

THE STORY OF JOHNSON MEDICAL



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Preface

I know there are sceptics who think that the role of technology today is far overplayed and that acquiring the latest, most modern technology is often done simply to avoid being left behind. But in the healthcare industry, technology and science are instrumental in ensuring safe and successful procedures.

When I met Mr. Agne Nilsson, it was one of those rare occasions when one meets an inventor who is deeply involved in improving the state of healthcare, a very noble cause indeed. I was shown in detail the manufacturing processes and the resulting products in the Malaysian facility of Johnson Medical's Global Supply Centre. By developing and patenting state-of-the-art medical technology, Mr. Nilsson has managed to deliver "Safety Through Innovation™". Since then, I have

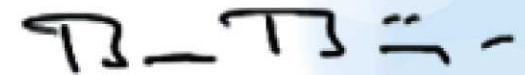
been a very keen fan of Johnson Medical's work.

The Managing Directors of Johnson Medical Group, Ms. Yeo Eng Lam and Mr. Lee Haw Shyang, have tremendous knowledge of networking in the healthcare industry in the areas relevant to Johnson Medical. They have demonstrated their international marketing skills by successfully introducing Johnson Medical to China in 2003, and more recently to India too. I know that in time, Johnson Medical will be a household name for medical equipment not only in South East Asia, but worldwide too.

Having spent four very rewarding years in Malaysia, I naturally support all endeavours which can bring our two countries closer together. Johnson Medical is an excellent case study - it is a partnership between a

creative Swedish inventor and two gifted Malaysian marketers. In cases such as this, 'one plus one' becomes much more than what mathematics tells us. The partnership of Swedish and Malaysian inspiration, talent, and passion for the product, has led to the successful company Johnson Medical is today.

I am delighted to see that the company's vision and strategy have led it to success, and I wish the company and its dynamic partners all the success in the future.



*His Excellency Bruno Beijer
The Ambassador of Sweden in Malaysia, 2011*

Brilliance Uncovered

The story of Johnson Medical is like a story of a beautiful painting. A painting needs a dreamer to bring it to life, the first benefactor to commission its creation, and a clever art-dealer to realise its full potential and value, thus enabling the painter to continue delighting collectors with his stunning work.

Similarly, Johnson Medical's creative force is Agne Harry Nilsson; Curt Borgensten was the first financier who invested in Nilsson's inventions and Yeo Eng Lam and Lee Haw Shyang are the business-brains who took the company from its humble existence and made it into a formidable player in the medical equipment industry internationally.

Let us unfold the story from the beginning.

It all started with passion – a passion to understand the miracle of the human body, and a noble wish to improve the quality of human life through innovation.

They say that the human mind is capable of astonishingly creative achievements, but only after it becomes aware of its own creative ability. The story of Johnson Medical is closely tied to the story of one individual – Mr. Lars Agne Harry Nilsson, and his journey of discovering his own multifaceted, creative potential.

Agne Nilsson, a Swedish biomedical



Inventor & Founder: Lars Agne Nilsson

engineer, was known to people as a “problem solver”. He loved problems because they challenged him, and he was known never to walk away from a predicament without creating a very feasible solution for it.

Back in the 60s, in the early days of biomedical science, the Swedish Association of Biomedical Engineers and the country at large, numbered only six biomedical engineers, Agne Nilsson was one of the six.

At the very beginning of its existence, the association created a manifesto called “The Designer’s Goal”, which stated that

ergonomics and the human factor should be the most important guidelines for product engineering. Nilsson took the manifesto to his heart and instilled it as his own guiding star to product design for decades to come.

In 1961, Nilsson was working for the Royal Swedish Air Force, and the Air Force was facing a problem – its fighter planes were crashing when flying supersonic speeds at very low altitudes, necessary to avoid radar detection. Everyone knew that this was due to the autopilot's instant failure when flying in such conditions, alas no one knew exactly why the autopilots were crashing.

At the time, young Nilsson was involved in

monitoring pilots' reactions in critical situations by using fighter-plane simulators, then the biggest computers in existence. He had a simple idea that subsequently proved to be priceless. By measuring a pilot's pulse, ECG, blood pressure and other vital signs in different flying conditions, interestingly enough, Nilsson's team discovered that the atmospheric pressure over a lake was much higher than over a forest. Therefore, if a plane made a sudden dive, it hit a sort of a pressure-wall, which scrambled the autopilot, causing its immediate crash. Since this sequence of events happened in matter of seconds, the pilot had no chance to take over, and the plane crashed with all certainty. Thanks to

Nilsson's team's work, the Swedish Air Force stopped its fighter jets from flying supersonic speeds at below-the-radar altitudes, saving lives and preserving investments.

This project in which Agne Nilsson was faced with the intricate engineering of the human body, its electrical synapse and their collaborative functions, enthused young Nilsson to apply his concentrated interests and undeniable expertise to the field of medical science. Over the years, this prolific inventor created a vast number of patented products and registered designs in the field of medical equipment and medical support systems.

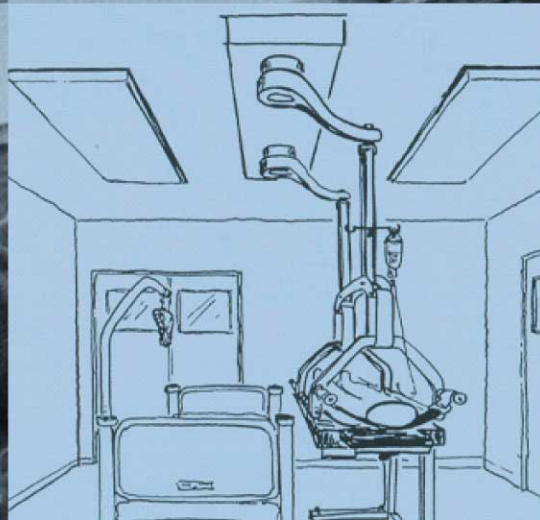
SVERIGE



PATENT- OCH
REGISTRERINGSVERKET

PATENT MEDDELAT

11 JULI 1974





Fascination Meets Chance

The dedication and brilliance of Agne Nilsson did not go unnoticed – a number of awards followed in the wake of his work. In 1979, the European Patent Office selected Nilsson's patent for a 'patient hoist' as one of the ten most significant patents in its field that year. The other recipients in the category were very large organisations that included Bayer and Hoffman La Roche. Another very notable award Nilsson earned for his work was the citation by the Swedish National Development Foundation in 1986, which named Agne Nilsson as 'one of Sweden's most merited biomedical engineers and hospital planners.'

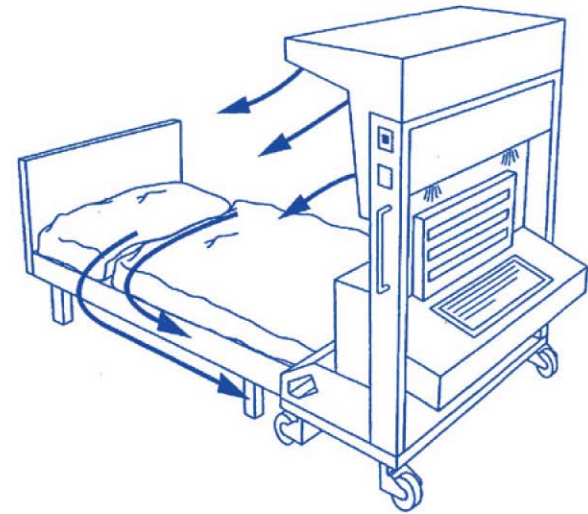
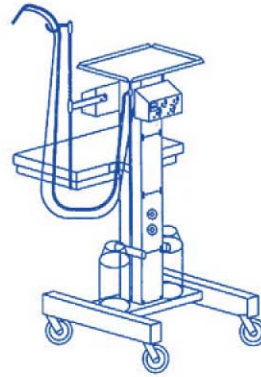
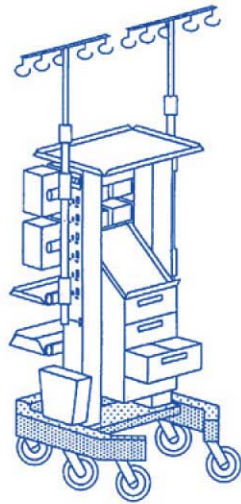
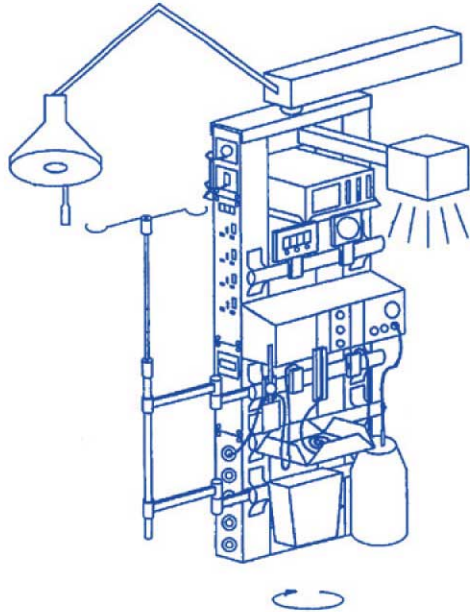
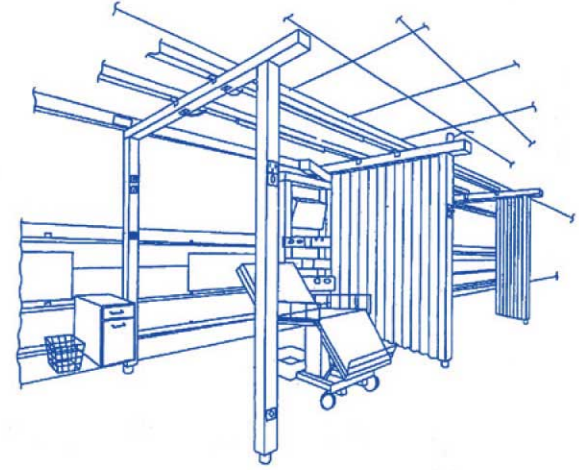
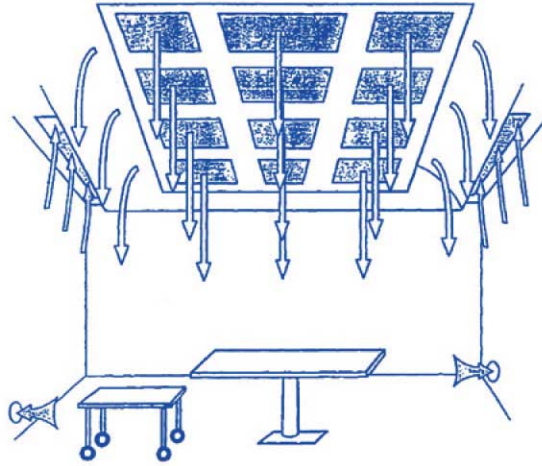
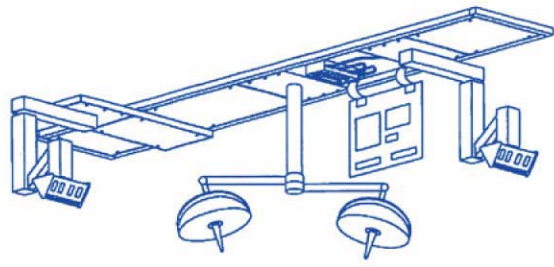
It, therefore, did not come as a surprise to anyone when Nilsson was selected by the


Swedish government to coordinate the "SCAAN" team of consultants that included hospital architects, hospital planners, medical equipment specialists, M&E and biomedical engineers, to assist the Malaysian government in developing a new Health Services Plan in 1991. The SCAAN team, with Nilsson as its coordinator and the CEO of the Kuala Lumpur-based office, became deeply involved in the process of planning new and upgrading a score of existing hospitals in Malaysia.

But, Malaysia was not all work and no play for Agne Nilsson. The country, with its tropical weather, beautiful flora and hospitable people, was known to charm many an expatriate into staying longer than

intended. Nilsson was not an exception. While working in Malaysia and travelling to its district hospitals, Nilsson's passion for painting was reborn.

He became mesmerized with the sweeping sights of rice fields and quaint little villages made up of bamboo-covered houses on stilts and surrounded by thick jungle. The stillness and quiet beauty of the then not heavily industrialized country became frequent portrayals on Nilsson's paintings.





Idea Is Born

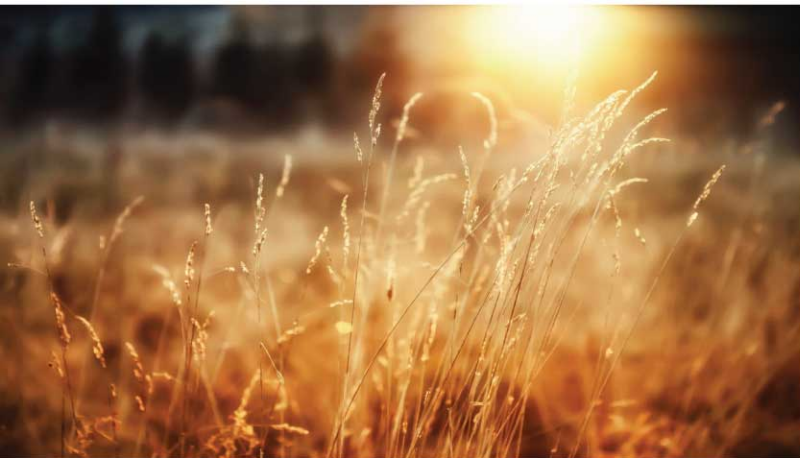
While painting was something Nilsson enjoyed in quiet moments, his mind of a problem-solver was increasingly more occupied with an issue that was present in the healthcare industry all around the world, and acutely so in Asia, at that time. He realised that the market was full of expensive and very complex medical equipment supplied by the multinational giants.

Nilsson had an inherent feeling for simplicity and he wanted to make affordable medical equipment that would be easy for the medical staff to learn to use, and for the engineers to install. He was convinced beyond any doubt that such devices would

create a safer and better working environment in hospitals, thus benefitting both the medical personnel and the patients.

His conclusion was that the only way to go forward with the medical equipment engineering was to go modular, and he decided to apply this realisation to building modular medical pendants for operating theatres. By using a number of simple aluminium-based modular systems and a basic pillar, or a cabinet, hospital operating theatres could have tailor-made solutions built from selected items the end-users really needed.

From Idea to First Medical Pendant



In 1993, as Malaysia soared to the heights of its economic boom, Agne Nilsson prospered as well. Coincidentally, as fate usually has it, he met a Swedish businessman Curt Borgensten, who was not a stranger to doing business in this country. Borgensten had already invested in, and made successful a number of organisations in Malaysia including the Johnson Suisse Group of companies.

After a couple of discussions over spicy, delicious Malaysian dinners, Borgensten was completely taken with Nilsson's idea of modular medical equipment pendants for hospital operating theatres, and he decided to invest.

Not wasting any time, he became the major shareholder of the company that was promptly named Johnson Suisse Medical (JSM).

With the initial investment secured, Nilsson's plan for a unique, maintenance-free, modular medical pendant was brewing with full force. He researched his idea thoroughly by talking with doctors, nurses and hospital's administration. Knowing that his product had to be functional, practical and durable, he decided that his first medical pendant would be designed to carry all essential medical gases, electrical services, and adjustable trays for an efficient

management of medical equipment that medical professionals need in their work.

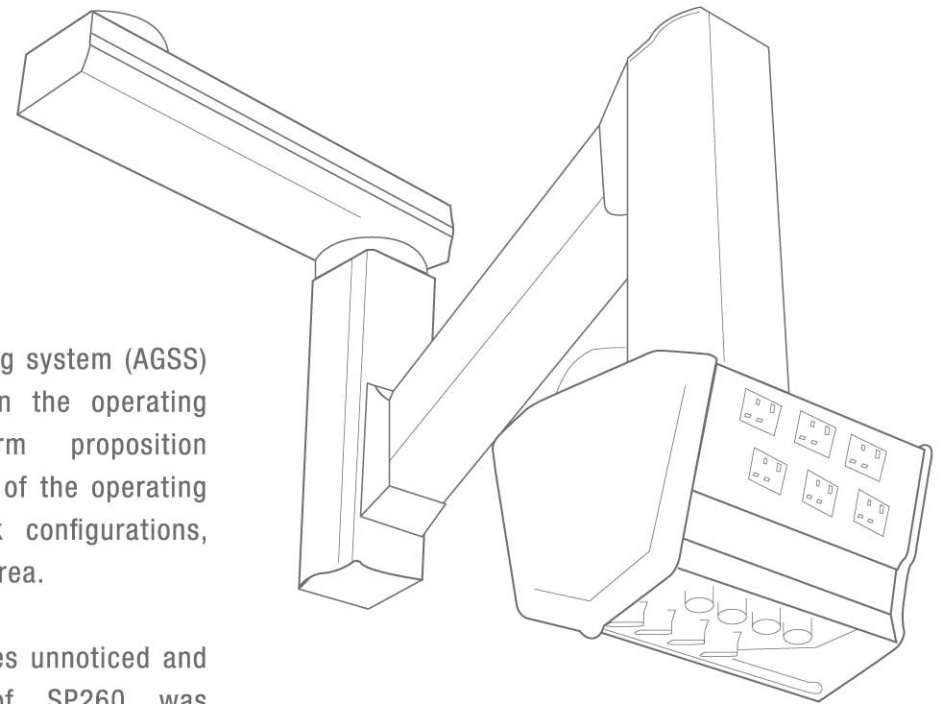
But he could not do it alone. He invited to Malaysia two of his best friends and long-term colleagues to work with him on the first prototype. Erik Persson, a notable Swedish designer and Rolf Johansson, a specialist in medical and industrial gas installations worked nearly 20-hour days for a full month to built it.

Some 600 hours later, the surgeon's pendant, model SP260 was born.

It was designed to provide faster, safer and more efficient access to medical gasses,

anaesthetic gas scavenging system (AGSS) and electrical services in the operating room. Its double arm proposition accommodated the needs of the operating teams for multiple work configurations, covering a large working area.

A great product rarely goes unnoticed and the first installation of SP260 was commissioned in the University Hospital of University Science Malaysia in Kubang Kerian in early 1995. The hospital had twenty six operating theatres and it had purchased Johnson Suisse Medical's modular pendants for all of them.



A New Generation Of Design

Guided Airflow Ventilation System

If there is one invention where Agne Nilsson absolutely exceeded all expectations and topped his own genius, it was his invention of Guided AirFlow (GAF) ventilation system. From the day of its invention until today, Johnson Medical's GAF has remained the technology-leader in its field.

It might not sound very important to a layman's eye, but a ventilation system is extremely important for a successful surgery. Despite spending years on perfecting surgical procedures, they often fail the patient because infections set in. One of the main culprits of these

post-surgery infections is a less than ideal airflow system in the operating theatre, which can direct bacteria-carrying particles right into the wound.

At the time, when Agne Nilsson was studying this predicament, everyone thought that standard ventilation systems that included laminar down-flow, mixed ventilation and laminar op-box, were doing a fine job.

Skeptics thought that the brilliant mind of Agne Nilsson was dwelling on a problem that did not even exist!





But he kept on. He kept telling himself that once in the history of the human race, people thought, indeed very seriously, that the Earth was flat and carried on the back of a giant tortoise.

The supply of air to an operating room has four main functions: to control the temperature and humidity of the space; to assist the removal and dilution of waste anaesthetic gasses; to dilute airborne bacterial contamination and to control air movement to minimise the transfer of airborne bacteria from less-clean to clean areas.

While others thought that the existing ventilation systems were doing a great job to incorporate these functions, Nilsson saw very clearly how dangerous they were.

Laminar Down-Flow ventilation system could not control the airflow which meant that dirty air was constantly re-circulated. It could have been a good solution if only the doors of an operating theatre could remain closed throughout the surgery. Unfortunately, with the standard high traffic of anaesthetists, nurses, and trolleys in and out, this was but wishful thinking.



Similarly, the Mixed Ventilation and Laminar Op-Box systems carried serious disadvantages – the former could not control the airflow better than the Laminar Down-Flow could, and the latter stipulated that surgeons had to wear tightly sealed surgical garments and hoods with a special extraction system. This caused surgeons discomfort from poor mobility, inadequate visual contact and impaired communications through the hoods.

Nilsson's idea was that the ventilation system in an operating theatre must be able to guide the airflow to blow the

bacteria-carrying particles away from the patient. He designed it on the concept of low velocity airflow, guided by a high velocity ultra-clean air-stream that was fed in by an air jet and exhausted into a diagonal 45° airflow system.

At the same time, the air was exhausted from the theatre through a special double-wall, low level exhaust system located on the opposite wall. The controlled exhaust rate produced positive pressure to displace contaminated air away from the surgery site.



The Johnson Suisse Medical Guided AirFlow (GAF) succeeded to control the air velocity at only 0.25-0.3m/s over an operating table to ensure a patient's wound did not dry up, while also achieving an ultra-clean operating theatre at less than 10cfu/m³ as required by the International Federation of Infection Control. It also provided a comfortable working environment for the surgeons – a combination no other ventilation system could achieve.

But this was not enough for Agne Nilsson. He would never let his pragmatism leave him, and so he decided that Johnson Suisse

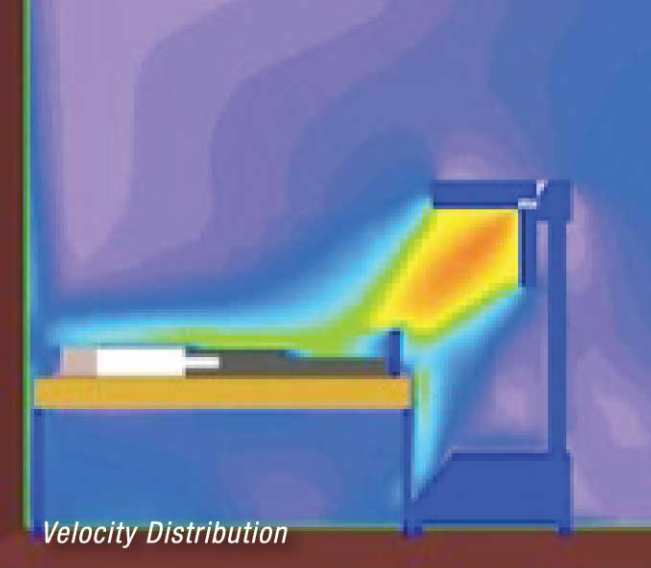
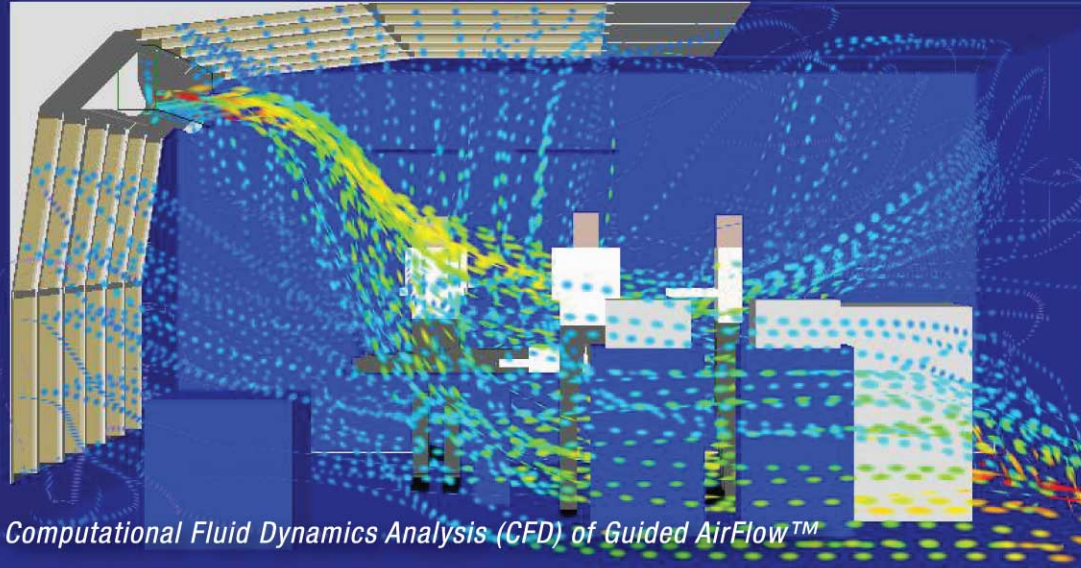
Medical's GAF must be able to offer the world's best functionality on much lower energy utilisation rates.

The result was that the system has successfully functioned at 60-80% lower energy consumption rate in comparison with the conventional Laminar AirFlow ventilation system, which needed a much higher air infusion into the theatre to meet the same ultra clean specifications.

The company has recently started working with Bassett Applied Research, a research specialist located in Australia, to conduct a

Computational Fluid Dynamics (CFD) study which has validated all of the company's claims pertaining to its Guided AirFlow ventilation system.

CFD is a computer-based simulation that is able to model and predict airflow, humidity, temperature and the bacteria-carrying particles' movement within a specified space, enabling users to see the actual results of the desired ventilation system prior to its installation.



Johnson Medical's Patented Guided AirFlow™ controls the direction of air flowing through the operating theatre, providing an Ultraclean environment in the surgical field.

Guided AirFlow™ helps save operating cost in terms of energy consumption by the HVAC system and consumables of HEPA filters. A smaller GAF was developed in view of isolation and field surgical environment.

Visionary Meets Strategist

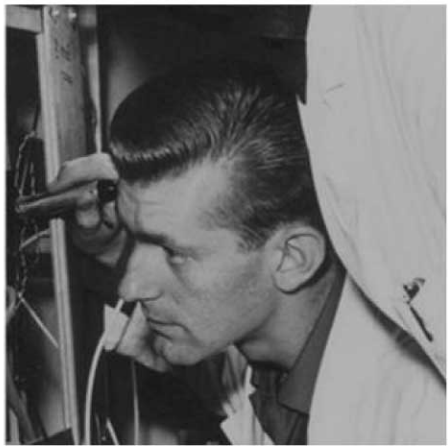
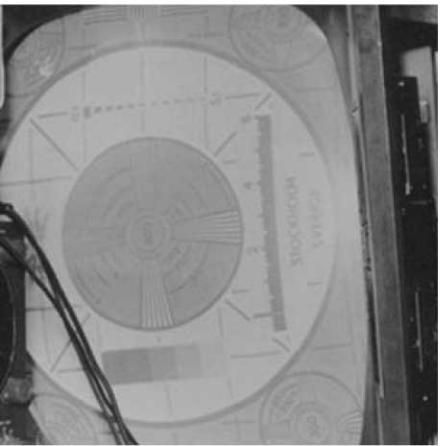
As it usually happens with great inventors, they only have the interest and the time for one great passion – their creations. Nilsson was not any different. His mind was purely interested in translating solutions to the customer problems into tangible and affordable products.

The actual running of the company eluded his list of 'to-do' things. But he finally had to face the real world, the one in which a business can run purely on the greatness of its products only for so long.

Johnson Suisse Medical needed fresh blood. It needed someone who understood the nuances of marketing a medical business; someone who knew how to organise the company's product line into a portfolio of very saleable medical equipment and support systems on a world-wide scale.

With the backing of new investors, Yeo Eng Lam and Lee Haw Shyang became the new managing directors in the company that from then onwards has been known simply as Johnson Medical (JM).

Memories



International Standards Recognition

Knowing very well that customers were becoming increasingly more quality-conscious, the new managing directors decided to give them the outright assurance that the Johnson Medical products would meet their needs then and in the future.

They did this by getting the entire portfolio of the company's patented products certified by international verification bodies as safe, functional and of the highest quality.

In 2003, Johnson Medical received its CE 0120 certification, which called for a big celebration in JM's Global Supply Centre in Malaysia.

The CE-marking meant that the company's products were in conformance with the EU Product Safety Directives, one of the world's most respected standards for product safety, and a must-have for all common-use products imported into Europe.



Soon after the CE-marking, the ISO 9001:2000 certification was granted to Johnson Medical products. This certification demonstrated the company's commitment to quality, customer satisfaction and to integrating customers' changing requirements in its product design and manufacturing process.

Going Places



Johnson Medical booth at MEDICA exhibition in Dusseldorf, Germany

Johnson Medical expanded into the regional markets throughout Asia, and continue to maintain strong presence in Malaysia and Singapore.

While embarking on China market, Johnson Medical worked through a network of carefully selected partners such as Datex Ohmeda, a leader in the anaesthesiology field; local resellers and distributors.

Finally, feeling that the China market

needed a greater commitment, as it had quickly become one of the world's largest consumers of medical devices, Johnson Medical opened its first office in Shanghai in 2003.

A year later, Tyco Healthcare Inc., an international manufacturer generating over US\$4.0 billion a year in revenues, decided to partner with Johnson Medical in China. Tyco deployed Johnson Medical's pendants in its own, brand new US\$5 million Tyco



Johnson Medical booth at the 51st China Medical Equipment Fair (Wuhan, 2004)



Johnson Medical booth at the Ministry of Defense Exhibition

Clinical Institute in Shanghai, which featured operating theatres and intensive care units.

With India emerging as the most preferred Foreign Direct Investment (FDI) destination following China, it naturally became the next target on Johnson Medical's list of markets to penetrate. Johnson Medical's liaison office in India was established in 2006.

Recent collaborations include Singapore Emergency Care Medicine and Universiti Tunku Abdul Rahman (UTAR) Engineering Course in hospital facilities management, and HITV Tissue Culture and Cell Therapy Laboratory.

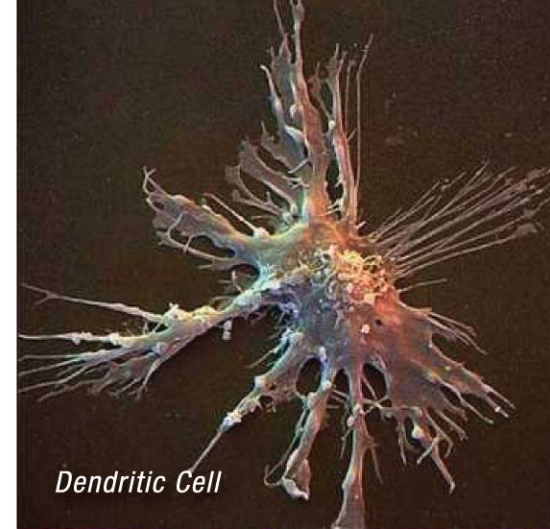
Unique Solutions To Customers' Challenges

From its inception, Johnson Medical has listened to its customers and it has been creating products that solved real problems. Today, Johnson Medical has more than 100 highly satisfied customers across the Asia region. Their unique problems and requirements have been a continuous drive for the company to push the idea even further in terms of efficiency, safety and comfort.

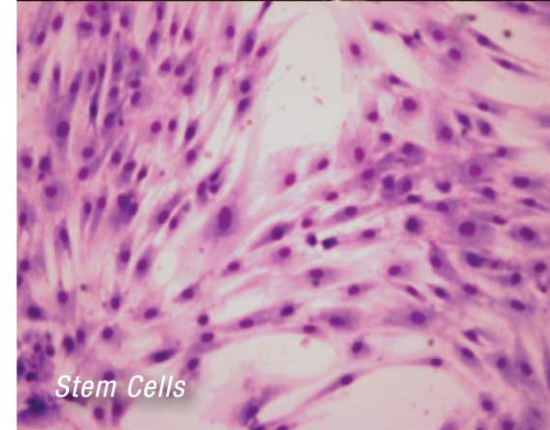
Tissue Culture: Stem Cells & Dendritic Cells

A group of researchers in Asia commercialise Cell Therapy. They faced challenges of Clean Room of Class 100 Cell Culture Room and repeating the business model in every country due to limited transportability of cells and technique.

Johnson Medical helped built the facilities and bridged the business challenges.



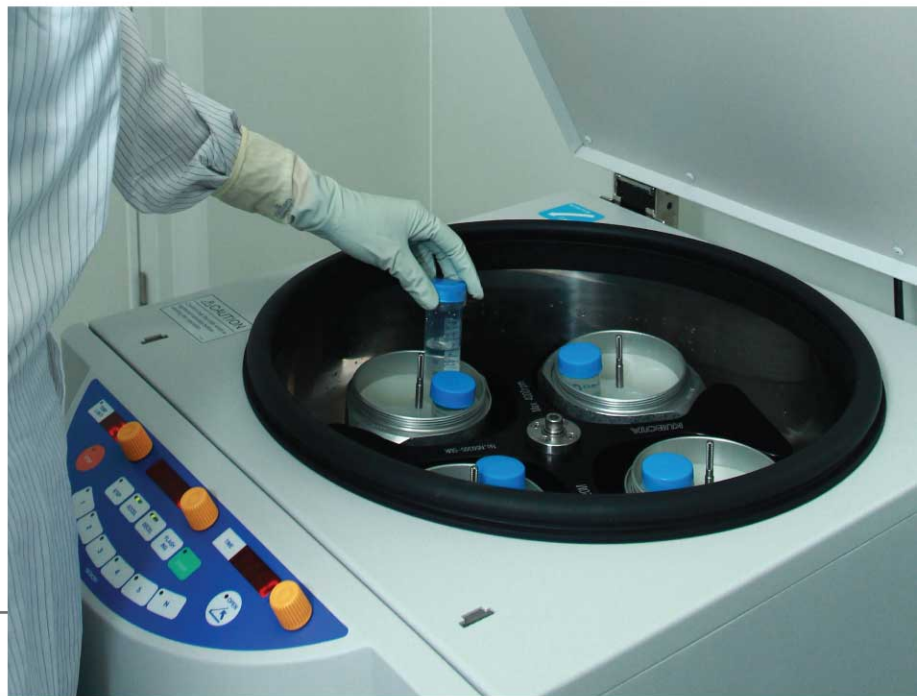
Dendritic Cell



Stem Cells



Clean Room of Class 100 Cell Culture Laboratory



Challenges of a SARS ward

People say that a second helping is a positive sign of good food. A leading hospital in Singapore has not only had the second but its third helping of the Johnson Medical products.

Five years after the first installation, the hospital came back to Johnson Medical for more equipment and fluid management pendants for their SARS isolation ward. At the time when SARS virus was taking lives with regrettably swift speed, readily-available

medical services and reliable medical equipment made the difference between life and death.

In such dire circumstances, the hospital showed its utmost confidence in the performance of Johnson Medical's solutions.

During the construction of the new SARS wards, the hospital faced a space constrain issue as well. Johnson Medical provided an ideal solution with its slim pendants able to take on a high loading weight with impressive flexibility resulting from their



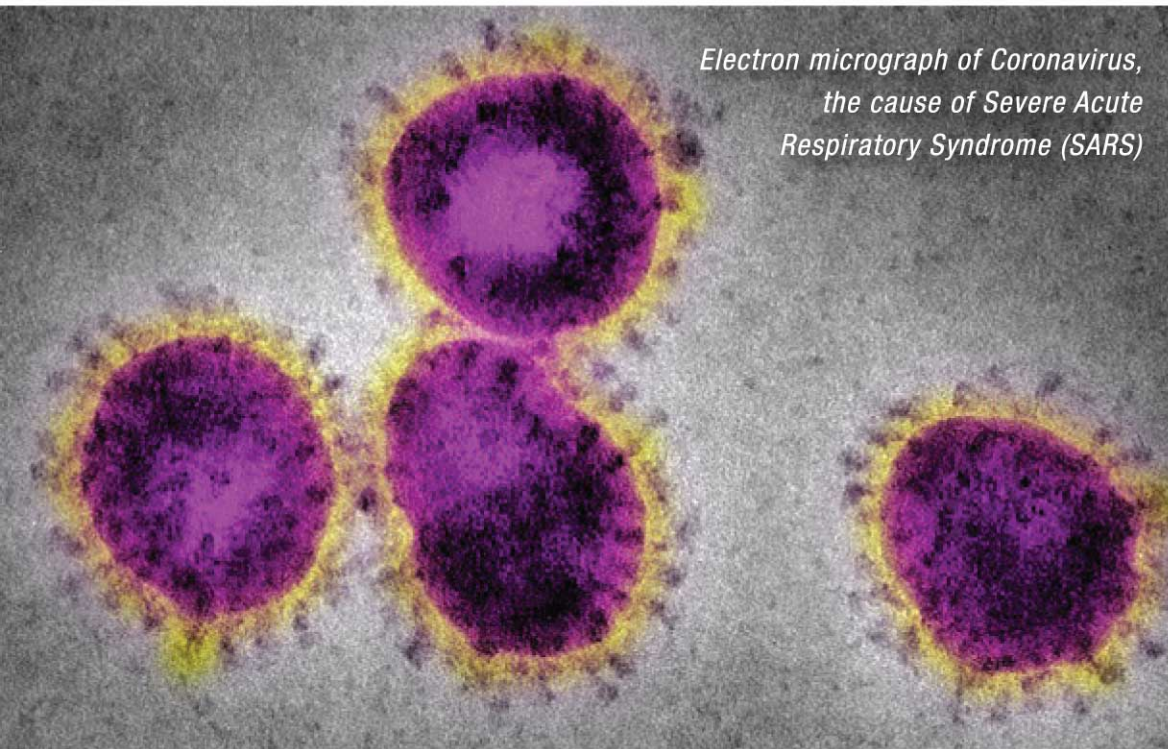
320° rotation single or double-arm configurations.

Subscribing to the old adage, 'a friend in need, is a friend indeed', the hospital believed that, if it could count on Johnson Medical to deliver high-quality, reliable and innovative products on a short notice, under calamitous conditions, they could always.

The result was that the hospital ordered medical pendants from Johnson Medical for its Accident and Emergency units again in 2005.

SARS Disease

Severe acute respiratory syndrome (SARS) is a respiratory disease in humans which is caused by the SARS coronavirus (SARS-CoV). There has been one near pandemic between November 2002 and July 2003, with 8,096 known infected cases and 774 deaths (a mortality of 9.6%) worldwide being listed in the World Health Organization's (WHO) April 21, 2004 concluding report.



*Electron micrograph of Coronavirus,
the cause of Severe Acute
Respiratory Syndrome (SARS)*

Testimonials

P. D. HINDUJA NATIONAL HOSPITAL & MEDICAL RESEARCH CENTRE

(Established and managed by the National Health & Education Society)



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February 6, 2008

TO WHOM IT MAY CONCERN

This is regarding our experience with Guided Airflow of **JOHNSON MEDICAL SERVICES**. Year or so back while evaluating various modes available for renovating our 8 operation theatres we came across Johnson Medical Guided Airflow System and a novel way of constructing the walls of the theatre. The thing that impressed us was a very intelligent combination of laminar airflow economically used to make the airflow over the operation table and the air sucked out at two places on the opposite wall enabling the filtered air to flow over important area of operation theatre. It was claimed that this will ensure a good airflow system at 1/3rd the cost. The Johnson Medical people started the work at Hinduja Hospital around June 2007 and completed it by December 2007. Our observation over last 2 months have substantiated their claimed and our microbial sampling of various theatres ensuring us a virtually bacteria free theatre air together with the important considerations of the organisms. The theatre air also ensures adequate airflow 20 – 25 times an hour a good relative humidity and low sound level. I am glad to state that we are very satisfied with Johnson Medical Services performance.

DR. R. A. BHALERAO
Director Medical Planning & Projects
Formerly Director Professional Services

Dr. R. A. Bhalerao
MS, FRCS, FRACS
Regd. No. 15395
Director Medical Planning & Projects
Surgeon Gastroenterology & Liver Diseases
P.D. Hinduja National Hospital



Dr. Seemanthini Desai

MD (Microbiology)
Consultant Microbiologist & Infection Control Officer

Sources of exogenous infection in the operation theatre could be the air and the environment of the theatre. Standard cleaning, disinfection and sterilization procedures, good theatre practice and discipline can provide a microbiologically safe environment. Air borne contamination is mainly derived from the personnel in the theatre and their activities. The bacterial count in OT is influenced by the number of individuals, ventilation and airflow. Failure to provide adequate operation theatre ventilation associated with risk of postoperative infection has been described. Theatre ventilation has been found to be a critical factor in speciality surgeries like prosthetic and joint surgery. In a multicentric study of hip and knee operations, incidence of sepsis in operations performed under laminar flow was significantly lower than in operations performed under conventional ventilation.

Apollo Hospitals, Bangalore:

The Johnson Medical's guided airflow has been installed in 3 of the 9 operation theatres. The Apollo Hospitals being newly constructed, getting the theatres started was quite a task, as we had to analyze the fungal and bacterial growth, their characteristics and suitable disinfectant to sterilize the OT environment. We isolated plenty of nonspecific bacteria and Staphylococcus species, Aspergillus species, Penicillium species and Neospora species in all the operation theatres. To clear the surfaces, we used high-level disinfectants (Virkon 1% and Bacillicid 2%). To sterilize the air we fumigated the area with 20% Formaldehyde every once in 48hours for next 10 days. During the break up time, we switched the guided airflow systems on in the 3 theatres. The air analysis was done by Settle plate and by swab culture method. After such intense fumigation, we isolated Neospora species in all theatres except the theatres with Johnson Medical's Ultra Clean OT. Intense fumigation in the next 10 days sterilized the theatres without Guided Airflow. Moderate fumigation together with functional guided airflow removed all difficult fungus in Johnson Medicals' Ultra Clean OT.

During the last 5 months after the theatres were opened for surgeries, we did not isolate environmental contaminants during the weekly air sampling in the Johnson Medical's Ultra Clean OT, while other theatres samples continue to isolate nonspecific fungal spores occasionally.

Summary

Ultra Clean OTs are recommended for all modern operation theatres in major and specialty surgeries, which effectively bring down postoperative infection caused by environmental contamination.

Left: Testimonial from Hinduja Hospital (India)

Right: Testimonial from Apollo Hospitals, Bangalore (India)

In Search Of Highest Standards For OT

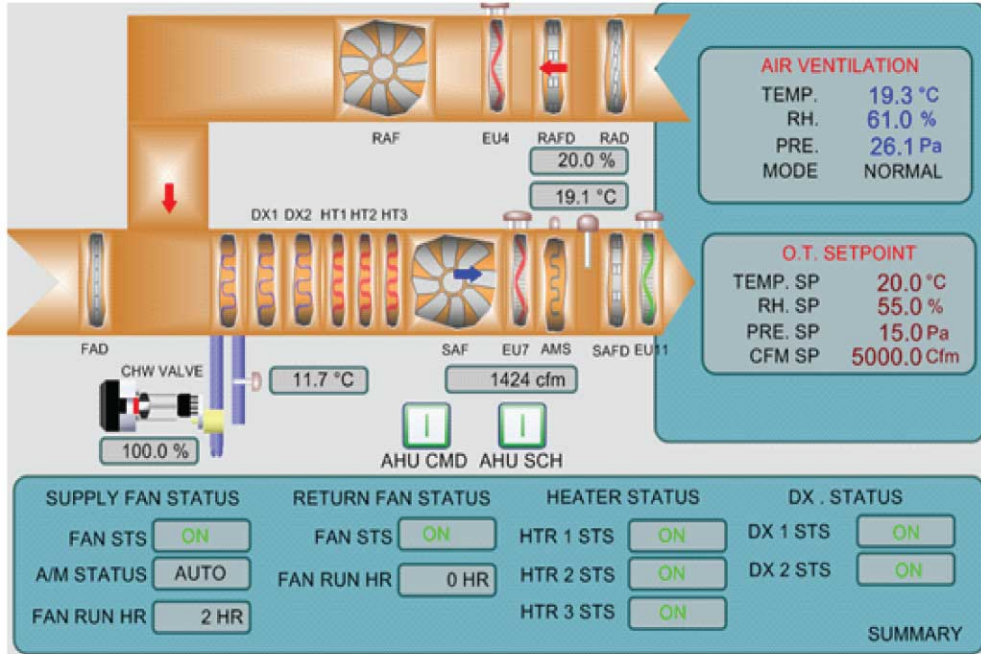
In 2004, the Chairman of a family trust owned regional hospital, serving the large industrial and commercial population in the southern part of Tamil Nadu state in India, visited Johnson Medical's office in Malaysia. Incidentally, he was an engineer by profession, and the head of a public listed cotton mill company with the state-of-the-art equipment and world class standards in its production and quality assurance processes.

Looking for nothing but the highest standards, the Chairman came to study JM's Guided AirFlow™ ventilation system,



as shortly before his visit, the Tamil Nadu hospital had expanded its Interventional Cardiology & Cardiac Surgery departments, needing a state-of-the-art ventilation system.

While in Malaysia, he had the opportunity to visit Johnson Medical's showroom, and the sites of its installations in the country. He went back to India with very strong feelings not only about JM's unsurpassed Guided AirFlow™ ventilation system but about JM's expertise in designing and engineering modular operating theatres too.

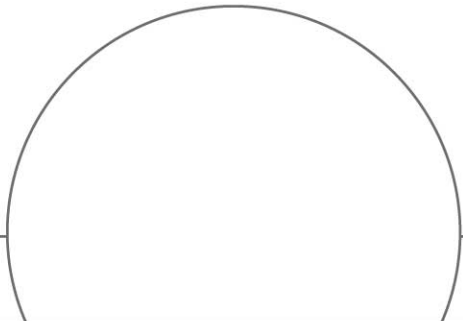


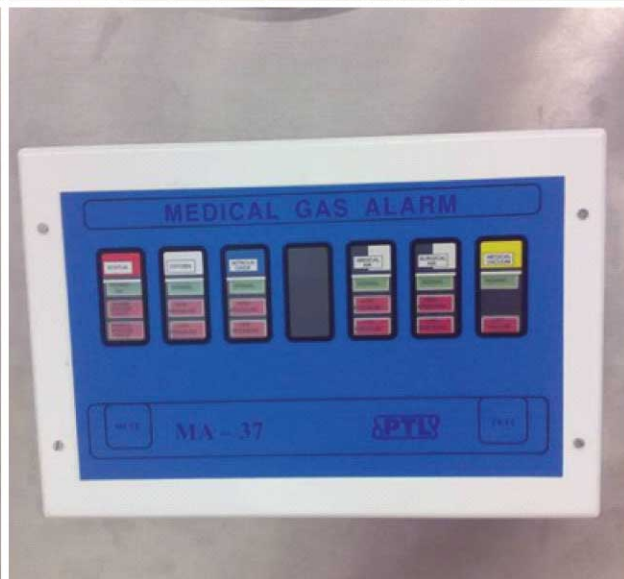
On his return to India, a turnkey project of designing and engineering the hospital's cardiac operating theatre was assigned to the company in February 2004.

Johnson Medical offers airflow design, pendant configuration, essential services control (including E&M, audiovisual, teleconferencing), BMS management (including temperature, humidity, pressurization, energy saving) and indoor air quality monitoring to implement a-state-of-the-art surgical environment.

Turnkey Capability

*13,000sqft of Operating Theatres Turnkey Project
by Johnson Medical*







Original hospital building ■



■ *After expansion of the operating theatres* ■

When Space And Time Are Luxuries You Don't Have

When a hospital in Singapore was experiencing a very heavy workload in its operating theatre complex located on the fourth floor of its premises the hospital found itself in a dilemma. Although it needed another two operating theatres rather urgently, it had no space for expansion, and it could only put up with minimal disruptions to the operations of the department while the construction of the new operating theatres was going on.



■ *During construction* ■

Johnson Medical provided a solution to the hospital's challenge with the 'JMBox' – its offsite engineering and modular construction services solution for an operating theatre. The entire process of construction and installation of electrical and other utilities in the operating theatre was conducted in an offsite factory and the actual construction on the hospital grounds was done very quickly at the hospital's complete delight.



■ *Inside the operating theatre*

Making Healthcare Reachable... Possible

When a dynamic NGO in Malaysia wanted to make healthcare reachable, to bring about early detection of cancer, it was challenged with logistical issues of manpower and operating cost. The conventional bus and trailer builders needed two vehicles to fit in all the requirements of a mobile clinic.

Johnson Medical was awarded the job for its design of an integrated mobile facility, all within one vehicle. To accommodate a Mammography, PAC, laboratory and clinic services; Johnson Medical introduced the expandable trailer with automatic mechanism designed by in-house engineers.

By customising the side expansion when the trailer is stationary, giving more usable space, Johnson Medical helped achieve lowest operating costs and making healthcare possible. The company has since been involved in the infrastructure support for mass health screening, field surgical procedures and disaster relief.



The design



The final product



Johnson Medical Today

Johnson Medical has expanded remarkably since Agne Nilsson first founded the company to manufacture medical pendants. Since its start in 1993, Johnson Medical has grown into a proud organisation that owns patents for all of its products and maintain stringent quality control.

A strong track record in designing and engineering of efficient, functional and safe

medical equipment has formed a solid foundation for the company's further development of innovative solutions.

Johnson Medical has helped make a positive difference in the lives of patients and caregivers. Johnson Medical's slogan – 'Safety Through Innovation™', describes this journey and the company's vision best.

Johnson Medical's Endusers List

China • Affiliated Hospital of Chuanbei Medical University of Nanchong-Sichuan Province 四川省南充市川北医学院附属医院 • Affiliated No.2 Hospital of Shandong University 山东大学附属第二医院 • Affiliated No.2 People's Hospital of Chongqing Medical University 重庆医科大学附属第二人民医院 • Beijing 306 Hospital 北京306医院 • Beijing Chaoyang Hospital 北京朝阳医院 • Beijing Zhongguancun Hospital 北京中关村医院 • Changning Central Hospital 上海长宁区中心医院 • Changning Guanghua Chinese and Western Medicines Hospital 上海长宁区光华中西医结合医院 • Changning Maternity Hospital 上海长宁区妇幼保健院 • Changning Mental Health Center 上海长宁区精神卫生中心 • Changning Tianshan Chinese Medicine Hospital 上海长宁区天山中医院 • Changning Tongren Hospital 上海长宁区同仁医院 • Fenghua Chinese Medicine Hospital -Zhejiang Province 浙江省奉化中医院 • Fujian Xiamen Chinese Traditional Hospital 福建厦门市中医院 • Fujian Xiamen No.1 Hospital 福建厦门市第一人民医院 • Fujian Zhongshan Hospital 福建中山医院 • Fuzhou General Hospital of Nanjing Military Command 福建省南京军区福州总院 • Guangyao County Hospital 山东广饶县人民医院 • Haerbin Children Hospital 哈尔滨市儿童医院 • Hubei Egang Hospital 湖北鄂钢医院 • Jiangxi Provincial People's Hospital 江西省人民医院 • Jiaying Maternity Hospital-Zhejiang Province 浙江省嘉兴妇幼保健院 • Jinlin Medical University No.1 Hospital 吉林市吉林医科大学附属一院 • Kunming 43 Hospital 云南省昆明市43医院 • Luoning County Hospital 洛宁县人民医院 • Nanjing Brain Hospital 南京市脑科医院 • No.2 People's Hospital of Yueyang 湖南省岳阳市第二人民医院 • No.9 People's Hospital of Chongqing 重庆市第九人民医院 • No.152 Military Hospital 解放军152医院 • Shan Dong Liao Cheng People's Hospital 山东聊城市人民医院 • Shandong Longkou Mine Hospital-Shandong Province 山东龙口矿务局医院 • Shandong Shengli Oilfield Hospital 山东胜利油田医院 • Shanghai East Hospital 上海东方医院 • Shanghai Ruijin Hospital 上海瑞金医院 • Taiyuan Children Hospital 山西太原儿童医院 • TYCO Surgical Technical Training Centre 上海泰科医疗技术培训中心 • Wujin Chinese Medicine Hospital of Changzhou -Jiangsu Province 江苏省常州市武进中医院 • Yunan Dali Medical University Hospital 云南省大理市附属医院 • Yuyao Chinese Medicine Hospital -Zhejiang Province 浙江省余姚中医院 • **India** • Aditya Birla Memorial Hospital (Pune) • Apollo Hospital (Bangalore) • Apollo Sagar (Bangalore) • Apollo Speciality (Chennai) • Bhatia Hospital (Mumbai) • Chettinad Hospital (Tamil Naidu) • Devamatha Hospital (Kerala) • Dr Deshpande Cardiac Center (Nagpur) • Escorts Heart Institute and Research Centre (Delhi) • Hinduja Hospital (Mumbai) • Lakeshore Hospital (Cochin) • Medanta Medicity (Gurgaon) • Pushpanjali Crosslay Hospital (Ghaziabad) • SPMM Hospital (Tamil Nadu) • **Malaysia** • '95 Military Hospital • Ampang Hospital • Anson Bay Medical Centre • Assunta Hospital • Beverly Wilshire Medical Centre • Columbia Asia Bukit Rimau Medical Centre • Columbia Asia Medical Centre • Columbia Asia Nusa Jaya • Columbia Asia Setapak • Damansara Specialist Hospital • Darul Ehsan Medical Centre • Desa Park City Medical Centre • Fatimah Hospital, Ipoh • Gemas Hospital • Global Doctor Centre • Hospital Alor Gajah • Hospital Batu Pahat • Hospital Bentong • Hospital Cameron Highlands • Hospital Gua Musang • Hospital Jasin • Hospital Kemaman • Hospital Kepala Batas • Hospital Kota Bharu Ambulatory Care Centre • Hospital Kuala Krai • Hospital Kuala Lipis • Hospital Kuala Lumpur • Hospital Kuala Penyu • Hospital Kunak • Hospital Lam Wah Ee • Hospital Likas • Hospital Pekan • Hospital Pitas • Hospital Pontian • Hospital Port Dickson • Hospital Queen Elizabeth, Kota Kinabalu • Hospital Raja Perempuan Bainun • Hospital Raja Perempuan Zainab II • Hospital Raja Permaisuri Bainun • Hospital Rompin • Hospital Sarikei • Hospital Seberang Jaya • Hospital Selayang • Hospital Setiu • Hospital Slim River • Hospital Sultanah Nur Zahirah • Hospital Sungai Buloh • Hospital Taiping • Hospital Tampin • Hospital Temerloh • Hospital Tengku Ampuan Afzan • Hospital Tengku Ampuan Rahimah • Hospital Tuanku Jaafar • Hospital Umum Sarawak • Hospital Universiti Kebangsaan Malaysia (HUKM) • Hospital Universiti Sains Malaysia (HUSM) • Island Hospital • Johor Specialist Hospital • Kedah Medical Centre • Kejuruteraan University Malaya Medical Centre (UMMC) • Klang ACC Hospital • Kuala Lumpur International Airport Hospital, Sepang (Disaster Unit) • Lam Wah Ee Hospital • Orang Asli Hospital • Pandan Hospital • Pasir Gudang Specialist Hospital • Penang Adventist Hospital • Penang General Hospital • Perdana Specialist Hospital • Perdana Specialist Hospital, Kota Bharu • Prai Specialist Hospital • Prince Court Medical Centre • Pusat Haemodialysis Mawar • Pusat Rawatan Islam Az-Zahrah • Queen Elizabeth Hospital • Quill Orthopaedic Specialist Centre • Sabah Medical Centre (Damai) • Sabah Medical Centre (Likas) • Sarawak General Hospital • Seremban Specialist Hospital • Sime Darby Medical Centre (Ara Damansara) • Subang Jaya Medical Centre • Sunway Medical Centre • Tawakal Specialist Hospital • Terendak Camp Military Hospital • Tropicana Medical Centre • Tung Shin Hospital • University Institute of Technology, Mara • University Malaya Medical Centre • **Mauritius** • Apollo Bramwell Hospital (Port Louis) • **Singapore** • Mt Alvernia Hospital • Specialist Surgery & Laser Centre(Paragon) • Tan Tock Seng Hospital • **Sri Lanka** • Hemas Hospital • **Vietnam** • Columbia Asia Hospital Vietnam, Ho Chi Minh City •

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