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Cancer Center

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Why Is This Tool Useful?

An accurate understanding of prognosis for women with endometrial cancer after surgery can help guide doctors and patients in their choice of follow-up therapies such as chemotherapy, radiation, and hormone therapy.

Traditionally in endometrial cancer, doctors have relied mainly on the final International Federation of Gynecology and Obstetrics (FIGO) staging assessment to estimate overall outcome. However, it is well known that other patient factors such as age, histology (the specific subtype of endometrial cancer assigned after pathology analysis), final grade (the percentage of an endometrial tumor that is solid), and adequacy or accuracy of staging (a system that identifies the extent to which the cancer has spread) may play equally important roles in prognosis and overall outcome. This nomogram takes these other factors into account.

What Information Will You Need?

In order for this nomogram to provide an accurate prediction, you must include accurate values for all of the information below.

- Age: Patient’s age at the time of diagnosis.
- Lymph node involvement: The number of lymph nodes that were found to be negative (not cancerous) from the pathology report.
- Stage: Surgical 1988 FIGO stage.
- Tumor grade: Final FIGO grade.
- Tumor type: The specific subtype of endometrial cancer assigned after pathology analysis.

To better understand the results of the nomogram, patients should discuss survival estimates with their doctors.

Use our [endometrial cancer nomogram](#) .

Request an Appointment

Call [800-525-2225](tel:800-525-2225)
We’re available 24 hours a day, 7 days a week

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