作成日:2024年8月19日 作成者:がんゲノム医療部 承認日:2024年9月18日

Cancer Genomic Profiling (CGP) Tests Information

Please read the following information thoroughly before undergoing cancer genomic profiling.

1. Types of Tests

We offer the following cancer gene panel tests at this hospital:

(A) Tissue-based testing

CGP Tests Covered by Health Insurance	OncoGuide TM NCC Onco Panel System	FoundationOne® CDx Cancer Genome Profile	GenMineTOP Cancer Genome Profiling System
Specimen Type	Tissue + Blood	Tissue	Tissue + Blood
No. of Genes Investigated	124 (DNA)	324 (DNA)	737 (DNA) + 455 (RNA)
Cost	Please refer to Section 3, "Payment for CGP Tests."		
Eligibility	 Patients with solid tumors that have no standard treatment options. Patients with solid tumors diagnosed as locally advanced or metastatic, who have completed or are expected to complete standard treatment. Patients whose overall physical condition, organ function, and other factors suggest a high likelihood of eligibility for chemotherapy following this test, as determined by their attending physician in accordance with relevant chemotherapy guidelines. 		

(B) Liquid-based testing:

(C) Analysis of cancer-derived genes circulating in the bloodstream

CGP Tests Covered by Health Insurance	FoundationOne® Liquid CDx Cancer Genome Profile	Guardant360® Cancer Gene Panel	
Specimen Type	Blood		
No. of Genes Investigated	324 (DNA)	74 (DNA)	
Cost	Please refer to Section 3, "Payment for CGP Tests."		
Eligibility	 Patients with solid tumors that have no standard treatment options. Patients with solid tumors diagnosed as locally advanced or metastatic, who have completed or are expected to complete standard treatment. Patients whose overall physical condition, organ function, and other factors suggest a high likelihood of eligibility for chemotherapy following this test, as determined by their attending physician in accordance with relevant chemotherapy guidelines. For the liquid-based testing, in addition to the above, patients must meet one of the following criteria: Patients who do not have a solid tumor specimen or for whom it is difficult to obtain one. Patients who did not receive clear results from CGP tests performed on tumor cell specimens collected from solid tumors. Patients whose attending physician has determined that liquid-based testing is appropriate. 		

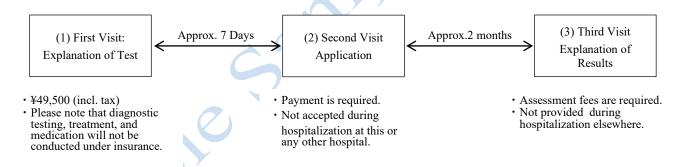
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CGP Tests Not Covered by Health Insurance	Guardant - 360LDT (G360)	
Specimen Type	Blood	
No. of Genes Investigated	739 (DNA)	
Cost	Please refer to section 3, "Payment for CGP Tests."	
Eligibility	 Patients who want to undergo CGP testing but are not covered by health insurance. Treatment based on G360 results will not be covered by health insurance. 	

There are specific application requirements for the test. Therefore, we will recommend the most appropriate test based on your condition at the time of your visit. Please note that in some cases, we may be unable to accommodate requests for specific CGP tests, which require an appointment.

2. Procedures at the CGP Tests Clinic

- The first visit for CGP tests (as a second opinion) costs \(\frac{\pmathbf{4}}{4}\),500 (incl. tax). A separate inspection fee applies for the CGP tests.
- Patients are required to come to the hospital in person for the tests.
- Patients are required to visit the CGP Tests Clinic three times: (1) for an explanation of the test, (2) to submit your application, and (3) to receive an explanation of the results.
- Patients should be accompanied by someone, especially for the first visit, as important information about the test will be explained.



At your first visit, we will ask you about your family structure.

Please bring information on your family members, from grandparents to grandchildren, including details about their medical conditions and the year of onset.

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3. Payment for CGP Tests

Payment can also be made by credit card.

(1) CGP Tests Covered by Health Insurance

To have the cost covered by health insurance, the patient must receive an explanation of the test results in person at our hospital's outpatient department (explanations of test results cannot be provided while confined at another hospital).

The cost of treatment following the tests, including medication, is not covered by the test fee.

Types of Test	 OncoGuideTM NCC Onco Panel System FoundationOne® CDx Cancer Genome Profile GenMineTOP Cancer Genome Profiling System FoundationOne® Liquid CDx Cancer Genome Profile Guardant360® Cancer Gene Panel 	
Cancer Genome Profiling Test	Payment is required at the time of application. The cost varies depending on the patient's share of medical expenses under insurance. For patient's paying 30%, the cost, including tax, will be approximately \(\frac{1}{2}\)150,000. * High-Cost Medical Expense Benefit or Eligibility Certificate for Ceiling-Amount Application will be applied	
Cancer Genome Profiling Assessment	Payment is required when the test results are explained. The cost varies depending on the patient's share of medical expenses under insurance. For patient's paying 30%, the cost, including tax, will be approximately \(\frac{\pmathbf{40,000}}{40,000}\). * High-Cost Medical Expense Benefit or Eligibility Certificate for Ceiling-Amount Application will be applied	
If Test is Canceled	Please note that if the sample is unsuitable for genetic analysis (e.g., due to poor sample quality) and the test is canceled, we cannot refund the cost of CGP tests. Thank you for your understanding. In the event of a tissue test cancelation: If another tissue specimen is available, it can be used for examination without incurring additional costs. The test may be converted to a blood test, which will incur inspection fees.	

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(2) CGP Tests Not Covered by Health Insurance

If you wish to take this test on the day of your first visit, please be prepared to pay the following fees.

Test	Cost	
Cyandont260	¥591,910	
Guardant360	(Incl. tax)	

The cost of treatment following the tests, such as medication, is not included in the test fee.

4. Specimens Used in the Test (for Gene Panel Tests using Tissue Samples Only)

If you are considering applying for the test, please prepare the specimen in advance and submit it to our hospital. The attached Pathological Tissue Sample Request Form for Cancer Gene Panel Testing, which includes details about the required specimen and shipping destination, has to be provided to your doctor.

Inquiries

Dept. of Community Network Office, Kyoto University Hospital

Tel: 075-751-3110 (Weekdays. 9:00 AM-5:00 PM)