Oncology Clinical Pathways Meningioma

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<u>Meningioma – Presumptive Conditions</u>

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

Brain Cancer

Gulf War and Post 9/11 Veterans

If the patient served on or after Sept. 11, 2001, in Afghanistan, Djibouti, Egypt, Jordan, Lebanon, Syria, Uzbekistan, or Yemen or if you served in the *Southwest Asia theater of operations, or Somalia, on or after Aug. 2, 1990, specific conditions include:

Brain Cancer

* 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.

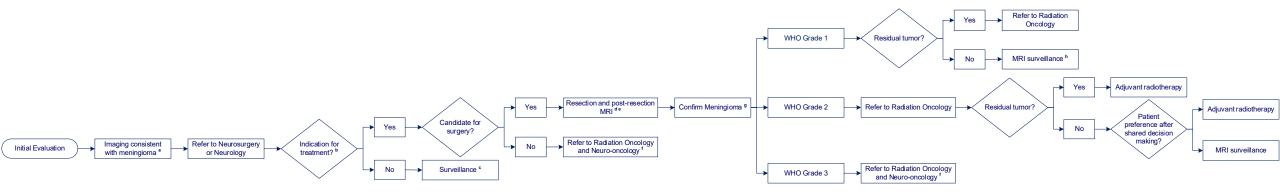
For more information, please visit <u>U.S. Department of Veterans Affairs - Presumptive Disability Benefits (va.gov)</u>







Meningioma – Initial Evaluation



Clinical trial(s) always considered on pathway. For assistance finding a clinical trial, email cancerClinicalTrialsNavigation@va.gov

a Imaging MRI with and without contrast; CT with contrast if MRI contraindicated; needs evaluation for hereditary syndromes including neurofibromatosis type 2 with referral to Genetics

^b Patient is symptomatic and/or MRI interval changes

Surveillance changes in tumor size or symptoms require multidisciplinary discussion through local tumor board or National TeleOncology CNS Virtual Tumor Board

d Simpson Grades1 through 3 indicate gross total resection; grades 4 and 5 indicate subtotal resection

e Timing of Post-Resection MRI per neurosurgeon discretion

^fRefer to Neuro-oncology via National TeleOncology consult if local VA Neuro-oncology unavailable

⁹ Confirmed by pathology with TERT mutation testing and FISH for CDKN2A/CDKN2B; Neuropathology consult should be requested for morphologically challenging cases

Interval may increase after 5 years without tumor recurrence

WHO World Health Organization







<u>Meningioma – Molecular Testing Table</u>

	FISH	CDKN2A/B homozygous loss	Local VA or locally contracted vendor	No	Tumor Tissue, Blood
Meningiomas	Molecular Testing	TERT promoter mutation testing	Local VA or locally contracted vendor	No	Tumor Tissue
	Molecular/Cytogenetic	Chromosomal microarray	Local VA or locally contracted vendor	No	Tumor Tissue





