

**UNITED STATES
SECURITIES AND EXCHANGE COMMISSION
WASHINGTON, D.C. 20549**

FORM 8-K

**CURRENT REPORT
Pursuant to Section 13 or 15(d) of the
Securities Exchange Act of 1934**

Date of Report (Date of earliest event reported): July 13, 2021

AngioDynamics, Inc.

(Exact Name of Registrant as Specified in Charter)

Delaware (State or Other Jurisdiction of Incorporation)	000-50761 (Commission File Number)	11-3146460 (IRS Employer Identification No.)
14 Plaza Drive Latham, New York (Address of Principal Executive Offices)	12110 (Zip Code)	
	(518) 795-1400 (Registrant's telephone number, including area code)	

Check the appropriate box below if the Form 8-K filing is intended to simultaneously satisfy the filing obligation of the registrant under any of the following provisions:

- Written communications pursuant to Rule 425 under the Securities Act (17 CFR 230.425)
- Soliciting material pursuant to Rule 14a-12 under the Exchange Act (17 CFR 240.14a-12)
- Pre-commencement communications pursuant to Rule 14d-2(b) under the Exchange Act (17 CFR 240.14d-2 (b))
- Pre-commencement communications pursuant to Rule 13e-4(c) under the Exchange Act (17 CFR 240.13e-4 (c))

Securities registered pursuant to Section 12(b) of the Act:

<u>Title of each class</u>	<u>Trading Symbol(s)</u>	<u>Name of each exchange on which registered</u>
Common Stock, par value \$0.01 per share	ANGO	NASDAQ Global Select Market

Indicate by check mark whether the registrant is an emerging growth company as defined in Rule 405 of the Securities Act of 1933 (§230.405 of this chapter) or Rule 12b-2 of the Securities Exchange Act of 1934 (§240.12b-2 of this chapter).

Emerging growth company

If an emerging growth company, indicate by check mark if the registrant has elected not to use the extended transition period for complying with any new or revised financial accounting standards provided pursuant to Section 13(a) of the Exchange Act.

Item 7.01 – Regulation FD Disclosure.

On July 13, 2021, AngioDynamics, Inc. (“AngioDynamics”) will host the AngioDynamics’ Investor & Technology Day. The presentation slides are furnished herewith as Exhibit 99.1.

The presentation slides furnished pursuant to Item 7.01 of this Form 8-K (including Exhibit 99.1) shall not be deemed “filed” for purposes of Section 18 of the Securities Exchange Act of 1934, as amended (the “Exchange Act”), or otherwise subject to the liabilities under that Section. Furthermore, the presentation slides shall not be deemed to be incorporated by reference into any filing under the Securities Act of 1933, as amended, or the Exchange Act.

Forward-Looking Statements

This document and its attachments contain forward-looking statements within the meaning of the Private Securities Litigation Reform Act of 1995. All statements regarding AngioDynamics’ expected future financial position, results of operations, cash flows, business strategy, budgets, projected costs, capital expenditures, products, competitive positions, growth opportunities, plans and objectives of management for future operations, as well as statements that include the words such as “expects,” “reaffirms,” “intends,” “anticipates,” “plans,” “believes,” “seeks,” “estimates,” “project,” “optimistic,” or variations of such words and similar expressions, are forward-looking statements. These forward-looking statements are not guarantees of future performance and are subject to risks and uncertainties. Investors are cautioned that actual events or results may differ materially from AngioDynamics’ expectations, express or implied. Factors that may affect the actual results achieved by AngioDynamics include, without limitation, the scale and scope of the COVID-19 global pandemic, the ability of AngioDynamics to develop its existing and new products, technological advances and patents attained by competitors, infringement of AngioDynamics’ technology or assertions that AngioDynamics’ technology infringes the technology of third parties, the ability of AngioDynamics to effectively compete against competitors that have substantially greater resources, future actions by the FDA or other regulatory agencies, domestic and foreign health care reforms and government regulations, results of pending or future clinical trials, overall economic conditions, the results of on-going litigation, challenges with respect to third-party distributors or joint venture partners or collaborators, the results of sales efforts, the effects of product recalls and product liability claims, changes in key personnel, the ability of AngioDynamics to execute on strategic initiatives, the effects of economic, credit and capital market conditions, general market conditions, market acceptance, foreign currency exchange rate fluctuations, the effects on pricing from group purchasing organizations and competition, the ability of AngioDynamics to integrate acquired businesses, as well as the risk factors listed from time to time in AngioDynamics’ SEC filings, including but not limited to its Annual Report on Form 10-K for the year ended May 31, 2020 and its Quarterly Reports on Form 10-Q for the fiscal periods ended August 31, 2020, November 30, 2020 and February 28, 2021. AngioDynamics does not assume any obligation to publicly update or revise any forward-looking statements for any reason.

Item 9.01 – Financial Statements and Exhibits.

(d) *Exhibits.*

<u>Exhibit No.</u>	<u>Description</u>
99.1	Presentation slides for the AngioDynamics Investor & Technology Day, dated July 13, 2021

SIGNATURE

Pursuant to the requirements of the Securities Exchange Act of 1934, the registrant has duly caused this report to be signed on its behalf by the undersigned hereunto duly authorized.

ANGIODYNAMICS, INC.
(Registrant)

Date: July 13, 2021

By: /s/ Richard C. Rosenzweig
Name: Richard C. Rosenzweig
Title: Senior Vice President,
General Counsel and Secretary



INVESTOR & TECHNOLOGY DAY

JULY 2021

9:30 – 10:50 AM ET |

BUSINESS PRESENTATIONS

ANGIODYNAMICS OVERVIEW

GROWTH STRATEGY & TECHNOLOGY OVERVIEW

KEY TECHNOLOGY PLATFORM OVERVIEW

THROMBUS MANAGEMENT – **ANGIOVAC & ALPHAVAC**

PERIPHERAL ATHERECTOMY – **AURYON**

IRREVERSIBLE ELECTROPORATION – **NANOKNIFE**

VASCULAR ACCESS AND MED DEVICES

GLOBAL HEALTHCARE ECONOMICS

10:50 – 11:00 AM ET |

FINANCIAL GOALS & CAPITAL ALLOCATION

11:00 – 11:30 AM ET |

Q&A

Notice Regarding Forward-Looking Statements

This presentation contains forward-looking statements within the meaning of the Private Securities Litigation Reform Act of 1995. All statements regarding AngioDynamics' expected future financial position, results of operations, cash flows, business strategy, budgets, projected costs, capital expenditures, products, competitive positions, growth opportunities, plans and objectives of management for future operations, as well as statements that include the words such as "expects," "reaffirms," "intends," "anticipates," "plans," "projects," "believes," "seeks," "estimates," "optimistic," or variations of such words and similar expressions, are forward-looking statements. These forward-looking statements are not guarantees of future performance and are subject to risks and uncertainties. Investors are cautioned that actual events or results may differ materially from AngioDynamics' expectations, expressed or implied. Factors that may affect the actual results achieved by AngioDynamics include, without limitation, the scale and scope of the COVID-19 global pandemic, the ability of AngioDynamics to develop its existing and new products, technological advances and patents attained by competitors, infringement of AngioDynamics' technology or assertions that AngioDynamics' technology infringes the technology of third parties, the ability of AngioDynamics to effectively compete against competitors that have substantially greater resources, future actions by the FDA or other regulatory agencies, domestic and foreign health care reforms and government regulations, results of pending or future clinical trials, overall economic conditions, the results of on-going litigation, challenges with respect to third-party distributors or joint venture partners or collaborators, the results of sales efforts, the effects of product recalls and product liability claims, changes in key personnel, the ability of AngioDynamics to execute on strategic initiatives, the effects of economic, credit and capital market conditions, general market conditions, market acceptance, foreign currency exchange rate fluctuations, the effects on pricing from group purchasing organizations and competition, the ability of AngioDynamics to obtain regulatory clearances or approval of its products, or integrate acquired businesses, as well as the risk factors listed from time to time in AngioDynamics' SEC filings, including but not limited to its Annual Report on Form 10-K for the year ended May 31, 2020. AngioDynamics does not assume any obligation to publicly update or revise any forward-looking statements for any reason.

In the United States, the NanoKnife System has received a 510(k) clearance by the Food and Drug Administration for use in the surgical ablation of soft tissue, and is similarly approved for commercialization in Canada, the European Union and Australia. The NanoKnife System has not been cleared for the treatment or therapy of a specific disease or condition.

Notice Regarding Non-GAAP Financial Measures

Management uses non-GAAP measures to establish operational goals and believes that non-GAAP measures may assist investors in analyzing the underlying trends in AngioDynamics' business over time. Investors should consider these non-GAAP measures in addition to, not as a substitute for or as superior to, financial reporting measures prepared in accordance with GAAP. In this presentation, AngioDynamics has included adjusted earnings per share. Management uses these measures in its internal analysis and review of operational performance. Management believes that these measures provide investors with useful information in comparing AngioDynamics' performance over different periods. By using these non-GAAP measures, management believes that investors get a better picture of the performance of AngioDynamics' underlying business. Management encourages investors to review AngioDynamics' financial results prepared in accordance with GAAP to understand AngioDynamics' performance taking into account all relevant factors, including those that may only occur from time to time but have a material impact on AngioDynamics' financial results.

Disclaimers:

This presentation includes videos of key opinion leaders, who are paid consultants of AngioDynamics. The views and opinions expressed by these key opinion leaders are their own and do not necessarily reflect the views and opinions of AngioDynamics.

The FDA-approved/cleared labeling for all products may not be consistent with all uses described herein. These videos are in no way intended to promote the off-label use of medical devices. AngioDynamics only markets its products in accordance with their cleared or approved labeling.

AngioDynamics has a rich history that is deeply rooted in upstate New York's region known as "Catheter Valley."

33

YEARS

The Company has grown through its many phases to become a global, industry-leading provider of high-quality medical technology used by physicians for the treatment of cancer and peripheral vascular disease.

STRATEGIC TRANSFORMATION



PURSUE LARGER, FASTER GROWING MARKETS

Active portfolio management enables us to compete in larger, faster growing markets relying on technology & innovation to produce measurable patient outcomes

DEPLOY FOCUSED RESOURCE DEVELOPMENT

Resource deployment focused in areas that offer better opportunities for success

DRIVE PORTFOLIO TRANSFORMATION

Portfolio transformation & strength driven by R&D, M&A, and Clinical & Regulatory

ATTRACT AND RETAIN TOP TALENT

Strong and innovative portfolio combined with top talent drives value

MED TECH

Invest for Growth

Thrombus Management

AngioVac Uni-Fuse⁺



Peripheral Atherectomy

AURYON

Irreversible Electroporation



MED DEVICE

Maintain Positioning

Vascular Access Catheters and Accessories

Diagnostic Catheters, Guidewires and Kits

Endovenous Laser Treatment

Microwave & Radiofrequency Tumor Ablation

Lung Biopsy
Safety

Radiation Treatment Stabilization Balloons

AlphaVac commercial launch planned for 4th quarter calendar year 2021.

Focus on Innovative Medical Technologies

Leveraging **three main drivers** to carve out our space in large, growing markets through innovative, disruptive technologies that treat patients with cancer, promote healthy blood flow and deliver critical therapies.



Advancing Our Transformation

R & D

**Clinical & Regulatory
Pathway Expansion**

M & A

FOCUSED TRANSFORMATION

U.S. Total Addressable Markets

FY2025

Planned Thrombectomy & PE portfolio additions & new indications increase market access

FY2023

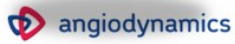
Planned Thrombectomy & NanoKnife System portfolio additions & new indications increase market access

FY2021

Launch of the Auryon System gives us access to the peripheral atherectomy market

FY2018

Began our strategic initiative to become a growth company



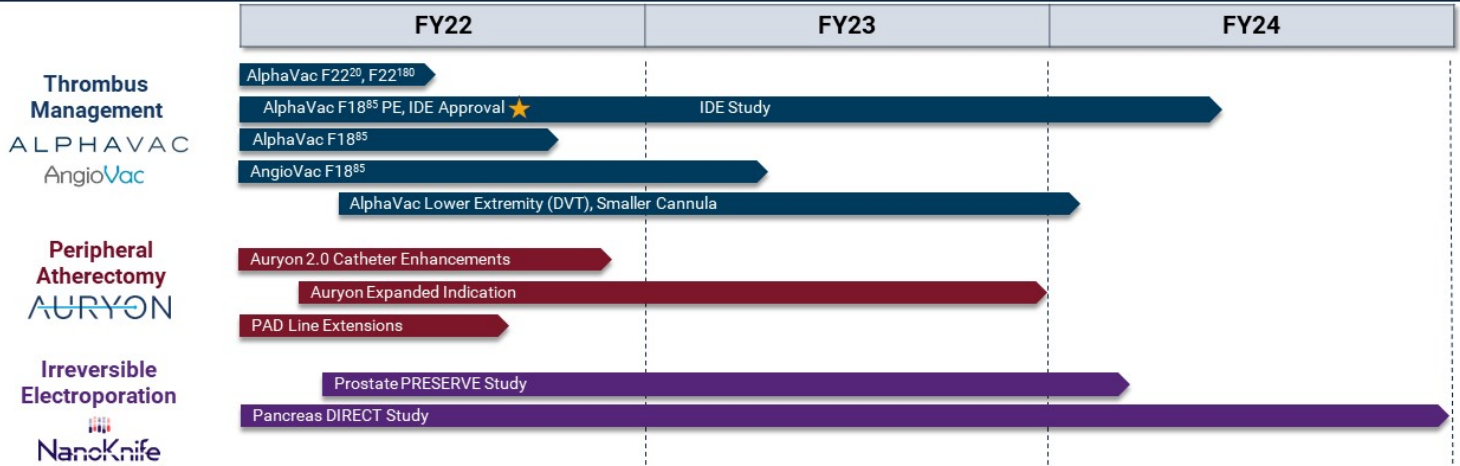
The planned portfolio additions and new indications are not guarantees of future performance and are subject to risks and uncertainties including FDA clearance. Investors are cautioned that actual events or results may differ from AngioDynamics' expectations.

TECHNOLOGY PIPELINE

PRODUCT LAUNCHES

REGULATORY CLEARANCES

REIMBURSEMENT SUPPORT




The planned portfolio additions and new indications are not guarantees of future performance and are subject to risks and uncertainties including FDA clearance. Investors are cautioned that actual events or results may differ from AngioDynamics' expectations.

MED TECH

THROMBUS MANAGEMENT

AngioVac |  ALPHAVAC | Uni-Fuse⁺

MULTIPURPOSE MECHANICAL ASPIRATION

 angiodynamics

VTE Represents 390k Cases Annually

Deep Vein
Thrombosis

DVT

A blood clot that forms in a deep vein, usually the leg, groin or arm

208,000 Iliofemoral Cases¹

Pulmonary
Embolism

PE

A DVT breaks free from a vein wall and travels to the lungs blocking some or all of the blood supply

171,000 High-risk & intermediate-risk PE Cases¹

+

=

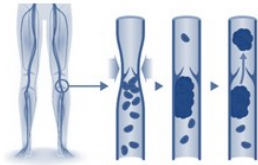
Venous Thromboembolism

VTE

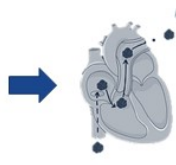
DVT and PE are collectively referred to as VTE

- **VTE Affects up to 900k Americans each year**
- **100,000 VTE-Related Deaths in the USA Annually²**
- *Roughly 30% of Americans who get a blood clot will have a reoccurrence in less than 10 years*
- *VTE Costs our US Healthcare system \$10 Billion a year*

<https://www.cdc.gov/ncbddd/dvt/data.html>



Stages of Clot



Clot in Transit
(traveling through the heart)



Clot in Pulmonary
Arteries (PE)

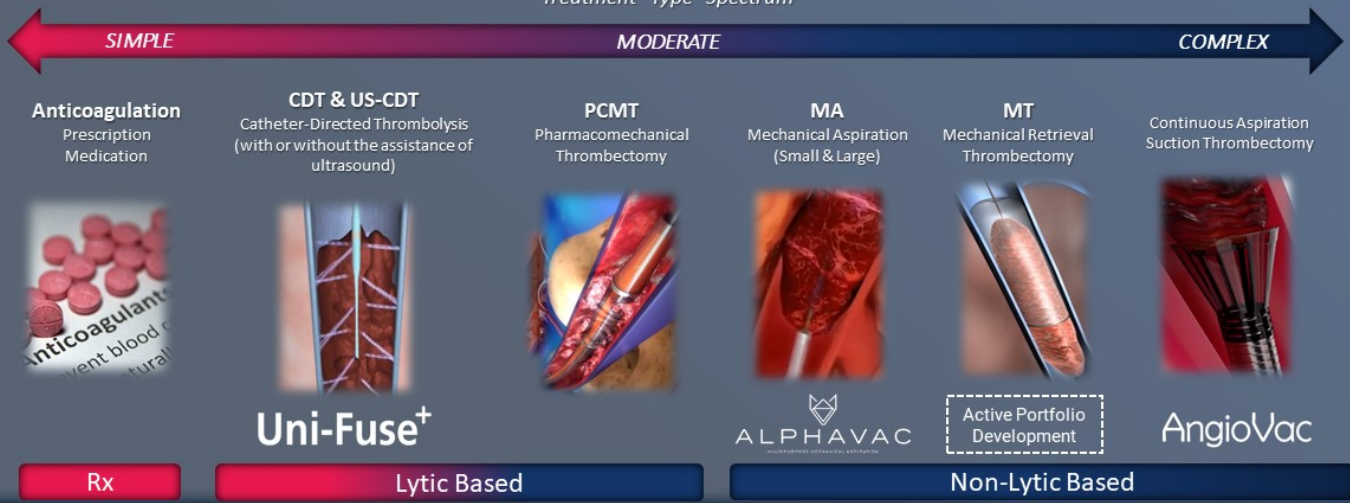
 **angiodynamics**

1. Piorath, W. J., & Puhong, C. (2020, June). *Heart Medical Biomedical Devices and Services: Caraborn Convity Capital Markets*.
2. "Venous Thromboembolism (VTE)." *World Thrombosis Day*. www.worldthrombosiday.org/tausa/ta.
Illustrations and Images not Produced by AngioDynamics include:
<https://www.legalsciencemagazine.com/2018/08/2018-08-01-01>
[DVT Blood Clot in the Leg](https://www.legalsciencemagazine.com/2018/08/2018-08-01-01), [Pulmonary Embolism](https://www.legalsciencemagazine.com/2018/08/2018-08-01-01) (a.medicinethat.com)

DVT & PE TREATMENT OPTIONS

Percutaneous Thrombectomy

Treatment "Type" Spectrum



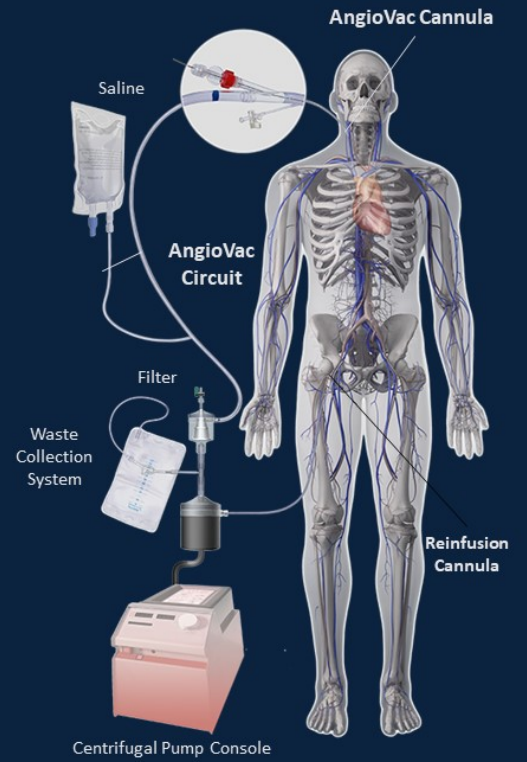
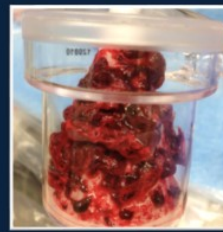
Illustrations and Images not Produced by AngioDynamics Include:
<https://youtu.be/DQUUBZ6Bx5o>
<https://www.penumbrainc.com/indigo-lightning/>
<https://www.vascularmedcure.com/ourproducts>

The AngioVac Difference

The AngioVac System allows for the **continuous aspiration** of embolic material such as fresh, soft thrombi or vegetation from the venous system

Utilizing a self-expanding, nitinol reinforced **funnel tip**

Simultaneously reinfusing the patient's own filtered blood to limit procedural blood loss



Individual experience may not be indicative of all procedure results.

THE NEXT GENERATION OF ANGIOVAC

Physician requests for use in DVT drive new product development



THE NEXT PORTFOLIO INNOVATION

A purpose-built, innovative product leveraging the strengths of the AngioVac cannula technology with *off-circuit* manual aspiration control



Powerful

Proven funnel tip design allows efficient aspiration and compression of large clot burden



Controlled

Designed to allow the end-user command and control of the mechanical aspiration

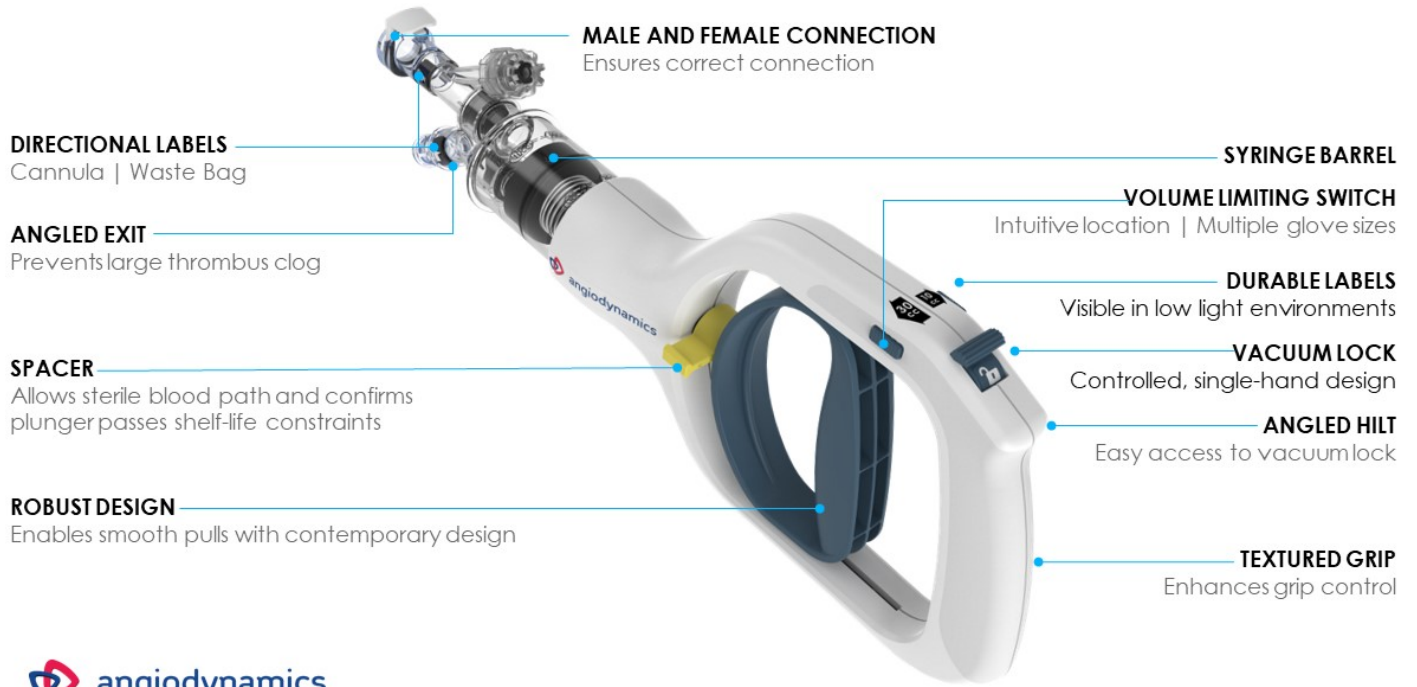


Versatile

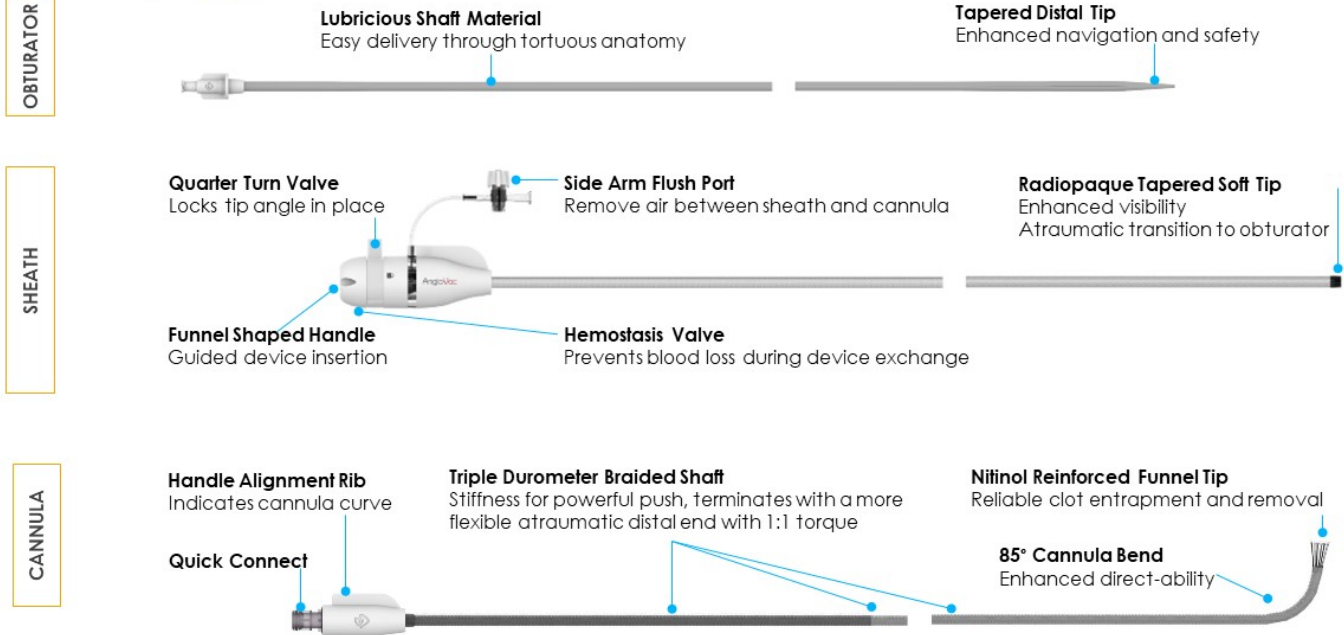
Broadens Thrombus Management portfolio and is designed to provide an intuitive, first-line treatment option without the need for lytics and advanced procedural support

AlphaVac commercial launch planned for 4th quarter calendar year 2021.

Handle | Control Features

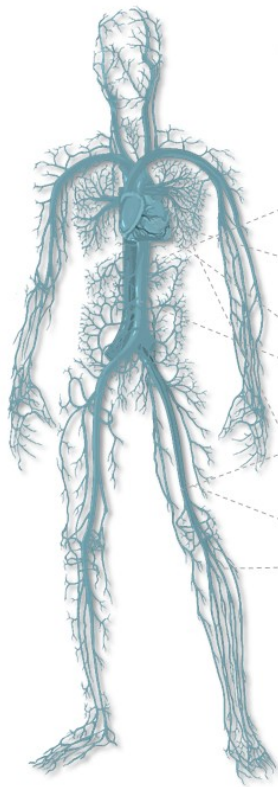


F18^{85°} Cannula | Simple Design. Powerful Features.



**Purpose-Built
Portfolio to
Address the
Removal of Clot &
Thrombus from
Neck to Knee**

ALPHA  VAC **AngioVac**



F22^{20°}



F22^{180°}



F18^{85°}



F13^{10°}

NA



F18^{85°} PE



AlphaVac F18^{85°} and F13^{10°} are not cleared by the Food and Drug Administration (FDA). These statements and the subject product have not been evaluated by the FDA. The device is not currently being marketed, nor is it available for sale in any country. AlphaVac commercial launch planned for 4th quarter calendar year 2021.

AngioVac & AlphaVac Nomenclature

F22^{180°}

Represents the
French Size of our
cannula

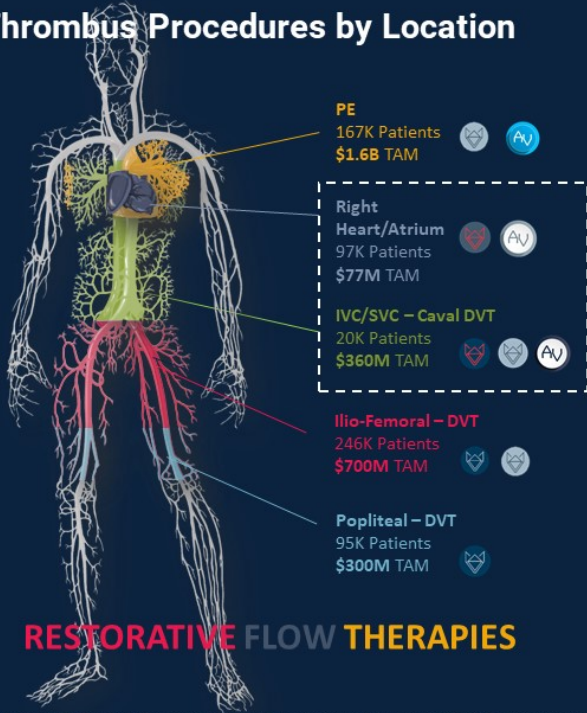
Represents the
Angle/Degree of
our cannula tip

Example



ADDRESSABLE MARKET

Thrombus Procedures by Location



RESTORATIVE FLOW THERAPIES

AlphaVac F18⁸⁵ and F13¹⁰ are not cleared by the Food and Drug Administration (FDA). These statements and the subject product have not been evaluated by the FDA. The device is not currently being marketed, nor is it available for sale in any country. AlphaVac and AngioVac are not indicated for PE.

Deliberate Attention to Key Technology Elements

	AngioVac F22 ²⁰	AngioVac F22 ¹⁸⁰	AlphaVac F18 ⁸⁵	AlphaVac F13 ¹⁰	AlphaVac F18 ⁸⁵ PE
Funnel Tip Opening FR Size	42FR	42FR	33FR	~16FR	33FR
Cannula Angle Degree	20°	180°	85°	10°	85°
Cannula FR Size	22FR Cannula 25FR Sheath	22FR Cannula 25FR Sheath	18FR Cannula 22FR Sheath	~13FR Cannula ~16FR Sheath	18FR Cannula 22FR Sheath
Modality Type					
Availability	FY22 Q2/3	FY22 Q2/3	FY22 Q3*	FY23 Q4*	FY24 Q4*

AlphaVac commercial launch planned for 4th quarter calendar year 2021.

RAPID REGISTRY

REGISTRY OF ANGIOVAC PROCEDURES IN DETAIL

Objective: To evaluate the patterns of use, safety and effectiveness data of the AngioVac device in bulk removal of endovascular material.

Principal Investigator: **Dr. John Moriarty, UCLA**

Number of patients enrolled: **234**

Number of sites: **21**

Recruitment goal: **200**

Timeline: **2016 - 2019**

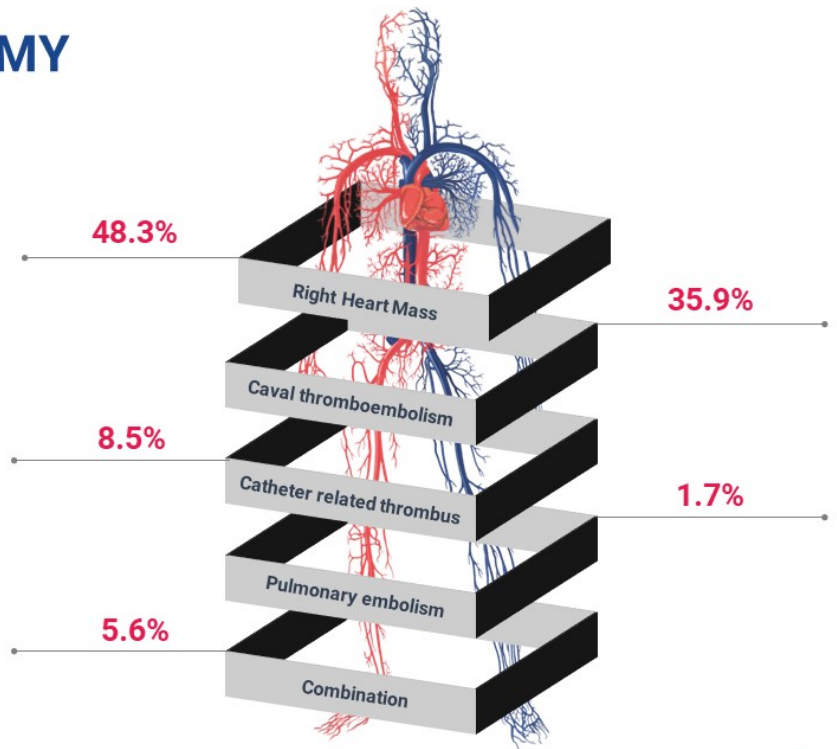


RAPID – TARGET ANATOMY

- Right Heart Mass: **123**
- Caval thromboembolism*: **91**
- Catheter related thrombus: **25**
- Pulmonary embolism*: **7**
- Combination of above = **5.6 %**

* Rounding decimals to the nearest whole number

Moriarty et al, Endovascular removal of thrombus and right heart masses using the AngioVac system. Results of 234 patients from the prospective multicenter registry of AngioVac procedures in detail (RAPID). JVIR. Accepted



* The AngioVac Cannula is indicated for use as a venous drainage cannula and for removal of fresh, soft thrombi or emboli. Use of the AngioVac cannula in the Pulmonary Arteries is off-label. All procedures performed in the registry using the Generation 2 cannula.

RAPID – KEY TAKEAWAYS

1

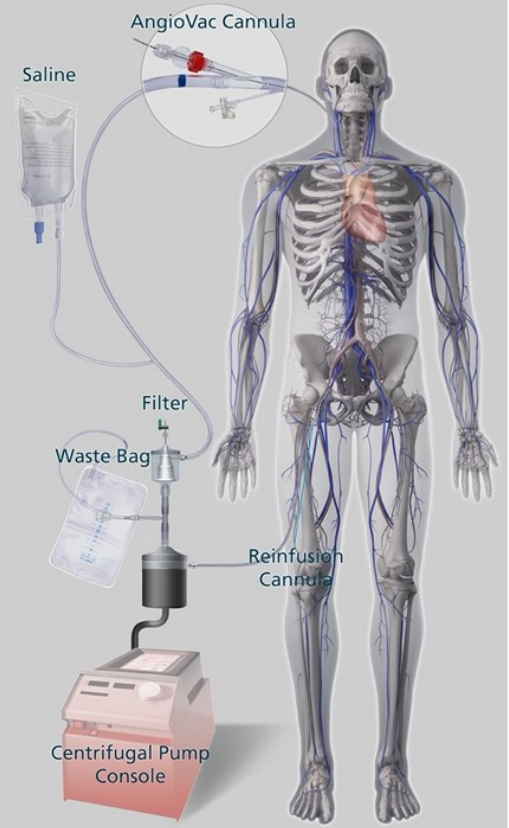
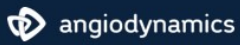
First large scale prospective multicenter assessment of the AngioVac system.



Effective: Majority of patients have > 70% clot/mass removed.



Safe: 75% of all cases no RBC transfusion with 6 (2%) major hemorrhage, 1 procedure-related death.



PE IDE STUDY

PE IDE Study: A Prospective, Multicenter, Single-arm Study

Seek **FDA clearance for Pulmonary Embolism Indication**: Determine the safety and effectiveness of the AlphaVac F18^{85°} in a prospective trial of patients with acute intermediate-risk pulmonary embolism (PE)

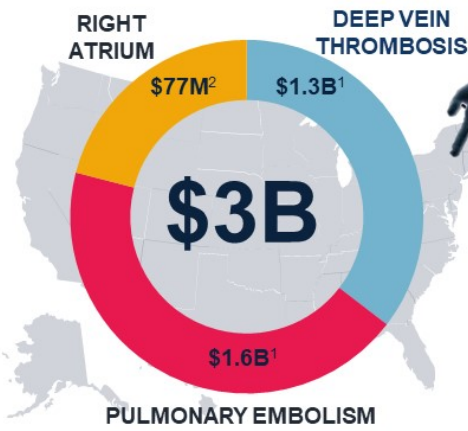
Patient Enrollment Target: **122**

Timeline: **2022-2024, Currently in study design discussions with FDA**



THROMBUS MANAGEMENT

Purpose Built Portfolio & Technology



CURRENT PORTFOLIO

Right Atrium **AngioVac's** use is currently focused on the Right Atrium, which is a \$77M addressable market.

EXPANDED PORTFOLIO

Pulmonary Embolism **AlphaVac**, a multi-purpose mechanical aspiration device, will allow us to compete in the broader DVT & PE addressable markets (\$2.9B) with a first-line treatment option without the need for perfusion.

Deep Vein Thrombosis

CURRENT PORTFOLIO

DVT & PE **Uni-Fuse+** catheter directed thrombolysis now has the additional indication for placement in the pulmonary artery.

COMPLEX
MODERATE
SIMPLE

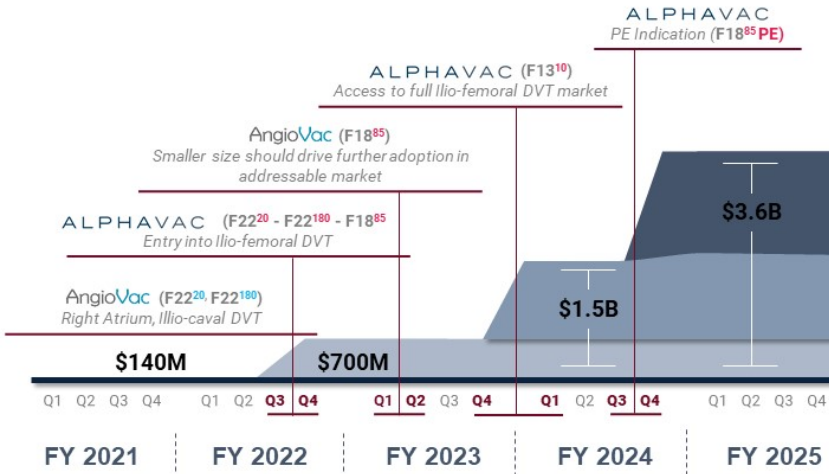


¹ Plovnic, W. J. & Furlong, C. (2020, June). Inari Medical Biomedical Devices and Services. Canaccord Genuity Capital Markets.
² Fletcher Spaght, Inc. AngioVac market assessment March 2018, AngioDynamics funded

AlphaVac commercial launch planned for 4th quarter calendar year 2021.

THROMBUS MANAGEMENT

Planned Portfolio Additions & U.S. Addressable Markets Expansion



The planned portfolio additions are not guarantees of future performance and are subject to risks and uncertainties, including clearance by the FDA. Investors are cautioned that actual events or results may differ from AngioDynamics' expectations.

**Purpose Built,
Comprehensive,
Thrombus Portfolio**

AngioVac
Continuous Aspiration with Simultaneous Reinfusion
F22²⁰ | F22¹⁸⁰ | F18⁸⁵ | 18⁸⁵ PE | F13¹⁰

ALPHAVAC
Multi-purpose Mechanical/Manual Aspiration
F22²⁰ | F22¹⁸⁰ | F18⁸⁵ | 18⁸⁵ PE | F13¹⁰


Uni-Fuse⁺
Catheter Directed Thrombolysis with PE Indication



MED TECH

PERIPHERAL ATHERECTOMY

AURYON

 angiodynamics

PERIPHERAL ATHERECTOMY

US Addressable Markets & Competitive Landscape

2021 Served Market

MECHANICAL

LASER

77%¹

23%¹

\$600M

- Over 8 Million² Americans Suffer from PAD
- Over 150,000 Limbs² are Lost Every Year because of PAD
- 50% Mortality Rate² Associated with PAD after Limb Loss

1. Peripheral Vascular Devices Medtech 360 Market Analysis US 2017. (2016, December). Millennium Research Group, Inc.

2. <https://www.cookmedical.com/peripheral-intervention/10-facts-about-peripheral-arterial-disease/>



ADAPTABLE

Treats all levels of calcification^{1,4}

- Cleared for in-stent restenosis*
- Treats infringuinal lesions both above and below the knee (including below the ankle)
- Built-in off-centering mechanism for eccentric lesions in largest catheter
- Nonreactive to contrast media for simultaneous ablation and observation of fluoroscopy image

*Only the 2.0- and 2.35-mm catheters are cleared for in-stent restenosis (ISR).



PRECISE

Protective of the vessel wall^{1,3,5-9}

- Performs targeted biological reactions to address risk of perforations
- Wavelength produces a photon energy that's hard on calcium and soft on vessel walls
- Vaporizes lesions without thermal ablation
- Can treat any lesion
- Built-in aspiration⁸ addresses risk of embolization

^{12.0- and 2.35-mm catheters.}



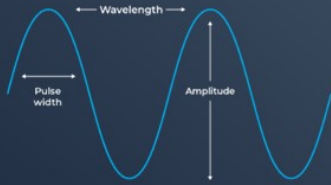
EFFICIENT

Performance designed for your lab^{1,3,9}

- Defines a new standard in efficacy and safety outcomes
- Has the potential to debulk in fewer passes
- Small footprint, unparalleled portability, and simple storage
- Easy installation, using a 110V outlet, touchscreen, and low acoustic noise



AURYON



2.35 mm
Aspiration and Off-Center capabilities and indicated for Peripheral Atherectomy and In-Stent Restenosis (ISR)

2.0 mm
Aspiration capability and indicated for Peripheral Atherectomy and ISR

1.5 mm
Indicated for Peripheral Atherectomy

0.9 mm
Indicated for Peripheral Atherectomy

Why wavelength matters

Each type of tissue interacts differently with a given wavelength

The Auryon System produces a photon energy of 3.5 eV, which is low enough to be nonreactive to vessel endothelium, but high enough to vaporize calcium. ^{b, c}

Why pulse width and amplitude matter

Greater amplitude is achieved with shorter pulses, which can deposit energy before thermal diffusion occurs

The Auryon System has a pulse width of 10 to 25 ns, ensuring enough power to target the lesion and spare the vessel. ^a



^a. Auryon. Instructions for use. AngioDynamics; 2019. ^b. Herzog A, Bogdan S, Glikson M, Ishaaya AA, Love C. Selective tissue ablation using laser radiation at 355 nm in lead extraction by a hybrid catheter; a preliminary report. *Lasers Surg Med.* 2016;48(3):281-287. ^c. Spectranetics Corporation. CVX-300 Excimer Laser System: Operator's Manual. Version 28. 2019:1-56.

The Science of the Auryon System – Solid State Technology

The Auryon System is designed to deliver an optimized wavelength, pulse width, and amplitude to remove lesions while preserving vessel wall endothelium.^{1,6}

Optimal waveform technology unlike any other

The Auryon System is designed to deliver an optimized wavelength and pulse width to remove all lesions while helping to preserve vessel wall endothelium.



AURYON

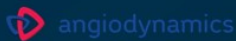


Different science, different outcomes

Laser atherectomy devices are not created equal: There are tangible scientific differences between the Auryon System and Phillips CVX-300 Excimer Laser.



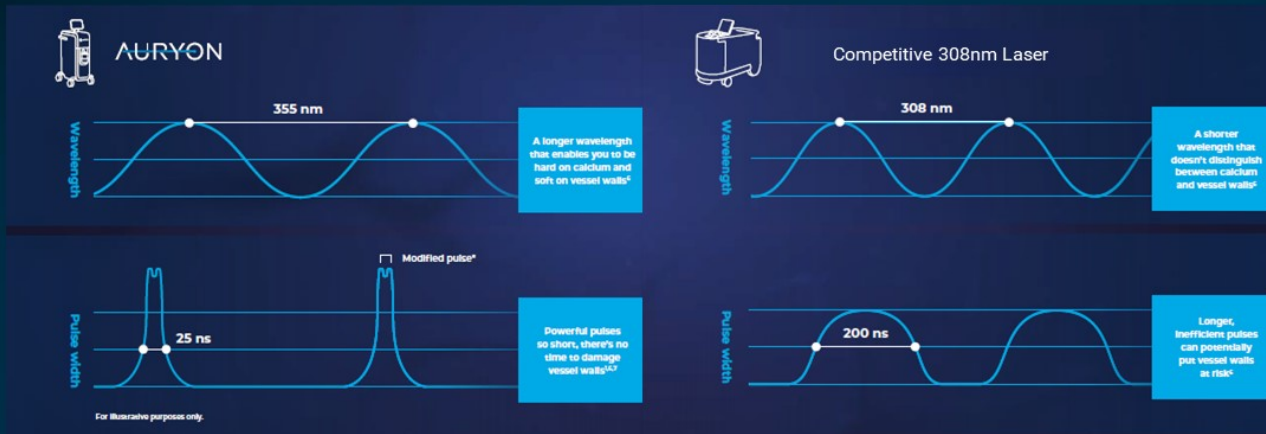
Competitive 308nm Laser



1. Rundback J, Chandra P, Brodmann M, Weinstock B, Sedillo G, Cawich I, et al. Novel laser-based catheter for peripheral atherectomy: 6-month results from the Eximo Medical B-Laser™ IDE study. *Catheter Cardiovasc Interv.* 2019;1-8. 6. Vogel A, Venugopalan V. Mechanisms of pulsed laser ablation of biological tissues. *Chem Rev.* 2003;103(2):577-644.

The Science of the Auryon System

Wavelength & Pulse Width



1. Rundback J, Chandra P, Brodmann M, Weinstock B, Sedillo G, Cawich I, et al. Novel laser-based catheter for peripheral atherectomy: 6-month results from the Eximo Medical B-Laser™ IDE study. *Catheter Cardiovasc Interv.* 2019;1-8. . Vogel A, Venugopalan V. Mechanisms of pulsed laser ablation of biological tissues. *Chem Rev.* 2003;103(2):577-644. 7. Akkus NJ, Abdulbaki A, Jimenez E, Tandon N. Atherectomy devices: technology update. *Med Devices (Auckl).* 2015;8:1-10.



Resiliency in the face of all lesions

The Auryon System can handle it.

- Clinical trials have shown the Auryon System can clear even the most calcified lesions^{1,2}
- Any lesion you encounter can be ablated without harming the vessel wall³



Built-in aspiration* addresses risk of embolization*



Nonreactive to contrast media for simultaneous ablation and observation of fluoroscopy image*

Treat any infrainguinal artery

Purpose-built catheters are designed to treat both above and below the knee, including the ankle.³



2.35-mm catheter

Popliteal + superficial femoral artery

- Reference vessel diameter: $\geq 3.6 \text{ mm}^2$
- Built-in aspiration capability
- Off-centering mechanism
- Cleared for ISR
- French size 7 Fr



2.0-mm catheter

Femoropopliteal + tibioperoneal trunk

- Reference vessel diameter: $\geq 3.0 \text{ mm}^2$
- Built-in aspiration capability
- Cleared for ISR
- French size 6 Fr



1.5-mm catheter

Tibials + femoropopliteal

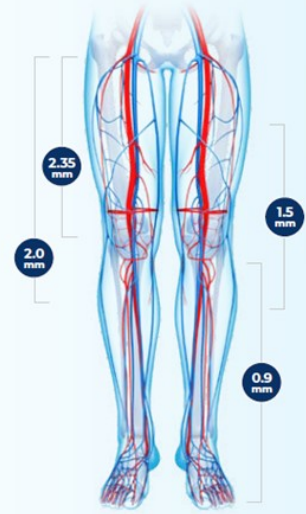
- Reference vessel diameter: $\geq 2.25 \text{ mm}^2$
- Below the knee
- French size 5 Fr



0.9-mm catheter

Tibials + below the ankle

- Reference vessel diameter: $\geq 1.4 \text{ mm}^2$
- French size 4 Fr



1. Rundback J, Chandra P, Brodmann M, Weinstock B, Sedillo G, Cawich J, et al. Novel laser-based catheter for peripheral atherectomy: 6-month results from the Exima Medical 8-Laser™ IDE study. *Catheter Cardiovasc Interv*. 2018;1-8. 2. Shomras NW, Chandra P, Brodmann M, Weinstock B, Sedillo G, Cawich J, et al. Acute and 30-day safety and effectiveness evaluation of Exima Medical's 8-Laser™, a novel atherectomy device, in subjects affected with infrainguinal peripheral arterial disease: results of the EX-PAD-03 trial. *Cardiovasc Revasc Med*. 2020;21(1):88-92. 3. Auryon Instructions for use. *AngioDynamics*; 2019. 4. Herzog A, Steinberg J, Golsenberg E, Nomborg R, Ishaq AA. A route to laser angioplasty in the presence of fluoroscopy contrast media, using a nonosseous-pneumatically-actuated laser. *IEEE J Sel Top Quantum Electron*. 2016;22(1):342-347.

Resiliency in the Face of ALL Lesions

The Auryon System can handle it



ISR*



ATK/BTK



SEVERE CALCIUM



*Only the 2.0 and 2.35mm catheters are cleared for in-stent restenosis (ISR).

> 5,000

FY21
Procedures†

ATK
Above the Knee

2,617
52%

BTK
Below the Knee

2,383
48%



1,850 Common/Superficial Femoral Artery

767 Popliteal

507 Tibio-peroneal Trunk

945 Anterior Tibial

462 Peroneal Tibial

469 Posterior Tibial

† Data on file

PATHFINDER-I Study Design

POST MARKET, PROSPECTIVE, MULTICENTER, SINGLE-ARM, ALL-COMERS REGISTRY

104

Patients de novo,
re-stenotic, and ISR
lesions

High procedural
success with
challenging lesions,
including long
occlusions, severely
calcified lesions,
and ISR

AURYON

Treatment +/-
Adjunctive
Therapy

**Primary
endpoints:**

- 1) Acute Success:
≤ 30% final RDS
(by corelab)
- 2) Freedom from peri-
procedural MAEs/
complications by
discharge

Complete six-month
results are expected
by the end of 2021

Collaborations with our Physician Partners

Retrospective Chart Reviews

Single Center
Experience

70

Patients

3-year follow up

OBL Single Center
Experience

55

Patients

Prospective Investigator Initiated Trials

iDissection
ATK

29

Patients

Procedural safety analyzed by
IVUS post-laser
completed and data to be
published soon

iDissection
BTK

Multi-site prospective registry

60

Patients

Procedural safety analyzed by
IVUS post-laser
Follow up of 1 year

AURYON

A revolutionary experience is exactly what AngioDynamics is delivering in the world of interventional devices used to perform peripheral atherectomy for peripheral arterial disease (PAD). The introduction of Auryon may seem like it's another in a series of options for performing this procedure, but the experience physicians will have with it will be unlike any other.

← November 1, 2019 →

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REVENUE
CUSTOMERS
INVENTORY
SALES REPRESENTATIVES

1

**AMAZING
TECHNOLOGY**

Giving Physicians a device that is finally adaptable as they are and as diverse as their patients.

CLINICALLY PROVEN

SAFE

CONVENIENT

 **angiodynamics**

38

FY21

47

132

5K

Auryon Commercial
Representatives

Customers

Auryon
Procedures

\$11M

MED TECH

IRREVERSIBLE ELECTROPORATION



Nanoknife
Irreversible Electroporation (IRE)

 angiodynamics

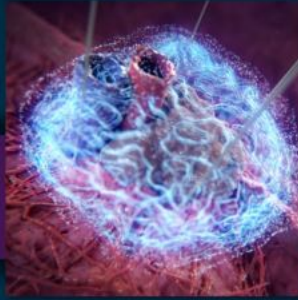
INNOVATION DOCTORS NEED

Expands treatment options and help preserve patient's quality of life



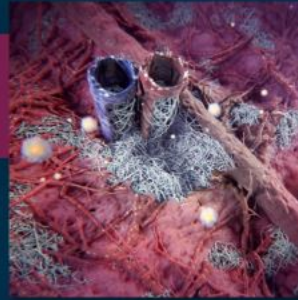
PROBE PLACEMENT

NanoKnife can be confidently used in all segments of an organ.^{1,2}



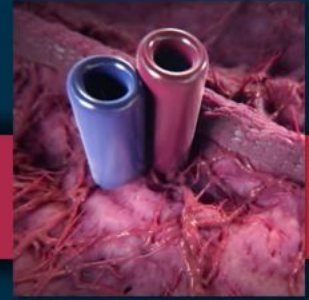
DECELLULARIZATION

Destroys targeted tissue with precise treatment margins.^{1,2}



NON-THERMAL

Spares vital structures by retaining the structural integrity of tissue.^{3,4}



REVASCULARIZATION

Facilitates functional tissue regeneration post-ablation.^{3,4}



1 Lee EW, Thai S, Kee ST. Irreversible electroporation: a novel image-guided cancer therapy. *Gut Liver*. (2010);4(SUPPL 1):99-104. doi: 10.5009/gnl.2010.4.S1.S99

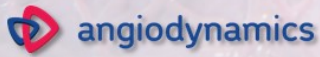
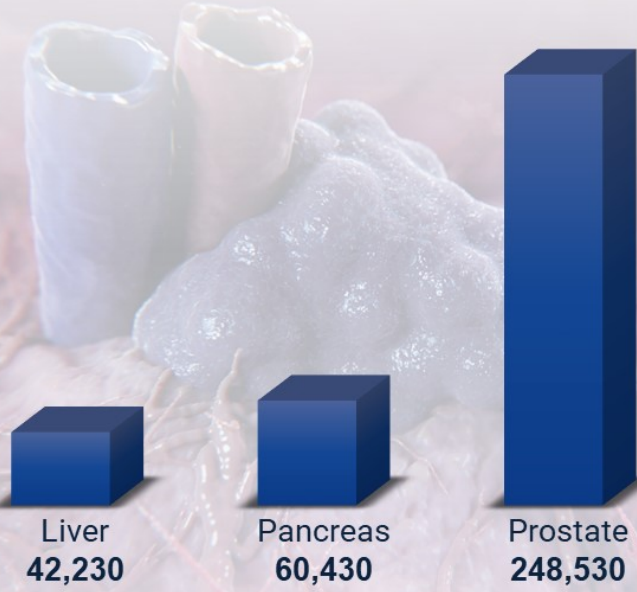
2 Guidance for Selection of NanoKnife Probe Array Configuration and Ablation parameters for the Treatment of Stage III Pancreatic Cancer

3 Scheiterna MJ, Chang JJ, van den Bos W, Gajchrowski J, Nguyen TV, Reube TM, Sinwardiana AR, Bahr M, de la Rosette JJ, Stricker PD. Impact on genitourinary function and quality of life following focal irreversible electroporation of different prostate segments. *Diagn Interv Radiol*. 2018 Sep;24(5):268-275. doi: 10.5152/di.2018.17374. PMID: 30211680. PMCID: PMC6135960

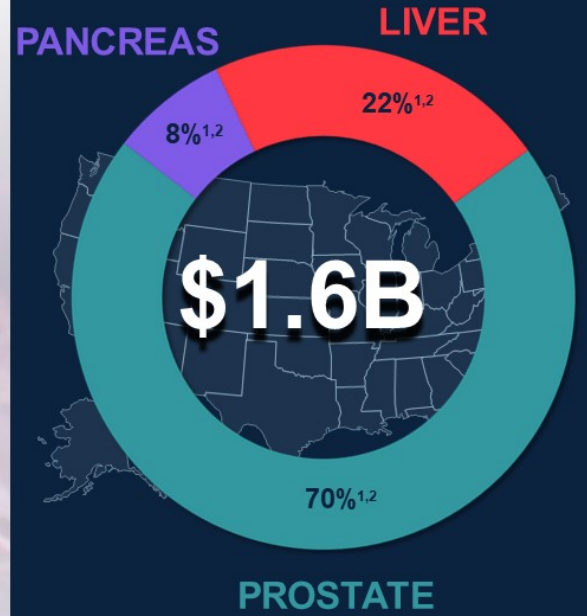
4 Li W, Fan Q, Ji Z, Qiu X, Li Z. The effects of irreversible electroporation (IRE) on nerves. *PLoS One*. 2011 Apr;14(6(4):e18831. doi: 10.1371/journal.pone.0018831. PMID: 21533143. PMCID: PMC3077412

THE NANOKNIFE SYSTEM

Estimated # of U.S. Patients Diagnosed in 2021²



2021 Total Addressable Market (TAM)



1. Interventional Oncology Devices Medtech 360 Market Analysis US 2016 (2016, December). Millennium Research Group, Inc.
2. "Cancer Facts & Figures 2021." American Cancer Society, www.cancer.org/research/cancer-facts-statistics/all-cancer-facts-figures/cancer-facts-figures-2021.html

PROSTATE CANCER

Treatments

In 2021

248,530

men are estimated to be diagnosed with prostate cancer in the US.¹

27%

undergo

RADICAL RADIATION

35% report erectile dysfunction³

31%

undergo

RADICAL SURGERY

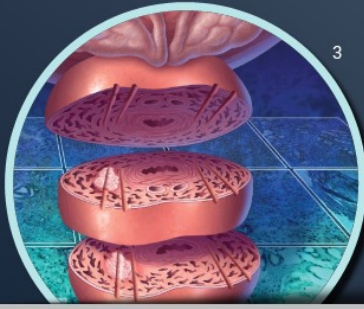
79% report erectile dysfunction⁴



1 "Cancer Facts & Figures 2021," American Cancer Society, www.cancer.org/research/cancer-facts-statistics/all-cancer-facts-figures/cancer-facts-figures-2021.html.
2 Mahal BA, Butler S, Franco I, et al. Use of Active Surveillance or Watchful Waiting for Low-Risk Prostate Cancer and Management Trends Across Risk Groups in the United States, 2010-2015. *Jama*. 2019;321(7):704. doi:10.1001/jama.2018.19947.
3 Widmark A, Gunnlaugsson A, Pedersen L, et al. Ultra-hypofractionated versus conventionally fractionated radiotherapy for prostate cancer: 5-year outcomes of the HYPO-RT-PC randomised, non-inferiority, phase 3 trial. *Lancet*. 2019;394(10195):295-305. doi:10.1016/S0140-6726(19)33131-6.
4 Hamdy FC, Donovan JL, Lane JA, et al. 10-Year Outcomes after Monitoring, Surgery, or Radiotherapy for Localized Prostate Cancer. *N Engl J Med*. 2016;375(15):1415-1424. doi:10.1056/NEJMoa1606220.

FOCAL THERAPY

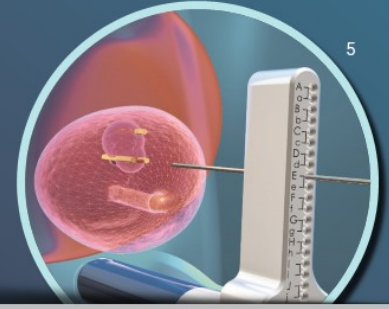
Bridges the gap between whole gland treatments and active surveillance¹



PSA adoption has led to a shift towards less aggressive prostate cancer being diagnosed.²



Genetic, molecular, and clinical evidence supports the dominant lesion paradigm.²



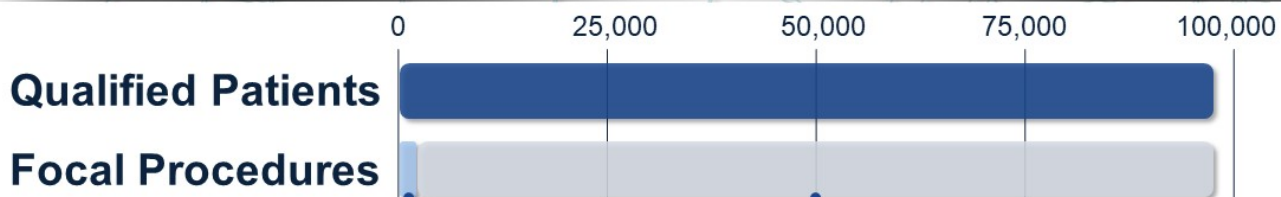
Improvements in prostate cancer diagnostic tools.²



1. Tareen B, Godoy G, Taneja SS. Focal therapy: a new paradigm for the treatment of prostate cancer. *Reviews in urology*. <https://www.ncbi.nlm.nih.gov/pmc/articles/PMC2809988/>. Published 2009. Accessed January 7, 2021.
2. Lee, Byron H., et al. "Changing Landscape of Prostate Cancer Favoring Low-Risk Prostate Cancer: Implications for Active Surveillance Versus Focal Therapy." *Imaging and Focal Therapy of Early Prostate Cancer*, 2012, pp. 17-86, doi:10.1007/978-1-62703-182-0_2.
3. Klotz, MD, FRCSC, OM, Laurence Klotz. "Active Surveillance for Prostate Cancer: How to Do It Right." *Oncology*, 2017.
4. Cedars-Sinai Medical Center. Hormone Therapy Can Make Prostate Cancer Worse, Study Finds. Cedars-Sinai Medical Center, 31 Mar. 2021. www.cedars-sinai.org/newsroom/hormone-therapy-can-make-prostate-cancer-worse-study-finds/.
5. <https://koelis.com/koelis-announces-first-procedures-in-3d-fusion-imaging-guided-focal-ablation-of-prostate-cancer-in-its-clinical-study-violet/>

FOCAL THERAPY

U.S. Served and Target Markets



Served Market¹

\$25M

Target Market^{2,3}

\$500M



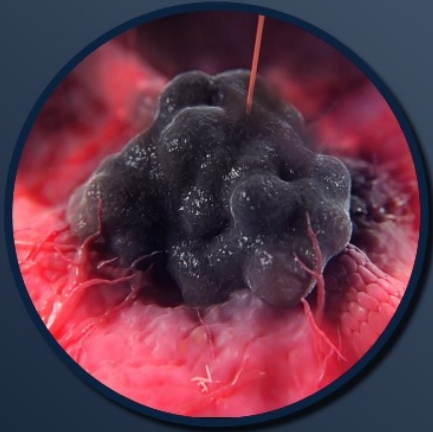
1 Definitive Healthcare All-Payer Hospital Outpatient Volume by CPT Code, 02/05/2021

2 "Cancer Facts & Figures 2021," American Cancer Society, www.cancer.org/research/cancerfacts-statistics/all-cancer-facts-figures/cancer-facts-figures-2021.html.

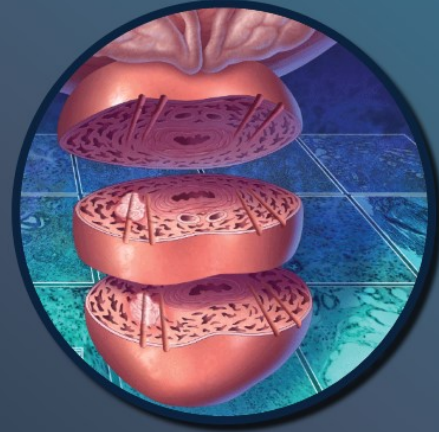
3 Parny MG, Cowling TE, Sujenthiran A et al. Risk stratification for prostate cancer management: value of the Cambridge Prognostic Group classification for assessing treatment allocation. BMC Medicine. 2020;18(1). doi:10.1186/s12916-020-01588-9

FOCAL THERAPY ADOPTION

Remains low despite patient and physician interest



**Existing thermal
technology has less than
ideal outcomes^{1,2}**



**Current data includes low-risk
disease within the study cohorts^{1,3}**



1. Worrell. Design. Next Gen Voice of Customer, 2020.
2. Sivaraman A, Barret E. Focal Therapy for Prostate Cancer: An "À la Carte" Approach. Eur Urol. 2016;69(6):973-975. doi:10.1016/j.eururo.2015.12.015
3. Klotz, MD, FRCSC, CM, Laurence Klotz. "Active Surveillance for Prostate Cancer: How to Do It Right." Oncology, 2017.

UC San Diego

USF HEALTH

Wellstar HEALTH SYSTEM

AUGUSTA UNIVERSITY

nch Northwest Community Healthcare

Carolinas Medical Center Carolinas HealthCare System

Sutter Health CPMC

Roger Williams MEDICAL CENTER

UTSouthwestern Medical Center

CHRISTUS Health

Northwell Health

UHealth UNIVERSITY OF MIAMI HEALTH SYSTEM

ORLANDO HEALTH

City of Hope

IRREVERSIBLE DIRECT ELECTROPORATION

To evaluate the effectiveness and safety of the NanoKnife System for the ablation of Stage 3 pancreatic cancer



NYU Langone Health

BARNES JEWISH Hospital

THE UNIVERSITY OF MISSISSIPPI MEDICAL CENTER

Weill Cornell Medicine

COLUMBIA UNIVERSITY MEDICAL CENTER

MAYO CLINIC

UNIVERSITY of IOWA HOSPITALS & CLINICS University of Iowa Health Care

angiodynamics

NORTON HEALTHCARE

St Luke's UNIVERSITY HEALTH NETWORK

Baptist Health South Florida

capitalhealth

1. "The Anatomy of the Pancreas." Verywell Health. 6 June 2020. www.verywellhealth.com/pancreas-anatomy-4800990.



Memorial Sloan Kettering
Cancer Center



MICHIGAN MEDICINE
UNIVERSITY OF MICHIGAN

IDE Approved
July 2nd, 2021

PRESERVE

*Pivotal study of the NanoKnife System for
ablation of prostate tissue in an intermediate-risk
patient population*



1

Up to 20 Sites in the U.S.



1. "The Future of Prostate Cancer Screening is Here" <https://Health.Clevelandclinic.org/>, 14 July 2020, [health.clevelandclinic.org/the-future-of-prostate-cancer-screening-is-here](https://Health.Clevelandclinic.org/the-future-of-prostate-cancer-screening-is-here)

PRESERVE Prostate IDE

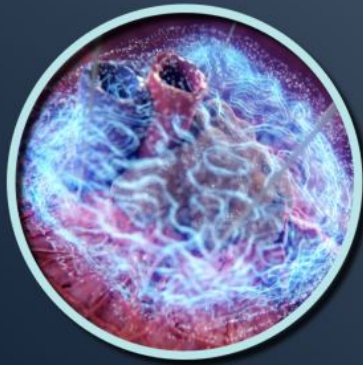
SUO-CTC is a clinical research investigator network of 500+ members from more than 250 clinical sites in the US and Canada.



37	SUO-CTC US sites responded to Call for Sites
Up to 20	Sites to be selected, focused on geographic and demographic diversity, high-volume focal therapy institutions
100	Intermediate-risk patients enrolled through 1-year follow up

Primary endpoint: Rate of negative in-field biopsy at 1 year

RIGHT TREATMENT



The NanoKnife System

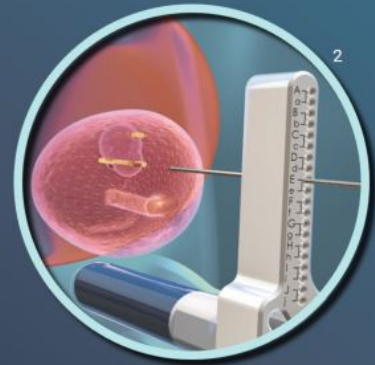
RIGHT PATIENT



Intermediate-Risk Patients

PRESERVE

RIGHT TIME




Advancements in focal therapy
(Imaging, Staging, Technique)

MED DEVICE

VASCULAR ACCESS & DEVICES

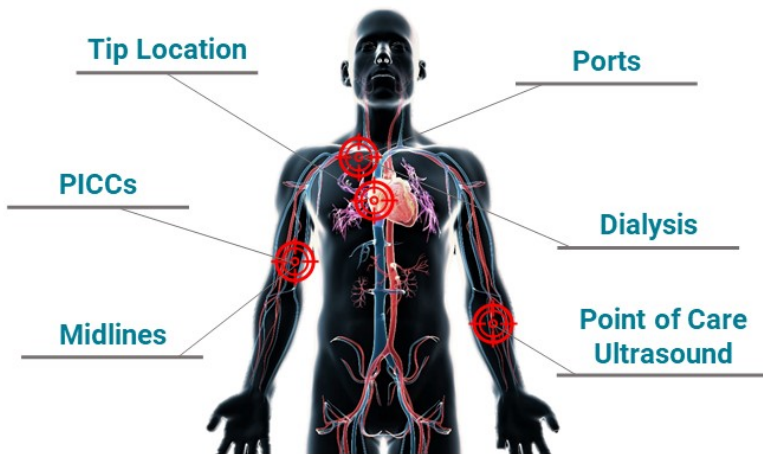
SmartPort⁺

 BioFlo
WITH ENERGY TECHNOLOGY

 angiodynamics

VASCULAR ACCESS

Safely delivering medication to patients



PORTFOLIO

Delivering on our product road map through a mix of R&D, clinical & regulatory pathway expansion and M&A will enable us to serve more patients with a differentiated portfolio that includes our BioFlo family of catheters



MARKET ACCESS

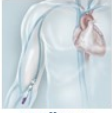

















Maximize clinical differentiation by reducing thrombus accumulation through the utilization of our BioFlo family of catheters



PERFORMANCE

Maintain a strong culture of execution and collaboration through disciplined sales & marketing plans

Vascular Access Product Portfolio – Today and Beyond

	FY'19	FY'20	FY'21	FY'22	FY'23
Acute Patient	 Midlines 				 AST Midline/EDC
	 PICCs Xcela PICC with PASV Valve Technology 	  Pediatric PICCs	 "PICCs for Patients of All Sizes"		 Next Gen C3 Wave
Chronic Patient	 Ports  POWER-INJECTABLE PORTS 				
	 Dialysis  CHRONIC DIALYSIS CATHETER 				

Healthcare Economics and Market Access Wins - IRE

CY2021

Outpatient IRE assigned to APC equivalent to or higher than other ablation therapies
PRESERVE approved
Outpatient IRE Market Access Model

CY2020

SIR Includes IRE in their universal training curriculum
Medicare reviews new CPT for placement in APCs

CY2019

SIR and ACOS Application for CPT codes specific to Irreversible Electroporation for physician billing

CY2018

Medicare Implementation of ICD-10 codes specific to Irreversible Electroporation in Liver and Pancreas in the inpatient setting

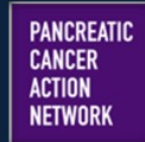
Outpatient Reimbursement active/
Private Payers reported to pay OP

CPTs active/
Outpatient IRE reimbursement assigned

CPT codes specific to IRE approved

Inpatient Codes mapped to complex DRGs

Advancing Market Access: Physician & Patient Society Engagement



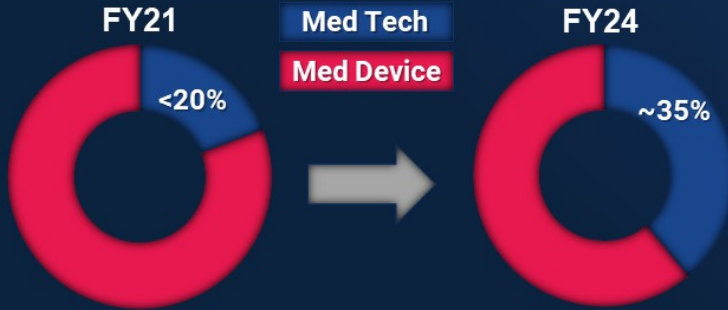
FINANCIAL GOALS & CAPITAL ALLOCATION STRATEGY

Transformation Toward Double Digit Revenue Growth

AngioDynamics in investment mode throughout the planning horizon

FY22		FY23		FY24	
Revenue	\$305M – \$310M	Revenue	\$330M – \$336M	Revenue	\$360M – \$375M
Growth	5% - 7%	Growth	7% - 9%	Growth	10% - 12%
Gross Margin	~55%	<ul style="list-style-type: none"> Planned significant investment in Med Tech platforms drives top line growth Bottom line leverage will ramp slower than top line growth 			
Adjusted EPS	\$0.00 - \$0.05				

Revenue Contribution



Revenue Growth CAGR



The projections and growth rates depicted on this slide are forward-looking statements. These forward-looking statements are not guarantees of future performance and subject to risks and uncertainties.

Gross Margin

Shifting to high margin portfolio expected to drive margin expansion

Headwinds

- Tight labor market
 - Drives increasing costs
 - Impacts absorption
- Raw Materials Inflationary Pressure
- Increasing Freight Costs
- Auryon Impacts – will abate over time
 - OBL vs Hospital Mix
 - Hardware placements

Operational Focus

- Mix increase from Med Tech growth contribution
 - Growth from >70% margin products
 - Make vs buy analysis
 - Maintain service levels
 - Continued focus on cost reduction opportunities
 - Prioritization on service efficiency
-

Capital Allocation

Focused on leveraging current operations to fund future investments in R&D and S&M

- Revolver capacity available for future opportunities if needed
 - Strong banking group relationship
 - Opportunistic and disciplined approach to tuck-in M&A prospects that support our Med Tech platforms
 - Strategic plan to continue meaningful investment while being good stewards of the bottom line
-

STRATEGIC TRANSFORMATION



PURSUE LARGER, FASTER GROWING MARKETS

Active portfolio management enables us to compete in larger, faster growing markets relying on technology & innovation to produce measurable patient outcomes

DEPLOY FOCUSED RESOURCE DEVELOPMENT

Resource deployment focused in areas that offer better opportunities for success

DRIVE PORTFOLIO TRANSFORMATION

Portfolio transformation & strength driven by R&D, M&A, and Clinical & Regulatory

ATTRACT AND RETAIN TOP TALENT

Strong and innovative portfolio combined with top talent drives value