Personalized Medicine testing recommendations for:

Head & Neck Cancer (Nasopharynx, Nasopharyngeal, Oropharynx)

Newly Diagnosed and Recurrent Disease (somatic)

When and what should be tested?

- Treatment eligible
- Newly diagnosed and at recurrence
- Post treatment monitoring where appropriate
- Tumor (tissue) sample

FDA/NCCN approved

- EBV/DNA testing*
- PD-L1 for recurrent, unresectable, or metastatic disease
- Androgen receptor, HER2
- BRAF V600E, NTRK, RET, TMB, dMMR, FGFR for metastatic disease
- NGS for recurrent or persistent disease with distant mets

Emerging

- MRD

Informational Considerations

- Prognostic evaluation of CCDKN2A (p16) protein expression, HPV via ISH
- COMT and MATE1 genotyping were found to predict cisplatin-induced ototoxicity in head and neck cancer patients.

*Ongoing monitoring: For nasopharyngeal cancer, consider EBV//DNA monitoring post treatment

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Personalized Medicine testing recommendations for:

Thyroid Cancer

Newly Diagnosed and Recurrent Disease (somatic)

When and what should be tested?

- Treatment eligible
- Newly diagnosed and at recurrence
- Stage IVA/IVB (MO), IVC (M1)
- Post treatment monitoring where appropriate
- Tumor (tissue) sample
- Peripheral blood

FDA/NCCN approved

- ALK
- BRAF
- NTRK 1/2/3
- RET
- HER2
- In select patients, may be appropriate to test for:
  - dMMR
  - MSI
  - TMB

Emerging

- MRD

Informational Considerations

- TSH
- Antithyroglobulin antibodies
- Tg measurement
- RAS
- PAX8/PPAR gamma
- Germline *RET* PV in medullary thyroid cancer

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