

WHAT IS MULTI-CANCER EARLY DETECTION (MCED) SCREENING?

IT IS A SIMPLE **BLOOD TEST** THAT CAN DETECT MORE THAN **50** DIFFERENT TYPES OF CANCER.

DID YOU KNOW?

40% of Americans will be diagnosed with cancer in their **LIFETIME**.

3X The **5-Year Survival Rate** is **3X higher** for tumors detected at an early stage than those detected at a late stage.



Why Consider MCED Screening?

- Routine cancer screening **increases** your chances of identifying cancer at earlier stages, when it is easier to treat.
- Nearly **60%** of cancer deaths are caused by cancers not included in the current screening recommendations.

DOES AN MCED TEST REPLACE OTHER FORMS OF CANCER SCREENING?

NO An MCED test is meant to be added to routine cancer screening, **NOT to replace it.**

HOW TO GET AN MCED TEST:

1. Order the test:

Your **provider^a** can order it for you **OR** You can order it **online** through an independent telehealth clinician provided by the MCED test website

2. The test kit will be sent to your provider or directly to you

3. Have your blood drawn at a time and place convenient for you



HOW DO I GET THE MCED TEST RESULTS, AND WHAT HAPPENS NEXT?

Your provider^a will receive your results about 2 weeks after your blood draw and contact you. **There are 2 possible results:**



CANCER NOT DETECTED: Continue with all routine screening tests that your provider recommends.



CANCER DETECTED (including 1 or 2 potential locations where the cancer may originate): Your provider will follow up with appropriate diagnostic testing to confirm if cancer is present or not.



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 can occur.

^aProvider refers to your health care clinician (eg, doctor, nurse practitioner, physician assistant).

PATIENT RESOURCES

Overview of multi-cancer early detection

<https://www.preventcancer.org/multi-cancer-early-detection/>

Frequently asked questions about multi-cancer early detection

<https://www.preventcancer.org/multi-cancer-early-detection/frequently-asked-questions/>

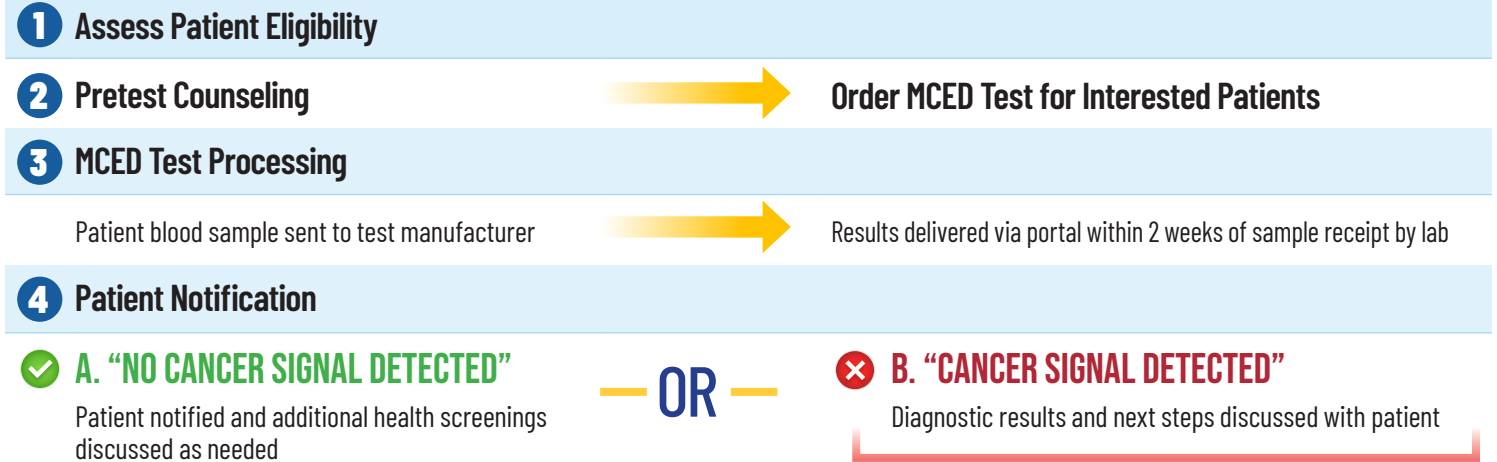
HOW TO GET TESTED

Talk with your health care provider and learn more at <https://www.galleri.com/>

CLINICIAN'S QUICK REFERENCE MCED TESTING GUIDE

73% of people are more likely to schedule their next recommended cancer screening after viewing information about benefits of early detection.

WORKFLOW FOR MCED TESTING



SUGGESTED CLINICAL CARE PATHWAYS FOLLOWING A "CANCER SIGNAL DETECTED" RESULT FOR COMMON CANCERS

CANCER SIGNAL ORIGIN PREDICTION	PROPOSED FIRST-LINE PROCEDURES
Multiple myeloma	Blood workup including peripheral blood smear, CBC with differential; chemistry tests, including creatinine clearance, protein electrophoresis of blood/urine
Upper GI (esophagus, stomach)	Endoscopy
Colorectal	Colonoscopy
Head and neck	Physical exam, fiber optic exam, ultrasound
Pancreas, gallbladder	CT abdomen with IV contrast, MRCP, GI referral
Ovary	Abdominal/Pelvic exam, ultrasound (preferred)
Lung	CT chest with or without IV contrast
Liver, bile duct	Ultrasound, CT, GI referral
Breast	Diagnostic mammography with ultrasound (MRI if mammography screening within last 3 months)
Lymphoid neoplasm	CT (neck, chest, abdomen, pelvis) with IV contrast, PET-CT
Indeterminate	CT (neck, chest, abdomen, pelvis) with IV contrast, PET-CT



Blood Work