

Radiation Therapy Cervical Cancer Checklist

Evolent (formerly National Imaging Associates, Inc.) has provided this checklist to help you in gathering the information needed to request a medical necessity review. Please complete this form and include any applicable clinical documentation (i.e., comparison plan, radiation therapy consultation, imaging results etc.) prior to submitting the case on <u>www.radmd.com</u>. As an alternative, you may also contact our Evolent Call Center.

Please note new case requests <u>may not</u> be started by fax.

Patient Name: Click or tap here to enter text.						
Date of Birth: Click or ta						
	er ID: Click or tap here to e					
	rt Date (i.e., Initial Simulat		nter text.			
reatment Start Date: 0	Click or tap here to enter te	kt.				
linical Inform	ation					
CD-10 Code(s): Click o	or tap here to enter text.					
	What is the treatment site					
	Each treatment site requi					
	What is Treatment Intent?					
What is the treatment	prescription dose for the	ck or tap here to enter tex				
	herapy treatment start date					
	distant metastases (stage					
rain)? Click or tap here			,			
vili ali faulation treating	ent de done at the same la					
	ent be done at the same fa n therapv? YES □ NO □		rior site & total dose along			
listory of prior radiation	n therapy? YES □ NO □	If yes, provide details of p	rior site & total dose along			
listory of prior radiation vith completion date: C	therapy? YES □ NO □ lick or tap here to enter	If yes, provide details of p text.	-			
listory of prior radiation vith completion date: C	therapy? YES □ NO □ lick or tap here to enter the DOSE that will be	If yes, provide details of p text.	-			
listory of prior radiation vith completion date: C	therapy? YES D NO D lick or tap here to enter the DOSE that will be Phase 1 Click or	If yes, provide details of p text. used for each phase o	-			
listory of prior radiation vith completion date: C	therapy? YES D NO D lick or tap here to enter the DOSE that will be Phase 1 Click or Phase 2 Click or	If yes, provide details of p text. used for each phase o tap here to enter text.	-			
listory of prior radiatior <i>vith completion date</i> : O What is	therapy? YES D NO D lick or tap here to enter the DOSE that will be Phase 1 Click or Phase 2 Click or	If yes, provide details of p text. used for each phase o tap here to enter text. tap here to enter text. tap here to enter text.	f treatment?			
listory of prior radiation <i>vith completion date</i> : C What is PLEASE INDIC	therapy? YES D NO D lick or tap here to enter the DOSE that will be Phase 1 Click or Phase 2 Click or Phase 3 Click or	If yes, provide details of p text. used for each phase o tap here to enter text. tap here to enter text. tap here to enter text.	f treatment?			
listory of prior radiation <i>vith completion date</i> : C What is PLEASE INDIC	therapy? YES D NO D Click or tap here to enter the DOSE that will be Phase 1 Click or Phase 2 Click or Phase 3 Click or ATE THE NUMBER OF Phase 2	If yes, provide details of p text. used for each phase o tap here to enter text. tap here to enter text. tap here to enter text. FRACTIONS FOR EAC	f treatment?			
istory of prior radiation vith completion date: C What is PLEASE INDIC Phase 1	therapy? YES DOD NODE NODE NODE Node Node Node Node Node Node Node Node Node Node Node Node Node Node Node Node Node Node Node Node Node Node Node Node Node Node Node Node Node Node Node Node Node Node Node Node Node Node Node Node Node Node Node Node Node Node Node Node Node Node Node Node Node Node Node Node Node Node Node Node Node Node Node Node Node Node Node Node Node Node Node Node Node Node Node Node Node Node Node Node Node Node Node Node Node Node Node Node Node Node Node Node Node Node Node Node Node Node Node Node Node Node Node Node Node Node Node Node Node Node Node Node Node Node Node Node Node Node Node Node Node Node Node Node Node Node Node Node Node Node Node Node Node Node Node Node Node Node Node Node Node Node Node Node Node Node Node Node Node Node Node Node Node Node Node Node Node Node Node Node Node Node Node Node Node Node Node Node Node Node Node Node Node Node Node Node Node Node Node Node Node Node Node Node Node Node Node Node Node Node Node Node Node Node Node Node Node Node Node Node Node Node Node Node Node Node Node Node Node Node Node Node Node Node Node Node Node Node Node Node Node Node Node Node Node Node Node Node Node Node Node Node Node Node Node Node Node Node Node Node Node Node Node Node Node Node Node Node Node Node Node Node Node Node Node Node Node Node Node Node Node Node Node Node Node Node Node Node Node Node Node Node Node Node Node Node Node Node Node Node Node Node Node Node Node Node Node Node Node Node Node Node Node Node Node Node Node Node Node Node Node Node Node Node Node Node Node Node Node Node Node Node Node Node Node Node Node Node Node Node Node Node Node Node Node Node Node Node Node Node Node Node Node Node Node	If yes, provide details of p text. used for each phase o tap here to enter text. tap here to enter text. tap here to enter text. FRACTIONS FOR EAC Phase 3	f treatment? CH PHASE BELOW Treatment			
istory of prior radiation <i>ith completion date</i> : O What is PLEASE INDIC Phase 1 Click or tap here to	therapy? YES D NO D Click or tap here to enter the DOSE that will be Phase 1 Click or Phase 2 Click or Phase 3 Click or ATE THE NUMBER OF Phase 2	If yes, provide details of p text. used for each phase o tap here to enter text. tap here to enter text. tap here to enter text. FRACTIONS FOR EAC	f treatment? CH PHASE BELOW			
listory of prior radiation vith completion date: O What is PLEASE INDIC Phase 1 Click or tap here to enter text.	therapy? YES D NO D Click or tap here to enter the DOSE that will be Phase 1 Click or Phase 2 Click or Phase 3 Click or ATE THE NUMBER OF Phase 2 (Boost) Click or tap here to enter text.	If yes, provide details of p text. used for each phase o tap here to enter text. tap here to enter text. tap here to enter text. FRACTIONS FOR EAC Phase 3 Click or tap here to	f treatment? CH PHASE BELOW Treatment Superficial / Orthovoltage			
istory of prior radiation <u>ith completion date: C</u> What is PLEASE INDIC Phase 1 Click or tap here to enter text.	therapy? YES D NO D Click or tap here to enter the DOSE that will be Phase 1 Click or Phase 2 Click or Phase 3 Click or ATE THE NUMBER OF Phase 2 (BOOSt) Click or tap here to	If yes, provide details of p text. Jsed for each phase o tap here to enter text. tap here to enter text. tap here to enter text. FRACTIONS FOR EAC Phase 3 Click or tap here to enter text. Click or tap here to	f treatment? CH PHASE BELOW Treatment Superficial / Orthovoltage			
listory of prior radiation vith completion date: C What is PLEASE INDIC Phase 1 Click or tap here to enter text. Click or tap here to enter text.	therapy? YES D NO D Slick or tap here to enter the DOSE that will be Phase 1 Click or Phase 2 Click or Phase 3 Click or ATE THE NUMBER OF Phase 2 (Boost) Click or tap here to enter text. Click or tap here to enter text.	If yes, provide details of p text. Jsed for each phase o tap here to enter text. tap here to enter text. FRACTIONS FOR EAC Phase 3 Click or tap here to enter text. Click or tap here to enter text.	f treatment? CH PHASE BELOW Treatment Superficial / Orthovoltage 2D Radiation Therapy			
istory of prior radiation <i>ith completion date</i> : C What is PLEASE INDIC Phase 1 Click or tap here to enter text. Click or tap here to enter text. Click or tap here to enter text.	therapy? YES D NO D Click or tap here to enter the DOSE that will be Phase 1 Click or Phase 2 Click or Phase 3 Click or ATE THE NUMBER OF Phase 2 (BOOSt) Click or tap here to enter text. Click or tap here to enter text.	If yes, provide details of p text. Jsed for each phase o tap here to enter text. tap here to enter text. FRACTIONS FOR EAC Phase 3 Click or tap here to enter text. Click or tap here to enter text. Click or tap here to enter text.	f treatment? CH PHASE BELOW Treatment Superficial / Orthovoltage 2D Radiation Therapy			
istory of prior radiation <i>ith completion date</i> : C What is PLEASE INDIC Phase 1 Click or tap here to enter text. Click or tap here to enter text. Click or tap here to enter text.	therapy? YES D NO D Slick or tap here to enter the DOSE that will be Phase 1 Click or Phase 2 Click or Phase 3 Click or ATE THE NUMBER OF Phase 2 (Boost) Click or tap here to enter text. Click or tap here to enter text.	If yes, provide details of p text. Jsed for each phase o tap here to enter text. tap here to enter text. FRACTIONS FOR EAC Phase 3 Click or tap here to enter text. Click or tap here to enter text.	f treatment? CH PHASE BELOW Treatment Superficial / Orthovoltage 2D Radiation Therapy 3D Radiation Therapy			
istory of prior radiation <i>ith completion date</i> : C What is PLEASE INDIC Phase 1 Click or tap here to enter text. Click or tap here to enter text.	Therapy? YES NO Control No Con	If yes, provide details of p text. Jsed for each phase o tap here to enter text. tap here to enter text. tap here to enter text. FRACTIONS FOR EAC Phase 3 Click or tap here to enter text. Click or tap here to enter text. Click or tap here to enter text. Click or tap here to enter text.	f treatment? CH PHASE BELOW Treatment Superficial / Orthovoltage 2D Radiation Therapy 3D Radiation Therapy Electron Beam			
listory of prior radiation vith completion date: C What is	therapy? YES D NO D Click or tap here to enter the DOSE that will be Phase 1 Click or Phase 2 Click or Phase 3 Click or Phase 3 Click or Phase 2 Click or Phase 3 Click or Phase 2 Click or Phase 3 Click or Phase 2 Click or Ph	If yes, provide details of p text. Jsed for each phase o tap here to enter text. tap here to enter text. tap here to enter text. FRACTIONS FOR EAC Phase 3 Click or tap here to enter text. Click or tap here to enter text. Click or tap here to enter text.	f treatment? CH PHASE BELOW Treatment Superficial / Orthovoltage 2D Radiation Therapy 3D Radiation Therapy Electron Beam Therapy			
History of prior radiation with completion date: C What is PLEASE INDIC Phase 1 Click or tap here to enter text. Click or tap here to	Therapy? YES NO Control No Con	If yes, provide details of p text. Jsed for each phase o tap here to enter text. tap here to enter text. tap here to enter text. FRACTIONS FOR EAC Phase 3 Click or tap here to enter text. Click or tap here to enter text. Click or tap here to enter text. Click or tap here to enter text.	f treatment? CH PHASE BELOW Treatment Superficial / Orthovoltage 2D Radiation Therapy 3D Radiation Therapy Electron Beam			

	Click or tap here to	Click or tap here to	Proton Beam Therapy
Click or tap here to enter text.	enter text.	enter text.	Proton Beam merapy
Oliale an face la set	Oliale an facility of	Olish anti-	Otomostastis
Click or tap here to enter text.	Click or tap here to	Click or tap here to enter text.	Stereotactic
enter text.	enter text.	enter text.	Radiosurgery & Stereotactic
			Radiation Therapy
			(SRS/SRT)
Click or tap here to	Click or tap here to	Click or tap here to	Stereotactic Body
enter text.	enter text.	enter text.	Radiation Therapy
			(SBRT)
Click or tap here to	Click or tap here to	Click or tap here to	Gamma Knife
enter text.	enter text.	enter text.	YESDNOD
Click or tap here to	Click or tap here to	Click or tap here to	IORT
enter text.	enter text.	enter text.	Machine Name: Click
			or tap here to enter
			text.
Click or tap here to	Click or tap here to	Click or tap here to	LDR Brachytherapy
enter text.	enter text.	enter text.	
Click or tap here to	Click or tap here to	Click or tap here to	HDR Brachytherapy
enter text.	enter text.	enter text.	
Plan Type: IMRT	Click or tap here to enter	r text. 3D : Click or t	tap here to enter text.
		Beam Therapy Click or t	
		ons for Cervical Cancer:	
Surgery Status: Pre-Op		perative Medica	lly Inoperable/Primary
IGO Stage: Click or tap	nere to enter text.		
stage I Stage IA	Stage IB Stage II	Stage IIIA St	tage IIIB Stage IIIC
stage IV	0 0	U	0 0
	ck or tap here to enter te	xt.	
arametrial invasion Cli			
		o enter text	
		o enter text.	
Pelvic and/or paraortic r	nodes Click or tap here t		
Pelvic and/or paraortic r leep cervical stromal in	nodes Click or tap here t wasion Click or tap here	to enter text.	
Pelvic and/or paraortic r leep cervical stromal in	nodes Click or tap here t wasion Click or tap here	to enter text.	
Pelvic and/or paraortic r leep cervical stromal in ymphovascular invasion lumber of ports/angles/	nodes Click or tap here t wasion Click or tap here n Click or tap here to ent fields	to enter text.	
Pelvic and/or paraortic r leep cervical stromal in ymphovascular invasion lumber of ports/angles/ Phase 1Click or tap here t	nodes Click or tap here t wasion Click or tap here n Click or tap here to ent fields to enter text.	to enter text.	
Pelvic and/or paraortic r leep cervical stromal in mphovascular invasion lumber of ports/angles/ Phase 1Click or tap here t Phase 2Click or tap here t	nodes Click or tap here t wasion Click or tap here n Click or tap here to ent fields to enter text. to enter text.	to enter text.	
Pelvic and/or paraortic r eep cervical stromal in /mphovascular invasion /umber of ports/angles/ Phase 1Click or tap here t Phase 2Click or tap here t Phase 3Click or tap here t	nodes Click or tap here t avasion Click or tap here n Click or tap here to ent fields to enter text. to enter text. to enter text.	to enter text. er text.	
Pelvic and/or paraortic r leep cervical stromal in mphovascular invasion lumber of ports/angles/ Phase 1Click or tap here t Phase 2Click or tap here t Phase 3Click or tap here t Spe of Imaging: Port Fil	nodes Click or tap here to avasion Click or tap here n Click or tap here to ent fields to enter text. to enter text. to enter text. Ims □ IGRT□ IGRT From	to enter text. er text. equency: Click or tap here	
Pelvic and/or paraortic r eep cervical stromal in mphovascular invasion lumber of ports/angles/ hase 1Click or tap here to thase 2Click or tap here to thase 3Click or tap here to thase 3Click or tap here to the se to tap here to the set to tap here to tap here to tap here to tap here to tap here to tap here to tap here to tap here to tap here to tap here to tap here to tap here to tap here to tap here to tap here to tap here to tap here to tap here to tap here to ta	nodes Click or tap here to wasion Click or tap here n Click or tap here to ent fields to enter text. to enter text. to enter text. Ims I IGRTI IGRT Fro neous) chemotherapy b	to enter text. er text. equency: Click or tap here be administered during th	nis course of treatment?
elvic and/or paraortic r eep cervical stromal in mphovascular invasion umber of ports/angles/ hase 1Click or tap here t hase 2Click or tap here t hase 3Click or tap here t ype of Imaging: Port Fil /ill concurrent (simulta	nodes Click or tap here to wasion Click or tap here n Click or tap here to ent fields to enter text. to enter text. to enter text. Ims I IGRTI IGRT Fro neous) chemotherapy b	to enter text. er text. equency: Click or tap here	nis course of treatment?

CPT Code	77370	Special	Physics
CPT Code	77470	Special	Treatment
CPT Code	77331	Special	Dosimetry

Rationale (Reason) Click or tap here to enter text. Rationale (Reason)Click or tap here to enter text. Rationale (Reason)Click or tap here to enter text.

Additional comments or details: Click or tap here to enter text.

Please be ready to submit any results of imaging (ultrasounds, x-rays, MRIs, PET Scans, CTs, DVH's) from the past 3 months and radiation therapy prescription plans in addition to the clinical treatment plan. This will assist in the review process. Failure to provide all relevant documentation may cause a delay.