

# EpiLink

## TECHNOLOGY SUMMARY

### COMPREHENSIVE EPILEPSY TRACKING - MADE SIMPLE.

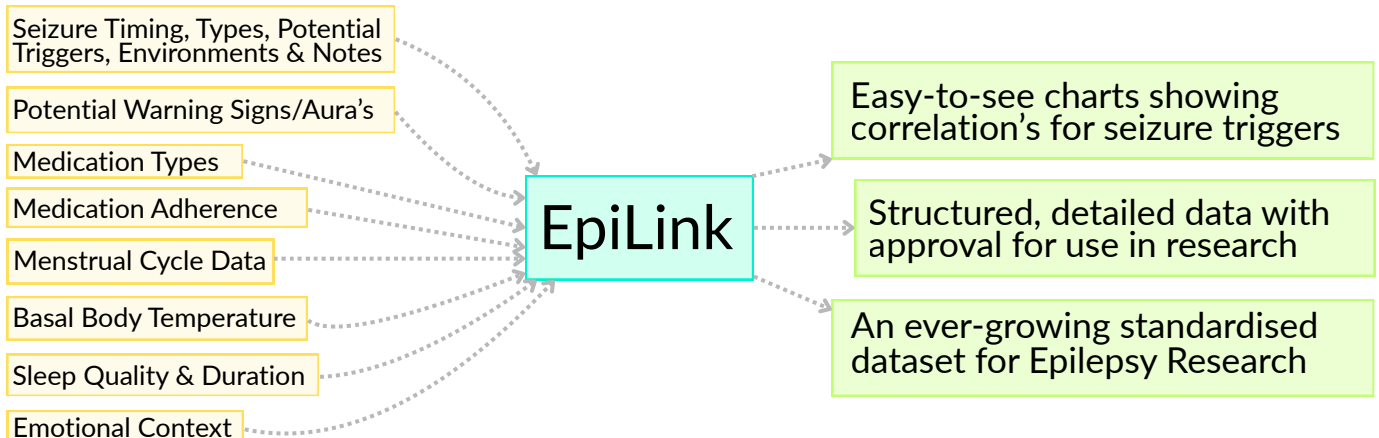
EpiLink is a next-generation, patient-driven epilepsy tracking app developed from lived experience and clinical consultation, with a special focus on under-served populations such as women with Catamenial (menstrual cycle-related) epilepsy.

The platform empowers users to track seizures, medications, triggers, sleep, and menstrual cycles, automating the correlation of these factors to deliver actionable insights for both clinical care and research.

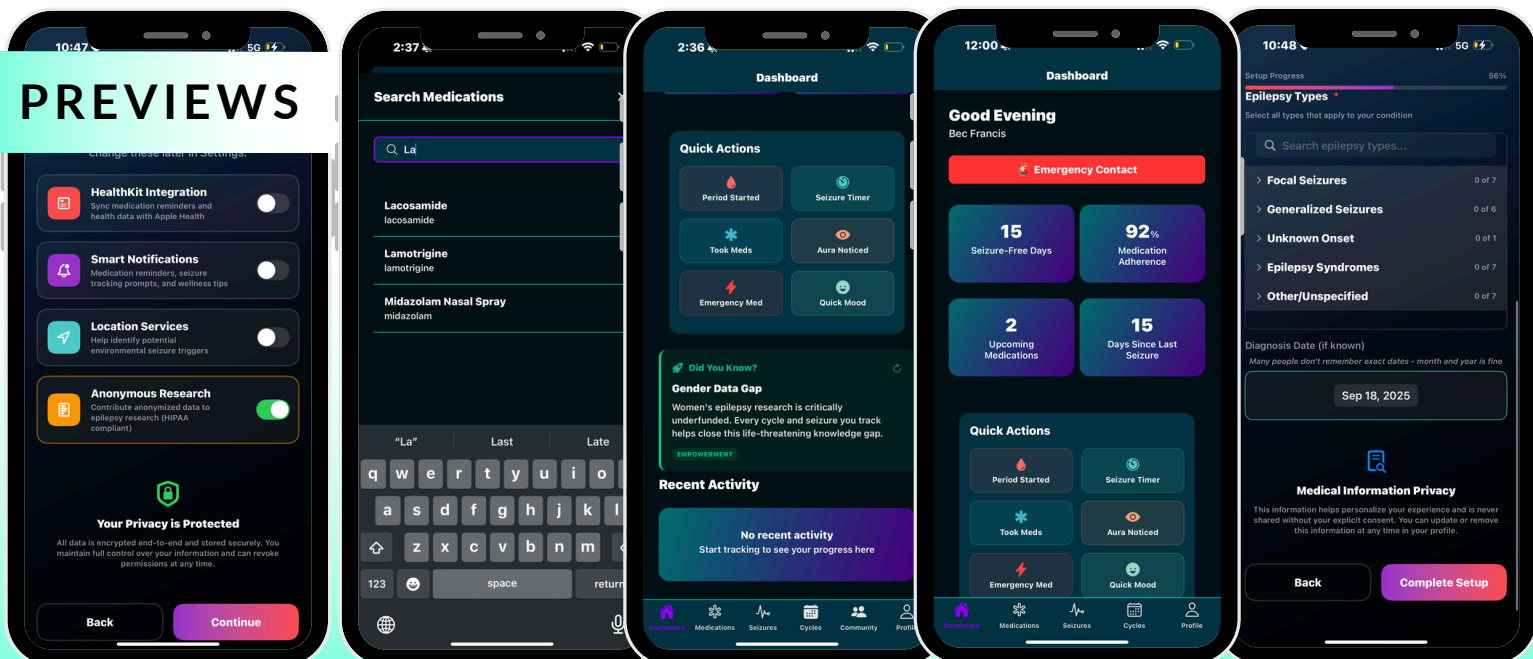
Unlike established apps such as Seizure Tracker, EpiDiary, or Epilepsy Journal - which primarily offer logs and basic reports - EpiLink incorporates early-stage tools for detecting relationships between hormonal cycles and seizure clusters, and generating standardised, research-ready exports.

User data is collected through structured forms designed to facilitate analysis and reduce noise, ensuring datasets support research hypotheses and clinical trials. EpiLink is currently at MVP stage and has been recognised for innovation and social impact by industry, educational, and clinical leaders.

The platform's roadmap is deliberately designed to be shaped in partnership with clinical researchers, with a core aim to integrate feedback around preferred data formats, essential variables, and integration requirements to maximise utility in upcoming studies. Diagram and previews below are all still in early enough stages to be reshaped to suit research teams specific data structure requirements.



## PREVIEWS



# EpiLink

## TECHNOLOGY SUMMARY

The app development is personally driven by its founder, supported by a multidisciplinary advisory board, and is open for co-design partnerships that will help prioritise and refine features to best serve research protocols and clinical needs. EpiLink is actively seeking input from research collaborators as to what data outputs, accessibility options, and tracking modalities would best align with their study goals and regulatory standards.

We invite investigators and clinical teams within AECTN to help shape EpiLink, so the platform can deliver the most relevant, high-fidelity data for future epilepsy studies and personalized care. Further technical details, user demonstrations, and discussion of potential integration are available on request to [bec@elevitaai.com](mailto:bec@elevitaai.com)

## TEAM

Contact [bec@elevitaai.com](mailto:bec@elevitaai.com) or 0456 840 490

### Rebecca Francis

*Founder & Patient Lived-Experience*



\$42M 409a Valuation on CommuniKids (2024)

CSIRO I2G Alumni & TRW IRP Alumni (QLD Gov Sponsored)

Tropical Innovation Festival Sponsorship 2025

Impact 10x Accelerator – Winner of Judge's Choice & Social Impact Awards

### Tiago Ferreira

*Cybersecurity & Certified Lead Advisor*



ex-AFP, INTERPOL & EUROPOL for 20+ Years

Spearheads global initiatives to build "Smart Cities"

Founder & Managing Director of North Star Strategies

Global Advisor to Government and Private Sectors

### Rita Sadhvani

*Global Scaling Advisor*



ex-Amazon & ex-Verizon Director for 20+ Years

29+ Years Experience in Technology Product Innovation

Led a \$535M Global Project for Amazon ("Significant Growth")

Board of Directors for The Literacy Lab

### Dr Peyman Obeidy

*Founding Biomedical Advisor*



Sydney University & Harvard Graduate

Co-author on various biomedical papers

Awarded a REDI Fellowship

Published in leading medicine journals

### Liz Keen (RN)

*Clinical Governance Advisor*



Globally experienced executive nurse leader

Delivered Australia's 1st Clinical Governance Framework for Digital Health

Established International Clinical Governance partnerships through Global Digital Health

Head of Clinical Governance at InfoSys (AU) & former Director at Bupa (AU)

### Dr Michael Visser

*Clinical Education Advisor*



Award-Winning Associate Lecturer at UQ

Co-authored 1st wellbeing guideline for perioperative nurses

Established a network in Aus for near-death experiencers

Led UN/WHO lobbying for end-of-life care in 1990's