

LFIR # 2285

**1. Project Title** FIU- Functional Drug Testing for Individualized Cancer Treatments

2. Senate Sponsor Ana Maria Rodriguez

**3. Date of Request** 01/18/2022

#### 4. Project/Program Description

To establish the first Clinical Laboratory Improvement Amendments (C.L.I.A) certified laboratory in the State of Florida for functional drug sensitivity and resistance testing on patient's tumor cells against FDA-approved drugs. The program aims to guide treatment decisions & improve outcome for pediatric & adult cancer patients by matching that patient with the most effective and least toxic therapies available. The treating physician can adjust treatment based on personalized ex vivo results.

5. State Agency to receive requested funds

Board of Governors

State Agency contacted? Yes

#### 6. Amount of the Nonrecurring Request for Fiscal Year 2022-2023

Type of Funding	Amount
Operations	987,610
Fixed Capital Outlay	0
Total State Funds Requested	987,610

7. Total Project Cost for Fiscal Year 2022-2023 (including matching funds available for this project)

Type of Funding	Amount	Percentage	
Total State Funds Requested (from question #6)	987,610	100%	
Matching Funds			
Federal	0	0%	
State (excluding the amount of this request)	0	0%	
Local	0	0%	
Other	0	0%	
Total Project Costs for Fiscal Year 2022-2023	987,610	100%	

#### 8. Has this project previously received state funding? No

Fiscal Year	Amo	ount	Specific	Vetoed
(уууу-уу)	Recurring	Nonrecurring	Appropriation #	

#### 9. Is future funding likely to be requested?

a. If yes, indicate nonrecurring amount per year.

#### b. Describe the source of funding that can be used in lieu of state funding.

10. Has the entity requesting this project received any federal assistance related to the COVID-19 pandemic?

No

No



#### If yes, indicate the amount of funds received and what the funds were used for.

#### 11. Details on how the requested state funds will be expended

Spending Category	Description	Amount		
Administrative Costs:				
Executive Director/Project Head Salary and Benefits		0		
Other Salary and Benefits		0		
Expense/Equipment/Travel/Supplies/ Other	To purchase an Automated Robotic Liquid Handling Workstation/Instrumentation from Beckman Coulter (Echo 650 Screening2 plus Omic2 system) designed for high-throughput drug screening.	659,507		
Consultants/Contracted Services/Study		0		
Operational Costs: Other				
Salary and Benefits	To cover salary and fringe benefits (over 2 years) for one full-time Technologist that is Florida Board-certified in Clinical Laboratory.	257,079		
Expense/Equipment/Travel/Supplies/ Other	Service contract on the Robotic instrumentation/Workstation over two years.	71,024		
Consultants/Contracted Services/Study		0		
Fixed Capital Construction/Major Renovation:				
Construction/Renovation/Land/ Planning Engineering		0		
Total State Funds Requested (must equal total from question #6) 987,67				

#### 12. Program Performance

#### a. What specific purpose or goal will be achieved by the funds requested?

To establish the first Clinical Laboratory Improvement Amendments (C.L.I.A) certified laboratory in the State of Florida for functional drug sensitivity and resistance testing on patient's tumor cells against FDA-approved drugs. The program aims to guide treatment decisions & improve outcome for pediatric & adult cancer patients by matching that patient with the most effective and least toxic therapies available. The treating physician can adjust treatment based on personalized ex vivo results.

#### b. What activities and services will be provided to meet the intended purpose of these funds?

Drug sensitivity testing for individualized treatments in advanced cancer patients.

#### c. What direct services will be provided to citizens by the appropriation project?

Disappearance of disease- overall best response and progression-free survival

#### d. Who is the target population served by this project? How many individuals are expected to be served?

Persons with poor physical health. Thousands of individuals.

# e. What is the expected benefit or outcome of this project? What is the methodology by which this outcome will be measured?

Disappearance of disease

f. What are the suggested penalties that the contracting agency may consider in addition to its standard penalties for failing to meet deliverables or performance measures provided for the contract?



Return of funds to the State of Florida

13. The owners of the facility to receive, directly or indirectly, any fixed capital outlay funding. Include the relationship between the owners of the facility and the entity.

FIU is the owner of the facility



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### 14. Requestor Contact Information

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	c. E-mail Address	tguilart@fiu.edu				
	d. Phone Number	(305)348-	-9043	Ext.		
15.	15. Recipient Contact Information					
	a. Organization	Florida International University				
	b. Municipality and	d County Miami-Dade				
	c. Organization Type					
	□For Profit Entity					
	□Non Profit 501(c	1(c)(3)				
	□Non Profit 501(c	(c)(4)				
	□Local Entity					
	☑University or Co	llege				
	□Other (please sp	becify)				
	d. First Name	Diana		Last Name	Azzam	
	e. E-mail Address	dazzam@fiu.edu				
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16.	16. Lobbyist Contact Information					
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	b. Firm Name					
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