

Non-Small Cell Lung Cancer Treatment Regimens

Clinical Trials: The NCCN recommends cancer patient participation in clinical trials as the gold standard for treatment.

Cancer therapy selection, dosing, administration, and the management of related adverse events can be a complex process that should be handled by an experienced healthcare team. Clinicians must choose and verify treatment options based on the individual patient; drug dose modifications and supportive care interventions should be administered accordingly. The cancer treatment regimens below may include both U.S. Food and Drug Administration-approved and unapproved indications/regimens. These regimens are only provided to supplement the latest treatment strategies.

These Guidelines are a work in progress that may be refined as often as new significant data becomes available. The National Comprehensive Cancer Network Guidelines[®] are a consensus statement of its authors regarding their views of currently accepted approaches to treatment. Any clinician seeking to apply or consult any NCCN Guidelines[®] is expected to use independent medical judgment in the context of individual clinical circumstances to determine any patient's care or treatment. The NCCN makes no warranties of any kind whatsoever regarding their content, use, or application and disclaims any responsibility for their application or use in any way.

Note: All recommendations are category 2A unless otherwise indicated.

► Targeted Therapy or Immunotherapy for Advanced or Metastatic Disease¹

REGIMEN	DOSING
EGFR Exon 19 Deletion or L858R Mutations: First-Line Therapy^{a-c}	
Preferred	
Osimertinib (Category 1) ^{2-6,d}	Days 1-28: Osimertinib 80mg orally once daily. Repeat cycle every 4 weeks.
Other Recommended	
Afatinib (Category 1) ^{7-9,d,e}	Days 1-28: Afatinib 40mg orally once daily. Repeat cycle every 4 weeks.
Dacomitinib (Category 1) ^{10,11,d,e}	Days 1-28: Dacomitinib 45mg orally once daily. Repeat cycle every 4 weeks.
Erlotinib (Category 1) ^{12-17,d}	Days 1-28: Erlotinib 150mg orally once daily. Repeat cycle every 4 weeks.
Erlotinib ^d + Bevacizumab ^{12,18,19,f,g}	Days 1-28: Erlotinib 150mg orally once daily Repeat cycle every 4 weeks, with: Day 1: Bevacizumab 15mg/kg IV Repeat cycle every 3 weeks.
Erlotinib ^d + Ramucirumab ^{12,20,21,h} <i>Premedication is required.</i>	Days 1-28: Erlotinib 150mg orally once daily Repeat cycle every 4 weeks, with: Day 1: Ramucirumab 10mg/kg IV over 60 minutes. Repeat cycle every 2 weeks.
Gefitinib (Category 1) ^{22-25,d}	Days 1-28: Gefitinib 250mg orally once daily. Repeat cycle every 4 weeks.
EGFR Exon 19 Deletion or L858R Mutations: Subsequent Therapy^a	
If Progression on Osimertinib^l	
Osimertinib ^{2-6,d}	Days 1-28: Osimertinib 80mg orally once daily. Repeat cycle every 4 weeks.
If further progression, refer to Systemic Therapy for Advanced or Metastatic Disease – Adenocarcinoma, Systemic Therapy for Advanced or Metastatic Disease – Squamous Cell Carcinoma	
If Progression on Erlotinib (±Ramucirumab or Bevacizumab), Afatinib, Gefitinib, or Dacomitinib^l	
Afatinib (if T790M-) ^{7-9,d,e}	Days 1-28: Afatinib 40mg orally once daily. Repeat cycle every 4 weeks.
Dacomitinib (if T790M-) ^{10,11,d,e}	Days 1-28: Dacomitinib 45mg orally once daily. Repeat cycle every 4 weeks.
Erlotinib (if T790M-) ^{12-17,d}	Days 1-28: Erlotinib 150mg orally once daily. Repeat cycle every 4 weeks.
Erlotinib ^d + Bevacizumab (if T790M-) ^{12,18,19,f,g}	Days 1-28: Erlotinib 150mg orally once daily Repeat cycle every 4 weeks, with: Day 1: Bevacizumab 15mg/kg IV Repeat cycle every 3 weeks.

continued

Non-Small Cell Lung Cancer Treatment Regimens

► Targeted Therapy or Immunotherapy for Advanced or Metastatic Disease¹ (continued)

REGIMEN	DOSING
EGFR Exon 19 Deletion or L858R Mutations: Subsequent Therapy^a (continued)	
If Progression on Erlotinib (±Ramucirumab or Bevacizumab), Afatinib, Gefitinib, or Dacomitinib ^{a,i} (continued)	
Erlotinib ^d + Ramucirumab (if T790M-) ^{12,20,21,h} <i>Premedication is required.</i>	Days 1-28: Erlotinib 150mg orally once daily Repeat cycle every 4 weeks, with: Day 1: Ramucirumab 10mg/kg IV over 60 minutes. Repeat cycle every 2 weeks.
Gefitinib (if T790M-) ^{22-25,d}	Days 1-28: Gefitinib 250mg orally once daily. Repeat cycle every 4 weeks.
Osimertinib (if T790M+) (Category 1) ^{2-6,d}	Days 1-28: Osimertinib 80mg orally once daily. Repeat cycle every 4 weeks.
If further progression, refer to Systemic Therapy for Advanced or Metastatic Disease – Adenocarcinoma, Systemic Therapy for Advanced or Metastatic Disease – Squamous Cell Carcinoma	
EGFR S768I, L861Q, and/or G719X Mutation: First-Line Therapy^{a,j}	
Preferred	
Afatinib ^{7-9,d,e}	Days 1-28: Afatinib 40mg orally once daily. Repeat cycle every 4 weeks.
Osimertinib ^{2-6,d}	Days 1-28: Osimertinib 80mg orally once daily. Repeat cycle every 4 weeks.
Other Recommended	
Dacomitinib ^{10,11,d,e}	Days 1-28: Dacomitinib 45mg orally once daily. Repeat cycle every 4 weeks.
Erlotinib ^{12-17,d}	Days 1-28: Erlotinib 150mg orally once daily. Repeat cycle every 4 weeks.
Gefitinib ^{22-25,d}	Days 1-28: Gefitinib 250mg orally once daily. Repeat cycle every 4 weeks.
EGFR S768I, L861Q, and/or G719X Mutation: Subsequent Therapy^{a,c}	
See EGFR Exon 19 Deletion or L858R Mutations: Subsequent Therapy	
EGFR Exon 20 Insertion Mutation Positive: First-Line Therapy^a	
Refer to Systemic Therapy for Advanced or Metastatic Disease – Subsequent	
EGFR Exon 20 Insertion Mutation Positive: Subsequent Therapy^a	
Amivantamab-vmjw ^{26,27,k} <i>Premedication is required.</i>	If weight <80kg: Day 1: Amivantamab-vmjw 350mg IV followed by: Day 2: Amivantamab-vmjw 700mg IV followed by: Days 8,15,22: Amivantamab-vmjw 1,050mg IV Administer for one 4-week cycle followed by: Days 1,15: Amivantamab-vmjw 1,050mg IV Repeat cycle every 4 weeks. (beginning with Cycle 2). OR If weight ≥80kg: Day 1: Amivantamab-vmjw 350mg IV followed by: Day 2: Amivantamab-vmjw 1,050mg IV followed by: Days 8,15,22: Amivantamab-vmjw 1,400mg IV Administer for one 4-week cycle followed by: Days 1,15: Amivantamab-vmjw 1,400mg IV Repeat cycle every 4 weeks (beginning with Cycle 2).
Mobocertinib ^{28,29,l}	Days 1-28: Mobocertinib 160mg orally once daily. Repeat cycle every 4 weeks.

If further progression, refer to Systemic Therapy for Advanced or Metastatic Disease – Adenocarcinoma, Systemic Therapy for Advanced or Metastatic Disease – Squamous Cell Carcinoma

KRAS G12C Mutation Positive: First-Line Therapy^a

Refer to Systemic Therapy for Advanced or Metastatic Disease – Adenocarcinoma, Systemic Therapy for Advanced or Metastatic Disease – Squamous Cell Carcinoma

continued

Non-Small Cell Lung Cancer Treatment Regimens

► Targeted Therapy or Immunotherapy for Advanced or Metastatic Disease¹ (continued)

REGIMEN	DOSING
KRAS G12C Mutation Positive: Subsequent Therapy^a	
Sotorasib ^{30,31}	Days 1-28: Sotorasib 960mg orally once daily. Repeat cycle every 4 weeks.
If further progression, refer to Systemic Therapy for Advanced or Metastatic Disease – Subsequent	
ALK Rearrangement Positive: First-Line Therapy^{a,m}	
Preferred	
Alectinib (Category 1) ^{32-35,n}	Days 1-28: Alectinib 600mg orally twice daily. Repeat cycle every 4 weeks.
Brigatinib (Category 1) ³⁶⁻³⁸	Days 1-7: Brigatinib 90mg once daily, followed by: Days 8-28: Brigatinib 180mg orally once daily Administer for one 4-week cycle, followed by: Days 1-28: Brigatinib 180mg orally once daily. Repeat cycle every 4 weeks.
Lorlatinib (Category 1) ³⁹⁻⁴²	Days 1-28: Lorlatinib 100mg orally once daily. Repeat cycle every 4 weeks.
Other Recommended	
Ceritinib (Category 1) ⁴³⁻⁴⁷	Days 1-28: Ceritinib 450mg orally once daily. Repeat cycle every 4 weeks.
Useful in Certain Circumstances	
Crizotinib (Category 1) ^{35,48-51}	Days 1-28: Crizotinib 250mg orally twice daily. Repeat cycle every 4 weeks.
ALK Rearrangement Positive: Subsequent Therapy^a	
If Progression on Alectinib, Brigatinib, Ceritinib, or Lorlatinib	
Alectinib ^{32-35,n}	Days 1-28: Alectinib 600mg orally twice daily. Repeat cycle every 4 weeks.
Brigatinib ³⁶⁻³⁸	Days 1-7: Brigatinib 90mg once daily, followed by: Days 8-28: Brigatinib 180mg orally once daily Administer for one 4-week cycle, followed by: Days 1-28: Brigatinib 180mg orally once daily. Repeat cycle every 4 weeks.
Ceritinib ⁴³⁻⁴⁷	Days 1-28: Ceritinib 450mg orally once daily. Repeat cycle every 4 weeks.
Lorlatinib (ALK G1202R) ³⁹⁻⁴²	Days 1-28: Lorlatinib 100mg orally once daily. Repeat cycle every 4 weeks.
If further progression, refer to Systemic Therapy for Advanced or Metastatic Disease – Adenocarcinoma, Systemic Therapy for Advanced or Metastatic Disease – Squamous Cell Carcinoma	
If Progression on Crizotinib	
Alectinib ^{32-35,n}	Days 1-28: Alectinib 600mg orally twice daily. Repeat cycle every 4 weeks.
Brigatinib ³⁶⁻³⁸	Days 1-7: Brigatinib 90mg once daily, followed by: Days 8-28: Brigatinib 180mg orally once daily Administer for one 4-week cycle, followed by: Days 1-28: Brigatinib 180mg orally once daily. Repeat cycle every 4 weeks.
Ceritinib ⁴³⁻⁴⁷	Days 1-28: Ceritinib 450mg orally once daily. Repeat cycle every 4 weeks.
Crizotinib ^{35,48-51}	Days 1-28: Crizotinib 250mg orally twice daily. Repeat cycle every 4 weeks.
Lorlatinib ³⁹⁻⁴²	Days 1-28: Lorlatinib 100mg orally once daily. Repeat cycle every 4 weeks.
If further progression, refer to Systemic Therapy for Advanced or Metastatic Disease – Adenocarcinoma, Systemic Therapy for Advanced or Metastatic Disease – Squamous Cell Carcinoma	

continued

Non-Small Cell Lung Cancer Treatment Regimens

► Targeted Therapy or Immunotherapy for Advanced or Metastatic Disease¹ (continued)

REGIMEN	DOSING
ROS1 Rearrangement Positive: First-Line Therapy^{a,o}	
Preferred	
Crizotinib ^{35,48-51}	Days 1-28: Crizotinib 250mg orally twice daily. Repeat cycle every 4 weeks.
Entrectinib ⁵²⁻⁵⁴	Days 1-28: Entrectinib 600mg orally once daily. Repeat cycle every 4 weeks.
Other Recommended	
Ceritinib ⁴³⁻⁴⁷	Days 1-28: Ceritinib 450mg orally once daily. Repeat cycle every 4 weeks.
ROS1 Rearrangement Positive: Subsequent Therapy^a	
If progression on Entrectinib, Crizotinib, or Ceritinib	
Ceritinib ⁴³⁻⁴⁷	Days 1-28: Ceritinib 450mg orally once daily. Repeat cycle every 4 weeks.
Crizotinib ^{35,48-51}	Days 1-28: Crizotinib 250mg orally twice daily. Repeat cycle every 4 weeks.
Entrectinib ⁵²⁻⁵⁴	Days 1-28: Entrectinib 600mg orally once daily. Repeat cycle every 4 weeks.
Lorlatinib ³⁹⁻⁴²	Days 1-28: Lorlatinib 100mg orally once daily. Repeat cycle every 4 weeks.
If further progression, refer to Systemic Therapy for Advanced or Metastatic Disease – Adenocarcinoma, Systemic Therapy for Advanced or Metastatic Disease – Squamous Cell Carcinoma	
BRAF V600E Mutation Positive: First-Line Therapy^{a,p}	
Preferred	
Dabrafenib ^q + Trametinib ⁵⁵⁻⁵⁸	Days 1-28: Dabrafenib 150mg orally twice daily Days 1-28: Trametinib 2mg orally once daily. Repeat cycle every 4 weeks.
Useful in Certain Circumstances	
Dabrafenib ^{55,59,60,q}	Days 1-28: Dabrafenib 150mg orally twice daily. Repeat cycle every 4 weeks.
Vemurafenib ^{59,61,62}	Days 1-28: Vemurafenib 960mg orally twice daily. Repeat cycle every 4 weeks.
Refer to Systemic Therapy for Advanced or Metastatic Disease – Adenocarcinoma, Systemic Therapy for Advanced or Metastatic Disease – Squamous Cell Carcinoma	
BRAF V600E Mutation Positive: Subsequent Therapy^a	
Dabrafenib ^q + Trametinib ⁵⁵⁻⁵⁸	Days 1-28: Dabrafenib 150mg orally twice daily Days 1-28: Trametinib 2mg orally once daily. Repeat cycle every 4 weeks.
If further progression, refer to Systemic Therapy for Advanced or Metastatic Disease – Adenocarcinoma, Systemic Therapy for Advanced or Metastatic Disease – Squamous Cell Carcinoma or Systemic Therapy for Advanced or Metastatic Disease - Subsequent	
NTRK1/2/3 Gene Fusion Positive: First-Line Therapy/Subsequent Therapy^{a,r}	
Preferred Therapy	
Entrectinib ⁵²⁻⁵⁴	Days 1-28: Entrectinib 600mg orally once daily. Repeat cycle every 4 weeks.
Larotrectinib ^{63,64}	Days 1-28: Larotrectinib 100mg orally twice daily. Repeat cycle every 4 weeks.
Useful in Certain Circumstances	
Refer to Systemic Therapy for Advanced or Metastatic Disease – Adenocarcinoma, Systemic Therapy for Advanced or Metastatic Disease – Squamous Cell Carcinoma or Systemic Therapy for Advanced or Metastatic Disease – Subsequent	

continued

Non-Small Cell Lung Cancer Treatment Regimens

► Targeted Therapy or Immunotherapy for Advanced or Metastatic Disease¹ (continued)

REGIMEN	DOSING
MET Exon 14 Skipping Mutation: First-Line Therapy/Subsequent Therapy^{a,s}	
Preferred	
Capmatinib ^{65,66}	Days 1-28: Capmatinib 400mg orally twice daily. Repeat cycle every 4 weeks.
Tepotinib ^{67,68}	Days 1-28: Tepotinib 450mg orally once daily. Repeat cycle every 4 weeks.
Useful in Certain Circumstances	
Crizotinib ^{35,48-51}	Days 1-28: Crizotinib 250mg orally twice daily. Repeat cycle every 4 weeks.
Refer to Systemic Therapy for Advanced or Metastatic Disease – Adenocarcinoma, Systemic Therapy for Advanced or Metastatic Disease – Squamous Cell Carcinoma or Systemic Therapy for Advanced or Metastatic Disease - Subsequent	
RET Rearrangement Positive: First-line Therapy/Subsequent Therapy^{a,t}	
Preferred	
Pralsetinib ^{69,70}	Days 1-28: Pralsetinib 400mg orally once daily. Repeat cycle every 4 weeks.
Selpercatinib ^{71,72}	If weight <50kg: Days 1-28: Selpercatinib 120mg orally twice daily. Repeat cycle every 4 weeks. OR If weight ≥50kg: Days 1-28: Selpercatinib 160mg orally twice daily. Repeat cycle every 4 weeks.
Useful in Certain Circumstances	
Cabozantinib ⁷³⁻⁷⁵	Days 1-28: Cabozantinib 60mg orally once daily. Repeat cycle every 4 weeks.
Other Recommended	
Refer to Systemic Therapy for Advanced or Metastatic Disease – Adenocarcinoma, Systemic Therapy for Advanced or Metastatic Disease – Squamous Cell Carcinoma or Systemic Therapy for Advanced or Metastatic Disease - Subsequent	
PD-L1 Positive (≥50%) and Negative for Actionable Molecular Biomarkers, with No Contraindications to PD-1 or PD-L1 Inhibitors (PS 0-2): Adenocarcinoma, Large Cell, NSCLC NOS First-line Therapy	
Preferred	
Atezolizumab (Category 1) ^{76-80,u}	Day 1: Atezolizumab 840mg IV. Repeat cycle every 2 weeks. OR Day 1: Atezolizumab 1,200mg IV. Repeat cycle every 3 weeks. OR Day 1: Atezolizumab 1,680mg IV. Repeat cycle every 4 weeks.
Carboplatin + Pemetrexed + Pembrolizumab (Category 1) ^{81-84,u,v} <i>Premedication is required.</i>	Day 1: Pembrolizumab 200mg IV over 30 minutes, followed by: Day 1: Pemetrexed 500mg/m ² IV over 10 minutes, followed by: Day 1: Carboplatin AUC 5 IV over 30 minutes. Repeat every 3 weeks for 4-6 cycles, followed by maintenance therapy with: Day 1: Pembrolizumab 200mg IV over 30 minutes OR Day 1: Pembrolizumab 400mg IV over 30 minutes every other cycle, followed by maintenance therapy with: Day 1: Pemetrexed 500mg/m ² IV over 10 minutes. Repeat cycle every 3 weeks for 2 years, followed by: Day 1: Pemetrexed 500mg/m ² IV over 10 minutes. Repeat cycle every 3 weeks.

continued

Non-Small Cell Lung Cancer Treatment Regimens

► Targeted Therapy or Immunotherapy for Advanced or Metastatic Disease¹ (continued)

REGIMEN	DOSING
PD-L1 Positive (≥50%) and Negative for Actionable Molecular Biomarkers, with No Contraindications to PD-1 or PD-L1 Inhibitors (PS 0-2): Adenocarcinoma, Large Cell, NSCLC NOS First-line Therapy (continued)	
Preferred (continued)	
Cisplatin + Pemetrexed + Pembrolizumab (Category 1) ^{81,82,84,u,v,dd} <i>Premedication is required.</i>	Day 1: Pembrolizumab 200mg IV over 30 minutes, followed by: Day 1: Pemetrexed 500mg/m ² IV over 10 minutes, followed by: Day 1: Cisplatin 75mg/m ² IV over 2 hours. Repeat cycle every 3 weeks for 4-6 cycles, followed by maintenance therapy with: Day 1: Pembrolizumab 200mg IV over 30 minutes OR Day 1: Pembrolizumab 400mg IV over 30 minutes every other cycle, followed by maintenance therapy with: Day 1: Pemetrexed 500mg/m ² IV over 10 minutes. Repeat cycle every 3 weeks for 2 years, followed by: Day 1: Pemetrexed 500mg/m ² IV over 10 minutes. Repeat cycle every 3 weeks.
Cemiplimab-rwlc (Category 1) ^{85,86,u}	Day 1: Cemiplimab-rwlc 350mg IV over 30 minutes Repeat cycle every 3 weeks.
Pembrolizumab (Category 1) ^{81,84,87-89,u}	Day 1: Pembrolizumab 200mg IV over 30 minutes. Repeat cycle every 3 weeks for up to 2 years of therapy. OR Day 1: Pembrolizumab 400mg IV over 30 minutes. Repeat cycle every 6 weeks for up to 2 years of therapy.
Other Recommended	
Carboplatin + Albumin-Bound Paclitaxel + Atezolizumab ^{76,90,u}	Day 1: Atezolizumab 1,200mg IV, followed by: Days 1,8,15: Albumin-Bound Paclitaxel 100mg/m ² IV over 30 minutes Day 1: Carboplatin AUC 6 IV over 30 minutes Repeat cycle every 3 weeks for 4-6 cycles, followed by maintenance therapy with: Day 1: Atezolizumab 840mg IV Repeat cycle every 2 weeks. OR Day 1: Atezolizumab 1,200mg IV, followed by: Days 1,8,15: Albumin-Bound Paclitaxel 100mg/m ² IV over 30 minutes Day 1: Carboplatin AUC 6 IV over 30 minutes Repeat cycle every 3 weeks for 4-6 cycles, followed by maintenance therapy with: Day 1: Atezolizumab 1,200mg IV Repeat cycle every 3 weeks. OR Day 1: Atezolizumab 1,200mg IV, followed by: Days 1,8,15: Albumin-Bound Paclitaxel 100mg/m ² IV over 30 minutes Day 1: Carboplatin AUC 6 IV over 30 minutes Repeat cycle every 3 weeks for 4-6 cycles, followed by maintenance therapy with: Day 1: Atezolizumab 1,680mg IV Repeat cycle every 4 weeks.
Carboplatin + Paclitaxel + Bevacizumab + Atezolizumab (Category 1) ^{18,76,91,f,g,u,w} <i>Premedication is required.</i>	Day 1: Atezolizumab 1,200mg IV followed by: Day 1: Bevacizumab 15mg/kg IV followed by: Day 1: Paclitaxel 200mg/m ² IV over 3 hours Day 1: Carboplatin AUC 6 IV over 30 minutes. Repeat cycle every 3 weeks for 4-6 cycles. OR Day 1: Atezolizumab 1,200mg IV, followed by: Day 1: Bevacizumab 15mg/kg IV, followed by: Day 1: Paclitaxel 175mg/m ² (for Asian patients) over 3 hours Day 1: Carboplatin AUC 6 IV over 30 minutes. Repeat cycle every 3 weeks for 4-6 cycles.
Nivolumab + Ipilimumab + Pemetrexed + Carboplatin (Category 1) ^{92,93,94,u,v} <i>Premedication is required.</i>	Days 1,22: Nivolumab 360mg IV over 30 minutes, followed by: Day 1: Ipilimumab 1mg/kg IV over 30 minutes, followed by: Days 1,22: Pemetrexed 500mg/m ² IV over 10 minutes Days 1,22: Carboplatin AUC 6 IV over 30 minutes. Administer for one 6-week cycle, followed by maintenance therapy with: Days 1,22: Nivolumab 360mg IV over 30 minutes, followed by: Day 1: Ipilimumab 1mg/kg IV over 30 minutes. Repeat cycle every 6 weeks for a maximum of 2 years.

continued

Non-Small Cell Lung Cancer Treatment Regimens

► Targeted Therapy or Immunotherapy for Advanced or Metastatic Disease¹ (continued)

REGIMEN	DOSING
PD-L1 Positive (≥50%) and Negative for Actionable Molecular Biomarkers, with No Contraindications to PD-1 or PD-L1 Inhibitors (PS 0-2): Adenocarcinoma, Large Cell, NSCLC NOS First-line Therapy (continued)	
Other Recommended (continued)	
Nivolumab + Ipilimumab + Pemetrexed + Cisplatin (Category 1) ^{92,93,94,u,v,dd} <i>Premedication is required.</i>	Days 1,22: Nivolumab 360mg IV over 30 minutes, followed by: Day 1: Ipilimumab 1mg/kg IV over 30 minutes, followed by: Days 1,22: Pemetrexed 500mg/m ² IV over 10 minutes Days 1,22: Cisplatin 75mg/m ² IV over 2 hours. Administer for one 6-week cycle, followed by maintenance therapy with: Days 1,22: Nivolumab 360mg IV over 30 minutes, followed by maintenance therapy with: Day 1: Ipilimumab 1mg/kg IV over 30 minutes. Repeat cycle every 6 weeks for a maximum of 2 years.
Useful in Certain Circumstances	
Nivolumab + Ipilimumab (Category 1) ^{92,93,95,u}	Days 1, 15, 29: Nivolumab 3mg/kg over 30 minutes, followed by: Day 1: Ipilimumab 1mg/kg IV over 30 minutes. Repeat cycle every 6 weeks for a maximum of 2 years.
PD-L1 Positive (≥50%) and Negative for Actionable Molecular Biomarkers, with No Contraindications to PD-1 or PD-L1 Inhibitors (PS 0-2): Adenocarcinoma, Large Cell, NSCLC NOS Continuation Maintenance Therapy	
Atezolizumab ^{76-80,u,x}	Day 1: Atezolizumab 840mg IV. Repeat cycle every 2 weeks. OR Day 1: Atezolizumab 1,200mg IV. Repeat cycle every 3 weeks. OR Day 1: Atezolizumab 1,680mg IV. Repeat cycle every 4 weeks.
Atezolizumab + Bevacizumab (Category 1) ^{8,76,91,u,y}	Day 1: Atezolizumab 1,200mg IV Day 1: Bevacizumab 15mg/kg IV. Repeat cycle every 3 weeks.
Cemiplimab-rwlc (Category 1) ^{85,86,u}	Day 1: Cemiplimab-rwlc 350mg IV over 30 minutes Repeat cycle every 3 weeks.
Nivolumab + Ipilimumab (Category 1) ^{92,93,95,u,ee}	Days 1, 15, 29: Nivolumab 3mg/kg over 30 minutes, followed by: Day 1: Ipilimumab 1mg/kg IV over 30 minutes. Repeat cycle every 6 weeks for a maximum of 2 years.
Pembrolizumab (Category 1) ^{81,84,87-89,u,z}	Day 1: Pembrolizumab 200mg IV over 30 minutes. Repeat cycle every 3 weeks for up to 2 years of therapy. OR Day 1: Pembrolizumab 400mg IV over 30 minutes. Repeat cycle every 6 weeks for up to 2 years of therapy.
Pembrolizumab + Pemetrexed (Category 1) ^{81-84,u,v,aa} <i>Premedication is required.</i>	Day 1: Pembrolizumab 200mg IV over 30 minutes, followed by: Day 1: Pembrolizumab 200mg over 30 minutes OR Day 1: Pembrolizumab 400mg IV over 30 minutes every other cycle, followed by: Day 1: Pemetrexed 500mg/m ² IV over 10 minutes. Repeat cycle every 3 weeks until 2 years of therapy has been completed, followed by: Day 1: Pemetrexed 500mg/m ² IV. Repeat cycle every 3 weeks.
For Progressive Disease^{bb}	
Refer to Systemic Therapy for Advanced or Metastatic Disease – Adenocarcinoma, Systemic Therapy for Advanced or Metastatic Disease – Subsequent	
PD-L1 Positive (≥50%) and Negative for Actionable Molecular Biomarkers, with No Contraindications to PD-1 or PD-L1 Inhibitors (PS 0-2): Squamous Cell Carcinoma First-line Therapy	
Preferred	
Atezolizumab (Category 1) ^{76-80,u}	Day 1: Atezolizumab 840mg IV. Repeat cycle every 2 weeks. OR Day 1: Atezolizumab 1,200mg IV. Repeat cycle every 3 weeks. OR Day 1: Atezolizumab 1,680mg IV. Repeat cycle every 4 weeks.

continued

Non-Small Cell Lung Cancer Treatment Regimens

► Targeted Therapy or Immunotherapy for Advanced or Metastatic Disease¹ (continued)

REGIMEN	DOSING
PD-L1 Positive (≥50%) and Negative for Actionable Molecular Biomarkers, with No Contraindications to PD-1 or PD-L1 Inhibitors (PS 0-2): Squamous Cell Carcinoma First-line Therapy (continued)	
Preferred (continued)	
Carboplatin + Albumin-Bound Paclitaxel + Pembrolizumab (Category 1) ^{81,84,96,91,u,w} <i>Premedication is required.</i>	Day 1: Pembrolizumab 200mg IV over 30 minutes, followed by: Days 1,8,15: Albumin-bound Paclitaxel 100mg/m ² over 30 minutes Day 1: Carboplatin AUC 6 IV over 30 minutes. Repeat every 3 weeks for 4 cycles, followed by: Day 1: Pembrolizumab 200mg IV over 30 minutes Repeat cycle every 3 weeks for 24 months. OR Day 1: Pembrolizumab 200mg IV over 30 minutes, followed by: Days 1,8,15: Albumin-bound Paclitaxel 100mg/m ² over 30 minutes Day 1: Carboplatin AUC 6 IV over 30 minutes. Repeat cycle every 3 weeks for 4 cycles, followed by maintenance therapy with: Day 1: Pembrolizumab 400mg IV over 30 minutes. Repeat cycle every 6 weeks for 2 years.
Carboplatin + Paclitaxel + Pembrolizumab (Category 1) ^{81,84,96,91,u,w} <i>Premedication is required.</i>	Day 1: Pembrolizumab 200mg IV over 30 minutes, followed by: Day 1: Paclitaxel 200mg/m ² IV over 3 hours Day 1: Carboplatin AUC 6 IV over 30 minutes. Repeat every 3 weeks for 4 cycles, followed by maintenance therapy with: Day 1: Pembrolizumab 200mg IV over 30 minutes. Maintenance: Repeat cycle every 3 weeks for 2 years. OR Day 1: Pembrolizumab 200mg IV over 30 minutes, followed by: Day 1: Paclitaxel 200mg/m ² IV over 3 hours Day 1: Carboplatin AUC 6 IV over 30 minutes. Repeat every 3 weeks for 4 cycles, followed by maintenance therapy with: Day 1: Pembrolizumab 400mg IV over 30 minutes. Maintenance: Repeat cycle every 6 weeks for 24 months.
Cemiplimab-rwlc (Category 1) ^{85,86,u}	Day 1: Cemiplimab-rwlc 350mg IV over 30 minutes Repeat cycle every 3 weeks.
Pembrolizumab (Category 1) ^{81,84,87-89,u}	Day 1: Pembrolizumab 200mg IV over 30 minutes. Repeat cycle every 3 weeks for up to 2 years of therapy. OR Day 1: Pembrolizumab 400mg IV over 30 minutes. Repeat cycle every 6 weeks for up to 2 years of therapy.
Other Recommended	
Nivolumab + Ipilimumab + Paclitaxel + Carboplatin (Category 1) ^{92,94,u,w} <i>Premedication is required.</i>	Days 1,22: Nivolumab 360mg IV over 30 minutes, followed by: Day 1: Ipilimumab 1mg/kg IV over 30 minutes, followed by: Days 1,22: Paclitaxel 200mg/m ² IV over 3 hours, followed by: Days 1,22: Carboplatin AUC 6 IV over 30 minutes. Administer for one 6-week cycle, followed by maintenance therapy with: Days 1,22: Nivolumab 360mg IV, followed by: Day 1: Ipilimumab 1mg/kg IV over 30 minutes. Repeat cycle every 6 weeks for a maximum of 2 years.
Useful in Certain Circumstances	
Nivolumab + Ipilimumab (Category 1) ^{92,93,95,u}	Days 1,15,29: Nivolumab 3mg/kg over 30 minutes, followed by: Day 1: Ipilimumab 1mg/kg IV over 30 minutes. Repeat cycle every 6 weeks for a maximum of 2 years.
PD-L1 Positive (≥50%) and Negative for Actionable Molecular Biomarkers, with No Contraindications to PD-1 or PD-L1 Inhibitors (PS 0-2): Squamous Cell Carcinoma Continuation Maintenance Therapy	
Atezolizumab ^{76-80,u,x}	Day 1: Atezolizumab 840mg IV. Repeat cycle every 2 weeks. OR Day 1: Atezolizumab 1,200mg IV. Repeat cycle every 3 weeks. OR Day 1: Atezolizumab 1,680mg IV. Repeat cycle every 4 weeks.

continued

Non-Small Cell Lung Cancer Treatment Regimens

► Targeted Therapy or Immunotherapy for Advanced or Metastatic Disease¹ (continued)

REGIMEN	DOSING
PD-L1 Positive (≥50%) and Negative for Actionable Molecular Biomarkers, with No Contraindications to PD-1 or PD-L1 Inhibitors (PS 0-2): Squamous Cell Carcinoma Continuation Maintenance Therapy (continued)	
Cemiplimab-rwlc (Category 1) ^{85,86,u}	Day 1: Cemiplimab-rwlc 350mg IV over 30 minutes Repeat cycle every 3 weeks.
Nivolumab + Ipilimumab (Category 1) ^{92,93,95,u,ee}	Days 1, 15, 29: Nivolumab 3mg/kg over 30 minutes, followed by: Day 1: Ipilimumab 1mg/kg IV over 30 minutes. Repeat cycle every 6 weeks for a maximum of 2 years.
Pembrolizumab (Category 1) ^{81,84,87-89,u,z,cc}	Day 1: Pembrolizumab 200mg IV over 30 minutes. Repeat cycle every 3 weeks for up to 2 years of therapy. OR Day 1: Pembrolizumab 400mg IV over 30 minutes. Repeat cycle every 6 weeks for up to 2 years of therapy.
For Progressive Disease^{5b}	
Refer to Systemic Options for Advanced or Metastatic Disease: Adenocarcinoma, Systemic Therapy for Advanced or Metastatic Disease – Subsequent: Adenocarcinoma or Squamous Cell Carcinoma	
PD-L1 Positive (≥1-49%) and Negative for Actionable Molecular Biomarkers, with No Contraindications to PD-1 or PD-L1 Inhibitors (PS 0-2): Adenocarcinoma, Large Cell, NSCLC NOS First-Line Therapy	
Preferred	
Carboplatin + Pemetrexed + Pembrolizumab (Category 1) ^{81,84,u,w} <i>Premedication is required.</i>	Day 1: Pembrolizumab 200mg IV over 30 minutes, followed by: Day 1: Pemetrexed 500mg/m ² IV over 10 minutes, followed by: Day 1: Carboplatin AUC 5 IV over 30 minutes. Repeat every 3 weeks for 4-6 cycles, followed by maintenance therapy with: Day 1: Pembrolizumab 200mg IV over 30 minutes OR Day 1: Pembrolizumab 400mg IV over 30 minutes every other cycle, followed by maintenance therapy with: Day 1: Pemetrexed 500mg/m ² IV over 10 minutes. Repeat cycle every 3 weeks for 2 years, followed by: Day 1: Pemetrexed 500mg/m ² IV over 10 minutes. Repeat cycle every 3 weeks.
Cisplatin + Pemetrexed + Pembrolizumab (Category 1) ^{81,82,84,u,v,dd} <i>Premedication is required.</i>	Day 1: Pembrolizumab 200mg IV over 30 minutes, followed by: Day 1: Pemetrexed 500mg/m ² IV over 10 minutes, followed by: Day 1: Cisplatin 75mg/m ² IV over 2 hours . Repeat cycle every 3 weeks for 4-6 cycles, followed by maintenance therapy with: Day 1: Pembrolizumab 200mg IV over 30 minutes OR Day 1: Pembrolizumab 400mg IV over 30 minutes every other cycle, followed by: Day 1: Pemetrexed 500mg/m ² IV over 10 minutes. Repeat cycle every 3 weeks for 2 years, followed by: Day 1: Pemetrexed 500mg/m ² IV over 10 minutes. Repeat cycle every 3 weeks.
Other Recommended	
Carboplatin + Albumin-Bound Paclitaxel + Atezolizumab ^{76,90,u} <i>Premedication is required.</i>	Day 1: Atezolizumab 1,200mg IV, followed by: Days 1,8,15: Albumin-Bound Paclitaxel 100mg/m ² IV over 30 minutes Day 1: Carboplatin AUC 6 IV over 30 minutes Repeat cycle every 3 weeks for 4-6 cycles, followed by maintenance therapy with: Day 1: Atezolizumab 840mg IV. Repeat cycle every 2 weeks. OR Day 1: Atezolizumab 1,200mg IV, followed by: Days 1,8,15: Albumin-Bound Paclitaxel 100mg/m ² IV over 30 minutes Day 1: Carboplatin AUC 6 IV over 30 minutes Repeat cycle every 3 weeks for 4-6 cycles, followed by maintenance therapy with: Day 1: Atezolizumab 1,200mg IV. Repeat cycle every 3 weeks. OR Day 1: Atezolizumab 1,200mg IV, followed by: Days 1,8,15: Albumin-Bound Paclitaxel 100mg/m ² IV over 30 minutes Day 1: Carboplatin AUC 6 IV over 30 minutes Repeat cycle every 3 weeks for 4-6 cycles, followed by maintenance therapy with: Day 1: Atezolizumab 1,680mg IV. Repeat cycle every 4 weeks.

continued

Non-Small Cell Lung Cancer Treatment Regimens

► Targeted Therapy or Immunotherapy for Advanced or Metastatic Disease¹ (continued)

REGIMEN	DOSING
PD-L1 Positive (≥1-49%) and Negative for Actionable Molecular Biomarkers, with No Contraindications to PD-1 or PD-L1 Inhibitors (PS 0-2): Adenocarcinoma, Large Cell, NSCLC NOS First-Line Therapy (continued)	
Other Recommended (continued)	
Carboplatin + Paclitaxel + Bevacizumab + Atezolizumab (Category 1) ^{18,91,f,g,u,w} <i>Premedication is required.</i>	Day 1: Atezolizumab 1,200mg IV followed by: Day 1: Bevacizumab 15mg/kg IV followed by: Day 1: Paclitaxel 200mg/m ² IV over 3 hours Day 1: Carboplatin AUC 6 IV over 30 minutes. Repeat cycle every 3 weeks for 4-6 cycles. OR Day 1: Atezolizumab 1,200mg IV, followed by: Day 1: Bevacizumab 15mg/kg IV, followed by: Day 1: Paclitaxel 175mg/m ² (for Asian patients) over 3 hours Day 1: Carboplatin AUC 6 IV over 30 minutes. Repeat cycle every 3 weeks for 4-6 cycles.
Nivolumab + Ipilimumab + Pemetrexed + Carboplatin (Category 1) ^{92,94,u,v} <i>Premedication is required.</i>	Days 1,22: Nivolumab 360mg IV over 30 minutes, followed by: Day 1: Ipilimumab 1mg/kg IV over 30 minutes, followed by: Days 1,22: Pemetrexed 500mg/m ² IV over 10 minutes, followed by: Days 1,22: Carboplatin AUC 6 IV over 30 minutes. Administer for one 6-week cycle, followed by maintenance therapy with: Days 1,22: Nivolumab 360mg IV over 30 minutes, followed by: Day 1: Ipilimumab 1mg/kg IV over 30 minutes. Repeat cycle every 6 weeks for a maximum of 2 years.
Nivolumab + Ipilimumab + Pemetrexed + Cisplatin (Category 1) ^{92,93,95,u,v,dd} <i>Premedication is required.</i>	Days 1,22: Nivolumab 360mg IV over 30 minutes, followed by: Day 1: Ipilimumab 1mg/kg IV over 30 minutes, followed by: Days 1,22: Pemetrexed 500mg/m ² IV over 10 minutes Days 1,22: Cisplatin 75mg/m ² IV over 2 hours. Administer for one 6-week cycle, followed by maintenance therapy with: Days 1,22: Nivolumab 360mg IV over 30 minutes, followed by: Day 1: Ipilimumab 1mg/kg IV over 30 minutes. Repeat cycle every 6 weeks for a maximum of 2 years.
Useful in Certain Circumstances	
Nivolumab + Ipilimumab (Category 1) ^{92,93,95,u}	Days 1,15,29: Nivolumab 3mg/kg over 30 minutes, followed by: Day 1: Ipilimumab 1mg/kg IV over 30 minutes. Repeat cycle every 6 weeks for a maximum of 2 years.
Pembrolizumab (Category 2B) ^{81,84,87-89,u}	Day 1: Pembrolizumab 200mg IV over 30 minutes. Repeat cycle every 3 weeks for up to 2 years of therapy. OR Day 1: Pembrolizumab 400mg IV over 30 minutes. Repeat cycle every 6 weeks for up to 2 years of therapy.
PD-L1 Positive (≥1-49%) and Negative for Actionable Molecular Biomarkers, with No Contraindications to PD-1 or PD-L1 Inhibitors (PS 0-2): Adenocarcinoma, Large Cell, NSCLC NOS Continuation Maintenance Therapy	
Atezolizumab ^{76-80,u,x}	Day 1: Atezolizumab 840mg IV. Repeat cycle every 2 weeks. OR Day 1: Atezolizumab 1,200mg IV. Repeat cycle every 3 weeks. OR Day 1: Atezolizumab 1,680mg IV. Repeat cycle every 4 weeks.
Atezolizumab + Bevacizumab (Category 1) ^{18,76,91,f,g,u,y}	Day 1: Atezolizumab 1,200mg IV Day 1: Bevacizumab 15mg/kg IV. Repeat cycle every 3 weeks.
Nivolumab + Ipilimumab (Category 1) ^{92,95,u,ee}	Days 1,15,29: Nivolumab 3mg/kg over 30 minutes, followed by: Day 1: Ipilimumab 1mg/kg IV over 30 minutes. Repeat cycle every 6 weeks for a maximum of 2 years.
Pembrolizumab (Category 2B) ^{81,84,87-89,u,z}	Day 1: Pembrolizumab 200mg IV over 30 minutes. Repeat cycle every 3 weeks for up to 2 years of therapy. OR Day 1: Pembrolizumab 400mg IV over 30 minutes. Repeat cycle every 6 weeks for up to 2 years of therapy.

continued

Non-Small Cell Lung Cancer Treatment Regimens

► Targeted Therapy or Immunotherapy for Advanced or Metastatic Disease¹ (continued)

REGIMEN	DOSING
PD-L1 Positive (≥1-49%) and Negative for Actionable Molecular Biomarkers, with No Contraindications to PD-1 or PD-L1 Inhibitors (PS 0-2): Adenocarcinoma, Large Cell, NSCLC NOS Continuation Maintenance Therapy (continued)	
Pembrolizumab + Pemetrexed (Category 1) ^{81,84,u,v,aa} <i>Premedication is required.</i>	<p>Day 1: Pembrolizumab 200mg IV over 30 minutes OR</p> <p>Day 1: Pembrolizumab 400mg IV over 30 minutes every other cycle, followed by:</p> <p>Day 1: Pemetrexed 500mg/m² IV over 10 minutes.</p> <p>Repeat cycle every 3 weeks until 2 years of therapy has been completed, followed by:</p> <p>Day 1: Pemetrexed 500mg/m² IV.</p> <p>Repeat cycle every 3 weeks.</p>
For Progressive Disease^{bb}	
See Systemic Options for Advanced or Metastatic Disease: Adenocarcinoma, Systemic Therapy for Advanced or Metastatic Disease – Subsequent: Adenocarcinoma or Squamous Cell Carcinoma	
PD-L1 Positive (≥1-49%) and Negative for Actionable Molecular Biomarkers, with No Contraindications to PD-1 or PD-L1 Inhibitors (PS 0-2): Squamous Cell Carcinoma First-Line Therapy	
Preferred	
Carboplatin + Albumin-Bound Paclitaxel + Pembrolizumab (Category 1) ^{81,84,96,u}	<p>Day 1: Pembrolizumab 200mg IV over 30 minutes, followed by:</p> <p>Days 1,8,15: Albumin-bound Paclitaxel 100mg/m² over 30 minutes</p> <p>Day 1: Carboplatin AUC 6 IV over 30 minutes.</p> <p>Repeat every 3 weeks for 4 cycles, followed by maintenance therapy with:</p> <p>Day 1: Pembrolizumab 200mg IV over 30 minutes</p> <p>Repeat cycle every 3 weeks for 2 years.</p> <p>OR</p> <p>Day 1: Pembrolizumab 200mg IV over 30 minutes, followed by:</p> <p>Days 1,8,15: Albumin-bound Paclitaxel 100mg/m² over 30 minutes</p> <p>Day 1: Carboplatin AUC 6 IV over 30 minutes.</p> <p>Repeat cycle every 3 weeks for 4 cycles, followed by maintenance therapy with:</p> <p>Day 1: Pembrolizumab 400mg IV over 30 minutes.</p> <p>Repeat cycle every 6 weeks for 2 years.</p>
Carboplatin + Paclitaxel + Pembrolizumab (Category 1) ^{81,84,96,u,w} <i>Premedication is required.</i>	<p>Day 1: Pembrolizumab 200mg IV over 30 minutes, followed by:</p> <p>Day 1: Paclitaxel 200mg/m² IV over 3 hours</p> <p>Day 1: Carboplatin AUC 6 IV over 30 minutes.</p> <p>Repeat every 3 weeks for 4 cycles, followed by maintenance therapy with:</p> <p>Day 1: Pembrolizumab 200mg IV over 30 minutes.</p> <p>Maintenance: Repeat cycle every 3 weeks for 2 years.</p> <p>OR</p> <p>Day 1: Pembrolizumab 200mg IV over 30 minutes, followed by:</p> <p>Day 1: Paclitaxel 200mg/m² IV over 3 hours</p> <p>Day 1: Carboplatin AUC 6 IV over 30 minutes.</p> <p>Repeat every 3 weeks for 4 cycles, followed by maintenance therapy with:</p> <p>Day 1: Pembrolizumab 400mg IV over 30 minutes.</p> <p>Maintenance: Repeat cycle every 6 weeks for 2 years.</p>
Other Recommended	
Nivolumab + Ipilimumab + Paclitaxel + Carboplatin (Category 1) ^{92,94,u,w} <i>Premedication is required.</i>	<p>Days 1,22: Nivolumab 360mg IV over 30 minutes, followed by:</p> <p>Day 1: Ipilimumab 1mg/kg IV over 30 minutes, followed by:</p> <p>Days 1,22: Paclitaxel 200mg/m² IV over 3 hours, followed by:</p> <p>Days 1,22: Carboplatin AUC 6 IV over 30 minutes.</p> <p>Administer for one 6-week cycle, followed by continuation maintenance with:</p> <p>Days 1,22: Nivolumab 360mg IV, followed by:</p> <p>Day 1: Ipilimumab 1mg/kg IV over 30 minutes.</p> <p>Repeat cycle every 6 weeks for a maximum of 2 years.</p>
Useful in Certain Circumstances	
Nivolumab + Ipilimumab (Category 1) ^{92,95,u}	<p>Days 1,15,29: Nivolumab 3mg/kg over 30 minutes, followed by:</p> <p>Day 1: Ipilimumab 1mg/kg IV over 30 minutes.</p> <p>Repeat cycle every 6 weeks for a maximum of 2 years.</p>
Pembrolizumab (Category 2B) ^{81,84,87-89,u}	<p>Day 1: Pembrolizumab 200mg IV over 30 minutes.</p> <p>Repeat cycle every 3 weeks for up to 2 years of therapy.</p> <p>OR</p> <p>Day 1: Pembrolizumab 400mg IV over 30 minutes.</p> <p>Repeat cycle every 6 weeks for up to 2 years of therapy.</p>

continued

Non-Small Cell Lung Cancer Treatment Regimens

▶ Targeted Therapy or Immunotherapy for Advanced or Metastatic Disease¹ (continued)

REGIMEN	DOSING
PD-L1 Positive (≥1-49%) and Negative for Actionable Molecular Biomarkers, with No Contraindications to PD-1 or PD-L1 Inhibitors (PS 0-2): Squamous Cell Carcinoma Continuation Maintenance Therapy	
Nivolumab + Ipilimumab (Category 1) ^{92,95,u,ee}	Days 1,15,29: Nivolumab 3mg/kg over 30 minutes, followed by: Day 1: Ipilimumab 1mg/kg IV over 30 minutes. Repeat cycle every 6 weeks for a maximum of 2 years.
Pembrolizumab ^{81,84,87-89,u,z,cc}	Day 1: Pembrolizumab 200mg IV over 30 minutes. Repeat cycle every 3 weeks for up to 2 years of therapy. OR Day 1: Pembrolizumab 400mg IV over 30 minutes. Repeat cycle every 6 weeks for up to 2 years of therapy.

For Progressive Disease^{5b}

See Systemic Options for Advanced or Metastatic Disease: Adenocarcinoma, Systemic Therapy for Advanced or Metastatic Disease – Subsequent: Adenocarcinoma or Squamous Cell Carcinoma

PD-L1 Positive (<1%) and Negative for Actionable Molecular Biomarker (PS 0-2): Initial Systemic Therapy

See Systemic Therapy for Advanced or Metastatic Disease

PD-L1 Positive (<1%) and Negative for Actionable Molecular Biomarker (PS 0-2): Subsequent Therapy

See Systemic Therapy for Advanced or Metastatic Disease – Maintenance, Systemic Therapy for Advanced or Metastatic Disease – Subsequent or Progression: Adenocarcinoma or Squamous Cell Carcinoma

PD-L1 Positive (<1%) and Negative for Actionable Molecular Biomarker (PS 3-4): Initial Systemic/Subsequent Therapy

Best supportive care.

▶ Systemic Therapy for Advanced or Metastatic Disease

Adenocarcinoma, Large Cell, NSCLC NOS (PS 0-1)	
No contraindications to PD-1 or PD-L1 Inhibitors	
Preferred	
Pembrolizumab + Carboplatin + Pemetrexed (Category 1) ^{81-84,u,v} <i>Premedication is required.</i>	Day 1: Pembrolizumab 200mg IV over 30 minutes, followed by: Day 1: Pemetrexed 500mg/m ² IV over 10 minutes, followed by: Day 1: Carboplatin AUC 5 IV over 30 minutes. Repeat every 3 weeks for 4-6 cycles, followed by maintenance therapy with: Day 1: Pembrolizumab 200mg IV over 30 minutes OR Day 1: Pembrolizumab 400mg IV over 30 minutes every other cycle, followed by: Day 1: Pemetrexed 500mg/m ² IV over 10 minutes. Repeat cycle every 3 weeks for 2 years, followed by: Day 1: Pemetrexed 500mg/m ² IV over 10 minutes. Repeat cycle every 3 weeks.
Pembrolizumab + Cisplatin + Pemetrexed (Category 1) ^{81,82,84,u,v,dd} <i>Premedication is required.</i>	Day 1: Pembrolizumab 200mg IV over 30 minutes, followed by: Day 1: Pemetrexed 500mg/m ² IV over 10 minutes, followed by: Day 1: Cisplatin 75mg/m ² IV over 2 hours. Repeat cycle every 3 weeks for 4-6 cycles, followed by maintenance therapy with: Day 1: Pembrolizumab 200mg IV over 30 minutes OR Day 1: Pembrolizumab 400mg IV over 30 minutes every other cycle, followed by: Day 1: Pemetrexed 500mg/m ² IV over 10 minutes. Repeat cycle every 3 weeks for 2 years, followed by: Day 1: Pemetrexed 500mg/m ² IV over 10 minutes. Repeat cycle every 3 weeks.

continued

Non-Small Cell Lung Cancer Treatment Regimens

► Systemic Therapy for Advanced or Metastatic Disease (continued)

REGIMEN	DOSING
Adenocarcinoma, Large Cell, NSCLC NOS (PS 0-1) (continued)	
No contraindications to PD-1 or PD-L1 Inhibitors (continued)	
Other Recommended	
Atezolizumab + Carboplatin + Albumin-bound Paclitaxel ^{76,90,u}	<p>Day 1: Atezolizumab 1,200mg IV, followed by: Days 1,8,15: Albumin-Bound Paclitaxel 100mg/m² IV over 30 minutes Day 1: Carboplatin AUC 6 IV over 30 minutes. Repeat cycle every 3 weeks for 4-6 cycles, followed by maintenance therapy with: Day 1: Atezolizumab 840mg IV. Repeat cycle every 2 weeks.</p> <p>OR</p> <p>Day 1: Atezolizumab 1,200mg IV, followed by: Days 1,8,15: Albumin-Bound Paclitaxel 100mg/m² IV over 30 minutes Day 1: Carboplatin AUC 6 IV over 30 minutes Repeat cycle every 3 weeks for 4-6 cycles, followed by maintenance therapy with: Day 1: Atezolizumab 1,200mg IV. Repeat cycle every 3 weeks.</p> <p>OR</p> <p>Day 1: Atezolizumab 1,200mg IV, followed by: Days 1,8,15: Albumin-Bound Paclitaxel 100mg/m² IV over 30 minutes Day 1: Carboplatin AUC 6 IV over 30 minutes. Repeat cycle every 3 weeks for 4-6 cycles, followed by maintenance therapy with: Day 1: Atezolizumab 1,680mg IV. Repeat cycle every 4 weeks.</p>
Atezolizumab + Carboplatin + Paclitaxel + Bevacizumab (Category 1) ^{18,91,f,g,u,w} <i>Premedication is required.</i>	<p>Day 1: Atezolizumab 1,200mg IV followed by: Day 1: Bevacizumab 15mg/kg IV followed by: Day 1: Paclitaxel 200mg/m² IV over 3 hours Day 1: Carboplatin AUC 6 IV over 30 minutes. Repeat cycle every 3 weeks for 4-6 cycles.</p> <p>OR</p> <p>Day 1: Atezolizumab 1,200mg IV, followed by: Day 1: Bevacizumab 15mg/kg IV, followed by: Day 1: Paclitaxel 175mg/m² (for Asian patients) over 3 hours Day 1: Carboplatin AUC 6 IV over 30 minutes. Repeat cycle every 3 weeks for 4-6 cycles.</p>
Nivolumab + Ipilimumab ^{92,93,95,u}	<p>Days 1, 15, 29: Nivolumab 3mg/kg over 30 minutes, followed by: Day 1: Ipilimumab 1mg/kg IV over 30 minutes. Repeat cycle every 6 weeks for a maximum of 2 years.</p>
Nivolumab + Ipilimumab + Pemetrexed + Carboplatin (Category 1) ^{92,94,u,v} <i>Premedication is required.</i>	<p>Days 1,22: Nivolumab 360mg IV over 30 minutes, followed by: Day 1: Ipilimumab 1mg/kg IV over 30 minutes, followed by: Days 1,22: Pemetrexed 500mg/m² IV over 10 minutes, followed by: Days 1,22: Carboplatin AUC 6 IV over 30 minutes. Administer for one 6-week cycle, followed by continuation maintenance with: Days 1,22: Nivolumab 360mg IV over 30 minutes, followed by: Day 1: Ipilimumab 1mg/kg IV over 30 minutes. Repeat cycle every 6 weeks for a maximum of 2 years.</p>
Nivolumab + Ipilimumab + Pemetrexed + Cisplatin (Category 1) ^{92,93,94,u,v,dd} <i>Premedication is required.</i>	<p>Days 1,22: Nivolumab 360mg IV over 30 minutes, followed by: Day 1: Ipilimumab 1mg/kg IV over 30 minutes, followed by: Days 1,22: Pemetrexed 500mg/m² IV over 10 minutes, followed by: Days 1,22: Cisplatin 75mg/m² IV over 2 hours. Administer for one 6-week cycle, followed by continuation maintenance with: Days 1,22: Nivolumab 360mg IV over 30 minutes, followed by: Day 1: Ipilimumab 1mg/kg IV over 30 minutes. Repeat cycle every 6 weeks for a maximum of 2 years.</p>
Contraindications to PD-1 or PD-L1 Inhibitors	
Useful in Certain Circumstances	
Bevacizumab + Carboplatin + Paclitaxel (Category 1) ^{18,81,97,f,g,w,gg} <i>Premedication is required.</i>	<p>Day 1: Paclitaxel 200mg/m² IV over 3 hours followed by: Day 1: Carboplatin AUC 6 IV over 30 minutes Day 1: Bevacizumab 15mg/kg IV. Repeat cycle every 3 weeks for 6 cycles.</p>

continued

Non-Small Cell Lung Cancer Treatment Regimens

► Systemic Therapy for Advanced or Metastatic Disease (continued)

REGIMEN	DOSING
Adenocarcinoma, Large Cell, NSCLC NOS (PS 0-1) (continued)	
Contraindications to PD-1 or PD-L1 Inhibitors (continued)	
Useful in Certain Circumstances (continued)	
Bevacizumab + Carboplatin + Pemetrexed ^{18,98,f,g,v,gg} <i>Premedication is required.</i>	Day 1: Pemetrexed 500mg/m ² IV over 10 minutes, followed by: Day 1: Carboplatin AUC 6 IV over 30 minutes Day 1: Bevacizumab 15mg/kg IV. Repeat cycle every 3 weeks for 4-6 cycles.
Bevacizumab + Cisplatin + Pemetrexed ^{18,99,f,g,v,dd,gg} <i>Premedication is required.</i>	Day 1: Pemetrexed 500mg/m ² IV over 10 minutes, followed by: Day 1: Cisplatin 75mg/m ² IV over 2 hours Day 1: Bevacizumab 7.5mg/kg IV. Repeat cycle every 3 weeks for 4-6 cycles.
Carboplatin + Albumin-bound Paclitaxel (Category 1) ¹⁰⁰	Days 1,8,15: Albumin-bound Paclitaxel 100mg/m ² IV over 30 minutes Day 1: Carboplatin AUC 6 IV over 30 minutes. Repeat cycle every 3 weeks for 4-6 cycles.
Carboplatin + Docetaxel (Category 1) ^{101,hh} <i>Premedication is required.</i>	Day 1: Docetaxel 75mg/m ² IV over 60 minutes, followed by: Day 1: Carboplatin AUC 6 IV over 30 minutes. Repeat cycle every 3 weeks for 4-6 cycles.
Carboplatin + Etoposide (Category 1) ^{102,103}	Day 1: Carboplatin AUC 5 IV over 30 minutes Days 1-3: Etoposide 100mg/m ² IV over 60 minutes daily. Repeat cycle every 3 weeks for 4-6 cycles.
Carboplatin + Gemcitabine (Category 1) ¹⁰⁴	Days 1,8,15: Gemcitabine 1,000mg/m ² IV over 30 minutes Day 1: Carboplatin AUC 5 IV over 30 minutes. Repeat cycle every 4 weeks for 4-6 cycles.
Carboplatin + Paclitaxel (Category 1) ^{105,106,w} <i>Premedication is required.</i>	Day 1: Paclitaxel 200mg/m ² IV over 3 hours, followed by: Day 1: Carboplatin AUC 6 IV over 30 minutes. Repeat cycle every 3 weeks for 4-6 cycles.
Carboplatin + Pemetrexed (Category 1) ^{107,v} <i>Premedication is required.</i>	Day 1: Pemetrexed 500mg/m ² IV over 10 minutes, followed by: Day 1: Carboplatin AUC 6 IV over 30 minutes. Repeat cycle every 3 weeks for 4-6 cycles.
Cisplatin + Docetaxel (Category 1) ^{101,dd,hh} <i>Premedication is required.</i>	Day 1: Docetaxel 75mg/m ² IV over 60 minutes, followed by: Day 1: Cisplatin 75mg/m ² IV over 2 hours. Repeat cycle every 3 weeks for 4-6 cycles.
Cisplatin + Etoposide (Category 1) ^{108,dd}	Day 1: Cisplatin 100mg/m ² IV over 2 hours Days 1-3: Etoposide 100mg/m ² IV over 60 minutes daily. Repeat cycle every 3 weeks for 4-6 cycles.
Cisplatin + Gemcitabine (Category 1) ^{110-112,dd}	Days 1,8: Gemcitabine 1,000-1,250mg/m ² IV over 30 minutes, followed by: Day 1: Cisplatin 75-80mg/m ² IV over 2 hours. Repeat cycle every 3 weeks for 4-6 cycles.
Cisplatin + Paclitaxel (Category 1) ^{113,w,dd} <i>Premedication is required.</i>	Day 1: Paclitaxel 135mg/m ² IV over 3 hours, followed by: Day 1: Cisplatin 75mg/m ² IV over 2 hours. Repeat cycle every 3 weeks for 4-6 cycles.
Cisplatin + Pemetrexed (Category 1) ^{111,14,dd} <i>Premedication is required.</i>	Day 1: Pemetrexed 500mg/m ² IV over 10 minutes, followed by: Day 1: Cisplatin 75mg/m ² IV over 2 hours. Repeat cycle every 3 weeks for 4-6 cycles.
Gemcitabine + Docetaxel (Category 1) ^{115,hh} <i>Premedication is required.</i>	Days 1,8: Gemcitabine 1,000-1,250mg/m ² IV over 30 minutes Day 8: Docetaxel 85mg/m ² IV over 60 minutes, followed by: Day 8: Gemcitabine 1000mg/m ² IV over 30 minutes. Repeat cycle every 3 weeks for 4-6 cycles.
Gemcitabine + Vinorelbine (Category 1) ¹¹⁶	Days 1,8: Vinorelbine 25mg/m ² IV over 5-10 minutes Days 1,8: Gemcitabine 1,000mg/m ² IV over 30 minutes. Repeat cycle every 3 weeks for 4-6 cycles.

continued

Non-Small Cell Lung Cancer Treatment Regimens

► Systemic Therapy for Advanced or Metastatic Disease (continued)

REGIMEN	DOSING
Adenocarcinoma, Large Cell, NSCLC NOS (PS 2)	
Preferred	
Carboplatin + Pemetrexed ^{107,v} <i>Premedication is required.</i>	Day 1: Pemetrexed 500mg/m ² IV over 10 minutes, followed by: Day 1: Carboplatin AUC 6 IV over 30 minutes. Repeat cycle every 3 weeks for 4-6 cycles.
Other Recommended	
Carboplatin + Albumin-Bound Paclitaxel ¹⁰⁰	Days 1,8,15: Albumin-bound Paclitaxel 100mg/m ² IV over 30 minutes Day 1: Carboplatin AUC 6 IV over 30 minutes. Repeat cycle every 3 weeks for 4-6 cycles.
Carboplatin + Docetaxel ^{101,hh} <i>Premedication is required.</i>	Day 1: Docetaxel 75mg/m ² IV over 60 minutes, followed by: Day 1: Carboplatin AUC 6 IV over 30 minutes. Repeat cycle every 3 weeks for 4-6 cycles.
Carboplatin + Etoposide ^{102,103}	Day 1: Carboplatin AUC 5 IV over 30 minutes Days 1-3: Etoposide 100mg/m ² IV over 60 minutes daily. Repeat cycle every 3 weeks for 4-6 cycles.
Carboplatin + Gemcitabine ¹⁰⁴	Days 1,8,15: Gemcitabine 1,000mg/m ² IV over 30 minutes Day 1: Carboplatin AUC 5 IV over 30 minutes. Repeat cycle every 4 weeks for 4-6 cycles.
Carboplatin + Paclitaxel ^{105,106,w} <i>Premedication is required.</i>	Day 1: Paclitaxel 200mg/m ² IV over 3 hours, followed by: Day 1: Carboplatin AUC 6 IV over 30 minutes. Repeat cycle every 3 weeks for 4-6 cycles.
Useful in Certain Circumstances	
Albumin-Bound Paclitaxel ^{117,118}	Day 1: Albumin-bound Paclitaxel 260mg/m ² IV over 30 minutes. Repeat cycle every 3 weeks for 4-6 cycles. OR Days 1,8,15: Albumin-bound Paclitaxel 125mg/m ² IV over 30 minutes. Repeat cycle every 4 weeks for 4-6 cycles.
Docetaxel ^{119,120,hh} <i>Premedication is required.</i>	Day 1: Docetaxel 75mg/m ² IV over 60 minutes. Repeat cycle every 3 weeks for 4-6 cycles
Gemcitabine ^{112,121,122}	Days 1,8,15: Gemcitabine 1,000-1,250mg/m ² IV over 30 minutes. Repeat cycle every 4 weeks for 4-6 cycles. OR Days 1 and 8: Gemcitabine 1,250mg/m ² IV over 30 minutes. Repeat cycle every 3 weeks for 4-6 cycles.
Gemcitabine + Docetaxel ^{115,hh} <i>Premedication is required.</i>	Day 1: Gemcitabine 1,000mg/m ² IV over 30 minutes Day 8: Docetaxel 85mg/m ² IV over 60 minutes, followed by: Day 8: Gemcitabine 1,000mg/m ² IV over 30 minutes. Repeat every 3 weeks for 4-6 weeks.
Gemcitabine + Vinorelbine ¹¹⁶	Days 1,8: Vinorelbine 25mg/m ² IV over 5-10 minutes Days 1,8: Gemcitabine 1,000mg/m ² IV over 30 minutes. Repeat cycle every 3 weeks for 4-6 cycles.
Paclitaxel ^{123-125,w} <i>Premedication is required.</i>	Day 1: Paclitaxel 200-225mg/m ² IV over 3 hours. Repeat cycle every 3 weeks for 4-6 cycles. OR Days 1,8,15: Paclitaxel 80mg/m ² IV over 60 minutes. Repeat cycle every 4 weeks for 4-6 cycles.
Pemetrexed ^{126-128,v} <i>Premedication is required.</i>	Day 1: Pemetrexed 500mg/m ² IV over 10 minutes. Repeat cycle every 3 weeks for 4-6 cycles.
Adenocarcinoma, Large Cell, NSCLC NOS (PS 2)	
Best supportive care.	

continued

Non-Small Cell Lung Cancer Treatment Regimens

► Systemic Therapy for Advanced or Metastatic Disease (continued)

REGIMEN	DOSING
Squamous Cell Carcinoma (PS 0-1) – No contraindications to PD-1 or PD-L1 Inhibitors^{II}	
Preferred	
Pembrolizumab + Carboplatin + Paclitaxel (Category 1) ^{81,84,96,u,w} <i>Premedication is required.</i>	<p>Day 1: Pembrolizumab 200mg IV over 30 minutes, followed by: Day 1: Paclitaxel 200mg/m² IV over 3 hours Day 1: Carboplatin AUC 6 IV over 30 minutes. Repeat every 3 weeks for 4 cycles, followed by maintenance therapy with: Day 1: Pembrolizumab 200mg IV over 30 minutes. Maintenance: Repeat cycle every 3 weeks for 2 years.</p> <p>OR</p> <p>Day 1: Pembrolizumab 200mg IV over 30 minutes, followed by: Day 1: Paclitaxel 200mg/m² IV over 3 hours Day 1: Carboplatin AUC 6 IV over 30 minutes. Repeat every 3 weeks for 4 cycles, followed by maintenance therapy with: Day 1: Pembrolizumab 400 IV over 30 minutes. Maintenance: Repeat cycle every 6 weeks for 2 years.</p>
Pembrolizumab + Carboplatin + Albumin-Bound Paclitaxel (Category 1) ^{81,84,96,u}	<p>Day 1: Pembrolizumab 200mg IV over 30 minutes, followed by: Days 1,8,15: Albumin-bound Paclitaxel 100mg/m² over 30 minutes Day 1: Carboplatin AUC 6 IV over 30 minutes. Repeat every 3 weeks for 4 cycles, followed by maintenance therapy with: Day 1: Pembrolizumab 200mg IV over 30 minutes. Repeat cycle every 3 weeks for up to 2 years.</p> <p>OR</p> <p>Day 1: Pembrolizumab 200mg IV over 30 minutes, followed by: Days 1,8,15: Albumin-bound Paclitaxel 100mg/m² over 30 minutes Day 1: Carboplatin AUC 6 IV over 30 minutes. Repeat cycle every 3 weeks for 4 cycles, followed by maintenance therapy with: Day 1: Pembrolizumab 400mg IV over 30 minutes. Repeat cycle every 6 weeks for up to 2 years.</p>
Other Recommended	
Nivolumab + Ipilimumab ^{92,93,95,u}	<p>Days 1,15,29: Nivolumab 3mg/kg over 30 minutes, followed by: Day 1: Ipilimumab 1mg/kg IV over 30 minutes. Repeat cycle every 6 weeks for a maximum of 2 years.</p>
Nivolumab + Ipilimumab + Paclitaxel + Carboplatin (Category 1) ^{92,94,u,w} <i>Premedication is required.</i>	<p>Days 1,22: Nivolumab 360mg IV over 30 minutes, followed by: Day 1: Ipilimumab 1mg/kg IV over 30 minutes, followed by: Days 1,22: Paclitaxel 200mg/m² IV over 3 hours, followed by: Days 1,22: Carboplatin AUC 6 IV over 30 minutes. Administer for one 6-week cycle, followed by: Days 1,22: Nivolumab 360mg IV, followed by: Day 1: Ipilimumab 1mg/kg IV over 30 minutes. Repeat cycle every 6 weeks for a maximum of 2 years.</p>
Useful in Certain Circumstances – Contraindications to PD-1 or PD-L1 Inhibitors^{II}	
Carboplatin + Albumin-Bound Paclitaxel (Category 1) ¹⁰⁰	<p>Days 1,8,15: Albumin-bound Paclitaxel 100mg/m² IV over 30 minutes Day 1: Carboplatin AUC 6 IV over 30 minutes. Repeat cycle every 3 weeks for 4-6 cycles.</p>
Carboplatin + Docetaxel (Category 1) ^{101,hh} <i>Premedication is required.</i>	<p>Day 1: Docetaxel 75mg/m² IV over 60 minutes, followed by: Day 1: Carboplatin AUC 6 IV over 30 minutes. Repeat cycle every 3 weeks for 4-6 cycles.</p>
Carboplatin + Gemcitabine (Category 1) ¹⁰⁴	<p>Days 1,8,15: Gemcitabine 1,000mg/m² IV over 30 minutes Day 1: Carboplatin AUC 5 IV over 30 minutes. Repeat cycle every 4 weeks for 4-6 cycles.</p>
Carboplatin + Paclitaxel (Category 1) ^{105,106,w} <i>Premedication is required.</i>	<p>Day 1: Paclitaxel 200mg/m² IV over 3 hours, followed by: Day 1: Carboplatin AUC 6 IV over 30 minutes. Repeat cycle every 3 weeks for 4 cycles.</p>
Cisplatin + Docetaxel (Category 1) ^{101,dd,hh} <i>Premedication is required.</i>	<p>Day 1: Docetaxel 75mg/m² IV over 60 minutes, followed by: Day 1: Cisplatin 75mg/m² IV over 2 hours. Repeat cycle every 3 weeks for 4-6 cycles.</p>

continued

Non-Small Cell Lung Cancer Treatment Regimens

► Systemic Therapy for Advanced or Metastatic Disease (continued)

REGIMEN	DOSING
Squamous Cell Carcinoma (PS 0-1) – No contraindications to PD-1 or PD-L1 Inhibitors^{ll} (continued)	
Useful in Certain Circumstances – Contraindications to PD-1 or PD-L1 Inhibitors^{ll} (continued)	
Cisplatin + Etoposide (Category 1) ^{108,dd}	Day 1: Cisplatin 100mg/m ² IV over 2 hours Days 1-3: Etoposide 100mg/m ² IV over 60 minutes daily. Repeat cycle every 3 weeks for 4-6 cycles.
Cisplatin + Gemcitabine (Category 1) ^{110-112,dd}	Days 1 and 8: Gemcitabine 1,000-1,250mg/m ² IV over 30 minutes, followed by: Day 1: Cisplatin 75-80mg/m ² IV over 2 hours. Repeat cycle every 3 weeks for 4-6 cycles.
Cisplatin + Paclitaxel (Category 1) ^{113,w,dd} <i>Premedication is required.</i>	Day 1: Paclitaxel 135mg/m ² IV over 3 hours, followed by: Day 1: Cisplatin 75mg/m ² IV over 2 hours. Repeat cycle every 3 weeks for 4-6 cycles.
Gemcitabine + Docetaxel (Category 1) ^{115,hh} <i>Premedication is required.</i>	Days 1 and 8: Gemcitabine 1,000-1,250mg/m ² IV over 30 minutes Day 8: Docetaxel 85mg/m ² IV over 60 minutes, followed by: Day 8: Gemcitabine 1000mg/m ² IV over 30 minutes. Repeat cycle every 3 weeks for 4-6 cycles.
Gemcitabine + Vinorelbine (Category 1) ¹¹⁶	Days 1 and 8: Vinorelbine 25mg/m ² IV over 5-10 minutes Days 1 and 8: Gemcitabine 1,000mg/m ² IV over 30 minutes. Repeat cycle every 3 weeks for 4-6 cycles.
Squamous Cell Carcinoma (PS 2)	
Preferred	
Carboplatin + Albumin-Bound Paclitaxel ¹⁰⁰	Days 1,8,15: Albumin-bound Paclitaxel 100mg/m ² IV over 30 minutes Day 1: Carboplatin AUC 6 IV over 30 minutes. Repeat cycle every 3 weeks for 4-6 cycles.
Carboplatin + Gemcitabine ¹⁰⁴	Days 1,8,15: Gemcitabine 1,000mg/m ² IV over 30 minutes Day 1: Carboplatin AUC 5 IV over 30 minutes. Repeat cycle every 4 weeks for 4-6 cycles.
Carboplatin + Paclitaxel ^{105,106,w} <i>Premedication is required.</i>	Day 1: Paclitaxel 200mg/m ² IV over 3 hours, followed by: Day 1: Carboplatin AUC 6 IV over 30 minutes. Repeat cycle every 3 weeks for 4 cycles.
Other Recommended	
Carboplatin + Docetaxel ^{101,hh} <i>Premedication is required.</i>	Day 1: Docetaxel 75mg/m ² IV over 60 minutes, followed by: Day 1: Carboplatin AUC 6 IV over 30 minutes. Repeat cycle every 3 weeks for 4-6 cycles.
Carboplatin + Etoposide ^{102,103}	Day 1: Carboplatin AUC 5 IV over 30 minutes Days 1-3: Etoposide 100mg/m ² IV over 60 minutes daily. Repeat cycle every 3 weeks for 4-6 cycles.
Useful in Certain Circumstances	
Albumin-Bound Paclitaxel ^{117,118}	Day 1: Albumin-bound Paclitaxel 260mg/m ² IV over 30 minutes. Repeat cycle every 3 weeks for 4-6 cycles. OR Days 1,8,15: Albumin-bound Paclitaxel 125mg/m ² IV over 30 minutes. Repeat cycle every 4 weeks for 4-6 cycles.
Docetaxel ^{119,120,hh} <i>Premedication is required.</i>	Day 1: Docetaxel 75mg/m ² IV over 60 minutes. Repeat cycle every 3 weeks for 4-6 cycles.
Gemcitabine ^{112,121,122}	Days 1,8,15: Gemcitabine 1,000-1,250mg/m ² IV over 30 minutes. Repeat cycle every 4 weeks for 4-6 cycles. OR Days 1,8: Gemcitabine 1,250mg/m ² IV over 30 minutes. Repeat cycle every 3 weeks for 4-6 cycles.
Gemcitabine + Docetaxel ^{115,hh} <i>Premedication is required.</i>	Day 1: Gemcitabine 1,000mg/m ² IV over 30 minutes Day 8: Docetaxel 85mg/m ² IV over 60 minutes, followed by: Day 8: Gemcitabine 1,000mg/m ² IV over 30 minutes. Repeat every 3 weeks for 4-6 weeks.

continued

Non-Small Cell Lung Cancer Treatment Regimens

► Systemic Therapy for Advanced or Metastatic Disease (continued)

REGIMEN	DOSING
Squamous Cell Carcinoma (PS 2) (continued)	
Useful in Certain Circumstances (continued)	
Gemcitabine + Vinorelbine ¹¹⁶	Days 1,8: Vinorelbine 25mg/m ² IV over 5-10 minutes Days 1,8: Gemcitabine 1,000mg/m ² IV over 30 minutes. Repeat cycle every 3 weeks for 4-6 cycles.
Paclitaxel ^{123-125,w} <i>Premedication is required.</i>	Day 1: Paclitaxel 200-225mg/m ² IV over 3 hours. Repeat cycle every 3 weeks for 4-6 cycles. OR Days 1,8,15: Paclitaxel 80mg/m ² IV over 60 minutes. Repeat cycle every 4 weeks for 4-6 cycles.
Squamous cell Carcinoma (PS 3-4)	
Best supportive care.	

► Systemic Therapy for Advanced or Metastatic Disease — Maintenance

Adenocarcinoma, Large Cell, NSCLC NOS (PS 0-2)	
Continuation Maintenance	
Atezolizumab ^{76-80,u,x}	Day 1: Atezolizumab 840mg IV. Repeat cycle every 2 weeks. OR Day 1: Atezolizumab 1,200mg IV. Repeat cycle every 3 weeks. OR Day 1: Atezolizumab 1,680mg IV. Repeat cycle every 4 weeks.
Atezolizumab ^{P-S} + Bevacizumab (Category 1) ^{18,76,91,f,g,u,y}	Day 1: Atezolizumab 1,200mg IV Day 1: Bevacizumab 15mg/kg IV. Repeat cycle every 3 weeks.
Bevacizumab (Category 1) ^{18,97,f,g}	Day 1: Bevacizumab 15mg/kg IV. Repeat cycle every 3 weeks.
Bevacizumab + Pemetrexed ^{18,98,99,f,g,v,ii} <i>Premedication is required.</i>	Day 1: Pemetrexed 500mg/m ² IV over 10 minutes Day 1: Bevacizumab 7.5-15mg/kg IV. Repeat cycle every 3 weeks.
Gemcitabine (Category 2B) ^{112,121,122}	Days 1,8,15: Gemcitabine 1,000-1,250mg/m ² IV over 30 minutes. Repeat cycle every 4 weeks for 4-6 cycles. OR Days 1 and 8: Gemcitabine 1,250mg/m ² IV over 30 minutes. Repeat cycle every 3 weeks for 4-6 cycles.
Nivolumab ^{P-S} + Ipilimumab ^{92,93,95,u,ee}	Days 1,15,29: Nivolumab 3mg/kg over 30 minutes, followed by: Day 1: Ipilimumab 1mg/kg IV over 30 minutes. Repeat cycle every 6 weeks for a maximum of 2 years.
Pembrolizumab + Pemetrexed (Category 1) ^{91u,v,aa} <i>Premedication is required.</i>	Day 1: Pembrolizumab 200mg IV over 30 minutes OR Day 1: Pembrolizumab 400mg IV over 30 minutes every other cycle, followed by: Day 1: Pemetrexed 500mg/m ² IV over 10 minutes. Repeat cycle every 3 weeks until 2 years of therapy has been completed, followed by: Day 1: Pemetrexed 500mg/m ² IV over 10 minutes. Repeat cycle every 3 weeks.
Pemetrexed (Category 1) ^{126-128,v} <i>Premedication is required.</i>	Day 1: Pemetrexed 500mg/m ² IV over 10 minutes. Repeat every 3 weeks.
Switch Maintenance	
Pemetrexed ^{126-128,v} <i>Premedication is required.</i>	Day 1: Pemetrexed 500mg/m ² IV over 10 minutes. Repeat every 3 weeks.

continued

Non-Small Cell Lung Cancer Treatment Regimens

► Systemic Therapy for Advanced or Metastatic Disease — Maintenance (continued)

REGIMEN	DOSING
Squamous Cell Carcinoma (PS 0-2)	
Continuation Maintenance	
Gemcitabine (Category 2B) ^{112,121,122}	Days 1,8,15: Gemcitabine 1,000-1,250mg/m ² IV over 30 minutes. Repeat cycle every 4 weeks for 4-6 cycles. OR Days 1,8: Gemcitabine 1,250mg/m ² IV over 30 minutes. Repeat cycle every 3 weeks for 4-6 cycles.
Nivolumab + Ipilimumab ^{92,93,95,u,ee}	Days 1, 15,29: Nivolumab 3mg/kg over 30 minutes, followed by: Day 1: Ipilimumab 1mg/kg IV over 30 minutes. Repeat cycle every 6 weeks for a maximum of 2 years.
Pembrolizumab ^{81,84,87-89,u,cc}	Day 1: Pembrolizumab 200mg IV over 30 minutes. Repeat cycle every 3 weeks for up to 2 years of therapy. OR Day 1: Pembrolizumab 400mg IV over 30 minutes. Repeat cycle every 6 weeks for up to 2 years of therapy.
Adenocarcinoma, Large Cell, NSCLC NOS, Squamous Cell Carcinoma (PS 3-4)	
Best Supportive Care	

► Systemic Therapy for Advanced or Metastatic Disease — Subsequent

Adenocarcinoma, Large Cell, NSCLC NOS (PS 0-2)	
Preferred (No previous immunotherapy)^{ff}	
Atezolizumab (Category 1) ^{76,77-80,u}	Day 1: Atezolizumab 840mg IV. Repeat cycle every 2 weeks. OR Day 1: Atezolizumab 1,200mg IV. Repeat cycle every 3 weeks. OR Day 1: Atezolizumab 1,680mg IV. Repeat cycle every 4 weeks.
Nivolumab (Category 1) ^{92,129-132,u}	Day 1: Nivolumab 240mg IV over 30 minutes Repeat every 2 weeks. OR Day 1: Nivolumab 480mg IV over 30 minutes Repeat every 4 weeks.
Pembrolizumab (Category 1) ^{81,84,87-89,u}	Day 1: Pembrolizumab 200mg IV over 30 minutes. Repeat cycle every 3 weeks for up to 2 years of therapy. OR Day 1: Pembrolizumab 400mg IV over 30 minutes. Repeat cycle every 6 weeks for up to 2 years of therapy.
Other Recommended (No previous immunotherapy or previous immunotherapy)^{ff}	
Albumin-bound Paclitaxel ^{117,118}	Day 1: Albumin-bound Paclitaxel 260mg/m ² IV over 30 minutes. Repeat cycle every 3 weeks. OR Days 1,8,15: Albumin-bound Paclitaxel 125mg/m ² IV over 30 minutes. Repeat cycle every 4 weeks.
Docetaxel ^{119,120,hh} <i>Premedication is required.</i>	Day 1: Docetaxel 75mg/m ² IV over 60 minutes. Repeat cycle every 3 weeks.
Gemcitabine ^{112,121,122} <i>Premedication is required.</i>	Days 1,8,15: Gemcitabine 1,000-1,250mg/m ² IV over 30 minutes. Repeat cycle every 4 weeks. OR Days 1 and 8: Gemcitabine 1,250mg/m ² IV over 30 minutes. Repeat cycle every 3 weeks.

continued

Non-Small Cell Lung Cancer Treatment Regimens

► Systemic Therapy for Advanced or Metastatic Disease — Subsequent (continued)

REGIMEN	DOSING
Adenocarcinoma, Large Cell, NSCLC NOS (PS 0-2) (continued)	
Other Recommended (No previous immunotherapy or previous immunotherapy)^{ff} (continued)	
Pemetrexed ^{26-128,v} <i>Premedication is required.</i>	Day 1: Pemetrexed 500mg/m ² IV over 10 minutes. Repeat cycle every 3 weeks.
Ramucirumab + Docetaxel ^{133,h,hh} <i>Premedication is required.</i>	Day 1: Ramucirumab 10mg/kg IV over 60 minutes, followed by: Day 1: Docetaxel 75mg/m ² IV over 60 minutes. Repeat cycle every 3 weeks.
Squamous Cell Carcinoma (PS 0-2)	
Preferred (No previous immunotherapy)^{ff}	
Atezolizumab (Category 1) ^{76-80,u}	Day 1: Atezolizumab 840mg IV. Repeat cycle every 2 weeks. OR Day 1: Atezolizumab 1,200mg IV. Repeat cycle every 3 weeks. OR Day 1: Atezolizumab 1,680mg IV. Repeat cycle every 4 weeks.
Nivolumab (Category 1) ^{92,129-132,u}	Day 1: Nivolumab 240mg IV over 30 minutes Repeat every 2 weeks. OR Day 1: Nivolumab 480mg IV over 30 minutes Repeat every 4 weeks.
Pembrolizumab (Category 1) ^{81,84,87-89,u}	Day 1: Pembrolizumab 200mg IV over 30 minutes. Repeat cycle every 3 weeks for up to 2 years of therapy. OR Day 1: Pembrolizumab 400mg IV over 30 minutes. Repeat cycle every 6 weeks for up to 2 years of therapy.
Other Recommended (No previous immunotherapy or previous immunotherapy)^{ff}	
Albumin-bound Paclitaxel ^{117,118}	Day 1: Albumin-bound Paclitaxel 260mg/m ² IV over 30 minutes. Repeat cycle every 3 weeks. OR Days 1,8,15: Albumin-bound Paclitaxel 125mg/m ² IV over 30 minutes. Repeat cycle every 4 weeks.
Docetaxel ^{119,120,hh} <i>Premedication is required.</i>	Day 1: Docetaxel 75mg/m ² IV over 60 minutes. Repeat cycle every 3 weeks.
Gemcitabine ^{112,121,122}	Days 1,8,15: Gemcitabine 1,000-1,250mg/m ² IV over 30 minutes. Repeat cycle every 4 weeks for 4-6 cycles. OR Days 1 and 8: Gemcitabine 1,250mg/m ² IV over 30 minutes. Repeat cycle every 3 weeks.
Ramucirumab + Docetaxel ^{133,h,hh} <i>Premedication is required.</i>	Day 1: Ramucirumab 10mg/kg IV over 60 minutes, followed by: Day 1: Docetaxel 75mg/m ² IV over 60 minutes. Repeat cycle every 3 weeks.
Adenocarcinoma, Large Cell, NSCLC NOS, Squamous Cell Carcinoma (PS 3-4)	
Best supportive care.	

► Systemic Therapy for Advanced or Metastatic Disease — Progression^{bb,ff}

Adenocarcinoma, Large Cell, NSCLC NOS^{mm,zz}	
<ul style="list-style-type: none"> • PS 0-2: Nivolumab, Pembrolizumab, or Atezolizumab, Docetaxel (Category 2B), Pemetrexed (Category 2B), Gemcitabine (Category 2B), Ramucirumab + Docetaxel (Category 2B), or Albumin-bound Paclitaxel (Category 2B) • PS 3-4: Best supportive care • Options for further progression are best supportive care or clinical trial 	

continued

Non-Small Cell Lung Cancer Treatment Regimens

► Systemic Therapy for Advanced or Metastatic Disease — Progression^{bb,f} (continued)

REGIMEN	DOSING
Squamous Cell Carcinoma^{mm,zz}	
<ul style="list-style-type: none"> • PS 0-2: Nivolumab, Pembrolizumab, or Atezolizumab, Docetaxel (Category 2B), Gemcitabine (Category 2B), Ramucirumab + Docetaxel (Category 2B), or Albumin-bound Paclitaxel (Category 2B) • PS 3-4: Best supportive care • Options for further progression are best supportive care or clinical trial. 	

► Systemic Therapy Regimens for Neoadjuvant and Adjuvant Therapy

Preferred (Nonsquamous)	
Cisplatin + Pemetrexed ^{111,114,v,dd} <i>Premedication is required.</i>	Day 1: Pemetrexed 500mg/m ² IV over 10 minutes followed by: Day 1: Cisplatin 75mg/m ² IV over 2 hours. Repeat cycle every 3 weeks for 4 cycles.
Preferred (Squamous)	
Cisplatin + Docetaxel ^{101,dd,hh} <i>Premedication is required.</i>	Day 1: Docetaxel 75mg/m ² IV over 60 minutes, followed by: Day 1: Cisplatin 75mg/m ² over 2 hours. Repeat cycle every 3 weeks for 4 cycles.
Cisplatin + Gemcitabine ^{111,112,dd}	Days 1,8: Gemcitabine 1,250mg/m ² IV over 30 minutes, followed by: Day 1: Cisplatin 75mg/m ² IV over 2 hours. Repeat cycle every 3 weeks for 4 cycles.
Other Recommended Regimens	
Cisplatin + Etoposide ^{109,dd}	Day 1: Cisplatin 100mg/m ² IV over 2 hours Days 1-3: Etoposide 100mg/m ² IV over 60 minutes. Repeat cycle every 4 weeks for 4 cycles.
Cisplatin + Vinorelbine ^{109,134,dd}	Day 1: Cisplatin 75-80mg/m ² IV over 2 hours Days 1,8: Vinorelbine 25-30mg/m ² IV over 5-10 minutes. Repeat cycle every 3 weeks for 4 cycles. OR Days 1,8: Cisplatin 50mg/m ² IV over 60 minutes Days 1,8,15,22: Vinorelbine 25mg/m ² IV over 5-10 minutes. Repeat cycle every 4 weeks for 4 cycles. OR Day 1: Cisplatin 100mg/m ² over 2 hours Days 1,8,15,22: Vinorelbine 30mg/m ² IV over 5-10 minutes. Repeat cycle every 4 weeks for 4 cycles.
Useful in Certain Circumstances	
Chemotherapy Regimens for Patients with Comorbidities or Patients Not Able to Tolerate Cisplatin	
Carboplatin + Gemcitabine ¹³⁵	Days 1,8: Gemcitabine 1,000mg/m ² IV over 30 minutes Day 1: Carboplatin AUC 5 IV over 30 minutes. Repeat cycle every 3 weeks for 4 cycles.
Carboplatin + Paclitaxel ^{105,106,w} <i>Premedication is required.</i>	Day 1: Paclitaxel 200mg/m ² IV over 3 hours, followed by: Day 1: Carboplatin AUC 6 IV over 30 minutes. Repeat cycle every 3 weeks for 4 cycles.
Carboplatin + Pemetrexed (non-squamous) ^{136,v} <i>Premedication is required.</i>	Day 1: Pemetrexed 500mg/m ² IV over 10 minutes Day 1: Carboplatin AUC 5 IV over 30 minutes. Repeat cycle every 3 weeks for 4 cycles.
All regimens can be used for sequential chemotherapy/RT	
Adjuvant Systemic Therapy	
Atezolizumab ^{76,137,u}	Day 1: Atezolizumab 840mg IV. Repeat cycle every 2 weeks for 1 year. OR Day 1: Atezolizumab 1,200mg IV. Repeat cycle every 3 weeks for 1 year. OR Day 1: Atezolizumab 1,680mg IV. Repeat cycle every 4 weeks for 1 year.

continued

Non-Small Cell Lung Cancer Treatment Regimens

► Systemic Therapy Regimens for Neoadjuvant and Adjuvant Therapy (continued)

REGIMEN	DOSING
Adjuvant Systemic Therapy	
Osimertinib (for patients with completely resected Stage IB-IIIa [exon 19 deletion or L858R] who received previous adjuvant chemotherapy or who are ineligible to receive platinum-based chemotherapy) ^{2-6,d,ij}	Days 1-28: Osimertinib 80mg orally once daily. Repeat cycle every 4 weeks for 3 years.
Neoadjuvant Systemic Therapy	
Carboplatin + Paclitaxel + Nivolumab (any histology) ^{138,u,w,kk}	Day 1: Cisplatin AUC 5 OR 6 IV Day 1: Paclitaxel 175mg/m ² or 200mg/m ² IV Day 1: Nivolumab 360mg IV. Repeat cycle every 3 weeks for up to 3 cycles.
Cisplatin + Pemetrexed + Nivolumab (nonsquamous) ^{138,u,v,kk}	Day 1: Cisplatin 75mg/m ² IV Day 1: Pemetrexed 500mg/m ² IV Day 1: Nivolumab 360mg IV. Repeat cycle every 3 weeks for up to 3 cycles.
Cisplatin + Gemcitabine + Nivolumab (squamous) ^{138,u,dd,kk}	Day 1: Cisplatin 75mg/m ² IV Days 1,8: Gemcitabine 1,000mg/m ² or 1,250mg/m ² IV Day 1: Nivolumab 360mg IV. Repeat cycle every 3 weeks for up to 3 cycles.

► Chemotherapy Regimens Used with Radiation Therapy (RT)

Concurrent Chemoradiation Regimens^{ll}	
Preferred (Nonsquamous)	
Carboplatin + Paclitaxel ^{139,140,w,mm-pp} <i>Premedication is required.</i>	Day 1: Paclitaxel 45-50mg/m ² IV over 60 minutes, followed by: Day 1: Carboplatin AUC 2 IV over 30 minutes. Repeat induction therapy weekly for 7 weeks with RT. OR Day 1: Paclitaxel 45-50mg/m ² IV over 60 minutes, followed by: Day 1: Carboplatin AUC 2 IV over 30 minutes. Repeat induction therapy weekly for 7 weeks with RT, conditionally followed by: Day 1: Paclitaxel 200mg/m ² IV over 3 hours, followed by: Day 1: Carboplatin AUC 6 IV over 30 minutes. Repeat consolidation therapy every 3 weeks for 2 cycles starting 2-4 weeks after completion of concurrent chemoradiation.
Carboplatin + Pemetrexed ^{128,v,mm-pp} <i>Premedication is required.</i>	Day 1: Pemetrexed 500mg/m ² IV over 10 minutes followed by: Day 1: Carboplatin AUC 5 IV over 30 minutes Repeat cycle every 3 weeks for 4 cycles with RT.
Cisplatin + Etoposide ^{141,142,dd,mm-oo}	Days 1, 8: Cisplatin 50mg/m ² IV over 60 minutes Days 1-5: Etoposide 50mg/m ² IV over 60 minutes. Repeat cycle every 4 weeks for 2 cycles with RT.
Cisplatin + Pemetrexed ^{143,144,dd,mm-pp} <i>Premedication is required.</i>	Day 1: Pemetrexed 500mg/m ² IV over 10 minutes Day 1: Cisplatin 75mg/m ² IV over 60 minutes. Repeat induction therapy every 3 weeks for 3 cycles with RT. OR Day 1: Pemetrexed 500mg/m ² IV over 10 minutes Day 1: Cisplatin 75mg/m ² IV over 60 minutes. Repeat induction therapy every 3 weeks for 3 cycles with RT, conditionally followed by: Day 1: Pemetrexed 500mg/m ² over 10 minutes. Repeat consolidation therapy every 3 weeks for 4 cycles following concurrent chemotherapy/RT.

continued

Non-Small Cell Lung Cancer Treatment Regimens

► Chemotherapy Regimens Used with Radiation Therapy (RT) (continued)

REGIMEN	DOSING
Concurrent Chemoradiation Regimens^{kk} (continued)	
Preferred (Squamous)	
Carboplatin + Paclitaxel^{l38,l39,w,mm-pp} <i>Premedication is required.</i>	Day 1: Paclitaxel 45-50mg/m ² IV over 60 minutes, followed by: Day 1: Carboplatin AUC 2 IV over 30 minutes. Repeat induction therapy weekly for 7 weeks with RT. OR Day 1: Paclitaxel 45-50mg/m ² IV over 60 minutes, followed by: Day 1: Carboplatin AUC 2 IV over 30 minutes. Repeat induction therapy weekly for 7 weeks with RT, conditionally followed by: Day 1: Paclitaxel 200mg/m ² IV over 3 hours, followed by: Day 1: Carboplatin AUC 6 IV over 30 minutes. Repeat consolidation therapy every 3 weeks for 2 cycles starting 2-4 weeks after completion of concurrent chemoradiation.
Cisplatin + Etoposide^{l41,l42,dd,mm-oo}	Days 1, 8: Cisplatin 50mg/m ² IV over 60 minutes Days 1-5: Etoposide 50mg/m ² IV over 60 minutes. Repeat cycle every 4 weeks for 2 cycles with RT.
Consolidation Immunotherapy for Patients with Unresectable Stage II/III NSCLC, PS 0-1, and No Disease Progression After 2 or More Cycles of Definitive Concurrent Chemoradiation^{pp}	
Durvalumab (Category 1 for Stage III; Category 2A for Stage II)^{l45-148,u}	Day 1: Durvalumab 10mg/kg IV over 60 minutes. Repeat cycle every 2 weeks for a maximum of 1 year. OR Day 1: Durvalumab 1,500mg over 60 minutes (for patients with body weight ≥30 kg). Repeat cycle every 4 weeks for a maximum of 1 year.

► Emerging Biomarkers to Identify Novel Therapies for Patients with Metastatic NSCLC

High-level MET Amplification	
Crizotinib^{48,150,151}	Days 1-28: Crizotinib 250mg orally twice daily. Repeat cycle every 4 weeks.
Capmatinib^{65,66}	Days 1-28: Capmatinib 400mg orally twice daily. Repeat cycle every 4 weeks.
Tepotinib^{67,149}	Days 1-28: Tepotinib 450mg orally once daily. Repeat cycle every 4 weeks.
ERBB2 (HER2) Mutations	
Ado-trastuzumab emtansine^{152,153}	Day 1: Ado-trastuzumab emtansine 3.6mg/kg IV. Repeat cycle every 3 weeks.
Fam-trastuzumab deruxtecan-nxki^{154,155}	Day 1: Fam-Trastuzumab deruxtecan-nxki 6.4mg/kg IV. Repeat cycle every 3 weeks.

^a For performance status (PS) 0-4

^b For *EGFR* mutation discovered during first-line treatment, complete planned therapy, including maintenance therapy or interrupt, followed by Osimertinib (preferred) or Erlotinib or Afatinib or Dacomitinib, or Erlotinib + Ramucirumab or Erlotinib + Bevacizumab.

^c If systemic therapy regimen contains an immune checkpoint inhibitor, physicians should be aware of the long half-life of such drugs and data reporting adverse events when using osimertinib in combination with or following checkpoint inhibitors. Schoenfeld AJ, et al. *Ann Oncol.* 2019;30:839-844; Oshima Y, et al. *JAMA Oncol.* 2018;4:1112-1115. Oxnard GR, et al. *Ann Oncol.* 2020;31:507-516.

^d This agent may cause severe diarrhea. Evaluate risk of diarrhea prior to initiation of therapy, then monitor for episodes of diarrhea as clinically indicated for potential dose modification or discontinuation. Diarrhea may be treated with anti-diarrheals (eg, loperamide). Patients may require IV hydration and electrolyte replacement.

^e This regimen may be associated with mucositis. Evaluate risk of mucositis prior to initiation of therapy, then monitor for episodes of mucositis as clinically indicated for potential dose modification or discontinuation. Patients may also require symptom management including topical mouthwashes, opioids for pain relief, IV hydration, and nutritional support.

^f An FDA-approved biosimilar is an appropriate substitute for Bevacizumab.

^g Criteria for treatment with Bevacizumab: non-squamous NSCLC, and no recent history of hemoptysis.

^h For Ramucirumab: Premedication for infusion reactions is required. The recommended dosing is: Diphenhydramine 12.5-50mg IV or orally 30 minutes pre-Ramucirumab.

ⁱ Afatinib + Cetuximab (Days 1-14: Afatinib 40mg orally daily; Day 1: Cetuximab 500mg/m² IV. Repeat cycle every 2 weeks.) (Janjigian YY, et al. *Cancer Discov.* 2014;4(9):1036-1045.)

^j If *EGFR* mutation discovered during first-line systemic therapy, complete planned systemic therapy, including maintenance therapy, or interrupt, followed by Afatinib (preferred) or Osimertinib (preferred) or Erlotinib or Gefitinib or Dacomitinib.

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- ^k For Amivantamab-vmjw: Premedication for infusion reactions is required. The recommended dosing is:
- For first and second infusion: Methylprednisolone 40mg or dexamethasone 10mg IV 45-60 minutes pre-Amivantamab-vmjw. For subsequent infusions (if first and second tolerated): Methylprednisolone or Dexamethasone may be omitted **AND**
 - Diphenhydramine 25-50mg IV or orally 15-60 minutes pre-Amivantamab-vmjw **AND**
 - Acetaminophen 650-1,000mg IV or orally 15-60 minutes pre-Amivantamab-vmjw
- ^l This agent may cause severe diarrhea. Evaluate risk of diarrhea prior to initiation of therapy, then monitor for episodes of diarrhea as clinically indicated for potential dose modification or discontinuation. Diarrhea may be treated with antidiarrheals (eg, loperamide). Patients may require IV hydration and electrolyte replacement.
- ^m If *ALK* rearrangement discovered during first-line systemic therapy, complete planned systemic therapy, including maintenance therapy, or interrupt, followed by Alectinib (preferred) or Brigatinib (preferred) or Lorlatinib (preferred) or Ceritinib or Crizotinib
- ⁿ This agent may cause gastrointestinal toxicities, including both constipation and diarrhea. Evaluate risk prior to initiation of therapy. Patients may require prophylaxis or treatment of symptoms with a bowel regimen, antidiarrheals, intravenous hydration and/or electrolyte replacement. Monitor for symptoms as clinically indicated for potential dose modification or discontinuation.
- ^o If *ROS1* rearrangement discovered during first-line systemic therapy, complete planned systemic therapy, including maintenance therapy, or interrupt, followed by Crizotinib (preferred) or Entrectinib (preferred) or Ceritinib.
- ^p If *BRAF*V600E mutation discovered during first-line systemic therapy, complete planned systemic therapy, including maintenance therapy, or interrupt, followed by dabrafenib + trametinib (preferred). Single-agent vemurafenib or dabrafenib are treatment options if the combination of dabrafenib + trametinib is not tolerated.
- ^q Antipyretic prophylaxis should be considered when clinically warranted. Review drug package insert for specific recommendations.
- ^r If *NTRK1/2/3* gene fusion discovered during first-line systemic therapy, complete planned systemic therapy, including maintenance therapy, or interrupt, followed by Larotrectinib or Entrectinib.
- ^s If *MET*Ex14 skipping mutation discovered during first-line systemic therapy, complete planned systemic therapy, including maintenance therapy, or interrupt, followed by Capmatinib (preferred) or Tepotinib (preferred) or Crizotinib.
- ^t If *RET* rearrangement discovered during first-line therapy, complete planned systemic therapy, including maintenance therapy, or interrupt, followed by Selpercatinib (preferred), Pralsetinib (preferred), Cabozantinib.
- ^u Early- and late-onset immune-related adverse events affecting multiple organ systems can occur in patients receiving immune checkpoint inhibitors. Patients with neurologic or life-threatening autoimmune disorders as well as receiving high levels of immunosuppression for their underlying disease should be approached with caution when considering immunotherapy. All patients will require extensive resources including ongoing intensive monitoring and supportive care.
- ^v For Pemetrexed: premedication and supplemental medications to reduce the incidence and severity of hematologic, gastrointestinal, and cutaneous toxicities are required. The recommended dosing is:
- Vitamin B₁₂ (cyanocobalamin) 1,000mcg IM during the week preceding the first cycle of Pemetrexed and every 3 cycles thereafter **AND**
 - Folic acid 400-1000mcg orally daily starting 7 days before the first cycle and continuing for 21 days after the last dose of Pemetrexed **AND**
 - Dexamethasone 4mg orally twice daily for 3 days starting the day prior to Pemetrexed.
- ^w For Paclitaxel: premedication for hypersensitivity is required:
- H₂ antagonist: Famotidine 20mg IV or orally (or equivalent H₂ blocker) 30-60 minutes pre-Paclitaxel **AND**
 - H₁ antagonist: Diphenhydramine 12.5-50mg IV or orally 30-60 minutes pre-Paclitaxel **AND**
 - Dexamethasone 20mg orally approximately 12 and 6 hours pre-Paclitaxel **OR** Dexamethasone 20 mg IV 30 minutes pre-Paclitaxel
- ^x If Atezolizumab/Carboplatin/Albumin-bound Paclitaxel or Atezolizumab given (category 1 following Atezolizumab alone).
- ^y If Atezolizumab/Carboplatin/Paclitaxel/Bevacizumab given.
- ^z If Pembrolizumab monotherapy given.
- ^{aa} If Pembrolizumab/Carboplatin/Pemetrexed or Pembrolizumab/Cisplatin/Pemetrexed given.
- ^{bb} If patient has not received platinum-doublet chemotherapy, refer to "systemic therapy". If patient received platinum chemotherapy and anti-PD-1/PD-L1, refer to "subsequent therapy".
- ^{cc} If Pembrolizumab/Carboplatin/(Paclitaxel or Albumin-bound Paclitaxel) given.
- ^{dd} Hydration is required with supplemental electrolytes pre- and post-administration of Cisplatin.
- ^{ee} If Nivolumab + Ipilimumab ffl chemotherapy given.
- ^{ff} If progression on PD-1/PD-L1 inhibitor, using a PD-1/PD-L1 inhibitor is not recommended.
- ^{gg} Bevacizumab should be given until progression.
- ^{hh} For Docetaxel, premedication with Dexamethasone for fluid retention is required. One recommended dosing strategy is:
- Dexamethasone 8 mg orally twice daily for three consecutive days start 1 day prior to Docetaxel administration.
- ⁱⁱ If Bevacizumab was used with a first-line Pemetrexed/platinum chemotherapy regimen.
- ^{jj} Osimertinib for patients with completely resected stage IB-IIIa *EGFR* (*exon 19 deletion; L858R*) NSCLC who received previous adjuvant chemotherapy or are ineligible to receive platinum-based chemotherapy.
- ^{kk} Nivolumab in combination with platinum-based chemotherapy can be used for patients with resectable (tumors ≥ 4 cm or node positive) NSCLC in the neoadjuvant setting. If an immune checkpoint inhibitor is used in the pre-operative setting, an immune checkpoint inhibitor should not be used in the adjuvant setting.
- ^{ll} For patients with superior sulcus tumors, the recommendation is for 2 cycles concurrent with radiation therapy and 2 more after surgery.
- ^{mmm} Regimens can be used as preoperative/adjuvant chemotherapy/radiotherapy.
- ⁿⁿ Regimens can be used as definitive concurrent chemotherapy/radiotherapy.
- ^{oo} For eligible patients, Durvalumab may be used after noted concurrent chemo/radiotherapy regimens.
- ^{pp} If using Durvalumab, an additional 2 cycles of chemotherapy is not recommended.

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