

Patient Consent for Genomic Testing

Gliolab (A Division of the Glioblastoma Foundation)

Purpose of the Tests

Your health care provider wishes to order one or more genomic tests offered by Gliolab, a division of the Glioblastoma Foundation. These tests are designed to help provide a personalized treatment roadmap based on your glioblastoma's unique molecular features. The three tests offered are listed below. Your healthcare provider will tell you which of these tests he or she is ordering for you. These three tests comprise our Gliolab Precision Path, personalized treatment roadmap.

Tests Being Performed

You may receive one, two, or all of the following tests:

1. Whole-genome DNA methylation profiling (Epignostix classifier)
2. Comprehensive genomic profiling (PGDx elio tissue complete)
3. Gene fusion detection (Archer FusionPlex Pan Solid Tumor v2)

These genomic tests find mutations and biomarkers in your DNA or RNA that may be causing your cancer to grow. Whole-genome DNA methylation profiling with Epignostix classifier, is a test used to classify different brain tumor types, and to predict response to certain therapies. The results of these genomic tests can help your health care provider choose a treatment plan that is right for you, which may include a targeted therapy, immunotherapy, or clinical trial.

Some types of genomic testing will help your health care provider monitor your response to treatment and use those insights to make informed decisions for future care. By signing below, you (or your legally authorized representative) acknowledge receipt of information regarding the potential risks, benefits, and limitations of the Test(s) and provide your consent as to the matters listed in this consent, including collection, use, retention, maintenance, and disclosure of (i) your biological sample(s), as required for your Test(s), which together with any residual or derivative materials maintained or created from your sample(s) are referred to in this consent as your "sample" or "samples," (ii) health and demographic information provided by your health care provider, as required for your Test(s) and (iii) the results and other data and information generated during performance of the Test(s). If you have any questions or need additional information about the Test(s), please consult your health care provider before signing this consent.

Why These tests are Important

These tests can help your doctor understand:

- The molecular type and diagnosis of your tumor
- Genomic alterations that may respond to targeted therapies
- Which treatments may be more or less effective for you



Potential Risks and Limitations

- Results may reveal unexpected or unclear findings.
- Not all results will lead to an immediate treatment option.
- Genomic testing may identify genomic changes of unknown significance.
- There may be emotional or psychological impacts depending on the results.

Sample Collection

These Test(s) require a sample of your tumor tissue. Gliolab will work with your health care provider to request and obtain your sample(s) (as required for your Test(s)) and to obtain from your health care provider information related to you or your cancer that is relevant for the Test(s). Please be aware that performing the requested Test(s) may exhaust the tissue that is sent to Gliolab, and that, depending on how much tissue remains from your biopsy, additional tests/studies requiring tissue from this biopsy may not be possible in the future.

Testing Process

Genetic material, including nucleic acid (e.g., DNA and/or RNA), will be extracted and/or obtained from your tumor sample(s) in accordance with Gliolab's standard operating procedures. This material will be analyzed and may be stored. You authorize the release of the original pathology slides/blocks/scrolls/clinical sample(s) and other materials, including extracted nucleic acid, that are requested by Gliolab ("Materials") to conduct the Test(s), and hereby direct any pathology lab receiving a request for your Materials from Gliolab to release and provide all such Materials to Gliolab, or a third party with which Gliolab is contracted. Gliolab will perform the requested Test(s) using genetic material, including nucleic acid, extracted and/or obtained from your sample(s). Gliolab will report the results of the Test(s) to your health care provider, who will, unless you direct otherwise, provide you with your results and discuss next steps with you. The results of your Test(s) may become a part of your permanent medical record. The testing process also generates additional data, information, and genetic and other material that may be retained and used for future testing ordered by your health care provider or to improve tests and testing technologies in the future.

About the Tests

Gliolab genomic test(s) are next-generation sequencing based tests. These diagnostic tests are used to identify patients who may benefit from treatment with specific therapies in accordance with the approved therapeutic product labeling. Whole-genome DNA Methylation testing provides diagnostic accuracy with 99.9% certainty as well as MGMT methylation status. Other reported genomic findings are not prescriptive or conclusive for labeled use of any specific therapeutic product. Use of the Test(s) does not guarantee that you will be matched to a treatment or clinical trial or that all relevant mutations will be found.

The Test(s) do not provide information about susceptibility to developing disease in the future.

A negative result does not rule out the presence of a mutation below the limits of detection of the Test(s).



Some patients may require a biopsy, which poses certain risks. Gliolab is under no ongoing obligation to update, revisit, or later reevaluate the results of the Test(s) after those results have been made available to your health care provider through the Test reports described above.

If requested, Gliolab shall provide a review of all finalized diagnostic, genomic, and molecular profiling reports by its Tumor Molecular Board (“TMB”). The TMB shall consist of a multidisciplinary panel of qualified professionals, which may include molecular pathologists, clinical oncologists, geneticists, bioinformaticians, and other relevant specialists, as determined appropriate by Gliolab.

The purpose of the TMB review is to evaluate molecular findings in the context of current clinical guidelines, relevant literature, and therapeutic options, with the goal of enhancing the clinical utility of the report and supporting personalized treatment planning. The TMB’s review and any associated recommendations shall be documented and made available to the ordering clinician or authorized healthcare provider in a timely manner following completion of the initial report.

Gliolab shall conduct such reviews in accordance with applicable clinical standards and regulatory requirements. All information reviewed and generated by the TMB shall be maintained as confidential and handled in compliance with all applicable privacy and data protection laws, including but not limited to the Health Insurance Portability and Accountability Act (HIPAA), the General Data Protection Regulation (GDPR) where applicable, and other relevant federal, state, or international regulations.

Gliolab reserves the right to modify the composition, scope, and operational procedures of the TMB as necessary to maintain compliance with evolving clinical and regulatory standards.

Disclosure of Results

The results of your Test(s) and other data and information generated during performance of the Test(s) will be maintained confidentially as required by the Health Insurance Portability and Accountability Act of 1996, as amended (HIPAA) and may be used and disclosed in a manner consistent with this consent. This includes disclosure to your health care provider(s) (or their designated representative(s)), your health insurance company(ies), researchers, and for certain secondary uses described below.

Secondary Data and Sample Uses

Gliolab and/or its representatives may redact information that directly identifies you from your sample(s), Materials, the results of your Test(s), other data and information generated during performance of the Test(s), and other health or demographic information that Gliolab receives about you to create what this consent calls the “Residual Information and Materials.” Gliolab may maintain and use the Residual Information and Materials for various purposes described

below. The Residual Information and Materials may also be shared with third parties, including, but not limited to, pharmaceutical and medical device companies, hospitals and universities, and other entities.



Gliolab and/or other entities that receive the Residual Information and Materials may use the Residual Information and Materials for any purpose permitted by law, including but not limited to:

- Conduct commercial development and research, including performing additional analyses, such as statistical analysis, using the Residual Information and Materials for scientific and/or research purposes.
- Perform quality assurance, test validation, and other operations purposes.
- Inform you and/or your health care provider about treatments, products and services from Gliolab or other companies that are relevant to the results of your Test(s) or data or information generated during performance of the Test(s), or about clinical trials for which you may be eligible.
- Aggregate the Residual Information and Materials with similar residual information from other individuals, which may be used to create, or be disclosed to, databases or datasets that are solely or jointly owned by Gliolab or be submitted by Gliolab to public databases to advance medical research.

You are not entitled to compensation for the use of the Residual Information and Materials or rights to any products or discoveries resulting from use of the Residual Information and Materials.

For more information on how Gliolab may use your health information, including your Residual Information and Materials, and your rights and choices with respect to that information please contact Gliolab via email at support@gliolab.org.

Retention of Samples

No uses other than those described in this consent will be made of your sample(s). Gliolab may choose to destroy or return the sample(s) at the end of the testing process or retain the sample(s) indefinitely for the secondary uses described above or for future Test(s) ordered by your health care provider. If you do not want your leftover sample(s) to be retained or used in the manner described in this consent, you may request that your sample(s) be destroyed or returned by contacting Gliolab Support at support@gliolab.org, or by calling 1- (855) 454-6522. Any such request will only be effective with respect to the storage of your sample(s) after the date such request is received by Gliolab.

Your Rights Regarding Samples and Results

You may have ownership rights in the sample(s) tested by Gliolab and in the results of the testing, including any results of a Test performed on your sample(s) and other data and information generated during performance of the Test(s). By agreeing to undergo the Test(s),

you nevertheless consent to the use of your sample(s), results, and other data and information generated during performance of the Test(s) for the purposes described in this consent.



Voluntary Participation

- By signing this form, you agree that your participation in testing is voluntary, and that you may decline or stop participation anytime without affecting your care. By signing below, you (or your legally authorized representative) acknowledge receipt of information regarding the potential risks, benefits, and limitations of genomic testing and provide your consent as to the matters listed above in this consent, including with respect to (i) the collection, use, retention, maintenance, and disclosure of (a) your samples, (b) your health and demographic information provided by your health care provider, as required for your genomic test(s) and (c) the results and other data and information generated during performance of the genomic test(s); and (ii) your right regarding your samples and results.

Patient Signature

By signing below, you confirm that you have read this consent and have talked with your health care provider about the Test(s), including the purpose, risks, benefits, and alternatives of this testing. You have discussed your questions with your health care provider, and you understand that if you have any future questions or concerns related to this testing, you will speak with your health care provider. You hereby agree to take part in this testing and authorize your sample(s) to be released for this testing. You understand that your leftover sample(s) may be retained indefinitely by Gliolab. You understand that the results of your Test(s), other data and information generated during performance of the Test(s), and other health or demographic information that Gliolab, as applicable, receives about you will be used for the purposes described in this consent. You further understand that the Residual Information and Materials may be used and shared for certain secondary purposes as described in this consent.

Signature

Patient or Legal Guardian Signature: _____

Date: _____

Printed Name of Person Providing Consent: _____

Relationship to Patient (if not self): _____

Witness (if applicable): _____

Date: _____