

Ref FOI17 115  
Date 27 March 2017

Dear Sir/Madam

**Request for information under the Freedom of Information Act 2000**

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Please find below/attached the Isle of Wight NHS Trust's response to your request.

Please provide the following information

**PD-L1 Freedom of Information request**

For convenience, most questions are multiple choice, with space for extra details where relevant.

In each case please  all that apply

1. Do you currently offer a clinical testing service for PD-L1 in non-small cell lung carcinoma (NSCLC) as off the beginning of 2017?

No

Validating

- Please specify when you predict this service with be available for clinical use:

Yes, in-house clinical service

Yes, but send-out to an external laboratory

- Please specify which external laboratory samples are sent to: UHS

2. How is PD-L1 testing in NSCLC normally requested by the clinician? (please select all that apply)

As a retrospective test on archived NSCLC samples that have already had EGFR and ALK testing

As a standalone test for newly diagnosed NSCLC samples

As part of a NSCLC panel of tests (PD-L1, EGFR, ALK) for new diagnosed NSCLC samples

Other, please specify:

3. If requested as part of a NSCLC panel of tests, how is PD-L1 testing performed in the lab

Prior to EGFR and ALK

Sequentially after EGFR and ALK

X In parallel with EGFR and ALK

Other, please specify:

4. What sample types are processed by the lab for NSCLC testing (EGFR/ALK/PD-L1)? (please select all that apply)

xResection

xNeedle Core Biopsy

N/A EBUS cytology

N/A EBUS cytological cell block

Other, please specify:

5. What is the number of NSCLC samples being tested (or sent-out) are tested for:?

ALK *Please specify number:* 8 approx (per month)

EGFR *Please specify number:* 8 approx (per month)

PD-L1 *Please specify number:* 8 approx (per month)

6. What proportion of PD-L1 NSCLC samples tested are cytology/ cytological cell block samples? (per month or per year or as a percentage of PD-L1 samples tested, whichever is easier to determine)

Sent from UHS/PHT

7. What proportion of PD-L1 NSCLC samples are NOT tested because the samples are EBUS/cytology samples? (per month or per year or as a percentage of PD-L1 samples tested, whichever is easier to determine)

8.

EBUS performed at UHS/PHT

9. What methods are used for PD-L1 testing in NSCLC and their associated clinical cut-off? (please select all that apply)

Dako PD-L1 IHC 22C3 pharmDx

Dako PD-L1 IHC 28-8 pharmDx

Ventana PD-L1 (SP263) Assay

Ventana PD-L1 (SP142) Assay

22C3 Standalone antibody

28-8 Standalone antibody

E1L3N Standalone antibody

SP142 Standalone antibody

SP263 Standalone antibody

Other(s) (please specify):

10. What is the clinical cut offs are used in relation to the antibodies selected above? (e.g. Dako 22C3 pharmDx  $\geq 1\%$  = positive or  $\geq 50\%$  = positive)

Performed at/ by UHS

**11. What IHC staining platform(s) are used in the laboratory that performs the PD-L1 testing e.g. Ventana, Dako, Leica, Menarini, Shandon, Labvision, etc? (If possible,**

Performed at/ by UHS

**please supply the model of the platform)**

**12. What percentage of samples tested have  $\geq 1\%$  PD-L1 expression?**

2 approx

**13. What percentage of samples tested have  $\geq 50\%$  PD-L1 expression?**

2 approx

**14. What is the average turnaround time from sample receipt to report being issued?**

2/52

**15. Are there bottlenecks that prevent this turnaround time from being quicker?**

UHS histology provision/capacity (large population size)

**16. Who pays for DLBCL testing?**

- Heamatologists
- Laboratory  
xCommissioners
- National Services Division
- Other, please specify details
  
- Pharma initiative, please specify details UHS provision

Thank you very much for taking the time to complete this FOI questionnaire as fully as you are able.

Please note the Isle of Wight NHS Trust came into existence on the 1.4.12 therefore we do not hold information prior to this date. If you require information prior to this date please contact the Department of Health.

Please note that this response does not constitute as consent for direct marketing.

A copy of this response will be published on the Trust website.

We would like to bring to your attention the unique set up of the Isle of Wight NHS Trust which serves a resident population of 140,000 with a substantial influx of tourists during the summer months. The Trust provides acute, ambulance, community, maternity, mental

**health services on the Isle of Wight. As the only fully integrated service provider in England with this unique range of services comparisons with other service providers are not always straightforward and may result in higher or lower reporting data.**

This letter also confirms the completion of this request. A log of this request will be held on a database by the Trust. All hard copy correspondence relating to this request will be held for one year from the date of this letter, before being confidentially destroyed.

If you are unhappy about the response you have received your first line of action should be to write and request the Trust to undertake an internal review of your application. A senior member of staff, who was not involved with your initial application, will undertake this review. If after this process you are still not satisfied with the response you receive from the Trust you can complain to the Information Commissioner at the following address:

Information Commissioner  
Wycliffe House  
Water Lane  
Wilmslow  
Cheshire  
SK9 5AF

Please do not hesitate to contact this office if you have any further questions.

Yours faithfully

Freedom of Information Team