

Supplementary Table S1. Study representation of underserved communities.

Cancer type(s)/subtype(s)/stage(s)/condition	Solid tumors
Considerations related to:	
Sex	The world prevalence of cancer is 52% in males versus 48% in females (1). Solid tumors encompass a board variety of cancer types which can vary in prevalence between males and females. Generally, some solid tumors may have a higher prevalence in one gender due to biological differences, for example, breast cancer is more prevalent in women and prostate and lung cancer have historically been more common in men (2).
Age	Age is a significant factor that can affect the development of solid tumors. In most cases, the risk of developing a malignancy increases with age (3), however, other biological and environmental factors can influence at what age a solid tumor may develop; the median age of cancer diagnosis in the US is 66 years (4). In the US, the median age of diagnosis is 66 years for melanoma, 63 years for breast cancer, and 70 years for pancreatic cancer (5).
Race/ethnicity	The incidence of solid tumors can vary among different racial and ethnic groups. For example, non-Hispanic White individuals have a higher incidence of melanoma compared to other racial groups because they are more likely to have lower levels of melanin (6), and liver cancer is higher in Asian and Black ethnic groups, but lower in people of mixed multiple ethnicities compared with White ethnic groups (7).
Geography	Cancer is the second leading cause of death globally (2). Some solid tumor types can have distinct geographical patterns. For example, skin cancer rates tend to be higher in regions with more sun exposure (8) and people with a higher level of education are less likely to die prematurely (<65 years old) from colorectal cancer than those with less education (9).
Other considerations	Genetic predispositions, environmental exposures (e.g., pollutants), access to healthcare, cultural factors, and socioeconomical factors can all be considered disparities in the development of solid tumors (9).
Overall study representativeness	This phase I study was conducted in a small number of patients ($n = 61$). An equal number of male and female participants from the US and Europe were recruited, and these patients had a wide variety of primary tumor types (including melanoma, squamous cell carcinoma, and breast cancer). This study recruited adult patients (≥ 18 years old) who met the study criteria and were able to give written informed consent; the median age of participants was 60 years, marginally below the typical US average age of 66 (10).

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