





- French company founded in 1999.
- Headquarters in Amiens France.
- Subsidiary 6 Villa Ballu 75009 Paris.
- Company specialized in anesthesia, intensive care obstetric and outpatient care

ABOUT BOW MEDICAL

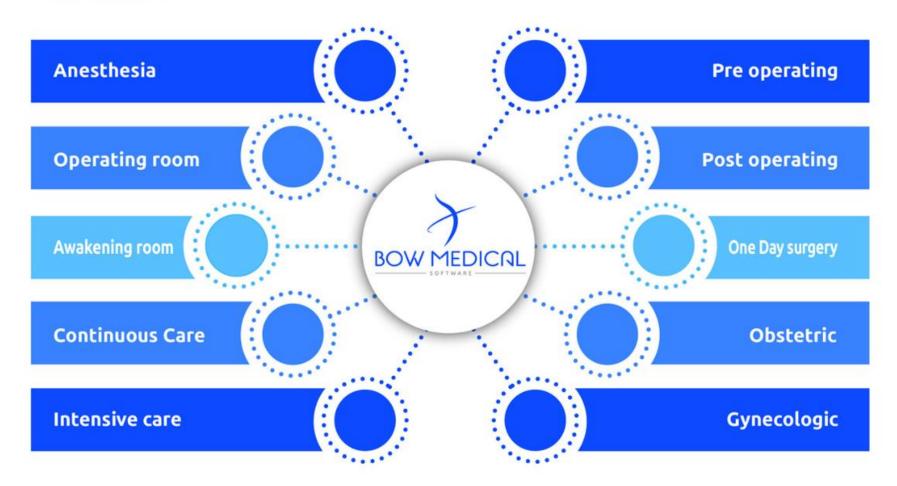
Created in September 1999, Bow Medical has become a major player in the medical anesthesia field through the Diane software suite deployed within 2700 operating room in France.

Bow Medical has then continued its development through the intensive care market segment.

Headcounts 33 people:

- > Engineers and technicians for research and development including technical support
 - → Trainers
 - > Application engineers
 - Growing commercial and marketing network
- A stake in the Extens E-Health investment fund















Data sharing by all healthcare professionals within the same department or department through a collaborative space



Sharing data by all health professionals in maternity wards to ensure women gynecological follow-up. Pregnancies survey, childbirth, postpartum and newborn follow-up.



Provides a solution to outsourcing care, therapeutic education and improved rehabilitation of patients, during acute or chronic pathologies with a constant concern for quality and safety, regardless of the duration of surveillance





Déploiement



DIRNE | RNESTHESIR

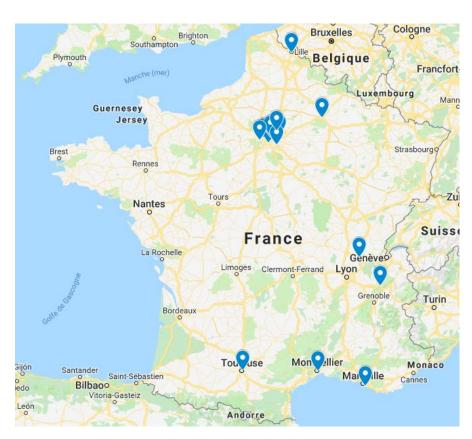
The anaesthesia software solution in France 8 000 licenses dont 17 University hospital



The ICU software solution 17% market share park installed







Intensive care Adult, neurological and large burnt critical care, Pediatric and neonatal Intensive care, critical care

More than 530 beds:

- 1. Hôpital Privé d'Antony
- 2. Clinique Convert (Bourg en Bresse)
- 3. Hôpital Privé de Marne Chantereine (Brou sur Chantereine)
- 4. CH Chambéry Métropole Savoie
- 5. Hôpital Privé Parly II (Le Chesnay)
- 6. Hôpital Marie Lannelongue (Le Plessis Robinson)
- 7. Hôpital Privé Le Bois (Lille)
- 8. Hôpital Privé Clairval (Marseille)
- 9. Institut Jacques Cartier (Massy)
- 10. CH Montélimar
- 11. Clinique du Millénaire (Montpellier)
- 12. Fondation Adolphe de Rothschild (Paris)
- 13. Clinique Geoffroy St Hilaire (Paris)
- 14. CTB APHP St Louis (Paris)
- 15. CHP Claude Galien (Quincy-sous-Senart)
- 16. CHU Reims
- 17. Clinique de l'Union (Toulouse)
- 18. Hôpital Privé de l'Ouest Parisien (Trappes)
- 19. Clinique Vert Galant (Tremblay en F.)

Our partners

Dräger

It is an international leader in medical and safety technology.



Maincare is a leading software digital and medical solutions editor for the healthcare world.



MOEBIUS is a software that masters the course of care. It proposes to increase the added value of your preanaesthesia consultation to homogenize, secure and improve the patient care



Anamnese helps healthcare professionals to invent the patient-practitioner relationship by involving the patient Our artificial intelligence structure is interviewing patients in their natural languages, as a medical assistant would do.



Designed by a community of neonatologists for health professionals and supported by the B-PEN research project of the University Hospital of Reunion with the support of the European Union and the Reunion region.





- > Allows patient follow-up in critical care services
- > Brings all relevant information to the healthcare team
- > Includes advanced tools for intensive care.





Statistical analysis of activity, infections, mortality...

Ergonomic computerized sheet for a clear and complete view of the patient data

Quick access to all areas of the service

A structured and shared patient recording file with all teams

Ease of use and efficiency in intensive care service



An ergonomic and secure medication order module with protocols and safeguards

Access to the patient recording file by contextual call

A secure Data traceability with automatic reporting

Biology and media devices automatic integration o

CCAM and CIM10 quotation acts



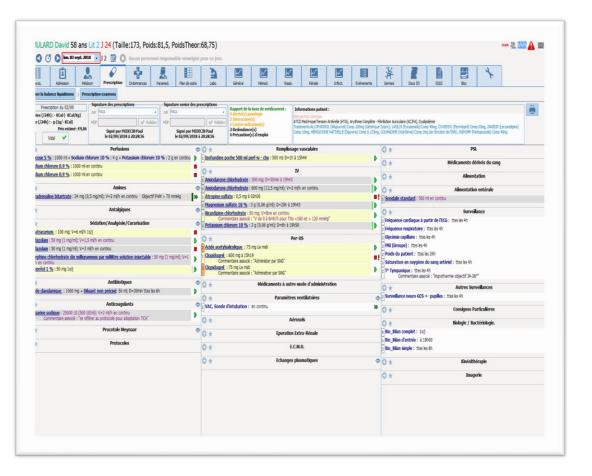




Synthetic vision of the service: Bed Number visibility Patients (Name/first name) Root Causes of hospitalization Infections BMR Duration in days in hospital stay **Alerts**







- ✓ Securing the medication order
- Collecting biological collection automatically
- ✓ Billing automation(CCAM, CIM 10)
- ✓ Improved information sharing
- ✓ Standardized documentation



Improve

the patient monitoring efficiency.

All laboratory results are integrated automatically in DIANE ICU.

The overall results can be displayed graphically with curves and time scale modulation. Within the same sheet, the caregiver will analyze the data from different sources (laboratory, medical devices, drugs) to evaluate the overall patient health conditions.



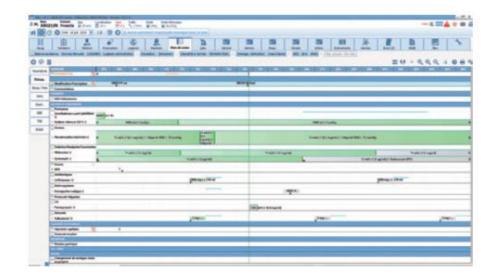


A customizable

care plan.

Each specialty ward can model its workspace according to their specific needs allowing a quick start with the system.

To further secure the care plan, especially when the actual occurrence requires to be modified, a dedicated rule's engine allows the caregiver to document caregiver. This documentation reflects the reality and offers reliable medical track record.





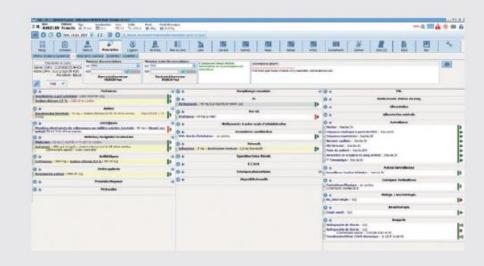


Outil

de prescriptions.

DIANE RÉA apporte un moteur de prescription ergonomique, adapté aux besoins de rapidité et d'adaptation en continu, inhérent à une prise en charge en réanimation.

Basée sur les protocoles du service, la prescription informatisée permet ainsi la réduction des risques (surdosages, contre-indication, interactions médicamenteuses, erreur de lecture...). Par ailleurs, l'affichage sur une seule et même zone offre une vision globale du patient et une prise en charge rapide par le médecin.











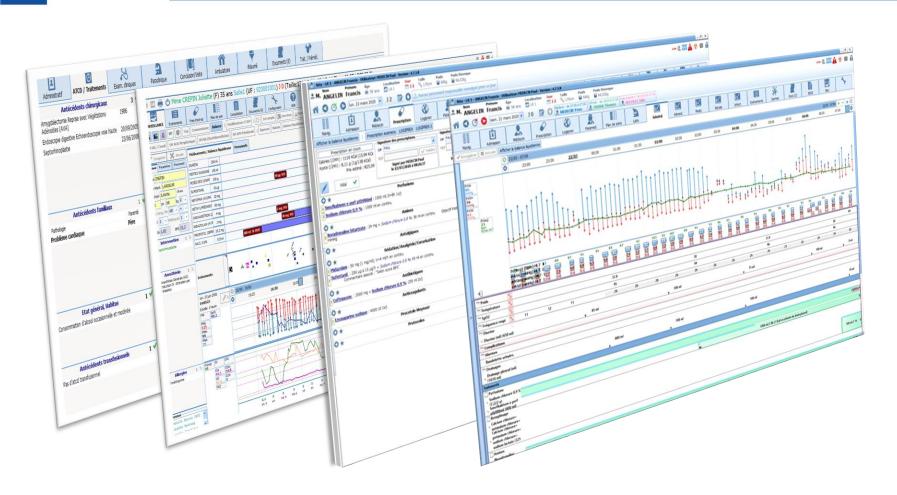












Consultation

Operating theatre

Anaesthesia

Recovery romm

Intensive care

Une base de données et des interfaces communes



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50 Public Hospitals10 Cancer Centre135 Private hospitals including:

- 75 Ramsay GDS Capio,
- Almaviva,
- Clinifutur,
- Domus Cliniques,
- Elsan
- OC Santé,
- PBNA,
- Saint Gatien
- Santé Cité
- Vedici
- Vivalto





3









- Monitor patient information status in real time.
- Reflect the accuracy of the patient care
- Generate quickly the documentation in order to ensure the continuity of the patient care



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Making documentation easier for the anesthesia phases

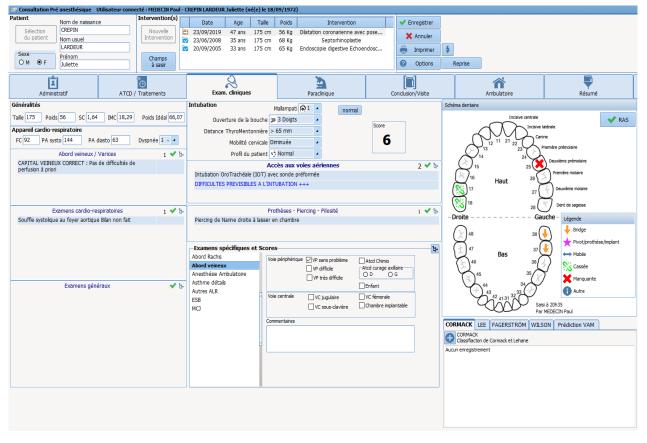
Generating the documentation of he Peroperatory phase

Generating the documentation of the recovering phase

Operative Per Operative Post operative Post operative Billing

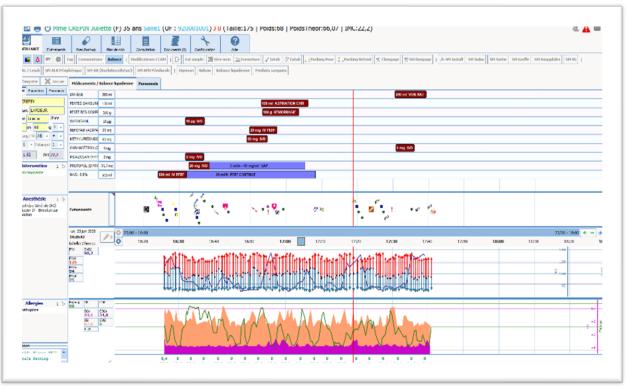


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- ✓ Patient overview
- ✓ Ergonomic data entry
- ✓ Automatic quotation
- ✓ Quick access to all patient information
- ✓ Exporting patient data history and treatment
- ✓ Generating report

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- ✓ Ergonomic view screen
- ✓ Synthetic view

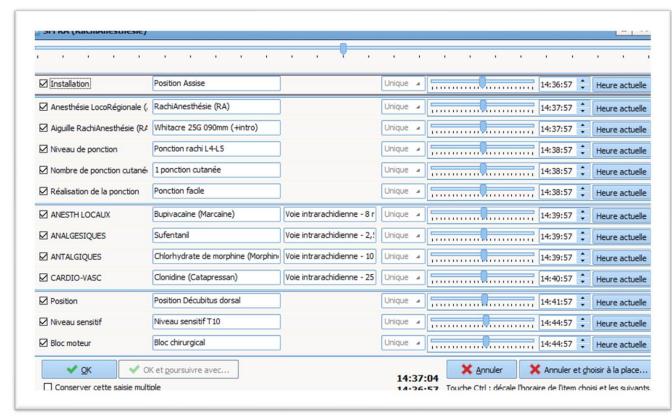
 \checkmark

- ✓ Automatic data collection
- ✓ Continuity of the anaestehsia assessment file between the operating theatre and the recovery room



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- ✓ Quick entry via Diane protocols
- ✓ Rating of modifying

acts

- ✓ Compliance with IPAQSS (certification)
- **V**

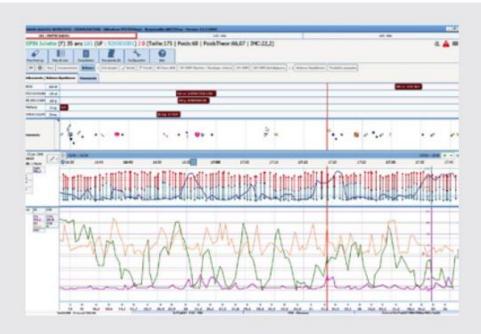


Intuitive

user interface.

We implemented a unique interface to ease the usage of the software by caregivers along the different phases of the patient journey.

Vacancies or occupied beds are displayed graphically and navigation from one bed to another is simple. These features are improving the overall management of the recovery room.





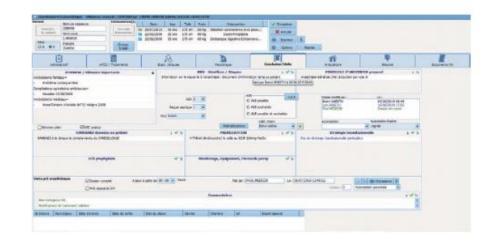
Simplify

administrative tasks.

DIANE ANESTHESIA integrates tools facilitating the patient medical record and the patient Media care.

With a print engine, a quick entry module, or preconfigured favorites tools, DIANE ANESTHESIA ensures easy documentation during the different phases of the medical record, from the first appointment to the exit of the patient.

The print engine automates and accelerates the reports.



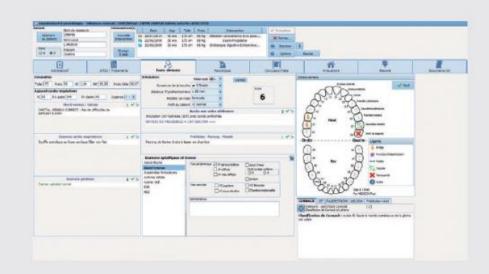




Improve patient care during the perioperative phase.

DIANE ANESTHESIA interfaces to more than 70 different software vendors. including other modules from Bow Medical.

As soon as the anesthesia assessment ends, it is possible to start the patient follow-up process by a simple contextual call from our "AMBUCARE" tracking solution. During all the patient survey period, the data are exchanged daily between the hospital and the patient. AMBUCARE collects all information such as (appointment, prescriptions, reports, care plan).





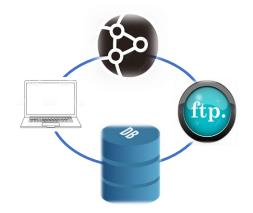












Patient records and setting data are loaded locally

High execution speed (No server request access)

Continuity of operations (in case of lost connection with the server)

Quick installation on servers and customer work station

Compatible database: Oracle / MySQL / MsSQL

Automatic update managed by customer work station

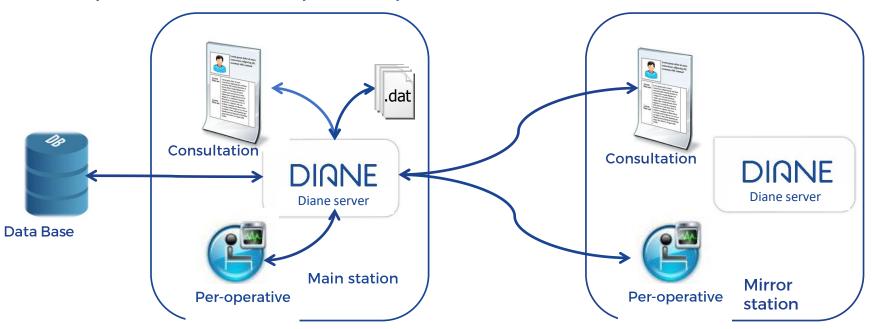




Mirror stations for:

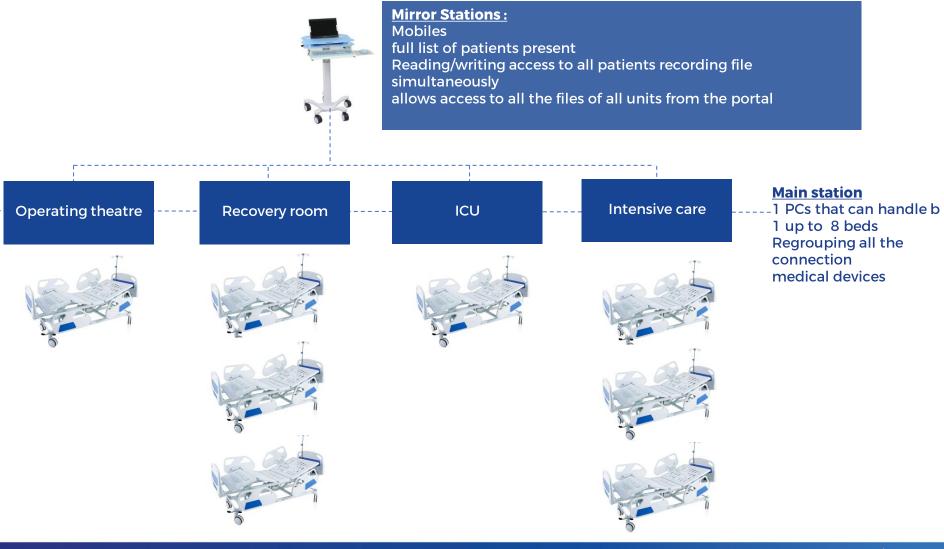
Access to all reading/writing patient recording file of the service From two different locations

- > In real time
- > Via a portal and or via a patients present list







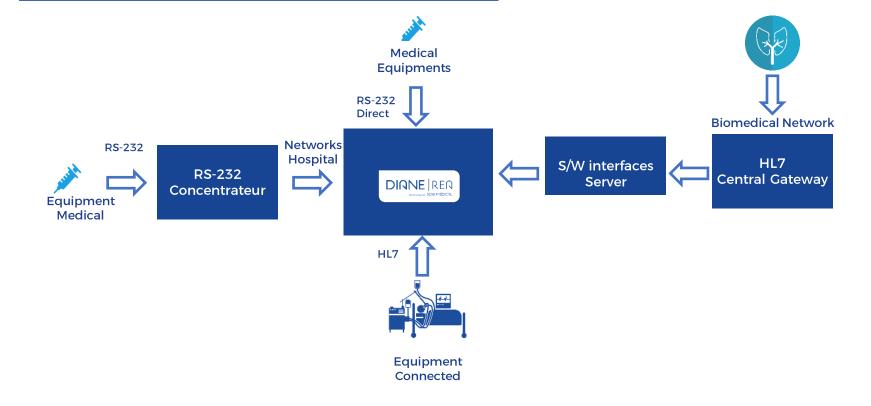




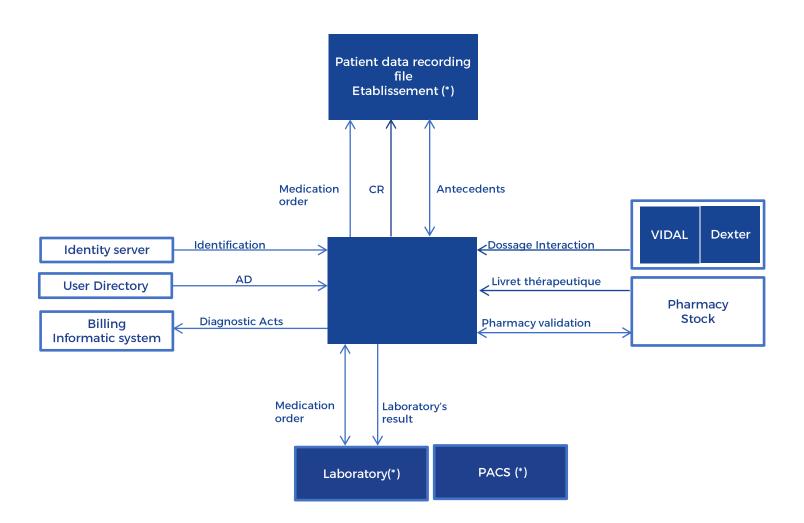
Device connection (410 drivers)

Multiple connection link:

Via RS-232 serial cable Via RS-concentrator Via HL7 direct Via S/W interfaces server











Features	Communications Standard
Identity/ Stay	HL7, IHE PAM, HPRIM, XML, Web service, Proprietary Flat Files
Export reviews and documents	•Word, Pdf, SXW files, with header in HPRIM or HL7 •
Export CCAM, CIM 10	HPRIM-XML, HL7, HPRIM
Operating theatre management	Shared internal base, HL7
Laboratories	HPRIM, Contextual Call Button
Medication Orders	Contextual button, PN13 or codification

Appendix: Computer Interfaces





Connection type	Benefits	Risks
RS-232	Out of network, cheap, easy	Wires, spaghetti syndrome, length, specific.
RS-232 via serial port server	scalable, no need to be next to the device	Expensive, installation and configuration, no network - no data
Ethernet via gateway	Economic if homogeneous, compatible Citrix/TSE.	Uneasy to change, gateway cost. no network - no data,
Ethernet (direct connection)	Cheap, easy to set, independent of network.	Second board, adapted device (rare).

Annexe: Device connection (410 drivers)

