

<b>Seminoma</b> 55%	Stage I <b>85%</b>	Surveillance <b>20%</b>	<b>Salvage Choices (~15% of patients)</b> as for stage IIa/B or advanced			
		Para-aortic Radiotherapy 20 Gy/10# [1,2,3,4] <b>2%</b>	Now superseded by surveillance or Carboplatin ~ Chemotherapy for relapse ( <b>4%</b> )			
		Single dose carboplatin [5,6,7] <b>78%</b>	Relapse( <b>4%</b> ): BEP chemotherapy rather than radiotherapy but poor evidence base as rare			
	Stage II A/B <b>10%</b>	Single dose of carboplatin plus radiotherapy 30 gy/15# [8,9] <b>30%</b>	Chemotherapy salvage			
		Dog leg radiotherapy 35 Gy/20# [10] <b>2%</b>	Now rarely used because of risk of distant relapse. Chemotherapy salvage			
		BEP or EP chemotherapy [11] <b>68%</b>	Rare indication for radiotherapy in a small number of patients			
	Advanced Stage IIC-IV <b>5%</b>	BEP or EP chemotherapy [10,11,12]	Assess residual mass with PET CT [13]	Positive	Surgery	Occasional Role for Radiotherapy [14]
Negative			Observe			

<b>Teratoma</b> 45%	Stage I <b>~40%</b>	Adjuvant BEP or Surveillance [15]	
	Stage II-IV <b>~60%</b>	Chemotherapy [11,16,17,18]	Radiotherapy very rarely

Figures in red are clinical estimates

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