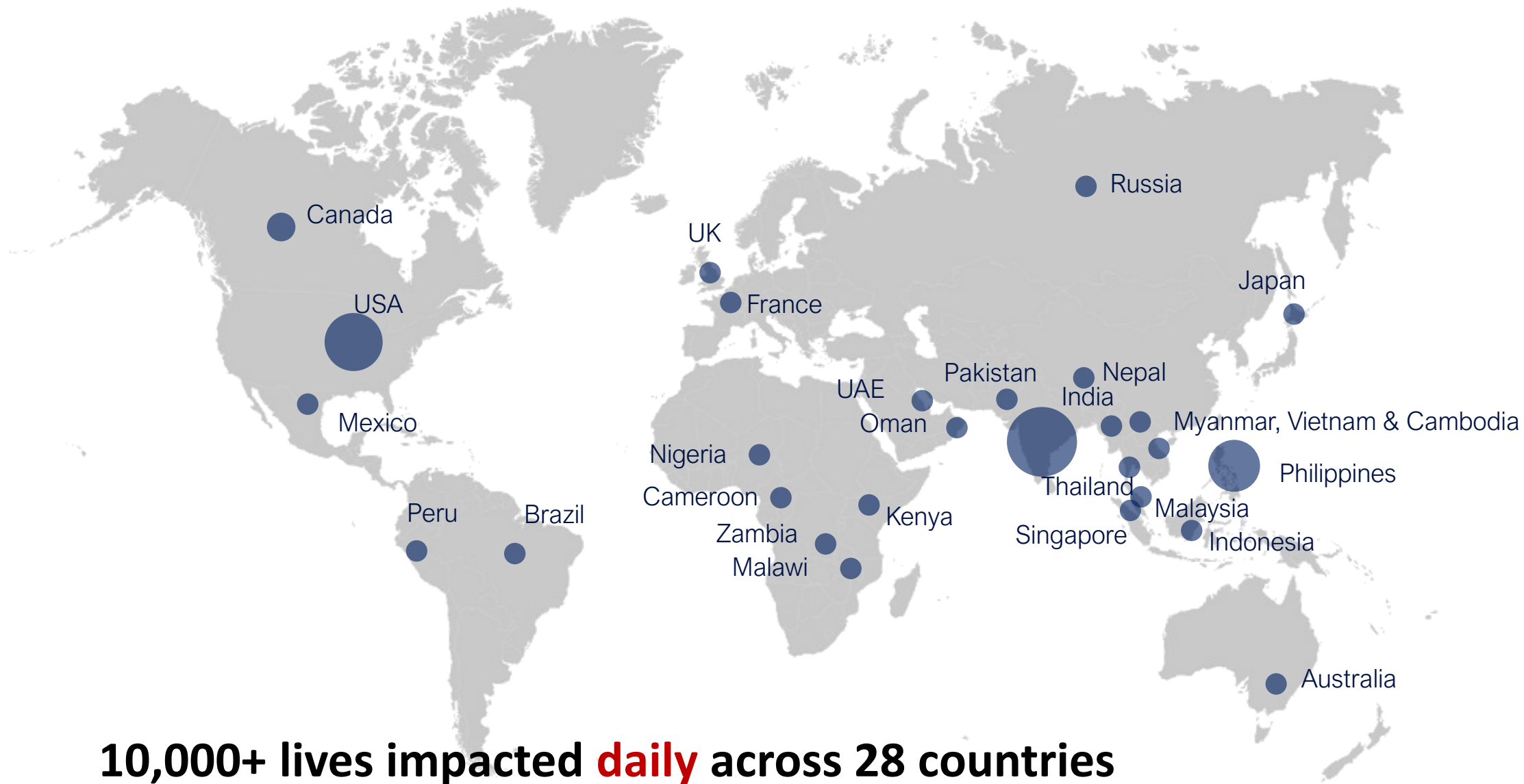


A historical black and white photograph of a large, crowded hospital ward. The room has a high, vaulted wooden ceiling with exposed beams and numerous windows along the walls. Patients are lying on metal cots arranged in rows. Some patients are sitting up, while others are resting. The ward is filled with people, suggesting a high capacity for patients. A blue semi-transparent banner is overlaid across the middle of the image, containing white text.

# AI-powered solutions for TB & COVID-19





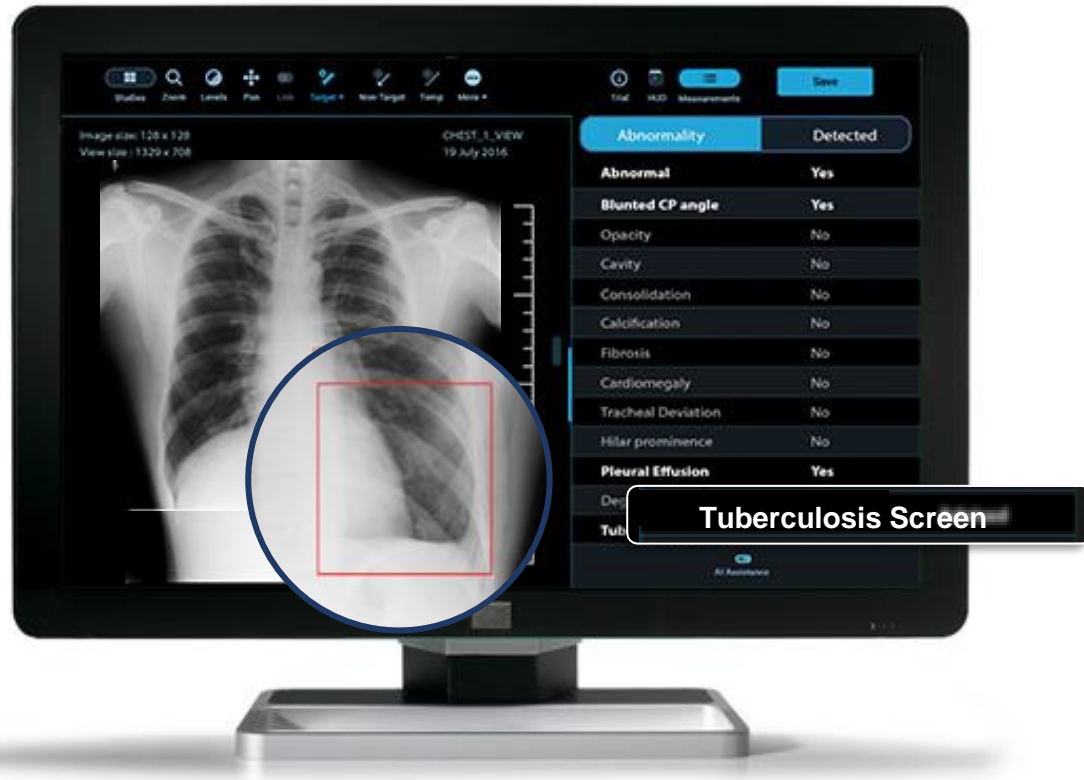
ai

ai

qXR

# AI interpretation of Chest X-rays for screening, triaging and progression monitoring of TB & COVID-19

# qXR – DIFFERENTIATOR



## LARGEST TRAINING DATASET

Underlying convolutional neural networks trained with **2.5 Million scans**, generalize well to new data. Clinically validated in multiple geographies

DETECTS AND LOCALIZES 20+ ABNORMALITIES INCLUDING TB & COVID-19

RESULTS PROCESSED IN SECONDS ON CLOUD OR ON PREMISE

## HARDWARE AGNOSTIC

Tested with X-rays from all major manufacturers (DR and CR)

CE CERTIFIED



Nodule



Opacities



Cavity



Tuberculosis



Consolidation



Fibrosis



Blunted CP



Pneumothorax



Pleural Effusion



Hilar enlargement



Cardiomegaly

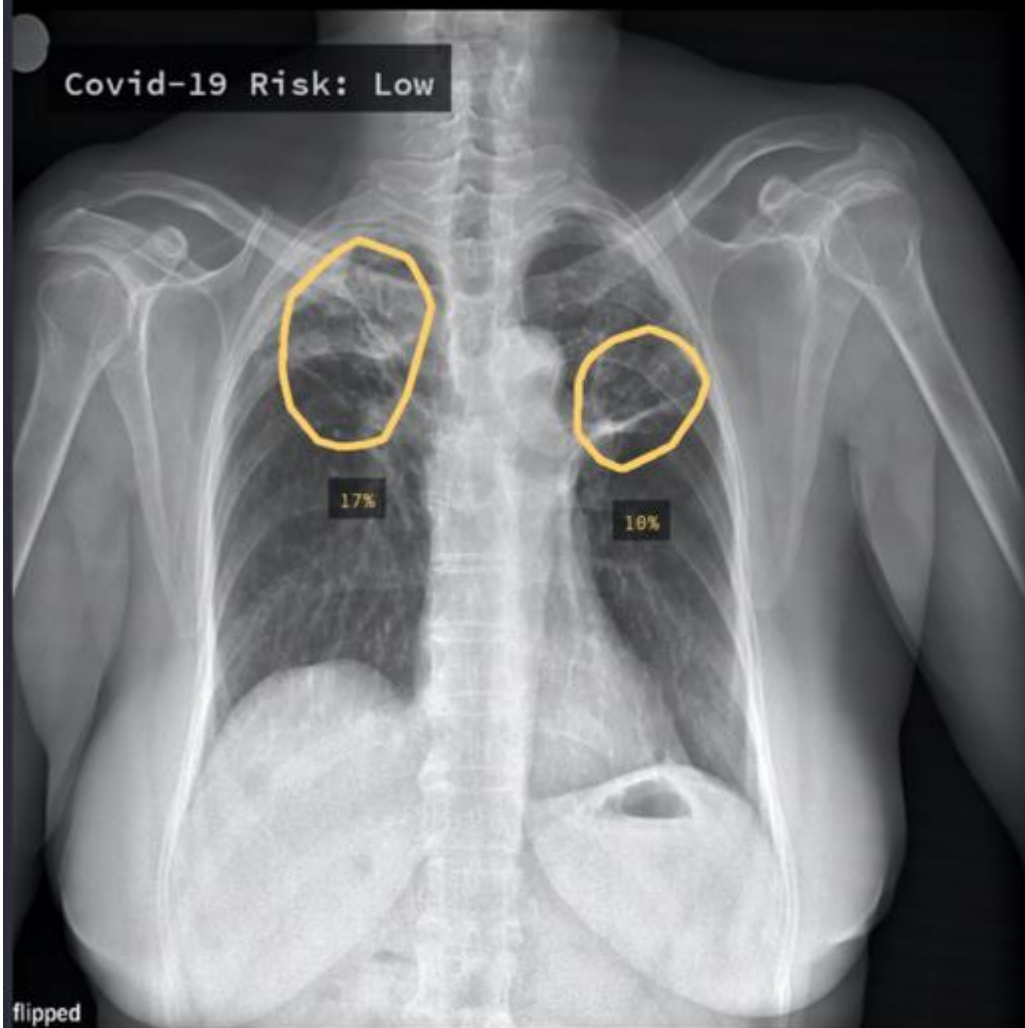


Other abnormalities

# qXR PRODUCT CAPABILITY

qXR detects and localizes multiple findings in a Chest X-ray including abnormal classification, different types of lung parenchymal opacities, pneumothorax, pleural effusion, cardiac enlargement, and anatomical variations seen in the chest.





## qXR Interpretation

Abnormal	YES
Lungs	
Opacity	YES
Location: LU, LM, RU, RM	
Atelectasis	YES
Location: LM, RU	
Calcification	YES
Cavity	YES
Location: RU	
Consolidation	NO
Fibrosis	YES
Location: LU, RU	
Nodule	YES
Location: LU, LM, RU, RM	
Pleura	
Blunted Costophrenic Angle	NO
Pleural Effusion	NO
Mediastinum	
Hilar Enlargement	NO
Heart	
Cardiomegaly	NO
Tuberculosis	YES

Powered By  
qure.ai

Opacity is observed in bilateral upper and mid zones

Projection area of the left lung affected - 9.9%

Projection area of the right lung affected - 17.2%

Atelectasis is observed in left mid zone and right upper zone

Inhomogeneous Opacity, probable Cavitation is observed in right upper zone

Nodular Opacity observed in bilateral upper and mid zones

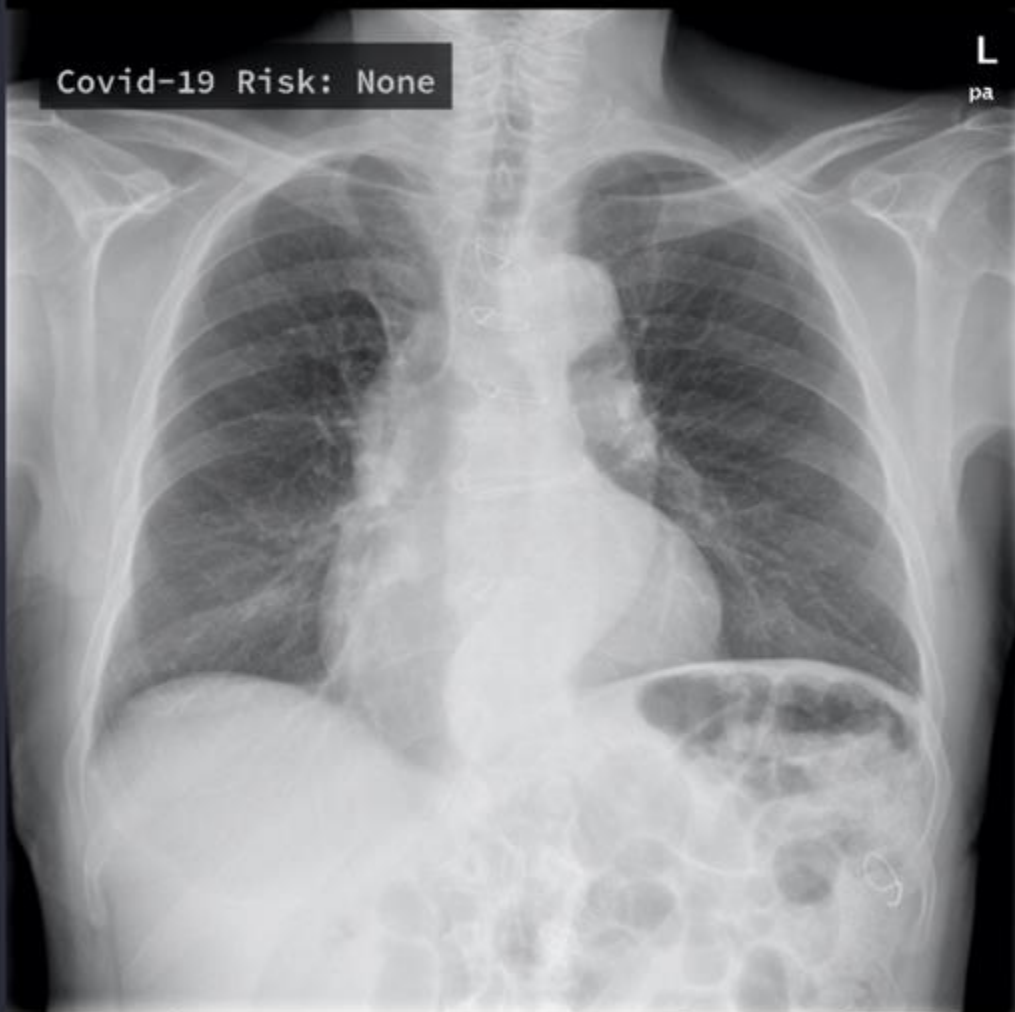
Fibrotic changes are observed in bilateral upper zone

Calcification is noted

Pleura appears normal

Heart appears normal

Covid-19 Risk: None



## qXR Interpretation

Abnormal NO

### Lungs

Opacity NO  
 Atelectasis NO  
 Calcification NO  
 Cavity NO  
 Consolidation NO  
 Fibrosis NO  
 Nodule NO

### Pleura

Blunted Costophrenic Angle NO  
 Pleural Effusion NO

### Mediastinum

Hilar Enlargement NO

### Heart

Cardiomegaly NO

### Tuberculosis

NO

Findings (Patient: 86667)

The Lungs are clear

Pleura appears normal

Heart appears normal

The mediastinum is within normal limits.

Covid19-Risk: none

### Symptoms

N/A

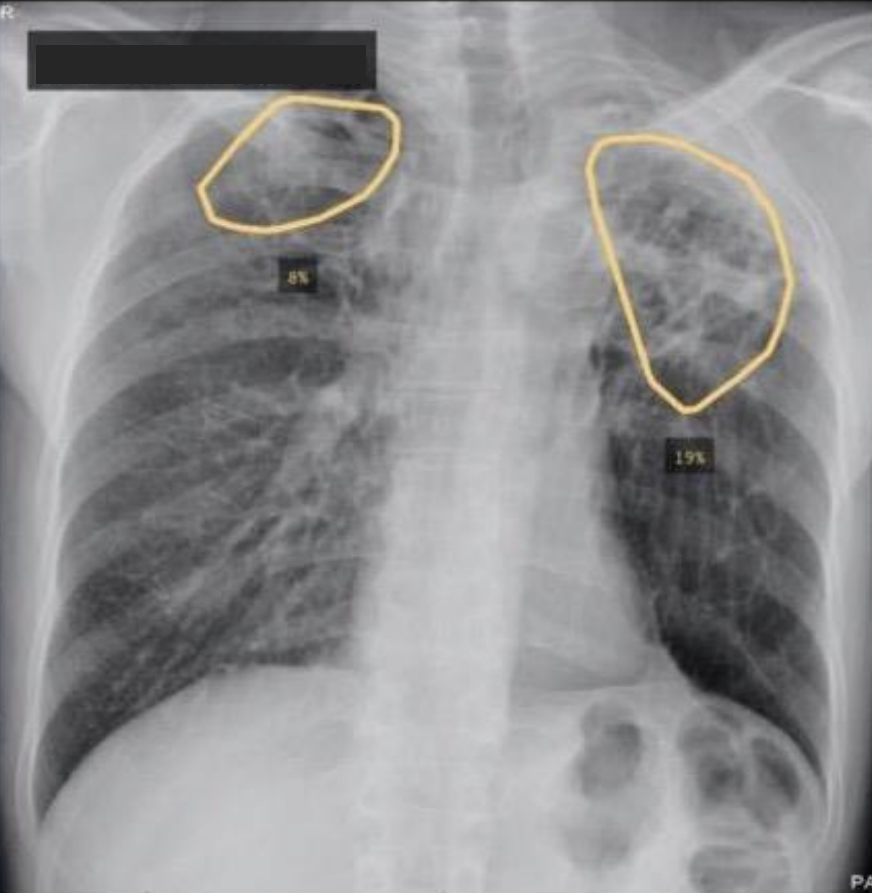
### Feedback

Tuberculosis screen feedback: ☐ Yes ☐ No

SUBMIT FEEDBACK

- Detects signs of Classic and atypical pulmonary | Hilar | Pleural tuberculosis.
- Detects classical pulmonary TB, as well as atypical manifestations seen in immunocompromised patients

# qXR-TB HIGHLIGHTS



**qXR Interpretation**

Abnormal	YES
Lungs	
Opacity	YES
Location: LU, LM, RU	
Atelectasis	YES
Location: LU, RU	
Calcification	YES
Cavity	YES
Location: LU, LM, RU	
Consolidation	YES
Location: LU, LM, RU	
Fibrosis	YES
Location: LU, RU	
Nodule	YES
Location: LU, LM, RU	
Pleura	
Blunted Costophrenic Angle	NO
Pleural Effusion	NO
Mediastinum	
Hilar Enlargement	NO
Heart	
Cardiomegaly	NO
Tuberculosis	YES

Powered by **qure.ai**

**Findings (Patient: test\_tnc\_4)**

Opacity is observed in bilateral upper zones and left mid zone

Projection area of the left lung affected - 18.9%

Projection area of the right lung affected - 8.5%

Inhomogeneous Opacity, probable Consolidation is observed in bilateral upper zones and left mid zone

Atelectasis is observed in bilateral upper zone

Inhomogeneous Opacity, probable Cavitation is observed in bilateral upper zones and left mid zone

Nodular Opacity observed in bilateral upper zones and left mid zone

Fibrotic changes are observed in bilateral upper zone

Calcification is noted

Pleura appears normal

Heart appears normal

Covid19-Risk: low

Tuberculosis screen advised

Symptoms

N/A

Feedback

Tuberculosis screen feedback: ☐ Yes ☐ No



# Deep learning in chest radiography: Detection of findings and presence of change

Ramandeep Singh, Mannudeep K. Kalra, Chayanin Nitiwarangkul, John A. Patti, Fatemeh Homayounieh, Atul Padole, Pooja Rao, Preetham Putha, Victorine V. Muse, Amita Sharma, Subba R. Digumarthy 

“There was no statistical difference between qXR and SOR for all abnormalities”

“The overall accuracy of DL algorithm was better or equal to test radiologists with different levels of experience.”

“Substantially better than the four test radiologists for presence or lack of changes in pulmonary opacities.”

MENU ▾

SCIENTIFIC REPORTS

Article | [Open Access](#) | Published: 18 October 2019

## Using artificial intelligence to read chest radiographs for tuberculosis detection: A multi-site evaluation of the diagnostic accuracy of three deep learning systems

Zhi Zhen Qin, Melissa S. Sander, Bishwa Rai, Collins N. Titahong, Santat Sudrungrot, Sylvain N. Laah, Lal Mani Adhikari, E. Jane Carter, Lekha Puri, Andrew J. Codlin & Jacob Creswell 

*Scientific Reports* **9**, Article number: 15000 (2019) | [Cite this article](#)

**8440** Accesses | **1** Citations | **210** Altmetric | [Metrics](#)

## Stop TB Partnership

- Independent study by StopTB.
- qXR outperformed experienced human readers in differentiating people with bacteriologically confirmed TB and those without.
- Met FIND's Target Product Profile (TPP) for a triage test of  $\geq 95\%$  sensitivity and  $\geq 80\%$  specificity.

Article | [Open Access](#) | Published: 14 January 2020

## Deep learning, computer-aided radiography reading for tuberculosis: a diagnostic accuracy study from a tertiary hospital in India

Madlen Nash, Rajagopal Kadavigere, Jasbon Andrade, Cynthia Amrutha Sukumar, Kiran Chawla, Vishnu Prasad Shenoy, Tripti Pande, Sophie Huddart, Madhukar Pai & Kavitha Saravu 

*Scientific Reports* **10**, Article number: 210 (2020) | [Cite this article](#)

**1363** Accesses | **25** Altmetric | [Metrics](#)



McGill  
UNIVERSITY



Manipal  
Hospitals  
LIFE'S ON

- Compared the performance of qXR on retrospectively collected cases from a tertiary hospital
- To detect signs of TB, qXR's sensitivity was higher than that of radiologists while the specificity for both was the same
- To differentiate between normal and abnormal CXRs in a tertiary care hospital, qXR's AUC was 0.87



FREUNDESKREIS FÜR  
INTERNATIONALE  
TUBERKULOSEHILFE

- Evaluation in a geriatric population for TB screening in Vietnam by FIT
- Evaluation of a total of 1181 cases where prevalence of microbiologically confirmed PTB was 12.53%.
- Sensitivity of the Field reader was found to be 90.9% and Specificity was 49.5%. At the same time qXR for TB screen had a sensitivity of 89.5% and Specificity of 53.9%



- Head-to-head comparison of Radiologist and AI reporting on 3945 scans
- the 3 radiologist-consensus agreed with the algorithm results in 64.9% of the cases, and with the original radiology report in the remaining 35.1%



- Evaluation of capability of the Algorithms to detect Change in Scans over time
- AUC of the Algorithm was found to be superior to the Radiologists in detecting Change



- Deep Learning algorithms can help identify 'normal' chest X-Rays with a high degree of confidence
- Study concluded with a sensitivity of 97.19% on classifying CXRs into abnormal form a total sample size of 430 from 5 different sites in New Delhi, India



पुनराश्रित राष्ट्रीय

क्षय नियंत्रण कार्यक्रम



टीबी का पक्का इलाज है-  
डॉट्स

सभी स्वास्थ्य केन्द्रों में डॉट्स  
सुविधायें मुफ्त उपलब्ध हैं।

टीबी से कीजिये दुश्मनी  
टीबी के मरीजों से दोस्ती

- टीबी का इलाज संभव है
- टीबी घुने, हाथ मिलाने से नहीं फैलता
- टीबी मरीजों से मिलएं दोस्ती का हाथ,  
ना करें भेद भाव.

टीबी होरेगा, देश जीतेगा.

जीवन सम्पत्ति के लिए दूध पाने का निषेध करें।  
टीन की 1800116666

पक्का इलाज और समझदारी  
यही है टी.बी. से बचने की तैयारी



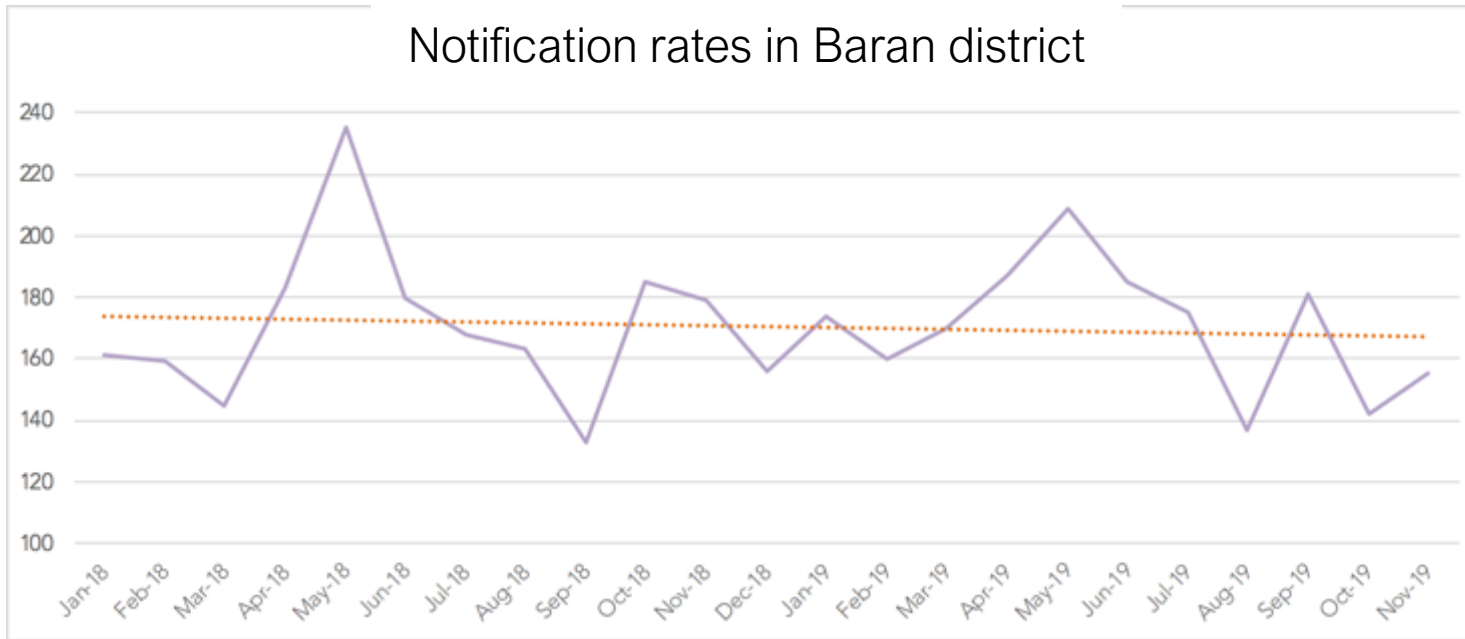
**The Global Fund**  
To Fight AIDS, Tuberculosis and Malaria

# NITI Aayog: Surveillance screening for TB, Rajasthan

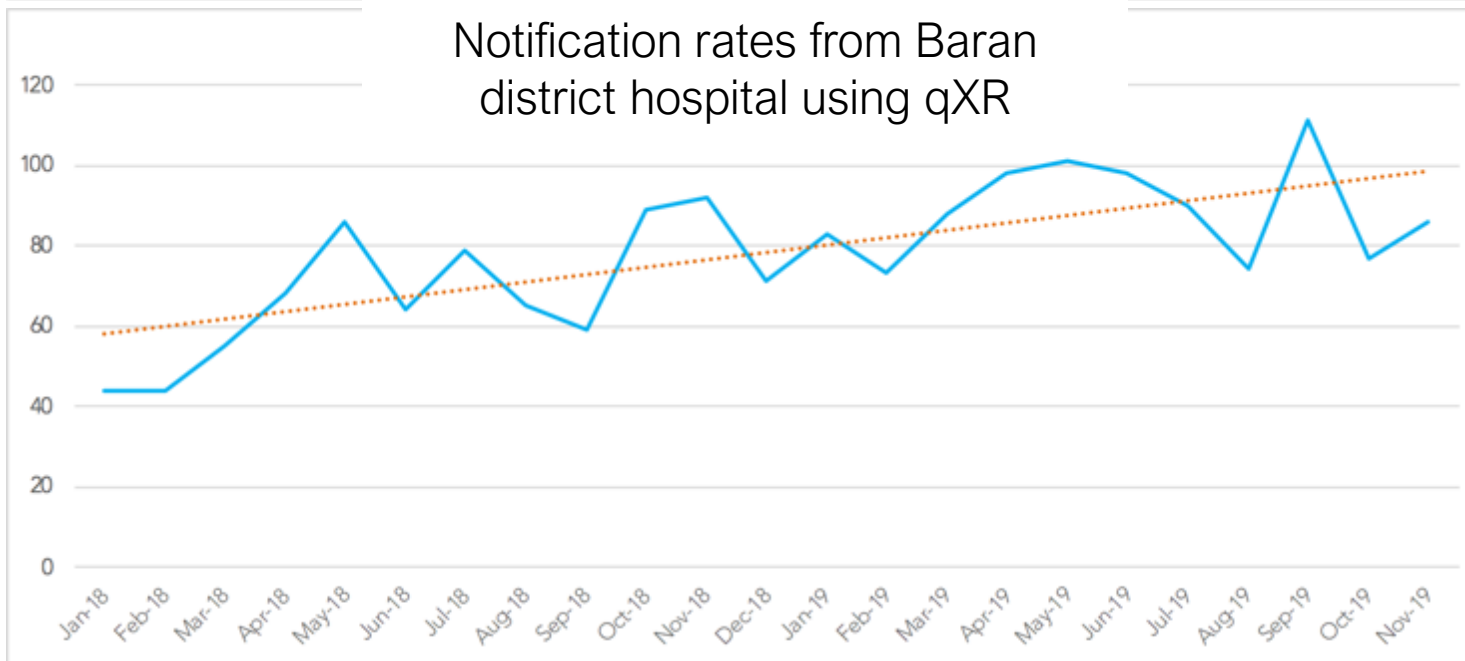


- Decreased Patient Dropout by alerting technician of TB +ve X-ray within 2 minutes of X-ray generation
- Decreased workload by fully automating referrals to TB Unit
- Detected 33% additional cases which would have been missed otherwise
- Time to treatment reduced from 5.7 to 3.2

Notification rates in Baran district



Notification rates from Baran district hospital using qXR



32.9% increase in notifications with qXR



**11% additional** cases detected by qXR  
which were missed by radiologists

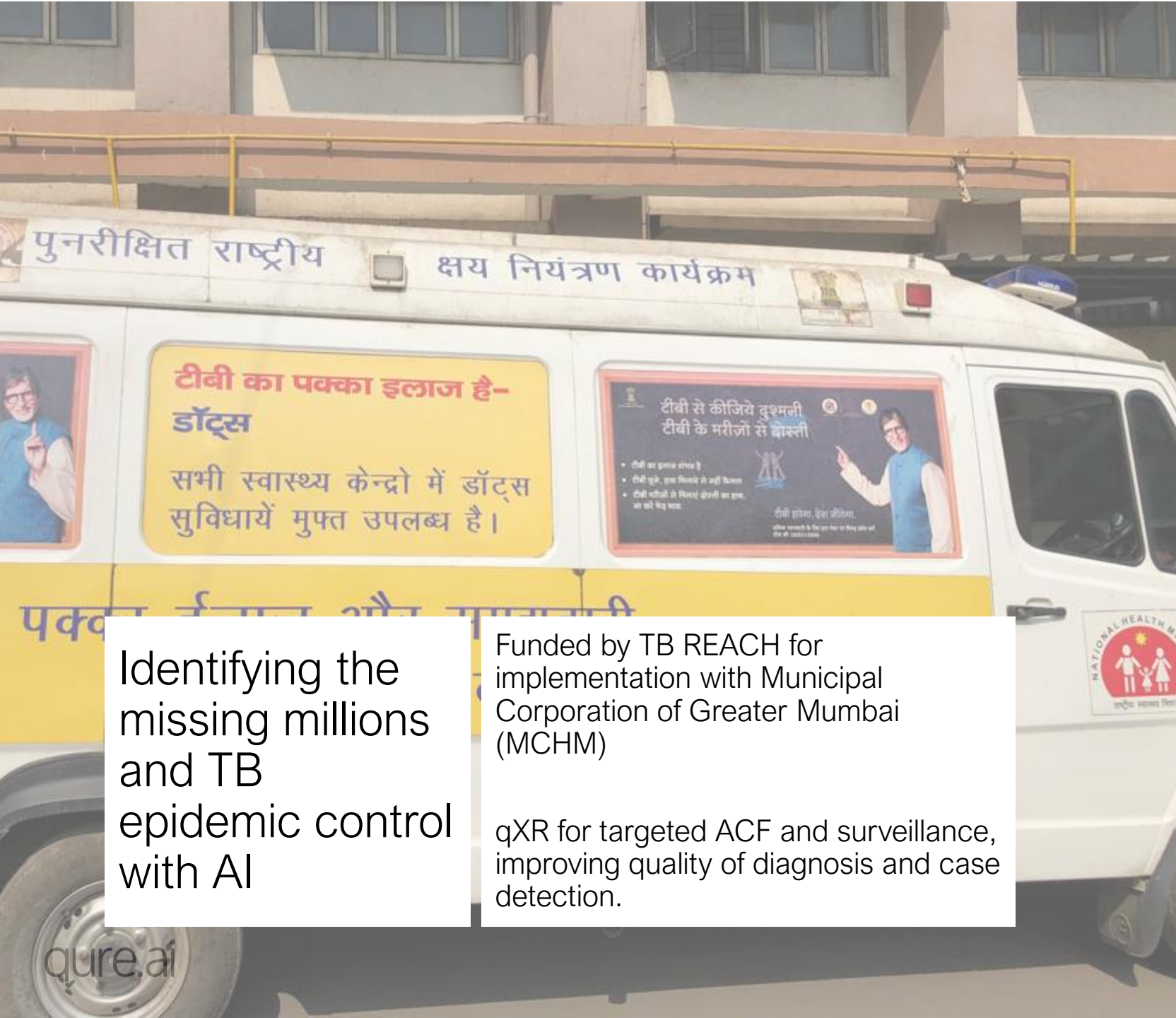
Reduced X-ray interpretation time from  
**3 weeks** to **1 minute** significantly  
reducing lost to follow-up cases

**\$40** cost saved per notified case, due  
to:

- More cases detected with a smaller number of GXP tests
- Reduced cost of read as compared to a radiologist
- Due to instant sputum collection, lost to follow-up cases are 0.



DEMO OF qTRACK portal used by PBSP



Identifying the missing millions and TB epidemic control with AI

Funded by TB REACH for implementation with Municipal Corporation of Greater Mumbai (MCHM)

qXR for targeted ACF and surveillance, improving quality of diagnosis and case detection.



Stop TB Partnership  
TB REACH





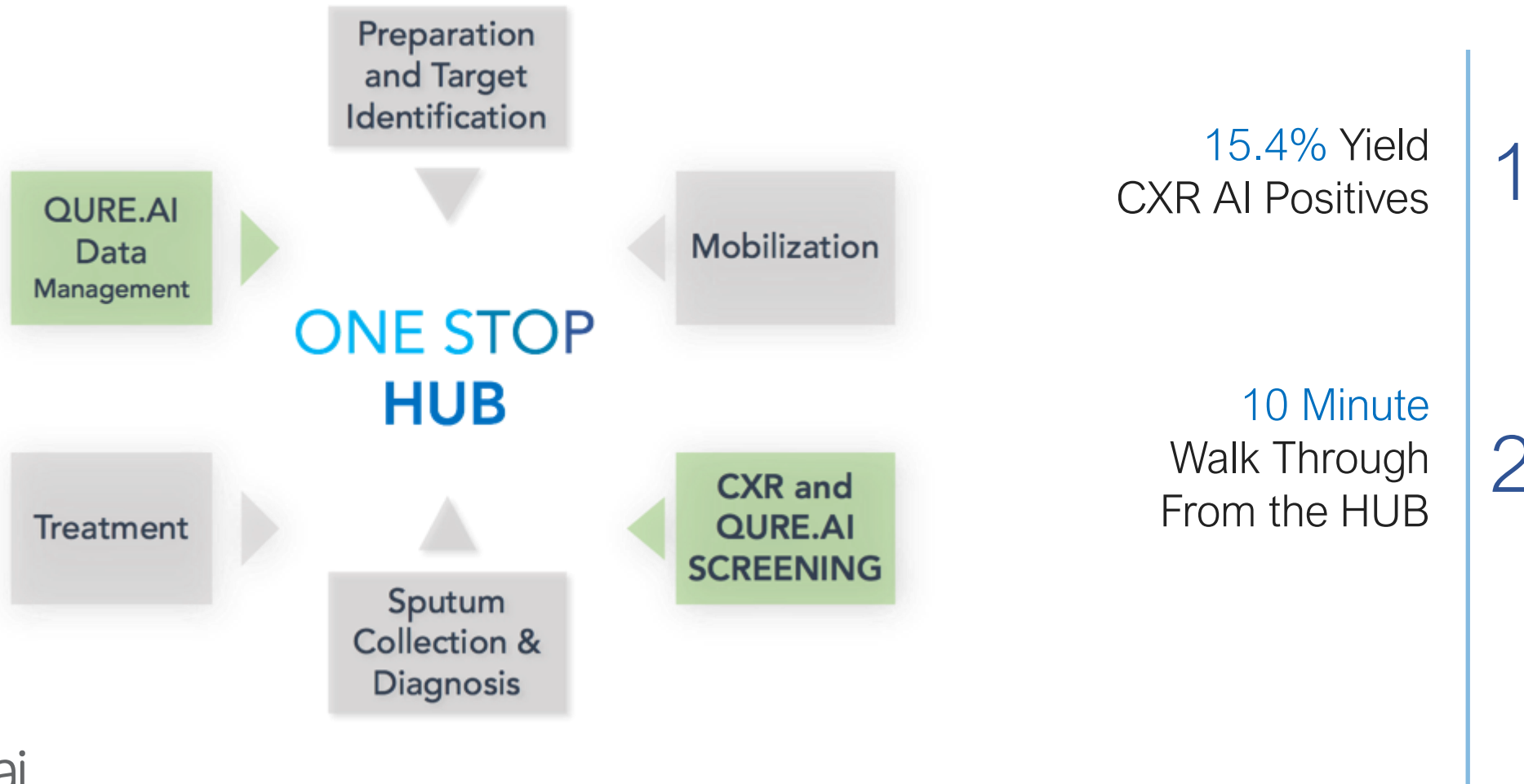
- Part of the SCALE study in Blantyre, Malawi led by Dr. Elizabeth Corbett, LSHTM and funded by the Wellcome Trust, project aims at large community screening across 72 clusters in Blantyre.
- Qure.ai deployed a hybrid offline-online software to enable routine workflow in tents set up in villages with no network connectivity and research outcomes with reviewers in London.



**SCALE, Malawi by LSHTM**

qure.ai

# TB Innovations & Health Systems Strengthening, Philippines, funded by USAID



qTRACK app demo



# qXR for COVID-19





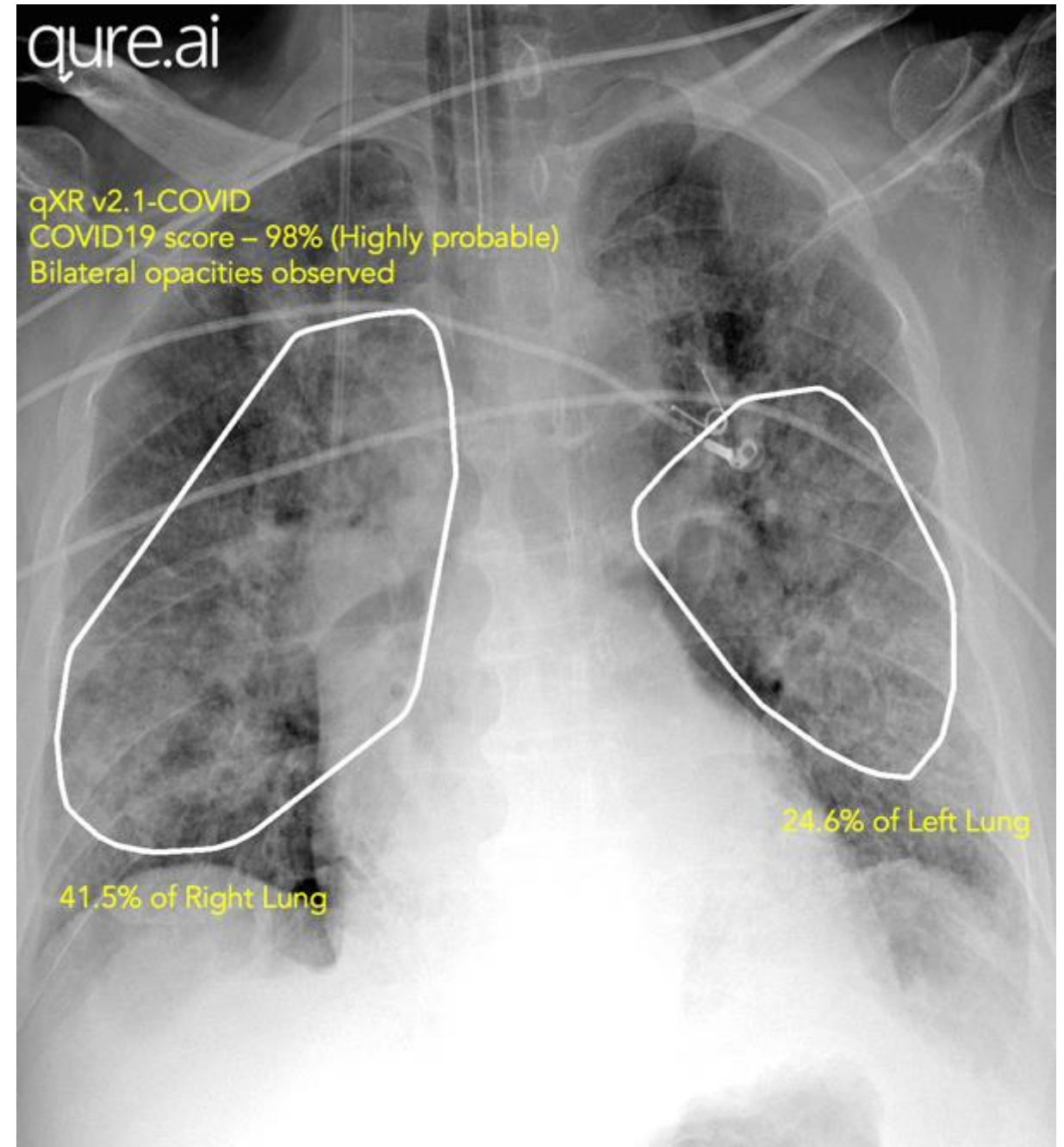
# qXR for COVID19

qXR is **CE certified** and can interpret Chest X-rays in less than a minute.

- a. Detect findings such as **ground glass opacities** and consolidation indicative of COVID19
- b. Localize the lesions - indicate whether the lesions are **bilateral** and in which zones
- c. Detect the presence of cavities, nodules, pleural effusions, fibrosis and lymphadenopathy for an alternative diagnosis ruling out COVID19
- d. **Quantification of lesions** can assist in monitoring progression of COVID19 patients

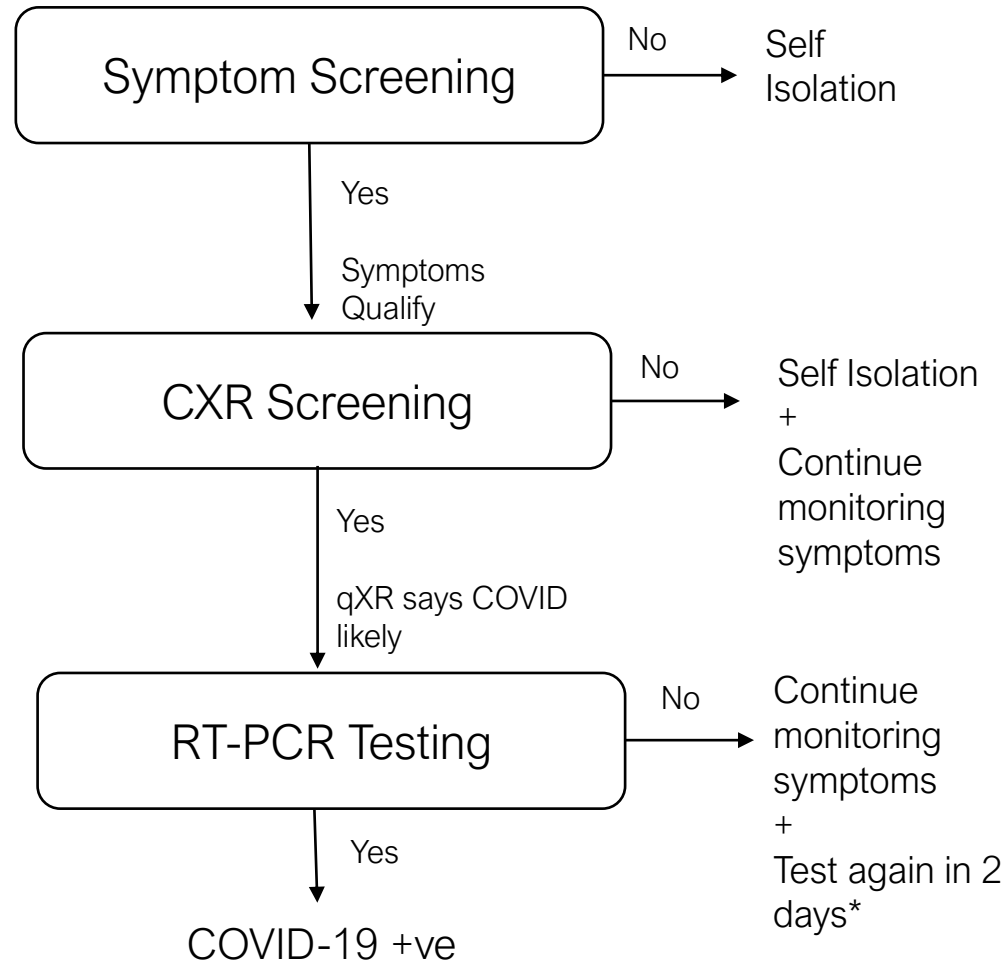
This capability is now being used at **35 sites** in India, Italy, Pakistan, Mexico & US to:

- a. Determine which patients need to be tested further, home quarantined or admitted to the hospital
- b. Monitor progression of COVID19 patients



# qXR for COVID19

*Italian and British hospitals are beginning to employ CXR as a first-line triage tool due to long reverse transcription polymerase chain reaction (RT-PCR) turnaround times*



## OPTIMIZED TESTING PROTOCOL

Location : Chain of hospitals in South Asia

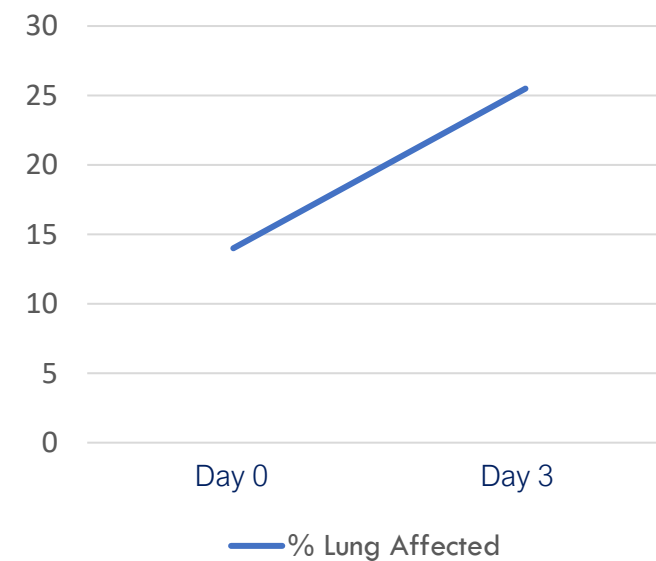
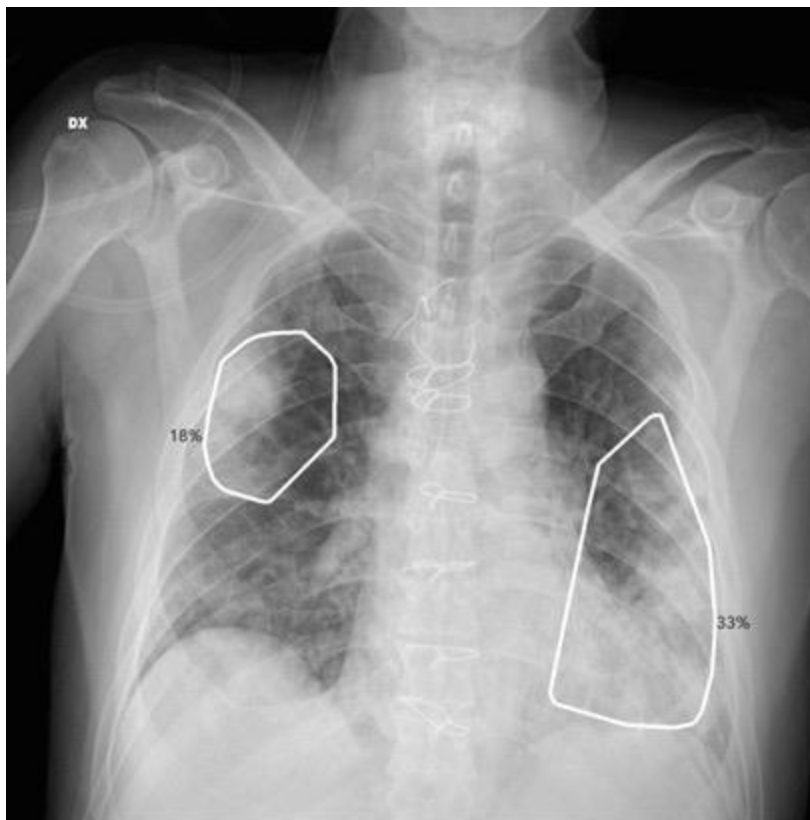
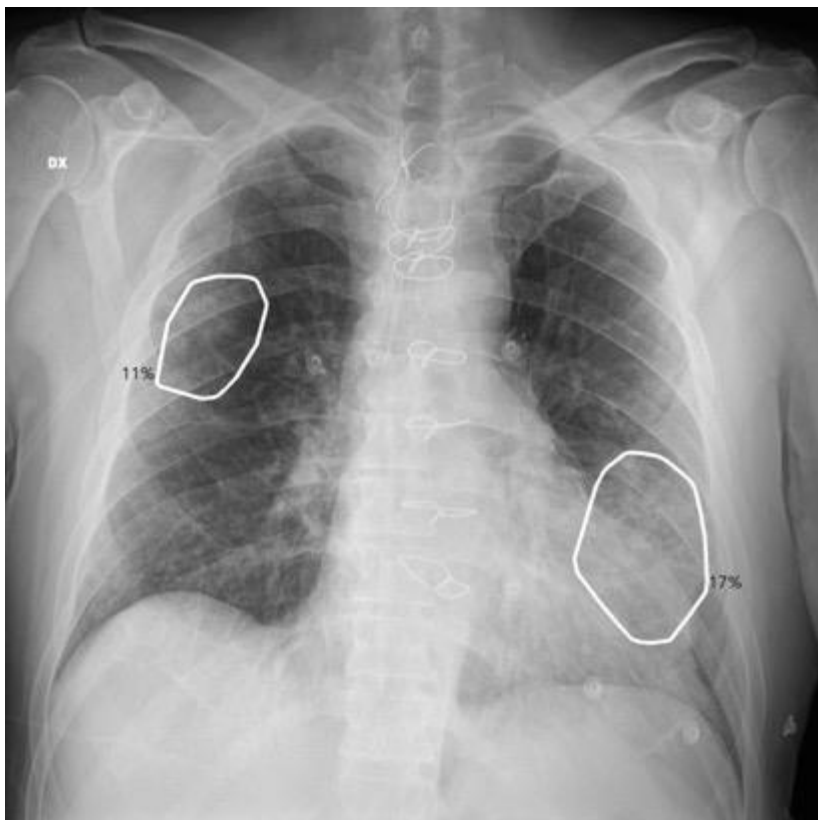
## VALUE

- Reach remote areas lacking testing infrastructure through screening vans and remote X-ray centers
- Reach higher population with same number of kits



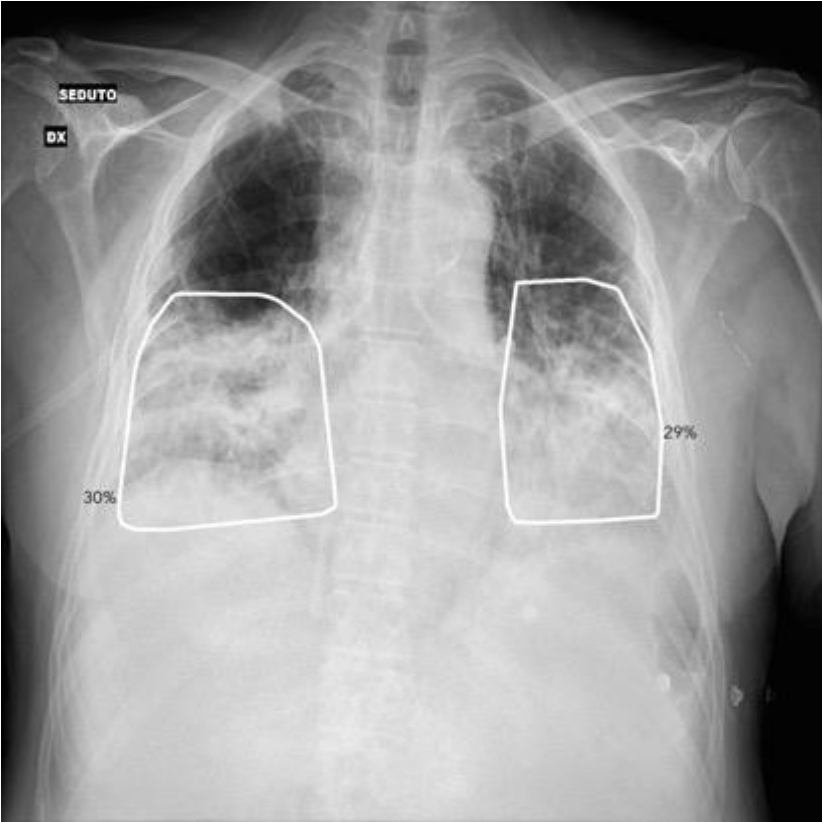
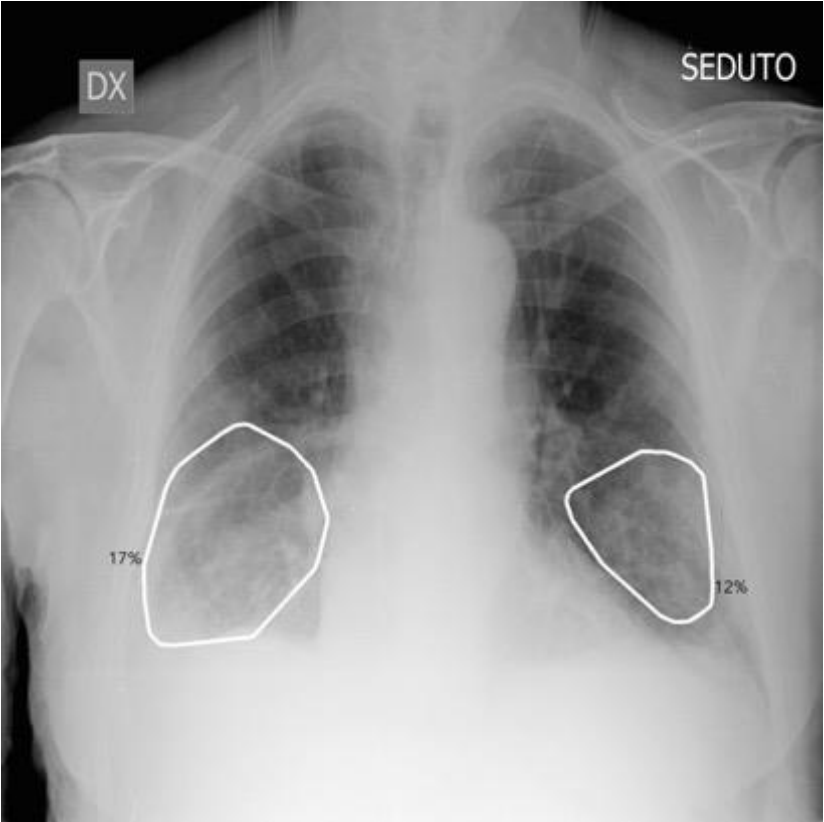
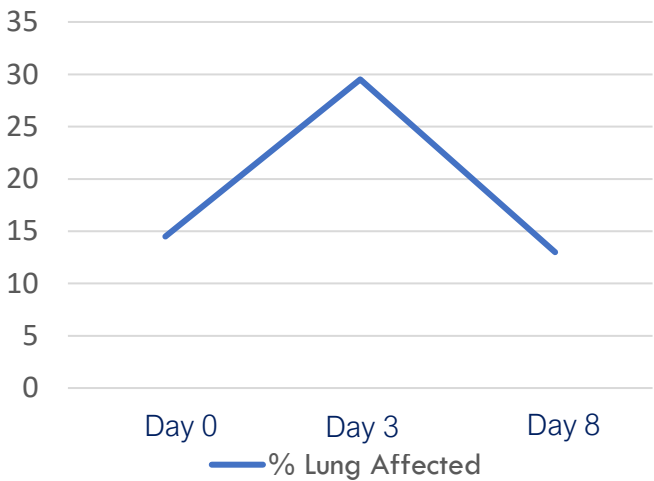
# COVID-19 PROGRESSION MONITORING

Lung Health Conditions Worsening Over Time



# COVID-19 PROGRESSION MONITORING

Lung Health Conditions Improving After Worsening







A historical black and white photograph of a large, crowded hospital ward. The room has a high ceiling with exposed wooden beams and numerous windows along the walls. Patients are lying on rows of cots, and some are being attended to by medical staff. A blue semi-transparent banner is overlaid in the center of the image, containing white text.

qSCOUT for remote triaging and  
monitoring of at-risk contacts

qSCOUT video



# Coming soon!







We look forward to joining hands with you in  
the efforts to fight TB & COVID-19!

Thank You