

Clinical Need

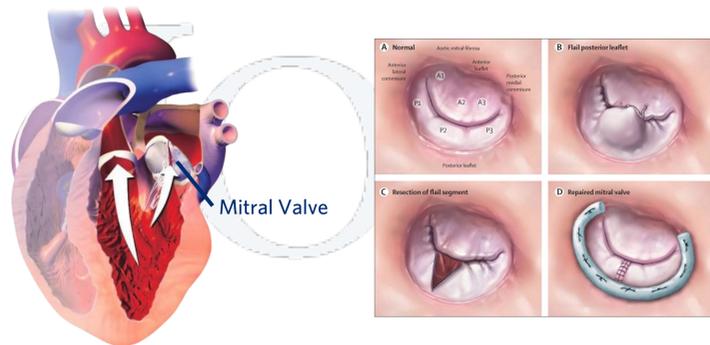
Cardiac surgeons need an accurate method of testing for intraoperative, post-repair valvular regurgitation in order to prevent operative complications and repeat operations.

Background

Mitral Regurgitation

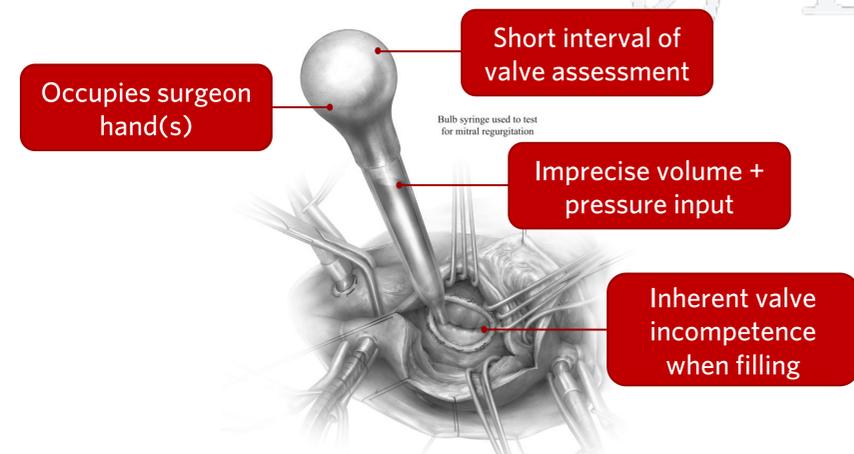
Mitral valve leakiness results in backflow of blood (regurgitation) which is treated through mitral valve repair with an open chest.

Residual mitral regurgitation is the **primary driver** for reoperation.



Current Assessment Methods

To test the success of the valve repair, surgeons use a standard bulb syringe filled with saline to inflate the chamber distal to the valve, creating pressure and watching for leaks.



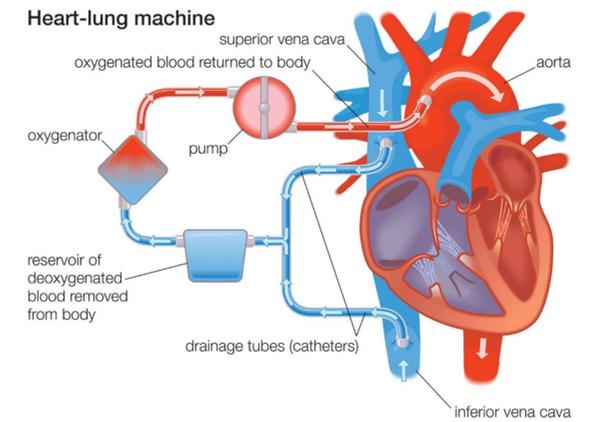
Our Solution: The Salmon Cardiac Cannula



Quantitative Data

Ease of Insertion

Familiar Workflow



Harnessing the utility of cardiopulmonary bypass

Clinical Value Proposition

Improving the quality of valvular assessment will...

- (1) Increase the overall quality of valve repair operations
- (2) Reduce number of reoperations to address excess valve regurgitation.
- (3) Reduce the need for repetitive and extended use of cardiopulmonary bypass.
- (4) Decrease morbidity and mortality from prolonged open times.

Economic Value Proposition

Mitral Valve Surgery TAM

~35,000 procedures | \$40,000 avg cost

\$1.4B

Revenue TAM

~35,000 procedures | \$40,000 avg cost

\$7M

Milestones



IP Protection
Patent forthcoming



FDA Clearance
Completed FDA Pre-Submission



Acquisition
License to cardiac equipment manufacturers