

## **NCCN Imaging Appropriate Use Criteria (NCCN Imaging AUC™)**

**Access to the new NCCN Imaging AUC™ is free.**

**Prior to accessing NCCN Imaging AUC™ users must accept an End-User License Agreement (EULA) and create a free account on NCCN.org.**

### **About NCCN Imaging AUC™**

NCCN Imaging Appropriate Use Criteria (NCCN Imaging AUC™) include information designed to support clinical decision-making around the use of imaging in patients with cancer and are based directly on the NCCN Clinical Practice Guidelines in Oncology (NCCN Guidelines®).

NCCN Imaging AUC™ include recommendations pertaining to cancer screening, diagnosis, staging, treatment response assessment, follow-up, and surveillance. Additional information includes the indication, imaging modality, and frequency of use, as well as clinical notes related to the specific recommendation. NCCN Imaging AUC™ also document information on disease stage and histology. All imaging procedures recommended in the NCCN Guidelines®, including radiographs, computed tomography (CT) scans, magnetic resonance imaging (MRI), functional nuclear medicine imaging (PET, SPECT) and ultrasound, are included within NCCN Imaging AUC™.

NCCN Imaging AUC™ are accessible through an easy to use web-based user interface. The NCCN Imaging AUC™ include a full complement of imaging AUC in oncology care. NCCN, a CMS-approved Provider Led Entity (PLE), is committed to assuring that the most up-to-date recommendations are available and reviews and updates NCCN Imaging AUC™ on a continual basis to ensure that the recommendations take into account the most current evidence.

**[NCCN.org/imagingAUC](https://www.nccn.org/imagingAUC)**

**1** The top menu of the NCCN Imaging AUC™ contains various drop-down lists for displaying the database (left) and various sorting fields (right).

**Options**

Use the drop-down menus to search the database:

NCCN Guideline: -- Select a NCCN Guideline --

Clinical Setting: -- Select a Clinical Setting --

Purpose: -- Select a Purpose --

Modality: -- Select a Modality --

ICD-10: -- Select an ICD-10 Code --

Fields to display/hide:

ICD-10 Codes

Stage

Additional Description of Stage

T, N, M

Histology

Frequency

Imaging Notes

Guideline Page

Display All

Reset Filters | Print | 0 Ready to Print

Printed by Susan Kibbey on 9/7/2016 2:50 PM. For personal use only. Not approved for distribution. The NCCN Imaging Appropriate Use Criteria™ is copyrighted by the National Comprehensive Cancer Network, Inc. All rights reserved. About the NCCN Imaging Appropriate Use Criteria™

By default, the data table selects fields for Stage, Imaging Notes, and Guideline Page. You can customize your display by checking/unchecking the data fields boxes. Or check Display All to view data for all available fields.

**2** To display the AUC of your choice, select either an NCCN Guideline or Clinical Setting to match your interest. You can further filter by Imaging Modality, Test Purpose, or ICD-10 Code.

**Options**

Use the drop-down menus to search the database:

NCCN Guideline: -- Select a NCCN Guideline --

- Acute Lymphoblastic Leukemia v.1.2016
- Acute Myeloid Leukemia v.2.2016
- Bladder Cancer v.2.2016
- Breast Cancer v.2.2016**
- Esophageal and Esophagogastric Junction Cancers v.2.2016
- Gastric Cancer v.3.2016
- Genetic/Familial High-Risk Assessment: Breast and Ovarian v.2.2016
- Genetic/Familial High-Risk Assessment: Colorectal v.1.2016
- Hodgkin Lymphoma v.3.2016
- Lung Cancer Screening v.2.2016
- Malignant Pleural Mesothelioma v.3.2016
- Melanoma v.3.2016
- Neuroendocrine Tumors v.2.2016
- Ovarian Cancer/Fallopian Tube Cancer/Primary Peritoneal Cancer v.1.2016
- Pancreatic Adenocarcinoma v.1.2016
- Penile Cancer v.2.2016
- Prostate Cancer v.3.2016
- Prostate Cancer Early Detection v.2.2016
- Small Cell Lung Cancer v.1.2017
- Thymomas and Thymic Carcinomas v.3.2016

Filters: Breast Cancer v.2.2016

**Options**

Use the drop-down menus to search the database:

NCCN Guideline: -- Select a NCCN Guideline --

Clinical Setting: -- Select a Clinical Setting --

- Breast Cancer - Ductal Carcinoma in situ
- Breast Cancer - Inflammatory Breast Cancer**
- Breast Cancer - Invasive Breast Cancer
- Breast Cancer - Lobular Carcinoma in situ
- Breast Cancer - Paget's Disease
- Breast Cancer - Phyllodes Tumor

Purpose: -- Select a Purpose --

Modality: -- Select a Modality --

ICD-10: -- Select an ICD-10 Code --

Only the Modalities or Testing Purposes recommended for a given disease will be available in the drop down menu.

**3** When first selecting a disease or resetting the filters, the data table will display certain default data fields, including: Clinical Setting, Guideline Page, Category of Evidence, Stage, Indication, Imaging Recommendation, Purpose, and Notes. With sorting fields applied, the data table displays the selected NCCN Imaging AUC™.

Filters: Breast Cancer v.2.2016 > Breast Cancer - Invasive Breast Cancer

Default Sort | Showing 1 to 20 of 20 entries | Search:

Clinical Setting	Guideline Page	Category of Evidence	Stage	Indication	Imaging Recommendation	Purpose	Imaging Notes
Invasive Breast Cancer	BNV-1	2A	I,IIA,IIIB	Post surgical biopsy; Initial workup	<ul style="list-style-type: none"> <li>Diagnostic bilateral mammogram</li> <li>Ultrasound as necessary</li> <li>Breast MRI with contrast (optional)</li> </ul> <p>Consider additional imaging if directed by signs or symptoms:</p> <ul style="list-style-type: none"> <li>Bone scan</li> <li>Abdominal ± Pelvic diagnostic CT or MRI</li> <li>Chest diagnostic CT</li> </ul>	Diagnostic	Breast MRI exams are performed with IV contrast and require a dedicated breast coil and breast imaging radiologists familiar with the optimal timing sequences and other technical details for image interpretation. Breast MRI may be used for staging evaluation to define extent of cancer or presence of multifocal or multicentric cancer in the ipsilateral breast, or as screening of the contralateral breast cancer at time of initial diagnosis (category 2B). There are no high-level data to demonstrate that the use of MRI to facilitate local therapy decision-making improves local recurrence or survival. Breast MRI may be helpful for breast cancer evaluation before and after preoperative systemic therapy to define extent of disease, response to treatment, and potential for breast-conserving therapy. False-positive findings on breast MRI are common. Optional breast MRI with special consideration for mammographically occult tumor. Bone scan if bone pain or elevated alkaline phosphatase. Abdominal ± Pelvic diagnostic CT or MRI indicated if elevated alkaline

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NCCN Imaging AUC™ are built on a responsive platform that can be viewed on mobile devices. If the screen size cannot accommodate all data fields simultaneously, the interface will automatically hide certain fields and indicate this with a red numbered icon in the left most column of the data table.

Filters: Breast Cancer v.2.2016 > Breast Cancer - Invasive Breast Cancer

Default Sort Showing 1 to 20 of 20 entries Search:

	Clinical Setting	Guideline Page	Category of Evidence	Stage	Indication	Imaging Recommendation	Purpose
	Invasive Breast Cancer	<a href="#">BINV-1</a>	2A	I,IIA, IIB	Post surgical biopsy; Initial workup	<ul style="list-style-type: none"> <li>Diagnostic bilateral mammogram</li> <li>Ultrasound as necessary</li> <li>Breast MRI with contrast (optional)</li> </ul> Consider additional imaging if directed by signs or symptoms: <ul style="list-style-type: none"> <li>Bone scan</li> <li>Abdominal ± Pelvic diagnostic CT or MRI</li> <li>Chest diagnostic CT</li> </ul>	Diagnostic

◀ An easy-to-read view of the selected AUC can be made available for printing or saving as a PDF by checking the box in the left most column.

▲ A red numbered icon indicates hidden fields when viewed on mobile devices, tablets, or reduced screen sizes. Click on the icon to view additional fields in a vertical display.

▲ Depending on the web browser, the Guideline Page hyperlink will redirect to either the exact NCCN Guidelines page for that recommendation (Internet Explorer, Safari), or to the front page of the NCCN Guidelines (Google Chrome, Firefox) where users can navigate to the appropriate page.

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With the desired AUC displayed, individual or multiple records may be selected for printing by checking the printer icon box (left most data field, above). The recommendation is separated into Disease Information and Imaging Recommendation. Print the page or save the record as a PDF.

## NCCN Imaging Appropriate Use Criteria™

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Disease Information	
<b>Guideline Name:</b>	Breast Cancer
<b>Clinical Setting:</b>	Invasive Breast Cancer
<b>Stage:</b>	AJCC, 7th Edition I, IIA, IIB
<b>Indication:</b>	Post surgical biopsy; Initial workup
<b>Guideline Page:</b>	BINV-1
<b>Stage:</b>	T0 N1 M0 T1 N0 M0 T1 N1 M0 T2 N0 M0 T2 N1 M0 T3 N0 M0
Imaging Recommendation	
<b>Category of Evidence:</b>	2A
<b>Purpose:</b>	Diagnostic
<b>Modality:</b>	<ul style="list-style-type: none"> <li>Diagnostic bilateral mammogram</li> <li>Ultrasound as necessary</li> <li>Breast MRI with contrast (optional)</li> </ul> Consider additional imaging if directed by signs or symptoms: <ul style="list-style-type: none"> <li>Bone scan</li> <li>Abdominal ± Pelvic diagnostic CT or MRI</li> <li>Chest diagnostic CT</li> </ul>
<b>Notes:</b>	Breast MRI exams are performed with IV contrast and require a dedicated breast coil and breast imaging radiologists familiar with the optimal timing sequences and other technical details for image interpretation. Breast MRI may be used for staging evaluation to define extent of cancer or presence of multifocal or multicentric cancer in the ipsilateral breast, or as screening of the contralateral breast cancer at time of initial diagnosis (category 2B). There are no high-level data to demonstrate that the use of MRI to facilitate local therapy decision-making improves local recurrence or survival. Breast MRI may be helpful for breast cancer evaluation before and after preoperative systemic therapy to define extent of disease, response to treatment, and potential for

# TENTATIVE TIMELINE

## FOR ROLL-OUT OF NCCN IMAGING AUC™

Listed by disease type. Dates are tentative.



Dates are tentative and imaging AUC for a specific disease site may be completed and published earlier than listed or pushed back a quarter (eg, if available 2017 updates are included). Publication of AUC for disease sites listed should be complete by the beginning of Q2 2017. All AUC are consistent relative to the information (if present in the respective NCCN Guideline) contained in each.