



NovaMed
SYSTEMS

Smart HealthTech Devices &
Compliance-Driven Medical Systems

CONNECTED-CARE PORTFOLIO

SERVICE PORTFOLIO

NovaMama · NovaHub Care · NovaPatch Vital

Confidential

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01 PORTFOLIO OVERVIEW

NovaMed Systems pairs certified OEM peripherals with a Canadian-resident software platform, so care teams can safely monitor patients beyond the clinic — one modular suite, built to fit real clinical workflows, not replace them.

CHALLENGES & NEEDS — AND HOW NOVAMED RESPONDS

CHALLENGE

Care is anchored to the clinic — routine checks that could happen at home mean avoidable travel.

NOVAMED RESPONDS

Monitor at home

Certified OEM vitals peripherals and a bilingual patient app bring routine monitoring into the home.

CHALLENGE

Clinicians lack timely signals between visits, so change goes unseen until the next appointment.

NOVAMED RESPONDS

Intelligence in the platform

Explainable, monitored rules with clear escalation — resident in Canada.

CHALLENGE

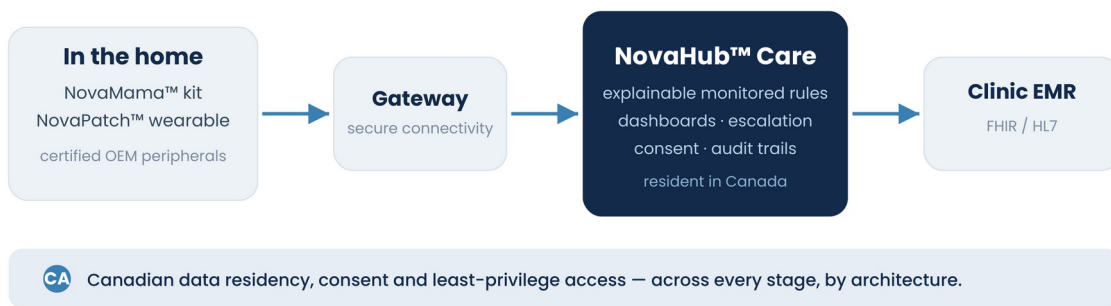
Many remote-monitoring platforms are foreign-hosted, opaque and hard to integrate — a poor fit for Canadian privacy law and procurement.

NOVAMED RESPONDS

Clinicians in control

Canadian-resident and EMR-interoperable via FHIR/HL7; alerts support clinical judgment.

The connected-care ecosystem — certified OEM peripherals in the home through to the clinician's EMR.



WHY NOVAMED

Canadian data residency

Explainable alerts, no black boxes

OEM-agnostic hardware

EMR-interoperable

Compliance-first

Bilingual & accessible

Maternal IoT vitals kit

INTENDED USE

Home and in-clinic maternal vital-sign monitoring with adherence prompts and clinician alerts, under clinician oversight.

For & settings

OB/GYN practices, midwifery groups and community clinics running maternal programs. Used in the home and in-clinic, Metro Vancouver first.

Customer value

Routine monitoring brought into the home; supports visibility between visits and may reduce avoidable in-person monitoring where clinically appropriate; minimal added admin load; bilingual and low-bandwidth by design.

Core components

Loaner kit of certified OEM peripherals (blood pressure, SpO₂, weight); bilingual (EN/FR) low-bandwidth patient app with guided readings and adherence prompts; clinician alerting on explainable thresholds.

Connects with

Feeds NovaHub™ Care — device data flows into explainable rules, clinician dashboards and the EMR.

COMMERCIAL MODEL

Per-patient subscription + kit logistics.

Subscription \$45–\$60 / patient / month — ~\$55–60 at early sites over a six-month cycle.

Kit logistics \$10 / patient / month — covers handling, sanitization and refresh.

STRATEGIC ROLE & READINESS

The maternal beachhead — the lead product for clinic-to-home maternal workflows. Validation-first: physician-overseen pilots under Research Ethics Board approval. Readiness TRL 3 entering 4, horizon target TRL 5 entering 6.

KEY BOUNDARIES

States intended use only — no efficacy or outcome claims pending validation. Not fetal monitoring or higher-acuity maternal-fetal diagnostics. Pilots proceed only under ethics approval with physician oversight.

Software-as-a-Medical-Device & data platform — the connected-care core

INTENDED USE

Ingests device data, applies explainable monitored rules with escalation, and interoperates with clinic EMRs — all resident in Canada.

For & settings

Clinics, primary-care networks and health-authority programs needing compliance-grade reporting.

Core components

Role-based clinician dashboard; alerting and escalation trees; FHIR/HL7 EMR integration; consent and audit infrastructure; explainable, monitored rules; an OEM-agnostic device-abstraction layer that avoids hardware-vendor lock-in.

Customer value

Every alert traces to a threshold a clinician can read — no black boxes; fits the existing EMR workflow; Canadian residency; compliance-grade reporting; OEM-agnostic, so clinics are never locked to one hardware vendor.

Connects with

The hub of the suite — NovaMama and NovaPatch both feed it. The principal regulated asset and the mechanism for scale via the PHSA route.

COMMERCIAL MODEL

Site licence · implementation · analytics.

Site licence \$5,000 / clinic / year

Implementation & training

\$2,000 / site (one-time)

EMR integration & setup \$6,000 /

STRATEGIC ROLE & READINESS

The core SaMD/data platform and principal regulated asset. The non-regulated MVP surface (patient app, admin dashboard, analytics) is the 2026 build; the regulated core is built under IEC

KEY BOUNDARIES

Health Canada Class II SaMD pathway in preparation — not an issued approval. Clinician-facing decision support, not autonomous diagnosis. Device classification and alert thresholds

site (one-time)

Analytics add-on \$400 / site /
month

Future-tier · from 2029: API /
white-label \$300 / site / month —
outside the 2026–2028 core.

62304 within the quality system.

are professional determinations.

Continuous wearable

INTENDED USE

Continuous vital-sign monitoring with gateway connectivity for chronic and post-discharge pathways, feeding the same platform.

For & settings

Chronic and post-discharge care pathways — a growth-tier extension of the maternal beachhead.

Core components

Discreet wearable sensor with gateway connectivity; certified OEM hardware; feeds the same NovaHub Care platform.

Customer value

Continuous monitoring for chronic and post-discharge pathways; extends the platform to new use cases using the same explainable rules and Canadian residency.

Connects with

Feeds NovaHub™ Care — the same rules, dashboards, interoperability and residency as the rest of the suite.

COMMERCIAL MODEL

Per-patient subscription + kit-logistics — consistent with NovaMama; bundle pricing set at launch.

Not a 2026–2027 revenue driver — introduced after maternal validation.

STRATEGIC ROLE & READINESS

Sequenced deliberately after maternal validation; no 2026–2028 milestone depends on it. Extends the validated platform into adjacent pathways.

KEY BOUNDARIES

States intended use only. Not hospital-grade or acute inpatient monitoring. Advances only after the maternal evidence package supports it — validation before scale.

05 ONE CONNECTED SYSTEM

The three solutions are one system: certified OEM peripherals capture vitals, NovaHub Care turns them into explainable, actionable signals, and clinicians act inside their existing EMR — with NovaMama leading today and NovaPatch extending the same platform later.

How the solutions connect — NovaHub Care at the centre, devices feeding in, the EMR and care team acting on the output.



1

Capture

Certified peripherals and wearables record vitals in the home and clinic.

2

Interpret

NovaHub applies explainable, monitored rules with clear escalation.

3

Act

Dashboards and EMR integration put signals in the clinician's workflow.

4

Assure

Canadian residency, consent and audit trails hold across every step.

TECHNOLOGY, PRIVACY & SECURITY FOUNDATION

Canadian data residency — patient data stays in Canadian regions, by architecture.

Consent & audit trails — consent captured; every access and alert is logged.

Least-privilege access — role-based access; users see only what they need.

Secure connectivity — encryption in transit and at rest; secure boot and OTA updates.

FHIR/HL7 interoperability — monitoring data lands inside existing EMRs, not a silo.

Explainable monitored rules — every alert traces to a threshold a clinician can read.

EQUITY BY DESIGN Bilingual EN/FR, low-bandwidth and culturally-attuned — a cross-portfolio principle applied across every product, for every community.

06 CUSTOMER & USE-CASE FIT

NovaMed runs two motions in parallel — a fast, relationship-led motion with clinics and a slower, artefact-led motion with the procurement authority — because the clinic motion generates the evidence the authority motion consumes. Metro Vancouver first.

Community clinics & OB practices

Maternal vitals and adherence monitoring, clear escalation, a bilingual app and minimal added admin load.

ROLE The pilot venue and the champion — the route to evidence.

Primary-care networks

Maternal and chronic pathways, population reporting, standardized alerting and support.

ROLE The natural expansion step once single-site evidence exists.

Health authorities via PHSA

A compliance pack across ISO 13485, IEC 62304 and ISO 14971, Canadian residency, FHIR/HL7 integration and security assessment.

ROLE The contracting route and the mechanism for scale.

Clinic networks & EMR platforms

FHIR/HL7 interoperability designed for validation, a clean privacy posture and a partner that will not add support burden.

ROLE Channel and gatekeeper — the highest-leverage route to lower acquisition cost.

07 COMMERCIAL MODEL

Pricing sits below premium comparables to support adoption in a budget-sensitive segment while preserving positive unit economics at modest scale. Pilots are physician-led and unbilled; revenue is recognised only against signed arrangements.

LINE	PRICE (CAD)	BASIS
NovaMama™ subscription	\$45 – \$60 / patient / month	Modelled at ≈\$55–60 for early sites over a typical six-month maternal cycle.
Kit logistics	\$10 / patient / month	Charged where a NovaMed loaner kit is used; covers handling, sanitization and refresh (≈ half of patients).
NovaHub™ Care site licence	\$5,000 / clinic / year	Dashboards, alerting and compliance reporting; pro-rated for part-year starts.
Implementation & training	\$2,000 / site (one-time)	Setup, configuration and staff training.
EMR integration & setup	\$6,000 / site (one-time)	FHIR/HL7 adapters, site configuration and security-review support, where in scope.
Analytics & outcomes add-on	\$400 / site / month	Dashboards, outcome summaries and reporting packs.

≈ \$56

blended ARPU / patient / month

≈ 80

active patients per site (planning)

≈ \$479k

2028 break-even (~9–10 sites)

2026

\$0

Foundation — no billed revenue

2027

≈ \$60,000

first paid conversions

2028

≈ \$600,000

measured commercialization

FUTURE-TIER • FROM 2029 NovaHub API / white-label access at **\$300 / site / month** — outside the 2026–2028 core commercialization focus and not counted in the arc above.

Planning targets from the reconciled financial model; all products state intended use only.

08 SEQUENCING & READINESS

The portfolio advances validation—first: build in 2026, prove in 2027, commercialize in 2028 — each stage entered on evidence, not the calendar.

2026

Foundation & Build

MVP surface built; ethics and privacy submissions lodged; pilot clinics committed.

Revenue \$0 · EBIT -\$120k

2027

Validate & Convert

Physician-overseen maternal pilots under ethics approval; first paid conversions.

Revenue ≈\$60k · EBIT -\$44k

2028

Measured Commercialization

Paid sites expand through the PHSA-centred route; first positive EBIT year.

Revenue ≈\$600k · EBIT +\$106.4k

CURRENT CORE VS FUTURE EXTENSIONS

CURRENT CORE 2026–2027 focus

NovaMama™ — maternal beachhead, lead now

NovaHub™ Care — the platform & principal regulated asset

FUTURE EXTENSIONS later-stage

NovaPatch™ Vital — after maternal validation

NovaHub API / white-label — planned from 2029

READINESS

TRL 3 entering 4 — horizon target TRL 5 entering 6.
Validation before scale.

COMPLIANCE POSTURE

Anticipated Health Canada SaMD pathway, subject to final classification · ISO 13485/MDSAP alignment in progress · IEC 62304 · ISO 14971 · PIPEDA · BC PIPA · pilots subject to REB/ethics approval.

FOCUS NovaMama and NovaHub carry 2026–2027. Broad chronic RPM and API / white-label revenue are future-tier and must not dilute pilot execution.

Status as of 2026. Certifications and licences listed are pathways in progress, not issued approvals.

Let's build connected care, the Canadian way.

Clinics, partners, and health programs — we'd like to hear from you.



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