

KIT 36673512 1 01 13

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Results are due no later than midnight, Central Time:

July 10, 2023

CAP # 1952901 - 22 SEQ # 01
Products:NGSST
University of Kansas Health System
Sarah Dillon
TEL# 1-913-588-1710 FAX#

Next-Generation Sequencing (NGS) - Solid Tumor Survey Result Form

Important

You must submit results online. Emailed, faxed, or mailed results are no longer accepted.

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Variant Master List

- The codes listed in the Variant Code column are to be used in the Results section to indicate the variants that your laboratory detects.
- Select the "(Gene) not tested" bubble if your laboratory does not test for ANY variants in a given gene. Laboratories selecting this response should not select the individual "Variant Not Tested" result option for that gene.
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Gene	Variant	Genomic Description (hg19)	Variant Code	Variant Not Tested
ALK	ALK c.3516-1G>T	chr2:29443702C>A	1810	<u>020</u> (1898)
(NM_004304.4)	ALK c.3521T>G p.F1174C	chr2:29443696A>C	1811	(1899)
	ALK c.3589G>A p.E1197K	chr2:29443628C>T	1812	(1900)
010 🗹 (2157)	ALK c.3605G>A p.G1202E	chr2:29443612C>T	1813	(1901)
ALK not tested	ALK c.3797C>T p.A1266V	chr2:29432691G>A	1814	(1902)
not tosted	ALK c.3824G>A p.R1275Q	chr2:29432664C>T	1815	(1903)
BRAF	BRAF c.1798G>A p.V600M	chr7:140453137C>T	1820	(1908)
(NM_004333.4) BRAF c.1798_1799delGTinsAA p.V600K		chr7:140453136_140453137delACinsTT	4199	(4200)
	BRAF c.1798_1799delGTinsAG p.V600R	chr7:140453136_140453137delACinsCT	4201	(4202)
080 (2140)	BRAF c.1799T>A p.V600E	chr7:140453136A>T	1611	(1713)
BRAF not tested	BRAF c.1799_1800delTGinsAA p.V600E	chr7:140453135_140453136delCAinsTT	2914	(3017)
not tosted	BRAF c.1803A>T p.K601N	chr7:140453132T>A	2916	(3019)
EGFR	EGFR c.1391C>T p.S464L	chr7:55227924C>T	4211	(4212)
(NM_005228.3)	EGFR c.1393G>A p.G465R	chr7:55227926G>A	5162	(5163)
	EGFR c.2236_2250del15 p.E746_A750delELREA	chr7:55242466_55242480delGAATTAAG AGAAGCA	4213	(4214)
150 (2158) EGFR	EGFR c.2303G>T p.S768I	chr7:55249005G>T	3470	(3518)
not tested	EGFR c.2369C>T p.T790M	chr7:55249071C>T	1822	(1910)
	EGFR c.2582T>A p.L861Q	chr7:55259524T>A	5164	(5165)

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 should not select the individual "Variant Not Tested" result option for that gene.
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Gene	Variant	Genomic Description (hg19)	Variant Code	Variant Not Tested
EDDDO	ERBB2 c.929C>A p.S310Y	chr17:37868208C>A	3383	<u>020</u> (3411)
ERBB2 (NM_004448.2)	ERBB2 c.929C>T p.S310F	chr17:37868208C>T	3384	(3412)
	ERBB2 c.2313_2324dupATACGTGATGGC		2935	(3038)
	ERBB2 c.2326_2327insTGT p.G776delinsVC	chr17:37880997_37880998insTGT	4215	(4216)
010	ERBB2 c.2333G>A p.G778D	chr17:37881004G>A	3385	(3413)
not tested	ERBB2 c.2521C>G p.L841V	chr17:37881329C>G	3387	(3415)
F0FD4	FGFR1 c.448C>T p.P150S	chr8:38285864G>A	3941	(3942)
FGFR1 (NM_023110.2)	FGFR1 c.776C>T p.A259V	chr8:38282187G>A	3943	(3944)
	FGFR1 c.1638C>A p.N546K	chr8:38274849G>T	3945	(3946)
	FGFR1 c.1681G>A p.V561M	chr8:38273561C>T	4506	(4507)
080	FOED4 = 4000A > C = MOEGE = = = = = = = = = = = = = = = = = =		3947	(3948)
not tested			3949	(3950)
	FGFR3 c.742C>T p.R248C	chr4:1803564C>T	3954	(3955)
FGFR3 (NM_000142.4)	FGFR3 (NM_000142.4) FGFR3 c.746C>G p.S249C chr4:1803568C>G		3956	(3957)
	FGFR3 c.1108G>T p.G370C	chr4:1806089G>T	4509	(4510)
450	FGFR3 c.1111A>T p.S371C	chr4:1806092A>T	4511	(4512)
150 @ (3953) FGFR3	FGFR3 c.1118A>G p.Y373C	chr4:1806099A>G	3958	(3959)
not tested	FGFR3 c.1948A>G p.K650E	chr4:1807889A>G	5841	(5842)
IDH1	IDH1 c.392G>A p.G131D	chr2:209113115C>T	3388	(3416)
(NM_005896.3)	IDH1 c.394C>G p.R132G	chr2:209113113G>C	1638	(1740)
	IDH1 c.394C>T p.R132C	chr2:209113113G>A	1639	(1741)
	IDH1 c.394_395delCGinsTC p.R132S	chr2:209113112_209113113delCGinsGA	3389	(3966)
220 (2145) IDH1	IDH1 c.395G>T p.R132L	chr2:209113112C>A	1641	(1743)
not tested	IDH1 c.395G>A p.R132H	chr2:209113112C>T	1853	(1941)



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Gene	Variant	Genomic Description (hg19)	Variant Code	Variant Not Tested
IDH2	IDH2 c.514A>T p.R172W	chr15:90631839T>A	3390	<u>020</u> (3418)
(NM_002168.2)	IDH2 c.514A>G p.R172G	chr15:90631839T>C	1644	(1746)
	IDH2 c.515G>A p.R172K	chr15:90631838C>T	1645	(1747)
010 (2146)	IDH2 c.515G>C p.R172T	chr15:90631838C>G	3391	(3419)
IDH2	IDH2 c.515G>T p.R172M	chr15:90631838C>A	3392	(3420)
not tested	IDH2 c.516G>C p.R172S	chr15:90631837C>G	1646	(1748)
KIT	KIT c.1504_1509dupGCCTAT p.A502_Y503dup	chr4:55592180_55592185dupGCCTAT	3106	(3107)
(NM_000222.2)	KIT c.1961T>C p.V654A	chr4:55594258T>C	1858	(1946)
	KIT c.2446G>C p.D816H	chr4:55599320G>C	3394	(3422)
080 (2148)	KIT c.2446G>T p.D816Y	chr4:55599320G>T	1857	(1945)
KIT not tested	KIT c.2447A>T p.D816V	chr4:55599321A>T	1656	(1758)
not tested	KIT c.2466T>A p.N822K	chr4:55599340T>A	1657	(1759)
KRAS	KRAS		4229	(4230)
(NM_004985.3)	KRAS c.35G>A p.G12D	chr12:25398284C>T	1864	(1952)
	KRAS c.37G>C p.G13R	chr12:25398282C>G	3395	(3423)
150 (2163)	KRAS c.38_39delGCinsAA p.G13E	chr12:25398280_25398281delGCinsTT	3442	(3446)
KRAS not tested	KRAS c.181C>A p.Q61K	chr12:25380277G>T	3697	(3719)
not tested	KRAS c.436G>C p.A146P	chr12:25378562C>G	1867	(1955)
MET	MET c.2942-9_2942-7delTGTinsGG p.?	chr7:116411894_116411896delTGTinsGG	5182	(5183)
(NM_001127500.2)	MET c.3072_3082+2del p.F1025fs	chr7:116412033_116412045delTTTTCCA GAAGGT	5184	(5185)
	MET c.3082+1G>T p.?	chr7:116412044G>T	4233	(4234)
220 ⊘ (2164) MET	MET c.3082G>T p.D1028Y	chr7:116412043G>T	5843	(5844)
not tested	MET c.3082G>C p.D1028H	chr7:116412043G>C	4239	(4240)
	MET c.3757T>G p.Y1253D	chr7:116423428T>G	1869	(1957)



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Gene	Variant	Genomic Description (hg19)	Variant Code	Variant Not Tested
MYOD1	MYOD1 c.365T>G p.L122R	chr11:17741694T>G	5845	<u>020</u> (5846)
(NM_002478.5)	MYOD1 c.364C>A p.L122M	chr11:17741693C>A	5847	(5848)
	MYOD1 c.361C>T p.R121C chr11:17741690C>T		5849	(5850)
	MYOD1 c.452G>A p.R151H	chr11:17741781G>A	5851	(5852)
010	MYOD1 c.508G>A p.A170T	chr11:17741837G>A	5853	(5854)
not tested	MYOD1 c.434C>T p.P145L	chr11:17741763C>T	5855	(5856)
NRAS	NRAS c.34G>A p.G12S	chr1:115258748C>T	3699	(3721)
(NM_002524.4)	NRAS c.34_36delGGTinsTGG p.G12W	chr1:115258746_115258748delACCinsCCA	4241	(4242)
	NRAS c.38G>A p.G13D	chr1:115258744C>T	3701	(3723)
	NRAS c.38G>C p.G13A	chr1:115258744C>G	3702	(3724)
080 (2165) NRAS	NRAS NRAS c.181C>A p.Q61K chr1:115256530G>T		1876	(1964)
not tested	NRAS c.182A>T p.Q61L	chr1:115256529T>A	3399	(3427)
PDGFRA	PDGFRA c.100G>A p.E34K	chr4:55127312G>A	3401	(3429)
(NM_006206.4)			3402	(3430)
	PDGFRA c.1698_1712delCCCAGATGGACATGA p.S566_E571delinsR	chr4:55141052_55141066delCCCAGATG GACATGA	3403	(3431)
150 (1640)	PDGFRA c.2255C>T p.S752F	chr4:55146581C>T	3404	(3432)
PDGFRA not tested	PDGFRA c.2525A>T p.D842V	chr4:55152093A>T	3703	(3725)
	PDGFRA c.2536G>A p.D846N	chr4:55152104G>A	3406	(3434)
PIK3CA	PIK3CA c.323G>A p.R108H	chr3:178916936G>A	3407	(3435)
(NM_006218.3)	PIK3CA c.1624G>A p.E542K	chr3:178936082G>A	2973	(3072)
	PIK3CA c.1624G>C p.E542Q	chr3:178936082G>C	2977	(3076)
	PIK3CA c.1625A>T p.E542V	chr3:178936083A>T	2976	(3075)
220 (2166) PIK3CA	PIK3CA c.1636C>G p.Q546E	chr3:178936094C>G	3408	(3436)
not tested	PIK3CA c.3140A>G p.H1047R	chr3:178952085A>G	1880	(1968)



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Gene	Variant	Genomic Description (hg19)	Variant Code	Variant Not Tested
POLE	POLE c.857C>G p.P286R	chr12:133253184G>C	5186	<u>020</u> (5187)
(NM_006231.4)	POLE c.1100T>C p.F367S	chr12:133252327A>G	5188	(5189)
	POLE c.1231G>C p.V411L	chr12:133250289C>G	5190	(5191)
010 🗹 (5159)	POLE c.1231G>A p.V411M	chr12:133250289C>T	5192	(5193)
POLE not tested	POLE c.1270C>G p.L424V	chr12:133250250G>C	5194	(5195)
not tested	POLE c.1376C>T p.S459F	chr12:133249847G>A	5196	(5197)
TP53	TP53 c.403T>G p.C135G	chr17:7578527A>C	3705	(3727)
(NM_000546.5)	TP53 c.404G>T p.C135F	chr17:7578526C>A	3454	(3458)
	TP53 c.482C>A p.A161D chr17:7578448G>T		3707	(3729)
080 (2155)	TP53 c.482C>T p.A161V chr17:7578448G>A		3708	(3730)
TP53	TP53 c.742C>T p.R248W	chr17:7577539G>A	3709	(3731)
not tested	TP53 c.861_874delGAATCTCCGCAAGA p.N288fs	chr17:7577068_7577081delGCGGAGATT CTCTT	5857	(5858)



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Results		
NGSST-01 010 □ 103 None of the listed variants	in the Variant Master List are detected	©20 11 Exception Code 33
If variants are detected, enter the variar	nt code from the Variant Master List, found on the result form, for each	/ariant.
Variant Code 1: 3470	Total coverage depth at Variant 1 position: 1559 Variant 1	allele fraction: 11.2 %
Variant Code 2: 1638	Total coverage depth at Variant 2 position: 958 Variant 2	allele fraction: 11.5 %
Variant Code 3: 1867	Total coverage depth at Variant 3 position: ¹⁰⁰ 784 Variant 3	allele fraction: 13.3 %
Variant Code 4: 2973 (if applicable)	Total coverage depth at Variant 4 position: 130 Variant 4	allele fraction: 8.3
Variant Code 5: (if applicable)	Total coverage depth at Variant 5 position: Variant 5	allele fraction:
Variant Code 6: (if applicable)	Total coverage depth at Variant 6 position: Variant 6	allele fraction: %
NGSST-02 210 103 None of the listed variants	in the Variant Master List are detected	220 11 Exception Code 33
If variants are detected, enter the code	from the Variant Master List, found on the result form, for each variant.	
Variant Code 1: 4201	Total coverage depth at Variant 1 position: 2176 Variant 1	allele fraction: 12.4 %
Variant Code 2: 1864 (if applicable)	Total coverage depth at Variant 2 position: 270 873 Variant 2	allele fraction: 10.4 %
Variant Code 3: (if applicable)	Total coverage depth at Variant 3 position: Variant 3	allele fraction:
Variant Code 4: (if applicable)	Total coverage depth at Variant 4 position: Variant 4	allele fraction: %
Variant Code 5: (if applicable)	Total coverage depth at Variant 5 position: Variant 5	allele fraction:
Variant Code 6: (if applicable)	Total coverage depth at Variant 6 position: Variant 6	allele fraction:

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Results, cont'd		
NGSST-03		020 11
⁰¹⁰ 103 None of the listed variants in	n the Variant Master List are detected	Exception Code 33
If variants are detected, enter the variant	code from the Variant Master List, found on the result for	form, for each variant.
Variant Code 1: 4211	Total coverage depth at Variant 1 position: 552	Variant 1 allele fraction: 10.1 %
Variant Code 2: 3106	Total coverage depth at Variant 2 position:	Variant 2 allele fraction: 20.1 %
Variant Code 3: 3454 (if applicable)	Total coverage depth at Variant 3 position:	Variant 3 allele fraction: 11.9 %
Variant Code 4:	Total coverage depth at Variant 4 position:	Variant 4 allele fraction: %
Variant Code 5:	Total coverage depth at Variant 5 position:	Variant 5 allele fraction: ———·— %
Variant Code 6: (if applicable)	Total coverage depth at Variant 6 position:	Variant 6 allele fraction: %



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As	say Characteristics					
	sing the NGS Platform Master List on the sassay:	ne kit instructions, indicate w	hich platform is ι	used in your laboratory t	for somatic variant d	etection for
	2923					
2. V	/hich categories of somatic variants are 220 274 Single nucleotide variants					er variations (CNVs)
3. V	/hat is the lower limit of detection for yo e limit of detection varies depending on	ur laboratory's assay in term the gene and region, indicat	s of somatic allel te the highest alle	e percentage? ele percentage.		
	Variant Type	Single nucleotid	le variants	Small insertions	and deletions	
	Lower limit of detection	050 1.0	%	1.0	%	
4. Is	a sensitivity control at or near the lowe	r limit of detection of the ass	ay included in ea	nch run?		
5. V (Sel	/hich sequencing strategies are used by ect all that apply.)	y your laboratory for somatic	variant detection	n for the single assay be	eing described in this	s program?
	080 223 Exome sequencing	367 Targeted seque or commercial t	ncing of cancer of	genes or mutation hotsp or hybrid capture pane	oots, such as custom	1
	224 Genome sequencing225 RNA sequencing	010 Other(s), specif		, , ,		
6. H	ow would you characterize the selection 140 559 Hybrid capture 560 Amplicon-based 010 Other, specify:	n method used by your labor	ratory's library pre	eparation?		
	150	_				
7. V	hich of the following best describes the	source of the content of you	ur laboratory's N0	GS panel?		
	160 558 Our laboratory uses a com 118 Our laboratory designed it			y the vendor (Answer Q	uestion #8, skip Qu	estion #9.)



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Assay Characteristics, cont'd	
8. If your laboratory uses a commercial kit with predesignated content, w	hich method does your laboratory use?
010 250 Agilent HaloPlex Cancer Research Panel	◯518 Thermo Fisher Ion AmpliSeq Lung and Cancer Panel
639 Archer Comprehensive Solid Tumor Panel for Illumina	519 Thermo Fisher Ion AmpliSeq Lung and Cancer Panel v2
0644 Archer FusionPlex Solid Tumor (RNA Input)	757 Thermo Fisher Oncomine Childhood Research Assay
647 Archer VariantPlex Solid Tumor (DNA Input)	649 Thermo Fisher Oncomine Comprehensive Assay Plus
392 Fluidigm Access Array	175 Thermo Fisher Oncomine Comprehensive Assay v3
755 Illumina AmpliSeg Focus Panel	520 Thermo Fisher Oncomine Focus Cancer Panel
756 Illumina AmpliSeq Hotspot Panel v2	650 Thermo Fisher Oncomine Precision Assay
501 Illumina TruSight Tumor 15 Panel	249 Not applicable; our laboratory performs exome or
502 Illumina TruSight Tumor 26 Panel	genome sequencing for somatic variant detection
503 Illumina TruSight Tumor 170 Panel	010 Other, specify:
0648 Illumina TruSight Tumor 500 Panel	020
O394 Thermo Fisher Ion AmpliSeq Cancer Hotspot Panel	
253 Thermo Fisher Ion AmpliSeq Cancer Hotspot Panel v2	
250 The mot isher for Amphoed Cancer Hotsport after 12	
9. If your laboratory designed its own library content, what library prepara 030 255 Agilent Custom SureSelect 758 Archer Custom VariantPlex 759 IDT xGen Custom Panel 258 Ion AmpliSeq Custom DNA Panel 760 Qiagen QlAseq Targeted DNA Custom Panel 761 Roche KAPA HyperChoice Custom Panel	ation method does your laboratory use? 395 Roche NimbleGen SeqCap EZ Designs 745 Twist Bioscience Custom Panel 010 Other, specify:
10. What is the read configuration used by your laboratory for the assay	used for somatic variant detection?
 261 Single-end reads 262 Paired-end reads 010 Other, specify: 060 	
11. What is the read length in base pairs for the assay used for somatic	variant detection?
⁰⁷⁰ 263 25 bp 267 100 bp	271 250 bp
264 36 bp 268 125 bp	272 300 bp
265 50 bp	273 400 bp 080 hp
266 75 bp 270 200 bp	010 Other, specify: bp
12. What is the average number of reads that covers the targeted bases	in your laboratory's assay?
⁰⁹⁰ 279 0 - 50X 283 351 - 500X	287 1,501 - 2,500X
280 51 - 150X 284 501 - 750X	288 > 2,500X
281 151 - 250X 285 751 - 1,000X	289 Our laboratory does not establish this metric
282 251 - 350X 286 1,001 - 1,500X	

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Assay Characteris	stics, cont'd				
13. What is the minimum nu	mber of reads that your lab	poratory requires for	each targeted base in th	e assay?	
010 290 0 - 25 read 291 26 - 50 rea 292 51 - 150 re	ds 0294 251	- 350 reads	296 501 - 750 reads 297 751 - 1,000 read 298 1,000 - 1,500 read		s not have
14. Which analysis software	is used for alignment, data	a pre-processing, an	d somatic variant calling	for this assay?	
020 302 Agilent Su	reCall		c. Somatic varia	nt calling: (Select all that apply.)	
762 Archer An	alysis		<u>130</u> 403	Alamut Visual	
303 CLC Geno			528	Ensembl Variant Effect Predictor	
304 DNASTAR	Lasergene Genomics Su	ite	522	Freebayes	
305 Illumina M			405		
	ruSight Software Suite			Illumina DRAGEN	
307 NextGENe				Illumina Pisces	
764 SOPHIA D				Internally developed pipeline	
308 Strand Ava			768	·	
	sher Ion Reporter Softwar	e	525 407		
Other, specify so	sher Torrent Suite		526		
•	elect all that apply)			SAMtools	
	BWA-MEM			Scalpel	
	BWA, other			SnpSift	
	Illumina BaseSpace		524	•	
	Novocraft NovoAlign			Varscan	
	Other, specify:			Other, specify:	
080			30	• •	
		<u> </u>			
990 533 534 010	SAMtools Other, specify:	ect all that apply.)			
120		_			



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Assay Cha	racteristics, cont'd				
15. Which softwa	re is used for annotation, filtering and/or priori	tizatior	n for this assay? (Select all that apply.)		
<u>010</u> 527	Annovar	531	Internally developed	765	Thermo Fisher Torrent Suite
762	Archer Analysis	307	NextGENe	010	Other, specify:
S28	Ensembl Variant Effect Predictor	702	PierianDX	17	0
772	GenomOncology	529	Qiagen Clinical Insight		
399	Illumina BaseSpace	530	SNPEFF		
763	Illumina TruSight Software Suite	764	SOPHIA DDM		
332	Illumina VariantStudio	306	Thermo Fisher Ion Reporter Software		
16. Regarding ma	anual variant review, or visual inspection of va	riants,	which of the following best fits your laborato	ry practice	?
180 633	180 633 Every variant is manually reviewed before report generation/sign-out				
634	Select variants are manually reviewed before	repor	t generation/sign-out		
635	Our laboratory does not perform manual revi	ew of v	variants before report generation/sign-out		



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Specimen Requirements

17. Does your laboratory perform tumor-normal paired testing?
⁰¹⁰
18. If you answered yes to Question #17, does your bioinformatics pipeline require a paired normal specimen to analyze tumor variant calls?
020 652 Yes, always 653 Sometimes (eg, when a paired normal specimen is available) 180 No
19. If you answered yes to Question #17, what control tissue(s) does your laboratory use? (Select all that apply.)
030 □ 319 Buccal swabs □ 010 Other, specify:
□ 151 Fixed "normal" tissue 080
□ 150 Fresh "normal" tissue (eg, skin biopsy)
□ 320 Peripheral blood
20. If you answered yes to Question #17, does your laboratory report constitutional variants?
⁰⁹⁰ 179 Yes 180 No
21. Which specimen types does your laboratory test for somatic variant detection for the single assay being described? (Select all that apply.)
100 773 Air dried cytology slides 235 Frozen tissues 010 Other, specify:
☐ 232 FFPE cell blocks ☑ 322 Fresh bone marrow ☐ 190
234 Fine-needle aspirates 233 Fresh tissue
22. How does your laboratory assess tumor content?
200 390 Computationally derived from the sequencing data 389 Histologic review by a trained individual, who is not a pathologist
■388 Histologic review by a pathologist 387 Laboratory does not assess tumor content
23. Which quantity of purified genomic DNA does your laboratory require to perform this assay?
210 236 0 - 100 ng 238 201 - 500 ng 240 1,001 - 2,000 ng
© 237 101 - 200 ng
Reporting
24. If your laboratory performs confirmatory testing on any somatic variants for this assay, what methods are used? (Select all that apply.)
220 200 Droplet digital PCR (ddPCR) 310 Not applicable; somatic variants are 010 Other, specify:
□ 396 Fragment analysis reported without confirmation 340
 636 Multiplex ligation-dependent probe amplification (MLPA) 314 Other targeted mutation testing (eg, allele-specific PCR or real-time PCR)
312 Pyrosequencing 315 Other NGS-based platform, specify:
□ 311 Sanger sequencing 320
□ 313 Sequenom
637 Single Nucleotide Polymorphism Array (SNPArray)



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Reporting, cont'd		
25. In your laboratory's clinical reports, does your l	laboratory list the variant allele fraction?	
010 368 Yes, for all reported variants	,,	
369 Yes, when allele fraction and turn	nor content suggest subclonality	
0180 No	,	
26. In your laboratory's clinical reports, does your l	laboratory report total coverage depth (variant and re	eference reads) at the variant position?
020 179 Yes 180 No	industry report total cororage depart (randin and it	oronoo roado) at the variant position.
27. What types of interpretation does your laborate	ory routinely provide? (Select all that apply.)	
⁰³⁰ 372 Biological function, known		
373 Biological function, speculative		
371 Categorization of variants into cla	asses of medical significance	
374 Clinical implications, known		
375 Clinical implications, speculative		
379 Listing of clinically significant mut	tations that were not detected, disease-specific	
378 Listing of clinically significant mut	tations that were not detected, general	
 381 Listing of undercovered/underper 	rforming regions that were not detected, disease-spe	ecific
380 Listing of undercovered/underper	rforming regions that were not detected, general	
 377 Specific treatment recommendation 	ions, investigational therapies	
376 Specific treatment recommendation	ions, standard of care	
370 No interpretation provided beyon	d listing the mutations detected	
	ered approach (ie, tier 1: variants known to be assoc ut in a different disease type, tier x: variant with unkn	
¹⁵⁰ 179 Yes		
29. Who generates the final interpretive report?		
160 382 Bioinformatics program	139 Medical scientist	010 Other, specify:
383 Bioinformatician(s)	384 Molecular pathologist(s)	170
638 Certified technologist	144 Other pathologist(s)	
133 Clinician	386 Team with members from various discip	olines ————
136 Laboratory geneticist		
30. Which reference genome(s) are being used cu	urrently in your laboratory? (Select all that apply.)	
180 ☑ 1255 hg19 (GRCh37)	0010 Other, specify:	
1256 hg38 (GRCh38)	220	
3967 Telomere-to-telomere (T2T)		



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Additional NGS Testing Questions				
31. If your laboratory is still using hg19 (GRCh37), wha	at is your timeline to convert to hg38 (GF	RCh38)?		
010 3396 In the next 6 months or less	3399 In the next 19 - 24 months	,		
3397 In the next 7 - 12 months	3400 Beyond the next 25 months			
3398 In the next 13 - 18 months	3401 We do not have plans to conv	vert to ha38		
The float is the field in	The de not have plane to cont	vert to rigod		
32. How many NGS-based assays for the detection of	somatic variants does your laboratory c	urrently perform?		
020 334 1 337 4				
335 2 338 5	030			
336 3 339 > 5, specify num	nber:			
33. Which categories of somatic variants are detected	by any of your laboratory's assays for se	olid tumors? (Select all that apply.)		
040 □ 754 Amplifications	278	Other structural variants (eg, translocations)		
277 Copy number variants (> 1 kb)	□ 010	Other, specify:		
276 Intermediate sized insertions and del	letions (eg, 50 bp - 1 kb)			
274 Single nucleotide variants	11	0		
275 Small insertions and deletions (eg, <	50 bp)			
34. Which categories of somatic variants are detected	by your laboratory's NGS papel for solid	A tumore? (Salast all that apply)		
120 754 Amplifications		Other structural variants (eg, translocations)		
277 Copy number variants (> 1 kb)		Other, specify:		
276 Intermediate sized insertions and del				
274 Single nucleotide variants	19	00		
	50 bp)			
35. Using the NGS Platform Master List on the kit instru	uctions, indicate which platform(s) are us	sed in your laboratory for detection of somatic variants.		
200 222	9	240		
210 3482	30	250		
0402				
36. Does your laboratory have an upper limit of length of	of detection for indels/insertions/deletior	ns?		
²⁶⁰ 179 Yes				
●180 No				
147 Not applicable				
36a. If yes, what is the upper limit?				
²⁷⁰ 664 ≤ 5 666 16 -				
○460 6 - 10 ○667 ≥ 26	;			
665 11 - 15				



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CAP # 1952901 - 22 SEQ # 01 Products:NGSST University of Kansas Health System Sarah Dillon TEL# 1-913-588-1710 FAX#

Ge	neral Supplemental Questions
1.	Does your laboratory intend to offer tests for somatic testing for homologous recombination deficiency? 184 Yes, currently 186 Yes, in the next 12 months 183 Yes, in the next 24 months 180 No
1a.	If yes, which genes and/or techniques will be employed? (Select all that apply.)
	201 Somatic sequencing of <i>BRCA1</i> 202 Somatic sequencing of <i>BRCA2</i> 203 Somatic sequencing of some or all of the following: <i>MRE11</i> , <i>RAD50</i> , <i>NBS2</i> , <i>CtIP</i> , <i>RAD51</i> , <i>ATM</i> , <i>H2Ax</i> , <i>PALB2</i> , <i>RPA</i> , <i>RAD52</i> 204 Loss of heterozygosity analysis 205 Telomeric allelic imbalance
	206 Large-scale state transitions010 Other, specify:
2.	Does your laboratory analyze and report tumor mutational signatures? 100 184 Yes, currently 186 Yes, in the next 12 months 183 Yes, in the next 24 months 180 No
2a.	If yes, which tumor mutational signatures does your laboratory report? (Select all that apply.)
	110
3.	Does your laboratory perform in-house or send-out global methylation profiling in primary central nervous system tumors? 200 749 Yes, in-house 750 Yes, send-out 180 No
За.	If yes, with what frequency is testing performed? 210 751 Routinely (most specimens) 752 Occasionally (select cases)

Customer Contact Center 800-323-4040 or 847-832-7000 (Country code: 1) Option 1



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CAP # 1952901 - 22 SEQ # 01 Products:NGSST University of Kansas Health System Sarah Dillon TEL# 1-913-588-1710 FAX#

Next-Generation Sequencing (NGS) Program Format Supplemental Questions

The CAP is considering a new format for proficiency testing involving NGS. Instead of completing a result form, participants would upload output files from their bioinformatic pipeline to a custom website. The new system would be more efficient, reduce data entry errors, and align proficiency testing with the nature of NGS testing. However, it would require some data manipulation by participating laboratories. Answer the questions below to help us better understand whether your laboratory would be able and willing to participate.

1. Is your laboratory able to obtain the following file(s) from your pipeline, and would your laboratory be willing to submit them as part of a proficiency testing challenge?

	Able to Obtain			Willing to Submit		
	Yes	No	Unknown/Unsure	Yes	No	Unknown/Unsure
BED	010 1341	1342	1319	020 1341	1342	1319
FASTQ	030 1341	1342	O 1319	040 1341	1342	O 1319
Unaligned BAM	050 1341	1342	O 1319	060 1341	1342	O 1319
Unfiltered VCF	⁰⁷⁰ 1341	<u></u>	1319	080 1341	1342	O 1319

2.	Would your la	aboratory be able and willing to submit your VCF file in lieu of a result form?
	090 1257	Yes, able and willing
	1258	No, unable
	1179	No, unwilling
	1319	Unknown/unsure
3.	Would your la	aboratory be willing and able to perform an initial batch upload of your responses using a standardized Excel spreadsheet in lieu of
	100 1257	Yes, able and willing
	1258	No, unable
	1179	No, unwilling
	1319	Unknown/unsure



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CAP # 1952901 - 22 SEQ # 01 Products:NGSST University of Kansas Health System Sarah Dillon

TEL# 1-913-588-1710 FAX#

Attestation/Use of Other Form

Attestation Statement

As stated in the February 28, 1992 United States Federal Register under Subpart H 493-801 (b) (1), "the individual testing or examining the samples and the laboratory director must attest to the routine integration of the samples into the patient work load using the laboratory's routine methods." The laboratory director or designee and the testing personnel must sign on the result form.

You may use the attestation page provided in the kit instructions or, alternatively, print, sign, and retain a copy of this page for your records and inspection purposes.

If your laboratory requires additional space for signatures, copy this form as needed.

We, the undersigned, recognizing that some special handling may be required due to the nature of proficiency testing (PT) materials, have as closely as is practical, performed the analyses on these specimens in the same manner as regular patient specimens. We confirm that results were not shared or PT specimens referred or tested outside our CLIA identification number.

Director (or Designee) (signature required)

Survey Mailing Information

Profit NGSST-A 2023

Testing Personnel (signature required)

Use of Other
If applicable, use this section to list methodology information not found on the master lists or result form. For online entry, you can enter only 255 characters. CAP Accreditation Program Participants: Do not use this section to make changes to your test/activity menu. Update your test/activity menu using Organization Profile on cap.org via e-LAB Solutions Suite.
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Signatures will not display when viewed online.

Customer Contact Center 800-323-4040 or 847-832-7000 (Country code: 1) Option 1

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