| National Imaging Associates, Inc.* | |
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| **Clinical guidelines:**<br>**NON-CANCEROUS CONDITIONS** | **Original Date: March 2015** |
| **Radiation Oncology** | **Last Revised Date: February 2021** |
| **Guideline Number: NIA_CG_135** | **Implementation Date: January 2022** |

## INDICATIONS FOR RADIATION THERAPY

2D or 3D Conformal (3D CRT) is considered medically necessary for several non-malignant conditions, including but not limited to (McKeown, 2015):

- Prevention of keloid scars as an adjunctive therapy following excisional surgery
- Heterotopic ossification
- Pterygium in cases that cannot be medically managed
- Villonodular synovitis

Stereotactic Radiation Therapy (SRS, SBRT) is considered medically necessary when used in the treatment of non-malignant cranial lesions including the following (ASTRO, 2014):

- Arteriovenous malformation (AVM) of the brain or spine
- Trigeminal neuralgia that has not responded to other, more conservative, treatments
- Non-cancerous brain tumors such as acoustic neuroma, benign schwannomas, meningioma, hemangioma, pituitary adenoma, craniopharyngioma, neoplasm of the pineal gland, and chordomas

Also refer to NIA Stereotactic Radiation Therapy Guideline.

## TREATMENT OPTIONS REQUIRING PHYSICIAN REVIEW

Treatment for other non-malignant conditions utilizing proton beam, stereotactic radiation therapy (SBRT), or intensity modulated radiation therapy (IMRT) modalities should be referred to physician review.

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* National Imaging Associates, Inc. (NIA) is a subsidiary of Magellan Healthcare, Inc.

**BACKGROUND**

Radiation therapy may have appropriate use in several non-malignant conditions. The treatment goal in patients with non-malignant conditions is to achieve relief of the indicated condition with radiation therapy with minimal risk of radiation exposure to sensitive structures.

**POLICY HISTORY**

| Date | Summary |
|---|---|
| February 2021 | No Changes |
| February 2020 | References updated |
| February 2019 | Added and updated references |

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**Reviewed / Approved by NIA Clinical Guideline Committee**

**GENERAL INFORMATION**

It is an expectation that all patients receive care/services from a licensed clinician. All appropriate supporting documentation, including recent pertinent office visit notes, laboratory data, and results of any special testing must be provided. If applicable: All prior relevant imaging results and the reason that alternative imaging cannot be performed must be included in the documentation submitted.