FACT SHEET FOR HEALTHCARE PROVIDERS

Visby Medical, Inc.
Visby Medical COVID-19 Point of Care Test

February 8, 2021

Coronavirus
Disease 2019
(COVID-19)

This Fact Sheet informs you of the significant known and potential risks and benefits of the emergency use of the Visby Medical COVID-19 Point of Care Test.

The Visby Medical COVID-19 Point of Care Test is authorized for use with certain respiratory specimens collected from individuals suspected of COVID-19 by their healthcare provider (HCP).

All patients whose specimens are tested with this assay will receive the Fact Sheet for Patients: Visby Medical, Inc. - Visby Medical COVID-19 Point of Care Test.

What are the symptoms of COVID-19?

Many patients with COVID-19 have developed fever and/or symptoms of acute respiratory illness (e.g., cough, dyspnea), although some individuals experience only mild symptoms or no symptoms at all. The current information available to characterize the spectrum of clinical illness associated with COVID-19 suggests the when present, symptoms include cough, shortne breath or dyspnea, fever, chills, myalgias, heada sore throat, new loss of taste or smell, nausea or vomiting or diarrhea. Signs and symptoms may ap any time from 2 to 14 days after exposure and the median time to symptom or let is appropriately 5 days. For further information of he symptoms or rovided COVID-19 please see the link *Where can I tion go for updates and more infor-

COVID-19 Public health officials ntifie infection throughou ne wor includin e United COVID-19 webpage (see k the C States. Please ch link provided in "Wh a I go for apdates and more information?" section be end of this document) or your local jurisdictions we ite for the most up to date information.

What do I need to know about COVID-19 testing? Current information on COVID-19 for healthcare providers is available at CDC's webpage, *Information for Healthcare Professionals* (see links provided in "Where can I go for updates and more information?" section). This test is to be performed only using certain respiratory specimens collected from individuals suspected of COVID-19 by their healthcare provider.

- The Visby Medical COVID-19 Point of Care Test can be used to test nasopharmageal, anterior nasal, or mid-turbinate swahr collection by an HCP or anterior nasal or mid-turbinate swabs of f-collected by individuals 18 years of age or dier, under the supervision of an H
- The Visit Medical CO-12 oint of Care Test should be ordered for the atection of COVID-19 in individuals subjected of COVID-19 by their HCP.
- e Visis redical C /ID-19 Point of Care Test is a thorized ruse rlaboratories certified under the inical Laboratory Improvement Amendments of (CLIA), 42 U.S.C. §263a, that meet quirements to perform high, moderate or waived applexity tests.
 - The Visby Medical COVID-19 Point of Care Test is authorized for use at the Point of Care (POC), i.e., in patient care settings operating under a CLIA Certificate of Waiver, Certificate of Compliance, or Certificate of Accreditation.

Specimens should be collected with appropriate infection control precautions. Current guidance is available at the CDC's website (see links provided in "Where can I go for updates and more information?" section).

When collecting and handling specimens from individuals suspected of being infected with COVID-19, appropriate personal protective equipment should be used as outlined in the CDC Interim Laboratory Biosafety Guidelines for Handling and Processing Specimens Associated with Coronavirus Disease 2019 (COVID-19). For additional information, refer to CDC Interim Guidelines for Collecting, Handling, and Testing Clinical Specimens from Persons Under Investigation (PUIs) for Coronavirus Disease 2019 (COVID-19) (see links provided in "Where can I go for updates and more information?" section).

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What does it mean if the specimen tests positive for the virus that causes COVID-19?

A positive test result for COVID-19 indicates that RNA from SARS-CoV-2 was detected, and therefore the patient is infected with the virus and presumed to be contagious. Laboratory test results should always be considered in the context of clinical observations and epidemiological data (such as local prevalence rates and current outbreak/epicenter locations) in making a final diagnosis and patient management decisions. Patient management should be made by a healthcare provider and follow current CDC guidelines.

The Visby Medical COVID-19 Point of Care Test has been designed to minimize the likelihood of false positive test results. However, it is still possible that this test can give a false positive result, even when used in locations where the prevalence is below 5%. In the event of a false positive result, risks to patients could include the following: a recommendation for isolation of the patient, monitoring of household or other close contacts for symptoms, patient isolation that might limit contact with family or friends and may increase contact with other potentially COVID-19 patients, limits in the ability to work, delayed diagnosis and treatment for the true infection causing the symptoms, unnecessary prescription of a treatment or therapy, or other unintended adverse effects.

All laboratories using this test must allow the enda testing and reporting guidelines according to their appropriate public health authories.

What does it mean if the speciment tests no ative for the virus that causes 19-19?

est me A negative test resu or this n the specimen above the CoV-2 RNA was preser a negate result does not limit of detection. ev rule out COVID-19 and hould not be used as the sole basis for treatment or pa at management decisions. It is possible to test a person to early or too late during COVID-19 infection to make an accurate diagnosis via Visby Medical COVID-19 Point of Care Test.

When diagnostic testing is negative, the possibility of a false negative result should be considered in the context of a patient's recent exposures and the presence of clinical signs and symptoms consistent with COVID-19.

The possibility of a false negative result should especially be considered if the patient's recent exposures or clinical presentation indicate that COVID-19 is likely, and diagnostic tests for other causes of illness (e.g., other respiratory illness) are negative.

If COVID-19 is still suspected based on exposure history together with other clinical findings, re-testing with an alternative method should be used to be health authorities. Additional testing may be helpful to ensure testing was not conducted too ear.

Risks to a p e test result include: ent of a false delayed a ack of s portive atment, lack of ed individuals and their household or monitoring acts for proms resulting in increased lose c othe risk d spread o 19 within the community, or erse events. othe ınintended

the reformance of this test was established based on the reluation of a limited number of clinical specimens. It is clinical performance has not been established in all clinical variants but is anticipated to be reflective of the prevalent variants in circulation at the time and leation of the clinical evaluation. Performance at the ame of testing may vary depending on the variants circulating, including newly emerging strains of SARS-CoV-2 and their prevalence, which change over time.

What is an EUA?

The United States FDA has made this test available under an emergency access mechanism called an Emergency Use Authorization (EUA). The EUA is supported by the Secretary of Health and Human Service's (HHS's) declaration that circumstances exist to justify the emergency use of in vitro diagnostics (IVDs) for the detection and/or diagnosis of the virus that causes COVID-19.

An IVD made available under an EUA has not undergone the same type of review as an FDA-approved or cleared IVD. FDA may issue an EUA when certain criteria are met, which includes that there are no adequate, approved, available alternatives, and based on the totality of scientific evidence available, it is reasonable to believe that this IVD may be effective in diagnosing COVID-19.

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The EUA for this test is in effect for the duration of the COVID-19 declaration justifying emergency use of IVDs, unless terminated or revoked (after which the test may no longer be used).

What are the approved available alternatives?

There are no approved available alternative tests. FDA has issued EUAs for other tests that can be found at: https://www.fda.gov/emergency-preparedness-andresponse/mcm-legal-regulatory-and-policyframework/emergency-use-authorization

Where can I go for updates and more information?

CDC webpages:

General: https://www.cdc.gov/COVID19 Symptoms:

https://www.cdc.gov/coronavirus/2019-ncov/symptomstesting/symptoms.html

Healthcare Professi als:

onavirus/201 https://www.cdc.gov CoV/guidance-hcp.html

Information for abo vries:

nCoV/guidancehttps://www.c laboratorie ıml

Laborat √ Biosaf w.cdc.gov/coronavirus/2019guideline s.html

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ol/control-re endations.html

imen Collection: https://www.cdc.gov/coronavirus/2019-

linical-specimens.html

tion Control: https://www.cdc.gov/coronavirus/2019-

fection-control/index.html

DA webpages:

eneral: www.fda.gov/novelcoronavirus

UAs: (includes links to patient fact sheet and manufacturer's instructions) https://www.fda.gov/medical-devices/coronavirusdisease-2019-covid-19-emergency-use-authorizations-medicaldevices/vitro-diagnostics-euas

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