41 patient advocacy groups, professional societies, pharma, biotech, diagnostic companies, and laboratories agree to use consistent descriptor testing terms in patient education and communication.

Inconsistent cancer testing terms create confusion about:

- What kind of testing should I ask for?
- What kind of testing did I have?
- Did I have the right testing for my specific cancer?
- What do the test results mean for my care?

Recent data highlight suboptimal testing rates.

- 40% of colorectal cancer patients are not being tested for biomarkers
- Only 7% of eligible non-small cell lung cancer patients treated in community oncology practices were tested for all 7 biomarkers recommended in clinical guidelines
- Germline genetic testing rates for inherited mutations and cancer risk are below 50%

Adopting consistent, common terms for patient communication will minimize patient confusion about testing.

- “Biomarker testing” refers to testing for somatic (acquired) mutations and other biomarkers
- “Genetic testing for an inherited mutation” and “Genetic testing for inherited cancer risk” describes testing for inherited mutations

At least 33 terms related to biomarker, genetic, and genomic testing are used in cancer patient education contributing to patient confusion & lack of engagement in discussing testing with providers.

With consistent use of common terms, the medical community and patients achieve common understanding about the value of testing to make care decisions.

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