

Adult Screening Exome Sequencing & Pharmacogenomic Test

*Know Your Risk of Developing Genetic Disorders Including
Cancers and Heart Diseases*

Understand Your Reproductive Health

Learn About Your Drug Response to over 340 Medications




RAINBOW
GENOMICS



Message from the CEO

The human genome consists of 3 billion nucleotides or “letters” of DNA. Only a small fraction, about 1.5% of the genome, contains genes that encode proteins, which control various functions in the body. Much of what we know about genetic disorders are based on these genes, or what we collectively called the exome. An exome contains more than 22,000 genes.

The Rainbow Adult Screening Exome Sequencing Test screens over 22,000 genes from the entire exome, and provides results that are based on clear medical evidence.

Most direct-to-consumer tests provide hundreds or even thousands of genetic findings that lack clinical utilities. Unlike these "recreational genetic tests", the Rainbow Adult Screening Exome Sequencing Test provides clinically- actionable results

related to disorders for which your physicians can manage, treat or prevent:

1. Your Health - Your risk of developing genetic disorders in the future.

2. Your Reproductive Health

Your reproductive health risk, which is the risk of passing on genetic disorders to your children.

3. Your Drug Response To Over 340 Medications

4. Heart Attack and Stroke Risk

5. Your Personal, One-Hour, Bilingual Genetic Counseling Session Included!

By delivering clinically-actionable results, we enable your physicians to provide prevention strategies and personalized-care for you.

Daniel C. Siu

CEO

Rainbow Genomics





Your Health



The Adult Screening Exome Sequencing test screens over 22,000 genes from the entire exome, to determine your risk of developing a genetic disorder, which includes cancers, heart diseases, certain neurological disorders and numerous Mendelian and monogenic diseases. Data analysis and clinical interpretation is provided by Baylor Genetics.

Over 5,000 genetic disorders are known. Most of them are rare disorders. However, certain heart diseases and cancers have well-understood genetic associations. For example, about 5% of breast and colon cancers are known to be caused by genetics. Also, 1 out of 500 individuals carry mutations associated with cardiomyopathy.

This test determines the

pathogenic and likely-pathogenic variants associated with genetic disorders. These are variants that have been reported in the scientific literature and are expected to increase the risk of developing a disorder.

Carrying a pathogenic mutation does not necessarily indicate that you will develop the disorder. The positive result can enable your physician to develop appropriate prevention strategy to manage your risk.

Because it is difficult to list thousands of genetic disorders screened by this test, at the end of this brochure, we provided some examples of cancers, heart diseases, neurological and syndromic disorders covered by this test.



* Cancers *Heart Diseases

Whole Exome Sequencing Test

Analyze 22,000 Genes



Your Reproductive Health



This test, similar to carrier testing, screens over 22,000 genes to determine pathogenic mutations associated with recessive disorders that can be passed on to your children. Data analysis and clinical interpretation is provided by Baylor Genetics.

Carrier screening determines if you may carry a genetic mutation that could cause a serious inherited disorder in your baby. Over 1,300 carrier status conditions are known. Many of these conditions are rare. And many of these conditions will not be detected by routine prenatal tests. Because these disorders are recessive, a baby must inherit a genetic variant from each parent to have the disease. If both parents are carriers, their child will have a 1 in 4 chance to be born with the disease.

Unlike many gene-panel tests (includes 50-200 genes) developed by U.S. and European companies based on research using Caucasian patients, which may not include sufficient Asian genes, the Adult Screening Exome Sequencing test examines over 22,000 genes from the exome. We substantially reduce the risk of not testing genes that are specifically associated with Asian patients.

Note that this test cannot determine the carrier status of Fragile X, Spinal Muscular Atrophy (SMN) and Thalassemias (HBA).

Because it is difficult to list all the carrier status conditions screened by this test, at the end of this brochure, we provided some examples of recessive disorders covered by this test.

Whole Exome Sequencing Test

Analyze 22,000 Genes



Your Drug Response to Over 340 Medications



THE ONEOME®RIGHTMED® PHARMACOGENOMIC TEST*

Rainbow Genomics works closely with OneOme (Minneapolis, MN, U.S.) to provide comprehensive, clinically-actionable pharmacogenomic test to patients and physicians - The OneOme RightMed pharmacogenomic test.

Co-developed and exclusively licensed with Mayo Clinic (Rochester, MN, U.S.), OneOme provides a comprehensive solution that determines how patients' genes may affect their response to over 340 medications. OneOme analyzes a patient's genetic information and provides a validated clinical report to the provider.

Imprecise medication can cause delay of effective treatment, re-hospitalization, adverse events, and increased mortality. Recent U.S. studies have shown that response rates for many drugs are only between 50-75%. Also, adverse drug reactions (ADRs) are the 4th leading cause of death annually in the U.S.

The test aims to reduce adverse drug reactions, increase drug effectiveness and prevent unintended interactions between drugs.

Comprehensive. Includes 22 genes, 340+ common medications, and 28 medical conditions

Credible. Uses clinical evidence curated with Mayo Clinic from FDA label information, Clinical Pharmacogenetics Implementation Consortium, and other professional guidelines and scientific studies

In addition to drug metabolizing profiles, the RightMed test also categorizes drug results into a simple format:



Minimal gene-drug interaction



Moderate gene-drug interaction



Major gene-drug interaction

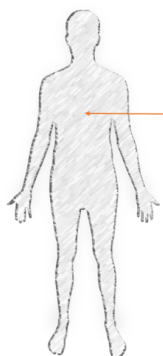
OneOme RightMed Test

Includes over 340 Medications

* The RightMed Test is only available in Hong Kong and Japan



Your Heart Attack and Ischemic Stroke Risk



Common
Heart
Diseases

Myocardial Infarction (Heart Attack)

A heart attack occurs when the flow of blood to the heart is blocked, most often by a build-up of fat, cholesterol and other substances, which forms a plaque in the coronary arteries. The interrupted blood flow can damage the heart muscle. A heart attack, also called a myocardial infarction (MI), can be fatal. Both environmental and genetic factors contribute to the risk of having a heart attack.

The MI Risk Assessment Test determines the genotypes of two risk markers located at chromosome 9p21. These two single nucleotide polymorphisms, or SNPs, associate with increased risks for development of MI and coronary heart disease. The risk associations have been replicated in over 20 populations with over 20,000 myocardial infarction patients and 40,000 controls, including over 5000 Chinese, Japanese, Koreans and other East Asian patients.

Atrial Fibrillation (Ischemic Stroke)

Atrial fibrillation (AF) is an irregular and often rapid heart rate that can increase your risk of stroke, heart failure and other heart-related complications. Episodes of atrial fibrillation can lead to blood clots forming in the heart that may circulate to other organs and lead to blocked blood flow (ischemia). A study of 471,446 Chinese individuals over 11 years, showed that the prevalence of AF increased 20 folds. The lifetime risk was approximately one in five among Chinese.

The AF Risk Assessment Test determines the genotypes of two risk markers located at chromosome 4q25 near transcription factor PITX2. In numerous studies with over 10,000 patients and 30,000 controls, the 4q25 risk association has been confirmed in Caucasian, Japanese, Chinese and Korean populations.

Clinical interpretation is provided by the Rainbow's clinical team in Japan.

Sanger Sequencing Test

Analyze 4 SNPs



Genetic Testing for Your Symptoms

Over 5000 Mendelian and monogenic disorders are known. If you currently have a family history, or symptoms of a condition that may have a genetic origin, your physician can provide the clinical information when ordering the test. Data analysis and clinical interpretation will be provided by Baylor Genetics to determine a genetic cause of your symptoms.

This analysis covers mutations associated with pathogenic and likely-pathogenic variants, as well as variants of uncertain clinical significance.

The result is included as part of the physician report issued by a U.S. board-certified medical director from Baylor Genetics.

Bilingual genetic counseling provided by U.S. certified genetic counselors is included.

In addition, we also provide physician consultation. This is provided by U.S. board certified physician specialists through live-video-conferencing sessions.



Whole Exome Sequencing Test

Analyze 22,000 Genes



Your Personal Genetic Counseling Session

Provided by U.S.
Certified Genetic
Counselors from
*Baylor College of
Medicine*

Genetic Counseling for Patients

Rainbow Genomics provides a variety of bilingual-genetic counseling services to our patients, in Mandarin, Cantonese, Japanese and English. Included with our tests, Baylor College of Medicine's Consultagene program delivers email-, phone- or video-conferencing-based genetic counseling to each patient. U.S.-certified genetic counselors from Baylor College of Medicine (BCM) will provide the services to ensure high quality and effective patient support.

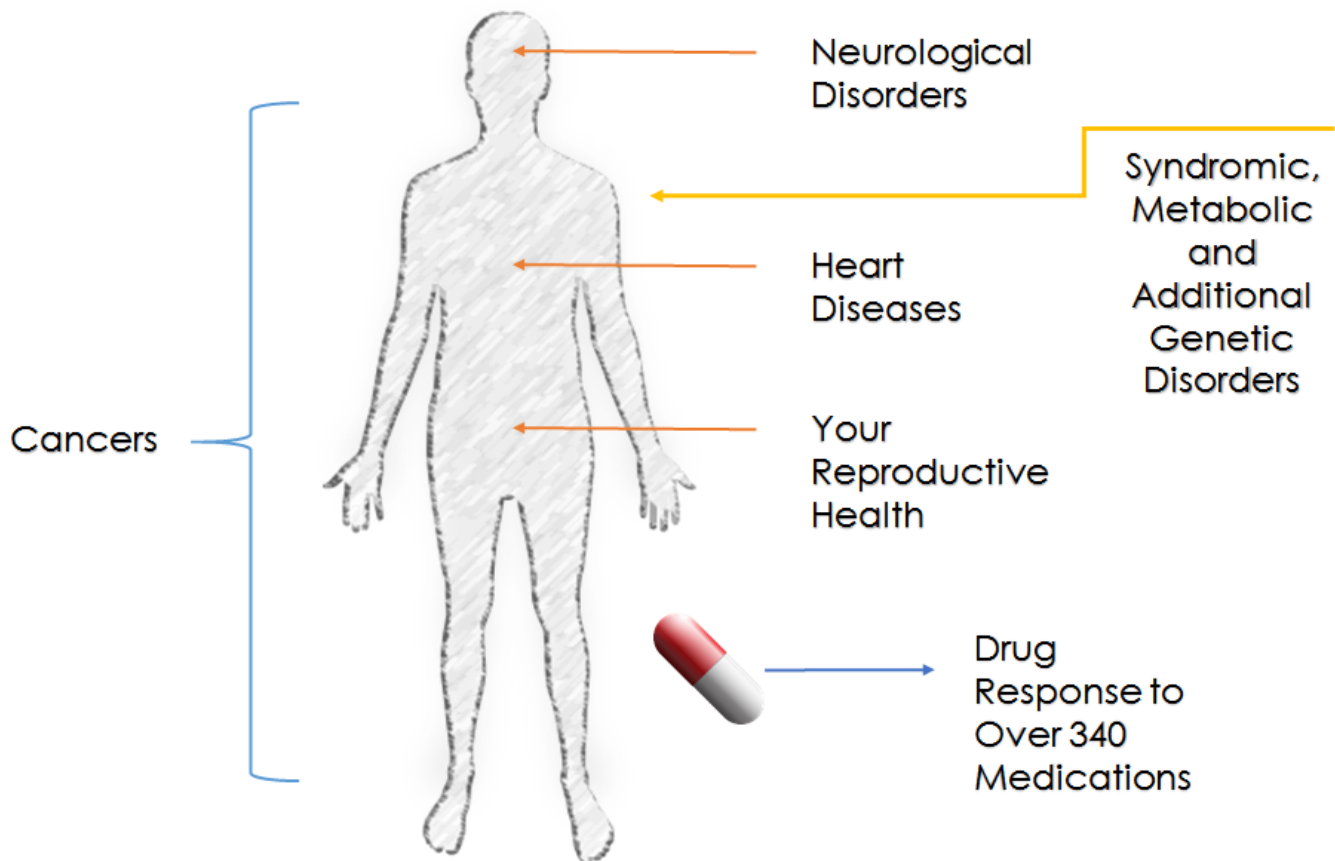
For more information, please visit <https://www.consultagene.org>

Physician Consultation - Peer-to-Peer Discussions

Rainbow Genomics also delivers two levels of support for ordering physicians to enhance their ability to provide the best care to their patients. Baylor Genetics' certified genetic counselors will provide email-based consultation to physicians. For clinicians who desire in-depth discussions of a patient's case, BCM Consultagene program provides a peer-to-peer consultation, an one-hour, video-conferencing delivered directly by Baylor's physicians. The ordering clinician, their collaborators and associated health care providers are all welcome to participate.

NOTE: The genetic counseling session focuses on your health, your reproductive health and symptom-associated diagnostic reports, and does not include counseling on pharmacogenomics results.

i Summary: We Test The Following Conditions

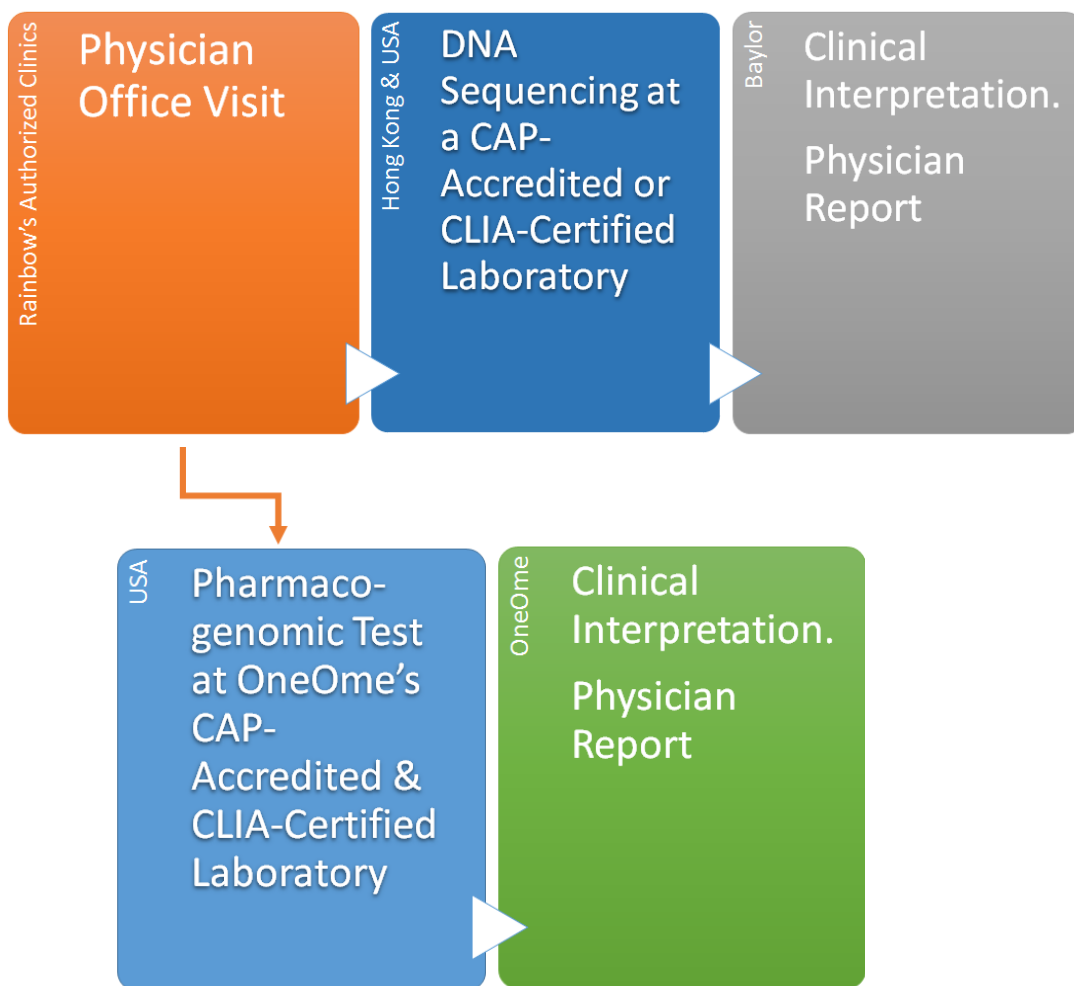


How It Works

The process starts with a physician office visit at a Rainbow-authorized clinic. The clinician will order the test for the patient. Your DNA sample will be sequenced at a CAP-accredited or CLIA-certified laboratory. Data will be analyzed and clinically interpreted under ACMG guidelines by Baylor Genetics, and a physician report will be issued by a Baylor Genetics board-certified medical director.

During the office visit, your physician will also collect a small amount of your saliva for the Oneome RightMed test. The sample will be sent to Oneome's CAP-accredited and CLIA-certified clinical testing laboratory. Oneome clinical team will perform the testing, analysis and issue a physician report.

- ▶ Patient data privacy – Rainbow follows the US Health Insurance Portability and Accountability Act (HIPAA) privacy rules, established to protect the confidentiality of patients' individually identifiable health information.



Specific for Asians

Rainbow Genomics also partners with the genome medicine centers at Saitama and Juntendo Medical Universities, Japan, to provide double clinical interpretation for Asian patients including Chinese and Japanese. Specifically, test results with unusual Asian genetic variations may be further analyzed by their bioinformatics and clinical teams to assure highly-accurate test report is delivered for every patient.

Is the Rainbow Adult Screening Exome Test Right for You?

Even if you have genetic mutations including pathogenic or likely-pathogenic variants, or such mutation exists in your family, it does not necessarily mean that you will develop genetic disorders. Counseling by a certified genetic counselor is critical for you to understand the implications of carrying certain genetic variants. The Rainbow Adult Screening Exome Sequencing test may be right for you if -

- ▶ You are healthy and would like to understand your future risk of developing genetic disorders including hereditary cancers and heart diseases.
- ▶ You are planning to have children and would like to understand your risk of passing on a genetic disorder to your children
- ▶ You would like to understand your drug response to over 340 medications

This test may not be right for you if -

- ▶ You already have severe symptoms and you would like to determine the genetic cause. For example, you have already been diagnosed with cancer. You and your physician would like to determine the genetic etiology of the cancer, that is, if the cancer is familial in nature (a hereditary form of cancer). In this case, you should consider ordering the Rainbow High-Risk Cancer test.
- ▶ You and your physician are looking for an exhaustive diagnostic genetic test. For example, if your child is suffering from muscular dystrophy symptoms and your physician would like to determine a genetic cause. You should consider ordering the Rainbow Pediatric Care test which will analyze the entire 22,000 genes of your child's exome to determine causative mutations, using pathogenic and likely-pathogenic variants, as well as variants of uncertain clinical significance.

About Baylor Genetics

BAYLOR GENETICS

Baylor Genetics has been helping healthcare providers solve the most complex cases for over 39 years and we are proud to be affiliated with the #1 NIH-funded genetics program at the Baylor College of Medicine.

By bridging academic and operational excellence, Baylor Genetics offers the medical community a vast testing menu, access to experts, and the confidence to provide patients with answers. We deliver the most thorough interpretations, helping healthcare providers solve the most complex cases. Baylor Genetics is located in Houston's Texas Medical Center with over 200 employees, over 3,000 tests available to clients in all 50 states and in 16 countries. Our lab is well-equipped with cutting-edge diagnostic equipment, allowing us to efficiently generate the most accurate clinical genetic data. Through rigorous quality assurance, daily and monthly conferences, and close relationships with clinical partners, Baylor Genetics continuously improves diagnostic precision.

About OneOme



OneOme was established by Invenshure and Mayo Clinic to provide a comprehensive, cost-effective pharmacogenomic solution integrated into patients' everyday clinical care. OneOme's key product offering is the RightMed® pharmacogenomic test, a physician-ordered genetic test that predicts how a patient's DNA and current prescriptions may affect their response to medications. The analysis is provided to the physician in the form of static and interactive reports that identifies which prescription drugs are — or aren't — likely to work. This information can help providers make better prescription decisions, protect patients from adverse drug reactions and drug ineffectiveness, and reduce healthcare costs.

Our mission is to deliver the most cost-effective, comprehensive, clinically actionable pharmacogenomic (PGx) testing and tools for all providers and patients worldwide.

About Consultagene



What is Consultagene?

A multimedia educational, genetic counseling and genetic services resource. The online experience includes:

- ▶ Educational videos
- ▶ Pamphlets and web-based resources
- ▶ Convenient client/patient scheduling
- ▶ User-friendly pedigree and risk assessment tools
- ▶ Access to tele-genetic counseling services

Who is Consultagene?

As a product of the Department of Molecular and Human Genetics at Baylor College of Medicine in collaboration with Baylor Genetics, Consultagene leverages the intellectual capital of the department's faculty, 180 members strong, and healthcare providers. This group includes the following:

- ▶ Over 30 board-certified genetic counselors
- ▶ 25 clinical & medical biochemical geneticists with expertise in adult, prenatal, and pediatric genetics, neurogenetics, cardiovascular, cancer and metabolic genetics, skeletal dysplasias, and connective tissue and mitochondrial disorders
- ▶ Over 25 board-certified diagnostic laboratory directors

Available Services -

Education

Access educational videos, pamphlets, and web-based resources that are personally selected by experts to fit your situation and your genetic health concerns.

Genetic Counseling

In-depth counseling with one of our certified genetic counselors through our secure, self-scheduled portal to answer your genetic health questions and to connect you with the next steps.

Family History

Start mapping your family history to complete the story of your genetics and understand its relevance to your family health concerns.

Genetic Testing

We are partnered with state-of-the-art genetic testing services to provide you and your healthcare team access to the appropriate tests to answer your questions.

Examples of Heart Diseases, Syndromic and Neurological Disorders Screened

 Heart Diseases

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| Hypertrophic cardiomyopathy (HCM) |
| Pulmonary Arterial Hypertension |
| Catecholaminergic polymorphic ventricular tachycardia (CPVT) |
| Long QT syndrome (LQTS) |
| Short QT syndrome (SQTS) |
| Arrhythmogenic right ventricular cardiomyopathy (ARVC) |
| Dilated cardiomyopathy (DCM) |
| Thoracic Aortic Aneurysm and Dissection and Related Disorders |
| Sudden Cardiac Arrest (SCA) |
| Hereditary Hemorrhagic Telangiectasia (HHT) |
| Familial Hypercholesterolemia , & genetic forms of high blood pressure and cholesterol |

 Syndromic Disorders

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| Duchenne Muscular Dystrophy |
| Limb-Girdle Muscular Dystrophy |
| Congenital Muscular Dystrophy |
| Neuromuscular Disease |
| Noonan Syndrome |
| Costello Syndrome |
| Cardiofaciocutaneous Syndrome |
| Multiple Lentiginos Syndrome |
| Neurofibromatosis 1 |
| Suspected RAS pathway syndrome |

 Neurological Disorders

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| Early-onset Alzheimer's disease |
| Parkinson's disease |
| Dementia |
| Frontotemporal dementia |
| Inherited prion diseases |
| Amyotrophic lateral sclerosis |

 Common Cardiovascular Conditions

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| Heart Attack |
| Ischemic Stroke |

Examples of Cancer Types



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|----------|---------|----------------|-------------|-------------------------------------|
| Breast | Ovarian | Colorectal | Lung | Prostate |
| Uterine | Gastric | Pancreatic | Thyroid | Central & Peripheral Nervous System |
| Melanoma | Renal | Urinary Track | Paranglioma | Pheochromocytoma |
| Brain | Sarcoma | Neuroendocrine | Leukemia | Myelodysplastic Syndrome |

Examples of Specific Cancers

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| Ataxia-telangiectasia (A-T) | Lynch syndrome – also known as hereditary non-polyposis colorectal cancer (HNPCC) |
| Bloom syndrome | Melanoma-pancreatic cancer syndrome (M-PCS) |
| Carney complex | Multiple endocrine neoplasia type 1 (MEN1) |
| Costello syndrome | Multiple endocrine neoplasia type 2 (MEN2) |
| Cowden and Cowden-like syndrome | MUTYH-associated polyposis (MAP) |
| DICER1 syndrome | Neurofibromatosis type 1 (NF1) |
| Dyskeratosis congenita | Neurofibromatosis type 2 (NF2) |
| Familial acute myeloid leukemia (AML) syndrome | Nevoid basal cell carcinoma – also known as Gorlin syndrome |
| Familial adenomatous polyposis (FAP) | Nijmegen breakage syndrome (NBS) |
| Familial gastrointestinal stromal tumors (GIST) | Oligodontia-colorectal cancer syndrome |
| Familial neuroblastoma | Hereditary paraganglioma-pheochromocytoma |
| Familial platelet disorder with propensity to myeloid malignancy (FPD/AML) | Perlman syndrome |
| GATA2 deficiency | Peutz-Jeghers syndrome (PJS) |
| Hereditary breast and ovarian cancer syndrome (HBOC) | Retinoblastoma |
| Hereditary diffuse gastric cancer (HGDC) | Rhabdoid tumor predisposition syndrome (RTPS) |
| Hereditary Lung Cancer | Simpson-Golabi-Behmel syndrome (SGBS) |
| Hereditary papillary renal cell carcinoma | Tuberous sclerosis complex (TSC) |
| Hereditary paraganglioma-pheochromocytoma syndrome (PGL/PCC) | von Hippel-Lindau syndrome (VHL) |
| Juvenile polyposis syndrome (JPS) | Werner syndrome |
| Li-Fraumeni syndrome (LFS) | Wilms tumor-related conditions |



Your Reproductive Health

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| 17-Beta-Hydroxysteroid Dehydrogenase Type III Deficiency |
| 3-Hydroxy-3-Methylglutaryl CoA (HMG-CoA) lyase Deficiency |
| 3-Methylcrotonyl-CoA Carboxylase Deficiency, MCCC1 Related |
| 3-Methylcrotonyl-CoA Carboxylase Deficiency, MCCC2 Related |
| 3-phosphoglycerate dehydrogenase deficiency (PHGDH) |
| 46, XY Disorder of Sex Development |
| 6-Pyruvoyl-Tetrahydropterin Synthase Deficiency |
| Abetalipoproteinaemia (MTTP) |
| Adenosine Deaminase Deficiency (ADA) |
| Adenylosuccinate lyase deficiency |
| Adrenal Hypoplasia Congenita, X-Linked |
| Adrenoleukodystrophy (ABCD1) |
| Agammaglobulinemia, X-linked 1 (BTK) |
| Agenesis of the Corpus Callosum with Peripheral Neuropathy (Andermann Syndrome) |
| Alpha-1 Antitrypsin Deficiency |
| Alpha-1-Antitrypsin Deficiency (SERPINA1) |
| Alpha-Mannosidosis |
| Alpha-Mannosidosis (MAN2B1) |
| Alpha-thalassemia X-linked intellectual disability (ATRX) |
| Alport syndrome (COL4A3) |
| Androgen Insensitivity Syndrome |
| Angelman syndrome (UBE3A) |
| Angelman-like syndrome |
| Antithrombin III Deficiency |
| Argininosuccinate Lyase Deficiency (ASL) |
| ARSACS (SACS) |
| Arthrogryposis, mental retardation and seizures (SLC35A3) |
| Aspartylglucosaminuria (AGA) |
| Ataxia with Vitamin E Deficiency (TTPA) |
| Ataxia-Telangiectasia (ATM) |
| Atelosteogenesis Type 2 (SLC26A2) |

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| Atypical Rett syndrome |
| Autosomal dominant childhood onset epilepsy |
| Autosomal dominant lateral temporal lobe epilepsy |
| Autosomal dominant mental retardation |
| Autosomal Recessive Congenital Ichthyosis, TGM1 Related (TGM1) |
| Autosomal Recessive Deafness 1A |
| Autosomal Recessive Deafness 23 |
| Autosomal Recessive Deafness 2B |
| Autosomal Recessive Deafness 4, with Enlarged Vestibular Aqueduct |
| Autosomal Recessive Polycystic Kidney Disease (PKHD1) |
| Autosomal Recessive Spastic Ataxia of Charlevoix-Saguenay |
| Bardet-Biedl syndrome (BBS2) |
| Bardet-Biedl Syndrome: BBS1 Related (BBS1) |
| Bardet-Biedl Syndrome: BBS10 Related (BBS10) |
| Benign familial infantile seizures |
| Benign familial neonatal seizures |
| BH4-Deficient Hyperphenylalaninemia A (PTS) |
| Biotinidase Deficiency (BTD) |
| Bjornstad Syndrome |
| Bloom Syndrome (BLM) |
| Canavan Disease (ASPA) |
| Carnitine deficiency, systemic primary (SLC22A5) |
| Carnitine Palmitoyltransferase IA Deficiency (CPT1A) |
| Carnitine Palmitoyltransferase II Deficiency (CPT2) |
| Cartilage-Hair Hypoplasia (RMRP) |
| Centronuclear Myopathy, X-Linked |
| cerebral creatine deficiency syndrome |
| cerebral folate deficiency |
| Cerebrotendinous Xanthomatosis (CYP27A1) |
| Childhood Absence Epilepsy |
| Chronic Granulomatous Disease |
| Chronic granulomatous disease, X-linked (CYBB) |

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| Citrin Deficiency (SLC25A13) |
| Citrullinemia Type I (ASS1) |
| CLN2 disease |
| COACH Syndrome, CC2D2A-Related |
| COACH Syndrome, TMEM67-Related |
| Combined Pituitary Hormone Deficiency, PROP1-Related |
| Congenital Adrenal Hyperplasia,11-Beta-Hydroxylase Deficiency |
| Congenital Amegakaryocytic Thrombocytopenia (MPL) |
| congenital disorder of glycosylation type 1s |
| Congenital Disorder of Glycosylation: Type Ia (PMM2) |
| Congenital Disorder of Glycosylation: Type Ib (MPI) |
| Congenital Myasthenic Syndrome, CHRNE-Related (CHRNE) |
| Congenital Myasthenic Syndrome, DOK7-Related (DOK7) |
| Congenital Myasthenic Syndrome, RAPSN-Related (RAPSN) |
| congenital Rett syndrome |
| Congenital Myasthenic Syndrome, CHAT-Related (CHAT) |
| cortical dysplasia-focal epilepsy syndrome (CDFES) |
| Crigler-Najjar Syndrome (UGT1A1) |
| Cystic Fibrosis (CFTR) |
| Cystinosis (CTNS) |
| D-Bifunctional Protein Deficiency (HSD17B4) |
| Dihydrolipoamide Dehydrogenase Deficiency (DLD) |
| Dihydropyrimidine Dehydrogenase Deficiency (DPYD) |
| Dravet syndrome |
| Duchenne/Becker Muscular Dystrophy (DMD) |
| Dyskeratosis congenita (RTEL1) |
| Dystrophinopathies |
| Early infantile epileptic encephalopathy (EIEE) |
| Ehlers-Danlos syndrome VIIc (ADAMTS2) |
| Ellis-van Creveld Syndrome |
| Encephalopathy, MECP2-Related Severe Neonatal |
| Ethylmalonic Encephalopathy (ETHE1) |
| Fabry Disease |
| Factor V Leiden Thrombophilia |

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| Factor XI Deficiency |
| Familial Dysautonomia (IKBKAP) |
| Familial Hyperinsulinism (ABCC8) |
| Familial Mediterranean Fever |
| familial paroxysmal kinesigenic dyskinesia |
| Fanconi Anaemia (FANCC) |
| Fanconi Anemia, Complementation Group A |
| Fanconi Anemia, Complementation Group C |
| Fukuyama Congenital Muscular Dystrophy (FKTN) |
| Fumarate Hydratase Deficiency (FH) |
| Galactosemia |
| Galactosemia (GALT) |
| Gaucher Disease (GBA) |
| Generalized epilepsy with febrile seizures plus (GEFS+) |
| Gitelman Syndrome |
| Glass syndrome |
| Glucose-6-Phosphate Dehydrogenase Deficiency (G6PD) |
| GLUT1 deficiency syndrome |
| Glutaric Acidemia I (GCDH) |
| Glutaricacidemia Type I |
| Glycine encephalopathy (AMT) |
| Glycine encephalopathy (GLDC) |
| Glycogen Storage Disease Type Ia |
| Glycogen Storage Disease Type Ib |
| Glycogen Storage Disease Type II |
| Glycogen Storage Disease Type II (Pompe Disease) (GAA) |
| Glycogen Storage Disease Type III (AGL) |
| Glycogen Storage Disease: Type Ia (G6PC) |
| Glycogen Storage Disease: Type Ib (SLC37A4) |
| GM1-gangliosidosis (GLB1) |
| GRACILE syndrome (BCS1L) |
| Hemophagocytic Lymphohistiocytosis, Familial 2 |
| Hemophagocytic Lymphohistiocytosis, Familial 3 |

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| Hemophagocytic Lymphohistiocytosis, Familial 4 |
| Hemophagocytic Lymphohistiocytosis, Familial 5 |
| Hemophilia A |
| Hemophilia B |
| Hereditary Fructose Intolerance (ALDOB) |
| Hereditary Motor and Sensory Neuropathy with Agenesis of the Corpus Callosum (SLC12A6) |
| Herlitz Junctional Epidermolysis Bullosa, LAMA3-related |
| Herlitz Junctional Epidermolysis Bullosa, LAMB3-related |
| Herlitz Junctional Epidermolysis Bullosa, LAMC2-related |
| Herlitz Junctional Epidermolysis Bullosa: LAMA3 Related (LAMA3) |
| Herlitz Junctional Epidermolysis Bullosa: LAMB3 Related (LAMB3) |
| Herlitz Junctional Epidermolysis Bullosa: LAMC2 Related (LAMC2) |
| Hermansky-Pudlak Syndrome 1 |
| Hermansky-Pudlak Syndrome 3 |
| Hermansky-Pudlak Syndrome: HPS3 Related (HPS3) |
| Hexosaminidase A Deficiency (Including Tay-Sachs Disease) |
| HFE-associated Hereditary Hemochromatosis |
| Homocystinuria Caused by Cystathione Beta-Synthase Deficiency (CBS) |
| Homocystinuria Caused by Cystathionine Beta-synthase Deficiency |
| Hyperornithinemia-Hyperammonemia-Homocitrullinuria (HHH) |
| Hyperornithinemia-Hyperammonemia-Homocitrullinuria Syndrome |
| hyperphosphatasia with intellectual disability syndrome |
| Hypohidrotic Ectodermal Dysplasia, EDAR-Related |
| Hypohidrotic Ectodermal Dysplasia, X-Linked |
| Hypophosphatasia (ALPL) |
| Hypophosphatasia, Autosomal Recessive |
| idiopathic generalized epilepsy |
| Inclusion Body Myopathy 2 (GNE) |
| Infantile neuroaxonal dystrophy 1 (PLA2G6) |
| intellectual disability |
| intractable childhood epilepsy with generalized tonic-clonic seizures |
| Isovaleric Acidemia (IVD) |
| Joubert Syndrome 2 |

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| Joubert Syndrome 3 |
| Joubert Syndrome 5 |
| Joubert Syndrome 6 |
| Joubert Syndrome 9 |
| Joubert Syndrome, TMEM216 Related (TMEM216) |
| juvenile myoclonic epilepsy |
| Juvenile Nephronophthisis (NPHP1) |
| Kleefstra syndrome |
| Kohlschütter-Tönz syndrome |
| Koolen-de Vries syndrome |
| Krabbe Disease (GALC) |
| Leber Congenital Amaurosis 10 |
| Leigh Syndrome: French-Canadian Type (LRPPRC) |
| Leukoencephalopathy with Vanishing White Matter, EIF2B5 Related (EIF2B5) |
| Limb-Girdle Muscular Dystrophy 2I |
| Limb-Girdle Muscular Dystrophy, Type 2A (CAPN3) |
| Limb-Girdle Muscular Dystrophy, Type 2C (SGCG) |
| Limb-Girdle Muscular Dystrophy, Type 2D (SGCA) |
| Lipoamide Dehydrogenase Deficiency |
| Limb-Girdle Muscular Dystrophy, Type 2E (SGCB) |
| Long Chain 3-Hydroxyacyl-CoA Dehydrogenase Deficiency |
| Lowe syndrome (OCRL) |
| Lysinuric Protein Intolerance (SLC7A7) |
| Maple Syrup Urine Disease Type 1A |
| Maple Syrup Urine Disease Type 1B |
| Maple Syrup Urine Disease Type 3 |
| Maple Syrup Urine Disease Type 1B |
| Maple syrup urine disease, type II (DBT) |
| Maple Syrup Urine Disease: Type 1A (BCKDHA) |
| Maple Syrup Urine Disease: Type 1B (BCKDHB) |
| Meckel Syndrome 2 |
| Meckel Syndrome 3 |
| Meckel Syndrome 4 |

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| MECP2 duplication syndrome (MECP2) | Neuronal ceroid lipofuscinosis |
| Medium Chain Acyl-CoA Dehydrogenase Deficiency (ACADM) | Neuronal Ceroid Lipofuscinosis, CLN3-Related (CLN3) |
| MEF2C-related intellectual disability | Neuronal Ceroid Lipofuscinosis, CLN5-Related (CLN5) |
| Megalencephalic Leukoencephalopathy with Subcortical Cysts, MLC1 Related (MLC1) | Neuronal Ceroid Lipofuscinosis, CLN6-Related (CLN6) |
| Megalencephalic Leukoencephalopathy with Subcortical Cysts | Neuronal Ceroid Lipofuscinosis, CLN8-Related (CLN8) |
| Metachromatic Leukodystrophy (ARSA) | Neuronal Ceroid Lipofuscinosis, PPT1-Related (PPT1) |
| Methylmalonic Acidemia, MCEE-Related | Neuronal Ceroid Lipofuscinosis, TPP1-Related (TPP1) |
| Methylmalonic Acidemia, MMAA-Related | Neuronal Ceroid-Lipofuscinoses 1 |
| Methylmalonic Acidemia, MMAB-Related | Neuronal Ceroid-Lipofuscinoses 2 |
| Methylmalonic Acidemia, MUT-Related | Neuronal Ceroid-Lipofuscinoses 3 |
| Methylmalonic Aciduria and Homocystinuria cblC Type | Neuronal Ceroid-Lipofuscinoses 4A/6 |
| Methylmalonic Aciduria and Homocystinuria cblD Type | Neuronal Ceroid-Lipofuscinoses 5 |
| Methylmalonic Aciduria and Homocystinuria: Type cblC (MMACHC) | Neuronal Ceroid-Lipofuscinoses 7 |
| microcephaly, epilepsy, and diabetes syndrome (MEDS) | NGLY1-congenital disorder of glycosylation |
| Mild Hyperhomocysteinemia Caused by MTHFR Deficiency | Niemann-Pick Disease Type A |
| Mitochondrial Complex III Deficiency Nuclear Type 1 | Niemann-Pick Disease Type B |
| Mowat-Wilson syndrome | Niemann-Pick Disease Type C1 |
| MTHFR Deficiency | Niemann-Pick Disease Type C2 |
| Mucopolidosis II (GNPTAB) | Niemann-Pick Disease, Type A (SMPD1) |
| Mucopolidosis IV (MCOLN1) | Niemann-Pick Disease, Type C (NPC1) |
| Mucopolysaccharidosis Type I (IDUA) | Niemann-Pick Disease, SMPD1-associated |
| Mucopolysaccharidosis Type IIIB (Sanfilippo Syndrome) | Nijmegen Breakage Syndrome (NBN) |
| Mucopolysaccharidosis, Type IIIA (Sanfilippo Syndrome A) (SGSH) | Nonsyndromic Hearing Loss and Deafness, DFNB1: GJB2 related (GJB2) |
| multiple congenital anomalies-hypotonia-seizures syndrome 1 (MCAHS1) | Nonsyndromic Hearing Loss and Deafness: DFNB1: GJB6 related (GJB6) |
| Multiple sulphatase deficiency (SUMF1) | Northern Epilepsy |
| Muscle-Eye-Brain Disease (POMGNT1) | Ocular Albinism, X-Linked |
| Nemaline Myopathy 2 | Oculocutaneous Albinism Type 1 |
| Nemaline Myopathy: NEB Related (NEB) | Oculocutaneous Albinism Type 2 |
| neonatal-lethal rigidity and multifocal seizure syndrome (RFMSL) | Oculocutaneous Albinism Type 3 |
| Nephronophthisis 11 | Oculocutaneous Albinism Type 4 |
| Nephrotic Syndrome, NPHS1-Related | Oculocutaneous Albinism Type 7 |
| Nephrotic Syndrome: Type 1 (NPHS1) | Ohtahara syndrome |
| Nephrotic Syndrome: Type2 (NPHS2) | Ornithine transcarbamylase deficiency (OTC) |

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| PCDH15-related Disorders |
| Pendred Syndrome (SLC26A4) |
| PEX1-related Zellweger Syndrome Spectrum |
| Phelan-McDermid syndrome |
| Phenylalanine Hydroxylase Deficiency (PAH) |
| Phenylketonuria |
| Pitt-Hopkins syndrome |
| PKHD1-related Autosomal Recessive Polycystic Kidney Disease |
| POLG-Related Disorders (POLG) |
| Polyglandular Autoimmune Syndrome Type 1 |
| Pompe Disease |
| PPT1-related Neuronal Ceroid Lipofuscinosis |
| Primary Carnitine Deficiency |
| Primary Hyperoxaluria: Type 1 (AGXT) |
| Primary Hyperoxaluria: Type 2 (GRHPR) |
| Primary Congenital Glaucoma (CYP1B1) |
| Progressive Familial Intrahepatic Cholestasis Type 2 |
| Progressive microcephaly with seizures and cerebral and cerebellar atrophy |
| Progressive myoclonic epilepsy |
| PROP1-Related Combined Pituitary Hormone Deficiency (PROP1) |
| Propionic Acidemia, PCCA Related (PCCA) |
| Propionic Acidemia, PCCB Related (PCCB) |
| Protein C Deficiency |
| Prothrombin Thrombophilia |
| Pseudocholinesterase Deficiency |
| Pycnodysostosis (CTSK) |
| pyridoxal 5'-phosphate dependent epilepsy |
| pyridoxine-dependent epilepsy |
| Pyruvate Carboxylase Deficiency (PC) |
| Pyruvate Dehydrogenase Complex Deficiency |
| Recessive Multiple Epiphyseal Dysplasia |
| Retinitis pigmentosa, autosomal recessive (DHDDS) |
| Rett syndrome |

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| Rhizomelic Chondrodysplasia Punctata: Type 1 (PEX7) |
| Salla Disease (SLC17A5) |
| Sandhoff Disease (HEXB) |
| SCN8A-related early infantile epileptic encephalopathy |
| Segawa Syndrome |
| Severe Combined Immunodeficiency, Athabascan type |
| Severe combined immunodeficiency, X-linked (IL2RG) |
| Sjogren-Larsson Syndrome (ALDH3A2) |
| Smith-Lemli-Opitz Syndrome (DHCR7) |
| Steroid-resistant Nephrotic Syndrome |
| succinic semialdehyde dehydrogenase (SSADH) deficiency |
| sudden unexpected death in epilepsy (SUDEP) |
| Sulfate Transporter-related Osteochondrodysplasia |
| Tay-Sachs Disease (HEXA) |
| TPP1-related Neuronal Ceroid Lipofuscinosis |
| tuberous sclerosis complex (TSC) |
| Tyrosine Hydroxylase Deficiency (TH) |
| Tyrosinemia: Type I (FAH) |
| Usher Syndrome Type 3 |
| Usher Syndrome: Type IB (MYO7A) |
| Usher Syndrome: Type IC (USH1C) |
| Usher Syndrome: Type ID (CDH23) |
| Usher Syndrome: Type IF (PCDH15) |
| Usher Syndrome: Type IIA (USH2A) |
| Usher Syndrome: Type IIIA (CLRN1) |
| Very Long-Chain Acyl-CoA Dehydrogenase Deficiency |
| West syndrome |
| Wilson Disease (ATP7B) |
| Wiskott-Aldrich syndrome (WAS) |
| X-linked Juvenile Retinoschisis |
| Zellweger Spectrum Disorders: PEX1 Related (PEX1) |
| Zellweger Syndrome (PEX2) |



Drug Response - OneOme RightMed Test Drug List

RightMed® pharmacogenomic drug list

The OneOme RightMed PGx test is a provider-ordered comprehensive pharmacogenomic test of 22-genes that covers more than 340 prescription medications. These medications are used for treating common medical indications:

Acute migraine, Allergies, Alzheimer's disease, Anticoagulation, Antiplatelet therapy, Arrhythmias, Bacterial infection, Benign prostatic hyperplasia, Cancer, Chronic hepatitis C, Depression/anxiety, Diabetes, Fungal infection, Gastroesophageal reflux disease, Gout, HIV infection, Hypercholesterolemia, Hypertension, Immunosuppression, Migraine prophylaxis, Overactive bladder, Pain, Parkinson's disease, Psychosis, Rheumatoid arthritis, Seizure, Sleep disorders, Smoking cessation

GENOTYPE-DERIVED DRUGS

The following tables list drugs that will be binned according to an individual patient's genotype and the drug interaction determined by the RightMed PGx test. Binning consists of major, moderate, and minimal gene-drug interactions.

| | | | | |
|--|---|--|--|--|
| ALLERGY Loratadine | Lidocaine Lomitapide Losartan Lovastatin Metoprolol Nifedipine Nisoldipine Pravastatin Procainamide Propafenone Propranolol Quinidine Ranolazine Simvastatin Timolol Verapamil | INFECTIOUS DISEASE Atazanavir Atovaquone/Proguanil* Clarithromycin Darunavir Delavirdine Efavirenz Erythromycin Fosamprenavir** Indinavir Isavuconazole** Itraconazole Ivermectin Ketoconazole Maraviroc Mefloquine Nelfinavir Nevirapine Peginterferon alfa-2a-containing regimens Peginterferon alfa-2b-containing regimens Quinidine Quinine Ritonavir Saquinavir Simeprevir Telithromycin Terbinafine Tipranavir Voriconazole | Crizotinib Dasatinib Docetaxel Enzalutamide Erlotinib Etoposide Everolimus Exemestane Fluorouracil** Gefitinib Ifosfamide* Imatinib Irinotecan Ixabepilone Lapatinib Mercaptopurine** Methotrexate Nilotinib Paclitaxel Pazopanib Ponatinib Regorafenib Ruxolitinib Sorafenib Sunitinib Tamoxifen* Temsilolimus Teniposide Thioguanine** Trabectedin Vemurafenib Vincristine Vinorelbine | Iloperidone Imipramine Levomilnacipran Lurasidone Mirtazapine Nefazodone Nortriptyline Olanzapine Paroxetine Perphenazine Pimozide Protriptyline Quetiapine Risperidone Sertraline Thioridazine Trazodone Trimipramine Venlafaxine Vilazodone Vortioxetine |
| ANALGESIC / ANESTHESIOLOGY Alfentanil Buprenorphine Carisoprodol Codeine* Cyclobenzaprine Fentanyl Hydrocodone Methadone Midazolam Oxycodone Tramadol* | DIETARY Caffeine | NEUROLOGY Brivaracetam Clobazam Dextromethorphan/ Quinidine Donepezil Eletriptan Ethosuximide Frovatriptan Nicotine Rasagiline Tetrabenazine Zonisamide | PSYCHIATRY Alprazolam Amitriptyline Aripiprazole Asenapine Atomoxetine Brexipiprazole Bupropion Buspirone Citalopram Clomipramine Clozapine Desipramine Diazepam Doxepin Duloxetine Escitalopram Flibanserin Fluoxetine Fluvoxamine Haloperidol | PULMONARY Dextromethorphan Indacaterol Salmeterol Sildenafil Tadalafil |
| ANTI-INFLAMMATORY Celecoxib Diclofenac Flurbiprofen Meloxicam Piroxicam | ENDOCRINOLOGY Chlorpropamide Ethinyl estradiol Glimepiride Glipizide Glyburide Nateglinide Tolbutamide | ONCOLOGY Axitinib Belinostat Bortezomib Bosutinib Brentuximab vedotin Cabazitaxel Capecitabine** | | RHEUMATOLOGY Cevimeline Colchicine Methotrexate Tofacitinib |
| ANTICOAGULANT / ANTIPLATELET Apixaban Cilostazol Clopidogrel* Ticagrelor Warfarin | GASTROENTEROLOGY Aprepitant Dexlansoprazole Dolasetron Esomeprazole Lansoprazole Omeprazole Ondansetron Pantoprazole Rabeprazole | | | SLEEP MEDICINE Armodafinil Eszopiclone Modafinil Ramelteon Triazolam Zolpidem |
| CARDIOVASCULAR Aliskiren Amiodarone Amlodipine Atorvastatin Azilsartan** Carvedilol Clonidine Diltiazem Disopyramide Dofetilide Dronedarone Eplerenone Felodipine Flecainide Fluvastatin Guanabenz Irbesartan Labetalol | GENETIC DISEASE Eliglustat Ivacaftor | | | UROLOGY Darifenacin Fesoterodine** Finasteride Oxybutynin Sildenafil Tadalafil Tamsulosin Tolterodine Vardenafil |

*CYP ACTIVATED PRODRUGS: These drugs must be metabolized by CYP enzymes into their pharmacologically active form.

**NON-CYP ACTIVATED PRODRUGS: These drugs are converted to their pharmacologically active form through processes independent of CYP involvement.

IMPACT OF METABOLIC STATUS ON DRUG ACTIVITY

| METABOLIC STATUS | PRODRUGS | ACTIVE DRUGS |
|-----------------------------------|--|--|
| Rapid and ultrarapid metabolizers | May cause side effects or toxicity | May lack efficacy |
| Normal metabolizers | Presumed normal level of drug activity | Presumed normal level of drug activity |
| Intermediate metabolizers | May have reduced efficacy | May cause side effects or toxicity |
| Poor metabolizers | May lack efficacy | May cause side effects or toxicity |

DRUGS WITH LIMITED GENETIC IMPACT

Pharmacogenomic testing is not relevant in informing a prescription decision for all medications. The genes tested on the RightMed pharmacogenomic test will not yield meaningful information for these medications because these medications have been shown to be unaffected by any known, clinically relevant genetic variants at this time.

For more information on these medications, see oneome.com/limited-pgx-drugs.

The following table lists drugs available in our online RightMed® Advisor, which includes information on their classification and drug-to-drug interactions.

| | | | |
|---|---|--|---|
| <p>ALLERGY Desloratadine Phenylephrine</p> | <p>Sotalol Spironolactone Telmisartan</p> | <p>HEMATOLOGY Darbepoetin alfa Decitabine Epoetin alfa</p> | <p>Bevacizumab Bleomycin Carboplatin Cetuximab Fulvestrant Ibritumomab Lenalidomide Leucovorin calcium Obinutuzumab Ofatumumab Oxaliplatin Panitumumab Pemetrexed Pertuzumab Rituximab Temozolomide Thalidomide Trastuzumab</p> |
| <p>ANALGESIC / ANESTHESIOLOGY Dexmedetomidine Hydromorphone Naloxone Naltrexone</p> | <p>ENDOCRINOLOGY Exenatide Ibandronate Insulin aspart Insulin aspart protamine/ Insulin aspart Insulin aspart/ Insulin degludec Insulin degludec Insulin detemir Insulin glargine Insulin glulisine Insulin lispro Insulin lispro protamine/ Insulin lispro Insulin NPH Insulin NPH/Insulin regular Insulin regular Insulin regular (oral inhalation) Levothyroxine Metformin Pamidronate Propylthiouracil Risedronate Vasopressin</p> | <p>IMMUNOSUPPRESSION Mycophenolate</p> | <p>INFECTIOUS DISEASE Atovaquone Cefdinir Ceftriaxone Fluconazole Flucytosine Levofloxacin Meropenem Moxifloxacin Nitrofurantoin Nystatin Piperacillin Posaconazole Ribavirin Sofosbuvir Sulfadiazine Vancomycin Zanamivir</p> |
| <p>ANTICOAGULANT /ANTI-PLATELET Dalteparin Enoxaparin Heparin Prasugrel Tirofiban</p> | <p>GASTROENTEROLOGY Adalimumab Certolizumab pegol Infliximab</p> | <p>NEUROLOGY Gabapentin Interferon beta-1a Interferon beta-1b Levetiracetam Memantine Pramipexole Pregabalin Rivastigmine Topiramate Vigabatrin</p> | <p>PSYCHIATRY Desvenlafaxine Lithium Milnacipran Paliperidone Varenicline</p> |
| <p>ANTIDOTE Sodium nitrite Succimer</p> | <p>GENETIC DISEASE Sapropterin Sodium phenylbutyrate Velaglucerase alfa</p> | <p>ONCOLOGY Afatinib Alemtuzumab Asparaginase</p> | <p>PULMONARY Albuterol Levalbuterol Montelukast Tiotropium</p> |
| <p>CARDIOVASCULAR Alirocumab Atenolol Benazepril Chlorthalidone Colesevelam Digoxin Enalapril Ezetimibe Fenofibric acid Fosinopril Furosemide Gemfibrozil Hydrochlorothiazide Lisinopril Nitroglycerin Perindopril Ramipril Rosuvastatin</p> | | | <p>RHEUMATOLOGY Adalimumab Belimumab Certolizumab pegol Etanercept Infliximab Probenecid</p> |
| | | | <p>SLEEP MEDICINE Temazepam Zaleplon</p> |

Limitations of the Test

- ▶ This test cannot detect common pathogenic variants for Fragile X, Spinal Muscular Atrophy (SMN) and Thalassaemias (HBA).
- ▶ This test cannot reliably detect CNVs, variants in repetitive regions and pseudogene regions.
- ▶ Comprehensive analysis of NEB, GJB6, NPHP1, MECP2 and CLN3 genes may require CNV analysis. This test may not reliably detect all the CNVs in these genes.
- ▶ This test may not provide detection of certain genes or portions of certain genes due to local sequence characteristics or the presence of closely related pseudogenes. Gross deletions or duplications, changes from repetitive sequences may not be accurately identified by this methodology.
- ▶ This test is designed to detect single nucleotide variants (SNVs) and small deletions and insertions less than 10 base pairs (<10 bp). It has not been validated to detect exon-level deletions and duplications longer than 10 base pairs (>10 bp).
- ▶ For conditions associated with "Your Health", the test reports only mutations associated with pathogenic and likely-pathogenic variants. Variants of uncertain clinical significance (VUS) will not be reported
- ▶ For conditions associated with "Your Reproductive Health", the test reports only recessive disorder-related mutations associated with pathogenic and likely-pathogenic variants. Variants of uncertain clinical significance (VUS) will not be reported
- ▶ For reporting associated with your symptoms or family history, findings supported by pathogenic variants, likely-pathogenic mutations, and variants of uncertain clinical significance (VUS) will be reported.
- ▶ For clinical limitation of the OneOme RightMed pharmacogenomic test, please see www.oneome.com/coverage

About Rainbow Genomics

Rainbow Genomics is a Hong Kong and US-based genomics health company providing genetic tests, personalized risk assessment and health management programs for Asian patients. Our diagnostic tests, clinical interpretation and physician reporting are developed specifically for Asian patients based on their specific genetics. After we have delivered a physician report to each patient, physician consultation is provided, to assure that doctors and health-care professionals can take full advantage of our clinically-actionable reports to provide optimal care for their patients.

Contact Us

For more information or to order our tests, please email us at info@rainbowgenomics.com. We will provide a list of authorized clinics and hospitals where you can arrange to visit a physician for a consultation.



[Info@rainbowgenomics.com](mailto:info@rainbowgenomics.com)



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