Box 1. American Joint Cancer Committee/Union for International Cancer Control 7th edition TNM staging for intrahepatic cholangiocarcinoma

## Primary tumor (T)c:

- TX Primary tumor cannot be assessed
- T0 No evidence of primary tumor
- Tis Carcinoma *in situ* (intraductal tumor)
- T1 Solitary tumor without vascular invasion
- T2a Solitary tumor with vascular invasion
- T2b Multiple tumors, with or without vascular invasion
- T3 Tumors perforating the visceral peritoneum OR involving local hepatic structures by direct invasion
- T4 Tumor with periductal invasion

## **Regional lymph nodes (N):**

- NX Regional lymph nodes cannot be assessed
- N0 No regional lymph node metastases
- N1 Regional lymph node metastases present

## Distant metastases (M):

- M0 No distant metastases
- M1 Distant metastases present

### Anatomic stage/prognostic groups:

Stage 0	Tis	NO	<b>M</b> 0
Stage I	T1	NO	<b>M</b> 0
Stage II	T2	N0	<b>M</b> 0
Stage III	T3	NO	<b>M</b> 0
Stage IVA	T4	NO	<b>M</b> 0
	Any T	N1	<b>M</b> 0
Stage IVB	Any T	Any N	<b>M</b> 1

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Box 2. Liver Cancer Study Group of Japan (LCSGJ) staging system for intrahepatic cholangiocarcinoma

# **Prognostic criteria:**

- 1 Tumor size  $\leq 2$  cm
- 2 Tumor number: 1
- 3 No portal vein, hepatic vein or serosal invasion
- T1 All three criteria
- T2 Two of three criteria
- T3 One of three criteria
- T4 None of three criteria
- N0 No lymph node metastases
- N1 Lymph node metastases
- M0 No distant metastases
- M1 Distant metastases

Stage IT1N0M0Stage IIT2N0M0Stage IIIT3N0M0Stage IVAT4N0M0Stage IVBAny T, any NM

Permission obtained from Springer © Yamasaki, S. J. Hepatobiliary Pancreat. Surg. 10, 288–291 (2003).

Box 3. National Cancer Center in Japan (NCCJ) staging system for mass-forming intrahepatic cholangiocarcinoma

# **Primary tumor (T):**

- T1 Solitary tumor without vascular invasion
- T2 Solitary tumor with vascular invasion
- T2 Multiple tumors with or without vascular invasion

### **Regional lymph nodes (N):**

- N0 No regional lymph node metastases
- N1 Regional lymph node metastases

#### **Distant metastases (M):**

- M0 No distant metastases
- M1 Distant metastases present

Stage group	oing:		
Stage I	T1	N0	M0
Stage II	T2	N0	M0
Stage IIIA	T3	N0	M0
Stage IIIB	Any T	N1	M0
Stage IV	Any T	Any N	<b>M</b> 1

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Box 4. American Joint Cancer Committee/Union for International Cancer Control 7th edition TNM staging for perihilar cholangiocarcinoma

#### Primary tumor (T)c:

- Tx Primary tumor cannot be assessed
- T0 No evidence of primary tumor
- Tis Carcinoma in situ
- T1 Tumor confined to the bile duct, with extension up to the muscle layer or fibrous tissue
- T2A Tumor invades beyond the wall of the bile duct to surrounding adipose tissue
- T2B Tumor invades adjacent hepatic parenchyma
- T3 Tumor invades unilateral branches of the portal vein or hepatic artery

T4 Tumor invades main portal vein or its branches bilaterally; or the common hepatic artery; or the second-order biliary radical bilaterally; or unilateral second order biliary radicals with contralateral portal vein or hepatic artery involvement

#### **Regional lymph nodes (N):**

- NX Regional lymph nodes cannot be assessed
- N0 No regional lymph node metastases

N1 Regional lymph node metastases present (including nodes along the cystic duct, common bile duct, hepatic artery, and portal vein)

N2 Metastases to periaortic, pericaval, superior mesenteric artery, and/or celiac artery lymph nodes

#### Distant metastases (M):

M0 No distant metastases

M1 Distant metastases present

#### Anatomic stage/prognostic groups:

Stage 0	Tis	N0	M0
Stage I	T1	N0	M0
Stage II	T2A-B	N0	M0
Stage IIIA	T3	N0	M0
Stage IIIB	T1-3	N1	M0
Stage IVA	T4	N0-1	M0
Stage IVB	Any T	N2	M0
	Any T	Any N	M1

Box 5. American Joint Cancer Committee/Union for International Cancer Control 7th edition TNM staging for distal extrahepatic cholangiocarcinoma

## **Primary tumor (T)c:**

- TX Primary tumor cannot be assessed
- T0 No evidence of primary tumor
- Tis Carcinoma in situ
- T1 Tumor confined to the bile duct histologically
- T2 Tumor invades beyond the wall of the bile duct
- T3 Tumor invades the gallbladder, pancreas, duodenum, or other adjacent organs without involvement of the celiac axis, or the superior mesenteric artery
- T4 Tumor involves the celiac axis, or the superior mesenteric artery

## **Regional lymph nodes (N):**

- NX Regional lymph nodes cannot be assessed
- N0 No regional lymph node metastases
- N1 Regional lymph node metastases present

### **Distant metastases:**

- M0 No distant metastases
- M1 Distant metastases present

#### Anatomic stage/prognostic group

Stage 0	Tis	N0	M0
Stage IA	T1	N0	M0
Stage IB	T2	N0	M0
Stage IIA	T3	N0	M0
Stage IIB	T1	N1	M0
	T2	N1	M0
	T3	N1	M0
Stage III	T4	Any N	M0
Stage IV	Any T	Any N	<b>M</b> 1

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Table 1.	Memorial Sloan-Kettering Cancer Center staging system for hilar cholangiocarcinoma
Stage	Criteria
T1	Tumor involving biliary confluence +/- unilateral extension to second-degree biliary radicles
T2	Tumor involving biliary confluence +/- unilateral extension to second-degree biliary
	radicles
	AND
	Ipsilateral portal vein involvement +/- ipsilateral hepatic lobe atrophy
T3	Tumor involving biliary confluence +/- unilateral extension to second-degree biliary
	radicles
	OR
	Unilateral extension to second-degree biliary radicles with contralateral portal vein in-
	volvement
	OR
	Unilateral extension to second-degree biliary radicles with contralateral hepatic lope at-
	rophy
	OR
	Main or bilateral portal venous involvement
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234, 507	-517 (2001).

Table 2. Proposed	clinical staging	system for perihilar	cholangiocarcinoma	a
Criteria	Stage			
	Stage I	Stage II	Stage III	Stage IV
Mass lesions	None	Unicentric ≤3	Unicentric >3	Multicentric
		cm	cm	
Metastases	None	None	Perihilar LN	Perihilar LN
Lobar atrophy	No	Yes	NA	NA
and/or vascular				
encasement				
Jaundice resolu-	Yes	Yes	No	NA
tion with stent-				
ing				
ECOG perform-	0-1	0-1	0-1	$\geq 2$
ance status				
Abbreviations: EC	COG, Eastern Coo	operative Oncology	Group; LN, lymph	node; NA, not ap-
plicable. Permissi	on obtained from	Lippincott William	s and Wilkins © Blo	echacz, B. R. et al.
Curr. Opin. Gastr	oenterol. <b>25</b> , 238	-239 (2009).		

und	Side/location	Description
		Bile duct (B) (Based on Bismuth Classification)
B1		Common bile duct
B2		Hepatic duct confluence
B3	R	Right hepatic duct
B3	L	Left hepatic duct
34		Right and left hepatic duct
		Tumor size (T)
Г1		< 1cm
Т2		1 - < 3  cm
Т3		$\geq$ 3cm
		Tumor Form (F)
Sclerosing	1	Sclerosing (or periductal)
Mass	1	Mass forming (or nodular)
Mixed	1	Sclerosing and mass forming
Polipoid		Polipoid (or intraductal)
		Involvement (>180°) of the portal vein (PV)
PV0		No portal involvement
PV1		Main Portal vein
PV2		Portal vein bifurcation
PV3	R	Right portal vein
PV3	L	Left portal vein
PV4	L	Right and left portal vein
1 V4		
		Involvement (>180°) of the hepatic artery (HA)
HA0		No arterial involvement
HA1		Proper hepatic artery
HA2		Hepatic artery bifurcation
HA3	R	Right hepatic artery
HA3	L	Left hepatic artery
HA4		Right and left hepatic artery
		Liver remnant volume (V)
V 0	ļ	No information on volume needed (liver resection not foreseen)
V (%)	Indicate segments	% total volume of a putative remnant liver after resection
NO		Lymph Nodes (N) (based on Japanese Society of Biliary Surgery)
N0	-	No lymph nodes involvement
N1		Hilar and/or hepatic artery lymph nodes involvement
N2		Peri-aortic lymph nodes involvement
		Metastases (M) ( Based on TNM classification(11))
M0	<u> </u>	No distant metastases
M1	1	Distant metastases, including liver and peritoneal metastases