

Eligibility criteria for positron emission tomography / computed tomography (PET/CT)

Southern Cross will only reimburse the cost of PET/CT scans under a member's policy if requested by a vocationally registered specialist and a participant within a multi-disciplinary team when the criteria **1**, **2**, **3**, **or 4** below are met for that member.

- 1. If a patient has a biopsy proven malignancy with recognised FDG or non-FDG* (see below for specific non-FDG scans) uptake and it is thought suitable for PET staging.
- 2. If a patient has an identified structural lesion on imaging with high probability for malignancy but there is no ability for a suitable tissue biopsy of the site or possible metastases and treatment options are available if malignancy is demonstrated.
- If a patient is on chemotherapy or immunological therapy agents for diagnosed malignancy that require restaging/efficacy investigations as part of treatment protocol and in whom results would significantly guide the treatment offered.
- 4. If a patient has a cardiac condition when the criteria a, b, or c below are met for that member:
 - A. For the diagnosis of cardiac sarcoidosis where other methods of imaging have not been conclusive and where diagnosis or assessment of disease activity would alter management.
 - B. For monitoring of disease activity for known cardiac sarcoidosis, where diagnosis or assessment of disease activity would alter management.
 - C. For evaluation of suspected infection of prosthetic valves or cardiac implantable devices where all other imaging techniques are contraindicated.

*If for a non-FDG scan, at least one of the following indications described for each condition below must apply:

Non-FDG PET/CT scans

1. Glioma

- For a FET PET scan to guide biopsy or target delineation for radiotherapy planning in patients with heterogeneous tumours on an MR scan.
- For a FET PET scan for differentiation of radionecrosis from recurrent glioma patients treated with radiotherapy.

2. Neuroendocrine tumour

- For a 68Ga-DOTATATE scan for staging and restaging of neuroendocrine tumour where curative surgery is considered, and MR liver is negative or equivocal.
- For a 68Ga-DOTATATE scan for staging of neuroendocrine tumour where a patient is a candidate for PRRT or chemotherapy and would otherwise have a Tecktrotyd scan.

3. Breast cancer

F-18 fluoride (NaF) PET/CT only

- For initial staging in high risk breast cancer (clinical Stage IIIA or higher).
- For initial or restaging of all stage disease with symptoms of bone pain or elevated alkaline phosphatase levels suggesting the presence of bone metastases.

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4. Prostate cancer

Gallium or F-18 PSMA PET/CT only

- For staging of high risk and unfavourable* intermediate risk prostate cancer before definitive local therapy.
- For restaging of PSA recurrence (≥0.2ng/ml).

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'Unfavourable intermediate risk prostate cancer' is defined as any of the following:

- o Gleason score 3+4=7 plus PSA greater or equal to 10
- Gleason score of 4+3=7
- Greater than 50% positive biopsy cores

Please also ensure you are familiar with all **policy exclusions**, including:

- Acute care
- Congenital conditions
- Cosmetic treatment/procedures
- Health screening
- Treatment of any condition not detrimental to health
- Unapproved healthcare services.

Refer to the relevant policy document for specific conditions and exceptions that apply to these exclusions.

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