**MINUTES**

**CPIC CONFERENCE CALL**

DATE: February 5, 2015

| TOPIC | DISCUSSION/ACTION | FOLLOW-UP |
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| Housekeeping Announcements | Attendance will be taken by poll after each conference call. Members will receive an email with a doodle link after each call. Please enter your first and last name and check the box indicating you were in attendance. No action required if you were unable to make the conference call. | Kelly will send the poll link after each conference call. |
| PGx nomenclature working group presentation | Dr. Lisa Kalman, coordinator for the CDC GeT-RM, discussed the GeT-RM program and CDC PGx nomenclature working group. One of the GeT-RM projects focused on pharmacogenetics. DNA from 137 Coriell lines that contained variants in as many of the SNPs included in the PGx panels as possible were characterized by 9 labs using different PGx platforms (e.g., Affymetrix, GenMark, Luminex, etc.) and the results were compared. Several nomenclature and reporting issues were identified during this study (e.g., incorrect assignment of haplotypes because not all assays test the same SNPs for each gene, different nomenclature used to report genotype of the same gene, differing reference sequences, etc.). Lisa discussed these issues and the formation of the PGx nomenclature working group (including members of CPIC) to develop standardized definitions for pharmacogenetic haplotypes. Sub-workgroups are developing models to show how the proposed nomenclature could be used to address problems identified and this work will be described in a manuscript. Slides available on the CPIC working group site. | Kelly will post slides to the CPIC working group website. |
| CPIC term standardization project update | Kelly discussed the progress of the CPIC term standardization project (<http://pharmgkb.blogspot.com/2014/12/cpic-term-standardization.html>). The first survey (Delphi 1) is now available and was sent out on February 2nd. To date, 26 individuals have completed the first survey and ~40 have signed up for the remaining live webinars (<http://pharmgkb.blogspot.com/2014/12/cpic-term-standardization.html>). Please feel free to send the survey to pharmacogenetic experts you feel might have interest in this project. | Kelly will continue to update CPIC members with the progress of this project. |
| CPIC email list for monthly updates | In the 2014 CPIC survey of members, 95% of CPIC members indicated that they would subscribe to an email update service. Emails would be sent 1) immediately for any guideline updates posted on PharmGKB that affect prescribing recommendations and are not part of published updates and 2) for other news and solicitation of feedback. PharmGKB has created a “cpic-announce” email for this purpose. A separate email service (“cpic-data-announce”) has been created for anyone interested in changes in CPIC data files (e.g., changes to JSON files). Both of these email services will be available to CPIC members as well as non-CPIC members. For more information on how to sign-up see: http://www.pharmgkb.org/page/cpicCommunication. | Kelly will send instructions to sign-up with these minutes. |
| CPIC informatics update | The CPIC Informatics Working group has been mostly focused on contributing to the Term Standardization Project because this is so important to informatics. Bob Freimuth gave an update from the HL7 Clinical Genomics working group meeting, held January 20-21, 2015. The group discussed extensions to the LOINC terminology to support additional data sources for the “Clinical Genomics Genetic Variation Model” (HL7 version 2), such as ClinVar, COSMIC, dbSNP, and dbVar. The group is also exploring the development of a FHIR resource to support genomic sequences, variations, and/or interpretations. | James, Michelle, and Bob will continue to update CPIC group on progress. |
| SSRI guideline update | Due to feedback from CPIC members, authors of the SSRI guideline reconsidered the recommendation for sertraline (previously no recommendation was made). After re-evaluating the evidence and the addition of a new publication to the evidence table, they decided to add an “optional” recommendation for CYP2C19 poor metabolizers to the Table 2 of the guideline. | Kelly will continue to update the CPIC group on progress. |