

Berall Video Laryngoscope - Investors Welcome

www.IntubationVL.com

PATENTED MEDICAL DEVICE:

FDA Class I: Goes right to market.

The VIDEO Laryngoscope (Larynx-scope).

Used in a procedure called, "INTUBATION":

Placing a Breathing Tube into the Windpipe to give OXYGEN under pressure when a person is NOT BREATHING: TO PREVENT DEATH.

Used in Breathing Emergencies and in General Anesthesia Surgery.

The STANDARD laryngoscope is now used for intubation;

1) In Emergency Situations:

100% of EMS / ER / Intensive Care Unit / Hospital Ward / Military intubations AND

2) In 98% of All General Anesthesia Surgery intubations:

Intubations in the U.S.:

>> **85,000 times / day and**

>> **30 million times / year.**

More than double that number worldwide.

Estimated U.S. Market:

\$2.5 Billion in 15 years.

\$400 million during the life

of the patent (U.S. 5,827,178).

Estimated Sales to date:

\$80 - 90 million.

The MARKET: Hot.

2006: U.S. Market Opens; Four major manufacturers come to market.

2006: Verthon buys Saturn Biomedical to get the Glidescope video laryngoscope for **\$10 million.**

2009: Roper buys Verathon to get the Glidescope video laryngoscope for **\$300 million.**

Average price / unit:

5 years ago: \$14 - 20,000.

Now: \$10 - 15,000.

2011: U.S. Air Force buys 175 units.

2011: The Mayo Clinic buys 50 units.

The largest single purchases to date by a factor of seven. These purchases will dramatically drive the military and non-military markets in the **immediate future.**

Advances in Surgical Technology and the Baby Boomers coming into the ages when the **Majority of Surgery and Emergency Intubations** are performed essentially **guarantees that the market will continue to expand dramatically.**

The PATENT: Strong.

Infringement litigation was started in Federal Court, Southern District, lower Manhattan on August 4, 2010 against five companies.

(Google search, "Berall v Verathon et al.").

Four of the five defendant-companies had offered unrealistically small pre-trial settlement agreements. One manufacturer secured a substantial settlement.

The VIDEO Modification of the Standard Laryngoscope: **Dramatically Improves the Success, Speed and Safety of the Intubation Procedure.**

The VIDEO laryngoscope has been accepted at the highest levels of academic and general medical practice and the Market as the Best Intubation Device for the Present and the Future.

In the Operating Room / General Anesthesia Surgery Intubation is necessary because the **patients have been paralyzed** and are **not able to breath on their own.** Respirations have been stopped by the Anesthesiologist. **Settlements for failed Operating Room intubations run into the \$ millions.**

Hospitals want to / must minimize such losses: will continue to purchase the VIDEO laryngoscope.

WHY IMPORTANT:

If no oxygen is reaching the lungs:

After 3 minutes: heart cell damage and heart rhythm changes (Bad) and brain cell damage, due to decreased oxygen in the blood reaching the cells.

After 4 minutes: Heart Attacks / Cardiac Arrests and Clinically Evident Strokes begin.

After 5 minutes: the above are expected

After 6 minutes: the above are sure to happen.

IntubationVL is looking for INVESTORS and Manufacturers to help to bring the Best Rendition of this important medical device to market.

With the Protection of the Patent.

The VIDEO laryngoscope is an FDA Class I medical device:

The product can **go directly to market** and the FDA will inspect the factory in 6-9 months. **NO FDA Red Tape.**

INVESTORS and Manufacturers Dream Medical Device:

1) FDA Class I Medical Device

2) A Wealthy, Eager and Rapidly-Expanding Market and

3) Patent Protection.

FOR MORE INFORMATION CONTACT:

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