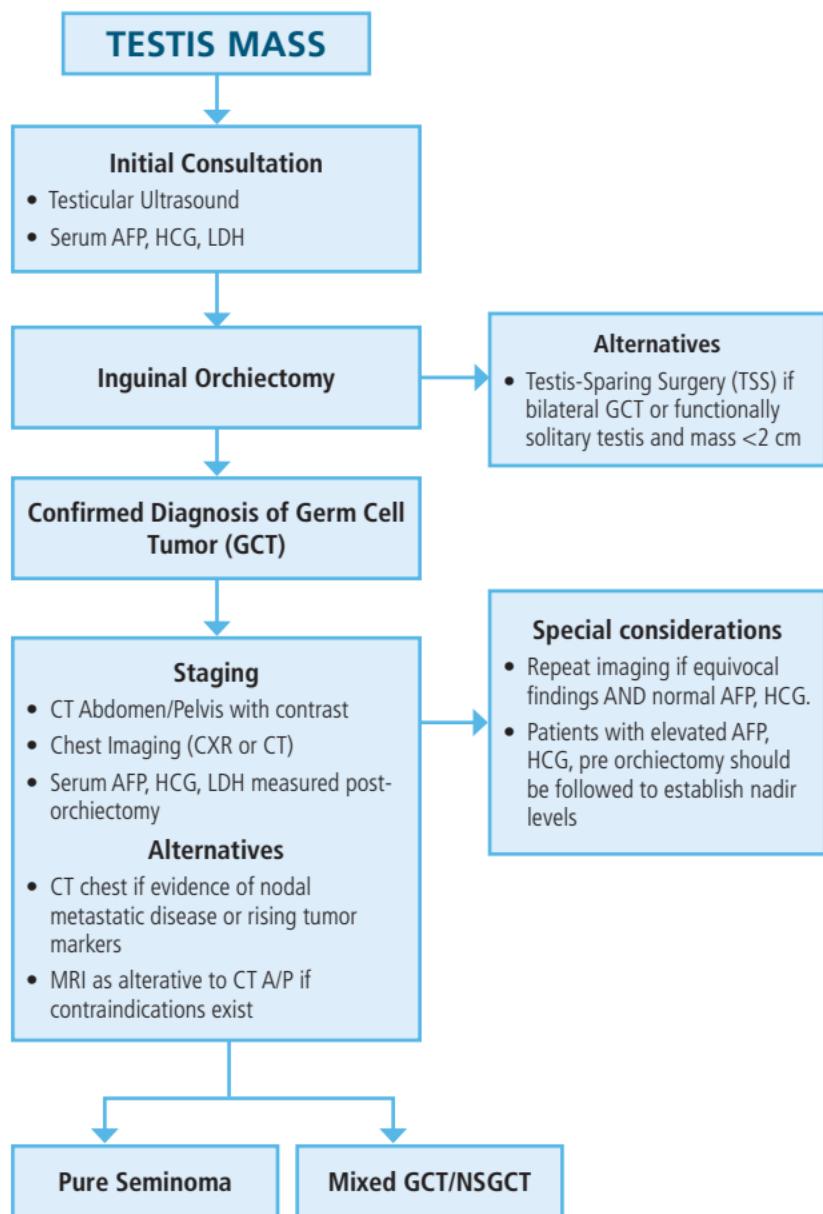
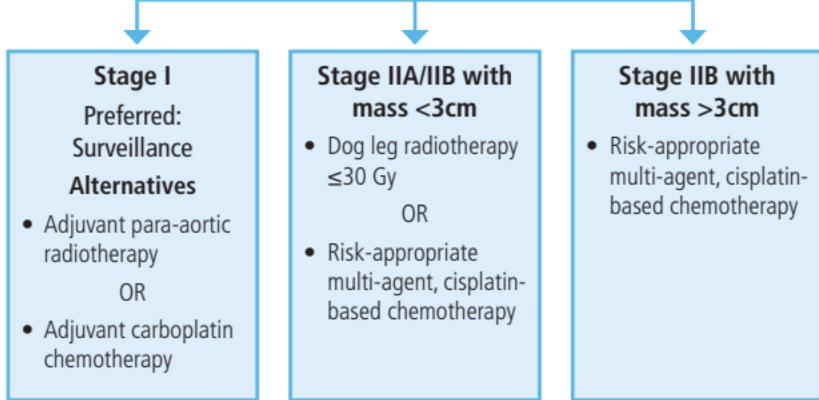


# DIAGNOSIS AND TREATMENT OF EARLY STAGE TESTICULAR CANCER: AUA GUIDELINE ALGORITHM



## PURE SEMINOMA



\*IGCCCG good risk chemotherapy BEPx3 or EPx4.

## MIXED GCT/NSGCT

Rising Post-orchiectomy AFP or HCG with clinical stage I, IIA, or IIB

Risk-appropriate multi-agent, cisplatin-based chemotherapy

### Special Considerations

- Patients with stable or borderline elevated AFP or HCG should be followed to confirm rising levels
- Isolated elevated LDH alone is not an indication for chemotherapy

Normal post orchiectomy AFP, HCG

### STAGE I

#### IA

- Preferred: Surveillance
- Alternatives
  - RPLND
  - BEPx1 Chemotherapy

#### IB

- Surveillance
- OR
- RPLND
- OR
- BEPx1 Chemotherapy

### STAGE IIA

- RPLND
- OR
- Risk-appropriate multi-agent, cisplatin-based chemotherapy

### STAGE IIB

- Preferred: Risk-appropriate multi-agent, cisplatin-based chemotherapy
- Alternative
  - RPLND

Post RPLND: Pathological Stage II

PN1: Observation

Alternative: Adjuvant chemotherapy BEPx2/ EPx2

PN2/3: Adjuvant chemotherapy BEPx2/ EPx2

Alternative: Observation

\*IGCCCG good risk chemotherapy BEPx3 or EPx4.  
Intermediate or poor risk BEPx4.

