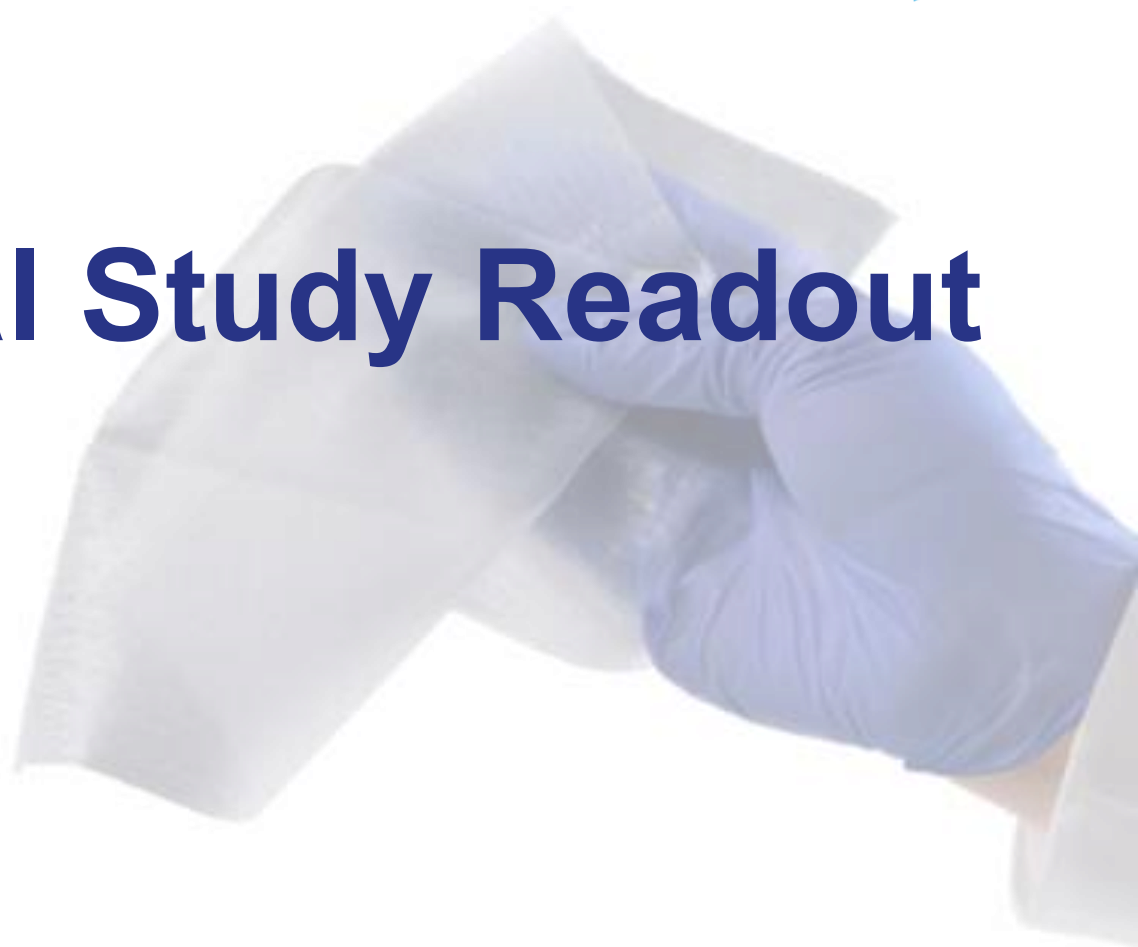




AVITA Medical PermeaDerm I Clinical Study Readout

Investor Presentation

August 18, 2026



Forward-Looking Statements & Legal Disclaimers

This presentation and the accompanying oral commentary may contain forward-looking statements within the meaning of the Private Securities Litigation Reform Act of 1995. These statements are predictions and subject to significant risks and uncertainties that could cause actual results to differ materially from those expressed or implied. Forward-looking statements may be identified by words such as “anticipate,” “expect,” “intend,” “could,” “would,” “may,” “will,” “believe,” “continue,” “estimate,” “look forward,” “forecast,” “goal,” “target,” “project,” “outlook,” “guidance,” “future,” and similar words or expressions, as well as by discussions of future events or results. Forward-looking statements include, but are not limited to, expectations regarding regulatory approvals; physician acceptance, endorsement, and use of our products; the realization of anticipated benefits from product approvals; the impact of regulatory actions; product liability risks; risks associated with international operations and expansion; and other external factors including economic, industry, and political conditions beyond the Company’s control.

These statements are made as of the date of this presentation, and the Company undertakes no obligation to publicly update or revise any forward-looking statements, except as required by law. For additional information and further discussion of these and other risks and uncertainties, please refer to the “Risk Factors” section of the Company’s most recent Annual Report on Form 10-K and other filings with the Securities and Exchange Commission.

AVITA Medical’s products are Rx only. Please reference the Instructions for Use for more information on indications, contraindications, warnings, precautions and adverse events.

In the United States, RECELL® is approved for use in the treatment of thermal burn wounds and full-thickness skin defects. Use of RECELL in other patient populations is either prohibited by United States law or may be made available pursuant to a relevant investigational device exemption granted by the FDA (and likewise limited by United States law to investigational use only).



Participants



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Three Distinct Technologies. One Purpose.



1

PREPARE

PermeaDerm® is a temporary, biosynthetic wound matrix that protects and stabilizes the wound during the healing process.

2

REBUILD

Cohealyx™ is a collagen dermal matrix that enables vascularization and prepares wounds for closure.

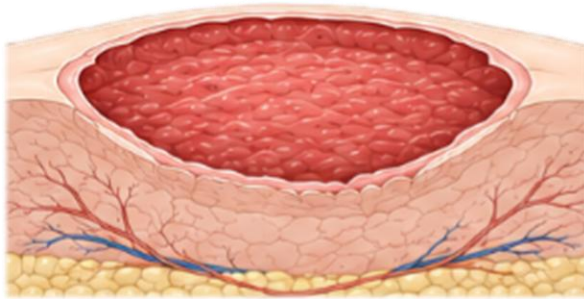
3

RESTORE

RECELL®, RECELL GO® and RECELL GO mini convert a small sample of a patient's skin into spray-on regenerative cells.

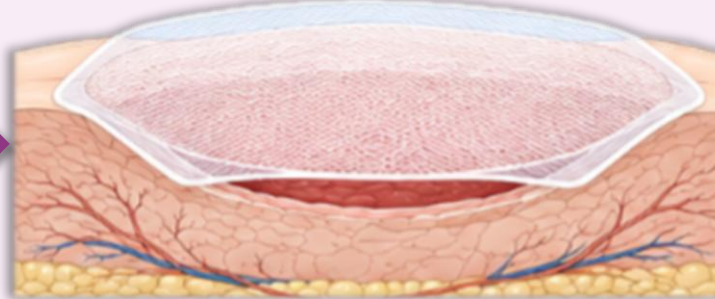
Temporization Bridges Excision to Definitive Closure

Excise



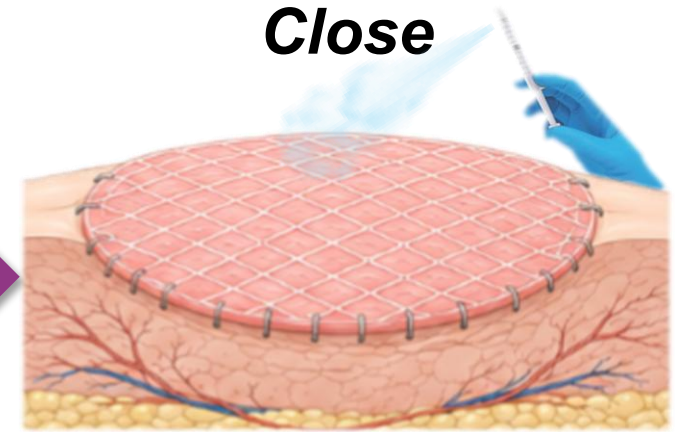
Remove nonviable tissue

Temporize



*Patient not ready
Wound bed not ready
Donor-skin constrained*

Close



Autografting

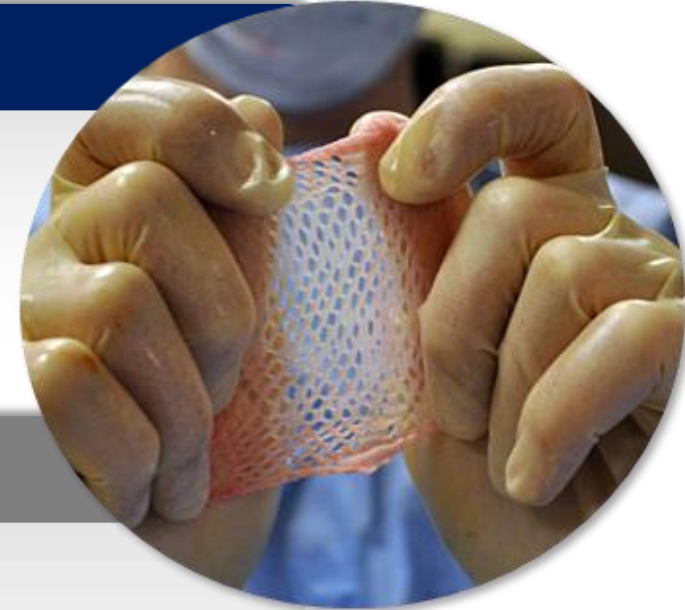
Allograft is Considered Standard, But Has Limitations¹⁻⁴

Benefits

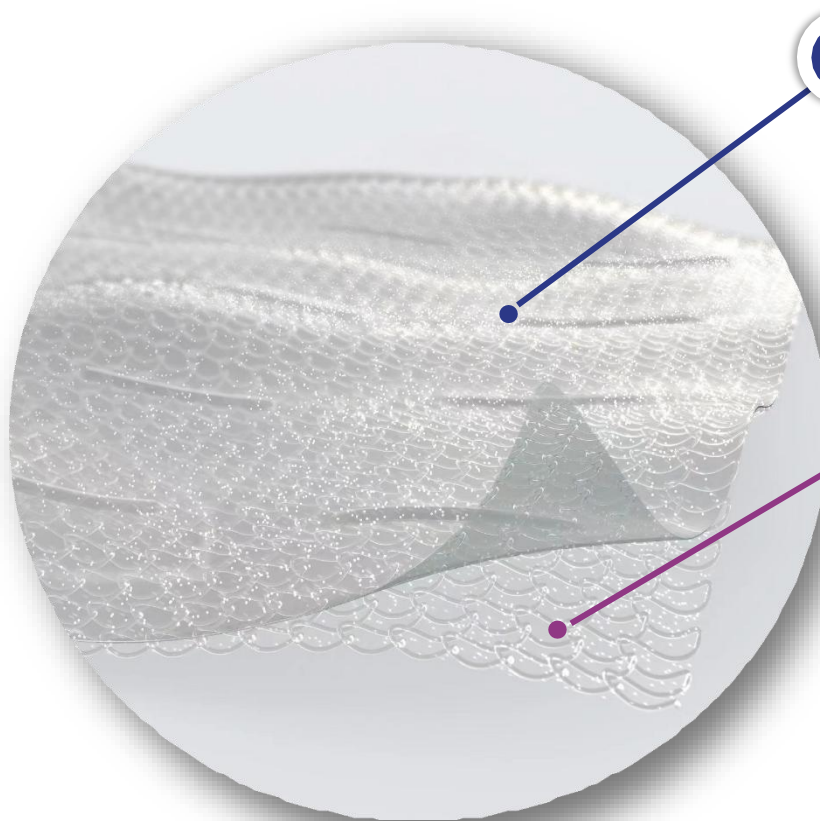
- Proven effective when donor skin is limited
- Tolerant of questionable wound beds
- Serves as an indicator for graft-readiness

Limitations

- Frozen storage and thawing requirement
- Tissue tracking
- Limited sizing/supply
- Risk of human disease transmission and immunogenic response



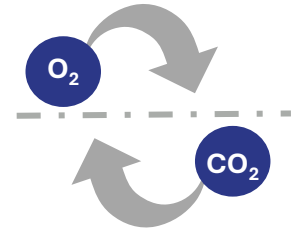
PermeaDerm Mimics Epidermal Function to Provide Temporary Wound Coverage



1

Outer Silicone Layer

Seals the wound bed protecting it from bacteria & trauma while allowing for gas and exudate exchange



2

Inner Bioactive-coated Nylon Matrix

Expedites adherence to wound bed and supports healing

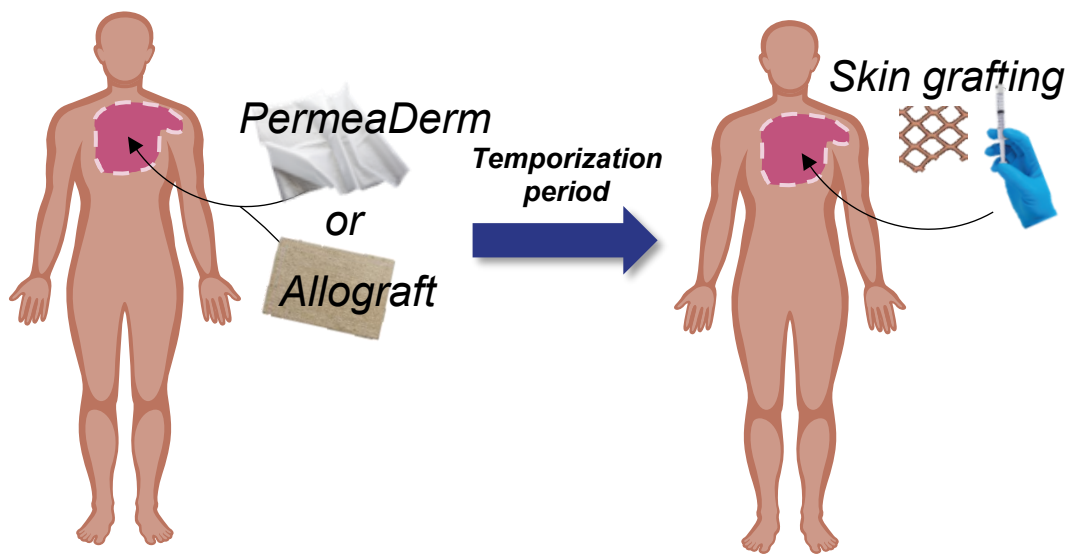
PermeaDerm-I Clinical Trial

Unlocking an Alternative to Allograft

Goal: Establish PermeaDerm as a clinically comparable, lower-cost alternative to allograft

Study Scope

- N=40 RCT
- ≤30% TBSA, early intervention



Endpoints

Safety & Efficacy

- Graft take
- Healing Weeks 1-8
- Inflammatory profile (Biopsy)
- Adverse events
- Surgeon satisfaction

Cost & Workflow

- Cost per %TBSA treated (Primary Superiority Endpoint)
- Preparation time
- Application time

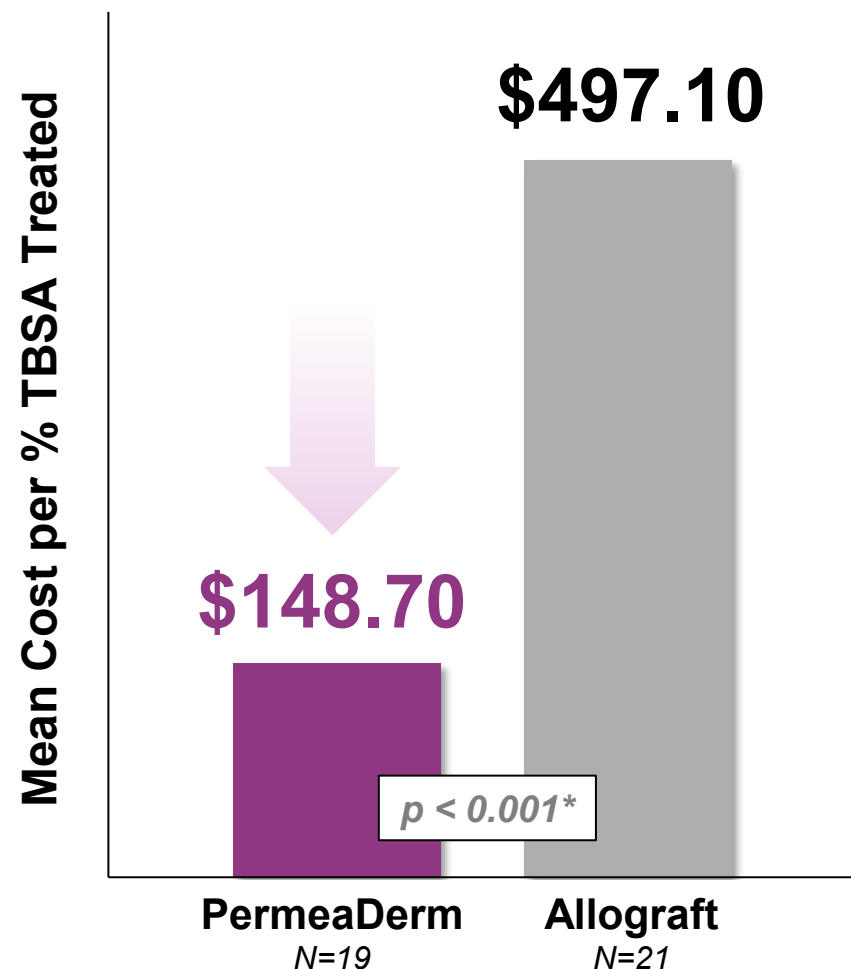
U.S. Multicenter Randomized Controlled Trial



Arizona Burn Center (Dr. Deeter)
Ohio State University (Dr. Loftus)
Regional One Health (Dr. Hassouba)
Atrium Health Wake Forest Baptist (Dr. Saraswat)
University of Kansas (Dr. Slater)
Grady Health (Dr. Nosanov)
Akron Children's Hospital (Dr. Khandelwal)
University of Louisville Burn Center (Dr. Shapiro)
University of Iowa (Dr. Kurjatko)
Virginia Commonwealth University (Dr. Feldman)
Medstar Health (Dr. Shupp)



Primary Endpoint Met: 70% Lower Cost



For every 1% Total Body Surface Area treated, PermeaDerm costs \$348.40 less

*P-value is from a one-sided two-sample t-test with 0.025 significance level.

Note: Total Study Area Size relative to Body Surface Area (BSA) is used to calculate %TBSA. BSA is calculated from subject's height and weight using the Mosteller's formula. Average BSA calculated is 1.98m².

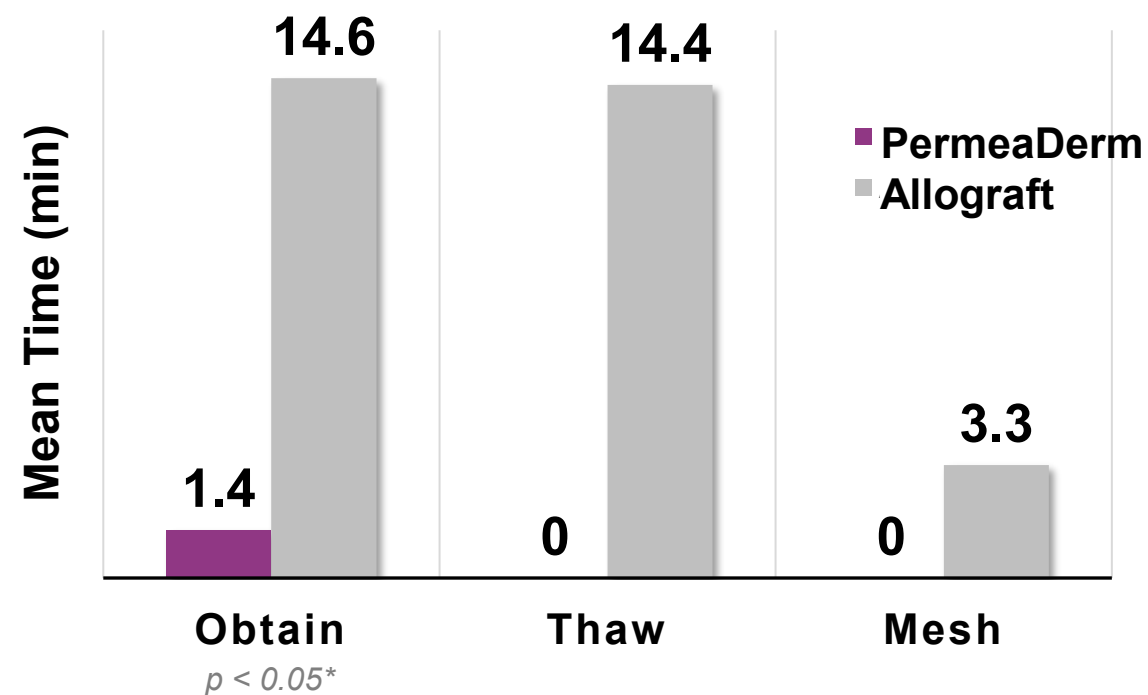
TBSA is calculated by Total Study Area/BSA. Includes re-treatments. Median (Q1, Q3) values for PermeaDerm: 146.9 (129.2, 163.9) and Allograft: 388.6 (345.7, 479.8)

Reference: ClinicalTrials.gov identifier: NCT06750809. Publication in progress.

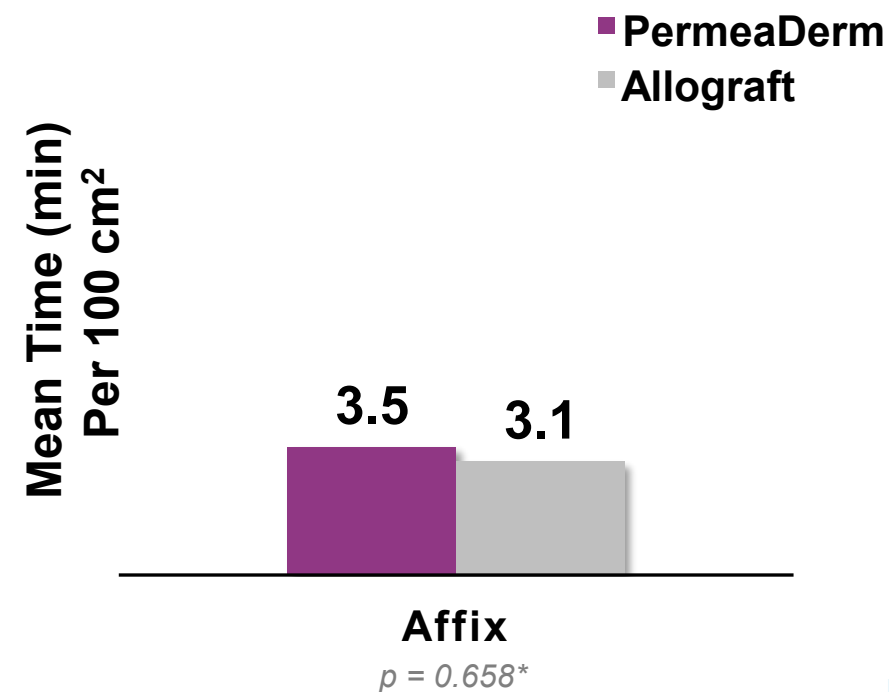


95.7% Mean Reduction in Preparation Time

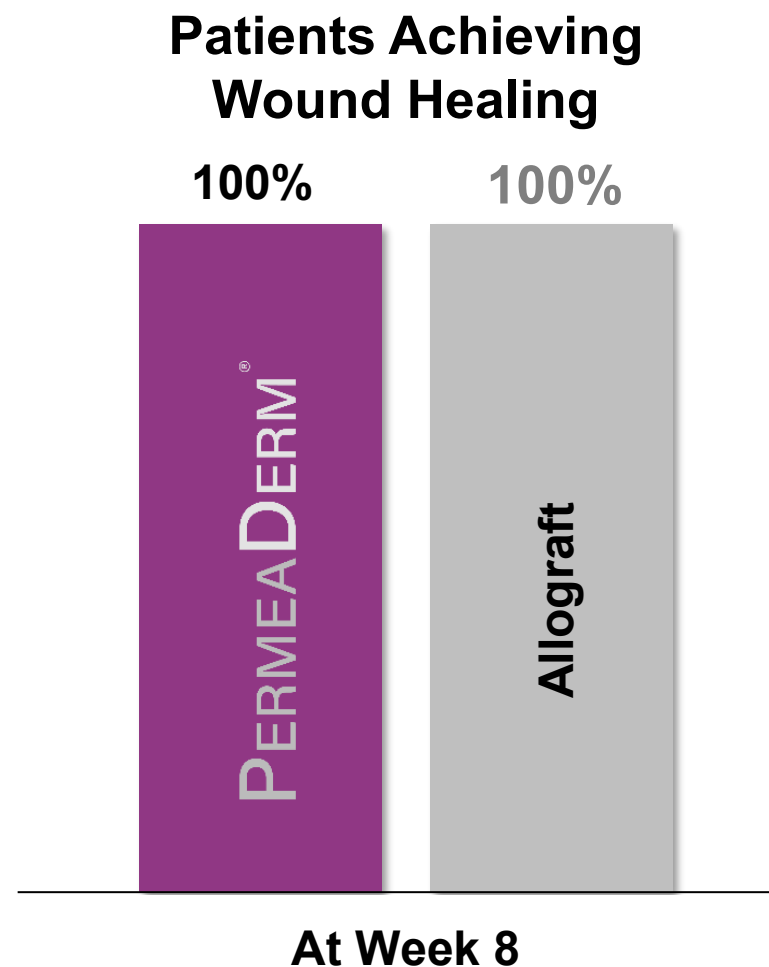
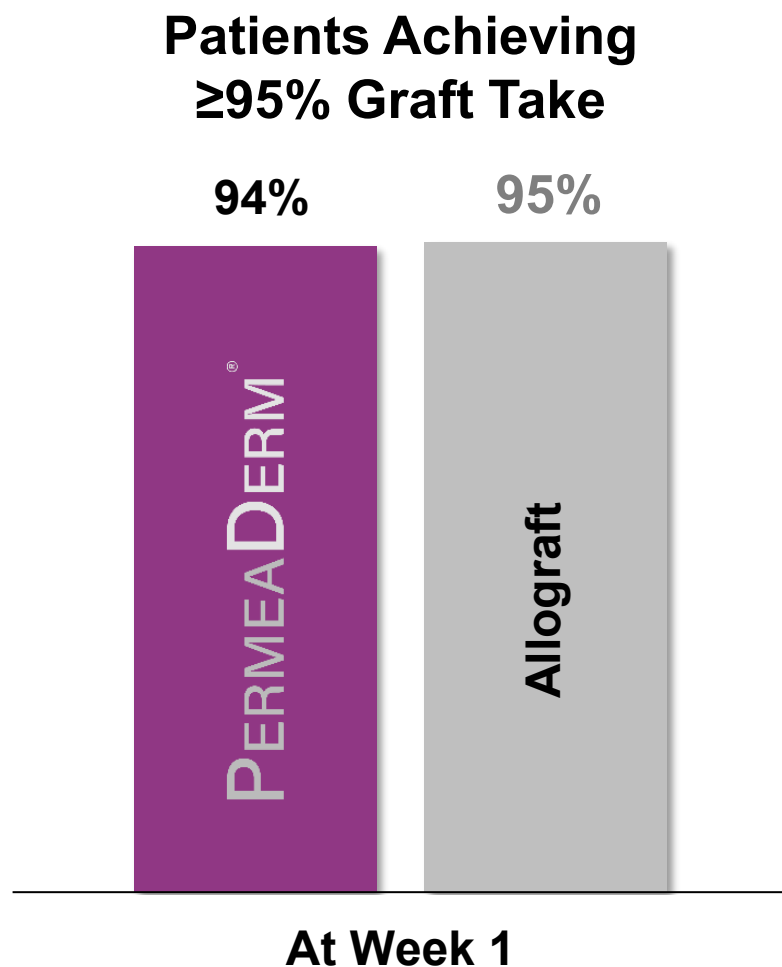
No Tissue Tracking, Thawing, or Meshing



Comparable Affixation Time



Strong Healing Outcomes



No PermeaDerm-related Safety Concerns

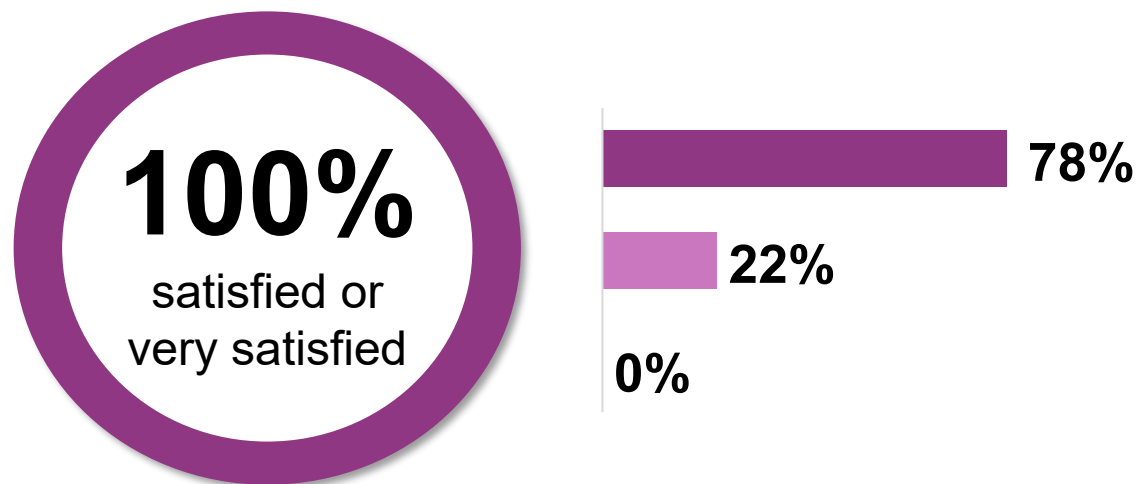
	PermeaDerm (n=19)		Allograft (n=21)	
	Events (N)	*Subjects (N)	Events (N)	*Subjects (N)
All Adverse Events	7	6	24	12
Study Area	3	3	7	7
Graft Loss	0	0	1	1†
Hematoma	0	0	1	1
Infection	1	1	4	4
Tissue Necrosis	1	1	0	0
Pruritus	1	1‡	0	0
Wound Conversion	0	0	1	1
Non-study Area	1	1	4	3
Systemic	3	3	12	7
Donor Site	0	0	1	1

*Individual subjects may be included in multiple categories; †required re-grafting; ‡Event occurred post-PermeaDerm removal, patient did not receive a skin graft because the wound healed
Reference: ClinicalTrials.gov identifier: NCT06750809. Publication in progress.



Strong PermeaDerm Satisfaction Supports Clinical Utility

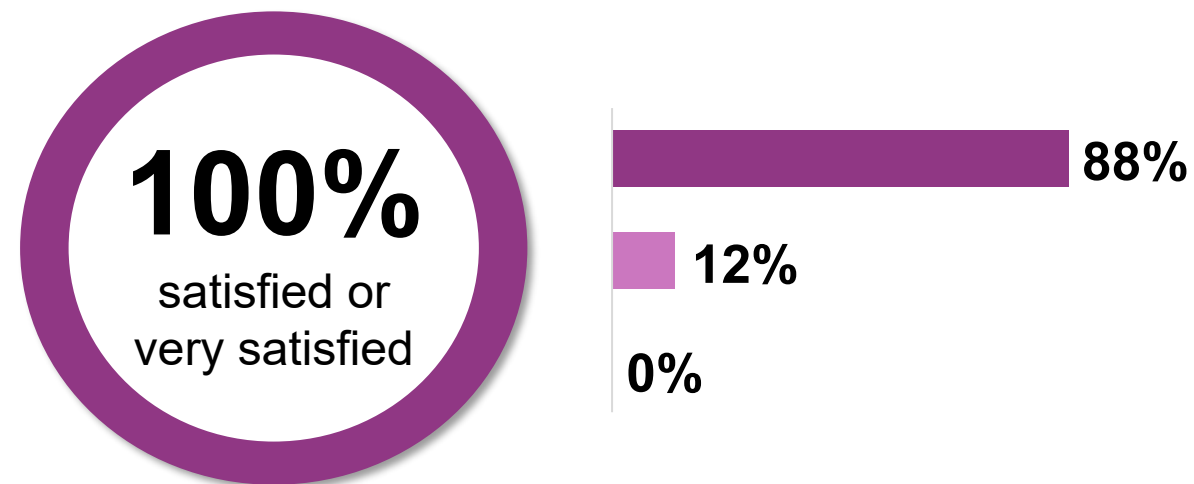
Investigator Satisfaction*



Very Satisfied

Satisfied

Patient Satisfaction*



Neutral, Dissatisfied, or
Very Dissatisfied



Comparative Case Example

PermeaDerm: 59-year-old, female, 364 cm², ASA III, lower extremity

Allograft: 57-year-old, male, 232 cm², ASA III, lower extremity

Excision



PermeaDerm

Allograft

Placement



PermeaDerm

Allograft

2 Days Post-application



PermeaDerm

Allograft

Continued on next slide (1 of 2)

Comparative Case Example

PermeaDerm: 59-year-old, female, 364 cm² , ASA III, lower extremity
Allograft: 57-year-old, male, 232 cm², ASA III, lower extremity

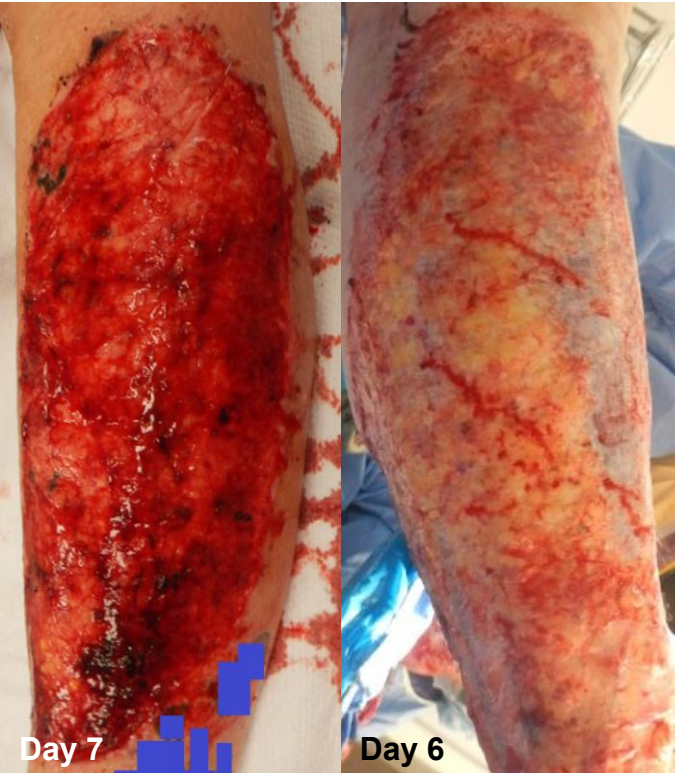
Post-application



PermeaDerm

Allograft

Removal



PermeaDerm

Allograft

8 Week Follow-Up
(Post-autografting)



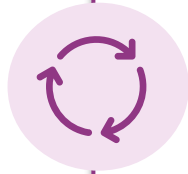
Comparable Healing

PermeaDerm Delivered Comparable Clinical Results with Less Workflow Burden & Lower Cost



Proven Clinical Performance

- **Comparable** graft take and healing
- **No difference** in safety or inflammatory profile
- **High satisfaction** from surgeons & patients



Workflow Simplicity

- **30 minutes less time**: no thawing, meshing, or tissue bank logistics
- **Synthetic product**—unconstrained by donor supply
- **Transparency** for easy wound assessment & timely clinical decisions
- **Easily integrated** into clinical protocols

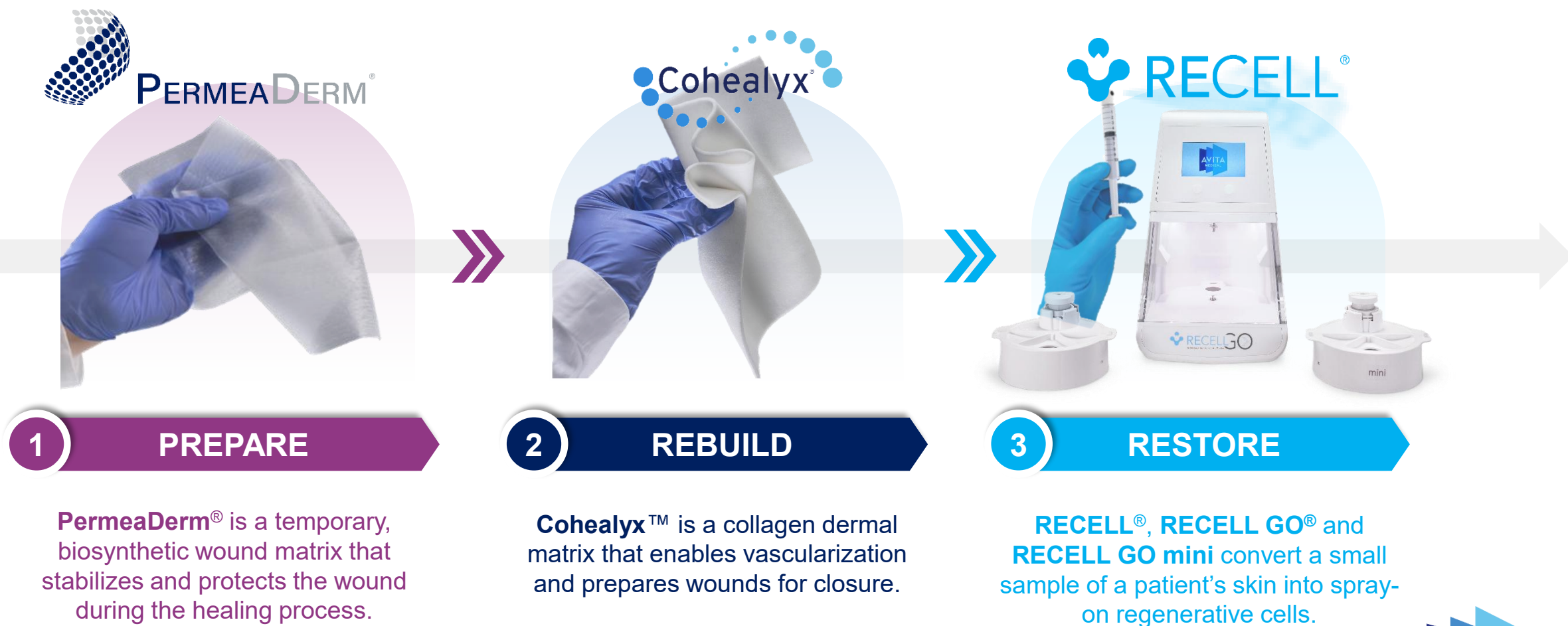


Economic Advantage

- **70% reduction** in product cost per % TBSA

Clinical Experience

Three Distinct Technologies. One Purpose.



Case 1

AVITA Medical Portfolio Case #1

Admission



1

Admission

Admitted with 45% TBSA burn wounds;
staged surgical plan formulated

AVITA Medical Portfolio Case #1

Post-excision



1

Admission

Admitted with 45% TBSA burn wounds;
staged surgical plan formulated

AVITA Medical Portfolio Case #1

3 Days Post-admission



1

Admission

Admitted with 45% TBSA burn wounds;
staged surgical plan formulated

2

PermeaDerm Application

For temporary coverage; replaced at
7 days post-admission

AVITA Medical Portfolio Case #1

71 Days Post-admission



1

Admission

Admitted with 45% TBSA burn wounds;
staged surgical plan formulated

2

PermeaDerm Application

For temporary coverage; replaced at
7 days post-admission

3

Cohealyx Application

To optimize wound bed

4

Skin Grafting + RECELL + CEA

For definitive closure

5

Discharged at 48 days

Discharged with 98% wound closure



Case 2

AVITA Medical Portfolio Case #2

8 Days Post-admission



1

Admission

Admitted with 22% TBSA bilateral burns

2

PermeaDerm Application

Applied 1-day post-admission for 8 days of temporary coverage

AVITA Medical Portfolio Case #2

9 Days Post-admission



1

Admission

Admitted with 22% TBSA bilateral burns

2

PermeaDerm Application

Applied 1 day post-admission for 8 days of temporary coverage

3

Skin Grafting + RECELL

For definitive closure; with Cohealyx

AVITA Medical Portfolio Case #2

30 Days Post-admission



1

Admission

Admitted with 22% TBSA bilateral burns

2

PermeaDerm Application

Applied 1 day post-admission for 8 days of temporary coverage

3

Skin Grafting + RECELL

For definitive closure; with Cohealyx

4

Cohealyx Application & Discharge

To support continued closure (98% closed)



AVITA Medical Portfolio Case #2

45 Days Post-admission



1

Admission

Admitted with 22% TBSA bilateral burns

2

PermeaDerm Application

Applied 1 day post-admission for 8 days of temporary coverage

3

Skin Grafting + RECELL

For definitive closure; with Cohealyx

4

Cohealyx Application & Discharge

To support continued closure (98% closed)

5

Follow-up at 45 days

100% closed



PermeaDerm: An Advanced Alternative to Allograft

1 Clinical Confidence

2 Workflow Simplicity

3 Economic Advantage



Comparable graft take and healing

No safety concerns

Transparent

Shorter preparation time

Fits into clinical protocols

Lower cost than allograft

Questions?



Katie Bush, PhD

*Senior Vice President,
Scientific & Medical Affairs
AVITA Medical*



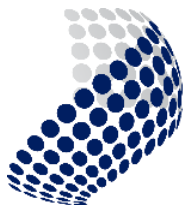
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PERMEADERM[®]