Field Emergency App: Anamtastic

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Outline

Problems

- Emergency care practitioners are under extreme time pressure
- Significant portion of time taken for communication with patient
- Language barriers lengthen time and accuracy of information
- Doctors are expected to remember all protocols
- Doctors expected to remember all drugs, all side effect, all interactions, all differential diagnoses, all lab values
- These are unrealistic expectations which literally kill patients
- Potential market for such apps is global

Proposed

- Anamastic is an app that addresses critical issues for patient treatment and communication.
- Anamtastic will be a multimodular app that the clinician can tailor to her specific emergency setting

Existing

- Communication: right now translation in Israel is happening ad-hoc based on a failing phone system from the MOH, google translate and limited staff capabilities. If there was a better tool we would all be using it.

Product Looks
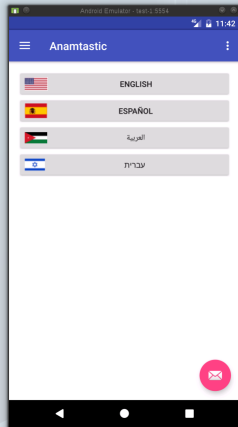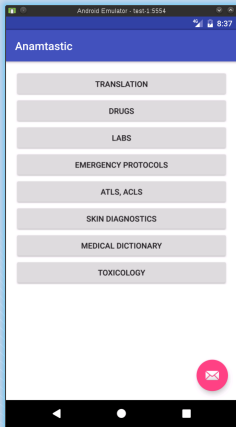
App Market

- Medical students, nurses, medics, physicians assistants and doctors with smartphones
- Nearly all doctors have smartphones–even in most African and Asian countries
- 3 billion a year market in USA alone
- The market for such a product could be predicted by the performance of similar yet inferior apps already on the market. Epocrates 50% penetrance of American physicians, revenues well over 500 million each year for last three years. PEPID private company, low penetrance, lack of reliable data on revenues
- Mobile health app market is projected to hit 26 billion in revenue by 2017

Building The First Modules

- Staff salaries (3 programmers, one medical leader, one business manager): 1,000,000 NIS, or $250,000
- Equipment (mobile phones, computers, additional cameras): 50,000 NIS
- Expert consultations: 25,000 NIS
- Workspace for meetings, food, other: 25,000 NIS
- Total cost: 1,100,000 NIS or about $300,000

January 2017 Plan And Costs

- Goal: Build prototype translation module and shell
- Equipment (mobile phones, computers, additional cameras): 5,000 NIS
- Expert consultations with front end designers: 25,000 NIS
- Expert programmer with background as medic 5,000 NIS consult
- Workspace for meetings, food, other: 5,000 NIS
- Total cost: 40,000 NIS

Development Plan

- Develop each module and release for sale separately to be put inside the app shell which has one small free module (a compacted translation phrasebook)
- Development of translation module in first 3 months, release with heavy marketing through Ministry of Health and Hospitals, post release surveillance and improvement, and free partial phrasebook
- Development of skin module next in parallel with development of other modules that are closer to apps on the market i.e. medical dictionary module, drug information and interaction model etc.
- Exit strategy: At one year in case of incomplete funding: sell existing modules to well funded companies or Ministry of Health Israel, in case of good profitability: go public.

Team

Dr. Candace Makeda Moore, MD; (emergency doc, photographer, founder)

Dr. Jeremy Rutman, PhD, (patent attorney, computer programmer/image pocessing, physicist)

Mike Green, MS (biologist, computer programmer)

Accomplishments

- Built website
- Development of translation module underway, prototype/demo to be completed on December 24th, internal documents with algorithm and design specifics currently in company dropbox
- Collaboration with Trendiguru vis a vis Dr. Rutman to receive algorithms for machine based 3D object recognition

The Real Plan

- As new modules are developed, starting with translation module
- Try to sell modules to rivals i.e. PEPID, Epocrates, etc.
- Try to push national acquisitions due to legal noncompliance (providing care in patient's language mandated in some countries)
- Business-wise we may be beat to market on some modules, but each can be unpacked and sold once developed