One Platform.
Endless Possibilities.

February 2022

NASDAQ: RCEL ASX: AVH

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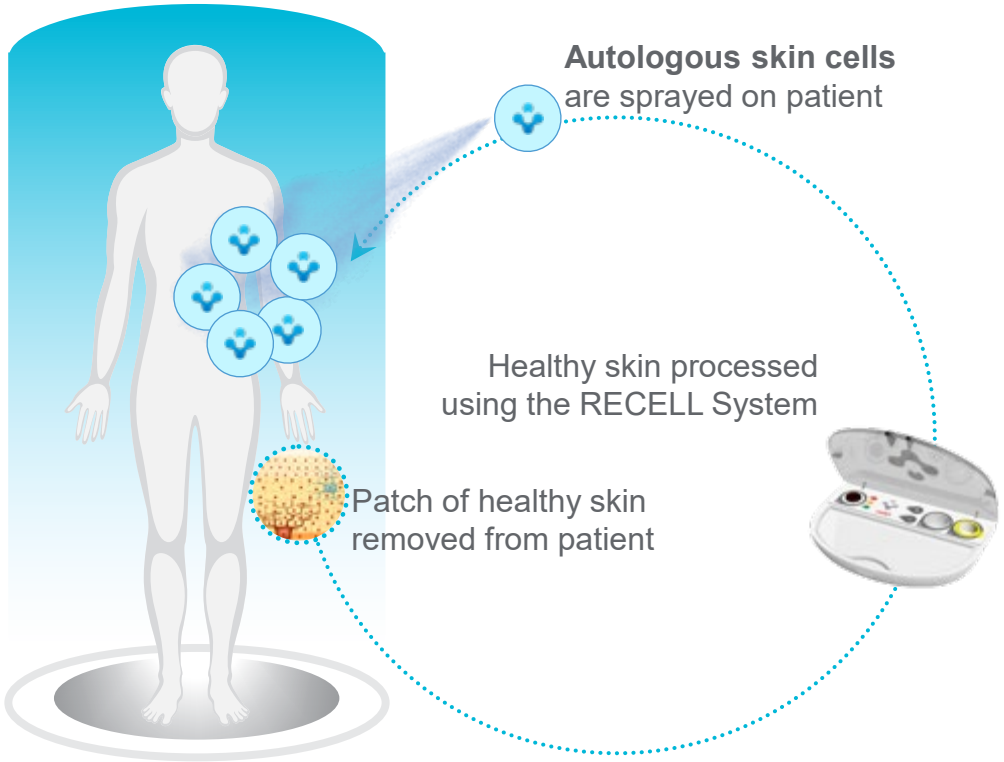
AVITA Medical’s products are Rx only. Please reference the Instructions for Use for more information on indications, contraindications, warnings, precautions and adverse events.

In the United States, RECELL® is approved for use in patients suffering acute thermal burns. Use of RECELL in other patient populations is either prohibited by United States law or may be made available pursuant to a relevant investigational device exemption granted by the FDA (and likewise limited by United States law to investigational use only).

One Platform. Endless Possibilities.

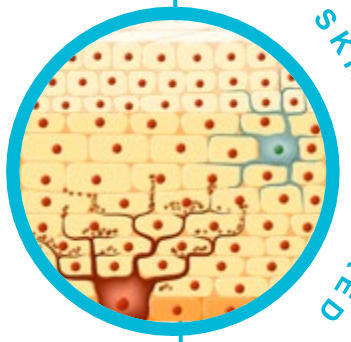
RECELL®
Autologous Cell Harvesting Device

RECELL delivers healthy skin cells



Free cells modulate and catalyze the healing process

RECELL enables regeneration of healthy skin



Technology platform benefits a wide array of skin defects and wounds irrespective of etiology

- Vitiligo
- Trauma
- Burns / Scalds
- Chronic Wounds
- Scar Revision
- Infectious Disease
- Cancer Reconstruction
- Genodermatoses
- Regenerative Dermatology

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Value Creation

Recent Key Accomplishments

- Quarter Ending December ’21, Total Revenue Growth of +35% vs Same Quarter Prior Year
- FDA Approval of New “Ease of Use” RECELL Device
- PMDA Approval of Burns in Japan
- Vitiligo Pivotal Trial: Enrollment Completed
- Soft Tissue Pivotal Trial: Enrollment Completed
- Transitional Pass-Through Payment Application Approved by CMS for Reimbursement in Outpatients
- EB: Initial Proof of Concept for Delivery of Genetically Modified Skin Cells in Suspension
- Telomerase/Rejuvenation: Initial Proof of Concept on Delivery of Reverse-Aged Skin Cells

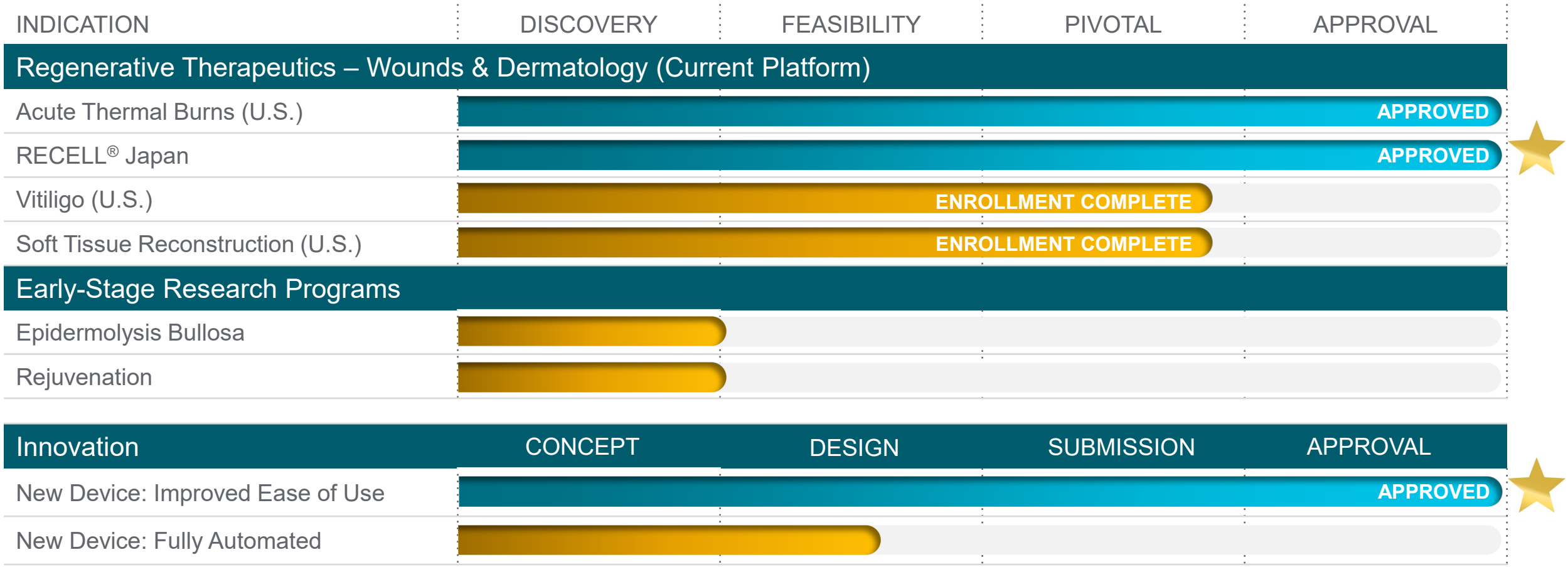
Projected Key Milestones

• Top Line Results and Vitiligo FDA Submission / Vitiligo Commercial launch • Top Line Results and Soft Tissue FDA Submission / Soft Tissue Commercial Launch	H2 22 / H2 23
• Outpatient Launch • Launch of New “Ease of Use” RECELL Device	H1 22
• IND Enabling Studies (EB & Rejuvenation) • Reimbursement & Launch of Burns in Japan	H2 22

Quarters referenced in calendar year. As of January 1, 2022 Avita Medical is reporting on a calendar year basis.

Development Pipeline and Growth Potential

Focused Pipeline with Strong Growth Potential



Focused Effort on Business Development to Supplement Pipeline

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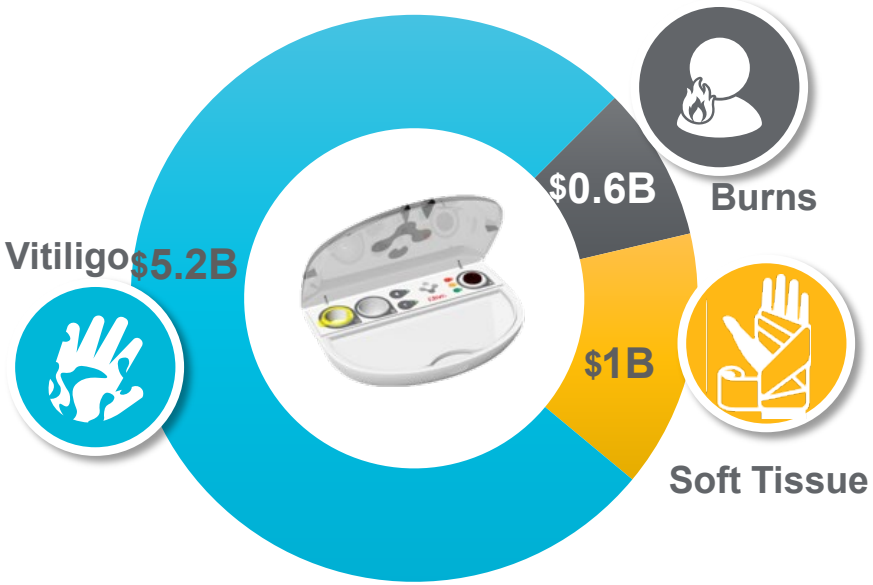
Market Opportunity of Pipeline Exceeds $22 Billion

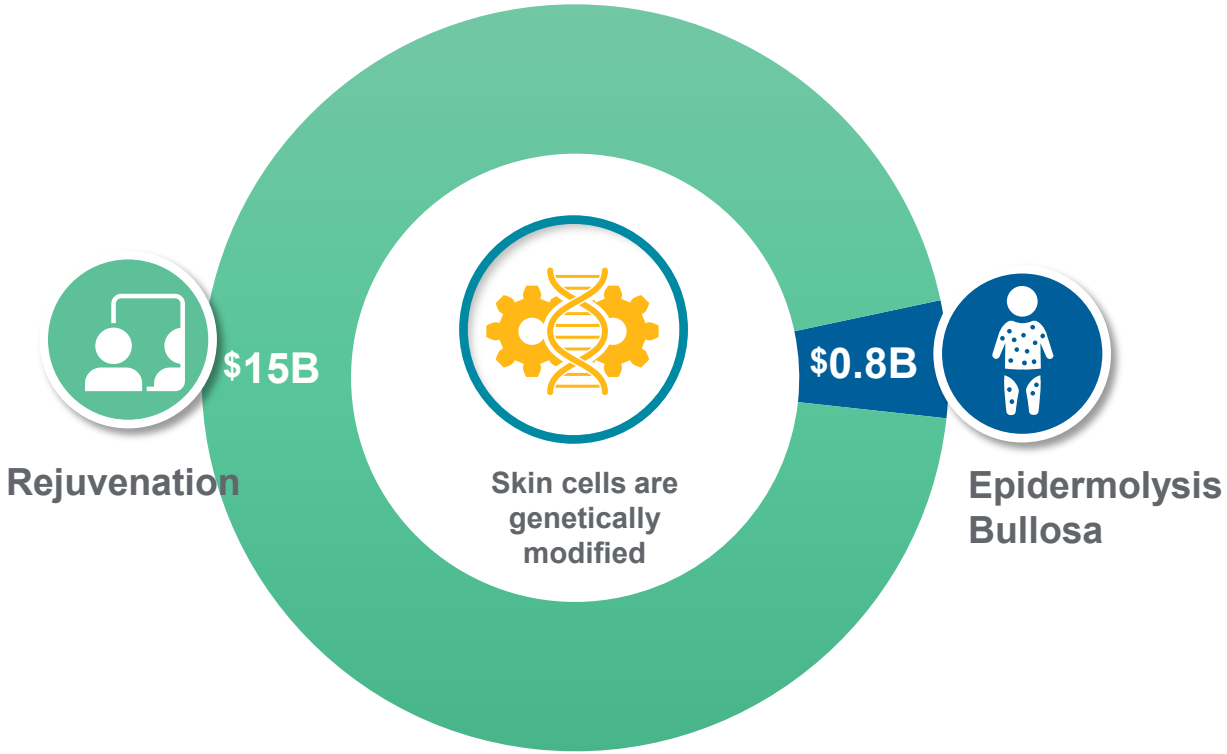
EXISTING PLATFORM

~$6.8B Opportunity



NEW PLATFORMS: CELL BASED GENE THERAPY

~$15.8B Opportunity



> $22 Billion in Combined TOTAL ADDRESSABLE MARKET

Current Platform: Efficacy is Well Demonstrated

PRODUCT IS WELL STUDIED		
	Patients (in Published Studies)	Number of Publications & Presentations
ACUTE WOUNDS *(Including Thermal Burns)*	1,772	206
DEFECTS/ VITILIGO	453	57
CHRONIC WOUNDS	143	17

Highly De-risked Pipeline with >15,000 Patients Treated Globally

A Common Goal: Full Skin Restoration (Re-epithelialization and Re-pigmentation)

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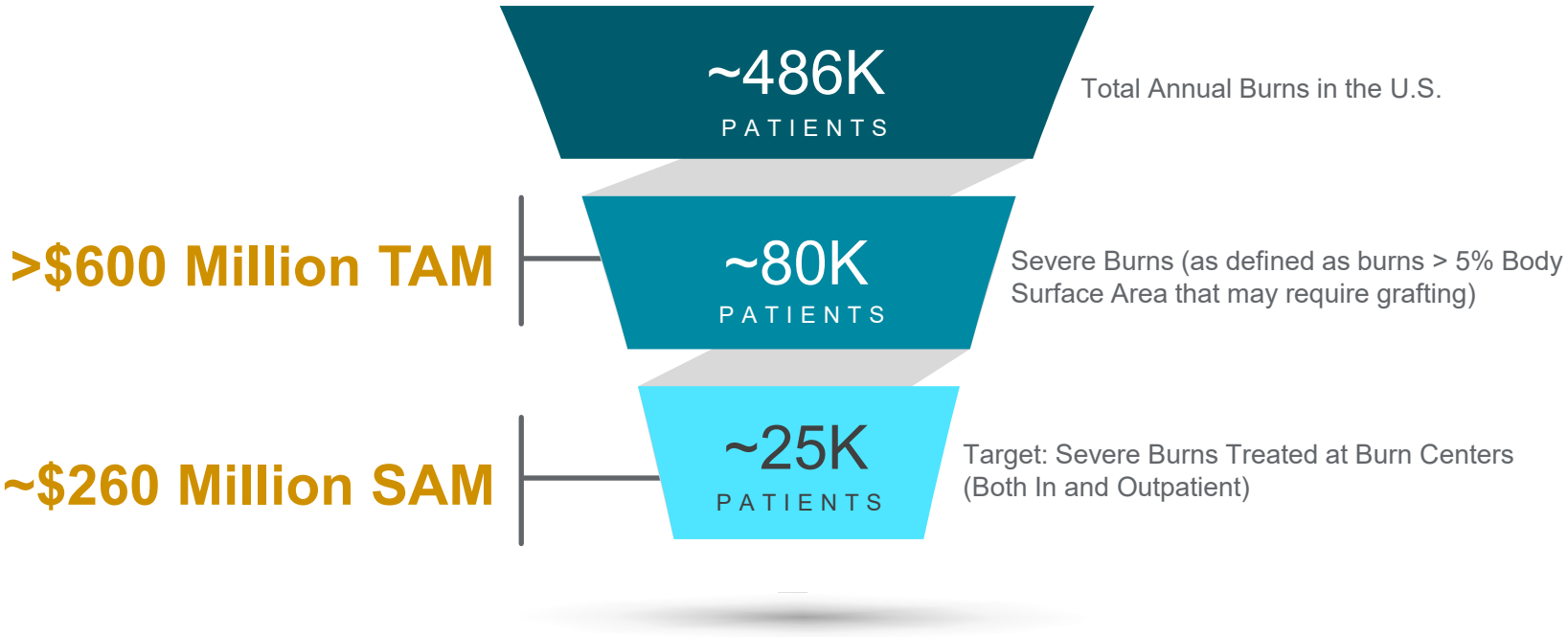
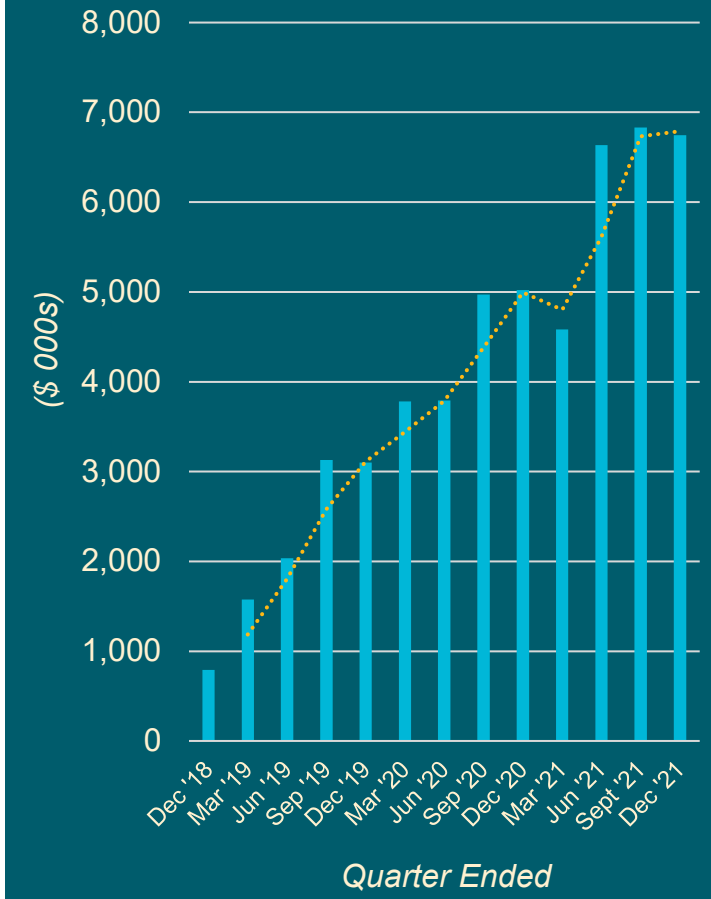
Thermal Burns: U.S. Target Market Expanded to Include Small Burns and Outpatient

Patient Funnel and Addressable Market



Outpatient Pass Through Code Opens Doors to Small Burns and Expands Serviceable Market Opportunity

U.S. RECELL Commercial Sales Since Approval



New C-Code Provides Additional Payment in the Outpatient Setting

The Centers for Medicare and Medicaid Services (CMS) created a new technology Transitional Pass-Through (TPT) Payment - C Code for billing RECELL devices when used in procedures performed in the hospital outpatient and ambulatory surgery center (ASC) settings as of Jan 1 2022

C1832:
Autograft suspension, including cell processing and application, and all system components

Code provides additional payment which offsets the cost of the device for Medicare beneficiaries over a 2-3 year period before converting to a permanent code

This is a Medicare specific code, which we estimate covers ~ 15% of patient lives

AVITA will ensure broad commercial payer acceptance & coverage before pursuing a full commercial launch

The New Code is not Indication (Burns) Specific and Lays the Foundation for Growth in Soft Tissue

New Ease of Use Device Now FDA Approved

New Device

Reduced number of steps

Simplified Process

Improved Usability

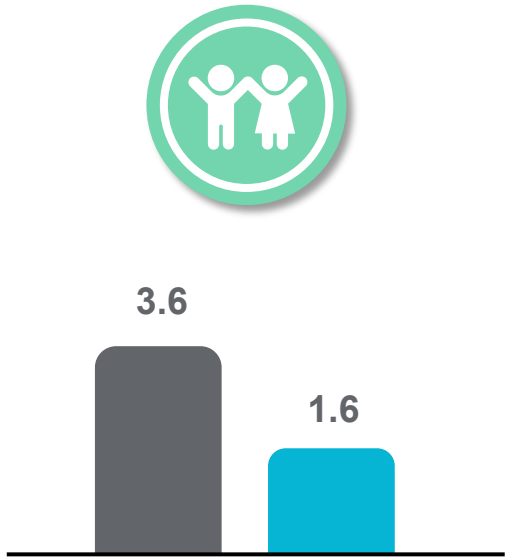
94% of users of the RECELL System believe it will **reduce their workload/allow them to perform other duties***

Only 1 Set of Hands Required in the Sterile Field; Steps Reduced By 1/3rd

* Market Research March 2020 HCPs N=15

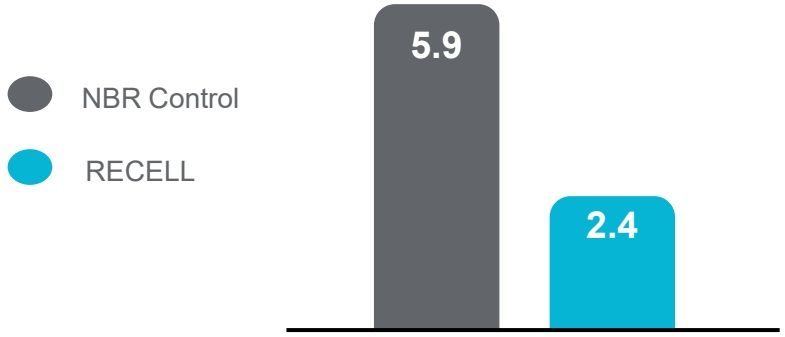
FDA Approval in Pediatric Full-Thickness & Larger Burns

FEWER PROCEDURES REQUIRED FOR DEFINITIVE CLOSURE VS CONVENTIONAL AUTOGRAFT[1]



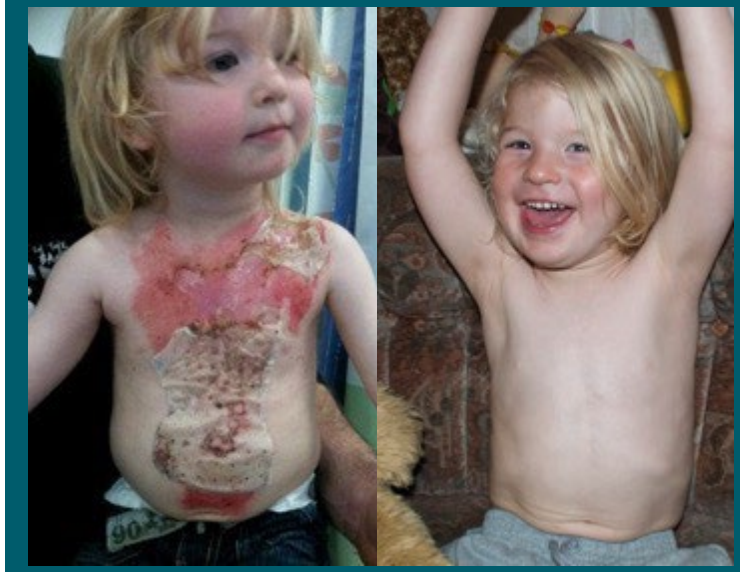
Pediatric Patients

56% fewer mean procedures with RECELL
(N=284) *p < 0.0001*



Adults with >50% TBSA

60% fewer mean procedures with RECELL
(N=318) *p < 0.0001*



~25% of all burns occur in children

80% of RECELL Customers Stated that these New Label Enhancements Will Positively Impact Their Usage of RECELL*

1. Instructions for Use. RECELL® Autologous Cell Harvesting Device
2. NBR – National Burns Repository

* N = 41, "will significantly or somewhat impact RECELL usage"

Approval of Burns Received in Japan

BACKGROUND

AVITA Commercial Partner:

COSMOTEC, an M3 Company

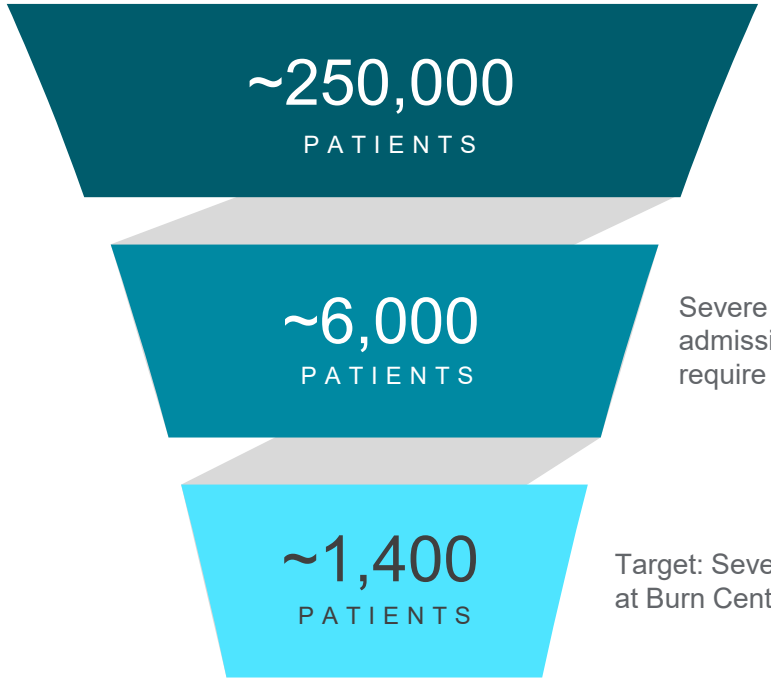
INDICATION: Burns

Soft Tissue and Vitiligo to Follow Based on U.S. Pivotal Clinical Data

LAUNCH:

Following Ministry of Health, Labour, and Welfare (MHLW) decision on reimbursement pricing, anticipated June 2022

PATIENT FUNNEL - BURNS ADDRESSABLE MARKET

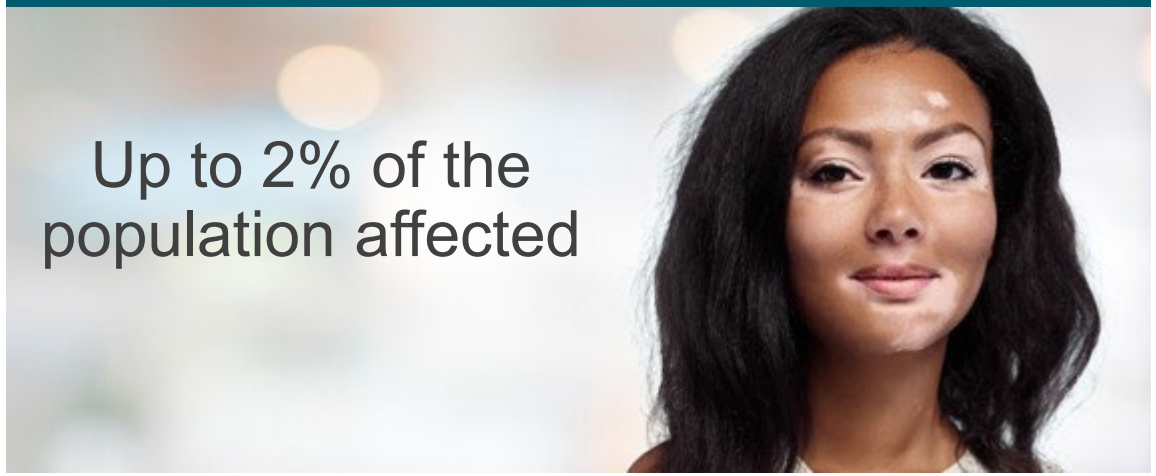


Reimbursement Anticipated in June 2022 with Commercial Launch Following Thereafter

Furue M, Yamazaki S, Jimbow K, Tsuchida T, Amagai M, Tanaka T et al. Prevalence of dermatological disorders in Japan: a nationwide, cross-sectional, seasonal, multi-center, hospital-based study. J Dermatol. 2011 April; 38(4):310-20, Japan Health System Review, 2018. Additional estimates based on data from 2016 JSBI National Burns Repository, https://injuryprevention.bmj.com/content/26/Suppl_2/i36#F2 and Cosmotec estimates

Vitiligo: Hight Unmet Need, No FDA-Approved Products

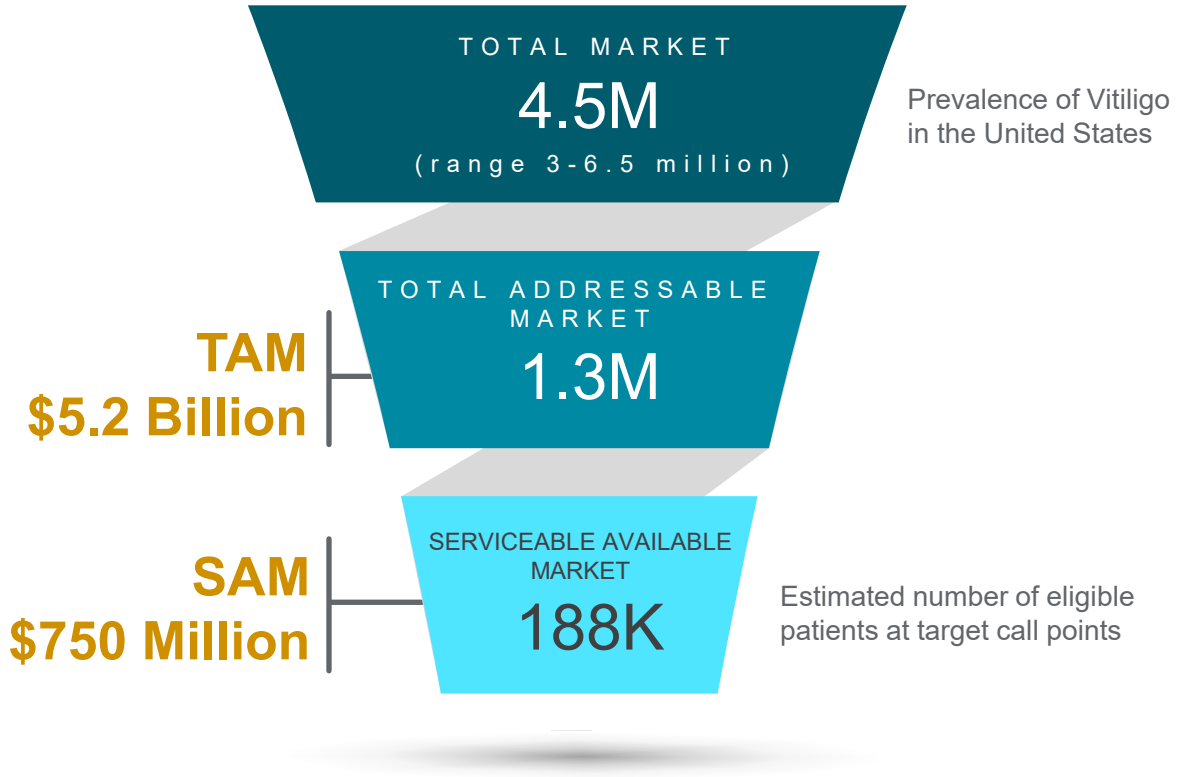
SIGNIFICANT UNMET NEED



No FDA-approved medical treatments;
extremely low patient and physician satisfaction with existing products

Vitiligo impacts quality of life (QoL) –
25% of patients with vitiligo reported a DLQI >10, which indicates severe QoL reductions, compared with 34% in psoriasis patients

OPPORTUNITY ESTIMATION



Concentrated HCP base: Estimating <1,000 procedural dermatologists and plastic surgeons with interest in treating vitiligo

Advances in Vitiligo: An Update on Medical and Surgical Treatments. A. Dillon, et al. J Clin Aesth Derm. 2017. Willingness-to-Pay and Quality of Life in Patients with Vitiligo. Radtke, et al. BJD. 2009.
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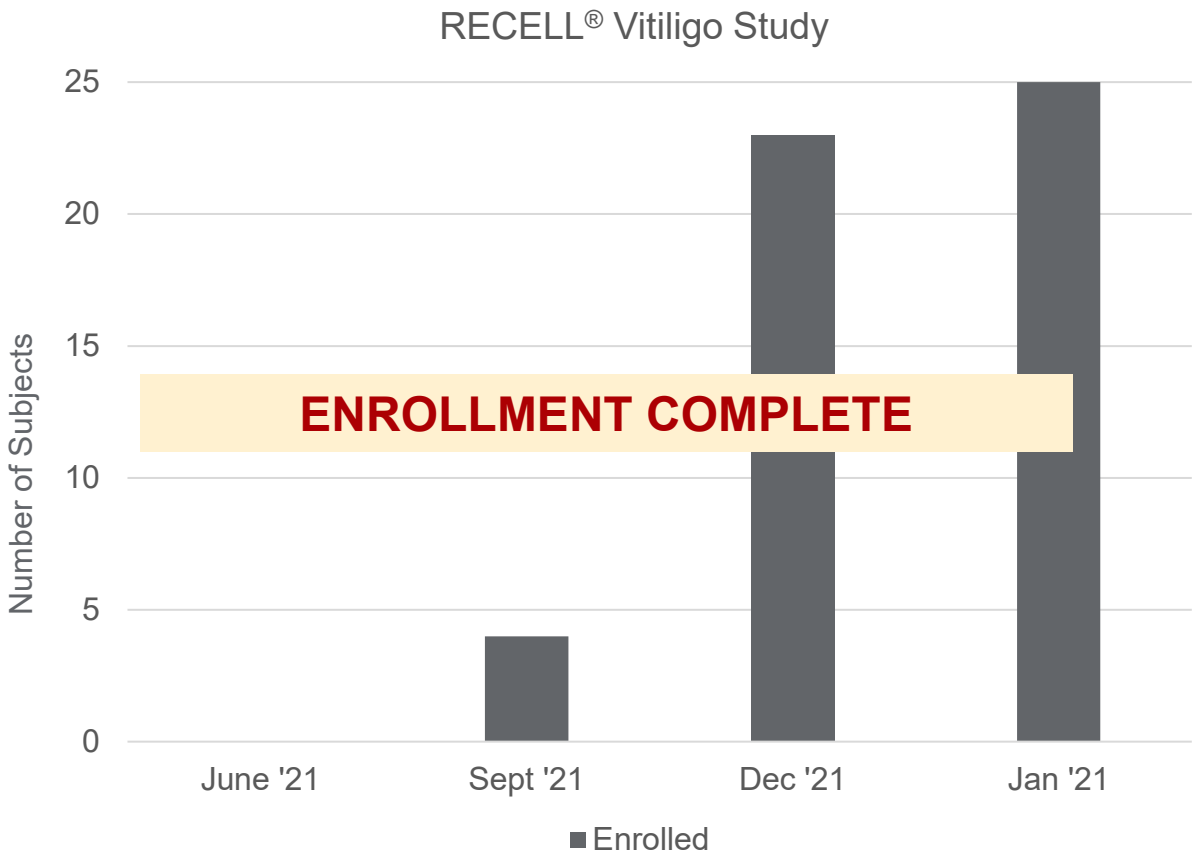
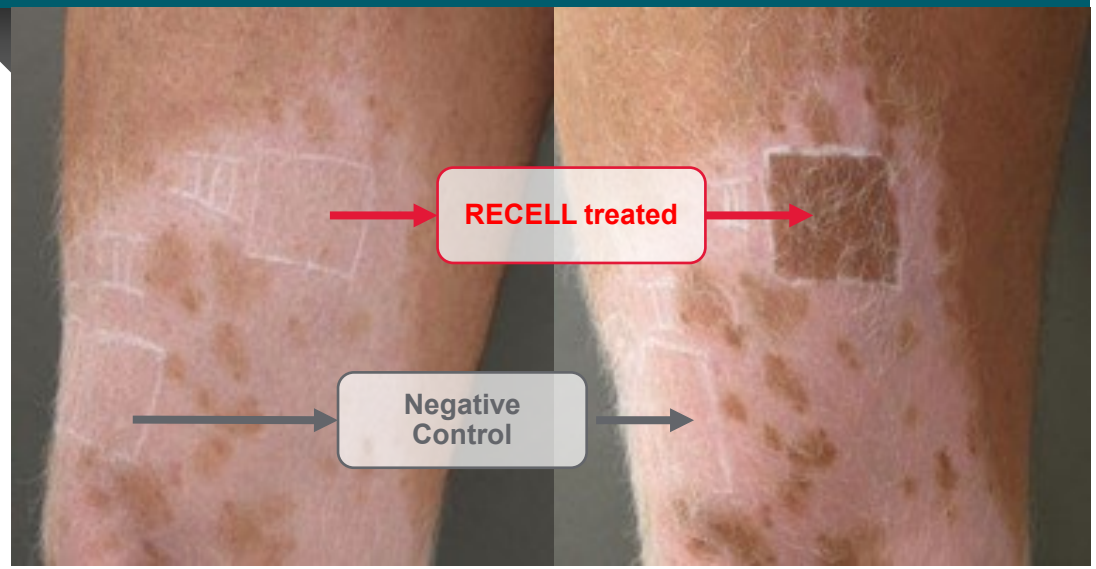
Vitiligo Study Enrollment Complete

Blinded, Randomized, Study Evaluating RECELL for Repigmentation of Stable Vitiligo



FDA Submission Expected in H2 ’22 with Approval in H2 ’23

Patient from a Prior Study at 6 MONTHS
RECELL-treated area was 100% re-pigmented



Komen L, Vrijman C, Tjin EP, Krebbers G, de Rie MA, Luiten RM, van der Veen JW, Wolkerstorfer A. Autologous cell suspension transplantation using a cell extraction device in segmental vitiligo and piebaldism patients: a randomized controlled pilot study. Journal of the American Academy of Dermatology. 2015 Jul;73(1):170-2.

POTENTIAL RECELL BENEFITS

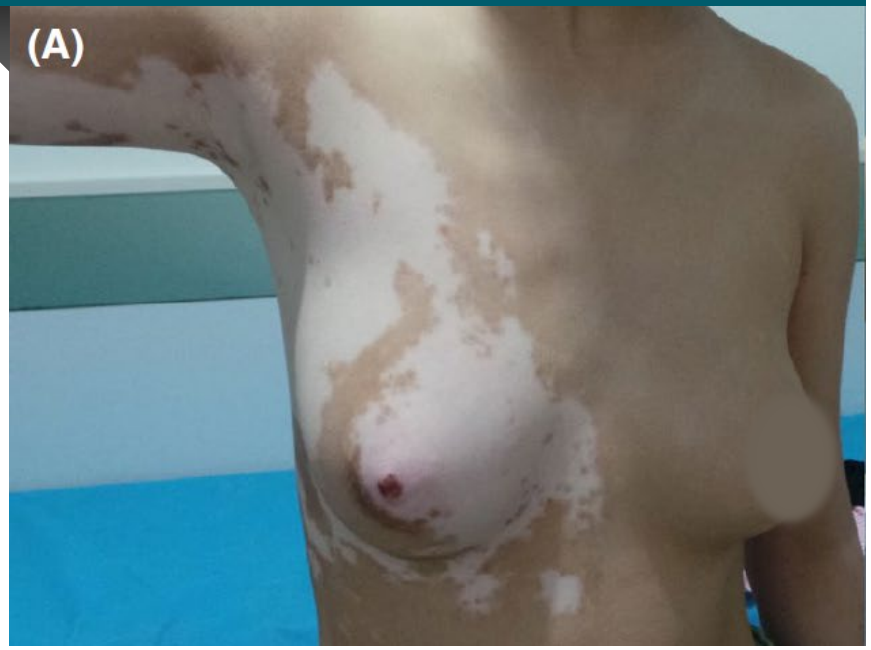
For Stable Vitiligo:
Segmental & Non-Segmental

Durable: One-time treatment

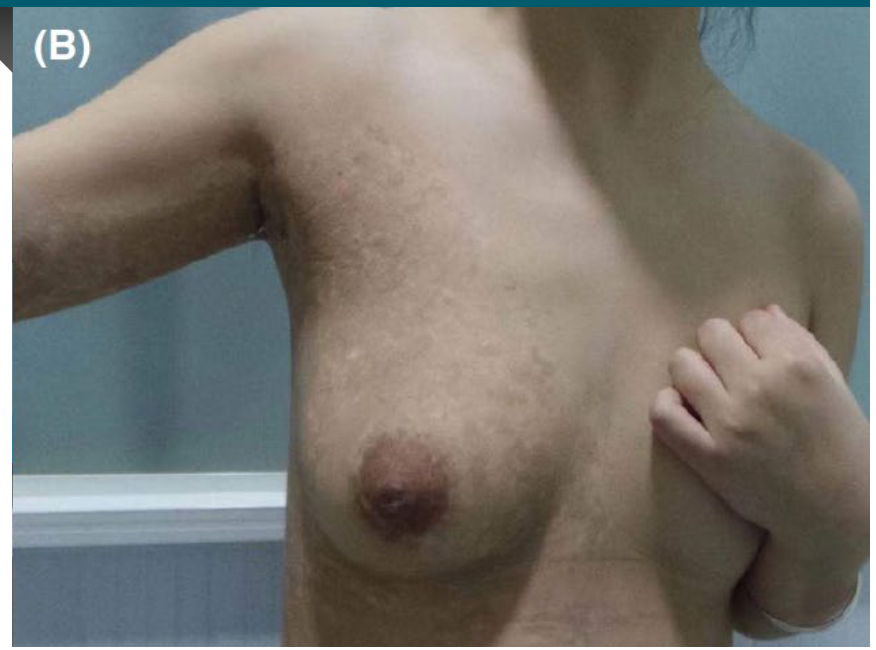
In the United States, RECELL is not approved for treatment of vitiligo.

RECELL Case: Repigmentation of the Nipple-Areola Complex

Before RECELL®



12 months After RECELL®



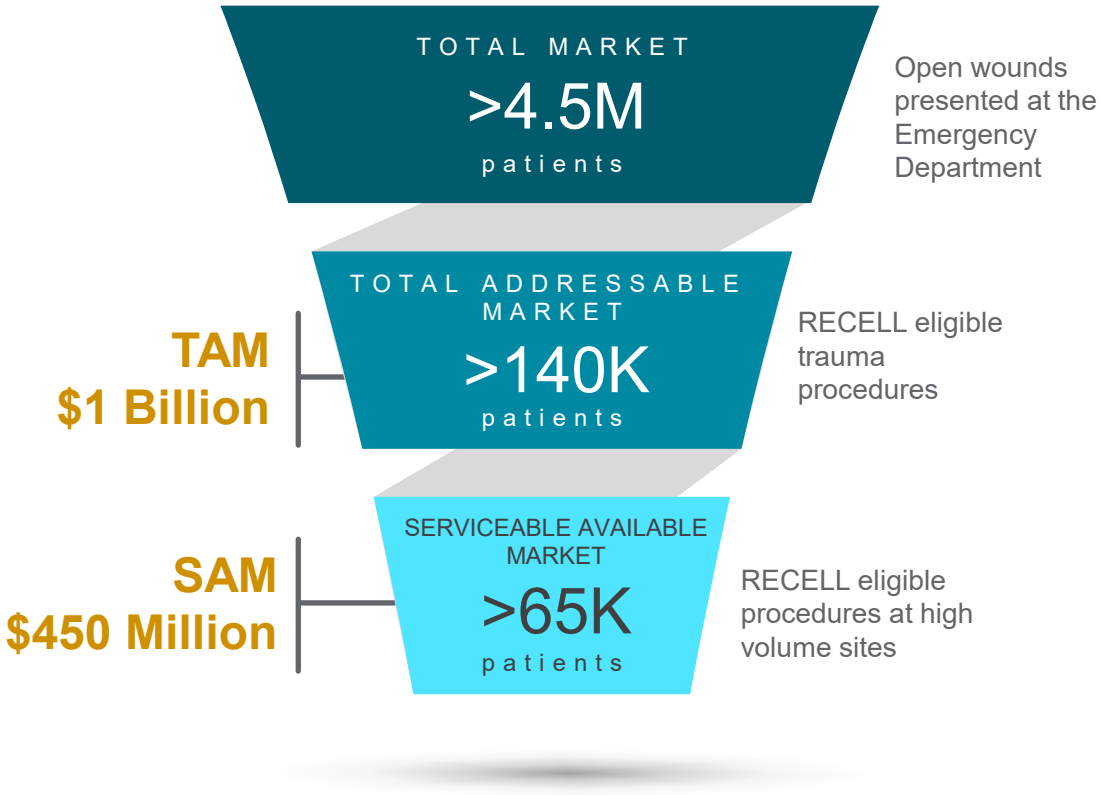
- 23 year old female with vitiligo.
- Donor skin was harvested from adjacent unaffected areas.
- Depigmented epidermis was removed using dermabrasion.
- The cellular suspension was then sprayed on both the recipient and donor areas (expansion ratio ranged from 1:20-1:40).

Established Track Record in Vitiligo: 1,000 patients treated internationally & 12 peer reviewed publications showing positive outcomes

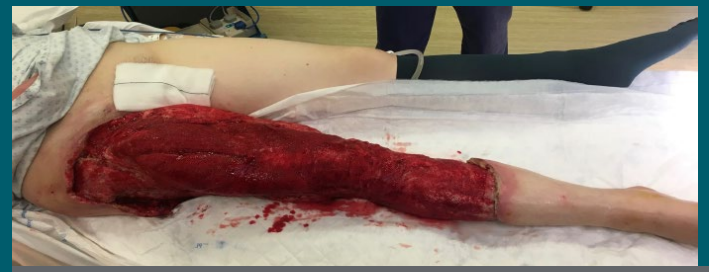
Yu et al. Repigmentation of nipple-areola complex after RECELL® treatment on breast vitiligo. Journal of Cosmetic Dermatology, 2021
In the United States, RECELL is not approved for use with patients suffering vitiligo.

Soft Tissue Repair Will Expand the Burns Business to Encompass All Acute Wounds

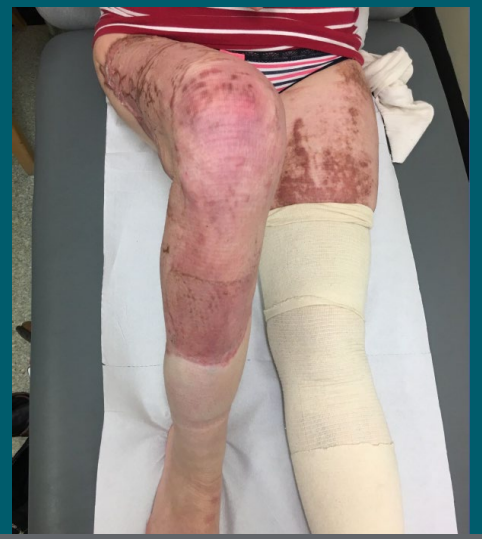
OPPORTUNITY ESTIMATION



Female, pregnant 28-year-old who suffered from a de-gloving Injury



POST DEBRIDEMENT OF INJURY



6 MONTH POST-RECELL TREATMENT

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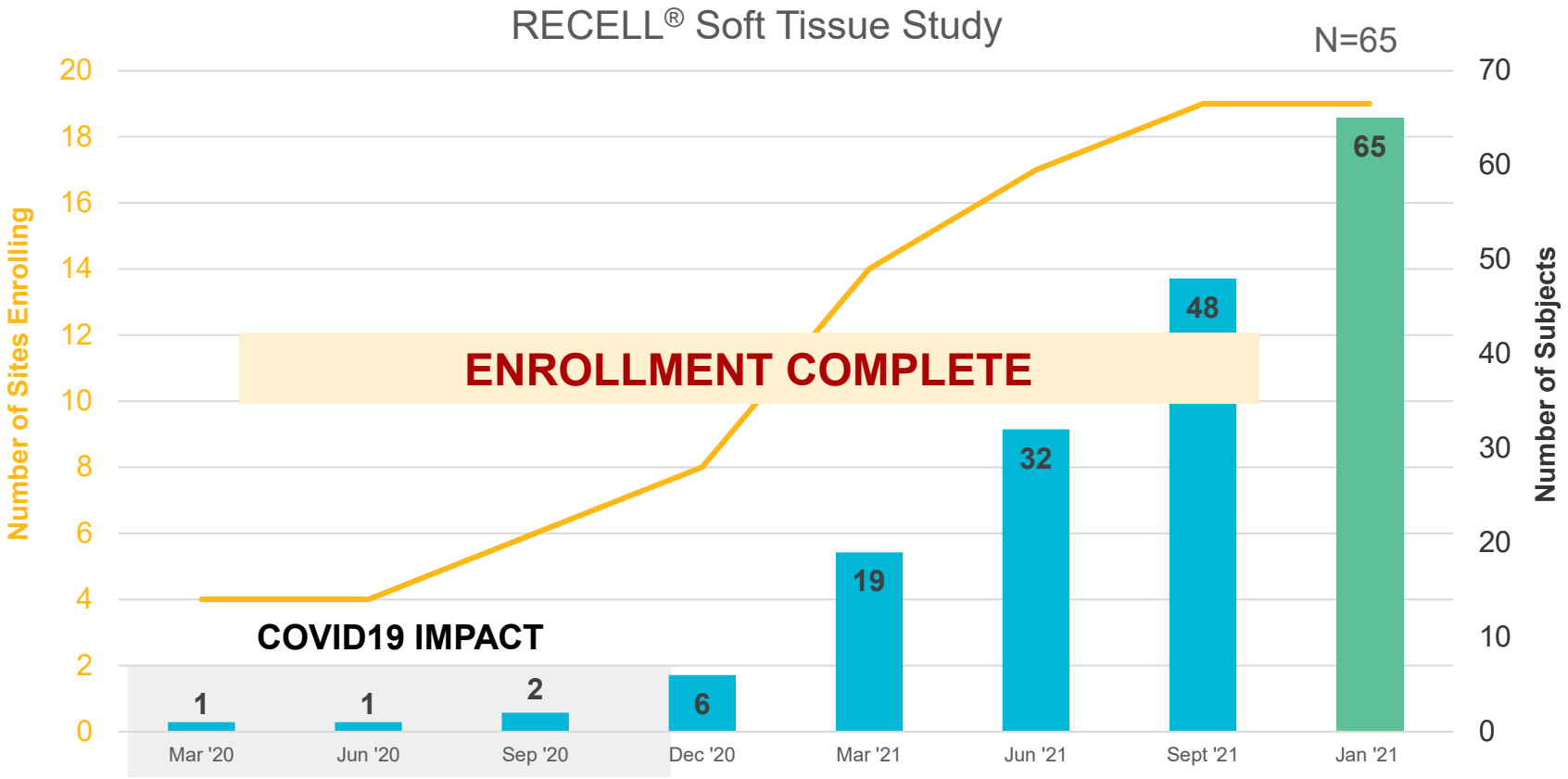
Poster: Use of regenerative suspension in the treatment of a complex de-gloving injury. Ian M Smith,

Early Completion of Soft Tissue Reconstruction Trial

Clinical trial demonstrates use of less donor skin without compromising healing outcomes relative to conventional autografting



FDA Submission Expected in H2 ’22 with Approval in H2 ’23

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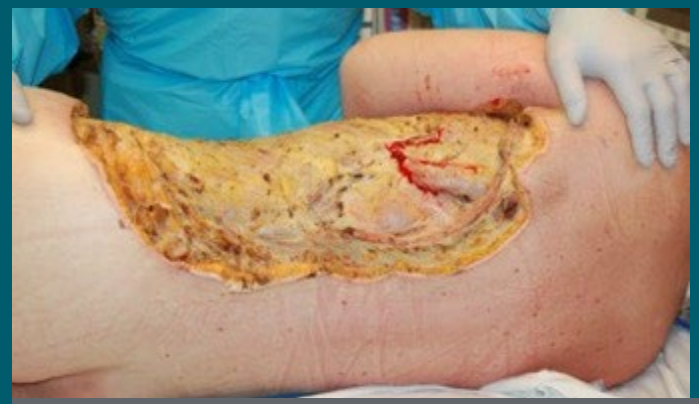
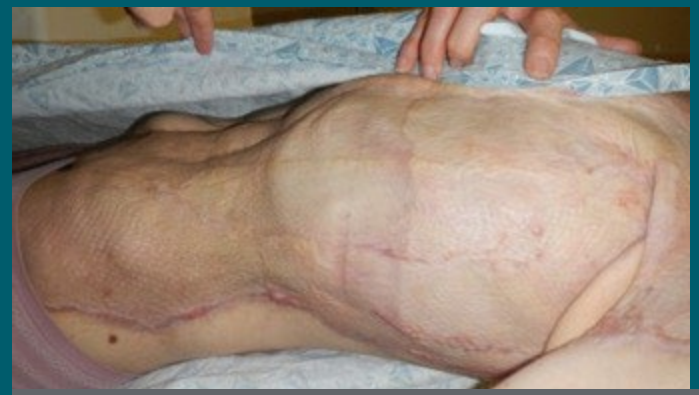
Patient treated for necrotizing fasciitis



TREATMENT DAY



1 YEAR POST-RECELL TREATMENT

Photos courtesy of Kevin Foster, Valleywise Health Medical Center

Soft Tissue Synergies with Current Commercial Burn Focus

Expanded Acute Wounds Sales Team Will Target a Total of 366 Centers

~50% of Burn Centers are also Level 1 / Level 2 Trauma Centers

Reimbursement in Place
Able to leverage existing CPT & Outpatient C Code

Same Treatment Protocol to Burns
Consistent treatment protocol across acute injuries

Same Unmet Needs as Burns
Reduction of donor site morbidity & donor site requirements are top unmet needs

Large opportunity that leverages existing burns infrastructure

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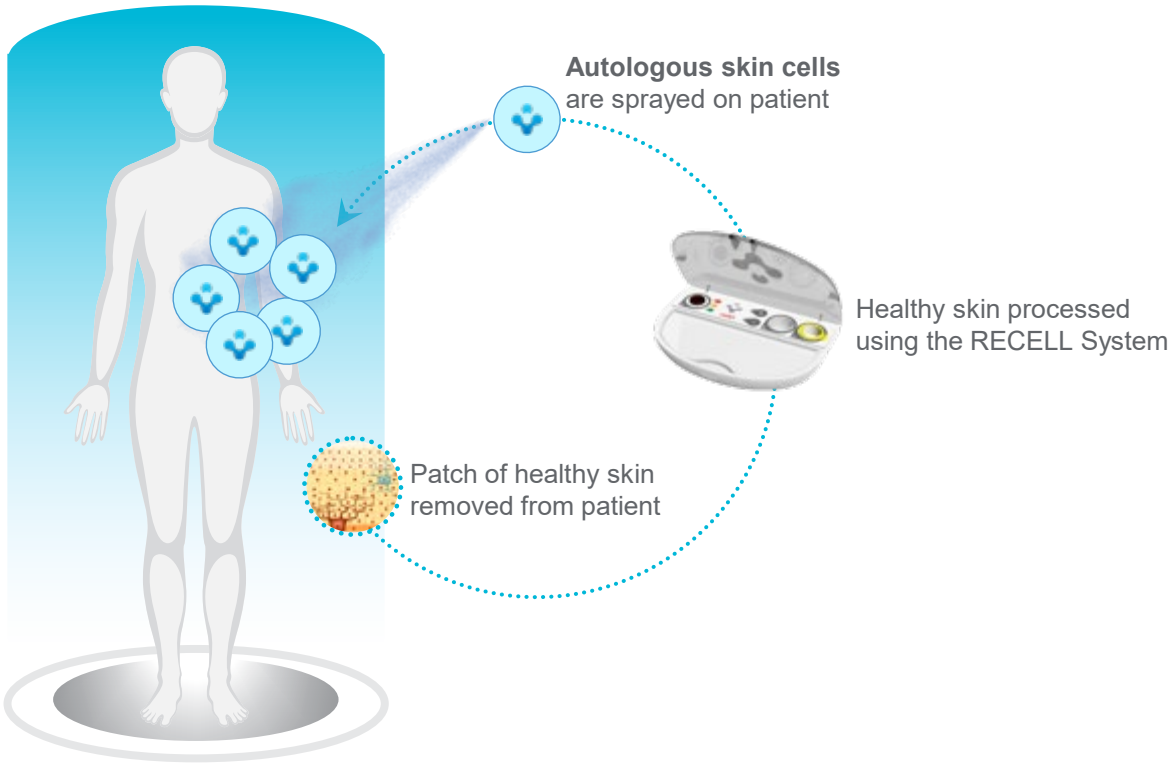
RECELL in Genetic Skin Defects and Rejuvenation

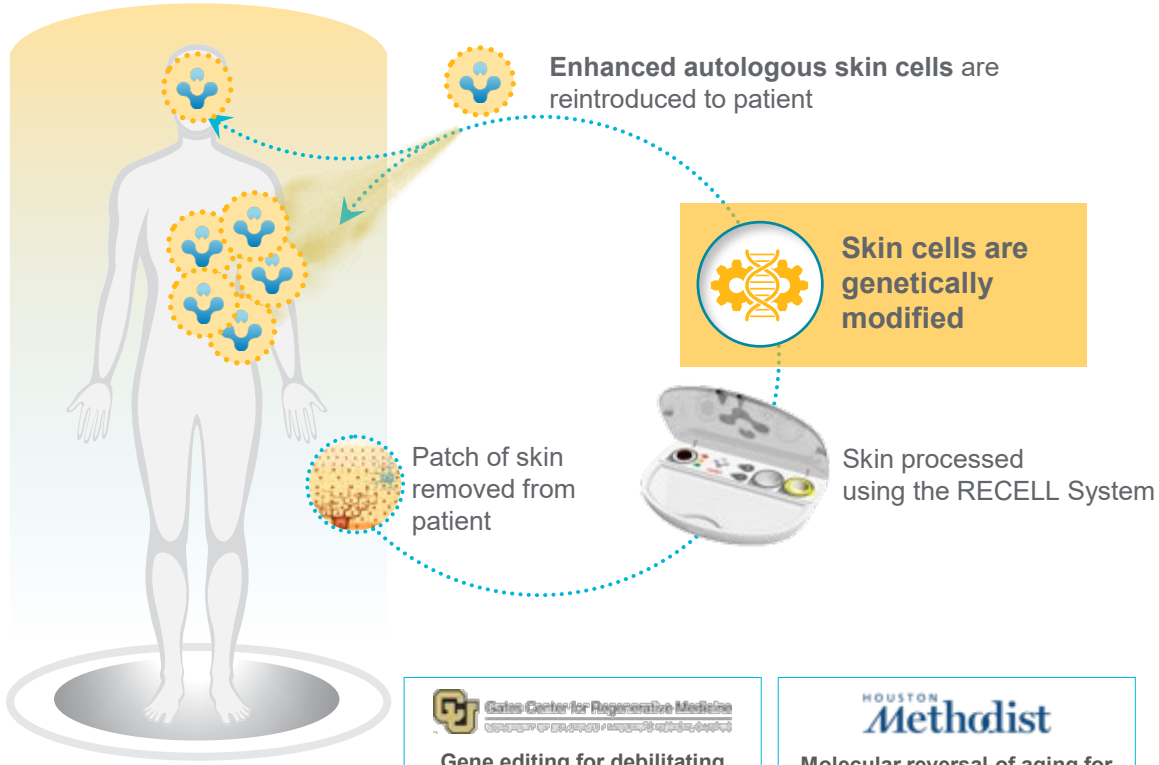
CURRENT PLATFORM

Treatment using RECELL for harvesting and direct reintroduction of the patient's own healthy skin cells



FUTURE PLATFORM

RECELL as a platform for treatment using the patient's corrected skin cells



Gene editing for debilitating orphan skin disorder

Molecular reversal of aging for skin rejuvenation

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Cell and Gene Therapy Development Activity

FOUR KEY STEPS

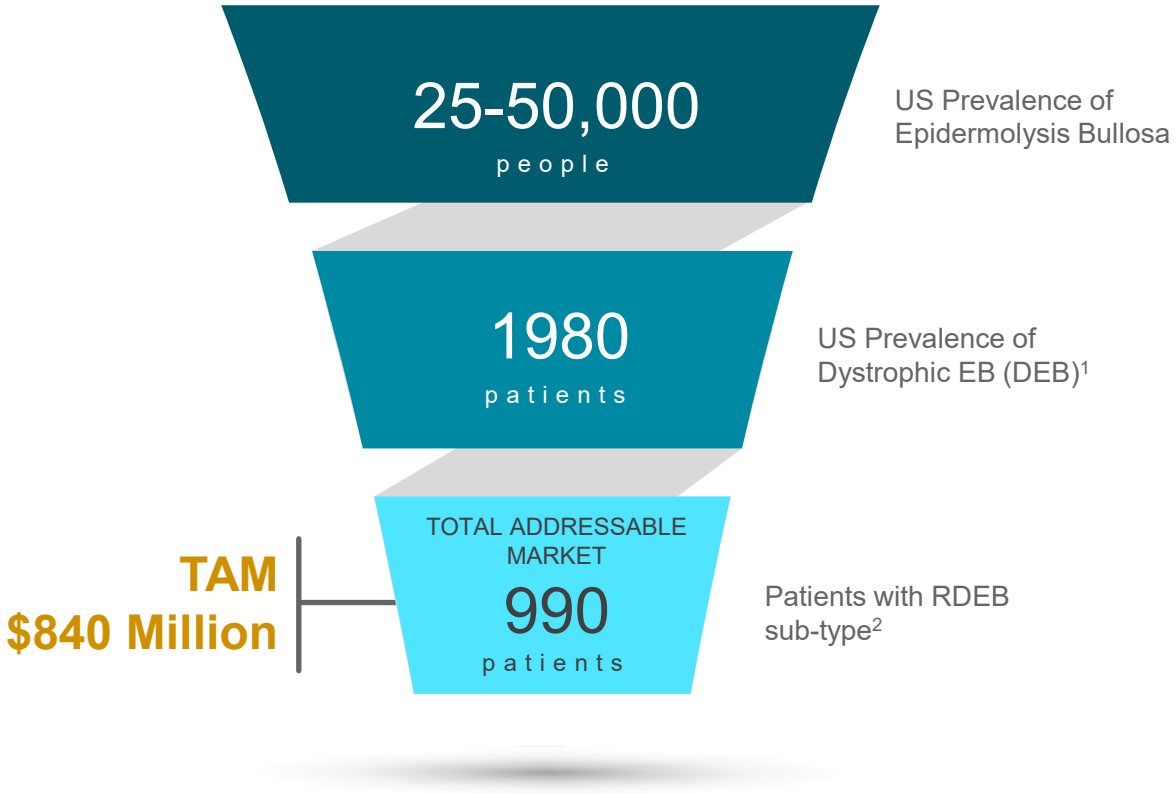
- **Proof of Concept**
- **FDA Interaction**
- **IND-enabling Studies**
- **First-in-human (IND)**

Program Objective:

Optimize Spray-On Skin™ Cells with *modified* skin cells and establish IND-readiness

Sizeable Market Opportunity Estimated in EB, Given Orphan Pricing Potential

OPPORTUNITY ESTIMATION



POTENTIAL COMPETITIVE ADVANTAGES

- Suspension is potentially more cost effective to generate, transport and apply vs cultured sheet grafts
- iPSC-based technology enables banking of cells for future treatments
- *Ex vivo* gene editing of skin cells has a safety advantage over *in vivo* gene therapeutics

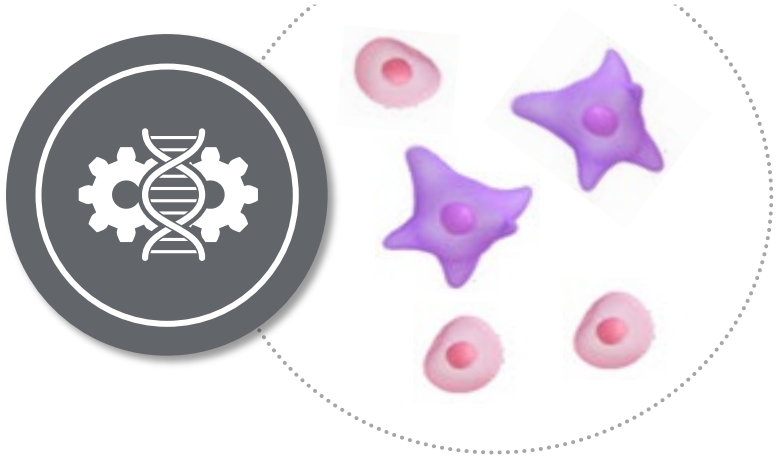
~$840M target US market opportunity, assuming $850,000[4] per patient / treatment

1. Has et al, "Consensus reclassification of inherited epidermolysis bullosa and other disorders with skin fragility." Br J of Dermatology. 2020. Range 1,100-2,500. 2. DEB prevalence estimated as 6/million. RDEB estimated to be approximately half of DEB prevalence = 3/million. Range: 1.35- 8/million. Fine et al, "Epidemiology of Inherited Epidermolysis Bullosa…" JAMA, 2016. 3.. Luxturna (gene therapy for a rare, inherited retinal disease that can lead to blindness) was priced at $850,000 for a population between 1000-2000 patients in US. Zolgensma for spinal muscular atrophy is priced at $2.1 million

Skin Regeneration from Corrected Autologous Skin Cell Suspension

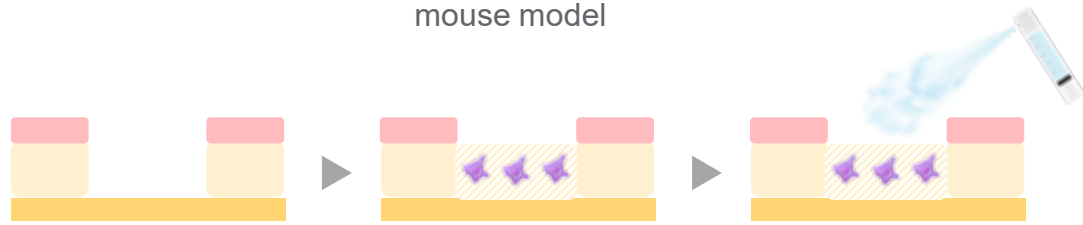
Successful reverse-differentiation (induced pluripotency) and gene correction of Recessive Dystrophic Epidermolysis Bullosa (RDEB) Skin Cells

Correction of RDEB Single-Site Mutation



In Vivo Evaluation of Gene-corrected Skin Cells

Immunocompromised mouse model



Full-thickness injury created | Recapitulated human dermis | Application of corrected cells

New, healthy skin regenerated from iPSCs

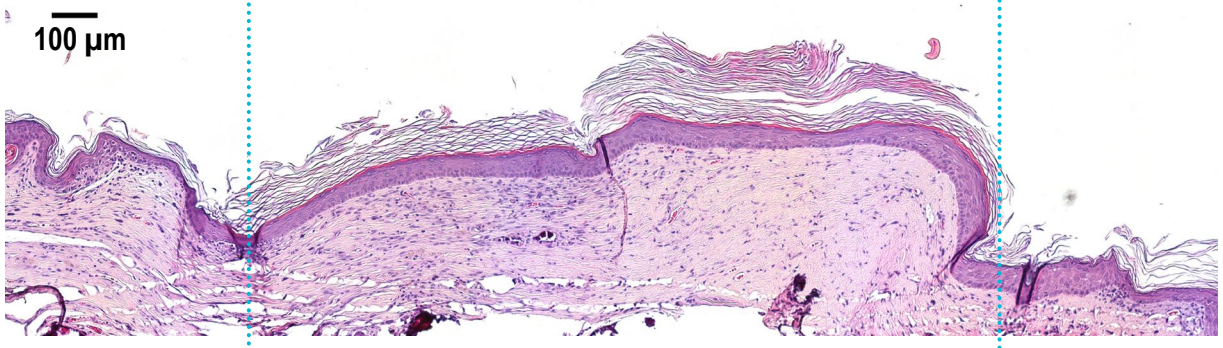
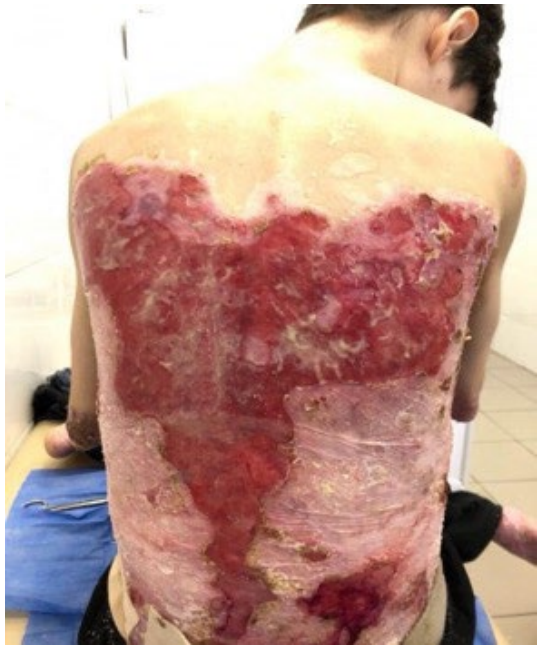


Image courtesy of Gates Center for Regenerative Medicine, University of Colorado

Exploring Cell-Based Gene Therapy for Epidermolysis Bullosa

THE CHALLENGE



DEBILITATING
Skin fragility, disability, cancer

HIGH UNMET NEED
No FDA-approved treatment, only palliative measures

COST BURDEN
Care of $200K-$500K per year per patient

THE OPPORTUNITY

CURATIVE: Technology for precise correction of genetic defect & banking for future use (vs ameliorating symptoms)

EFFICIENT: Suspension-based approach eliminates growth & transport of fragile skin sheets

CONVENIENT: Suspension-based product simplifies application onto patient wounds (vs surgical anchoring of epidermal sheets which can result in issues with “take rates”)

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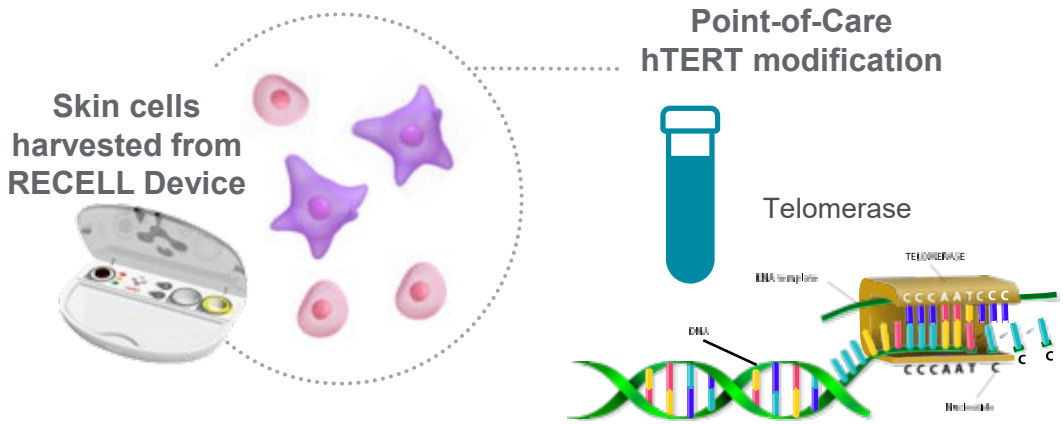
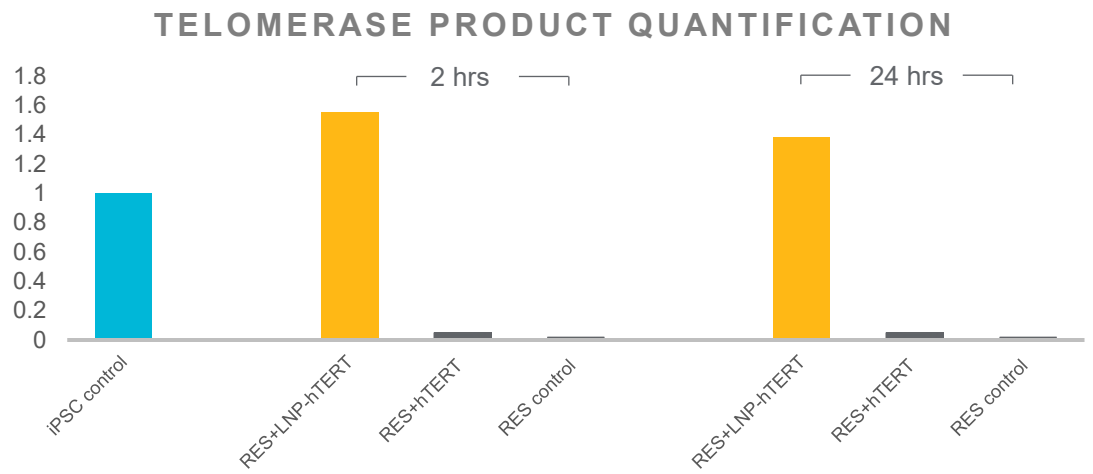
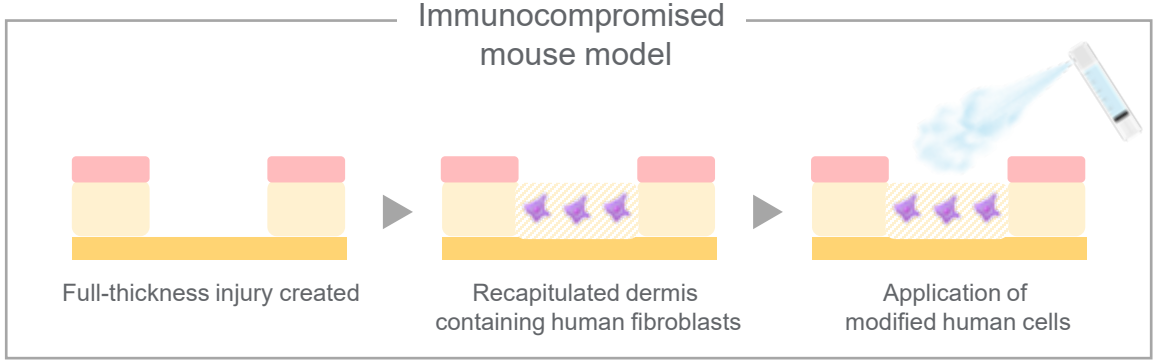
Reverse Aging of Skin Cells Derived using the RECELL Device

Successful delivery of mRNA-hTERT & expression in Skin Cells Derived from RECELL

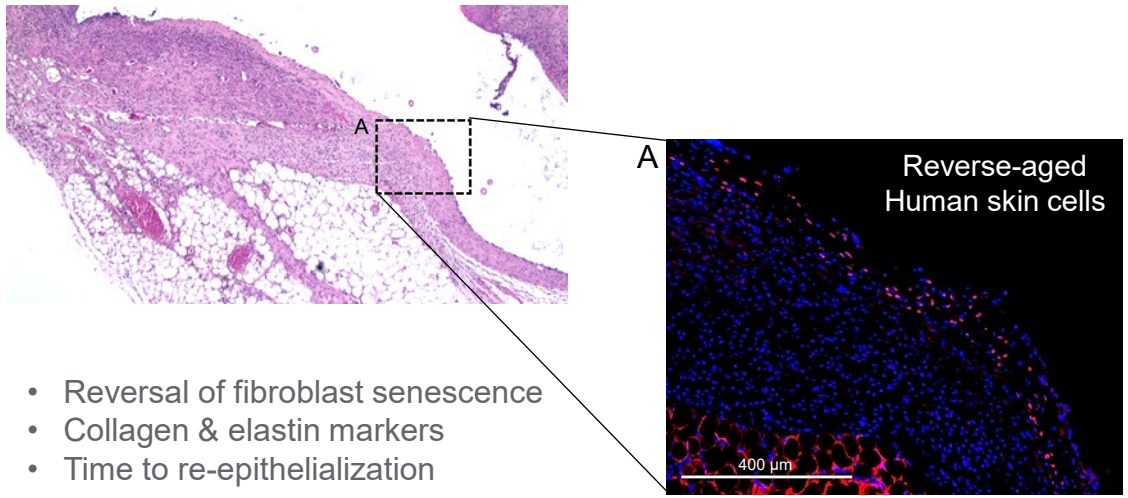




In Vivo Evaluation of mRNA-hTERT Modified Skin Cells



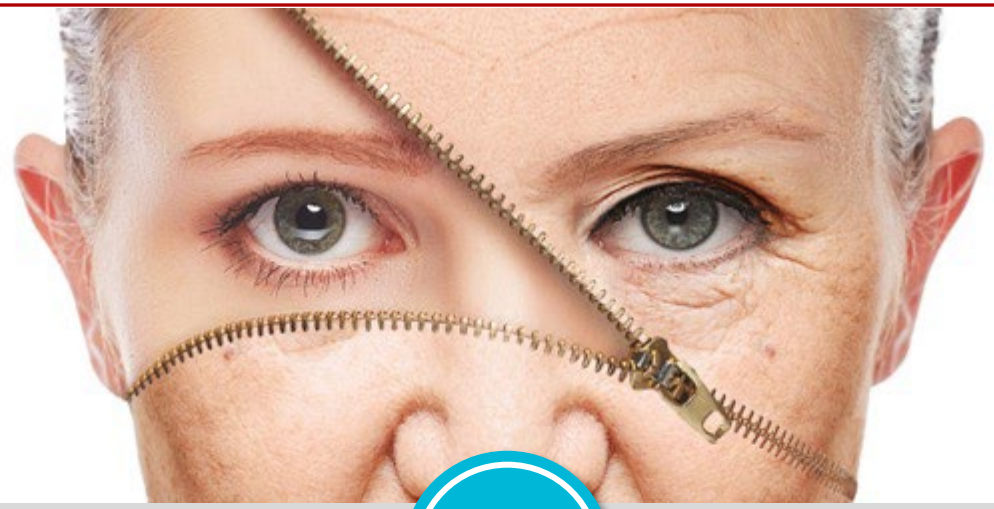
On-going Characterization



- Reversal of fibroblast senescence
- Collagen & elastin markers
- Time to re-epithelialization

Data and image courtesy of Houston Methodist Research Institute, Houston, TX

Exploring Novel RNA-Based Approach for Rejuvenation



HOUSTON Methodist LEADING MEDICINE

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- **Patented RNA technology** for delivery of telomerase enzyme to aged cells
- **Demonstrated reversal of aging** and return of functionality in cells of progeria patients (human model of accelerated aging)

- Patented and proprietary **Spray-On Skin™ Cells technology and device (RECELL)**
- **Expertise in skin** regeneration, including in preclinical models
- Strong track record and expertise in clinical development and commercialization

Patient Funnel and Addressable Market

~8.3M

PEOPLE/Yr

People Who Underwent Facial Aesthetic Procedures Aimed at Improving Skin Tightness, Texture & Evenness in Skin Tone [1]

~1M

PATIENTS/Yr

Target: People Who Undergo Aggressive Facial Lifting & Tightening Procedures[2]

$15 Billion TAM

Sponsored research exploring use of telomerase for molecular reversal of skin cell aging

*1. 2020 Plastic Surgery Statistics Report, 2. 2020 Plastic Surgery Statistics Report (Defined as Facelifts, Ablative Laser, Dermabrasion, Non-Surgical Skin Tightening)
In the U.S., RECELL is approved for acute thermal burns in patients > 18 years. Use of RECELL in other indications is either (1) limited by United States law to investigational use; or (2) otherwise prohibited.

Corporate

avita medical

Financial Overview

(USD in $000s)	12 Months Ended June 30 2018	2019	2020	2021	(Unaudited) 12 Months Ended December 31 2020	(Unaudited) 12 Months Ended December 31 2021
Commercial Sales	929	5,474	14,263	21,483	17,918	25,091
BARDA Sales	-	-	-	7,749	-	7,934
Total Revenue	**929**	**5,474**	**14,263**	**29,232**	**17,918**	**33,025**
Gross Profit	383	4,203	11,290	23,283	**14,660**	**26,921**
BARDA Income	7,734	5,921	3,926	2,055	**2,534**	**1,590**
Cash, cash equivalents and Marketable Securities	10,986	20,174	73,639	110,746	**59,765**	**104,852**

$9.03
Share Price[1]

$225.1 Million
Market Capitalization[1]

$0.0
(Zero) Debt

Analysts

- Matt O'Brien, Piper (U.S.)
- Josh Jennings, Cowen (U.S.)
- Ryan Zimmerman, BTIG (U.S.)
- Brooks O'Neil, Lake Street (U.S.)
- Lyanne Harrison, BofA Global Research (AUS)
- Nicolette Quinn, MorningStar (AUS)
- Chris Kallos, MST (AUS)
- John Hester, Bell Potter (AUS)
- Shane Storey, Wilsons (AUS)

NASDAQ ticker symbol: RCEL

ASX ticker symbol: AVH

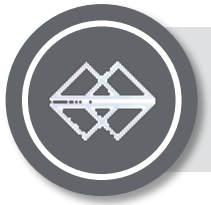
1. RCEL as 2/25/2022

A Global Total of 18 Granted Patents & 24 Pending Applications

ROBUST PROTECTION ACROSS PATENT FAMILIES

Cell Suspension Preparation Technique and Use	Commercial RECELL device, composition of matter, and associated methods of use
Cell Suspension And Use Thereof	Method of preparing cell suspension with exogenous agent to promote wound healing
Systems and Methods for Tissue Processing and Preparation of Cell Suspension Therefrom	Automated system for preparing cell suspension and method of production
Devices, Methods, and Kits for Preparing a Cell Suspension	All-in-one RECELL kit, system, and associated method of use
Methods for Identifying Cell Suspensions with Therapeutic Potential for Skin Regeneration	Method and system for validating the use of a cell suspension for administration to a patient
Bioactive Therapeutic Suspensions with Cellular-Based Supernatant	Bioactive suspension derived from freshly disaggregated tissue, and associated methods of preparation and use

EXPANDING PORTFOLIO TO SUPPORT CURRENT AND FUTURE INDICATIONS



Next Generation RECELL devices to improve ease of use in burns and pipeline indications

Potential to license patented technology for telomerase mRNA that has the potential to reverse aging of skin cells

Potential to license technologies for suspension-based delivery of genetically modified cells, with applications to genetic skin disorders

Robust and Expanding Patent Estate: Expiration from 2022 to 2040

AVITA Medical owns granted patents in USA, China, Japan, Australia, France, Germany, Italy, Spain, United Kingdom, and Hong Kong, as well as pending patent applications in USA, China, Canada, EPO, Brazil, and Hong Kong.

AVITA Leadership Team

Dr. Michael S. Perry
CEO
>30 years experience

Affiliations:
- NOVARTIS
- Schering-Plough
- BAY CITY CAPITAL
- Baxter
- GENETIC THERAPY, INC.

Michael Holder
CFO
>30 years experience

Affiliations:
- ImmuneCyte
- PREMIER
- CAROLINA LONGEVITY INSTITUTE

Erin Liberto
CCO
>20 years experience

Affiliations:
- Allergan
- Johnson & Johnson

Andrew Quick
CTO
>25 years experience

Affiliations:
- Boston Scientific
- AB
- sonova
- SonaMed Corp

Kathy McGee
COO
>25 years experience

Affiliations:
- Shire
- at advanced tissue
- Smith+Nephew

Donna Shiroma
General Counsel
>20 years experience

Affiliations:
- ASCEND THERAPEUTICS A BESINS HEALTHCARE Company Innovators in Women's Health
- PDL BioPharma
- Johnson & Johnson

Value Creation

Recent Key Accomplishments

- Quarter Ending December ’21, Total Revenue Growth of +35% vs Same Quarter Prior Year
- FDA Approval of New Ease of Use RECELL Device
- PMDA Approval of Burns in Japan
- Vitiligo Pivotal Trial: Enrollment Completed
- Soft Tissue Pivotal Trial: Enrollment Completed
- Transitional Pass-Through Payment Application Approved by CMS for Reimbursement in Outpatients
- EB: Initial Proof of Concept for Delivery of Genetically Modified Skin Cells in Suspension
- Telomerase/Rejuvenation: Initial Proof of Concept on Delivery of Reverse-Aged Skin Cells

Projected Key Milestones

• Top Line Results and Vitiligo FDA Submission / Vitiligo Commercial launch • Top Line Results and Soft Tissue FDA Submission / Soft Tissue Commercial Launch	H2 22 / H2 23
• Outpatient Launch • Launch of New ‘Ease of Use’ RECELL Device	H1 22
• IND Enabling Studies (EB & Rejuvenation) • Reimbursement & Launch of Burns in Japan	H2 22

Quarters referenced in calendar year. As of January 1, 2022 Avita Medical is reporting on a calendar year basis.

Risk Factors and Disclosures

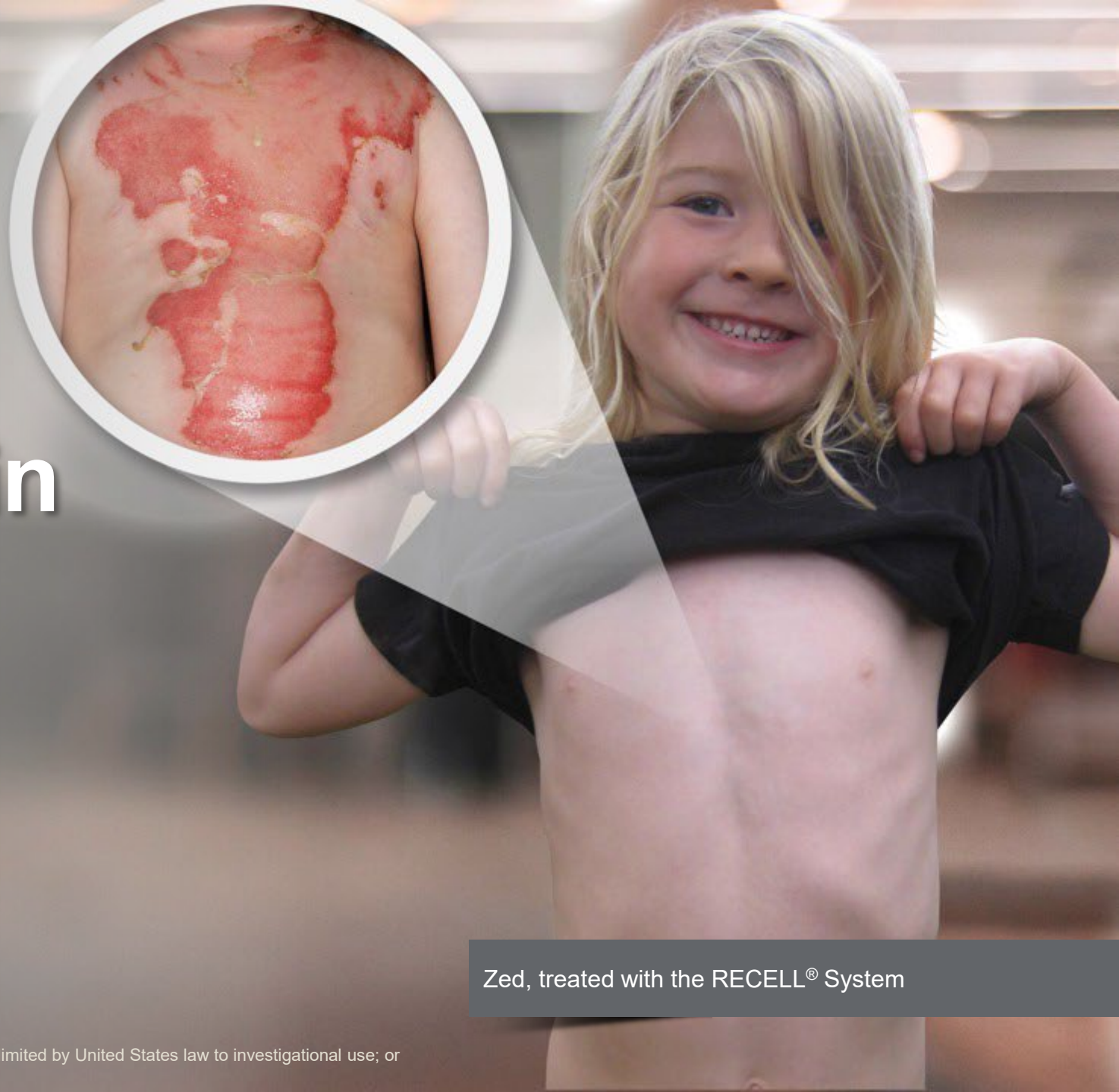
- There are numerous risk factors involved with the Company's business. Some of these risks can be mitigated by the use of safeguards and appropriate systems and controls, but some are outside the control of the Company and cannot be mitigated. Accordingly, an investment in the Company carries no guarantee with respect to the payment of dividends, return of capital or price at which securities will trade. The following is a summary of the more material matters to be considered. However, this summary is not exhaustive. Potential investor should consult their professional advisors before deciding whether to invest.
- Technological Change: Technological change presents the Company with significant opportunities for growth. However, the risk remains that any competitor may introduce new technology enabling it to gain a significant competitive advantage over the Company.
- Reliance on key personnel: The Company's success depends to a significant extent upon its key management personnel, as well as other management and technical personnel including sub-contractors. The loss of the services of any such personnel could have an adverse effect on the Company.
- Competition: The Company competes with other companies in the United States as well as in Australia and internationally. Some of these companies have greater financial and other resources than the Company and, as a result, may be in a better position to compete for future business opportunities. There can be no assurance that the Company can compete effectively with these companies.
- Patent Protection: The patent protection that the Company may obtain varies from product to product and country to country and may not be sufficient, including to maintain product exclusivity. Patent rights are also limited in time and do not always provide effective protection for products and services: competitors may successfully avoid patents through design innovation, the Company may not hold sufficient evidence of infringement to bring suit, or the infringement claim may not result in a decision that the rights are valid, enforceable or infringed. Legislation or regulatory actions subsequent to the filing date of a patent application may affect what an applicant is entitled to claim in a pending application and may also affect whether a granted patent can be enforced in certain circumstances. Laws relating to biotechnology remain the subject of ongoing political controversy in some countries. The risk of changed laws affecting patent rights is generally considered greater for the biotechnology field than in other longer established fields.
- Change in government policy and legislation: Any material adverse changes in relevant government policies or legislation of Australia / United States may affect the viability and profitability of the Company, and consequent returns to investors. The activities of the Company are subject to various federal, state and local laws governing prospecting, development, production, taxes, labor standards and occupational health and safety, and other matters.

Important Safety Information

- INDICATIONS FOR USE: The RECELL® Autologous Cell Harvesting Device is indicated for the treatment of acute thermal burn wounds. The RECELL device is used by an appropriately-licensed healthcare professional at the patient's point of care to prepare autologous RES® Regenerative Epidermal Suspension for direct application to acute partial-thickness thermal burn wounds in patients 18 years of age and older or application in combination with meshed autografting for acute full-thickness thermal burn wounds in pediatric and adult patients. .
- CONTRAINDICATIONS: RECELL is contraindicated for: the treatment of wounds clinically diagnosed as infected or with necrotic tissue, the treatment of patients with a known hypersensitivity to trypsin or compound sodium lactate (Hartmann's) solution, patients having a known hypersensitivity to anesthetics, adrenaline/epinephrine, povidone-iodine, or chlorhexidine solutions.
- WARNINGS: Autologous use only. Wound beds treated with a cytotoxic agent (e.g., silver sulfadiazine) should be rinsed prior to application of the cell suspension. RECELL is provided sterile and is intended for single-use. Do not use if packaging is damaged or expired. Choose a donor site with no evidence of cellulitis or infection and process skin immediately. A skin sample should require between 15 and 30 minutes contact with Enzyme. Contact in excess of 60 minutes is not recommended. RECELL Enzyme is animal derived and freedom from infectious agents cannot be guaranteed.
- PRECAUTIONS: RECELL is not intended for use without meshed autograft for treatment of full-thickness burn wounds. The safety and effectiveness of RECELL without meshed autograft have not been established for treatment of partial-thickness burn wounds: on the hands and articulating joints, >320 cm2, in patients with wounds totaling >20% total body surface area (TBSA). The safety and effectiveness of RECELL with autografting have not been established for treatment of full-thickness burn wounds: on the hands and articulated joints, and in patients younger than 28 days of age (neonates).
- SPECIAL PATIENT POPULATIONS: The safety and effectiveness of RECELL have not been established for treatment of acute thermal partial-thickness burn wounds in pediatric patients younger than 18 years of age.

Revolutionary treatment using a **patient's own skin** for life-changing outcomes

avita medical

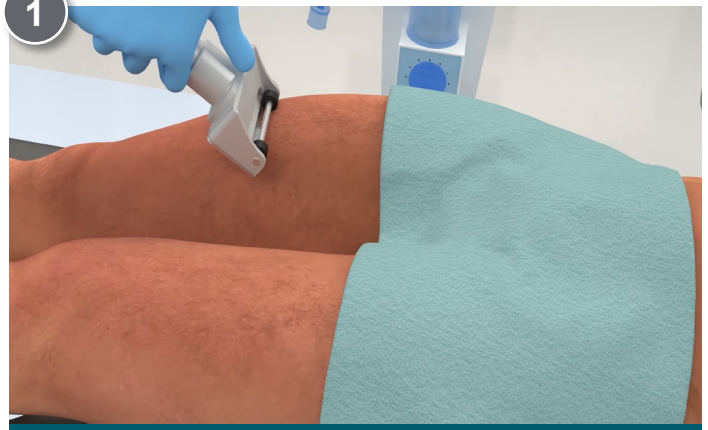


Zed, treated with the RECELL® System

In the U.S., RECELL is approved for acute thermal burns. Use of RECELL in other indications is either (1) limited by United States law to investigational use; or (2) otherwise prohibited.

RECELL Process For Autologous Cell Harvesting and Application

1



HARVEST

2

INCUBATE

3

DISAGGREGATE

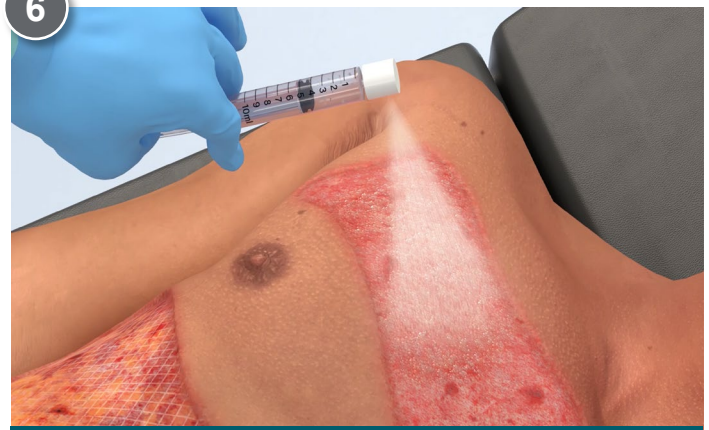
4

RINSE

5

FILTER

6



APPLY

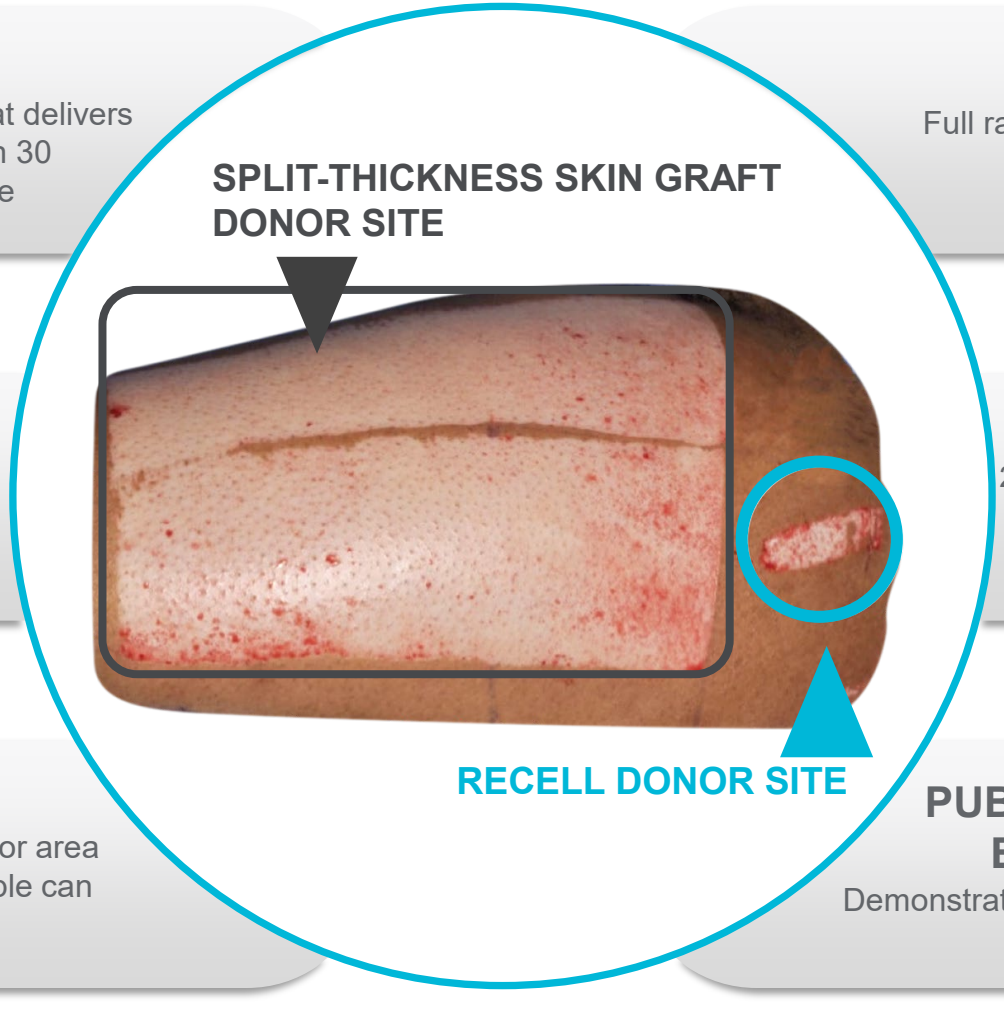
RECELL Spray-On Skin™
Treats 80cm² of Skin from a 1cm² Biopsy

avita medical

AUTOLOGOUS
Cell Harvesting Device that delivers Spray-On Skin Cells within 30 minutes at the point of care

ACTIVATED
Fresh (non-cultured cells) with the "free edge healing cascade"

DONOR SPARING
Treatment area = 80x donor area (credit card size skin sample can treat an entire adult back)



COMPLETE
Full range of skin cell types with re-pigmentation

SAFE & EFFECTIVE
2 randomized controlled trials supporting PMA
1st PMA burn product approval ~20 yrs
10K+ patients worldwide
>150 peer reviewed articles

PUBLISHED HEALTH ECONOMIC DATA
Demonstrating significant savings to the health care system

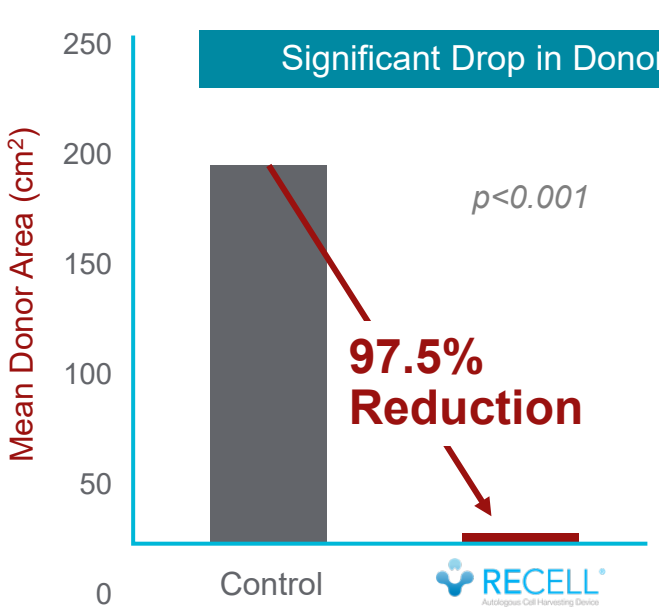
1st Premarket Approval Treatment in Burns in 20 Years

avita medical

Dual multi-center, randomized, controlled premarket approval studies

Pivotal Trial #1 (101 Patients)
RECELL (alone) versus SoC (STSG) in Second-Degree Burns

Published in JBCR and Presented at ABA

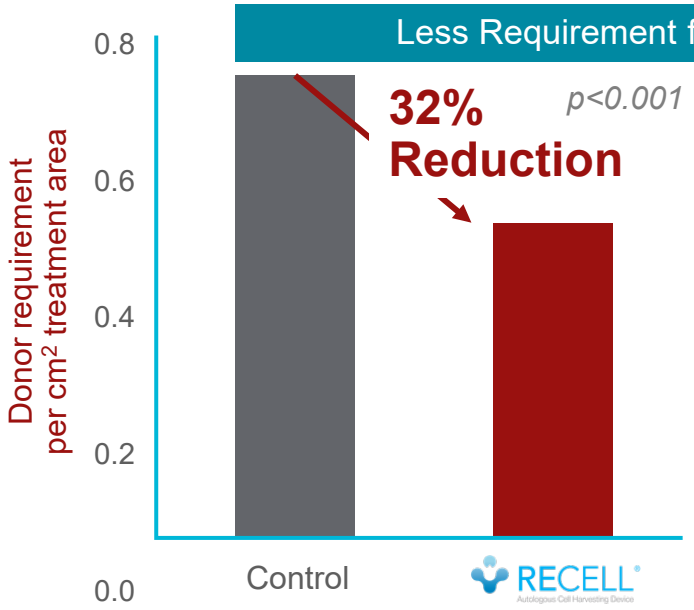


Decrease in donor site pain and scarring

- Significantly less donor site pain (p≤0.0025)
- Significantly better donor site appearance (p≤0.0025)
- Significantly reduced donor site scarring (p≤0.0025)
- Significantly greater incidence of donor-site healing at two weeks (p<0.001)

Pivotal Trial #2 (31 Patients)
RECELL (with widely expanded graft) versus STSG in Third-Degree Burns

Published in Burns and Presented at ABA



Robust outcomes despite less donor skin

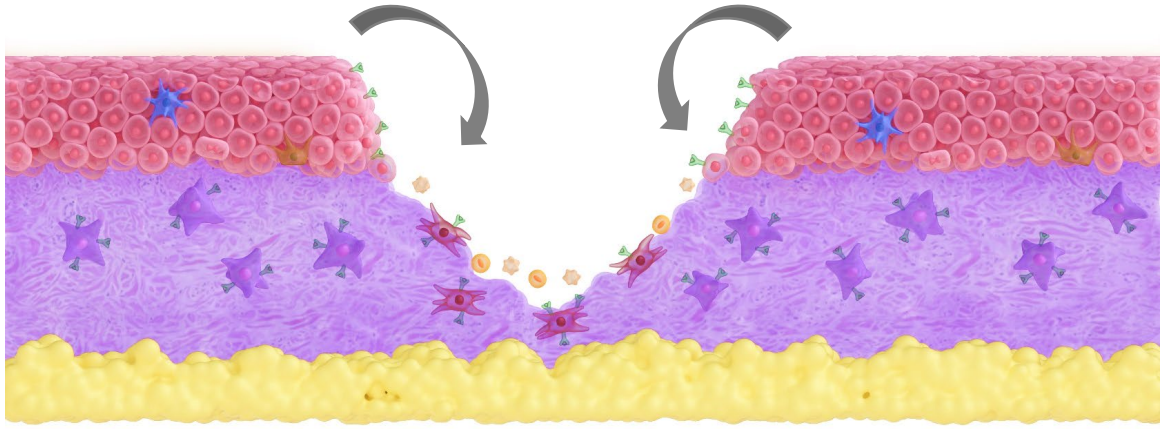
- RECELL System achieved definitive closure comparable to Standard of Care with significantly less donor skin
- At eight weeks post treatment, 92% of the burn sites treated with the RECELL System achieved complete healing versus 85% for the sites treated with the standard of care

Comparable healing and long-term outcomes for burn sites with significantly less donor skin required

RECELL "Free Edge" Advantage

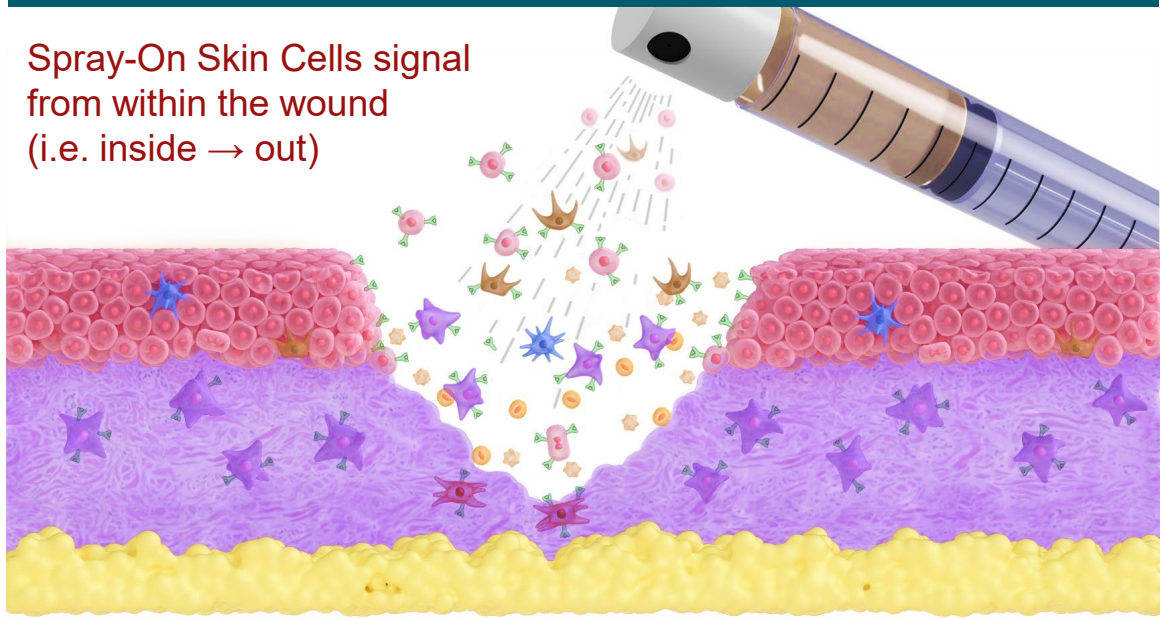
Healing Process without RECELL

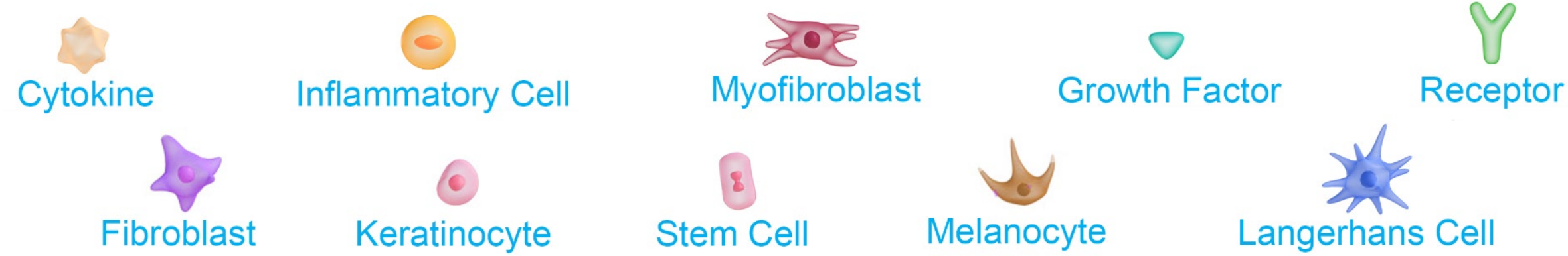
Free edge limits signaling
to wound boundary
(i.e. outside → in)



Healing Process with RECELL

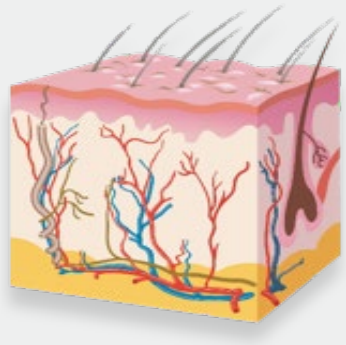
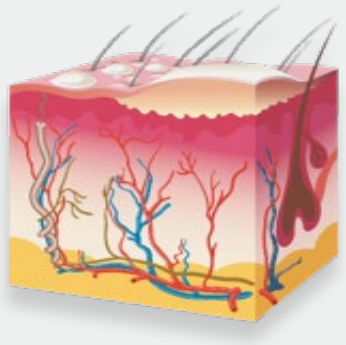
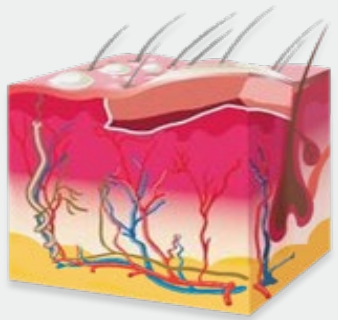
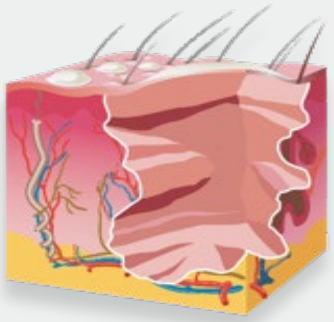
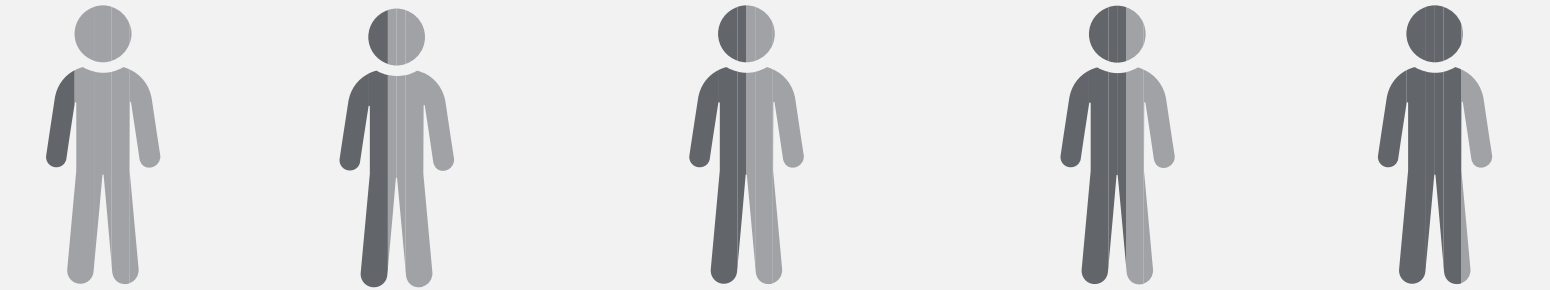
Spray-On Skin Cells signal
from within the wound
(i.e. inside → out)





Skin Injury Framework

RECELL® Autologous Cell Harvesting Device **TARGET INJURY**

	Superficial Wound	Superficial **Partial** Thickness Wound	**Deep Partial** Thickness Wound	**Full Thickness** Wound
Wound Depth				
	1st degree	2nd degree	2nd degree	3rd degree
Wound Size				
	0-9.9%*	10-19.9%	20-29.9%	30-39.9%	40%+

Total Body Surface Area (TBSA) Affected

Adoption Trajectory — **Small / Partial Thickness ← Results / Experience ← Large / Full Thickness**

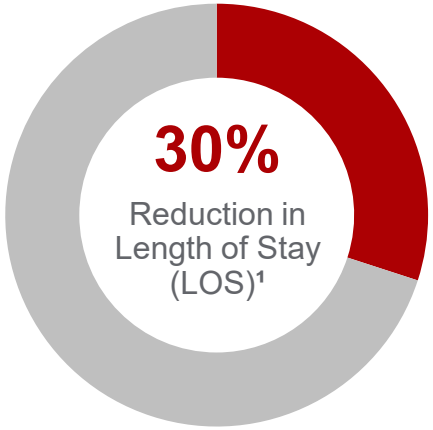
For more information on RECELL's indication for use, please go to www.recellsystem.com.

Published Health Economic Model: Demonstrates Patient and Health Care System Benefits

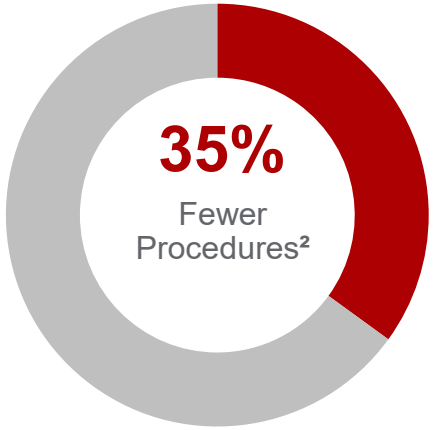
RECELL saves the hospital money in in-patient scenarios where the burn is 10% Total Body Surface Area (TBSA) or greater

Transforming Care

Can reduce costs and accelerate recovery by decreasing the number of painful procedures and length of stay in hospital



Fewer procedures and faster healing times get patients home more quickly



Reduced donor site size and greater meshing ratio enables permanent closure with fewer invasive autograft procedures

Shorter and fewer procedures, decreased length of stay, and reduced resource use translates into burn center savings

VALIDATED MODEL

- 21 abstracts on RECELL health economics since launch
- 17+ Burn Centers contributing to the RECELL abstracts and publications
- Two publications
- Customized Budget Impact calculator
- Leader of health economics in burns

1. Park JH, Heggie KM, Edgar DW, Bulsara MK, Wood FM. Does the type of skin replacement surgery influence the rate of infection in acute burn injured patients? Burns 2013;39:1386-90. https://doi.org/10.1016/j.burns.2013.03.015
2. Kowal, S., Kruger, E., Bilir, P. et al. Adv Ther (2019). https://doi.org/10.1007/s12325-019-00961-2