Clinical Validation

Heart Failure

Audicor Guided Treatment
Audicor-guided management was superior to conventional therapy, with significantly improved clinical outcomes in a randomized control trial in Taiwan. A high-risk group of patients (based on EMATc at discharge) showed the greatest improvement.


Discharge Risk Stratification
EMATc predicts cardiac readmission and mortality. BNP, echo, and other methods cannot. Studies have shown that a simple Audicor test at discharge can identify high-risk HF patients. A follow-up test 2-weeks post discharge can identify these patients with even greater accuracy.


Diagnosis
The combination of BNP and acoustic cardiography provides the most accurate diagnostic and prognostic information in the acute care setting.

Collins SP, et. al. S3 Detection as a Diagnostic and Prognostic Aid in Emergency Department Patients with Acute Dyspnea: Primary Results from the HEARD-IT Multinational Investigation. Annals of Emergency Medicine. 2009; 53: 748-757.
Clinical Validation

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Chang CC, Sung SH, Yu WC, Cheng HM, Chen CH. Night-time Electromechanical Activation Time, Pulsatile Hemodynamics, and Discharge Outcomes in Patients with Acute Heart Failure, 2015, 2: 184-193.


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Wagoner L, Maisel A. S3 Detection as a Diagnostic and Prognostic Aid in Emergency Department Patients with Acute Dyspnea: Primary Results from the HEARD-IT Multinational Investigation. *Annals of Emergency Medicine*. 2009; 53: 748-757.


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