台 灣 癌 症 登 記 中 心 通 知

急件

發件人： 台灣癌症登記中心
電　話： 02-2351-1708
傳　真： 02-2351-1733
地　址： 100 台北郵政 84-310 信箱

日　期： 112 年 12 月 15 日
編　號： 癌登第 112005 號

收文者： 所有申報醫院

副本收文者：衛生福利部國民健康署、台灣癌症登記學會、資拓宏宇國際股份有限公司

主　題： 因應癌症登記實務作業之需求，請貴院依說明段辦理

☑ 急件　☑ 請檢閱　□請加註　□請回覆　□請回收

一、 本案係依衛生福利部國民健康署委託「台灣癌症登記工作計畫」辦理。

二、 為提升國家癌症登記年報完成時效，請依癌症防治法規定於 **112 年 12 月 31 日**法定截止日期前，完成長表/短表申報作業。另為配合國健署年報記者會公告時程提前，將於 **113 年 2 月底**開始進行「111 診斷年院際複查」作業，相關內容將另行通知，請各醫院協助優先回覆複查作業。

三、 再次提醒，112 年度需完成五年追蹤之個案為 107(含)年前診斷之個案，請務必於 **113 年 2 月 29 日前**完成癌症個案五年追蹤資料申報，以免影響當年度之經費核銷計算與 113 年追蹤率成績。

四、 自 113 年第一季起，所有申報之癌症個案均全面採用 112 年 12 月修訂之 107 年 v.6「台灣癌症登記長表/短表摘錄手冊」、「癌症部位特定因子編碼手冊」規則申報。有關 107 年版台灣癌症登記摘錄手冊-112 年修訂版，請至台灣癌症登記中心網站 https://twcr.tw/?page_id=1809 下載。

五、 107 年版台灣癌症登記摘錄手冊-112 年修訂版，主要修改內容如下：

(1) 為能區分闌尾組織型態(M-code 8480)為 Low grade appendiceal mucinous neoplasm (LAMN)或 High grade appendiceal mucinous neoplasm (HAMN)，「臨床分級/分化」與「病理分級/分化」欄位新增編碼 L 和 H。

(2) 「臨床 T」與「病理 T」欄位新增編碼 ISLA，定義為 Tis(LAMN)。

(3) 「微創手術」欄位修改編碼指引定義，區分由人體自然孔洞進入或是經皮穿腔切開或經天然孔洞後再次切開之微創手術。

(4) 「較低放射劑量臨床標靶體積」與「較低放射劑量臨床標靶劑量」欄位修改收錄定義，若 TNM 照射部位皆有執行放射治療，則較低體積與劑量應摘錄 M 的範圍。

(5) 「其他放射治療技術」欄位新增放射線同位素鎦癌平 Lutathera (Lu-177)，此為一種胜肽受體放射核種治療 Peptide receptor radionuclide therapy (PRRT)。

(6) 「首次復發或癌症狀態追蹤日期」欄位修改編碼指引定義，其追蹤日期可以採用個案至醫院就診日期，此就診日期不限於癌症門診。

(7) 胰臟癌 SSF4 與乳癌 SSF10「Ki-67」欄位新增編碼指引定義，若檢驗值小於 1%以下的個案，新增編碼定義 A01-A09。例如：病理報告記載 Ki-67 為 0.3%，編碼為 A03。

(8) 乳癌 SSF7「HER2 免疫組織化學法的實驗數值」欄位，因近年 Low HER2 資訊漸受重視，當 ISH 檢測結果為陰性，且 IHC 為 1+或 2+時，仍需記載 IHC 之檢測結果。故新增編碼指引及編碼範圍 510-512、520-522、590-592。

(9) 乳癌、子宮體癌之 SSF1「動情激素接受體檢測(ERA) 」與 SSF2「黃體激素接受體檢測(PRA)」欄位修改編碼指引原則，當單顆腫瘤單一原發之個案應優先摘錄手術切除原發部位最大腫瘤體積的病理報告數值；若為多顆腫瘤分別皆有陽性百分比檢驗值，則優先摘錄反應比例較高之檢驗值。

(10) 白血病 SSF1「白血病染色體檢查的評估」修改編碼 004 之定義，新增「t(9;11)(p22;q23)」。

六、 最新 AJCC Version 9 於 2023 年出版外陰癌、神經內分泌腫瘤(包含胃、十二指腸與法特壺腹、空腸與迴腸、闌尾、結直腸、胰等部位)之癌症分期系統，適用於 **2024 年 1 月 1 日起新診斷**之個案，相關 TNM 與 Stage 編碼對應表，與比對前後版本差異處，請參考附件一。

七、 自 **2024 年 1 月 1 日起**新診斷為**子宮體癌**個案，FIGO 期別為必填欄位；最新 FIGO 2023 年新版適用於 **2024 年 1 月 1 日起新診斷之子宮內膜癌**個案，在「其他分期系統期別(病理)」欄位，請依 FIGO 2023 年版申報(附件二)，若子宮體癌組織形態非為子宮內膜癌者，應依原 FIGO 2009 年版申報。

前述六、七點，國民健康署將於 12 月底前發文通知各醫院，請多加留意。

八、 依據 2023 年出版 WHO Classification of Tumours 第 5 版 Paediatric Tumor，統整最新病理組織型態代碼申報原則(附件三)，且適用於 2023 診斷年起個案，相關重點摘錄如下：

(1) 位於 Testis (C62._) 的 Well differentiated neuroendocrine tumor (monodermal teratoma)，**應編碼為 9084/3**。

(2) 位於骨、軟骨、關節、或軟組織(C40._, C41._, C47._, C49._)的 Round cell sarcoma with EWSR1-non-ETS fusions, Round cell sarcoma with EWSR1/FUS::NFATC2, Round cell sarcoma with EWSR1::PATZ1，**新增編碼為 9366/3**。

(3) **[更正性態碼]**下述 3 項 soft tissue (C47._,C49._)：Plaque-like dermatofibrosarcoma protuberans, Myxoid dermatofibrosarcoma protuberans, 與 Dermatofibrosarcoma protuberans with myoid differentiation，編碼更正為 8832**/1**，**無需申報**。

九、 近年依據 WHO Classification of Tumours 第 5 版所彙整最新病理組織型態編碼，所有新增修訂處彙整表，請詳見附件四。

十、 因應癌症登記實務與國內外診療資訊需求日增，國民健康署預計於 113 年針對癌症登記申報項目進行欄位擴增，且同步更新「癌症登記線上申報系統」，請醫院提早準備，屆時將另行通知。

十一、如有任何疑問，請逕洽癌症登記中心 楊雅雯專員，聯絡電話：（02）2351-2024 Ext.23。

台灣癌症登記中心
Taiwan Cancer Registry

附件一. **AJCC Version 9 TNM 與 stage 編碼對應表、及比對第 9 版與第 8 版差異處**

Neuroendocrine Tumors of the Stomach

Identification of Primary Site

C16.0, C16.1, C16.2, C16.3, C16.4, C16.5, C16.6, C16.8, and C16.9

Histopathologic Type

Code	Description
8240	Neuroendocrine tumor, NOS
8240	Neuroendocrine tumor, grade 1
8249	Neuroendocrine tumor, grade 2
8249	Neuroendocrine tumor, grade 3
8153	Gastrin-producing (G-cell) neuroendocrine tumor
8241	Serotonin-producing enterochromaffin-cell (EC-cell) neuroendocrine tumor
8242	Histamine-producing enterochromaffin-like-cell (ECL-cell) neuroendocrine tumor
8156	Somatostatinoma, NOS (D-cell neuroendocrine tumor)

Grade

G	G Definition
GX	Grade cannot be assessed
G1	Mitotic count (per 2 mm^2)* < 2 and Ki-67 index (%)** < 3
G2	Mitotic count (per 2 mm^2)* = 2-20 or Ki-67 index (%)** = 3-20
G3	Mitotic count (per 2 mm^2)* > 20 or Ki-67 index (%)** > 20

*2 mm^2 equals 10 high-power fields at 40x magnification and an ocular field diameter of 0.5 mm; the number of high-power field for 10 mm^2 is different using microscopes with different field diameter; at least 10 mm^2 must be evaluated in areas of highest mitotic density.

**MIB1 antibody; % of 500-2000 cells in areas of highest nuclear labeling.

The final grade is determined by whichever (mitotic count and Ki-67 index) places the tumor in higher grade category.

Definition of Primary Tumor (T)

T Category	T Criteria
TX	Primary tumor cannot be assessed
T0	No evidence of primary tumor
T1	Tumor invades the mucosa or submucosa, and ≤ 1 cm in greatest dimension
T2	Tumor invades the muscularis propria or > 1 cm in greatest dimension
T3	Tumor invades through the muscularis propria into subserosal tissue without penetration of overlying serosa
T4	Tumor invades visceral peritoneum (serosa) or other organs or adjacent structures
Note: Multiple tumors should be designated as such (the largest tumor should be used to assign T category): • Use T(#); c.g., pT3(4) N0 M0, or • Use the *m* suffix, T(m); e.g., pT3(m) N0 M0	

Definition of Regional Lymph Node (N)

N Category	N Criteria
NX	Regional lymph nodes cannot be assessed
N0	No tumor involvement of regional lymph node(s)
N1	Tumor involvement of regional lymph node(s)

Definition of Distant Metastasis (M)

M Category	M Criteria
cM0	No distant metastasis
cM1	Distant metastasis
cM1a	Metastasis confined to liver
cM1b	Metastases in at least one extrahepatic site (e.g., lung, ovary, nonregional lymph node, peritoneum, bone)
cM1c	Both hepatic and extrahepatic metastases
pM1	Microscopic confirmation of distant metastasis
pM1a	Microscopic confirmation of metastasis confined to liver
pM1b	Microscopic confirmation of metastases in at least one extrahepatic site (e.g., lung, ovary, nonregional lymph node, peritoneum, bone)
pM1c	Microscopic confirmation of both hepatic and extrahepatic metastases

AJCC Prognostic Stage Groups

When T is…	And N is…	And M is…	Then the stage group is…
T1	NX, N0	M0	**I**
T2, T3	N0	M0	**II**
T4	N0	M0	**III**
Any T	N1	M0	**III**
Any T	Any N	M1	**IV**

References：
https://www.facs.org/quality-programs/cancer-programs/american-joint-committee-on-cancer/version-9/
https://www.facs.org/Quality-Programs/Cancer/news/ajcc-kindle-102920

Neuroendocrine Tumors of the Duodenum and Ampulla of Vater

Cancers Staged Using This Staging System

*This staging system applies only to **well-differentiated neuroendocrine tumors** of the duodenum and ampulla of Vater (**NET G1, G2, and G3**).*

Cancers NOT Staged Using This Staging System

- *Carcinomas of the ampulla of Vater, including **neuroendocrine carcinoma (NEC) and mixed adenocarcinoma-neuroendocrine carcinoma** should be staged according to the classification for ampulla of Vater.*
- *Carcinomas of the duodenum, including **neuroendocrine carcinoma (NEC) and mixed adenocarcinoma-neuroendocrine carcinoma** should be staged according to the classification for small intestine.*
- ***Neuroendocrine tumors of the small intestine including jejunum and ileum** should be staged according to the classification for **neuroendocrine tumors of the jejunum and ileum**.*

Identification of Primary Site

Cl7.0, and C24.l

Histopathologic Type

Code	Description
8240	Neuroendocrine tumor, NOS
8240	Neuroendocrine tumor, grade 1
8249	Neuroendocrine tumor, grade 2
8249	Neuroendocrine tumor, grade 3
8153	Gastrinoma (G-cell neuroendocrine tumor)
8156	Somatostatinoma, NOS (D-cell neuroendocrine tumor)
8241	Enterochromaffin-cell (EC-cell) neuroendocrine tumor
8683	Composite gangliocytoma/neuroma and neuroendocrine tumor

Grade

G	G Definition
GX	Grade cannot be assessed
G1	Mitotic count (per 2 mm^2)* < 2 and Ki-67 index (%)** < 3
G2	Mitotic count (per 2 mm^2)* = 2-20 or Ki-67 index (%)** = 3-20
G3	Mitotic count (per 2 mm^2)* > 20 or Ki-67 index (%)** > 20

*2 mm^2 equals 10 high-power fields at 40x magnification and an ocular field diameter of 0.5 mm; the number of high-power field for 10 mm^2 is different using microscopes with different field diameter; at least 10 mm^2 must be evaluated in areas of highest mitotic density.

**MIB1 antibody; % of 500-2000 cells in areas of highest nuclear labeling.

The final grade is determined by whichever (mitotic count and Ki-67 index) places the tumor in higher grade category.

Definition of Primary Tumor (T)

T Category	T Criteria
TX	Primary tumor cannot be assessed
T1	Tumor invades the mucosa or submucosa only, and is ≦1 c m in greatest dimension (duodenal tumors); Tumor ≦ l cm in greatest dimension and confined within the sphincter of Oddi (ampullary tumors)
T2	Tumor invades the muscularis propria or is > l cm in greatest dimension (duodenal tumors); Tumor invades through sphincter into duodenal submucosa or muscularis propria, or is > l cm in greatest dimension (ampullary tumors)
T3	Tumor invades the pancreas or peripancreatic adipose tissue
T4	Tumor invades the visceral peritoneum (serosa) or other organs

Note: Multiple tumors should be designated as such (the largest tumor should be used to assign T category):

- Use T(#); c.g., pT3(4) N0 M0, or
- Use the *m* suffix, T(m); e.g., pT3(m) N0 M0

Definition of Regional Lymph Nodes (N)

N Category	N Criteria
NX	Regional lymph nodes cannot be assessed
N0	No tumor involvement of regional lymph node(s)
N1	Tumor involvement of regional lymph node(s)

Definition of Distant Metastasis (M)

M Category	M Criteria
cM0	No distant metastasis
cM1	Distant metastasis
cM1a	Metastasis confined to liver
cM1b	Metastases in at least one extrahepatic site (e.g., lung, ovary, nonregional lymph node, peritoneum, bone)
cM1c	Both hepatic and extrahepatic metastases
pM1	Microscopic confirmation of distant metastasis
pM1a	Microscopic confirmation of metastasis confined to liver
pM1b	Microscopic confirmation of metastases in at least one extrahepatic site (e.g., lung, ovary, nonregional lymph node, peritoneum, bone)
pM1c	Microscopic confirmation of both hepatic and extrahepatic metastases

AJCC Prognostic Stage Groups

When T is…	And N is…	And M is…	Then the stage group is…
T1	NX, N0	M0	**I**
T2, T3	N0	M0	**II**
T4	N0	M0	**III**
Any T	N1	M0	**III**
Any T	Any N	M1	**IV**

References：
https://www.facs.org/quality-programs/cancer-programs/american-joint-committee-on-cancer/version-9/
https://www.facs.org/Quality-Programs/Cancer/news/ajcc-kindle-102920

Neuroendocrine Tumors of the Jejunum and Ileum

Cancers Staged Using This Staging System

*This staging system applies only to **well-differentiated neuroendocrine tumors** of the jejunum and ileum (**NET G1, G2, and G3**).*

Cancers NOT Staged Using This Staging System

- *Carcinomas of the jejunum and ileum, including **neuroendocrine carcinoma (NEC) and mixed adenocarcinoma-neuroendocrine carcinoma** should be staged according to the classification for small intestine.*
- ***Neuroendocrine tumors of the duodenum (CI7.0) and ampulla of Vater (C24.I)** should be staged according to the classification for **neuroendocrine tumors of the duodenum and ampulla of Vater.***

Identification of Primary Site

C17.1, C17.2, C17.8, and C17.9

Histopathologic Type

Code	Description
8240	Neuroendocrine tumor, NOS
8240	Neuroendocrine tumor, grade 1
8249	Neuroendocrine tumor, grade 2
8249	Neuroendocrine tumor, grade 3
8241	Enterochromaffin-cell (EC-cell) neuroendocrine tumor

Grade

G	G Definition
GX	Grade cannot be assessed
G1	Mitotic count (per 2 mm^2)* < 2 and Ki-67 index (%)** < 3
G2	Mitotic count (per 2 mm^2)* = 2-20 or Ki-67 index (%)** = 3-20
G3	Mitotic count (per 2 mm^2)* > 20 or Ki-67 index (%)** > 20

*2 mm^2 equals 10 high-power fields at 40x magnification and an ocular field diameter of 0.5 mm; the number of high-power field for 10 mm^2 is different using microscopes with different field diameter; at least 10 mm^2 must be evaluated in areas of highest mitotic density.

**MIB1 antibody; % of 500-2000 cells in areas of highest nuclear labeling.

The final grade is determined by whichever (mitotic count and Ki-67 index) places the tumor in higher grade category.

Definition of Primary Tumor (T)

T Category	T Criteria
TX	Primary tumor cannot be assessed
T0	No evidence of primary tumor
T1	Tumor invades the mucosa or submucosa, and ≤ 1cm in greatest dimension
T2	Tumor invades the muscularis propria or > 1 cm in greatest dimension with invasion of the mucosa or submucosa
T3	Tumor invades through the muscularis propria into subserosal tissue without penetration of overlying serosa
T4	Tumor invades the visceral peritoneum (serosa), or other organs or adjacent structures
Note: Multiple tumors should be designated as such (the largest tumor should be used to assign T category): • Use T(#); c.g., pT3(4) N0 M0, or • Use the *m* suffix, T(m); e.g., pT3(m) N0 M0	

Definition of Regional Lymph Node (N)

N Category	N Criteria
NX	Regional lymph nodes cannot be assessed
N0	No tumor involvement of regional lymph node(s)
N1	Tumor involvement of less than 12 regional lymph nodes
N2	Tumor involvement of large mesenteric masses (> 2 cm) and/or extensive nodal deposits (12 or greater), especially those that encase the superior mesenteric vessels *Note*: Mesenteric masses ≤ 2 cm should be stated in the pathology report as being present and collected by registrars but do not affect stage.

Definition of Distant Metastasis (M)

M Category	M Criteria
cM0	No distant metastasis
cM1	Distant metastasis
cM1a	Metastasis confined to liver
cM1b	Metastases in at least one extrahepatic site (e.g., lung, ovary, nonregional lymph node, peritoneum, bone)
cM1c	Both hepatic and extrahepatic metastases
pM1	Microscopic confirmation of distant metastasis
pM1a	Microscopic confirmation of metastasis confined to liver
pM1b	Microscopic confirmation of metastases in at least one extrahepatic site (e.g., lung, ovary, nonregional lymph node, peritoneum, bone)
pM1c	Microscopic confirmation of both hepatic and extrahepatic metastases

AJCC Prognostic Stage Groups

When T is…	And N is…	And M is…	Then the stage group is…
T1	N0	M0	**I**
T2, T3	N0	M0	**II**
T4	N0	M0	**III**
Any T	N1, N2	M0	**III**
Any T	Any N	M1	**IV**

References：
https://www.facs.org/quality-programs/cancer-programs/american-joint-committee-on-cancer/version-9/
https://www.facs.org/Quality-Programs/Cancer/news/ajcc-kindle-102920

Neuroendocrine Tumors of the Appendix

Cancers Staged Using This Staging System

*This staging system applies only to **well-differentiated neuroendocrine tumors** of the appendix (**NET G1, G2, and G3**).*

Cancers NOT Staged Using This Staging System

***High-grade neuroendocrine carcinoma (NEC), Goblet cell adenocarcinoma and mixed adenocarcinoma-NET/NEC** should be staged according to the classification for appendix.*

Identification of Primary Site

C18.1

Histopathologic Type

Code	Description
8240	Neuroendocrine tumor, NOS
8240	Neuroendocrine tumor, grade 1
8249	Neuroendocrine tumor, grade 2
8249	Neuroendocrine tumor, grade 3
8152	L-cell neuroendocrine tumor
8152	Glucagon-like peptide producing neuroendocrine tumor
8152	PP/PPY-producing tumor
8241	Enterochromaffin-cell (EC-cell) neuroendocrine tumor
8241	Serotonin-producing neuroendocrine tumor

Grade (G)

G	G Definition
GX	Grade cannot be assessed
G1	Mitotic count (per 2 mm^2)* < 2 and Ki-67 index (%)** < 3
G2	Mitotic count (per 2 mm^2)* = 2-20 or Ki-67 index (%)** = 3-20
G3	Mitotic count (per 2 mm^2)* > 20 or Ki-67 index (%)** > 20

*2 mm^2 equals 10 high-power fields at 40x magnification and an ocular field diameter of 0.5 mm; the number of high-power field for 10 mm^2 is different using microscopes with different field diameter; at least 10 mm^2 must be evaluated in areas of highest mitotic density.

**MIB1 antibody; % of 500-2000 cells in areas of highest nuclear labeling.

The final grade is determined by whichever (mitotic count and Ki-67 index) places the tumor in higher grade category.

Definition of Primary Tumor (T) (Note T)

T Category	T Criteria
TX	Primary tumor cannot be assessed
T0	No evidence of primary tumor
T1	Tumor ≦ 2 cm in greatest dimension
T2	Tumor > 2 cm but ≦ 4 cm in greatest dimension
T3	Tumor > 4 cm in greatest dimension, or with subserosal invasion, or involvement of the mesoappendix
T4	Tumor perforates the peritoneum, or directly invades other adjacent organs or structures (excluding direct mural extension to adjacent subserosa of adjacent bowel), e.g., abdominal wall and skeletal muscle
Note: Multiple tumors should be designated as such (the largest tumor should be used to assign T category): • Use T(#); e.g., pT3(4) N0 M0, or • Use the m suffix, T(m); e.g., pT3(m) N0 M0	

Definition of Regional Lymph Node (N) (Note N)

N Category	N Criteria
NX	Regional lymph nodes cannot be assessed
N0	No tumor involvement of regional lymph node(s)
N1	Tumor involvement of regional lymph nodes(s)

Definition of Distant Metastasis (M) (Note M)

M Category	M Criteria
cM0	No distant metastasis
cM1	Distant metastasis
cM1a	Metastasis confined to liver
cM1b	Metastases in at least one extrahepatic site (e.g., lung, ovary, nonregional lymph node, peritoneum, bone)
cM1c	Both hepatic and extrahepatic metastases
pM1	Microscopic confirmation of distant metastasis
pM1a	Microscopic confirmation of metastasis confined to liver
pM1b	Microscopic confirmation of metastasis in at least one extrahepatic site (e.g., lung, ovary, nonregional lymph node, peritoneum, bone)
pM1c	Microscopic confirmation of both hepatic and extrahepatic metastasis

AJCC Prognostic Stage Groups

When T is…	And N is…	And M is…	Then the stage group is…
T1	NX, N0	M0	**I**
T2	NX, N0	M0	**II**
T3	N0	M0	**II**
T4	N0	M0	**III**
Any T	N1	M0	**III**
Any T	Any N	M1	**IV**

References：
https://www.facs.org/quality-programs/cancer-programs/american-joint-committee-on-cancer/version-9/
https://www.facs.org/Quality-Programs/Cancer/news/ajcc-kindle-102920

Neuroendocrin Tumors of the Colon and Rectum

Cancers Staged Using This Staging System

*This staging system applies only to **well-differentiated neuroendocrine tumors** of the colon and rectum (**NET G1, G2, and G3**).*

Cancers NOT Staged Using This Staging System

***Poorly differentiated neuroendocrine carcinoma (NEC) and mixed neuroendocrine non-neuroendocrine (MiNEN) neoplasms** should be staged according to the classification for colon and rectum.*

Identification of Primary Site

C18.0, C18.2-C18.9, C19.9, and C20.9

Histopathologic Type

Code	Description
8240	Neuroendocrine tumor, NOS
8240	Neuroendocrine tumor, grade 1
8249	Neuroendocrine tumor, grade 2
8249	Neuroendocrine tumor, grade 3
8152	L-cell neuroendocrine tumor
8152	Glucagon-like peptide-producing neuroendocrine tumor
8152	PP/PYY-producing neuroendocrine tumor
8241	Enterochromaffin-cell (EC-cell) neuroendocrine tumor
8241	Serotonin-producing neuroendocrine tumor

Grade (G)

G	G Definition
GX	Grade cannot be assessed
G1	Mitotic count (per 2 mm^2)* < 2 and Ki-67 index (%)** < 3
G2	Mitotic count (per 2 mm^2)* = 2-20 or Ki-67 index (%)** = 3-20
G3	Mitotic count (per 2 mm^2)* > 20 or Ki-67 index (%)** > 20

*2 mm^2 equals 10 high-power fields at 40x magnification and an ocular field diameter of 0.5 mm; the number of high-power field for 10 mm^2 is different using microscopes with different field diameter; at least 10 mm^2 must be evaluated in areas of highest mitotic density.

**MIB1 antibody; % of 500-2000 cells in areas of highest nuclear labeling.

The final grade is determined by whichever (mitotic count and Ki-67 index) places the tumor in higher grade category.

Definition of Primary Tumor (T)

T Category	T Criteria
TX	Primary tumor cannot be assessed
T0	No evidence of primary tumor
T1	Tumor invades the mucosa or submucosa, and ≤2 cm in greatest dimension
T1a	Tumor <1 cm in greatest dimension
T1b	Tumor > l cm but ≤2 cm in greatest dimension
T2	Tumor invades the musct1laris propria, or is > 2 cm in greatest dimension with invasion of the mucosa or submucosa
T3	Tumor invades through the muscularis propria into subserosal tissue without penetration of overlying serosa
T4	Tumor invades the visceral peritoneum (serosa), or other organs or adjacent structt1res
Note: Multiple tumors should be designated as such (the largest tumor should be used to assign T category): • Use T(#); e.g., pT3(4) N0 M0, or • Use the m suffix, T(m); e.g., pT3(m) N0 M0	

Definition of Regional Lymph Node (N)

N Category	N Criteria
NX	Regional lymph nodes cannot be assessed
N0	No tumor involvement of regional lymph node(s)
N1	Tumor involvement of regional lymph node(s)

Definition of Distant Metastasis (M)

M Category	M Criteria
cM0	No distant metastasis
cM1	Distant metastasis
cM1a	Metastasis confined to liver
cM1b	Metastases in at least one extrahepatic site (e.g., lung, ovary, nonregional lymph node, peritonet1m, bone)
cM1c	Both hepatic and extrahepatic metastases
pM1	Microscopic confirmation of distant metastasis
pM1a	Microscopic confirmation of metastasis confined to liver
pM1b	Microscopic confirmation of metastases in at least one extrahepatic site (e.g., lung, ovary, nonregional lymph node, peritonet1m, bone)
pM1c	Microscopic confirmation of both hepatic and extrahepatic metastases

AJCC Prognostic Stage Groups

When T is…	And N is…	And M is…	Then the stage group is…
T1	NX, N0	M0	**I**
T2	N0	M0	**IIA**
T3	N0	M0	**IIB**
T4	N0	M0	**IIIA**
Any T	N1	M0	**IIIB**
Any T	Any N	M1	**IV**

References：
https://www.facs.org/quality-programs/cancer-programs/american-joint-committee-on-cancer/version-9/
https://www.facs.org/Quality-Programs/Cancer/news/ajcc-kindle-102920

Neuroendocrine Tumors of the Pancreas

Cancers Staged Using This Staging System

*This staging system applies only to **well-differentiated neuroendocrine tumors** of the pancreas (**NET G1, G2, and G3**).*

Cancers NOT Staged Using This Staging System

- *Carcinomas of the pancreas, including **poorly differentiated neuroendocrine carcinoma (NEC) and mixed neuroendocrine non-neuroendocrine (MiNEN) neoplasms** should be staged according to the classification for **exocrine pancreas**.*
- ***Well-differentiated neuroendocrine tumors of the duodenum (Cl7.0) or ampulla of Vater (C24.l)** should be staged according to the classification for **neuroendocrine tumors of the duodenum and ampulla of Vater**.*

Identification of Primary Site

C25.0 C25.l C25.2 C25.4 C25.7 C25.8, and C25.9

Histopathologic Type

Code	Description
8240	Neuroendocrine tumor, NOS
8240	Neuroendocrine tumor, grade 1
8249	Neuroendocrine tumor, grade 2
8249	Neuroendocrine tumor, grade 3
8150	Pancreatic neuroendocrine tumor, non-functioning
8151	Insulinoma
8152	Glucagonoma
8153	Gastrinoma
8155	VIPoma
8156	Somatostatinoma
8158	ACTH-producing neuroendocrine tumor
8241	Serotonin-producing neuroendocrine tumor
8272	GH-producing neuroendocrine tumor

This list includes histology codes and preferred terms from the WHO Classification of Tumours and the International Classification of Diseases for Oncology (ICD-0). Most of the terms in this list represent malignant behavior.

Grade (G)

G	G Definition
GX	Grade cannot be assessed
G1	Mitotic count (per 2 mm^2)* < 2 and Ki-67 index (%)** < 3
G2	Mitotic count (per 2 mm^2)* = 2-20 or Ki-67 index (%)** = 3-20
G3	Mitotic count (per 2 mm^2)* > 20 or Ki-67 index (%)** > 20

*2 mm^2 equals 10 high-power fields at 40x magnification and an ocular field diameter of 0.5 mm; the number of high-power field for 10 mm^2 is different using microscopes with different field diameter; at least 10 mm^2 must be evaluated in areas of highest mitotic density.

**MIB1 antibody; % of 500-2000 cells in areas of highest nuclear labeling.

The final grade is determined by whichever (mitotic count and Ki-67 index) places the tumor in higher grade category.

Definition of Primary Tumor (T)

T Category	T Criteria
TX	Tumor cannot be assessed
T1	Tumor limited to the pancreas*, ≤ 2 cm in greatest dimension
T2	Tumor limited to the pancreas*, > 2 cm but ≤ 4 cm in greatest dimension
T3	Tumor limited to the pancreas*, > 4 cm in greatest dimension; or tumor invading the duodenum, ampulla of Vater, or common bile duct
T4	Tumor invading adjacent organs (stomach, spleen, colon, adrenal gland) or the wall of large vessels (celiac axis, superior mesenteric artery/vein, splenic artery/vein, gastroduodenal artery/vein, portal vein)

**Limited to the pancreas* means there is no invasion of adjacent organs (stomach, spleen, colon, adrenal gland) or the wall of large vessels (celiac axis or the superior mesenteric artery). Extension of tumor into peripancreatic adipose tissue is NOT a basis for staging.

Note: Multiple tumors should be designated as such (the largest tumor should be used to assign T category):

- Use T(#); e.g., pT3(4) N0 M0, or
- Use the m suffix, T(m); e.g., pT3(m) N0 M0

Definition of Regional Lymph Node (N)

N Category	N Criteria
NX	Regional lymph nodes cannot be assessed
N0	No tumor involvement of regional lymph node(s)
N1	Tumor involvement of regional lymph node(s)

Definition of Distant Metastasis (M)

M Category	M Criteria
cM0	No distant metastasis
cM1	Distant metastasis
cM1a	Metastasis confined to liver
cM1b	Metastases in at least one extrahepatic site (e.g., lung, ovary, nonregional lymph node, peritoneum, bone)
cM1c	Both hepatic and extrahepatic metastases
pM1	Microscopic confirmation of distant metastasis
pM1a	Microscopic confirmation of metastasis confined to liver
pM1b	Microscopic confirmation of metastases in at least one extrahepatic site (e.g., lung, ovary, nonregional lymph node, peritoneum, bone)
pM1c	Microscopic confirmation of both hepatic and extrahepatic metastases

AJCC Prognostic Stage Groups

When T is…	And N is…	And M is…	Then the stage group is…
T1	N0	M0	**I**
T2, T3	N0	M0	**II**
T4	N0	M0	**III**
Any T	N1	M0	**III**
Any T	Any N	M1	**IV**

References：
https://www.facs.org/quality-programs/cancer-programs/american-joint-committee-on-cancer/version-9/
https://www.facs.org/Quality-Programs/Cancer/news/ajcc-kindle-1029

Vulva

Identification of Primary Site

C51.0, C51.1, C51.2, C51.8 and C51.9

Histopathologic Type

Code	Description
8085	Squamous cell carcinoma, HPV-associated
8086	Squamous cell carcinoma, HPV-independent
8070	Squamous cell carcinoma, NOS
8090	Basal cell carcinoma, NOS
9020	Phyllodes tumor, malignant
8500	Adenocarcinoma of anogenital mammary-like glands
8200	Adenoid cystic carcinoma
8020	Carcinoma, poorly differentiated, NOS
8560	Adenosquamous carcinoma
8240	Neuroendocrine tumor, NOS
8249	Neuroendocrine tumor, grade 2
8041	Small cell neuroendocrine carcinoma
8982	Myoepithelial carcinoma
8562	Epithelial-myoepithelial carcinoma
8542	Paget disease, extramammary
8400	Sweat gland adenocarcinoma
8401	Apocrine adenocarcinoma
8413	Eccrine adenocarcinoma
8409	Porocarcinoma, NOS
8144	Adenocarcinoma, intestinal type
9064	Germ cell tumor, NOS
9071	Yolk sac tumor, NOS
*8000**	*Neoplasm, malignant*
*8010**	*Carcinoma, NOS*
*8140**	*Adenocarcinoma, NOS*
*8051**	*Squamous cell carcinoma, verrucous*
*8054**	*Squamous cell carcinoma, warty*
*8071**	*Squamous cell carcinoma, keratinizing*
*8072**	*Squamous cell carcinoma, non-keratinizing*
*8076**	*Squamous cell carcinoma, micro invasive*
*8083**	*Squamous cell carcinoma, basaloid*
*8097**	*Basal cell carcinoma, nodular*

* Histology is not ideal for clinical use in patient care, as it describes an unspecified or outdated diagnosis. Data collectors may use this code only if there is not enough information in the medical record to document a more specific diagnosis.

Definition of Primary Tumor (T)

T Category	FIGO Stage	T Criteria
TX		Primary tumor cannot be assessed
T0		No evidence of primary tumor
T1	**I**	Tumor confined to the vulva
T1a	**IA**	Tumor size <= 2 cm in greatest dimension and stromal invasion <=1 mm Note: Depth of invasion is measured from the basement membrane of the deepest adjacent tumor-free rete ridge to the deepest point of invasion.
T1b	**IB**	Tumor size> 2 cm in greatest dimension or stromal invasion > 1 mm Note: Depth of invasion is measured from the basement membrane of the deepest adjacent tumor-free rete ridge to the deepest point of invasion.
T2	**II**	Tumor of any size with extension to lower 1/3 of urethra, lower 1/3 of vagina, or anus
T3	**IIIA**	Tumor of any size with disease extension to upper 2/3 of urethra, upper 2/3 of vagina, bladder mucosa, rectal mucosa
T4	**IVA**	Tumor fixed to pelvic bone

Definition of Regional Lymph Node (N)

N Category	FIGO Stage	N Criteria
NX		Regional lymph nodes cannot be assessed
N0		No regional lymph node metastasis
N0(i+)		Isolated tumor cells in regional lymph node(s) <= 0.2 mm, or single cells or clusters of cells <= 200 cells in a single lymph node cross-section
N1	**III**	Tumor involvement of non-fixed, non-ulcerated regional lymph nodes
N1mi	**IIIA**	Tumor involvement > 0.2 mm but <= 2.0 mm in diameter of regional lymph nodes
N1a	**IIIA**	Tumor involvement > 2.0 mm but <= 5mm of regional lymph nodes
N1b	**IIIB**	Tumor involvement > 5 mm of regional lymph nodes
N1c	**IIIC**	Tumor involvement of regional lymph nodes with extranodal extension (ENE)
N2	**IVA**	Tumor involvement of fixed or ulcerated regional lymph nodes

Definition of Distant Metastasis (M)

M Category	FIGO Stage	M Criteria
cM0		No distant metastasis
cM1	**IVB**	Distant metastasis
pM1	**IVB**	Microscopic confirmation of distant metastasis

AJCC Prognostic Stage Groups

When T is…	And N is…	And M is…	Then the stage group is…
T1	N0	M0	**I**
T1a	N0	M0	**IA**
T1b	N0	M0	**IB**
T2	N0	M0	**II**
TX-T3	N1	M0	**III**
T3	N0	M0	**IIIA**
TX-T3	N1mi, N1a	M0	**IIIA**
TX-T3	N1b	M0	**IIIB**
TX-T3	N1c	M0	**IIIC**
T4	Any N	M0	**IVA**
Any T	N2	M0	**IVA**
Any T	Any N	M1	**IVB**

References：
https://www.facs.org/quality-programs/cancer-programs/american-joint-committee-on-cancer/version-9/
https://www.facs.org/Quality-Programs/Cancer/news/ajcc-kindle-102920

Neuroendocrine Tumors of the Stomach

***Summary of Changes*：**

- Histopathologic type updated according to the WHO Classification of Tumors, 5th Ed.
- New section on modalities and imaging used for diagnosis and staging.
- New table describing diagnostic workup.
- New table describing pathological staging with endoscopic resection highlighted as a surgical specimen.
- TlNXM0 has been added to stage I.
- Removed chromogranin A and added types of gastric neuroendocrine tumor.
- Non-tumor factors have been added.
- Clinical history of proton pump inhibitor use has been added.

Definition of Primary Tumor (T) (紅字增修處)

T Category	T Criteria
TX	Primary tumor cannot be assessed
T0	No evidence of primary tumor
T1	Tumor invades the ~~lamina propria~~ mucosa or submucosa, and ≤ 1 cm in greatest dimension
T2	Tumor invades the muscularis propria or > 1 cm in greatest dimension
T3	Tumor invades through the muscularis propria into subserosal tissue without penetration of overlying serosa
T4	Tumor invades visceral peritoneum (serosa) or other organs or adjacent structures

Note: Multiple tumors should be designated as such (the largest tumor should be used to assign T category):

- Use T(#); c.g., pT3(4) N0 M0, or
- Use the *m* suffix, T(m); e.g., pT3(m) N0 M0

Definition of Distant Metastasis (M) (紅字增修處)

M Category	M Criteria
cM0	No distant metastasis
cM1	Distant metastasis
cM1a	Metastasis confined to liver
cM1b	Metastases in at least one extrahepatic site (e.g., lung, ovary, nonregional lymph node, peritoneum, bone)
cM1c	Both hepatic and extrahepatic metastases
pM1	Microscopic confirmation of distant metastasis
pM1a	Microscopic confirmation of metastasis confined to liver
pM1b	Microscopic confirmation of metastases in at least one extrahepatic site (e.g., lung, ovary, nonregional lymph node, peritoneum, bone)
pM1c	Microscopic confirmation of both hepatic and extrahepatic metastases

AJCC Prognostic Stage Groups (紅字增修處)

When T is…	And N is…	And M is…	Then the stage group is…
T1	NX, N0	M0	I
T2, T3	N0	M0	II
T4	N0	M0	III
Any T	N1	M0	III
Any T	Any N	M1	IV

References：

https://www.facs.org/quality-programs/cancer-programs/american-joint-committee-on-cancer/version-9/

https://www.facs.org/Quality-Programs/Cancer/news/ajcc-kindle-102920

Neuroendocrine Tumors of the Duodenum and Ampulla of Vater

***Summary of Changes*：**

- Histopathologic type updated according to the WHO Classification of Tumors, 5th Ed.
- New section on modalities and imaging used for diagnosis and staging highlight endoscopic management for small duodenal NETs.
- New section highlights endoscopic resection.
- TlNXM0 has been added to stage I to reflect lesions undergoing endoscopic resection.
- Associated genetic syndrome and chromogranin A have been removed.
- Non-tumor factors have been added.

Definition of Primary Tumor (T) (紅字增修處)

T Category	T Criteria
TX	Primary tumor cannot be assessed
T1	Tumor invades the mucosa or submucosa only and is≦1 c m in greatest dimension (duodenal tumors); Tumor≦ l cm in greatest dimension and confined within the sphincter of Oddi (ampullary tumors)
T2	Tumor invades the muscularis propria or is > l cm in greatest dimension (duodenal tumors); Tumor invades through sphincter into duodenal submucosa or muscularis propria, or is > l cm in greatest dimension (ampullary tumors)
T3	Tumor invades the pancreas or peripancreatic adipose tissue
T4	Tumor invades the visceral peritoneum (serosa) or other organs

Note: Multiple tumors should be designated as such (the largest tumor should be used to assign T category):

- Use T(#); c.g., pT3(4) N0 M0, or
- Use the *m* suffix, T(m); e.g., pT3(m) N0 M0

Definition of Distant Metastasis (M) (紅字增修處)

M Category	M Criteria
cM0	No distant metastasis
cM1	Distant metastasis
cM1a	Metastasis confined to liver
cM1b	Metastases in at least one extrahepatic site (e.g., lung, ovary, nonregional lymph node, peritoneum, bone)
cM1c	Both hepatic and extrahepatic metastases
pM1	Microscopic confirmation of distant metastasis
pM1a	Microscopic confirmation of metastasis confined to liver
pM1b	Microscopic confirmation of metastases in at least one extrahepatic site (e.g., lung, ovary, nonregional lymph node, peritoneum, bone)
pM1c	Microscopic confirmation of both hepatic and extrahepatic metastases

AJCC Prognostic Stage Groups (紅字增修處)

When T is…	And N is…	And M is…	Then the stage group is…
Tl	NX, N0	M0	I
T2, T3	N0	M0	II
T4	N0	M0	III
AnyT	N1	M0	III
AnyT	Any N	M1	IV

References：

https://www.facs.org/quality-programs/cancer-programs/american-joint-committee-on-cancer/version-9/
https://www.facs.org/Quality-Programs/Cancer/news/ajcc-kindle-102920

Neuroendocrine Tumors of the Jejunum and Ileum

***Summary of Changes*：**

- Included tumors overlapping the jejunum and ileum as well as small intestine, NOS.
- Histopathologic type updated according to the WHO Classification of Tumors, 5th Ed.
- New section on modalities used for diagnosis and staging
- Deleted chromogranin A, plasma pancreastatin and plasma serotonin level; added mesenteric fibrosis.
- Included age and patient comorbidities unrelated to the NET.
- Included somatostatin receptor type 2 positivity.

Definition of Primary Tumor (T) (紅字增修處)

T Category	T Criteria
TX	Primary tumor cannot be assessed
T0	No evidence of primary tumor
T1	Tumor invades ~~lamina propria~~ the mucosa or submucosa, and ~~less than or equal to 1 cm in size~~ ≤ 1cm in greatest dimension
T2	Tumor invades the muscularis propria or ~~greater than 1 cm in size~~ > 1 cm in greatest dimension with invasion of the mucosa or submucosa
T3	Tumor invades through the muscularis propria into subserosal tissue without penetration of overlying serosa
T4	Tumor invades visceral peritoneum (serosal) or other organs or adjacent structures

Note: Multiple tumors should be designated as such (the largest tumor should be used to assign T category):

- Use T(#); c.g., pT3(4) N0 M0, or
- Use the *m* suffix, T(m); e.g., pT3(m) N0 M0

Definition of Regional Lymph Node (N) (紅字增修處)

N Category	N Criteria
NX	Regional lymph nodes cannot be assessed
N0	No tumor involvement of regional lymph node(s)
N1	Tumor involvement of less than 12 regional lymph nodes
N2	Tumor involvement of large mesenteric masses(> 2 cm) and/or extensive nodal deposits (12 or greater), especially those that encase the superior mesenteric vessels *Note*: Mesenteric masses ≤ 2 cm should be stated in the pathology report as being present and collected by registrars but do not affect stage.

Definition of Distant Metastasis (M) (紅字增修處)

M Category	M Criteria
cM0	No distant metastasis
cM1	Distant metastasis
cM1a	Metastasis confined to liver
cM1b	Metastases in at least one extrahepatic site (e.g., lung, ovary, nonregional lymph node, peritoneum, bone)
cM1c	Both hepatic and extrahepatic metastases
pM1	Microscopic confirmation of distant metastasis
pM1a	Microscopic confirmation of metastasis confined to liver
pM1b	Microscopic confirmation of metastases in at least one extrahepatic site (e.g., lung, ovary, nonregional lymph node, peritoneum, bone)
pM1c	Microscopic confirmation of both hepatic and extrahepatic metastases

References：

https://www.facs.org/quality-programs/cancer-programs/american-joint-committee-on-cancer/version-9/
https://www.facs.org/Quality-Programs/Cancer/news/ajcc-kindle-102920

Neuroendocrine Tumors of the Appendix

Summary of Changes **：**

- Histopathologic Type updated according to WHO Classification of Tumors, 5th Ed.
- New section on modalities used for diagnosis and staging
- Included age and patient comorbidities unrelated to the NET.
- Included somatostatin receptor type 2 positivity.
- Discussed against routine use of chromogranin A and added data on emerging prognostic tools: PPQ and Clinical Score.
- T1NXM0 has been added to Stage I, and T2NXM0 has been added to Stage II.

Definition of Distant Metastasis (M) (紅字增修處)

M Category	M Criteria
cM0	No distant metastasis
cM1	Distant metastasis
cM1a	Metastasis confined to liver
cM1b	Metastases in at least one extrahepatic site (e.g., lung, ovary, nonregional lymph node, peritoneum, bone)
cM1c	Both hepatic and extrahepatic metastases
pM1	Microscopic confirmation of distant metastasis
pM1a	Microscopic confirmation of metastasis confined to liver
pM1b	Microscopic confirmation of metastasis in at least one extrahepatic site (e.g., lung, ovary, nonregional lymph node, peritoneum, bone)
pM1c	Microscopic confirmation of metastasis to sites other than peritoneum

.

AJCC Prognostic Stage Groups (紅字增修處)

When T is…	And N is…	And M is…	Then the stage group is…
T1	NX, N0	M0	I
T2	NX, N0	M0	II
T3	N0	M0	II
T4	N0	M0	III
Any T	N1	M0	III
Any T	Any N	M1	IV

References：

https://www.facs.org/quality-programs/cancer-programs/american-joint-committee-on-cancer/version-9/
https://www.facs.org/Quality-Programs/Cancer/news/ajcc-kindle-102920

Neuroendocrine Tumors of the Colon and Rectum

***Summary of Changes*：**

- T1NXM0 has been added to Stage I.
- New section on modalities and imaging used for diagnosis and staging.
- New table describing diagnostic workup.
- New table describing pathological staging with information provided by the pathologist and staging by the managing physician.
- New section with staging rules for common staging scenarios.
- Updated prognostic tumor characteristics and added non-tumor factors.

Definition of Primary Tumor (T) (紅字增修處)

T Category	T Criteria
TX	Primary tumor cannot be assessed
T0	No evidence of primary tumor
T1	Tumor invades the mucosa or submucosa, and ≦2 cm in greatest dimension
T1a	Tumor <1 cm in greatest dimension
T1b	Tumor > l cm but ≦2 cm in greatest dimension
T2	Tumor invades the musct1laris propria, or is > 2 cm in greatest dimension with invasion of the mucosa or submucosa
T3	Tumor invades through the muscularis propria into subserosal tissue without penetration of overlying serosa
T4	Tumor invades the visceral peritoneum (serosa), or other organs or adjacent structt1res

Note: Multiple tumors should be designated as such (the largest tumor should be used to assign T category):

- Use T(#); e.g., pT3(4) N0 M0, or
- Use the m suffix, T(m); e.g., pT3(m) N0 M0

Definition of Distant Metastasis (M) (紅字增修處)

M Category	M Criteria
cM0	No distant metastasis
cM1	Distant metastasis
cM1a	Metastasis confined to liver
cM1b	Metastases in at least one extrahepatic site (e.g., lung, ovary, nonregional lymph node, peritonet1m, bone)
cM1c	Both hepatic and extrahepatic metastases
pM1	Microscopic confirmation of distant metastasis
pM1a	Microscopic confirmation of metastasis confined to liver
pM1b	Microscopic confirmation of metastases in at least one extrahepatic site (e.g.,lung, ovary, nonregional lymph node, peritonet1m, bone)
pM1c	Microscopic confirmation of both hepatic and extrahepatic metastases

AJCC Prognostic Stage Groups (紅字增修處)

When T is…	And N is…	And M is…	Then the stage group is…
T1	NX, N0	M0	I
T2	N0	M0	IIA
T3	N0	M0	IIB
T4	N0	M0	IIIA
Any T	N1	M0	IIIB
Any T	Any N	M1	IV

References：

https://www.facs.org/quality-programs/cancer-programs/american-joint-committee-on-cancer/version-9/
https://www.facs.org/Quality-Programs/Cancer/news/ajcc-kindle-102920

Neuroendocrine Tumors of the Pancreas

Summary of Changes：

- Histopathologic type updated according to the WHO Classification of Tumors, 5th Ed.
- Included *DAXX/ATRX, ARX* and *PDX1* as potential biomarkers and several clinicopathologic factors for non-tumor factors.

Prognostic Tumor Characteristics	Non-Tumor Factors
1. Mitotic count 2. Ki-67 index 3. Associated genetic syndrome 4. Chomogranin A (CgA) 5. Functionality 6. DAXX/ATRXst 7. ARX, PDXl expression	1. Age 2. Family history of cancer 3. Smoking 4. Alcohol consumption 5. Increased body mass index 6. Diabetes 7. MEN1 and other rarer heritable gene conditions (neurofibromatosis type I, Cowden syndrome, tuberous sclerosis, von Rippel-Lindau syndrome)

- Included **DOTA PET scans** in imaging used for diagnosis and the new clinical staging and workup table.
- Introduction discussed latest epidemiological data and treatment options including PRRT, capecitabine in combination with temozolomide (chemotherapy regimens).

Definition of Distant Metastasis (M) (紅字增修處)

M Category	M Criteria
cM0	No distant metastasis
cM1	Distant metastasis
cM1a	Metastasis confined to liver
cM1b	Metastases in at least one extrahepatic site (e.g., lung, ovary, nonregional lymph node, peritoneum, bone)
cM1c	Both hepatic and extrahepatic metastases
pM1	Microscopic confirmation of distant metastasis
pM1a	Microscopic confirmation of metastasis confined to liver
pM1b	Microscopic confirmation of metastases in at least one extrahepatic site (e.g., lung, ovary, nonregional lymph node, peritoneum, bone)
pM1c	Microscopic confirmation of both hepatic and extrahepatic metastases

References：

https://www.facs.org/quality-programs/cancer-programs/american-joint-committee-on-cancer/version-9/

https://www.facs.org/Quality-Programs/Cancer/news/ajcc-kindle-102920

Vulva

***Summary of Changes*：**

- New definition of depth of invasion measurement.
  Depth of invasion is measured from the basement membrane of the deepest adjacent tumor-free rete ridge to the deepest point of invasion.
- New T category, T4-Tumor fixed to pelvic bone.
- N category is reduced from 3 (Nl-N3) categories to 2 categories (Nl-N2).
- Imaging findings are allowed to be incorporated into T, N and M categories.

Definition of primary Tumor (T) (紅字增修處)

T Category	FIGO Stage	T Criteria
TX		Primary tumor cannot be assessed
T0		No evidence of primary tumor
T1	**I**	Tumor confined to the vulva ~~and/or perineum~~ ~~Multifocal lesions should be designated as such. The largest lesion or the lesion with the greatest depth of invasion will be the target lesion identified to address the highest pT stage.~~ ~~Depth of invasion is defined as the measurement of the tumor from the epithelial stromal junction of the adjacent most superficial dermal papilla to the deepest point of invasion~~
T1a	**IA**	Tumor size ~~Lesions~~ 2 cm or less, confined to the vulva ~~and/or perineum,~~ and ~~with~~ stromal invasion of 1.0 mm or less Note: Depth of invasion is measured from the basement membrane of the deepest adjacent tumor-free rete ridge to the deepest point of invasion.
T1b	**IB**	Tumor size ~~Lesions~~ more than 2 cm, or any size with stromal invasion of more than 1.0 mm, confined to the vulva ~~and/or perineum~~ Note: Depth of invasion is measured from the basement membrane of the deepest adjacent tumor-free rete ridge to the deepest point of invasion.
T2	**II**	Tumor of any size with extension to ~~adjacent perineal structures (~~lower~~/distal third~~ 1/3 of the urethra, lower~~/distal third~~ 1/3 of the vagina, or anus ~~anal involvement)~~
T3	**IIIA** ~~**IVA**~~	Tumor of any size with disease extension to ~~any of the following:~~ upper~~/proximal two thirds~~ 2/3 of the urethra, upper~~/proximal two thirds~~ 2/3 of the vagina, bladder mucosa, ~~or~~ rectal mucosa~~, or fixed to the pelvic bone~~
T4	**IVA**	Tumor fixed to pelvic bone

Definition of Regional Lymph Node (N) (紅字增修處)

N Category	FIGO Stage	N Criteria
NX		Regional lymph nodes cannot be assessed
N0		No regional lymph node metastasis
N0(i+)		Isolated tumor cells in regional lymph node(s) no greater than 0.2 mm, or single cells or clusters of cells <= 200 cells in a single lymph node cross-section
N1	**III**	Tumor involvement of non-fixed, non-ulcerated regional lymph nodes ~~Regional lymph node metastasis with one or two lymph node metastases each less than 5 mm, or one lymph node metastasis greater than or equal to 5 mm~~
N1mi	**IIIA**	Tumor involvement > 0.2 mm but <= 2.0 mm in diameter of regional lymph nodes
N1a*	**IIIA**	Tumor involvement > 2.0 mm but <= 5mm of regional lymph nodes ~~One or two lymph node metastases each less than 5mm~~
N1b	**IIIB**	Tumor involvement > 5 mm of regional lymph nodes
	~~**IIIA**~~	~~One lymph node metastasis greater than or equal to 5 mm~~
N1c	**IIIC**	Tumor involvement of regional lymph nodes with extranodal extension (ENE)
N2	**IVA**	Tumor involvement of fixed or ulcerated regional lymph nodes ~~Regional lymph node metastasis with three or more lymph node metastases each less than 5 mm, or two or more lymph node metastases greater than or equal to 5 mm, or lymph node(s) with extranodal extension~~
~~**N2a***~~	~~**IIIB**~~	~~Three or more lymph node metastases each less than 5 mm~~
~~**N2b**~~	~~**IIIB**~~	~~Two or more lymph node metastases greater than or equal to 5 mm~~
~~**N2c**~~	~~**IIIC**~~	~~Lymph node(s) with extranodal extension~~
~~**N3**~~	~~**IVA**~~	~~Fixed or ulcerated regional lymph node metastasis~~

~~*Includes micrometastasis, N1mi and N2mi.~~

Definition of Distant Metastasis (M) (紅字增修處)

M Category	FIGO Stage	M Criteria
cM0		No distant metastasis (no pathological M0；use clinical M to complete stage group)
cM1	**IVB**	Distant metastasis ~~(including pelvic lymph node metastasis)~~
pM1	**IVB**	Microscopic confirmation of distant metastasis

AJCC Prognostic Stage Groups (紅字增修處)

When T is…	And N is…	And M is…	Then the stage group is…
T1	N0	M0	I
T1a	N0	M0	IA
T1b	N0	M0	IB
T2	N0	M0	II
TX-T3 ~~T1-T2~~	N1~~-N2c~~	M0	III
T3	N0	M0	IIIA
TX-T3 ~~T1-T2~~	N1mi, N1a	M0	IIIA
TX-T3 ~~T1-T2~~	N1b ~~N2a,N2b~~	M0	IIIB
TX-T3 ~~T1-T2~~	N1c ~~N2c~~	M0	IIIC
~~T1-T3~~	~~N3~~	~~M0-M1~~	~~IV~~
T4 ~~T1-T2~~	Any N ~~N3~~	M0	IVA
Any T ~~T3~~	N2 ~~Any N~~	M0	IVA
Any T	Any N	M1	IVB

References：

https://www.facs.org/quality-programs/cancer-programs/american-joint-committee-on-cancer/version-9/

https://www.facs.org/Quality-Programs/Cancer/news/ajcc-kindle-102920

附件二. Endometrial Cancer: FIGO staging 2023 revision

TABLE 1 2023 FIGO staging of cancer of the endometrium.[a,b]

Stage	Description
Stage I	Confined to the uterine corpus and ovary[c]
IA	Disease limited to the endometrium OR non-aggressive histological type, i.e. low-grade endometroid, with invasion of less than half of myometrium with no or focal lymphovascular space involvement (LVSI) OR good prognosis disease
	IA1 Non-aggressive histological type limited to an endometrial polyp OR confined to the endometrium
	IA2 Non-aggressive histological types involving less than half of the myometrium with no or focal LVSI
	IA3 Low-grade endometrioid carcinomas limited to the uterus and ovary[c]
IB	Non-aggressive histological types with invasion of half or more of the myometrium, and with no or focal LVSI[d]
IC	Aggressive histological types[e] limited to a polyp or confined to the endometrium
Stage II	Invasion of cervical stroma with extrauterine extension OR with substantial LVSI OR aggressive histological types with myometrial invasion
IIA	Invasion of the cervical stroma of non-aggressive histological types
IIB	Substantial LVSI[d] of non-aggressive histological types
IIC	Aggressive histological types[e] with any myometrial involvement
Stage III	Local and/or regional spread of the tumor of any histological subtype
IIIA	Invasion of uterine serosa, adnexa, or both by direct extension or metastasis
	IIIA1 Spread to ovary or fallopian tube (except when meeting stage IA3 criteria)[c] IIIA2 Involvement of uterine subserosa or spread through the uterine serosa
IIIB	Metastasis or direct spread to the vagina and/or to the parametria or pelvic peritoneum
	IIIB1 Metastasis or direct spread to the vagina and/or the parametria IIIB2 Metastasis to the pelvic peritoneum
IIIC	Metastasis to the pelvic or para-aortic lymph nodes or both[f]
	IIIC1 Metastasis to the pelvic lymph nodes IIIC1i Micrometastasis IIICii Macrometastasis IIIC2 Metastasis to para-aortic lymph nodes up to the renal vessels, with or without metastasis to the pelvic lymph nodes IIIC2i Micrometastasis IIIC2ii Macrometastasis
Stage IV	Spread to the bladder mucosa and/or intestinal mucosa and/or distance metastasis
IVA	Invasion of the bladder mucosa and/or the intestinal/bowel mucosa
IVB	Abdominal peritoneal metastasis beyond the pelvis
IVC	Distant metastasis, including metastasis to any extra- or intra-abdominal lymph nodes above the renal vessels, lungs, liver, brain, or bone

Abbreviations: EEC, endometrioid carcinoma; LVSI, lymphovascular space involvement.

[a]Endometrial cancer is surgically staged and pathologically examined. In all stages, the grade of the lesion, the histological type and LVSI must be recorded. If available and feasible, molecular classification testing (*POLEmut*, MMRd, NSMP, p53abn) is encouraged in all patients with endometrial cancer for prognostic risk-group stratification and as factors that might influence adjuvant and systemic treatment decisions (Table 2).

[b]In early endometrial cancer, the standard surgery is a total hysterectomy with bilateral salpingo-oophorectomy via a minimally invasive laparoscopic approach. Staging procedures include infracolic omentectomy in specific histological subtypes, such as serous and undifferentiated endometrial carcinoma, as well as carcinosarcoma, due to the high risk of microscopic omental metastases. Lymph node staging should be performed in patients with intermediate-high/high-risk patients. Sentinel lymph node (SLN) biopsy is an adequate alternative to systematic lymphadenectomy for staging proposes. SLN biopsy can also be considered in low−/low-intermediate-risk patients to rule out occult lymph node metastases and to identify disease truly confined to the uterus. Thus, the ESGO-ESTRO-ESP guidelines allow an approach of SLN in all patients with endometrial carcinoma, which is endorsed by FIGO. In assumed early endometrial cancer, an SLN biopsy in an adequate alternative to systematic lymphadenectomy in high-intermediate and high-risk cases for the purpose of lymph node staging and can also be considered in low−/intermediate-risk disease to rule out occult lymph node metastases. An SLN biopsy should be done in association with thorough (ultrastaging) staging as it will increase the detection of low-volume disease in lymph nodes.

[c]Low-grade EECs involving both the endometrium and the ovary are considered to have a good prognosis, and no adjuvant treatment is recommended if all the below criteria are met. Disease limited to low-grade endometrioid carcinomas involving the endometrium and ovaries (Stage IA3) must be distinguished from extensive spread of the endometrial carcinoma to the ovary (Stage IIIA1), by the following criteria: (1) no more than superficial myometrial invasion is present (<50%); (2) absence of extensive/substantial LVSI; (3) absence of additional metastases; and (4) the ovarian tumor is unilateral, limited to the ovary, without capsule invasion/rupture (equivalent to pT1a).

[d]LVSI as defined in WHO 2021: extensive/substantial, ≥5 vessels involved.

[e]Grade and histological type

- Serous adenocarcinomas, clear cell adenocarcinomas, mesonephric-like carcinomas, gastrointestinal-type mucinous endometrial carcinoma, undifferentiated carcinomas, and carcinosarcomas are considered high-grade by definition. For EECs, grade is based on the proportion of solid areas: low grade = grade 1 (≤5%) and grade 2 (6%–50%); and high grade = grade 3 (>50%). Nuclear atypia excessive for the grade raises the grade of a grade 1 or 2 tumor by one. The presence of unusual nuclear atypia in an architecturally low-grade tumor should prompt the evaluation of p53 and consideration of serous carcinoma. Adenocarcinomas with squamous differentiation are graded according to the microscopic features of the glandular component.
- Non-aggressive histological types are composed of low-grade (grade 1 and 2) EECs. Aggressive histological types are composed of high-grade EECs (grade 3), serous, clear cell, undifferentiated, mixed, mesonephric-like, gastrointestinal mucinous type carcinomas, and carcinosarcomas.
- It should be noted that high-grade EECs (grade 3) are a prognostically, clinically, and molecularly heterogenous disease, and the tumor type that benefits most from applying molecular classification for improved prognostication and for treatment decision-making.[3] Without molecular classification, high-grade EECs cannot appropriately be allocated to a risk group and thus molecular profiling is particularly recommended in these patients. For practical purposes and to avoid undertreatment of patients, if the molecular classification is unknown, high-grade EECs were grouped together with the aggressive histological types in the actual FIGO classification.

[f]Micrometastases are considered to be metastatic involvement (pN1 (mi)). The prognostic significance of isolated tumor cells (ITCs) is unclear. The presence of ITCs should be documented and is regarded as pN0(i+). According to TNM8, macrometastases are >2 mm in size, micrometastases are 0.2–2 mm and/or >200 cells, and isolated tumor cells are ≤0.2 mm and ≤200 cells.[33] Based on staging established by FIGO and the American Joint Committee on Cancer (AJCC). *AJCC Cancer Staging Manual*. 8th ed. New York: Springer, 2017.

TABLE 2 FIGO endometrial cancer stage with molecular classification.[a]

Stage designation	Molecular findings in patients with early endometrial cancer (Stages I and II after surgical staging)
Stage $IAm_{POLEmut}$	*POLEmut* endometrial carcinoma, confined to the uterine corpus or with cervical extension, regardless of the degree of LVSI or histological type
Stage $IICm_{p53abn}$	p53abn endometrial carcinoma confined to the uterine corpus with any myometrial invasion, with or without cervical invasion, and regardless of the degree of LVSI or histological type

Abbreviation: LVSI, lymphovascular space involvement.

[a]When feasible, the addition of molecular subtype to the staging criteria allows a better prediction of prognosis in a staging/prognosis scheme. The performance of complete molecular classification (*POLEmut*, MMRd, NSMP, p53abn) is encouraged in all cases of endometrial cancer for prognostic risk-group stratification and as potential influencing factors of adjuvant or systemic treatment decisions. Molecular subtype assignment can be done on a biopsy, in which case it need not be repeated on the hysterectomy specimen. When performed, these molecular classifications should be recorded in all stages.

- Good prognosis: pathogenic *POLE* mutation (*POLEmut*)
- Intermediate prognosis: mismatch repair deficiency (MMRd)/microsatellite instability and no specific molecular profile (NSMP)
- Poor prognosis: p53 abnormal (p53abn)When the molecular classification is known:
- FIGO Stages I and II are based on surgical/anatomical and histological findings. In case the molecular classification reveals *POLEmut* or p53abn status, the FIGO stage is modified in the early stage of the disease. This is depicted in the FIGO stage by the addition of "m" for molecular classification, and a subscript is added to denote *POLEmut* or p53abn status, as shown below. MMRd or NSMP status do not modify early FIGO stages; however, these molecular classifications should be recorded for the purpose of data collection. When molecular classification reveals MMRd or NSMP, it should be recorded as Stage Im_{MMRd} or Stage Im_{NSMP} and Stage IIm_{MMRd} or Stage IIm_{NSMP}.
- FIGO Stages III and IV are based on surgical/anatomical findings. The stage category is not modified by molecular classification; however, the molecular classification should be recorded if known. When the molecular classification is known, it should be recorded as Stage IIIm or Stage IVm with the appropriate subscript for the purpose of data collection. For example, when molecular classification reveals p53abn, it should be recorded as Stage $IIIm_{p53abn}$ or Stage IVm_{p53abn}.

References:

1. https://www.figo.org/news/figo-staging-endometrial-cancer-2023.
2. FIGO staging of endometrial cancer: 2023. Int J Gynaecol Obstet 2023 Aug;162(2):383-394. doi: 10.1002/ijgo.14923.
3. FIGO staging of endometrial cancer: 2023. J Gynecol Oncol 2023 Sep;34(5):e85. doi: 10.3802/jgo.2023.34.e85.
4. Correction to "FIGO staging of endometrial cancer". Int J Gynaecol Obstet 2023 Oct 6. doi: 10.1002/ijgo.15193.
5. 台灣病理學會「癌症病理報告應含診斷項目核對表」子宮體癌 https://www.twiap.org.tw/data/content.php?id=1214.

Table 1 Comparison of FIGO 2009 and FIGO 2023 staging systems for endometrial carcinoma

FIGO 2009[2] (AJCC 8th ed)	FIGO 2023
Stage I	
Defined as tumor confined to the uterine corpus.	Defined now by a combination of the following features: histological type[a], myometrial invasion (presence and extent into inner vs outer half), absent or focal LVSI[b].
Subdivided as IA (myometrial invasion absent or <50% of the uterine wall) and IB (myometrial invasion ≥50%).	Categorization as IA vs IB as defined in FIGO 2009[2] now only applies to non-aggressive histological types with no or focal LVSI.
Distinction between absent and <50% myometrial invasion is not necessary.	For non-aggressive histological types with no or focal LVSI, reintroduces distinction between cancer confined to the endometrium (now IA1) vs <50% myometrial invasion (now IA2) vs ≥50% myometrial invasion (IB).
	For aggressive histological types, introduces stage IC (aggressive histological types without myometrial invasion), and considers any myometrial invasion as stage IIC.
	Introduces ovarian involvement as allowed if the following criteria are present: low grade endometrioid type; absent or superficial myometrial invasion (<50%); absent or focal LVSI; absence of additional metastases; the ovarian tumor is unilateral, limited to the ovary, without capsule invasion/rupture.
Stage II	
Defined as tumor confined to the uterus with invasion into the cervical stromal tissue.	Defined now by a combination of the following features: cervical stromal involvement, substantial LVSI[b], and aggressive histological tumor type with myometrial invasion.
	Stage II is now subdivided into IIA (cervical stromal invasion by non-aggressive histological type), IIB (substantial LVSI by non-aggressive histological type), and IIC (aggressive histological type with any myometrial invasion).
Stage III	
Defined as spread outside of the uterus other than bladder/intestinal lining, lymph nodes, and distant sites.	Defined as local and/or regional tumor spread.
Groups tubo-ovarian and serosal tumor involvement as stage IIIA.	Stage IIIA is now subdivided into IIIA1 (spread to ovary or fallopian tube) and IIIA2 (involvement of uterine subserosa or spread through uterine serosa). Introduces the concept of 'uterine subserosa'.
Defines vaginal and parametrial tumor involvement as stage IIIB.	Stage IIIB now includes pelvic peritoneum. It is subdivided into IIIB1 (metastasis or direct spread to vagina and/or parametria) and IIIB2 (metastasis to pelvic peritoneum).
Groups nodal micro- and macrometastasis as stage IIIC1 (pelvic) and IIIC2 (para-aortic).	Stage IIIC1 (pelvic nodal spread) is now subdivided into IIIC1i (micrometastasis) and IIIC1ii (macrometastasis). Stage IIIC2 (para-aortic nodal spread) is now subdivided into IIIC2i (micrometastasis) and IIIC2ii (macrometastasis).
Stage IV	
Groups abdominal peritoneal spread along with lungs, liver, brain, bone, and inguinal or extrapelvic lymph nodes above renal vessels (stage IV B).	Separates abdominal peritoneal spread (now IVB) from lungs, liver, brain, bone, and inguinal or extrapelvic lymph nodes above renal vessels (stage IVC).

*In FIGO 2023 stage I and II, *POLE*-mutant tumors are staged as IAm POLEmut and p53-abnormal tumors as IICm p53abn regardless of the anatomic spread, the degree of LVSI or histological type. No specific molecular profile (NSMP) and MMRd molecular subtypes do not affect tumor staging.

[a]Histological types:

- Non-aggressive histological types: FIGO grade 1 and 2 endometrioid.
- Aggressive histological types: FIGO grade 3 endometrioid, serous, clear cell, undifferentiated, dedifferentiated, mesonephric-like, gastrointestinal-type mucinous, carcinosarcoma.

[b]Lymphovascular space invasion (LVSI):

- Substantial: ≥5 vessels involved.
- Focal: <5 vessels involved.

AJCC, American Joint Committee on Cancer; FIGO, International Federation of Gynecology and Obstetrics; MMRd, mismatch repair deficiency.

References:

6. FIGO 2023 endometrial cancer staging: too much, too soon? Int J Gynaecol Obstet Nov;0:1–6. doi: 10.1136/ijgc-2023-004981. Online ahead of print.

附件三. 摘錄適用於 2023 診斷年以後個案之新增修訂處

Status	ICD-O-3	Term
New term	8070/3	**Nasopharyngeal** carcinoma (C11._)
New behavior code and term	8271/**3**	**Sparsely granulated lactotroph tumour (C75.1)** **Densely granulated lactotroph tumour (C75.1)**
New term	8272/3	Pituitary **adenoma /** pituitary **neuroendocrine tumor (PitNET) (C75.1)** **Densely granulated somatotroph tumour (C75.1)** **Sparsely granulated somatotroph tumour (C75.1)** **Thyrotroph tumour (C75.1)** **Mature PIT1-lineage tumour (C75.1)** **Immature PIT1-lineage tumour (C75.1)** **Densely granulated corticotroph tumour (C75.1)** **Sparsely granulated corticotroph tumour (C75.1)** **Crooke cell tumour (C75.1)** **Gonadotroph tumour (C75.1)** **Unclassified plurihormonal tumours (C75.1)** **Null cell tumour (C75.1)**
New term	8280/3	**Mammosomatotroph tumour (C75.1)** Acidophil **stem cell tumour (C75.1)**
New term	8510/3	**Renal** medullary carcinoma (C64.9) **SMARCB1-deficient** medullary-**like renal cell carcinoma (C64.9)** **SMARCB1-deficient undifferentiated renal cell carcinoma, NOS (C64.9)** **SMARCB1-deficient dedifferentiated renal cell carcinomas of other specific subtypes (C64.9)** **SMARCB1-deficient renal medullary carcinoma (C64.9)**
New term	8693/3	Vagal paraganglioma (C75.5) Laryngeal paraganglioma (C75.5) Sympathetic paragangliomas (C75.5) **Composite** paraganglioma (C75.5) Paraganglioma (C73.9, C75.1) **Cauda equina neuroendocrine tumour** (previously paraganglioma) **(C72._)** **Extra-adrenal composite paraganglion tumours (C75._)** **Composite** paraganglioma-**neuroblastoma (C75._)** **Composite** paraganglioma-**ganglioneuroblastoma (C75._)**

Status	ICD-O-3	Term
Behavior code change (0→**3**)	8700**/3**	Pheochromocytoma (C74.1) Adrenal medullary paraganglioma (C74.1) Chromaffin paraganglioma Chromaffin tumor Chromaffinoma
New term	8802/3	**Undifferentiated** pleomorphic sarcoma (C47._, C49._) Pleomorphic **dermal** sarcoma (C44._) **Anaplastic** sarcoma **of the kidney (C64.9)**
New term	8936/3	**Extra**-gastrointestinal stromal tumour **(C48._)** **Succinate dehydrogenase-deficient** gastrointestinal stromal tumour **(C47._, C49._)**
Behavior code not change	9080/3	Immature teratoma, NOS **(C56.9)**
New term	9084/3	**Germ cell tumours with sometic-type solid malignancy (C37.9)** Teratoma **with carcinoid (neuroendocrine tumour)** (C64.9) Teratoma with somatic-type malignancy (C62._) **Well differentiated neuroendocrine tumor** (**monodermal** teratoma) (C62._)
New behavior code and term	9261/**1**	**Osteofibrous dysplasia-like** adamantinoma (C41.0, C41.1)
New term	9261/3	**Classic** adamantinoma **(malignant)** (C41.0, C41.1) **Dedifferentiated** adamantinoma (C41.0, C41.1)
New term	9362/3	Pineoblastoma, **miRNA processing-altered_1** (C75.3) Pineoblastoma, **miRNA processing-altered_2** (C75.3) Pineoblastoma, **RB1-altered (pineal retinoblastoma)** (C75.3) Pineoblastoma, **MYC/FOXR2-activated** (C75.3)
New code and term	**9366/3**	**Round cell sarcoma with EWSR1-non-ETS fusions (C40._, C41._, C47._, C49._)** **Round cell sarcoma with EWSR1/FUS::NFATC2 (C40._, C41._, C47._, C49._)** **Round cell sarcoma with EWSR1::PATZ1 (C40._, C41._, C47._, C49._)**
New term	9370/3	**Poorly differentiated** chordoma (C40._, C41._) **Conventional** chordoma (C40._, C41._)
New code and term (revised)	**9385/3**	**Diffuse midline glioma, H3 K27-altered ~~M-mutant~~ / H3.3 K27-mutant / H3.1 or H3.2 K27-mutant / H3-wildtype with EZHIP overexpression / EGFR-mutant (C71._)** **Diffuse hemispheric glioma, H3 G34-mutant (C71._)** **Diffuse pediatric-type high-grade glioma, H3-wildtype and IDH-wildtype / RTK2 / RTK1 / MYCN (C71._)** **Infant-type hemispheric glioma / NTRK-altered / ROS1-altered / ALK-altered / MET-altered (C71._)**

Status	ICD-O-3	Term
New term	9421**/**1	Diffuse astrocytoma, **MYB- or MYBL1-altered** (C71._) Diffuse low-grade glioma, **MAPK pathway-altered** (C71._) Diffuse low-grade glioma, **FGFR1 tyrosine kinase domain-duplicated** (C71._) Diffuse low-grade glioma, **FGFR1-mutant** (C71._) Diffuse low-grade glioma, **BRAF p.V600E-mutant** (C71._) Pilocytic astrocytoma **with histological features of anaplasia**
New code and term	**9478/3**	**Embryonal tumour with multilayered rosettes, C19MC-altered (C71._)** **Embryonal tumour with multilayered rosettes, NOS (C71._)** **Embryonal tumour with multilayered rosettes, DICER1-mutant (C71._)**
New term	9687/3	**High-grade B-cell** ~~**Burkitt-like**~~ lymphoma **with 11q aberration** **Acute leukaemia**, Burkitt type **Endemic** Burkitt lymphoma **Sporadic** Burkitt lymphoma **Immunodeficiency-associated** Burkitt lymphoma
New term	9700/3	**Hypopigmented** mycosis fungoides **Adnexotropic (folliculotropic and/or syringotropic)** mycosis fungoides Pagetoid reticulosis **(Woringer-Kolopp type)** **Granulomatous slack skin disease**
New term	9714/3	Anaplastic large cell lymphoma, ALK-positive (ALK+ ALCL) **Common** ALK+ ALCL **Small cell** ALK+ ALCL **Lymphohistiocytic** ALK+ ALCL **Hodgkin-like** ALK+ ALCL **Composite** ALK+ ALCL
Behavior code not change	9718/3	Primary cutaneous anaplastic large cell lymphoma
Behavior code change (3→1)	9718/**1**	Lymphomatoid papulosis (C44._) Lymphomatoid papulosis **type A / type B / type C / type D / type E / with DUSP22 locus rearrangement** Primary **mucosal** CD30-positive T-cell lymphoproliferative disorder
New term	9724/3	Systemic EBV-positive T-cell **lymphoma** of childhood
Behavior code change (3→1)	9725/**1**	Hydroa vacciniforme~~-like~~ lymphoproliferative disorder Classic hydroa vacciniforme lymphoproliferative disorder Systemic hydroa vacciniforme lymphoproliferative disorder

Status	ICD-O-3	Term
New code and term	**9749/3**	**Erdheim-Chester disease** **Rosai–Dorfman disease**
New term	9811/3	B-lymphoblastic leukaemia/lymphoma **with iAMP21** B-ALL with **DUX4 rearrangement** B-ALL with **MEF2D rearrangement** B-ALL with **ZNF384 rearrangement** B-ALL with **PAX5 alteration** B-ALL with **PAX5 p.P80R variant** B-ALL with **NUTM1 rearrangement**
New term	9815/3	B-ALL with **high hyperdiploidy**
New term	9816/3	B-ALL with **near-haploidy** B-ALL with **low hypodiploidy** B-ALL with **high hypodiploidy**
New term	9818/3	B-ALL with **TCF3::HLF fusion**
New term	9835/3	**NK**-lymphoblastic leukaemia/lymphoma
New term	9861/3	AML with **NUP98 rearrangement** AML with **MNX1::ETV6 fusion** AML with **KAT6A::CREBBP fusion** AML with **CBFA2T3::GLIS2 fusion**
New term	9869/3	AML with inv(3)(q21.3q26.2) or t(3;3)(q21.3;q26.2); **GATA2, MECOM** AML with **MECOM rearrangement**
New term	9897/3	AML with t(9;11)(p21.3;q23.3); **KMT2A**-MLLT3 AML with t(9;11)(**p22**;q23); **KMT2A**-MLLT3 AML with **KMT2A rearrangement**
New term	9946/3	Juvenile myelomonocytic leukaemia (JMML) **PTPN11-mutated JMML** **NRAS-mutated JMML** **KRAS-mutated JMML** **JMML in neurofibromatosis type 1 (NF1)** **JMML in children with CBL syndrome** **JMML-like disorders in children with Noonan syndrome (NS)**

附件四. Updates to the International Classification of Diseases for Oncology, third edition (ICD-O-3) 彙整表 2023.12.15 更新

Status	ICD-O-3	Term
New term	8010/3	**Urachal** carcinoma (C65.9, C66.9, C67._, C68._)
New term	8013/3	**Combined** large cell neuroendocrine carcinoma (C57.9, C60-C68)
New term	8020/3	Carcinoma, **poorly differentiated,** NOS (C51._) Poorly differentiated urothelial carcinoma (C65.9, C66.9, C67._, C68._) **Anaplastic thyroid** carcinoma (C73.9)
New code and term	**8023/3**	**NUT carcinoma (C30.0, C31._, C34._, C37.9)**
New term	8031/3	Giant cell **urothelial** carcinoma (C65.9, C66.9, C67._, C68._)
New term	8033/3	Carcinoma **with** sarcomatoid **component (C18._, C19.9, C20.9)**
New term	8035/3	**Squamous cell** carcinoma with osteoclast-like giant cells (C44._)
New term	8041/3	**High-grade** neuroendocrine carcinoma (C54._, C55.9)
New term	8041/3	Neuroendocrine carcinoma, **poorly differentiated** (C50._)
New term	8041/3	Small cell carcinoma, **pulmonary type (C56.9)**
New term	8044/3	Small cell carcinoma**, hypercalcaemic type (C56.9)** Small cell carcinoma**, large cell variant (C56.9)** **Thoracic SMARCA4-deficient undifferentiated tumour (C34._)**
New term	8045/3	Combined small cell **neuroendocrine** carcinoma (C57.9, C60-C68)
New term	8051/3	Verrucous carcinoma **(including carcinoma cuniculatum) (C60._, C63.2)**
New code and term	**8054/3**	**Warty carcinoma (C60._, C63.2) [originally 8051/3]**
New code and term	**8054/3**	**Condylomatous carcinoma (C60._, C63.2) [originally 8051/3]**
New term	8070/3	**Nasopharyngeal** carcinoma (C11._)
New behavior code and term	8071**/2**	**Differentiated ~~-type~~ vulvar intraepithelial neoplasia (C51._)** **Differentiated exophytic vulvar intraepithelial lesion (C51._)** **Vulvar acanthosis with altered differentiation (C51._)** **Differentiated penile intraepithelial neoplasia (C60._) [HPV-independent]**
New term	8071/3	**Keratoacanthoma** (C44._, C69.0)
New term	8074/3	**Pseudovascular** squamous cell carcinoma (C44._)
New term	8077/2	**Penile** intraepithelial neoplasia (C60._) High-grade squamous intraepithelial **lesion** (C60._) **[HPV-associated]**
New term	8077/2	Oral epithelial dysplasia, high grade (C00._, C02._, C03._, C04._, C05._, C06._)

Status	ICD-O-3	Term
New term	8082/3	Lymphoepithelioma-like **urothelial** carcinoma (C65.9, C66.9, C67._, C68._)
New code and term	**8085/3**	**Squamous cell carcinoma, HPV-positive (C01.9, C02.4, C05.1, C05.2, C09._, C10._, C31._)** **Squamous cell carcinoma, HPV-associated (C51._, C52.9, C53._, C60._, C63.2)**
New code and term	**8086/3**	**Squamous cell carcinoma, HPV-negative (C01.9, C02.4, C05.1, C05.2, C09._, C10._, C31._)** **Squamous cell carcinoma, HPV-independent (C51._, C52.9, C53._)** **Squamous cell carcinoma, usual type (C60._, C63.2) [HPV-independent]**
New term	8090/3	Basal cell carcinoma with **adnexal differentiation** (C44._)
New term	8091/3	Superficial basal cell carcinoma (C44._)
New term	8092/3	Basal cell carcinoma with **sarcomatoid differentiation** (C44._)
New term	8098/3	Adenoid basal carcinoma **(C52.9)**
New behavior code and term	8100**/3**	Tricho**blastic carcinoma/carcinosarcoma** (C44._)
New term	8120/3	**Squamo**transitional cell carcinoma (C53._) **Conventional** urothelial carcinoma (C65.9, C66.9, C67._, C68._) Urothelial carcinoma **with squamous differentiation** (C65.9, C66.9, C67._, C68._) Urothelial carcinoma **with glandular differentiation** (C65.9, C66.9, C67._, C68._) Urothelial carcinoma **with trophoblastic differentiation** (C65.9, C66.9, C67._, C68._) **Nested** urothelial carcinoma (C65.9, C66.9, C67._, C68._) **Large nested** urothelial carcinoma (C65.9, C66.9, C67._, C68._) **Tubular and microcystic** urothelial carcinomas (C65.9, C66.9, C67._, C68._) **Lipid-rich** urothelial carcinoma (C65.9, C66.9, C67._, C68._) **Clear cell (glycogen-rich)** urothelial carcinoma (C65.9, C66.9, C67._, C68._) **Sarcomatoid** urothelial carcinoma (C65.9, C66.9, C67._, C68._) **[原申報 8122/3]**
New term	8122/3	**Plasmacytoid** urothelial carcinoma (C65.9, C66.9, C67._, C68._)
New term	8130/2	Non-invasive papillary urothelial carcinoma, **low grade** (C65.9, C66.9, C67._, C68._) **Low-grade** papillary urothelial carcinoma **with an inverted growth pattern** (C65.9, C66.9, C67._, C68._) Non-invasive papillary urothelial carcinoma, **high grade** (C65.9, C66.9, C67._, C68._) Non-invasive **high-grade** papillary urothelial carcinoma **with an inverted growth pattern** (C65.9, C66.9, C67._, C68._)
New term	8140/3	**Endolymphatic sac tumor (C30.1)** **Parathyroid carcinoma (C75.0)** **Carcinoma of Skene, Cowper and Littre glands (C52.9, C68.0)** **Acinar** adenocarcinoma of **prostate** (C61.9) **Pleomorphic giant cell acinar** adenocarcinoma (C61.9) **Prostatic intraepithelial neoplasia--like** carcinoma (C61.9)
New behavior code and term	8144/2	**Intestinal-type adenoma, high grade (C16._, C17._, C24.1)** **Sporadic intestinal-type gastric adenoma (C16._)** **Syndromic intestinal-type gastric adenoma (C16._)**

Status	ICD-O-3	Term
New term	8144/3	Enteric adenocarcinoma (C34._, C65.9, C66.9, C67._, C68._) Adenocarcinoma, intestinal type **(C51._)** **Mucinous** carcinoma, intestinal type **(C53._)**
New term	8147/3	**Adenoid cystic** (basal cell) carcinoma (C61.9)
New term	8148/2	Prostatic intraepithelial neoplasia, **high-grade** (C61.9)
Behavior code change (0→**3**)	8150**/3**	Islet cell adenoma (C25._) Islet cell adenomatosis (C25._) Nesidioblastoma (C25._)
Behavior code change (1→**3**)	8150**/3**	Islet cell tumor, NOS (C25._) Pancreatic endocrine tumor, NOS (C25._)
New term	8150/3	**Oncocytic neuro**endocrine tumor, non-functioning pancreatic (C25._) **Pleomorphic neuro**endocrine tumor, non-functioning pancreatic (C25._) **Clear cell neuro**endocrine tumor, non-functioning pancreatic (C25._) **Cystic neuro**endocrine tumor, non-functioning pancreatic (C25._)
Behavior code change (0→**3**)	8151**/3**	Insulinoma (C25._) Beta cell adenoma (C25._)
Behavior code change (1→**3**)	8152**/3**	Glucagonoma (C25._) Pancreatic peptide and pancreatic peptide-like peptide within terminal tyrosine amide producing tumor (C25._) L-cell tumor (C18._, C19.9, C20.9, C25._) Glucagon-like peptide-producing tumor (C18._, C19.9, C20.9, C25._) PP/PYY producing tumor (C18._, C19.9, C20.9, C25._)
Behavior code change (1→**3**)	8153**/3**	Gastrinoma (C16._, C17._, C24.1, C25._) G cell tumor Gastrin cell tumor
New term	8154/3	Mixed ductal-**neuro**endocrine carcinomas (C25._)
New term	8154/3	Mixed acinar-**neuro**endocrine carcinomas (C25._)
New term	8154/3	Mixed **neuro**endocrine **non-neuroendocrine neoplasm (MiNEN)** (C15-C26, C60-C68)
Behavior code change (1→**3**)	8155**/3**	VIPoma (C25._)
Behavior code change (1→**3**)	8156**/3**	Somatostatinoma (C16._, C17._, C24.1, C25._) Somatostatin cell tumor
New behavior code and term	8158**/3**	ACTH-producing tumour with Cushing syndrome (C25._)
Behavior code change (1→**3**)	8158**/3**	ACTH-producing tumour (C25._) Endocrine tumor, functioning, NOS

Status	ICD-O-3	Term
New term	8160/3	Large duct intrahepatic cholangiocarcinoma (C22.1) Small duct intrahepatic cholangiocarcinoma (C22.1)
New term	8163/2	Intra-ampullary papillary-tubular neoplasm (C17._, C24.1)
New term	8174/3	Hepatocellular carcinoma, steatohepatitis (C22.0) Hepatocellular carcinoma, macrotrabecular massive (C22.0) Hepatocellular carcinoma, chromophobe (C22.0) Hepatocellular carcinoma, neutrophil-rich (C22.0) Hepatocellular carcinoma, lymphocyte-rich (C22.0)
New term	8200/3	**Thymic carcinoma** with adenoid cystic carcinoma-like features **(C37.9)**
New term	8200/3	**Classic** adenoid cystic carcinoma (C50._) **Solid-basaloid** adenoid cystic carcinoma (C50._) Adenoid cystic carcinoma with **high-grade transformation** (C50._)
New term	8210/2	Adenomatous polyp, **high-grade dysplasia** (C16._, C17._, C18._, C19.9, C20.9, C24.1)
New behavior code and term	8211**/2**	Tubular adenoma, **high grade (C18._, C19.9, C20.9)**
New behavior code and term	8213**/2**	Serrated **dysplasia, high grade (C16._, C17._, C18._, C19.9, C20.9, C24.1)** **Intestinal-type dysplasia (C16._)** **Foveolar-type (gastric-type) dysplasia (C16._)** **Gastric pit/crypt dysplasia (C16._)** ~~**Hyperplastic polyp, microvesicular type (C18._, C19.9, C20.9)**~~ ~~**Hyperplastic polyp, goblet cell (C18._, C19.9, C20.9)**~~
New term	8240/3	Neuroendocrine tumor**, NOS** (C51._, C57.9)
Behavior code change (1→**3**)	8241**/3**	Carcinoid tumor, argentaffin
New term	8241/3	Serotonin-producing **tumour with and without carcinoid syndrome** (C25._)
Behavior code change (1→**3**)	8242**/3**	Enterochromaffin-like cell carcinoid, NOS ECL cell carcinoid, NOS
New term	8243/3	Goblet cell **adenocarcinoma (C18.1)**
New term	8249/3	Neuroendocrine tumor, **grade 3** (C15-C26)
New behavior code and term	8250**/2**	**Adenocarcinoma in situ, non-mucinous (C34._)**
New term	8250/3	**Lepidic** adenocarcinoma **(C34._)**
New behavior code and term	8253**/2**	**Adenocarcinoma in situ,** mucinous **(C34._)**
New term	8253/3	**Invasive** mucinous **adenocarcinoma (C34._)**
New term	8254/3	Mixed **invasive** mucinous and non-mucinous **adenocarcinoma (C34._)**

Status	ICD-O-3	Term
New code and term	**8256/3**	**Minimally invasive adenocarcinoma, non-mucinous (C34._)**
New code and term	**8257/3**	**Minimally invasive adenocarcinoma, mucinous (C34._)**
New term	8260/3	**Low-grade** papillary adenocarcinoma **(C37.9)**
New term	8261/2	Villous adenoma, **high grade (C18._, C19.9, C20.9)**
New term	8262/3	**Adenoma-like** adenocarcinoma **(C18._, C19.9, C20.9)**
New term	8263/2	Tubulovillous adenoma, **high grade (C18._, C19.9, C20.9)**
New term	8263/3	**Endometrioid** adenocarcinoma, **villoglandular** (C54._, C55.9)
New term	8263/3	**Villoglandular** carcinoma (C53._)
New term	8265/3	Micropapillary adenocarcinoma **(C18._, C19.9, C20.9, C34._)**
New behavior code and term	8271/**3**	**Sparsely granulated lactotroph tumour (C75.1)** **Densely granulated lactotroph tumour (C75.1)**
New term	8272/3	Pituitary **adenoma /** pituitary **neuroendocrine tumor (PitNET) (C75.1)** **Densely granulated somatotroph tumour (C75.1)** **Sparsely granulated somatotroph tumour (C75.1)** **Thyrotroph tumour (C75.1)** **Mature PIT1-lineage tumour (C75.1)** **Immature PIT1-lineage tumour (C75.1)** **Densely granulated corticotroph tumour (C75.1)** **Sparsely granulated corticotroph tumour (C75.1)** **Crooke cell tumour (C75.1)** **Gonadotroph tumour (C75.1)** **Unclassified plurihormonal tumours (C75.1)** **Null cell tumour (C75.1)**
New code and term	**8273/3**	**Pituitary blastoma (C75.1)**
New term	8280/3	**Mammosomatotroph tumour (C75.1)** Acidophil **stem cell tumour (C75.1)**
New term	8310/3	Adenocarcinoma, **HPV-independent,** clear cell type (C53._) **Hyalinizing** clear cell carcinoma (C34._) Clear cell renal cell carcinoma (C64.9)

Status	ICD-O-3	Term
New code and term	**8311/3**	**Hereditary leiomyomatosis and renal cell carcinoma (HLRCC) syndrome-associated renal cell carcinoma (C64.9)** **MiT family translocation renal cell carcinomas (C64.9)** **Eosinophilic solid and cystic renal cell carcinomas (C64.9)** **TFE3-rearranged renal cell carcinomas (C64.9)** **TFEB-altered renal cell carcinomas (C64.9)** **ELOC (formerly TCEB1)-mutated renal cell carcinomas (C64.9)** **Fumarate hydratase-deficient renal cell carcinomas (C64.9)** **ALK-rearranged renal cell carcinomas (C64.9)** **Succinate dehydrogenase-deficient renal cell carcinoma (C64.9)**
~~New term~~	~~8312/3~~	~~**Succinate dehydrogenase-deficient renal carcinoma (C64.9)**~~ **改申報 8311/3**
New term	8316/3	**Acquired** cystic **disease**-associated renal cell carcinoma **(C64.9)** **Tubulocystic** renal cell carcinoma **(C64.9)**
Behavior code change (3→1)	**8323/1**	**Clear cell papillary renal cell carcinoma (C64.9) [MP/H 8255/3→8323/1]** **>> Clear cell papillary renal cell tumour (C64.9) [WHO Blue books 5th - terminology change]**
New term	8330/3	Follicular thyroid carcinoma (FTC), **widely invasive** (C73.9)
Behavior code change (3→1)	**8335/1**	**Follicular carcinoma, encapsulated (C73.9)**
New term	8337/3	**Poorly differentiated thyroid** carcinoma (C73.9)
New code and term	**8339/3**	**Follicular thyroid carcinoma (FTC), encapsulated angioinvasive (C73.9)**
New term	8342/3	**Oncocytic variant** of papillary thyroid carcinoma (PTC) (C73.9)
New term	8345/3	Medullary **thyroid** carcinoma (C73.9)
New code and term	**8349/1**	**Non-invasive follicular thyroid neoplasm with papillary-like nuclear features (C73.9) [nonreportable]**
New behavior code and term	8380**/2**	**Atypical hyperplasia / Endometrioid intraepithelial neoplasia (C54._)** **Atypical hyperplasia of the endometrium (C54._)**
New term	8380**/**3	**POLE-ultramutated endometrioid carcinoma (C54._)** **Mismatch repair-deficient endometrioid carcinoma (C54._)** **p53-mutant endometrioid carcinoma (C54._)** **No specific molecular profile (NSMP) endometrioid carcinoma (C54._)**
New term	8390/3	Adnexal **adeno**carcinoma, NOS (C44._)
New term	8401/3	Apocrine carcinoma (C44._)
New term	8403/3	Malignant neoplasms arising from spiradenoma**, cylindroma, or spiradenocylindroma** (C44._)
New behavior code and term	8406/**3**	Syringocystadeno**carcinoma** papilliferum (C44._)

Status	ICD-O-3	Term
Behavior code change (1→3)	**8408/3**	**Aggressive digital papillary adenoma (C44._)**
New behavior code and term	8409**/2**	Porocarcinoma **in situ** (C44._)
New term	8430/3	**Sclerosing** mucoepidermoid carcinoma **with eosinophilia** (C73.9)
New behavior code and term	8441**/2**	Serous **tubal intraepithelial** carcinoma **(C57.0)**
New behavior code and term	8441**/2**	Serous **endometrial intraepithelial** carcinoma **(C54._)**
New term	8441/3	Serous cystadenocarcinoma, NOS (**C25._**, C56.9)
New term	8452/1	Solid pseudopapillary tumour **of ovary (C56.9)**
New term	8452/3	Solid pseudopapillary neoplasm of the pancreas (C25._) Solid pseudopapillary neoplasm with high-grade carcinoma (C25._)
New code and term	**8455/2**	**Intraductal oncocytic papillary neoplasm, NOS (C25._)**
New code and term	**8455/3**	**Intraductal oncocytic papillary neoplasm with associated invasive carcinoma (C25._)**
New behavior code and term	8460**/2**	Serous **borderline tumour** - micropapillary variant **(C56.9)**
New behavior code and term	8460**/2**	**Non-invasive low-grade** serous carcinoma **(C56.9)**
New term	8460/3	**Low-grade** serous carcinoma (C48._, C56.9, C57._)
New term	8461/3	**High-grade** serous carcinoma (C48._, C56.9, C57._)
New term	8470/3	Mucinous cystadenocarcinoma NOS (C50._)
New code and term	**8474/3**	**Seromucinous carcinoma (C56.9)**
Behavior code change (1→2)	8480**/2**	**Low-grade** appendiceal mucinous neoplasm **(LAMN)** (C18.1) [**Beginning with cases diagnosed 1/1/2022 forward, LAMN should be assigned a behavior code of /2]** **Note: Effective 1/1/2022, LAMN becomes reportable and is coded 8480/2, unless the pathologist indicates invasive behavior, which is coded 8480/3.**
New behavior code and term	8480**/2**	**High-grade** appendiceal mucinous neoplasm (C18.1) **Note: Effective 1/1/2022, HAMN can be either /2 or /3 depending on the pathologist statement of behavior.**
New term	8480/3	Mucinous **tubular and spindle cell** carcinoma (C64.9)
New term	8482/3	Mucinous carcinoma, **gastric type** (C52.9, C53._) Adenocarcinoma, **HPV-independent, gastric type** (C53._)
New code and term	**8483/2**	**Adenocarcinoma in situ, HPV-associated (C53._)**
New code and term	**8483/3**	**Adenocarcinoma, HPV-associated (C52.9, C53._)**
New code and term	**8484/2**	**Adenocarcinoma in situ, HPV-independent (C53._)**
New code and term	**8484/3**	**Adenocarcinoma, HPV-independent, NOS (C53._)**

Status	ICD-O-3	Term
New term	8490/3	Signet ring cell/**histiocytoid** carcinoma (C44._)
New term	8500/2	DCIS of **low nuclear grade** (C50._) DCIS of **intermediate nuclear grade** (C50._) DCIS of **high nuclear grade** (C50._)
New term	8500/3	**Adenocarcinoma of mammary gland type (C51._)** **Adenocarcinoma of anogenital mammary-like glands (C51._)**
New term	8502/3	Secretory carcinoma (C07._, C08._, C50._, C69.5)
New term	8503/2	Intraductal tubulopapillary neoplasm (C25._)
New term	8504/2	**Encapsulated papillary carcinoma (C50._)**
Behavior code change (3→2)	**8504/2**	**Intracystic carcinoma, NOS** **Intracystic papillary adenocarcinoma**
New term	8504/3	**Encapsulated papillary carcinoma with invasion (C50._)**
New behavior code and term	8507**/3**	**Invasive** micropapillary carcinoma **(C50._)**
New code and term	**8509/2**	**Solid papillary carcinoma in situ (C50._)**
New code and term	**8509/3**	**Endocrine mucin-producing sweat gland carcinoma (C44._)** **Solid papillary carcinoma invasive (C50._)** **Tall cell carcinoma with reversed polarity (C50._)**
New term	8510/3	**Renal** medullary carcinoma (C64.9) **SMARCB1-deficient** medullary**-like renal cell carcinoma (C64.9)** **SMARCB1-deficient undifferentiated renal cell carcinoma, NOS (C64.9)** **SMARCB1-deficient dedifferentiated renal cell carcinomas of other specific subtypes (C64.9)** **SMARCB1-deficient renal medullary carcinoma (C64.9)**
New code and term	**8519/2**	**Pleomorphic lobular carcinoma in situ (C50._)**
New term	8520/2	**Florid** lobular carcinoma in situ (C50._)
New term	8551/3	Acinar **adenocarcinoma** (C34._)
New term	8560/3	Squamoid **eccrine ductal** carcinoma (C44._)
New term	8570/3	**Endometrioid carcinoma** with squamous differentiation (C54._) **Low grade** adenosquamous carcinoma (C50._)

Status	ICD-O-3	Term
New term	8571/3	**Metaplastic carcinoma** with **chondroid** differentiation (C50._) **Metaplastic carcinoma** with osseous differentiation (C50._)
New term	8572/3	**Fibromatosis-like** metaplastic carcinoma (C50._) **Acinar** adenocarcinoma, **sarcomatoid** (C61.9)
New term	8576/3	**Paneth cell** carcinoma (C16._)
New term	8580/3	**Metaplastic** thymoma **/ Sclerosing** thymoma (C37.9)
New term	8580/3	**Ectopic** thymoma (C73.9)
Behavior code change (1→3)	**8581/3**	**Type A thymoma, including atypical variant (C37.9)**
Behavior code change (1→3)	**8582/3**	**Type AB thymoma (C37.9)**
Behavior code change (1→3)	**8583/3**	**Type B1 thymoma (C37.9)**
Behavior code change (1→3)	**8584/3**	**Type B2 thymoma (C37.9)**
Behavior code change (1→3)	**8585/3**	**Type B3 thymoma (C37.9)**
New term	8589/3	**Intrathyroid thymic** carcinoma (C73.9)
New code and term	**8594/1**	**Mixed germ cell-sex cord-stromal tumor, NOS (C56.9)**
Behavior code change (1→3)	8620/**3**	**Adult** granulosa cell tumor of **ovary** (C56.9)
New term	8620/**1**	**Adult** granulosa cell tumor of **testis (C62._)**
Behavior code change (1→**3**)	8680**/3**	Paraganglioma, NOS (C75.5)
Behavior code change (1→**3**)	8681**/3**	Sympathetic paraganglioma
Behavior code change (1→**3**)	8682**/3**	Parasympathetic paraganglioma
Behavior code change (1→**3**)	8690**/3**	Middle ear paraganglioma (C75.5) Glomus jugulare tumor, NOS (C75.5) Jugular paraganglioma (C75.5) Jugulotympanic paraganglioma (C75.5)
Behavior code change (1→**3**)	8691**/3**	Aortic body tumor (C75.5) Aortic body paraganglioma (C75.5) Aorticopulmonary paraganglioma (C75.5)
Behavior code change (1→**3**)	8692**/3**	Carotid body paraganglioma (C75.4) Carotid body tumor (C75.4)

Status	ICD-O-3	Term
Behavior code change (1→**3**)	8693**/3**	Extra-adrenal paraganglioma, NOS (C17._, C24.1, C60-C68) Nonchromaffin paraganglioma, NOS Chemodectoma
New term	8693/3	Vagal paraganglioma (C75.5) Laryngeal paraganglioma (C75.5) Sympathetic paragangliomas (C75.5) **Composite** paraganglioma (C75.5) Paraganglioma (C73.9, C75.1) **Cauda equina neuroendocrine tumour** (previously paraganglioma) **(C72._)** **Extra-adrenal composite paraganglion tumours (C75._)** **Composite** paraganglioma-**neuroblastoma (C75._)** **Composite** paraganglioma-**ganglioneuroblastoma (C75._)**
Behavior code change (0→**3**)	8700**/3**	Pheochromocytoma (C74.1) Adrenal medullary paraganglioma (C74.1) Chromaffin paraganglioma Chromaffin tumor Chromaffinoma
New term	8700/3	**Composite** pheochromocytoma (C74.1) **Composite paraganglion tumours** (C74.1) **Composite** pheochromocytoma-**ganglioneuroma** (C74.1) **Composite** pheochromocytoma-**ganglioneuroblastoma** (C74.1) **Composite** pheochromocytoma-**neuroblastoma** (C74.1) **Composite** pheochromocytoma-**peripheral nerve sheath tumours** (C74.1)
New code and term	**8714/3**	**Neoplasms with perivascular epithelioid cell differentiation (PEComa) NOS, malignant (C15-C26, C34._, C47._, C49._~~, C54._~~, C60-C68)** **Perivascular epithelioid cell tumour, malignant (C65.9, C66.9, C67._, C68._)** **Perivascular epithelioid tumour, malignant (C47._, C49._, C54._)**
New term	8720/3	**Mucosal** melanoma (genital, oral, sinonasal)
New term	8721/3	**Mucosal** nodular melanoma (genital, oral, sinonasal)
New term	8743/3	**Low-CSD (cumulative sun damage)** melanoma (C44._)
New term	8744/3	Acral melanoma (C44._)
New term	8770/3	**Malignant Spitz tumor (Spitz** melanoma**)** (C44._)
New term	8780/3	**Melanoma** arising in blue nevus (C44._)

Status	ICD-O-3	Term
New term	8801/3	**Undifferentiated** spindle cell sarcoma (C47._, C49._)
New term	8802/3	**Undifferentiated** pleomorphic sarcoma (C47._, C49._) Pleomorphic **dermal** sarcoma (C44._) **Anaplastic** sarcoma **of the kidney (C64.9)**
New term	8803/3	**Undifferentiated** round cell sarcoma (C47._, C49._)
New term	8804/3	**Undifferentiated** epithelioid sarcoma (C47._, C49._) **Proximal or large cell** epithelioid sarcoma (C47._, C49._) **Classic** epithelioid sarcoma (C47._, C49._)
New term	8811/3	Myxofibrosarcoma (C47._, C49._) **Epithelioid** myxofibrosarcoma (C47._, C49._)
New behavior code and term	8825**/3**	**Low-grade** myofibriblastic **sarcoma** (C47._, C49._) Myofibroblastic **sarcoma** (C47._, C49._) Epithelioid inflammatory myofibroblastic sarcoma (C15-C26)
New term	8830/3	Undifferentiated high-grade pleomorphic sarcoma of **bone** (C40._, C41._)
Behavior code change (3→1) (revised)	**8832/1**	**Dermatofibrosarcoma protuberans (C47._, C49._)** **Myxoid** dermatofibrosarcoma protuberans (C47._, C49._) Dermatofibrosarcoma protuberans **with myoid differentiation** (C47._, C49._) **Plaque-like** dermatofibrosarcoma protuberans (C47._, C49._)
New term (revised)	8832/3	**Fibrosarcomatous** dermatofibrosarcoma protuberans (C47._, C49._) ~~**Myxoid** dermatofibrosarcoma protuberans (C47._, C49._)~~ ~~Dermatofibrosarcoma protuberans **with myoid differentiation** (C47._, C49._)~~ ~~**Plaque-like** dermatofibrosarcoma protuberans (C47._, C49._)~~
Behavior code change (3→1)	**8833/1**	**Pigmented dermatofibrosarcoma protuberans (C44._, C47._, C49._)** **Bednar tumor (C44._)**
New term	8840/3	**Low-grade fibromyxoid sarcoma (C47._, C49._)** **Sclerosing epithelioid fibrosarcoma (C47._, C49._)**
New behavior code and term	8842**/3**	**Pulmonary myxoid sarcoma with EWSR1-CREB1 ~~translocation~~ fusion (C34._)** **Ossifying fibromyxoid tumour, malignant (C47._, C49._)**
New term	8854/3	**Epithelioid** liposarcoma **(C47._, C49._)**
New code and term	**8859/3**	**Myxoid pleomorphic liposarcoma (C47._, C49._)**
New term	8890/3	**Spindle** leiomyosarcoma (C54._) **Superficial** leiomyosarcoma (C60-C68) **Deep** leiomyosarcoma (C60-C68)

Status	ICD-O-3	Term
New term	8912/3	Sclerosing rhabdomyosarcoma **Congenital** spindle cell rhabdomyosarcoma **with VGLL2/NCOA2/CITED2 rearrangements** (C47._, C49._) **MYOD1-mutant** spindle cell / sclerosing rhabdomyosarcoma (C47._, C49._) **Intraosseous** spindle cell rhabdomyosarcoma **(with TFCP2/NCOA2 rearrangements)** (C47._, C49._)
New term	8930/3	Endometrioid stromal sarcoma, high grade **(C48._, C56.9)**
New term	8931/3	Endometrioid stromal sarcoma, low grade **(C48._, C56.9)**
New term	8936/3	**Extra**-gastrointestinal stromal tumour **(C48._)** **Succinate dehydrogenase-deficient** gastrointestinal stromal tumour **(C47._, C49._)**
New term	8960/3	Wilms tumour **(C56.9)**
New term	8963/3	**Extra-renal** rhabdoid tumour **(C47._, C49._**,C60-C68**)**
New code and term **Behavior code change (1→3)**	**8976/3**	**Gastroblastoma (C16._) [Beginning with cases diagnosed 1/1/2022 forward, Gastroblastoma should be assigned a behavior code of /3]**
New behavior code and term	8983**/3**	Adenomyoepithelioma **with carcinoma (C50._)**
New term	8990/3	**Phosphaturic** mesenchymal tumor, malignant **NTRK-rearranged spindle cell neoplasm (emerging)**
New term	9020/3	**Periductal stromal tumor, low grade (C50._)**
New term	9044/3	**Dermal** clear cell sarcoma (C44._)
New code and term	**9045/3**	**Biphenotypic sinonasal sarcoma (C30.0, C31._)**
New behavior code and term	9050**/2**	Mesothelioma **in situ (C38.4)**
New term	9050/3	**Localized** mesothelioma **(C38.4)** **Diffuse** mesothelioma, NOS **(C38.4)**
New behavior code and term	9061**/2**	**Intratubular** seminoma (C62._) **Intratubular trophoblast** (C62._)
New term	9061/3	Seminoma **with syncytiotrophoblastic cells** (C62._)
New behavior code and term	9070**/2**	**Intratubular** embryonal carcinoma (C62._)
New behavior code and term	9071**/2**	**Intratubular** yolk sac tumour (C62._)
New term	9071/3	Yolk sac tumor, **pre-pubertal type** (C52.9, C62._) Yolk sac tumor, **post**pubertal-type (C62._)
Behavior code not change	9080/3	Immature teratoma, NOS **(C56.9)**
Behavior code change (3→1)	9080**/1**	Immature teratoma (C34._) Immature teratoma (C37.9) Immature teratoma **(grade 2) (C73.9)**

Status	ICD-O-3	Term
New behavior code and term	9080**/2**	**Intratubular** teratoma (C62._)
New term	9080**/**3	Teratoma, **postpubertal-type** (C62._)
New term	9081/3	Teratocarcinosarcoma (C30.0, C31._)
New term	9084/0	**Teratoma, prepubertal-type (C62._)**
New term	9084/3	**Germ cell tumours with sometic-type solid malignancy (C37.9)** Teratoma **with carcinoid (neuroendocrine tumour)** (C64.9) Teratoma with somatic-type malignancy (C62._) **Well differentiated neuroendocrine tumor** (**monodermal** teratoma) (C62._)
New term	9085/3	Mixed teratoma-**yolk sac tumor** (C64.9) **Polyembryoma (C62._)** **Diffuse embryoma (C62._)** Mixed teratoma and yolk sac tumour, **prepubertal-type (C62._)**
New code and term	**9086/3**	**Germ cell tumours with associated haematological malignancy (C37.9)**
New behavior code and term	9104/**3**	Placental site trophoblastic tumour **of the testis (C62._)**
New term	9110/3	Adenocarcinoma of **rete ovarii (C56.9)** Adenocarcinoma, **HPV-independent,** mesonephric type (C53._)
New code and term	**9111/3**	**Mesonephric-like adenocarcinoma (C54._, C56.9)**
New term	9120/3	**Postradiation** angiosarcoma (C50._) **Epithelioid** angiosarcoma (C50._, C60-C68)
Behavior code change (1→**3**)	9133**/3**	Epithelioid hemangioendothelioma (C30.0, C31._, C44._, C40._, C41._, C47._, C49._)
New term	9133**/**3	Epithelioid hemangioendothelioma **with WWTR1-CAMTA1 fusion** (C47._, C49._) Epithelioid hemangioendothelioma **with YAP1-TFE3 fusion** (C47._, C49._)
New code and term	**9137/3**	**Pulmonary artery intimal sarcoma (C34._)** **Intimal sarcoma (C34._, C47._, C49._)**
New term	9170/3	**Diffuse** lymphangio**matosis (C34._)**
New behavior code and term	9174**/3**	Lymphangio**leio**myomatosis **(C34._)**
New term	9180/3	**Extraskeletal** osteosarcoma (C47._, C49._)
New term	9184/3	**Secondary** osteosarcoma (C40._, C41._)
New term	9187/3	Low-grade **central / intramedullary** osteosarcoma (C40._, C41._)

Status	ICD-O-3	Term
New term	9220/3	Chondrosarcoma, **grade 2/3** (C12.9, C13._, C14._, C32._, C33.9, C41.0, C41.1)
New code and term	**9222/1**	**Chondrosarcoma, grade 1 (C12.9, C13._, C14._, C32._, C33.9~~, C41.0, C41.1~~)**
New code and term	**9222/3**	**Chondrosarcoma, grade 1 (C40._, C41._)**
New term	9231/3	**Extraskeletal** myxoid chondrosarcoma **(C47._, C49._)**
New behavior code and term	9261/**1**	**Osteofibrous dysplasia-like** adamantinoma (C41.0, C41.1)
New term	9261/3	**Classic** adamantinoma **(malignant)** (C41.0, C41.1) **Dedifferentiated** adamantinoma (C41.0, C41.1)
New term	9270/3	**Sclerosing** odontogenic carcinoma (C41.0, C41.1)
New behavior code and term	9302/**3**	Ghost cell odontogenic **carcinoma** (C41.0, C41.1)
New term	9330/3	**Odontogenic sarcomas** (C41.0, C41.1)
Behavior code change (1→**3**)	9341/**3**	Clear cell odontogenic tumor (C41.0, C41.1)
New behavior code and term	9341/**3**	Clear cell odontogenic **carcinoma** (C41.0, C41.1)
New term	9362/3	Pineoblastoma, **miRNA processing-altered_1** (C75.3) Pineoblastoma, **miRNA processing-altered_2** (C75.3) Pineoblastoma, **RB1-altered (pineal retinoblastoma)** (C75.3) Pineoblastoma, **MYC/FOXR2-activated** (C75.3)
New code and term	**9366/3**	**Round cell sarcoma with EWSR1-non-ETS fusions (C40._, C41._, C47._, C49._)** **Round cell sarcoma with EWSR1/FUS::NFATC2 (C40._, C41._, C47._, C49._)** **Round cell sarcoma with EWSR1::PATZ1 (C40._, C41._, C47._, C49._)**
New code and term	**9367/3**	**CIC-rearranged sarcoma (C40._, C41._, C47._, C49._)**
New code and term	**9368/3**	**Sarcoma with BCOR genetic alterations (C40._, C41._, C47._, C49._)**
New term	9370/3	**Poorly differentiated** chordoma (C40._, C41._) **Conventional** chordoma (C40._, C41._)
New code and term (revised)	**9385/3**	**Diffuse midline glioma, H3 K27-altered ~~M-mutant~~ / H3.3 K27-mutant / H3.1 or H3.2 K27-mutant / H3-wildtype with EZHIP overexpression / EGFR-mutant (C71._)** **Diffuse hemispheric glioma, H3 G34-mutant (C71._)** **Diffuse pediatric-type high-grade glioma, H3-wildtype and IDH-wildtype / RTK2 / RTK1 / MYCN (C71._)** **Infant-type hemispheric glioma / NTRK-altered / ROS1-altered / ALK-altered / MET-altered (C71._)**
New behavior code and term	9391/**1**	**Sellar ependymoma (C75.1) [nonreportable]**
New term	9391/3	Ependymoma, NOS **(C57._)** **Supratentorial** ependymoma, NOS (C71._) **Posterior fossa** ependymoma, NOS (C71._) **Spinal** ependymoma, NOS (C71._, C72.0)

Status	ICD-O-3	Term
New code and term	**9396/3**	**Ependymoma, RELA fusion-positive (C71._)** **Supratentorial ependymoma, ZFTA fusion-positive / YAP1 fusion-positive (C71._)** **Posterior fossa group A (PFA) / group B (PFB) ependymoma (C71._)** **Spinal ependymoma, MYCN-amplified (**C71._, C72.0**)**
New term (revised)	9400/3	~~Diffuse~~ astrocytoma, **IDH-mutant, grade 2 ~~/ IDH-wildtype~~** (C71._)
New term (revised)	9401/3	~~Anaplastic~~ astrocytoma, **IDH-mutant, grade 3 ~~/ IDH-wildtype~~** (C71._)
New term	9421**/**1	Diffuse astrocytoma, **MYB- or MYBL1-altered** (C71._) Diffuse low-grade glioma, **MAPK pathway-altered** (C71._) Diffuse low-grade glioma, **FGFR1 tyrosine kinase domain-duplicated** (C71._) Diffuse low-grade glioma, **FGFR1-mutant** (C71._) Diffuse low-grade glioma, **BRAF p.V600E-mutant** (C71._) Pilocytic astrocytoma **with histological features of anaplasia**
New behavior code and term	9421**/3**	**High-grade** astrocytoma with piloid features (C71._)
New term	9424/3	**Anaplastic** pleomorphic xanthoastrocytoma **(C71._)**
New term	9430/3	Astroblastoma, **MN1-altered** (C71._)
New term	9440/3	**Epithelioid** glioblastoma (C71._)
New term	9440/3	Glioblastoma, **IDH-wildtype (C71._)**
New code and term	**9445/3**	**Glioblastoma, IDH-mutant (C71._)** **Astrocytoma, IDH-mutant, grade 4 (C71._)**
New term (revised)	9450/3	Oligodendroglioma, **IDH-mutant and 1p/19q-codeleted, grade 2 (C71._)**
New term (revised)	9451/3	~~Anaplastic~~ oligodendroglioma, **IDH-mutant and 1p/19q-codeleted, grade 3 (C71._)**
New term	9470/3	Medulloblastoma, **classic** (C71._) Medulloblastoma, **histologically defined** (C71._)
New term	9471/3	Medulloblastoma, **SHH-activated and TP53-wildtype (C71._)**
New term (revised)	9473/3	**CNS embryonal tumour, NEC/NOS (C71._)**
New code and term	**9475/3**	**Medulloblastoma, WNT-activated(C71._)**
New code and term	**9476/3**	**Medulloblastoma, SHH-activated and TP53-mutant (C71._)**
New code and term	**9477/3**	**Medulloblastoma, non-WNT/non-SHH (C71._)** **Medulloblastoma, group 3 / group 4 (C71._)**

Status	ICD-O-3	Term
New code and term	**9478/3**	**Embryonal tumour with multilayered rosettes, C19MC-altered (C71._)** **Embryonal tumour with multilayered rosettes, NOS (C71._)** **Embryonal tumour with multilayered rosettes, DICER1-mutant (C71._)**
New term	9480/3	**Primary intracranial** sarcoma, **DICER1-mutant (C71._)**
New term	9490/3	Ganglioneuroblastoma, **nodular** (C74.1) Ganglioneuroblastoma, **intermixed** (C74.1)
New term	9500/3	**CNS** neuroblastoma, **FOXR2-activated (C71._)** **CNS tumour with BCOR internal tandem duplication (C71._)**
New term	9508/3	**CNS embryonal tumour with** rhabdoid **features (C71._)**
New behavior code and term	9509**/3**	**Diffuse leptomeningeal** glioneuronal tumor (C71._) Diffuse leptomeningeal glioneuronal tumor **with 1q gain** (C71._) Diffuse leptomeningeal glioneuronal tumor**, methylation class 1 (DLGNT-MC-1)** (C71._) Diffuse leptomeningeal glioneuronal tumor**, methylation class 2 (DLGNT-MC-2)** (C71._)
New term	9540/3	MPNST **with perineurial differentiation (C72._)**
New code and term	**9542/3**	**Epithelioid malignant peripheral nerve sheath tumour (C44._, C47._, C49._)**
New behavior code and term	9591/**1**	**Monoclonal** B-cell lymphocytosis, **non-CLL-type**
New behavior code and term	9673/**1**	**In situ** mantle cell neoplasia
New term	9673/3	**Conventional** mantle cell lymphoma **Leukaemic non-nodal** mantle cell lymphoma
New behavior code and term	9680/**1**	EBV-positive mucocutaneous ulcer
New term	9680/3	Diffuse large B-cell lymphoma (DLBCL), **Germinal centre B-cell subtype** Diffuse large B-cell lymphoma (DLBCL), **Activated B-cell subtype** **Fibrin-associated** diffuse large B-cell lymphoma **High-grade** B-cell lymphoma **with MYC and BCL2 and/or BCL6 rearrangements** **High-grade** B-cell lymphoma, NOS **Vitreoretinal** lymphoma (C69.2)
New term	9687/3	**High-grade B-cell** ~~Burkitt-like~~ lymphoma **with 11q aberration** **Acute leukaemia**, Burkitt type **Endemic** Burkitt lymphoma **Sporadic** Burkitt lymphoma **Immunodeficiency-associated** Burkitt lymphoma

Status	ICD-O-3	Term
New term	9690/3	**Testicular** follicular lymphoma **Paediatric-type** follicular lymphoma
New behavior code and term	9695/**1**	**In situ** follicular neoplasia
New term	9695/3	**Duodenal-type** follicular lymphoma
New term	9698/3	**Large B-cell lymphoma with IRF4 rearrangement**
New term	9699/3	**Primary choroidal** lymphoma (C69.3)
New term	9700/3	**Hypopigmented** mycosis fungoides **Adnexotropic (folliculotropic and/or syringotropic)** mycosis fungoides Pagetoid reticulosis **(Woringer-Kolopp type)** **Granulomatous slack skin disease**
New behavior code and term	9702/**1**	**Indolent T-cell lymphoproliferative disorder of the gastrointestinal tract**
New term	9702/3	**Follicular** T-cell lymphoma **Nodal** peripheral T-cell lymphoma **with T follicular helper phenotype**
Behavior code change (3→1)	9709/1	Primary cutaneous CD4-positive small/medium T-cell lymphoproliferative disorder
New term	9709/3	Primary cutaneous **acral** CD8-positive T-cell lymphoma
New term	9714/3	Anaplastic large cell lymphoma, ALK-positive (ALK+ ALCL) **Common** ALK+ ALCL **Small cell** ALK+ ALCL **Lymphohistiocytic** ALK+ ALCL **Hodgkin-like** ALK+ ALCL **Composite** ALK+ ALCL
New code and term	**9715/3**	**Anaplstic large cell lymphoma, ALK-negative [originally 9702/3]** **Breast implant-associated anaplastic large cell lymphoma**
New term	9717/3	**Monomorphic epitheliotropic** intestinal T-cell lymphoma
Behavior code not change	9718/3	Primary cutaneous anaplastic large cell lymphoma
Behavior code change (3→1)	9718/**1**	Lymphomatoid papulosis (C44._) Lymphomatoid papulosis **type A / type B / type C / type D / type E / with DUSP22 locus rearrangement** Primary **mucosal** CD30-positive T-cell lymphoproliferative disorder
New term	9724/3	Systemic EBV-positive T-cell **lymphoma** of childhood

Status	ICD-O-3	Term
Behavior code change (3→1)	9725/**1**	Hydroa vacciniforme~~-like~~ lymphoproliferative disorder Classic hydroa vacciniforme lymphoproliferative disorder Systemic hydroa vacciniforme lymphoproliferative disorder
New behavior code and term	9738/**1**	HHV8-positive **germinotropic lymphoproliferative disorder**
New code and term	**9749/3**	**Erdheim-Chester disease** **Rosai–Dorfman disease**
Behavior code change (3→1)	9751/**1**	Langerhans cell histiocytosis, NOS Langerhans cell histiocytosis, monostotic Langerhans cell histiocytosis, polystotic
New behavior code and term	9761/**1**	**IgM monoclonal gammopathy of undetermined significance**
New term	9765/1	**Non-IgM** monoclonal gammopathy of undetermined significance
New term	9766/1	Lymphomatoid granulomatosis, **grade 1, 2**
New behavior code and term	9766**/3**	**Lymphomatoid granulomatosis, grade 3**
New term	9769/1	Light chain and **heavy chain** deposition diseases **Monoclonal** immunoglobulin deposition diseases
New term	9807/3	Mixed-phenotype acute leukaemia with t(v; 11q23.3); **KMT2A**-rearranged
New term	9811/3	B-lymphoblastic leukaemia/lymphoma **with iAMP21** B-ALL with **DUX4 rearrangement** B-ALL with **MEF2D rearrangement** B-ALL with **ZNF384 rearrangement** B-ALL with **PAX5 alteration** B-ALL with **PAX5 p.P80R variant** B-ALL with **NUTM1 rearrangement**
New term	9813/3	B-lymphoblastic leukaemia/lymphoma with t(v; 11q23.3); **KMT2A**-rearranged
New term	9815/3	B-ALL with **high hyperdiploidy**
New term	9816/3	B-ALL with **near-haploidy** B-ALL with **low hypodiploidy** B-ALL with **high hypodiploidy**
New term	9818/3	B-ALL with **TCF3::HLF fusion**
New code and term	**9819/3**	**B-lymphoblastic leukaemia/lymphoma, BCR-ABL1-like**
New behavior code and term	9823/**1**	**Monoclonal** B-cell lymphocytosis, **CLL-type**

Status	ICD-O-3	Term
New term	9835/3	**NK**-lymphoblastic leukaemia/lymphoma
New term	9840/3	**Pure** erythroid leukaemia
New term	9861/3	AML with **NUP98 rearrangement** AML with **MNX1::ETV6 fusion** AML with **KAT6A::CREBBP fusion** AML with **CBFA2T3::GLIS2 fusion**
New term	9869/3	AML with inv(3)(q21.3q26.2) or t(3;3)(q21.3;q26.2); **GATA2, MECOM** AML with **MECOM rearrangement**
New code and term	**9877/3**	**AML with mutated NPM1 [originally 9861/3]**
New code and term	**9878/3**	**AML with biallelic mutation of CEBPA [originally 9861/3]**
New code and term	**9879/3**	**AML with mutated RUNX1**
New term	9897/3	AML with t(9;11)(p21.3;q23.3); **KMT2A**-MLLT3 AML with t(9;11)(**p22**;q23); **KMT2A**-MLLT3 AML with **KMT2A rearrangement**
New code and term	**9912/3**	**AML with BCR-ABL1**
New term	9946/3	Juvenile myelomonocytic leukaemia (JMML) **PTPN11-mutated JMML** **NRAS-mutated JMML** **KRAS-mutated JMML** **JMML in neurofibromatosis type 1 (NF1)** **JMML in children with CBL syndrome** **JMML-like disorders in children with Noonan syndrome (NS)**
New term	9966/3	Myeloid/**lymphoid** neoplasms with PDGFRB
New code and term	**9968/3**	**Myeloid/lymphoid neoplasms with PCM1-JAK2**
Behavior code change (3→1)	9971/**1**	Polymorphic PTLD
New term	9980/3	**Myelodysplastic syndrome with single lineage dysplasia**
New term	9982/3	**Myelodysplastic/myeloproliferative** neoplasm with ring sideroblasts and thrombocytosis **Myelodysplastic syndrome** with ring sideroblasts and **single lineage dysplasia**
New term	9983/3	**Myelodysplastic syndrome** with excess blasts

Status	ICD-O-3	Term
New term	9985/3	**Myelodysplastic syndrome with multilineage dysplasia**
New code and term	**9993/3**	**Myelodysplastic syndrome with ring sideroblasts and multilineage dysplasia**

說明：綠色網底表示為本次新增編碼或增修敘述。