

# Tracheal Acoustic Monitor Customer Discovery Share-Out

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**Background**

**Value Proposition / Beachhead Market**

**Why this population?**

**What does this population need?**

**Development checklist**

# Interview Overview

Stanford

Yale

El Camino

## Anesthesiologist



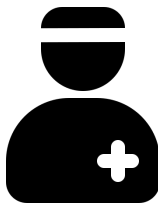
1

1

1

*Administers anesthetics, monitors vitals and interfaces with pre- and post-op care teams*

## PACU Nurse



4

*Monitor patients as they awake from anesthesia, providing care as necessary*

## Administrator



2

*Directs hospital unit and oversees purchasing process*

## Clinical Engineer



1

*Evaluates new clinical technologies and maintains existing ones*

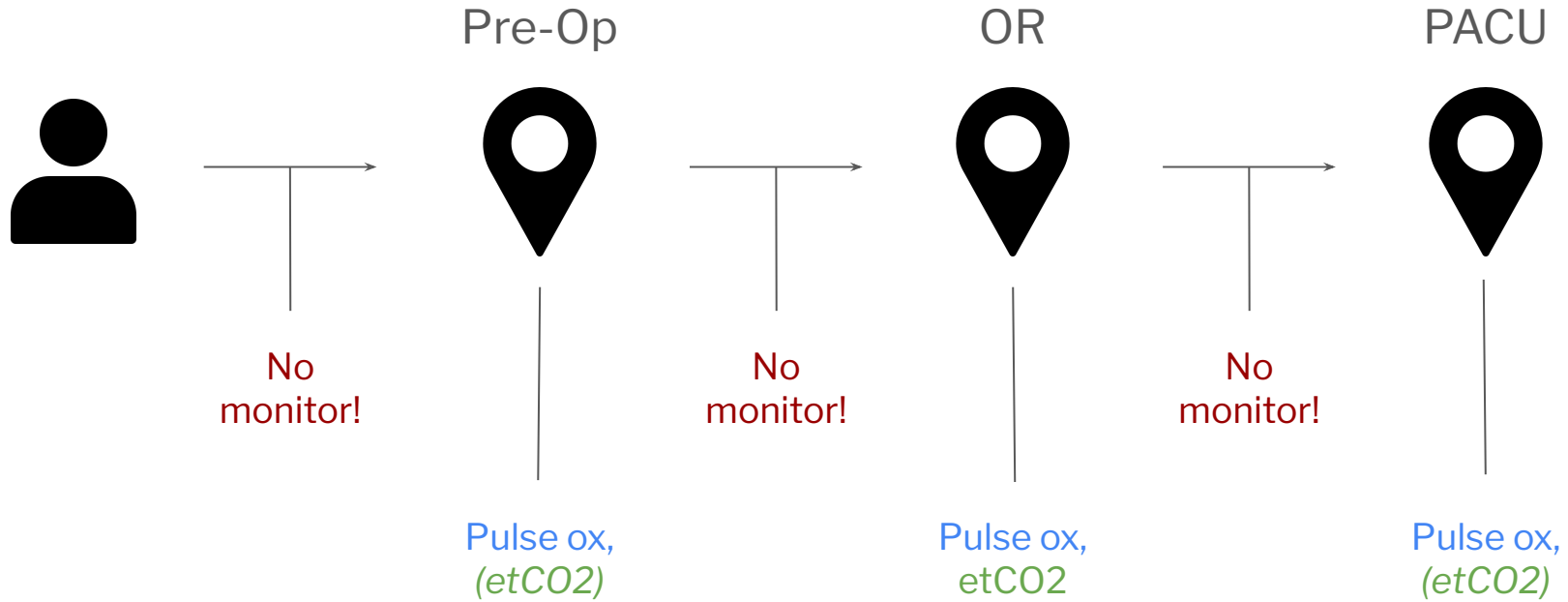
# Purchasing (Stanford)



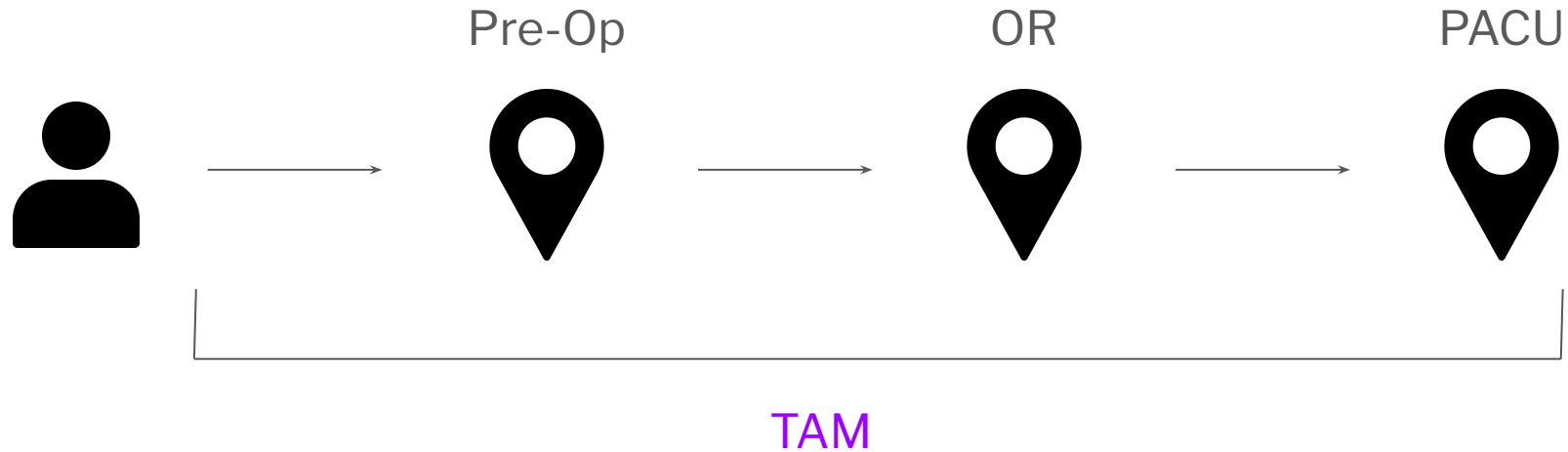
# Beachhead Market: Value Proposition

Our tracheal acoustic monitoring system **helps hospital perioperative medical teams** who want to reduce the number of severe respiratory events among **high risk patients**, and the associated workflow disruptions and increased costs, by **enabling consistent, reliable airway monitoring throughout a patient's stay.**

# Why this population?



# Why this population?



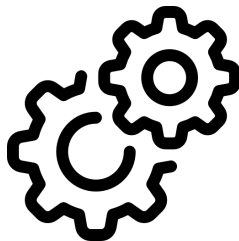
# What does this population need?

## Reliability



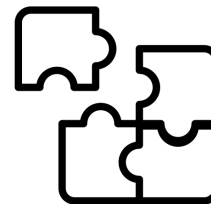
*Meets or exceeds number of  
breaths detected by gold  
standard etCO2*

## Ease of Use



*"If it even adds one minute  
per case, people will not  
accept that friction"*

## Integrability



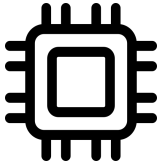
*Easy to integrate into existing  
routines and equipment;  
simple to learn and install*



# Development Checklist



- Simple UI: waveform, summary number, settings
- Quick technical setup resources
- Quick user learning resources (5 minutes max)



- Hospital language 7 compatibility for integration with charting systems
- Robust placement; can be in different neck locations and pick up sound
- Clear, consistent audio signal (noise cancellation / beamforming)
- Cleanable material
- Flexible material



- Study showing that TAM meets or exceeds number of breaths detected by etCO2
- Study showing reduction in provider cognitive load

