



HYPERFINE

Defining the Future of Life-Saving Diagnostics at the Point of Care

Corporate Presentation | March 23, 2022

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Forward Looking Statements

This presentation includes forward-looking statements within the meaning of the federal securities laws, which are made pursuant to the Safe Harbor Provisions of the Private Securities Litigation Reform Act of 1995. Any statements contained in this call that relate to expectations or predictions of future events, results, or performance are forward-looking statements. All forward-looking statements, including, without limitation, those relating to our operating trends and future financial performance, the impact of COVID-19 or geo-political conflict such as the war in Ukraine, on our business and prospects for recovery, expense management, expectations for hiring, physician training and adoption, growth in our organization, market opportunity, commercial and international expansion, regulatory approvals, and product development are based upon our current estimates and various assumptions. These statements involve material risks and uncertainties that could cause actual results or events to materially differ from those anticipated or implied by these forward-looking statements. Accordingly, you should not place undue reliance on these statements. For a list and description of the risks and uncertainties associated with our business, please refer to the “Risk Factors” section of our S-1 filed with the Securities and Exchange Commission on January 24th, 2022.



Today, brain diagnostics are single point-in-time and delay the time from door to discharge.



Our mission is to transform healthcare by creating access to life-saving diagnostics and actionable data at the patient bedside.

HYPERFINE

The Hyperfine Ecosystem

Democratizing **Imaging**, **Sensing**, and **Guided Intervention** to cover the care continuum

Imaging

(FDA cleared)



Sensing

(in development)



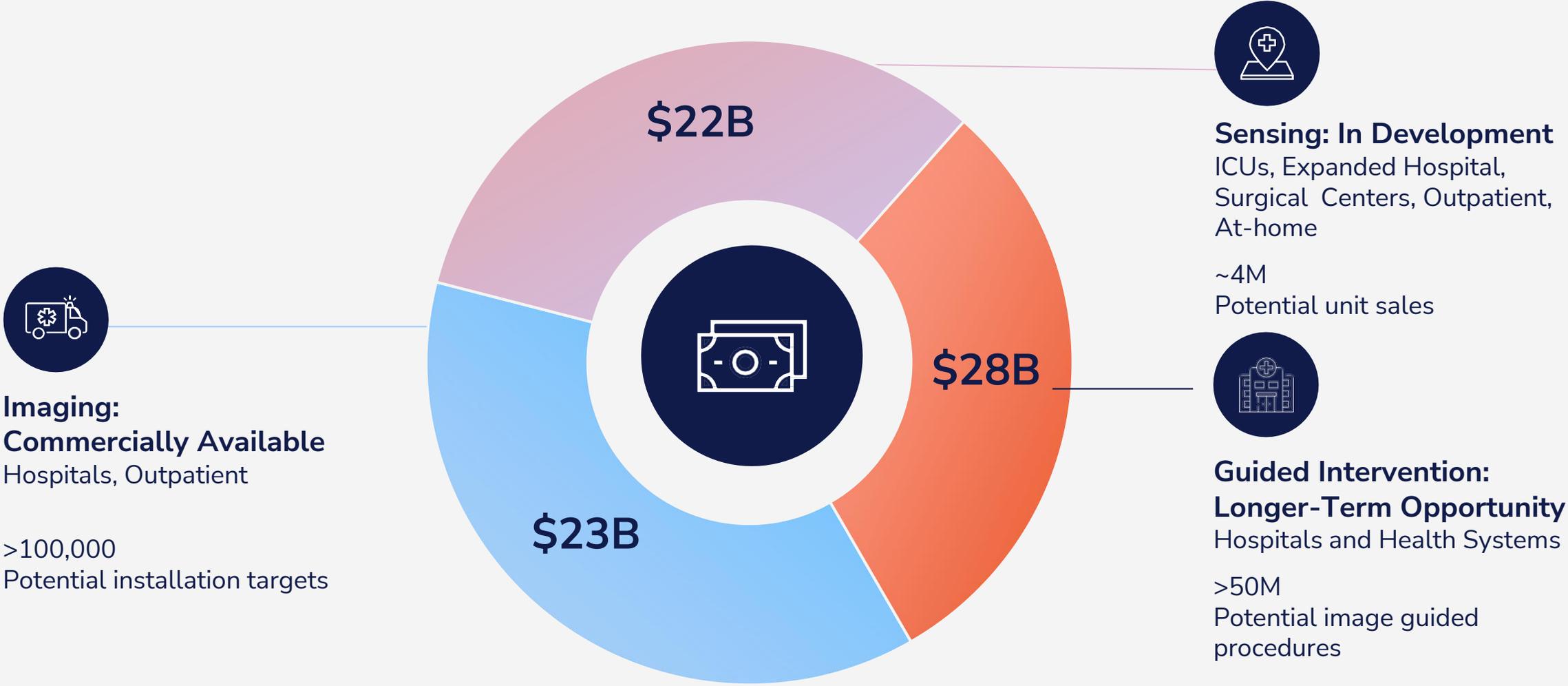
Intervention

(exploratory)



A full ecosystem solution: Hardware, software, consumables and applications powered by artificial intelligence

Imaging, Sensing, and Guided Intervention are Large Markets Poised for Disruption



We are Transforming Medical Imaging with Swoop®



MRI 1.0
1980



MRI 2.0
1990



MRI 3.0
FDA Cleared 2020

Swoop® is the Next Generation of MRI



Patent protected noise cancellation system enables clinical-grade images



Portable low-field MRI



FDA Cleared in 2020



Reimbursed under existing imaging codes:
MRI Brain without Contrast: 70551



>140 issued patents worldwide;
>80 issued patents in the U.S.



Installed base of **70 units***
as of year-end 2021



Clinical Applications including:

- Neuro ICU Follow-Up and Post-Operative
- Hydrocephalus and Pediatrics
- Stroke



*Installed base includes commercial system installations (which make up total revenue), grant fulfillment installations, and research unit installations

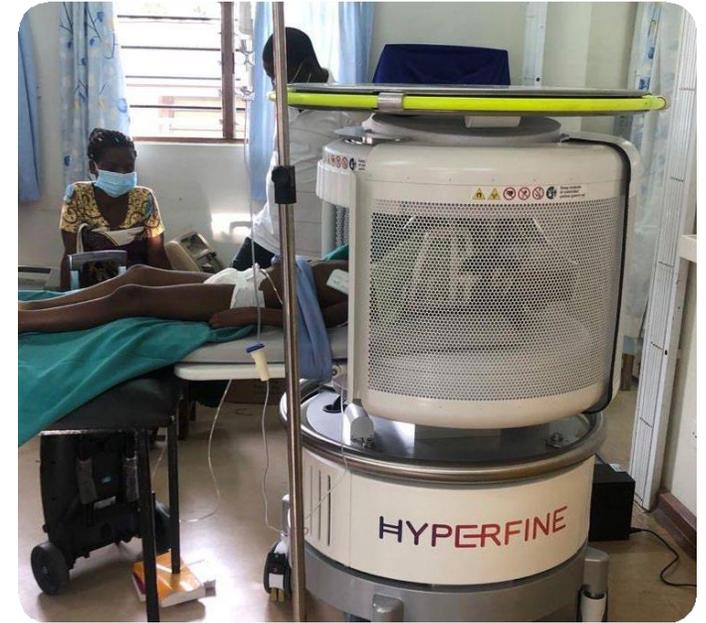
Swoop® Brings MRI to the Patient



Acute Care Settings



Intensive Care Units
and Operating Rooms



Global Health

- Swoop is designed to enable **rapid diagnoses and treatment** for patients regardless of income, resources, or location
- Produces **high-quality images at low magnetic field strength**, allowing clinicians to quickly scan, diagnose, and treat patients
- Wheeled **directly to a patient's bedside**, plugged into a **standard electrical wall outlet**, and **controlled by an iPad®**

Clinical & Workflow Benefits



Adverse events occur in
22-46%
of cases
during transport

Numerous challenges with conventional MRI :

High-cost limits accessibility



Complex site requirements and upgrades



Scheduling delays lead to longer length of stay



Consumption of valuable personnel resources



Risk of adverse events during transportation



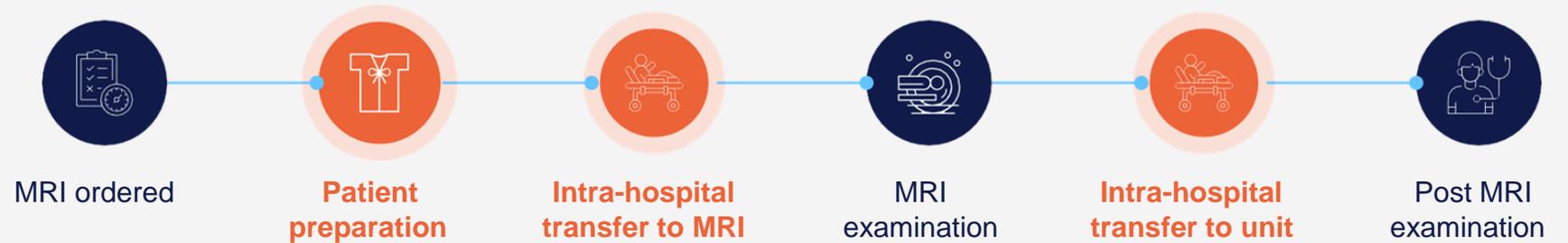
Maintaining connection to life support equipment



Hyperfine Workflow Benefits



Traditional MRI workflow (25.8 hours)



Hyperfine workflow (90 mins, 94% reduction in total workflow time)



Swoop Clinical Use Cases Today

Intensive Care Unit

- Acute Mental Status Change
- Ataxia
- Cerebral Edema
- Cerebrovascular Disease
- Cranial Neuropathy
- Extra Ventricular Drain Placement
- Follow-up Intracranial Hemorrhage
- Follow-up Ischemic Stroke
- Follow-up Hematoma
- Stroke
- Tumor Pre- and Post-Op

Emergency Department

- Blurred Vision
- Cranial Neuropathy
- Dizziness
- Headache
- Numbness
- Stroke
- Tingling
- Traumatic Brain Injury
- Vertigo
- Weakness

Rehabilitation Clinic

- Acute Mental Status Change
- Brain Injury After Fall
- Stroke Recovery

Outpatient

- Atrophy Monitoring
- Hydrocephalus (Shunt Check)
- Multiple Sclerosis

Pediatric

- Brain Volumetrics
- Hypoxic Ischemic Encephalopathy
- Hydrocephalus (Dx and Monitoring)
- Sports Injury
- Suspected Abuse

Clinical Validation of Hyperfine

“Game changer is a good way to put it [...] being able to do the level of sophisticated imaging in an ICU that MRI can provide.”

Dr. Fady Charbel, MD, FAANS, FACS



“Hyperfine provides me with an opportunity to acquire the information, to interpret the information, and to make a decision based on the information that’s in front of me.”

Dr. Shahid Nimjee, MD, PhD, FAANS, FAHA



“Portable MRI should be used to image any patients in ICUs in any [clinical] setting.”

Dr. Michael Schulder, MD, FAANS



Over 40 conference presentations and publications discussing clinical benefits for:

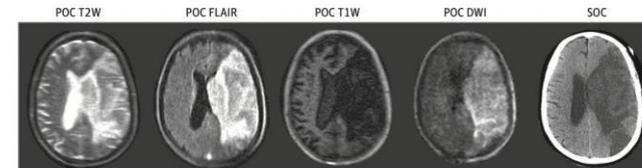
Stroke | Hydrocephalus | Hematoma | Multiple sclerosis | Tumor resection

JAMA Neurology | Original Investigation

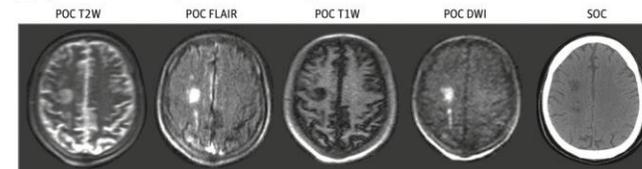
Assessment of Brain Injury Using Portable, Low-Field Magnetic Resonance Imaging at the Bedside of Critically Ill Patients

Kevin N. Sheth, MD; Mercy H. Mazurek, BS; Matthew M. Yuen, BA; Bradley A. Cahn, BS; Jill T. Shah, BA; Adrienne Ward, RN; Jennifer A. Kim, MD, PhD; Emily J. Gilmore, MD; Guido J. Falcone, MD, ScD, MPH; Nils Petersen, MD, PhD; Kevin T. Gobeske, MD, PhD, MPH; Firas Kaddouh, MD; David Y. Hwang, MD; Joseph Schindler, MD; Lauren Sansing, MD, MS; Charles Matouk, MD; Jonathan Rothberg, PhD; Gordon Sze, MD; Jonathan Siner, MD; Matthew S. Rosen, PhD; Serena Spudich, MD, MA; W. Taylor Kimberly, MD, PhD

C Large left middle cerebral artery



D Right anterior cerebral artery and middle cerebral artery watershed infarctions



Use Case: Neuro-ICU

Patient Delays to Transfer in the ICU Creates Major Unnecessary Costs for Hospitals, is “Common and Costly”

Estimated \$300/hr for delays, >\$22,000/week for hospital (>\$1M/year) for large academic center

Imaging capabilities of MRI, CT and Ultrasound **should be available 24/7/365** at all facilities.

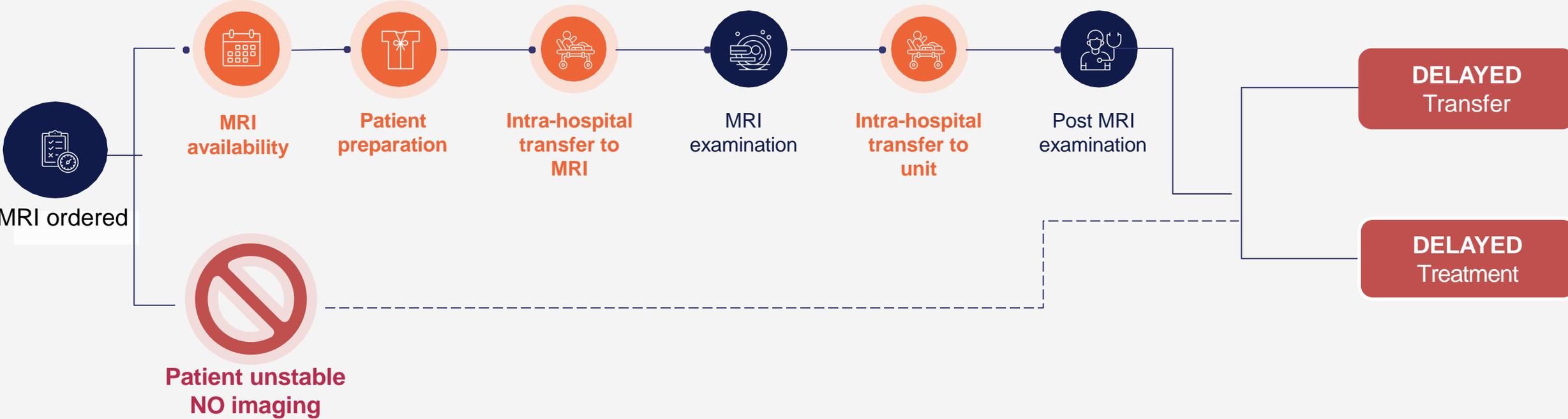
In reality, patients can **wait more than 24 hrs for MRI availability**, resulting in cost for both the patient and the hospital, taking up an ICU bed.



If only there was a way to improve access to imaging...

Current ICU Imaging Workflow with Conventional MRI

Traditional MRI workflow can lead to **prolonged delays** in patient care and **higher resources consumption**



Improved ICU Imaging Workflow with Swoop

Portable MRI workflow enables **timely care** for earlier discharge by bringing brain imaging to the patient's bedside



Word from the Clinician



Using the scanner in the ICU is an important use case. What Swoop can offer versus a conventional MRI is the **flexibility** and the usefulness of having it right there. It **favors time** in a situation when you need something acute.



Dr. Jennifer Moliterno-Gunel, Neurosurgeon
Yale University School of Medicine

Swoop's Potential Benefits in the ICU



Reduced time to diagnosis

Swoop workflow is significantly faster than conventional MRI



Reduced patient care interruption

Transport time (2-3 hours) interrupts patient care and impacts staffing for entire ICU¹



Reduced adverse events associated with patient transport

Adverse events occur in up to 46% of transported patients.



Reduced costs associated with length of stay

Shortening time to diagnosis, avoiding interruptions in care, and preventing adverse events



Optimized staffing in the ICU

Time consuming transport affects ICU staff: nurse, respiratory therapist, anesthesia, transport, and practitioner.



Reduced exposure to ionizing radiation

Ionizing radiation from CT used for serial follow-up scans = risk to patient and staff

1. Hyperfine, Care Area - Acute Mental Status Change, Page 1a

Use Case: Hydrocephalus

Pediatric Hydrocephalus Management is a Huge Problem

~400,000 hospital days, \$2B in hospital charges in the US



Children with hydrocephalus need **life-long monitoring** and use a disproportionate number of hospital days and **resources**.^{1, 2}



Children can receive **1-12 CTs⁵ each year**, increasing their risk for radiation-associated malignancy⁶. Rapid MRI (T2 only) is preferred since it's radiation free but may not be available.



Any symptoms cause trips to hospital for a shunt check to ensure pressure on the brain remains normal. **50% of shunts fail in <2 years and 98% of shunts fail by year 10.**^{2,3,4}



Swoop helps overcome existing workflow barriers to enable safe and timely imaging at the point of care for an improved patient experience.

1. <https://thejns.org/focus/view/journals/neurosurg-focus/37/5/article-pE5.xml>
2. <https://www.gosh.nhs.uk/conditions-and-treatments/conditions-we-treat/ventriculomegaly/>
3. <https://www.hydroassoc.org/cerebral-shunt-malfunctions/>
4. <https://www.aans.org/en/Patients/Neurosurgical-Conditions-and-Treatments/Hydrocephalus>

5. <https://link.springer.com/article/10.1007/s00381-019-04345-3>
6. <https://www.ncbi.nlm.nih.gov/pmc/articles/PMC6166961/>
7. <https://www.ncbi.nlm.nih.gov/pmc/articles/PMC7053664/>
8. <https://www.hydroassoc.org/powerful-facts/>

Personal Story from the Hydrocephalus Association

“

Received so many CT scans that we're waiting on a cancer diagnosis. **No radiation... Swoop is a parent's dream.**



Hydrocephalus Workflow Improvement with Swoop®

Traditional workflow results in delayed diagnosis and potential radiation exposure



Hyperfine allows children to be imaged sooner, next to their loved ones, **without radiation**



Hydrocephalus: Swoop's Potential from Early Cases



Hyperfine is an excellent addition to the neurosurgery clinic for screening of hydrocephalus patients. The convenience for the patient, reduced scan time, and cost of the machine make this a device that should be considered for any neurosurgery clinic.

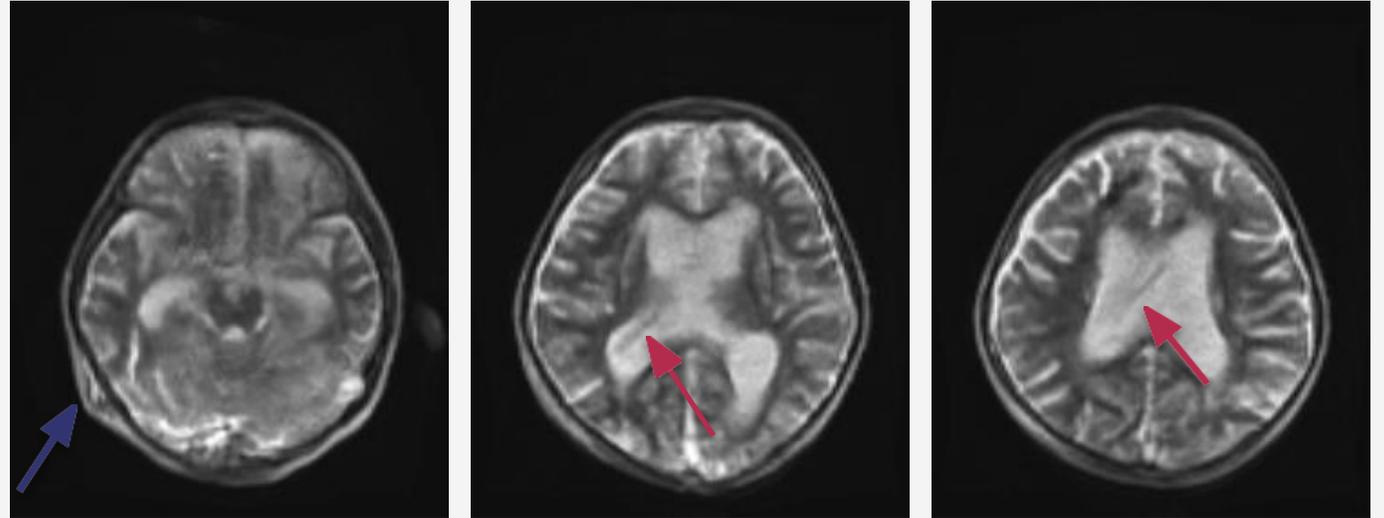


Jeff Leonard, MD
Chief of Neurosurgery



**NATIONWIDE
CHILDREN'S®**

When your child needs a hospital, everything matters.



5 y/o presents to Neurosurgery clinic with headache. Swoop® scan performed in the clinic demonstrates ventricular catheter (without artifact from valve) along with enlarged ventricles – child admitted to hospital for shunt revision immediately, saving radiation and delay.

Use Case: Stroke

Hyperfine Provides Compelling Platform for Stroke Diagnosis

15 million

people worldwide suffer a stroke annually



MRI scans are better at **detecting ischemic stroke damage** compared to CT scans



Stroke is the **2nd leading cause of death** globally



MRI use for stroke has been limited due to **lack of access** to this expensive equipment and experienced neuroradiologists to interpret the results.



87% strokes are ischemic strokes



Hyperfine offers an affordable MRI platform that can perform **diffusion imaging**

for stroke diagnosis at the patient's bedside, images can be shared securely with neuroradiologists around the world



Stroke Diagnosis Confirmed

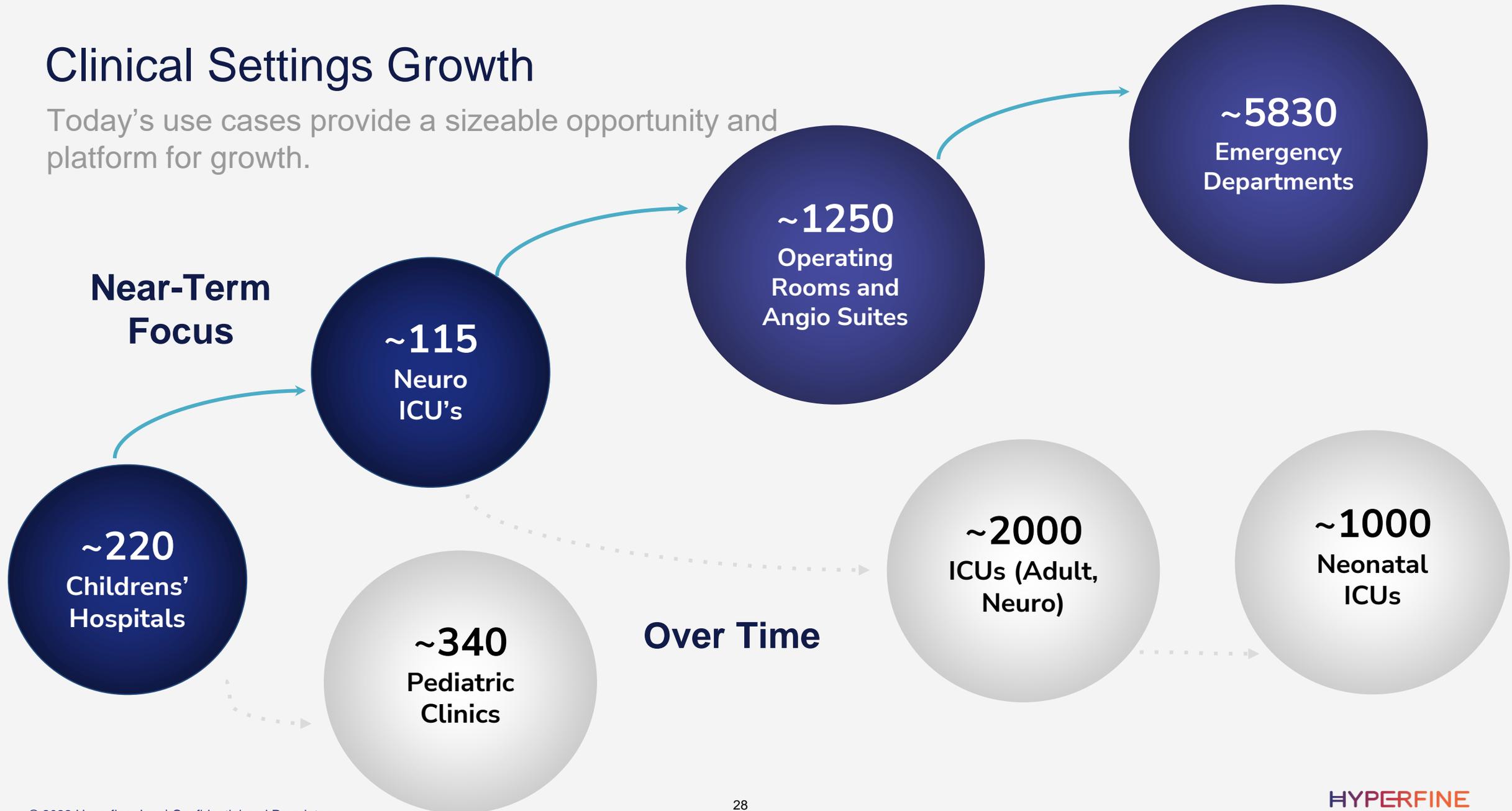
62-year-old male

Presented with new left sided weakness and tremor



Clinical Settings Growth

Today's use cases provide a sizeable opportunity and platform for growth.



Pipeline Opportunities

Innovative R&D Engine Designed to Expand Product Roadmap

Potential benefits:



Improved usability



Expanded Addressable Market



Lower cost of goods



Automated Stroke Detection



Developing a Non-Invasive Brain Vital Sensor

Breakthrough technology designed to unlock access to blood flow and pressure



Non-Invasive

Non-invasive use on every patient to enable broader access and earlier diagnosis



Continuous Trend Analysis

Designed for continuous sensing to build trends for data-backed treatment

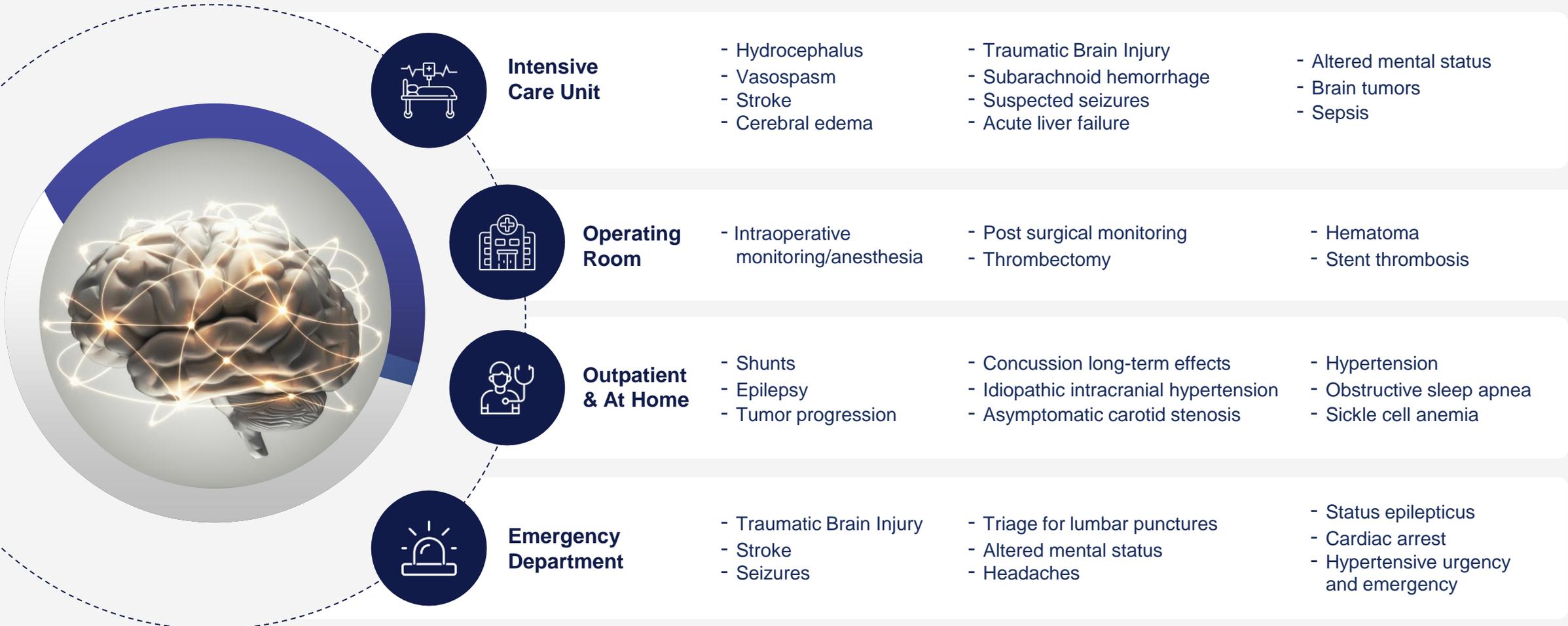


Easy to use

Designed to be easy to use for immediate, precise care

*The first medical device is being developed to aid in the diagnosis and management of brain disorders through the development of novel acoustic sensing techniques and innovative algorithms for measuring key metrics of brain health.

Brain-Sensing Clinical Opportunities



Financial Profile

2021 Financial Results & Total Installed Units

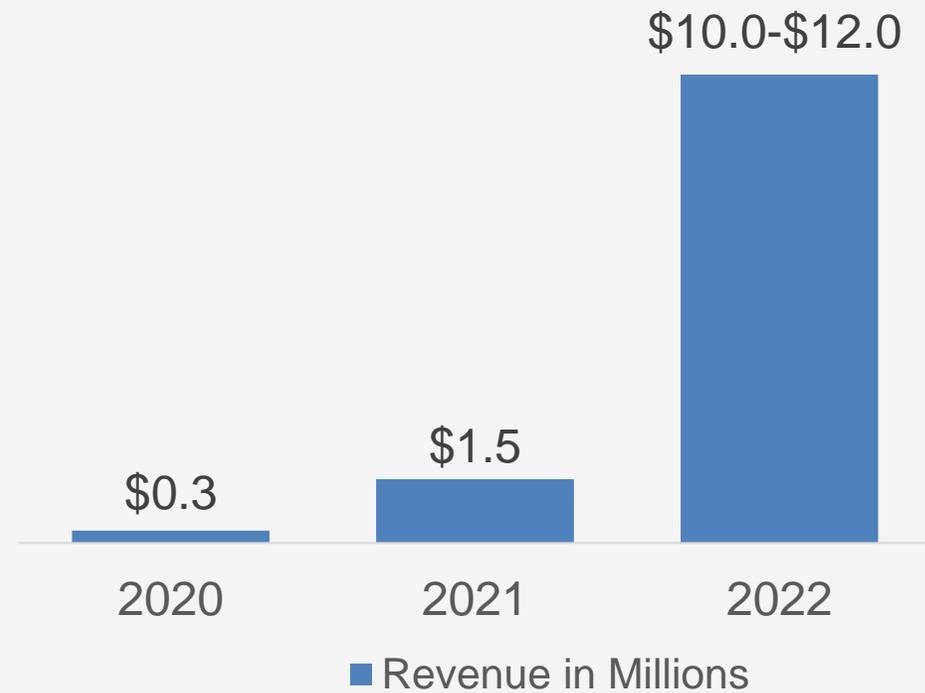
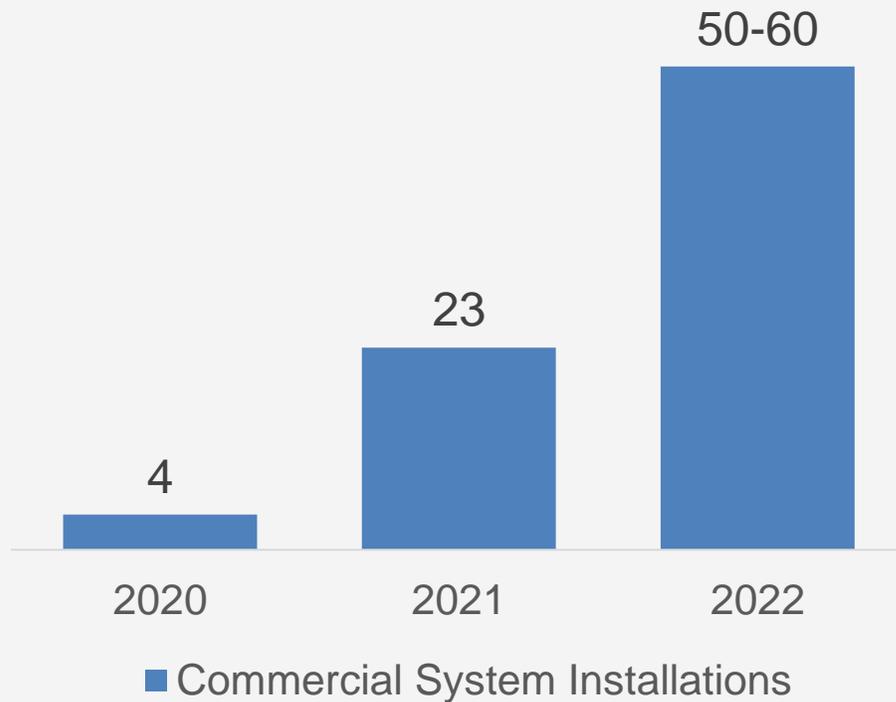
- \$1.496 million in 2021 total revenue
- Total sales increased by \$1.2 million, or >400%, for the year ended December 31, 2021 compared to the year ended December 31, 2020.

	TOTAL INSTALLED UNITS					
	2020	2021				
		Q1	Q2	Q3	Q4	TOTAL
Commercial system installations*	4	5	7	4	7	27
Grant fulfillment installations	—	2	2	4	10	18
	4	7	9	8	17	45
Research units	15	2	2	3	3	25
Total Installed Units	19	9	11	11	20	70

Commercial system installations reflect device sales and subscription services through commercial agreements (commercial sales) or through research transfer agreements (“RTA”) sales. Commercial sales are made to hospitals and other healthcare providers as direct sales of devices and software subscription services or through subscriptions for the use of the device and software. RTA sales represent the sale of Swoop units for research use purposes.

2022 Financial Guidance

- \$10.0-\$12.0 million in total revenue for full year 2022
- 50-60 commercial system installations in full year 2022



**2022 bar chart values reflect fiscal year financial guidance, not reported results*

2021 & 2022: Major Accomplishments

- **July 2021:** Announced Definitive Agreement to be Listed on Nasdaq through a Business Combination with HealthCor Catalio Acquisition Corp.
- **August 2021:** Swoop® Demonstrates High Accuracy for Detection of Brain Hemorrhage in Study Published in Nature Communications
- **September 2021:** Announced Plans for Global Expansion Starting with Launches in the United Kingdom and Pakistan
- **September 2021:** Announced Receipt of Additional \$3.3 Million Grant from Bill & Melinda Gates Foundation to Improve Access to Neonatal and Pediatric Brain Imaging in Low-Resource Settings Globally
- **November 2021:** Received FDA Clearance for Deep Learning Portable MRI, Defining the Future of Life-Saving Diagnostics
- **December 2021:** Announced Expansion into Canadian Market with Medical Device License Issued by Health Canada
- **December 2021:** Closed Business Combination with HealthCor Catalio Acquisition Corp. and Liminal Sciences, Began Trading under the Ticker "HYPR" on the Nasdaq Global Market
- **January 2022:** Placed Swoop system with Minnesota Medical Center to Grow its Advanced Imaging Systems Offering
- **February 2022:** Appointed Chip Truwit, M.D. as Senior Medical Director
- **February 2022:** Placed Swoop system with Queen's University Radiology to Improve Access to Care for Canadian Patients in Remote Northern Communities

incubatED
PITCH COMPETITION

HYPERFINE

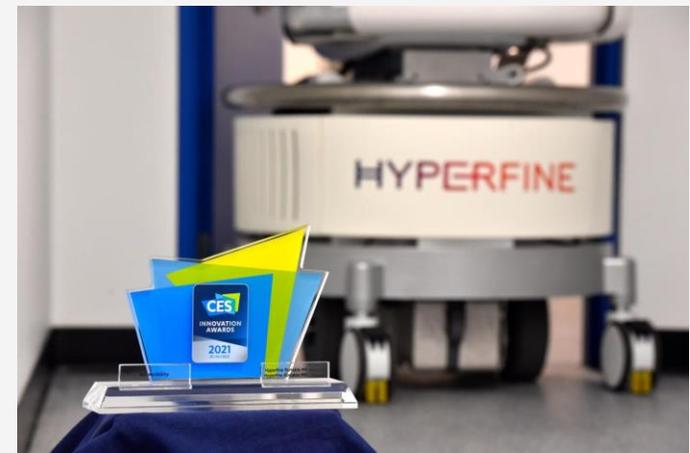
Named by Fierce Medtech
as one of 2020's



FIERCE 15



AuntMinnie.com
THE BEST OF RADIOLOGY
FINALIST



HYPERFINE

Leadership Team

Management Team with Proven Track Record of Success



**Dave
Scott**

Chief Executive Officer



**Alok
Gupta**

Chief Financial Officer



**Dr. Khan
Siddiqui**

Chief Strategy Officer &
Chief Medical Officer



**Tom
Teisseyre**

Chief Product Officer



**Mark
Hughes**

Chief Operating Officer



**Scott
White**

Chief Commercial Officer



**Kyla
Pavlina**

Chief People Officer



**Neela
Paykel**

General Counsel & Chief
Compliance Officer

Thank You!

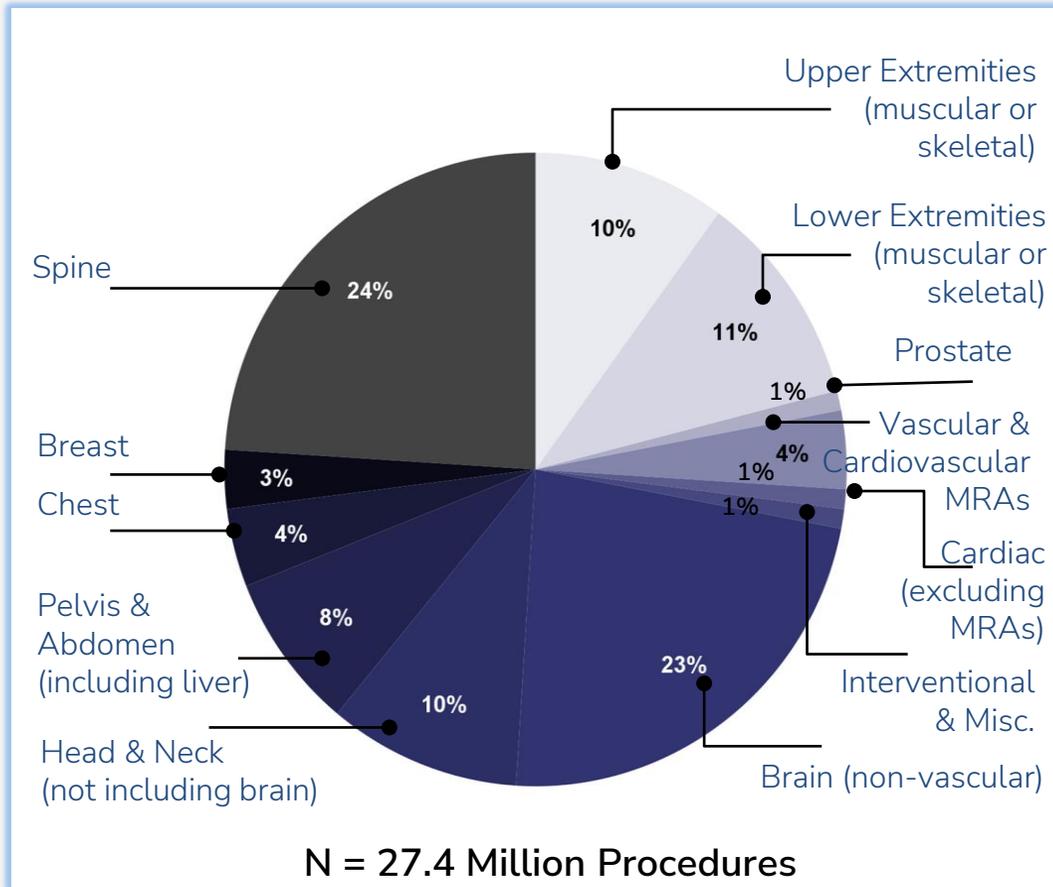


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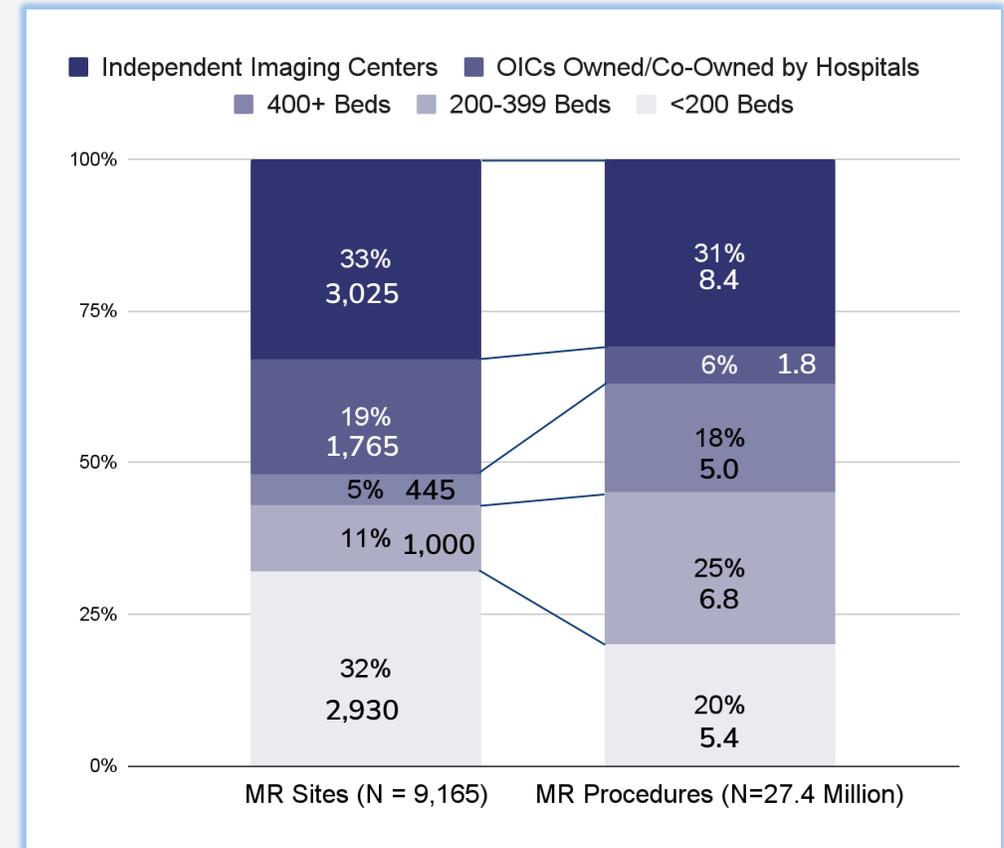
Appendix

Brain is the Largest MRI Market with Nearly 25% of MR Procedures

MR Procedure Mix, All Sites, by Percent, 2020



Distribution of MR Sites and Procedures, by Site Type, 2020



*Source: 2020 IMV MR Benchmark Report

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