



Disclosures

- BD/Bard – Speaker’s bureau
- Penumbra – Speaker’s bureau
- Boston Scientific – MAB
- Abbott – Speaker’s bureau
- Biotex – Speaker’s bureau
- ICHOR – Speaker’s Bureau



iCHOR Vision

Mechanical Thrombectomy using a proven mechanism of action that is easy and highly predictable

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.

1) 7F Arterial Clot Removal (7F)

2) 14F Venous Clot Removal (14F)

Occluded Bypass Grafts Embolectomy Post Atherectomy Tibial Debris

The iSWEEP Simplified Approach 1,2,3

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

- Non-surgical therapy
- Non-drug therapy
- Arresting flow avoids blood loss & distal embolization
- Designed to fit all anatomical vessels (large, small, bean oval, flat)
- ALWAYS maintain sheath / wire access
- Avoids scoring 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 to arrest blood flow and provide access to the vessel.

STEP 2: CROSS THE CLOT
The guide catheter with funnel will capture and remove blood clots.

STEP 3: SWEEP & ASPIRATE
Compliant (gentle) balloon catheter is deployed and retracted while aspirating, sweeping the clot into the funnelled guide catheter for removal.

Recent FDA Market Clearance

7F Arterial & 14F Venous Peripheral Indications

July 18, 2024

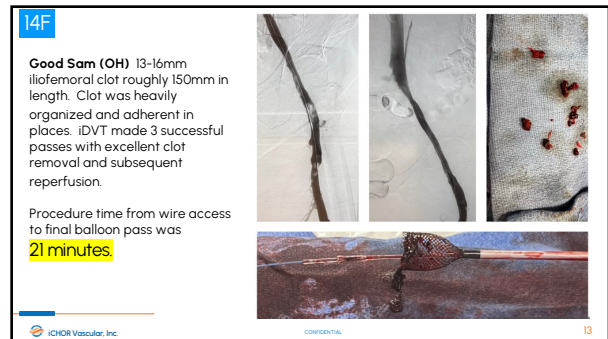
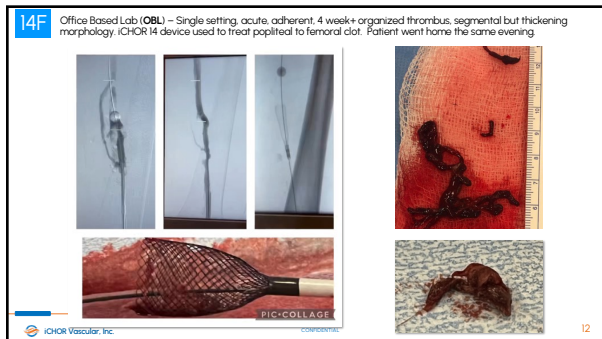
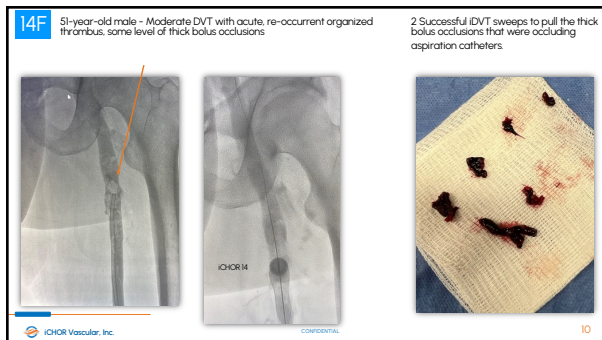
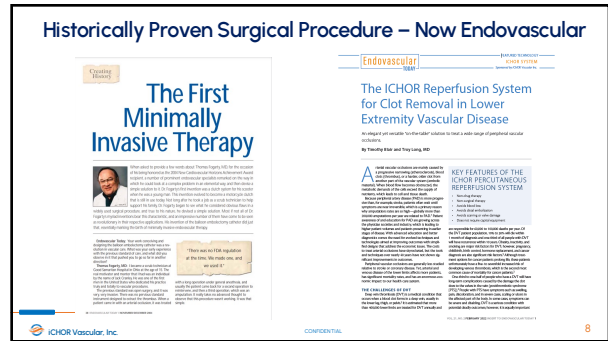
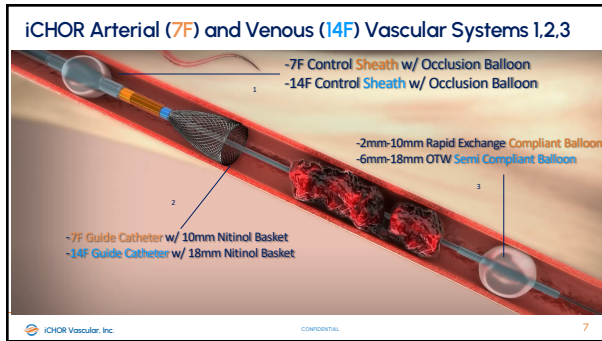
ICHOR Vascular, Inc. (ICBOR)
15 Brooks Way
Parsippany, NJ 07054
400 Highway 149 South
Suite 100
Middletown, Massachusetts 01426

U.S. FOOD & DRUG ADMINISTRATION

Regulation Number: 21 CFR 870.1150
Regulation Name: Embolectomy Catheter
Regulatory Class: Class II
Product Code: Q075
Dated: December 12, 2023
Revised: December 12, 2023

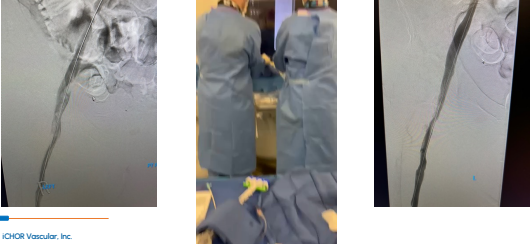
U.S. FOOD & DRUG ADMINISTRATION

Regulation Number: 21 CFR 870.1150
Regulation Name: Embolectomy Catheter
Regulatory Class: Class II
Product Code: Q075
Dated: August 3, 2023
Revised: August 1, 2023



14F St Anthony's (OK) 14 mm iliofemoral clot ~100 mm in length. Clot was segmental, organized and adherent in places. iDVT made 2 successful passes with excellent clot removal and subsequent reperfusion.

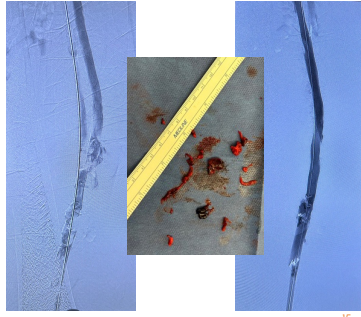
- Procedure time from wire access to final balloon pass was less than **20 minutes**



ICHOR Vasculor, Inc. 14

14F St Anthony's (OK) CFV, FV, and Popliteal disease treated 15mm to 10mm. Moderate, segmental clot morphology starting to organize. iDVT made 4 successful passes with excellent clot removal and subsequent reperfusion.

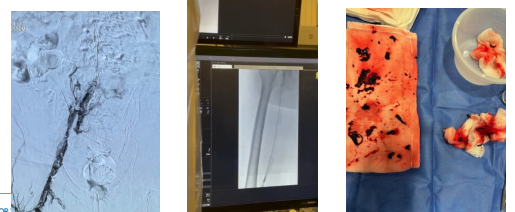
Procedure time from wire access to final balloon pass was less than **30 minutes** including POBA 10mmx60mm



ICHOR Vasculor, Inc. CONFIDENTIAL 15


14F Lakeland Regional (FL) 12mm popliteal disease to 15mm iliac disease. ~100 mm in length with heavy clot burden throughout. Patient had "no IVC" which was genetic, and lead to tremendous collateral flows coming off the common femoral and iliac veins. Clot was organized and adherent. iDVT made 4 successful passes with excellent clot removal and subsequent reperfusion.

- Procedure time from wire access to final balloon pass was less than **20 minutes**



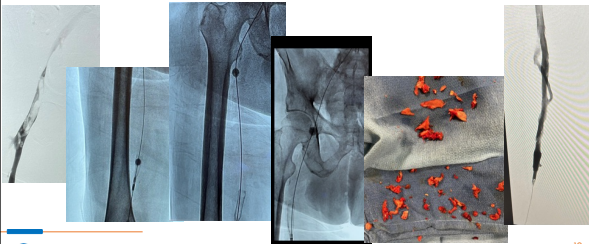
ICHOR 16

14F St Anthony's (OK) Iliac to Popliteal disease treated 14mm to 12mm vessels. Heavily organized clot morphology. iDVT made 5 successful passes with excellent clot removal and subsequent reperfusion. Procedure time from wire access to final balloon pass was less than **20 minutes**.



ICHOR CONFIDENTIAL 17

14F Memorial (FL) Iliac to Popliteal disease treated 14mm to 12mm vessels. Heavily organized clot, chronic in areas. iDVT made 8 successful passes with excellent clot removal and subsequent reperfusion. Procedure time from wire access to final balloon pass was less than **40 minutes**. Successful follow on POBA and Venous stenting.



ICHOR Vasculor, Inc. 18

Large Animal Histopathology Study


Mechanism of Action: Compliant Balloon vs Metal Scraping

Histopathology Protocol Summary

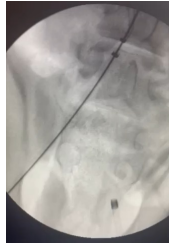
- Healthy swine IVC vessels treated according the IFUs with equal number of retractions (4 pull-backs)
 - Mechanical Thrombectomy
 - iCHOR Vascular 14F IDVT System (left)
- Vessels will be harvested, treated, and shipped overnight to an independent pathology lab
- Histopathology lab is blinded to the study protocol and methods
 - Histopathology pictures and interpretation

iCHOR Vascular, Inc. CONFIDENTIAL 20


MT Sweep 1



MT Sweep 4




Post Venogram




iCHOR Vascular, Inc. CONFIDENTIAL 21


iCHOR Sweep 1



iCHOR Sweep 4



Post Venogram



iCHOR Vascular, Inc. CONFIDENTIAL 22

Histopathology – 24 Hour Post Procedure

A Non-RIP In Vivo Study, Comparative Multicenter Evaluation Using the iCHOR IDVT System Compared to the Best-Of-Class Filter Device

Results:
 Intraluminal fibrin thrombi with inflammation and necrosis were present in the right vein (MT) while the left vein (iCHOR vessel) did not have thrombi but demonstrated changes included mild to moderate neointimal hyperplasia as the primary lesion. In general, intraluminal fibrin thrombi with significant inflammation and necrosis were present in the right vein (MT) while the left vein (iCHOR vessel) did not have thrombi and changes included mild to moderate neointimal hyperplasia as the primary lesion.

Both devices had good procedural integrity and durability.

iCHOR Vascular, Inc. CONFIDENTIAL 23

Histopathology Summary

- Healthy swine IVC vessels were treated according the IFUs with equal number of retractions (4 pull-backs)
- Both devices demonstrated good procedural integrity and durability
- Vessels were harvested, treated, and shipped overnight to an independent, blinded pathology lab for analysis and reports.

>24 hours post treatment:

- MT treated vessels had significant fibrin thrombi, significant inflammation, and necrosis present.
- iCHOR treated vessels showed no thrombi and only moderate neointimal hyperplasia.

Discussion:

- Are metal dragging tools causing unnecessary inflammation and damage to some patients?
- Are there methods to treat many patients more effectively without drug, surgical, or post treatment thrombi/necrosis?
- More needs to be done to understand the vessel histopathology of metal dragging / cutting tools in otherwise healthy vessels.

iCHOR Vascular, Inc. CONFIDENTIAL 24

iCHOR NEW KIDS ON THE BLOCK? HISTORY REPEATING ITSELF?



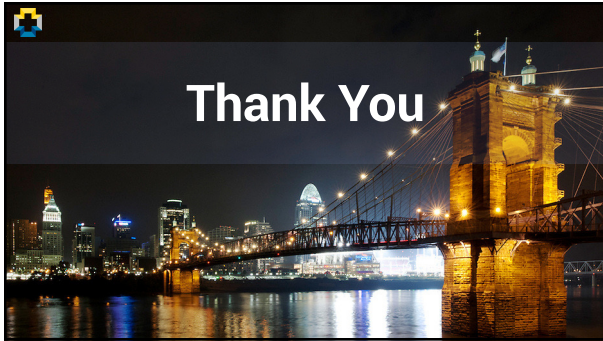
-7F Guide Catheter w/ 10mm Nitinol Basket
-14F Guide Catheter w/ 18mm Nitinol Basket

Control Sheath w/ Occlusion Balloon
Control Sheath w/ Occlusion Balloon

-2mm-10mm Rapid Exchange Compliant Balloon



iCHOR Vascular, Inc. CONFIDENTIAL 25



WireWatch

The WireWatch section contains several images and diagrams. On the left, a photograph shows a surgical team in an operating room with a patient on a table covered in blue drapes. On the right, there are two photographs: the top one shows a close-up of several circular blue markers with white text, and the bottom one shows a surgical table with blue drapes and various instruments. Below these are two diagrams: the left one shows a circular marker with a wire loop, and the right one shows a circular marker with a wire loop and a small rectangular component. Text labels are present: "Standard High Definition" and "Standard Low Definition" on the left diagram, and "Standard Marker" and "Standard Marker" on the right diagram.