### GAST-B

**External Request:**
Submission from Foundation Medicine, Inc (09/05/19) to consider the following requested updates pertaining to the evaluation and management of patients with gastroesophageal cancers (GEC):

1. **Add comprehensive genomic profiling via a validated next-generation sequencing (NGS) assay as a valid methodology for the identification of HER2 (ERBB2) overexpression or gene amplification in the Principles of Pathologic Review section of the guidelines.**

2. **Include the option for MSI testing by a validated NGS-based assay in the Principles of Pathologic Review section, as in the NCCN Guidelines for Colon Cancer (version 2.2019, COL-B pg 4 of 6), particularly for patients with metastatic disease who may benefit from more comprehensive genomic testing.**

3. **Recommend testing for NTRK gene fusions to Principles of Pathologic Review and Biomarker Testing.**

4. **Amend the Principles of Pathologic Review section to indicate that comprehensive genomic testing via a validated, NGS-based liquid biopsy test, such as FoundationOne® Liquid, is an acceptable testing method and may provide unique advantages over tissue-based testing alone.**

5. **Recommend the option of testing using a single validated NGS-based comprehensive genomic profiling (CGP) assay, such as FoundationOne CDx (as opposed to sequential testing of single biomarkers or use of limited molecular diagnostic panels).**

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**Panel Discussion/References**

Based on a review of data and discussion, the panel did not use the language proposed in the submission. However, the panel supported addressing point #4 in the submission by adding a new section for "liquid biopsy" in the Principles of Pathologic Review and Biomarker Testing.

Points #1, #2, #3 and #5 in the submission are not in this form and were addressed by the panel in the 4.2019 version of the guidelines and the corresponding transparency form dated 10-22-19.

See submission for references.

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Based on the review of the data and discussion, the panel consensus was to include fluorouracil and oxaliplatin as a postoperative chemotherapy option. The panel consensus supported a category 2A (preferred) recommendation.

Based on a review of the data and discussion, the panel consensus did not support the inclusion of the scalp cooling system in the guidelines.