

Cancer Testing Solutions





The benefit of knowing





Hereditary cancer genetic testing can play a critical role in managing health

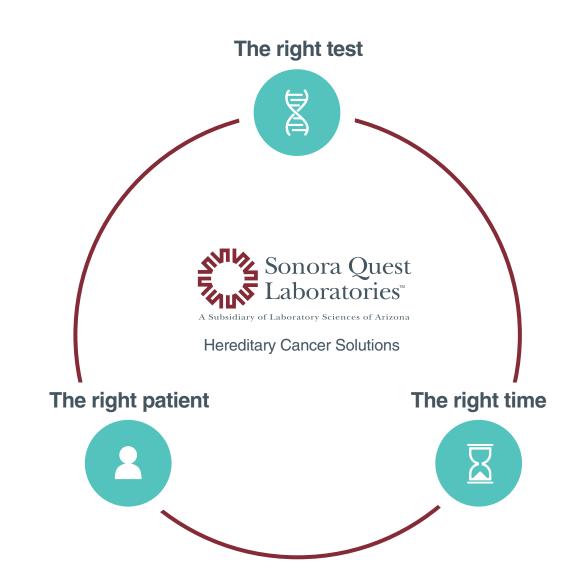
Cancer touches millions of Americans each year. Many people wonder about their own risk of developing cancer. For some patients, genetic testing plays an important role in clarifying that risk. It's important to choose the **right test** for the **right patient** at the **right time.** This guide highlights important points to consider when choosing a genetic test.



Why consider genetic testing

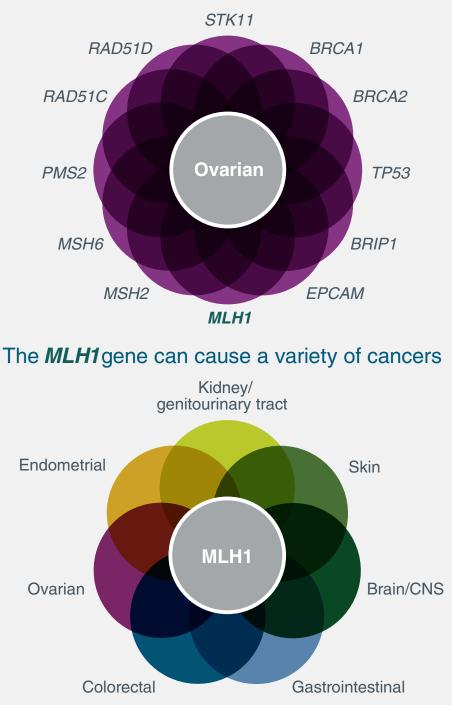
The decision to pursue genetic testing is a personal one. A patient's current medical status, personal experiences with cancer, and general readiness for genetic information all influence this process.

For some patients, genetic testing can provide the information needed to tailor their screening regimen and open the door to risk-reduction options. However, genetic testing also has the potential for less clear-cut results or variants of unknown clinical significance (VUS) which may not inform medical management. Having an open dialogue with your patients about these topics can assist with shared decision-making.



Making sense of genetic testing

One **type** of cancer can be caused by several cancer genes, and one gene can cause several different **types** of cancers. Here is an example highlighting the connection between various hereditary cancers and genes.

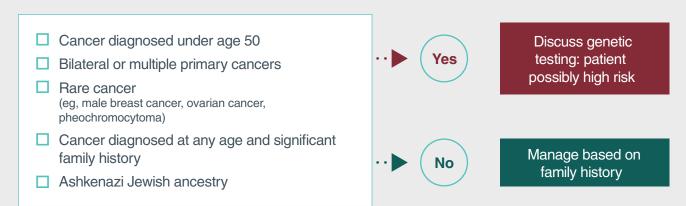


Ovarian cancer can be caused by many genes

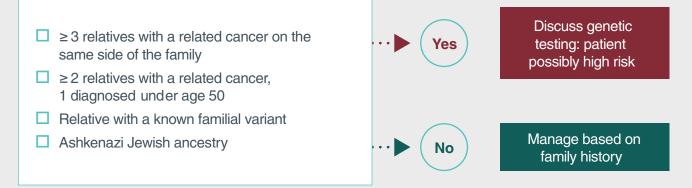
Choosing the right patient

Do any of the following apply to your patient?

Current or past diagnosis of cancer



Family history of cancer



Choosing the right test

Discuss benefits and limitations of genetic testing with patient or refer for genetic counseling

High-risk personal and/or family history

History consistent with	Comprehensive and Guideline-Based Hereditary Cancer panels
multiple cancer syndromes <i>or</i> history not explained by previous genetic testing	High-, moderate-, and emerging-risk genes: includes the focused panel and single syndromes, as well as genes that may lack specific risk information and management recommendations. These may be further defined over time.
	Cancer-specific panels
History includes primarily 1 cancer type	High- and moderate-risk genes: most have well-established
	cancer risks and management guidelines are established. Some cancer risks may not be as well-characterized.
	Hereditary cancer syndrome tests ●
History is suspicious for a well-characterized hereditary	Syndrome-specific tests that analyze genes associated
cancer syndrome	with well-characterized cancer syndromes.
Patient has a relative with a	Hereditary cancer single site test
familial mutation	Only looks for variant previously identified in a relative.

Additional considerations/actions:

- Begin genetic testing with an affected individual whenever possible
- Threshold for testing may be lower for certain ethnicities or family situations (adoption, small families)
- Guidelines strongly recommend genetic counseling
- Refer to the National Comprehensive Cancer Network[®] (NCCN) guidelines for more detailed selection criteria
- Revisit genetic testing options regularly

Testing options

Need additional assistance?



Call Quest Genomics Client Services* at **866.GENE.INFO** to speak with a genetic counselor.

66 and 32 genes (respectively) including high-risk, moderate-risk, and emerging genes associated with a broad spectrum of hereditary cancers

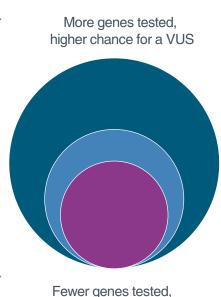
Hereditary Colorectal Cancer Panel: 19 genes associated with increased risk for colorectal cancer

Syndrome-specific tests that analyze genes associated with well-characterized cancer syndromes such as Lynch Syndrome

Single-site testing is available when there is a known variant in the family. This test is available for any of the 66 genes on our Comprehensive Hereditary Cancer Panel.

VUS Rate by Test Type

- Comprehensive and Guideline-Based Hereditary cancer panels
- Cancer-specific panels
- Hereditary cancer syndrome tests



Fewer genes tested, lower chance for a VUS

What the results mean

Types of results

Insights



Pathogenic/ likely pathogenic variant

No clinically significant

variants identified

Negative

- Lifetime cancer risk elevated
- Increased cancer risk(s) are gene-specific



Patient previously diagnosed with cancer
 Cancer risk based on personal and family history

- Patient with a family history of cancer only (no personal history)
 - When possible, testing an affected family member is recommended for a more informative risk assessment
 - Cancer risk based on personal and family history



Variant(s) of unknown clinical significance (VUS) • A genetic change that is not well-characterized. May or may not be associated with increased cancer risk. A VUS may be further defined over time.



What steps to consider

Testing outcomes A		Actions
+	Positive test result for high-/moderate-risk gene	 Review medical management guidelines Includes surveillance, chemoprevention, and/or risk-reducing surgery Refer to specialty oncology center Genetic counseling and testing for at-risk family members is recommended
+	Positive test result for emerging-risk gene	Medical management based on personal and family historyRevisit literature regularly for developing guidelines
VUS	Variant(s) of unknown clinical significance	 Should not influence medical management decisions Medical management based on personal and family history Reclassified variants will be communicated to the ordering provider. Inquiries about variant status can be made to 1.866.GENE.INFO (1.866.436.3463).
-	Negative test result	 Additional genetic testing may be appropriate for patient or affected relative if inherited cancer is strongly suspected Medical management based on personal and family history
×	Patient declines testing	 Discuss medical management options Tools to assist in this assessment include NCCN[®], Gail model, Tyrer-Cusick, Claus tables, CanRisk Refer to specialty oncology center Genetic counseling for family members is advised Revisit genetic testing options regularly Update personal and family histories regularly

A result is only as good as the action it inspires.

Call Quest Genomics Client Services^{*} at **1.866.GENE.INFO (1.866.436.3463)** to speak with a genetic counselor.

P

Hereditary Cancer Test Menu

Sonora Quest Laboratories offers a large test menu, giving the flexibility to select the right test for your patient at the right time.

Test offering	Test code
Comprehensive and Guideline-Based Hereditary Cancer panels	
Comprehensive Hereditary Cancer Panel (66 genes) APC, ATM, AXIN2, BAP1, BARD1, BLM, BMPR1A, BRCA1, BRCA2, BRIP1, CDH1, CDK4, CDKN1B, CDKN2A, CHEK2, DICER1, EGFR, EPCAM, FANCA, FANCC, FANCM, FH, FLCN, GALNT12, GREM1, HOXB13, MAX, MEN1, MET, MITF, MLH1, MRE11 (MRE11A), MSH2, MSH3, MSH6, MUTYH, NBN, NF1, NTHL1, PALB2, PMS2, POLD1, POLE, POT1, PTCH1, PTEN, RAD50, RAD51C, RAD51D, RECQL, RET, SDHA, SDHAF2, SDHB, SDHC, SDHD, SMAD4, SMARCA4, STK11, SUFU, TMEM127, TP53, TSC1, TSC2, VHL, XRCC2	907263
Guideline-Based Hereditary Cancer Panel (32 genes) APC, ATM, AXIN2, BMPR1A, BRCA1, BRCA2, BRIP1, CDH1, CDK4, CDKN2A (p16,p14), CHEK2, EPCAM, GREM1, HOXB13, MLH1, MSH2, MSH3, MSH6, MUTYH, NBN, NF1, NTHL1, PALB2, PMS2, POLD1, POLE, PTEN, RAD51C, RAD51D, SMAD4, STK11, TP53	907261
Cancer-specific panel	
Hereditary Colorectal Cancer Panel (19 genes) APC, AXIN2, BMPR1A, CDH1, EPCAM, GREM1, MLH1, MSH2, MSH3, MSH6, MUTYH, NTHL1, PMS2, POLD1, POLE, PTEN, SMAD4, STK11, TP53	907262
Hereditary cancer syndrome tests	
Breast cancer syndrome	
BRCA Panel (BRCA1, BRCA2) BRCA1, BRCA2	906369
BRCA Ashkenazi Jewish Screen Common founder variants BRCA1 c.68_69delAG, BRCA1 c.5266dupC, BRCA2 c.5946delT	906366
BRCA Ashkenazi Jewish Screen w/Reflex to BRCA Panel (BRCA1, BRCA2) Ashkenazi Jewish screen; if negative reflex to BRCA Panel-BRCA1 and BRCA2	
BRCA1 and BRCA2 Deletion and Duplication Detects large deletions/duplications in the BRCA1 and BRCA2 genes which are not detectable by DNA sequencing	906367
Lynch syndrome	
Lynch Syndrome Panel (5 genes) MLH1, MSH2, MSH6, PMS2, and EPCAM (deletion/duplication only)	906541
Other cancer risk	
Hereditary Cancer Single Site(s)	907051
APC, ATM, AXIN2, BAP1, BARD1, BLM, BMPR1A, BRCA1, BRCA2, BRIP1, CDH1, CDK4, CDKN1B, CDKN2A (p16, p14), CHEK2, DICER1, EGFR, EPCAM, FANCA, FANCC, FANCM, FH, FLCN, GALNT12, GREM1, HOXB13, MAX, MEN1, MET, MITF, MLH1, MRE11 (MRE11A), MSH2, MSH3, MSH6, MUTYH, NBN, NF1, NTHL1, PALB2, PMS2, POLD1, POLE, POT1, PTCH1, PTEN, RAD50, RAD51C, RAD51D, RECQL, RET, SDHA, SDHAF2, SDHB, SDHC, SDHD, SMAD4, SMARCA4, STK11, SUEU, TMEM127, TP53, TSC1, TSC2, VH, XBCC2	

Coordinating testing for your patient

□ Testing ordered from Sonora Quest Laboratories

Name of test ordered: ______ Where to go for blood draw: ______ Date of blood draw: ______

□ No testing ordered

Update personal and family histories regularly Revisit genetic testing options regularly Next appointment is: Call with questions:

Helpful information resources

National Comprehensive Cancer Network (NCCN): NCCN.org
National Society of Genetic Counselors (NSGC): NSGC.org
Facing Our Risk of Cancer Empowered (FORCE): Facingourrisk.org
Bright Pink: Brightpink.org
American Cancer Society: Cancer.org



Sonora Quest Cancer Testing Solutions: when you need to know more, you'll find more here

The more you know about your patient's risk of hereditary cancer, the more you can do and the better you can navigate the next steps together. As one of Arizona's largest providers of clinical laboratory testing services, our diagnostic insights reveal new avenues to identify and treat disease, inspire healthy behaviors, and improve healthcare management. Our complete portfolio of hereditary cancer tests, services, and expert analysis helps you understand patient risk, and is just the first step in our approach to patient care.



For more information please contact your Sonora Quest Account Manager or visit SonoraQuest.com

Image content features models and is intended for illustrative purposes only.

SonoraQuest.com