

Patient Cologuard[®] Order Letter From GI

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Dear [Patient Name]:

Our records indicate that you have missed or declined your scheduled routine colonoscopy.

You might not realize that colon cancer is the second leading cause of cancer deaths in the United States.¹ The good news is that there is much we can do, because with regular screening, it can be caught in the early stages when it is highly treatable.^{1-3*}

I have assessed you as average risk for colon cancer. Screening is important for early detection, so I have ordered Cologuard[®]—an easy-to-use, noninvasive colon cancer screening test—for you.⁴

Cologuard can be done right at home. No special preparation, diet, or change in medication is needed, and no time off is required. A single stool sample is collected and sent to Exact Sciences Laboratories via prepaid UPS[®] pickup without you ever leaving your home.⁴ I will then contact you to discuss your results after I receive them.

Cologuard is available with no co-pay/coinsurance or deductible under most insurance plans. It is always a good idea to check with your insurer to confirm how Cologuard is covered for you.

If you have any questions or want to learn more about Cologuard, feel free to contact me. You can also learn more about Cologuard at www.cologuard.com.

[Sign off]

[GI contact information]

*Based on 5-year survival³

Indications and Important Risk Information

Cologuard is intended to screen adults 45 years of age and older who are at average risk for colorectal cancer by detecting certain DNA markers and blood in the stool. Do not use if you have had adenomas, have inflammatory bowel disease and certain hereditary syndromes, or a personal or family history of colorectal cancer. Cologuard is not a replacement for colonoscopy in high risk patients. Cologuard performance in adults ages 45-49 is estimated based on a large clinical study of patients 50 and older. Cologuard performance in repeat testing has not been evaluated.

The Cologuard test result should be interpreted with caution. A positive test result does not confirm the presence of cancer. Patients with a positive test result should be referred for colonoscopy. A negative test result does not confirm the absence of cancer. Patients with a negative test result should discuss with their doctor when they need to be tested again. False positives and false negative results can occur. In a clinical study, 13% of people without cancer received a positive result (false positive) and 8% of people with cancer received a negative result (false negative). Rx only.

References: 1. Siegel RL, Miller KD, Fuchs HE, Jemal A. Cancer statistics, 2022. *CA Cancer J Clin.* 2022;72(1):7-33. 2. American Cancer Society survival rates for colorectal cancer. American Cancer Society. Accessed August 17, 2022. <https://www.cancer.org/cancer/colon-rectal-cancer/detection-diagnosis-staging/survival-rates.html>. 3. American Cancer Society. *Cancer Facts & Figures*. Atlanta, GA: American Cancer Society; 2022. 4. Cologuard® Clinician Brochure. Madison, WI: Exact Sciences Corporation.

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