

Understanding Your Diagnosis

Patient Education Resource

Receiving a cancer diagnosis can feel overwhelming. This guide is designed to help you understand what your diagnosis means, how your care team determines the next steps, and what questions you may want to ask along the way. Knowledge is one of the most powerful tools you have — and we are here to walk you through every step.

1. What Staging Means

Staging describes how far the cancer has spread in your body. Your doctors use staging to choose the best treatment plan for you. The most widely used system is the **TNM system**:

- **T (Tumor)**: How large is the primary tumor and how deep has it grown into surrounding tissue?
- **N (Nodes)**: Has the cancer spread to nearby lymph nodes?
- **M (Metastasis)**: Has the cancer spread to distant parts of the body (liver, lungs, etc.)?

These letters are combined into an overall stage:

- **Stage I**: Cancer is small and only in the area where it started
- **Stage II**: Cancer has grown larger but has not spread to lymph nodes
- **Stage III**: Cancer has spread to nearby lymph nodes or surrounding tissues
- **Stage IV**: Cancer has spread to distant organs

Your stage helps your care team predict the likely course of the disease and decide whether surgery, chemotherapy, radiation, or a combination will give you the best outcome.

2. How Imaging Guides Your Treatment

Imaging studies let your doctors see inside your body without surgery. Each type of scan gives different information:

CT Scan (Computed Tomography)

- Uses X-rays from multiple angles to create detailed cross-sectional images
- Shows tumor size, location, and whether nearby structures are involved
- Often used for the chest, abdomen, and pelvis to check for spread

MRI (Magnetic Resonance Imaging)

- Uses magnetic fields and radio waves — no radiation exposure
- Provides excellent detail for soft tissues like the liver, pelvis, and brain

- Particularly important for rectal cancer and liver tumors to plan surgery precisely

PET Scan (Positron Emission Tomography)

- Uses a small amount of radioactive sugar that cancer cells absorb faster than normal cells
- Highlights areas of active cancer throughout the entire body
- Helps determine whether cancer has spread to distant locations

Your surgeon and oncology team review all of these images together to build a complete picture of your cancer before recommending treatment.

3. What Your Biopsy Results Tell You

A biopsy is a small sample of tissue taken from the tumor and examined under a microscope. Your pathology report provides critical information:

- **Tumor type:** The specific kind of cancer (e.g., adenocarcinoma, squamous cell carcinoma)
- **Grade:** How abnormal the cells look — lower grade often means slower growth; higher grade may be more aggressive
- **Molecular markers:** Special tests (like MSI, KRAS, or HER2) that tell your team whether certain targeted therapies or immunotherapies may work for you
- **Margin status (surgical biopsy):** Whether cancer cells are found at the edge of the removed tissue

Your team will explain your specific results and what they mean for your treatment plan. Do not hesitate to ask for a copy of your pathology report.

4. When Surgery Is Recommended

Surgery is often the most effective way to remove a solid tumor. Your surgeon may recommend an operation when:

- The tumor can be safely and completely removed with clear margins
- The cancer has not spread widely to other organs (or limited spread that can also be treated)
- Your overall health allows you to recover safely from the procedure
- Removing the tumor will relieve symptoms or prevent complications (such as blockage)

In some cases, your team may recommend **chemotherapy or radiation before surgery** (called neoadjuvant therapy) to shrink the tumor first. In other cases, additional treatment may be recommended **after surgery** (adjuvant therapy) to reduce the chance of recurrence.

5. Questions to Ask Your Surgeon

You are encouraged to bring questions to every appointment. Here are some that many patients find helpful:

- What type and stage of cancer do I have?
- What are my treatment options, and what do you recommend for me?

- What is the goal of surgery — cure, symptom relief, or both?
- What are the risks and potential complications of this operation?
- How long is the typical recovery, and will I need help at home?
- Will I need chemotherapy or radiation before or after surgery?
- Are there any clinical trials I should consider?
- What happens if I choose not to have surgery?
- Who else will be part of my care team?
- How will we monitor for recurrence after treatment?

Tip: Bring a family member or friend to appointments to help take notes. It is also helpful to write your questions down in advance.

This resource is for educational purposes only and does not replace individualized medical advice. Please discuss your specific diagnosis and treatment options with your care team.