

PATIENT INFORMATION

Name: Smith, John
DOB: October 9, 1957
Age: 59
Sex: Male
Address: 126 Corporate Blvd.
South Plainfield, NJ 07080

SAMPLE

Date Collected: October 25, 2016
Date Received: October 25, 2016
Case ID: PGXPL16-000196
Source: Buccal Swabs

REFERRING PHYSICIAN

Name: Jane Doe, MD
Institution: Local Hospital
Phone: 123-456-7890

Comprehensive Drug Information for Smith, John

ICD-10: C34.90 Malignant neoplasm of unsp part of unsp bronchus or lung; F33.9 Major depressive disorder, recurrent, unspecified; G89.3 Neoplasm related pain (acute) (chronic)



| ✖ CONSIDER ALTERNATIVE | | ⬆ DOSE RECOMMENDATION | | |
|--|------------------------------|---|----------------------|--|
| Drug Impacted | Recommendation | Drug Impacted | Recommendation | |
| Codeine (Codeine®) | CONSIDER ALTERNATIVES | Tramadol hydrochloride/Acetaminophen (Ultracet®) | INCREASE DOSE | |
| Oxycodone (Oxycontin®) | | Tramadol (Ultram®) | | |
| Folic Acid | | Buprenorphine (Subutex®) | DECREASE DOSE | |
| Risperidone (Risperdal®) | | Fentanyl (Duragesic®) | | |
| Thioridazine (Mellaril®) | | Hydrocodone/Acetaminophen (Vicodin®) | | |
| Tramadol hydrochloride/Acetaminophen (Ultracet®) | | Sufentanil (Sufenta®) | | |
| Tramadol (Ultram®) | | | | |

| ✔ NORMAL RESPONSE EXPECTED | | ⚠ PROCEED WITH CAUTION | |
|--|---------------------------------|--|--------------------|
| Drug Impacted | Recommendation | Drug Impacted | Recommendation |
| Alfentanil (Alfenta®) | NORMAL RESPONSE EXPECTED | Buprenorphine (Subutex®) | USE CAUTION |
| Morphine (MS Contin®) | | Fentanyl (Duragesic®) | |
| Aripiprazole (Abilify®) | | Hydrocodone/Acetaminophen (Vicodin®) | |
| Aripiprazole (Abilify®) | | Sufentanil (Sufenta®) | |
| Iloperidone (Fanapt®) | | Carboplatin (Paraplatin®) | |
| Pimozide (Orap®) | | Cisplatin (Platinol®) | |

Only selected drugs are listed here due to limited space.
Please refer to Patient Specific Genotype Results table for comprehensive illustration of drugs in each action category.



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*Clinical interpretation for patient's current medications provided by physician.
Including pharmacogenomics and drug interactions (drug-drug, drug-food, drug alcohol, drug-lab)*
- III. Comprehensive Oncology Supportive Care Drugs
- IV. Chemotherapeutics
PGxOnco™ can help identify patients who are at high risk of increased chemotherapeutic-induced toxicity. Testing is meant to help treating physicians choose between similar chemotherapy regimens and optimizing dosage. However, it is not recommended to deviate from established treatment guidelines during therapeutic selection.
- V. Additional Drugs with Pharmacogenomics Information

Level of Evidence Legend














- | |
|--|
| <ul style="list-style-type: none">● FDA Actionable PGx – Package insertⓈ PharmGKB, CPIC, EMA, DPWG, PMDA, HCSC○ Medical Literature |
|--|













I. ICD-10 Diagnosis Code Driven Results for Smith, John



ICD-10: C34.90 Malignant neoplasm of unsp part of unsp bronchus or lung;F33.9 Major depressive disorder, recurrent, unspecified;G89.3 Neoplasm related pain (acute) (chronic)

| Action | Drug Impacted | Evidence Level | Clinical Interpretation | Gene/Genotype | Phenotype |
|--------|---|--------------------------------------|--|--|--|
| ✘ | Antipsychotics: Risperidone (Risperdal®) | ● | CONSIDER ALTERNATIVES (e.g., quetiapine, olanzapine, clozapine) | CYP2D6 *4/*10 | Intermediate Metabolizer |
| | | | | | |
| ✘ | Antipsychotics: Thioridazine (Mellaril®) | ● | CONSIDER ALTERNATIVES | CYP2D6 *4/*10 | Intermediate Metabolizer |
| | | | | | |
| ✘ | Opioids: Codeine (Codeine®) | ● | CONSIDER ALTERNATIVES | CYP2D6 *4/*10 | Intermediate Metabolizer |
| | | Oxycodone (Oxycontin®) | | | |
| ✘ | Serotonin and Norepinephrine Reuptake Inhibitors (SNRIs): Venlafaxine (Effexor®) | ● | CONSIDER ALTERNATIVES (e.g., citalopram, sertraline) | CYP2D6 *4/*10 | Intermediate Metabolizer |
| | | | | | |
| ✘ | Vitamins: Folic Acid | ● | CONSIDER ALTERNATIVES (e.g., supplements containing methylfolate) due to significantly reduced folic acid conversion | MTHFR C677T/C677T/A1298C | A1298C Heterozygous Mutation/C677T Homozygous Mutation |
| | | | | | |
| ✘ | Opioids: Tramadol Hydrochloride /Acetaminophen (Ultracet®) | ● | CONSIDER ALTERNATIVES (not oxycodone, codeine) OR INCREASE DOSE | CYP2D6 *4/*10 | Intermediate Metabolizer |
| | | Tramadol (Ultram®) | | | |
| ▽ | Opioids: Methadone (Methadose®) | ● | DECREASE DOSE | CYP2B6 G516T/G516T/A785G/A785G | G516T Homozygous/A785G Homozygous/Non T983C Homozygous |
| ▽ | Tetracyclic Antidepressants: Maprotiline | ● | DECREASE DOSE | CYP2D6 *4/*10 | Intermediate Metabolizer |
| ▽ | Tricyclic Antidepressants: Amitriptyline (Elavil®) Clomipramine (Anafranil®) Desipramine (Norpramin®) Doxepin (Silenor®) Imipramine (Tofranil®) Nortriptyline (Pamelor®) Protriptyline (Vivactil®) Trimipramine (Surmontil®) | ● ● ● ● ● ● ● ● | DECREASE DOSE by 25% | CYP2D6 *4/*10 | Intermediate Metabolizer |

| Action | Drug Impacted | Evidence Level | Clinical Interpretation | Gene/Genotype | Phenotype |
|--|---|--|--|------------------------------------|--|
|  | Opioids: | | | | |
| | Buprenorphine (Subutex®) | <input type="radio"/> | DECREASE DOSE | CYP3A4 *1A/*1B | Intermediate Metabolizer |
| | Fentanyl (Duragesic®) | <input type="radio"/> | | | |
|  | Hydrocodone /Acetaminophen (Vicodin®) Sufentanil (Sufenta®) | <input type="radio"/> <input type="radio"/> | USE CAUTION due to the risk of increased exposure to the drug leading to adverse events | | |
|  | Alkylating Agents: | | | | |
| | Cyclophosphamide (Cytoxan®) | <input checked="" type="radio"/> | USE CAUTION due to poorer response and increased risk of toxicity | MTHFR C677T/C677T/A1298C | A1298C Heterozygous Mutation/C677T Homozygous Mutation |
|  | Alkylating Agents: | | | | |
| | Cyclophosphamide (Cytoxan®) | <input checked="" type="radio"/> | USE CAUTION due to worse outcome including overall survival and progression-free survival | NQO1 c.559C>T/c.559C>T | rs1800566 AA genotype |
|  | Anthracyclines: | | | | |
| | Doxorubicin (Doxil®) | <input checked="" type="radio"/> | USE CAUTION due to worse outcome including overall survival and progression-free survival | NQO1 c.559C>T/c.559C>T | rs1800566 AA genotype |
|  | Anthracyclines: | | | | |
| | Epirubicin (Ellence®) | <input checked="" type="radio"/> | USE CAUTION due to worse outcome including overall survival and progression-free survival | NQO1 c.559C>T/c.559C>T | rs1800566 AA genotype |
|  | Antimetabolites (Pyrimidine Analog): | | | | |
| | Fluorouracil (Carac®) | <input checked="" type="radio"/> | USE CAUTION due to poorer response and increased risk of toxicity | MTHFR C677T/C677T/A1298C | A1298C Heterozygous Mutation/C677T Homozygous Mutation |
|  | Antimetabolites (Pyrimidine Analog): | | | | |
| | Fluorouracil (Carac®) | <input checked="" type="radio"/> | USE CAUTION due to worse outcome including overall survival and progression-free survival | NQO1 c.559C>T/c.559C>T | rs1800566 AA genotype |
|  | Antipsychotics: | | | | |
| | Clozapine (Clozaril®) Olanzapine (Zyprexa®) | <input checked="" type="radio"/> <input checked="" type="radio"/> | USE CAUTION due to increased risk of side effects including hyperprolactinemia and weight gain | ANKK1 WT/A1 | A1 Heterozygous |
|  | Chemotherapy Modulating Agents: | | | | |
| | Leucovorin (Wellcovorin®) | <input checked="" type="radio"/> | USE CAUTION due to poorer response and increased risk of toxicity | MTHFR C677T/C677T/A1298C | A1298C Heterozygous Mutation/C677T Homozygous Mutation |
|  | Folate Antimetabolites: | | | | |
| | Methotrexate (Trexall®) | <input checked="" type="radio"/> | USE CAUTION due to poorer response and increased risk of toxicity | MTHFR C677T/C677T/A1298C | A1298C Heterozygous Mutation/C677T Homozygous Mutation |
|  | Folate Antimetabolites: | | | | |
| | Pemetrexed (Alimta®) | <input checked="" type="radio"/> | USE CAUTION due to poorer response and increased risk of toxicity | MTHFR C677T/C677T/A1298C | A1298C Heterozygous Mutation/C677T Homozygous Mutation |
|  | Platinum Analog: | | | | |
| | Carboplatin (Paraplatin®) Cisplatin (Platinol®) Oxaliplatin (Eloxatin®) | <input checked="" type="radio"/> <input checked="" type="radio"/> <input checked="" type="radio"/> | USE CAUTION due to decreased survival and response | XRCC1 WT/WT | rs25487 T Allele Carrier |






| Action | Drug Impacted | Evidence Level | Clinical Interpretation | Gene/Genotype | Phenotype |
|--|---|----------------|---|---|--|
|  | Platinum Analog: | | | | |
| | Carboplatin (Paraplatin®) Oxaliplatin (Eloxatin®) | ● ● | USE CAUTION due to poorer response and increased risk of toxicity | MTHFR C677T/C677T/A1298C | A1298C Heterozygous Mutation/C677T Homozygous Mutation |
|  | Platinum Analog: | | | | |
| | Cisplatin (Platinol®) Oxaliplatin (Eloxatin®) | ● ● | USE CAUTION due to worse outcome including overall survival and progression-free survival | NQO1 c.559C>T/c.559C>T | rs1800566 AA genotype |
|  | Selective Serotonin Reuptake Inhibitors (SSRIs): | | | | |
| | Citalopram (Celexa®) | ● | USE CAUTION due to less improvement in symptoms | HTR2A c.614-2211T>C/c.614-2211T>C | rs7997012 GG genotype |
|  | Selective Serotonin Reuptake Inhibitors (SSRIs): | | | | |
| | Fluoxetine (Prozac®) | ● | USE CAUTION due to elevated risk for drug overdose resulting in adverse events and drug interaction | CYP2D6 *4/*10 | Intermediate Metabolizer |
|  | Selective Serotonin Reuptake Inhibitors (SSRIs): | | | | |
| | Sertraline (Zoloft®) | ● | USE CAUTION with high alert to adverse drug events | CYP2C19 *1/*2 | Intermediate Metabolizer |
|  | Antiemetics (Selective 5-HT3 Receptor Antagonist): | | | | |
| | Ondansetron (Zofran®) | ● | NORMAL RESPONSE EXPECTED | ABCB1 WT/WT | rs2032582 AA genotype/rs1045642 AA genotype |
|  | Antipsychotics: | | | | |
| | Aripiprazole (Abilify®) | ● | NORMAL RESPONSE EXPECTED | CYP3A4 *1A/*1B | Intermediate Metabolizer |
|  | Antipsychotics: | | | | |
| | Aripiprazole (Abilify®) | ● | NORMAL RESPONSE EXPECTED | CYP2D6 *4/*10 | Intermediate Metabolizer |
| | Iloperidone (Fanapt®) | ● | | | |
| | Pimozide (Orap®) | ● | | | |
| | | | | | |
|  | Antipsychotics: | | | | |
| | Haloperidol (Haldol®) | ● | NORMAL RESPONSE EXPECTED | CYP2D6 *4/*10 | Intermediate Metabolizer |
|  | Antipsychotics: | | | | |
| | Perphenazine | ● | NORMAL RESPONSE EXPECTED | CYP2D6 *4/*10 | Intermediate Metabolizer |
|  | Antipsychotics: | | | | |
| | Valproic Acid (Depakote®) | ● | NORMAL RESPONSE EXPECTED | ANKK1 WT/A1 | A1 Heterozygous |
|  | EGFR Tyrosine Kinase Inhibitors: | | | | |
| | Gefitinib (Iressa®) | ● | NORMAL RESPONSE EXPECTED | CYP3A4 *1A/*1B | Intermediate Metabolizer |

| Action | Drug Impacted | Evidence Level | Clinical Interpretation | Gene/Genotype | Phenotype |
|--------|--|----------------|---------------------------------|-------------------------------|---|
| ✓ | Opioids: | | | | |
| | Alfentanil (Alfenta®) | ● | NORMAL RESPONSE EXPECTED | OPRM1 WT/WT | rs1799971 A Allele Carrier/rs510679 TT genotype |
| ✓ | Morphine (MS Contin®) | ● | | | |
| | Selective Serotonin Reuptake Inhibitors (SSRIs): | | | | |
| ✓ | Escitalopram (Lexapro®) | ● | NORMAL RESPONSE EXPECTED | CYP2C19 *1/*2 | Intermediate Metabolizer |
| ✓ | Selective Serotonin Reuptake Inhibitors (SSRIs): | | | | |
| | Escitalopram (Lexapro®) | ● | NORMAL RESPONSE EXPECTED | SLC6A4 S/LA | HTTLPR Long Form |
| ✓ | Selective Serotonin Reuptake Inhibitors (SSRIs): | | | | |
| | Fluvoxamine (Luvox®) | ● | NORMAL RESPONSE EXPECTED | CYP2D6 *4/*10 | Intermediate Metabolizer |
| ✓ | Selective Serotonin Reuptake Inhibitors (SSRIs): | | | | |
| | Fluvoxamine (Luvox®) | ● | NORMAL RESPONSE EXPECTED | HTR1A WT/c.-1019G>C | rs6295 non-CC genotype/rs1800044 C Allele Carrier |
| ✓ | Paroxetine (Paxil®) | ● | | | |
| | Selective Serotonin Reuptake Inhibitors (SSRIs): | | | | |
| ✓ | Paroxetine (Paxil®) | ● | NORMAL RESPONSE EXPECTED | CYP2D6 *4/*10 | Intermediate Metabolizer |
| ✓ | Selective Serotonin Reuptake Inhibitors (SSRIs): | | | | |
| | Vilazodone (Viibryd®) | ○ | NORMAL RESPONSE EXPECTED | CYP3A4 *1A/*1B | Intermediate Metabolizer |
| ✓ | Selective Serotonin Reuptake Inhibitors (SSRIs): | | | | |
| | Vortioxetine (Trintellix®) | ● | NORMAL RESPONSE EXPECTED | CYP2D6 *4/*10 | Intermediate Metabolizer |
| ✓ | Serotonin and Norepinephrine Reuptake Inhibitors (SNRIs): | | | | |
| | Duloxetine (Cymbalta®) | ○ | NORMAL RESPONSE EXPECTED | CYP1A2 *1A/*1A | Normal Metabolizer |
| ✓ | Serotonin and Norepinephrine Reuptake Inhibitors (SNRIs): | | | | |
| | Levomilnacipran (Fetzima®) | ○ | NORMAL RESPONSE EXPECTED | CYP3A4 *1A/*1B | Intermediate Metabolizer |
| ✓ | Serotonin and Norepinephrine Reuptake Inhibitors (SNRIs): | | | | |
| | Reboxetine (Edronax®) | ○ | NORMAL RESPONSE EXPECTED | CYP3A4 *1A/*1B | Intermediate Metabolizer |
| ✓ | Trazodone (Desyrel®) | ○ | | | |

Disclaimer: The ICD-10 codes page may be left blank because ICD codes were not provided or not applicable.


II. Current Medication Information for Smith, John



| Action | Drug Impacted | Evidence Level | Clinical Interpretation | Gene/Genotype | Phenotype |
|--|---|----------------|---|------------------------------------|--|
|  | Opioids: | | | | |
| | Oxycodone | ● | CONSIDER ALTERNATIVES | CYP2D6 *4/*10 | Intermediate Metabolizer |
|  | Folate Antimetabolites: | | | | |
| | Pemetrexed | ● | USE CAUTION due to poorer response and increased risk of toxicity | MTHFR C677T/C677T/A1298C | A1298C Heterozygous Mutation/C677T Homozygous Mutation |
|  | Platinum Analog: | | | | |
| | Carboplatin | ● | USE CAUTION due to decreased survival and response | XRCC1 WT/WT | rs25487 T Allele Carrier |
|  | Platinum Analog: | | | | |
| | Carboplatin | ● | USE CAUTION due to poorer response and increased risk of toxicity | MTHFR C677T/C677T/A1298C | A1298C Heterozygous Mutation/C677T Homozygous Mutation |
|  | Antiemetics (Selective 5-HT3 Receptor Antagonist): | | | | |
| | Ondansetron | ● | NORMAL RESPONSE EXPECTED | ABCB1 WT/WT | rs2032582 AA genotype/rs1045642 AA genotype |


Drug-Drug Interactions for **Smith, John**



| Severity | Drugs | Warning | Documentation | Clinical Management |
|--|--|---|---------------|---|
|  | ONDANSETRON HYDROCHLORIDE -- OXYCODONE HYDROCHLORIDE | MAJOR Concurrent use of OXYCODONE and SEROTONERGIC AGENTS may result in increased risk of serotonin syndrome. | FAIR | Coadministration of oxycodone and another serotonergic agent may result in serotonin syndrome, because both drugs affect the serotonergic neurotransmitter system. If concomitant use of oxycodone and such an agent is clinically required, monitor patients carefully, especially during treatment initiation and dosage adjustment. Discontinue oxycodone if serotonin syndrome is suspected (Prod Info TROXYCA® ER oral extended-release capsules, 2016). |



Drug-Alcohol Interactions for **Smith, John**



| Severity | Drugs | Warning | Documentation | Clinical Management |
|--|---|---|---------------|---|
|  | OXYCODONE HYDROCHLORIDE -- ETHANOL | MAJOR Concurrent use of OXYCODONE and ETHANOL may result in an increase in CNS or respiratory depression. | FAIR | Counsel patients on the potential for increased risk of CNS depression, including respiratory depression, hypotension, profound sedation, and coma, when alcohol is ingested with oxycodone. Patients should be instructed to avoid alcohol consumption while taking oxycodone (Prod Info OXYCONTIN® oral tablets, 2007). |

Drug-Lab Interactions for **Smith, John**



| Severity | Drugs | Warning | Documentation | Clinical Management |
|--|---|--|---------------|--|
|  | OXYCODONE HYDROCHLORIDE -- COCAINE MEASUREMENT | MODERATE OXYCODONE may result in interference with cocaine urine assay results due to cross-reactivity. | FAIR | Oxycodone may cross-react with some preliminary assays that are used to detect cocaine in the urine. Positive test results should be confirmed with a more specific chemical method, such as gas chromatography/mass spectrometry (GC/MS) which is the preferred confirmatory method (Prod Info PERCODAN® oral tablets, 2004). |
|  | OXYCODONE HYDROCHLORIDE -- TETRAHYDROCA NNABINOL MEASUREMENT | MODERATE OXYCODONE may result in interference with tetrahydrocannabinol urine assay results due to cross-reactivity. | FAIR | Oxycodone may cross-react with some preliminary assays that are used to detect tetrahydrocannabinol (cannabinoids) in the urine. Positive test results should be confirmed with a more specific chemical method, such as gas chromatography/mass spectrometry (GC/MS) which is the preferred confirmatory method (Prod Info PERCODAN® oral tablets, 2004). |

Disclaimer: The Current Medication section may be left blank if no medication list provided. The Drug Interactions section may be left blank if no drug interactions were found for drugs on the current medication list or no medication list was provided.

III. Comprehensive Oncology Supportive Care Drugs for Smith, John



| Therapeutic | Drug Impacted | Evidence Level | Clinical Interpretation | Gene/Genotype | Phenotype | | |
|------------------|---|---|---|---|---|--|---|
| Anesthesiology | General Anesthetics: | | | | | | |
| | Ketamine (Ketalar®) Propofol (Diprivan®) | ● | ▼ DECREASE DOSE | CYP2B6 G516T/G516T/A785G/A785G | G516T Homozygous/A785G Homozygous/Non T983C Homozygous | | |
| Anesthesiology | Local Anesthetics: | | | | | | |
| | Lidocaine (Lidoderm®) Ropivacaine (Naropin®) | ○ | ✓ NORMAL RESPONSE EXPECTED | CYP1A2 *1A/*1A | Normal Metabolizer | | |
| Anesthesiology | Sedatives: | | | | | | |
| | Dexmedetomidine (Precedex®) | ● | ✓ NORMAL DOSE may have an increased sedative response | ADRA2A c.-1252G>C/c.-1252G>C | rs1800544 CC genotype/rs1800545 GG genotype | | |
| Cardiology | Anticoagulants: | | | | | | |
| | Warfarin (Coumadin®) | ● | ▼ DECREASE DOSE Warfarin daily dose 3-4mg | CYP2C9 *1/*2 | Intermediate Metabolizer | | |
| Cardiology | Anticoagulants: | | | | | | |
| | Warfarin (Coumadin®) | ● | ▼ DECREASE DOSE Warfarin daily dose 3-4mg | VKORC1 WT/-1639G>A | rs9923231 A Allele Carrier | | |
| Cardiology | Anticoagulants: | | | | | | |
| | Phenprocoumon (Marcoumar®) | ● | ✓ NORMAL RESPONSE EXPECTED | CYP4F2 *1/*1 | Normal Metabolizer | | |
| Cardiology | Anticoagulants: | | | | | | |
| | Rivaroxaban (Xarelto®) | ○ | ✓ NORMAL RESPONSE EXPECTED | CYP3A4 *1A/*1B | Intermediate Metabolizer | | |
| Gastroenterology | Proton Pump Inhibitors (PPIs): | | | | | | |
| | Dexlansoprazole (Dexilant®) Esomeprazole (Nexium®) Lansoprazole (Prevacid®) Omeprazole (Prilosec®) Pantoprazole (Protonix®) Rabeprazole (Aciphex®) | ● | ⚠ USE CAUTION due to higher drug plasma levels | CYP2C19 *1/*2 | Intermediate Metabolizer | | |
| | Infectious Diseases | Antihepaciviral Drugs: | | | | | |
| | | Boceprevir (Victrelis®) Peginterferon alfa-2b (PegIntron®) Ribavirin (Copegus®) Telaprevir (Incivo®) | ○ | ⚠ USE CAUTION due to increased risk of ribavirin-induced hemolytic anemia | ITPA WT/WT | Non-protective Wild Type | |
| | | Infectious Diseases | Antiretroviral Drugs: | | | | |
| | | | Efavirenz (Sustiva®) Nevirapine (Viramune®) | ● | ⚠ USE CAUTION due to higher potential for an increased frequency and severity of drug-associated adverse events | CYP2B6 G516T/G516T/A785G/A785G | G516T Homozygous/A785G Homozygous/Non T983C Homozygous |

| Therapeutic | Drug Impacted | Evidence Level | Clinical Interpretation | Gene/Genotype | Phenotype |
|---------------------|---|----------------|----------------------------|---|--|
| Infectious Diseases | Antifungal Drugs: | | | | |
| | Voriconazole (Vfend®) | ● | ✔ NORMAL RESPONSE EXPECTED | CYP2C19 *1/*2 | Intermediate Metabolizer |
| Infectious Diseases | Antimalarial Drugs: | | | | |
| | Chloroquine (Aralen®) Primaquine Phosphate (Primaquine®) | ● ● | ✔ NORMAL RESPONSE EXPECTED | G6PD WT/WT | Normal G6PD Efficiency |
| Infectious Diseases | Antiretroviral Drugs: | | | | |
| | Abacavir (Ziagen®) | ● | ✔ NORMAL RESPONSE EXPECTED | HLA-B WT/WT | Wild Type |
| Infectious Diseases | Antiretroviral Drugs: | | | | |
| | Atazanavir (Reyataz®) | ● | ✔ NORMAL RESPONSE EXPECTED | UGT1A1 *1/*1 | Non *28 Allele Carrier |
| Infectious Diseases | Antitubercular Agents: | | | | |
| | Isoniazid | ● | ✔ NORMAL RESPONSE EXPECTED | NAT2 *5/*6/*12/*13 | Normal Metabolizer |
| | Pyrazinamide (Rifater®) | ● | | | |
| Rifampin (Rifadin®) | ● | | | | |
| Infectious Diseases | Miscellaneous Antibiotics: | | | | |
| | Dapsone Sulfamethoxazole /Trimethoprim (Bactrim®) | ● ● | ✔ NORMAL RESPONSE EXPECTED | G6PD WT/WT | Normal G6PD Efficiency |
| Infectious Diseases | Miscellaneous Antibiotics: | | | | |
| | Nalidixic Acid (Neggram®) Nitrofurantoin (Macrobid®) | ● ● | ✔ NORMAL RESPONSE EXPECTED | G6PD WT/WT | Normal G6PD Efficiency |
| Oncology | Antiemetics: | | | | |
| | Dexamethasone (Decadron®) | ● | ✔ NORMAL RESPONSE EXPECTED | ABCB1 WT/WT | rs2032582 AA genotype/rs1045642 AA genotype |
| Oncology | Antiemetics (Selective 5-HT3 Receptor Antagonist): | | | | |
| | Dolasetron (Anzemet®) Granisetron (Sancuso®) | ● ● | ✔ NORMAL RESPONSE EXPECTED | NOS1AP c.178-20044C>T/c.178-13122C>T | rs10494366 GG genotype/rs10800397 T Allele Carrier/rs10919035 T Allele Carrier |
| Oncology | Antiemetics (Selective 5-HT3 Receptor Antagonist): | | | | |
| | Ondansetron (Zofran®) | ● | ✔ NORMAL RESPONSE EXPECTED | ABCB1 WT/WT | rs2032582 AA genotype/rs1045642 AA genotype |
| Pain Management | Opioids: | | | | |
| | Codeine (Codeine®) Oxycodone (Oxycontin®) | ● ● | ✘ CONSIDER ALTERNATIVES | CYP2D6 *4/*10 | Intermediate Metabolizer |

| Therapeutic | Drug Impacted | Evidence Level | Clinical Interpretation | Gene/Genotype | Phenotype |
|-----------------------|--|---|--|-----------------------------------|---|
| Pain Management | Opioids: | | | | |
| | Tramadol Hydrochloride /Acetaminophen (Ultracet®) | ● | ❌ CONSIDER ALTERNATIVES (not oxycodone, codeine) OR | CYP2D6 *4/*10 | Intermediate Metabolizer |
| Tramadol (Ultram®) | ● | ▲ INCREASE DOSE | | | |
| Pain Management | Opioids: | | | | |
| | Methadone (Methadose®) | ● | ▼ DECREASE DOSE | CYP2B6 G516T/G516T/A785G/A785G | G516T Homozygous/A785G Homozygous/Non T983C Homozygous |
| Pain Management | Opioids: | | | | |
| | Buprenorphine (Subutex®) | ○ | ▼ DECREASE DOSE | CYP3A4 *1A/*1B | Intermediate Metabolizer |
| | Fentanyl (Duragesic®) | ○ | OR | | |
| | Hydrocodone /Acetaminophen (Vicodin®) | ○ | ⚠️ USE CAUTION | | |
| Sufentanil (Sufenta®) | ○ | due to the risk of increased exposure to the drug leading to adverse events | | | |
| Pain Management | Nonsteroidal Antiinflammatory Drugs (NSAIDs): | | | | |
| | Celecoxib (Celebrex®) | ● | ⚠️ USE CAUTION | CYP2C9 *1/*2 | Intermediate Metabolizer |
| | Diclofenac (Voltaren®) | ● | due to increased exposure to the drug | | |
| Meloxicam (Mobic®) | ● | | | | |
| Pain Management | Nonsteroidal Antiinflammatory Drugs (NSAIDs): | | | | |
| | Ibuprofen (Advil®) | ○ | ⚠️ USE CAUTION | CYP2C9 *1/*2 | Intermediate Metabolizer |
| Naproxen (Aleve®) | ○ | due to the risk of increased exposure to the drug leading to adverse events | | | |
| Pain Management | Alpha-2 Adrenergic Agonists: | | | | |
| | Tizanidine (Zanaflex®) | ○ | ✅ NORMAL RESPONSE EXPECTED | CYP1A2 *1A/*1A | Normal Metabolizer |
| Pain Management | Opioids: | | | | |
| | Alfentanil (Alfenta®) | ● | ✅ NORMAL RESPONSE EXPECTED | OPRM1 WT/WT | rs1799971 A Allele Carrier/rs510679 TT genotype |
| Morphine (MS Contin®) | ● | | | | |
| Pain Management | Skeletal Muscle Relaxants: | | | | |
| | Carisoprodol (Soma®) | ● | ✅ NORMAL RESPONSE EXPECTED | CYP2C19 *1/*2 | Intermediate Metabolizer |
| Pain Management | Skeletal Muscle Relaxants: | | | | |
| | Cyclobenzaprine (Flexeril®) | ○ | ✅ NORMAL RESPONSE EXPECTED | CYP1A2 *1A/*1A | Normal Metabolizer |

| Therapeutic | Drug Impacted | Evidence Level | Clinical Interpretation | Gene/Genotype | Phenotype |
|---------------------------|--|----------------|---|---|---|
| Psychiatry | Antipsychotics: | | | | |
| | Risperidone (Risperdal®) | ● | ✘ CONSIDER ALTERNATIVES (e.g., quetiapine, olanzapine, clozapine) | CYP2D6 *4/*10 | Intermediate Metabolizer |
| Psychiatry | Antipsychotics: | | | | |
| | Thioridazine (Mellaril®) | ● | ✘ CONSIDER ALTERNATIVES | CYP2D6 *4/*10 | Intermediate Metabolizer |
| Psychiatry | Serotonin and Norepinephrine Reuptake Inhibitors (SNRIs): | | | | |
| | Venlafaxine (Effexor®) | ● | ✘ CONSIDER ALTERNATIVES (e.g., citalopram, sertraline) | CYP2D6 *4/*10 | Intermediate Metabolizer |
| Psychiatry | Tetracyclic Antidepressants: | | | | |
| | Maprotiline | ◐ | ▼ DECREASE DOSE | CYP2D6 *4/*10 | Intermediate Metabolizer |
| Psychiatry | Tricyclic Antidepressants: | | | | |
| | Amitriptyline (Elavil®) | ● | ▼ DECREASE DOSE by 25% | CYP2D6 *4/*10 | Intermediate Metabolizer |
| | Clomipramine (Anafranil®) | ● | | | |
| | Desipramine (Norpramin®) | ● | | | |
| | Doxepin (Silenor®) | ● | | | |
| | Imipramine (Tofranil®) | ● | | | |
| | Nortriptyline (Pamelor®) | ● | | | |
| | Protriptyline (Vivactil®) | ● | | | |
| Trimipramine (Surmontil®) | ● | | | | |
| Psychiatry | Antimanic Agents: | | | | |
| | Lithium (Lithobid®) | ◐ | ⚠ USE CAUTION due to increased risk of suicidal ideation | ABCB1 WT/WT | rs2032582 AA genotype/rs1045642 AA genotype |
| Psychiatry | Antipsychotics: | | | | |
| | Clozapine (Clozaril®) | ◐ | ⚠ USE CAUTION due to increased risk of side effects including hyperprolactinemia and weight gain | ANKK1 WT/A1 | A1 Heterozygous |
| Olanzapine (Zyprexa®) | ◐ | | | | |
| Psychiatry | Dopamine/Norepinephrine-Reuptake Inhibitors: | | | | |
| | Bupropion (Wellbutrin®) | ◐ | ⚠ USE CAUTION due to reduced response and increased risk of side effects | CYP2C19 *1/*2 | Intermediate Metabolizer |
| Psychiatry | Selective Serotonin Reuptake Inhibitors (SSRIs): | | | | |
| | Citalopram (Celexa®) | ◐ | ⚠ USE CAUTION due to less improvement in symptoms | HTR2A c.614-2211T>C/c.614-2211T>C | rs7997012 GG genotype |
| Psychiatry | Selective Serotonin Reuptake Inhibitors (SSRIs): | | | | |
| | Fluoxetine (Prozac®) | ● | ⚠ USE CAUTION due to elevated risk for drug overdose resulting in adverse events and drug interaction | CYP2D6 *4/*10 | Intermediate Metabolizer |
| Psychiatry | Selective Serotonin Reuptake Inhibitors (SSRIs): | | | | |
| | Sertraline (Zoloft®) | ◐ | ⚠ USE CAUTION with high alert to adverse drug events | CYP2C19 *1/*2 | Intermediate Metabolizer |

| Therapeutic | Drug Impacted | Evidence Level | Clinical Interpretation | Gene/Genotype | Phenotype |
|-------------|---|----------------|--|-------------------|---|
| Psychiatry | Smoking Cessation Aids: | | | | |
| | Bupropion (Zyban®) | ● | ⚠ USE CAUTION due to reduced effectiveness | ANKK1 WT/A1 | A1 Heterozygous |
| Psychiatry | Aldehyde Dehydrogenase Inhibitors: | | | | |
| | Disulfiram (Antabuse®) | ● | ✔ NORMAL DOSE may have an increased likelihood of response | ANKK1 WT/A1 | A1 Heterozygous |
| Psychiatry | Antipsychotics: | | | | |
| | Aripiprazole (Abilify®) | ● | ✔ NORMAL RESPONSE EXPECTED | CYP3A4 *1A/*1B | Intermediate Metabolizer |
| Psychiatry | Antipsychotics: | | | | |
| | Aripiprazole (Abilify®) | ● | ✔ NORMAL RESPONSE EXPECTED | CYP2D6 *4/*10 | Intermediate Metabolizer |
| | Iloperidone (Fanapt®) | ● | | | |
| | Pimozide (Orap®) | ● | | | |
| | | | | | |
| Psychiatry | Antipsychotics: | | | | |
| | Haloperidol (Haldol®) | ● | ✔ NORMAL RESPONSE EXPECTED | CYP2D6 *4/*10 | Intermediate Metabolizer |
| Psychiatry | Antipsychotics: | | | | |
| | Perphenazine | ● | ✔ NORMAL RESPONSE EXPECTED | CYP2D6 *4/*10 | Intermediate Metabolizer |
| Psychiatry | Antipsychotics: | | | | |
| | Valproic Acid (Depakote®) | ● | ✔ NORMAL RESPONSE EXPECTED | ANKK1 WT/A1 | A1 Heterozygous |
| Psychiatry | Opioids Antagonists: | | | | |
| | Naloxone (Evzio®) | ● | ✔ NORMAL RESPONSE EXPECTED | OPRM1 WT/WT | rs1799971 A Allele Carrier/rs510679 TT genotype |
| | Naltrexone (Revia®) | ● | | | |
| | | | | | |
| Psychiatry | Selective Serotonin Reuptake Inhibitors (SSRIs): | | | | |
| | Escitalopram (Lexapro®) | ● | ✔ NORMAL RESPONSE EXPECTED | CYP2C19 *1/*2 | Intermediate Metabolizer |
| Psychiatry | Selective Serotonin Reuptake Inhibitors (SSRIs): | | | | |
| | Escitalopram (Lexapro®) | ● | ✔ NORMAL RESPONSE EXPECTED | SLC6A4 S/LA | H1TLPR Long Form |
| Psychiatry | Selective Serotonin Reuptake Inhibitors (SSRIs): | | | | |
| | Fluvoxamine (Luvox®) | ● | ✔ NORMAL RESPONSE EXPECTED | CYP2D6 *4/*10 | Intermediate Metabolizer |

| Therapeutic | Drug Impacted | Evidence Level | Clinical Interpretation | Gene/Genotype | Phenotype |
|---------------------|--|----------------|----------------------------|------------------------|---|
| Psychiatry | Selective Serotonin Reuptake Inhibitors (SSRIs): | | | | |
| | Fluvoxamine (Luvox®) | ● | ✔ NORMAL RESPONSE EXPECTED | HTR1A WT/c.-1019G>C | rs6295 non-CC genotype/rs1800044 C Allele Carrier |
| Paroxetine (Paxil®) | ● | | | | |
| Psychiatry | Selective Serotonin Reuptake Inhibitors (SSRIs): | | | | |
| | Paroxetine (Paxil®) | ● | ✔ NORMAL RESPONSE EXPECTED | CYP2D6 *4/*10 | Intermediate Metabolizer |
| Psychiatry | Selective Serotonin Reuptake Inhibitors (SSRIs): | | | | |
| | Vilazodone (Viibryd®) | ○ | ✔ NORMAL RESPONSE EXPECTED | CYP3A4 *1A/*1B | Intermediate Metabolizer |
| Psychiatry | Selective Serotonin Reuptake Inhibitors (SSRIs): | | | | |
| | Vortioxetine (Trintellix®) | ● | ✔ NORMAL RESPONSE EXPECTED | CYP2D6 *4/*10 | Intermediate Metabolizer |
| Psychiatry | Serotonin and Norepinephrine Reuptake Inhibitors (SNRIs): | | | | |
| | Duloxetine (Cymbalta®) | ○ | ✔ NORMAL RESPONSE EXPECTED | CYP1A2 *1A/*1A | Normal Metabolizer |
| Psychiatry | Serotonin and Norepinephrine Reuptake Inhibitors (SNRIs): | | | | |
| | Levomilnacipran (Fetzima®) | ○ | ✔ NORMAL RESPONSE EXPECTED | CYP3A4 *1A/*1B | Intermediate Metabolizer |
| Psychiatry | Serotonin and Norepinephrine Reuptake Inhibitors (SNRIs): | | | | |
| | Reboxetine (Edronax®) | ○ | ✔ NORMAL RESPONSE EXPECTED | CYP3A4 *1A/*1B | Intermediate Metabolizer |
| | Trazodone (Desyrel®) | ○ | | | |

IV. Chemotherapeutics for Smith, John



| Therapeutic | Drug Impacted | Evidence Level | Clinical Interpretation | Gene/Genotype | Phenotype |
|-------------|---|----------------|--|-----------------------------|--|
| Oncology | Selective Estrogen Receptor Modulators (SERM): | | | | |
| | Tamoxifen (Soltamox®) | ● | ✗ CONSIDER ALTERNATIVES like aromatase inhibitor for postmenopausal women due to increased risk for relapse of breast cancer | CYP2D6 *4/*10 | Intermediate Metabolizer |
| Oncology | Alkylating Agents: | | | | |
| | Cyclophosphamide (Cytoxan®) | ● | ⚠ USE CAUTION due to poorer response and increased risk of toxicity | MTHFR C677T/C677T/A1298C | A1298C Heterozygous Mutation/C677T Homozygous Mutation |
| Oncology | Alkylating Agents: | | | | |
| | Cyclophosphamide (Cytoxan®) | ● | ⚠ USE CAUTION due to worse outcome including overall survival and progression-free survival | NQO1 c.559C>T/c.559C>T | rs1800566 AA genotype |
| Oncology | Anthracyclines: | | | | |
| | Doxorubicin (Doxil®) | ● | ⚠ USE CAUTION due to worse outcome including overall survival and progression-free survival | NQO1 c.559C>T/c.559C>T | rs1800566 AA genotype |
| Oncology | Anthracyclines: | | | | |
| | Epirubicin (Ellence®) | ● | ⚠ USE CAUTION due to worse outcome including overall survival and progression-free survival | NQO1 c.559C>T/c.559C>T | rs1800566 AA genotype |
| Oncology | Antimetabolites (Pyrimidine Analog): | | | | |
| | Fluorouracil (Carac®) | ● | ⚠ USE CAUTION due to increased risk of diarrhea | ABCB1 WT/WT | rs2032582 AA genotype/rs1045642 AA genotype |
| Oncology | Antimetabolites (Pyrimidine Analog): | | | | |
| | Fluorouracil (Carac®) | ● | ⚠ USE CAUTION due to poorer response and increased risk of toxicity | MTHFR C677T/C677T/A1298C | A1298C Heterozygous Mutation/C677T Homozygous Mutation |
| Oncology | Antimetabolites (Pyrimidine Analog): | | | | |
| | Fluorouracil (Carac®) | ● | ⚠ USE CAUTION due to worse outcome including overall survival and progression-free survival | NQO1 c.559C>T/c.559C>T | rs1800566 AA genotype |
| Oncology | Antimetabolites (Pyrimidine Analog): | | | | |
| | Fluorouracil (Carac®) | ● | ⚠ USE CAUTION due to decreased survival and response | XRCC1 WT/WT | rs25487 T Allele Carrier |
| Oncology | Chemotherapy Modulating Agents: | | | | |
| | Leucovorin (Wellcovorin®) | ● | ⚠ USE CAUTION due to poorer response and increased risk of toxicity | MTHFR C677T/C677T/A1298C | A1298C Heterozygous Mutation/C677T Homozygous Mutation |
| Oncology | Chemotherapy Modulating Agents: | | | | |
| | Leucovorin (Wellcovorin®) | ○ | ⚠ USE CAUTION due to decreased survival and response | XRCC1 WT/WT | rs25487 T Allele Carrier |
| Oncology | Folate Antimetabolites: | | | | |
| | Methotrexate (Trexall®) | ● | ⚠ USE CAUTION due to increased risk of toxicity caused by increased drug concentration | ABCB1 WT/WT | rs2032582 AA genotype/rs1045642 AA genotype |

| Therapeutic | Drug Impacted | Evidence Level | Clinical Interpretation | Gene/Genotype | Phenotype |
|-------------|---|----------------|---|------------------------------------|---|
| Oncology | Folate Antimetabolites: | | | | |
| | Methotrexate (Trexall®) | ● | ⚠ USE CAUTION due to poorer response and increased risk of toxicity | MTHFR C677T/C677T/A1298C | A1298C Heterozygous Mutation/C677T Homozygous Mutation |
| Oncology | Folate Antimetabolites: | | | | |
| | Pemetrexed (Alimta®) | ● | ⚠ USE CAUTION due to poorer response and increased risk of toxicity | MTHFR C677T/C677T/A1298C | A1298C Heterozygous Mutation/C677T Homozygous Mutation |
| Oncology | Platinum Analog: | | | | |
| | Carboplatin (Paraplatin®) | ● | ⚠ USE CAUTION due to decreased survival and response | XRCC1 WT/WT | rs25487 T Allele Carrier |
| | Cisplatin (Platinol®) | ● | | | |
| | Oxaliplatin (Eloxatin®) | ● | | | |
| Oncology | Platinum Analog: | | | | |
| | Carboplatin (Paraplatin®) Oxaliplatin (Eloxatin®) | ● ● | ⚠ USE CAUTION due to poorer response and increased risk of toxicity | MTHFR C677T/C677T/A1298C | A1298C Heterozygous Mutation/C677T Homozygous Mutation |
| Oncology | Platinum Analog: | | | | |
| | Cisplatin (Platinol®) | ● | ⚠ USE CAUTION due to increased risk for nephrotoxicity | ERCC1 c.354T>C/c.*931T>G | rs3212986 C Allele Carrier/rs11615 non-AA genotype/rs735482 non-AA genotype |
| Oncology | Platinum Analog: | | | | |
| | Cisplatin (Platinol®) Oxaliplatin (Eloxatin®) | ● ● | ⚠ USE CAUTION due to worse outcome including overall survival and progression-free survival | NQO1 c.559C>T/c.559C>T | rs1800566 AA genotype |
| Oncology | Taxane Derivatives: | | | | |
| | Docetaxel (Taxotere®) | ● | ⚠ USE CAUTION due to increased risk for nephrotoxicity | ERCC1 c.354T>C/c.*931T>G | rs3212986 C Allele Carrier/rs11615 non-AA genotype/rs735482 non-AA genotype |
| Oncology | Taxane Derivatives: | | | | |
| | Paclitaxel (Abraxane®) | ● | ⚠ USE CAUTION due to increased risk for nephrotoxicity | ERCC1 c.354T>C/c.*931T>G | rs3212986 C Allele Carrier/rs11615 non-AA genotype/rs735482 non-AA genotype |
| Oncology | Antimetabolites (Purine Analog): | | | | |
| | Mercaptopurine (Purinethol®) Thioguanine (Tabloid®) | ● ● | ✔ NORMAL RESPONSE EXPECTED | TPMT *1/*1 | Normal Metabolizer |
| Oncology | Antimetabolites (Pyrimidine Analog): | | | | |
| | Capecitabine (Xeloda®) Pyrimidinedione (Tegafur-Uracil®) | ● ● | ✔ NORMAL RESPONSE EXPECTED | DPYD *1/*1 | Normal Metabolizer |
| Oncology | Antimetabolites (Pyrimidine Analog): | | | | |
| | Cytarabine (Depocyt®) | ● | ✔ NORMAL RESPONSE EXPECTED | CDA WT/WT | rs532545 C Allele |

| Therapeutic | Drug Impacted | Evidence Level | Clinical Interpretation | Gene/Genotype | Phenotype |
|-------------|---|----------------|-----------------------------------|------------------------------------|---|
| Oncology | BCR-ABL Tyrosine Kinase Inhibitors: | | | | |
| | Nilotinib (Tasigna®) Pazopanib (Votrient®) | ● | ✔ NORMAL RESPONSE EXPECTED | UGT1A1 *1/*1 | Non *28 Allele Carrier |
| Oncology | BRAF Kinase Inhibitors: | | | | |
| | Dabrafenib (Tafinlar®) | ● | ✔ NORMAL RESPONSE EXPECTED | G6PD WT/WT | Normal G6PD Efficiency |
| Oncology | EGFR Tyrosine Kinase Inhibitors: | | | | |
| | Erlotinib (Tarceva®) | ● | ✔ NORMAL RESPONSE EXPECTED | UGT1A1 *1/*1 | Non *28 Allele Carrier |
| Oncology | EGFR Tyrosine Kinase Inhibitors: | | | | |
| | Gefitinib (Iressa®) | ● | ✔ NORMAL RESPONSE EXPECTED | CYP3A4 *1A/*1B | Intermediate Metabolizer |
| Oncology | EGFR Tyrosine Kinase Inhibitors: | | | | |
| | Ruxolitinib (Jakavi®) | ● | ✔ NORMAL RESPONSE EXPECTED | CYP3A4 *1A/*1B | Intermediate Metabolizer |
| Oncology | Immunomodulators: | | | | |
| | Thalidomide (Thalomid®) | ● | ✔ NORMAL RESPONSE EXPECTED | ERCC1 c.354T>C/c.*931T>G | rs3212986 C Allele Carrier/rs11615 non-AA genotype/rs735482 non-AA genotype |
| Oncology | Taxane Derivatives: | | | | |
| | Cabazitaxel (Jevtana®) | ● | ✔ NORMAL RESPONSE EXPECTED | CYP3A4 *1A/*1B | Intermediate Metabolizer |
| Oncology | Topoisomerase I Inhibitors: | | | | |
| | Irinotecan (Camptosar®) | ● | ✔ NORMAL RESPONSE EXPECTED | UGT1A1 *1/*1 | Non *28 Allele Carrier |
| Oncology | Urate-Oxidases (Recombinant): | | | | |
| | Rasburicase (Elitek®) | ● | ✔ NORMAL RESPONSE EXPECTED | G6PD WT/WT | Normal G6PD Efficiency |
| Oncology | VEGF Tyrosine Kinase Inhibitors: | | | | |
| | Sunitinib (Sutent®) | ● | ✔ NORMAL RESPONSE EXPECTED | CYP3A4 *1A/*1B | Intermediate Metabolizer |
| Oncology | Vinca Alkaloids: | | | | |
| | Vincristine (Marqibo®) | ● | ✔ NORMAL RESPONSE EXPECTED | ABCB1 WT/WT | rs2032582 AA genotype/rs1045642 AA genotype |

V. Additional Drugs with Pharmacogenomics Information for Smith, John



| Therapeutic | Drug Impacted | Evidence Level | Clinical Interpretation | Gene/Genotype | Phenotype |
|-------------|--|----------------|--|-------------------|--------------------------|
| Cardiology | Antiarrhythmic Drugs: | | | | |
| | Amiodarone (Cordarone®) Dronedaronone (Multaq®) | ● ● | ✘ CONSIDER ALTERNATIVES | CYP3A4 *1A/*1B | Intermediate Metabolizer |
| Cardiology | Antiarrhythmic Drugs: | | | | |
| | Propafenone (Rythmol®) | ● | ✘ CONSIDER ALTERNATIVES (e.g., sotalol, disopyramide, quinidine, amiodarone) | CYP2D6 *4/*10 | Intermediate Metabolizer |
| Cardiology | Antiplatelets: | | | | |
| | Clopidogrel (Plavix®) | ● | ✘ CONSIDER ALTERNATIVES (if no contraindication e.g., prasugrel, ticagrelor) | CYP2C19 *1/*2 | Intermediate Metabolizer |
| Cardiology | Antiplatelets: | | | | |
| | Ticagrelor (Brilinta®) | ● | ✘ CONSIDER ALTERNATIVES | CYP3A4 *1A/*1B | Intermediate Metabolizer |
| Cardiology | Miscellaneous Cardiovascular Agents: | | | | |
| | Ivabradine (Corlanor®) | ● | ✘ CONSIDER ALTERNATIVES | CYP3A4 *1A/*1B | Intermediate Metabolizer |
| Cardiology | Antilipemic Agents (Statins): | | | | |
| | Simvastatin (Zocor®) | ● | ✘ CONSIDER ALTERNATIVES OR ▼ DECREASE DOSE to 20mg daily | SLCO1B1 *5/*5 | Low Activity |
| Cardiology | Beta Blockers: | | | | |
| | Metoprolol (Lopressor®) | ● | ✘ CONSIDER ALTERNATIVES (e.g., bisoprolol, carvedilol) OR ▼ DECREASE DOSE by 50% due to heart failure caused by the decreased drug cardioselectivity | CYP2D6 *4/*10 | Intermediate Metabolizer |
| Cardiology | Antiarrhythmic Drugs: | | | | |
| | Flecainide (Tambocor®) | ● | ▼ DECREASE DOSE by 25% | CYP2D6 *4/*10 | Intermediate Metabolizer |
| Cardiology | Antilipemic Agents (Statins): | | | | |
| | Atorvastatin (Lipitor®) | ● | ▼ DECREASE DOSE to lowest necessary dose daily due to Increased risk for myopathy and rhabdomyolysis | CYP3A4 *1A/*1B | Intermediate Metabolizer |

| Therapeutic | Drug Impacted | Evidence Level | Clinical Interpretation | Gene/Genotype | Phenotype |
|--------------------------|--------------------------------------|----------------|--|--|--|
| Cardiology | Antilipemic Agents (Statins): | | | | |
| | Atorvastatin (Lipitor®) | ● | ▼ DECREASE DOSE | SLCO1B1 *5/*5 | Low Activity |
| | Pitavastatin (Livalo®) | ● | | | |
| | Pravastatin (Pravachol®) | ● | | | |
| Rosuvastatin (Crestor®) | ● | | | | |
| Cardiology | Antilipemic Agents (Statins): | | | | |
| | Lovastatin (Mevacor®) | ● | ▼ DECREASE DOSE to lowest necessary dose daily due to Increased risk for myopathy and rhabdomyolysis OR ⚠ USE CAUTION due to increased risk of adverse reactions | CYP3A4 *1A/*1B | Intermediate Metabolizer |
| Cardiology | Antiarrhythmic Drugs: | | | | |
| | Digoxin (Lanoxin®) | ● | ⚠ USE CAUTION due to the increased risk of drug toxicity leading to adverse events | ABCB1 WT/WT | rs2032582 AA genotype/rs1045642 AA genotype |
| Cardiology | Calcium Channel Blockers: | | | | |
| | Amlodipine (Norvasc®) | ● | ⚠ USE CAUTION due to significant increase in drug exposure and therefore clinical monitoring and dose adjustment may thus be required | CYP3A4 *1A/*1B | Intermediate Metabolizer |
| | Diltiazem (Cardizem®) | ○ | | | |
| | Felodipine (Plendil®) | ○ | | | |
| | Lercanidipine (Zanidip®) | ○ | | | |
| | Nisoldipine (Sular®) | ○ | | | |
| Nitrendipine (Nitrepin®) | ● | | | | |
| Cardiology | Calcium Channel Blockers: | | | | |
| | Nifedipine (Adalat®) | ○ | ⚠ USE CAUTION due to increased risk for QTc prolongation | NOS1AP c.178-20044C>T/c.178-13122C>T | rs10494366 GG genotype/rs10800397 T Allele Carrier/rs10919035 T Allele Carrier |
| Cardiology | Calcium Channel Blockers: | | | | |
| | Verapamil (Calan®) | ● | ⚠ USE CAUTION due to increased risk for QTc prolongation | NOS1AP c.178-20044C>T/c.178-13122C>T | rs10494366 GG genotype/rs10800397 T Allele Carrier/rs10919035 T Allele Carrier |
| Cardiology | ACE Inhibitors: | | | | |
| | Benazepril (Lotensin®) | ● | ✅ NORMAL RESPONSE EXPECTED | ACE WT/WT | ACE Deletion |
| Perindopril (Aceon®) | ● | | | | |
| Cardiology | ACE Inhibitors: | | | | |
| | Captopril (Capoten®) | ● | ✅ NORMAL RESPONSE EXPECTED | AGTR1 WT/WT | rs5186 AA genotype |
| Perindopril (Aceon®) | ● | | | | |
| Cardiology | ACE Inhibitors: | | | | |
| | Captopril (Capoten®) | ● | ✅ NORMAL RESPONSE EXPECTED | ACE WT/WT | ACE Deletion |
| Quinapril (Accupril®) | ● | | | | |

| Therapeutic | Drug Impacted | Evidence Level | Clinical Interpretation | Gene/Genotype | Phenotype |
|-------------|--|----------------|-----------------------------------|--|---|
| Cardiology | Angiotensin II Receptor Blockers: | | | | |
| | Candesartan (Atacand®) | ● | ✔ NORMAL RESPONSE EXPECTED | AGTR1 WT/WT | rs5186 AA genotype |
| Cardiology | Angiotensin II Receptor Blockers: | | | | |
| | Irbesartan (Avapro®) | ● | ✔ NORMAL RESPONSE EXPECTED | ACE WT/WT | ACE Deletion |
| Cardiology | Angiotensin II Receptor Blockers: | | | | |
| | Losartan (Cozaar®) | ● | ✔ NORMAL RESPONSE EXPECTED | ABCB1 WT/WT | rs2032582 AA genotype/rs1045642 AA genotype |
| Cardiology | Angiotensin II Receptor Blockers: | | | | |
| | Losartan (Cozaar®) | ● | ✔ NORMAL RESPONSE EXPECTED | AGTR1 WT/WT | rs5186 AA genotype |
| Cardiology | Antianginal Drugs: | | | | |
| | Ranolazine (Ranexa®) | ● | ✔ NORMAL RESPONSE EXPECTED | CYP2D6 *4/*10 | Intermediate Metabolizer |
| Cardiology | Antilipemic Agents (Statins): | | | | |
| | Fluvastatin (Lescol®) | ● | ✔ NORMAL RESPONSE EXPECTED | ACE WT/WT | ACE Deletion |
| Cardiology | Beta Blockers: | | | | |
| | Atenolol (Tenormin®) | ● | ✔ NORMAL RESPONSE EXPECTED | ADRA2A c.-1252G>C/c.-1252G>C | rs1800544 CC genotype/rs1800545 GG genotype |
| Cardiology | Beta Blockers: | | | | |
| | Carvedilol (Coreg®) | ● | ✔ NORMAL RESPONSE EXPECTED | CYP2D6 *4/*10 | Intermediate Metabolizer |
| Cardiology | Diuretics: | | | | |
| | Bumetanide (Bumex®) | ● | ✔ NORMAL RESPONSE EXPECTED | ACE WT/WT | ACE Deletion |
| | Furosemide (Lasix®) | ● | | | |
| | Hydrochlorothiazide (Microzide®) | ● | | | |
| | Torsemide (Demadex®) | ● | | | |
| | ● | | | | |
| Cardiology | Diuretics: | | | | |
| | Hydrochlorothiazide (Microzide®) | ● | ✔ NORMAL RESPONSE EXPECTED | AGTR1 WT/WT | rs5186 AA genotype |
| Cardiology | Diuretics: | | | | |
| | Spironolactone (Aldactone®) | ● | ✔ NORMAL RESPONSE EXPECTED | ACE WT/WT | ACE Deletion |
| Cardiology | Phosphodiesterase Inhibitors: | | | | |
| | Cilostazol (Pletal®) | ● | ✔ NORMAL RESPONSE EXPECTED | CYP3A4 *1A/*1B | Intermediate Metabolizer |

| Therapeutic | Drug Impacted | Evidence Level | Clinical Interpretation | Gene/Genotype | Phenotype |
|---------------|---|-----------------------|--|---|---|
| Cardiology | Vasodilators: | | | | |
| | Nitroprusside (Nitropress®) | ● | ✔ NORMAL RESPONSE EXPECTED | ACE WT/WT | ACE Deletion |
| Dentistry | Cholinergic Agonists: | | | | |
| | Cevimeline (Evoxac®) | ● | ✔ NORMAL RESPONSE EXPECTED | CYP2D6 *4/*10 | Intermediate Metabolizer |
| Endocrinology | Biguanides: | | | | |
| | Metformin (Glucophage®) | ● | ⚡ USE CAUTION due to decreased drug response | ATM c.175-5285G>T/c.175-5285G>T | rs11212617 AA genotype |
| Endocrinology | Thiazolidinediones: | | | | |
| | Pioglitazone (Actos®) | ● | ⚡ USE CAUTION due to higher risk of side effects caused by decreased drug metabolism | CYP2C8 *1/*3 | Allele 3 Carrier |
| Endocrinology | Thiazolidinediones: | | | | |
| | Rosiglitazone (Avandia®) | ● | ⚡ USE CAUTION due to decreased response caused by increased drug metabolism | CYP2C8 *1/*3 | Allele 3 Carrier |
| Endocrinology | Sulfonylureas: | | | | |
| | Chlorpropamide (Diabinese®) Glimepiride (Amaryl®) Glipizide (Glucotrol®) Glyburide (Glynase®) Tolbutamide | ● ● ● ● ○ | ✔ NORMAL RESPONSE EXPECTED | G6PD WT/WT | Normal G6PD Efficiency |
| Gynecology | Hormonal Contraceptives: | | | | |
| | Ethinyl Estradiol/Norelgestromin (Ortho Evra®) | ● | ✘ CONSIDER ALTERNATIVES (e.g., copper intrauterine device, progestin-only contraceptive) with presence of positive family history of thrombotic events OR ⚡ USE CAUTION by avoid additional risk factors (e.g., obesity, smoking) with absence of positive family history of thrombotic events | F5 WT/c.1601G>A | Factor V Leiden Carrier |
| Gynecology | Hormones: | | | | |
| | Oral-Contraceptive | ● | ✔ NORMAL RESPONSE EXPECTED | F2 WT/WT | Wild Type |
| Hematology | Colony Stimulating Factors: | | | | |
| | Eltrombopag (Promacta®) | ● | ⚡ USE CAUTION due to the potential for an increased risk of thromboembolism | F5 WT/c.1601G>A | Factor V Leiden Carrier |
| Immunology | Immunosuppressant Agents: | | | | |
| | Cyclosporine (Gengraf®) | ● | ⚡ USE CAUTION due to the increased risk of drug rejection and acute post-transplant rejection | ABCB1 WT/WT | rs2032582 AA genotype/rs1045642 AA genotype |

| Therapeutic | Drug Impacted | Evidence Level | Clinical Interpretation | Gene/Genotype | Phenotype |
|-------------|--|----------------|--|--------------------------|---|
| Immunology | 5-Aminosalicylic Acid Derivatives: | | | | |
| | Sulfasalazine (Azulfidine®) | ● | ✔ NORMAL RESPONSE EXPECTED | G6PD WT/WT | Normal G6PD Efficiency |
| Immunology | Antirheumatic Immunosuppressants: | | | | |
| | Methotrexate (Trexall®) | ● | ✔ NORMAL RESPONSE EXPECTED | ITPA WT/WT | Non-protective Wild Type |
| Immunology | Immunosuppressant Agents: | | | | |
| | Sirolimus (Rapamune®) | ● | ✔ NORMAL RESPONSE EXPECTED | CYP3A4 *1A/*1B | Intermediate Metabolizer |
| Immunology | Immunosuppressant Agents: | | | | |
| | Sirolimus (Rapamune®) Tacrolimus (Prograf®) | ● ● | ✔ NORMAL RESPONSE EXPECTED | CYP3A5 *3A/*3A | Non Expresser |
| Immunology | Immunosuppressive Drugs: | | | | |
| | Azathioprine (Imuran®) | ● | ✔ NORMAL RESPONSE EXPECTED | TPMT *1/*1 | Normal Metabolizer |
| Immunology | Systemic Corticosteroids: | | | | |
| | Methylprednisolone (Medrol®) | ● | ✔ NORMAL RESPONSE EXPECTED | ABCB1 WT/WT | rs2032582 AA genotype/rs1045642 AA genotype |
| | Prednisolone (Orapred®) | ● | | | |
| | Prednisone (Deltasone®) | ● | | | |
| | | | | | |
| Immunology | Urate-Oxidase (Recombinant): | | | | |
| | Pegloticase (Krystexxa®) | ● | ✔ NORMAL RESPONSE EXPECTED | G6PD WT/WT | Normal G6PD Efficiency |
| Immunology | Uricosuric Agents: | | | | |
| | Probenecid | ● | ✔ NORMAL RESPONSE EXPECTED | G6PD WT/WT | Normal G6PD Efficiency |
| Immunology | Xanthine Oxidase Inhibitors: | | | | |
| | Allopurinol (Zyloprim®) | ● | ✔ NORMAL RESPONSE EXPECTED | HLA-B WT/WT | Wild Type |
| Neurology | Benzodiazepines: | | | | |
| | Alprazolam (Xanax®) | ○ | ▼ DECREASE DOSE OR ⚠ USE CAUTION | CYP3A4 *1A/*1B | Intermediate Metabolizer |
| Neurology | Other Stimulants: | | | | |
| | Cannabinoids | ● | ⚠ USE CAUTION due to increased risk of tetrahydrocannabinol (THC) dependence | FAAH WT/WT | rs324420 CC genotype |

| Therapeutic | Drug Impacted | Evidence Level | Clinical Interpretation | Gene/Genotype | Phenotype |
|---------------------------|--|-----------------------------------|-----------------------------------|---------------------------|---|
| Neurology | Anti-Anxiety Agents: | | | | |
| | Buspirone (Buspar®) | ○ | ✔ NORMAL RESPONSE EXPECTED | HTR1A WT/c.-1019G>C | rs6295 non-CC genotype/rs1800044 C Allele Carrier |
| Neurology | Anticonvulsant Drugs: | | | | |
| | Carbamazepine (Tegretol®) | ● | ✔ NORMAL RESPONSE EXPECTED | SCN2A WT/WT | rs2304016 non-GG genotype |
| | Lamotrigine (Lamictal®) | ● | | | |
| | Oxcarbazepine (Trileptal®) | ● | | | |
| | Phenytoin (Dilantin®) | ● | | | |
| | Topiramate (Topamax®) | ● | | | |
| Neurology | Anticonvulsant Drugs: | | | | |
| Carbamazepine (Tegretol®) | ● | ✔ NORMAL RESPONSE EXPECTED | HLA-B WT/WT | Wild Type | |
| Neurology | Phenytoin (Dilantin®) | ● | | | |
| Neurology | Anticonvulsant Drugs: | | | | |
| | Clobazam (Onfi®) | ● | ✔ NORMAL RESPONSE EXPECTED | CYP2C19 *1/*2 | Intermediate Metabolizer |
| Neurology | Anticonvulsant Drugs: | | | | |
| | Phenobarbital | ● | ✔ NORMAL RESPONSE EXPECTED | ABCB1 WT/WT | rs2032582 AA genotype/rs1045642 AA genotype |
| Neurology | Antimigraine Agents: | | | | |
| | Eletriptan (Relpax®) | ○ | ✔ NORMAL RESPONSE EXPECTED | CYP3A4 *1A/*1B | Intermediate Metabolizer |
| | Zolmitriptan (Zomig®) | ○ | | | |
| Neurology | Benzodiazepines: | | | | |
| Lorazepam (Ativan®) | ● | ✔ NORMAL RESPONSE EXPECTED | UGT2B15 *1/*2 | rs1902023 non-AA genotype | |
| Neurology | Oxazepam (Serax®) | ● | | | |
| Neurology | Central Monoamine-Depleting Agents: | | | | |
| | Tetrabenazine (Xenazine®) | ● | ✔ NORMAL RESPONSE EXPECTED | CYP2D6 *4/*10 | Intermediate Metabolizer |
| Neurology | CNS Stimulants (ADHD): | | | | |
| | Amphetamine (Adderall®) | ● | ✔ NORMAL RESPONSE EXPECTED | OPRM1 WT/WT | rs1799971 A Allele Carrier/rs510679 TT genotype |
| Neurology | CNS Stimulants (ADHD): | | | | |
| | Amphetamine (Adderall®) | ● | ✔ NORMAL RESPONSE EXPECTED | COMT WT/WT | Non MET Homozygous |
| | Dexmethylphenidate (Focalin®) | ● | | | |
| | Dextroamphetamine (Adderall®) | ● | | | |
| | Lisdexamfetamine (Vyvanse®) | ○ | | | |
| | Methylphenidate (Ritalin®) | ● | | | |
| | | ○ | | | |
| | ○ | | | | |

| Therapeutic | Drug Impacted | Evidence Level | Clinical Interpretation | Gene/Genotype | Phenotype |
|--------------|--|----------------|--|------------------------------------|--|
| Neurology | CNS Stimulants (ADHD): | | | | |
| | Dextroamphetamine (Adderall®) Methylphenidate (Ritalin®) | ● | ✔ NORMAL RESPONSE EXPECTED | DRD1 WT/c.-48G>A | rs4532 non-CC genotype |
| Neurology | CNS Stimulants (ADHD): | | | | |
| | Methamphetamine (Desoxyn®) | ● | ✔ NORMAL RESPONSE EXPECTED | FAAH WT/WT | rs324420 CC genotype |
| Neurology | CNS Stimulants (ADHD): | | | | |
| | Methylphenidate (Ritalin®) | ● | ✔ NORMAL RESPONSE EXPECTED | CES1 WT/WT | rs71647871 C Allele |
| Neurology | CNS Stimulants (ADHD): | | | | |
| | Nicotine (Nicoderm®) | ● | ✔ NORMAL RESPONSE EXPECTED | COMT WT/WT | Non MET Homozygous |
| Neurology | COMT Inhibitors: | | | | |
| | Entacapone (Comtan®) | ● | ✔ NORMAL RESPONSE EXPECTED | COMT WT/WT | Non MET Homozygous |
| Neurology | Other Stimulants: | | | | |
| | Cocaine | ● | ✔ NORMAL RESPONSE EXPECTED | CNR1 WT/c.*3475A> G | rs806368 non-TT genotype |
| Neurology | Serotonin and Norepinephrine Reuptake Inhibitors (SNRIs): | | | | |
| | Atomoxetine (Strattera®) | ● | ✔ NORMAL RESPONSE EXPECTED | CYP2D6 *4/*10 | Intermediate Metabolizer |
| Rheumatology | Nonsteroidal Antiinflammatory Drugs (NSAIDs): | | | | |
| | Flurbiprofen (Ansaid®) | ● | ✔ NORMAL RESPONSE EXPECTED | CYP2C9 *1/*2 | Intermediate Metabolizer |
| Supplements | Vitamins: | | | | |
| | Folic Acid | ● | ✘ CONSIDER ALTERNATIVES (e.g., supplements containing methylfolate) due to significantly reduced folic acid conversion | MTHFR C677T/C677T/A1298C | A1298C Heterozygous Mutation/C677T Homozygous Mutation |
| Toxicology | Antidotes: | | | | |
| | Ethanol | ● | ⚠ USE CAUTION due to increased risk for alcoholism | ANKK1 WT/A1 | A1 Heterozygous |
| Urology | Alpha 1 Blockers: | | | | |
| | Dutasteride/Tamsulosin (Jalyn®) Tamsulosin (Flomax®) | ● | ✔ NORMAL RESPONSE EXPECTED | CYP2D6 *4/*10 | Intermediate Metabolizer |
| Urology | Alpha 1 Blockers: | | | | |
| | Silodosin (Rapaflo®) | ○ | ✔ NORMAL RESPONSE EXPECTED | CYP3A4 *1A/*1B | Intermediate Metabolizer |

| Therapeutic | Drug Impacted | Evidence Level | Clinical Interpretation | Gene/Genotype | Phenotype |
|-------------|--------------------------------|----------------|-----------------------------------|-------------------------|--------------------------|
| Urology | Anticholinergic Agents: | | | | |
| | Darifenacin (Enablex®) | ● | ✔ NORMAL RESPONSE EXPECTED | CYP2D6 *4/*10 | Intermediate Metabolizer |
| Urology | Anticholinergic Agents: | | | | |
| | Tolterodine (Detrol®) | ● | ✔ NORMAL RESPONSE EXPECTED | CYP2D6 *4/*10 | Intermediate Metabolizer |

Appendix I.
 Patient PGxOnco™ Genotype and Phenotype Results for
 Smith, John



| Gene | Genotype | Phenotype |
|---------|-----------------------------|---|
| ABCB1 | WT/WT | rs2032582 AA genotype/rs1045642 AA genotype |
| ACE | WT/WT | ACE Deletion |
| ADRA2A | c.-1252G>C/c.-1252G>C | rs1800544 CC genotype/rs1800545 GG genotype |
| AGTR1 | WT/WT | rs5186 AA genotype |
| ANKK1 | WT/A1 | A1 Heterozygous |
| APOE | WT/WT | Non E2 Carrier |
| ATM | c.175-5285G>T/c.175-5285G>T | rs11212617 AA genotype |
| CDA | WT/WT | rs532545 C Allele |
| CES1 | WT/WT | rs71647871 C Allele |
| CNR1 | WT/c.*3475A>G | rs806368 non-TT genotype |
| COMT | WT/WT | Non MET Homozygous |
| CYP1A2 | *1A/*1A | Normal Metabolizer |
| CYP2B6 | G516T/G516T/A785G/A785G | G516T Homozygous/A785G Homozygous/Non T983C Homozygous |
| CYP2C19 | *1/*2 | Intermediate Metabolizer |
| CYP2C8 | *1/*3 | Allele 3 Carrier |
| CYP2C9 | *1/*2 | Intermediate Metabolizer |
| CYP2D6 | *4/*10 | Intermediate Metabolizer |
| CYP3A4 | *1A/*1B | Intermediate Metabolizer |
| CYP3A5 | *3A/*3A | Non Expresser |
| CYP4F2 | *1/*1 | Normal Metabolizer |
| DPYD | *1/*1 | Normal Metabolizer |
| DRD1 | WT/c.-48G>A | rs4532 non-CC genotype |
| DRD2 | WT/WT | rs1799978 TT genotype |
| ERCC1 | c.354T>C/c.*931T>G | rs3212986 C Allele Carrier/rs11615 non-AA genotype/rs735482 non-AA genotype |

| Gene | Genotype | Phenotype |
|---------|-------------------------------|--|
| F2 | WT/WT | Wild Type |
| F5 | WT/c.1601G>A | Factor V Leiden Carrier |
| FAAH | WT/WT | rs324420 CC genotype |
| G6PD | WT/WT | Normal G6PD Efficiency |
| GRIK4 | WT/WT | rs1954787 TT genotype |
| GSTP1 | WT/c.313A>G | rs1695 AG genotype |
| HLA-B | WT/WT | Wild Type |
| HTR1A | WT/c.-1019G>C | rs6295 non-CC genotype/rs1800044 C Allele Carrier |
| HTR2A | c.614-2211T>C/c.614-2211T>C | rs7997012 GG genotype |
| HTR2C | c.551-3008C>G/c.551-3008C>G | rs1414334 G Allele Carrier |
| IFNL3 | WT/WT | Favorable Response Genotype |
| ITPA | WT/WT | Non-protective Wild Type |
| KIF6 | WT/c.2155T>C | rs20455 non-AA genotype |
| MTHFR | C677T/C677T/A1298C | A1298C Heterozygous Mutation/C677T Homozygous Mutation |
| NAT2 | *5/*6/*12/*13 | Normal Metabolizer |
| NOS1AP | c.178-20044C>T/c.178-13122C>T | rs10494366 GG genotype/rs10800397 T Allele Carrier/rs10919035 T Allele Carrier |
| NQO1 | c.559C>T/c.559C>T | rs1800566 AA genotype |
| OPRM1 | WT/WT | rs1799971 A Allele Carrier/rs510679 TT genotype |
| SCN2A | WT/WT | rs2304016 non-GG genotype |
| SLC6A4 | S/LA | HTTLPR Long Form |
| SLCO1B1 | *5/*5 | Low Activity |
| TPMT | *1/*1 | Normal Metabolizer |
| UGT1A1 | *1/*1 | Non *28 Allele Carrier |
| UGT2B15 | *1/*2 | rs1902023 non-AA genotype |
| VKORC1 | WT/-1639G>A | rs9923231 A Allele Carrier |
| XRCC1 | WT/WT | rs25487 T Allele Carrier |

Appendix II. PGxOnco™ Panel Genes and Variants:

This test only detects those genes and variants listed below. A normal (wild type) genotype signifies the absence of the targeted alleles and does not indicate the absence of other mutations not covered by the assay. The possibility cannot be ruled out that the indicated genotypes may be present but below the limits of detection for this assay. The panel includes 50 genes and 211 variants based on the recommendations of the Clinical Pharmacogenetics Implementation Consortium (CPIC) and Dutch Pharmacogenetics Working Group (DPWG) and the FDA's work group guidance.

| Gene | Allele Type | Alleles |
|---------|------------------------------|---|
| ABCB1 | Decreased Activity | rs1045642, rs2032582 |
| ACE | Decreased Activity | rs1799752 |
| ADRA2A | Decreased Activity | rs1800544, rs1800545 |
| AGTR1 | Decreased Activity | rs5186 |
| ANKK1 | Decreased Activity | rs1800497 |
| APOE | Decreased Activity | rs7412 |
| ATM | Decreased Metformin Response | rs11212617 |
| CDA | Decreased Activity | rs532545 |
| CES1 | Decreased Activity | rs71647871 |
| CNR1 | Decreased Activity | rs806368 |
| COMT | Decreased Activity | rs4680 |
| CYP1A2 | Active | *1A |
| | Increased Activity | *1F |
| | Decreased Activity | *1C, *1K, *3, *4, *7 |
| | Inactive | *6 |
| CYP2B6 | Decreased Activity | *6, *18 |
| CYP2C19 | Active | *1 |
| | Increased Activity | *17 |
| | Decreased Activity | *9, *10 |
| | Inactive | *2, *3, *4, *5, *6, *7, *8, *12 |
| CYP2C8 | Decreased Activity | *3 |
| CYP2C9 | Active | *1 |
| | Decreased Activity | *2, *3, *4, *5, *8, *9, *11, *12, *13, *14, *16 |
| | Inactive | *6, *15 |
| CYP2D6 | Active | *1, *2, *35 |
| | Decreased Activity | *9, *10, *17, *29, *41 |
| | Inactive | *3, *4, *6, *7, *8, *11, *12, *14, *19, *20, *21, *38, *40, *44 |
| | Deletion | *5 |
| | Amplification | *1XN, *2XN, *4XN, *10XN, *17XN, *29xN, *35xN, *41XN |
| CYP3A4 | Active | *1A |
| | Decreased Activity | *1B, *2, *3, *12, *17 |
| CYP3A5 | Active | *1A |
| | Decreased Activity | *2, *7, *8, *9 |
| | Inactive | *3A, *3B, *6 |

| | | |
|---------|--------------------------------|--|
| CYP4F2 | Active | *1 |
| | Decreased Activity | *3 |
| DPYD | Active | *1, *4, *5, *6, *9A |
| | Decreased Activity | *9B, *10 |
| | Inactive | *2A, *3, *7, *8, *11, *12, *13, 496A>G, IVS10-15T>C, 1845G>T, 2846A>T |
| DRD1 | Decreased Activity | rs4532 |
| DRD2 | Decreased Activity | rs1799978 |
| ERCC1 | Decreased Activity | rs3212986, rs11615, rs735482 |
| F2 | Prothrombin Mutation | G20210A |
| F5 | Increased Activity | rs6025 |
| FAAH | Decreased Activity | rs324420 |
| G6PD | Decreased Activity | A, A-202A_376G, A-376G_968C, Alhambra, Andalus, Beverly Hills, Canton, Cassano, Chatham, Chinese-3, Chinese-4, Coimbra, Cosenza, Fushan, Guadalajara, Ilesha, Iowa, Kaiping, Kalyan, Lagosanto, Mahidol, Mediterranean, Metaponto, Minnesota, Mt. Sinai, Nara, Nashville, Olomouc, Pawnee, Plymouth, Praba, Puerto Limon, Santamaria, Santiago, Santiago de Cuba, Sao Boria, Shinshu, Sibari, Telti, Tomah, Ube, Union, Viangchan, West Virginia |
| GRIK4 | Decreased Activity | rs1954787 |
| GSTP1 | Decreased Activity | rs1695 |
| HLA-B | Carbamazepine ADR | *1502 |
| | Abacavir Hypersensitivity | *5701 |
| | Allopurinol ADR | *5801 |
| HTR1A | Decreased Activity | rs1800044, rs6295 |
| HTR2A | Decreased Activity | rs7997012 |
| HTR2C | Decreased Activity | rs1414334, rs3813929 |
| IFNL3 | Decreased Activity | rs12979860, rs8099917 |
| ITPA | Decreased Activity | rs1127354, rs7270101 |
| KIF6 | Decreased Activity | rs20455 |
| MTHFR | Decreased Activity | C677T, A1298C |
| NAT2 | Active | *4, *12, *13 |
| | Inactive | *5, *6, *7 |
| NOS1AP | Decreased Activity | rs10494366, rs10800397, rs10919035 |
| NQO1 | Decreased Activity | rs1800566 |
| OPRM1 | Decreased Activity | rs1799971, rs510769 |
| SCN2A | Decreased Activity | rs2304016 |
| SLC6A4 | Decreased Activity | 5-HTTLPR _{LA} , 5-HTTLPR _{LG} , 5-HTTLPR _S |
| SLCO1B1 | Decreased Activity | *5 |
| TPMT | Active | *1 |
| | Inactive | *2, *3A, *3B, *3C, *4 |
| UGT1A1 | Decreased Activity | *28 |
| UGT2B15 | Decreased Activity | rs1902023 |
| VKORC1 | Increased Warfarin Sensitivity | -1639G>A |
| XRCC1 | Decreased Activity | rs25487 |

Assay Methodology and Limitations for PGxOnco™ Panel:

Pharmacogenomics testing to assess how a patient may respond to prescribed drugs was performed by massively parallel Next Generation Sequencing (NGS). PGxOnco™ was developed, and assessed for accuracy and precision by Admera Health, South Plainfield NJ. The sensitivity and specificity of this test is 100% and 100% respectively. PGxOnco™ has not been cleared or approved by the U.S. Food and Drug Administration (FDA) but the FDA has determined that such clearance or approval is not necessary. The PGxOnco™ test is used for clinical purposes. It should not be regarded as investigational or for research. Drug interaction information is based upon data available in scientific literature and prescribing information for the most commonly prescribed drugs. This laboratory is certified under the Clinical Laboratory Improvement Amendments (CLIA) as qualified to perform high complexity clinical laboratory testing. The DNA testing is not a substitute for clinical monitoring.

General Pharmacogenomics References:

1. Drug labels with pharmacogenomics information:
<https://www.pharmgkb.org/view/drug-labels.do>
2. Pharmacogenomics drug dosing guidelines:
<https://www.pharmgkb.org/view/dosing-guidelines.do>
3. FDA Orange Book Search Engine:
<http://www.accessdata.fda.gov/scripts/cder/ob/default.cfm>
4. Warfarin dosing guideline:
Clinical Pharmacogenetics Implementation Consortium Guidelines
for CYP2C9 and VKORC1 Genotypes and Warfarin Dosing

Disclaimer of Liability:

The information contained in this report is provided as a service and does not constitute medical advice. At the time of report generation this information is believed to be current and is based upon published research; however, research data evolves and amendments to the prescribing information of the drugs listed will change over time. While this report is believed to be accurate and complete as of the date issued, THE DATA IS PROVIDED "AS IS", WITHOUT WARRANTIES OF ANY KIND, EXPRESS OR IMPLIED, INCLUDING WITHOUT LIMITATION, THE IMPLIED WARRANTIES OF MERCHANTABILITY AND FITNESS FOR A PARTICULAR PURPOSE. As medical advice must be tailored to the specific circumstances of each case, the treating health care professional has ultimate responsibility for all treatment decisions made with regard to a patient including any made on the basis of a patient's genotype.

Electronic Signature

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