NEO GENOMICS

NEO | RaDaR® ST

Colorectal

No visible disease. Hidden risk. Deeper answers.

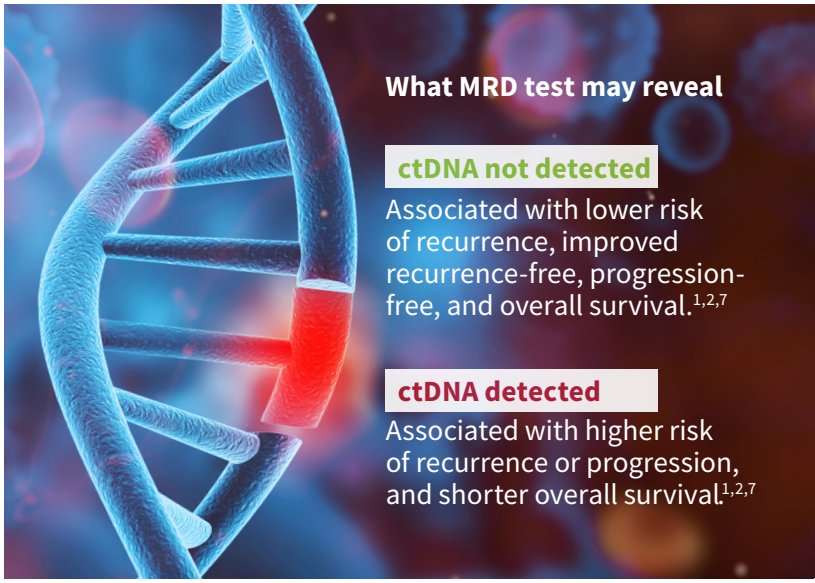
Following curative-intent surgery, many patients appear disease-free on imaging and pathologic assessment. However, early-stage colorectal cancer patients with similar clinicopathologic features can have markedly different recurrence risks,[1,2] and molecular residual disease may be present even when imaging appears clear.

RaDaR® ST is an ultra-sensitive, tumor-informed ctDNA assay designed to detect molecular residual disease (MRD), providing personalized molecular insight that complements traditional clinicopathologic risk assessment.[3-6]

With LoD95 of 11 ppm and detection **down to 1 ppm** RaDaR ST can detect up to 37% more patients compared to assays with 100 ppm limit of detection.[3-6]



What imaging and pathologic assessment may show
No radiographic evidence of disease.
Favorable clinicopathologic features.
Patient may appear disease-free.



What MRD test may reveal

ctDNA not detected
Associated with lower risk of recurrence, improved recurrence-free, progression-free, and overall survival.[1,2,7]

ctDNA detected
Associated with higher risk of recurrence or progression, and shorter overall survival.[1,2,7]

RaDaR ST demonstrated strong concordance and quantitative correlation compared to other MRD tests in stage II-IV resectable CRC

(>95% concordance; R > 0.96, P < 0.001)[7]

After surgery

Complement clinicopathologic recurrence-risk assessment to inform treatment decisions.

During treatment

Assess molecular response over time to identify responders and non-responders.

During surveillance

Complement imaging and cancer biomarkers to detect molecular recurrence earlier.

Recurrence starts at the molecular level. So does MRD monitoring.

RaDaR ST may provide earlier and deeper molecular insights into recurrence risk assessment, treatment response, and recurrence surveillance

	Risk stratification	Treatment response	Surveillance
ctDNA NOT DETECTED	• Low recurrence risk • May support treatment de-escalation when clinico-pathologic risk is also low	• Indicates molecular response to therapy • Associated with lower recurrence or progression risk	• No molecular recurrence detected • Associated with lower recurrence risk
ctDNA DETECTED	• High recurrence risk • May identify patients who could benefit from treatment despite otherwise favorable clinicopathologic risk factors	• Suggests lack of molecular response to therapy • Indicates elevated recurrence or progression risk	• Molecular recurrence detected • May precede radiographic progression and clinical findings

RaDaR ST is designed for accurate and efficient MRD testing

Enhanced accuracy

Proprietary methods prioritize high confidence, often clonal, variants to reduce false negatives.

Error suppression, germline subtraction, and CHIP filtering minimize false positives.

Low sample requirements

First test:
10 unstained slides plus
1 for H&E and 2 blood tubes.

Follow-up tests:
2 blood tubes.

Fast turnaround time

Baseline results in as little as **28 days**.

Follow-up timepoints in as little as **7 days**.

Median tissue retrieval turnaround time: **3 days.**

For additional assistance, please contact us at Client.Services@NeoGenomics.com or call 866.776.5907, option 3.

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2. Parikh AR, et al. Minimal residual disease detection using a plasma-only circulating tumor DNA assay in patients with colorectal cancer. Clin Cancer Res. 2021;27(20):5586-5594.
3. Elliott MJ, et al. Longitudinal evaluation of circulating tumor DNA in patients undergoing neoadjuvant therapy for early breast cancer using a tumor-informed assay. Nat *Commun*. 2025;16(1):1837.
4. Flach S, et al. Liquid biopsy for minimal residual disease detection in head and neck squamous cell carcinoma (LIONESS): a personalized circulating tumour DNA analysis in head and neck squamous cell carcinoma. *Br J Cancer*. 2022;126:1186-1194.
5. Flach S, et al. Personalized ctDNA analysis for detection of residual disease and recurrence in surgically treated HNSCC patients. npj Precis Oncol. 2026;10(1):103.
6. NeoGenomics data on file.
7. Smith CG, et al. Exploration of tumor-informed ctDNA detection and dynamics in a real-world cohort of colorectal cancer patients from the MD Anderson Cancer Center. *J Clin Oncol*. 2026;44:e15658.

Scan this QR code to view the list of references cited in this document and all RaDaR ST publications.

NeoGenomics, Inc. is a premier cancer diagnostics company specializing in cancer genetics testing and information services. 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 deliver timely, actionable insights that guide personalized care decisions. 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. ©2026 NeoGenomics Laboratories, Inc. All rights reserved.

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