

ONE



WatchPAT[®] ONE

Fully Disposable. Fully Reliable.

The logo for itamar medical, featuring the word 'itamar' in a dark blue font with a small green plus sign above the 'i', and the word 'medical' in a lighter blue font below it.



Fully Disposable. Fully Reliable.

- Same WatchPAT® simplicity, accuracy, and reliability
- NO return shipment; NO cleaning, downloading, or charging; NO infection risk
- Immediate access to sleep data for interpretation
- Data interpretation anytime, anywhere, with cloud-based solution

WatchPAT® ONE is designed for practices with

- Limited access to capital
- Limited back office support
- Patients in remote locations
- Desire to grow HSAT program or facing significant backlog

WatchPAT® ONE measures 7 channels (PAT® signal, heart rate, oximetry, actigraphy, body position, snoring, and chest motion) via 3 points of contact. Its 3 points of contact delivers 98% study success rate without compromising diagnostic capability.¹

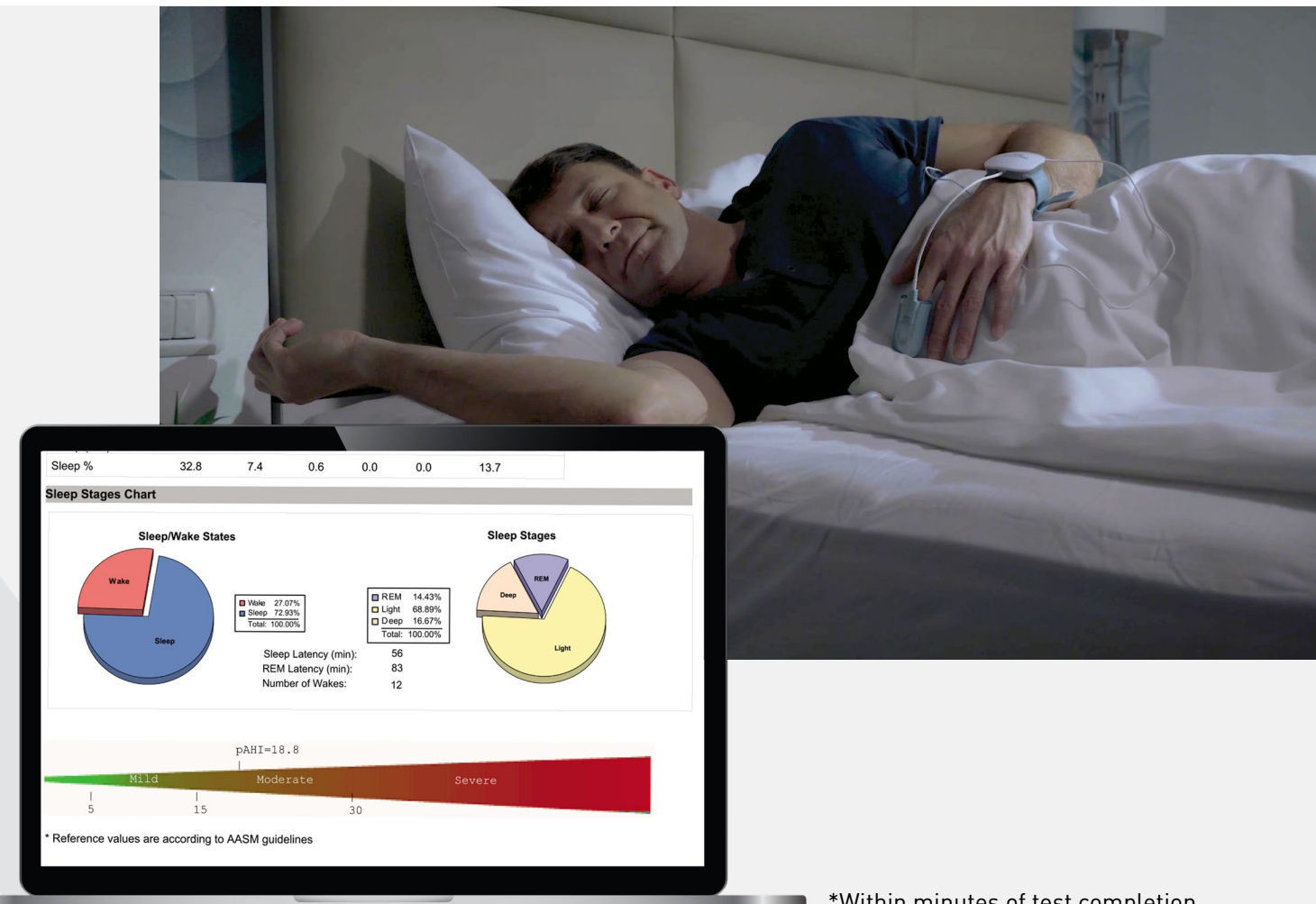
Instant results

As soon as the study is completed, sleep data are transmitted to the cloud so the clinician can immediately* review the raw data and automated study results.

The raw data are downloaded and autoscored, providing AHI, RDI, and ODI based upon True Sleep Time and Sleep Staging. Both the AHI and RDI derived from the PAT® were clinically validated with an 89% correlation to PSG.² The PAT® signal is an approved measure in the 2017 AASM HSAT Clinical Practice Guidelines for Adults With OSA.

Differentiates between obstructive and central sleep apnea

WatchPAT® has been clinically proven to detect all types of apnea events. The Central PLUS Module enables specific identification of central sleep apnea and percent of sleep time with Cheyne-Stokes respiration.

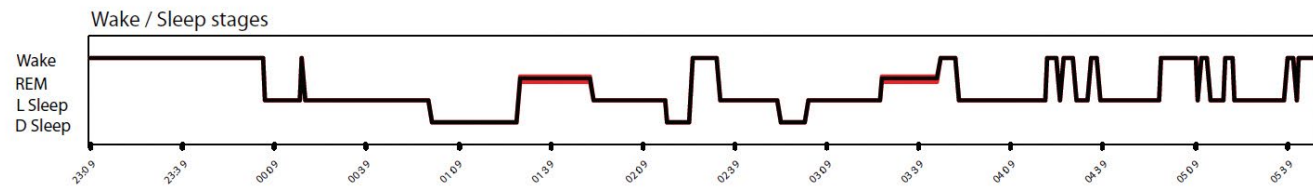


*Within minutes of test completion.

Improved Accuracy With Sleep Architecture and True Sleep Time

Sleep Architecture

WatchPAT® has clinically validated Sleep Architecture that provides information on sleep staging, sleep efficiency, and sleep and REM latency.^{4,5} It uses the PAT® amplitude and pulse rate to differentiate between non-REM and REM, thereby creating a Sleep Architecture (light, deep, REM). WatchPAT® also provides the added value of detecting REM-related sleep apnea with REM and non-REM AHI.



True Sleep Time

WatchPAT® uses its advanced actigraphy to differentiate between wake and sleep periods to calculate True Sleep Time. It calculates AHI and RDI using the patient's True Sleep Time rather than the recorded time used in most commercially available HSATs. The True Sleep Time reduces the risk of misdiagnosis and misclassification that has been reported to be 20% with HSATs using total recording time.⁶

Sleep Summary	
Start Study Time:	9:43:01 PM
End Study Time:	6:04:59 AM
Total Study Time:	8 hrs, 21 min
Sleep Time	6 hrs, 7 min
% REM of Sleep Time:	21.4

WatchPAT® Automated Report and Clinical Parameters

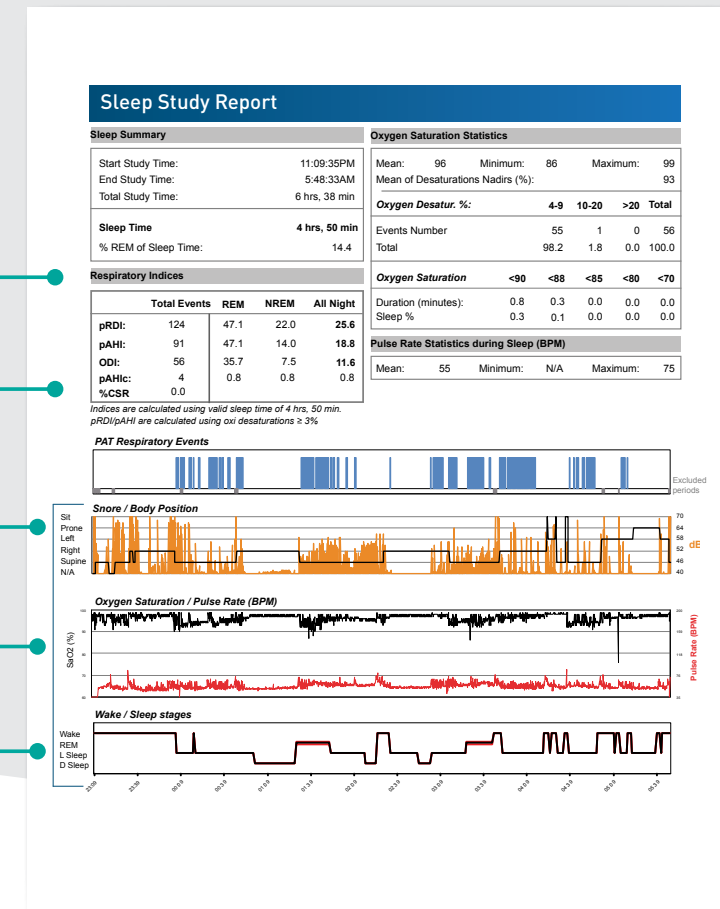
Respiratory Indices
AHI, RDI, ODI

Central AHI

Snoring and
Body Position

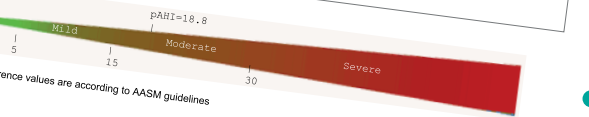
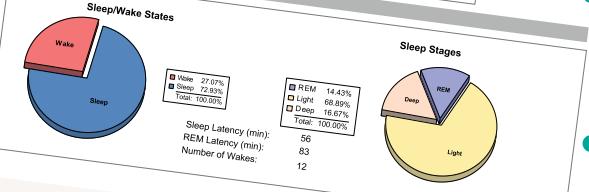
Oxygen Saturation
& Heart Rate

Sleep Stages



Body Position Statistics					
Position	Supine	Prone	Right	Left	Non-Supine
Sleep (min)	150.3	17.0	114.7	9.0	140.7
Sleep %	51.7	5.8	39.4	3.1	48.3
pRDI	33.6	0.0	19.4	N/A	17.1
pAHI	28.8	0.0	10.0	N/A	8.1
ODI	18.4	0.0	5.2	N/A	4.3

Snoring Statistics					
Snoring Level (dB)	>40	>50	>60	>70	>80
Sleep (min)	95.5	21.5	1.7	0.0	0.0
Sleep %	32.8	7.4	0.6	0.0	0.0
Mean	42 dB				



Body Position
Statistics

Snoring
Statistics

Sleep Stages

AHI Severity
Scale



If you thought it couldn't get any better, wait until you see these latest additions to our lineup...

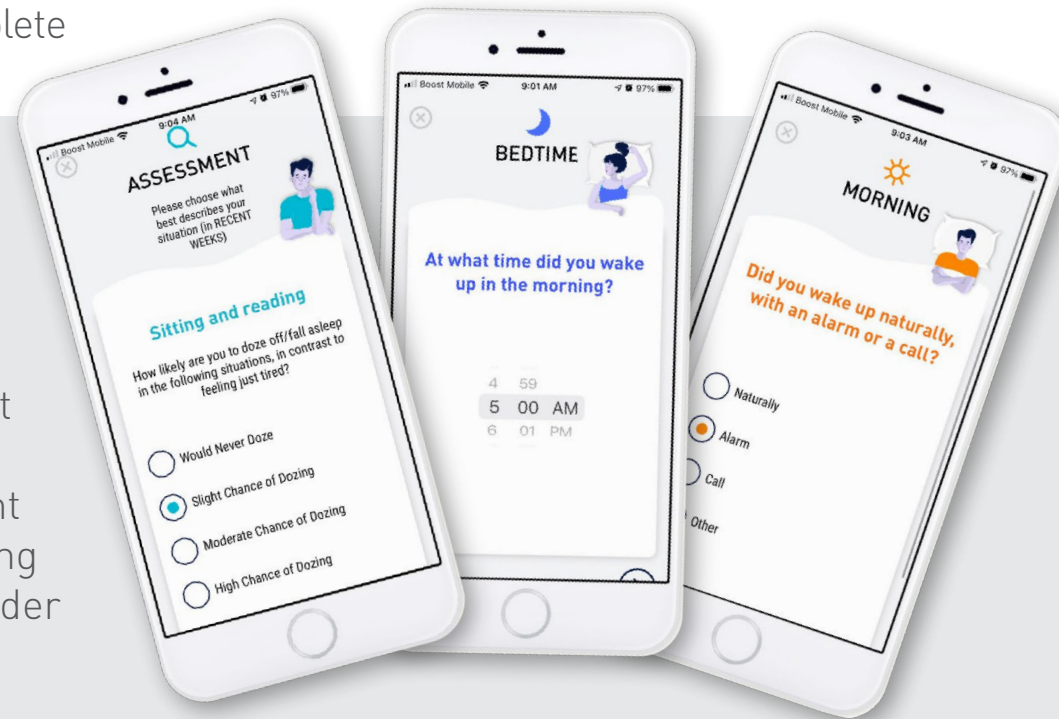
WatchPAT® with SleePAtH®: an advanced, multifunctional app that can enhance the diagnosis process

Centralizes data management

- Features customizable pre and post-test and self-assessment questionnaires that patients complete as part of a comprehensive sleep study
 - Can be customized at the practice or individual patient level
- Instantly transmits WatchPAT® ONE test results and questionnaire responses to the cloud, which are integrated into a single report for your immediate review once the study is complete

Helps fill in gaps

- WatchPAT® with SleePAtH® in-app questionnaires can gather key details that may be missing with other means of patient self-reporting, enabling you to perform a broader sleep evaluation



In-app questionnaires:

Support sleep telemedicine

Capture recommended Adult Comprehensive Sleep Evaluation

Look further than AHI

Evaluate insomnia, daytime sleepiness, sleep scheduling, RLS, and patient behavior and lifestyle

Improve communication

Personalize the experience and send reminders for completing the evaluation

WatchPAT® ONE-M: when a single night is not enough

- The breakthrough multinight HSAT that meets AASM guidelines³
- Instantly transmits sleep data to the cloud for your immediate review and interpretation after each night's test is complete
- The flexibility to use for up to 3 nights
- This enables you to detect any night-to-night variability to help optimize your diagnosis and treatment plan



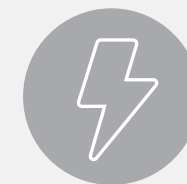
Everything that makes WatchPAT® ONE one of a kind— now over multiple nights



Fully disposable
at the end of the
study period to
reduce infection
risks



Easy to use,
without belts
and cannulas



Instant,*²
and highly
accurate²
comprehensive
results



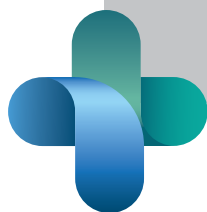
True Sleep Time,
sleep staging,
and central
sleep apnea
detection

*Within minutes of test completion.



Itamar Medical is a leading medical device company that develops and markets products utilizing its proprietary PAT® technology to diagnose and manage sleep-disordered breathing. The company has pioneered innovative solutions to help physicians provide comprehensive sleep apnea management in a variety of clinical environments to optimize patient care and reduce healthcare costs.

Itamar Medical has offices and distribution channels around the world.



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This material is subject to a disclaimer available at <https://www.itamar-medical.com/terms-and-conditions/>.

References: **1.** Data on file. **2.** Yalamanchali S, Farajian V, Hamilton C, Pott TR, Samuelson CG, Friedman M. Diagnosis of obstructive sleep apnea by peripheral arterial tonometry: meta-analysis. *JAMA Otolaryngol. Head Neck Surg.* 2013;139(12):1343-1350. **3.** Kapur VK, Auckley DH, Chowdhuri S, et al. Clinical Practice Guideline for Diagnostic Testing for Adult Obstructive Sleep Apnea: an American Academy of Sleep Medicine Clinical Practice Guideline. *J Clin Sleep Med.* 2017;13(3):479-504. **4.** Hedner J, Pillar G, Pittman SD, Zou D, Grote L, White DP. A novel adaptive wrist actigraphy algorithm for sleep-wake assessment in sleep apnea patients. *SLEEP, Vol. 27, No. 8, 2004*:1560-1566. **5.** Hedner J, White DP, Malhotra A, et al. Sleep staging based on autonomic signals: a multi-center validation study. *J Clin Sleep Med.* 2011;7(3):301-306. **6.** Schutte-Rodin, et al. Comparison of AHI using recording time versus sleep time (abstract). *Sleep.* 2004;27(8):1560-1566.

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