On behalf of Photocure, I respectfully request the NCCN Bladder Cancer Committee review the enclosed clinical data on Blue Light Cystoscopy™ with Cysview® for inclusion in the Bladder Cancer clinical practice algorithms.

**Specific Changes:** Include Blue Light Cystoscopy with Cysview at the time of surveillance and TURBT recommendations within the following algorithmic steps: Initial Evaluation and Primary Evaluation/ Surgical Treatment Steps within BL-1, Secondary Surgical Treatment Steps within BL-2, Cystoscopy Steps within BL-E Table 1, and Evaluation Step within BL-3.

**FDA Clearance:** BLC with Cysview is approved by the FDA for use in the cystoscopic detection of carcinoma of the bladder, including CIS, among patients suspected or known to have lesion(s) on the basis of a prior cystoscopy, or in patients undergoing surveillance cystoscopy for carcinoma of the bladder. BLC with Cysview is approved for repeat use and following intravesical therapy.

**Rationale:** The 2016 updates to both the American Urological Association (AUA) and the European Association Urology Guidelines recommend that in a patient with NMIBC, a clinician SHOULD offer BLC with Cysview at the time of TURBT, if available, with the AUA specifying its use to increase detection and decrease recurrence; sixteen publications demonstrate the added benefit of BLC with Cysview for a more complete TURBT; use at surveillance offers improved follow-up assessment; prior BCG therapy and prior resections do not significantly alter detection rate; and new evidence demonstrates the benefit of changed patient management in 14% of patients due to more accurate diagnosis in post-market, “real-world” patient registry data derived from a population of mixed BLC user experience levels.

We submit the following articles in support of the proposed change. Data of particular interest, published recently, have been highlighted as **Of Major Importance * Of Importance


