myome®

Proactive Health
INTEGRATED PRS™
PROSTATE CANCER

Understanding Test Results

Incorporate the MyOme Integrated Polygenic Risk Score™ (iPRS™) Prostate Cancer test into your patient's risk assessment for a personalized approach to prostate cancer screening and risk reduction.

Combining Genetic and Clinical Insights for Precise Prostate Cancer Risk Prediction

The iPRS Prostate Cancer test calculates a patient's risk of developing prostate cancer by combining a cross-ancestry PRS and two highly predictive clinical risk factors.[1,2]

Genetic analysis considers

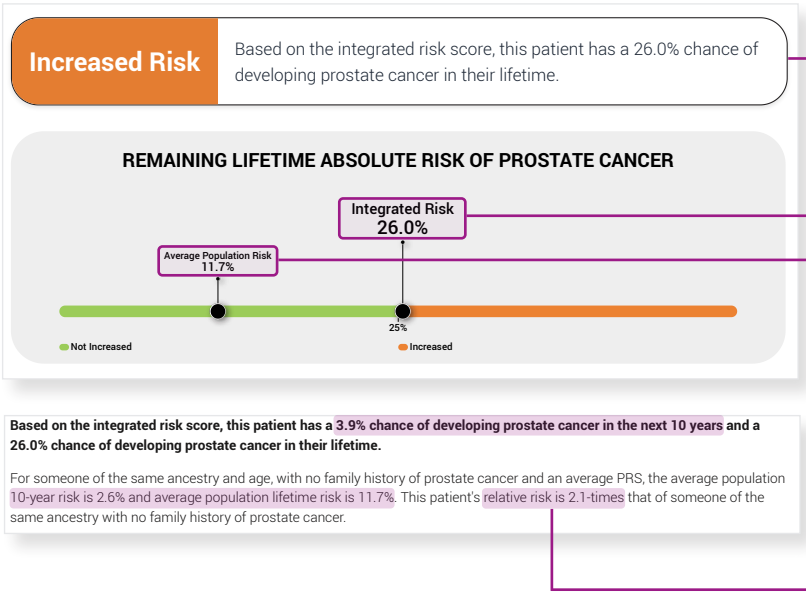
~7M genetic markers linked to prostate cancer risk

Clinical risk factor analysis includes:

- Current age
- Family history of prostate cancer

Test Result Overview

Your patient's prostate cancer risk will be presented as a remaining lifetime risk and absolute 10-year risk* by combining their PRS with their clinical risk, based on the non-genetic risk factors listed above.



RESULTS SUMMARY
Remaining lifetime risk reported as "increased risk" (≥25%) or "not at increased risk" (<25%).

INTEGRATED LIFETIME RISK
Personalized remaining lifetime risk based on the combination of genetic and clinical risk factors. Integrated 10-year risk is also reported for patients aged 40-70 years old (see highlighted text).

AVERAGE POPULATION LIFETIME RISK
Remaining lifetime risk for a biological male of the same ancestry and age, with no family history of prostate cancer. Average population 10-year risk is also reported for patients aged 40-70 years old (see highlighted text).

RELATIVE RISK
Compares a patient's lifetime chance of developing prostate cancer to that of the average person of the same ancestry who has no family history of the disease.

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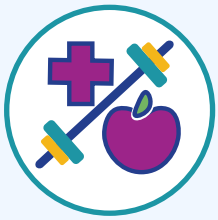
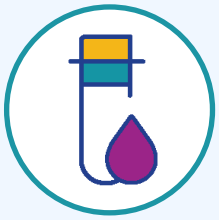
Implications for Prostate Cancer Risk Reduction

Lifestyle Modifications



The American Cancer Society recommends healthy habits like maintaining a healthy weight, keeping physically active, and eating a balanced diet rich in fruits, vegetables, and whole grains, and limit red and processed meats, sugary drinks, and highly processed foods to lower the risk of prostate cancer.[1]

Further Screening



Per published guidelines, individuals with elevated risk for developing prostate cancer may consider additional screening, including the prostate-specific antigen (PSA) blood test and digital rectal exam (DRE), starting at a younger age.[2,3]

Support at Every Step of the Way

We are committed to supporting providers with a customizable, end-to-end solution that easily integrates with your workflow and resources to improve the patient and provider experience.

Online Provider Portal

Genetic Counseling

Provider Resource Hub

Make MyOme Proactive Health part of your clinical care.
Contact support@myome.com or visit our website to get started.

1. The American Cancer Society. Can Prostate Cancer Be Prevented? Web. Accessed 14Nov2025. www.cancer.org. **2.** American Cancer Society. Recommendations for Prostate Cancer Early Detection. Web. Accessed 14Nov2025. www.cancer.org. **3.** Wei JT, Barocas D, Carlsson S, et al. Early detection of prostate cancer: AUA/SUO guideline part I: prostate cancer screening. J Urol. 2023;210(1):45-53. PMID: 37096582.

This test was developed, and its performance characteristics were determined, by MyOme, Inc., a clinical laboratory certified under the Clinical Laboratory Improvement Amendments of 1988 (CLIA)and College of American Pathologist (CAP) accredited to perform high complexity clinical laboratory testing. This test has not been cleared or approved by the U.S. Food and Drug Administration (FDA). Test results should always be interpreted by a clinician in the context of clinical and familial data with the availability of genetic counseling when appropriate. MyOme is not responsible for the content or accuracy of third-party websites.

