BIO IMAGING TECHNOLOGIES INC Form 10-K March 05, 2008

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# UNITED STATES SECURITIES AND EXCHANGE COMMISSION Washington, D.C. 20549

#### Form 10-K

# ANNUAL REPORT PURSUANT TO SECTION 13 OR 15(d) OF THE SECURITIES EXCHANGE ACT OF 1934

For the fiscal year ended December 31, 2007

# Commission File No. 001-11182 BIO-IMAGING TECHNOLOGIES, INC.

(Exact name of Registrant as specified in its Charter)

**Delaware** 

(State or Other Jurisdiction of Incorporation or Organization)

826 Newtown-Yardley Road, Newtown, Pennsylvania

(Address of Principal Executive Offices)

11-2872047

(I.R.S. Employer Identification No.)

18940-1721

(Zip Code)

(267) 757-3000 (Registrant s Telephone Number, Including Area Code)

**Securities registered pursuant to Section 12(b) of the Act:** 

**Title of Each Class** 

Name of Each Exchange on Which Registered

Common Stock, \$0.00025 par value per share

NASDAQ Global Market

# Securities registered pursuant to Section 12(g) of the Act: None

Indicate by check mark if the registrant is a well-known seasoned issuer, as defined in Rule 405 of the Securities Act. Yes: o No: b

Indicate by check mark if the registrant is not required to file reports pursuant to Section 13 or Section 15(d) of the Act. Yes: o No: b

Indicate by check mark if the registrant: (1) has filed all reports required to be filed by Section 13 or 15(d) of the Securities Exchange Act of 1934 during the preceding 12 months (or for such shorter period that the Registrant was

required to file such reports), and (2) has been subject to such filing requirements for the past 90 days. Yes: b No: o

Indicate by check mark if the registrant if disclosure of delinquent filers pursuant to Item 405 of Regulation S-K is not contained herein, and will not be contained, to the best of registrant s knowledge, in definitive proxy or information statements incorporated by reference in Part III of this Form 10-K or any amendment to this Form 10-K. b

Indicate by check mark if the registrant is a large accelerated filer, an accelerated filer, a non-accelerated filer, or a smaller reporting company. See the definitions of large accelerated filer, accelerated filer and smaller reporting company in Rule 12b-2 of the Exchange Act. (Check one):

Large accelerated filer o Accelerated Non-accelerated filer o Smaller reporting filer o (Do not check if a smaller reporting company b company)

Indicate by check mark if the registrant is a shell company (as defined in Rule 12b-2 of the Act). Yes: o No: b

The aggregate market value of the voting and non-voting common equity held by non-affiliates of the Registrant was \$59,527,891 on June 29, 2007, the last business day of the Registrant s most recently completed second fiscal quarter, based on the average bid and asked prices on that date.

Indicate the number of shares outstanding of each of the Registrant s classes of common equity, as of February 29, 2008:

<u>Class</u> <u>Number of Shares</u>

Common Stock, \$.00025 par value

11,946,248

The following documents are incorporated by reference into the Annual Report on Form 10-K: Portions of the Registrant s definitive Proxy Statement for its 2008 Annual Meeting of Stockholders are incorporated by reference into Part III of this Report.

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#### **PART I**

#### Item 1. Business.

#### General

Bio-Imaging Technologies, Inc., referred to herein as we, us and our, is a global pharmaceutical contract service organization, providing services that support the product development process of the pharmaceutical, biotechnology and medical device industries. We specialize in assisting our clients in the design and management of the medical imaging component of clinical trials for all modalities, which includes computerized tomography (CT), magnetic resonance imaging (MRI), radiography, dual energy x-ray absorptiometry (DXA/DEXA), positron emission tomography (PET), single photon emission computerized tomography (SPECT), quantitative coronary angiography (QCA), cardiac MRI and CT, intravascular ultrasound (IVUS), peripheral quantitative angiography (QVA), central nervous system (CNS) MRI and ultrasound. We provide services that include the processing and analysis of medical images and the data-basing and regulatory submission of medical images, quantitative data and text.

We utilize proprietary processes and software applications in providing our services to pharmaceutical companies conducting clinical studies in which medical imaging modalities are used to evaluate the efficacy and safety of pharmaceuticals, biologics or medical devices. Our digital image processing and computer analysis techniques enable technologists or radiologists to make highly precise measurements and biostatistical inferences about drug or device effects. The resulting data enables our clients and regulatory reviewers, primarily the U.S. Food and Drug Administration and comparable European agencies, to evaluate product efficacy and safety. In addition, we have developed specialized computer services and software applications that enable independent radiologists and other medical specialists involved in clinical trials to review medical image data in an entirely digital format. Our services also include the regulatory submission of medical images, quantitative data and text.

We are directing our marketing and sales efforts towards those clinical development areas that use medical imaging. These areas include oncology, musculoskeletal, central nervous system, neurovascular and cardiovascular, among others.

We have a European facility in Leiden, the Netherlands that provides centralized image processing services for our European clients. We manage our services for European-based clinical trials from this facility. Our European facility has similar processing and analysis capabilities as our United States headquarters.

In February 2007, we acquired 100% of the stock of Theralys S.A., referred to as Theralys, a privately held company located in Lyon, France. Theralys is an imaging core lab providing centralized blinded read services and customized image analysis services primarily in the field of central nervous system disorders and neurovascular diseases. Theralys proprietary image processing software enables the introduction of quantitative imaging markers in the design of clinical trials for Neurovascular and CNS disorders, which include stroke, secondary prevention drugs, multiple sclerosis and dementia, including Alzheimer s disease. Theralys proprietary and validated software for clinical trials includes applications that enable the automated quantitation of various imaging parameters such as brain, white matter lesion and hippocampal volumes and MRI diffusion and perfusion.

Our CapMed division includes the Personal Health Record ( PHR ) software and the patent-pending Personal HealthKey<sup>tm</sup> technology. The PHR is a software application that enables users to manage and store personal health information, including their medical images, on the privacy of their desktop computer, while linking directly to sponsor-directed resources such as drug information, patient education, or disease guidelines. The Personal

HealthKey<sup>tm</sup> plugs into a computer s USB port, allowing doctors and patients easy access to the patient s medical record without the need for additional hardware or software, and it is password protected.

We were incorporated in Delaware in 1987 under the name Wise Ventures, Inc. Our name was changed to Bio-Imaging Technologies, Inc. in 1991. The address of our principal executive offices is 826 Newtown-Yardley Road, Newtown, Pennsylvania, 18940, and our telephone number is 267-757-3000. Our Internet website is www.bioimaging.com. We also utilize the Internet website www.capmed.com for the CapMed division of our business. We make available on our Internet website all of our public filings with the Securities and Exchange Commission, or SEC. However, nothing on our Internet website is intended to be incorporated by reference into this Form 10-K or

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any other filing made by us with the SEC. The public may read or copy any filings that Bio-Imaging, Technologies, Inc. files with the SEC at the SEC Public Reference Room at 100 F. Street, N.E., Washington, D.C. 20549. The SEC maintains an internet site that contains reports, proxy, and information statements, and other information regarding issuers that file electronically with the SEC. The website is <a href="http://www.sec.gov">http://www.sec.gov</a>. The public can also obtain information on the operation of the Public Reference Room by calling the SEC at 1-800-SEC-0330.

#### **Business Services**

#### Pharmaceutical Services Division

Core Laboratory Services. We are a leading provider of medical imaging management services for clinical development purposes. Our imaging core laboratory facilities in the United States and Europe provide centralized image data collection, processing, analysis and archival services for clinical trials conducted worldwide. The facilities are designed for high-volume efficient processing of film and digital image data in a secure environment that complies with regulatory guidelines for clinical data management.

Medical image data are received by us from clinical trial sites, located throughout the world. We have developed procedures for data tracking and quality control that we believe to be of significant value to our clients. Our facilities contain specialized hardware and software for the digitization of films and translation of digital data, enabling data to be standardized, regardless of its source. We believe our ability to handle most commercially available image file formats is a valuable technical asset and an important competitive advantage in gaining new business from large global multi-center clinical trials.

We perform image analyses on client data using internally developed or specially configured software. We measure key indicators of drug efficacy in different organs and disease states. The results from image analysis derived in our facilities are transferred to databases that can be transmitted electronically to our clients or integrated directly into our Bio/ImageBase<sup>tm</sup> package for regulatory submission on our client s behalf.

Information Management Services. Our information management services focus on providing specialized solutions for improving the quality, speed and flexibility of image data management for clinical trials. We believe that our computer assisted masked reading systems, or BioRead<sup>tm</sup> systems, offer numerous advantages over conventional film-based medical image reading scenarios, including increased reading speed, greater standardization of image reading, and reduced error in the capture of reader interpretations.

Using our BioRead<sup>tm</sup> systems, independent medical specialists can review medical image data from clinical trials in a digital format. The BioRead<sup>tm</sup> systems display all modalities of medical image data, regardless of source equipment. In addition, the systems display either translated digital data or digitized films. Such image reviews are often required during clinical trials to evaluate patients—responses to therapy or to determine if patients qualify for studies. By using the BioRead<sup>tm</sup> systems to read and evaluate image data, medical specialists achieve greater reading speed than is possible with film and perform evaluations in a more objective, reproducible manner.

We have also developed remote BioRead<sup>tm</sup> systems, that are located on the premises, either home or office, of the individual medical specialists who are engaged by the sponsor to perform the analysis of the medical image data. Historically, the BioRead<sup>tm</sup> systems have been utilized to determine efficacy of the compounds being studied. More recently, clients are requesting us to provide rapid turn-around reads for inclusion/exclusion criteria. We believe that the remote BioRead<sup>tm</sup> system is the optimal tool for this work because it allows us, at our client s discretion, to provide the images to an expert in the field to facilitate the review of the images from the expert s office or home.

We have developed an image database software application, Bio/ImageBase<sup>tm</sup>, which enables our clients to submit their medical images and related clinical data to the FDA in a digital format. Using data stored on CD-ROM or DVD disks, Bio/ImageBase<sup>tm</sup> allows clients and FDA medical reviewers to review medical images and related clinical data. We believe that Bio/ImageBase<sup>tm</sup> offers the potential to decrease review time, resulting in faster regulatory approvals and reduced time-to-market for new drugs, biologics and medical devices.

*Other Services.* We provide technical consulting in the evaluation of the sites that may participate in clinical trials. We also consult with clients regarding regulatory issues involved in the design, execution, analysis and submission of medical image data in clinical trials.

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#### CapMed Division

Our CapMed division offers the Personal Health Record software, referred to as PHR, and the patent-pending Personal HealthKey<sup>tm</sup> technology. The PHR is a software application that enables users to manage and store personal health information, including their medical images, on the privacy of their desktop computer, while linking directly to sponsor-directed resources such as drug information, patient education, or disease guidelines. The Personal HealthKey<sup>tm</sup> plugs into a computer s USB port, allowing doctors and patients easy access to the patient s medical record without the need for additional hardware or software, and it is password protected. Our hybrid product offering also includes patient access to personal health information on line and via cell phone and is interoperable with a wide range of third party vendors.

## **Target Markets**

Our primary target market is comprised of pharmaceutical, biotechnology and medical device companies whose clinical development pipelines include drugs, biologics or devices that are typically evaluated by medical imaging methods. This global target market includes leading international pharmaceutical companies and biotechnology companies with products currently in the clinical development pipeline.

We focus our marketing on the following stages of clinical development:

#### Phase II Clinical Trials

Phase II clinical trials are generally conducted over six months to two years and involve basic efficacy, safety and dose-range testing in approximately 50 to 400 patients suffering from the disease or condition under study. Such trials help determine the best effective dose, confirm that the drug works as expected and provide initial safety data.

#### Phase III Clinical Trials

Phase III clinical trials are generally conducted over one to four years and involve efficacy and safety studies in broader populations of hundreds or thousands of patients and many investigational sites, such as hospitals and clinics. These trials are sometimes referred to as pivotal studies for submission to the regulatory agencies. Generally, Phase III studies are intended to provide additional information on drug safety and efficacy, and the evaluation of the risk-benefit of the drug and information for the adequate labeling of the product.

## Phase IV Post Approval Studies

Phase IV studies are studies conducted after a pharmaceutical drug or device has been approved for use. These studies are generally conducted over a two to four year period and involve either a continuation of a Phase III patient population or the recruitment of a new patient population. As there continues to be pressure to expedite approval of pharmaceuticals and medical devices, there is an increase in the number of conditional approvals based on the conduct of additional Phase IV studies.

In addition, our experience spans a wide range of therapeutic areas with a concentration in the following:

# Cancer Therapeutics

Many pharmaceutical companies are currently developing new therapies for the treatment of cancer. For solid tumor studies, medical imaging modalities are used to determine the response of treated and untreated tumors. These medical images are evaluated by medical specialists during the course of oncology clinical trials to determine the extent of

disease and changes in tumor size over time.

The FDA s guidelines aimed at accelerating access to new drugs for the review and approval of new cancer therapies place greater emphasis on shrinkage of tumors as an early indicator of anti-tumor efficacy. We believe that these FDA guidelines may have a favorable impact on our business as pharmaceutical and biotechnology companies may have an increased need for regulatory compliant medical imaging services to conduct their oncology clinical trials.

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#### Musculoskeletal Therapeutics

Anti-inflammatory clinical trials, such as those focused on arthritis, include radiologic evaluation of the bones and joints to determine drug efficacy. We believe that demand among pharmaceutical companies for our services will increase as new classes of biotechnology-derived drugs enter and progress through the clinical development pipeline.

Osteoporosis is a disease characterized by thinning bones, which leads to fractures in the elderly. The FDA guidance document for developing treatments for this disease recognized DEXA as one of the primary efficacy and safety measurement tools available. Furthermore, all data needs to go through a quality assurance laboratory. This is now standard practice in all studies using DEXA instruments whether for osteoporosis, oncology or anti-obesity, or muscle wasting assessment.

## Central Nervous System and Neurovascular Therapeutics

Many pharmaceutical companies are developing drugs for treatment of neurovascular diseases and conditions of the central nervous system, referred to as CNS, such as multiple sclerosis, infectious diseases that target the CNS, stroke and Alzheimer s disease. For many of these diseases, the diagnosis is largely dependent upon imaging, particularly MRI. We believe that the central nervous system clinical trials business may increase as more therapies progress through the research pipeline and as baby boomers continue to age, driving the demand for these products.

#### Cardiovascular Therapeutics

We provide our services to clients developing drugs and medical devices for the diagnosis and treatment of cardiovascular diseases and conditions that are evaluated with the aid of medical imaging. We offer various cardiovascular, quantitative, image-analysis services including: quantitative coronary angiography (QCA), cardiac MRI and CT, ultrasound, intravascular ultrasound (IVUS) and peripheral quantitative angiography (QVA). We have participated in numerous multinational trials for leading pharmaceutical, biotechnology and medical device companies throughout the world. In addition, as research continues to advance, our collective knowledge base of the underlying pathophysiology of cardiovascular disease will grow as well as the need for advanced imaging technology to be used in cardiovascular trials. For example, CT may be used to identify coronary calcifications, which are considered to be a predictor of cardiovascular risk. It follows that clinical trials involving therapeutic interventions targeting coronary calcifications will require imaging as an endpoint of efficacy.

## Diagnostic Imaging Agents

We provide our services to clients developing diagnostic imaging agents that are designed to diagnose disease conditions more quickly and accurately in their development in order to facilitate earlier and more accurate treatment.

#### **Market Trends**

We believe that a variety of favorable regulatory, technological and market trends may positively impact the demand for medical imaging management services, including:

FDA initiatives to streamline the regulatory submission and review process that are being implemented continue to have a beneficial impact on us. The FDA is investing in new information technology and is continuing the process of formulating and disseminating guidelines for standardizing the submission of electronic data, including medical images. We expect submission of image data to continue to be a requirement in key therapeutic and diagnostic areas for evaluating the effectiveness of a drug or imaging agent.

Consolidation, restructuring and downsizing in the pharmaceutical industry in response to downward pressure on certain pharmaceutical and biotechnology companies drug prices has resulted in increased outsourcing of certain research and development activities.

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Overall, growth in pharmaceutical and biotechnology research and development spending is increasing. As a result, we believe that the outsourcing of development activities should like-wise increase.

New classes of drugs to treat conditions traditionally evaluated by imaging are entering or progressing through the clinical development pipeline, leading to increased demand for medical imaging-related services. In addition, we believe that digital technologies for data acquisition and management are penetrating the radiology community.

We believe that as pharmaceutical and biotechnology companies increasingly attempt to expand the market for new drugs by conducting clinical trials and pursuing regulatory approval in multiple countries simultaneously, contract service organizations with a global presence and expertise will continue to benefit.

Due to several factors, including, without limitation, competition from commercial competitors and academic research centers, the risk of project cancellations, slowing of patient enrollment in on-going studies or delay of future project awards, among others, we cannot assure you that demand for our services and technologies will grow, sustain growth, or that additional revenue generating opportunities will be realized by us.

# **Intellectual Property**

Proprietary protection for our computer-imaging programs processes and know-how is important to our business. We have developed certain technically derived procedures and computer software applications that are intended to increase the effectiveness and quality of our services. We rely upon patents, trademarks, copyrights, trade secrets, know-how and continuing technological innovation to develop and maintain our competitive position. We have claimed trademark protection for Bio/ImageBase<sup>tm</sup>, BioRead<sup>tm</sup>, Intelligent Imaging<sup>tm</sup>, Personal Health Key<sup>tm</sup>, icePHR<sup>tm</sup> and icePHR Mobile<sup>tm</sup>. We hold patents for the two DEXA phantoms, titled Spine and Variable Composition Phantoms, which we sell to trial sites. We have a patent pending on our Personal Health Key<sup>tm</sup>. We have registered our Stylized Man Design with the U.S. Patent and Trademark Office. We cannot assure you that we can limit unauthorized or wrongful disclosures of trade secrets or otherwise confidential information. In addition, to the extent we rely on trade secrets and know-how to maintain our competitive technological position, we cannot assure you that others may not develop independently the same, similar or superior techniques. Although our intellectual property rights are important to the results of our operations, we believe that other factors, such as our independence, process knowledge, technical expertise and experience are more important, and that, overall, these technological capabilities offer significant benefits to our clients.

#### **Government Regulation**

The research and development, manufacture and marketing of drugs and medical devices are subject to stringent regulation by the FDA in the United States and by similar authorities in other countries. In addition, regulations imposed by other federal agencies, as well as state and local authorities, may impact such research and development, manufacturing and marketing.

The FDA has established mandatory procedures and safety standards that apply to the clinical testing, manufacturing and marketing of drugs and medical devices. These procedures and safety standards include, among other things, the completion of adequate and well-controlled human clinical trials to establish the safety and efficacy of the drug or device for its recommended conditions or use. We advise our clients in the execution of clinical trials and other drug and device development tasks. We do not administer drugs to or utilize medical devices on patients.

The success of our business is dependent upon continued acceptance by the FDA and other regulatory authorities of the data and analyses generated by our services in connection with the evaluation of the safety and efficacy of new drugs and devices. The FDA has formal guidelines that encourage the use of surrogate measures, through submission of digital image data, for evaluation of drugs to treat life-threatening or debilitating conditions. We cannot assure you that the FDA or other regulatory authorities will accept the data or analyses generated by us in the future and, even assuming acceptance, we cannot assure you that the FDA or other regulatory authorities will require the application of imaging techniques to numbers of patients and over time periods substantially similar to those required of traditional safety and efficacy techniques.

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Changes in the FDA s policy for the evaluation of therapeutic oncology agents may have a positive impact on the time to market of such therapeutics. According to FDA guidelines, approval times for new cancer therapies can be shortened if evidence of tumor shrinkage is verifiable and demonstrable through the use of objective measurement techniques. These guidelines place greater reliance on the use of medical image data to demonstrate objective tumor shrinkage. In addition, the FDA has implemented guidelines aimed at accelerating other therapeutic categories through the use of imaging markers as surrogate endpoints for measuring therapeutic effectiveness. We believe the FDA s initiatives to streamline and accelerate the submission and review process of therapeutic agents has had a favorable impact on our business.

We believe that our ability to achieve continued and sustainable growth will be materially dependent upon, among other factors, the continued stringent enforcement of the comprehensive regulatory framework by various government agencies. Any significant change in these regulatory requirements or the enforcement thereof, especially relaxation of standards, could adversely affect our prospects.

The current European market regulation is more fragmented than in the United States. However, we believe that our expertise in working with the standards of the FDA provides us with experience when working with the various European regulatory agencies.

# Competition

We continue to experience competition from commercial competitors and academic research centers. The biopharmaceutical services industry is highly competitive, and we face numerous potential competitors in our business, including hundreds of contract research organizations. We primarily compete against specialty contract research organizations, or CROs, and to a lesser extent, universities and teaching hospitals. Certain of these competitors are owned by or are divisions of larger organizations, some of which have substantially greater resources than we do. As competition increases, we will look to provide value-added services and undertake marketing and sales programs to differentiate our services based on our expertise and experience in specific therapeutic and diagnostic areas, our technical expertise, our regulatory and clinical development experience, our quality performance and our international capabilities. Our competitive position also depends upon our ability to attract and retain qualified personnel and develop and preserve proprietary technology, processes and know-how. Competition in our industry has resulted in additional pressure being placed on price, service and quality. Although we believe that we are well positioned against our competitors due to our experience in clinical trials and regulatory compliance along with our international presence, we cannot assure you that our competitors or clients will not provide or develop services similar or superior to those provided by us. This competition could have a material adverse impact on us.

#### **Marketing and Sales**

We provide and market our services on an international basis primarily to pharmaceutical, biotechnology and medical device companies. Our sales and marketing activities are directed by a Senior Vice President of Medical Affairs and a Vice President of Global Business Development, supported by in-house staff and field business development personnel.

Our selling efforts are focused on North America and Western Europe. Our marketing activities include exhibiting at major trade shows, advertising in trade journals and the sponsoring of industry associations.

#### **Significant Clients**

During fiscal 2007, contracts with one client, Hoffmann-La Roche, which encompassed 11 projects, represented 13.4% of our service revenues for the year ended December 31, 2007, while for the year ended December 31, 2006,

one client, Novartis Pharmaceutical, Inc., which encompassed 14 projects, accounted for 10.9% or more of our service revenues. For the year ended December 31, 2005, no client accounted for more than 10% of our service revenues. These contracts are terminable by our client at any time and for any reason. The loss of a significant client, or a reduction in services provided to a significant client, would have a material adverse effect on our business, financial condition and results of operations.

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#### **Employees**

As of December 31, 2007, we had 337 employees, 4 of whom are executive officers.

Of our employees, as of December 31, 2007, 26 were engaged in sales and marketing, 273 were engaged in client related projects and 38 were engaged in administration and management. A significant number of our management and professional employees have prior industry experience. We believe that we have been successful in attracting skilled and experienced personnel; however, it remains a competitive market for recruiting such personnel. Although all of our employees are covered by confidentiality and non-competition agreements, we cannot assure you that such agreements will be enforceable. As of February 28, 2008, we have employment agreements with two of our executive officers. See Item 11. Executive Compensation . We consider relations with our employees to be good.

#### Item 1A. Risk Factors.

The more prominent risks and uncertainties inherent in our business are described below. However, additional risks and uncertainties may also impair our business operations. If any of the following risks actually occur, our business, financial condition or results of operations may suffer. Investing in our common stock involves a high degree of risk. Any of the following factors could harm our business and future results of operations and you could lose all or part of your investment.

#### Risks Related to Our Company and Business

We may incur financial losses because contracts may be delayed or terminated or reduced in scope for reasons beyond our control.

Our clients may terminate or delay their contracts for a variety of reasons, including, but not limited to:

unexpected or undesired clinical results;

the client s decision to terminate the development of a particular product or to end a particular study;

insufficient patient enrollment in a study;

insufficient investigator recruitment;

failure to perform our obligations under the contract; or

the failure of products to satisfy safety requirements.

In addition, we believe that FDA-regulated companies may proceed with fewer clinical trials or conduct them without assistance of contract service organizations if they are trying to reduce costs as a result of cost containment pressures associated with healthcare reform, budgetary limits or changing priorities. These factors may cause such companies to cancel contracts with contract service organizations.

We cannot assure you that our clients will continue to use our services or that we will be able to replace, in a timely or effective manner, departing clients with new clients that generate comparable revenues. Further, we cannot assure you that our clients will continue to generate consistent amounts of revenues over time.

The loss, reduction in scope or delay of a large contract or the loss or delay of multiple contracts could materially adversely affect our business, although our contracts entitle us to receive all fees earned up to the time of termination. The loss of business from our client, Novartis Pharmaceutical, Inc., would have a material adverse effect on our financial condition.

We depend on a small number of industries and clients for all of our business, and the loss of one such significant client could cause revenues to drop quickly and unexpectedly.

We depend on research and development expenditures by pharmaceutical, biotechnology and medical device companies to sustain our business. Our operations could be materially and adversely affected if:

clients businesses experience financial problems or are affected by a general economic downturn;

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consolidation in the pharmaceutical, biotechnology or medical device industries leads to a smaller client base for us; or

clients reduce their research and development expenditures.

During fiscal 2007, contracts with one client, Hoffmann-La Roche, which encompassed 11 projects, represented 13.4% of our service revenues for the year ended December 31, 2007, while for the comparable period last year, one client, Novartis Pharmaceutical, Inc., which encompassed 14 projects, represented 10.9% of our service revenues for the year ended December 31, 2006. The loss of business from a significant client or our failure to continue to obtain new business to replace completed or canceled projects would have a material adverse effect on our business and revenues.

## Our contracted/committed backlog may not be indicative of future results.

Our reported contracted/committed backlog of \$92.5 million at December 31, 2007 is based on anticipated service revenue from uncompleted projects with clients. Backlog is the expected service revenue that remains to be earned and recognized on signed and verbally agreed to contracts. Contracts included in backlog are subject to termination by our clients at any time. In the event that a client cancels a contract, we would be entitled to receive payment for all services performed up to the cancellation date and subsequent client authorized services related to the cancellation of the project. The duration of the projects included in our backlog range from less than three months to seven years. We cannot assure that this backlog will be indicative of future results. A number of factors may affect backlog, including:

the variable size and duration of the projects (some are performed over several years);

the loss or delay of projects;

the change in the scope of work during the course of a project; and

the cancellation of such contracts by our clients.

Also, if clients delay projects, the projects will remain in backlog, but will not generate revenue at the rate originally expected. Accordingly, the historical relationship of backlog to revenues may not be indicative of future results.

We have experienced substantial expansion in the past, and if we fail to properly manage that expansion, our business may suffer.

Our business has expanded substantially in the past. Our continuing sales and marketing efforts have increased the number of projects under management from 284 in fiscal 2006 to 289 in fiscal 2007. In addition, we acquired Theralys in February 2007, HeartCore in December 2004 and CapMed in November 2003.

Rapid expansion, internally or through acquisitions, could strain our operational, human and financial resources. If we fail to properly manage this expansion, our results of operations and financial condition might be adversely affected. In order to manage our expansion, we must:

effectively market our services to pharmaceutical, biotechnology and medical device companies;

continue to improve operating, administrative and information systems;

accurately predict future personnel and resource needs to meet client contract commitments;

successfully integrate our acquired companies and businesses;

track the progress of on-going client projects; and

attract and retain qualified management, sales, professional and technical operating personnel.

We will face additional risks in expanding foreign operations. Specifically, we might find it difficult to: assimilate differences in foreign business practices and regulations;

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hire and retain qualified personnel; and

overcome language and cultural barriers.

We may engage in future acquisitions, which may be expensive and time consuming and from which we may not realize anticipated benefits.

We may acquire additional businesses, technologies and products if we determine that these additional businesses, technologies and products complement our existing business or otherwise serve our strategic goals. If we do undertake transactions of this sort, the process of integrating an acquired business, technology or product may result in operating difficulties and expenditures and may absorb significant management attention that would otherwise be available for ongoing development of our business. Moreover, we may never realize the anticipated benefits of any acquisition. Future acquisitions could result in potentially dilutive issuances of our securities, the incurrence of debt and contingent liabilities and amortization expenses related to intangible assets, which could adversely affect our results of operations and financial condition.

On February 6, 2007, we acquired 100% of the outstanding securities of Theralys, a privately held company headquartered in Lyon, France. The aggregate purchase price was 2,958,285 Euros (\$3,853,462 as determined by an agreed upon exchange rate), of which 2,375,484 Euros (\$3,093,122) was paid in cash and \$760,340 was paid in 93,408 shares of our common stock. We also incurred \$678,000 in acquisition costs.

Loss of key personnel, or failure to attract and retain additional personnel, may cause the success and growth of our business to suffer.

Future success depends on the personal efforts and abilities of the principal members of our senior management to provide strategic direction, develop business, manage operations and maintain a cohesive and stable environment. Specifically, we are dependent upon Mark L. Weinstein, President and Chief Executive Officer, David A. Pitler, Senior Vice President Operations, Colin G. Miller, Ph.D., Senior Vice President Medical Affairs and Ted I. Kaminer, Senior Vice President and Chief Financial Officer. Although we have employment agreements with Mr. Weinstein and Mr. Kaminer, this does not necessarily mean that they will remain with us. Although we have executive retention agreements with our officers, we do not have employment agreements with any other key personnel. Furthermore, our performance also depends on our ability to attract and retain management and qualified professional and technical operating staff. Competition for these skilled personnel is intense. The loss of services of any key executive, or inability to continue to attract and retain qualified staff, could have a material adverse effect on our business, results of operations and financial condition. We do not maintain any key employee insurance on any of our executives.

## Our revenues, earnings and operating costs are exposed to exchange rate fluctuations.

In fiscal 2007, a portion of our service revenues were denominated in foreign currency. Our financial statements are denominated in United States dollars. In the event a greater portion of our service revenues are denominated in a foreign currency, changes in foreign currency exchange rates could affect our results of operations and financial condition. Fluctuations in foreign currency exchange rates could materially impact the operating costs of our European facilities in Leiden, the Netherlands and Lyon, France which are primarily Euro denominated.

#### Our investments may be exposed to credit risk.

Financial instruments that potentially subject us to significant credit risk consist principally of cash, investments and derivatives. As part of our risk management processes, we continuously evaluate the relative credit standing of all of

the financial institutions that service us and monitor actual exposures versus established limits. We have not sustained credit losses from instruments held at financial institutions. We maintain cash and cash equivalents, comprised of savings accounts, short-term certificate of deposits and money market funds with various financial institutions. These financial institutions are generally highly rated and the company has a policy to limit the dollar amount of credit exposure with any one institution.

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# **Risks Related to Our Industry**

Our failure to compete effectively in our industry could cause our revenues to decline.

Significant factors in determining whether we will be able to compete successfully include:

consultative and clinical trials design capabilities;

reputation for on-time quality performance;

expertise and experience in specific therapeutic areas;

the scope of service offerings;

strength in various geographic markets;

the price of services;

ability to acquire, process, analyze and report data in a time-saving and accurate manner;

ability to manage large-scale clinical trials both domestically and internationally;

our size; and

the service and product offerings of our competitors.

If our services are not competitive based on these or other factors, our business, financial condition and results of operations will be materially harmed.

The biopharmaceutical services industry is highly competitive, and we face numerous competitors in our business, including hundreds of contract research organizations. If we fail to compete effectively, we will lose clients, which would cause our business to suffer. We primarily compete against in-house departments of pharmaceutical companies, full service contract research organizations, or CROs, small specialty CROs, and to a lesser extent, universities and teaching hospitals. Some of these competitors have substantially greater capital, technical and other resources than we do. In addition, certain of our competitors that are smaller specialized companies may compete effectively against us because of their concentrated size and focus.

Changes in outsourcing trends in the pharmaceutical and biotechnology industries could adversely affect our operating results and growth rate.

Service revenues depend greatly on the expenditures made by the pharmaceutical and biotechnology industries in research and development. Accordingly, economic factors and industry trends that affect our clients in these industries also affect our business. For example, the practice of many companies in these industries has been to hire outside organizations like us to conduct clinical research projects. This practice has grown significantly in the last decade, and we have benefited from this trend. However, if this trend were to change and companies in these industries were to reduce the number of research and development projects they outsource, our business could be materially adversely affected.

Additionally, numerous governments have undertaken efforts to control growing healthcare costs through legislation, regulation and voluntary agreements with medical care providers and pharmaceutical companies. If future regulatory cost containment efforts limit the profits that can be derived on new drugs, our clients might reduce their research and development spending, which could reduce our business.

## Failure to comply with existing regulations could result in increased costs to complete clinical trials.

Our business is subject to numerous governmental regulations, primarily relating to pharmaceutical product development and the conduct of clinical trials. In particular, we are subject to 21 CFR Part 11 of the Code of Federal Regulations that provides the criteria for acceptance by the FDA of electronic records. If we fail to comply with these governmental regulations, it could result in the termination of ongoing clinical research or the disqualification of data for submission to regulatory authorities. We also could be barred from providing clinical trial services in the

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future or be subjected to fines. Any of these consequences would harm our reputation, our prospects for future work and our operating results.

### Our CapMed division may not reach profitability.

Our CapMed division had a loss from operations of \$1,798,354 in fiscal 2007. If our CapMed division continues to incur such losses, our businesses, results of operations and financial condition will be materially adversely affected.

Changes in governmental regulation could decrease the need for the services we provide, which would negatively affect our future business opportunities.

In recent years, the United States Congress and state legislatures have considered various types of healthcare reform in order to control growing healthcare costs. The United States Congress and state legislatures may again address healthcare reform in the future. We are unable to predict what legislative proposals will be adopted in the future, if any. Similar reform movements have occurred in Europe and Asia.

Implementation of healthcare reform legislation that results in additional costs could limit the profits that can be made by clients from the development of new products. This could adversely affect our clients—research and development expenditures, which could, in turn, decrease the business opportunities available to us both in the United States and abroad. In addition, new laws or regulations may create a risk of liability, increase costs or limit service offerings. We cannot predict the likelihood of any of these events.

In addition to healthcare reform proposals, the expansion of managed care organizations in the healthcare market may result in reduced spending on research and development. Managed care organizations—efforts to cut costs by limiting expenditures on pharmaceuticals and medical devices could result in pharmaceutical, biotechnology and medical device companies spending less on research and development. If this were to occur, we would have fewer business opportunities and our revenues could decrease, possibly materially.

Governmental agencies throughout the world, but particularly in the United States, strictly regulate the drug development/approval process. Our business involves helping pharmaceutical and biotechnology companies navigate the regulatory drug approval process. Changes in regulation, such as relaxation in regulatory requirements or the introduction of simplified drug approval procedures or an increase in regulatory requirements that we may have difficulty satisfying could eliminate or substantially reduce the need for our services. If these changes in regulations were to occur, our business, results of operations and financial condition could be materially adversely affected. These and other changes in regulation could have a material adverse impact on our available business opportunities.

# If governmental agencies do not accept the data and analyses generated by our services, the need for our services would be eliminated or substantially reduced.

The success of our business is dependent upon continued acceptance by the FDA and other regulatory authorities of the data and analyses generated by our services in connection with the evaluation of the safety and efficacy of new drugs and devices. The FDA has formal guidelines that encourage the use of surrogate measures through submission of digital image data, for evaluation of drugs to treat life-threatening or debilitating conditions. We cannot assure you that the FDA or other regulatory authorities will accept the data or analyses generated by us in the future and, even assuming acceptance, the FDA or other regulatory authorities may not require the application of imaging techniques to numbers of patients and over time periods substantially similar to those required of traditional safety and efficacy techniques. If the governmental agencies do not accept data and analyses generated by our services in connection with the evaluation of new drugs and devices, the need for our services would be eliminated or substantially reduced, and, as a result, our business, results of operations and financial condition could be materially adversely affected.

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#### We may be exposed to liability claims as a result of our involvement in clinical trials.

We may be exposed to liability claims as a result of our involvement in clinical trials. We cannot assure you that liability claims will not be asserted against us as a result of work performed for our clients. We maintain liability insurance coverage in amounts that we believe are sufficient for the pharmaceutical services industry. Furthermore, we cannot assure you that our clients will agree to indemnify us, or that we will have sufficient insurance to satisfy any such liability claims. If a claim is brought against us and the outcome is unfavorable to us, such outcome could have a material adverse impact on us.

# Risks related to our common stock

Your percentage ownership and voting power and the price of our common stock may decrease as a result of events that increase the number of our outstanding shares.

As of December 31, 2007, we had the following capital structure:

Common stock outstanding	11,765,483
Common stock issuable upon:	
Exercise of options which are outstanding	1,627,729
Exercise of options which have not been granted	496,713
Total common stock outstanding assuming exercise or conversion of all of the above	13,889,925

As of December 31, 2007, we had outstanding options to purchase 1,627,729 shares of common stock at exercise prices ranging from \$0.63 to \$8.06 per share (exercisable at a weighted average of \$3.31 per share), of which 1,399,944 options were then exercisable. Exercise of our outstanding options into shares of our common stock may significantly and negatively affect the market price for our common stock as well as decrease your percentage ownership and voting power. In addition, we may conduct future offerings of our common stock or other securities with rights to convert the securities into shares of our common stock. As a result of these and other events, such as future acquisitions, that increase the number of our outstanding shares, your percentage ownership and voting power and the price of our common stock may decrease.

# Shares of our common stock eligible for public sale may have a negative impact on its market price.

Future sales of shares of our common stock by existing holders of our common stock or by holders of outstanding options, upon the exercise thereof, could have a negative impact on the market price of our common stock. As of December 31, 2007, we had 11,765,483 shares of our common stock issued and outstanding, all of which are currently freely tradable.

We are unable to estimate the number of shares that may be sold because this will depend on the market price for our common stock, the personal circumstances of the sellers and other factors. Any sale of substantial amounts of our common stock or other securities in the open market may adversely affect the market price of the securities offered hereby and may adversely affect our ability to obtain future financing in the capital markets as well as create a potential market overhang.

There are a limited number of shareholders who have significant control over our common stock, allowing them to have significant influence over the outcome of all matters submitted to our stockholders for approval, which influence may conflict with our interests and the interests of our other stockholders.

Our directors, officers and principal stockholders (stockholders owning 10% or more of our common stock) beneficially owned 24% of the outstanding shares of common stock at December 31, 2007, and such stockholders, including Covance Inc., will have significant influence over the outcome of all matters submitted to our stockholders for approval, including the election of our directors and other corporate actions. In addition, such influence by these affiliates could have the effect of discouraging others from attempting to take us over, thereby increasing the likelihood that the market price of the common stock will not reflect a premium for control.

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Because we do not intend to pay dividends, stockholders will benefit from an investment in our common stock only if it appreciates in value.

We have never declared or paid any cash dividends on our common stock. We currently intend to retain our future earnings, if any, to finance further operations and do not expect to pay any cash dividends in the foreseeable future. As a result, the success of an investment in our common stock will depend upon any future appreciation in its value. There is no guarantee that our common stock will appreciate in value or even maintain the price at which stockholders have purchased their shares.

Trading in our common stock may be volatile, which may result in substantial declines in its market price.

The market price of our common stock has experienced historical volatility and might continue to experience volatility in the future in response to quarter-to-quarter variations in:

operating results;
analysts reports;
market conditions in the industry;
changes in governmental regulations; and
changes in general conditions in the economy or the financial markets.

The overall market (including the market for our common stock) has also experienced significant decreases in value in the past. This volatility and potential market decline could affect the market prices of securities issued by many companies, often for reasons unrelated to their operating performance, and may adversely affect the price of our common stock. Between January 1, 2007 and December 31, 2007, our common stock has traded at a low of \$5.75 per share and a high of \$9.95 per share. Between January 1, 2008 and February 29, 2008, our common stock has traded at a low of \$6.79 per share and a high of \$8.98 per share.

Our common stock began trading on the NASDAQ Global Market, formerly called the NASDAQ National Market, on December 18, 2003 and has a limited trading market. We cannot assure that an active trading market will develop or, if developed, will be maintained. As a result, our stockholders may find it difficult to dispose of shares of our common stock and, as a result, may suffer a loss of all or a substantial portion of their investment.

Certain provisions of our charter and Delaware law could make a takeover difficult and may prevent or frustrate attempts by our stockholders to replace or remove our management team.

We have an authorized class of 3,000,000 shares of undesignated preferred stock, of which 1,250,000 shares were previously issued, and the remaining 1,750,000 shares may be issued by our board of directors, on such terms and with such rights, preferences and designation as the Board may determine. Issuance of such preferred stock, depending upon the rights, preferences and designations thereof, may have the effect of delaying, deterring or preventing a change in control of our company. In addition, we are subject to provisions of Delaware corporate law which, subject to certain exceptions, will prohibit us from engaging in any business combination with a person who, together with affiliates and associates, owns 15% or more of our common stock for a period of three years following the date that the person came to own 15% or more of our common stock unless the business combination is approved in a prescribed manner.

These provisions of our certificate of incorporation, and of Delaware law may have the effect of delaying, deterring or preventing a change in control of our company, may discourage bids for our common stock at a premium over market price and may adversely affect the market price, and the voting and other rights of the holders, of our common stock. In addition, these provisions make it more difficult to replace or remove our current management team in the event our stockholders believe this would be in the best interest of our company and our stockholders.

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#### Item 1B. Unresolved Staff Comments.

None.

# Item 2. Properties.

We lease 54,400 square feet of office space located in Newtown, Pennsylvania. This lease expires June 2010 and provides for a fixed base rent of \$93,000 per month with an annual inflation increase. We lease 7,447 square feet of additional office space located in Newtown, Pennsylvania for \$6,100 per month in base rent, which expires November 2008. In addition, we lease 23,750 square feet of office space in Leiden, the Netherlands and another 2,400 square feet in Lyon, France. These leases are denominated in the Euro and expire in April 2013 and January 2009, respectively. The base rent for the Netherlands is \$48,500 per month and Lyon s base rent is \$6,400, based upon the conversion rate as of December 31, 2007, with an annual inflation increase. We believe that these facilities will be adequate for our needs for the foreseeable future.

## Item 3. Legal Proceedings.

In the normal course of business, we may be a party to legal proceedings. We are not currently a party to any material legal proceedings.

# Item 4. Submission of Matters to a Vote of Security Holders.

None.

#### **PART II**

# Item 5. Market for Registrant's Common Equity, Related Stockholder Matters and Issuer Purchases of Equity Securities.

Our common stock began trading on the NASDAQ Global Market, formerly called the NASDAQ National Market, on December 18, 2003 under the symbol BITI . Prior to listing on the NASDAQ Global Market, our common stock was traded on the American Stock Exchange under the symbol BIT from February 25, 2003 until December 18, 2003. Our common stock was quoted on the NASD OTC Bulletin Board under the symbol BITI prior to being listed on the American Stock Exchange.

The following table sets forth the high and low bid quotations for our common stock as reported on the NASDAQ Global Market for each full quarterly period within the two most recent fiscal years. Such quotations reflect interdealer prices, without retail mark-up, mark-down or commission and may not represent actual transactions.

	Common Stock					
Quarter Ended	High	Low				
March 31, 2006	4.73	3.11				
June 30, 2006	4.83	3.80				
September 30, 2006	4.54	3.51				
December 31, 2006	8.10	4.03				

March 31, 2007	9.40	5.84
June 30, 2007	7.45	5.75
September 30, 2007	8.00	6.03
December 31, 2007	9.95	6.83

As of February 29, 2008, the number of holders of record of our common stock was 86 and the approximate number of beneficial holders of our common stock was 1,700.

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On February 6, 2007, we acquired 100% of the outstanding securities of Theralys, a privately held company headquartered in Lyon, France. The aggregate purchase price was 2,958,285 Euros (\$3,853,462 as determined by an agreed upon exchange rate), of which 2,375,484 Euros (\$3,093,122) was paid in cash and \$760,340 was paid in 93,408 shares of our common stock. We also incurred \$678,000 in acquisition costs.

On March 7, 2007, in connection with his employment agreement dated March 1, 2006, we issued 14,850 shares of restricted stock to our President and Chief Executive Officer, which was net of 10,150 shares withheld for withholding taxes associated with the issuance of the shares.

We believe that the issuance of the foregoing securities was exempt from registration under Section 4(2) of the Securities Act of 1933, as amended, as transactions not involving a public offering. Each of the recipients were sophisticated or accredited investors, acquired the securities for investment purposes only and not with a view to distribution and had adequate information about our company.

We have neither paid nor declared dividends on our common stock since our inception and do not plan to pay dividends on our common stock in the foreseeable future. We expect that any earnings which we may realize will be retained to finance our growth.

On November 9, 2005, our Compensation Committee of the Board of Directors recommended, and our Board of Directors approved, the acceleration of vesting of all out-of-the-money unvested options to purchase shares of our common stock with an exercise price greater than \$7.00 held by our current employees and executive officers (but excluding any options granted to members of our Board of Directors). These options were previously awarded to our employees on February 4, 2004, pursuant to the 2002 Stock Incentive Plan as amended in 2005 (Plan), and would still have been unvested at January 1, 2006. Options to purchase 107,691 shares of common stock are subject to this acceleration. The exercise price per share for these options was \$7.03, while the closing price per share on November 9, 2005 was \$2.20.

The following table summarizes the options subject to acceleration:

	Aggregate Number of Shares Issuable			
	Under Accelerated Options	Exercise Price per Share	Date of Grant	
Employees as a group (other than executive				
officers)	69,722	\$ 7.03	February 4, 2004	
Executive officers as a group	37,969	\$ 7.03	February 4, 2004	

The acceleration of vesting of these out-of-the money options is being undertaken primarily to eliminate any future compensation expense our company would otherwise recognize in its income statement with respect to these options with the implementation of the Financial Accounting Standard Board (FASB) statement Share-Based Payment (FAS 123R) effective for our company on January 1, 2006. We estimate this compensation expense, before tax, would be \$402,763 in aggregate future expenses based on calculations using the Black-Scholes methodology.

The following table provides information as of December 31, 2007 with respect to the shares of our Common Stock that may be issued under our existing equity compensation plans.

Plan Category	Number of Securities to be Issued Upon Exercise of Outstanding Options	Exer Ou	nted Average cise Price of atstanding Options	Number of Securities Available for Future Issuance Under Equity Compensation Plans		
Equity compensation plans that have been approved by security holders Equity compensation plans not approved by security holders	1,627,729	\$	3.31	496,713		
Total	1,627,729	\$	3.31	496,713		
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#### STOCK PRICE PERFORMANCE GRAPH

Our common stock is listed for trading on the NASDAQ Global Market under the symbol BITI. The Stock Price Performance Graph set forth below compares the cumulative total stockholder return on the our common stock for the period from December 31, 2002 through December 31, 2007, with the cumulative total return of the NASDAQ U.S. Stock Index and the NASDAQ Health Services Index over the same period. The comparison assumes \$100 was invested on December 31, 2002 in our common stock, in the NASDAQ U.S. Stock Index and in the NASDAQ Health Services Index and assumes reinvestment of dividends, if any.

	Dec. 31, 2002	Dec. 31, 2003	Dec. 31, 2004	Dec. 31, 2005	Dec. 31, 2006	Dec. 31, 2007
Bio-Imaging						
Technologies, Inc.	\$ 100.00	\$ 283.18	\$ 249.09	\$ 146.82	\$ 366.36	\$ 367.27
NASDAQ U.S. Stock						
Index	\$ 100.00	\$ 149.51	\$ 162.71	\$ 166.17	\$ 182.58	\$ 198.00
NASDAQ Health						
Services	\$ 100.00	\$ 152.92	\$ 192.73	\$ 264.88	\$ 264.50	\$ 345.72

The foregoing Stock Price Performance Graph and related information shall not be deemed soliciting material or to be filed with the SEC, nor shall such information be incorporated by reference into any future filing under the Securities Act of 1933 or Securities Exchange Act of 1934, each as amended, except to the extent that we specifically incorporate it by reference into such filing.

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#### Item 6. Selected Financial Data.

The following table presents selected consolidated financial data. This data is derived from our audited consolidated financial statements and should be read in conjunction with the Management s Discussion and Analysis of Financial Condition and Results of Operations and the consolidated financial statements and related footnotes included in this Form 10-K.

	For the Years Ended,									
	2007 2006			Dec. 31, 2006	Dec. 31, Dec. 31 2005 2004 s, except per share data ar employees)			Dec. 31, 2004	2003	
					CII	ipioyees)				
OPERATIONS										
Service revenue	\$	38,196	\$	32,115	\$	23,734	\$	25,069	\$	21,748
Total revenue	\$	47,907	\$	40,519	\$	30,486	\$	29,691	\$	25,211
Income (loss) from operations		3,190		1,115		(4,335)		1,604		2,198
Net income (loss)		2,333		1,004		(2,545)		949		2,338
Basic earnings (loss) per share		0.20		0.09		(0.23)		0.09		0.25
Diluted earnings (loss) per share		0.18		0.08		(0.23)		0.08		0.22
Weighted average shares used in computing:										
Basic earnings (loss) per share		11,616		11,219		11,114		10,812		9,276
Diluted earnings (loss) per share		12,745		12,364		11,114		12,229		10,849
FINANCIAL POSITION										
Cash, cash equivalents	\$	17,915	\$	16,166	\$	10,554	\$	9,650	\$	13,289
Working capital	\$	9,721		10,219		8,055		13,121		12,966
Total assets		43,057		34,108		28,791		28,374		25,907
Long-term debt		0		97		551		907		771
Stockholders equity		23,529		18,842		17,197		19,518		17,426
OTHER DATA										
Purchases of property and equipment	\$	3,928	\$	2,232	\$	1,871	\$	1,849	\$	1,641
Depreciation and amortization		2,335		2,035		2,312		1,760		1,076
Number of employees (not audited)		337		283		264		269		223

Item 7. Management s Discussion and Analysis of Financial Condition and Results of Operations.

# Overview

#### Pharmaceutical Contract Services

We are a global pharmaceutical contract service organization, providing services that support the product development process of the pharmaceutical, biotechnology and medical device industries. We specialize in assisting our clients in the design and management of the medical imaging component of clinical trials for all modalities, which consist of computerized tomography (CT), magnetic resonance imaging (MRI), x-rays, dual energy x-ray absorptiometry (DXA/DEXA), positron emission tomography (PET), single photon emission computerized tomography (SPECT), quantitative coronary angiography (QCA), cardiac MRI and CT, intravascular ultrasound (IVUS), peripheral quantitative angiography (QVA) and central nervous system (CNS) MRI and ultrasound. We provide services that include the processing and analysis of medical images and the data-basing and regulatory submission of medical

images, quantitative data and text.

Our sales cycle, referring to the period from the presentation by us to a potential client to the engagement of us by such client, has historically ranged from three to twelve months. In addition, the contracts under which we perform services typically cover a period of 12 to 60 months and the volume and type of services performed by us generally vary during the course of a project. Service revenues were generated from 130 clients encompassing 289 distinct projects for fiscal 2007. This compares to 128 clients encompassing 284 distinct projects for fiscal 2006.

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Our contracted/committed backlog, referred to as backlog, is the expected service revenue that remains to be earned and recognized on both signed and verbally agreed to contracts. Our backlog was \$92.5 million as of December 31, 2007. This compares to \$75.2 million as of December 31, 2006, an increase of 23.0%. This increase is primarily due to our sales and marketing efforts for fiscal 2007 and an overall market growth for medical-imaging related services for clinical trials. Contracts included in backlog are subject to termination by our clients at any time. In the event that a contract is cancelled by the client, we would be entitled to receive payment for all services performed up to the cancellation date. The duration of the projects included in our backlog range from less than three months to seven years. We believe that our backlog assists our management as an indicator of our long-term business. However, we do not believe that backlog is a reliable predictor of near-term results because service revenues may be incurred in a given period on contracts that were not included in the previous reporting period s backlog and/or contract cancellations or project delays may occur in a given period on contracts that were included in the previous reporting period s backlog.

We believe that demand for our services and technologies will continue to grow as the use of digital technologies for data acquisition and management increases in the radiology and drug development communities. We also believe that there is a growing recognition within the bio-pharmaceutical industry of the advantages in using an independent centralized core laboratory for analysis of medical-imaging data and compliance with the regulatory demands for the submission of such data and this may lead to a growth in our market share for these services. The FDA is also requiring more robust studies and additional data for clinical trials. In addition, the FDA continues to develop sophisticated guidelines for computerized submission of clinical trial data, including medical images. Furthermore, we believe that the increased use of digital medical images in clinical trials, especially for important drug classes such as anti-inflammatory, neurologic and oncologic therapeutics and diagnostic image agents, generate large amounts of image data from a large number of imaging sources. These studies require processing, analysis, data management and submission services best handled by vendors with scalable logistical capabilities and extensive experience working with research facilities worldwide. However, due to several factors, including, without limitation, competition from commercial competitors and academic research centers and the risk of project cancellations, slowing of patient enrollment in on-going studies or delay of future project awards, among others, we cannot assure you that demand for our services and technologies will grow, sustain growth, or that additional revenue generating opportunities will be realized by us.

#### CapMed Division

Our CapMed division offers the Personal Health Record software, referred to as PHR, and the patent-pending Personal HealthKey<sup>tm</sup> technology. The PHR is a software application that enables users to manage and store personal health information, including their medical images, on the privacy of their desktop computer, while linking directly to sponsor-directed resources such as drug information, patient education, or disease guidelines. The Personal HealthKey<sup>tm</sup> plugs into a computer s USB port, allowing doctors and patients easy access to the patient s medical record without the need for additional hardware or software, and it is password protected. Our hybrid product offering also includes patient access to personal health information on line and via cell phone and is interoperable with a wide range of third party vendors.

We intend to expand our CapMed division through partnerships and marketing efforts devoted to the PHR and Personal HealthKey<sup>tm</sup> products. We continue to pursue alliances and evaluate strategic alternatives to maximize shareholder value. We believe that continued emphasis on improving patient care and reducing cost will contribute to the growth of the personal electronic medical records market. We also have developed an In Case of Emergency (icePHR<sup>tm</sup>) designed especially for use in emergencies to provide consumers with private and timely access to personal health information in a security-enhanced environment. CapMed also offers icePHR Mobile<sup>tm</sup> that will allow access to the information on cell phones and PDA s and a comprehensive PHR Online product that will capture and maintain all aspects of personal health management. The markets for our CapMed division continue to evolve

favorably. We continue to be encouraged by the long-term prospects for this division although the revenue generating adoption rate has been slower than anticipated.

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#### **Forward Looking Statements**

Certain matters discussed in this Form 10-K are forward-looking statements intended to qualify for the safe harbors from liability established by the Private Securities Litigation Reform Act of 1995. Such forward-looking statements may be identified by, among other things, the use of forward-looking terminology such as believes, expects, may, should or anticipates or the negative thereof or other variations thereon or comparable terminology, or by discussions of strategy that involve risks and uncertainties. In particular, our statements regarding: our projected financial results; growth potential for our CapMed division; the demand for our services and technologies; growing recognition for the use of independent centralized core laboratories; trends toward the outsourcing of imaging services in clinical trials; realized return from our marketing efforts; increased use of digital medical images in clinical trials; integration of our acquired companies and businesses; expansion into new business segments; the success of any potential acquisitions and the integration of current acquisitions; and the level of our backlog are examples of such forward-looking statements. The forward-looking statements include risks and uncertainties, including, but not limited to, the timing of revenues due to the variability in size, scope and duration of projects, estimates made by management with respect to our critical accounting policies, regulatory delays, clinical study results which lead to reductions or cancellations of projects, and other factors, including general economic conditions and regulatory developments, not within our control. The factors discussed in this Form 10-K and expressed from time to time in our filings with the SEC, as well as the risk factors set forth in this Form 10-K, could cause actual results and developments to be materially different from those expressed in or implied by such statements. The forward-looking statements are made only as of the date of this filing, and we undertake no obligation to publicly update such forward-looking statements to reflect subsequent events or circumstances.

## Critical Accounting Policies, Estimates and Risks

Our discussion and analysis of our financial condition and results of operations are based upon our Consolidated Financial Statements, which have been prepared in accordance with accounting principles generally accepted in the United States. The preparation of financial statements in accordance with generally accepted accounting principles in the United States requires management to make estimates and assumptions that affect the reported amounts of assets and liabilities, including the recoverability of tangible and intangible assets, disclosure of contingent assets and liabilities as of the date of the financial statements and the reported amounts of revenues and expenses during the reported period.

On an on-going basis, we evaluate our estimates. The most significant estimates relate to the recognition of revenue and profits based on the proportional performance method of accounting for fixed service contracts and income taxes.

We believe the following critical accounting policies affect our more significant judgments and estimates used in the preparation of our Consolidated Financial Statements:

Revenue. Service revenues are recognized over the contractual term of the Company's customer contracts using the proportional performance method, which is based on hours incurred as a percentage of total estimated hours. Service revenues are first recognized when the Company has a signed contract from a customer which: (i) contains fixed or determinable fees; (ii) collectability of such fees is reasonably assured; and (iii) services are performed. Any change to recognized service revenue as a result of revisions to estimated total hours are recognized in the period the estimate changes.

The Company enters into contracts that contain fixed or determinable fees. The fees in the contracts are based on the scope of work we are contracted to perform; there are unitized fees per service and fixed fees with a total estimated for the contract based upon the estimated unitized service expected to be performed, as well as the service to be delivered under the fixed fee component of the contract. The units are estimated based on the information provided by the

customer, and the Company bills the customer for actual units completed in accordance with the terms of the contract. In the event that a contract is cancelled by the client, we would be entitled to receive payment for all services performed up to the cancellation date.

The Company, at the request of its clients, directly contract with and pay independent radiologists, referred to as Readers, who review the client s imaging data as part of the clinical trial. The costs of the Readers

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and other out-of-pocket expenses are reimbursed to the Company and recognized gross as reimbursement revenues pursuant to EITF 99-19 Reporting Revenue Gross as a Principal versus Net as an Agent .

Long-lived Assets, Intangibles and Goodwill. Management annually evaluates the net realizable value of long-lived assets, including property and equipment, intangibles and goodwill relying on a number of factors including operating results, business plans, economic projections and anticipated future cash flows. If these factors indicate that the carrying value of a long lived asset exceeds the net realizable value, the Company will record an impairment and reduce the carrying value of the asset to the net realizable value.

Capitalized Software Development. We capitalize development costs for a software project once the preliminary project stage is completed, we have committed to fund the project and it is probable that the project will be completed and the software will be used to perform the function intended. We cease capitalization at such time as the computer software project is substantially complete and ready for its intended use. The determination that a software project is eligible for capitalization and the ongoing assessment of recoverability of capitalized software development costs require considerable judgment by us with respect to certain external factors including, but not limited to, anticipated future revenue, estimated economic life and changes in software and hardware technologies.

Income Taxes. We evaluate the need to record a valuation allowance to reduce our deferred tax assets to an amount that is more likely than not to be realized. In assessing the need for the valuation allowance, we consider our future taxable income and on-going prudent and feasible tax planning strategies. In the event that we were to determine that, in the future, we would be able to realize our deferred tax assets in excess of its net recorded amount, an adjustment to the deferred tax asset would be made, thereby increasing net income in the period such determination was made. Likewise, should we determine that it is more likely than not that we will be unable to realize all or part of our net deferred tax asset in the future, an adjustment to the deferred tax asset would be charged, thereby decreasing net income in the period such determination was made. We recognize contingent liabilities for any tax related exposures when those exposures are reasonably possible.

*Derivatives.* As needed, we may use derivative financial instruments to reduce the risk caused by interest rate fluctuations. The derivative instruments are not held for trading purposes. Derivatives are accounted for in accordance with FAS No. 133, Accounting for Derivative Instruments and Hedging Activities. We recognize derivative instruments as either assets or liabilities in our balance sheet and measure them at fair value. If designated as a cash flow hedge, the corresponding changes in fair value are recorded in stockholders equity (as a component of comprehensive income/expense).

Stock-based compensation costs. Effective January 1, 2006, we account for stock-based compensation costs in accordance with SFAS 123R, which requires the measurement and recognition of compensation expense for all stock-based payment awards made to our employees and directors. Under the fair value recognition provisions of SFAS 123R, stock-based compensation cost is measured at the grant date based on the value of the award and is recognized as expense over the vesting period. Determining the fair value of the stock-based awards at the grant date requires considerable judgment. In addition, judgment is also required in estimating the amount of stock-based awards that are expected to be forfeited. If the actual experience differs significantly from the assumptions used to compute our stock-based compensation cost, or if different assumptions had been used, we may have recorded too much or too little stock-based compensation cost.

## **Foreign Currency Risks**

Our financial statements are denominated in U.S. dollars. Fluctuations in foreign currency exchange rates could materially increase the operating costs of our facilities in the Netherlands and France, which are Euro denominated. A 10% increase or decrease in the Euro to U.S. dollar spot exchange rate would result in a change of \$546,429 and

\$41,600 to our net asset position, at December 31, 2007 and December 31, 2006, respectively. In addition, certain of our contracts are denominated in foreign currency. We believe that any adverse fluctuation in the foreign currency markets relating to these costs will not result in any material adverse effect on our financial condition or results of operations. In the event we derive a greater portion of our service revenues from international operations, factors associated with international operations, including changes in foreign currency exchange rates, could affect our results of operations and financial condition.

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We hedge our foreign currency exposure when and as appropriate to mitigate the adverse impact of fluctuating exchange rates. Our foreign currency financial instruments primarily consist of cash, trade receivables, prepaid expenses, fixed assets, trade payables and accrued expenses. We were in a net asset position at December 31, 2007 and December 31, 2006. An increase in the exchange rate would result in less net assets when converted to U.S. dollars. Conversely, if we were in a net liability position, a decrease in the exchange rate would result in more net liabilities when converted to U.S. dollars.

## **Results of Operations**

The results of operations for our CapMed segment is not material to the trend of the financials and therefore, the results of operations discussed below includes both our Pharmaceutical Contract Services and CapMed segments.

Year Ended December 31, 2007 Compared with Year Ended December 31, 2006.

	2007	% of Total Revenue		2006	% of Total Revenue	;	\$ Change	% Change
Service revenues Reimbursement revenues	\$ 38,196,156 9,711,128	79.7% 20.3%	9	\$ 32,114,604 8,404,189	79.3% 20.7%	\$	6,081,552 1,306,939	18.9% 15.6%
				,				
<b>Total revenues</b>	47,907,284	100%		40,518,793	100.0%		7,388,491	18.2%
Cost and expenses:								
Cost of service revenues	21,948,752	45.8%		19,752,390	48.7%		2,196,362	11.1%
Cost of reimbursement revenues	9,711,128	20.3%		8,404,189	20.7%		1,306,939	15.6%
Sales and marketing								
expenses General and administrative	6,855,114	14.3%		5,739,303	14.2%		1,115,811	19.4%
expenses	6,202,658	12.9%		5,507,518	13.6%		695,140	12.6%
<b>Total cost and expenses</b>	44,717,652	93.3%		39,403,400	97.2%		5,314,252	13.5%
<b>Income from operations</b>	3,189,632	6.7%		1,115,393	2.8%		2,074,239	186.0%
Interest income	654,693	1.4%		559,816	1.4%		94,877	16.9%
Interest expense	(11,563)	(0.0)%		(56,338)	(0.1)%		44,775	(79.5)%
Income before income tax	3,832,762	8.0%		1,618,871	4.0%		2,213,891	136.8%
Income tax provision	1,499,690	3.1%		614,772	1.5%		884,918	143.9%
Net income	\$ 2,333,072	4.9%	9	\$ 1,004,099	2.5%	\$	1,328,973	132.4%

Service revenues were \$38,196,156 for fiscal 2007 and \$32,114,604 for fiscal 2006, an increase of \$6,081,552, or 18.9%. The increase in service revenues was due to an increase in work performed from our increased contract signings in fiscal 2006 and 2007. Our primary scope of work in both periods included medical-imaging core laboratory services and image-based information management services. Our backlog at December 31, 2007 increased

to \$92.5 million from \$75.2 million at December 31, 2006, an increase of 23.0%. We believe this increase in backlog is an indicator that the overall market growth for medical-imaging related services for clinical trials continues to be positive, subject to project cancellations, slowing of patient enrollment in on-going studies and delays of future project awards. Service revenues were generated from 130 clients encompassing 289 distinct projects for fiscal 2007. This compares to 128 clients encompassing 284 distinct projects for fiscal 2006. Contracts with Hoffmann-La Roche, which encompassed 11 projects, represented 13.4% of our service revenues for the year ended December 31, 2007, while one client, Novartis Pharmaceutical, Inc., which encompassed 14 projects, represented 10.9% of our service revenues for the year ended December 31, 2006. Service revenues generated from our client base, while still concentrated as measured by the number of clients, has continued to become more dispersed over time, and we believe more diversification is evident when revenue concentration is measured by the number of individual projects.

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Reimbursement revenues and cost of reimbursement revenues was \$9,711,128 for fiscal 2007 and \$8,404,189 for fiscal 2006, an increase of \$1,306,939, or 15.6%. Reimbursement revenues and cost of reimbursement revenues consist of payments received from the customer for reimbursable costs. Reimbursement revenues and cost of reimbursement revenues fluctuate significantly over the course of any given project and quarter to quarter variations are a reflection of this project timing. Therefore, our management believes that reimbursement revenues and cost of reimbursement revenues are not a significant indicator of our overall performance trends. At the request of our clients, we may directly pay the independent radiologists who review our client s imaging data. In such cases, per contractual arrangement, these costs are billed to our clients and are included in reimbursement revenues and cost of reimbursement revenues.

Cost of service revenues was \$21,948,752 for fiscal 2007 and \$19,752,390 for fiscal 2006, an increase of \$2,196,362, or 11.1%. Cost of service revenues for fiscal 2007 and 2006 was comprised of professional salaries and benefits and allocated overhead. The increase in cost of service revenues is primarily due to the addition of operating costs from Theralys S.A. The decrease in cost of service revenues as a percentage of total revenues to 45.8% for fiscal 2007 from 48.7% for fiscal 2006 is primarily attributable to increased efficiencies for a lower increase in cost of service revenue as compared to a higher increase in service revenues. The cost of service revenues as a percentage of total revenues also fluctuates due to work-flow variations in the utilization of staff and the mix of services provided by us in any given period. We expect that our cost of service revenues will continue to increase in fiscal 2008 as service revenues increase.

Sales and marketing expenses were \$6,855,114 for fiscal 2007 and \$5,739,303 for fiscal 2006, an increase of \$1,115,811, or 19.4%. Sales and marketing expenses in fiscal 2007 and 2006 were comprised of direct sales and marketing costs, salaries and benefits and allocated overhead. The increase is primarily due to an increase in our CapMed division s sales and marketing expenses of \$565,000 and an increase in the Company s tradeshow attendance and marketing expenditures. We expect that sales and marketing expenses will increase in fiscal 2008 as we continue to expand our market presence in the United States and Europe. Sales and marketing expenses as a percentage of total revenues was 14.3% for fiscal 2007 and 14.2% for fiscal 2006.

General and administrative expenses were \$6,202,658 for fiscal 2007 and \$5,507,518 for fiscal 2006, an increase of \$695,140, or 12.6%. General and administrative expenses in fiscal 2007 and 2006 consisted primarily of salaries and benefits, depreciation and amortization, professional and consulting services, office rent and corporate insurance. The increase is primarily due to an increase in professional and consulting services. We expect that our general and administrative expense will increase in 2008 due to anticipated additional expenditures for compliance with the Sarbanes-Oxley Act of 2002. The decrease in general and administrative expenses as a percentage of total revenues to 12.9% for fiscal 2007 from 13.6% for fiscal 2006 is primarily due to a greater increase in our total revenues for fiscal 2007.

Net interest income was \$643,130 for fiscal 2007 and net interest income was \$503,478 for fiscal 2006, an increase of \$139,652, or 27.7%. This increase is primarily due to a higher investable cash balances and higher interest rates on short term investments. Also, interest expense has decreased as our capital leases are maturing. Net interest income and expense for 2007 and 2006 is comprised of interest income earned on our cash balance and interest expense incurred on equipment lease obligations. Interest income may decrease in fiscal 2008 if we utilize cash for acquisitions and also with decreased interest rates.

Income before income taxes was \$3,832,762 for fiscal 2007 and \$1,618,871 for fiscal 2006, an increase of \$2,213,891 or 136.8%. The increase was due to the increase in operating income of \$2,074,239 due to our process improvement efforts during fiscal 2007.

Our income tax provision for fiscal 2007 was \$1,499,690 and \$614,772 for fiscal 2006. Our effective tax rate is 39.1% for fiscal 2007 and 37.3% for fiscal 2006. The increase in the effective tax rate is due to the mix of pre-tax income in the U.S. versus the Netherlands and France, which have lower corporate income tax rates.

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Year Ended December 31, 2006 Compared with Year Ended December 31, 2005.

	2006	% of Total Revenue	2005	% of Total Revenue	\$ Change	% Change
Service revenues	\$ 32,114,604		\$ 23,733,579	77.9%	\$ 8,381,025	35.3%
Reimbursement revenues	8,404,189	20.7%	6,752,062	22.1%	1,652,127	24.5%
<b>Total revenues</b>	40,518,793	100.0%	30,485,641	100.0%	10,033,152	32.9%
Cost and expenses:						
Cost of service revenues Cost of reimbursement	19,752,390	48.7%	18,335,513	60.1%	1,416,877	7.7%
revenues	8,404,189	20.7%	6,752,062	22.1%	1,652,127	24.5%
Sales and marketing expenses	5,739,303	14.2%	4,772,223	15.7%	967,080	20.3%
General and	5 507 510	13.6%	4.060.279	16.3%	547 140	11 007
administrative expenses	5,507,518	13.0%	4,960,378	10.3%	547,140	11.0%
<b>Total cost and expenses</b>	39,403,400	97.2%	34,820,176	114.2%	4,583,224	13.2%
Income (loss) from						
operations	1,115,393		(4,334,535)	(14.2)%	5,449,928	(125.7)%
Interest income	559,816		189,609	0.6%	370,207	195.2%
Interest expense	(56,338)	) (0.1)%	(106,287)	(0.3)%	49,949	(47.0)%
Income (loss) before						
income tax Income tax provision	1,618,871	4.0%	(4,251,213)	(13.9)%	5,870,084	(138.1)%
(benefit)	614,772	1.5%	(1,705,841)	(5.6)%	2,320,613	(136.0)%
Net income (loss)	\$ 1,004,099	2.5%	\$ (2,545,372)	(8.3)%	\$ 3,549,471	(139.4)%

Service revenues were \$32,114,604 for fiscal 2006 and \$23,733,579 for fiscal 2005, an increase of \$8,381,025, or 35.3%. The increase in service revenues was due to an increase in work performed from our increased contract signings in fiscal 2005 and 2006. Our backlog at December 31, 2006 increased to \$75.2 million from \$58.4 million at December 31, 2005, an increase of 28.8%. We believe this increase in backlog is an indicator that the overall market growth for medical-imaging related services for clinical trials continues to be positive, subject to project cancellations, slowing of patient enrollment in on-going studies and delays of future project awards. Service revenues were generated from 128 clients encompassing 284 distinct projects for fiscal 2006. This compares to 115 clients encompassing 270 distinct projects for fiscal 2005. Contracts with one client, Novartis Pharmaceutical, Inc., which encompassed 14 projects, represented 10.9% of our service revenues for the year ended December 31, 2006, while no one client accounted for 10% or more of our service revenues for the year ended December 31, 2005. Service revenues generated from our client base, while still concentrated as measured by the number of clients, has continued to become more dispersed over time, and we believe more diversification is evident when revenue concentration is measured by the number of individual projects. Our primary scope of work in both periods included medical-imaging

core laboratory services and image-based information management services.

Reimbursement revenues and cost of reimbursement revenues was \$8,404,189 for fiscal 2006 and \$6,752,062 for fiscal 2005, an increase of \$1,652,127, or 24.5%. Reimbursement revenues and cost of reimbursement revenues consist of payments received from the customer for reimbursable costs. Reimbursement revenues and cost of reimbursement revenues fluctuate significantly over the course of any given project and quarter to quarter variations are a reflection of this project timing. Therefore, our management believes that reimbursement revenues and cost of reimbursement revenues are not a significant indicator of our overall performance trends. At the request of our clients, we may directly pay the independent radiologists who review our client s imaging data. In such cases, per contractual arrangement, these costs are billed to our clients and are included in reimbursement revenues and cost of reimbursement revenues.

Cost of service revenues was \$19,752,390 for fiscal 2006 and \$18,335,513 for fiscal 2005, an increase of \$1,416,877, or 7.7%. Cost of service revenues for fiscal 2006 and 2005 was comprised of professional salaries and

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benefits and allocated overhead. The increase in cost of revenues is primarily due to the increase in consulting costs associated with project related revenues. The decrease in cost of service revenues as a percentage of total revenues to 48.7% for fiscal 2006 from 60.1% for fiscal 2005 is primarily attributable to the reduced revenue in 2005 as a result of the contract cancellations in 2004 and process improvement efforts during fiscal 2006. The cost of service revenues as a percentage of total revenues also fluctuates due to work-flow variations in the utilization of staff and the mix of services provided by us in any given period. We expect that our cost of service revenues will continue to increase in fiscal 2007 as service revenues increase.

Sales and marketing expenses were \$5,739,303 for fiscal 2006 and \$4,772,223 for fiscal 2005, an increase of \$967,080, or 20.3%. Sales and marketing expenses in fiscal 2006 and 2005 were comprised of direct sales and marketing costs, salaries and benefits and allocated overhead. The increase is due to an increase associated with our CapMed division of \$349,000, \$135,000 in expenses associated with tradeshow appearances and \$479,000 in personnel costs and sales commissions due to the increase in contract signings for fiscal 2006 as compared to fiscal 2005. We expect that sales and marketing expenses will increase in fiscal 2007 as we continue to expand our market presence in the United States and Europe. The decrease in sales and marketing expenses as a percentage of total revenues to 14.2% for fiscal 2006 from 15.7% for fiscal 2005 is primarily due to a greater increase in our total revenues for fiscal 2006.

General and administrative expenses were \$5,507,518 for fiscal 2006 and \$4,960,378 for fiscal 2005, an increase of \$547,140, or 11.0%. General and administrative expenses in fiscal 2006 and 2005 consisted primarily of salaries and benefits, depreciation and amortization, professional and consulting services, office rent and corporate insurance. The increase is primarily due to an increase in professional and consulting services. We expect that our general and administrative expense will increase in 2007 due to anticipated additional expenditures for compliance with the Sarbanes-Oxley Act of 2002. The decrease in general and administrative expenses as a percentage of total revenues to 13.6% for fiscal 2006 from 16.3% for fiscal 2005 is primarily due to a greater increase in our total revenues for fiscal 2006.

Net interest income was \$503,478 for fiscal 2006 and net interest income was \$83,322 for fiscal 2005, an increase of \$420,156, or 504.3%. This increase is primarily due to a higher investable cash balance and higher interest rates on short term investments. Also, interest expense has decreased as our capital leases are maturing. Net interest income and expense for 2006 and 2005 is comprised of interest income earned on our cash balance and interest expense incurred on equipment lease obligations. Interest income may decrease in fiscal 2007 if we utilize cash for acquisitions.

Income before income taxes was \$1,618,871 for fiscal 2006, and we had a loss before income tax of \$4,251,213 for fiscal 2005, an increase of \$5,870,084 or 138.1%. The increase was due to the reduction of \$5,449,928 of operating loss from the prior year from greater service revenue while expenses increased at a slower rate due to our process improvement efforts during fiscal 2006.

Our income tax provision for fiscal 2006 was \$614,772 versus an income tax benefit for fiscal 2005 of \$1,705,841. The income tax benefit in fiscal 2005 resulted from recording a deferred tax benefit for the future tax savings anticipated from using the net operating loss carryforwards available at December 31, 2005. Our effective tax rate is 37.3% for fiscal 2006 and 40.1% for fiscal 2005. The decrease in the effective tax rate is due to the mix of pre-tax income in the U.S. versus the Netherlands, which has a lower corporate income tax rate.

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## Quarterly Results

The following is a summary of unaudited quarterly results of operations for the years ended December 31, 2007 and 2006. This quarterly financial data should be read in conjunction with the audited consolidated financial statements included herein.

			Quarter Ended												
		Dec. 31, 2007		Sept. 30, 2007		June 30, 2007		Mar. 31, 2007		Dec. 31, 2006		Sept. 30, 2006		June 30, 2006	
es	\$	10,366,169	\$	9,563,241	\$	9,456,757	\$	, ,	\$	8,662,571	\$	, ,	\$	8,041,196	9
t revenues		2,322,873		2,893,342		2,229,447		2,265,466		2,025,806		2,211,783		2,173,545	
ises:		12,689,042		12,456,583		11,686,204		11,075,455		10,688,377		10,305,924		10,214,741	
revenues rsement		5,802,907		5,392,924		5,476,878		5,276,043		4,967,044		4,903,640		5,189,921	
eting		2,322,873		2,893,342		2,229,447		2,265,466		2,025,806		2,211,783		2,173,545	
cung		1,831,965		1,724,134		1,738,989		1,560,026		1,491,826		1,358,641		1,441,108	
expenses		1,605,175		1,558,060		1,567,145		1,472,278		1,342,604		1,401,852		1,391,816	
expenses rom		11,562,920		11,568,460		11,012,459		10,573,813		9,827,280		9,875,916		10,196,390	
		1,126,122		888,123		673,745		501,642		861,097		430,008		18,351	
		170,350		168,295		155,496		160,552		166,467		146,904		128,912	
e		(287)		(1,144)		(6,401)		(3,731)		(15,308)		(10,154)		(13,693)	
oefore vision															
vision		1,296,185		1,055,274		822,840		658,463		1,012,256		566,758		133,570	
VISIOII		498,757		408,412		329,136		263,385		399,300		200,082		53,428	
ss)	\$	797,428	\$	646,862	\$	493,704	\$	395,078	\$	612,956	\$	366,676	\$	80,142	9
come per	\$	0.07	\$	0.06	\$	0.04	\$	0.03	\$	0.05	\$	0.03	\$	0.01	(
age number	Ψ	0.07	Ψ	0.00	Ψ	0.04	Ψ	0.03	Ψ	0.03	Ψ	0.03	Ψ	0.01	4
res ncome per		11,725,034		11,658,035		11,602,176		11,467,015		11,282,726		11,213,887		11,202,712	
age number	\$	0.06	\$	0.05	\$	0.04	\$	0.03	\$	0.05	\$	0.03	\$	0.01	\$
es		12,856,136		12,677,704		12,653,589		12,657,405		12,372,348		12,125,613		12,171,375	

See Notes to the Condensed Consolidated Financial Statements

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## **Liquidity and Capital Resources**

	2007	2006
Net cash provided by operating activities	\$ 8,693,811	\$ 8,528,685
Net cash used in investing activities	\$ (7,434,889)	\$ (2,232,461)
Net cash provided by (used in) financing activities	\$ 489,453	\$ (683,628)

At December 31, 2007, we had cash and cash equivalents of \$17,914,639. Working capital, defined as current assets minus current liabilities, at December 31, 2007 was \$9,720,616 as compared to working capital at December 31, 2006 of \$10,218,505.

Net cash provided by operating activities for fiscal 2007 was \$8,693,811 as compared to net cash provided by operating activities of \$8,528,685 for fiscal 2006. This increase is primarily due to the increase in net income in fiscal 2007 of \$1.3 million, offset by the decrease in our accounts receivable of \$1.2 million from the prior year.

Net cash used in investing activities consists of our investment in capital and leasehold improvements of \$3,927,578 and our acquisition of Theralys for \$3,507,311. We currently anticipate that capital expenditures for fiscal 2008 will be approximately \$3.5 million. These expenditures primarily represent additional upgrades in our networking, data storage and core laboratory capabilities for both the United States and European operations as well as capitalization of software costs.

Net cash provided by financing activities is primarily attributable to a tax benefit related to stock options of \$642,855 and proceeds from stock option exercises of \$301,056 offset by payments on capital leases of \$454,458.

The following table lists our cash contractual obligations as of December 31, 2007:

	Payments Due by Period							
Contractual Obligations	Total	Less Than 1 Year	1-3 Years	3-5 Years	More Than 5 Years			
Capital lease obligations Facility rent operating leases Employment agreements	\$ 97,036 5,145,386 650,833	\$ 97,036 1,643,720 575,000	2,599,310 75,833	902,356				
Total contractual cash obligations	\$ 5,893,255	\$ 2,315,756	\$ 2,675,143	\$ 902,356				

On February 6, 2007, we acquired 100% of the outstanding securities of Theralys, a privately held company headquartered in Lyon, France. The aggregate purchase price was 2,958,285 Euros (\$3,853,462 as determined by an agreed upon exchange rate), of which 2,375,484 Euros (\$3,093,122) was paid in cash and \$760,340 was paid with 93,408 shares of our common stock. We also incurred \$678,000 in acquisition costs.

We have neither paid nor declared dividends on our common stock since our inception and do not plan to pay dividends on our common stock in the foreseeable future.

We have not entered into any off-balance sheet transactions, arrangements or other relationships with unconsolidated entities or other persons.

We anticipate that our existing capital resources together with cash flow from operations will be sufficient to meet our foreseeable cash needs. However, we cannot assure you that our operating results will continue to achieve profitability on an annual basis in the future. The inherent operational risks associated with the following factors may have a material adverse affect on our future liquidity:

our ability to gain new client contracts;

project cancellations;

the variability of the timing of payments on existing client contracts; and

other changes in our operating assets and liabilities

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We may seek to raise additional capital from equity or debt sources in order to take advantage of unanticipated opportunities, such as more rapid expansion, acquisitions of complementary businesses or the development of new services. We cannot assure you that additional financing will be available, if at all, on terms acceptable to us.

Our fiscal year 2008 operating plan contains assumptions regarding revenue and expenses. The achievement of our operating plan depends heavily on the timing of work performed by us on existing projects and our ability to gain and perform work on new projects. Project cancellations or delays in the timing of work performed by us on existing projects or our inability to gain and perform work on new projects could have an adverse impact on our ability to execute our operating plan and maintain adequate cash flow. In the event actual results do not meet the operating plan, our management believes it could execute contingency plans to mitigate these effects. Considering the cash on hand and based on the achievement of the operating plan and management s actions taken to date, management believes it has the ability to continue to generate sufficient cash to satisfy our operating requirements in the normal course of business for at least the next twelve months and the foreseeable future.

## **Recently Issued Accounting Statements**

On January 1, 2007, we adopted Financial Accounting Standards Board Interpretation No. 48 Accounting for Uncertainty in Income Taxes (FIN 48). FIN 48 prescribes recognition threshold that a tax position is required to meet before being recognized in the financial statements. Historically, our tax provision for financial statement purposes and the actual tax returns have been prepared using consistent methodologies. There were no material unrecognized tax benefits as of December 31, 2006. Accordingly, the adoption did not have a material impact on the financial statements. We do not expect the unrecognized tax benefit to change during the next twelve months. Any interest and penalties incurred on settlements of outstanding tax positions would be recorded as a component of tax expense. We file our tax returns as prescribed by the tax laws of the jurisdictions in which we operate. Our federal taxes for years 2005 and 2007 are subject to examination. Our state taxes for years 2000 through 2006 are subject to examination. Our foreign taxes for years 2002 through 2006 are subject to examination.

In September 2006, the FASB issued SFAS No. 157, Fair Value Measurements, (SFAS 157). SFAS 157 defines fair value, establishes a framework for measuring fair value in generally accepted accounting principles, and expands disclosures about fair value measurements. The provisions of this standard apply to other accounting pronouncements that require or permit fair value measurements. SFAS 157, as it relates to financial assets and financial liabilities, becomes effective for Bio-Imaging Technologies, Inc. on January 1, 2008. On February 12, 2008, the FASB issued FSP No. FAS 157-2, Effective Date of FASB Statement No. 157, which delays the effective date of SFAS 157 for all nonfinancial assets and nonfinancial liabilities, except those that are recognized or disclosed at fair value in the financial statements on at least an annual basis, until January 1, 2009 for calendar year-end entities. Upon adoption, the provisions of SFAS 157 are to be applied prospectively with limited exceptions. We have determined that the adoption of SFAS 157, as it relates to financial assets and financial liabilities will not have a material impact on the Consolidated Financial Statements. We are currently evaluating the potential impact of SFAS 157, as it relates nonfinancial liabilities, on the Consolidated Financial Statements.

In February 2007, the Financial Accounting Standards Board (FASB) issued Statement of Financial Accounting Standards (SFAS) No. 159, Fair Value Option for Financial Assets and Financial Liabilities, (SFAS 159) which permits companies to use fair value for reporting purposes under GAAP. SFAS 159 is effective for fiscal years beginning after November 15, 2007. We are currently evaluating SFAS 159 and the related impact on our financial position and results of operations.

In December 2007, the Financial Accounting Standards Board (FASB) issued Statement of Financial Accounting Standards (SFAS) No. 141R, Business Combinations (Revised 2007), (SFAS 141R) which addresses ways to improve

the relevance, representational faithfulness, and comparability of the information that a reporting entity provides in its financial reports about a business combination. This statement applies prospectively to business combinations for which the acquisition date is on or after fiscal years beginning December 15, 2008. Retrospective application is not permitted. The Company is currently evaluating SFAS 141R and the related impact on our financial position and results of operations.

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#### **Existing Contracts**

As of December 31, 2007, we had entered into agreements with 71 companies, encompassing 167 projects, to provide services in the aggregate amount of \$153.5 million through October 2012, of which services valued at \$92.5 million remain to be completed. Such contracts are subject to termination by us or our clients at any time or for any reason. In addition, clients—clinical trials or other projects are subject to timing and scope changes. Therefore, total service revenue generated by us during the life of these contracts may be less than initial contract values.

#### Item 7a. Quantitative and Qualitative Disclosures About Market Risk.

#### Interest Rate Risk

We invest in high-quality financial instruments, comprised of savings accounts, certificate of deposits and money market funds. Due to the short-term nature of our investments, we do not believe that we have any material exposure to interest rate risk arising from our investments.

#### Foreign Currency Risk

In accordance with our current foreign exchange rate risk management policy, since inception, we have purchased twenty monthly Euro call options. Nineteen monthly call options were in the amount of 250,000 Euros each, and one call option was for 200,000 Euros for anticipated additional costs in May, 2006. The first expiration was on July 27, 2005, and the last expiration was in March 2007 with a strike price ranging from \$1.26 to \$1.27. These options were intended to hedge against the exposure to variability in our cash flows resulting from the Euro denominated costs for our Netherlands subsidiary. We paid a total premium of \$132,109 for the options.

During the twelve months ended December 31, 2007, we exercised the remaining two options and a gain of \$10,398 was recognized in the Consolidated Statement of Income on the exercised options. During the twelve months ended December 31, 2006, we exercised seven options and a loss of \$10,784 was recognized in the Consolidated Statement of Income.

Under our current foreign exchange rate risk management policy, and upon expiration or ineffectiveness of the derivative, we will record a gain or loss from the derivative that is deferred in stockholders—equity to cost of revenues and general and administrative expenses in the Consolidated Statement of Income based on the nature of the underlying cash flow hedged.

During the year ended December 31, 2007, we have not purchased any additional such Euro call options, because our foreign currency needs are generally being met by the cash flow generated by Euro denominated contracts. As of December 31, 2007, there are no outstanding derivative positions.

See Management s Discussion and Analysis of Financial Condition and Results of Operations Foreign Currency Risks for a more detailed discussion of our foreign currency risks and exposures.

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# Item 8. Financial Statements and Supplementary Data.

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Consolidated Statements of Income for the year ended December 31, 2007, 2006 and 2005	32
Consolidated Statements of Stockholders Equity for the year ended December 31, 2007, 2006 and 2005	33
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## Report of Independent Registered Public Accounting Firm

To the Board of Directors And Stockholders of Bio-Imaging Technologies, Inc.:

In our opinion, the accompanying consolidated balance sheets and the related consolidated statements of income, comprehensive income, shareholders equity and cash flows, present fairly, in all material respects, the financial position of Bio-Imaging Technologies, Inc. and its subsidiaries at December 31, 2007 and 2006, and the results of their operations and their cash flows for each of the three years in the period ended December 31, 2007 in conformity with accounting principles generally accepted in the United States of America. These financial statements are the responsibility of the Company s management. Our responsibility is to express an opinion on these financial statements based on our audits. We conducted our audits of these statements in accordance with the standards of the Public Company Accounting Oversight Board (United States). Those standards require that we plan and perform the audit to obtain reasonable assurance about whether the financial statements are free of material misstatement. An audit includes examining, on a test basis, evidence supporting the amounts and disclosures in the financial statements, assessing the accounting principles used and significant estimates made by management, and evaluating the overall financial statement presentation. We believe that our audits provide a reasonable basis for our opinion.

As discussed in Note 7 to the consolidated financial statements, the Company changed the manner in which it accounts for share-based compensation in 2006.

/s/ PricewaterhouseCoopers LLP

Philadelphia, PA March 5, 2008

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# BIO-IMAGING TECHNOLOGIES, INC. AND SUBSIDIARIES

## CONSOLIDATED BALANCE SHEETS

	Dece	mber 31,
	2007	2006
ASSETS		
Current assets:		
Cash and cash equivalents	\$ 17,914,639	\$ 16,166,264
Accounts receivable, net of allowance for doubtful accounts of \$28,996 and		
\$14,000, respectively	5,881,089	5,564,748
Prepaid expenses and other current assets	1,234,948	1,237,405
Deferred income taxes	2,930,466	2,210,800
Total current assets	27,961,142	25,179,217
Property and equipment, net	7,980,072	5,908,281
Intangibles, net	449,599	353,732
Goodwill	6,025,052	1,873,706
Deferred income taxes		272,954
Other assets	641,416	519,821
Total Assets	\$ 43,057,281	\$ 34,107,711
LIABILITIES AND STOCKHOLDERS	EOUITY	
Current liabilities:		
Accounts payable	\$ 1,864,046	\$ 1,720,481
Accrued expenses and other current liabilities	4,615,973	3,334,554
Deferred revenue	11,663,471	9,451,219
Current maturities of capital lease obligations	97,036	454,458
Total current liabilities	18,240,526	14,960,712
Long-term capital lease obligations		97,036
Deferred income tax non-current	691,094	
Other liability	597,070	208,208
Total liabilities	19,528,690	15,265,956
Commitments and Contingencies		
Stockholders equity:		
Preferred stock \$.00025 par value; authorized 3,000,000 shares, 0 issued and	d	
outstanding at December 31, 2007 and 2006		
Common stock \$.00025 par value; authorized 18,000,000 shares, issued and		
outstanding 11,765,483 and 11,309,550 shares at December 31, 2007 and 200	·	• 00=
respectively	2,943	2,827
Additional paid-in capital	25,084,157	22,864,390
Accumulated deficit	(1,709,547)	(4,042,619)

Accumulated other comprehensive income 151,038 17,157

**Stockholders equity** 23,528,591 18,841,755

Total liabilities and stockholders equity \$ 43,057,281 \$ 34,107,711

The accompanying notes are an integral part of these statements.

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# BIO-IMAGING TECHNOLOGIES, INC. AND SUBSIDIARIES CONSOLIDATED STATEMENTS OF INCOME

	For the Year Ended December 31					
		2007		2006		2005
Service revenues	\$	38,196,156	\$	32,114,604	\$	23,733,579
Reimbursement revenues		9,711,128		8,404,189		6,752,062
Total revenues		47,907,284		40,518,793		30,485,641
Cost and expenses:						
Cost of service revenues		21,948,752		19,752,390		18,335,513
Cost of reimbursement revenues		9,711,128		8,404,189		6,752,062
Sales and marketing expenses		6,855,114		5,739,303		4,772,223
General and administrative expenses		6,202,658		5,507,518		4,960,378
Total cost and expenses		44,717,652		39,403,400		34,820,176
Income (loss) from operations		3,189,632		1,115,393		(4,334,535)
Interest income		654,693		559,816		189,609
Interest expense		(11,563)		(56,338)		(106,287)
Income (loss) before income tax		3,832,762		1,618,871		(4,251,213)
Income tax provision (benefit)		1,499,690		614,772		(1,705,841)
Net income (loss)	\$	2,333,072	\$	1,004,099	\$	(2,545,372)
Basic income (loss) per common share	\$	0.20	\$	0.09	\$	(0.23)
Weighted average number of common shares		11,615,571		11,219,283		11,114,483
Diluted income (loss) per common share	\$	0.18	\$	0.08	\$	(0.23)
Weighted average number of dilutive common equivalent shares		12,744,584		12,364,041		11,114,483

The accompanying notes are an integral part of these statements.

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# BIO-IMAGING TECHNOLOGIES, INC. AND SUBSIDIARIES CONSOLIDATED STATEMENTS OF STOCKHOLDERS EQUITY

	Common Shares	Stock Amount	Additional Paid-in Capital	Accumulated Deficit	Other Comprehensive Gain (Loss)	Stockholders Equity
Balance at December 31, 2004 Stock options	11,027,320	\$ 2,757	\$ 22,016,231	\$ (2,501,346)		\$ 19,517,642
exercised Restricted shares	110,417	28	93,265			93,293
issued Stock based	30,000	7	42,245			42,252
compensation Tax benefit on			70,587			70,587
exercise of stock options Net unrealized loss			80,000			80,000
on derivative instruments Net loss				(2,545,372)	(61,578)	(61,578) (2,545,372)
Balance at December 31, 2005 Stock options	11,167,737	\$ 2,792	\$ 22,302,328	\$ (5,046,718)	\$ (61,578)	\$ 17,196,824
exercised Restricted shares	126,963	32	153,254			153,286
issued	14,850	3	(5,132)			(5,129)
Stock based compensation Tax benefit on			362,510			362,510
exercise of stock options Net unrealized gain			51,430			51,430
on derivative instruments Net income				1,004,099	78,735	78,735 1,004,099
Balance at December 31, 2006 Stock options	11,309,550	\$ 2,827	\$ 22,864,390	\$ (4,042,619)	\$ 17,157	\$ 18,841,755
exercised Restricted shares	341,675	87	300,969			301,056
issued	14,850 99,408	4 25	(4) 801,836			801,861

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Stock issued for						
acquisitions						
Stock based						
compensation			474,111			474,111
Tax benefit on						
exercise of stock						
options			642,855			642,855
Net unrealized loss						
on derivative						
instruments					(17,157)	(17,157)
Equity adjustment						
from foreign						
currency translation					151,038	151,038
Net income				2,333,072		2,333,072
Balance at						
December 31, 2007	11,765,483	\$ 2,943	\$ 25,084,157	\$ (1,709,547)	\$ 151,038	\$ 23,528,591

	For the Year Ended December 31,					
	2007	2006	2005			
Statement of comprehensive income						
Net income (loss)	\$ 2,333,072	\$ 1,004,099	\$ (2,545,372)			
Net unrealized income (loss) on derivative instruments	(17,157)	78,735	(61,578)			
Equity adjustment from foreign currency translation	151,038					
Total comprehensive income (loss)	\$ 2,466,953	\$ 1,082,834	\$ (2,606,950)			

The accompanying notes are an integral part of these statements.

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# BIO-IMAGING TECHNOLOGIES, INC. AND SUBSIDIARIES CONSOLIDATED STATEMENTS OF CASH FLOWS

	For the Year Ended December 31,					
	2007		2006	2005		
Cash flows from operating activities:						
Net income (loss)	\$	2,333,072	\$ 1,004,099	\$ (2,545,372)		
Adjustments to reconcile net income (loss) to net cash				, , , ,		
provided by Operating activities, net of acquisition:						
Depreciation and amortization		2,334,715	2,035,096	2,311,853		
Provision (benefit) for deferred income taxes		286,027	24,203	(1,817,041)		
Sales leaseback deferred gains				16,518		
Bad debt benefit (provision)		14,996	16,132	(10,872)		
Stock based compensation expense		474,111	357,381	71,729		
(Gain) Loss on foreign currency options		(10,398)	81,513	29,100		
Changes in operating assets and liabilities, net of acquisitions:						
(Increase) decrease in accounts receivable	&nb					