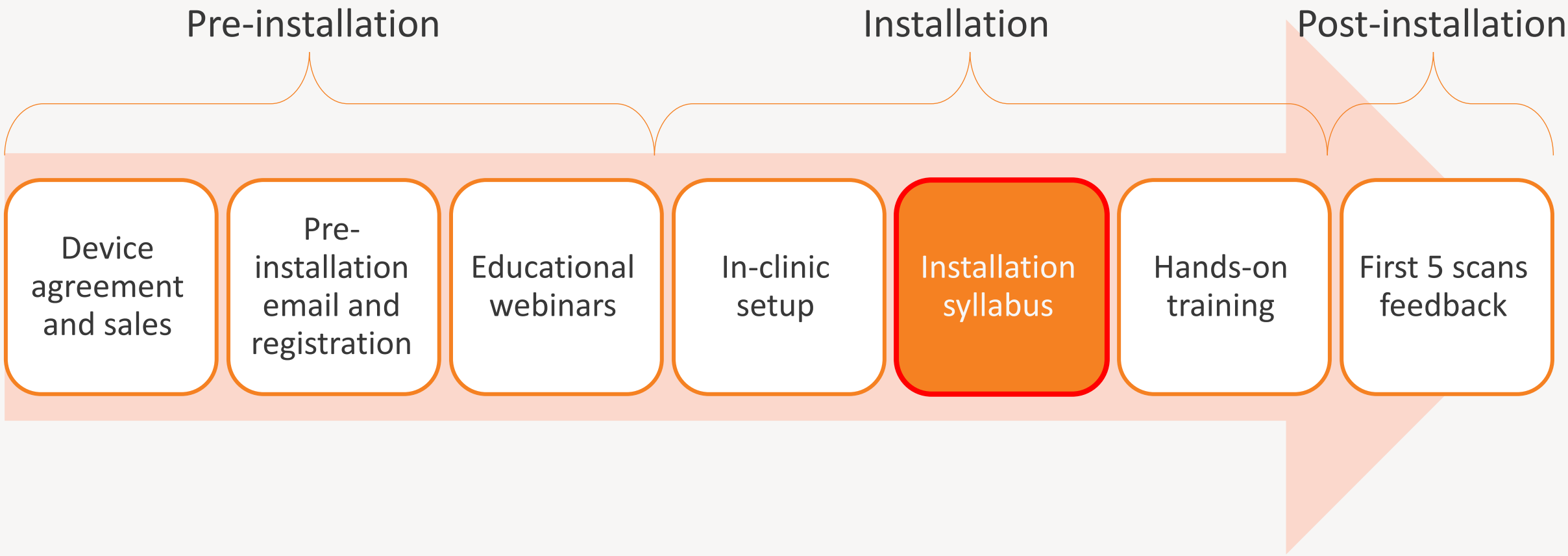
HT Vista
Education Workshop

HTVET Visualizing The Unseen

Education Process



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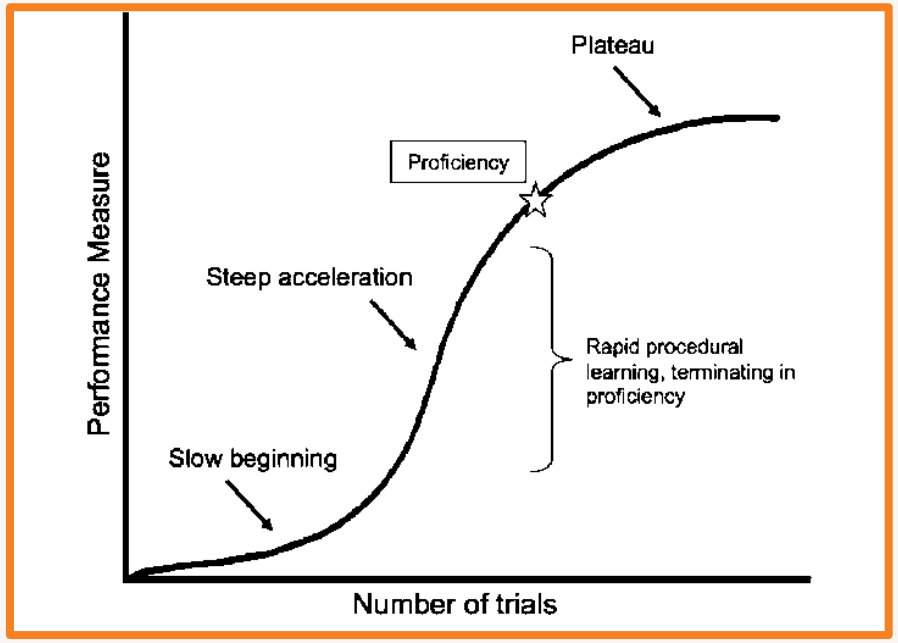
The expected learning curve



- HTVet team will follow the first 5 scans quality (per user) and will send feedback to improve scanning skills
- Support: Technical, Clinical, Marketing

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Installation Syllabus

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Installation syllabus

The syllabus should be delivered to veterinarians when installing the device in the clinic.

It includes all the content they should know before starting use:

- Introducing the company and the device
- Explanation about the rational and technology
- 2 full demos of the process
- Edge cases
- Additional guidelines

Tools required:

- Gentle clipper
- 3 models – 1. small dermal mass 2. big dermal mass 3. subcutaneous mass
- Red masks cards

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Introduction

- HTVet – the company: A startup located in Israel that has developed a technology that uses the principles of heat transfer, using the same technology for humans.

- HTVista – The first non-invasive medical device that allows veterinarians to rule out cancer of subcutaneous and dermal masses, on the spot and in the clinic. AVOID saying malignant or benign/diagnose cancer.

The technology

- HTVista is not designed/replace cytology, but to be used as a 1st line non-invasive “screening” test, that can also be easily and quickly performed by assisting staff.

- Technology in short – Heat Diffusion Imaging: The underlying principle of the HTVet technology is that normal and malignant tissues display different heat transfer rates due to differences in composition, metabolism, tissue morphology, and vascular network, which affect their thermophysical properties.

The scan process

- It’s a 50-sec scan. The device heats the tissue to no more than a couple of degrees above body temperature. It collects Signals while the tissue heats and is left to cool. Signals sent to the cloud > AI, Computer vision, signal analysis > results return to console and clinic’s email in a few minutes, depending on the WIFI connection.

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Connection

- Connect to electricity, show outlets at the back of the device, turn on & connect to WIFI

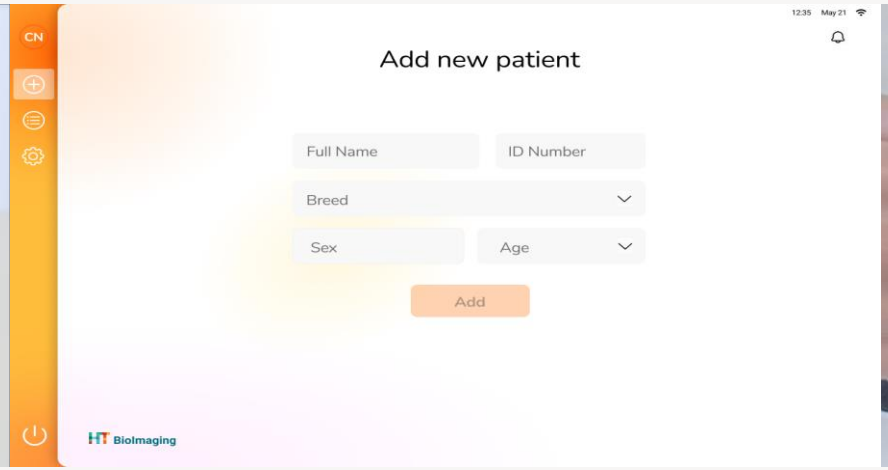
(we recommend turning on the device every morning, it will shut down automatically after 8 hours)

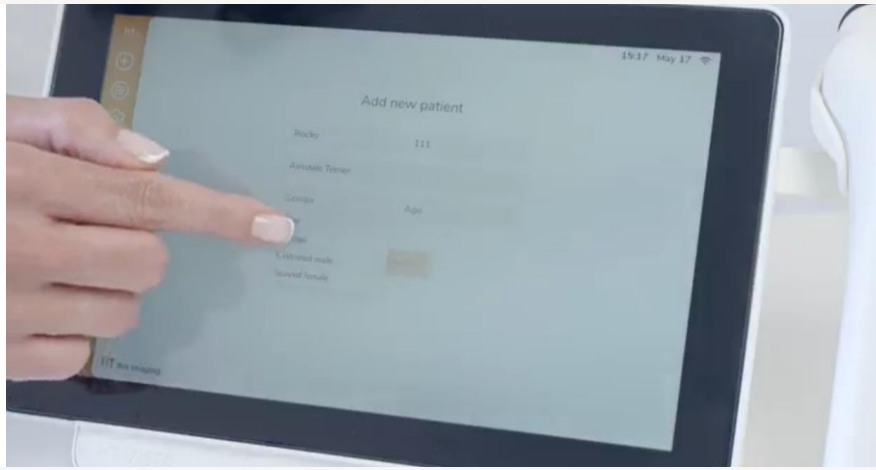



HTVista

Sign in

- Sign in; **Username:** htvet **Password:** htvet1212
- Sign Terms & Conditions, also sent to the results email
- Show different screens





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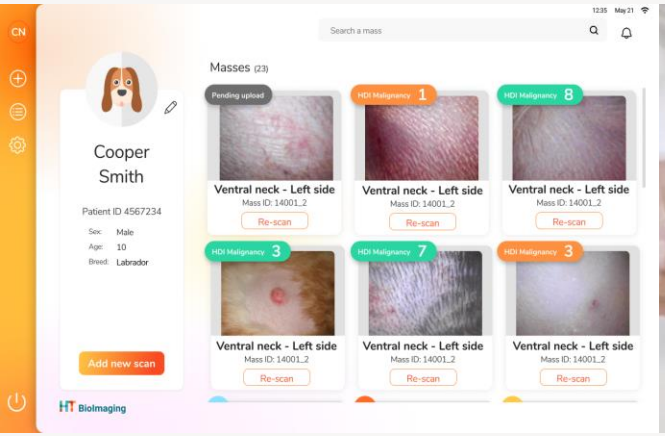
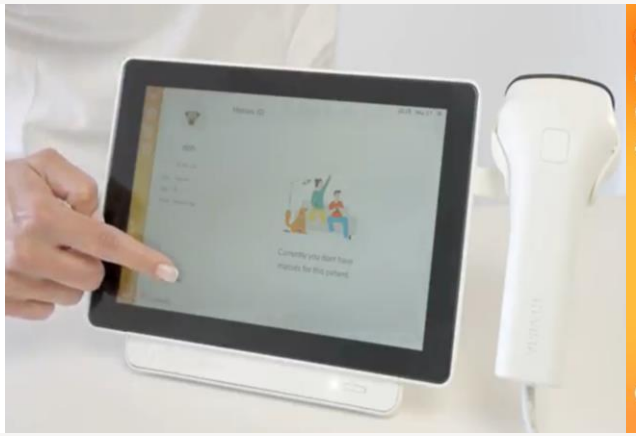
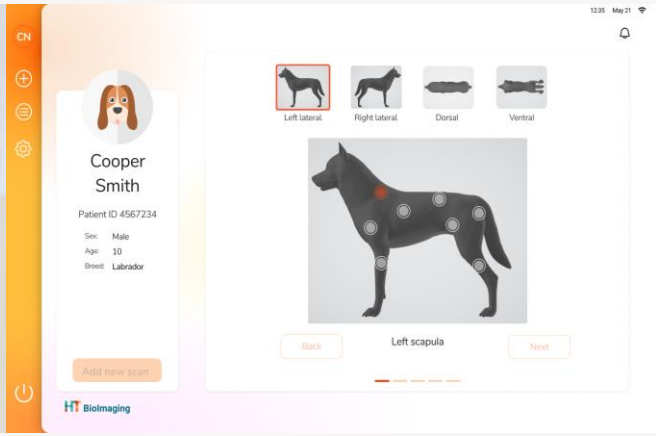
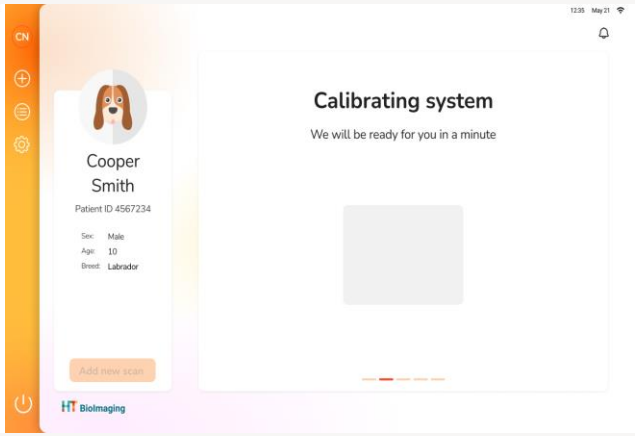
Demo (model 1)

- Add new patient: explain “test” option
- Patient’s card: patient’ details, all masess have been scanned over time
- “Scan new mass”, Choose location (mention that it doesn’t affect algorithm)
- one-minute calibration: short calibration is required for the thermal camera to adjust to room temperature.









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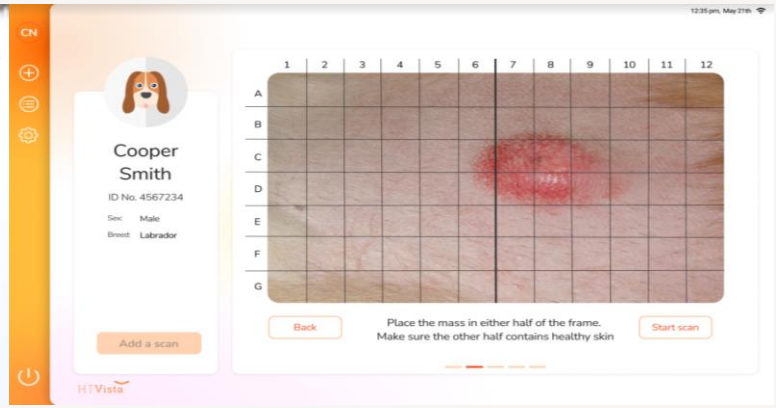
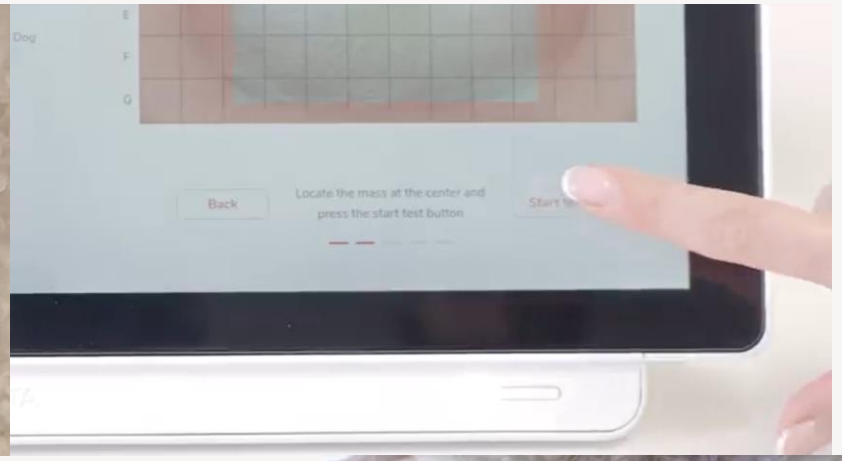
Demo (model 1)

- Placing the scanner
  - perpendicular and tight to the skin
  - Include healthy & suspicious: comparing sites on the same patient - age, medical condition, medication does not affect the results
  - Mass should be located close to the center, on one side
  - Use grid and the notch (indicates “right”)



Demo (model 1)

- “Start scan” – 3 sec press/touch screen (total of 50 sec scan)
  - Heating phase- safe blue light- signals collected when the tissue is heated and left to cool.
  - Stay focused on the dog – Flickering light=test ongoing, Blinking light = test has ended.



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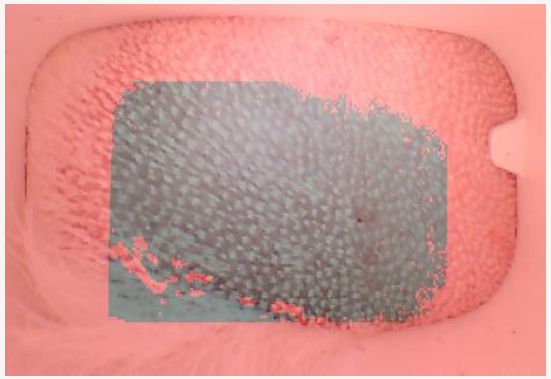
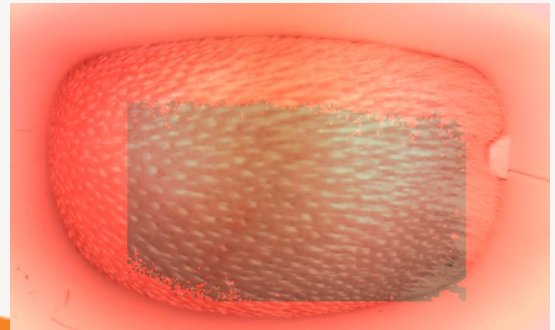
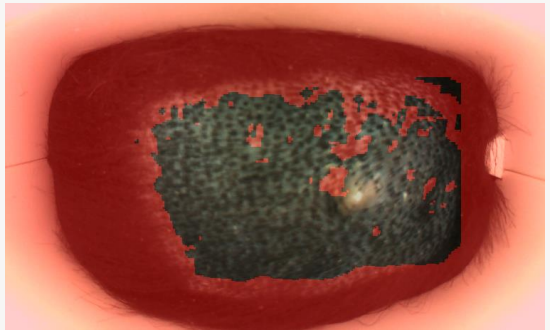
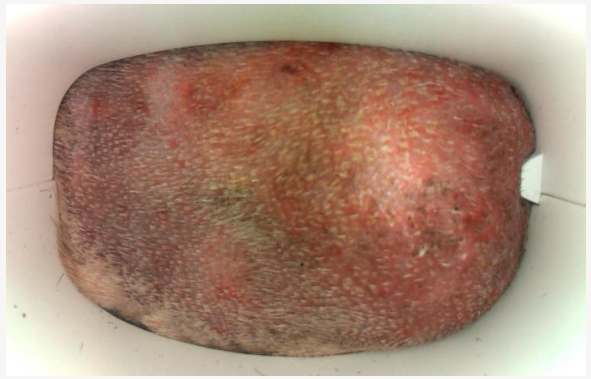
Demo (model 1)

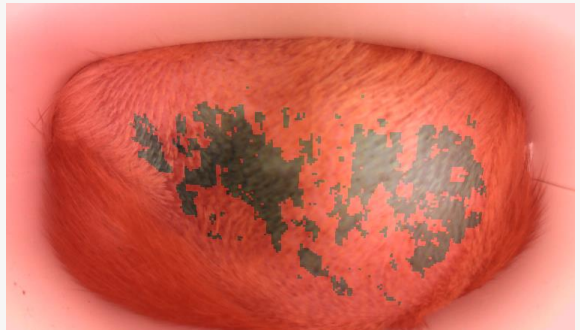
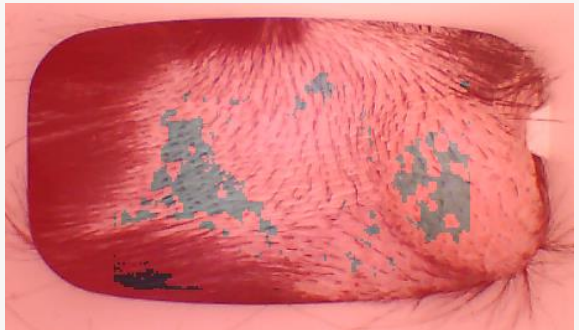
- Presenting optical image
- Explain about RED MASKS–RED=signals were not collected properly due to movement/fur/insufficient heating.

Good Masks

Bad Masks

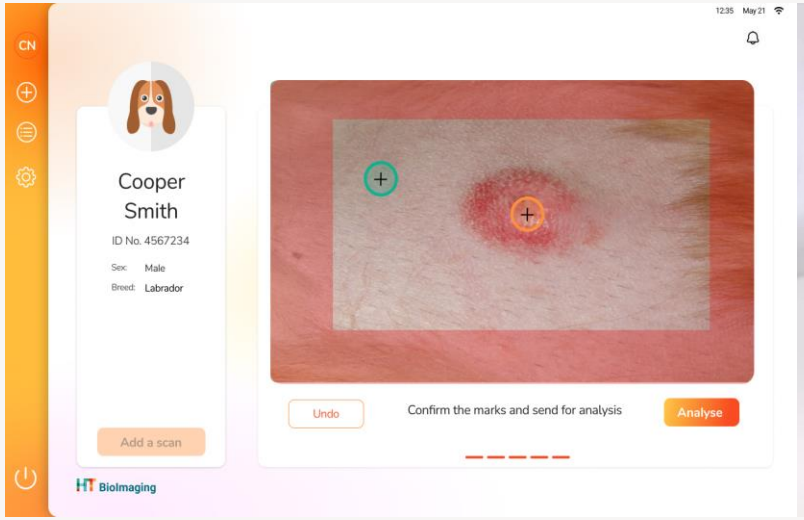


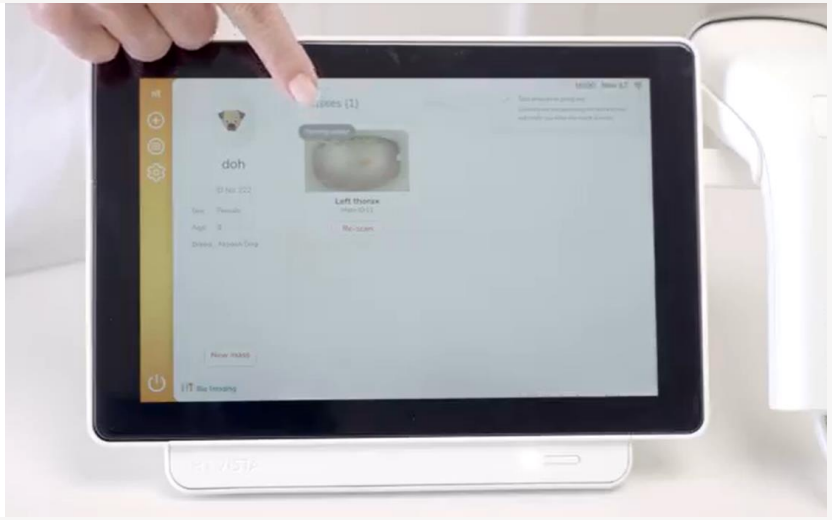



Demo (model 1)

- Labeling:
  - Mark “Suspicious” and “Healthy” – keep away from each other and from RED MASK as much as possible.
  - Mark the center of the mass (especially in small masses)
  - Ensure correct marking – this will affect the reliability of the result.

- Pressed “Analyze” data is sent to the cloud- our digital lab [show notification]





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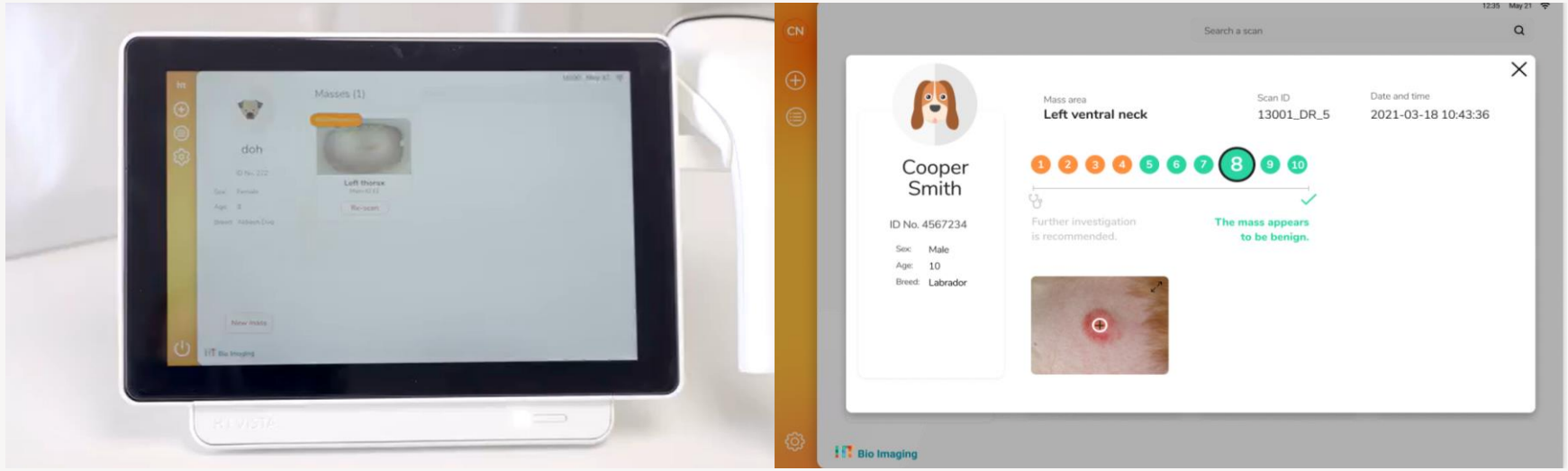
Demo (model 1)

- Results:
  - Back to console and clinic's email in a few minutes, depending on the WIFI connection.
  - Appear only on "masses" screen
  - 5-10 result means the mass is benign, with a 98% certainty.
  - 1-4 result: further investigation is recommended.



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The unmet need

- Give some numbers/statistics and describe clinical guidelines:
  - Tumors of the skin and subcutaneous tissues are the most common tumors in dogs, accounting for one-third of all tumors encountered in the species.
  - Even the most experienced veterinarian or oncologist cannot look at or palpate a mass and know whether it is malignant or not.
  - Guidelines: All skin and SQ masses that are >1 cm and have been present for 1 month should be aspirated for cytologic evaluation.

The unmet need

- Describe the current clinical practice and the disadvantages of FNA:
  - Invasive
  - Stressful (Dog, owner, and sometimes vet)
  - Expensive (especially external diagnosis)
  - Timely (Sampling, Staining, Interpreting)
  - Requires experience and performed only by vets

- It may be nondiagnostic (20%) or equivocal. This may be due to a small number of cells in the sample, poor exfoliation of the cells, or poor sample quality.

The unmet need

Benefits:

- Non-invasive & pain free test
- Easy to use (vets & assistants)
- Relieves stress
- On-the-spot result
- Innovative
- Increases compliance for further diagnosis
- Affordable
- Data is based on a validations study that included ~400 masses: 98% NPV, 85% sensitivity.

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Excluded cases

HTVista can be used to scan any dermal or SQ mass that is a maximum of 0.5 cm deep, excluding:

- Lymph nodes
- Testicular masses
- Mammary glands
- Facial masses (unless under sedation), eyes
- Footpads & phalanx
- Infected/secretin masses

Demo (on models 2-3)

- Explain there are three requirements for a good scan, first – proper clipping.
- Prepare dog, explain about proper clipping: *show clipping examples
- Suspicious & healthy area, no need for massive shaving for small masses
- gentle clipper, avoid bruising
- Add a new scan to use live streaming
- Repeat three requirements for a good scan and present the second, stay still. Show the difference between moving the scanner over the skin compared to moving “with the dog”.

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Demo (on models 2-3)

- Placing the scanner
  - perpendicular and tight to the skin
  - Include healthy & suspicious
  - Mass should be located close to the center
  - Subcutaneous mass – put your finger on the border between “health” and “suspicious” and assist the grid to memorize the border
  - Large mass – including part of it and always have a “healthy” area
  - Mobile mass – stretch/press the adjacent skin [outside the scanned area] to fixate
  - Bottom line: Ensure that you placed the scanner correctly, that you know where the mass is, and that you feel comfortable and steady before starting the scan.

- “Start scan” – 3 sec press/touch screen
  - Cancel test if needed (too much movement or forgot mass location)

Demo (on models 2-3)

- Explain about RED MASKS– RED=signals were not collected properly due to movement/fur/insufficient heating.
    - Show examples
    - RED MASK all over = scan again OR think if this is a suitable case

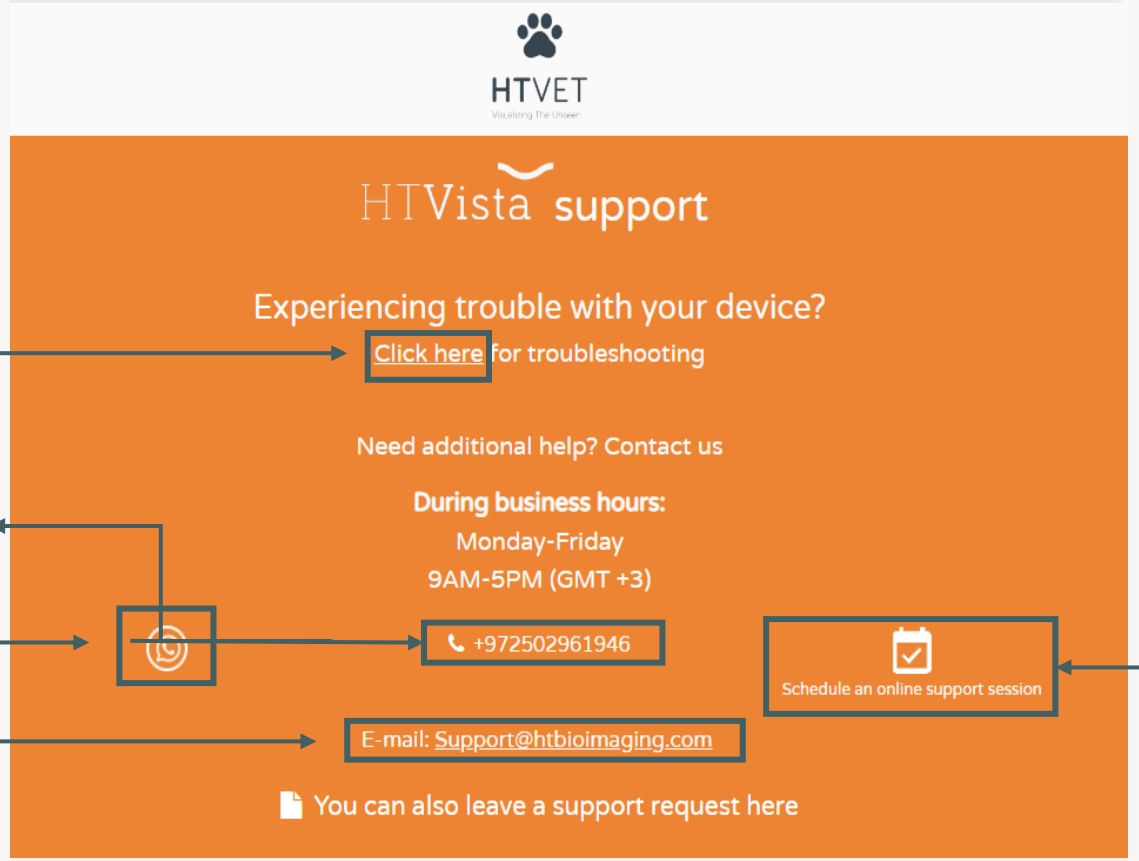
- Repeat 3 requirements for a good scan: 1. proper clipping 2. No movement and lastly Labeling:
    - Mark “Suspicious” and “Healthy” – keep away from each other and from RED MASK as much as possible.
    - Mark the center of the mass (especially in small masses).
    - Ensure correct marking – this will affect the reliability of the result.
    - Comparing sites on the same patient- age, medical condition, medication does not affect the results.

Demo (on models 2-3)

- Pressed “Analyze” data is sent to the cloud- our digital lab. [show notification]
- In case he/she is not happy with the mask, then re-scan.
- Results:
    - Back to console and clinic’s email in a few minutes, depending on the WIFI connection.
    - Appear only on “masses” screen
    - 5-10 result means the mass is benign, with a 98% certainty.
    - 1-4 result doesn’t necessarily mean the tumor is malignant (The device couldn’t determine with 98% certainty whether it is benign), thus further investigation is recommended.
    - Most of the results are on the edges of the scale (1-2/9-10), the probability of the mass being benign increases from 5 to 10. Practice your clinical judgment.

Support methodology

- How do customers contact you?
- How do you track customer requests?
- How do you share the support landing page? (link/QR code/etc)



Online troubleshooting

Free international phone number

WhatsApp

Email

Support Session

- Tali Buber, DVM.- Veterinary Medical Director
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- Ela Simner- Product Manager
  ela@htbioimaging.com
- Alex Sirotkin – Costumer Success
  Alexandra@htbioimaging.com
- Technical support
  support@htbioImaging.com, 050-2961946

Thank You

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