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Erratum

ERRATUM: Recommendations for the Use of Next-Generation Sequencing and the Molecular Tumor Board for Patients with Advanced Cancer: A Report from KSMO and KCSG Precision Medicine Networking Group

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For the data represented in Table 2, we have corrected the level of evidence of K-CAT level 2 and 3. As the table shown, prospective phase I/II trials required for K-CAT level 2 include clinical trials across tumor types, such as basket trials. For the clinical benefit of specific cancer types, expert consensus is needed. K-CAT level 3A requires a retrospective study or case series with potential clinical benefit in s specific tumor types. K-CAT level 3B is revised from a retrospective study as clinical studies show potential clinical benefits in other indications. The corrected version of the table is below.

Table 2. KPMNG scale of clinical actionability of molecular target (K-CAT)

Level	Clinical implication	Required level of evidence
1	Treatment should be considered standard of care	MFDS, FDA, EMA or equivalent-approved drug OR
		Prospective, randomized, phase III trials showing the benefit of
		survival endpoints
2	Treatment would be considered	Prospective phase I/II trials show clinical benefit ^{a)}
3	Clinical trials to be discussed with patients	A: Retrospective study or case series show potential clinical
		benefit in a specific tumor type
		B: Clinical studies show potential clinical benefit in other indications
4	Preclinical data only, lack of clinical data	Preclinical evidence suggests the potential benefit
G	Suspicious germline variant on tumor tissue NGS	Suggestive actionable germline variant on tumor tissue testing
R	Predictive biomarker of resistance	FDA-recognized predictive biomarker of resistance

EMA, European Medicines Agency; FDA, U.S. Food and Drug Administration; K-CAT, KPMNG scale of Clinical Actionability of molecular Targets; KPMNG, Korean Precision Medicine Networking Group; MFDS, Ministry of Food and Drug Safety; NGS, next-generation sequencing. ^{a)}Prospective phase I/II trials supporting level 2 targets include clinical trials across tumor types such as basket trials. In this case, the clinical benefit needs to be judged by expert consensus.

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