SYNCORIX GLOBAL

A STRATEGIC DOSSIER
EDITION 2026

CLINICAL INTELLIGENCE · SOVEREIGN MONETIZATION

# Your data stays home. *Its value travels.*

Transitioning from software vendor to high-yield research infrastructure — without exporting a single patient record.

**PREPARED FOR**

Executive Leadership
& Board of Directors

**ENGAGEMENT MODEL**

Fully Managed, In-Situ
Research Asset Build

**TIMELINE**

60-Day Sprint
Three Governance Gates

**CONTACT**

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01 · EXECUTIVE SUMMARY

# The offer, in *one page*.

We convert your EMR data — notes, prescriptions, diagnoses, labs, outcomes — into a governed, research-ready clinical intelligence product. The work happens inside your environment. Your raw patient data never leaves your custody.

This is a fully managed engagement. Our team supplies the refinery stack, clinical terminology mapping, privacy engineering, and governance facilitation required to unlock data value — so your engineering team stays on its product roadmap.

## What makes this board-defensible

**01 Zero-ingestion processing**

No raw data export. Our stack runs within your firewall, your access controls, your jurisdiction.

**02 Governance gate before commercialisation**

No buyer engagement until leadership approves the Go/No-Go outputs — rights map, risk register, cohort feasibility.

**03 Hospital trust protections**

Facility DUAs, onboarding pack, no provider benchmarking, hospital-aligned value through reports and optional revenue share.

**04 Privacy baseline with residual risk controls**

HIPAA Safe Harbor de-identification, cohort thresholding, inference-risk filters, full audit logs.

**05 Chain-of-title verification**

Only data with clear facility participation rights is eligible; anything ambiguous is excluded until rectified.

01 · EXECUTIVE SUMMARY / CONTINUED

# Commercial *structure.*

Risk is staged across three phases so capital exposure scales with validated progress. Each phase produces auditable deliverables that gate the next.

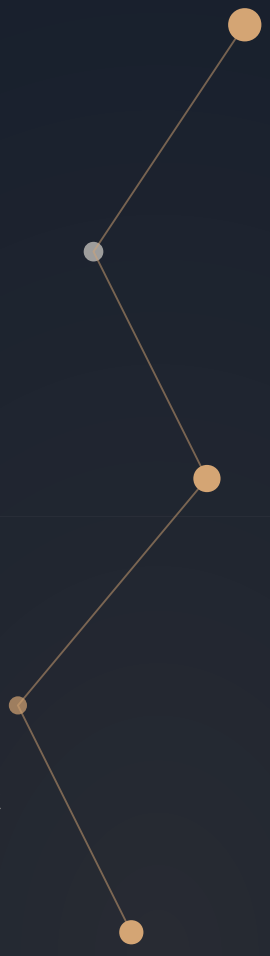
| PHASE | TIMELINE | ENGAGEMENT & COMMERCIAL TERMS |
|---|---|---|
| 01 | Days 1 – 21 | Fixed-fee Sovereign Audit & Governance. Cohort inventory, rights map, risk register, pilot scope, facility pack, Go/No-Go recommendation. |
| 02 | Days 22 – 45 | Milestone-based implementation. In-situ refinery deployment, de-identification and standardisation, QA, audit ledger. |
| 03 | Days 46 – 60+ | Success premium and revenue share on closed deals. Aligned upside; buyer outreach only after leadership approval and under defined use restrictions. |

REGULATORY ANCHOR

Designed to be defensible under extant data protection laws and the relevant commission implementation regimes in the jurisdictions of operation — with posture calibrated to meet the higher bar global research buyers require.

CHAPTER TWO

# The data bottleneck is *a pricing event.*



In 2026, representative clinical data is no longer a preference. It is a hard constraint on model quality — and the market has started paying for it.

02 · THE 2026 INFLECTION

# Training saturation, *meet scarcity.*

The global medical AI economy has reached a material bottleneck. Leading models have achieved training saturation on predominantly Western clinical datasets — and performance gains across diverse populations are now diminishing.

Global pharmaceutical R&D, research consortia, and frontier AI laboratories are reallocating capital toward diverse, longitudinal clinical signals. Not as a narrative preference — because representative data is now a hard constraint on model quality and research validity.

Your organisation holds a high-fidelity repository of longitudinal clinical intelligence: notes, prescriptions, diagnoses, labs, and outcomes captured at scale across real care pathways. In this market, longitudinal clinical text and outcomes are no longer operational exhaust. They are a strategic asset class.

## The revenue window

The current market premium is strongest for well-governed, research-ready clinical text and longitudinal histories. As global buyers complete their first wave of representative ingestion, pricing pressure will shift from "any diverse text" toward higher-fidelity assets — linked outcomes, multimodal imaging, and rare or complex cohorts that require stronger governance.

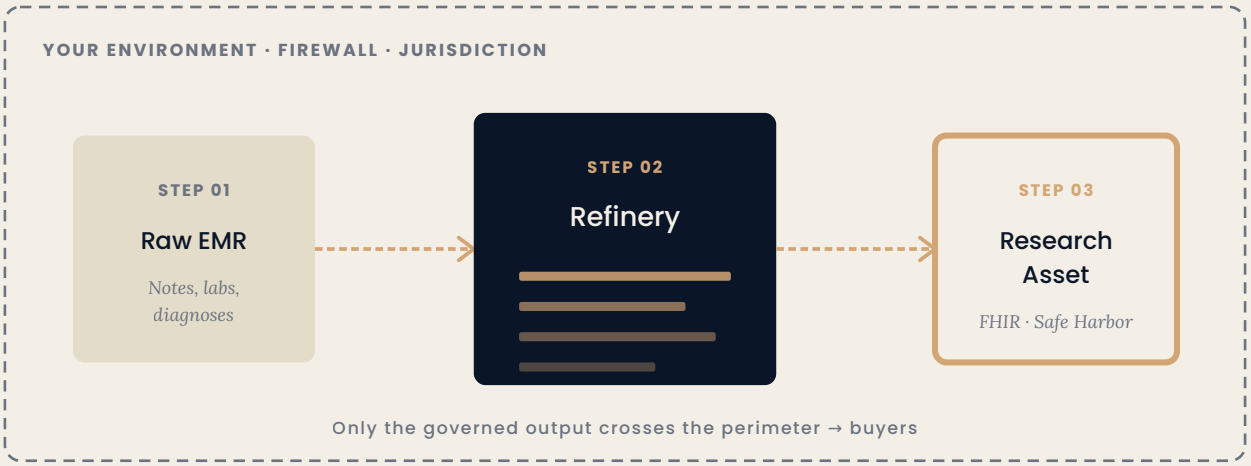
## The strategic objective

This dossier proposes a fully managed service to refine your existing records in-situ — creating an auditable, governed, research-ready clinical intelligence product while you maintain one hundred percent jurisdictional and physical custody.

03 · MANAGED SERVICE ARCHITECTURE

# Plug & value.

Our refinery stack is deployed inside your environment — cloud VPC or on-premise — operating within your firewall and your access controls. Raw records never leave jurisdiction.




## What stays. What leaves.

- **Stays in custody.** Raw records, identifiers, patient detail, and facility-level information — all within your firewall and jurisdiction.
- **Leaves as product.** Only the final research-ready, Safe-Harbor-de-identified, schema-standardised cohort package — and only after leadership Go/No-Go approval.
- **We bring the team.** Data engineering, clinical terminology (FHIR R4/R5, LOINC, ICD-10, optional OMOP), privacy engineering, and governance facilitation.

04 · HOSPITAL PARTNERSHIP

# Share, *don't take.*

A Nigerian EMR's strongest moat is not technology alone. It is hospital trust, partner continuity, and the legitimacy to operate as custodian of sensitive health data.

## The trust shield

- **Secondary-use transparency.** Facility-level Data Use Agreements define research purpose, permitted uses, prohibited uses, data minimisation scope, audit rights, and safety controls.
- **NDPA-aligned lawful basis.** Facility participation is structured to fit NDPA-consistent secondary use frameworks for medical research.
- **No competitive risk.** The research-ready set excludes hospital-identifying and provider-performance indicators — buyers receive clinical signals, not provider benchmarking.

## Shared prosperity model

This is not a take model. It makes the EMR an asset for hospitals, not a liability.

- **Revenue share participation.** A tiered facility participation model routes a defined portion of licensing premium back to participating facilities.
- **Clinical reporting value.** Participating facilities receive standardised clinical reports oriented toward quality improvement at no cost.
- **Facility onboarding playbook.** Facility-safe messaging and onboarding checklists keep partner engagement proactive, consistent, and non-alarmist.

CHAPTER FIVE

# From messy rows to *a research-ready* asset class.

The market does not pay premiums for raw database dumps. The premium is paid for assets that pass buyer diligence on arrival.

05 · THE VALUATION MULTIPLIER

# Asset *reclassification.*

Refining your records is not organising data. It is reclassifying an operational by-product into a research-ready product — and the per-record economics change by orders of magnitude.


The multiplier is driven by how quickly the asset can pass buyer diligence and be used without rework. Standardised, longitudinal assets — especially those linking text with outcomes — command a large premium because they reduce buyer cost across de-identification, standardisation, linkage, audit, cohort design, and governance.

06 · PROVEN CAPACITY

# A comparable peer. *A $14M outcome.*

This methodology has been executed at scale with an African EHR peer operating in comparable infrastructure conditions and governance constraints.

CASE BENCHMARK

## $14M+

*Multi-year commercial agreement achieved without adding internal engineering headcount and without exporting raw records from jurisdiction.*

**Scenario**

The partner held high-traffic longitudinal records but lacked research-ready standardisation and governance posture, creating high diligence friction and minimal buyer confidence.

**Intervention**

We deployed an in-situ refinery to standardise multi-year longitudinal records and implement privacy-preserving linkage for usable longitudinal journeys.

**Outcome**

The refined asset was positioned to a global research consortium, resulting in a $14M+ multi-year commercial agreement. *Reference and supporting evidence available under appropriate confidentiality arrangements during diligence.*

07 · COMPLIANCE FORTRESS

# Governance as *fiduciary shield.*

For an African CEO and Board, governance is not an accessory — it is a fiduciary shield. The commercial premise must be defensible under NDPA and NHA confidentiality expectations, while meeting the higher bar global buyers require.

## From liability to research-ready asset

Under GDPR and most African compliance frameworks — NDPA, DPA, POPIA — the regulatory burden centres on data linked to identifiable individuals. The refinery transforms the dataset into a research-ready product that is governed, minimised, and structured to reduce identification risk.

- **HIPAA Safe Harbor as buyer currency.** Our pipeline removes the full set of Safe Harbor identifiers across eighteen categories — a globally recognised baseline demanded by US-linked buyers.
- **Residual risk governance.** De-identification paired with cohort controls, inference protection, and strict go/no-go filters to prevent small-cohort exposure.

## The Go/No-Go safety filter

We exclude data threads that create unacceptable brand and regulatory exposure.

- **Inference risk controls.** Rare cohorts that risk identification by inference are excluded or aggregated per safety policy.
- **Chain-of-title verification.** Facility participation agreements and licensing rights are validated; any ambiguity is flagged and excluded until rectified.
- **Buyer restrictions.** Use limitations, prohibited uses, and audit rights are structured into the commercialisation pathway.

08 · COMPETITIVE EDGE

# Africa agile. *Structurally different.*

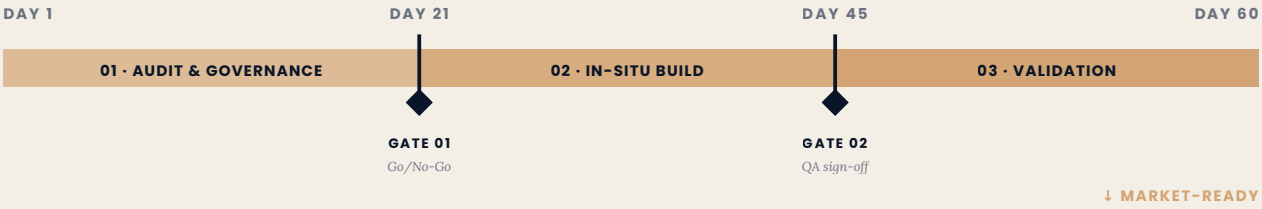
Western aggregators are structurally optimised for centralised ingestion and Western compliance assumptions. In Africa, that model collides with sovereignty realities and facility trust dynamics.

| US AGGREGATORS | SYNCORIX MANAGED REFINERY |
| --- | --- |
| **Data sovereignty**<br>Requires ingestion into external cloud. High risk. | **Data sovereignty**<br>Zero-ingestion. Remains within your environment. |
| **Economic value**<br>Aggregator captures most of the upside. | **Economic value**<br>You own the asset. You retain the revenue premium. |
| **Technical load**<br>Invasive integration. Internal overhaul required. | **Technical load**<br>Managed delivery. No roadmap disruption. |
| **Market readiness**<br>Typically 12 – 24 months. | **Market readiness**<br>Controlled 60-day sprint. |
| **Compliance posture**<br>Generic HIPAA and GDPR default. | **Compliance posture**<br>NDPA- and NHA-aware with Safe Harbor buyer bridge. |

09 · IMPLEMENTATION

# The 60-day *refinery sprint.*

A structured legal-technical sequence designed for safety, defensibility, and speed. Each phase produces auditable deliverables that gate the next.




## 01

DAYS 1 – 21

### Sovereign Audit & Governance

- Identify high-value clinical cohorts and longitudinal depth.
- Review facility contracts and chain-of-title.
- Establish governance policy, go/no-go rules, and facility revenue share framework.
- Produce Day-21 outputs: cohort inventory, risk register, rights map, pilot scope, facility onboarding pack.

## 02

DAYS 22 – 45

### In-Situ Technical Build

- Deploy refinery stack within the firewall.
- Execute Safe Harbor de-identification pipeline and standardisation.
- Implement linkage per approved privacy workflow.
- Validate quality with defined metrics and audit logs.

## 03

DAYS 46 – 60

### Validation & Market Placement

- Quality assurance, cohort packaging, documentation, and governance sign-off.
- Prepare the research-ready product and buyer-facing documentation.
- Begin controlled buyer engagement only after leadership approval.

THE STRATEGIC ASK

# One conversation. Three sixty-day gates. *A new revenue line.*

We invite a brief session with your Legal and CISO leads to walk through the zero-ingestion architecture, the hospital revenue share model, and the facility alignment pack — ensuring partner trust from Day 1.

NEXT STEP FOR LEADERSHIP

We can prepare a Data Commercialisation Roadmap visualising the sixty-day milestones end-to-end, including facility onboarding checklists, governance gates, and the audit-ready deliverables produced at Day 21 and Day 60.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