

Thoracic Care Suite

Your on-demand application expert to improve clinical outcomes



AI-driven insight for better care

Thoracic Care Suite automatically analyzes images for the presence of eight abnormal radiologic findings-featuring algorithms from Lunit INSIGHT CXR.

After an exam finishes (either on a fixed or mobile x-ray system), the chest x-ray image is sent to the Thoracic Care Suite on-premise edge computer where a suite of Artificial Intelligence algorithms analyze and flag abnormal findings. The sooner these conditions are identified, the faster care can be given.



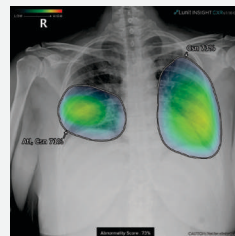
Augmented accuracy

AI detection accuracy of eight abnormal chest radiograph findings which also support Tuberculosis detection and help detect pneumonia or ground-glass opacities which are indicative of COVID-19. Eight findings include atelectasis, calcification, cardiomegaly, consolidation, fibrosis, mediastinal widening, nodule, and pleural effusion detection.



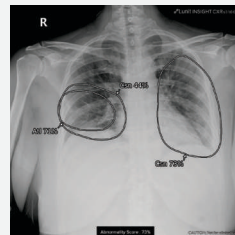
Prioritized report

Generated upon analysis, this report gives an abnormality score for each of the eight possible findings, an image overlay, and a written location description.



Proven results

Combined map, showing a COVID-19 positive patient, showing the location of the suspicious areas for abnormalities via color and contouring.



Grayscale map, showing a COVID-19 positive patient, showing the location of the suspicious areas for abnormalities via contouring.



Radiologic finding image overlay

Detected radiologic findings can be seen by GPS overlay or on the secondary capture image sent to PACS.



With 97-99% Area Under the Curve (AUC), the powerful algorithms behind the Thoracic Care Suite have been trained by over 200,000 chest x-ray images-and detect radiologic findings within seconds.



Improved productivity through per-case reading time reduction

In order to study the impact these algorithms have on workflow efficiency, 200 chest x-ray images were collected from an emergency department and studied to determine the benefit to Radiologist reading time per case.

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