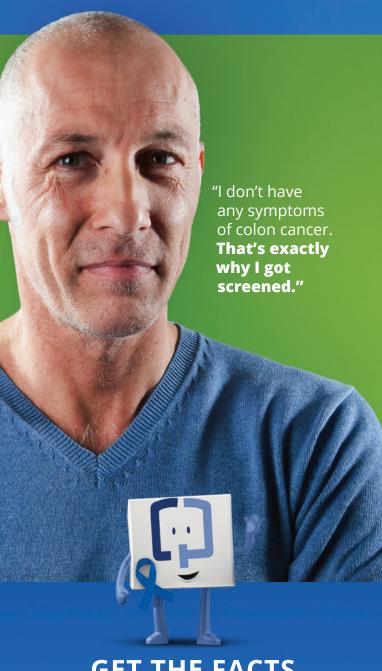
FACT: WHEN CAUGHT IN ITS EARLIEST STAGES, COLORECTAL CANCER IS 90% CURABLE.1



GET THE FACTSABOUT COLORECTAL
CANCER SCREENING

KNOW THE FACTS.

If caught in its earliest stages, colorectal cancer is 90% curable.¹

AT LEAST
70% OF PEOPLE
WITH COLORECTAL
CANCER HAVE
NO FAMILY HISTORY²

COLON CANCER
IS THE
2ND LEADING
CAUSE OF
CANCER-RELATED
DEATH³

YOUR RISK OF COLON CANCER DRAMATICALLY INCREASES AFTER THE AGE OF 504

1 IN 3 ADULTS
OVER 50 ARE
NOT GETTING
SCREENED⁵



KNOW THE FACTS ABOUT COLOGUARD®.

EFFECTIVE:

Cologuard detects 92% of colorectal cancers with 87% specificity.*6

EASY TO USE:

Cologuard is shipped to your home and picked up when you're done!

NONINVASIVE:

Cologuard uses advanced technology to find DNA in your stool, which detects cells that could be associated with cancer or precancer.

If you've been putting off screening, ask your healthcare provider about Cologuard.

^{*}Established in a study involving 10,000 screening-eligible patients. Both false positives and false negatives do occur. In a clinical study of Cologuard, 13% of people without cancer or precancer tested positive (87% specificity). Any positive should be followed by a diagnostic colonoscopy. Following a negative result, patients should continue participating in a screening program at an interval and with a method appropriate for the individual patient. Cologuard performance when used for repeat testing has not been evaluated or established.

Cologuard® is covered by Medicare and most major insurers.

Cologuard is covered by Medicare and Medicare Advantage with no co-pay or deductible for eligible patients.

More than 92% of all Cologuard patients have no out-of-pocket costs for screening.*

*Rate of coverage varies by state and region. Coverage rate only applies to Cologuard screening population.

ABOUT COLOGUARD

Cologuard is intended for the qualitative detection of colorectal neoplasia associated DNA markers and for the presence of occult hemoglobin in human stool. A positive result may indicate the presence of colorectal cancer (CRC) or advanced adenoma (AA) and should be followed by diagnostic colonoscopy. Cologuard is indicated to screen adults of either sex, 50 years or older, who are at typical average-risk for CRC. Cologuard is not a replacement for diagnostic colonoscopy or surveillance colonoscopy in high risk individuals.

Cologuard is not for high risk individuals, including those with a history of colorectal cancer and advanced adenoma, a family history of colorectal cancer, IBD or certain hereditary syndromes. Positive Cologuard results should be referred to diagnostic colonoscopy. A negative Cologuard test result does not guarantee absence of cancer or advanced adenoma. Following a negative result, patients should continue participating in a screening program at an interval and with a method appropriate for the individual patient. Cologuard performance when used for repeat testing has not been evaluated or established. Rx only.

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EXACT SCIENCES CORPORATION

441 Charmany Drive, Madison, WI 53719 www.ExactSciences.com | www.ExactLabs.com 1-844-870-8870

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