ZOLADEX

<table>
<thead>
<tr>
<th>Brand Name</th>
<th>Generic Name</th>
<th>Length of Authorization</th>
</tr>
</thead>
<tbody>
<tr>
<td>Zoladex</td>
<td>goserelin</td>
<td>6 months</td>
</tr>
</tbody>
</table>

Approvable Criteria:

1. Is Zoladex being prescribed by, or in consultation with, an oncologist or gynecologist?
   - If yes, continue to #2.
   - If no, do not approve.

2. Is the member a male 18 years of age or older with a diagnosis of prostate cancer
   - If yes, approve for 6 months
   - If no, continue to #3.

3. Is the member a female 18 years of age or older with a diagnosis of one of the following:
   b. Endometriosis.
   c. Dysfunctional uterine bleeding.
   - If yes, approve 3.6 mg dose for 6 months. NOTE: The Zoladex 3-month (10.8mg depot) implant is contraindicated for use in females because sufficient clinical data are not available to support reliable suppression of serum estradiol.
   - If no, do not approve.

QUANTITY LIMITS:
ZOLADEX 10.8mg = 1 KIT x 90 DAYS
ZOLADEX 3.6mg = 1 KIT x 30 DAYS

SPECIALTY PHARMACY PRODUCT

FDA Approved Indication:
Prostatic carcinoma: Palliative treatment of advanced carcinoma of the prostate. Goserelin offers an alternative treatment of prostatic cancer when orchiectomy or estrogen administration are not indicated or unacceptable to the patient.
Endometriosis (3.6mg only): Management of endometriosis, including pain relief and reduction of endometriotic lesions for the duration of therapy.
Advanced breast cancer (3.6mg only): Palliative treatment of advanced breast cancer in pre- and perimenopausal women. Estrogen and progesterone receptor values may help predict whether goserelin therapy is likely to be beneficial.
Endometrial thinning (3.6mg only): Endometrial-thinning agent prior to endometrial ablation for dysfunctional uterine bleeding.

Continued on the following page...
For Baptist Health Plan to recognize a chemotherapy regimen as an accepted approach to treatment it must be included in the National Comprehensive Cancer Network® Clinical Practice Guidelines in Oncology (NCCN Guidelines®).

References:

- Zoladex prescribing information 2003