

**Case Description:**

Patient is a 48-year-old woman with a diagnosis of FIGO stage IVB cT1bN2bM1 (M1 due to pelvic lymph node metastasis) keratinizing, moderately differentiated squamous cell carcinoma of the vulva with a depth of invasion of 3.5 mm and no lymphovascular invasion identified on the biopsy. She underwent exam under anesthesia (EUA), and she was noted to have a 5 cm mass involving the entire labia majora bilaterally. There was no urethral or anal involvement, although the tumor was located less than 1 cm from the anus. At the time of EUA, she was noted to have palpable bilateral inguinal lymphadenopathy. PET/CT demonstrated a large soft tissue lesion with intense uptake (SUV 9.6) on the bilateral vulva greater on the left, extending to the perianal region and the left lower perineum with no apparent tumor invasion to the anus; also demonstrated were mildly FDG-avid lymph nodes in the bilateral inguinal and left external iliac regions. Her case was discussed with gynecologic oncology, and she was a poor candidate for surgery due to the proximity of the tumor to the anus. Therefore, she was treated with concurrent chemoradiation.

**Contouring Homework:**

Contour the tumor GTV

Contour the bilateral inguinal lymph node CTV at the level of the mid pubic symphysis

Contour the lymph node on the LEFT at the level of external iliac/inguinal junction