

**APRIL 2022** 

## **JUST IN TIME TRIALS (JIT) AML ANAL ALL APL BLADDER-UROTHELIAL BRAIN BREAST/ GYN CANCER CONTROL CARCINOID CLL CML COLON-RECTAL ESOPHAGEAL - GASTRIC HEAD & NECK LYMPHOMA**

\*\*\*NEW & REOPENED TRIALS HIGHLIGHTED IN GREEN!\*\*\*

**MDS** 

**MOLECULAR STUDIES** 

**MULTIPLE MYELOMA** 

**MELANOMA** 

**NSCLC** 

**MERKEL** 

**PANCREATIC** 

**PROSTATE** 

**RADIATION TRIALS** 

**RENAL CELL** 

**SMALL CELL LUNG CANCER** 

**VULVA** 

Updated 4.6.22

#### RADIATION LOCATIONS:

OSF Glen Oak - OSF main hospital
OSF Route 91 (attached to Illinois CancerCare)
UPHM - Unity Point Health Methodist

**Galesburg - Western Illinois Cancer Treatment Center** 





	JUST IN TIME (JIT) TRIALS	*Contact Disease Specific Navigator		
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M	ulti-Disease Site: Advanced/Metastatic Sol	id Tumors		
	A Phase 2 Basket Study of Milademetan in Advanced/Metastatic Solid			
<u>RAIN-3202</u>	Tumors			
	Brain			
	A Prospective, Multi-Institutional Phase II	Trial Evaluating Temozolomide		
<u>A021804</u>	vs. Temozolomide and Olaparib for Advan	ced Pheochromocytoma and		
	Paraganglioma			
4074703	A Phase II Study of Checkpoint Blockade In	nmunotherapy in Patients With		
<u>A071702</u>	Somatically Hypermutated Recurrent Glio	olastoma		
	Breast			
	(RT not credentialed yet)-A Phase II Rando	omized Trial of Olaparib (NSC-		
<u>\$1706</u>	747856) Administered Concurrently with F			
	Radiotherapy Alone for Inflammatory Brea	ast Cancer		
	Carcinoid			
	Randomized Phase II Trial of Postoperative	e Adjuvant Capecitabine and		
<u>\$2104</u>	Temozolomide Versus Observation in High	-Risk Pancreatic Neuroendocrine		
	Tumors			
	Endometrial			
	(Temp. suspended) Phase II Study of Tazer	metostat (EPZ-6438) (IND #		
GY014	138671) in Recurrent or Persistent Endom			
<u> </u>	the Ovary, and Recurrent or Persistent End	dometrioid Endometrial		
	Adenocarcinoma			
	Gastrointestinal			
EA2107	Temporarily closed Phase II study of Pevo	nedistat in Combincatoin with		
<u>EA2187</u>	Carbo and paclitaxel in advanced intrahep	atic cholonigocarcinoma.		
	Optimal Perioperative Therapy for Inciden	tal Gallbladder Cancer (OPT-IN):		
<u>EA2197</u>	A Randomized Phase II/III Trial	,		
64022	Randomized Phase II Selection Study of Ra	mucirumab and Paclitaxel versus		
<u>\$1922</u>	FOLFIRI in Refractory Small Bowel Adenoc	arcinoma		
Genitourinary - Rare				

<u>A031702</u>	Phase II Study of Cabozantinib in Combination with Nivolumab and Ipilimumab in Rare Genitourinary Tumors (temp closed cohorts - small cell carcinoma/neuroendorine & adenocarcinoma of bladder, penile, and misc GU tract variants, renal medullary carcinoma, and rare GU)
	Head & Neck
<u>EA3191</u>	Temporarily Closed (RT at Route-91) A Phase II Randomized Trial of Adjuvant Therapy With Pembrolizumab After Resection of Recurrent/Second Primary Head and Neck Squamous Cell Carcinoma With High Risk Features
	Lung
<u>S1934</u>	Randomized Phase II Trial of Trimodality +/- Atezolizumab in Resectable Superior Sulcus Non-Small Cell Lung Cancer. NASSIST (Neoadjuvant Chemoradiation +/- Immunotherapy Before Surgery for Superior Sulcus Tumors)
	Melanoma
EA6192	A Phase II Study of Biomarker Driven Early Discontinuation of Anti-PD-1 Therapy in Patients With Advanced Melanoma (PET-Stop)
<u>\$1801</u>	A Phase II Randomized Study of Adjuvant versus NeoAdjuvant MK-3475 (Pembrolizumab) for Clinically Detectable Stage III-IV High-Risk Melanoma
	Multi-Disease
<u>\$1614</u>	(temp closed) A Phase III Randomized Trial of Prophylactic Antiviral Therapy in Patients with Current or past hepatitis B Virus Infection Receiving Anti-Cancer Therapy for Solid Tumors
	Neuroendocrine
<u>\$2012</u>	Randomized Phase II/III Trial of First Line Platinum/Etoposide With or Without Atezolizumab In Patients w/ Poorly Differentiated Extrapulmonary Small Cell Neuroendocrine Carcinoma (NEC)
	Ovarian
<u>GY014</u>	(temp closed) Phase II Study of Tazemetostat (EPZ-6438) (IND # 138671) in Recurrent or Persistent Endometrioid or Clear Cell Carcinoma of the Ovary, and Recurrent or Persistent Endometrioid Endometrial Adenocarcinoma
	Pancreas
<u>S2001</u>	Randomized Phase II Clinical Trial of Olaparib + Pembrolizumab vs. Olaparib Alone as Maintenance Therapy in Metastatic Pancreatic Cancer Patients with Germline BRCA1 or BRCA2 Mutations

<u>\$2104</u>	Randomized Phase II Trial of Postoperative Adjuvant Capecitabine and Temozolomide Versus Observation in High-Risk Pancreatic Neuroendocrine Tumors	
	Rectal	
<u>EA2201</u>	(RT at Glen Oak, UPHM, Galesburg) A Phase II Study of Neoadjuvant Nivolumab Plus Ipilimumab and Short-Course Radiation in MSI-H/dMMR Locally Advanced Rectal Adenocarcinoma	
	Sarcoma	
<u>A091902</u>	A Multicenter Phase II Trial of Paclitaxel With and Without Nivolumab in Taxane Naive, and Nivolumab and Cabozantinib in Taxane Pretreated Subjects With Angiosarcoma (closed to taxane pre-treated pts only)	
	Skin	
<u>A091802</u>	Phase II randomized Trial of Avelumab plus cetuximab versus avelumab alone in advanced cutaneous Squamous cell carcinoma of skin	
Thymoma		
<u>\$1701</u>	A Randomized Phase II Trial of Carboplatin-Paclitaxel with or without Ramucirumab in Patients with Unresectable Locally Advanced, Recurrent, or Metastatic Thymic Carcinoma	



MENU

**APRIL 2022** 

**AML** 

Navigator - Heather x3661

**Connect Myeloid** 

The Myelofibrosis (MF), Myelodysplastic Syndromes (MDS) and Acute Myeloid Leukemia (AML) Disease Registry. *(enrolling low risk MDS only)* 





Navigator - Carrie x3621

#### **APRIL 2022**

<u>EA2176</u>	A Randomized Phase III Study of Immune Checkpoint Inhibition With Chemotherapy in Treatment- Naive Metastatic Anal Cancer Patients
<u>EA2182</u>	(RT at UPHM and Glen Oak) A Randomized Phase II Study of De-Intensified ChemoRadiation for Early-Stage Anal Squamous Cell Carcinoma (DECREASE)

**ANAL** 



**MENU** 

**APRIL 2022** 

APL

Navigator - Heather x3661

There are no trials available at this time



MENU

**APRIL 2022** 

#### **ACUTE LYMPHOBLASTIC LEUKEMIA**

Navigator - Heather x3661

**EA9152** 

A Phase IB/II Study of Venetoclax (ABT-199) in Combination With Liposomal Vincristine in Patients With Relapsed or Refractory T-Cell or B-Cell Acute Lymphoblastic Leukemia



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#### **APRIL 2022**

## **BLADDER / UROTHELIAL**

Navigator - Carrie x3621

ADJUVANT / NEOADJUVANT			
BMS CA017-078	(Peoria, Bloomington, Galesburg, and Peru) -A Phase 3, Randomized, Study of Neoadjuvant Chemotherapy alone versus Neoadjuvant Chemotherapy plus Nivolumab or Nivolumab and BMS-986205, Followed by Continued Post-Surgery Therapy with Nivolumab or Nivolumab and BMS-986205 in Participants with Muscle-Invasive Bladder Cancer (BMS-986205/placebo tablets discontinued)		
<u>EA8185</u>	(RT pending at Glen Oak & Rt-91) Phase 2 Study of Bladder-Sparing Chemoradiation With MEDI4736 (Durvalumab) in Clinical Stage 3, Node Positive Bladder Cancer (INSPIRE)		
<u>EA8192</u>	A Phase II/III Trial of MEDI4736 (Durvalumab) and Chemotherapy for Patients With High Grade Upper Tract Urothelial Cancer Prior to Nephroureterectomy		
<u>\$1806</u>	(RT at Glen Oak, UPHM and Galesburg) Phase III Randomized Trial of Concurrent Chemoradiotherapy with or without Atezolizumab in Localized Muscle Invasive Bladder Cancer		
<u>\$2011</u>	Randomized Phase II Trial of Gemcitabine, Avelumab and Carboplatin vs. No Neoadjuvant Therapy Preceding Surgery for Cisplatin-Ineligible Muscle-Invasive Urothelial Carcinoma: SWOG GAP TRIAL		
	METASTATIC		
<u>A031901</u>	Duration of Immune Checkpoint Therapy in Locally Advanced or Metastatic Urothelial Carcinoma: A Randomized Phase 3 Non-Inferiority Trial		
<u>A032001</u>	<b>NEW!</b> Phase III Randomized Trial of Maintenance Cabozantinib and Avelumab vs Maintenance Avelumab After First-Line Platinum-Based Chemotherapy in Patients With Metastatic Urothelial Cancer		

<u>A032002</u>	(RT at Glen Oak) Phase II Randomized Trial of Atezolizumab Versus Atezolizumab and Radiation Therapy for Platinum Ineligible/Refractory Metastatic Urothelial Cancer (ART)
<u>\$1937</u>	A Phase III Randomized Trial of Eribulin (NSC #707389) With or Without Gemcitabine Versus Standard of Care (Physician's Choice) for Treatment of Metastatic Urothelial Carcinoma Refractory to, or Ineligible for, Anti PD1/PDL1 Therapy



MENU

BRAIN	Navigator - Carrie x3621
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<u>BN007</u>	(RT at UPHM, Glen Oak, Galesburg) A Randomized Phase II/III Open-Label Study of Ipilimumab and Nivolumab Versus Temozolomide in Patients With Newly Diagnosed MGMT (Tumor O-6-Methylguanine DNA Methyltransferase) Unmethylated Glioblastoma
<u>BN011</u>	(RT at Glen Oak) A Phase III Trial of Gleostine® (Lomustine)-Temozolomide Combination Therapy Versus Standard Temozolomide in Patients With Methylated MGMT Promoter Glioblastoma
<u>N0577</u>	(RT at Glen Oak, RT 91, and UPHM) Phase III Intergroup Study of Radiotherapy with Concomitant and Adjuvant Temozolomide versus Radiotherapy with Adjuvant PCV Chemotherapy in Patients with 1p/19q Co-deleted Anaplastic Glioma or Low Grade Glioma



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#### **APRIL 2022**

Navigator - Angie x3613

	Navigator - Angie x3613	
	DCIS	
<u>AFT-25</u>	Comparing an Operation to Monitoring, With or Without Endocrine Therapy Trial For Low Risk DCIS: A Phase III Prospective Randomized Trial <b>(COMET)</b>	
	NEO/ADJUVANT TREATMENT	
<u>\$1706*</u>	RT credentialing pending - A Phase II Randomized Trial of Olaparib (NSC-747856) Administered Concurrently with Radiotherapy versus Radiotherapy Alone for Inflammatory Breast Cancer (All biomarker subgroups eligible)  *JIT TRIAL - expect 1 week delay to consent pt	
Neo/Adjuvant - HE	R2 Positive	
<u>A011801</u>	The CompassHER2 Trials (Comprehensive Use of Pathologic Response Assessment to Optimize Therapy in HER2-Positive Breast Cancer) CompassHER2 Residual Disease (RD), a Double-Blinded, Phase III Randomized Trial of T-DM1 Compared With T-DM1 and Tucatinib	
<u>EA1181</u>	Preoperative THP and Postoperative HP in Patients Who Achieve a Pathologic Complete Response (CompassHER2-pCR)	
Neo/Adjuvant - Ho	rmone Receptor Positive / HER2 Negative	
<u>BR007</u>	(RT at Galesburg, Glen Oak, Rt 91, UPHM) Phase III Clinical Trial Evaluating De-Escalation of Breas Radiation for Conservative Treatment of Stage I, Hormone Sensitive, HER-2 Negative, Oncotype Recurrence Score Less Than or Equal to 18 Breast Cancer	
Neo/Adjuvant - Tri	ple Negative	
No trials at this time.		
	METASTATIC TREATMENT	
Metastatic - HER2	Positive	
<u>BR004</u>	A Randomized, Double-Blind, Phase III Trial of Paclitaxel/Trastuzumab/Pertuzumab with Atezolizumab or Placebo in First-Line HER2-Positive Metastatic Breast Cancer	

# A Randomized, Double-Blind, Phase III Trial of Paclitaxel/Trastuzumab/Pertuzumab with Atezolizumab or Placebo in First-Line HER2-Positive Metastatic Breast Cancer Metastatic - Hormone Receptor Positive / HER2 Negative Randomized Non-Inferiority Trial Comparing Overall Survival of Patients Monitored with Serum Tumor Marker Directed Disease Monitoring (STMDDM) Versus Usual Care in Patients with Metastatic Hormone Receptor Positive HER-2 Negative Breast Cancer A Phase II Trial of Sacituzumab Govitecan (IMMU-132) (NSC #820016) for Patients With HER2-Negative Breast Cancer and Brain Metastases

Metastatic - Triple Negative			
	no trials at this time		
	SURGERY / RADIATION ONLY		
<u>A011202</u>	<b>Temporarily Closed</b> - A Randomized Phase III Trial Evaluating the Role of Axillary Lymph Node Dissection in breast Cancer Patients (cT1-3 N1) Who Have Positive Lymph Node Disease After Neoadjuvant Chemotherapy. (RT: Glen Oak, Rt 91, UPHM, Galesburg)		
<u>BR002</u>	<b>Temporarily Closed</b> - A Phase IIR/III Trial of Standard of Care Therapy with or without Stereotactic Body Radiotherapy (SBRT) and/or Surgical Ablation for Newly Diagnosed Oligometastatic Breast Cancer (RT: Glen Oak, UPHM)		
MA.39	Tailor RT: A Randomized Trial of Regional Radiotherapy in Biomarker Low Risk Node Positive Breast Cancer <i>(RT: Glen Oak and UPHM)</i>		
	CANCER CONTROL (Breast only)		
A191901	(Peoria, Bloomington, Galesburg, Ottawa, Pekin, and Peru) Optimizing Endocrine Therapy Through Motivational Interviewing and Text Interventions (only enrolling African American women)		
A211901	Reaching Rural Cancer Survivors Who Smoke Using Text-Based Cessation Interventions		
A222004	A Randomized Phase III Trial of Olanzapine Versus Megestrol Acetate for Cancer-Associated Anorexia		
EAQ202	Improving Adolescent and Young Adult Self-Reported Data in ECOG-ACRIN Trials		
PROT001/ BLUENOTE	(Peoria, Bloomington, Galesburg, Peru, Pekin and Ottawa) Double-blinded, Randomized, Adaptive Registrational Trial to Compare Effectiveness of Two Digital Software Medical Devices (Attune™ and Cerena™) as Interventions for Physical and Emotional Health in Adjunctive Oncology Treatment		
<u>S1912CD</u>	A Randomized Trial Addressing Cancer-Related Financial Hardship Through Delivery of a Proactive Financial Navigation Intervention (CREDIT)		
<u>\$2013</u>	Immune Checkpoint Inhibitor Toxicity: A Prospective Observational Study (I-CHECKIT)		
<u>URCC 16070</u>	Treatment of Refractory Nausea- for breast cancer patients.		
<u>URCC-18007</u>	Randomized Placebo Controlled Trial of Bupropion For Cancer Related Fatigue in stage I-III Breast cancer pts at least 2 months out from surgery/tx/radiation		
WF-1901	Internet-delivered Management of Pain Among Cancer Treatment Survivors (IMPACTS)		

NRG-GY012	A Randomized Phase II Study Comparing Single-Agent Olaparib, Single Agent Cediranib, and the Combinations of Cediranib/Olaparib, Olaparib/Durvalumab (MEDI4736), Cediranib/Durvalumab (MEDI4736), Olaparib/AZD5363 (Capivasertib) in Women With Recurrent, Persistent or Metastatic Endometrial Cancer.: A Platform Trial for Women With Recurrent or Persistent Endometrial Cancer
<u>NRG - GY023</u>	A Randomized Phase II Trial of Triplet Therapy (a PD-L1 Inhibitor (Durvalumab) MEDI4736 in Combination With Olaparib and Cediranib) Compared to Olaparib and Cediranib or (Durvalumab) MEDI4736 and Cediranib or Standard of Care Chemotherapy in Women With Platinum-Resistant Recurrent Epithelial Ovarian Cancer, Primary Peritoneal or Fallopian Cancer Who Have Received Prior Bevacizumab



MENU

**APRIL 2022** 

Navigators - Courtney x3660 Hannah x3603 Kelsey x 3618

## **CANCER CONTROL**

	G III CEN CONTROL			
	MULTI-DISEASE SITES			
A211901	Reaching Rural Cancer Survivors Who Smoke Using Text-Based Cessation Interventions			
A222004	A Randomized Phase III Trial of Olanzapine Versus Megestrol Acetate for Cancer-Associated Anorexia			
<u>EAQ202</u>	Improving Adolescent and Young Adult Self-Reported Data in ECOG-ACRIN Trials			
PROT001/ BLUENOTE	(Peoria, Bloomington, Galesburg, Peru, Pekin and Ottawa) Double-blinded, Randomized, Adaptive Registrational Trial to Compare Effectiveness of Two Digital Software Medical Devices (Attune™ and Cerena™) as Interventions for Physical and Emotional Health in Adjunctive Oncology Treatment			
<u>\$1912CD</u>	A Randomized Trial Addressing Cancer-Related Financial Hardship Through Delivery of a Proactive Financial Navigation Intervention (CREDIT)			
<u>\$2013</u>	Immune Checkpoint Inhibitor Toxicity: A Prospective Observational Study (I-CHECKIT)			
URCC 21038	<b>COMING SOON!</b> Disparities in Results of ImmuneCheckpoint Inhibitor Treatment (DiRECT): A Prospective Cohort Study of Cancer Survivors Treated With anti-PD-1/anti-PD-L1 Immunotherapy in a Community Oncology Setting			
WF-1901	Internet-delivered Management of Pain Among Cancer Treatment Survivors (IMPACTS)			
	BREAST			
<u>A191901</u>	(Peoria, Bloomington, Galesburg, Ottawa, Pekin, and Peru) Optimizing Endocrine Therapy Through Motivational Interviewing and Text Interventions (only enrolling African American women)			
<u>URCC 16070</u>	Treatment of Refractory Nausea- for breast cancer patients.			
URCC-18007	Randomized Placebo Controlled Trial of Bupropion For Cancer Related Fatigue in stage I-III Breast cancer pts at least 2 months out from surgery/tx/radiation			
	LUNG			
	Nothing currently available for Lung only - See Multi-Disease Cancer Control trials ABOVE.			
	COLORECTAL			
A221805	Duloxetine to Prevent Oxaliplatin-Induced Chemotherapy-Induced Peripheral Neuropathy: A Randomized, Double-Blind, Placebo-Controlled Phase II to Phase III Study			
<u>\$1820</u>	Closing 4.12.22   A Randomized Trial of the Altering Intake, Managing Symptoms Intervention for Bowel Dysfunction in Rectal Cancer Survivors Compared to a Healthy Living Education Control: A Feasibility and Preliminary Efficacy Study (AIMS-RC)			

<u>WF-1806</u>	(M&M Study) Myopenia and Mechanisms of Chemotherapy Toxicity in older Adults with Colorectal Cancer		
BRAIN			
A Single Arm, Pilot Study of Ramipril for Preventing Radiation-Induced Cognitive Decline in Glioblastoma (GBM) Patients Receiving Brain Radiotherapy			
REGISTRY Contact Disease Specific Navigator			
Connect Myeloid	The Myelofibrosis (MF), Myelodysplastic Syndromes (MDS) and Acute Myeloid Leukemia (AML) Disease Registry. <i>(enrolling low risk MDS only)</i>		
NHLBI-MDS	(Peoria, Bloomington and Galesburg only) -The National Myelodysplastic Syndromes (MDS) Study		



**APRIL 2022** 

Navigator - Ashton x3611

Carrie x3621

**MENU** 

**CARCINOID** 

No trials at this time



MENU

#### **APRIL 2022**

CLL	Navigator - Heather x3661
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#### 1st Line

<b><u>\$1925</u></b> Par	elayed Therapy With Venetoclax and Obinutuzumab in Newly Diagnosed Asymptomatic High-Risk stients With Chronic Lymphocytic Leukemia/Small Lymphocytic Lymphoma (CLL/SLL): <b>EVOLVE</b> L/SLL Study
	Randomized Phase III Study of Ibrutinib Plus Obinutuzumab Versus Ibrutinib Plus Venetoclax and pinutuzumab in Untreated Older Patients (≥ 65 Years of Age) With Chronic Lymphocytic Leukemia LL)

2nd Line, 3rd Line, etc.

no trials at this time



MENU

**APRIL 2022** 

**CML** 

Navigator - Heather x3661

<u>S1712</u>

A Randomized Phase II Study of Ruxolitinib in Combination with BCR-ABL Tyrosine Kinase Inhibitors in Chronic Myeloid Leukemia Patients with Evidence of Molecular Disease.



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**APRIL 2022** 

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Navigator - Carrie x3621

#### Adjuvant

	Adjuvant			
<u>A021502</u>	Randomized Trial of Standard Chemotherapy Alone or Combined With Atezolizumab as Adjuvant Therapy for Patients With Stage III Colon Cancer and Deficient DNA Mismatch Repair			
<u>C-14</u>	Second Colorectal Cancer Clinical Validation Study to Predict Recurrence Using A Circulating Tumor DNA Assay To Detect Minimal Residual Disease (CORRECT-MRD II)			
<u>GI005</u>	Phase II/III Study of Circulating Tumor DNA as a Predictive Biomarker in Adjuvant Chemotherapy in Patients With Stage IIA Colon Cancer (COBRA)			
<u>GI008</u>	NEW! Colon Adjuvant Chemotherapy Based on Evaluation of Residual Disease			
	Metastatic			
<u>GI004</u>	A Randomized Phase III Study of mFOLFOX6/Bevacizumab/Atezolizumab Combination versus Single Agent Atezolizumab in the First-Line Treatment of Patients with Deficient DNA Mismatch Repair (dMMR)/Microsatellite Instability High (MSI-H) Metastatic Colorectal Cancer			
MK 7339-003	(Peoria, Bloomington, Galesburg, Peru) A Phase 3 Randomized, Open-label Study to Evaluate the Efficacy and Safety of Olaparib Alone or in Combination With Bevacizumab Compared to Bevacizumab with 5-FU in Participants with Unresectable or Metastatic Colorectal Cancer who Have Not Progressed Following First-line Induction of FOLFOX With Bevacizumab (LYNK-003)			
	CANCER CONTROL (Colorectal only)			
A211901	Reaching Rural Cancer Survivors Who Smoke Using Text-Based Cessation Interventions			
<u>A221805</u>	Duloxetine to Prevent Oxaliplatin-Induced Chemotherapy-Induced Peripheral Neuropathy: A Randomized, Double-Blind, Placebo-Controlled Phase II to Phase III Study			
A222004	A Randomized Phase III Trial of Olanzapine Versus Megestrol Acetate for Cancer-Associated Anorexia			
EAQ202	Improving Adolescent and Young Adult Self-Reported Data in ECOG-ACRIN Trials			
<u>\$1820</u>	Closing 4.12.22   A Randomized Trial of the Altering Intake, Managing Symptoms Intervention for Bowel Dysfunction in Rectal Cancer Survivors Compared to a Healthy Living Education Control: A Feasibility and Preliminary Efficacy Study (AIMS-RC)			

<u>\$1912CD</u>	A Randomized Trial Addressing Cancer-Related Financial Hardship Through Delivery of a Proactive Financial Navigation Intervention (CREDIT)
<u>\$2013</u>	Immune Checkpoint Inhibitor Toxicity: A Prospective Observational Study (I-CHECKIT)
<u>WF-1901</u>	Internet-delivered Management of Pain Among Cancer Treatment Survivors (IMPACTS)
<u>WF-1806</u>	(M&M Study) Myopenia and Mechanisms of Chemotherapy Toxicity in older Adults with Colorectal Cancer



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	ESOPHAGEAL- GASTRIC Navigator - Carrie x3621
<u>EA2174</u>	(RT at Glen Oak, RT-91, UPHM, Galesburg) A Phase II/III Study of Peri-Operative Nivolumab and Ipilimumab in Patients With Locoregional Esophageal and Gastroesophageal Junction Adenocarcinoma
<u>EA2183</u>	REOPENED! (RT at UPHM only) A Phase III Study of Consolidative Radiotherapy in Patients With Oligometastatic HER2 Negative Esophageal and Gastric Adenocarcinoma (EGA)



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#### **APRIL 2022**

#### **HEAD & NECK**

Navigator - Ashton x3611

<u>EA3161</u>	(RT at Glen Oak, UPH, Galesburg) A Phase II/III Randomized Study of Maintenance Nivolumab Versus Observation in Patients With Locally Advanced, Intermediate Risk HPV Positive OPSCC
<u>EA3191 - JIT</u>	<b>Temporarily Closed (RT at Route-91)</b> A Phase II Randomized Trial of Adjuvant Therapy With Pembrolizumab After Resection of Recurrent/Second Primary Head and Neck Squamous Cell Carcinoma With High Risk Features
<u>HN004</u>	<b>Temporarily Closed (RT at Glen Oak, UPHM, Galesburg)</b> -Randomized Phase II/III Trial of Radiotherapy with Concurrent MEDI4736 (Durvalumab) vs. Radiotherapy with Concurrent Cetuximab in Patients with Stage III-IVB Head and Neck Cancer with a Contraindication to Cisplatin
<u>HN005</u>	(RT at UPHM, Galesburg, Glen Oak) A Randomized Phase II/III Trial of De-Intensified Radiation Therapy for Patients With Early-Stage, P16-Positive, Non-Smoking Associated Oropharyngeal Cancer
<u>HN009</u>	Coming Soon! Randomized Phase II/III Trial of Radiation With High-Dose Cisplatin (100 mg/m2) Every Three Weeks Versus Radiation With Low-Dose Weekly Cisplatin (40 mg/m2) for Patients With Locoregionally Advanced Squamous Cell Carcinoma of the Head and Neck (SCCHN)



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#### **APRIL 2022**

Navigator - Heather x3661

#### **LYMPHOMA**

HL			
<u>\$1826</u>	(RT at Glen Oak, Rt-91, UPHM) A Phase III, Randomized Study of Nivolumab (Opdivo) Plus AVD or Brentuximab Vedotin (Adcetris) Plus AVD in Patients (Age >/= 12 Years) With Newly Diagnosed Advanced Stage Classical Hodgkin Lymphoma		
	NHL		
A Randomized 3-Arm Phase II Study Comparing 1.) Bendamustine, Rituximab and High Dose Cytarabine (BR/CR) 2.) Bendamustine, Rituximab, High Dose Cytarabine and Acalabrutinib (BR/CR-A), and 3.) Bendamustine, Rituximab and Acalabrutinib (BR-A) in Patients ≤ 70 Years Old With Untreated Mantle Cell Lymphoma			
SLL			



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IVI	

Navigator - Heather x3661

Connect Myeloid	The Myelofibrosis (MF), Myelodysplastic Syndromes (MDS) and Acute Myeloid Leukemia (AML) Disease Registry. <i>(enrolling low risk MDS only)</i>	
NHLBI-MDS	(Peoria, Bloomington and Galesburg only) - The National Myelodysplastic Syndromes (MDS) Study	
<u>M15-954</u>	(Peoria, Bloomington, Galesburg, Pekin) A Randomized, Double-Blind, Phase 3 Study Evaluating the Safety and Efficacy of Venetoclax in Combination With Azacitidine in Patients Newly Diagnosed With Higher-Risk Myelodysplastic Syndrome (Higher-Risk MDS)	





#### **APRIL 2022**

	MELANOMA	Navigator - Carrie x3621
<u>EA6194</u>	Phase II Randomized Study of Neoadjuvant Pembrolizumab Alone or in Combination With CMP-001 in Patients With Operable Melanoma: Efficacy and Biomarker Study	
A Randomized Phase 2 Trial of Encorafenib + Binimetinib + Nivolumab vs Ipilimumab + Nivoluma BRAF-V600 Mutant Melanoma With Brain Metastases		pilimumab + Nivolumab in

**MELANOMA** 



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**APRIL 2022** 

MERKEL

Navigator - Carrie x3621

**EA6174** 

**(RT at Glen Oak and Rt-91 pending)** A Phase III Randomized Trial Comparing Adjuvant MK3475 (Pembrolizumab) to Standard of Care Observation in Completely Resected Merkel Cell Carcinoma





#### **APRIL 2022**

#### **MOLECULAR STUDIES**

\*Contact Disease Specifc Navigator

2215-MA-3297 / CLEVO	<b>Activation Pending</b> - A non-interventional cohort study of the CLonal EVOlution of <i>FLT3</i> mutations during disease progression in patients with acute myeloid leukemia - CLEVO	
64091742PCR0002 / Prevalence	Biomarker Study to Determine Frequency of DNA-repair Defects in Men with Metastatic Prostate Cancer (Prevelence)	
<u>A151804</u>	Establishment of a National Biorepository to Advance Studies of Immune-Related Adverse Events	
<u>NSABP C-14</u>	Second Colorectal Cancer Clinical Validation Study to Predict Recurrence Using A Circulating Tumor DNA Assay To Detect Minimal Residual Disease (CORRECT-MRD II)	
<u>\$1823</u>	A Study of miRNA 371 in Patients With Germ Cell Tumor (closed to high risk pts or pts on chemo for testicular cancer)	
<u>TPX-0005-01 (TRIDENT-1)</u>	A Phase 1/2, Open-Label, Multi-Center, First-in-Human Study of the Safety, Tolerability, Pharmacokinetics, and Anti-Tumor Activity of TPX-0005 in Patients with <b>Advanced Solid Tumors Harboring ALK, ROS1, or NTRK1-3 Rearrangements</b> (TRIDENT-1)	



MENU

#### **APRIL 2022**

#### **MULTIPLE MYELOMA**

Navigator - Heather x3661

<u>EAA171</u>	Optimizing Prolonged Treatment in Myeloma Using MRD Assessment (OPTIMUM)	
<u>\$1803</u>	Phase III Study of Daratumumab/rHuPH20 (NSC- 810307) + Lenalidomide or Lenalidomide as Post-Autologous Stem Cell Transplant Maintenance Therapy in Patients with Multiple Myeloma (MM) Using Minimal Residual Disease to Direct Therapy Duration (DRAMMATIC Study)	



**MENU** 

#### **APRIL 2022**

**NSCLC** 

Navigator - Ashton x3611

#### ADJUVANT / NEOADJUVANT

,		
<u>A081801</u>	<b>REOPENED!</b> Integration of Immunotherapy Into Adjuvant Therapy for Resected NSCLC: ALCHEMIST Chemo-IO (ALCHEMIST substudy- <i>Must be enrolled on ALCHEMIST and this substudy prior to start of tx</i> ).	
<u>A151216</u>	Adjuvant Lung Cancer Enrichment Marker Identification and Sequencing Trial (ALCHEMIST).	
<u>EA5181</u>	(RT at UPHM and Galesburg) Randomized Phase III Trial of MEDI4736 (Durvalumab) as Concurrent and Consolidative Therapy or Consolidative Therapy Alone for Unresectable Stage 3 NSCLC (credentialing pending at Glen Oak & Rt-91)	
GO41854	(Bloomington, Galesburg, Pekin, Peoria, Peru) A Phase III, Open Label, Randomized Study of Atezolizumab and Tiragolumab Compared With Durvalumab in Patients With Locally Advanced, unresectable Stage III Non-Small Cell Lung Cancer Who Have Not Progressed After Concurrent Platinum-Based Chemoradiation (SKYSCRAPER-03)	
<u>\$1914</u>	(RT at Glen Oak, UPHM, Galesburg) Randomized Phase III Trial of Induction/Consolidation Atezolizumab (NSC #783608) + SBRT Versus SBRT Alone in High Risk, Early Stage NSCLC	
<u>\$1933</u>	(RT at UPHM only) A Pilot Study of Hypofractionated Radiotherapy Followed by Atezolizumab Consolidation in Stage II or III NSCLC Patients With Borderline Performance Status	
<u>S1934 (JIT)</u>	Randomized Phase II Trial of Trimodality +/- Atezolizumab in Resectable Superior Sulcus Non-Small Cell Lung Cancer. <b>NASSIST</b> (Neoadjuvant Chemoradiation +/- Immunotherapy Before Surgery for Superior Sulcus Tumors)	

#### **METASTATIC - 1st Line**

EA5163/S1709 INSIGNA	<b>Temporarily Closed</b> A Randomized, Phase III Study of Firstline Immunotherapy alone or in Combination with Chemotherapy in Induction/Maintenance or Postprogression in Advanced Nonsquamous Non-Small Cell Lung Cancer (NSCLC) with Immunobiomarker SIGNature-driven Analysis
EA5182	Randomized Phase III Study of Combination AZD9291 (osimertinib) and Bevacizumab versus AZD9291 (osimertinib) Alone as First-Line Treatment for Patients with Metastatic EGFR-Mutant Non-Small Cell Lung Cancer (NSCLC)
<u>LU002</u>	<b>Temporarily Closed (RT at Glen Oak, UPHM, Galesburg)</b> - Maintenance Systemic Therapy Versus Consolidative Stereotactic Body Radiation Therapy (SBRT) Plus Maintenance Systemic Therapy for Limited Metastatic Non-Small Cell Lung Cancer (NSCLC): A Randomized Phase II/III Trial
MK 7684A-003	(Peoria only) A Phase 3, Multicenter, Randomized, Double-Blind Study of MK-7684 with Pembrolizumab as a Coformulation (MK-7684A) Versus Pembrolizumab Monotherapy as First Line Treatment for Participants With PD-L1 Positive Metastatic Non-Small Cell Lung Cancer
TH-138	(Peoria, Bloomington, Galesburg, Pekin) Phase II Randomized Trial of Carboplatin + Pemetrexed+ Bevacizumab, With or Without Atezolizumab in Stage IV Non-Squamous NSCLC Patients Who Harbor a Sensitizing EGFR Mutation or Have Never Smoked (non smokers)

#### **METASTATIC - 2nd/3rd Line**

A Randomized Phase II Trial of Cabozantinib and Cabozantinib Plus Nivolumab Versus Standard Chemotherapy in Patients With Previously Treated Non-Squamous NSCLC

<u>LUNGMAP</u>	A Master Protocol To Evaluate Biomarker-Driven Therapies and Immunotherapies in Previously-Treated NSCLC.  (SUB-STUDIES: S1800D - A Phase II/III Study of N-803 (ALT-803) plus Pembrolizumab versus Standard of Care in Participants with Stage IV or Recurrent Non-Small Cell Lung Cancer Previously Treated with Anti-PD-1 or Anti-PD-L1 Therapy; S1900E - A Phase II Study of AMG 510 in Participants With Previously Treated Stage IV or Recurrent KRAS G12C Mutated Non-Squamous Non-Small Cell Lung Cancer)
MK 7684A-002	(Peoria only) A Phase II, Multicenter, Randomized Study to Compare the Efficacy and Safety of MK-7684A or MK-7684A Plus Docetaxel Versus Docetaxel Monotherapy in the Treatment of Participants With Metastatic NSCLC With Progressive Disease After Treatment With a Platinum Doublet Chemotherapy and Immunotherapy.
<u>TH-138</u>	(Peoria, Bloomington, Galesburg, Pekin) Phase II Randomized Trial of Carboplatin + Pemetrexed+ Bevacizumab, With or Without Atezolizumab in Stage IV Non-Squamous NSCLC Patients Who Harbor a Sensitizing EGFR Mutation or Have Never Smoked (EGFR mutants)
	CANCER CONTROL (NSCLC Only)
A211901	Reaching Rural Cancer Survivors Who Smoke Using Text-Based Cessation Interventions
<u>A222004</u>	A Randomized Phase III Trial of Olanzapine Versus Megestrol Acetate for Cancer-Associated Anorexia
<u>EAQ202</u>	Improving Adolescent and Young Adult Self-Reported Data in ECOG-ACRIN Trials
PROT001/ BLUENOTE	(Peoria, Bloomington, Galesburg, Peru, Pekin and Ottawa) Double-blinded, Randomized, Adaptive Registrational Trial to Compare Effectiveness of Two Digital Software Medical Devices (Attune™ and Cerena™) as Interventions for Physical and Emotional Health in Adjunctive Oncology Treatment
<u>\$1912CD</u>	A Randomized Trial Addressing Cancer-Related Financial Hardship Through Delivery of a Proactive Financial Navigation Intervention (CREDIT)
<u>\$2013</u>	Immune Checkpoint Inhibitor Toxicity: A Prospective Observational Study (I-CHECKIT)
<u>WF-1901</u>	Internet-delivered Management of Pain Among Cancer Treatment Survivors (IMPACTS)





<u>A021806</u>	A Phase III Trial of Perioperative Versus Adjuvant Chemotherapy for Resectable Pancreatic Cancer	
<u>EA2186</u>	A Randomized Phase II Study of Gemcitabine and Nab-Paclitaxel Compared With 5-Fluorouracil, Leucovorin, and Liposomal Irinotecan in Older Patients With Treatment Naïve Metastatic Pancreatic Cancer (GIANT)	
<u>EA2192</u>	A Randomized Phase II Double-Blind Study of Olaparib Versus Placebo Following Adjuvant Chemotherapy in Patients With Resected Pancreatic Cancer and a Pathogenic BRCA1, BRCA2 or PALB2 Mutation (APOLLO)	



**MENU** 

	PROSTATE	Navigator - Carrie x3621
ADJUVANT		
<u>EA8183</u>	(RT at UPHM only) A Phase III Double Blinded Study of Early Intervention After RADICAL ProstaTEctomy With Androgen Deprivation Therapy With or Without Darolutamide vs. Placebo in Men at Highest Risk of Prostate Cancer Metastasis by Genomic Stratification (ERADICATE)	
<u>GU002</u>	(RT at Glen Oak, UPHM, and Rt-91)—Phase II-III Trial of Adjuvant radiotherapy and Androgen Deprivation Following radical Prostatectomy with or without Adjuvant Docetaxel	
<u>GU005</u>	(RT at Glen Oak & UPHM)-Phase II IGRT and SBRT vs. IGRT and hypofractionate IMRT for Localized Intermediate Risk Prostate Cancer.	
<u>GU008</u>	(RT at Glen Oak, UPHM; pending @ Galesburg) Randomized Phase III Trial Incorporating Apalutamide and Advanced Imaging Into Treatment for Patients With Node-Positive Prostate Cancer After Radical Prostatectomy (INNOVATE): Intensifying Treatment for Node Positive Prostate Cancer by Varying the Hormonal Therapy	
<u>GU009</u>	(RT at Glen Oak, Galesburg, UPHM; Credentialing Pending @ Rt 91) Parallel Phase III Randomized Trials for High Risk Prostate Cancer Evaluating De-Intensification for Lower Genomic Risk and Intensification of Concurrent Therapy for Higher Genomic Risk With Radiation (PREDICT-RT*)	
GU010	(RT at UPHM) Parallel Phase III Randomized Trials of Genomic-Risk Stratified Unfavorable Intermediate Risk Prostate Cancer: De-Intensification and Intensification Clinical Trial Evaluation (GUIDANCE)	
METASTATIC		

64091742PCR0002 / Prevalence	Biomarker Study to Determine Frequency of DNA-repair Defects in Men with Metastatic Prostate Cancer
<u>C2321001</u>	(Peoria only) A Phase I Dose Escalation and Expanded Cohort Study of PF-06821497 in the Treatment of Adult Patients with Relapsed/Refractory Small Cell Lung Cancer (SCLC), Castration Resistant Prostate Cancer (CRPC) and Follicular Lymphoma (FL)
A031902 / CASPAR	A Phase III Trial of Enzalutamide and Rucaparib as a Novel Therapy in First-Line Metastatic Castration-Resistant Prostate Cancer
<u>GU011</u>	Coming Soon! (RT pending @ Glen Oak, Rt 91) A Phase II Double-Blinded, Placebo-Controlled Trial of PROstate OligoMETastatic RadiotHErapy With or Without ANdrogen Deprivation Therapy in Oligometastatic Prostate Cancer (NRG Promethean)
<u>\$1802</u>	(RT at Glen Oak & UPHM) Phase III Randomized Trial of Standard Systemic Therapy (SST) versus Standard Systemic Therapy Plus Definitive Treatment (Surgery or Radiation) of the Primary Tumor in Metastatic Prostate Cancer



MENU

RENAL CELL	Navigator - Carrie x3621

<u>A031704</u>	PD-Inhibitor (nivolumab) and Ipilimumab Followed by Nivolumab vs. VEGF TKI Cabozantinib with Nivolumab: A Phase III Trial in Metastatic Untreated Renal Cell Cancer (PDIGREE)
MK 6482-011	(Peoria, Bloomington, Galesburg, Pekin) An Open-label, Randomized, Phase 3 Study of MK-6482 in Combination with Lenvatinib (MK-7902) vs Cabozantinib for Second-line or Third-line Treatment in Participants with Advanced Renal Cell Carcinoma Who Have Progressed After Prior Anti-PD-1/L1 Therapy
<u>\$1931</u>	Phase III Trial of Immunotherapy-Based Combination Therapy With or Without Cytoreductive Nephrectomy for Metastatic Renal Cell Carcinoma (PROBE Trial)



**MENU** 

	RADIATION TRIALS	Navigator - Jessica x3615
CANCER CONTROL		
<u>WF-1801</u>	A Single Arm, Pilot Study of Ramipril for Preventing Radiation-Induced Cognitive Decline in Glioblastoma (GBM) Patients Receiving Brain Radiotherapy	
ANAL		
<u>EA2182</u>	(UPHM and Glen Oak) A Randomized Phase II Study of De-Intensified ChemoRadiation for Early-Stage Anal Squamous Cell Carcinoma (DECREASE)	
BLADDER		
<u>A032002</u>	(RT at Glen Oak) Phase II Randomized Trial of Atezolizumab Versus Atezolizumab and Radiation Therapy for Platinum Ineligible/Refractory Metastatic Urothelial Cancer (ART)	
<u>EA8185</u>	(RT pending at Glen Oak & Rt-91) Phase 2 Study of Bladder-Sparing Chemoradiation With MEDI4736 (Durvalumab) in Clinical Stage 3, Node Positive Bladder Cancer (INSPIRE)	
<u>\$1806</u>	(Glen Oak, UPHM and Galesburg) Phase III Randomized Trial of Concurrent Chemoradiotherapy with or without Atezolizumab in Localized Muscle Invasive Bladder Cancer	
BRAIN		
<u>BN007</u>	(UPHM, Glen Oak, Galesburg) A Randomized Phase II/III Open-Label Study of Versus Temozolomide in Patients With Newly Diagnosed MGMT (Tumor O-6-I Methyltransferase) Unmethylated Glioblastoma	-
<u>N0577</u>	(Glen Oak, RT 91, and UPHM) Phase III Intergroup Study of Radiotherapy with Concomitant and Adjuvant Temozolomide versus Radiotherapy with Adjuvant PCV Chemotherapy in Patients with 1p/19q Co-deleted Anaplastic Glioma or Low Grade Glioma	
BRAIN METS		
<u>A071801</u>	(UPHM & Glen Oak) Phase III Trial of Post-Surgical Single Fraction Stereotactic With Fractionated SRS for Resected Metastatic Brain Disease	c Radiosurgery (SRS) Compared

CCTG CE.7	(UPHM & Glen Oak)- A Phase III Trial of Stereotactic Radiosurgery Compared with Whole Brain Radiotherapy (WBRT) for 5-15 Brain Metastases
BREAST	
<u>A011202</u>	<b>Temporarily Closed</b> (Glen Oak, Rt 91, UPHM, Galesburg) A Randomized Phase III Trial Evaluating the Role of Axillary Lymph Node Dissection in breast Cancer Patients (cT1-3 N1) Who Have Positive Lymph Node Disease After Neoadjuvant Chemotherapy.
<u>BR007</u>	(Galesburg, Glen Oak, Rt 91, UPHM) Phase III Clinical Trial Evaluating De-Escalation of Breast Radiation for Conservative Treatment of Stage I, Hormone Sensitive, HER-2 Negative, Oncotype Recurrence Score Less Than or Equal to 18 Breast Cancer
<u>MA.39</u>	(Glen Oak and UPHM) Tailor RT: A Randomized Trial of Regional Radiotherapy in Biomarker Low Risk Node Positive Breast Cancer
ESOPHAGEAL/GASTRIC	
<u>EA2174</u>	(Glen Oak, UPHM, Galesburg) A Phase II/III Study of Peri-Operative Nivolumab and Ipilimumab in Patients With Locoregional Esophageal and Gastroesophageal Junction Adenocarcinoma
<u>EA2183</u>	<b>REOPENED! (UPHM only)</b> A Phase III Study of Consolidative Radiotherapy in Patients With Oligometastatic HER2 Negative Esophageal and Gastric Adenocarcinoma (EGA)
HEAD & NECK	
<u>EA3161</u>	(Glen Oak, UPH, Galeburg) A Phase II/III Randomized Study of Maintenance Nivolumab Versus Observation in Patients With Locally Advanced, Intermediate Risk HPV Positive OPSCC
<u>HN005</u>	(UPHM, Galesburg, Glen Oak) A Randomized Phase II/III Trial of De-Intensified Radiation Therapy for Patients With Early-Stage, P16-Positive, Non-Smoking Associated Oropharyngeal Cancer
<u>HN009</u>	<b>Coming Soon!</b> Randomized Phase II/III Trial of Radiation With High-Dose Cisplatin (100 mg/m2) Every Three Weeks Versus Radiation With Low-Dose Weekly Cisplatin (40 mg/m2) for Patients With Locoregionally Advanced Squamous Cell Carcinoma of the Head and Neck (SCCHN)
HODGKIN'S LYMPHOMA	
<u>\$1826</u>	(Glen Oak, Rt-91, UPHM) A Phase III, Randomized Study of Nivolumab (Opdivo) Plus AVD or Brentuximab Vedotin (Adcetris) Plus AVD in Patients (Age >/= 12 Years) With Newly Diagnosed Advanced Stage Classical Hodgkin Lymphoma

MERKEL CELL	
EA6174	<b>(UPHM and Galesburg)</b> A Phase III Randomized Trial Comparing Adjuvant MK3475 (Pembrolizumab) to Standard of Care Observation in Completely Resected Merkel Cell Carcinoma
NSCLC	
<u>EA5181</u>	(UPHM and Galesburg) Randomized Phase III Trial of MEDI4736 (Durvalumab) as Concurrent and Consolidative Therapy or Consolidative Therapy Alone for Unresectable Stage 3 NSCLC (credentialing pending at Glen Oak)
<u>LU002</u>	<b>Temporarily Closed (Glen Oak, UPHM, Galesburg)</b> - Maintenance Systemic Therapy Versus Consolidative Stereotactic Body Radiation Therapy (SBRT) Plus Maintenance Systemic Therapy for Limited Metastatic Non-Small Cell Lung Cancer (NSCLC): A Randomized Phase II/III Trial
<u>\$1914</u>	(Glen Oak, UPHM, Galesburg) Randomized Phase III Trial of Induction/Consolidation Atezolizumab (NSC #783608) + SBRT Versus SBRT Alone in High Risk, Early Stage NSCLC
<u>\$1933</u>	(UPHM only) A Pilot Study of Hypofractionated Radiotherapy Followed by Atezolizumab Consolidation in Stage II or III NSCLC Patients With Borderline Performance Status
PROSTATE	
EA8183	(RT at UPHM only) A Phase III Double Blinded Study of Early Intervention After RADICAI ProstaTEctomy With Androgen Deprivation Therapy With or Without Darolutamide vs. Placebo in Men at Highest Risk of Prostate Cancer Metastasis by Genomic Stratification (ERADICATE)
<u>GU002</u>	(RT at Glen Oak, UPHM, and Rt-91)—Phase II-III Trial of Adjuvant radiotherapy and Androgen Deprivation Following radical Prostatectomy with or without Adjuvant Docetaxel
<u>GU005</u>	(RT at Glen Oak & UPHM)-Phase II IGRT and SBRT vs. IGRT and hypofractionate IMRT for Localized Intermediate Risk Prostate Cancer.
<u>GU008</u>	(RT at Glen Oak, UPHM; pending @ Galesburg) Randomized Phase III Trial Incorporating Apalutamide and Advanced Imaging Into Treatment for Patients With Node-Positive Prostate Cancer After Radical Prostatectomy (INNOVATE): Intensifying Treatment for Node Positive Prostate Cancer by Varying the Hormonal Therapy

<u>GU009</u>	(RT at Glen Oak, Galesburg, UPHM) Parallel Phase III Randomized Trials for High Risk Prostate Cancer Evaluating De-Intensification for Lower Genomic Risk and Intensification of Concurrent Therapy for Higher Genomic Risk With Radiation (PREDICT-RT*)
<u>GU010</u>	(RT at UPHM) Parallel Phase III Randomized Trials of Genomic-Risk Stratified Unfavorable Intermediate Risk Prostate Cancer: De-Intensification and Intensification Clinical Trial Evaluation (GUIDANCE)
<u>GU011</u>	Coming Soon! (RT pending @ Glen Oak , Rt 91) A Phase II Double-Blinded, Placebo-Controlled Trial of PROstate OligoMETastatic RadiotHErapy With or Without ANdrogen Deprivation Therapy in Oligometastatic Prostate Cancer (NRG Promethean)
<u>\$1802</u>	(Glen Oak & UPHM) Phase III Randomized Trial of Standard Systemic Therapy (SST) versus Standard Systemic Therapy Plus Definitive Treatment (Surgery or Radiation) of the Primary Tumor in Metastatic Prostate Cancer
<u>WF-1802</u>	(Glen Oak, Rt-91, UPHM, Galesburg) Influence of Primary Treatment for Prostate Cancer on Work Experience (PCW)
SCLC	
NRG CC003	(Glen Oak only) Randomized Phase II/III Trial of Prophylactic Cranial Irradiation with or without Hippocampal Avoidance for Small Cell Lung Cancer
NRG CC009	(Glen Oak) - Phase III Trial of Stereotactic Radiosurgery (SRS) versus Hippocampal-Avoidant Whole Brain Radiotherapy (HA-WBRT) for 10 or fewer Brain Metastases from Small Cell Lung Cancer
<u>LU005</u>	(Glen Oak, UPHM and Galesburg) Limited Stage Small Cell Lung Cancer (LS-SCLC): A Phase II/III Randomized Study of Chemoradiation Versus Chemoradiation Plus Atezolizumab
LU007 / RAPTOR	(Glen Oak, UPHM, Galesburg) – Randomized Phase II/III Trial of Consolidation RT + Immunotherapy for ES-SCLC
<u>\$1827</u>	(Glen Oak, UPHM, Galesburg) A Randomized Phase III Trial of MRI Surveillance With or Without Prophylactic Cranial Irradiation (PCI) in Small-Cell Lung Cancer



## **MASTER TRIAL LIST**

MENU

**APRIL 2022** 

## **SMALL CELL LUNG CANCER**

Navigator - Ashton x3611

NRG CC003	(RT at Glen Oak only) Randomized Phase II/III Trial of Prophylactic Cranial Irradiation with or without Hippocampal Avoidance for Small Cell Lung Cancer
NRG CC009	(RT at Glen Oak; pending at Galesburg) - Phase III Trial of Stereotactic Radiosurgery (SRS) versus Hippocampal-Avoidant Whole Brain Radiotherapy (HA-WBRT) for 10 or fewer Brain Metastases from Small Cell Lung Cancer
<u>GO43104</u>	(Peoria, Bloomington, Galesburg, Ottawa, Pekin, Peru, Washington) A Phase III, Randomized, Open- Label, Multicenter Study of Lurbinectedin In Combination With Atezolizumab Compared With Atezolizumab As Maintenance Therapy In Participants With Extensive-Stage Small-Cell Lung Cancer (ES-SCLC) Followiing First-Line Induction Therapy With Carboplatin, Etoposide and Atezolizumab
<u>LU005</u>	(RT at Glen Oak, UPHM and Galesburg) Limited Stage Small Cell Lung Cancer (LS-SCLC): A Phase II/III Randomized Study of Chemoradiation Versus Chemoradiation Plus Atezolizumab
LU007 / RAPTOR	(RT at Glen Oak, UPHM, Galesburg) – Randomized Phase II/III Trial of Consolidation RT + Immunotherapy for ES-SCLC
<u>\$1827</u>	(RT at Glen Oak, UPHM, Galesburg) A Randomized Phase III Trial of MRI Surveillance With or Without Prophylactic Cranial Irradiation (PCI) in Small-Cell Lung Cancer
<u>\$1929</u>	Phase II Randomized Study of Maintenance Atezolizumab Versus Atezolizumab in Combination With Talazoparib in Patients With SLFN11 Positive Extensive Stage Small Cell Lung Cancer (ES-SCLC) Tissue screening allowed during induction chemotherapy



## **MASTER TRIAL LIST**

MENU

**APRIL 2022** 

**VULVA** 

Navigator - Angie x3613

#### BMS-CA017-078 SCHEMA

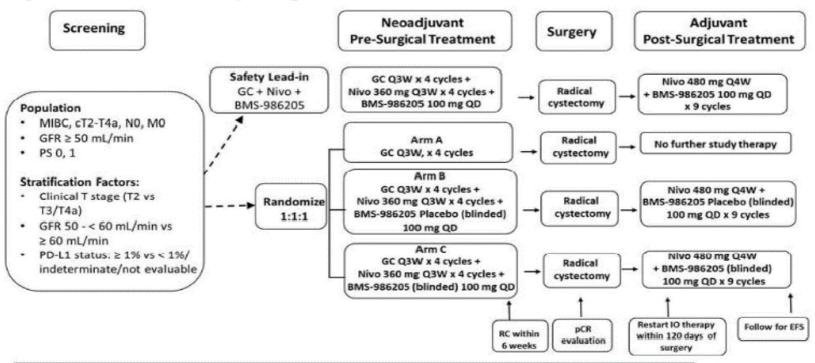
Navigator - Carrie x3621



\*BMS-986205/placebo tablets have been discontinued.

Clinical Protocol BMS-986205 CA017078 IDO1 inhibitor

## Figure 1-1: Study Design Schematic



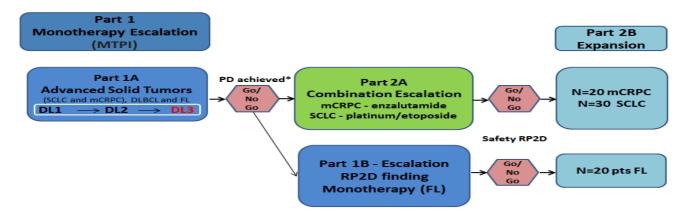
#### Chemotherapy:

- GFR ≥ 60 mL/min: standard GC (cisplatin 70 mg/m² D1, gemcitabine 1000 mg/m² D1, D8, 21D cycles
- GFR < 60 mL/min: split-dose GC (cisplatin 35 mg/m<sup>2</sup> D1, D8, gemcitabine 1000 mg/m<sup>2</sup> D1, D8, 21D cycles

## C2321001 SCHEMA

**Contact Disease Specific Navigator** 





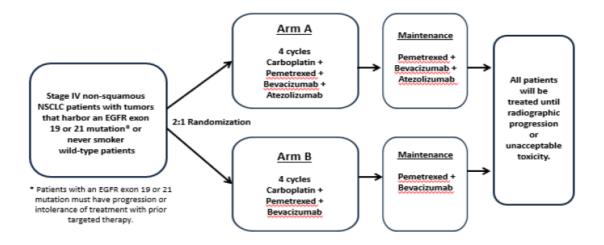
\*50-70% down modulation of H3K27me3

## TH-138 (NCCN) SCHEMA

Navigator - Ashton x3611

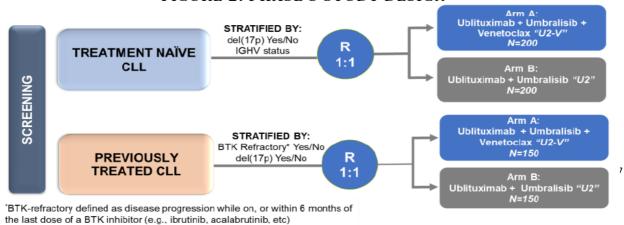


# **Study Design**



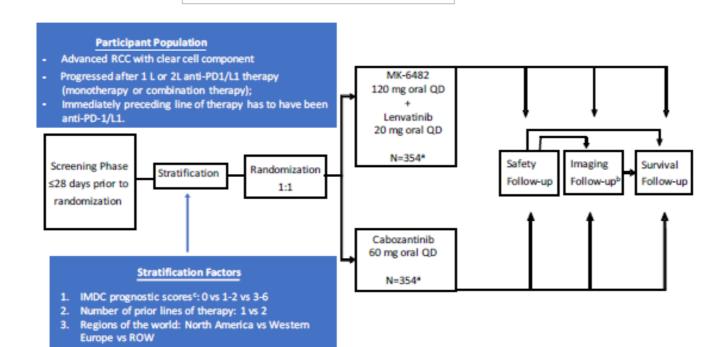
US-VEN-207 (ULTRA-V ) Schema Navigator - Heather x3661 MENU

## FIGURE 2: PHASE 3 STUDY DESIGN



## MK 6482-011 Schema Navigator - Carrie x3621

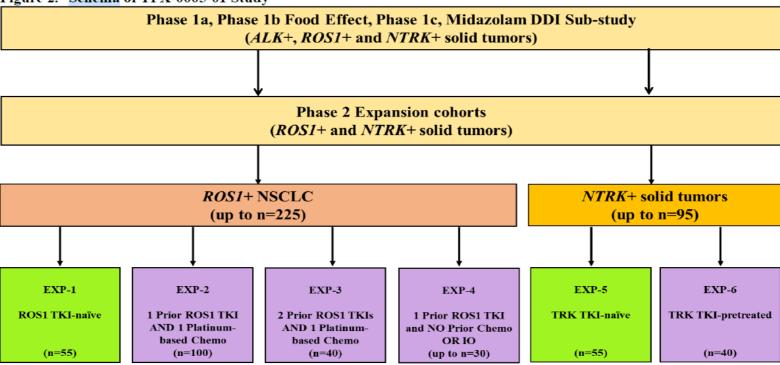




# TPX-0005-01 Schema Contact Disease Site Specific Navigator



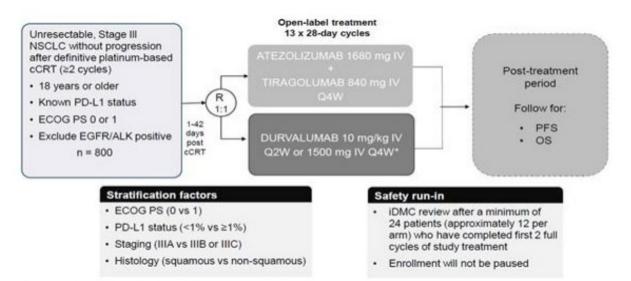
Figure 2. Schema of TPX-0005-01 Study



## **MENU**

## GO41854 Schema

Navigator - Ashton x3611

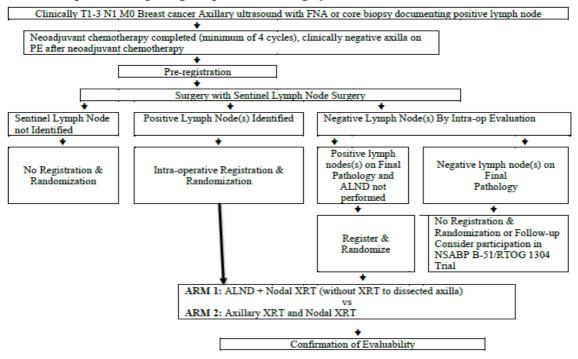


<sup>\*</sup>For patients whose weight ≥30 kg

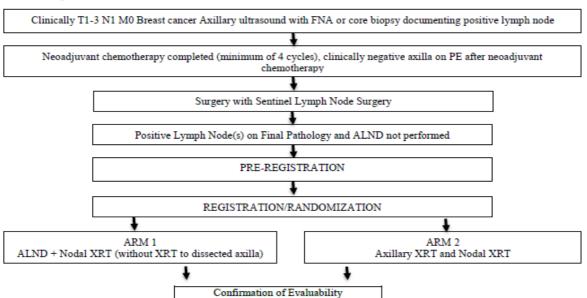
## MENU

# A011202 SCHEMA Navigator Angie x3613

## Schema for patients who pre-register prior to SLN surgery:

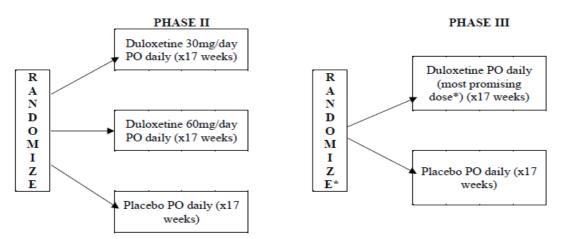


Schema for patients who pre-register AFTER surgery  $\star$  (where SLN surgery was performed but ALND was NOT performed):



<sup>\*</sup> Patients who are pre-registered after SLN surgery are NOT eligible to enroll onto the Arm Lymphedema Companion Study (A011201-SII)

#### Schema



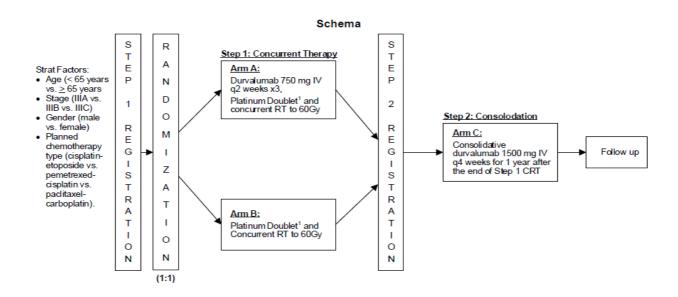
All patients will receive oxaliplatin on both phases of the trial. Further, for all patients the 17th week of study drug will be a tapering period.

\* Additional patients will be recruited to the Phase III trial. The most promising dose of duloxetine will be determined after initial Phase II, and this dose will be used for Phase III for patients randomized to the duloxetine arm.

#### **EA5181 SCHEMA**

Navigator - Ashton x3611



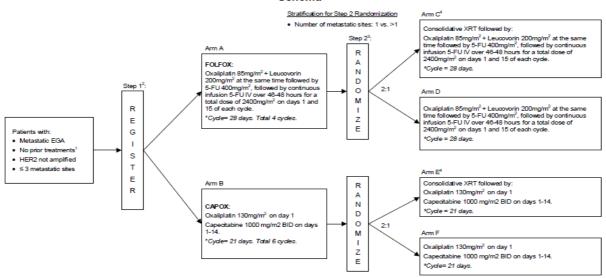


#### EA2183 SCHEMA

Navigator - Carrie x3621



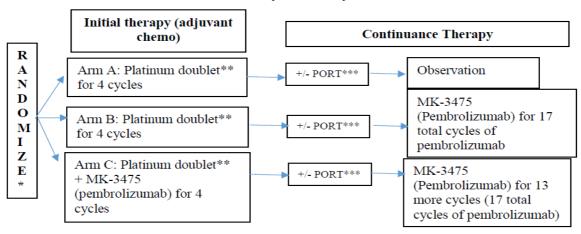
#### Schema



## A081801 SCHEMA Navigator - Ashton x3611

MENU

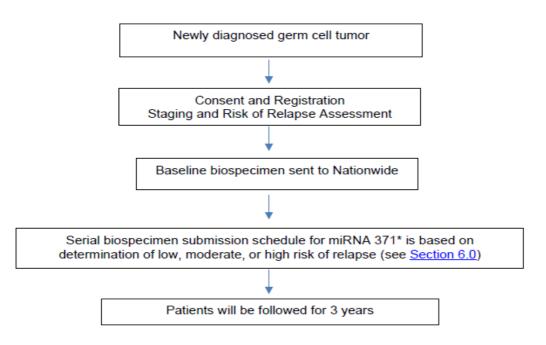
Schema: 1 cycle = 21 days



## S1823 SCHEMA Navigator - Carrie x3621



## **SCHEMA**

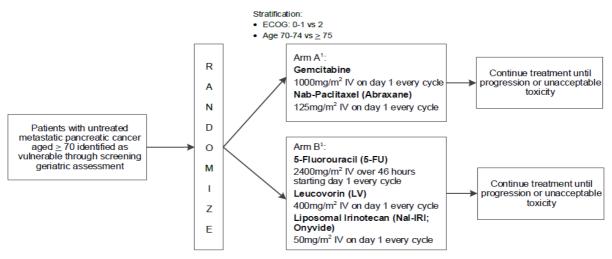


Patients and providers will not have knowledge of the results of the miRNA 371 analysis.

## EA2186 SCHEMA Navigator - Carrie x3621

## MENU

#### Schema



# NRG CC003 SCHEMA Navigator - Jessica x3615



Histologic proof or unequivocal cytologic proof of SCLC

#### STEP 1 REGISTRATION

## STEP 2 REGISTRATION/RANDOMIZATION

Baseline neurocognitive assessment: HVLT-R, TMT, COWA (required)

Note: Neurocognitive assessments must be uploaded prior to Step 2 Registration and
can be uploaded at the time of Step 1 Registration.

## STRATIFICATION

Stage: Limited vs. Extensive Age: < 60 years old vs. ≥ 60 years old Planned Concurrent Memantine Use: Yes vs. No

## Arm 1

PCI Alone (25 Gy in 10 Fractions)

## Arm 2

PCI with Hippocampal Avoidance using IMRT (25 Gy in 10 Fractions)

## S1933 SCHEMA Navigator - Jessica x3615



## **SCHEMA**

## **REGISTRATION STEP 1**

60 Gy hypofractionated radiotherapy in 15 fractions over 3 weeks

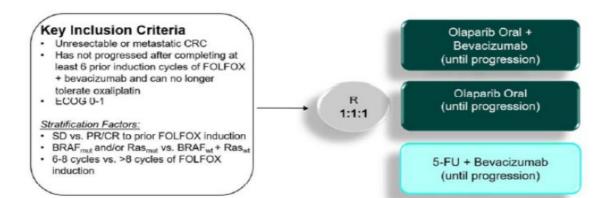
2-5 weeks after completion of radiotherapy: disease assessment

Progression No Progression
Off protocol treatment REGISTRATION STEP 2

Atezolizumab consolidation for up to 12 months (maximum of 17 cycles)

## Merck 7339-003 / LYNK-003 SCHEMA Navigator - Carrie x3621





## NRG BN007 Navigator -Carrie x3621



## STEP 1 REGISTRATION

Central Pathology Review for confirmation of glioblastoma (GBM) histology and of unmethylated MGMT promotor status

NOTE: Tumor tissue must be received and central review confirmation completed before STEP 2 registration can occur.

## STEP 2 REGISTRATION

#### STRATIFY

- · Recursive partioning analysis (RPA) (III vs IV vs V)
- Intent to use Optune (yes vs no)

## RANDOMIZE (1:1)

Arm 1

Radiation Therapy
plus
Concomitant temozolomide
plus
Adjuvant temozolomide

(Optune allowed)

Arm 2

Radiation Therapy plus Concomitant ipilimumab and nivolumab

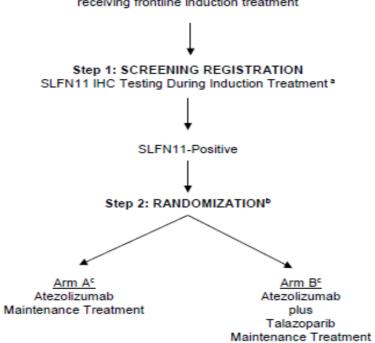
plus Adjuvant ipilimumab and nivolumab

(Optune not allowed)

## S1929 Navigator -Ashton x3611

## **MENU**

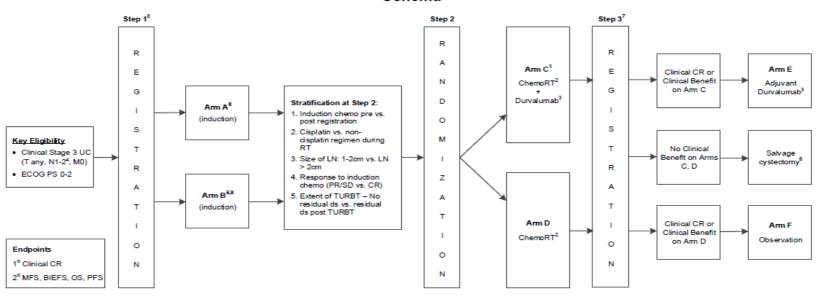
Participants with Extensive Stage SCLC receiving frontline induction treatment

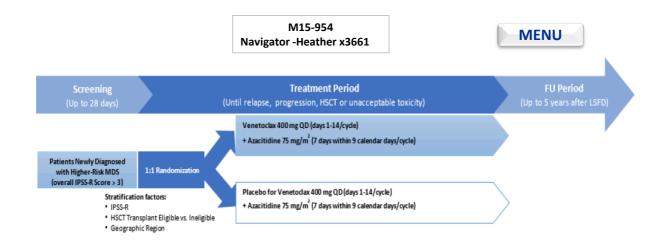


## EA8185 Navigator -Carrie x3621



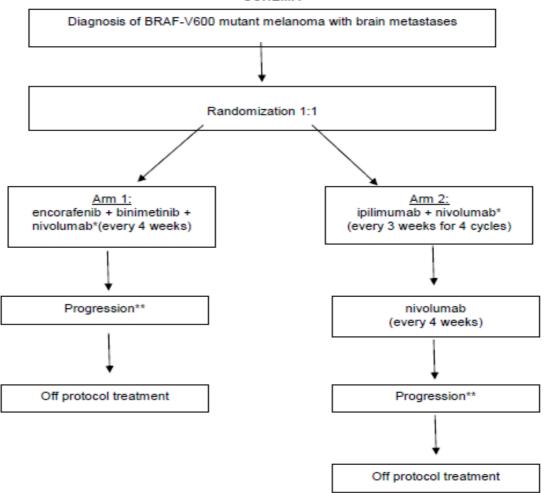
## Schema





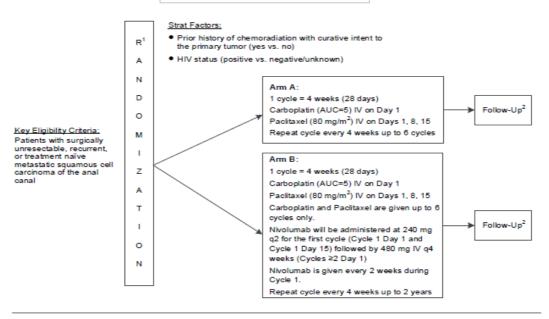
FU = follow up; HSCT = hematopoietic stem cell transplant; IPSS-R = Revised International Prognostic Scoring System; LSFD = last subject first dose; MDS = myelodysplastic syndrome; QD = once daily

## **SCHEMA**



## EA2176 Navigator -Carrie x3621





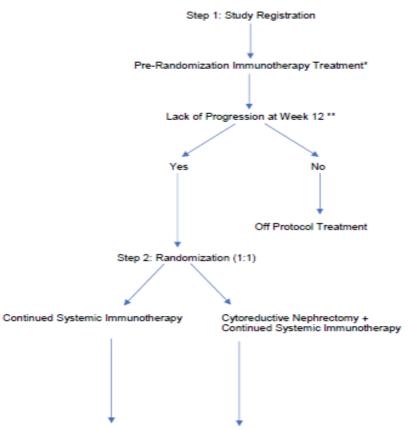
<sup>1.</sup> Randomization is 1:2 (A:B).

<sup>2.</sup> For this protocol, all patients, including those who discontinue protocol therapy early, will be followed for response until disease progression, even if non-protocol therapy is initiated, and for survival every 3 months for two years from the date of randomization. All patients must also be followed through completion of all protocol therapy.

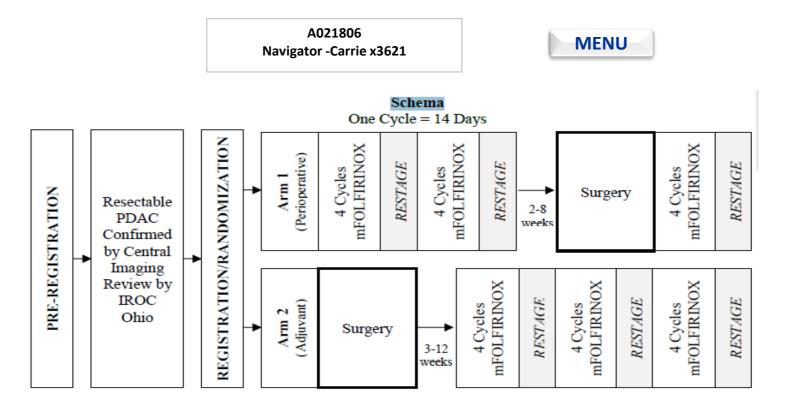
## S1931 Navigator -Carrie x3621

## **MENU**

## **SCHEMA**



Follow-Up 7 years from Randomization



Treatment/intervention is to continue as outlined above or until disease recurrence, unacceptable toxicity, or withdrawal of consent. Patients will be followed for 6 years or until death, whichever comes first.

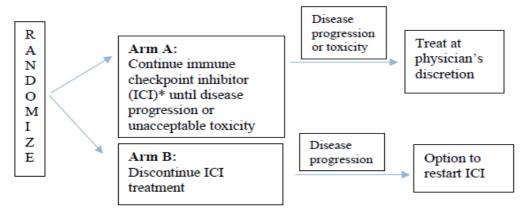
#### MK-6482-011 **MENU** Navigator - Carrie x3621 **Participant Population** Advanced RCC with clear cell component Progressed after 1 L or 2L anti-PD1/L1 therapy (monotherapy or combination therapy); MK-6482 120 mg oral QD Immediately preceding line of therapy has to have been anti-PD-1/L1. Lenvatinib 20 mg oral QD N=354<sup>a</sup> Safety Imaging Survival Screening Phase Randomization Stratification Follow-up Follow-up Follow-up ≤28 days prior to 1:1 randomization Cabozantinib 60 mg oral QD Stratification Factors N=354a 1. IMDC prognostic scorese: 0 vs 1-2 vs 3-6 Number of prior lines of therapy: 1 vs 2 Regions of the world: North America vs Western Europe vs ROW

BICR=blinded independent central review; DMC=Data Monitoring Committee; IMDC=International Metastatic Renal Cell Carcinoma Database Consortium; QD=once daily; RCC=renal cell carcinoma; ROW=rest of world; TKI=tyrosine kinase inhibitor; US=United States; VEGF=vascular endothelial growth factor.

## A031901 Navigator -Carrie x3621

#### Schema

Cycle definition is based on ICI cycle length



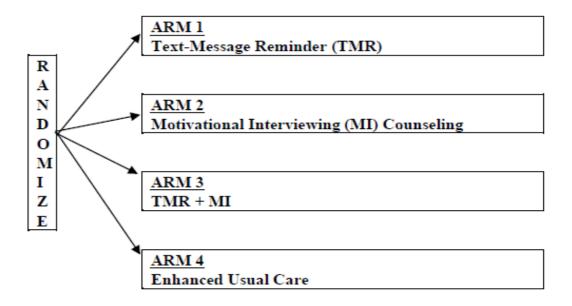
\* ICI agents include pembrolizumab, nivolumab, atezolizumab, durvalumab and avelumab

Patients will be followed for 5 years or until death or withdrawal of consent, whichever occurs first.

## A191901 Navigator -Hannah x3603



## Schema

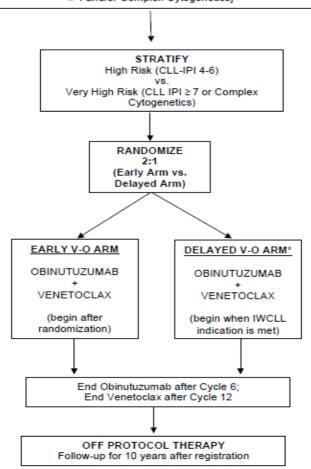


## S1925 Navigator -Heather x3661



#### **SCHEMA**

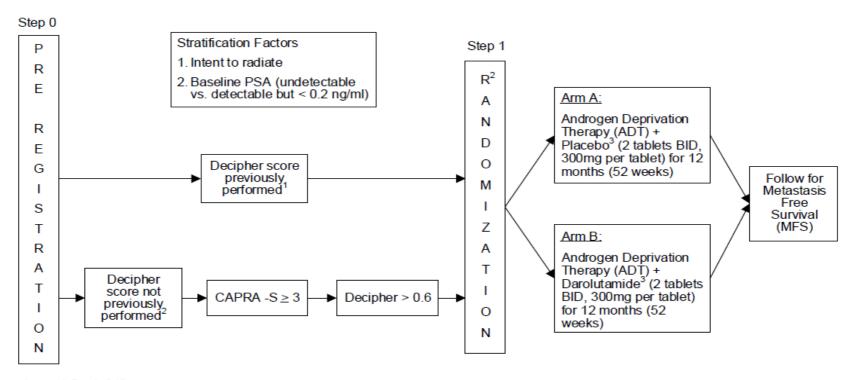
Newly Diagnosed, Early Stage, Asymptomatic, High-Risk Chronic Lymphocytic Leukemia (CLL)/Small Lymphocytic Lymphoma (SLL) [CLL-International Prognostic Index (CLL-IPI) ≥ 4 and/or Complex Cytogenetics]



## EA8183 Navigator -Carrie x3621



#### Schema

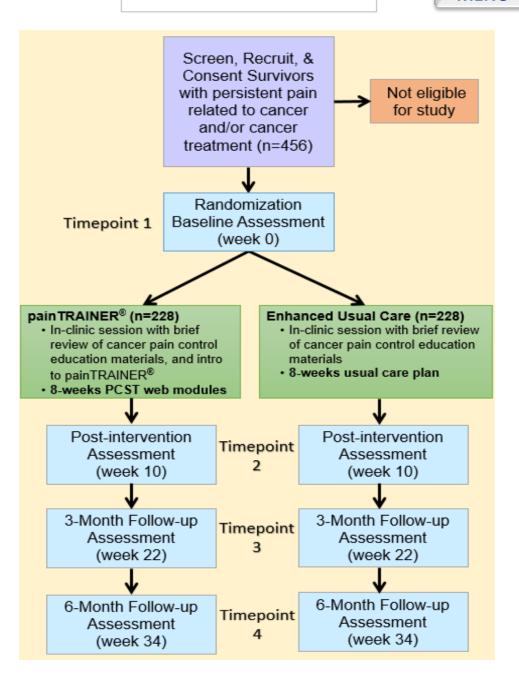


#### Accrual Goal: 810

- Patients with a Decipher score previously performed by Decipher biosciences with a score of> 0.6 are eligible and may proceed from pre-registration directly to randomization after uploading Decipher score to Medidata Rave.
- For patients who do not already have a completed Decipher test through standard of care testing the calculated CAPRA-S score must be ≥ 3 and the
  post registration Decipher Biosciences assessment must determine Decipher score to be > 0.6.
- 3. Patients receiving post-operative adjuvant radiation (XRT) can receive it anytime within 52 weeks of prostatectomy.

WF-1901 Navigator -Courtney x3660

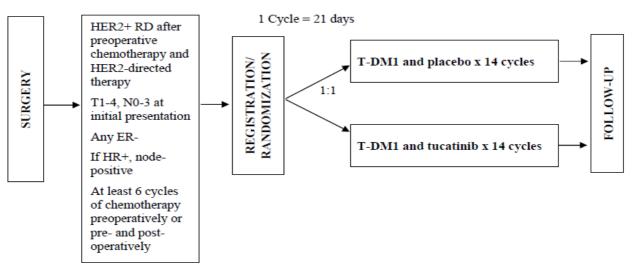
**MENU** 



# A011801 Navigator -Angie x3613



#### Schema



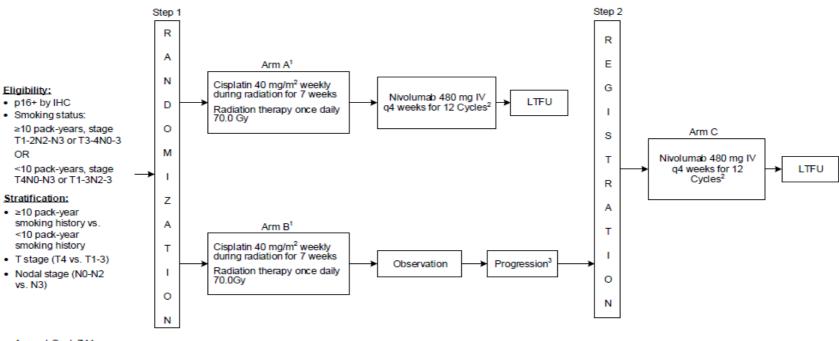
Note: HR stands for "hormone-receptor."

Treatment is to continue until breast cancer recurrence, completion of 14 cycles, or unacceptable adverse event. Patients will be followed for 10 years after registration or until death, whichever comes first.

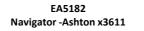
# EA3161 Navigator -Ashton x3611



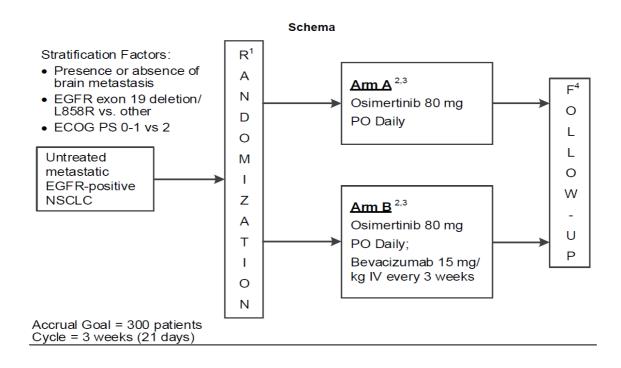
#### Schema



- Accrual Goal: 744
- 1. Submit tissue for PD-L1 testing.
- 2. Cycle length = 28 days
- 3. Patients who were randomized to observation will be offered the option to cross over if they have clearly documented progression by the RECIST criteria and tissue-proven progression within 12 months from the end of cisplatin/radiation therapy.



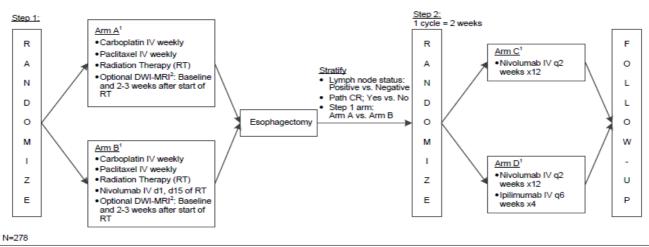
# MENU



#### EA2174 Navigator - Carrie x3621



#### Schema



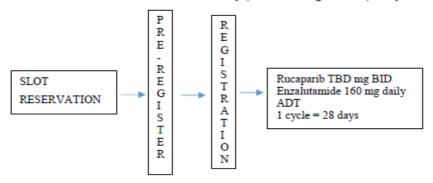
- Please reference Section 5.1 for treatment dosing specifics.
   Optional Diffusion weighted imaging-MRI (DWI-MRI) should be obtained at step 1 baseline and 2-3 weeks after initiation of protocol treatment.

# A031902 Navigator -Carrie x3621

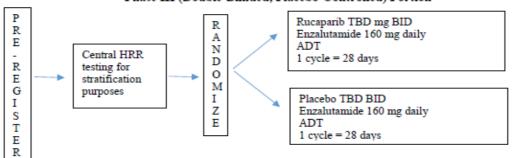
# **MENU**

#### Schema

## PK Substudy (Dose Finding Portion) Only



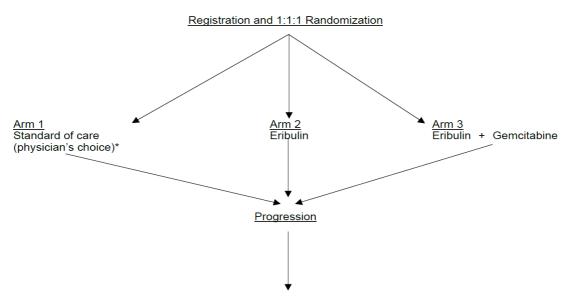
## Phase III (Double-Blinded, Placebo-Controlled) Portion



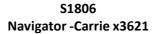
For all patients, treatment is to continue until disease progression or unacceptable adverse event.

Patients will be followed for 5 years or until death, whichever comes first.

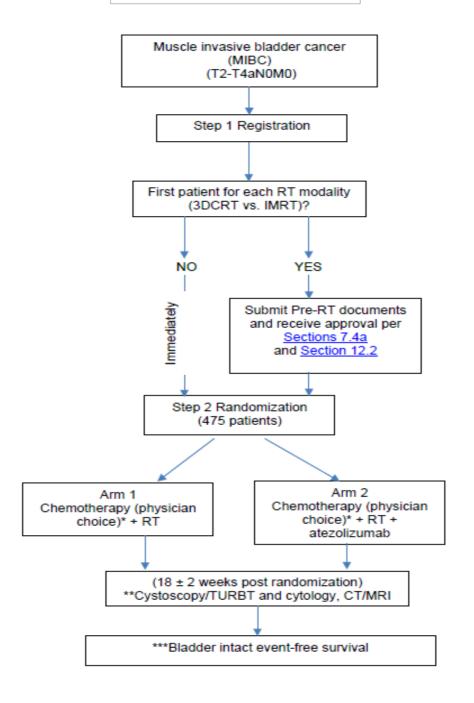
Please refer to the full protocol text for a complete description of the eligibility criteria and treatment plan.



Follow-up for three years after registration



# **MENU**

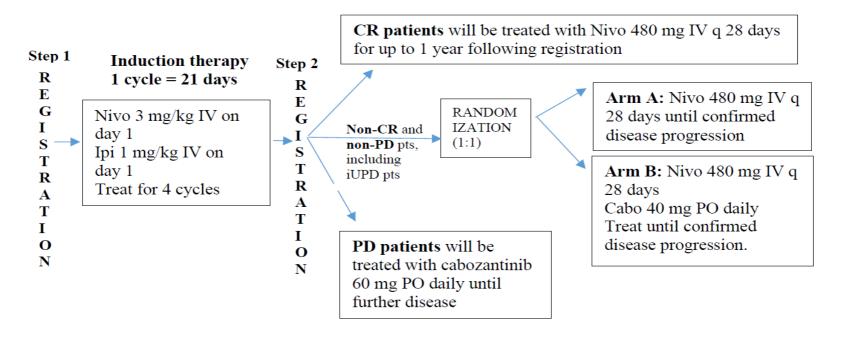


# A031704 Navigator -Carrie x3621



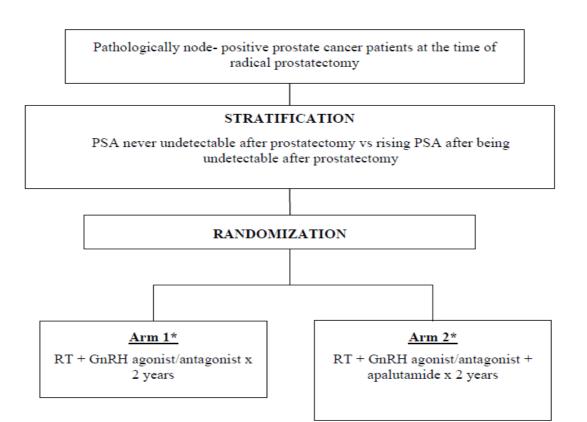
# **Schema**

# 1 cycle = 28 days



# GU008 Navigator -Carrie x3621





# NRG-CC009 Navigator -Jessica x3615

MENU

NRG-CC009 SCHEMA

#### STEP 1 REGISTRATION

#### STEP 2 REGISTRATION/RANDOMIZATION

Baseline neurocognitive function (NCF) tests: HVLT-R, TMT, COWA (required)

Note: NCF testing scores must be uploaded into Rave prior to Step 2 Registration and can be uploaded at the time of Step 1 Registration

#### STRATIFY

Disease-Specific Graded Prognostic Assessment (DS-GPA)2:

1. 0.5-2.0 2. 2.5-4.0

Prior exposure to NCF testing on SWOG S18273:

1. Yes 2. No

# RANDOMIZE1

Arm 1

Stereotactic radiosurgery (SRS)

Arm 2

Whole brain radiotherapy with hippocampal avoidance (HA-WBRT)+ Memantine

<sup>1</sup>Randomization is 1:1

# GU009 Navigator -Carrie x3621

**MENU** 

## NRG-GU009 SCHEMA

#### STEP 1 REGISTRATION

Completion of Step 1 eligibility checklist in OPEN and then submission of tissue for Decipher analysis

Note: Decipher analysis results must be completed before Step 2 randomization can occur. If Decipher results have already been obtained, in lieu of tissue, after completion of Step 1 eligibility checklist in OPEN, the original Decipher report must be submitted to Decipher Biosciences for validation (see Decipher Analysis information at the end of section 3.0).

# STEP 2 RANDOMIZATION Decipher ≤ 0.85

#### STEP 2 RANDOMIZATION Decipher > 0.85 or Node Positive

#### DE-INTENSIFICATION STUDY STRATIFY

- Decipher Score (Low/Int v High\*)
- · Boost type (EBRT vs. Brachy)
- · Pelvic Treatment (Yes/No)
- ACE-27 Comorbidity (0/1 vs 2/3)\*\*

#### RANDOMIZE 1:1

# Arm 1 RT + 24 mos ADT



# INTENSIFICATION STUDY STRATIFY

- Boost type (EBRT vs. Brachy)
- Pelvic Treatment (Yes/No)
- Nodal Status (Positive/Negative)

#### RANDOMIZE 1:1



Arm 4
RT
+
24 mos ADT
+24 mos Apalutamide

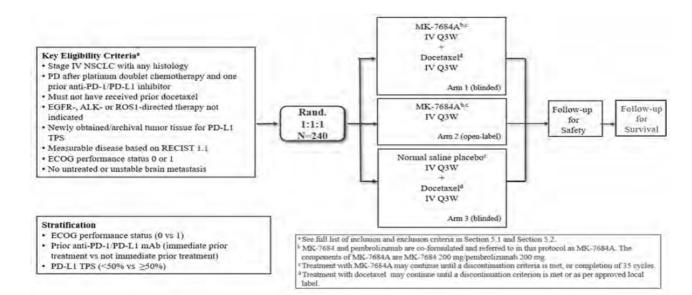
<u>Note:</u> A radiation treatment approach change post registration involving the pelvic lymph node treatment or prostate boost type stratification factors will result in a protocol deviation. RT = radiation therapy; ADT = androgen deprivation therapy

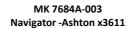
<sup>\*</sup> Low/Intermediate = Decipher < 0.6 and High = Decipher 0.6-0.85

<sup>\*\*</sup> http://comogram.org/assets/files/ace-27\_ctr\_ver\_rtog\_web.pdf

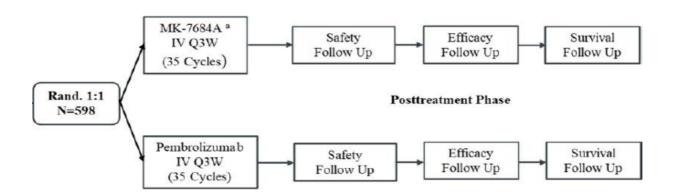
#### MK 7684A-002 Navigator -Ashton x3611





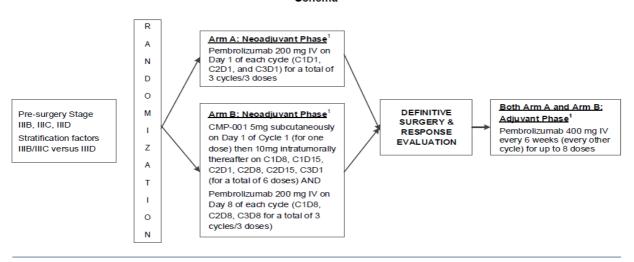


MENU





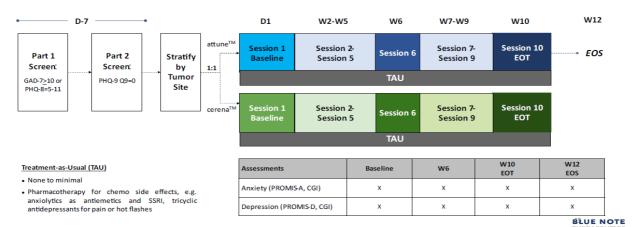
#### Schema



<sup>1.</sup> Neoadjuvant and Adjuvant cycle length: 1 cycle = 21 days

## PROT001/BLUE NOTE Navigator -TBD



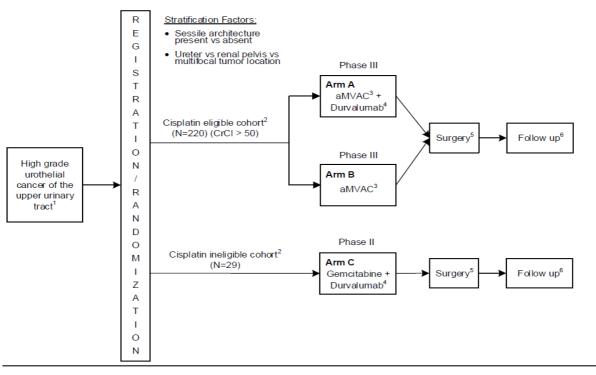


Confidential

#### EA8192 Navigator -Carrie Geoffroy x3621

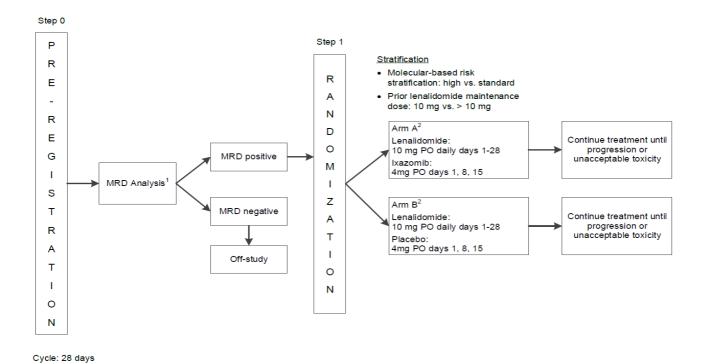
# MENU

## **Schema**



### EAA171 Navigator -Heather Thulean x3661





# BR007 Navigator -Angie Earles x3613



Patients with resected pT1N0M0, HER2-Negative, ER and/or PgR-Positive Breast Cancer and Oncotype-DX Recurrence Score ≤ 18

# Step 1 - Pre-entry registration

If patients with a T1a tumor ( $\leq 0.5$  cm in size) do <u>not</u> have an Oncotype DX Recurrence Score, a tissue sample must be sent to the Genomic Health centralized laboratory

# STRATIFICATION

- Age (< 60; ≥ 60)</li>
- RS (≤11, > 11)
- Tumor size (≤ 1 cm; 1.1–2 cm)

# Step 2-RANDOMIZATION\*

# Arm 1\*\*

Breast Radiation Therapy

Endocrine Therapy

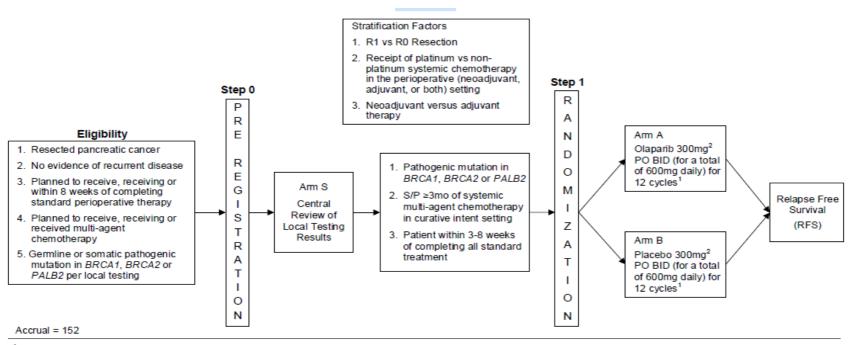
# <u>Arm 2\*\*</u>

No Breast Radiation Therapy

Endocrine Therapy

# EA2192 Navigator -Carrie Geoffroy x3621

**MENU** 



<sup>1</sup> One cycle = 4 weeks

<sup>&</sup>lt;sup>2</sup> Olaparib is supplied in either 100 mg or 150 mg tablets

# BR004 Navigator -Angie Earles x3613



Figure 1. NRG-BR004 SCHEMA

HER2-Positive Metastatic Breast Cancer

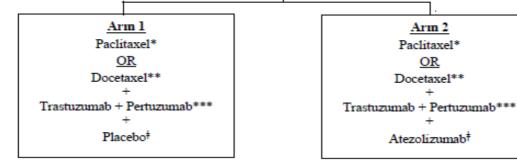
#### Step 1 Study Entry and Initiation of Therapy:

- Send tumor for central confirmation of HER2 and central testing of ER/PgR and PD-L1
- Initiate Cycle 1 loading doses of commercial trastuzumab and pertuzumab combined with either docetaxel or paclitaxel per investigator choice while waiting for central testing results

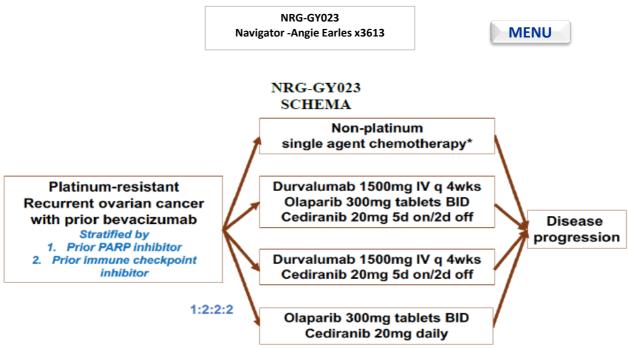
#### STRATIFICATION

- · Prior neoadjuvant or adjuvant therapy with trastuzumab (no; yes)
- · Estrogen receptor status (positive; negative)
- PD-L1 status (positive; negative or indeterminant)
- Disease sites (visceral without brain metastasis; non-visceral only without brain metastasis; brain metastasis)
- Choice of taxane (paclitaxel; docetaxel)

Step 2: RANDOMIZATION following central confirmation of HER2-positive status with initiation of atezolizumab/placebo on Day 22 of Cycle 1#



- # Randomization is 1:1.
- Paclitaxel: 80 mg/m² IV weekly on Days 1, 8, 15, 22, 29, and 36 of an every 6-week cycle for a minimum of 3 cycles with additional cycles at the investigator's discretion OR
- \*\* Docetaxel: 75 mg/m² IV on Days 1 and 22 of an every 6-week cycle for a minimum of 3 cycles with additional cycles at the investigator's discretion.
- \*\*\* Trastuzumab + Pertuzumab: Trastuzumab 6 mg/kg IV with pertuzumab 420 mg IV Days 1 and 22 every 6 weeks until progression.
- † Atezolizumab 1200 mg IV or placebo IV Days 1 and 22 every 6 weeks until progression or for 2 years.



\*Weekly paclitaxel, PLD or topotecan

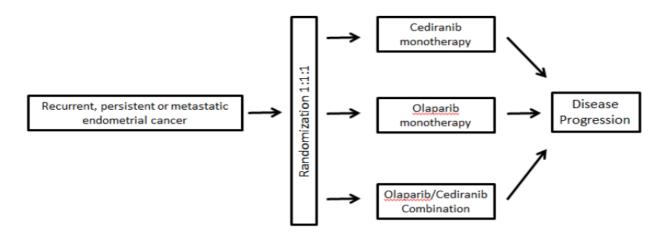
Randomization is 1:2:2:2

<sup>\*</sup>Non-platinum single agent chemotherapy includes weekly paclitaxel, topotecan or pegylated liposomal doxorubicin (PLD). There can be no deviance from the prescribed regimens, e.g. addition of bevacizumab or other agents.

# NRG-GY012 Navigator -Angie Earles x3613

# MENU

# **SCHEMA**

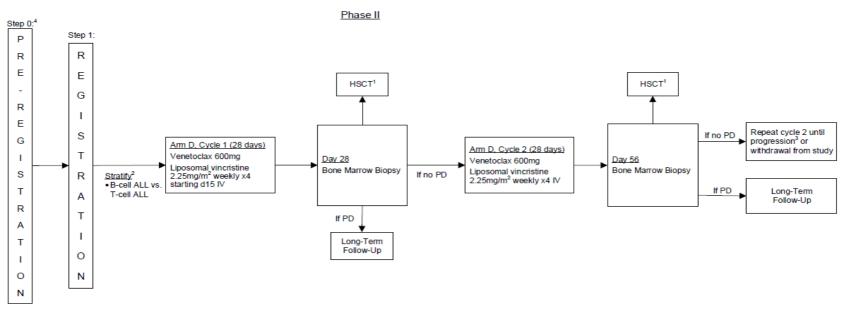


Schema changes as of Amendment 3 (24-MAY-2021):

# EA9152 Navigator - Heather Thulean x3661



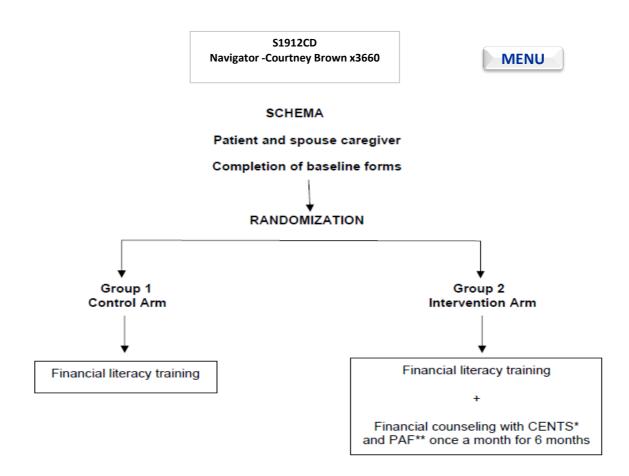
## **Schema**



Phase II Accrual Goal: 56 patients (including the patients from the Phase I arm with the MTD dose)

- If patient demonstrates CR or Cri at day 28 or day 56 bone marrow biopsies, they may continue on combination therapy or proceed to HSCT if deemed fit for transplant and advised by treating physician. Patient may proceed to HSCT at any point at treating physician's discretion (if not day 28 or 56). Patients will be stratified by immunophenotype: "B-cell ALL" vs. "T-cell ALL".
- If patient does not demonstrate any signs of progression, they may continue on combination therapy as long as they are receiving benefit per treating physician. Patients, if in CR/Cri by the end of cycle 2 may continue on combination or single agent venetoclax at the discretion of the treating physician.

  4. Bone marrow and peripheral blood specimens must be submitted for mandatory central review.



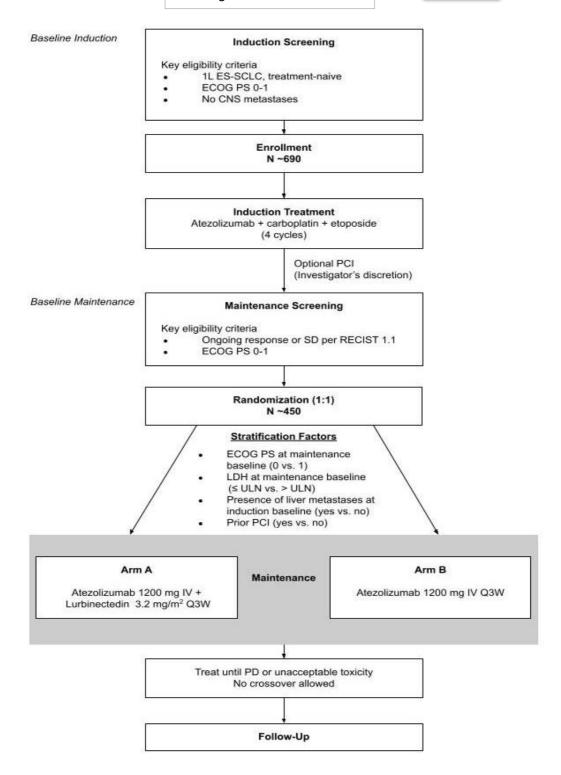
In order to participate, CCD Research sites must complete the **<u>\$1912CD</u>** Site Implementation Survey and upload the completion certificate to the CTSU Regulatory Portal as described in <u>Section 13.4</u>.

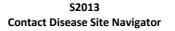
<sup>\*</sup> Consumer Education and Training Services (CENTS)

<sup>\*\*</sup> Patient Advocate Foundation (PAF)

## GO43104 Navigator -Ashton Todd 3611

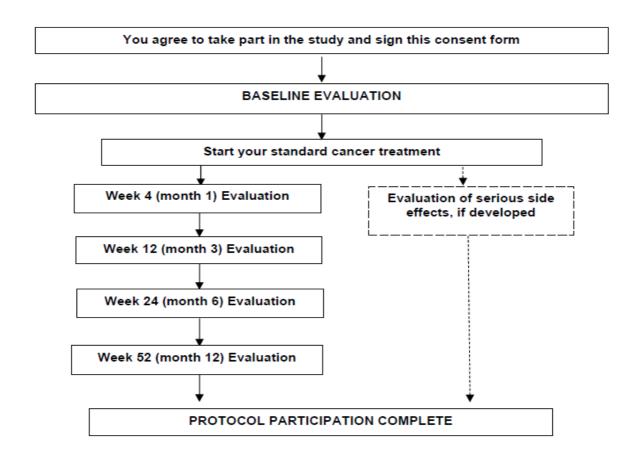
# MENU





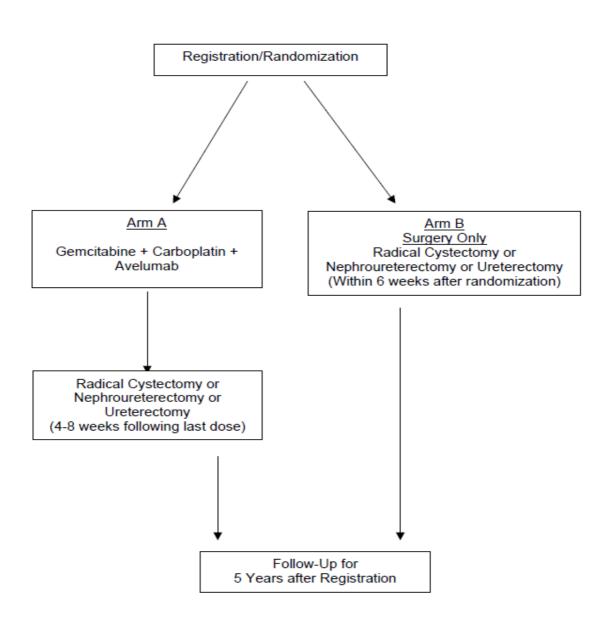


## **SCHEMA**

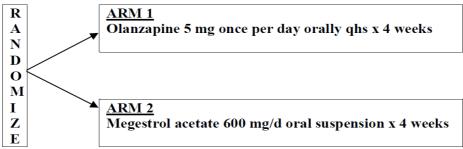


# S2011 Navigator -Carrie Geoffroy x3621







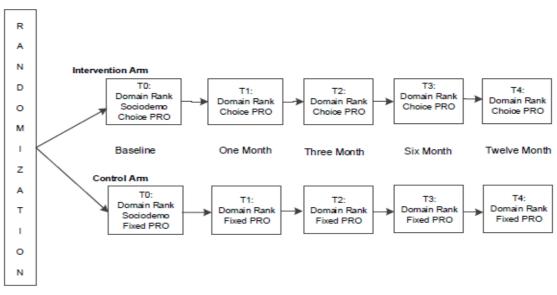


Treatment will continue for up to 4 weeks, unless the patient declines therapy or has unacceptable adverse events.

# **EAQ202** Navigator -Courtney Brown x3660



#### Schema



Eligibility: -Age 18 to 39 -Within 12 weeks of diagnosis -Performance Status 0-3 -Any stage of cancer -Favorable prognosis

Randomization: Stratified by sex, race, ethnicity, and age (emerging adults 18-25-year-old vs young adults 26-39year-old)

Domain Rank: Participant Ranks Domain by personal priority at each time point Fixed PRO:

PROMIS Global, PROMIS standard AYA 5 domains, Common Items

Choice PRO:

PROMIS Global, 5 ranked AYA domains, Common Items

Accrual Goal = 400

# GU010 Navigator -Jessica Jones x3615

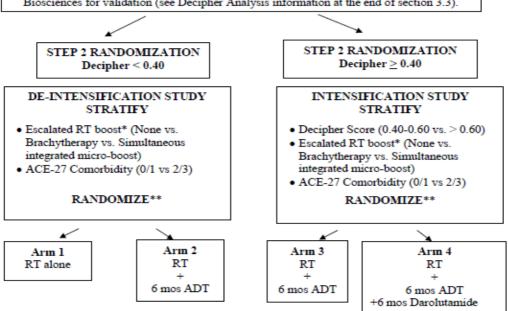


#### SCHEMA

#### STEP 1 REGISTRATION

Completion of Step 1 eligibility checklist in OPEN and then submission of tissue for Decipher analysis

Note: Decipher analysis results must be completed before Step 2 randomization can occur. If Decipher results have already been obtained, in lieu of tissue, after completion of Step 1 eligibility checklist in OPEN, the original Decipher report must be submitted to Decipher Biosciences for validation (see Decipher Analysis information at the end of section 3.3).



<sup>\*</sup>For Escalated RT boost definition see Section 5.2 Establishing Treatment Approaches \*\*Randomization is 1:1

 $RT = radiation \ the rapy; \ SBRT = stereotactic \ body \ radio the rapy; \ ADT = and rogen \ deprivation \ the rapy$ 

BN011
Navigator -Carrie Geoffroy x3621

MENU

#### NRG-BN011 SCHEMA

#### STEP 1 REGISTRATION

Central Pathology Review for confirmation of glioblastoma (GBM) histology and of methylated MGMT promotor status

NOTE: Tumor tissue must be received and central review confirmation completed before STEP 2 registration can occur.\*

# STEP 2 REGISTRATION

#### STRATIFY

- Recursive partitioning analysis (RPA) (III vs IV vs V)
- Intent to use tumor treating fields (Optune) (yes vs no)

# RANDOMIZE (1:1)

#### Arm 1

Radiation Therapy with Concomitant and Adjuvant Temozolomide

#### Arm 2

Radiation Therapy with Concomitant and Adjuvant Lomustine and Temozolomide

See Section 5.1 for agent treatment details and Section 5.2 for radiation therapy details.

\*Patients with unmethylated MGMT may be considered for enrollment on NRG-BN007. Please see Section 10.2 for additional information.

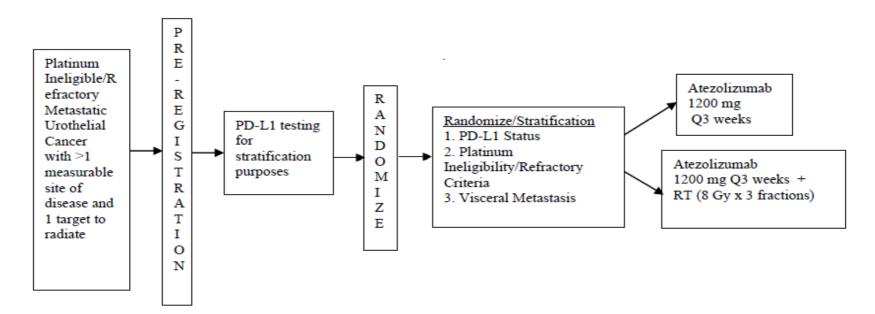
# A032002 Navigator -Carrie Geoffroy x3621

**MENU** 

Alliance A032002

#### Schema

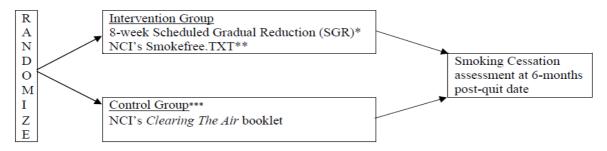
1 Cycle = 21 Days



Treatment is to continue until disease progression or unacceptable adverse event. Patients will be followed for 3 years or until death, whichever comes first.

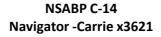


#### Schema

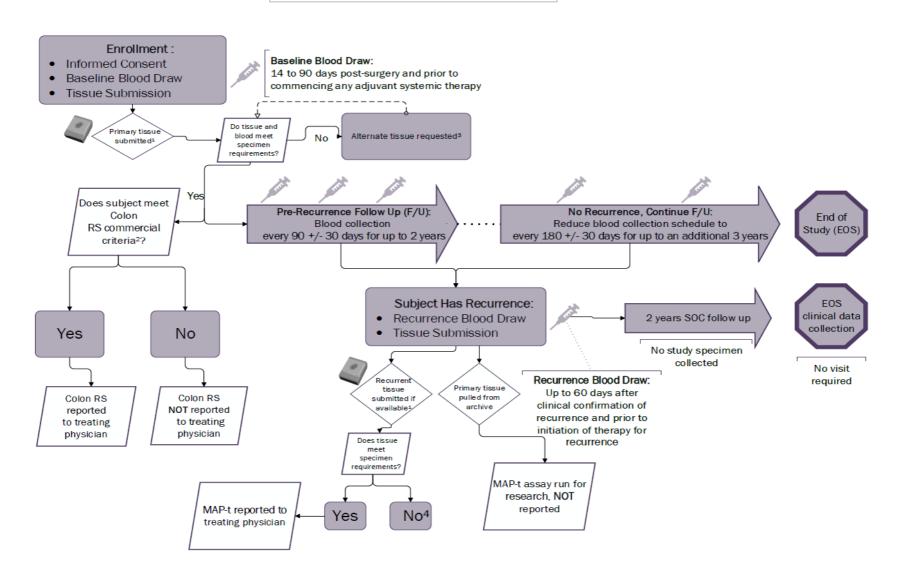


- \* Target quit date will be 8 weeks following enrollment.
- \*\* NCI's Smokefree.TXT messages will start 2 weeks before quit date and extend for 4 weeks after quit date.
- \*\*\* Quit date must be within 8 weeks of receiving the Clearing The Air cessation booklet

Please refer to the full protocol text for a complete description of the eligibility criteria and intervention plan.



**MENU** 



# GU011 Navigator -Carrie x3621

**MENU** 

# NRG-GU011 SCHEMA

Recurrent Oligometastatic Prostate Cancer (detected by PET) after RT to Prostate or Radical Prostatectomy +/- Post-Operative Radiotherapy

#### STRATIFY

- Extrapelvic node(s) only vs Bone +/- node(s) [pelvic/extrapelvic]
  - PSA Doubling Time <12 mos vs ≥ 12mos
    - · Fluciclovine PET vs PSMA PET

## RANDOMIZE\*

Arm 1
SABR + blinded placebo\*\* for 6 months

Arm 2

SABR + blinded relugolix\*\* for 6 months

<sup>\*</sup>Randomization is 1:1

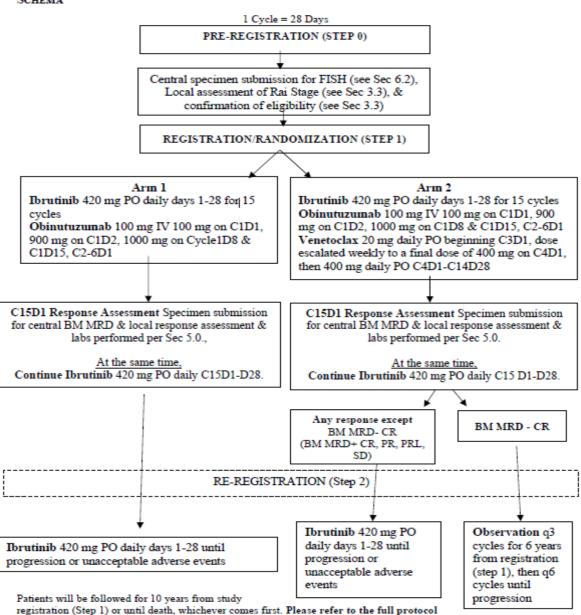
<sup>\*\*</sup> Monitor according to Test Schedule; see Sections 4.2, 4.3, and 5.3.1 for progression. Salvage ADT should be delayed until metastatic progression by conventional imaging.

# A041702 Navigator -Heather x3661

**MENU** 

#### A041702

#### SCHEMA



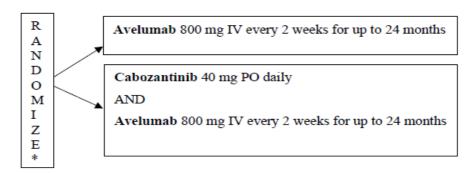
text for a complete description of the eligibility criteria and treatment plan

## A032001 Navigator -Carrie x3621

**MENU** 

#### Schema

1 Cycle = 28 Days



\*Randomization is to occur 3-10 weeks after last dose of 1st-line treatment

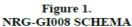
#### Stratification:

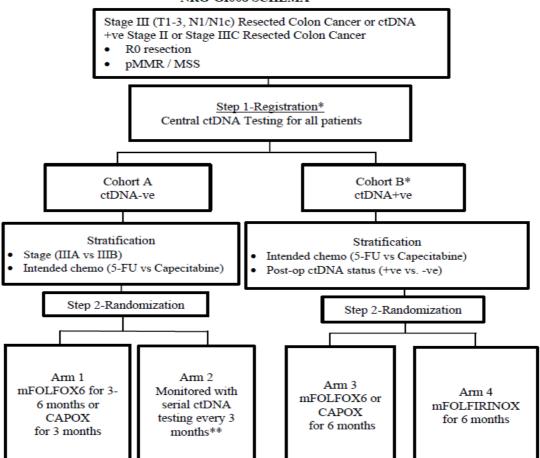
- Best response to 1st-line chemo (SD vs PR vs CR)
- Visceral metastases: present versus absent

Please refer to the full protocol text for a complete description of the eligibility criteria and treatment plan.

# NRG GI008 Navigator -Carrie x3621

**MENU** 





<sup>\*</sup>Patients with completely resected stages II or IIIC colon cancer who are ctDNA +ve as determined by a Signatera™ ctDNA test performed outside of the trial through routine clinical care and who otherwise meet all eligibility criteria for Step 1-Registration are eligible for enrollment into Cohort B.

<sup>\*\*</sup>Patients in Cohort A (Arm 2) who develop a ctDNA +ve assay during serial monitoring may transition to the ctDNA+ve cohort (Cohort B) and undergo a second randomization.

# URCC 21038 Navigator -Hannah x3628



#### STUDY SCHEMA

<u>Screen</u> patients scheduled to receive an FDA approved anti-PD-1/-L1 immune checkpoint inhibitor (ICI) for the first time, alone or in combination with co-treatments

Register and consent patients prior to the first infusion of ICIs

Baseline (A1): up to two weeks before the patient's first ICI infusion, collect:

- Clinical record and laboratory data
- Patient Reported Outcomes (PROs)
- Peripheral blood samples
- Saliva sample
- Tumor samples (if available)

<u>During Treatment</u> (A2): up to a week before the patient's second ICI infusion (usually 2-3 weeks after A1), collect:

- Clinical record and laboratory data
- Patient Reported Outcomes (PROs)
- Peripheral blood samples
- Saliva sample

<u>6 Month Follow Up</u> (A3): 6 months  $\pm$  1 month after the first ICI infusion, collect:

- Clinical record and laboratory data
- Patient Reported Outcomes (PROs)
- Peripheral blood samples

<u>Annual Follow Up</u> (A4+): 1 year  $\pm$  3 months after the first ICI infusion, and yearly thereafter until patient death or study end, collect:

- Clinical record and laboratory data
- Patient Reported Outcomes (PROs)
- Peripheral blood samples

At each infusion

while the patient is on ICI treatment, collect Cancer

Treatment, Toxicity and Response data