Medical Tube Securing Device



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Background

- 8 years in U.S. Army
- 3 years as Respiratory Therapist in Pulmonary Studies
 Division of U.S. Army Burn Center
 - Only Burn Center within Department of Defense
 - Average 300 Admissions annually
- Problem posed by current standard of care
 - Problem identified in burn patients (military and civilian) at our center
- Device designed to address problems outlined with standard of care in our center

- Current standard
 - In place since early 1990's
 - Bite block tied to tube, then tied around patient's head to secure
 - Silicone gel sheets placed under ties to pad

• Added in 2004



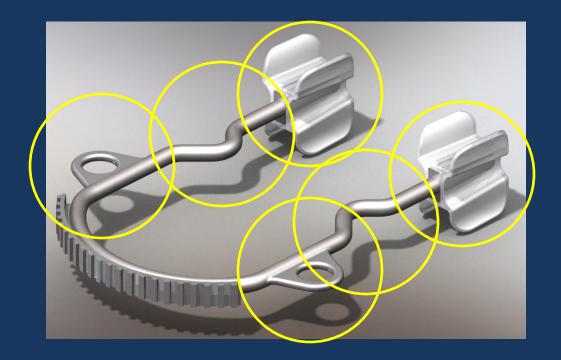






- Problems identified with current standard
 - Destruction of soft tissue around mouth
 - Loss of patient teeth

Solution



- Blocks moved to back of mouth
 - Utilizes 8 molars as opposed to 4 incisors
- Framework to attach tube designed to avoid soft tissue of mouth/lips
- Attachment points moved forward of mouth
 - Avoids corner of mouth area

Market Analysis

- Established yet concentrated market for devices to secure breathing tubes
- Growth projected to benefit those finding new applications for airway management devices
- Development was done with burn patients in mind
 - Expansion into other-than-burn care eliminates potential market restrictions

Market Analysis

- 500,000 people seek medical care for burn injuries annually
- 40,000 require hospitalization for treatment
- Competitive devices retail for ~\$3 \$15 each
- Leads to market size \$120,000 \$600,000 annually
- Foreign sales will increase this
- Figures developed with sole market specializing in burn care
 - Development into other areas will dramatically increase market share / revenue

Current Status / Next Steps

- Prototype developed
 - Additional development not predicted to be extensive;
 final tweaks of design
- Clinical trial required
 - Fabrication of devices to test
 - Development of protocol for trials
- Exit Strategy
 - Transfer completely or in partnership
 - License relationship

