Newly Diagnosed Acute Myeloid Leukemia					
PI	**CRC**	**Protocol #/Title**	**Mechanism**	**Primary In/Ex Criteria**	**Status**
O'Brien	An	UCI 17-114: A Randomized (1:1), Double-Blind, Multi-Center, Placebo Controlled Study Evaluating Intensive Chemotherapy With or Without Glasdegib (PF-04449913) or Azacitidine (AZA) With or Without Glasdegib in Patients with Previously Untreated Acute Myeloid	Sonic hedgehog pathway inhibitor	Subjects with untreated AML QTc interval < or = 470 msec using the Fridericia correction	Open to accrual
Jeyakumar	An	UCI 16-100: A Phase II/III Multicenter, Open-label, Three-Arm, Two-Stage Randomized Study of ASP2215 (Gilteritinib), Combination of ASP2215 Plus Azacitidine and Azacitidine Alone in the Treatment of Newly Diagnosed Acute Myeloid Leukemia with FLT3 Mutation	FLT3 inhibitor	Subjects with untreated AML and is positive for FLT3 mutation (ITD or TKD [D835/I836] mutation) in bone marrow or whole blood as determined by central laboratory. Must be ineligible for intensive induction chemotherapy QTc interval < or = 450 msec using the Fridericia correction Must NOT require treatment with concomitant drugs that are strong inducers of CYP3A	Open to accrual
Relapsed/Refractory Acute Myeloid Leukemia					
PI	**CRC**	**Protocol #/Title**	**Mechanism**	**Primary In/Ex Criteria**	**Status**
Jeyakumar	Blake	UCI 16-13: A Phase I Dose Escalation with Two Disease Specific Expansions, Multicenter, Open-label, Safety, Pharmacokinetic and Pharmacodynamic Study of APTO-253 in Patients with Relapsed or Refractory Hematologic Malignancies	MYC inhibitor	Acute myelogenous leukemia: Patients with any subtype of refractory or relapsed AML are eligible as are patients with AML who have relapsed after a stem cell transplant unless they have active graft versus host disease (GVHD) requiring systemic immunosuppressive therapy.	Pending activation
Jeyakumar	An	UCI 18-09: A Phase 1b Study of Venetoclax and Alvocidib in Patients with Relapsed/Refractory Acute Myeloid Leukemia	BCL-2-selective (BCL-XL-sparing) inhibitor	Relapsed/refractory AML by World Health Organization criteria excluding acute promyelocytic leukemia (APL)-M3	Open to accrual
Jeyakumar	Blake	UCI 17-02: A Phase 1 Study Evaluating the Safety and Pharmacokinetics of ABBV-744 in Subjects with Metastatic Castrate Resistant Prostate Cancer (CRPC) and Relapsed/Refractory Acute Myeloid Leukemia	BET inhibitor	Relapsed subjects should not be in the first relapse period following a remission period of > 12 months, nor be eligible for standard therapies Refractory subjects should have failed to achieve a CR after ≥ 2 cycles of induction chemotherapy or at least 4 cycles of a hypomethylating agent	Open to accrual
O'Brien	Blake	UCI 17-19: A Phase I, Open-Label, Multicentre Study to Assess the Safety, Tolerability, Pharmacokinetics and Preliminary Antitumor Activity of Ascending Doses of AZD5991 in Subjects with Relapsed or Refractory Haematologic Malignancies	MCL-1 inhibitor	Must have received at least 2 prior lines of therapy Recurrence of disease after response to prior line(s) of therapy Or progressive disease after completion of the treatment regimen preceding entry into the study There are no treatment options available known to provide clinical benefit	Open to accrual

Newly Diagnosed Acute Lymphoblastic Leukemia					
PI	**CRC**	**Protocol #/Title**	**Mechanism**	**Primary In/Ex Criteria**	**Status**
Jeyakumar	Blake	E1910: A Phase III Randomized Trial of Blinatumomab for Newly Diagnosed BCR-ABL-negative B lineage Acute Lymphoblastic Leukemia in Adults	bispecific T-cell engager (BiTE) which binds to CD19 expressed on B-cells and CD3 expressed on T-cells	Diagnostic bone marrow and/or peripheral blood specimens must be submitted for immunophenotyping and selected molecular testing, and the establishment of BCR/ABL status. New diagnosis of B lineage ALL must be made upon bone marrow or peripheral blood immunophenotyping. Age ≥ 30 years and ≤ 70 years	Open to accrual
Jeyakumar	Blake	A041501: A Phase III Trial to Evaluate the Efficacy of the Addition of Inotuzumab Ozogamicin to Frontline Therapy in Young Adults with Newly Diagnosed Precursor B-Cell ALL	Conjugated Anti-CD22 Monoclonal Antibody	Newly diagnosed patients with CD-22 positive B-cell acute lymphoblastic leukemia Submission of bone marrow aspirate for LDA assay is mandatory prior to registration for stratification NO prior therapy for ALL except for limited treatment NO BCR-ABL fusion transcript determined by FISH or RT-PCR or t(9;22)(q34;q11) by cytogenetics Age ≥ 18 years and < 40 years	Open to accrual
Relapsed/Refractory Acute Lymphoblastic Leukemia					
PI	**CRC**	**Protocol #/Title**	**Mechanism**	**Primary In/Ex Criteria**	**Status**
Jeyakumar	Blake	UCI 14-95: A Phase I/II Study of the Blinatumomab in Combination with the PD-1 Inhibitor Pembrolizumab (MK-3475) for the Treatment of Adults with Relapsed or Refractory B-Lineage Acute Lymphoblastic Leukemia	bispecific T-cell engager (BiTE) which binds to CD19 expressed on B-cells and CD3 expressed on T-cells AND PD-1 inhibitor	R/R CD19-positive B-lineage acute lymphoblastic leukemia having received at least 1 prior line of therapy Philadelphia chromosome/BCR-ABL1-positive B-lineage ALL must have failed at least 1 2nd or 3rd generation TKI or be intolerant to TKIs Greater than 50% lymphoblasts on screening bone marrow aspirate or biopsy	Open to accrual
O'Brien	Blake	UCI 15-58: A Phase I/II 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)	Anti-CD19 CAR T cell	R/R B-precursor ALL defined as one of the following: - Primary refractory disease - First relapse if first remission ≤ 12 months - R/R disease after two or more lines of systemic therapy - R/R disease after allogeneic transplant provided subject is at least 100 days from stem cell transplant at the time of enrollment and off of immunosuppressive medications for at least 4 weeks prior to enrollment Morphological disease in the bone marrow (> 5% blasts)	Suspended

Blake x456-3476
Michelle x509-2414
An x509-2369

O'Brien	Blake	UCI 17-19: A Phase I, Open-Label, Multicentre Study to Assess the Safety, Tolerability, Pharmacokinetics and Preliminary Antitumor Activity of Ascending Doses of AZD5991 in Subjects with Relapsed or Refractory Haematologic Malignancies	MCL-1 inhibitor	Must have received at least 2 prior lines of therapy Recurrence of disease after response to prior line(s) of therapy Or progressive disease after completion of the treatment regimen preceding entry into the study Presence of superficial lymphadenopathy for the lymph node biopsy (applies only to CLL, lymphoma and ALL) There are no treatment options available known to provide clinical benefit	Open to accrual
Relapsed/Refractory Chronic Lymphocytic Leukemia					
PI	**CRC**	**Protocol #/Title**	**Mechanism**	**Primary In/Ex Criteria**	**Status**
O'Brien	Blake	UCI 16-95: A Phase 1b/2 Dose-Escalation and Cohort-Expansion Study of a Non-Covalent, Reversible Bruton's Tyrosine Kinase Inhibitor, SNS 062, in Patients With B-Lymphoid Malignancies	TKI inhibitor	Histologically confirmed malignancy with relapsed/refractory disease after ≥2 lines of standard systemic therapy including prior BTK inhibitor therapy Availability of a peripheral blood sample or a bone marrow aspirate or a lymph node biopsy obtained during the screening period for evaluation of predictive/prognostic disease parameters and to determine if there is a functional BTK C481 mutation (ie BTK C481S) or a resistance or gain of function mutation(s) (ie, PLCγ2 R665W)	Open to accrual
O'Brien	Blake	UCI 15-18: An Open-Label, Multi-Center Phase 1 Study to Investigate the Safety and Tolerability of REGN1979, an Anti-CD20 x Anti-CD3 Bispecific Monoclonal Antibody, in Patients with CD20+ B-Cell Malignancies Previously Treated with CD20-Directed Antibody	anti-CD20 x anti-CD3 bispecific antibody	Have documented CD20+ B-cell malignancy, with active disease not responsive to prior therapy, for whom no standard of care options exists, and for whom treatment with an anti-CD20 antibody may be appropriate Patients with CLL are not required to have received prior treatment with an anti-CD20 antibody therapy, provided the patient has failed either a BTK inhibitor or PI3K inhibitor Patients with CLL must have white blood cell (WBC) ≤200 x 109/L	Open to accrual
O'Brien	Blake	UCI 17-19: A Phase I, Open-Label, Multicentre Study to Assess the Safety, Tolerability, Pharmacokinetics and Preliminary Antitumor Activity of Ascending Doses of AZD5991 in Subjects with Relapsed or Refractory Haematologic Malignancies	MCL-1 inhibitor	Must have received at least 2 prior lines of therapy Recurrence of disease after response to prior line(s) of therapy Or progressive disease after completion of the treatment regimen preceding entry into the study Presence of superficial lymphadenopathy for the lymph node biopsy (applies only to CLL, lymphoma and ALL) There are no treatment options available known to provide clinical benefit	Open to accrual

Diffuse Large B-Cell Lymphoma					
PI	**CRC**	**Protocol #/Title**	**Mechanism**	**Primary In/Ex Criteria**	**Status**
Pinter-Brown	Blake	UCI 16-46: A Phase I dose-ranging study to investigate the safety, tolerability and pharmacokinetics of MRG-106 following local intratumoral, subcutaneous, and intravenous administration in subjects with various lymphomas and leukemias	an oligonucleotide inhibitor of microRNA miR-155-5p	Intolerant, R/R, biopsy-proven DLBCL, including transformed disease Subject must have been previously treated with at least two prior therapies for DLBCL including with any anti-CD20 monoclonal antibody and chemotherapy with curative intent Ineligible for hematopoietic stem cell transplant, OR have failed transplant and must be at least 4 months post-transplant	Open to accrual
O'Brien	Blake	UCI 16-95: A Phase 1b/2 Dose-Escalation and Cohort-Expansion Study of a Non-Covalent, Reversible Bruton's Tyrosine Kinase Inhibitor, SNS 062, in Patients With B-Lymphoid Malignancies	kinase inhibitor	Histologically confirmed malignancy with relapsed/refractory disease after ≥2 lines of standard systemic therapy including prior BTK inhibitor therapy Availability of a peripheral blood sample or a bone marrow aspirate or a lymph node biopsy obtained during the screening period for evaluation of predictive/prognostic disease parameters and to determine if there is a functional BTK C481 mutation (ie BTK C481S) or a resistance or gain of function mutation(s) (ie, PLCγ2 R665W)	Open to accrual
O'Brien	Blake	UCI 17-19: A Phase I, Open-Label, Multicentre Study to Assess the Safety, Tolerability, Pharmacokinetics and Preliminary Antitumor Activity of Ascending Doses of AZD5991 in Subjects with Relapsed or Refractory Haematologic Malignancies	MCL-1 inhibitor	Must have received at least 2 prior lines of therapy Recurrence of disease after response to prior line(s) of therapy Or progressive disease after completion of the treatment regimen preceding entry into the study There are no treatment options available known to provide clinical benefit	Open to accrual
Brem	Michelle	UCI 17-47: A Phase Ib/II Open-Label, Dose Escalation and Expansion Study of Orally Administered VRx-3996 and Valganciclovir in Subjects with Epstein-Barr Virus-Associated Lymphoid Malignancies	a selective HDAC Class I inhibitor	R/R pathologically confirmed EBV+ lymphoid malignancy or lymphoproliferative disease regardless of histologic subtype including: 1. EBV+ post-transplant lymphoproliferative disease after allogeneic hematopoietic cell transplant or solid organ transplant 2. EBV-associated lymphoproliferative disorders (LPD) associated with acquired immunodeficiency including HIV-positive meeting certain criteria Absence of available therapy with reasonable likelihood of cure or significant clinical benefit	Open to accrual
O'Brien	Blake	UCI 15-18: An Open-Label, Multi-Center Phase 1 Study to Investigate the Safety and Tolerability of REGN1979, an Anti-CD20 x Anti-CD3 Bispecific Monoclonal Antibody, in Patients with CD20+ B-Cell Malignancies Previously Treated with CD20-Directed Antibody	anti-CD20 x anti-CD3 bispecific antibody	Have documented CD20+ B-cell malignancy, with active disease not responsive to prior therapy, for whom no standard of care options exists, and for whom treatment with an anti-CD20 antibody may be appropriate Patients with NHL must have had prior treatment with an anti-CD20 antibody therapy Measurable disease	Open to accrual

Brem	Michelle	UCI 18-41: A Phase IIa Open-label Study to Investigate Safety and Tolerability (including the MTD), Efficacy, Pharmacokinetics, Pharmacodynamics and Immunogenicity of MT-3724 in Combination with Gemcitabine and Oxaliplatin in Subjects with Relapsed or Refractory CD20-Positive B-Cell Non-Hodgkin Lymphoma	a direct-kill immunotoxin directed against CD20	R/R CD20-positive B-Cell NHL that, in the investigator's opinion, could benefit from MT-3724+GEMOX therapy NHL NHL histology must be determined at any time after the most recent relapse by biopsy (FNA not acceptable) Have received, is inelgible for or refused all available approved therapies for NHL.	Open to accrual
Follicular Lymphoma					
PI	**CRC**	**Protocol #/Title**	**Mechanism**	**Primary In/Ex Criteria**	**Status**
O'Brien	Blake	UCI 16-95: A Phase 1b/2 Dose-Escalation and Cohort-Expansion Study of a Non-Covalent, Reversible Bruton's Tyrosine Kinase Inhibitor, SNS 062, in Patients With B-Lymphoid Malignancies	kinase inhibitor	Histologically confirmed malignancy with relapsed/refractory disease after ≥2 lines of standard systemic therapy including prior BTK inhibitor therapy Availability of a peripheral blood sample or a bone marrow aspirate or a lymph node biopsy obtained during the screening period for evaluation of predictive/prognostic disease parameters and to determine if there is a functional BTK C481 mutation (ie BTK C481S) or a resistance or gain of function mutation(s) (ie, PLCγ2 R665W)	Open to accrual
Brem	Michelle	UCI 17-47: A Phase Ib/II Open-Label, Dose Escalation and Expansion Study of Orally Administered VRx-3996 and Valganciclovir in Subjects with Epstein-Barr Virus-Associated Lymphoid Malignancies	a selective HDAC Class I inhibitor	R/R pathologically confirmed EBV+ lymphoid malignancy or lymphoproliferative disease regardless of histologic subtype Absence of available therapy with reasonable likelihood of cure or significant clinical benefit	Open to accrual
O'Brien	Blake	UCI 15-18: An Open-Label, Multi-Center Phase 1 Study to Investigate the Safety and Tolerability of REGN1979, an Anti-CD20 x Anti-CD3 Bispecific Monoclonal Antibody, in Patients with CD20+ B-Cell Malignancies Previously Treated with CD20-Directed Antibody	anti-CD20 x anti-CD3 bispecific antibody	Have documented CD20+ B-cell malignancy, with active disease not responsive to prior therapy, for whom no standard of care options exists, and for whom treatment with an anti-CD20 antibody may be appropriate Patients with NHL must have had prior treatment with an anti-CD20 antibody therapy Measurable disease	Open to accrual
O'Brien	Blake	UCI 17-19: A Phase I, Open-Label, Multicentre Study to Assess the Safety, Tolerability, Pharmacokinetics and Preliminary Antitumor Activity of Ascending Doses of AZD5991 in Subjects with Relapsed or Refractory Haematologic Malignancies	MCL-1 inhibitor	Must have received at least 2 prior lines of therapy Recurrence of disease after response to prior line(s) of therapy Or progressive disease after completion of the treatment regimen preceding entry into the study There are no treatment options available known to provide clinical benefit	Open to accrual

Brem	Michelle	UCI 18-41: A Phase IIa Open-label Study to Investigate Safety and Tolerability (including the MTD), Efficacy, Pharmacokinetics, Pharmacodynamics and Immunogenicity of MT-3724 in Combination with Gemcitabine and Oxaliplatin in Subjects with Relapsed or Refractory CD20-Positive B-Cell Non-Hodgkin Lymphoma	a direct-kill immunotoxin directed against CD20	R/R CD20-positive B-Cell NHL that, in the investigator's opinion, could benefit from MT-3724+GEMOX therapy NHL NHL histology must be determined at any time after the most recent relapse by biopsy (FNA not acceptable) Have received, is inelgible for or refused all available approved therapies for NHL.	Open to accrual

Marginal Zone Lymphoma					
PI	**CRC**	**Protocol #/Title**	**Mechanism**	**Primary In/Ex Criteria**	**Status**
O'Brien	Blake	UCI 17-19: A Phase I, Open-Label, Multicentre Study to Assess the Safety, Tolerability, Pharmacokinetics and Preliminary Antitumor Activity of Ascending Doses of AZD5991 in Subjects with Relapsed or Refractory Haematologic Malignancies	MCL-1 inhibitor	Must have received at least 2 prior lines of therapy Recurrence of disease after response to prior line(s) of therapy Or progressive disease after completion of the treatment regimen preceding entry into the study There are no treatment options available known to provide clinical benefit	Open to accrual
Brem	Michelle	UCI 17-47: A Phase Ib/II Open-Label, Dose Escalation and Expansion Study of Orally Administered VRx-3996 and Valganciclovir in Subjects with Epstein-Barr Virus-Associated Lymphoid Malignancies	a selective HDAC Class I inhibitor	R/R pathologically confirmed EBV+ lymphoid malignancy or lymphoproliferative disease regardless of histologic subtype Absence of available therapy with reasonable likelihood of cure or significant clinical benefit	Open to accrual
O'Brien	Blake	UCI 15-18: An Open-Label, Multi-Center Phase 1 Study to Investigate the Safety and Tolerability of REGN1979, an Anti-CD20 x Anti-CD3 Bispecific Monoclonal Antibody, in Patients with CD20+ B-Cell Malignancies Previously Treated with CD20-Directed Antibody	anti-CD20 x anti-CD3 bispecific antibody	Have documented CD20+ B-cell malignancy, with active disease not responsive to prior therapy, for whom no standard of care options exists, and for whom treatment with an anti-CD20 antibody may be appropriate Patients with NHL must have had prior treatment with an anti-CD20 antibody therapy Measurable disease	Open to accrual
Brem	Michelle	UCI 18-41: A Phase IIa Open-label Study to Investigate Safety and Tolerability (including the MTD), Efficacy, Pharmacokinetics, Pharmacodynamics and Immunogenicity of MT-3724 in Combination with Gemcitabine and Oxaliplatin in Subjects with Relapsed or Refractory CD20-Positive B-Cell Non-Hodgkin Lymphoma	a direct-kill immunotoxin directed against CD20	R/R CD20-positive B-Cell NHL that, in the investigator's opinion, could benefit from MT-3724+GEMOX therapy NHL NHL histology must be determined at any time after the most recent relapse by biopsy (FNA not acceptable) Have received, is inelgible for or refused all available approved therapies for NHL.	Open to accrual

Mantle Cell Lymphoma					
PI	**CRC**	**Protocol #/Title**	**Mechanism**	**Primary In/Ex Criteria**	**Status**
O'Brien	Blake	UCI 17-19: A Phase I, Open-Label, Multicentre Study to Assess the Safety, Tolerability, Pharmacokinetics and Preliminary Antitumor Activity of Ascending Doses of AZD5991 in Subjects with Relapsed or Refractory Haematologic Malignancies	MCL-1 inhibitor	Must have received at least 2 prior lines of therapy Recurrence of disease after response to prior line(s) of therapy Or progressive disease after completion of the treatment regimen preceding entry into the study There are no treatment options available known to provide clinical benefit	Open to accrual
O'Brien	Blake	UCI 16-95: A Phase 1b/2 Dose-Escalation and Cohort-Expansion Study of a Non-Covalent, Reversible Bruton's Tyrosine Kinase Inhibitor, SNS 062, in Patients With B-Lymphoid Malignancies	kinase inhibitor	Histologically confirmed malignancy with relapsed/refractory disease after ≥2 lines of standard systemic therapy including prior BTK inhibitor therapy Availability of a peripheral blood sample or a bone marrow aspirate or a lymph node biopsy obtained during the screening period for evaluation of predictive/prognostic disease parameters and to determine if there is a functional BTK C481 mutation (ie BTK C481S) or a resistance or gain of function mutation(s) (ie, PLCγ2 R665W)	Open to accrual
Brem	Michelle	UCI 17-47: A Phase Ib/II Open-Label, Dose Escalation and Expansion Study of Orally Administered VRx-3996 and Valganciclovir in Subjects with Epstein-Barr Virus-Associated Lymphoid Malignancies	a selective HDAC Class I inhibitor	R/R pathologically confirmed EBV+ lymphoid malignancy or lymphoproliferative disease regardless of histologic subtype Absence of available therapy with reasonable likelihood of cure or significant clinical benefit	Open to accrual
O'Brien	Blake	UCI 15-18: An Open-Label, Multi-Center Phase 1 Study to Investigate the Safety and Tolerability of REGN1979, an Anti-CD20 x Anti-CD3 Bispecific Monoclonal Antibody, in Patients with CD20+ B-Cell Malignancies Previously Treated with CD20-Directed Antibody	anti-CD20 x anti-CD3 bispecific antibody	Have documented CD20+ B-cell malignancy, with active disease not responsive to prior therapy, for whom no standard of care options exists, and for whom treatment with an anti-CD20 antibody may be appropriate Patients with NHL must have had prior treatment with an anti-CD20 antibody therapy Measurable disease	Open to accrual
Brem	Michelle	UCI 18-41: A Phase IIa Open-label Study to Investigate Safety and Tolerability (including the MTD), Efficacy, Pharmacokinetics, Pharmacodynamics and Immunogenicity of MT-3724 in Combination with Gemcitabine and Oxaliplatin in Subjects with Relapsed or Refractory CD20-Positive B-Cell Non-Hodgkin Lymphoma	a direct-kill immunotoxin directed against CD20	R/R CD20-positive B-Cell NHL that, in the investigator's opinion, could benefit from MT-3724+GEMOX therapy NHL NHL histology must be determined at any time after the most recent relapse by biopsy (FNA not acceptable) Have received, is inelgible for or refused all available approved therapies for NHL.	Open to accrual

Pinter-Brown	Michelle	UCI 17-70: A Phase 2b Randomized Study to Assess the Efficacy and Safety of the Combination of Ublituximab + TGR-1202 with or without Bendamustine and TGR-1202 alone in Patients with Previously Treated Non-Hodgkin's Lymphoma	recombinant chimeric monoclonal antibody against the CD20 antigen AND PI3K delta (δ) inhibitor	FL/SLL patients: R/R after ≥ 2 prior lines of systemic therapy. Patients must have received an anti-CD20 mAb and an alkylating agent; MZL patients: prior treatment with 1+ lines of therapy including at least one CD20-directed regimen with failure to achieve at least PR or PD after the most recent systemic regimen; MCL patients: prior treatment with 1+ lines of therapy including at least one BTK inhibitor (either ibrutinib or acalabrutinib) with failure to achieve at least PR or PD during, or within 6 months of discontinuing, prior BTK therapy Measurable disease	Open to accrual

Waldenstrom's Macroglobulinemia and other NHL subtypes					
PI	**CRC**	**Protocol #/Title**	**Mechanism**	**Primary In/Ex Criteria**	**Status**
O'Brien	Blake	UCI 17-19: A Phase I, Open-Label, Multicentre Study to Assess the Safety, Tolerability, Pharmacokinetics and Preliminary Antitumor Activity of Ascending Doses of AZD5991 in Subjects with Relapsed or Refractory Haematologic Malignancies	MCL-1 inhibitor	Must have received at least 2 prior lines of therapy Recurrence of disease after response to prior line(s) of therapy Or progressive disease after completion of the treatment regimen preceding entry into the study There are no treatment options available known to provide clinical benefit	Open to accrual
O'Brien	Blake	UCI 16-95: A Phase 1b/2 Dose-Escalation and Cohort-Expansion Study of a Non-Covalent, Reversible Bruton's Tyrosine Kinase Inhibitor, SNS 062, in Patients With B-Lymphoid Malignancies	kinase inhibitor	Histologically confirmed malignancy with relapsed/refractory disease after ≥2 lines of standard systemic therapy including prior BTK inhibitor therapy Availability of a peripheral blood sample or a bone marrow aspirate or a lymph node biopsy obtained during the screening period for evaluation of predictive/prognostic disease parameters and to determine if there is a functional BTK C481 mutation (ie BTK C481S) or a resistance or gain of function mutation(s) (ie, PLCγ2 R665W)	Open to accrual
Brem	Michelle	UCI 17-47: A Phase Ib/II Open-Label, Dose Escalation and Expansion Study of Orally Administered VRx-3996 and Valganciclovir in Subjects with Epstein-Barr Virus-Associated Lymphoid Malignancies	a selective HDAC Class I inhibitor	R/R pathologically confirmed EBV+ lymphoid malignancy or lymphoproliferative disease regardless of histologic subtype Absence of available therapy with reasonable likelihood of cure or significant clinical benefit	Open to accrual
Pinter-Brown	Michelle	UCI 17-70: A Phase 2b Randomized Study to Assess the Efficacy and Safety of the Combination of Ublituximab + TGR-1202 with or without Bendamustine and TGR-1202 alone in Patients with Previously Treated Non-Hodgkin's Lymphoma	recombinant chimeric monoclonal antibody against the CD20 antigen AND PI3K delta (δ) inhibitor	FL/SLL patients: R/R after ≥ 2 prior lines of systemic therapy. Patients must have received an anti-CD20 mAb and an alkylating agent; MZL patients: prior treatment with 1+ lines of therapy including at least one CD20-directed regimen with failure to achieve at least PR or PD after the most recent systemic regimen; MCL patients: prior treatment with 1+ lines of therapy including at least one BTK inhibitor (either ibrutinib or acalabrutinib) with failure to achieve at least PR or PD during, or within 6 months of discontinuing, prior BTK therapy Measurable disease	Open to accrual
O'Brien	Blake	UCI 15-18: An Open-Label, Multi-Center Phase 1 Study to Investigate the Safety and Tolerability of REGN1979, an Anti-CD20 x Anti-CD3 Bispecific Monoclonal Antibody, in Patients with CD20+ B-Cell Malignancies Previously Treated with CD20-Directed Antibody	anti-CD20 x anti-CD3 bispecific antibody	Have documented CD20+ B-cell malignancy, with active disease not responsive to prior therapy, for whom no standard of care options exists, and for whom treatment with an anti-CD20 antibody may be appropriate Patients with NHL must have had prior treatment with an anti-CD20 antibody therapy Measurable disease	Open to accrual

Brem	Michelle	UCI 18-41: A Phase IIa Open-label Study to Investigate Safety and Tolerability (including the MTD), Efficacy, Pharmacokinetics, Pharmacodynamics and Immunogenicity of MT-3724 in Combination with Gemcitabine and Oxaliplatin in Subjects with Relapsed or Refractory CD20-Positive B-Cell Non-Hodgkin Lymphoma	a direct-kill immunotoxin directed against CD20	R/R CD20-positive B-Cell NHL that, in the investigator's opinion, could benefit from MT-3724+GEMOX therapy NHL NHL histology must be determined at any time after the most recent relapse by biopsy (FNA not acceptable) Have received, is inelgible for or refused all available approved therapies for NHL.	Open to accrual
Cutaneous T-Cell Lymphoma					
PI	**CRC**	**Protocol #/Title**	**Mechanism**	**Primary In/Ex Criteria**	**Status**
Pinter-Brown	Blake	UCI 17-82: A Randomized, Double-Blind, Multi-Centre, Placebo-Controlled, Parallel-Arm Phase II Trial to Assess Safety, Efficacy and Pharmacokinetics of CD11301 0.03% and 0.06% Gel in the Treatment of Cutaneous T-Cell Lymphoma (CTCL), Stages IA, IB and IIA	immune response modifier	CTCL stage IA, IB, or IIA including documentation of a skin biopsy within the last 12 months with histological findings consistent with CTCL Have BSA involvement corresponding to stages IA, IB or IIA CTCL with at least three distinct lesions, including one 'distant' lesion on which no treatment will be applied to observe possible systemic effect.	Open to accrual
Pinter-Brown	Blake	UCI 18-39: A Phase II, Randomized, Open-label, Parallel-group, Active Comparator, Multi-center Study to Investigate the Efficacy and Safety of Cobomarsen (MRG-106) in Subjects with Cutaneous T-Cell Lymphoma (CTCL), Mycosis Fungoides (MF) Subtype	antagonist of miR-155-5p	Biopsy-proven CTCL, MF subtype, Clinical stage IB, II, or III Receipt of at least one prior therapy for CTCL NO Sézary syndrome or mycosis fungoides with B2 involvement	Open to accrual
Pinter-Brown	Blake	UCI 17-36: A Clinical Study to Demonstrate Safety and Efficacy of E7777 in Persistent or Recurrent Cutaneous T-Cell Lymphoma	IL-2 receptor	Histopathologic diagnosis of CTCL (MF or SS subtype), confirmed by skin biopsy, or lymph node, or blood assessment, of current disease CD25 assay-positive tumor Must have had prior therapy, any number of prior therapies allowed	Open to accrual
O'Brien	Blake	UCI 17-19: A Phase I, Open-Label, Multicentre Study to Assess the Safety, Tolerability, Pharmacokinetics and Preliminary Antitumor Activity of Ascending Doses of AZD5991 in Subjects with Relapsed or Refractory Haematologic Malignancies	MCL-1 inhibitor	Must have received at least 2 prior lines of therapy Recurrence of disease after response to prior line(s) of therapy Or progressive disease after completion of the treatment regimen preceding entry into the study There are no treatment options available known to provide clinical benefit	Open to accrual

Peripheral T-Cell Lymphoma					
PI	**CRC**	**Protocol #/Title**	**Mechanism**	**Primary In/Ex Criteria**	**Status**
Pinter-Brown	Blake	UCI 18-34: A Multi-Center, Phase II, Open-label, Parallel Cohort Study of Efficacy and Safety of Duvelisib in Patients with Relapsed or Refractory Peripheral T-cell Lymphoma (PTCL)	dual inhibitor of PI3K-δ,γ	Diagnosis of one of the following histologic subtypes of PTCL (PTCL-NOS, AITL, ALCL OR NKTL) Received at least 2 cycles of one prior regimen administered with curative intent Measurable disease as defined by IWG for PTCL	Pending activation
O'Brien	Blake	UCI 17-19: A Phase I, Open-Label, Multicentre Study to Assess the Safety, Tolerability, Pharmacokinetics and Preliminary Antitumor Activity of Ascending Doses of AZD5991 in Subjects with Relapsed or Refractory Haematologic Malignancies	MCL-1 inhibitor	Must have received at least 2 prior lines of therapy Recurrence of disease after response to prior line(s) of therapy Or progressive disease after completion of the treatment regimen preceding entry into the study There are no treatment options available known to provide clinical benefit	Open to accrual
Multiple Myeloma					
PI	**CRC**	**Protocol #/Title**	**Mechanism**	**Primary In/Ex Criteria**	**Status**
Brem	Michelle	E1A11: Randomized Phase III Trial of Bortezomib, LENalidomide and Dexamethasone (VRd) versus Carfilzomib, Lenalidomide and Dexamethasone (CRd) Followed by Limited or Indefinite DURation Lenalidomide MaintenANCE in Patients with Newly Diagnosed Symptomatic	proteasome inhibitor–IMiD combination	Newly Diagnoised symptomatic standard-risk multiple myeloma FISH should be from within 90 days of registration Must have measurable or evaluable disease Must have received no more than one cycle (4 weeks or less) of prior chemo and no more than 160mg of prior dexamethasone (or equivalent dose of prednisone) for treatment of symptomatic MM. They should not have been exposed to lenalidomide, bortezomib or carfilzomib for treatment of symptomatic myeloma.	Open to accrual
Brem	Michelle	UCI 14-96: A Phase I/II Study of PiC-D (Ixazomib in Combination with Pomalidomide, Clarithromycin and Dexamethasone) in Patients with Double Refractory Multiple Myeloma	proteasome inhibitor	Biopsy diagnosis of a multiple myeloma Must have measurable disease according to International Myeloma Working Group criteria Disease that has progressed after treatment with both bortezomib and lenalidomide (either sequentially or concurrent)	Suspended
O'Brien	Blake	UCI 17-19: A Phase I, Open-Label, Multicentre Study to Assess the Safety, Tolerability, Pharmacokinetics and Preliminary Antitumor Activity of Ascending Doses of AZD5991 in Subjects with Relapsed or Refractory Haematologic Malignancies	MCL-1 inhibitor	Must have received at least 2 prior lines of therapy Recurrence of disease after response to prior line(s) of therapy Or progressive disease after completion of the treatment regimen preceding entry into the study There are no treatment options available known to provide clinical benefit	Open to accrual

Myelodysplasia					
PI	**CRC**	**Protocol #/Title**	**Mechanism**	**Primary In/Ex Criteria**	**Status**
O'Brien	Blake	UCI 17-19: A Phase I, Open-Label, Multicentre Study to Assess the Safety, Tolerability, Pharmacokinetics and Preliminary Antitumor Activity of Ascending Doses of AZD5991 in Subjects with Relapsed or Refractory Haematologic Malignancies	MCL-1 inhibitor	Must have received at least 2 prior lines of therapy Recurrence of disease after response to prior line(s) of therapy Or progressive disease after completion of the treatment regimen preceding entry into the study There are no treatment options available known to provide clinical benefit	Open to accrual
Jeyakumar	Blake	UCI 16-13: A Phase I Dose Escalation with Two Disease Specific Expansions, Multicenter, Open-label, Safety, Pharmacokinetic and Pharmacodynamic Study of APTO-253 in Patients with Relapsed or Refractory Hematologic Malignancies	MYC inhibitor	High-risk myelodysplasia (MDS): Patients must have a score of > 4.5 on the Revised International Prognostic Scoring System (IPSS-R) for whom all standard therapy options have failed or which are considered inappropriate	Pending activation
Myeloproliferative Neoplasm					
PI	**CRC**	**Protocol #/Title**	**Mechanism**	**Primary In/Ex Criteria**	**Status**
Fleischman	Michelle	UCI 17-31: An Open-Label Phase II Study of Itacitinib (INCB039110) in Combination with Low Dose Ruxolitinib or Itacitinib Alone Following Ruxolitinib in Subjects with Myelofibrosis		Confirmed diagnosis of PMF, PPV-MF, or PET-MF according to revised WHO 2016 criteria Must have palpable spleen of ≥ 5 cm below the left subcostal margin Cohort A: Receiving ruxolitinib dose of less than 20 mg daily with no dose increase or no dose modification in the last 8 weeks before screening visit. Cohort B: Must have had initial reduction in spleen on ruxolitinib treatment followed by documented evidence of progression in spleen length or volume OR discontinued ruxolitinib for hematologic toxicities, after the initial reduction in spleen length or volume.	Open to accrual
Supportive Care					
PI	**CRC**	**Protocol #/Title**	**Mechanism**	**Primary In/Ex Criteria**	**Status**
Fleischman	TBN	UCI 18-30: Nutritional Intervention Among Myeloproliferative Neoplasms: Feasibility Phase (The NUTRIENT Trial)			Pending activation
Correlative					
PI	**CRC**	**Protocol #/Title**	**Mechanism**	**Primary In/Ex Criteria**	**Status**
Fleischman		UCI 14-03: Role of Inflammation in the Pathogenesis of Myeloproliferative Neoplasm			Open to accrual
Nelson	Christopher Haymond	UCI 16-01: Pathway Analyses for Individualized Network Therapeutics for Cancer (PAINT Cancer)			Open to accrual
Brem	Chang	UCI 16-70: Evaluation of Mitochondrial Priming in T Cell Lymphomas			Open to accrual
Fruman		UCI 15-65: Effect of candidate blood cancer therapies on normal human lymphocytes			Pending activation