StreamDx, Inc.

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Asst. Prof Surgery(Urology/Andrology)
Adjunct Asst. Prof. OBGYN
Medical Director for Fertility Integrated Practice Unit
Co-director Center for Reconstructive Urology & Men’s Health

http://www.streamdx.com
INCIDENCE OF MALE LUTS IN US

• 16.5 MILLION MEN OVER 50

SUFFER FROM

• LOWER URINARY TRACT SYMPTOMS (LUTS)
**STATEMENT OF PROBLEM**

**PRIMARY CARE PHYSICIANS (PCP’s)**

- PCP’s don’t have expensive urine flow meters
- Treatment based on subjective patient input
- Only treat the symptoms not the cause

**UROLOGISTS:**

- Artificial setting
- 50% of clinic tests are noninterpretable
- 2 weeks of wasted clinic time per year
STREAM DX: OUR STORY

- My idea in 2013 born out of clinical frustration
  Bioinnovate seeded with $10k 9/13
- StreamDx incorporated in 10/14: CEO, CTO, engineers
  2/16/15 technology licensed from university
- Raised through TCIP /ENGINE ($65k), SEED Series x2 ($495k), USTAR TAP ($125k), SEED series 3 ongoing
- Selected for funding for NIH Phase II SBIR ($1.5M)
• Engineering interested fostered in fellowship
• 1 failed start-up, 3 founded total, StreamDx most successful

• Male Infertility/Reproductive Urologist funded as PI on NIH NIDDK R01, NSF SSTR, and co-I on 2 other R01s.

• Main research interests are genetics of erectile dysfunction, sperm genetics/epigenetics, microfluidic sperm sorting & male infertility & population health
THE STREAM Dx SOLUTION
AT HOME POINT OF CARE UROFLOWMETRY
STREAMDX TEAM

Scott McClellan
CTO

Alvin Le, MS
Bioengineer

Kent Ogden, BS
Bioengineer

Brian Holt
CEO

BOARDS OF DIRECTORS

- Dr. Dinesh Patel
- Phil Grimm
- Dr. Pat Cartwright, Urologist
- Dr. Jim Hotaling, Urologist
- Dr. Andrew Southwick, Urologist
LICENSE & PATENTS

Exclusive worldwide license from U of U

Non-provisional and provisional patents pending

- US 61995027 filed 3/31/2014
- US 14884591 filed 10/16/2015
- US 62343623 filed 05/31/2016

Issued Patent

- US 7691092
STREAMDX CUSTOMERS

INITIAL TARGET CUSTOMERS:

- 19,200 UROLOGISTS AND GERIATRICIANS

SECONDARY TARGET CUSTOMERS:

- 160,000 PRIMARY CARE PHYSICIANS
# Urologist and PCP Value Proposition

<table>
<thead>
<tr>
<th></th>
<th>Current Uroflow Equipment</th>
<th>Stream Dx Device</th>
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<tbody>
<tr>
<td><strong>Cost</strong></td>
<td>($4,000 to $10,000)</td>
<td>($129/month)</td>
</tr>
<tr>
<td><strong>In-Clinic Revenue</strong></td>
<td>Same</td>
<td>Same</td>
</tr>
<tr>
<td><strong>At home Net Revenue</strong></td>
<td>$0</td>
<td>$4,200/device/year</td>
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<tr>
<td><strong>Wasted Clinic Time</strong></td>
<td>($10,000 to $20,000/year)</td>
<td>$0</td>
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**Additional Benefits:**
- 24 hour voiding diary
- Quickly identify necessary surgical procedures
- Improve patient outcomes
SUMMARY

- This is hard, harder than getting an NIH R01 grant
- Historically, this type of work had not been rewarded in academic medicine, this is changing…maybe?
- Fund raising is the engine that drives start ups
- The idea is far less crucial than the market and the team