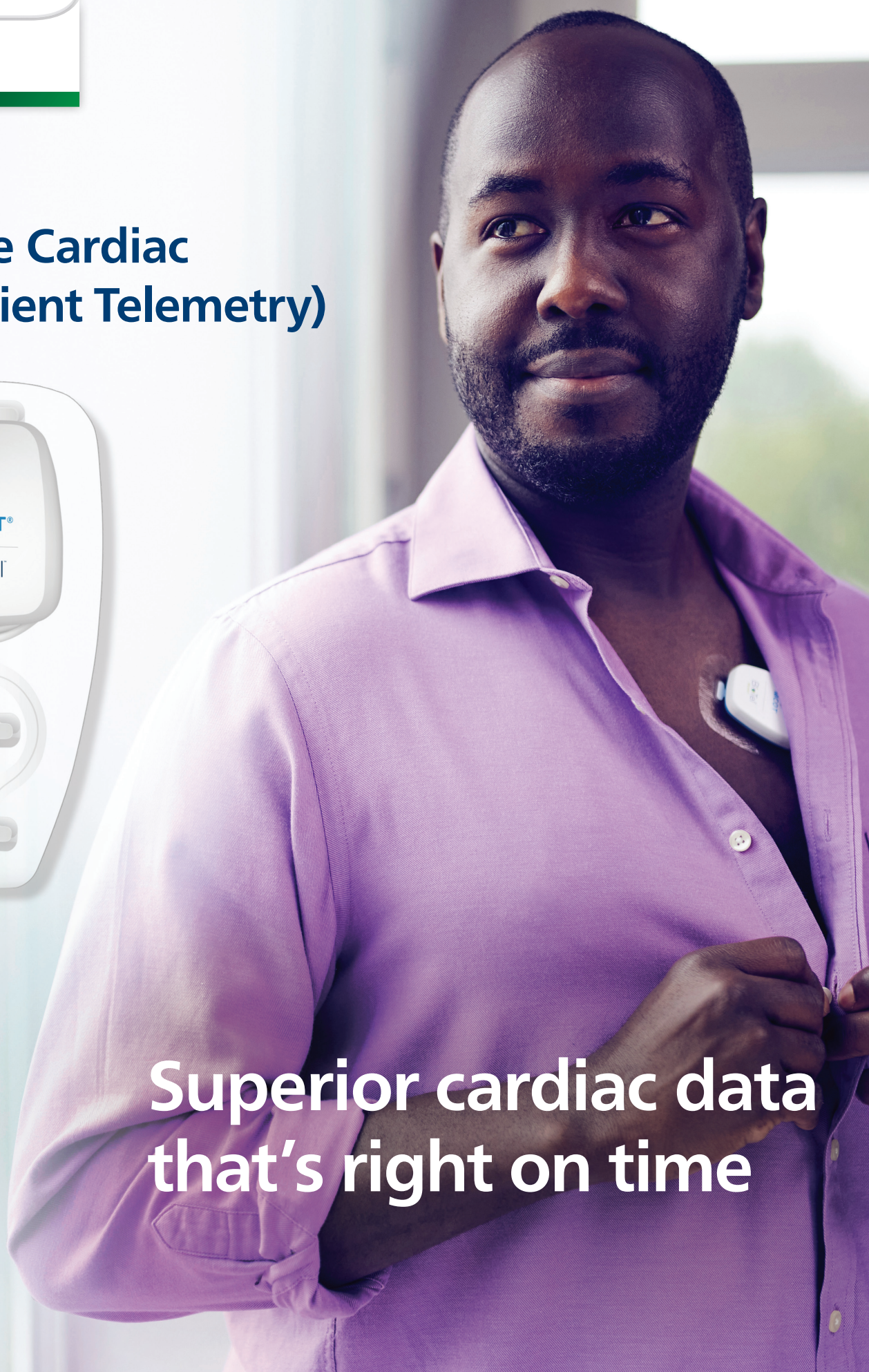


PHILIPS

BiTel[®]
HEART

MCOT (Mobile Cardiac Outpatient Telemetry)



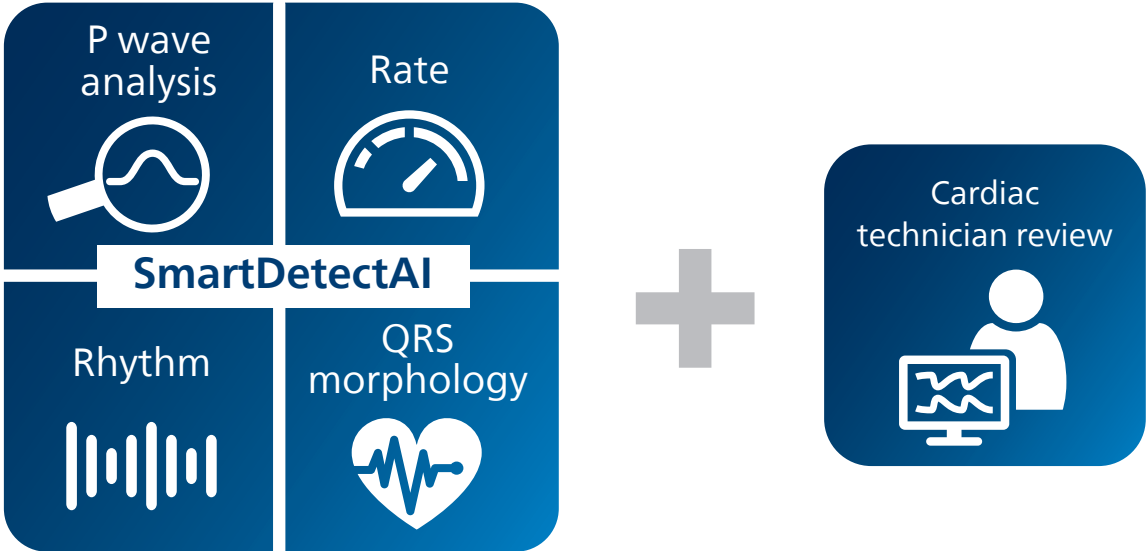
**Superior cardiac data
that's right on time**

Accurate diagnosis without delay

Patients with arrhythmias need timely diagnosis and effective treatment. Treatment delays can compromise outcomes, but near-real-time monitoring with urgent and emergent notifications helps you reach an accurate diagnosis quickly.

MCOT, powered by its unique SmartDetectAI algorithm, accelerates delivery of clinically smart cardiac care with high-quality actionable reports that enable you to diagnose and treat arrhythmias quickly and confidently.

SmartDetectAI and the MCOT service ecosystem



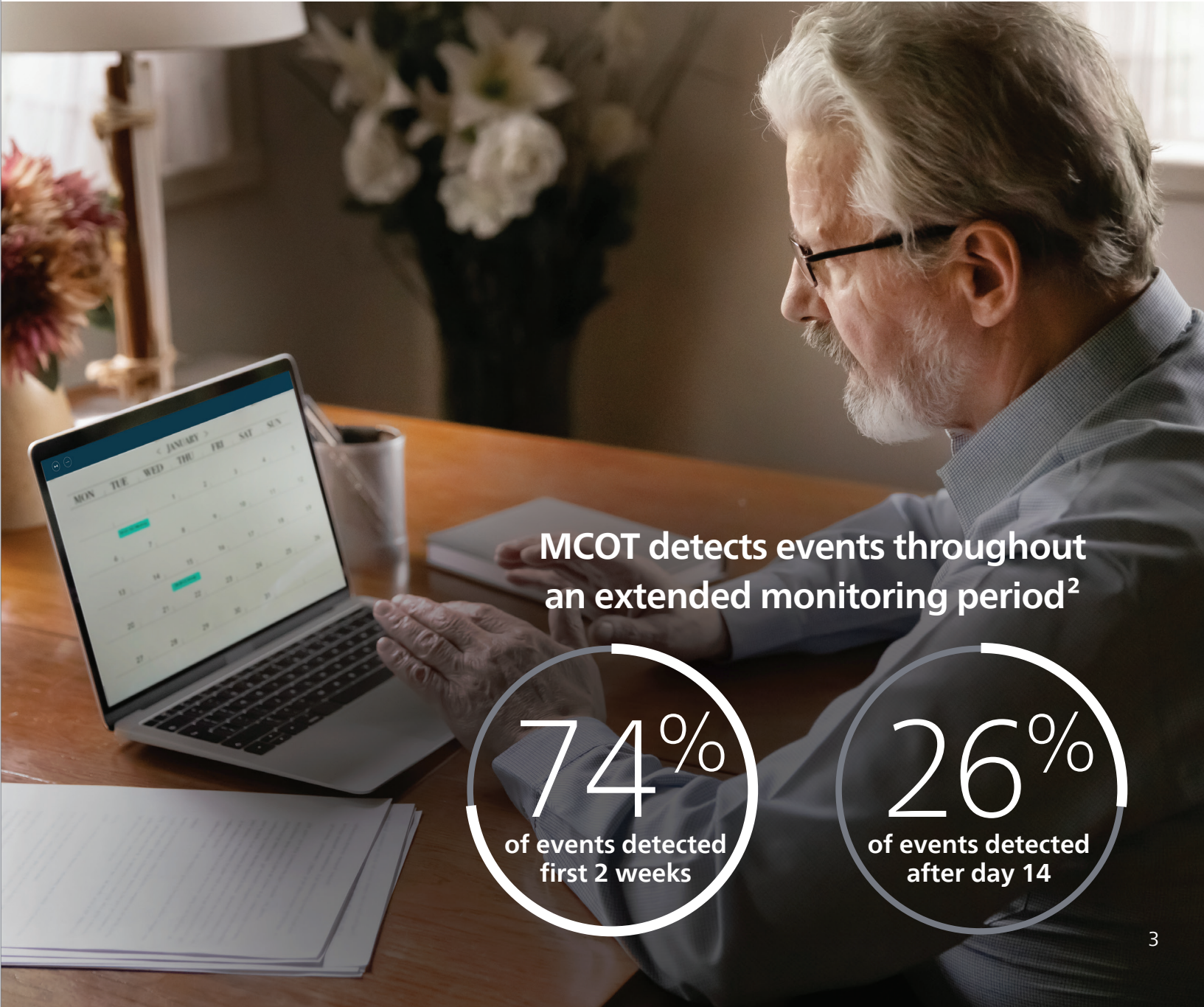
Superior detection and cardiac monitoring insights delivered when you need them

What is superior cardiac data? It's near-real-time detection and urgent/emergent notifications powered by our SmartDetectAI algorithm, so you are notified in minutes, not hours or weeks like with some mobile cardiac telemetry devices. It's accurate, actionable reports that are reviewed by certified technicians to verify

the algorithm's findings. It's the only telemetry device proven to detect atrial fibrillation (AF) with no false negatives or positives¹. It's a monitoring ecosystem that's hard to beat, because it gives you the data and insights you need to make confident, clinically smart cardiac care decisions. It's MCOT.

MCOT delivers superior detection

- SmartDetectAI algorithm delivers near-real-time arrhythmia detection with rate, rhythm, AF with p wave analysis and QRS morphology
- Proven to detect AF with 100% sensitivity and 100% positive predictivity in the detection of ≥30-second AF episodes¹—no false AF negatives or positives¹
- MCOT's superior detection and high diagnostic yield expedite patient treatment decisions
- 2 channels of ECG data for a more complete picture
- Clinical evidence from more than 40 studies, abstracts, and articles



MCOT detects events throughout an extended monitoring period²



Go beyond superior detection with high-quality, actionable reports

Near-real-time notifications of urgent and emergent events—with full disclosure—provide the clinical insights you need to accelerate diagnosis and treatment. Our cardiac technicians* review findings to ensure that you receive the most accurate and actionable reports possible.

*Certified Cardiographic Technicians (CCT) and Certified Rhythm Analysis Technicians (CRAT)

The best of both worlds

The complementary combination of SmartDetectAI and our cardiac technicians is something you won't find anywhere else. The superior detection and precision of the MCOT SmartDetectAI algorithm provides better data to diagnose with confidence. Every report—including urgent/emergent, daily, and end-of-service reports—is reviewed by our certified techs to ensure that you are getting the highest-quality cardiac data.



Actionable reports provide data and insights to accelerate confident, clinically smart cardiac care delivery.

Superior reports based on superior detection

- Comprehensive clinical report includes arrhythmia summary, AF durations, AF onsets and burden, high/low/average heart rate trends, and PVC/PAC counts and burden
- Daily reports provide clinically significant arrhythmia information summarized on a single page

- Customizable urgent/emergent notification criteria ensure that you receive the information you need when you need it
- Enhanced ECG enables full disclosure of triggered events online

See overview of MCOT report on next page.

Find and treat more arrhythmias—12% of MCOT patients required a surgical procedure³



MCOT end-of-service summary report overview

PHILIPS BioTel HEART BioTel MCOT (Tel) 866-426-4401 (Fax) 866-426-4403

End of Service Summary Report 4/10/2020

Patient Name: John Doe | Notification Physician: Dr. Heart, MD
 Date of Birth: 00/00/0000 (age 76) | BioTel Heart Center
 Gender: M | 123 Avenue of Heart
 Patient Phone: (000)000-0000 | Malvern, PA 19355
 Medical Record: | Dr. Heart, MD
 Diagnosis (ICD10): I48.0 Paroxysmal atrial fibrillation | Ordering Physician:

Monitoring Summary | **Event Summary** | **HR Summary**

Time Monitored: 12d 13h 3m | Total Cut Strip Count: 30 | High HR: 120 bpm
 Prescription Days: 30 | Symptomatic: 0 | Low HR: 34 bpm at 03/13/2020 09:43 EDT
 Days Monitored: 17 | Asymptomatic: 30 | Avg HR: 70 bpm
 Baseline Date: 03/12/20 | Emergent/Urgent Count: 0 | Strips start on page 8 | Daily HR detail on page 3
 End Date: 04/10/20

Representative Arrhythmia Summary | Strips start on page 8 | Total Strip Count (TSC)

Arrhythmia	Sx	None Indicated	ASx	ASx: Auto Trigger	TSC
AF (Fastest)	03/29/2020 21:23 EDT	HR: 99	ASx: Auto Trigger	TSC: 30	
SVT (Fastest)	None Found				
Pause (Longest)	03/20/2020 21:45 EDT	HR: 47 L: 2.3s	ASx: Auto Trigger	TSC: 3	
Heart Block (Slowest)	1* None Found 2* None Found 3* None Found AHB None Found				
VT	Fastest: 03/19/2020 14:01 EDT HR: 113 L: 5 Beats Longest: 03/19/2020 14:01 EDT HR: 113 L: 5 Beats	ASx: Auto Trigger	TSC: 1		

AF Summary | Daily details page 2

Analysis Time: 12d 6h 41m | Longest AF: 6h 43m
 Time in AF: 131h 34m | AF High HR: 108 bpm
 AF Episodes: 366 | AF Low HR: 34 bpm | 03/13/2020 09:43 EDT
 AF Burden: 45% | AF Avg HR: 58 bpm

Ectopy Summary | Daily details page 5

Analized: 1,154,911 | PACs: 1,154,911
 Ectopy: 273 | PVCs: 10,462
 Burden: <1% | Burden: 1%

Physician Comments | **Preliminary Findings**

Signature: _____ Date: _____

• Patient monitored for 12d 13h 3m
 • 30 events were transmitted. 0 symptomatic. 30 device triggered
 • AF occurred 366 time(s) with HR range of 34 - 108. Total AF Burden 45%
 • Pauses > 2 seconds occurred 3 time(s) with longest pause 2.3 seconds
 • VT occurred 1 time(s) with fastest run 113 BPM
 • 10,462 PACs with PAC burden of 1%
 • 273 PVCs with PVC burden of <1%

End of Service Summary Report | Page 1 of 23
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Monitoring and event summaries include total time and days monitored and start and end dates

One-page comprehensive arrhythmia summary to quickly identify the presence of significant arrhythmias, AF, SVT, Longest Pause, Slowest Heart Block, and VT

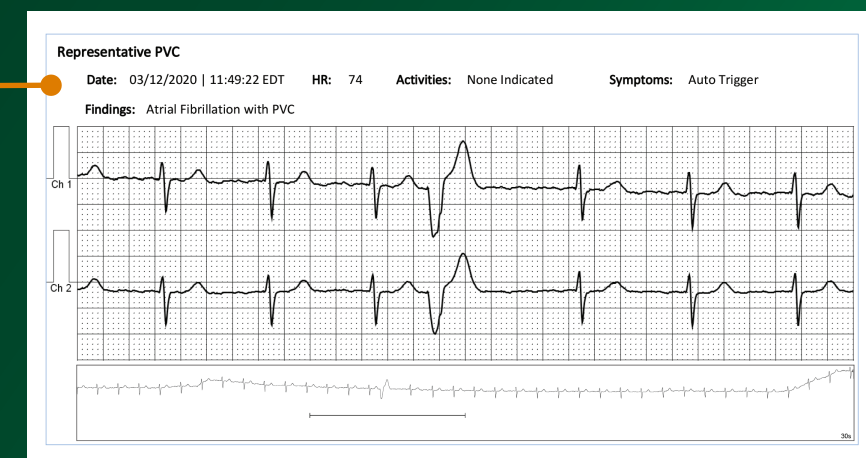
AF summary with AF durations, episodes, burden, and high/low/average heart rate trends

Quickly view event and heart rate summaries with breakouts by symptomatic and asymptomatic events and high/low and average rates throughout the monitoring period

Ectopy summary provides PAC and PVC counts and burden

Narrative summary with AF, SVT and VT stats, pauses, and PAC/PVC counts and burden highlights the presence of significant arrhythmias

When the report contains PVC burden, a representative sample strip is included

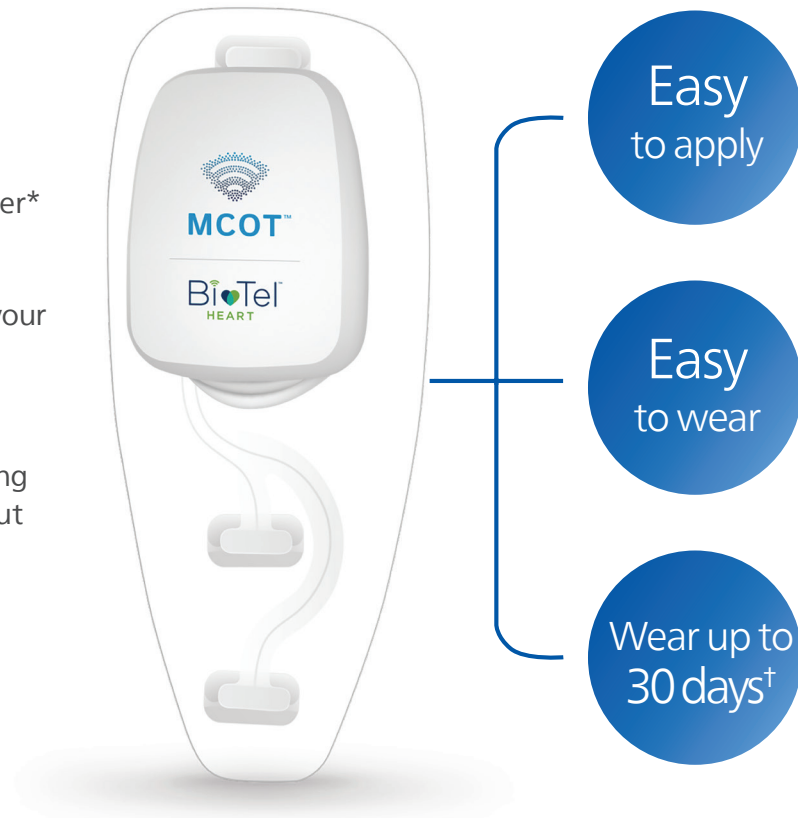


Simple and easy for practices and patients

Easy for patients

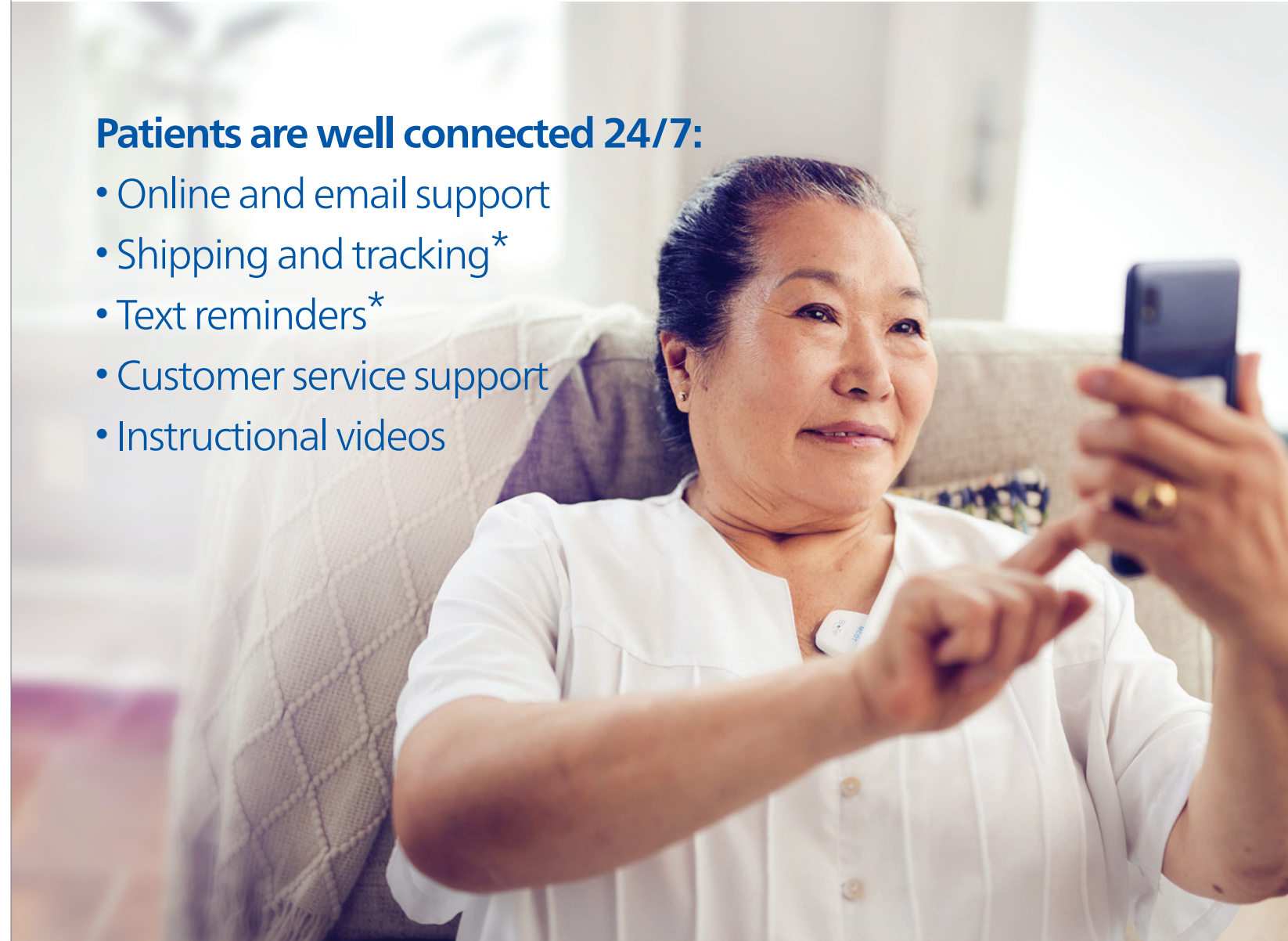
Patients can exercise, sleep, and even shower* while wearing MCOT. And because every patient is unique, we offer multiple wear options (patch, lead wire, and FLEX) to suit your patients' needs.

Touchscreen operation, multiple language options, and a built-in patient diary on the monitor add up to a remote cardiac monitoring solution that's easy to live with—throughout the entire monitoring duration.



Patients are well connected 24/7:

- Online and email support
- Shipping and tracking*
- Text reminders*
- Customer service support
- Instructional videos



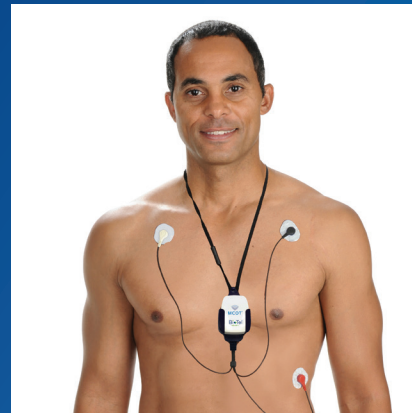
MCOT offers multiple wear options to suit patients' needs



Patch



FLEX



Lead Wire

Simple for your practice

MCOT makes patient enrollment and setup simple for your practice. Telehealth option frees staff time by providing 24/7 patient support, online educational videos and home-delivery within days of prescription order.

Multi-channel patient engagement program delivers timely notifications to keep patients informed throughout every phase of their monitoring period.

MCOT makes cardiac monitoring easier

- Small, lightweight (<1 oz.) and water resistant patch enhances comfort
- Rechargeable sensor and multiple patches enable up to 30 days of wear
- Multiple wear options enable patients to switch to an alternate form factor for continuous monitoring

*MCOT patch is the only wear option that can be worn in the shower.
†Individual patch can be worn for a maximum of 5 days before replacement.

*Program available Q1 2022. Text messaging requires in patient opt-in.



Heart care knows no bounds.

At Philips BioTel Heart, we provide you with the tools and technologies to do what you do best—care for your cardiac patients in the place that matters most: Everywhere. Philips in-hospital cardiology solutions and BioTelemetry remote cardiac patient monitoring have joined together to help you deliver a higher standard of cardiac care—by extending near–real-time diagnostics,

monitoring, and patient management from your hospital or office to your patient’s home. With Philips BioTel Heart, you have the data and insights to confidently make informed clinical decisions and to provide consistent quality cardiac care across the entire care pathway—no matter where it takes place.

For more information, contact your local Philips BioTel Heart Account Executive or visit www.gobio.com/heart-monitoring.

CPT codes*:

Technical: 93229

Professional: 93228

* Information contained in this publication is not to be construed as legal or billing advice. CPT® is a registered trademark of the American Medical Association. All CPT® information provided in this publication is intended for illustration purposes only, and should be independently verified prior to billing application.

With normal wear, each patch should last about 5 days.

References:

1. Based on MIT-BIH (Massachusetts Institute of Technology-Beth Israel Hospital) Arrhythmia Database testing of ≥ 30 -second AF episodes. (FDA 510k submission)
2. Philips BioTel Heart. Data on file.
3. First experience with a Mobile Cardiac Outpatient Telemetry (MCOT) system for the diagnosis and management of cardiac arrhythmia, Joshi, Ajay K. et al., American Journal of Cardiology, Volume 95, Issue 7, 878-881, DOI:<https://doi.org/10.1016/j.amjcard.2004.12.015>PlumXMetrics.