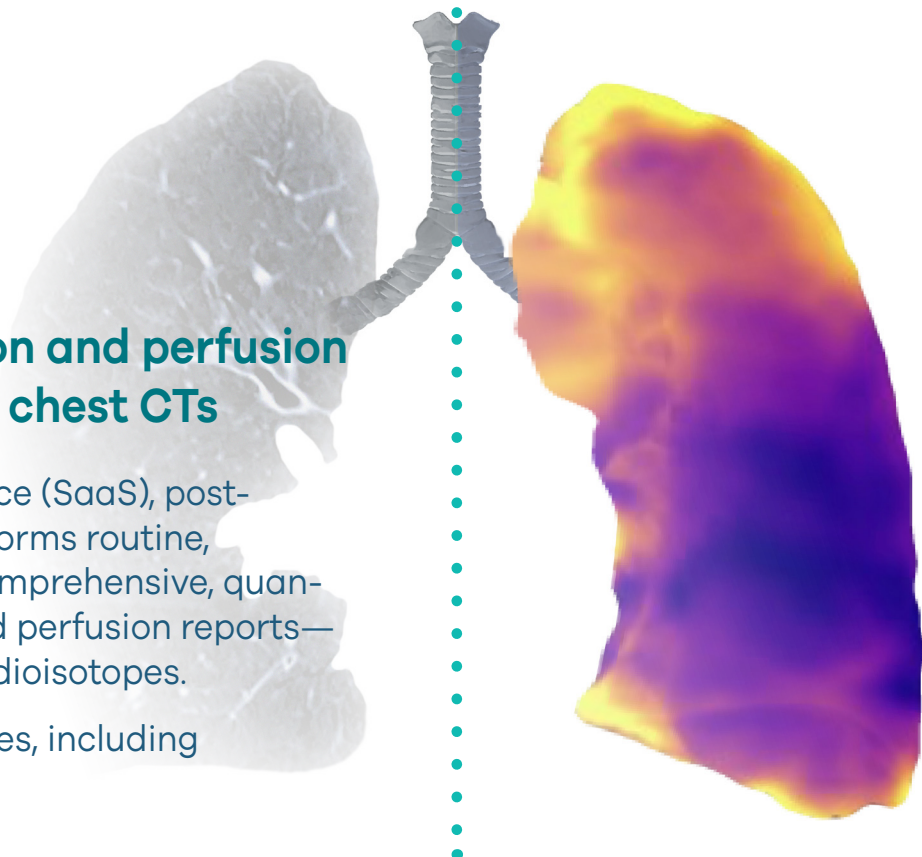


CT:VQ™

Non-contrast ventilation and perfusion imaging from standard chest CTs

CT:VQ is a software-as-a-service (SaaS), post-processing solution that transforms routine, non-contrast chest CTs into comprehensive, quantitative regional ventilation and perfusion reports—without injected contrast or radioisotopes.

Works on existing DICOM studies, including retrospective analyses.



Key Benefits

- 1 No contrast:** Uses non-contrast CT; no injections or radioisotopes
- 2 Clarity:** Quantitative, colour-coded maps with structured reports.
- 3 Accessible:** Runs on existing CT scanners—no new hardware.
- 4 Patient-friendly, cost-conscious:** Leverages routine scans; streamlines scheduling and reduces ancillary spend.

Value & Cost Impact

- 1 No capital:** SaaS model aligns cost with volume; uses existing scanners.
- 2 Supply savings:** Avoids contrast media, IV placement, and premedication.
- 3 Consolidated visits:** Functional insight; may reduce separate nuclear appointments and travel.
- 4 Retrospective value:** Analyse prior CTs to help avoid repeat imaging and additional radiation.

Scalable Access

- 1 Widely available:** Uses ubiquitous CT to enable functional lung imaging on existing scanners—no new hardware.
- 2 Cloud scalable:** SaaS scalable, works across hospital networks, outpatient imaging centers, and academic institutes.

Results & Report

Structured report returned directly into the radiology workflow.

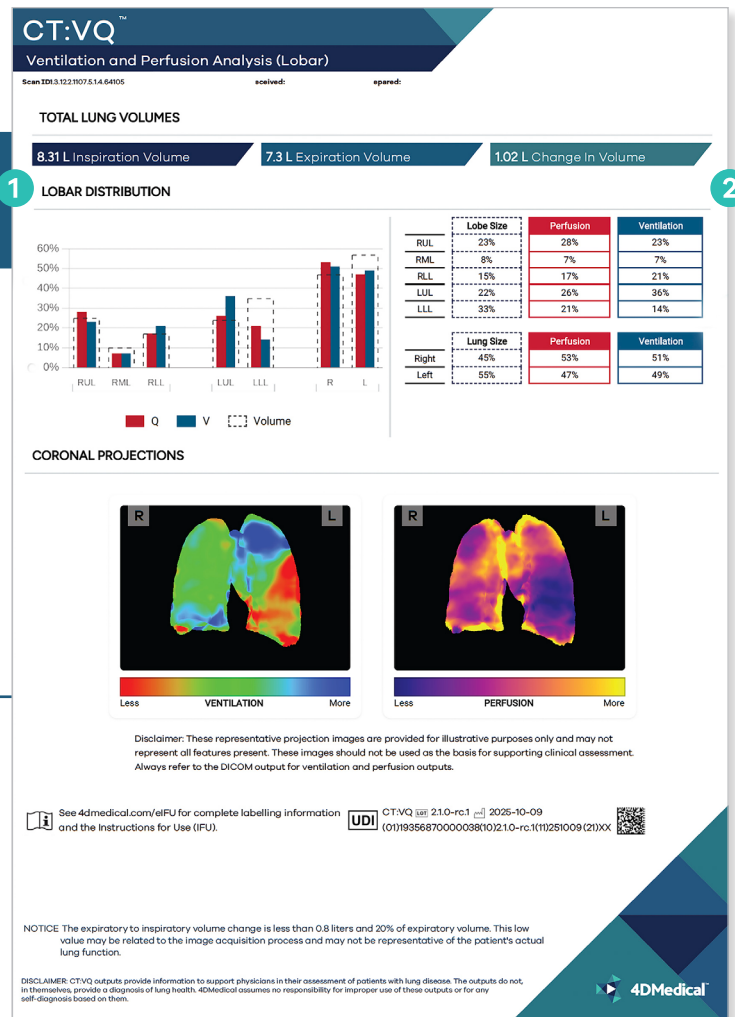
1 Overlays with intuitive scales.

2 Quantitative metrics

- Total lung volumes
- Lobar distribution (size, ventilation, perfusion; right vs left)

How it fits your workflow

- 1 Uses routine non-contrast chest CT inspiratory & expiratory protocols to enhance physiological mapping.
- 2 PACS integration with DICOM in/out; supports batch and routine processing.



Example use cases

- 1 Interventional pulmonology and thoracic surgery planning
- 2 Evaluating thromboembolic conditions
- 3 Obstructive lung disease assessment and follow-up
- 4 Clinical research and quality improvement initiatives

FOR MORE INFORMATION

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