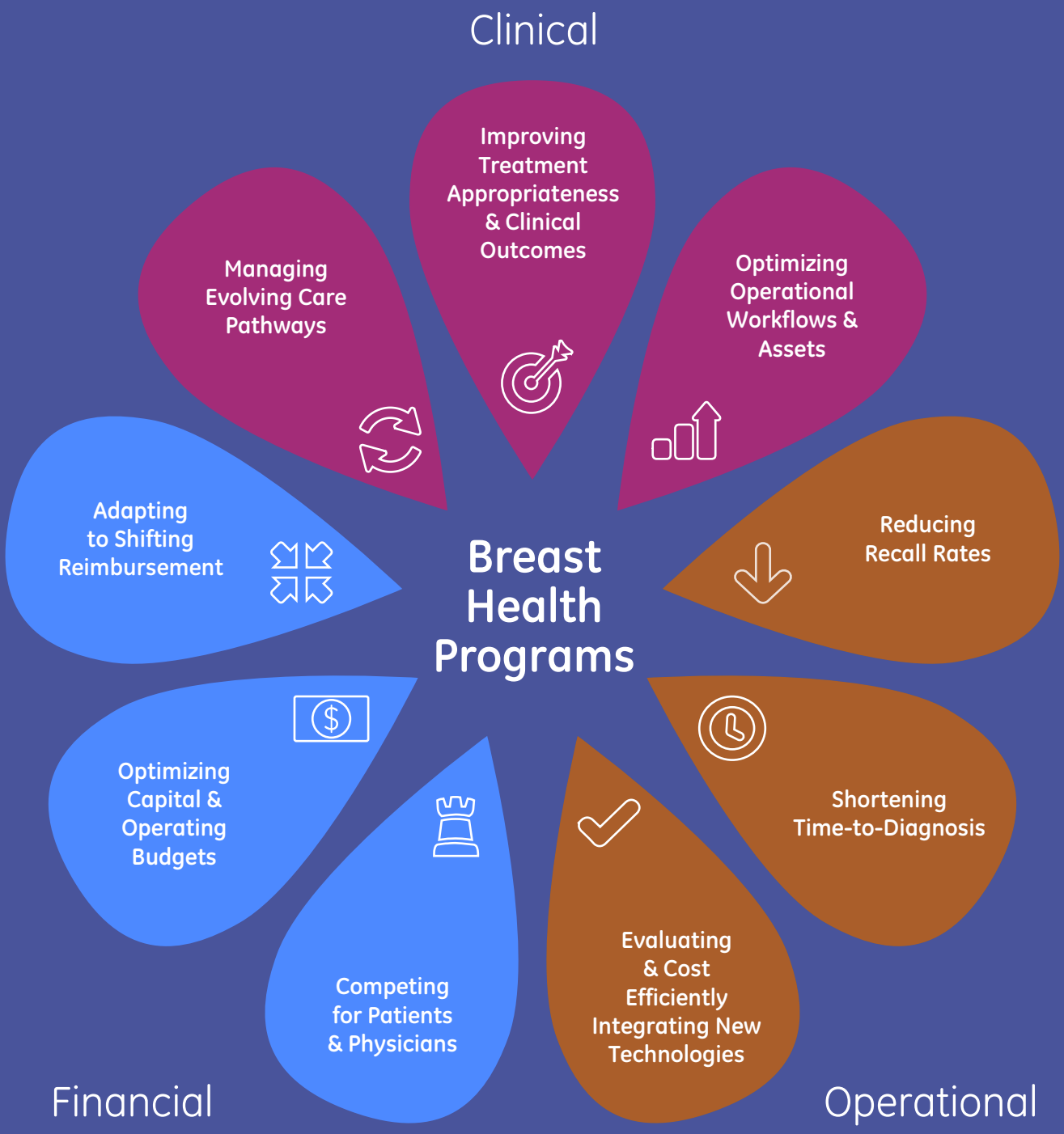
GE Healthcare

The GE Breast Health Advantage

Every woman. Every body.

These materials are intended for U.S. healthcare professionals only.

Challenges and Opportunities



All women in your community deserve high-quality breast care.

It's not easy. The competition for patients and physicians is fierce. The reimbursement landscape is shifting. Technology continues to evolve and improve, but where it best fits in the care pathway is not always clear. The Patient Protection and Accountable Care Act is providing coverage to an estimated incremental 746,000 women for important screenings by 2019[1], yet the U.S. Preventative Services Task Force (USPSTF) recommends reductions in the frequency of screening. And, nearly half of all women could have elevated risks or complicating factors[2,3] that may require a personalized screening and diagnostic approach.

In addition to managing these market challenges, you may want to focus on lowering recall rates, shortening time from screening to diagnosis, and gaining important insights that will help inform treatment decisions for each woman.

In today's cost-constrained environment, it's important to ensure your investments in strengthening and expanding your capabilities pay off for your facility, and work hard for your patients. That's why it's critical to have a trusted, committed team to help you deliver the care your patients need — and to help you meet your financial and operational objectives.

That's why we offer the GE Breast Health Advantage.

The National Cancer Institute estimates that the number of breast cancers diagnosed in the U.S. will increase by about 50 percent by 2030.[4]

[1] Banjo, Solomon. The Advisory Board Company. Imaging Performance Partnership. (2014). Breast Imaging Update: *Current Market Outlook and Update on Digital Breast Tomosynthesis.*

[2] Tabár L, et al. (2011) *Swedish Two County Trial: Impact of Mammographic.* 260: 658 63.

[3] American Cancer Society. (2015) *Cancer Facts & Figures* 2015.

[4] National Cancer Institute at the National Institutes of Health. (2015, April 23). *Study Forecasts New Breast Cancer Cases by 2030.*

46 percent of women have dense or extremely dense breast tissue in the United States.[1]

Calcifications are common, and macro-calcifications appear in approximately half of all mammograms in women over age 50.[2]

As many as 5-10 percent of all breast cancer cases can be linked to BRCA mutations.[3,4]

Are you equipped to meet the personalized needs of each woman?

Your patient population is very diverse. Different sizes, shapes, ethnicities and ages. This population has a similarly diverse mix of risk profiles, such as dense breast tissue, microcalcifications, fatty tissue, BRCA mutations, and family history. As many as 46 percent of women have dense breast tissue[1] and many more may have other complicating factors that can impact the effectiveness of standard screening and diagnostic methodologies.[1,2]

Clearly, unnecessary recalls and false negatives aren't good for your patients or for your breast health program, nor are extended waiting times to achieve a confident diagnosis. They can potentially impact clinical outcomes, frustrate your clinical staff, diminish patient experience, and perhaps, negatively impact your reputation with other women in your community.

Meeting the needs of every woman can be challenging and the GE Breast Health Advantage can help.

The chance of a false positive result after ten yearly mamograms is about 50 to 60 percent.[5]

[1] Pisano, E.D., Gatsonis, C., et. al. *Diagnostic Performance of Digital versus Film Mammography for Breast-Cancer Screening*, N Engl J Med 2005;353.1-11.

[2] American Cancer Society website. *Mammograms and Other Breast Imaging Tests.* http://www.cancer.org/acs/groups/cid/documents/webcontent/003178-pdf.pdf. Revised April 25, 2016.

[3] National Cancer Institute at the National Institutes of Health. (2015). BRCA1 and BRCA2: *Cancer Risk and Genetic Testing.* Retrieved April 27, 2015, from http://www.cancer.gov/cancertopics/causes-prevention/genetics/brca-fact-sheet/print.

[4] American Cancer Society. (2015) *Cancer Facts & Figures* 2015.

[5] Susan B Komen website. Accuracy of Mammograms. http://www5.komen.org/breastcancer/accuracyofmammograms.html. Updated 7/30/13.

Studies show a second opinion or collaborating with the care team has the potential to improve diagnosis and treatment for nearly one in ten patients.[1]

Ten percent of women may be called back for follow-up after a mammogram.[2]

Having dense breasts increases a women's likelihood to develop cancer four to six times.[3]

Do you have the information needed to enhance clinical outcomes with personalized care?

Helping your patients achieve positive clinical outcomes starts with gaining a clear image of the breast to identify potential abnormalities. If an abnormality presents, you want to rule-in or rule-out cancer, and gain the insights needed to inform treatment planning and monitoring. It's important to have the right mix of technologies available to help attain the information you need to confidently screen, diagnose, stage, plan treatments and monitor your patients.

Here are a few ways the GE Breast Health Advantage can help.

Imaging Technologies

We have an adaptable array of low and no dose, advanced imaging technologies to deliver superb image quality to help visualize small abnormalities, masses and architectural distortions, including: the only FDA-approved automated ultrasound technology for dense breasts, Molecular Breast Imaging, 2D Mammography, Digital Breast Tomosynthesis, Contrast-Enhanced Spectral Mammography, Hand Held Ultrasound, MR, PET/MR, CT and PET/CT.

It has been documented that 2D mammography sensitivity for breast lesions may decline with increasing breast density.[4] One possible reason for this could be that lesions or other anatomical structures may be hidden by overlapping tissue. By utilizing SenoClaire's™ volumetric imaging the images produced can help reduce the effect of overlapping tissue, and do this while keeping the dose to the patient as low as reasonably acceptable.

Invenia™ ABUS is the only FDA-approved screening technology that offers a comfortable, non-ionizing alternative to other supplemental screening options and shows a 55 percent relative increase in sensitivity in detecting invasive breast cancer in dense breasts over mammography.[5]

Performed as an adjunct to inconclusive mammography and ultrasound, SenoBright™ Contrast-Enhanced Spectral Mammography (CESM) highlights areas of unusual blood flow patterns which may be cause for increased suspicion.

Healthcare Equipment Finance

We have a breadth of financial offerings, each created to solve challenges unique to your situation. Built on an understanding of the amount of risk desired and the appetite for change, solutions are tied clinically and operationally to provide long term support.

[1] Newman EA, Guest AB, Helvie MA, et al. (2006) *Changes in surgical management resulting from case review at a breast cancer multidisciplinary tumor board.* Cancer. 107:2346–2351.

[1] Romanoff, et al. (2014, May). *Breast Pathology Review: Does It Make a Difference?* Annals of Surgical Oncology.

[2] National Cancer Institute at the U.S. National Institutes of Health. Breast Cancer Surveillance Consortium. (2014, July 9). *Abnormal Interpretations for 2,061,691 Screening Mammography Examinations from 2004 - 2008 -- based on BSBC data through 2009.* Retrieved on April 30, 2015 from http://breastscreening.cancer.gov/statistics/benchmarks/screening/2009/table3.html.

[3] Boyd. N.F., Guo, H. et al, (2007), *Mammographic Density and the Risk and Detection of Breast Cancer.* N Engl J Med 356(3); 227-236.

[4] Thomas M. Kolb, MD, Jacob Lichy, MD, Jeffrey H. Newhouse, MD, Comparison of the Performance of Screening Mammography, Physical Examination, and Breast U.S. and Evaluation of Factors that Influence Them: An Analysis of 27,825 Patient Evaluations, Radiology 2002; 225:165–175.

[5] Brem RF, Tabár L, et.al. Assessing Improvement in Detection of Breast Cancer with Three-dimensional Automated Breast US in Women with Dense Breast Tissue: The SomoInsight Study. Radiology. 2015 Mar; 274(3): 663-73.

Invenia™ ABUS demonstrates a 55 percent relative increase in invasive breast cancer detection for women with dense breasts over mammography alone.[1]

Use of a single solution for radiology reading can improve productivity and can contribute to saving up to 19 percent of a radiologist's time.[2]

Are you looking for ways to improve the timeliness and efficiency of care delivery?

Delivering results quicker and more efficiently benefits patients and your organization. It helps reduce patient anxiety due to the wait for results, enables quick action on abnormal results for potentially improved outcomes, enhances workflow to increase capacity to handle more patients, and optimizes staff and asset utilization.

Here are a few ways the GE Breast Health Advantage can help.

SensorySuite

Breast imaging exams can be perceived as uncomfortable, unnerving and intimidating. One-fourth of all women avoid getting mammograms due to fear.[3] Designed to divert a woman's attention away from the discomfort, anxiety and intimidation associated with breast imaging exams, the SensorySuite helps improve patients' experience by providing a customized environment involving sight, smell and sound during an examination.

Centricity™ Universal Viewer Breast Imaging

Centricity Universal Viewer Breast Imaging solution brings the entire breast imaging workflow to a single workstation, helping to improve productivity. It is a multi-vendor, multi-modality application for reading 2D, 3D breast images that helps hospitals, health systems and imaging centers optimize workflow and provide enterprise and community-wide access to breast images. It delivers a single application for screening and diagnosis that integrates breast imaging into the overall reading workflow, helping to reduce swivel chair and eliminate independent workstations and storage.

Breast Health Rapid Assessment

The Breast Health Rapid Assessment, conducted by GE Healthcare Partners, can help identify ways to improve operational workflows to expedite screening-to-diagnosis results.

Services

Comprehensive service programs help keep your technology operating at optimal performance levels, provide training and education to your staff, and help avoid technological obsolescence.

[1] Brem, R.F., Tabár, L. et al. (2015) *Assessing Improvement in Detection of Breast Cancer with Three-Dimensional Automated US in Women with Dense Breast Tissue: The SomoInsight Study,* Radiology: 274(3): 663-673.

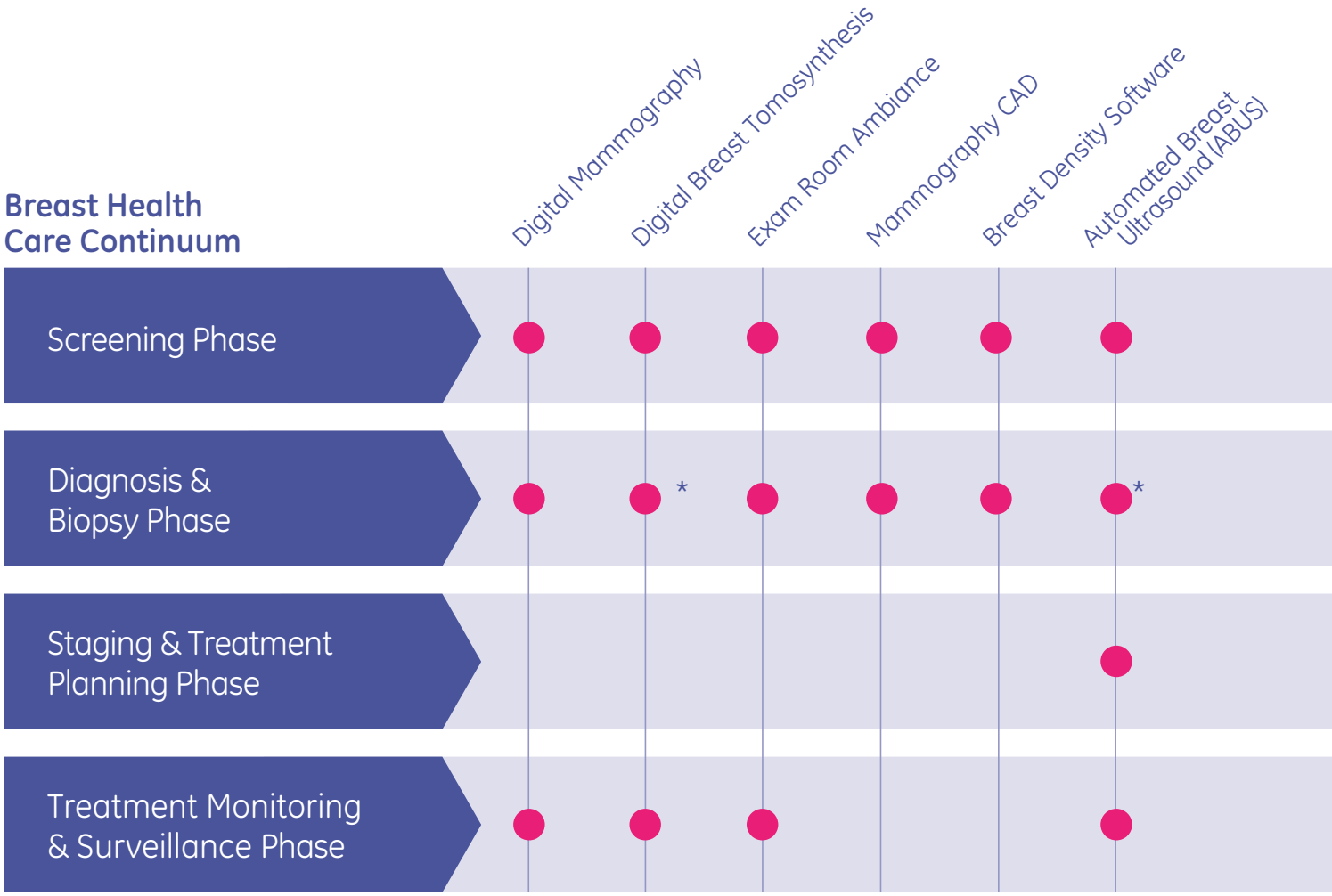
[2] Hillman, Dr. Bruce, and Dr. Bhavik Pandya. (2013, November). "Radiologists' Burden of Inefficiency Using Conventional Imaging Workstations." Journal of the American College of Radiology.

[3] Two distinct groups of non-attenders in an organized mammography screening program, Arja R Aro, Breast Cancer Research and Treatment 70: 145-153, 2001.

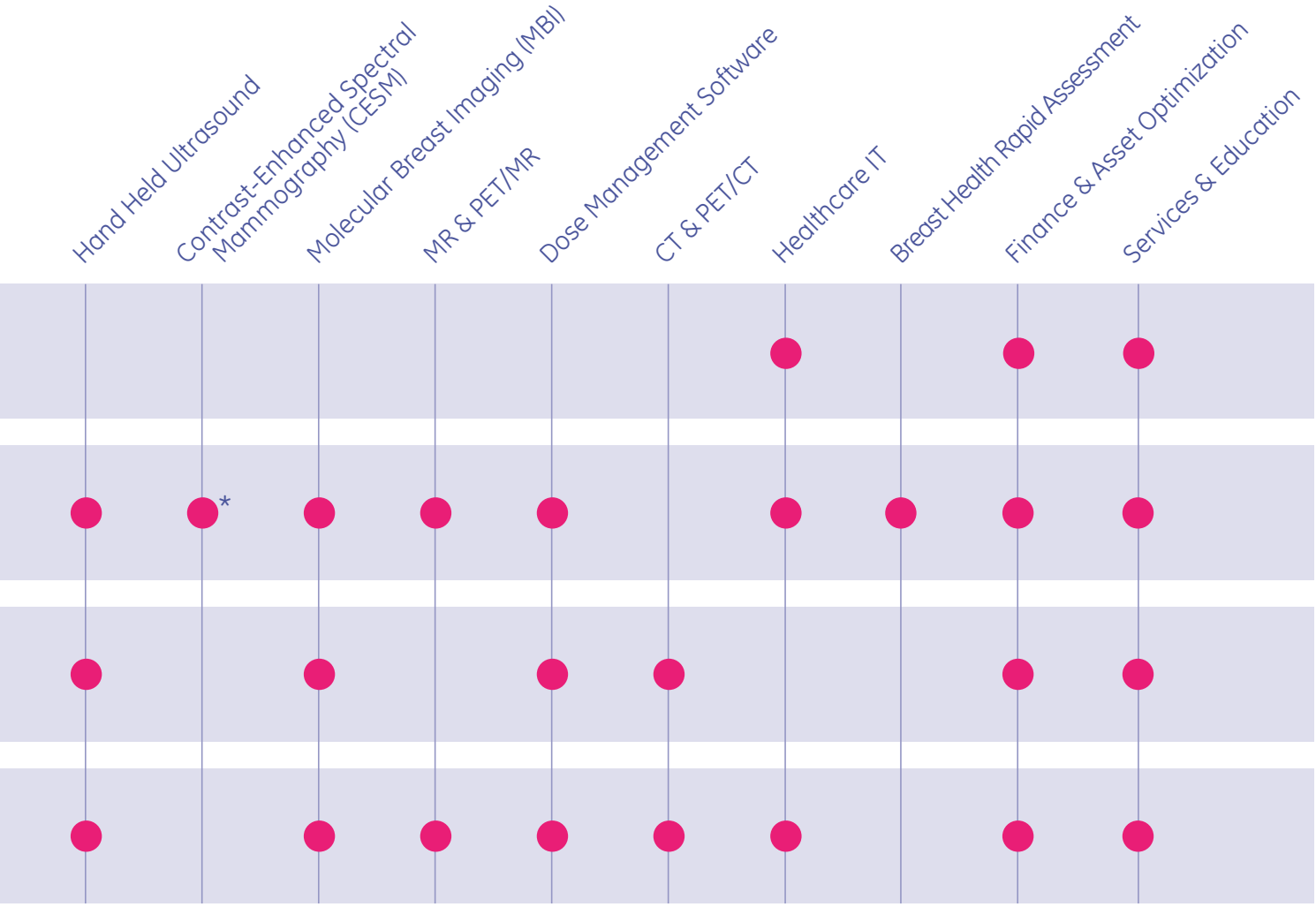
The GE Breast Health Advantage

Every woman. Every body.

The GE Breast Health Advantage is an adaptable portfolio of technologies, insights and services that help you serve all women, gain the operational efficiencies to enhance timeliness from screening to diagnosis, and support the optimal use of your human and equipment assets. And, we can also help you find the flexible financial solution you need to optimize your budget, and offer support for revenue growth. The GE Breast Health Advantage – we're here to help you.



***For Diagnostic Use**



Our goals are to help you:

- Optimize budget & revenue
- Increase cost efficiency
- Increase timeliness of care
- Increase patient satisfaction
- Optimize clinical outcomes
- Improve treatment appropriateness

The Invenia™ ABUS is indicated as an adjunct to mammography for breast cancer screening in asymptomatic women for whom screening mammography findings are normal or benign (BI-RADS® Assessment Category 1 or 2), with dense breast parenchyma (BI-RADS Composition/ Density 3 or 4), and have not had previous clinical breast intervention. The device is intended to increase breast cancer detection in the described patient population. The Invenia ABUS may also be used for diagnostic ultrasound imaging of the breast in symptomatic women.

SenoClaire™ acquires 2D images and also acquires multiple projection views to produce 3D DBT images suitable for screening and diagnosis of breast cancer. SenoClaire can be used for the same clinical applications as traditional mammographic systems for screening mammograms. Note: A screening examination will consist of a 2D image set consisting of a craniocaudal view and a mediolateral oblique view, or a 2D craniocaudal view and 3D DBT mediolateral oblique image set. The SenoClaire Digital Breast Tomosynthesis (DBT) option for Senographe™ Essential FFDM system may also be used for additional diagnostic workup of the breast. See the device manual for detailed information, contraindications, warnings, precautions, potential adverse events.

Imagination at work

Product may not be available in all countries and regions. Full product technical specification is available upon request. Contact a GE Healthcare Representative for more information. Please visit www.gehealthcare.com/promotional-locations.

Data subject to change.

Printed on 10% post-consumer recycled fiver (PCRF) paper with Earth Pride Eco Friendly inks utilizing a custom-blended vegetable oil base.

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