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MOXO NEWS

Powered By Neurotech Solutions

In This Issue

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MOXO Home Testing

Now at the convenience of your patient's home

As a result of COVID19, clinicians are looking for ways to overcome the obstacles of travel restriction and shut downs that their patients and they themselves are experiencing, occasionally, for long stretches of time, limiting patients clinic visits.
Telehealth and remote testing options, have seen a rise in popularity, enabling the elimination of exposure to the sick, while maintaining the required social distancing to keep healthy.
According to a 2020 Mckinsey survey on telehealth* patients are more likely to be seeking telehealth options moving forward regardless of the COVID19 limitations....

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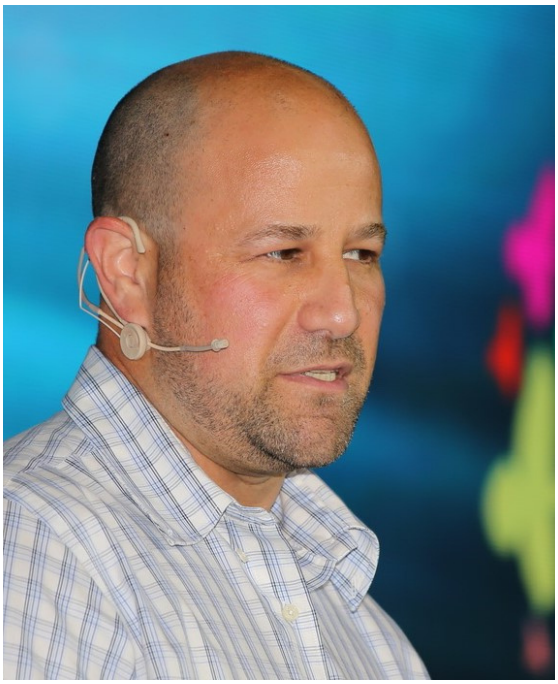
*https://www.mckinsey.com/industries/healthcare-systems-and-services/our-insights/telehealth-a-quarter-trillion-dollar-post-covid-19-reality



An interview with our CEO Mr. Ohad Lavi

As CEO of Neurotech Solutions, what are your main challenges?

Getting to children with ADHD early enough in life has the potential of changing their lives for the better, helping them turn their ADHD into an engine of creation. For that to happen, we need to get to all the children, early on in life, and to allow them an objective and accurate way to screen their attention, understand it and ACT on it. This approach is very disruptive in the field of ADHD and has the potential to dramatically influence society, but as with all disruptive approaches it is a significant challenge.

Why do you believe CPT is so important in the process of diagnosing ADHD and attentional disorders?

We did a trial in the North of England a few years back with 550 middle-school children, age 12-14. For every child a Conners teacher rating-scale questioner was filled and a MOXO d-CPT™ test was done. The results were quite overwhelming. In 22% of the cases the MOXO d-CPT™ picked up on attentional problems where the teacher saw none. Many of these cases where of female students and their profile was normally inattentive. In 13% of the cases teachers were convinced that there were attentional problems where MOXO d-CPT™ showed there were none, most of these were hyperactive Boys. Other research is pointing to similar findings in the field of woman ADHD diagnosis and the fact they are often mistaken for being depressed. We think we understand the symptoms of ADHD enough to make a subjective decision on diagnosis, but the data shows how prone we are to making mistakes. A CPT is the only objective tool in the basket of the clinician and as such it is an important part of it. In my opinion, just like a GP will have a patient take a blood test to help with a diagnosis so must a clinician use a CPT.

In the face of COVID19, How did you deal with this in 2020, What changes needed to be incorporated?

Despite the many negative aspects of COVID19 at least one good thing came out of it, a revolution in the field of Telehealth. This era, I believe will signal a major shift that will gradually lead to safer, quicker and personalized healthcare. Luckily for us, MOXO d-CPT™ was designed from the get go as an online, cloud-based system, so it was very easy for us to design a home-based version to allow clinicians to continue using it despite lock-downs. On the management front, all of our employees now work remotely from home, at least until the situation stabilizes enough, and we hired new employees for our significantly growing international market.

Can you share what you have instore for 2021?

During 2020 we interviewed many clinicians on their use of MOXO d-CPT™. We realized that there are a few areas that MOXO d-CPT™ could do better in, so for 2021 we decided to invest additional resources into strengthening MOXO d-CPT™ and its deliverables. For example, here are some important changes that will be featured in the MOXO d-CPT™ soon..

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1. Adding a norm reference line in the performance graph. This will allow you to compare the performance of your patients to a normative controlled group, and to make better sense of the information in this section.
2. Automatic Interpreted Report – This new comprehensive report will present the results of the comparative table and of the performance graph already interpreted, which will save considerable report-writing time.
3. Adding a personalized section where you will be able to see statistics of your own usage, remaining tests and make personalized changes to your account.

How can Neurotech customers help spread the word ?

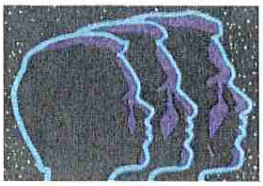
We appreciate your assistance in sharing with us your feedback and experience of using MOXO d-CPT™. We are working on setting up a community of MOXO d-CPT™ users to share case studies and come-up with study ideas. You can start by following us on LinkedIn.

In addition, we are starting a referral program, where you can refer to us a colleague of yours, that you think will benefit from working with MOXO d-CPT™, and in return both you and him/her will benefit from special discounts when purchasing MOXO d-CPT™ tests. Please reach out to us at: info@neurotech-solutions.com for additional details on the program.

MOXO d-CPT™ case study: Of an adult with a traumatic brain injury by Dr. Sam Goldstein, Ph.D.

In this study Dr. Sam Goldstein, PhD. examines a 40+ woman after experiencing a traumatic brain injury caused be a car accident. The patient had already undergone a full battery of tests including a cervical spine MRI. Amongst other complaints following her accident the patient self reported difficulty with behaviors related to attention, executive functions and mood regulations.
Dr. Goldstein administered the MOXO d-CPT™ test whose scores demonstrated attentional difficulties in the Timeliness index. This together with the neurophysiological test battery helped determine that the patent was indeed suffering Persistent Post Traumatic Concussive Disorder. In this case MOXO d-CPT™ provided supportive evidence to diagnosing the patient's traumatic brain injury.

Full case study below



Sam Goldstein, Ph.D.
Fellow, National Academy of Neuropsychology
Fellow and Diplomate, American Board of Medical Psychotherapists
Fellow, American Academy for Cerebral Palsy and Developmental Medicine
Fellow, American Psychological Association
Diplomate, American Board of Forensic Examiners
Diplomate, American Academy of Pain Management
Diplomate, American Board of Professional Disability Consultants
Certified, American Board of Pediatric Neuropsychology
Certified, National Association of School Psychologists
Certified, National Register of Health Service Providers in Psychology

MOXO CASE STUDY OF AN ADULT WITH A TRAUMATIC BRAIN INJURY

The following is an overview of an actual case of a woman in her mid-forties with a college degree working in the technical field. Her name all identifying information have been changed to protect her anonymity. This case highlights the value of the MOXO CPT in providing important neuropsychological data that cannot be collected by any other means of assessment.

Eight months prior to this neuropsychological evaluation, Mary was involved in an automobile accident. While passing through an intersection her vehicle was hit broad side by a vehicle that had failed to stop for a red light. At the scene, Mary was unconscious for a brief period of time as reported by onlookers. When EMT arrived she was awake but repetitively questioning. Mary was the driver and the airbags in her vehicle had deployed. In the hospital emergency room she was diagnosed with a concussion and multiple strains and sprains. She was kept overnight for observation. Subsequent brain imaging did not reveal signs of bleed nor other severe brain trauma.

In the first two weeks following this accident, Mary developed a full constellation of post-concussive symptoms. She appeared extremely fatigued, suffered from a constant headache, reported that her body ached, slept an extensive amount of time and seemed notably unfocused to her spouse when awake.

Two weeks post-injury, Mary attempted to return to work but struggled with fatigue, problems with concentration and memory for routine activities. She was released from work for another period of a few weeks, eventually able to return but at the time of the evaluation reported she was struggling with efficiency, organization, concentration and memory at work. Her persistent, constant headache eventually remitted after approximately two to three weeks. However, she now began experiencing daily headaches that tended to start mid-day and progress in severity throughout the day. These were subsequently diagnosed as post traumatic migraine. Mary was prescribed medication with some reported benefit.

Approximately two months post-accident, a cervical spine MRI yielded impressions of multiple disk problems that were attributed to injuries from the accident. Mary at that time reported

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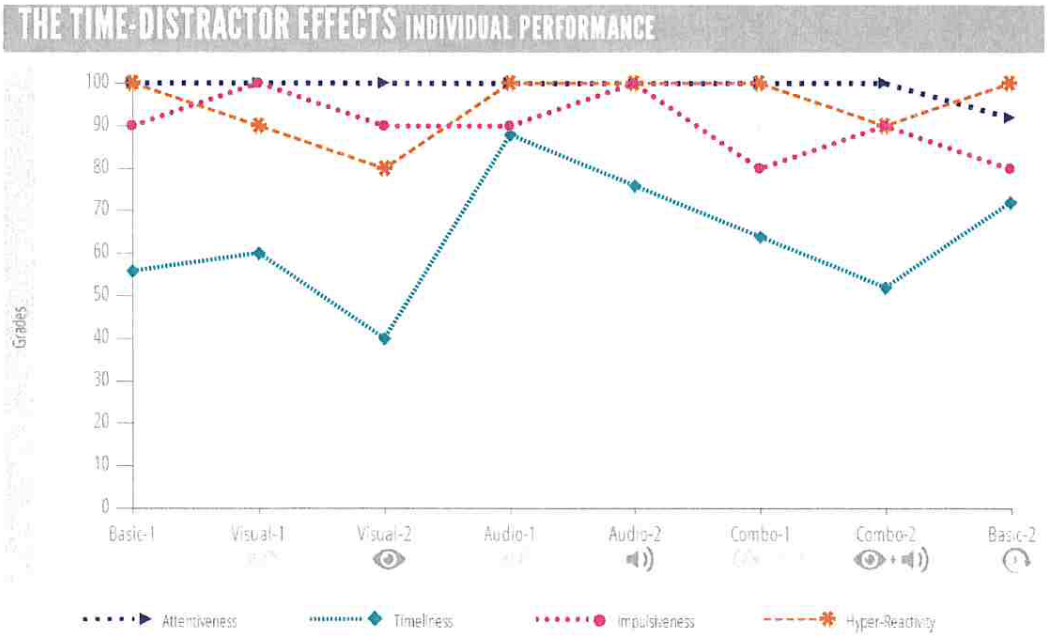


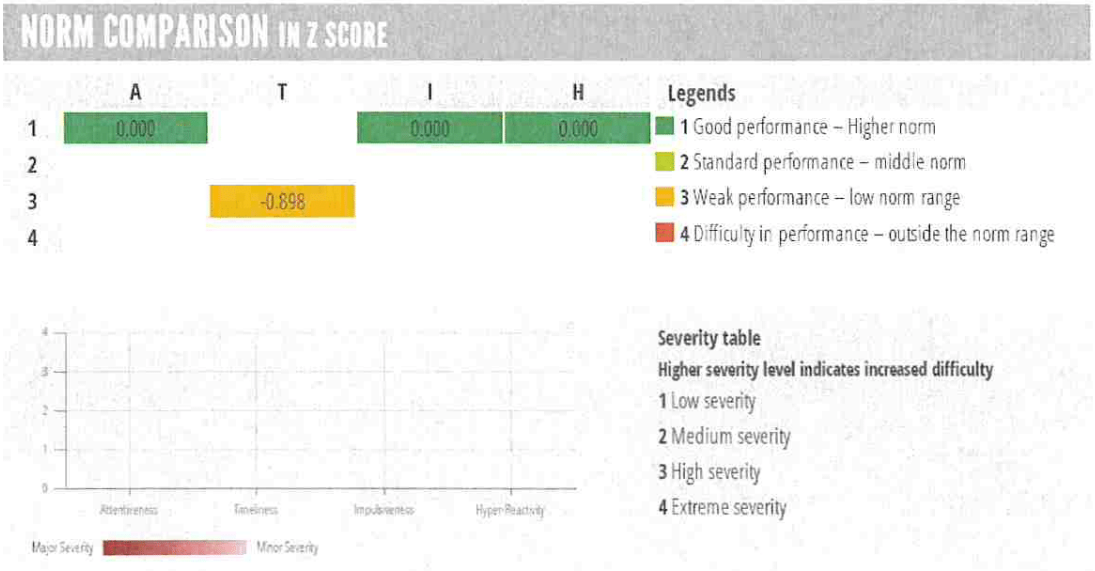
The MOXO scores very clearly demonstrate a decline in Mary's timeliness or ability to process through the task at a level consistent with her intellect and capacity to pay attention The sensitivity of this finding on a computerized measure adds further data to the rest of the neuropsychological test battery. Mary also reported a full set of symptoms related to Post Traumatic Stress Disorder. She was anxious when driving, preferred not to drive and was experiencing periodic nightmares concerning the accident. Her personality profile reflected someone absent a history of mental health or personality problems but currently experiencing the acute onset of anxiety symptoms related to this accident.

Mary's presentation appeared consistent for an individual suffering from a Persistent Post Concussive Disorder. In Mary's case, specific problems with speed of processing leading to difficulty with working memory and capacity to learn new information was and continued to be impaired post-accident. In this case, the MOXO provided supportive evidence of Mary's traumatic brain injury.

suffering from daily, nearly continuous chronic pain in her back and disruptive sleep due to pain.

During the history taking of the assessment, Mary reported continued problems with headache, cervical pain, challenges with sleeping, problems with concentration and short term memory, excessive emotionality, irritability and an adverse sensory change, including being bothered by noises, odors and bright lights. Mary's persistent symptoms now met the criteria for a Persistent Post Concussive Disorder. She reported problems with work, community activities and meeting daily responsibilities. Her self-reports reflected difficulty with behaviors related to attention, executive function and mood regulation.

During the administration of a neuropsychological test battery, Mary worked diligently. There was no indication that she lacked effort or motivation. Her above average measured intellect and reading abilities provided strong foundation that she had likely functioned in this range life time. These scores were consistent with her excellent college grades and her work history. In contrast, testing demonstrated problems with short term working memory and the speed with which Mary could respond to and process information, particularly on a broad memory battery. Mary's MOXO scores appear below:



Did you know the MOXO d-CPT™ test is now fully available in both Arabic and Hebrew

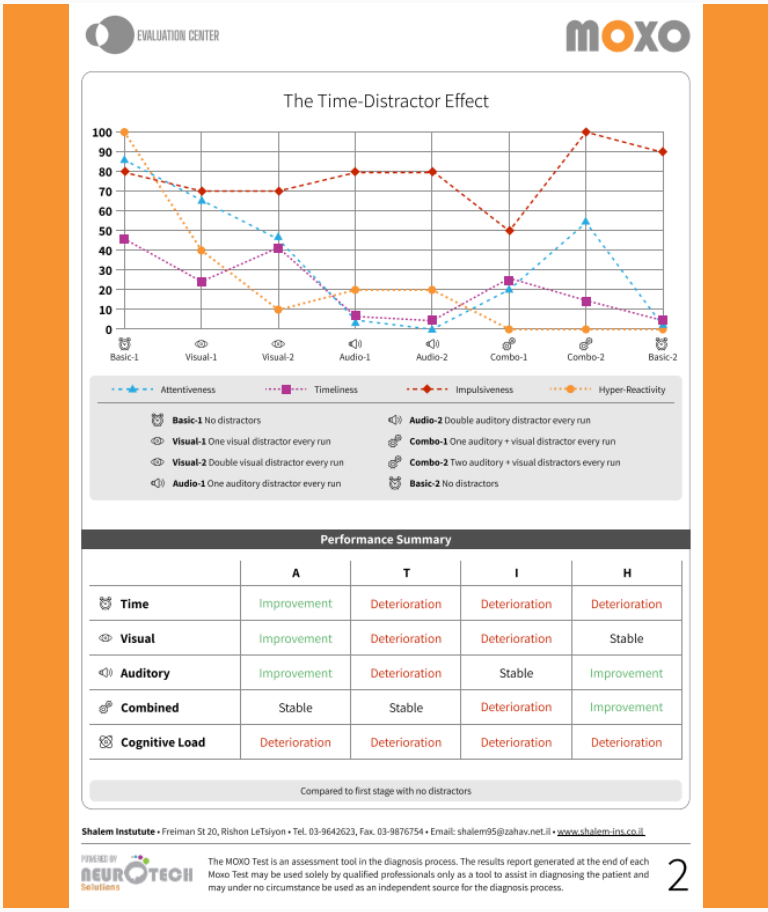
We are happy to announce, that MOXO d-CPT™ is now fully available in both Hebrew and Arabic.
MOXO d-CPT™ is already fully supported in English, Portuguese, Spanish, Turkish, Russian, Ukraine and Chinese.
Within the second quarter of 2021, our system will be enhanced with additional languages: German, French, Polish and Italian.
This multi-language feature, along with our already international norm base, make MOXO d-CPT™ a unique global diagnostic tool, relevant to the multinational demography most countries have.

MOXO d-CPT™ New Comprehensive Reports Coming Soon!

Here is a sneak peek to our new comprehensive reports coming soon...
These new Automated Interpreted Reports have been designed with the purpose of saving valuable time on your behalf, eliminating the need to interpret the results yourself, and spending considerable time writing a report.

The comprehensive report will also serve as a very clear visual tool in explaining patient's cognitive performance and reaction to the visual and auditory distractors at each stage of the test, which in turn will help in making the explanation of the test results that much clearer to your patients.

Estimated launch: May 2021.



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MOXO Home Testing

Now at the convenience of your patient's home

... Many clinicians, find that they must learn to adapt to the wind of change and integrate new tools into their practice. Making their practice approachable to patients by offering a seamless path from diagnosis to treatment at this difficult time.

Neurotech Solutions is always striving to keep the MOXO d-CPT™ test Up-To-Date, whether it is by updating new norms, or by creating new comprehensive reports. With that in mind, and faced with the need of the hour for a "home based" solution, our hard-working R&D team set out to develop a new version of MOXO d-CPT™, a Home version, that will become the CPT of choice.

Determined that the MOXO d-CPT™ will be available: **Wherever you are, whenever you are, at NO additional cost and NO Bespoke hardware – and we did it !!**

MOXO d-CPT™ is now available for you to use, and is already picking up momentum. Fast becoming the CPT of choice for many clinicians.

The MOXO d-CPT™ HOME version is so simple to use, and does not require any additional purchase of software or upgrade, no downloads are required either. It was important for us that clinicians will be able to send out the test as easily as sending out an email. The test can be sent out to as many patients as required, provided that you are available for support should they need it.
Furthermore, no bespoke hardware is needed such us dongles, microswitches or any other equipment, reducing the need for maintenance or tech support for additions equipment.

In fact, MOXO d-CPT™ HOME only requires 3 simple things:

- ✓ A quite secluded room
- ✓ A stable internet
- ✓ A PC preferable with speakers.

We offer you free training for best practices & tips on administering a MOXO d-CPT™ HOME test. If you would like to get more information regarding this please contact us at: info@neurotech-solutions.com.

"We firmly believe that your platform has a lot of potential, and for us it has meant a radical change in patient management"

Prof. Dr. Alfonso Amado Puentes, MD, PhD,
Child Neurologist,
Amado Clínica Pediátrica,
Spain, Dec-2020

"I am extremely grateful in being able to use the MOXO as a functional tool in my practice, guiding me and my parents to help their children reach their full academic potential"

Dr Johan Meyer
Board member Biofeedback Association
Managing Director at Thoughtwaves Solutions4learning
March 2021
South Africa

The Neurotech Solutions team wishes you & your loved ones Happy Holidays