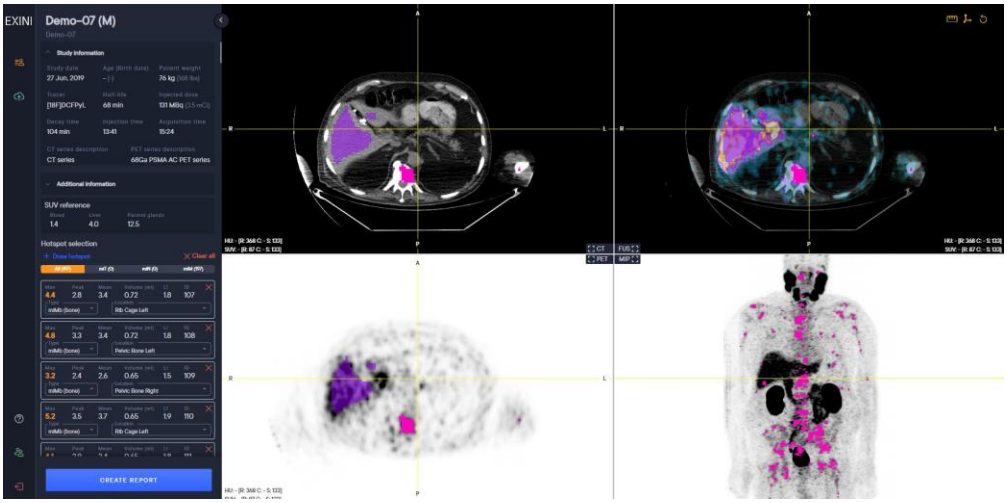
Software for quantitative assessment of PSMA PET/CT

aPROMISE enables rapid collection of standardized total-body quantitative parameters and validated biomarkers for PSMA PET/CT[2,3]

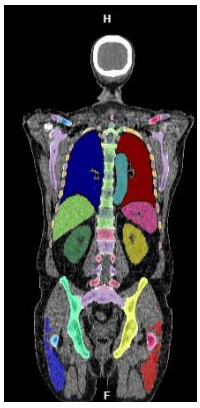


Sample report. Not an actual patient.

aPROMISE provides accurate and rapid total-body quantitative imaging biomarkers of clinical value, increasing reproducibility in the assessment of disease[2-6]

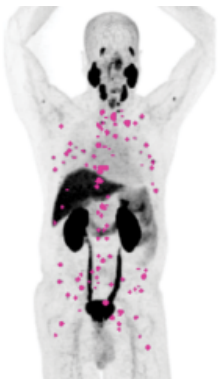
Segmentation

AI-based automatic CT segmentation of bone and soft tissues is used for anatomical contextualization and reference organ uptake quantification



Quantification

Identify, segment and quantify hotspots that the reader can review and designate for reporting



Secure and compliant

Secure and Compliant Device to Complement Existing Clinical Workflows

Delivers comprehensive, illustrative, and consistent reporting of PSMA PET/CT

Several guidelines and consensus statements have acknowledged the value of quantitative PSMA PET imaging biomarkers made readily available by aPROMISE[4-6]

Report

Diagnostic device: aPROMISE-2.3.0
Report ID: 4e8943ee-ba84-49d3-aa5c-c277fb066d98

Patient

Patient name (Gender): Demo-07 (M)
Age (Birth date): - (-)
Patient ID: Demo-07
Weight: 79 kg (174 lbs)

Study data

Study date: 24 Dec, 2018
Decay time: 92 min
Tracer (Half-life): [18F]DCFPyL (68 min)
Injection time: 08:18
Injected dose: 171 MBq (4.6 mCi)
Acquisition time: 09:49

SUV reference

Blood pool	Liver	Parotid glands
1.4	3.3	14.9

Series data

CT series information: CT series
PET series information: 68Ga PSMA AC PET series

Total disease burden

Study date	Staging	Lesions	SUV max	SUV mean	Total volume (ml)
24 Dec, 2018	miTx N1b M1b	126	34.3	5.3	380.45

Lesion Type	Lesion location	SUV max	SUV peak	SUV mean	Volume (ml)	LI	ID	PSMA avidity
miT	Prostate	4.7	3.4	3.4	1.22	2.0	1	Positive
miT	Prostate	4.6	3.2	3.4	1.08	2.0	2	Positive
miT	Prostate	6.3	4.0	3.8	0.93	2.2	3	Positive
miT	Prostate	5.6	3.2	3.5	0.86	2.1	4	Positive
miT	Prostate	4.6	3.0	3.4	0.57	2.0	5	Positive

AI-enabled total body quantification decreases interpretation time per case, creating efficiencies among interpreting physicians[1]

Total-body disease quantification with aPROMISE is automated, allowing for considerable time-savings compared to manual systems, particularly in patients with high-burden metastatic disease[1-4]

aPROMISE enables a standardized, streamlined approach to determine patient eligibility for treatment with radioligand therapy, offering automated and accurate calculation of whole body SUVmean[2-6]

SUVmean is used to determine eligibility for radioligand therapy and has been shown to provide prognostic value, accurate and consistent anatomical segmentation is essential for treatment planning[2,3]

Try aPROMISE in your facility

aPROMISE INDICATIONS FOR USE

aPROMISE is intended to be used by healthcare professionals and researchers for acceptance, transfer, storage, image display, manipulation, quantification and reporting of digital medical images. The system is intended to be used with images acquired using nuclear medicine (NM) imaging, using PSMA PET/CT. The device provides general Picture Archiving and Communications System (PACS) tools as well as a clinical application for oncology including marking of regions of interest and quantitative analysis.

References: **1**. FDA clearance letter for aPROMISE X. Food and Drug Administration. April 29, 2022. **2**. Nickols N, et al. J Nucl Med. 2022;63(2):233-239. **3**. Johnsson K, et al. Eur J Nucl Med Mol Imaging. 2022;49(3):1041-1051. **4**. Jadvar H, et al. J Nucl Med. 2022;63(1):59-68. **5**. Hope TA, et al. J Nucl Med. 2023;64(9):1417. **6**. Kratochwil C, et al. Eur Jour Nuc Med Mol Imaging. 2023;50(9):2830-2845.

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