

MIB Testing & Research Directory

UNDERSTANDING TUMOR CHARACTERISTICS AND DRIVERS

STUDY/TEST	CONTACT	DESCRIPTION	Commercial	Research	Genomic	Targeted Panel	WGS	RNA-seq	Open	Physician Order	Physician Referral	Age Restriction	Blood	Saliva	FFPE	Fresh Tissue	Formalin Tissue	24 hours	48 hours	2-7 months	More	Some Out of Pocket	Financial Assistance	Insurance Billing	
Invitae Sarcoma Panel	(800) 436-3037 clientservices@invitae.com San Francisco, CA	Identifies hereditary predispositions to cancer (hereditary genetic sequence changes, deletions/duplications), which could reveal other cancer risks and indicate a more aggressive treatment plan. Does not look at genomic profile of the tumor. This test analyzes up to 41 genes that are associated with a hereditary predisposition to the development of sarcoma, a type of connective tissue tumor that can occur anywhere in the body. These genes were selected based on the available evidence to date to provide Invitae's most comprehensive hereditary sarcoma panel. Many of these genes are also associated with an increased risk of other cancer types. Genetic testing of these genes may confirm a diagnosis and help guide treatment and management decisions. Identification of a disease-causing variant would also guide testing and diagnosis of at-risk relatives. This test is specifically designed for heritable germline mutations and is not appropriate for the detection of somatic mutations in tumor tissue.	●	●	●	●	●	●	●	●	●	●	●	●	●	●	●	●	●	●	●	●	●	●	●
Dana-Farber/Boston Children's Pediatric Cancer Genetic Risk Program	617-632-4298 ped_genetics@dfci.harvard.edu Boston, MA	The Pediatric Cancer Genetic Risk Program at Dana-Farber/Boston Children's provides cancer risk assessment for children, comprehensive recommendations for managing cancer risk in children, and psychosocial support for families affected by hereditary cancer. We also conduct research into many aspects of cancer risk and its management. We are one of the few cancer genetic risk programs in the U.S. focused specifically on pediatric cancer risk. Our goal is to help you determine whether your children are at risk of cancer – and if so, what can be done either to help prevent cancer in your children or to catch it early and address it quickly for the best possible outcome. (Note this is a clinical program)	●	●	●	●	●	●	●	●	●	●	●	●	●	●	●	●	●	●	●	●	●	●	●
NCI & Children's Oncology Group - Pediatric MATCH Trial (Molecular Analysis for Therapy Choice)	Check "Locations & Contacts"	NCI-COG Pediatric MATCH (Molecular Analysis for Therapy Choice), also known as Pediatric MATCH, is a pediatric precision medicine cancer treatment trial that explores whether targeted therapies can be effective for children and adolescents with solid tumors that harbor specific gene mutations. Pediatric MATCH is a phase 2 trial that will investigate more than eight different study drugs, each targeting a defined set of gene mutations, in order to match patients with therapies aimed at the molecular abnormalities in his or her tumor. The trial has two enrollment steps. Each patient will initially enroll for a screening study, in which a sample of his or her relapsed tumor will undergo DNA and RNA sequencing to detect genetic abnormalities that could be targeted by one or more of the drugs being studied. Archived tumor samples can be used as long as they were obtained after the tumor progressed following treatment. If there is a genetic abnormality identified in the tumor a drug in Pediatric MATCH that targets that abnormality, the patient can then enroll in the corresponding treatment arm if he or she meets the eligibility criteria. Pediatric MATCH will use a single sequencing test to screen for many molecular abnormalities at once. The test, which is also being used for the adult NCI-MATCH trial, was developed by the NCI Molecular Characterization Laboratory at the NCI Frederick National Laboratory for Cancer Research in Frederick, Maryland. The latest version of this test looks for alterations in more than 160 genes associated with cancer.	●	●	●	●	●	●	●	●	●	●	●	●	●	●	●	●	●	●	●	●	●	●	●
Dana-Farber/Boston Children's GAIN Consortium Icat2 study OncoPanel	617-632-4994 GainConsortium@dfci.harvard.edu 12 locations in the US	This research study is evaluating the use of specialized testing of solid tumors including sequencing. The process of performing these specialized tests is called tumor profiling. The tumor profiling may result in identifying changes in genes of the tumor that indicate that a particular therapy may have activity. This is called an individualized cancer therapy (Icat) recommendation. We have developed a cancer genomic assay to detect somatic mutations, copy number variations and structural variants in tumor DNA extracted from fresh, frozen or formalin-fixed paraffin-embedded samples. The OncoPanel assay surveys exonic DNA sequences of 447 cancer genes and 191 regions across 60 genes for rearrangement detection.	●	●	●	●	●	●	●	●	●	●	●	●	●	●	●	●	●	●	●	●	●	●	●
Baylor College of Medicine/TX Children's Cancer Center Texas KidsCanSeq	832-824-4643 dwparsom@tchc.org 5 sites in TX	The Texas KidsCanSeq Study is building upon the previous success of the Baylor College of Medicine BASIC3 exome sequencing study to further investigate the application and utility of both germline and tumor sequencing tests in the care of childhood cancer patients. The study will compare the results of targeted cancer panel sequencing versus genome-scale testing (germline exome sequencing, tumor exome and transcriptome sequencing plus copy number array in high-risk and relapsed patients) across heterogeneous clinical settings in Texas. We will explore the clinical utility of these tests on treatment decisions (tumor testing), and the impact of diagnostic and/or actionable findings (germline testing) on cancer surveillance, genetic testing and healthcare utilization of first degree relatives. Our project, which encompasses the diverse patient population in Texas (emphasis on Hispanic individuals), will evaluate novel, culturally sensitive methods for consent and communication of complex genomic information to families and physicians. Results from the targeted DNA/RNA tumor mutation panels are available in ~2 weeks, while germline testing and integrated tumor testing (exome, transcriptome, copy number array) have a ~3 month turnaround time. Participating institutions (currently): Texas Children's Hospital (Houston), Vanier Cook Jr. Clinic (McAllen, TX), Cook Children's Hospital (Fort Worth), Children's Hospital of San Antonio, University of Texas Health San Antonio.	●	●	●	●	●	●	●	●	●	●	●	●	●	●	●	●	●	●	●	●	●	●	●
Children's Hospital Los Angeles OncoKids® Cancer Panel	323-361-7520 jrista@chla.usc.edu Los Angeles, CA	OncoKids® is a targeted gene panel intended to guide the diagnosis and treatment of cancer in pediatric patients based on the genomic alterations specific to their tumor. The DNA content of the OncoKids® panel consists of over 3,000 amplicons and covers the full coding regions of 44 cancer predisposition loci, tumor suppressor genes and oncogenes; hotspots for mutations in 82 genes; and amplification events in 24 genes. The RNA content includes over 1,400 targeted gene fusions associated with acute myeloid leukemia, acute lymphoblastic leukemia, childhood sarcomas, pediatric brain tumors and soft tissue tumors.	●	●	●	●	●	●	●	●	●	●	●	●	●	●	●	●	●	●	●	●	●	●	●
Caris Life Sciences Caris Molecular Intelligence	1-888-979-8669 Irving, TX CustomerSupport@caris.com	The Caris Molecular Intelligence® comprehensive tumor profiling approach to assess DNA, RNA and Proteins reveals the highest quality molecular blueprint to guide more precise and individualized treatment decisions that is proven to extend overall survival. As the first and most experienced tumor profiling service, we provide results back in about 10-14 days* and to help you find better answers when you need it most. Caris Molecular Intelligence uses multiple tumor profiling technologies to decode cancer. This technology agnostic, precision approach allows our medical teams to more fully understand the biology of the tumor – therefore helping oncologists better plan their attack. MI Tumor Seek™ includes NGS (DNA mutations, copy number alterations*, insertions/deletions, genomic signatures; MSI, TMB*), whole transcriptome sequencing (RNA fusions and variant transcripts), pyro sequencing, IHC, in situ hybridization. MI Profile™ includes those services plus pyro sequencing, IHC, and in situ hybridization. *Not available in New York State.	●	●	●	●	●	●	●	●	●	●	●	●	●	●	●	●	●	●	●	●	●	●	●
Foundation Medicine Foundation One Heme	(888) 988-3639 client.services@foundationmedicine.com Cambridge, MA	FoundationOneHeme is a comprehensive genomic profiling test designed to identify genomic alterations in patients with hematologic malignancies and sarcomas. Test results provide information about clinically relevant alterations and biomarkers, potential targeted therapies or immunotherapies, and available clinical trials. FoundationOne Heme combines DNA and RNA sequencing. The DNA panel includes 406 genes and the RNA panel includes 265 genes. The combination of DNA and RNA sequencing enables efficient detection of fusions. The test is validated to detect the four main classes of genomic alterations (substitutions, indels, CNAs and rearrangements). For additional patient resources, please go to: www.foundationmedicine.com/patients.	●	●	●	●	●	●	●	●	●	●	●	●	●	●	●	●	●	●	●	●	●	●	●
Foundation Medicine Foundation One Liquid	(888) 988-3639 client.services@foundationmedicine.com Cambridge, MA	FoundationOne Liquid helps guide cancer care from a simple blood draw. This liquid biopsy test provides targeted gene and microsatellite instability (MSI) results that can help direct therapy selection and clinical trial options for advanced-stage cancer patients using a minimally invasive sample type. By analyzing ctDNA with our comprehensive genomic profiling approach (70 genes) and providing expertly curated reports, FoundationOne Liquid empowers providers to make more informed clinical decisions even when tissue is not ideal. While tissue DNA samples are recommended for osteosarcoma patients, in cases where there is progressive disease and tissue is unavailable (unresectable tumor), a blood sample to sequence DNA via liquid biopsy may provide and opportunity for genomic sequencing insight.	●	●	●	●	●	●	●	●	●	●	●	●	●	●	●	●	●	●	●	●	●	●	●
Guardant360	855-698-8887 Redwood City, CA clientservices@guardanthealth.com	For oncologists, Guardant360 provides comprehensive genomic results from a simple blood draw in approximately seven days, helping them move beyond the limitations of tissue biopsies to match patients with the best treatments. Obtaining clinically relevant genomic information through a blood draw helps them avoid an additional tissue or surgical biopsy and moves beyond the limitations of tissue specimens. Guardant360 covers all genes recommended for profiling by the National Comprehensive Cancer Network, including the 74 genes most relevant to clinical care. While tissue DNA samples are recommended for osteosarcoma patients, in cases where there is progressive disease and tissue is unavailable (unresectable tumor), a blood sample to sequence DNA via liquid biopsy may provide and opportunity for genomic sequencing insight.	●	●	●	●	●	●	●	●	●	●	●	●	●	●	●	●	●	●	●	●	●	●	●
Tempus xT	833.514.4187 Chicago, IL support@tempus.com	Tempus xT analyzes 596 genes relevant to the diagnosis, prognosis and therapeutic targeting of cancer. The panel will sequence a patient's tumor DNA and RNA, as well as a matched normal blood or saliva to detect single nucleotide variants, small insertions and deletions, copy number amplifications, and structural alterations that lead to gene fusions. The test also includes key decision drivers for immunotherapy including microsatellite instability (MSI) and tumor mutational burden (TMB), and is predictive for other important targets such as PD-L1.	●	●	●	●	●	●	●	●	●	●	●	●	●	●	●	●	●	●	●	●	●	●	●
Tempus xE	833.514.4187 Chicago, IL support@tempus.com	Tempus xE analyzes the whole exome in a CLIA/CAP validated assay, offering a comprehensive survey of the patient's entire coding genome. The assay detects single nucleotide variants, small insertions and deletions, copy number amplifications, and structural alterations that lead to gene fusions.	●	●	●	●	●	●	●	●	●	●	●	●	●	●	●	●	●	●	●	●	●	●	●
Tempus xF	833.514.4187 Chicago, IL support@tempus.com	Tempus xF is a liquid biopsy cell-free DNA assay that analyzes 105 genes. A liquid biopsy, such as xF, is a non-invasive alternative to tissue-based biopsies which can be used to monitor disease course including response to treatment and resistance mutations. For metastatic disease, liquid biopsies may allow physicians to monitor the course of the disease process by looking for resistance mutations and emerging alterations that may be treatable. While tissue DNA samples are recommended for osteosarcoma patients, in cases where there is progressive disease and tissue is unavailable (unresectable tumor), a blood sample to sequence DNA via liquid biopsy may provide and opportunity for genomic sequencing insight.	●	●	●	●	●	●	●	●	●	●	●	●	●	●	●	●	●	●	●	●	●	●	●

*Must be registered patient at that institution

**Note that while the provider may attempt to bill insurance, it is helpful to understand your insurance coverage to avoid unexpected bills as the insurance company may deny coverage and the patient would be responsible for any costs.

IMPORTANT NOTE: MIB does not independently verify information submitted to the MIB; it relies on submitters to provide information that is accurate and not misleading. MIB makes no endorsements of tests or laboratories listed in the MIB Testing & Data Directory. MIB is not a substitute for medical advice. Patients and families with specific questions about a genetic test should consult a healthcare provider or a genetics professional.

