

Liquid test Solid answers.

Introducing FoundationOne® Liquid, our next-generation liquid biopsy test from our proven portfolio.

**A SIMPLE BLOOD
DRAW CAN DELIVER
RELIABLE ANSWERS**

By analyzing circulating tumor DNA (ctDNA) with our comprehensive genomic profiling approach and providing expertly curated reports, *FoundationOne Liquid empowers providers* to help guide therapy selection and identify clinical trial options for more patients.



*Robust
Performance*

>99%

Sensitivity¹

>99%

Positivity Predictive
Value (PPV)²

Analytically validated across four main classes of genomic alterations, ensuring high quality results to better inform treatment decisions³



*Expanded
Content*

A comprehensive list of 70 cancer-related genes which includes homologous recombination deficiency (HRD) and IO resistance genes

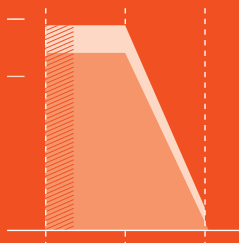
SEE GENE LIST ON BACK

**MICROSATELLITE
INSTABILITY**

(MSI-H)⁴ detection can provide *immunotherapy selection guidance*



*Streamlined
Report*



Simplified report including *longitudinal comparison* with prior test results and a *dynamic visual* of mutant allele frequency (MAF) changes

SEE SAMPLE REPORT ON BACK

Gene List

70 cancer-related genes below



ABL1	AKT1	ALK	APC	AR	ARAF	ATM	BRAF
BRCA1	BRCA2	BTK	CCND1	CD274	CDH1	CDK4	CDK6
CDK12	CDKN2A	CHEK2	CRKL	CTNNB1	DDR2	EGFR	ERBB2
ERFF1	ESR1	EZH2	FGFR1	FGFR2	FGFR3	FLT3	FOXL2
GNA11	GNAQ	GNAS	HRAS	IDH1	IDH2	JAK2	JAK3
KIT	KRAS	MAP2K1	MAP2K2	MDM2	MET	MPL	MTOR
MYC	MYCN	MYD88	NF1	NPM1	NRAS	PALB2	PDCD1LG2
PDGFRA	PDGFRB	PIK3CA	PTEN	PTPN11	RAF1	RB1	RET
ROSI	SMO	STK11	TERT	TP53	VEGFA		

Sample Report



PATIENT

TUMOR TYPE
Lung adenocarcinoma

REPORT DATE
01 Jan 2018

CASE
XXXXXXXX

ABOUT THE TEST: FoundationOne® Liquid is a next generation sequencing (NGS) assay that identifies clinically relevant genomic alterations in circulating tumor DNA.

PATIENT

DISEASE: Lung adenocarcinoma

NAME: Not Given

DATE OF BIRTH: Not Given

SEX: Not Given

MEDICAL RECORD #: Not Given

PHYSICIAN

ORDERING PHYSICIAN: Not Given

MEDICAL FACILITY: Not Given

ADDITIONAL PHYSICIAN: Not Given

MEDICAL FACILITY ID: Not Given

PATHOLOGIST: Not Given

SPECIMEN

SPECIMEN ID: Not Given

SPECIMEN TYPE: Blood

DATE OF COLLECTION: Not Given

SPECIMEN RECEIVED: Not Given

MEDIAN EXON COVERAGE: Not Given

Biomarker Findings

Microsatellite status MSI-High

Genomic Findings

For a complete list of the genes assayed, please refer to the Appendix.

EGFR exon 19 deletion (L747_A750>P)

TP53 C242G

Therapies with Clinical Benefit 10 Clinical Trials
 Therapies with Lack of Response

BIOMARKER FINDINGS	THERAPIES WITH CLINICAL BENEFIT (IN PATIENT'S TUMOR TYPE)	THERAPIES WITH CLINICAL BENEFIT (IN OTHER TUMOR TYPE)
Microsatellite status - MSI-High	Pembrolizumab	none
GENOMIC FINDINGS	THERAPIES WITH CLINICAL BENEFIT (IN PATIENT'S TUMOR TYPE)	THERAPIES WITH CLINICAL BENEFIT (IN OTHER TUMOR TYPE)
EGFR - exon 19 deletion (L747_A750>P) MAF% 0.20%	Afatinib	Cetuximab
	Erlotinib	Lapatinib
	Gefitinib	Panitumumab
	Osimertinib	

10 Trials see p. 8

GENOMIC FINDINGS WITH NO REPORTABLE THERAPEUTIC OR CLINICAL TRIALS OPTIONS

TP53 - C242G see p. 3

For more information regarding biological and clinical significance, including prognostic, diagnostic, germline, and potential chemosensitivity implications, see the Genomic Findings section.

NOTE: Genomic alterations detected may be associated with activity of certain FDA-approved drugs; however, the agents listed in this report may have varied clinical evidence in the patient's tumor type. Neither the therapeutic agents nor the trials identified are ranked in order of potential or anecdotal efficacy for this patient, nor are they ranked in order of level of evidence for this patient's tumor type. In the appropriate clinical context, germline testing of APC, BRCA1, BRCA2, CHEK2, KMT2D, MGI, SETD3, and TP53 is recommended.

Mutant Allele Frequency is not applicable for copy number amplifications or rearrangements.

Electrically Signed by Julia A. Ehrig, M.D., Ph.D., Jeffrey S. Boss, M.D., Medical Director • 10 November 2017 Sample Preparation: 150 Second St., 1st Floor, Cambridge, MA 02141 • CLIA: 2202027531 Foundation Medicine, Inc. • 1-888-988-3639 Sample Analysis: 150 Second St., 1st Floor, Cambridge, MA 02141 • CLIA: 2202027531 PAGE 1 of 15

PATIENT

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CASE
XXXXXXXX

CASE: XXXXXXXX

HISTORIC PATIENT FINDINGS	TEST 1 Solid tumor biopsy 25 Feb 2017	TEST 2 Liquid biopsy 3 Apr 2017	TEST 3 Liquid biopsy 23 Apr 2017	CHANGE FROM PREV.
Tumor Mutational Burden	Cannot Be Determined	Not Tested	Not Tested	—
Microsatellite status	Cannot Be Determined	MSI-High	MSI-High	—
EGFR	● exon 19 deletion (L747_A750>P) detected	23.00%	0.20%	-22.8%
TP53	● C242G detected	12.50%	0.00%	-12.40%

NOTE: This comparison table refers only to genes and biomarkers assayed by prior FoundationOne® Liquid or FoundationOne® tests. Up to five previous tests may be shown. For some genes in FoundationOne® Liquid only select exons are assayed. Therefore, an alteration found by a previous test may not have been confirmed despite overlapping gene lists. Please refer to the Appendix for the complete list of genes and events assayed. The gene and biomarker list will be updated periodically to reflect new knowledge about cancer biology. As new scientific information becomes available, alterations that had previously been listed as Variants of Unknown Significance (VUS) may become reportable.

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References

- >99% sensitivity for base substitutions, indels and rearrangements at >0.5% MAF. Sensitivity for copy number variations is >95% when the tumor fraction is ≥20%. Internal data on file.
- >99% PPV for all alterations, calculated as a weighted average of the PPV for each class of alteration, with the weighting based upon the frequency with which FoundationACT detects each class of alteration. The PPV for base substitutions, indels and rearrangements is >99% at >0.5% MAF. The PPV for copy number variations at ≥20% tumor fraction is 97.6%. Internal data on file.
- Internal data on file.
- MSI status will be reported for samples determined to have high microsatellite instability.

