Non-Muscle Invasive Bladder Cancer: AUA/SUO Treatment Algorithm

**TURBT**

- **Low Risk**
  - Postoperative Chemo
  - Complete response
  - Surveillance
  - Recurrence within 1 year
  - Reassess as Int. Risk*

- **Partial or no response**

- **Int. Risk**
  - Others
  - Re-TURBT† +/- Chemo

- **Others**

- **T1, LVI, +/- variant**
  - Cystectomy

- **High Risk**
  - Re-TURBT† +/- Chemo

- **Induction Chemo**
  - Complete response
  - BCG

- **Maintenance (1 yr)**
  - Complete response

  - Recurrence
    - Clinical Trial
      - If trial is unavailable
      - Intravesical Chemo
    - TURBT
    - TURBT
    - Complete response

  - Surveillance
    - Complete response

- **If unfit or unwilling to undergo surgery**
  - Reinduce

- **BCG**
  - Partial or no response
  - Complete response

- **Maintenance (3 yrs)**

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*Consider fulguration in low-volume disease recurrence; otherwise reassess as intermediate risk.

†Timely re-TURBT (within six weeks) should be performed if there are concerns regarding an incomplete resection and/or if bladder sparing treatment (e.g., intravesical therapy or surveillance), is being planned.