

Date of Birth  
1995-02-28

Sex  
Female

Physician  
Dr. Patricia Burgess MD

Institution  
Henry LLC

Tumor specimen:  
source Breast  
CollectedDate 2023-11-28  
ReceivedDate 2023-11-28  
TumorPercentage 10%

Normal specimen:  
source Blood  
CollectedDate 2023-11-30  
ReceivedDate 2023-11-30

GENOMIC VARIANTS

Somatic - Potentially Actionable

		variant allele fraction
<b>BLM</b>	c.2207_2212delinsTAGATTC p.Y736fs*4 Frameshift-GOF	29.51% <div></div>
<b>PDGFRB</b>	c.3113A>G p.T681I Spliceregionvariant-LOF	7.47% <div></div>
<b>CHD6</b>	c.4800C>G p.I1600M Spliceregionvariant-LOF	11.65% <div></div>

Somatic - Biologically Relevant

<b>ARID2</b>	c.798G>A p.I1600M Nonsense-LOF	15.67% <div></div>
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Germline - Pathogenic

No Germline - Pathogenic variants were found in the limited set of genes on which we report.

Pertinent Negatives

<b>ERCC2</b>	<b>KIT</b>	<b>KLF4</b>	<b>FBXW7</b>
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IMMUNOTHERAPY MARKERS

Tumor Mutational Burden

<b>46 m/Mb</b>	53%
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Microsatellite Instability Status

Stable	<b>Equivocal</b>	High
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FDA-APPROVED THERAPIES, Current Diagnosis

KRAS G12C Inhibitors	<b>Sotorasib</b>	NCCN, Consensus, Non-Small Cell Lung Cancer MSK OncoKB, Level 1 KRASp.G12C G12C-GOF
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FDA-APPROVED THERAPIES, Other Indications

KRAS G12C Inhibitors	<b>Sotorasib</b>	NCCN, Consensus, Non-Small Cell Lung Cancer MSK OncoKB, Level 1 KRASp.G12C G12C-GOF
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ADDITIONAL INDICATORS

Unfavorable Prognosis	NCCN, Consensus, Non-Small Cell Lung Cancer KRASp.G12C Gain-of-function
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CLINICAL TRIALS

A Study of VS-6766 v. VS-6766 + Defactinib in Recurrent G12V, Other KRAS and BRAF Non-Small Cell Lung Cancer	Phase 2 City, state - x mi KRAS mutation
A Phase 1/2 Study of MRTX849 in Patients With Cancer Having a KRAS G12C Mutation KRYSTAL-1	Phase 1/2 City, state - x mi KRAS mutation STK11 mutation
First-in-human Study of DRP-104 (Sirpiglenastat) as Single Agent and in Combination With Atezolizumab in Patients With Advanced Solid Tumors. (NCT04471415)	Phase 1/2 City, state - x mi NFE2L2 mutation STK11 mutation

VARIANTS OF UNKNOWN SIGNIFICANCE

Somatic	Mutation effect	Variant allele fraction
ALDH2	c.1510G>A p.E504K Nonsense-LOF NM_001011645	24.57% <div></div>
RNF43	c.505G>A p.E318D Missensevariant(exon2)-GOF NM_001011645	15.53% <div></div>
MYO1G	c.145G>A p.V49M Stopgain-LOF NM_001011645	2.42% <div></div>
CSF3R	c.3113A>G p.G751A Spliceregionvariant-GOF NM_001011645	4.39% <div></div>
FGFR2	c.755C>G p.C382R Nonsense-LOF NM_001011645	5.58% <div></div>
EGFR	c.2239_2256del18 p.L747_P753del Frameshift-LOF NM_001011645	2.96% <div></div>
ALDH2	c.1510G>A p.E504K Frameshift-LOF NM_001011645	7.78% <div></div>
CDC73	c.1A>G p.M1V Spliceregionvariant-GOF NM_001011645	5.71% <div></div>
IDH2	c.419G>A p.R172K Nonsense-LOF NM_001011645	7.38% <div></div>

LOW COVERAGE REGIONS

BRCA1

SOMATIC VARIANT DETAILS - POTENTIALLY ACTIONABLE

BLM

c.2207\_2212delinsTAGATTC p.Y736fs\*4 Frameshift-GOF

VAF: 29.51%

BCL11B encodes a C2H2-type zinc finger protein that functions as a transcriptional repressor and plays a role in T-cell development and survival. Loss of function mutations, copy number loss, and fusions resulting in the underexpression of BCL11B are associated with cancer progression.

PDGFRB

c.3113A>G p.T681I Spliceregionvariant-LOF

VAF: 7.47%

PTEN encodes a phosphatase that acts as a tumor suppressor by negatively regulating the PI3K-AKT-mTOR pathway. Loss of function mutations, copy number loss, and underexpression of PTEN are associated with cancer progression.

CHD6

c.4800C>G p.I1600M Spliceregionvariant-LOF

VAF: 11.65%

TP53 encodes a protein that is a transcription factor that regulates the expression of genes involved in cell cycle arrest, apoptosis, and DNA repair. TP53 is a tumor suppressor gene that is mutated in many cancers. Mutations in TP53 are associated with cancer progression.

SOMATIC VARIANT DETAILS - BIOLOGICALLY RELEVANT

ARID2

c.798G>A p.I1600M Nonsense-LOF

VAF: 15.67%

ARID2 encodes a protein that is a subunit of the SWI/SNF chromatin remodeling complex SWI/SNF-B or PBAF. This complex functions in ligand-dependent transcriptional activation. Loss of function mutations and copy number loss of ARID2 are associated with cancer progression.

CLINICAL HISTORY

Diagnosed on  
2023-11-26