<table>
<thead>
<tr>
<th><strong>Date</strong></th>
<th>04/25/2017</th>
</tr>
</thead>
</table>
| **RFE Requestor Information** | Name: Maria Deutsch  
E-mail: maria.deutsch@bms.com |
| **RFE Code** | RFE-17-ONC-118 |
| **Therapeutic Area** | • Immunotherapy agents in oncology  
• Squamous Cell Carcinoma of the Head & Neck (SCCHN) |
| **Area of Interest** | • Immunotherapy mechanism of action and treatment response in head & neck cancer  
• Immune checkpoint inhibitors  
• Immune-related adverse events (irAEs) and management |
| **Educational Design** | Comprehensive, engaging, and innovative education initiative that includes:  
• Live Satellite Symposium at the 2017 American Society for Therapeutic Radiology and Oncology (ASTRO) Annual Meeting (9/24/2017 - 9/27/2017)  
• Live video simulcast of the symposium  
• Web-based enduring activity leveraging the medical content from the live meeting |

Knowledge, performance and competency based outcome measures according to Moore’s Level 5 are required using objective measures.

| **Intended Audience, may include, but not limited to:** | • Medical Oncologists, Radiation Oncologists, Surgical Oncologists, H&N Surgeons  
• Multidisciplinary Oncology Team: NPs/PAs, PharmDs, Pharmacists, Nurses, etc |
| **Accreditation** | ACCME, ANCC, ACPE, CEU, and others as appropriate |
**Budget/Budget Range**
The anticipated single-or multi-supported activity is expected to be achieved with a BMS budget of no more than $200,000.

<table>
<thead>
<tr>
<th>Geographic Coverage</th>
<th>United States</th>
</tr>
</thead>
<tbody>
<tr>
<td>Deadline for Submission (Date and Time)</td>
<td>June 2, 2017 EOB 5pm EST</td>
</tr>
</tbody>
</table>

**Background:**
There is a large amount of clinical data available in immunotherapy for the treatment of advanced head & neck cancer. Understanding how the immune system relates to cancer, expected responses to therapy, and the recognition and management of immune-related adverse events (irAEs) have become areas of focus for the oncology community. Therefore, an integration of the data in a live setting for a broad audience at a key professional meeting is warranted. Since many oncologists and healthcare professionals working in a multidisciplinary oncology team do not have the opportunity to attend live meetings, it is necessary and important to make the activities correlated with these meetings available through internet/computer-based modalities as well.

**Educational needs and professional practice gaps:**
BMS is seeking proposals to close the following independently identified educational gaps for oncology HCPs that treat advanced head & neck cancer.

- **Comprehensive knowledge:** Understand the latest science and clinical trial data on the use of immunotherapy agents in head & neck cancer including the role of the immune system in cancer and the MOA of immunomodulatory agents
- **Treatment algorithms for irAEs:** Increasing the awareness and understanding of the treatment of irAEs and implementing best practices into routine clinical practice.
- **Implementation of cancer immunotherapy treatment:** Apply practice guideline recommendations in the use of immunotherapy in the treatment of head & neck cancer; Describe the potential impact of HPV, PD-L1 status, and expression profiling (ie, IFNγ) on a patient’s clinical response to immune checkpoint inhibitors
• **Improving patient outcomes**: Identify appropriate candidates for approved and emerging cancer immunotherapies for recurrent or metastatic head & neck cancer; Outline methods to incorporate multidisciplinary discussions with the care team in the differential diagnosis of head & neck cancer

**Specific Area of Interest**

BMS is interested in funding an innovative, interactive, educational activity that addresses the above educational needs.

**References**


4. Harrington K, Ferris RL, Shaw JW, et al. Patient-reported outcomes in recurrent or metastatic squamous cell carcinoma of the head and neck treated with nivolumab or investigator’s choice: CheckMate 141. Oral presentation at, the 41st European Society for Medical Oncology (ESMO) Annual Meeting; October 7-11, 2016; Copenhagen, Denmark


The content and/or the format of the CME/CE activity and its related materials must be designed in such a way that it addresses the educational needs of health care professionals and, if appropriate, tools/aids that can help health care practitioners communicate with or better manage their patients.

Presentations and content must give a scientifically sound, fair and balanced overview of new and emerging therapeutic options currently available or in development to manage or prevent this disease.

**Note:** The accredited provider and, if applicable, the medical education provider (MEP) or other third party executing the activities are expected to comply with current ethical codes and regulations. They must have a conflict-of-interest policy in place to identify and resolve all conflicts of interest from all contributors and staff developing the content of the activity prior to delivery of the program, and must have a separate company providing/accrediting independent medical education if they are also performing promotional activities.

*If your organization wishes to submit an educational grant request, please use the online application available on the Bristol-Myers Squibb Independent Medical Education website.*


**Grant Proposals should include, but not be limited to, the following information:**

- **Executive Summary:** The Executive Summary should consist of 1-2 pages and highlight the key areas as described below.

- **Needs Assessment/Gaps/Barriers:** Needs assessment should be referenced and demonstrate an understanding of the specific gaps and barriers of the target audiences. The needs assessment must be independently developed and validated by the educational provider.

- **Target Audience and Audience Generation:** Target audience for educational program must be identified within the proposal. In addition, please describe methods for reaching target audience(s) and any unique recruitment methods that will be utilized. The anticipated or
estimated participant reach should also be included, with a breakdown for each modality included in the proposal, as applicable (e.g., number of participants for the live activity, the live webcast, and enduring activity).

- **Learning Objectives**: The learning objectives must be written in terms of what the learner will achieve as a result of attending. The objectives must be clearly defined, measurable, attainable and address the identified gaps and barriers.

- **Educational Design and Methods**: Describe the approach used to address knowledge, competence, and performance gaps that underlie identified healthcare gaps. The proposal should include strategies that ensure reinforcement of learning through use of multiple educational interventions and include practice resources and tools, as applicable.

  **Communication and Publication Plan**: Provide a description of how the provider will communicate the progress and outcomes of the educational program to the supporter. It is highly recommended to describe how the results of the activity will be presented, published, or disseminated.

- **Program Evaluation and Outcomes Reporting**: Description of the approach to evaluate the reach and quality of the educational program. Describe methods used for determining the impact of the educational program on closing identified healthcare gaps.
  - Please refer to “Guidance for Outcomes Report” (on the BMS grants website) for a detailed explanation of preferred outcomes reporting methods and timelines.

- **Budget**: Detailed budget with rationale of expenses, including breakdown of costs, content cost per activity, out-of-pocket cost per activity, and management cost per activity.