

Surveillance strategy for individuals with germline *TP53* mutations
(Toronto Protocol)

Tumor Type	Surveillance Strategy
Children	
Adrenocortical carcinoma	<ul style="list-style-type: none"> ▪ Ultrasound of abdomen and pelvis every 3-4 mths ▪ Complete urinalysis every 3-4 mths ▪ Bloodwork every 4 months: ESR, LDH, βHCG, alpha-fetoprotein, 17-OH-progesterone, testosterone, DHEAS, androstenedione
Brain tumor	<ul style="list-style-type: none"> ▪ Annual MRI of the brain
Soft tissue and bone sarcoma	<ul style="list-style-type: none"> ▪ Annual rapid total body MRI*
Leukemia/lymphoma	<ul style="list-style-type: none"> ▪ CBC profile/LDH/ESR every 3-4 mths
Regular evaluation with family physician with close attention to any medical concerns or complaints	
Adults	
Breast cancer	<ul style="list-style-type: none"> ▪ Monthly Breast Self Examination starting at age 18y ▪ Semiannual clinical breast exam starting at age 20-25y, or 5-10y before the earliest known breast cancer in the family ▪ Annual mammogram and breast MRI screening starting at age 20-25y, or individualized based on earliest age of onset in family ▪ Consider risk-reducing bilateral mastectomy
Brain tumor	<ul style="list-style-type: none"> ▪ Annual MRI of the brain
Soft tissue and bone sarcoma	<ul style="list-style-type: none"> ▪ Annual rapid total body MRI*
Colon cancer	<ul style="list-style-type: none"> ▪ Biennial colonoscopies beginning at age 40y, or 10y before the earliest known colon cancer in the family
Melanoma	<ul style="list-style-type: none"> ▪ Annual dermatology examination
Leukemia/Lymphoma	<ul style="list-style-type: none"> ▪ CBC profile/LDH/ESR every 3-4 mths
Intra-abdominal tumor (eg. Sarcoma)	<ul style="list-style-type: none"> ▪ Annual abdominal ultrasound
Regular evaluation with family physician with close attention to any medical concerns or complaints	

- Refer to www.ACRIN.org for imaging specs