

THE BEAT

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Quarterly Newsletter

ISSUE NO. 1

Q1 2026: AI-ECG Moves Closer to Operational Reality

Buyer conversations are shifting from whether AI-ECG can work to whether a platform can connect, scale, earn trust, and create a clear path for reimbursement and oversight.

- 1  **CONNECT TO THE EHR**
Seamless integration into clinical systems.
- 2  **SUPPORT DEPLOYMENT AT SCALE**
Reliable performance across sites and care settings.
- 3  **EARN CLINICIAN TRUST**
Transparent, explainable AI that supports confident decisions.
- 4  **UNDERSTAND MONETIZATION OPPORTUNITY**
Evidence, coding, and payment alignment from the start.
- 5  **ENABLE ONGOING OVERSIGHT**
Monitoring, quality assurance, and governance built in.

 **AI-ECG is entering the operational phase.**
Success will belong to platforms that integrate, scale, earn trust, and deliver measurable clinical and business outcomes.



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Q1 2026 Review: AI-ECG and AI in Cardiology

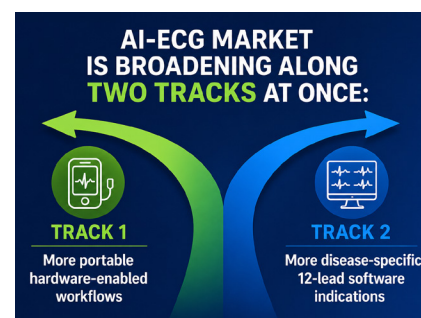
A decision-focused review of the signals that shaped the market from January 1 through March 31, 2026.

Q1 2026 brought the AI-ECG market closer to operational reality. The quarter featured new FDA clearances, stronger interoperability signals, more explicit society attention to implementation and governance, and early evidence that clinicians want AI to fit real workflows rather than sit beside them as a novelty. The practical implication is that buyer conversations are likely to center less on whether AI-ECG can work in principle and more on whether a platform can connect to the EHR, support deployment at scale, earn clinician trust, and create a clear path for reimbursement and ongoing oversight.

KEY ADVANCEMENT 1 Commercial AI-ECG offerings widened the category

Q1 included two meaningful commercialization signals. AliveCor announced FDA clearance on January 13, 2026 for 5 additional Kardia 12L cardiac determinations, bringing the total to 39 and noting adoption across more than 250 practices. On March 28, 2026, Anumana announced FDA 510(k) clearance for its pulmonary hypertension ECG-AI algorithm, positioning it as the first cleared tool for that indication using a standard 12-lead ECG.

Taken together, these announcements suggest the market is broadening along two tracks at once: more portable hardware-enabled workflows and more disease-specific 12-lead software indications. That makes the competitive set more varied and raises the bar for how vendors explain where they fit in clinical pathways.



Source: AliveCor press release, January 13, 2026.
Anumana press release, March 28, 2026.

AI-ECG EXPANDS BEYOND ARRHYTHMIA INTO EARLIER DISEASE DETECTION

What if a routine ECG could do more than just pick up arrhythmias? In Q1 2026, that idea is starting to feel much more real as AI-ECG moves beyond basic rhythm analysis into detecting more complex cardiovascular conditions.

Recent regulatory clearances and industry activity point to this shift, with algorithms now being developed to pick up signals linked to pulmonary hypertension and cardiac amyloidosis using standard 12-lead ECG data. These are conditions that are often missed or diagnosed late. At the same time, ongoing research is pushing AI-ECG into areas like structural heart disease and acute coronary syndromes, including cases where traditional ECG findings can be subtle or even absent.

What is changing is not just what ECG can do, but how it is being used. It is increasingly being looked at as a first-pass screening tool that can be used at scale to flag early signs of disease and help guide next steps in diagnosis.

For health systems, the question becomes how to bring these new capabilities into everyday workflows in a way that improves decision-making without adding unnecessary complexity or burden.

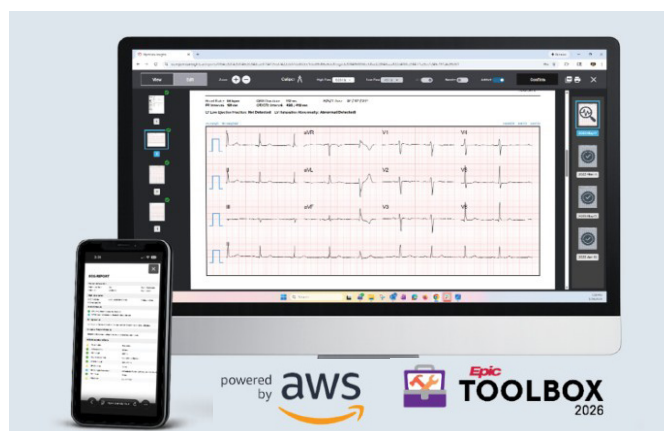
KEY ADVANCEMENT 2

Interoperability moved closer to the center of the sales story

HeartSciences provided one of the clearest quarter-specific examples of this trend. In its March 16 business update, the company said it released a significant MyoVista Insights upgrade on March 13 ahead of ACC.26, adding mobile phone viewing, reporting enhancements, and interoperability improvements intended to support large health system deployment. On March 25, HeartSciences announced that MyoVista Insights received Epic Toolbox designation for the ECG Management System category, with support for HL7v2 workflows, single sign-on, and SMART on FHIR.

Platforms increasingly need to show they can live inside the EHR, fit existing order and results workflows, and reduce operational friction for IT teams as well as clinicians.

Source: HeartSciences press releases, March 16 and March 25, 2026.



HEARTSCIENCES SPOTLIGHT

HeartSciences had a productive quarter in platform and market-access terms:

February 5: University of the West of England adopted MyoVista Insights and the MyoVista wavECG device to establish an ECG Education and Technology Reference Center.

March 16: HeartSciences reported continued commercialization progress, FDA submission of the MyoVista wavECG device in December 2025, and active discussions with multiple health systems regarding deployment.

March 25: MyoVista Insights received Epic Toolbox designation in the ECG Management System category, reinforcing HeartSciences' interoperability positioning.

HeartSciences is no longer a single-algorithm story; it is an interoperability-led platform story.

WHAT THIS MAY MEAN FOR THE MARKET

AI-ECG procurement may increasingly resemble software platform buying rather than isolated diagnostic tool buying. In terms of real-world use of AI-ECG, EHR fit, deployment burden, and governance are becoming harder to separate from clinical claims.

Portable ECG hardware, disease-specific algorithms, and algorithm-platform ecosystems are all advancing at once. That should create a more segmented market with multiple valid entry points rather than one dominant product format.

Open and foundation-model work could accelerate benchmarking and experimentation, but enterprise adoption will still depend on validation, productization, and operational trust.

Source Notes

- AliveCor, press release, January 13, 2026: FDA clearance expanded Kardia 12L to 39 determinations and cited adoption in more than 250 practices.
- Anumana, press release, March 28, 2026: FDA 510(k) clearance for pulmonary hypertension ECG-AI using a standard 12-lead ECG.
- HeartSciences, press release, February 5, 2026: University of the West of England reference center adoption.
- HeartSciences, press release, March 16, 2026: fiscal third quarter update covering platform upgrade, interoperability improvements, FDA submission timing, and health system deployment discussions.
- HeartSciences, press release, March 25, 2026: Epic Toolbox designation for MyoVista Insights in the ECG Management System category.

KEY ADVANCEMENT 3

The evidence base started addressing implementation and generalizability

The research mix in Q1 was notable because it pushed beyond simple proof-of-concept narratives. A January 7 online publication in *Acta Cardiologica* described an institutional survey on implementing an AI ECG interpretation application across medical specialties in routine care, surfacing the practical and ethical questions that come with real deployment. A European Heart Journal paper published online January 22 and highlighted in March compared open-source foundational ECG models, explicitly framing generalizability, privacy, and deployment considerations as central design questions rather than side issues.

The practical implication is that the market conversation is maturing. Buyers and clinical champions increasingly have language to ask whether an AI-ECG tool is deployable, transferable, and governable, not simply accurate in a single development setting.

Source: Ungureanu et al., *Acta Cardiologica*, online January 7, 2026. Avram et al., *European Heart Journal*, online January 22, 2026.

KEY ADVANCEMENT 4

Cardiology societies treated AI as a clinical operations topic, not a side conversation

ACC.26, held March 28 to 30, gave AI an unusually practical frame. ACC coverage described an AI Intensive focused on implementation in daily patient care, financing, and governance. The same meeting coverage emphasized safe, equitable, clinically useful translation rather than novelty alone. This signals what practicing cardiologists, administrators, and industry partners consider credible near-term use.

The emphasis is moving toward workflow fit, clinician judgment, and real deployment discipline.

Source: American College of Cardiology meeting coverage and ACC.26 feature articles, March 2026.

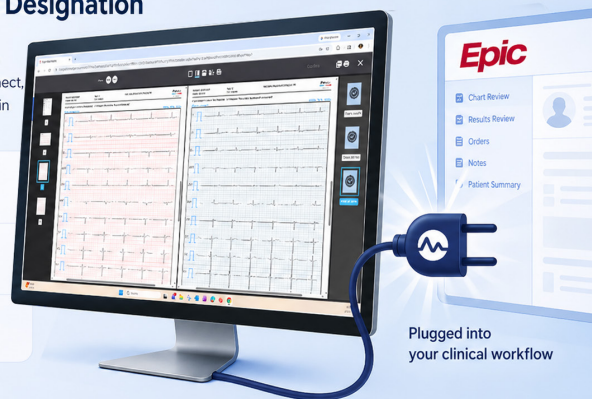
EPIC TOOLBOX DESIGNATION FOR MYOVISTA INSIGHTS™

In March 2026, we shared that MyoVista Insights received Epic Toolbox designation in the ECG Management System category.

MyoVista Insights™ Achieves Epic Toolbox Designation

MyoVista Insights has been designated as an **Epic Toolbox solution**, making it easy to connect, integrate, and deliver actionable insights within your clinical workflows.

- HL7v2 MESSAGING**
Reliable, real-time data exchange with your enterprise systems.
- SINGLE SIGN-ON (SSO)**
Secure access with enterprise identity providers.
- SMART ON FHIR**
Modern, standards-based access to EHR data and workflows.



Plugged into your clinical workflow

The platform supports HL7v2 messaging, single sign-on (SSO), and SMART on FHIR, so it can plug into existing clinical workflows and electronic health record environments. Interoperability like this helps ensure new technology fits naturally into how clinicians already work.

As ECG interpretation evolves, particularly with the rise of AI-enabled capabilities, solutions that integrate smoothly into ordering, review, and reporting workflows are more likely to be adopted and scaled.

For us, this milestone reflects more our technical progress in that area, as it allows us to address the reality that integration, usability, and clinical fit now matter just as much as analytical performance when evaluating new ECG technologies.

KEY ADVANCEMENT 5

Physician openness to AI continued to rise, but only with guardrails

The American Medical Association's March 12, 2026 physician AI survey adds a broader adoption backdrop for the quarter. The report found that 81% of physicians reported some awareness or use of AI in 2026, up from 66% in 2024, and over 2/3 of physicians say AI provides an advantage to their patient care, an increase from 65% in 2023. At the same time, physicians placed strong weight on safety and efficacy validation, privacy assurances, clear liability frameworks, and post-market performance oversight.

Interest is expanding, but trust still depends on evidence, accountability, and practical implementation support. For AI-ECG vendors, that favors messaging built around validated use cases, workflow transparency, and governance readiness.

Source: AMA Physician Survey on Augmented Intelligence, published March 12, 2026.