Guideline Page	Panel Discussion/References	Institution Vote				
and Request		YES	NO	ABSTAIN	ABSENT	
Submission request from Myriad Genetic Laboratories to update the Criteria for Further Risk Evaluation on page BR/OV-1 so that they are aligned with the BRCA1/2 Test Criteria found on page BRCA-1 as they are currently narrower than testing criteria. Possible changes are: • Add the following bullet point: • An individual with an HBOC-related cancer (breast, ovarian, pancreatic or prostate) at any age and a known mutation in a cancer susceptibility gene within the family • Modify the following sub-bullet of the current second bullet point to include a relative with male breast cancer: • An individual with a breast cancer diagnosis meeting any of the following: • A close relative with male breast cancer • Add the following bullet point: • An individual with prostate cancer or pancreatic cancer at any age and any of the following: • ≥1 relative with ovarian cancer at any age or • ≥1 relative with breast cancer	 Based on the discussion, the panel did not use the language proposed in the submission. However, the panel supported adding the following language: "An individual at any age with a known pathogenic/likely pathogenic variant in a cancer susceptibility gene within the family, including such variants found on research testing" "An individual with a breast cancer diagnosis meeting any of the following:	20	0	0	8	
External request Submission request from Myriad Genetic Laboratories to add the following bullet (with footnote) to the list of testing criteria on page BRCA-1 acknowledging that individuals who are affected with an HBOC-related cancer can use	Based on a review of data and discussion, the panel did not use the language proposed in the submission. However, the panel supported adding the following language: "Regardless of family history, some individuals with an BRCA-related cancer may benefit from genetic testing to determine	20	0	0	8	

NCCN Guidelines for Genetics/Familial High-R	sk Assessment: Breast and Ovarian V.1.2019 –	Web te	eleconfer	ence on 04	/10/18
genetic test results to guide current or future treatment. Individuals with a diagnosis of an HBOC-related cancer, i.e., metastatic breast cancer or ovarian cancer who are or may become eligible for treatment with an FDA-approved PARP inhibitor; or individuals with a diagnosis of prostate cancer to determine eligibility for certain therapies and/or clinical trials. Consult the relevant NCCN cancer treatment guideline for details. The FDA has approved use of certain PARP inhibitors for carriers of germline mutations in BRCA1 and BRCA2, as detected by an FDA-approved test, for metastatic breast cancer (See NCCN Guidelines for Breast Cancer Treatment) and ovarian cancer (See NCCN Guidelines for Ovarian Cancer Treatment). In addition, individuals with prostate cancer who carry germline or somatic mutations in BRCA1, BRCA2, or other genes may be eligible for early use of platinum chemotherapy or clinical trials (e.g. PARP inhibitors) (See NCCN Guidelines for Prostate Cancer Treatment).	eligibility for targeted treatment" with a corresponding footnote, "Eg, PARP inhibitors for ovarian cancer and metastatic HER2-negative breast cancer; platinum therapy for prostate cancer. See the relevant NCCN treatment guidelines (eg, NCCN Guidelines for Breast Cancer; NCCN Guidelines for Prostate Cancer) for further details." See Submission for references.				
External request Submission request from Dr. Danielle Shiller/Baltimore Suburban Health to recommend the criteria for genetic risk evaluation to include	Based on a review of data and discussion, the panel consensus was to not make changes to the current recommendations. See Submission for references.	0	19	1	8
patients of Ashkenazi Jewish ancestry, regardless of personal or family history.	See Submission for references.				
External request	Based on a review of data and discussion,	0	20	0	8
Submission request from Illumina Laboratories:	the panel consensus was to not make				
We propose that multi-gene testing be supported as the preferable way to begin testing when	changes to the current recommendations due to insufficient available data.				
interrogating high- and medium-risk mutations in	to insumblent available data.				
the Genetic/Familial High-Risk Assessment:	See Submission for references.				
Breast and Ovarian NCCN Guidelines v 1.2018.					