

MSI testing is used for Hereditary Cancer screening (Hereditary Non-Polyposis Colorectal Cancer -HNPCC or Lynch syndrome); As a biomarker (Prognostic and predictive biomarker for the response of Immunotherapy)

Patient Demographic

Name: Meenakshi Chauhan Sex: Female Date of Birth/Age: 64 years Disease: Large Cell Neuroendocrine Tumor of Uterus/Ovary PATIENTREPORT DATEBOOKING IDMeenakshi Chauhan31 May 2019011905300088

Clinician

Clinician Name: Dr Manish Singhal Medical Facility: Apollo Hospital Pathologist: Not Provided

Specimen

Site: Pelvic Exenteration Sample Type: FFPE block S 682/19 Date of Collection: 30-05-2019 Date of Booking: 30-05-2019

iMSI Rapid[™] Assay

Result

Microsatellite status - Stable

INTERPRETATION

BIOMARKER FINDINGS

ACVR2A	No mutation detected
BTBD7	No mutation detected
DID01	No mutation detected
MRE11	No mutation detected
RYR3	No mutation detected
SEC13A	No mutation detected
SULF2	No mutation detected

Mutations are not detected in any of the 7 markers		
*MSS	<2 of the 7 markers demonstrate instability	
#MSI-H	\geq 2 of the 7 markers demonstrate instability	
*Microsatellite stable		
# Microsatellite Instability-High		
For valid batch test results specific controls are being run with every batch.		

METHODOLOGY

Multiplex detection of seven mononucleotide repeats using molecular beacon probe-based polymerase chain reaction followed by high resolution melt-curve analysis. The assay uses seven novel biomarkers *ACVR2A*, *BTBD7*, *DID01*, *MRE11*, *RYR3*, *SEC31A* and *SULF2* as this set of biomarkers is stable over different cancer types and ethnicities and show high performance than other known assays like *Bethesda Panel*. This test is carried out on Idylla platform using the MSI/1.0 Cartridge based kit which is CE IVD approved.

 REFERENCES
 Zhao et al. (2014) eLife 3: e02725, 1-26.

 De Craene B. et al. (2018) ASCO Abstract #e15639.
 Zhao et al. (2018) ASCO Abstract #e15654

May 31, 2019

Dr Gulshan Yadav, MD, Consultant Pathology

Date