



Introduction. This form describes the benefits, risks, and limitations of genetic testing for inherited susceptibility to cancer. This is a voluntary test.

Please read this form carefully before making your decision about testing.

Purpose. This test analyzes a specific gene or gene(s) for genetic changes called mutations. The gene(s) analyzed are associated with certain hereditary cancer risks. This test will help determine if a person has increased risk of developing certain tumors due to a mutation(s) in a cancer-predisposing gene. Genetic testing allows a better estimate of an individual's risk for hereditary cancer than personal and family history alone.

Test Procedure. Upon submitting your buccal swab test kit, Mira Dx Inc. will analyze the DNA of a specific gene to look for mutations associated with a particular hereditary cancer syndrome.

Test Results and Interpretation. Your results should be evaluated in the context of personal and family health history, the results of physical examination, laboratory and hospital tests, and the clinical impression of your healthcare provider. Possible result outcomes include positive and negative.

Positive - A mutation that is associated with an increased risk for certain cancer(s) was identified.

Negative - A mutation was not identified.

Knowing this information may help you and your doctor make more informed choices about your healthcare, such as screening, risk-reducing surgeries and preventive medication strategies.

Mira Dx Inc. keeps test results confidential and is fully in compliance with all Health Insurance Portability and Accountability Act (HIPAA) regulations. Mira Dx Inc. will only release your test results to your healthcare provider, his or her designee, or to another healthcare provider as directed by you (or a person legally authorized to act on your behalf) in writing, or otherwise as required by federal and state laws.

Benefits. Your genetic test results may help you and your doctor make more informed choices about your health care, such as screening, risk-reducing surgeries and preventive medication strategies. The identification of gene mutation(s) in a family



enables other blood relatives to determine whether or not they share the same hereditary cancer risks. If you are positive, you can discuss this with your healthcare provider.

Limitations. This test analyzes only certain important gene(s) associated with certain hereditary cancer risks. Genetic testing clarifies cancer risks for only those cancers related to the genes analyzed. If you are found to be a carrier of a gene that predisposes you to cancer, there may be differing opinions among physicians about the best steps to take. Your medical care is best determined by you in consultation with your healthcare provider.

Future Correspondence. Due to the dynamics of this field, there continues to be new information and data. It is recommended that you keep in contact with your healthcare provider, annually, to learn of any new developments in cancer genetics and to provide any updates to your personal or family history that may affect your cancer risks. You may also opt to receive updates from Mira Dx about ongoing research on the KRAS-variant marker through our newsletter.

Patient Consent Statement

By signing below, I, the patient having the test performed, acknowledge that:

- I understand the benefits and limitations of the genetic test(s) to be performed as indicated.
- I understand the reliability of positive or negative test results and the level of certainty that a positive test result for that disease or condition serves as a predictor of such disease.
- I have read this document in its entirety and realize I may retain a copy for my records.
- I consent to being tested for predisposition to hereditary cancer and I will discuss the results and appropriate medical management with my healthcare provider.

Name of patient having testing (please print): _____

Date of Birth: _____

Signature of patient: _____

Date: _____