


PERSONAL AND CONFIDENTIAL

ARTERIOVISION™ CAROTID IMT ULTRASOUND REPORT

| | | |
|---|---------------------------------|----------------------------------|
|  | Patient Name: | Gender / Age: F / 50 |
| | Exam Date: 05/13/2009 | Date Of Birth: 08/07/1958 |
| | Physician: SELF REFERRAL | Scanned Side: R |
| | | CIMT Value: 0.793 mm |

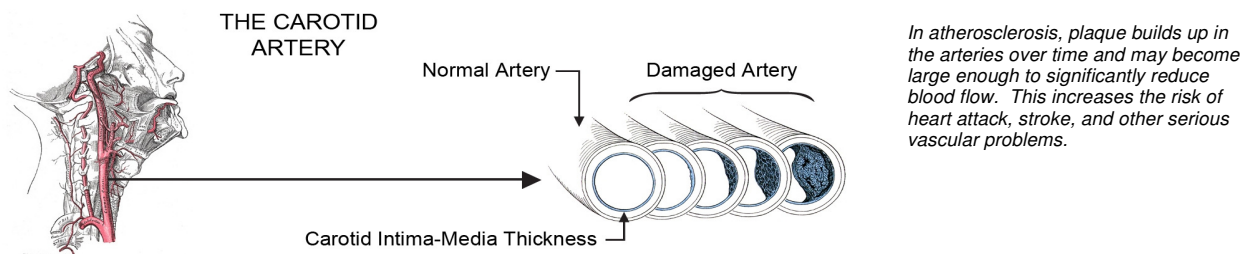
YOUR RESULTS & THEIR SIGNIFICANCE

To help estimate your risk for cardiovascular disease, the thickness of the first two layers (the intima and media) of your carotid artery wall was measured. Thickening of an artery is the earliest anatomical evidence of atherosclerosis (hardening of the arteries). Common carotid artery intima-media thickness (CIMT) typically ranges from 0.5 mm to 1.5 mm. The American Heart Association (AHA) Prevention V recommendations¹, adopted by the Adult Treatment Panel of the National Cholesterol Education Program (ATP-III)², recognize carotid IMT as a valid, reliable, safe, and noninvasive means for assessing cardiovascular disease. Studies have shown that CIMT is associated with all the major cardiovascular risk factors, is significantly correlated with coronary artery disease, is highly predictive of future cardiovascular events, and is related to family history (partially genetically determined) of cardiovascular disease and can provide additional information to traditional risk factor assessment for cardiovascular disease^{1, 2}. The greater the CIMT value, the greater the likelihood of a heart attack or coronary death⁴. In addition to estimating future coronary heart disease risk, change in CIMT over time can be used to monitor risk factor interventions, such as lipid-lowering therapy, and their impact on vascular health.

Although large-scale clinical studies have shown that CIMT correlates with clinical atherosclerotic events (heart attack & stroke), this test is not routinely recommended in the United States. Future guidelines may advocate routine use of CIMT to help guide atherosclerosis prevention.

YOUR RESULTS: Your CIMT value falls into the 85th percentile for women your age. Your CIMT is similar to women who are 70- 74 years old. Published studies indicate that the risk of heart attack or coronary death associated with a CIMT value of 0.793 mm is 44% higher than women your age^{3,4}.

SEE PAGE 2 OF THIS REPORT FOR FURTHER DETAILS.



| | | |
|--|----|--|
| Coastal CIMT 1748 Sir William Osler Drive Virginia Beach, VA 23454 (757) 390-4224 | | ELECTRONICALLY REVIEWED BY: Brant Thomas MD ----- Physician Signature |
| Acquisition by: | KW | |
| Analysis by: | KW | |

[MTI-PR v1.03]

Figure 1: Your CIMT Percentile
How you compare to others of similar age and gender

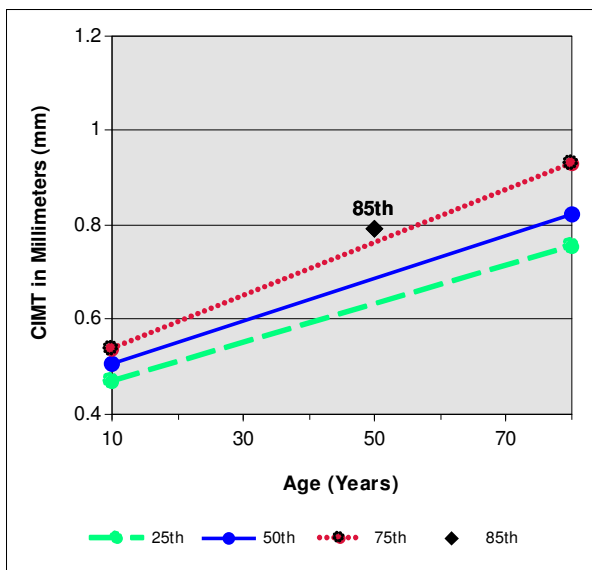


Figure 1 Significance: Compared with a population of healthy individuals without symptoms of cardiovascular disease, your CIMT value falls into the 85th percentile. This means that 85% of individuals of the same gender and similar age, have a CIMT value less than yours. In the future, guidelines may specify that a CIMT value greater than or equal to the 75th percentile could elevate a person with multiple risk factors to a higher risk category².

Figure 2: Your Current Age vs. the Age of Individuals with Your CIMT Value

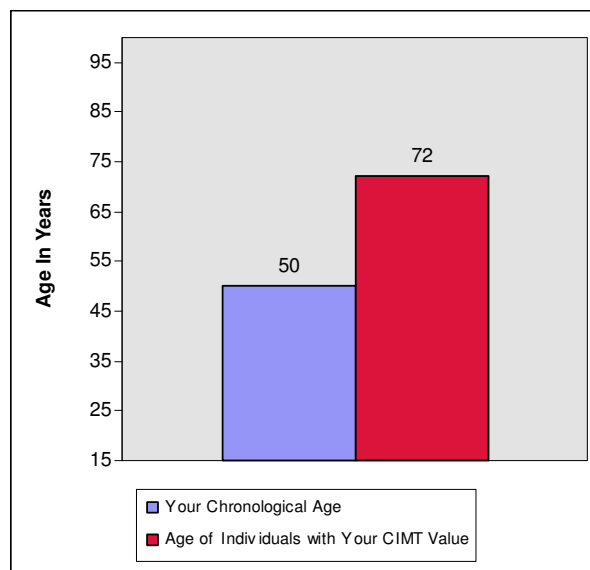


Figure 2 Significance: With this graph, you can compare your chronological age with the CIMT value of others of the same gender by age group. Compared with a population of healthy individuals without symptoms of cardiovascular disease, it is estimated from your current CIMT value that your vessel is as thick as someone who is about 70- 74 years old (based on a comparison of your CIMT value with their average CIMT value)⁵.

NEXT STEPS

Your CIMT value should be interpreted in relation to other risk factors for cardiovascular disease (several listed below) and to any symptoms of cardiovascular disease, such as chest pain or a previous heart attack/stroke. Further follow-up to identify and modify cardiovascular risk factors to prevent and/or treat heart disease/stroke can be facilitated by further testing and working with your health care provider. Although large-scale clinical studies have shown that CIMT correlates with clinical atherosclerotic events (heart attack & stroke), this test is not routinely recommended in the United States. Future guidelines may advocate routine use of CIMT to help guide atherosclerosis prevention.

RISK FACTORS

- | | | | |
|------------------------------|------------------------------|-------------|---------------------|
| Diabetes mellitus | Low HDL-C (good cholesterol) | Obesity | Cigarette smoking |
| Metabolic syndrome | High Blood Pressure | Menopause | Physical inactivity |
| High LDL-C (bad cholesterol) | High triglycerides | Steroid use | Stressful lifestyle |

THE GOOD NEWS?

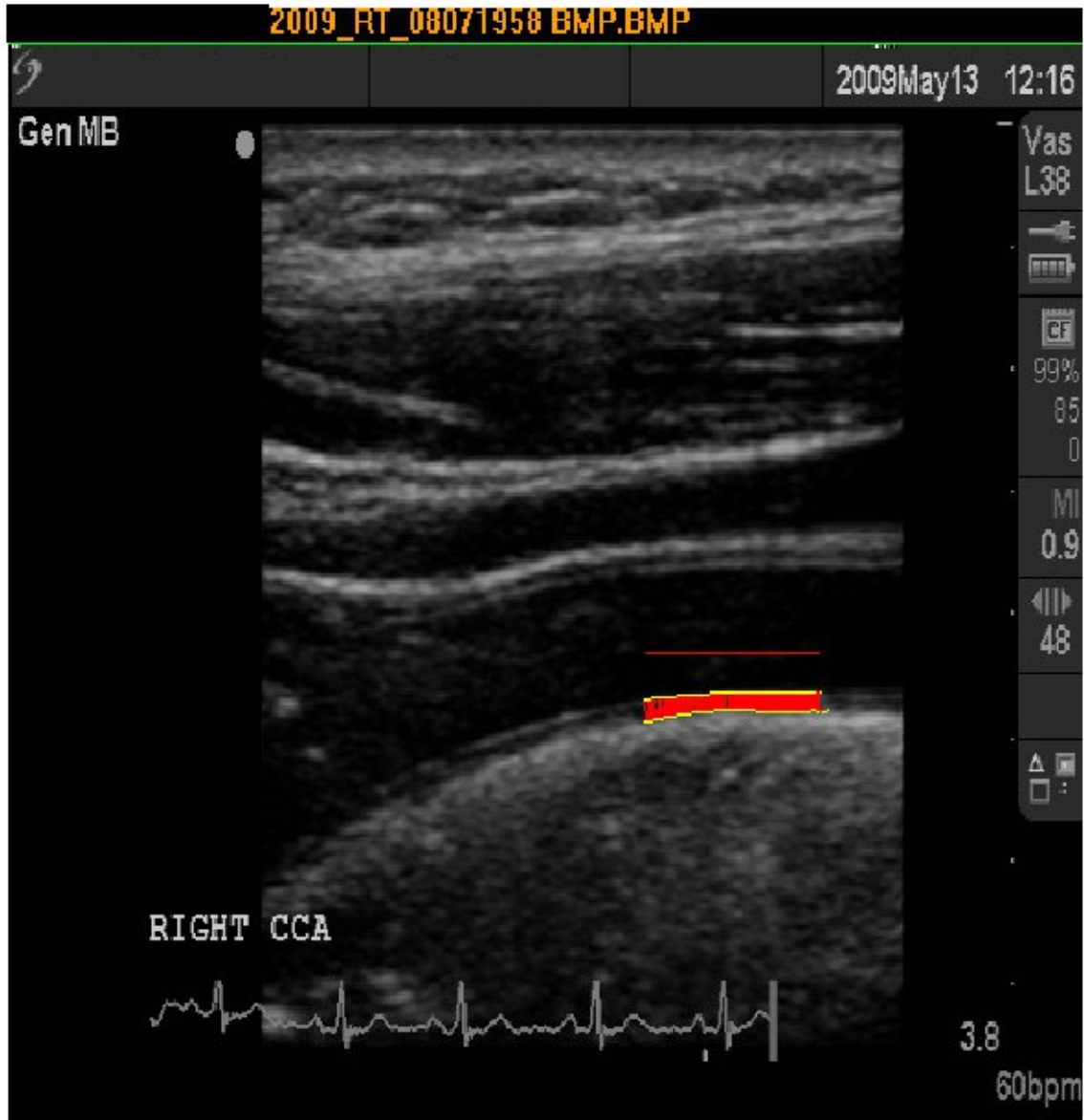
While age (older than 45 years for men, older than 55 years for women), genes, and a family history of cardiovascular disease are risk factors beyond your control, many risk factors are modifiable. Addressing the risk factors above with your healthcare provider can have a significant impact on helping to prevent or reverse heart disease.

References

- Greenland P, et al. Circulation 2000;101:e16-e22.
- National Cholesterol Education Program (NCEP) Expert Panel on Detection, Evaluation, and Treatment of High Blood Cholesterol in Adults (Adult Treatment Panel III). Circulation 2002;106:3143-3421.
- Chambless LE, et al. Am J Epidemiol 1997;146:483-494.
- Hodis HN, Mack WJ. Curr Pract Med 1999;2:171-174.
- MTI Proprietary Database.

ARTERIOVISION™ SOURCE IMAGE

| | | |
|---|---------------------------------|---|
|  | Patient Name: | Gender / Age: F / 50 |
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This ultrasound image shows the region of the carotid artery far wall that was used to determine the CIMT value. The single, horizontal red line represents the 1 cm ruler under which the CIMT was computed.