

KEY FINDING

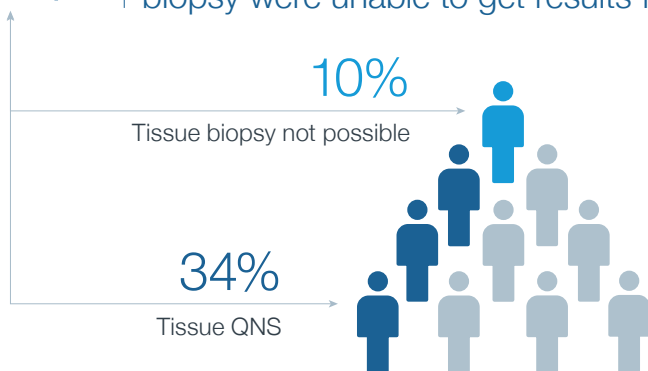
> Incorporating Guardant360 into routine clinical management of advanced NSCLC nearly doubled the number of patients identified with clinically actionable mutations compared to using tissue genotyping alone

STUDY OVERVIEW



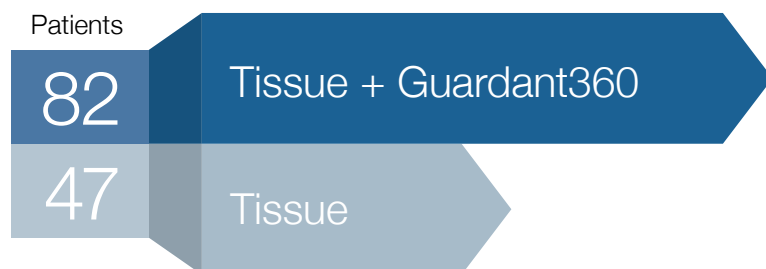
Published in *JAMA Oncology*, this **large, prospective study** enrolled 323 patients with advanced NSCLC and concluded that routine use of Guardant360 can increase the likelihood of finding targetable mutations.

44% of patients who were eligible for a tissue biopsy were unable to get results from tissue



For patients at diagnosis, a concordance of approximately 90% was reported for Guardant360 and tissue testing

Guardant360 nearly doubled the number of patients found with targetable mutations



WHAT KOLs HAVE SAID

“These results, combined with the patient satisfaction with the relative ease of providing blood rather than a solid tissue sample, suggest a clinical strategy of **pursuing plasma NGS first**, then tissue NGS if plasma NGS cannot detect relevant mutations.”¹

Guardant360 provides genomic data in 7 days and is covered by Medicare for advanced NSCLC

REFERENCES: Clinical Implications of Plasma-Based Genotyping With the Delivery of Personalized Therapy in Metastatic Non-Small Lung Cancer 2018 *JAMA Oncol* 1. Gyawali, and West 2018 *JAMA Oncology* editorial