<table>
<thead>
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<th>Guideline Page and Request</th>
<th>Panel Discussion</th>
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| **CML-2**  
Internal request:  
Evaluate the data regarding the use of TKI therapy in the primary treatment of chronic phase CML based upon the Sokal or Hasford risk score.  
External request:  
Submission from Novartis Oncology requesting:  
- Update the chronic phase CML primary treatment section and footnote 'g' in the workup for primary treatment based on the 5-year data available for nilotinib use in patients with intermediate- and high-risk Sokal scores.  
- Update the front-line therapy section with the nilotinib 5-year estimated overall survival and progression-free survival data within the discussion section.  
- Correct the 5-year MR4.5 rate for imatinib high Sokal risk score patients from 27% to 23% within the discussion section.  
  | Preliminary data from DASISION and ENESTnd studies suggest that patients with an intermediate- or high-risk Sokal or Hasford score may preferentially benefit from dasatinib or nilotinib. The Panel consensus based upon the data in the noted references was to differentiate primary treatment options based on the risk score.  
  Updates to the Discussion section are currently in progress. |  
| **CML-4**  
Internal request:  
Evaluate the data for TKI + steroids in the treatment of lymphoid blast phase CML.  
  | The Panel consensus based upon the data in the noted references was to include TKI + steroids as a treatment option for patients with lymphoid blast phase CML.  
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