

Understand your test results

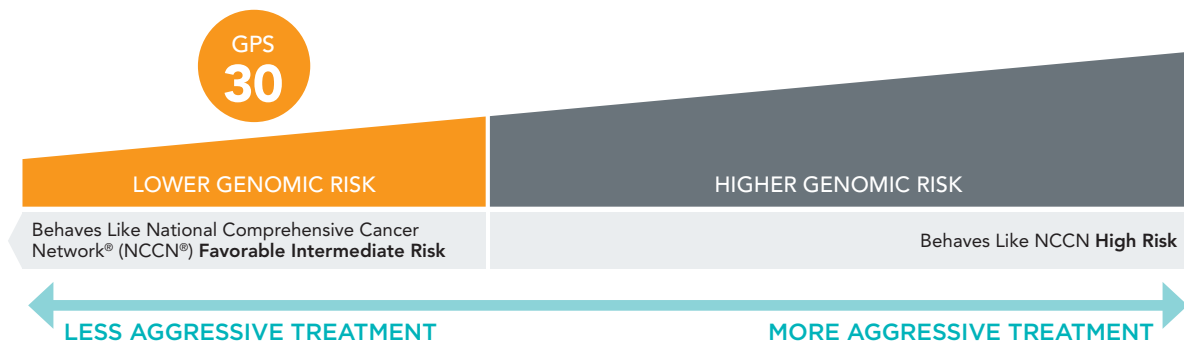
Deciding the best course of treatment for your prostate cancer is important. Your GPS test results may help.

The GPS test measures prostate cancer gene levels to assess how aggressively your cancer will grow or spread. Since certain genes influence this more than others, knowing which ones are active in your tumor helps determine your personal GPS result.

Your personal GPS result and risk category

Your score is based on a scale of 0-100. Your genomic risk will indicate how your tumor behaves and can help you and your doctor determine the best course of treatment.

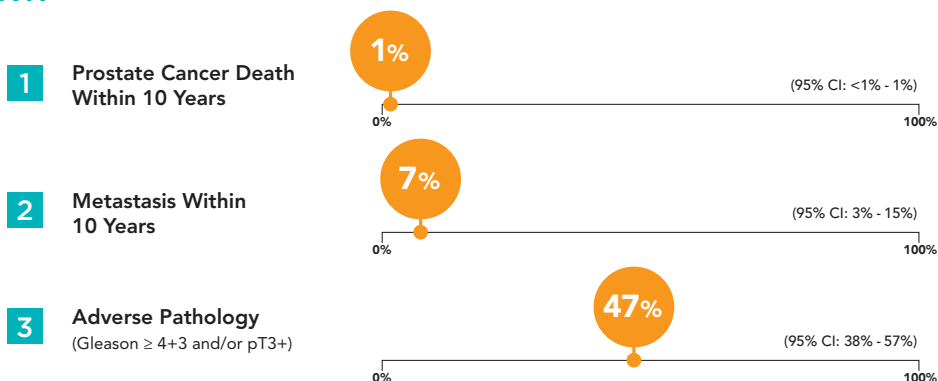
SAMPLE REPORT:



Current and future risk

These results can predict both your chance of: **1 dying from prostate cancer** and **2 your cancer spreading (metastasis)** in the next 10 years.

SAMPLE REPORT:



3 Adverse Pathology looks at how aggressive your tumor was at the time of biopsy and may help guide initial treatment. Adverse pathology will be reported for men whose tumors have Gleason score 3+4.

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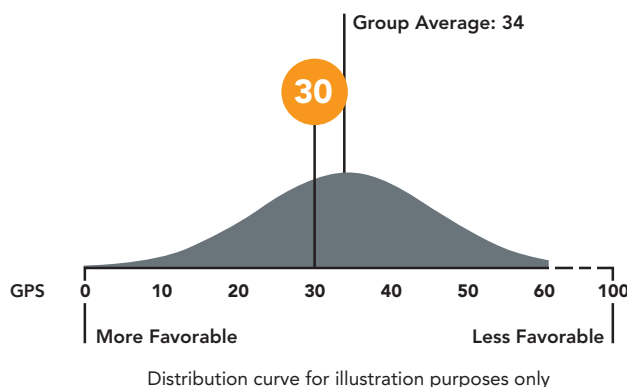
Personalized assessment for individualized treatment

Your GPS result compared to other patients

The bell curve illustrates where your GPS result falls in relation to the GPS results of other men in the same risk category.

SAMPLE REPORT:

GPS Distribution in NCCN Unfavorable Intermediate Risk



Additional pathology endpoints (provided for men with Gleason score 3+4)

1 High-Grade Disease shows the likelihood that cancer cells within your tumor are abnormal when compared to typical cells. **2 Non-Organ-Confined Disease** indicates the likelihood that your cancer has already spread outside your prostate.

SAMPLE REPORT:

Pathology Endpoints	Individualized Risk (95% Confidence Interval [CI])
1 High-Grade Disease (Gleason $\geq 4+3$)	24% (95% CI: 17% - 33%)
2 Non-Organ-Confined Disease (pT3+)	30% (95% CI: 22% - 39%)

The GPS test provides a personalized assessment of your prostate cancer, helping you and your doctor discuss next steps with confidence.¹

1. Badani et al. *Urol Pract.* 2015.

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