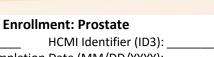
Tissue Source Site (TSS) Name: \_







Completion Date (MM/DD/YYYY): \_ Completed By: 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 patient.

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
2	ID3		5845012	quality control). Provide the HCMI-specific anonymized ID (ID3).
3	Index date	<ul> <li>Initial pathologic diagnosis</li> <li>Sample procurement</li> <li>First patient visit</li> </ul>	6154722	Select the reference date used to calculate time intervals (e.g. days to treatment). Date of initial pathologic diagnosis is the HCMI standard and should be used unless it is unavailable. If an alternative index date is used, indicate it here and use it for all interval calculations.
Patient Inf	ormation			
4	Gender	<ul> <li>□ Male</li> <li>□ Female</li> <li>□ Unspecified</li> </ul>	2200604	Provide the patient's gender using the defined categories. Identification of gender is based upon self-report 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 body mass index (BMI).
8	Race	<ul> <li>American Indian or Alaska Native</li> <li>Asian</li> <li>Black or African American</li> <li>Native Hawaiian or other Pacific Islander</li> <li>White</li> <li>Unknown</li> <li>Not reported</li> </ul>	2192199	<ul> <li>Provide the patient's race using the defined categories.</li> <li>American Indian or Alaska Native: A persor having origins in any of the original peoples of North and South America (including Central America), and who maintains tribal affiliation or community attachment.</li> <li>Asian: A person having origins in any of the peoples of the Far East, Southeast Asia, or in the Indian subcontinent including, for example, Cambodia, China, India, Japan, Korea, Malaysia, Pakistan, the Philippine Islands, Thailand, and Vietnam.</li> <li>Black or African American: A person having origins in any of the black racial groups of Africa.</li> <li>Native Hawaiian or other Pacific Islander: A person having origins on any of the original peoples of Hawaii, Guam, Samoa, or other Pacific Island.</li> <li>White: A person having origins in any of the original peoples of Europe, the Middle East, or North Africa.</li> </ul>
9	Ethnicity	<ul> <li>Hispanic or Latino</li> <li>Not Hispanic or Latino</li> <li>Unknown</li> <li>Not reported</li> </ul>	2192217	Provide the patient's ethnicity using the defined categories. <b>Hispanic or Latino:</b> A person of Mexican, Puerto Rican, Cuban, Central or South American or other Spanish culture or origin, regardless of race. <b>Not Hispanic or Latino:</b> A person not meeting the definition of Hispanic or Latino.



Enrollment: Prostate

\_\_\_\_\_ HCMI Identifier (ID3): \_\_\_\_ Completion Date (MM/DD/YYYY): \_\_\_\_\_

Question	Question Text	Data Entry Options	CDE ID	Instruction Text
10	Number of days from index date to date of last		3008273	Provide the number of days from the 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 birth. If the patient was born prior to 1928, insert the date 1928.
13	Family history of cancer	<ul> <li>Same</li> <li>Different</li> <li>None</li> <li>Unknown</li> </ul>	5832923	Has a first-degree relative of the patient been diagnosed with a cancer of the same or a different type?
14	Smoking history	<ul> <li>□ Lifelong non-smoker (&lt;100 cigarettes smoked in a lifetime)</li> <li>□ Current smoker (includes daily and non-daily smokers)</li> <li>□ Current reformed smoker (duration not specified)</li> <li>□ Current reformed smoker for &gt;15 years</li> <li>□ Current reformed smoker for ≤15 years</li> </ul>	2181650	Indicate the patient's history of tobacco smoking as well as their current smoking status using the defined categories.
15	Clinical history (select all that apply)	<ul> <li>BRCA1/2 family history</li> <li>Hereditary prostate cancer</li> <li>Lynch syndrome</li> <li>Not applicable</li> <li>Other (specify)</li> </ul>	6690684	Select all relevant prior diseases/disorders in the patient's clinical history. <i>Note: If the clinical</i> <i>history is not listed, proceed to Question</i> <i>15a, otherwise, skip to Question 16.</i>
15a	Other clinical history		6690685	If not included in the previous list, specify other relevant prior diseases/disorders in the patient's clinical history.
16	Metastasis at diagnosis assessment status	<ul> <li>Metastatic</li> <li>Non-metastatic (confirmed)</li> <li>Non-metastatic (unconfirmed)</li> </ul>	3438571	Indicate whether there was evidence of metastasis at the time of diagnosis of the primary tumor. Note If metastatic at diagnosis, proceed to Question 17, otherwise, skip to Question 18.
17	Metastatic site(s) at diagnosis	<ul> <li>Lung</li> <li>Bone</li> <li>Liver</li> <li>Brain</li> <li>Lymph node(s): distant</li> <li>Lymph node(s): regional</li> <li>Other (specify)</li> </ul>	3029815	Indicate the site(s) of metastasis at the time of diagnosis of the primary tumor. Note: If the anatomic site of tumor tissue is not listed, proceed to Question 17a, otherwise, skip to Question 18.
17a	Specify metastatic site(s)		3128033	If the site of metastasis is not included on the provided list, specify the site of metastasis.
Biospecim	en Information	1	1	
18	Tissue sample type(s) collected for HCMI for this case	<ul> <li>Normal tissue</li> <li>Primary tumor</li> <li>Metastatic</li> <li>Recurrent</li> <li>Other tissue</li> </ul>	2006911	Please select all the tissue sample types submitted for HCMI with this case.
19	Number of NORMAL tissues biospecimens collected for HCMI for this case		6584256	Please provide the number of normal tissue specimens obtained for HCMI for this case. <i>Note: This</i> <i>number is expected to be 1.</i>



### Enrollment: Prostate HCMI Identifier (ID3): \_\_\_\_\_

Question	Question Text	Data Entry Options	CDE ID	Instruction Text
20	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
				is portioned for both sequencing and mod
	development for this			generation counts as 1 single primary
	case			tumor specimen. This number is expected
				to be 1.
21	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
				progression that is portioned for both
	development for this			sequencing and model generation counts
	case			as 1 single tumor specimen. A biospecimer
				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.
22	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. Not
	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.
23	Total number of tissue		6584271	Please provide the total number of
	biospecimens collected			tissue biospecimens collected for
	for HCMI for this case			HCMI for this case. <i>Note: This number</i>
	for their for this case			should be the sum of the normal, primary
				tumor, metastatic/ recurrent tumor, and
				other biospecimen counts above.
Normal Co	ntrol Information			
24	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 be
				number "2," etc.
25	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.
26	BPC submitter ID (if		6584919	Please provide the BPC-generated IE
	available)			for this sample as it will appear on
				the Sample Submission Form
				transmitted to the BPC.
27	Type of normal control	Whole blood	3081936	Indicate the type of normal control
-/	., pe et hormal control	Buccal cells	5001550	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		
	1	FFPE non-neoplastic tissue	1	
		Non-neoplastic tissue		



Tissue Source Site (TSS) Name: \_\_\_\_\_\_ Completed By: \_\_\_\_\_

\_\_\_\_\_ HCMI Identifier (ID3): \_\_\_\_\_ Completion Date (MM/DD/YYYY): \_\_\_\_\_

Question	Question Text	Data Entry Options	CDE ID	Instruction Text
28	Anatomic site of normal		4132152	If non-neoplastic tissue was
	tissue	□ Lymph node(s)		submitted as the normal control,
				select the anatomic site of the
		<ul> <li>Other (specify)</li> </ul>		normal tissue. Note: If the anatomic
		□ Not applicable		site of normal tissue is not listed,
				proceed to Question 28a, otherwise, skip
				to Question 29.
28a	Other anatomic site of		3288189	If non-neoplastic tissue, adjacent
	normal tissue			tissue, or normal tissue from another
				anatomic site was submitted as the
				normal control, provide the anatomic
				site of the normal tissue.
29	Distance from tumor to	$\square$ 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'.
30	Normal tissue sample	Cryopreserved	5432521	Provide the method used to
	preservation method			preserve the normal tissue sample
		□ Frozen		collected for molecular
				characterization.
		Snap frozen		
<i>,</i>	ımor Biospecimen Informati	on		
31	ICD-10 code for primary		3226287	Provide the ICD-10 code for the
	tumor	□ C61		primary tumor as used to generate
		Other (specify)		the ID3 for this subject. Note: If the
				ICD-10 code is not listed, proceed to 31a,
24 -			2226207	otherwise, skip to Question 32.
31a	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.
32	Tumor morphology	□ 8041/3	3226275	Using the patient's
				pathology/laboratory report, provide
		-		the ICD-O-3 histology code of the
				primary tumor. <i>Note: If the ICD-O-3</i>
		□ 8574/3		histology code of the primary tumor is not listed, proceed to Question 32a,
		Other (specify)		otherwise, skip to Question 33.
32a	Specify other		3226275	If the ICD-O-3 histology code
52u	morphology		5220275	describing the morphology of the
	morphology			patient's primary tumor is not
				included on the previous list, provide
				the ICD-O-3 histology code.
33	Tissue or organ of origin		3427536	Using the patient's
55			5427530	pathology/laboratory report, select
		Prostate		the primary site of the disease. <i>Note:</i>
		□ Other (specify)		If the primary site of the disease is not
				listed, proceed to Question 33a,
				otherwise skip to Question 34.
33a	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.
34	Histological type		3081932	Select the surgical pathology text
U r			5001552	description of the histological tumor
		Prostate cancer		type. Note: If the histological tumor
	1	Other (specify)		
				type is not listed, proceed to Question



Tissue Source Site (TSS) Name: \_\_\_\_\_\_ Completed By: \_\_\_\_\_

\_\_\_\_\_ HCMI Identifier (ID3): \_\_\_\_\_ Completion Date (MM/DD/YYYY): \_\_\_\_\_

Question	Question Text	Data Entry Options		CDE ID	Instruction Text
34a	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 histological type.
35	Histological subtype	<ul> <li>Acinar adenocarcinom</li> <li>Ductal adenocarcinom</li> <li>Small-cell neuroendoci</li> <li>Isolated intraductal cai</li> <li>Neuroendocrine prosta</li> <li>Other (specify)</li> </ul>	a rine carcinoma rcinoma	3081934	Using the patient's pathology/laboratory report, select the histological subtype of the primary tumor. <i>Note: If the histological</i> <i>subtype is not listed, proceed to</i> <i>Question 35a, otherwise, skip to</i> <i>Question 36.</i>
35a	Other histological subtype			3124492	If the histological subtype for the primary tumor is not included in the provided list, specify the histological subtype.
36	Prior malignancy (of the same cancer type)	<ul><li>☐ Yes</li><li>☐ No</li><li>☐ Unknown</li></ul>		5832924	Indicate whether the patient has a history of prior malignancy of the same cancer type.
37	Prior malignancy (other cancer type)	☐ Yes ☐ No ☐ Unknown		5878828	Indicate whether the patient has a history of prior malignancy of a different cancer type.
38	AJCC cancer staging edition	□ 2 <sup>nd</sup> □ 3 <sup>rd</sup>	□ 5 <sup>th</sup> □ 6 <sup>th</sup> □ 7 <sup>th</sup> □ 8 <sup>th</sup>	2722309	Select the AJCC staging handbook edition used to stage the patient's primary tumor.
39	AJCC pathologic spread: Primary tumor (pT)	□ T2a □ T2b	□ T3 □ T3a □ T3b □ T4	3045435	Using the patient's pathology/laboratory report, select the code for the pathologic T (primary tumor) as defined by the American Joint Committee on Cancer (AJCC).
40	AJCC pathologic spread: Lymph nodes (pN)	NX     N0     N1		3203106	Using the patient's pathology/laboratory report, select the code for the pathologic N (nodal) as defined by the American Joint Committee on Cancer (AJCC).
41	AJCC pathologic spread: Distant metastases (pM)	□ M1	□ M1b □ M1c □ MX	3045439	Using the patient's pathology/laboratory report, select the code for the pathologic M (metastasis) as defined by the American Joint Committee on Cancer (AJCC).
42	Tumor stage (pathological)	Stage II     Stage IIA     Stage IIB     Stage IIC	<ul> <li>Stage IIIA</li> <li>Stage IIIB</li> <li>Stage IIIC</li> <li>Stage IV</li> <li>Stage IVA</li> <li>Stage IVB</li> </ul>	3065862	Using the patient's pathology/laboratory report, in conjunction with the patient's medical record, select the stage as defined by the American Joint Committee on Cancer (AJCC).
43	Histologic Grade Group: Gleason Grade Group	<ul> <li>Grade group 1</li> <li>Grade group 2</li> <li>Grade group 3</li> <li>Grade group 4</li> <li>Grade Group 5</li> <li>Not applicable</li> <li>Cannot be assessed</li> </ul>		5918370	Select the Gleason score group category.



Tissue Source Site (TSS) Name: \_\_\_\_\_\_ Completed By: \_\_\_\_\_

\_\_\_\_\_ HCMI Identifier (ID3): \_\_\_\_\_ Completion Date (MM/DD/YYYY): \_\_\_\_\_

Question	Question Text	Data Entry Options		CDE ID	Instruction Text
44	Gleason Score	□ 3 □ 4 □ 5	□ 7 □ 8 □ 9 □ 10 □ Unknown	2433	Select the combined Gleason pattern score, which provides a reproducible description of the glandular architecture of prostate tissue depending primarily on the microscopic patterns of cancerous glands and cell morphology.
45	Primary Gleason grade	□ 2	□ 4 □ 5 □ Unknown	5936800	Select the Primary Gleason score as defined by the most prevalent Gleason pattern in a prostate biopsy or prostatectomy specimen.
46	Secondary Gleason grade	□ 2	□ 4 □ 5 □ Unknown	5936802	Select the Secondary Gleason score as defined by the second most prevalent Gleason pattern in a prostate biopsy or prostatectomy specimen.
47	Was a tertiary pattern identified?	☐ Yes ☐ No ☐ Unknown		6819525	Indicate whether a tertiary Gleason score was identified. Note: If a tertiary Gleason score was identified, proceed to Question 48, otherwise, skip to Question 49.
48	What tertiary pattern was identified?	<ul> <li>Gleason pattern 4</li> <li>Gleason pattern 5</li> </ul>		6826926	Select the pattern of the Gleason Tertiary Grade.
49	Percentage Gleason Patterns 4 and 5 (applicable to Gleason score greater than 7)	%		6826927	Provide the numeric value for the percent of Gleason pattern 4 or 5 when the Gleason Score is greater than 7.
Prognostic	/Predictive/Lifestyle Feature		osis or Responsiveness to	Treatment	
50	Lymphovascular invasion present?	Yes No Indeterminate Unknown	i	64727	Indicate whether large vessel (vascular) invasion or small, thin- walled (lymphatic) invasion was detected in the primary tumor.
51	Perineural invasion present?	□ Yes □ No □ Unknown		64181	Indicate whether perineural invasion or infiltration of tumor or cancer is present.
52	Number of positive lymph nodes			89	Provide the number of lymph nodes with disease involvement.
53	Number of lymph nodes tested			3	Provide the total number of lymph nodes tested for the presence of cancer cells.
54	Additional pathologic findings	<ul> <li>None identified</li> <li>High-grade prostatic in (PIN)</li> <li>Adenosis (Atypical ade</li> <li>Inflammation (specify t</li> <li>Nodular prostatic hype</li> <li>Other (specify)</li> </ul>	nomatous hyperplasia) :ype)	2431605	Select all significant pathologic findings present in addition to the invasive prostate carcinoma. Note: if inflammation was identified, proceed to Question 54a. If the pathologic finding is not listed, proceed to Question 54b, otherwise, skip to Question 55.
54a	Specify inflammation type			2431606	Indicate the predominant cell type or chronicity of inflammation in the prostate gland.
54b	Specify other additional pathologic findings			6819520	If not included in previous list, specify all significant pathologic findings present in addition to the invasive prostate carcinoma.
55	Extraprostatic extension	Present, focal	<ul> <li>Cannot be</li> <li>determined</li> <li>Unknown</li> </ul>	6819521	Indicate the extraprostatic disease extension.

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## Enrollment: Prostate

HCMI Identifier (ID3): \_\_\_\_\_ Completion Date (MM/DD/YYYY): \_\_\_\_

Question	Question Text	Data Entry Options	CDE ID	Instruction Text
56	Urinary bladder neck	□ Yes	6819522	Indicate whether the urinary bladder
	invasion	D No		neck has been invaded by tumor
				cells.
57	Seminal vesicle invasion	□ Yes □ Unknown	65074	Indicate whether invasion of the
				seminal vesicles by cancer is present.
58	Tumor margin	Cannot be assessed	6819523	Indicate the margin involvement by
		<ul> <li>Uninvolved by invasive carcinoma</li> </ul>		invasive carcinoma. <i>Note: If the tumor</i> <i>margin is involved by invasive</i>
		□ Involved by invasive carcinoma		carcinoma, proceed to Question 58a,
				otherwise, skip to Question 59.
58a	If tumor margin involved		6819524	Indicate the extent of a tumor
	by invasive carcinoma,	□ Limited (≤3mm)		border that is invading the adjacent
	indicate the type	□ Non-limited (>3mm)		tissue.
59	Treatment effect	No known presurgical therapy	6819618	Indicate the effect of treatment for
		Not identified		prostate cancer. Note: If other therapy
		Radiation therapy effect present		effect(s) are present, proceed to
		Hormonal therapy effect present		Question 59a, otherwise, skip to
		Other therapy effect(s) present (specify)		Question 60.
		Cannot be determined		
59a	Specify other treatment		6819619	Specify other therapy effect(s)
	effect			present.
60	PSA value (ng/mL) at		1806	Provide the patient's measured
	diagnosis			laboratory value of PSA (prostate
				specific antigen) in ng/mL at the
		ng/mL		time of prostate cancer diagnosis.
61	PSA value (ng/mL) at		1817	Provide the patient's measured
	progression			laboratory value of PSA (prostate
		· · ·		specific antigen) in ng/mL at the
		ng/mL		time of prostate cancer progression.
62	Intraductal carcinoma	□ Not identified	6819526	Indicate whether intraductal
	(IDC)	Present     Connect he determined		prostate carcinoma is present.
63	Residual tumor/margins	Cannot be determined RX R1	2608702	Indicate the status of the tissue
03	Residual turnor/margins		2008702	margin following surgical resection.
64	Was the patient ever		6819528	Indicate whether the patient was
04	treated for benign	□ Yes	0015520	treated for benign prostatic
	prostatic hyperplasia			hyperplasia. <i>Note: If the patient was</i>
	(BPH)?			treated for BPH, proceed to Question 65,
	(2)			otherwise, skip to Question 66.
65	If the patient was treated	□ Finasteride	6819529	Indicate the kind of treatment
	for BPH, which	Dutasteride		administered for benign prostatic
	treatments were	□ TURP		hyperplasia. Note: If the BPH treatment
	administered?	🗖 Unknown		is not listed, proceed to Question 65a,
		Other (specify)		otherwise, skip to Question 66.
65a	Specify other BPH		6819530	Specify another kind of treatment
	treatment administered			for benign prostatic hyperplasia not
				previously listed.
66	Was imaging (beyond		6819569	Indicate whether imaging (beyond
	ultrasound) used in	□ Yes		ultrasound) was used in diagnosis of
	diagnosis of the primary	□ No		the primary tumor. <i>Note: If imaging</i>
	tumor?	□ Unknown		beyond ultrasound was used, proceed to
				<i>Question 67, otherwise, skip to Question 69.</i>
67	Indicate the imaging		6819588	Indicate the kind of imaging used to
07	method(s) used in		0019200	diagnose the primary tumor. <i>Note: If</i>
	diagnosis of the primary	PET (specify)		PET scan was used, proceed to Question
	tumor	□ CT scan		68. If the imaging method is not listed,
	tumor	99mTc bone scintiscanning		proceed to Question 67a, otherwise, skip
		□ Other (specify)		to Question 69.
1				

Tissue Source Site (TSS) Name: \_\_\_\_\_ Completed By: \_\_\_\_\_

HCMI
struction Text

Enrollment: Prostate \_\_\_\_\_ HCMI Identifier (ID3): \_\_\_\_\_

Completion Date (MM/DD/YYYY):

Question	Question Text	Data Entry Options		CDE ID	Instruction Text
67a	Other imaging method(s)			6819607	If not included in the previous list,
	used in diagnosis of the				specify the kind of imaging used to
	primary tumor				diagnose the primary tumor.
68	For PET scans, indicate	<b>–</b> . – –		6819581	Indicate the kind of tracer used in
	the tracer used		PSMA		Positron Emission Tomography (PET)
		□ Choline □			imaging. Note: If the tracer is not listed,
		□ Acetate □	Other (specify)		proceed to Question 68a, otherwise, skip to Question 69.
68a	Other PET scan tracer			6819582	If not included in the previous list,
	used			0010001	specify the kind of tracer used in
					Positron Emission Tomography (PET)
					imaging.
69	Was the primary tumor	□ Yes		6819575	Indicate whether the primary tumor
	identified in subsequent	🗆 No			was identified in a subsequent
	imaging evaluation?	Unknown			imaging evaluation.
70	Indicate the imaging	-		6819576	Indicate the kind of subsequent
	method(s) in subsequent				imaging the identified the primary
	evaluation that identified	□ PET (specify)			tumor. Note: If PET scan was used,
	the primary tumor	<ul> <li>CT scan</li> <li>99mTc bone scintiscannir</li> </ul>	ng.		proceed to Question 71. If the imaging method is not listed, proceed to
		□ Other (specify)	ig		Question 70a, otherwise, skip to
					Question 72.
70a	Specify the imaging			6832443	If not included in the previous list,
	method(s) in subsequent				specify the kind of subsequent
	evaluation that identified				imaging that identified the primary
	the primary tumor				tumor.
71	For PET scans, indicate			6819581	Indicate the kind of tracer used in
	the tracer used		PSMA		Positron Emission Tomography (PET)
			Sodium fluoride		imaging. Note: If the tracer is not listed,
		□ Acetate □	Other (specify)		proceed to Question 71a, otherwise, skip to Question 72.
71a	Other PET scan tracer			6819582	If not included in the previous list,
. 20	used			0010001	specify the kind of tracer used in
					Positron Emission Tomography (PET)
					imaging.
72	Was the presence of			6829555	Indicate whether a test for
	circulating tumor cells	□ Yes			circulating tumor cells was
	(CTCs) tested?	□ No			performed. Note: If CTC presence was
		Unknown			examined, proceed to Question 73,
72	Circulating tumor call test			6910096	otherwise, skip to Question 78.
73	Circulating tumor cell test result	□ Absent		6819986	Indicate whether circulating tumor cells are present or absent. <i>Note: If</i>
	result	□ Present			CTCs are present, proceed to Question
					74, otherwise, skip to Question 78.
74	Number of circulating			3145287	Provide the numeric count of
	tumor cells (CTCs)				circulating tumor cells found in a
					specimen of the patient's peripheral
					blood.
75	Blood sample volume			3219439	Provide the volume of the blood
	used to analyze number				sample used to detect circulating
70	of CTC cells		Linka er ser	6024 457	tumor cells.
76	Was AR-V7 tested in		Unknown	6821457	Indicate whether or not AR-V7 was
77	circulating tumor cells? Circulating tumor cell AR-	□ No □ Present		6821463	tested in circulating tumor cells. Indicate the result of the test for AR-
//	V7 result	□ Present □ Absent		0021403	V7 in circulating tumor cells.
78	Genomic test performed?			6069581	Indicate whether a genomic
10	Genomie test performed?	□ Yes		0003201	biomarker test was performed. <i>Note:</i>
		□ No			If genomic testing was performed,
		Unknown			proceed to Question 79, otherwise, skip
					to Question 85.
					Page <b>8</b> of <b>27</b>

Tissue Source Site (TSS) Name: \_\_\_\_\_



Tissue Source Site (TSS) Name: \_\_\_\_\_\_ Completed By: \_\_\_\_\_

\_\_\_\_\_ HCMI Identifier (ID3): \_\_\_\_ Completion Date (MM/DD/YYYY): \_\_\_\_\_

Question	Question Text	Data Entry Options		CDE ID	Instruction Text
79	What genomic test was			6069582	Select the genomic biomarker test
	performed?	<ul> <li>Decipher</li> <li>Oncotype Dx Prosta</li> <li>Prolaris</li> </ul>	ate		that was performed. Note: If Decipher was used, proceed to Question 81. If Oncotype Dx Prostate was used, proceed to Question 82. If Prolaris was used, proceed to Question 83. If ProMark was
		<ul> <li>ProMark</li> <li>Other (specify)</li> </ul>			used, proceed to Question 83. If Fromark was genomic test is not listed, proceed to Question 79a, otherwise, skip to Question 85.
79a	Other genomic test performed			6069583	If not included in the previous list, provide the genomic biomarker test that was performed. <i>Note: If an other</i> <i>genomic test was used, proceed to</i> <i>Question 80.</i>
80	If other genomic test was performed, provide the risk group			6070422	Specify the risk group for prostate cancer as determined by assessment of an other genomic test.
81	What is the patient's Decipher score?			6819987	Provide the numeric score for the Decipher prostate cancer test.
82	What is the patient's risk group according to the Oncotype Genomic Prostate Score?	<ul> <li>Very low</li> <li>Low</li> <li>Favorable intermediate</li> </ul>	□ Intermediate □ High	6819988	Indicate the risk group based on the Oncotype DX Genomic Prostate test score.
83	What is the patient's Prolaris molecular score?			6819989	Provide the numeric score for the Prolaris prostate cancer test.
84	What is the patient's ProMark risk score?			6820003	Provide the numeric score for the ProMark prostate cancer test.
85	Was mutational analysis performed on any of the following genes? (select all that apply)		HEK2 D PALB2 OXB1 D Unknown ANCA	6820040	Select all genes for which mutational analysis was performed.
86	Was a mutation in BRCA1 identified?	□ Yes □ No □ Unknown		2437532	Indicate whether a mutation in BRCA1 was identified. Note: If a mutation was identified, proceed to Question 86a, otherwise, skip to Question 87.
86a	Specify BRCA1 mutation			6690688	Specify the BRCA1 variant identified as the result of mutational analysis.
86b	Tissue submitted for mutational analysis	<ul><li>□ Blood</li><li>□ Normal tissue</li></ul>	<ul><li>Tumor</li><li>Other (specify)</li></ul>	6820004	Indicate the kind of tissue submitted for mutational analysis. <i>Note: If the</i> <i>tissue is not listed, proceed to Question</i> <i>86c, otherwise, skip to Question 87.</i>
86c	Other tissue submitted for mutational analysis			6820011	If not included in the previous list, provide the kind of tissue submitted for mutational analysis.
87	Was a mutation in BRCA2 identified?	☐ Yes ☐ No ☐ Unknown		2437543	Indicate whether a mutation in BRCA2 was identified. <i>Note: If a</i> <i>mutation was identified, proceed to</i> <i>Question 87a, otherwise, skip to</i> <i>Question 88.</i>
87a	Specify BRCA2 mutation			6690693	Specify the BRCA2 variant identified as the result of mutational analysis.
87b	Tissue submitted for mutational analysis	<ul><li>Blood</li><li>Normal tissue</li></ul>	<ul><li>Tumor</li><li>Other (specify)</li></ul>	6820004	Indicate the kind of tissue submitted for mutational analysis. <i>Note: If the</i> <i>tissue is not listed, proceed to Question</i> 87c, otherwise, skip to Question 88.



Enrollment: Prostate

\_\_\_\_\_ HCMI Identifier (ID3): \_\_\_ Completion Date (MM/DD/YYYY): \_\_\_

Question	Question Text	Data Entry Options		CDE ID	Instruction Text
87c	Other tissue submitted			6820011	If not included in the previous list,
	for mutational analysis				provide the kind of tissue submitted
					for mutational analysis.
88	Was a mutation in HOXB1	□ Yes		6840947	Indicate whether a mutation in
	identified?				HOXB1 was identified. <i>Note: If a</i>
					mutation was identified, proceed to Question 88a, otherwise, skip to
					Question 89.
88a	Specify HOXB1 mutation			6840948	Specify the HOXB1 variant identified
					as the result of mutational analysis.
88b	Tissue submitted for			6820004	Indicate the kind of tissue submitted
	mutational analysis	Blood	Tumor		for mutational analysis. Note: If the
		Normal tissue	Other (specify)		tissue is not listed, proceed to Question
88c	Other tissue submitted			6820011	88c, otherwise, skip to Question 89. If not included in the previous list,
000	for mutational analysis			0820011	provide the kind of tissue submitted
	for matational analysis				for mutational analysis.
89	Was a mutation in ATM			6005210	Indicate whether a mutation in ATM
	identified?	□ Yes □ No			was identified. Note: If a mutation was
		Unknown			identified, proceed to Question 89a,
					otherwise, skip to Question 90.
89a	Specify ATM mutation			6820015	Specify the ATM variant identified as
	<b>T</b> 1 11 16				the result of mutational analysis.
89b	Tissue submitted for		Tumor	6820004	Indicate the kind of tissue submitted
	mutational analysis	Normal tissue	<ul> <li>Other (specify)</li> </ul>		for mutational analysis. Note: If the tissue is not listed, proceed to Question
					89c, otherwise, skip to Question 90.
89c	Other tissue submitted			6820011	If not included in the previous list,
	for mutational analysis				provide the kind of tissue submitted
					for mutational analysis.
90	Was a mutation in PALB2			6820021	Indicate whether a mutation in
	identified?	□ Yes □ No			PALB2 was identified. <i>Note: If a</i>
					mutation was identified, proceed to Question 90a, otherwise, skip to
					Question 91.
90a	Specify PALB2 mutation			6820016	Specify the PALB2 variant identified
					as the result of mutational analysis.
90b	Tissue submitted for			6820004	Indicate the kind of tissue submitted
	mutational analysis	□ Blood	Tumor		for mutational analysis. Note: If the
		Normal tissue	Other (specify)		tissue is not listed, proceed to Question
90c	Other tissue submitted			6820011	<i>90c, otherwise, skip to Question 91.</i> If not included in the previous list,
500	for mutational analysis			0020011	provide the kind of tissue submitted
	,				for mutational analysis.
91	Was a mutation in FANCA			6820022	Indicate whether a mutation in
	identified?	□ Yes			FANCA was identified. Note: If a
		D No			mutation was identified, proceed to
		Unknown			Question 91a, otherwise, skip to
91a	Specify FANCA mutation			6820017	<i>Question 92.</i> Specify the FANCA variant identified
510	Specify I Alter Indiation			0020017	as the result of mutational analysis.
91b	Tissue submitted for			6820004	Indicate the kind of tissue submitted
	mutational analysis	Blood	Tumor		for mutational analysis. Note: If the
		Normal tissue	Other (specify)		tissue is not listed, proceed to Question
	Otherster I the I			60000000	91c, otherwise, skip to Question 92.
91c	Other tissue submitted			6820011	If not included in the previous list,
	for mutational analysis				provide the kind of tissue submitted for mutational analysis.
					isi matational analysis.

## Enrollment: Prostate

\_\_\_\_\_ HCMI Identifier (ID3): \_\_\_\_ Completion Date (MM/DD/YYYY): \_\_\_\_

Question	Question Text	Data Entry Options		CDE ID	Instruction Text
92	Was a mutation in CHEK2 identified?	□ Yes □ No □ Unknown		6005214	Indicate whether a mutation in CHEK2 was identified. Note: If a mutation was identified, proceed to Question 92a, otherwise, skip to Question 93.
92a	Specify CHEK2 mutation			6832296	Specify the type of CHEK2 variant identified as the result of mutational analysis.
92b	Tissue submitted for mutational analysis	<ul><li>Blood</li><li>Normal tissue</li></ul>	<ul><li>Tumor</li><li>Other (specify)</li></ul>	6820004	Indicate the kind of tissue submitted for mutational analysis. <i>Note: If the</i> <i>tissue is not listed, proceed to Question</i> <i>92c, otherwise, skip to Question 93.</i>
92c	Other tissue submitted for mutational analysis			6820011	If not included in the previous list, provide the kind of tissue submitted for mutational analysis.
93	Was AR-V7 RNA ISH (RISH) performed?	☐ Yes ☐ No ☐ Unknown		6821464	Indicate whether or not in situ hybridization for AR-V7 RNA (RISH) was performed. <i>Note: If AR-V7 RNA</i> <i>ISH was performed, proceed to Question</i> <i>94, otherwise, skip to Question 95.</i>
94	AR-V7 RNA ISH result	<ul> <li>Positive</li> <li>Negative</li> <li>Equivocal</li> </ul>		6821465	Indicate the result of AR-V7 RNA testing by in situ hybridization.
95	Was AR-V7 RT-PCR performed?	□ Yes □ No □ Unknown		6821476	Indicate whether AR-V7 messenger RNA Reverse Transcriptase- Polymerase Chain Reaction was performed. Note: If AR-V7 RT-PCR was performed, proceed to Question 96, otherwise, skip to Question 97.
96	AR-V7 RT-PCR result	<ul><li>Positive</li><li>Negative</li><li>Equivocal</li></ul>		6821477	Indicate the result of the AR-V7 messenger RNA Reverse Transcriptase-Polymerase Chain Reaction test.
97	Was IHC performed for any of the following proteins? (select all that apply)	AR AR-V7 MLH1 MSH2	<ul> <li>PMS2</li> <li>MSH6</li> <li>PTEN</li> <li>Unknown</li> </ul>	6820057	Select all the proteins for which immunohistochemistry (IHC) was performed.
98	AR expression by IHC	<ul> <li>Positive</li> <li>Negative</li> <li>Equivocal</li> </ul>		6788031	Indicate the status of the Androgen Receptor protein expression using immunohistochemistry.
99	AR-V7 expression by IHC	<ul> <li>Positive</li> <li>Negative</li> <li>Equivocal</li> </ul>		6821495	Indicate the status of the AR-V7 protein expression using immunohistochemistry.
100	MLH1 expression by IHC	<ul> <li>Positive</li> <li>Negative</li> <li>Equivocal</li> </ul>		6063668	Indicate the status of the MLH1 protein expression using immunohistochemistry.
101	MSH2 expression by IHC	Positive     Negative     Equivocal		6063669	Indicate the status of the MSH2 protein expression using immunohistochemistry.
102	PMS2 expression by IHC	<ul> <li>Positive</li> <li>Negative</li> <li>Equivocal</li> </ul>		6063670	Indicate the status of the PMS2 protein expression using immunohistochemistry.
103	MSH6 expression by IHC	<ul> <li>Positive</li> <li>Negative</li> <li>Equivocal</li> </ul>		6063671	Indicate the status of the MSH6 protein expression using immunohistochemistry.
104	PTEN expression by IHC	<ul> <li>Positive</li> <li>Negative</li> <li>Equivocal</li> </ul>		6063672	Indicate the status of the PTEN protein expression using immunohistochemistry.

Tissue Source Site (TSS) Name: \_\_\_\_\_\_ Completed By: \_\_\_\_\_

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Question	Question Text	Data Entry Options	CDE ID	Instruction Text
105	MLH1 promoter	Present	6033150	Indicate the methylation status of
	methylation status	□ Absent		the MLH1 promoter.
		Indeterminate		
		Not assessed		
106	MMR status	Evidence of MMR mutation by sequencing	6002208	Indicate the patient's Mismatch
100	initial status	<ul> <li>Evidence of MMR protein loss by IHC</li> </ul>	0002200	Repair (MMR) gene mutation status
		□ MMR loss evidence hypermutation		Repair (Minin) gene matation status
		phenotype (>10 mutations/Mb)		
		□ No evidence of MMR alteration		
		Not performed		
-	mor Sample Information			
107	Are you submitting a			If yes, proceed to question 108.
	primary tumor tissue			If submitting a metastatic/recurrent
	sample for this case?	□ No		tumor biospecimen, proceed to Question
4.00	Duine and the second		6504265	142.
108	Primary tumor		6584265	Please provide a number to identify
	biospecimen ordinal			which biospecimen this is in the
				sequence. Note: This number should be
				"1".
109	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.
110	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.
111	Sample represents		6584730	Does this primary tumor specimen
	primary diagnosis?			represent the PRIMARY DIAGNOSIS
	printery and prosise	☐ Yes		for this Case ID3? <i>Note: If no, proceed</i>
		□ No		to Question 112, otherwise, skip to
				Question 113.
112	Specify the ICD-10 code		3226287	Provide the ICD-10 code for the
			0110107	primary tumor used to generate the
				model submitted to HCMI.
113	Tumor tissue sample	Cryopreserved	5432521	Provide the method used to
115	preservation method		5452521	preserve the tumor tissue sample
	preservation method	Frozen		collected for molecular
				characterization.
		□ Snap frozen		
114	Other anatomic site from		4214629	Select the anatomic site of the
	which the tumor was			tumor tissue sample used to
	obtained	Prostate		generate the model for HCMI. Note:
		Other (specify)		If the tissue or organ not listed, proceed
				to Question 114a. Otherwise, skip to
				Question 115.
114a	Other anatomic site from		5946219	If not provided in the previous list,
	which the tumor was		1	provide the anatomic site of the
	obtained: Lip and oral			tumor tissue sample used to
	cavity			generate the model for HCMI.
115	Method of cancer sample		3103514	Provide the procedure performed to
	procurement	Needle biopsy		obtain the primary tumor tissue.
		TURP including all forms of enucleation	1	Note: If the method of procurement is
		Subtotal prostatectomy		not listed, proceed to Question 115a,
		Radical prostatectomy	1	otherwise, skip to Question 116. If TURF
		□ Other (specify)	1	is selected, proceed to Question 116,
				otherwise, skip to Question 122.
115a	Specify the other method		2006730	Specify the procedure performed to
	of tumor sample		1	obtain the primary tumor tissue, if
		1	1	not included in the previous list.



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Question	Question Text	Data Entry Options	CDE ID	Instruction Text
116	For TURP specimens,		2431688	Provide the number of chips
	number of positive chips			involved by invasive prostate
				carcinoma, in a transurethral
				resection specimen.
117	For TURP specimens,		2431624	Provide the total number of chips
/	number of total chips		2101021	in a specimen of prostate removed
	number of total chips			by transurethral resection.
118	For TURP specimens,		2431904	Provide the percentage of prostatic
110			2451904	
	estimated percentage of	24		tissue which is involved by invasive
	prostatic tissue involved	%		prostate carcinoma, in a
	by tumor			transurethral resection specimen.
119	For enucleation		6831339	Provide the percentage of prostatic
	specimens, estimated			tissue which is involved by tumor.
	percentage of prostatic	%		
	tissue involved by tumor			
120	For enucleation		6831608	Provide the numeric value in mm
	specimens, tumor size			for the size of the dominant (if
	(dominant nodule, if	mm		present) tumor nodule.
	present)			
121	For enucleation		6831609	Provide the numeric value in mm
	specimens, additional			for an additional dimension of the
	dimensions (millimeters)	mm		tumor.
122	Number of days from		3288495	Provide the number of days from the
122	index date to date of		5266495	index date to the date of the
	tumor sample			procedure that produced the tumor
	procurement			tissue submitted for HCMI.
123	Tumor tissue type	Primary	3288124	Provide the primary tumor tissue
		Additional Primary		type for this sample.
	umor Model Information	I	6504506	
124	Primary model		6594596	Please provide a number to identify
			6594596	which biospecimen this is in the
-	Primary model		6594596	which biospecimen this is in the sequence. <i>Note: This number is</i>
-	Primary model		6594596	which biospecimen this is in the
	Primary model		6594596	which biospecimen this is in the sequence. <i>Note: This number is</i> <i>expected to be "1".</i> Please provide the CMDC model ID
124	Primary model biospecimen ordinal			which biospecimen this is in the sequence. <i>Note: This number is expected to be "1".</i>
124	Primary model biospecimen ordinal			which biospecimen this is in the sequence. <i>Note: This number is</i> <i>expected to be "1".</i> Please provide the CMDC model ID
124	Primary model biospecimen ordinal			which biospecimen this is in the sequence. Note: This number is expected to be "1". Please provide the CMDC model ID for this sample as it will appear on
124	Primary model biospecimen ordinal CMDC model ID		6586036	which biospecimen this is in the sequence. Note: This number is expected to be "1". Please provide the CMDC model ID for this sample as it will appear on tubes and the Sample Submission Form transmitted to the BPC.
124	Primary model biospecimen ordinal CMDC model ID BPC submitter ID (if			which biospecimen this is in the sequence. Note: This number is expected to be "1". Please provide the CMDC model ID for this sample as it will appear on tubes and the Sample Submission Form transmitted to the BPC. Please provide the BPC-generated ID
124	Primary model biospecimen ordinal CMDC model ID		6586036	which biospecimen this is in the sequence. Note: This number is expected to be "1". Please provide the CMDC model ID for this sample as it will appear on tubes and the Sample Submission Form transmitted to the BPC. Please provide the BPC-generated ID for this sample as it will appear on
124	Primary model biospecimen ordinal CMDC model ID BPC submitter ID (if		6586036	which biospecimen this is in the sequence. Note: This number is expected to be "1". Please provide the CMDC model ID for this sample as it will appear on tubes and the Sample Submission Form transmitted to the BPC. Please provide the BPC-generated ID for this sample as it will appear on the Sample Submission Form
124 125 126	Primary model biospecimen ordinal CMDC model ID BPC submitter ID (if available)		6586036	which biospecimen this is in the sequence. Note: This number is expected to be "1". Please provide the CMDC model ID for this sample as it will appear on tubes and the Sample Submission 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.
124	Primary model biospecimen ordinal CMDC model ID BPC submitter ID (if available) Model represents		6586036	<ul> <li>which biospecimen this is in the sequence. Note: This number is expected to be "1".</li> <li>Please provide the CMDC model ID for this sample as it will appear on tubes and the Sample Submission Form transmitted to the BPC.</li> <li>Please provide the BPC-generated ID for this sample as it will appear on the Sample Submission Form transmitted to the BPC.</li> <li>Does this model represent the</li> </ul>
124 125 126 127	Primary model biospecimen ordinal CMDC model ID BPC submitter ID (if available) Model represents primary diagnosis?		6586036 6584919 6584730	<ul> <li>which biospecimen this is in the sequence. Note: This number is expected to be "1".</li> <li>Please provide the CMDC model ID for this sample as it will appear on tubes and the Sample Submission Form transmitted to the BPC.</li> <li>Please provide the BPC-generated ID for this sample as it will appear on the Sample Submission Form transmitted to the BPC.</li> <li>Does this model represent the primary diagnosis for this Case ID3?</li> </ul>
124 125 126	Primary model biospecimen ordinal CMDC model ID BPC submitter ID (if available) Model represents primary diagnosis? Model's primary tumor		6586036	which biospecimen this is in the sequence. Note: This number is expected to be "1". Please provide the CMDC model ID for this sample as it will appear on tubes and the Sample Submission 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. Does this model represent the primary diagnosis for this Case ID3? Enter the CMDC Sample ID of the
124 125 126 127	Primary model biospecimen ordinal CMDC model ID BPC submitter ID (if available) Model represents primary diagnosis?		6586036 6584919 6584730	which biospecimen this is in the sequence. Note: This number is expected to be "1". Please provide the CMDC model ID for this sample as it will appear on tubes and the Sample Submission 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. Does this model represent the primary diagnosis for this Case ID3? Enter the CMDC Sample ID of the PRIMARY TUMOR TISSUE from which
124 125 126 127 128	Primary model biospecimen ordinal CMDC model ID BPC submitter ID (if available) Model represents primary diagnosis? Model's primary tumor tissue CMDC sample ID		6586036 6584919 6584730 6586035	which biospecimen this is in the sequence. Note: This number is expected to be "1". Please provide the CMDC model ID for this sample as it will appear on tubes and the Sample Submission 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. Does this model represent the primary diagnosis for this Case ID3? Enter the CMDC Sample ID of the PRIMARY TUMOR TISSUE from which this model is derived.
124 125 126 127	Primary model biospecimen ordinal CMDC model ID BPC submitter ID (if available) Model represents primary diagnosis? Model's primary tumor tissue CMDC sample ID Model's primary tumor		6586036 6584919 6584730	<ul> <li>which biospecimen this is in the sequence. Note: This number is expected to be "1".</li> <li>Please provide the CMDC model ID for this sample as it will appear on tubes and the Sample Submission Form transmitted to the BPC.</li> <li>Please provide the BPC-generated ID for this sample as it will appear on the Sample Submission Form transmitted to the BPC.</li> <li>Dease provide the BPC-generated ID for this sample as it will appear on the Sample Submission Form transmitted to the BPC.</li> <li>Does this model represent the primary diagnosis for this Case ID3?</li> <li>Enter the CMDC Sample ID of the PRIMARY TUMOR TISSUE from which this model is derived.</li> <li>Enter the biospecimen ordinal of the sample of the primary diagnose form the sample submised to the primary the sample for the primary the primary</li></ul>
124 125 126 127 128	Primary model biospecimen ordinal CMDC model ID BPC submitter ID (if available) Model represents primary diagnosis? Model's primary tumor tissue CMDC sample ID		6586036 6584919 6584730 6586035	<ul> <li>which biospecimen this is in the sequence. Note: This number is expected to be "1".</li> <li>Please provide the CMDC model ID for this sample as it will appear on tubes and the Sample Submission Form transmitted to the BPC.</li> <li>Please provide the BPC-generated ID for this sample as it will appear on the Sample Submission Form transmitted to the BPC.</li> <li>Dease provide the BPC-generated ID for this sample as it will appear on the Sample Submission Form transmitted to the BPC.</li> <li>Does this model represent the primary diagnosis for this Case ID3?</li> <li>Enter the CMDC Sample ID of the PRIMARY TUMOR TISSUE from which this model is derived.</li> <li>Enter the biospecimen ordinal of the primary diagnosis for the sample submised.</li> </ul>
124 125 126 127 128 129	Primary model biospecimen ordinal CMDC model ID BPC submitter ID (if available) Model represents primary diagnosis? Model's primary tumor tissue CMDC sample ID Model's primary tumor biospecimen ordinal		6586036 6584919 6584730 6586035	<ul> <li>which biospecimen this is in the sequence. Note: This number is expected to be "1".</li> <li>Please provide the CMDC model ID for this sample as it will appear on tubes and the Sample Submission Form transmitted to the BPC.</li> <li>Please provide the BPC-generated ID for this sample as it will appear on the Sample Submission Form transmitted to the BPC.</li> <li>Dease provide the BPC-generated ID for this sample as it will appear on the Sample Submission Form transmitted to the BPC.</li> <li>Does this model represent the primary diagnosis for this Case ID3?</li> <li>Enter the CMDC Sample ID of the PRIMARY TUMOR TISSUE from which this model is derived.</li> <li>Enter the biospecimen ordinal of the primary diagnosis for the sample submised.</li> </ul>
124 125 126 127 128 129	Primary model biospecimen ordinal CMDC model ID BPC submitter ID (if available) Model represents primary diagnosis? Model's primary tumor tissue CMDC sample ID Model's primary tumor		6586036 6584919 6584730 6586035	which biospecimen this is in the sequence. Note: This number is expected to be "1". Please provide the CMDC model ID for this sample as it will appear on tubes and the Sample Submission 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. Does this model represent the primary diagnosis for this Case ID3? Enter the CMDC Sample ID of the PRIMARY TUMOR TISSUE from which this model is derived. Enter the biospecimen ordinal of the PRIMARY TUMOR TISSUE from which
124 125 126 127 128 129	Primary model biospecimen ordinal CMDC model ID BPC submitter ID (if available) Model represents primary diagnosis? Model's primary tumor tissue CMDC sample ID Model's primary tumor biospecimen ordinal		6586036 6584919 6584730 6586035	which biospecimen this is in the sequence. Note: This number is expected to be "1". Please provide the CMDC model ID for this sample as it will appear on tubes and the Sample Submission 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. Does this model represent the primary diagnosis for this Case ID3? Enter the CMDC Sample ID of the PRIMARY TUMOR TISSUE from which this model is derived. Enter the biospecimen ordinal of the PRIMARY TUMOR TISSUE from which
124 125 126 127 128 129 Treatment	Primary model biospecimen ordinal CMDC model ID BPC submitter ID (if available) Model represents primary diagnosis? Model's primary tumor tissue CMDC sample ID Model's primary tumor biospecimen ordinal	□ No 	6586036 6584919 6584730 6586035 6584265	which biospecimen this is in the sequence. Note: This number is expected to be "1". Please provide the CMDC model ID for this sample as it will appear on tubes and the Sample Submission 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. Does this model represent the primary diagnosis for this Case ID3? Enter the CMDC Sample ID of the PRIMARY TUMOR TISSUE from which this model is derived. Enter the biospecimen ordinal of the PRIMARY TUMOR TISSUE from which this model is derived.
124 125 126 127 128 129 Treatment	Primary model biospecimen ordinal CMDC model ID BPC submitter ID (if available) Model represents primary diagnosis? Model's primary tumor tissue CMDC sample ID Model's primary tumor biospecimen ordinal tinformation History of neoadjuvant	□ No □ Yes; radiation prior to resection	6586036 6584919 6584730 6586035 6584265	which biospecimen this is in the sequence. Note: This number is expected to be "1". Please provide the CMDC model ID for this sample as it will appear on tubes and the Sample Submission Form transmitted to the BPC. Please provide the BPC-generated IE for this sample as it will appear on the Sample Submission Form transmitted to the BPC. Does this model represent the primary diagnosis for this Case ID3? Enter the CMDC Sample ID of the PRIMARY TUMOR TISSUE from which this model is derived. Enter the biospecimen ordinal of the PRIMARY TUMOR TISSUE from which this model is derived.
124 125 126 127 128 129 Treatment	Primary model biospecimen ordinal CMDC model ID BPC submitter ID (if available) Model represents primary diagnosis? Model's primary tumor tissue CMDC sample ID Model's primary tumor biospecimen ordinal tinformation History of neoadjuvant	□ No □ Yes; radiation prior to resection □ Yes; pharmaceutical treatment prior to	6586036 6584919 6584730 6586035 6584265	which biospecimen this is in the sequence. Note: This number is expected to be "1". Please provide the CMDC model ID for this sample as it will appear on tubes and the Sample Submission 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. Does this model represent the primary diagnosis for this Case ID3? Enter the CMDC Sample ID of the PRIMARY TUMOR TISSUE from which this model is derived. Enter the biospecimen ordinal of the PRIMARY TUMOR TISSUE from which this model is derived.
124 125 126 127 128 129 Treatment	Primary model biospecimen ordinal CMDC model ID BPC submitter ID (if available) Model represents primary diagnosis? Model's primary tumor tissue CMDC sample ID Model's primary tumor biospecimen ordinal tinformation History of neoadjuvant	□ No □ Yes; radiation prior to resection □ Yes; pharmaceutical treatment prior to resection	6586036 6584919 6584730 6586035 6584265	which biospecimen this is in the sequence. Note: This number is expected to be "1". Please provide the CMDC model ID for this sample as it will appear on tubes and the Sample Submission Form transmitted to the BPC. Please provide the BPC-generated IE for this sample as it will appear on the Sample Submission Form transmitted to the BPC. Does this model represent the primary diagnosis for this Case ID3? Enter the CMDC Sample ID of the PRIMARY TUMOR TISSUE from which this model is derived. Enter the biospecimen ordinal of the PRIMARY TUMOR TISSUE from which this model is derived.
124 125 126 127 128 129 Treatment	Primary model biospecimen ordinal CMDC model ID BPC submitter ID (if available) Model represents primary diagnosis? Model's primary tumor tissue CMDC sample ID Model's primary tumor biospecimen ordinal tinformation History of neoadjuvant	□ No □ Yes; radiation prior to resection □ Yes; pharmaceutical treatment prior to	6586036 6584919 6584730 6586035 6584265	which biospecimen this is in the sequence. Note: This number is expected to be "1". Please provide the CMDC model ID for this sample as it will appear on tubes and the Sample Submission 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. Does this model represent the primary diagnosis for this Case ID3? Enter the CMDC Sample ID of the PRIMARY TUMOR TISSUE from which this model is derived. Enter the biospecimen ordinal of the PRIMARY TUMOR TISSUE from which this model is derived.

Tissue Source Site (TSS) Name: \_\_\_\_\_\_ Completed By: \_\_\_\_\_

HCMI Identifier (ID3): \_\_\_\_\_ Completion Date (MM/DD/YYYY): \_\_\_\_\_

Question	Question Text	Data Entry Options		CDE ID	Instruction Text
131	Neoadjuvant chemotherapy type	<ul> <li>Cytotoxic chemothe</li> <li>Hormonal</li> <li>Immunotherapy (ce checkpoint)</li> <li>Targeted therapy (s and targeted antibo</li> <li>Not applicable</li> </ul>	llular and immune mall molecule inhibitors	5832928	Select all neoadjuvant chemotherapy types that were administered to the patient. Note: Cytotoxic chemotherapy is addressed in Questions 132-133. Hormone therapy is addressed in Questions 134-135. Immunotherapy is addressed in Questions 136-137. Targeted therapy is addressed in Questions 138-139.
132	Neoadjuvant chemotherapeutic regimen	<ul> <li>Etoposide with cispl</li> <li>Etoposide with carb</li> <li>Docetaxel</li> <li>Cabazitaxel</li> <li>Prednisone</li> <li>Decadron (dexamet</li> <li>Androgen deprivation</li> <li>Other (specify)</li> </ul>	oplatin hasone)	2853313	Select all chemotherapeutics used for neoadjuvant therapy. Note: If neoadjuvant chemotherapy was not given, skip to Question 134. If the neoadjuvant chemotherapeutic regimen is not listed, proceed to Question 132a, otherwise, skip to Question 133.
132a	Other neoadjuvant chemotherapeutic regimen			62694	If the neoadjuvant therapy is not included in the provided list, specify neoadjuvant therapies administered.
133	Days to neoadjuvant chemotherapy treatment from index date			5102411	Provide the number of days from index date to the date of treatment with neoadjuvant chemotherapy.
134	Hormone therapy	<ul> <li>Leuprolide</li> <li>Goserelin</li> <li>Triptorelin</li> <li>Histrelin</li> <li>Degarelix</li> <li>Orteranel</li> <li>Abiraterone</li> <li>Flutamide</li> </ul>	<ul> <li>Bicalutamide</li> <li>Nilutamide</li> <li>Enzalutamide</li> <li>Apalutamide</li> <li>Darolutamide</li> <li>Itraconazole</li> <li>Ketoconazole</li> <li>Other (specify)</li> </ul>	6819511	Select the hormone therapy administered to the patient. Note: If hormone therapy was not administered, skip to Question 136. If the hormone therapy is not listed, proceed to Question 134a, otherwise, skip to Question 135.
134a	Other hormone therapy			2405358	If the hormone therapy is not included in the provided list, specify hormone therapy.
135	Days to hormone therapy treatment from index date			5102411	Provide the number of days from index date to the date of treatment with hormone therapy.
136	Immunotherapy	<ul> <li>Provenge</li> <li>Pembrolizumab</li> <li>Nivolumab</li> <li>Ipilimumab</li> <li>Other (specify)</li> </ul>		6819519	Select the immunotherapy administered to the patient. Note: If immunotherapy was not administered, skip to Question 138. If the immunotherapy is not listed, proceed to Question 136a, otherwise, skip to Question 137.
136a	Specify other immunotherapy			2953828	Provide the name of the immunotherapy administered to the patient.
137	Days to immunotherapy treatment from index date		-	5102411	Provide the number of days from the index date to the date of treatment with immunotherapy.
138	Targeted Therapy	<ul> <li>Bevacizumab</li> <li>AZD5363</li> <li>MK2206</li> <li>Olaparib</li> </ul>	<ul> <li>Rucaparib</li> <li>Niraparib</li> <li>Other (specify)</li> </ul>	6819512	Select the targeted therapy administered to the patient. Note: If targeted therapy was not administered, skip to Question 140. If the targeted therapy regimen is not listed, proceed to Question 138a, otherwise, skip to Question 139.
138a	Specify targeted therapy			4308476	Provide the name of the targeted therapy administered to the patient.

Enrollment: Prostate	
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\_\_\_\_\_HCMI Identifier (ID3): \_\_\_\_\_ Completion Date (MM/DD/YYYY): \_\_\_\_

Question **Question Text Data Entry Options** CDE ID Instruction Text 139 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. 140 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 142. If the radiation therapy is not WBRT listed, proceed to Question 140a, □ IMRT Other (specify) otherwise, skip to Question 141. □ Proton Beam □ Unspecified □ Not applicable 2195477 140a Other radiation therapy If the radiation therapy type is not included in the provided list, specify the type. 141 5102411 Provide the number of days from the Days to radiation treatment from index index date to the date of treatment date with radiation therapy. Metastatic/Recurrent Tumor Biospecimen Information 142 Are you submitting a Indicate whether a metastatic/recurrent metastatic/recurrent tumor □ Yes tumor tissue sample? biospecimen was collected for this □ No ID3 case. Note: If yes, proceed to Question 143. If submitting an OTHER tissue sample, proceed to Question 234. 143 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. 144 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. 145 BPC submitter ID (if 6584919 Please provide the BPC-generated ID for this sample as it will appear on available) the Sample Submission Form transmitted to the BPC. 146 Metastatic/recurrent □ Cryopreserved 5432521 Provide the method used to tumor tissue sample □ FFPF preserve the metastatic/recurrent preservation method tumor tissue sample collected for □ Frozen molecular characterization. □ ОСТ □ Snap frozen 147 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 148 Method of metastatic/ □ Core needle biopsy 6587389 Indicate the procedure performed to recurrent cancer sample □ Fine needle aspirate obtain the metastatic/recurrent procurement □ TURP including all forms of enucleation tumor tissue. Note: If the method of procurement is not listed, proceed to □ Salvaged radical prostatectomy Question 148a, otherwise, skip to □ Salvaged lymph node dissection Question 149. □ Metastasectomy □ Other Method (specify) 148a Other method of cancer 6587390 If the procedure performed to sample procurement obtain the tumor tissue is not included in the provided list, specify the procedure.

#### Tissue Source Site (TSS) Name: \_\_\_\_ Completed By:



Enrollment: Prostate \_\_\_\_\_ HCMI Identifier (ID3): \_\_\_\_

Question	Question Text	Data Entry Options		CDE ID	Instruction Text
149	For TURP specimens, number of positive chips			2431688	Provide the number of chips involved by invasive prostate carcinoma, in a transurethral resection specimen.
150	For TURP specimens, number of total chips			2431624	Provide the total number of chips in a specimen of prostate removed by transurethral resection.
151	For TURP specimens, estimated percentage of prostatic tissue involved by tumor		%	2431904	Provide the percentage of prostatic tissue which is involved by invasive prostate carcinoma, in a transurethral resection specimen.
152	For enucleation specimens, estimated percentage of prostatic tissue involved by tumor		%	6831339	Provide the percentage of prostatic tissue which is involved by tumor.
153	For enucleation specimens, tumor size (dominant nodule, if present)		mm	6831608	Provide the numeric value in mm for the size of the dominant (if present) tumor nodule.
154	For enucleation specimens, additional dimensions (millimeters)		mm	6831609	Provide the numeric value in mm for an additional dimension of the tumor.
155	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.
156	Metastatic/recurrent site	<ul> <li>Prostate</li> <li>Lymph node(s)</li> <li>Bone</li> <li>Lung</li> </ul>	<ul><li>Liver</li><li>Brain</li><li>Other (specify)</li></ul>	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 156a, otherwise, skip to Question 157.
156a	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.
157	Site of relapse	□ Local □ Regional	<ul><li>Distant</li><li>Not applicable</li></ul>	2002506	If the primary tumor relapsed, provide the site of relapse.
158	ICD-10 code			3226287	Provide the ICD-10 code for the metastatic/recurrent tumor used to generate the model submitted to HCMI.
159	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.
160	Maintenance and/or consolidation therapy administered prior to collection of metastatic/ recurrent tissue			6119066	Provide the name(s) of the maintenance and/or consolidation therapy administered to the patient prior to the collection of the metastatic/recurrent tissue used to develop the model.
161	Days to start of maintenance and/or consolidation therapy from index date			5102411	Provide the number of days from the index date to the date maintenance and/or consolidation therapy started.

\_\_\_\_\_ HCMI Identifier (ID3): \_\_\_\_ Completion Date (MM/DD/YYYY): \_\_\_\_\_

Question	Question Text	Data Entry Options	CDE ID	Instruction Text
162	Days to last known administration date of maintenance and/or consolidation therapy from index date		5102431	Provide the number of days from the index date to the last known date of maintenance and/or consolidation therapy.
163	Is the patient still receiving treatment?	□ Yes □ No □ Unknown	6379568	Indicate whether the patient is still undergoing maintenance and/or consolidation therapy.
164	Disease status	<ul> <li>No evidence of disease</li> <li>Progressive disease</li> <li>Stable disease</li> <li>Unknown</li> </ul>	2188290	Provide the disease status following maintenance and/or consolidation therapy.
Prognostic	/Predictive/Lifestyle Feature	es for Metastatic/Recurrent Tumor Prognosis or R	esponsiveness	to Treatment
165	Lymphovascular invasion present?	<ul> <li>☐ Yes</li> <li>☐ No</li> <li>☐ Indeterminate</li> <li>☐ Unknown</li> </ul>	64727	Indicate whether large vessel (vascular) invasion or small, thin- walled (lymphatic) invasion was detected in the primary tumor.
166	Perineural invasion present?	Yes No Unknown	64181	Indicate whether perineural invasion or infiltration of tumor or cancer is present.
167	Number of positive lymph nodes		89	Provide the number of lymph nodes with disease involvement.
168	Number of lymph nodes tested		3	Provide the total number of lymph nodes tested for the presence of cancer cells.
169	PSA value (ng/mL) at progression	ng/mL	1817	Provide the patient's measured laboratory value of PSA (prostate specific antigen) in ng/mL at the time when progression or biochemical failure is reported.
170	For metastatic tumor biopsies, was the site positive by imaging prior to biopsy?	□ Yes □ No □ Unknown	6819981	Indicate whether the metastatic tumor site was positive by imaging prior to biopsy. Note: If imaging identified the metastatic lesion, proceed to Question 171, otherwise, skip to Question 173.
171	If yes, indicate the imaging method used to identify the metastatic site biopsied	<ul> <li>MRI</li> <li>PET (specify)</li> <li>CT scan</li> <li>99mTc bone scintiscanning</li> <li>Other (specify)</li> </ul>	6819586	Indicate the imaging method(s) used to identify the metastatic site biopsied. Note: If the imaging method is not listed, proceed to Question 171a, otherwise, skip to Question 173. If PET scan was used, proceed to Question 172, otherwise, skip to Question 173.
171a	Other imaging method(s) used to identify the metastatic site biopsied		6819611	If not included in the previous list, specify the kind of subsequent imaging that identified the metastatic site biopsied.
172	For PET scans, indicate the tracer used	<ul> <li>Axumin</li> <li>Choline</li> <li>Acetate</li> <li>PSMA</li> <li>Sodium fluoride</li> <li>Other (specify)</li> </ul>	6819581	Indicate the kind of tracer used in Positron Emission Tomography (PET) imaging. Note: If the tracer is not listed, proceed to Question 172a, otherwise, skip to Question 173.
172a	Other PET scan tracer used	· · · · · · · · · · · · · · · · · · ·	6819582	If not included in the previous list, specify the kind of tracer used in Positron Emission Tomography (PET) imaging.

V1.0

Enrollment: Prostate

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Question	Question Text	Data Entry Options	CDE ID	Instruction Text
173	Was the presence of		6829555	Indicate whether a test for
	circulating tumor cells (CTCs) tested?	□ Yes □ No □ Unknown		circulating tumor cells was performed. <i>Note: If CTCs are present,</i> proceed to Question 174, otherwise, skip to Question 179.
174	Circulating tumor cell test result	<ul><li>Present</li><li>Absent</li></ul>	6819986	Indicate whether circulating tumor cells are present or absent. <i>Note: If</i> <i>CTCs were present, proceed to Question</i> <i>175, otherwise, skip to Question 179.</i>
175	Number of circulating tumor cells (CTCs)		3145287	Provide the numeric count of circulating tumor cells found in a specimen of the patient's peripheral blood.
176	Blood sample volume used to analyze number of CTC cells		3219439	Provide the volume of the blood sample used to detect circulating tumor cells.
177	Was AR-V7 tested in circulating tumor cells?	Yes No Unknown	6821457	Indicate whether or not AR-V7 was tested in circulating tumor cells. Note: If AR-V7 was tested in CTCs, proceed to Question 178, otherwise, skip to Question 179.
178	Circulating tumor cell AR- V7 result	<ul><li>Present</li><li>Absent</li></ul>	6821463	Indicate the result of the test for AR- V7 in circulating tumor cells.
179	Was mutational analysis performed on any of the following genes? (select all that apply)	BRCA1CHEK2PALB2BRCA2HOXB1UnknownATMFANCA	6820040	Select all genes for which mutational analysis was performed.
180	Was a mutation in BRCA1 identified?	□ Yes □ No □ Unknown	2437532	Indicate whether a mutation in BRCA1 was identified. Note: If a mutation was identified, proceed to Question 180a, otherwise, skip to Question 181.
180a	Specify BRCA1 mutation		6690688	Specify the BRCA1 variant identified as the result of mutational analysis.
180b	Tissue submitted for mutational analysis	Blood   Tumor     Normal tissue   Other (specify)	6820004	Indicate the kind of tissue submitted for mutational analysis. <i>Note: If the</i> <i>tissue is not listed, proceed to Question</i> 180c, otherwise, skip to Question 181.
180c	Other tissue submitted for mutational analysis		6820011	If not included in the previous list, provide the kind of tissue submitted for mutational analysis.
181	Was a mutation in BRCA2 identified?	□ Yes □ No □ Unknown	2437543	Indicate whether a mutation in BRCA2 was identified. Note: If a mutation was identified, proceed to Question 181a, otherwise, skip to Question 182.
181a	Specify BRCA2 mutation		6690693	Specify the BRCA2 variant identified as the result of mutational analysis.
181b	Tissue submitted for mutational analysis	Blood   Tumor     Normal tissue   Other (specify)	6820004	Indicate the kind of tissue submitted for mutational analysis. Note: If the tissue is not listed, proceed to Question 181c, otherwise, skip to Question 182.
181c	Other tissue submitted for mutational analysis		6820011	If not included in the previous list, provide the kind of tissue submitted for mutational analysis.
182	Was a mutation in HOXB1 identified?	Yes No Unknown	6840947	Indicate whether a mutation in HOXB1 was identified. Note: If a mutation was identified, proceed to Question 182a, otherwise, skip to Question 183.

Specify the HOXB1 variant identified as the result of mutational analysis.

Instruction Text

mutational analysis       Normal tissue       for mutational analysis       for mutational analysis         182c       Other tissue submitted for mutational analysis       Second       for included in the previous list, provide the kind of tissue submitted for mutational analysis         183       Was a mutation in ATM identified?       Yes       600210       Indicate whether a mutation in ATM identified?         183       Specify ATM mutation       Yes       6002015       Specify the ATM variant identified the result of mutational analysis.         183a       Specify ATM mutation       Issue submitted for mutational analysis       6820015       Specify the ATM variant identified the result of mutational analysis. Note: if the transe is not listue.         183b       Tissue submitted for mutational analysis       Issue submitted for mutational analysis       6820011       Indicate whether a mutation in the sec is not listue.         184       Was a mutation in PALB2 identified?       Yes       6820012       Indicate whether a mutation analysis.         184a       Specify PALB2 mutation mutational analysis       Yes       6820014       Indicate whether a mutation analysis.         184a       Specify PALB2 mutation       Ves       6820015       Specify the ATA Mariant identified ror mutational analysis         184a       Specify PALB2 mutation       Ves       6820016       Specify the ATAC wariant identified ror mutat					
182c       Other tissue submitted for mutational analysis       6820011       If not included in the previous list, for mutational analysis.         183       Was a mutation in ATM identified?       Yes buildentified?       6005210       Indicate whether a mutation in AT was identified. <i>Nate: if a mutation buildentified?</i> 183a       Specify ATM mutation       6820015       Specify 0 Question 184. <i>No</i> 6820015         183b       Tissue submitted for mutational analysis       Blood       6820014       Indicate whether a mutation in ATM was identified. <i>Nate: if the</i> <i>issue is not listed, proceed to Question 184.</i> <i>Tissue submitted</i> for mutational analysis       Gestoon 1       Specify Other ATM variant identified for mutational analysis.         183c       Other tissue submitted for mutational analysis       Blood       6820011       If not included in the previous list, provide the kind of tissue submitted for mutational analysis         184       Was a mutation in PALB2 identified?       Yes buildentified?       Gestoon 184.       Gestoon 184.         184a       Specify PALB2 mutation mutational analysis       Gestoon 184.       Gestoon 184.       Gestoon 184.         184a       Specify PALB2 mutation mutational analysis       Blood indicate whether a mutation in ATM was amutation in FANCA identified?       Blood indicate the kind of tissue submitted for mutational analysis       Gestoon 185.         184b       Tissue submitted for mutational analysis	182b		<ul><li>Normal tissue</li><li>Tumor</li></ul>	6820004	Indicate the kind of tissue submitted for mutational analysis. <i>Note: If the</i> <i>tissue is not listed, proceed to Question</i> 182c, otherwise, skip to Question 183.
identified?       No       was identified. Note: if a mutation in lengtified, proceed to Question 188, otherwise, skip to Question 188, otherwise, sk	182c			6820011	provide the kind of tissue submitted
183b       Tissue submitted for mutational analysis       Blood       6820004       indicate the kind of tissue submitted for mutational analysis         183c       Other tissue submitted for mutational analysis       6820011       If not included in the previous list, for mutational analysis         184a       Was a mutation in PALB2       Yes       6820015       Indicate whether a mutation in PALB2 was identified. Note: If an identified?         184a       Specify PALB2 mutation       Yes       6820016       Specify the PALB2 variant identified as the result of mutational analysis.         184a       Specify PALB2 mutation       6820016       Specify the PALB2 variant identified as the result of mutational analysis.         184a       Tissue submitted for mutational analysis       Indicate whether a mutation in PALB2 was identified. Note: If a mutational analysis         184b       Tissue submitted for mutational analysis       Indicate the kind of tissue submitted for mutational analysis         184c       Other tissue submitted for mutational analysis       Indicate the kind of tissue submitted for mutational analysis.         184c       Other tissue submitted for mutational analysis       Indicate whether a mutation in FANCA was identified. Note: If a mutational analysis.         184c       Other tissue submitted for mutational analysis       Indicate whether a mutation in FANCA was identified. Note: If a mutational analysis.         185c       Was a mutation in FA	183		□ No	6005210	
mutational analysis       Normal tissue       for mutational analysis. Note: if the tissue is not listed, proceed to Question 184.         183c       Other tissue submitted for mutational analysis       Second       Second         184       Was a mutation in PALB2       Yes       Second       Second rules whether a mutation in mutation analysis.         184a       Specify PALB2 mutation       Ves       Second rules whether a mutation in mutation analysis.       Indicate whether a mutation in mutation analysis.         184a       Specify PALB2 mutation       Issue submitted for mutational analysis       Blood       Specify the PALB2 variant identified. Noc: if a mutational analysis.         184b       Tissue submitted for mutational analysis       Blood       Specify the PALB2 variant identified. Noc: if a mutational analysis       Indicate the kind of tissue submitted for mutational analysis         184c       Other tissue submitted for mutational analysis       Blood       Second       Second rules whether a mutation in FANCA is of the rules whether a mutation in provide the kind of tissue submitted for mutational analysis         184c       Other tissue submitted for mutational analysis       Blood       Second rules whether a mutation in FANCA is of the rules whether a mutation in FANCA wariant identified. Noc: if a mutational analysis.         185a       Was a mutation in FANCA       Ves       Specify FANCA mutation       Second rules whether a mutation in FANCA wariant identified. Noc: if	183a	Specify ATM mutation		6820015	Specify the ATM variant identified as the result of mutational analysis.
for mutational analysis       provide the kind of tissue submitted for mutational analysis.         184       Was a mutation in PALB2       Yes         identified?       No       Indicate whether a mutation in PALB2 was identified. <i>Note: If a mutation was identified, porced to Question 184, otherwise, skip to Question 185.         184b       Tissue submitted for mutational analysis       Blood       6820004       Indicate the kind of tissue submitted for mutational analysis. Note: If the tissue is not listed, proceed to Question 185.         184c       Other tissue submitted for mutational analysis       Specify the PAN2 variant identified. Note: If a mutation analysis.         185       Was a mutation in FANCA identified?       Yes       Specify the FANCA wariant identified. Note: If a mutational analysis.         185a       Specify FANCA mutation       Specify the FANCA variant identified. Note: If a mutational analysis.       Specify the FANCA variant identified. Note: If a mutational analysis.         185b       Tissue submitted for mutational analysis.       No       Specify the FANCA variant identified. Note: If a mutational analysis.         185c       Other tissue submitted for mutational analysis.       Specify the F</i>	183b		<ul><li>Normal tissue</li><li>Tumor</li></ul>	6820004	Indicate the kind of tissue submitted for mutational analysis. <i>Note: If the</i> <i>tissue is not listed, proceed to Question</i> <i>183c, otherwise, skip to Question 184.</i>
identified?       No       PALB2 was identified. Note: if a mutation was identified, proceed to Question 185.         184a       Specify PALB2 mutation       682001       Specify the PALB2 variant identified as the result of mutational analysis         184b       Tissue submitted for mutational analysis       Blood       6820010       Specify the PALB2 variant identified as the result of mutational analysis. Note: if the trissue is not listed, proceed to Question 185.         184c       Other tissue submitted for mutational analysis       Normal tissue       6820011       Indicate the kind of tissue submitted for mutational analysis. Note: if the trissue is not listed, proceed to Question 185.         184c       Other tissue submitted for mutational analysis       6820011       If not included in the previous list, provide the kind of tissue submitted for mutational analysis.       for mutational analysis.         185       Was a mutation in FANCA identified?       No       Specify FANCA mutation       6820012       Indicate whether a mutation in FANCA identified, proceed to Question 185.         185       Tissue submitted for mutational analysis       No       Specify the FANCA variant identified as the result of mutational analysis.         185       Tissue submitted for mutational analysis       Normal tissue       for mutational analysis.       for mutational analysis.         185       Tissue submitted for mutational analysis       Normal tissue       for mutational analysis. <t< td=""><td>183c</td><td></td><td></td><td>6820011</td><td>provide the kind of tissue submitted</td></t<>	183c			6820011	provide the kind of tissue submitted
184b       Tissue submitted for mutational analysis       Blood Tumor       6820004       Indicate the kind of tissue submitted for mutational analysis. Note: if the tissue is not listed, proceed to Question 184c, otherwise, skip to Question 185.         184c       Other tissue submitted for mutational analysis       6820011       If not included in the previous 185.         184c       Other tissue submitted for mutational analysis       6820011       If not included in the previous 185.         185       Was a mutation in FANCA identified?       Yes Unknown       6820012       Indicate whether a mutation in FANCA was identified. Note: if a mutation was identified. Note: if a mutation as identified. Note: if a mutation as identified. Note: if a mutation as identified. Note: if the tissue submitted for mutational analysis         185a       Specify FANCA mutation       Blood       6820017       Specify the FANCA variant identified as the result of mutational analysis. Note: if the tissue is not listed, proceed to Question 186.         185b       Tissue submitted for mutational analysis       Blood       6820011       Indicate the kind of tissue submitted for mutational analysis         186       Was a mutation in CHEK2 identified?       Yes No       6005214       Indicate whether a mutation in CHEK2 was identified, proceed to Question 186.         186       Was a mutation in CHEK2 identified?       Yes No       6005214       Indicate whether a mutation in CHEK2 was identified, proceed to Question 186.	184		□ No	6820021	PALB2 was identified. Note: If a mutation was identified, proceed to Question 184a, otherwise, skip to Question 185.
mutational analysis       Normal tissue       for mutational analysis. Note: If the tissue is not listed, proceed to Question 185.         184c       Other tissue submitted for mutation in FANCA identified?       If not included in the previous list, provide the kind of tissue submitted for mutation analysis.         185       Was a mutation in FANCA identified?       Yes         185       Specify FANCA mutation       No         185       Specify FANCA mutation       6820011         185       Tissue submitted for mutational analysis       6820012         185b       Tissue submitted for mutational analysis       6820017         185b       Tissue submitted for mutational analysis       Normal tissue         185c       Other tissue submitted for mutational analysis       Normal tissue         185c       Other tissue submitted for mutational analysis       Normal tissue         185c       Other tissue submitted for mutational analysis       Normal tissue         185c       Other tissue submitted for mutational analysis       Normal tissue         185c       Other tissue submitted for mutational analysis       Normal tissue         185c       Other tissue submitted for mutational analysis       Normal tissue         185c       Other tissue submitted for mutational analysis       Note: If the tissue submitted for mutational analysis.         <	184a	Specify PALB2 mutation		6820016	Specify the PALB2 variant identified as the result of mutational analysis.
for mutational analysis       provide the kind of tissue submitted for mutational analysis.         185       Was a mutation in FANCA identified?       Yes         identified?       Unknown         185a       Specify FANCA mutation       6820017         185b       Tissue submitted for mutational analysis       6820017         185b       Tissue submitted for mutational analysis       Blood         185c       Other tissue submitted for mutational analysis       Functional analysis         185c       Other tissue submitted for mutational analysis       Functional analysis         185c       Other tissue submitted for mutational analysis       Functional analysis         185c       Other tissue submitted for mutational analysis       Functional analysis         185c       Other tissue submitted for mutational analysis       If not included in the previous list, provide the kind of tissue submitted for mutational analysis         186       Was a mutation in CHEK2 identified?       Yes       G005214       Indicate whether a mutation in CHEK2 identified. Note: If a mutation mutatified, proceed to Question 186, otherwise, skip to	184b		<ul><li>Normal tissue</li><li>Tumor</li></ul>	6820004	Indicate the kind of tissue submitted for mutational analysis. <i>Note: If the</i> <i>tissue is not listed, proceed to Question</i> 184c, otherwise, skip to Question 185.
identified?       No       FANCA was identified. Note: If a mutation was identified, proceed to Question 185a, otherwise, skip to Question 185a, otherwise, skip to Question 186.         185a       Specify FANCA mutation       6820017       Specify the FANCA variant identified as the result of mutational analysis         185b       Tissue submitted for mutational analysis       Blood       6820004       Indicate the kind of tissue submitted for mutational analysis. Note: If the tissue is not listed, proceed to Question 186.         185b       Tissue submitted for mutational analysis       Normal tissue       6820004       Indicate the kind of tissue submitted for mutational analysis. Note: If the tissue is not listed, proceed to Question 186.         185c       Other tissue submitted for mutational analysis       6820011       If not included in the previous list, provide the kind of tissue submitted for mutational analysis.         185c       Other tissue submitted for mutation in CHEK2 identified?       Yes       6005214       Indicate whether a mutation in CHEK2 identified?         186       Was a mutation in CHEK2 identified?       Yes       No       CHEK2 was identified. Note: if a mutation was identified, note: if a mutation 186a, otherwise, skip to	184c			6820011	provide the kind of tissue submitted
185b       Tissue submitted for mutational analysis       Blood       6820004       Indicate the kind of tissue submitted for mutational analysis. Note: If the tissue is not listed, proceed to Question 185c, otherwise, skip to Question 186c.         185c       Other tissue submitted for mutational analysis       Other (specify)       6820011       If not included in the previous list, provide the kind of tissue submitted for mutational analysis.         186       Was a mutation in CHEK2 identified?       Yes       6005214       Indicate whether a mutation in CHEK2 was identified. Note: If a mutation was identified, proceed to Question 186a, otherwise, skip to	185		□ No	6820022	FANCA was identified. <i>Note: If a mutation was identified, proceed to Question 185a, otherwise, skip to</i>
mutational analysis       Normal tissue       for mutational analysis. Note: If the tissue is not listed, proceed to Question 185c, otherwise, skip to Question 186c.         185c       Other tissue submitted for mutational analysis       Other (specify)         186       Was a mutation in CHEK2 identified?       For mutation in CHEK2 identified?         186       Unknown       Yes         186       Unknown       Output	185a	Specify FANCA mutation		6820017	Specify the FANCA variant identified as the result of mutational analysis.
for mutational analysis       provide the kind of tissue submitted for mutational analysis.         186       Was a mutation in CHEK2 identified?       6005214       Indicate whether a mutation in CHEK2 was identified. Note: If a mutation was identified, proceed to Question 186a, otherwise, skip to	185b		<ul><li>Normal tissue</li><li>Tumor</li></ul>	6820004	Indicate the kind of tissue submitted for mutational analysis. <i>Note: If the</i> <i>tissue is not listed, proceed to Question</i> <i>185c, otherwise, skip to Question 186.</i>
identified?       Yes       CHEK2 was identified. Note: If a         No       mutation was identified, proceed to         Unknown       Question 186a, otherwise, skip to	185c			6820011	provide the kind of tissue submitted
	186		□ No	6005214	CHEK2 was identified. Note: If a mutation was identified, proceed to Question 186a, otherwise, skip to

Tissue Source Site (TSS) Name: \_\_\_\_ Completed By: \_\_\_\_\_

Question Text

Specify HOXB1 mutation

Enrollment: Prostate

CDE ID

6840948

\_\_\_\_\_ HCMI Identifier (ID3): \_\_\_ Completion Date (MM/DD/YYYY): \_\_\_

Data Entry Options

Question

182a

Enrollment: Prostate

\_\_\_\_\_ HCMI Identifier (ID3): \_\_\_\_ Completion Date (MM/DD/YYYY): \_\_\_\_\_

Question	Question Text	Data Entry Options	CDE ID	Instruction Text
186a	Specify CHEK2 mutation		6832296	Specify the type of CHEK2 variant
				identified as the result of mutational
				analysis.
186b	Tissue submitted for	Blood	6820004	Indicate the kind of tissue submitted
	mutational analysis	Normal tissue		for mutational analysis. Note: If the
		Tumor		tissue is not listed, proceed to Question
		Other (specify)		186c, otherwise, skip to Question 187.
186c	Other tissue submitted		6820011	If not included in the previous list,
	for mutational analysis			provide the kind of tissue submitted
				for mutational analysis.
187	Was AR-V7 RNA ISH		6821464	Indicate whether or not in situ
	(RISH) performed?	□ Yes		hybridization for AR-V7 RNA (RISH)
		□ No		was performed. Note: If AR-V7 RNA
		Unknown		ISH was performed, proceed to Question
188	AR-V7 RNA ISH result	Positive	6821465	188, otherwise, skip to Question 189. Indicate the result of AR-V7 RNA
100	AR-V7 RNA ISITTESUIT	□ Negative	0821405	testing by in situ hybridization.
				testing by in situ hybridization.
189	Was AR-V7 RT-PCR		6821476	Indicate whether AR-V7 messenger
105	performed?		0021470	RNA Reverse Transcriptase-
	performed	Yes		Polymerase Chain Reaction was
		D No		performed. Note: If AR-V7 RT-PCR was
		□ Unknown		performed, proceed to Question 190,
				otherwise, skip to Question 191.
190	AR-V7 RT-PCR result		6821477	Indicate the result of the AR-V7
		Positive		messenger RNA Reverse
		□ Negative		Transcriptase-Polymerase Chain
		Equivocal		Reaction test.
191	Was IHC performed for		6820057	Select all the proteins for which
	any of the following		PMS2	immunohistochemistry (IHC) was
	proteins? (select all that		MSH6 PTEN	performed.
	apply)		Unknown	
			UIKIIUWII	
192	AR expression by IHC	Positive	6788031	Indicate the status of the Androgen
		Negative		Receptor protein expression using
		Equivocal		immunohistochemistry.
193	AR-V7 expression by IHC	D Positive	6821495	Indicate the status of the AR-V7
		Negative		protein expression using
		Equivocal		immunohistochemistry.
194	MLH1 expression by IHC	Positive	6063668	Indicate the status of the MLH1
		Negative		protein expression using
		Equivocal		immunohistochemistry.
195	MSH2 expression by IHC	Positive	6063669	Indicate the status of the MSH2
		□ Negative		protein expression using
		Equivocal		immunohistochemistry.
196	PMS2 expression by IHC	D Positive	6063670	Indicate the status of the PMS2
		□ Negative		protein expression using
		Equivocal		immunohistochemistry.
197	MSH6 expression by IHC	Positive	6063671	Indicate the status of the MSH6
		D Negative		protein expression using
		Equivocal		immunohistochemistry.
198	PTEN expression by IHC	Positive	6063672	Indicate the status of the PTEN
		D Negative		protein expression using
		Equivocal		immunohistochemistry.
199	MLH1 promoter	□ Present	6033150	Indicate the methylation status of
	methylation status	□ Absent		the MLH1 promoter.
		□ Indeterminate		
		Not assessed		

200	MMR status	Evidence of MMR mutation by sequencing	6002208	Indicate the patient's Mismatch
200		, , , , , , , , , , , , , , , , , , , ,	0002208	-
		Evidence of MMR protein loss by IHC		Repair (MMR) gene mutation status.
		□ MMR loss evidence hypermutation		
		phenotype (>10 mutations/Mb)		
		No evidence of MMR alteration		
		Not performed		
Additiona	ıl Metastatic/Recurrent Tumo	or Biospecimen Information (if applicable)		
201	Are you submitting an			A biospecimen obtained from a single
	additional metastatic/			site at a single timepoint in progression
	recurrent tumor tissue			that is portioned for both sequencing
	sample?			and model generation counts as 1
				single tumor specimen. A biospecimen
		🗖 Yes		obtained from another site or at a later
		🗆 No		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 202, otherwise, skip
				to Question 224.
202	Metastatic/recurrent		6584266	Please provide a number to identify
	tissue biospecimen			which biospecimen this is in the
	ordinal			sequence. The first biospecimen
				should be number "1," the second
				should be number "2," etc.
203	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.
204	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.
205	Metastatic/ recurrent		5432521	Provide the method used to
	tumor tissue sample	Cryopreserved		preserve the metastatic/recurrent
	preservation method	□ FFPE □ Snap frozen		tumor tissue sample collected for
		□ Frozen		molecular characterization.
206	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 additional			of additional metastatic/recurrent
	metastasis/ recurrence			disease.
207	Method of metastatic/		6587389	Indicate the procedure performed to
207	recurrent cancer sample	Core needle biopsy	0507505	obtain the metastatic/recurrent
	procurement	Fine needle aspirate		tumor tissue. <i>Note: If the method of</i>
	procurement	TURP including all forms of enucleation		procurement is not listed, proceed to
		Salvaged radical prostatectomy		Question 207a, otherwise, skip to
		□ Salvaged lymph node dissection		Question 209 d, otherwise, skip to
		□ Metastasectomy		proceed to Question 208, otherwise, skip
		Other Method (specify)		to Question 214.
207a	Other method of cancer		6587390	If the procedure performed to
	sample procurement			obtain the tumor tissue is not
				included in the provided list, specify
				the procedure.
208	For TURP specimens,		2431688	Provide the number of chips
	number of positive chips			involved by invasive prostate
				carcinoma, in a transurethral
				resection specimen.
209	For TURP specimens,		2431624	Provide the total number of chips
	number of total chips			in a specimen of prostate removed

**Question Text** 

V1.0

Question

\_\_\_\_\_ HCMI Identifier (ID3): \_\_ Completion Date (MM/DD/YYYY): \_

**Data Entry Options** 

CDE ID

Instruction Text

by transurethral resection.

### Enrollment: Prostate HCMI Identifier (ID3): \_\_\_\_\_

Question	Question Text	Data Entry Options		CDE ID	Instruction Text
210	For TURP specimens,			2431904	Provide the percentage of prostatic
	estimated percentage of				tissue which is involved by invasive
	prostatic tissue involved		_%		prostate carcinoma, in a
	by tumor				transurethral resection specimen.
211	For enucleation			6831339	Provide the percentage of prostatic
	specimens, estimated				tissue which is involved by tumor.
	percentage of prostatic		%		
			_78		
242	tissue involved by tumor			6024.600	Dura dala da ante ante esta contra da como
212	For enucleation			6831608	Provide the numeric value in mm
	specimens, tumor size				for the size of the dominant (if
	(dominant nodule, if		_mm		present) tumor nodule.
	present)				
213	For enucleation			6831609	Provide the numeric value in mm
	specimens, additional				for an additional dimension of the
	dimensions (millimeters)		_mm		tumor.
214	Number of days from			3288495	Provide the number of days from th
214	index date to date of			5288495	index date to the date of the
	metastatic/ recurrent				procedure that produced the
	sample procurement				metastatic/recurrent tumor tissue
			_		submitted for HCMI.
215	Metastatic/ recurrent site	_		6587394	Select the site from which the
		Prostate	□ Liver		metastatic/recurrent tissue used to
		Lymph node(s)	Brain		develop the model was derived.
		□ Bone			Note: If the metastatic/recurrent site is
		🗆 Lung	Other (specify)		not listed, proceed to Question 215a,
					otherwise, skip to Question 216.
215a	Other metastatic/			6587395	If not included in the previous list,
2150				0507555	-
	recurrent site				specify the site from which the
					metastatic/recurrent tissue used to
			_		develop the model was derived.
216	Site of relapse	Local		2002506	If the primary tumor relapsed,
		Regional			provide the site of relapse.
		Distant			
		Not applicable			
217	ICD-10 code			3226287	Provide the ICD-10 code for the
217				5220207	metastatic/recurrent tumor used to
					-
			-		generate the model submitted to
					HCMI.
218	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.
219	Maintenance and/or			6119066	Provide the name(s) of the
215				011000	maintenance and/or consolidation
	consolidation therapy				-
	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.
220	Days to start of			5102411	Provide the number of days from th
	maintenance and/or				index date to the date maintenance
	consolidation therapy				and/or consolidation therapy
	from index date		_		started.
224				F402425	
221	Days to last known			5102431	Provide the number of days from th
	administration date of				index date to the last known date of
	maintenance and/or				maintenance and/or consolidation
	consolidation therapy				therapy.
	from index date	1	_	1	

Indicate whether the patient is still

222	is the patient still	□ Yes	6379568	Indicate whether the patient is still
	receiving treatment?			undergoing maintenance and/or
				consolidation therapy.
		🛛 Unknown		
223	Disease status	No evidence of disease	2188290	Provide the disease status following
		Progressive disease		maintenance and/or consolidation
		□ Stable disease		therapy.
				therapy.
Addition	Notestatis / Document Tum		a far Additional Mataci	hatis (Decurrent Turner Dreamesis er
		or Prognostic/Predictive/Lifestyle Feature estions 165-200 may be repeated to capture c	-	-
	c/recurrent biospecimens.)			,
Metastat	ic/Recurrent Tumor Model In	formation		
224	METASTATIC/		6594587	Please provide a number to identify
224	RECURRENT model		0554507	which biospecimen this is in the
	biospecimen ordinal			sequence. Note: The first biospecimen should be number "1," the second should
				be number "2," etc.
225	CMDC model ID		6586036	Please provide the CMDC model ID
223			0000000	for this sample as it will appear
				on tubes and the Sample Submission
				Form transmitted to the BPC.
226	DDC submitter ID (if		6594010	Please provide the BPC-generated ID
226	BPC submitter ID (if		6584919	
	available)			for this sample as it will appear on
				the Sample Submission Form
				transmitted to the BPC.
227	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.
228	Model's METASTATIC/		6584266	Enter the biospecimen ordinal
	<b>RECURRENT tumor tissue</b>			of the METASTATIC/RECURRENT
	biospecimen ordinal			tissue from which this model is
				derived.
Additiond	al Metastatic/Recurrent Biosp	ecimen Tumor Model Information (if app	olicable)	
229	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.
230	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.
231	BPC submitter ID (if		6584919	Please provide the BPC-generated ID
201	available)		0001010	for this sample as it will appear on
	avaliable)			the Sample Submission Form
				transmitted to the BPC.
232	Model's METASTATIC/		6586035	Enter the CMDC Sample ID of the
252	RECURRENT tumor tissue		2500850	METASTATIC/RECURRENT tissue
				-
	CMDC sample ID			from which this model is derived.
233	Model's METASTATIC/		6584266	Enter the biospecimen ordinal of the
	RECURRENT tumor tissue			METASTATIC/RECURRENT tissue
<u></u>	biospecimen ordinal			from which this model is derived.
	specimen Information			
234	Are you submitting an			Indicate whether an OTHER tissue
	OTHER tissue sample?	□ Yes		sample (e.g. pre-malignant, non-
				malignant, or dysplastic tissue, etc.)
				was collected for HCMI for this case.
				Note: If yes, proceed to Question 225

**Enrollment: Prostate** 

Tissue Source Site (TSS) Name: \_ Completed By:

**Question Text** 

Is the patient still

HCMI Identifier (ID3): Completion Date (MM/DD/YYYY): \_

**Data Entry Options** 

CDE ID

6379568

Instruction Text

Question

222



# Enrollment: Prostate

HCMI Identifier (ID3): \_\_\_\_\_ Completion Date (MM/DD/YYYY): \_\_\_\_\_

Question	Question Text	Data Entry Options		CDE ID	Instruction Text
235	OTHER tissue biospecimen ordinal			6584267	Please provide a number to identify which biospecimen this is in the sequence. <i>Note: The first biospecimen</i>
					should be number "1," the second should be number "2," etc.
236	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.
237	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.
238	OTHER tissue sample preservation method	<ul> <li>Cryopreserved</li> <li>FFPE</li> <li>Frozen</li> </ul>	<ul><li>OCT</li><li>Snap frozen</li></ul>	5432521	Provide the method used to preserve the OTHER tissue sample collected for molecular characterization.
239	Other method of cancer sample procurement	<ul> <li>Core needle biopsy</li> <li>Fine needle aspirate</li> <li>TURP including all fo</li> <li>Salvaged radical pros</li> <li>Other Method (speci</li> </ul>	statectomy	6587398	Provide the procedure performed to obtain the OTHER tissue. Note: If the method of procurement is not listed, proceed to Question 239a, otherwise, skip to Question 240. If TURP was performed, proceed to Question 240, otherwise, skip to Question 246.
239a	Specify method of OTHER tissue sample procurement			6587399	Specify the procedure performed to obtain the OTHER tissue.
240	For TURP specimens, number of positive chips			2431688	Provide the number of chips involved by invasive prostate carcinoma, in a transurethral resection specimen.
241	For TURP specimens, number of total chips			2431624	Provide the total number of chips in a specimen of prostate removed by transurethral resection.
242	For TURP specimens, estimated percentage of prostatic tissue involved by tumor	%		2431904	Provide the percentage of prostatic tissue which is involved by invasive prostate carcinoma, in a transurethral resection specimen.
243	For enucleation specimens, estimated percentage of prostatic tissue involved by tumor	%		6831339	Provide the percentage of prostatic tissue which is involved by tumor.
244	For enucleation specimens, tumor size (dominant nodule, if present)	mm		6831608	Provide the numeric value in mm for the size of the dominant (if present) tumor nodule.
245	For enucleation specimens, additional dimensions (millimeters)	mm	1	6831609	Provide the numeric value in mm for an additional dimension of the tumor.
246	Number of days from index date to date of OTHER sample procurement	·		3288495	Provide the number of days from the index date to the date of the procedure that produced the OTHER tissue submitted for HCMI.
247	Tissue type	<ul><li>Pre-malignant</li><li>Other (specify)</li></ul>		64784	Indicate the OTHER tissue type. Note: If the OTHER tissue type is not listed, proceed to Question 247a, otherwise, skip to Question 248.
247a	Specify tissue type			64785	Specify the OTHER tissue type if not in the provided list.

# \_\_\_\_\_ HCMI Identifier (ID3): \_\_\_\_

248a 249	Anatomic site of OTHER tissue	<ul> <li>Prostate</li> <li>Other (specify)</li> </ul>	6696813	Select the site from which the OTHER tissue used to develop the
248a 249	tissue			
249				madel was derived at the second
249		Other (specify)		model was derived. Note: If the OTHER
249				tissue site is not listed, proceed to
249				Question 248a, otherwise, skip to
249				Question 249.
249	Specify anatomic site of		6584916	Specify the site of OTHER tissue, if
	OTHER tissue			not in the previous list.
250	ICD-10 code		3226287	Provide the ICD-10 code for the
250				OTHER tissue used to generate the
250				model submitted to HCMI.
250	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.
Additional (	OTHER biospecimen Informa	ation (if applicable)		
	Are you submitting an			Indicate whether an additional
	additional OTHER tissue			OTHER tissue sample (pre-malignant
	sample?			non-malignant, or dysplastic tissue,
	sumple:	□ Yes		etc.) is being submitted for HCMI for
		□ No		this case. <i>Note: If yes, proceed to</i>
				Question 252, otherwise, skip to
				Question 252, otherwise, skip to
252	OTHER tissue		6584267	Please provide a number to identify
	biospecimen ordinal		0001207	which biospecimen this is in the
	biospecimen orumar			sequence. <i>Note: The first biospecimen</i>
				should be number "1," the second should
				be number "2," etc.
253	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.
254	BPC submitter ID (if		6584919	Please provide the BPC-generated ID
	available)		000.010	for this sample as it will appear on
	available			the Sample Submission Form
				transmitted to the BPC.
255	OTHER tissue sample	Cryopreserved	5432521	Provide the method used to
	preservation method		5452521	preserve the OTHER tissue sample
	preservation method			collected for molecular
		□ Frozen		characterization.
		ОСТ		
		Snap frozen		
	Other method of cancer	Core poedle history	6587398	Provide the procedure performed to
	sample procurement	Core needle biopsy		obtain the OTHER tissue. Note: If the
		□ Fine needle aspirate		method of procurement is not listed,
		□ TURP including all forms of enucleation		proceed to Question 256a, otherwise,
		Salvaged radical prostatectomy		skip to Question 263. If TURP was
		Other Method (specify, CDE ID: 6587399)		performed, proceed to Question 257,
256a	Specify method of OTHER		6587399	otherwise, skip to Question 263. Specify the procedure performed to
	· ·		0307399	obtain the OTHER tissue.
	tissue sample			
	procurement		2424.000	Deputed a the council and a first
	For TURP specimens,		2431688	Provide the number of chips
	number of positive chips			involved by invasive prostate
				carcinoma, in a transurethral
				resection specimen.
	For TURP specimens,		2431624	Provide the total number of chips
	number of total chips			in a specimen of prostate removed
				by transurethral resection.

### Enrollment: Prostate HCMI Identifier (ID3): \_\_\_\_

Question	Question Text	Data Entry Options		CDE ID	Instruction Text
259	For TURP specimens,			2431904	Provide the percentage of prostatic
	estimated percentage of				tissue which is involved by invasive
	prostatic tissue involved		%		prostate carcinoma, in a
	by tumor		_		transurethral resection specimen.
260	For enucleation			6831339	Provide the percentage of prostatic
200	specimens, estimated			0001000	tissue which is involved by tumor.
	percentage of prostatic		%		lissue which is involved by fumor.
	tissue involved by tumor		_/0		
261	For enucleation			6831608	Provide the numeric value in mm
201	specimens, tumor size			0051000	for the size of the dominant (if
	(dominant nodule, if		mm		present) tumor nodule.
	present)				present) tumor nodule.
262	For enucleation			6831609	Provide the numeric value in mm
202				0051009	for an additional dimension of the
	specimens, additional		_mm		
262	dimensions (millimeters)			2200.405	tumor.
263	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.
264	Tissue type	Dro malignant		64784	Indicate the OTHER tissue type.
		Pre-malignant     Other (specify)			Note: If the OTHER tissue type is not listed, proceed to Question 264a,
		□ Other (specify)			otherwise, skip to Question 264a,
264a	Specify tissue type			64785	Specify the OTHER tissue type
2048	Specify tissue type			04785	if not in the provided list.
265	Anatomic site of OTHER		_	6696813	Select the site from which the
205				0090015	
	tissue	Prostate			OTHER tissue used to develop the
		□ Other (specify)			model was derived. <i>Note: If the OTHER</i> <i>tissue site is not listed, proceed to</i>
					Question 265a, otherwise, skip to
					Question 2650, other wise, skip to
265a	Specify anatomic site of			6584916	Specify the site of OTHER tissue, if
2004	OTHER tissue			0001020	not in the previous list.
266	ICD-10 code		_	3226287	Provide the ICD-10 code for the
200				5220207	OTHER tissue used to generate the
			_		model submitted to HCMI.
267	ICD-O-3 histology code			3226275	Provide the ICD-O-3 histology code
207	100-0-3 histology code			5220275	describing the morphology of the
					OTHER tissue used to generate the
			_		model submitted to HCMI.
Other Tiss	up Model Information				model submitted to memi.
268	ue Model Information OTHER tissue model			6594590	Please provide a number to identify
200	biospecimen ordinal			0594590	which biospecimen this is in the
	biospecifien orunnar				•
					sequence. Note: The first biospecimen should be number "1," the second should
			_		be number "2," etc.
269	CMDC model ID			6586036	Please provide the CMDC model ID
205				050050	for this sample as it will appear on
					tubes and the Sample Submission
			_		Form transmitted to the BPC.
270	PDC submitter ID /:f			6504010	
270	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.
c=:					
271	Model's OTHER tissue			6586035	Enter the CMDC Sample ID of the
	CMDC sample ID				OTHER tissue from which this model
	1				is derived.



Tissue Source Site (TSS) Name: \_\_\_\_\_ Completed By: \_\_\_\_\_

\_\_\_\_\_ HCMI Identifier (ID3): \_\_\_\_ Completion Date (MM/DD/YYYY): \_\_\_\_\_

Question	Question Text	Data Entry Options	CDE ID	Instruction Text
272	Model's OTHER tissue biospecimen ordinal		6584267	Enter the biospecimen ordinal of the OTHER tissue from which this model
				is derived.
Additional	Other Tissue Model Inform	ation (if applicable)		
273	OTHER tissue model		6594590	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.
274	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.
275	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.
276	Model's OTHER tissue CMDC sample ID		6586035	Enter the CMDC Sample ID of the OTHER tissue from which this model is derived.
277	Model's OTHER tissue biospecimen ordinal		6584267	Enter the biospecimen ordinal of the OTHER tissue from which this model is derived.