

March 2, 2023**Contents**

Clinical Profile Documentation	2
AJCC 8th Edition Staging	2
Problem Groups	3
Additions	3
Updates	3
Problems	3
Additions	3
Lab Analytes & Panels	4
Additions	4
Medications	4
Additions	4
Updates	5
Regimen Library	6
Additions	6
Updates	7
Research	7
Updates	7
Billing & HCPCS Codes	10
Updates	10
Appendix A	10
Problem & Codes Summary	10
Additions	10

Clinical Profile Documentation

AJCC 8th Edition Staging

This release contains updated **TNM** values, **Staging Groups**, and **Template** functionality to align with AJCC staging conditions for:

- **Melanoma, Skin**
- **Pancreatic Cancer**

Users will see updated values and descriptions for **Primary Tumor Type (T)**, **Regional Lymph Nodes (N)**, and **Distance Metastasis (M)**, documentation points.

The following documentation points are now available for **Pancreatic cancer**:

- **T value: T1**

The following documentation points are now available for **Melanoma, Skin**:

- **T values: T1, T3, T4**
- **N values: N1, N2, N3**
- **M values: cM1a(0), cM1a(1), cM1b(0), cM1b(1), cM1c(0), cM1c(1), cM1d(0), cM1d(1), pM1a(0), pM1a(1), pM1b(0), pM1b(1), pM1c(0), pM1c(1), pM1d(0), pM1d(1)**

The following documentation points now have updated descriptions for **Melanoma, Skin**:

- **N1c, N2c, N3c**
- **cM1a, cM1b, cM1c, cM1d, pM1a, pM1b, pM1c, pM1d**

The staging calculator will display updated **Stage** values based on the changes to the staging groups. The new content does not affect previous charting documented on existing patients. All previous charting is brought forward during a subsequent visit, just as it did prior to this release.

Problem Groups

Additions

The **Problems > Add Details** service row is updated with applicable documentation points for the following diagnoses:

BRAF mutation is now available for **Esophageal** and **Gastric** cancers with the following documentation points:

- BRAF V600E (Mutated)
- Wild-type
- Mutations
- Unknown

RET gene mutation is now available for **Breast**, **Esophageal**, and **Gastric** cancers with the following documentation points:

- RET fusion positive
- RET fusion negative
- Ordered: Result pending
- Not performed
- Unknown

Updates

Treatment status documentation points have been updated for **Fallopian Tube**, **Ovarian** and **Primary Peritoneal** cancers:

- Added Platinum-refractory (PD, SD)
- Removed Platinum-resistant (PD, SD)

Problems

Additions

New items are available for documentation in **Problems** and appear in the **Charge Capture Report (CCR)**. Additional ICD-10 codes* may be displayed to present the surrounding nodes.

Please see **APPENDIX A** for a complete summary of changes.

Lab Analytes & Panels

Additions

- Additional results
- Additional results panel
- Ambry +RNAinsight panel
- ATP6AP1
- ATP6AP2
- C11orf95
- CLDN18
- DACH1
- DGCR8
- ER/PR computer morphometric adequate for analysis
- ER/PR computer morphometric clinical data
- ER/PR computer morphometric controls
- ER/PR computer morphometric duration of fixation
- ER/PR computer morphometric fixative
- ER/PR computer morphometric interpretation
- ER/PR computer morphometric panel
- ER/PR computer morphometric pathologist
- ER/PR computer morphometric site
- ER/PR computer morphometric specimen received
- ER/PR computer morphometric technologist
- ER/PR computer morphometric time to fixation
- FOXR2
- Heparin, low molecular wt, anti-Xa panel
- Heparin, low molecular wt, anti-Xa U/mL
- HLA-A 02:01, A-1 NMDP
- HLA-A 02:01, A-2 NMDP
- Invitae protein C deficiency test panel
- Invitae protein C deficiency test result
- KBTBD4
- Ki67
- Ki67 panel
- MDH2
- Methemoglobin, venous
- MPN Mini profile panel (Jak2 V617F, Exon 12, MPL, CALR)
- NeoTYPE lymphoid disorders profile
- NYNRIN
- PD-L1 (22c3)
- PD-L1 (22c3) panel
- PRDM6
- PRKD1
- REST
- Tempus xT DPYD panel
- TRIM28
- VGB L/MIN, venous

Medications

Additions

- BGB11417 invest Oral
- BGB-3245 invest Oral

- BI 907828 invest Oral
- Furmonertinib invest Oral
- KSQ-4270 invest Oral
- KT-253 invest IV
- MDK-703 invest IM
- STX-478 invest Oral
- XL092 invest Oral

Updates

Medication Name	Update
AGEN1181 invest IV	New Alias and Forms : Botensilimab (AGEN1181 invest IV): <ul style="list-style-type: none"> • 25 mg solution • 50 mg solution • 75 mg solution • 150 mg solution
Balstilimab invest (AGEN2034 invest IV)	New Form : 240 mg solution
BMS-986213 or Nivolumab invest IV	New Name : BMS-986213 invest IV New Alias : Nivolumab-Relatlimab invest IV
Brukinsa (Zanubrutinib Oral)	New Instructions : Take with or without food. New default Sig : 160 mg tablet 2 tablet orally every 12 hours; quantity sufficient for 30 days
GRT-C901 invest IM	New quick Sigs : <ul style="list-style-type: none"> • 0 x 10e12 vp intramuscularly As Directed • 1 x 10e12 vp intramuscularly As Directed
IMP7068 invest Oral	New Form : 40 mg tablet
Jaypirca (Pirtobrutinib Oral)	New Instructions : Take with or without food. New default Sig : 200 mg orally daily; quantity sufficient for 30 days. Take with or without food. Max single Dose : 200 mg
Oserdu (Elacestrant Oral)	New Instructions : Take with food. New default Sig : 345 mg orally daily; quantity sufficient for 30 days. Take with food. Max single dose : 345 mg
Tukysa (Tucatinib Oral)	New Instructions : Take with or without food. New default Sig : 150 mg tablet 2 tablet orally every 12 hours; quantity sufficient for 30 days
Lutetium Lu 177 Dotatate IV 10 mCi/mL 370 mBq/mL)	New quick Sig : 200 mCi intravenously Piggyback once

Regimen Library

Updates to G-CSF Template

Based on recent Collaborative Care Committee discussion and vote, updates have been made to regimens containing Granulocyte colony-stimulating factor (G-CSF) and Ifosfamide.

To streamline G-CSF options, **filgrastim** has been **removed** from templates containing pre-checked **pegfilgrastim**. Regimens will contain **filgrastim** if the duration between chemotherapy doses is less than 12 days, stem cell mobilization, or Myelodysplastic Syndrome (MDS).

The following medications have been added to applicable G-CSF regimen templates:

- **Fylnetra** (Pegfilgrastim-pbbk Subcutaneous)
- **Releuko** (Filgrastim-ayow Subcutaneous)
- **Stimufend** (Pegfilgrastim-fpgk Subcutaneous)

Ifosfamide Infusion Length

To standardize infusion length and reduce risk for toxicity the ifosfamide bolus infusion length has been updated to **3 hours** across all regimens.

Additions

Regimen Name	Diagnosis
Carfilzomib D1,2,8,9,15,16 + Bendamustine D1,8 + Dexamethasone Q28D (Part 1 of 2)	Multiple Myeloma (MM)
Carfilzomib D1,2,8,9,15,16 + Bendamustine D1,8 + Dexamethasone Q28D (Part 2 of 2: Carfilzomib Continuation)	Multiple Myeloma (MM)
Dasatinib Q30D (Melanoma)	Melanoma, Skin; Melanoma, Mucosal, Head and Neck
Elacestrant Q30D	Breast Cancer
Nilotinib Q28D (Melanoma)	Melanoma, Skin; Melanoma, Mucosal, Head and Neck
Paclitaxel Q14D fb Doxorubicin + Cyclophosphamide (AC) Q14D Dose Dense	Breast Cancer
Pembrolizumab + Dabrafenib + Trametinib Q21D	Melanoma, Skin
Pembrolizumab + Docetaxel + Cisplatin Q21D (Part 1 of 2)	Head and Neck Cancer (Parent)
Pirtobrutinib Q30D	Lymphoma, Non-Hodgkin (NHL) (Parent)
Tucatinib + Trastuzumab IV Q21D	Colon Cancer; Rectal 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.

- Bladder Cancer
- Breast Cancer
- Cervical Cancer
- Fallopian Tube Cancer
- Gestational Trophoblastic Tumor
- Head and Neck Cancer (Parent)
- Leukemia, Acute Lymphocytic (ALL)
- Leukemia, Chronic Lymphocytic (CLL)
- Lung Cancer, Small Cell (SCLC)
- Lymphoma, Hodgkin (HL)
- Lymphoma, Non-Hodgkin (NHL) (Parent)
- Melanoma, Skin
- Multiple Myeloma (MM)
- Ovarian and Primary Peritoneal Cancer
- Prostate Cancer
- Renal Pelvis and Ureter Cancer
- Sarcoma, Bone (Parent)
- Sarcoma, Soft Tissue (Parent)
- Urethral Cancer
- Uterine Cancer (Parent)
- Waldenstrom's Macroglobulinemia

Research

Updates

	Updated Reference Information			
		Updated Drug Service Order Information		
			Updated Regimen Instructions	
				Other Changes
USOR 18263	X			
USOR 19105	X			
USOR 20229	X	X		<p>Now available:</p> <ul style="list-style-type: none"> • USOR 20229 Naptumomab Estafenatox + Docetaxel Q21D • USOR 20229 Naptumomab Estafenatox Continuation Q28D <p>No longer available:</p> <ul style="list-style-type: none"> • USOR 20229 Naptumomab Estafenatox D1-4 + Docetaxel D5 Q21D • USOR 20229 Naptumomab Estafenatox Continuation D1-4 Q21D

	Updated Reference Information			
	Updated Drug Service Order Information			
	Updated Regimen Instructions			
	Other Changes			
USOR 20270	X	X	X	Now available: <ul style="list-style-type: none"> USOR 20270 Pemetrexed Premedication USOR 20270 Pembrolizumab + Pemetrexed + Cisplatin Q21D USOR 20270 Pembrolizumab + Pemetrexed + Carboplatin Q21D USOR 20270 Pembrolizumab + Pemetrexed Maintenance Q21D USOR 20270 Pembrolizumab + Pemetrexed D1,22 Maintenance Q42D
USOR 20306		X		
USOR 20307	X			
USOR 20310	X	X	X	
USOR 20318	X	X	X	
USOR 20386	X			
USOR 20423				No longer available: <ul style="list-style-type: none"> USOR 20423 Tomivosertib or Placebo (PO; BID) + Pemetrexed + Pembrolizumab Q21D USOR 20423 Tomivosertib or Placebo (PO; BID) + Pemetrexed Q21D + Pembrolizumab Q42D USOR 20423 Pemetrexed Pre-Medication
USOR 21219	X	X	X	

	Updated Reference Information			
	Updated Drug Service Order Information			
	Updated Regimen Instructions			
	Other Changes			
USOR 21239	X		X	<p>Now available:</p> <ul style="list-style-type: none"> • USOR 21239 Extension Cohort Arm A2 Pemetrexed + Carboplatin + Amivantamab (if 80 kg or greater) Cycles 1-4 • USOR 21239 Extension Cohort Arm A2 Pemetrexed + Carboplatin + Amivantamab (if less than 80 kg) Cycles 1-4 • USOR 21239 Extension Cohort Arm A2 Lazertinib (PO; Daily) + Pemetrexed + Amivantamab Maintenance (if 80 kg or greater) Q21D • USOR 21239 Extension Cohort Arm A2 Lazertinib (PO; Daily) + Pemetrexed + Amivantamab Maintenance (if less than 80 kg) Q21D • USOR 21239 Extension Cohort Arm C2 Pemetrexed + Carboplatin + Amivantamab (if 80 kg or greater) Cycles 1-4 • USOR 21239 Extension Cohort Arm C2 Pemetrexed + Carboplatin + Amivantamab (if less than 80 kg) Cycles 1-4 • USOR 21239 Extension Cohort Arm C2 Pemetrexed + Amivantamab Maintenance (if 80 kg or greater) Q21D • USOR 21239 Extension Cohort Arm C2 Pemetrexed + Amivantamab Maintenance (if less than 80 kg) Q21D
USOR 21308				<p>No longer available:</p> <ul style="list-style-type: none"> • USOR 21308 ZN-c3 (PO; Daily) + Niraparib (PO; Daily) Q28D • USOR 21308 ZN-c3 (PO; Intermittent 5:2) + Niraparib (PO; Daily) Q28D <p>Now available:</p> <ul style="list-style-type: none"> • USOR 21308 Concurrent ZN-c3 (Daily) + Niraparib (Daily) Q28D • USOR 21308 Concurrent ZN-c3 (Intermittent) + Niraparib (Daily) Q28D • USOR 21308 Sequential ZN-c3 (Intermittent) Q7D alternating with Niraparib (Daily) Q7D
USOR 22107	X		X	
USOR 22174	X	X	X	<p>Now available:</p> <ul style="list-style-type: none"> • USOR 22174 IO-108 + Cemiplimab Q21D

Billing & HCPCS Codes

Updates

Medication	HCPCS Codes
Adalimumab-atto Subcutaneous Auto-Injector	J3590 per 40 mg
Adalimumab-atto Subcutaneous	J3590 per: <ul style="list-style-type: none"> • 20 mg • 40 mg
Lecanemab-irmb IV	J3590 per: <ul style="list-style-type: none"> • 200 mg • 500 mg
Leuprolide IM (3 month) (Lutrate)	J1954 per 7.5 mg
Terlipressin IV (Terlivaz IV)	J3490 per 0.84 mg
Tezepelumab-ekko Subcutaneous Pen Injector	J2356 per 1 mg
Vutrisiran Subcutaneous	J0225 Vutrisiran Subcutaneous, 1 mg

Appendix A

Problem & Codes Summary

Additions

Problem	ICD-10 Codes
Acute arthritis (disorder)	M08.90 Juvenile arthritis, unspecified, unspecified site M13.80 Other specified arthritis, unspecified site
Acute arthropathy (disorder)	M08.90 Juvenile arthritis, unspecified, unspecified site M12.9 Arthropathy, unspecified
Acute disease of musculoskeletal system (disorder)	M79.9 Soft tissue disorder, unspecified
Acute rheumatic fever (disorder)	I00 Rheumatic fever without heart involvement
Acute rheumatic fever with acute arthritis (disorder)	M08.00 Unspecified juvenile rheumatoid arthritis of unspecified site
Ankle joint inflamed (finding)	M08.079 Unspecified juvenile rheumatoid arthritis, unspecified ankle, and foot

Problem	ICD-10 Codes
	M12.9 Arthropathy, unspecified M19.90 Unspecified osteoarthritis, unspecified site
Anomaly of eye (disorder)	H57.09 Other anomalies of pupillary function
Anti-citrullinated protein antibody positive erosive rheumatoid arthritis (disorder)	M08.00 Unspecified juvenile rheumatoid arthritis of unspecified site
Antiphospholipid syndrome	D68.61 Antiphospholipid syndrome
Arthritis of bilateral feet (disorder)	M13.871 Other specified arthritis, right ankle, and foot M13.872 Other specified arthritis, left ankle and foot M13.879 Other specified arthritis, unspecified ankle, and foot
Arthritis of bilateral temporomandibular joints (disorder)	M26.643 Arthritis of bilateral temporomandibular joint M26.653 Arthropathy of bilateral temporomandibular joint
Arthritis of elbow (disorder)	M13.821 Other specified arthritis, right elbow M13.822 Other specified arthritis, left elbow M13.829 Other specified arthritis, unspecified elbow
Arthritis of joint of toe (disorder)	M19.071 Primary osteoarthritis, right ankle and foot M19.072 Primary osteoarthritis, left ankle and foot
Arthritis of knee (disorder)	M13.861 Other specified arthritis, right knee M13.862 Other specified arthritis, left knee M13.869 Other specified arthritis, unspecified knee
Arthritis of left foot (disorder)	M08.072 Unspecified juvenile rheumatoid arthritis, left ankle and foot M13.872 Other specified arthritis, left ankle and foot
Arthritis of left glenohumeral joint (disorder)	M08.912 Juvenile arthritis, unspecified, left shoulder M13.812 Other specified arthritis, left shoulder
Finding of white blood cell number (finding)	D72.828 Other elevated white blood cell count D72.829 Elevated white blood cell count, unspecified D72.89 Other specified disorders of white blood cells D72.9 Disorder of white blood cells, unspecified
Iron deficiency without anemia (disorder)	E61.1 Iron deficiency
Personal history of in-situ neoplasm of other and unspecified genital organs	Z86.002 Personal history of in-situ neoplasm of other and unspecified genital organs
Rheumatoid arthritis	M06.9 Rheumatoid arthritis, unspecified M08.00 Unspecified juvenile rheumatoid arthritis of unspecified site

Problem	ICD-10 Codes
Rheumatoid arthritis of right foot (disorder)	M05.871 Other rheumatoid arthritis with rheumatoid factor of right ankle and foot M06.071 Rheumatoid arthritis without rheumatoid factor, right ankle, and foot M06.871 Other specified rheumatoid arthritis, right ankle, and foot M06.879 Other specified rheumatoid arthritis, unspecified ankle, and foot M08.071 Unspecified juvenile rheumatoid arthritis, right ankle, and foot