

# Head and Neck Cancer Pathways

Patient Name: \_\_\_\_\_

Date of Birth: \_\_\_\_\_

Member Number: \_\_\_\_\_

Treatment Start Date: \_\_\_\_\_

**Pathology:** \_\_\_\_\_

**Stage:** \_\_\_\_\_

**Line of Therapy:**  Neoadjuvant/Pre-Op  Adjuvant/Post-Op

**ECOG Performance Status:** \_\_\_\_\_ **ICD-10 Code:** \_\_\_\_\_

1<sup>st</sup> Line

2<sup>nd</sup> Line

## Non-Nasopharyngeal (Squamous Cell Carcinoma) | Candidate for Local Therapy (M0) | Primary Systemic Therapy or Post-Operative Systemic Therapy

High dose cisplatin\* with concurrent RT

## Non-Nasopharyngeal (Squamous Cell Carcinoma) | Metastatic and Recurrent Disease | First Line of Therapy (1<sup>st</sup> line)

Carboplatin, fluorouracil (5FU), and cetuximab (Erbixux)

Cisplatin, fluorouracil (5FU), and cetuximab (Erbixux)

## Non-Nasopharyngeal (Squamous Cell Carcinoma) | Metastatic and Recurrent Disease | Second and Subsequent Lines of Therapy (2<sup>nd</sup> line+)

Nivolumab (Opdivo)

Paclitaxel

## Nasopharynx | Candidate for Local Therapy (M0) | Primary Systemic Therapy

High dose cisplatin\* with concurrent RT

## Nasopharynx | Metastatic and Recurrent Disease | First and Subsequent Lines of Therapy (1<sup>st</sup> Line+)

Carboplatin

Cisplatin

Cisplatin† and gemcitabine (Gemzar)

Cisplatin† and paclitaxel

Fluorouracil (5FU)

Gemcitabine (Gemzar)

Methotrexate

Paclitaxel

\*High dose cisplatin refers to dosing to achieve total dose of 200-300 mg/m<sup>2</sup> of cisplatin over the course of the radiotherapy. There are several different appropriate cisplatin schedules that may be used.

†Substitution of carboplatin for cisplatin, and vice-versa, is acceptable for metastatic disease

**Note:** Pathways are independent of specific health plan medical policy coverage criteria. Health plan medical policy/clinical guidelines should be consulted to determine whether proposed services will be covered

