

Samuel H. Pepkowitz, MD, Medical Director
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Patient Name	DOB	Patient ID/Medical Record #	Gender	Monogram Accession #
Date Collected	Date Received	Date Reported	Mode	Report Status
Referring Physician			Reference Lab ID/Order #	
Comments			HIV-1 Subtype: B	

Drug		GenoSure PRIme SM		Assessment*	Comments	
Generic Name	Brand Name	Drug Resistance Associated Mutations Detected	Drug			
NRTI	Abacavir	Ziagen	M184V	ABC	Sensitive	
	Didanosine	Videx	M184V	ddI	Resistance Possible	
	Emtricitabine	Emtriva	M184V	FTC	Resistant	
	Lamivudine	Epivir	M184V	3TC	Resistant	
	Stavudine	Zerit	None	d4T	Sensitive	1
	Tenofovir	Viread	None	TFV	Sensitive	1
	Zidovudine	Retrovir	None	ZDV	Sensitive	1
NNRTI	Efavirenz	Sustiva	K103N, Y188L	EFV	Resistant	
	Etravirine	Intelence	V179T, Y188L	ETR	Resistance Possible	
	Nevirapine	Viramune	K103N, Y188L	NVP	Resistant	
	Rilpivirine	Eduvant	K103N, Y188L	RPV	Resistant	
INI	Dolutegravir	Tivicay	None	DTG	Sensitive	
	Elvitegravir	Vitekta	None	EVG	Sensitive	
	Raltegravir	Isetress	None	RAL	Sensitive	
PI	Atazanavir	Reyataz	E35D	ATV	Sensitive	
		Reyataz / r†	E35D	ATV/r	Sensitive	
	Darunavir	Prezista / r†	None	DRV/r	Sensitive	
	Fosamprenavir	Lexiva / r†	E35D	AMP/r	Sensitive	
	Indinavir	Crixivan / r†	None	IDV/r	Sensitive	
	Lopinavir	Kaletra*	None	LPV/r	Sensitive	
	Nelfinavir	Viracept	E35D	NFV	Sensitive	
	Ritonavir	Norvir	E35D	RTV	Sensitive	
	Saquinavir	Invirase / r†	E35D	SQV/r	Sensitive	
Tipranavir	Aptivus / r†	E35D	TPV/r	Sensitive		

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* Assessment of drug susceptibility is based upon detected mutations and interpreted using an advanced proprietary algorithm (version 16).
 † Interpretation algorithms for ritonavir-boosted protease inhibitors appropriate for the following dosages: AMP/r 600mg/100mg BID; ATV/r 300mg/100mg QD; IDV/r 800mg/200mg BID; LPV/r 400mg/100mg BID; SQV/r 1000mg/100mg BID; TPV/r 500mg/200mg BID; and DRV/r 600mg/100mg BID.
 * **Mixtures** are indicated by amino acids separated by a slash. Deletions in the amino acid sequence are indicated by a ^ symbol.

Summary of Mutations Observed

RT Q102K, K103N, K122E, C162S, D177E, I178M, V179T, M184V, Y188L, T200A, I202V, R211K, V245A, A272P, R277K, T286A, E297R, G333D, P345Q, R356K, K358R, T386I, K390R, A400T
IN E11D, E13D, A21T, V31I, Q53K, V72I, V88I, L101I, V113I, K211Q, T218I, V234I, D256E
PR I15V, E35D, N37D, Q61H, L63A, H69Q, V77I

Genotype Comments (clinical significance may vary)

1 Assessment for this drug was derived considering the sensitizing effect of mutation M184V.

Assay Performance Characteristics

- Assay is highly reproducible and sufficiently sensitive to allow testing of patient samples with viral loads as low as **500 copies/mL**.
- Detects **mixtures** of wild-type and drug-resistant viruses when present at levels as low as **10% of the total population**.
- Uses Monogram’s HIV genotyping algorithm, which is based on a large database of **over 100,000 matched HIV genotype-phenotype results** and is reviewed and updated on a regular basis.
- **Includes HIV-1 subtype** which provides information that can be important for long-term drug treatment strategy and genotype interpretation.

For more information on interpreting this report, please visit www.MonogramBio.com or call Customer Service at 800-777-0177 between the hours of 6:30am to 5:00pm PT Monday through Friday.

This assay is performed using a next-generation sequencing platform that analyzes the protease (amino acids 1-99), reverse transcriptase (amino acids 1-400) and integrase (amino acids 1-288) coding regions in HIV-1. Variants are reported at a sensitivity that has been demonstrated to be equivalent to that of Sanger/population sequencing. Subtype is determined using the protease and reverse transcriptase sequence information. This assay meets the standards for performance characteristics and all other quality control and assurance requirements established by the Clinical Laboratory Improvement Amendments. This test is validated for testing specimens with HIV-1 viral loads equal to or above 500 copies/mL and should be interpreted only on such specimens. The results should not be used as the sole criteria for patient management. The results have been disclosed to you from confidential records protected by law and are not to be disclosed to unauthorized persons. Further disclosure of these results is prohibited without specific consent of the persons to whom it pertains, or as permitted by law.