



**Figure 1.** Treatment algorithm for stage IV SCC.

<sup>a</sup>Molecular testing is not recommended in SCC, except in those rare circumstances when SCC is found in a never-, long-time ex- or light-smoker (< 15 pack-years).

<sup>b</sup>In absence of contraindications and conditioned by the registration and accessibility of anti-PD-(L)1 combinations with platinum-based ChT, this strategy will be preferred to platinum-based ChT in patients with PS 0-1 and PD-L1 < 50%. Alternatively, if TMB can accurately be evaluated, and conditioned by the registration and accessibility, nivolumab plus ipilimumab should be preferred to platinum-based standard ChT in patients with NSCLC with a high TMB.

<sup>c</sup>Not EMA-approved.