

Decipher® Prostate

Genomic Classifier

DECIPHER PROSTATE REQUISITION FORM
Fax: 1.858.766.6575 (Direct)
Email: orders-urology@veracyte.com
LAB-FRM-10004 v8.0

PATIENT INFORMATION

*Required Fields

Patient Legal First Name:*	Patient MI:	Patient Legal Last Name:*
PATIENT DOB:*(mm/dd/yyyy)		
Patient Address:		
City:	State:	Zip:
Patient Phone #:	Patient MRN:	
Patient E-mail:	Patient Race/Ethnicity:	

Account #:	Practice Name:	
Practice Address:*		
City:*	State:*	Zip:*
Phone #:	Fax #:	
Name of Ordering Physician(s)*		
<input type="checkbox"/>	<input type="checkbox"/>	
<input type="checkbox"/>	<input type="checkbox"/>	
<input type="checkbox"/>	<input type="checkbox"/>	
<input type="checkbox"/>	<input type="checkbox"/> Other: _____	

PRIOR THERAPY & EVIDENCE OF METASTASIS BILLING INFORMATION

Radiation or ADT Prior to Biopsy or RP* <input type="checkbox"/> Yes <input type="checkbox"/> No	Evidence of Distant Metastasis* <input type="checkbox"/> Yes If yes, complete Decipher Prostate Metastatic section below. <input type="checkbox"/> No	ICD-10 Primary Diagnosis Code(s)* <input type="checkbox"/> C61 Malignant neoplasm of the prostate <input type="checkbox"/> Other: _____ <small>Patient must have prostate cancer to be eligible for Decipher Prostate testing</small>	Bill Type <input type="checkbox"/> Medicare <input type="checkbox"/> Private Insurance <input type="checkbox"/> Patient Self-Pay <input type="checkbox"/> Client Bill	Secondary Insurance? <input type="checkbox"/> Yes <input type="checkbox"/> No	Specimen Collection Location (Medicare patients only) <input type="checkbox"/> Non-Hospital Patient <input type="checkbox"/> Hospital Inpatient <input type="checkbox"/> Hospital Outpatient (mm/dd/yyyy) Discharge Date
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Select ONE: Decipher Prostate (Biopsy, RP, or Metastatic)* See reverse side for test description.

<input type="checkbox"/> Decipher Prostate Biopsy		
Date of Biopsy* Check here if TURP sample: <input type="checkbox"/> (mm/dd/yyyy)	Tumor Stage* (Select one) <input type="checkbox"/> T1c <input type="checkbox"/> T2a <input type="checkbox"/> T2b <input type="checkbox"/> T2c <input type="checkbox"/> Other: _____	# Positive Cores # Total Cores
MEDICAL JUSTIFICATION* Patient has an estimated life expectancy ≥ 10 years, is being considered for the treatment below, and is eligible for treatment intensification (see reverse side for description). Decipher Prostate testing will help determine: (Select all that apply) <input type="checkbox"/> Conservative Management <input type="checkbox"/> Definitive Therapy (Radiation / RP) <input type="checkbox"/> Radiation Therapy + ST-ADT or LT-ADT		

<input type="checkbox"/> Decipher Prostate RP	
Date of RP* (mm/dd/yyyy)	Clinical Information (Select all that apply) <input type="checkbox"/> Positive Surgical Margins <input type="checkbox"/> Lymph Node Involvement <input type="checkbox"/> Extraprostatic Extension <input type="checkbox"/> Rising PSA / Biochemical Recurrence <input type="checkbox"/> Seminal Vesicle Invasion
Most Recent Post-RP PSA Value (ng/mL) PSA Date (mm/dd/yyyy)	MEDICAL JUSTIFICATION* Patient has an estimated life expectancy ≥ 10 years, is being considered for the treatment below, and is eligible for treatment intensification (see reverse side for description). Decipher Prostate testing will help determine: (Select all that apply) <input type="checkbox"/> Observation <input type="checkbox"/> Salvage Therapy (Radiation +/- ADT)

<input type="checkbox"/> Decipher Prostate Metastatic Only for patients with metastatic (M1) prostate cancer. Testing is performed on the most recent prostate biopsy or prostatectomy sample prior to any radiation or hormone therapy.			
Sample Type* <input type="checkbox"/> Biopsy Check here if TURP sample: <input type="checkbox"/> <input type="checkbox"/> RP Procedure Date: (mm/dd/yyyy)	Metastatic ICD-10 Code* ICD-10 code indicating metastasis required in addition to Primary Diagnosis Code above. <input type="checkbox"/> C79.82 Secondary malignant neoplasm of genital organs <input type="checkbox"/> Other: _____	Disease Volume* (Select one) <input type="checkbox"/> Low <input type="checkbox"/> High # Metastatic Lesions (Select one) <input type="checkbox"/> ≤ 3 <input type="checkbox"/> ≥ 4	Metastatic Sites (Select all that apply) <input type="checkbox"/> Extra-Pelvic Lymph Node <input type="checkbox"/> Bone <input type="checkbox"/> Visceral
MEDICAL JUSTIFICATION* Patient is being considered for the treatment below and is eligible for treatment intensification (see reverse side for description). Decipher Prostate testing will help determine: (Select all that apply) <input type="checkbox"/> ADT <input type="checkbox"/> Radiation <input type="checkbox"/> Radionucleotide Therapy <input type="checkbox"/> ARPI <input type="checkbox"/> Chemotherapy <input type="checkbox"/> Other: _____			

TURP = Transurethral Resection of the Prostate, RP = Radical Prostatectomy, ST = Short-term, LT = Long-term, ADT = Androgen Deprivation Therapy, ARPI = Androgen Receptor Pathway Inhibitor

PHYSICIAN SIGNATURE AND LETTER OF MEDICAL NECESSITY*

I confirm that Decipher Prostate is medically necessary for this patient. Results will be used to help determine the best treatment plan for their prostate cancer, which depending on the clinical scenario, may include conservative management, definitive therapy (i.e., radiation or RP), salvage therapy, and/or treatment intensification (i.e., addition of ADT, brachytherapy boost, ARPIs, chemotherapy). I hereby authorize testing, and an informed consent has been obtained. I confirm that I have the patient's assignment of benefits on file, authorizing benefits to be paid to ancillary service providers such as Veracyte, Inc. and its affiliates. I authorize Veracyte, Inc. and its affiliates to release information provided by me to process the claim for this service. I understand that, as part of the Decipher Prostate testing, additional genomic information will be collected as part of Decipher GRID (Genomics Resource for Intelligent Discovery) and may be provided as Research Use Only (RUO) data upon request. For Medicare Beneficiaries, I certify that this patient meets the Medicare eligibility criteria provided on the reverse side of this form.

Ordering Physician Signature*	Date* (mm/dd/yyyy)
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GRID REPORT See reverse side for description.

<input type="checkbox"/> Check here to receive your patient's GRID Report, which is provided as Research Use Only (RUO) data.	STUDY OR TRIAL CODE/NAME: (If applicable)
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THE FOLLOWING MUST BE PROVIDED*		
<input type="checkbox"/> Demographic/Face Sheet*	<input type="checkbox"/> Pathology Report*	<input type="checkbox"/> Imaging Report (If applicable, confirmation of metastasis)
<input type="checkbox"/> Most Recent Office Note*	<input type="checkbox"/> Copy of insurance card(s) (If applicable)	

THIS FORM WAS COMPLETED BY:	
Office Contact Name:	
Phone #:	E-mail:



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DECIPHER PROSTATE GENOMIC CLASSIFIER TEST DESCRIPTION

Decipher Prostate utilizes a genome-wide transcriptome assay to analyze the expression of 22 content genes and employs a proprietary algorithm to generate a Decipher score. It is performed on prostate tumor tissue from a biopsy, TURP, or radical prostatectomy specimens from patients diagnosed with localized or metastatic prostatic adenocarcinoma. The primary result is a continuous score between 0 and 1 (the "Decipher score") that reflects the aggressiveness of the tumor and is used to aid in prognostic risk stratification and treatment decision-making. While the Decipher score is determined solely from the genomic characteristics of the tumor alone, independent of clinical or pathological factors, the way the score is applied in clinical practice depends on the patient's clinical scenario and treatment setting:

The three variations of the Decipher Prostate test report (Biopsy, RP, or Metastatic) include data-driven interpretation language relevant for the patient's clinical scenario:

- Decipher Prostate Biopsy is intended for use in patients with localized prostate cancer who are deciding between treatment options and who have not received pelvic radiation or hormone therapy prior to the biopsy. Interpretation language reflects the patient's Decipher risk group (low, intermediate, high) and NCCN risk group.
- Decipher Prostate RP is intended for use in patients with localized prostate cancer after radical prostatectomy (RP) who are being considered for treatment and have not received pelvic radiation or hormone therapy prior to surgery. The interpretation language reflects the patient's Decipher risk group (low, intermediate, high) and if their prostate specific antigen (PSA) level is undetectable or rising / persistently elevated.
- Decipher Prostate Metastatic is intended for use in patients with metastatic prostatic adenocarcinoma. The test is performed on the most recent biopsy or prostatectomy specimen prior to treatment with radiation or hormone therapy, and interpretation language depends on the patient's Decipher risk group (lower, higher) and "disease volume" (low or high).

ORDER ACCEPTANCE CRITERIA

Veracyte accepts Decipher Prostate orders for patients with localized or metastatic prostatic adenocarcinoma who meet the Medicare Administrative Contractors (MACs) Local Coverage Determinations (LCDs) eligibility criteria. FFPE blocks, punch cores, or unstained slides are accepted from biopsy, TURP, or prostatectomy specimens. Whole mount slides are also accepted from prostatectomy specimens. For more detailed information, see the Specimen & Shipping Requirements document, LAB-FRM-10006.

Please note that Decipher Prostate Metastatic is only for patients with metastatic (M1) prostate cancer and testing is performed on the most recent prostate biopsy or prostatectomy sample **prior to any radiation or hormone therapy**. Metastatic disease volume (low volume or high volume) must be determined by the ordering physician.

GRID REPORT DESCRIPTION

The Decipher assay collects data across the transcriptome for each patient when the Decipher test is performed, and such data is used to create the patient's Decipher GRID profile. The GRID Report is a summation of transcriptomic gene signatures and biomarkers on the Decipher GRID profile. Physicians can access their patient's Decipher GRID Report for Research Use Only by checking the GRID Report box.



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