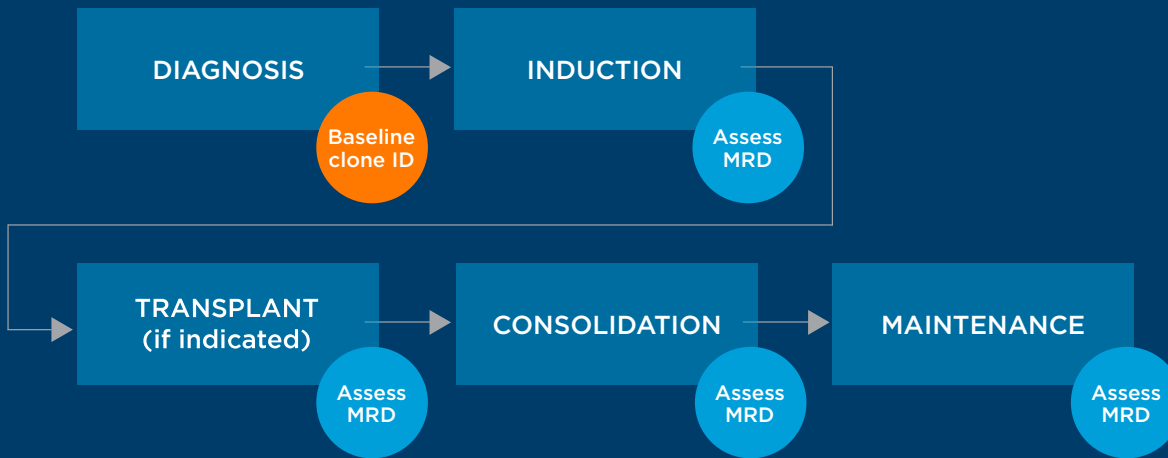


NCCN Clinical Practice Guidelines in Oncology (NCCN Guidelines®)¹



Diagnostic workup

Consider baseline clone identification and storage of aspirate sample for future MRD testing by NGS.

Minimal residual disease (MRD) assessment:

- MRD testing is recommended at multiple times during and after treatment
- Consider MRD as indicated for prognostication after shared decision making with patient

Reference:

1. Referenced with permission from the NCCN Clinical Practice Guidelines in Oncology (NCCN Guidelines®) for Multiple Myeloma V.7.2021. © National Comprehensive Cancer Network, Inc. 2021. All rights reserved. Accessed July 29, 2021. To view the most recent and complete version of the guideline, go online to [NCCN.org](https://www.nccn.org). NCCN makes no warranties of any kind whatsoever regarding their content, use or application and disclaims any responsibility for their application or use in any way.

clonoSEQ® is available as an FDA-cleared *in vitro* diagnostic (IVD) test service provided by Adaptive Biotechnologies to detect minimal residual disease (MRD) in bone marrow from patients with multiple myeloma or B-cell acute lymphoblastic leukemia (B-ALL) and blood or bone marrow from patients with chronic lymphocytic leukemia (CLL). clonoSEQ is also available for use in other lymphoid cancers and specimen types as a CLIA-validated laboratory developed test (LDT). For important information about the FDA-cleared uses of clonoSEQ including test limitations, please visit clonoSEQ.com/technical-summary.