GE HealthCare

A Quick Reference Guide to Myocardial Perfusion Imaging and Myoview for Technologists

Preparation[1]

- Instruct patients to hydrate frequently

Dosing[1]

- For a one-day protocol:
  - Can be rest/stress or stress/rest sequence
  - First dose should be 5-12 mCi (185-444 MBq)
  - Second dose should be 15-33 mCi (555-1221 MBq) given a minimum of one hour and maximum of four hours after injection of first dose
- For a two-day protocol:
  - Can be rest/stress or stress/rest sequence
  - Dose range for both injections is 5-33 mCi (185-1221 MBq)
- Effective dose = .0069 mSv/MBq at stress and 0.0080 mSv/MBq at rest

Imaging

- American Society of Nuclear Cardiology (ASNC) guidelines recommend that minimum delays of 10 to 15 minutes for exercise, 30 to 45 minutes for rest, and 45 minutes for pharmacologic stress are optimal for myocardial perfusion imaging[2]
- Per the Myoview Prescribing Information, begin imaging 15 minutes after injection at stress and 30 minutes after injection at rest[1]
- When desired, and to assist with clearance of gastrointestinal activity, cold water or a carbonated beverage can be given to the patient immediately prior to imaging[3]

PRODUCT INDICATIONS AND USE

MYOVIEW is indicated for myocardial perfusion imaging under rest and/or exercise or pharmacologic stress conditions to delineate regions of reversible myocardial ischemia or infarcted myocardium in patients with known or suspected coronary artery disease. MYOVIEW is also indicated for the assessment of left ventricular function (left ventricular ejection fraction and wall motion) in patients with known or suspected heart disease.

IMPORTANT SAFETY INFORMATION ABOUT MYOVIEW

WARNINGS AND PRECAUTIONS

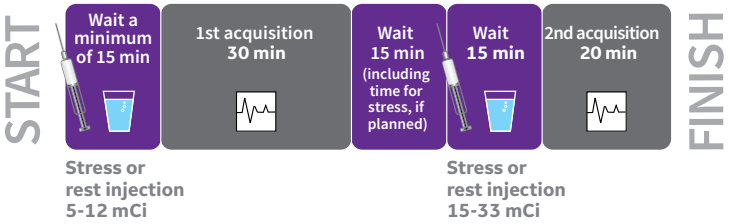
- **Risks Associated With Exercise or Pharmacologic Stress:** Patients evaluated with exercise or pharmacologic stress may experience serious adverse reactions such as myocardial infarction, arrhythmia, hypotension, and bronchoconstriction, as well as cerebrovascular reactions such as headache, paraesthesias, convulsions, somnolence, and cerebrovascular accident, including hemorrhage. Perform stress testing in a setting where cardiac resuscitation equipment and trained staff are readily available. When pharmacologic stress is selected as an alternative to exercise, perform the procedure in accordance with the pharmacologic stress agent's Prescribing Information.

Please see additional Important Safety Information About Myoview here, and Full Prescribing Information, here.

Kit reconstitution and image acquisition[1]

- Efficient kit and patient preparation; Myoview does not need to be boiled and cooled, which can save you time before patient administration

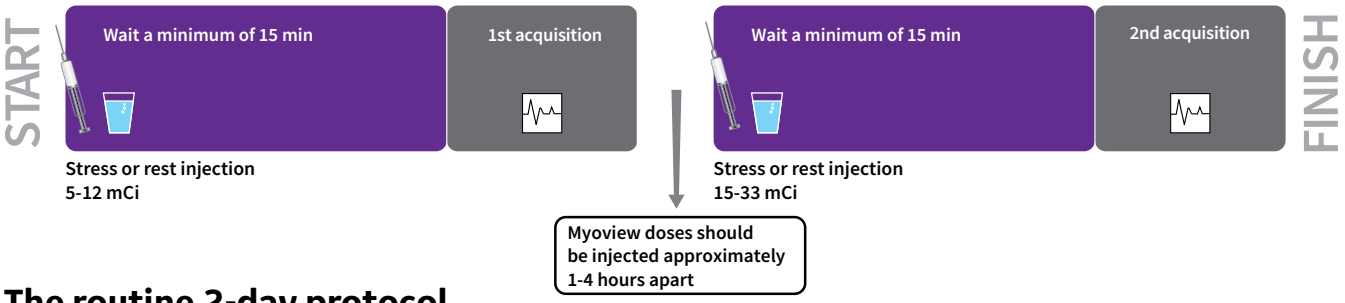
The fast 2-hour protocol



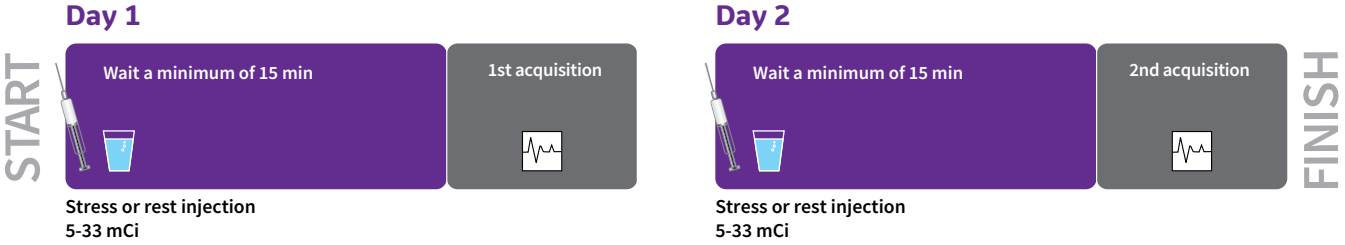
1- and 2-day protocols can help optimize scheduling and convenience

- 15-minute start time to image acquisition enables efficient protocol for stress and rest imaging

The flexible 1-day protocol



The routine 2-day protocol



Pharmacokinetics of Myoview™ (Kit for the Preparation of Technetium Tc-99m Tetrofosmin for Injection)

- Prompt myocardial uptake and retention with little or no redistribution[4]
- Proportional uptake to reveal reduced blood flow to ischemic regions[5]
- Rapid blood, liver, and lung clearance[6]
- Good target-to-background ratio minimizes interference from extra cardiac activity[7]

IMPORTANT SAFETY INFORMATION ABOUT MYOVIEW (Cont'd)

WARNINGS AND PRECAUTIONS

- **Radiation Risks:** Technetium Tc99m contributes to a patient's overall long-term cumulative radiation exposure. Long-term cumulative radiation exposure is associated with an increased risk of cancer. Ensure safe handling and preparation radiolabeling procedures to protect patients and healthcare workers from unintentional radiation exposure. Encourage adequate hydration; instruct patients to void when the examination is completed and as often thereafter as possible

Please see Product Indications and Important Safety Information About Myoview here, and Full Prescribing Information, here.

MYOVIEW™
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Speed matters. Image earlier with Myoview*

Rapid cardiac imaging

- Myoview can begin to acquire diagnostic information in as soon as 15 minutes for stress MPI†[1]

†Per the full Prescribing Information for Myoview, the patient can be imaged 15 minutes after injection for stress MPI and 30 minutes after injection for rest MPI.

The lower, approved dose ranges of Myoview (5-12 mCi and 15-33 mCi) may help minimize patient radiation exposure[1]

- Supports goal of using the lowest possible dose to help minimize patient radiation exposure

Potential for shorter study time and fewer repeat scans[7]

In a prospective study by Ravizzini...

- Myoview demonstrated significantly shorter completion time for both rest studies and total study time[7]
- Patients receiving Myoview required fewer repeat scans due to interference of extra cardiac activity[7]

*Myoview can begin gathering diagnostic information about your patient's heart in as soon as 15 minutes for stress myocardial perfusion imaging.[1]

MPI, myocardial perfusion imaging.

IMPORTANT SAFETY INFORMATION ABOUT MYOVIEW (Cont'd)

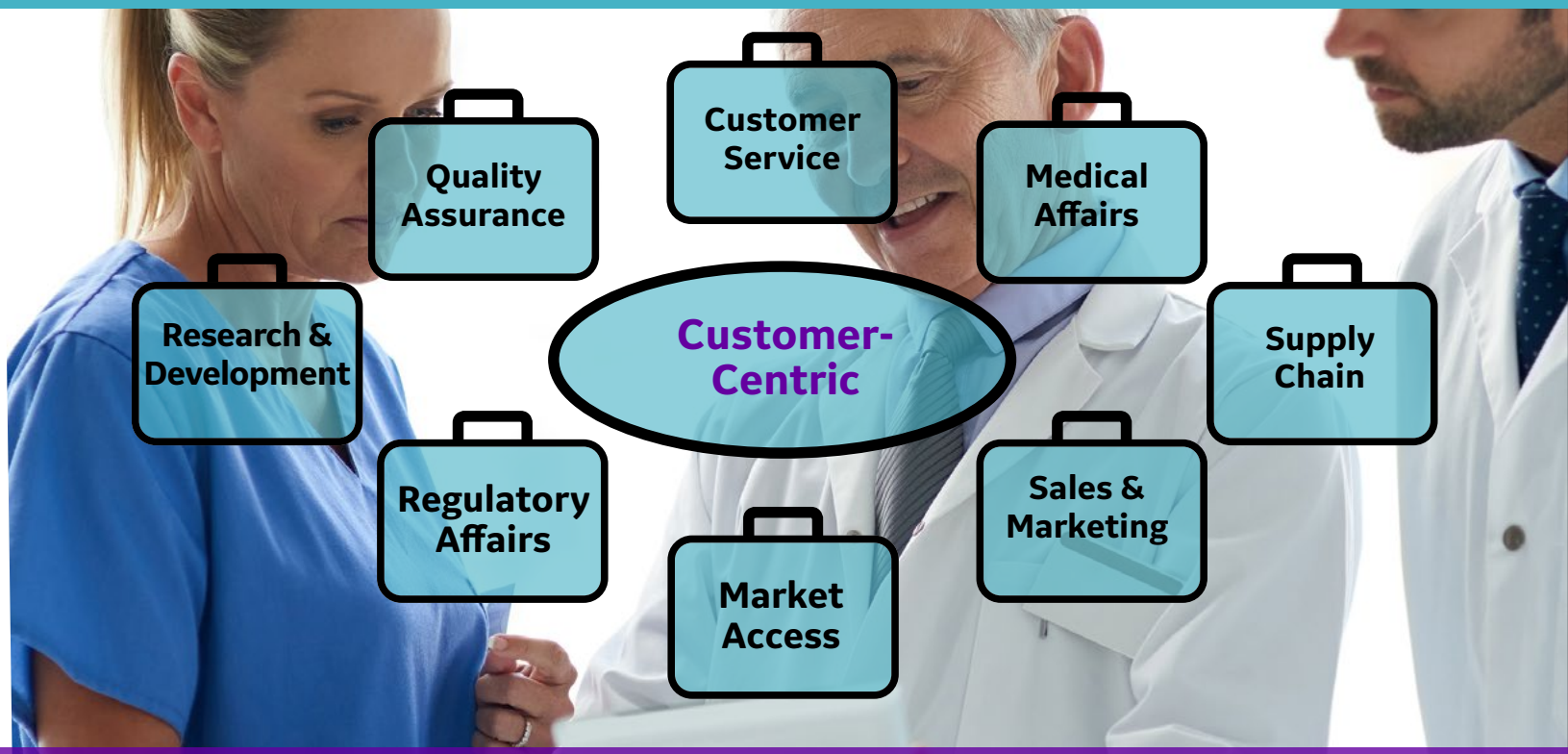
WARNINGS and PRECAUTIONS

Hypersensitivity Reactions: Hypersensitivity Reactions: Hypersensitivity reactions, including anaphylaxis, dyspnea, bronchospasm, throat tightness, coughing, tachycardia, chest pain, hypotension, abdominal pain, and cutaneous reactions (rash, urticuria, pruritus, erythema, and swelling or angiodema) have been observed after the administration of MYOVIEW. Always have cardiopulmonary resuscitation equipment and personnel available, and monitor all patients for hypersensitivity reactions.

Please see Product Indications and Important Safety Information About Myoview here, and Full Prescribing Information, here.

Delivering a network of expert resources and support to meet your needs

Our GE HealthCare Team



- ✓ Dedicated Clinical Sales Team
- ✓ Customer Service Support
- ✓ Technical Support
- ✓ Ordering Guidance
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- ✓ Clinical and Scientific Support
- ✓ Reimbursement Support
- ✓ Educational Programs

Our readily accessible GE HealthCare resources are in place to help you aid patient care

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IMPORTANT SAFETY INFORMATION

WARNINGS AND PRECAUTIONS

- **Risks Associated With Exercise or Pharmacologic Stress**: Patients evaluated with exercise or pharmacologic stress may experience serious adverse reactions such as myocardial infarction, arrhythmia, hypotension, and bronchoconstriction, as well as cerebrovascular reactions such as headache, paraesthesias, convulsions, somnolence, and cerebrovascular accident, including hemorrhage. Perform stress testing in a setting where cardiac resuscitation equipment and trained staff are readily available. When pharmacologic stress is selected as an alternative to exercise, perform the procedure in accordance with the pharmacologic stress agent's Prescribing Information
- **Radiation Risks:** Technetium Tc99m contributes to a patient's overall long-term cumulative radiation exposure. Long-term cumulative radiation exposure is associated with an increased risk of cancer. Ensure safe handling and preparation radiolabeling procedures to protect patients and healthcare workers from unintentional radiation exposure. Encourage adequate hydration; instruct patients to void when the examination is completed and as often thereafter as possible
- **Hypersensitivity Reactions:** Hypersensitivity reactions, including anaphylaxis, dyspnea, bronchospasm, throat tightness, coughing, tachycardia, chest pain, hypotension, abdominal pain, and cutaneous reactions (rash, urticuria, pruritus, erythema, and swelling or angiodema) have been observed after the administration of MYOVIEW. Always have cardiopulmonary resuscitation equipment and personnel available, and monitor all patients for hypersensitivity reactions

ADVERSE REACTIONS

- Serious episodes of angina, ventricular tachycardia, and respiratory arrest were reported. Other events included angina, hypertension, torsades de pointes, vomiting, abdominal discomfort, cutaneous allergy, hypotension, dyspnea, metallic taste, burning of the mouth, and smell alteration. The following were reported when used with pharmacological stress: Angina, flushing, dyspnea, headache, abdominal pain, dizziness, palpitations, nausea, hypotension, pain, cough, arrhythmia, bronchospasm, ECG (electrocardiogram) abnormalities, hypertension, vomiting, and asthenia. Postmarketing adverse reactions included rash, urticaria, abnormal vision, hypersensitivity reactions, and fever

USE IN SPECIFIC POPULATIONS

- **Nursing Mothers:** Technetium Tc99m tetrofosmin is present in human milk in small amounts (<1% of maternal dose). There are no data available regarding the effects of technetium Tc99m tetrofosmin on the breastfed infant or on milk production. The developmental and health benefits of breastfeeding should be considered along with the mother's clinical need for MYOVIEW and any other potential adverse effects on the breastfed child from MYOVIEW or from the underlying maternal condition. To decrease radiation exposure to the breastfed infant, advise a lactating woman to pump and discard for 60 hours (10 half-lives) after technetium Tc99m tetrofosmin administration.
- **Pediatric Use:** Safety and effectiveness in pediatric patients have not been established
- **Geriatric Use:** No overall differences in safety were observed between these subjects and younger subjects. Other reported clinical experience has not identified differences in responses between elderly patients and younger patients, but greater sensitivity regarding some older individuals cannot be ruled out

Prior to MYOVIEW administration, please read the full Prescribing Information, here, for additional Important Safety Information.

To report SUSPECTED ADVERSE REACTIONS, contact GE HealthCare at 800 654 0118 (option 2, then option 1) or the FDA at 800 FDA 1088 or www.fda.gov/medwatch.

References: 1. Myoview [prescribing information]. Arlington Heights, IL: GE HealthCare; 2022. **2.** Henzlova MJ, Duvall WL, Einstein AJ, Travin MI, Verberne HJ. ASNC imaging guidelines for SPECT nuclear cardiology procedures: stress, protocols, and tracers. *J Nuc Cardio*. 2016;23:606-639. **3.** Vermeltfoort IA, van Dijk AB, de Jong JA, et al. A randomized study of the effect of carbonated water prior to myocardial SPECT. *Ann Nucl Med*. 2014:7:669-673. **4.** Jain D. Technetium-99m labeled myocardial perfusion imaging agents. Semin Nucl Med.1999;29:221-236. **5.** Port SC. Imaging guidelines for nuclear cardiology procedures. *J Nucl Cardiol.* 1999;6:G47-G84. **6.** Higley B, Smith FW, Smith T, et al. Technetium-99m-1,2-bis[bis(2-ethoxyethyl) phosphino]ethane: human biodistribution, dosimetry and safety of a new myocardial perfusion imaging agent. *J Nucl Med.* 1993;34:30-38. **7.** Ravizzini GC, Hanson MW, Shaw LK, et al. *Nucl Med Comm*. 2002;23:203-208. Erratum in April 2006.

Customer Service 800 292 8514
Medical Affairs 800 654 0118 (option 2, then option 3) or medical.affairs@ge.com
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