### BACKGROUND

- Scalable and reliable approaches are needed to assist non-genetics clinicians in assessing patients' need for germline genetic testing
- Commercial insurance coverage of genetic testing often depends on this assessment
- A brief patient-administered hereditary cancer risk assessment digital tool was designed to assess the need for germline genetic testing based on history and national guidelines

#### AIM

To assess the clinical validity of this digital tool by evaluating its agreement with assessments made by genetic counselors

# METHODS

Retrospective chart review of patients with a personal and/or family history of cancer from a telehealth genetic counseling practice.



Extracted history entered into the digital tool to model how a patient would complete the tool



Compared the assessments of whether the patient met criteria for germline genetic testing made by the tool and the genetic counselor who saw the patient



Further validation was performed on a subset of cases by analyzing the agreement between the tool and the research team on which specific history-based rules in the tool's algorithm applied for a given case

Validation of a guidelines-based brief patient-administered digital tool to assess the need for germline genetic testing Callan Russell, Ashley Daley, Durand Van Arnem, Andi Hila, Kiley Johnson, Jill Davies, Colleen Caleshu

# A digital tool and genetic counselors have high agreement (96%) on assessing need for germline genetic testing.

Hereditary Cancer Risk Assessment Tool

152 patient cases

> Genetic Counselors



on meeting genetic testing criteria

## RESULTS

#### **PATIENT CHARACTERISTICS**

152 Patients with a personal and/or family history of cancer seen from July to October 2020





#### 56% Personal history of cancer



# 66% 100/152 cases met criteria for genetic testing\*

\*Cases meeting criteria were sampled to ensure the dataset included the criteria most commonly met in clinical practice.

#### VALIDATION



Completion of the tool took a mean of 3.3 minutes

Agreement between the r96% digital tool and genetic counselors (146/152 cases)

Nearly all disagreement (4/6) resulted from history not collected by the tool because patients typically cannot report it (ex. MSI/IHC status, probability of a pathogenic variant)

Agreement between the tool 100% and the research team on which aspects of the patient's history met criteria in subset of cases (62/62)