AI-POWERED, PORTABLE BRAIN MRI

The Swoop® Portable MR Imaging System is Driving the Future of Brain Health

Corporate Investor Deck – November 2026

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This presentation includes “forward-looking statements” within the meaning of the “safe harbor” provisions of the Private Securities Litigation Reform Act of 1995. Actual results of Hyperfine, Inc. (the “Company”) may differ from its expectations, estimates and projections and consequently, you should not rely on these forward-looking statements as predictions of future events. Words such as “expect,” “estimate,” “project,” “budget,” “forecast,” “anticipate,” “intend,” “plan,” “may,” “will,” “could,” “should,” “believes,” “predicts,” “potential,” “continue,” and similar expressions (or the negative versions of such words or expressions) are intended to identify such forward-looking statements. These forward-looking statements include, without limitation, expectations about the Company’s financial and operating results, including, the Company’s expected revenue, gross margin and cash burn for the full year 2026, the Company's cash runway, the Company’s goals and commercial plans, including the Company’s commercial rollout of the Company’s Optive AI™ software and Swoop® system, the acceleration of the adoption of the Swoop® system across multiple sites of care in the hospital, office-based, wellness and longevity, and mobile settings, and international markets, the benefits of the Company’s products and services, progress on improvements and advancements in the Company’s products and services, and the Company’s future performance, including its financial performance, and its ability to implement its strategy. These forward-looking statements involve significant risks and uncertainties that could cause the actual results to differ materially from the expected results. Most of these factors are outside of the Company’s control and are difficult to predict. Factors that may cause such differences include, but are not limited to: the success, cost and timing of the Company’s product development and commercialization activities, including the degree that the Swoop® system is accepted and used by healthcare professionals; the Company’s ability to grow and manage growth profitably and retain its key employees; changes in applicable laws or regulations; the ability of the Company to raise financing in the future; the ability of the Company to obtain and maintain regulatory clearance or approval for its products, and any related restrictions and limitations of any cleared or approved product; the ability of the Company to identify, in-license or acquire additional technology; the ability of the Company to maintain its existing or future license, manufacturing, supply and distribution agreements and to obtain adequate supply of its products; existing and potential future National Institutes of Health funding pressures; existing and potential future effects from U.S. export controls and tariffs; the ability of the Company to compete with other companies currently marketing or engaged in the development of products and services that the Company is currently marketing or developing; the size and growth potential of the markets for the Company’s products and services, and its ability to serve those markets, either alone or in partnership with others; the pricing of the Company’s products and services and reimbursement for medical procedures conducted using the Company’s products and services; the Company’s ability to successfully complete and generate positive data from the PRIME study and Contrast PMR study; the Company’s ability to generate clinical evidence of the benefits of the Company’s products and services and to progress on product advancements and improvements; the Company’s estimates regarding expenses, revenue, capital requirements and needs for additional financing; the Company's ability to meet the conditions for additional tranches under its term loan facility; the Company’s financial performance; and other risks and uncertainties indicated from time to time in the Company’s filings with the Securities and Exchange Commission, including those under “Risk Factors” therein. The Company cautions readers that the foregoing list of factors is not exclusive and that readers should not place undue reliance upon any forward-looking statements which speak only as of the date made. The Company does not undertake or accept any obligation or undertaking to release publicly any updates or revisions to any forward-looking statements to reflect any change in its expectations or any change in events, conditions or circumstances on which any such statement is based.

The Company has presented certain financial information in accordance with U.S. GAAP and on a non-GAAP basis. The non-GAAP financial measure included in this presentation is net cash burn. Management uses this non-GAAP financial measure, in addition to GAAP financial measures, as a measure of operating performance because the non-GAAP financial measure does not include the impact of items that management does not consider indicative of the Company's core operating performance. Management believes that this non-GAAP financial measure, taken in conjunction with GAAP financial measures, provide useful information for both management and investors by excluding certain financing proceeds that are not indicative of the Company’s core operating results. Management uses non-GAAP measures to compare the Company’s performance relative to forecasts and strategic plans and to benchmark the Company’s performance externally against competitors. Non-GAAP information is not prepared under a comprehensive set of accounting rules and should only be used to supplement an understanding of the Company’s operating results as reported under U.S. GAAP. The Company encourages investors to carefully consider its results under GAAP, as well as its supplemental non-GAAP information and the reconciliation between these presentations, to more fully understand its business. The reconciliation between the most directly comparable GAAP measure, net change in cash and cash equivalents, and historical non-GAAP net cash burn is presented in the accompanying slides. A reconciliation of the Company’s full-year 2026 net cash burn guidance to the most directly comparable GAAP measure is not provided because the Company is unable to predict certain components of such measure, including future financing proceeds, without unreasonable efforts. Future financing proceeds could cause the Company’s actual net change in cash and cash equivalents to differ materially from its net cash burn guidance.

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Q3 2026: Inflection in a Strengthening Business

Revenue Growth and Margin Expansion are Translating into Lower Cash Burn

Q3 Results

$6.0M Revenue
Up 73% YoY and 53% sequentially

56.7% Gross Margin
Up 600 bps sequentially

$5.6M Net Cash Burn[2]
Down 29% sequentially
Revenue > Cash Burn for the first time

$37.9M Cash[3]
Expected runway into 2028
Excludes any future loan draws

FY2026 Guidance[1]

REVENUE · REAFFIRMED
$20–22M
Up **~55%** YoY

GROSS MARGIN · RAISED[4]
52.5–55.0%
Up **~395 bps** YoY

CASH BURN · REAFFIRMED[2]
$26–28M
Down **~10%** YoY

Recent Milestones

- FDA Clearance & Launch of AI Software
- CE Mark & UKCA: Model 2
- Contrast PMR Study Enrolled. 510(k) Submission Targeted by Year-End 2026
- India Approval & First Site
- Stroke & HEOR Publications
- Record US Scan Volumes

Strong Outlook

De-risked, Disruptive AI-powered Technology

3 Growth Vectors

- US Hospitals & IDN
- US Office / Outpatient
- International

Growing Recurring Revenue Stream

R&D to Expand Utility

AI-enabled Platform Opportunities

1. *Changes calculated using the mid-point of the FY2026 guidance range. The Company has not provided a reconciliation of full year 2026 net cash burn guidance to forward-looking net change in cash and cash equivalents, because the amount and timing of future financing proceeds cannot be predicted without unreasonable efforts.*
2. *Cash burn is calculated as change in cash and cash equivalents less net financing proceeds, including net proceeds from shares issued under the Company's "at-the-market" offering program, the Company's February 2025 registered direct offering, the Company's October 2025 underwritten public offering, and the Company's March 2026 debt financing.*
3. *Cash and cash equivalents as of September 30, 2026*
4. *Raised from prior FY2026 gross margin guidance of 50–55%; the low end increased to 52.5% and the high end of 55.0% is unchanged. Year-over-year change is calculated using the 53.75% mid-point of the updated range versus 49.8% for FY2025.*

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Evolution of Brain Imaging

Democratization, Decentralization, and Automation for Better Brain Health



Restricted, Hospital-Centric

- Shielded facility
- Brain Care for disease management
- Physician/MR Tech Driven
- Human Interpretation

THE GATEWAY



Making Brain MRI Possible for Everyone



Universal, Patient/Consumer Centric

Hospital
+ **Office • Concierge • Longevity • Mobile • Community**

Brain Care for disease management
+ **Brain Health & Wellness for prevention & ongoing assessment**

Physician Driven
+ **Patient/Consumer driven • Operator agnostic**

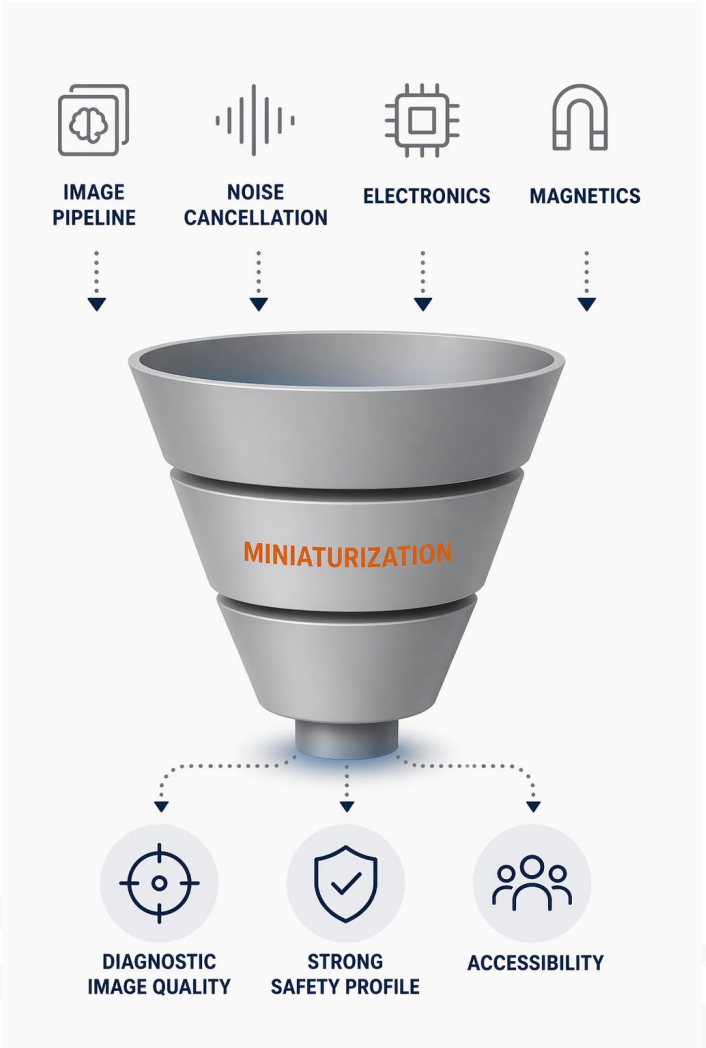
Human Interpretation
+ **AI for scalable, automated assessment & monitoring**

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Hyperfine's Miniaturized MRI Technology Could Drive the Future of Imaging

A suite of proprietary imaging technologies and know-how that enable **Miniaturized MRI** for a full range of applications with proven usability & scalability

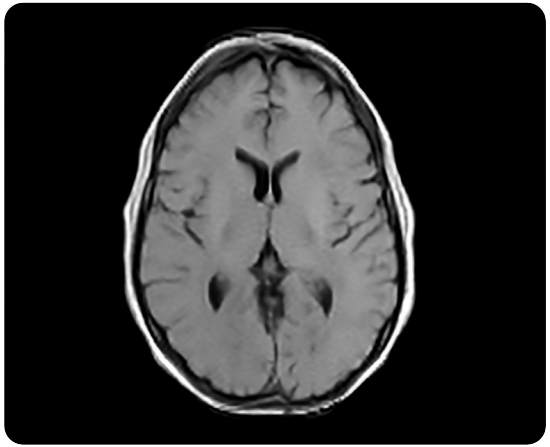
More Than a Portable Brain MRI Company...



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The Swoop System Transforms and Expands the Reach of Brain Imaging

Diagnostic Image Quality
Clinicians Can Act On



Portable, Compact Design Goes
Directly to the Patient



Simplified Set Up and Scanning for
Broad Usability



USING THE *SWOOP SYSTEM* IMPROVES MRI CAPACITY AND ACCESS WITH MEANINGFUL CLINICAL AND ECONOMIC BENEFIT FOR PATIENTS, CLINICIANS AND PROVIDERS

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MRI is the Clinical Gold Standard, But Capacity and Access Are Limited

	The MRI You Know	***The MRI You Wish For***
	High-cost and complex site requirements limit access	Significantly less expensive, no shielding or siting required. Available at any healthcare facility
	Need for highly trained personnel constrains capacity	No dedicated personnel to operate. Easy to learn how to scan
	Limited availability leads to delayed diagnosis and care	Imaging available to support triage and point of care decision making and safe to scan “anywhere”
	Inpatient transport increases risk of adverse events	No patient transport; significant cost and personnel efficiencies for critical care patients

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Large Market Potential Bringing MRI to Multiple Sites of Care

Sizeable and Growing US TAM[1] Through New Sites of Care



Inpatient Settings
2023+

4,000+

Adult critical care
Peds critical care

Outpatient Settings
2025+

10,000+

Emergency departments[2]
Neurology offices
Infusion centers

Community Settings
2026+

25,000+

Urgent care facilities
Nursing homes
Concierge medicine

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1. *TAM Calculation Based on Number of Sites of Care (Company Estimates on File) Multiplied by US Device ASP*
2. *Data as of 2020*

Addressing Critical Unmet Needs in Neurological Disease

MRI access remains a critical gap — Swoop system brings point-of-care brain imaging to acute and chronic neurodegenerative conditions

Sources: Published literature and company data on file.

Stroke

12.2M
new strokes globally / year

1.9M
neurons lost every minute untreated

1 in 4
adults will have a stroke in lifetime

CARE CONTINUUM

Emergency Triage	Bedside Diagnosis	ICU Monitoring	Inpatient Follow-up

- Bedside MRI reduces imaging turnaround by ~18 hours, delivering stroke imaging without the conventional high-field MRI wait.
- DWI-FLAIR mismatch provides a bedside “tissue clock,” helping identify treatable wake-up and unknown-onset stroke patients.
- Published SVIN 2026 data showed 100% sensitivity and 100% specificity for lesions >1.0 mL.
- Real-world deployment saved ~$324K in 33 weeks, supporting scalable stroke programs across health systems.

Dementia

55M+
people living with dementia globally

139M
projected cases by 2050

2 in 3
people with dementia remain undiagnosed

CARE CONTINUUM

Community Screening	Disease Monitoring	DMT / ARIA Monitoring	Initial Diagnosis

- Closing the diagnosis gap: 2 in 3 people with dementia go undiagnosed — Swoop system can bring MRI to the clinic.
- One-stop clinic model: MRI + cognitive testing + biomarkers in a single nurse-led visit — being validated at Univ. of Kansas ADRC.
- Epidemiological studies on cognitive function, enabling large-scale research in aging, cognitive decline, and dementia.
- Supports the Alzheimer's treatment era: 100% sensitivity for ARIA-E detection in patients receiving anti-amyloid therapy.

Solid Fundamentals: Accelerating Growth

Development, Clinical & Early Commercial FOUNDATION

- **First Mover Advantage**
  - ~200 Issued Patents
  - First FDA-cleared AI-powered portable brain MRI system
  - Over 225 Installed base globally and 250,000 images
- **Compelling Business Model**
  - Broad FDA-clearance for brain imaging in patients of all ages
  - Reimbursement in place in the U.S. under existing CPT codes in both hospital and office settings
  - Demonstrated strong value proposition & validated health economics in multiple sites of care
- **Agile Innovation**
  - Prolific engine of fast market-driven innovation
  - ~2 AI-powered software releases per year
- **Evidence to Support Broad Clinical Utility**
  - Clinical evidence across key clinical sites & use cases
  - Over 180 peer-reviewed publications and editorials & 280 scientific presentations

Compelling STRATEGY



Transformative TECHNOLOGY

Model 2 Swoop System
Powered by Optive AI
June 2025



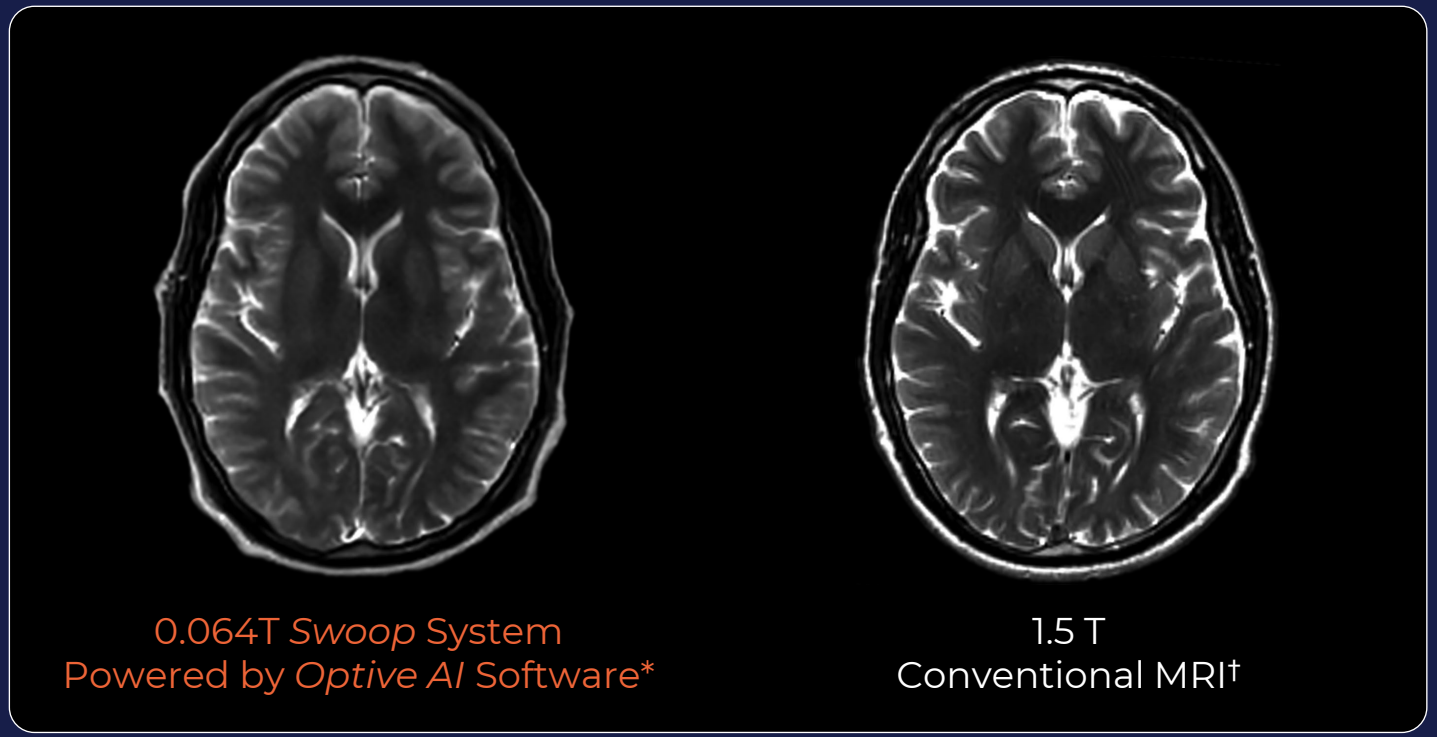
Model 2

Commercial EXPANSION

- **Model 2 Swoop System Launch**
  - Outstanding market feedback on Optive AI image quality
  - Placements in all targeted sites of care since launch
  - Significant increases in utilization
- **Commercial Expansion**
  - Hospital: Expand to multiple new sites of care, multiple unit placements, and health systems / IDN strategy
  - Office: Launch into new business vertical
  - International: Model 2 Swoop system powered by Optive AI software launched in UK and Europe in mid-2026
- **Scalable**
  - Established global contract manufacturing partner
  - Connected ecosystem; cloud infrastructure & certifications
- **Strong Financials**
  - Diversified revenue growth, attractive & expanding gross margins, spending discipline & strong operating leverage
  - Strengthened balance sheet, capital to fund commercial growth
- **Future Expansion Opportunities**
  - Platform technology with opportunities in AI, new anatomies, intervention support and other capabilities

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How Close Are We to Conventional MRI?



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* Sequence image acquired with Model 2 *Swoop* system hardware.
† 1.5 T conventional MRI scans performed in 2018

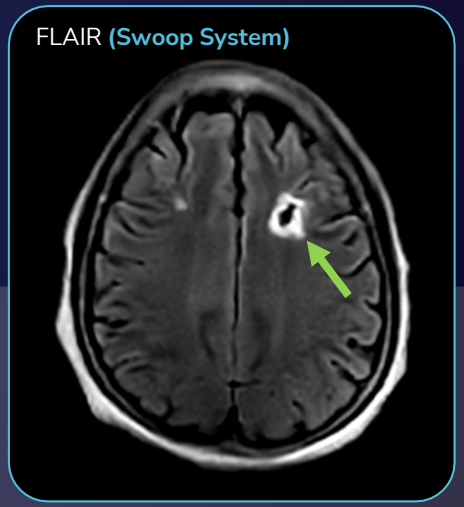
Image Quality of Next-Gen Swoop System to Drive Broad Adoption

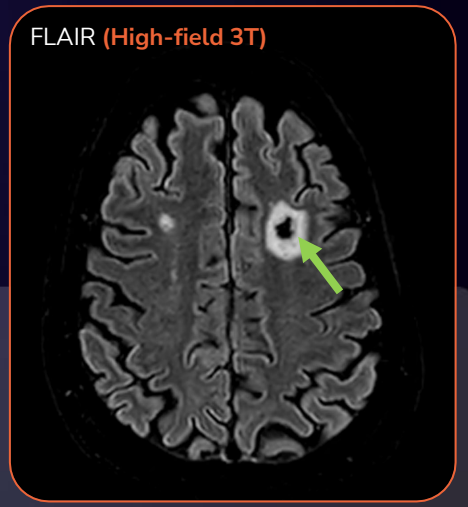
Image Quality Approaching Conventional MRI

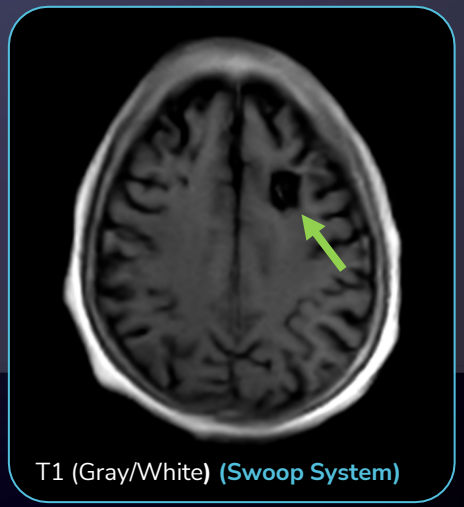
Case Study of Swoop System vs. High-Field 3T

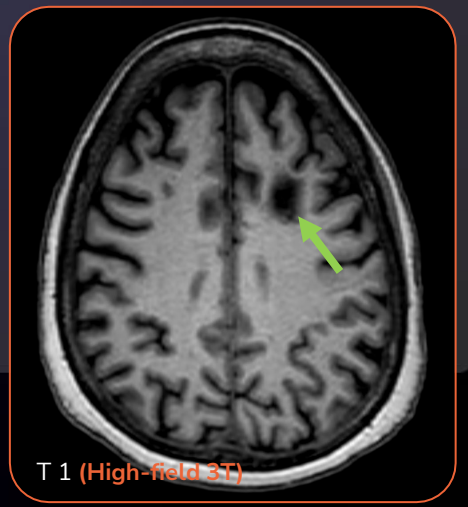
63-year-old female with history of prior infarct presenting with new-onset headache. Physicians performed office-based imaging with the Swoop system, demonstrating chronic infarct without evidence of acute ischemia.

- Old Infarct









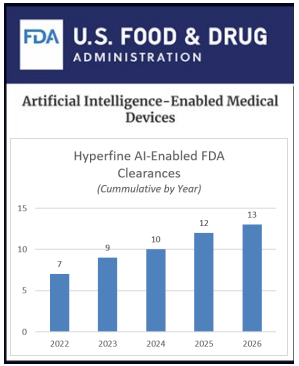
Sources: Images from NEURO-PMR study (Case 040)

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AI-Enabled Imaging Software

- Advanced, AI-driven image reconstruction to ultra-low field MRI—unlocking clearer images at lower field strengths
- Reduces noise and blur with deep learning, enhances image clarity and consistency, provides sharper anatomical detail to support confident diagnoses at the point of care
- 12 Generations of AI-enabled software
- A leader in FDA cleared AI-enabled devices



Source: U.S. FDA Artificial Intelligence-Enabled Medical Devices List (June 30, 2026)

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Robust Commercial Growth Strategy Driven By 3 Diversified Business Verticals

US NEUROLOGY OFFICE

IAC Accreditation

NEURO PMR

CONTRAST PMR (Enrolled)

INTERNATIONAL

Initial UK/CE Clearance

Initial India Clearance

Model 2 Swoop UK/CE Clearance

US HOSPITAL

Critical Care (Adult & Pediatric)

Emergency Department

Hospital Clinics

IDNs

ACTION PMR

Published HEOR Paper

PRIME

2020 2022 2024 2026



Initial FDA Clearance

10 generations of AI-enabled software

Model 2 Swoop FDA Clearance

11th & 12th generations

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Hospital Business

- Compelling clinical utility in critical care, emergency triage, neurosurgery and neuro follow up in adults & peds
- Strong economic value proposition
  - Swoop system scans qualify for existing reimbursement (CPT 70551)
  - Opportunity to increase revenue, cost savings and optimized care
  - Published peer reviewed health economic paper Q4'25
  - 1–1.5-year breakeven versus 3–4 years for typical capital equipment
- Potential for multiple systems within same hospital
  - ICUs, Emergency departments & Hospital-based clinics
- Follow-on sales cycle can be quicker within existing health systems / IDNs
  - ~60–70% of US hospitals part of Health Systems / IDNs
  - Growing utilization and clinical champions support expansion, building on established contracts and approvals
- Strong market activation from launch of Model 2 Swoop system powered by Optive AI software
  - Outstanding radiology feedback on image quality
  - Strong inbound interest Including new use cases (e.g. neurosurgery)
  - Robust pipeline of multiple unit deals & health system discussions
  - Realizing higher ASP supported by Model 2 system



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Office Business

- A typical neurologist orders 500–600 MRIs annually[1,2] for neurologic conditions such as headaches, dementia, tumor, MS, surgery follow-up
- 90% of private neurology practices don't have on-site MR imaging[3]
- Affordable and appealing, plug-and-play *Swoop* system
  - No specialized siting, no helium or electrical infrastructure, & no MRI technologist required[4]
- Strong economic value proposition validated with data
  - Opportunity to add incremental revenue stream & improve patient experience
  - Swoop system scans qualify for existing reimbursement (CPT 70551)
  - IAC Accreditation enables medical offices to qualify for CMS reimbursement
- Office has shorter sales cycle and fewer decision-makers than hospital business
- Strong first-year traction in the new neurology office segment
  - 3,000+ in-office brain MRI scans in year one, across general neurology, headache, memory, pediatric, concierge and longevity practices
  - NEURO PMR published (*Journal of Neuroimaging*): 92% concordance with high-field MRI and 4-to-1 patient preference
  - Engagement growing via the NeuroNet partnership and proactive brain health applications

1. *https://practicalneurology.com/diseases-diagnoses/imaging-testing/*viewpoints-why-neuroimaging-plays-a-critical-role-in-shaping-the-future-of-neurology/30403/
2. Source: Mindfrog market research (data on file)
3. *The practice of neuroimaging within a neurology office setting, 2013 American Academy of Neurology*
4. *IAC Standards and Guidelines for MRI Accreditation. State regulations vary.*

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International Business

- Compelling clinical utility transferable globally
- Selling primarily into the hospital setting, demonstrated value proposition in remote settings
- Optive AI software launched in 10 European languages in Q1'26
- CE Mark and UKCA Mark approvals for the Model 2 Swoop system powered by Optive AI software supporting key European market launches mid-2026
- Model 2 Swoop system sales in four international markets
- Model 2 Swoop system referenced in France's largest public hospital procurement body[1] to facilitate nationwide purchases of portable MRI technology
- India CDSCO approval in December 2025 for Model 1 Swoop system
- Network of reference sites and key opinion leaders globally through Gates Foundation partnership



1. https://www.uniha.org/qui-sommes-nous/uniha-union-hopitaux-achats

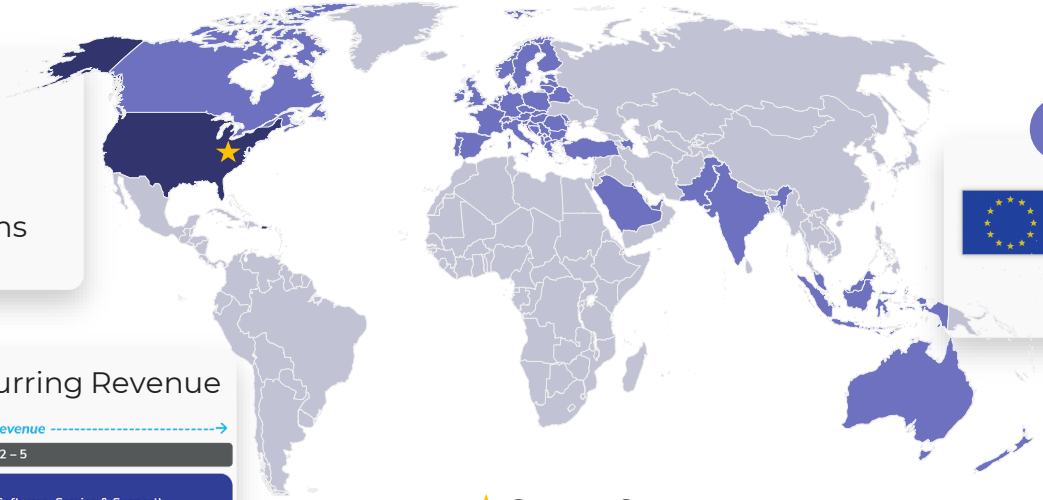
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Scalable Commercialization with US Direct Sales and Global Distribution Network

INSTALLED BASE
Over 225 Swoop Systems Globally[1]

DIRECT

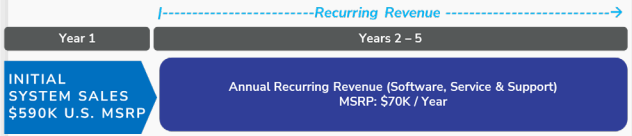
Dedicated Selling & Implementation Teams
(~15 FTE in Total)



DISTRIBUTORS

10+ Markets
(2 FTE in Total)

Healthy US Pricing & Recurring Revenue



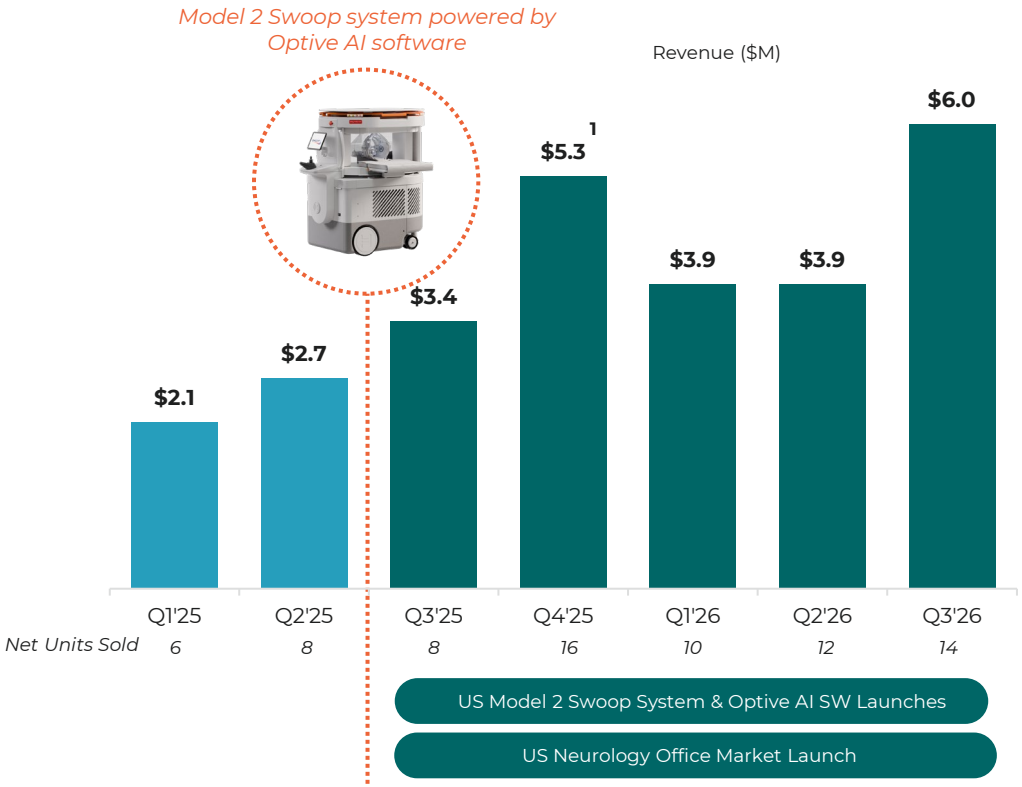
Swoop System MSRP (Hospital CAPEX)

★ Swoop System Manufactured in U.S. by Global Contract Manufacturer Partner

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1. *Installed base includes commercial and research units as of September 2026.*

Multiple Catalysts Driving a Durable Revenue Trajectory



Drivers & Catalysts

Ongoing

- US rollout of Model 2 Swoop system & latest Optive AI software
- Growing adoption in ED, hospital clinics, and critical care environments
- New and follow-on orders; health system & IDN-level momentum
- Office-based, wellness and longevity, and mobile settings
- CE Mark and UKCA launch for Model 2 Swoop system; India market entry

Anticipated Contrast Indication Expansion

- Contrast imaging indication would expand clinical indication and utility of the Swoop system
- Outpatient brain MRI scans would be eligible for dedicated CPT codes

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1. *Included multi-unit system for-charge technology upgrades*

Q3’26: Higher Revenue and Margins, Lower Cash Burn

$1.4M increase in gross profit with only $0.2M increase in operating expense versus Q2’26

$6.0M

Revenue

- ↑ 73% YoY growth
- ↑ 53% QoQ growth

56.7%

Gross Margin

- ↑ 300 bps YoY expansion
- ↑ 600 bps QoQ expansion

$5.6M

Net cash burn[1]

- ↓ 6% YoY reduction
- ↓ 29% QoQ reduction

$(7.3)M

Operating Loss

- ↓ 19% YoY reduction
- ↓ 14% QoQ reduction



$37.9M

Cash and cash equivalents

At Q3’26

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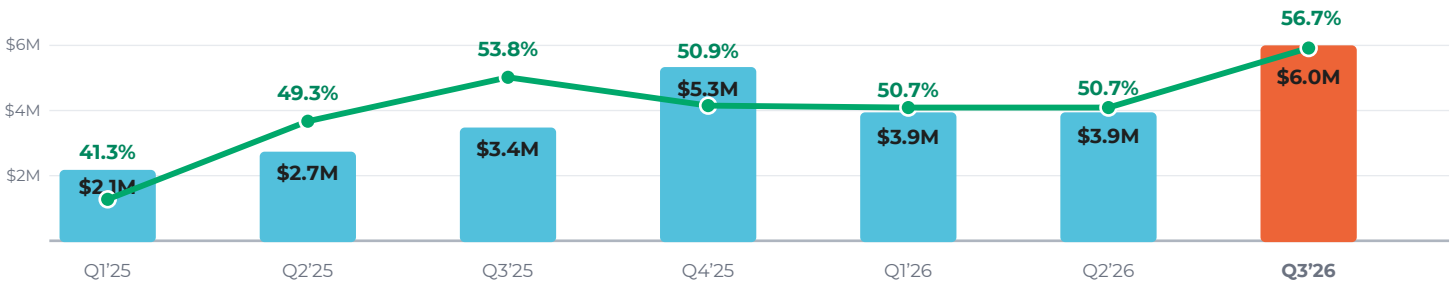
1. Cash burn is calculated as change in cash and cash equivalents less net financing proceeds, including net proceeds from shares issued under the Company’s “at-the-market” offering program, the Company’s February 2025 registered direct offering, the Company’s October 2025 underwritten public offering, and the Company’s March 2026 debt financing.

Revenue Growth, Margin Expansion and Cost Discipline Drive Operating Leverage

Revenue and gross-margin trends across seven quarters, with disciplined operating investment.

REVENUE AND GROSS MARGIN

Revenue nearly tripled while gross margin expanded 1,540 bps



Gross margin

+1,540 bps

Q3'26 vs. Q1'25

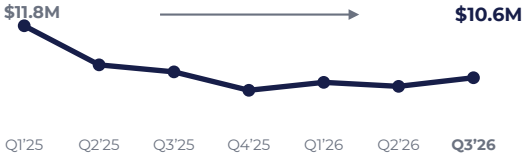
+179%

Revenue growth Q3'26 vs. Q1'25

LOWER COST BASE → **LOWER OPERATING LOSS** → **LOWER CASH BURN**

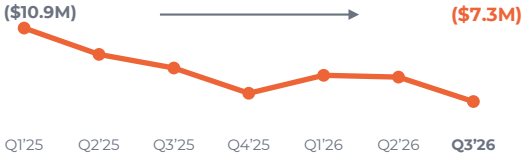
OPERATING EXPENSES

Opex down 10% vs. Q1'25



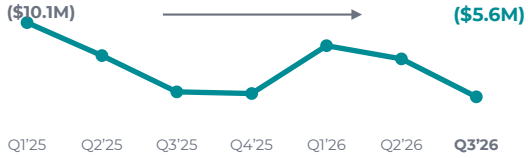
OPERATING LOSS

Down 33% vs. Q1'25



NET CASH BURN[1]

Down 45% vs. Q1'25

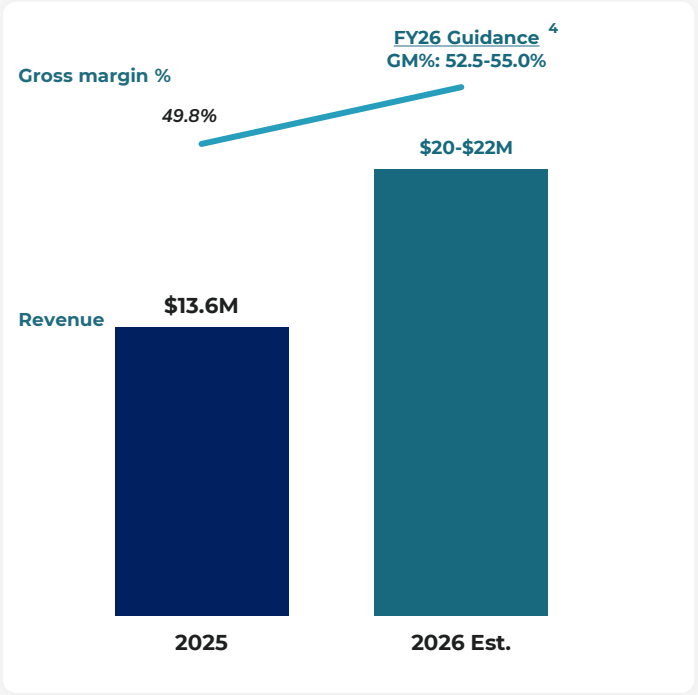


1. *Cash burn is calculated as change in cash and cash equivalents less net financing proceeds, including net proceeds from shares issued under the Company's "at-the-market" offering program, the Company's February 2025 registered direct offering, the Company's October 2025 underwritten public offering, and the Company's March 2026 debt financing.*

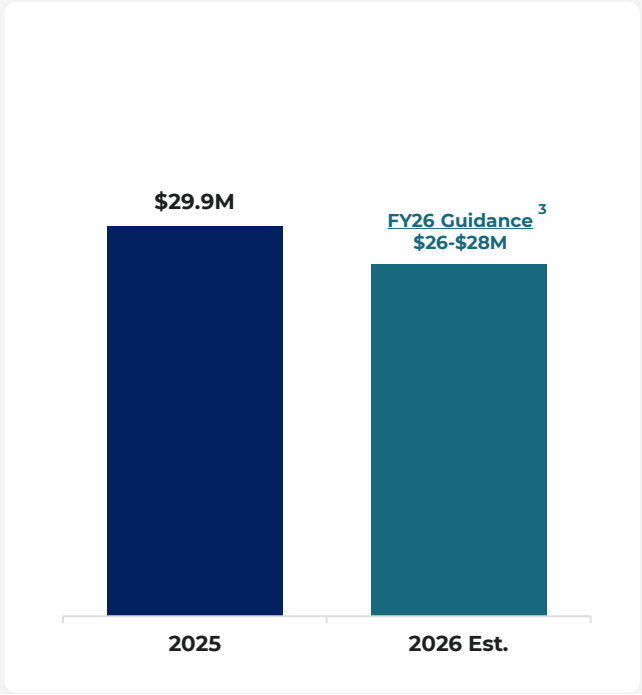
Solid Financial Fundamentals

FY26 Gross Margin Guidance Raised[4]; Cash Runway into 2028

REVENUE AND GROSS MARGIN



CASH BURN[1]



FY26 OUTLOOK

Revenue
$20–$22M

Gross margin[4]
52.5–55.0%

Net cash burn[1 3]
$26–$28M

LIQUIDITY AND RUNWAY

$37.9M
Cash and cash equivalents
at September 30, 2026

Expected cash runway into 2028

Based on current cash only.
Excludes any future loan draws.

$15M initial loan tranche funded.
Up to $25M additional debt subject to commercial milestones through December 2027.[2]

1. *Cash burn is calculated as change in cash and cash equivalents less net financing proceeds, including net proceeds from shares issued under the Company's "at-the-market" offering program, the Company's February 2025 registered direct offering, the Company's October 2025 underwritten public offering, and the Company's March 2026 debt financing. Cash and cash equivalents were $37.6 million as of December 31, 2024 and $35.1 million as of December 31, 2025, and $37.9 million as of September 30, 2026; net financing proceeds of $25.0 million for the nine months ended September 30, 2026. Net financing proceeds in the aggregate were $27.3 million for the year ended December 31, 2025. All quarterly numbers presented herein are unaudited. Amounts may not reconcile due to rounding.*
2. *$40 million senior secured term loan facility, with initial tranche of $15 million at closing and an additional $25 million available upon achievement of certain commercial milestones through December 2027*
3. *The Company has not provided a reconciliation of full year 2026 net cash burn guidance to forward-looking net change in cash and cash equivalents, because the amount and timing of future financing proceeds cannot be predicted without unreasonable efforts.*
4. *Raised from prior FY2026 gross margin guidance of 50–55%; the low end increased to 52.5% and the high end of 55.0% is unchanged. Year-over-year change is calculated using the 53.75% mid-point of the updated range versus 49.8% for FY2025.*

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Platform Technology Expansion Opportunities

Hyperfine CORE Technology is Well Positioned to Deliver in Multiple Markets with Additional Growth and Value-added Services[1]



	Now	Next	Future
Neuro Expansion	***Expanded sequence offering*** ***Contrast Imaging indication*** (Contrast PMR enrolled)	***Mobile*** for acute care and private practice Intraoperative use	Mobile brain health Screening services
Platform expansion: Anatomy and Applications	Neonatal imaging ***System accessories***	C-spine Interventions platform	Diabetic foot Breast
Software and Services	Teleradiology integration ***PULSE*** (Developer subscription)	AI-powered clinical decision support SaaS Open developer ecosystem	App marketplace Data exchange platform

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BOLD- *Ongoing activities at Hyperfine*

1. *Forward-looking; see slide 2. Subject to regulatory clearance and other risks.*

Leadership Team With Proven Track Record of Success



Maria Sainz
President and Chief Executive Officer



Brett Hale
Chief Administrative Officer and Chief Financial Officer



Tom Teisseyre, PhD
Chief Operating Officer



Rob Fasciano, PhD
Chief Regulatory and Quality Officer



Eric Willis
Vice President of International



Rafael Donnay
Senior Vice President of Hospital Business



Chi Nguyen
Senior Vice President of Office and Community Business



Todd Finch
Vice President of US Sales



Edmond Knopp, MD
Chief Medical Officer



Rafael O'Halloran, PhD
Vice President of Technology



Leslie Grab
General Counsel

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Hyperfine, Inc. Opportunity

Large TAM

- $16B+ US device market potential across inpatient, outpatient and community settings
- Global opportunity

Strong Proprietary First-Mover Position

- Portable MR category leader
- First FDA-clearance
- ~200 issued patents
- ~250,000 ULF images
- Over 225 Installed base globally

Broad Indications and Applicability

- Brain imaging of patients of all ages
- Safe in multiple sites of care
- Used in large neuro disease populations

Prolific Innovation Engine

- Image quality approaching conventional MRI
- ~2 AI-powered software releases per year

Vast Clinical and Economic Evidence

- 180+ Peer Reviewed Clinical & HEOR publications & editorials
- Continued pipeline of evidence including NEURO PMR and Contrast PMR

Reimbursement in Place

- Existing Outpatient CPT codes in both hospital and office settings
- IAC accreditation

Diversified Revenue

- Multiple growth catalysts across hospital, office and international verticals
- IDN and multi-unit hospital placements
- Recurring revenue stream

Strong Financial Profile

- Rapid topline growth
- 50%+ Gross Margin and growing with scale
- Operating leverage, capital efficient and cash runway expected into 2028

Attractive Platform Expansion Opportunities

- Expansion into contrast imaging, additional sites of care, new anatomies, and clinical decision support

SWOOP

HYPERFINE®