

# NHL: Diffuse Large B-Cell Lymphoma Pathways

Patient Name: \_\_\_\_\_ Date of Birth: \_\_\_\_\_

Member Number: \_\_\_\_\_ Treatment Start Date: \_\_\_\_\_

Pathology: \_\_\_\_\_ Stage: \_\_\_\_\_

Line of Therapy: \_\_1<sup>st</sup> Line \_\_2<sup>nd</sup> Line \_\_3<sup>rd</sup> Line \_\_3<sup>rd</sup> Line+ \_\_Maint ECOG Performance Status: \_\_\_\_\_ ICD-10 Code: \_\_\_\_\_

Biomarkers/Characteristics: (select all that apply)

CD20 status: \_\_Negative \_\_Positive HIV associated lymphoma: \_\_No \_\_Yes Transplant Candidate: \_\_No \_\_Yes

## First Line of Therapy (1<sup>st</sup> Line)

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

## First Line of Therapy (1<sup>st</sup> Line) | Contraindication to Anthracycline

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

## Second and Subsequent Lines of Therapy (2<sup>nd</sup> Line+) | Transplant Candidates

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

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

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

## Second Line of Therapy (2<sup>nd</sup> Line) | Non-Transplant Candidates

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

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

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

**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. Biosimilars or alternate formulations (along with the reference products) are considered on pathway unless otherwise specified by health plan formularies, medical policies, or preferred product rules.**



8600 West Bryn Mawr Avenue  
South Tower - Suite 800 Chicago, IL 60631  
[www.aimspecialtyhealth.com](http://www.aimspecialtyhealth.com)

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