

Disinfection System for Hospitals and Long Term Care Facilities



Bob Simpson
Co-Founder
C3 Contamination Control Corp.

CEO CFO: *Mr. Simpson, what is C3 Contamination Control?*

Mr. Simpson: C3 became involved in the development of AsepticSure, an exciting new technology, invented and developed by two doctors here in Kingston at the Queens University research center Dr. Michael Shannon and Dr. Dick Zoutman. It employs hydrogen peroxide and water vapor to form a free radical called trioxidane, which kills every known superbug very quickly, efficiently and safely. It disinfects to a far greater level than any other process and because it's a gas and it gets everywhere. I was immediately excited about it because I knew it could save tens of thousands of lives, and obviously was a good business opportunity for us. So, C3 today has a semi exclusive agreement to market the AsepticSure product and disinfection system in Canada and parts of the United States. We not only sell the product but we provide the service as well, so it becomes very affordable for anyone to 100% disinfect any space or medical equipment, such and beds, mattresses, IV pumps, wheelchairs, etc.

CEO CFO: *Where is the company today?*

Mr. Simpson: We are about three years into it and when we initially started we identified about seventy five different markets that we could address. We quickly found that the majority of those markets loved the technology and loved what it would do. For example, fitness facilities were very impressed by what we could do in terms of bacteria elimination. A local hockey team was blown away by what we could do in terms of odor elimination and bacteria control. However, they did not want to step forward and pay the costs, unless they had a crisis. We are looking at six hundred to one thousand dollars a room, depending on how many rooms we are doing and proximity and type of room and everything else. Therefore, we came right back around to where we started and decided to focus on the hospital market because they have the most critical need. As it stands, we are still working on securing contracts with hospitals. The buy process in the hospitals, even after they have accepted this technology can be as far away as one to four years. Therefore, we are just starting to get traction and a lot of interest from hospitals.

CEO CFO: *What are the ongoing costs once the equipment is in place?*

Mr. Simpson: We have three different models that we operate with. They are very different. One is where a hospital acquires our equipment outright. We train them on how to use it and then they are on their way. Then we support it with service and supplies. The second model is that we provide the equipment and the service. Therefore, we come in and use the equipment that they own, which saves them on costs. Then the third model, which seems to be the most popular model, is a one hundred percent service model, where we go in and we provide the equipment and all of the service. If you go back to the first model, which we thought would be the most common model, but with capital budgets the way they are it is not the most popular model; ongoing costs are absolutely minimal. The cost of the fluid, which is just a one percent hydrogen peroxide and water mixture, is nominal. I think it is around twenty dollars a container or less. Then, there are any repairs and maintenance or service contracts for the equipment. Obviously, if we provided one hundred percent service there are no ongoing costs, other than the cost to have us come in on an ambulatory basis, where if you have a crisis or a scheduled basis to come in and do it preventatively.

CEO CFO: *What are your geographic markets?*

Mr. Simpson: We have specific geographical markets that we are allowed to work in. That will include the United States once we have an EPA approval. In Canada we already have Health Canada approval. It is a little bit unique, because Health Canada does not consider this a medical device. When I say that we have approval, Health Canada has said, "You

do not need approval because it is not a medical device. It is a cleaning device.” It is a little bit unique and falls into that category. Then, because we are only using one percent hydrogen peroxide there is no drug identification number required. That is because it is not considered a drug as far as Health Canada is concerned. It is just a one percent hydrogen peroxide mixture and water. So our geographic markets would include Canada and the United States.

CEOCFO: *Why and how does this mixture work?*

Mr. Simpson: The unique mixture of 80ppm of ozone, 80% humidity and 1% hydrogen peroxide, forms a free radical called trioxidane, which has a half life of fifteen to twenty minutes. Trioxidane is naturally formed in the human body and it is what actively protects our cells. When the super bug is exposed to trioxidane it is lethal to it. It kills it, but it kills it in a very unique way. That is because the super bug, for example C.Diff, MRSA or Ebola or whatever it happens to be, is generally encapsulated by a biofilm. All of these pathogens are surrounded or covered by a biofilm. The biofilm actually serves to protect the super bug, to protect the HAI, or what is called the Hospital Acquired Infection or “superbug”. It makes it very difficult to kill it. However, the trioxidane penetrates the biofilm, and we are continually producing trioxidane with the AsepticSure system. That is because our exposure time is thirty to forty five minutes and you have to keep reproducing trioxidane. As the trioxidane is constantly being produced it kills all of the super bugs--anything that is exposed to the air. Therefore, it does not matter where it is; if it is around the corner or just in a crevice, it is going to be exposed to it and die. It produced what is called a Log 6 Kill. The best way to properly describe a Log 6 Kill is that if a surgeon takes a surgical instrument and puts it in a steam sterilizer and exposes it for the correct amount of heat and time to kill all of the spores; because it not only kills the virus, but it kills the spores of the virus as well, then you end up with what is called Log 6.

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CEOCFO: *You are getting close. What are the next steps?*

Mr. Simpson: Unfortunately, we are not being heard by the upper level management in hospitals. That is because currently we have only been talking to infection control people mostly at the hospitals, and infection control people tend to not have any budgets. The environmental control people are the people in the hospital who tend to have budgets, but it all has to be authorized by a higher level of management in the hospital. Therefore, when we attended HealthAchieve last week, our target was to expose the technology to upper level management, such as CEOs, CIOs and various individuals; strategic planning companies that are involved in moving hospitals. We had a substantial amount of interest from large hospitals and we are now entering into discussions with some of these hospitals about how we can help them, and do some additional studies in hospitals to be able to prove out the technology. One of the studies that we did last year was done at Belleville General Hospital, in Bellville, Ontario, where they had an outbreak of MRSA. Our team headed up there and we spent three or four days in the hospital doing one of the wards. Then they monitored what had happened. First of all, they swabbed before and found that there was MRSA there despite all of the cleaning procedures that had been done, and the double cleaning that had been done by staff. They still could not control the outbreak and the patients were getting MRSA. After we swabbed before and after we used the AsepticSure systems, they were at Log 6 in the affected areas, so there were no pathogens left. Up to nine months later there have been no re-infections in that hospital ward. Therefore, that is a testimonial as to how it works.

CEOCFO: *Why take note of C3 Contamination Control Corp?*

Mr. Simpson: We are the only company in North America I know of that is offering a service to hospitals to deal with this problem. There are many companies offering to sell hardware, where they will come in and supply you with a particular technology out of a capital budget where the staff operates all of the equipment. We will do that, but in addition to doing that exact same thing, what makes us unique is that we have targeted the hospital market with state of the art, cutting edge technology for disinfection and decontamination control and offering it as a service; whether it be an emergency basis or an elective basis, we can go into any hospital. At this point we are focusing on Ontario. However, we have the ability to go outside of Ontario and when we have the EPA approval, into the US as well. That is the one thing that separates us and makes us unique from every other player in the market place.

**For more information visit: www.contaminationcontrolcorp.com
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