real time. METHOD: We assessed the satisfaction of the new method of AE recording amongst pediatric hematology oncology physicians and staff in a large academic institution during the COVID pandemic through a REDCap survey. The survey assessed the time, effort, perceived efficacy and overall acceptability of the paper-based and electronic methods of AE documentation. RESULTS: Seventy-one staff members were surveyed. Fifty (65%) responded, including 6 participants who were not involved in the AE reporting process and did not complete the survey. Of the remaining 44 participants, 43 (98%) preferred an electronic documentation method. Secondary results and further analysis will be presented at the meeting. CONCLUSIONS: The COVID pandemic has changed how CRC report AEs and electronic documentation.

OTHR-15. PAPILLARY TUMOR OF THE PINEAL REGION: CASE SERIES OF THIS RARE PEDIATRIC ENTITY

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BACKGROUND: The optimal management of pediatric papillary tumors of the pineal region (PTPR) is not yet established. We report three cases, as an addition to the existing literature. PATIENT 1: A 22-monthold female presented with progressive ataxia and incoordination, found to have an enhancing solid and cystic mass centered within the pineal region, with associated obstructive hydrocephalus. Tumor biopsy revealed PTPR, prompting a subsequent subtotal resection. No adjuvant therapy was recommended. Patient has remained without evidence of disease progression for 92 months, since resection. PATIENT 2: An 8-year-old female presented with progressive headaches and new-onset generalized seizures, found to have a heterogeneously enhancing pineal lesion, with associated obstructive hydrocephalus. Following a biopsy demonstrating PTPR, patient underwent subtotal resection of the tumor. A second resection was completed 6 months later followed by focal irradiation. Targeted next-generation sequencing (NGS) demonstrated two non-targetable genomic alterations (CREBBP and MLL2). The patient remains without tumor recurrence, now 37 months, since irradiation. PATIENT 3: A 7-year-old male with Autism spectrum disorder presented with new-onset focal complex seizures. A brain MRI showed a heterogeneously enhancing lesion in the region of the pineal gland, with associated obstructive hydrocephalus. A tumor biopsy revealed PTPR, prompting a subsequent gross total resection (GTR). NGS demonstrated no reportable genomic alterations. Methylome profiling classified the tumor as PTPR, group B. Post-operative imaging with no residual tumor and he has remained without tumor progression, now eight months, since resection. CONCLUSION: PTPR are extremely rare in the pediatric setting, and were initially introduced in the WHO 2007 classification as grade II-III pineal gland tumors with distinct morphologic and immunohistochemical features. GTR is the mainstay of treatment but post-surgical management remains controversial. The clinical course is characterized by frequent local recurrence, hence, adjuvant chemotherapy and/or irradiation may be necessary upon disease progression.

OTHR-16. NUTRITIONAL SCREENING OF U.S. PEDIATRIC CENTRAL NERVOUS SYSTEM TUMOR SURVIVORS Jacqueline Soja, Rebekah Wilson, Alexandra Yunker, Rahela Aziz-Bose, Erin Gordon, Christina Dieli-Conwright, <u>Tabitha Cooney</u>; Dana Farber Cancer Institute, Boston, MA, USA

INTRODUCTION: Adult survivors of pediatric central nervous system (CNS) tumors are at the highest risk for morbidity and late mortality among all childhood cancers – owed in part to chronic health condition burden, which intersects with environmental and lifestyle factors. Their weight epidemiology has not been previously characterized. METHODS: An institutional, cross-sectional study was carried out amongst young adults ages 18-39 years, previously treated for pediatric CNS tumors and seen in our specialty survivorship clinic from January 2016 to December 2021. Sociodemographic, clinical, and treatment information was extracted from medical records and summarized by descriptive statistics. Anthropometric information extracted from clinical visit records was used to calculate body mass index (BMI) and weight status category according to CDC guidelines. RESULTS: We identified 200 survivors, 47% male and 53% female.

Median age was 26 years (range 18-39); patients were median 16.5 years (range 1.5-34.2) from initial diagnosis. Most common primary diagnoses were low grade-glioma (51.0%) and embryonal tumor (20.5%.) One hundred and five (52.5%) survivors had received prior cranial radiation; 81 (40.5%) had an endocrinologic disorder at time of visit. Amongst the entire cohort, 39% were healthy weight, 5% were underweight, 27% overweight, 21% obese, and 8% severely obese. CONCLUSION: The majority of young adult survivors seen in our clinic were not healthy weight by BMI definition. The distribution of BMI groups appears comparable to contemporary studies of the general young adult U.S. population. For those with decreased muscle mass, a previously recognized issue in pediatric CNS tumor survivors, BMI may underestimate body fat. By abstract presentation, univariable analyses will be performed using the Fisher's exact test or Wilcoxon rank sum test to assess for undernutrition and overnutrition risk factors. Our refined understanding of the nutritional epidemiology in this population will allow for more strategic diet and exercise interventions.

OTHR-17. GUIDANCE FOR PROVIDING FAMILIES WITH AUTOPSY RESEARCH RESULTS

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BACKGROUND: The Legacy Program is a project where research autopsies are performed on the brain of Neuro-Oncology patients. There continues to be growing consensus that investigators should offer their study participants results once the research project has concluded. Several organizations like the Children's Oncology Group have established Return of Results programs however, returning research results from autopsy samples is not a common practice. Families have voiced the importance of autopsy donation and want results from that donation. To them, this donation creates a legacy for their loved one and provides hope that their contribution to research will impact the life of future patients. As researchers, this project provides a novel platform where patients and their families can directly influence new research endeavors. OBJECTIVES: We organized a retreat to disseminate research findings to the families of patients who have donated tissue. In addition to the family members, the entire research team and clinical staff were invited. Our primary aims were to evaluate participant satisfaction and obtain feedback that would be utilized for future program planning. METHODS: At the end of the retreat a de-identified, open-ended questionnaire was handed out. Six were returned and evaluated. RESULTS: All participants were in favor of the format and content that was presented and requested an invitation to future retreats. Participant feedback included how to become more involved with the Legacy Program and the request for the creation of a social media group where families could continue to connect and provide support to each other CONCLU-SIONS: Our study confirmed the importance of returning autopsy results. The retreat provided needed support to the participating families. During the retreat, researchers were able to hear direct feedback from their findings and the families voiced their goals for future research. This information was invaluable and helped shape our program.

OTHR-18. A PILOT STUDY EVALUATING THE ACCESS, UTILIZATION, AND PATIENT SATISFACTION OF BASIC SKIN CARE PRODUCTS AMONG PEDIATRIC PATIENTS PRESCRIBED MEDICATIONS THAT TARGET THE MITOGEN-ACTIVATED PROTEIN KINASE PATHWAY

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BACKGROUND: The mitogen-activated protein kinase (MAPK) pathway is dysregulated in approximately one third of all malignancies. Agents targeting this pathway are known to cause frequent and significant skin toxicity. METHODS: Patients <21 years of age prescribed any medication targeting the MAPK pathway within the past six months were eligible for this prospective, pilot study. Each participant received a complimentary skin care kit consisting of basic skin and oral care items. At baseline and three months after enrollment, participants completed surveys assessing demographics, skin symptoms, use of the products, and quality of life (QOL; Dermatology Life Quality Index and Child Dermatology Life Quality Index, CDLQI). OBJECTIVES: Primary aims were evaluating utilization of the kit and measuring patient satisfaction of the items included. Secondary aims included determining skin-related QOL and assessing adherence to MAPK targeted therapy. RESULTS: Eleven participants (seven male, four female; median age 13 years, range 4-21 years) have enrolled to date (enrollment goal of 30). Participant therapies included MEK inhibitors (nine), a pan-