
What does participation involve?

- Read and sign an informed consent form that fully explains the study.
 - Provide your medical history and allow access to your medical records.
 - Have a blood sample (40 mL) drawn by a trained practitioner.
 - Complete questionnaire(s) at different time intervals
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Who can participate in the PATHFINDER 2 Study

The PATHFINDER 2 Study is currently open to men and women aged 50 years or older who meet eligibility criteria and receive care at participating health systems. Participants in previous or ongoing GRAIL sponsored studies are not eligible to participate in the PATHFINDER 2 Study.

How do I enroll?

If you are interested in enrolling or have additional questions, contact a study team member by calling [insert site phone number] or by emailing [insert study team email].

Kelsey Research Foundation
713-442-0007
Pathfinder@kelseyresearch.com

To learn more visit joinpathfinder2study.com

In fact, when cancers are diagnosed early before they have had the chance to spread, the overall

**5-year
survival rate is
4x higher
than when
diagnosed in later
stages.^{1,2}**

Your participation could help improve early cancer detection in the future.

Join the PATHFINDER 2 Study

**Help improve early
cancer detection.**



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About Galleri

All cells in your body release DNA into the bloodstream. DNA from cancer cells is different than DNA from healthy cells. The Galleri test looks for signals present in the blood that may be associated with cancer at the time of your blood draw. This test does not measure your genetic risk of developing cancer in the future.



What is the PATHFINDER 2 Study?

Too often, cancer goes undetected until it is at an advanced stage. Thinking about the possibility of having cancer can feel overwhelming, but taking steps to find cancer early can help you feel more in control of your health. The earlier that cancer is found, the higher the chance of survival.

The PATHFINDER 2 Study will evaluate the performance of a multi-cancer early detection test, called Galleri, that can detect many types of cancer through a simple blood draw. This test is being studied and is not approved or cleared by the Food and Drug Administration (FDA). It is not meant to replace the cancer screening tests your healthcare provider may recommend, such as colonoscopy or mammography.



Important Safety Information

The Galleri test is recommended for use in adults with an elevated risk for cancer, such as those aged 50 years or older. The Galleri test does not detect all cancers and should be used in addition to routine cancer screening tests recommended by a healthcare provider. Galleri is intended to detect cancer signals and predict where in the body the cancer signal is located.

Results should be interpreted by a healthcare provider in the context of medical history, clinical signs and symptoms. A test result of "Cancer Signal Not Detected" does not rule out cancer. A test result of "Cancer Signal Detected" requires confirmatory diagnostic evaluation by medically established procedures such as X-Rays or imaging, endoscopy or biopsy to confirm cancer.

If cancer is not confirmed with further testing, it could mean that cancer is not present or testing was insufficient to detect cancer, including due to the cancer being located in a different part of the body. False-positive (a cancer signal detected when cancer is not present) and false-negative (a cancer signal not detected when cancer is present) test results do occur.

Rx only.

Early Detection

When cancers are **diagnosed early** before they have had the chance to spread, the overall **5-year survival rate is 4 times higher** than when diagnosed in later stages.^{1,2}

Routine screening tests are recommended because they have been proven to save lives by detecting some cancers earlier.³ It is time to look at cancer more broadly, in addition to the 5 cancers that are routinely screened for today. The most important cancer is the one that you or your loved one may have — and beating it starts with knowing you have it.

1. Surveillance, Epidemiology, and End Results (SEER) Program (www.seer.cancer.gov) SEER*Stat Database: Incidence — SEER 18 Regs Research Data. Nov 2018 Sub. Includes persons aged 50–79 diagnosed 2006–2015. "Early/Localized" includes invasive localized tumors that have not spread beyond organ of origin. "Late/Metastasized" includes invasive cancers that have metastasized beyond the organ of origin to other parts of the body.

2. Noone AM, Howlader N, Krapcho M, et al. (eds). SEER Cancer Statistics Review, 1975–2015. National Cancer Institute, Bethesda, MD, http://seer.cancer.gov/csr/1975_2015/, based on November 2017 SEER data submission, posted to the SEER website April 2018.

3. Henley SJ, et al. Annual report to the nation on the status of cancer, part I: National cancer statistics. *Cancer*. 2020;126(10):2225–2249. doi: 10.1002/cncr.32802.