

MSK Curbsider
2405 Whitney Ave, apt 706
Hamden, CT 06518

Samuel Oduwole, CEO
T 215-758-1479
MSKcurbsider.com
Samueloduwole23@gmail.com



Industry:

Clinical Decision Support
Tool

Co-founders:

Samuel Oduwole, CEO
Greg Pereira, MD, CMO
Pranav Warman, CTO
Miguel Arasa, CFO
Alec Werthman
Sarah Kurkowski
Miles Romney, PA-C

Board:

Seeking members

Scientific Advisory Board:

Charles Gerardo, MD
Chief of EM, Duke
Richard Stahl, MD, MBA
Sr. Assoc. Dean, Quinnipiac
Listy Thomas, MD, MBA
ER Physician, Quinnipiac

Number of Employees: 7

Finance:

Accounting/Tax - Seeking
accountant

Financing to Date - \$53,000
(non-dilutive capital)
Not seeking additional
funding

Intellectual Property

(Seeking):

Copyright – Wiggin and Dana
LLP
Trademark – Cognition IP

Company History

MSK Curbsider LLC is a digital health software company founded by seven healthcare providers with a heterogeneity of experience in various care settings throughout the country. Founders also span the training ladder ranging from students and trainees to clinicians with over a decade of experience. Their common goal is the development of a clinical support tool, EMpedics, which is designed to overcome the systemic inertia of delayed and subpar musculoskeletal care in the emergent setting.

Market Opportunity / Unmet Need:

Every year, over 15 million Americans waste countless hours waiting to receive emergent care for musculoskeletal problems such as broken bones¹. Unfortunately, emergency room (ER) doctors are ill-trained to manage these patients and are further impeded by cumbersome billing and documentation.

Our product seeks to improve physician efficiency, reduce unnecessary specialist consultations, and decrease ER wait times, which will ultimately increase throughput and broaden institutional revenue capture.

Product/Services – Launched and Pipeline:

EMpedics guides clinicians through all aspects of patient care, billing, and documentation. It offers evidence-based steps for managing injuries, instructional videos and animations for procedures, and templated notes with accurate billing codes for appropriate compensation. This results in more confident providers who provide higher quality and more efficient care while bringing in more revenue.

Commercial / Technical Milestones:

- Pending – Completion of intellectual property protection
- Pending – Creation of educational x-ray interpretation component of product
- March 2022 – Completed development of MVP which includes over 100 clinical pathways for the management of musculoskeletal injuries supported by hundreds of custom illustrations, videos, and animations
- April 2021 - Raised over 50k in non-dilutive capital
- October 2020 - Created legal entity for EMpedics

Competition:

The status quo is our most significant competitor. Unlike any other resource on the market, EMpedics is the only product with the ability to improve efficiency and increase revenue which will allow it to gain strong traction. Additionally, EMpedics is not intended to replace other online medical platforms on the market but offer a novel solution to a historic problem at a fraction of the price charged by other clinical decision support tools.

Financial Forecast (unaudited):

Our team is approved to run a proof-of-concept trial this year at a large academic institution. We intend to rapidly scale up to other centers, large and small using data driven results from the pilot. Our low cost for material gives us significant gross margins each year.

	Y1	Y2	Y3	Y4	Y5
Revenue (in thousands)	\$360	\$720	\$1,800	\$5,400	\$18,000
Growth Rate	N/A	100.00%	150.00%	200.00%	233.33%
Gross Profit (in thousands)	\$359	\$719	\$1,799	\$5,399	\$17,999
Gross Margin	99.72%	99.86%	99.94%	99.98%	99.99%
Expenses	\$701	\$707	\$709	\$807	\$717
Net Income (in thousands)	-\$342	\$12	\$1,090	\$4,592	\$17,282

Legal:

Incorporation – Wyrick
Robbins Yates & Ponton LLP

Works Cited

1. Gaieski, D. F., Mehta, S., Hollander, J. E., Shofer, F., & Bernstein, J. (2008). Low-severity musculoskeletal complaints evaluated in the emergency department. Clinical orthopaedics and related research, 466(8), 1987–1995.
<https://doi.org/10.1007/s11999-008-0277-5>