Ovarian Cancer (Epithelial) Pathways

Patient Name:	Date of Birth:
Member Number:	Treatment Start Date:
Stage:IIAIBIIAIIBIICIIIAIIIBIIICIVRecurrent Line of Treatment:Neoadjuvant/Pre-Op Adjuvant/Post-OpFirst Li ECOG Performance Status:01234	neSecond LineThird LineThird Line+Maintenance
Biomarkers:	
Germline BRCA 1? Mutation Present Not Reported Wild Type (mutat	ion absent)
Germline BRCA 2?Mutation PresentNot ReportedWild Type (mutation absent)	
Platinum sensitive?* _Yes _No _Not Reported	
Platinum-refractory or resistant?YesNoNot Reported	
Adjuvant Therapy Stage IA/B (Grade 2 or 3) or IC (Grade 1-3)	
Carboplatin and dose dense paclitaxel	
Carboplatin and paclitaxel	
Adjuvant or Primary Therapy Stage II, III, IV	
Carboplatin and paclitaxel (Administered weekly or every 3 weeks)	
Intravenous (IV) paclitaxel and Intraperitoneal (IP) cisplatin and IP pa	aclitaxel (Stage III only)
Recurrent Disease First and Subsequent Lines of Therapy (1st Line+) Platinum-Sensitive*	
Carboplatin	
Carboplatin and gemcitabine (Gemzar)	
Carboplatin and paclitaxel	
Carboplatin and weekly paclitaxel	
Recurrent Disease Maintenance Therapy Platinum-Sensitive	,* -
Niraparib (Zejula)	
Recurrent Disease Second and Subsequent Lines of Therapy (2nd Line+) Platinum Resistant
Bevacizumab (Avastin) monotherapy	
Docetaxel (Taxotere)	
Gemcitabine (Gemzar)	
Liposomal doxorubicin (Doxil or Lipodox)	
Paclitaxel (weekly)	
Paclitaxel and bevacizumab (Avastin)	
Tamoxifen Topotecan (Hycamtin)	
Topotecan (Hycamtin)Topotecan (Hycamtin) and bevacizumab (Avastin)	
Vinorelbine (Navelbine)	

Note: Pathway lists are solely for the purpose of eligibility for enhanced reimbursement and 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.



^{*}Platinum sensitive disease is defined as recurrence of greater than 6 months after prior platinum-based therapy