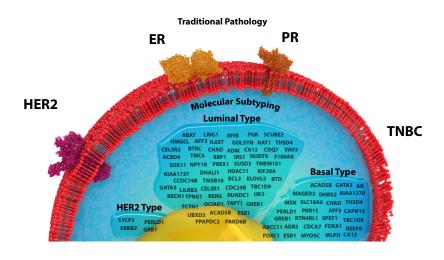
BluePrint® Functional Molecular Subtyping

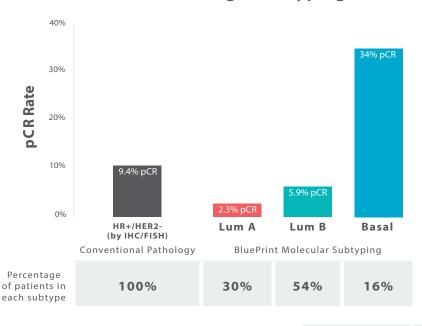


BluePrint, the 80-gene molecular subtyping assay, goes beyond the cell surface to evaluate the underlying biology of a tumor and what is driving its growth.



Informs treatment planning in the pre-operative setting

Standard Pathologic Subtyping vs. BluePrint Molecular Subtyping¹



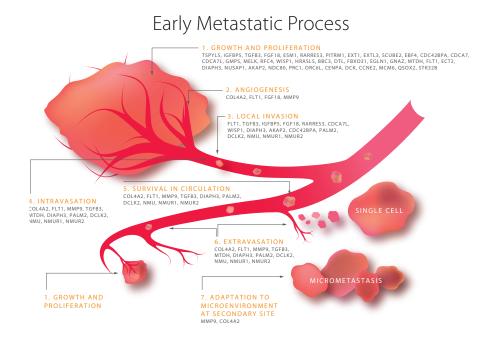
- Further subdivides pathologically luminal tumors (HR+) into low risk Luminal A and high risk Luminal B subtypes.
- Reclassifies as many as 1 in 5
 patients' pathologically HR+
 tumors into high risk Basal-Type
 tumors.¹⁻³

- High risk Luminal B-Type patients experience worse outcomes than Luminal A-Type patients.⁴
- As expected, pCR rates in HER2-Type and Basal-Type patients correlate with long-term outcomes.⁴

BluePrint Subtyping	pCR Rate (%)	5-Year DMFS by Response		
Luminal A-Type	5/90 (6%)	pCR no pCR	75% 94%	p= N.S.
Luminal B-Type	16/154 (10%)	pCR no pCR	85% 72%	p= N.S.
HER2-Type	33/70 (47%)	pCR no pCR	91% 64%	p= 0.019
Basal-Type	45/123 (37%)	pCR no pCR	91% 54%	p<0.001

MammaPrint® Risk of Recurrence Testing

MammaPrint, the 70-gene breast cancer recurrence assay, is the first FDA-cleared and CE-marked risk-of-recurrence test backed by peer-reviewed, prospective outcome data and included in major treatment guidelines.¹

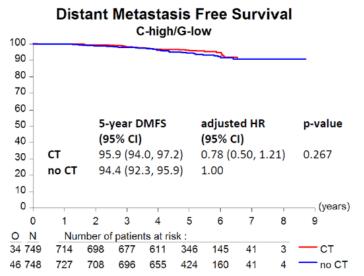


- Interrogates genes involved in every step of the metastatic cascade.
- Results are independent of and complementary to standard IHC/FISH testing.



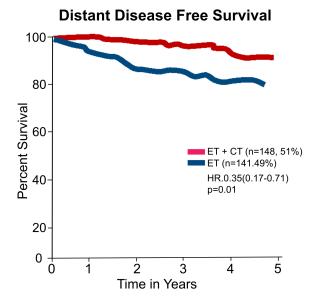
Provides insight into the benefit of post-operative treatment

Prospective, Randomized MINDACT Trial²



MammaPrint Low Risk patients may safely forego adjuvant chemotherapy.

Chemotherapy Prediction³



MammaPrint High Risk patients have significantly better outcomes with chemotherapy.