

# Uterine Cancer Pathways

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

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

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

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

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 (1<sup>st</sup> Line+)

Carboplatin and paclitaxel

Cisplatin and doxorubicin (Adriamycin)

**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.**



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