

High-quality quantitative assays equivalent to laboratory methods

Using iProtein system, all you need to do are:

- Finger Blood, volume is 5 μ L only (one drop).
- No need additional blood centrifugation or filter procedure.
- Simple operation, easy to use.
- Hand-held and portable (iProtein Reader)
- Within 3 minutes to have result.

CRP、Lp(a)、ApoB Specification

	CRP	Lp(a)	ApoB
Intended Use	Evaluation and tracking of inflammation	Risk evaluation of CVD (genetic)	Risk evaluation of CVD (metabolic)
Sample Type	Whole blood mixed with enhancer	Whole blood	Diluted whole blood
Sample Volume	5 μ L		
Measuring Time	3 mins	40 sec	
Sensitivity	LoQ= 0.1 mg/dL	LoQ= 5.83 mg/dL	LoQ= 0.81 mg/dL

For Chronic Disease

Lp(a) & ApoB are enhanced risk biomarkers independently associated with atherosclerotic cardiovascular disease (ASCVD) used for cardiovascular diseases diagnosis and monitor.

For Patients

Replace the traditional venous blood collection with fingertip blood for testing, reducing the impact of blood collection.

Test Range

CRP Range 0.2 - 10 mg/dL

Normal Range: < 1 mg/dL

Abnormal Range: > 1 mg/dL

Lp(a) Range 10 - 140 mg/dL

Normal Range: < 30 mg/dL

ApoB Range 10 - 200 mg/dL

Normal Range for Males: 46 - 174 mg/dL

Normal Range for Females: 46 - 142 mg/dL

*** Shelf life at room temperature: 1 Year**



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iProtein



< 3 mins

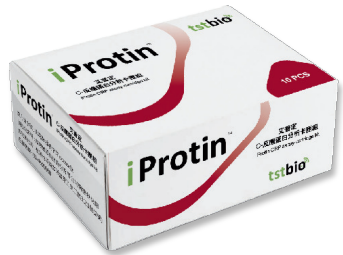
Ultra-fast Bio-marker Detection

- Hand-held IVD detector, suitable for clinics, long-term care centers, and home medical care.
- Multiple biomarkers tested in one Platform.
- Accurate and reliable quantitative test results.

iProtein Reader

Cat No. TO0001AA1010

FDA, CE, FDA



CRP assay cartridge kit

Cat No. TU0001A

CE, FDA



Lp(a) assay cartridge kit

Cat No. BMLPAP0110

FDA, CE, FDA



ApoB assay cartridge kit

Cat No. BMAPBP0110

FDA, FDA



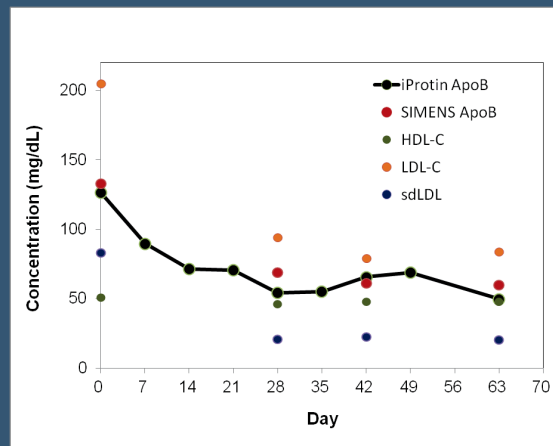
Indicators of cardiovascular disease risk

- C-reactive protein / High-sensitivity CRP
- Lipoprotein (a)
- Apolipoprotein B

For individuals with chronic diseases and suboptimal health

Cardiovascular diseases, abbreviated as ASCVD, can be assessed using diverse biomarkers. ApoB predicts low-density lipoprotein (LDL) levels with greater resistance to high triglyceride levels than traditional LDL-C tests. hsCRP aids in ASCVD risk assessment in infection-free patients. Meanwhile, Lp(a) is a genetic risk factor typically necessitating medication for treatment, with limited potential for improvement through dietary changes. iProtein allows for ASCVD risk evaluation, proving invaluable for ongoing monitoring and digital health management post-treatment.

Statin therapy



Detecting ASCVD risk through CRP / hsCRP measurement



- **0 ~ 0.065 mg/dL:** Optimal range, associated with an extremely low risk of cardiovascular diseases.
- **0.065 ~ 0.2 mg/dL:** Normal range, indicating a low risk. The typical measurement for Americans falls between 0.1 and 0.2 mg/dL.
- **0.2 ~ 0.3 mg/dL (inclusive) and higher:** Moderate risk category. Around 25% of Americans fall into this range.
- **0.3 ~ 1 mg/dL:** High-risk zone, potentially linked to bacterial infections. It is advisable to wait six weeks before retesting.
- **Greater than 1:** May indicate acute inflammation. Immediate medical attention is recommended.

Reference 1. <https://www.power2practice.com/article/is-there-an-optimal-cut-off-value-for-highly-sensitive-crp/> Accessed: October 11, 2017 March 22, 2018.

The application of CRP / hsCRP

