

Ovarian Cancer: Effective Practices to Benefit Patients

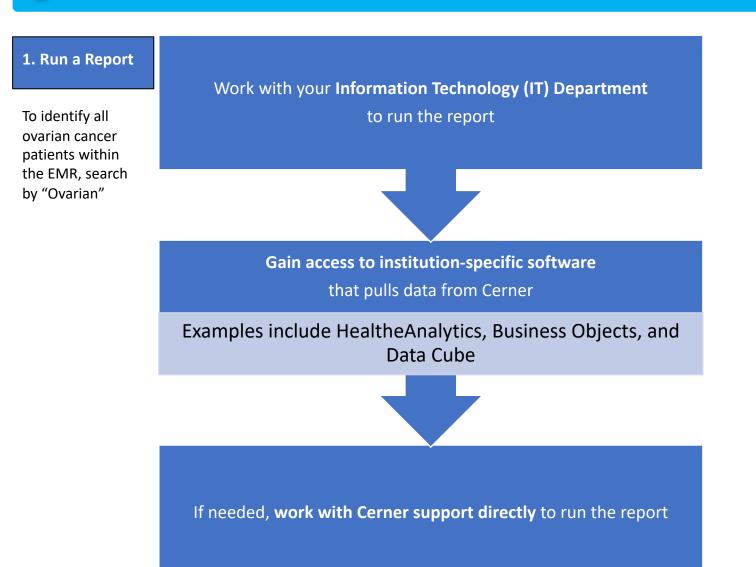
- In advanced ovarian cancer, genetic testing rates hover around 50%.¹
- Only 49% of patients received maintenance therapy in second line or greater therapy.²
- Current rates warrant improved methods and practices to enable professionals to both identify and offer PARP-Inhibitors to appropriate patients at the right time.
 - NCODA's Positive Quality Intervention (PQI) on this topic provides practical guidance and is available here: www.ncoda.org/ovarian-cancer-parp-inhibitor-eligibility

This EMR Resource provides simple step-by-step instructions to:

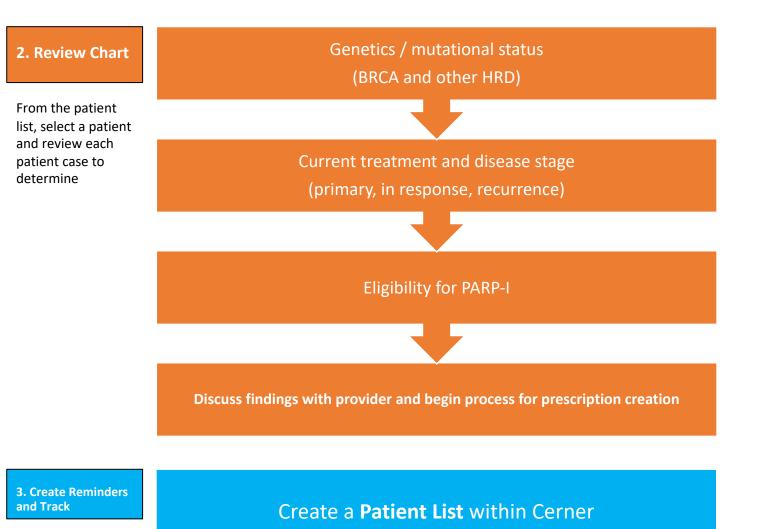


2. Review Chart: to conduct a clinical assessment

3. Create Reminders and Track: key treatment milestones and timing of therapy



Ųŗ



For each patient, create a tracking system and reminder flag via Patient List, case management software, or Outlook Calendar

Utilize functionality within institution-specific

Patient Case Management Software

Create an Outlook Calendar reminder (HIPAA compliant)



1

At the end of Cycle 5 of initial chemotherapy (if not done) Within 3 months of the end of initial chemotherapy (if in response)

If recurrent disease
not in treatment,
schedule provider
evaluation



1. Randall LM, Aydin E, Louie-Gao M, Hazard S, Westin SN. A retrospective analysis of real-world tumor BRCA (tBRCA) testing trends in ovarian cancer before and after PARP inhibitor approvals. Presented at the 17th Biennial Meeting of the International Gynecologic Cancer Society; Kyoto, Japan: 2018. 2. Garofalo D, Verma-Kurvari S, Aydin E, et al. Real world data analysis of ovarian cancer maintenance utilization among maintenance eligible patients. Presented at the American Society of Clinical Oncology Annual Congress; Chicago, IL: 2019.

2