

Now Available From Foundation Medicine

MET IHC Testing



Identify a New Treatment Option for Patients with NSCLC:

EMRELIS™: First-in-class MET-directed ADC

- FDA-approved for NSCLC patients with c-Met protein overexpression, occurring in 20-25% of NSCLC1
- New option for patients with historically poor prognosis^{2,3,4} and limited treatment choices

New Add-On Test: MET IHC

- · Available with any Foundation Medicine CGP test
- Uses the VENTANA® MET (SP44) RxDx Assay
- Supports treatment decision-making for EMRELIS™

A Simple, Powerful Addition to Your Workflow



Available for order through the Foundation Medicine Online Portal, EMR, or Test Requisition Form (EMR write-ins permitted)



MET IHC test reports will be delivered first separately from CGP test results, then added to Foundation Medicine CGP reports when ready



MET IHC test turnaround expected to be 3-4 days from receipt of specimen



Interested in adding MET IHC to a prior Foundation Medicine test?

Contact your Foundation Medicine Customer Experience Executive or our Client Services team at 888.988.3639 or by email at client.services@foundationmedicine.com.

MET IHC is a is a qualitative immunohistochemical assay that uses the VENTANA MET (SP44) RxDx Assay kit. The VENTANA MET (SP44) RxDx Assay, using rabbit monoclonal anti-MET, clone SP44, intended for laboratory use in the assessment of MET protein in formalin-fixed paraffin embedded (FFPE) non-squamous non-small cell lung cancer (NSCLC) tissue by light microscopy. MET protein expression in non-squamous NSCLC is determined by the percentage of viable tumor cells with membranous and/or cytoplasmic staining at 3+ intensity. This product is intended for in vitro diagnostic use. For additional information, refer to the VENTANA MET (SP44) RxDx Assay package insert, #740-7064. The kit for this test has been approved by the U.S. Food and Drug Administration. Performance characteristics were verified by Foundation Medicine, Inc., per Clinical Laboratory Improvement Amendments (CLIA 88) requirements and in accordance with the College of American Pathologists (CAP). For prescription use only

The results of VENTANA MET (SP44) RxDx Assay should be interpreted by a qualified pathologist in conjunction with histological examination, relevant clinical information and proper controls.

This product is intended for in vitro diagnostic (IVD) use.

published literatures. PLoS One. 2014:9(6):e99399.

- 1. Han Y, Yu Y, Miao D, et al. Targeting MET in NSCLC: An Ever-Expanding Territory. *JTO Clin Res Rep.* 2024;5(2):100630.
 2. Liang H, Wang M. MET Oncogene in Non-Small Cell Lung Cancer: Mechanism of MET Dysregulation and Agents Targeting the HGF/c-Met Axis. *Onco Targets Ther.* 2020;13:2491-510.
- 3. Park S, Choi YL, Sung CO, et al. High MET copy number and MET overexpression: poor outcome in non-small cell lung cancer patients. Histol Histopathol. 2012;27(2):197-207. 4. Guo B, Cen H, Tan X, et al. Prognostic value of MET gene copy number and protein expression in patients with surgically resected non-small cell lung cancer: a meta-analysis of
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