



Patient Focused. Discovery Driven.

**Laboratory & California
Headquarters**
Exagen Inc.
1261 Liberty Way
Vista, CA 92081

Dear Provider,

Your patient is curious about advanced testing that can aid in the diagnosis of lupus and would like you to consider ordering the AVISE® CTD serologic test.

AVISE® CTD is a comprehensive autoimmune connective tissue disease (CTD) test that aids in the differential diagnosis of systemic lupus erythematosus (SLE)¹. AVISE® CTD incorporates unique biomarkers such as cell-bound complement activation products (CB-CAPs) to offer improved diagnostic performance compared to traditional assays alone. In addition, AVISE® CTD incorporates important biomarkers associated with other rheumatic diseases which can mimic SLE including rheumatoid arthritis, Sjogren's Syndrome, scleroderma, polymyositis/dermatomyositis, antiphospholipid syndrome and autoimmune thyroid disease. AVISE® CTD has also demonstrated clinical utility in helping physicians distinguish SLE from ANA-positive fibromyalgia with up to 100% specificity.²

AVISE® tests have been performed for over 500,000 patients and are exclusively available from Exagen Inc. To get started or learn more please give us a call at 888.452.1522 or email us at info@exagen.com and we will send you a starter kit that includes pre-paid shipping, test requisition forms and instructions for specimen submission.

We thank you for your consideration and look forward to supporting you and your patients.

Respectfully,

Exagen Provider Relations Team
www.AviseTest.com
888.452.1522

1. Putterman C, Furie R, Ramsey-Goldman R, et al. Cell-bound complement activation products in systemic lupus erythematosus: comparison with anti-double-stranded DNA and standard complement measurements. *Lupus Science & Medicine* 2014;1:e000056. doi:10.1136/lupus-2014-000056
2. Wallace DJ, Silverman SL, Conklin J, et al. Systemic lupus erythematosus and primary fibromyalgia can be distinguished by testing for cell-bound complement activation products. *Lupus Science & Medicine* 2016;3:e000127. doi:10.1136/lupus-2015-000127