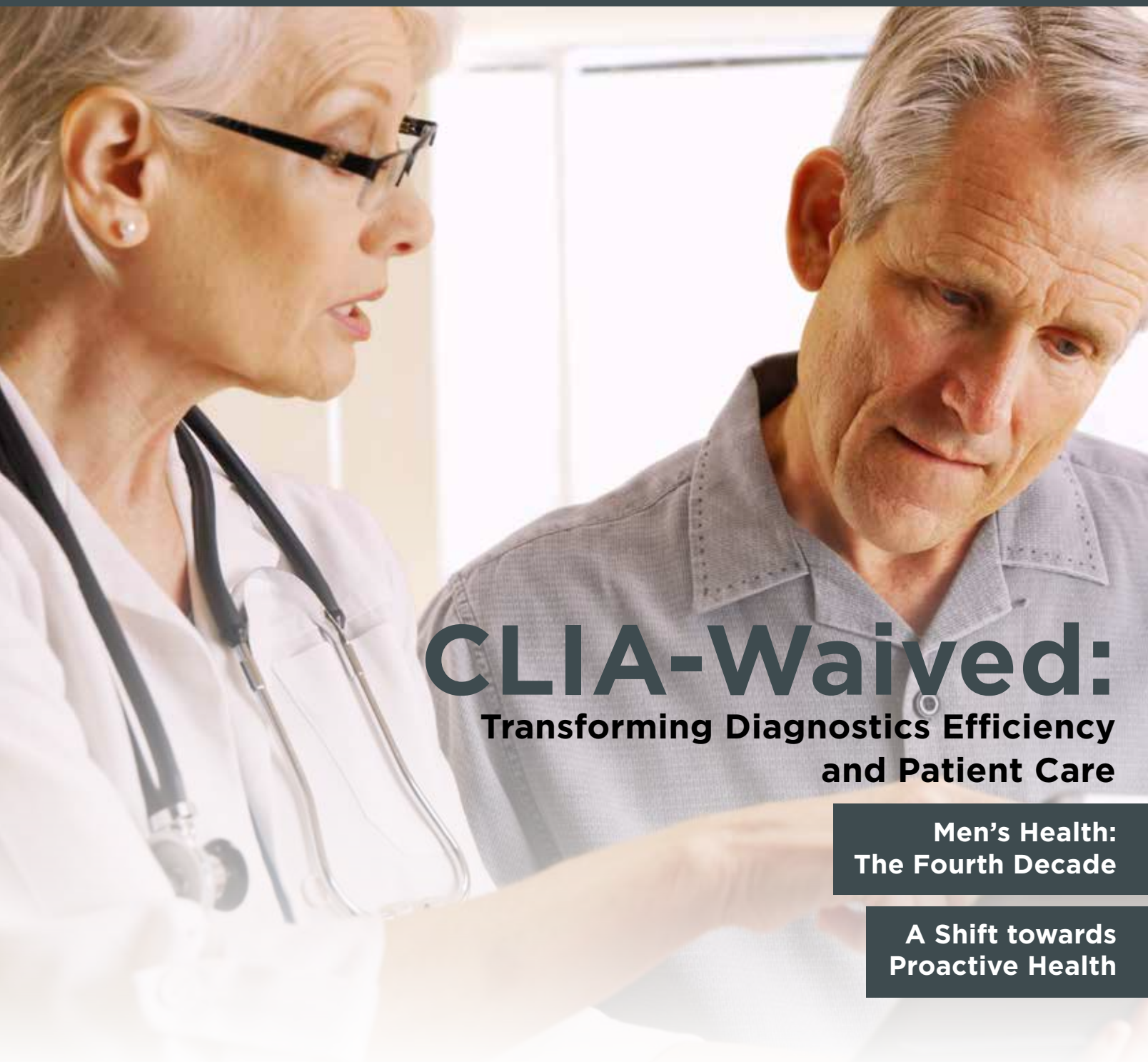
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CLIA-Waived:
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Men's Health: The Fourth Decade

A Shift towards Proactive Health

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"PAD IS ASYMPTOMATIC IN 75% OF ELDERLY PATIENTS." [1]

IN PRIMARY CARE: "THE RISK OF MORTALITY WAS SIMILAR IN SYMPTOMATIC AND ASYMPTOMATIC PATIENTS WITH PAD" [2]

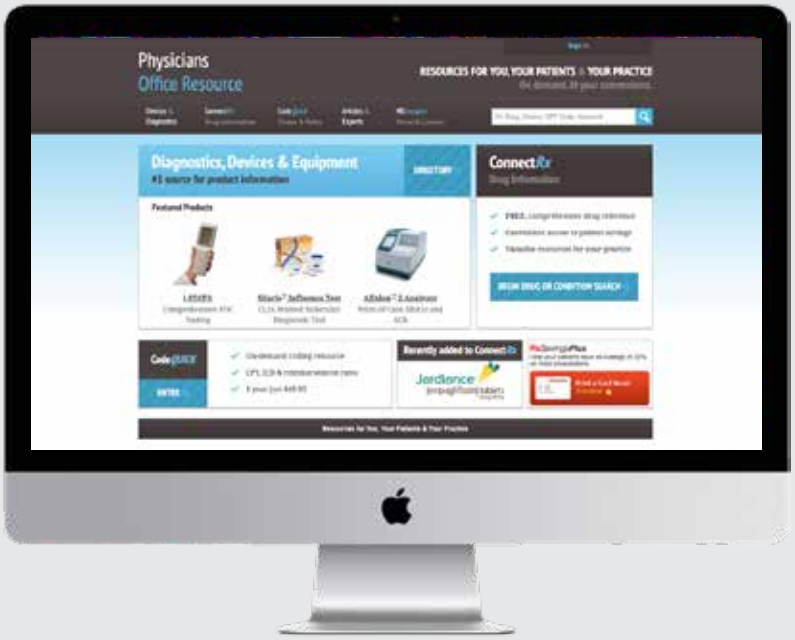
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6

CLIA-Waived Laboratory Testing: Transforming diagnostic efficiency and patient care

CLIA-waived laboratory testing has revolutionized point-of-care diagnostics in outpatient settings. and congestion.

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The decade of the 40s marks a transitional phase for many men. While many remain outwardly healthy, this age group often begins to experience the early manifestations of chronic conditions.

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The Future of Preventive Medicine in the U.S.: A Shift Toward Proactive Health

For generations, the U.S. healthcare system has operated largely in reaction mode—intervening after symptoms present, after disease progresses...

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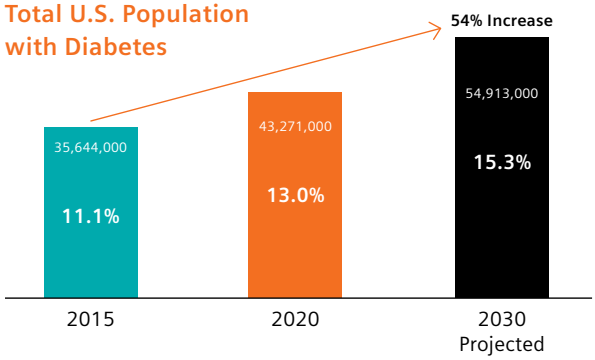
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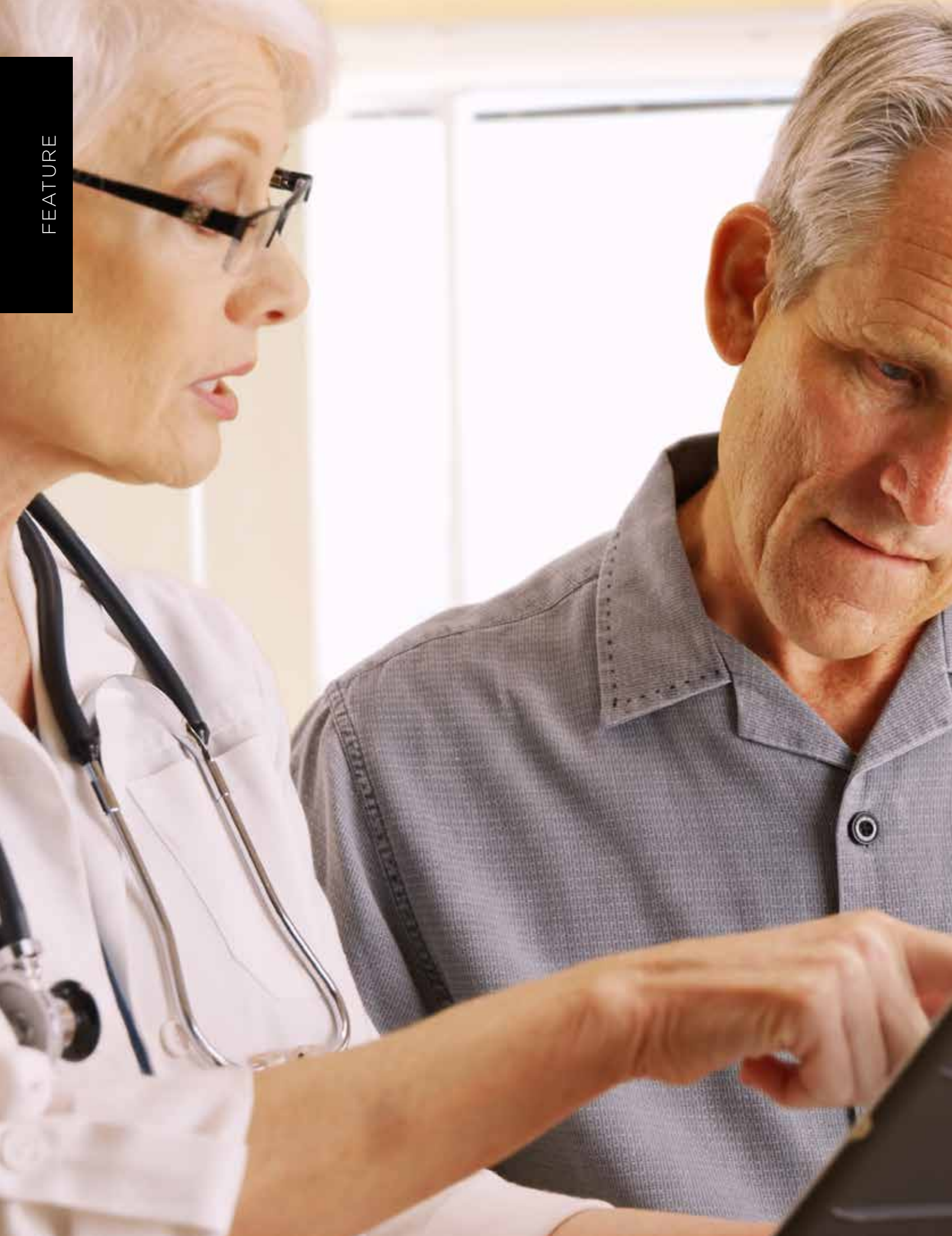
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CLIA-Waived Laboratory Testing:

TRANSFORMING DIAGNOSTIC EFFICIENCY AND PATIENT CARE

BY MATTHEW BAKER, STAFF WRITER, PHYSICIANS OFFICE RESOURCE

Abstract
CLIA-waived laboratory testing has revolutionized point-of-care diagnostics in outpatient settings. Designed for simplicity, speed, and safety, these tests empower physicians to deliver faster diagnoses and treatment decisions with minimal regulatory burden. As diagnostic technology advances, a new wave of CLIA-waived tests is transforming clinical practice by enhancing chronic disease management, streamlining workflows, and improving patient outcomes. This article reviews the current landscape, key benefits, and future trends in CLIA-waived testing, with a focus on new innovations that are redefining diagnostics in physician offices and urgent care clinics.

Introduction

In the era of value-based care and consumer-driven healthcare, physicians must balance quality, efficiency, and patient satisfaction. Laboratory testing, a cornerstone of diagnosis and treatment planning, often creates a bottleneck due to delays in sample transport and result turnaround from external labs. CLIA-waived tests address this gap by enabling rapid, accurate testing at the point of care, allowing for same-visit clinical decisions.

Physician offices and urgent care centers are uniquely positioned to benefit from this testing modality, and the availability of new CLIA-waived platforms is expanding the scope of what can be achieved in real time.

Understanding CLIA and Waived Test Designation

The Clinical Laboratory Improvement Amendments (CLIA) of 1988 established federal quality standards for laboratory testing. Under CLIA, diagnostic tests are categorized by complexity:

- Waived
- Moderate complexity
- High complexity

CLIA-waived tests are those deemed by the FDA to be simple and low-risk, with a negligible chance of producing incorrect results when performed correctly. These tests are authorized for use in non-laboratory environments, provided the facility holds a CLIA

Certificate of Waiver

Currently, more than 130 unique tests carry CLIA-waived status, encompassing a broad range of conditions from infectious diseases to metabolic disorders.

Advantages of CLIA-Waived Testing in Ambulatory Settings

1. Rapid Results Enable Same-Visit Care
Turnaround time is one of the greatest strengths of CLIA-waived testing. Conditions like streptococcal pharyngitis, influenza, COVID-19, and urinary tract infections can be diagnosed and treated during a single visit, eliminating the need for follow-up calls or additional visits.

This is particularly advantageous in urgent care settings, where immediate answers are expected and continuity of care may be limited.

2. Enhanced Patient Satisfaction and Clinical Engagement
Point-of-care testing reduces uncertainty and wait times, leading to improved patient satisfaction. Patients are more likely to adhere to a treatment plan when diagnoses are explained and initiated immediately. This reinforces the physician-patient relationship and supports long-term health outcomes.

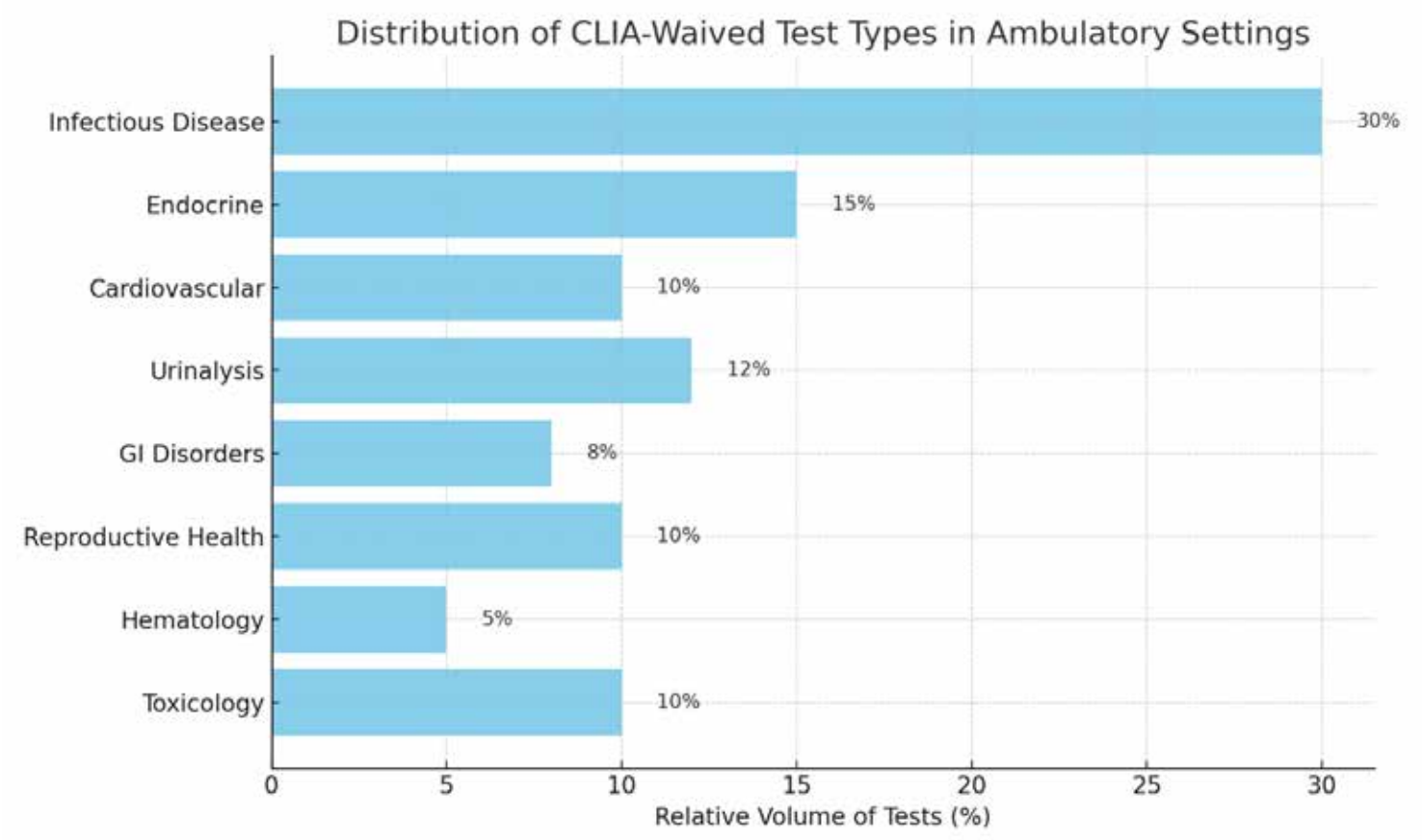
3. Operational and Financial Efficiency
On-site testing eliminates outsourcing fees, reduces staffing demands for follow-up communications, and can streamline

FIGURE 1

Common CLIA-Waived Tests in Use

Below is a representative sample of commonly performed CLIA-waived tests in outpatient settings:

CATEGORY	TEST EXAMPLES
Infectious Disease	Rapid Strep A, Influenza A/B, COVID-19 antigen
Endocrine	Blood glucose, HbA1c
Cardiovascular	Lipid panel (fingerstick)
Urinalysis	Dipstick, microalbumin
GI Disorders	Fecal occult blood, H. pylori breath test
Reproductive Health	Urine hCG pregnancy test
Hematology/Coagulation	PT/INR (e.g., CoaguChek XS)
Toxicology	Urine drug screens



These tests are frequently employed in primary care workflows, wellness exams, and acute illness visits.

clinic workflows. Many CLIA-waived tests are reimbursable under Medicare and private insurance, creating opportunities for revenue capture.

Practices operating under value-based care contracts also benefit from tighter control over quality metrics related to chronic disease management and preventive care.

4. Real-Time Chronic Disease Monitoring
Tests such as HbA1c and lipid panels can be conducted during regular checkups, enabling proactive management of diabetes, cardiovascular risk, and other chronic conditions. This allows immediate therapeutic adjustments based on real-time biometrics.

Innovations in CLIA-Waived Testing: What's New in 2024–2025 (See figure 1)

1. Molecular Respiratory Panels
Molecular testing is no longer limited to centralized laboratories. New CLIA-waived molecular diagnostic platforms now offer PCR-level accuracy at the point of care. Many of these tests can detect multiple respiratory pathogens, such as:
- SARS-CoV-2
- Influenza A and B
- Respiratory syncytial virus (RSV)

This is a major leap in diagnostic capability, particularly during flu seasons and pandemics.

2. Combo Testing: COVID-19 + Flu + RSV
Multiplex lateral flow tests from multiple diagnostics companies now offer simultaneous detection of three major respiratory viruses from a single nasal swab. These combo tests are CLIA-waived and often deliver results within 15–30 minutes.

This simplifies triage decisions, reduces unnecessary antibiotic use, and enables appropriate isolation measures.

3. HbA1c and Lipid Testing Advancements
Diagnostic devices and tests from major brands now offer improved precision, integrated quality control, and EHR compatibility for quantitative HbA1c measurement. These devices allow same-visit testing and therapeutic titration for diabetic patients.

4. Non-Invasive H. pylori Testing
There are multiple CLIA-waived options for H. pylori detection. They provide a non-invasive alternative to endoscopy or stool antigen tests and deliver accurate results within minutes, suitable for primary care GI screening.

Regulatory and Operational Considerations

CLIA Certificate of Waiver
Any physician office or clinic performing waived tests must apply for a CLIA Certificate of Waiver (CMS Form 116). The certification is valid for two years and requires minimal administrative oversight.

Staff Training and Quality Assurance
While waived tests are low complexity, accuracy still depends on proper technique. Staff should be trained in:
- Sample collection and handling
- Equipment maintenance
- Interpretation and documentation of results

Basic quality control protocols, while not mandated, are recommended to reduce risk of error.

Billing and Coding

Most CLIA-waived tests are reimbursable using HCPCS Level II codes and relevant CPT codes. Correct modifier use (e.g., QW for Medicare) is essential to avoid claim rejections.

Future Directions in CLIA-Waived Testing

Several trends are likely to influence the next phase of development in this space:

- *Digital Integration:* Many new analyzers now offer Bluetooth or cloud connectivity, enabling automatic upload of results to electronic health records (EHRs).

- *Home-Based Waived Testing:* Tests that were once restricted to office use are now available for home administration under provider oversight, supporting remote care models.

- *AI-Enhanced Devices:* Some platforms incorporate artificial intelligence for image analysis (e.g., automated urinalysis) and result interpretation, reducing inter-operator variability.

- *Expanded Panels:* Look for more multiplex platforms that assess a combination of pathogens or biomarkers with a single sample.

Conclusion

CLIA-waived laboratory testing has become a foundational element in outpatient and urgent care medicine. For physicians, these tests offer a reliable, efficient, and financially sustainable approach to diagnosing and managing a wide range of conditions. With innovations expanding both the scope and accuracy of what is possible at the point of care, clinicians are better equipped than ever to deliver timely, informed care decisions.

As healthcare continues to evolve toward accessibility, efficiency, and personalized medicine, CLIA-waived testing will remain at the forefront of diagnostic strategy in ambulatory settings.



Men's Health:
THE FOURTH DECADE

BY ADAM IRVINE, PHYSICIANS OFFICE RESOURCE

Introduction

The decade of the 40s marks a transitional phase for many men — biologically, psychologically, and socially. While many remain outwardly healthy and active, this age group often begins to experience the early manifestations of chronic conditions that will shape their future health. For family physicians, this decade presents a critical opportunity for targeted intervention and preventive care.

This article outlines the most common health concerns for men in their 40s, recommends evidence-based screenings and diagnostics, and provides guidance for initiating lifestyle counseling and treatment strategies that align with current guidelines.

Common Health Concerns in Men in Their 40s

1. Cardiovascular Disease Risk

Cardiovascular disease (CVD) remains the leading cause of death for men in the U.S. Although clinical manifestations like myocardial infarction are more common in later decades, subclinical atherosclerosis often begins in the 30s and 40s.

Risk Factors to Assess:

- Hypertension
- Hyperlipidemia
- Smoking history
- Diabetes or prediabetes
- Family history of premature CVD
- Obesity and sedentary lifestyle

Screening Recommendations:

- Blood pressure: Every year, or more frequently if elevated
- Fasting lipid panel: At least every 5 years, more often with risk factors



- HbA1c or fasting glucose: Every 3 years or as indicated
- ASCVD risk score: Calculate to guide statin therapy

Treatment:
- Lifestyle modification is the first line (diet, exercise, smoking cessation)
- Pharmacologic treatment per USPSTF and ACC/AHA guidelines

2. Weight Gain and Metabolic Syndrome
Many men gain weight during this decade due to declining metabolism and decreased physical activity. Metabolic syndrome — defined by central obesity, hypertension, dyslipidemia, and insulin resistance — increases risk for CVD and type 2 diabetes.

Clinical Markers:
- Waist circumference >40 inches
- Fasting glucose >100 mg/dL
- Triglycerides >150 mg/dL
- HDL <40 mg/dL
- Blood pressure ≥130/85 mmHg

Management Strategies:
- Nutrition counseling (consider referral to a dietitian)
- Exercise prescription (150 minutes/week moderate activity)
- Behavioral therapy for sustained weight loss

3. Mental Health: Depression, Anxiety, and Stress
Men in their 40s face career pressures, relationship challenges, and the psychological implications of aging. Unfortunately, men are less likely to seek help for mental health concerns, and depression may present with irritability or somatic complaints rather than low mood.

Screening Tools:
- PHQ-9 for depression
- GAD-7 for anxiety
- Substance use screening (AUDIT-C, DAST)

Treatment:
- Cognitive behavioral therapy (CBT)
- Selective serotonin reuptake inhibitors (SSRIs)
- Encouraging open conversations about stress and masculinity

4. Low Testosterone and Sexual Health
Symptoms such as decreased libido, fatigue, loss of muscle mass, and erectile dysfunction (ED) often emerge in the 40s. While age-related testosterone decline is common, hypogonadism should be ruled out.

Evaluation:
- Morning total testosterone (x2 if low)
- LH, FSH, and prolactin if testosterone is low
- Assessment for diabetes, sleep apnea, and cardiovascular disease

Management:
- Lifestyle modification
- Treat underlying causes (e.g., obesity, OSA)

SCREENING/TEST	RECOMMENDATION
Blood pressure	Every year; more if ≥130/80 mmHg
Lipid panel	Every 5 years, or more frequently if ASCVD risk is elevated
Diabetes (A1c or fasting)	Every 3 years, starting at age 40, or sooner with risk factors
Colon cancer	Begin at 45 (USPSTF); options include FIT, Cologuard, colonoscopy
Hepatitis C	One-time screening if born 1945–1965 or with risk factors
HIV/STIs	At least once; more often with risk
Mental health (depression)	Annually using PHQ-9 or similar screening tool
Testosterone (if symptomatic)	Two separate morning total testosterone levels
Skin cancer	Visual skin exam; encourage patient self-exams
Vision/hearing	Baseline assessment if symptomatic

- Testosterone replacement therapy (TRT) only in symptomatic, confirmed low testosterone after shared decision-making

5. Prostate Health
While prostate cancer screening typically begins at 50 (or earlier with risk factors), lower urinary tract symptoms (LUTS) such as urgency, nocturia, and weak stream may start in the 40s.

Evaluation:
- International Prostate Symptom Score (IPSS)
- Digital rectal exam (DRE) if indicated
- PSA testing if high-risk (African American men, family history)

Management:
- Watchful waiting for mild symptoms
- α-blockers or 5α-reductase inhibitors for moderate to severe LUTS
- Urology referral as needed

Cancer Awareness and Risk Reduction
Though prostate cancer screening is often deferred until the 50s, certain cancers warrant attention starting in the 40s.
Colorectal Cancer:
- New USPSTF guidelines recommend beginning CRC screening at age 45
- Options include fecal immunochemical test (FIT), multitarget stool DNA (Cologuard), and colonoscopy

Skin Cancer:
- Men in their 40s may not use sunscreen regularly and have increased cumulative UV exposure
- Counsel on monthly skin self-exams and sun protection

Lung Cancer:
- For patients 50–80 with a 20 pack-year smoking history who currently smoke or quit within the last 15 years, recommend annual low-dose CT

Musculoskeletal and Bone Health
Men in their 40s often experience the early signs of joint degeneration and back pain. While osteoporosis is less common in men than women, it's not rare — particularly in those with risk factors.

Key Considerations:
- Vitamin D and calcium intake
- Resistance training to maintain muscle mass and bone density
- Assess for secondary osteoporosis in men with fragility fractures

Bone Density Testing:
Not routine in the 40s, unless risk factors (e.g., long-term steroid use, hypogonadism, alcohol abuse, family history of osteoporosis)

Sleep Disorders and Fatigue
Men in their 40s are at increasing risk for obstructive sleep apnea (OSA) due to weight gain, enlarged neck circumference, and changes in airway tone.

Common Symptoms:
- Snoring
- Daytime sleepiness
- Morning headaches
- Difficulty concentrating

Diagnosis:
- STOP-BANG questionnaire
- Home sleep apnea testing or in-lab polysomnography

Treatment:
- CPAP therapy
- Weight loss
- Avoidance of alcohol and sedatives

Lifestyle Interventions: The Foundation of Health
Family physicians play a central role in motivating behavior change. Conversations around the "40s checkup" should

emphasize the opportunity to prevent long-term disease with small, sustainable steps.

Exercise:
- Encourage 150–300 minutes/week of moderate-intensity aerobic activity
- Include resistance training ≥2 days/week

Nutrition:
- Mediterranean diet shown to reduce CVD risk
- Limit processed foods, excess sodium, and sugar-sweetened beverages

Alcohol and Tobacco:
- Limit alcohol to ≤2 drinks/day
- Offer smoking cessation counseling and pharmacotherapy

Stress Management:
- Encourage mindfulness, therapy, and social support
- Screen for work-related burnout or midlife crisis symptoms

Engaging the Male Patient

One of the challenges in managing health in men in their 40s is getting them to come in at all. Studies show men are less likely to seek preventive care than women. Strategies to overcome this include:

- Framing the visit as a "performance tune-up" rather than a "check-up"
- Highlighting long-term goals (e.g., staying active for kids, sports)
- Using clear, direct language and providing data when possible
- Addressing concerns about sexual health early in the visit

Conclusion

The 40s offer a golden window for preventive care. As chronic diseases start to emerge silently, this decade is an ideal time for primary prevention, risk reduction, and health optimization. Family medicine physicians, who serve as both gatekeepers and advocates, are uniquely positioned to influence this trajectory. Through thoughtful screening, shared decision-making, and motivational counseling, we can help our male patients navigate this critical decade with resilience, vitality, and longevity.

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The Future of Preventive Medicine in the U.S.

A SHIFT TOWARD PROACTIVE HEALTH

BY SHAKEEL AHMED, MD

For generations, the U.S. healthcare system has operated largely in reaction mode—intervening after symptoms present, after disease progresses, and often after irreversible damage has already occurred. In this model, physicians treat crises, not precursors. It's a system that rewards volume, not prevention—and it's buckling under its own weight.

Today, that paradigm is shifting. With chronic diseases dominating the nation's morbidity and mortality profile, and healthcare spending ballooning past $4.5 trillion annually, the urgency to invest in prevention has never been clearer. Preventive medicine—long viewed as an aspirational ideal—is rapidly becoming the backbone of future care delivery. It's a pivot not only driven by compassion but by hard economics, better outcomes, and technological capability.

According to the CDC, six in ten U.S. adults live with at least one chronic condition, and four in ten live with two or more. Diseases like diabetes, obesity, hypertension, and heart disease are no longer edge cases—they're the new baseline. These preventable or modifiable conditions now account for 90% of all U.S. healthcare expenditures. If we aim to bend the cost curve and improve life expectancy—now stagnating at around 76.4 years—the path forward is obvious: anticipate disease, intervene early, and keep people healthy for as long as possible. In this article, we will discuss the major factors and forces shaping the future of preventive medicine in the country.

Ten Expanding Forces Defining the Future of Preventive Care

1. More Screenings, Sooner, for More People
Thanks to the Affordable Care Act, more than 150 million Americans now have access to no-cost preventive services, including over 80 USPSTF-recommended screenings for various cancers, cardiovascular risks, infectious diseases, and mental health conditions. These include:

- Mammograms beginning at age 40, which have helped reduce breast cancer mortality by 40% since widespread adoption.
- Colorectal cancer screenings now beginning at age 45, a change made in response to rising incidence among younger adults.
- Annual lung cancer screenings for adults aged 50–80 with a 20-pack-year smoking history, which can reduce lung cancer deaths by up to 20%.

As a result, colorectal cancer screening rates have surpassed 70% among insured adults, and cervical cancer mortality has declined by over 50% since the introduction of the Pap test. Yet disparities persist—underscoring the need for further policy alignment and outreach.

2. AI, Biometrics, and Wearables: The Rise of Real-Time Prevention
More than 125 million Americans now use wearable health devices, including Apple Watch, Fitbit, Oura Ring, and newer devices like the Dexcom G7 and WHOOP Band. These devices monitor:

- Cardiac rhythms to detect arrhythmias like atrial fibrillation (AFib)—a major cause of stroke.
- Oxygen saturation and sleep cycles, identifying early warning signs of sleep apnea or chronic fatigue syndrome.
- Continuous glucose levels, now accessible through consumer-friendly monitors, allowing prediabetics and diabetics to respond in real time.

AI-enhanced platforms are also now embedded in diagnostic imaging. For example, Google Health's AI system has demonstrated 94.5% accuracy in detecting diabetic retinopathy from retinal images. Dermatology apps can detect melanoma with sensitivity comparable to dermatologists. When paired with remote monitoring, this technology turns homes into early-detection hubs.

3. Medicare Advantage: A National Experiment in Preventive Incentives
Over 31 million Americans—nearly half of all Medicare beneficiaries—are now enrolled in Medicare Advantage (MA). These private plans have aligned financial incentives with preventive goals, offering:

- No-cost annual wellness exams
- Behavioral health integration, including teletherapy and substance abuse treatment
- SilverSneakers fitness memberships
- Chronic care management and medication therapy services

According to a 2023 study published in JAMA, MA enrollees had a 43% lower rate of avoidable hospitalizations and 23% fewer ER visits compared to those in traditional Medicare. MA is becoming a proving ground for prevention-first healthcare economics.

4. Obesity: The Costliest and Most Preventable Crisis
Obesity has become the root cause of much of America's chronic disease burden. With 42.4% of adults and 19.7% of youth categorized as obese, the nation faces a public health emergency. Obesity raises the risk of:

- Type 2 diabetes by 300–400%
- Heart disease by 200%
- At least 13 types of cancer, including colon, breast, and pancreatic

The economic cost exceeds $173 billion annually in direct medical expenses, not including lost workforce productivity or military readiness. Yet, even a 5–10% reduction in weight can normalize A1C, lower blood pressure, and improve sleep apnea—all of which reduce the need for medications and procedures.

5. National Diabetes Prevention Program (NDPP): A Model Worth Scaling
The CDC's NDPP is one of the most rigorously validated public health programs in recent memory. Through structured lifestyle intervention—nutrition, activity, and behavior coaching—participants reduce their risk of developing diabetes by 58%, and by 71% for those over age 60. It is now being implemented by over 2,000 organizations nationwide, including:

- Community health centers
- YMCAs and senior centers
- Digital platforms like Omada Health and Virta Health

Longitudinal studies show that NDPP also reduces the incidence of hypertension, fatty liver disease, and depression. The return on investment is estimated at $2.40 for every $1 spent.

6. Wellness at Work: Employers Step In
Over 82% of large employers (500+ employees) now offer wellness programs, with over half offering biometric screenings, health risk assessments, and personalized coaching. Employers like Google, Salesforce, and Johnson & Johnson are investing in:

- Mental health apps like Headspace and Calm
- On-site fitness centers or gym subsidies
- Incentives for smoking cessation, weight loss, and step goals

Johnson & Johnson alone reported $250 million in health cost savings over a decade, along with a 67% decline in employee smoking rates. RAND's research estimates $1.50 to $3 in savings for every dollar spent on comprehensive wellness initiatives.

7. Vaccination: A Lifesaving Preventive Strategy
From childhood through adulthood, vaccination is still the gold standard in disease prevention. The CDC reports that:

- Routine immunizations in children born between 1994 and 2018 prevented 419 million illnesses, 26.8 million hospitalizations, and 936,000 premature deaths.
- Flu vaccinations alone prevent 3.2 million illnesses, 1.6 million doctor visits, and 100,000 hospitalizations annually in the U.S.
- Increasing shingles vaccine uptake in adults over 60 could prevent over 1 million painful episodes annually.

Improving adult immunization rates by even 10% could save $1.1 billion annually, mostly in avoidable hospitalizations.

8. Genomics and Precision Screening
Genomic medicine is ushering in a new era of personalized prevention. Programs like:

- Geisinger's MyCode (over 300,000 participants)
- NIH's All of Us Research Program (aiming for 1 million volunteers)

are uncovering genetic variants that increase risk for BRCA-related breast and ovarian cancers, Lynch syndrome, familial hypercholesterolemia, and more. Individuals with actionable genetic findings are guided toward:

- Early or intensified screenings
- Risk-reducing medications or surgeries

- Lifestyle interventions tailored to gene-environment interactions

Pharmacogenomics is also growing, helping to determine which patients will benefit from statins or anticoagulants while minimizing adverse side effects.

9. Food as Medicine: Nutrition's Role in Prevention
The concept of "food as medicine" is moving from pilot projects to mainstream policy. Programs in states like California, Massachusetts, and New York are testing prescription meals for patients with heart failure, diabetes, or CKD. Outcomes include:

- 32% reduction in hospitalizations
- $220 in per-member-per-month cost savings
- Improved A1C, LDL, and BMI outcomes

CMS is now evaluating whether to include such meals in standard coverage for high-risk Medicare beneficiaries. If scaled, such programs could save over $30 billion in national healthcare costs annually.

10. The ACA's Lasting Impact: Universal Preventive Coverage
Perhaps the most impactful legacy of the Affordable Care Act is its mandate that all major insurers cover preventive services at no cost to patients. This includes:

- Cancer screenings
- Immunizations
- Tobacco cessation counseling
- Preconception and prenatal services

By eliminating cost barriers, preventive care utilization has surged—particularly among low-income and minority populations. According to HHS, coverage for preventive services increased by 25% among Black and Hispanic adults in the first five years of the ACA's implementation, reducing historical disparities in disease burden.

Looking Ahead: From Episodic to Continuous Care

Preventive medicine is no longer a footnote—it's becoming the framework. With emerging technologies, better data, evolving payment models, and a national imperative to reduce costs while improving outcomes, prevention is finally being recognized for what it is: the highest-value form of care we can offer.

Still, the road ahead requires vigilance. Challenges such as health literacy gaps, mistrust in public health institutions, and fragmented data systems must be addressed. But the tools are here. The incentives are aligning. And the American public is ready for a system that values wellness as much as it does rescue.

If the next decade of U.S. healthcare is defined by one thing, let it be this: a national shift from treating illness to preserving health. That is where the future lies—not just for medicine, but for society as a whole.



Dr. Shakeel Ahmed

Dr. Shakeel Ahmed is an internationally renowned expert and pioneering figure in the field of healthcare entrepreneurship and ambulatory surgery centers (ASCs).

A gastroenterologist turned healthcare mogul, over the last two decades he has transformed his vision into the Midwest's leading network of Ambulatory Surgery Centers. His dual expertise in medical administration and surgical execution—gained from years of frontline experience—has been pivotal in mastering the complexities of the healthcare sector. Dr. Ahmed's notable contributions extend beyond the ASC sphere; he has played a key role in developing a comprehensive healthcare network, including a range of medical facilities, diagnostic centers, and surgical establishments across several countries. He has authored 12 books on the subject of outpatient surgery and healthcare entrepreneurship, alongside hundreds of articles in prestigious national and international journals. He is also the Publisher and Editor-in-Chief of the magazine Surgery Business. He regularly speaks and lectures on the topic of ASCs to a worldwide audience. He is instrumental in the development of multiple surgical centers and surgical tourism facilities across the Western Hemisphere. He is a consultant for several governments on healthcare development, and works as an advisor to various governments across four continents in the establishment of outpatient surgery centers.

ABI

PAD TESTING SYSTEMS IDEAL FOR PRIMARY CARE TO VASCULAR SPECIALISTS

from Newman Medical

5204

SCAN TO LEARN MORE

Your Patients Trust YOU To Find Their Peripheral Artery Disease
- High-risk patients include those over 65, diabetics, and smokers.
- If left untreated, 25% of patients with PAD will experience a heart attack or stroke within 5 years.
- PAD symptoms are often mistaken for arthritis or old age.

The simpleABI Cuff-Link System is Easy to Learn and Use.
- With a push-button remote, automatic calculations, and waveforms, it's incredibly user-friendly.
- Reports are straightforward to save and share since the system is PC-based.

Outstanding Value and Reimbursements
- The system pays for itself in less than a year with just one test per week.
- Medicare reimbursements vary by exam and location, averaging from $91 to $174.



BONE HEALTH

WHY BINDEX® IS A GAME-CHANGER IN OSTEOPOROSIS DIAGNOSTICS.

From Bindex Medical

5205

SCAN TO LEARN MORE

Comparable to DXA
Extensive clinical research has proven Bindex to be 90% accurate in detecting osteoporosis. It can replace nearly 70% of DXA scans for patients with suspected osteoporosis.

Fast and effective
Using safe pulse-echo ultrasound to measure cortical bone thickness, Bindex analyzes bone density in just seconds.

Easy to use anywhere
Lightweight and pocket-sized, Bindex allows patients to receive on-the-spot bone density scans in doctors' offices, hospitals and clinics and at home.



BRAIN FUNCTION ASSESSMENT

EARLIER DETECTION OF MEMORY LOSS, DEMENTIA AND OTHER COGNITIVE DISORDERS

From Morningside Medical

5206

SCAN TO LEARN MORE

Standard cognitive screening tools like MMSE/ MOCA are exactly that; screening tools. The technology is there to test the patients that fail these screening tools right in your office. Get clinically relevant information about your patients' brain performance, while generating additional reimbursement for the practice, leading to earlier diagnosis and more accurate referrals.

Aids in clear diagnosis • Strong Reimbursement • Improves Patient Outcomes • Easy for any staff to perform • Cognitive Testing / Mental Health • Sudomotor Function / Neuropathy • Vestibular Testing / Fall Prevention • Autonomic Function/ Cardiovascular Risk





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Lilly
A MEDICINE COMPANY

CHEMISTRY ANALYZERS

EASY, INTEGRATED WITH-PATIENT TESTING I-STAT SYSTEM

From Abbott Point of Care

5207

SCAN TO LEARN MORE

The handheld i-STAT System offers a broad menu of diagnostic tests at the patient's side in just minutes. With just a few drops of blood, the i-STAT System delivers real time, lab-accurate results for a wide range of tests, including chemistries, blood gas, coagulation, cardiac markers, and more. Minimize delays and wasted time with on-side tests. Easy, intuitive operation.

For intended use and complete product information, visit pointofcare.abbott.

For in vitro diagnostic use only. This material is intended for a U.S. audience only. i-STAT is a trademark of Abbott. Physician Office Resource i-STAT Product Description — US 3064.REV1 08/20



FULL COMPLEMENT OF CLIA-WAIVED BLOOD CHEMISTRY TESTS PICCOLO XPRESS® CHEMISTRY ANALYZER

From Abbott Point of Care

5208

SCAN TO LEARN MORE

The Piccolo Xpress Chemistry Analyzer provides physician offices with lab-accurate results for a broad range of CLIA-waived general chemistry tests, including metabolic panels, lipids, live, and kidney function, and more with just 100 microliters of blood. Easy to use, the PIccolo Xpress provides results during a patient's visit, accelerating treatment decisions, increasing efficiency, and supporting patient satisfaction. Automated quality control on every test helps ensure accuracy.



TOXICOLOGY SCREENING SIMPLIFIED ABBOTT'S IMMTOX 270 BENCHTOP ANALYZER NOW WITH 14 ASSAYS CLIA CATEGORIZED AS MODERATE COMPLEXITY

From Abbott

5209

SCAN TO LEARN MORE

The ImmTox270 benchtop analyzer offers comprehensive toxicology screening solutions for physician offices, treatment centers and independent laboratories.

Broad test menu with over 20 assays to choose from including 14 that are now available as moderately complex.

With complete laboratory solutions from consultation to licensure, and compliance the Abbott Clinical Laboratory Solutions team has you covered.



medicaldevicedepot.com

3 WAYS TO START IMMEDIATELY INCREASING REVENUE

1 Neuro-Cognitive Testing

5210

- Medicare mandates yearly cognitive assessment
- Takes 10-15 minutes to prep patient, 20 minutes to test
- Analyzes: brain health (EEG), brain processing speed (Evoke Potentials), heart health (EKG), mental health (neuropsychology)
- **Reimburses using 6 CPT codes, National Average = $750 - $1000 per test**
- Each test is processed into a fully-finished, clinically actionable report
- Easy to understand biomarkers facilitate more informed medical interventions, such as biofeedback

2 ANS Testing

(can be combined with SUDOMOTOR into 1 full system)

5211

- Takes less than 10 minutes to perform, software provides verbal cues
- Tests for autonomic balance, vascular health, physical/mental stress, peripheral nerve health and other critical hidden risk factors
- **Reimburses $170/test using 3 CPT codes**
- Provides a 1 page summary up to a full 24 page comprehensive report



3 SudoMotor Testing

5212

(can be combined with ANS into 1 full system)

- Takes 3 minutes to analyze a patients' hands and feet
- Provides a 1 page summary report
- Assesses peripheral nerve health (c-fiber function) and asymmetry between each hand and foot
- **Reimburses $130/test (national average)**

Medical Device Depot © Inc.

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for additional savings at checkout!

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DIABETES/BLOOD GLUCOSE

EARLY DETECTION AND MANAGEMENT OF CHRONIC CONDITIONS WITH DCA VANTAGE® AND CLINITEK STATUS®+ ANALYZERS

From Siemens Healthineers

5213

SCAN TO LEARN MORE

Siemens Healthineers DCA Vantage® and CLINITEK Status® family of analyzers provide Hemoglobin A1c (HbA1c) and albumin-to-creatinine ratio (ACR) testing at the point of care. Monitor glycemic control in patients with diabetes and screening for kidney disease in patients at-risk, in-office. Enable real-time consultation, eliminating loss to follow-up. Improve the patient experience and overall outcome by providing actionable results in minutes.

CLIA-waived: DCA HbA1c; CLINITEK Microalbumin 2 (ACR)
CLIA Moderate Complexity: DCA® Microalbumin/Creatinine (ACR)



QUANTAFLO® PAD

From Semler Scientific

5214

SCAN TO LEARN MORE

QuantaFlo® PAD is an easy to use, accurate, point of care, non-invasive solution that aids in the early detection of peripheral arterial disease (PAD). This FDA cleared device can be administered by a medical aide in less than 5 minutes. As published in the Journal of Vascular Surgery and the American Journal of Preventive Medicine, QuantaFlo detected undiagnosed PAD in 31.6% of patients +65.1 QuantaFlo is portable and integrates with other technologies and platforms. It is ideal for both home and clinic environments.

1. Smolderen KG, Ameli O, Chaisson CE, Heath K, Mena-Hurtado C. Peripheral Artery Disease Screening in the Community and 1-Year Mortality, Cardiovascular Events, and Adverse Limb Events, AJPM Focus (2022), https://doi.org/10.1016/j.focus.2022.100016



NOVA PRIMARY BLOOD GLUCOSE REFERENCE ANALYZER

From Nova Biomedical

5215

SCAN TO LEARN MORE

The U.S. FDA has cleared Nova Primary as a blood glucose reference analyzer that fills the need for a new reference analyzer to replace the YSI STAT PLUS 2300 (YSI, Inc., Yellow Springs, OH). Manufacturers of blood glucose measuring devices and clinical diabetes researchers have relied on the YSI 2300 as a reference and correlation analyzer. However, YSI, Inc. no longer supports the analyzer, and its discontinuation has left a critical industry void. With today's FDA clearance, Nova Primary from Nova Biomedical is now available in the U.S. and worldwide.



LIBTAYO®
(cemiplimab-rwlc)
Injection 350 mg

Real patients. **Expert insights.**

Watch Donna's Treatment Journey With LIBTAYO



Actual LIBTAYO patient.

REGENERON®

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FLU AND RESPIRATORY

STATUS FLU A&B

From LifeSign

5216

SCAN TO LEARN MORE

Status Flu A & B is an in vitro rapid qualitative test that detects influenza type A and type B directly from nasal swab, nasopharyngeal swab, and nasopharyngeal aspirate/wash specimens obtained from patients with signs and symptoms of respiratory infection. It is intended to aid in the rapid differential diagnosis of Influenza A and B viral infections.

- CLIA waived *Innovative flip design with onboard sample extraction
- Premeasured developer solution capsule for increased accuracy and ease of use
- Flocked nasal swabs for improved patient comfort and superior specimen collection



STATUS COVID-19/FLU A&B PANEL TEST

From LifeSign

5217

SCAN TO LEARN MORE

A Rapid Immunoassay for the Simultaneous Direct Detection and Differential Diagnosis of SARS-CoV-2, Influenza Type A and Type B Antigen from Anterior Nasal and Nasopharyngeal swab specimens. Infections with these viruses may present similar symptoms. Can you tell them apart? WE CAN!



BIOFIRE SPOTFIRE

From bioMerieux

5218

SCAN TO LEARN MORE

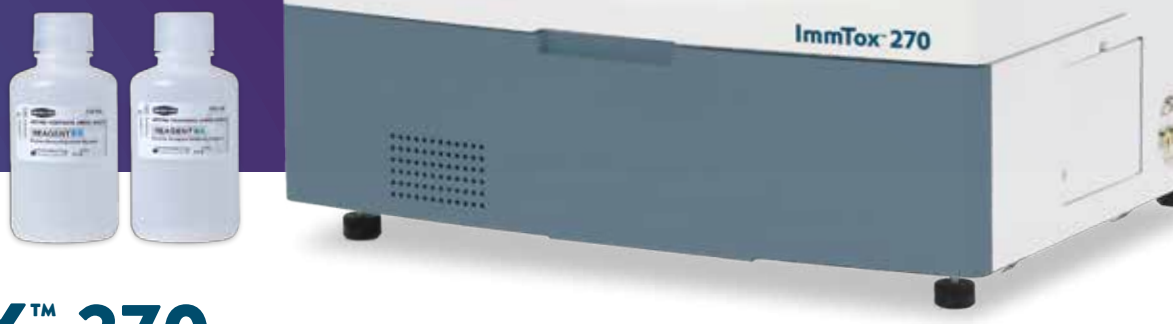
bioMérieux knows that an evolving world deserves evolved diagnostics. Our latest innovation, the BIOFIRE® SPOTFIRE® Respiratory Solution, is the first FDA-cleared and CLIA-waived COVID-19 testing solution. The BIOFIRE® SPOTFIRE® System is an easy-to-use system that runs the BIOFIRE® SPOTFIRE® Respiratory (R) Panel. Benefits of the SPOTFIRE Respiratory Solution include: 15 respiratory targets on 1 PCR test with results in about 15 minutes; minimal benchtop space with vertical scalability up to four modules; easy to use with an intuitive user interface.



TOXICOLOGY SCREENING

SIMPLIFIED.

Comprehensive toxicology menu now with **14 CLIA[1] categorized moderate complexity assays.**



IMMTOX™ 270

BENCHTOP ANALYZER

Toxicology screening solutions for physician offices, pain management, treatment centers and laboratories testing 200+ patient samples/mo.

Scan this QR code to view the ImmTox™ 270 product video

MODERATE COMPLEXITY ASSAYS – FDA 510(K) CLEARED	
6-acetylmorphine (6-AM Heroin metabolite)	EDDP (Methadone metabolite)
Amphetamine	Fentanyl*
Barbiturates	Methamphetamine
Benzodiazepines	Opiates
Benzoylecgonine (Cocaine metabolite)	Oxycodone
Buprenorphine	Phencyclidine (PCP)
Cannabinoids (THC)	Tramadol

CONTACT ABBOTT CLINICAL LAB SOLUTIONS

855-425-9428 | CLS_SALES@ABBOTT.COM

1. Clinical Laboratory Improvement Amendments (CLIA) / * SEFRIA Fentanyl

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Abbott

Early Detection,

Rapid Diagnosis,

Better Outcomes

5220



5221



5222



5223



5224



5225



5226



lifeSign

MADE IN THE USA

For those seeking premium performance and reliable results Contact LifeSign Today **(800) 526-2125** or email us at **sales@lifesignmed.com**

To learn more about our full line of Rapid Diagnostic tests vist our website at **www.lifesignmed.com** to learn more about our products



9 TRAVEL DESTINATIONS YOU CAN'T MISS IN 2025

Whether you're craving pristine beaches or vibrant cities, these nine must-visit destinations around the world promise stunning scenery, rich culture, and unforgettable adventures for every type of traveler.

HARBOUR VILLAGE BEACH CLUB · TURTLE BAY RESORT · FOUR SEASON ORLANDO AT WALT DISNEY WORLD · SECRETS CAP CANA · BALBOA BAY RESORT · DESOLATION HOTEL THE TAMPA EDITION HOTEL · FOUR SEASONS NASHVILLE · FOUR SEASONS LAS VEGAS

MDescapes

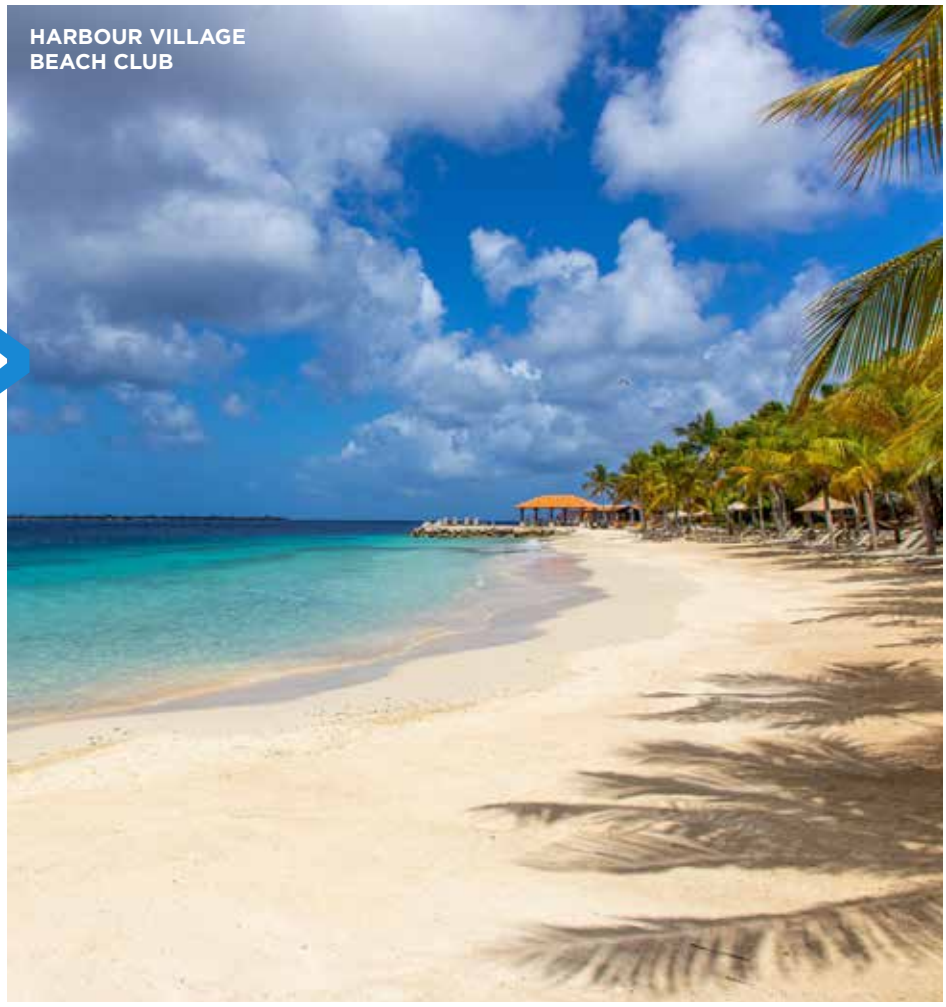
MDescapes

HARBOUR VILLAGE BEACH CLUB

BONAIRE, CARIBBEAN

Tucked away on a private stretch of white sand and palm trees, you will find the iconic Harbour Village Beach Club. An oasis beloved by sun lovers, scuba divers, and seafarers alike. Our boutique Bonaire retreat captures the breezy, barefoot elegance of the Dutch Caribbean, consistently earning the title of “Bonaire's leading hotel” in the World Travel Awards.

SCAN TO LEARN MORE



HARBOUR VILLAGE BEACH CLUB



TURTLE BAY RESORT

TURTLE BAY RESORT

OAHU, HAWAII

Deeply rooted in the land, the history, and the layered richness of Oahu, at Turtle Bay you’ll find an authentic connection to a place of uncommon natural splendor and the warm, welcoming community within it. Where your days are filled with constant discovery and moments that touch your soul, allowing you to explore the uncommon depths of this remarkable coast.

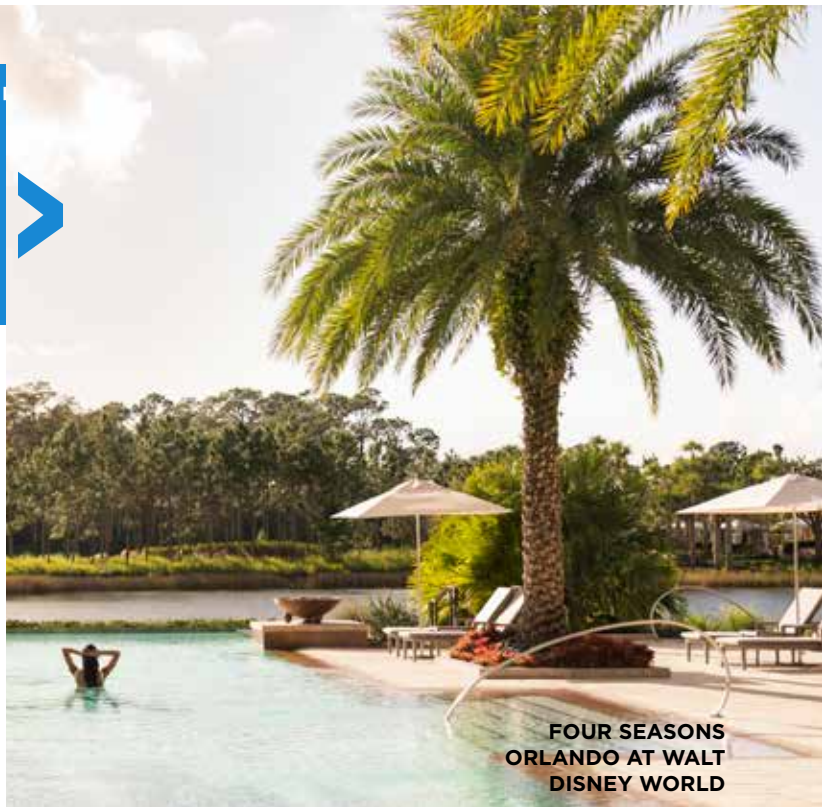
SCAN TO LEARN MORE

FOUR SEASON ORLANDO AT WALT DISNEY WORLD

ORLANDO, FLORIDA

Discover an elevated escape with the perfect balance of fun and relaxation at our AAA Five Diamond, luxury Orlando Resort. Splash around with the family at Explorer Island water park, or unwind beneath swaying palms at Oasis adult-only pool while we entertain your young ones at our complimentary kids camp. Treat yourself to a soothing, post-park massage at The Spa, then toast to the nightly Walt Disney World® fireworks views over dinner at our Michelin-starred rooftop steakhouse Capa.

SCAN TO LEARN MORE



FOUR SEASONS ORLANDO AT WALT DISNEY WORLD



SECRETS CAP CANA

SECRETS CAP CANA

PUNTA CANA DOMINICAN REPUBLIC

Secrets Cap Cana Resort & Spa is a sophisticated, adults-only hideaway located in the exclusive gated community of Cap Cana Facing the clear Caribbean Sea along the white sand of the exclusive Juanillo Beach. Secrets Cap Cana Resort & Spa is proud to support the Punta Cana Promise as part of the ongoing commitment to ensure that guests will continue to receive the highest levels of service and security they have come to know and expect from Secrets Cap Cana. The Punta Cana Promise reaffirms the commitment to a set of security standards and safety guidelines in one of the top travel destinations in the Dominican Republic.

SCAN TO LEARN MORE

MDescapes

BALBOA BAY RESORT

NEWPORT BEACH , CALIFORNIA

Balboa Bay Resort is Newport Beach's premier waterfront retreat offering stunning bay views and sunsets over Balboa Bay's harbor. It is the #1 Resort in Newport Beach per U.S. News & World Report, and it is rated as a Forbes Four-Star and AAA Four-Diamond resort.

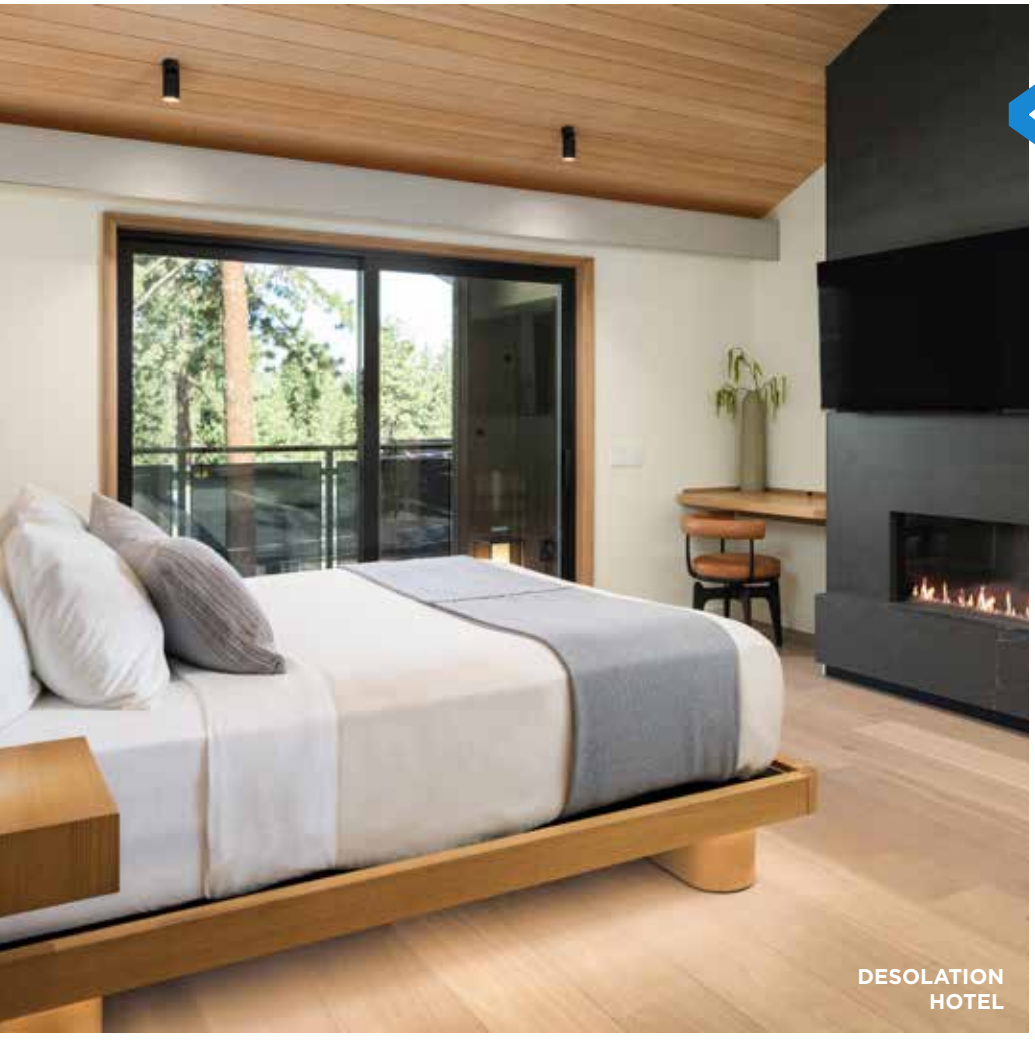
SCAN TO LEARN MORE



TURTLE BAY RESORT

DESOLATION HOTEL

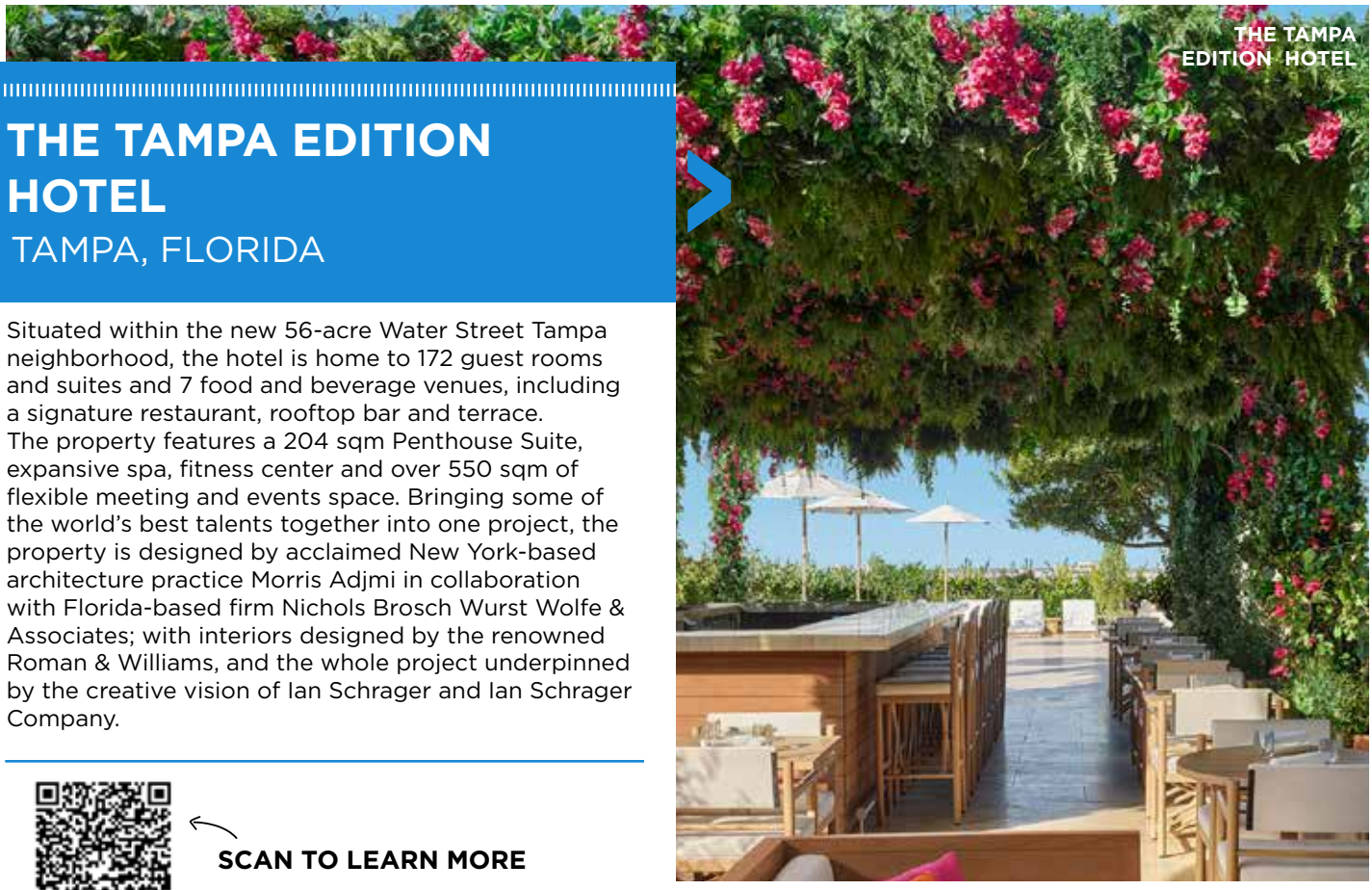
LAKE TAHOE, CALIFONIA



DESOLATION HOTEL

At Desolation Hotel, modern conveniences and eco-luxury commingle with Japanese tranquility and Scandinavian design. Our one-of-a-kind South Lake Tahoe experience inspires adventure and invites tranquility, providing the right space to recharge your battery. Balancing reverence for the past with appreciation for the present, Desolation Hotel nods to the simple days of yesteryear, while modern technology serves as a quiet backbone to the entire resort experience.

SCAN TO LEARN MORE



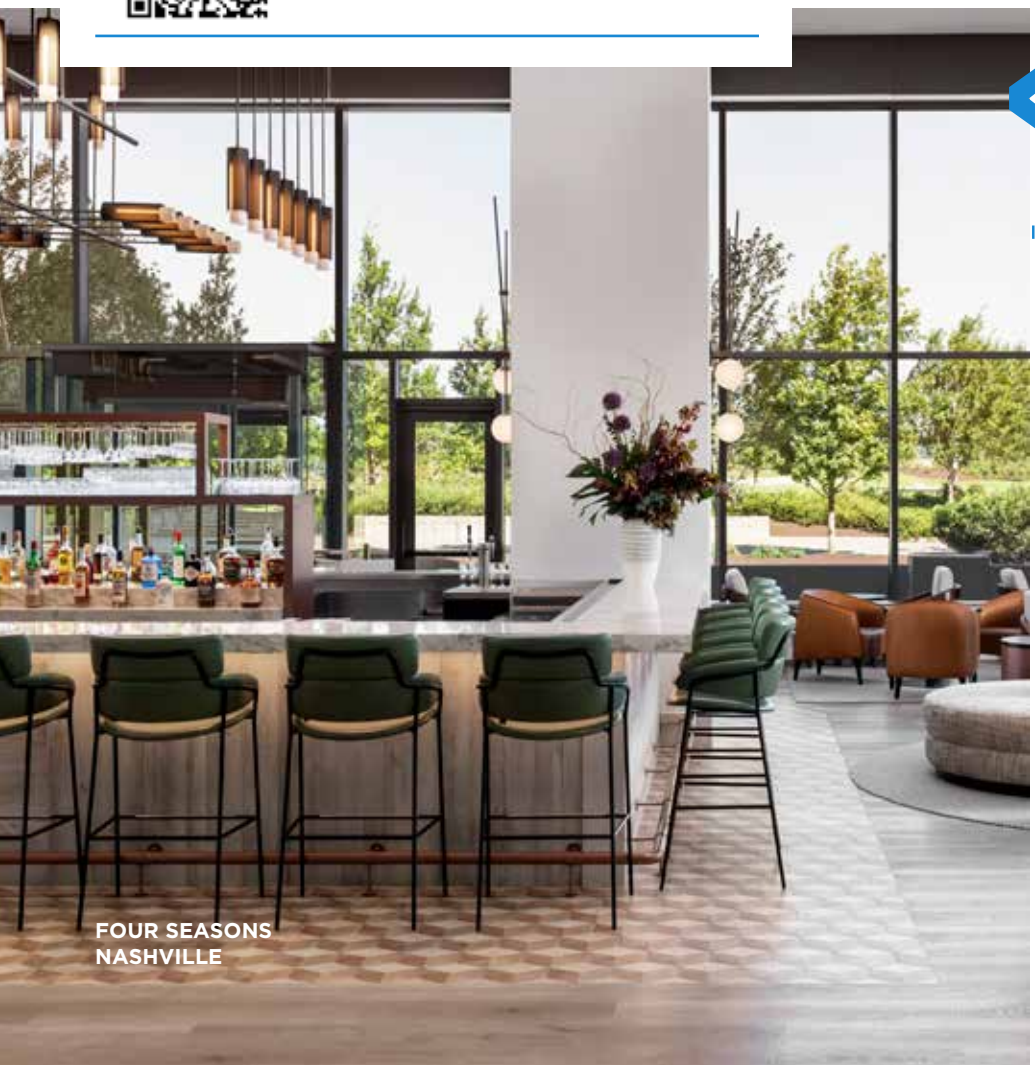
THE TAMPA EDITION HOTEL

THE TAMPA EDITION HOTEL

TAMPA, FLORIDA

Situated within the new 56-acre Water Street Tampa neighborhood, the hotel is home to 172 guest rooms and suites and 7 food and beverage venues, including a signature restaurant, rooftop bar and terrace.
The property features a 204 sqm Penthouse Suite, expansive spa, fitness center and over 550 sqm of flexible meeting and events space. Bringing some of the world's best talents together into one project, the property is designed by acclaimed New York-based architecture practice Morris Adjmi in collaboration with Florida-based firm Nichols Brosch Wurst Wolfe & Associates; with interiors designed by the renowned Roman & Williams, and the whole project underpinned by the creative vision of Ian Schrager and Ian Schrager Company.

SCAN TO LEARN MORE



FOUR SEASONS NASHVILLE

FOUR SEASONS

NASHVILLE, TENNESSEE

Welcome to Four Seasons Hotel Nashville, a luxury hotel located in the heart of downtown's vibrant SoBro neighborhood. This new social hub is just steps away from the city's iconic music, sports, and entertainment venues. Experience the rhythm of our lively restaurants and event spaces, the tranquility of our Spa, and the stunning views from our rooftop pool overlooking the Cumberland River and Riverfront Park. With the unmatched service of Four Seasons and warm Southern hospitality, we'll inspire an authentic experience of Music City.

SCAN TO LEARN MORE



FOUR SEASONS
LAS VEGAS, NEVADA

As one of the only non-gaming and non-smoking hotels on The Strip, Four Seasons Hotel Las Vegas is a unique oasis in the heart of the action-packed sports and entertainment capital of the world. Offering Five Diamond luxury accommodations, acclaimed dining and a Forbes Five-Star spa, Four Seasons offers the best of both worlds: a resort retreat amid the famous energy of Las Vegas.

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Physicians Office Resource Invites You to

GO ELECTRONIC!

Sign up for our monthly eNewsLetter and get
Physicians Office Resource delivered to your Inbox!



Sign up at PhysiciansOfficeResource.com/home/contact/

FLU AND RESPIRATORY

RAPID MOLECULAR TEST – PROVIDE LAB QUALITY RESULTS IN JUST 20 MINUTES

From Sekisui Diagnostics

5227

SCAN TO LEARN MORE

- 3-in-1 Multiplex – Detects COVID-19, Flu A and Flu B from one swab, in one test
- Minimal Hands-On Time – Can be performed in a CLIA-waived setting in a few simple steps
- Convenient– No maintenance or calibration, ready for testing any time
- Accessible and Flexible – Suitable for any facility
- Exceptional Support – Experienced support teams and online training modules to help streamline your implementation



METRIX® COVID-19 TEST – A MOLECULAR LAB ANYWHERE AND EVERYWHERE

From Sekisui Diagnostics

5228

SCAN TO LEARN MORE

The Metrix® COVID-19 is a novel technology includes clinical claims for symptomatic and asymptomatic individuals, along with dual-sample types for nasal or saliva, allowing for an enhanced point-of-care testing experience. The reader is compact and robust, it's ideal for professional use in diverse locations, including clinics and mobile health units. It's a maintenance free device with no calibration step required.



BE PREPARED FOR RESPIRATORY SEASONS WITH THE OSOM® COVID-19 ANTIGEN RAPID TEST

From Sekisui Diagnostics

5229

SCAN TO LEARN MORE

The OSOM® COVID-19 Antigen Rapid Test is a lateral flow immunoassay that detects the SARS-CoV-2 nucleocapsid protein with a nasal swab in only 15 minutes at the point-of-care. The test is intended to be used by healthcare professionals or operators on patients suspected of COVID-19 within the first 7 days of symptom onset. The clinical performance compares favorably against polymerase chain reaction methodology, with a positive percent agreement of 95.1% and a negative percent agreement of 97%.

OSOM® COVID-19 Antigen Rapid Test has not been FDA cleared or approved. It is authorized by FDA under an EUA for prescription use only. It has been authorized only for the detection of SARS-CoV-2 antigen, not for any other viruses or pathogens and is only authorized for the duration of the declaration that circumstances exist justifying the authorization of emergency use of in vitro diagnostics for detection and/or diagnosis of COVID-19 under Section 564(b)(1) of the Federal Food, Drug, and Cosmetic Act, 21 U.S.C S360bbb-3(b)(1), unless the authorization is terminated or revoked sooner.



LABORATORY SERVICES

CLIA COMPLIANT, USER-FRIENDLY, COST-EFFECTIVE, ELECTRONIC DOCUMENTATION SYSTEM

5230

From MyInspection

SCAN TO LEARN MORE

- Meets all CLIA compliance requirements
- No interpretation of CLIA regulations required – includes all policies, procedures, electronic fillable forms stored systematically for easy retrieval
- Remote access – manage individual or multiple labs remotely from your PC, tablet or phone
- Easy to audit and document changes with electronic signatures and dating
- Expert guidance from licensure to your customized documentation system
- Be, stay compliant and inspection ready – reduce time, cost, and stress



PERIPHERAL ARTERIAL DISEASE

QUANTAFLO® PAD

5231

From Semler Scientific

SCAN TO LEARN MORE

QuantaFlo® PAD is an easy to use, accurate, point of care, non-invasive solution that aids in the early detection of peripheral arterial disease (PAD). This FDA cleared device can be administered by a medical aide in less than 5 minutes. As published in the Journal of Vascular Surgery and the American Journal of Preventive Medicine, QuantaFlo detected undiagnosed PAD in 31.6% of patients +65.1 QuantaFlo is portable and integrates with other technologies and platforms. It is ideal for both home and clinic environments.

1. Smolderen KG, Ameli O, Chaisson CE, Heath K, Mena-Hurtado C. Peripheral Artery Disease Screening in the Community and 1-Year Mortality, Cardiovascular Events, and Adverse Limb Events, AJPM Focus (2022), https://doi.org/10.1016/j.focus.2022.100016



PAD TESTING SYSTEMS IDEAL FOR PRIMARY CARE TO VASCULAR SPECIALISTS

5232

from Newman Medical

SCAN TO LEARN MORE

Your Patients Trust YOU To Find Their Peripheral Artery Disease

- High-risk patients include those over 65, diabetics, and smokers.
- If left untreated, 25% of patients with PAD will experience a heart attack or stroke within 5 years.
- PAD symptoms are often mistaken for arthritis or old age.

The simpleABI Cuff-Link System is Easy to Learn and Use.

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TOXICOLOGY

TOXICOLOGY SCREENING SIMPLIFIED ABBOTT'S IMMTOX 270 BENCHTOP ANALYZER NOW WITH 14 ASSAYS CLIA CATEGORIZED AS MODERATE COMPLEXITY

5233

SCAN TO LEARN MORE

From Abbott

The ImmTox270 benchtop analyzer offers comprehensive toxicology screening solutions for physician offices, treatment centers and independent laboratories.

Broad test menu with over 20 assays to choose from including 14 that are now available as moderately complex.

With complete laboratory solutions from consultation to licensure, and compliance the Abbott Clinical Laboratory Solutions team has you covered.



STREP TESTS

SOFIA® 2 FLUORESCENT IMMUNOASSAY ANALYZER AND RAPID DIAGNOSTIC TEST KITS

5234

SCAN TO LEARN MORE

From QuidelOrtho

Sofia® 2 Fluorescent Immunoassay Analyzer and Rapid Diagnostic Test Kits Sofia 2 takes rapid testing to a new level. Proven lateral-flow technology and advanced fluorescent chemistry are all integrated into this small benchtop analyzer which can be used in any point-of-care setting. Sofia 2 kits are easy to use and adaptable to any healthcare setting. Excellent performance, objectivity, quality control, LIS capabilities, and an expanding test menu make Sofia 2 the perfect solution for the physician's office laboratory.



OSOM® ULTRA STREP A TEST

5235

SCAN TO LEARN MORE

From Sekisui Diagnostics

The OSOM® Ultra Strep A test is a color immunochromatographic assay intended for the qualitative detection of Group A Streptococcus antigen directly from throat swab specimens. Shown to be not statistically different than single swab culture. Sensitivity 95.7% and 100% Specificity. Includes two additional test sticks for External QC. CLIA Waived.



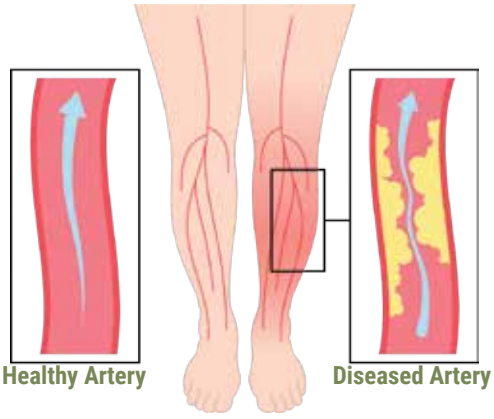
THEY ARE IN YOUR WAITING ROOM RIGHT NOW.

Patients with Peripheral Artery Disease (PAD) who may be facing a heart attack, stroke, amputation, or even death within the next 5 years.

1 OUT OF 3 HAS PAD

Diabetics | Smokers | Over age 65

AND THEY PROBABLY DON'T KNOW IT. ARE *YOU* TESTING THEM?





PERIPHERAL ARTERY DISEASE (PAD) is an often silent condition where narrowed arteries reduce blood flow to the legs, causing symptoms like leg pain, numbness, and slow-healing wounds.

DON'T LET PAD SNEAK UP ON YOU OR THESE PATIENTS.
50% report no symptoms, while those that do attribute their pain to arthritis or "old age".

THESE PATIENTS *TRUST YOU* TO FIND THEIR PAD
before they have a heart attack, stroke, or even die. PAD also leads to significant disability and reduced quality of life.

INTRODUCING ABI-Q: A USER-FRIENDLY SOLUTION FOR EARLY PAD TESTING.

EASY
- No Doppler or vascular anatomy knowledge necessary.
- Can be done in five minutes or less by any staff member.
- Non-invasive, patient-friendly test.

ACCURATE
- Accuracy equal or better than Doppler ABI.
- Useful for diabetics with calcified arteries.

REIMBURSABLE
- **Great ROI:** the typical internist has 800 Medicare patients, per ACP.
- Testing five patients per week can pay for the system in less than two months.
- CPT 93923 (ABI w/exercise), with a national average of $142/exam.





5236

MADE IN USA

For over 45 years, Newman Medical has been a leader in vascular innovation. The ABI-Q system continues that legacy with fast, accurate results you can trust.

Scan for more info

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OSOM® TRICHOMONAS RAPID TEST

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The OSOM® Trichomonas Rapid Test is intended for the qualitative detection of Trichomonas vaginalis antigens from vaginal swabs or from the saline solution. The OSOM® Trichomonas Rapid Test is a CLIA-waived rapid test available today. OSOM® Trichomonas is more sensitive than wet mount due to the assay being able to detect viable and non-viable organisms which offers significant benefits to the patient and clinician alike.



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