



Investor Deck

April 2024

Image: Donna, TCAR[®] and CEA patient



Forward Looking Statement

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This presentation contains forward-looking statements within the meaning of the Private Securities Litigation Reform Act of 1985, as amended. All statements other than statements of historical facts contained in this presentation, including statements regarding our anticipated 2024 full year revenue, future results of operations and financial position, business strategy, current and prospective markets or products, clinical activities, regulatory approvals, degree of market acceptance, and plans and objectives of management for future operations, are forward-looking statements. The words "may," "will," "should," "expect," "plan," "anticipate," "could," "intend," "target," "project," "estimate," "believe," "predict," "potential" or "continue" or the negative of these terms or other similar expressions, as well as the use of future dates, are intended to identify forward-looking statements, although not all forward-looking statements contain these identifying words.

The forward-looking statements in this presentation represent our views as of the date of this presentation. Although we believe the expectations reflected in such forward-looking statements are reasonable, we can give no assurance that such expectations will prove to be correct. Accordingly, you are cautioned not to place undue reliance on these forward-looking statements. Such statements are based on current assumptions that involve risks and uncertainties that could cause actual outcomes and results to differ materially. For Silk Road Medical, such risks and uncertainties include, among others, our future operating results and financial performance; our success in retaining and recruiting key personnel; our ability to continue to grow our business and expand the use of TCAR; our ability to obtain an adequate supply of materials and components from our third-party suppliers; product development plans and our ability to commercialize new products in a timely manner; the success of current clinical trials; plans to conduct further clinical trials; our ability to obtain additional indications or new regulatory approvals or clearances for our products; market acceptance and use of our products by physicians; our ability to grow and leverage our commercialization infrastructure; the effect of increased competition; the effect of economic conditions and COVID-19 or similar pandemics on our business; government and third-party payer coverage and reimbursement and our ability to obtain and maintain intellectual property protection for our products. More detailed information on these and other factors that could affect our actual results are described in the section entitled Risk Factors in our most recent annual report on Form 10-K filing made with the Securities and Exchange Commission. Except as required by applicable law, we do not plan to publicly update or revise any forward-looking statements contained herein, whether as a result of any new information, future events, changed circumstances or otherwise. No representations or warranties (expressed or implied) are made about the accuracy of any such forward-looking statements.

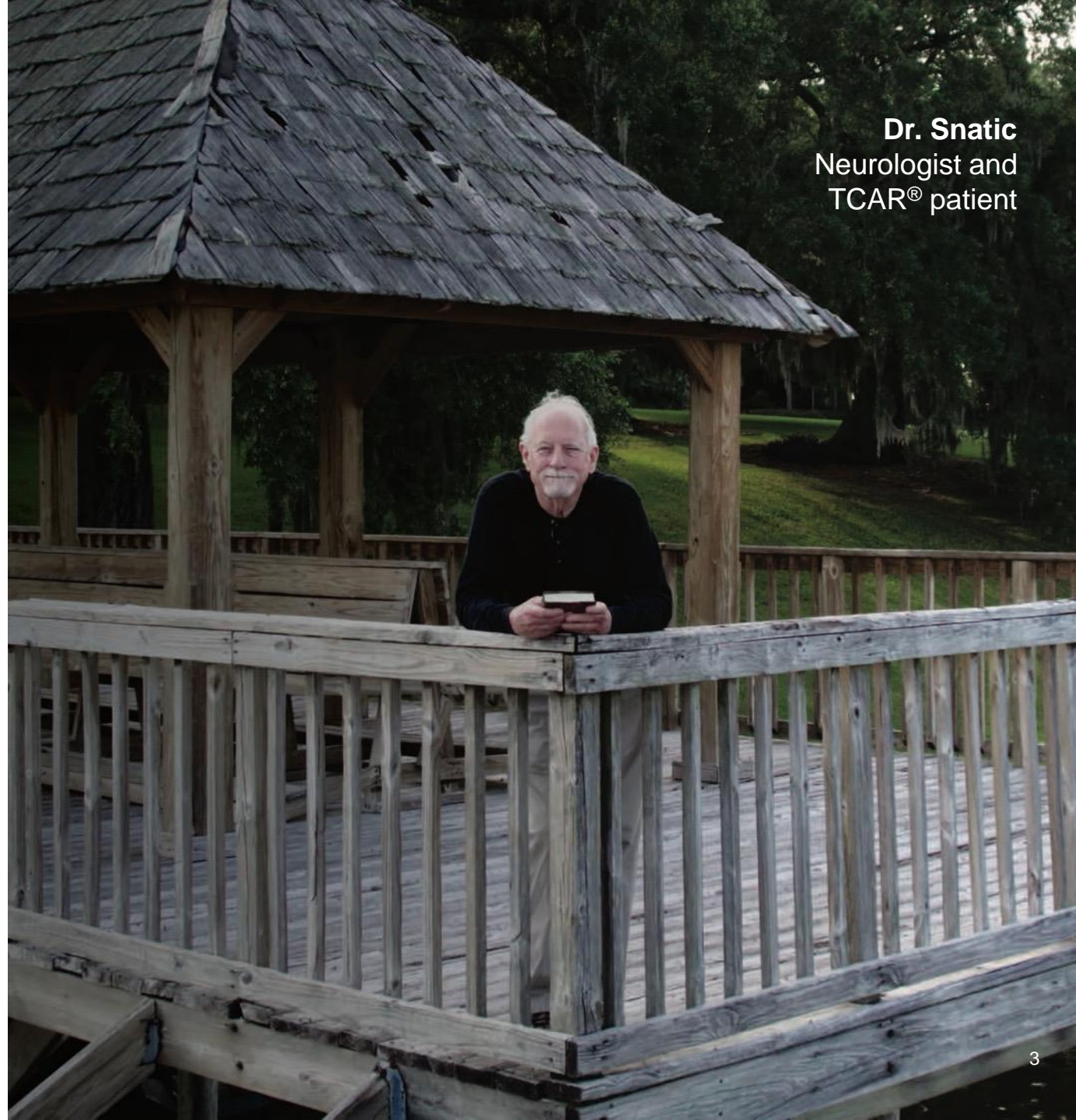
In addition, projections, assumptions and estimates of our future performance and the future performance of the markets in which we operate are necessarily subject to a high degree of uncertainty and risk. By attending or receiving this presentation you acknowledge that you will be solely responsible for your own assessment of the market and our market position and that you will conduct your own analysis and be solely responsible for forming your own view of the potential future performance of our business.



The Only At-Scale, Full-Capability Carotid Company

We are dedicated to **preventing stroke and protecting the health of people** with carotid artery disease.

Dr. Snatic
Neurologist and
TCAR® patient



Built to Drive Growth

The Only At-Scale, Full Capability Carotid Company



Commercial

>200 professionals delivering the best outcomes for patients with carotid artery disease and driving TCAR adoption



Medical Education

Industry leading programs for TCAR training, education, therapy awareness, and fellows



R&D

Comprehensive R&D, clinical and regulatory efforts to expand our market leadership and evidence base



Operations

Scalable manufacturing and supply chain with robust G&A backbone

1 in 3

ischemic strokes are caused by **Carotid Artery Disease (CAD)**

4.4M

PEOPLE IN THE U.S. SUFFER FROM CAD

~440,000

U.S. DIAGNOSES PER YEAR



Over \$5 Billion Global Market Opportunity

U.S. Opportunity

Converting
current
procedures¹

\$1.2B
opportunity

Treating the
untreated

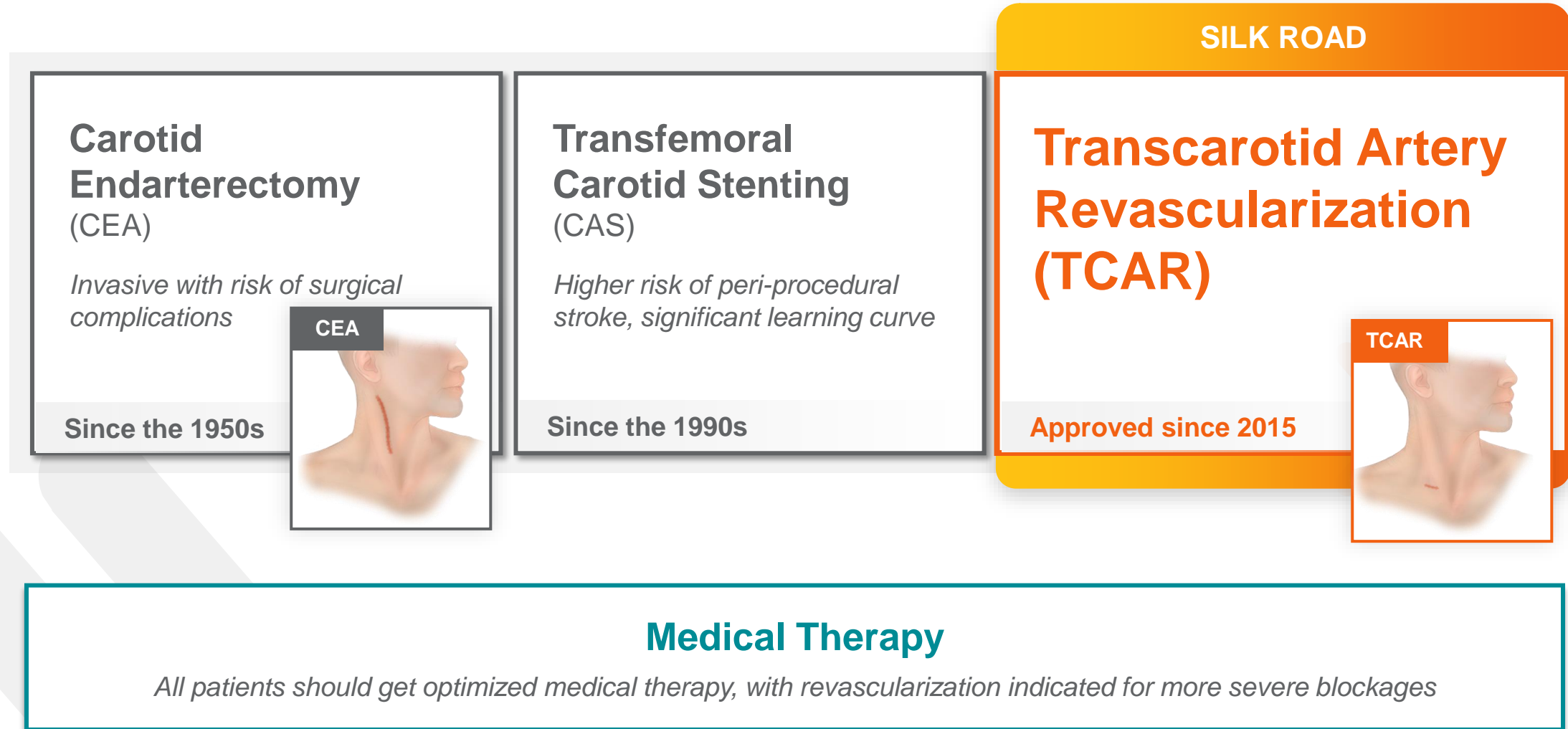
\$1.9B
opportunity

Globally
Additional

\$2.3B
opportunity²

1. 172,000 annual U.S. patients treated | Sources: Modus Health Group data for 2022 and other third-party sources
2. GlobalData Carotid and Renal Artery Stents Global Market Model, 2015-2030
Note: \$1.2B calculated as annual procedures multiplied by average sales price of each TCAR product (1 unit each).

TCAR: The Less Invasive Standard in Stroke Prevention



TCAR Portfolio

Purpose Built for
Transcarotid



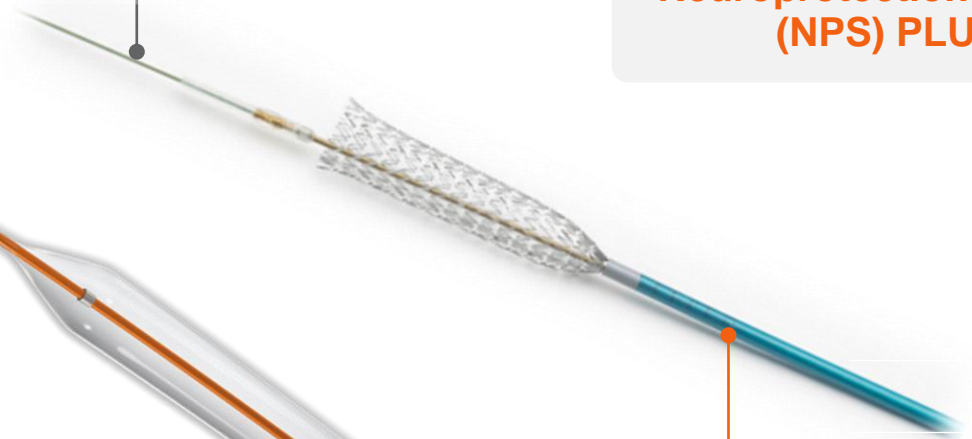
Direct carotid
access

Robust flow
reversal

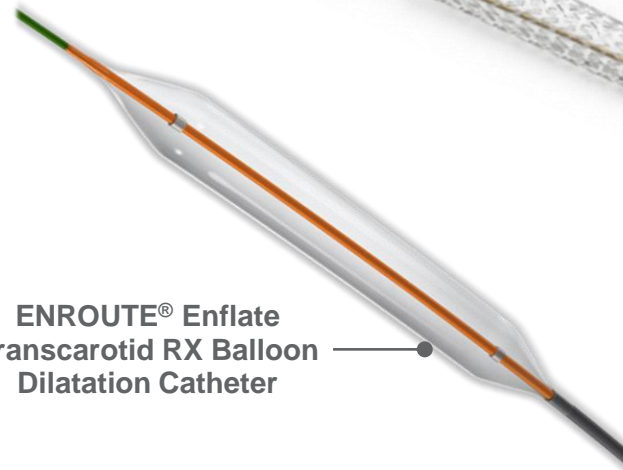
ENHANCE®
Transcarotid Peripheral
Access Kit



ENROUTE®
0.014" Guidewire



ENROUTE® Enflate
Transcarotid RX Balloon
Dilatation Catheter



ENROUTE® Transcarotid
Neuroprotection System
(NPS) PLUS



ENROUTE® Transcarotid
Stent System



The Proof is in **the Filter**



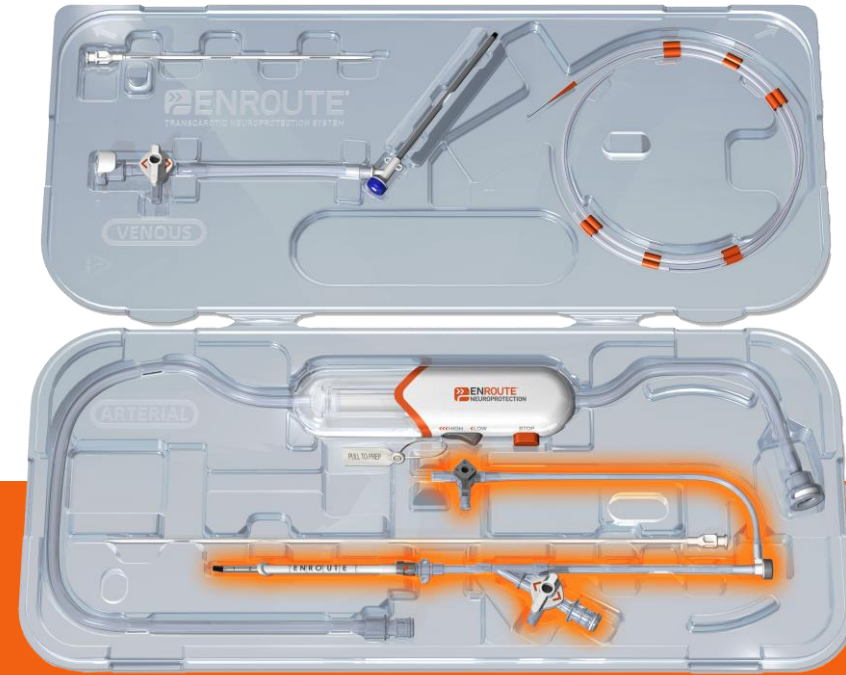
TCAR Portfolio

ENROUTE® Transcarotid
Neuroprotection System (NPS)

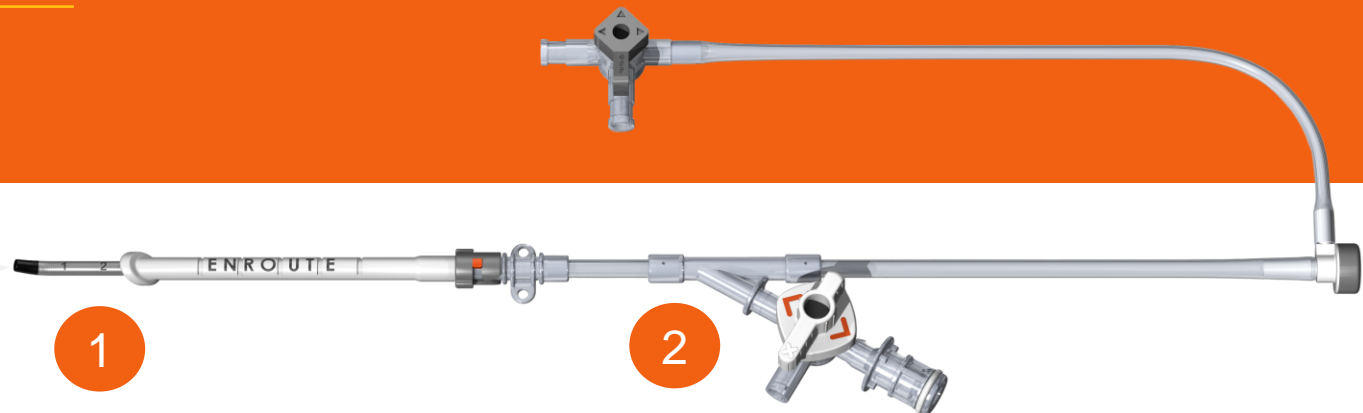
PLUS

4th Generation NPS Delivering:

1. Smoother Arterial Sheath Insertion
2. Greater Flow Precision
3. Simplified Prep Experience



3



TCAR Portfolio

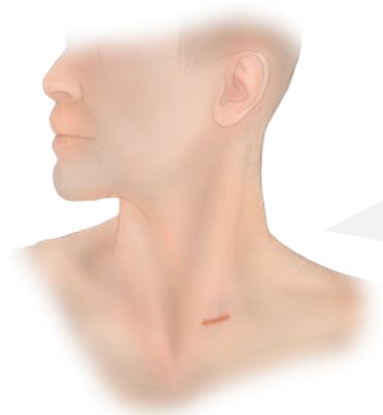
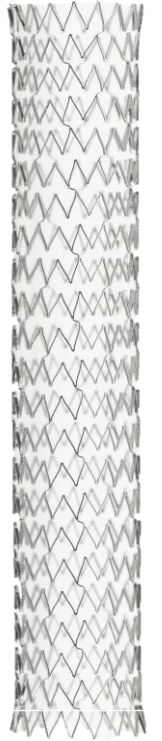
ENROUTE[®] Transcarotid Stent System

Only Transcarotid stent system FDA indicated for SSR and HSR







Tapered and Cylindrical to fit patient anatomy

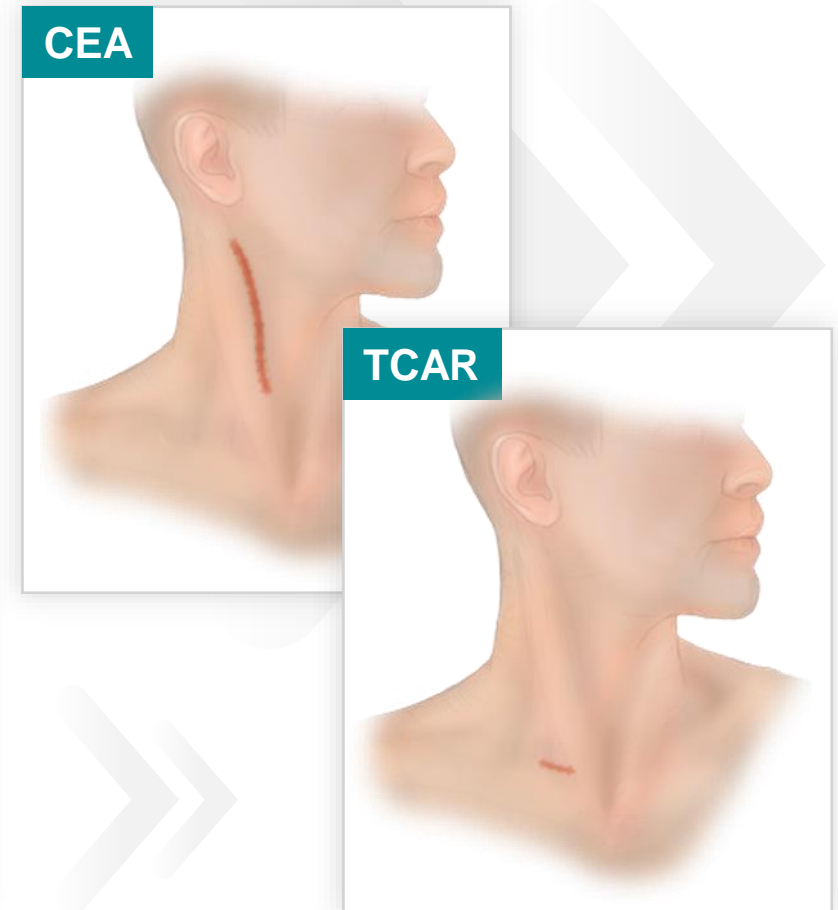
Tapered

Cylindrical



TCAR Combines Surgical Principles of Neuroprotection and Game-Changing Endovascular Technology

BENEFIT	SIGNIFICANTLY FAVORS CEA	SIGNIFICANTLY FAVORS TCAR
<p>Safety Profile</p> <p>Less risk of MI, cranial nerve injury, risk of bleeding requiring intervention</p>		
<p>Efficiencies</p> <p>Less time in the OR, shorter length of stay, local anesthesia used more often in TCAR</p>		
<p>Patient Experience</p> <p>Smaller scar in less visible location, less pain, faster recovery time</p>		



TCAR Works Consistently

>90K TCAR Patients Treated¹

>45K Patients Studied

>300 TCAR Publications



Care Settings³²⁻³⁷

- Academic
- Teaching
- Community
- Rural



Experience Levels²⁴⁻³¹

- Experienced physicians
- New adopters
- Fellows and trainees



Patient Cohorts

- All age brackets, including 80+¹⁻⁵
- Male/Female⁴⁻⁷
- Standard Risk/High Risk¹²⁻²³
- Symptomatic/Asymptomatic⁸⁻¹¹

1. Cumulative number of patients treated as of Silk Road Medical Q1 2024 earnings call (3/31/2024)

2. See appendix for references

Compelling Real-World Outcomes in Nearly 45,000 Patients Studied

As Presented in November 2023¹:

RATE OF PERIOPERATIVE STROKE OR DEATH ACROSS PATIENTS STUDIED

Symptomatic

n = 11,058

ACCEPTABLE THRESHOLD*: 4.0%

2.3%

Asymptomatic

n = 33,862

ACCEPTABLE THRESHOLD*: 2.0%

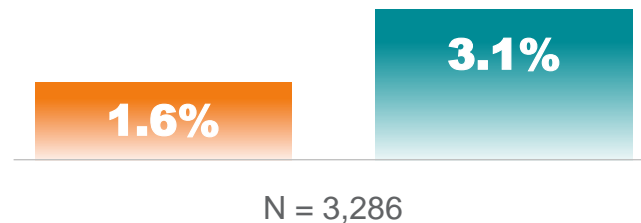
1.3%

1. 2023 VEITH Session 80, New Developments in the treatment of carotid stenosis with mesh covered stents and TCAR (Transcervical Carotid Artery Revascularization), Friday November 17th 2023; 08:47-08:52: TCAR Is Better Than TFCAS And Brachial/Radial Access for CAS. Marc L Schermerhorn MD (presenter), Mahmoud B Malas MD, MHS

Rigorous Analysis of TCAR vs. TF-CAS Demonstrates Best-In-Class Outcomes for TCAR

Designed to reduce peri-procedural stroke:

IN-HOSPITAL STROKE OR DEATH ¹



“TCAR was developed to avoid the high-risk maneuvers that have been associated with TF-CAS.”¹

Starting with a safe and rapid learning curve:

CASE THRESHOLD FOR <3% SAE RATE

0
TCAR²



72-300
TF-CAS^{3,4}

CONCLUSION:

TCAR had a *significantly lower* risk of stroke or death compared to TF-CAS with improved procedural efficiencies (radiation/contrast).

1. Schermerhorn et al. Association of Transcarotid Artery Revascularization vs Transfemoral Carotid Artery Stenting With Stroke or Death Among Patients With Carotid Artery Stenosis. JAMA. 2019;322(23):2313–2322. doi:10.1001/jama.2019.18441

2. Kashyap et al. Learning Curve for Surgeons Adopting Transcarotid Artery Revascularization Based on the Vascular Quality Initiative-Transcarotid Artery Revascularization Surveillance Project. J Am Coll Surg. 2020 Jan;230(1):113–120. doi: 10.1016/j.jamcollsurg.2019.09.020. Epub 2019 Oct 28. PMID: 31672680.

3. Gray WA et al. Influence of site and operator characteristics on carotid artery stent outcomes: analysis of the CAPTURE 2 (Carotid ACCULINK/ACCUNET Post Approval Trial to Uncover Rare Events) clinical study. JACC Cardiovasc Interv. 2011 Feb;4(2):235-46. doi: 10.1016/j.jcin.2010.10.009. PMID: 21349464.

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Recent Publication Demonstrates that TCAR Offers Best-In-Class Outcomes

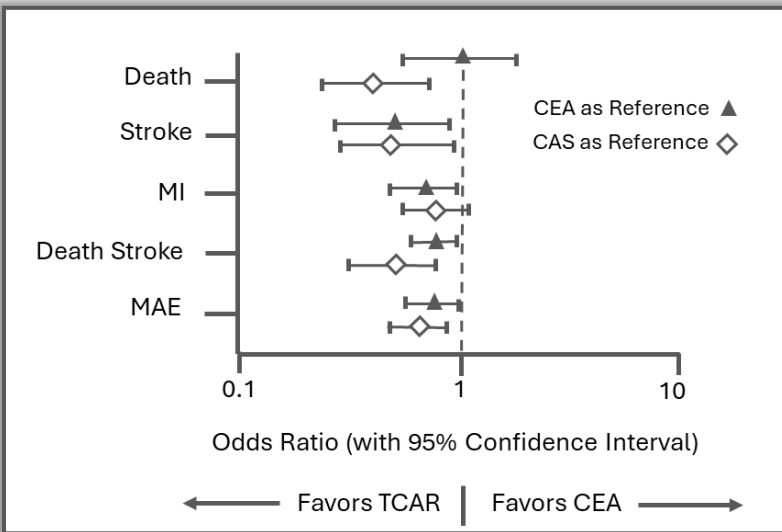


Figure 1: Comparison of TCAR outcomes with those of CEA and CAS using a multivariate logistic regression model, 2015-2019. CAS, carotid artery stenting; CEA, carotid endarterectomy; MAE, major adverse events; MI, myocardial infarction; TCAR, transcarotid artery revascularization

Perioperative Outcomes in Transcarotid Artery Revascularization Versus Carotid Endarterectomy or Stenting Nationwide

Ian A. Ramsey, BS, Joshua D. Burks, MD, Victor M. Lu, MD, PhD, Michael Silva, MD, Ahmed Abdelsalam, MD, Robert M. Starke, MD, MSc, Evan Luther, MD

• National Inpatient Database

• 369,045 procedures from 2015 to 2019

AUTHORS' CONCLUSION:

“TCAR is underutilized relative to other revascularization techniques yet has favorable outcomes compared with CEA and CAS”¹

“There was a big difference between the first [CEA] and the second procedure [TCAR]... sort of like a relief off me in some way mentally, and physically I felt awesome.

“The next morning, I got to go home. And I actually walked out of ICU feeling great.

“It was totally different.”

—Donna, TCAR Patient

Benefits of a Less Invasive Approach

Average procedure time¹

TCAR		CEA
73 mins	vs	121 mins

Cost of operating room time²

TCAR		CEA
\$2,701	vs	\$4,477

Ability to treat
67% more patients
vs. CEA

Reduced OR Time
Cost over CEA:
\$1,776

1. Annals of Surgery 2020 - M. Malas, Transcarotid Revascularization with Dynamic Flow reversal versus Carotid Endarterectomy in the Vascular Quality Initiative Surveillance Project.

2. Childers et al. JAMA Surg 2018 Apr; 153(4).



Favorable Procedure Margin

TCAR also reduces in-hospital complications and length of stay

Source: Health Advances consulting and company analysis.

1. Procedure costs include OR time, devices, medication, overhead, etc. Excludes hospital length of stay expenses.

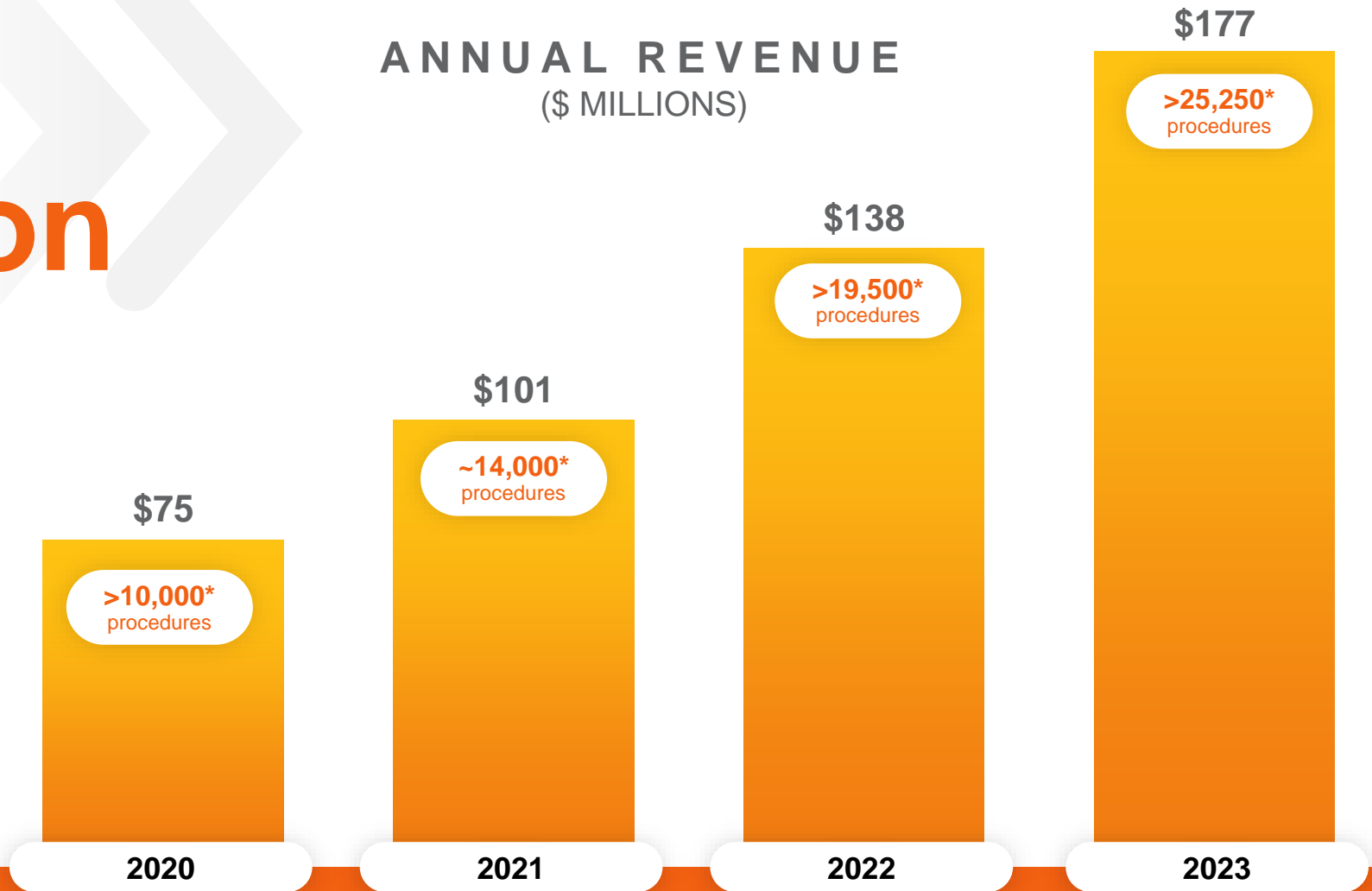
2. Reflects 2024 DRG Rates

Strong Growth Foundation

with significant opportunity ahead

ANNUAL REVENUE (\$ MILLIONS)

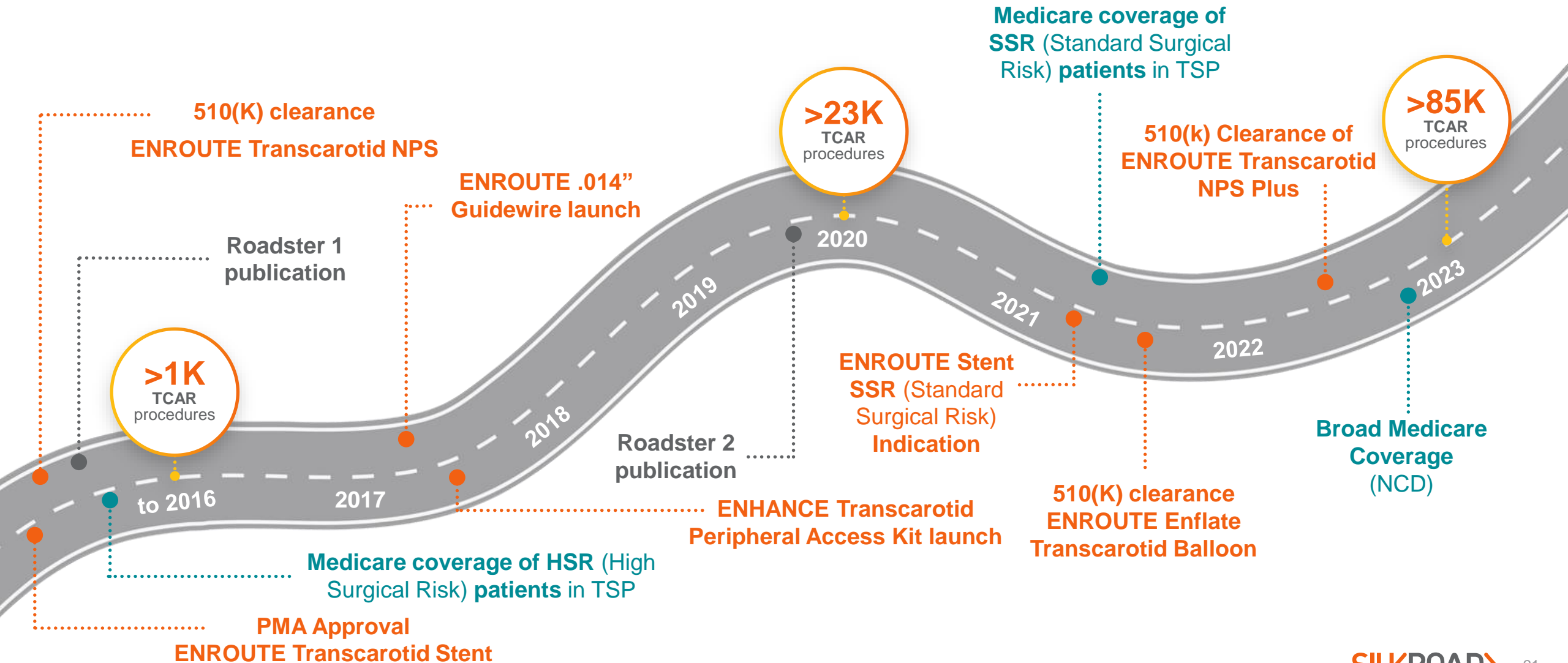
ONLY ~15%
PENETRATED¹



1. Based on ~25,250 TCAR procedures relative to ~172k US carotid artery procedures

*cumulative as of end of calendar year

Key Milestones Since Launch



2024 Priorities

Continue to drive physician TCAR adoption

- Sales team firing on all cylinders: 85 reps and a similar number of Therapy Development Specialists
- Deepen adoption among trained TCAR physicians
- Focus on Fellows and Early Career Physicians

Capitalize on new growth opportunities

- Launch ENROUTE Tapered Stent
- Launch next generation ENROUTE Neuroprotection System (NPS PLUS)
- Target >100 new “Non-VQI” accounts
- Early market development activities in Japan and China

Progress path to profitability

- Drive operating leverage through revenue growth and disciplined spending
- Achieve annual improvement in Gross Margin and Adjusted EBITDA



The image features the SilkRoad Medical logo on a white background. The logo consists of the word "SILKROAD" in a bold, sans-serif font, with "SILK" in orange and "ROAD" in dark grey. A stylized orange arrowhead points to the right from the end of "ROAD". Below "SILKROAD" is the word "MEDICAL" in a smaller, dark grey, all-caps sans-serif font, followed by a registered trademark symbol (®). The background is decorated with several large, overlapping diagonal stripes in shades of orange and yellow, creating a dynamic, geometric pattern.

SILKROAD 
MEDICAL®

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