



SAMPLE CODING

Advanced Pancreatic Cancer

ТҮРЕ	CODE		DESCRIPTION
Diagnosis: ICD-10-CM	C25.0-C25.3 C25.7-C25.9		Malignant neoplasm of pancreas
Drug: NDC Note: Payer requirements regarding use of a 10-digit or 11-digit NDC may vary. Both formats are listed here for your reference.	10-digit	11-digit	
	50242-062-01	50242-0062-01	25 mg (30 tablets)
	50242-063-01	50242-0063-01	100 mg (30 tablets)
	50242-064-01	50242-0064-01	150 mg (30 tablets)

ICD-10-CM=International Classification of Diseases, 10th Revision, Clinical Modification; NDC=National Drug Code.

These codes are not all-inclusive; appropriate codes can vary by patient, setting of care and payer. Correct coding is the responsibility of the provider submitting the claim for the item or service. Please check with the payer to verify codes and special billing requirements. Genentech does not make any representation or guarantee concerning reimbursement or coverage for any service or item.

Many payers will not accept unspecified codes. If you use an unspecified code, please check with your payer.

INDICATIONS & IMPORTANT SAFETY INFORMATION Indications

Metastatic Non-Small Cell Lung Cancer (NSCLC)

Tarceva is indicated for:

• The treatment of patients with metastatic non-small cell lung cancer (NSCLC) whose tumors have epidermal growth factor receptor (EGFR) exon 19 deletions or exon 21 (L858R) substitution mutations as detected by an FDA-approved test receiving first-line, maintenance, or second or greater line treatment after progression following at least one prior chemotherapy regimen.

Limitations of use:

- Safety and efficacy of Tarceva have not been established in patients with NSCLC whose tumors have other EGFR mutations.
- Tarceva is not recommended for use in combination with platinum-based chemotherapy.

Pancreatic Cancer

Tarceva in combination with gemcitabine is indicated for the first-line treatment of patients with locally advanced, unresectable, or metastatic pancreatic cancer.

Important Safety Information

• WARNINGS AND PRECAUTIONS:

- o Cases of serious interstitial lung disease (ILD), including fatal cases, have been reported.
- Hepatic failure, hepatorenal syndrome, and severe acute renal failure (all including fatal cases) and renal insufficiency have been reported.
- o Gastrointestinal perforation (including fatal cases) has been reported.
- Bullous, blistering and exfoliative skin conditions, including cases suggestive of Stevens-Johnson syndrome/toxic epidermal necrolysis, which in some cases were fatal, have been reported.
- In the pooled incidences in the 3 monotherapy lung studies and the pancreatic carcinoma trial, serious adverse reactions, including fatal cases, such as cerebrovascular accident and microangiopathic hemolytic anemia with thrombocytopenia were reported.





Important Safety Information (cont)

• WARNINGS AND PRECAUTIONS:

- Decreased tear production, abnormal eyelash growth, keratoconjunctivitis sicca or keratitis can occur and can lead to corneal perforation or ulceration.
- Severe and fatal hemorrhage associated with International Normalized Ratio (INR) elevations can occur when Tarceva and warfarin are used concurrently.
- Embryo-fetal toxicity. Women should be advised to avoid pregnancy or breastfeeding.

• MOST COMMON ADVERSE REACTIONS:

- Metastatic NSCLC First-Line Treatment of Patients With EGFR Mutations:
 - Diarrhea, asthenia, rash, cough, dyspnea, and decreased appetite.
- Metastatic NSCLC Maintenance Treatment:
 - Rash and diarrhea.
- Metastatic NSCLC Second/Third-line Treatment:
 - Rash and diarrhea.
- Advanced Pancreatic Cancer Tarceva Administered Concurrently with Gemcitabine:
 - Fatigue, rash, nausea, anorexia, and diarrhea.

You may report side effects to the FDA at (800) FDA-1088 or www.fda.gov/medwatch. You may also report side effects to Genentech at (888) 835-2555.

For additional Important Safety Information, please see full Prescribing Information.

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