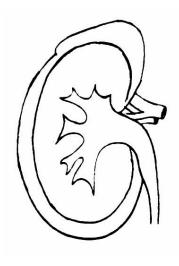
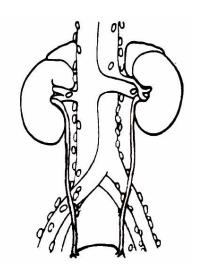


KIDNEY STAGING DIAGRAM





SITE:	Kidney		□R	Right		Left						
HISTOLOG	Y:											
GRADE: (Fuhrman system)			X	x		1		3		4		
☐ NEW Pre (No) Nephrectomy ☐ POST OPERATIVE Post Nephrectomy			Defini	RECURRENT DISEA Definitive treatment already re Referred at recurrence.				REFERRED FOR FOLLOW-UP Previously treated and followed elsewhere before referral.				
TNM 2002 Clinical	T N M	X X X	0 0 0	1a 1 1	2	2	3а	3b	3c	4		
TNM 2002 Pathological	T N M	X X X	0 0 0	1a 1 1	1b 2 Site(s)	2	3a	3b	3c	4		
	pV	Χ	0	1	2							
Completed by:										Date:		
Diagnosis/Sta	ge ame	nded to	:									
Reason:												
By:									Г)ate.		

KIDNEY TNM 2002 CLINICAL & PATHOLOGICAL CLASSIFICATION

PRIMARY TUMOUR Primary tumour cannot be assessed No evidence of primary tumour Tumour 4 cm or less in greatest dimension, limited to the kidney Tumour greater than 4 cm, but not more than 7 cm, in greatest dimension, limited to the kidney Tumour more than 7.0 cm in greatest dimension, limited to the kidney Tumour invades adrenal gland or perinephric tissues but not beyond Gerota fascia Tumour grossly extends into renal vein(s) or vena cava below diaphragm Tumour invades beyond Gerota fascia
REGIONAL LYMPH NODES * The regional lymph nodes are the hilar, abdominal para-aortic, and para caval nodes. Laterality does not affect the N categories Regional lymph nodes cannot be assessed No regional lymph node metastasis Metastasis in a single regional lymph node Metastasis in more than one regional lymph node
Laterality does not affect the N classification
If a lymph node dissection is performed, then pathologic evaluation would ordinarily include at least eight nodes
DISTANT METASTASIS Including extraregional lymph nodes Distant metastasis cannot be assessed No distant metastasis Distant metastasis
INVASION OF VEINS (TNM Atlas UICC 1985) Venous invasion cannot be assessed Veins do not contain tumour Renal vein contains tumour Vena cava contains tumour
(Fuhrman Nuclear Grade – <i>ref: Am J Surg Pathol 6:655-663, 1982</i>) Tumour composed of cells with small (approx. 10μ) round uniform nuclei with inconspicuous or
absent nucleoli Tumour composed of cells with larger (approx. 15μ) nuclei which exhibited irregularities in outline
and nucleoli when examined under high (400x)power Tumour composed of cells with large nuclei (approx.20µ) with an obviously irregular outline and prominent large nuclei even at low (100x)power
Tumour composed of features similar to grade 3 with the addition of bizarre, often multilobed nuclei and heavy chromatin clumps. These tumours often had areas of spindled-shaped cells resembling sarcomas Unknown/not assessed