

**Hillrom™**

A SECOND OPINION YOU CAN COUNT ON

ECG Algorithms, Critical Conditions and Actionable Insights You Can Trust

Automated electrocardiogram (ECG) interpretations are routine at the point of care, with physician acceptance growing over time as ECG algorithms continue to improve.¹ And while physicians determine a patient's final diagnosis, automatic ECG interpretations can influence patient management and treatment plans.²

That's why it's so important to use devices with accurate and reliable ECG algorithms. But with many interpretative algorithms available, it can be challenging to assess which devices use algorithms that provide the interpretive statements physicians can trust.

To better understand algorithm performance and quality, researchers and a group of cardiologists compared the performance of several leading ECG algorithms. The result? **Hillrom's VERITAS** ECG interpretation algorithm demonstrated best-in-class performance when identifying Acute Coronary Syndrome (ACS) and hard-to-detect arrhythmias.

The study showed that the **VERITAS** algorithm:

1. Recognized and alerted for critical conditions like Acute Coronary Syndrome with the highest sensitivity and cardiologist panel agreement.
2. Is most likely to detect Atrial Fibrillation (A-Fib) or Atrial Flutter, evidenced by the highest sensitivity and among the lowest false positive rates — below 2%.
3. Provided strong performance, balancing sensitivity and specificity in comparison to other algorithms. In the case of ACS, the **VERITAS** algorithm relayed critical test results most consistent with provider indications.



THE LEADER IN CRITICAL RESULT DETECTION

Cardiologists agree with Hillrom's **VERITAS** algorithm more than any other for identifying life-threatening conditions such as Acute Coronary Syndrome.²

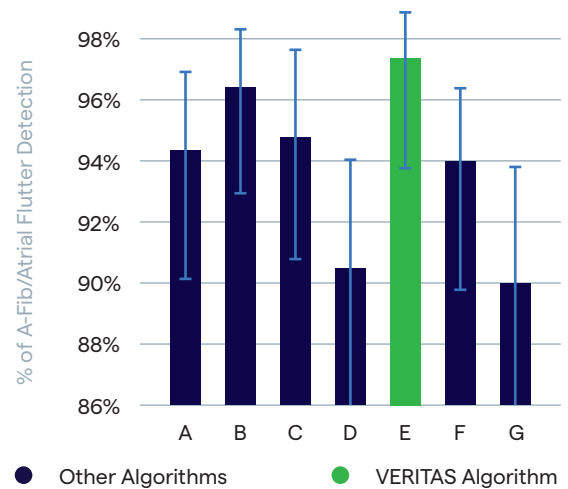
CRITICAL TEST RESULTS FROM THE VERITAS ALGORITHM

Featured in the
Welch Allyn ELI
380 Resting ECG





The **VERITAS** algorithm showed a high rate of sensitivity to arrhythmias, making it most likely to detect A-Fib or atrial flutter.²

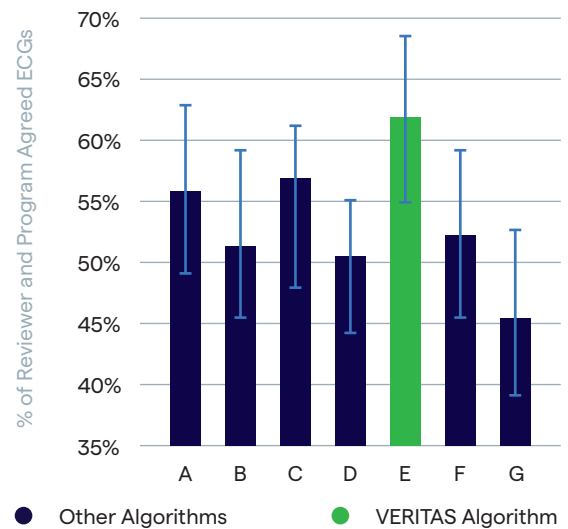


The **VERITAS** algorithm reinforced its industry-leading status throughout this study. The final results, published in the *Journal of Electrocardiology*, further emphasize strengths of the **VERITAS** algorithm and demonstrate the continuous improvements and optimizations being made to enhance the program's performance.² In fact, cardiologists rating the interpretation diagnoses during the study agreed with the **VERITAS** algorithm's critical test result interpretations most often. The **VERITAS** algorithm also outperformed most other programs in detecting A-Fib, non-sinus rhythm and other arrhythmias.

As physicians rely more on interpretive ECG algorithms to help streamline clinical decision making and provide accurate insights, it's important those algorithms provide a credible second opinion they can trust.

Read the full study* to learn more, then contact your Hillrom representative to demo the **VERITAS** algorithm at your practice.

The **VERITAS** algorithm's sensitivity and low false positive rate helped identify ECGs suspected of cardiac events like ACS more accurately than others.²



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* Read the published study at: <https://doi.org/10.1016/j.jelectrocard.2019.11.043>

¹ Smulyan MD, Harold. February 2019. "The Computerized ECG: Friend or Foe." The American Journal of Medicine Vol. 132, Iss. 2: 153-160. <https://doi.org/10.1016/j.amjmed.2018.08.025>.

² J. De Bie et al. Performance of seven ECG interpretation programs in identifying arrhythmia and acute cardiovascular syndrome. Journal of Electrocardiology 58 (2020) 143-149. <https://doi.org/10.1016/j.jelectrocard.2019.11.043>

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