Multiple myeloma. CLL. B-ALL. It's a journey.

PINPOINT WHERE YOUR BLOOD CANCER STANDS WITH clonoSEQ®

clonoSEQ®
By Adaptive

What is MRD?

Minimal residual disease (MRD) is one of the strongest predictors of outcomes in multiple myeloma, CLL, and B-ALL[1-3]

MRD refers to the number of cancer cells that can stay in the body during and after treatment. These cells are at such low levels that they do not cause any physical signs or symptoms. But that doesn't mean the cancer is totally gone.[4]

Therefore, your doctor needs very precise options, like clonoSEQ, to help measure MRD and assess your response to treatment over time.[4-8]

Today, new treatments are helping patients like you live longer than ever before. If you are a candidate for clonoSEQ, reliable and precise MRD testing with clonoSEQ can:

- **Tell you how much cancer is detected even when the cancer is still at a very low level**
- **Help your doctor measure your response to treatment**
- **Help you and your doctor understand your prognosis now or at any point in your disease journey[4]**

This knowledge can support shared decision-making about your future treatment plans.

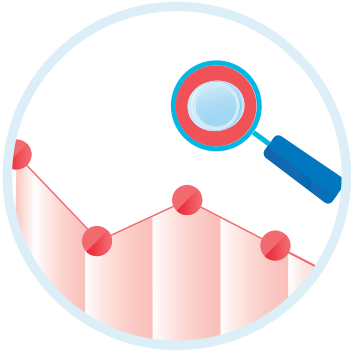
When your MRD status shifts, you may find that the course of your blood cancer journey changes as well.

Why clonoSEQ?

clonoSEQ can detect 1 single cancer cell among a million healthy cells*

What does 1 in a million mean to you? It means that you and your doctor can **pinpoint where you are on your blood cancer journey**. By precisely tracking MRD both during and after treatment, you and your doctor can be more informed about your response to therapy—and can plan next steps accordingly.[4]

With clonoSEQ, you and your doctors can help:



MONITOR

your cancer by assessing treatment response and changes in disease burden[4]

MAXIMIZE

the information available to help long-term care decisions[1-3]

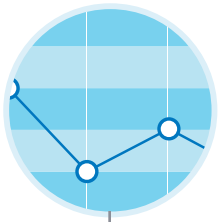
MOVE FORWARD

with more confidence when planning for all of life's moments

References to "cancer" refer specifically to multiple myeloma, CLL and B-ALL. References to "sample" refer to bone marrow or blood from patients with CLL and bone marrow from patients with multiple myeloma or B-ALL. Talk with your doctor about your options if you have another type of blood cancer and are interested in MRD testing.

*If enough sample material is provided.

Understanding the clonoSEQ patient journey

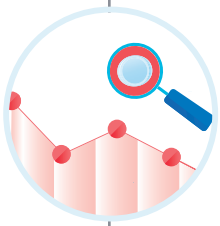


How does clonoSEQ work?

clonoSEQ identifies the specific DNA sequence(s) associated with your cancer and tracks them over time.[4]

Testing regularly can help monitor changes in your disease.

How can clonoSEQ results help shape your care plan?



The results from MRD testing with clonoSEQ, along with other clinical information, may help your doctor tailor your care to changes in your disease level.[9-11]

Talk with your doctor to find out if a goal of MRD negativity is right for you.

Why is ongoing clonoSEQ testing useful?

clonoSEQ gives you and your doctor a personalized way to track—and talk about—your body's individual response to treatment.

Regular MRD testing can give you and your doctor additional important information to make decisions at each stage of treatment.[9-11]

Why should I test when I'm not experiencing any symptoms?

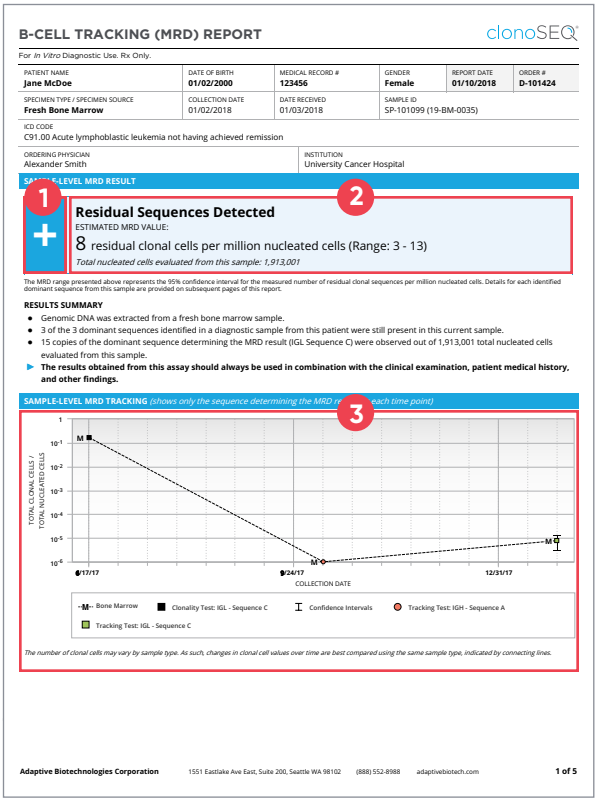
Even if you aren't experiencing any symptoms, you may still feel anxious or worried that the cancer will return.

Routine MRD testing may help detect the return of cancer before physical signs and symptoms arise, so you and your doctor can respond—and plan for the future.[9-11]

What does your clonoSEQ report mean?

Adaptive Biotechnologies delivers MRD results from your clonoSEQ test to your doctor as a report. Your doctor considers the information in this report along with your physical examination, your medical history, and other test results and findings.

Be sure to talk with your doctor about the optimal timing for MRD testing with clonoSEQ based on the type of blood cancer you have and your specific treatment plan.



B-CELL TRACKING (MRD) REPORT

clonoSEQ

For *In Vitro* Diagnostic Use. Rx Only.

PATIENT NAME	DATE OF BIRTH	MEDICAL RECORD #	GENDER	REPORT DATE	ORDER #
Jane McDoe	01/02/2000	123456	Female	01/10/2018	D-101424

SPECIMEN TYPE / SPECIMEN SOURCE	COLLECTION DATE	DATE RECEIVED	SAMPLE ID
Fresh Bone Marrow	01/02/2018	01/03/2018	SP-101099 (19-BM-0035)

ICD CODE
C91.00 Acute lymphoblastic leukemia not having achieved remission

ORDERING PHYSICIAN	INSTITUTION
Alexander Smith	University Cancer Hospital

SAMPLE-LEVEL MRD RESULT

1 +

2 **Residual Sequences Detected**
ESTIMATED MRD VALUE:
8 residual clonal cells per million nucleated cells (Range: 3 - 13)
Total nucleated cells evaluated from this sample: 1,913,001

The MRD range presented above represents the 95% confidence interval for the measured number of residual clonal sequences per million nucleated cells. Details for each identified dominant sequence from this sample are provided on subsequent pages of this report.

RESULTS SUMMARY

- Genomic DNA was extracted from a fresh bone marrow sample.
- 3 of the 3 dominant sequences identified in a diagnostic sample from this patient were still present in this current sample.
- 15 copies of the dominant sequence determining the MRD result (IGL Sequence C) were observed out of 1,913,001 total nucleated cells evaluated from this sample.
- **The results obtained from this assay should always be used in combination with the clinical examination, patient medical history, and other findings.**

SAMPLE-LEVEL MRD TRACKING *(shows only the sequence determining the MRD result at each time point)*

3

The number of clonal cells may vary by sample type. As such, changes in clonal cell values over time are best compared using the same sample type, indicated by connecting lines.

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*False-positive or false-negative results may occur for reasons including, but not limited to: contamination, technical, and/or biological factors.

See what a clonoSEQ report includes

clonoSEQ is sensitive enough to find a single cancer cell among a million healthy cells, if enough sample material is provided.[4]

1 clonoSEQ MRD Status

A positive (+) result means residual disease was detected. A negative (-) result means residual disease was not detected. Each report will provide your updated MRD status.* You can gain valuable insights about your cancer regardless of whether you have a positive or negative result. **Talk to your doctor about your MRD status to better understand what a positive or negative result means for you and your treatment plan.**

2 MRD Level

This is the amount of cancer cells detected in your sample. This number shows how much disease is present in your sample when it is taken. **Your doctor can help put this number into context based on your current phase of care and treatment goals.**

3 MRD Trend

A simple graph will show any changes detected in your MRD level over time. **Watching these changes may help you and your doctor better understand your response to treatment and track changes in your cancer over time.**

Talk to your doctor about clonoSEQ

Here are some questions to help you start a conversation with your doctor about how MRD testing with clonoSEQ can help inform your treatment plan.

- **What is MRD?**
- **Is MRD testing with clonoSEQ right for me?**
- **I heard that clonoSEQ can identify 1 cancer cell out of a million cells with sufficient sample.[1] Why does that matter to someone like me?**
- **What can MRD testing with clonoSEQ tell me about my cancer?**
- **How will MRD results from a clonoSEQ test affect my treatment plan?**
- **How often should I get a clonoSEQ test?**
- **What does a positive or negative MRD status with clonoSEQ mean for me?**
- **Is the goal of MRD negativity with clonoSEQ right for me?**

Adaptive Assist™ Patient Support Program

Adaptive assist™

How we help:
Broad billing support tailored to each patient's needs

- Understand Coverage
- Navigate Insurance
- Get a Good Faith Estimate
- Receive Individualized Support

Call 1 (855) 236-9230 to get started!

A comprehensive program to support patient with access to clonoSEQ MRD testing.

- **Upfront out-of-pocket and Good Faith Estimates**
- **Prior authorization management**
- **Appeal for maximum benefits and lowest out-of-pocket costs**
- **Assistance with out-of-pocket costs after coverage for qualifying patients**

For more information please visit
Adaptive-Assist.com

SCAN ME

If you are a patient with multiple myeloma, CLL, or B-ALL, you may be wondering what's next

Please visit clonoSEQ.com/patients for more information

SCAN ME

Don't forget to download the Doctor Discussion Guide to bring to your next appointment

Talk with your doctor to begin tracking your MRD status with clonoSEQ today

clonoSEQ® is an FDA-cleared test used 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). CLL Clonality (ID) Tests will also produce an IGHV status result, which is provided as a CLIA-validated laboratory developed test (LDT) but which has not been cleared or approved by the FDA. Additionally, clonoSEQ is available for use in other lymphoid cancers and specimen types as a CLIA-validated LDT. For important information about the FDA-cleared uses of clonoSEQ including test limitations, please visit clonoSEQ.com/technical-summary.

1. Munshi N, et al. *Blood Adv*. 2020;4(23):5988-5999. **2.** Berry D, et al. *JAMA Oncol*. 2017;3(7):e170580. **3.** Molica S, et al. *Clin Lymphoma Myeloma Leuk*. 2019;19(7):423-430. **4.** clonoSEQ®. [technical summary]. Seattle, WA: Adaptive Biotechnologies; 2020. http://www.clonoseq.com/technical-summary/ **5.** Pulsipher M, et al. *Blood*. 2015;125(22):3501-3508. **6.** Wood B, et al. *Blood*. 2018;131(12):1350-1359. **7.** Perrot A, et al. *Blood*. 2018;132(23):2456-2464. **8.** Thompson P, et al. *Blood*. 2019;134(22):1951-1959. **9.** Martinez-Lopez J, et al. *J Hematol Oncol*. 2021;14(1):126. **10.** Friend B, et al. *Pediatr Blood Cancer*. 2020;67(2):e28079. **11.** Al-Sawaf O, et al. *J Clin Oncol*. 2021;JCO2101181.

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