

<b>APPLICANT</b> (stamp or sticker acceptable)	<b>PATIENT</b> NHI: .....	<b>REFERRER</b> Reg No: .....
Reg No: .....	First Names: .....	First Names: .....
Name: .....	Surname: .....	Surname: .....
Address: .....	DOB: .....	Address: .....
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Fax Number: .....	.....	Fax Number: .....

## Bendamustine hydrochloride

### Initial application — treatment naive CLL

Applications only from a relevant specialist or medical practitioner on the recommendation of a relevant specialist. Approvals valid for 12 months.

**Prerequisites**(tick boxes where appropriate)

- ☐ The patient has Binet stage B or C, or progressive stage A chronic lymphocytic leukaemia requiring treatment
- and
- ☐ The patient is chemotherapy treatment naive
- and
- ☐ The patient is unable to tolerate toxicity of full-dose FCR
- and
- ☐ Patient has ECOG performance status 0-2
- and
- ☐ Patient has a Cumulative Illness Rating Scale (CIRS) score of < 6
- and
- ☐ Bendamustine is to be administered at a maximum dose of 100 mg/m<sup>2</sup> on days 1 and 2 every 4 weeks for a maximum of 6 cycles

Note: 'Chronic lymphocytic leukaemia (CLL)' includes small lymphocytic lymphoma (SLL). Chemotherapy treatment is considered to comprise a known standard therapeutic chemotherapy regimen and supportive treatments.

### Initial application — Indolent, Low-grade lymphomas

Applications only from a relevant specialist or medical practitioner on the recommendation of a relevant specialist. Approvals valid for 9 months.

**Prerequisites**(tick boxes where appropriate)

- ☐ The patient has indolent low grade NHL requiring treatment
- and
- ☐ Patient has a WHO performance status of 0-2
- and
- ☐ Patient is treatment naive

and

☐ Bendamustine is to be administered for a maximum of 6 cycles (in combination with rituximab when CD20+)
- or
- ☐ Patient is refractory to or has relapsed within 12 months of a rituximab containing combined chemo-immunotherapy regimen

and

☐ Bendamustine is to be administered in combination with obinutuzumab for a maximum of 6 cycles
- or
- ☐ The patient has not received prior bendamustine therapy

and

☐ Bendamustine is to be administered for a maximum of 6 cycles in relapsed patients (in combination with rituximab when CD20+)

and

☐ Patient has had a rituximab treatment-free interval of 12 months or more
- or
- ☐ Bendamustine is to be administered as monotherapy for a maximum of 6 cycles in rituximab refractory patients

I confirm the above details are correct and that in signing this form I understand I may be audited.

Signed: ..... Date: .....

Post application to Ministry of Health, Private Bag 3015, Wanganui – email: [customerservice@health.govt.nz](mailto:customerservice@health.govt.nz)

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**Bendamustine hydrochloride** - *continued*

**Renewal — Indolent, Low-grade lymphomas**

Current approval Number (if known):.....

Applications only from a relevant specialist or medical practitioner on the recommendation of a relevant specialist. Approvals valid for 9 months.

**Prerequisites**(tick boxes where appropriate)

- ☐ Patient is refractory to or has relapsed within 12 months of rituximab in combination with bendamustine  
**and**  
☐ Bendamustine is to be administered in combination with obinutuzumab for a maximum of 6 cycles

**or**

- ☐ Patients have not received a bendamustine regimen within the last 12 months  
**and**  
☐ Bendamustine is to be administered for a maximum of 6 cycles in relapsed patients (in combination with rituximab when CD20+)  
**and**  
☐ Patient has had a rituximab treatment-free interval of 12 months or more  
**or**  
☐ Bendamustine is to be administered as a monotherapy for a maximum of 6 cycles in rituximab refractory patients

Note: 'indolent, low-grade lymphomas' includes follicular, mantle cell, marginal zone and lymphoplasmacytic/ Waldenstrom's macroglobulinaemia.

**Initial application — Hodgkin's lymphoma\***

Applications only from a relevant specialist or medical practitioner on the recommendation of a relevant specialist. Approvals valid for 6 months.

**Prerequisites**(tick boxes where appropriate)

- ☐ Patient has Hodgkin's lymphoma requiring treatment  
**and**  
☐ Patient has a ECOG performance status of 0-2  
**and**  
☐ Patient has received one prior line of chemotherapy  
**and**  
☐ Patient's disease relapsed or was refractory following prior chemotherapy  
**and**  
☐ Bendamustine is to be administered in combination with gemcitabine and vinorelbine (BeGeV) at a maximum dose of no greater than 90 mg/m<sup>2</sup> twice per cycle, for a maximum of four cycles

Note: Indications marked with \* are unapproved indications.

I confirm the above details are correct and that in signing this form I understand I may be audited.

Signed: ..... Date: .....

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