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“We believe investing today in the leaders, innovators and entrepreneurs of tomorrow is a roadmap to ensuring Utah’s future success.”
Dear Colleagues,

Our students are changing the world.

In what is quickly becoming one of our most popular and impactful student programs, the Bench-to-Bedside (B2B) competition challenges students to the hands-on act of inventing, designing and prototyping medical devices and apps. In this, B2B’s fourth year, the results would have made Thomas Edison proud.

With a toolbox of 6 months, five hundred dollars, a passion for innovation and the mentorship of dedicated faculty, students from multi-disciplinary backgrounds collaborated to transform science and medicine. For the 2014 competition, B2B awarded a total of $71,500 in prize money to our largest field of competitors—189 students, working on 42 teams, presenting 43 inventions. Teams presented real-world devices from collaborations across 23 unique disciplines including medicine, engineering, informatics, business, law, film & media arts, architecture, mathematics, biology, chemistry, computer science and more.

This year student innovations reached far beyond just improving patient care in hospitals via medical devices. We saw awards go out to devices, software and apps that improve global health care delivery, wellness at home, and patient education and engagement. The 2014 competition also featured a new “Media Award” category, awarded by 3 VIP judges from CNN, The Salt Lake Tribune and Deseret News, to an invention called HUVI—a renewable energy device used to sterilize surgical instruments in developing countries. By challenging and supporting our students to “think outside the box,” we are continuing to see remarkable solutions.

We are grateful to Zions Bank for their generous and important support of the competition. We believe investing today in the leaders, innovators and entrepreneurs of tomorrow is a roadmap to ensuring Utah’s future success.

Finally, I want to express thanks to Patrick Loftus and Craig Elder, current medical students, for taking over the program this year. Additionally, faculty mentors John Langell, M.D., Ph.D., assistant professor of surgery and director, Center for Medical Innovation; and Troy D’Ambrosio, Executive Director of the Lassonde Entrepreneur Institute, have supported our students and partnered them with the right mentors to raise the bar even higher.

Our students will transform science and medicine in ways we never thought possible. I’m looking forward to seeing what they come up with at next year’s competition and hope you’ll join me there.

Sincerely,

Vivian S. Lee, M.D., Ph.D., M.B.A.
Senior Vice President for Health Sciences
CEO, University of Utah Health Care
Dean, University of Utah School of Medicine
STUDENT-DRIVEN INNOVATION

John Langell, M.D., Ph.D., M.P.H.
Executive Director, University of Utah Center for Medical Innovation

Bench-to-Bedside is an exciting and vibrant program that introduces medical, engineering, and business students to the fascinating world of medical device innovation. Over the first four years of the program it has grown immensely in both scope and quality. We have now engaged over 600 students into interdisciplinary teams that have spawned 91 innovative new technologies. Additionally, we have seen 21 of these teams move forward to commercialize their creations.

During the seven-month B2B program, student teams form “startup” companies to identify an unmet clinical need and design a technology to address the need. This includes evaluating the intellectual property landscape, prototyping designs and constructing a business plan. Each team is allotted up to $500 to develop their medical device concept. Teams are also granted access to over 100 University of Utah physicians from a range of specialties who serve as consultants, opinion leaders and stakeholders.

B2B culminates in a formal presentation of all team projects at an annual awards competition. The event draws participation from faculty physicians, residents, industry leaders, venture capital firms, local and national media, and the highest echelons of University leadership. Projects are evaluated and scored for business strategy, design quality and health care impact by a panel of judges comprised of leaders in industry, physicians, business experts, engineers, and media. Teams are awarded over $70,000 in prizes to seed further milestone-based project development.

The B2B competition has quickly become one of the University of Utah’s most popular student programs. This year alone, B2B more than doubled in size, with more than 200 students competing, including nearly half of the entire first- and second-year medical school classes. Another addition to 2013-14 was the Industry Mentor Program. Volunteer experts in business and industry donated their time to mentor teams along the way. We look forward to this support in the future.

Since its inception, enthusiasm for B2B has been remarkable. It only continues to grow. The creativity and “out of the box” thinking shown by the teams has resulted in several unique design concepts, some of which are heading toward commercialization. Every year the students continue to impress us, and we always look forward to the next year to see what unique concepts will emerge.

“The B2B competition has quickly become one of the University of Utah’s most popular student programs. This year alone, B2B more than doubled in size, with more than 200 students competing, including nearly half of the entire first- and second-year medical school classes.”

John Langell, M.D., Ph.D., M.P.H.
Executive Director, University of Utah Center for Medical Innovation
Our dear friends, colleagues, and innovation enthusiasts, 2015 marks a momentous year for the 5th annual University of Utah Bench-to-Bedside Medical Device Design Competition. As this year’s competition draws to a close, we stand in awe of the interest, involvement, and support the Bench-to-Bedside program has garnered over the past 5 years. Bench-to-Bedside is a completely optional and entirely extracurricular program designed to introduce students to the exciting world of medical device design. The devices produced this year were a testament to the students’ perseverance, ingenuity, and technical savvy, especially when the tight financial and temporal constraints placed on them are considered. This year saw another wave of fantastic, innovative, and original student projects covering a wide array of the health care industry, with projects ranging from a gastric reflux detection system to surgical cancer tools designed specifically for use in developing countries. All of projects, student success, and educational experiences made possible by the program would not be possible without the tremendous support from the local biotechnology, academic, clinical, and educational communities.

To help further increase recruitment and get students excited about the program, we joined forces with a fantastic group of people working within the Health Sciences Public Affairs department: Aaron Lovell, Luat Nguyen, & Laurie Robison. Together with Aaron, Luat, and Laurie, we produced a 2014 Competition Report, which has shown great anecdotal evidence of increasing participation in this year’s competition. Thank you Aaron, Luat, & Laurie, and all those at public affairs.

Developing a medical device from scratch is a daunting task every step of the way. Accordingly, a constant struggle for Bench-to-Bedside has been helping students succeed in such a tough environment. We have been able to foster relationships and implement tools to help our students complete this tough competition.

First, we established an online system to track team progress via the university’s Instructure CANVAS. Team contact and submission have moved substantially smoother. Thank you to Jean Shipman, Tallie Casucci, and the Eccles Health Sciences Library Innovation Team for making this system possible.

Second, through the Center for Medical Innovation each team has been paired with an industry mentor. These mentors have served as advisors, community resources, and positive influences on our teams. To our mentors: We have learned a tremendous amount from you this year.

From its inception, Bench-to-Bedside has been designed as a student run program, and this year was no different. We leaned heavily on a committee of student leaders to recruit students from all corners of the University. These leaders were also responsible for helping teach the participants about relevant topics from their specific programs of study. We would like to extend a special ‘Thank You’ to the following committee members for all of their hard work this year. This program would not exist without them:
Thank you for your willingness to participate and your patience in developing the innovators of tomorrow. We hope you will continue to join us for years to come.

Third, working with Troy D’Ambrosio and the Lassonde Entrepreneur Institute we have redefined the business components of Bench-to-Beside to better allow teams to flow into the Utah Entrepreneur Series. We sincerely hope teams will take advantage of this opportunity. Thank you to Troy D’Ambrosio for his kindness and support this year.

Finally, the Center for Medical Innovation brought on two Law Fellows – who are students at the S.J. Quinney College of Law – to help teams develop claims and analyze the intellectual property space surrounding them. Thank you to Michelle Kevern and Austen Paulsen for increasing the quality of our provisional patents and focusing teams on long lasting utility and design patents. To our teams, please continue to use the Law Fellows in the future to develop your ideas. There won’t be a better resource so easily available.

To our dear friends, classmates and participating students, we would like to conclude by saying, there isn’t a better time than now or a better place than here – at the University of Utah – to make the future awesome. There is no comparable infrastructure of outstanding faculty, resources, and mentors. If you will continue to develop your products far into the future, we can promise that you will look back on this time with fondness and gratitude.

And finally, to all those who have made this competition possible, through donations of your time, money, talent and resources – thank you. To our sponsor, Zion’s Bank and Scott Anderson – thank you. To the Center for Medical Innovation and it’s wonderful employees, in particular Megan McIntyre, Thank You! Megan is the real heartbeat of this program, and without her there would be no life in it. Thank you to John Langell for his patience and outstanding leadership. Without him, the great leaps Bench-to-Bedside made this past year would not be possible. To Vivian Lee, our engineering team, and all of our faculty, judges, and mentors, we cannot thank you enough for making this program possible. We hope we can all continue to support each other as we strive to make the future awesome.

Ashley Langell, Bench-to-Bedside Student Co-President
Gregory Gardner, Bench-to-Bedside Student Co-President
# B2B DEMOGRAPHICS

## B2B Competition Results by Year

<table>
<thead>
<tr>
<th></th>
<th>2011</th>
<th>2012</th>
<th>2013</th>
<th>2014</th>
</tr>
</thead>
<tbody>
<tr>
<td>Total Participants</td>
<td>76</td>
<td>57</td>
<td>74</td>
<td>189</td>
</tr>
<tr>
<td>Medical Student Participants</td>
<td>32</td>
<td>23</td>
<td>36</td>
<td>53</td>
</tr>
<tr>
<td>Teams</td>
<td>13</td>
<td>14</td>
<td>18</td>
<td>42</td>
</tr>
<tr>
<td>Devices Developed</td>
<td>14</td>
<td>14</td>
<td>20</td>
<td>43</td>
</tr>
<tr>
<td>Provisional Patents Filed</td>
<td>12</td>
<td>13</td>
<td>14</td>
<td>16</td>
</tr>
<tr>
<td>Utility Patents Filed</td>
<td>1</td>
<td>4</td>
<td>5</td>
<td>5</td>
</tr>
<tr>
<td>LLCs Formed</td>
<td>1</td>
<td>4</td>
<td>7</td>
<td>12</td>
</tr>
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</table>

## 2015 B2B Student Breakdown

<table>
<thead>
<tr>
<th>Program</th>
<th>Participants</th>
</tr>
</thead>
<tbody>
<tr>
<td>Bioengineering</td>
<td>25</td>
</tr>
<tr>
<td>Bioinnovate</td>
<td>6</td>
</tr>
<tr>
<td>Biomedical Informatics</td>
<td>5</td>
</tr>
<tr>
<td>Business</td>
<td>9</td>
</tr>
<tr>
<td>Computer Science</td>
<td>1</td>
</tr>
<tr>
<td>EAE</td>
<td>6</td>
</tr>
<tr>
<td>Electrical Engineering</td>
<td>6</td>
</tr>
<tr>
<td>MD</td>
<td>8</td>
</tr>
<tr>
<td>Mechanical Engineering</td>
<td>20</td>
</tr>
<tr>
<td>Medicine</td>
<td>27</td>
</tr>
<tr>
<td>Public Health</td>
<td>3</td>
</tr>
<tr>
<td><strong>TOTAL</strong></td>
<td><strong>116</strong></td>
</tr>
</tbody>
</table>
## 2014-15 B2B TEAM SUMMARIES

<table>
<thead>
<tr>
<th>Team Name</th>
<th>Team Name</th>
</tr>
</thead>
<tbody>
<tr>
<td>1. AlarmWorks</td>
<td>14. mDOT</td>
</tr>
<tr>
<td>2. Beginning Braille Training Device</td>
<td>15. PandaCalc</td>
</tr>
<tr>
<td>3. Bite-Safe (Endotracheal Bite-block)</td>
<td>16. Precision Cautery</td>
</tr>
<tr>
<td>5. capnoGO</td>
<td>18. Rag-tag-baginator</td>
</tr>
<tr>
<td>6. CDX</td>
<td>19. Resistive Flex Sensors</td>
</tr>
<tr>
<td>7. Chief Complaint</td>
<td>20. Step Pets</td>
</tr>
<tr>
<td>8. Cinluma</td>
<td>21. Wheelchair Transfer System</td>
</tr>
<tr>
<td>10. Easy Arm</td>
<td>23. wReach</td>
</tr>
<tr>
<td>11. Epi-ject</td>
<td></td>
</tr>
<tr>
<td>12. GoPro Medical</td>
<td></td>
</tr>
<tr>
<td>13. Improved Axial Crutch</td>
<td></td>
</tr>
</tbody>
</table>

(Note: Team summaries were written and submitted by members of each B2B team. The teams themselves are responsible for the material claims therein. They have been edited for readability.)
**AlarmWerks**

**Problem:** Hospital noise is among the most common patient complaints. The cacophony of medical alarms that make up much of that noise can result in alarm fatigue—delayed response by health care teams.

**Solution:** AlarmWorks proposes a solution that combines physical and electronic noise cancellation and rebroadcasts the alarm away from the patient while still notifying medical staff. It is compatible with the Alaris IV pump, one of the most commonly used devices in hospitals.

**Team Members:**
John Michael Sanchez
John Platt

---

**Beginning Braille Training Device**

**Problem:** There are currently not enough teachers and resources to sufficiently supply the needs for visually impaired students. Available teaching products currently on the market are expensive and require a sighted person to facilitate learning.

**Solution:** The Beginning Braille Training Device is a handheld, portable solution that enables a person with impaired vision to learn how to read braille independently. With speech recognition, audio feedback, a refreshable braille screen, and basic learning modules, our device does not require the assistance of a sighted person.

**Team Members:**
Andrew Silotti
Jason Castillo
Kelton Gubler

Adam Daly
Austin Eastman
Kay Freckleton
Bite-Safe (Endotracheal Bite-block) #14

**Problem:** External bite-blocks are currently the only professional solution for protecting endotracheal tubes from uncontrolled teeth clenching after surgery. Because usage of this separate device involves an extra step, it is only rarely used in practice. This results in occasional complications due to patients biting on their tubes.

**Solution:** Bite-Safe proposes integrating a bite-block with endotracheal tubes, eliminating an extra step and offering reliable protection for patients. Our solutions include a gel based bite block that is integrated onto the endotracheal tube, adjustable integrated endotracheal bite block, stabilizing gel base endotracheal tube, and an inflatable integrated endotracheal bite block.

**Team Members:**
Jeffrey Lei
Rinchen Phunsok
Miriam Jaziri
Kristin Sandoval
Jacob Whittle

$5,000 - Best Green Medicine Award

Bolus “EYE” #8

**Problem:** Current methods for detecting gastro-esophageal reflux frequency in pediatric patients are invasive and expensive, typically requiring an overnight hospital stay.

**Solution:** The Bolus “EYE” is a non-invasive reflux frequency detection system that can be administered in the comfort of the patient’s home.

**Team Members:**
Josh Jones
Tim Pickett
Rudy Wilcox
Sam Thomas

$10,000 - Runners-up

$5,000 - Best EAE Award
**Problem:** Surgery with anesthesia has been a neglected focus in global health. A lack of usable and reliable technology is partly to blame. Anesthesiologists in low resource settings often lack access to capnography to monitor patients’ carbon monoxide output, relying instead on direct observation, which is less reliable and less safe.

**Solution:** capnoGO is a small and affordable capnography device intended for use by doctors in low-resource areas. The battery-operated device displays patient carbon dioxide levels during inspiration and expiration while under anesthesia. capnoGO enable health care teams to provide better care for patients in a variety of environments.

Team Members:
Kit Osborn
Mazir M. Nourian
Ahrash Poursaid

---

**Problem:** *C. difficile* bacteria infects 250,000 and kills 14,000 people each year. It also creates over $1B in health care costs per year. In spite of existing hand washing protocol efforts, transmission continues between providers and patients.

**Solution:** CDX safely prevents *C. difficile* spread by quickly identifying it on a variety of surfaces. The device is an inexpensive, portable, and compact digital scanner that detects antigen florescent binding bacteria. Detection takes less than one minute with at least 95% accuracy.

Team Members:
Sam Judd
Bryant Parker
Jake Nobis
R. Christopher Bowen

---

$5,000 - Best Business
Chief Complaint

**Problem:** In medical education the abrupt change from didactic instruction to clinical application presents a steep learning curve. It is very difficult for students to consider a broad range of possible diagnoses during the initial stages of training. Converting classroom learning into clinical questions for patients is also difficult.

**Solution:** Chief Complaint proposes an app that will help any training health care provider ask the right clinical questions in order to perform a thorough history and physical for each patient. Asking the right questions is the first step in the journey towards diagnosing and treating illness.

**Team Members:**
- Monica Schwarz
- George Josten
- Shawn Liechty
- Chesy Nichols
- Katharine Marsh
- Ryan Kirshman

$15,000 - Grand Prize

---

Cinluma

**Problem:** Cervical cancer is the leading cause of cancer-related deaths among women in developing countries, but currently there are no treatment options with practical application in these settings.

**Solution:** Cinluma has created a portable, thermal coagulation device that utilizes a heated probe to destroy pre-cancerous lesions before they can progress to cervical cancer. This method has proven efficacy, takes less than a minute to administer, and is specifically designed for use in resource-limited settings.

**Team Members:**
- Kris Loken
- Timothy Pickett
- Brian Charlesworth
- Jennwood Chen
- Evan Howard
- Ashley Langell
- Ashley Trane

$15,000 - Grand Prize
Cruiser Crutch

**Problem:** Axial crutches put pressure on the underarm, causing irritation and soreness, which reduces mobility. In extreme cases, this pressure can damage the brachial plexus and result in crutch paralysis.

**Solution:** Cruiser Crutch uses the science behind prosthetic leg blades to offer a simple new crutch foot design. The design is an optional attachment for the current axial design and decreases the landing pressure of each footstep, providing a more comfortable crutch experience.

**Team Members:**
- Michael Blatt
- Justine Goebel
- Spencer Nielson
- Rebecca Powell

![Cruiser Crutch Image]

$5,000 - Consumers Choice Award

Dermatome

**Problem:** Current electric dermatomes are expensive and require special cleaning equipment. This especially presents problems in remote or otherwise underserved areas, effectively limiting the number of locations where skin grafts can be performed.

**Solution:** Our solution is a disposable dermatome head that can be mounted to a battery-powered saw. This solution will decrease the costs of electric dermatome while allowing physicians in underserved areas to perform this procedure with reduced concerns over sanitation.

**Team Members:**
- Myron Lance
- Ian Becker
- Kellen Hilton

![Dermatome Image]
**Easy Arm**

**Problem:** Patients in a supine position during a CT scan must either hold their arms to their sides, compromising imaging quality, or hold them above their heads for prolonged periods of time, causing fatigue and possible injury.

**Solution:** Easy Arm provides a comfortable place for patients to rest their arms above their heads and minimizing injury risk. The device is made from molded foam and can be integrated into any CT room. Available in three sizes, Easy Arm is inexpensive to produce, lightweight, and easy to clean and store.

**Team Members:**
- Niki Davis
- Tim Michaelis
- Michael Price
- Holden Brown
- Talmage Barth

**$5,000 - Best Green Award**

**Epi-ject**

**Problem:** Epidural steroid injections (ESI) used to temporarily relieve back and leg pain pose risk of puncturing structures within the epidural space. Such punctures can lead to serious patient complications.

**Solution:** Epi-ject offers a new Tuohy needle with a built-in catheter that makes ESI safer to perform and less prone to accidental punctures. The device's built-in spring mechanism launches a drug-delivering catheter that locates the epidural space via the loss of resistance. This reduces the risk of piercing the network of blood vessels, Dura mater, and spinal chord within the space.

**Team Members:**
- Kapil Sharma
- Jamil Hawatmeh
- Tisi Tuifu
- Arjun Dulal
- Snehal Gajiwala

**#6**
**Excisoseal**

**Problem:** If laparoscopic power morcellation is performed in women with unsuspected uterine sarcoma, there is risk that the procedure will spread cancerous tissue within the abdomen and pelvis. A method is needed to surgically remove the uterus in a minimally invasive and efficient way that reduces the risk of disseminating cancerous uterine tissue.

**Solution:** Excisoseal proposes a device to reduce the risk of spreading cancerous tissue during morcellation.

**Team Members:**  
Samuel Thomas  
Ben Fogg  
Joseph Fogg

---

**Gliding Wheelchair Transfer System**

**Problem:** People who assist in wheelchair transfers often experience back and shoulder strain. A lightweight, compact, and portable device to facilitate patient transfers to and from wheelchairs is needed.

**Solution:** The Wheelchair Transfer System is an improvement on the widely used transfer board system. With improved stability and better support, the new system will reduce injuries and strain.

**Team Members:**  
Nathan McDonald  
Stephanie Hunter  
Matthew Pell  
Marsha Barker  
Kelbie Ockey  
Michael Pell  
Cameron Robinson

---

$5,000 - Best Medicine
GoPro Medical

**Problem:** Many separate medical devices can be used to record and view care. Because of their expense, however, having them available for humanitarian health care in developing areas is impractical.

**Solution:** We propose combining existing technology with the development of specialized accessories for use in health care settings. Our solution is a single high-quality, low-cost, durable camera with several adaptors for different medical applications.

**Team Members:**
Quinn Tate
Brett Boot

---

mDOT

**Problem:** In 2013 there were 9 million new cases of tuberculosis (TB) and 1.5 million deaths due to TB complications. TB medication noncompliance is a major driver of treatment failure and worldwide health care costs.

**Solution:** Mobile Directly Observed Therapy (mDOT) is an off-the-shelf solution linking mobile health and automated pharmacy technologies to combat medication noncompliance. The solution employs a phone’s video capabilities along with a health control center for therapy observation and coordination. A pillbox or automated pharmacy will facilitate scheduled treatment.

**Team Members:**
Samuel Thomas
Alvin Lee
Jon Poulsen
Ben Poulsen

$10,000 - Runners-up
Problem: Ordering parenteral nutrition (PN) is complicated and time-consuming. Incorrectly done, it can result in serious harm or death. Few PN programs interface with the automated compounding pump and interact directly with the electronic health record (HER).

Solution: PandaCalc (PArrenteral Nutrition Decision Assistance Calculator) analyzes and displays information from EHRs to assist authoring/ordering of PN recipes. The solution is compliant with multiple commonly used health IT standards.

Team Members:
Jianlin Shi
Scott Nelson
Bob Angell
Mohammad Amin Morid
Alex Macharia
Valliammai Chidambaram

Problem: Bleeding during sinus surgery is difficult to control with current tools. They lead to delays in surgeries and can lead to costly complications.

Solution: Precision Cautery will offer a small, flexible device that delivers bipolar cautery to stop bleeding in hard-to-reach areas. This solution will also feature a malleable tip with a non-stick coating.

Team Members:
Scott Anjewierden
Dane Barton
Nathan Knighton
James Newton
Sam Thomas

$5,000 - Best Engineering
Self-Health Labs

**Problem:** The high expense and complicated processes of the current lab testing system prevents the average patient from taking advantage of its offerings. The current system is time-consuming and lacks transparency.

**Solution:** Self-Health Labs proposes a direct-to-consumer lab model offering complete transparency, timesavings, and low cost. Our model provides the user with an online interface with which to order and receive lab results, with the option to then pursue medical professional consultation.

**Team Members:**
Brian Hanson

---

Sign Glove

**Problem:** Current Cyberglove technology is expensive. It employs resistive flex sensors that are easily damaged and have high spring tension.

**Solution:** We propose an unobtrusive glove that will gather raw data from a patient’s hand that can be used to generate text, allowing speech-impaired patients to communicate by text and helping providers evaluate nerve and muscle damage. Our solution replaces existing technology with a more affordable unit that uses a more durable, flexible, and friendly sensor.

**Team Members:**
Logan J. Remillard
Andrew Thulein
Alex Ferro
Step Pets

Problem: Americans walk only 5,100 steps per day, on average. To improve health, a person should walk at least 10,000. Existing programs designed to help people walk more emphasize outcomes over behavior.

Solution: Step Pets is a game that rewards people as they “do more,” incentivizing healthy behavior. To play, users walk to accumulate steps and “treats” that can be converted into pets and accessories.

Team Members:
Tim Cooley
Binoy Mohanti
Topher Naudald

$500 - Media Award

Work Pumps

Problem: Though exclusive breastfeeding is recommended through the first six months of life, less than 20% of US mothers are meeting this standard. Some of this is due to lack of time and the hassle of bulky pumps.

Solution: Our solution is a breast shield/tubing that allows true hands-free pumping to be done beneath normal clothing. The shields are made with silicone and are discretely held in place by a nursing bra and do not protrude significantly beyond the nipple. A woman could theoretically keep the shields in place throughout the majority of the day and simply remove or insert the tubing as needed for pumping.

Team Members:
Andy Phillips
Eugene Huo
Booth Aldred
RJ Willmore
Quinn Garner
Chris Duncan

$5,000 - Global Health Award

$2,000 - LITE Award
Problem: Many stroke and MS patients struggle to maintain motivation to continue physical therapy.

Solution: wReach offers a wearable device that uses gamification and a social media component to engage patients and help them interact with others.

Team Members:
Zakary Wilde
Stuart Jardine
Monna Geng
Thomas Jenkins
Blake Harrison
Competition Night

April 8, 2015

Held at the Utah State Capitol Rotunda, the 2014-2015 Bench-to-Bedside Competition Night was attended by a host of university, community and business leaders and innovation stakeholders.
A B2B SUCCESS STORY

In its short, four-year history, Bench-to-Bedside has spawned a number of great concepts that have gone on to further development. The following is an example of how B2B is succeeding.

For more information visit them at www.WEBSITETK.com

*Other team members include: Vivessa Ompicaude, Commovi Ssiliissum, Resim Se Abutus, Pravoltus Vatisse, Esignatra Vives, and Horos Achilicaes (not pictured).
THANK YOU!

Sponsors

ZIONS BANK

FIRETOSS LABS

CHURCH & STATE

BATEMAN IP

MENTORS

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Matt Bills
Danny Blanchard
Randall Block
Lane Brooks
Steven Burdorf
Jon Burkholz
Greg Critchfield
Bryan Davis
Matt Draper
Thomas Eastwood
Flagg Flanagan
Shawn Fojtik
Pete Frickland
Craig Gawreluk
David Goldsmith
Myles Greenberg
LeVoy Haight
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GET INVOLVED AS A SPONSOR OR MENTOR

We welcome community participation. If you or your organization would like to get involved, please let us know.

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Executive Director, Center for Medical Innovation, Faculty Sponsor of Bench-to-Bedside  
john.langell@hsc.utah.edu, (801) 587-3221

Jeremy Snow  
Director, Health Sciences Development  
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