

| Patient Information | Specimen Information | Client Information |
|---------------------|----------------------|--------------------|
| | | |

Cardio IQ®

| Test Name | Current | Risk/Reference Interval | | | Historical |
|-----------------|--------------------------------------|-------------------------|----------|------|---------------|
| | Result & Risk Optimal Non-Optimal | Optimal | Moderate | High | Result & Risk |
| INFLAMMATION | | | | | |
| MYELOPEROXIDASE | 203 | <470 | 470-539 | ≥540 | pmol/L |

SPECIMEN:

| Patient Information | Specimen Information | Client Information |
|---------------------|----------------------|--------------------|
| | | |

Reference Range/Comments

| Analyte Name | In Range | Out Range | Reference Range | Lab |
|---|----------|-----------|-----------------|-----|
| MYELOPEROXIDASE | 203 | | <470 pmol/L | |
| This test was developed and its analytical performance characteristics have been determined by Quest Diagnostics Cardiometabolic Center of Excellence at Cleveland HeartLab. It has not been cleared or approved by the U.S. Food and Drug Administration. This assay has been validated pursuant to the CLIA regulations and is used for clinical purposes. Based on a high risk sub-population (N=920) defined as ambulatory stable patients without acute coronary syndrome who underwent elective diagnostic coronary angiography (1) and a reference range study of apparently healthy donors, we have defined the following cut-offs for MPO: A cut-off of <470 pmol/L defines an 'apparently healthy' population at optimal relative risk for a cardiovascular event, 470-539 pmol/L defines a population at moderate relative risk for a cardiovascular event (2-fold increased risk of MACE at 3 years), and > = 540 pmol/L defines a population with a high relative risk for a cardiovascular event. (Reference: 1. Tang et al. Am J Cardiol. 2013; 111:465-470 and personal communication with Tang et al). | | | | |

SPECIMEN: