

Automated FIT Testing Procedure Flow Process

Easy Implementation in lab - 1/2 day installation



Sample is collected in the proprietary sample collection device



Sample is bar code labeled and placed on the OC-Auto Micro 80 iFOB sample rack



Sample rack is loaded into the OC-Auto Micro 80 iFOB analyzer



Press "start" button to begin procedure



Patient results print directly from the analyzer or can be transmitted directly to your LIS system

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1. American Cancer Society, www.cancer.org
2. Nagase Medical Update October 2001
3. Colorectal Cancer Screening Programme by Faecal Occult Blood Test in Tuscany: First Round Results. G. Grazzini et al. European Journal of Cancer Prevention 2004, Vol 13 No 1, 19-26.
4. Colon Cancer Screening Guidelines 2005, August 2005
5. Eiken Chemical Company
6. 2006 Cancer Facts and Figures
7. Data on file internally at Polymedco CDP, LLC.
Chart: American Cancer Society; all data exclusive to U.S.; colorectal cancer screening rate as of 2008 (percentage excludes endoscopies); screening rate would be 53% including endoscopies
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How do you detect more incidences of Colorectal Cancer?



OC-Auto[®] Micro 80 iFOB

The New Immunoassay Colorectal Cancer Screening Method

Superior Assay Performance

Published papers have shown the Immunoassay Fecal Occult Blood screening method provides increased sensitivity and specificity over current screening methods. This improvement directs many more of the “right” patients to colonoscopy, leading to the earlier detection of polyps and colorectal cancer. In fact, published literature has shown that there can be as much as a 30% improvement in detecting early stage cancer over what is currently observed in the U.S. (The American Cancer Society states 39% of colorectal cancers are detected in the early stage¹ vs. 66% in Japan² using Polymedco’s methodology).

Increased Patient Compliance

By eliminating dietary and medicinal restrictions and by only requiring a single sample collection, patients are able to perform the collection with ease and no disruption to their daily routine. The result is a significant increase in patient compliance.³ “The best screening method is the one that gets done.”⁴

Enhanced Patient Outcomes

Increased sensitivity, specificity, and patient compliance equal less false positive results and more of the right patients are referred to colonoscopy.

Innovative Collection Device and Personal Use Packs Available

Enables the physician or the patient to easily collect a sample and return the sample to the lab or physician office for quick and accurate results. The patient collects one single sample from one stool instead of three separate specimens.

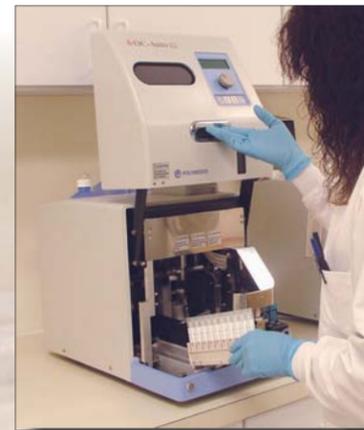


No Dietary Restrictions

Unlike the Guaiac test, OC-Auto requires no dietary or medicinal restrictions.

OC-Auto[®] Micro 80 iFOB

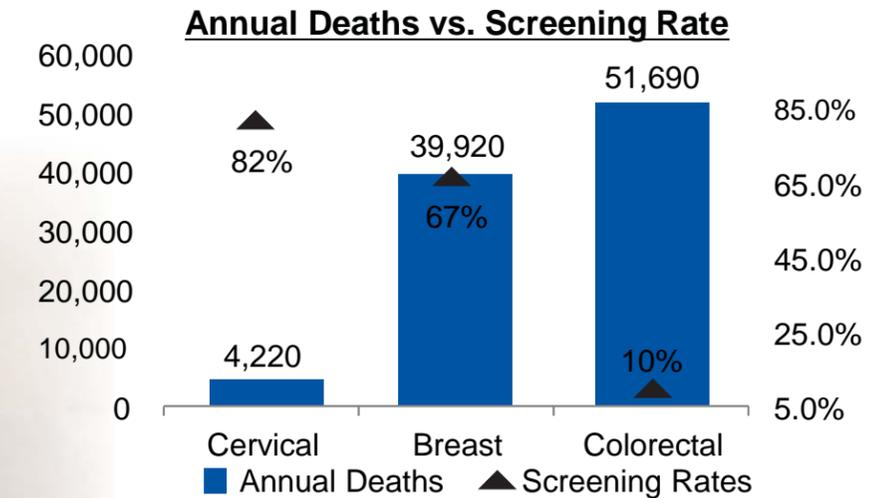
Over 500 million tests have been performed worldwide using this methodology.⁵ This advanced immunoassay specifically detects human hemoglobin. The instrument measures 80 samples per hour and its compact design is ideal for a small workstation (width 12.5” x depth 21” x height 16.5”; weight 57 lbs)



The sample is collected and closed by the patient and never reopened. The instrument measures the closed sample collection devices. The laboratory technician never comes in contact with the sample.



Excellent reimbursement and increased compliance combine to yield significant financial benefits for healthcare providers using iFOB testing (as compared to Guaiac testing). Reimbursement rates for the iFOB screening test average \$27 nationally (\$22 from Medicare), versus \$4 for the Guaiac test.



Colorectal cancer screening is one of the most under-utilized forms of cancer screening. Colorectal cancer also has the second highest death rate among cancers, largely due to the low rate of screening. If detected at an early stage, 90% of all Colorectal cancer deaths are preventable.⁶

A large institution has shown that 99.8% of patients have returned the collection device correctly, resulting in improved compliance with a positivity rate of about 5% and fewer unnecessary colonoscopies performed.⁷

In a separate study, patients (962) were provided a questionnaire to complete and return with the test device to measure acceptance and compliance with the automated test method. 90% (865/961) of respondents reported that the automated test collection device was simple to very easy to use, and 93% of respondents that had previously performed the Guaiac test collection preferred the automated test collection procedure.⁷

A representative of a large medical center stated that they are impressed with the iFOB system’s performance. Besides removing the subjectivity of reading the test results, the patient results are automatically updated into the records from the laboratory information system, thereby eliminating transcription errors.⁷

A laboratory director stated that the automated immunoassay format ensures that the quality control data from the instrument is consistently collected, streamlining laboratory functions and verification of results.⁷