

IACC 2023 Case-based discussion (CBD) scenario

| Specialty: | Cancer Genomics | |
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CBD Scenario

| CBD Scenario Title | Cancer Genomic testing for patients with melanoma | | | | | | | |
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| CBD Scenario Aim | To demonstrate an understanding of standard of care (SoC) testing for patients with melanoma, including a brief overview of laboratory methodologies and a demonstration of how the results of genomic testing impact patient diagnosis and treatment. | | | | | | | |
| CBD Focus | SLS428 | | | | | | | |
| (please provide the codes of the module(s) this scenario addresses) | | | | | | | | |
| GSP Domains covered | GSP 1 | GSP 2 | X | GSP 3 | X | GSP 4 | GSP 5 | |
| (enter X to indicate all that apply) | | | | | | | | |
| CBD Scenario description | A 38-year-old Caucasian female with a history of extensive 'tanning bed' use has a longstanding mole on the right shin. | | | | | | | |
| | A biopsy of the lesion and subsequent histology confirmed a diagnosis of a non-ulcerated superficial spreading melanoma [Breslow thickness 1.8mm (pT2a). | | | | | | | |
| | Histopathology on a subsequent sentinel lymph node biopsy confirms metastatic melanoma. Molecular genetic analysis was requested. 1. Please describe the procedures that are followed to process a formalin fixed paraffin embedded (FFPE) tissue section from receipt in specimen reception to data analysis. | | | | | | | |
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| | | | | | | gy for a samp e(s) would ye | ble referred with bu analyse? | а |
| | Analysis of an NGS DNA panel detected a BRAF variant; c.1799T>A p.(Val600Glu) [V600E]. No additional variants were detected in either the DNA or RNA panels. | | | | | e | | |
| | A) W | hat are the | clinical | implicat | tions f | for the patien | ıt? | |

| | B) What information would you include in the final report? |
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| | |
| CBD Scenario model answer/ | Histopathology on a subsequent sentinel lymph node biopsy confirms metastatic melanoma. |
| assessor guidance | Molecular genetic analysis was requested. |
| Detailed guidance that will be available for the assessors. Include guidance on what kinds of behaviours, actions, | 1.Please describe the procedures that are followed to process a formalin fixed paraffin embedded (FFPE) tissue section from receipt in specimen reception to data analysis. |
| comments should | Booking in process |
| secure a pass. What should the assessor expect to see? | Extraction process – DNA (and RNA) from paraffin embedded tissues |
| Assessors will be asked to plan questions in advance including links to trainee's IACC submission. | Sequencing methodology – Sanger sequencing (if rapid result is required), large panels vs targeted panels |
| | Bioinformatics pipeline and data storage |
| | Variant interpretation – variant interpretation software and/or manual analysis |
| | 2.Please describe the testing strategy for a sample referred with a diagnosis of melanoma; what gene(s) would you analyse? |
| | BRAF codon 600 targeted analysis may be described |
| | NGS DNA panel testing; BRAF, NRAS, KIT |
| | Structural variants (RNA panel or FISH): NTRK1,2,3 |
| | Copy number analysis by FISH or microarray may be requested for equivocal cases MYB, RREB1, CCND1, MYC, CDKN2A |
| | 3.Analysis of an NGS DNA panel detected a <i>BRAF</i> variant; c.1799T>A p.(Val600Glu) [V600E]. No additional variants were detected in either the DNA or RNA panels. |
| | A) What are the clinical implications for the patient? |
| | B) What information would you include in the final report? |
| | Recognize that this is a common BRAF variant in melanoma |
| | Interpret that the patient is likely to respond to BRAF/ MEK - targeted therapy. |
| | KIT: No actionable variants detected |
| | NRAS: No actionable variants detected |
| | NTRK1, 2, and 3: No actionable variants |
| | Class 1 BRAF variant – describe guidelines used (AMP, etc.) |
| Trainee instructions | Please give this information before the first question: |
| Please include any specific information to be provided to the trainee as part of the CBD scenario | |

Criteria being assessed by this CBD scenario

Aspect

| | is being assessed |
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| Understands the clinical context of the scenario, including priority setting and testing strategies | Х |
| 2. Understands scientific principles of scenario | Х |
| Can discuss the relevant procedures involved in the scenario and associated health and safety issues | X |
| Understands and applies the appropriate test validation, IQC, EQA, relevant professional/clinical guidelines | |
| Understands and applies associated IT/bioinformatics and other appropriate resources | |
| Is able to interpret and report patient results and provide appropriate clinical advice | e X |
| Can discuss the significance of patient results within the clinical context of the referral | Х |
| 8. Understands the ethical, legal and social implications of the scenario | 2 |
| 9. Is aware of the importance of audit and can use this tool effectively | |
| 10. Output meets accepted laboratory/professional standards | |
| 11. Demonstrates awareness of the limits of responsibility and when to seek advice | |
| 12. Consideration of patient/professionalism | |
| 13. Overall ability to perform | |