NEO GENOMICS

NEO | PanTracer™ Pro

One order. Comprehensive insights. Confident decisions.

Molecular profiling made simple — comprehensive genomic and biomarker insights you need for therapy selection in one coordinated order.

PanTracer Pro delivers an integrated testing solution for solid tumors by seamlessly pairing comprehensive genomic profiling with cancer type-directed IHC and ancillary testing in a single, streamlined workflow. Eliminating order complexity, PanTracer Pro delivers the right tests at the right time, and accelerates therapy decision-making with timely, relevant results to improve patient outcomes.

Actionable information for therapy selection and clinical trial matching

Reduces delays in treatment planning with results in 8-10 days

Optimized workflow with a single order

Includes over 12 companion diagnostic IHC tests

Reflex to liquid biopsy

Seamlessly reflex to PanTracer LBx, our pan-cancer liquid biopsy assay, when tissue is unavailable or insufficient, or if tissue testing fails. Mobile phlebotomy services are available for patient convenience.

Analyzes over 500 cancer-related genes

Detecting SNVs, InDels, CNVs, and gene fusions. Includes immunotherapy markers, MSI, TMB and our advanced HRD assessment for ovarian cancer.

Personalized Insights

Ensures that you have critical information unique to each patient with guideline informed cancer type-specific IHC testing automatically added for treatment planning.

NEO GENOMICS

NEO | PanTracer™ Pro

Unknowns can mean missed therapy options.

PanTracer Pro eliminates the uncertainty with comprehensive insights in a single simplified order, so you can focus on what matters most — determining an effective treatment plan to improve outcomes for your patient. PanTracer Pro detects key biomarkers through CGP and add-on IHC testing to guide personalized therapy decisions.

Comprehensive insights for therapy selection

NSCLC[1-4]

NGS: *ALK*, *BRAF*, *EGFR*, *ERBB2* (HER2), *FGFR1/2/3*, *KRAS*, *MET*, *NRG1*, *NTRK1/2/3*, *RET*, *ROS1*
IHC: ALK, c-MET, HER2, PD-L1, *ROS1*

Breast[1, 5-10, 16-17]

NGS: *AKT1*, *BRCA1/2*, *ERBB2* (HER2), *ESR1*, *FGFR1/2/3*, *NTRK1/2/3*, *PIK3CA*, *PTEN*, *RET*, MSI, TMB
IHC: AR, ER, HER2, Ki-67, PD-L1, PR

Colorectal[5,11,12]

NGS: *BRAF*, *KRAS*, *NRAS*, *NTRK1/2/3*, *PIK3CA*, *POLD1*, *POLE*, *RET*, MSI, TMB
IHC: HER2

Ovarian[1,18]

NGS: *BRAF*, *BRCA1/2*, *NTRK1/2/3*, *RET*, MSI, TMB, HRD*
IHC: ER, FOLR1, HER2, PD-L1, PR

Gastric/GEJ[1,11,13-15]

NGS: *BRAF*, *NTRK1/2/3*, *RET*, MSI, TMB
IHC: CLDN18.2, HER2, PD-L1

Diagnosis information you provide will determine tumor type-directed IHC and ancillary testing. See NeoGenomics.com/pantracer-portfolio#pro for the full list of associated add-ons by cancer diagnosis.

CGP = comprehensive genomic profiling; CNVs = copy number variants; GEJ = gastroesophageal junction; HRD = homologous recombination deficiency; IHC = immunohistochemistry; InDels = insertions/deletions; MSI = microsatellite instability; NGS = next-generation sequencing; NSCLC = non-small cell lung cancer; SNVs = single-nucleotide variants; TMB = tumor mutation burden.

*HRD is validated for primary epithelial ovarian tumors on the PanTracer Tissue assay and is not currently available to NY clients.

For test information, please visit **NeoGenomics.com/test-menu**.
We pride ourselves on our unparalleled Client Services team. If you have questions regarding test information, specimen requirements, turnaround times, test add-ons, or patient results, or if you need additional assistance, please email us at **client.services@NeoGenomics.com** or call **866.776.5907, option 3**.

NeoGenomics, Inc. is a premier cancer diagnostics company specializing in cancer genetics testing and oncology data solutions. We offer one of the most comprehensive oncology-focused testing menus across the cancer continuum, serving oncologists, pathologists, hospital systems, academic centers, and pharmaceutical firms with innovative diagnostic and predictive testing to help them diagnose and treat cancer. Headquartered in Fort Myers, FL, NeoGenomics operates a network of CAP-accredited and CLIA-certified laboratories for full-service sample processing and analysis services throughout the US and a CAP-accredited full-service, sample-processing laboratory in Cambridge, England, United Kingdom.

1. Moore DC, Guinigundo AS. The role of biomarkers in guiding clinical decision-making in oncology. *J Adv Pract Oncol*. 2023;14(suppl 1):15-37. **2.** SPACEGEN. New markers of lung cancer seen from the 2025 NSCLC NCCN guideline V1. Published December 30, 2024. Accessed December 4, 2025. https://sspacegen.com/newsinfo.aspx?newsID=417&CateId=109 **3.** Yang M, Mandal E, Liu FX, O'Hara Jr RM, Lesher B, Sanborn RE. Non-small cell lung cancer with *MET* amplification: review of epidemiology, associated disease characteristics, testing procedures, burden, and treatments. *Front Oncol*. 2024;13:1241402. **4.** US Food and Drug Administration. FDA grants accelerated approval to telisotuzumab vedotin-tlly for NSCLC with high c-Met protein overexpression. Published May 14, 2025. Accessed December 4, 2025. https://www.fda.gov/drugs/resources-information-approved-drugs/fda-grants-accelerated-approval-telisotuzumab-vedotin-tllv-nsclc-high-c-met-protein-overexpression **5.** Badve SS, Penault-Llorca F, Reis-Filho J, et al. Determining PD-L1 status in patients with triple-negative breast cancer: lessons learned from IMpassion130. *J Natl Cancer Inst*. 2022;114(5):664-675. **6.** Bhave MA, Quintanilha JCF, Tukachinsky H, et al. Comprehensive genomic profiling of *ESR1*, *PIK3CA*, *AKT1*, and *PTEN* in HR(+)HER2(-) metastatic breast cancer: prevalence along treatment course and predictive value for endocrine therapy resistance in real-world practice. *Breast Cancer Res Treat*. 2024;207(3):599-609. **7.** Dietrich M, Velez M. Larotrectinib in *NTRK3* fusion–positive metastatic secretory carcinoma of the breast: a case study. *Curr Probl Cancer Case Rep*. 2025;17:100334. **8.** Genomenon. *FGFR2* - gene detail. CKB. Accessed December 4, 2025. https://ckb.genomenon.com/gene/show?geneId=2263 **9.** Helwick C. NCCN Clinical Practice Guidelines in Oncology: 2023 updates. *The ASCO Post*. Published May 25, 2023. Accessed October 31, 2025. https://ascopost.com/issues/may-25-2023/nccn-clinical-practice-guidelines-in-oncology-2023-updates/ **10.** Varga Z, Maccio U. Molecular pathology in breast disease: diagnostic, prognostic, and therapeutic tools. *Virchows Arch*. 2024;484(2):247-261. **11.** Vikas P, Messersmith H, Compton C, et al. Mismatch repair and microsatellite instability testing for immune checkpoint inhibitor therapy: ASCO endorsement of College of American Pathologists guideline. *J Clin Oncol*. 2023;41(10):1943-1948. **12.** Yu IS, Aubin F, Goodwin R, et al. Tumor biomarker testing for metastatic colorectal cancer: a Canadian consensus practice guideline. *Ther Adv Med Oncol*. 2022;14:17588359221111705. **13.** OncLive Biomarker Consortium. Gastric cancer: BRAF V600E. *OncLive*. Accessed December 4, 2025. https://www.onclive.com/interactive-tools/biomarker-consortium/gi-cancer/gastric-cancer/biomarkers/braf-mutations **14.** OncLive Biomarker Consortium. Gastric cancer: RET. *OncLive*. Accessed December 4, 2025. https://www.onclive.com/interactive-tools/biomarker-consortium/gi-cancer/gastric-cancer/biomarkers/ret-fusions **15.** Roche Diagnostics. VENTANA® CLDN18 (43-14A) RxDx Assay. Accessed December 4, 2025. https://diagnostics.roche.com/global/en/products/lab/ventana-cldn18-43-14a-rxdx-assay-pid00000600.html **16.** Gucalp A, Traina TA. Targeting the androgen receptor in triple-negative breast cancer. Curr Probl Cancer. 2016;40(2-4):141-150. doi:10.1016/j.currproblcancer.2016.09.004. PMID: 27816190. **17.** Allison KH, Hammond MEH, Dowsett M, et al. Estrogen and Progesterone Receptor Testing in Breast Cancer: ASCO/CAP Guideline Update. Arch Pathol Lab Med. Published online January 13, 2020. Updated May 2020. College of American Pathologists and American Society of Clinical Oncology. Accessed December 11, 2025. https://www.cap.org/protocols-and-guidelines/cap-guidelines/current-cap-guidelines/guideline-recommendations-for-immunohistochemical-testing-of-estrogen-and-progesterone-receptors-in-breast-cancer **18.** Sieh et al. reported that progesterone receptor (PR) and estrogen receptor (ER) expression are prognostic biomarkers for endometrioid and high-grade serous ovarian cancer survival.