### Internal request
Consider the inclusion of axicabtagene ciloleucel as for histologic transformation of follicular lymphoma (FL) to diffuse large B-cell lymphoma (DLBCL), primary mediastinal large B-cell lymphoma (PMBL), double hit lymphoma, and relapsed/refractory DLBCL.

### Panel Discussion/References
Based on the FDA approval and panel discussion the consensus was to include axicabtagene ciloleucel for the following indications:

- Histologic transformation of FL to DLBCL only after treatment with ≥2 chemoimmunotherapy regimens including at least one anthracycline or anthracenedione-based regimen, unless contraindicated (FOLL-6 and FOLL-7)
- Relapsed/refractory DLBCL (BCEL-6)
- Relapsed/refractory Primary Mediastinal Large B-cell Lymphoma (PMBL; BCEL-B 1 of 4)
- Relapsed/refractory Double Hit Lymphoma (BCEL-B 3 of 4)

See Submission for references.

### External request
Submission request from Kite: Please consider the addition of axicabtagene ciloleucel as a treatment option for second-line and subsequent therapy for diffuse large B-cell lymphoma (intention to proceed to, and non-candidates for, high-dose therapy), primary mediastinal large B-cell lymphoma, double hit lymphoma/high grade B-cell lymphoma, and follicular lymphoma histologic transformation to DLBCL following multiple prior therapies.

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