## Head and Neck Cancer TMA

- Oropharyngeal Carcinoma

    - ❖ 133 primary cancer cases with a known origin or source of tumor in single cores
        35 with LN mets included
        16 with recurrent secondary tumors included
         3 with recurrent tertiary tumors included
    - ❖ 38 primary cancer cases with an unknown or unconfirmed origin or source of tumor in single cores
    - ❖ 25 cervical carcinoma in situ Stage 3 cases (for HPV controls), 1-2 cores each- totaling 36 cores
    - ❖ TMA block identified as HPV.ENT

- The TMA was originally created to be used for p16 and HPV 16/18 testing. In this case, the TMA was created to test the hypothesis of whether head and neck tumors of unknown origin were similar in HPV status to oropharyngeal head and neck cancers (known primary origin referring to a primary of the mouth, base of tongue, or tonsil).

- Includes manual p16 scoring, which was reported as 'positive' or 'negative' based on a published reference.

- H & E, biomarker, and image analysis available.

- **TMA *tiers*** indicate an approximate percentage of cores represented on each TMA slide, where:

    - ❖ Tier 1 has the least core loss with ≥ 80% cores present
    - ❖ Tier 2 has ≥ 50% but < 80% cores present
    - ❖ Tier 3 has < 50% cores present

- TMA Fee Schedule ( per slide )

| Membership | TIER 1 | TIER 2 | TIER 3 |
|---|---|---|---|
| UWCCC Member | $200.00 | $100.00 | $50.00 |
| Non-CCC Member | $240.00 | $120.00 | $60.00 |