Enhanced interobserver agreement

A more definitive, enface, 3D view of every gland

More epithelium

The WATS3D PATHOLOGY Partnership Program

In the diagnosis of Barrett’s Esophagus and Dysplasia, WATS3D provides you with more.

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WATS^3D provides you with more


The wide-area, transepithelial, tissue sample with computer assisted 3D analysis:

**More tissue area than histology**
- Wide area sampled by WATS\(^{3D}\) helps to find abnormality often missed with random 4-quadrant forceps biopsies

**More tissue depth than cytology**
- WATS\(^{3D}\) samples the complete transepithelial thickness
- This unique sample contains numerous large tissue fragments with extensively preserved three dimensionality
- Provides a true combination of cytology and histology

“WATS\(^{3D}\) not only addresses the sampling error inherent in relying on random forceps biopsies, its three-dimensional computer assisted analysis of the tissue sample provides the GI pathologist with diagnostic information that is not typically available using standard tissue based histopathology. We look forward to implementing this advance in gastroenterology and GI pathology to enhance routine care for our own practitioners.”

— Robert D. Odze, MD, FRCPC
The WATS³D Pathology Partnership Program:

As demand for WATS³D is growing rapidly, CDx is now identifying and training partner pathologists.

• CDx receives, prepares, and scans the specimen. The resultant 3D computer images and slides are sent by overnight carrier to the partner pathologist.

• Partner pathologist reviews and reports the case

• High resolution display, dedicated digital drive reader/computer, automated integration to your manual microscope, and all required training are provided by CDx at no charge to the partner pathologist.

CDx bills globally and compensates the partner pathologist on a fixed, per-case basis.

For more information, call (866) 363-6239 or email pathpartner@cdxdiagnostics.com
Increased diagnostic yield with adjunctive use** of WATS\textsuperscript{3D}

<table>
<thead>
<tr>
<th>Condition</th>
<th>Percentage</th>
<th>N=</th>
</tr>
</thead>
<tbody>
<tr>
<td>Barrett’s Esophagus</td>
<td>83%</td>
<td>4,203</td>
</tr>
<tr>
<td>Dysplasia — All Forms</td>
<td>150.6%</td>
<td>12,889</td>
</tr>
<tr>
<td>HGD / EAC</td>
<td>87.5%</td>
<td>4,203</td>
</tr>
<tr>
<td></td>
<td>88.5%</td>
<td>12,889</td>
</tr>
<tr>
<td></td>
<td>242%\textsuperscript{3}</td>
<td>160</td>
</tr>
<tr>
<td></td>
<td>428%\textsuperscript{5}</td>
<td>160</td>
</tr>
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</table>

**WATS as an adjunct to standard forceps biopsy compared with standard forceps biopsy alone

Higher interobserver agreement

<table>
<thead>
<tr>
<th></th>
<th>WATS\textsuperscript{3D}</th>
<th>Standard Histopathology</th>
</tr>
</thead>
<tbody>
<tr>
<td>Kappa values in the diagnosis of BE and dysplasia</td>
<td>.86 Overall</td>
<td>.30</td>
</tr>
<tr>
<td></td>
<td>.95 HGD/EAC</td>
<td></td>
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<tr>
<td></td>
<td>.74 IND/LGD</td>
<td></td>
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<tr>
<td></td>
<td>.88 NDBE</td>
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</tr>
</tbody>
</table>

American Journal of Gastroenterology, September 2015

A more definitive, \textit{en face}, 3D view of every gland

- The WATS\textsuperscript{3D} scanner takes up to 50 separate, three micron images of every focal plane in this complex and thick specimen
- The computer then integrates all of these 2D images to form a single 3D image, capturing the \textit{en face} view of the gland, for neural network analysis and display to the pathologist
Vennalaganti PR, Kanakandi VN, Gross SA, et al.
Inter-observer agreement among pathologists using wide-area transepithelial sampling with computer-assisted analysis in patients with Barrett’s esophagus. Am J Gastroenterol. 2015;110(9):1257-1260


Increased Detection of Barrett’s Esophagus-Associated Neoplasia Using Wide Area Transepithelial Sampling in Conjunction with 4-Quadrant Forceps Biopsies: Final Results from a Multi-Center, Prospective, Randomized Trial. Gastrointestinal Endoscopy. http://dx.doi.org/10.1016/j.gie.2017.07.039