

MEDICAL IMAGING INNOVATION

Microwave imaging is a truly innovative imaging modality that has disruptive implications for diagnostics, monitoring and the delivery of care in the future

XRAY

1895







ULTRASOUND

1950's



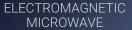


1960's





1980's







NON-DESTRUCTIVE TESTING

Industrial quality control & condition assessment

Microwave frequency 2 - 18 GHz



SECURITY

Whole-body Scanners Security

Millimeter Frequency 10 - 80 GHz

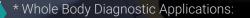


BIOMEDICAL IMAGING

Point of care devices

Microwave frequency 500 MHz - 5 GHz+





Neurological

Stroke | TBI | Cerebral Edema | Brain Tumors | Craniocerebral Shrapnel

Torso

NAFLD / NASH | Pulmonary Edema | Renal Cancer | Congestive Heart Failure

Skin

>> Pressure Ulcers | Burns | Skin Cancer

Microwave imaging has the potential to offer fast, safe and cost-effective functional imaging capabilities

1ST APPLICATION

STROKE & TRAUMATIC BRAIN INJURY

- Stroke is the second leading cause of death world wide with **1 in 6 people** having a stroke in their lifetime ¹
- Traumatic Brain Injury (TBI) is the most frequent cause of death and disability worldwide ²
- There are effective treatments available but they are **time sensitive** with **neurological imaging** a prerequisite to determining effective treatment protocol

Annual burden of over \$105 (USD) Billon in the US alone ³ No widely accessible point-of-care imaging available

Current imaging equipment is stationary & expensive

Many patients are not diagnosed early enough for effective treatment



TYPICAL PATIENT JOURNEY AND TIMELINE

EMvision's opportunity is to bring stoke and traumatic brain injury decision support and monitoring to the patient

Stroke Onset

15 mins to 2.5 hours



Pre-Hospital Triage (2nd Generation)

Speed up pre hospital triage and create opportunity for earlier treatment choices pre-hospital in a manner that does not currently exist today.



< 2.5 hours



Hospital ED

Standard Hospital (Neuroimaging and Thrombolysis capable)

OR

Comprehensive Stroke Centre (Clot Retrieval and Neurosurgery capable)

< 3 hours



Image Studies

Urgent Non-Contrast CT Scan

CT Angiograph

Determine aetiology: haemorrhagic including cause/source or ischaemic including "large vessel occlusion"

< 24 hours



Treatment Plan

Medical (supportive. thrombolysis, reverse blood thinners: depending on cause)

OR

Interventional (including clot retrieval or neurosurgery)

<24 hours - 3 weeks



Acute Post Treatment Care (1st Generation)

In ICUs, Stroke and Neurology wards the device offers a bedside monitoring capability that does not currently exist for the progress of strokes, and response to treatments.

Monitoring for complications, extension or secondary bleeding

<3 weeks - 3 years+



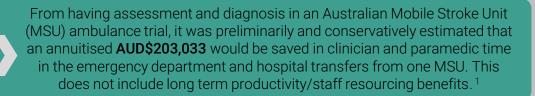
Rehabilitation

Inpatient rehabilitation units

Outpatient units

Skilled nursing facilities

Home-based programs



The incremental 30-day cost of care for an in-hospital stroke of average severity can be estimated at US\$17,500. With an estimated 35,000 to 75,000 in-hospital strokes in the United States each year, the lifetime direct and indirect costs for these inhospital strokes would be approximately 4.9 billion to 10.5 billion dollars. ²

EMVISION'S BRAIN SCANNER



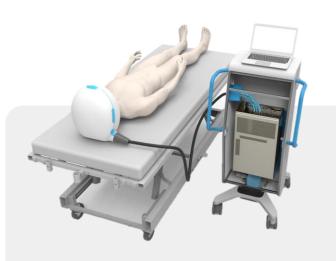








The Company aims to develop a clinical device that delivers these features



CLINICAL TRIAL UNIT



EMvision is in the late stages of developing its Clinical device to be used in its pilot clinical trail.

This device will be used to collect data from patients presenting with acute stroke to refine the imaging system and its algorithms.



HOSPITAL **COMMERCIAL UNIT**



EMvision's 1st generation commercial device aims to offer a bedside monitoring capability that does not currently exist in ICUs, Stroke and Neurology wards

Monitoring for; the progress of strokes, and response to treatment, complications, extension or secondary bleeding



AMBULANCE COMMERCIAL UNIT

Defibrillator sized portable device expected to provide rapid stroke and TBI decision support in ambulances.

Patients having a severe stroke could be identified and transported directly to specialist hospitals for intervention such as clot retrieval.

TECHNOLOGY OVERVIEW

Array of antennas send pulses of low-power electromagnetic waves into the head



Waves penetrate tissue in a non-ionizing and harmless manner and get scattered based on the electrical properties of tissue



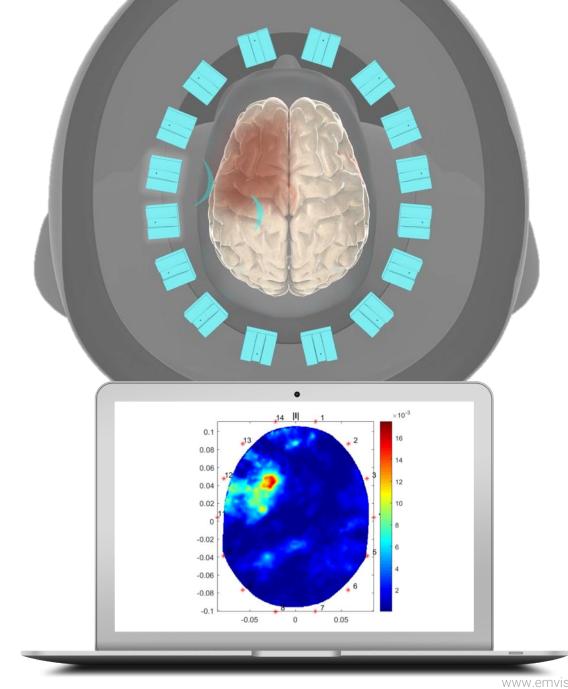
Sensors in the helmet detect these interactions to identify and locate unhealthy tissue



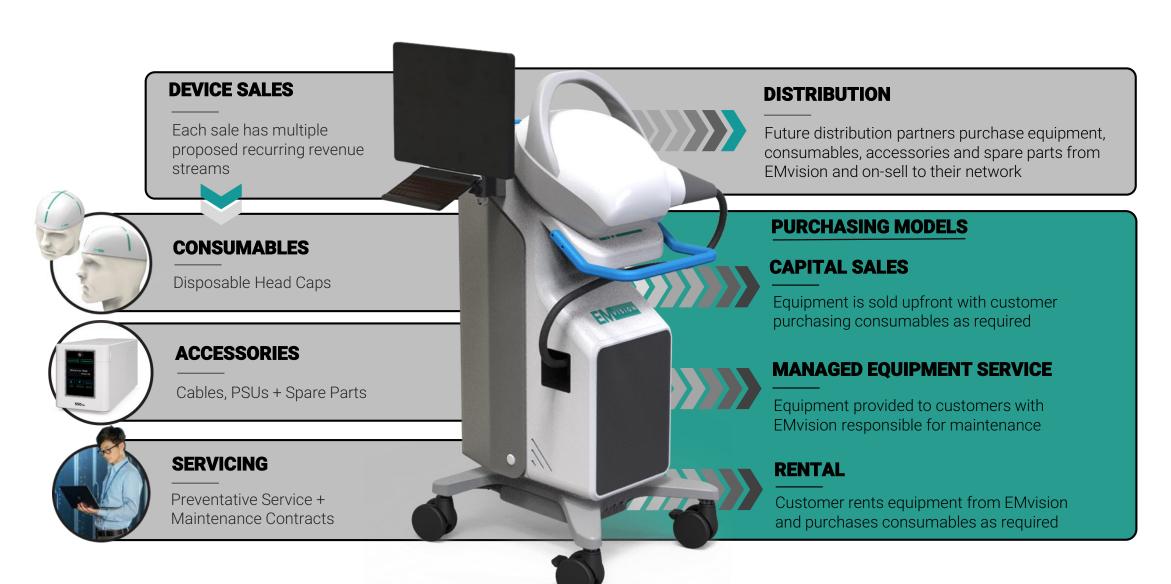
Novel multi-algorithmic AI reconstructs the image



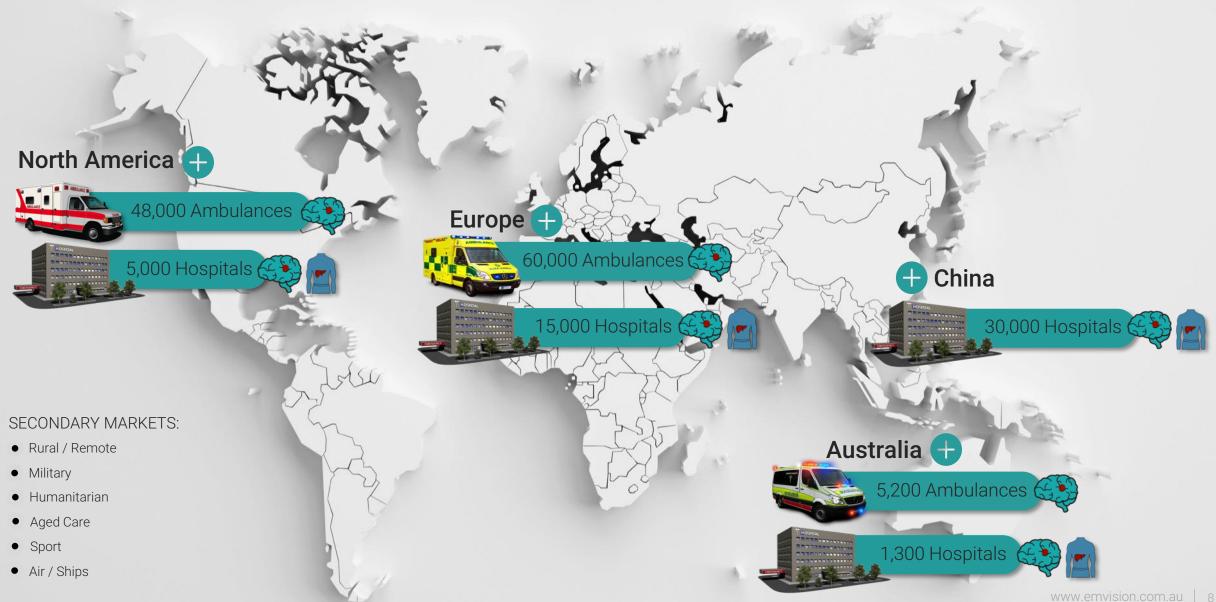
3D images of the brain are displayed on a standard laptop or tablet



ATTRACTIVE REVENUE MODEL



KEY ADDRESSABLE MARKETS



PARTNERS & COLLABORATORS



Awarded EMvision a \$2.6M CRC-P non-dilutive cash grant, over three years, in Dec'17.

Secured key academic, clinical and industry partners, whom contribute a further \$900,000 non-dilutive cash and ~\$5M of in-kind contributions and resources to the brain scanner program



Developer of EMvision's IP, CRC-P partner, and Australia's most successful commercialisation university with more than US\$15.5 billion in gross product sales from UQ licenced technologies.

Over 30 researchers at UQ across software, mechanical and electrical engineering advancing EMvision's imaging modality.



GE Healthcare is the \$19 billion healthcare business of GE (NYSE:GE) and a leading global manufacturer and distributor of imaging modalities.

GE Healthcare have partnered with EMvision in a CRC-P program providing **cash and in-kind expertise commitment** towards EMvision's brain scanner program.



EMvision is a key commercial collaborator with the Australian Stroke Alliance who are looking to deploy portable imaging technologies for pre-hospital stroke triage.

Working towards a Medical Research Future Fund (MRFF) Stage 2 grant pledged at \$50 million or more per group



Strategic collaboration with Keysight Technologies Inc. (NYSE:KEYS) via MOU to collaborate on the development of personalized Vector Network Analyser (VNA) units for the healthcare market.

VNA's are a key component in EMvision's brain scanner and allow for accurate measurement of the signals transmitted and received

Princess Alexandra Hospital

BRISBANE • AUSTRALIA

Highly regarded hospital with world leading neurology, radiology and critical care experts.

EMvision's CRC-P partner and pilot-clinical trial site where data will be collected from patients with diagnosed ischaemic and haemorrhagic stroke, with confirmatory CT and/or MRI images

PILOT-CLINICAL TRIAL ROADMAP

Q1-Q2 CY 2019

- ISO 13485
 Certification
- Successful Healthy
 Human Trials
- Clinical trial protocol designed, clinical advisors appointed and ethics clearance obtained
- Successful hospital site evaluation

Clinical unit bill of materials (BOM) review, release and procurement

Commence fabrication and assembly of clinical units (x2)

Verification and testing of clinical trial units prior to hospital delivery

Delivery of clinical trial units to hospital

Q4 CY 2019

> Princess Alexandra Hospital BRISBANE • AUSTRALIA

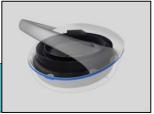
Clinical site initiation visit and training of site staff for trial commencement

Commence data collection from patients with diagnosed ischaemic and haemorrhagic stroke, with confirmatory CT and/or MRI images



Actual headset and antenna array

Concept Image of headset in outer skin





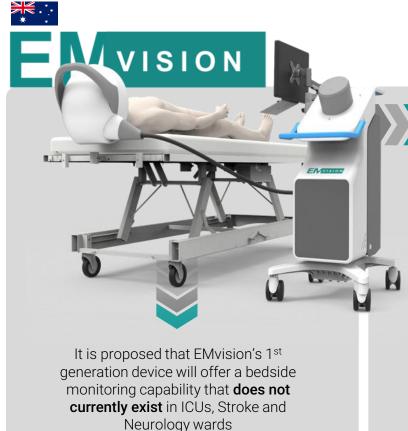
Concept image of clinical trial unit

Concept image of headset with absorbing material



POINT-OF-CARE DEVICE LANDSCAPE

EMvision is setting out to capture a niche with superior ease of use and image reconstruction



POTENTIAL CLINICAL ADVANTAGES:

Multi-algorithmic Image Fusion approach incorporating radar based, tomography and statistical techniques for rapid image reconstruction to provide more valuable clinical information

Fast, safe, cost effective and can provide powerful functional imaging capabilities in real-time and in three dimensions

Portable, light and easy to use, minimising operator/patient variability



"Strokefinder MD100 is a device for decision-support to assist in clinical evaluation and triage of suspected intracranial injuries in the acute situation "





"The EMTensor Brain Scanner could provide rapid screening of the brain in adults to provide information allowing clinicians to assess and monitor disorders caused by impaired cerebral circulation, such as hemorrhagic or ischemic strokes."





"The Visor™ System is a noninvasive wireless neurological device intended for use as an aid in the assessment of fluid volume asymmetry between the cerebral hemispheres in adult patients undergoing neurologic assessment."



"The Lucid Robotic System is an autonomous all-in-one robotic neurovascular ultrasound device designed to non-invasively search, measure and display objective brain blood flow information in real-time."





Response to Treatments



Subsequent Strokes & Bleeding

■ VISION ≋

PRODUCT PIPELINE

BRAIN SCANNER Identify and monitor stroke and traumatic brain injury



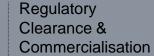


TORSO SCANNER

Identify the severity and monitor the progression of liver disease



Device Discovery & Concept	Preclinical Research & Prototype	Healthy Human Trials	Ethics Clearance	Pilot Clinical Trial	Pivotal Clinical T
				Q4 2019	2020
	Q3 2019				







Department of Health Therapeutic Goods Administration



Calendar Year

www.tuv.com

Management System EN ISO 13485:2016



The indicative timetable is a guide of EMvision's intentions at the date of this presentation only. EMvision reserves the right to vary the timetable at its discretion, and further notes that the above timings are subject to change due to circumstances outside of its control. It is EMvision's intention to apply for the relevant regulatory clearances as part of its commercialisation strategy at the appropriate point in the development cycle of both the brain and torso scanner, however, EMvision notes there is no guarantee that the requisite clearances will be acquired in a timely manner, or at all.

2nd APPLICATION

& MONITORING LIVER DISEASE

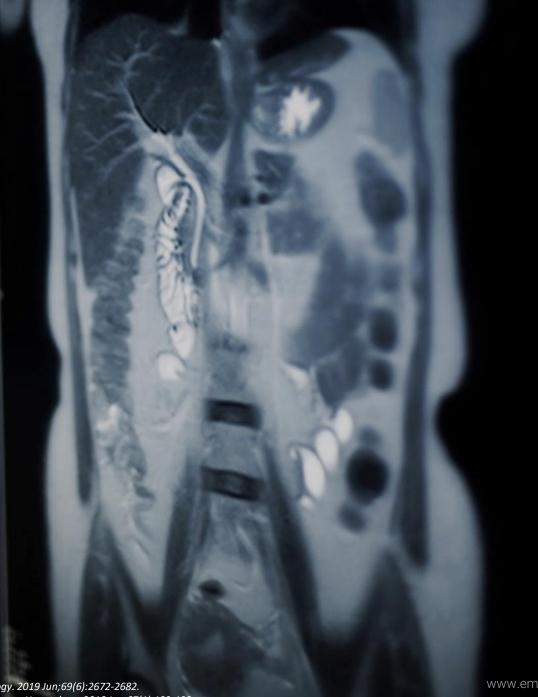
Over 1 BILLION people globally have liver disease



1 in 4 people worldwide have a variant known as non-alcoholic fatty liver disease (NAFLD) 1



Approximately 20% of NAFLD cases are classified as non-alcoholic steatohepatitis (NASH) which can lead to fibrosis, cirrhosis, cancer and mortality ²



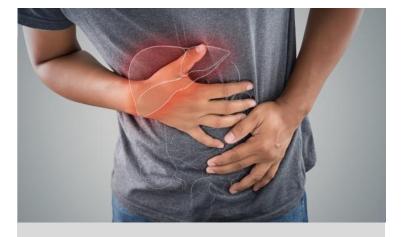
EARLY DETECION AND MONITORING OF LIVER DISEASE



GLOBAL EPIDEMIC FUELED BY OBESITY RATES AND DIABETES

The prevalence of NAFLD is constantly increasing (from 15% of the population in 2005 to 25% in 2010) ¹

The major focus of clinical care is discerning those at highest risk of progressive liver disease. There is an estimated annual burden associated with NAFLD of US\$103 billion in the USA alone²



ZERO PRACTICAL DIAGNOSTIC AND MONITORING SOLUTIONS

Invasive, painful and costly surgical biopsy

or

Largely inaccessible expensive high-end MRIs



THE BENEFITS OF APPLYING EM MICROWAVE IMAGING

Quantify fat in the liver in a manner not possible today

Could be used non-invasively at the point of care

Fraction of the cost of biopsy or MRI

EMVISION TORSO SCANNER DEVELOPMENT

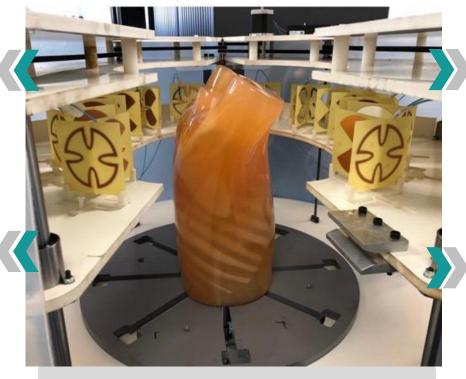
EMvision is exploring the feasibility of a non-invasive and cost-effective Torso Scanner to identify the severity and monitor the progression of NAFLD and NASH

TISSUE CHARACTERISATION

Tissue characterisation work to inform algorithm development has advanced with samples now collected from several patients with pathology results expected near term

TEAM EXPANDED

The UQ research team has been bolstered with the addition of four experts to the project in the fields of machine learning, classification, signal processing and antenna design



The Torso Scanner system would utilise the core technology being developed for stroke imaging with custom algorithms and hardware (antennas and switching network)

PHANTOM FABRICATED

An enhanced torso phantom has been fabricated to emulate different stages of fatty liver disease in a lab environment. This phantom is being used to assist in verifying algorithm development

NEW ANTENNAS DEVELOPED

A new generation of smaller resonance based reflector antennas have also been developed for testing



01

Ensuring that you have the **best** application. Don't try and get it to do everything.

Niche is good.

02

Selecting the right clinical outcomes for studies especially for regulatory submissions

03

The right regulatory path.
As per #1 don't bite off
more than you can chew

04

Having a reimbursement strategy defined **well ahead of time.**

05

Ensure that you understand your customer.

06

Don't build a global sales team before you are **well developed** as a company

TEAM

Significant experience developing and commercialising medical devices



Dr Ron Weinberger Chief Executive Officer

Former Exec Director / CEO of Nanosonics (ASX: NAN), \$1.5BN market cap company

20 yrs experience developing and commercialising medical devices



John Keep Executive Chairman

Former CEO of Queensland Diagnostic Imaging (\$109M Trade sale to Mayne Pharma)

Over 30 vrs senior executive leadership and M&A experience



Scott Kirkland **Executive Director**

Co-founder of EMvision Medical Devices Ltd

Experienced corporate affairs, capital markets and technology sales executive



Prof Stuart Crozier Clinical Development Advisor

Co-inventor of underlying technology

Globally renowned for MRI advancements (70% installed hold Stuart's patents)



Robert Tiller Product Design & **Development Executive**

CEO and Founder of Tiller Design (product developer for ResMed and Nanosonics)

25 yrs experience in medical device design, development and commercialisation



Geoff Pocock Non-Executive Director

Former Managing Director / Co-Founder of Hazer Group (ASX: HZR)

20 yrs experience commercialising emerging technologies and capital markets



Tony Keane Non-Executive Director

Over 30 years finance experience in business, corporate and institutional banking

Advisory Board and NED roles including ASX 200 company National Storage REIT (ASX:NSR)



Ryan Laws Non-Executive Director

Co-founder of EMvision Medical Devices Ltd

Experienced corporate advisor & investor



Emma Waldon Company Secretary

Chartered Accountant

Diverse capital markets & corporate governance experience



Dr. Konstanty Bialkowski Head of Tech Development

Co-inventor of underlying technology

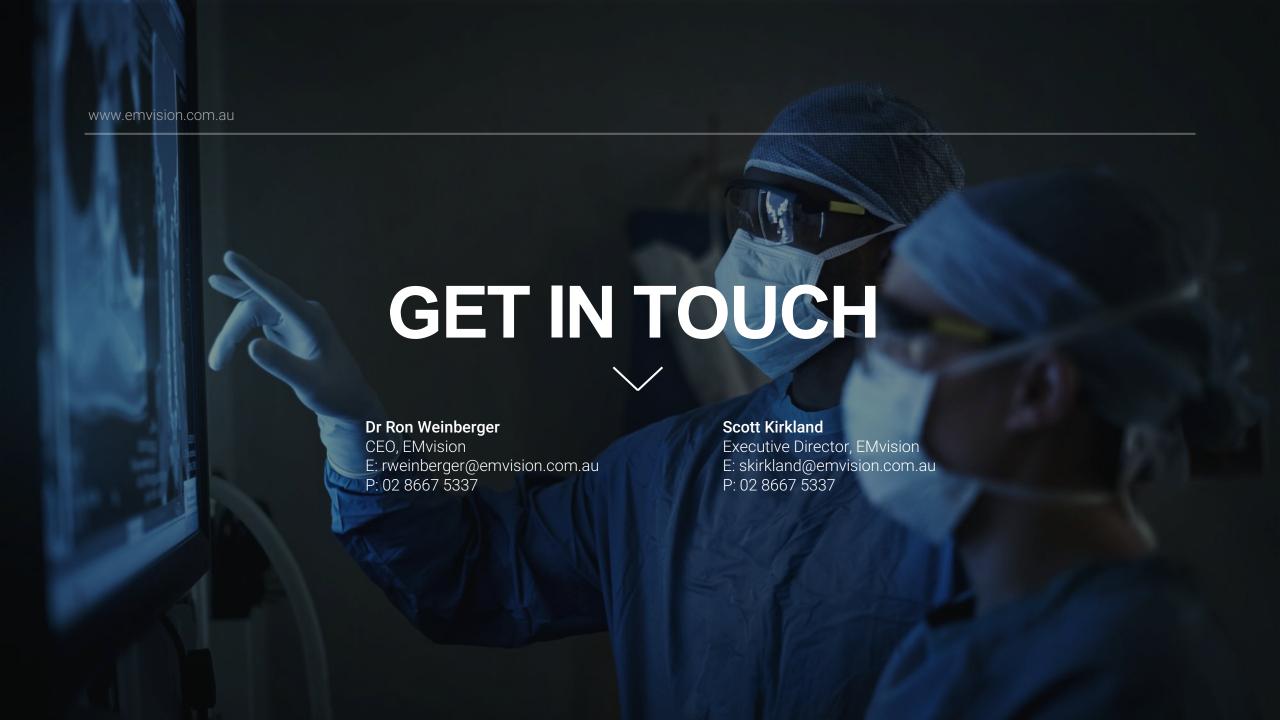
Expert in near-field biomedical radar, microwave imaging and signal processing techniques.



Ruth Cremin Head of Quality & Regulatory Affairs

Former Head of Quality and Regulatory at Nanosonics (ASX:NAN) and Snr Regulatory Specialist at Cochlear (ASX:COH)

Multiple successful FDA, TGA and CF mark clearances



DISCLAIMER

This presentation has been prepared by EMvision Medical Devices Limited ("EMvision" or "the Company"). This presentation is not a financial product or investment advice or recommendation, offer or invitation by any person or to any person to sell or purchase securities in EMvision in any jurisdiction. This presentation contains general information only and does not consider the investment objectives, financial situation and needs of individual investors.

Investors should make their own independent assessment of the information in this presentation and obtain their own independent advice from a qualified financial adviser having regard to their personal objectives, financial situation and needs before taking any action. No representation or warranty, express or implied, is made as to the accuracy, completeness, reliability or adequacy of any statements, estimates, opinions or other information, or the reasonableness of any assumption or other statement, contained in this presentation. Nor is any representation or warranty (express or implied) given as to the accuracy, completeness, likelihood of achievement or reasonableness of any forecasts, prospective statements or returns contained in this presentation.

Such forecasts, prospective statements or returns are by their nature subject to significant uncertainties and contingencies, many of which are outside the control of EMvision. To the maximum extent permitted by law, EMvision and its related bodies corporate, directors, officers, employees, advisers and agents disclaim all liability and responsibility (including without limitation any liability arising from fault or negligence) for any direct or indirect loss or damage which may arise or be suffered through use or reliance on anything contained in, or omitted from, this presentation.

An investment in EMvision securities should be considered speculative and is subject to investment and other known and unknown risks, some of which are beyond the control of EMvision. EMvision does not guarantee any rate of return or the absolute or relative investment performance of EMvision securities. The distribution of this presentation including in jurisdictions outside Australia, may be restricted by law. Any person who receives this presentation must seek advice on and observe any such restrictions.