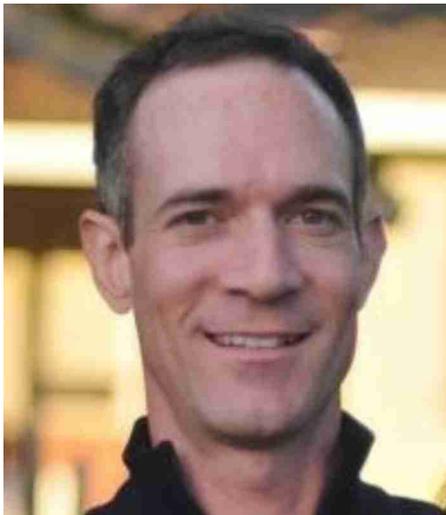


As a Fast, Safe and Easy Way to Share Imaging Studies with Patients and Colleagues across Organizations and Systems using the Internet, image32 is Unlocking the True Potential of Medical Images

**Technology
Medical Imaging Software**

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**Bob Pellican
CEO**

BIO: Bob Pellican was formerly the lead UX Designer at SuccessFactors (acquired by SAP for 3.4\$B) and C3 (Tom Siebel's energy management startup). Bob has 18 years of experience designing and building great software that people love to use.

About Image32

image32 is a fast and easy way to share your imaging studies with patients and colleagues, across organizations and systems. In seconds, you can upload a study from a CD or PACS, view it online, and share it with

your patients or colleagues. The image32 system automatically strips out protected health information (PHI) — we keep specific HIPAA-safe study identifiers and our proprietary Study-Code to make sure you and your colleagues are on the correct study. Once your images are up on image32, you can access and share them from any desktop or mobile device.

**Interview conducted by:
Lynn Fosse, Senior Editor
CEOCFO Magazine**

CEOCFO: Mr. Pellican, what is the concept for Imaging 32?

Mr. Pellican: Image32 is essentially fast and easy medical image sharing. Today, doctors don't have the ability to share medical imaging (x-rays, CT scans, and MRIs) outside of the hospital. Within a hospital, they have a decent system for sharing imaging from the radiology department with other departments like oncology, orthopedics, and neurology, as long as they are inside the hospital firewall. Today, if a patient needs to go see a specialist in a different hospital, they burn a CD, they give it to the patient, and the patient transfers the CD to the other hospital. We want to put an end to that. We want to use the internet to safely and efficiently allow doctors to send imaging studies to colleagues at other organizations.

CEOCFO: This is not a brand-new concept; what has been happening in this arena so far and what does Image32 plan on that is different?

Mr. Pellican: What has happened so far is the PACS vendors, (PACS is

the software that traditionally stores these medical images in digital format) the PACS vendors are in silos at each hospital, and breaking through those silos is very difficult. There are a couple companies out there trying to do it, but they are trying to sign up multiple hospitals, so you have to be a customer of this vendor at each hospital in order to share. If a patient goes from hospital-A to hospital-B and both are customers of this software vendor, then it might work. If the patient goes to hospital-C, it's no good. Our approach is different in that our model is kind of like WebeX. If I want to have a conference with you online to look at an x-ray, as long as one of us has an image32 account, we can have that conference. That is one differentiator. Another differentiator would be our zero footprint medical image viewer. It works on any device that has an HTML5 compliant browser. It works on iPhone, iPad, android phone, and android tablet as well as your desktop PC or Mac.

CEOCFO: Where are you in the development and commercialization?

Mr. Pellican: We are in private beta right now, getting ready to launch our public beta in November. We have several doctors who are very happy using it in the private beta, giving us feedback.

CEOCFO: What is the plan to reach the medical community?

Mr. Pellican: We want to start with the doctors. My cofounder is a neuro-intensivist. Much of the idea of this company came from his frustration with the tools that he uses today. Most of these tools were tailored specifi-

cally to the radiology department. The other doctors get a watered down version of what the radiologists use. We want to sell directly to those doctors, the cardiologists, oncologists, neurologists, specialist surgeons and that is where we are headed with it.

We want to be out there in the journals with the image32 embedded viewer. If you go to a medical journal today, much of the time when there is an imaging study, it's represented as a flat jpeg. We can embed our viewer just the way you can embed a YouTube video and you get all the playing controls of the video. We want to make it just as easy to embed a medical imaging study so you can scroll through the stack of images right in the journal page. Most of the images are multi image studies, so it is kind of a multi-faceted viewer. You can adjust the contrast, all in line with our embedded viewer. We think that is one of the best ways to get our name out there. We also plan on launching a teaching file system where doctors can post an interesting study for the general good, so that the other doctors can learn from it.

CEOCFO: How do we know the right scans will be linked with correct patient?

Mr. Pellican: We bring safe identifiers out of the record where they came from. If it came out of a PACS system at the hospital, there are certain identifiers in that study that you need to identify the patient. We preserve that data when we put it in the cloud and strip out other data that might be less secure. We keep the data that is relevant to linking the right study with the right patient. The second thing we do is encrypt the data before we post it to the cloud, so that even in the event of a security breach, no sensitive data would be exposed.

CEOCFO: What was the hardest part of the technology to put together?

Mr. Pellican: The hardest part is recognizing all the different file formats that are out there. There is a good standard in DICOM that has been used for several years, but the fact is all the different manufacturers for the hardware, the people who make the CT scanners, the MRI machines, and all the different modalities, are not 100% compliant with the standard. The data that we get in our testing is showing that it's very hard to process all these different file types before we put it into the cloud.

CEOCFO: Do you foresee the proposed changes to the healthcare system as being helpful to get more traction on your idea?

Mr. Pellican: Yes, I think so. The meaningful use rules are going to push people into the digital era for sure and we are there to be the leader in imaging in that new world of digital

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healthcare. Meaningful use is important and it is giving the industry the gentle nudge that it needs to come into the modern era.

CEOCFO: Will you be looking for funding to move image32 ahead?

Mr. Pellican: We are 100% customer focused right now. To the extent that we can take on investment to do something to make our product better for our customers, we will do that and if we do not need to, then we will not. Right now, we have our seed funding in hand and we are focused on making an amazing product that doctors love to use. Plans for future funding will be determined on the impact it has on our customers and what we need to do to grow to make our customers successful.

CEOCFO: Why should the business and investment community pay attention to Image32?

Mr. Pellican: I think it is a tremendous opportunity in medical imaging in general. Medical imaging in the US is a \$100 billion market, which is spent each year on imaging studies. To a certain extent, they are not fully utilized. You go and get an x-ray and you might be able to get a second opinion, but you might not. Sometimes it's like pulling teeth just to get the CD of this image. These are important images. They are images that cost \$1000 to produce. There is a great deal of potential that is yet to be unlocked here. We are already paying \$100 billion a year to get these medical images and we think image32 is going to unlock the true potential, and give more value to the medical images that are already created. I think it is clear that electronic medical records are coming, but most of the focus there is just on that: the record itself, and the imaging part has been left to the legacy vendors. We want to push that part of the electronic medical record.

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CEOCFO: What should people remember most about image32?

Mr. Pellican: We are launching in several weeks, and with our public beta, we will be aimed at doctors first. Following that, we will be having a patient version as well, and we are very excited about that. Many patients do not realize that they have accumulated radiation over time. I did not realize this until someone told me, but the radiation in CT scans is one hundred times more than the radiation you get in an x-ray. Because medical records are stored at different hospitals, and you move or change insurance companies, it is up to the patient to keep track of your own medical imaging. We are going to help patients do that here in a couple months.