

# Get a **FirstLook** at lung cancer



Lung cancer can be found early, but **>95% of eligible adults** aren't getting the nationally recommended LDCT screening.<sup>1</sup>

Whether it's due to inaccessible screening methods or lack of awareness, the majority of eligible adults aren't getting the USPSTF\*-recommended low-dose CT screening.<sup>2</sup>

Imagine lung cancer screening as easy as a **routine blood draw.**

Introducing FirstLook, a simple blood test designed to be the first step in detecting lung cancer early, when it's most treatable.

# A new innovation in lung cancer screening.

The new FirstLook blood test offers a convenient, accessible, and personalized approach to enhance lung cancer screening. FirstLook helps determine the likelihood of detecting lung cancer through low-dose CT (LDCT).

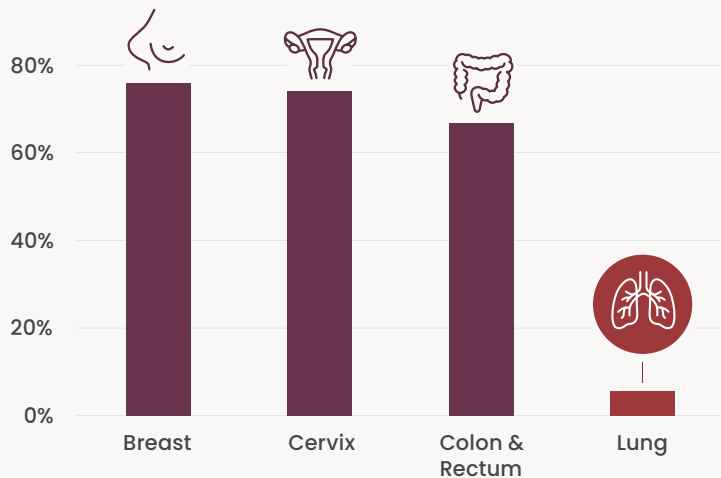
FirstLook Lung is a next-generation sequencing laboratory-developed test (LDT) of plasma-cell-free DNA, that analyzes the distribution of DNA fragment sizes in blood to indicate the possible presence of lung cancer.

Like other routine blood draws, the FirstLook Lung test can be completed in your office or by your institution's phlebotomy lab.

## Lung cancer screening **has fallen behind** other cancer screenings.

Due to a lack of screening, lung cancer is the number one cause of cancer-related deaths for both men and women, claiming more lives than colon, breast, and cervical cancers combined.<sup>4</sup>

Screening Rates: Eligible US Adults<sup>1,5</sup>



Using FirstLook Lung to improve screening uptake aligns with the CDC|HHS Healthy People 2030 Objectives, highlighting the importance of raising lung cancer screening rates among eligible adults and reducing lung cancer deaths.<sup>6</sup>

## Detecting lung cancer early saves lives.<sup>7,8</sup>

Invented with a team of physicians, FirstLook is designed to be the first step in detecting lung cancer early.



Understand  
your **patient's**  
**lung health**  
at a glance.

FirstLook provides binary results:



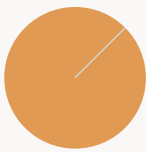
An **Elevated** result means there is a higher likelihood of lung cancer detected by low-dose CT (LDCT).



A **Not Elevated** result suggests a lower likelihood that lung cancer will be detected by LDCT.

## Clinically impactful performance

FirstLook was validated in a prospective, case-controlled, observational study.



### 99.8% NPV

In individuals with a **Not Elevated** result, the chance of detecting lung cancer by LDCT is 2 in 1000.<sup>9</sup>



### 76 NNS

About 76 people with an **Elevated** result need an LDCT to find one person with lung cancer compared with an NNS of 143 for anyone screen eligible.<sup>9</sup>



### 5.5X RR

The likelihood a lung cancer is found by LDCT for individuals with an **Elevated** result is 5.5 times as high as for those with a **Not Elevated** result.<sup>9</sup>

*NNS: Number needed to screen, NPV: Negative predictive value, RR: Relative risk.*

It's time to take a FirstLook at lung cancer.  
Get your patients tested today.

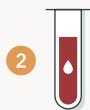


# FirstLook Lung can be seamlessly integrated with your existing workflows as part of a patient's routine appointment.



## Provider portal for test order & support

Streamlined and accessible portal.



## Blood draw

Routine blood collection process.



## Return of results

Simple binary test result and interpretation delivered via the portal.



## Results support

To facilitate informed decisions and necessary follow-up actions.

Contact **DELFI Diagnostics Client Services** for any questions about accessing the provider portal and ordering the FirstLook Lung test.

 1-800-589-2182

 [clientservices@delfidiagnostics.com](mailto:clientservices@delfidiagnostics.com)



Visit us online to learn more about the **FirstLook** Lung test.



### Indications for Use

FirstLook is indicated as an adjunct assessment tool for individuals deemed as high risk by the USPSTF and eligible for lung cancer screening (50–80 years of age, 20 pack-years of smoking, currently smoking or has quit within 15 years).

### Laboratory Information

The FirstLook Lung test is a laboratory-developed test. It was developed and its performance characteristics determined by DELFI Diagnostics. It has not been cleared or approved by the FDA. The laboratory is regulated under the Clinical Laboratory Improvement Act (CLIA) as qualified to perform high complexity clinical tests. This test is used for clinical purposes. It should not be regarded as investigational or for research.

**References:** 1. *State of Lung Cancer | Key Findings* | American Lung Association. Accessed December 21, 2023. 2. Wang GX, Baggett TP, Pandharipande PV, et al. Barriers to lung cancer screening engagement from the patient and provider perspective. *Radiology*. 2019;290(2):278–287. doi:10.1148/radiol.2018180212. 3. Meza R, Jeon J, Toumazis I, et al. Evaluation of the benefits and harms of lung cancer screening with low-dose computed tomography: modeling study for the US Preventive Services Task Force. *JAMA*. 2021;325(10):988–997. doi:10.1001/jama.2021.1077

4. *NIH National Cancer Institute. CancerStat Facts: Common Cancer Sites*. 2023. 5. *American Cancer Society. Cancer Prevention & Early Detection Facts & Figures 2023–2024*. 6. *Cancer-Healthy People 2030* | health.gov. <https://health.gov/healthypeople/objectives-and-data/browse-objectives/cancer>. 7. National Lung Screening Trial Research Team; Aberle DR, Adams AM, et al. Reduced lung-cancer mortality with low-dose computed tomographic screening. *N Engl J Med*. 2011;365(5):395–409. doi:10.1056/NEJMo1102873 8. de Koning HJ, Meza R, Plevritis SK, et al. Benefits

and harms of computed tomography lung cancer screening strategies: a comparative modeling study for the U.S. Preventive Services Task Force. *Ann Intern Med*. 2014;160(5):311–320. doi:10.7326/M13–2316 9. Mazzone, P.J., Bach, P.B., Carey, J., et al. *Cancer Discovery*. 10.1158 – 2159–8290. CD–24–0519. (2024).