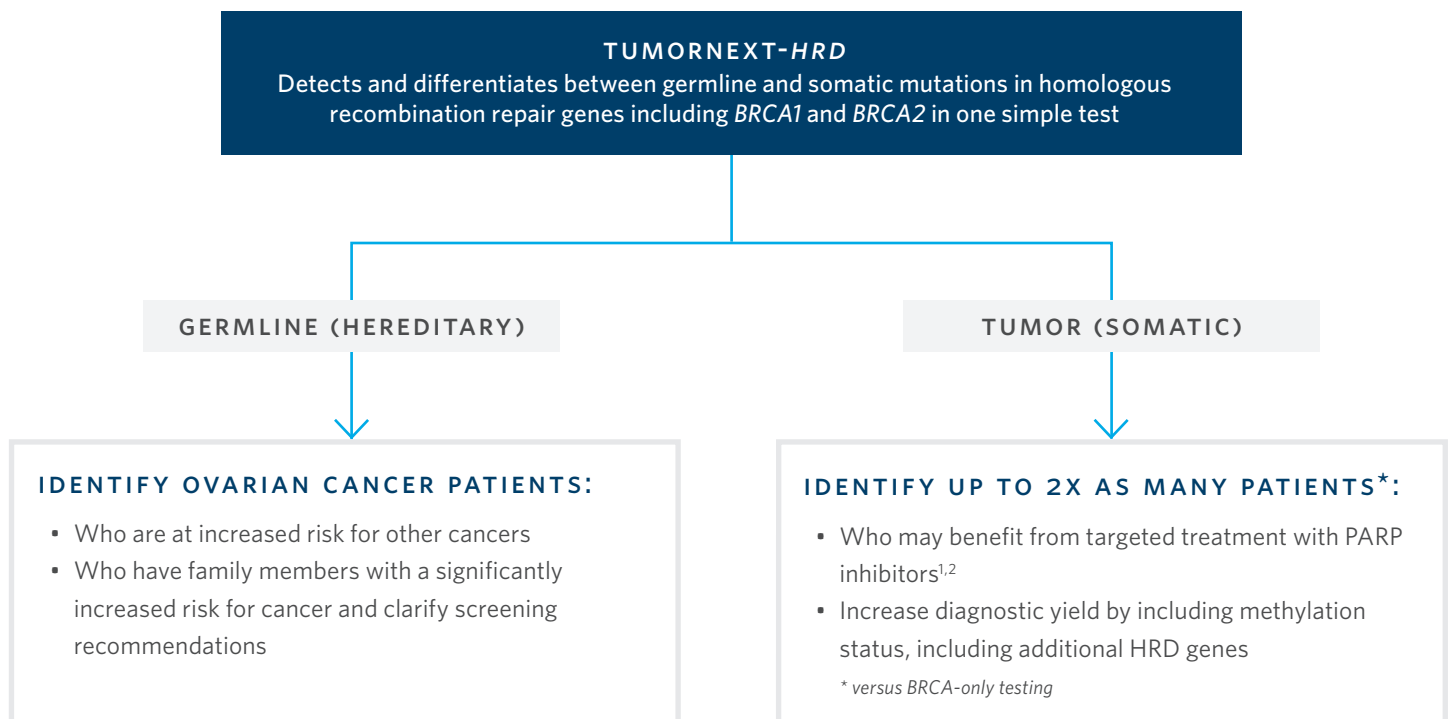




Clearly determine patients who may benefit from treatment with PARP inhibitors and simultaneously understand hereditary risk.



WHY ORDER TUMORNEXT-HRD?

GET MORE COMPLETE INFORMATION TO GUIDE HEALTHCARE DECISIONS WITH ONE TEST

Tests that look at only tumor tissue do not allow you to identify patients with hereditary cancer and those that look at only germline will miss patients who may benefit from PARP inhibitors. TumorNext-HRD does both.

Why TumorNext-HRD?

- NCCN® recommends *BRCA1/2* germline testing for all patients with epithelial ovarian cancer³
- SGO recommends that all women diagnosed with epithelial ovarian, fallopian tube, and peritoneal cancers should consider genetic testing, even in the absence of a family history of cancer⁴
- Identifying patients who may benefit from PARP inhibitor treatment, or future eligibility

One test looks at both tumor and germline to bring more complete data to your practice.

TEST DETAILS

TUMORNEXT-HRD

Paired tumor/germline analysis of *BRCA1/BRCA2* plus 9 additional genes** in the homologous recombination repair pathway that are also known to be associated with hereditary cancer, and also includes *BRCA1* and *RAD51C* methylation analysis.

ALSO AVAILABLE: TUMORNEXT-BRCA

Analyzes *BRCA1* and *BRCA2* in both normal tissue (blood or saliva) and ovarian tumor tissue

Turnaround Time

21-28 days (once both samples are received)

Specimen Requirements

Both tumor and normal sample are required* for testing. Visit ambrygen.com/specimen-requirements for complete details.

* Pathology report also required with order

** Additional genes on TumorNext-HRD: *ATM, BARD1, BRIP1, CHEK2, MRE11A, NBN, PALB2, RAD51C, RAD51D*

ORDERING PROCESS

1

Complete Tumor Test Requisition Form (TRF) and submit with blood sample and relevant pathology report (required)

2

Ambry will contact the pathology department to request the tumor specimen

3

Testing will begin when the blood and tumor samples are both received; both are required for processing

Please note that the time to receive the tumor specimen depends on individual pathology departments and may delay testing. Follow-up may be needed.

References

1. Hennessy BTJ, et al. *JCO*. 2010
2. Pennington KP et al. *Clin Cancer Res* 2013
3. NCCN Clinical Practice Guidelines in Oncology®. Genetic/Familial High-Risk Assessment: Breast and Ovarian. V1.2017
4. SGO Clinical Practice Statement: Genetic Testing for Ovarian Cancer. October 2014