

Ready to start planning your care? Call us at [800-525-2225](tel:800-525-2225) to make an appointment.

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Memorial Sloan Kettering
Cancer Center

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Stage 1

The tumor is confined to the area in which it arose (i.e., there has been no spread, or metastasis) and can be completely removed by [surgery](#).

Stage 2A

The tumor is confined to the area in which it arose, but cannot be completely removed by surgery.

Stage 2B

The tumor is confined to the area in which it arose. It may or may not be possible to completely remove the tumor by surgery. Neuroblastoma cells are present in the lymph nodes adjacent to the tumor.

Stage 3

The tumor cannot be completely removed by surgery and has either:

- spread from one side of the body to the other and may also have spread to nearby lymph nodes;
- remained confined to the area in which it arose, but spread to lymph nodes on the other side of the body; or
- remained confined to the middle of the body and spread to lymph nodes on both sides of the body.

Stage 4

The tumor has spread to distant lymph nodes, bone marrow, bone, liver, or other organs (except as defined by stage 4S).

Stage 4S

Stage 4S is applicable only to children who are younger than one year. The tumor is confined to the area in which it arose, as in stages 1 and 2, but some cells have spread to the liver, skin, or bone marrow.

International Neuroblastoma Risk Group (INRG)

The newer International Neuroblastoma Risk Group (INRG) has three stages:

localized neuroblastoma (L1 or L2), in which neuroblastoma is restricted to one part of the body, without spreading elsewhere

metastatic neuroblastoma (stage M), in which neuroblastoma has spread to different parts of the body, especially the bones and bone marrow

stage MS neuroblastoma (a type of metastatic neuroblastoma that arises in infancy), in which the tumor is confined to the area where it began but some cells have spread to the liver, skin, or bone marrow

What happens next?

Once we know the stage of your child's cancer, we combine that information with the results of genetic testing of the tumor and type of neuroblastoma cells to determine if the cancer is low risk, intermediate risk, or high risk.

Low-risk neuroblastoma is most common in infants and children with very small tumors that can easily be removed through surgery.

Intermediate-risk neuroblastoma is usually found in children with larger tumors that haven't spread to other parts of the body or children younger than 18 months whose tumors have spread.

High-risk neuroblastoma includes disease that has spread and is diagnosed after 18 months of age, as well as neuroblastoma in people with tumors containing a genetic feature known as MYCN amplification (regardless of age or disease spread).

Our doctors will use all of this information to tailor a care plan that will best meet your child's needs.

We know this is a lot of information to take in. That's why during every step of the process, the MSK Kids team is available to explain everything and answer any questions you may have. Do not hesitate to let us know if anything is unclear to you. We are all partners in your child's care team. We want to hear from you.

New Patient Appointments

Call [833-MSK-KIDS](tel:833-MSK-KIDS) Available Monday through Friday, 9 a.m. to 5:30 p.m. (Eastern time)

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