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Hematology Profile Plus and Liquid Trace® Hematology

A better way to evaluate patients for Leukemia

One test that provides comprehensive answers for diagnosis and classification. Providing an evaluation of clinically relevant DNA and RNA genes associated with tumor biology to characterize all types of leukemia.

Diagnostic Information

Can help differentiate myeloid and lymphoid diseases as well as overlapping or concurrent diseases

No need for dividing cells for karyotype analysis, next-gen sequencing can detect chromosomal abnormalities

Differentiation of gains, losses and fusions

Reporting of relevant gene expression - (reporting of Philadelphia like ALL)

Identify T-and B-cell clonality for diagnosis and monitoring

Up to date testing for **common and rare fusions** that are clinically relevant like JAK2-PCM1 fusion and other novel fusions beyond the >1,600 genes

Al softwares can make inferences on a larger data set than traditional pathology workups

Detection of HPV, EBV, TTV, and HTLV-1

And numerous other applications

GTC Hematology Profile Plus: A better way to diagnose Acute Myeloid Leukemia (AML)

Differentiation between subtypes of acute myeloid leukemia, and identification of prognostic findings and targetable mutations requires comprehensive testing for mutations, copy number variants and fusions.



Example of AML with KMT2A-PTD. KMT2A partial tandem duplication spans exons 2 through 8-10, which GTC is able to identify by evaluating copy number variation over the whole length of the gene.

GTC Hematology Profile Plus provides:

- Complete RNA expression phenotype profiling combined with Al algorithm can help with subclassification of challenging cases including mixed phenotype acute leukemias
- Expedited preliminary reporting for FLT3-ITD is available
- Emerging therapeutic markers included. For example, detect NPM1 mutations, KMT2A rearrangements and KMT2A partial tandem duplication (PTD), which may respond to Menin inhibitors

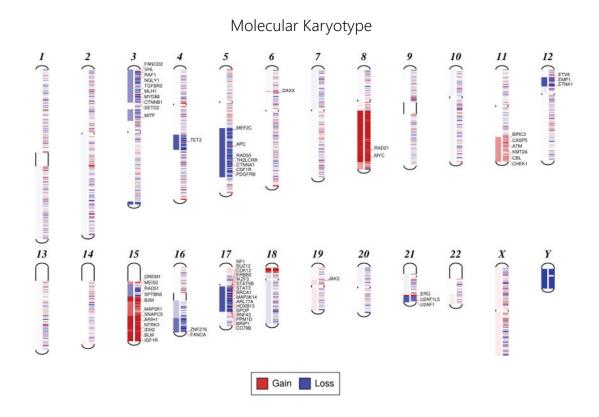


Treatment information

Don't accept partial results missing information will impact treatment decisions.

When evaluating a patient, symptoms can often be misleading but molecular information can help provide clarity on the actual disease state, prognosis and aid in therapy selection.

GTC delivers results in 5-10 days so you can begin treating patients faster.



What's included:

All relevant genes for targeted therapies are reported

IgHV mutation analysis for CLL included

Detection of CAR-T therapies interacting with disease

Distinguish between VEXAS and MDS

Monitoring of disease to determine response to therapy and transformation of disease

Pre- and post-transplant monitoring – recipient vs donor

Identification of resistance genes (BTK, PLC Gamma2, ABL1 kinase, etc.)