

# Oncology Clinical Pathways

## Salivary Gland Cancer

April 2025– V1.2025



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U.S. Department  
of Veterans Affairs

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# Salivary Gland Cancer – Presumptive Conditions

VA automatically presumes that certain disabilities were caused by military service. This is because of the unique circumstances of a specific Veteran's military service. If a presumed condition is diagnosed in a Veteran within a certain group, they can be awarded disability compensation.

## Atomic Veterans Exposed to Ionizing Radiation

- Salivary gland cancer

## Gulf War and Post 9/11 Veterans

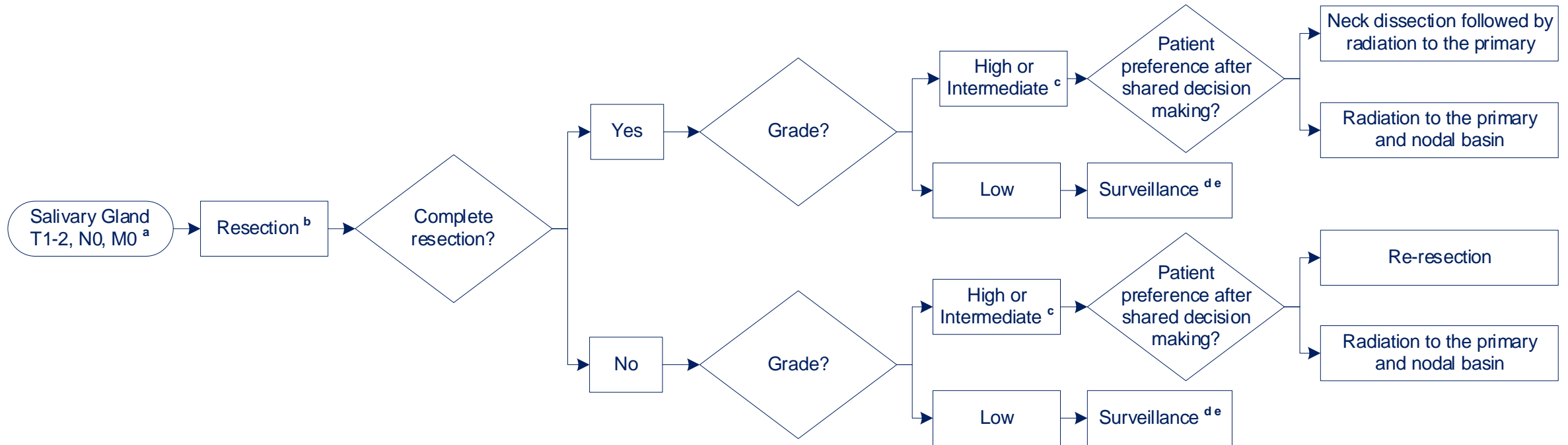
If the patient served any amount of time in Afghanistan, Djibouti, Syria, or Uzbekistan during the Persian Gulf War, from Sept. 19, 2001, to the present or the \*Southwest Asia theater of operations from Aug. 2, 1990, to the present, specific conditions include:

- Salivary gland-type tumors of the lung
- Salivary gland-type tumors of the trachea

\* The Southwest Asia theater of operations refers to Iraq, Kuwait, Saudi Arabia, the neutral zone between Iraq and Saudi Arabia, Bahrain, Qatar, the United Arab Emirates, Oman, the Gulf of Aden, the Gulf of Oman, the Persian Gulf, the Arabian Sea, the Red Sea, and the airspace above these locations.

For more information, please visit [U.S. Department of Veterans Affairs - Presumptive Disability Benefits \(va.gov\)](https://www.va.gov)

# Salivary Gland Cancer – T1-2, N0, M0



Clinical trial(s) always considered on pathway. For assistance finding a clinical trial, email [CancerClinicalTrialsNavigation@va.gov](mailto:CancerClinicalTrialsNavigation@va.gov).

<sup>a</sup> **Adverse Features** include positive margins, neural invasion, lymphovascular invasion

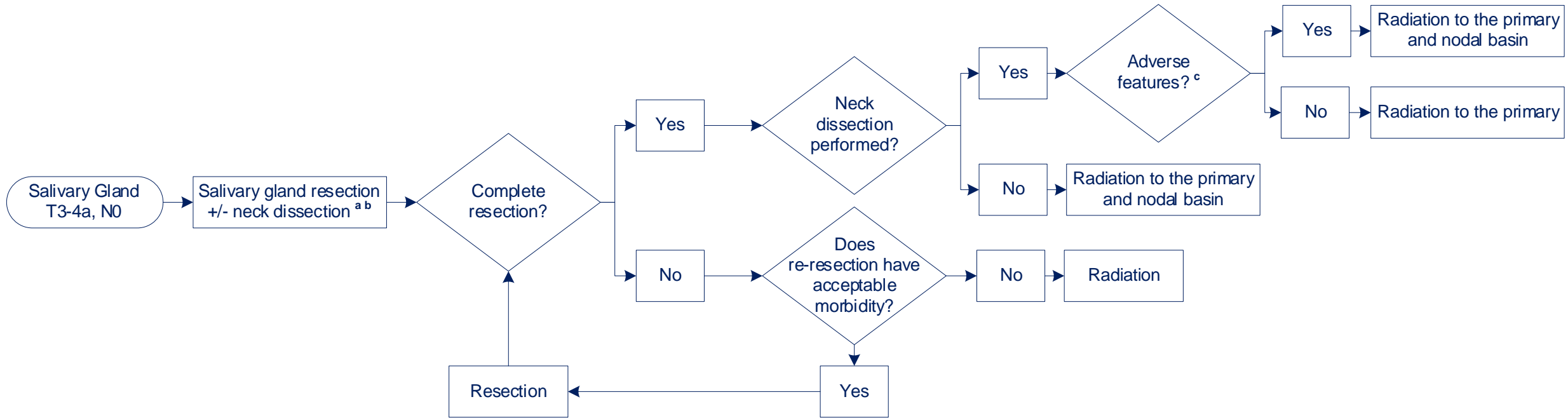
<sup>b</sup> **Resection** surgical operations may be staged if needed dependent on pathology of primary tumor

<sup>c</sup> **High or Intermediate Grade** includes adenoid cystic

<sup>d</sup> **Surveillance** consider resection if low morbidity

<sup>e</sup> **Adenoid Cystic** consider long-term surveillance > 5 years

# Salivary Gland Cancer – T3-4a, N0



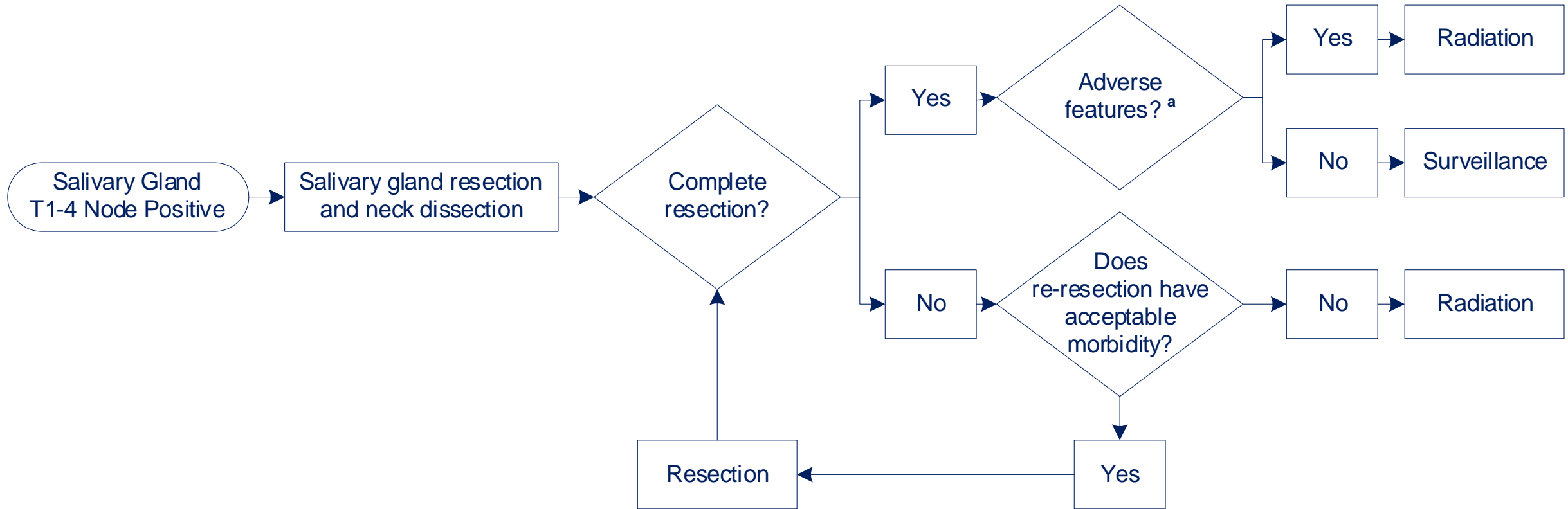
Clinical trial(s) always considered on pathway. For assistance finding a clinical trial, email [CancerClinicalTrialsNavigation@va.gov](mailto:CancerClinicalTrialsNavigation@va.gov).

<sup>a</sup> **Resection** surgical operations may be staged if needed dependent on pathology of primary tumor

<sup>b</sup> **Neck Dissection** consider avoiding if subsequent radiation to the primary site includes a large measure of the nodal basin; radiation fields would need to be increased to provide therapeutic coverage of the neck

<sup>c</sup> **Adverse Features Include** intermediate or high grade, positive margins, neural invasion, multiple lymph nodes, advanced T stage (T3-4), extranodal extension, adenoid cystic, or lymphovascular invasion

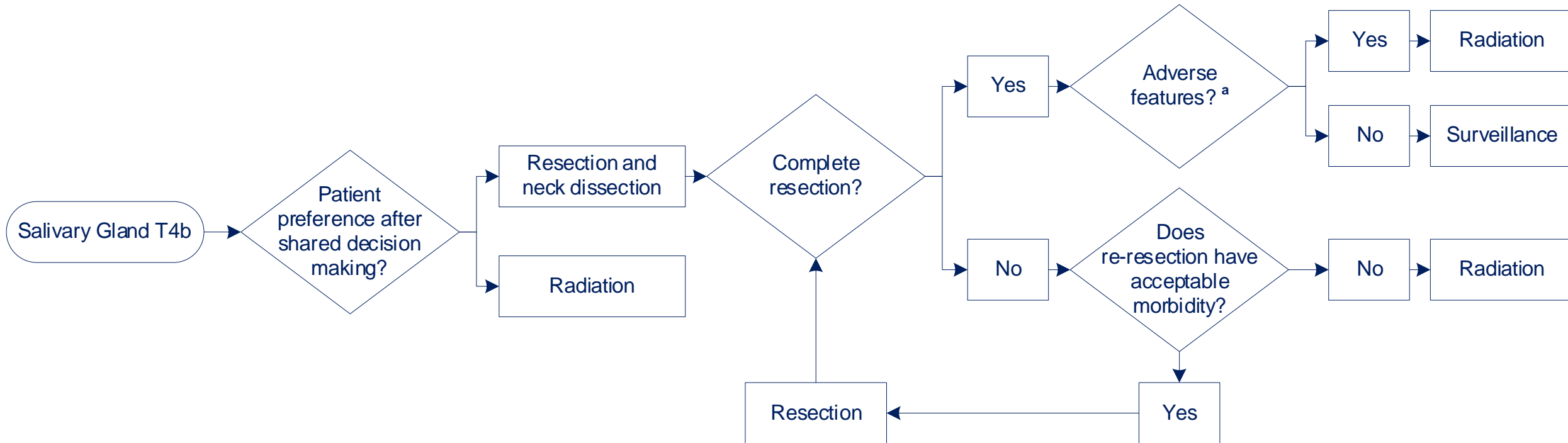
# Salivary Gland Cancer – T1-4 Node Positive



Clinical trial(s) always considered on pathway. For assistance finding a clinical trial, email [CancerClinicalTrialsNavigation@va.gov](mailto:CancerClinicalTrialsNavigation@va.gov).

<sup>a</sup> **Adverse Features Include** intermediate or high grade, positive margins, neural invasion, multiple lymph nodes, advanced T stage (T3-4), extranodal extension, adenoid cystic, or lymphovascular invasion

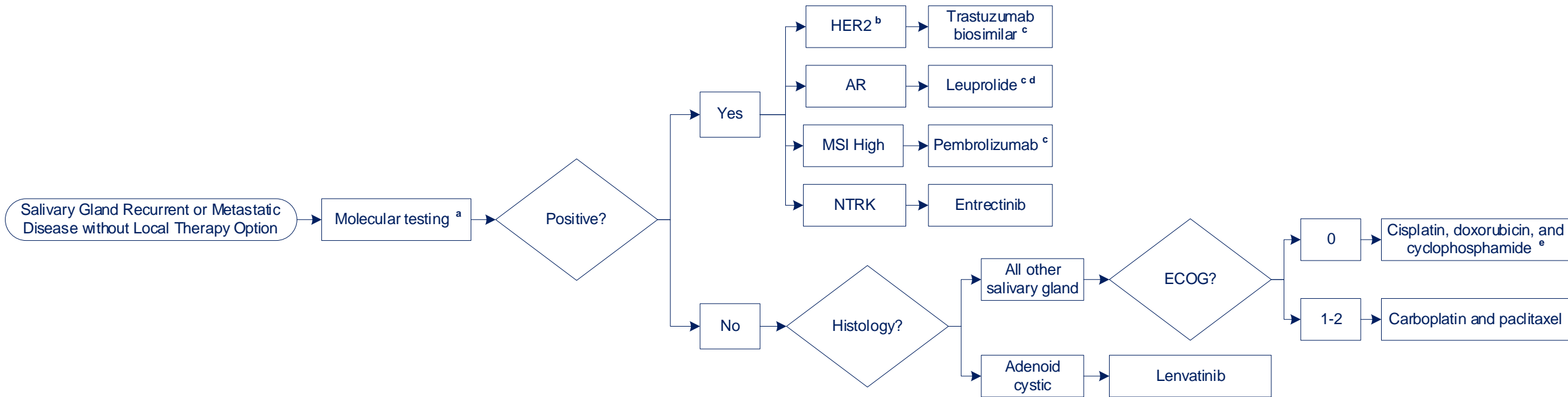
# Salivary Gland Cancer – T4b



Clinical trial(s) always considered on pathway. For assistance finding a clinical trial, email [CancerClinicalTrialsNavigation@va.gov](mailto:CancerClinicalTrialsNavigation@va.gov).

<sup>a</sup> **Adverse Features Include** intermediate or high grade, positive margins, neural invasion, multiple lymph nodes, advanced T stage (T3-4), extranodal extension, adenoid cystic, or lymphovascular invasion

# Salivary Gland Cancer – Recurrent or Metastatic Disease



Clinical trial(s) always considered on pathway. For assistance finding a clinical trial, email [CancerClinicalTrialsNavigation@va.gov](mailto:CancerClinicalTrialsNavigation@va.gov).

<sup>a</sup> **Molecular Testing** to include HER2 by IHC, NTRK gene fusion, MSI High, and Androgen Receptor; NGS is preferred

<sup>b</sup> **HER2** includes IHC, considered positive if 3+; if 2+ perform FISH testing

<sup>c</sup> **Evidence Base** is limited; limited data from phase 2 clinical trials

<sup>d</sup> **Leuprolide** prescribe for both men and women; in women, either pre or post menopause; abiraterone is an acceptable alternative

<sup>e</sup> **Cisplatin, Doxorubicin, and Cyclophosphamide** evaluate cardiovascular risk factors with baseline LVEF



# Salivary Gland Cancer – Molecular Testing Table

Eligibility	Test Category	Test Type	Recommended Vendors	NPOP Coverage	Specimen Type
Recurrent or Metastatic Salivary Gland Cancer	Somatic NGS*	CGP using both DNA and RNA based methodology	Tempus Foundation Medicine	Yes Yes	Tumor Tissue**, Blood
	IHC	AR HER2 (for trastuzumab deruxtecan indication)	Local VA or locally contracted vendor Foundation Medicine (When ordered with CGP)	No Yes	Tumor Tissue
	FISH	HER2 FISH if IHC is 2+ (for trastuzumab alone)	Local VA or locally contracted vendor	No	Tumor Tissue

\* Somatic NGS should include TMB and MSI and adequately cover NTRK fusions

\*\* Tissue testing strongly preferred because it is the only method for RNA based testing. Liquid testing is suboptimal but acceptable only if adequate tissue cannot be obtained



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