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Investor Presentation
ASX:IPD
July 2017



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There can be no assurance that any existing or future regulatory filings will satisfy the relevant authorities’ requirements regarding SOZO™ nor can there be any assurance that SOZO™ will be approved for all applications by any authorities for sale in any market or that they will reach any particular level of sales. In particular, management’s expectations regarding ImpediMed’s ability to commercialise SOZO™, including its estimates of potential revenues, costs, profitability and financial performance could be affected by, among other things, unexpected trial results, including additional analysis of existing data, and new data; unexpected regulatory actions or delays, or government regulation generally; its ability to maintain patent or other proprietary intellectual property protection; competition in general; government, industry, and general public pricing pressures; and additional factors that involve significant risks and uncertainties about our products, product candidates, financial results and business prospects. Should one or more of these risks or uncertainties materialise, or should underlying assumptions prove incorrect, actual results may vary materially from those described herein as anticipated, believed, estimated or expected.



Strong momentum in US adoption of L-Dex® for lymphoedema

- Connected device for precisely measuring and monitoring tissue composition and fluid status using bioimpedance spectroscopy (BIS) technology for early detection and management of chronic disease (e.g. fluid build up in lymphoedema (L-Dex® score), fluid burden for chronic heart failure patients)

- 100+ Leading US cancer centres on board
- SOZO™ FDA 510(k) for lymphoedema submitted July 2017
- Poised for substantial acceleration of L-Dex® revenues

SOZO™ commercially launched in Australia and Europe

- CE Mark achieved June 2017
- Broad range of applications both in clinic and at-home
- Strong initial enquiry and early sales

Chronic Heart Failure (CHF) being readied for US launch

- Development complete
- Small trials at world leading heart institutions begin Q3 CY2017
- FDA 510(k) submission in Q3/Q4 CY2017

Significant news flow expected over next six months

- Commercial – US, AU and Europe sales expansion
- Clinical – various lymphoedema and CHF (internal and 3rd party)
- Regulatory – 510(k) clearances for SOZO™ in the US



- ASX listed (October 2007)
- Management Change July 2012
- S&P/ASX 300 – added March 2015



- Operations in US (San Diego, CA and Bloomington, MN), Australia (Brisbane) and Europe (Greece) (76 staff)

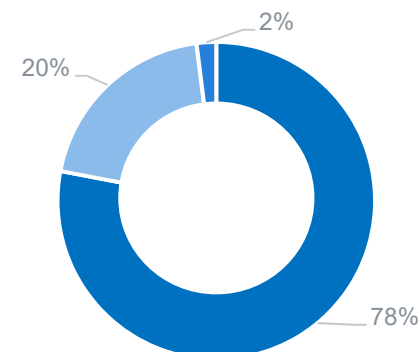


- Market capitalisation ~AU\$275M (~375M shares on issue)



- Cash on hand AU\$54.9M (30 June 2017)

Share Register Breakdown

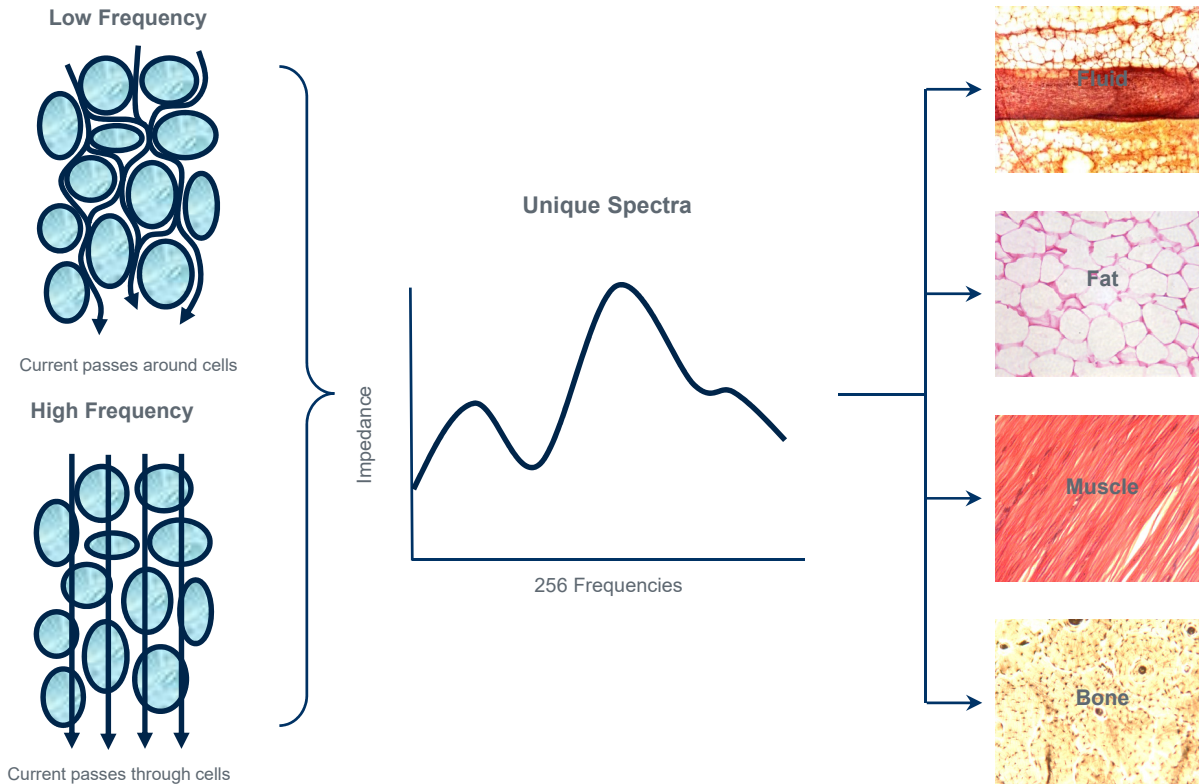


■ Institutional ■ Private ■ Founder/Management

Substantial Shareholders

Allan Gray	15.0%
Fidelity (FIL)	9.3%
Starfish Ventures	6.8%
Kinetic Investment Partners	5.2%
Paradice Investment Management	5.0%

BIS Technology



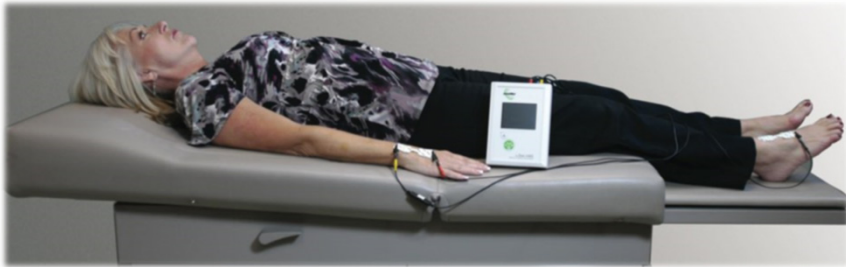
Advantages

- Simple and sophisticated method for measuring fluid and tissue composition
- Rapid, non-invasive
- IPD's full frequency spectrum (256 frequencies) approach uniquely accurate and specific
- IPD BIS devices used worldwide by major players to measure fluid and body composition in their own various clinical trials (e.g. AstraZeneca, Philips, Kaiser Permanente, University of Alabama, Eiger BioPharmaceuticals)

SOZO™ – ImpediMed's State of the Art BIS Tool for Chronic Disease Management



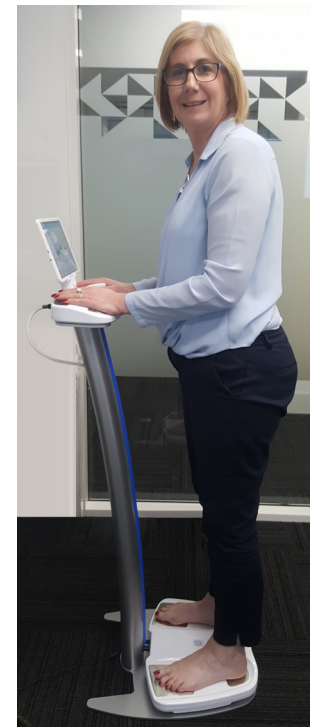
IPD Legacy BIS Measurement Tool (U400)



- Ground breaking accuracy from 256 frequencies
- However:
 - Cumbersome
 - Requires examination room
 - Requires highly trained clinician to administer
 - Patient has to lie down
 - Gel-backed electrodes
 - Testing time: tens of minutes
 - Manual data entry for Electronic Health Records

SOZO™ – IPD State of the Art BIS Measurement Tool

- Equivalent or superior accuracy compared with L-Dex® U400 and SFB7
- Highly sophisticated device that is uniquely simple for easy patient and clinician use
- Eliminates need for:
 - An examination room
 - Gel backed electrodes
 - Patient to be lying down
 - A highly trained clinician to administer test
- Reduces testing time from tens of minutes to mere seconds
- Connected device:
 - Ability to track protocol compliance
 - Simple expansion with add on software modules for expanded indications
 - Add on features within modules for increased functionality
 - Access to de-identified datasets allows for real time analyse to refine algorithms and develop other healthcare uses
 - Easily integrates with patients' Electronic Health Records (EHR)
 - Opens up the large and fast growing at-home patient monitoring market



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Cancer Survivors



L-Dex® for the Early Detection of Lymphoedema

Lymphoedema is a leading post-surgical complication for many cancer patients and greatly impacts quality of life. Simple and accurate measurement of fluid in limbs allows early detection and intervention



- Cancer treatment can damage the lymphatic system and result in fluid build-up in the extremities
- It can become an irreversible, life-long, debilitating condition that progressively gets worse

- L-Dex® detects the onset of lymphoedema very early, ~35 ml of fluid build up versus 200 ml+ for other approaches
- L-Dex®, via SOZO™¹, is designed to be used both clinically and by patients at-home

- If detected early, the progression of lymphoedema can be prevented, and often reversed

1. SOZO™ is not yet approved, cleared or registered for sale in the United States

US Commercialisation of L-Dex® Poised for Sustained Acceleration



- 100+ major multi-disciplinary cancer centres have incorporated L-Dex®
- Currently using IPD's FDA cleared U400 device
- Purpose is to integrate L-Dex® testing into clinical work flow practices and systems in preparation for routine use and adoption once SOZO™ is available
- SOZO™ FDA 510(k) for lymphoedema submitted July 2017
- Poised for sustained acceleration in L-Dex® revenues following SOZO™ FDA clearance (expected 4Q CY2017)
 - ✓ Immediate SOZO™ device sales
 - ✓ Widespread monitoring of cancer patients (reimbursed at US\$127 per patient assessment*)

* Requires engagement with local Medicare Administrative Contractors if and when necessary

Two main drivers of Private Payors are:

1 Global Clinical Trial Data

- IPD's own 1,100 patient post approval trial
 - Nearly fully enrolled (5 top 50 cancer centres and 3 NCCN institutions are participants in trial)
 - 1st data expected 2H CY2017
- Various independent trials being conducted worldwide
 - E.g. recently reported 6-year, 596-patient trial in Tennessee showing only 3% lymphoedema rates with L-Dex[®] (vs. 7%-36% expected without L-Dex[®])

2 Published Industry Guidelines

- NAPBC accreditation requires survivorship care plan
- Lymphoedema introduced into NCCN guidelines in July 2015
- L-Dex[®] recommended in American Physical Therapy Association Guidelines in July 2017

IPD is building a compelling case for Private Payors to initiate coverage in CY2018

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Chronic Heart Failure



CHF is a chronic, progressive and debilitating condition

Among the most expensive diseases for the US health care system

6.5m+
patients

US\$31bn+
hospitalisation costs alone

**Reducing hospital
stay and readmission
is a major focus**

**US government funding
bonuses and assessing
penalties for physicians
and hospitals that
over/under perform**

Assessing/monitoring fluid status is critical to the management of CHF patients

- A change of fluid status may signal the need to increase/decrease medication levels
- Correct medication levels significantly reduce hospital stays and readmissions

Role of SOZO™ in Optimising Outcomes for CHF Patient Management

- Current practice is to monitor CHF patients daily for fluid burden both in clinic and at-home
- Current monitoring methods have major shortcomings:

Weight Scale

- Inaccurate and rudimentary (although low cost – ~US\$150 per month)

Implantables

- Invasive and expensive – ~US\$25,000 (although accurate/precise)

SOZO™ is uniquely positioned to replace current monitoring methods



Precision/accuracy of implantables...



...at the cost of a scale

Heart Failure Program Making Rapid Progress Towards Commercialisation in EU and US

SOZO™ Regulatory Preparations

- CE Mark achieved in June 2017
- Submitting for FDA 510(k) clearance for CHF in Q3/Q4 CY2017

Clinical Data for Marketing Purposes

- Working with world leading institutions on CHF trials
 - IRB (Ethics) approvals in place for pilot trials
 - Sites trained
 - Sites open for enrolment

Favourable Reimbursement and Guidelines Regime

- Reimbursement code established to pay providers to remotely manage patients
- Current guidelines in place for daily monitoring of class III patients for fluid burden in US

Commercialisation – EU and US

- Initial EU commercial launch to commence Q3/A4 CY 2017
- Initial US launch to commence late CY2017 (subject to regulatory clearance / approval)

Expected CHF Business Model

Initial focus on Class III CHF patients

- Estimated at 25% of US 6.5 million CHF patients
- Monitor and manage the disease progression for Class III patients

SOZO™ CHF usage model

- Baseline reading to be performed in a clinical setting
- Daily monitoring to continue in either a clinical or remote setting

SOZO™ CHF Revenue Model

- Initial device purchase plus a per patient per month subscription model
- Well established and growing in CHF market

Preliminary Estimate of Initial US Addressable Market

Estimated initial patient population

~1.6 million

Preliminary estimated addressable per annum US market based on US\$60 per patient per month over 12 months

>US\$1.0 billion¹

1. Excludes revenue from initial device sales

SOZO™ Approved and Launched in Australia and Europe

- **Australia**

- Strong initial enquiry, both existing and new customers
 - Large Institutional Clients
 - Physiotherapists
 - Distributors
 - Cancer focused
 - Medical
- Initial units shipped
 - To select practices and institutions
 - Installation and training underway
- New business model introduced
 - Multi-year licensing contracts (standard software and updates)
 - Upgrade pathway for new indications and uses

- **Europe**

- Targeted launch
 - Initial units shipped
 - Partnered with master distributor exclusively focused on breast cancer space
 - Targeting high volume cancer centres in select markets

L-Dex[®] adoption and revenue growth

- FDA clearance for SOZO[™] for lymphoedema – catalyst for significant acceleration in US sales
- First data from Vanderbilt PREVENT trial
- Private payors to begin coverage of L-Dex[®] - catalyst for broad adoption in US
- Continue building customer base across top tier cancer centres
- Expansion into selective markets in Europe and other territories

SOZO[™] for heart failure

- Initial adoption of SOZO[™] in EU and AU
- File FDA 510(k) application for SOZO[™] for fluid monitoring of heart failure patients
- Commercial launch of heart failure in US following FDA clearance
- Completion and reporting of pilot trials
- Initiation of larger multi-centre marketing trial

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Appendix



Management Team



Deep and Broad Commercialisation Experience



Richard Carreon
Managing Director and
Chief Executive Officer

- Joined July 2012
- 30+ years experience
- Extensive experience in the medical device field and growth companies
- Previously Vice President at Medtronic (10 years)



Frank Vicini, MD
Chief Medical Officer

- Joined September 2014
- 25+ years as radiation oncologist
- Completed his fellowship at Harvard Medical School, has authored over 200 peer reviewed publications, and participated in 6 NIH clinical trials and the MammoSite Registry trial



Morten Vigeland
Chief Financial Officer

- Joined April 2011
- 15+ years in financial management in the medical technology industry
- Experience in med-tech start-ups and emerging growth companies



David Adams
SVP Ventures,
Licensing & Corporate
Development

- On Board November 2013 to August 2016
- Joined August 2016
- Background as medical device investment & business development executive
- 25+ years experience in tax, financial planning, and business development
- Previously Vice President, Integrations and Divestitures at Medtronic



Catherine Kingsford
SVP Medical Affairs

- Joined January 2007
- 20+ years global clinical experience with medical devices
- Previously worked as a cardiac scientist at several world-class medical institutions including St. Andrew's War Memorial Hospital, The Prince Charles Hospital, and Royal Brompton Hospital



Dennis Schlaht
SVP Quality, R&D
and Technology

- Joined October 2007
- 30+ years in engineering development and product marketing
- Previously Vice President of Marketing and Product Development at XiTRON's Test and Measurement Business

Board of Directors



Cherrell Hirst AO
FTSE, MBBS, BEdSt,
D.Univ (Hon), FAICD
Non-Executive
Chairman

- On Board since 2005
- Appointed Non-Executive Chairman in Nov 2011
- Leading medical practitioner in breast cancer screening/diagnosis
- Currently Chairman of Tissue Therapies Ltd and Non-Executive Director of Medibank Private Ltd

Gary Goetzke
Juris Doctorate
Non-Executive Director

- Joined August 2016
- 15+ years in senior management positions with medical device companies
- Currently the Principle and Chief Executive Officer of Compass Medical Advisors, LLC

Scott R. Ward
MS, BSc
Non-Executive Director

- Joined July 2013
- Venture capitalist with 30+ years experience in healthcare industry
- Previously Senior Vice President and President of the Cardiovascular business of Medtronic
- Chairman of the Board of Creganna-Tactx Medical Devices and Cardiovascular Systems, Inc.

Richard Carreon
Managing Director and
Chief Executive Officer

- See previous slide

Judith Downes
Non-Executive Director

- Joined April 2017
- 20+ years of accounting and senior management expertise with large ASX listed companies
- Previously a CFO at Alumina Limited and CFO/COO of Institutional Division, ANZ Banking Group Limited
- Currently Board Chairman of Bank Australia Limited and Honorary Fellow of the University of Melbourne's Faculty of business and Economics

Donald A. Williams
BAcy, CPA
Non-Executive Director

- Joined March 2017
- 35+ years in leadership roles serving the life science, biotech, and medical device industries
- Currently the Audit Committee Chair of Akari Therapeutics, Alphatec Holdings, Marina Biotech, and Provee Biosciences, and the Compensation Committee for Marina Biotech

Amit R. Patel
MBA, BME
Non-Executive Director

- Joined March 2017
- 8+ years in senior management positions
- Currently the board of Vios Medical and Pillsbury United Communities
- Currently the CEO and Co-Founder of Vios Medical

World Renowned Medical Advisory Board from Leading US CHF Institutions

US Advisory Board Members and Clinical Research Team

Paul Friedman, MD

- Vice Chair, Department of Cardiovascular Medicine
- Medical Director, Remote Monitoring, Mayo Clinic

Roy Small, MD FACC, FSCAI

- Medical Director of Clinical Research, Lancaster General Hospital

J. Thomas Heywood, MD

- Director, Heart Failure Recovery and Research Program, Scripps Health

Andrew Accardi, MD

- Chairman of Emergency Medicine, Scripps Memorial Hospital Encinitas

Laura Mauri, MD, MSc

- Chief Scientific Advisor, Harvard Clinical Research Institute; Recognised leader in the use of statistical methods in clinical

European Advisory Board Members

Professor Gerasimos Filippatos, MD, FESC, FACC

- Head of the Heart Failure Unit at Athens University Hospital Attikon, Greece.
- Current President of European Society of Cardiology - Heart Failure (ESC-HF)

Marco Metra, MD

- Professor of Cardiology at University of Brescia, Italy

Professor Stefan Anker, MD, PhD

- Professor of Innovative Clinical Trials at U Medical Center Gottingen, Germany

Professor Piotr Ponikowski, MD, PhD

- Head of Cardiology Department, Medical University Wroclaw Poland

For the Twelve Months Ended 30 June 2017 (Unaudited and Preliminary)

