

PATIENT-LAST-NAME, FIRST-NAME I.

Date of Birth: 01-Jan-1950

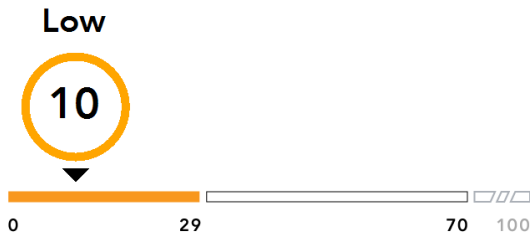
Gender: Male

Report Number: OR000123456-1003

Report Date: 20-Dec-2017

Ordering Physician: Dr. First-Name I. Ordering-Physician-Last-Name

Recurrence Score[®] Result



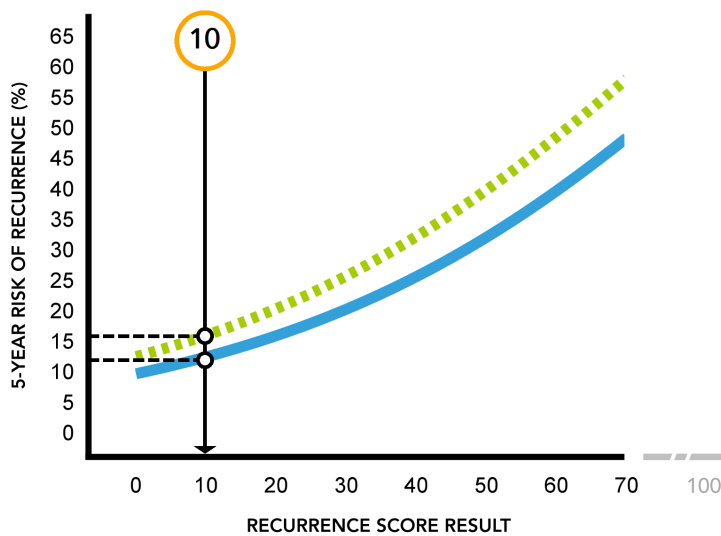
What does a Recurrence Score of 10 mean?

Based on your patient's Recurrence Score of 10, your patient's risk of recurrence within 5 years of adjuvant 5FU/LV is **16%**. The risk of recurrence will likely decrease by 4% with the addition of oxaliplatin.

Recurrence Risk After Chemotherapy (PROGNOSIS)

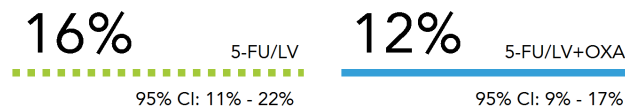
NSABP C-07 Study

5-Year Risk of Recurrence +/- Oxaliplatin



This graph shows the 5-year risk of recurrence by Recurrence Score result for patients treated with 5FU/LV chemotherapy and 5FU/LV + oxaliplatin, based on the results in the NSABP C-07 study, which randomized patients to 5FU/LV or 5FU/LV + oxaliplatin.¹ Based on this study, patients with higher Recurrence Score results are likely to have a greater absolute benefit from the addition of oxaliplatin to 5FU/LV.

The IDEA trial showed that patients at higher prognostic risk are more likely to benefit from 6 months of oxaliplatin compared to 3 months. Some patient subgroups with lower prognostic risk showed similar outcomes between 3 and 6 months of oxaliplatin.²



Information on the Colon Recurrence Score and clinical experience is available upon request.

PATIENT-LAST-NAME, FIRST-NAME I.

Date of Birth: **01-Jan-1950** Gender: **Male** Report Number: **OR000123456-1003** Report Date: **20-Dec-2017**
Ordering Physician: **Dr. First-Name I. Ordering-Physician-Last-Name**

Medical Record/Patient #: **1234567-01** Specimen Source/ID: **Colon/SP-16_0123456**
Date of Collection: **05-Dec-2017** Study #:
Specimen Received: **07-Dec-2017**
Additional Recipient: **Dr. First-Name I. Recipient-Physician-Last-Name**
Pathologist: **Dr. First-Name I. Pathologist-Last-Name**

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References:

1. Yothers et al. *J Clin Oncol*. 2013. 2. Shi et al. ASCO 2017.

Laboratory Director(s): S. Shak, MD; F. Baehner, MD; H. Bailey, MD & P. Joseph, MD

This test was developed and its performance characteristics determined by Genomic Health, Inc. It has not been cleared or approved by the FDA, nor is it currently required to be. The laboratory is regulated under CLIA as qualified to perform high-complexity testing. This test is used for clinical purposes. It should not be regarded as investigational or for research.



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PATIENT-LAST-NAME, FIRST-NAME I.

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Gender: Male

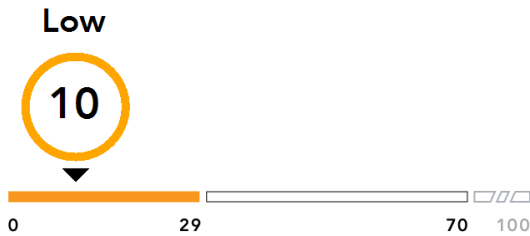
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Patient Educational Summary

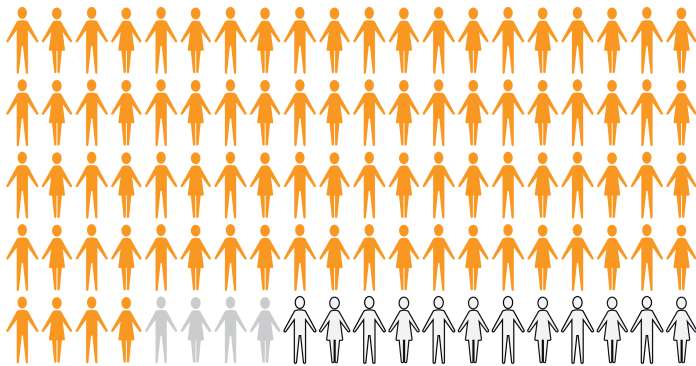
What does your result mean?



Your Recurrence Score of 10 indicates a risk of **16%** of your tumor returning within 5 years of your chemotherapy treatment.

By measuring the activity of certain genes in your colon tumor tissue, the Oncotype DX test predicts the risk of your cancer returning within 5 years following chemotherapy treatment with 5FU/LV or 5FU/LV + oxaliplatin.

What are the chances of your colon cancer returning?



Based on the NSABP C-07 validation study, out of 100 people with a Recurrence Score result of **10**:

84 people

Will **not** have their colon cancer return if treated with only **5FU/LV** within 5 years.

4 additional people

Will not have their colon cancer return with the addition of oxaliplatin within 5 years.

What are your treatment options? (For doctor/patient discussion)



TYPE OF CHEMOTHERAPY



FOLLOW-UP

Join other colon cancer patients to learn about genomics and help transform patient care: MyOncotype.com

This Patient Educational Summary is a brief explanation of your Oncotype DX test results. It is being provided by your doctor for discussion purposes. More information at www.OncotypeQ.com.

Mismatch Repair (MMR) Report

PATIENT-LAST-NAME, FIRST-NAME I.

Date of Birth: **01-Jan-1950** Gender: **Male** Report Number: **OR000123456-1003** Report Date: **20-Dec-2017**
Ordering Physician: **Dr. First-Name I. Ordering-Physician-Last-Name**

Medical Record/Patient #: **1234567-01** Specimen Source/ID: **Colon/SP-16_0123456**
Date of Collection: **05-Dec-2017** Study #:
Specimen Received: **07-Dec-2017**
Additional Recipient: **Dr. First-Name I. Recipient-Physician-Last-Name**
Pathologist: **Dr. First-Name I. Pathologist-Last-Name**

STATUS**MMR Proficient**

MMR-P

ANTIBODY RESULT

MLH1 (Clone: ES05) **Expressed**
MSH2 (Clone: G219-1129) **Expressed**

MMR Status Determination for Recurrence Risk:

MMR-Proficient (MMR-P) if both MLH1 and MSH2 are expressed. MMR-Deficient (MMR-D) if one or both of MLH1 and MSH2 are not expressed.

Reviewing Pathologist: **Some Doctor**

Laboratory Director(s): S. Shak, MD; F. Baehner, MD; H. Bailey, MD & P. Joseph, MD

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