

For Gene Solutions Use Only

K-TRACK ID: _____

PATIENT INFORMATION

Full Name:	Referring Physician:
Date of Birth: (DD/MM/YY)	Clinic/Hospital Name:
National ID/Passport:	Physician Email:
Gender: ☐ Male ☐ Female	Physician Phone:
Phone:	

TEST SELECTION & SAMPLE INFORMATION

☐ K-TRACK (Tumor + Blood) Genomic (DNA) Profiling + ctDNA-MRD Monitoring	☐ K-TRACK (Tumor Only) Genomic (DNA) Profiling	☐ K-TRACK (n) ctDNA Follow-up Test
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Tissue Sample Date of FFPE Collection: (DD/MM/YY)	Blood Sample: _____ mL; _____ tube(s) Date of Collection: (DD/MM/YY)
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For K-TRACK (Tumor Profiling Only), complete the "Tissue Sample" field only. For the K-TRACK (n) test, complete the "Blood Sample" field only.

HOSPITAL PATHOLOGY LAB (The tumor cellularity of FFPE specimens must be ≥20%)

Pathology Code:	Site of Biopsy:
Date of Surgery/Biopsy: (DD/MM/YY)	Tumor Cellularity (%):
Place of Collection:	

See page 5 for "Sample Requirement" information.

CANCER HISTORY & TREATMENT PROCESS

Cancer type (select one)	☐ Cervical	☐ Ampulla of Vater	☐ Esophageal	☐ Liver
	☐ Endometrial	☐ Bladder	☐ Gallbladder	☐ Pancreatic
☐ Lung	☐ Fallopian Tube	☐ Cholangiocarcinoma	☐ Gastric	☐ Other:
☐ Mediastinal	☐ Ovarian	☐ Colorectal	☐ GIST	☐ Prostate*
☐ Mesothelioma	☐ Uterine	☐ Breast, receptor status: ER: ☐ - ☐ + PR: ☐ - ☐ + HER2: ☐ - ☐ +		
Cancer Stage at Diagnosis: ☐ I ☐ II ☐ III ☐ IV	Metastatic Organs:			
Diagnosis Date: (DD/MM/YY)	Date of Treatment: (DD/MM/YY)			
Regimen (radiotherapy/chemotherapy/immunotherapy/hormones, if any):				

See page 4 for "Scope of the Test" information for each cancer.

I acknowledge that I have reviewed and fully understood the information presented in this Informed Consent Form.

- I consent with all the terms and conditions in this Informed Consent Form.
- I consent to provide all necessary information and to have genetic sequencing performed on my sample at Gene Solutions' laboratory for the purpose of conducting the test described.
- I authorize Gene Solutions to process the personal data I have provided, including conducting genetic sequencing and performing related processing activities such as collection, recording, analysis, validation, storage, modification, disclosure, combination, access, retrieval, revocation, encryption, decryption, copying, sharing, transmission, provision, transfer, deletion, and destruction of my personal data, as well as any other processing actions permitted under applicable personal data protection regulations.
- I understand that the data processed in this testing process includes sensitive personal data such as genetic information, health-related data, biological samples, financial identifiers, digital identity information, and images of identification documents.
- I consent to the processing of my personal data (including health-related data and residual material) by Gene Solutions for research and product development purposes as specified in this Consent Form, only in anonymized or de-identified form, unless I provide explicit additional consent.
☐ allow ☐ not allow
- I consent Gene Solutions to share my personal data to the parties as mentioned in this Consent Form, only to the extent necessary. Each receiving party is obligated to maintain confidentiality and implement security safeguards as required by the applicable regulations.
- I understand that all sharing will remain within the purposes stated in this Consent Form and fully comply with the current applicable regulations.
- I understand that I have the rights and obligations in accordance with the current applicable regulations. I may exercise these rights by contacting Gene Solutions via the contact information as provided herein.
- I understand that my personal data will be stored for the duration necessary to provide testing services, or for the legally required period for medical and regulatory compliance.
- I warrant that the information provided by me under this Informed Consent Form is truthful, complete and accurate. Gene Solutions shall not be liable for any loss or damages caused by untruthful, incomplete or inaccurate information provided by me.
- Where I am the patient's representative, I warrant that I am the valid representative by law or under a valid decision or judgment of the court or competent authority, and I have the full rights and obligations to represent the patient in all personal and legal matters, including the matters set forth in this Informed Consent Form.

Full Name:.....
Date: (DD/MM/YY).....

- ☒ I have fully explained the test, including its benefits, risks, and available alternatives, to the clients in accordance with applicable legal requirements, and have answered all their questions.
- ☐ I request not to receive germline mutation results as part of this test report.

☐ I request not to receive germline mutation results as part of this test report.

Full Name:.....
Date: (DD/MM/YY).....

 CAP
ACCREDITED

PERSONAL DATA COLLECTION NOTICE

A. PURPOSES

Purposes for the collection and processing of patients' personal data:

- Conducting testing activities, diagnostics, providing advice, consultation, relevant guidance, and other healthcare related activities in accordance with the laws on medical examination and treatment;
- Performing other health-related services and activities requested by the patient and provided by Gene Solutions;
- Conducting internal management, reporting, archiving, and fulfilling statutory obligations of Gene Solutions under the laws on personal data protection and requirements of competent authorities.

B. TYPES OF PERSONAL DATA PROCESSED

Depending on the test requested, the personal data collected and processed includes basic personal data and sensitive personal data as defined under the applicable regulations on personal data protection:

- Basic Personal Data includes: full legal name; date of birth; gender; place of birth; address; nationality; phone number; personal identification number; marital status; and other identifying information.
- Sensitive Personal Data includes: health status; medical conditions; genetic characteristics; genetic data from tests; biometric identifiers; images of ID cards; and login credentials linked to digital identity accounts.

C. DATA PROCESSING ACTIVITIES

Gene Solutions will carry out data processing activities arising from genetic sequencing, which may include but are not limited to: collection, recording, analysis, storage, modification, disclosure, access, retrieval, encryption, decryption, copying, sharing, transmission, provision, transfer, deletion, destruction, and other actions as permitted by the applicable regulations.

D. DATA CONTROLLER AND DATA PROCESSOR

Gene Solutions is the data controller and processor of the patient's personal data under the current law on Personal Data Protection .

For any questions or communications regarding personal data processing, please contact:

- Tel: +66 99-345-2242

Gene Solutions may share personal data, to the extent permitted by law, with:

- Healthcare personnel and healthcare institutions (hospitals/ clinics) providing medical examination and treatment to the patient;
- Administrative staffs of Gene Solutions or its affiliate companies;
- Third parties who are authorized to process personal data to ensure the most effective medical examination and treatment. However, these organizations and individuals are bound by strict data confidentiality obligations under the applicable laws and under contracts signed with Gene Solutions;
- The requesting physician/ clinics/ hospitals for research, scientific purposes.

E. RIGHTS AND OBLIGATIONS OF THE PATIENT

Unless otherwise provided by the applicable law, the patient has the following rights and obligations regarding their personal data:

Rights:

- to request access to and copies of my personal data;
- to obtain explanations regarding data processing activities;
- to request correction, update or deletion of their personal data;
- to withdraw consent at any time by contacting Gene Solutions, noting that Gene Solutions will be released from any obligations that cannot be performed without necessary personal data;
- to file complaints, denunciations, or initiate lawsuits with competent authorities concerning violations of personal data rights.

Obligations:

- to provide complete and accurate personal data when allowing Gene Solutions to process personal data;
- to self-protect their personal data;
- to comply with the applicable regulations on the protection of personal data.

F. DE-IDENTIFIED INFORMATION

Gene Solutions may use the patient's residual samples and de-identified information for research and scientific purposes. These studies may be published in scientific journals or used for product and service development. The patient will not be notified or compensated for these research activities.

SCOPE OF THE TEST

Panel	Cancer Type	Somatic Mutations (Actionable/Resistance)	ctDNA-MRD Monitoring*	MSI Status	Germline Mutations*	
					Hereditary Cancer Risk	Pharmaco genomics
Thoracic Cancers	Lung Cancer	✓	✓	✓	✓	
	Mediastinal Cancer	✓	✓	✓	✓	
	Mesothelioma Cancer	✓	✓	✓	✓	
Digestive Cancers	Ampulla of Vater	✓	✓	✓	✓	✓
	Bladder Cancer	✓	⬇	✓	✓	
	Cholangiocarcinoma	✓	✓	✓	✓	
	Colorectal Cancer	✓	✓	✓	✓	✓
	Esophageal Cancer	✓	✓	✓	✓	✓
	Gallbladder Cancer	✓	✓	✓	✓	
	Gastric Cancer	✓	✓	✓	✓	✓
	GIST	✓	✓	✓	✓	
	Liver Cancer	✓	✓	✓	✓	
	Pancreatic Cancer	✓	✓	✓	✓	✓
Breast & Gynecological Cancers	Breast Cancer	✓	✓	✓	✓	✓
	Cervical Cancer	✓	✓	✓	✓	
	Endometrial Cancer	✓	✓	✓	✓	
	Fallopian Tube Cancer	✓	✓	✓	✓	
	Ovarian Cancer	✓	✓	✓	✓	
	Uterine Cancer	✓	✓	✓	✓	
Other	Prostate Cancer	✓		✓	✓	

✓ Applicable to all cancer stages ⬇ Applicable to metastatic stage

* The K-TRACK (Tumor Profiling Only) test does not report results for ctDNA-MRD monitoring and germline mutations. See pages 6 and 7 for detailed gene panels.

A. INTENDED USE

K-TRACK

This comprehensive genomic profiling test, designed for 20 solid tumors, aligns with recommendations from the National Comprehensive Cancer Network (NCCN), European Society for Medical Oncology (ESMO), and U.S. Food and Drug Administration (FDA). By identifying patient-specific molecular alterations, the test enables clinicians to:

- **Provide personalized treatment:** Determine the most appropriate targeted therapy and/or immunotherapy for each individual.
- **Monitor treatment response:** Assess response to therapy and identify potential resistance mechanisms.
- **Detect early recurrence:** Monitor for molecular signs of disease recurrence, enabling proactive surveillance and intervention.

This approach provides a **comprehensive genomic landscape** of the tumor and liquid biopsy, facilitating **informed clinical decision-making** and potentially improving patient outcomes.

TEST RESULT

- **Actionable mutations and resistance mutations** for targeted therapy, including single nucleotide variants, small and large indels (**SNVs, INDELs**), **amplification, fusion**, detected by FFPE DNA-sequencing combined with Liquid biopsy profiling.
- **Microsatellite instability (MSI)** is an independent marker associated with response to immunotherapy and chemotherapy in advanced solid tumors.
- **Germline mutations (using white blood cell sample)** for the genetic mutations that run in families, including biallelic inactivation status.
- **Minimal residual disease (MRD)/Dynamics of ctDNA (using plasma sample)** to monitor early recurrence or assess response to therapy.

K-TRACK (n)

A **follow-up ctDNA-MRD test** leveraging the previously established personalized genomic profile for **longitudinal** monitoring.

B. METHODOLOGY

K-TRACK:

K-TRACK is a comprehensive tumor and liquid biopsy profiling assay. Genomic DNA (gDNA) was extracted from formalin-fixed paraffin-embedded (FFPE) tumor using AllPrep DNA/RNA FFPE Kit (Qiagen, Germany). gDNA was extracted from white blood cells (WBC) using GeneJET Genomic DNA Purification kit (Thermo Scientific, USA). For DNA analysis, DNA libraries from matching FFPE and WBC were prepared using the NEBNext Ultrashear FFPE DNA and NEBNext Ultra II FS DNA library preparation kits (New England Biolabs, USA) respectively, then pooled together and hybridized with probes targeting 164 genes (IDT, USA) to identify somatic and germline biomarkers. For ctDNA-MRD analysis, cell-free DNA (cfDNA) was extracted from plasma samples using the MagMAX cell-free DNA Isolation kit (Applied Biosystems, USA). cfDNA libraries barcoded with unique molecular identifiers (UMI) were prepared by the xGen™ cfDNA Library Prep v2 MC kit (IDT, USA), pooled and hybridized with custom probes (IDT, USA). All libraries were sequenced on the next-generation sequencing (NGS) platform in paired-read mode. Sequenced reads were aligned to human reference genome (GRCh38) for analysis.

DNA ANALYSIS

- For somatic mutations, variants were called using DRAGEN somatic pipeline from tumor sample and variant allele frequency (VAF) was computed using empirical read counts for each allele.
- For germline mutations, variants were called using DRAGEN germline pipeline from white blood cell sample, and pathogenicity was classified according to ACMG standards.
- For MSI, the percentage of unstable repeat loci was calculated using MSIsensor-pro, and the cut-off for MSI-High is 20%.
- For copy number variant at gene-level, DRAGEN somatic CNV pipeline was used, with copy ratio of the segment mean being ≥ 2.0 .
- For fusion mutation, in-house algorithm was used with a cut-off of at least two breakpoint-spanning reads.

ctDNA-MRD ANALYSIS

Both tumor-derived and tumor-agnostic somatic mutations, including SNVs, indels, amplification and fusions, were examined in the liquid biopsy, using in-house ultra-sensitive read-based variant calling algorithm (variant-level LOD = 0.1%). Up to 20 tumor-derived mutations were selected from paired tumor-normal sequencing data and ranked based on in-house proprietary algorithm. A sample was considered positive for ctDNA if at least one mutation was found positive in liquid biopsy (sample-level ctDNA-MRD LOD = 0.01%).

K-TRACK (n)

K-TRACK (n) is a follow-up ctDNA-MRD blood test for patients who already have K-TRACK test and an established profile of ctDNA biomarkers. Cell-free DNA (cfDNA) was extracted from plasma samples using the MagMAX cell-free DNA Isolation kit (Applied Biosystems, USA). cfDNA libraries barcoded with unique molecular identifiers (UMI) were prepared by the xGen™ cfDNA Library Prep v2 MC kit (IDT, USA), pooled and hybridized with custom probes (IDT, USA). All libraries were then sequenced on the NGS platform in paired-read mode. Both tumor-derived and tumor-agnostic somatic mutations, together with ctDNA-MRD status were examined and reported similar to K-TRACK.

C. LIMITATIONS

- The K-TRACK test CANNOT be performed on patients who meet any of the following criteria:
 - Pregnancy
 - History of bone marrow transplant
 - History of whole blood transfusion within the past three months
- The examined mutations include point mutations, short insertions and deletions (less than 20 nucleotides) in the coding region and in the vicinity of intron (20/+10 nucleotides from exon) of all the genes in the panel. For large insertions and deletions (20–500 bp) or exon-level deletions (≥ 3 exons), the test only examines *BRCA1*, *BRCA2*, *MSH6*, *PMS2*, *MSH2*, *MLH1*, *APC* genes, with a minimum VAF threshold of $\geq 25\%$.
- Detection of variants outside the coding region, large insertions and deletions in other genes, short continuous repeats (nucleotide repeats), CG-rich region, high homologous regions (pseudogenes) and mosaicism may not be reliable in this test.
- The test does not examine all genes implicated in cancer. Consequently, a negative result (indicating no detected mutations) does not definitively exclude the possibility that the participant may carry a mutation in a gene not covered by this test.
- The ctDNA test result is TIME-DEPENDENT. Therefore, a K-TRACK result indicating negative ctDNA-MRD does not provide an absolute assurance against future cancer detection or progression. Consequently, it is of utmost importance to undergo repeated analyses as directed by your physician in order to facilitate early detection of recurrence and ensure ongoing monitoring of treatment effectiveness.
- This test serves as a valuable adjunct to existing methodologies for monitoring recurrence and evaluating treatment efficacy, offering additional insights and assisting the informed decision-making process for effective treatment strategies.
- The test may not provide accurate results in the following scenarios:
 - For tumor profiling, a negative result could be false-negative due to
 - The quantity and quality of the tissue sample (FFPE) does not meet the requirements for next-generation sequencing, or
 - Tumor fraction is below 20%.
 - For liquid biopsy profiling,
 - When ctDNA level is negative, a negative result for somatic mutations could be false-negative;
 - When ctDNA level is below 2%, a negative result for amplification status could be false-negative;
 - For ctDNA-MRD detection, a negative result could be false-negative due to
 - No cancer-specific mutations are identified, or mutation is not covered by the gene panel, or
 - Poor quality of blood sample with extensive white blood cell lysis, or
 - Low cfDNA yield, resulting in cfDNA input below 15 ng, or
 - The tumor has low ctDNA-shedding rate, often attributable to factors such as tumor location and cancer type, or
 - ctDNA level is below LOD of the test.

D. SAMPLE REQUIREMENTS

FFPE TISSUE SAMPLE (choose 1 option)

- BLOCKS:** Provide FFPE tissue blocks with a tissue size of approximately 4 mm × 4 mm and a minimum total block thickness of ≥ 50 μm .
- SLIDES:** Provide 10–20 unstained slides from a single FFPE block. Slides must be unbaked and sectioned at a thickness of 7–10 μm .
- RIBBONS:** Provide FFPE tissue sectioned into ribbon form. Submit 8–12 ribbons/tube sectioned at a thickness of 10 μm , with each ribbon measuring approximately 4 mm × 4 mm. Place ribbons into 1.5 mL or 2 mL microcentrifuge tubes, using multiple tubes as required (preferably 2 tubes).

BLOOD SAMPLE

- Provide 10–20 mL of whole blood collected in Streck tubes (preferably 20 mL).

F. RESEARCH

We may use residual samples and de-identified patient information for research purposes. These studies may be published in scientific journals or used for the development of our products and services. Patients will not be notified or compensated for these research activities.

TUMOR PROFILING

164-GENE PANEL

All gene - full exon

● Amplification

● Fusion

1	ACVR2A	29	CIC	57	FGFR2 ●	85	LRP1B	113	PARP1	141	RHOA
2	AFF3	30	CREBBP	58	FGFR3 ●	86	MAP2K1	114	PBRM1	142	RNF213
3	AKT1	31	CSDE1	59	FH	87	MAP2K4	115	PDE4DIP	143	RNF43
4	ALK ●	32	CTCF	60	FHIT	88	MAP3K1	116	PDGFRA	144	ROS1 ●
5	AMER1	33	CTNNB1	61	FLT1	89	MAX	117	PDPK1	145	SETD2
6	APC	34	DICER1	62	FOXA1	90	MDM2	118	PIK3C2G	146	SF3B1
7	AR	35	DPYD	63	FOXP1	91	MED12	119	PIK3CA	147	SLC34A2
8	ARID1A	36	DNMT3B	64	GATA3	92	MEN1	120	PIK3CD	148	SLC3A2
9	ARID1B	37	DOT1L	65	GNA11	93	MET ●	121	PIK3R1	149	SMAD4
10	ARID2	38	EGFR	66	GNAS	94	MGA	122	PMS2	150	SMARCA4
11	ASXL2	39	EIF1AX	67	GRIN2A	95	MLH1	123	POLD1	151	SOX9
12	ATP1B1	40	ELF3	68	HRAS	96	MSH2	124	POLE	152	STAT5A
13	ATM	41	EP300	69	IDH1	97	MSH6	125	PRDM14	153	STK11
14	ATR	42	EPCAM	70	IDH2	98	MTOR	126	PREX2	154	TBX3
15	AXIN1	43	EPHA3	71	IGF2	99	MUTYH	127	PRKD1	155	TCF7L2
16	BCOR	44	EPHA5	72	IKZF1	100	NCOR1	128	PTCH1	156	TERT promoter
17	BRAF	45	EPHA7	73	INPP4B	101	NCOR2	129	PTEN	157	TP53
18	BRCA1	46	EML4	74	KDM6A	102	NF1	130	PTPN13	158	TPM3
19	BRCA2	47	ERBB2 ●	75	KDR	103	NFE2L2	131	PTPRB	159	TRRAP
20	BRIP1	48	ERBB3	76	KEAP1	104	NOTCH1	132	PTPRD	160	TSC1
21	CAMTA1	49	ERBB4	77	KIF5B	105	NOTCH2	133	PTPRS	161	TSC2
22	CASP8	50	ERCC3	78	KIT	106	NRAS	134	PTPRT	162	VHL
23	CD74	51	ERCC4	79	KMT2A	107	NRG1 ●	135	RAB35	163	ZFHX3
24	CDH1	52	ESR1	80	KMT2B	108	NSD1	136	RARA	164	ZNF521
25	CDK12	53	EZR	81	KMT2C	109	NTRK1 ●	137	RASA1		
26	CDKN2A	54	FAT1	82	KMT2D	110	NTRK2 ●	138	RB1		
27	CHD4	55	FAT4	83	KNSTRN	111	NTRK3 ●	139	RBM10		
28	CHEK2	56	FBXW7	84	KRAS	112	PALB2	140	RET ●		

43-GENE GERMLINE PANEL

1	ALK	9	CHEK2	17	HRAS	25	MUTYH	33	PTCH1	41	TSC1
2	APC	10	DICER1	18	KIT	26	NF1	34	PTEN	42	TSC2
3	ATM	11	DPYD	19	MAX	27	NF2	35	RET	43	VHL
4	BRCA1	12	EGFR	20	MEN1	28	PALB2	36	RNF43		
5	BRCA2	13	EPCAM	21	MET	29	PDGFRA	37	SMAD4		
6	BRIP1	14	ERCC3	22	MLH1	30	PMS2	38	SMARCA4		
7	CDH1	15	ERCC4	23	MSH2	31	POLD1	39	STK11		
8	CDKN2A	16	FH	24	MSH6	32	POLE	40	TP53		

LIQUID BIOPSY PROFILING

125-GENE PANEL FOR THORACIC CANCERS

						● Full exon	● Amplification	● Fusion			
1	ACVR2A	22	CAMTA1	43	EP300	64	KIT	85	NSD1	106	RB1
2	AFF3	23	CASP8	44	EPHA3	65	KMT2A	86	NTRK1 ●	107	RBM10
3	AKT1	24	CDC73	45	EPHA5	66	KMT2C	87	NTRK2 ●	108	RET ●●
4	ALK ●●	25	CDH1	46	EPHA7	67	KMT2D	88	NTRK3 ●	109	RNF213
5	AMER1	26	CDK12	47	ERBB2 ●●	68	KRAS ●	89	PALB2	110	RNF43
6	APC ●	27	CDKN2A	48	ERBB3	69	LRP1B	90	PBRM1	111	ROS1
7	AR	28	CDKN2B	49	ERBB4	70	MAP2K1 ●	91	PDE4DIP	112	SETD2
8	ARAF	29	CHD4	50	ESR1	71	MAP2K4	92	PDGFRA	113	SF3B1
9	ARID1A	30	CHEK2	51	FAT1	72	MAX	93	PIK3C2G	114	SMAD4
10	ARID1B	31	CIC	52	FAT4	73	MEN1	94	PIK3CA ●	115	SMARCA4 ●
11	ARID2	32	CREBBP	53	FBXW7	74	MET ●●	95	PIK3R1	116	STK11 ●
12	ASXL2	33	CSDE1	54	FGFR2	75	MGA	96	PMS2	117	TERT promoter
13	ATM	34	CTCF	55	FGFR3	76	MSH2	97	POLD1	118	TP53 ●
14	ATR	35	CTNNB1	56	FHIT	77	MTOR	98	POLE	119	TRRAP
15	AXIN1	36	DDR2	57	FOXA1	78	NCOR1	99	PREX2	120	TSC1
16	B2M	37	DICER1	58	GATA3	79	NF1	100	PRKD1	121	TSC2
17	BARD1	38	DNMT1	59	GRIN2A	80	NFE2L2	101	PTEN	122	TSHR
18	BCOR	39	DNMT3B	60	HRAS	81	NOTCH1	102	PTPRB	123	ZFHX3
19	BRAF ●	40	EGFR ●	61	IDH1	82	NOTCH2	103	PTPRD	124	ZMYM3
20	BRCA1	41	EIF1AX	62	INPP4B	83	NRAS ●	104	PTPRS	125	ZNF521
21	BRCA2	42	ELF3	63	KEAP1 ●	84	NRG1	105	PTPRT		

113-GENE PANEL FOR DIGESTIVE CANCERS

						● Full exon	● Amplification	● Fusion			
1	ACVR2A	20	BRCA1 ●	39	ERBB4	58	KMT2C	77	NTRK3 ●	96	RNF43
2	ADGRG6	21	BRCA2 ●	40	ESR1	59	KMT2D	78	PALB2 ●	97	ROS1
3	AFF3	22	CAMTA1	41	FANCA	60	KRAS ●	79	PBRM1	98	RPTOR
4	AKT1	23	CASP8	42	FAT1	61	LRP1B	80	PDE4DIP	99	SETD2
5	ALK	24	CDH1	43	FAT4	62	MAP2K1	81	PDGFRA ●	100	SF3B1
6	AMER1	25	CDK12	44	FBXW7	63	MAP3K1	82	PIK3CA ●	101	SMAD4
7	ANKRD11	26	CDKN2A	45	FGFR2 ●	64	MET ●●	83	PIK3R1	102	SMARCA4
8	APC ●	27	CIC	46	FGFR3 ●	65	MSH6	84	POLD1	103	SOX9
9	AR	28	CREBBP	47	FOXP1	66	MTOR	85	POLE ●	104	STK11
10	ARAF	29	CTCF	48	GATA3	67	NCOR1	86	PREX2	105	TCF7L2
11	ARID1A	30	CTNNB1	49	GNAS	68	NF1	87	PTEN	106	TERT
12	ARID1B	31	DOT1L	50	GRIN2A	69	NFE2L2	88	PTPN13	107	TP53 ●
13	ARID2	32	EGFR	51	HRAS	70	NOTCH1	89	PTPRB	108	TRRAP
14	ATM	33	ELF3	52	IDH1 ●	71	NOTCH2	90	PTPRT	109	TSC1
15	ATR	34	EP300	53	IDH2 ●	72	NRAS ●	91	RB1	110	TSC2
16	AXIN1	35	EPCAM	54	KDM6A	73	NRG1	92	RBM10	111	TSHR
17	B2M	36	EPHA5	55	KEAP1	74	NSD1	93	RET ●●	112	ZFXH3
18	BCOR	37	ERBB2 ●●	56	KIT ●	75	NTRK1 ●	94	RHOA	113	ZNF521
19	BRAF ●	38	ERBB3	57	KMT2A	76	NTRK2 ●	95	RNF213		

149-GENE PANEL FOR BREAST & GYNECOLOGICAL CANCERS

149-GENE PANEL FOR BREAST & GYNECOLOGICAL CANCERS						● Full exon	● Amplification	● Fusion			
1	ACVR2A	26	CHD7	51	GLI1	76	MED12	101	PIK3CA ●	126	SF3B1
2	AFF3	27	CIC	52	GLI2	77	MEN1	102	PIK3R1	127	SMAD4
3	AKT1 ●	28	CREBBP	53	GNAS	78	MET ●●	103	PMS2	128	SMARCA4
4	ALK	29	CTCF	54	GRIN2A	79	MGA	104	POLD1	129	SMARCB1
5	AMER1	30	CTNNB1	55	HRAS	80	MLH1	105	POLE ●	130	SMYD3
6	APC ●	31	DICER1	56	IDH1	81	MRE11	106	PPP2R1A	131	SNCAIP
7	AR	32	DNMT3A	57	IDH2	82	MTOR	107	PRDM14	132	SOX9
8	ARID1A	33	DOT1L	58	IGF1R	83	NCOR1	108	PREX2	133	SPEN
9	ARID1B	34	EGFR	59	IKZF1	84	NCOR2	109	PRKD1	134	SPOP
10	ARID2	35	EP300	60	IRS1	85	NF1	110	PTEN ●	135	STAG2
11	ATM	36	ERBB2 ●●	61	JAK1	86	NFE2L2	111	PTPN13	136	STAT5A
12	ATR	37	ERBB3	62	JAK3	87	NOTCH1	112	PTPRB	137	STK11
13	AXIN1	38	ERBB4	63	KDM5A	88	NOTCH2	113	PTPRD	138	STK40
14	BAP1	39	ERCC3	64	KDM5C	89	NOTCH4	114	PTPRT	139	TBX3
15	BCOR	40	ERCC4	65	KDM6A	90	NRAS	115	RAD54L	140	TCF7L2
16	BRAF ●	41	ESR1 ●	66	KEAP1	91	NRG1	116	RARA	141	TEK
17	BRCA1 ●	42	FAT1	67	KIT	92	NSD1	117	RASA1	142	TOP1
18	BRCA2 ●	43	FAT4	68	KMT2A	93	NTRK1 ●	118	RB1	143	TP53 ●
19	BRD4	44	FBXW7	69	KMT2C	94	NTRK2 ●	119	RBM10	144	TRRAP
20	CASP8	45	FGFR2	70	KMT2D	95	NTRK3 ●	120	RET ●●	145	TSC1
21	CBFB	46	FGFR3	71	KRAS ●	96	PALB2 ●	121	RNF213	146	TSC2
22	CDH1	47	FOXA1	72	LRP1B	97	PARP1	122	RNF43	147	VHL
23	CDK12	48	FOXP1	73	MAP2K4	98	PBRM1	123	ROS1	148	ZFXH3
24	CDKN2A	49	GABRG1	74	MAP3K1	99	PDE4DIP	124	RUNX1	149	ZNF521
25	CHD4	50	GATA3	75	MAX	100	PIK3C2G	125	SETD2		