SAVING LIVES. **SIMPLIFIED.**

Q4 - 2023

Safe Harbor / Disclaimer

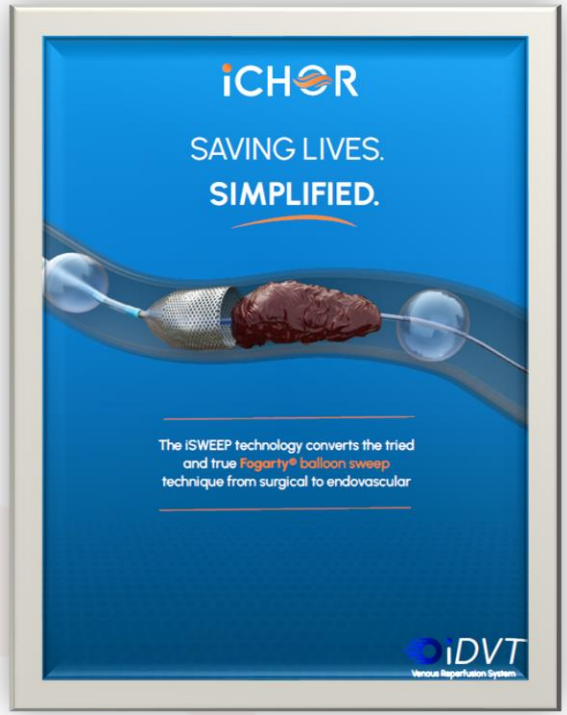
This presentation contains forward-looking statements. These statements involve substantial known and unknown risks, uncertainties and other factors that may cause our actual results, levels of activity, performance or achievements to be materially different from the information expressed or implied by these forward-looking statements. We may not actually achieve the plans, intentions or expectations disclosed in our forward-looking statements, and you should not place undue reliance on our forward-looking statements. Actual results or events could differ materially from the plans, intentions and expectations disclosed in the forward-looking statements we make. The forward-looking statements in this presentation represent our views as of the date of this presentation. We anticipate that the subsequent events and developments will cause our views to change. However, while we may elect to update these forward-looking statements at some point in the future, we have no current intention of doing so except to the extent required by applicable law. You should, therefore, not rely on these forward-looking statements as representing our views as of any date subsequent to the date of this presentation.

This presentation also contains estimates and other statistical data made by independent parties and by us relating to the market size and growth and other data about our industry. This data involves a number of assumptions and limitations, and you are cautioned not to give undue weight to such estimates. In addition, projections, assumptions and estimates of our future performance and the future performance of the markets in which we operate are necessarily subject to a high degree of uncertainty and risk.

iCHOR Vision

Thrombectomy

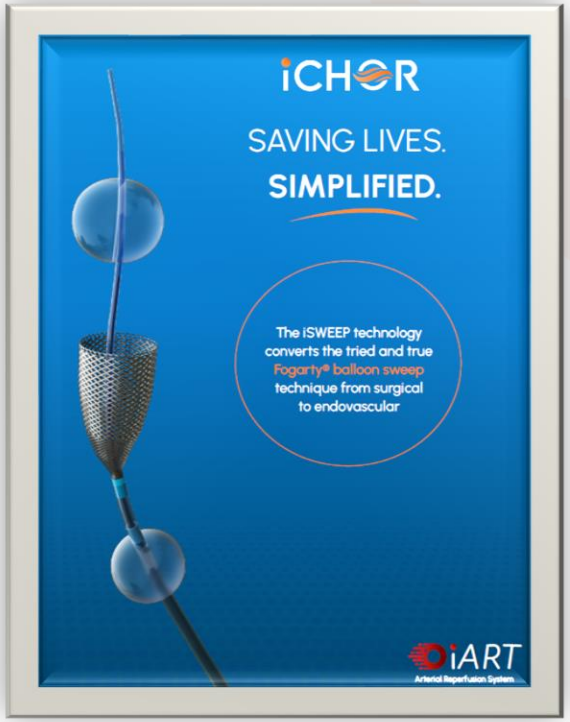
CV Distal Emboli



7F Arterial Clot Removal

To become the "1st line on the table therapy" in treating peripheral vascular occlusions by developing a simplified and versatile solution aimed at rapid reperfusion without the need for surgery or thrombolytic drug therapies.

14F Venous Clot Removal



Post Atherectomy Tibial Debris

Embolectomy

Occluded Bypass Grafts

Experienced Core Leadership + Expert Partnerships

iCHOR Executive Team

Tim Blair
President, CEO
- Device Development Expert
- 30+ years in MedTech Sales Marketing, R&D

Kermit Nash
Legal Counsel
- Saul, Ewing, Arnstein & Lehr Lifescience Expert (MN)

Rich Mazzola
CFO
- MedTech Financial Executive who specializes in startup funding, strategy, and execution (Project MedTech)

Craig Berky
COO
- 30+ years Sr Leader in MedTech Industry
- J&J, US Surgical, and CEO at Interplex Medical (CMO)

Jeff Blair
Chairman
- 50 years in MedTech Industry; CEO with successful exits to large device manufacturers and value creator

Danielle Hobbs
Mar Comm
- 25+ year MedTech Marketing expert, CEO in Thrombectomy (FL)

Partnerships

NAMSA® — Prominent R&D company with strong ties to FDA, assisting with crucial agency interactions

Medical Murray® — Engineering / Manufacturing Partner – V & V efforts + long term manufacturing for future products

Cleveland Clinic — **GCIC –** Global Cardiovascular Innovation Center

projectmedtech — Start up experts and financial services

JD Lymon GROUP — Reimbursement Specialists

Dunlap Codding INTELLECTUAL PROPERTY LAW — Intellectual property strategy

iCHOR Scientific Advisors

Ken Ouriel, MD
Vascular Surgeon
Cleveland Clinic
CEO Syntactx

George Adams, MD
Interventional Cardiologist
Dir of Cardiovascular and Peripheral Vascular Research - UNC

Troy Long, MD
Practicing Vascular IR;
SSM - Oklahoma City, OK
MCVI Fellowship (Katzen, Benenati)

Michael Cohn, MD
Interventional Radiologist
Chief of IR; Memorial Health (FL)
Fellowship – Penn & CHoP

Bernardino Rocha, MD
Practicing Vascular Surgeon
SSM – Oklahoma City
Baylor Vascular Fellowship (TX)

Patrick Muck, MD
Vascular Surgeon
Good Samaritan Hospital
Cincinnati, OH

**** Jose Almeida, MD**
Vascular Surgeon
Miami Vein Center OBL (FL)

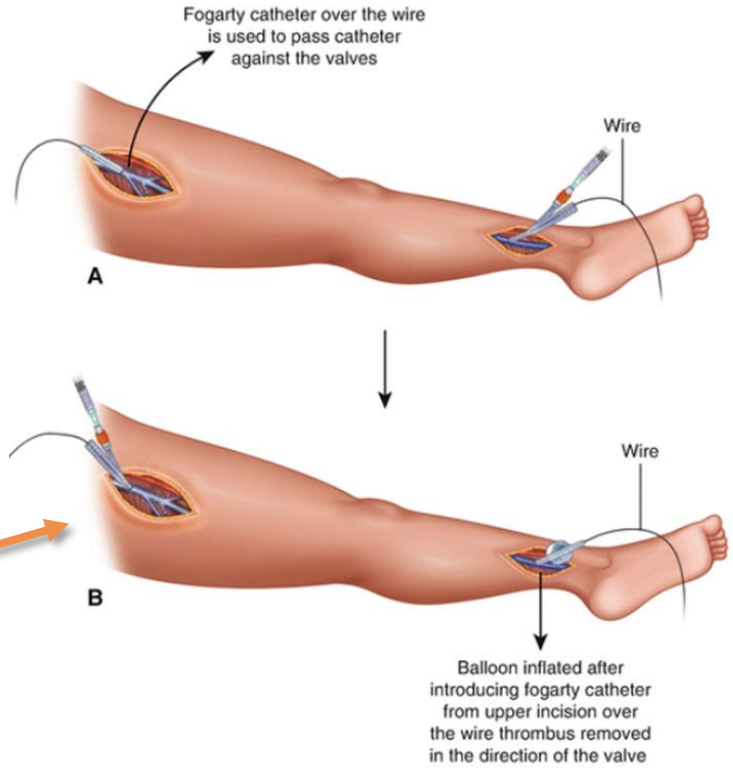
**** Sashi Kilaru, MD**
Practicing Vascular Surgeon
Christ Hospital – Cincinnati OH
Cornell Fellowship (Dan Clair)

**** Robert Beasley, MD**
Practicing Vascular IR
Mt Sinai Medical Ctr
Palm Vascular OBL (FL)

**** Awais Siddique, MD**
Interventional Radiologist
Vascular and Wound Centers OBL (WI)

** Pending Board Updates

Peripheral Problem (LE)



Peripheral Vascular Occlusions are less studied or understood relative to Stroke or Coronary disease. Yet **arterial and venous disease of the lower limbs is a larger, faster growing market with significant mortality rates.** Tools and techniques have not improved outcomes in ~50 years yet costs are skyrocketing. Current options lack flexibility and broad utility!

- Surgery (Surgical cut down, blood loss, general anesthesia)
- Drug Therapy **Intra-arterial rtPA; thrombolysis**
  (Lytic drugs to dissolve or breakdown clot for 28-72 hours in ICU)
- **Borrowed Technologies; Electromechanical, Aspiration**
  (No improvements over current options and expensive)

WE NEED CATHETER DIRECTED TOOLS THAT OFFER BROAD UTILITY!
WE NEED ON THE TABLE SOLUTIONS THAT REDUCE OR ELIMINATE LYTICS AND SURGERY

iCHOR Vascular, Inc.

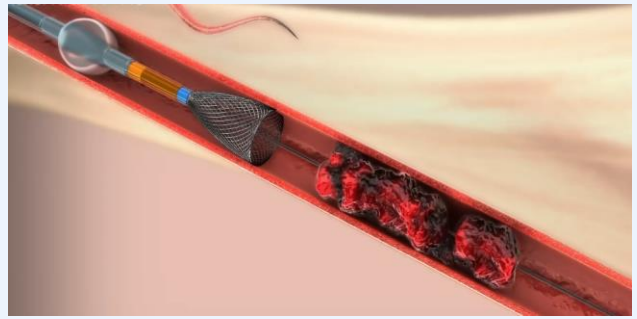
The iSWEEP Simplified Approach 1,2,3

The iCHOR system replicates successful parameters of surgical clot removal with a proven mechanism of action (balloon sweep) combined with on-demand embolic protection.

- Non-drug therapy
- Non-surgical therapy
- Designed to fit all anatomical vessels (large, small, bean, oval, flat)
- Arresting flow avoids blood loss & distal embolization
- Designed to ALWAYS maintain sheath and wire access
- Avoids scarring or valve damage
- Does not require capital equipment

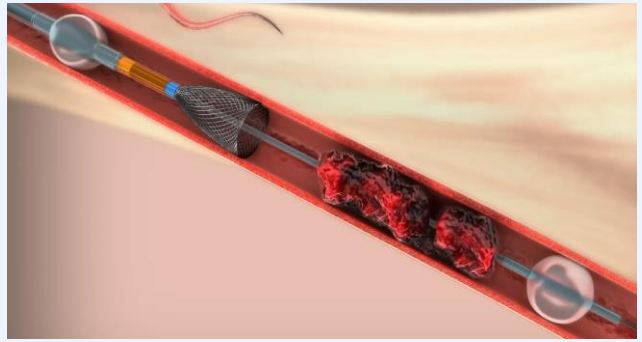
STEP 1: EMBOLIC PROTECTION

The control sheath and the guide catheter are inserted and deployed proximal to the clot



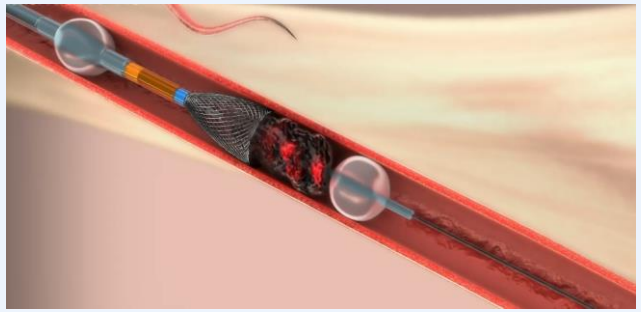
STEP 2: CROSS CLOT

The rapid-exchange balloon catheter is inserted and advanced distal to the clot



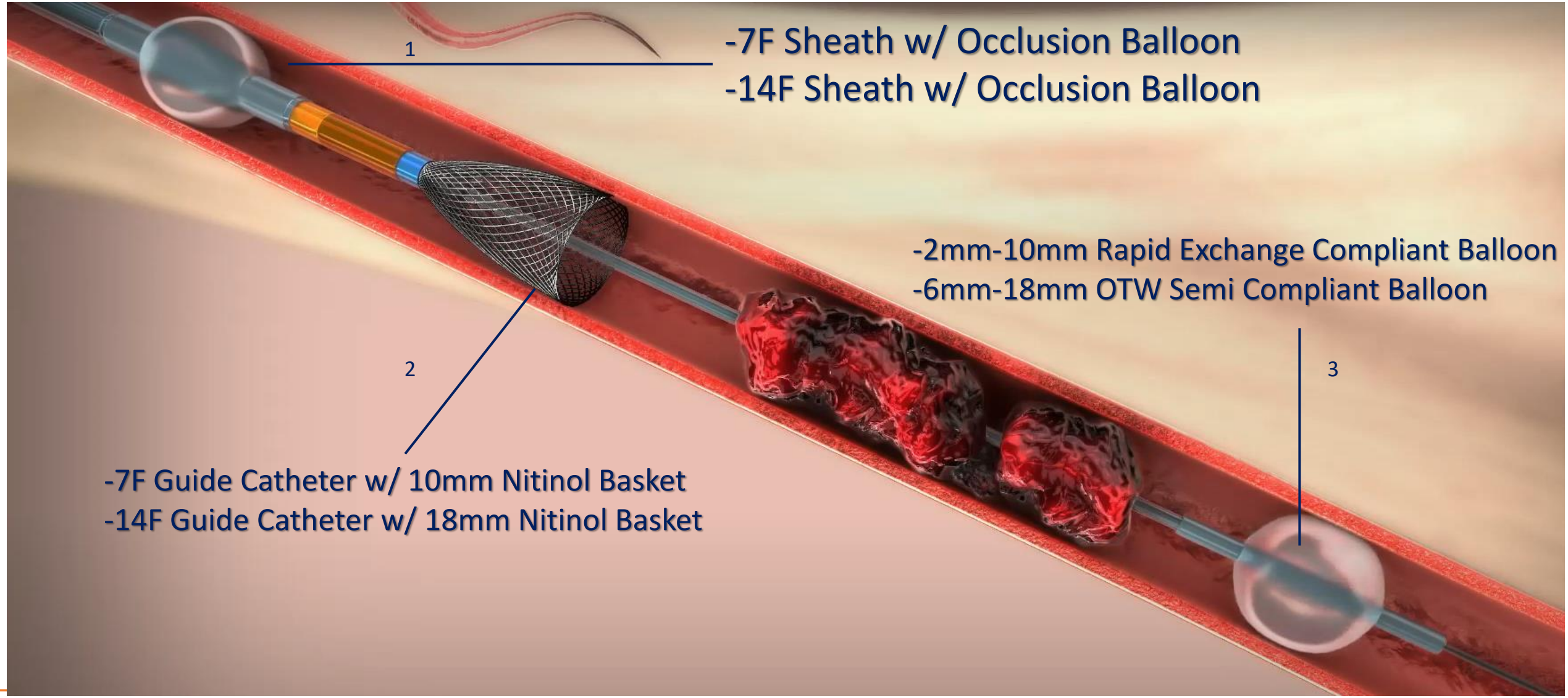
STEP 3: SWEEP & ASPIRATE

Compliant balloon catheter is deployed and retracted while aspirating, sweeping the clot into the funneled guide catheter for removal

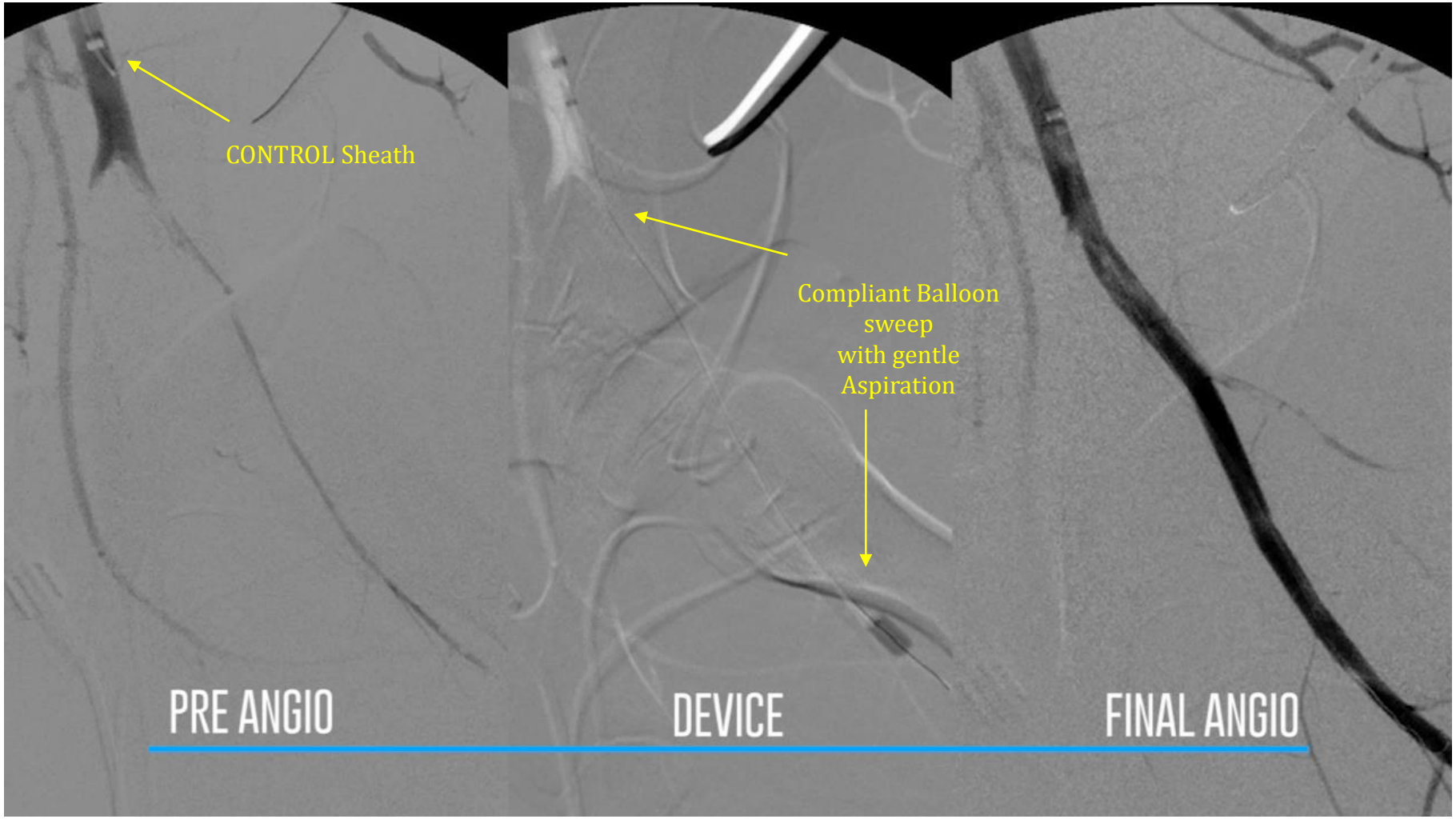


iCHOR Vascular, Inc.

iCHOR 7F and 14F Vascular Systems 1,2,3



iSWEEP Arterial Occlusion Procedure

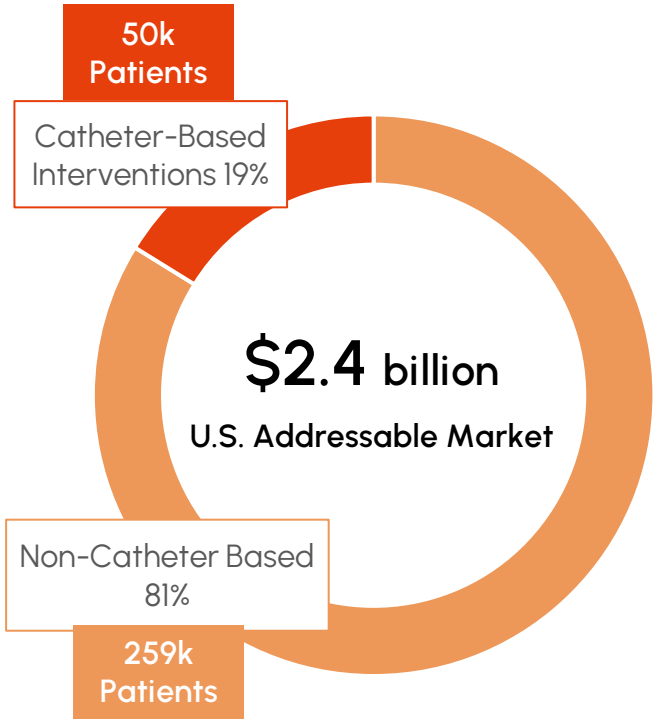


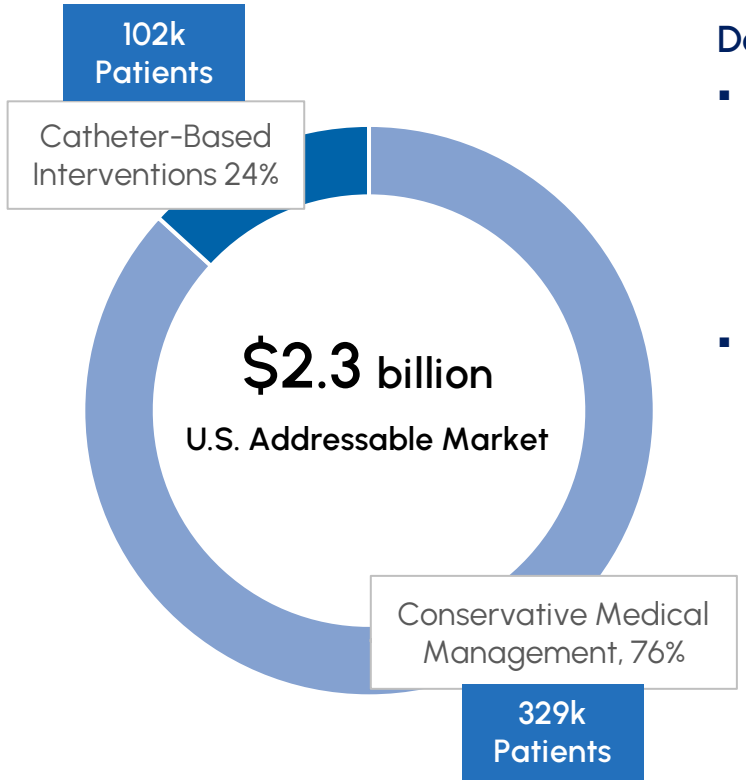
Massive $5B US Market Driven Economics

The use of mechanical thrombectomy continues to increase each year, growing at 6-7% CAGR and trending to become the standard of care. The current addressable market for peripheral vascular occlusions is approximately **$5 billion in the U.S.** and $20 billion OUS, presenting a tremendous opportunity for iCHOR.

Peripheral Arterial Disease

- Approximately 70k ALI limbs
- 50k+ fem-pop bypass failures
- 50k+ pre-CLI organized clot
- Occluded SFA stents
- Under-reported emboli from peripheral interventions





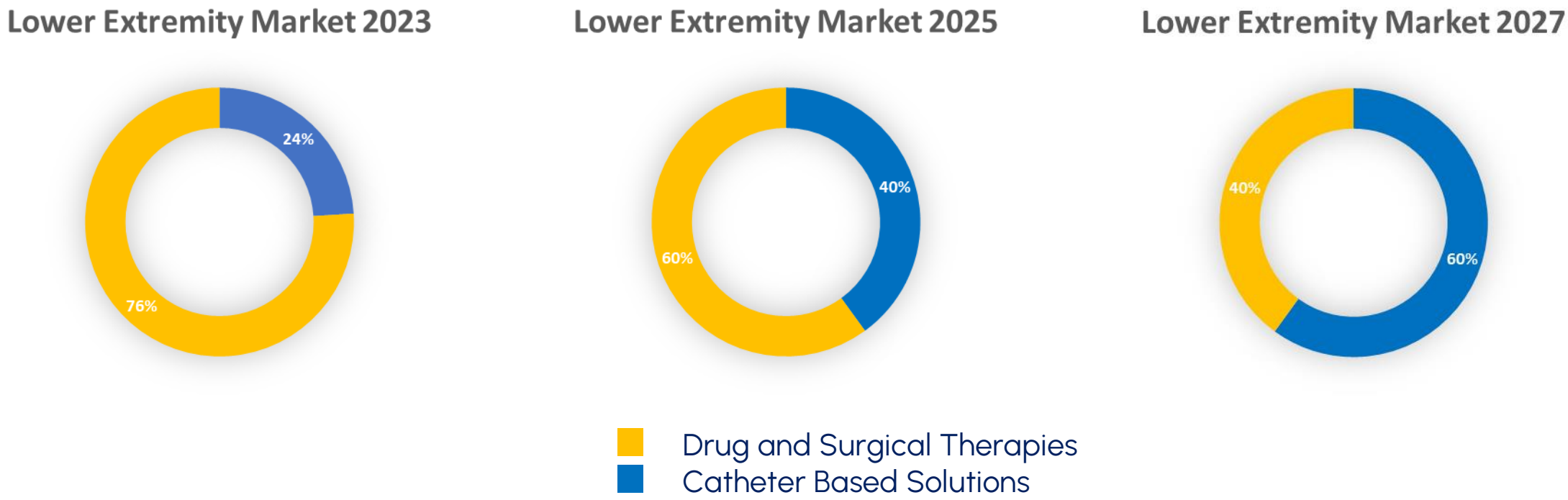
Deep Vein Thrombosis

- U.S. venous thromboembolism (VTE) market is experiencing significant growth due to mechanical thrombectomy increasing adoption
- PE indication adds another $3.5 billion to the addressable US market

Market Drivers: Physicians make money doing procedures, Hospitals make money doing procedures, Hospitals win by eliminating ICU time

Catheter Based Solutions – Trends and Drivers

Market Trends: Aging Population; Increased Disease Prevalence; Increased use of Oncology Drugs and Opiates, and Disease Awareness are all contributing to a $5B US existing market trending towards faster, lower cost treatment options.



Market Drivers: Physicians make money doing procedures, Hospitals make money doing procedures, Hospitals win by eliminating ICU time

Potential Strategic Acquirers

Companies currently in the Cardiovascular / Peripheral Vascular sector who are looking for product lines that drive revenue and complement their portfolios and call points.

Value Proposition

Devices that will 100% compete with market leaders (Simplicity)
- Proven mechanisms of action (50+ years)
- Versatile & economical

In a white-hot market with major players anxious to compete now
- Top players all above $5B market caps ($20B global market)

FDA-cleared device with demonstrated & published real-world efficacy data in a 25-patient test market and growing (7F and 14F)

1st technology to convert the standard of care Fogarty surgical technique to an endovascular procedure

Excellent "fit" with many Strategic buyers
- Sales and Marketing synergies with many Strategic buyers
- Manufacturing "fit" with Strategic buyers – vertical integration because it was designed for manufacturing

Strong pipeline with potential for several future indications

Best in class team, advisors, and partners (therapeutic experts in R&D, sales, marketing, and manufacturing)

Simplicity is the Solution

Current Clot Removal Technologies	iCHOR iSWEEP Technology
Complex systems with a steep learning curve that require capital equipment and proctoring for every case	Self-contained, **simple**, straightforward system with no capital equipment and a short learning curve
Traumatic nitinol baskets used to drag clot that can damage vessels, valves, and lead to serious blood loss	Compliant, atraumatic Fogarty balloon with **simple** sweep mechanism of action to safely remove clot
Require use of ancillary parts or expensive lytic agents that necessitate extended ICU stays and high costs to the hospital	**Simplistic** design is all-inclusive, does not require any additional components or expensive drugs

Technology Overview

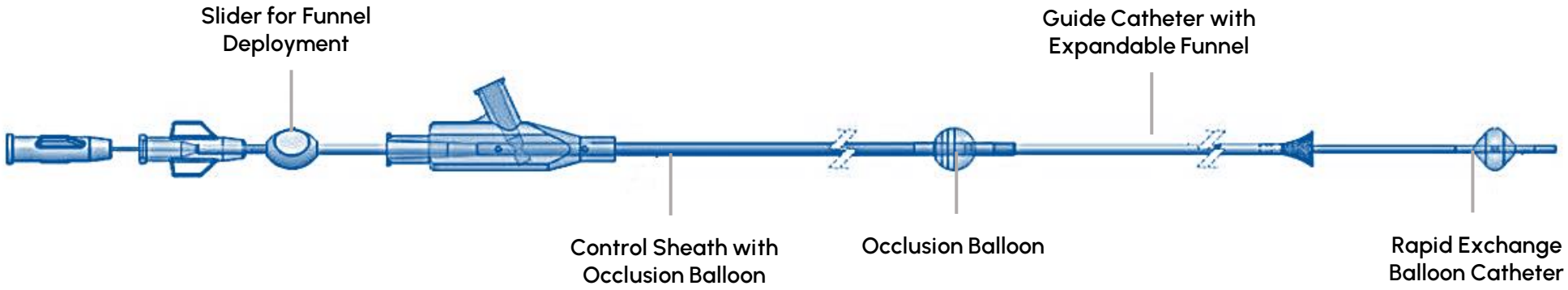
Indications for Use

The iCHOR iSWEEP system is indicated for the non-surgical removal of emboli and thrombi from blood vessels. The device is intended for the peripheral vasculature and is not intended for use in the coronary or neurovasculature.

iSWEEP Specs

The iCHOR iSWEEP system includes 2 different catheters:

- iART 7F for arterial procedures
- iDVT 14F for venous procedures
- The mechanism of action is the same for each catheter, simplifying the procedures for physicians.



Market Trends

Emerging Technologies. Overall, the use of catheter-based interventions continues to grow each year, driven by new technologies and desire to avoid surgical embolectomy and expensive ICU stays. Penumbra and Inari are the primary companies driving the market.

Aging Population. The large baby-boomer generation (1946-1964) over the age of 65 currently accounts for approximately 56 million people and 16.8% of the U.S. population. As more boomers turn 65, the Population Reference Bureau estimates this percentage will continue to grow, reaching 95 million people and 23% of the population by 2060.

Chronic Disease. According to the World Health Organization, chronic diseases are the leading causes of death and disability. This rise is credited to sedentary lifestyles, poor diet, smoking, and alcohol. Diseases such as obesity and diabetes are driving growth of the thrombectomy market.

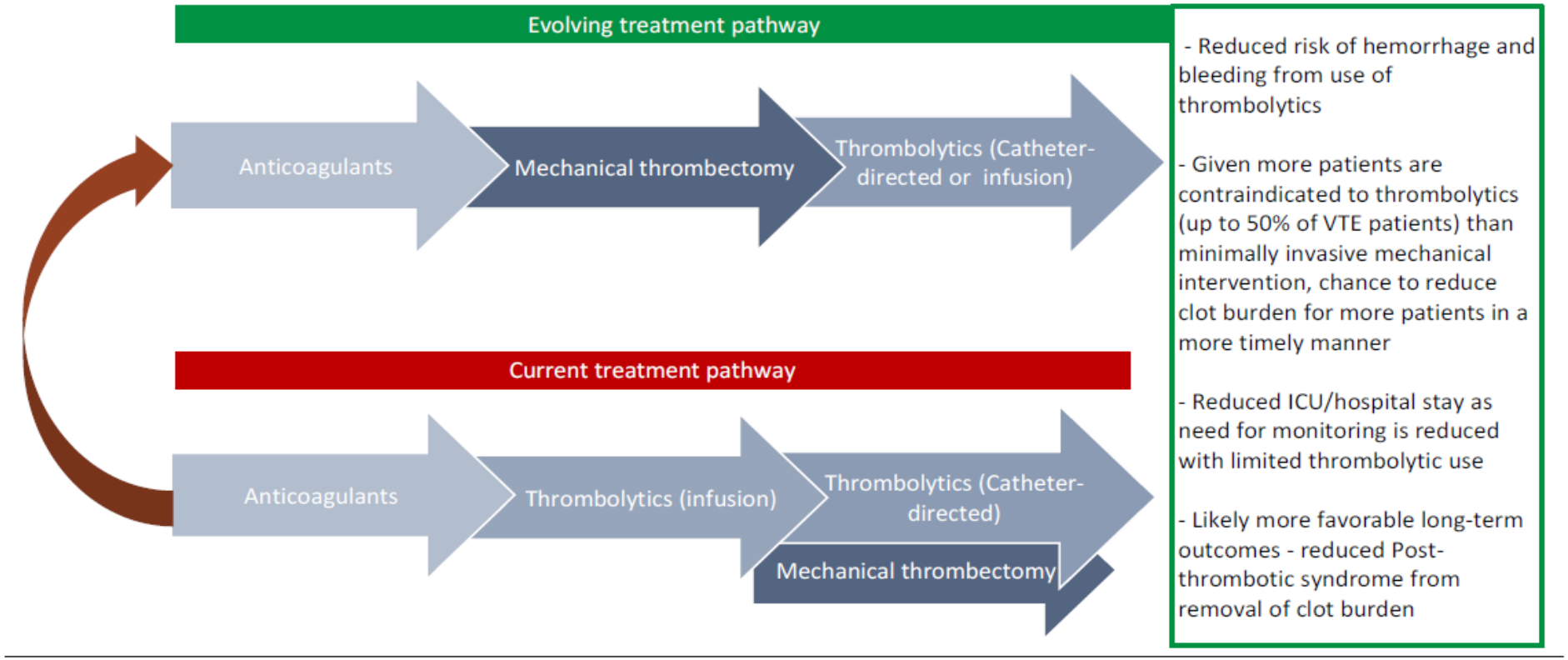
Shift to Mechanical. With several new technologies entering the market, there continues to be increased use of mechanical options. In addition, there is a strong desire to reduce the need for open surgery and the use of lytics by the physician societies (Vascular Societies and Interventional Societies).

Drug-Related PV Issues. There has been a marked increase in peripheral vascular occlusions driven by drugs and medications such as oncology drugs, opiates, and viral medications. Patients are living longer, but often with the use of medications that promote clotting issues.

Evolving Standard of Care

Standardization of care for VTE is improving within our health system, and should drive the use of mechanical thrombectomy

Exhibit 10: Standardized treatment plans should advocate use of mechanical thrombectomy over or prior to use of thrombolytic therapy whenever possible



Source: Berenberg Capital Markets, Company reports

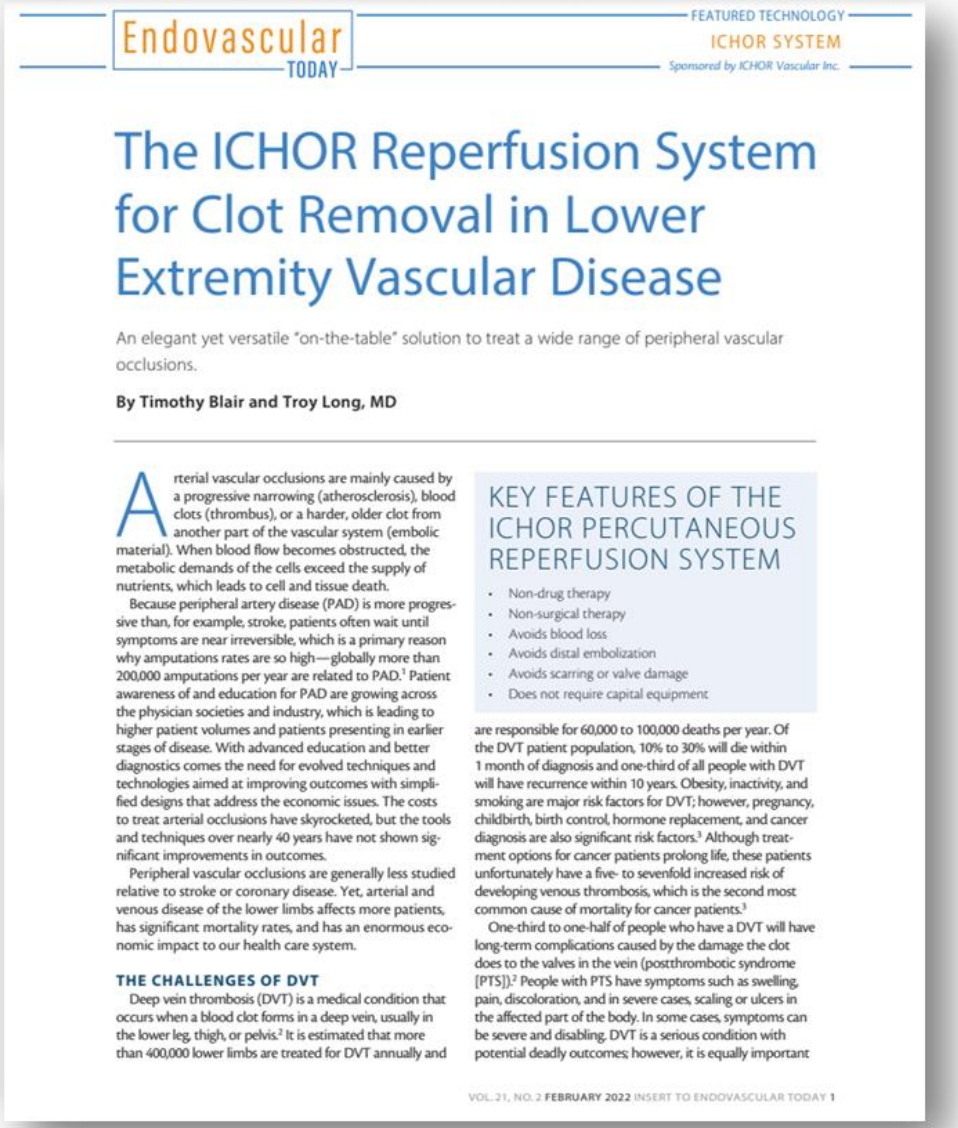
✓ Published Cases / Real-World Patient Market Data

- 7F iSWEEP - 25 patients Published in Endovascular Today
- 100% clinical success in a variety of clot morphology
  - Arterial SFA
  - Acute Limb Ischemia
  - Occluded Bypass Grafts
  - Arterial ATK
  - Arterial BTK
  - Occluded Dialysis Grafts
- 7F Gen 2 device available Q1 2024

★ 14F iSWEEP Market Clearance Sept 2023

- 100% clinical success in Oct 2023
  - Acute DVT issues
  - Adherent clot

- Ongoing Market Validation and Real-World Data
  - Clinical Endpoints
  - Technical & Manufacturing Validation
  - Reimbursement
  - Market Validation (ASPs, Margins, VAC Sales)



Endovascular TODAY

FEATURED TECHNOLOGY
ICHOR SYSTEM
Sponsored by ICHOR Vascular Inc.

The ICHOR Reperfusion System for Clot Removal in Lower Extremity Vascular Disease

An elegant yet versatile "on-the-table" solution to treat a wide range of peripheral vascular occlusions.

By Timothy Blair and Troy Long, MD

Arterial vascular occlusions are mainly caused by a progressive narrowing (atherosclerosis), blood clots (thrombus), or a harder, older clot from another part of the vascular system (embolic material). When blood flow becomes obstructed, the metabolic demands of the cells exceed the supply of nutrients, which leads to cell and tissue death.

Because peripheral artery disease (PAD) is more progressive than, for example, stroke, patients often wait until symptoms are near irreversible, which is a primary reason why amputations rates are so high—globally more than 200,000 amputations per year are related to PAD.[1] Patient awareness of and education for PAD are growing across the physician societies and industry, which is leading to higher patient volumes and patients presenting in earlier stages of disease. With advanced education and better diagnostics comes the need for evolved techniques and technologies aimed at improving outcomes with simplified designs that address the economic issues. The costs to treat arterial occlusions have skyrocketed, but the tools and techniques over nearly 40 years have not shown significant improvements in outcomes.

Peripheral vascular occlusions are generally less studied relative to stroke or coronary disease. Yet, arterial and venous disease of the lower limbs affects more patients, has significant mortality rates, and has an enormous economic impact to our health care system.

THE CHALLENGES OF DVT

Deep vein thrombosis (DVT) is a medical condition that occurs when a blood clot forms in a deep vein, usually in the lower leg, thigh, or pelvis.[2] It is estimated that more than 400,000 lower limbs are treated for DVT annually and

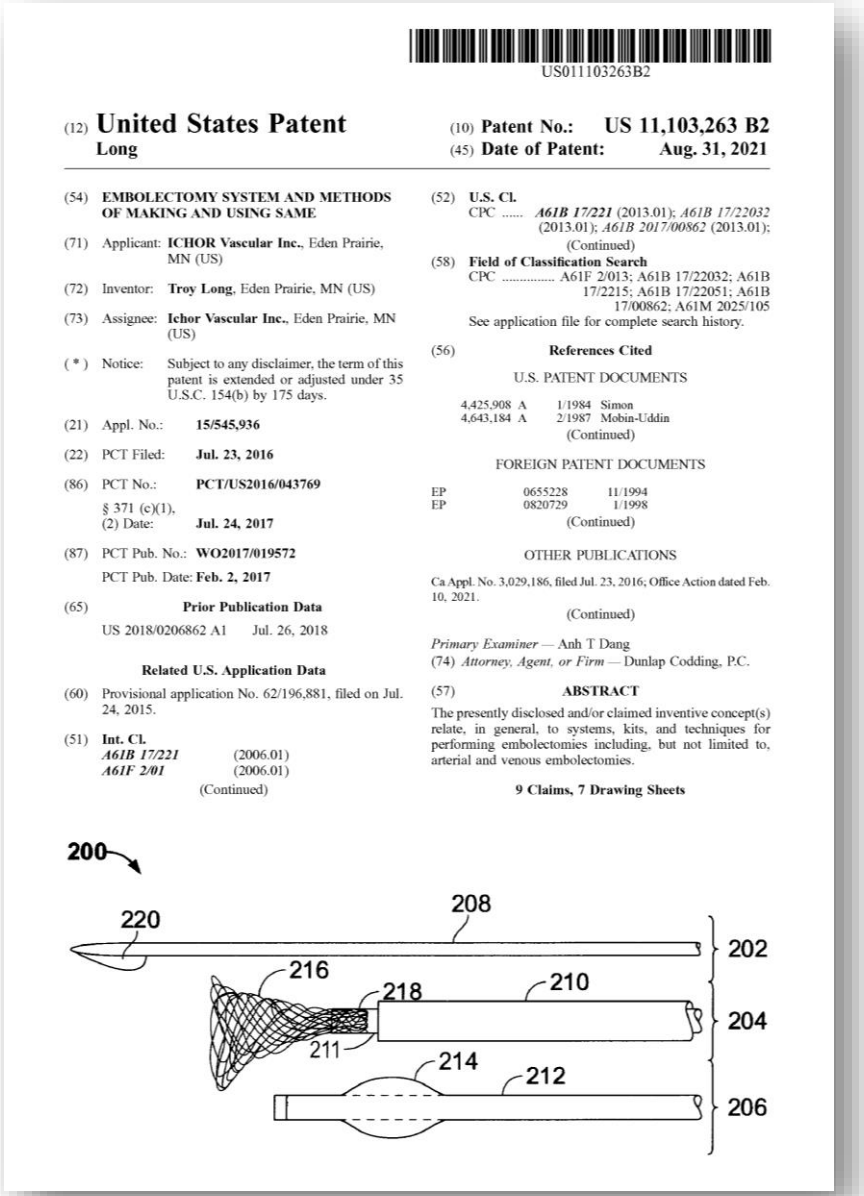
KEY FEATURES OF THE ICHOR PERCUTANEOUS REPERFUSION SYSTEM

- Non-drug therapy
- Non-surgical therapy
- Avoids blood loss
- Avoids distal embolization
- Avoids scarring or valve damage
- Does not require capital equipment

are responsible for 60,000 to 100,000 deaths per year. Of the DVT patient population, 10% to 30% will die within 1 month of diagnosis and one-third of all people with DVT will have recurrence within 10 years. Obesity, inactivity, and smoking are major risk factors for DVT; however, pregnancy, childbirth, birth control, hormone replacement, and cancer diagnosis are also significant risk factors.[3] Although treatment options for cancer patients prolong life, these patients unfortunately have a five- to sevenfold increased risk of developing venous thrombosis, which is the second most common cause of mortality for cancer patients.[3]

One-third to one-half of people who have a DVT will have long-term complications caused by the damage the clot does to the valves in the vein (postthrombotic syndrome [PTS]).[2] People with PTS have symptoms such as swelling, pain, discoloration, and in severe cases, scaling or ulcers in the affected part of the body. In some cases, symptoms can be severe and disabling. DVT is a serious condition with potential deadly outcomes; however, it is equally important

✓ Strong Intellectual Property



US011103263B2

(12) **United States Patent**
Long

(10) **Patent No.: US 11,103,263 B2**
(45) **Date of Patent: Aug. 31, 2021**

(54) **EMBOLECTOMY SYSTEM AND METHODS OF MAKING AND USING SAME**

(71) Applicant: **ICHOR Vascular Inc.**, Eden Prairie, MN (US)

(72) Inventor: **Troy Long**, Eden Prairie, MN (US)

(73) Assignee: **Ichor Vascular Inc.**, Eden Prairie, MN (US)

(*) Notice: Subject to any disclaimer, the term of this patent is extended or adjusted under 35 U.S.C. 154(b) by 175 days.

(21) Appl. No.: **15/545,936**

(22) PCT Filed: **Jul. 23, 2016**

(86) PCT No.: **PCT/US2016/043769**
§ 371 (c)(1),
(2) Date: **Jul. 24, 2017**

(87) PCT Pub. No.: **WO2017/019572**
PCT Pub. Date: **Feb. 2, 2017**

(65) **Prior Publication Data**

US 2018/0206862 A1 Jul. 26, 2018

Related U.S. Application Data

(60) Provisional application No. 62/196,881, filed on Jul. 24, 2015.

(51) **Int. Cl.**
A61B 17/221 (2006.01)
A61F 2/01 (2006.01)
(Continued)

(52) **U.S. Cl.**
CPC ***A61B 17/221*** (2013.01); *A61B 17/22032* (2013.01); *A61B 2017/00862* (2013.01);
(Continued)

(58) **Field of Classification Search**
CPC A61F 2/013; A61B 17/22032; A61B 17/2215; A61B 17/22051; A61B 17/00862; A61M 2025/105
See application file for complete search history.

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(Continued)

Primary Examiner — Anh T Dang
(74) *Attorney, Agent, or Firm* — Dunlap Codding, P.C.

(57) **ABSTRACT**

The presently disclosed and/or claimed inventive concept(s) relate, in general, to systems, kits, and techniques for performing embolectomies including, but not limited to, arterial and venous embolectomies.

9 Claims, 7 Drawing Sheets

- Priority date: July 24, 2015
- Issued in U.S.: August 31, 2021
- Issued in EU and Canada
- Directly relevant to the actual devices
- Plans to bolster IP with product line extensions and new indications

Physician Feedback Validates Need for iSWEEP

"iCHOR seeks to **bring the vascular occlusions TO the catheter with a tried-and-true balloon technique** we are all familiar with. All other technologies are catheters trying to find the occlusion " Dr. Michael Cohn; Memorial Regional Health System – Hollywood FL

"iCHOR is a much-needed technology for treating peripheral arterial disease (PAD) in the lower limbs. Current technologies do not deliver the desired therapeutic results and I believe the iCHOR technology can deliver conclusive therapy with a design that is **both elegant and intuitive.** Lack of reasonable therapies will make iCHOR **a go-to device.** Dr. J A Mustapha, *FACC, FSCAI, Entrepreneur*

"The device exceeded my expectations in terms of **bulk retrieval of organized thrombus**, the ease of maneuvering the entire low-profile system using rapid exchange technique, and the durability of the device in treating large clot burden. **The iCHOR device is a game changer for Interventionalists**. Percutaneous embolectomy/thrombectomy will allow me to treat and keep more patients in my practice." Vascular Interventional Radiologist; Tampa FL

✓ High Margin Product Lines; Big Market Potential

- >$4.7B available treatable market for current ICHOR Arterial and Venous technologies. The Versatility and Health Economics will drive ICHOR technologies as “go-to” therapies.

- A conservative revenue target for the ICHOR technology is **$200MM/year (3% arterial market share) as the market nearly doubled between 2017 – 2020 and predicted to keep growing.**

- Predicate devices sell at or above $2,900 (+ capital + multiple catheters / patient). Financial models for ICHOR assume **ASPs at $4,000**. $6000 List Price…..getting $4000 routinely in the early market release.

- **COGS (~$900)** and improving through new technologies / equipment, as well as cost reductions tied to volume.

- **High margin potential > 85%** including packaging, sterilization, and shipping.

- **$5B and $7B Market Caps** for competitors in our space! Many Strategics anxious to play here.

Compelling Economic Value for all Stakeholders

Investors

Strong potential for large ROI in a strategic acquisition

Acquirers

Competitive ASP of $4,000 with gross margins > 85%

Hospitals

Only 2 SKUs for inventory and does not require additional components or expensive drugs, saving the hospital money

Physicians

Simple technology will help to reduce procedure time, enabling treatment of more patients

Positioned to Take Market Share from Top Competitors

Penumbra

Complex system that relies on suction, requires capital equipment and several catheters for each procedure ($8K to $12K systems)

→ iSWEEP Protect. Sweep. **Restore**.

Self-contained system with simple, straightforward mechanism of action and no capital equipment

INARI MEDICAL®

Complicated system that uses traumatic nitinol baskets to drag clot that can damage vessels, valves. ($7K to $12K systems)

→ iSWEEP Protect. Sweep. **Restore**.

Compliant, atraumatic Fogarty balloon with simple mechanism of action to sweep and safely remove clot

Boston Scientific

Time-consuming setup, requires large capital equipment and lytic agents using traumatic active aspiration for clot removal

→ iSWEEP Protect. Sweep. **Restore**.

Simple design and atraumatic MOA does not require any additional components, capital equipment, or drugs

✓ How Do We Win? Simplicity

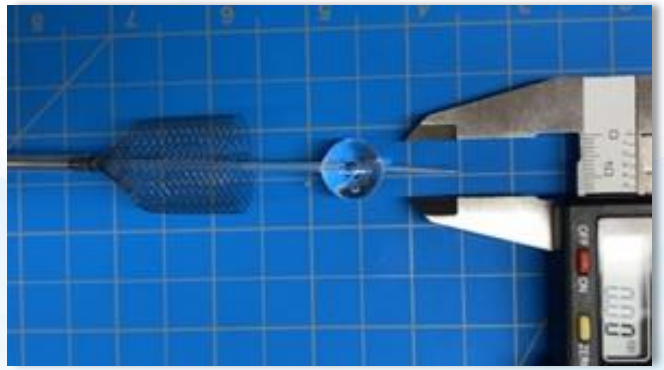
Versatility: We are using tried and true techniques physicians trust with endovascular flexibility to aspirate vessels, sweep vessels, snare debris, yet compatible with stents, balloons, and other products often required during these procedures. Balloon compliance is critical to truly treat venous and arterial anatomy.

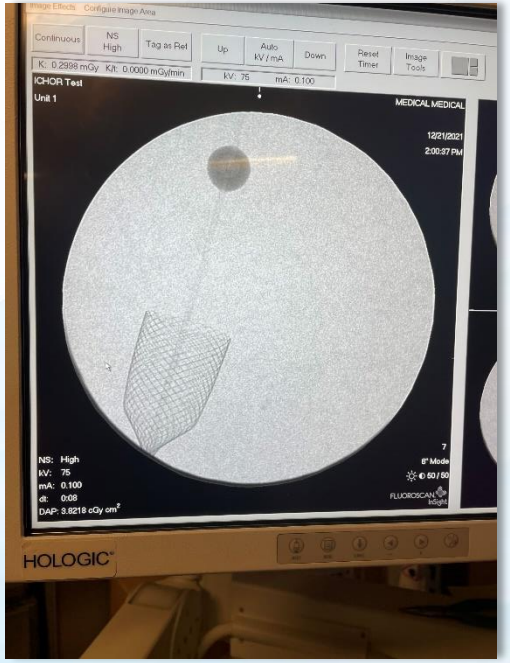
"These are versatile, broad utility devices aimed to be the Swiss Army Knife in the thrombectomy toolbox"

Positioning: To become the "1st line *on the table* therapy" in treating peripheral vascular occlusions … aimed at rapid reperfusion without the need for surgery or thrombolytic drug therapies.

"Let me start with iCHOR to get the embolic material or thrombus out and see what else I need to do. I will know in 45 minutes if I am done, or this patient needs a more aggressive therapy"

✓ How Do We Win Clinically? Simplicity

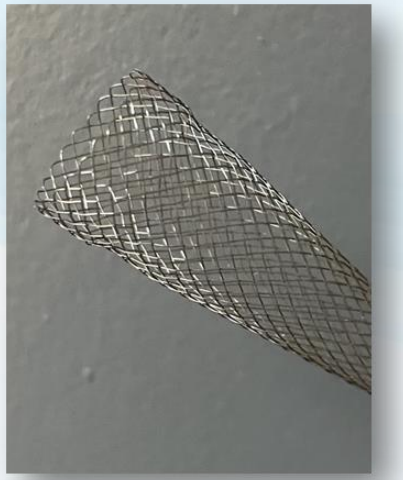




Expect to drive significant value in the next 12-18 months with early real-world data

- Time to Reperfusion
- Distal Embolization
- Proven Mechanism of Action (Compliant System - Histopathology)
- Blood Loss
- Health Economics (ASPs, Reimbursement)

ICHOR can show superiority around key endpoints (many strategics anxious to compete vs Penumbra and Inari + a platform into Pulmonary Embolism and Dialysis)

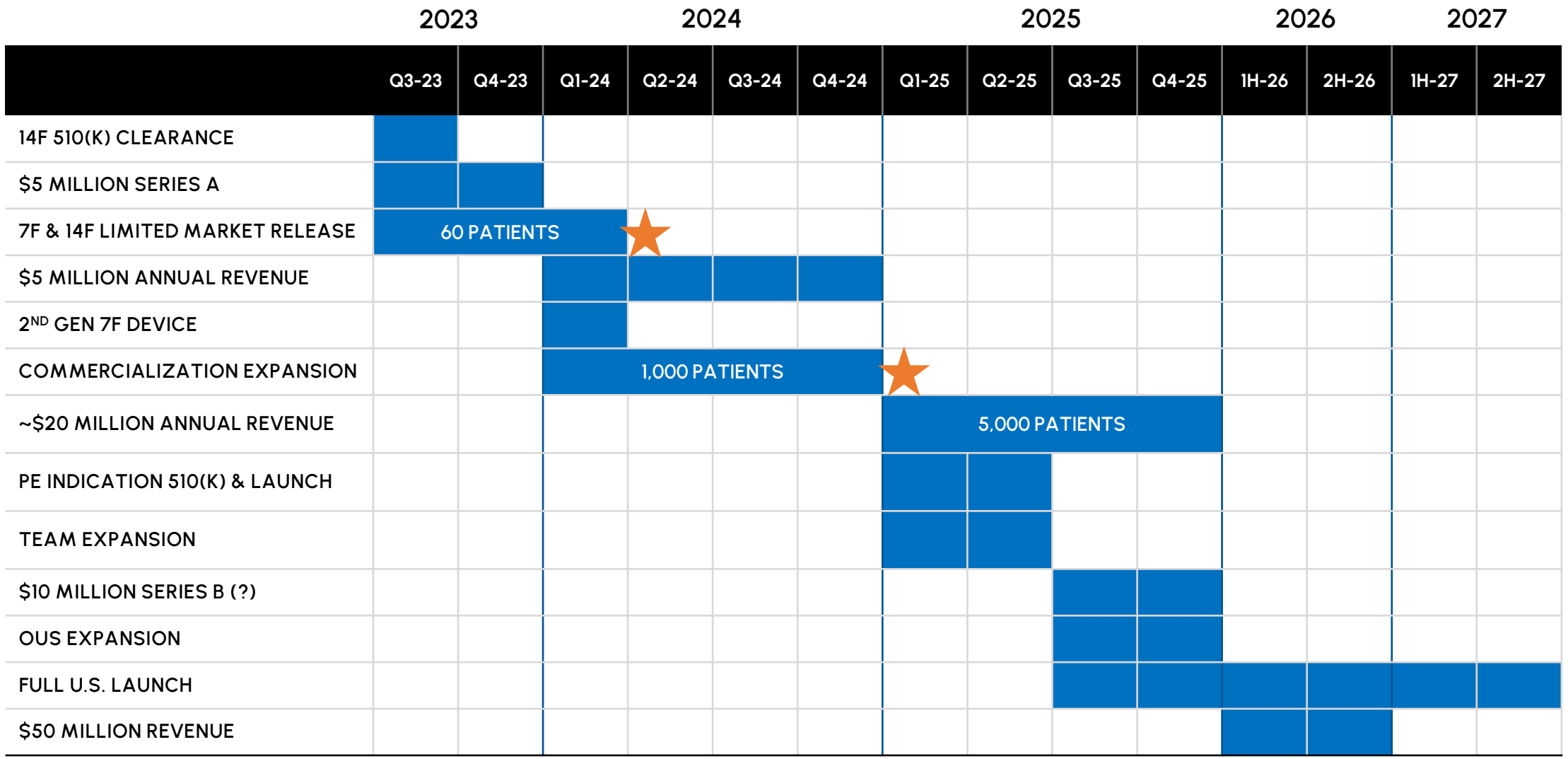


✓ Extensive Pipeline

PRODUCT	CONCEPT	DESIGN	V & V	510(K)	TEST MARKET	LIMITED RELEASE	COMMERCIALIZATION
iART – 7F							
iART – 7F Gen 2							
iDVT– 14F							
iDVT – 14F IJ							
iPE – 18F							
5F – 7F Embolic Protection Sheath							
0.014" Rapid Exchange Balloon							
iART – 7F Dialysis							

iCHOR Vascular, Inc.

Proposed Key Corporate Milestones & Inflection Points



Potential acquisition inflection point

Pathways to Exit

FDA Clearance into Real-World clinical data **(Q3 '23)**

2022

Fundraising to Commercialization

Current $4M

Recent Ask $2M

2023

$200M Valuation

60 # Patients

2024

Series A $5M

1000 # Patients

$5M Annualized Revenue

2025

$300M Valuation

5000 # Patients

Series B (?) $10M

$16M Annualized Revenue

2026

$50M Annualized Revenue

2027-8

$xxxM Annualized Revenue

✓ A Strong Commercial Plan - $4000 ASP

	Projected YE 2023	Projected YE 2024	Projected YE 2025	Projected YE 2026	Projected YE 2027
Product Revenue	96,000	4,416,000	14,880,000	46,512,000	70,848,000
Other Revenue	1,920	88,320	297,600	930,240	1,416,960
	97,920	**4,504,320**	**15,177,600**	**47,442,240**	**72,264,960**
Cost of Goods Sold	28,896	1,329,216	4,478,880	14,000,112	21,325,248
Gross Margin	69,024	3,175,104	10,698,720	33,442,128	50,939,712
GM %	70%	70%	70%	70%	70%
Research and Development	1,173,950	412,100	1,673,900	739,884	722,650
Quality and Regulatory	104,500	350,000	1,524,500	2,224,326	2,975,520
Sales and Marketing	192,580	2,007,300	6,024,500	15,760,224	25,292,736
General and Administrative	767,530	1,169,634	1,555,959	1,440,677	2,206,204
	2,238,560	3,939,034	10,778,859	20,165,111	31,197,109
	(2,169,536)	**(763,930)**	**(80,139)**	**13,277,017**	**19,742,603**
		-17%	-1%	28%	27%
Beginning Cash		4,269,642	5,864,089	4,032,268	6,803,932
Ending Cash	4,269,642	5,864,089	4,032,268	6,803,932	19,134,276

Vascular Surgeon

Interventional Radiologist

Interventional Cardiologist

Recent Comps in the Peripheral Space

Sales of $0 - $20 million lead to acquisitions in the $200 - $300 million range

Date	Target	Strategic Acquirer	Est. Value ($M)
10 / 18 / 2022	MedAlliance	Cordis	$1,200
9 / 20 / 2021	Devoro Medical	Boston Scientific	$387
8 / 15 / 2021	Walk Vascular	Abbott	$310
7 / 6 / 2021	Vetex Medical	SurModics	$44
4 / 28 / 2021	PQ Bypass	Endologix	$300
6 / 28 / 2020	Intact Vascular	Philips	$360
5 / 20 / 2020	Inari	N/A (did IPO)	$156
10 / 7 / 2019	Eximo Medical	AngioDynamics	$66
12 / 18 / 2018	Vascular Insights	Merit Medical	$60
		AVERAGE	**$320**

Investment Summary

iSWEEP
Protect. Sweep. **Restore.**

- 1st technology to convert the standard of care Fogarty surgical technique to a simple endovascular procedure
- Demonstrated & published real-world efficacy data in a 25-patient test market
- US FDA Market Clearance for the 14F venous reperfusion system (Sept 2023)
- $5 billion+ U.S. and $20 billion+ global addressable markets

Recent Funding

$3.0M

- Convertible Note Completed
- $2M+ Cash on Hand
- 510(k) Clearances
- LMR completion
- Initial Commercialization

Seeking

$5.0M

- Commercialization Expansion
- Product Line Extension / New Indications
- Additional Patents
- US Team and EU Expansion
- Positive Balance Sheet

Series A Overview – Led by Queen City Angels

In addition to investment partners, we are seeking industry partnerships and licensing opportunities in parallel.

- $5 million ask
- Valuation: $18 million
- **1X Preference, 8% dividend, 5th year 3x redemption clause**
- Use of Funds:
  - Commercialization (Market Validation)
  - Team Expansion
  - Product Line Extension / New Indications
  - Additional Patents
  - Scale Manufacturing
  - Internalize critical components & fixtures

Noteworthy Investors

- NAMSA (Global MedTech testing firm)
- Cleveland Clinic (GCIC / Innovations)
- OSF (Catholic Health System of IL)
- Gopher Angels (MN)
- NuFund (So. Cal Angel Fund)
- Florida Community Health Network (So. FL)
- Queen City Angels (OH)
- Sand Hill Angels (No. Cal)
- Band Angels (No. Cal)

SAVING LIVES. **SIMPLIFIED.**

Thank You

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