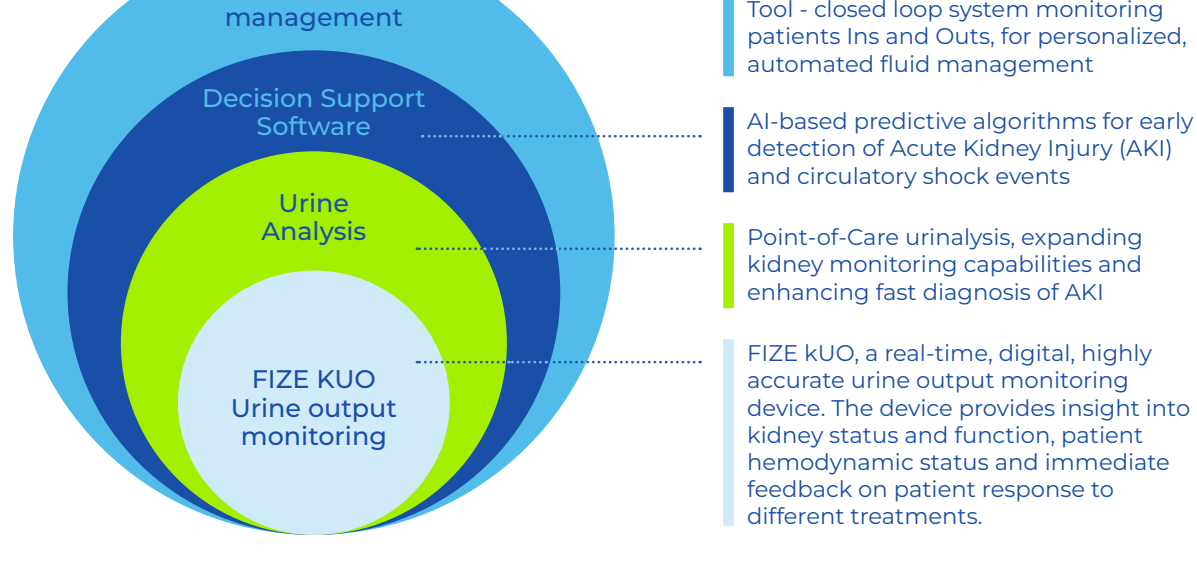


FIZE Medical is ushering in a new era of AI-powered fluid management, for smart, personalized, and proactive critically ill patient treatment.

FIZE Medical is pushing forward the boundaries of critically ill patients' treatment, envisioning a world where no patient loses their life due to preventable complications from hemodynamic mismanagement.

The FIZE Medical Monitoring and Decision Support Platform:



FIZE Medical empowers clinicians with real-time data on patient status, enabling early detection of potential Acute Kidney Injury and shock events, and supporting optimized patient fluid management.



Why fluid management is essential

Hemodynamics and fluid management are crucial aspects of patient care, neglecting them can lead to dire patient complications, including AKI and circulatory shock. While smart technology exists to manage fluid input data, kidney output remains overlooked.

42%

ICU Patients will acquire AKI¹

1 in 3

ICU patients will experience circulatory shock²

20%

Mortality rate of ICU patients due to AKI^{3,4}

38%

Septic shock mortality rate⁵

X10

higher mortality than overall inpatient rate⁶

20%

Hypovolemic shock mortality rate

Our platform not only monitors kidney output but also allows real-time adjustments to fluid input, offering a 360-degree view on patient's hemodynamics status and enabling real-time therapy adjustments for optimized patient outcomes.

Commercially Available FIZE KUO® Digital Kidney Urine Output Monitoring Platform

FIZE Medical's flagship product, the FIZE KUO platform, brings the precision of digital analytics to ensure that the vital metrics associated with kidney urine output are never overlooked. By eliminating manual measurement, FIZE KUO is working to improve clinical outcomes by empowering clinicians with real-time, actionable data at their fingertips. From NICU/PICU to remote ICU services, remote monitoring with FIZE KUO is working to improve patient care while increasing ROI overall.



Real-Time Monitoring

Continuous urine output measurement. Digital real-time insights. Immediate feedback on patient status

Unparalleled Accuracy

Microliter resolution capabilities - essential pediatric and neonatal care.

Interconnected Ecosystem

Integrates seamlessly with patient's Electronic Medical Records

Custom Alert

Custom alerts adapted for personalized patient care

Cost Efficiency

Highly affordable business module, encouraging widespread hospital adoption.

Dedicated Pediatric Mode

Only company compatible for pediatric patients. Custom pediatric operating mode.

Ready for immediate deployment

Compatible with existing treatment practices and approved workflows

Partnerships with



Clinical Approvals & Market Validation

Patents & Approvals

8 approved patents

Regulatory approval

FDA registered and AMAR approved

Market Validation

FIZE KUO product has been validated in top-tier hospitals in both the U.S. and Israel, with initial sales commencing in these regions.

Commercial Achievements

Key Partnerships

Signed contracts with **Vizient** and **Premier**, the largest purchasing organizations in the U.S., and an exclusive contract with **Clalit**, the largest healthcare provider in Israel.

Market Access

Through ASE Direct, a diversity SDVOSB Supplier, we have formal access to the U.S. VA (Department of Veterans Affairs) and DoD (Department of Defense) markets.

Funding

We have successfully raised **\$20 million** to date

Future Product Development

2024

Intra Abdominal Pressure (IAP) measurements, AKI and Shock early prediction algorithm.

2025

Urine Osmolality and Microscopic Hematuria detection, Closed-loop fluid management tool.

Market Opportunity & ROI

Global Market

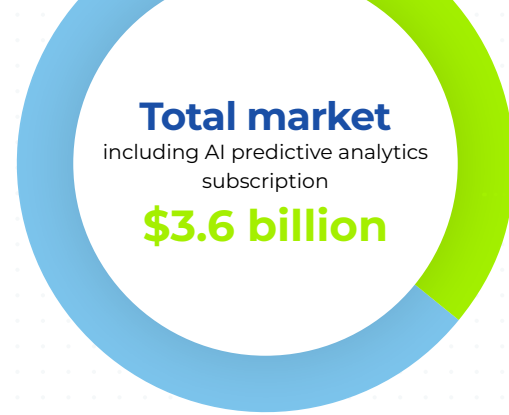
600k relevant beds, estimating a total market size (including subscription) potential of

\$2.3B

U.S. Market

200k relevant beds with a total market (including subscription) potential of

\$1.3B



Cost Savings & ROI

Implementation Cost

FIZE KUO system costs **\$1,941** per year per bed.

Current Manual Costs

Manual monitoring costs hospitals approx **\$17,500** per year per bed.

Net Savings

Potential cost savings amount to **\$15,559** per year per bed.

Leadership



Noam Levine

CTO & Founder

30 years experience in R&D and executive leadership Exists: Redux (acquired by BATM)



Dror Zerem

CEO

20 years of international executive management experience Exists: Ophir Optonics (acquired by Newport), VisionMap (acquired by Rafael)



Sima Faifman Kuchersky

CCO

10 years of medical device management experience



Eran Blankenstein

CFO

15 years financial experience in multinational/ public companies, including Teva, 888.com, Optimal Plus



Hani Rauch

QA and RA Director

Over 15 years of experience in medical device development & manufacturing and 5 years of cumulative experience in RA and QA.



Yuval Kolodny

VP R&D

Multidisciplinary background in electrical/ computer engineering, applied physics PhD, biotech

1 | Hoste EA, Clermont G, Kersten A, et al. RIFLE criteria for acute kidney injury are associated with hospital mortality in critically ill patients: a cohort analysis. Crit Care. 2006;10(3):R73.

2 | Braga D, Barcella M, Herpain A, et al. A longitudinal study highlights shared aspects of the transcriptomic response to cardiogenic and septic shock. Crit Care. 2019;23 414.

3 | Susantitaphong P, Cruz DN, Cerdá J, et al. World incidence of AKI: a meta-analysis. Clin J Am Soc Nephrol. 2013;8(14):1493-13.

4 | Selby NM, Kolhe NV, McIntyre CW, et al. Defining the cause of death in hospitalised patients with acute kidney injury. PLoS One. 2012;7:e46580

5 | Vincent, JL, Jones, G., David, S, et al. Frequency and mortality of septic shock in Europe and North America: a systematic review and meta-analysis. Crit Care 23, 196

6 | Dasta JF, Kane-Gill SL, Durtschi AJ, et al. Costs and outcomes of acute kidney injury (AKI) following cardiac surgery. Nephrol Dial Transplant. 2008;23(6):1970-1974