

The Value of VisualDx

QUALITY CARE BEGINS WITH AN ACCURATE DIAGNOSIS

EFFICIENCY

14 min

Time saved by MDs each day



19 min

Time saved by PAs each day



26 min

Time saved by NPs each day

ACCURACY

Increase of **19%**

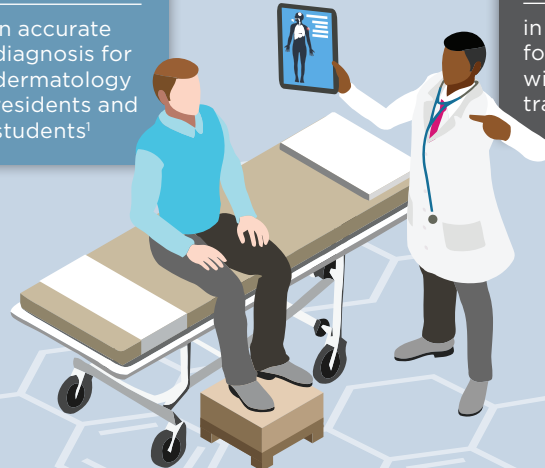
in accurate diagnosis for dermatology residents and students¹

Increase of **120%**

in accurate diagnosis for non-dermatologists with just 4 minutes of training on VisualDx²

Increase of **34%**

in accurate diagnosis for general practitioners³



IN PRACTICE

Medical student diagnosed a herpes infection in a toddler's eye. The story was highlighted in *The New York Times Magazine*, "Thanks to VisualDx, my niece was treated and avoided a fate of corneal scarring or lifelong blindness." — Amber Bard, Medical Student

Doctor diagnosed a toddler with acute meningococemia using images in VisualDx. "The direct comparison of meningococcal and streptococcal images with VisualDx underscored the urgency of the situation and assisted in a timely and accurate diagnosis." — Submitted to VisualDx by Dr. William Finn, Emergency Medicine Physician



Doctor diagnosed early disseminated Lyme disease in an adult. "Thanks to VisualDx providing me real-time clinical information, I was able to make the proper diagnosis in a timely manner and get the patient on his way to a healthy recovery." — Submitted to VisualDx by Dr. Lincoln Heath, Family Medicine Resident

REDUCE COSTS⁴

Without VisualDx, ED physicians included the correct diagnosis in their differential for cellulitis

14%
of the time

With VisualDx, ED physicians included the correct diagnosis in their differential for cellulitis

64%
of the time

Cellulitis dx has an error rate of

30%

resulting in **\$1.3 billion** in unnecessary costs in U.S.



References: 1. Chou W, Tien P, Lin F, Chiu PC. Application of visually based, computerised diagnostic decision support system in dermatological medical education: a pilot study. *Postgrad Med J*. 2017 May;93(1099):256-259. 2. Papier A, Allen E, McDermott M. Visual informatics: real-time visual decision support. Poster presented at: American Medical Informatics Association 2001 Annual Symposium; November 3-7, 2001; Washington, DC. 3. Breitbart EW, Choudhury K, Bunde H, et al; Association of Dermatological Prevention, LEO Innovation Lab. Impact of a computer-based differential diagnosis tool on patient satisfaction and on the diagnostic accuracy of skin conditions. Initiative Gesundheitsindustrie Hessen. <http://gesundheitsindustrie-hessen.de/wp-content/uploads/2017/11/Abstract-LEO.pdf>. Accessed 30 Jan 2018. 4. David CV, Chira S, Eells SJ, et al. Diagnostic accuracy in patients admitted to hospitals with cellulitis. *Dermatol Online J*. 2011 Mar 15;17(3):1.