We help you care for everybody
Guide your patients to manage their pregnancies using genetic insights
What is Prequel?
Prequel provides pregnant patients with early genetic insights into the baby’s development and the health of the pregnancy. This prenatal cfDNA screen can assess if a pregnancy is at an increased risk for a wide variety of chromosomal conditions like Down syndrome, trisomy 18, or trisomy 13.

Why Prequel?
Prequel with AMPLIFY technology selectively enriches fetal fraction (FF) by 2.3X on average for every patient, even patients with high BMI, increasing confidence in the results and reducing the chance of a sample failure. In this scenario, which prenatal screen would you choose to provide the best care possible for this patient?

Prequel Screening Options

<table>
<thead>
<tr>
<th>Standard panel</th>
<th>Opt-in</th>
<th>Opt-in</th>
<th>Opt-in</th>
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</thead>
<tbody>
<tr>
<td>Common Aneuploidies</td>
<td>Sex Chromosome Analysis</td>
<td>Microdeletions</td>
<td>Expanded Aneuploidy Analysis (EAA)</td>
</tr>
<tr>
<td>• Trisomy 21 (Down syndrome)</td>
<td>• Monosomy X (Turner syndrome)</td>
<td>• 22q11.2 deletion (DiGeorge syndrome)</td>
<td>Expands aneuploidy analysis to include all 22 autosomes. Associated conditions include:</td>
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<tr>
<td>• Trisomy 18 (Edwards syndrome)</td>
<td>• Klinefelter syndrome (XXY)</td>
<td>• 1p36.1 deletion syndrome</td>
<td>• Placental insufficiency (e.g. growth restriction, stillbirth)</td>
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<tr>
<td>• Trisomy 13 (Patau syndrome)</td>
<td>• Trisomy X (XXX)</td>
<td>• 15q11 deletions (Angelman or Prader-Will syndrome)</td>
<td>• Uniparental disomy syndromes (e.g. Prader-Will, Beckwith-Wiedemann)</td>
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<td></td>
<td>• XYY syndrome</td>
<td>• 4p deletion (Wolf-Hirschhorn syndrome)</td>
<td>• Fetal syndromes (e.g. trisomy 8, trisomy 22)</td>
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<td>• Male (XY)</td>
<td>• 5p deletion (Crd-du-Chat syndrome)</td>
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<td>• Female (XX)</td>
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</tbody>
</table>
Timely, reliable answers for everybody means better care

50% of female patients present with high BMI²

Patients with high BMI may have lower fetal fraction in prenatal cfDNA screening³

Up to 24.3% of cfDNA non-invasive prenatal screen failures are due to reduced fetal fraction⁴

Sample failures may mean:⁵,⁶
- Increased patient anxiety
- Decreased time to prepare in case of high-risk results
- Increased turn-around time
- Increased invasive diagnostic procedures

Prequel® Prenatal Screen with AMPLIFY™ Technology
Enables results for **99.9% of all patients** regardless of BMI¹

Screen ALL patients at 10 weeks, even those with high BMI³,⁷
Lower failure rate gives everybody more time to prepare

<table>
<thead>
<tr>
<th>Patient case study*</th>
<th>Other labs‡</th>
<th>Prequel® Prenatal Screen</th>
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<tbody>
<tr>
<td></td>
<td></td>
<td>• Prequel with AMPLIFY™ offered at 10 weeks</td>
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<tr>
<td></td>
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<td>• Patient receives results (FF = 11.3%) 7-10 days later</td>
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<td>• Result indicates high risk for trisomy 18</td>
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</tbody>
</table>

**Patient details:**
- Age: 33
- BMI: 40+
- First pregnancy

**Prequel® Prenatal Screen**
- Non-invasive prenatal screen offered at 13 weeks to reduce chance of test failure
- Sample fails with FF of 2.3%
- Patient undergoes redraw
- Sample fails again with FF of 2.4%
- After multiple office calls, patient undergoes diagnostic procedure
- Trisomy 18 diagnosis at 16 weeks gestation

**A support team of board-certified genetic counselors behind every test**

We’re here for you every step of the way, using our team’s decades of genetic expertise to help both you and your patients get the most out of every test.

**Making genetic insights affordable for everybody**

Myriad Genetics will contact you directly with a cost estimate via email and/or text.

Estimates take into account a patient’s insurance plan, how much they have paid toward their deductible, any copays or coinsurance, and their financial situation.

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*Case studies are illustrative.

‡Since BMI is also closely correlated with certain ancestries, delaying screening according to a patient’s BMI to ensure a higher fetal fraction means some patients have less time to consider pregnancy management options in the case of a high-risk result. This results in inequitable care.