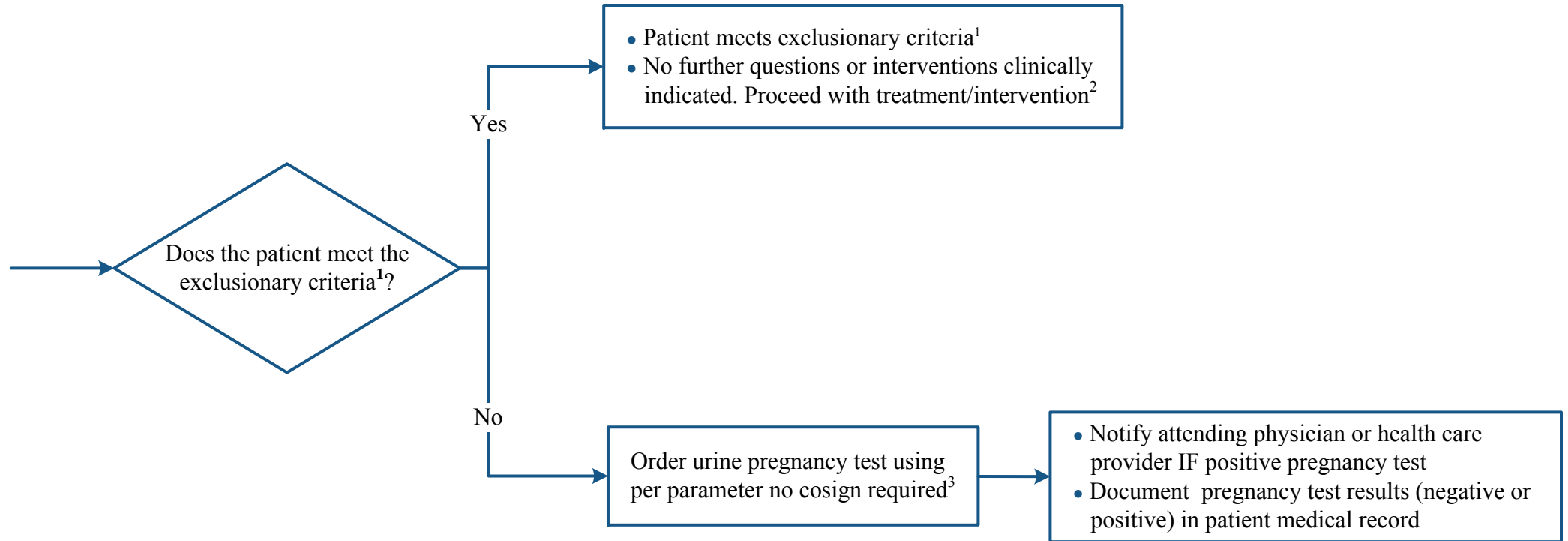


*This practice algorithm has been specifically developed for MD Anderson using a multidisciplinary approach and taking into consideration circumstances particular to MD Anderson, including the following: MD Anderson's specific patient population; MD Anderson's services and structure; and MD Anderson's clinical information. Moreover, this algorithm is not intended to replace the independent medical or professional judgment of physicians or other health care providers.*

**Patient of child bearing potential:** The ability to conceive a fetus. This includes all female patients, between the onset of **menses and the age of 8-60 years** unless the patient presents with an exclusionary criteria<sup>1</sup>.



<sup>1</sup>Patient may present with one of the following exclusion criteria: postmenopausal (no menses in greater than or equal to 12 consecutive months), hysterectomy or bilateral salpingo-oophorectomy, ovarian failure (Follicle Stimulating Hormone (FSH) and Estradiol in menopausal range, and/or who have received whole pelvic radiation therapy), and/or tubal ligation or another surgical sterilization procedure.

<sup>2</sup>Chemotherapy, surgery, diagnostic imaging, radiation therapy and other procedures.

<sup>3</sup>**Within 7 days** before the start of initial chemotherapy, surgery, diagnostic imaging, radiation therapy and other procedures, or **30 days** after an initial urine pregnancy test, and prior to any chemotherapy, surgery, diagnostic imaging, radiation therapy and other procedures.

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## DEVELOPMENT CREDITS

This practice consensus algorithm is based on majority expert opinion of the Nursing Work Group at the University of Texas MD Anderson Cancer Center. It was developed using a multidisciplinary approach that included input from the following core group members

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