

Atezolizumab - In Combination with Etoposide and Platinum for Extensive-Stage Small Cell Lung Cancer

(This form must be completed before the first dose is dispensed.)

1. Patient Profile

- * Surname:
- * Given Name:
- * OHIN: * Chart Number:
- * Postal Code:
- * Height (cm): * Weight (kg):
- * BSA (m²): * Gender: ☐ Male ☐ Female ☐ Other
- * Date of Birth:
Day Month Year
- * Site:
- * Attending Physician (MRP- Most Responsible Physician):
- Requested Prior Approval ☐ Yes * Patient on Clinical Trial ☐ Yes ☐ No
- Other (specify):
- Specify Arm:
☐ Standard of care arm ☐ Experimental arm
☐ Blinded / Unknown

Prior Approval Request

- * Select the appropriate prior approval scenario:
- ☐ 1-Unknown primary (submit pathology report and clinic note) ☐ 2-Clinical document review (identify the patient history that needs to be reviewed against eligibility criteria in Additional Comments below)
- ☐ 3-Regimen modification - schedule (complete questions a and b) ☐ 4-Regimen modification - drug substitutions (complete questions a and c)
- ☐ 5-Withholding a drug in combination therapy from start of treatment (complete questions d, e and f) ☐ 6-Maintenance therapy delay (submit clinic note)
- ☐ 7-Prior systemic therapy clinical trials (complete question g) ☐ 8-Modification due to supply interruption/drug shortage
- ☐ 9-Supplemental doses requested ☐ Other (specify)

All relevant supporting documentation must be submitted at the time of prior approval. Documentation may include a pathology report, clinic note, and/or CT scans.

a. Co-morbidities / toxicity / justification:

b. Intended regimen
schedule:

c. Intended regimen:

d. Drug(s) to be held:

e. Rationale for
holding drug(s):

f. Intention to
introduce drug at a
later date? ☐ Yes

g. Prior clinical trial
identifier (e.g.,
NCT ID, trial
name) and
treatment
description (e.g.,
arm,
drug/regimen):

h. Anticipated date of
first treatment:
Day Month Year

i. Additional comments:

2. Eligibility Criteria

The patient must meet the following criteria:

- Atezolizumab is used in combination with platinum-based chemotherapy (carboplatin or cisplatin) and etoposide for the first-line treatment of adult patients with extensive-stage small cell lung cancer (ES-SCLC). ☐ Yes
- Treatment is only for patients who have not received previous treatment for ES-SCLC and have good performance status upon treatment initiation with atezolizumab.

3. Baseline Information

- a. ECOG Performance Status at the time of enrolment ☐ 0 ☐ 1 ☐ 2
- b. Is the patient transitioning from a private pay or compassionate program? ☐ Yes ☐ No

4. Funded Dose

Atezolizumab 1200 mg intravenously (IV), once every 3 weeks (in combination with etoposide and platinum (carboplatin or cisplatin)) for 4 cycles as induction, followed by atezolizumab 1200 mg once every 3 weeks or 1680 mg once every 4 weeks as maintenance until disease progression or unacceptable toxicity.

[ST-QBP regimen codes: One of CISPETOP+ATEZ, CISPETOP(PO)+ATEZ, CRBPETOP+ATEZ, or CRBPETOP(PO)+ATEZ as induction, followed by ATEZ(MNT) as maintenance]

5. Notes

1. Ontario Health (Cancer Care Ontario) will fund one of atezolizumab or durvalumab, in combination with platinum-etoposide followed by maintenance, for ES-SCLC.
2. Atezolizumab must be used in combination with etoposide and platinum chemotherapy, followed by atezolizumab maintenance.
3. Retreatment with atezolizumab, in combination with etoposide-platinum, followed by atezolizumab maintenance is not publicly funded.

6. FAQs

1. **My patient is currently receiving atezolizumab through non-publicly funded means for ES-SCLC. Can my patient be transitioned over to receive funding through the New Drug Funding Program (NDFP)?**

Provided the funding criteria were met at the time of treatment initiation and the patient's disease has not progressed, your patient may be eligible for continued coverage of atezolizumab through NDFP. Please submit as a prior approval request including the most recent clinic note documenting the response to treatment (if able to assess).

2. **Will atezolizumab be funded if an alternative chemotherapy regimen is used for the first-line treatment of ES-SCLC?**

Atezolizumab is only funded if used in combination with etoposide and platinum chemotherapy.

3. **My patient is currently receiving platinum-based chemotherapy with etoposide for ES-SCLC. Is my patient eligible for the addition of atezolizumab?**

Patients currently receiving platinum and etoposide chemotherapy are eligible for the addition of atezolizumab provided their disease has not progressed. However, patients who have completed platinum and etoposide chemotherapy are not eligible for the addition of atezolizumab.

7. Supporting Documents

None required at the time of enrolment.

In the event of an audit, the following should be available to document eligibility:

- Clinic note(s) indicating that atezolizumab is used with etoposide and platinum for the first-line treatment of ES-SCLC.
- Pathology report demonstrating histologically or cytologically confirmed ES-SCLC.
- CT scans every 3 to 6 months, along with clinic notes indicating no disease progression.
- If there is radiographic progression, a clinic note must be provided confirming that there is no clinical disease progression and that the patient may continue to experience clinical benefit.

Signature of Attending Physician (MRP-Most Responsible Physician): _____

Day Month Year