



Research Consortium unveils its patient-centric precision medicine cancer treatment protocol to inform and guide cancer patients ... catalyzing them from passive bystanders into informed, engaged and empowered shared decision-makers.

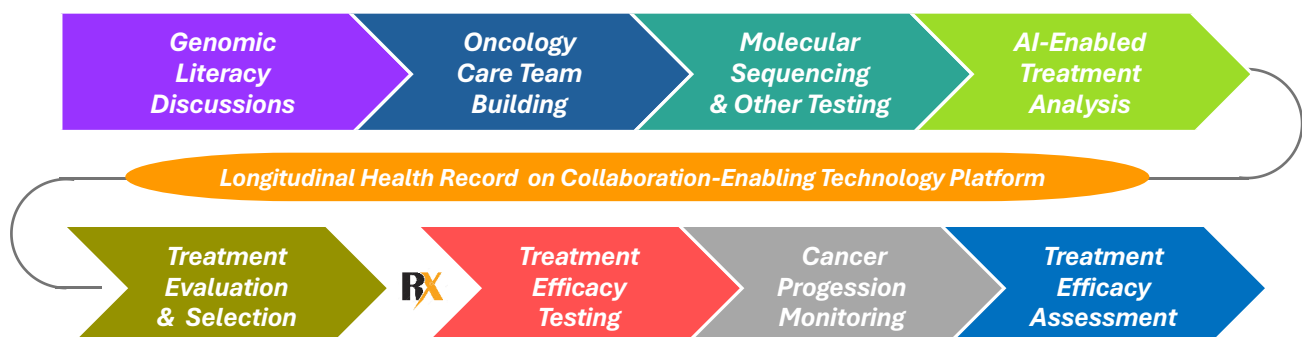
Unfortunately, cancer is typically approached with outdated, one-size-fits-all, hit-or-miss, one-drug-at-a-time *standard-of-care therapy*. By contrast, *precision medicine* uses a cancer's unique genomic profile to make a diagnosis, create a patient-specific therapy, monitor disease progression and measure treatment efficacy. While it should be obvious that employing a *science-based, look-before-you-leap* approach to treatment — the cornerstone of precision medicine — is a far more *conservative* course of action than blindly following pre-genomic era standard-of-care, consensus-based guidelines that, all too often, results in a *sub-optimal treatment*. Sadly, the overwhelming majority of cancer patients are not knowledgeable about, or able to access, precision medicine which remains more of an aspiration than a reality. We at the **Research Consortium** have been working hard to change that.

With cancer, *knowledge is power*. The sheer magnitude of the mental and physical implications, risks and consequences of treatment decision-making dwarfs that of almost any other challenge we face during our lives. As such, it is critical that cancer patients learn about the many misconceptions about cancer, our new approaches to treating it, and the technologies and tools that we rely upon to defeat it. Sadly, most cancer patients have none of the knowledge, resources or support required to understand, seek, access and obtain precision medicine, which is largely why few cancer patients benefit from it.

Cancer patients benefit from being knowledgeable about their disease, informed about treatment options and able to track their disease's progression and treatment efficacy. This empowerment incentivizes some risk-taking on the part of patients who understand and feel confident about the genomic rationale that supports each treatment option. Indeed, as a result, many patients select treatments that have a wider range of outcomes and better prospects of success.

Cancer patients benefit greatly from, and further their chances of gaining access to precision medicine, by becoming informed, engaged and motivated. In our view, the best way to do so is by following our cancer treatment “protocol” (a detailed written plan, predefined procedural method and sequence of steps that outlines procedures and treatments for specific clinical situations). Protocols serve as a framework for clinical decision-making, guide medical professionals in the management of specific medical conditions and ensure that clinical trials and research studies are conducted in a consistent, methodical way. They ensure that patients receive safe, consistent, evidence-based care.

As illustrated below, our precision medicine protocol consists of a series of well-defined steps that, when followed, have proven to be effective at deftly shepherding patients through their cancer journey and our challenging healthcare system ... a trek that is often made more difficult when precision medicine is pursued as an upgrade to outdated standard of care.



Our protocol is patented on [Dr. Harold Benjamin's](#) pioneering *patient active concept* that catalyzes patients from passive bystanders into informed, engaged and empowered shared decision-makers by

- educating cancer patients to advocate for themselves from a position of knowledge,
- empathetically shepherding patients through their cancer journey; and
- helping patients navigate our complex and often unfriendly healthcare system.

Below is an expanded, more detailed description of our treatment protocol and each of its steps:

1	Genomic Literacy	Patient Education and Empowerment	Initiatives to ensure a fundamental level of genomic literacy to enable a sufficient understanding of SoC and precision medicine approaches, tests, technologies, tools, analysis
		Physician Genomic / Technology Overview	
2	Real-Time Collaboration	Patient / Physician Shared Decision-Making	Measures undertaken to facilitate shared patient/physician decision-making, full consideration of a variety of opinions for academic and non-academic professionals, and access to a platform that hosts tools and near real-time longitudinal health records that facilitate vital care team collaboration
		Diverse Interdisciplinary Oncology Care Team	
		Interoperable Longitudinal Health Record	
3	DNA Analysis	Next Generation Sequencing (DNA Testing)	Basic sequencing of ≈ 650 oncogenes to identify actionable cancer drivers and disease characteristics; results input into AI-enabled, genomic-powered treatment matching tools
		AI-Enabled Treatment Selection Analysis	
4	Tx	Treatment Selection	Shared selection of first-line treatment by patient / oncologist
5	Network Analysis	Whole Exome Sequencing (RNA+ Testing)	Deep sequencing and molecular analysis of 22,000 genes to identify key node vulnerabilities within the cancer network's architecture to guide creation of bespoke combo-treatments
		Computational Biological Modeling (Biosimulation)	
6	Therapy Efficacy	Pharmacogenomic Drug Metabolism Testing	PGx testing to identify potential drug interactions and to optimize drug dosing; MRT to better predict the therapeutic efficacy of treatment options using live patient cancer cells
		ML-Enhanced Mass-based Response Testing	
7	CDx	Monitoring / Measurement	CDx monitoring of disease progression/ therapeutic efficacy

The **Research Consortium** is completing work on a piece that will expand upon our treatment entitled “*Cancer Pearls, Recommendations & Resources*”. Medical “pearls” are concise, practical nuggets of particularly valuable medical wisdom – derived from experience, research and case studies – that enhance decision-making and patient care. Pearls help translate complex medical knowledge and concepts into understandable and easily remembered insight. This results in improved and enhanced diagnostic skills and clinical judgement ... and leads to expanded and broadened treatment approaches.

As a non-profit charitable enterprise, the services that are provided by the **Research Consortium** are free-of-charge, as well much of the diagnostic testing that we arrange.

To learn more, call Richard Nicholas at (858) 395-4114 or email him at Richard@ResearchConsortium.org Please also visit our website at www.ResearchConsortium.org



Cancer Pearls, Recommendations & Resources

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Author Background

I have been in the healthcare industry since 1978 and I began working with cancer patients in 1988 when I helped [Harriet and Dr. Harold Benjamin](#) fund, start and operate The Wellness Community which has become the [Cancer Support Community](#), the world's largest cancer support organization. (I'd visit this site as it contains a wealth of knowledge on cancer, treatments and the cancer journey.

For the past few years, I have been working with oncologists, cancer researchers and technologists around the world in an effort to show health insurers why it makes sense to cover the many new technologies that exist to help oncologists select cancer treatments based on a patient's unique genomic profile. This process is called evidencing [clinical utility](#). Beyond proving the innovation's effectiveness and efficacy, evidencing clinical utility involves demonstrating the relevance and value of the innovation in real-world clinical practice to medical practitioners, health systems and payors.

Evidencing clinical utility is a very complicated, multi-year endeavor that typically involves 1,000 or more study participants and dozens of practicing clinicians, from locations throughout the country. Speaking to, and working alongside, cancer patients like you provides valuable insight about how cancer patients, their caregivers and medical care team understand.

Medical Advice Disclaimer

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