

### **Laboratory Service Report**

## 1-800-533-1710

Patient Name SAMPLEREPORT,EGFR	Patient ID SA00043353	<b>Age</b> 45	Gender F	Order # SA00043353
Ordering Phys			•	<b>DOB</b> 06/10/1966
Client Order # SA00043353	Account Information			Report Notes
<b>Collected</b> 02/08/2012 13:00	C7028846-DLMP ROC 3050 SUPERIOR DRIV	/E		
<b>Printed</b> 02/10/2012 10:11	ROCHESTER,MN 559	01		

Test	Flag	Results	Unit	Reference Value	Perform Site
Gene, Mutation Analysis, Tur	nor		REPORTED 0	2/09/2012 14:20	
Specimen		Tissue			MCI
Specimen ID		1037730			MCI
Order Date		09 Feb 2012 14:02			MCI
Reason for Referral					MCI
Evaluate tumor DNA for pr	resence of a mu	tation in exons 18-21			
of the EGFR gene.					
lethod					MCI
A PCR based assay employs	ing allele spec	ific amplification			
was used to test for the	presence of 29	mutations within			
exons 18-21 of the EGFR of	gene (G719A, G7	19S, G719C in exon			
18; small deletions in ex	kon 19; T790M,	S768I, and small			
insertions in exon 20; ar	nd L858R and L8	61Q in exon 21).			
Mutation nomenclature is	based on GenBa	nk accession number;			
NM005228.3.					
esult					MCI
Tumor type: Non-small	cell lung canc	er			
EGFR status: Wild-type					
Interpretation					MCI
Current data suggest that	t patients with	non-small cell lung			
cancer with mutations in	the tyrosine k	inase domain (exons			
18-21) of EGFR may respon	nd to EGFR tyro	sine kinase inhibitor			
therapies. Thus, the abs	sence of an EGF	R mutation within			
this tumor specimen sugge	ests that these	therapies may have			
limited therapeutic value	e for this pati	ent.			
The predictive value of B	EGFR testing ap	plies to EGFR			
tyrosine kinase inhibitor	r therapies, no	t to other			

This result does not rule out the presence of a mutation that may be present but below the limits of detection for this assay (approximately 10%) or an EGFR mutation that is not part of this panel. It is estimated that this panel detects greater than 95% of pathogenic mutations in exons 18-21 of the EGFR gene.

Consideration of these results, in light of other clinical information, may aid in clinical management decisions for this patient.

#### CAUTIONS:

Rare polymorphisms exist that could lead to false negative or false positive results. Test results should be  ${\sf Polymorphisms}$ 

## \*\*\*Performing Site Legend on Last Page of Report\*\*\*

Patient Name	Collection Date and Time	Report Status	
SAMPLEREPORT,EGFR	02/08/2012 13:00	Final	
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<b>Collected</b> 02/08/2012 13:00	C7028846-DLMP ROCHESTER 3050 SUPERIOR DRIVE				
<b>Printed</b> 02/10/2012 10:11	ROCHESTER,MN 55	901			

Test Flag Results Unit Value Site\*

interpreted in context of clinical findings, tumor sampling, and other laboratory data. If results obtained do not match other clinical or laboratory findings, please contact the laboratory for possible interpretation. Misinterpretation of results may occur if the information provided is inaccurate or incomplete.

For research use only.

Reviewed By: Release Date

Benjamin Robert Kipp 09 Feb 2012 14:17

MCR MCR

#### \* Performing Site:

MCR Mayo Clinic Dpt of Lab Med & Pathology 200 First St SW Rochester, MN 55905 Lab Director: Franklin R. Cockerill, III, M.D.

Patient Name	Collection Date and Time	Report Status
SAMPLEREPORT,EGFR	02/08/2012 13:00	Final
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