Report Guide

The DecisionDx®-Melanoma class result and GEP score is combined with clinicopathologic features to provide an individualized risk estimate for risk of recurrence and/or metastasis within five years and likelihood of a positive sentinel lymph node using validated artificial intelligence algorithms.

CLASS RESULT AND GEP SCORE

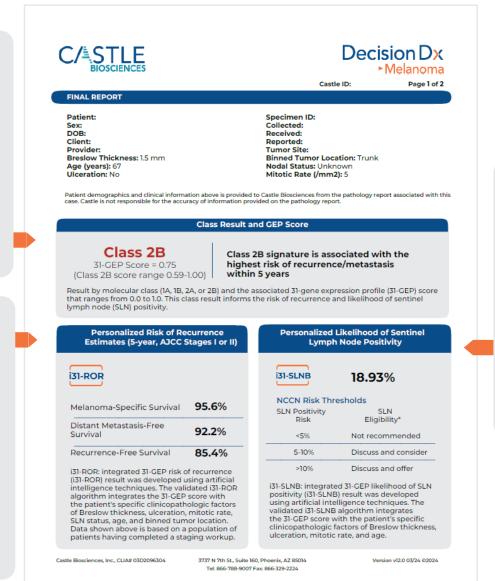
Classification of gene expression profile (GEP) as a class score for risk of recurrence and/or metastasis within five years. Results are reported as:

- Class 1A Lowest risk (0 to 0.41)
- Class 1B/2A Increased risk (>0.41 to <0.59)
- Class 2B Highest risk (0.59 to 1.0)

PERSONALIZED RISK OF **RECURRENCE ESTIMATES** (5-YEAR, AJCC STAGES I OR II)

The validated i31-ROR algorithm integrates the 31-GEP score with the patient's specific clinicopathologic factors of Breslow thickness. ulceration, mitotic rate, SLN status, age and binned tumor location. Personalized 5-year outcomes for three distinct endpoints are reported:

- Melanoma-Specific Survival (MSS)
- Distant Metastasis-Free Survival (DMFS)
- Recurrence-Free Survival (RFS)



PERSONALIZED LIKELIHOOD OF SENTINEL LYMPH NODE POSITIVITY

The validated i31-SLNB algorithm integrates the 31-GEP score with the patient's specific clinicopathologic factors of Breslow thickness. ulceration, mitotic rate, and age. It provides a personalized risk assessment for the likelihood of having a positive sentinel lymph node biopsy (SLNB).

 This information will not be reported if a SLNB has already been performed.











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Personalized Risk of Recurrence Estimates Only applicable if patient has a positive SLNB (5-year, AJCC Stage III)

Melanoma-Specific Survival 84.6%

i31-ROR

Distant Metastasis-Free Survival 72.3%

Recurrence-Free Survival 58.4%

About the Test

The **DecisionDx-Melanoma** molecular test for cutaneous melanoma is a proprietary gene expression (GEP) assay offered solely by Castle Biosciences, Inc. The test uses RT-PCR to determine the expression of a panel of 31 genes (28 discriminant and 3 control) in primary tumor tissue to provide information on two critical treatment decisions: intensity of follow-up and surveillance imaging; and the risk of a positive SLN to inform SLNB patient selection.

Recent clinical and population-based studies have shown that patients tested with DecisionDx.Melanoma had higher survival rates than patients not tested with DecisionDx.Melanoma (Bailey et al. CMRO. 2023). Patients with a Class 2A or 2B DecisionDx-Melanoma result who had imaging surveillance guided by their test result had tumor recurrences detected earlier and at a lower tumor burden compared to patients not tested with DecisionDx-Melanoma (Dhillion et al. Arch Dermatol Res. 2023).

The twenty-eight discriminating genes in this profile are: BAP1 (two gene loci), MGP, SPP1, CXCL14, CLCA2, S100A8, BTG1, SAP130, ARG1, KRT6B, GJA1, IDZ, EIFIB, S100A9, CRABP2, KRT14, ROBO1, RBM23, TACSTD2, DSC1, SPRRIB, TRIM29, APG93, TYRP1, PPL, LTA4H, and CST6. The three control genes are: FXR1, YKT6, and HNRNPL.

*Patient eligibility for SLNB is based on estimates of positivity using histopathologic factors like Breslow thickness, ulceration, and/or other adverse features. Adverse features that signal uncertainty about the adequacy of microstaging may include positive deep margin, mitotic index ≥ 2/mm2 (particularly in the setting of young age), lymphovascular invasion or a combination of these and/or other histopathologic and clinical factors.

For additional information about the development and validation of the DecisionDx-Melanoma test, the i31-GEP algorithms and references, scan the QR code below.



Castle Biosciences, Inc. | Sherri Borman, PhD, HCLD, Lab Director

This test was developed and its performance characteristics determined by Castle Biosciences Inc. It has not been cleared or approved by the FDA. The laboratory is regulated under CUA as qualified to perform high-complexity testing. This test is used for clinical purposes. It should not be regarded as investigational or for research.

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PERSONALIZED RISK OF RECURRENCE ESTIMATES (5-YEAR AJCC STAGE III)

DecisionDx-Melanoma testing is commonly performed prior to an SLNB procedure.

If a patient is or becomes clinically or pathologically node-positive (AJCC Stage III) personalized 5-year outcomes are proactively reported, including:

- Melanoma-Specific Survival (MSS)
- Distant Metastasis-Free Survival (DMFS)
- · Recurrence-Free Survival (RFS)

Including this information proactively reduces the need for amended reporting.

Additional information

For additional information about the development and validation of the DecisionDx-Melanoma test, the i31-GEP algorithms, and references scan the QR code below.



