

The Only Platform Proven to Grow Your Structural Heart Program

FOR PROGRESSIVE CARDIOVASCULAR PROGRAMS

CardioCare

Digital Health Platform

Built as an end-to-end solution, the CardioCare Platform helps care teams identify and manage cardiovascular patients from diagnosis to treatment—enabling timely intervention and improving operational efficiency.

On average, the CardioCare Platform delivers a 10% annual procedure lift on top of organic growth.

Real Programs. Real Results.

+47%

Improvement in AS patients treated in 90 days for a small health system¹

Increase in monthly AS evaluation rates for a small health system² **+42%**

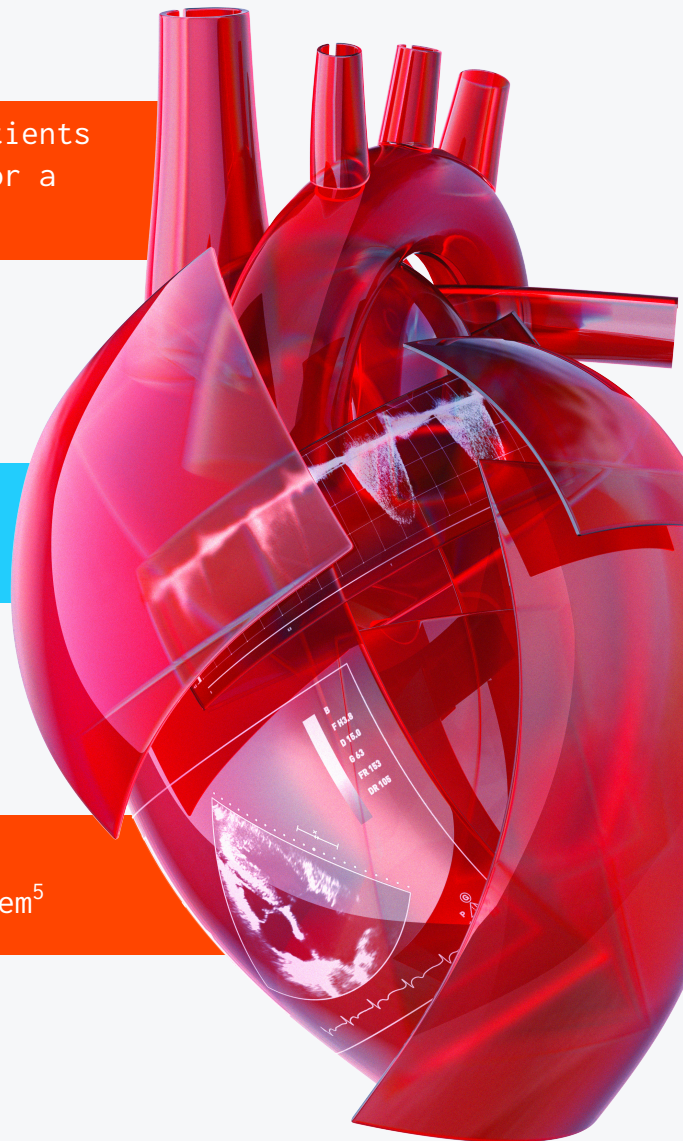
+16%

AVR growth for a large health system³

TAVR growth for a mid-sized health system⁴ **+29%**

+10%

mTEER growth for a mid-sized health system⁵



Keep Your Team One Step Ahead

The leading platform for guideline-driven population health management across the cardiovascular service line.



**AORTIC
STENOSIS**



**MITRAL
REGURGITATION**



**AORTIC
REGURGITATION**



**TRICUSPID
REGURGITATION**



**MITRAL
STENOSIS**



**HEART
FAILURE**



**ATRIAL
FIBRILLATION**

Cut Through the Noise, Direct Your Team to What Matters Most



Natural Language Processing^{6,7}

Transforms unstructured data into insights that support clinicians in making informed decisions.

AI-Powered Pre-Screening

Scans 3,000+ EMR codes, medications, and echo parameters automatically, identifying patients likely eligible for therapy per the AHA/ACC guidelines.

Predictive Modeling^{8,9}

Prioritizes patients for secondary review to confirm diagnosis and monitor AS disease progression.

For more information, please visit egnitehealth.com/solutions

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1. Improvement in AS patients treated in 90 days for a small health system
2. 2024 Increase in monthly evaluation rates for aortic stenosis from a program with 100 annual AVRs
3. 2024 Growth from a program with 1,162 annual AVRs
4. 2024 Growth from a program with 222 annual TAVRs
5. 2024 Growth from a program with 45 annual mTEERs
6. Published and validated algorithms as follows: Thomas JD, Petrescu OM, Moualla SK, Dobbles M, Hays JC, Rodriguez E, Barnhart GR. Artificial intelligence to assist physicians in identifying patients with severe aortic stenosis. *Intelligence Based Medicine*. 2022;6:100059. doi: 10.1016/j.ibmed.2022.100059 ; Moualla SK, McCarthy PM, Thomas JD, Dobbles M, Petrescu OM, Loper T, Barnhart GR, Brennan JM. Artificial intelligence-enabled predictive model of progression from moderate to severe aortic stenosis. *Intelligence-Based Medicine*. 2022;6:100062. doi: 10.1016/j.ibmed.2022.100062 ; Brennan JM, Petrescu M, McCarthy P, Moualla S, Nance H, Barnhart GR, Rodriguez E, Thomas J. Contemporary prevalence of valvular heart disease & diagnostic variability across centers. Poster presented at: American College of Cardiology 71st Annual Scientific Session & Expo; April 2-4, 2022; Washington, DC
7. Gaps in Contemporary Echocardiographic Reporting Quality for Mechanisms of Mitral Regurgitation: A Call to Action Asch, Federico M. Sharma, Rahul P. Cubeddu, Robert J. Généreux, Philippe Dobbles, Michael Rodriguez, Evelio Thomas, James D. Gillam, Linda D. et al. *Journal of the American Society of Echocardiography*, Volume 37, Issue 1, 108 - 110
8. Moualla SK, et al. *Intelligence-Based Medicine*. 2022;6:100062
9. Thomas JD, et al. *Intelligence-Based Medicine*. 2022;6:100059.

transcatheter aortic valve replacement (TAVR), mitral transcatheter edge-to-edge repair (mTEER), aortic valve replacement (AVR), artificial intelligence (AI), aortic stenosis (AS)

The CardioCare platform is not intended for use in the diagnosis, cure, mitigation, or prevention of cardiovascular diseases.

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