasound guided biopsy of the mass showed invasive ductal carcinoma. Additional work-up did not reveal any metastasis. The patient returned for a lumpectomy and sentinel node biopsy. The lumpectomy revealed a .5cm ductal carcinoma in situ with negative margins. No invasive component was identified in the lumpectomy specimen. Two sentinel lymph nodes were negative for malignancy.

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| Data Item | Value |
| Clinical T | cT1a |
| Clinical N | cN0 |
| Clinical M | cM0 |
| Clinical Stage | IA |
| Pathologic T | pT1a |
| Pathologic N | pN0 |
| Pathologic M | cM0 |
| Stage Group | IA |

1. A patient presented to the emergency room with severe shortness of breath. A CT scan of the chest and abdomen showed a right lung upper lobe mass, measuring less than 4cm, highly suspicious for malignancy. Also noted, was a massive right sided pleural effusion. No lymphadenopathy or organomegaly. Additional staging work-up was negative. A thoracentesis of the pleural effusion confirmed metastatic adenocarcinoma. The patient was treated with chemotherapy and radiation. The managing physician staged the case T2a N0 M1a Stage 4.

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| Data Item | Value |
| Clinical T | cT2a |
| Clinical N | cN0 |
| Clinical M | pM1a |
| Clinical Stage | 4 |
| Pathologic T |  |
| Pathologic N |  |
| Pathologic M | pM1a |
| Stage Group | 4 |

# **Quiz 2**

**Case 1**

A patient with a PSA of 7 and a normal DRE documented by physician had a needle biopsy of the prostate that identified Gleason 3+2 adenocarcinoma in 1 of 6 cores from the left lobe.

This was followed by a retropubic prostatectomy that showed adenocarcinoma involving approximately one third of the left lobe. Two pelvic lymph nodes were removed and found to be negative.

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| Data Item | Value |
| Clinical T | cT1c |
| Clinical N | cN0 |
| Clinical M | cM0 |
| Clinical Stage | 1 |
| Pathologic T | pT2a |
| Pathologic N | pN0 |
| Pathologic M | cM0 |
| Stage Group | 1 |

**Case 2**

A patient presented to his physician with reported symptoms of left-sided ischias and dysuria with urinary bleeding lasting for 2 weeks and dysuria with periodic urinary bleeding. A CT scan of the abdomen and pelvis showed a tumor of the left kidney, 110 × 100 × 130 mm in size, with evidence of renal vein thrombosis, a tumor-like lesion of the right kidney, metastatic-type lesions in the sacral bone and lungs, as well as a lesion in the liver suspected of being a metastasis. A left-sided nephrectomy with adrenalectomy was performed as a primary tumor of the kidney was suspected.

Pathology from the surgery showed spindle cell sarcoma (8801/3) of kidney (C64.9) with tumor invading renal sinus fat, renal pelvis, fibrous capsule, perirenal fat, and ipsilateral adrenal gland with extension into renal vein.

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| Data Item | Value |
| Clinical T | cT2 |
| Clinical N | cN0 |
| Clinical M | cM1 |
| Clinical Stage | 4 |
| Pathologic T | pTX |
| Pathologic N | pNX |
| Pathologic M | cM1 |
| Stage Group | 4 |

**Case 3**

A patient presents with a solitary brain metastasis. A biopsy confirmed malignant melanoma. Work-up revealed no primary site, no other disease and the LDH is normal. The patient did not receive any additional treatment.

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| Data Item | Value |
| Clinical T | cT0 |
| Clinical N | cN0 |
| Clinical M | pM1c |
| Clinical Stage | 4 |
| Pathologic T |  |
| Pathologic N |  |
| Pathologic M | pM1c |
| Stage Group | 4 |

**Case 4**

A patient was diagnosed in his physician’s office with a bladder tumor. He presented to his urologist for a TURBT. Pathology from this procedure showed invasive urothelial carcinoma invading the superficial muscularis propria. Additional staging work-up was negative. The patient returned several weeks later for a cystectomy. The pathology from the cystectomy showed an area of non-invasive papillary urothelial cell carcinoma. No invasive tumor was identified in the specimen. 00/12 positive lymph nodes.

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| Data Item | Value |
| Clinical T | cT2 |
| Clinical N | cN0 |
| Clinical M | cM0 |
| Clinical Stage | 2 |
| Pathologic T | pT2a |
| Pathologic N | pN0 |
| Pathologic M | cM0 |
| Stage Group | 2 |