

This recording is provided for review purposes only and viewing *does not* substitute attendance.

Due to HIPAA, please **DO NOT** attempt to distribute this document or the corresponding recording.

| 00:15:16 | Stefanie Yoon: Can someone tell me the code again, I didn't catch it in time. |
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| 00:16:13 | Mary McCarthy: I didn't either |
| 00:16:34 | catherine marcum: CUHWAP |
| 00:16:51 | Stefanie Yoon: thanks! |
| 00:17:56 | Clinical Cancer Genetics: CME attendance code: CUHWAP |
| | Reminder for IC Participants: Do not text in the code, your CME credits will be packaged with the |
| | Intensive Course |
| 00:19:10 | Carrie Thompson: Hi! |
| 00:19:35 | Clinical Cancer Genetics: CME attendance code: CUHWAP |
| | Reminder for IC Participants: Do not text in the code, your CME credits will be packaged with the Intensive Course |
| 00:19:52 | Carrie Thompson: Could you please post the refresher course URL for registration. I have not been |
| | able to find it. |
| 00:20:02 | Clinical Cancer Genetics: If you do not have a City of Hope CME account, please create an |
| | account at: https://cme.cityofhope.org/content/new-user |
| 00:20:18 | Clinical Cancer Genetics: text attendance code to: 626-314-7448 |
| 00:21:43 | Michelle Weaver Knowles: Welcome new class members! This is such an amazing supportive |
| | group! My recommendation is to ask questions and present cases! |
| 00:22:37 | COH - Kathleen Blazer: Good suggestions, Michelle! |
| 00:25:02 | COH - Suzie Shehayeb (she/her): Welcome all! We are excited to have you all with us! We learn |
| 00.25.00 | so much from your cases so please present when you have them |
| 00:26:00 | COH - Gloria Nunez: Reminder: Please log in with full name, in order to receive proper CME credit |
| 00:27:41 | Susi Gordon, MD: May we have the CME code for today, please? Thank you. |
| 00:28:42 | Clinical Cancer Genetics: CME attendance code: CUHWAP |
| 00:29:20 | Susi Gordon, MD: Thank you! |
| 00:31:44 | Janaina Batista: could you send me the email to send the code: outsite USA please |
| 00:32:42 | COH - Gloria Nunez: IC 2023 Students DO NOT need to submit code- the Course ALREADY has |
| 00.22.51 | these units built-in |
| 00:32:51 | Clinical Cancer Genetics: International attendees outside of the U.S. may email the attendance code |
| 00:35:57 | to cme@coh.org |
| 00:35:37 | Susi Gordon, MD: VERY much appreciate you being here today, Dr. Baregamian! Kind regards, |
| 00:38:01 | Susi Gordon, MD Rosana Villanassi: Could you please cheek and enable the captions? |
| 00:38:01 | Rosana Villanassi: Could you please cheek and enable the captions? Martha Acevedo: Martha Acevedo checking in |
| 00:39:02 | Clinical Cancer Genetics: We apologize we are unable to enable captions for this session, we will |
| 00.39.08 | make sure to have it for future sessions |
| 00:42:44 | Susi Gordon, MD: Thank you, Dr. Marcum for presenting this complex and most interesting case. |
| 00.42.44 | So much to learn from this case. Kind regards, Susi Gordon, MD |
| 00:43:32 | Gregory Idos(he/him): Wonderful job by Drs. Marcum and Baregamian. Likely saved some lives in this |
| 00.43.34 | family. Did anyone have a pheochromocytoma? |
| | ranny. Die anyone nave a pheochioniocytoma: |

| 00:46:05 Naira Baregamian: Thank you, again! 00:40:11 Dara McKinley FNP-C AGN-BC: Dr. Marcum-I am so impressed with this case and your work! Thank you for the case :) O0:49:11 Nateral is an established CLIA lab, just historically more in the prenatal testing space (newer to hereditary cancer testing) O0:51:20 City of Hope - PopSci Conference Room: Natera is an established CLIA lab, just historically more in the prenatal testing space (newer to hereditary cancer testing) O0:51:57 COI- Gloria Nunez: CME attendance code: CUHWAP COI- Sidents DO NOT need to submit code- the Course ALREADY has these units built-in International attendess outside of the U.S. may email the attendance code to cme@coh.org Diane Stoller: DCIS is almost always er pos O0:53:05 O1:53:05 Christina Rybak: Natera's hereditary cancer testing is sent out to Baylor so all testing and interpretation is performed by Baylor FYI. Robbin Palmer: Can you please address Natera's provding allele freq whereas other labs r Christina Rybak: Natera's hereditary cancer testing is sent out to Baylor so all testing and interpretation is performed by Baylor FYI. Robbin Palmer: Can you please address Natera's provding allele freq whereas other labs r Christina Rybak: Thave no insight into allele frequency. City of Hope - PopSci Conference Room: Thanks for the insight, Christina! O0:54:29 O1:54:29 O1:54:39 O2:54:39 O2:54:40 O3:54:50 O3:54:54 O3:54:60 O3:54:79 O3: | | |
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| 01:13:22 | Anna Newlin, MS, CGC: Would you be more inclined to offer option of RRM if PV is confirmed |
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| 04.40.04 | to be paternal in origin? |
| 01:13:36 | catherine marcum: No |
| 01:13:55 | City of Hope - PopSci Conference Room: Neither would I |
| 01:13:59 | catherine marcum: Prostate is all late in life |
| 01:14:13 | Steve Gruber: Polygenic risk scores are derived from both mother and father |
| 01:14:24 | catherine marcum: Sorry - looking at mom's side but still no |
| 01:14:58 | Dara McKinley FNP-C AGN-BC: Are there restrictions for ethnic background? |
| 01:15:01 | COH - Suzie Shehayeb (she/her): I think you can only include SNPs in CanRIsk if you have the |
| | SNP level file/data. I don't think there is a way to do it for these sort of PRS scores from labs. At least last |
| | time I checked |
| 01:15:08 | Steve Gruber: I think it's important to have a discussion with patient about shared decision making with |
| | risks, benefits and alternatives to management options, including RRM |
| 01:15:44 | COH - Suzie Shehayeb (she/her): For CHEK2 with PRS, I believe there still are ancestry-based |
| | restrictions |
| 01:16:41 | City of Hope - PopSci Conference Room: Myriad's non-CHEK2 PRS is reportedly validated for all |
| | ancestries, which is perhaps what you were thinking of Dara |
| 01:16:54 | Dara McKinley FNP-C AGN-BC: yes thank you |
| 01:17:10 | Michelle Weaver Knowles: TJ How do you explain this to a patient? |
| 01:17:55 | Thomas Slavin: https://pubmed.ncbi.nlm.nih.gov/34322652/ |
| 01:18:49 | Thomas Slavin: I would explain it as background genetic factors that can be used as another tool to help refine risk |
| 01:19:03 | catherine marcum: Thanks all - great cases! See you soon |
| 01:20:48 | City of Hope - PopSci Conference Room: ^and a tool that we're still actively learning more |
| 01.20.10 | about/likely to know more in the future. expert consensus guidelines are determining how to incorporate |
| | this into care |
| 01:22:17 | Michelle Weaver Knowles: Jenny could you share the article you mentioned in the CCGCOP portal? |
| 01:22:32 | Jennifer Castle: https://clinicaltrials.gov/ct2/show/NCT04474834?cond=genre+2&draw=2&rank=1 |
| 01:23:01 | Michelle Weaver Knowles: Thanks Jenny! |
| 01:23:10 | Clinical Cancer Genetics: CME attendance code: CUHWAP |
| 01:23:17 | Steve Gruber: Polygenic risk scores are here to stay. They add value. |
| 01:23:23 | Thomas Slavin: Good case! |
| 01:23:49 | Rosana Villanassi: The patient 43 years old have findings in breast imaging? Maybe MRI breast |
| 01.201.5 | anual can help to do screening without aggressive surgery to remove the breasts (if the breast is BI- |
| | RADS1) |
| 01:23:49 | Michelle Weaver Knowles: I agree with you Dr Gruber and am excited to be able to risk quality |
| | patient's in that way! |
| 01:23:54 | Dara McKinley FNP-C AGN-BC: Agreed! |
| 01:24:24 | Jennifer Castle: Thank you everyone for the feedback! |
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