

# Colorectal Cancer Pathways

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

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

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

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

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

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

**Line of Therapy:** \_\_Adjuvant/Post-Op \_\_1<sup>st</sup> Line \_\_2<sup>nd</sup> Line  
\_\_3<sup>rd</sup> Line \_\_3<sup>rd</sup> Line+

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

**Biomarkers/Characteristics:** (select all that apply)

k-ras genotype: \_\_Wild Type(WT) \_\_Mutant(MT)

Microsatellite instability: \_\_dMMR/MSI-H \_\_MSI-L \_\_Not reported

n-ras genotype: \_\_Wild Type(WT) \_\_Mutant(MT)

NTRK Fusion: \_\_Positive \_\_Negative \_\_Not Reported

BRAF status: \_\_Wild Type(WT) \_\_V600E Mutation \_\_V600K Mutation

## Adjuvant Therapy | Limited to Colon Cancer Only

\_\_\_Capecitabine (Xeloda)\*

\_\_\_**CAPOX:** capecitabine (Xeloda) and oxaliplatin (limited to 3 months duration)†

\_\_\_**FOLFOX:** fluorouracil (5-FU), leucovorin, and oxaliplatin

\_\_\_**FULV:** fluorouracil (5FU) and leucovorin\*

## Metastatic Disease | RAS Wild Type (WT) or Mutant (MT)‡ | First or Second Lines of Therapy (1<sup>st</sup> or 2<sup>nd</sup> Line)

\_\_\_Capecitabine (Xeloda)

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

\_\_\_**FOLFIRI + bevacizumab:** fluorouracil (5FU), leucovorin, and irinotecan (Camptosar) with bevacizumab

\_\_\_**FOLFOX:** fluorouracil (5FU), leucovorin, and oxaliplatin

\_\_\_**FOLFOX + bevacizumab:** fluorouracil (5FU), leucovorin, oxaliplatin, with bevacizumab¶

\_\_\_**FOLFOXIRI + bevacizumab:** fluorouracil (5FU), leucovorin, oxaliplatin, and irinotecan (Camptosar) with bevacizumab

\_\_\_**FULV:** fluorouracil (5FU) and leucovorin

\_\_\_**FULV + bevacizumab:** fluorouracil (5FU) and leucovorin with bevacizumab

## Metastatic Disease | RAS Wild Type (WT) | First or Second Lines of Therapy (1<sup>st</sup> or 2<sup>nd</sup> Line)

\_\_\_**FOLFIRI + panitumumab:** fluorouracil (5FU), leucovorin, and irinotecan (Camptosar) with panitumumab (Vectibix)§

\_\_\_**FOLFOX + panitumumab:** fluorouracil (5-FU), leucovorin, and oxaliplatin with panitumumab (Vectibix)§

\_\_\_Irinotecan (Camptosar) and panitumumab (Vectibix)§

## Metastatic Disease | MSI-H or dMMR | First or Second Lines of Therapy (1<sup>st</sup> or 2<sup>nd</sup> Line)

\_\_\_Pembrolizumab (Keytruda)||

\* These adjuvant pathways do not apply to patients with MSI-H (microsatellite instability-high) disease

† Limited to low-risk (T1-3, N1), stage III colon cancer only

‡ Exon 2 KRAS, non-exon 2 KRAS, and NRAS mutations; testing recommended for all patients with metastatic disease

§ Limit to one line of therapy

|| Administered at a dose of 200 mg every 3 weeks OR 400 mg every 6 weeks per the FDA label OR 2 mg/kg (up to a maximum of 200 mg) every 3 weeks, as clinically appropriate

¶ Bevacizumab administered at a dose of 5mg/kg

**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 of reference products listed are considered "on pathway." However, reimbursement for biosimilar products may be impacted by health plan specific formularies, medical policy and preferred product rules.**



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