

# Ovarian Cancer (Epithelial) 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+ \_\_Maintenance

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

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

Paclitaxel-resistant: \_\_Yes \_\_No

Platinum Sensitive\*: \_\_Yes \_\_No \_\_Not Reported

Platinum Refractory/Resistant: \_\_Yes \_\_No \_\_Not Reported

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

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

BRCA1 Status: \_\_Germline Mutation \_\_Wild Type (no mutation) \_\_Somatic Mutation \_\_Not Reported

BRCA2 Status: \_\_Germline Mutation \_\_Wild Type (no mutation) \_\_Somatic Mutation \_\_Not 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 paclitaxel (**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)

Olaparib (Lynparza)

Rucaparib (Rubraca)

## 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) and bevacizumab (Avastin)

Vinorelbine (Navelbine)

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

**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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Last review: 7/28/2020 | Effective date: 11/18/2019

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9018-0720