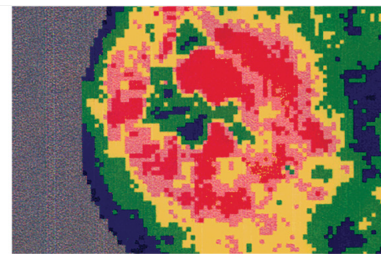
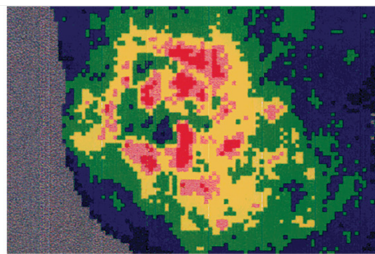


The UltraMIST® System Promotes Healing

VASODILATION

Factors such as adequate perfusion and vasodilation are required to promote the healing process.

MIST® THERAPY IMPROVED PERFUSION TO THE WOUND BED FOR WOUND HEALING¹



PRE-MIST

POST-MIST

(10 minutes after
treatment was completed)



Mayo Clinic*¹

- Laser Doppler was used to evaluate blood flow in a wound care patient
- Blood flow was assessed at baseline (prior to the five-minute MIST therapy treatment) and then 10 minutes after the treatment was concluded
- Vasodilation perfusion continued to improve post-MIST treatment

PERFUSION IS CRITICAL IN TREATING DEEP TISSUE PRESSURE INJURIES (DTPIs)^{2,3}

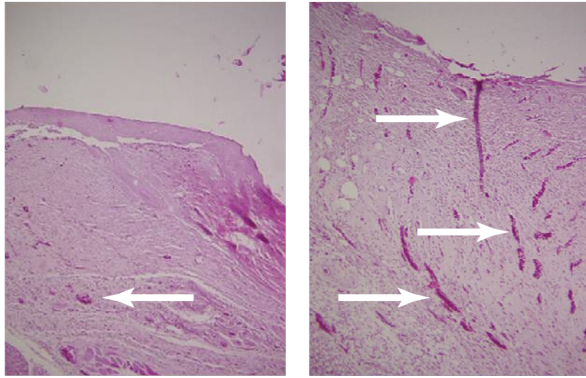
A RETROSPECTIVE STUDY OF 127 DTPIs FOUND 80% DID NOT PROGRESS
BEYOND A STAGE II ULCER WITH ULTRAMIST® AND STANDARD OF CARE (SOC)
VS. 22% OF THOSE TREATED WITH SOC ALONE.³

UltraMIST therapy removes barriers to healing.

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MIST® THERAPY ACCELERATED NEW BLOOD VESSEL INFORMATION

New Blood Vessel Formation

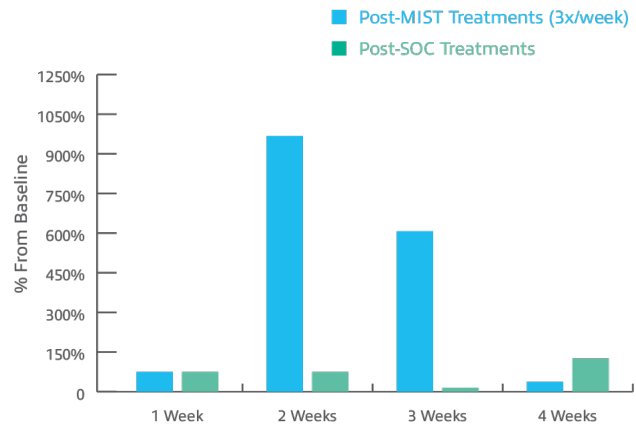


SHAM CONTROL

MIST® TECHNOLOGY

Dark Pink = Blood Vessels

MIST therapy Promoted Vascular Endothelial Growth Factor (VEGF) Expression in Non-Healing DFUs



University of Western Ontario⁴

- Diabetic mouse model
- Five UltraMIST® treatments
- Granulation tissue cross sections were stained to look at new blood vessel development
- Blood vessel count
 - Control: 25.7 ± 20.3, MIST: 41.2 ± 23.0 (P<0.05)

Boston University^{*5}

- 12 patients with an average ulcer duration of 29 weeks
- Three study groups: one standard of care (SOC) and two UltraMIST groups
- 12 UltraMIST treatments
- VEGF spiked after six MIST treatments to stimulate angiogenesis and then declined as the wound moved on to healing
- SOC-treated group: 39% wound area reduction
- UltraMIST-treated group: 86% wound area reduction

UltraMIST therapy removes barriers to healing.

*Data was compiled utilizing MIST® therapy. UltraMIST® is the successor but maintains the same mechanism of action. For more information, please refer to the UltraMIST® therapy instructions for use.

1. Liedl DA, Kavros SJ. The effect of mist ultra-sound transport technology on cutaneous microcirculatory blood flow. Abstract. SAWC, 2001. 2. Honaker J, Forston M. Adjunctive use of noncontact low-frequency ultrasound for treatment of suspected deep tissue injury: a case series. J Wound Ostomy Continence Nurs. 2011;38(4):394-403. 3. Honaker JS, Forston MR, Davis EA, Wiesner MM, Morgan JA. Effects of noncontact low-frequency ultrasound on healing of suspected deep tissue injury: A retrospective analysis. Int Wound J. 2013;10(1):65-72. 4. Thawer HA, Houghton PE. Effects of ultrasound delivered through a mist of saline to wounds in mice with diabetes mellitus. J Wound Care. 2004;13(5):1-6. 5. Yao M, Hasturk H, Kantarci A, et al. A pilot study evaluating noncontact low frequency ultrasound and underlying molecular mechanism on diabetic foot ulcers. Int Wound J. 2014;11(6):586-593.