

## Notification: NEW protocol template for multiple indications and standardisation of immunotherapy protocol information - January 2019

In order to meet the increasing indications for immunotherapy protocols, a new eviQ protocol template with multiple indications has been developed, allowing for more efficient development and maintenance of content.

The first protocol to utilise this template is **metastatic nivolumab** with three indications thus far: metastatic melanoma, NSCLC and renal cell. **This will be published and available on the website on Tues 5<sup>th</sup> Feb 2019.**

This template has gone through extensive consultation with the medical oncology reference committee with input also sought from those involved in building care plans in oncology management systems (OMIS).

### Features of the new protocol template with multiple indications

For protocols where the drug treatment schedule is **identical** (drugs, doses, frequency and number of cycles all identical) there will be one single eviQ protocol with multiple indications. All sections of the protocol will be common across all indications except for the 'Indications' and 'Evidence' sections. Similarly there will be one single associated protocol patient sheet with all sections common except for the 'Where to get more information' section.

This single protocol will be 'related' into each appropriate tumour stream on the eviQ website, however there will be only one source protocol and therefore **only one eviQ ID number**.

Note that you will still be able to search on the current nivolumab protocol ID numbers and will be redirected to the new single protocol from 5<sup>th</sup> February 2019.

The title of the protocol will not contain the tumour type - this will be located within the protocol sections.

HOME > MEDICAL ONCOLOGY > MELANOMA > METASTATIC >

## Metastatic nivolumab (weight based dosing)

ID: 3555 v.1 Under development

Treatment must be initiated and supervised by specialist physicians experienced in the treatment of cancer using immunological agents. Before commencing immunotherapy treatment in any patient, clinicians should have an understanding of the immune-related adverse events (irAEs) associated with immunotherapy treatment and their management.

Check for clinical trials in this patient group. Link to [Australian Clinical Trials](#) website

Treatment schedule	+
Indications and patient population - Melanoma	+
Indications and patient population - Non small cell lung cancer	+
Indications and patient population - Renal cell	+
Clinical information	+
Dose modifications	+
Interactions	+
Administration	+
Side effects	+
Evidence - Melanoma	+
Evidence - Non small cell lung cancer	+
Evidence - Renal cell	+
References	+
Literature search	+

The protocol information has been reviewed by the reference committee and standardised to be consistent across all indications. All of these changes have been adopted into all the nivolumab protocols. Other existing eviQ immunotherapy protocols have also been updated to ensure consistent ordering and consistency of information e.g. blood tests. A summary of these updates is listed below, however please refer to each protocol history section for specific details. These protocols will be reviewed by the appropriate reference committee for inclusion of other information at the next review.

[Summary of immunotherapy protocol content updates:](#)

**Clinical information**

- Order made consistent across all protocols
- Drug names replaced with immune checkpoint inhibitor therapy
- All incidences of adverse events removed from clinical information blocks as in evidence section
- Blood test information updated with link to summary of guideline recommendations
- Hepatitis and HIV information updated

**Side effects**

- Disclaimer updated
- Categorised as immune-related and non immune-related
- Order made consistent across all protocols
- New cardiotoxicity side effect added