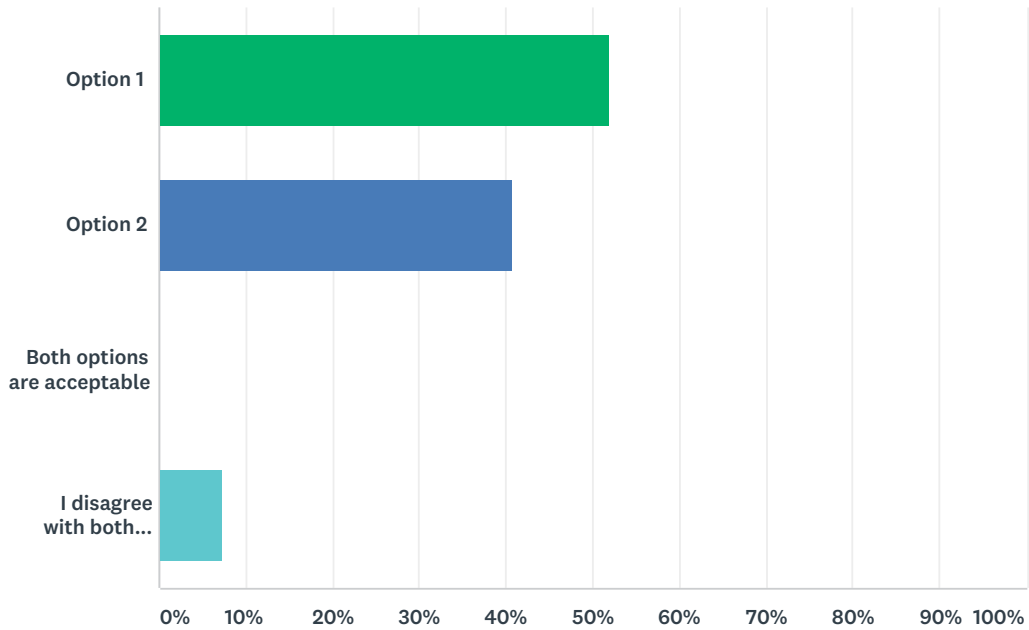


Q1 Which option do you prefer?

Answered: 27 Skipped: 0



ANSWER CHOICES	RESPONSES	
Option 1	51.85%	14
Option 2	40.74%	11
Both options are acceptable	0.00%	0
I disagree with both options	7.41%	2
TOTAL		27

Q2 Please suggest ranges below and provide an explanation.

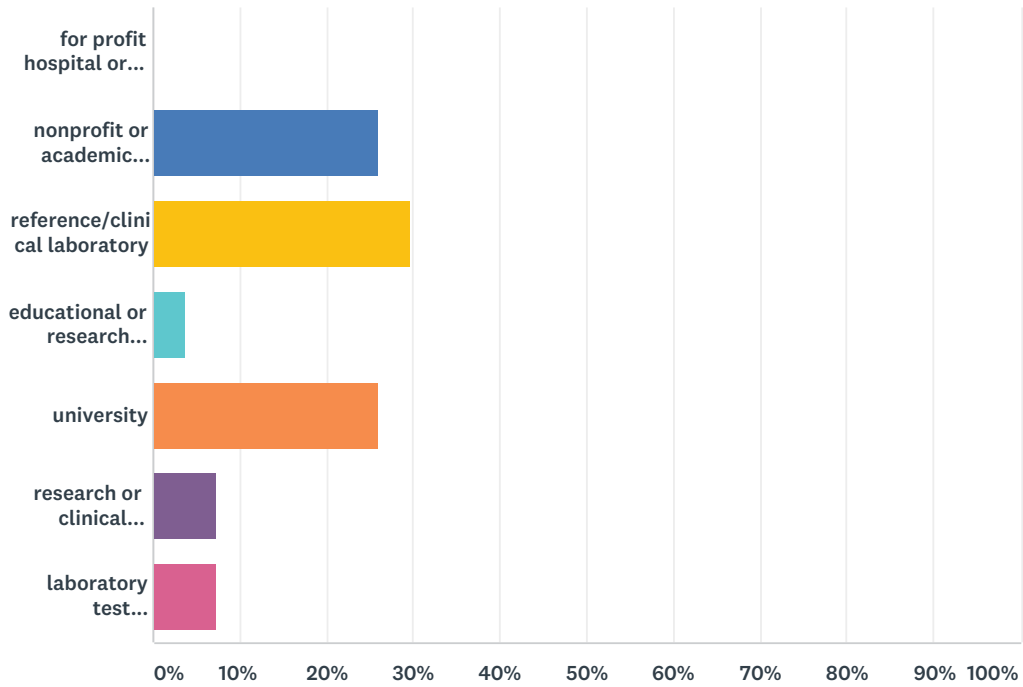
Answered: 2 Skipped: 25

ANSWER CHOICES	RESPONSES
Ultrarapid metabolizer	100.00% 2
Normal metabolizer	100.00% 2
Intermediate metabolizer	100.00% 2
Poor metabolizer	100.00% 2
Please explain:	100.00% 2

#	ULTRARAPID METABOLIZER	DATE
1	<2.25	5/8/2018 7:55 PM
2	3+	5/2/2018 12:34 PM
#	NORMAL METABOLIZER	DATE
1	1.5-2.25	5/8/2018 7:55 PM
2	1.75-2.25	5/2/2018 12:34 PM
#	INTERMEDIATE METABOLIZER	DATE
1	1-1.5	5/8/2018 7:55 PM
2	.75-1.25	5/2/2018 12:34 PM
#	POOR METABOLIZER	DATE
1	0-0.25	5/8/2018 7:55 PM
2	0-0.25	5/2/2018 12:34 PM
#	PLEASE EXPLAIN:	DATE
1	The proposed categories for intermediate will pool patients with a no function allele and a severely decreased function allele (such as *3/*10) with patients who have a functional and a non-functional allele (e.g. *1/*3). In absence of large clinical trials and better clinical evidence, having these patients in a phenotype category that warrants for a closer monitoring is a safer option.	5/8/2018 7:55 PM
2	We also need the bridging phenotypes. Poor to Intermediate, intermediate to normal and rapid. You are on the cusp of spuriously adding ranges that were just recently established by CPIC (for rapid) for example. A full spectrum of ranges are needed for many reasons but one of the most basic is that those of us doing NGS and finding lots of novel alleles that we cannot give phenotype to need to be able to give an answer other than 'indeterminate'. We need to give poor to intermediate as a descriptor, if nothing else, because this IS helpful to clinicians who are treating with tamoxifen, as an example. We are not going to be able to comply with the guidelines that are being developed without a description of the full range of phenotypes possible and consistency with those that already exist (rapid). Labs are just implementing 'rapid' now and you want to change it. This is not sustainable.	5/2/2018 12:34 PM

Q3 Which of the following describes your workplace setting ?

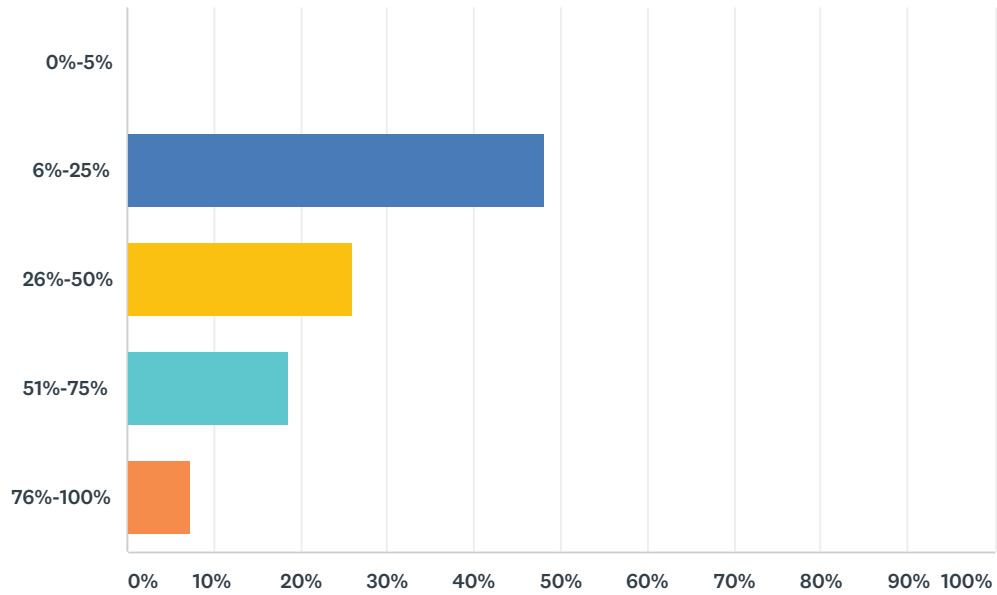
Answered: 27 Skipped: 0



ANSWER CHOICES	RESPONSES	
for profit hospital or clinic	0.00%	0
nonprofit or academic hospital or clinic	25.93%	7
reference/clinical laboratory	29.63%	8
educational or research resource	3.70%	1
university	25.93%	7
research or clinical institute	7.41%	2
laboratory test interpretation service	7.41%	2
TOTAL		27

Q4 What percent of you time is related to work involving CYP2D6?

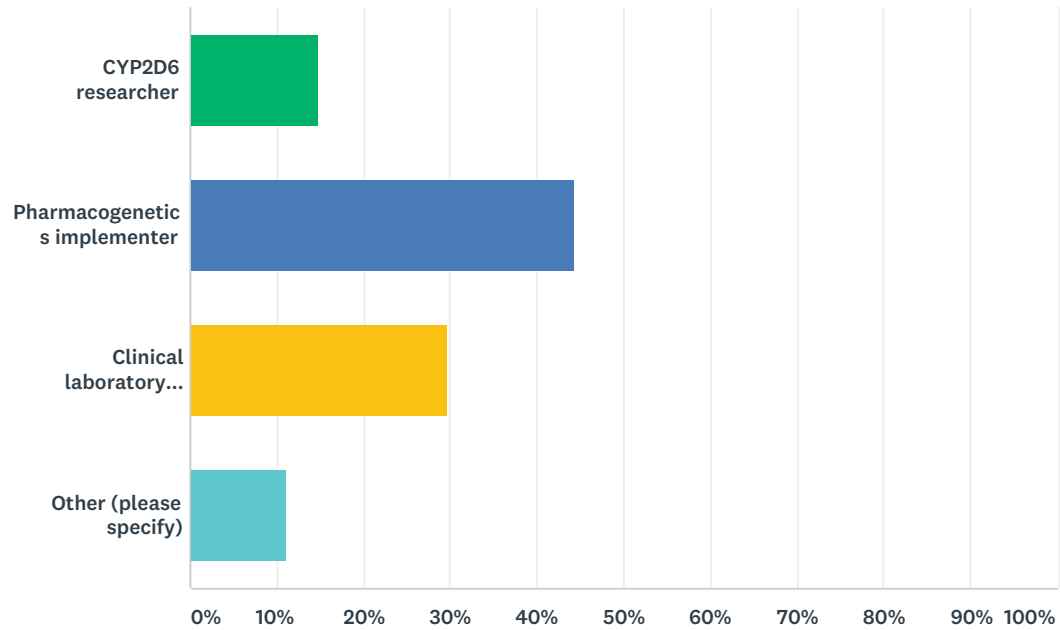
Answered: 27 Skipped: 0



ANSWER CHOICES	RESPONSES	
0%-5%	0.00%	0
6%-25%	48.15%	13
26%-50%	25.93%	7
51%-75%	18.52%	5
76%-100%	7.41%	2
TOTAL		27

Q5 Which of the following best describes your primary job?

Answered: 27 Skipped: 0



ANSWER CHOICES	RESPONSES
CYP2D6 researcher	14.81% 4
Pharmacogenetics implementer	44.44% 12
Clinical laboratory professional	29.63% 8
Other (please specify)	11.11% 3
TOTAL	27

#	OTHER (PLEASE SPECIFY)	DATE
1	academician	6/11/2018 1:43 PM
2	and CYP2D6 researcher	5/8/2018 1:47 AM
3	Pharmacogenetics researcher	5/4/2018 12:52 PM