I confirm that the above details are correct:

Signed: Date:

HOSPITAL MEDICINES LIST RESTRICTIONS CHECKLIST

Use this checklist to determine if a patient meets the restrictions for funding in the **hospital setting**. For more details, refer to Section H of the Pharmaceutical Schedule. For community funding, see the Special Authority Criteria.

PRESCRIBER	PATIENT:
Name:	
Ward:	NHI:
Osimertinib	
Re-assessment	ISCLC – first line t required after 4 months (tick boxes where appropriate)
and	Patient has locally advanced or metastatic, incurable, non-squamous non-small cell lung cancer (NSCLC)
or	O Patient is treatment naïve
or	O Patient has received prior treatment in the adjuvant setting and/or while awaiting EGFR results
	The patient has discontinued gefitinib or erlotinib due to intolerance and The cancer did not progress while on gefitinib or erlotinib
and and	There is documentation confirming that the cancer expresses activating mutations of EGFR
and _	Patient has an ECOG performance status 0-3
0	Baseline measurement of overall tumour burden is documented clinically and radiologically
Respondent Respondent Re-assessment	(tick box where appropriate) onse to or stable disease with treatment in target lesions has been determined by comparable radiologic assessment following the most t treatment period ISCLC – second line t required after 4 months (tick boxes where appropriate)
and	Patient has locally advanced or metastatic, incurable, non-squamous non-small cell lung cancer (NSCLC) Patient has an ECOG performance status 0-3
and	The patient must have received previous treatment with erlotinib or gefitinib
and	There is documentation confirming that the cancer expresses T790M mutation of EGFR following progression on or after erlotinib or gefitinib
and and	The treatment must be given as monotherapy
	Baseline measurement of overall tumour burden is documented clinically and radiologically
Re-assessment	N – NSCLC – second line t required after 6 months (tick box where appropriate)
O Respo	onse to treatment in target lesions has been determined by comparable radiologic assessment following the most recent treatment