Significant DyeVert™ Clinical Data Featured at ACC and ACC Quality Summit Annual Meetings

Highlights:

- **Four additional scientific presentations on the increasing incidence of CI-AKI and the benefit of contrast dye minimisation strategies with DyeVert on patient outcomes**
- **CI-AKI reduction protocols including DyeVert leads to marked reduction in AKI rates at prestigious US hospitals**
- **Adds to growing body of scientific evidence supporting dye-minimisation and monitoring with DyeVert in at risk CKD patients undergoing coronary angiograms**

March 20, 2019- Minnesota, United States and Melbourne, Australia – Osprey Medical (ASX: OSP) today announces four scientific posters were presented the American College of Cardiology (ACC) Annual Scientific Conference and ACC Quality Summit in New Orleans. The data supports the growing body of evidence that Contrast-Induced Acute Kidney Injury (CI-AKI) following coronary angiograms for patients with chronic kidney disease (CKD) is increasing significantly, is strongly associated with increased risk of hospitalisation and death that can be reduced through the hospital implementing CI-AKI reduction protocols including dye minimisation and monitoring with DyeVert Plus. The ACC Annual Scientific Conference attracts attendances in excess of 16,000 with close to 12,000 professional attendees and Key Opinion Leaders from over 100 countries.

Osprey Medical's President and CEO, Mike McCormick commented: "We are delighted on the breadth of real-world clinical evidence being reported at prestigious meetings like the ACC Conference and ACC Quality Summit. These data highlight the involvement of our innovative DyeVert contrast reduction system for patients with CKD who are at risk of life-threatening CI-AKI events when undergoing very routine and typically safe coronary interventions. As our footprint expands in the US and the clinical experience with DyeVert grows we see an acceleration in the cumulative evidence of benefit reported on DyeVert by clinicians. This, when coupled with our planned multi-centre observational registry across up to 50 hospitals that seeks to analyse between 5,000-10,000 commercial DyeVert procedures over the next 2-3 years for contrast use and patient outcomes is expected to significantly increase awareness of our products."

The clinical utility of DyeVert when used in conjunction with patient screening and hydration protocols consistent with several treatment guideline recommendations for at-risk CKD patients was demonstrated from a single centre experience (Metropolitan Methodist Hospital, San Antonio, Texas) in 72 patients.[1] Preliminary results reported showed a very significant 75% reduction in the observed AKI rate, when the AKI reduction protocol including DyeVert was followed versus a predicted decline of 13-18% in AKI rate according to previous models.

A second single-centre treatment study examining the clinical characteristics and AKI rates of patients that underwent a percutaneous coronary intervention (PCI) with DyeVert (n=29) or without DyeVert (n=770) between 2015 to 1Q2018 showed the non-risk adjusted AKI rate was approximately three fold higher in the No DyeVert group (9.35%) versus the DyeVert group (3.45%).[2] This was despite 55% of patients in the DyeVert group being classified as CKD patients versus 24% in the No DyeVert group.

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[1] Kutschman, R. *et al*. 2019. Comprehensive Clinical Quality Initiative for Reducing Acute Kidney Injury in At-Risk Patients Undergoing Diagnostic Coronary Angiogram and/or Percutaneous Coronary Interventions. American College of Cardiology Quality Summit. Poster Presentation.

[2] Bunney, R. *et al*. 2019. Contemporary Use of Contrast Dye Reduction Technology in a Tertiary Academic Hospital: Patient Characteristics and Acute Kidney Injury Outcomes Following Percutaneous Coronary Interventions. American College of Cardiology Quality Summit. Poster Presentation.

Northwell Health System of New York, which is the 9th largest healthcare system in the US, reported on the initial success in reducing AKI rates from 9.2% (costing US$1 million in losses) to 6.8% using screening and hydration[3] during 1Q 2019. The DyeVert was introduced into Northwell's largest hospital in June 2018 with reported CI-AKI rates of 4.5% in the 3Q.

The Burden of Illness study published AKI incidence, risk factors, and costs among 2.8 million US patients across 749 hospitals undergoing Percutaneous Coronary Procedures[4] from the Premier Healthcare Database. Osprey has previously commented on this study, which demonstrated a significant cost burden of $1.7 billion to Premier hospitals, a very significant increase in the rate of CI-AKI from 18% in 2012 to 28% in 2017 and a 61% higher rate of death in patients who experienced a CI-AKI. Premier, Inc. is a leading Group Purchasing Organisation (GPO) in the US, with approximately 4,000 member hospitals. In December 2018 Osprey was awarded a group purchasing agreement with Premier and DyeVert Plus a Technology Breakthrough Award.

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About Osprey Medical (ASX: OSP)

Osprey Medical's vision is to make heart imaging procedures safer for patients with poor kidney function. The amount of dye (contrast) used during angiographic imaging procedures increases the patient's risk for dye-related kidney damage known as Contrast-Induced Acute Kidney Injury (CI-AKI). The Company's core technologies originated from research conducted by Dr David Kaye at Melbourne's Baker Institute. Its proprietary dye reduction and monitoring technologies are designed to help physicians minimize dye usage and monitor the dose of dye real time throughout the procedure. The Company's DyeVert™ System reduces contrast while maintaining image quality in a self-adjusting easy-to-use design that monitors dye usage. Osprey Medical's Board and Management are comprised of experienced and successful personnel with established track records covering medical device development, regulatory approvals, sales and marketing, and mergers-acquisitions. Osprey Medical's advisory board comprises world-recognised experts in heart and kidney diseases.

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This announcement contains or may contain forward-looking statements that are based on management's beliefs, assumptions, and expectations and on information currently available to management. All statements that address operating performance, events or developments that we expect or anticipate will occur in the future are forward-looking statements, including without limitation our expectations with respect to our ability to commercialize our products including our estimates of potential revenues, costs, profitability and financial performance; our ability to develop and commercialize new products including our ability to obtain reimbursement for our products; our expectations with respect to our clinical trials, including enrolment in or completion of our clinical trials and our associated regulatory submissions and approvals; our expectations with respect to the integrity or capabilities of our intellectual property position. Management believes that these forward-looking statements are reasonable as and when made. You should not place undue reliance on forward-looking statements because they speak only as of the date when made. Osprey does not assume any obligation to publicly update or revise any forward-looking statements, whether as a result of new information, future events or otherwise. Osprey may not actually achieve the plans, projections or expectations disclosed in forward-looking statements, and actual results, developments or events could differ materially from those disclosed in the forward-looking statements.

[3] Meraj, P. *et al.* 2019. Acute Kidney Injury – how can we prevent future events? American College of Cardiology Annual Meeting. Poster Presentation.
[4] Prasad, A. *et al.* 2019. Acute Kidney Injury Incidence, Risk Factors, and Costs Among U.S. Patients Undergoing Percutaneous Coronary Procedures. American College of Cardiology Annual Meeting. Poster Presentation.

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