

# May 2025 Content Release Notes

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# Clinical Profile Documentation

## Problem Groups

### Additions

The **Problems > Add Details** area is updated with applicable documentation points for the following diagnoses.

**FOLR1 expression** has been updated for **Fallopian Tube Cancer** and **Ovarian and Primary Peritoneal Cancer** with the following documentation points:

- 2+ intensity AND  $\geq 75\%$
- 2+ intensity AND 50% - 74%
- 2+ intensity AND 25% - 49%
- <2+ intensity OR <25%
- Unknown

**NRAS status** has been updated for **Appendix Cancer, Carcinoma, Colon Cancer, Melanoma Skin, and Rectal cancers** with the following documentation points:

- Wild type
- Mutation
- Unknown

**PD-L1 status** has been updated for **Bladder Cancer** with the following documentation points:

- Positive ( $\geq 5\%$ )
- Negative
- Unknown

**PD-L1 status** has been updated for **Breast Cancer** with the following documentation points:

- Positive (CPS  $\geq 10$ )
- Negative
- Unknown

**PD-L1 status** has been updated for **Cervical Cancer** and **Head and Neck Cancer (Parent)** with the following documentation points:

- Positive (CPS  $\geq 1$ )

- Negative
- Unknown

**PD-L1 status** has been updated for **Esophageal Cancer (Parent)** and **Gastric Cancer** with the following documentation points:

- CPS  $\geq$  10
- CPS 5-9
- CPS 1-4
- CPS 0
- Unknown

**PD-L1 status** has been updated for **Lung Cancer, Non-small Cell (NSCLC)** with the following documentation points:

- TPS  $\geq$  50%
- TPS 1-49%
- Negative
- Unknown

**RET fusion status** has been updated for **Breast Cancer, Bile Duct Cancer, Cervical Cancer, Colon Cancer, Esophageal Cancer (Parent), Fallopian Tube Cancer, Gallbladder Cancer, Gastric Cancer, Hepatocellular Carcinoma (HCC), Lung Cancer, Non-small Cell (NSCLC), Neuroendocrine Tumor, Carcinoid (Parent), Ovarian and Primary Peritoneal Cancer, Pancreatic Cancer, Rectal Cancer, and Uterine Cancer, Sarcoma (Parent)** with the following documentation points:

- Positive
- Negative
- Other non-actionable finding
- Unknown

**ROS1 fusion status** has been updated for **Lung Cancer, Non-small Cell (NSCLC), Lung Cancer, Other, and Melanoma, Skin** with the following documentation points:

- Positive
- Negative
- Other non-actionable finding
- Unknown

# Lab Analytes & Panels

## Additions/Updates

- Acetylcholine receptor (AChR) antibodies, complete profile with reflex to musk antibodies panel
- AChR binding Abs, serum, nmol/L
- AChR blocking Abs, serum, %
- AChR modulating Ab, %
- Alpha-thalassemia analysis clinical information
- Alpha-thalassemia analysis comments
- Alpha-thalassemia analysis director review/release
- Alpha-thalassemia analysis genes analyzed
- Alpha-thalassemia analysis image
- Alpha-thalassemia analysis indication
- Alpha-thalassemia analysis interpretation
- Alpha-thalassemia analysis methods/limitations
- Alpha-thalassemia analysis panel
- Alpha-thalassemia analysis recommendations
- Alpha-thalassemia analysis references
- Alpha-thalassemia analysis reflex testing
- Alpha-thalassemia analysis result
- Alpha-thalassemia analysis specimen type
- ANA screen panel
- Chlamydia by NAA
- CLL minimal residual disease (CLL-MRD)
- Copper, WB panel
- Cortisol panel
- Cortisol, plasma, ug/dL
- Epstein barr ab IgG, IgGM panel
- Factor IX (hemophilia B) genetic analysis panel
- Footnotes
- FoundationOne PD-L1 IHC (Dako 22C3 pharmDx) panel
- FoundationOne Ventana FOLR1 (FOLR1-2.1) RxDx panel
- Gonococcus by NAA
- HBsAg screen
- HCV Ab
- Hep B core Ab, tot
- Hep B surface Ab, qual
- Hgb/Thal
- Hgb/Thal clinical information
- Hgb/Thal comments
- Hgb/Thal genes analyzed
- Hgb/Thal indication
- Hgb/Thal methods/limitations
- Hgb/Thal recommendations
- Hgb/Thal result
- Hgb/Thal specimen type
- HIV Ab/p24 Ag screen
- HPV SurePath genotype 16/18
- HPV SurePath genotype 16/18 block ID
- HPV SurePath genotype 16/18 H and E slide description
- HPV SurePath genotype 16/18 HPV by ISH high risk
- HPV SurePath genotype 16/18 HPV high risk comment

- HPV SurePath genotype 16/18 source
- IFE interpretation #2
- IgA, immunoglobulin A (RDL) panel
- IgA, immunoglobulin A (RDL), mg/dL
- Interpretation
- Interpretation PDF
- Invitae cancer genetic risk panel
- Invitae comprehensive genetic risk panel
- JAK2 with reflex to exon 12, CALR and MPL panel
- Liver cytosol (LC-1) Ab clinical relevance
- Liver cytosol (LC-1) Ab disclaimer
- Liver cytosol (LC-1) Ab electronically signed by
- Liver cytosol (LC-1) Ab result
- Liver cytosol (LC-1) Ab substrate
- Manual diff verified by scan
- MOG FACS, serum, qual
- Multiple myeloma cascade panel
- Multiple myeloma cascade reflex testing
- PDF Image
- Reflex information
- Result
- Rfx to HBc IgM
- RPR
- Rubeola IgG antibody, immune
- Sexually transmitted infections (STI) profile, with CT/NG/TV NAA panel
- Soluble liver antigen (SLA) IgG antibody panel
- Thyroglobulin antibody and thyroglobulin panel
- Thyroxine (T4) free, direct panel
- Total protein, g/dL
- Trich vag by NAA
- TSH3-Ultra II, uIU/mL
- Unsaturated iron binding capacity (UIBC) panel

## Imaging

### Additions/Updates

- CT chest/abd w/ & w/o contrast
- CT sinus w/ & w/o contrast
- CT ankle, left w/ & w/o contrast
- CT ankle, left w/ contrast
- CT ankle, left w/o contrast
- CT ankle, right w/ & w/o contrast
- CT ankle, right w/ contrast
- CT ankle, right w/o contrast
- CT elbow, left w/ & w/o contrast
- CT elbow, left w/ contrast
- CT elbow, left w/o contrast
- CT elbow, right w/ & w/o contrast
- CT elbow, right w/ contrast
- CT elbow, right w/o contrast
- CT forearm, left w/ & w/o contrast
- CT forearm, left w/ contrast
- CT forearm, left w/o contrast
- CT forearm, right w/ & w/o contrast
- CT forearm, right w/ contrast
- CT forearm, right w/o contrast
- CT foot, left w/ & w/o contrast
- CT foot, left w/ contrast
- CT foot, left w/o contrast
- CT foot, right w/ & w/o contrast
- CT foot, right w/ contrast
- CT foot, right w/o contrast

- CT forearm, right w/ contrast
- CT forearm, right w/o contrast
- CT hand, left w/o contrast
- CT hand, right w/o contrast
- CT humerus, left w/ & w/o contrast
- CT humerus, left w/ contrast
- CT humerus, left w/o contrast
- CT humerus, right w/ & w/o contrast
- CT humerus, right w/ contrast
- CT humerus, right w/o contrast
- CT knee, left w/ & w/o contrast
- CT knee, left w/ contrast
- CT knee, left w/o contrast
- CT knee, right w/ & w/o contrast
- CT knee, right w/ contrast
- CT knee, right w/o contrast
- CT shoulder, left w/ & w/o contrast
- CT shoulder, right w/ & w/o contrast
- CT tib/fib, left w/ & w/o contrast
- CT tib/fib, left w/ contrast
- CT tib/fib, left w/o contrast
- CT tib/fib, right w/ & w/o contrast
- CT tib/fib, right w/ contrast
- CT tib/fib, right w/o contrast
- CT wrist, left w/ & w/o contrast
- CT wrist, left w/ contrast
- CT wrist, left w/o contrast
- CT wrist, right w/ & w/o contrast
- CT wrist, right w/ contrast
- CT wrist, right w/o contrast

## Medications

### Additions

- 225Ac Ac-PSMA-617 invest IV
- AAA817 invest (225Ac Ac-PSMA-617 invest IV)
- Compounded CSF Insufflation Powder Otic
- Elranatamab invest Subcutaneous
- GDC-7035 invest Oral
- IPN01195 invest Oral
- JSB462 invest Oral
- Libido LC Compounded Topical Cream
- Luxdegalutamide invest (JSB462 invest Oral)
- ORIC-944 invest Oral
- Simplified Magic Mix (Maalox-Lidocaine) Oral
- TNG260 invest Oral
- WSD0922-FU invest Oral

## Updates

Medications	Updates
68Ga-PSMA-11 invest IV	New <b>Drug Name</b> available: <ul style="list-style-type: none"> <li>Gallium [68Ga] Gozetotide or [68Ga]Ga-PSMA-11 invest IV</li> </ul> New <b>Alias Name</b> available: <ul style="list-style-type: none"> <li>AAA517 invest (Gallium 68Ga Gozetotide or 68Ga Ga-PSMA-11 invest IV)</li> </ul>
AB680 invest IV	New <b>Unit</b> available: <ul style="list-style-type: none"> <li>mL</li> </ul>
Adcetris (Brentuximab Vedotin IV)	New <b>Weight Cap of 100 kg</b> set for the following formula dosage: <ul style="list-style-type: none"> <li>Brentuximab Vedotin 0 mg/kg intravenously Piggyback every 2 weeks</li> <li>Brentuximab Vedotin 0 mg/kg intravenously Piggyback every 3 weeks</li> <li>Brentuximab Vedotin 0.9 mg/kg intravenously Piggyback once</li> <li>Brentuximab Vedotin 1.2 mg/kg intravenously Piggyback once</li> <li>Brentuximab Vedotin 1.5 mg/kg intravenously Piggyback once</li> <li>Brentuximab Vedotin 1.8 mg/kg intravenously Piggyback once</li> </ul>
Brentuximab vedotin invest (SGN-35 invest IV)	New <b>Weight Cap of 100 kg</b> set for the following formula dosage: <ul style="list-style-type: none"> <li>1.8 mg/kg intravenously once</li> </ul>
Carfilzomib invest IV	New <b>BSA Cap of 2.2 m2</b> set for the following formula dosage: <ul style="list-style-type: none"> <li>20 mg/m2 intravenously once</li> <li>56 mg/m2 intravenously once</li> <li>70 mg/m2 intravenously once</li> </ul>
Dato-DXd (datopotamab deruxtecan; DS-1062a) invest (DS-1062a invest IV)	New <b>Weight Cap of 90 kg</b> set for the following formula dosage:

	<ul style="list-style-type: none"> <li>6 mg/kg intravenously every 3 weeks; Over 90 min for C1D1, then may decrease to 30 min thereafter.</li> </ul>
Datroway (datopotamab deruxtecan-dlnk IV)	<p>New <b>BSA Cap of 90 kg</b> set for the following formula dosage:</p> <ul style="list-style-type: none"> <li>datopotamab deruxtecan-dlnk 3 mg/kg intravenously Piggyback every 3 weeks</li> <li>datopotamab deruxtecan-dlnk 4 mg/kg intravenously Piggyback every 3 weeks</li> <li>datopotamab deruxtecan-dlnk 6 mg/kg (not to exceed 540 mg) intravenously Piggyback every 3 weeks</li> <li>datopotamab deruxtecan-dlnk 6 mg/kg intravenously Piggyback once</li> </ul>
Enfortumab vedotin invest (ASG-22CE invest IV)	<p>New <b>Weight Cap of 100 kg</b> set for the following formula dosage:</p> <ul style="list-style-type: none"> <li>1.25 mg/kg intravenously As Directed</li> </ul>
Enfortumab vedotin-ejfv IV	<p>New <b>Weight Cap of 100 kg</b> set for the following formula dosage:</p> <ul style="list-style-type: none"> <li>Enfortumab Vedotin-ejfv 0 mg/kg intravenously As Directed</li> <li>Enfortumab Vedotin-ejfv 0.5 mg/kg (not to exceed 50 mg) intravenously Piggyback every week; administer over 30 mins on days 1 and 8 of a 21 day cycle; quantity sufficient for 2 weeks</li> <li>Enfortumab Vedotin-ejfv 0.5 mg/kg intravenously Piggyback once; administer over 30 minutes; Dosage based on ACTUAL body weight with maximum dose not to exceed 50 mg.</li> <li>Enfortumab Vedotin-ejfv 0.75 mg/kg (not to exceed 75 mg) intravenously Piggyback every week; administer over 30 mins on days 1 and 8 of a 21 day cycle; quantity sufficient for 2 weeks</li> <li>Enfortumab Vedotin-ejfv 0.75 mg/kg intravenously Piggyback once;</li> </ul>

	<p>administer over 30 minutes; Dosage based on ACTUAL body weight with maximum dose not to exceed 75 mg.</p> <ul style="list-style-type: none"> <li>• Enfortumab Vedotin-ejfv 1 mg/kg (not to exceed 100 mg) intravenously Piggyback every week; administer over 30 mins on days 1 and 8 of a 21 day cycle; quantity sufficient for 2 weeks</li> <li>• Enfortumab Vedotin-ejfv 1 mg/kg intravenously Piggyback once; administer over 30 minutes; Dosage based on ACTUAL body weight with maximum dose not to exceed 100 mg.</li> <li>• Enfortumab Vedotin-ejfv 1.25 mg/kg (not to exceed 125 mg) intravenously Piggyback every week; administer over 30 mins on days 1 and 8 of a 21 day cycle; quantity sufficient for 2 weeks</li> <li>• Enfortumab Vedotin-ejfv 1.25 mg/kg intravenously Piggyback once; administer over 30 minutes; Dosage based on ACTUAL body weight with maximum dose not to exceed 125 mg.</li> </ul>
<p>Ixabepilone IV</p>	<p>New <b>BSA Cap of 2.2 m<sup>2</sup></b> set for the following formula dosage:</p> <ul style="list-style-type: none"> <li>• Ixabepilone 24 mg/m<sup>2</sup> intravenously Piggyback every 3 weeks</li> <li>• Ixabepilone 24 mg/m<sup>2</sup> intravenously Piggyback once</li> <li>• Ixabepilone 32 mg/m<sup>2</sup> intravenously Piggyback every 3 weeks</li> <li>• Ixabepilone 32 mg/m<sup>2</sup> intravenously Piggyback once</li> <li>• Ixabepilone 40 mg/m<sup>2</sup> intravenously Piggyback every 3 weeks</li> <li>• Ixabepilone 40 mg/m<sup>2</sup> intravenously Piggyback once</li> </ul>

Kyprolis (Carfilzomib IV)	<p>New <b>BSA Cap of 2.2 m2</b> set for the following formula dosage:</p> <ul style="list-style-type: none"> <li>• Carfilzomib 20 mg/m2 intravenously Piggyback once</li> <li>• Carfilzomib 27 mg/m2 intravenously Piggyback once</li> <li>• Carfilzomib 36 mg/m2 intravenously Piggyback once</li> <li>• Carfilzomib 45 mg/m2 intravenously Piggyback once</li> <li>• Carfilzomib 56 mg/m2 intravenously Piggyback once</li> <li>• Carfilzomib 70 mg/m2 intravenously Piggyback once</li> </ul>
LY3537982 invest Oral	<p>New <b>Alias Name</b> available:</p> <ul style="list-style-type: none"> <li>• Olomorasib invest</li> </ul>
Slow Fe (Ferrous Sulfate Oral ER Tab)	<p>New default Form available to match with the default SIG:</p> <ul style="list-style-type: none"> <li>• 142 mg (45 mg iron) tablet extended release</li> </ul>
TAK-079 invest Subcutaneous	<p>Updated <b>Form</b> available:</p> <ul style="list-style-type: none"> <li>• 150 mg/mL soln 2 mL vials/kit</li> </ul>
Tisotumab Vedotin-tftv IV	<p>New <b>Weight Cap of 100 kg</b> set for the following formula dosage:</p> <ul style="list-style-type: none"> <li>• Tisotumab Vedotin-tftv 0.9 mg/kg intravenously Piggyback As Directed; administer over 30 minutes</li> <li>• Tisotumab Vedotin-tftv 0.9 mg/kg intravenously Piggyback every 3 weeks; administer over 30 minutes</li> <li>• Tisotumab Vedotin-tftv 0.9 mg/kg intravenously Piggyback once; administer over 30 minutes</li> <li>• Tisotumab Vedotin-tftv 1.3 mg/kg intravenously Piggyback As Directed; administer over 30 minutes</li> </ul>

	<ul style="list-style-type: none"> <li>• Tisotumab Vedotin-tftv 1.3 mg/kg intravenously Piggyback every 3 weeks; administer over 30 minutes</li> <li>• Tisotumab Vedotin-tftv 1.3 mg/kg intravenously Piggyback once; administer over 30 minutes</li> <li>• Tisotumab Vedotin-tftv 2 mg/kg intravenously Piggyback As Directed; administer over 30 minutes</li> <li>• Tisotumab Vedotin-tftv 2 mg/kg intravenously Piggyback every 3 weeks; administer over 30 minutes</li> <li>• Tisotumab Vedotin-tftv 2 mg/kg intravenously Piggyback once; administer over 30 minutes</li> </ul>
Trifluridine-Tipiracil Oral 15 mg-6.14 mg	<p>New default SIG available:</p> <ul style="list-style-type: none"> <li>• 35 mg/m<sup>2</sup> (not to exceed 80 mg) orally (of trifluridine) 2 times per day; must administer with food (with morning and evening meals); on Days 1 through 5 and Days 8 through 12 of 28-day cycle</li> </ul>

## Regimen Library

### Additions

Regimen Name	Diagnosis
Anastrozole + Goserelin Q3M (5 years)	Breast Cancer
Capecitabine D1-14 + Cisplatin + Tislelizumab-jsgr Q21D	Esophageal Cancer (Parent)
Capecitabine D1-14 + Oxaliplatin (XELOX/CAPOX) + Tislelizumab-jsgr Q21D	Esophageal Cancer (Parent)
Capecitabine D1-15 + Oxaliplatin (XELOX/CAPOX) + Cetuximab D1,8,15 Q21D	Colon Cancer; Rectal Cancer
Exemestane + Goserelin Q3M (5 years)	Breast Cancer

Regimen Name	Diagnosis
Fluorouracil CIV + Leucovorin + Oxaliplatin D1,15,29 + Tislelizumab-jsgr D1,22 Q42D	Esophageal Cancer (Parent); Gastric Cancer
Fluorouracil CIV D1-5 + Cisplatin + Tislelizumab-jsgr Q21D	Esophageal Cancer (Parent); Gastric Cancer
Fluorouracil (Bolus + CIV) D1-2 + Leucovorin + Oxaliplatin (FOLFOX 6, Modified) D1,15 + Panitumumab D1,15 + Encorafenib Q28D	Colon Cancer; Rectal Cancer
Goserelin Q3M (Breast)	Breast Cancer
Intrathecal Topotecan Q14D (Maintenance 1)	Brain Tumor (Parent)
Letrozole + Goserelin Q3M (5 years)	Breast Cancer
Oxaliplatin + Paclitaxel + Tislelizumab-jsgr Q21D	Esophageal Cancer (Parent)
Pacritinib + Darbepoetin alfa D1,8,15,22 Q28D (Myelofibrosis)	Myelofibrosis; Myeloproliferative Disorder
Pacritinib + Epoetin alfa D1,8,15,22 Q28D (Myelofibrosis)	Myelofibrosis; Myeloproliferative Disorder
Pacritinib + Luspatercept-aamt Q21D (Myelofibrosis)	Myelofibrosis; Myeloproliferative Disorder
Paclitaxel + Cisplatin + Tislelizumab-jsgr Q21D	Esophageal Cancer (Parent)
Talquetamab-tgvs (Talvey) SQ + Teclistamab-cqyv (Tecvayli) SQ D1,4,7,15,22 fb D1,8,15,22 fb D1,15 Q28D	Multiple Myeloma (MM)
Tamoxifen + Goserelin Q3M (5 years)	Breast Cancer

## Updates

Regimens for the following diagnoses have been updated based on the Collaborative Care Committee voting. Changes include but are not limited to reference update, drug infusion instruction updates, renaming of regimens, premedication template updates and number of cycles.

- All Problems
- Anal Cancer (Parent)
- Bile Duct Cancer (Parent)
- Breast Cancer
- Colon Cancer
- Esophageal Cancer (Parent)

- Fallopian Tube Cancer
- Gallbladder Cancer
- Gastric Cancer
- Hemolytic Uremic Syndrome
- Hepatocellular Carcinoma (HCC)
- Lung Cancer, Non-small Cell (NSCLC)
- Lung Cancer, Small Cell (SCLC)
- Lymphoma, Non-Hodgkin (NHL) (Parent)
- Melanoma, Skin
- Melanoma, Uvea, Ciliary Body/Choroid
- Myasthenia Gravis
- Neuroendocrine Tumor, Carcinoid (Parent)
- Ovarian and Primary Peritoneal Cancer
- Pancreatic Cancer, Carcinoid/Neuroendocrine
- Paroxysmal Nocturnal Hemoglobinuria
- Rectal Cancer
- Renal Cell Carcinoma (RCC)
- Uterine Cancer (Parent)
- Waldenstrom's Macroglobulinemia

## Renames

Previous Name	New Name
<b>Immunotherapy-Related Toxicity Supportive Care</b>	Immunotherapy-Related Toxicity Supportive Care (Infliximab, Vedolizumab, Corticosteroids)
<b>Nivolumab D1,15,29 + Ipilimumab Q42D (Perioperative Esophageal, Gastric)</b>	Nivolumab D1,15,29 + Ipilimumab Q42D (Esophageal, Gastric)
<b>Osimertinib + Pemetrexed + Carboplatin Q21D</b>	Osimertinib + Pemetrexed + Carboplatin Q21D fb Osimertinib + Pemetrexed Q21D Maintenance
<b>Osimertinib + Pemetrexed + Cisplatin Q21D</b>	Osimertinib + Pemetrexed + Cisplatin Q21D fb Osimertinib + Pemetrexed Q21D Maintenance
<b>Polatuzumab vedotin D1 + Rituximab IV D2 + CHP D2 Q21D (6 cycles) (Immunotherapy Split) fb Rituximab IV Q21D (2 cycles)</b>	Polatuzumab vedotin D2 + Rituximab IV D1 + CHP D1 Q21D (6 cycles) (Immunotherapy Split) fb Rituximab IV Q21D (2 cycles)

## Billing & HCPCS Codes

### Updates

Medication	HCPCS Codes
Ceftobiprole IV	J3490 per 667 mg
Efgartigimod-Hyaluronidas-qvfc Subcutaneous	J9334 per 5 mL
Epinephrine IM	J3490 per 0.3 mg
Epinephrine IV	J3490 per 1 mg
Epinephrine Subcutaneous	J3490 per 0.01 mg
Foscarbidopa-Foslevodopa Continuous Subcutaneous Infusion	J3490 per 10 mL
Foscarbidopa-Foslevodopa Subcutaneous	J3490 per 10 mL
Ocrelizumab-Hyaluronidase-ocsq Subcutaneous 920 mg-23,000 unit/23 mL	J2351 per 0.025 mL
Piperacillin-Tazobactam IV	J2543 per 1.125 g
Remestemcel-L-rknd IV	J3590 per 2 x 10e6 MSCs
Sildenafil IV	J3490 per 0.8 mg

## NDC – HCPCS Crosswalk

### Additions

Medication (Brand)	HCPCS Codes	NDC
Efgartigimod-Hyaluronidas-qvfc subcutaneous	J9334	73475122101 73475122101
Foscarbidopa-Foslevodopa Subcutaneous	J3490	00074050101
Foscarbidopa-Foslevodopa Continuous Subcutaneous Infusion	J3490	00074050101