

TWENTY THIRTEEN

MED ONE TO ONE // A MED ONE CAPITAL PUBLICATION

ISSUE#

36

MED ONE

TO

ONE

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MED ONE TO ONE consists of editorials, a message from our owners, testimonials, information regarding our financing solutions, employee spotlights and more. Quarterly issues are published and with each comes the most recent and exciting news of Med One Capital.

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Annual Meeting 2013



Why? vs. What

WHY you do what you do, and WHAT is the impact.

Why? vs. What

Written By: Troy Tait

Recently Med One held their annual meeting. This was a great opportunity to get the company together and hear reports on where we have been, where we currently are, and where we are going in the future. We have experienced remarkable success and have developed great relationships with our customers and business partners.



Troy Tait

There were a couple of messages that really stood out to me. The first was presented by Mark Eaton, former NBA player who spent his entire career as a member of the Utah Jazz. His story about getting into the NBA is very interesting. During his presentation, he talked about a conversation he had with former NBA player Wilt Chamberlin. As Wilt was watching Mark play in a practice game at UCLA, he noticed how he tried to keep up with the smaller, faster players. At 7' 4", Mark was not the quickest player on the court. During a break, Bill took Mark aside and told him to stop chasing the little guys – "That's not your job. Your job is to play defense and stop the other team from scoring." Mark finally understood what his role was and it changed the way he played. He was twice named defensive player of the year, was an all-star and currently holds the record for blocked shots in a single season – 456.

Once Mark figured out what his role was, he became a dominant big man in the NBA. This concept rings true in business. There are many of us—myself included—who tend to try and do a job that isn't required of us. Sometimes we do this because we want to help or because we think we can do it better. At the end of the day, if we focus on our own roles and responsibilities and do them to the best of our ability, the entire team succeeds.

Mike Schlappi, another guest speaker, offered some great insight on how we can improve ourselves. After a shooting accident at age 16 left Mike in a wheelchair, his mother taught him a valuable lesson: "Even if you can't stand up, you can still stand out." Mike used several stories to illustrate this point and each story concluded with the same message. We determine how things will turn out. Despite the challenges or obstacles that lie ahead, we are the only ones who can decide if we will blend in or stand out.

Mike talked about motivation, stating, "All motivation is self motivation." He explained that while participating in a marathon, there were people cheering at the beginning and the end of the race. Those cheers encouraged him to start and finish, but where were all those people for the 26 miles? It was only his motivation that got him through the challenging parts of the race.

No matter what the challenge may be, we have to be the ones who ultimately motivate ourselves to stand out.

"Even if you can't stand up, you can still stand out." - Mike Schlappi

DETERMINED

Letter From The Owners

If At First You Don't Succeed...

Written By: Brent Allen



Brent Allen

At a recent Med One Annual Meeting held at the beautiful Montage Resort in Deer Valley, UT, I had the opportunity to speak to the Med One employees. I have chosen to share some of those thoughts as the basis for this article. I apologize up front to our Med One employees for some of the repetition.

Several weeks ago, I ran across a humorous story that effectively sets the stage for my comments. A husband came across the following entry in his wife's diary:

Tonight, I thought my husband was acting weird. We had made plans to meet at a nice restaurant for dinner. I was shopping with my friends all day long, so I thought he was upset at the fact that I was a bit late, but he made no comment on it. Conversation wasn't flowing, so I suggested that we go somewhere quiet so we could talk. He agreed, but he didn't say much.

I asked him what was wrong; He said, “Nothing.” I asked him if it was my fault that he was upset. He said he wasn’t upset, that it had nothing to do with me, and not to worry about it. On the way home, I told him that I loved him. He smiled slightly, and kept driving. I can’t explain his behavior. I don’t know why he didn’t say, ‘I love you, too.’

When we got home, I felt as if I had lost him completely, as if he wanted nothing to do with me anymore. He just sat there quietly, and watched TV. He continued to seem distant and absent. Finally, with silence all around us, I decided to go to bed. About 15 minutes later, he came to bed. But I still felt that he was distracted, and his thoughts were somewhere else. He fell asleep; I cried. I don’t know what to do. I’m almost sure that his thoughts are with someone else. My life is a disaster.

The following thoughts were penned in the husband’s dairy for the same day:



A two-foot putt...who the Hell misses a two-foot putt?!!!

As most golfers know, a missed two-foot putt can ruin just about any day. I know because I probably hold the record for missed two-foot putts. I have it down to a science. Usually I just pick up the ball,

take two strokes, and walk to the next hole. Missed two-foot putts occur in golf and they also occur in the business world. They are deals that we have in the bag, and then lose at the very last minute. They are slam dunks, but just before the midnight hour they are grasped from our reach. They occur in sales, accounting, operations, marketing, IT and every other area wherein we function. We can all relate in some small way. And we find ourselves asking the question, “Who the Hell misses a two-foot putt?”

Unfortunately, we have all experienced this frustration. What really matters, however, is how we respond to that missed two-foot putt. How does it affect our future performance? How does it affect our future relationship with others?

Most golfers usually respond to missed two-foot putts in one of the following ways:

1 They get mad, blame others, and embarrass themselves. It is NEVER their fault. Someone else caused them to miss the putt and frustration builds. Sometimes it helps to just hurl the putter into the nearest lake.

2 They get discouraged, depressed, and decide to quit. Sometimes it is great therapy to just post a “for sale” sign on that worthless set of clubs.

3 They renew their determination, exercise greater effort, and become better putters. Hopefully, this is how we all react.

The choice is up to us. Whether we are talking golf or the business world, we are the ones who must decide how we are going to react.

Do we get mad, blame others, and act in embarrassing ways?

One man tells about living next door to a bully. One day the bully neighbor came up to him with hand extended. As he reached to shake hands, his neighbor grabbed him forcefully and threw him over his shoulder. “That’s Judo,” he said, “Picked it up in Japan.”

The man went into his garage, came back out and cracked the bully over the head. “That’s Crowbar,” he said, “Picked it up at Home Depot.”

We will continue to encounter daily conflicts, but we must decide how to resolve them. And, of course, that doesn’t mean to grab the crowbar, either.

When we get mad, we do stupid things. Our actions often lead to embarrassment. I read a story about one woman who ran a classified ad in order to sell her brand new car. It had only 3,000 miles.

“Like new,” the ad boasted. “Mint condition. \$75.00.” A reader of the ad laughed to himself and said, “There goes the newspaper, making another mistake.” But he decided to call the number anyway and ask about it. “Is it really brand new?” “Yes,” she replied. “Three thousand miles?” “Yes.” “The price?” “Seventy-five dollars,” she answered. “Seventy-five dollars! Lady, what’s wrong with it?” he asked. “Nothing is wrong with it. And, amazingly, you’re the first to call. I suppose nobody else believes the ad.” He decided to look at it. She let him take a test drive. The car looked exquisite and ran perfectly. He just couldn’t believe his luck.



“The car is yours for \$75. Just drive it away.” He paid her and took the keys. “Please tell me, lady,” he persisted. “You could have sold this car for \$35,000, at least. What is going on?”

She told her story: “I bought the car for my husband on our fortieth wedding anniversary. Two weeks later he ran off with his young secretary. Last week I got a text from him. They are at a resort in Miami. The text said, “Need money, sell car, and send cash’...so that is exactly what I am doing.”

Sometimes things don’t go exactly as we wish. Life is full of unexpected surprises and obstacles. During the past 12 months, Med One has been blind-sided by a few surprises—a few missed two-foot putts. We have tried to maintain a cool and calm composure. We have

“We must not get discouraged. We can’t just quit. We need to just keep on swinging and stay tenacious in our commitments. Like Vince Lombardi said, ‘It’s not whether we get knocked down...it’s whether we get up.’”

avoided pointing the finger of blame toward anyone. Instead, we have retrenched and implemented some minor course adjustments. This has proven to be a better alternative than anger and blame. Do we get discouraged, depressed, and decide to quit?

A grizzled westerner once said, “Ain’t no horse can’t be rode; ain’t no cowboy can’t be thrown.” The problem is that some people seem to be riding most of the time while others sit in the dirt discouraged. Which one are we? When we miss that two-foot putt, do we fold up the tent and throw in the towel? Hopefully, the answer is no.

I appreciate the attitude of a high school boxing coach. Some of his new athletes were obviously better suited for other activities. One of his boys worked furiously for a couple of rounds, but never connected with an effective punch. Nevertheless, he asked, “How am I doing, Coach? Have I done any damage?” “No” said the bewildered coach. “But keep on swinging. The draft might give him a cold.”

What great wisdom! We must not get discouraged. We can’t just quit. We need to just keep on swinging and stay tenacious in our commitments. Like Vince Lombardi said, “It’s not whether we get knocked down...it’s whether we get up.”

Do we become more determined, exert greater effort, and become better in what we do?

We all know the inspiration that comes from reading about the attempts to conquer Mount



Everest. Approximately 4,000 individuals have attempted the climb; 660 have been successful. There have been 142 people who have died trying to reach the summit. At 29,000 feet of altitude...the snow never melts. The wind blows at speeds in excess of 200 mph. It took 32 years of failures before it was conquered. Today, it is climbed so frequently that we rarely hear about the accomplishments. George Mallory made the first attempt at Everest in 1921. On his third try, he disappeared and was never seen again. For years, one attempt after another ended in failure. Finally, in 1953 Edmund Hillary reached the summit. Through determination and greater effort, Mount Everest was conquered. Difficulties are expected to make us better, not bitter. Yes, we can pray for a good harvest, but we must keep plowing.

For 22 years we have been exerting greater effort and throwing renewed determination into making Med One a better company. We stand united in our excitement about 2013 and our excitement extends well beyond this current year. We will not allow anger or blame to interfere with our success. We will not allow discouragement to permeate our commitments. We will embrace our opportunities and we will become a better company as the years come and go. We express our appreciation to all who have helped us achieve our lofty goals.

try, try, again.



Jeff Easton

Life Saving Equipment

Written By: Jeff Easton

I hope you don't mind that I take on a personal tone which I have never done in a Med One To One publication and which I rarely do in the work environment. However, even I, the Chief Financial Officer of Med One Capital, deep down in the bowels of my soul, have a personal soft side. I would like to share a little of that with each of you, along with what truly working for, being a part of, and being serviced by a great company like Med One Capital is truly all about.

On April 16, 2013, my wife Camille asked that I leave work and attend a well-check visit with my 11-year-old son Tyler later in the afternoon. This is the first well-check visit I had gone to since our oldest daughter Makenize (13) was just a baby. I asked why she wanted me to come and she said that she just felt like I needed to be there. She has never done this and never asks me to leave work, so I left work at 4 pm.

The nurse took Tyler's blood pressure before he went back to see the doctor in the exam room. While taking Tyler's blood pressure, she said she thought there must be something wrong with the machine. After three different nurses and Tyler's wonderful pediatrician took his blood pressure a total of 14 times, the doctor said,

"I guess I have to believe it. You have high blood pressure (155/115)." This number is extremely high and dangerous for a child Tyler's age. The pediatrician then began trying to determine what the problem could be. They did an EKG on Tyler that night and the left side of his heart was enlarged, which made complete sense with his high blood pressure.

The next day Camille took Tyler up to Primary Children's Hospital, one of the best children's hospitals in the nation, located just 25 minutes from our home in Salt Lake City. They spent the day there and Tyler was diagnosed with a Pheochromocytoma—a tumor off the adrenal gland that was producing too many hormones and causing his blood pressure to be dangerously high—which is very rare. The radiologist at Primary Children's read the ultrasound results and said, "I have never seen this in my career—only discussed it in medical school." Out of all the doctors who discussed this at Primary Children's (including Tyler's primary care doctor), only one had operated on this type of tumor before in Birmingham, Alabama a few years ago. The surgeon had seen it but only on a few rare occasions.

The next day, April 18, we visited for over an hour with the pediatric surgeon at Primary Children's who would eventually perform the surgery to remove the tumor. He was great. The first thing he said when he came in was, "Tyler we will get this taken care of and you will be cured of this." He then mentioned to Camille and me that a malignant tumor is still a possibility, but very unlikely. We now had a plan and we could not have been more happy and relieved. We were still a little stressed, but we had a plan and that was great.

First, we needed to get Tyler's blood pressure down. A middle-aged adult or older with blood pressure readings as high as Tyler's would have had a stroke or heart attack by now if left untreated, so we felt very blessed that our great pediatrician found the problem.

How rare is this? The surgeon told us that 1 in 500,000 people are diagnosed with this during their lifetime; however, only 10% of these diagnoses are children. Therefore, the chance of this happening to a child is 1 in 5 million.

On Monday morning, April 22, I took Tyler to get an MRI to get some better pictures and to see if there were any other tumors. Then we went to meet with the pediatric surgeon and a kidney specialist who were in charge of getting Tyler's blood pressure down to a level where the tumor could be removed. The MRI showed no other tumors or lesions, which was great news. The kidney specialist told Tyler, "This is something I never ever say to my patients, just sit on your butt and play video games." While that sounds great for a day or two, after seven days it got very old very quickly for Tyler.

The doctors working on Tyler decided to increase the blood pressure medication from 10 mg to 15 mg per day. The most the kidney specialist had ever prescribed to an adult was 10 mg, so the dosage was very high. However, the reason Tyler's blood pressure was high was completely different from the reason why almost all other people have high blood pressure. Getting his blood pressure down low enough was proving to be difficult as they were working with a condition this rare.

Tyler did not take well to this and by Wednesday morning they had moved him back to 10mg and then added 1mg of another medicine, which they described as "very potent." Finally, on Wednesday night his blood pressure readings were low enough (high 120's/high 80's) to schedule the surgery for Friday afternoon—ten days after our initial well-check visit to our pediatrician. We were so excited and so thankful.

Tyler went into surgery at 3:50 that afternoon (Friday, April 26) and what was supposed to be a two-hour surgery turned into a four-hour surgery. However, the doctors were miracle workers. The tumor was buried under blood vessels and many items around the tumor had to be removed so they had clean access. Each time the tumor was touched his blood pressure would spike—a few times to over 220. The doctors put in a central

"How rare is this? The surgeon told us that 1 in 500,000 people are diagnosed with this during their lifetime; however, only 10% of these diagnoses are children. Therefore, the chance of this happening to a child is 1 in 5 million."

line (a catheter in his neck which gave them direct access to his heart) to administer medicine to stabilize his blood pressure immediately. By 8:30 that night, my wife and I were able to be with Tyler again and by 10 pm we were in his room at Primary Children's. We spent the next 48 hours at Primary Children's and brought Tyler home Sunday evening.

Ten days after (May 6) Tyler had the tumor removed by a very skilled surgeon and his team and twenty days after his wonderful pediatrician discovered that something was wrong, we had a follow up visit with the surgeon. Had the tumor gone unnoticed, it would have eventually caused great harm to his body and would have been fatal. To make a long story short, we experienced the best-case scenario and what we had all been hoping for and praying for. The tumor was non-cancerous. However, there is always a chance with a Pheochromocytoma that another

HEALTH STATUS IN THE US
Percent of school-aged children 5-11 years of age who are in excellent or very good health: 82.2%
Percent of school-aged children 5-11 years of age who missed 11 or more days of school in the past 12 months because of illness or injury: 4.0%
Percent of children 6-11 years of age who are obese: 18.0% (2009-2010)

one could generate. This is very rare, but it could occur. If it does, the doctors would perform a similar procedure. Now we just monitor Tyler, which now that we know, is a very simple thing to do. Since May 6, he can do anything he feels up to doing. He has played in a number of competitive basketball games, which is a miracle to us.

Everything about Primary Children's Hospital is AMAZING. We are so grateful for the hospital and everything it offers, as well as all of the other wonderful children's hospitals throughout America. We live in a wonderful world where we have been blessed with the miracles of modern medicine, extremely skilled physicians, and a wonderful staff of people at each hospital whom we are grateful for each day. We are grateful for a pediatrician who did a very thorough well-check visit and did not cut any corners. Without this visit, the appropriate procedures being performed by the pediatrician and his staff, and thorough records regarding Tyler's past visits, he would still be walking around with the tumor. As all of the doctors said, it would have just been a matter of time—how long who knows, but we did not want to find out.

“We live in a wonderful world where we have been blessed with the miracles of modern medicine, extremely skilled physicians, and a wonderful staff of people at each hospital whom we are grateful for each day.”

We are thankful to so many people, family, friends, and even some associates from as far away as Chicago and Boston for their concerns, prayers, and offerings to my family. Camille and I have been humbled by the love that has been shown to us. We know this is how we are supposed to treat one another and we are grateful to have been the recipients. It is truly a miracle that only 20 days after discovering the issue, Tyler can do anything he wants.

Med One Capital's major operations are in the leasing, renting, servicing, and selling of medical equipment and providing working capital solutions primarily to acute care hospitals and other medical institutions. However, Med One is much more than that. We provide the opportunity for hundreds of hospitals to obtain critical care equipment to care for their patients. We are so thankful for the vendor relationships that we have as a company and the capital partners that we support and serve in helping hospitals procure the appropriate equipment they need.

As I saw the ventilator that my son was on during his surgery, I thought about the thousands of ventilators that Med One has made it possible for hospitals to obtain. As I saw the different infusion pumps that he was hooked up to, I thought about the thousands of infusion pumps that Med One has sold, rented and leased to hospitals on



unique terms. As I saw the hospital bed he was lying on, the x-ray machine that first identified the tumor, the MRI machine that ensured there were no other tumors, the monitors that charted his progress, the pharmaceutical distribution cabinets that provided his much needed medicine after surgery, the surgical equipment used to remove the tumor, the anesthesia machine used during surgery, and the many other items that were used on my son during that 12 day span, I thought about the thousands of lives that Med One has benefitted since we began business 22 years ago. On the day of my son's surgery it was humbling to know that my son is one of those beneficiaries.

We have provided approximately \$2 billion worth of equipment to hospitals and it is humbling to hear the responses of gratitude we so often get from the hospitals we serve. At Med One, we are very grateful for what hospitals do and the dedication that all of the people associated with hospitals have to care for each one of their patients.

Med One is a great place to have the opportunity to work, to support, and to be a part of the wonderful process of improving people's lives.

Sources: Summary Health Statistics for U.S. Children, National Health Interview Survey, Prevalence of Obesity in the United States

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ACQUISITION SOLUTIONS

FINANCIAL SOLUTIONS

Each solution offered by Med One can be customized to best fit the needs of a specific customer. Contact us today to learn how we can help your facility acquire the equipment it needs.

CAPITAL LEASE

Customer commits to a fixed term of rental payments. At the end of the rental term, customer owns the equipment with a \$1.00 buyout. There is no option to return this equipment. Rather, the point of this program is simply to finance the equipment over several months when cash is not available for immediate purchase. Completing a capital lease through Med One is just a matter of signing a simple agreement and issuing a purchase order. Both the signed document and the PO are then sent directly to Med One. This program is also known as a Rent-To-Own or a \$1.00 Buyout Lease.

EQUITY RENTAL

Simply issue a 1 month renewable purchase order to Med One, and the customer receives brand new equipment direct from the manufacturer. The customer can rent the equipment on a month to month basis or, if capital budget is allocated, purchase the equipment with 50% of the rental paid going toward the purchase price. There is no paperwork to sign, payments are made from the operating budget, and the customer may return the equipment at any time.

OPERATING LEASE

Customer commits to make monthly payments based on an established term. When the term ends, the equipment can either be purchased based on its fair market value, rented for an additional 12 months, or returned to Med One Capital with no further obligation. Completing an operating lease through Med One is just a matter of signing a simple agreement and issuing a purchase order. Both the signed document and the PO are then sent directly to Med One.

12 MONTH RENEWABLE OPTION

Typically, an operating lease deal is done on a term of 36 - 60 months. At times, a customer may have difficulty committing for an extended length of time. If so, we can present a short-term renewable option. The intent is to provide a 3 - 5 year lease payment structure in which the customer is only committed for 12 months at a time and can renew after each 12 month period until the total lease term is met. After this, the standard end of term options are also available, so this option will always qualify under the FASB-13 guidelines.

MAKE IT CUSTOM

DEFERRED PAYMENTS

Deferred payments allow purchase-minded customers to get their equipment now and pay for it later. Many deals are completed on the basis of a 12-month deferral.

STEP-UP PAYMENTS

A step-up payment scenario provides a customer with a very low initial payment which increases over time to match the increased flow of revenue generated from the new technology.

EQUIPMENT RENTAL, SALES, AND MANAGEMENT

We have over twenty years of experience working in the healthcare industry. Our simple documentation, quick turn around time and customer service have no comparison within the industry.

EQUIPMENT SALES AND SERVICES

Our Equipment Services division includes full time OEM certified technicians who can meet the needs of a single department or the needs of your entire facility. We offer service repair options on a wide variety of equipment, including PM services. Additionally, we have patient ready refurbished equipment available for sale or rental that includes a warranty. Available Equipment: Infusion, Respiratory, Oximetry, Monitoring, Imaging, Sleep Study equipment and more.

ASSET MANAGEMENT

Med One Hospital Services works to drive down costs and increase efficiency in hospitals through People, Processes and Technology. We offer creative equipment acquisition options and provide in-house delivery of equipment. Management of equipment and biomedical maintenance provides increased efficiency and better infection control with software analytics that have real-time statistics. We can customize a solution to fit the specific needs of your facility. We are dedicated to reducing costs, maximizing efficiency and improving patient care.

EQUIPMENT RENTAL

Med One Equipment Rental is an authorized rental dealer for Alaris Systems and Sigma Pumps. We carry equipment from leading manufacturers and our refurbished medical devices are patient-ready, include a full warranty, and are factory tested. Equipment Available to Rent: Modular Systems, Syringe Pumps, Infusion Pumps, Patient Monitoring Systems, Pulse Oximeters, Smart Pumps, SCD's, Ventilators, Bi-pap Machines and much more.

Infusion, Respiratory, Monitoring, Oximetry, Imaging, SCD, And More.

Med One Capital exists to provide creative equipment acquisition solutions to the healthcare industry. Whether it's equipment leasing or rental, equipment sales or service, we make medical equipment available to our customers.

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Why We Love LEASING

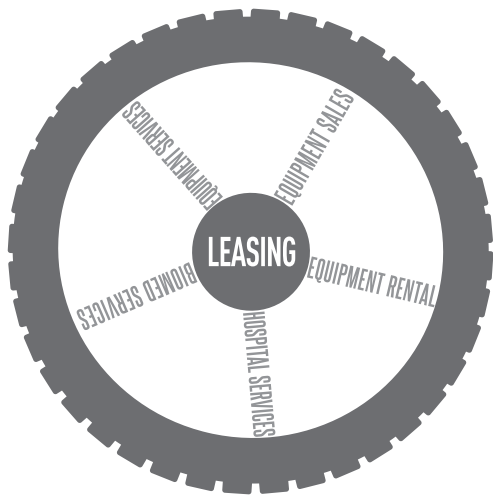
Written By: Robb Stevens

Med One Capital has always been first and foremost, a leasing company. All other aspects of the company are either results of, supplemental to, or enabled by our financing activities. The capital that drives this company comes from the leasing relationships we have. None of the other things we do would be possible, nor would they really even be necessary if

we were not providing leasing solutions to hospitals.

“This is simply the most dynamic and diverse business that exists on the planet!”

When we say “we make medical equipment available,” the first way that happens is through equipment leasing. As lease deals reach maturity, we have an opportunity to bring back many valuable equipment items such as infusion pumps, ventilators, monitors and so forth that can be utilized in our rental division and/or sold through our direct sales division. Leasing is and always has been the hub of the Med One wheel. The other great things we do here at Med One make up the spokes of the wheel as we roll forward as a company.



Our company has evolved a great deal over the years. The positive changes we have implemented, such as our new direct sales force, have tremendous impact on our company’s success. I applaud the owners of Med One who have continually demonstrated the vision and ability to stretch and tweak things along the way.

Adaptability is crucial in life for individuals and definitely for companies. If we do things the way we’ve always done them, then the ever-changing business environment will certainly pass us by. For example, when email became a preferred method of communication back in the late 1990s, Med One joined the trend by having a single company email address through which all possible email communication could be directed. That seems pretty funny now since email is a key part of how every single employee communicates and how most deals get done! What if, as a company, we never evolved from that “one email address” position? Most likely, we’d be left in the dust of other companies that did have the vision and adaptability necessary to navigate an ever-changing world.

The late Oren Harari said it well in his book *Break from the Pack*: “Companies today must be built to change, not built to last. In fact, only by being built to change will they last.”

As a company, the value of our rental and sales divisions are ever-increasing as sources of revenue for Med One. This is especially true in a cyclical economy that does not always guarantee a constant upward trajectory in the leasing industry. This is due to many factors – many of which are beyond our control. There is more competition than ever before so the marketplace is more crowded than ever; austerity on the part of end users means longer sales cycles than we have come to expect; lower rates across the board, which means it often makes more sense for customers to get a loan from their bank rather than use leasing; commoditization, meaning that more than ever before, rate dominates the

discussion while value, added services, and advantages are perceived as less important than in times past. The overall state of our economy makes a huge difference in the mood and purchase decisions of end users.

On April 4, 2013, the Equipment Leasing and Finance Association (ELFA) published a press release that is very telling to the current state of the leasing industry. Here is an excerpt from that analysis:

“The Q2 report predicts growth in the first half of the year will be limited by relatively weak demand and fiscal policy uncertainty. By the second half of 2013, however, investment activity is expected to accelerate due to an

“Companies today must be built to change, not built to last. In fact, only by being built to change will they last.”

improving housing sector, a resurgence of the U.S. manufacturing sector, an energy renaissance and relief from policy uncertainty that will have an unlocking effect on business investment.”

Bill Sutton, President and CEO of the Equipment Leasing and Finance Association, summed it up nicely by saying: “As projected in our 2013 Annual Outlook, the Q2 Outlook anticipates that 2013 will be a tale of two halves, with sluggish growth in the first half of the year, followed by a pick-up in overall economic activity in the second half of the year. On balance, we expect the positives to outweigh the negatives as businesses begin to feel more confident and ready to invest in capital equipment.”



Preventions Dimensions Kids’ Day

More than 11,000 fifth and sixth grade students cheered on the Salt Lake Bees as they beat the Memphis Redbirds at the 10th annual Prevention Dimensions Kids’ Day. The event, held on May 21, 2013 at Spring Mobile Ballpark, promotes safe and drug-free schools and communities across Utah. The mission of Prevention Dimensions is to build skills to prevent substance abuse and violence in children and youth. All students in attendance at the game had to earn their spot by taking a pledge to avoid harmful substances and they were certainly rewarded as the game turned out to be one of the most exciting of the season. After a slow start for the Bees (trailing 3-0), they picked up the pace in the sixth inning and closed the gap. The Bees then scored an impressive eight runs in the seventh inning (the most they’ve had in one inning all season) and ended the game victoriously.

Med One Capital is honored to be part of another Prevention Dimensions Kids’ Day and looks forward to many more years of supporting a program that helps prevent substance abuse and promotes safety among Utah’s youth.

At Med One, we feel confident our decisions are correct and that the leasing is the beginning of a revitalization of our community.

What is it about leasing that makes us so confident and excited every day? It's the fact that our elementary school kids are so happy. Leasing is an interesting, exciting business to be a part of.

As our president, Larry Smith, says, "Leasing is the most dynamic and exciting business on the planet! No two deals are alike. Here are a few reasons why:

- 1 Leasing keeps us (and our customers) on the cutting edge and provides a competitive edge. It enables us and even our customers to be concerned about and up-to-date with the overall economy and the issues in our country.

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- 2 In leasing, particularly

As our president, Larry, has said, we are the most dynamic and innovative company on the planet! No two days are the same. Here are a few reasons why:

- 1 Leasing keeps us (and our customers) on the cutting edge and puts us in a position to lead. It enables us and even our customers to be concerned about and unburdened by the overall economy and the issues in our country.
- 2 In leasing, particularly in equipment leasing, we

1 Leasing keeps us (in the cutting edge and place. It enables us and even concerned about and up by the overall economy issues in our country.

2 In leasing, particularly

“To use the wheel analogy again, we have the wheel of our company’s success, but we need the spokes of our relationships! Without them,

3 Leasing is a unique area that requires a skill set and understanding that not everyone in the world have. It's fun to work with a mix of professionals and companies.

4 Unlike banking, leasing is more flexible – things that we can't bank on are advantages in the sales

5 Leasing is a respected door for our company to open new opportunities over the years. There are many interesting, exciting

6 When we do a deal, we develop a customer relationship that will last for years. Our hospitals and vendors don't just buy and move on; they are typically with us for several years, which often means opportunities for additional business as we work to provide great service to them. That is a built-in advantage that is very unique and valuable to our ongoing success as a company.

7 Through leasing we can provide unique solutions to solve challenging budget situations that hospitals often face in their need to keep equipment current. Thus, we become a key part of their equipment acquisition strategy. In some cases, hospitals call us every single time they think financing might be considered as part of an equipment acquisition.

8 The processes and steps that go into putting a lease deal together from first call to negotiating pricing and T's and C's, to getting final documents signed and a deal up and running are thrilling! The chase is exciting, but the close is exhilarating!

9 In leasing, we get to work with people every single day, people that WANT to buy or equipment or want our solutions. They call us because they want to work with us and they understand that we can help solve their problems. It's typically not a hard sell and they often come back for more because they enjoy their Med One experience.

10 Med One has a great reputation in the market. We are known for our fairness, flexibility, and straightforward and ethical approach to doing business. That starts at the top. Our owners have always approached business that way and our company culture therefore demands it.

To use the wheel analogy again, the hub of the wheel of our company's success is always ALWAYS relationships! Without them, we have nothing. Relationships create opportunities. The spokes of the success wheel are things like dependability, customer service, performance, client focus, and reputation.

Our greatest task therefore, is to identify, manage and monitor customer expectations because if we don't take care of our customers, we can be certain that someone else (some other company) will!

FOCUSING ON
WHAT
TRULY
MATTERS



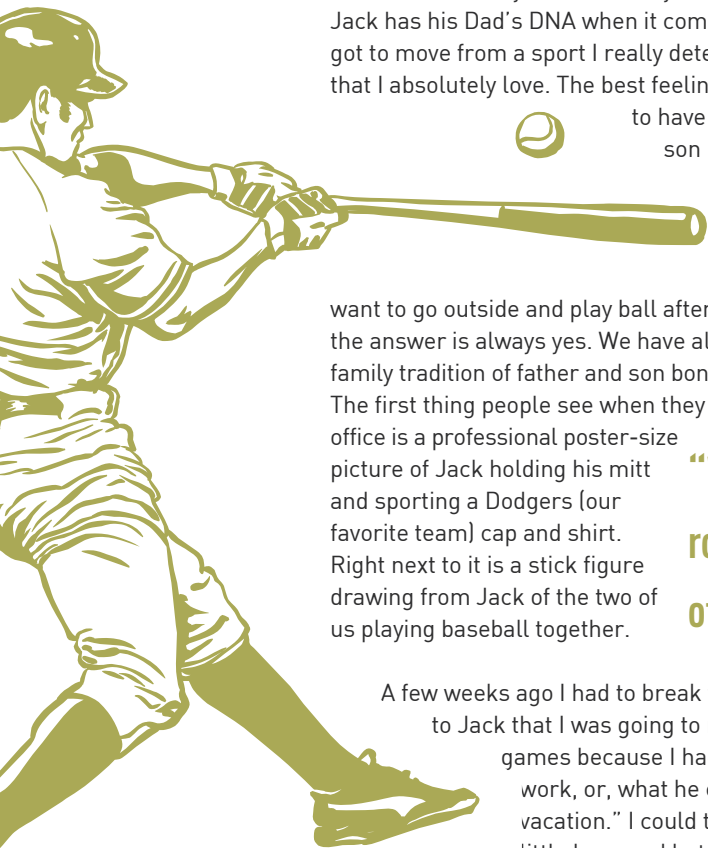
Written By: Doug Green



Doug Green

Babe Ruth said, “Baseball was, is and always will be to me the best game in the world.” I couldn’t agree more. There is something special to me about the game of baseball. I still remember the day I got my first mitt and saw my first curve ball as a hitter. Endless summer nights hanging out at the ballpark or playing catch in the backyard with my dad were the best. Little League memories of making my first diving stop at second base and dislocating my pinky finger sliding head first into third base continue to linger in my mind as an adult. The crack of a bat hitting the ball or the snap of a mitt snagging a line drive are two of the greatest sounds in the world. Even in this day and age of cool technology I would still rather have my boss give me instructions through base running signals than a PowerPoint presentation or email.

One of the hardest days of my life was when I was cut from my high school baseball team and I came to the realization that my days of playing baseball were over. It's been 25 years since I have officially played a game but I still love the sport. Every time I get a chance to see a Major League game, I take it. Listening to the theme music for "Baseball Tonight" on ESPN and catching up on the latest baseball action is the way I unwind after a long day. The best part about baseball for me is that it always included my dad. He was there from my very first tee ball game as a five year old to my last game as a teenager. He was present at almost every practice and he threw me countless pop-flies and ground balls in the backyard for the better part of a decade. Enter my own budding baseball prodigy, my six year old son Jack.



One of the best days of my life was when Jack approached me earlier this year and said, “Dad...I don’t really want to play soccer again. I like baseball.” It was music to my ears. Not only did it reaffirm that Jack has his Dad’s DNA when it comes to sports, but I got to move from a sport I really detest (soccer) to one that I absolutely love. The best feeling in the world is

to have my chubby-cheek son (also a product of his Dad’s DNA), hiding under a Dodgers cap ask me if I

want to go outside and play ball after dinner. Of course, the answer is always yes. We have already begun the family tradition of father and son bonding over baseball. The first thing people see when they come into my office is a professional poster-size picture of Jack holding his mitt and sporting a Dodgers (our favorite team) cap and shirt. Right next to it is a stick figure drawing from Jack of the two of us playing baseball together.

A few weeks ago I had to break the bad news to Jack that I was going to miss one of his games because I had to travel for work, or, what he calls a “work vacation.” I could tell he was a little bummed but he asked me something that took me by surprise.

He said, “Dad, what do you do for work?” I knew the standard stump speech or elevator speech wouldn’t cut it for a six year old, so the best answer I could come up with was that Med One helps hospitals get cool and special equipment so that doctors and nurses can take care of grandmas and grandpas and other people who are sick. He simply responded by saying “Oh...okay.” As I was stuffing the last thing I needed into my suitcase on the morning of the trip, Jack approached me with a baseball in his hand. He gave me the ball and said “Dad, take this ball so that you can remember

that you will always be in my heart.” I’m not a mushy guy by nature but I have to admit that I did get a little verklempt. I said “Thanks buddy...I’ll take it everywhere I go.” The ball hasn’t left my side since. I then apologized to Jack again for missing his game and he said, “It’s okay Dad. You’re going out to help hospitals get equipment to help people feel better like Grandpa.”

My six-year-old reminded me that I had lost sight of the fact that what we do impacts real people. My work days are spent helping vendors and manufacturers create financing structures to accommodate the operating or capital budget cycles of a hospital, explaining terms and conditions of a lease document, or negotiating the final details of a transaction so that a hospital can sign an agreement. Often times that’s how my job is defined. But not to Jack; and Jack is right. When families are visiting

“What they do see, and what they are grateful for, is a room full of the best equipment in the world to take care of the important person lying in the hospital bed.”

a loved one in a hospital the last thing crossing their minds is hospital budget cycles and how they interpret terms and conditions of a lease. What they do see, and what they are grateful for, is a room full of the best equipment in the world to take care of the important person lying in the hospital bed.

It is a remarkable feeling to get up in the morning and go to work knowing that the end results of what you do really can make a big difference in the lives of a lot of people. While we are not the incredibly talented and skilled physicians and nurses that care for patients, we do help to outfit them with the gear they need to diagnose, treat, and work the miracles that they do. It truly is awesome to partner with so many great manufacturers, vendors, and reps dedicated to helping hospitals all over the United States get the critical equipment they need to take care of people like Jack’s Grandpa.



Employee Spotlight

Matt Dance **Web Developer / Designer**

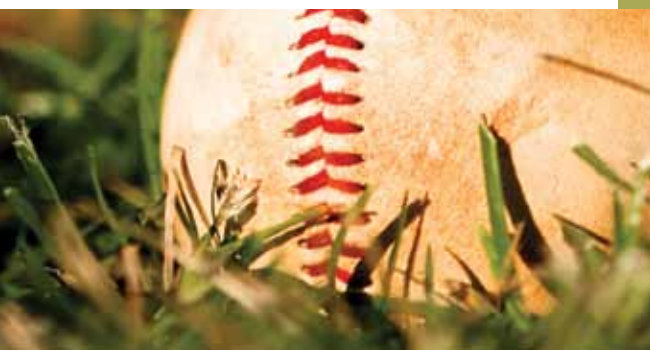
I was born and raised in Idaho Falls, Idaho and only moved once – just one mile from our original house. I had a typical childhood living in a small city in a middle class neighborhood. My father is a VP and manager of a local bank in Idaho Falls, while my mother taught grade school and pre-school. I have five sisters and one brother, for a total of seven children (including me) in my family. With all my brothers and sisters combined, I have 14 nieces and nephews. Needless to say, our family reunions can get a little crowded!

When I turned 19, I served an LDS mission in Detroit, Michigan where I met my eventual wife, Jennifer. Soon after returning home to Idaho Falls, Jennifer moved out to Idaho where we both attended school at Brigham Young University–Idaho. I have a bachelor’s degree in Computer Information Technology, where my passion and love for web development and technology in general grew overnight.

After graduating, I was lucky enough to get an awesome job working as the web developer for Med One Capital. We moved down to Utah and have loved it ever since. The mountains are amazing to see every day.

My wife and I were married on January 16, 2010 and have since adopted our first child, Jackson. He is the center of our lives, and is probably one of the cutest babies you will ever set eyes on. We are incredibly lucky to have him!

To really know me, you have to know one important detail: I’m a huge Boise State fan, and I love college football in general. When football season comes around, the Boise shirts come out and my Saturdays all of a sudden become pre-planned for several months in advanced. My interest in Boise State goes back to when I first saw “The Blue” in Boise. I immediately took notice of the “little” team from Boise and have been mesmerized ever since. Until you see the blue turf in person, you have no idea how awesome it really is! Plus, who else am I going to root for in Idaho?!? Go Broncos!



Where We Stand

COMPANY NUMBERS THROUGH MARCH 2013

MED ONE CAPITAL	MARCH 2013	2013 YTD
NEW EQUIPMENT PURCHASED	\$15,243,664	\$28,245,467
NUMBER OF NEW LEASES	67	
TOTAL CUSTOMERS		2511
TOTAL EQUIPMENT LEASED		\$382,926,250
MED ONE EQUIPMENT RENTAL	MARCH 2013	2013 YTD
TOTAL RENTAL REVENUE	\$443,572	\$1,345,167



Equipment Sales
Equipment Rental
Equipment Leasing
Equipment Service

Our National Sales Team is comprised of experienced professionals brought together for the specific purpose of Making Medical Equipment Available for hospitals and healthcare facilities across the U.S. They are experts in equipment finance, rental and sales, and seek to always put the customer's needs first.



Bill Varley West Coast Region

Bill Varley has over 25 years of experience in marketing and sales. Prior to working at Med One, he worked at several different medical device companies in management positions specializing in Imaging applications, cardiology and infusion. Bill has worked all over the U.S. and internationally to provide better solutions to hospitals and healthcare facilities.



Shaun Covington Intermountain Region

Shaun Covington has extensive experience in the equipment rental business, but has also worked in equipment leasing and sales. With over 14 years in the healthcare industry, Shaun has come to see the hassle customers deal with daily regarding equipment needs, and hopes to be a source for solving problems and helping each facility acquire the equipment it needs.



Sally Bowen Central Region

Sally Bowen has worked at Med One for 11 years in equipment rental, selling pre-owned equipment and providing leasing solutions to hospitals and alternate site facilities. For Sally, working in healthcare is rewarding because providing medical equipment to hospitals in a timely, budget friendly way is providing the patient care we all expect.



Billy Shippers Southwest Region

Billy Shippers has worked in the Medical Device industry for over 22 years. He has expertise in IV pumps and IV consumables and has worked for several different companies selling several different platforms. Billy fell into the industry by chance, but is grateful he has had success and things have worked out so well.



Lindsay Brown Great Lakes Region

Lindsay Brown brings specialty experience in infusion, monitors and respiratory to Med One, along with an additional six years in the healthcare industry. Lindsay enjoys working in healthcare because she likes helping people in need. Knowing the equipment placed in hospitals is keeping patients alive is a great feeling for Lindsay.



Felecia Leckrone Mid-Atlantic Region

Felecia loves the medical industry and is following in her fathers footsteps by pursuing medical sales. She has over 16 years of experience in medical sales that gives her significant knowledge about the challenges that medical institutions face. She is excited to be at Med One Capital and looks forward to help Make Medical Equipment Available.



Jeff Rosenthal Northeast Region

Jeff Rosenthal has worked in healthcare sales, clinical training and marketing for 32 years. He has experience in product training, sales training and has worked with several specialties within the field including Asset Management, OR instrumentation, Biomedical services, Beds, and more. The healthcare industry provides Jeff with a great opportunity to directly assist the sick and infirm.

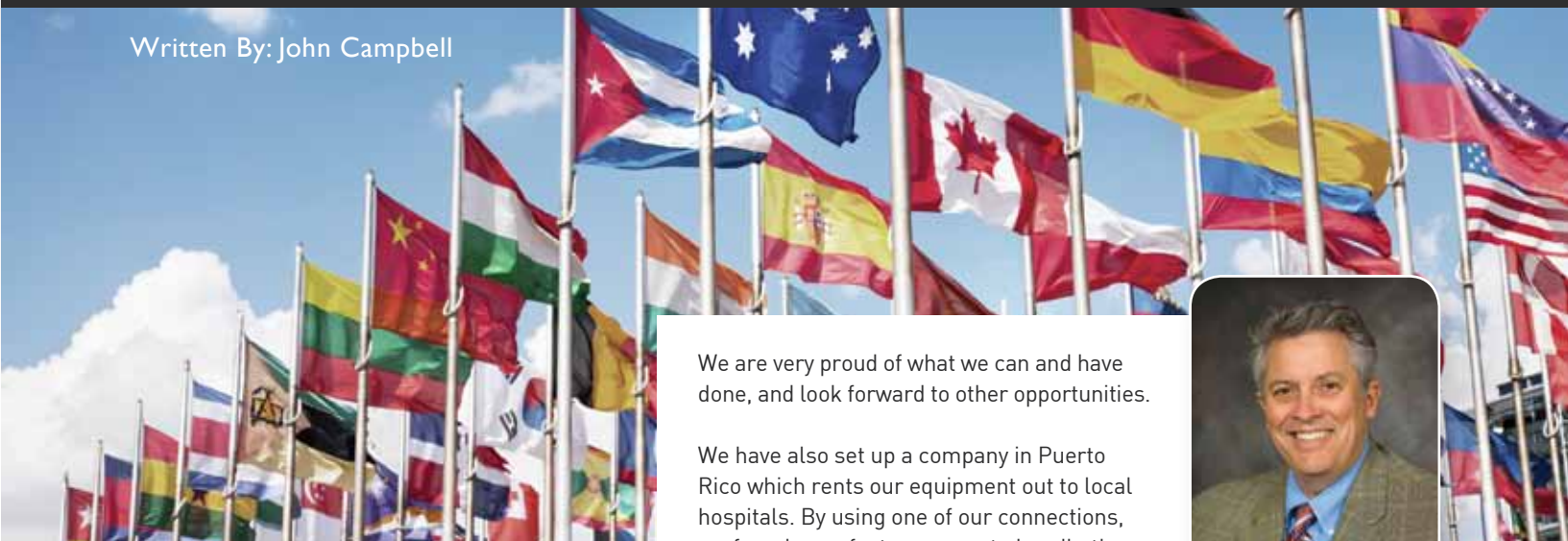


Karen Raven Vice President of National Sales

Karen Raven leads the new Med One Capital National Sales Team and has worked in the healthcare industry for over 30 years. Karen has worked in various roles including Direct Sales, National Accounts and Regional Director. Karen has a background in Infusion and vital Signs Monitors, and enjoys working in healthcare because the products sold save lives every day.

Med One Capital...International?

Written By: John Campbell



John Campbell

We are very proud of what we can and have done, and look forward to other opportunities.

We have also set up a company in Puerto Rico which rents our equipment out to local hospitals. By using one of our connections, we found a perfect company to handle the delivery, maintenance, and disposable sales at the local level. In this instance we had to buy over \$1 million in ventilators but the response from the end users has been tremendous. Now we are looking to expand into different needs for the hospitals that we can service.

We have found over the last two years that doing business in Latin America is both fulfilling and different. The sales model that is used in the U.S. does not work in this section of the world where distribution partners have

“Through our connections in Latin America, we have opened doors to distribute used and refurbished equipment to many countries.”

the connections and their own sales forces. We have found that each country has different customs regulations, billing and collections issues, registration issues and that they all take time.

We are also taking what Med One can do in Latin America to end users in the US. Not only can we meet their leasing needs, but short and long term rentals, asset management, biomedical repairs, pre-owned equipment, disposables and Equity Rentals. We are setting up regional warehouses that will shorten our response times drastically and we have implemented a sales force to call on the end users. We will be looking for other business partners for placement of their products.

Med One is being looked at for what we are WILLING to do, as well as what we are ABLE to do. So far, we have enjoyed great success in our new ventures to make medical equipment available.

Med One Capital is one of the largest private leasing companies in the US. However, many people don't know about the other things Med One is involved in or the markets we are exploring or already doing business in.

Med One is a very progressive company and we are constantly on the lookout for new business opportunities. To that end, we started work on expanding our reach outside as well as inside the US.

Through our connections in Latin America, we have opened doors to distribute used and refurbished equipment to many countries. Through new contracts we can be very competitive in these markets and deliver the type and quality of equipment that benefits all involved at an attractive price.

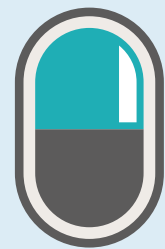
We just finished a large installation of infusion pumps in a Caribbean country. What was so interesting about this was that we are renting the pumps through a local agent who is renting to the hospital. We are also providing the biomedical repair, disposable sales, contracting and all other aspects of this arrangement. No other leasing company could perform in all of these facets...foreign country, renting, biomedical services, preventative maintenance, inservicing, disposable sales, etc.

The upshot of this deal? The patient gets better care with better and safer equipment. The hospital saves money by using our consulting services to recommend the equipment and disposables. The local agent made profits by supplying the Med One resources and Med One was able to dispose of refurbished equipment coming off of a leasing program. Everybody benefitted!

Little-Known Facts

About The Amazing

Human Body



34%
of Americans take at least one prescription drug



11.5%
of Americans take three or more prescription drugs



The number of people who delay or refuse to vaccinate their children is continually on the rise. 49% of children did not receive any or all vaccinations in 2013; up 23% from 2003.



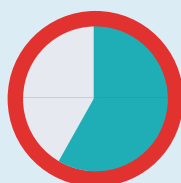
30% OF DEATHS ARE CAUSED BY CARDIO VASCULAR DISEASE

Cardiovascular disease is the leading cause of death in the United States, resulting in 800,000 deaths each year

25% of people sneeze when exposed to light



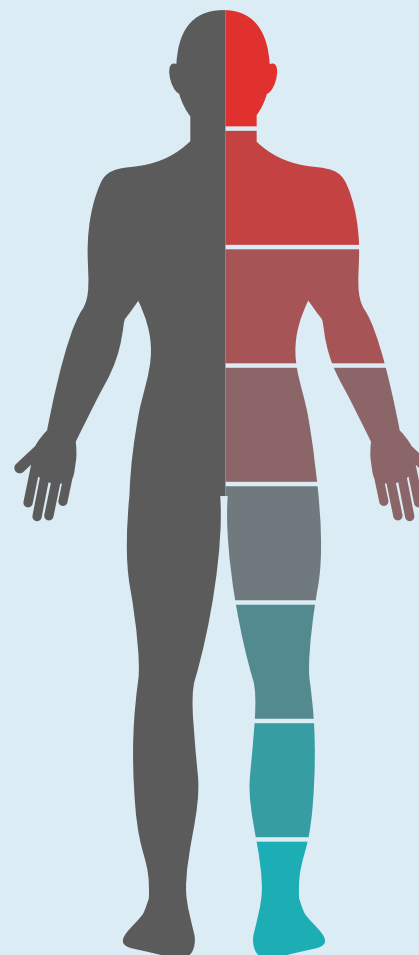
60% of calories are burned while at rest



10% of all males are color blind



1 IN 3 PEOPLE WILL NEED A BLOOD TRANSFUSION IN THEIR LIFETIME



There are 100,000 miles of blood vessels in the brain. The distance around the world at the equator is 24,900 miles.



By the end of a long life, a human heart can beat up to 3.5 billion times.



No matter how hard a person exhales, about 1 liter of air always stays in the lungs.



Humans get a new stomach lining every 3-4 days. Otherwise, strong stomach acids used to digest food would also digest the stomach.



All the blood in a person's body is filtered by the kidneys 50 times each day.



Joints sometimes crack and pop when moving because they release gases that act as a lubricant between the bones.

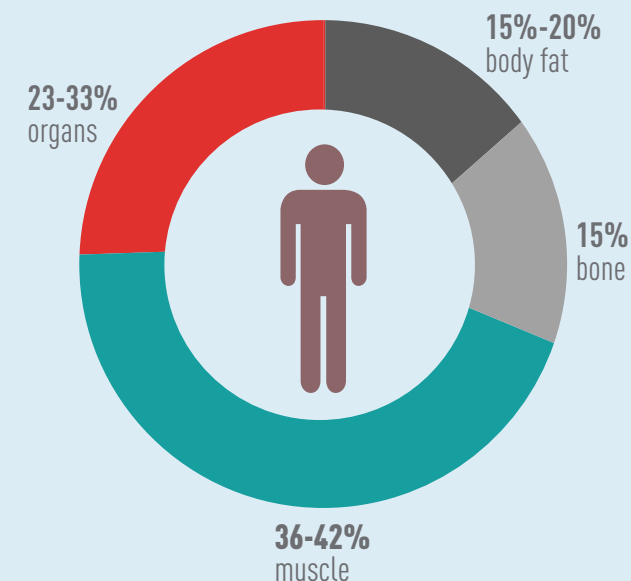


Bones gradually fuse together as a person grows: babies have 300 bones while adults only have 206.



Each foot contains 250,000 sweat glands, which explains why feet often smell worse than the rest of the body.

WHAT IS THE HUMAN BODY MADE OF?



81 YEARS

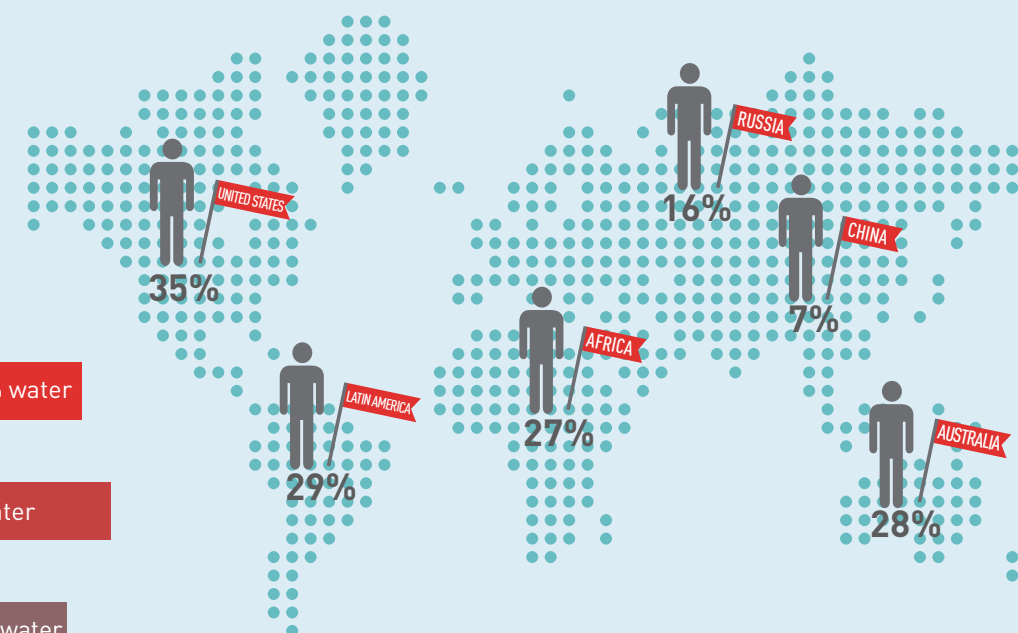
Average life expectancy for women in 2013



76 YEARS

Average life expectancy for men in 2013

PERCENTAGE OF OBESE POPULATION



O+ is the most common blood type, comprising about 39% of the population; less than 1% of the population has a blood type of AB-.



The brain is made up of 85% water



Blood is made up of 92% water



Kidneys are made up of 83% water

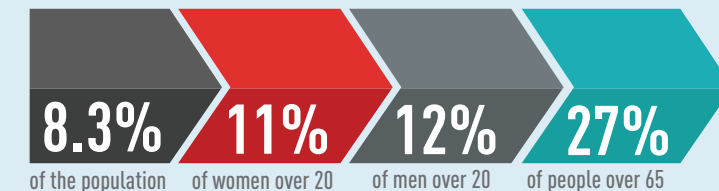


Lungs are made up of 86% water

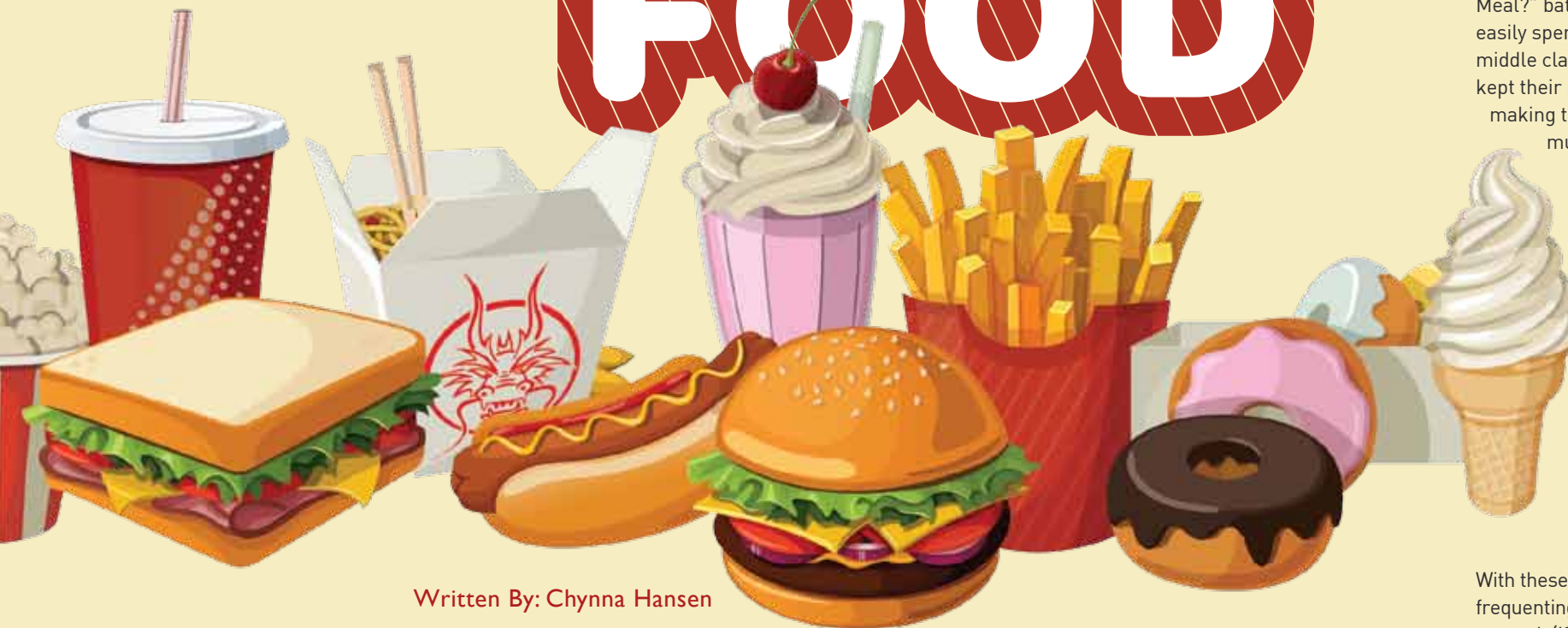


Bones are 22% water

PEOPLE WHO HAVE DIABETES



FAST FOOD



Written By: Chynna Hansen



Chynna Hansen

You've probably noticed the latest trend in the once greasy and cholesterol-drenched fast food restaurant menus across the US. Instead of bragging about how delicious their french fries taste dipped in milkshakes, they're flaunting grilled chicken wraps and yogurt parfaits in the faces of customers who are frighteningly aware of the growing obesity epidemic. And they aren't just advertising their healthy alternatives; in fact, some states are going so far as to make it mandatory for fast food restaurants to post calorie counts on their menus.

How are Americans taking to this paradigm shift? Is it really "fast" food if it contains less than 2,000 calories? Are Americans eating healthier because they know that a Grilled Chicken Snack Wrap contains only 12 grams of fat while their all-time favorite Big Mac contains a whopping 29? Can we really enjoy a beefy 5-layer burrito when we know about those 550 looming calories just waiting to attach themselves to our midsection?

While only two states have adopted the "Calorie Count Laws," (New York and California), twenty more are considering the bold move. In essence, restaurant chains with fifteen or more locations are required

to post calories on their menus or they will face a whopping \$2,000 fine. States such as Massachusetts, Pennsylvania, Utah, and others are voluntarily following suit and are also considering an adoption of the law. On the other hand, Mississippi, the most obese state in the nation, is heading in the opposite direction as it recently passed an "Anti-Bloomberg" law that banned any restaurant to be mandated to post calories on menus.

It's no surprise that now fast food chains are not only posting calories on their menus, but they are offering an increasing amount of healthy menu options as well. While Subway was inarguably the trailblazer in this "fight against obesity," (and hey, they started out that way so kudos to them) McDonald's now offers snack wraps and oatmeal, Taco Bell offers "chef inspired" Cantina Bowls, Wendy's is dishing out a variety of salads, and nearly all fast food establishments are emblazoning their menus with a "400 Calories or Less" section that appeals to dieters and calorie-conscious eaters.

Perks for restaurants making the shift to more health-conscious offerings are seemingly bounteous. Obviously, a broader array of menu options is more

inviting to families looking for a quick meal in between ballet lessons and a soccer game. Dad can get his usual Whopper and large Coke, the kids can get a hamburger while their parents feel reassured that they are eating yogurt cups instead of french fries, and mom can continue her lifelong internal battle of watching her girlish figure with a "400 calories or less item" or treating herself to a fried—not grilled—chicken sandwich.

Healthy options also reduce the stigma of fast food restaurants serving nothing but "garbage" and help kids win that weekly "Please Mom, can we get a Happy Meal?" battle a little more often. While consumers can easily spend up to \$12 on a fresh chef's salad at any middle class restaurant, fast food restaurants have kept their prices on healthy options reasonably low, making their glowing drive-through signs that much more enticing.

But are they reaping the rewards? Is their master plan to fight obesity and simultaneously boost their sales really working?

Consider these facts: More than 25% of Americans eat fast food at least twice each week. A recent study by the ERS showed that Americans spend 42% of their food budget on restaurant food. McDonald's feeds more than 46 million people each day...and those french fries? Those win the award for the most eaten vegetable in America.

With these numbers, most Americans are likely frequenting fast food restaurants at least a few times a month (if not each week). However, according to one study, New York City's calorie label law does not seem to be effective. Overall, consumers are not purchasing fewer calories just because they are on display. In fact, many people find it down right annoying and more difficult to enjoy their indulgence in fast food. Americans don't want to be told what to eat...they just want to eat.

Along with a growing annoyance of calorie labeling comes a few misconceptions about these so-called "healthy" alternatives. Other recent studies show that although fast food establishments are introducing a surprising amount of nutritious menu items, the

overall health benefits of those foods are not much better than any other greasy thing on the menu. For example, "healthy" salads don't contain much more nutritional value than french fries. And, when they are topped with fried chicken, creamy ranch dressing, cheese, and bacon bits, entrée salads aren't a bit less calorie-packed than a cheeseburger. In fact, the average number of calories for an entrée menu item—including salads, burgers, and chicken sandwiches—at a fast food restaurant is 453 (it would only take a breezy six mile walk to work that off!).

In theory, posting nutritional information on menus and offering low-calorie options at fast food restaurants seem like great ways to educate consumers and encourage them to make healthier choices. We have to give credit where credit is due—it was a great idea. But, in all reality, obesity rates are still increasing and restaurants just spent a whole lot of money reprinting their menus with little to show for it. While the calorie list is hard to miss, people are still purchasing an average of 750-800 calories per meal. Not surprisingly, fast food gurus are a little disappointed in their efforts to fight obesity.

The bottom line? "Healthy" to you and "healthy" to a fast food CEO doesn't necessarily mean the same thing. To them, it's about sales; to you, it's about health, wellness, life expectancy, and so much more.

"Consider these facts: More than 25% of Americans eat fast food at least twice each week. A recent study by the ERS showed that Americans spend 42% of their food budget on restaurant food."

In this instance, they win. Their sales haven't suffered, they've successfully convinced many of us that they are serving up healthy balanced meals, yet nearly 60% of Americans are still overweight or obese. Making healthy eating choices doesn't start at a drive-through window, but rather, in the home. Sure, order a side of apple slices with your bucket of chicken—it couldn't hurt. But don't be too distraught when the scale, yet again, reads higher today than it did yesterday.

Sources: www.restaurants.com, www.vivavegie.org

- Number of fast food restaurants in America: over 300,000

- Number of Americans served daily: 50 million

- Number of people McDonald's serves worldwide everyday: 46 million (that's 1% of the entire world's population)

- Percentage of Americans that are overweight or obese: 60%

- Number of people fast food restaurants employ: over 500,000

- Most unhealthy French fries: Dairy Queen (730 calories), Arby's curly fries (631 calories), followed McDonald's (570 calories).

- Americans consume over 216 liters per person of soft drinks annually

- McDonald's sells more than 75 hamburgers every second

- Most unhealthy hamburgers: Carl's Jr. Double Six Dollar Burger (1,520 calories), Hardee's Monster Thickburger (1,420 calories), Hardee's Bacon Cheese Thickburger (1,300 calories)

STATS



The Ever-Changing Technological World



Nate Davis

We live in an ever-changing world of technology. This month Apple unveiled its new mobile operating system, iOS 7, to the world. I find the new design compelling and a step in the right direction for Apple. I am excited to get my hands on it as soon as I can. I was also intrigued by a few interesting statistics presented at the Developer's Conference about mobile web browsing.

Not surprisingly, more and more people are viewing the web on their mobile devices instead of on traditional laptops or desktops. My boss and I were discussing this phenomenon just yesterday. Throughout the evolution of these devices, we went from big mobile phones with small screens to small mobile phones with large screens and now it appears we are creeping back up to bigger screens and bigger mobile phones.

Undoubtedly this evolution presents unique challenges for those designing our websites and coding for them. They must develop websites for different sizes of screens and different network conditions, which is certainly not an easy task. "Responsive web design" is the new buzzword for describing how to solve these problems. Basically, responsive web design is a design approach that provides optimal viewing on specific devices. This means that as a screen size shrinks, elements of a webpage disappear leaving only the essential information on the screen. And as a screen size grows, the webpage is shown in its entirety. With responsive web design, users don't have to zoom in and out on their mobile devices to find certain elements on the page or to read the content comfortably.

I always welcome change in the technology aspects of life. I look forward to seeing what can be created when dedication, time, and some real thought that have been put into a project and I applaud those who take on these types of challenges. I am confident that we will continually be surprised by the innovation and advancement in the technology for mobile devices in the years to come.

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