

Understanding Test Results

Leverage the Medication Response test to uncover your patient's genetic insights that guide more informed and effective medication decisions.



Optimize Medication Plans with Personalized Genetic Insights

The Medication Response™ test identifies genetic variants associated with medication responses to optimize treatment plans, minimize adverse reactions, and maximize efficacy for better therapeutic outcomes.



Analyzes pharmacogenes that affect the metabolism of
70+ medications

Detects variants in two types of genes:

- **Pharmacokinetic genes:** encode for drug-metabolising enzymes that process medications and clear them from the body
- **Pharmacodynamic genes:** alter specific drug targets and thus the body's response to a drug

Test Results Overview

REPORT

Lists the specific genes tested and the associated phenotype classifications, presented in the format below.

PHARMACOGENOMIC SUMMARY

To facilitate the use of pharmacogenomic guidance, we report known variants in genes associated with response to common medications. Our test examines 15 genes with alleles with known pharmacogenomic implications. For additional guidance on how the findings in this report might affect drug response please refer to the FDA. **You should always consult your healthcare provider prior to making any changes to your medication regimen.**

GENE	DIPLotype	GENE PHENOTYPE
CYP2B6	*6 / *22	Intermediate Metabolizer
CYP2C19	*1 / *1	Normal Metabolizer
CYP2C9	*1 / *1	Normal Metabolizer
CYP2D6	*1 / *4	Intermediate Metabolizer
CYP3A4	*1 / *22	Variant Present
CYP3A5	*1 / *3	Intermediate Metabolizer

• GENE INFORMATION

The specific genes analyzed.

• PHENOTYPE

The expected impact of detected variants on medication response. Metabolizer phenotypes describe the rate at which drugs are cleared from the body, which can influence the risk of adverse reactions.

• DIPLotype

The specific genetic variants (diplotypes) present in each gene.

CLINICAL GUIDELINES SUPPLEMENT

Provides a summary of potential drug–gene interactions, informed by the patient's results and based on clinical guidelines.¹⁻³

IMPACT LEGEND

- ⚠ CONTRAINDICATED
- ⚠ MAJOR IMPACT
- 🟡 ALTERED DOSE
- 🟢 MINIMAL IMPACT

Clinical guidelines* recommend selecting an alternative drug
Clinical guidelines* suggest a change to dosage and elevated risk of adverse drug reactions
Clinical guidelines* suggest a change to dosage
No guidance beyond standard course of action

ACTIONABLE DRUG-GENE INTERACTION SUMMARY

BEHAVIORAL HEALTH	CARDIOLOGY
atomoxetine CYP2D6 (Normal Metabolizer)	pitavastatin SLC01B1 (Decreased Function) simvastatin SLC01B1 (Decreased Function) CYP2C9 (Normal Metabolizer) CYP4F2 (Variant Present) warfarin VKORC1 (Variant Present)

• IMPACT LEGEND

Clinical guideline recommendations based on detected genetic variants.*

• ACTIONABLE DRUG-GENE INTERACTION SUMMARY

Medications and associated genetic variants that are actionable under clinical guidelines (contraindicated, major impact, or altered dose). Those with minimal impact (no guidance beyond standard course of action) are also presented in the supplement.

*Guideline recommendations are not intended to be used in isolation—providers should consider all clinical and FDA prescribing information before modifying treatment plans.



Proactive Health MEDICATION RESPONSE™

Next Steps

Medication Response™ results can inform personalized modifications to optimize medication choice and dose for improved therapeutic outcomes.

Optimized Medications



To determine any potential changes to dosing or medications based on results, review the clinical guidelines supplement, request a clinical note from MyOme, and/or consult established guidelines.

PUBLISHED GUIDELINES

- Clinical Pharmacogenetics Implementation Consortium (CPIC)¹
- PharmGKB²
- FDA Table of Pharmacogenomic Associations³

Personalized Treatment Plan



When personalizing a patient's treatment, genetic information should be integrated with other factors such as patient history, current medications, and comorbidities.

PATIENT EXAMPLE

Based on test results, a patient is classified as a poor metabolizer for a particular medication. The patient may require a lower dose or an alternative treatment to avoid side effects and ensure medication efficacy.

Support at Every Step of the Way

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



Online Provider Portal



Accessible 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. CPIC. Genes–Drugs. Web. cpicpgx.org/genes–drugs. Accessed Dec 2025. 2. ClinPGx. Clinical Guideline Annotations. clinpgx.org/guidelineannotations. Web. Accessed Dec 2025. 3. US Food & Drug Administration. Table of Pharmacogenomic Associations. 2022 Oct. Web. Accessed Dec 2025.

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 Pathologists (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.