



ELECTROGENICS LABORATORIES LTD

ACN 625 525 745

Next-Generation Radiation Dosimetry

Investment Overview

Series C Round In conjunction with

Raising AUD \$1.2M

(\$500k already secured - Overs will be Considered)

April 2025



Opportunity Snapshot

Key Definitions (Medical Physics)

Dosimetry: The science of measuring radiation, calculated through magnitude and specific calculations.

Radiation Oncology: A medical specialty using high levels of radiation to treat cancer, delivered through a Linear Accelerator (LINAC).

Interventional Radiology: Minimally invasive procedures guided by imaging, where precise radiation measurement is critical.

Key Market Insights

Global Need: Over 20 million new cancer cases annually, with 6 million patients treated using radiation therapy.

Current Challenges: Radiation dosimetry is costly, time-intensive, and lacks real-time accuracy, making it rare in mainstream use.

Significant Market Opening: MOSkin™ is as the clear option for replacement in market due to the recall of a major competitor

MOSkin™ Solution

Innovation: ELL's MOSkin™ dosimeter is fast, low-cost, and provides real-time, accurate radiation measurement—making dosimetry viable for mainstream use.

Market Position: MOSkin™ is fully patented (80% global market coverage) with successful trials in 20+ international institutions.

Unique Advantage: Competitors face market exit due to FDA recalls, positioning MOSkin™ as the clear market leader.

Recent Achievements

Grant Funding: Awarded a \$1.1m Industry Growth Program grant after detailed review by AusIndustry. This is 2nd federal Industry grant awarded to the Company.

Regulatory Pathway: *FDA 510k submission completed in March 2025, with market entry expected around July ~ Aug 2025.*

Engineering & Production Ready: Supply Chains enabled & QA certified

USA Distributors: *Identified and negotiations commenced.*

Current Medical Radiation Measurement Tools Are Outdated and Inefficient

Globally, there are 8,000 + Radiotherapy centres and over 15,000 Linear Accelerators, with 5,800 in the USA & China alone.



Competitor technologies have not changed in over 30 years



Expensive with large capex, servicing costs, and device disinfection



Risks patient safety with inaccurate dosage and delayed results



Completely out of touch with modern clinical pathways

Existing Dosimeters Have Major Flaws



Time consuming and **difficult** to calibrate and use,
1 ~ 3 hrs.



Require post processing which delays results for
hours or days and **cannot provide immediate**
feedback of radiation dose.



Don't measure the dose at skin depth, per an
internation standard.



Are **not single use**, therefore require disinfection
and cleaning.
Are **not Radiolucent**, blocking clinician vision.



Impedes LINAC patient throughput and lower
productivity.



Cumbersome for routine use, needing **large capital**
outlays and **expensive radiation physicist skills**.

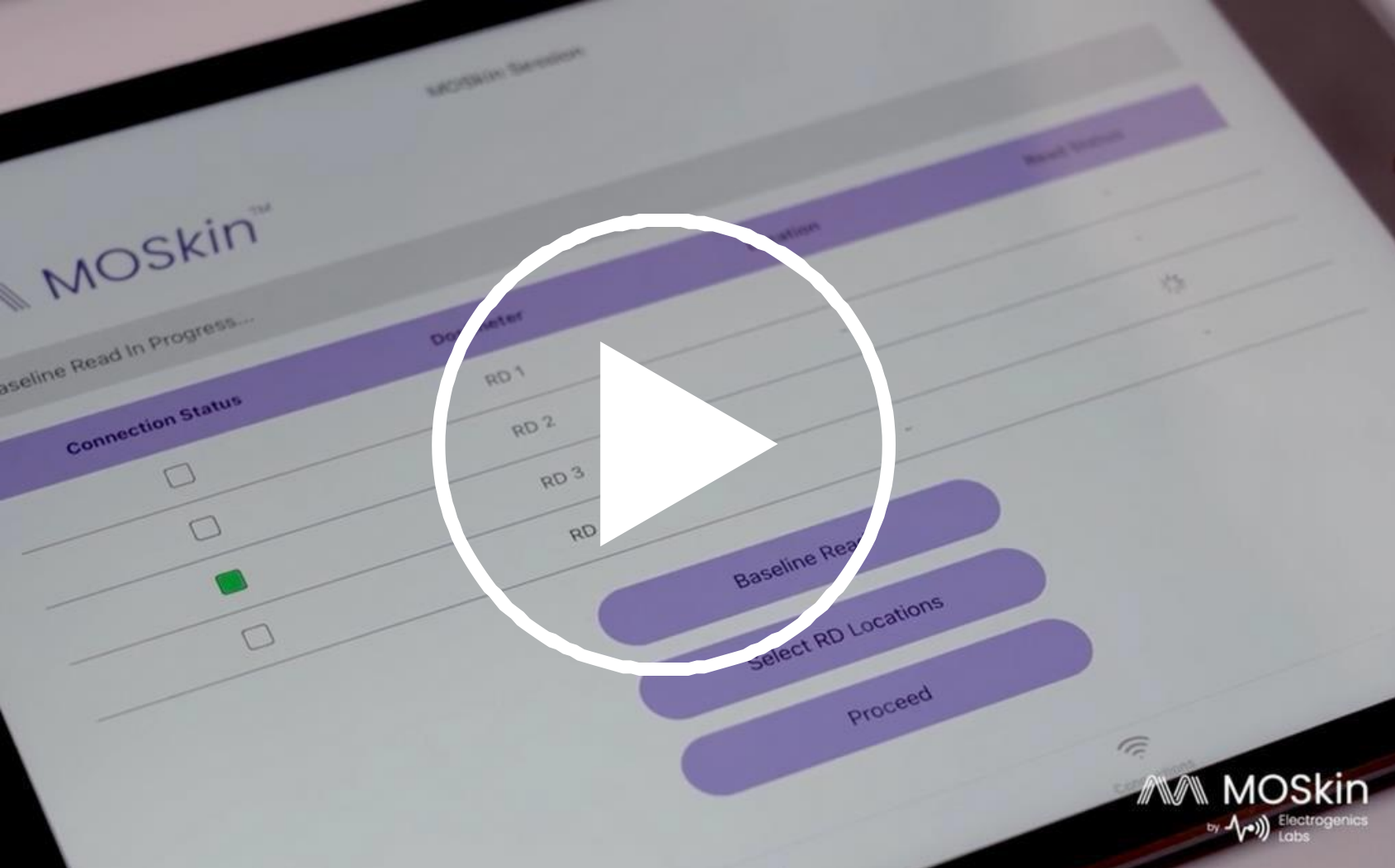
MOSkin™

Introducing MOSkin™

Simple, Immediate, Affordable, & Accurate Radiation Dosimetry

The MOSkin system materially improves clinical pathways, making use of the medical physics laboratory, redundant.





Watch our brand video above to see the MOSkin™ system at work

Materially **Improves** Clinical Workflow

The MOSkin™ system improves facility outcomes by delivering accurate, real-time dosimetry at point-of-care, rather than after slow laboratory-based post processing.

Affordable



Easy to Use



Fast

MOSkin™



Clinical Benefits

- Can be **set up in minutes** by nurses or lab technicians (no longer needing specialist staff)
- **Real-time** radiation measurement to support clinicians.
- **Cost-effective**, disposable, and easy to use.
- Provides **instant results** directly at the treatment site.

Important Patient Benefits



Reduces risk of overdosing – skin burns + increased risk of secondary cancers



Reduced risk of underdosing – Potential for more visits and recurrence



Much quicker set up at the LINAC, reducing patient time in treatment

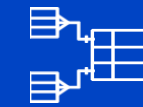
How MOSkin™ Works



Easy to use sensors



Immediate and accurate results



Integrates easily into existing systems

1. Initial Setup



2. Dose measured During Treatment



3. Immediate Data Transmission



4. Real-Time Results at the Bedside



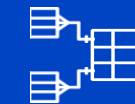
Simplified Clinical Pathway



No disinfection factored in



Use of lower skilled medical staff

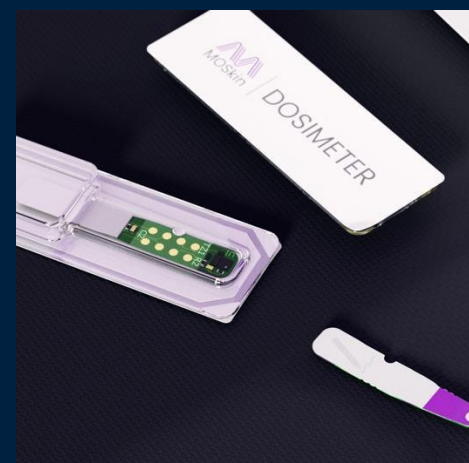


Faster recording and analysis of results

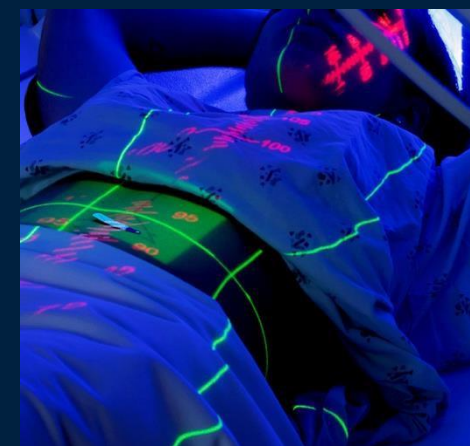
1. Register
Dosimeter At
Hub



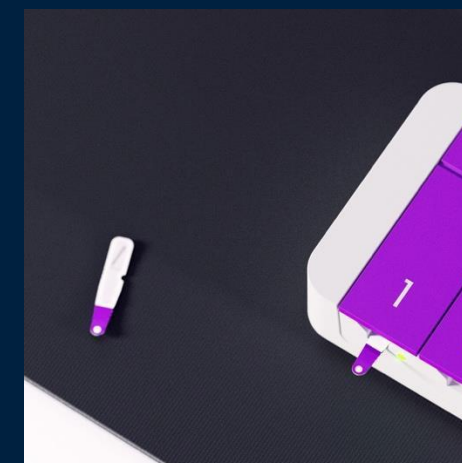
2. Stick on patient



3. Dose measured at
LINAC



4. Dosimeter placed
in hub and result
wirelessly
transmitted to
tablet



5. Immediate results
on ipad and
emailed for
medical records.



Why MOSkin™ Stands Out

- ◆ Superior to competitors in all key facets
- ◆ Largest competitor has exited the market due to an FDA recall, clearing the path for MOSkin™
- ◆ Fully patented and tested in over 20 global institutions

Feature	Old Technology	MOSkin™
Setup Time	1-2 hours per use	3 minutes
Results Delivery	Delayed (1.5+ hours after treatment)	Real-time, instant data during treatment
Accuracy	Moderate (70-85%)	High (>95% accuracy)
Usability	Requires specialist staff for calibration	Operable by nurses/technicians, minimal setup
Patient Safety	Limited monitoring during treatment	Real-time monitoring reduces patient & facility RISK
Cost per Use	High (due to reusable devices needing cleaning), etc	Low (single-use, disposable sensors)
Data Transfer	Wired, often delays in analysis	Wireless, instant data transfer

A Large & Underserviced Global Market



20 million new cancer cases annually



\$300M-\$400M annual market potential in Radiation Oncology



\$80M-\$100M annual market potential in Interventional Radiology

Proprietary Technology

- ◆ Patents are fully assigned to and owned by Electrogenics Laboratories Ltd.
- ◆ ELL has first rights to all new IP developed by UoW in this field.
- ◆ Further ELL IP in development
- ◆ Considerable key Trade Secrets around design & manufacturing not disclosed in the patent

Image shows patents granted in 3 regions, with international patent pending.



The Details

- Expected FDA approval circa July ~ Aug 2025, following a 510(k) Filing in March
- Access to ~8,000 radiotherapy centres globally, with LINAC installations growing at a CAGR of 6%.
- Lower cost per use vs. legacy products due to single-use design and ease of setup.

A Lucrative & Scalable Business Model ...*Underpinned by Platform Technology, for Application in New Markets*



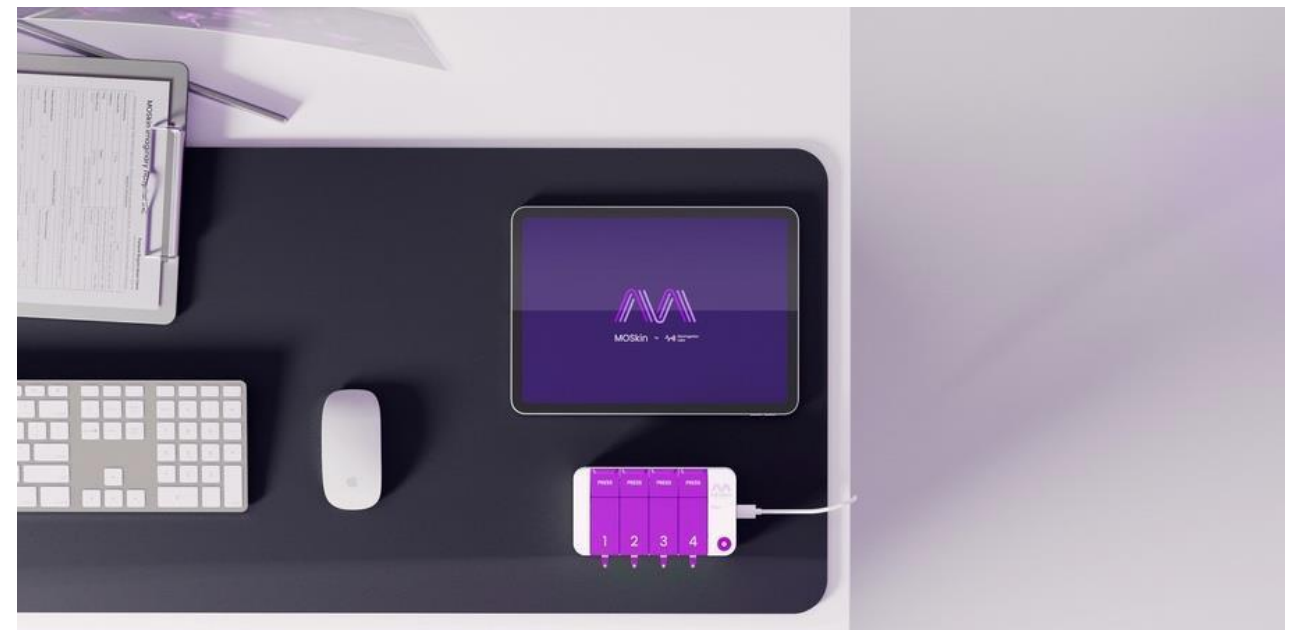
Consumables: Single-use MOSkin™ dosimeters (recurring revenue)



Capital Equipment: MOSkin™ Hubs (one-time purchases) + Utilising iPad



Software: Annual licenses (recurring revenue stream)



Fast Path to Market Entry

R&D, Product Development & supply chain enablement complete



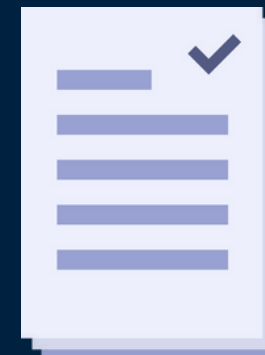
March 2025

510(k) submission complete with FDA as a Class II device.



April-July 2025

Engage and Establish USA distributors and fill supply chains with Product ready for Sales



July ~ Aug 2025

FDA 510(k) clearance anticipated by July ~ Aug, enabling immediate US market entry.



Q3 2025

Initial sales and distribution launch following FDA approval.



Q4 2025

Pursue EU Regulatory Approvals and distribution development activities .

Key Points:

- **FDA clearance expected circa July 2025**
- **Distributor-based model for rapid growth**
- **Positive Distributor negotiations started**
- **1st sales in Qtr. 3, CY 2025.**

1.

United States

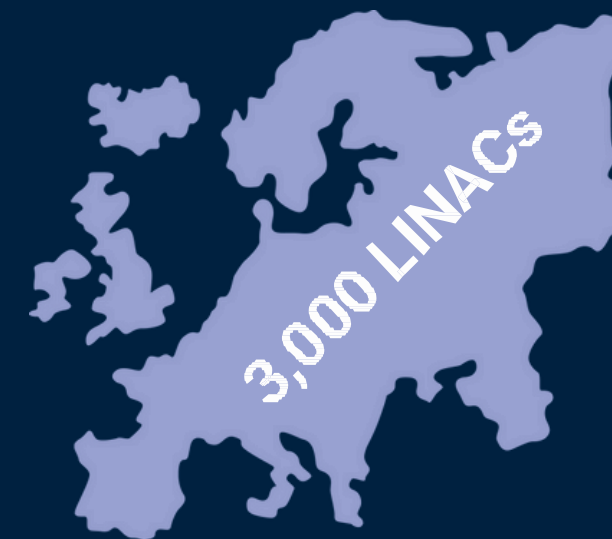
Primary initial target market due to high demand and straightforward regulatory pathway to FDA approval.



2.

Europe

Strategic European countries with high LINAC installations, including UK, Germany, France, and Italy.



Distribution Network

3.

Asia

Initial targets in Japan and China due to growing healthcare infrastructure and need for advanced dosimetry.



4.

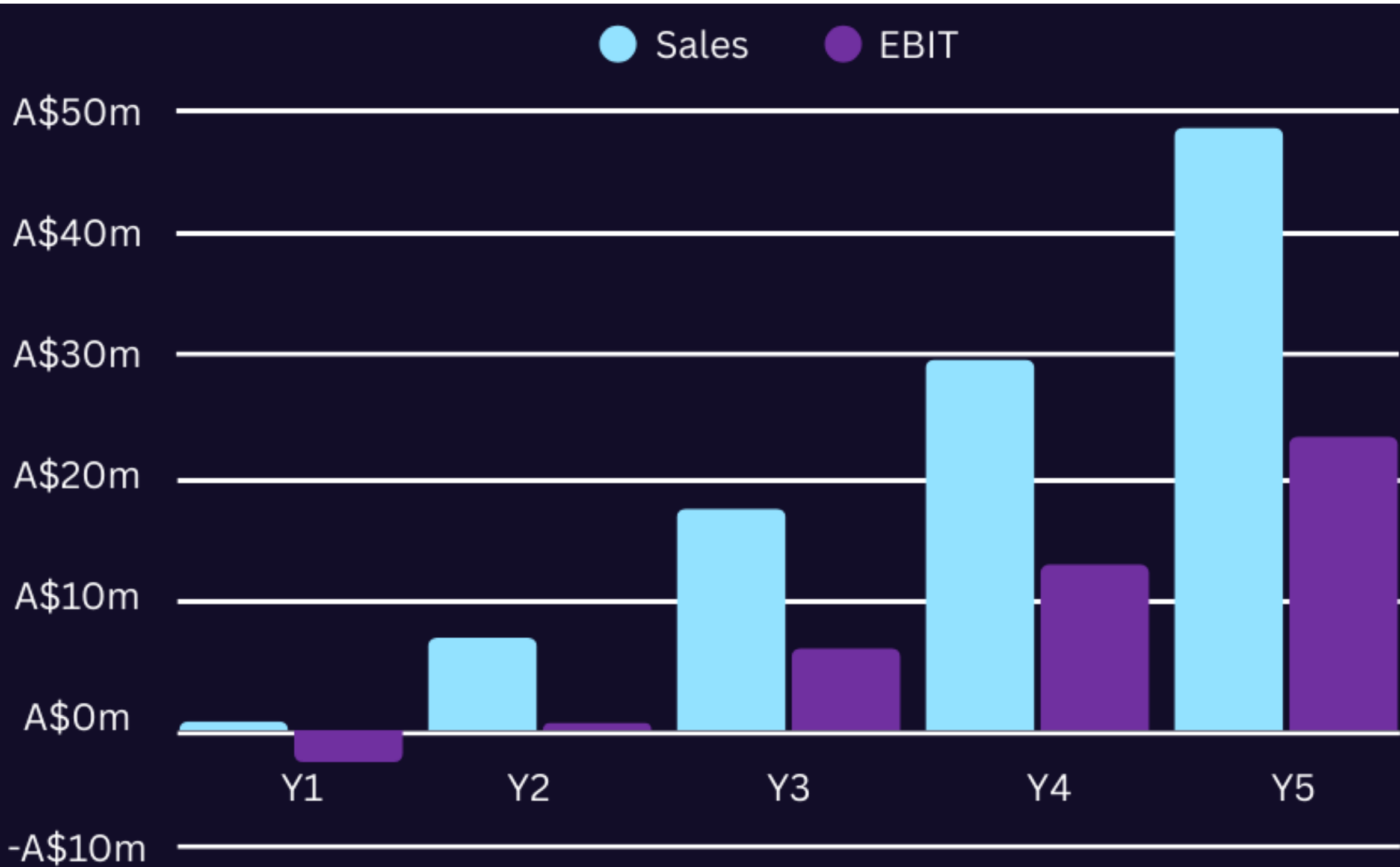
Australia & NZ

Existing clinical partnerships and trial locations make this a target market for expansion.



Out GTM strategy is indirect via in-country channel partners

Linear Growth & Profitability



Break even
expected in Year 2

Revenue growth
driven by market
penetration,
replacing old
technologies, and
competitor
withdrawal

IPO or Exit Planned
Q4 2026

45% + EBIT by
year 3

The Projected Numbers

P&L Projection - Existing Market Only**						
Year (Base Year 2025)	1 - (6mo)	2	3	4	5	Total
Sales						
Sensors Sold (MOSkin™ Units)	8,848	92,516	241,916	449,394	740,271	
Software Licenses Active (Units)	71	810	2,253	4,146	6,993	
Hub Sales (New Customers)	71	739	1,443	1,893	2,847	
LINAC Population (6% CAGR) Rounded	15,000	15,900	17,000	18,100	19,200	
Market Share of LINAC machines	0.47%	5.09%	13.25%	22.91%	36.42%	
Total Sales	699,000	7,458,000	17,889,000	29,931,000	48,694,000	104,671,000
Royalty/License fees	48,000	543,000	1,244,000	2,066,000	3,298,000	
COGS	353,000	2,212,000	4,557,000	6,998,000	11,341,000	
Gross Profit	298,000	4,703,000	12,089,000	20,867,000	34,055,000	72,012,000
Gross Margin %	43%	63%	68%	70%	70%	
Other income R&D rebates etc.	319,000	224,000	215,000	269,000	438,000	
Expenses						
Sales & Marketing Expense	216,000	766,000	1,189,000	1,713,000	2,539,000	
R&D Engineering & Technical Expense	950,000	746,000	716,000	898,000	1,461,000	
Tech Support & SW Maintenance	69,000	654,000	1,456,000	2,411,000	3,615,000	
Corp Overheads	1,960,000	2,153,000	2,327,000	2,730,000	3,154,000	
Total Expenses	3,195,000	4,319,000	5,688,000	7,752,000	10,769,000	31,723,000
% of Sales	457%	58%	32%	26%	22%	
EBIT	-2,577,000	608,000	6,616,000	13,383,000	23,725,000	41,755,000
EBIT % of Sales	-369%	8%	37%	45%	49%	

Capital Strategy & Offer Overview

Offer Details	Information
Raise Amount (Series C Round)	A\$1.2M
Price per Share	A\$0.065
Issue Instrument	Ordinary Shares
Pre-Money Valuation	A\$12M*
Target Liquidity Event Horizon	Q4 2026

This Round



Series C Round Initiation

USE OF FUNDS: Initial setup for US market entry pending FDA 510(k) clearance.
A \$1.2M @ A\$0.065 per share



FDA Submission

510k Class IIa.
FDA submission lodged in March of 2025



FDA Clearance & Market ENTRY

Expect FDA 510(k) clearance in July~Aug of 2025.
Prepare for market entry and establish early sales channels.



Initial Sales & Distribution

Launch initial sales Q3 CY 2025, pre-IPO if required.
Supports commercial readiness.



Possible Liquidity Event

Planned for Q4 2026 Est.
A\$0.25-A\$0.30 +per share
based on market conditions
IPO or Trade sale

EV ~A\$12M*
A\$ 6.5c

1

March 25

2

March 25

3

July 2025

4

Q3 2025

5

Q4 2026

**Next Raise A\$2M ~A\$3m @
A\$0.18-A\$0.20**

*Estimated range of EV at Round

^a Contingent on Capital raise and market conditions

Pro Forma Capital Structure

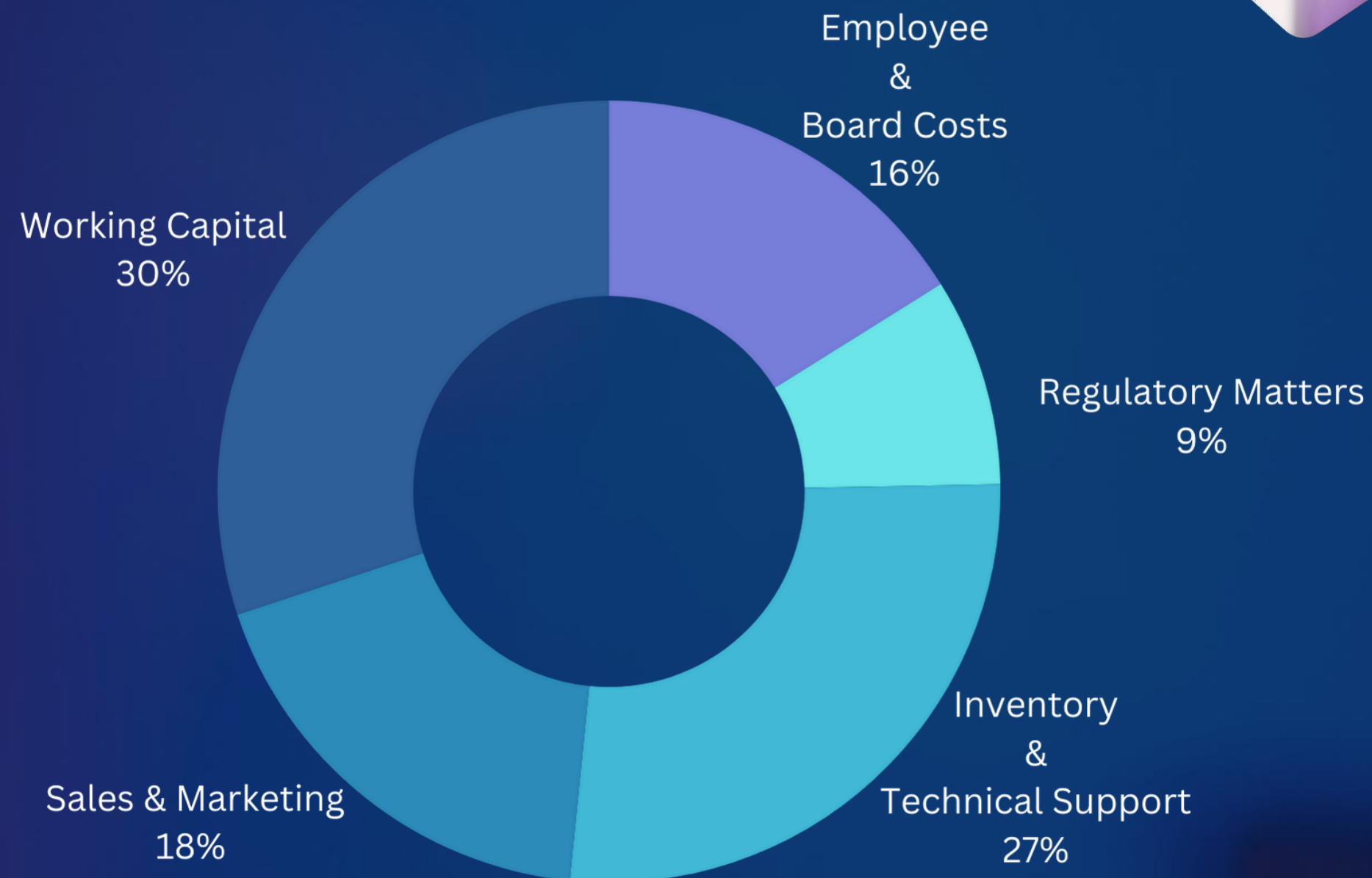
Pro Forma Capital Table – Post Series C Raise		
Shareholders	Shares	Holding
University of Wollongong	11,475,000	5.66%
Founders (3 people)	43,861,254	21.63%
ELL Trust shares & Board & Management	30,631,811	15.1%
Service Providers and Advisors	2,049,996	1.01%
Other shareholders from A & B rounds (93 shareholders)	96,306,133	47.49%
Current Round Series C @ 6.5 cents per share	18,461,538	9.10%
TOTAL Shares	202,785,732	100.00%

Use of Funds

How we will spend \$1.2M

Primary Allocation:

- Regulatory Matters
- Inventory build-up
- Employee & Board Costs
- Sales & marketing
- Working capital



Experienced Leadership with Proven Expertise



**David Rundell,
CEO**

Extensive experience within the Medical Device and Radiopharmaceutical industries with an exceptional track record.

Previously 9 years as the CEO of Laudauer's Nanodot Dosimetry business in Australia and NZ, substantially growing Laudauer's Dosimetry business. He is an expert in the commercial sphere of medical physics.



**Geoff Neilson,
Non-Executive
Director**

Over 30 years in Medical Devices including and senior VP level roles at ResMed across multiple business functions including Product Development, Commercial, and Supply Chain Management roles



**Mario Pennisi AM,
Non-Executive
Director**

Over 30 years in life sciences, experienced in commercialisation and strategic leadership. Director of several successful healthcare businesses in Australia and the USA.

Foundation career in Health tech including Mayne Health.



**Dr. Arthur
Brandwood,
Non-Executive
Director**

40 years in MedTech, expert in regulatory and product commercialisation.

Senior roles in the TGA and adviser to international regulators over many years.



**Geoff Marshall,
Chair**

Deep experience in medical and non-medical sectors. Former big 4 Accounting Partner, investment banker, and founding MD of Nanosonics Ltd.

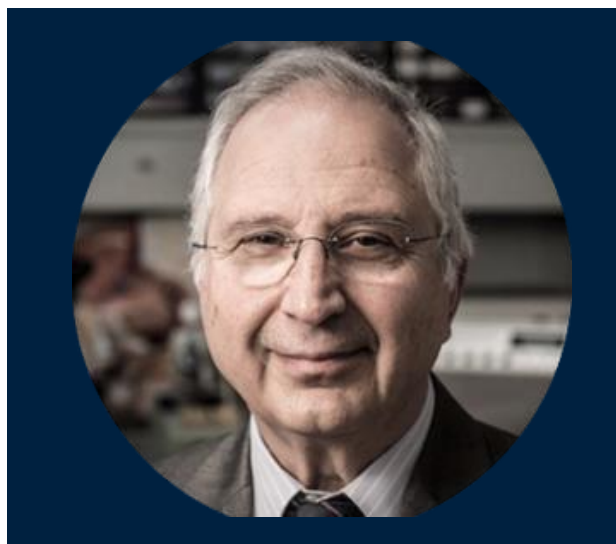
Previous roles include COO of Mayne Health Private Hospital Group and founder of several start ups.

Specialist Advisors, Key Team & Partners



**Prof. Michael Jackson,
Medical Advisor, MD**

25 years in MedTech and business development, ex-VP at ResMed.



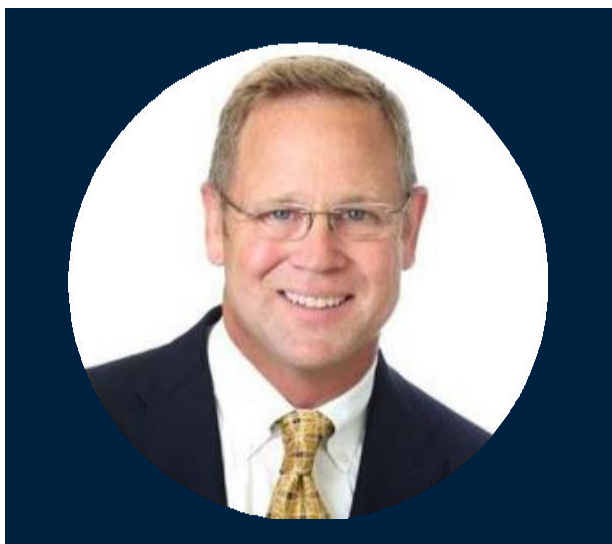
**Prof. Anatoly Rozenfeld,
Scientific Advisor.**

World renowned leader in radiation therapy instrumentation, founder of the Centre for Medical Radiation Physics.



Matthew Harrington, Product Development & Supply

20+ years in MedTech and CleanTech, former ResMed product lead.



Brad Tvedt, Sales & Marketing

Senior sales leader, previously at ResMed and Philips Healthcare, scaled sales from start-up to multi-million revenue.



**Grant Palmer,
QA/RA/Clinical**

30 years in regulatory affairs, clinical research, and quality assurance; experience with global market approvals.

GTM Partners



Recap



Strong Market Need

- Immediate demand for accurate radiation dosimetry following regulatory induced competitor exit.
- Over 20 million new cancer cases annually; 6 million treated with radiation therapy.



Regulatory & Market Readiness

- Minimal regulatory risk with FDA approval expected within 4 ~ 5 months from submission in March 25 (Q1 CY 2025).
- Successful trials in over 20 international institutions testing product reliability.



Compelling Business Model

- Recurring revenue from single-use dosimeters and software licenses.
- Proven 'razor/razorblade' model, maximising customer lifetime value (est. \$60k-\$100k per LINAC over 10 years)



Experienced Leadership

- Highly skilled team with decades of MedTech expertise and strong R&D backing from leading institutions (UoW & CMRP)



Attractive Investment Potential:

- Conservative valuation with potential for 2-3x uplift post-FDA approval.
- Near-term liquidity event planned via a trade sale or IPO, anticipated Q4 2026



Solid IP Portfolio

- Fully owned and patented in all significant global markets.





● JOIN US IN TRANSFORMING RADIATION DOSIMETRY

[Click here or scan QR Code
for More Information Or
Apply for shares](#)



Contact us for more information about this opportunity

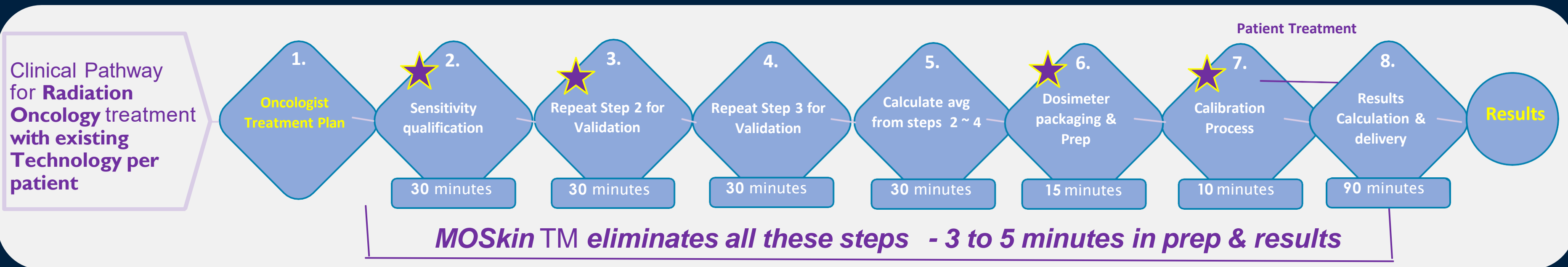
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APPENDIX

Detailed Clinical Pathway & Competitor Analysis



	A\$ Capital Outlay	A\$ Service cost~10yrs	A\$ Cost for Sensors^	Prep time before Dose	Time to results	Max Patients /day/ #	Typical Accuracy	Application Coverage	Realtime	WED Std
Existing Technology TLD Sensors	Ave \$60K	Ave \$350K	\$30-\$60	~2.5 hrs	>1.5hrs	5~10	70~80%	~80%	NO	NO
Existing Technology DIODES ★	Ave \$20K	Ave \$100K	\$1.5-\$2.5K	~1 hr	Real Time	12~15	75~85%	~70%	YES	NO
MOSkinTM	Ave \$12K	\$50K**	\$35	~3 mins*	Real time / Instant	20~25	>95%+	99%+	YES	YES

^ Per Sensor. Sensors can be used multiple fractions for same patient

* Assumes pre-calibrated

** Annual Software license over 10 yrs.

= Linear accelerator, uses electricity to generate high energy beams of electrons

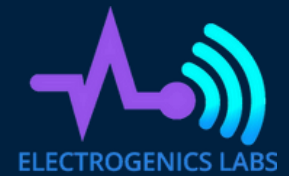
Fully Patented and Tested at More than 20 Specialist Clinics & Hospitals Around the World



- MOSkin™ has been **tested and validated** in Australia & internationally in >20 hospitals & clinics
- Tested **on over 2,000** patients and simulations
- Over **40 published** scientific papers
- A subject of **21 PhDs**
- **> 500 references** in Google scholar
- Over **\$10 million** in equity, cash and grants invested to date
- St George Public Radiation Oncology unit has been using the Company's prototypes under ethics committee approval for **over 12 months**, recently expressing interest to extend the use of prototypes in preference to existing in market technology

INTERNATIONAL	AUSTRALIA
Argon National Lab, USA	St George Cancer Care Centre, Prostate Cancer Institute, St George Hospital, Sydney
Mass General, Boston, USA	St Vincent's Hospital, Sydney
Wisconsin University Hospital, USA	Liverpool Hospital
Brookhaven National Lab, USA	Calvary Mater Hospital – Newcastle, Australia
University of Malaya Medical Centre, Kuala Lumpur, Malaysia	Royal Adelaide Hospital
Italian National Institute of Tumours, Milan, Italy	Illawarra Cancer Care Centre
CERN Switzerland	Perth Hospital
KEK Japan	Prince of Wales Hospital
Sun Yat-Sen University Cancer Centre, Guangzhou China	Mater Hospital, Newcastle
Radiation Dosimetry Lab, Federal University of Pernambuco, Brazil	Peter MacCallum Cancer Centre
City University Hong Kong Hospital	Geneva Hospital

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