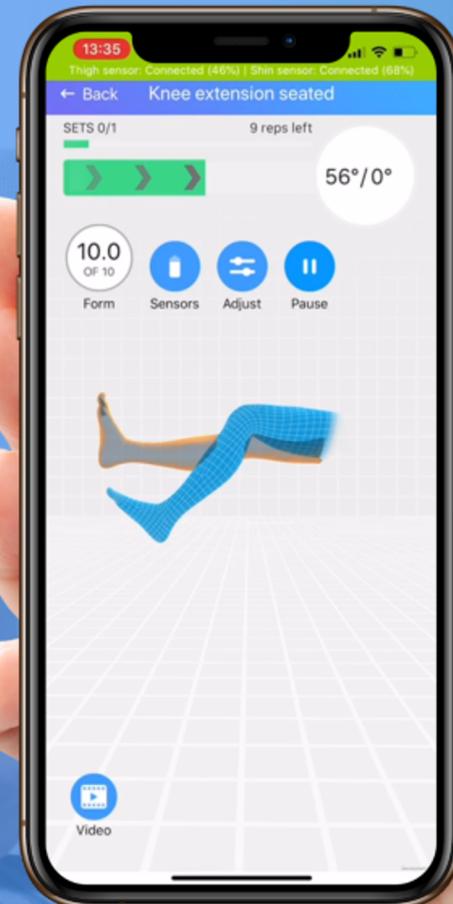


THE FUTURE OF REHABILITATION
IS DIGITAL!

 **re.flex** **DENTON**
recovery made simple PHYSIO TECHNOLOGY



Our story



Richard suffered a ruptured ACL injury whilst playing sports and required full reconstructive surgery.



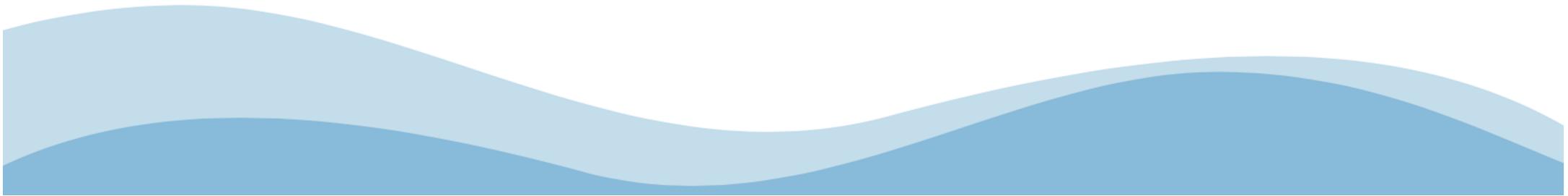
Due to long NHS waiting times and expensive private alternatives, he flew to Romania for treatment.



After successful surgery, he was given the re.flex sensors which allowed him to rehabilitate remotely.



Carys, Richard's sister, is a 14 year experienced physio who saw an opportunity to bring this to the UK market.



DPT Team



CARYS HANSEID

SPECIALIST PHYSIO LEAD

Carys is a senior Chartered Physiotherapist who has worked in both public (NHS) and private sectors. Her specialist areas are MSK and Orthopaedics with particular interests in sports and overuse injuries and biomechanics.



JOSH LEWIS

COO

Josh is a 1st Class Bristol University graduate in International Business Management. Internship experience have included experience in RPA and Competitor Analysis.



ALASDAIR DENTON

CFO

Alasdair is an experienced Chartered Accountant, qualifying with PWC and worked for EY. His focus has been on small business accounting and in particular software enablement. Alasdair acted as first Chief Executive of Finance Wales Plc.



ANDREAS ROBINSON

PHYSIOTHERAPIST

Chartered physiotherapist and recent graduate from the University of Winchester. Ex-professional footballer of 4 years, now playing semi-professionally within the National League for Weymouth FC.

Re.flex Team



CAMIL MOLDOVEANU

CEO & CO-FOUNDER

10 years' experience as an entrepreneur.
Founded a tech outsourcing company.
World and European champion in Jiu Jitsu.



ANDREI KLUGER

CTO & CO-FOUNDER

Hardware and software engineer who
developed sensor monitoring
networks and bomb detection robots
for the army and government.



DR. TOBIAS WINKLER

MEDICAL ADVISOR

Principal Investigator and Senior
Surgeon, Head of Musculoskeletal
Cell Therapy at Charité, one of the
largest university hospitals in Europe.

Reimagining Physiotherapy...



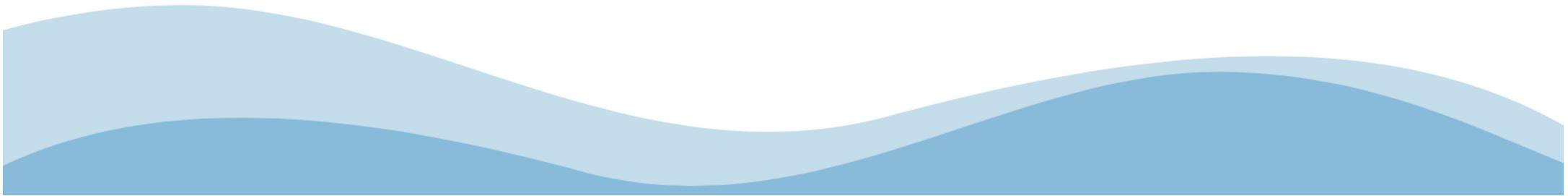
REMOTE



DIGITAL



PHYSIOTHERAPY



Our solution can transform care pathways for your patients

The re.flex system can help patients in a variety of different ways:

- Preventative management: Knee Osteoarthritis, Hip Osteoarthritis & soft tissue injury rehabilitation.
- Pre-operatively: Total hip replacement, total knee replacement, ACL reconstruction.
- Post-operatively: Total hip replacement, total knee replacement, ACL reconstruction.

Prevention

Pre-op

Post-op



2-weeks post soft tissue knee injury



4-weeks post hip replacement



12-weeks post ACL reconstruction

Meet Colin

Colin

Colin has advanced stage hip osteoarthritis and is awaiting a total hip replacement with the NHS.



Limited
access due
to COVID

Pain affected
his mental
health

Preventing
from leading
an active life

Over the course of Colin's injury he faced:

18
Months in
pain

£10k
Lost work
opportunities

2
year quoted
waiting time

How do you treat patients preoperatively, like Colin?

Colin

Current pre-operative rehabilitation patients have:

- 1 pre op assessment clinic prior to admission or on admission.
- Prescribed with exercises to complete as part of pre op information leaflet
- Education 10 -15 minutes about the condition to manage the pain.
- Sessions may be in the form of a class or on the escape pain program, depending on location.

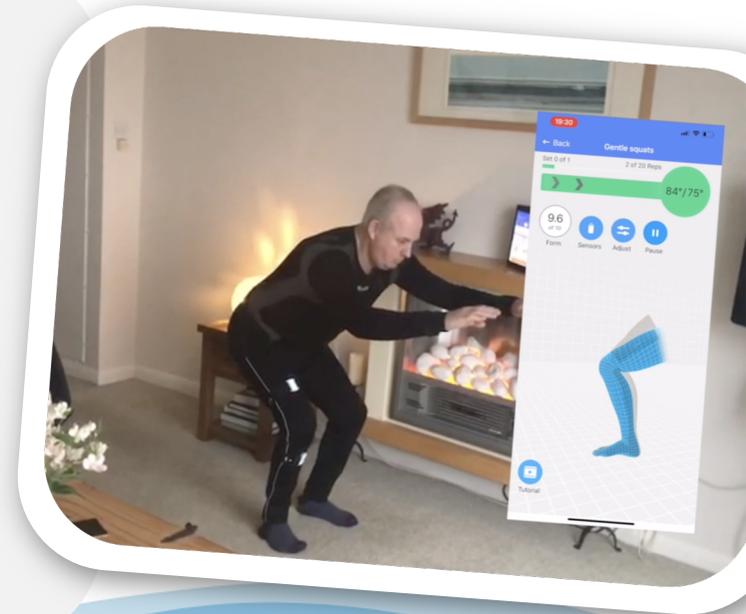
Can we do more for these patients?

Through technology we can make rehabilitation more efficient

Colin

There are many inefficiencies within the current rehabilitation model:

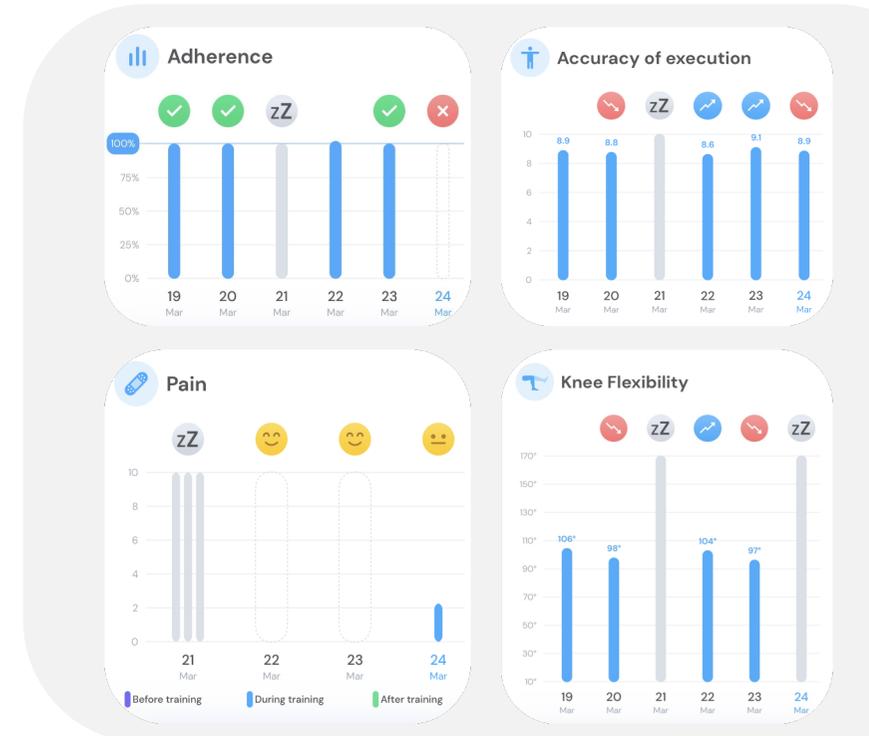
- Lack of contact with a medical professional prior to admission.
- Exercises are standardised from a leaflet, not specific to patients current level of functionality.
- Unable to emphasise importance of pre-operative rehabilitation due to lack of contact with specialists.
- Ward based pre-assessment are only 15 minutes long where minimal information is given.
- Patients see surgery as a solution so likely to neglect pre-operative exercises without motivation from a medical professional.
- Exercises program adherence and pain levels are not measurable.



Consider tech solutions for patients

A remote monitoring system can help patients experiencing issues such as:

- Time restricted due to busy work, family, life schedules.
- Lack of understanding of what needs to be done to be able to recover and return to normal/ improved functionality.
- Unable to access treatment due to remote location or having such mobility loss that they cannot attend appointments.
- Low motivation and adherence to traditional methods of physio.
- No awareness or education about the importance of proactive intervention to prevent future injuries/ complications.



Introduce your patients to the power of re.flex

Your patients may struggle to understand how important their physiotherapy is in their recovery journey.

A wearable device like re.flex encourages patients to take accountability in their recovery program as it provides support and guidance throughout the whole program, real time interaction with the physiotherapist and instant feedback on how they are performing. The device measures range of movement (within 4% of Gold vicon standard), exercise form, pain scales and adherence.

Transparency and communication between clinicians and patients is key for intervention and achieving improved outcomes.

DENTON re.flex
PHYSIO TECHNOLOGY recovery made simple



Are you providing your patients with the best recovery technology?

WATCH NOW

re.flex 3D motion sensors: Digital. Remote. Physiotherapy

Re.flex helps empower patients in their recovery process and allows you as a clinician to remotely monitor their progress, making use of real time data. This digital solution allows us to prevent and intervention rather than react to patients progress.

30%

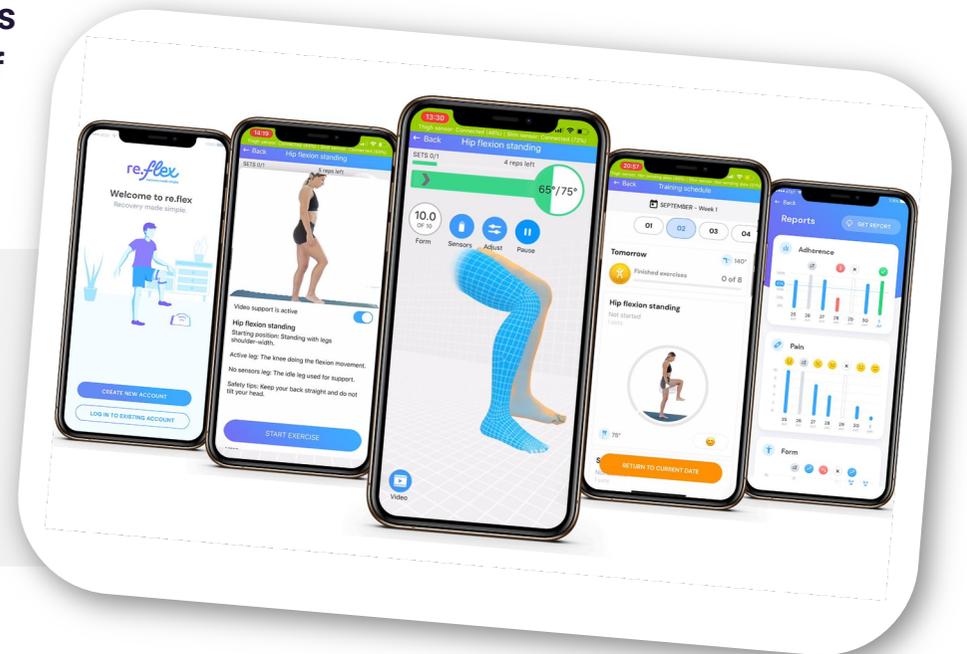
Increase in adherence

95%

Satisfaction rate

~4%

Of Gold vicon standard



What impact could more support have for patients?

The benefits to patients...

- A support and educational tool that allows patients to communicate continuously with their physiotherapist to gain advice, reassurance and guidance prior potential surgery.
- A motivational tool to get patients to engage with their pre-operative rehabilitation programs. Track their progress over time, leading up to surgery.
- Increase mobility and reduce their pain & medications prior to surgery.
- Get patients in great pre-surgical conditions so they have the best chance of recovery post surgery.
- Patients become familiar using the technology as a recovery tool ready for their post op rehabilitation program.

A solution to empower clinicians NOT replace them



The re.flex solution can help clinicians provide rehabilitation through:

- Remote monitoring data allows for proactive intervention.
- Improve patient & clinician rapport through remote monitoring and instant messaging feature within the app.
- Engage patients in their pre-op rehabilitation programs, pushing their programs further to support earlier discharge.
- Reduce the need for in person sessions, freeing up clinicians to focus on more complex in-person cases.
- Gain insights from pre-operative program to guide post surgical rehabilitation programs.

See what difference re.flex makes for our patients



"Very user friendly, it recognised me movement in my knee, it recognised everything that I was doing in real time and I couldn't complain". Chris Brown

"I really enjoyed the feature where I could get a dialogue with the physio". Jon Bilton

[WATCH NOW](#)

What impact could this have in Hong Kong?

Evidence to show how re.flex can support patients...

Pre-pandemic	• Build a consensus among stakeholders for prioritization of arthroplasty services, including inpatient, outpatient and operation, during different degrees of severity of a pandemic
	• Establish guidelines for infection control measures for patients and health care workers during the pandemic
	• Establish guidelines for operating on a confirmed infected case during the pandemic
	• Set up telemedicine infrastructure for preoperative education, outpatient consultation and follow-up, and telerehabilitation
	• Set up ERAS services for arthroplasty procedures
During the pandemic	• Adjust clinical services according to the severity of the pandemic
	• Increase the capacity for supporting ERAS services in arthroplasty to shorten hospital stay and reduce the burden on inpatient care
	• Provide telemedicine consultations for pre-operative education and postoperative follow-up
	• Provide telerehabilitation to maintain mobility and knee function; ensure access to drug-refill clinic for patients on waiting list for arthroplasty
	• Provide telerehabilitation for postoperative rehabilitation after arthroplasty
	• Develop a post-pandemic arthroplasty resumption plan for the anticipated backlog
Post-pandemic	• Prepare manpower and hospital capacity for the post-pandemic increase in clinical service (e.g., extend operating room schedules)
	• Utilize orthopaedic block times for arthroplasty procedures
	• Enhance mental health support for healthcare workers to cope with the increase in workload during the post-pandemic phase

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