

Endoscopic Mucosal Resection of Esophageal and EGJ carcinomas

Definition: Tumors that are centered within the proximal 2 cm of the stomach and which extend into the esophagogastric junction (EGJ) or esophagus are included here as EGJ tumors

- **Note 1:** If more than one carcinoma, use a separate template for each. No need to use a separate template for one carcinoma removed piecemeal by more than one EMR
- **Note 2:** tumors that arise within the proximal 2 cm of the stomach and do not extend into the EGJ would be considered a gastric carcinoma.

Location:

Esophagus
 upper
 Middle
 lower
 Gastroesophageal Junction

Size:

Type of carcinoma:

Squamous cell carcinoma typical
 Adenocarcinoma arising in Barrett's mucosa
 Adenocarcinoma not arising in Barrett's mucosa
 Adenocarcinoma, cannot tell if Barrett's or not
 Other

Degree of differentiation

Well-differentiated
 Moderately-differentiated
 Poorly-differentiated

Depth of invasion: (remember in Barrett's carcinomas, there is likely to be a duplicated muscularis mucosae. The original muscularis mucosae will be the deeper one)

Lamina propria or muscularis mucosae
 Submucosa

Lymphovascular invasion: Yes No

Margins:

Mucosal margin involved: Yes, specify block No
 Deep margin involved: Yes, specify block No

pTNM by 8th ed. AJCC Cancer Staging Manual

T Stage:

- T1 Tumor invades lamina propria, muscularis mucosae or submucosa
 - T1a Tumor invades lamina propria or muscularis mucosae (for Barrett's carcinomas, this is the deep or original muscularis mucosae)
 - T1b Tumor invades submucosa

Note: Only the T stage can be evaluated. Do NOT include an N or M