

**AstraZeneca – Call For Grant Application (HER2-low\_Breast\_08012024)**

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| <b>Submission / Review Timeline:</b>                   | Accepting applications until 5:00 PM EST on 09/30/2026. <b>Internal review will be ongoing</b> during this time period. Collaborative and innovative submissions welcomed.                                                                                                                                                                 |
| <b>Primary Area of Focus</b>                           | Oncology – Breast Cancer                                                                                                                                                                                                                                                                                                                   |
| <b>Therapeutic Area</b>                                | Breast cancer HER2-low                                                                                                                                                                                                                                                                                                                     |
| <b>Educational Format</b>                              | Impactful education certified for the target audience. Examples of education formats that will be considered include peer-to-peer case-based discussion formats: <ul style="list-style-type: none"> <li>• Multidisciplinary Tumor Boards</li> <li>• Grand Rounds</li> <li>• Local/Regional programs at Community Cancer Centers</li> </ul> |
| <b>Educational Audience</b>                            | Medical oncologists, pathologists, advanced practitioners (NPs, PAs, etc) on the multidisciplinary teams caring for metastatic breast cancer patients.                                                                                                                                                                                     |
| <b>Total Program Budget (multi-support acceptable)</b> | ≤ 450,000                                                                                                                                                                                                                                                                                                                                  |
| <b>Request Code</b>                                    | Please reference <b>Request code</b> in the CyberGrants application:<br><b>CGA_HER2-low_Breast_08/01/2026</b><br>Grant Title should also begin with the Request Code:<br><b>CGA_HER2-low_Breast_08/01/2026</b>                                                                                                                             |
| <b>Expected Program Execution Timeframe</b>            | October 2026 - February 2027                                                                                                                                                                                                                                                                                                               |
| <b>Website URL</b>                                     | <b>MEGO website:</b> <a href="http://www.astrazenecagrants.com">www.astrazenecagrants.com</a><br><br><b>Grant Application:</b> <a href="https://www.cybergrants.com/astrazeneca/full">https://www.cybergrants.com/astrazeneca/full</a>                                                                                                     |

### **The Request**

We welcome submissions for accredited continuing medical education grants from educational providers who believe they can meet the high demands of a time-sensitive rapid grant submission and deployment of medical education. Submitted applications should include a formal letter of request and grant proposal with needs assessment, learning objectives, agenda, and budget schedule.

AstraZeneca is committed to supporting quality independent medical education that meets an educational need by providing information to healthcare professionals to improve patient care and outcomes. We support education that furthers the understanding of emerging therapies based on a documented unmet need and supports the efforts of health care professionals to broaden patient knowledge and awareness of disease states and treatment options. Our grant support is focused on areas of high unmet need that overlap with our medical areas of interest. For more information, please visit [www.astrazenecagrants.com](http://www.astrazenecagrants.com)

## Background

The understanding of human epidermal growth factor receptor 2 (HER2) in breast cancer has rapidly evolved from a traditional binary classification into a highly nuanced expression spectrum. Recent clinical advancements have demonstrated significant therapeutic efficacy in patients with HER2-low metastatic breast cancer (mBC). To align with these clinical advancements, the College of American Pathologists (CAP) has updated its Breast Biomarker Reporting Protocol, and the NCCN guidelines now recommend that HER2 IHC results with score of 0 include specific staining pattern (0/absent membrane staining or 0+/with membrane staining) per the CAP Biomarker Protocol. Therefore, pathologists are now evaluating and reporting the complete spectrum of HER2 expression utilizing standardized categorical scores, specifically: 0, 0 with membrane staining (or 0+), 1+, 2+, and 3+[1, 2].

The updated pathology practice can result in a critical multidisciplinary communication gap which may delay or prevent patients from receiving guideline-concordant care. This gap stems primarily from discordant terminology and inconsistent operationalization of the complete HER2 IHC spectrum. Specifically, while pathologists report categorical IHC scores, medical oncologists actively scan reports for clinical terms like “HER2-low” or “HER2-ultralow”. In addition, inconsistent implementation of the full spectrum reporting into laboratory information systems and/or lack of integration with EMR may further limit the visibility and usability of actionable HER2 IHC results. Lastly, current reporting workflows may be reactive, requiring oncologists to request HER2 retesting or rescore for more granular detail, resulting in delays.

We invite submissions for independent medical education designed to address practice gaps related to the interpretation, communication, and application of HER2 test results in metastatic breast cancer. Because these challenges vary by institution, educational approaches may benefit from consideration of local practice environments and workflows. Core educational objectives should focus on increasing clinician awareness of the evolving HER2 expression spectrum and addressing communication challenges between pathologists and medical oncologists and the multi-disciplinary team.

Specifically, programs may aim to:

- **Assess local practice variation:** Support learners in identifying factors that may contribute to variability in HER2 reporting, including workflow differences, EHR/LIS considerations, and interpretive challenges.
- **Improve understanding of HER2 reporting:** Enhance awareness of categorical HER2 IHC reporting and its clinical interpretation within the context of current guidelines and institutional processes.
- **Explore approaches to communication and workflow:** Provide opportunities to review examples of how multidisciplinary teams may address reporting clarity and information flow across care settings.

## References

1. Ivanova, M., et al., Standardized pathology report for HER2 testing in compliance with 2023 ASCO/CAP updates and 2023 ESMO consensus statements on HER2-low breast cancer. *Virchows Arch*, 2024. 484(1): p. 3-14. PMID: 37889332.
2. Wolff, A.C., et al., Human epidermal growth factor receptor 2 testing in breast cancer. *Arch Pathol Lab Med*, 2023. 147(9): p. 993-1000. PMID: 37285542.

## **Program Requirements:**

### Accredited:

The Program must be accredited and fully compliant with the criteria and/or standards of

commercial support for ACCME, AAFP, AOA, ACPE, ANCC, AANP, or NCCPA. Furthermore, the program will be educational and non-promotional in nature and will be planned, designed and implemented in accordance with the U.S. Food and Drug Administration's Guidance on Industry-Supported Scientific and Educational Activities ("Policy Statement").

The Policy Statement and the ACCME Standards require, among other things, that (i) Institution conduct the Program independently and without control or influence by AstraZeneca over the Program's planning, content (including the selection of speakers or moderators), or execution; (ii) the Program be free of commercial bias for or against any product; (iii) Institution make meaningful disclosure of AstraZeneca support of the Program and any prior relationship between Institution and AstraZeneca, and the relationship, if any, between AstraZeneca and the speakers selected by Institution; and (iv) AstraZeneca not engage in, and Institution not permit any other sponsor to engage in, promotional activities in or near the Program room or advertise its products in any materials disseminated as part of the Program.

In addition, Institution is required by the Policy Statement and the ACCME Standards to ensure that any product discussions at the Program be accurate, objective, balanced and scientifically rigorous. This includes a balanced discussion of each product and of treatment alternatives, that limitations on data be disclosed, that unapproved uses be identified as such, and that for live presentations there be opportunities for questioning or debate.

If non-accredited

The program must adhere to all guidance related to independent medical education. AstraZeneca will not be involved in the selection of speakers, development of content or determination in how funds will be spent as based on the proposal. AstraZeneca will give grant without any restrictions, preconditions, or post-conditions.