INITIAL EVALUATION

- Confirm outside pathology
- History:
  - Chief complaint
  - History of present illness and previous treatment
- Past medical history (including but not limited to):
  - Social history (including tobacco and alcohol use)
- Physical examination:
  - Full head and neck exam
  - General medical examination
- Stage T and N (AJCC)
- Imaging studies:
  - High resolution CT with thin cuts and contrast and bone windows
  - Chest imaging, as clinically indicated (if smoking history of greater than 30 pack-year, consider CT chest)
  - Consider PET scan for stage III or IV

CONSULTATIONS

- Dental oncology
- Radiation oncology
- Medical oncology for patients with stage III or IV
- Speech pathology for patients whose treatment may impact swallowing and/or speech
- Plastic surgery for patients who will require major reconstruction (pharyngeal or bony reconstruction)
- Nutrition
- Smoking cessation for active smokers only (refer to Tobacco Cessation Algorithm – Adult)
- Pre-operative Internal Medicine consult
- Audiogram, if receiving chemotherapy

PRE-TREATMENT EVALUATION

- Patient information presented at multidisciplinary planning conference

Primary tumor

- T1-T2, N0

- T1-2, N1-3

- T3-4a, N0-1

- T4b, any N

AJCC = American Joint Committee on Cancer
IMPAC = Internal Medicine Perioperative Assessment Center

1 Consider dental extraction based on results of dental evaluation prior to initiation of primary treatment

2 Conditions for pre-operative internal medicine consult:
- Hypertension
  - Uncontrolled or newly diagnosed
  - Poorly compliant patient
- Multi-drug regimen for control
- Cardiac disease
  - History of myocardial infarction or angina
  - History of cardiac or vascular surgery
  - Cardiac murmur or valvular heart disease
  - Congestive heart failure
- Pulmonary disease
  - 20 or more pack per year smoking history
  - Moderate to severe chronic obstructive pulmonary disease (COPD) with less than 2 flight exercise tolerance
  - Reactive airway disease
  - Previous lung resection
  - Multiple history of pneumonias
- History of tuberculosis
- Cerebrovascular disease
  - Previous cerebrovascular accident
  - History of transient ischemic attack
- Carotid bruit or known stenosis
- Hepatic disease
  - History of cirrhosis
  - Laboratory of hepatic dysfunction
- Diabetes
  - Type
  - Type II
- Anticoagulation

Note: Consider Clinical Trials as treatment options for eligible patients.
Oral Cavity Cancer

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Note: Consider Clinical Trials as treatment options for eligible patients.

### PRIMARY TREATMENT

- **Primary tumor**
  - T1-T2, N0
    - Excision of primary tumor or sentinel node biopsy with selective neck dissection if clinically indicated
  - T1-2, N1-3
    - Excision of primary tumor with neck dissection
  - T3-4a, N0-1
    - Excision of primary tumor with neck dissection
  - T4b, any N
    - Primary tumor resectable?
      - Yes
        - Surgery (preferred for bone invasion)
      - No
        - Chemotherapy/radiation therapy
          - Consider clinical trial

### ADJUVANT TREATMENT

- Presence of pathological risk features?
  - Yes
    - Radiation therapy
    - Consider chemoradiation
  - No
    - Initial stage greater than N1?
      - Yes
        - Radiation therapy
        - Consider chemoradiation
      - No
        - Node positive?
          - Yes
            - Consider radiation
          - No

### SURVEILLANCE

- Complete response at primary site?
  - Yes
    - Neck dissection
  - No
    - Residual nodal disease?
      - Yes
        - Neck dissection
      - No
        - Stage N3?
          - Yes
            - Observe
          - No

1 Depth of invasion greater than or equal to 4 mm depth invasion
2 Pathological risk features include:
   - Primary pathology
     - Any T1 or T2 with positive or close (less than 1 mm) margins, perineural invasion, or lymphovascular invasion (re-excision to clear margins is preferred)
     - Any T3 or T4
   - Regional pathology
     - Multiple lymph nodes (any N2, N3)
     - Lymph node(s) with extracapsular extension
     - Lymph node(s) in level IV or V
3 Pathological risk factors for addition of chemotherapy include:
   - Positive margins (re-excision to clear margins is preferred)
   - Extracapsular extension
4 Bilateral neck dissection for N2c neck disease. Consider bilateral neck dissection for midline lesion.

Department of Clinical Effectiveness V6
Approved by the Executive Committee of the Medical Staff on 07/25/2017
CLINICAL PRESENTATION

Recurrent disease → Restage:
- CT head and neck
- CT chest or PET to evaluate for metastatic disease

Presence of distant metastatic disease?

Yes
- Consider systemic therapy/phae I clinical trial
  - Palliative care, as clinically indicated

No
- Is recurrence resectable?

Yes
- Consider salvage surgery, as clinically indicated
  - Palliative care, as clinically indicated

No
- Previous radiation therapy?

Yes
- Salvage surgery, as clinically indicated
  - Consider post-operative radiation therapy, as clinically indicated

No
- Consider re-irradiation, if clinically indicated
  - Palliative care

Surveillance (see Page 4)

Note: Consider Clinical Trials as treatment options for eligible patients.

1 Pathological risk factors should be taken into consideration when making concurrent treatment decisions.
## Oral Cavity Cancer Surveillance

| Total years for surveillance |  | Year 1 |  | Year 2 | Year 3 | Year 4 | Year 5 |
|-----------------------------|--|--------|--|--------|--|--------|--|--------|
| Frequency of surveillance by month | 2-3 | 6 | 9 | 12 | 16 | 20 | 24 | 36 | 48 | 60 |
| Head and neck history and physical exam | x | x | x | x | x | x | x | x | x |
| Baseline CT | x |
| Consider surveillance CT, if clinically indicated | x | x | x | x | x | x | x |
| Thyroid function, if radiation therapy | x | x | x | x | x | x | x |
| Chest x-ray yearly (CT chest if smoker) | x | x | x | x | x | x |

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SUGGESTED READINGS


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This practice algorithm is based on majority expert opinion of the Head and Neck Center Faculty at the University of Texas MD Anderson Cancer Center. It was developed using a multidisciplinary approach that included input from the following:

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