Health is critical to well-being, productivity and autonomy. For people to live their best lives, they must be healthy.
D-REV EXISTS TO DESIGN AND DELIVER MEDICAL TECHNOLOGIES THAT CLOSE THE QUALITY HEALTHCARE GAP FOR UNDER-SERVED POPULATIONS.

Dr. Sathya, a neonatologist at Chengalpattu Medical College in Tamil Nadu, India, with two residents. She is revered in the local community for the long hours she spends with newborns and their families, and the lives she has saved. When D-Rev staff visited, they met a family who named their daughter after her.
OUR MISSION

Health enables people to be more productive, participate in their communities, care for their families, and live happier and longer lives.

Technology is driving the development of new solutions that are more effective and affordable, but are not yet reaching patients who most need them. Addressing health inequities is a critical first step in reducing economic inequities.

WE BELIEVE THE MOST EFFICIENT AND EFFECTIVE ROUTE TO SOLVING PROBLEMS IS TO SPUR THE GLOBAL MEDICAL DEVICE INDUSTRY TO COMPETE WITH OUR PRODUCTS.

D-Rev challenges the prevailing equilibrium in global healthcare by addressing the needs of the experts on the ground, and designing and delivering beautiful, durable, and affordable products. Our efforts push multiple industries to serve all populations equally and change mindsets and expectations about what quality healthcare can be.

We directly and indirectly impact millions of people. Our products save lives, improve quality of lives, increase incomes, and strengthen families, communities, and economies. We close the gap for those who previously have been unable to access quality healthcare. And, we prove that customer demand is the strongest element for creating sustainable and scalable solutions to complex health challenges.
OUR GOAL

“People talk about the poor conditions of these hospitals... but really, it’s about hope.”

- Dr. Sathya, Chengalpattu Medical College, India

D-Rev focuses on hospitals and clinics in low-income countries, where the greatest inequities exist and basic health needs are not met.

We meet doctors like Dr. Sathya who provide the best care they can in decent facilities amidst a dearth of durable, context-appropriate medical devices.

The World Health Organization states that less than 30% of donated medical equipment is ever turned on at its destination, and as little as 10% become operable.

That’s where D-Rev comes in—by using the market to scale. Our products are in hospitals that sought them out in order to put them in use and thereby, provide quality healthcare. Our goal is to treat millions of people and solve critical health problems.
Dear Friends,

2015 was an exciting year at D-Rev! We strengthened our model to design and deliver disruptive medical technologies—products that save lives, enable autonomy and inspire. We advocated for patient-and practitioner user-centered design process at conferences and via the media. We added engineers, partners, and advisors to our team. We expanded our approach to measuring impact. We added our first mobility product to our scalable model, the ReMotion Knee.

The year brought continued progress towards solving serious health challenges on a global scale directly through our products, and indirectly by creating change in medical device markets. We enhanced our expertise in users’ contexts, markets, policy, logistics, and efficiency. We improved our systems approach to sustainable change by designing for today’s world—and the world of the future.

In 2015, we continued to build local partnerships and grew our network of users to 400 hospitals and 600 medical professionals in 20 countries. From manufacturers, distributors and servicers to researchers, Fortune 500 companies, governments, media voices, foundations, and other nonprofits, our partners help our products get to users, and function well over time.

Brilliance, launched in 2012, demonstrates how our model of disruptive technologies impacts lives. By the end of 2015, D-Rev and its partners helped the Brilliance products reach 44 countries. (A favourite part of my job, by the way, is opening Brilliance’s monthly sales reports. In 2015, Brilliance entered at least one new country every month!) In India, where 20% of the world’s babies are born, 1 in 6 phototherapy devices sold is a Brilliance. Our proven model looks to replicate the success of Brilliance with the ReMotion Knee and future products.

D-Rev closed 2015 in a strong financial position, which allowed further investment in product design. In 2016, expect continued investment in product development and improvements in how we reach the highest-need hospitals and clinics around the world.

At D-Rev we value curiosity, fearlessness, and pragmatism in our approach to problem solving—and we are dedicated to figuring out how to maximize impact. Thank you to you, our supporters, donors, partners, families and friends, for your contributions to building not just better solutions to closing health inequities, but changing how the world thinks about and measures impact and success.

With gratitude,

Krista Donaldson
CEO, D-Rev
124,800
people with improved health

17
shipping containers to move 285 Brilliances and Phoenix Infant Care Centres from Chennai to Mombasa to fulfill a tender with the Kenyan government.

17
countries from where we had ReMotion Knee pre-orders when it launched on December 8th.

44
countries with D-Rev products

21
leading causes of death and disability globally that our New Product Development team explored to identify our next project area. They represent 95% of all DALYs lost every year.

6 + 1
directors observer

191
days the ReMotion Knee launch was postponed after we identified a last minute challenge.

24
states of India’s 29 states that now have Brilliance units. These 24 states represent 99.5% of India’s population.

10
full-time staff

5,510
people with improved earning potential

4
products launched since 2012

100,300
at-risk babies treated with Brilliance devices who otherwise would not have received effective treatment.
D-Rev’s Mobility project equalizes access to high quality mobility devices. Our first product is the ReMotion Knee, a high performance poly-centric knee that is a fraction of the cost of comparable prosthetics.
REMOOTION KNEE

Launched December 8, 2015

$80 USD

EFFICIENT  DURABLE  COMFORTABLE  AFFORDABLE
REMOTION KNEE

2015 was a major year for the ReMotion Knee. Our team finalized the design, working closely with manufacturing partners, evaluated the prosthetics market, and took pre-orders from customers.

The ReMotion Knee launched for global sale on December 8, 2015. By then, we had over **700 pre-orders from 17 countries**.

Eighteen-year old Prakash told D-Rev staff that he felt depressed following the amputation of his left leg, thinking he would be unable to work. In May 2015, he was fitted with D-Rev’s ReMotion Knee at the Jaipur Foot Organization, giving him the confidence to look for a job, even though local norms stigmatized people with disabilities. At one point, Prakash worked for free carrying boxes and managing restocking shelves to prove himself to a skeptical store owner.

Today, Prakash is the primary earner for his family, and he mentors other young amputees who have recently suffered trauma resulting in amputation.

"If I am satisfied and happy, I don't feel poor"
DIRECT IMPACT:
INVESTMENT MODEL FOR REMOTION

This chart shows D-Rev’s economically sustainable and scalable impact model. The top graph shows product impact over time, while the bottom graph shows donor investment in product development minus financial returns. Revenue from ReMotion Knee sales are used for impact assessment, and eventually, new product development.
NEWBORN HEALTH

D-Rev’s first Newborn Health project aims to significantly reduce brain damage or death from untreated jaundice in the next 10 years. D-Rev’s Newborn Health project provides world-class, affordable phototherapy devices and lightmeters to treat the millions of newborns at risk for adverse effects of severe jaundice, such as brain damage or death.
SALES GROWTH OF BRILLIANCE

2012
Launched November 2012 in India

2015
Sales to 39 countries
• 10 volume distributors (countries with 10 or more units)
• 29 active pilots (countries with 9 or fewer units)

IMPACT

119,100
Babies treated with Brilliance

It is difficult to track all of the Brilliance units, especially those outside of India. We estimate that the impact of Brilliance is likely 25-35% higher than reported. (How we know this)

100,300
Babies treated with Brilliance who would not otherwise have received effective treatment

1,600
Newborn deaths and disabilities averted through the use of Brilliance

numbers are cumulative since Brilliance’s launch in November 2012
BRILLIANCE

In 2015, we reached our largest impact milestone yet—over 119,000 at-risk babies around the world were treated for jaundice using a Brilliance device.

In 2015, we won our largest public tender for 285 units to Kenya. In 2016, we will be focused on closely tracking the impact of Brilliance’s arrival in Kenya—stay tuned to our blog for updates.

Drs. Vaibhav and Heena Patel, a husband and wife team, opened Hasya Newborn Care Centre, a small private hospital in Palanpur, India offering advanced care for acutely ill and preterm babies in an area that previously did not have specialized newborn care. They first learned about Brilliance while working at a hospital in Ahmedabad, Gujarat state, where both cities are located, has an infant mortality rate of 3.6%. When it came time to set up their own hospital, they ordered five Brilliance Pro units.

Both work tirelessly, telling a D-Rev partner that in the beginning they often rotated shifts over 24 hours to set up the hospital, care for the babies, and train their nursing staff quickly. We estimate that they have treated 217 severely jaundiced babies at Hasya that otherwise would not have received effective care.

We want brain damage or death from severe neonatal jaundice to be a true “never event” in the next 10 years.

Thanks to Bobby Casey of the Autodesk Foundation for collecting the story of Drs. Patel and Hasya Newborn Care Centre.
BRILLIANCE PRO
D-Rev’s most groundbreaking product to-date. With sophisticated programming and advanced design, Brilliance Pro has an integrated light meter, expanded functionality including D-Rev’s SmartTilt™ and a sleek look.

BRILLIANCE CLASSIC
The original design of Brilliance combines world-class performance with the most affordable price for a phototherapy unit to treat severe jaundice in resource-limited hospitals.

BRILLIANCE UNDERSIDE
Designed with Phoenix Medical Systems in India, Brilliance Underside works in tandem with both Classic and Pro when double-sided phototherapy is needed to accelerate treatment.

“In my country, at least 40% infant mortality is contributed by neonatal mortality. When we say the policymakers think the causes of neonatal mortality would just be prematurity, would just be bed asphyxia, yes these are causes of neonatal mortality. But neonatal jaundice is an important cause of mortality and morbidity. Morbidity is a more long-lasting effect. So we must stop all these deaths, and morbidity, and handicaps, because we cannot as a country level, as a resource poor country level, bear the burden of handicaps.”

-Dr. Angela Okolo, neonatologist, Nigeria
DIRECT IMPACT:
INVESTMENT MODEL FOR NEWBORN HEALTH

This chart shows D-Rev’s economically sustainable and scalable impact model. The top graph shows product impact over time, while the bottom graph shows donor investment in product development minus financial returns. Revenue from sales of Brilliance Classic, Brilliance Pro, and Brilliance Pro Lightmeter are used for impact assessment, scaling, and eventually new product development.

In 2016, we plan to scale our affordable phototherapy solutions to Rwanda, Kenya, and Nepal.
NEW PRODUCT DEVELOPMENT
NEW PRODUCT DEVELOPMENT OVERVIEW

In 2015, we officially launched D-Rev’s R&D group and formalized our process for identifying and vetting potential projects.

We researched over 20 health areas and winnowed the short-list down to three—prioritizing the biggest health issues that have a disproportionate impact on low and middle income countries.

Our first phase of in-depth field work is focused on the three areas. In 2016, we are visiting hospitals to do need-finding and solicit early stage feedback to our assumptions and prototypes.

With support from the Robert Wood Johnson Foundation, we also studied examples of medical devices that are considered reverse innovations—products initially intended for low-income that jump to and have impact in high-income countries.

We found that reverse and frugal innovation approaches have their limits when it comes to health impact for the poor. As a sector, we need more ways to provide high-quality, affordable products to low-income people.

Read about our detailed findings and see our Decision-Making Framework for Impact Innovation.
ABOUT
D-REV
2015 FINANCIALS

Total Expenses = $1.4M
Total Revenue = $1.9M

In 2015 we increased investment in New Product Development by 11%. We expect to continue to grow investment here.

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REVENUE BY SOURCE
- Foundations: 60%
- Individuals: 28%
- Bilateral: 7%
- Corporate: 4%
- Earned Revenue: 1%

EXPENSES BY PROGRAM
- Mobility: 59%
- Newborn Health: 22%
- New Product Development: 7%
- Impact: 12%
- Program: 10%
- Administration: 15%
- Fund Development: 15%

EXPENSES ALLOCATION
- Program: 75%
- Administration: 15%
- Fund Development: 10%
ABOUT D-REV

**How a Design Firm Is Saving Lives by Sweating the Details**

23 January 2015

“...So after the firm debuted Brilliance, its breakthrough light therapy device, in 2011, it wasted no time getting to work on the follow-up. The result is the Brilliance Pro, the MacBook Air of developing-world jaundice treatment.”

**D-REV CEO: We Build Medical Devices for People Who Live on Less Than $4 a Day**

14 May 2015

“...What’s unique about D-Rev is its approach to research. The company sends its small team of designers into the field—whether it’s a rural village in India or a remote hospital in Uganda—to conduct interviews with patients, doctors and nurses.”

**This Life-Changing, Low-Cost Artificial Knee Is on the Market After Years of Design**

15 December 2015

“...The ReMotion Knee lets people in the developing world share some of our advanced prosthetic technology, but at a price you can afford if you make $4 a day.”

**What Makes Design Good for Health?**

“...From low-cost prosthetic limbs for people in resource-limited settings to better-ventilated hospitals that let in natural light, the concept of human-centered or patient-centered design is taking hold. But what distinguishes good design from the rest?”

**Microdocumen-tery on the ReMotion Knee**

Dr. Pooja Mukul, a rehabilitation doctor in Jaipur, India, has worked with us since 2009. Her and her patients’ feedback has been critical in the development of the ReMotion Knee.

**Tips on Building an Impact Dashboard**

D-Rev-ers record the sounds of life as we do fieldwork with users, in hospitals—and finding our way.
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OUR CORE VALUES

TRUST
We extend trust generously, placing confidence in our teammates.

EMPATHIZE
We value and respect everyone’s ideas and encourage thoughtfulness and participation.

IMPROVE
We believe in continuous improvement, iteration, and not settling for “good enough.”

CLARIFY
Everyone has permission to ask why. What we say is what we mean is what we do.

SIMPLIFY
Thank you to our partners. You catalyze and amplify our impact and successes.
CASEY TRUBO
Senior R&D Engineer

VINESH NARAYAN
Senior R&D Manager

DINA TO
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AJ VIOLA
Director of Operations & Strategy

KRISTA DONALDSON
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ROBERT WEISS
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NICOLE RAPPIN
Operations Manager

KELLY BLANK
Graphic Designer

MICHAEL HONG
ReMotion Product Manager

SARA TOLLEFSON
Director of Impact (not pictured)
THANK YOU!
Your support makes this possible.

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