

Test Result Report

PATIENT INFORMATION		PHYSICIAN INFORMATION	
Patient: <First and LastName>		Physician: Dr. <First and LastName>	
Date of Birth: <Mon DD, YYYY>	Gender: <Gender>	Facility: <Ordering Facility Name>	
Tumor: <Tumor Type>	Specimen Type: <Sample Format>	Address: <Street Address, City, State, Postal Code>	
GS Accession No: BDXA#####-XXX	Date of Collection: <Mon DD, YYYY>	Country: <Country Code>	
Date Received: <Mon DD, YYYY>	Date Performed Reported: <Mon DD, YYYY>	Phone: <Phone Number>	Fax: <Fax Number>

GENESTRAT® GENOMIC TEST RESULTS

Test	Variant	Results
EGFR Sensitizing	Exon 19 ΔE746-A750	POSITIVE
	Exon 21 L858R	Negative
	Exon 18 G719A, G719C, G719S Exon 20 S768I Exon 21 L861Q	Negative
EGFR Resistance	Exon 20 T790M	Negative
ALK Fusions	EML4	Negative
ROS1 Fusions	CD74 SDC4 SLC34A2 EZR TPM3	Negative
RET Fusions	KIF5B CCDC6 TRIM33	Negative
KRAS Mutations	G12C	Negative
	G12D	Negative
	G12V	Negative
BRAF Mutation	V600E	Negative

INTERPRETATION OF RESULTS

EGFR | ALK | ROS1* | RET* | KRAS | BRAF

Positive:

Presence of 2 or more copies of the variant

Negative:

Presence of fewer than 2 copies of the variant

Quantity Not Sufficient (QNS):

Test performed, and results not definitive — due to lack of sufficient amount of nucleic acid. No bill will be submitted for this gene.

Redraw recommended

Test Not Performed (TNP)

* For a Positive Result, presence of 10 or more copies of the variant

* For a Negative Result, presence of fewer than 10 copies of the variant

Donald Joe Chaffin, M.D.
CAP Accredited CLIA Laboratory Director

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GENESTRAT® TREATMENT IMPLICATIONS

Available Mutations

EGFR Sensitizing

Exon 19 ΔE746-A750 | Exon 21 L858R

Exon 18 G719A, G719C, G719S | Exon 20 S768I | Exon 21 L861Q

EGFR Resistance

Exon 20 T790M

ALK Fusions

EML4

ROS1 Fusions

CD74 | SDC4 | SLC34A2 | EZR | TPM3

RET Fusions

KIF5B | CCDC6 | TRIM33

KRAS Mutations

G12D | G12V

G12C

BRAF Mutation

V600E

Treatment Implications for Non-Small Cell Lung Cancer¹⁻²⁰

May benefit from treatment with osimertinib, afatinib, erlotinib, gefitinib, dacomitinib, erlotinib + ramucirumab, or erlotinib + bevacizumab

May benefit from treatment with afatinib

May benefit from treatment with osimertinib if previously treated with 1st or 2nd generation EGFR-TKIs

May benefit from treatment with alectinib, brigatinib, ceritinib, crizotinib or lorlatinib

May benefit from treatment with crizotinib, ceritinib, entrectinib, or lorlatinib

May benefit from treatment with selpercatinib, pralsetinib, cabozantinib or vandetinib

KRAS mutations are associated with poorer prognosis

May benefit from treatment with sotorasib

May benefit from dabrafenib + trametinib or vemurafenib

GENESTRAT® ANALYSIS DESCRIPTION:

GeneStrat® genomic testing is a laboratory test service that determines the presence of somatic genetic variants in circulating nucleic acids (DNA and RNA) from the plasma of patients with lung cancer using ddPCR (Droplet Digital™ Polymerase Chain Reaction)^{22,23}. In the ddPCR process, a patient sample is dispersed in an emulsion so that individual nucleic acid molecules are isolated. After amplification, nucleic acids are quantified by counting the emulsion that contains PCR end-product, or positive reactions²³. GeneStrat is a genomic approach to detection of insertion, deletions and point mutations²², as well as fusion products^{23,24,25,26,27}.

GeneStrat solely reports the presence or absence of certain, limited genomic alterations which may be useful for physicians when considering different therapeutic options. The mutations detected using GeneStrat account for a large proportion of variants found in NSCLC, including EGFR (89% coverage)²⁸, ALK (78%)²⁴, ROS1 (88%)²⁹, RET (99%)²⁹, KRAS (78%)²⁹, and BRAF (54%)²⁹. Accordingly, results are adjunctive to the ordering physician's workup and should be evaluated by a qualified healthcare professional in combination with the patient's clinical history, other diagnostic tests, and clinicopathological factors. For patients that test negative for all mutations, tissue biopsy can be considered. Any questions regarding the use of the GeneStrat test or interpretation of the test results should be directed to Biodesix Customer Care at 1.866.432.5930.

REFERENCES:

1. Tagrisso (osimertinib), AstraZeneca Pharmaceuticals, LP, Wilmington, DE, USA.
2. Gilotrif (afatinib), Boehringer Ingelheim Pharmaceuticals, Inc., Ridgefield, CT, USA.
3. Tarceva (erlotinib), Astellas Oncology Inc., Northbrook, IL, USA.
4. Iressa (gefitinib), AstraZeneca Pharmaceuticals, LP, Wilmington, DE, USA.
5. Vizimpro (dacomitinib), Pfizer Inc., New York, NY, USA.
6. CYRAMZA (ramucirumab) + Tarceva (erlotinib), Eli Lilly and Company, Indianapolis, IN, USA.
7. Avastin (bevacizumab) + Tarceva (erlotinib), Genentech Inc., South San Francisco, CA, USA.
8. Alecepsa (alectinib), Genentech Inc., South San Francisco, CA, USA.
9. Alunbrig (brigatinib), Takeda Oncology, Cambridge, MA, USA.
10. Zykadia (ceritinib), Novartis Pharmaceuticals Corporation East Hanover, NJ, USA.
11. Xalkori (crizotinib), Pfizer Inc., New York, NY, USA.
12. Lorbrenea (lorlatinib), Pfizer Inc., New York, NY, USA.
13. Rozlytrek (entrectinib), Genentech Inc., San Francisco, CA.
14. Retevmo (selpercatinib), Eli Lilly and Company, Indianapolis, IN, USA.
15. Gavreto (Pralsetinib), Blueprint Medicines Corporation, Cambridge, MA, USA.
16. Cabometyx (cabozantinib), Exelixis Inc., Alameda, CA, USA.
17. Caprelso (vandetinib), Sanofi Genzyme, Cambridge, MA, USA.
18. Lumakras (sotorasib), Amgen Inc, Thousand Oaks, CA, USA.
19. Tafinlar + Mekinist (dabrafenib + trametinib), Novartis Pharmaceuticals Corporation East Hanover, NJ, USA.
20. Zelboraf (Vemurafenib), Genentech Inc., San Francisco, CA.
21. Tafinlar (Dabrafenib), Novartis Pharmaceuticals Corporation East Hanover, NJ, USA.
22. Vogelstein B, Kinzler KW. Digital PCR. *PNAS*.1999;96(16):9236-9241.
23. Mellert H, Foreman T, Jackson L, Maar D, Thurston S, Koch K, Weaver A, Cooper S, Dupuis N, Sathyanarayana UG, Greer J, Hahn W, Shelton D, Stonemetz P, Pestano GA: Development and Clinical Utility of a Blood-based Test Service for the Rapid Identification of Actionable Mutations in NSCLC. *Journal of Molecular Diagnostics* 2017.
24. Maus et al. Identification of Novel Variant of EML4-ALK Fusion Gene in NSCLC: Potential Benefits of the RT-PCR Method. Maus MK, Stephens C, Zeger G, Griminger PP, Huang E. *Int J Biomed Sci*. 2012 Mar;8(1):1-6.
25. Mellert, et al. A Blood-based Test for the Detection of ROS1 and RET Fusion Transcripts from Circulating Ribonucleic Acid using Digital Polymerase Chain Reaction. *J. Vis. Exp.* (134), e57079, doi:10.3791/57079 (2018).
26. Oxnard GR et al. Noninvasive detection of response and resistance in EGFR-mutant lung cancer using quantitative next-generation genotyping of cell-free plasma DNA. *Clin Cancer Res*. 2014;20(6):1698-1705.
27. Wang Y et al. EML4-ALK fusion detected by RT-PCR confers similar response to crizotinib as detected by FISH in patients with advanced NSCLC. *J Thorac Oncol*. 2015;10(11):1546-1552.
28. Kobayashi Y, Mitsudomi T. Not all epidermal growth factor receptor mutations in lung cancer are created equal: Perspectives for individualized treatment strategy. *Cancer Sci*. 2016;107(9):1179-1186. doi:10.1111/cas.12996.
29. COSMIC database: v79, released 14-NOV-2016. <http://cancer.sanger.ac.uk/cosmic>

GeneStrat was developed and its performance characteristics were determined by Biodesix, Inc. The method has not been cleared or approved by the U.S. Food and Drug Administration. The Biodesix Laboratory meets the requirements for high complexity tests under the Clinical Laboratory Improvement Amendments of 1988, as amended, and its implementing regulations.

By accepting receipt of the GeneStrat Test Result Report or any content derived from it ("GS TRR"), the ordering physician, institution of ordering physician, or any third parties to whom the GS TRR is transferred, agree the GS TRR may only be used for the clinical management of the patient identified in the GS TRR by the ordering physician. Any other use of the GS TRR including, without limitation, correlative studies, diagnostic development, derivative works or other analyses, is expressly prohibited. The results of any unauthorized use of the GS TRR shall belong solely and exclusively to Biodesix, Inc. Additional terms and conditions related to this GS TRR can be found at www.biodesix.com.

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