

ST-QBP Regimen Request Status for 2018/19

Below are status of regimen requests submitted for funding considerations in FY 18-19 Q4.

Requests with "Approved" status will be updated on the ST-QBP website and will be reflected in an upcoming operational report in iPort. Updated as of March 29, 2019

Disease Site	Sub-Disease Site	Intent	Regimen Code	Regimen Details	Status (as of March 29, 2019)
Breast	N/A	Adjuvant/	TRIP	Triptorelin 3.75 mg IM Day 1;	Approved
		Palliative		Q1 month	
Breast	N/A	Palliative	LETRRIBO	Letrozole 2.5 mg PO days 1-28;	Approved
				Ribociclib 600 mg PO Days 1-21 - not currently publicly funded for this	
				regimen and intent;	
				Q28 days	
				Note: Must be given together with GnRH agonist if patient is	
				premenopausal	
Breast	N/A	Palliative	ANASRIBO	Anastrozole 1 mg PO days 1-28;	Approved
				Ribociclib 600 mg PO Days 1-21 - not currently publicly funded for this	
				regimen and intent;	
				Q28 days	
				Note: Must be given together with GnRH antagonist if premenopausal	
Breast	N/A	Palliative	EXEMRIBO	Exemestane 25 mg PO days 1-28;	Approved
				Ribociclib 600 mg PO Days 1-21 - not currently publicly funded for this	
				regimen and intent;	
				Q28 days	
				Note: Must be given together with GnRH antagonist if premenopausal	
Breast	N/A	Palliative	TMXFRIBO	Tamoxifen 20 mg PO days 1-28;	Approved
				Ribociclib 600 mg PO Days 1-21 - not currently publicly funded for this	
				regimen and intent;	
				Q28 days	
				Note: For premenopausal patients; must be given together with GnRH	
				antagonist	
Breast	N/A	Palliative	ANSAPALB	Anastrozole 1 mg PO days 1-28;	Approved
				Palbociclib 125 mg PO days 1-21;	



Disease Site	Sub-Disease Site	Intent	Regimen Code	Regimen Details	Status (as of March 29, 2019)
				Q28 days	
Breast	N/A	Palliative	EXEMPALB	Exemestane 25 mg PO days 1-28; Palbociclib 125 mg PO days 1-21; Q28 days	Approved
Breast	N/A	Neoadjuv ant	AC-PACL(W)+PERT+TRAS		Not Approved
Endocrine	Thyroid	Palliative	CRBPPACL	Paclitaxel 175mg/m2 IV Day 1; Carboplatin AUC 5-6 IV Day 1; Q21 days Note: For use in Anaplastic thyroid cancer	Approved
Gastrointestinal	Hepatobiliary / Liver / Bile Duct	Palliative	MFOLFOX6	Oxaliplatin 85 mg/m² IV day 1; Leucovorin 400 mg/m² IV day 1; Fluorouracil 400 mg/m² IV day 1; THEN Fluorouracil 2400 mg/m² CIV over 46 hours day 1. Q14 days	Approved
Gastrointestinal	Colorectal	Palliative	NIVL+IPIL	Nivolumab 3mg/kg IV Day1- Not currently publicly funded for this regimen and intent; Ipilimumab 1mg/kg IV Day 1 - Not currently publicly funded for this regimen and intent; Q21 Days Note: For MSI high (deficient MMR) colorectal cancer	Approved
Gastrointestinal	Colorectal	Palliative	NIVL(MNT)	Following NIVL+IPIL: Nivolumab 3mg/kg IV Day1- Not currently publicly funded for this regimen and intent; Q14 Days	Approved
Gastrointestinal	Anus	Palliative	CISPDOCEFU	Docetaxel 40 mg/m2 IV Day 1; Cisplatin 40 mg/m2 IV Day 1; Fluorouracil 2400 mg/m2 IV continuous infusion over Days 1 and 2 (single dose); Q14 Days	Approved

Disease Site	Sub-Disease Site	Intent	Regimen Code	Regimen Details	Status (as of March 29, 2019)
Gastrointestinal	Pancreas	Palliative	FLOX	Oxaliplatin 85 mg/m² IV day 1; Leucovorin 500 mg/m² IV days 1, 8 , 15, 22, 29, 36; Fluorouracil 500 mg/m² IV days 1, 8, 15, 22, 29, 36; Q56days (6 weeks on, 2 off)	Not Approved
Gastrointestinal	Colorectal (Rectal)	Neoadjuv ant	mFOLFOX	Oxaliplatin 85 mg/m² IV day 1; Leucovorin 400 mg/m² IV day 1; Fluorouracil 400 mg/m² IV day 1; THEN Fluorouracil 2400 mg/m² CIV over 46 hours day 1. Q14 days	Approved
Gastrointestinal	Colorectal	Palliative	mXELIRI+/-BEVA	Capecitabine 800 mg/m² PO BID days 1-14; Irinotecan 200 mg/m² IV day 1; With or Without: Bevacizumab 7.5 mg/kg IV day 1- not currently publicly funded for this regimen and intent; Q21 days	Pending
Gastrointestinal	Hepatobilary/Liver / Bile duct	Palliative	FOLFIRI	Irinotecan 180 mg/m2 IV day 1; Leucovorin 400 mg/m2 IV day 1; Fluorouracil 400 mg/m2 IV day 1; THEN Fluorouracil 2400 mg/m2 CIV over 46 hours, starting on day 1. Q14 days	Approved
Gastrointestinal	Pancreas	Adjuvant	mFOLFIRINOX	Oxaliplatin 85 mg/m2 IV Day 1; Leucovorin 400 mg/m2 IV day 1; Irinotecan 150 mg/m2 IV day 1; THEN Fluorouracil 2400 mg/m2 CIV over 46 hours, starting on day 1. Q14 days for 12 cycles	Approved
Genitourinary	Prostate	Palliative	APAL	Apalutamide 240 mg po daily- not currently publicly funded for this regimen and intent. Note: For use with GnRH antagonist (unless bilateral orchiectomy)	Approved

Disease Site	Sub-Disease Site	Intent	Regimen Code	Regimen Details	Status (as of March 29, 2019)
Genitourinary	Renal cell	Palliative	NIVL(MNT) (addition of alternative schedules)	After 4 cycles of NIVL+IPIL, give nivolumab as maintenance treatment: Nivolumab 3mg/kg up to 240 mg Day 1 - not currently publicly funded for this regimen and intent. Q14 Days OR Nivolumab 6mg/kg up to 480 mg Day 1 - not currently publicly funded for this regimen and intent. Q28 Days	Approved
Genitourinary	Renal Cell	Palliative	САВО	Cabozantinib 60 mg tablets PO daily— not currently publicly funded for this regimen and intent.	Approved
Genitourinary	Bladder/Urothelial	Adjuvant / Curative; Palliative	CISPGEMC(Q2W)	Cisplatin 35 mg/m ² IV Days 1 and 15; Gemcitabine 2500 mg/m ² IV Days 1 and 15; Q28 days	Approved (Palliative) Not Approved (Adjuvant/Cur ative)
Genitourinary	Bladder/Urothelial	Adjuvant / Curative	GEMC(RT)	Concurrent with Radiation: Gemcitabine 100 mg/m² IV Days 1, 8, 15, and 22; Q28 Days	Approved
Genitourinary	Bladder/Urothelial	Palliative	MFOLFOX6	Oxaliplatin 85 mg/m² IV day 1; Leucovorin 400 mg/m² IV day 1; Fluorouracil 400 mg/m² IV day 1; THEN Fluorouracil 2400 mg/m² CIV over 46 hours day 1. Q14 days Note: For use in Urachal cancer	Approved
Genitourinary	Renal Cell	Palliative	NIVL+IPIL	Nivolumab 3mg/kg IV Day 1- Universal Compassionate access program available; Ipilimumab 1mg/kg IV Day 1- Universal Compassionate access program available; Q21 Days X 4 then	Approved

Disease Site	Sub-Disease Site	Intent	Regimen Code	Regimen Details	Status (as of March 29, 2019)
			NIVL(MNT)	Nivolumab 3mg/kg IV Day 1 - not currently publicly funded for this regimen and intent. Q14 Days	
Gynecological	Ovarian	Palliative	MFOLFOX6	Oxaliplatin 85 mg/m² IV day 1; Leucovorin 400 mg/m² IV day 1; Fluorouracil 400 mg/m² IV day 1; THEN Fluorouracil 2400 mg/m² CIV over 46 hours day 1. Q14 days Note: For mucionous ovarian cancer	Approved
Gynecological	Vulva	Palliative	PACL(W)	Paclitaxel 80mg/m ² IV Days 1, 8, 15 and 22; Q 28 Days	Not Approved
Gynecological	Endometrial	Palliative	MEGETMXF	Megestrol 80 mg PO BID days 1 to 21; THEN Tamoxifen 20mg PO BID days 22 to 42 Q 42 days (3 weeks of MEGE, alternating with 3 weeks of TMXF)	Approved
Hematologic	Leukemia- Acute Lymphoblastic (ALL)	Palliative	INOT	Cycle 1: Inotuzumab ozogamicin 0.8 mg/m2 IV Day 1 Inotuzumab ozogamicin 0.5 mg/m2 IV days 8 and 15— not currently publicly funded for this regimen and intent; Q 21days Then Cycle 2+: For patients who achieve a CR or CRi: Inotuzumab ozogamicin 0.5 mg/m2 IV days1, 8 and 15— not currently publicly funded for this regimen and intent; OR For patients who do not achieve a CR or CRi: Inotuzumab ozogamicin 0.8 mg/m2 IV Day 1 Inotuzumab ozogamicin 0.5 mg/m2 IV days 8 and 15— not currently publicly funded for this regimen and intent;	Approved

Disease Site	Sub-Disease Site	Intent	Regimen Code	Regimen Details	Status (as of March 29, 2019)
				Q28 days	
				CR=complete remission; Cri= complete remission with incomplete hematologic recovery	
Hematologic	Multiple Myeloma	Palliative	DENO	Denosumab 120 mg SC – not currently publicly funded for this regimen and intent; Q 28 days	Approved
Hematologic	Lymphoma – T Cell	Palliative	PRAL	Pralatrexate 30 mg/m2 IV on Days 1, 8, 15, 22, 29, 36 – not currently publicly funded for this regimen and intent; Q49 Days (once weekly for 6 out of 7 weeks)	Approved
Hematologic	Lymphoma – Non- Hodgkin's Low Grade	Palliative	RITU(MNT-SC)	RiTUXimab (SC) 1400 mg SC Day 1; Q3 months Note: Rituximab SC can only be given if the patient has previously received at least one full rituximab IV dose.	Approved
Lung	Non-Small Cell	Palliative	ATEZ	Atezolizumab 1200 mg IV day 1 – Universal compassionate access program available Q21 days	Approved
Lung	Non-Small Cell	Palliative	BRIG	Brigatinib 90 mg PO once daily on Days 1 to 7-Not currently publicly funded for this regimen and intent; THEN Brigatinib 180 mg PO once daily thereafter	Approved
Lung	Non-Small Cell	Adjuvant / Curative	DURV	Durvalumab 10 mg/kg IV day 1 – not currently publicly funded for this regimen and intent. Q14 days	Approved
Lung	Non-Small Cell	Adjuvant/ Curative	CISPPEME(RT)	CISplatin 75 mg/m² IV day 1; Pemetrexed 500 mg/m² IV day 1 – Not currently publicly funded for this regimen and intent Q21 days Concurrent with radiotherapy	Approved

Disease Site	Sub-Disease Site	Intent	Regimen Code	Regimen Details	Status (as of March 29, 2019)
Lung	Non-Small Cell	Palliative	CISPPEME+PEMB	CISplatin 75 mg/m2 IV day 1; Pemetrexed 500 mg/m² IV day 1; Pembrolizumab 200mg IV day 1 - not currently publicly funded for this regimen and intent. Q21 days Note: For first-line use in patients with no EGFR or ALK mutation	Approved
Lung	Non-Small Cell	Palliative	СКВРРЕМЕ+РЕМВ	CARBOplatin AUC 5 IV day 1; Pemetrexed 500 mg/m² IV day 1; Pembrolizumab 200mg IV day 1 - not currently publicly funded for this regimen and intent. Q21 days Note: For first-line use in patients with no EGFR or ALK mutation	Approved
Lung	Non-Small Cell	Palliative	PEME+PEMB(MNT)	After 4 cycles of CRBPPEME+PEMB or CISPPEME+PEMB as maintenance treatment: Pemetrexed 500 mg/m² IV day 1; Pembrolizumab 200mg IV day 1 - not currently publicly funded for this regimen and intent. Q21 days (for up to 31 cycles) Note: For first-line use in patients with no EGFR or ALK mutation	Approved
Lung	Mesothelioma	Palliative	CRBPPEME+BEVA	CARBOplatin AUC 5 IV Day 1; Pemetrexed 500 mg/m2 IV day 1 – not currently publicly funded for this regimen and intent; Bevacizumab 15 mg/kg IV day 1 – not currently publicly funded for this regimen and intent. Q21 days	Approved
Skin	Melanoma	Adjuvant	DABRTRAM	DaBRAFenib 150 mg PO BID – not currently publicly funded for this regimen and intent Trametinib 2 mg PO daily – not currently publicly funded for this regimen and intent	Approved
Skin	Melanoma	Palliative	TALI	Talimogene laherparepvec up to 4 X 10 ⁸ pfu via intralesional injection – Not currently funded for this regimen and intent;	Approved

Disease Site	Sub-Disease Site	Intent	Regimen Code	Regimen Details	Status (as of March 29, 2019)
				Q 14-21 days Note: the amount injected depends on the number and size of lesions. Doses should not exceed 4 X 10 ⁸ pfu.	

ST-QBP Regimen Request Status for 2017/18

Below are status of regimen requests submitted for funding considerations in FY 17/18 Q1 to Q4 (final).

Requests with "Approved" status will be updated on the ST-QBP website and will be reflected in an upcoming operational report in iPort.

Updated as of April 6, 2018

Disease Site	Sub-Disease Site	Intent	Regimen Code	Regimen Details	Status (as of April 6, 2018)
Breast	Not Applicable	Adjuvant / Curative	CAPE	Capecitabine 1250 mg/m ² PO BID days 1-14 – not currently publicly funded for this regimen and intent. Q21 days	Approved
				Note: For use as adjuvant therapy in patients with residual disease after neoadjuvant chemotherapy. The Breast Drug Advisory Committee notes that a greater magnitude of benefit was seen in patients with triple-negative disease based on the subset analysis from the CREATE-X trial, and that consideration be given towards an upfront dose adjustment to facilitate tolerability and completion of the planned number of treatment cycles.	
Breast	Not Applicable	Palliative	FLVSPALB	Fulvestrant 500 mg IM days 1, 15, 29 (loading dose) – not currently publicly funded for this regimen and intent THEN Fulvestrant 500 mg IM day 1; Palbociclib 125 mg PO days 1-21 – not currently publicly funded for this regimen and intent. Q28 days	Approved
Breast	Not Applicable	Palliative	OLAP	Olaparib 300 mg PO bid (tablet formulation) – not currently publicly funded for this regimen and intent.	Approved
CNS	Not Applicable	Adjuvant / Curative & Palliative	VNCR(RT-W)	VinCRIStine 1.5 mg/m² (maximum: 2 mg) IV day 1; Weekly during concurrent radiotherapy (to a maximum of eight doses)	Approved
Gastrointestinal	Colorectal	Palliative	FOLFIRI+CETU	Proposed alternative schedule for cetuximab: Cetuximab 500 mg/m² IV day 1 – Not currently publicly funded for this regimen and intent. Q14 days	Approved

Disease Site	Sub-Disease Site	Intent	Regimen Code	Regimen Details	Status (as of April 6, 2018)
Gastrointestinal	Colorectal	Palliative	FOLFIRI+PNTM	PANitumumab 6 mg/kg IV day 1 – not currently publicly funded for this regimen and intent; Followed by: Irinotecan 180 mg/m² IV day 1; Leucovorin 400 mg/m² IV day 1; Fluorouracil 400 mg/m² IV day 1; THEN Fluorouracil 2400 mg/m² CIV over 46 hours, starting on day 1. Q14 days	Approved
Gastrointestinal	Colorectal	Palliative	TRIFTIPI	Trifluridine/tipiracil 35 mg/m² (up to a maximum of 80 mg per dose) (based on the trifluridine component) PO BID days 1 to 5 and days 8 to 12 – not currently publicly funded for this regimen and intent. Q28 days	Approved
Gastrointestinal	Gastroesophageal	Adjuvant / Curative	FLODOCE	DOCEtaxel 50 mg/m² IV day 1; Oxaliplatin 85 mg/m² IV day 1 – not currently publicly funded for this regimen and intent; Leucovorin 200* mg/m² IV day 1; Fluorouracil 2600 mg/m² CIV over 24 hours day 1. Q14 days Note: *the racemic mixture of leucovorin was used in the FLOT4 trial by Al-Batran SE et al.	Approved
Gastrointestinal	Gastroesophageal	Adjuvant / Curative & Palliative	MFOLFOX6(RT)	Oxaliplatin 85 mg/m² IV day 1 – Not currently publicly funded for this regimen and intent; Leucovorin 200* mg/m² IV day 1; Fluorouracil 400 mg/m² IV day 1; THEN Fluorouracil 1600 mg/m² CIV over 46 hrs day 1. Q14 days	Approved

Disease Site	Sub-Disease Site	Intent	Regimen Code	Regimen Details	Status (as of April 6, 2018)
				Note: The first 3 cycles will be given concurrently with radiotherapy (over 5 weeks), with the final 3 cycles given after radiotherapy. The doses of leucovorin and infusional fluorouracil used as part of this regimen differ from those in the conventional modified FOLFOX-6 regimen (regimen code: MFOLFOX6). *The racemic mixture of leucovorin was used in the PRODIGE5/ACCORD17 trial by Conroy T et al.	
Gastrointestinal	Gastroesophageal	Palliative	NIVL	Nivolumab 3 mg/kg IV day 1 – not currently publicly funded for this regimen and intent. Q14 days	Approved
Gastrointestinal	Hepatobiliary	Adjuvant / Curative	CAPE	Capecitabine 1250 mg/m ² PO BID days 1-14 – not currently publicly funded for this regimen and intent. Q21 days	Pending
Gastrointestinal	Hepatobiliary	Palliative	REGO	Regorafenib 160 mg PO days 1-21 – not currently publicly funded for this regimen and intent. Q28 days	Approved
Gastrointestinal	Pancreatic	Palliative	CAPE(RT)	Capecitabine 830 mg/m ² PO bid on days of radiotherapy (5 days/week) – not currently publicly funded for this regimen and intent.	Approved
Gastrointestinal	Pancreatic	Palliative	FOLFNALIRI	Nanoliposomal irinotecan 80 mg/m² (equivalent to 70 mg/m² of irinotecan free base) IV day 1 – not currently publicly funded for this regimen and intent. Universal compassionate access program available. Leucovorin 400 mg/m² IV day 1; Fluorouracil 2400 mg/m² CIV over 46 hours day 1. Q14 days	Approved
Gastrointestinal	Pancreatic	Palliative	GEMC(RT)	Gemcitabine 40 mg/m ² IV day 1 and day 4; Biweekly during concurrent radiotherapy	Not Approved
Gastrointestinal	All sub-diseases	Palliative	ZOLE	Zoledronic acid 4 mg IV day 1. Q21 days	Approved
Genitourinary	Prostate	Palliative	ABIRDEXA	Abiraterone 1000 mg PO daily; Dexamethasone 0.5 mg PO daily	Approved

Disease Site	Sub-Disease Site	Intent	Regimen Code	Regimen Details	Status (as of April 6, 2018)
Genitourinary	Prostate	Adjuvant / Curative	DGRL	Degarelix 240 mg SC Q 1 month X1 then 80 mg SC Q1 month	Approved
Genitourinary	Bladder/Urothelial	Palliative	DURV	Durvalumab 10 mg/kg IV day 1 – not currently publicly funded for this regimen and intent. Q14 days	Approved
Genitourinary	Bladder/Urothelial	Palliative	PEMB(FIXED)	Pembrolizumab 200 mg IV day 1 – not currently publicly funded for this regimen and intent. Q21 days	Approved
Genitourinary	Penile	Neoadjuvant	TIP(MOD)	PACLitaxel 175 mg/m² IV day 1; Mesna 400 mg/m² IV (pre-ifosfamide) days 1-3; Ifosfamide 1200 mg/m² IV days 1-3; CISplatin 25 mg/m² IV days 1-3; Mesna 200 mg/m² IV or 400 mg/m² PO (4 and 8 hours post-ifosfamide) days 1-3. Q21-28 days	Approved
Gynecology	Endometrial	Adjuvant / Curative	CISP(RT)	CISplatin 50 mg/m² IV days 1, 22 Concurrent with radiotherapy. Note: *For use in high-risk, stage III disease only. For the adjuvant chemotherapy portion to follow using 4 cycles of CARBOplatin and PACLitaxel, please report as regimen code: CRBPPACL*	Approved
Gynecology	Endometrial	Palliative	IFOSPACL	Ifosfamide 1600 mg/m ² IV days 1-3; PACLitaxel 135 mg/m ² IV day 1; Mesna (refer to Mesna table). Q21 days	Approved
Gynecology	Ovarian	Palliative	OLAP	Updated Dose: Olaparib 300 mg PO bid (tablet formulation) or 400 mg PO bid (capsule formulation) – not currently publicly funded for this regimen and intent.	Approved

Disease Site	Sub-Disease Site	Intent	Regimen Code	Regimen Details	Status (as of April 6, 2018)
				Note: For use as maintenance treatment in platinum-sensitive, relapsed disease with a BRCA1/2 mutation	
Gynecology	Ovarian	Palliative	PGLDX+BEVA	Pegylated Liposomal DOXOrubicin 40 mg/m² IV day 1 – not currently publicly funded for this regimen and intent; Bevacizumab 10 mg/kg IV days 1, 15 – not currently publicly funded for this regimen and intent. Q28 days	Approved
Gynecology	Ovarian	Palliative	TOPO+BEVA	Topotecan 1.25 mg/m² IV days 1-5 – not currently publicly funded for this regimen and intent; Bevacizumab 15 mg/kg IV day 1 – not currently publicly funded for this regimen and intent. Q21 days	Approved
Gynecology	Ovarian	Palliative	TOPO(W)+BEVA	Topotecan 4 mg/m² IV days 1, 8, 15 – not currently publicly funded for this regimen and intent; Bevacizumab 10 mg/kg IV days 1, 15 – not currently publicly funded for this regimen and intent. Q28 days	Approved
Head & Neck	Head & Neck	Palliative	CISPVINO	CISplatin 80 mg/m ² IV day 1; Vinorelbine 25 mg/m ² IV days 1, 8. Q21 days	Approved
Head & Neck	Not Applicable	Adjuvant / Curative	CRBPFU	CARBOplatin AUC 5 IV day 1; Fluorouracil 1000 mg/m²/day CIV days 1-4. Q28 days	Approved
Head & Neck	Not Applicable	Palliative	CAPECISP	CISplatin 75 mg/m ² IV day 1; Capecitabine 1000 mg/m ² PO bid days 1-14 – not currently publicly funded for this regimen and intent. Q21 days	Approved
Head & Neck	Not Applicable	Palliative	CAPECRBP	CARBOplatin AUC 5 IV day 1; Capecitabine 1000 mg/m ² PO bid days 1-14 – not currently publicly funded for this regimen and intent. Q28 days	Approved
Head & Neck	Not Applicable	Palliative	CAPECISP+CETU	CISplatin 100 mg/m ² IV day 1;	Approved

Disease Site	Sub-Disease Site	Intent	Regimen Code	Regimen Details	Status (as of April 6, 2018)
				Capecitabine 1000 mg/m² PO bid days 1-14 – not currently publicly funded for this regimen and intent; Cetuximab 400 mg/m² IV DAY 1 CYCLE 1 ONLY; THEN Cetuximab 250 mg/m² IV weekly – not currently publicly funded for this regimen and intent. Q21 days	
Head & Neck	Not Applicable	Palliative	CAPECRBP+CETU	CARBOplatin AUC 5 IV day 1; Capecitabine 1000 mg/m² PO bid days 1-14 - not currently publicly funded for this regimen and intent; Cetuximab 400 mg/m² IV DAY 1 CYCLE 1 ONLY; THEN Cetuximab 250 mg/m² IV weekly – not currently publicly funded for this regimen and intent. Q21 days	Approved
Hematology	T Cell Lymphoma	Adjuvant / Curative	DDGP	Pegylated asparaginase (pegaspargase) 2500 units/m² IM/IV day 1 – not currently publicly funded for this regimen and intent; Gemcitabine 800 mg/m² IV days 1 and 8; CISplatin 20 mg/m² IV days 1-4; Dexamethasone 15 mg/m² IV/PO days 1-5. Q21 days Note: for NK/T-Cell Lymphoma	Approved
Hematology	T Cell Lymphoma	Adjuvant/ Curative	СНОР	prednisone 100 mg PO daily Days 1 to 5 DOXOrubicin 50 mg /m² IV Day 1 vinCRIStine 1.4 mg /m² IV (maximum 2 mg) Day 1 cyclophosphamide 750 mg /m² IV Day 1 Q21 days	Approved
Hematology	T Cell Lymphoma	Adjuvant/ Curative	СНОЕР	prednisone 100 mg PO daily Days 1 to 5 DOXOrubicin 50 mg /m² IV Day 1 vinCRIStine 1.4 mg /m² IV (maximum 2 mg) Day 1 cyclophosphamide 750 mg /m² IV Day 1 etoposide 100 mg /m² IV Day 1	Approved

Disease Site	Sub-Disease Site	Intent	Regimen Code	Regimen Details	Status (as of April 6, 2018)
				THEN, etoposide 200 mg /m² PO Days 2 to 3 q21days	
Hematology	High Grade Lymphoma	Adjuvant/ Curative	GCVP+RITU	Rituximab 375 mg/m² Day 1; Gemcitabine 750 – 1000 mg/m² Days 1 and 8; Cyclophosphamide 750 mg/m² Day 1 Vincristine 1.4 mg/m² Day 1 (cap at 2 mg) Prednisone 100 mg PO Days 1-5 Q 21 days Note: For use in DLBCL when anthracycline is contraindicated.	Approved
Hematology	High Grade Lymphoma	Palliative	GCVP+RITU	Rituximab 375 mg/m2 Day 1 – not currently publicly funded for this regimen and intent; Gemcitabine 750 – 1000 mg/m2 Days 1 and 8; Cyclophosphamide 750 mg/m2 Day 1 VinCRIStine 1.4 mg/m2 Day 1 (max 2 mg) Prednisone 100 mg PO Days 1-5 Q 21 days Note: For use in DLBCL when anthracycline is contraindicated.	Approved
Hematology	Acute Lymphoblastic Leukemia	Adjuvant / Curative	DANAFARBER(IN T-PEG)	DOXOrubicin 30 mg/m² IV day 1 (cycles 1-7 only); vinCRIStine 2 mg IV day 1; Dexamethasone 9 mg/m²/dose PO bid days 1-5; Mercaptopurine 50 mg/m²/day PO days 1-14; Pegylated asparaginase (pegaspargase) 2000 units/m² (maximum dose: 3750 units) IV/IM day 1 – not publicly funded. Universal compassionate access program available; Methotrexate 30 mg/m² IV/IM days 1, 8, 15 (cycles 8-10 only) Methotrexate 12 mg IT + Cytarabine 40 mg IT + Hydrocortisone 15 mg* IT day 1 (cycle 6 only) Q21 days	Approved
				Note: *An alternative hydrocortisone dose of 50 mg IT may be used, based on local protocol	

Disease Site	Sub-Disease Site	Intent	Regimen Code	Regimen Details	Status (as of April 6, 2018)
Hematology	Acute Myeloid Leukemia	Adjuvant / Curative	CYTA(HD)+MIDO	Cytarabine 3000 mg/m² IV q12hours days 1, 3, 5; Midostaurin 50 mg PO bid days 8-21 – not currently publicly funded for this regimen and intent. Q28 days Note: For use as consolidative therapy in patients with a FLT3 mutation	Approved
Hematology	Acute Myeloid Leukemia	Adjuvant / Curative	MIDO(MNT)	Midostaurin 50 mg PO bid days 1-14 – not currently publicly funded for this regimen and intent. Q28 days Note: For use as maintenance therapy in patients with a FLT3 mutation	Pending
Hematology	Hodgkin	Palliative	PEMB(FIXED)	Pembrolizumab 200 mg IV day 1 – not currently publicly funded for this regimen and intent; Q21 days	Approved
Hematology	Low Grade Lymphoma	Palliative	BEND+OBIN and OBIN(MNT)	BEND+OBIN: Bendamustine 90 mg/m² IV days 1-2 – not currently publicly funded for this regimen and intent; oBINutuzumab 1000 mg IV days 1, 8, 15 (cycle 1 only) THEN oBINutuzumab 1000 mg IV day 1 of cycles 2 to 6 – not currently publicly funded for this regimen and intent; Q28 days Note: **For use in patients with rituximab-refractory disease. See GADOLIN paper for details. For maintenance use, report as Regimen Code: OBIN(MNT) after BEND+OBIN induction** OBIN(MNT): oBINutuzumab 1000 mg IV day 1 – not currently publicly funded for this regimen and intent; Q8 weeks (until disease progression or for up to 2 years)	Approved
Hematology	Low Grade Lymphoma	Palliative	BORTGEMC	Bortezomib 1 mg/m² IV/SC days 1, 4, 8, 11 – not currently publicly funded for this regimen and intent; Gemcitabine 1000 mg/m² IV days 1, 8.	Approved

Disease Site	Sub-Disease Site	Intent	Regimen Code	Regimen Details	Status (as of April 6, 2018)
				Q21 days	
Hematology	Low Grade Lymphoma	Palliative	GDP	Gemcitabine 1000 mg/m² IV days 1 and 8; Dexamethasone 40 mg PO days 1-4; CISplatin 75 mg/m² IV day 1. Q21 days Note: For use in selected patients with R/R indolent NHL	Approved
Hematology	Non-Hodgkin Lymphoma – High Grade	Adjuvant / Curative	LENA(MNT)	Lenalidomide 25 mg PO daily for 21 days; q28 days1 – not currently publicly funded for this regimen and intent Note: As maintenance for patients 60-80 years old, who achieved CR or PR after first-line R-CHOP	Approved
Hematology	Myeloma	Palliative	PAD/VCD	Cycles 1 and 3: Bortezomib 1.3 mg/m² SC days 1, 4, 8, 11; Pegylated Liposomal DOXOrubicin 30 mg/m² IV day 4 – not currently publicly funded for this regimen and intent; Dexamethasone 40 mg PO days 1, 4, 8, 11. Q21 days Cycles 2 and 4: Bortezomib 1.3 mg/m² SC days 1, 4, 8, 11; Cyclophosphamide 300 mg/m² PO days 1, 8; Dexamethasone 40 mg PO days 1, 4, 8, 11. Q21 days Note: For use as an induction regimen pre-stem cell transplant in primary plasma cell leukemia	Approved
Lung	Mesothelioma	Palliative	VINO(W)	Vinorelbine 30 mg/m² (maximum: 60 mg) IV days 1, 8, 15, 22, 29, 36. Q42 days	Approved
Lung	Non-Small Cell	Palliative	LORL	Lorlatinib 100 mg PO daily— not currently publicly funded for this regimen and intent.	Not Approved

Disease Site	Sub-Disease Site	Intent	Regimen Code	Regimen Details	Status (as of April 6, 2018)
Lung	Small Cell	Palliative	CISPIRIN	CISplatin 30 mg/m ² IV days 1, 8; Irinotecan 65 mg/m ² IV days 1, 8. Q21 days Alternative Schedule: CISplatin 80 mg/m ² IV day 1;	Approved
				Irinotecan 65 mg/m² IV days 1, 8. Q21 days Alternative Schedule:	
				CISplatin 60 mg/m² IV day 1; Irinotecan 60 mg/m² IV days 1, 8, 15. Q28 days	
Sarcoma	Soft Tissue	Palliative	DOXO+OLAR	DOXOrubicin 75mg/m2 IV d1 Olaratumab 15mg/kg IV d1, 8 – not currently publicly funded for this regimen and intent Q21 Days (for up to 8 cycles)	Approved
Sarcoma	Soft Tissue	Palliative	OLAR(MNT)	Olaratumab* 15mg/kg IV d1, 8 – not currently publicly funded for this regimen and intent Q21 Days *as maintenance therapy following combination treatment with DOXOrubicin	Approved
Skin	Melanoma	Adjuvant / Curative	ALDE(INTRALESIO NAL)	Aldesleukin up to 22 million IU via intralesional injection. Q7-14 days Note: The amount injected depends on the number and size of in-transit metastases. Doses should not exceed 1 vial (22 million IU) per cycle.	Approved
Skin	Melanoma	Palliative	COBIVEMU	Cobimetinib 60 mg PO days 1-21 – not currently publicly funded for this regimen and intent; VemURAFenib 960 mg PO BID (continuously) – not currently publicly funded for this regimen and intent. Q28 days	Approved

Disease Site	Sub-Disease Site	Intent	Regimen Code	Regimen Details	Status (as of April 6, 2018)
Skin	Merkel Cell	Palliative	AVEL	Avelumab 10 mg/kg IV – not currently publicly funded for this regimen and intent. Q14 days	Approved
Skin	Squamous Cell	Palliative	CRBPFU	CARBOplatin AUC 5 IV day 1; Fluorouracil 1000 mg/m²/d CIV days 1-4. Q21 days	Approved
Skin	Melanoma	Adjuvant/Cur ative	NIVL	Nivolumab 3mg/kg - not currently publicly funded for this regimen and intent q14 days (for up to 1 year)	Approved

ST-QBP Regimen Request Status for 2016/17

Below are status of regimen requests submitted for funding considerations in FY 16/17 Q1 to Q4 (final).

Requests with "Approved" status will be updated on the ST-QBP website and will be reflected in an upcoming operational report in iPort.

Updated as of March 2, 2017

Disease Site	Sub-Disease Site	Intent	Regimen Code	Regimen Details	Status (as of March 2, 2017)
Breast	N/A	Neoadjuvant	DOCE+PERT+TRAS	DOCEtaxel 75-100 mg/m² IV day 1 – not currently publicly funded for this regimen and intent; PERTuzumab 840 mg IV loading dose followed by 420 mg IV day 1 – not currently publicly funded for this regimen and intent; Trastuzumab 8 mg/kg IV loading dose followed by 6 mg/kg IV – not currently publicly funded for this regimen and intent. Q21 days	Not approved
Breast	N/A	Palliative	LETRPALB	Letrozole 2.5 mg PO daily (continuously) – not currently publicly funded for this regimen and intent; Palbociclib 125 mg PO days 1-21 – not currently publicly funded for this regimen and intent. Q28 days	Approved
Breast	N/A	Palliative	ZOLE	Alternative Schedule: Zoledronic acid 4 mg IV day 1. Q84 days	Approved
Gastrointestinal	Colorectal	Adjuvant / Curative & Palliative	OXALRALT	Alternative Schedule: Oxaliplatin 100-130 mg/m² IV day 1; Raltitrexed 3 mg/m² IV day 1 – Not currently publicly funded for this regimen and intent Q21 days	Approved
Gastrointestinal	Gastroesophageal	Neoadjuvant	CISPFU(RT)	Alternative for <u>protracted</u> 5-FU infusion schedule: CISplatin 75 mg/m ² IV days 1 and 29; Fluorouracil 225 mg/m ² /day CIV over 24 hours daily (5 days/week) concurrent with radiation.	Not approved
Gastrointestinal	Gastroesophageal	Adjuvant / Curative	FULCVR(RT-GAST)	Alternative Schedule: Cycle 1:	Approved

Disease Site	Sub-Disease Site	Intent	Regimen Code	Regimen Details	Status (as of March 2, 2017)
				Fluorouracil 425 mg/m² IV days 1-5; Leucovorin 20 mg/m² IV days 1-5. Q28 days <u>Cycle 2:</u> Fluorouracil 200 mg/m² CIV over 24 hours daily concurrent with radiotherapy <u>Cycles 3, 4:</u> Fluorouracil 425 mg/m² IV days 1-5; Leucovorin 20 mg/m² IV days 1-5.	
Gastrointestinal	Gastroesophageal	Adjuvant / Curative	MFOLFOX6	Q28 days Oxaliplatin 85 mg/m² IV day 1 – not currently publicly funded for this regimen and intent; Leucovorin 400 mg/m² IV day 1; Fluorouracil 400 mg/m² IV day 1; THEN Fluorouracil 2400 mg/m² CIV over 46 hrs day 1. Q14 days	Approved
Gastrointestinal	Gastroesophageal	Adjuvant / Curative	XELOX	Capecitabine 1000 mg/m² PO BID day 1-14 – not currently publicly funded for this regimen and intent; Oxaliplatin 130 mg/m² IV day 1 – not currently publicly funded for this regimen and intent. Q21 days	Approved
Gastrointestinal	Hepatobiliary	Adjuvant / Curative	CAPE(RT)	Capecitabine 825 mg/m ² PO BID either on days of radiation (5 days/week), or continuously (7 days/week) during radiotherapy – not currently publicly funded for this regimen and intent.	Approved
Gastrointestinal	NET	Palliative	DCRBEPIRFU	Dacarbazine 200 mg/m² IV days 1-3; EPIrubicin 30 mg/m² IV days 1-3; Fluorouracil 500 mg/m² IV days 1-3. Q21 days	Approved
Gastrointestinal	Pancreatic	Adjuvant / Curative	CAPEGEMC	Capecitabine 830 mg/m² PO BID days 1-21 – not currently publicly funded for this regimen and intent; Gemcitabine 1000 mg/m² IV day 1, 8, 15; Q28 days	Approved

Disease Site	Sub-Disease Site	Intent	Regimen Code	Regimen Details	Status (as of March 2, 2017)
Gastrointestinal	Small Bowel	Palliative	XELOX	Capecitabine 750 mg/m² PO BID days 1-14 – not currently publicly funded for this regimen and intent; Oxaliplatin 130 mg/m² IV day 1 – Prior authorization is required for PDRP funding of oxaliplatin for this regimen. Q21 days	Approved
Genitourinary	Bladder / Urothelial	Palliative	CISPGEMC(W)	CISplatin 35 mg/m² IV day 1, 8; Gemcitabine 1000 mg/m² IV day 1, 8. Q21days	Approved
Genitourinary	Bladder / Urothelial	Palliative	CRBPGEMCPACL	CARBOplatin AUC 5 IV day 1; Gemcitabine 800 mg/m² IV days 1, 8; PACLitaxel 200 mg/m² IV day 1. Q21 days	Approved
Genitourinary	Prostate	Palliative	ECARBOF	EPIrubicin 50 mg/m² IV day 1; CARBOplatin AUC 5 IV day 1; Fluorouracil 200 mg/m²/day CIV over 24 hours days 1-21. Q21 days Note: For the treatment of hormone-refractory prostate cancer with liver metastases	Approved
Genitourinary	Prostate	Palliative	ZOLE	Alternative Schedule: Zoledronic acid 4 mg IV day 1. Q84days	Approved
Gynecology	Endometrial	Adjuvant / Curative	MEDR	Medroxyprogesterone 400-600 mg PO daily	Approved
Gynecology	Endometrial	Adjuvant / Curative	MEGE	Megestrol acetate 160-320 mg PO daily	Approved
Gynecology	Ovarian	Palliative	DOCE	DOCEtaxel 75-100 mg/m² IV day 1.* Q21 days Note: *Gynecology Drug Advisory Committee recommends initiation at the lower end of the dose range. Dose may be increased if tolerated and appropriate.	Approved
Gynecology	Ovarian	Palliative	DOCE(W)	DOCEtaxel 30-40 mg/m² IV days 1, 8, 15. Q28 days	Approved

Disease Site	Sub-Disease Site	Intent	Regimen Code	Regimen Details	Status (as of March 2, 2017)
				Note: *Gynecology Drug Advisory Committee recommends initiation at the lower end of the dose range. Dose may be increased if tolerated and appropriate.	
Gynecology	Ovarian	Palliative	DOXO	DOXOrubicin 50-60 mg/m² IV day 1. Q21 days Note: For use in patients unable to tolerate pegylated liposomal DOXOrubicin	Not approved
Gynecology	Ovarian	Palliative	DOXO(W)	DOXOrubicin 10-20 mg/m² IV day 1, 8, 15. Q28 days Note: For use in patients unable to tolerate pegylated liposomal DOXOrubicin	Not approved
Gynecology	Vulvar	Palliative	CISP(RT-W)	CISplatin 40 mg/m² (maximum dose: 70 mg) IV day 1; Weekly during concurrent radiotherapy	Approved
Gynecology	Vulvar	Palliative	CISPVINO	CISplatin 80 mg/m ² IV day 1; Vinorelbine 25 mg/m ² IV days 1, 8. Q21 days	Approved
Head and Neck	Head and Neck	Palliative	CRBPPACL(W)	CARBOplatin AUC 5 IV day 1; PACLitaxel 80 mg/m² IV days 1, 8, 15. Q28 days	Not approved
Head and Neck	Head and Neck	Palliative	PACL(W)+CETU	PACLitaxel 80 mg/m² IV days 1, 8, 15, 22; Cetuximab 400 mg/m² IV DAY 1 CYCLE 1 only; THEN Cetuximab 250 mg/m² IV weekly – not currently publicly funded for this regimen and intent. Q28 days	Disregard as per facility
Head and Neck	Head and Neck	Adjuvant / Curative	CRBP(RT-3W)	CARBOplatin AUC 6 IV days 1, 22, 43; Concurrent with radiotherapy	Approved
Head and Neck	Head and Neck	Palliative	NIVL	Nivolumab 3 mg/kg IV day 1 – not currently publicly funded for this regimen and intent. Q14 days	Approved
Hematology	Intermediate grade lymphoma	Palliative	GDCRBP	Gemcitabine 1000 mg/m² IV day 1 and 8; Dexamethasone 40 mg PO days 1-4; CARBOplatin AUC 5 IV day 1. Q21 days	Approved
Hematology	Intermediate grade lymphoma	Adjuvant / Curative	MATRIX	Rituximab 375 mg/m ² IV days –5 and 0 – not currently publicly funded for this regimen and intent.	Approved

Disease Site	Sub-Disease Site	Intent	Regimen Code	Regimen Details	Status (as of March 2, 2017)
				Methotrexate* 3500 mg/m² IV day 1; Cytarabine* 2000 mg/m² IV Q12hours days 2 and 3; Thiotepa* 30 mg/m² IV day 4 – not currently publicly funded for this regimen and intent; Q21 days	
				Note: only the portion of this regimen delivered on an outpatient basis will be considered within scope for ST-QBP funding. Inpatient portions are denoted with an "*".	
Hematology	Low grade lymphoma	Palliative	BORTDEXA+RITU	Induction: Bortezomib 1.3 mg/m² IV days 1, 4, 8, 11 – not currently publicly funded for this regimen and intent; Dexamethasone 40 mg IV/PO on days 1, 4, 8, 11; riTUXimab 375 mg/m² IV day 11. Q21 days x 4 cycles	Not approved
				Maintenance: Bortezomib 1.3 mg/m² IV days 1, 4, 8, 11 – not currently publicly funded for this regimen and intent; Dexamethasone 40 mg IV/PO on days 1, 4, 8, 11; riTUXimab 375 mg/m² IV day 11. Q12 weeks x 4 cycles Note: maintenance portion begins 12 weeks after completing the last cycle of induction	
Hematology	Low grade lymphoma	Palliative	BORTDEXA+RITU (updated)	Cycle 1: Bortezomib 1.3 mg/m² IV days 1, 4, 8, 11 – not currently publicly funded for this regimen and intent. Q21 days Cycles 2 and 5 only: Bortezomib 1.6 mg/m² IV days 1, 8, 15, 22 – not currently publicly funded for this regimen and intent; Dexamethasone 40 mg IV on days 1, 8, 15, 22;	Not approved

Disease Site	Sub-Disease Site	Intent	Regimen Code	Regimen Details	Status (as of March 2, 2017)
				riTUXimab 375 mg/m² IV on days 1, 8, 15, 22. Q35 days	
				Cycles 3 and 4: Bortezomib 1.6 mg/m² IV days 1, 8, 15, 22 – not currently publicly funded for this regimen and intent; Q35 days	
Hematology	Hodgkin's	Adjuvant / Curative	BREN(CONS)	Brentuximab 1.8 mg/kg IV – not currently publicly funded for this regimen and intent Q21 days Note: for use in patients with risk factors for relapse or progression postautologous stem cell transplantation	Approved
Hematology	Hodgkin's	Palliative	GDCRBP	Gemcitabine 1000 mg/m² IV day 1 and 8; Dexamethasone 40 mg PO days 1-4; CARBOplatin AUC 5 IV day 1. Q21 days	Approved
Hematology	Hodgkin's	Adjuvant / Curative	MINIBEAM	Carmustine 60 mg/m² IV day 1; Etoposide 75 mg/m² IV days 2-5; Cytarabine 100 mg/m² IV Q12 hours on days 2-5; Melphalan 30 mg/m² IV day 6 (or may give 6 mg/m² IV daily for 5 days, or entire dose on day 5 for outpatient administration). Q28-42 days	Approved
Hematology	AML	Adjuvant / Curative	FLAG+IDA	Fludarabine 30 mg/m² IV days 1-4; Cytarabine 2000 mg/m² IV days 1-4; Filgrastim 300 mcg SC days 1 -4 – not currently publicly funded for the regimen and intent; IDArubicin 10 mg/m² IV days 1-2. Q28 days	Approved
Hematology	CLL	Palliative	VENE	Week 1: Venetoclax 20 mg PO daily – not currently publicly funded for this regimen and intent; Week 2: Venetoclax 50 mg PO daily;	Approved

Disease Site	Sub-Disease Site	Intent	Regimen Code	Regimen Details	Status (as of March 2, 2017)
Hematology	CMML &	Palliative	BSLF	Week 3: Venetoclax 100 mg PO daily; Week 4: Venetoclax 200 mg PO daily; THEN Venetoclax 400 mg PO daily. Busulfan 2 mg PO daily until desired response or intolerance then stop. Should	Approved
Hematology	Myeloproliferative	ramative	BSLF	not be taken continuously. Alternative Schedule: Busulfan 4-6 mg PO daily until desired response or intolerance then stop. Should not be taken continuously.	Αρριονεά
Hematology	Myeloma	Palliative	BORTDEXADARA	Cycles 1-3: Bortezomib 1.3 mg/m² SC days 1, 4, 8, 11 – not currently publicly funded for this regimen and intent; Daratumumab 16 mg/kg IV days 1, 8, 15 – not currently publicly funded for this regimen and intent; Dexamethasone 20 mg PO days 1, 2, 4, 5, 8, 9, 11, 12. Q21 days Cycles 4-8: Bortezomib 1.3 mg/m² SC days 1, 4, 8, 11; Daratumumab 16 mg/kg IV day 1; Dexamethasone 20 mg PO days 1, 2, 4, 5, 8, 9, 11, 12. Q21 days Cycle 9 and beyond: Daratumumab 16 mg/kg IV day 1; Q28 days	Approved
Hematology	Myeloma	Palliative	DARADEXALENA	Cycles 1-2: Daratumumab 16 mg/kg IV days 1, 8, 15, 22 – not currently publicly funded for this regimen and intent; Dexamethasone 40 mg* PO days 1, 8, 15, 22;	Approved

Disease Site	Sub-Disease Site	Intent	Regimen Code	Regimen Details	Status (as of March 2, 2017)
				Lenalidomide 25 mg PO days 1-21 – not currently publicly funded for this regimen and intent. Q28 days	
				Cycles 3-6: Daratumumab 16 mg/kg IV days 1, 15; Dexamethasone 40 mg* PO days 1, 8, 15, 22; Lenalidomide 25 mg PO days 1-21. Q28 days	
				Cycle 7 and beyond: Daratumumab 16 mg/kg IV day 1; Dexamethasone 40 mg* PO days 1, 8, 15, 22; Lenalidomide 25 mg PO days 1-21. Q28 days	
				Note: *On daratumumab dosing days, half the dexamethasone dose was administered as a pre-medication on the day of the infusion and half the dose the day after.	
Hematology	Myeloma	Palliative	DEXAIXAZLENA	Ixazomib 4 mg PO days 1, 8, 15 – not currently publicly funded for this regimen and intent; Lenalidomide 25 mg PO days 1-21 – not currently publicly funded for this regimen and intent; Dexamethasone 40 mg PO days 1, 8, 15, 22. Q28 days	Approved
Hematology	Myeloma	Palliative	ZOLE	Alternative Schedule: Zoledronic acid 4 mg IV day 1. Q84 days	Approved
Hematology	T Cell Lymphoma	Adjuvant / Curative	SMILE	Methotrexate 2000 mg/m² IV day 1; Leucovorin 15 mg IV/PO q6h days 2-4; Ifosfamide 1500 mg/m² IV days 2-4; Mesna 300 mg/m² IV at 0, 4 and 8 hours post-ifosfamide, days 2-4; Dexamethasone 40 mg IV/PO days 2-4;	Approved

Disease Site	Sub-Disease Site	Intent	Regimen Code	Regimen Details	Status (as of March 2, 2017)
				Etoposide 100 mg/m² IV days 2-4; L-asparaginase 6000 U/m² IM/IV days 8, 10, 12, 14, 16, 18, 20. Q28 days	
Hematology	Rare Diseases – HLH	Adjuvant / Curative	CYSPDEXAETOP (IND) and CYSPDEXAETOP (CONT)	Induction: (over 8 weeks) cycloSPORINE 3 mg/kg PO BID days 1-56 (adjusted to achieve target trough level of 200 mcg/L) – not currently publicly funded for this regimen and intent*; dexamethasone 10 mg/m² IV/PO days 1-14; dexamethasone 5 mg/m² IV/PO days 15-28; dexamethasone 2.5 mg/m² IV/PO days 29-42; dexamethasone 1.25 mg/m² IV/PO days 43-49; dexamethasone IV/PO tapering schedule days 50-56; etoposide 150 mg/m² IV days 1, 4, 8, 11, 15, 22, 29, 36, 43, 50; methotrexate 12 mg + hydrocortisone 50 mg IT days 15, 22, 29, 36 if CSF abnormal or progressive neurological symptoms. Continuation: cycloSPORINE 3 mg/kg PO BID days 1-14 (adjusted to achieve target trough level of 200 mcg/L) – not currently publicly funded for this regimen and intent*; dexamethasone 10 mg/m² IV/PO days 1-3; etoposide 150 mg/m² IV day 1; Q14 days Note: *timing of cycloSPORINE initiation is patient-specific and at the discretion of the prescribing physician	Not approved (out of scope)
Lung	Non-Small Cell	Palliative	ALEC	Alectinib 600 mg PO bid – not currently publicly funded for this regimen and intent. Note: For use in patients with ALK-positive non-small cell lung cancer (NSCLC)	Approved
				who have progressed on or are intolerant to crizotinib	
Lung	Non-Small Cell	Palliative	CRBPETOP(PO)	CARBOplatin AUC 5 IV day 1; Etoposide 200 mg/m ² PO days 1-3. Q21 days	Approved

Disease Site	Sub-Disease Site	Intent	Regimen Code	Regimen Details	Status (as of March 2, 2017)
Lung	Non-Small Cell	Palliative	DABRTRAM	DaBRAFenib 150 mg PO bid – not currently publicly funded for this regimen and intent; Trametinib 2 mg PO daily – not currently publicly funded for this regimen and intent.	Approved
				Note: For use in patients with BRAF V600E mutation positive advanced non- small cell lung cancer after failure of at least one line of platinum-based systemic therapy	
Lung	Non-Small Cell	Palliative	OSIM	Osimertinib 80 mg PO daily – not currently publicly funded for this regimen and intent.	Approved
				Note: For locally advanced or metastatic EGFR T790M mutation-positive NSCLC who have progressed on or after EGFR TKI therapy	
Lung	Non-Small Cell	Palliative	PEMB	Pembrolizumab 2 mg/kg IV – not currently publicly funded for this regimen and intent. Q21 days	Approved
Lung	Non-Small Cell	Palliative	PEMB(FIXED)	Note: For 2nd line use in patients with a PD-L1 score of 1% or greater Pembrolizumab 200 mg IV day 1 – Not currently publicly funded for this regimen and intent. Q21 days Note: For 1 st line use (PD-L1 TPS of 50% or greater, and no EGFR or ALK mutation)	Approved
Lung	Mesothelioma	Palliative	CRBPGEMC	CARBOplatin AUC 5 IV day 1; Gemcitabine 1000 mg/m² IV days 1, 8. Q21 days Alternative Schedule: CARBOplatin AUC 5 IV day 1; Gemcitabine 1000 mg/m² IV days 1, 8, 15. Q28 days	Approved

Disease Site	Sub-Disease Site	Intent	Regimen Code	Regimen Details	Status (as of March 2, 2017)
Primary Unknown	N/A	Palliative	ECX	EPIrubicin 50 mg/m² IV day 1; CISplatin 60 mg/m² IV day 1; Capecitabine 625 mg/m² PO BID days 1-21 – not currently publicly funded for this regimen and intent. Q21 days	Approved
Primary Unknown	N/A	Palliative	GEMCIRIN	Alternative Schedule: Gemcitabine 750 mg/m² IV days 1, 8, 15; Irinotecan 75 mg/m² IV days 1, 8, 15. Q28 days	Not approved
Sarcoma	Kaposi's	Palliative	VNBL	vinBLAStine 6 mg/m ² IV day 1. Q14 days	Approved
Sarcoma	Soft Tissue	Palliative	PGLDX	Pegylated Liposomal DOXOrubicin 40-50 mg/m ² IV day 1 – Not currently publicly funded for this regimen and intent. Q28 days	Not Approved
Sarcoma	Soft Tissue	Palliative	TMZL	Temozolomide 200 mg/m² PO as a loading dose then 90 mg/m² PO Q12H x 9 doses (days 1-5) – not currently publicly funded for this regimen and intent. Q28 days Alternative Schedule: Temozolomide 75 mg/m²/day PO days 1-42 – not currently publicly funded for this regimen and intent. Q63 days	Approved
Skin	Melanoma	Palliative	ALDE (INTRALESIONAL)	Aldesleukin up to 22 million IU – not currently publicly funded for this regimen and intent. Q7-14 days Note: The amount injected depends on the number and size of in-transit metastases. Doses should not exceed 1 vial (22 million IU) per cycle.	Approved

ST-QBP Regimen Request Status for 2015/16

Below are status of regimen requests submitted for funding considerations in FY 15/16.

Requests with "Approved" status have been updated on the ST-QBP website and will be reflected in an upcoming operational report in iPort. Updated as of May 9, 2016.

Disease Site	Sub-Disease Site	Intent	Regimen Code	Regimen Details	Status (as of May 9, 2016)
BREAST	N/A	PALLIATIVE	CRBP	CARBOplatin AUC 6 IV day 1. Q21 days Note: For use in triple negative or BRCA1/2 mutation-associated breast cancers	Approved
CNS	N/A	PALLIATIVE	TMXF	Tamoxifen 20 mg PO BID; increasing by 20 mg PO BID weekly to a target dose of 80 mg PO BID in females and 100 mg PO BID in males	Not approved
GI	ANAL CANAL	Palliative	CRBPPACL	CARBOplatin AUC 5-6 day 1 PACLitaxel 175 mg/m2 day 1 Q21 days	Approved
		Palliative	CRBPPACL(W)	Carboplatin AUC 5 IV day 1 Paclitaxel 80 mg/m2 IV days 1, 8, 15 Q 28 days	Approved
		Palliative	CAPECISP	CISplatin 60-80 mg/m2 IV day 1 capecitabine 1000 mg/m2 PO BID days 1-14 Q21 days	Previously Approved
	COLORECTAL	Palliative	CAPE	7-day CAPE schedule: capecitabine 1000-1250 mg/m2 BID x 7 days Q14 days	Not approved
		Palliative	CISPIRIN	CISplatin 6mg/m2 days 1, 8, 15 Irinotecan 27mg/m2 days 1, 8, 15 Q 28 days Alternate: CISplatin 30mg/m2 Day 1; Irinotecan 80mg/m2 Day 1; Q 14 days	Not approved
		Palliative	mFOLFOX6 + PNTM	oxaliplatin 85 mg/m2 IV day 1 – Not currently publicly funded for this regimen and intent; leucovorin 400 mg/m2 IV day 1; fluorouracil 400 mg/m2 IV day 1;	Approved

Disease Site	Sub-Disease Site	Intent	Regimen Code	Regimen Details	Status (as of May 9, 2016)
				fluorouracil 2400 mg/m2 CIV over 46 hours day 1;	
				panitumumab 6mg/kg IV day 1 – Not currently publicly funded for this	
				regimen and intent.	
				Q14 days	
	GASTROESOESO	Adjuvant/curative	CISPDOCEFU	DOCEtaxel 75-85 mg/m2 IV day 1;	Not approved
	PHAGEAL			CISplatin 75 mg/m2 IV day 1;	
				Fluorouracil 300 mg/m2/day CIV days 1-14.	
				Q21 days	
		Palliative	CAPECRBP+TRAS	capecitabine 1000 mg/m2 PO BID days 1-14 – not currently publicly funded	Approved
				for this regimen and intent;	
				CARBOplatin AUC 5 IV day 1	
				trastuzumab 8 mg/kg (loading cycle 1, day 1)	
				then 6 mg/kg day 1	
		BALLIA TIV (F	V51.6V	Q21 days	
		PALLIATIVE	XELOX	Capecitabine 1000 mg/m ² PO BID days 1-14 – Not currently publicly funded	Approved
				for this regimen and intent;	
				Oxaliplatin 130 mg/m² IV day 1 – Not currently publicly funded for this	
				regimen and intent.	
		PALLIATIVE	MFOLFOX6	Q21 days Oxaliplatin 85 mg/m² IV day 1 – Not currently publicly funded for this regimen	A
		PALLIATIVE	MFOLFOX6	and intent;	Approved
				Leucovorin 400 mg/m ² IV day 1;	
				Fluorouracil 400 mg/m² IV day 1;	
				THEN	
				Fluorouracil 2400 mg/m ² CIV over 46 hours day 1.	
				Q14 days	
		Palliative	RAMU	Ramucirumab 8 mg/kg IV day 1 – not currently publicly funded for this	Approved
		- dillative	13 11410	regimen and intent	, , , , , , , , , , , , , , , , , , , ,
				Q14 days	
	HEPATOBILLIARY	ADJUVANT and/or	FU(CIV-RT)	Fluorouracil 225 mg/m ² CIV over 24 hours daily	Approved
		CURATIVE and/or	. 5(614 111)	Concurrent with radiotherapy	7.5510464
		NEO-ADJUVANT		consumer and radiotherapy	
		PALLIATIVE	GEMOX	Gemcitabine 1000 mg/m ² IV days 1, 8, 15;	Not approved

Disease Site	Sub-Disease Site	Intent	Regimen Code	Regimen Details	Status (as of May 9, 2016)
				Oxaliplatin 85-100 mg/m ² IV days 1, 15 – Not currently publicly funded for this regimen and intent. Q28 days	
	NET	Palliative	LANREOTIDE	Lanreotide 120 mg SC Q28 days	Approved
	PANCREATIC	Palliative	FU(IV-CIV)LCVR	Leucovorin 400 mg/m ² IV day 1; Fluorouracil 400 mg/m ² IV day 1; THEN Fluorouracil 2400 mg/m ² CIV over 46 hours day 1 Q14 days	Approved
		Palliative	GTX	Capecitabine 750 mg/m2 PO BID days 1-14 – not currently publicly funded for this regimen and intent; Gemcitabine 750 mg/m2 IV days 4, 11; DOCEtaxel 30 mg/m2 IV days 4, 11. Q21 days	Not approved
	SMALL BOWEL & APPENDIX	PALLIATIVE	FOLFIRI+BEVA	Irinotecan 180 mg/m² IV day 1; Leucovorin 400 mg/m² IV day 1; Fluorouracil 400 mg/m² IV day 1; THEN Fluorouracil 2400 mg/m² CIV over 46 hours day 1; Bevacizumab 5 mg/kg IV day 1; Q14 days	Approved

Disease Site	Sub-Disease Site	Intent	Regimen Code	Regimen Details	Status (as of May 9, 2016)
GU	BLADDER	Palliative	ETOP(PO)	Etoposide 50 mg PO BID days 1-14 Q21 days	Approved
		Palliative	DOCE	DOCEtaxel 75 mg/m ² day 1 Q21 days	Approved
		ADJUVANT and/or CURATIVE and/or NEO-ADJUVANT	DOXOGEMCPACL	Gemcitabine 900 mg/m2 IV day 1; PACLitaxel 135 mg/m2 IV day 1; DOXOrubicin 40 mg/m2 IV day 1. Q14 days (up to 9 cycles)	Not approved
	TESTIS	Adjuvant/Curative	CRBP	CARBOplatin AUC 7 IV day 1 Q21 days (for 1 to 2 doses)	Approved
		ADJUVANT and/or CURATIVE and/or NEO-ADJUVANT	BEP(5D)PACL	Bleomycin 30 units fixed dose IV days 1, 8, 15; Etoposide 100 mg/m² IV days 1-5; CISplatin 20 mg/m² IV days 1-5; PACLitaxel 175 mg/m² IV day 1. Q21 days x 4 cycles	Approved
		Adjuvant/Curative	GEMCPACL	PACLitaxel 100 mg/m ² IV day 1, 8, 15; Gemcitabine 1000 mg/m ² IV days 1, 8, 15. Q28 days x 6 cycles	Not approved
		Palliative **Will also list under GYNE – germ cell**	GEMCPACL	PACLitaxel 100 mg/m² IV day 1, 8, 15; Gemcitabine 1000 mg/m² IV days 1, 8, 15. Q28 days	Approved
	RENAL CELL	Palliative	FU(CIV)GEMC	Gemcitabine 600 mg/m ² IV days 1, 8, 15; Fluorouracil 150 mg/m ² /day CIV days 1 to 21. Q28 days	Approved
		Palliative	NIVL	Nivolumab 3mg/kg IV day 1 - Not currently publicly funded for this regimen and intent; Q14 days	Approved
		Palliative	SUNI	Alternative Schedule: SUNItinib 50 mg PO days 1-14 Q21 days	Approved
		Palliative	ZOLE	Zoledronic acid 4 mg IV day 1	Approved

Disease Site	Sub-Disease Site	Intent	Regimen Code	Regimen Details	Status (as of May 9, 2016)
				Q21 days	
	PROSTATE	Palliative	CYCL(PO)	Cyclophosphamide 100 mg/m²/day PO days 1-14; Q28 days	Approved
		Palliative (HRPC with liver metastases)	ECF	EPIrubicin 50 mg/m² IV day 1; CISplatin 60 mg/m² IV day 1; Fluorouracil 200 mg/m²/day CIV Q21 days	Approved
GYNE	CERVICAL	ADJUVANT and/or CURATIVE and/or NEO-ADJUVANT	CRBPPACL(RT)	CARBOplatin AUC 5 IV day 1; PACLitaxel 175 mg/m² IV day 1. Q21 days x 2 cycles Concurrent with low-dose radiation	Approved
	ENDOMETRIAL	ADJUVANT/NEO- ADJUVANT/CURATI VE & PALLIATIVE	CRBPDOCE	CARBOplatin AUC 6 IV day 1; DOCEtaxel 75 mg/m² IV day 1. Q21 days x 6 cycles	Not approved
		PALLIATIVE	GEMC	Gemcitabine 800 mg/m ² IV days 1, 8. Q21 days	Not approved
	GERM CELL	ADJUVANT and/or CURATIVE and/or NEO-ADJUVANT	TIP	PACLitaxel 250 mg/m² IV day 1; mesna 500 mg/m² IV (pre-ifosfamide) days 2-5; ifosfamide 1500 mg/m² IV days 2-5; CISplatin 25 mg/m² IV days 2-5; mesna 500 mg/m² IV (or 1000 mg/m² PO) at 4 and 8 hours post-ifosfamide, days 2-5. Q21 days x 4 cycles	Approved
	GERM CELL	ADJUVANT and/or CURATIVE and/or NEO-ADJUVANT	BEP(5D)PACL	Bleomycin 30 units fixed dose IV days 1, 8, 15; Etoposide 100 mg/m² IV days 1-5; CISplatin 20 mg/m² IV days 1-5; PACLitaxel 175 mg/m² IV day 1. Q21 days x 4 cycles	Approved
	GYNE SARCOMA	PALLIATIVE	IRINTMZL	Irinotecan 20 to 50 mg/m² IV daily, days 1 to 5; Temozolomide 100 mg/m² PO daily, days 1 to 5 – not currently publicly funded for this regimen and intent. Q21 days	Not approved

Disease Site	Sub-Disease Site	Intent	Regimen Code	Regimen Details	Status (as of May 9, 2016)
	OVARIAN	PALLIATIVE	OLAP	Olaparib 400 mg PO BID continuous until progression – not currently publicly funded for this regimen and intent	Approved
		PALLIATIVE	PACL(W)+BEVA	PACLitaxel 80 mg/m ² IV on Days 1, 8, 15, 22; Bevacizumab 10 mg/kg IV on Days 1, 15 – not currently publicly funded for this regimen and intent. Q28 days	Approved
	VULVAR	PALLIATIVE	CISPPACL	CISplatin 50 mg/m ² IV day 1; PACLitaxel 135 mg/m ² IV day 1. Q21 days	Not approved
		PALLIATIVE	CRBPPACL	CARBOplatin AUC 4-6 IV day 1; PACLitaxel 175 mg/m² IV day 1. Q21 days	Not approved
		PALLIATIVE	PACL	PACLitaxel 175 mg/m ² IV day 1 Q21 days	Approved
HEAD&NECK	THYROID	PALLIATIVE	GEMOX	Gemcitabine 1000 mg/m ² IV Day 1; Oxaliplatin 100 mg/m ² IV Day 1 – not currently publicly funded for this regimen and intent. Q14 days	Not approved
		PALLIATIVE	LENV	Lenvatinib 24 mg PO daily – not currently publicly funded for this regimen and intent	Approved
		PALLIATIVE	SORA	SORAfenib 400 mg PO BID – not currently publicly funded for this regimen and intent	Approved
	N/A	PALLIATIVE	CAP	Cyclophosphamide 500 mg/m ² IV day 1; DOXOrubicin 50 mg/m ² IV day 1; CISplatin 50 mg/m ² IV day 1. Q21-28 days	Approved
		PALLIATIVE	GEMC(RT)	Gemcitabine 50 to 300 mg/m2 IV day 1. Q7 days Concurrent with radiotherapy	Not approved
		ADJUVANT/NEO- ADJUVANT/CURATI VE & PALLIATIVE	CRBPFU(RT)	CARBOplatin 70 mg/m² IV days 1-5, 29-33; fluorouracil 600 mg/m²/day CIV days 1-5, 29-33. Concurrent with radiotherapy	Approved

Disease Site	Sub-Disease Site	Intent	Regimen Code	Regimen Details	Status (as of May 9, 2016)
HEME	ALL	Adjuvant/Curative	DANAFARBER(IND)	vinCRIStine 2 mg IV days 1, 8, 15 & 22; DOXOrubicin 30 mg/m² IV days 1, 2; methotrexate 4 g/m² IV day 3; leucovorin 200 mg/m² IV at 36 h after start of MTX, then 24 mg/m² IV q 6h until MTX level is $\leq 0.1 \mu\text{M}$; L-asparaginase 25, 000 IU/m² IM day 5; prednisone 40 mg/m²/day PO days 1 to 29; cytarabine 70 mg IT day 1; methotrexate 12 mg, cytarabine 40 mg, hydrocortisone 15 mg IT days 15, 29.	Approved
		Adjuvant/Curative	IMAT	iMAtinib 600 mg* PO daily until progression *dose may be increased to 400 mg PO BID if tolerated and appropriate	Approved
		Adjuvant/Curative	RITU(IT)	riTUXimab 25-40 mg IT once or twice weekly for up to 8 injections – not currently publicly funded for this regimen and intent	Approved
	AML	Adjuvant/Curative	SORA	SORAfenib 200 mg to 400 mg BID (until leukemia progression or HSCT) – not currently publicly funded for this regimen and intent <i>Note: For FLT3+ve patients only</i>	Approved
	HODGKIN'S	Palliative	GEMC(HD)	Gemcitabine 1,250 mg/m ² days 1, 8, 15. Q28 days	Approved
		Palliative	ICE	Ifosfamide 1667 mg/m² IV days 1 to 3; Mesna 1667 mg/m² IV days 1-3, then mesna 2000 mg PO days 1-3 (2 and 4 hours post-ifosfamide); CARBOplatin AUC 5 IV day 1; Etoposide 100 mg/m² IV days 1 to 3. Q21-28 days	Approved
		Palliative	NIVL	nivolumab 3 mg/kg IV day 1 – Not currently publicly funded for this regimen and intent Q14 days	Approved
		Adjuvant/Curative & Palliative	GEMCPGLDXVINO	Gemcitabine 1000 mg/m² IV days 1, 8; Pegylated Liposomal DOXOrubicin 15 mg/m² IV days 1, 8 – not currently publicly funded for this regimen and intent; Vinorelbine 20 mg/m² IV days 1, 8. Q21 days Alternative Schedule (for post-transplant patients):	Approved

Disease Site	Sub-Disease Site	Intent	Regimen Code	Regimen Details	Status (as of May 9, 2016)
				Gemcitabine 800 mg/m² IV days 1, 8; Pegylated Liposomal DOXOrubicin 10 mg/m² IV days 1, 8 – not currently publicly funded for this regimen and intent; Vinorelbine 15 mg/m² IV days 1, 8. Q21 days **Maximum of 6 cycles**	
	HIGH GRADE LYMPHOMA	Adjuvant/Curative	RITU(IT)	riTUXimab 25-40 mg IT once or twice weekly for up to 8 injections – not currently publicly funded for this regimen and intent	Approved
	INTERMEDIATE- GRADE	Adjuvant/Curative	CYTA(IT)	Cytarabine 50-70 mg IT x 4 doses. Note: As an alternative to IT methotrexate or systemic methotrexate	Approved
		Adjuvant/Curative	MINICHOP+R	cyclophosphamide 400 mg/m² IV day 1; DOXOrubicin 25 mg/m² IV day 1; vinCRIStine 1 mg IV day 1; prednisone 40 mg/m² PO days 1 to 5; riTUXimab 375 mg/m² IV day 1. Q21 days	Not approved (report under CHOP+R)
		Adjuvant/Curative	RITU(IT)	riTUXimab 25-40 mg IT once or twice weekly for up to 8 injections – not currently publicly funded for this regimen and intent	Approved
	LOW-GRADE & HAIRY CELL	Palliative	BEND	Bendamustine 120 mg/m ² IV days 1 and 2 – Not currently publicly funded for this regimen and intent. Q21 days	Approved
		Palliative	CVP(PO)+R	cyclophosphamide 400 mg/m² PO days 1 to 5; vinCRIStine 1.4 mg/m² (max 2 mg) IV day 1; prednisone 100 mg PO days 1 to 5; riTUXimab 375 mg/m² IV day 1. Q21 days	Approved
		Palliative	CYCLDEXA+RITU	dexamethasone 20 mg IV day 1; riTUXimab 375 mg/m² IV day 1; cyclophosphamide 100 mg/m² PO BID days 1 to 5. Q21 days	Approved
		Palliative	HYPERCVAD+RITU	Adapted for outpatient administration	Approved

Disease Site	Sub-Disease Site	Intent	Regimen Code	Regimen Details	Status (as of May 9, 2016)
				Course A: Cyclophosphamide 600 mg/m² IV days 1-3 (max dose 1320 mg); DOXOrubicin 50 mg/m² IV day 4; vinCRIStine 1.4 mg/m² (max dose 2 mg) IV days 4 and 11; Dexamethasone 40 mg PO days 1, 2, 3, 4, 11, 12, 13, 14; riTUXimab 375 mg/m² IV day 1. Q21-28 days	
				Course B: Inpatient	
	MYELOMA	Palliative	BORT(MNT)	bortezomib 1.3 mg/m ² SC day 1 – Not currently funded for this regimen and intent. Q14 days starting 3 to 4 months post ASCT for up to 2 years	Approved
		Palliative	DARA	Cycles 1-2: daratumumab 16 mg/kg IV days 1, 8, 15, 22 – Not currently funded for this regimen and intent Cycles 3-6: daratumumab 16 mg/kg IV days 1 and 15; Cycle 7+: daratumumab 16 mg/kg IV day 1. Q28 days	Approved
		Palliative	MELPDEXA	Melphalan 10 mg/m² PO days 1 to 4; Dexamethasone 40 mg PO days 1 to 4. Q28 days For use in light-chain amyloidosis	Approved
	Rare Disease: MCD	Palliative	SILT	Siltuximab 11 mg/kg IV day 1 – Not currently publicly funded for this regimen and intent. Q21 days	Approved
	Rare Disease: LCH	Adjuvant/Curative	СҮТА	Cytarabine 100 mg/m ² IV days 1 to 5. Q28 days	Approved
	Rare Disease: LCH	Adjuvant/Curative	PREDVNBL(IND)	Induction: prednisone 40 mg/m²/d (in 3 divided doses) PO days 1-28 (taper over days 29-42);	Approved

Disease Site	Sub-Disease Site	Intent	Regimen Code	Regimen Details	Status (as of May 9, 2016)
				vinBLAStine 6 mg/m² IV days 1,8,15,22,29,36 Q42 days (Course 1) If non-active disease (NAD) after induction, proceed directly to maintenance. If active disease (AD) better or intermediate, continue with Course 2 below. prednisone 40 mg/m²/d (in 3 divided doses) PO days 43-45,50-52,57-59,64-66,71-73,78-80; vinBLAStine 6 mg/m² IV days 43,50,57,64,71,78 Q42 days (Course 2)	
			MERCPREDVNBL(M NT)	Maintenance: Start after course 1 if NAD, or after course 2 if AD better or intermediate. 6-mercaptopurine 50 mg/m²/d PO x 12 months of total therapy prednisone 40 mg/m²/d (in 3 divided doses) PO days 1-5 Q21 days x 12 months of total therapy vinBLAStine 6 mg/m² IV day 1 Q21 days x 12 months of total therapy	
LUNG	MESOTHELIOMA	PALLIATIVE	CISPPEME+BEVA	CISplatin 75 mg/m2 IV Day 1; Pemetrexed 500 mg/m2 IV Day 1; Bevacizumab 15 mg/kg IV Day 1 – not currently publicly funded for this regimen and intent. Q21 days	Approved
		PALLIATIVE	GEMC	Gemcitabine 1250 mg/m ² IV day 1, 8, 15. Q28 days Note: Approved as an alternative to pemetrexed-based therapy. GEMC should not be used in the second-line setting.	Approved
	Rare Disease: Peritoneal Mesothelioma	PALLIATIVE	CRBPGEMC	CARBOplatin AUC 5 IV day 1; Gemcitabine 1000 mg/m² IV days 1, 8, 15. Q28 days Alternative Schedule: CARBOplatin AUC 5 IV day 1; Gemcitabine 1000 mg/m² IV days 1, 8. Q21 days	Not approved
	Small Cell	PALLIATIVE	CRBPIRIN	CARBOplatin AUC 5 IV day 1; Irinotecan 50 mg/m² IV day 1, 8, 15; Q28 days	Not Approved

Disease Site	Sub-Disease Site	Intent	Regimen Code	Regimen Details	Status (as of May 9, 2016)
PRIMARY UNKNOWN	N/A	PALLIATIVE	CRBPIRIN	CARBOplatin AUC 5 IV day 1; Irinotecan 60 mg/m² IV day 1, 8, 15. Q28 days	Not Approved
SARCOMA	SOFT TISSUE	PALLIATIVE	DCRB	Dacarbazine 1200 mg/m ² IV day 1. Q21-28 days	Not approved
		ADJUVANT/NEO- ADJUVANT/CURATI VE & PALLIATIVE	VACTC	Alternative Schedule: vinCRIStine 1.5 mg/m² (max 2 mg) IV day 1; DACTINomycin 1.25 mg/m² (max 2.5 mg) IV day 1; Cyclophosphamide 1200 mg/m² IV day 1. (Mesna: consider use – refer to local protocol) Q21days	Approved for palliative use only
	EWING'S	ADJUVANT/NEO- ADJUVANT/CURATI VE & PALLIATIVE	VACTC	vinCRIStine 1.5 mg/m² (max 2 mg) IV day 1; DACTINomycin 1.25 mg/m² (max 2.5 mg) IV day 1; Cyclophosphamide 1200 mg/m² IV day 1. (Mesna: consider use – refer to local protocol) Q21days	Approved
SKIN	MELANOMA	PALLIATIVE	DABRTRAM	DaBRAFenib 150 mg PO BID – not currently publicly funded for this regimen and intent Trametinib 2 mg PO daily – not currently publicly funded for this regimen and intent	Approved
	MERKEL CELL	PALLIATIVE	CAV	cyclophosphamide 1000 mg/m² IV day 1; DOXOrubicin 50 mg/m² IV day 1; vinCRIStine 1.4 mg/m² (max 2 mg) IV day 1. Q21 days	Not approved