



HEALTHTRACK[®]

Test Fast. Treat Faster.

**NEXT-MORNING RESULTS
FOR OUTPATIENT INFECTIONS**

Next-Morning PCR Results Eliminates the Guesswork

Empiric Therapy



Limited test options available to drive rapid pathogen targeted treatment

DETECTION



Rapid detection of organisms such as fungi, anaerobes, & resistance genes



Reliance on broad spectrum antibiotics

ANTIBIOTICS

Pathogen specific therapy leads to fewer broad spectrum antibiotics



Multiple lab tests needed to test for all relevant pathogens

COLLECTION

ONE test for a targeted list of relevant pathogens



Slow time to result for send-out lab tests promotes reliance on empiric treatment

TURNAROUND TIME

NEXT-MORNING RESULTS!



► Reduced Duplicative Testing

► Enhanced Clinical Workflow

► Fast & Accurate Results

► Pathogen Targeted Treatment

Traditional SOC Clinic Workflow

Initial Patient Visit

- Use of relevant POC testing
- Consideration of relevant send out test options
- Decision to prescribe antibiotics empirically

Patient takes first round of broad-spectrum antibiotics

Lab Results Received

- Determination if initial treatment was appropriate
- If needed, additional round of antibiotics

Additional Follow-Up Visits Due To:

- Lack of symptom resolution from appropriate treatment
- Antibiotic related adverse events

DAY 0

DAY 1

DAY 2

DAY 3

DAY 5+



HealthTrack
Clinic
Workflow

DAY 0

DAY 1

DAY 2

Initial Patient Visit

- Use of relevant POC testing
- Consideration of relevant send out test options

HealthTrack Lab Results Received

- Appropriate treatment decision made

Completion of a Single Round of Effective Antibiotics (if needed)



HealthTrack
Shortens the
Clinic Workflow

How HealthTrack Is Improving Patient Outcomes — By the Numbers

We surveyed over 600 medical professionals currently using HealthTrack PCR diagnostics — including MDs, PAs, and NPs — across urgent care, women's health, and pediatric practices.

Here's what they had to say:



98%
Saw Improved
Patient
Outcomes

76% faster time to
accurate treatment

64% fewer unnecessary
antibiotic treatments

52% fewer
return visits



**Addressing
Antibiotic
Overuse —
Head-On**

Antibiotic stewardship is more important than ever. Providers using HealthTrack reported:

55% have seen improved accuracy
of antibiotic prescriptions

47% prescribed fewer
antibiotics



**The Bottom Line:
More Satisfied
Patients**

nearly **55%** reported improved
patient satisfaction since
using HealthTrack



HealthTrack provides next-morning PCR testing for the highest-urgency infections in outpatient care, helping clinicians move from guesswork to targeted treatment while supporting antibiotic stewardship

Respiratory Tract Infection

Deep/Non-Healing Wound

Gastrointestinal + Parasite

Urinary Tract Infection

Urethritis/Discharge

Vaginitis

ONE

UNIVERSAL COLLECTION DEVICE



The simplest system imaginable, requiring just one vial regardless of the pathogen.



A collection medium that is not affected by temperature.



A collection medium that doesn't require special refrigeration.



Hyperstable collection medium that inactivates the pathogens for safer, easier processing.



RVIRO

COMMON SIGNS & SYMPTOMS: Acute upper respiratory tract infection, high-grade fever, acute cough, runny nose, pain in throat, wheezing, or nasal congestion
J00, J06.9, R05.1, R50.9, Z20.828, Z20.822

Respiratory syncytial virus
Rhinovirus/Enterovirus

SMRPP

COMMON SIGNS & SYMPTOMS: Acute upper respiratory tract infection, high-grade fever, cough, runny nose, pain in throat, wheezing, nasal congestion, shortness of breath, malaise

Influenza virus A, B
Respiratory syncytial virus

NWPHG

COMMON SIGNS & SYMPTOMS: Pain in throat, fever, pharyngeal edema, patchy tonsillar exudates, and tender/swollen anterior cervical lymph nodes
J00, J02.9, J06.0, R05.1, R05.2, R50.9

Respiratory syncytial virus
Rhinovirus/Enterovirus
Resistance
dfr (A1, A5), sul (1, 2)
ermB, C; mefA
tet B, tet M

ADD-ON: Epstein-Barr Virus (Human Herpesvirus 4, EBV) (NWPHG478), Herpes simplex virus 1 (NWPHG533), Herpes simplex virus 2 (NWPHG534), *Fusobacterium nucleatum*, *necrophorum* (NWPHG397)

RBVB

COMMON SIGNS & SYMPTOMS: Upper or lower respiratory tract infection, including cough, moderate temperature elevation, and mucopurulent sputum

Respiratory syncytial virus
Rhinovirus/Enterovirus
Resistance
dfr (A1, A5), sul (1, 2)
ermB, C; mefA
tet B, tet M

ADD-ON: Epstein-Barr Virus (Human Herpesvirus 4, EBV) (*RBVBP478*)

MESLV702

COMMON SIGNS & SYMPTOMS: Concern of measles with symptoms consistent with an upper respiratory infection, including high fever, cough, runny nose, red watery eyes, and evidence of maculopapular rash and/or Koplik spots. *B05.9, R05.1, R50.9, Z11.59, R21*

Viral Measles

UBASE

COMMON SIGNS & SYMPTOMS: Dysuria, hematuria, urgency of urination, frequency of micturition, or pain of micturition
N30.00, N30.01, N39.1, R30.0, R30.9, R31.0, R35.0, R82.9, R82.998, Z87.440

Resistance
ACT, MIR, FOX, ACC Groups
CTX-M1 (15), M2 (2), M9 (9), M8/25 Groups
dfr (A1, A5), sul (1, 2)
ermB, C; mefA
IMP, NDM, VIM Groups
mecA
OXA-48, OXA-51
qnrA1, A2, B2
SHV, KPC Groups
tet B, tet M
VanA, VanB



IDENTIFYING INFECTIONS

Syndromic Menu Ordering Reference Guide



Urinary Tract Infection + High Risk Sexual Behavior **URINE**

SPECIMEN TYPES: Urine (voided), Urine (catheter), Internal Urethra

COMMON SIGNS & SYMPTOMS: Dysuria, hematuria, urgency of urination, frequency of micturition, pain of micturition, and high risk sexual behavior

N30.00, N30.01, N39.0, N39.1, R30.0, R30.9, R31.0, R35.0, R82.9, R82.998, Z87.440, Z20.2, Z72.51, Z72.52

Bacterial

Acinetobacter baumannii
Chlamydia trachomatis
Citrobacter freundii
Enterobacter cloacae complex, Klebsiella (Enterobacter) aerogenes
Enterococcus faecalis, faecium
Escherichia coli
Klebsiella pneumoniae, oxytoca
Morganella morganii
Mycoplasma genitalium
Mycoplasma hominis
Neisseria gonorrhoeae
Proteus mirabilis, vulgaris
Pseudomonas aeruginosa

Serratia marcescens
Staphylococcus aureus
Staphylococcus epidermidis, haemolyticus, lugdunensis
Staphylococcus saprophyticus
Streptococcus agalactiae (Group B Strep)
Ureaplasma parvum
Ureaplasma urealyticum

Protozoal

Trichomonas vaginalis

Fungal

Candida albicans, parapsilosis, tropicalis
Candida glabrata (Nakaseomyces glabratus)
Candida krusei (Pichia kudriavzevii)

Resistance

ACT, MIR, FOX, ACC Groups
CTX-M1 (15), M2 (2), M9 (9), M8/25 Groups
dfr (A1, A5), sul (1, 2)
ermB, C; mefA
IMP, NDM, VIM Groups
mecA
OXA-48, OXA-51
qnrA1, A2, B2
SHV, KPC Groups
tet B, tet M
VanA, VanB



Urethritis / Discharge **URSDC**

SPECIMEN TYPES: Urine (voided), Internal Urethra

COMMON SIGNS & SYMPTOMS: Pain with urination, itching, burning, and discharge

R36.9, R30.0, R30.9, R31.9, Z20.2, Z72.51, Z72.52

Bacterial

Chlamydia trachomatis
Mycoplasma genitalium
Mycoplasma hominis
Neisseria gonorrhoeae
Ureaplasma parvum
Ureaplasma urealyticum

Viral

Herpes simplex virus 1
Herpes simplex virus 2

Protozoal

Trichomonas vaginalis

Resistance

dfr (A1, A5), sul (1, 2)
ermB, C; mefA
tet B, tet M

Vaginitis **VGITS**

SPECIMEN TYPES: Vaginal, Cervical/Endometrial, Vulva/Labia/Vestibule/Perineal, Urine (voided)

COMMON SIGNS & SYMPTOMS: Vaginal discharge, odor, itching, irritation, bacterial vaginosis, vulvovaginal candidiasis

N76.0, N76.1, N76.89, N77.1, N93.9, R30.0, Z72.51

Bacterial

BVAB2, 3 (Bacterial vaginosis-associated bacteria 2, 3);
Mobiluncus spp.
Chlamydia trachomatis
Fannyhessea (Atopobium) vaginae
Gardnerella vaginalis
Megaspheara (types 1, 2)
Neisseria gonorrhoeae

Viral

Herpes simplex virus 1
Herpes simplex virus 2

Protozoal

Trichomonas vaginalis

Fungal

Candida albicans, parapsilosis, tropicalis

Candida glabrata (Nakaseomyces glabratus)
Candida krusei (Pichia kudriavzevii)

Resistance

dfr (A1, A5), sul (1, 2)
ermB, C; mefA
tet B, tet M

Recurrent Vaginitis **URDVS**

SPECIMEN TYPES: Vaginal, Cervical/Endometrial, Vulva/Labia/Vestibule/Perineal, Urine (voided)

COMMON SIGNS & SYMPTOMS: Pain with urination, burning, urethral discharge, vaginal discharge, odor, itching, irritation, or recurrent vaginitis

N76.1, N76.89, N77.1, N93.9, R30.0, Z72.51

Bacterial

BVAB2, 3 (Bacterial vaginosis-associated bacteria 2, 3);
Mobiluncus spp.
Chlamydia trachomatis
Fannyhessea (Atopobium) vaginae
Gardnerella vaginalis
Megaspheara (types 1, 2)
Mycoplasma genitalium
Mycoplasma hominis

Neisseria gonorrhoeae
Ureaplasma parvum
Ureaplasma urealyticum

Viral

Herpes simplex virus 1
Herpes simplex virus 2

Protozoal

Trichomonas vaginalis

Fungal

Candida albicans, parapsilosis, tropicalis
Candida glabrata (Nakaseomyces glabratus)
Candida krusei (Pichia kudriavzevii)

Resistance

dfr (A1, A5), sul (1, 2)
ermB, C; mefA
tet B, tet M

Genital Lesion **GNLSN**

SPECIMEN TYPES: Genital Ulcer/Lesion, Vaginal, Cervical/Endometrial, Rectal/Anal, Oropharynx/Throat/Oral, Ulcer/Lesion

COMMON SIGNS & SYMPTOMS: Genital ulcer or lesion

N48.5, N76.6, N50.9, N90.89, Z20.2, Z72.51, Z72.52

Bacterial

Chlamydia trachomatis
Haemophilus ducreyi (Chancroid)
Treponema pallidum (Syphilis)

Viral

Herpes simplex virus 1
Herpes simplex virus 2
Mpox (Monkeypox)

Resistance

dfr (A1, A5), sul (1, 2)
ermB, C; mefA
tet B, tet M

CGT **NWCGT**

SPECIMEN TYPES: Urine (voided), Urine (catheter), Internal Urethra, Vaginal, Cervical/Endometrial, Vulva/Labia/Vestibule/Perineal, Rectal/Anal, Penile Meatus, Genital skin, Oropharynx/Throat/Oral

COMMON SIGNS & SYMPTOMS: High risk heterosexual behavior, high risk homosexual behavior, or suspected exposure to a sexually transmitted infection

Z11.3, Z20.2, Z72.51, Z72.52

Bacterial

Chlamydia trachomatis
Neisseria gonorrhoeae

Protozoal

Trichomonas vaginalis

IDENTIFYING INFECTIONS

Syndromic Menu Ordering Reference Guide



Adult Diarrheal Disease **GSTRO**

SPECIMEN TYPES: Rectal (fecal), Stool

COMMON SIGNS & SYMPTOMS: Community-acquired diarrhea, pt has significant fever + bloody stools, <7 days of symptoms. Concern of parasitic infection if patient has symptoms >14 days
R19.7, R10.13, R10.30, A09

Bacterial

Campylobacter coli, jejuni, upsaliensis
Enteroinvasive E. coli (EIEC) / Shigella spp.
Enteropathogenic E. coli (EPEC)
Enterotoxigenic E. coli (ETEC)
Salmonella
Shiga toxin-producing E. coli (STEC)
Shiga toxin-producing E. coli O157 (STEC O157)
Vibrio cholerae, parahaemolyticus, vulnificus

Yersinia enterocolitica

Viral

Adenovirus F40/F41
Norovirus (Genogroup 1, 2)

Resistance

ACT, MIR, FOX, ACC Groups
CTX-M1 (15), M2 (2), M9 (9), M8/25 Groups
dfr (A1, A5), sul (1, 2)
ermB, C; mefA

IMP, NDM, VIM Groups

OXA-48, OXA-51
qnrA1, A2, B2
SHV, KPC Groups
tet B, tet M

+ ADD-ON: Clostridioides difficile (toxins A, B), VanA, VanB (GSTROCV), (ALL PARASITES: GSTROAO), Cryptosporidium (GSTRO475), Cyclospora cayetanensis (GSTRO476), Dientamoeba fragilis (GSTRO477), Entamoeba histolytica (GSTRO559), Giardia lamblia (intestinalis) (GSTRO481), Microsporidium (Enterocytozoon bienusi, Encephalitozoon intestinalis) (GSTRO483)

Pediatric Diarrheal Disease **PEDGI**

SPECIMEN TYPES: Rectal (fecal), Stool

COMMON SIGNS & SYMPTOMS: Community-acquired pediatric diarrhea, pt has significant fever + bloody stools, <7 days of symptoms. Concern of parasitic infection if patient has symptoms >14 days.
R19.7, R10.13, R10.30, A09

Bacterial

Campylobacter coli, jejuni, upsaliensis
Enteroinvasive E. coli (EIEC) / Shigella spp.
Enterotoxigenic E. coli (ETEC)
Salmonella
Shiga toxin-producing E. coli (STEC)
Shiga toxin-producing E. coli O157 (STEC O157)
Vibrio cholerae, parahaemolyticus, vulnificus

Viral

Adenovirus F40/F41
Astrovirus
Norovirus (Genogroup 1, 2)
Rotavirus A

Resistance

ACT, MIR, FOX, ACC Groups
CTX-M1 (15), M2 (2), M9 (9), M8/25 Groups

dfr (A1, A5), sul (1, 2)

ermB, C; mefA
IMP, NDM, VIM Groups
OXA-48, OXA-51
qnrA1, A2, B2
SHV, KPC Groups
tet B, tet M

+ ADD-ON: Clostridioides difficile (toxins A, B), VanA, VanB (PEDGICV), (ALL PARASITES: PEDGIAO), Cryptosporidium (PEDGI475), Cyclospora cayetanensis (PEDGI476), Dientamoeba fragilis (PEDGI477), Entamoeba histolytica (PEDGI559), Giardia lamblia (intestinalis) (PEDGI481), Microsporidium (Enterocytozoon bienusi, Encephalitozoon intestinalis) (PEDGI483)



Superficial Wound **ACWUN**

SWAB SITES: Wound Swabs (all locations)

COMMON SIGNS & SYMPTOMS: Recent wound from trauma with erythema, edema, heat, purulent exudate, and/or pain
B00.9, B02.9, L01.00, L08.9, L30.9, L53.9, R60.0, S81.802A, S81.801A

Bacterial

Acinetobacter baumannii
Bacteroides fragilis, Phocaeicola vulgatus
Citrobacter freundii
Clostridium perfringens, novyi, septicum
Enterobacter cloacae complex, Klebsiella (Enterobacter) aerogenes
Enterococcus faecalis, faecium
Escherichia coli
Klebsiella pneumoniae, oxytoca

Proteus mirabilis, vulgaris
Pseudomonas aeruginosa
Serratia marcescens
Staphylococcus aureus
Streptococcus agalactiae (Group B Strep)
Streptococcus pyogenes (Group A Strep)
Vibrio cholerae, parahaemolyticus, vulnificus

Resistance

ACT, MIR, FOX, ACC Groups
CTX-M1 (15), M2 (2), M9 (9), M8/25 Groups

dfr (A1, A5), sul (1, 2)

ermB, C; mefA
IMP, NDM, VIM Groups
mecA
OXA-48, OXA-51
qnrA1, A2, B2
SHV, KPC Groups
tet B, tet M
VanA, VanB

+ ADD-ON: Mpox (Monkeypox) (ACWUN536), Herpes simplex virus 1 (ACWUN533), Herpes simplex virus 2 (ACWUN534), Varicella zoster virus (Human Herpesvirus 3, VZV) (ACWUN412)

Deep/Non-Healing Wound **WOUND**

SPECIMEN TYPES: Wound Swabs (all locations)

COMMON SIGNS & SYMPTOMS: Diabetic ulcer, tunneling wound, skin erythema, edema, warmth, abscess, or cellulitis
B00.9, B02.9, L01.00, L02.214, L02.818, L03.113, L03.114, L03.115, L03.116, L03.90, L30.4, L30.8, L89.144, L97.512, L97.522, S81.802A, S81.801

Bacterial

Acinetobacter baumannii
Bacteroides fragilis, Phocaeicola vulgatus
Citrobacter freundii
Clostridium perfringens, novyi, septicum
Corynebacterium jeikeium, striatum, tuberculoearicum
Cutibacterium acnes
Enterobacter cloacae complex, Klebsiella (Enterobacter) aerogenes
Enterococcus faecalis, faecium
Escherichia coli
Klebsiella pneumoniae, oxytoca

Peptostreptococcus anaerobius, Peptoniphilus asaccharolyticus, Finegoldia magna, Anaerococcus prevotii

Proteus mirabilis, vulgaris
Pseudomonas aeruginosa
Serratia marcescens
Staphylococcus aureus
Staphylococcus epidermidis, haemolyticus, lugdunensis, saprophyticus
Streptococcus agalactiae (Group B Strep)
Streptococcus pyogenes (Group A Strep)
Vibrio cholerae, parahaemolyticus, vulnificus

Viral

Herpes simplex virus 1

Herpes simplex virus 2
Varicella zoster virus (Human Herpesvirus 3, VZV)

Resistance

ACT, MIR, FOX, ACC Groups
CTX-M1 (15), M2 (2), M9 (9), M8/25 Groups
dfr (A1, A5), sul (1, 2)
ermB, C; mefA
IMP, NDM, VIM Groups
mecA
OXA-48, OXA-51
qnrA1, A2, B2
SHV, KPC Groups
tet B, tet M
VanA, VanB

Tinea **TNWUN**

SPECIMEN TYPES: Wound Swabs (all locations)

COMMON SIGNS & SYMPTOMS: Scaly ring-shaped area, itchiness, scaly skin, or noninflamed dermatosis on the body or hair follicle (tinea capitis or tinea barbae)
B35.0, B35.1, B35.3, B35.4, B35.8

Fungal

Candida albicans, glabrata, parapsilosis, tropicalis
Epidermophyton floccosum
Malassezia furfur, restricta, sympodialis, globosa

Microsporum audouinii, canis; Nannizzia gypsea
Trichophyton mentagrophytes/interdigitale, rubrum, tonsurans, violaceum

+ ADD-ON: Candidoizma (Candida) auris (TNWUN506)

MOLECULAR PATHOLOGY REPORT

FACILITY INFORMATION Facility Name: Facility Demo, LLC Provider Name: PHYSICIAN DEMONSTRATION M.D. NPI: 1000000000 Address: 1500 I-35W, Denton, TX 76207 Denton, TX 76207 Phone: 940-383-2223	PATIENT INFORMATION Name: HTRXTEST, TEST DOB: 03/31/1982 Gender at Birth: Female Address: 1500 Interstate 35W Denton, TX 76207, , Phone: (940) 383-2223 Race: White Ethnicity: Not Hispanic or Latino	SPECIMEN INFORMATION Lab Accession Number: 9433672 Date Collected: 11/15/2023 Date Received by Lab: 11/16/2023 Date Reported: 11/16/2023 Sample Type: Urinary Tract Area of Interest: Urine (Voided) Cross Reference #: Order Category: Urinary Tract Infection; Antibiotic Resistance
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Urinary Tract Infection Pathogens Detected

Bacterial Pathogens

Enterococcus spp (faecalis, faecium)

Escherichia coli

Results

Detected

Detected

Microbial Load*

>100,000 CFU/mL Equivalent

<100,000 CFU/mL Equivalent

Quick Summary Antibiotic Table Legend:

 (++) : BEST ACTIVITY
 (+) : GOOD ACTIVITY
 (±) : VARIABLE ACTIVITY

		Enterococcus spp	Escherichia coli
Penicillins	Ampicillin (IV/IM/po)	+	±
	Amoxicillin (po)	+	±
	Amoxicillin Clavulanic acid (po)	+	+
Fluoroquinolones	Ciprofloxacin (po/OT/OP/IV)	±	+
	Delafloxacin (po/IV)	+	+
	Ofloxacin (po/OT/OP)	±	+
	Levofloxacin (po/OP/IV)	+	+
	Moxifloxacin (po/OP/IV)	+	+
	Norfloxacin (po)	+	+
	Gemifloxacin (po)	+	+
Tetracyclines	Doxycycline (po/IV)	±	±
	Minocycline (po/IV)	±	±
	Omadacycline (po/IV)	+	+
	Tetracycline (po)	±	±
Nitrofurantoin	Nitrofurantoin (Macrobid) (po)	+	+
Phosphidic acid derivative	Fosfomycin (po)	±	+

Quick Summary Table above shows potentially effective oral antibiotic(s) for the above-noted bacteria (assumes mono-antimicrobial therapy, unless otherwise specified). Detected antimicrobial resistance gene(s) (as applicable) has(have) been integrated into antibiotic selection. Based on patient-specific clinical data, multi-antimicrobial therapy might be indicated in some cases (see Summary Antibigram below).***

Antimicrobial Resistance Genes Detected

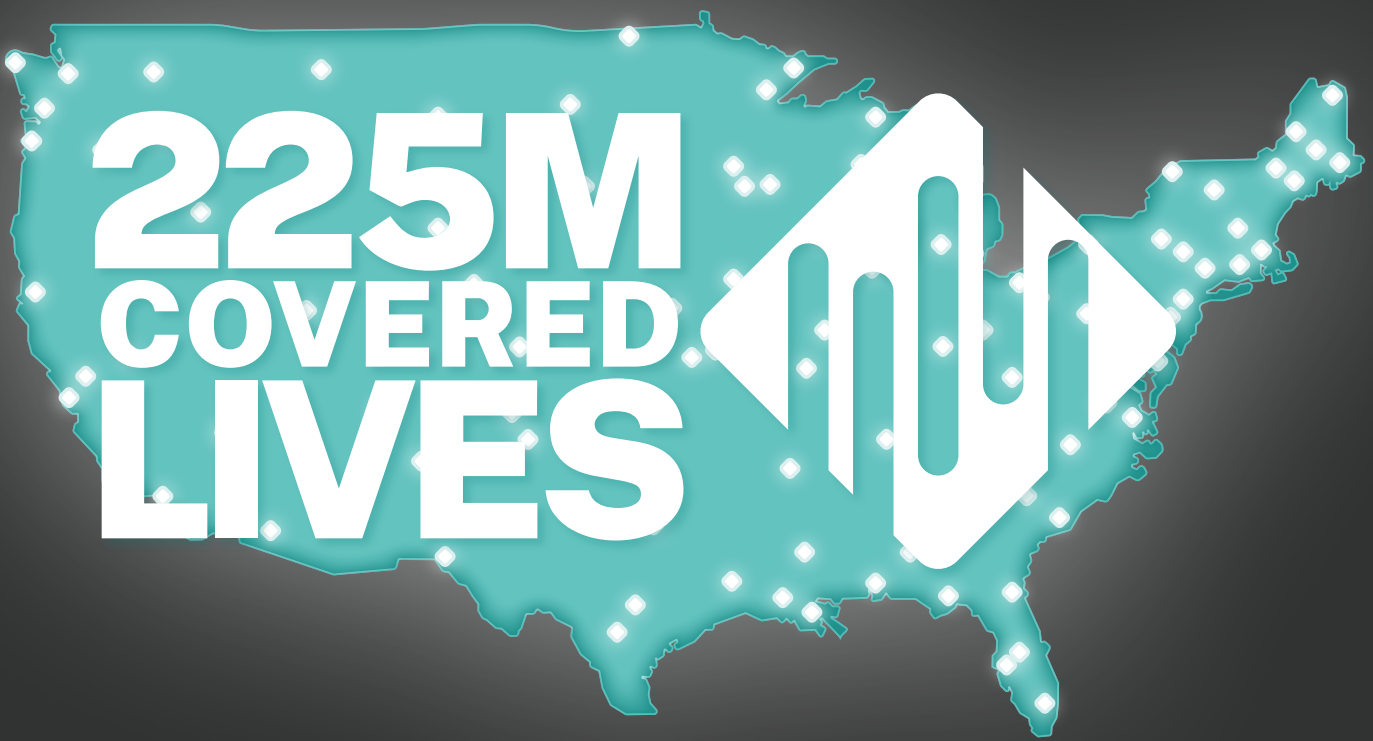
dfr (A1, A5), sul (1,2)

! Potential resistance to Trimethoprim and/or Sulfamethoxazole.

Accessibility Through Health Plan Partnerships

Hundreds of national and regional health plans contract with HealthTrack!

In-network status may not apply for all health plan types, in all geographies, or for all health plan network products. We encourage ordering providers and patients to check the patient's health plan before services are ordered.



**225M
COVERED
LIVES**

* Please refer to our In-Network Payor List for additional information.

AFFORDABLE TESTING. FAST RESULTS.

Financial Assistance

Compassionate billing practices including payment plans, prompt pay discounts, and financial hardship considerations available.



Nationwide Coverage

Our laboratory testing is covered by most insurance companies, including Medicare and Medicaid.



Payment Options

Pay online, by text, or by mobile—Paying your bill is fast and easy!*



* (An Explanation of Benefits (EOB) is not a bill; please wait until a statement arrives)

QUARTERLY Performance Report



KEY INSIGHTS TO HELP HEALTHCARE PROVIDERS IMPROVE PATIENT CARE

On-time performance:
from test to result

**Test affordability and
payor landscape**

**Clinical value: menu
usage and pathogen
positivity**

Specimen error report:
handling or ordering issues that
impact next-morning results

Clinical Value GETTING PEOPLE HEALTHIER FASTER



COMPREHENSIVE PCR MENU

A complete testing menu targets the most relevant pathogens.



ACCURACY

PCR testing detects what cultures miss or can't detect.



TARGETED

Patient-specific antibiotic resistance profile avoids inaccurate / incorrect antibiotic use.



PROVEN EXPERIENCE

Over 8 million patients treated.

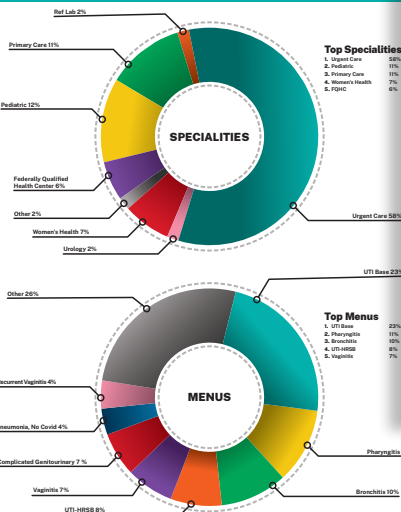


DEDICATED SERVICE

RESPIRATORY TRENDS REPORT

Explore the latest in Respiratory Trends and stay ahead with our comprehensive report on emerging patterns in respiratory health based on our real-time positivity data.

Specialty/Menu Utilization 07/01/2025 - 09/30/2025



Cost AFFORDABLE INFECTION TESTING

04/01/25-09/30/25

Patient Responsibility	Percentage of Samples
0	80.6
*1 - *75	7.2*
*76 - *150	3.5*
151+	8.8
Percentage of Samples with Patient Bill	
19.4%	80.6%

Patient Responsibility	Percentage of Samples
0	83.1
*1 - *75	6.1*
*76 - *150	3.4*
151+	7.4
Percentage of Samples with Patient Bill	
16.8%	83.1%

Patient Responsibility	Percentage of Samples
0	80.4
*1 - *75	4.8*
*76 - *150	7.4*
151+	7.4
Percentage of Samples with Patient Bill	
19.6%	80.4%

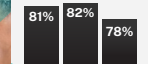
Patient Responsibility	Percentage of Samples
0	77.5
*1 - *75	8.5*
*76 - *150	3.0*
151+	10.9
Percentage of Samples with Patient Bill	
22.5%	77.5%

On-Time Percentage & UPS Placard Program

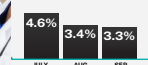
HEALTHTRACK[®] VS. TRADITIONAL

NEXT-MORNING RESULTS TURNAROUND TIME Results typically take an average of three or more days.

TAT from Collected to Resulted



UPS Driven Errors



Returns



Cumulative by Hour

On-Time Percentage	July August September
By 9am	30%
By 10am	48%
By 11am	67%
By 12pm	82%
By 1pm	90%
By 2pm	92%
By 3pm	94%
By 4pm	94%
By 5pm	94%

"UPS Healthcare has been essential in bringing next-morning, life-changing diagnostics to clinicians and patients nationwide. From the moment a physician puts a sample in a bag and indicates it's ready for pickup, their lights up our dashboard, so we know those samples are coming. UPS is already tracking their pickup, and you can watch them travel to Louisville and arrive at the facility."

Martin Price, CEO

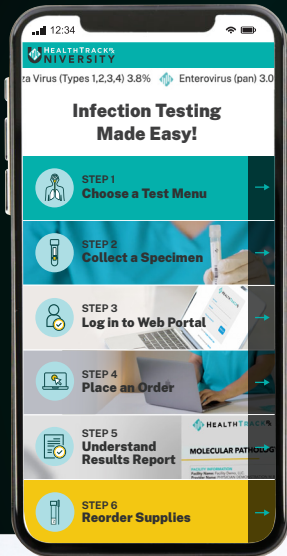


**70% OF TESTS RESULTED
BY 1 PM THE NEXT DAY!**

* Data is available at national, state, and clinic levels.

Not sure where to start?

We've got you.



- ▶ Complete new client paperwork
- ▶ Identify your UPS Placard pickup
- ▶ Schedule a time with your local rep to finish setup
- ▶ Start ordering with HealthTrack

HealthTrack offers white glove service to make onboarding effortless. When you sign on, we guide you every step of the way so you can get patients healthier, faster.

Have Clinical Questions Regarding our Testing?

The HealthTrack Medical Science Liaison team is here to help!

- ▶ Menu education
- ▶ Patient Report Reviews
- ▶ Specific Pathogen Questions
- ▶ Information on Relevant Guidelines
- ▶ Research Questions
- ▶ And much more!

Clinical Expert Line: 940-383-2223



The First National Lab Purpose Built For Next-Morning Results



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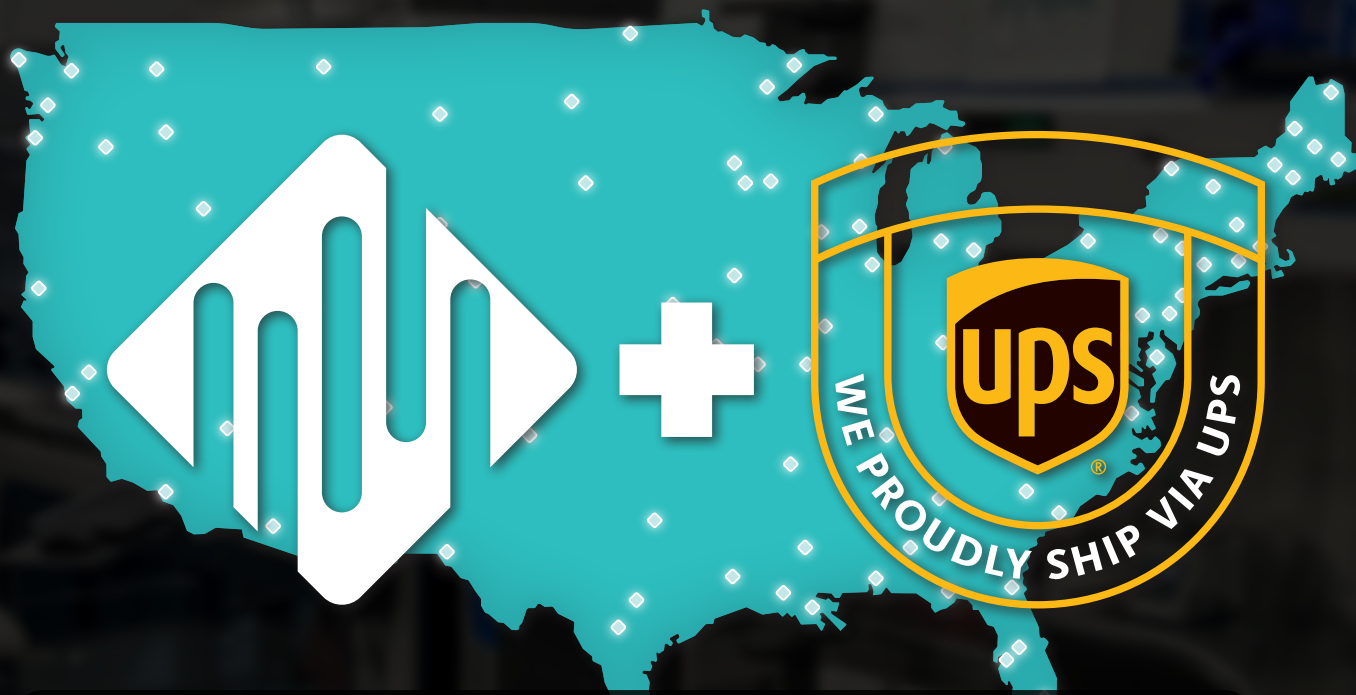
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