UCSF Helen Diller Family Comprehensive Cancer Center

Adult Trials Open to Accrual

http://cancer.ucsf.edu/clinical-trials

UCSF Protocol No.	Clinicaltrials.gov Protocol No.	PI Name	Title	Protocol Type	Key Eligibility	Study Contact
> Breast > Symptom Management / Survivorship						
10758		Melisko, Michelle	A Registry Study of the Penguin Cold Cap Used for Prevention of Hair Loss in Breast Cancer Patients Receiving Chemotherapy	Supportive Care	Registry Trial Only: Age: 18+; Patients independently decide to use the Penguin Cold Cap System; Ability to complete forms and self-assessments of hair loss	Amy Deluca; Amy.Deluca@ucsf.edu; 415-353-7288
> Breast > Breast Cancer Treatment > Advanced Breast Cancer						
147510	NCT01945775	Rugo, Hope	A Phase 3, Open-Label, Randomized, Parallel, 2-Arm, Multi-Center Study of Talazoparib (BMN 673) versus Physician's Choice in Germline BRCA Mutation Subjects with Locally Advanced and/or Metastatic Breast Cancer, Who Have Received Prior Chemotherapy Regimens for Metastatic Disease	Treatment	- Metastatic or locally advanced breast cancer - HER2 negative breast cancer (by most recent pathology) - BRCA1/BRCA2 mutation confirmed centrally by Myriad (local OK to enroll) - ≤3 prior chemos in the met/locally adv setting (NO LIMIT on prior hormonal or targeted therapies-i.e. CDK, mTOR, VEGF, immune, monoclonal antibodies) - Prior (any setting) tx w/a taxane or anthracycline (exceptions allowed) - If platinum received in the metastatic setting ? can?t have progressed on or w/in 56 days of last dose (pts OK to have low dose platinum w/xrt) - Prior platinum tx allowed in adjuvant/neoadjuvant setting if pt did not relapse w/in 6 mo of last dose of platinum therapy - Measurable or non-measurable disease per RECIST 1.1 w/mods - ECOG ≤2 - Adequate marrow & organ fxn: ANC1.5; Plts 100; Hem 9; AST/ALT 2.5xULN ( 5x OK if liver mets); total bili  1.5xULN; Creatinine cl ≥ 30 mL/min - No prior PARP inhibitor exposure (not including iniparib) - Stable CNS mets OK (on ≤5mg steroids); MRI ≥2wks after tx; No leptomeningeal	Amy Deluca; Amy.Deluca@ucsf.edu; 415-353-7288

UCSF Protocol No.	Clinicaltrials.gov Protocol No.	PI Name	Title	Protocol Type	Key Eligibility	Study Contact
> Breast > Breast Cancer Treatment > Early Stage Breast Cancer						
137525	NCT01864746	Rugo, Hope	Phase III Study Evaluating Palbociclib (PD-0332991), a Cycline-Dependent Kinase (CDK) 4/6 Inhibitor in Patients with Hormone-Receptor-Positive, HER2-Normal Primary Breast Cancer with High Relapse Risk after Neoadjuvant Chemotherapy "Penelope"	Treatment	- Archived tissue for central testing required (sent to Germany ~15day) - Unilateral or bilateral primary invasive breast cancer - Residual invasive disease in breast or nodal invasion - Centrally confirmed hormone receptor + (ER and/or PR +), HER2- - Centrally assessed Ki-67, pRB and Cyclin D1 status - Pts must have received ≥ 16 wks neoadjuvant chemo (≥ 6 wks taxane) - Adequate surgical tx (resection of disease & axillary node dissection) Complete resection (R0) req w/lumpectomy, R1 OK w/mastectomy Axillary dissection not req if pN0, pN+(mic) or ypN0, ypN+(mic) - Adjuvant endocrine tx can be started anytime post-surgery - < 16 wks from final surgery OR <10 wks from xrt (whichever last) - Completion of adj xrt if lumpectomy (& to chest wall if cT3/cT4,R1 or ypN+)	Amy Deluca; Amy.Deluca@ucsf.edu; 415-353-7288
15753	NCT02400476	Chien, Jo	An Open-Label Study to Characterize the Incidence and Severity of Diarrhea in Patients with Early-Stage HER2+ Breast Cancer Treated with Neratinib and Intensive Loperamide Prophylaxis	Supportive Care	- Histologically confirmed stage 1-3c primary BC - Local documentation of HER2 overexpression or gene-amplified tumor - ER+ pts can cnt on hormone tx, (bisphosphonates & denosumab OK) - No evidence of dx * Pts are required to use an electronic diary to record loperamide use	Amy Deluca; Amy.Deluca@ucsf.edu; 415-353-7288

UCSF Protocol No.	Clinicaltrials.gov Protocol No.	PI Name	Title	Protocol Type	Key Eligibility	Study Contact
> Breast > Breast Cancer Treatment > Advanced Breast Cancer > HER2+						
157515	NCT02492711	Rugo, Hope	A Phase 3, Randomized Study of Margetuximab Plus Chemotherapy vs Trastuzumab Plus Chemotherapy in the Treatment of Patients with HER2+ Metastatic Breast Cancer Who Have Received Two Prior Anti-HER2 Therapies and Require Systemic Treatment	Treatment	- Confirmatory IHC testing not required for study entry. Any ER/PR status OK. - Req Prior tx with trastuzumab, TDM1 & Pertuzumab in any setting - Received 1-3 lines of met tx (hormone tx not included) - Prior neo/adj tx w/relapse w/in 6 mo is considered a line of tx for mets. - Must have progression on most recent line of tx	Michael Assefa; michael.assefa@ucsf.edu;
167510	NCT02614794	Chien, Jo	Phase 2 Randomized, Double-Blinded, Controlled Study of ONT-380 vs. Placebo in Combination with Capecitabine and Trastuzumab in Patients with Pretreated Unresectable Locally Advanced or Metastatic HER2+ Breast Carcinoma	Treatment	- Histologically confirmed HER2+ BC (central testing prior to registration) - Prior tx w/a taxane, trastuzumab, pertuzumab, & T-DM1 (if pertuz or T-DM1 given as adjuvant tx must have completed >1 yr from tx start) - Progressed off most recent tx - Measurable or non-measurable disease per RECIST 1.1	Heidi Dittrich; Heidi.Dittrich@ucsf.edu;
> Breast > Breast Cancer Treatment > Advanced Breast Cancer > Triple Negative						
15755	NCT02425891	Rugo, Hope	A PHASE III, MULTICENTER, RANDOMIZED, PLACEBOCONTROLLED STUDY OF ATEZOLIZUMAB (ANTI−PD-L1 ANTIBODY) IN COMBINATION WITH NAB-PACLITAXEL COMPARED WITH PLACEBO WITH NAB-PACLITAXEL FOR PATIENTS WITH PREVIOUSLY UNTREATED METASTATIC TRIPLE-NEGATIVE BREAST CANCER	Treatment		Katherine Balestreri; katherine.balestreri@ucsf.edu;

UCSF Protocol No.	Clinicaltrials.gov Protocol No.	PI Name	Title	Protocol Type	Key Eligibility	Study Contact
16706	NCT02628535	Fong, Lawrence	A Phase 1, First-in-Human, Open Label, Dose Escalation Study of MGD009, a Humanized B7-H3 x CD3 Dual-Affinity Re-Targeting (DART®) Protein in Patients with Unresectable or Metastatic B7-H3-Expressing Neoplasms and Neoplasms whose Vasculature Expresses B7-H3	Treatment	Age: 18+ *Histologically and/or cytologically proven unresectable locally advanced or metastatic tumors that express B7-H3 on the membrane or vasculature. The requirement for previous systemic therapy may be waived if a person was intolerant of standard front-line therapy *Dose escalation phase prior systemic treatment requirements: 1) mesothelioma, pancreatic cancer: 1-3 prior treatments 2) urothelial, SCHNN, prostate, soft tissue sarcoma, prostate cancer, TNBC, ccRCC, NSCLC: 1-5 prior treatments 3) ovarian cancer: 2-4 prior treatments 4)colon cancer: 2-4 prior treatments 5) melanoma: at least 1 prior treatment (including immunotherapy). *Patients with prior immune checkpoint inhibitors must have related toxicities reduced to Grade 0, 1, or baseline *Measurable disease per RECIST 1.1 criteria *Eastern Cooperative Oncology Group (ECOG) performance status 0 or 1 *Acceptable laboratory parameters and adequate organ reserve.	Andrew Chon; andrew.chon@ucsf.edu; Jeremy Burbanks-Ivey; Jeremy.Burbanks-Ivey@ucsf.edu; Julie McCluggage; Julie.McCluggage@ucsf.edu;
16702	NCT02655822	Fong, Lawrence	A Phase 1/1b, Open-Label, Multicenter, Repeat-Dose, Dose-Selection Study of CPI-444 as Single Agent and in Combination with Atezolizumab in Patients with Selected Incurable Cancers	Treatment	Age: 18+ *Documented incurable cancer with one of the following histologies: non-small cell lung cancer, malignant melanoma, renal cell cancer, triple negative breast cancer, colorectal cancer with microsatellite instability (MSI), and bladder cancer. *Eastern Cooperative Oncology Group (ECOG) Performance Status 0-1. *At least 1 measurable lesion per Response Evaluation Criteria in Solid Tumors (RECIST 1.1). *At least 1 but not more than 5 prior systemic therapies for advanced/recurrent or progressing disease. *Additional Tumor Specific inclusion criteria must be met.	Andrew Chon; andrew.chon@ucsf.edu; Julie McCluggage; Julie.McCluggage@ucsf.edu; Katrina Sadang; katrinagrace.sadang@ucsf.edu;

UCSF Protocol No.	Clinicaltrials.gov Protocol No.	PI Name	Title	Protocol Type	Key Eligibility	Study Contact
> Breast > Breast Cancer Treatment > Advanced Breast Cancer > Brain Metastases/leptomeningeal dz						
15752	NCT02308020	Melisko, Michelle	A Phase 2 Study of Abemaciclib in Patients with Brain Metastases Secondary to Hormone Receptor Positive Breast Cancer, Non-Small Cell Lung Cancer, or Melanoma	Treatment	- Brain mets 2° to hist/cytologically confirmed HR+ MBC, NSCLC, or melanoma; Part B: HR+ BC & confirmed HER2 ? ≥1 new or not previously irradiated met brain lesion ≥10 mm or a progressive previously irradiated met brain lesion seen on Gd-MRI. - No prior CDK inhibitor Part C (surgical): HR+ breast cancer, NSCLC, or melanoma w/brain lesions (surgical resection indicated) & agree to provide post-tx brain tumor tissue. met brain lesion(s) -> surgical resection is clinically indicated.	Michael Assefa; michael.assefa@ucsf.edu;
> Breast > Breast Cancer Treatment > Advanced Breast Cancer > Phase I						
11996	NCT01554371	Rugo, Hope	A Phase 1b/II Study of Eribulin in Combination with Cyclophosphamide in Patients with Solid Tumor Malignancies	Treatment	Currently enrolling into Ph2 ? Histologically or cytologically confirmed locally advanced, unresectable or metastatic BC. ? ECOG 0-2 with life expectancy > 3 months ? Must have evaluable disease. Measureable disease is not required. ? Any number of prior chemo lines in the metastatic setting is allowed.	Amy Deluca; Amy.Deluca@ucsf.edu; 415-353-7288
167511	NCT02684032	Rugo, Hope	Phase 1B Study to Assess the Safety, Tolerability, and Clinical Activity of Gedatolisib in Combination With Palbociclib and Either Letrozole or Fulvestrant in Women with Metastatic or Locally Advanced/Recurrent Breast Cancer (MBC)	Treatment	? Post menopausal or menopausal induced, ER+/HER2-, women ≥ 18 years ? ≤1 prior line of chemo in metastatic setting ? Dose escalation portion, patients must satisfy: o Letrozole cohort: mbc w/progression & candidate for letrozole w/palbo o Fulvestrant cohort: mbc w/progression & candidate for fulvestrant w/palbo ? Measurable Disease. Bone-only allowed during dose escalation only.	Amy Deluca; Amy.Deluca@ucsf.edu; 415-353-7288

UCSF Protocol No.	Clinicaltrials.gov Protocol No.	PI Name	Title	Protocol Type	Key Eligibility	Study Contact
16758	NCT01676753	Chien, Jo	A Phase 1b dose de-escalation trial of the cyclin-dependent kinase inhibitor dinaciclib in combination with pembrolizumab in patients with advanced breast cancer and assessment of MYC oncogene overexpression	Treatment	? Hist or cyto confirmed locally advanced, unresectable or metastatic BC. ? Pretreatment tumor biopsy (Core or FNA optional in dose escalation, mandatory in dose expansion if accessible) ? Any number of prior therapies ? ECOG of 0-2, life expectancy of >3 mo ? Must have evaluable disease per RECIST 1.1 (must be measurable in expansion)	Heidi Dittrich; Heidi.Dittrich@ucsf.edu ;

UCSF Protocol No.	Clinicaltrials.gov Protocol No.	PI Name	Title	Protocol Type	Key Eligibility	Study Contact
> Breast > Breast Cancer Treatment > Early Stage Breast Cancer > Invasive > Neoadjuvant						
097517	NCT01042379	Chien, Jo	I-SPY 2 TRIAL (Investigation of Serial Studies to Predict Your Therapeutic Response with Imaging And moLecular Analysis 2)	Treatment	* Histologically confirmed invasive cancer of the breast * Clinically or radiologically measureable disease in the breast after diagnostic biopsy, defined as longest diameter greater than or equal to 25 mm (2.5cm) * No prior cytotoxic regimens are allowed for this malignancy. Patients may not have had prior chemotherapy or prior radiation therapy to the ipsilateral breast for this malignancy. Prior bis-phosphonate therapy is allowed * Willing to undergo core biopsy of the primary breast lesion to assess baseline biomarkers * Non-pregnant and non-lactating * No ferromagnetic prostheses. Patients who have metallic surgical implants that are not compatible with an MRI machine are not eligible. * Eligible tumors must meet one of the following criteria: Stage II or III, or T4, any N, M0, including clinical or pathologic inflammatory cancer or Regional Stage IV, where supraclavicular lymph nodes are the only sites metastasis * Any tumor ER/PgR status, any HER-2/neu status as measured by local hospital pathology laboratory and meets any tumor assay profile described in protocol section 4.1.2F * Normal organ and marrow function: Leukocytes >/= 3000/uL, Absolute neutrophil count >/= 1500/uL, Platelets >/= 100,000/uL, Total bilirubin within normal institutional limits, unless patient has Gilbert's disease, for which bilirubin must be </= 2.0 x ULN, AST(SGOT)/ALT (SGPT) </= 1.5 x institutional ULN, creatinine < 1.5 x institutional ULN	Julia Lyandres; julia.lyandres@ucsfmedctr.org; 415-885-7331 Sarah Davis; sarah.davis@ucsfmedctr.org; 415-885-7490

UCSF Protocol No.	Clinicaltrials.gov Protocol No.	PI Name	Title	Protocol Type	Key Eligibility	Study Contact
> Cutaneous > Melanoma > Immunotherapy > Prior Immunotherapy						
16702	NCT02655822	Fong, Lawrence	A Phase 1/1b, Open-Label, Multicenter, Repeat-Dose, Dose-Selection Study of CPI-444 as Single Agent and in Combination with Atezolizumab in Patients with Selected Incurable Cancers	Treatment	Age: 18+ *Documented incurable cancer with one of the following histologies: non-small cell lung cancer, malignant melanoma, renal cell cancer, triple negative breast cancer, colorectal cancer with microsatellite instability (MSI), and bladder cancer. *Eastern Cooperative Oncology Group (ECOG) Performance Status 0-1. *At least 1 measurable lesion per Response Evaluation Criteria in Solid Tumors (RECIST 1.1). *At least 1 but not more than 5 prior systemic therapies for advanced/recurrent or progressing disease. *Additional Tumor Specific inclusion criteria must be met.	Andrew Chon; andrew.chon@ucsf.edu; Julie McCluggage; Julie.McCluggage@ucsf.edu; Katrina Sadang; katrinagrace.sadang@ucsf.edu;
16707	NCT02812875	Daud, Adil	A Phase 1, Open-Label, Dose Escalation and Dose Expansion Trial Evaluating the Safety, Pharmacokinetics, Pharmacodynamics, and Clinical Effects of Orally Administered CA-170 in Patients with Advanced Tumors and Lymphomas	Treatment	Age:18+ *Life expectancy of at least 3 months *ECOG PS ≤ 1 *Acceptable bone marrow and organ function at screening *Ability to swallow and retain oral medications *Negative serum pregnancy test in women of childbearing potential *Measurable disease *Tumor for which standard therapy, including approved anti-PD-1 or anti-PD-L1 therapy, when applicable, does not exist or is no longer effective.	Andrew Chon; andrew.chon@ucsf.edu; Jeremy Burbanks-Ivey; Jeremy.Burbanks-Ivey@ucsf.edu; Julie McCluggage; Julie.McCluggage@ucsf.edu;

UCSF Protocol No.	Clinicaltrials.gov Protocol No.	PI Name	Title	Protocol Type	Key Eligibility	Study Contact
> Gastrointestinal > Anal Cancer > Prevention / Dysplasia						
13362	NCT01651949	Palefsky, Joel	A Phase III Clinical Trial to Study the Tolerability and Immunogenicity of V503, a Multivalent Human Papillomavirus (HPV) L1 Virus-Like Particle (VLP) Vaccine, in 16- to 26-Year-Old Men and 16- to 26-Year-Old Women	Prevention	Age: 18-26 * Has never had Pap testing (cervical or anal) or has only had normal Pap test results	Fred Fishman; Fred.Fishman@ucsf.edu; 415-353-7443
AMC-A01	NCT02135419	Palefsky, Joel	ANCHOR Study: Anal Cancer Prevention Anal Cancer /HSIL Outcomes Research Study	Prevention	Age: 35+ * HIV-1 infection, as documented by any federally approved, licensed HIV test performed in conjunction with screening * No history of treatment or removal of HSIL * No history of anal cancer or signs of anal cancer at baseline, and no history of penile, vulvar, vaginal or cervical cancer	Abigail Arons; Abigail.Arons@ucsf.edu;

UCSF Protocol No.	Clinicaltrials.gov Protocol No.	PI Name	Title	Protocol Type	Key Eligibility	Study Contact
> Gastrointestinal > Biliary Tract Cancers (Cholangiocarcinoma) > Advanced (including Locally Advanced / Inoperable and Metastatic)						
16457	NCT02711553	Kelley, Robin	Randomized, Double-Blind, Phase 2 Study of Ramucirumab or Merestinib or Placebo plus Cisplatin and Gemcitabine as First-Line Treatment in Patients with Advanced or Metastatic Biliary Tract Cancer	Treatment	Age 18+ * Have a histologically or cytologically confirmed diagnosis of non-resectable, recurrent, or metastatic biliary tract adenocarcinoma (intrahepatic or extrahepatic cholangiocarcinoma, gallbladder cancer, or Ampulla of Vater). * Previous systemic therapy for locally advanced or metastatic disease is NOT allowed. Transarterial chemoembolization (TACE) or radiotherapy, including use of radioactive beads, is not allowed. The following previous treatments are allowed: o a non-curative operation (that is, R2 resection [with macroscopic residual disease] or palliative bypass surgery); o curative surgery with evidence of non-resectable disease relapse requiring systemic chemotherapy for which study participation will represent first line of chemotherapy; o adjuvant chemotherapy, provided neither gemcitabine nor cisplatin were used and the treatment was completed more than 6 months before trial entry. Patients who received adjuvant gemcitabine and/or cisplatin greater than 12 months before relapse and study entry will be permitted. o photodynamic treatment, provided that there was clear evidence of disease progression at the local site or measurable and progressing disease is present at another site.	Jennifer Luan; jennifer.luan@ucsf.edu; 415-514-6220

UCSF Protocol No.	Clinicaltrials.gov Protocol No.	PI Name	Title	Protocol Type	Key Eligibility	Study Contact
> Gastrointestinal > Esophageal and Gastric Cancer (including GE junction) > Resectable > Adjuvant (after surgery)						
16459	NCT02743494	Ko, Andrew	A Randomized, Multicenter, Double Blind, Phase III Study of Adjuvant Nivolumab or Placebo in Subjects with Resected Esophageal, or Gastroesophageal Junction Cancer	Treatment		Jennifer Luan; jennifer.luan@ucsf.edu; 415-514-6220
> Gastrointestinal > Hepatocellular Carcinoma (liver cancer)						
RTOG-1112	NCT01730937	Feng, Mary	Randomized Phase III Study of Sorafenib Versus Stereotactic Body Radiation Therapy Followed by Sorafenib in Hepatocellular Carcinoma	Treatment	Age 18+ *Hepatocellular Carcinoma (HCC) diagnosis (initial, recurrent, progressive and/or refractory to other therapies) ≤360 days prior to study entry *Measurable hepatic disease and/or presence of vascular tumor thrombosis (involving portal vein, IVC and/or hepatic vein) within 28 days of registration *Barcelona clinic liver cancer (BCLC stage) Intermediate (B) or advanced (C) within 14 days prior to study entry	Ashley Wu; ashley.wu@ucsf.edu; 415-476-2651

UCSF Protocol No.	Clinicaltrials.gov Protocol No.	PI Name	Title	Protocol Type	Key Eligibility	Study Contact
> Gastrointestinal > Advanced Fibrolamellar Hepalocellular Carcinoma						
154514	NCT02234986	Gordan, John	A Phase 2 Study of Oral ENMD-2076 for the Treatment of Patients with Advanced Fibrolamellar Carcinoma (FLC)	Treatment	Male or non-pregnant, non-breastfeeding female at least 18 years of age. Patients aged at 12~18 years maybe recruited but only at the site principle investigator's request and subject to IRB approval. * Histologically or cytologically confirmed advanced not amenable to curative resection fibrolamellar carcinoma (FLC). * All forms of prior local therapy are allowed as long as patients have either a target lesion, which has not been treated with local therapy and/or the target lesion(s) within the field of the local-regional therapy that has shown an increase of ≥ 20% in size. Local-regional therapy must be completed at least 4 weeks prior to the baseline CT scan. * Patients with prior systemic regimens are allowed. There is no limitation to the number of previous systemic regimens but must have recovered from any toxicity attributable to prior therapy.	Contact: 877-827-3222 or cancertrials@ucsf.edu
> Gastrointestinal > Hepatocellular Carcinoma (liver cancer) > Metastatic/Advanced > Second-Line and Beyond						
13455	NCT01908426	Kelley, Robin	A Phase 3, Randomized, Controlled Study of Cabozantinib (XL184) in Subjects with Hepatocellular Carcinoma who have Received Prior Sorafenib	Treatment	Age: 18+ * Histological or cytological diagnosis of Hepatocellular Carcinoma * Received prior sorafenib * The subject has disease that is not amenable to a curative treatment approach (eg, transplant, surgery, radiofrequency ablation) * Progression following at least 1 prior systemic treatment for HCC	Contact: 877-827-3222 or cancertrials@ucsf.edu

UCSF Protocol No.	Clinicaltrials.gov Protocol No.	PI Name	Title	Protocol Type	Key Eligibility	Study Contact
16458	NCT02642913	Kelley, Robin	A Multicenter Phase I/II Study of Enzalutamide With and Without Sorafenib in Advanced Hepatocellular Carcinoma Patients	Treatment	Age 18+ * Histologic proof of HCC reviewed and confirmed at the treating institution. * Advanced unresectable or metastatic disease * For patients who will receive enzalutamide monotherapy, failure or intolerance of prior sorafenib is required for enrollment. For patients who will receive combination therapy, prior sorafenib is excluded.	Jennifer Luan; jennifer.luan@ucsf.edu; 415-514-6220
16451	NCT02519348	Kelley, Robin	A Study of Safety, Tolerability, and Clinical Activity of MEDI4736 and Tremelimumab Administered as Monotherapy and in Combination to Subjects with Unresectable Hepatocellular Carcinoma	Treatment	Age 18+ * Unresectable HCC with diagnosis confirmed pathologically or with noninvasive methods with and without concomitant HBV or HCV infection. * Immunotherapy-naive and have either progressed on, are intolerant to, or refused treatment with sorafenib. Subjects who receive treatment with systemic therapies other than sorafenib are not eligible. * At least one measurable lesion according to RECIST v1.1.	Ariceli Alfaro; Ariceli.Alfaro@ucsf.edu;

UCSF Protocol No.	Clinicaltrials.gov Protocol No.	PI Name	Title	Protocol Type	Key Eligibility	Study Contact
154524	NCT02703714	Kelley, Robin	Phase II Trial of Pembrolizumab (MK-3475) with GM-CSF Induction in Advanced Biliary Cancers	Treatment	Age 18+ * Histologically- or cytologically-diagnosed advanced or locally-advanced biliary cancer not eligible for resection or other curative therapies. * Clinical and/or radiographic progression on ≥ 1 prior systemic treatment regimen with cytotoxic chemotherapy, targeted therapy, and/or investigational therapy for advanced biliary cancer. Cumulative toxicity or intolerability (such as progressive cytopenias, neuropathy, or asthenia on a 1st line regimen of gemcitabine plus cisplatin) requiring treatment discontinuation of ≥ 1 prior systemic treatment regimen is also sufficient for eligibility. There is no maximum eligible prior number of lines of therapy provided all eligibility criteria are met. Adjuvant chemotherapy including gemcitabine and/or fluoropyrimidine after prior surgical resection of CCA or GBC will be considered as 1 line of prior therapy if relapse/recurrence with incurable disease occurred within ≤ 6 months of last dose. * Have a performance status of 0 or 1 on the ECOG Performance Scale.	Madeline Griffith; madeline.griffith@ucsf.edu;

UCSF Protocol No.	Clinicaltrials.gov Protocol No.	PI Name	Title	Protocol Type	Key Eligibility	Study Contact
15452	NCT02150967	Kelley, Robin	A Phase II Multicenter, Single Arm Study of Oral BGJ398 in Adult Patients with Advanced or Metastatic Cholangiocarcinoma with FGFR2 Gene Fusions or Other FGFR Genetic Alterations who Failed or are Intolerant to Platinum-based Chemotherapy	Treatment	Age 18+ * Patients with histologically or cytologically confirmed cholangiocarcinoma at the time of diagnosis. Patients with cancers of the gallbladder or ampulla of Vater are not eligible. * Written documentation of local or central laboratory determination of FGFR2 gene fusions/translocations or other FGFR genetic alterations is required for pre-screening. Patients identified to have other FGFR genetic alterations may be eligible pending agreement between Novartis and Investigator. * Patients must have received at least one prior regimen containing gemcitabine with or without cisplatin for advanced/metastatic disease. Patient should have had evidence of progressive disease following prior regimen, or if prior treatment discontinued due to toxicity must have continued evidence of measurable or evaluable disease.	Contact: 877-827-3222 or cancertrials@ucsf.edu
> Gastrointestinal > Pancreatic Cancer > Locally Advanced						
164516	NCT01926197	Anwar, Mekhail	Pancreatic Cancer Radiotherapy Study Group (PanCRS) Trial: A Randomized Phase III Study Evaluating Modified FOLFIRINOX (mFFX) with or without Stereotactic Body Radiotherapy (SBRT) in the Treatment of Locally Advanced Pancreatic Cancer	Treatment	Age: 18+ *HIstologically confirmed adencarcinoma of the pancreas; *Unresectable disease; *Stable of better disease on re-staging scans following induction of mFOLFIRINOX.	Mah (Sidra) Jabeen; Mah.Jabeen@ucsf.edu; 415-476-1907

UCSF Protocol No.	Clinicaltrials.gov Protocol No.	PI Name	Title	Protocol Type	Key Eligibility	Study Contact
> Gastrointestinal > Rectal Cancer > Resectable > Neoadjuvant (before surgery)						
CTSU-NCCTG-N1048	NCT01515787	Venook, Alan	A Phase II/III trial of Neoadjuvant FOLFOX, with Selective Use of Combined Modality Chemoradiation versus Preoperative Combined Modality Chemoradiation for Locally Advanced Rectal Cancer Patients Undergoing Low Anterior Resection with Total Mesorectal Excision	Treatment	Age: 18+ * Diagnosis of rectal adenocarcinoma * For this patient, the standard treatment recommendation in the absence of a clinical trial would be combined-modality, neoadjuvant chemoradiation followed by curative-intent surgical resection * No chemotherapy within 5 years prior to registration	Sharvina Ziyeh; ZiyehS@ucsf.edu; 415-353-7683
144515	NCT02487277	Ko, Andrew	Perioperative Stromal Depletion Strategies in Pancreatic Ductal Adenocarcinoma	Treatment		Contact: 877-827-3222 or cancertrials@ucsf.edu
> Genitourinary > Prostate Cancer						
15551	NCT02546427	Chang, Albert	Phase I Feasibility Study of Accelerated Hypofractionated Whole Pelvic Radiotherapy for Patients with Intermediate-High Risk Prostate Cancer	Treatment	Age 18+ *Histologically confirmed intermediate- to high-risk prostate adenocarcinoma *Greater than 15% risk of lymph node involvement *No prior or concurrent invasive malignancy (except non-melanomatous skin cancer) or lymphomatous/hematogenous malignancy unless continually disease free for a minimum of 5 years.	Mah (Sidra) Jabeen; Mah.Jabeen@ucsf.edu; 415-476-1907
15558	NCT02508636	Chang, Albert	Phase II Multi-Institutional Trial of Definitive Radiotherapy with Leuprolide and Enzalutamide in High Risk Prostate Cancer	Treatment	Age 18+ *Histologically confirmed diagnosis of adenocarcinoma of the prostate within 180 days prior to registration at very high risk of recurrence OR pelvic lymph node involvement ≥ 1 cm as determined by pelvic CT or MRI imaging *No distant metastases (M0) on bone scan or NaF PET/CT within 8 weeks prior to registration	Mah (Sidra) Jabeen; Mah.Jabeen@ucsf.edu; 415-476-1907

UCSF Protocol No.	Clinicaltrials.gov Protocol No.	PI Name	Title	Protocol Type	Key Eligibility	Study Contact
> Genitourinary > Testicular Cancer						
ALLIANCE-A031102	NCT02375204	Friedlander, Terence	A Randomized Phase III Trial Comparing Conventional-Dose Chemotherapy Using Paclitaxel, Ifosfamide, and Cisplatin (TIP) with High-Dose Chemotherapy Using Mobilizing Paclitaxel Plus Ifosfamide Followed by High-Dose Carboplatin and Etoposide (TI-CE) as First Salvage Treatment in Relapsed or Refractory Germ Cell Tumors	Treatment	Age: 14+ *Confirmation of GCT histology on pathologic review at center of enrollment * Evidence of progressive or recurrent GCT confirmed by either biopsy, consecutively elevated HCG or AFPmarkers, and/or new/enlarging lesions without consecutive HCG/AFP rise *Must have received 3-6 cycles of cisplatin-based chemotherapy as part of first line chemotherapy * No more than one prior line of chemotherapy for GCT * No prior treatment with high-dose chemotherapy (defined as utilizing stem cell rescue) and no prior treatment with TIP with the exception when given as a bridge to patients with rapidly progressive disease who cannot wait to complete the eligibility screening process. Only 1 cycle is allowed. *Negative Serology for HIV, HTLV, HepB, HepC	Lani Bradish; landi.bradish@ucsf.edu ;
> Genitourinary > Bladder Cancer > Localized / Non-Muscle Invasive						
14524	NCT02451423	Fong, Lawrence	A Phase II Study of the Anti-PD-L1 Antibody MPDL3280A in Subjects with Non-Metastatic Transitional Cell Carcinoma of the Bladder	Treatment	Age: 18 and + *Histologically documented transitional cell carcinoma with the presence of any of the following stages: CIS, high-grade Ta, any grade T1, or any grade cT2-T4, considered appropriate for radical cystectomy. Subjects with mixed histology are required to have a dominant TCC pattern. * For subjects with non muscle invasive bladder cancer(NMIBC), BCG-refractory or BCG-resistant disease. *Subjects with NMIBC must be suitable for and willing to undergo a radical cystectomy at the completion of study therapy. *Adequate bone marrow, renal, and liver function	Lani Bradish; landi.bradish@ucsf.edu ; Paula Dutton; Paula.Dutton@ucsf.edu ; 415-885-7871

UCSF Protocol No.	Clinicaltrials.gov Protocol No.	PI Name	Title	Protocol Type	Key Eligibility	Study Contact
> Genitourinary > Prostate Cancer > Localized						
RTOG-0924	NCT01368588	Roach, Mack	Androgen Deprivation Therapy and High Dose Radiotherapy With or Without Whole-Pelvic Radiotherapy in Unfavorable Intermediate or Favorable High Risk Prostate Cancer: A Phase III Randomized Trial	Treatment	Age 18+ * Pathologically (histologically or cytologically) proven diagnosis of prostatic adenocarcinoma within 180 days of registration at moderate- to high-risk for recurrence * Clinically negative lymph nodes as established by imaging * No evidence of bone metastases (M0) on bone scan	Ashley Wu; ashley.wu@ucsf.edu; 415-476-2651
> Genitourinary > Bladder Cancer > Localized / Muscle Invasive						
14524	NCT02451423	Fong, Lawrence	A Phase II Study of the Anti-PD-L1 Antibody MPDL3280A in Subjects with Non-Metastatic Transitional Cell Carcinoma of the Bladder	Treatment	Age: 18 and + *Histologically documented transitional cell carcinoma with the presence of any of the following stages: CIS, high-grade Ta, any grade T1, or any grade cT2-T4, considered appropriate for radical cystectomy. Subjects with mixed histology are required to have a dominant TCC pattern. * For subjects with non muscle invasive bladder cancer(NMIBC), BCG-refractory or BCG-resistant disease. *Subjects with NMIBC must be suitable for and willing to undergo a radical cystectomy at the completion of study therapy. *Adequate bone marrow, renal, and liver function	Lani Bradish; landi.bradish@ucsf.edu ; Paula Dutton; Paula.Dutton@ucsf.edu ; 415-885-7871

UCSF Protocol No.	Clinicaltrials.gov Protocol No.	PI Name	Title	Protocol Type	Key Eligibility	Study Contact
> Genitourinary > Prostate Cancer > Metastatic Castration Sensitive						
16703	NCT03007732	Fong, Lawrence	Phase 2 Trial Pembrolizumab or Pembrolizumab in Combination with Intratumoral SD-101 Therapy in Patients with Hormone-Naïve Oligometastatic Prostate Cancer Receiving Definitive Prostatic Radiation and Intermittent Androgen Deprivation Therapy	Treatment	Age: 18+ *Histologically documented adenocarcinoma of the prostate *Oligometastatic disease. In order to be eligible, the patient must have a total of <4 metastatic bone and/or metastatic lymph node sites based on bone and/or soft tissue lesions as defined by any of the following: 1) Bone metastases will be defined by bone imaging. If the patient has technetium bone scan and/or NaF PET performed, either study may be used for documenting metastases; both scans do not need to show the number of metastases required for study entry. For patients undergoing PSMA PET, only PSMA avid lesions that have a CT or MRI correlate will be counted as a site of metastasis. 2) Distant metastatic lymph node disease. A lymph node ≥1 cm in shortest dimension will be noted as involved with disease. Distant metastatic lymph nodes will be determined as any lymph nodes outside the confine of the true pelvis. For patients undergoing PSMA PET, only PSMA avid lesions that have a CT or MRI correlate will be counted as a site of metastasis. 3)Any other soft tissue lesion deemed by the physician to be consistent with distant metastatic disease i.e. lung and liver metastases. For patients undergoing PSMA PET, only PSMA avid lesions that have a CT or MRI correlate will be counted as a site of metastasis. *No prior chemotherapy for prostate cancer and not a candidate for or refuse chemotherapy *PSA >2 ng/mL at baseline or prior to initiation of hormonal therapy and baseline testosterone >150 ng/dL if patient has not initiated hormonal therapy	Andrew Chon; andrew.chon@ucsf.edu; Christopher Wong; christopher.wong@ucsf.edu; Julie McCluggage; Julie.McCluggage@ucsf.edu;

UCSF Protocol No.	Clinicaltrials.gov Protocol No.	PI Name	Title	Protocol Type	Key Eligibility	Study Contact
> Genitourinary > Renal Cell Carcinoma > Second Line						
16702	NCT02655822	Fong, Lawrence	A Phase 1/1b, Open-Label, Multicenter, Repeat-Dose, Dose-Selection Study of CPI-444 as Single Agent and in Combination with Atezolizumab in Patients with Selected Incurable Cancers	Treatment	Age: 18+ *Documented incurable cancer with one of the following histologies: non-small cell lung cancer, malignant melanoma, renal cell cancer, triple negative breast cancer, colorectal cancer with microsatellite instability (MSI), and bladder cancer. *Eastern Cooperative Oncology Group (ECOG) Performance Status 0-1. *At least 1 measurable lesion per Response Evaluation Criteria in Solid Tumors (RECIST 1.1). *At least 1 but not more than 5 prior systemic therapies for advanced/recurrent or progressing disease. *Additional Tumor Specific inclusion criteria must be met.	Andrew Chon; andrew.chon@ucsf.edu ; Julie McCluggage; Julie.McCluggage@ucsf.edu; Katrina Sadang; katrinagrace.sadang@ucsf.edu;

UCSF Protocol No.	Clinicaltrials.gov Protocol No.	PI Name	Title	Protocol Type	Key Eligibility	Study Contact
> Genitourinary > Prostate Cancer > Metastatic Castration Resistant (mCRPC)						
155516	NCT02916537	Aggarwal, Rahul	A Phase I Trial for Evaluation of the Safety, Pharmacokinetics, and 18F Radiation Dosimetry of 18[F]CTT1057, a Small Molecule Inhibitor of Prostate Specific Membrane Antigen	Diagnostic	Age: 18+ * Histologically confirmed adenocarcinoma of the prostate * Adequate organ function * Cohort A only: planned RP within 12W following protocol scan, no contra-indication to endorectal coil including presence of fistula or inflammatory bowel disease, & no androgen deprivation, anti-androgen therapy, chemo, or investigational systemic therapy prior to CTT1057 PET imaging * Cohort B only: presence of at least three distinct metastatic lesions by a bone scan and CT scan of A/P within 12W prior to protocol scan * Castration-resistant disease as defined by PCWG2 criteria * Must remain on ADT for duration of study if no prior bilateral orchiectomy * Cannot have received a radioisotope within 5 physical half-lives prior to trial enrollment * Cannot have had prior treatment with alpha radiation therapy or other radiopharmaceutical within the past 60 days of trial enrollment	Kenneth Gao; kenneth.gao@ucsf.edu;

UCSF Protocol No.	Clinicaltrials.gov Protocol No.	PI Name	Title	Protocol Type	Key Eligibility	Study Contact
15559	NCT02911467	Aggarwal, Rahul	Magnetic Resonance (MR) Imaging with Hyperpolarized Pyruvate (13C) as a Predictive Biomarker of Response in Castration-Resistant Prostate Cancer	Diagnostic	Age: 18+ * Biopsy proven prostate cancer * Progressive, castration resistant disease according to PCWG2 criteria * Planned treatment with an androgen signaling inhibitor * No current androgen signaling inhibitor at the time of baseline MR scan * Presence of at least one lesion detected by staging scans amenable to hyperpolarized C-13 pyruvate / metabolic MR imaging: - Soft tissue / visceral organ lesions measure at 1.5 cm on CT / MRI - Bone lesions visualized by CT / MRI - No prior local treatment on prostate lesions o Patients w/ prior radiation / ablative therapy required to have biopsy proven evidence of recurrence following completion of local therapy * Prior bilateral orchiectomy or be on continuous LHRH analogue therapy for duration of the study * Castrate level of serum testosterone (<50 ng/dL) at study entry * No MRI contraindications	Christopher Sotto; Christopher.sotto@mrsc.ucsf.edu ;
> Genitourinary > Prostate Cancer > Metastatic Castration Resistant (mCRPC) > Chemotherapy Naïve - AR Target Therapy Naive						
12557	NCT01804465	Fong, Lawrence	A Randomized Phase 2 Trial of Immediate versus Delayed Anti-CTLA-4 Blockade Following Sipuleucel-T Treatment for Prostate Cancer Immunotherapy	Treatment	Age: 18+ * Metastatic prostate adenocarcinoma * Progressive disease after androgen deprivation	Lani Bradish; landi.bradish@ucsf.edu ;

UCSF Protocol No.	Clinicaltrials.gov Protocol No.	PI Name	Title	Protocol Type	Key Eligibility	Study Contact
> Genitourinary > Prostate Cancer > Localized > Pre-Therapy / Neoadjuvant						
15557	NCT02526368	Aggarwal, Rahul	A Pilot Study of Magnetic Resonance (MR) Imaging with Hyperpolarized Pyruvate (13C) to Detect High Grade Localized Prostate Cancer	Diagnostic	Age:18+ * Biopsy-proven adenocarcinoma of the prostate; may include patients with primary Gleason 4 or 5 * Planned radical prostatectomy at UCSF within 12 weeks following MRI/MRSI * No prior cryosurgery, surgery for prostate cancer, prostatic / pelvic radiotherapy, or TURP * No current or prior ADT; history of use of 5-a reductase inhibitor allowed discontinued one month prior to study entry * No MRI contraindications	Christopher Sotto; Christopher.sotto@mrsc.ucsf.edu ;
155516	NCT02916537	Aggarwal, Rahul	A Phase I Trial for Evaluation of the Safety, Pharmacokinetics, and 18F Radiation Dosimetry of 18[F]CTT1057, a Small Molecule Inhibitor of Prostate Specific Membrane Antigen	Diagnostic	Age: 18+ * Histologically confirmed adenocarcinoma of the prostate * Adequate organ function * Cohort A only: planned RP within 12W following protocol scan, no contra-indication to endorectal coil including presence of fistula or inflammatory bowel disease, & no androgen deprivation, anti-androgen therapy, chemo, or investigational systemic therapy prior to CTT1057 PET imaging * Cohort B only: presence of at least three distinct metastatic lesions by a bone scan and CT scan of A/P within 12W prior to protocol scan * Castration-resistant disease as defined by PCWG2 criteria * Must remain on ADT for duration of study if no prior bilateral orchiectomy * Cannot have received a radioisotope within 5 physical half-lives prior to trial enrollment * Cannot have had prior treatment with alpha radiation therapy or other radiopharmaceutical within the past 60 days of trial enrollment	Kenneth Gao; kenneth.gao@ucsf.edu;

UCSF Protocol No.	Clinicaltrials.gov Protocol No.	PI Name	Title	Protocol Type	Key Eligibility	Study Contact
155514	NCT02643667	Fong, Lawrence	A Phase 1/2 Study of Ibrutinib as Neoadjuvant Therapy in Patients with Localized Prostate Cancer	Treatment	Age: 18 and + *Patients must be suitable for and willing to undergo a radical prostatectomy at the completion of study therapy. *Adequate bone marrow function, liver, coagulation, renal, and liver *Agreement to adequatecontraception prior to the study, for the duration of the study participation, and for 3 months after completion of treatment. *Available evaluable archival tumor tissue or willing to undergo a repeat prostate biopsy	Lani Bradish; landi.bradish@ucsf.edu ;

UCSF Protocol No.	Clinicaltrials.gov Protocol No.	PI Name	Title	Protocol Type	Key Eligibility	Study Contact
14559	NCT02506114	Fong, Lawrence	An Open Label, Randomized Phase 2 Trial of Prostvac and Ipilimumab as Monotherapy or in Combination for Men with Localized Prostate Cancer Undergoing Radical Prostatectomy	Treatment	Age 18+ *Histologically confirmed adenocarcinoma of the prostate without previous therapy for PC *Treatment-naive AND undergoing RP as initial, locally definitive therapy for PC AND eligible for RP in a 3 month timeframe *Subjects whose biopsy specimens reveal neuroendocrine or small cell features are excluded *Subjects with any evidence of metastatic disease are excluded *Subject, or subject's close household contacts, with any of the following conditions during the screening and/or treatment periods are excluded: active or a history of atopic dermatitis, eczema, or other eczematoid skin disorders that disrupt the epidermis; other acute, chronic or exfoliative skin conditions (e.g., burns, impetigo, varicella zoster, severe acne or other open rashes or wounds) until condition resolves *Subject whose close household contacts include children less than the age of three are excluded *Subjects with a history of, or active autoimmune disease, are excluded (e.g., autoimmune neutropenia, thrombocytopenia, or hemolytic anemia, systemic lupus erythematosis, Sjogren´s syndrome, scleroderma, myasthenia gravis, Goodpasture´s syndrome, Addison´s disease, Hashimotos´s thyroiditis, or Graves disease) as determined by the treating medical oncologist	Lani Bradish; landi.bradish@ucsf.edu ;

UCSF Protocol No.	Clinicaltrials.gov Protocol No.	PI Name	Title	Protocol Type	Key Eligibility	Study Contact
> Genitourinary > Renal Cell Carcinoma > Second Line > Post TKI						
16707	NCT02812875	Daud, Adil	A Phase 1, Open-Label, Dose Escalation and Dose Expansion Trial Evaluating the Safety, Pharmacokinetics, Pharmacodynamics, and Clinical Effects of Orally Administered CA-170 in Patients with Advanced Tumors and Lymphomas	Treatment	Age:18+ *Life expectancy of at least 3 months *ECOG PS ≤ 1 *Acceptable bone marrow and organ function at screening *Ability to swallow and retain oral medications *Negative serum pregnancy test in women of childbearing potential *Measurable disease *Tumor for which standard therapy, including approved anti-PD-1 or anti-PD-L1 therapy, when applicable, does not exist or is no longer effective.	Andrew Chon; andrew.chon@ucsf.edu ; Jeremy Burbanks-Ivey; Jeremy.Burbanks-Ivey@ucsf.edu; Julie McCluggage; Julie.McCluggage@ucsf.edu;
> Genitourinary > Prostate Cancer > Metastatic Castration Resistant (mCRPC) > Chemotherapy Naïve - AR Target Therapy Resistant						
12557	NCT01804465	Fong, Lawrence	A Randomized Phase 2 Trial of Immediate versus Delayed Anti-CTLA-4 Blockade Following Sipuleucel-T Treatment for Prostate Cancer Immunotherapy	Treatment	Age: 18+ * Metastatic prostate adenocarcinoma * Progressive disease after androgen deprivation	Lani Bradish; landi.bradish@ucsf.edu ;

UCSF Protocol No.	Clinicaltrials.gov Protocol No.	PI Name	Title	Protocol Type	Key Eligibility	Study Contact
> Genitourinary > Bladder Cancer > Metastatic > Prior Chemotherapy						
16709	NCT03007719	Fong, Lawrence	Functional Imaging of T-cell Activation with [18F]F-AraG in Bladder Cancer Patients Receiving Neoadjuvant or Standard of Care Atezolizumab	Diagnostic	*Age: 18+ *Histologically or cytologically documented bladder transitional cell carcinoma *Eligible for with plan to undergo neoadjuvant treatment with atezolizumab followed by surgery as part of companion study (NCT02451423), or planned to undergo treatment with atezolizumab per standard of care *Must have measurable disease by RECIST v1.1 regardless of disease stage (e.g. localized, locally advanced, or metastatic) *Archival tumor tissue from biopsy or Transurethral Resection of Bladder Tumor (TURBT) will be required for all patients. Archival tissue should be of good quality based on total and viable tumor contents. Fine-needle aspiration, brushing, and cytologic cell pellets are not acceptable.	Andrew Chon; andrew.chon@ucsf.edu; Julie McCluggage; Julie.McCluggage@ucsf.edu; Katrina Sadang; katrinagrace.sadang@ucsf.edu;
16707	NCT02812875	Daud, Adil	A Phase 1, Open-Label, Dose Escalation and Dose Expansion Trial Evaluating the Safety, Pharmacokinetics, Pharmacodynamics, and Clinical Effects of Orally Administered CA-170 in Patients with Advanced Tumors and Lymphomas	Treatment	Age:18+ *Life expectancy of at least 3 months *ECOG PS ≤ 1 *Acceptable bone marrow and organ function at screening *Ability to swallow and retain oral medications *Negative serum pregnancy test in women of childbearing potential *Measurable disease *Tumor for which standard therapy, including approved anti-PD-1 or anti-PD-L1 therapy, when applicable, does not exist or is no longer effective.	Andrew Chon; andrew.chon@ucsf.edu; Jeremy Burbanks-Ivey; Jeremy.Burbanks-Ivey@ucsf.edu; Julie McCluggage; Julie.McCluggage@ucsf.edu;

UCSF Protocol No.	Clinicaltrials.gov Protocol No.	PI Name	Title	Protocol Type	Key Eligibility	Study Contact
> Genitourinary > Bladder Cancer > Localized / Non-Muscle Invasive > Prior BCG						
16709	NCT03007719	Fong, Lawrence	Functional Imaging of T-cell Activation with [18F]F-AraG in Bladder Cancer Patients Receiving Neoadjuvant or Standard of Care Atezolizumab	Diagnostic	*Age: 18+ *Histologically or cytologically documented bladder transitional cell carcinoma *Eligible for with plan to undergo neoadjuvant treatment with atezolizumab followed by surgery as part of companion study (NCT02451423), or planned to undergo treatment with atezolizumab per standard of care *Must have measurable disease by RECIST v1.1 regardless of disease stage (e.g. localized, locally advanced, or metastatic) *Archival tumor tissue from biopsy or Transurethral Resection of Bladder Tumor (TURBT) will be required for all patients. Archival tissue should be of good quality based on total and viable tumor contents. Fine-needle aspiration, brushing, and cytologic cell pellets are not acceptable.	Andrew Chon; andrew.chon@ucsf.edu ; Julie McCluggage; Julie.McCluggage@ucsf.edu; Katrina Sadang; katrinagrace.sadang@ucsf.edu;

UCSF Protocol No.	Clinicaltrials.gov Protocol No.	PI Name	Title	Protocol Type	Key Eligibility	Study Contact
> Gynecological > Corpus/Endometrial > Stage III/IV						
GOG-0286B	NCT02065687	Chen, Lee-may	A Randomized Phase II/III Study of Pacitaxel/Carboplatin/Metformin (NSC#91485) Versus Paclitaxel/Carboplatin/Placebo as Initial Therapy for Measurable Stage III or IVA, Stage IVB, or Recurrent Endometrial Cancer	Treatment	Age: 18+ Patients must have measurable stage III, measurable stage IVA, stage IVB (with or without measurable disease) or recurrent (with or without measurable disease) endometrial carcinoma *Measurable disease as defined by Response Evaluation Criteria in Solid Tumors (RECIST 1.1) *Patients must NOT have received prior chemotherapy or targeted therapy, including chemotherapy used for radiation sensitization for treatment of endometrial carcinoma.	Kimberly Silverio; Kimberly.Silverio@ucsf.edu;
> Gynecological > Corpus/Endometrial > Recurrent						
GOG-0286B	NCT02065687	Chen, Lee-may	A Randomized Phase II/III Study of Pacitaxel/Carboplatin/Metformin (NSC#91485) Versus Paclitaxel/Carboplatin/Placebo as Initial Therapy for Measurable Stage III or IVA, Stage IVB, or Recurrent Endometrial Cancer	Treatment	Age: 18+ Patients must have measurable stage III, measurable stage IVA, stage IVB (with or without measurable disease) or recurrent (with or without measurable disease) endometrial carcinoma *Measurable disease as defined by Response Evaluation Criteria in Solid Tumors (RECIST 1.1) *Patients must NOT have received prior chemotherapy or targeted therapy, including chemotherapy used for radiation sensitization for treatment of endometrial carcinoma.	Kimberly Silverio; Kimberly.Silverio@ucsf.edu;

UCSF Protocol No.	Clinicaltrials.gov Protocol No.	PI Name	Title	Protocol Type	Key Eligibility	Study Contact
> Gynecological > Ovarian / Fallopian Tube / Primary Peritoneal > Progressive/Recurrent > Platinum Sensitive						
CTSU-NRG-GY004	NCT02446600	Ueda, Stefanie	A Phase III study comparing single-agent olaparib or the combination of cediranib and olaparib to standard platinum-based chemotherapy in women with recurrent platinum-sensitive ovarian, fallopian tube, or primary peritoneal cancer	Treatment	Age 18+ *Patients must have platinum-sensitive recurrent high-grade serous or high-grade endometrioid ovarian, primary peritoneal, or fallopian tube cancers; patients with clear cell, mixed epithelial, undifferentiated carcinoma, or transitional cell carcinoma histologies are also eligible, provided that the patient has a known deleterious germline BRCA1 or BRCA2 mutation identified through testing at a clinical laboratory. *Patients must have evaluable disease - defined as one of the following: Response Evaluation Criteria in Solid Tumors (RECIST) 1.1 measurable disease OR Evaluable disease (defined as solid and/or cystic abnormalities on radiographic imaging that do not meet RECIST 1.1 definitions for target lesions OR ascites and/or pleural effusion that has been pathologically demonstrated to be disease-related) AND cancer antigen 125 (CA125) that has doubled from the post-treatment nadir and is also greater than 2 times upper limit of normal (ULN) *Prior chemotherapy must have included a first-line platinum-based regimen with or without intravenous consolidation chemotherapy *Patients may not have had a prior anti-angiogenic agent in the recurrent setting; prior use of bevacizumab in the upfront or upfront maintenance setting is allowed *Patients may not have previously received a PARP inhibitor	Kimberly Silverio; Kimberly.Silverio@ucsf.edu;

UCSF Protocol No.	Clinicaltrials.gov Protocol No.	PI Name	Title	Protocol Type	Key Eligibility	Study Contact
15401	NCT02272790	Chen, Lee-may	A Multicentre Phase II Study of AZD1775 plus Chemotherapy in Patients with Platinum -Resistant Epithelial Ovarian, Fallopian Tube, or Primary Peritoneal Cancer	Treatment	Age 18+ *Histologic or cytologic diagnosis of epithelial ovarian, fallopian tube, or primary peritoneal cancer. *Progressed within 6 months of completing at least 4 cycles of a first-line platinum-containing regimen for Stage III/IV disease. Patients with refractory disease (progression during platinum-containing therapy) are ineligible. *No more than 2 prior treatment regimens for Stage III/IV disease, defined as investigational, chemotherapy, hormonal, biologic, or targeted therapy.	Kimberly Silverio; Kimberly.Silverio@ucsf.edu;

UCSF Protocol No.	Clinicaltrials.gov Protocol No.	PI Name	Title	Protocol Type	Key Eligibility	Study Contact
CTSU-NRG-GY005	NCT02502266	Chapman, Jocelyn	A Randomized Phase II/III Study of the Combination of Cediranib and Olaparib Compared to Cediranib or Olaparib Alone, or Standard of Care Chemotherapy in Women with Recurrent Platinum-Resistant or Refractory Ovarian, Fallopian Tube, or Primary Peritoneal Cancer (COCOS)	Treatment	Age 18+ *Patients must have histologically or cytologically confirmed ovarian cancer, peritoneal cancer or fallopian tube cancer and must have a histological diagnosis of either serous or endometrioid cancer; both endometrioid and serous histology should be high-grade for eligibility of non-mutation carriers; patients with clear cell, mixed epithelial, undifferentiated carcinoma, or transitional cell carcinoma histologies are also eligible, provided that the patient has a known deleterious germline BRCA1 or BRCA2 mutation identified through testing at a clinical laboratory. *Patients should have recurrent platinum-resistant or refractory disease. *Phase II study: measurable disease by RECIST 1.1 criteria; if archival tumor sample is not available tumor sample from fresh biopsy is acceptable. *No more than 3 prior treatment regimens (including primary therapy; no more than 1 prior non-platinum based therapy in the platinum-resistant/-refractory setting) *Patients may not have had a prior anti-angiogenic agent in the recurrent setting; prior use of bevacizumab in the upfront or upfront maintenance setting is allowed. *Patients may not have previously received a PARP-inhibitor.	Kimberly Silverio; Kimberly.Silverio@ucsf.edu;

UCSF Protocol No.	Clinicaltrials.gov Protocol No.	PI Name	Title	Protocol Type	Key Eligibility	Study Contact
> Gynecological > Ovarian / Fallopian Tube / Primary Peritoneal > First Line > Stage III						
GOG-3005	NCT02470585	Chen, Lee-may	A Phase 3 Placebo-Controlled Study of Carboplatin/Paclitaxel with or without Concurrent and Continuation Maintenance Veliparib (PARP inhibitor) in Subjects with Previously Untreated Stages III or IV High-Grade Serous Epithelial Ovarian, Fallopian Tube, or Primary Peritoneal Cancer	Treatment	Age 18+ *FIGO Stage III or IV epithelial ovarian, fallopian tube, or primary peritoneal carinoma with appropriate tissue for histologic evaluation *High-grade serous adenocarcinoma *No prior chemo for any abdominal or pelvic tumor *No radiotherapy to any portion of the abdominal cavity or pelvis *Willing to undergo gBRCA testing *Participants who undergo primary cytoreductive surgery must be entered between 1 and 12 weeks after surgery. Participants undergoing interval surgery must have a tumor sample confirming the histological diagnosis prior to enrollment.	Kimberly Silverio; Kimberly.Silverio@ucsf.edu;
> Gynecological > Ovarian / Fallopian Tube / Primary Peritoneal > First Line > Stage IV						
GOG-3005	NCT02470585	Chen, Lee-may	A Phase 3 Placebo-Controlled Study of Carboplatin/Paclitaxel with or without Concurrent and Continuation Maintenance Veliparib (PARP inhibitor) in Subjects with Previously Untreated Stages III or IV High-Grade Serous Epithelial Ovarian, Fallopian Tube, or Primary Peritoneal Cancer	Treatment	Age 18+ *FIGO Stage III or IV epithelial ovarian, fallopian tube, or primary peritoneal carinoma with appropriate tissue for histologic evaluation *High-grade serous adenocarcinoma *No prior chemo for any abdominal or pelvic tumor *No radiotherapy to any portion of the abdominal cavity or pelvis *Willing to undergo gBRCA testing *Participants who undergo primary cytoreductive surgery must be entered between 1 and 12 weeks after surgery. Participants undergoing interval surgery must have a tumor sample confirming the histological diagnosis prior to enrollment.	Kimberly Silverio; Kimberly.Silverio@ucsf.edu;

UCSF Protocol No.	Clinicaltrials.gov Protocol No.	PI Name	Title	Protocol Type	Key Eligibility	Study Contact
> Gynecological > Ovarian / Fallopian Tube / Primary Peritoneal > First Line > Maintenance						
GOG-3005	NCT02470585	Chen, Lee-may	A Phase 3 Placebo-Controlled Study of Carboplatin/Paclitaxel with or without Concurrent and Continuation Maintenance Veliparib (PARP inhibitor) in Subjects with Previously Untreated Stages III or IV High-Grade Serous Epithelial Ovarian, Fallopian Tube, or Primary Peritoneal Cancer	Treatment	Age 18+ *FIGO Stage III or IV epithelial ovarian, fallopian tube, or primary peritoneal carinoma with appropriate tissue for histologic evaluation *High-grade serous adenocarcinoma *No prior chemo for any abdominal or pelvic tumor *No radiotherapy to any portion of the abdominal cavity or pelvis *Willing to undergo gBRCA testing *Participants who undergo primary cytoreductive surgery must be entered between 1 and 12 weeks after surgery. Participants undergoing interval surgery must have a tumor sample confirming the histological diagnosis prior to enrollment.	Kimberly Silverio; Kimberly.Silverio@ucsf.edu;
> Head and Neck > Basal Cell Carcinoma > Locally Advanced						
122011	NCT01835626	Yom, Sue	A Phase II Study of Radiation Therapy and Vismodegib, for the Treatment of Locally Advanced Basal Cell Carcinoma of the Head and Neck	Treatment	Age: 18+ - Patients must have locally advanced Basal Cell Carcinoma of the Head and Neck - Patients with distant metstatic spread of BCC are not eligibile	Carter Hultman; carter.hultman@ucsf.edu;
> Head and Neck > Nasopharyngeal						
CTSU-NRG-HN001	NCT02135042	Yom, Sue	Randomized Phase II and Phase III Studies of Individualized Treatment for Nasopharyngeal Carcinoma Based on Biomarker Epstein Barr Virus (EBV) Deoxyribonucleic Acid (DNA)	Treatment	Age: 18+ Stage II-IVB disease with no evidence of distant metastasis,	Carter Hultman; carter.hultman@ucsf.edu; Romobia Hutchinson; Romobia.Hutchinson@ucsf.edu; 415-353-4294

UCSF Protocol No.	Clinicaltrials.gov Protocol No.	PI Name	Title	Protocol Type	Key Eligibility	Study Contact
> Head and Neck > Squamous Cell (Larynx, Hypopharynx, Oral Cavity, Oropharynx) > Nasopharyngeal Carcinoma (NPC)						
16203	NCT02611960	Algazi, Alain	A Two-Arm, Open-label, Randomized Phase II Study of Pembrolizumab (MK-3475) Monotherapy versus Standard Chemotherapy in Platinum Pre-treated, Recurrent or Metastatic Nasopharyngeal Cancer (NPC) (Keynote-122)	Treatment	Age: 18+ - Subject must have non-keratinizing differentiated Nasopharyngeal Carcinoma or undifferentiated Nasopharyngeal Carcinoma - Must have metastatic disease or incurable locally recurrent disease	Kyusun Cha; kyusun.cha@ucsf.edu;
CTSU-NRG-HN001	NCT02135042	Yom, Sue	Randomized Phase II and Phase III Studies of Individualized Treatment for Nasopharyngeal Carcinoma Based on Biomarker Epstein Barr Virus (EBV) Deoxyribonucleic Acid (DNA)	Treatment	Age: 18+ Stage II-IVB disease with no evidence of distant metastasis,	Carter Hultman; carter.hultman@ucsf.edu; Romobia Hutchinson; Romobia.Hutchinson@ucsf.edu; 415-353-4294
> Head and Neck > Squamous Cell (Larynx, Hypopharynx, Oral Cavity, Oropharynx) > Metastatic > All others						
16205	NCT02499328	Algazi, Alain	A Phase 1b/2, Open-Label, Multicentre Study Assessing the Safety, Tolerability, Pharmacokinetics, and Preliminary Anti-tumor Activity of MEDI4736 in Combination With AZD9150 or AZD5069 in Patients With Advanced Solid Malignancies and Subsequently Comparing AZD9150 and AZD5069 Both as Monotherapy and in Combination With MEDI4736 as Second Line Treatment in Patients With Recurrent and/or Metastatic Squamous Cell Carcinoma of the Head and Neck	Treatment	Age: 18+ - Subject must have recurrent or metastatic SCCHN; no more than 3 previous regimens of cytoreductive chemo-therapies	Carter Hultman; carter.hultman@ucsf.edu;

UCSF Protocol No.	Clinicaltrials.gov Protocol No.	PI Name	Title	Protocol Type	Key Eligibility	Study Contact
16707	NCT02812875	Daud, Adil	A Phase 1, Open-Label, Dose Escalation and Dose Expansion Trial Evaluating the Safety, Pharmacokinetics, Pharmacodynamics, and Clinical Effects of Orally Administered CA-170 in Patients with Advanced Tumors and Lymphomas	Treatment	Age:18+ *Life expectancy of at least 3 months *ECOG PS ≤ 1 *Acceptable bone marrow and organ function at screening *Ability to swallow and retain oral medications *Negative serum pregnancy test in women of childbearing potential *Measurable disease *Tumor for which standard therapy, including approved anti-PD-1 or anti-PD-L1 therapy, when applicable, does not exist or is no longer effective.	Andrew Chon; andrew.chon@ucsf.edu ; Jeremy Burbanks-Ivey; Jeremy.Burbanks-Ivey@ucsf.edu; Julie McCluggage; Julie.McCluggage@ucsf.edu;
> Malignant Hematology > Hodgkin Disease > Relapsed / Refractory						
16707	NCT02812875	Daud, Adil	A Phase 1, Open-Label, Dose Escalation and Dose Expansion Trial Evaluating the Safety, Pharmacokinetics, Pharmacodynamics, and Clinical Effects of Orally Administered CA-170 in Patients with Advanced Tumors and Lymphomas	Treatment	Age:18+ *Life expectancy of at least 3 months *ECOG PS ≤ 1 *Acceptable bone marrow and organ function at screening *Ability to swallow and retain oral medications *Negative serum pregnancy test in women of childbearing potential *Measurable disease *Tumor for which standard therapy, including approved anti-PD-1 or anti-PD-L1 therapy, when applicable, does not exist or is no longer effective.	Andrew Chon; andrew.chon@ucsf.edu ; Jeremy Burbanks-Ivey; Jeremy.Burbanks-Ivey@ucsf.edu; Julie McCluggage; Julie.McCluggage@ucsf.edu;

UCSF Protocol No.	Clinicaltrials.gov Protocol No.	PI Name	Title	Protocol Type	Key Eligibility	Study Contact
15254	NCT02431208	Martin, Tom	A PHASE Ib STUDY OF THE SAFETY AND PHARMACOKINETICS OF ATEZOLIZUMAB (ANTI−PD-L1 ANTIBODY) ALONE OR IN COMBINATION WITH AN IMMUNOMODULATORY DRUG AND/OR DARATUMUMAB IN PATIENTS WITH MULTIPLE MYELOMA (RELAPSED/REFRACTORY AND POST-AUTOLOGOUS STEM CELL TRANSPLANTATION)	Treatment	Age: 18+ *Previously diagnosed with MM based on standard criteria *Measurable disease defined as at least one of the following: - Serum M protein ≥ 0.5 g/dL (≥ 5 g/L) - Urine M protein ≥ 200 mg/24 hr - Serum free light chains (SFLC) assay: Involved *Relapse/refractory disease *Receipt of no more than three prior chemotherapy regimens *Willing and able to undergo BM aspiration and biopsy tissue sample collection during screening and while in the study. Pre-treatment−evaluable tissue is required for study entry *No prior therapy with atezolizumab or other immunotherapeutics, including: CD137 agonists, anti−PD-1, anti−CTLA-4, and anti−PD-L1 therapeutic antibodies	Jenai Wilmoth; Jenai.Wilmoth@ucsf.edu;
> Malignant Hematology > Multiple Myeloma (MM) > Relapsed / Refractory > 1-3 Prior Lines of Therapy						
14954	NCT02223598	Wolf, Jeffrey	A Phase 1, Dose Escalation/ Dose Expansion Study Evaluating the Safety, Pharmacokinetics, and Pharmacodynamic Effects of Orally Administered CB-5083 in Patients with Relapsed/Refractory Multiple Myeloma	Treatment	Age: 18+ documented diagnosis of MM according to International Myeloma Foundation (IMF) 2003 Criteria.	Contact: 877-827-3222 or cancertrials@ucsf.edu

UCSF Protocol No.	Clinicaltrials.gov Protocol No.	PI Name	Title	Protocol Type	Key Eligibility	Study Contact
> Malignant Hematology > Non-Hodgkin Lymphoma (NHL) > HIV Negative > Blood and Marrow Transplant (BMT)						
112525	NCT01555541	Andreadis, Charalambos	A Phase II Study of Intensive Consolidation and Stem Cell Mobilization Therapy with Ofatumumab, Etoposide, and High-Dose Ara-C (OVA), followed by Autologous Stem Cell Transplantation in High-Risk Patients with Relapsed/Refractory Diffuse Large B-Cell Lymphoma	Treatment	* Diagnosis of refractory or relapsed biopsy-proven CD20+ diffuse large B-cell lymphoma or primary mediastinal B-cell lymphoma. * Age 18 years or older * Refractory to or relapse following a rituximab/anthracycline first-line regimen * High-risk disease * Receipt of no more than three prior chemotherapy regimens.	Geraldine Pelle-Day; Geraldine.pelle-day@ucsf.edu; 415-476-4765 Jenai Wilmoth; Jenai.Wilmoth@ucsf.edu;
> Malignant Hematology > Non-Hodgkin Lymphoma (NHL) > HIV Negative > Untreated > Indolent						
112516	NCT01902225	Ai, Weiyun	A Multicenter Phase I Dose-Finding and Preliminary Efficacy Study of the Histone Deacetylase Inhibitor Romidepsin (Istodax®) in Combination with Doxorubicin HCl Liposomal (Doxil®) for the Treatment of Adults with Relapsed or Refractory T-cell Lymphoma	Treatment	Age: 18+ * Biopsy-proven, measurable, Stage IB-IVB relapsed or refractory cutaneous T-cell lymphoma after 2 lines of skin-directed therapy or one prior line of systemic therapy * Disease free of prior malignancies for ≥ 5 years with exception of currently treated basal cell, squamous cell carcinoma of the skin, or carcinoma in situ of the cervix or breast. Patients with early stage of prostate cancer under clinical surveillance without therapy are eligible *Patients with systemic T cell lymphoma of any stage and any subtypes. Patient must have had at least one standard chemotherapy and measurable disease at the time of enrollment *Patients with systemic T cell lymphomas who relapsed after autologous transplant are eligible *Patients with large cell transformation of cutaneous T cell lymphoma are eligible	Alyson Cockerill; Alyson.Cockerill@ucsf.edu; 415-353-4091 Jenai Wilmoth; Jenai.Wilmoth@ucsf.edu;

UCSF Protocol No.	Clinicaltrials.gov Protocol No.	PI Name	Title	Protocol Type	Key Eligibility	Study Contact
> Multiple / Ill-Defined Disease Sites > Solid Tumors						
14951	NCT02071862	Munster, Pamela	A Phase 1 Study of the Safety, Pharmacokinetics, and Pharmacodynamics of Escalating Oral Doses of the Glutaminase Inhibitor CB-839 in Patients with Advanced and/or Treatment-Refractory Solid Tumors	Treatment	18+ 1. Ability to provide written informed consent in accordance with federal, local, and institutional guidelines 2. Age ≥ 18 years 3. Eastern Cooperative Oncology Group (ECOG) Performance Status of 0-1 4. Life Expectancy of at least 3 months 5. Adequate hepatic function with total bilirubin and ALT less than 1.5x the upper limit of normal (ULN). 6. Adequate renal function with an estimated or calculated creatinine clearance of > 50 mL/min (calculated using the formula of Cockcroft and Gault) or serum creatinine ≤ 2.0 mg/dL 7. Adequate hematological function, defined as ANC ≥ 1,500/mm3, Hb ≥ 9.0 g/dL*, and platelet count ≥ 100,000/mm3. Transfusions and growth factors must not be used to meet these requirements. *RCC patients with Hb ≥ 8.0 g/dL may have transfusions to achieve this target 8. Measurable Disease o At least one tumor lesion/lymph node that meets the RECIST v1.1 criteria for being ?measurable?. The lesion site must be measured accurately in at least one dimension (longest diameter in the plane of measurement to be recorded) with a minimum size of ➢ 10 mm by CT scan ➢ 10 mm by caliper measurement ➢ 20 mm by chest X-ray ➢ Malignant lymph nodes must be ≥ 15 mm in short axis when assessed by CT scan	Contact: 877-827-3222 or cancertrials@ucsf.edu

UCSF Protocol No.	Clinicaltrials.gov Protocol No.	PI Name	Title	Protocol Type	Key Eligibility	Study Contact
> Neurologic Oncology > Adult Glioma (Age >= 18) > Grade 2 (Low Grade)						
131012	NCT02023905	Clarke, Jennifer	PI3K/mTOR Pathway Activation-Stratified Phase II Study of RAD001 (Everolimus) with and without Temozolomide in the Treatment of Adult Patients with Supratentorial Low-Grade Glioma	Treatment	Age: 18+ * Histologically proven supratentorial low-grade glioma * No prior tumor treatment except for surgery at diagnosis	Contact: 877-827-3222 or cancertrials@ucsf.edu
> Neurologic Oncology > Adult Glioma (Age >= 18) > Grade 3 (Anaplastic)						
161011	NCT02796261	Butowski, Nicholas	A Phase 3, Randomized, Open-Label Study to Evaluate the Efficacy and Safety of Eflornithine with Lomustine Compared to Lomustine Alone in Patients with Anaplastic Astrocytoma that Progress/Recur after Irradiation and Adjuvant Temozolomide Chemotherapy	Treatment		Contact: 877-827-3222 or cancertrials@ucsf.edu
> Neurologic Oncology > Adult Glioma (Age >= 18) > Grade 4 (Glioblastoma or Gliosarcoma)						
141011	NCT02209376	Chang, Susan	Pilot Study of Autologous T-cells Redirected to EGFRvIII with a Chimeric Antigen Receptor in Patients with EGFRvIII+ Glioblastoma	Treatment	Age: 18+ Glioblastoma (GBM)	Contact: 877-827-3222 or cancertrials@ucsf.edu
ALLIANCE-A071102	NCT02152982	Butowski, Nicholas	A Phase II/III Randomized Trial of Veliparib or Placebo in Combination with Adjuvant Temozolomide in Newly Diagnosed Glioblastoma with MGMT Promoter Hypermethylation	Treatment		Thelma Munoz; Thelma.Munoz@ucsf.edu; 415-353-2523

UCSF Protocol No.	Clinicaltrials.gov Protocol No.	PI Name	Title	Protocol Type	Key Eligibility	Study Contact
> Neurologic Oncology > Adult Glioma (Age >= 18) > Grade 3 (Anaplastic) > Newly diagnosed > Surgical						
10101	NCT01116661	Berger, Mitchel	A Phase 2 Study of Aminolevulinic Acid (ALA) to Enhance Visualization and Resection of Tumors of the Brain	Diagnostic	Presumptive diagnosis of high grade glioma based on imaging studies, or will have recurrent high-grade gliomas that have previously undergone diagnosis (astrocytoma, oligodendroglioma, mixed oligo-astrocytoma, anaplastic astrocytoma, and glioblastoma multiforme). Both of these groups will be undergoing craniotomy for tumor resection.	Ashley Desilva; Ashley.DeSilva@ucsf.edu; 415-353-2653
ALLIANCE-A071101	NCT01814813	Clarke, Jennifer	A Phase II Randomized Trial Comparing the Efficacy of Heat Shock Protein-Peptide Complex-96 (HSPPC-96)(NSC #725085, Alliance BB IND# Pending) Vaccine given with Bevacizumab vs. Bevacizumab alone in the Treatment of Surgically Resectable Recurrent Glioblastoma Multiforme (GBM)	Treatment	Age: 18+ * Recurrent Glioblastoma Multiforme That Can Be Removed by Surgery	Yelena Fuks; Yelena.Fuks@ucsf.edu;
> Neurologic Oncology > Adult Glioma (Age >= 18) > Grade 4 (Glioblastoma or Gliosarcoma) > Newly diagnosed > Nonsurgical						
151012	NCT02573324	Butowski, Nicholas	A Randomized, Placebo Controlled Phase 2b/3 Study of ABT 414 with Concurrent Chemoradiation and Adjuvant Temozolomide in Subjects with Newly Diagnosed Glioblastoma (GBM) with Epidermal Growth Factor Receptor (EGFR) Amplification (Intellance 1)	Treatment		Contact: 877-827-3222 or cancertrials@ucsf.edu

UCSF Protocol No.	Clinicaltrials.gov Protocol No.	PI Name	Title	Protocol Type	Key Eligibility	Study Contact
> Thoracic > Mesothelioma						
13656	NCT01907100	Jahan, Thierry	LUME-Meso: Double blind, randomised, multicentre, phase II/III study of nintedanib in combination with pemetrexed / cisplatin followed by continuing nintedanib monotherapy versus placebo in combination with pemetrexed / cisplatin followed by continuing placebo monotherapy for the treatment of patients with unresectable malignant pleural mesothelioma	Treatment	Age: 18+ *Unresectable Malignant Pleural Mesothelioma *No prior therapies with chemotherapy, nintedanib, radiotherapy, or any other prior line	Contact: 877-827-3222 or cancertrials@ucsf.edu
> Thoracic > Non-small cell Lung Cancer						
16702	NCT02655822	Fong, Lawrence	A Phase 1/1b, Open-Label, Multicenter, Repeat-Dose, Dose-Selection Study of CPI-444 as Single Agent and in Combination with Atezolizumab in Patients with Selected Incurable Cancers	Treatment	Age: 18+ *Documented incurable cancer with one of the following histologies: non-small cell lung cancer, malignant melanoma, renal cell cancer, triple negative breast cancer, colorectal cancer with microsatellite instability (MSI), and bladder cancer. *Eastern Cooperative Oncology Group (ECOG) Performance Status 0-1. *At least 1 measurable lesion per Response Evaluation Criteria in Solid Tumors (RECIST 1.1). *At least 1 but not more than 5 prior systemic therapies for advanced/recurrent or progressing disease. *Additional Tumor Specific inclusion criteria must be met.	Andrew Chon; andrew.chon@ucsf.edu ; Julie McCluggage; Julie.McCluggage@ucsf.edu; Katrina Sadang; katrinagrace.sadang@ucsf.edu;

UCSF Protocol No.	Clinicaltrials.gov Protocol No.	PI Name	Title	Protocol Type	Key Eligibility	Study Contact
> Thoracic > Non-small cell Lung Cancer > By Mutation or Histology						
15654	NCT02544633	Blakely, Collin	Phase 2, Parallel-Arm Study of MGCD265 in Patients with Locally Advanced or Metastatic Non-Small Cell Lung Cancer with Activating Genetic Alterations in Mesenchymal-Epithelial Transition Factor	Treatment	Age: 18 *Metastatic or unresctable, locally advanced NSCLC *Genetic alteration activating MET in tumor tissue *Progressive disease after at least one prior platinum-containing chemotherapy	Contact: 877-827-3222 or cancertrials@ucsf.edu
> Thoracic > Non-small cell Lung Cancer > By Stage > Metastatic, stage IV, or inoperable						
15658	NCT02568267	Blakely, Collin	An Open-Label, Multicenter, Global Phase 2 Basket Study of Entrectinib for the Treatment of Patients with Locally Advanced or Metastatic Solid Tumors that Harbor NTRK1/2/3, ROS1, or ALK Gene Rearrangements	Treatment	Age: 18 *Locally advanced or metastatic solid tumor that harbors an NTRK1/2/3, or ROS1 *Progressed on chemotherapy, small molecule targeted therapy, antibody-directed therapy or radiotherapy *No prior treatments with approved or investigational Trk, ROS1 or ALK inhibitors	Contact: 877-827-3222 or cancertrials@ucsf.edu
> Thoracic > Non-small cell Lung Cancer > By Mutation or Histology > EGFR (epidermal growth factor receptor) Mutation > 2nd Line and Above						
16656	NCT02616393	Jahan, Thierry	A Phase 2, Multicenter Study of Tesevatinib in Subjects with Non-Small Cell Lung Cancer, EGFR Activating Mutation, Prior Treatment with a Tyrosine Kinase Inhibitor, and Brain Metastases or Leptomeningeal Metastases	Treatment	Age 18 and NSCLC for all three cohorts *Cohort A: activating EGFR mutations with BM at progression, 14 days of treatment with erlotinib, afatinib, or gefitinib and have CNS but not peripheral progression *Cohort B: LM at initial presentation or progression, 14 days of treatment with erlotinib, afatinib, or gefitinib and have CNS but not peripheral progression *Cohort C: BM at initial presentation, no prior systemic treatment	Matthew Shong; Matthew.shong@ucsf.edu;

UCSF Protocol No.	Clinicaltrials.gov Protocol No.	PI Name	Title	Protocol Type	Key Eligibility	Study Contact
16707	NCT02812875	Daud, Adil	A Phase 1, Open-Label, Dose Escalation and Dose Expansion Trial Evaluating the Safety, Pharmacokinetics, Pharmacodynamics, and Clinical Effects of Orally Administered CA-170 in Patients with Advanced Tumors and Lymphomas	Treatment	Age:18+ *Life expectancy of at least 3 months *ECOG PS ≤ 1 *Acceptable bone marrow and organ function at screening *Ability to swallow and retain oral medications *Negative serum pregnancy test in women of childbearing potential *Measurable disease *Tumor for which standard therapy, including approved anti-PD-1 or anti-PD-L1 therapy, when applicable, does not exist or is no longer effective.	Andrew Chon; andrew.chon@ucsf.edu ; Jeremy Burbanks-Ivey; Jeremy.Burbanks-Ivey@ucsf.edu; Julie McCluggage; Julie.McCluggage@ucsf.edu;
13656	NCT01907100	Jahan, Thierry	LUME-Meso: Double blind, randomised, multicentre, phase II/III study of nintedanib in combination with pemetrexed / cisplatin followed by continuing nintedanib monotherapy versus placebo in combination with pemetrexed / cisplatin followed by continuing placebo monotherapy for the treatment of patients with unresectable malignant pleural mesothelioma	Treatment	Age: 18+ * Histologically confirmed malignant pleural mesothelioma (MPM) (subtype: epithelioid or biphasic)	Contact: 877-827-3222 or cancertrials@ucsf.edu
> Thoracic > Sarcoma						
156511	NCT02601950	Jahan, Thierry	A Phase II, Multicenter Study of the EZH2 Inhibitor Tazemetostat in Adult Subjects with INI1-Negative Tumors or Relapsed/Refractory Synovial Sarcoma	Treatment	Age: 16+ *Metastatic or non-resectable INI1-negative tumor or any solid tumor with EZH2 GOF mutation *Progressed on one of the following chemotherapy, monoclonal antibodies, immunotherapy, radiotherapy, high dose therapy with autologous or allogeneic hematopoietic cell infusion, or hematopoietic growth factor	Contact: 877-827-3222 or cancertrials@ucsf.edu

UCSF Protocol No.	Clinicaltrials.gov Protocol No.	PI Name	Title	Protocol Type	Key Eligibility	Study Contact
> Other Trials						
07087	NCT00000000	Goldsby, Robert	A Study to Determine if a Credit Card Sized Data Summary (a Passport) Improves a Childhood Cancer Survivor's Knowledge of Diagnosis, Treatment, Risks and Recommended Follow-Up	Supportive Care		Contact: 877-827-3222 or cancertrials@ucsf.edu
10082	NCT01200017	Cowan, Morton	An Expanded Access Study of the Feasibility of Using the CliniMACS® Device for CD34+ Cell Selection and T Cell Depletion for Graft-versus-Host Disease Prophylaxis in Alternative Donor Stem Cell Transplant Recipients	Treatment	* Age 0 (newborn) - 21 years * Patient must have a malignant or non-malignant disease that can benefit from alternative stem cell transplantation according to standard practice guidelines. * Patients with lymphoma or acute leukemia (except acute myeloid leukemia, AML) must be in remission at the time of transplant. * Patients must lack a healthy human leukocyte antigen (HLA)-identical related donor. * Patient must have a healthy, willing mismatched related or an unrelated donor who meets certain criteria (See attachment for details).	Contact: 877-827-3222 or cancertrials@ucsf.edu
12088	NCT01583842	Matthay, Katherine	124I-Metaiodobenzylguanidine (MIBG) PET/CT Diagnostic Imaging and Dosimetry for Patients with Neuroblastoma: A Pilot Study	Diagnostic	* Age: Patients must be >/= 3 years of age and able to cooperate for the PET CT scan when registered on study. * Diagnosis: Patients must have a diagnosis of neuroblastoma either by histologic verification of neuroblastoma and/or demonstration of tumor cells in the bone marrow with increased urinary catecholamine metabolites.	Pediatric Oncology; cancerclinicaltrials@peds.ucsf.edu; 415-476-3831

UCSF Protocol No.	Clinicaltrials.gov Protocol No.	PI Name	Title	Protocol Type	Key Eligibility	Study Contact
124517	NCT01421524	Munster, Pamela	A Phase 1A/1B, Multi-Center, Open-Label, Dose Finding Study to Assess the Safety, Tolerability, Pharmacokinetics and Preliminary Efficacy of the Pleiotropic Pathway Modifier CC-122 Administered Orally to Subjects with Advanced Solid Tumors, Non-Hodgkin's Lymphoma or Multiple Myeloma (Part B HCC cohort)	Treatment	Age: 18+ * Histologically or cytologically-confirmed, advanced Non-Hodgkin's Lymphoma Multiple Myeloma, or advanced unresectable solid tumors	Contact: 877-827-3222 or cancertrials@ucsf.edu
125518	NCT02450201	Aggarwal, Rahul	A Pilot Study to Evaluate the Reproducibility of Magnetic Resonance (MR) Imaging with Hyperpolarized Pyruvate (13C) and its Ability to Reflect Treatment Effects in Patients with Prostate Cancer	Diagnostic	Age: 18+ * Biopsy proven adenocarcinoma of prostate with intermediate to high risk by CAPRA Scoring; Gleason 4 tumor component * Pre-Radical prostatectomy or pre-ADT followed by definitive radiation therapy * No current or previous ADT / use of 5-alpha reductase inhibitor * No prostate biopsy within four weeks prior to study entry * No MRI contraindications	Christopher Sotto; Christopher.sotto@mrsc.ucsf.edu ;

UCSF Protocol No.	Clinicaltrials.gov Protocol No.	PI Name	Title	Protocol Type	Key Eligibility	Study Contact
13088	NCT01523977	Loh, Mignon	A Feasibility Trial of Everolimus (RAD001), an mTOR Inhibitor, Given in Combination with Multiagent Re-induction Chemotherapy in Pediatric Patients with Relapsed Acute Lymphoblastic Leukemia (ALL)	Treatment	Age: 18 months - 21 years *ALL in first bone marrow relapse occuring > 18 months from initial diagnosis *no prior therapy for recurrent ALL, with the exception of IT cytarabine *Lansky of greater than or equal to 50 or Karnofsky of greater than or equal to 50% *Stem cell transplant (SCT): Patients who underwent SCT in first complete remission are eligible, as long as all of the following criteria are met: ? at least 100 days have elapsed since stem cell infusion ? at least 14 days off of all medications for graft-versus-host-disease (GVHD) prophylaxis or treatment ? no evidence of acute GVHD	Contact: 877-827-3222 or cancertrials@ucsf.edu
13106		Chang, Susan	Pilot Study of Safety and Feasibility of Acquiring Hyperpolarized Imaging in Newly Diagnosed Patients with Glioblastoma	Diagnostic		Contact: 877-827-3222 or cancertrials@ucsf.edu
13108	NCT02022644	Butowski, Nicholas	A Phase I Study of Convection-Enhanced Delivery of Liposomal-Irinotecan Using Real-Time Imaging with Gadolinium In Patients with Recurrent High Grade Glioma	Treatment		Contact: 877-827-3222 or cancertrials@ucsf.edu
135512	NCT02435472	Chan, June	A Randomized Clinical Trial of Supervised Exercise versus Usual Care Among Men Opting for Active Surveillance for Prostate Cancer (AS Exercise RCT)	Treatment	The study population will be men with low risk prostate cancer managed at the UCSF or the Memorial Sloan Kettering Cancer Center	Sarah Joost; Sarah.Joost@ucsf.edu; 415-353-7349
13802	NCT01833806	Link, Thomas	A Phase IV Post Approval Clinical Study of ExAblate Treatment of Metastatic Bone Tumors for the Palliation of Pain	Supportive Care	Age: 18+ ? Patients who are suffering from symptoms of bone metastases or multiple myeloma bone lesions	Contact: 877-827-3222 or cancertrials@ucsf.edu

UCSF Protocol No.	Clinicaltrials.gov Protocol No.	PI Name	Title	Protocol Type	Key Eligibility	Study Contact
139510	NCT02109627	Andreadis, Charalambos	Phase Ib Study of Ficlatuzumab with High Dose Cytarabine in Relapsed and Refractory AML	Treatment	Age 18+ - Relapsed/Refractory AML (within 12 mo of 1st CR/ CRi, Persistent AML by BMBx 28 days after 1st induction day 1 cytotoxic therapy, or hypercellular bone marrow >20% cellularity & 10% blasts at 1st induction day 14) -No more than 2 cycles cytotoxic therapy, at least 1 being anthracycline/ anthracenedione & cytarabine combo) -LVEF >/= 40% by TTE -No cytarabine regiment in excess of 2g/m2 within 6 mo	Contact: 877-827-3222 or cancertrials@ucsf.edu
139511	NCT02332850	Martin, Tom	A Phase Ib Study of SAR650984 (Anti-CD38 mAb) in Combination with Carfilzomib for the Treatment of Relapsed or Refractory Multiple Myeloma	Treatment	Age 18+ -Relapse disease progression/ refractory from immediately prior MM therapy -Measurable disease of one of the following: M prot >/= 0.5 g/dl, Urine M proto >/= 200 mg/24h, Serum FLC >/= 10mg/dl, Immunoglobumin >500 mg/dL, biopsy proven plasmacytoma) -Washout with other investigational agent is 21 days (or 4 half lives), no prior anti-CD38 antibody allowed -Diagnosed/ treated for another malignancy within 3 years of enrollment	Contact: 877-827-3222 or cancertrials@ucsf.edu
13956	NCT01457118	Munster, Pamela	An Open-Label, Multicenter, Extension Study of NKTR-102 in Subjects Previously Enrolled in NKTR-102 Studies	Treatment	Age: 18+ Previous treatment withNKTR-102 w/demonstrated clinical benefit	Kamran Abri Lavasani; Kamran.AbriLavasani@ucsf.edu; 415-353-8337
140813	NCT02458235	Wahlstrom, Justin	A phase II study of risk-adapted donor lymphocyte infusion and azacitidine for the prevention of hematologic malignancy relapse following allogeneic stem cell transplantation	Treatment		Contact: 877-827-3222 or cancertrials@ucsf.edu

UCSF Protocol No.	Clinicaltrials.gov Protocol No.	PI Name	Title	Protocol Type	Key Eligibility	Study Contact
14083	NCT02124772	Mueller, Sabine	An Open-Label, Dose-Escalation, Phase I/II Study to Investigate the Safety, Pharmacokinetics, Pharmacodynamics and Clinical Activity of the MEK Inhibitor Trametinib in Children and Adolescent Subjects with Cancer or Plexiform Neurofibromas and Trametinib in Combination with Dabrafenib in Children and Adolescents with Cancers Harboring V600 Mutations	Treatment	Age: 12 months through 18 years old *disease relapsed/refractory to all potentially curative standard treatment regimens or must have a current disease for which there is no known curative therapy, or therapy proven to prolong survival with an acceptable quality of life *Able to swallow and retain enterally (PO or nasogastric or gastric tube) administered medication *Part A: Histologically confirmed solid tumors; Measurable or evaluable tumors. Subjects with neuroblastoma that is only detectable by MIBG scan are eligible; *Part B,1-4: Tumor tissue (archived or fresh) is required and must be available to be shipped to Novartis or site specific laboratory; *Part B1: Histologically confirmed neuroblastoma which have been associated with MAPK/RAS/MEK activation; *Part B2: Relapsed or refractory gliomas or other primary brain tumors with BRAF fusion/duplication (documented in Clinical Laboratory Improvement Amendments (CLIA) certified laboratory) or NF1 subjects with gliomas who are not suitable for the NF1 with PN cohort. *Part B3: Subjects with NF-1 must have a Plexiform Neurofibroma(s) that are progressive OR are cause of significant morbidity *Part B4: BRAF V600 mutation-positive solid tumor as confirmed in a CLIA-approved laboratory or equivalent *Part C: Tumors that have been documented by CLIA certified laboratory test to harbor BRAF V600 mutation at diagnosis or relapse; all subjects must	Contact: 877-827-3222 or cancertrials@ucsf.edu
141012	NCT01693562	Clarke, Jennifer	Phase 2 Study to Evaluate the Clinical Efficacy and Safety of MEDI4736 in Patients with Glioblastoma (GBM)	Treatment		Contact: 877-827-3222 or cancertrials@ucsf.edu

UCSF Protocol No.	Clinicaltrials.gov Protocol No.	PI Name	Title	Protocol Type	Key Eligibility	Study Contact
14102	NCT02017717	Butowski, Nicholas	A Randomized Phase 3 Open Label Study of Nivolumab versus Bevacizumab and Multiple Phase I Safety Cohorts of Nivolumab or Nivolumab in Combination with Ipilimumab Across Different Lines of Glioblastoma (GBM)	Treatment	Age: 18+ * Subjects with histologically confirmed Grade IV malignant glioma * Previous treatment with radiotherapy and temozolomide * Documented first recurrence of GBM * At least one measurable lesion	Contact: 877-827-3222 or cancertrials@ucsf.edu
14103		Cha, Soonmee	Feasibility of Fluoromisonidazole Hypoxia Imaging in Recurrent Glioma Prior to Angiogenesis Inhibitor Therapy Using Novel Single Modality PET/MRI Platform	Diagnostic		Contact: 877-827-3222 or cancertrials@ucsf.edu
14251	NCT02187133	Andreadis, Charalambos	A Phase Ib Dose Escalation Trial of Carfilzomib in Combination with Bendamustine and Rituximab in Patients with Relapsed or Refractory non-Hodgkin Lymphoma	Treatment	Age: 18+ * Histologically-confirmed B-cell non-Hodgkin's lymphoma (Mantle Cell Lymphoma, Follicular Lymphoma, Small Lymphocytic Lymphoma/Chronic Lymphocytic Leukemia, Marginal Zone Lymphoma, Diffuse Large B-cell Lymphoma, and Lymphoplasmacytic Lymphoma) * Must have relapsed or refractory disease after 2 but not more than 4 prior lines of therapy; 1 line of therapy is allowed, if it included an autologous stem cell transplant and at least 12 weeks have elapsed from Day 0. A line of therapy is defined as a course of therapy that is not interrupted by progressive disease. *Subjects must have measurable disease of at least 1.5cm in diameter by PET/CT *No prior treatment with carfilzomib for lymphoma	Contact: 877-827-3222 or cancertrials@ucsf.edu

UCSF Protocol No.	Clinicaltrials.gov Protocol No.	PI Name	Title	Protocol Type	Key Eligibility	Study Contact
144524	NCT02081755	Hirose, Ryutaro	A 36 month multi-center, open label, randomized, comparator study to evaluate the efficacy and safety of everolimus immunosuppression treatment in liver transplantation for hepatocellular carcinoma exceeding Milan criteria	Treatment		Contact: 877-827-3222 or cancertrials@ucsf.edu
144525	NCT02562898	Tempero, Margaret	A Study of the Safety, Immunopharmacodynamics and Anti-Tumor Activity of Ibrutinib Combined with Gemcitabine and Nab-Paclitaxel in Patients with Metastatic Pancreatic Adenocarcinoma	Treatment		Contact: 877-827-3222 or cancertrials@ucsf.edu
14551	NCT02470936	Kenfield, Stacey	A Randomized Clinical Trial of Web-based Lifestyle Tools and Resource versus Usual Care Among Men with Prostate Cancer (Web-Based RCT)	Treatment		Paula Dutton; Paula.Dutton@ucsf.edu ; 415-885-7871
145513	NCT01751438	Cooperberg, Matthew	A Prospective, Multi-institutional, Randomized, Phase II Trial of Best Systemic Therapy (BST) or Best Systemic Therapy Plus Definitive Treatment (radiation or surgery) of the Primary Tumor in Metastatic (M1) Prostate Cancer	Treatment		Contact: 877-827-3222 or cancertrials@ucsf.edu
147522	NCT02384239	Rugo, Hope	Palbociclib in Combination with Fulvestrant or Tamoxifen as Treatment for Hormone Receptor Positive Metastatic Breast Cancer with Prior Chemotherapy for Advanced Disease: A Phase II study with Pharmacodynamics Markers (TBCRC035)	Treatment		Amy Deluca; Amy.Deluca@ucsf.edu; 415-353-7288

UCSF Protocol No.	Clinicaltrials.gov Protocol No.	PI Name	Title	Protocol Type	Key Eligibility	Study Contact
147523	NCT02395627	Munster, Pamela	Reversing Therapy Resistance with Epigenetic-Immune Modification (Pembrolizumab, Vorinostat, Tamoxifen)	Treatment		Amy Deluca; Amy.Deluca@ucsf.edu; 415-353-7288
149510	NCT02262910	Fong, Lawrence	A Phase 1 Study of ES414 in Patients with Metastatic Castration-Resistant Prostate Cancer	Treatment	Age: 18+ * Histologically or cytologically confirmed adenocarcinoma of the prostate. No evidence of neuroendocrine differentiation or small cell features. *Surgically or medically castrated, with testosterone ≤ 50 ng/dL (≤ 1.7 nmol/L). *Progressive prostate cancer by either serum PSA levels, soft tissue or bone disease as defined by the PCWG2 criteria. *In Stage 1, patients may or may not have received prior chemotherapy for mCRPC. In Stage 2, patients will be enrolled into two cohorts based on whether or not they have received prior chemotherapy for mCRPC. Any prior chemotherapy must have been completed ≥ 4 weeks prior to administration of ES414. Additionally, in countries where abiraterone or enzalutamide are commercially available, patients in Stage 1 and 2 must have progressed on abiraterone and/or enzalutamide prior to study entry. *ECOG ≤ 1 *Life expectancy > 6 months per investigator *Adequate hematologic, renal, and hepatic parameters	Andrew Chon; andrew.chon@ucsf.edu; Emily Chang; Emily.Chang3@ucsf.edu; Emily Chang; Emily.Chang3@ucsf.edu; Gonzalo Choque; Gonzalo.Choque@ucsf.edu; Jeremy Burbanks-Ivey; Jeremy.Burbanks-Ivey@ucsf.edu; Julie McCluggage; Julie.McCluggage@ucsf.edu; Nicole Zona; ZonaN@cc.ucsf.edu; Paula Dutton; Paula.Dutton@ucsf.edu; 415-885-7871 Rebecca Cook; Rebecca.Cook@ucsf.edu; 415-885-7329

UCSF Protocol No.	Clinicaltrials.gov Protocol No.	PI Name	Title	Protocol Type	Key Eligibility	Study Contact
149511	NCT02243917	Munster, Pamela	A Phase 1, Open-Label, Dose Escalation and Dose Expansion Study Evaluating the Safety, Pharmacokinetics, Pharmacodynamics, and Clinical Effects of Orally Administered CB-5083 in Patients with Advanced Solid Tumors	Treatment	18+ Inclusion Criteria ? All Phases 1. Males and females  18 years of age; 2. Eastern Cooperative Oncology Group (ECOG) Performance Status of ≤1 (Appendix D); 3. Acceptable bone marrow and organ function at screening as described below: a. ANC ≥1,500/µL; b. Platelet count ≥100,000/µL; c. Total bilirubin ≤1.5 × ULN or ≤3.0 × ULN for subjects with hereditary benign hyperbilirubinemia; d. AST (SGOT) ≤3 × ULN (≤5 × ULN if liver metastases are present); e. ALT (SGPT) ≤3 × ULN (≤5 × ULN if liver metastases are present); f. Serum creatinine ≤1.5 mg/dL or a measured creatinine clearance  60 mL/minute according to Cockcroft-Gault formula (Appendix E). 4. Left ventricular ejection fraction informed (LVEF) ≥55%; 5. Ability to swallow and retain oral medications; 6. Negative serum beta-human Chorionic Gonadotropin (β-hCG) test in women of childbearing potential (WOCBP). Note, subject must agree to use dual barrier contraceptive methods; and 7. Willing and able to provide written informed consent and comply with the requirements of the study. Inclusion Criteria ? Phase 1a Dose Escalation and Food Effect Cohort only 8. Histologically confirmed advanced solid tumor	Contact: 877-827-3222 or cancertrials@ucsf.edu

UCSF Protocol No.	Clinicaltrials.gov Protocol No.	PI Name	Title	Protocol Type	Key Eligibility	Study Contact
149513	NCT02325557	Fong, Lawrence	A Phase 1-2 Dose-Escalation and Safety Study of ADXS31-142 Alone and of ADXS31-142 in Combination with Pembrolizumab (MK-3475) in Patients with Previously Treated Metastatic Castration-Resistant Prostate Cancer	Treatment		Alyson Cockerill; Alyson.Cockerill@ucsf.edu; 415-353-4091 Kamran Abri Lavasani; Kamran.AbriLavasani@ucsf.edu; 415-353-8337
149515	NCT02307240	Munster, Pamela	Phase 1 Open Label, Multi-Center Study to Assess the Safety, Tolerability and Pharmacokinetics of Orally Administered CUDC-907, an HDAC and PI3K Inhibitor in Subjects with Advanced/ Relapsed Solid Tumors	Treatment		Alyson Cockerill; Alyson.Cockerill@ucsf.edu; 415-353-4091 Wendy Ham; wendy.ham@ucsf.edu;
149516	NCT02390011	Aggarwal, Rahul	A Pilot Study of Novel Magnetic Resonance Coil Arrays to Improve the Characterization of Liver Metastases in Patients with Advanced Solid Tumor Malignancies	Diagnostic		Alyson Cockerill; Alyson.Cockerill@ucsf.edu; 415-353-4091
14956	NCT02319369	Olin, Rebecca	A Phase 1 Dose Escalation Study of DS 3032B, and Oral MDM2 Inhibitor, in Subjects with Acute Myelogenous Leukemia (AML), Acute Lymphocytic Leukemia (ALL), Chronic Myelogenous Leukemia (CML) in Blast Phase, or High Risk Myelodysplastic Syndrome (MDS)	Treatment	Age 18+ -Relapsed/Refractory AML, ALL, CML in blast phase, or high-risk MDS -ECOG 0-2 -Washout of any therapy to treat malignancy is 21 days (except hydroxyurea, washout is 48 hrs) -No prior MDM2 inhibitor	Contact: 877-827-3222 or cancertrials@ucsf.edu

UCSF Protocol No.	Clinicaltrials.gov Protocol No.	PI Name	Title	Protocol Type	Key Eligibility	Study Contact
150812	NCT02962167	Mueller, Sabine	PNOC 005: A Phase 1 Study of Modified Measles Virus (MV-NIS) for the Treatment of Children and Young Adults with Recurrent Medulloblastoma or Recurrent Atypical Teratoid Rhabdoid Tumors (ATRT)	Treatment	Age: ≥ 12 months to ≤ 39 years *Stratum A: locally recurrent medulloblastoma or ATRT; undergo resection of local recurrence as part of their standard of care; *Stratum B: recurrent disseminated medulloblastoma or ATRT disease *must have failed at least one prior therapy - surgery followed by high dose chemotherapy with stem cell rescue or multi-modality therapy of surgery, radiation and chemotherapy - prior to study registration. * If history of Bone Marrow Transplant, patient must be: ? ≥ 6 months since allogeneic bone marrow transplant prior to registration ? ≥ 3 months since autologous bone marrow/stem cell prior to registration *Karnofsky ≥ 50 for patients ≥ 16 years of age, and Lansky ≥ 50 for patients < 16 years of age	Contact: 877-827-3222 or cancertrials@ucsf.edu

UCSF Protocol No.	Clinicaltrials.gov Protocol No.	PI Name	Title	Protocol Type	Key Eligibility	Study Contact
150815	NCT02625480	Hermiston, Michelle	A Phase 1/2 Multi-Center Study Evaluating the Safety and Efficacy of KTE-C19 in Pediatric and Adolescent Subjects with Relapsed/Refractory B-precursor Acute Lymphoblastic Leukemia (r/r ALL) (ZUMA-4)	Treatment	Age: 2-21 years old at time of consent *Relapsed or refractory B-precursor ALL (prior allogeneic transplant allowed) *At least 5% blasts in the bone marrow (isolated CNS relapse not allowed) *Lansky/Karnofsky >/=80% *Prior blinatumumab treatment allowed, but CD19 tumor expression on blasts must be documented after completion of most recent line of therapy to be >/= 90% CD19+. *CNS3 disease not allowed *any drug used for GVHD not allowed in the 4 weeks prior to study entry *salvage chemotherapy not allowed within 1 week prior to enrollment *corticosteroids not allowed within 7 days prior to enrollment	Contact: 877-827-3222 or cancertrials@ucsf.edu
150816	NCT02601937	Vo, Kieuhoa	A Phase I Study of the EZH2 Inhibitor Tazemetostat in Pediatric Subjects with Relapsed or Refractory INI1-Negative Tumors or Synovial Sarcoma	Treatment	Age: ≥6 months to ≤21 years old *relapsed/refractory disease with no standard treatment options available; must be ineligible/inappropriate for other treatment regimens known to have effective potential *documented local diagnostic pathology of original biopsy confirmed by a CLIA/CAP lab *Lansky/Karnofsky score >50% *life expectancy >3 months *all prior treatment toxicities resolved to ≤ Grade 1 per CTCAE, version 4.03 or are clinically stable and not clinically significant, at time of enrollment *able to swallow and retain orally administered medication *sufficient tumor tissue available for central confirmatory testing *cannot have received another investigational agent within 30 days or five half-lives of planned first dose of tazemetostat	Contact: 877-827-3222 or cancertrials@ucsf.edu

UCSF Protocol No.	Clinicaltrials.gov Protocol No.	PI Name	Title	Protocol Type	Key Eligibility	Study Contact
150818	NCT02425904	Hermiston, Michelle	Phase II Study of Clofarabine in Patients with Recurrent or Refractory Langerhans Cell Histiocytosis and LCH-related Disorders	Treatment	Age: all ages *Prior diagnosis of Langerhans Cell Histiocytosis by standard diagnostic criteria and confirmed histologically, with evidence of disease reactivation or progression after standard LCH treatment (histological confirmation of reactivation not required) *Performance score >70% *Must have failed first line of treatment with prednisone and vinblastine; there is no limitation of amount or type of prior therapy or drugs *must not have chemotherapy or radiotherapy within 2 weeks prior to entering the study *must have recovered from adverse events due to agents administered more than 2 weeks prior to study entry *patients with prior HSCT are not eligible	Contact: 877-827-3222 or cancertrials@ucsf.edu
150819	NCT02960230	Mueller, Sabine	H3.3K27M Specific Peptide Vaccine Combined with Poly-ICLC for the Treatment of Newly Diagnosed HLA-A2+ H3.3K27M Positive Diffuse Intrinsic Pontine Glioma (DIPG) as well as Other Newly Diagnosed HLA-A2+ H3.3K27M Positive Gliomas	Treatment	Age: 3-21 years old *Stratum A: Newly diagnosed DIPG, positive for H3.3K27 mutation, that underwent radiation therapy *Stratum B: Newly diagnosed glioma, other than DIPG, positive for H3.3K27 mutation, including spinal cord gliomas, that underwent standard radiation therapy *patients must test positive for HLA-A2 (in a CLIA approved laboratory) *patients must have measureable disease *patients must be off steroids or on a stable dose of dexamethasone (max 0.1 mg/kg/day, max 4mg/day) at time of enrollment *must not have received any prior chemotherapy, immunotherapy, or bone marrow transplant for treatment of tumor *must have undergone radiation therapy and surgery as part of standard of care treatment *performance score ≥ 50%	Sharon Kresge; leess@peds.ucsf.edu; 415-514-3658

UCSF Protocol No.	Clinicaltrials.gov Protocol No.	PI Name	Title	Protocol Type	Key Eligibility	Study Contact
151013		Evans, Michael	A Feasibility Study of Gallium-68 Citrate PET to Detect Hyperactive mTOR Activity in Glioma	Diagnostic		Contact: 877-827-3222 or cancertrials@ucsf.edu
15103	NCT02549833	Taylor, Jennie	Pilot Randomized Neo-adjuvant Evaluation of Poly-ICLC-Assisted Tumor Lysate Vaccines in Adult Patients with WHO Grade II Glioma	Treatment		Contact: 877-827-3222 or cancertrials@ucsf.edu
15108	NCT02924038	Butowski, Nicholas	Pilot Randomized Neo-Adjuvant Evaluation of Agonist Anti-CD27 Monoclonal Antibody Varlilumab on Immunologic Activities of IMA950 Vaccine plus Poly-ICLC in Patients with WHO Grade II Low-Grade Glioma (LGG)	Treatment		Ashley Desilva; Ashley.DeSilva@ucsf.edu; 415-353-2653 Jennifer Ayran; Jennifer.Ayran@ucsf.edu; 415.885.3704 Thelma Munoz; Thelma.Munoz@ucsf.e
15205		Grandis, Jennifer	SPORE (Specialized Program of Research Excellence) in Head and Neck Cancer	Basic Science	Age: 18+ -Participants who are at risk for or have developed primary, recurrent, metastatic or second primary cancer of the head and neck	Kyusun Cha; kyusun.cha@ucsf.edu;
152511	NCT02614066	Logan, Aaron	A Phase 1/2 Multi-Center Study Evaluating the Safety and Efficacy of KTE-C19 in Adult Subjects with Relapsed/Refractory B-precursor Acute Lymphoblastic Leukemia (r/r ALL)	Treatment	Age: 18+ *Relapsed or refractory B-precursor ALL *Morphological disease present in the bone marrow (≥ 5% blasts) *In subjects previously treated with blinatumomab, CD19 tumor expression in bone marrow or peripheral blood must be documented after completion of the most recent prior line of therapy and, if quantified, must be ≥ 90% CD19-positive blasts. *No isolated extramedullary disease	Jenai Wilmoth; Jenai.Wilmoth@ucsf.edu;

UCSF Protocol No.	Clinicaltrials.gov Protocol No.	PI Name	Title	Protocol Type	Key Eligibility	Study Contact
152514	NCT02253316	Martin, Tom	A Phase II Study of IRD (Ixazomib, Lenalidomide, and Dexamethasone) for Consolidation Therapy Post Autologous Stem Cell Transplantation followed by Maintenance Ixazomib or Lenalidomide for Multiple Myeloma	Treatment	Age: Between 18 - 70 years of age *Histologically confirmed diagnosis of symptomatic multiple myeloma (Patients with multiple myeloma with secondary amyloidosis are eligible) *Received at least two cycles of any regimen as initial systemic therapy for multiple myeloma and are within 2-12 months of the first dose of initial therapy *No evidence of multiple myeloma disease progression any time prior to enrollment (Progression from smoldering/asymptomatic multiple myeloma to symptomatic multiple myeloma is not exclusionary) *No history of plasma cell leukemia or multiple myeloma CNS involvement	Jenai Wilmoth; Jenai.Wilmoth@ucsf.edu;
15255	NCT02074839	Mannis, Gabriel	A Phase 1, Multicenter, Open-Label, Dose-Escalation and Expansion, Safety, Pharmacokinetic, Pharmacodynamic, and Clinical Activity Study of Orally Administered AG-120 in Subjects with Advanced Hematologic Malignancies with an IDH1 Mutation	Treatment	Age: 18+ *Patients with relapsed or refractory AML, untreated AML, or other non-AML IDH1-mutated relapsed and/or refractory advanced hematologic malignancies, where no standard of care treatment option is available *Patients must have documented IDH1 R132 gene-mutated disease	Jenai Wilmoth; Jenai.Wilmoth@ucsf.edu;
15451	NCT02008656	Varma, Madhulika	A Phase II Multicenter, Randomized Trial Evaluating 3-Year Disease-Free Survival in Patients with Locally Advanced Rectal Cancer Treated with Chemoradiation plus Induction or Consolidation Chemotherapy, and Total Mesorectal Excision or Non-Operative Management	Treatment		Contact: 877-827-3222 or cancertrials@ucsf.edu

UCSF Protocol No.	Clinicaltrials.gov Protocol No.	PI Name	Title	Protocol Type	Key Eligibility	Study Contact
155512	NCT02607228	Aggarwal, Rahul	A Phase 1b/2 Study to Evaluate the Safety, Tolerability, Pharmacokinetics, and Pharmacodynamics of GS-5829 as a Single Agent and In Combination With Enzalutamide in Subjects with Metastatic Castrate-Resistant Prostate Cancer	Treatment	18+ Adult subjects with histologically or cytologically confirmed mCRPC who are chemo naïve and have documented disease progression while receiving enzalutamide and or abiraterone therapy	Emily Chang; Emily.Chang3@ucsf.edu;
15554	NCT02611882	Hope, Thomas	Evaluation of Gallium-68 HBED-CC PSMA Imaging in Prostate Cancer Patients	Diagnostic	Age 18+ * Biopsy proven prostate adenocarcinoma * Karnofsky performance status of >49 (or ECOG/WHO equivalent). * Investigational therapy for prostate cancer is NOT allowed.	Contact: 877-827-3222 or cancertrials@ucsf.edu
15657	NCT02219711	Blakely, Collin	A Phase 1/1b Study of MGCD516 in Patients with Advanced Solid Tumor Malignancies	Treatment		Contact: 877-827-3222 or cancertrials@ucsf.edu
15751	NCT02336737	Alvarado, Michael	A Pivotal, Prospective, Open-Label, Multicenter Paired Comparison Study of SentiMag®/SiennaXP and the Standard of Care for Lymph Node Detection in Patients with Breast Cancer Who are Undergoing Lymph Node Mapping as Part of a Sentinel Node Biopsy Procedure	Diagnostic		Contact: 877-827-3222 or cancertrials@ucsf.edu
157519	NCT02437318	Melisko, Michelle	A Phase III Randomized Double-Blind, Placebo Controlled Study of Alpelisib in Combination with Fulvestrant for Men and Postmenopausal Women with Hormone Receptor Positive, HER2-Negative Advanced Breast Cancer which Progressed on or after Aromatase Inhibitor Treatment	Treatment		Heidi Dittrich; Heidi.Dittrich@ucsf.edu;

UCSF Protocol No.	Clinicaltrials.gov Protocol No.	PI Name	Title	Protocol Type	Key Eligibility	Study Contact
15856	NCT02327078	Daud, Adil	A Phase 1/2 Study of the Safety, Tolerability, and Efficacy of Epacadostat Administered in Combination With Nivolumab in Select Advanced Cancers	Treatment		Jenai Wilmoth; Jenai.Wilmoth@ucsf.edu;

UCSF Protocol No.	Clinicaltrials.gov Protocol No.	PI Name	Title	Protocol Type	Key Eligibility	Study Contact
159510	NCT02482441	Munster, Pamela	A Phase 1a/b Dose Escalation Study of the Safety, Pharmacokinetics, and Pharmacodynamics of OMP-131R10 in Advanced Solid Tumors and in Combination with FOLFIRI for Patients with Previously Treated Metastatic Colorectal Cancer	Treatment	18+ Phase 1a The subject population to be enrolled in this portion of the study include those who have advanced relapsed or refractory solid tumors that have exhausted standard therapy or either refuse or are not considered to be candidates for any remaining standard therapy. Subjects must be age 18 or older and must have good performance status (Eastern Cooperative Oncology Group (ECOG) performance status 0 or 1). Subjects may have their tumors pre- screened for RSPO3 gene expression, but this is not required in this portion of the study. For the dose expansion cohort of the Phase 1a study, subjects with APC wild-type colorectal cancer will have their tumors pre-screened for RSPO3-fusion genes and RSPO3 gene expression. Subjects with other tumors types and known RSPO3-fusion genes may be enrolled, but must be pre-screened for RSPO3 gene expression. Specifically, subjects with APC wild-type colorectal cancer with high expression of RSPO3 or other tumors with RSPO3-fusion genes and high expression of RSPO3 will be eligible for this portion of the study. Furthermore, at least 3 slots in this dose expansion cohort will be allocated to subjects whose tumors have an RSPO3-fusion gene. Phase 1b The subject population to be enrolled in this portion of the study includes those eligible to receive FOLFIRI for APC wild-type metastatic colorectal cancer with high gene expression levels	Contact: 877-827-3222 or cancertrials@ucsf.edu

UCSF Protocol No.	Clinicaltrials.gov Protocol No.	PI Name	Title	Protocol Type	Key Eligibility	Study Contact
159512	NCT02508441	Munster, Pamela	A Phase 1 Open-Label First-in-human Dose-Escalating Safety and Tolerability Study Evaluating Subcutaneous Administration of Andes-1537 for Injection in Patients with Advanced Unresectable Solid Tumors that are Refractory to Standard Therapy or for Which No Standard Therapy is Available	Treatment	1. Men and women 18 years of age or older. 2. Can understand and voluntarily sign an informed consent form (ICF) prior to any study-related assessments or procedures, and are able to adhere to the study visit schedule and other protocol requirements. 3. Patients with documented pathological evidence of a cancer from which has developed advanced unresectable solid tumors that are, in the opinion of their treating physician, refractory to standard therapy or for which no standard therapy is available. 4. Consent to tumor biopsy for biomarker analysis in tumor tissue (optional in part 1, mandatory in part 2). 5. Part 2 only: have measureable disease by RECIST. 6. Have Eastern Cooperative Oncology Group (ECOG) performance status of  1. 7. Have adequate organ function, confirmed by the following laboratory values obtained  3 days prior to the first treatment: ? ANC  1.5 × 109/L ? Hemoglobin (Hgb)  9 g/dL ? Platelets  100 × 109/L ? AST and ALT  2.5 × ULN ? Serum total bilirubin  2.0 × ULN ? Serum creatinine  1.5 × ULN, or estimated or measured creatinine clearance  60 mL/min ? Prothrombin time (PT), activated partial thromboplastin time (aPTT)  1.5 ULN if not on anticoagulation therapy (patients receiving anticoagulation therapy must be	Contact: 877-827-3222 or cancertrials@ucsf.edu

UCSF Protocol No.	Clinicaltrials.gov Protocol No.	PI Name	Title	Protocol Type	Key Eligibility	Study Contact
159513	NCT02482311	Munster, Pamela	A Phase Ib, Open-Label, Multi-Centre Study to Assess the Safety, Tolerability, Pharmacokinetics, and Anti-tumour Activity of AZD1775 Monotherapy in Patients with Advanced Solid Tumours	Treatment		Contact: 877-827-3222 or cancertrials@ucsf.edu
159516	NCT02620839	Munster, Pamela	A Phase Ib, Open-Label Study of Alpelisib (BYL719) in Combination with Cisplatin in Patients with HPV+ Solid Tumor Malignancies	Treatment	18+ Dose escalation phase will enroll patients with any solid tumor malignancy. In dose expansion, patients with platinum-resistance HPV-positive solid tumor malignancies will be enrolled.	Contact: 877-827-3222 or cancertrials@ucsf.edu
159517	NCT02913131	Aggarwal, Rahul	Hyperpolarized C-13 Pyruvate as a Biomarker of PI3K/mTOR Pathway Inhibition in Patients with Advanced Solid Tumor Malignancies	Other	18+ Subjects will be enrolled in two sequential phases: ? Part A: Feasibility Run-In (N = 5-10 patients). Patients with advanced solid tumor malignancies with at least one liver metastasis will be enrolled with iterative adjustment of coil design to optimize imaging parameters including spatial resolution and signal-to-noise ratio (SNR) of hyperpolarized pyruvate/lactate within the target metastatic lesion(s). The target SNR of 10 must be achieved in at least 3 patients in order to proceed to part B of the study. ? Part B: Biomarker Cohort (N = 30 patients). Patients with advanced solid tumor malignancies and the presence of at least one liver metastasis amenable to hyperpolarized C-13 pyruvate metabolic MR imaging who are planning on being treated with agent targeting PI3K/mTOR pathway will be enrolled. Exclusion criteria: ? Patients unwilling or unable to undergo MR imaging, including patients with dications to MRI, such as cardiac pacemakers or non-compatible intracranial vascular clips.	Contact: 877-827-3222 or cancertrials@ucsf.edu

UCSF Protocol No.	Clinicaltrials.gov Protocol No.	PI Name	Title	Protocol Type	Key Eligibility	Study Contact
159518	NCT02556463	Munster, Pamela	A Phase I, First-Time-in-Human Study of MEDI9197, a TLR 7/8 Agonist, Administered Intratumorally as a Single Agent in Subjects with Solid Tumors or CTCL and in Combination with Durvalumab and Palliative Radiation in Subjects with Solid Tumors	Treatment	18+ Up to approximately 45 male and female subjects with solid tumor malignancies that have at least one lesion readily accessible for injection. Key Inclusion Criteria: ? Metastatic/locally advanced solid tumor malignancy that has progressed on, is refractory to, or for which there is no standard of care therapy. Subjects who are intolerant to standard of care therapy may also enroll. ? Subject must have a minimum of one lesion that is easily accessible for injection where easily accessible is defined as a cutaneous or subcutaneous mass that is palpable and/or visualizable by ultrasound. The lesion must be located in an anatomic location where MEDI9197 can be safely administered, ie, not deep seated or encasing/in close proximity to crucial structures ? carotid artery, jugular vein, trachea, etc. ? All lesion(s) targeted for injection must be ≥ 1.5 cm and ≤ 5 cm on longest diameter, be at least 5 mm thick, and have distinct borders based on exam or imaging. ? Male and female subjects ≥ 18 years of age. ? Eastern Cooperative Oncology Group status of 0 to 1. ? Adequate bone marrow, renal, and hepatic function. ? Off immunosuppressive medications including, but not limited to, systemic corticosteroids at doses exceeding 10 mg/day or equivalent, methotrexate, azathioprine and TNF-α	Contact: 877-827-3222 or cancertrials@ucsf.edu

UCSF Protocol No.	Clinicaltrials.gov Protocol No.	PI Name	Title	Protocol Type	Key Eligibility	Study Contact
159520	NCT02646748	Munster, Pamela	A Platform Study Exploring the Safety, Tolerability, Effects on the Tumor Microenvironment, and Efficacy of Pembrolizumab (MK-3475) + INCB Combinations in Advanced Solid Tumors	Treatment	18+ Study Population: Part 1a: Subjects with advanced or metastatic solid tumors who have disease progression after treatment with all available therapies for metastatic disease that are known to confer clinical benefit, or are intolerant to treatment, or refuse standard treatment. Part 1b: Subjects with advanced or metastatic endometrial cancer, gastric cancer, melanoma, MSI CRC or other MMR-deficient tumors, NSCLC, SCCHN, RCC, TNBC, TCC of the GU tract, or PDAC who have disease progression after treatment with all available therapies for metastatic disease that are known to confer clinical benefit, or are intolerant to treatment, or refuse standard treatment. Part 2: Subjects with advanced or metastatic SCLC with disease progression after treatment with all available therapies for metastatic disease that are known to confer clinical benefit, or are intolerant to treatment, or refuse standard treatment.	Contact: 877-827-3222 or cancertrials@ucsf.edu
159522	NCT02628067	Bergsland, Emily	A Phase II Clinical Trial of Pembrolizumab (MK-3475) in Subjects with Select Biomarker Positive Advanced Solid Tumors (KEYNOTE-158)	Treatment		Kamran Abri Lavasani; Kamran.AbriLavasani@ucsf.edu; 415-353-8337

UCSF Protocol No.	Clinicaltrials.gov Protocol No.	PI Name	Title	Protocol Type	Key Eligibility	Study Contact
15953	NCT01770353	Munster, Pamela	A Phase 1 Study in Patients Treated with MM-398 (Nanoliposomal Irinotecan, nal-IRI,) to Determine Tumor Drug Levels and to Evaluate the Feasibility of Ferumoxytol Magnetic Resonance Imaging to Measure Tumor Associated Macrophages and to Predict Patient Response to Treatment	Treatment	18+ The Pilot Phase will enroll approximately 12 patients, up to 20 in total. The first three patients enrolled can have any solid tumor type; however subsequent patients must have NSCLC, CRC, TNBC, ER/PR positive breast cancer, pancreatic cancer, ovarian cancer, gastric cancer, gastroesophageal junction adenocarcinoma or head and neck cancer. No more than three patients with ER/PR positive breast cancer can be enrolled in the Pilot Phase and similar restrictions may be placed on other tumor types to ensure a heterogeneous population. An Expansion Phase will enroll cohorts of single indications of patients with locally advanced or metastatic breast cancer in 3 cohorts of 10 patients each depending on sub-type of breast cancer: Cohort 1: ER and/or PR-positive breast cancer Cohort 2: TNBC Cohort 3: breast cancer with active brain metastasis There are four stages to this study: ? Screening Period (-28 d): patients undergo screening assessments to determine if they are eligible for the study ? Ferumoxytol Period (Day 1 ? Day 2): patients receive ferumoxytol (FMX) infusion and undergo required FMX-MRI scans and prior to receiving MM-398 ? MM-398 Treatment Period (C1D1 ? progression of disease): patients receive an MM-398 starting dose of 60 mg/m2 every 2 weeks which should be dose escalated to 80 mg/m2 every 2 weeks in	Kamran Abri Lavasani; Kamran.AbriLavasani@ucsf.edu; 415-353-8337

UCSF Protocol No.	Clinicaltrials.gov Protocol No.	PI Name	Title	Protocol Type	Key Eligibility	Study Contact
15955	NCT02403271	Munster, Pamela	A Multi-Center Study of the Bruton?s Tyrosine Kinase (BTK) Inhibitor, Ibrutinib, in Combination with Durvalumab (MEDI4736), in Subjects with Relapsed or Refractory Solid Tumors	Treatment		Contact: 877-827-3222 or cancertrials@ucsf.edu
15956	NCT02367196	Munster, Pamela	A Phase 1, Open-Label, Dose Finding Study of CC-90002, a Monoclonal Antibody Directed against CD47, in Subjects with Advanced Solid and Hematologic Cancers	Treatment	18+ *Patients with advanced solid tumors or multiple myeloma *No symptomatic CNS involvement *No prior RBC transfusions <3 months prior to study drug dosing *No prior autologous stem cell transplants <3 months prior to study drug dosing; no prior allogeneic stem cell transplant </= study drug dosing. *No ongoing treatment with anticoagulant medication.	Contact: 877-827-3222 or cancertrials@ucsf.edu
15957	NCT02009449	Korn, Michael	A Phase 1, Open-Label Dose Escalation First-in-Human Study to Evaluate the Tolerability, Safety, Maximum Tolerated Dose, Preliminary Clinical Activity, and Pharmacokinetics of AM0010 in Patients with Advanced Solid Tumors	Treatment		Ilaria Mastroserio; Ilaria.Mastroserio@ucsf.edu;
15958	NCT02431260	Munster, Pamela	Phase 1/2, Open-Label, Dose-Escalation, Safety and Tolerability Study of INCB054329 in Subjects with Advanced Malignancies	Treatment	18+ Subjects with advanced malignancies who have failed at least 1 prior therapy or have no standard treatment options demonstrated to provide clinical benefit or who are intolerable to or refuse further standard treatments will be enrolled.	Ilaria Mastroserio; Ilaria.Mastroserio@ucsf.edu;

UCSF Protocol No.	Clinicaltrials.gov Protocol No.	PI Name	Title	Protocol Type	Key Eligibility	Study Contact
15959	NCT02514668	Martin, Tom	An Open-Label, Dose-Escalation and Multi-Center Study to Evaluate the Safety and Pharmacokinetics of SAR650984 in Patients with Relapsed/Refractory Multiple Myeloma	Treatment	PART B Age 18+ - MM diagnosis with M prot >/= 1g/dL or urine M proto >/=200 mg/24hr -Received 3 cycles daratubumab with 6 weeks washout -Achieve MR or better to 1 prior line of therapy -No concurrent plasma cell leukemia/ known or suspected amyloidosis - Washout is 3 weeks or 5 half-lives, whichever is greater	Contact: 877-827-3222 or cancertrials@ucsf.edu
15991	NCT02442635	Dhruva, Anand	Developing a Yoga Intervention During Cancer Chemotherapy	Supportive Care		Contact: 877-827-3222 or cancertrials@ucsf.edu

UCSF Protocol No.	Clinicaltrials.gov Protocol No.	PI Name	Title	Protocol Type	Key Eligibility	Study Contact
16081	NCT02650401	Sabnis, Amit	A Phase 1/1b, Open-Label, Dose-Escalation and Expansion Study of Entrectinib (RXDX-101) in Children and Adolescents with Recurrent or Refractory Solid Tumors and Primary CNS Tumors, with or without TRK, ROS1, or ALK Fusions	Treatment	Age: Male or female age ≥ 2 years and < 22 years; subjects < 2 years may be enrolled in Part E (alternative dosing methods) *must be able to swallow capsules, except for <2 years of age in Part E (alternative dosing method) *Parts A, B, C, and D must have BSA ≥ 0.45 m2 at the time of study enrollment *Patients must have measureable or evaluable disease. Disease will be evaluated for the different Parts by either RECISTv1.1 (+/- Curie Scale) or RANO. *Part A: Relapsed or refractory extracranial solid tumors *Part A (expansion): Relapsed or refractory non-neuroblastoma, extracranial solid tumors with NTRK1/2/3, ROS1, or ALK molecular alterations, non-gene fusion molecular alterations *Part B: Relapsed or refractory primary brain tumors with NTRK1/2/3, ROS1, or ALK molecular alterations, including gene fusions; gene fusions are defined as those predicted to translate into a fusion protein with a functional TRKA/B/C, ROS1, or ALK kinase domain, without a concomitant second oncodriver (e.g., EGFR, KRAS) as determined by any nucleic acid-based diagnostic testing method, e.g., NGS, Sanger, RT-PCR, NanoString, EdgeSeq. *Part C: Relapsed or refractory neuroblastoma *Part D: Relapsed or refractory non-neuroblastoma, extracranial solid tumors with NTRK1/2/3, ROS1, or ALK gene fusions; gene fusions are defined as those predicted to translate into a fusion protein with a functional TRKA/B/C, ROS1, or ALK kinase domain,	Pediatric Oncology; cancerclinicaltrials@peds.ucsf.edu; 415-476-3831

UCSF Protocol No.	Clinicaltrials.gov Protocol No.	PI Name	Title	Protocol Type	Key Eligibility	Study Contact
16082	NCT02332668	Vo, Kieuhoa	A Phase I/II Study of Pembrolizumab (MK-3475) in Children with advanced melanoma or a PD-L1 positive advanced, relapsed or refractory solid tumor or lymphoma (KEYNOTE-051)	Treatment	Age: 6 months to less than 18 years of age on day of signing consent/assent. *histologically or cytologically-documented, either advanced melanoma or a PD-L1 positive advanced, relapsed or refractory solid tumor or lymphoma. There is no limit to the number of prior treatment regimens, but standard therapies must be exhausted. *Have measurable disease based on RECIST 1.1. *Performance score ≥ 50%. *must have recovered all toxicities from prior agents to ≤ Grade 1 or baseline (subjects with ≤ Grade 2 neuropathy or ≤ Grade 2 alopecia are an exception to this criterion and may qualify for the study) *patients may not have active CNS metastases *patients must not have received prior therapy with anti-PD-1, anti PD-L1, or anti-CTLA-4 therapies *patients cannot have undergone prior allogeneic hematopoetic stem cell transplantation within the last 5 years	Pediatric Oncology; cancerclinicaltrials@peds.ucsf.edu; 415-476-3831
16088	NCT02947373	Mueller, Sabine	Pilot Study of Safety and Toxicity of Acquiring Hyperpolarized Carbon-13 Imaging in Children with Brain Tumors	Diagnostic	Age: ≥ 3 years and ≤ 18 years of age *diagnosis of a brain tumor *patient does require sedation for MR imaging *Karnofsky ≥ 70 for patients ≥ 16 years of age, and Lansky ≥ 70 for patients < 16 years of age *Patients receiving active therapy on an investigational trial at the time of enrollment should consult with the study chair regarding potential interactions with other study agents. Patients who are enrolled in a clinical trial but are off- therapy and in follow up are eligible.	Contact: 877-827-3222 or cancertrials@ucsf.edu

UCSF Protocol No.	Clinicaltrials.gov Protocol No.	PI Name	Title	Protocol Type	Key Eligibility	Study Contact
16101	NCT02617589	Butowski, Nicholas	A Randomized Phase 3 Open Label Study of Nivolumab vs Temozolomide Each in Combination with Radiation Therapy in Newly Diagnosed Adult Subjects with Unmethylated MGMT (tumor O-6-methylguanine DNA methyltransferase) Glioblastoma	Treatment		Contact: 877-827-3222 or cancertrials@ucsf.edu
16104	NCT02667587	Taylor, Jennie	A Randomized Phase 2 Single Blind Study of Temozolomide plus Radiation Therapy Combined with Nivolumab or Placebo in Newly Diagnosed Adult Subjects with MGMT-Methylated (tumor O6 methylguanine DNA methyltransferase) Glioblastoma	Treatment		Contact: 877-827-3222 or cancertrials@ucsf.edu
16105		Taylor, Jennie	Neurocognitive and Quality of Life Assessment in Patients with Brain Tumors	Other		Contact: 877-827-3222 or cancertrials@ucsf.edu
16109	NCT02844439	Butowski, Nicholas; Chang, Susan	A Phase 2, Multicenter Study of Tesevatinib Monotherapy in Patients with Recurrent Glioblastoma	Treatment		Contact: 877-827-3222 or cancertrials@ucsf.edu
16452	NCT02602327	Fidelman, Nicholas	Phase I/II Study of TAS-102 and Radioembolization with 90Y Resin Microspheres for Chemo-Refractory Colorectal Hepatic Metastases	Treatment	Age: 18+ *Diagnosis of uresectable metastatic colorectal adenocarcinoma with liver-dominant disease *Disease progression or intolerance to at least two prior FDA-approved therapeutic regimens *Tumor replacement < 50% of total liver volume	Curt Johanson; Curt.Johanson@ucsf.edu; 415-353-2310
165510	NCT02918357	Hope, Thomas	Gallium-68 PSMA-11 PET in patients with biochemical recurrence	Diagnostic		Contact: 877-827-3222 or cancertrials@ucsf.edu
16559	NCT02919111	Hope, Thomas	Gallium-68 PSMA-11 PET in intermediate to high-risk preprostatectomy patients	Diagnostic		Contact: 877-827-3222 or cancertrials@ucsf.edu

UCSF Protocol No.	Clinicaltrials.gov Protocol No.	PI Name	Title	Protocol Type	Key Eligibility	Study Contact
16704	NCT02872025	Esserman, Laura	Testing the Ability of Pembrolizumab to Alter the Tumor Immune MicroEnvironment (TIME) of High Risk DCIS	Treatment		Contact: 877-827-3222 or cancertrials@ucsf.edu
16707	NCT02812875	Daud, Adil	A Phase 1, Open-Label, Dose Escalation and Dose Expansion Trial Evaluating the Safety, Pharmacokinetics, Pharmacodynamics, and Clinical Effects of Orally Administered CA-170 in Patients with Advanced Tumors and Lymphomas	Treatment	Age:18+ *Life expectancy of at least 3 months *ECOG PS ≤ 1 *Acceptable bone marrow and organ function at screening *Ability to swallow and retain oral medications *Negative serum pregnancy test in women of childbearing potential *Measurable disease *Tumor for which standard therapy, including approved anti-PD-1 or anti-PD-L1 therapy, when applicable, does not exist or is no longer effective.	Andrew Chon; andrew.chon@ucsf.edu ; Jeremy Burbanks-Ivey; Jeremy.Burbanks-Ivey@ucsf.edu; Julie McCluggage; Julie.McCluggage@ucsf.edu;
16757	NCT02513394	Rugo, Hope	A Randomized Phase III Trial of Palbociclib with Standard Adjuvant Endocrine Therapy versus Standard Adjuvant Endocrine Therapy Alone for Hormone Receptor Positive (HR+)/Human Epidermal Growth Factor Receptor 2 (HER2)-Negative Early Breast Cancer	Treatment		Amy Deluca; Amy.Deluca@ucsf.edu; 415-353-7288
16951	NCT02705469	Aggarwal, Rahul	A Phase 1 Safety and Tolerability Study of ZEN003694 in Patients with Metastatic Castration-resistant Prostate Cancer	Treatment	18+ *Metastatic castration resistant prostate cancer *No history of brain metastases allowed *No prior chemo in the metastatic castration-resistant setting *Chemo in hormone-sensitive setting is permitted, provided that the last dose was >/= 6 months from study entry	Emily Chang; Emily.Chang3@ucsf.edu; Gonzalo Choque; Gonzalo.Choque@ucsf.edu; Paula Dutton; Paula.Dutton@ucsf.edu ; 415-885-7871

UCSF Protocol No.	Clinicaltrials.gov Protocol No.	PI Name	Title	Protocol Type	Key Eligibility	Study Contact
16952	NCT02711956	Aggarwal, Rahul	A Phase 1 Safety and Tolerability Study of ZEN003694 in Combination with Enzalutamide in Patients with Metastatic Castration-resistant Prostate Cancer	Treatment	1. Males age ≥ 18 years 2. Metastatic, castrate resistant, histologically confirmed prostate cancer; surgically castrated or continuous medical castration for ≥ 8 weeks prior to screening 3. Serum testosterone < 50 ng/dL determined within 4 weeks of first administration of study drug 4. Eastern Cooperative Oncology Group (ECOG) performance status of 0 or 1 5. Adequate laboratory parameters at Screening including: o Absolute neutrophil count (ANC) ≥ 1.5 × 109/L o Platelet count ≥ 100,000/mm3 o Aspartate aminotransferase (AST) or alanine aminotransferase (ALT) ≤ 2.0 x ULN (≤ 5 x ULN if liver metastases are present) o Total bilirubin ≤ 1.25 x ULN o Serum creatinine ≤ 1.5 x ULN or calculated (Cockcroft-Gault formula) or measured creatinine clearance ≥ 60 mL/min o Prothrombin time (PT), international normalized ratio (INR) and partial thromboplastin time (PTT) < 1.5 x ULN 6. Use of corticosteroids is allowed up to a daily dose of 10 mg prednisone or equivalent provided that the dose has been stable for at least 2 weeks prior to first administration of study drug and will remain stable during study drug and enzalutamide dosing 7. Patients must be surgically sterile or must agree to use physician-approved contraception	Emily Chang; Emily.Chang3@ucsf.edu; Gonzalo Choque; Gonzalo.Choque@ucsf.edu; Paula Dutton; Paula.Dutton@ucsf.edu ; 415-885-7871

UCSF Protocol No.	Clinicaltrials.gov Protocol No.	PI Name	Title	Protocol Type	Key Eligibility	Study Contact
16954	NCT02762981	Munster, Pamela	Phase 1/2 Study of CORT125134 in Combination with Nab-paclitaxel in Patients with Solid Tumors	Treatment	18+ *Patients with advanced or metastatic solid tumors, refractory to available therapies with known clinical benefit. *Up to 3 chemotherapy regimens allowed in the advanced setting. *Cannot have a condition requiring chronic or frequent use of oral corticosteroids.	Contact: 877-827-3222 or cancertrials@ucsf.edu
16955	NCT02709889	Aggarwal, Rahul	An Open-Label Study of Rovalpituzumab Tesirine in Subjects with Delta-Like Protein 3-Expressing Advanced Solid Tumors	Treatment	18+ This is a multicenter, open-label study of rovalpituzumab tesirine in subjects with DLL3-expressing advanced solid tumors. The study will include 8 cohorts of patients with the following cancers: 1. Malignant melanoma 2. Medullary thyroid cancer (MTC) 3. Glioblastoma 4. Large cell neuroendocrine carcinoma (LCNEC) 5. Neuroendocrine prostate cancer (NEPC) 6. High-grade gastroenteropancreatic (GEP) neuroendocrine carcinoma (NEC) 7. Other neuroendocrine carcinoma (NEC) 8. Solid tumors other than the above	Contact: 877-827-3222 or cancertrials@ucsf.edu

UCSF Protocol No.	Clinicaltrials.gov Protocol No.	PI Name	Title	Protocol Type	Key Eligibility	Study Contact
AAML1331	NCT02339740	Braun, Benjamin	A Phase III Study for Patients with Newly Diagnosed Acute Promyelocytic Leukemia (APL) using Arsenic Trioxide and All- Trans Retinoic Acid	Treatment	Age: ≥ 12 months and < 22 years of age at first diagnosis of APL *Newly diagnosed with clinical diagnosis of Acute Promyelocytic Leukemia (by morphology of bone marrow or peripheral blood; bone marrow diagnosis highly preferred); patients with secondary APL are excluded *If RQ-PCR results are known at the time of study enrollment, patient must demonstrate PML-RARα transcript by RQ-PCR to be eligible *may receive up to maximum 5 days pre-treatment with ATRA prior to administration of study therapy *treatment with hydroxyurea, corticosteroids (any route), and IT cytarabine prior to beginning protocol therapy is allowed. However, a lumbar puncture with IT therapy at initial diagnosis of APL is not recommended; treatment with any other cytotoxic chemotherapy prior to beginning protocol therapy is NOT allowed *patients may not have significant EKG abnormalities	Contact: 877-827-3222 or cancertrials@ucsf.edu
AAML1522	NCT02538965	Braun, Benjamin	A Phase 2, Multicenter, Single-arm, Open-label Study to Evaluate the Activity, Safety and Pharmacokinetics of Lenalidomide (Revlimid®) in Pediatric Subjects from 1 to ≤ 18 Years of Age with Relapsed or Refractory Acute Myeloid Leukemia	Treatment		Contact: 877-827-3222 or cancertrials@ucsf.edu
AAML1531	NCT02521493	Loh, Mignon	Risk-stratified Therapy for Acute Myeloid Leukemia in Down Syndrome A COG Groupwide Phase III Study	Treatment		Contact: 877-827-3222 or cancertrials@ucsf.edu
ADVL1322	NCT01956669	Sabnis, Amit	A Phase II Trial of Pazopanib NSC# 737754, IND# 65747 in Children with Refractory Solid Tumors	Treatment		Contact: 877-827-3222 or cancertrials@ucsf.edu

UCSF Protocol No.	Clinicaltrials.gov Protocol No.	PI Name	Title	Protocol Type	Key Eligibility	Study Contact
ALLIANCE-A051301	NCT02443077	Andreadis, Charalambos	A RANDOMIZED DOUBLE-BLIND PHASE III STUDY OF IBRUTINIB DURING AND FOLLOWING AUTOLOGOUS STEM CELL TRANSPLANTATION VERSUS PLACEBO IN PATIENTS WITH RELAPSED OR REFRACTORY DIFFUSE LARGE B-CELL LYMPHOMA OF THE ACTIVATED B-CELL SUBTYPE	Treatment	Age: 18+ *Diagnosis of WHO diffuse large B-cell lymphoma, high grade B-cell lymphoma not otherwise specified, or B-cell lymphoma, unclassifiable, with features intermediate between diffuse large B-cell lymphoma and Burkitt lymphoma *Determination of ABC subtype *Patient must have progressed or be refractory to prior anthracycline-containing chemotherapy (e.g. R-CHOP, DA-EPOCH-R, etc) *No more than 3 prior regimens for large cell component (e.g. one induction and two salvage therapies). Monoclonal antibody alone or involved field/involved site radiotherapy do not count as lines of therapy	Jenai Wilmoth; Jenai.Wilmoth@ucsf.edu;
ALLIANCE-A071401	NCT02523014	Taylor, Jennie	Phase II Trial of SMO/AKT/NF2 Inhibitors in Progressive Meningiomas with SMO/AKT/NF2 Mutations	Treatment		Contact: 877-827-3222 or cancertrials@ucsf.edu
AMC-088	NCT02059499	Jay, Naomi	A Randomized, Phase III Study of Intra-anal imiquimod 2.5% vs. Topical 5-fluorouracil 5% vs. Observation for the Treatment of High-grade Anal Squamous Intraepithelial Lesions in HIV-infected Men and Women	Treatment	Age: 27 Years and Older; * HIV-Positive; * Biopsy-proven HSIL (anal intraepithelial neoplasia 2 (AIN2) and/or AIN3) of the anal canal at either the squamocolumnar junction or distal anus; * HSIL occupies at least 25% of the circumference of the anal canal at either the squamocolumnar junction or distal anus	Contact: 877-827-3222 or cancertrials@ucsf.edu
AMC-095	NCT02408861	Wang, Chia-Ching (Jackie)	A Phase I Study of Ipilimumab and Nivolumab in Advanced HIV Associated Solid Tumors with an Expansion Cohort in HIV Associated Solid Tumors	Treatment	18+ Participants with histologically confirmed solid malignancy and HIV infection. Solid malignancy must be metastatic or unresectable and standard curative or palliative measures are nonexistent or no longer effective. Uncontrolled Kaposi sarcoma is permitted.	Contact: 877-827-3222 or cancertrials@ucsf.edu

UCSF Protocol No.	Clinicaltrials.gov Protocol No.	PI Name	Title	Protocol Type	Key Eligibility	Study Contact
ANBL1221	NCT01767194	Matthay, Katherine	A Phase II Randomized Trial of Irinotecan/Temozolomide with Temsirolimus (NSC# 683864, IND# 61010) or Chimeric 14.18 Antibody (ch14.18) (NSC# 764038, IND# 4308) in Children with Refractory, Relapsed or Progressive Neuroblastoma	Treatment	Age: All Recurrent/progressive neuroblastoma or ganglioneuroblastoma	Pediatric Oncology; cancerclinicaltrials@peds.ucsf.edu; 415-476-3831
ANBL1232	NCT02176967	Matthay, Katherine	Utilizing Response- and Biology-Based Risk Factors to Guide Therapy in Patients with Non-High-Risk Neuroblastoma	Treatment		Contact: 877-827-3222 or cancertrials@ucsf.edu
AOST1321	NCT02470091	Goldsby, Robert	Phase 2 Study of Denosumab (IND# 127430, NSC# 744010), a RANK Ligand Antibody, for Recurrent or Refractory Osteosarcoma	Treatment		Contact: 877-827-3222 or cancertrials@ucsf.edu
AOST1421	NCT02484443	Goldsby, Robert	A Phase II Study of Human-Mouse Chimeric Anti-Disialoganglioside Monoclonal Antibody ch14.18 (Dinutuximab, NSC# 764038, IND# 4308) in Combination with Sargramostim (GM-CSF) in Patients with Recurrent Osteosarcoma	Treatment		Contact: 877-827-3222 or cancertrials@ucsf.edu
ARST1321	NCT02180867	Goldsby, Robert	Pazopanib Neoadjuvant Trial in Non-Rhabdomyosarcoma Soft Tissue Sarcomas (PAZNTIS): A Phase II/III Randomized Trial of Preoperative Chemoradiation or Preoperative Radiation Plus or Minus Pazopanib (NSC# 737754, IND# 118613)	Treatment		Contact: 877-827-3222 or cancertrials@ucsf.edu
NANT-2011-04	NCT01711554	Matthay, Katherine	A Phase I Study of Lenalidomide and Anti-GD2 Mab Ch14.18 +/- Isotretinoin in Patients with Refractory/Recurrent Neuroblastoma	Treatment	Age: up to 21 years * high risk, recurrent/progressive, Neuroblastoma	Pediatric Oncology; cancerclinicaltrials@peds.ucsf.edu; 415-476-3831

UCSF Protocol No.	Clinicaltrials.gov Protocol No.	PI Name	Title	Protocol Type	Key Eligibility	Study Contact
NANT-2013-02	NCT02298348	Matthay, Katherine	A Phase I Study of Sorafenib and Cyclophosphamide/Topotecan in Patients with Relapsed and Refractory Neuroblastoma	Treatment		Contact: 877-827-3222 or cancertrials@ucsf.edu
NRG-BN002	NCT02311920	Butowski, Nicholas	Phase I Study of Ipilimumab, Nivolumab, and the Combination in Patients with Newly Diagnosed Glioblastoma	Treatment		Contact: 877-827-3222 or cancertrials@ucsf.edu
TACL-2014-001	NCT01614197	Hermiston, Michelle	A Phase I Trial of Temsirolimus (CCI-779, Pfizer, Inc.) in Combination with Etoposide and Cyclophosphamide in Children with Relapsed Acute Lymphoblastic Leukemia and Non-Hodgkins Lymphoma	Treatment		Contact: 877-827-3222 or cancertrials@ucsf.edu