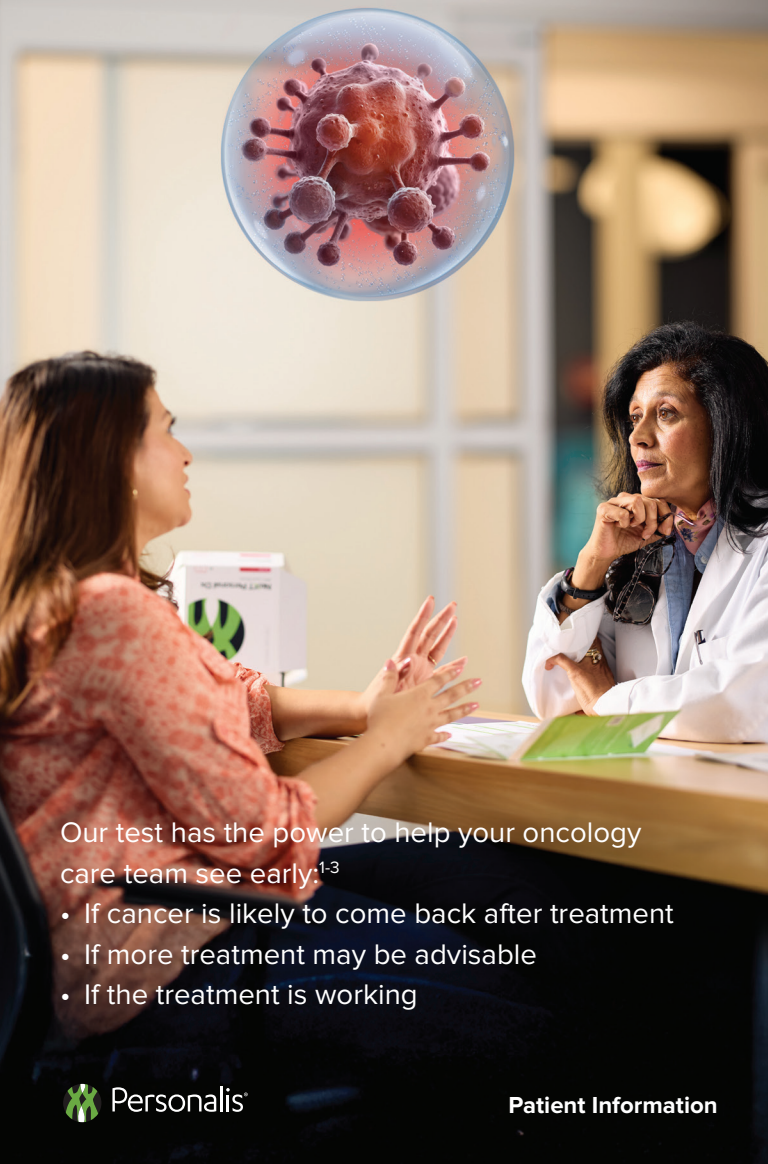
NeXT Personal® Dx

Tissue-based ctDNA Liquid Biopsy

Designed to see the smallest traces of breast cancer recurrence, early[1-3]



Our test has the power to help your oncology care team see early:[1-3]

- If cancer is likely to come back after treatment
- If more treatment may be advisable
- If the treatment is working

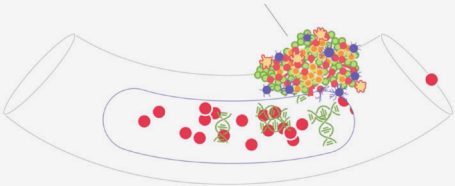
Personalis®

Patient Information

What is circulating tumor DNA (ctDNA) testing:

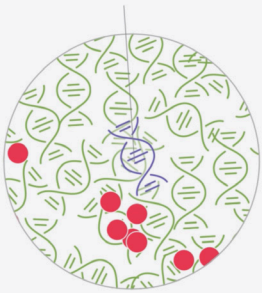
When you have cancer, there are cells in your body that aren't normal. These are called tumor cells.

Tumor



As tumor cells grow and die, tiny pieces of DNA from those cells can break off and float around in your blood.

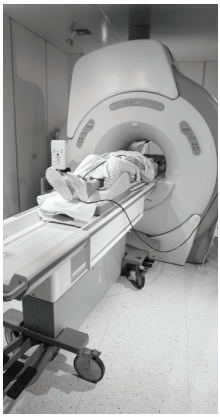
Fragment of cancer DNA



This DNA from tumor cells that's floating in your blood is called circulating tumor DNA (ctDNA).

Doctors can take a blood sample and look for this ctDNA using our test.

Why are more doctors ordering ctDNA testing?



In a study of 78 patients, the NeXT Personal® ctDNA test detected breast cancer **up to 5 years ahead of scans with a median lead time of ~15 months.**[1]

Our test has the power to help your oncology care team see early:[1-3]

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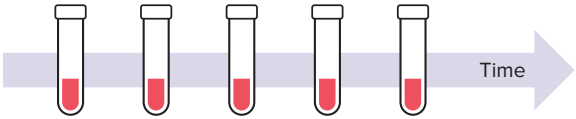
How can ctDNA help monitor disease over time?

Similar to your regular scan and blood tests, it is important to give blood samples periodically for this test.

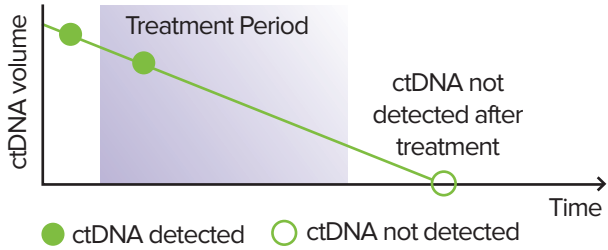
This helps your doctor monitor the status of your cancer.



The amount of ctDNA in your blood can change over time.

ctDNA volume can change in response to treatment: decreases in ctDNA over time can be associated with the treatment working to reduce cancer.[3]

For illustrative purposes



After treatment is over, very small traces of ctDNA can be difficult to detect.

Repeat testing can help to detect ctDNA traces if they ever increase, potentially months before cancer recurrence is seen on scans.[1,3]

After completion of treatment, patient blood was repeatedly tested for ctDNA. **100% of patients** who had undetectable ctDNA for all tests performed **did not have cancer recurrence.**[1]

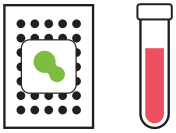
This NeXT Personal study tracked patients for a median **follow-up period of 6.3 years.**[1]

Patients with repeatedly undetectable ctDNA throughout treatment were highly likely to remain cancer-free for years following the completion of treatment.

If ctDNA is detected or rising, your doctor may order additional scans. If you are on treatment while ctDNA is rising, your care team may update your treatment plan using this information.

We design a **NeXT Personal Dx** test for each patient to detect the **smallest traces of ctDNA**

1. To create your personalized test, we gather samples of your blood and the tumor.



2. We analyze the tumor and find up to ~1800 DNA markers that are present in that specific tumor, but not present in healthy blood. This enables us to create a personalized test.

3. Your personalized test informs you and your clinical team about the presence of small traces of cancer called ctDNA in the blood.

Frequently asked questions:

Does this test replace cancer screening tests?

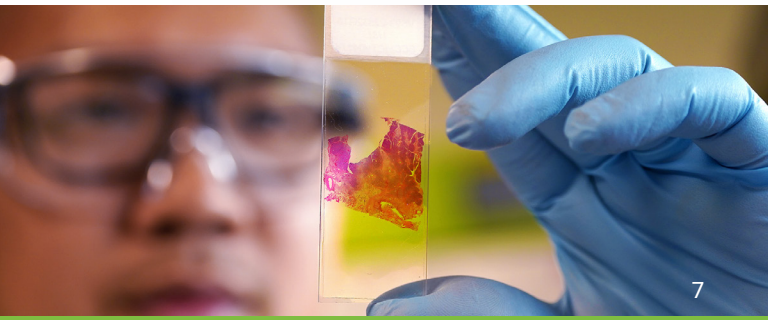
NeXT Personal Dx is to be used in conjunction with other tests, and is not designed to replace regular cancer screening tests, such as mammograms. The use of the NeXT Personal Dx Test does not replace, supersede, or otherwise alter the use or frequency of medically established cancer detection modalities.

This test is specifically used for monitoring patients who have already been diagnosed with cancer and are undergoing treatment or follow-up care.

When can I expect results?

It takes approximately 4 to 5 weeks to develop your personalized test for the first time. This includes analysis of tumor tissue to find unique mutations to track in healthy blood.

Subsequent testing will take 10-15 days to process after we receive each blood sample.



Our team is here for you.

clientservices@personalis.com
(855) 373-7978
(M–F 6am–5pm PST)

Backed by data

References:

1. Garcia-Murillas, I. et al. (2025, February 04). Whole genome sequencing-powered ctDNA sequencing for breast cancer detection. ESMO Annals of Oncology. https://www.annalsofoncology.org/article/S0923-7534(25)00053-5/ **2.** Waks, A., et al. (2024, June 2). Prevalence and dynamics of circulating tumor DNA among patients with HER2+ Breast Cancer receiving Neoadjuvant paclitaxel/trastuzumab/pertuzumab (THP) in the DAPHNe trial. ASCO Annual Meeting, Chicago, IL, United States. **3.** De Almeida Toledo, R., et al. (2024, June 4). Prognostic and predictive value of ultrasensitive ctDNA monitoring in a metastatic pan-cancer cohort treated with immune checkpoint inhibitors in the context of phase 1 clinical trials. ASCO Annual Meeting, Chicago, IL, United States.

This test is a laboratory developed test (LDT) and is performed in the CAP accredited, CLIA-certified Personalis Clinical Laboratory. The test was developed, and its performance characteristics determined by the Personalis Clinical Laboratory. It has not been cleared or approved by the United States Food and Drug Administration (FDA).

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