

|  |                      |                       |                                     |          | acalix                                 |
|--|----------------------|-----------------------|-------------------------------------|----------|--|
|  |                      | CADScoi               | System Clinical Report              |          |  |
| Patient Name:  |                      |                       |                                     |          | Date:                                  |
| DOB:   |                      | Gender:               |                                     |          | Time Exam:                             |
| Patient ID #:  |                      | Insurance Cor         | pany:                               |          | Policy #:                              |
| CPT Code:  |                      |                       |                                     |          |  |
| <b>0716T</b> - Cardiac a                               | acoustic waveform re | ecording with automat | d analysis and generation of corona | ry arte  | ry disease risk score.                 |
| ICD-Diagnosis co                                       | odes:                |                       |                                     |          |  |
| Primary symptoi  | ms:                  | □ R07.8               | 2 Intercostal pain                  |          | I10 Essential Hypertension             |
| 120.89 Othe  | r forms of angina    | □ R07.8               | 9 Other chest pain                  | Sec      | condary Factors:                       |
| pectoris   |                      | □ R07.9               | Chest pain, unspecified             | (Mu      | ust have primary symptom selected.)    |
| M79.601 Pa   | in in right arm      | □ R55 S               | yncope and collapse                 |          | E66.3 Overweight                       |
| ☐ M79.602 Pain in left arm                             |                      |                       | isk Factors:                        |          | E66.8 Other obesity                    |
| R06.00 Dysp  | nea, unspecified     | •                     | Type 1 Diabetes                     |          | E83.52 Hypercalcemia                   |
| R06.02 Shortness of breath                             |                      |                       | Type 2 Diabetes                     |          | Z72.0 Tabacco Use                      |
| R06.89 Other abnormalities of                          |                      | _                     | Pure Hypercholesterolemia,          |          | Z82.40 Family history of ischemic      |
| breathing  |                      |                       | cified                              |          | heart disease                          |
| R07.2 Preco  | rdial pain           | •                     | Mixed Hyperlipidemia                |          | Other:                                 |
| CAD-score Exam   | Result:              |                       | About CAD-score risk                | group    | ):                                     |
| The CAD-score is indicating risk of having significant |                      |                       | The CAD-score is a pa               | itient s | specific heart murmur score indicativ  |
| coronary artery disease (CAD), defined as having >50%  |                      |                       | of Coronary Artery I                | Disease  | e (CAD)/Chronic Coronary Syndrom       |
| luminal diamete  | r reduction.1        |                       |                                     |          | k stratification, prior to potentia    |
| Two risk catego  | ories are defined us | sing the CADScor      | secondary evaluation                | .1       |  |
| System:  |                      | J                     |                                     | low 20   | indicates that your risk of significar |
| CAD-score:   | ≤ 20                 | > 20                  | CAD is low.                         |          |  |
|  | -                    | -                     | •                                   |          | e elevated risk group, you may b       |
| Risk Group:  | Low Risk             | Elevated Risk         | reevaluated at a la<br>evaluation.  | ter tir  | me or be referred onto secondar        |
| Physician Clinica                                      | Il Assessment:       |                       | evaluation.                         |          |  |

| hysician Signature: | Date: |  |
|---------------------|-------|--|
|                     |       |  |

## **SUMMARY**

- FDA Clearance: CADScor System is an FDA De Novo cleared class II device (DEN190047).
- 2. Intended Use: The intended use of CADScor System is to record heart sounds, murmurs and vibration, for calculation of a patient specific score, indicating the risk of coronary stenosis, as an aid in cardiac analysis and diagnosis.<sup>1</sup>
- 3. Indications for Use: The CADScor System is indicated for use as a diagnostic aid in symptomatic patients with suspected stable Coronary Artery Disease/Chronic Coronary Syndrome.<sup>1</sup>
- 4. Clinical Data: More than 6,000 patients studied in the CADScor System clinical program. Several clinical studies have been published demonstrating the efficiency of the CADScor System including two peer-reviewed published studies with independent patient populations (n=3,977) demonstrate that a CAD-score of 20 or less indicates no significant CAD, with a negative predictive value (NPV) reported between 95.4-97.2%.<sup>2,3</sup> The FDA labeling for the CADScor System is a NPV of 96.2%.<sup>1</sup>
- 5. Acarix collaborated with the American College of Cardiology (ACC) Innovation Program (www.acc.org/about-acc/innovation) to develop a clinical workflow for the proposed use of the CADScor System as a first line diagnostic aid in patients with stable chest pain (www.acarix.com/resources/dowloads/us).
- National Institute for Health and Care Excellence (NICE): NICE MIB defines the CADScor System as a stable coronary artery disease ruleout method after first clinical evaluation (clinical history, physical examination, 12-lead ECG) and before CT coronary angiography (CTCA) (www.nice.org.uk/advice/mib174/chapter/summary).
  - User manual US-FDA v.12.Y
  - Schmidt SE, Winther S, Larsen BS, et al. Coronary artery disease risk reclassification by a new acoustic-based score. Int J Cardiovasc Imaging. 2019;35(11):2019-2028. doi:10.1007/s10554019-01662-1 https://pubmed.ncbi.nlm.nih.gov/31273633/
  - Rasmussen LD, Winther S, Karim SR, et al. Likelihood reclassification by an acoustic-based score in suspected coronary artery disease [published online ahead of print, 2023 Mar 16]. Heart. 2023;heartjnl-2023-322357. doi:10.1136/heartjnl-2023-322357 https://pubmed.ncbi.nlm.nih.gov/36878672/