



Non-small cell lung cancer Initial PBS authority application Supporting information

Important information

You must lodge this form for a patient starting **initial** PBS subsidised treatment with gefitinib, as monotherapy, of locally advanced or metastatic, non-small cell lung cancer.

All applications must be in writing and must include sufficient information to determine the patient's eligibility according to the PBS criteria.

A copy of the pathology report supporting the evidence of activating mutation(s) of the Epidermal Growth Factor Receptor (EGFR) gene in tumour material must be provided.

The information on this form is correct at the time of publishing and is subject to change.

Authority prescription form

A completed authority prescription form must be included with this form.

The medical indication section of the authority prescription form does not need to be completed when submitted with this form.

Phone approvals

Under no circumstance will phone approvals be granted for complete authority applications, or for treatment that would otherwise extend the treatment period.

Assistance

If you need assistance completing this form, or more information, or for applications relating to continuing treatment call **1800 700 270** and select option 3 between 8.00 am and 5.00 pm EST Monday to Friday, or go to **www.medicareaustralia.gov.au** > **For health professionals > PBS > Specialised drugs (PBS) J-Z > Non-small cell lung cancer**

Lodgement

Send the completed authority application form, a copy of the pathology report and a completed authority prescription form to:

Medicare Australia
Prior written approval of specialised drugs
Reply Paid 9826
Hobart TAS 7001

Print neatly in **BLOCK LETTERS**

Tick where applicable



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Patient's details

1 Medicare/DVA number

- - Ref no.

2 Mr Mrs Miss Ms Other

Family name

First given name

3 Date of birth

/ /

Prescriber's details

4 Prescriber number

5 Family name

First given name

6 Work phone number

()

Alternative phone number

Fax number
()

Conditions and criteria

7 To qualify for PBS authority approval, under this criterion, the following conditions must be met.

The patient:

- has locally advanced non-small cell lung cancer
- or**
- has metastatic non-small cell lung cancer
- and**
- has a World Health Organization (WHO) performance status of two or less
- and**
- is not currently taking any other PBS subsidised chemotherapy
- and**

- has disease progression which occurred following treatment with at least one chemotherapy agent

Provide details of one prior chemotherapy treatment

Name of drug

from / / to / /

and

- has activating mutation(s) of the Epidermal Growth Factor Receptor (EGFR) gene in tumour material.

Attachments

Attach a copy of the pathology report which demonstrates the activating mutation(s) of the EGFR gene and a completed authority prescription form.

Prescriber's declaration

8 I declare that:

- the information provided on this form is correct.

Prescriber's signature

Date

/ /

Privacy note

The information provided on this form will be used to assess the eligibility of a nominated person to receive PBS subsidised treatment. The collection of this information is authorised by the *National Health Act 1953*. This information may be disclosed to the Department of Health and Ageing, Department of Veterans' Affairs or as authorised or required by law.