

Bladder Cancer Pathways

(Urothelial)

Patient Name: _____ Date of Birth: _____

Member Number: _____ Treatment Start Date: _____

ICD-10 Code: _____ Pathology: _____

Stage: 0a 0is I II III IV Recurrent

Line of Treatment: Neoadjuvant/Pre-Op Adjuvant/Post-Op First Line Second Line Third Line Third Line+ Maintenance

Goal of Treatment: Curative Non-Curative

ECOG Performance Status: 0 1 2 3 4

Biomarker:

Platinum Resistant/Refractory? Yes No

Neoadjuvant Therapy | Clinical Stage II, III, or Stage IV without evidence of metastases (cT2, cT3, cT4a, cT4b)

CMV: cisplatin (Platinol), methotrexate and vinblastine (Velban) with leucovorin

ddMVAC: dose dense methotrexate, vinblastine (Velban), doxorubicin (Adriamycin) and cisplatin (Platinol)

Gemcitabine (Gemzar) and cisplatin (Platinol)

Inreavesical Initial Therapy | Stage I or II after TURBT or following resection of recurrent or persistent disease

BCG: bacillus calmette-guerin intravesical

Mitomycin C intravesical

Metastatic Disease | First Line Therapy

Gemcitabine (Gemzar) and cisplatin (Platinol)



Breast Cancer Pathways: Neoadjuvant

Patient Name: _____ Date of Birth: _____

Member Number: _____ Treatment Start Date: _____

ICD-10 Code: _____ Pathology: _____

Stage: __0__IA__IB__IIA__IIB__IIIA__IIIB__IIIC__IV__Recurrent

Line of Treatment: __Neoadjuvant/Pre-Op__ Adjuvant/Post-Op

ECOG Performance Status: __0__1__2__3__4

Biomarker:

Estrogen Receptor: __Positive__Negative

Progesterone Receptor: __Positive__Negative

HER2 status: __Positive__Negative by __IHC__FISH

Menopausal Status: Pre / Peri / Post / NA (patient is male)

OncotypeDx: __Low*__Intermediate__High__Not Done/Not Reported

Neoadjuvant Therapy | HER2 Negative

AC → weekly T: doxorubicin (Adriamycin) and cyclophosphamide (Cytoxan) (every 3 weeks) followed by weekly paclitaxel (Taxol)

ddAC → weekly T: dose dense doxorubicin (Adriamycin) and cyclophosphamide (Cytoxan) followed by weekly paclitaxel (Taxol)

TC: docetaxel (Taxotere) and cyclophosphamide (Cytoxan)

Neoadjuvant Therapy | HER2 Positive

AC → TH: doxorubicin (Adriamycin) and cyclophosphamide (Cytoxan) followed by paclitaxel (Taxol) and trastuzumab (Herceptin)

TCH: docetaxel (Taxotere), carboplatin (Paraplatin) and trastuzumab (Herceptin)

Neoadjuvant Therapy | HER2 Positive | Hormone receptor (ER/PR) negative

TCH+P: docetaxel (Taxotere), carboplatin (Paraplatin), trastuzumab (Herceptin) and pertuzumab (Perjeta)

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.



Breast Cancer Pathways: Adjuvant

Patient Name: _____ Date of Birth: _____

Member Number: _____ Treatment Start Date: _____

ICD-10 Code: _____ Pathology: _____

Stage: __0 __IA __IB __IIA __IIB __IIIA __IIIB __IIIC __IV __Recurrent

Line of Treatment: __Neoadjuvant/Pre-Op __ Adjuvant/Post-Op

ECOG Performance Status: __ 0 __ 1 __ 2 __ 3 __ 4

Biomarker:

Estrogen Receptor: __Positive __Negative

Progesterone Receptor: __Positive __Negative

HER2 status: __Positive __Negative by __IHC __FISH

Menopausal Status: Pre / Peri / Post / NA (patient is male)

OncotypeDx: __Low* __Intermediate __High __Not Done/Not Reported

Adjuvant Therapy | HER2 Negative*

AC → weekly T: doxorubicin (Adriamycin) and cyclophosphamide (Cytoxan) (every 3 weeks) followed by weekly paclitaxel (Taxol)

ddAC → weekly T: dose dense doxorubicin (Adriamycin) and cyclophosphamide (Cytoxan) followed by weekly paclitaxel (Taxol)

TC: docetaxel (Taxotere) and cyclophosphamide (Cytoxan)

Adjuvant Therapy | HER2 Positive

AC → TH: doxorubicin (Adriamycin) and cyclophosphamide (Cytoxan) followed by paclitaxel (Taxol) and trastuzumab (Herceptin)

TCH: docetaxel (Taxotere), carboplatin (Paraplatin) and trastuzumab (Herceptin)

TH: paclitaxel (Taxol) and trastuzumab (Herceptin) **(Pathway for stage I HER2+ breast cancer only)**

*Adjuvant chemotherapy pathways do NOT apply to individuals with Hormone-Receptor positive, lymph node negative, OncotypeDX™ LOW risk score

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Breast Cancer Pathways: Advanced/Metastatic Disease

Patient Name: _____ Date of Birth: _____

Member Number: _____ Treatment Start Date: _____

ICD-10 Code: _____ Pathology: _____

Stage: __0 __IA __IB __IIA __IIB __IIIA __IIIB __IIIC __IV __Recurrent

Line of Treatment: __First Line __Second Line __Third Line __Third Line +

Estrogen Receptor: __Positive __Negative

Progesterone Receptor: __Positive __Negative

HER2 status: __Positive __Negative by __IHC __FISH

Menopausal Status: Pre / Peri / Post / NA (patient is male)

Metastatic disease | HER2 Negative | First and subsequent lines of therapy (1st line+)

- Capecitabine (Xeloda)
- Doxorubicin (Adriamycin)
- Gemcitabine (Gemzar)
- Paclitaxel (Taxol)
- Vinorelbine (Navelbine)

Metastatic disease | HER2 Positive | First line of therapy (1st line)

- Capecitabine (Xeloda) and trastuzumab (Herceptin)
- Gemcitabine (Gemzar) and trastuzumab (Herceptin)
- Paclitaxel (Taxol) and trastuzumab (Herceptin)
- Pertuzumab (Perjeta), trastuzumab (Herceptin), and docetaxel (Taxotere)
- Pertuzumab (Perjeta), trastuzumab (Herceptin), and paclitaxel (Taxol)
- Vinorelbine (Navelbine) and trastuzumab (Herceptin)

Metastatic disease | HER2 Positive | Second and subsequent lines of therapy (2nd line +)

- Ado-trastuzumab emtansine (Kadcyla)
- Capecitabine (Xeloda) and lapatinib (Tykerb)
- Capecitabine (Xeloda) and trastuzumab (Herceptin)
- Gemcitabine (Gemzar) and trastuzumab (Herceptin)
- Paclitaxel (Taxol) and trastuzumab (Herceptin)
- Pertuzumab (Perjeta), trastuzumab (Herceptin), and docetaxel (Taxotere)
- Pertuzumab (Perjeta), trastuzumab (Herceptin), and paclitaxel (Taxol)
- Trastuzumab (Herceptin) and lapatinib (Tykerb)
- Trastuzumab (Herceptin) monotherapy
- Vinorelbine (Navelbine) and trastuzumab (Herceptin)

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.



Breast Cancer Pathways: Endocrine Therapy for Recurrent or Metastatic Disease

Patient Name: _____ Date of Birth: _____

Member Number: _____ Treatment Start Date: _____

ICD-10 Code: _____ Pathology: _____

Stage: __0 __IA __IB __IIA __IIB __IIIA __IIIB __IIIC __IV __Recurrent

Line of Treatment: __First Line __Second Line __Third Line __Third Line+

Biomarkers:

Estrogen Receptor (ER): __Positive __Negative

Menopausal Status: Pre / Peri / Post / NA (patient is male)

Progesterone Receptor (PR): __Positive __Negative

- Pre-menopausal only: Include ovarian suppression: Yes/No/Unknown

HER2 status: __Positive __Negative by __ IHC __FISH

First line therapy (1st line) | Recurrent or Metastatic Disease | Hormone receptor positive

- Anastrozole (Arimidex)*
- Fulvestrant, high dose (Faslodex)*
- Letrozole (Femara)*
- Letrozole (Femara) and palbociclib (Ibrance)*
- Tamoxifen**

Second and subsequent lines of therapy (2nd line +) | Recurrent or Metastatic Disease | Hormone receptor positive

- Anastrozole (Arimidex)*
- Exemestane (Aromasin)*
- Fulvestrant, high dose* (Faslodex)
- Fulvestrant (Faslodex) and palbociclib* (Ibrance)
- Letrozole (Femara)*
- Tamoxifen**

First and subsequent lines of therapy (1st line +) | Recurrent or Metastatic Disease | Hormone receptor positive | HER2 positive

- Anastrozole (Arimidex) and trastuzumab (Herceptin)*
- Letrozole (Femara) and trastuzumab (Herceptin)*

* With ovarian suppression for premenopausal individuals. Ovarian suppression utilizes LHRH agonists given as monthly injections. 3-month depot dosing does not reliably suppress estrogen levels.

** Tamoxifen is considered Pathway for premenopausal individuals with or without ovarian suppression

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Chronic Myelogenous Leukemia (CML) Pathways

Patient Name: _____ Date of Birth: _____

Member Number: _____ Treatment Start Date: _____

ICD-10 Code: _____ Pathology: _____

Stage: New diagnosis or Relapse

Line of Treatment: First Line Second Line Third Line Third Line +

ECOG Performance Status: 0 1 2 3 4

Biomarkers:

CML Phase: Chronic Phase Accelerated Phase Lymphoid Blast Phase Myeloid Blast Phase Not Reported

Imatinib resistant or intolerant: Yes No

Philadelphia chromosome: Positive Negative

T315I: Positive Negative

Mutation: V299L T315I

First line of therapy (1st line)

Dasatinib* (Sprycel) for intermediate or high risk disease

Imatinib (Gleevec)

Nilotinib* (Tasigna) for intermediate or high risk disease

Second line of therapy (2nd line) | Following treatment failure, suboptimal response[†], or intolerance to first line therapy

Bosutinib (Bosulif)

Dasatinib (Sprycel)

Nilotinib (Tasigna)

Ponatinib[‡] (Iclusig)

Third line of therapy (3rd line)

Ponatinib (Iclusig)

* For patients with intermediate or high risk disease based on Sokal or Hasford Score:

- Sokal: Intermediate Risk=0.8-1.2; High Risk>1.2
- Hasford: Intermediate Risk=781-1480; High Risk>1480

[†] Defined as lack of complete hematologic response or BCR-ABL1 transcripts > 10% (IS) or lack of partial cytogenetic response on bone marrow cytogenetics.

[‡] Pathway option for second line therapy only after failure, suboptimal response, or intolerance of a second generation TKI has been used in the first line setting, or T315I mutation has been identified.

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.

Colorectal Cancer Pathways

Patient Name: _____ Date of Birth: _____

Member Number: _____ Treatment Start Date: _____

ICD-10 Code: _____ Pathology: _____

Stage: __0 __I __IIA __IIB __IIC __IIIA __IIIB __IIIC __IVA __IVB __ Recurrent

Line of Treatment: __Neoadjuvant/Pre-Op __ Adjuvant/Post-Op __First Line __Second Line __Third Line __Third Line+

ECOG Performance Status: __0 __1 __2 __3 __4

Biomarker:

RAS: __Wild type __Mutant

Adjuvant Therapy*

Capecitabine (Xeloda)

FLOX†: fluorouracil (5FU), leucovorin and oxaliplatin (Eloxatin)

FULV: fluorouracil (5FU) and leucovorin

Modified FOLFOX-6‡: fluorouracil (5FU), leucovorin and oxaliplatin (Eloxatin)

Metastatic disease | RAS Wild Type (WT) or Mutant (MT)‡ | 1st or 2nd line therapy

Capecitabine (Xeloda)

FOLFIRI: fluorouracil (5FU), leucovorin, and irinotecan (Camptosar)

FOLFIRI: fluorouracil (5FU), leucovorin, irinotecan (Camptosar), and bevacizumab (Avastin)

FOLFOXIRI: fluorouracil (5FU), leucovorin, irinotecan (Camptosar), oxaliplatin (Eloxatin), and bevacizumab (Avastin)

FULV: fluorouracil (5FU) and leucovorin

FULV: fluorouracil (5FU), leucovorin and bevacizumab (Avastin)

Modified FOLFOX-6: fluorouracil (5FU), leucovorin, and oxaliplatin (Eloxatin)

Modified FOLFOX-6: fluorouracil (5FU), leucovorin, oxaliplatin (Eloxatin), and bevacizumab (Avastin)

Metastatic disease | RAS WT | 2nd line

FOLFIRI: fluorouracil (5FU), leucovorin, irinotecan (Camptosar) and panitumumab (Vectibix)

Irinotecan (Camptosar) and panitumumab (Vectibix)

Metastatic disease | RAS WT or MT‡ | 3rd line+

Trifluridine + tipiracil (Lonsurf)

Metastatic disease | RAS WT | 3rd line+

Irinotecan (Camptosar) and panitumumab (Vectibix)

Panitumumab (Vectibix) monotherapy

*Patients with stage II MSI-H (microsatellite instability - high) colorectal cancer are not included in the Adjuvant Pathway.

†Dose & sequence of administration differ between modified FOLFOX-6 and FLOX

‡Exon 2 KRAS, non-exon 2 KRAS, and NRAS mutations



Gastric, Esophageal, and Gastroesophageal Junction Cancer (Adenocarcinoma) Pathways

Patient Name: _____ Date of Birth: _____

Member Number: _____ Treatment Start Date: _____

ICD-10 Code: _____ Pathology: _____

Stage: __0__IA__IB__IIA__IIB__IIIA__IIIB__IIIC__IV__Recurrent

Line of Treatment: __Neoadjuvant/Pre-Op__ Adjuvant/Post-Op __First Line __Second Line __Third Line __Third Line+

ECOG Performance Status: __0__1__2__3__4

Is the patient going to have surgery? __Yes__No

Is the patient going to have radiation? __Yes__No

Primary therapy | Resectable and unresectable disease

Cisplatin (Platinol) and fluorouracil (5FU)

Fluorouracil (5FU) and cisplatin (Platinol) with concurrent radiation therapy (RT)

Paclitaxel (Taxol) and carboplatin (Paraplatin) with concurrent radiation therapy (RT)

Post-operative treatment

Fluorouracil (5FU) and leucovorin with concurrent radiation therapy (RT)

Recurrent/metastatic or locally advanced/inoperable disease | HER2 Negative | First line of therapy (1st line)

Cisplatin (Platinol) and fluorouracil (5FU)

Fluorouracil (5FU) and irinotecan (Camptosar)

FLO / FOLFOX: fluorouracil (5FU), leucovorin, and oxaliplatin (Eloxatin)

FLP: fluorouracil (5FU), leucovorin, and cisplatin (Platinol)

Recurrent/metastatic or locally advanced/inoperable disease | HER2 Positive | First line of therapy (1st line)

Cisplatin (Platinol), fluorouracil (5FU), and trastuzumab (Herceptin)

Recurrent/metastatic or locally advanced/inoperable disease | Second line of therapy (2nd line)

Irinotecan (Camptosar)

Paclitaxel (Taxol)

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.



Head and Neck Cancer Pathways

Patient Name: _____ Date of Birth: _____

Member Number: _____ Treatment Start Date: _____

ICD-10 Code: _____ Pathology: _____

Stage: __0 __I __II __III __IVA __IVB __IVC __Recurrent

Line of Treatment: __Neoadjuvant/Pre-Op __ Adjuvant/Post-Op __First Line __Second Line __Second Line+

ECOG Performance Status: __ 0__ 1 __2 __3 __4

Hypopharynx and larynx: candidate for local therapy (M0) | Primary systemic therapy & concurrent radiation therapy (RT)

High dose cisplatin (Platinol) * with concurrent radiation therapy (RT)

Hypopharynx and larynx: candidate for local therapy (M0) | Post-operative systemic therapy & concurrent radiation therapy (RT)

High dose cisplatin (Platinol)* with concurrent radiation therapy (RT)

Lip, oral cavity, oropharynx, ethmoid sinus, maxillary sinus, occult primary: candidate for local therapy (M0) | Primary systemic therapy & concurrent radiation therapy (RT)

High dose cisplatin (Platinol)* with concurrent radiation therapy (RT), followed by adjuvant therapy

Lip, oral cavity, oropharynx, ethmoid sinus, maxillary sinus, occult primary : candidate for local therapy (M0) | Post-operative systemic therapy & concurrent radiation therapy (RT)

High dose cisplatin (Platinol)* with concurrent radiation therapy (RT)

Nasopharynx: candidate for local therapy (M0) | Primary systemic therapy & concurrent radiation therapy (RT) followed by adjuvant therapy

High dose cisplatin (Platinol)* with concurrent radiation therapy (RT), followed by adjuvant therapy

Nasopharynx | Metastatic and recurrent disease | First Line and subsequent lines of therapy (1st line+) | Performance Status 0,1,2

Cisplatin (Platinol)** and fluorouracil (5FU)

Cisplatin (Platinol)** and gemcitabine (Gemzar)

Cisplatin (Platinol)** and paclitaxel (Taxol)

Cisplatin (Platinol) or carboplatin (Paraplatin) (single agent)

Gemcitabine (Gemzar)

Methotrexate

Paclitaxel (Taxol)

*High dose cisplatin is defined as weekly dosing to achieve 200-300 mg/m² total cisplatin dose

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

Head and Neck Cancer Pathways

(Continued)

Non-Nasopharyngeal (Squamous cell) | Metastatic and recurrent disease | First Line | Performance Status 0,1,2

___ Carboplatin (Paraplatin), fluorouracil (5FU), and cetuximab (Erbix)

___ Cisplatin (Platinol), fluorouracil (5FU), and cetuximab (Erbix)

Non-nasopharyngeal (Squamous cell) | Metastatic and recurrent disease | Second Line and Subsequent lines of therapy | Performance Status 0,1,2

___ Fluorouracil (5FU)

___ Methotrexate

___ Nivolumab (Opdivo)

___ Paclitaxel (Taxol)

*High dose cisplatin is defined as weekly dosing to achieve 200-300 mg/m² total cisplatin dose

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



Hodgkin Lymphoma Pathways

Patient Name: _____ Date of Birth: _____

Member Number: _____ Treatment Start Date: _____

ICD-10 Code: _____ Pathology: _____

Stage: __0__ 0-E__ 0-X__ 0-XE__ IA__ IA-E__ IA-X__ IA-XE__ IB__ IB-E__ IB-X__ IB-XE__ IIA__ IIA-E__ IIA-X__ IIA-XE__ IIB__ IIB-E__ IIB-X__ IIB-XE__ IIIA__ IIIA-E__ IIIA-X__ IIIA-XE__ IIIB__ IIIB-E__ IIIB-X__ IIIB-XE__ IVA__ IVA-E__ IVA-X__ IVA-XE__ IVB__ IVB-E__ IVB-X__ IVB-XE__ NS
__Recurrent

Line of Treatment: __First Line__ Second Line__ Third Line__ Third Line+__ Maintenance

ECOG Performance Status: __0__ 1__ 2__ 3__ 4

Biomarker:

CD20 status: __Negative__ Positive__ Not reported

HIV associated lymphoma: __No__ Yes

__ Transplant candidate__ Non-transplant candidate

Classical Hodgkin | Early or Late Stage | with or without Radiation Therapy (RT)

__ABVD: doxorubicin (Adriamycin), bleomycin (Blenoxane), vinblastine (Velban), and dacarbazine (DTIC)

Kidney Cancer Pathways

Patient Name: _____ Date of Birth: _____

Member Number: _____ Treatment Start Date: _____

ICD-10 Code: _____ Pathology: _____

Stage: __0 __I __II __III __IV __Recurrent

Line of Treatment: __Adjuvant/Post-Op __First Line __Second Line __Third Line __Third Line +

ECOG Performance Status: __0__1__2__3__4

Biomarker:

Prior therapy: _____

Renal cancer risk*: __Poor risk __Intermediate risk __Good risk

Metastatic | First line therapy (1st line) | Clear Cell and Non-clear Cell

Pazopanib (Votrient)

Sunitinib (Sutent)

Temezirolimus (Torisel)

Metastatic | Second line therapy (2nd line) | Clear Cell

Axitinib (Inlyta)

Cabozantinib (Cabometyx)

Nivolumab (Opdivo)

Sorafenib (Nexavar)

*Risk factors (Good risk = no risk factors, Intermediate risk = 1 or 2 risk factors, Poor risk = 3 or more risk factors):

- High lactate dehydrogenase (LDH) level, greater than 1.5 times the upper limit of normal
- High blood calcium level, corrected level greater than 10 mg/dL
- Anemia
- 2 or more sites of organ metastasis
- Less than a year from original diagnosis to the need for systemic treatment
- Karnofsky performance status less than or equal to 70 (at least able to perform self-care activities, up and about greater than 50% of waking hours)



Lung Cancer: Non-Small Cell Pathways

Patient Name: _____ Date of Birth: _____

Member Number: _____ Treatment Start Date: _____

ICD-10 Code: _____ Pathology: _____

Stage: __IA__IB__IIA__IIB__IIIA__IIIB__IV__ Recurrent

Line of Treatment: __ Neoadjuvant/Pre-Op __ Adjuvant/Post-Op __ First Line __ Second Line __ Third Line __ Third Line+ __ Maintenance

ECOG Performance Status: __ 0 __ 1 __ 2 __ 3 __ 4

Biomarker:

ALK status: __ Positive __ Negative __ Not reported

EGFR: __ Mutation __ Wild type __ Not reported

BRAF: __ V600E Mutation __ V600K Mutation __ Wild type __ Not reported

MET amplification: __ Positive __ Negative __ Not reported

RET gene rearrangement: __ Absent __ Present __ Not reported

ROS1 rearrangement: __ Positive __ Negative __ Not reported

Adjuvant Therapy

Cisplatin (Platinol) and vinorelbine (Navelbine)

Gemcitabine (Gemzar) and cisplatin (Platinol)

Paclitaxel (Taxol) and carboplatin (Paraplatin)

Primary Therapy for Locally Advanced/Unresectable | Stage III

Paclitaxel (Taxol) (Q3Wks) and carboplatin (Paraplatin) with XRT

Metastatic disease | ALK+ or ROS1+ | First line (1st line)

Crizotinib (Xalkori)

Metastatic disease | EGFR+ | First line (1st line)

Afatinib (Gilotrif)

Erlotinib (Tarceva)

Metastatic disease | Non-squamous | ECOG PS: 0, 1, 2 | First line (1st line)

Carboplatin* (Paraplatin) and paclitaxel (Taxol)

Cisplatin* (Platinol) and gemcitabine (Gemzar)

Cisplatin* (Platinol) and pemetrexed (Alimta)

Paclitaxel (Taxol) and carboplatin (Paraplatin) and bevacizumab (Avastin)

*Substitution of carboplatin (Paraplatin) for cisplatin (Platinol), and vice-versa, is allowed

** For patients with EGFR T790M mutation



Lung Cancer: Non-small Cell Pathways

(continued)

Metastatic disease | Squamous | ECOG PS: 0, 1, 2 | First line (1st line)

__ Carboplatin* (Paraplatin) and paclitaxel (Taxol)

__ Cisplatin* (Platinol) and gemcitabine (Gemzar)

Metastatic disease | PD-L1 Positive | First Line (1st line)

__ Pembrolizumab (Keytruda)

Metastatic disease | Non-squamous | ECOG PS: 0, 1, 2 | Maintenance

__ Continuation bevacizumab (Avastin)

__ Continuation pemetrexed (Alimta)

__ Switch pemetrexed (Alimta)

Metastatic disease | ALK+ or EGFR+ | ECOG PS: 0, 1, 2 | Second line (2nd line) after targeted 1st line therapy

__ Carboplatin* (Paraplatin) and paclitaxel (Taxol)

__ Cisplatin* (Platinol) and gemcitabine (Gemzar)

__ Cisplatin* (Platinol) and pemetrexed (Alimta)

Metastatic disease | EGFR T790M mutation | Second line (2nd line) after targeted 1st line therapy

__ Osimertinib (Tagrisso)

Metastatic disease | Non-squamous | ECOG PS: 0, 1, 2 | Second line (2nd line)

__ Docetaxel (Taxotere)

__ Nivolumab (Opdivo)

__ Pemetrexed (Alimta)

Metastatic disease | Squamous | ECOG PS: 0, 1, 2 | Second line (2nd line)

__ Nivolumab (Opdivo)

*Substitution of carboplatin (Paraplatin) for cisplatin (Platinol), and vice-versa, is allowed

** For patients with EGFR T790M mutation



Lung Cancer: Small Cell Lung Cancer Pathways

Patient Name: _____ Date of Birth: _____

Member Number: _____ Treatment Start Date: _____

ICD-10 Code: _____ Pathology: _____

Stage: IA IB IIA IIB IIIA IIIB IV Recurrent

Line of Treatment: Neoadjuvant/Pre-Op Adjuvant/Post-Op First Line Second Line Third Line Third Line+ Maintenance

ECOG Performance Status: 0 1 2 3 4

Biomarker:

ALK status: Positive Negative Not reported

EGFR: Mutation Wild type Not reported

BRAF: V600E Mutation V600K Mutation Wild type Not reported

MET amplification: Positive Negative Not reported

RET gene rearrangement: Absent Present Not reported

ROS1 rearrangement: Positive Negative Not reported

Limited Stage | Primary, Adjuvant, or First Line Therapy (1st line)

Carboplatin (Paraplatin) and etoposide (Toposar) ± XRT

Cisplatin (Platinol) and etoposide (Toposar) ± XRT

Extensive Stage | First line of therapy (1st line)

Carboplatin (Paraplatin) and etoposide (Toposar)

Second and subsequent lines of therapy (2nd line +) | Relapse less than 6 months

Carboplatin (Paraplatin) and etoposide (Toposar)

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.



Melanoma Pathways: Metastatic Melanoma

Patient Name: _____ Date of Birth: _____

Member Number: _____ Treatment Start Date: _____

ICD-10 Code: _____ Pathology: _____

Stage: 0 IA IB IIA IIB IIC III IV Recurrent

Line of Treatment: Adjuvant/Post-Op First Line Second Line Third Line Third Line +

ECOG Performance Status: 0 1 2 3 4

Biomarkers:

BRAF* status: V600E Mutation positive V600K Mutation positive Wild Type (no mutation) Not Reported

c-kit status: Exon 11 Mutation Present Exon 9 Mutation Present No Mutation Not Reported

Metastatic disease | First and subsequent lines of therapy (1st line +) | Any BRAF status | ECOG PS: 0, 1, 2

Pembrolizumab (Keytruda)*

Metastatic disease | First line of therapy (1st line) | BRAF mutated † | Symptomatic disease | ECOG PS: 0, 1, 2

Vemurafenib (Zelboraf) and cobimetinib (Cotellic)

Metastatic disease | Second and subsequent lines of therapy (2nd line +) | BRAF mutated † | ECOG PS: 0, 1, 2

Vemurafenib (Zelboraf) and cobimetinib (Cotellic)

Metastatic disease | Second and subsequent lines of therapy (2nd line +) | Any BRAF status | ECOG PS: 0, 1, 2

Ipilimumab (Yervoy)

* Administered at a dose of 2 mg/kg (up to a maximum of 200 mg).

† BRAF mutations include V600E and V600K mutations.

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Myeloma Pathways: Multiple Myeloma

Patient Name: _____ Date of Birth: _____

Member Number: _____ Treatment Start Date: _____

ICD-10 Code: _____ Pathology: _____

Stage: New diagnosis Relapse

Line of Treatment: First Line Second Line Third Line Third Line+ Maintenance

ECOG Performance Status: 0 1 2 3 4

Biomarker:

Transplant candidate Non-transplant candidate

Primary/ First line of therapy (1st line) | Transplant candidates

VRD/VDR: bortezomib (Velcade), lenalidomide (Revlimid), and dexamethasone

Primary/ First line of therapy (1st line) | Ineligible for transplant

CyBORd or VDC: bortezomib (Velcade), cyclophosphamide (Cytoxan), and dexamethasone

R-dex: lenalidomide (Revlimid) and low-dose dexamethasone

VRD/VDR: bortezomib (Velcade), lenalidomide (Revlimid) and dexamethasone

VD: bortezomib (Velcade) and dexamethasone

Maintenance therapy | Post-transplant

Lenalidomide (Revlimid)

Relapsed disease | Second and subsequent lines of therapy (2nd line+)

CRd or KRd: carfilzomib (Kyprolis), lenalidomide (Revlimid) and dexamethasone

DRD: daratumumab (Darzalex), lenalidomide (Revlimid), and dexamethasone

DVD: daratumumab (Darzalex), bortezomib (Velcade), and dexamethasone

Relapsed disease | Third and subsequent lines of therapy (3rd line+)

Daratumumab (Darzalex)

Elotuzumab (Empliciti), lenalidomide (Revlimid), and dexamethasone

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.

NHL: Chronic Lymphocytic Leukemia (CLL)/Small Lymphocytic Lymphoma (SLL) Pathways

Patient Name: _____ Date of Birth: _____

Member Number: _____ Treatment Start Date: _____

ICD-10 Code: _____ Pathology: _____

Lymphoma Stage: __0 __0-E __0-X __0-XE __IA __IA-E __IA-X __IA-XE __IB __IB-E __IB-X __IB-XE __IIA __IIA-E __IIA-X __IIA-XE __IIB __IIB-E __IIB-X __IIB-XE __IIIA __IIIA-E __IIIA-X __IIIA-XE __IIIB __IIIB-E __IIIB-X __IIIB-XE __IVA __IVA-E __IVA-X __IVA-XE __IVB __IVB-E __IVB-X __IVB-XE __NS __Recurrent

Leukemia Stage: __NS (No stage) __Recurrent

Line of Treatment: __First Line __Second Line __Third Line __Third Line+ __Maintenance

ECOG Performance Status: __0 __1 __2 __3 __4

Biomarkers:

11q deletion: __Absent __Present

17p deletion: __Absent __Present

CD20 Status: __Negative __Positive

TP53 Status: __Mutation Absent __Mutation Present

First Line Therapy (1st line) | with 17p Deletion

Ibrutinib (Imbruvica)

First Line Therapy (1st line) | without 17p Deletion

FCR: fludarabine (Fludara), cyclophosphamide (Cytoxan), and rituximab (Rituxan)

Ibrutinib (Imbruvica)

Obinutuzumab (Gazyva) and chlorambucil (Leukeran)

Second and subsequent lines of therapy (2nd line +) | with 17p Deletion

Ibrutinib (Imbruvica)

Idelalisib (Zydelig)

Idelalisib (Zydelig) and rituximab (Rituxan)

Second and subsequent lines of therapy (2nd line +) | without 17p Deletion or Unspecified

FCR: fludarabine (Fludara), cyclophosphamide (Cytoxan), and rituximab (Rituxan)

Ibrutinib (Imbruvica)

Idelalisib (Zydelig)

Idelalisib (Zydelig) and rituximab (Rituxan)

Rituximab (Rituxan) and bendamustine (Bendeka, Treanda)



NHL: Diffuse Large B-Cell Lymphoma Pathways

Patient Name: _____ Date of Birth: _____

Member Number: _____ Treatment Start Date: _____

ICD-10 Code: _____ Pathology: _____

Stage: __0 __0-E __0-X __0-XE __IA __IA-E __IA-X __IA-XE __IB __IB-E __IB-X __IB-XE __IIA __IIA-E __IIA-X __IIA-XE __IIB __IIB-E __IIB-X __IIB-XE __IIIA __IIIA-E __IIIA-X __IIIA-XE __IIIB __IIIB-E __IIIB-X __IIIB-XE __IVA __IVA-E __IVA-X __IVA-XE __IVB __IVB-E __IVB-X __IVB-XE __NS
__Recurrent

Line of Treatment: __First Line __Second Line __Third Line __Third Line+ __Maintenance

ECOG Performance Status: __0 __1 __2 __3 __4

Biomarker:

CD20 status: __Negative __Positive

HIV associated lymphoma: __No __Yes

__ Transplant candidate __ Non-transplant candidate

First line of therapy (1st line)

__**R-CHOP (21)**: cyclophosphamide, doxorubicin (Adriamycin), vincristine (Vincasar), prednisone, and rituximab (Rituxan)

First line of therapy (1st line) | Contraindication to anthracycline

__**R-CEOP**: cyclophosphamide, etoposide (Toposar), vincristine (Vincasar), prednisone, and rituximab (Rituxan)

Second and subsequent lines of therapy (2nd line+) | Transplant candidates

__**R-GDP**: gemcitabine (Gemzar), dexamethasone, cisplatin, and rituximab (Rituxan) **OR**

__**R-GDP**: gemcitabine (Gemzar), dexamethasone, carboplatin, and rituximab (Rituxan)

__**R-ICE**: ifosfamide (Ifex), carboplatin, etoposide (Toposar), and rituximab (Rituxan)

Second and subsequent lines of therapy (2nd line +) | Non-Transplant candidates

__**BR**: bendamustine (Bendeka, Treanda) and Rituximab (Rituxan)

__**R-GDP**: gemcitabine (Gemzar), dexamethasone, cisplatin, and rituximab (Rituxan) **OR**

__**R-GDP**: gemcitabine (Gemzar), dexamethasone, carboplatin, and rituximab (Rituxan)

__**R-GemOx**: gemcitabine (Gemzar), oxaliplatin, and rituximab (Rituxan)

__Rituximab (Rituxan) monotherapy **reserved for frail patients or elderly patients**

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.

NHL: Follicular and Marginal Zone Lymphoma Pathways

Patient Name: _____ Date of Birth: _____

Member Number: _____ Treatment Start Date: _____

ICD-10 Code: _____ Pathology: _____

Stage: __0 __0-E __0-X __0-XE __IA __IA-E __IA-X __IA-XE __IB __IB-E __IB-X __IB-XE __IIA __IIA-E __IIA-X __IIA-XE __IIB __IIB-E __IIB-X __IIB-XE __IIIA __IIIA-E __IIIA-X __IIIA-XE __IIIB __IIIB-E __IIIB-X __IIIB-XE __IVA __IVA-E __IVA-X __IVA-XE __IVB __IVB-E __IVB-X __IVB-XE __NS
__Recurrent

Line of Treatment: __First Line __Second Line __Third Line __Third Line+ __Maintenance

ECOG Performance Status: __0 __1 __2 __3 __4

Biomarkers:

CD20 Status: __Positive __Negative

__ Transplant candidate __ Non-transplant candidate

Gastric MALT (Mucosa-associated Lymphoid Tissue) Lymphoma: Stage IE or IIE, *H. pylori* positive*

__ Antibiotic therapy for *H. pylori* eradication

Splenic Marginal Zone Lymphoma † OR Gastric MALT Lymphoma: First line of therapy (1st line)

__ Rituximab (Rituxan) monotherapy

Follicular (Grade I-IIIa) Lymphoma and other Marginal Zone Lymphomas | First line of therapy (1st line)

__ BR: Bendamustine (Bendeke, Treanda) and rituximab (Rituxan)

__ R-CHOP(21): Cyclophosphamide, doxorubicin (Adriamycin), vincristine (Vincasar), prednisone, and rituximab (Rituxan)

__ R-CVP: Cyclophosphamide, vincristine (Vincasar), prednisone, and rituximab (Rituxan)

__ Rituximab (Rituxan) monotherapy

Follicular Lymphoma and other Marginal Zone Lymphomas | First line of therapy (1st line) | Additional options for the elderly or infirm

__ Chlorambucil (Leukeran)

__ Chlorambucil (Leukeran) and rituximab (Rituxan)

__ Cyclophosphamide

__ Cyclophosphamide and rituximab (Rituxan)

Follicular Lymphoma (Grade III) | First line of therapy (1st line)

__ R-CHOP(21): Cyclophosphamide, doxorubicin (Adriamycin), vincristine (Vincasar), prednisone, and rituximab (Rituxan)

__ R-CEOP: Cyclophosphamide, etoposide (Toposar), vincristine (Vincasar), prednisone, and rituximab (Rituxan)

*Gastric MALT with translocation 11;18 (t11;18) (q21;q21) predicts a lower response rate to anti-*H. pylori* treatment. Radiation therapy or other local intervention may be indicated.

†Splenectomy is also a recommended option for Splenic Marginal Zone Lymphoma (NCCN 2A).

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.



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NHL: Mantle Cell Lymphoma Pathways

Patient Name: _____ Date of Birth: _____

Member Number: _____ Treatment Start Date: _____

ICD-10 Code: _____ Pathology: _____

Stage: __0__0-E__0-X__0-XE__IA__IA-E__IA-X__IA-XE__IB__IB-E__IB-X__IB-XE__IIA__IIA-E__IIA_X__IIA-XE__IIB__IIB-E__IIB-X__IIB-XE__IIIA__IIIA-E__IIIA-X__IIIA-XE__IIIB__IIIB-E__IIIB-X__IIIB-XE__IVA__IVA-E__IVA-X__IVA-XE__IVB__IVB-E__IVB-X__IVB-XE__NS
__Recurrent

Line of Treatment: __First Line__Second Line__Third Line__Third Line+__Maintenance

ECOG Performance Status: __0__1__2__3__4

Biomarker:

CD20 status: __Negative__Positive__Not reported

HIV associated lymphoma: __No__Yes

__Transplant candidate__Non-transplant candidate

First Line Therapy | Transplant Candidate

__**Alternating R-CHOP/R-DHAP:** cyclophosphamide (Cytoxan), doxorubicin (Adriamycin), vincristine (Vincasar), prednisone, rituximab (Rituxan) alternating with dexamethasone, cisplatin (Platinol), cytarabine (Cytosar-U), and rituximab (Rituxan)

__**Nordic Regimen:** dose-intensified rituximab (Rituxan), cyclophosphamide (Cytoxan), vincristine (Vincasar), doxorubicin (Adriamycin), prednisone, alternating with rituximab (Rituxan), and high-dose cytarabine (Cytosar-U)

First Line Therapy | Ineligible for transplant (not ASCT Candidate)

__Bendamustine (Bendeka, Treanda) and rituximab (Rituxan)

Second and Subsequent Lines of Therapy

__Bendamustine (Bendeka, Treanda) and rituximab (Rituxan)

__Bortezomib (Velcade)

__**FCMR:** fludarabine (Fludara), cyclophosphamide (Cytoxan), mitoxantrone (Novantrone), and rituximab (Rituxan)

__Ibrutinib (Imbruvica)

__Lenalidomide (Revlimid) *

* Following **two** prior therapies, including bortezomib

Ovarian Cancer Pathways

Patient Name: _____ Date of Birth: _____

Member Number: _____ Treatment Start Date: _____

ICD-10 Code: _____ Pathology: _____

Stage: I IA IB IIA IIB IIC IIIA IIIB IIIC IV Recurrent

Line of Treatment: Neoadjuvant/Pre-Op Adjuvant/Post-Op First Line Second Line Third Line Third Line+ Maintenance

ECOG Performance Status: 0 1 2 3 4

Biomarkers:

Germline BRCA 1? Mutation Present Not Reported Wild Type (mutation absent)

Germline BRCA 2? Mutation Present Not Reported Wild Type (mutation absent)

Platinum sensitive? † Yes No Not Reported

Platinum-refractory or resistant? Yes No Not Reported

Adjuvant Therapy | Stage IA/B (Grade 2 or 3) or IC (Grade 1-3)

Carboplatin (Paraplatin)* and paclitaxel (Taxol)

Carboplatin (Paraplatin)* and dose dense paclitaxel (Taxol)

Adjuvant or primary Therapy | Stage II, III, IV

IV paclitaxel (Taxol), Intraperitoneal (IP) cisplatin (Platinol) and IP paclitaxel (Taxol)

Carboplatin (Paraplatin)* and paclitaxel (Taxol)

Carboplatin (Paraplatin)* and dose dense paclitaxel (Taxol)

Recurrent Disease | First or subsequent line of therapy (1st line+) | Platinum-sensitive†

Carboplatin (Paraplatin)* and paclitaxel (Taxol)

Carboplatin (Paraplatin)* and weekly paclitaxel (Taxol)

Carboplatin (Paraplatin) and gemcitabine (Gemzar)

Cisplatin (Platinol) and gemcitabine (Gemzar)

Recurrent Disease | Second or subsequent line of therapy (2nd line+) | Platinum resistant

Bevacizumab (Avastin)

Bevacizumab (Avastin) and paclitaxel (Taxol)

Bevacizumab (Avastin) and topotecan (Hycamtin)

Docetaxel (Taxotere)

Gemcitabine (Gemzar)

Liposomal doxorubicin (Doxil or Lipodox)

Topotecan (Hycamtin)

Vinorelbine (Navelbine)

Weekly paclitaxel (Taxol)

*Substitution of carboplatin (Paraplatin) for cisplatin (Platinol), and vice-versa, is allowed.

†Platinum sensitive is defined as recurrence >6 months after prior platinum-based therapy



Pancreatic Cancer (Adenocarcinoma) Pathways

Patient Name: _____ Date of Birth: _____

Member Number: _____ Treatment Start Date: _____

ICD-10 Code: _____ Pathology: _____

Stage: __0 __IA __IB __IIA __IIB __III __IV __Recurrent

Line of Treatment: __ Neoadjuvant/Pre-Op __ Adjuvant/Post-Op __ First Line __ Second Line __ Third Line __ Third Line+

ECOG Performance Status: __ 0 __ 1 __ 2 __ 3 __ 4

Adjuvant Therapy

Capecitabine (Xeloda) and gemcitabine (Gemzar)

FULV : fluorouracil (5FU) and leucovorin

Gemcitabine (Gemzar) monotherapy

Locally Advanced/Unresectable and Metastatic Disease | First line of therapy (1st line) | ECOG Performance Status (PS) : 0, 1, 2

FOLFIRINOX: fluorouracil (5FU), leucovorin, irinotecan (Camptosar), and oxaliplatin

Gemcitabine (Gemzar)

Gemcitabine (Gemzar) and nab-paclitaxel (Abraxane)

Locally Advanced/Unresectable and Metastatic Disease | Second line of therapy (2nd line) | ECOG Performance Status (PS) : 0, 1, 2

OFF: Fluorouracil (5FU), leucovorin, and oxaliplatin

Gemcitabine (Gemzar) monotherapy

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.



Prostate Cancer (Adenocarcinoma) Pathways

Patient Name: _____ Date of Birth: _____

Member Number: _____ Treatment Start Date: _____

ICD-10 Code: _____ Pathology: _____

Stage: I IIA IIB III IV Recurrent

Line of Treatment: Neoadjuvant/Pre-Op Adjuvant/Post-Op First Line Second Line Third Line Third Line+

ECOG Performance Status: 0 1 2 3 4

Biomarkers:

Castration-resistant: Yes No

Prostate Cancer Recurrence Risk: Very Low Low Intermediate High Very High

Adjuvant Therapy | Post-prostatectomy | Lymph node positive (LN+)

Goserelin (Zoladex) 3.6 mg monthly or 10.8 mg q 3 mos. ¹⁻²

Leuprolide (Eligard/Lupron) 7.5mg q mos. or 22.5 mg q 3 mos. or 30mg q 4 mos. or 45mg q 6 mos. ¹⁻²

Triptorelin (Trelstar) 3.75 mg q mos. or 11.25 mg q 3 mos. or 22.5 q 6 mos. ¹⁻²

Intermediate risk | Primary treatment with radiation therapy (RT)

Goserelin* (Zoladex)* 3.6 mg monthly or 10.8 mg q 3 mos. ^{3,5}

Leuprolide (Eligard/Lupron)* 7.5mg q mos. or 22.5 mg q 3 mos. or 30mg q 4 mos. or 45mg q 6 mos. ^{3,5}

Triptorelin (Trelstar)* 3.75 mg q mos. or 11.25 mg q 3 mos. or 22.5 q 6 mos. ^{3,5}

High Risk (T3a or Gleason 8-10), Very High Risk (T3b-T4), and Locally Advanced Prostate Cancer (LN+) | Primary treatment with radiation therapy (RT)

Goserelin (Zoladex)* ⁴

Histrelin (Vantas)* ⁴

Leuprolide (Eligard/Lupron)* ⁴

Triptorelin (Trelstar)* ⁴

Recurrent and Metastatic disease | Hormone Sensitive

Docetaxel (Taxotere)** (q 3 wks) with Androgen Deprivation Therapy (ADT) ¹⁸

Goserelin (Zoladex)** ⁶

Histrelin (Vantas)** ⁶

Leuprolide (Eligard/Lupron) ** ⁶

Triptorelin (Trelstar)** ⁶

*May be coadministered with bicalutamide (Casodex) or flutamide (Eulexin) for up to 30 days in patients who are at risk of developing symptoms associated with testosterone flare.

**ADT: histrelin (Vantas), goserelin (Zoladex), leuprolide (Eligard/Lupron), triptorelin (Trelstar)



Prostate Cancer (Adenocarcinoma) Pathways (continued)

Recurrent and Metastatic Disease | Hormone Resistant | First and subsequent lines of therapy (1st Line+)

Abiraterone (Zytiga)** with continue ADT ^{8,12}

Degarelix (Firmagon) with bicalutamide (Casodex)⁷

Docetaxel (Taxotere)** (q3 wks) with continue ADT ^{10,18}

Goserelin (Zoladex) with bicalutamide (Casodex) ^{6,7}

Leuprolide (Eligard/Lupron) with bicalutamide (Casodex) ^{6,7}

Triptorelin (Trelstar) with bicalutamide (Casodex) ^{6,7}

Recurrent and Metastatic Disease | Hormone Resistant | Second and subsequent lines of therapy (2nd Line +)

Cabazitaxel (Jevtana)** with ADT ¹¹

Docetaxel (Taxotere)** rechallenge with ADT ²⁰⁻²¹

Enzalutamide (Xtandi)** with ADT ¹⁵

Continued ADT ** with supportive care ± dexamethasone ^{13-14,22-24}

*May be coadministered with bicalutamide (Casodex) or flutamide (Eulexin) for up to 30 days in patients who are at risk of developing symptoms associated with testosterone flare.

**ADT: histrelin (Vantas), goserelin (Zoladex), leuprolide (Eligard/Lupron), triptorelin (Trelstar)



Testicular (Germ Cell) Cancer Pathways

Patient Name: _____ Date of Birth: _____

Member Number: _____ Treatment Start Date: _____

ICD-10 Code: _____ Pathology: _____

Stage: I IA IB IIA IIB IIC IIIA IIIB IIIC IV Recurrent

Line of Treatment: Neoadjuvant/Pre-Op Adjuvant/Post-Op First Line Second Line Third Line Third Line+ Maintenance

ECOG Performance Status: 0 1 2 3 4

Biomarkers:

Platinum-refractory or resistant? Yes No Not Reported

Seminoma | Stage II-III A | Primary Therapy

BEP: bleomycin, etoposide (Toposar), and cisplatin

EP: etoposide (Toposar) and cisplatin

Seminoma | Stage IIIB-C | Good Risk | and Metastatic Disease

BEP: bleomycin, etoposide (Toposar), and cisplatin

Nonseminoma | Stage II-III A | Primary Therapy

BEP: bleomycin, etoposide (Toposar), and cisplatin

EP: etoposide (Toposar) and cisplatin

Nonseminoma | Stage IIIB-C | Primary Therapy

BEP: bleomycin, etoposide (Toposar), and cisplatin

Nonseminoma | Adjuvant Therapy after RPLND*

EP: etoposide (Toposar) and cisplatin

*RPLND: Retroperitoneal Lymph Node Dissection



Uterine Cancer Pathways

Patient Name: _____ Date of Birth: _____

Member Number: _____ Treatment Start Date: _____

ICD-10 Code: _____ Pathology: _____

Stage: I IA IB IIA IIB IIC IIIA IIIB IIIC IV Recurrent

Line of Treatment: Neoadjuvant/Pre-Op Adjuvant/Post-Op First Line Second Line Third Line Third Line+ Maintenance

ECOG Performance Status: 0 1 2 3 4

Biomarkers:

Estrogen Receptor: Positive Negative

Progesterone Receptor: Positive Negative

Adjuvant Therapy | Stage III-IV or High Risk Histologies

Carboplatin and paclitaxel

Recurrent / Metastatic | First and Subsequent Lines of Therapy (1st line +)

Carboplatin and paclitaxel

Cisplatin and doxorubicin (Adriamycin)

