



CLINICAL CANCER GENOMICS COMMUNITY OF PRACTICE

CITY OF HOPE DIVISION OF CLINICAL CANCER GENOMICS

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CHAT LOG TIMECODES MAY NOT ALIGN WITH RECORDING

00:46:25 ALLISON JAY: is registration or hotels available for may meeting thank y
00:47:16 Kim Burns: Is there a way I can be recorded for CME today without sending a text? My text is not working on my phone!
00:47:56 Phyllis Leung: You can email the code to cme@coh.org and let them know your phone is not working
00:48:19 Clinical Cancer Genetics: CME code for today's session: ZUYCAH
00:48:50 Clinical Cancer Genetics: IC participants do not need to enter the CME code
00:49:08 Rosana Villanassi: Would you please turn on the captions?
00:49:28 COH - Suzie Shehayeb (she/her): If you hit live transcript it shows captions for me
00:49:34 Rosana Villanassi: thanks
00:49:39 COH - Suzie Shehayeb (she/her): of course!
00:51:04 Shellie Campos: Good morning! What is the CME code?
00:51:09 COH - Suzie Shehayeb (she/her): ZUYCAH
00:51:21 Shellie Campos: Thank you!
00:51:25 COH - Suzie Shehayeb (she/her): Sure!
00:54:23 Susan Jones: is there a smoking history?
00:55:03 Kim Burns: Did I miss the pathology from the colonoscopy?
00:55:14 COH - Elyssa Zukin (she/her): We can't hear you Lauren
00:55:17 Alex Capasso: We can't hear you lauren
00:55:42 anne stoltenberg: Looks like he didn't smoke but ETOH use is elevated
00:55:42 Lauren Gima (she/her): so weird! now that I get my screens working, the audio isn't working
00:55:46 COH - Suzie Shehayeb (she/her): I think there were adenomas and serrated Kim
00:55:55 Andrea Gegg: my audio is not working either
00:56:21 Andrea Gegg: I've left and come back and it still not working
00:56:31 Lauren Gima (she/her): I'm going back to the path report now
00:57:03 Lauren Gima (she/her): sorry going to reshare again
00:57:37 COH - Suzie Shehayeb (she/her): Lauren let us know if it be helpful for one of us to take over if you want to troubleshoot!
00:57:55 Andrea Gegg: correct, I can see the screen but cannot hear. my mics are on.
00:58:25 Lauren Gima (she/her): Can we see the screen with the path report?
00:58:35 Bita Nehoray (she/her): yes
00:59:00 Susi Gordon, MD: Re your question re XRT and polyposis: EVERY effort would have been made to limit dose to the small and large bowel. For unfavourable Int grade prostate CA, there would have been very limited bowel irradiated as only the prostate would have received tx. Limited large and small bowel for seminoma xrt. Dose is VERY low in seminoma. Dose constraints MUST be met before ANY xrt is delivered. You can determine the dose to small and large bowel by obtaining the tx plan from the treating rad onc.
01:00:36 Susi Gordon, MD: You are welcome, Dr. Blazer.
01:01:09 Lauren Gima (she/her): it was working a min ago! darn
01:01:36 Martha Acevedo: call in lauren

01:02:54 Anna Newlin, MS, CGC: I would encourage half sibs to test to hopefully get her to true negative

01:03:01 Christine Strub: I would calculate risk with the can isk tool

01:03:08 Heather Hampel (she,her): Maggie - maybe email Ian Tomlinson about your GREM1 case:
iant@wlel.ox.ac.uk

01:03:13 Mary McCarthy: that's what I would also recommend

01:03:34 564720 Sharlow: this in Andrea Gegg, i had to log into a diff computer. It is working now.

01:04:04 Heather Hampel (she,her): Typo: iant@well.ox.ac.uk

01:04:14 Karen Spielbusch: Annual MRI until age 30 when she could have mammogram possibly every other year.

01:04:28 COH - Suzie Shehayeb (she/her): You can also recalculate her risk once she gets older to see if it's still over 20%

01:04:46 Laura Clark: Environmental exposures?

01:05:12 Dara McKinley FNP-C AGN-BC: do the can risk if you find something

01:05:46 Dara McKinley FNP-C AGN-BC: NVM I missed that

01:07:09 Susan Jones: or the uncle....

01:07:11 Christine Strub: i would start mammograms dependent on acr. If ist is still acr d at 30, I would not start mamograms

01:07:27 Susan Jones: if you found BRCA2 in the uncle....

01:08:18 Mary Berry: Sometimes at young age, we will alternate breast MRI with bilateral complete breast US, until we start the mammograms

01:09:10 Dara McKinley FNP-C AGN-BC: She might have dense tissue though

01:09:37 Christine Strub: maybe the risk is only 0% because the acr is not included at her age in the IBIS tool.

01:09:38 Lauren Gima (she/her): maybe PRS will also be helpful by then!

01:09:43 Lauren Gima (she/her): (fingers crossed)

01:09:53 Michelle Weaver Knowles: I'm with you Lauren!

01:11:06 Susan Jones: I thought we didn't do mammograms in a woman's 20s bc they weren't very useful. Is that correct or is it more the concern of radiation exposure? or both?

01:11:29 Bitá Nehoray (she/her): both

01:11:36 COH - Suzie Shehayeb (she/her): You're doing great despite all the technical issues, Lauren. Cool under pressure as always!

01:11:37 Susan Jones: Thanks!

01:11:38 Karen Spielbusch: Breast are dense and hard to read

01:12:17 Vicky Gaddis: In these type of situations, do we take a patient's word for their family history or do we get concrete medical records?

01:12:38 Michelle Weaver Knowles: is there a code for today?

01:12:47 Clinical Cancer Genetics: CME code for today's session: ZUYCAH

01:14:00 Michelle Weaver Knowles: I'm excited for Katherine's upcoming Topics presentation about variants!

01:14:40 COH - Gloria Nunez: reminder: everyone must be logged in with Full Name (First and Last Name). To rename yourself over the ellipses and select Rename.

01:16:57 Constance Murphy: canrisk model- is there a way to move forward without inputting the year of birth?

01:17:10 Susi Gordon, MD: @Vicky: when possible, I always try to obtain medical records. It adds so much more to the total picture in terms of patient management and testing.

01:17:15 Bitá Nehoray (she/her): no, you need to estimate YOB

01:20:03 Bitá Nehoray (she/her): Can paternal GF get tested with variant tracking?

01:20:51 Kathleen Mott: anything in ClinVar? I often ck with ;yriad

01:21:19 Wai Park: good point

01:21:33 Wai Park: I meant GREAT point :P

01:22:41 rhodorakhan: No info about childbirth?

01:23:08 Vicky Gaddis: Would it change with zero children

01:23:28 Lauren Gima (she/her): @Rhodara you could also input nulliparous instead of leaving it as unknown, but i'm not sure how much that would affect the risk projection

01:23:47 Lauren Gima (she/her): always worth it to play around with those factors

01:24:07 rhodorakhan: Ok. Thanks!
01:24:10 Tom Lin, MD: Also consult her with preventive measures (like weight loss, dietary issue, exercise...)
01:24:15 Bita Nehoray (she/her): he's more informative anyway
01:24:24 Bita Nehoray (she/her): for her and her sister
01:24:31 Lauren Gima (she/her): Agree, Bita!
01:25:54 Michelle Weaver Knowles: Katherine Can you post the link here?
01:26:34 Lauren Gima (she/her): *the presentation is on Friday for clarification
01:26:47 Lauren Gima (she/her): 12-1pm PST
01:26:56 Dara McKinley FNP-C AGN-BC: please record!!
01:27:19 Lauren Gima (she/her): the presentation will be recorded and posted on the portal under Topics archives
01:28:19 Jen Diaz: What's the name of the group in the UK
01:30:01 Tom Lin, MD: Sorry, we mentioned about "Kane Score"? what is score and what the name of the score exactly?
01:30:14 Erica Kessler: Does anyone know if our weekly sessions count towards the NCBC's CE requirement for CGRA certification?
01:30:22 Bita Nehoray (she/her): @Tom, I think you mean CanRisk score?
01:30:30 Susan Jones: Tom, CanRisk
01:30:31 catherine marcum: They do
01:30:33 Kim Burns: Yes! Thanks everyone!
01:30:35 Clinical Cancer Genetics: CME code for today's session: ZUYCAH
01:30:42 Erica Kessler: Thanks, Catherine!
01:30:45 Wai Park: <https://canrisk.org/>
01:30:58 Wai Park: link to canrisk. one needs to sign up to use the model
01:31:07 COH - Suzie Shehayeb (she/her): I believe we have a topics 11/11
01:31:14 Susan Jones: can't wait for the Topics talk!
01:31:16 COH - Suzie Shehayeb (she/her): as well as this weeks
01:31:17 Lauren Gima (she/her): Canrisk is one of the online risk model tools that we'll be discussing more soon!
01:31:18 Masha Thomas: thank you
01:31:39 Susan Jones: Thank you - love this group!
01:31:51 COH - Suzie Shehayeb (she/her): thanks!