

Investor Presentation

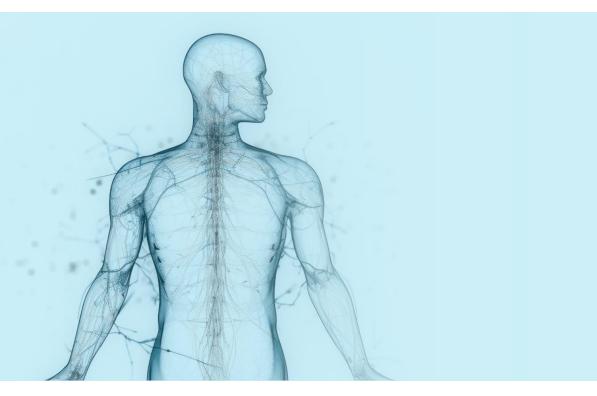
April 2024

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Forward Looking Statements

All statements in this presentation that are not historical are forward-looking statements, including, among other things, statements relating to the effectiveness of the Company's nsPFA technology and CellFX System to non-thermally clear cells while sparing adjacent non-cellular tissue, statements concerning the Company's expected product development efforts, statements concerning the Company's future regulatory strategies and possible government clearances and approvals, statements concerning the Company's future commercial plans, such as the possible launch of two revenue-generating nsPFA products in 2024, statements concerning customer adoption and future use of the CellFX System to address a range of conditions such as atrial fibrillation and benign thyroid nodules, statements about the Company's future financing opportunities and operating expenses, and Pulse Biosciences' expectations, whether stated or implied, regarding whether the Company's nsPFA technology will become a disruptive treatment option for treating cardiac arrhythmias, benign thyroid nodules or any other medical condition and whether future clinical studies will show the CellFX System is safe and effective to treat any medical condition, and other future events. These statements are not historical facts but rather are based on the Company's "would," "should," "anticipate," "predict," "potential," "continue," "expects," "intends," "plans," "projects," "believes," "estimates," and other similar or related factors. Words such as "may," "will," "could," "would," "should," "anticipate," "predict," "potential," isome cases, beyond Pulse Biosciences' control. Actual results may differ materially from those in the forward-looking statements as a result of a number of factors, including the Company's filtere forward-looking statements and unknown risks, uncertainties, and assumptions that are difficult or impossible to predict and, in some cases, beyond Pulse Biosciences' control. Actual results may differ materially from those in the forward-looki





Powering the next generation in bioelectric medicine with Nanosecond Pulsed Field Ablation technology.

Results In A Billionth Of A Second



Proven Leadership Team



Kevin Danahy Chief Executive Officer & President

Mectronic Johnson Johnson ZIMMER BIOMET INTUITIVE



Darrin Uecker Chief Technology Officer & Director

GYNESUNICS'



Mitch Levinson Chief Strategy Officer

thermäge koolsculpting wnellcor

Renowned Scientific Expertise



Dr. Gan Dunnington

Chief Medical Officer



Dr. Niv Ad

Chief Science Officer, Cardiac Surgery

Established Board of Outside Directors



Robert (Bob) W. Duggan Executive Chairman of the Board of Directors



Richard van den Broek Director



Mahkam "Maky" Zanganeh, DDS Director



Shelley D. Spray

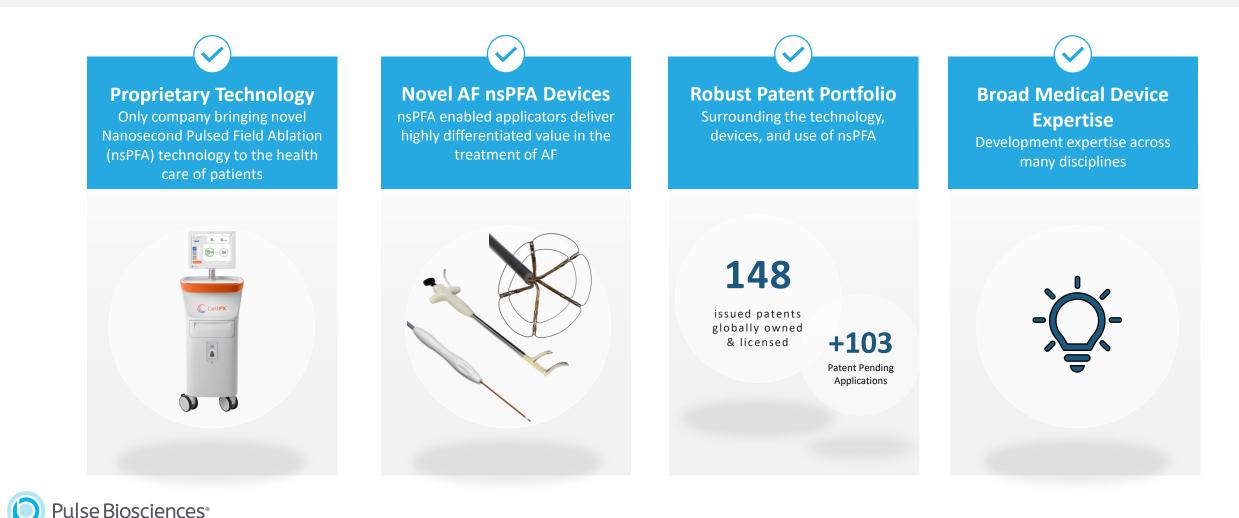
Director

Manmeet S. Soni Director

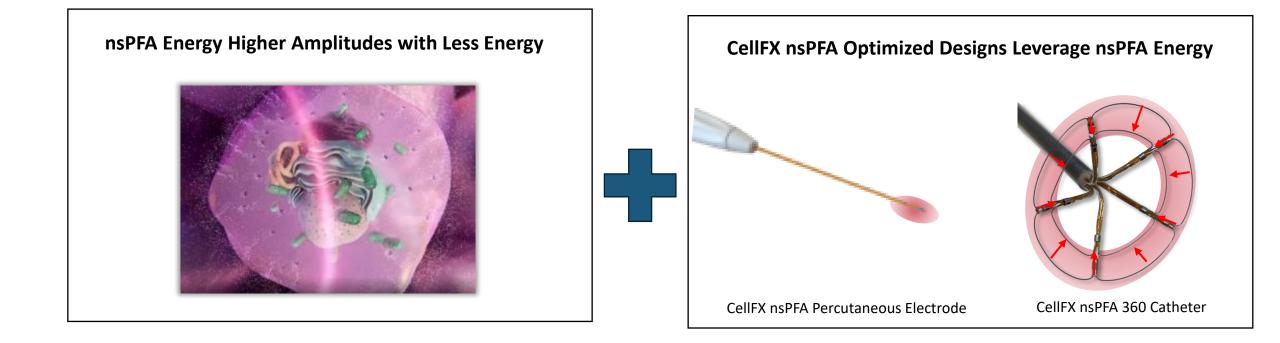
Pulse Biosciences[®]

Proprietary Designed and Engineered

Powering the next generation in bioelectric medicine with Nanosecond Pulsed Field Ablation (nsPFA) Technology



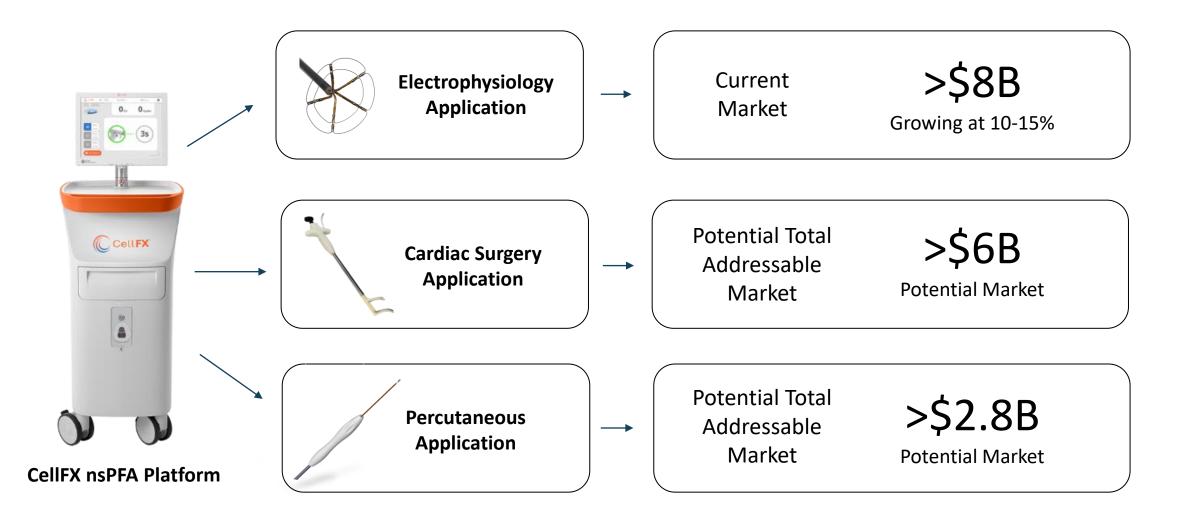
Optimized Procedures Require Both Design and Energy



nsPFA + nsPFA designs = Results only achievable by CellFX nsPFA Technology

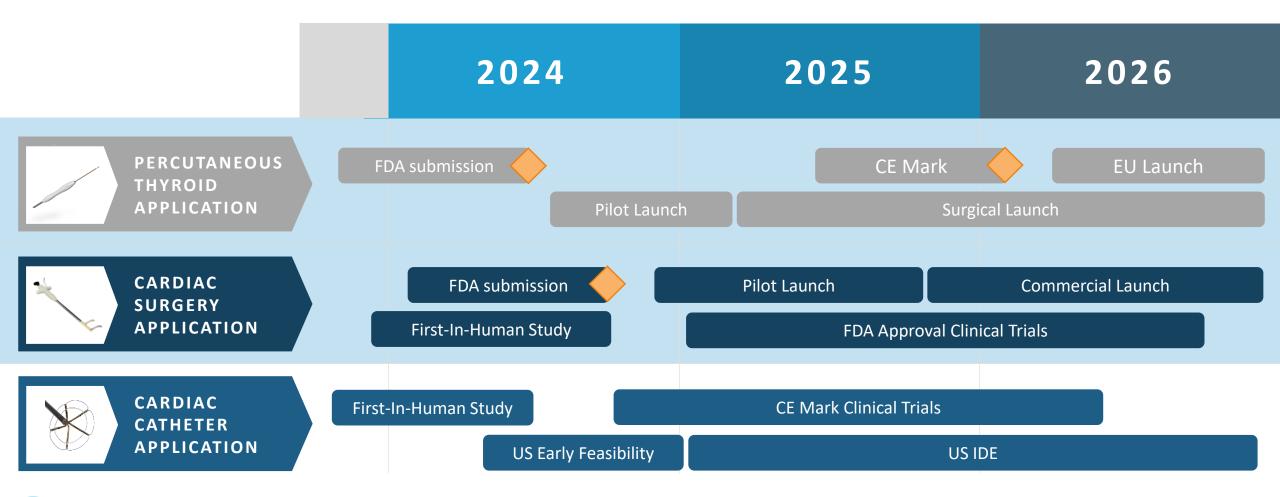


CellFX nsPFA Platform Unlocks >\$16.8B In Current and Potential Markets





✓ Percutaneous Ablation Commercial Pilot Underway ✓ Surgical Cardiac Ablation Commercial Pilot Planned Late 2024





Cardiac Ablation

Next-Generation PFA for AFib





Differentiated Properties of nsPFA Energy Pulses

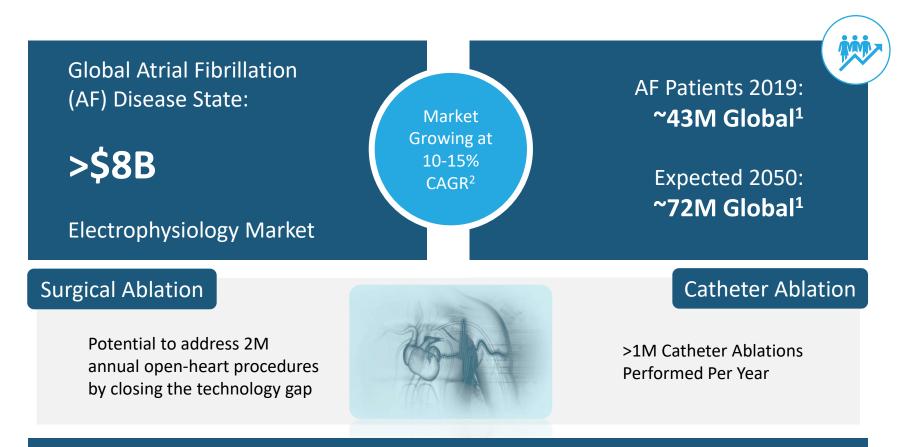
Nanosecond pulses can be **~500 times shorter** than microsecond pulses As a result, nsPFA can require **~20 times less energy** to ablate cardiac tissue

Pulse Biosciences [•] nsPFA uses a <u>nanosecond pulse</u> of higher amplitude and significantly shorter duration	Standard cardiac PFA devices coming to market use RF-Style designs and off-the-shelf generators that are not designed specifically for cardiac PFA applications	
	ses longer, low amplitude g in high total energy delivery	
	Image: Sector	

Pulse Duration



Addressing the Entirety of the Growing AF Market



The same nsPFA energy can be utilized through a programmatic approach to have significant impact across both surgical and catheter-based market segments.

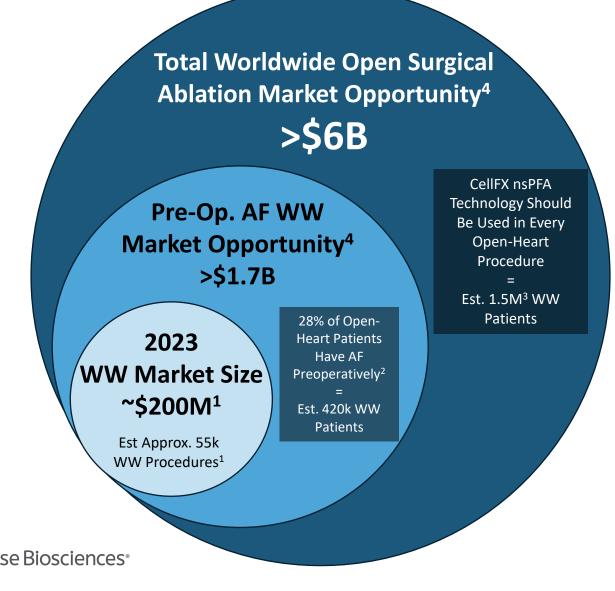


- 1. Prevalence Data: Institute for Health Metrics and Evaluation (IHME). Global Health Data Exchange. Seattle, WA: IHME, University of Washington. Available at http://ghdx.healthdata.org/gbd-results-tool. Location: Countries, Year: 2019, Context: cause, Age: all ages, Metric: number, Measure: prevalence, Sex: both, Cause: B.2.8. Atrial fibrillation and flutter. (Accessed August 24, 2021)
- 2. Wong CX, Brown A, Tse HF, et al. Epidemiology of Atrial Fibrillation: The Australian and Asia-Pacific Perspective. Heart Lung Circ. 2017;26(9):807-879

. Wolfe AF Symposium Report 202

Oppenheimer Report 2020

Surgical Cardiac Ablation >\$6B Total Addressable Market



Surgical Cardiac Ablation Market Size Notes

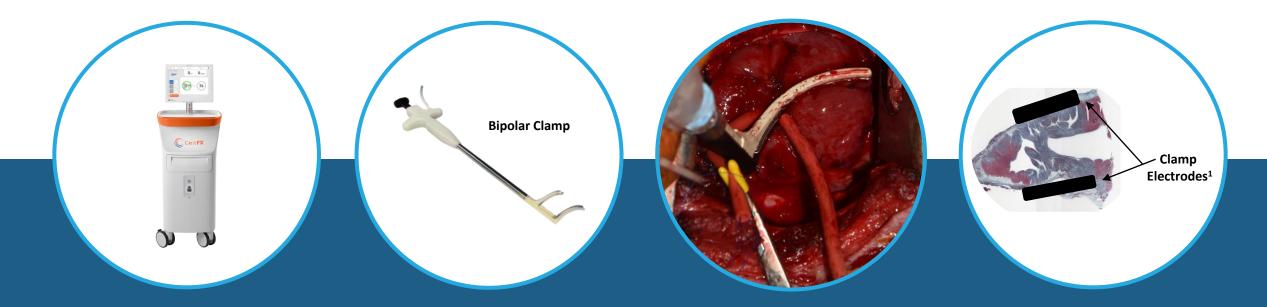
- An estimated 1.5M open heart procedures are performed each year worldwide³
- 28% of open-heart patients have diagnosed Atrial Fibrillation (AF) prior to their surgery and should be treated concomitantly²
- Cardiothoracic surgeon thought leaders Dr. Niv Ad, Dr. Gan Dunnington, and others believe that all patients undergoing open heart surgery should receive ablation due to the risk of developing AF post surgical procedure
- The lesion quality, safety, and speed of CellFX nsPFA technology will reduce the barriers to concomitant ablation and lead surgeons worldwide to touch every heart
- At an WW ASP of more than \$4,000⁵ per procedure, this leads to a total addressable market of more than \$6B
- 1) Data on File. Estimate Based on WW Revenues from Cardiac Ablation Players and Market Share.
- McCarthy, P. M. et al. Prevalence of atrial fibrillation before cardiac surgery and factors associated with concomitant ablation. J. Thorac. Cardiovasc. Surg. 159, 2245-2253.e15.

4) Market size for 2023. 1% CAGR for Surgical Volume.

Global Cardiac Surgical Volume and Gaps: Trends, Targets, and Way Forward. Annals of Thorascic Surgery. 2023, ISSN 2772-9931, <u>https://doi.org/10.1016/j.atssr.2023.11.019</u>.

⁵⁾ ASP based on WW Mix with US Price of \$2,500 for Competitive Clamp, \$1,750 for Competitive Linear Device, \$5,500 for competitive posterior clamp. ©2023-24 Pulse Biosciences, Inc. All rights reserved.

CellFX nsPFA Cardiac Clamp



- A nonthermal cardiac ablation clamp capable of complete transmural ablations in **under 3 seconds**
- Initial preclinical studies have demonstrated speed, precision and transmurality up to ~25mm between electrodes
- Collaborating with top institutions and physicians in pursuit of **regulatory clearance**
- Fundamental IP for nsPFA energy in cardiac ablation

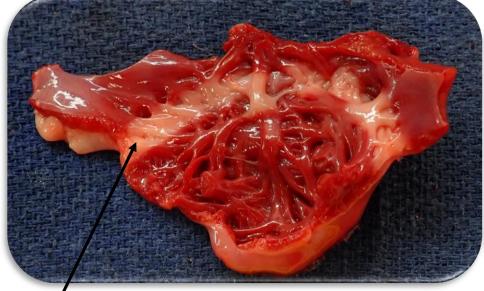
CellFX nsPFA Cardiac Clamp 35-Day Preclinical Results

Safe and Effective: 42 cardiac lesions successfully created with the nsPFA clamp in 1.25 seconds (porcine model, n=6)

100% Exit Block (15/15)



Example of Atrial Appendage Ablation



Ablation Zone on Endocardial Surface Clearly demarcated area of white discoloration indicating the ablated tissue 35 Days post-ablation

100% Continuous Transmural Lesions (42/42)

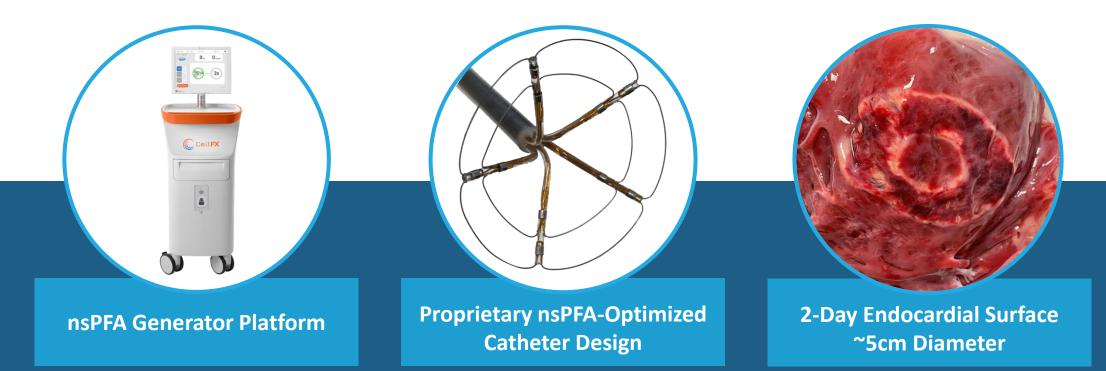


Well Demarcated Ablation Zone

Zone of transmural fibrosis 35 Days post-ablation (stained blue; cardiomyocytes replaced with fibrotic tissues). Unaffected cardiomyocytes on each side of fibrosis zone (stained red)

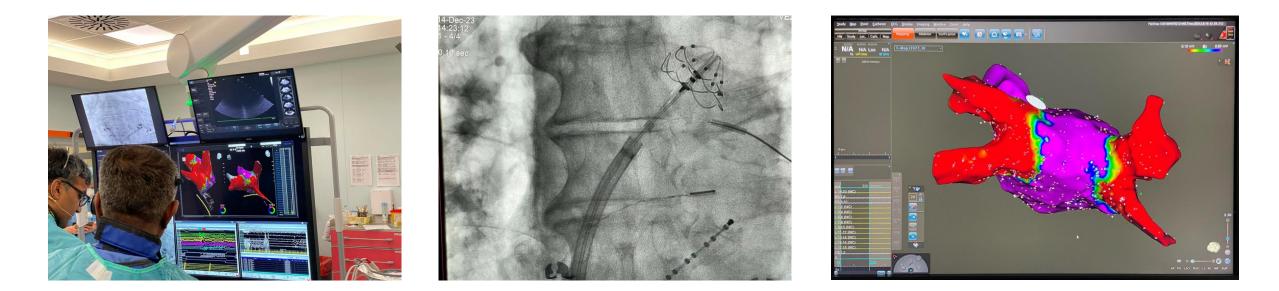


Catheter Delivery of nsPFA Energy – Cardiac Ablation



- Circumferential ablation catheter enabled by nsPFA energy for single-shot PVI ablation
- Reduced muscle spasm and nerve capture due to short duration nsPFA pulses
- No thermal injury due to lower energy of nsPFA pulses
- Preclinical data demonstrating safe, fast and effective ablations
- Compatible with multiple mapping and navigation systems (CardioNXT iMap, JnJ Carto, Abbott Ensite X)

360 nsPFA Catheter Feasibility Study



- Total of 19 subjects treated to date, up to 30 allowed under protocol
- First 14 subjects have had 60-90 day remaps, EP's have never seen better FIH results.
- Enrollment continuing through April/May
- Follow-on studies for CE-mark and/or FDA approval targeted to start by end of '24



Percutaneous Ablation

Opening a new era in ablation therapy for benign and malignant tumors





Versatile Generator Platform Delivers nsPFA Across the Anatomy

Transforming the Minimally Invasive Surgery Market

Minimally Invasive Surgery

- Completed all treatments in First-In-Human Feasibility Study
- Preclinical and clinical data demonstrating safety to collateral structures including nerves, vessels, trachea & esophagus.
- Rapid ablation of tissue
 - 8 seconds per ablation zone
- Single treatment efficacy with evidence of 100% clearance within ablation zone in less than 90 days



FDA 510k Cleared March 2024

Benign Thyroid Nodule Ablation >\$2.8B Total Addressable Market 2023

Benign Thyroid Nodule Ablation Market Size

- Today, more than 800,000¹ patients must undergo thyroidectomy surgery worldwide with many patients having to remain on lifelong thyroid medication
- Approximately 3 in 4 patients undergoing surgery have benign thyroid nodules with 1 in 4 patients having cancerous thyroid nodules
- It is estimated that more than 8 million⁶ people worldwide develop a palpable thyroid nodule without being treated
- Less than 50% of patients that develop a benign thyroid nodule have a thyroidectomy with many choosing not to undergo surgery and electing to tolerate their thyroid nodule
- CellFX nsPFA technology, being a safer, faster, minimally invasive solution, can unlock the watchful waiting patients and potentially double the number of patients
- At an estimated WW Mixed ASP of ~\$2,250⁵ per procedure, this leads to a total addressable market of more than \$2.8B and growing
- 1) Data on file. Thyroidectomy WW Procedure Data provided by iData
- 2) <u>https://www.ncbi.nlm.nih.gov/pmc/articles/PMC8215427/</u>
- 3) Fine-Needle Aspiration of the Thyroid Gland https://www.ncbi.nlm.nih.gov/books/NBK285544/
- 4) CMS https://www.cms.gov/medicare-coverage-database/view/lcd.aspx?lcdid=38968&ver=4
- 5) CDC https://www.cdc.gov/cancer/thyroid/index.htm
- 5) Data on file. Based on WW incidence rates. Based on Internal Market Model.

Pulse Biosciences[®]

Total Worldwide Benign Thyroid Nodule Ablation Market Opportunity 2023 >\$2.8B

CellFX nsPFA Technology Can Access the Watchful Waiting Patient Population

> Est. 1.3M WW Patients^{3,4,5}

Benign Thyroidectomy Market Opportunity 2023 >\$1.4B Market Growing at 6% CAGR¹

> ~75% of Thyroidectomy Patients have Benign Thyroid Nodules^{1,2}

Est. 637k WW Patients¹

First in Human Data Podium Presentation at NASIT 2024

Key Findings and Observations:

- No reported serious adverse events (SAEs)
- Electrode placement and treated areas visualized by ultrasound
- Majority of reduction of treated areas in first 30 days
- No appearance of scarring or fibrosis on follow-up ultrasound

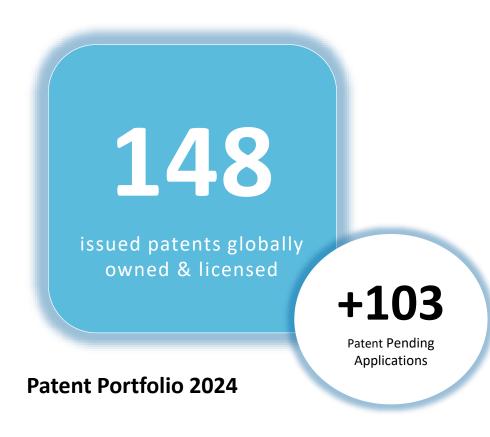






Robust IP Portfolio

Wide and deep IP coverage of nsPFA energy & system



Multipronged Patent Strategy

- Pioneering IP for the use of nanosecond pulses in medicine
- Covering methods and tools for the application of nanosecond pulses in biology
- Continued development and patent filings covering systems, applications, and methods of combining nanosecond pulsing with other biological technologies and agents





Expect to initiate Limited Market Release with 2 of 3 product lines in 2024



CellFX nsPFA cardiac ablation clamp – filed FDA 510(k) submission December 2023 with plans to pilot following clearance



CellFX nsPFA cardiac ablation catheter – commenced first-in-human catheter ablation feasibility study in December 2023 with plans to expand enrollment



CellFX nsPFA percutaneous electrode – FDA 510(k) clearance in March 2024 with plans to initiate pilot through 2024