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Table 1a					
UK- NICE	Risk of local recurrence		European-ESMO		
recommendations			recommendations		
A threatened (<1 mm) or	High	Advanced	cT3 with any MRF involved or		
breached resection margin		disease	cT4b or levators threatened		
or			or lateral lymph node		
Low tumours encroaching			involvement		
onto the inter-sphincteric		Locally	cT3c/d if very low rectal		
plane or		advanced	tumours, levators not		
Any levator involvement		disease	threatened, MRF clear or		
			cT3c/d mid or high rectal		
			tumours, cN1-2 (extranodal)		
			and EMVI positive		
Any cT3b or greater, in	Moderate	Intermediate	cT3a/b if low rectal tumours		
which the potential surgical		disease	with no involvement of		
margin is not threatened or			levator muscles and MRF		
Any suspicious lymph node			clear or		
not threatening the surgical			cT3a/b mid or high rectal		
resection margin or			tumours, cN1-2 (not		
The presence of extramural			extranodal) and no EMVI		
vascular invasion ^[a]					
cT1 or cT2 or cT3a and	Low	Early disease	cT1 or cT2 or cT3a/b if middle		
No lymph node			or high rectal tumours, and		
involvement			No lymph node involvement		
			and Not threatening the		
			surgical resection margin and		
			No EMVI		

Table 1b

UK- NICE recommendations	Risk of local recurrence		European-ESMO recommendations
CRT and interval to TME	High	Advanced disease	CRT or SCPRT plus FOLFOX (and delay) and TME
CRT and interval to TME	Borderline high/ Moderate	Locally advanced disease	CRT or SCPRT and TME (or 'watch-and-wait' in high-risk patients if cCR acheived)
SCPRT then immediate TME	Moderate	Intermediate disease	TME alone or SCPRT/CRT if good quality mesorectal excision cannot be achieved
TME alone in most cases	Low	Early disease	TME alone in most cases or TEM, CRT or 'watch-and-wait' for high-risk patients or those rejecting TME