NOTHING
IS SIMPLE
IN ONCOLOGY.

NOTHING BUT THIS.

Idylla™ A revolutionary, fully automated system that makes molecular testing convenient and exceptionally fast. Suitable for any lab.

BIOCARTIS

WE AIM TO PROVIDE DIRECT ACCESS TO PERSONALIZED MEDICINE FOR PATIENTS WORLDWIDE

"We develop fully integrated and broadly applicable molecular diagnostics. Our platform can be used in a wide variety of healthcare settings to enable rapid and high-quality care close to patients"

THE NEED FOR IMPROVED, STANDARDIZED AND FAST DIAGNOSTICS

Cancer can hit anyone at any time and treatment remains a real challenge. Because cancer doesn't follow rules. It fights back against therapies. It adapts. It changes its path. It does whatever it can to stay ahead of us.

At the advanced edge of oncology, **rapid access** to **accurate data** about relevant cancer mutations and treatment resistance is vital and creates the opportunity for early disease interception[4,5] reducing the anxiety while waiting for results and the time before starting the best possible treatment.

Current technologies in molecular oncology are complex, require a lot of hands-on time and are often difficult to implement in the local laboratory. As a consequence, most laboratories do not perform molecular tests in-house, but send them out to specialized centers, where samples are batched in order to optimize costs.[1–3]

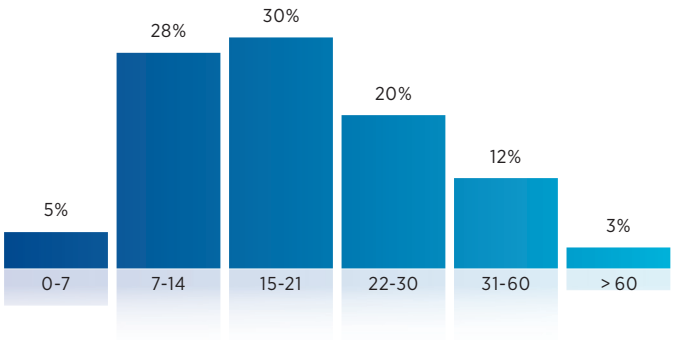
This causes delay to the fast delivery of results, preventing rapid initiation of correct therapy. In the meantime the tumor grows, which is detrimental in case of aggressively growing cancers.

THE NEED FOR A RAPID TREATMENT INITIATION RESPONSE TOWARDS PATIENTS

Fast initiation of immunotherapy or targeted therapy as first-line treatment is crucial for cancer patients, as it increases overall survival rates.[9,10,11,17,22] Timely detection of biomarkers therefore is very important.

Today, turnaround times of reference technologies are on average 18 days, with 14% of patients waiting longer than a month to be able to start treatment. Ninety-five percent of the patients have to wait more than a week in order to receive the biomarker results.[6]

This means that precious time is lost whereas treatment initiation could have been started and unnecessary use of chemotherapy with its side effects could have been avoided.



TOTAL TURNAROUND TIME OF REFERENCE TECHNOLOGIES

IDYLLA™, THE NEXT LEVEL IN DISEASE INTERCEPTION

Idylla™, a **fully automated**, sample-to-result PCR based **molecular diagnostics** system, provides **same-day** results enabling physicians to make **timely decisions** on patients' therapy.

Idylla™, can be used with **multiple sample types**, including **solid** and **liquid biopsies**. This flexibility allows use of the system for respectively **diagnosis**, and **research** or possibly future **monitoring** applications.

Idylla™, with its **compact scalable design** and **outstanding ease-of-use**, overcomes the traditional barriers of molecular diagnostics, allowing it to be used in virtually **any laboratory setting**.

* e.g. deparaffinization for FFPE tissue samples

IDYLLA™ IS THE FIRST AND ONLY MOLECULAR DIAGNOSTIC SYSTEM THAT COMBINES

FAST RESULTS
- Less than 2 minutes hands-on time
- Short turnaround time - 85 to 150 minutes

ACCURATE RESULTS
- High sensitivity
- Highly standardized technology
- contamination-controlled design

ACCESSIBLE
- Access on demand - no need for pre-processing or batching

MULTIPLEXING CAPABILITY
- Detection of up to 51 relevant mutations in one cartridge
- Multiple genes and loci detection in one cartridge

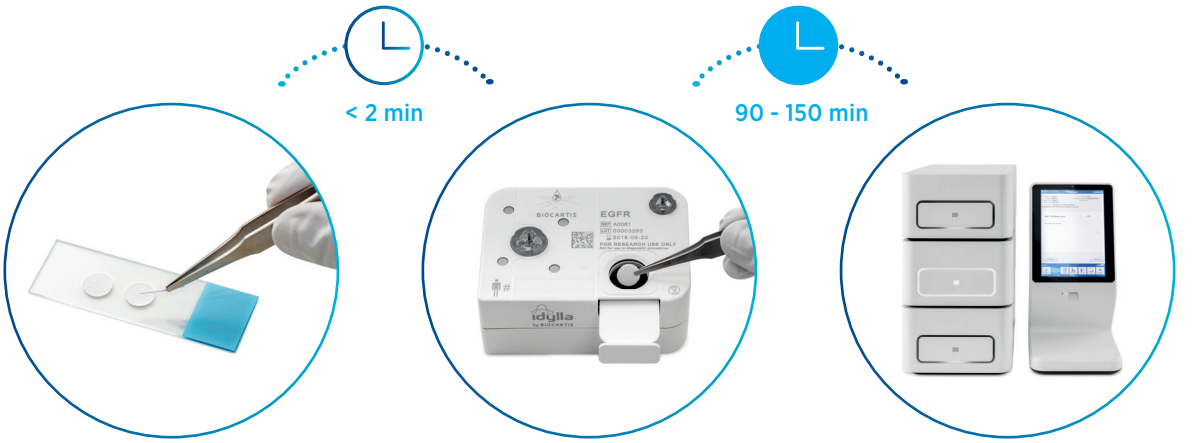
EASE-OF-USE
- Fully automated sample-to-result process
- Walk-away system (no need for any intervention during the automatic process)
- All reagents integrated in a single cartridge
- Only 1 manual step
- Storage and shipment at room temperature

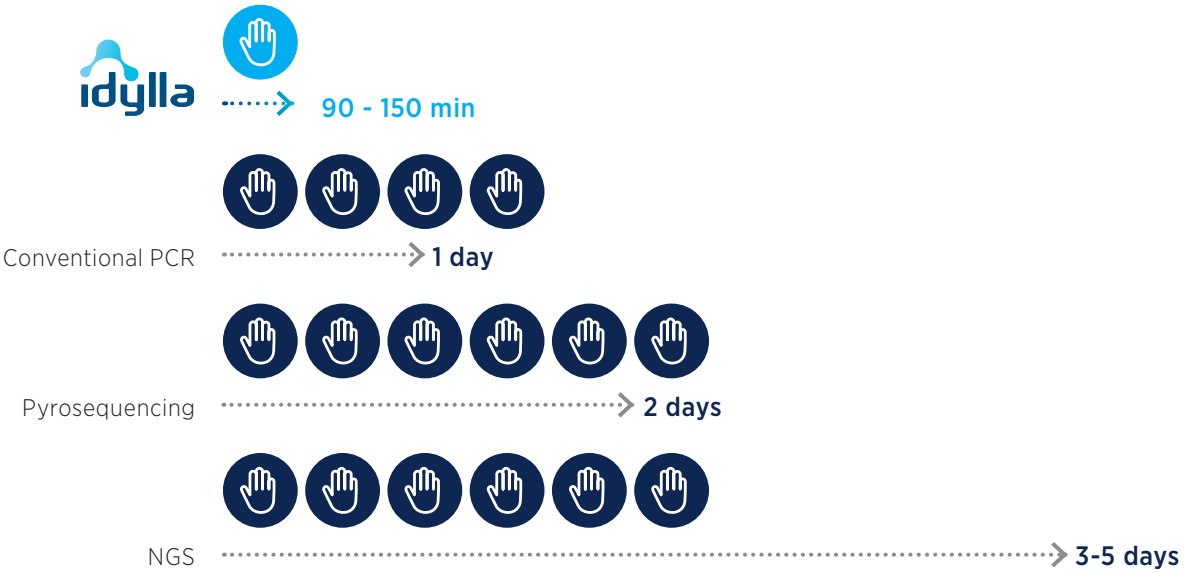
SAMPLE VERSATILITY
- For solid and liquid biopsy

CONNECTIVITY
- Remote assistance, monitoring and upgrading
- Bi-directional LIS

THE REVOLUTIONARY IDYLLA™ WORKFLOW

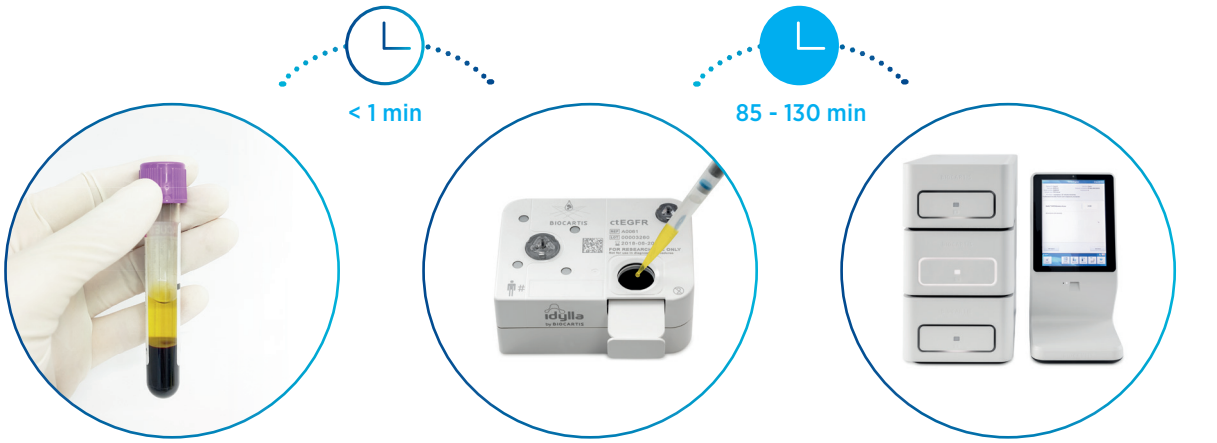
FFPE WORKFLOW

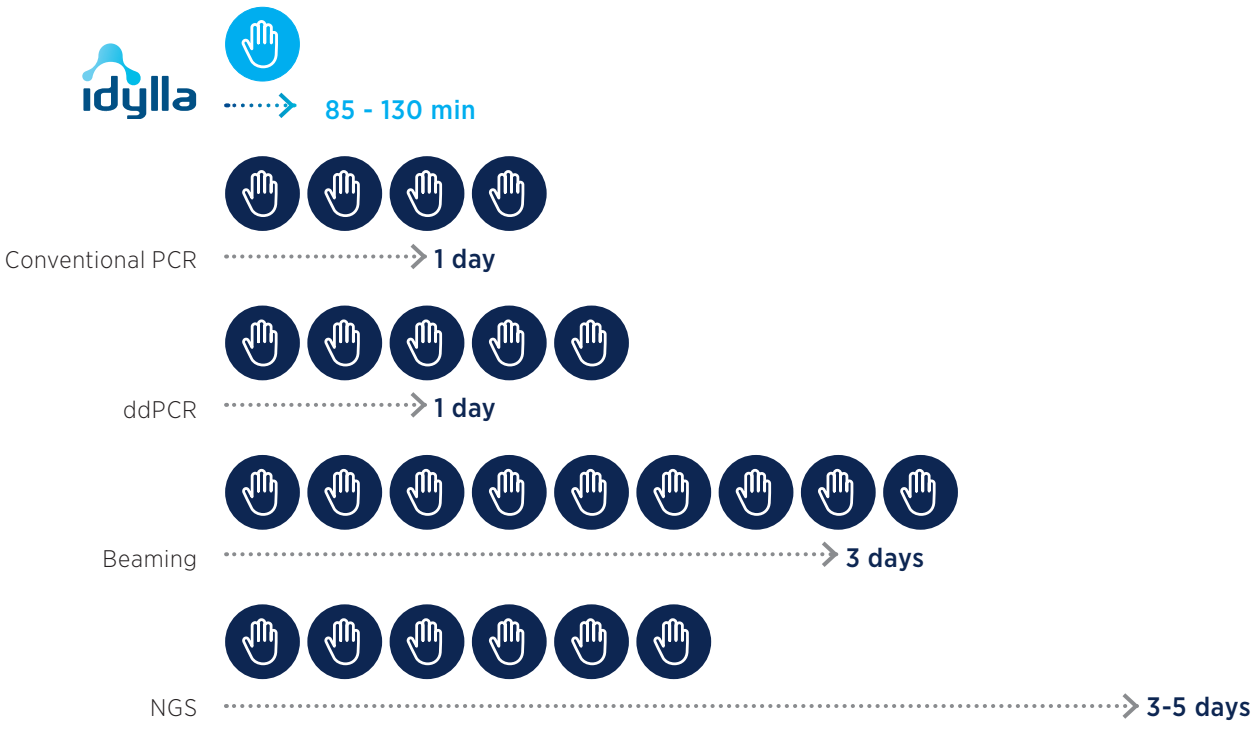




The Idylla™ system in combination with the Idylla™ Molecular Oncology Assays differs from other technologies in its outstanding **ease-of-use**, leading to an unsurpassed level of **standardization**, and its **short turnaround time**, allowing immediate access to therapy.

LIQUID BIOPSY WORKFLOW





INSTRUMENTS AND CONSUMABLES

idylla

INSTRUMENTS

CONSUMABLES

LAB INFRASTRUCTURE (# OF ROOMS) 1

OTHER RT-PCR

INSTRUMENTS

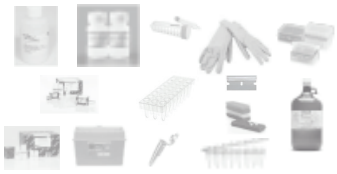
CONSUMABLES

LAB INFRASTRUCTURE (# OF ROOMS) 3

PYROSEQUENCING

INSTRUMENTS

CONSUMABLES



LAB INFRASTRUCTURE (# OF ROOMS) 4

NEXT GENERATION SEQUENCING

INSTRUMENTS

CONSUMABLES

LAB INFRASTRUCTURE (# OF ROOMS) 4

CURRENT ONCOLOGY ASSAYS

FFPE IN - REPORT OUT

Diagnostic products (CE IVD)
Idylla™ BRAF Mutation Test
Idylla™ KRAS Mutation Test
Idylla™ NRAS-BRAF Mutation Test
Idylla™ NRAS Mutation Test
Idylla™ EGFR Mutation Test

Research products (RUO)
Idylla™ MSI Assay
Idylla™ NRAS-BRAF-EGFR S492R Mutation Assay

PLASMA IN - REPORT OUT

Diagnostic products (CE IVD)
Idylla™ ctKRAS Mutation Test
Idylla™ ctNRAS-BRAF Mutation Test

Research products (RUO)
Idylla™ ctBRAF Mutation Assay
Idylla™ ctNRAS-BRAF-EGFR S492R Mutation Assay

FUTURE ONCOLOGY ASSAY TARGETS

FFPE IN - REPORT OUT

GeneFusion

PLASMA IN - REPORT OUT

ctEGFR

BRAF ctBRAF

IDYLLA™ BRAF MUTATION DETECTION ON SOLID AND LIQUID BIOPSIES

Activating mutations in the *BRAF* gene are observed in about 8% of all cancers[7] and have been associated with sensitivity and resistance to a number of targeted anti-cancer therapeutics.

Cancers in which *BRAF* mutations are observed include: melanoma, colorectal cancer, thyroid cancer, lung cancer, hairy cell leukemia and ovarian cancer.

BRAF testing is recommended in all patients with metastatic melanoma and metastatic colorectal cancer (mCRC). About 50% of all metastatic melanoma patients harbor mutations in the *BRAF* gene, making them eligible for BRAF or BRAF/MEK inhibitor therapy.[8] In mCRC, BRAF mutation status should be assessed alongside the assessment of tumor *RAS* mutational status for prognostic assessment (the presence of a *BRAF* mutation indicates poor prognosis). The prevalence of *BRAF* in mCRC is about 8-15%.[9]

DIAGNOSTIC PRODUCT

Idylla™ **BRAF** Mutation Test (CE IVD)

BRAF

Diagnostic use

approx. 90 min sample-to-result

< 2 min hands-on time

7 mutations in codon 600

FFPE

Directly on FFPE tissue sections (5-10µm) from **metastatic melanoma**

Qualitative genotype call

Mutation detection for **baseline treatment**

RESEARCH PRODUCT

Idylla™ **ctBRAF** Mutation Assay (RUO)

ctBRAF

Research Use Only, not for diagnostic use

approx. 85 min sample-to-result

< 1 min hands-on time

7 mutations in codon 600

plasma

Directly on 1 ml plasma

Semi-quantitative genotype call + Cq values

Applicable in multiple cancers harboring BRAF mutations

Prof. B. Neyns, M.D., Ph.D
Medical Oncology, UZ Brussels, Belgium

"The Idylla™ system has the potential to allow the start of targeted therapy within a time window of less than 24 hours following the diagnosis of metastasis, thereby saving precious time"

EGFR

IDYLLA™ EGFR MUTATION DETECTION ON SOLID BIOPSY

Lung cancer is the most common cancer worldwide, contributing for 13% of all cancer types. 85% of lung cancers are non-small cell lung cancers (NSCLC), of which histologically adenocarcinoma is the most prevalent.

EGFR mutations are mainly observed in lung cancer.

EGFR mutation testing in exons[18-21] is recommended in all patients with advanced NSCLC of a non-squamous subtype. Activating mutations in the *EGFR* gene have been associated with sensitivity and resistance to a number of targeted anti-cancer therapeutics.[11,17]

Exon 19 deletion and exon 21 (L858R, L861), exon 18 (G719X), and exon 20 (S768I) mutations are associated with sensitivity to TKI's. Exon 20 insertion mutation may predict resistance to TKI's. EGFR T790M mutation is the main cause of acquired resistance to TKI therapy and has been reported in about 55% of patients with disease progression after initial response to 1st or 2nd generation TKI's.[11,17]

The prevalence of *EGFR* mutations in NSCLC adenocarcinomas is 10-15% of Western and up to 50% of Asian patients. Sensitizing *EGFR* mutations are predictive for response to *EGFR* tyrosine kinase inhibitors.[11,17,21]

DIAGNOSTIC PRODUCT

Idylla™ **EGFR** Mutation Test (CE IVD)

EGFR

Diagnostic use

51 mutations in exons 18,19, 20,21

approx. 150 min sample-to-result

< 2 min hands-on time

FFPE

Directly on 1 FFPE tissue section (5µm) from **metastatic non-small-cell lung cancer**

Qualitative genotype call + Cq values

Mutation detection **for treatment assessment**

"Today, EGFR testing is a cumbersome process and it often takes several weeks before results are analyzed. This may lead to the administration of anti-EGFR therapy as second-line agents, which is less efficient than their use in first-line therapy. The Idylla™ EGFR Mutation assay technology has the potential to change that: it is a cost-effective solution, ensuring reliable and fast detection of all relevant mutations"

Prof Giancarlo Troncone
University of Napoli Federico II, Naples

KRAS ctKRAS

IDYLLA™ KRAS MUTATION DETECTION ON SOLID AND LIQUID BIOPSIES

Activating mutations in the *RAS* genes are observed in 9-30% of all cancers and have been associated with sensitivity and resistance to a number of targeted anti-cancer therapeutics.[12] Cancers in which *KRAS* mutations are observed include: colorectal cancer, lung cancer and pancreatic cancer.

According to ESMO[9], NCCN[14], ASCO[16] and CAP/AMP/ASCO guidelines[15], genotyping of clinically actionable mutations at a sensitivity of 5% in *RAS* genes exon 2 (codons 12 and 13), exon 3 (codons 59 and 61) and exon 4 (codons 117 and 146) is now mandatory on tumor tissue (either primary or metastasis) of all metastatic colorectal cancers, since the presence of these mutations correlate with the lack of response to certain anti-EGFR antibody therapies[9]. About 46% of all metastatic colorectal tumors harbor mutations in exons 2, 3 and 4 of the *KRAS* gene.[13]

Several studies are ongoing to define the predictive impact of *KRAS* mutations on therapy decision for non-small-cell lung cancer (NSCLC) patients.[18,19,20] Currently there is evidence that *KRAS* in lung cancer has a prognostic value, indicating poor survival for patients with NSCLC, compared to the absence of *KRAS* mutations.[11]

Using liquid biopsies for *KRAS* testing is minimally invasive, fast and easy to perform and can be used as an alternative or complement to tissue testing to determine the *RAS* mutation status at diagnosis.

DIAGNOSTIC PRODUCT

Idylla™ **KRAS** Mutation Test (CE IVD)

KRAS

Diagnostic use

approx. 120 min	< 2 min	21
sample-to-result	hands-on time	mutations in codons 12,13,59 61,117, 146

FFPE

Directly on FFPE tissue sections (5-10µm) from **metastatic colorectal cancer**

Qualitative genotype call

Mutation detection for **baseline treatment**

DIAGNOSTIC PRODUCT

Idylla™ **ctKRAS** Mutation Test (CE IVD)

ctKRAS

Diagnostic use

approx. 130 min	< 1 min	21
sample-to-result	hands-on time	mutations in codons 12,13,59 61,117, 146

plasma

Directly on 1 ml plasma from mCRC patients

Qualitative genotype call + Cq values

Mutation detection for **baseline treatment**

Beatriz Bellosillo
Laboratori de Biologia Molecular, Hospital del Mar, Barcelona

"Idylla™ allows very quick results with little hands-on time"

NRAS NRAS-BRAF ctNRAS-BRAF

IDYLLA™ NRAS MUTATION DETECTION ON SOLID AND LIQUID BIOPSIES

Activating mutations in the *RAS* genes are observed in 9-30% of all cancers and have been associated with sensitivity and resistance to a number of targeted anti-cancer therapeutics.[12] Cancers in which *NRAS* mutations are observed include colorectal, lung, thyroid cancers and melanoma. According to ESMO[9], NCCN[14], ASCO[16] and the CAP/AMP/ASCO guidelines[15], genotyping of clinically actionable mutations at a sensitivity of 5% in *RAS* genes exon 2 (codons 12 and 13), exon 3 (codons 59 and 61) and exon 4 (codons 117 and 146) is now mandatory on tumor tissue (either primary or metastasis) of all metastatic colorectal cancers, since the presence of these mutations correlate with the lack of response to certain anti-EGFR antibody therapies[9]. About 5% of all metastatic colorectal tumors harbor mutations in exons 2, 3 and 4 of the *NRAS* gene.[13]

In metastatic colorectal cancer *BRAF* mutation status should be assessed alongside the assessment of tumor *RAS* mutational status for prognostic assessment (the presence of a *BRAF* mutation indicates poor prognosis).

Using liquid biopsies for *NRAS-BRAF* testing is minimally invasive, fast and easy to perform and can be used as an alternative or complement to tissue testing to determine the *RAS* mutation status at diagnosis.

NRAS-BRAF NRAS

DIAGNOSTIC PRODUCT

Idylla™ **NRAS-BRAF** Mutation Test (CE IVD)
Idylla™ **NRAS** Mutation Test (CE IVD)

Diagnostic use

- approx. 120 min — sample-to-result
- < 2 min — hands-on time
- 5 — in BRAF codon 600* mutations
- 18 — In NRAS codons 12,13,59 61,117,146 mutations
- FFPE — **Directly** on FFPE tissue sections (5-10µm) from **metastatic colorectal cancer**
- **Qualitative genotype call + Cq values**
- Mutation detection for **baseline treatment**

*Only available in Idylla™ NRAS-BRAF mutation Test

ctNRAS-BRAF

DIAGNOSTIC PRODUCT

Idylla™ **ctNRAS-BRAF** Mutation Test (CE IVD)

Diagnostic use

- approx. 110 min — sample-to-result
- < 1 min — hands-on time
- 18 — In NRAS codons 12,13,59 61,117,146 mutations
- 5 — in BRAF codon 600 mutations
- Directly on 1 ml plasma from mCRC patients
- **Qualitative genotype call + Cq values**
- Mutation detection for **baseline treatment**

MSI

IDYLLA™ MSI DETECTION ON SOLID BIOPSIES

Microsatellite instability (MSI) is defined as a length variation of DNA repeat regions found in microsatellites or homopolymers. MSI is caused by deficiency of the DNA mismatch repair system (dMMR) resulting in a distinct accumulation of insertions and deletions in microsatellite and homopolymeric regions.[23]

MSI can be sporadic or hereditary. MSI-high (MSI-H) is detected in 15% of all colorectal cancers; 3% are associated with Lynch syndrome (LS), the other 12% have sporadic disease.[24]

Clinical trials and pathophysiological studies indicate a wide distribution of MSI-H across tumor types.[25] In addition to CRC, high incidences are observed in endometrial cancer (20-30%), and gastric cancer (15-20%).[26]

Guidelines recommend assessing the MSI status for all patients with colorectal or endometrial carcinomas for screening for Lynch syndrome as well as for prognostic stratification and immunotherapy.[27-30]

Research studies have shown that MSI-H patients respond favorably to immune checkpoint inhibitors, and checkpoint blockade therapy has recently been incorporated into clinical care for gastrointestinal cancers.[31,32]

RESEARCH PRODUCT

Idylla™ **MSI** Assay (RUO)

MSI

Research Use Only, not for diagnostic use

7 novel MSI Bio-markers*

approx. 150 min sample-to-result

< 2 min hands-on time

FFPE

Directly on 1 FFPE tissue section (5µm). No need for normal tissue sample

Qualitative MSI call + MSI Score

Applicable for a variety of cancer types harboring MSI mutations

*ACVR2A, BTBD7, DIDO1, MRE11, RYR3, SEC31A and SULF2

"We are delighted with the performance of the Idylla™ MSI Assay providing high quality results from minimal amount of tissue. The ease of use allows even laboratories with minimal histopathology experience to perform MSI testing in-house."

Sarah L. McCarron
Cancer Molecular Diagnostics,
St. James' Hospital, Dublin, Ireland

IDYLLA™ CONNECT
ENGAGE IN THE FUTURE

IDYLLA™ EXPLORE

ADVANCED SERVICES

ADVANCED SERVICES TO ENSURE CONTINUITY IN YOUR LABORATORY WORKFLOW

AUTOMATIC SOFTWARE UPDATES

New releases of assay and console software are sent to your Idylla™ console and can be installed with a single touch on the screen.

IMMEDIATE AND REMOTE SERVICE AND SUPPORT

Idylla™ system parameters and error logs can be analyzed at anytime and anywhere to ensure swift actions and solutions.

MORE INSIGHT INTO YOUR DATA WITH IDYLLA™ EXPLORE

Get connected and enjoy **the advantages of Idylla™ Explore,**
a web-based application that allows you to analyze your data by providing

- Visualization of PCR curves from Idylla™ Test Results
- Cq values per target
- Direct Access to Console result reports

Idylla™ Explore can be accessed anywhere and anytime from your PC or tablet through the following link: **https://idyllaexplore.biocartis.com**

Subscribe today and **join the Idylla™ Explore community**
by sending an email to **explore@biocartis.com**

ZOOM IN

SAFE & SECURED DATAFLOW

JOIN THE INVESTIGATION

There's a clear need for improved, standardized and fast diagnostics that allow faster initiation of targeted therapy for cancer patients.

Idylla™, Biocartis' fully automated molecular diagnostics system, is the first and only molecular diagnostic system that combines unsurpassed ease-of-use, speed and accuracy on multiple sample types. With its compact, scalable design and outstanding ease-of-use, Idylla™ overcomes the traditional barriers of molecular diagnostics, allowing it to be used in virtually any laboratory setting.

And by providing same-day-results, Idylla™ enables physicians to make timely decisions on patients' therapy.

IDYLLA™, THE NEXT LEVEL IN DISEASE INTERCEPTION

IDYLLA™ ORDER INFORMATION

DIAGNOSTIC PRODUCTS (CE-IVD)

Idylla™ BRAF Mutation Test	6 cartridges/box	Catalog# A0010/6
Idylla™ KRAS Mutation Test	6 cartridges/box	Catalog# A0020/6
Idylla™ NRAS-BRAF Mutation Test	6 cartridges/box	Catalog# A0030/6
Idylla™ NRAS Mutation Test	6 cartridges/box	Catalog# A0040/6
Idylla™ EGFR Mutation Test	6 cartridges/box	Catalog# A0060/6
Idylla™ ctKRAS Mutation Test	6 cartridges/box	Catalog# A0080/6
Idylla™ ctNRAS-BRAF Mutation Test	6 cartridges/box	Catalog# A0090/6

RESEARCH PRODUCTS (RUO)

Idylla™ BRAF Mutation Assay	6 cartridges/box	Catalog# A0011/6
Idylla™ KRAS Mutation Assay	6 cartridges/box	Catalog# A0021/6
Idylla™ EGFR Mutation Assay	6 cartridges/box	Catalog# A0061/6
Idylla™ NRAS-BRAF-EGFR S492R Mutation Assay	6 cartridges/box	Catalog# A0031/6
Idylla™ ctKRAS Mutation Assay	6 cartridges/box	Catalog# A0081/6
Idylla™ ctBRAF Mutation Assay	6 cartridges/box	Catalog# A0071/6
Idylla™ ctNRAS-BRAF-EGFR S492R Mutation Assay	6 cartridges/box	Catalog# A0091/6
Idylla™ MSI Assay	6 cartridges/box	Catalog# A0101/6

PLATFORM (CE-IVD)

Idylla™ Instrument	1 unit	Catalog# P0010
Idylla™ Console	1 unit	Catalog# P1010

customerservice@biocartis.com

REFERENCES

(1) Janku F et al. Oncotarget. 2015; 6(29): 26886—2689.
(2) Sam SS et al. Pathol Res Pract. 2015. pii: jclinpath-2015—203345.
(3) Colling R et al. J Clin Pathol. 2015. pii: jclinpath-2015—203345.
(4) Bratzman SV et al. Expert Rev Mol Diagn. 2015; 15(6): 715—719.
(5) Siravegna G and Bardelli A. Genome Biol. 2014; 15(8): 449.
(6) Accès aux tests moléculaires EGFR, RAS et BRAF /Résultats d'une enquête dans 5 régions françaises, appui à la décision, INCa, janvier 2016
(7) Mutations of the BRAF gene in human cancer. Helen Davies et al; Nature 2002, 417, 949-954
(8) Clinical Practice Guidelines - Cutaneous melanoma: ESMO Clinical Practice Guidelines for diagnosis, treatment and follow-up. Annals of Oncology 26 (Supplement 5): v126–v132, 2015.
(9) ESMO consensus guidelines for the management of patients with metastatic colorectal cancer. Annals of Oncology 0: 1–37, 2016.
(10) NCCN Clinical Practice Guidelines in Oncology – Melanoma - Version 3.2016
(11) NCCN Clinical Practice Guidelines in Oncology – NSCLC – Version 6.2017
(12) Adrienne D. Cox et al. Drugging the undruggable RAS: Mission Possible? Nature Reviews Drug Discovery Volume:13,Pages:828–851 Year published:(2014)DOI:doi:10.1038/nrd4389
(13) Jean-Yves Douillard, M.D., Ph.D., et al. Panitumumab–FOLFOX4 Treatment and RAS Mutations in Colorectal Cancer. N Engl J Med 2013;369:1023-34
(14) NCCN Clinical Practice Guidelines in Oncology – Colon Cancer – Version 2.2016
(15) http://www.amp.org/committees/clinical_practice/CRCOpenComment.cfm
(16) Allegra C.J. et al. Extended RAS gene mutation testing in metastatic Colorectal Carcinoma to predict response to antiepidermal growth factor receptor monoclonal antibody therapy: American Society of Clinical Oncology Provisional Clinical Opinion Update 2015. Journal of Clinical Oncology 2016; 34(2):179-85
(17) Novello S. et al. Metastatic non-small-cell lung cancer: ESMO Clinical Practice Guidelines for diagnosis, treatment and follow-up. Annals of Oncology 2016
(18) ESMO @ ECC 2015: Response to EGFR Agents in Combination With Chemotherapy Demonstrated in Patients with Metastatic Colorectal Cancer of Rare KRAS Molecular Subtype. http://www.esmo.org/Conferences/Past-Conferences/European-Cancer-Congress-2015/News/Response-to-EGFR-Agents-in-Combination-With-Chemotherapy-Demonstrated-in-Patients-with-Metastatic-Colorectal-Cancer-of-Rare-KRAS-Molecular-Subtype. Sept 2015.
(19) P A Janne et al. BJC 2015. Impact of KRAS codon subtypes from a randomised phase II trial of selumetinib plus docetaxel in KRAS mutant advanced non-small-cell lung cancer.
(20) Alona Zer et al. J Thor Onco 2015. Pooled Analysis of the Prognostic and Predictive Value of KRAS Mutation Status and Mutation Subtype in Patients with NSCLC Treated with EGFR TKI's.
(21) Wendy A. Cooper et al. J Thorac Dis 2013; 5 (S5): S479-490. Molecular Biology of lung cancer.
(22) AACR 2016: 5-Year Survival Rates for Patients With Metastatic Melanoma Treated With Nivolumab Much Higher Than Historical Rates. http://www.ascopost.com/News/39500
(23) Aaltonen, L. A. et al. (1993) Clues to the pathogenesis of familial colorectal cancer. Science 260, 812–816.
(24) Dudley JC et al. (2016) Microsatellite instability as a biomarker for PD-1 blockade. Clin Cancer Res. 22(4):813–820.
(25) Cortes-Ciriano I et al (2017) A molecular portrait of microsatellite instability across multiple cancers. Nat Commun. 8:15180.
(26) Sigurdis Haraldsdottir (2017) Microsatellite instability testing using next-generation sequencing data and therapy implications. JCO Precision Oncology 1, 1-4.
(27) Van Cutsem et al. (2016) ESMO Consensus Guidelines for the management of patients with mCRC. Annals of Oncology 27, 1386.
(28) NCCN Clinical Practice Guidelines in Oncology (NCCN Guidelines) for Colon Cancer V.2.2018. Accessed July 25, 2018. To view the most recent and complete version of the guidelines, go online to NCCN.org.
(29) NCCN Clinical Practice Guidelines in Oncology (NCCN Guidelines) for Rectal Cancer V.2.2018. Accessed July 25, 2018. To view the most recent and complete version of the guidelines, go online to NCCN.org.(30) NCCN Clinical Practice Guidelines in Oncology (NCCN Guidelines) for Uterine Neoplasms V.2.2018. Accessed July 25, 2018. To view the most recent and complete version of the guidelines, go online to NCCN.org.
(31) Le DT et al. (2015) PD-1 blockade in tumors with mismatch-repair deficiency. N Engl J Med. 372:2509-2520.
(32) Le DT et al. (2017) Mismatch repair deficiency predicts response of solid tumors to PD-1 blockade. Science 357:409-413.

NOTICE

Idylla™ BRAF Mutation Test

The MGB Probe contained in the BRAF Mutation Test is covered by applicable US patents and corresponding patents outside the US and is sold under a license from the ELITech Group. The purchase of this product includes a license to use only this amount of product solely for the purchaser's own use solely in the human in vitro diagnostic field (in accordance with applicable FDA and other regulatory requirements) and may not be used for any other commercial use, including without limitation repackaging or resale in any form (including resale by purchasers who are licensed to make and sell kits for use in the 5' Nuclease Process). No right under any other patent claim or for any other use is conveyed expressly, by implication, or by estoppel. Corresponding products conveying rights for use in all other fields may be obtained from Life Technologies under a separate catalog number. For information on obtaining additional rights, please contact outlicensing@lifetech.com or Out Licensing, Life Technologies Corporation, 5791 Van Allen Way, Carlsbad, California 92008.

Idylla™ BRAF Mutation Assay and Idylla™ ctBRAF Mutation Assay

The MGB Probe contained in the Idylla™ BRAF Mutation Assay and in the Idylla™ ctBRAF Mutation Assay is covered by applicable US patents and corresponding patents outside the US and is sold under a license from the ELITech Group. The purchase of this product includes a license to use only this amount of product solely for the purchaser's own research use and may not be used for any other commercial use, including without limitation repackaging or resale in any form (including resale by purchasers who are licensed to make and sell kits for use in the 5' Nuclease Process). No right under any other patent claim or for any other use is conveyed expressly, by implication, or by estoppel. Diagnostic use rights for MGB may be obtained under a separate license from ELItech. Corresponding products conveying commercial and diagnostic use rights for MGB may be obtained from LTC only under a separate agreement. For further information contact outlicensing@lifetech.com or Out Licensing, Life Technologies Corporation, 5791 Van Allen Way, Carlsbad, California 92008.

Idylla™ KRAS Mutation Test, Idylla™ KRAS Mutation Assay, Idylla™ ctKRAS Mutation Test and Idylla™ ctKRAS Mutation Assay

These assays contain PlexZyme and PlexPrime technology covered by patents granted and pending in certain jurisdictions, which are supplied under licence of SpeeDx Pty Ltd. PlexZyme and Plexprime are trademarks of SpeeDx Pty Ltd.

Idylla™ NRAS Mutation Test, Idylla™ NRAS-BRAF Mutation Test, Idylla™ ctNRAS-BRAF Mutation Test, Idylla™ NRAS-BRAF-EGFR S492R Mutation Assay and Idylla™ ctNRAS3 Mutation Assay

The Idylla™ NRAS Mutation Test, Idylla™ NRAS-BRAF Mutation Test, Idylla™ NRAS-BRAF-EGFR S492R Mutation Assay, ctNRAS3 Mutation Assay and Idylla™ ctNRAS-BRAF Mutation Test contain PlexZyme and PlexPrime technology covered by patents granted and pending in certain jurisdictions, which are supplied under licence of SpeeDx Pty Ltd. PlexZyme and Plexprime are trademarks of SpeeDx Pty Ltd. The Idylla™ NRAS Mutation Test, Idylla™ NRAS-BRAF Mutation Test and the Idylla™ NRAS-BRAF-EGFR S492R Mutation Assay contain Hilyte and QXL probes. QXL and Hilyte are licensed pursuant to an agreement with Eurogentec S.A. and these licensed probes can be used solely for the purchaser's own research use. Hilyte™ is a trademark of Anaspec, Inc. QXL® is a registered trademark of Anaspec, Inc.

Idylla™ EGFR Mutation Test and Idylla™ EGFR Mutation Assay

The Idylla™ EGFR Mutation Test contains PlexZyme and PlexPrime technology covered by patents granted and pending in certain jurisdictions, which are supplied under licence of SpeeDx Pty Ltd. PlexZyme and Plexprime are trademarks of SpeeDx Pty Ltd.

Idylla™ MSI Assay

The Idylla™ MSI Assay includes MSI biomarkers covered by patents granted and pending in certain jurisdictions, used under license from VIB-KU Leuven.

Important information

Idylla™ platform, Idylla™ BRAF Mutation Test, Idylla™ KRAS Mutation Test, Idylla™ NRAS-BRAF Mutation Test, Idylla™ NRAS Mutation Test, Idylla™ EGFR Mutation Test, Idylla™ ctNRAS-BRAF Mutation Test and Idylla™ ctKRAS Mutation Test are CE-marked IVDs in Europe. Idylla™ BRAF Mutation Assay, Idylla™ ctBRAF Mutation Assay, Idylla™ KRAS Mutation Assay, Idylla™ ctKRAS Mutation Assay, Idylla™ NRAS-BRAF-EGFR S492R Mutation Assay, Idylla™ ctNRAS-BRAF-EGFR S492R Mutation Assay, Idylla™ EGFR Mutation Assay and Idylla™ MSI Assay are available for Research Use Only, not for use in diagnostic procedures. Idylla™ ctEGFR Mutation Assay and Idylla™ GeneFusion Assay are under development.

NOTES

NOTES

Biocartis NV
Generaal de Wittelaan 11 B3
2800 Mechelen - Belgium
T +32 15 632 888

customerservice@biocartis.com
Ref: catalog # B2008

BIOCARTIS
biocartis.com

GL.BRO01.EN.R2.09/2018