V1.0		HCMI	
, 	Enrollment: Mesothelioma		
Tissue Source Site (TSS) Name:	HCMI Identifier (ID3):		
Completed By:	Completion Date (MM/DD/YYYY):		

Form Notes: An Enrollment Form should be completed for each HCMI case upon qualification notice from Leidos. All information provided on this form should include activity from the Date of Initial Pathologic Diagnosis to the most recent Date of Last Contact with the platient.

Question	Question Text	Data Entry Options	CDE ID	Instruction Text
1	ID2		2003301	Provide the patient's ID2 (this ID will
				only be used by IMS for internal
				quality control).
2	ID3		5845012	Provide the HCMI-specific
				anonymized ID (ID3).
3	Index date		6154722	Select the reference date used to
				calculate time intervals (e.g. days to
		The second control of		treatment). Date of initial pathologic
		☐ Initial pathologic diagnosis☐ Sample procurement		diagnosis is the HCMI standard and
		☐ First patient visit		should be used unless it is
		- Thist patient visit		unavailable. If an alternative index
				date is used, indicate it here and use
				it for all interval calculations.
Patient Inf	ormation			
4	Gender		2200604	Provide the patient's gender using
		☐ Male		the defined categories. Identification
		Female		of gender is based upon self-report
		☐ Unspecified		and may come from a form,
				questionnaire, interview, etc.
5	Height		649	Provide the patient's height, in
			-	centimeters.
6	Weight		651	Provide the patient's weight, in
				kilograms.
7	Body mass index (BMI)		2006410	If the patient's height and weight are
				not collected, provide the patient's
			2402400	body mass index (BMI).
8	Race		2192199	Provide the patient's race using the
				defined categories. American Indian or Alaska Native: A person
				having origins in any of the original peoples
				of North and South America (including
				Central America), and who maintains tribal
		☐ American Indian or Alaska Native		affiliation or community attachment. Asian: A person having origins in any of the
		☐ Asian		peoples of the Far East, Southeast Asia, or in
		☐ Black or African American		the Indian subcontinent including, for
		☐ Native Hawaiian or other Pacific Islander		example, Cambodia, China, India, Japan,
		☐ White		Korea, Malaysia, Pakistan, the Philippine Islands, Thailand, and Vietnam.
		□ Unknown		Black or African American: A person having
		□ Not reported		origins in any of the black racial groups of
		not reported		Africa.
				Native Hawaiian or other Pacific Islander: A person having origins on any of the original
				peoples of Hawaii, Guam, Samoa, or other
				Pacific Island.
				White: A person having origins in any of the
				original peoples of Europe, the Middle East, or North Africa.
9	Ethnicity		2192217	Provide the patient's ethnicity using
				the defined categories.
		_		Hispanic or Latino: A person of Mexican,
		Hispanic or Latino	1	Puerto Rican, Cuban, Central or South
		☐ Not Hispanic or Latino		American or other Spanish culture or
		☐ Unknown	1	origin, regardless of race.
		☐ Not reported		Not Hispanic or Latino: A person not meeting the definition of Hispanic or
				Latino.
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V1.0		
Tissue Source Site (TSS) Name:	Enrollment: Mesothelioma HCMI Identifier (ID3):	
Completed By:	Completion Date (MM/DD/YYYY):	

Question	Question Text	Data Entry Options	CDE ID	Instruction Text
10	Number of days from		3008273	Provide the number of days from the
	index date to date of last			index date to the date of last
	contact			contact.
11	Patient age on index date		6379572	Provide the age (in days) of the
				patient on the index date. Note: If the patient's age is greater than 32,872 days
				(90 years), please enter 32,872.
12	Year of birth		2896954	Provide the year of the patient's
12	icai oi biitii		2030334	birth. If the patient was born prior to
				1928, insert the date 1928.
13	Family history of cancer	□ Same	5832923	Has a first-degree relative of the
		☐ Different		patient been diagnosed with a
		□ None		cancer of the same or a different
		□ Unknown		type?
14	Smoking history	☐ Lifelong non-smoker (<100 cigarettes smoked	2181650	Indicate the patient's history of
		in a lifetime) Current smoker (includes daily and non-daily		tobacco smoking as well as their
		smokers)		current smoking status using the defined categories.
		☐ Current reformed smoker (duration not		defined edtegories.
		specified)		
		☐ Current reformed smoker for >15 years		
		☐ Current reformed smoker for ≤15 years		
15	Number of pack years		2955385	Indicate the number of pack years
	smoked			the patient smoked. Note: Numeric computed value to represent lifetime
				tobacco exposure defined as number of
				cigarettes smoked per day x number of
				years smoked divided by 20.
16	Tobacco smoking quit		2228610	Provide the year the patient quit
17	year Family history of		7614374	smoking tobacco.
17	mesothelioma		7014374	Indicate whether the patient has a family history of mesothelioma.
18	Asbestos exposure?		1253	Indicate whether the patient has a
	•	☐ Yes		known past exposure to asbestos.
		□ No		Note: If asbestos exposure is yes,
		☐ Unknown		proceed to Question 19, otherwise, skip to Question 21.
19	Age at first asbestos		3629991	Provide the age in whole years at
23	exposure		0023331	which the patient was first exposed
	•			to asbestos.
20	Number of years of		3629992	Provide the length of time in whole
	asbestos exposure			years that the patient was exposed
				to asbestos.
21	Metastasis at diagnosis		3438571	Indicate whether there was evidence
	assessment status	☐ Metastatic		of metastasis at the time of diagnosis of the primary tumor. Note:
		□ Non-metastatic (confirmed)		If metastatic at diagnosis, proceed to
		☐ Non-metastatic (unconfirmed)		Question 22, otherwise, skip to Question
				23.
22	Metastatic site(s) at	☐ Contralateral	3029815	Indicate the site(s) of metastasis at
	diagnosis	pleura		the time of diagnosis of the primary
		Lung Liver		tumor. Note: If the anatomic site of tumor tissue is not listed, proceed to
		□ Axillary lymph □ Kidney		Question 22a, otherwise, skip to
		node(s)		Question 23.
		☐ Cervical lymph ☐ Spleen ☐ Pericardium		
		node(s)		
		Li Stomach		
		☐ Large intestine	<u> </u>	

Completed By:___

Tissue Source Site (TSS) Name: ___

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HCMI Identifier (ID3):				
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Question	Question Text	Data Entry Options	CDE ID	Instruction Text			
22a	Specify metastatic site(s)		3128033	If the site of metastasis is not			
				included on the provided list, specify			
				the site of metastasis.			
Biospecimen Information							
23	Tissue sample type(s)	☐ Normal tissue	2006911	Please select all the tissue sample			
	collected for HCMI for	☐ Primary tumor		types submitted for HCMI with this			
	this case	☐ Metastatic		case.			
		☐ Recurrent					
		☐ Other tissue					
24	Number of NORMAL		6584256	Please provide the number of			
	tissues biospecimens			normal tissue specimens obtained			
	collected for HCMI for			for HCMI for this case. Note: This			
	this case			number is expected to be 1.			
25	Number of PRIMARY		6584257	Please provide the number of			
	cancer tissue			primary tumor specimens obtained			
	biospecimens collected			for HCMI for this case. Note: A single			
	for HCMI model			primary tumor biospecimen obtained that			
	development for this			is portioned for both sequencing and model			
	case			generation counts as 1 single primary tumor specimen. This number is expected			
				to be 1.			
26	Number of		6584258	Please provide the number of			
	METASTATIC/RECURRENT			metastatic and/or recurrent cancer			
	cancer tissue			biospecimens collected for HCMI for			
	biospecimens collected			this case. Note: A biospecimen obtained			
	for HCMI model			from a single site at a single timepoint in			
	development for this			progression that is portioned for both			
	case			sequencing and model generation counts			
				as 1 single tumor specimen. A biospecimen obtained from another site or at a later			
				timepoint in progression that is portioned			
				for both sequencing and model generation			
				counts as a second single tumor specimen.			
27	Number of OTHER tissue		6584259	Please provide the number of pre-			
	biospecimens collected			malignant, non-malignant, or			
	for HCMI model			dysplastic tissue biospecimens			
	development for this			collected for HCMI for this case. <i>Note:</i>			
	case			A biospecimen obtained from a single site			
				at a single timepoint in progression that is portioned for both sequencing and model			
				generation counts as 1 single tumor			
				specimen. A biospecimen obtained from			
				another site or at a later timepoint in			
				progression that is portioned for both			
				sequencing and model generation counts as a second single tumor specimen.			
28	Total number of tissue		6584271	Please provide the total number of			
	biospecimens collected		555 1271	tissue biospecimens collected for			
	for HCMI for this case			HCMI for this case. Note: This number			
1				should be the sum of the normal, primary			
				tumor, metastatic/ recurrent tumor, and			
				other biospecimen counts above.			
	ntrol Information		1				
29	Normal tissue		6584264	Please provide a number to identify			
	biospecimen ordinal			which biospecimen this is in the			
				sequence. Note: The first biospecimen			
				should be number "1," the second should			
	01100 1 17		6506665	be number "2," etc.			
30	CMDC sample ID		6586035	Please provide the CMDC sample ID			
				for this biospecimen as it will appear			
				on tubes and the Sample Submission			
			<u> </u>	Form transmitted to the BPC.			
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llment: Mesothelioma	Total A	20		1
HCMI Identifier (ID3):		5-66		
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Tissue Source Site (TSS) Name:	HCMI Identifier (ID3):
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Question	Question Text	Data Entry Options	CDE ID	Instruction Text
31	BPC submitter ID (if		6584919	Please provide the BPC-generated ID
	available)			for this sample as it will appear on
				the Sample Submission Form
				transmitted to the BPC.
32	Type of normal control	☐ Whole blood	3081936	Indicate the type of normal control
		☐ Buccal cells		submitted for this case.
		☐ Buffy coat		
		☐ Lymphocytes		
		Extracted DNA from blood		
		☐ Extracted DNA from saliva		
		Extracted DNA from buccal cells		
		Extracted DNA from normal tissue		
		FFPE non-neoplastic tissue		
33	Other anatomic site of	☐ Non-neoplastic tissue	3288189	If non noonlastic tissue, adjacent
33	normal tissue		3200109	If non-neoplastic tissue, adjacent tissue, or normal tissue from another
	Hormai tissue			anatomic site was submitted as the
				normal control, provide the anatomic
				site of the normal tissue.
34	Distance from tumor to	☐ Adjacent (< or = 2cm)	3088708	Indicate the distance from the site of
	normal control tissue (if	☐ Distal (>2cm)		normal tumor collection to the
	not blood)	□ Unknown		primary tumor. Note: If normal tissue
	,	☐ Not applicable		was not submitted, select 'Not
		• • • • • • • • • • • • • • • • • • • •		applicable'.
35	Normal tissue sample	☐ Cryopreserved	5432521	Provide the method used to
	preservation method	□ FFPE		preserve the normal tissue sample
		Frozen		collected for molecular
		ОСТ		characterization.
<u> </u>		☐ Snap frozen		
	mor Biospecimen Informati		2226207	Don't do the ICD 40 and a facility
36	ICD-10 code for primary	□ C45.0	3226287	Provide the ICD-10 code for the
	tumor	☐ C45.1 ☐ C45.2		primary tumor as used to generate
		□ C45.2		the ID3 for this subject. Note: If the ICD-10 code is not listed, proceed to 36a,
		□ C45.9		otherwise, skip to Question 37.
		☐ Other (specify)		
36a	Other ICD-10 code for		3226287	If the ICD-10 code for the tumor
	primary tumor			used to generate the model
				submitted to HCMI is not included
				on the provided list, specify the ICD-
				10 code.
37	Tumor morphology		3226275	Using the patient's
		□ 9050/3		pathology/laboratory report, provide
		□ 9051/3		the ICD-O-3 histology code of the
		□ 9052/3 □ 9052/2		primary tumor. Note: If the ICD-O-3
		□ 9053/3		histology code of the primary tumor is
		☐ Other (specify)		not listed, proceed to Question 37a, otherwise, skip to Question 38.
37a	Specify other		3226275	If the ICD-O-3 histology code
1	morphology			describing the morphology of the
	10/			patient's primary tumor is not
				included on the previous list, provide
				the ICD-O-3 histology code.
38	Tissue or organ of origin		3427536	Using the patient's
				pathology/laboratory report, select
		☐ Mesothelium		the primary site of the disease. Note:
		☐ Other (specify)		If the primary site of the disease is not
				listed, proceed to Question 38a,
				otherwise skip to Question 39.

	Enrollment: Mesothelioma	A	20	
Tissue Source Site (TSS) Name:	HCMI Identifier (ID3):	X634	44	T
Completed By:	Completion Date (MM/DD/YYYY):	160	D 3	

Question	Question Text	Data Entry Options	CDE ID	Instruction Text
38a	Other tissue or organ of		5946219	If the primary site of the disease is
	origin			not included on the previous list,
				provide the primary site of the disease.
39	Anatomic site of the	☐ Right pleura ☐ Peritoneum	6161035	Indicate the anatomic site of the
	primary tumor	☐ Left pleura ☐ Diaphragm		primary tumor. Note: If the anatomic
		☐ Bilateral pleura ☐ Chest wall		site of the primary tumor is not listed,
		☐ Visceral pleura ☐ Not specified		proceed to Question 39a, otherwise skip to Question 40.
20-	Otherwalender	☐ Parietal pleura ☐ Other (specify)	6504260	·
39a	Other anatomic site		6584268	If not provided in the previous list, provide the anatomic site of the
				primary tumor.
40	Laterality	☐ Right ☐ Not acceived	2007875	Indicate the laterality of the
	,	□ Not specified		anatomic site of the primary tumor.
		☐ Bilateral ☐ Not a paired site		
41	Histological type		3081932	Select the surgical pathology text
		☐ Mesothelioma		description of the histological tumor
		☐ Other (specify)		type. Note: If the histological tumor type is not listed, proceed to Question
				41a, otherwise, skip to Question 42.
41a	Other histological type		3294805	If the traditional surgical pathology
				text description of the histological
				tumor type is not included on the
				previous list, please specify the
42	Histological subtype		3081934	histological type. Using the patient's
'-	Thistorogreat subtype	☐ Epithelioid mesothelioma	3001331	pathology/laboratory report, select
		☐ Sarcomatoid mesothelioma☐ Biphasic mesothelioma		the histological subtype of the
		☐ Desmoplastic mesothelioma		primary tumor. Note: If the histological
		☐ Mesothelioma (NOS)		subtype is not listed, proceed to
		☐ Other (specify)		Question 42a, otherwise, skip to Question 43.
42a	Other histological		3124492	If the histological subtype for the
	subtype			primary tumor is not included in the
				provided list, specify the histological
42	Dui an malianan an Iafaha	П Уст	5022024	subtype.
43	Prior malignancy (of the same cancer type)	☐ Yes ☐ No	5832924	Indicate whether the patient has a history of prior malignancy of the
	same cancer type;	☐ Unknown		same cancer type.
44	Prior malignancy (other	□ Yes	5878828	
	cancer type)	□ No		history of prior malignancy of a
		☐ Unknown		different cancer type.
45	AJCC cancer staging	□ 1 st □ 4 th □ 7 th	2722309	Select the AJCC staging handbook
	edition	□ 2 nd □ 5 th □ 8 th □ 8 th		edition used to stage the patient's
46	AJCC clinical stage group	☐ Stage IA	3440332	primary tumor. Using the patient's
70	7000 cirrical stage group	☐ Stage IB	3440332	pathology/laboratory report, select
		☐ Stage II		the clinical stage group of the
		☐ Stage IIIA		primary tumor as defined by the
		☐ Stage IIIB		American Joint Committee on
47	AICC mathering	☐ Stage IV	2045425	Cancer (AJCC), if applicable.
47	AJCC pathologic spread: Primary tumor (pT)	□ т0 □ т1	3045435	Using the patient's pathology/laboratory report, select
	Timary turnor (pr)	☐ T1a		the code for the pathologic T
		□ T1b		(primary tumor) as defined by the
		□ T2		American Joint Committee on
		□ тз		Cancer (AJCC).
		□ T4		
		□ тх		

Tissue Source Site (TSS) Name: ______Completed By: _____

Enrollment: iviesotnelloma	A POL
HCMI Identifier (ID3):	6
Completion Date (MM/DD/YYYY):	

Question	Question Text	☐ Data Entry Options	CDE ID	Instruction Text
48	AJCC pathologic spread:	□ N0	3203106	Using the patient's
	Lymph nodes (pN)	□ N1		pathology/laboratory report, select
	, , , , , ,	□ N2		the code for the pathologic N (nodal)
		□ N3		as defined by the American Joint
		□ NX		Committee on Cancer (AJCC).
49	AJCC pathologic spread:		3045439	Using the patient's
	Distant metastases (pM)	□ M0		pathology/laboratory report, select
				the code for the pathologic M
		□ M1		(metastasis) as defined by the
		□ MX		American Joint Committee on
				Cancer (AJCC).
50	Tumor stage	☐ Stage IA	3065862	Using the patient's
	(pathological)	☐ Stage IB		pathology/laboratory report, in
		☐ Stage II		conjunction with the patient's
		☐ Stage IIIA		medical record, select the stage as
		☐ Stage IIIB		defined by the American Joint
		☐ Stage IV		Committee on Cancer (AJCC).
Prognostic	/Predictive/Lifestyle Feature	es for Primary Tumor Prognosis or Responsiveness to	Treatment	(
51	Number of positive		89	Provide the number of lymph nodes
	lymph nodes			with disease involvement.
52	Number of lymph nodes		3	Provide the total number of lymph
	tested			nodes tested for the presence of
				cancer cells.
53	WBC count		58312	Provide the patient's absolute
		x10^3/mcL		peripheral white blood cell count (in
				x10^3/mcL).
54	Platelet count		58312	Provide the patient's absolute
٠.		1000/mcL	30311	peripheral platelet count (in
		1000/11102		1000/mcL).
55	Hemoglobin		2190	Provide the patient's hemoglobin
33		g/dL	2130	level (in g/dL).
56	Creatinine		2655822	Provide the amount of creatinine in
	0.00	mg/dL	2000022	the patient's blood, measured in
		6/ 4-2		milligrams per deciliter (mg/dL).
57	Serum mesothelin prior		7604209	Provide the numerical result of
37	to treatment		7004203	serum mesothelin test prior to
	to treatment			treatment.
58	Was other serum and/or		7595973	Indicate whether or not other serum
30	effusion marker testing		733373	and/or effusion marker testing was
	performed?	☐ Yes		performed. Note: If other serum and/or
	performed	□ No		effusion marker testing was performed,
		☐ Unknown		proceed to Question 59, otherwise, skip
				to Question 62.
59	Identify serum and/or		7604488	Provide the name of the effusion
	effusion markers tested			and/or serum tumor marker test
				performed.
60	Serum and/or effusion		7604489	Provide the numeric result of the
00	marker value		, 00 1 103	effusion and/or serum tumor marker
	marker value			test.
61	Serum and/or effusion		7604490	Provide the unit of measure related
01	marker units		7004430	to the effusion and/or serum tumor
	ווומו אכן עווונט			marker test value.
62	Was the process of		7505060	Indicate whether or not the
62	Was the presence of		7595969	
	circulating endothelial	□ Voc		presence of circulating endothelial
	cells (CEC) examined?	☐ Yes		cells was examined. Note: If the
		□ No		presence of circulating endothelial cells
		☐ Unknown		was examined, proceed to Question 63, otherwise, skip to Question 65.
				other wise, skip to question 03.

	Enrollment: Mesothelioma	POLIT	20	
Tissue Source Site (TSS) Name:	HCMI Identifier (ID3):	X03	5	-
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Question	Question Text	Data Entry Options	CDE ID	Instruction Text
63	Circulating endothelial	☐ Present	7604207	Indicate whether or not circulating
	cells	☐ Absent		endothelial cells were present.
64	Number of circulating		7604208	Provide the count of circulating
	endothelial cells			endothelial cells in the patient's
	identified			sample.
65	Blood volume (mL)		3219439	Provide the volume of the blood
				sample used to count circulating
		mL		endothelial cells, in mL.
66	Additional pathologic	☐ None identified	7595953	Select all significant pathologic
	findings	☐ Asbestos bodies		findings present in addition to the
		☐ Pleural plaque		mesothelioma. Note: If inflammation
		☐ Pulmonary interstitial fibrosis		was identified, proceed to Question 66a.
		☐ Inflammation (specify)		If the pathologic finding is not listed,
		☐ Other (specify)		proceed to Question 66b, otherwise, skip to Question 67.
66a	Specify inflammation		7595961	Indicate the predominant cell type
J	type		7333301	or chronicity of inflammation related
	type			to mesothelioma.
66b	Specify other additional		7595957	If not included in the previous list,
000	pathologic findings		733337	indicate the additional pathologic
	pathologic infamgs			findings related to mesothelioma.
67	Is necrosis present?		64740	Indicate whether there is evidence
0,	is neerosis present:	□ No	04740	of localized death of cells associated
		☐ Unknown		with the presence of mesothelioma.
68	Treatment effect	□ No known presurgical therapy	7595947	Indicate the effect of pre-surgical
	ireacinetic chect	☐ Greater than 50% residual viable tumor	7333347	therapy on the mesothelioma.
		Less than 50% residual viable tumor		therapy on the mesothenoma.
		☐ Cannot be determined		
69	Margins	☐ Cannot be assessed	7595944	Indicate the margin involvement by
09	iviai giris	☐ Uninvolved by mesothelioma	7333344	mesothelioma.
		☐ Involved by mesothelioma, specify margin(s)		mesothenoma.
		□ Not applicable		
69a	Specify margins		7595945	Provide the description of the
000	apeen, margine		75555.5	margin involved by mesothelioma.
70	Residual tumor	□ RX	2608702	Indicate the status of the tissue
		□ RO		margin following surgical resection.
		□ R1		
		□ R2		
		☐ Not evaluated		
71	Talc pleurodesis	□ Yes	7595972	Indicate whether talc pleurodesis
		□ No		was performed.
		☐ Unknown		·
72	Tumor Size (for localized		64215	Provide the length of the largest
	tumors only)			dimension/diameter of a tumor,
		cm		regardless of anatomical plane, in
				centimeters.
73	Tumor focality	☐ Unifocal	3174022	Indicate whether the tumor or
		☐ Multifocal		cancer first developed in a single or
		☐ Unknown		multiple locations.
		☐ Cannot be determined		
74	Performance status	☐ 0: Asymptomatic	88	Indicate the ECOG functional
	score: Eastern	☐ 1: Symptomatic, but fully ambulatory		performance status of the
	Cooperative Oncology	☐ 2: Symptomatic, in bed less than 50% of the		patient/participant. <i>Note: If</i>
	Group	day		performance status was determined,
		☐ 3: Symptomatic, in bed more than 50% of the		proceed to Question 75, otherwise, skip
		day, but not bed-ridden		to Question 76.
		☐ 4: Bed-ridden		
		☐ Not evaluated		

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Tissue Source Site (TSS) Name:	HCMI Identifier (ID3):
Completed By:	Completion Date (MM/DD/YYYY):

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Question	Question Text	Data Entry Options	CDE ID	Instruction Text
75	Number of days from		3479270	Provide the number of days from the
	index date to the date			index date to the date that the ECOG
	initial score obtained for			performance status assessment was
	the ECOG performance	days		performed.
	status scale			
76	Was EGP-2 IHC	☐ Yes	7595965	Indicate whether EGP-2 protein
	performed?	□ No		expression by
		☐ Unknown		immunohistochemistry (IHC) analysis
				was performed. Note: If EGP-2 IHC was
				not performed, skip to Question 78.
77	EGP-2 expression by IHC	☐ Positive	7601836	Indicate the status of EGP-2 protein
		☐ Negative		expression as determined by
		☐ Equivocal		immunohistochemistry (IHC).
78	Was TAG-72 IHC	-	7595966	Indicate whether TAG-72 protein
	performed?	Yes		expression by
		□ No		immunohistochemistry (IHC) analysis
		☐ Unknown		was performed. Note: If TAG-72 IHC
79	TAG-72 expression by IHC	☐ Positive	7601837	was not performed, skip to Question 80. Indicate the status of TAG-72 protein
/9	IAG-72 expression by IAC	☐ Negative	7001037	expression as determined by
		☐ Equivocal		immunohistochemistry (IHC).
80	Was PD-L1 IHC	- Equivocal	6078873	Indicate whether PD-L1 protein
	performed?	□ Yes	0070075	expression by
	periorineu:	□ No		immunohistochemistry (IHC) analysis
		☐ Unknown		was performed. Note: If PD-L1 IHC was
				not performed, skip to Question 84.
81	PD-L1 expression by IHC	☐ Positive	4798631	Indicate the status of PD-L1 protein
	,	☐ Negative		expression as determined by
		☐ Equivocal		immunohistochemistry (IHC).
82	Which PD-L1 stain was		7604210	Provide the name of the stain used
	used?			to assess PD-L1 expression by IHC.
83	What is the PD-L1		7604211	Provide the percent of cells positive
	percentage positive cells?	%		for PD-L1 as assessed by IHC.
84	Was calretinin IHC	□ Yes	7595962	Indicate whether calretinin protein
	performed?	□ No		expression by
		☐ Unknown		immunohistochemistry (IHC) analysis
				was performed.
85	Calretinin expression by	☐ Positive	7601833	Indicate the status of calretinin
	IHC	□ Negative		protein expression as determined by
0.0	Man out also wat in E/C IIIC	☐ Equivocal	7614275	immunohistochemistry (IHC).
86	Was cytokeratin 5/6 IHC performed?		7614375	Indicate whether cytokeratin 5/6 protein expression by
	periorilled:	☐ Yes		immunohistochemistry (IHC) analysis
		□ No		was performed. Note: If cytokeratin
		☐ Unknown		5/6 IHC was not performed, skip to
				Question 88.
87	Cytokeratin 5/6	☐ Positive	7614376	Indicate the status of cytokeratin 5/6
	expression by IHC	☐ Negative		protein expression as determined by
	•	☐ Equivocal		immunohistochemistry (IHC).
88	Was WT-1 IHC		6690712	Indicate whether WT-1 protein
	performed?	☐ Yes		expression by
		□ No		immunohistochemistry (IHC) analysis
		☐ Unknown		was performed. Note: If WT-1 IHC was
				not performed, skip to Question 90.
89	WT-1 expression by IHC	☐ Positive	6690723	Indicate the status of WT-1 protein
		☐ Negative		expression as determined by
		☐ Equivocal		immunohistochemistry (IHC).

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Question	Question Text	Data Entry Options	CDE ID	Instruction Text
90	Was D2-40 IHC		7595963	Indicate whether D2-40 protein
	performed?	☐ Yes		expression by
		□ No		immunohistochemistry (IHC) analysis
		☐ Unknown		was performed. Note: If D2-40 IHC was
				not performed, skip to Question 92.
91	D2-40 expression by IHC	☐ Positive	7601834	Indicate the status of D2-40 protein
		☐ Negative		expression as determined by
		☐ Equivocal		immunohistochemistry (IHC).
92	Was BerEP4 IHC	☐ Yes	7595964	Indicate whether BerEP4 protein
	performed?	□ No		expression by
		☐ Unknown		immunohistochemistry (IHC) analysis
				was performed. Note: If BerEP4 IHC
				was not performed, skip to Question 94.
93	BerEP4 expression by IHC	☐ Positive	7601835	Indicate the status of BerEP4 protein
		☐ Negative		expression as determined by
		☐ Equivocal		immunohistochemistry (IHC).
94	Was CEA IHC performed?	☐ Yes	7595967	Indicate whether CEA protein
		□ No		expression by
		☐ Unknown		immunohistochemistry (IHC) analysis
				was performed. Note: If CEA IHC was
0.5	CEA	El posti	7604020	not performed, skip to Question 96.
95	CEA expression by IHC	☐ Positive	7601838	Indicate the status of CEA protein
		☐ Negative		expression as determined by
0.5	W 200 W 6 12	☐ Equivocal	7505060	immunohistochemistry (IHC).
96	Was BG8 IHC performed?	Yes	7595968	Indicate whether BG8 protein
		□ No		expression by
		☐ Unknown		immunohistochemistry (IHC) analysis
				was performed. Note: If BG8 IHC was
07	DC0 average asia a but IIIC	D Desitive	7604020	not performed, skip to Question 98.
97	BG8 expression by IHC	□ Positive	7601839	Indicate the status of BG8 protein
		□ Negative		expression as determined by
00	Man DTEN IIIC	☐ Equivocal	6062445	immunohistochemistry (IHC).
98	Was PTEN IHC performed?	☐ Yes ☐ No	6062415	Indicate whether PTEN protein expression by
	performed?	Unknown		, ,
		LI UNKNOWN		immunohistochemistry (IHC) analysis
				was performed. Note: If PTEN IHC was not performed, skip to Question 100.
99	PTEN expression by IHC	☐ Positive	6063672	Indicate the status of PTEN protein
	THEN EXPICESSION BY ITTE	☐ Negative	0003072	expression as determined by
		☐ Equivocal		immunohistochemistry (IHC).
100	Was aquaporin-1 IHC	☐ Yes	7595970	Indicate whether aquaporin-1
100	performed?	□ No	, 333370	protein expression by
	periorineu:	Unknown		immunohistochemistry (IHC) analysis
		L CIIKIIOWII		was performed. Note: If aquaporin-1
				IHC was not performed, skip to Question
				102.
101	Aquaporin-1 expression	☐ Positive	7601840	Indicate the status of aquaporin-1
	by IHC	□ Negative		protein expression as determined by
	, ·	☐ Equivocal		immunohistochemistry (IHC).
102	Was COX-2 IHC	☐ Yes	7595971	Indicate whether COX-2 protein
]	performed?	□ No		expression by
		☐ Unknown		immunohistochemistry (IHC) analysis
				was performed. <i>Note: If COX-2 IHC was</i>
				not performed, skip to Question 104.
103	COX-2 expression by IHC	☐ Positive	7601841	Indicate the status of COX-2 protein
		□ Negative		expression as determined by
		☐ Equivocal		immunohistochemistry (IHC).
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	Enrollment: Mesothelioma	TO SEE	A CO	100	
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Question	Question Text	Data Entry Options	CDE ID	Instruction Text
Primary Tu	mor Sample Information			
104	Are you submitting a primary tumor tissue sample for this case?	☐ Yes ☐ No		If yes, proceed to question 105. If submitting a metastatic/recurrent tumor biospecimen, proceed to Question 134.
105	Primary tumor biospecimen ordinal		6584265	Please provide a number to identify which biospecimen this is in the sequence. Note: This number should be "1".
106	CMDC sample ID		6586035	Please provide the CMDC sample ID for this biospecimen as it will appear on tubes and the Sample Submission Form transmitted to the BPC.
107	BPC submitter ID (if available)		6584919	Please provide the BPC-generated ID for this sample as it will appear on the Sample Submission Form transmitted to the BPC.
108	Sample represents primary diagnosis?	☐ Yes ☐ No	6584730	Does this primary tumor specimen represent the PRIMARY DIAGNOSIS for this Case ID3? Note: If no, proceed to Question 109, otherwise, skip to Question 110.
109	Specify the ICD-10 code		3226287	Provide the ICD-10 code for the primary tumor used to generate the model submitted to HCMI.
110	Tumor tissue sample preservation method	☐ Cryopreserved ☐ FFPE ☐ Frozen ☐ Snap frozen	5432521	Provide the method used to preserve the tumor tissue sample collected for molecular characterization.
111	Anatomic site from which the primary tumor was obtained	□ Right pleura □ Peritoneum □ Left pleura □ Diaphragm □ Bilateral pleura □ Chest wall □ Visceral pleura □ Not specified □ Parietal pleura □ Other (specify)	4214629	Select the anatomic site of the tumor tissue sample used to generate the model for HCMI. Note: If the tissue or organ not listed, proceed to Question 111a. Otherwise, skip to Question 112.
111a	Other anatomic site from which the primary tumor was obtained		5946219	If not provided in the previous list, provide the anatomic site of the tumor tissue sample used to generate the model for HCMI.
112	Specimen laterality	☐ Right ☐ Not specified ☐ Left ☐ Not a paired site	2007875	Indicate the laterality of the anatomic site of the tumor tissue used to generate the model for the HCMI.
113	Method of cancer sample procurement	 □ Extrapleural pneumonectomy □ Extended pleurectomy/decortication □ Pleurectomy/decortication □ Partial pleurectomy □ Video-assisted thoracoscopic biopsy □ Local anaesthetic thoracoscopic biopsy □ CT guided biopsy □ Not specified □ Other (specify) 	3103514	Provide the procedure performed to obtain the primary tumor tissue. Note: If the method of procurement is not listed, proceed to Question 113a, otherwise, skip to Question 114.
113a	Specify the other method of tumor sample procurement		2006730	Specify the procedure performed to obtain the primary tumor tissue, if not included in the previous list.
114	Number of days from index date to date of tumor sample procurement		3288495	Provide the number of days from the index date to the date of the procedure that produced the tumor tissue submitted for HCMI.

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Question	Question Text	Data Entry Options	CDE ID	Instruction Text
115	Tumor tissue type	☐ Primary	3288124	Provide the primary tumor tissue
		☐ Additional Primary		type for this sample.
		□ NOS		
Primary Tu	mor Model Information			
116	Primary model		6594596	Please provide a number to identify
	biospecimen ordinal			which biospecimen this is in the
				sequence. Note: This number is
				expected to be "1".
117	CMDC model ID		6586036	Please provide the CMDC model ID
				for this sample as it will appear on
				tubes and the Sample Submission
440	220 1 1275		6504040	Form transmitted to the BPC.
118	BPC submitter ID (if		6584919	Please provide the BPC-generated ID
	available)			for this sample as it will appear on
				the Sample Submission Form
119	Madalranrasants	 □ Yes	6584730	transmitted to the BPC. Does this model represent the
119	Model represents	□ No	0364730	·
120	primary diagnosis? Model's primary tumor	LI INU	6586035	primary diagnosis for this Case ID3? Enter the CMDC Sample ID of the
120	tissue CMDC sample ID		0300033	PRIMARY TUMOR TISSUE from which
	Hasare Civine sample in			this model is derived.
121	Model's primary tumor		6584265	Enter the biospecimen ordinal of the
121	biospecimen ordinal		0384203	PRIMARY TUMOR TISSUE from which
	biospecificii orumai			this model is derived.
Treatment	Information		<u>I</u>	tilis illouer is derived.
122	History of neoadjuvant	□ No	3382737	Indicate whether the patient
122	treatment	☐ Yes; radiation prior to resection	3302737	received neoadjuvant radiation or
	the define the	☐ Yes; pharmaceutical treatment prior to		pharmaceutical treatment. <i>Note:</i>
		resection		Pharmaceutical therapy is addressed in
		☐ Yes; both radiation and pharmaceutical		Questions 123-131. Radiation therapy is
		treatment prior to resection		addressed in Questions 132-133.
		☐ Unknown		
123	Neoadjuvant	_	5832928	Select all neoadjuvant chemotherapy
	chemotherapy type	☐ Cytotoxic chemotherapy		types that were administered to the
		☐ Hormonal		patient. Note: Cytotoxic chemotherapy
		☐ Immunotherapy (cellular and immune		is addressed in Questions 124-125.
		checkpoint)		Hormone therapy is addressed in
		☐ Targeted therapy (small molecule inhibitors		Questions 126-127. Immunotherapy is addressed in Questions 128-129.
		and targeted antibodies)		Targeted therapy is addressed in
		□ Not applicable		Questions 130-131.
124	Neoadjuvant	☐ Cisplatin and pemetrexed	2853313	Select all chemotherapeutics used
	chemotherapeutic	☐ Gemcitabine		for neoadjuvant therapy. Note: If
	regimen	☐ Pemetrexed		neoadjuvant chemotherapy was not
	-	☐ Cisplatin		given, skip to Question 126. If the
		☐ Carboplatin		neoadjuvant chemotherapeutic regimen
		☐ Vinorelbine		is not listed, proceed to Question 124a,
		☐ Doxorubicin		otherwise, skip to Question 125.
		☐ Navelbine		
		☐ Raltitrexed		
		☐ Other (specify)		
124a	Other neoadjuvant		62694	If the neoadjuvant therapy is not
	chemotherapeutic			included in the provided list, specify
	regimen			neoadjuvant therapies administered.
125	Days to neoadjuvant		5102411	Provide the number of days from
	chemotherapy treatment			index date to the date of treatment
	from index date			with neoadjuvant chemotherapy.
126	Hormone therapy		2405358	Specify hormone therapy
			1	administered to patient.

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Question	Question Text	Data Entry Options	CDE ID	Instruction Text
127	Days to hormone therapy		5102411	Provide the number of days from
	treatment from index			index date to the date of treatment
	date			with hormone therapy.
128	Immunotherapy		2185614	Provide the name of the
				immunotherapy administered to the
				patient.
129	Days to immunotherapy		5102411	Provide the number of days from the
	treatment from index			index date to the date of treatment
	date			with immunotherapy.
130	Targeted therapy		4308476	Provide the name of the targeted
	',			therapy administered to the patient.
131	Days to targeted therapy		5102411	Provide the number of days from the
	treatment from index			index date to the date of treatment
	date			with targeted therapy.
132	Radiation therapy	☐ Stereotactic Body	3028890	Provide the type of radiation therapy
	administered type	☐ 2D conventional RT		that was administered to the
		☐ 3D conformal ☐ Stereotactic		patient. Note: If radiation therapy was
		☐ Brachytherapy HDR Radiosurgery		not administered, proceed to Question
		☐ Brachytherapy LDR ☐ WBRT		134. If the radiation therapy is not listed,
		☐ IMRT ☐ Other (specify)		proceed to Question 132a, otherwise,
		☐ Proton Beam ☐ Unspecified		skip to Question 133.
		☐ Not applicable		
132a	Other radiation therapy		2195477	If the radiation therapy type is not
				included in the provided list, specify
				the type.
133	Days to radiation		5102411	Provide the number of days from the
	treatment from index			index date to the date of treatment
	date			with radiation therapy.
Metastatio	c/Recurrent Tumor Biospecin	nen Information	II.	,
134	Are you submitting a			Indicate whether a
	metastatic/recurrent			metastatic/recurrent tumor
	tumor tissue sample?	☐ Yes		biospecimen was collected for this
	·	□ No		ID3 case. Note: If yes, proceed to
				Question 135. If submitting an OTHER
				tissue sample, proceed to Question 216.
135	Metastatic/recurrent		6584266	Please provide a number to identify
	tissue biospecimen			which biospecimen this is in the
	ordinal			sequence. Note: The first biospecimen
				should be number "1", the second should
				be number "2", etc.
136	CMDC tissue ID		6586035	Please provide the CMDC sample ID
				for this biospecimen as it will appear
				on tubes and the Sample Submission
				Form transmitted to the BPC.
137	BPC submitter ID (if		6584919	Please provide the BPC-generated ID
	available)			for this sample as it will appear on
				the Sample Submission Form
				transmitted to the BPC.
138	Metastatic/recurrent	☐ Cryopreserved	5432521	Provide the method used to
	tumor tissue sample	☐ FFPE		preserve the metastatic/recurrent
	preservation method	☐ Frozen		tumor tissue sample collected for
		□ ост		molecular characterization.
		☐ Snap frozen		
139	Number of days from	,	6132218	Provide the number of days from the
	index date to date of			index date to the date of diagnosis
	diagnosis of metastasis/			of metastatic/recurrent disease.
	recurrence			

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Question	Question Text	Data Entry Options	CDE ID	Instruction Text
140	Method of metastatic/ recurrent cancer sample procurement	□ Extrapleural pneumonectomy □ Extended pleurectomy/decortication □ Pleurectomy/decortication □ Partial pleurectomy □ Video-assisted thoracoscopic biopsy □ Local anaesthetic thoracoscopic biopsy □ CT guided biopsy □ Not specified □ Other Method (specify)	6587389	Indicate the procedure performed to obtain the metastatic/recurrent tumor tissue. Note: If the method of procurement is not listed, proceed to Question 140a, otherwise, skip to Question 141.
140a	Other method of cancer sample procurement		6587390	If the procedure performed to obtain the tumor tissue is not included in the provided list, specify the procedure.
141	Number of days from index date to date of metastatic/recurrent sample procurement		3288495	Provide the number of days from the index date to the date of the procedure that produced the metastatic/recurrent tumor tissue submitted for HCMI.
142	Metastatic/recurrent site	□ Right pleura □ Cervical lymph nodes □ Left pleura □ Stomach □ Parietal pleura □ Large intestine □ Visceral pleura □ Small intestine □ Diaphragm □ Liver □ Chest wall □ Kidney □ Contralateral pleura □ Adrenal gland □ Lung □ Spleen □ Peritoneum □ Not specified □ Axillary lymph nodes □ Other (specify)	6587394	Select the site from which the metastatic/recurrent tissue used to develop the model was derived. Note: If the metastatic/recurrent site is not listed, proceed to Question 142a, otherwise, skip to Question 143.
142a	Other metastatic/ recurrent site		6587395	If not included in the previous list, specify the site from which the metastatic/recurrent tissue used to develop the model was derived.
143	Specimen laterality	 □ Right □ Left □ Bilateral □ Not specified □ Not a paired site 	2007875	Indicate the laterality of the anatomic site of the tumor tissue used to generate the model for the HCMI.
144	Site of relapse	☐ Local ☐ Distant ☐ Not applicable	2002506	If the primary tumor relapsed, provide the site of relapse.
145	ICD-10 code	□ C45.0 □ C78.0 □ C78.7 □ C45.1 □ C77.3 □ C79.0 □ C45.2 □ C77.0 □ C79.7 □ C45.7 □ C78.8 □ C79.8 □ C45.9 □ C78.4 □ Other □ C78.2 □ C78.5 (specify)	3226287	Provide the ICD-10 code for the metastatic/recurrent tumor used to generate the model submitted to HCMI. Note: If the ICD-10 code is not listed, proceed to Question 145a, otherwise, skip to Question 146.
145a	Specify other ICD-10 code		3226287	If not included in the previous list, provide the ICD-10 code for the metastatic/recurrent tumor used to generate the model submitted to HCMI.
146	ICD-O-3 histology code		3226275	Provide the ICD-O-3 histology code describing the morphology of the metastatic/recurrent tumor used to generate the model submitted to HCMI.

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Question	Question Text	Data Entry Options	CDE ID	Instruction Text
147	Maintenance and/or		6119066	Provide the name(s) of the
	consolidation therapy			maintenance and/or consolidation
	administered prior to			therapy administered to the patient
	collection of metastatic/			prior to the collection of the
	recurrent tissue			metastatic/recurrent tissue used to
	recurrent tissue			develop the model.
148	Days to start of		5102411	Provide the number of days from the
148	maintenance and/or		3102411	index date to the date maintenance
	consolidation therapy			and/or consolidation therapy
	from index date			started.
149	Days to last known		5102431	Provide the number of days from the
	administration date of			index date to the last known date of
	maintenance and/or			maintenance and/or consolidation
	consolidation therapy			therapy.
	from index date			
150	Is the patient still	☐ Yes	6379568	Indicate whether the patient is still
	receiving treatment?	□ No		undergoing maintenance and/or
		☐ Unknown		consolidation therapy.
151	Disease status	☐ No evidence of disease	2188290	Provide the disease status following
		☐ Progressive disease		maintenance and/or consolidation
		☐ Stable disease		therapy.
		☐ Unknown		r <i>i</i>
Prognostic	/Predictive/Lifestyle Feature	es for Metastatic/Recurrent Tumor Prognosis or Res	oonsiveness	to Treatment
152	Number of positive	,	89	Provide the number of lymph nodes
	lymph nodes			with disease involvement.
153	Number of lymph nodes		3	Provide the total number of lymph
	tested			nodes tested for the presence of
	tested			cancer cells.
154	Was the presence of		7595969	Indicate whether or not the
154	circulating endothelial	_	7333303	
	cells (CEC) examined?	□ Yes		presence of circulating endothelial cells was examined. Note: If the
	cens (clc) examined:	□ No		presence of circulating endothelial cells
		☐ Unknown		was examined, proceed to Question 155,
				otherwise, skip to Question 158.
155	Circulating endothelial	□ Present	7604207	Indicate whether or not circulating
	cells	□ Absent		endothelial cells were present.
156	Number of circulating		7604208	Provide the count of circulating
130	endothelial cells		7004200	endothelial cells in the patient's
				•
157	identified		2210/20	sample.
157	Blood volume (mL)		3219439	Provide the volume of the blood
		mL		sample used to count circulating
				endothelial cells, in mL.
158	Residual tumor	□ RX □ R2	2608702	Indicate the status of the tissue
		☐ RO ☐ Not evaluated		margin following surgical resection.
		□ R1		
159	Performance status	☐ 0: Asymptomatic	88	Indicate the ECOG functional
	score: Eastern	1: Symptomatic, but fully ambulatory		performance status of the
	Cooperative Oncology	☐ 2: Symptomatic, in bed less than 50% of the		patient/participant. Note: If
	Group	day		performance status was determined,
		☐ 3: Symptomatic, in bed more than 50% of the		proceed to Question 160, otherwise, skip
		day, but not bed-ridden		to Question 161.
		☐ 4: Bed-ridden		
		□ Not evaluated		
		☐ Unknown		
160	Number of days from		3479270	Provide the number of days from the
	index date to the date			index date to the date that the ECOG
	initial score obtained for	days		performance status assessment was
	the ECOG performance	uuys		performed.
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Question	Question Text	Data Entry Options	CDE ID	Instruction Text
161	Was EGP-2 IHC	☐ Yes	7595965	Indicate whether EGP-2 protein
	performed?	□ No		expression by
	·	□ Unknown		immunohistochemistry (IHC) analysis
				was performed. Note: If EGP-2 IHC was
				not performed, skip to Question 163.
162	EGP-2 expression by IHC	☐ Positive	7601836	Indicate the status of EGP-2 protein
		□ Negative		expression as determined by
		☐ Equivocal		immunohistochemistry (IHC).
163	Was TAG-72 IHC		7595966	Indicate whether TAG-72 protein
	performed?	□ Yes		expression by
		□ No		immunohistochemistry (IHC) analysis
		☐ Unknown		was performed. Note: If TAG-72 IHC
				was not performed, skip to Question 165.
164	TAG-72 expression by IHC		7601837	Indicate the status of TAG-72 protein
104	TAG-72 expression by file	☐ Positive	7001837	expression as determined by
		□ Negative		immunohistochemistry (IHC).
		☐ Equivocal		
165	Was PD-L1 IHC		6078873	Indicate whether PD-L1 protein
	performed?	□ Yes		expression by
	•	□ No		immunohistochemistry (IHC) analysis
		☐ Unknown		was performed. Note: If PD-L1 IHC was
				not performed, skip to Question 169.
166	PD-L1 expression by IHC	☐ Positive	4798631	Indicate the status of PD-L1 protein
		□ Negative		expression as determined by
		☐ Equivocal		immunohistochemistry (IHC).
167	Which PD-L1 stain was		7604210	Provide the name of the stain used
	used?			to assess PD-L1 expression by IHC.
100				
168	What is the PD-L1		7604211	Provide the percent of cells positive
	percentage positive cells?	%		for PD-L1 as assessed by IHC.
169	Was calretinin IHC		7595962	Indicate whether calretinin protein
103	performed?		7333302	expression by
	periorinear	Yes		immunohistochemistry (IHC) analysis
		□ No		was performed. Note: If calretinin IHC
		☐ Unknown		was not performed, skip to Question
				171.
170	Calretinin expression by	☐ Positive	7601833	Indicate the status of calretinin
	IHC	☐ Negative		protein expression as determined by
		☐ Equivocal		immunohistochemistry (IHC).
171	Was cytokeratin 5/6 IHC		7614375	Indicate whether cytokeratin 5/6
	performed?	☐ Yes		protein expression by
		□ No		immunohistochemistry (IHC) analysis
		☐ Unknown		was performed. Note: If cytokeratin
				5/6 IHC was not performed, skip to Question 173.
172	Cytokeratin 5/6	☐ Positive	7614376	Indicate the status of cytokeratin 5/6
1	expression by IHC	□ Negative		protein expression as determined by
	,	☐ Equivocal		immunohistochemistry (IHC).
173	Was WT-1 IHC	·	6690712	Indicate whether WT-1 protein
	performed?	□ Yes		expression by
		□ No		immunohistochemistry (IHC) analysis
		☐ Unknown		was performed. Note: If WT-1 IHC was
				not performed, skip to Question 175.
174	WT-1 expression by IHC	☐ Positive	6690723	Indicate the status of WT-1 protein
		☐ Negative		expression as determined by
		☐ Equivocal		immunohistochemistry (IHC).
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	Enrollment: Mesothelioma	TO THE P	A Second		4
Tissue Source Site (TSS) Name:	HCMI Identifier (ID3):	X 3%	5		-
Completed By:	Completion Date (MM/DD/YYYY):		6 35	5	

Question	Question Text	Data Entry Options	CDE ID	Instruction Text
175	Was D2-40 IHC		7595963	Indicate whether D2-40 protein
	performed?	Yes		expression by
		□ No		immunohistochemistry (IHC) analysis
		☐ Unknown		was performed. Note: If D2-40 IHC was
176	D2 40 overession by IIIC	□ Desitive	7601024	not performed, skip to Question 177.
176	D2-40 expression by IHC	☐ Positive ☐ Negative	7601834	Indicate the status of D2-40 protein expression as determined by
		☐ Equivocal		immunohistochemistry (IHC).
177	Was BerEP4 IHC	ш суштоса	7595964	Indicate whether BerEP4 protein
1	performed?		7333301	expression by
	periorinear	☐ Yes ☐ No		immunohistochemistry (IHC) analysis
		□ No □ Unknown		was performed. Note: If BerEP4 IHC
		LI OIIKIIOWII		was not performed, skip to Question
1=2	D 504		7604005	179.
178	BerEP4 expression by IHC	Positive	7601835	Indicate the status of BerEP4 protein
		□ Negative □ Equivocal		expression as determined by
179	Was CEA IHC performed?	Lyuivocai	7595967	immunohistochemistry (IHC). Indicate whether CEA protein
1/9	was cla inchenomiea!	□ Yes	/35350/	expression by
		□ No		immunohistochemistry (IHC) analysis
		☐ Unknown		was performed. Note: If CEA IHC was
				not performed, skip to Question 181.
180	CEA expression by IHC	☐ Positive	7601838	Indicate the status of CEA protein
		☐ Negative		expression as determined by
		☐ Equivocal		immunohistochemistry (IHC).
181	Was BG8 IHC performed?	- No.	7595968	Indicate whether BG8 protein
		☐ Yes		expression by
		□ No		immunohistochemistry (IHC) analysis
		Unknown		was performed. Note: If BG8 IHC was not performed, skip to Question 183.
182	BG8 expression by IHC	☐ Positive	7601839	Indicate the status of BG8 protein
		☐ Negative		expression as determined by
		☐ Equivocal		immunohistochemistry (IHC).
183	Was PTEN IHC		6062415	Indicate whether PTEN protein
	performed?	Yes		expression by
		□ No		immunohistochemistry (IHC) analysis
		Unknown		was performed. Note: If PTEN IHC was not performed, skip to Question 185.
184	PTEN expression by IHC	☐ Positive	6063672	Indicate the status of PTEN protein
104	Lit expression by file	☐ Negative	5555572	expression as determined by
		☐ Equivocal		immunohistochemistry (IHC).
185	Was aquaporin-1 IHC		7595970	Indicate whether aquaporin-1
	performed?	□ Yes		protein expression by
		□ No		immunohistochemistry (IHC) analysis
		☐ Unknown		was performed. Note: If aquaporin-1
				IHC was not performed, skip to Question 187.
186	Aquaporin-1 expression	☐ Positive	7601840	Indicate the status of aquaporin-1
100	by IHC	□ Negative	, 551545	protein expression as determined by
	•	☐ Equivocal		immunohistochemistry (IHC).
187	Was COX-2 IHC	·	7595971	Indicate whether COX-2 protein
	performed?	□ Yes		expression by
		□ No		immunohistochemistry (IHC) analysis
		☐ Unknown		was performed. Note: If COX-2 IHC was
100	COV 2		7604044	not performed, skip to Question 189.
188	COX-2 expression by IHC	☐ Positive	7601841	Indicate the status of COX-2 protein
		☐ Negative		expression as determined by
		☐ Equivocal		immunohistochemistry (IHC).
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V1.0 Tissue Source Site (TSS) Name:	Enrollment: Mesothelioma HCMI Identifier (ID3):	HCMI
Completed By:	Completion Date (MM/DD/YYYY):	

Question	Question Text	Data Entry Options	CDE ID	Instruction Text
Additional	Metastatic/Recurrent Tumo	r Biospecimen Information (if applicable)		
189	Are you submitting an additional metastatic/ recurrent tumor tissue sample?	☐ Yes ☐ No		A biospecimen obtained from a single site at a single timepoint in progression that is portioned for both sequencing and model generation counts as 1 single tumor specimen. A biospecimen obtained from another site or at a later timepoint in progression that is portioned for both sequencing and model generation counts as a second single tumor specimen. Note: If yes, proceed to Question 190, otherwise, skip to Question 206.
190	Metastatic/recurrent tissue biospecimen ordinal		6584266	Please provide a number to identify which biospecimen this is in the sequence. The first biospecimen should be number "1," the second
191	CMDC tissue ID		6586035	should be number "2," etc. Please provide the CMDC sample ID for this biospecimen as it will appear on tubes and the Sample Submission
192	BPC submitter ID (if available)		6584919	Form transmitted to the BPC. Please provide the BPC-generated ID for this sample as it will appear on the Sample Submission Form transmitted to the BPC.
193	Metastatic/ recurrent tumor tissue sample preservation method	☐ Cryopreserved ☐ FFPE ☐ Frozen ☐ OCT ☐ Snap frozen	5432521	Provide the method used to preserve the metastatic/recurrent tumor tissue sample collected for molecular characterization.
194	Number of days from index date to date of diagnosis of additional metastasis/ recurrence		6132218	Provide the number of days from the index date to the date of diagnosis of additional metastatic/recurrent disease.
195	Method of metastatic/ recurrent cancer sample procurement	□ Extrapleural pneumonectomy □ Extended pleurectomy/decortication □ Pleurectomy/decortication □ Partial pleurectomy □ Video-assisted thoracoscopic biopsy □ Local anaesthetic thoracoscopic biopsy □ CT guided biopsy □ Not specified □ Other Method (specify)	6587389	Indicate the procedure performed to obtain the metastatic/recurrent tumor tissue. Note: If the method of procurement is not listed, proceed to Question 195a, otherwise, skip to Question 196.
195a	Other method of cancer sample procurement		6587390	If the procedure performed to obtain the tumor tissue is not included in the provided list, specify the procedure.
196	Number of days from index date to date of metastatic/recurrent sample procurement		3288495	Provide the number of days from the index date to the date of the procedure that produced the metastatic/recurrent tumor tissue submitted for HCMI.

	Enrollment: Mesothelioma	College A	The same		(Car	7
Tissue Source Site (TSS) Name:	HCMI Identifier (ID3):	CO	1			T
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Question	Question Text	Data Entry Options	CDE ID	Instruction Text
197	Metastatic/ recurrent site	☐ Right pleura	6587394	Select the site from which the
		☐ Left pleura		metastatic/recurrent tissue used to
		☐ Bilateral pleura		develop the model was derived.
		Parietal pleura		Note: If the metastatic/recurrent site is
		☐ Visceral pleura		not listed, proceed to Question 197a, otherwise, skip to Question 198.
		☐ Diaphragm		concernation and to Question 220.
		☐ Chest wall ☐ Contralateral pleura		
		☐ Contralateral pieura ☐ Lung		
		☐ Peritoneum		
		☐ Axillary lymph nodes		
		☐ Cervical lymph nodes		
		☐ Stomach		
		☐ Large intestine		
		☐ Small intestine		
		Liver		
		☐ Kidney		
		☐ Adrenal gland ☐ Spleen		
		☐ Pericardium		
		☐ Not specified		
		☐ Other (specify)		
197a	Other metastatic/		6587395	If not included in the previous list,
	recurrent site			specify the site from which the
				metastatic/recurrent tissue used to
				develop the model was derived.
198	Site of relapse	□ Local	2002506	If the primary tumor relapsed,
		☐ Regional		provide the site of relapse.
		☐ Distant		
199	ICD-10 code	☐ Not applicable	3226287	Provide the ICD-10 code for the
133	TCD 10 couc		3220207	metastatic/recurrent tumor used to
				generate the model submitted to
				HCMI.
200	ICD-O-3 histology code		3226275	Provide the ICD-O-3 histology code
				describing the morphology of the
				metastatic/recurrent tumor used to
				generate the model submitted to
201	Maintenance and/or		6119066	HCMI. Provide the name(s) of the
201	consolidation therapy		0113000	maintenance and/or consolidation
	administered prior to			therapy administered to the patient
	collection of metastatic/			prior to the collection of the
	recurrent tissue			metastatic/recurrent tissue used to
				develop the model.
202	Days to start of		5102411	Provide the number of days from the
	maintenance and/or			index date to the date maintenance
	consolidation therapy			and/or consolidation therapy
203	from index date Days to last known		5102431	started. Provide the number of days from the
203	administration date of		3102431	index date to the last known date of
	maintenance and/or			maintenance and/or consolidation
	consolidation therapy			therapy.
	from index date			
204	Is the patient still	☐ Yes	6379568	Indicate whether the patient is still
	receiving treatment?	□ No		undergoing maintenance and/or
		☐ Unknown		consolidation therapy.
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Tissue Source Site (TSS) Name:	HCMI Identifier (ID3):
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Question	Question Text	Data Entry Options	CDE ID	Instruction Text
205	Disease status	☐ No evidence of disease	2188290	Provide the disease status following
		☐ Progressive disease		maintenance and/or consolidation
		☐ Stable disease		therapy.
		☐ Unknown		
Additiona	ıl Metastatic/Recurrent Tumo	r Prognostic/Predictive/Lifestyle Features	for Additional Metast	atic/Recurrent Tumor Prognosis or
Responsiv	eness to Treatment (Note: Qu	estions 151-187 may be repeated to capture cli	inical molecular characte	rization information for additional
	/recurrent biospecimens.)			
Metastati	ic/Recurrent Tumor Model Inj	ormation		
206	METASTATIC/		6594587	Please provide a number to identify
	RECURRENT model			which biospecimen this is in the
	biospecimen ordinal			sequence. Note: The first biospecimen should be number "1," the second should be number "2," etc.
207	CMDC model ID		6586036	Please provide the CMDC model ID
				for this sample as it will appear
				on tubes and the Sample Submission
				Form transmitted to the BPC.
208	BPC submitter ID (if		6584919	Please provide the BPC-generated ID
	available)			for this sample as it will appear on
				the Sample Submission Form
				transmitted to the BPC.
209	Model's METASTATIC/		6586035	Enter the CMDC Sample ID of the
	RECURRENT tumor tissue			METASTATIC/RECURRENT tissue
	CMDC sample ID			from which this model is derived.
210	Model's METASTATIC/		6584266	Enter the biospecimen ordinal
	RECURRENT tumor tissue			of the METASTATIC/RECURRENT
	biospecimen ordinal			tissue from which this model is
				derived.
Additiona		ecimen Tumor Model Information (if appl	licable)	
211	METASTATIC/		6594587	Please provide a number to identify
	RECURRENT model			which biospecimen this is in the
	biospecimen ordinal			sequence. Note: The first biospecimen should be number "1," the second should be number "2," etc.
212	CMDC model ID		6586036	Please provide the CMDC model ID
				for this sample as it will appear on
				tubes and the Sample Submission
				Form transmitted to the BPC.
213	BPC submitter ID (if		6584919	Please provide the BPC-generated ID
	available)			for this sample as it will appear on
	,			the Sample Submission Form
				transmitted to the BPC.
214	Model's METASTATIC/		6586035	Enter the CMDC Sample ID of the
	RECURRENT tumor tissue			METASTATIC/RECURRENT tissue
	CMDC sample ID			from which this model is derived.
215	Model's METASTATIC/		6584266	Enter the biospecimen ordinal of the
	RECURRENT tumor tissue			METASTATIC/RECURRENT tissue
	biospecimen ordinal			from which this model is derived.
Other Bio	specimen Information			
216	Are you submitting an			Indicate whether an OTHER tissue
	OTHER tissue sample?	□ Yes		sample (e.g. pre-malignant, non-
		□ No		malignant, or dysplastic tissue, etc.)
				was collected for HCMI for this case.
				Note: If yes, proceed to Question 217.
217	OTHER tissue		6584267	Please provide a number to identify
	biospecimen ordinal			which biospecimen this is in the
				sequence. Note: The first biospecimen
				should be number "1," the second should
				be number "2," etc.

Tissue Source Site (TSS) Name:_____

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Question	Question Text	Data Entry Options	CDE ID	Instruction Text
218	CMDC sample ID		6586035	Please provide the CMDC sample ID
				for this specimen as it will appear on
				tubes and the Sample Submission
				Form transmitted to the BPC.
219	BPC submitter ID (if		6584919	Please provide the BPC-generated ID
	available)			for this sample as it will appear on
	,			the Sample Submission Form
				transmitted to the BPC.
220	OTHER tissue sample		5432521	Provide the method used to
	preservation method	☐ Cryopreserved ☐ OCT		preserve the OTHER tissue sample
	p. eser ration method	☐ FFPE ☐ Snap frozen		collected for molecular
		☐ Frozen		characterization.
221	Other method of cancer	☐ Extrapleural pneumonectomy	6587398	Provide the procedure performed to
221		, , ,	0387398	obtain the OTHER tissue. Note: If the
	sample procurement	,,		method of procurement is not listed,
		☐ Pleurectomy/decortication☐ Partial pleurectomy		proceed to Question 221a, otherwise,
				skip to Question 222.
		☐ Video-assisted thoracoscopic biopsy		•
		☐ Local anaesthetic thoracoscopic biopsy		
		☐ CT guided biopsy		
		□ Not specified		
221		☐ Other Method (specify)		
221a	Specify method of OTHER		6587399	Specify the procedure performed to
	tissue sample			obtain the OTHER tissue.
	procurement			
222	Number of days from		3288495	Provide the number of days from the
	index date to date of			index date to the date of the
	OTHER sample			procedure that produced the OTHER
	procurement			tissue submitted for HCMI.
223	Tissue type		64784	Indicate the OTHER tissue type.
		☐ Pre-malignant		Note: If the OTHER tissue type is not
		☐ Other (specify)		listed, proceed to Question 223a,
				otherwise, skip to Question 224.
223a	Specify tissue type		64785	Specify the OTHER tissue type if not
	_			in the provided list.
224	Anatomic site of OTHER		6696813	Select the site from which the
	tissue	☐ Right pleura ☐ Peritoneum		OTHER tissue used to develop the
		☐ Left pleura ☐ Diaphragm		model was derived. Note: If the OTHER
		☐ Bilateral pleura ☐ Chest wall		tissue site is not listed, proceed to
		☐ Visceral pleura ☐ Not specified		Question 224a, otherwise, skip to
		☐ Parietal pleura ☐ Other (specify)		Question 225.
22.4	6 16 1 1 1		6504046	6 (ottuse
224a	Specify anatomic site of		6584916	Specify the site of OTHER tissue, if
225	OTHER tissue ICD-10 code		3226287	not in the previous list. Provide the ICD-10 code for the
225	ICD-10 code		3220287	
				OTHER tissue used to generate the
				model submitted to HCMI.
226	ICD-O-3 histology code		3226275	Provide the ICD-O-3 histology code
				describing the morphology of the
				OTHER tissue used to generate the
				model submitted to HCMI.
	OTHER biospecimen Inform	ation (if applicable)	1	
227	Are you submitting an			Indicate whether an additional
	additional OTHER tissue			OTHER tissue sample (pre-malignant,
	sample?			non-malignant, or dysplastic tissue,
		☐ Yes		etc.) is being submitted for HCMI for
		□ No		this case. Note: If yes, proceed to
				Question 228, otherwise, skip to
				Question 238.

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Question	Question Text	Data Entry Options	CDE ID	Instruction Text
228	OTHER tissue		6584267	Please provide a number to identify
	biospecimen ordinal			which biospecimen this is in the
				sequence. Note: The first biospecimen
				should be number "1," the second should be number "2," etc.
229	CMDC sample ID		6586035	Please provide the CMDC sample ID
223	CIVIDE Sample 15		0300033	for this specimen as it will appear on
				tubes and the Sample Submission
				Form transmitted to the BPC.
230	BPC submitter ID (if		6584919	Please provide the BPC-generated ID
	available)			for this sample as it will appear on
				the Sample Submission Form
224	OTUED 11		5400504	transmitted to the BPC.
231	OTHER tissue sample	☐ Cryopreserved	5432521	Provide the method used to
	preservation method	□ FFPE		preserve the OTHER tissue sample collected for molecular
		☐ Frozen ☐ OCT		characterization.
				characterization.
232	Other method of cancer	☐ Snap frozen ☐ Extrapleural pneumonectomy	6587398	Provide the procedure performed to
232	sample procurement	☐ Extrapleural pneumonectomy ☐ Extended pleurectomy/decortication	030/398	obtain the OTHER tissue. Note: If the
	sample procurement	☐ Pleurectomy/decortication		method of procurement is not listed,
		☐ Partial pleurectomy		proceed to Question 232a, otherwise,
		☐ Video-assisted thoracoscopic biopsy		skip to Question 233.
		☐ Local anaesthetic thoracoscopic biopsy		
		☐ CT guided biopsy		
		□ Not specified		
		☐ Other Method (specify)		
232a	Specify method of OTHER		6587399	Specify the procedure performed to
	tissue sample			obtain the OTHER tissue.
233	procurement Number of days from		3288495	Provide the number of days from the
233	index date to date of		3288495	index date to the date of the
	OTHER sample			procedure that produced the OTHER
	procurement			tissue submitted for HCMI.
234	Tissue type		64784	Indicate the OTHER tissue type.
		☐ Pre-malignant		Note: If the OTHER tissue type is not
		☐ Other (specify)		listed, proceed to Question 234a,
				otherwise, skip to Question 235.
234a	Specify tissue type		64785	Specify the OTHER tissue type
235	Anatomic site of OTHER	□ Right pleura	6696813	if not in the provided list. Select the site from which the
233	tissue	☐ Left pleura	0050013	OTHER tissue used to develop the
	1133410	☐ Bilateral pleura		model was derived. Note: If the OTHER
		☐ Visceral pleura		tissue site is not listed, proceed to
		□ Parietal pleura		Question 235a, otherwise, skip to
		☐ Peritoneum		Question 236.
		☐ Diaphragm		
		☐ Chest wall		
		□ Not specified		
225	Canalian street to 5	☐ Other (specify)	6504046	Constitute of OTUES :
235a	Specify anatomic site of OTHER tissue		6584916	Specify the site of OTHER tissue, if not in the previous list.
236	ICD-10 code		3226287	Provide the ICD-10 code for the
			3223237	OTHER tissue used to generate the
				model submitted to HCMI.
237	ICD-O-3 histology code		3226275	Provide the ICD-O-3 histology code
				describing the morphology of the
				OTHER tissue used to generate the
				model submitted to HCMI.

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Question	Question Text	Data Entry Options	CDE ID	Instruction Text
Other Tissu	e Model Information		•	
238	OTHER tissue model biospecimen ordinal		6594590	Please provide a number to identify which biospecimen this is in the sequence. Note: The first biospecimen should be number "1," the second should be number "2," etc.
239	CMDC model ID		6586036	Please provide the CMDC model ID for this sample as it will appear on tubes and the Sample Submission Form transmitted to the BPC.
240	BPC submitter ID (if available)		6584919	Please provide the BPC-generated ID for this sample as it will appear on the Sample Submission Form transmitted to the BPC.
241	Model's OTHER tissue CMDC sample ID		6586035	Enter the CMDC Sample ID of the OTHER tissue from which this model is derived.
242	Model's OTHER tissue biospecimen ordinal		6584267	Enter the biospecimen ordinal of the OTHER tissue from which this model is derived.
	Other Tissue Model Inforn	nation (if applicable)		
243	OTHER tissue model biospecimen ordinal		6594590	Please provide a number to identify which biospecimen this is in the sequence. Note: The first biospecimen should be number "1," the second should be number "2," etc.
244	CMDC model ID		6586036	Please provide the CMDC model ID for this sample as it will appear on tubes and the Sample Submission Form transmitted to the BPC.
245	BPC submitter ID (if available)		6584919	Please provide the BPC-generated ID for this sample as it will appear on the Sample Submission Form transmitted to the BPC.
246	Model's OTHER tissue CMDC sample ID		6586035	Enter the CMDC Sample ID of the OTHER tissue from which this model is derived.
247	Model's OTHER tissue biospecimen ordinal		6584267	Enter the biospecimen ordinal of the OTHER tissue from which this model is derived.