Exagen®
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 management of lupus and would like you to consider ordering the AVISE® SLE Monitor test.

AVISE® SLE Monitor is an innovative disease activity test to assist rheumatologists in the ongoing management of patients diagnosed with SLE. AVISE® SLE Monitor leverages proprietary cell-bound complement activation products (CB-CAPs), including EC4d and PC4d and autoantibodies like anti-C1q to aid physicians in patient stratification, evaluation of treatment response, and early identification of organ involvement. The biomarkers in AVISE SLE Monitor were validated in multiple cohorts comprising 124 SLE patients monitored prospectively over the course of 6-18 months of follow up (cite references #1-3).

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 including 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,

AVISE Provider Relations Team
www.AviseTest.com
888.452.1522

1. Merrill JT, Petri MA, Buyon J, et al. Erythrocyte-bound C4d in combination with complement and autoantibody status for the monitoring of SLE. Lupus Sci Med. 2018;5:e000263.doi:10.1136/lupus-2018-000263

2. Buyon J, Furie R, Putterman C, et al. Reduction in erythrocyte-bound complement activation products and titres of anti-C1q antibodies associate with clinical improvement in systemic lupus erythematosus. Lupus Sci Med. 2016;3:e000165.doi:10.1136/lupus-2016-000165

3. Petri MA, Conklin J, O'Malley T, Dervieux T. Platelet-bound C4d, low C3 and lupus anticoagulant associate with thrombosis in SLE. Lupus Sci Med. 2019;6:e000318.doi:10.1136/lupus-2019-000318