

CAP ID # 7186701  
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## SAMPLE REPORT

**Clinical:**

63-year-old female with a recent diagnosis of endometrial cancer(papillary serous), first presentation, no prior chemotherapy.

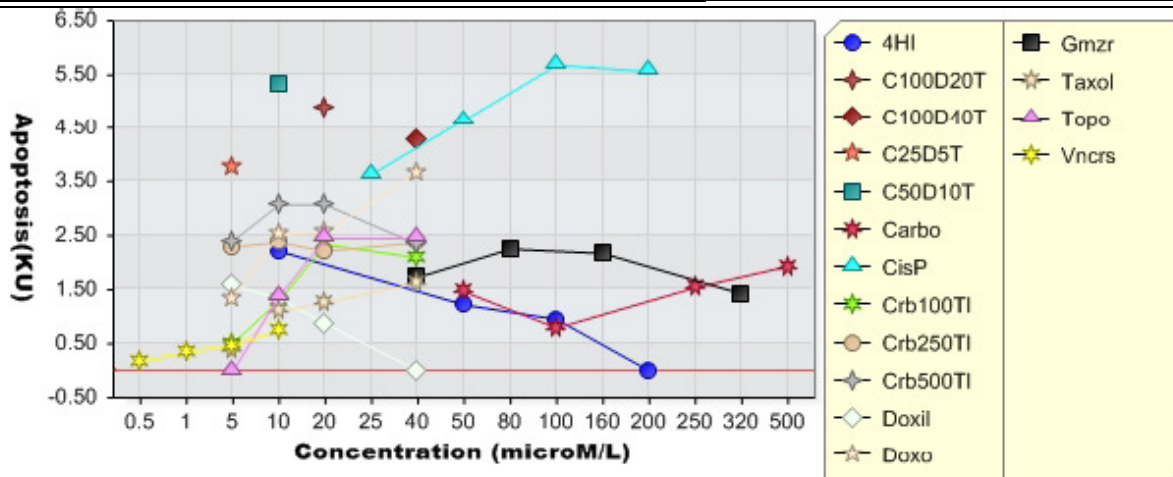
**INTERPRETATION:**

Primary endometrial tumor tissue biopsy:

- 1 A population of cells with morphologic and immunocytochemical features of an epithelial neoplasm is present.
2. In the MICK assay the tumor cells were most sensitive to cisplatin giving 5.7KU of apoptosis, but also gave 5.3KU with the combination of cisplatin with doxorubicin and taxol.
3. In the MICK assay the extent of the response was consistent with a high sensitivity of the tumor cells to single agent cisplatin or combined cisplatin with doxorubicin and taxol. Please see the Comment section for further detail.
- 4 Responses to the other tested reagents were consistent with lower sensitivity of the tumor cells to these reagents.
- 5 The Table and Graph below show all tested reagents, concentrations, and the MICK assay results.

**Maximum Apoptotic Response (Kinetic Units):**

CisP	C50D10T	C100D20T	C100D40T	C25D5T	Doxo	Crb500TI	Topo	Crb250TI	Crb100TI	Gmzr	4H1	Carbo	Taxol	Doxil	Vncrs
5.68	5.32	4.89	4.26	3.75	3.67	3.07	2.44	2.37	2.33	2.25	2.21	1.93	1.62	1.58	0.75



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## COMMENT:

Viable neoplastic cells collected from the specimen were tested for their sensitivity to multiple single agents and combinations of agents at multiple concentrations.

Of note, the alkylating agent ifosfamide requires hepatic metabolic transformation to the active metabolite, 4HI, and therefore cannot be tested directly in vitro. For the MICK assay the active metabolite, 4HI, was used.

The MICK assay identifies chemotherapy reagents that are most effective in killing malignant cells by inducing apoptosis, it specifically identifies and quantitates apoptotic cells. In this study, single agent cisplatin was most effective in inducing apoptosis causing 5.7KU maximal response which is consistent with high sensitivity of the tumor cells to this reagent. Of note, responses greater than 5.0KU are consistent with a high drug sensitivity and have previously been associated with a good clinical response to chemotherapy. The combination of cisplatin with doxorubicin and taxol also gave high levels of apoptosis but not as high as single agent cisplatin. Other tested reagents induced lower levels of apoptosis.

All tested chemotherapy reagents induced apoptosis in appropriate control cell lines.

## MICROSCOPIC/IMMUNOPHENOTYPIC STUDIES:

Cytospin preparations of the tumor contain a discohesive population of cells with abundant cytoplasm. Nuclei are frequently multiple. Tumor giant cells are present. Nuclei have fine chromatin with a single macronucleolus. The tumor is cytokeratin and Ca125 positive, calretinin negative. Ki67 is positive in 25-30% of the tumor cells.

The report was faxed to Doctor on 00/00/0000.

Attending Pathologist  
Phone: 123-456-7890

Electronically signed on 00/00/0000

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The pathologist's signature on this report indicates that the case was personally reviewed and the findings confirmed by the attending pathologist. This test was performed at DiaTech Clinical Pathology Laboratory. This laboratory is certified under CAP and CLIA-88 and is qualified to perform high complexity clinical testings. The MiCK assay measures drug induced apoptosis and its performance characteristics were determined at Vanderbilt University and at DiaTech Oncology. Clinical use of the MiCK assay is based on a statistically significant increase in CR rate and overall survival of AML patients whose treatment protocol included a drug to which the patient's tumor cells were sensitive in the assay. When used with solid tumors, the MiCK assay is expected to identify drugs most effective in killing patient's tumor cells by apoptosis. This test has not been cleared or approved by the U.S. Food and Drug Administration. The FDA has determined that such approval was not required.