

# ID

Rapid, Molecular Diagnostics  
Enabling Personalized Medicine  
for Oncology Patients Worldwide

# THINK IDYLLA™

# A

3H



Idylla™. A revolutionary, fully automated system generating molecular biomarker results in only 3 hours! Suitable for any lab.

## THE NEED FOR IMPROVED, STANDARDIZED AND FAST DIAGNOSTICS

Cancer can hit anyone at any time and treatment remains a real challenge. Because cancer doesn't follow rules. It fights back against therapies. It adapts. It changes its path. It does whatever it can to stay ahead of us.

At the advanced edge of oncology, **rapid access** to **accurate data** about relevant cancer mutations and treatment resistance is vital and creates the opportunity for early disease interception<sup>1,2</sup> reducing the anxiety while waiting for results and the time before starting the best possible treatment.

Current technologies in molecular oncology are complex, require a lot of hands-on time and are often difficult to implement in the local laboratory. As a consequence, most laboratories do not perform molecular tests in-house, but send them out to specialized centers, where samples are batched in order to optimize costs.<sup>3-5</sup>

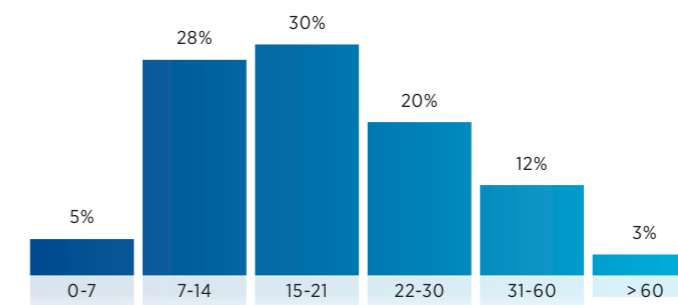
This causes delay to the fast delivery of results, preventing rapid initiation of correct therapy. In the meantime the tumor grows, which is detrimental in case of aggressively growing cancers.

## THE NEED FOR A RAPID TREATMENT INITIATION RESPONSE TOWARDS PATIENTS

Fast initiation of immunotherapy or targeted therapy as first-line treatment is crucial for cancer patients, as it increases overall survival rates.<sup>6-10</sup> Timely detection of biomarkers therefore is very important.

Today, turnaround times of reference technologies are on average 18 days, with 14% of patients waiting longer than a month to be able to start treatment. Ninety-five percent of the patients have to wait more than a week in order to receive the biomarker results.<sup>11</sup>

This means that precious time is lost whereas treatment initiation could have been started and unnecessary use of chemotherapy with its side effects could have been avoided.



TOTAL TURNAROUND TIME OF REFERENCE TECHNOLOGIES (IN DAYS)

## IDYLLA™, THE NEXT LEVEL IN DISEASE INTERCEPTION

Idylla™, a **fully automated**, sample-to-result PCR based **molecular diagnostics** system, provides **same-day** results helping physicians to make **timely decisions** on patients' therapy.

Idylla™ can be used with **multiple sample types**, including **solid** and **liquid biopsies**. This flexibility allows use of the system for **diagnostic**, **research**, and potentially future **monitoring** applications.

Idylla™, with its **compact scalable design** and **outstanding ease of use**, overcomes the traditional barriers of molecular diagnostics, allowing it to be used in virtually **any laboratory setting**.



## IDYLLA™ IS THE FIRST AND ONLY MOLECULAR DIAGNOSTIC SYSTEM THAT COMBINES



### FAST RESULTS

- < 3 minutes hands-on time
- Short turnaround time from 90 to 180 minutes



### EASE OF USE

- Fully automated sample-to-result process
- Walk-away system (no need for any intervention during the automatic process)



### ACCURATE RESULTS

- High sensitivity
- Highly standardized technology
- Contamination-controlled design



### SAMPLE VERSATILITY

- For solid and liquid biopsy



### ACCESSIBLE

- Access on demand - no need for batching



### CONNECTIVITY

- Remote assistance, monitoring and upgrading
- Bi-directional LIS



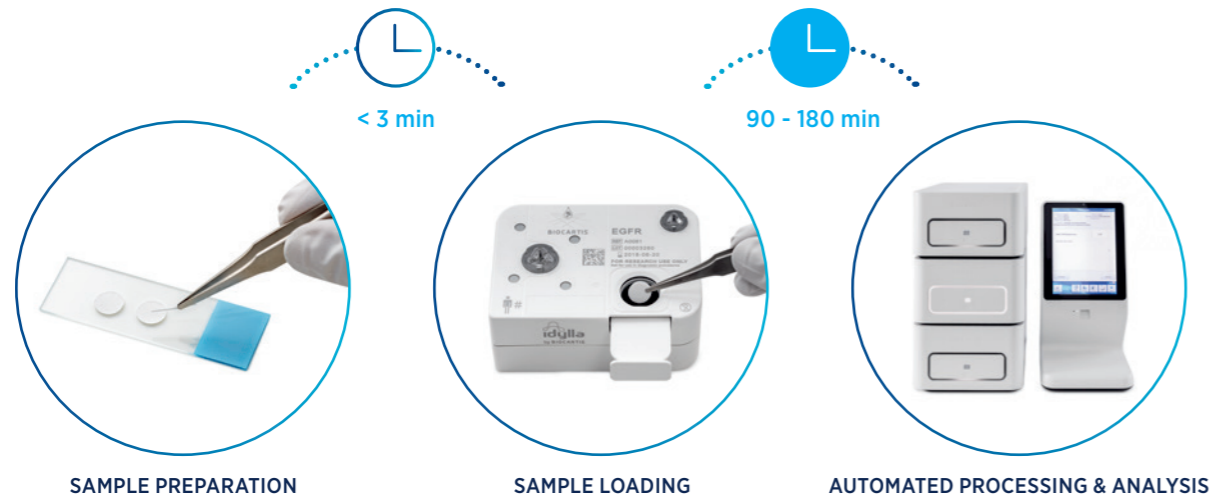
### MULTIPLEXING CAPABILITY

- Detection of up to 51 relevant mutations in one cartridge
- Multiple genes and loci detection in one cartridge

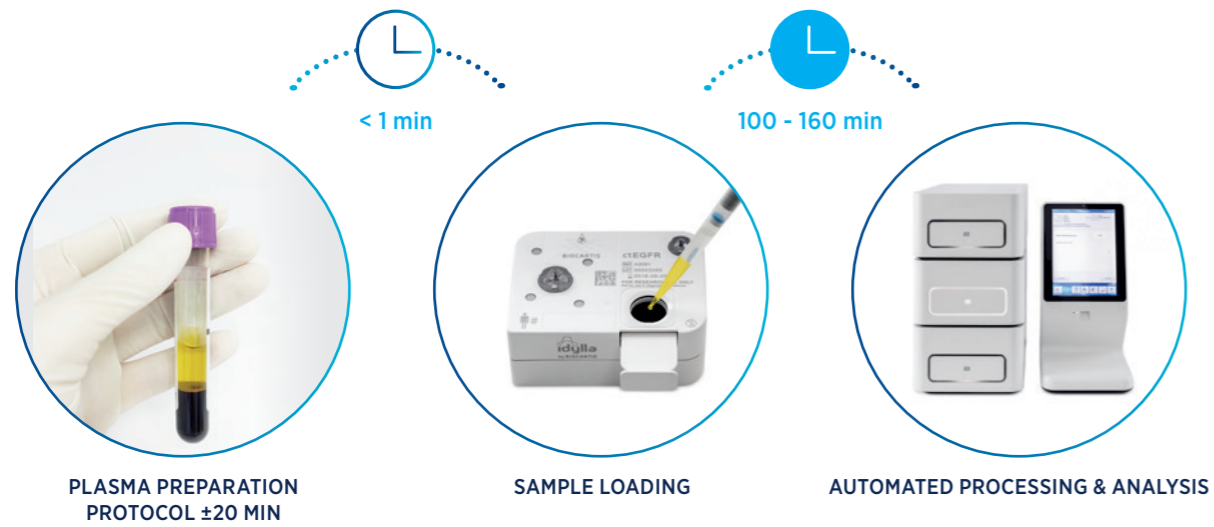


## THE REVOLUTIONARY IDYLLA™ WORKFLOW

### STANDARD SOLID BIOPSY WORKFLOW



### STANDARD LIQUID BIOPSY WORKFLOW



## IDYLLA™ COMPARED TO OTHER TECHNOLOGIES

### MINIMAL HANDS-ON AND ASSAY TURNAROUND TIMES



### REDUCED NUMBER OF INSTRUMENTS AND CONSUMABLES NEEDED

	idylla	OTHER RT-PCR	NEXT GENERATION SEQUENCING
<b>INSTRUMENTS</b>			
<b>CONSUMABLES</b>			
<b>LAB INFRASTRUCTURE (# OF ROOMS)</b>	1	3	4

Based on workflow exercise in real-life laboratory setting. Reference technologies used: Illumina MiSeq® and Qiagen Therascreen®.

## IDYLLA™ EGFR MUTATION DETECTION ON SOLID AND LIQUID BIOPSIES

### BACKGROUND INFORMATION\*

Lung cancer is the most common cancer worldwide, contributing for 13% of all cancer types. 85% of lung cancers are non-small cell lung cancers (NSCLC), of which histologically adenocarcinoma is the most prevalent.

EGFR mutations are mainly observed in lung cancer. EGFR mutation testing in exons 18-21 is recommended in all patients with advanced NSCLC of a non-squamous subtype. Activating mutations in the EGFR gene have been associated with sensitivity and resistance to a number of targeted anti-cancer therapeutics.<sup>8,9</sup> Exon 19 deletion and exon 21 (L858R, L861Q), exon 18 (G719X), and exon 20 (S768I) mutations are associated

with sensitivity to Tyrosine Kinase Inhibitors (TKIs). Exon 20 insertion mutation may predict resistance to TKIs. EGFR T790M mutation is the main indicator of the patient's resistance to TKI therapy and has been reported in about 55% of patients with disease progression after initial response to 1<sup>st</sup> or 2<sup>nd</sup> generation TKIs.<sup>8,9</sup>

The prevalence of EGFR mutations in NSCLC adenocarcinomas is 10-15% of Western and up to 50% of Asian patients. Sensitizing EGFR mutations are predictive for response to EGFR tyrosine kinase inhibitors.<sup>8,9,13</sup>

\*Idylla™ EGFR Mutation Test is validated for metastatic NSCLC

### DIAGNOSTIC PRODUCT

Idylla™ EGFR Mutation Test (CE-IVD)



Diagnostic use

approx. 150 min sample-to-result | < 2 min hands-on time | **51** mutations in exons 18, 19, 20, 21



Directly on 1 FFPE tissue section (5 µm) from **metastatic non-small-cell lung cancer**



Qualitative genotype call + Cq values



Mutation detection to support **treatment assessment**

### RESEARCH PRODUCT

Idylla™ ctEGFR Mutation Assay (RUO)



Research Use Only, not for diagnostic use

approx. 160 min sample-to-result | ± 2 min hands-on time | **49** mutations in exons 18, 19, 20, 21



Directly on 2 ml plasma



Qualitative genotype call + Cq values + Quality status



Applicable in NSCLC harboring EGFR mutations

## IDYLLA™ GENEFUSION DETECTION ON SOLID BIOPSIES

### BACKGROUND INFORMATION

Gene rearrangements represent an important class of somatic alterations in cancer. Due to their inherent expression in tumor tissue alone, rearrangements involving ALK, ROS1, RET, MET exon 14 and NTRK1/2/3 have become important biomarkers for cancer diagnosis, prognosis, and targeted therapies.<sup>14-16</sup>

The Idylla™ GeneFusion Panel (CE-IVD)\* detects ALK, ROS1, RET & MET exon 14 rearrangements and the Idylla™ GeneFusion Assay (RUO) additionally detects NTRK1/2/3 rearrangements. Both assays use two different detection technologies. Specific detection of ALK, ROS1, RET and MET exon 14 rearrangements

is combined with expression imbalance detection for ALK, ROS1 and RET (& NTRK1/2/3 in the Idylla™ GeneFusion Assay). Expression imbalance detects gene fusions, irrespective of the fusion partner, based on the 3' kinase overexpression caused by the partner gene. Expression imbalance results are indicative for the presence of a fusion and should be confirmed with another technology.

Discovery and further understanding of fusion genes across multiple cancer types like NSCLC, CRC, thyroid cancer, pediatric cancers, ... may in the future provide more effective therapies for cancer patients.

\*Idylla™ GeneFusion Panel is validated for use in NSCLC

### DIAGNOSTIC PRODUCT

Idylla™ GeneFusion Panel (CE-IVD)



Diagnostic use

approx. 180 min sample-to-result | < 3 min hands-on time | ALK, ROS1, RET & MET EXON 14 SKIPPING



Directly on 1-3 FFPE tissue sections (5-10 µm) from NSCLC



Qualitative genotype call for every biomarker + Quality status



Fusion detection in NSCLC

### RESEARCH PRODUCT

Idylla™ GeneFusion Assay (RUO)



Research Use Only, not for diagnostic use

approx. 180 min sample-to-result | < 3 min hands-on time | ALK, ROS1, RET, NTRK1/2/3 REARRANGEMENTS & MET EXON 14 SKIPPING



Directly on 1-3 FFPE tissue sections (5-10 µm)



Qualitative genotype call for every biomarker + Cq values + Quality status



Fusion detection applicable in multiple cancer types

*“Today, EGFR testing is a cumbersome process and it often takes several weeks before results are analyzed. This may lead to the administration of anti-EGFR therapy as second-line agents, which is less efficient than their use in first-line therapy. The Idylla™ EGFR Mutation Test technology has the potential to change that: it is a cost-effective solution, ensuring reliable and fast detection of all relevant mutations”*

*Prof Giancarlo Troncone, University of Napoli Federico II, Naples*



## BRAF

### IDYLLA™ BRAF MUTATION DETECTION ON SOLID BIOPSIES

#### BACKGROUND INFORMATION\*

Activating mutations in the *BRAF* gene are observed in about 8% of all cancers<sup>40</sup> and have been associated with sensitivity and resistance to a number of targeted anti-cancer therapeutics.

Cancers in which *BRAF* mutations are observed include: melanoma, colorectal cancer, thyroid cancer, lung cancer, hairy cell leukemia and ovarian cancer.

*BRAF* testing is recommended in all patients with metastatic melanoma and metastatic colorectal

cancer (mCRC). About 50% of all metastatic melanoma patients harbor mutations in the *BRAF* gene, making them eligible for BRAF or BRAF/MEK inhibitor therapy.<sup>41</sup> In mCRC, BRAF mutation status should be assessed alongside the assessment of tumor *RAS* mutational status for prognostic assessment (the presence of a *BRAF* mutation indicates poor prognosis). The prevalence of *BRAF* in mCRC is about 8-15%.<sup>6</sup>

\*Idylla™ BRAF Mutation Test is validated for use in metastatic melanoma

#### DIAGNOSTIC PRODUCT

Idylla™ BRAF Mutation Test (CE-IVD)

## BRAF

#### Diagnostic use



Directly on FFPE tissue sections (5-10 µm) from **metastatic melanoma**



Qualitative genotype call



Mutation detection for **baseline treatment**

*“The Idylla™ system has the potential to allow the start of targeted therapy within a time window of less than 24 hours following the diagnosis of metastasis, thereby saving precious time”*

*Prof. B. Neyns, M.D., Ph.D  
Medical Oncology,  
UZ Brussels, Belgium*

## ThyroidPrint

### IDYLLA™ THYROIDPRINT® GENE EXPRESSION SIGNATURE FOR INDETERMINATE THYROID NODULES ON FINE NEEDLE ASPIRATE BIOPSIES

#### BACKGROUND INFORMATION

Thyroid nodules are a frequent condition, affecting up to 30-40% of the adult population. Although most thyroid nodules have little clinical significance, in many cases a fine needle aspirate (FNA) biopsy will be performed to determine its nature. In 70% of cases, an FNA will be reported as benign and in 10% of cases as cancer, based on cytological examination. However, in the remaining **20%** of cases, the thyroid nodule will be reported as **indeterminate (Bethesda III/IV)\*,12**

The Idylla™ ThyroidPrint® Assay assesses the gene expression profile of FNA samples to enable laboratories to conduct further research on risk stratification of

indeterminate thyroid nodules. The Assay is a qualitative reverse transcription polymerase chain reaction (RT-PCR)-based assay with real-time detection and reports either a 'HIGH' or 'LOW' Idylla™ ThyroidPrint® result, based on a gene expression classifier score derived from 10 target genes. A **'HIGH'** result is indicative of an **atypical gene expression**, while a **'LOW'** result is indicative of a **normal gene expression**.

The Idylla™ ThyroidPrint® Assay procedure has been optimized for fresh FNA samples collected from an indeterminate thyroid nodule and stored in ThyroidPrint® Collection Buffer.

## ThyroidPrint

#### RESEARCH PRODUCT

Idylla™ ThyroidPrint® Assay (RUO)

#### Research Use Only, not for diagnostic use



Fresh FNA sample from an indeterminate thyroid nodule (Bethesda III/IV)\* collected in ThyroidPrint® Collection Buffer



Idylla™ ThyroidPrint® **Result** reported as either **'HIGH'** or **'LOW'**



Assessment of gene expression profile in FNA for risk stratification of indeterminate thyroid nodules

\*Bethesda III and IV (International)/Thy3a and Thy3f (UK)/TIR3A and TIR 3B (Italian)

**KRAS** **ctKRAS**

**IDYLLA™ KRAS MUTATION DETECTION ON SOLID AND LIQUID BIOPSIES**

**BACKGROUND INFORMATION\***

Activating mutations in the *RAS* genes are observed in 9-30% of all cancers and have been associated with sensitivity and resistance to a number of targeted anti-cancer therapeutics.<sup>17</sup> Cancers in which *KRAS* mutations are observed include: colorectal cancer, lung cancer and pancreatic cancer.

According to ESMO<sup>6</sup>, NCCN<sup>18</sup>, ASCO<sup>19</sup> and CAP/AMP/ASCO guidelines<sup>20</sup>, genotyping of clinically actionable mutations at a sensitivity of 5% in *RAS* genes exon 2 (codons 12 and 13), exon 3 (codons 59 and 61) and exon 4 (codons 117 and 146) is now mandatory on tumor tissue (either primary or metastasis) of all metastatic colorectal cancers, since the presence of these mutations correlate with the lack of response to

certain anti-EGFR antibody therapies<sup>6</sup>. About 46% of all metastatic colorectal tumors harbor mutations in exons 2, 3 and 4 of the *KRAS* gene.<sup>21</sup> Several studies are ongoing to define the predictive impact of *KRAS* mutations on therapy decision for non-small-cell lung cancer (NSCLC) patients.<sup>22-24</sup> Currently there is evidence that *KRAS* in lung cancer has a prognostic value, indicating poor survival for patients with NSCLC, compared to the absence of *KRAS* mutations.<sup>8</sup>

Using liquid biopsies for *KRAS* testing is minimally invasive, fast and easy to perform and provides an excellent solution to study the presence of *KRAS* mutations in different cancer types.

\*Idylla™ *KRAS* Mutation Test is validated for use in mCRC

**DIAGNOSTIC PRODUCT**

Idylla™ *KRAS* Mutation Test (CE-IVD)



**Diagnostic use**

approx. 120 min sample-to-result | < 2 min hands-on time | **21** mutations in codons 12, 13, 59, 61, 117, 146



**Directly** on FFPE tissue sections (5-10 μm) from **metastatic colorectal cancer**



**Qualitative genotype call**



Mutation detection for **baseline treatment**

**RESEARCH PRODUCT**

Idylla™ *ctKRAS* Mutation Assay (RUO)



**Research Use Only, not for diagnostic use**

approx. 130 min sample-to-result | < 1 min hands-on time | **21** mutations in codons 12, 13, 59, 61, 117, 146



**Directly** on 1 ml plasma



**Qualitative genotype call + Cq values**



**Applicable in multiple cancers** harboring *KRAS* mutations

**NRAS-BRAF** **ctNRAS3**

**IDYLLA™ NRAS MUTATION DETECTION ON SOLID AND LIQUID BIOPSIES**

**BACKGROUND INFORMATION\***

Activating mutations in the *RAS* genes are observed in 9-30% of all cancers and have been associated with sensitivity and resistance to a number of targeted anti-cancer therapeutics.<sup>17</sup> Cancers in which *NRAS* mutations are observed include colorectal, lung, thyroid cancers and melanoma.

According to ESMO<sup>6</sup>, NCCN<sup>18</sup>, ASCO<sup>19</sup> and the CAP/AMP/ASCO guidelines<sup>20</sup>, genotyping of clinically actionable mutations at a sensitivity of 5% in *RAS* genes exon 2 (codons 12 and 13), exon 3 (codons 59 and 61) and exon 4 (codons 117 and 146) is now mandatory on tumor tissue (either primary or metastasis) of all metastatic colorectal cancers, since the presence of these mutations correlate with the lack of response to certain anti-EGFR antibody

therapies.<sup>6</sup> About 5% of all metastatic colorectal tumors harbor mutations in exons 2, 3 and 4 of the *NRAS* gene.<sup>21</sup> In metastatic colorectal cancer *BRAF* mutation status should be assessed alongside the assessment of tumor *RAS* mutational status for prognostic assessment (the presence of a *BRAF* mutation indicates poor prognosis). Using liquid biopsies for *NRAS* testing is minimally invasive, fast and easy to perform and provides an excellent solution to study these mutations in different cancer types and lesions. Recent research data<sup>25,26</sup> suggest that in about 16% of patients, mutations may develop in codon 492 of the *EGFR* gene as a mechanism of resistance, to the anti-EGFR antibody therapies such as cetuximab.

\*Idylla™ *NRAS-BRAF* Mutation Test is validated for use in mCRC

**NRAS-BRAF**

**DIAGNOSTIC PRODUCT**

Idylla™ *NRAS-BRAF* Mutation Test (CE-IVD)

**Diagnostic use**

approx. 120 min sample-to-result | < 2 min hands-on time | **18** mutations in NRAS codons 12, 13, 59, 61, 117, 146

**5** mutations in BRAF codon 600

**Directly** on FFPE tissue sections (5-10 μm) from **metastatic colorectal cancer**



**Qualitative genotype call + Cq values**



Mutation detection for **baseline treatment**

**ctNRAS3**

**RESEARCH PRODUCT**

Idylla™ *ctNRAS-BRAF-EGFR S492R* Mutation Assay (RUO)

**Research Use Only, not for diagnostic use**

approx. 110 min sample-to-result | < 1 min hands-on time | **18** mutations in NRAS codons 12, 13, 59, 61, 117, 146

**5** mutations in BRAF codon 600

**2** mutations in EGFR codon 492 **Directly** on 1 ml plasma



**Semi-quantitative genotype call + Cq values**



**Applicable in multiple cancers** harboring *NRAS*, *BRAF* or *EGFR S492R* mutations

*Beatriz Bellosillo  
Laboratori de Biologia Molecular,  
Hospital del Mar, Barcelona*

*"Idylla™ allows very quick results with little hands-on time"*

## MSI

### IDYLLA™ MSI DETECTION ON SOLID BIOPSIES

#### BACKGROUND INFORMATION\*

Microsatellite instability (MSI) is defined as a length variation of DNA repeat regions found in microsatellites or homopolymers. MSI is caused by deficiency of the DNA mismatch repair system (dMMR) resulting in a distinct accumulation of insertions and deletions in microsatellite and homopolymeric regions.<sup>27</sup>

MSI can be sporadic or hereditary. MSI-high (MSI-H) is detected in 15% of all colorectal cancers; 3% are associated with Lynch syndrome (LS), the other 12% have sporadic disease.<sup>28</sup>

Clinical trials and pathophysiological studies indicate a wide distribution of MSI-H across tumor types.<sup>29</sup>

In addition to CRC, high incidences are observed in endometrial cancer (20-30%), and gastric cancer (15-20%).<sup>30</sup>

Guidelines recommend assessing the MSI status for all patients with colorectal or endometrial carcinomas for screening for Lynch syndrome as well as for prognostic stratification and potential response to certain immunotherapies.<sup>31-34</sup>

Research studies have shown that MSI-H patients respond favorably to immune checkpoint inhibitors, and checkpoint blockade therapy has recently been incorporated into clinical care for gastrointestinal cancers.<sup>35,36</sup>

\*Idylla™ MSI Test is only validated for CRC

#### DIAGNOSTIC PRODUCT

Idylla™ MSI Test (CE-IVD)

## MSI

#### Diagnostic use



FFPE

**Directly** on FFPE tissue sections (5-10 µm) from colorectal cancer. **No need** for paired normal tissue sections



**Qualitative MSI call**  
+ MSI score



Determination of **MSI status** in colorectal cancer

\*ACVR2A, BTBD7, DIDO1, MRE11, RYR3, SEC31A and SULF2

*"We are delighted with the performance of the Idylla™ MSI Test providing high quality results from minimal amount of tissue. The ease of use allows even laboratories with minimal histopathology experience to perform MSI testing in-house."*

**Sarah L. McCarron**  
Cancer Molecular Diagnostics,  
St. James' Hospital, Dublin, Ireland

## POLE-POLD1

### IDYLLA™ POLE-POLD1 MUTATION DETECTION ON SOLID BIOPSIES

#### BACKGROUND INFORMATION

Pathogenic POLE and POLD1 mutations drive an ultramutated phenotype across multiple cancer types, correlating with a favorable prognosis. They are emerging as a predictive biomarker for immunotherapy.<sup>42</sup>

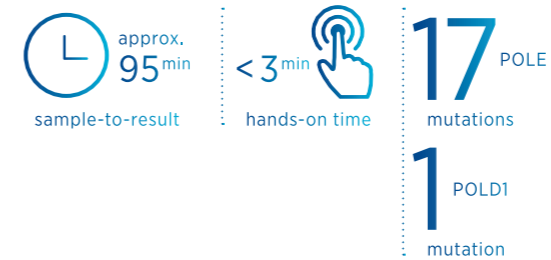
The Idylla™ POLE-POLD1 Mutation Assay (RUO) qualitatively detects 17 mutations in the *POLE* gene (P286H, P286L, P286R, P286S, M295R, S297F, F367S, F367V, D368Y, V411L (c.1231 G>C; G>T), L424I, L424V, P436R, M444K, A456P, S459F). Additionally, the assay detects one mutation in the *POLD1* gene (S478N).

## POLE-POLD1

#### RESEARCH PRODUCT

Idylla™ POLE-POLD1 Mutation Assay (RUO)

#### Research Use Only, not for diagnostic use



FFPE

**Directly** on FFPE tissue sections



**Qualitative genotype call**  
+ Cq values



**Applicable in multiple cancers** harboring POLE and POLD1 mutations



## IDH1-2

### IDYLLA™ IDH1-2 MUTATION DETECTION

#### BACKGROUND INFORMATION

Mutations in *IDH1* and *IDH2* are detected in multiple cancers such as glioma, Acute Myeloid Leukemia (AML) and cholangiocarcinoma. Due to their inherent occurrence in cancer, IDH1 and IDH2 mutations have become important biomarkers for tumor classification, prognosis, and emerging targeted therapies.

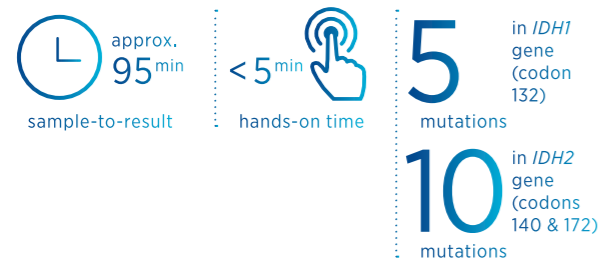
The Idylla™ IDH1-2 Mutation Assay Kit (RUO) qualitatively detects five IDH1 mutations in codon R132 (R132C/H/G/S/L), four IDH2 mutations in codon R140 (R140Q/L/G/W) and six IDH2 mutations in codon R172 (R172K/M/G/S/W). The Idylla™ IDH1-2 Mutation Assay Kit is compatible with FFPE tissue sections, human whole blood and bone marrow, and DNA extracted from all of these sample types.

#### RESEARCH PRODUCT

Idylla™ IDH1-2 Mutation Assay (RUO)

## IDH1-2

Research Use Only, not for diagnostic use



**Directly** from 50 µl extracted DNA  
**Directly** from 10 µl whole blood or bone marrow  
**Directly** from FFPE tissue sections



**Qualitative genotype call**  
**+ Cq values**



**Applicable in multiple cancers** harboring IDH1-2 mutations

## PIK3CA-AKT1

### IDYLLA™ PIK3CA-AKT1 MUTATION DETECTION ON SOLID BIOPSIES

#### BACKGROUND INFORMATION

Mutations in *PIK3CA* and *AKT1* are detected in multiple cancers including HR+/HER2- metastatic breast cancer. Collectively, mutations in *PIK3CA* and *AKT1* occur frequently, affecting up to 40% of patients with advanced HR+/HER2- breast cancer. They have become important biomarkers for emerging and approved targeted therapies.<sup>37-39</sup>

The Idylla™ PIK3CA-AKT1 Mutation Assay allows for the qualitative detection of 13 mutations in the *PIK3CA* gene (N345K, C420R, E542K, E545K, E545G, E545D (c.1635G>T), E545A, Q546K, Q546R, Q546E, H1047R, H1047L, H1047Y) and one mutation in the *AKT1* gene (E17K) in formalin-fixed, paraffin-embedded (FFPE) human tissue sections. The assay covers 99% of the druggable mutations in HR+/HER2- breast cancer.

## PIK3CA-AKT1

#### RESEARCH PRODUCT

Idylla™ PIK3CA-AKT1 Mutation Assay (RUO)

Research Use Only, not for diagnostic use



FFPE

**Directly** on FFPE tissue sections



**Qualitative genotype call**  
**+ Cq values**



**Applicable in multiple cancers** harboring *PIK3CA* and *AKT1* mutations

# IDYLLA™ CONNECT ENGAGE IN THE FUTURE

IDYLLA™ EXPLORE

ADVANCED SERVICES



## ADVANCED SERVICES TO ENSURE CONTINUITY IN YOUR LABORATORY WORKFLOW



### AUTOMATIC SOFTWARE UPDATES

New releases of Assay and Console Software are sent to your Idylla™ Console and can be installed with a single touch on the screen.



### IMMEDIATE AND REMOTE SERVICE AND SUPPORT

Idylla™ System parameters and error logs can be analyzed at anytime and anywhere to ensure swift actions and solutions.

## MORE INSIGHT INTO YOUR DATA WITH IDYLLA™ EXPLORE

Get connected and enjoy **the advantages of Idylla™ Explore**, a web-based application that allows you to analyze your data by providing

- Visualization of PCR curves from Idylla™ Test Results
- Cq values per target
- Direct Access to Console result reports

**Idylla™ Explore** can be accessed anywhere and anytime from your PC or tablet through the following link: <https://idyllaexplore.biocartis.com>

Subscribe today and **join the Idylla™ Explore community** by sending an email to [explore@biocartis.com](mailto:explore@biocartis.com)



ZOOM IN

## IDYLLA™ ORDER INFORMATION

### DIAGNOSTIC PRODUCTS (CE-IVD)

		Catalog#
Idylla™ EGFR Mutation Test	6 cartridges/box	A0060/6
Idylla™ GeneFusion Panel	6 cartridges/box	A0120/6
Idylla™ BRAF Mutation Test	6 cartridges/box	A0010/6
Idylla™ KRAS Mutation Test	6 cartridges/box	A0020/6
Idylla™ NRAS-BRAF Mutation Test	6 cartridges/box	A0030/6
Idylla™ MSI Test	6 cartridges/box	A0100/6

### RESEARCH PRODUCTS (RUO)

		Catalog#
Idylla™ EGFR Mutation Assay	6 cartridges/box	A0061/6
Idylla™ ctEGFR Mutation Assay	6 cartridges/box	A0111/6
Idylla™ GeneFusion Assay	6 cartridges/box	A0121/6
Idylla™ BRAF Mutation Assay	6 cartridges/box	A0011/6
Idylla™ ThyroidPrint® Assay	6 cartridges/box	TP0011/6
Idylla™ KRAS Mutation Assay	6 cartridges/box	A0021/6
Idylla™ ctKRAS Mutation Assay	6 cartridges/box	A0081/6
Idylla™ NRAS-BRAF-EGFR S492R Mutation Assay	6 cartridges/box	A0031/6
Idylla™ ctNRAS-BRAF-EGFR S492R Mutation Assay	6 cartridges/box	A0091/6
Idylla™ MSI Assay	6 cartridges/box	A0101/6
Idylla™ POLE-POLD1 Mutation Assay	6 cartridges/box	A0281/6
Idylla™ IDH1-2 Mutation Assay (Vial)*	6 vials/box	A0181/6
Idylla™ DNA Cartridge*	6 cartridges/box	A0191/6

\* The Idylla™ IDH1-2 Mutation Assay Kit consists of a Cartridge and a Vial.

Idylla™ PIK3CA-AKT1 Mutation Assay	6 cartridges/box	A0171/6
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### PLATFORM (CE-IVD)

		Catalog#
Idylla™ Instrument	1 unit	P0010
Idylla™ Console	1 unit	P1010

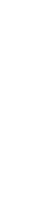
## IDYLLA™ ORDER INFORMATION

### CONNECTIVITY

	Catalog#
Idylla™ Explore	P2041
Connectivity Service	S1049

customerservice@biocartis.com

## IDYLLA™: NOTHING IS SIMPLE IN ONCOLOGY. NOTHING BUT THIS.



There's a clear need for improved, standardized and fast diagnostics that allow faster treatment initiation for cancer patients.

Idylla™, Biocartis' fully automated molecular diagnostics system, is the first and only molecular diagnostic system that combines unsurpassed ease of use, speed and accuracy on multiple sample types. With its compact, scalable design and outstanding ease of use, Idylla™ overcomes the traditional barriers of molecular diagnostics, allowing it to be used in virtually any laboratory setting.

And by providing same-day-results, Idylla™ supports physicians to make timely decisions on patients' therapy.



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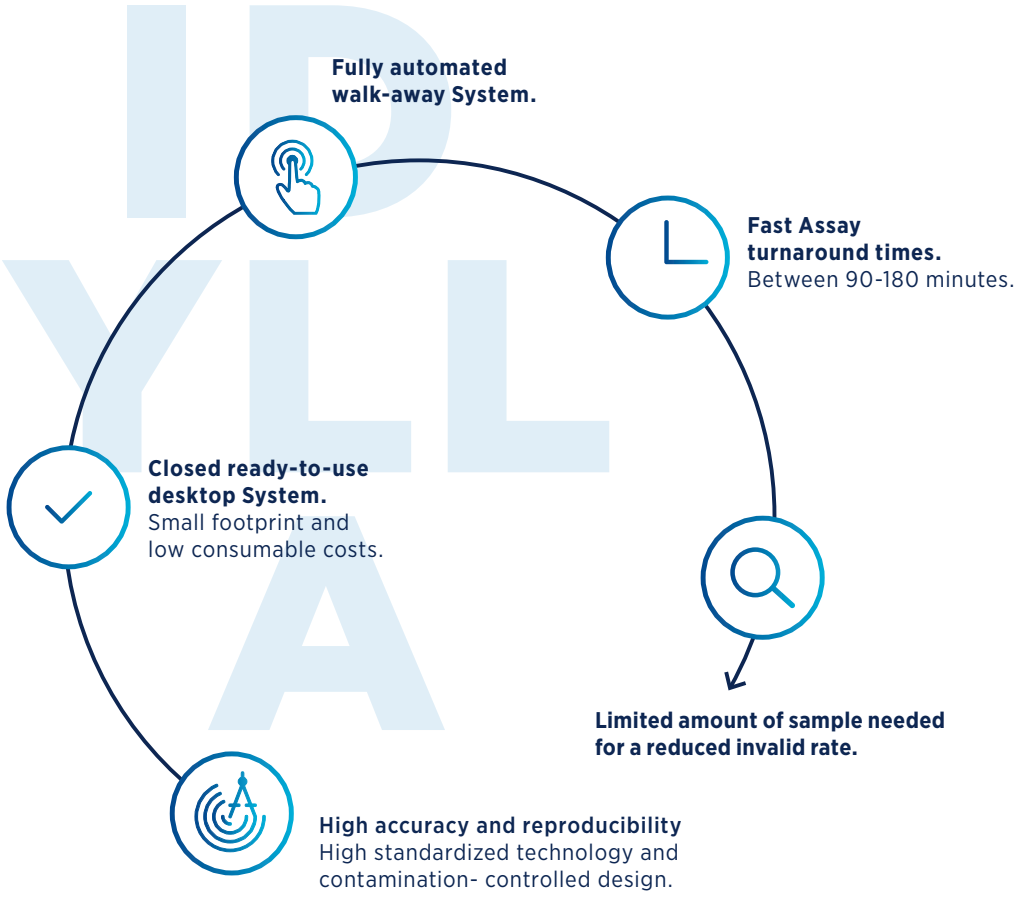
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