CLINICAL Extent of disease before any treatment		STAGE CATEGORY DEFINITIONS			PATHOLOGIC Extent of disease through completion of definitive surgery		
after neoadju	aging completed want therapy but quent surgery			y pathologic – staging completed after neoadjuvant therapy AND subsequent surgery			
TNM CATEGORY	FIGO STAGE	PRIMARY TUMOR (T)			FIGO STAGE		
□ TX □ T0 □ T1 □ T1a	I IA	Primary tumor cannot be assessed No evidence of primary tumor Tumor limited to ovaries (one or both) Tumor limited to one ovary; capsule intact, malignant cells in ascites or peritoneal wash	□ TX □ T0 □ T1 □ T1a	I IA			
☐ T1b	IB	Tumor limited to both ovaries; capsules intac malignant cells in ascites or peritoneal wash	☐ T1b	IB			
☐ T1c	IC	Tumor limited to one or both ovaries with any of the following: capsule ruptured, tumor on ovarian surface, malignant cells in ascites or peritoneal washings					
☐ T2 ☐ T2a	II IIA	Tumor involves one or both ovaries with pelvic extension and/or implants Lextension and/or implants on uterus and/or tube(s). No malignant cells in ascites or peritoneal washings Lextension and/or implants on uterus and/or tube(s). No malignant cells in ascites or peritoneal washings					
☐ T2b	IIB	Extension to and/or implants on other pelvascites or peritoneal washings	☐ T2b	IIB			
☐ T2c	IIC	Pelvic extension and/or implants (T2a or T2b) with malignant cells in ascites or peritoneal washings					
□ T3	III	Tumor involves one or both ovaries with microscopically confirmed peritoneal metastasis outside the pelvis			III		
☐ T3a ☐ T3b	IIIA IIIB	Microscopic peritoneal metastasis beyond pe Macroscopic peritoneal metastasis beyon	□ T3a□ T3b	IIIA IIIB			
☐ T3c	IIIC	dimension Peritoneal metastasis beyond pelvis more and/or regional lymph node metastasis	☐ T3c	IIIC			
		Note: Liver capsule metastasis T3/Stage III; liver Pleural effusion must have positive cytology for M					
TNM CATEGORY	FIGO STAGE	REGIONAL LYMPH NODES (N)			FIGO STAGE		
□ NX □ N0 □ N1	IIIC	Regional lymph nodes cannot be assessed No regional lymph node metastasis Regional lymph node metastasis		□ NX□ N0□ N1	IIIC		
TNM CATEGORY	FIGO STAGE	DISTANT METASTASIS (M)			FIGO STAGE		
□ M0 □ M1	IV	No distant metastasis (no pathologic M0; use clinical M to complete stage group) Distant metastasis (excludes peritoneal metastasis)			IV		
HOSPITAL NAME/ADDRESS			PATIENT NAME/INFORMATION				

(continued on next page)

Anatomic Stage • Prognostic Groups									
		CLINICAL						Ратн	IOLOGIC
GROUP	T	N	M		GF	ROUP	T	N	M
	T1	N0	MO			I.	T1	N0	MO
□ IA □ IB	T1a	N0	M0			IA	T1a	NO NO	M0
□ IB □ IC	T1b T1c	N0 N0	M0 M0			IB IC	T1b T1c	N0 N0	M0 M0
	T2	N0	M0			II	T2	N0	MO
□ IIA	T2a	N0	M0			IIA	T2a	N0	MO
☐ IIB	T2b	N0	MO			IIB	T2b	N0	MO
	T2c T3	N0 N0	M0 M0			IIC III	T2c T3	N0 N0	M0 M0
IIIA	T3a	NO NO	M0			IIIA	T3a	NO NO	M0
iliB	T3b	N0	MO			IIIB	T3b	N0	MO
☐ IIIC	T3c	N0	MO			IIIC	T3c	N0	MO
	Any T	N1	MO				Any T	N1	MO
□ IV	Any T	Any N	M1			IV	Any T	Any	[,] N M1
☐ Stage unknown									
PROGNOSTIC FACTORS (SITE-SPECIFIC FACTORS) REQUIRED FOR STAGING: None CLINICALLY SIGNIFICANT: FIGO stage: (present, absent, unknown, "y" meaning patient received chemotherapy prior to surgery) Residual tumor volume after primary cyto-reductive surgery: (no gross, ≤1 cm, >1 cm, unknown, "y" meaning patient received chemotherapy prior to surgery) Residual tumor location following primary cyto-reductive surgery:					y "	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:			
Malignant		ndicates patient re ime:		otherapy prior to	surge	ry)			pT(m)NM. y prefix indicates those cases in which classification is performed during or following initial multimodality
		so known as overall	• ,						therapy. The cTNM or pTNM
	g system		(Grade					category is identified by a "y" prefix.
	system			Grade I or 1		The ycTNM or ypTNM categorizes the extent of tumor actually present at			
	system		<u> </u>	Grade II or 2			the time of that examination. The "y"		
_	3					categorization is not an estimate of tumor prior to multimodality therapy.			
□ No 2, 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 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. 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.									
□ Lymph-Vascular Invasion Not Present (absent)/Not Identified □ Lymph-Vascular Invasion Present/Identified □ Not Applicable □ Unknown/Indeterminate									
HOSPITAL N	AME/ A DDR	ESS			Рат	IENT N AI	ME/INFORM	MATION	I

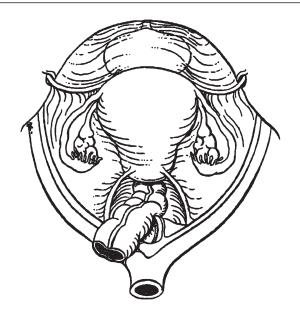
 $(continued\ from\ previous\ page)$

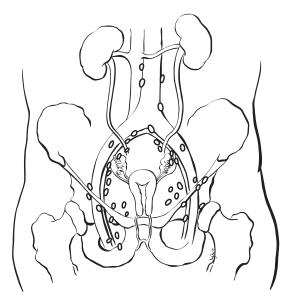
Residual Tumor (R) The absence or presence of residual tumor after treatment. In some cas with neoadjuvant therapy there will be residual tumor at the primary site incomplete resection or local and regional disease that extends beyond to the RX Presence of residual tumor cannot be assessed R0 No residual tumor R1 Microscopic residual tumor R2 Macroscopic residual tumor	after treatment because of	General Notes (continued): surgical margins is data field recorded by registrars describing the surgical margins of the resected primary site 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.			
☐ Clinical stage was used in treatment planning (describe):					
□ National guidelines were used in treatment planning □ NCCN □ Other (describe): —					
- National galdolines were used in treatment planning - Noon	— Other (describe).				
Physician signature	Date/	Time			
HOSPITAL NAME/ADDRESS	PATIENT NAME/INFORMATION	1			

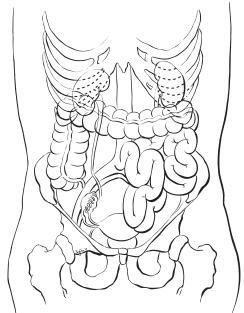
(continued on next page)

Illustration

Indicate on diagram primary tumor and regional nodes involved.







HOSPITAL NAME/ADDRESS	PATIENT NAME/INFORMATION

(continued from previous page)