



# HEMOSTEMIX

Blood-derived cell therapies

November 28, 2018

HEMOSTEMIX

# FORWARD-LOOKING INFORMATION

This presentation contains forward looking statements that reflect management's expectations regarding the future growth, results of operations, performance (both operational and financial) and business prospects and opportunities of Hemostemix Inc. ("Hemostemix" or the "Company"). This Presentation contains "forward-looking statements" and "forward-looking information" (collectively, "forward-looking information") within the meaning of applicable securities legislation. Forward-looking information are generally, but not always identified by the words such as "may", "would", "could", "will", "likely", "expect", "anticipate", "believe", "intend", "plan", "forecast", "project", "estimate", "potential", "might", "seek", "budget", "outlook", and other similar expressions. In addition, forward looking statements include, but are not limited to the Company's assessment of, and targets for, (a) the stem-cell industry, including, the potential opportunities and challenges in the current stem cell industry environment and other industry statistics; (b) matters pertaining to Hemostemix, including its strategy, completed, anticipated and potential transactions and the characteristics thereof, future acquisition opportunities, partnerships, licensing opportunities and joint ventures; (c) matters pertaining to the Company's future research and development initiatives including future clinical trials, for critical limb ischemia ("CLI") and other indications such as cardiovascular, vascular and neurological; (d) management's estimated timelines regarding the Company's phase II clinical trial for CLI and potential fast track approval for a heart trial; (e) the anticipated receipt of licensing revenues; and (f) sources and extent of necessary funding, are all specifically considered forward-looking information.

Actual results, performance or achievement could differ materially from that expressed in, or implied by, any forward-looking information in this Presentation, and, accordingly, investors should not place undue reliance on any such forward-looking information. Forward-looking information involves significant risks, assumptions, uncertainties and other factors that may cause actual future results or anticipated events to differ materially from those expressed or implied in any forward-looking information and accordingly, should not be read as guarantees of future performance or results. Forward-looking information involves risks and uncertainties including, but not limited to, the Company's anticipated business strategies, anticipated trends in the Company's business and anticipated market share, that could cause actual results or events to differ materially from those expressed or implied by the forward-looking information, general business, economic and competitive uncertainties, regulatory risks including that the Company's current phase II clinical trial will be completed within the timelines and on the terms currently anticipated as well as general assumptions respecting the economic and stem cell industry environment, business and operations of Hemostemix, including that each business will continue to operate in a manner consistent with past practice and pursuant to certain industry and market conditions, as well as those risk factors disclosed elsewhere in the Company's public disclosure.

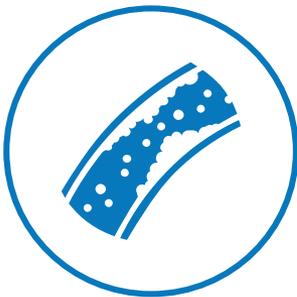
Any forward-looking statements speak only as of the date on which such statement is made and the Company disclaims any intention or obligation to update or revise any forward-looking information as a result of new information, future events or otherwise, unless required by applicable law. New factors emerge from time to time, and it is not possible for management to predict all of such factors and to assess in advance the impact of each such factor on the Company's business or the extent to which any factor, or combination of factors, may cause actual results to differ materially from those contained in any forward-looking statements. Forward-looking information contained in this Presentation is based on the Company's current estimates, expectations and projections, which the Company believes are reasonable as of the current date. The Company can give no assurance that these estimates, expectations and projections will prove to have been correct. Historical statements should not be taken as a representation that such trends will be replicated in the future. No statement in this Presentation is intended to be nor may be construed as a profit forecast.

Information is provided in this Presentation comparing the Company's business model to other stem cell research/development companies. These peer companies have been included in this Presentation based on Company management's belief of the similarity of the business model to that of the Company. Comparables such as stage of clinical trial, indications, cells/source and approach were chosen as they represent what management of the Company believes are fundamental metrics for stem cell research/development companies. Such information was obtained from public sources and has not been verified by Hemostemix.

# HEMOSTEMIX INC. – CELL BASED THERAPIES

**Hemostemix Inc.** (TSXV:HEM; OTCQB:HMTXF) is a public Canadian biotechnology company focused on the research, development and commercialization of blood-derived stem cell therapies. The Company has a robust IP portfolio of over 50 patents issued and pending for its technologies. Its lead product, ACP-01 is currently approved by the US FDA and Health Canada for a Phase II Clinical Trial for Critical Limb Ischemia and has safety and efficacy trials complete for heart indications.

**ACP-01: Primarily for the treatment of medical conditions such as:**



Critical Limb Ischemia (CLI)



Heart Disease



Peripheral Arterial Disease

# HEMOSTEMIX – AT A GLANCE

## Intellectual Property

- 50+ Patents issued or pending worldwide
- Unique Processes
- Low Risk Safety & Efficacy

## Expandable Platform

- Robust R&D pipeline
- Multiple disease therapies
- Fully scalable manufacturing process
- Autologous and allogeneic process developed

## Resource Optimization

- Lean corporate structure
- Focus on clinical trials and R&D
- Experienced management and scientific team
- World class Scientific Advisory Board



## Key Partnerships

- Manufacturing Agreement in place with FDA approved cGMP (Certified Good Manufacturing Practice) facility
- Licensing Agreement in place can facilitate an accelerated pathway to revenue
- Contract Research Organization engaged

## Data Driven

- Historical Data (>300 patients)
- 12 Years of History
- Multiple Trials completed

## Clinical Trials – Clinical Data

- Health Canada and US FDA approved – Phase II CLI
- Site onboarding and patient enrollment in process across Canada and US
- Preparing pre-IND submission for Phase II Angina Pectoris Trial

# THE IMPORTANCE OF STEM CELL THERAPY

## Disease Trends:

- CLI is a major global health problem - incidence growing with aging population
- CLI has limited treatment options – significant amputations and high cost to society
- Cardiovascular disease (“CVD”) is the number one cause of deaths in North America and worldwide causing approximately 1 in 3 deaths
- Rising healthcare and economic costs - CVD costs anticipated to double by 2035 in USA
- Type 2 diabetes is a global health epidemic on the rise resulting in increasing PAD and CLI diagnosis

## Strong Government and Public support:

- Regenerative medicine is leading edge for biotech investment
- Unmet need for new less invasive, non-surgical treatments
- Right to try legislation approved federally in United States
- Experimental stem cell therapies approved in Texas
- Shift from drugs to cell based therapies

## Population and Lifestyle Factors:

- Aging populations worldwide, especially Europe and North America
- Senior citizen population rising with longer lifespans
- Poor diet and lifestyle factors increase prevalence of conditions that lead to disease

# TECHNOLOGY DIFFERENTIATORS

Proven **safety and efficacy** in >300 historical patients treated with ACP-01

Blood draw, **safer and less invasive** than bone marrow

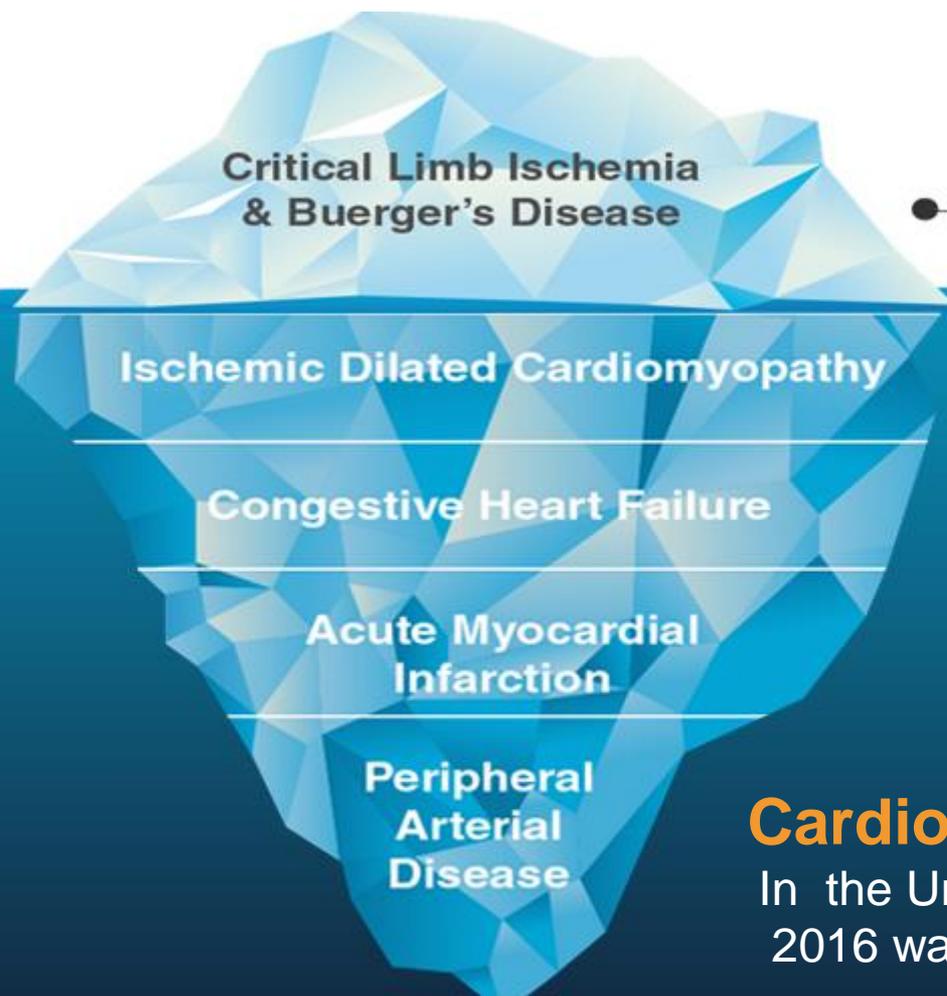
Strong IP portfolio of **50+ patents**

## Safe & Effective

**Non-surgical**, enhanced cell therapy treatment for restoring circulation to damaged tissues due to disease



# POTENTIAL MARKETS



● Tip of the Iceberg

CLI - Estimated total costs up to \$248B<sup>1</sup> in US.

## Cardiovascular Disease (CVD)

In the United States, total costs of CVD in 2016 was \$555B and is projected to be \$1.1T by 2035<sup>2</sup>

1. Source: The Sage Group

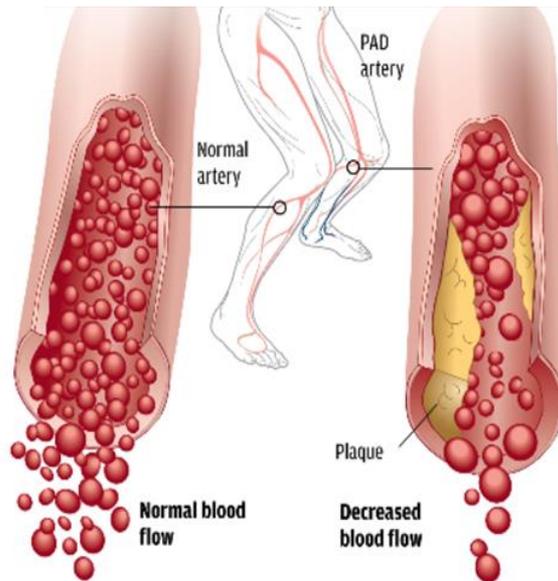
2. Source: American Heart Association Report: Cardiovascular Disease: A costly Burden for America

# ABOUT CRITICAL LIMB ISCHEMIA (CLI)

Critical limb ischemia is a chronic condition and is the most severe and deadliest form of peripheral arterial disease (PAD) with limited treatment options. CLI is characterized by insufficient blood supply to lower limbs. Complications include leg and foot ulcers which can lead to gangrene and limb loss due to amputation.

**Mortality rate** up to 25% within one year of diagnosis and over 50% at 5 years<sup>1</sup>.

Currently limited treatment options for CLI: **revascularization or amputation**. No approved drugs for treatment.



**Age and diabetes** are two significant risk factors for PAD and CLI. Increasing trends for both.

CLI associated with **high risk** of cardiovascular events, including **myocardial infarction, stroke and death**.

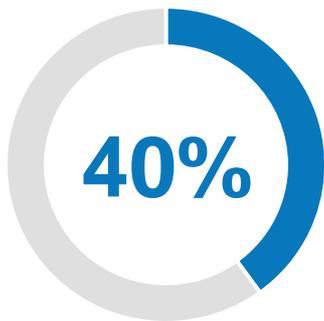
Source:  
1. The Sage Group LLC

# CLI: PREVALENCE AND THE COST OF TREATMENT

In 2015, almost 20 million U.S. citizens suffered from peripheral artery disease (PAD), estimated to increase to 30 million by 2030<sup>1</sup>

Today, up to 7-8 million<sup>1</sup> people in the US and Europe suffer from CLI with growing prevalence in China and Japan. CLI quickly becoming a global economic burden.

**CLI is expensive to treat. Estimated 55-65% of PAD costs relate to CLI (up to US\$248 billion in the US). US\$25B economic costs just for amputations.<sup>1</sup>**



Up to 40% of patients are unsuitable for revascularization and experience up to a **40% amputation rate** at 1 year

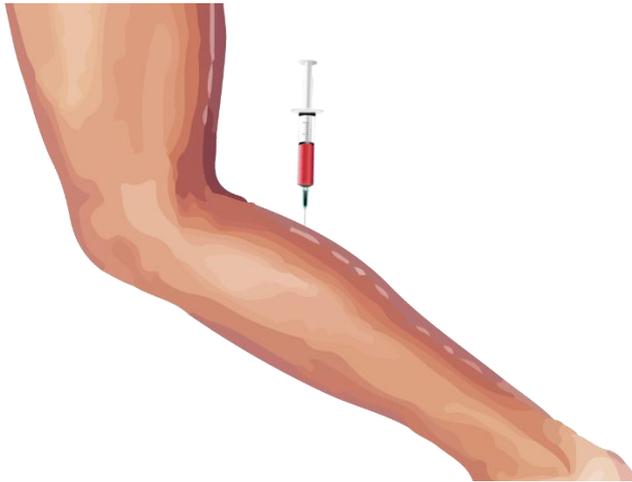
In 2014, an estimated **65,000-75,000 major amputations** (above-the-knee and below-the-knee) are performed annually in the U.S. for CLI<sup>1</sup>

**134,000<sup>1</sup> minor amputations** (toe, foot and partial foot) are performed annually in the U.S. for CLI

Source  
1. The Sage Group LLC

# ACP-01 FOR CRITICAL LIMB ISCHEMIA

## Hope for CLI Patients Facing Amputation



1

Extract and enrich desired cell population from patient's blood

2

Inject cell population to form new blood vessels in dying tissue



### Self-Donor

Uses patient's own cells, no immune rejection, no observed safety issues



### Simple

Cell harvest via blood draw



### Quick

7 days from draw to reinjection into patient

# CLI AND THE ACP-01 BENEFIT- THE VISUALIZATION

47 Days post ACP-01 Treatment

Before



After



# PHASE II CLINICAL TRIAL FOR CLI

Randomized, placebo-controlled double blind Phase II clinical trial to confirm the safety and efficacy of ACP-01

US FDA and Health Canada approved protocol for trial

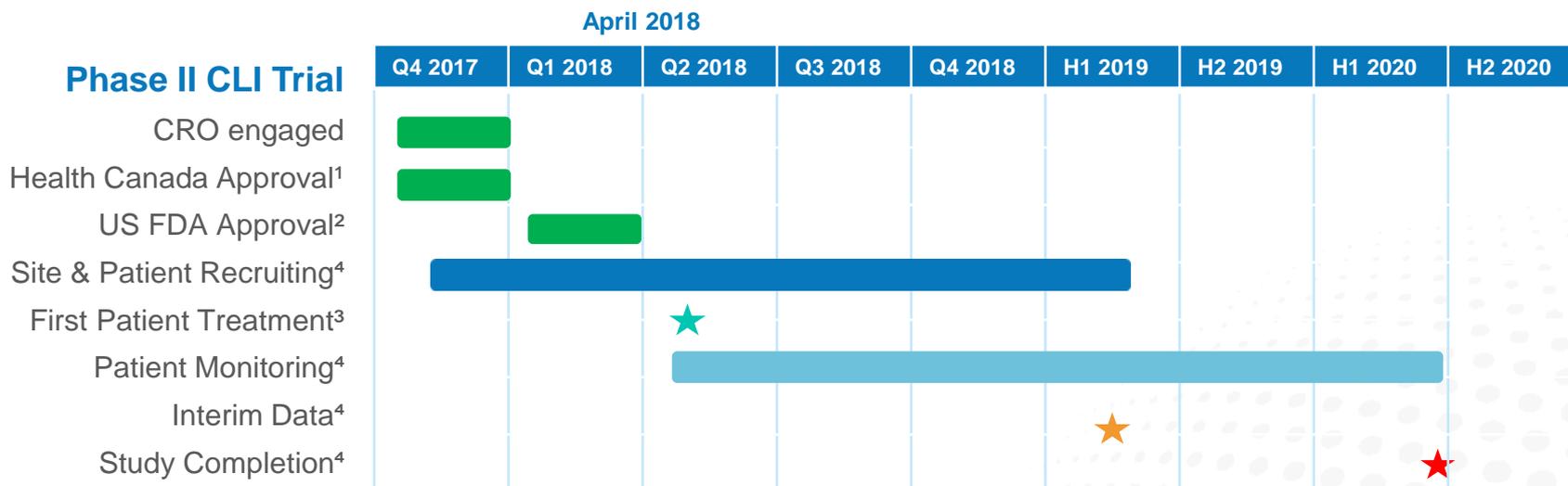
Topstone Research Inc. engaged as contract research organization (“CRO”)



OTCQB:HMTXF

TSX VENTURE:HEM

# PHASE II CLI CLINICAL TRIAL MILESTONES



## A CATALYST FOR FUTURE TRIALS

Progression of the CLI Trial will open the door for other clinical trials based on ACP-01

<sup>1</sup>Health Canada Phase II Trial continuation approval received in December 2017.

<sup>2</sup>US FDA Phase II Clinical Trial continuation approval received April 2018.

<sup>3</sup> First patient treatment under continued clinical trial announced May 3, 2018.

<sup>4</sup> Anticipated timeline. See Forward-Looking Information.

# STUDY & TRIAL HISTORY

Current Phase II Clinical Trial for CLI in progress in Canada and the USA

Type of Study	Study Location	Objective of Study	Study Design	Number of Subjects	Patients	Study Status
Pilot Safety/ Feasibility	Thailand	To assess the feasibility and safety of the implantation	Open label	6	Diagnosed CLI	Completed
Phase 1b Safety and Efficacy	Hungary	To assess safety or ex vivo expanded, peripheral blood-derived, autologous angiogenic cell precursors (ACPs) in no option PAD patients	Open label	20	Diagnosed PAD	Completed
<b>Phase II Safety and Efficacy</b>	<b>Canada and United States</b>	<b>Time to major amputation/mortality</b>	<b>Randomized Double Blind Placebo Controlled</b>	<b>95</b>	<b>Diagnosed CLI</b>	<b>In Progress</b>
Clinical Trial Safety/ Feasibility	Thailand	To assess the feasibility and safety of intracoronary injection	Open label	24 Planned (17 Completed)	Diagnosed Angina	Completed
Safety and Efficacy	Thailand	To determine the safety and efficacy of intracoronary injection of ACPs in relieving symptoms of angina pectoris and congestive heart failure in chronic ischemic heart disease subject with maximal medical therapy and no option for revascularization procedures	Open label	106 subjects	Diagnosis of severe ischemic heart disease with continued angina pain or heart failure symptoms	Completed

Over \$20 million spent on operations and developing the technology to-date

# PRODUCT PIPELINE

Current CLI trial is a path towards other trials and commercialization

Candidate	Indication	Development Phase		Status
		Preclinical	Clinical	
ACP-01	<ul style="list-style-type: none"> <li>Critical limb ischemia</li> </ul>	<ul style="list-style-type: none"> <li>Phase II clinical trial</li> </ul>	<ul style="list-style-type: none"> <li>Trial site and patient enrollment In progress</li> </ul>	
ACP-01	<ul style="list-style-type: none"> <li>Congestive Heart Disease</li> <li>Acute Myocardial Infraction</li> <li>Angina Pectoris</li> <li>PAD</li> </ul>	<ul style="list-style-type: none"> <li>Preparing for Phase II Angina Pectoris trial</li> </ul>	<ul style="list-style-type: none"> <li>Safety trials completed</li> <li>Preparing pre-IND submission to FDA for Phase II trial</li> </ul>	
NCP-01	<ul style="list-style-type: none"> <li>Amyotrophic Lateral Sclerosis (ALS)</li> <li>Spinal Cord Injury</li> <li>Parkinson's Disease</li> <li>Alzheimer's Disease</li> </ul>	<ul style="list-style-type: none"> <li>Preclinical</li> </ul>	<ul style="list-style-type: none"> <li>In R&amp;D</li> </ul>	
BCP-01	<ul style="list-style-type: none"> <li>Bone fractures</li> <li>Skeletal breaks</li> <li>Surgical procedures</li> </ul>	<ul style="list-style-type: none"> <li>Preclinical</li> </ul>	<ul style="list-style-type: none"> <li>Preliminary R&amp;D</li> </ul>	

# DIRECTORS AND MANAGEMENT TEAM

Proven management team with extensive business, public company, R&D and scientific trial experience

## Board of Directors

**Angus Jenkins**  
Chairman

**Donald Friesen**

**David L. Wood**

## Executive Management & Advisor Team

**Kyle Makofka**  
President and Chief Executive  
Officer

**Dr. Ravi Jain, PhD**  
Chief Scientific Officer

**Kristin Gulka, CPA, CA**  
Chief Financial Officer

**Dr. Alan J. Jacobs,  
MSEE, MD, PhD.**  
Chief Medical Consultant

**Catherine St. George,  
B.Sc., C.C.R.P.**  
Clinical Trial Manager

**Morley W. Myden,  
B.Comm.**  
Senior Business Advisor

**Rose Zanic, CPA, CA**  
Senior Business Advisor

**Kurt Soost, CFA**  
Senior Business Advisor

**Jesse Galvon**  
Senior Business Advisor

# MANAGEMENT

## **Kyle Makofka, President & CEO**

- Managing Director of Drive Capital Corp., a private equity company focused on developing unique business through technology innovation and implementing quality based business management systems elevating companies to unrealized potential
- In the past 27 years has been founder, partner or senior manager in 8 different public and private companies

## **Kristin Gulka, CFO**

- Over 10 years of financial, accounting and management experience for public and private companies
- Previously held the role of Controller and Corporate Controller at Ferus, a Calgary based North American energy service and liquid natural gas company
- Previously was Interim Controller at SemBioSys Genetics Inc., a biotech company conducting phase I and II clinical trials
- Named to the National Honour Roll upon completion of her Uniform Final Exam (now known as the Common Final Examination)
- Chartered Professional Accountant (CA) Designation and Bachelor of Commerce (Accounting) degree from University of Calgary

# BOARD OF DIRECTORS

## **Angus Jenkins, Chairman**

- Managed his own oilfield services company from 2013 to 2016
- Previous executive with Poseidon Concepts Corp (formerly Open Range Energy Corp., TSX:PSN) from 2012 until 2013
- Served as President & CEO of Black Goose Holdings Inc which was an unlisted public company (now private)
- Served as Vice President of Operations of Torquay Oil Corp. (TSXV:TOC) that was listed on the TSXV until its acquisition by CanEra Energy Corp in 2012
- Held various engineering and engineering management positions with various companies including POCO Petroleum Ltd (TSX:POC), Crescent Point Energy (TSX:CPG) and Peerless Energy Inc. (TSX: PRY.A)
- B.Sc in Petroleum Engineering from the University of Alberta
- Member of the Association of Professional Engineers and Geoscientists of Alberta.

## **David Wood, Director**

- Founder and President of Zenith Appraisal and Land Consulting Ltd. and Double Check Consulting Inc., both private consulting entities
- Director and former CEO /CFO OF DataMiners Capital Corp., a NEX listed company. Presently serves on the Audit Committee
- Director of Black Bull Resources Inc., a mining company formerly listed on the TSXV. Presently serves on the Audit Committee
- Served on the Audit Committees and as Board Chairman and Director of various TSXV listed companies from 1999-2013
- Professional appraiser and obtained his designation from the Appraisal Institute of Canada (AIC) in 2001

## **Don Friesen, Director**

- Director and Principal of the Friesen Group, a private investment firm
- Since 2008, he has served as the CEO of both Coldstream Helicopters Ltd. and Global Petroleum Marketing Inc.
- Over 40 years of sales, marketing and entrepreneurial start-up experience in a variety of industries
- Currently works with his son collectively managing and growing portfolio of assets of the Friesen Group, a private investment firm
- Graduated with Bachelor of Commerce from University of Alberta in 1977

# SCIENTIFIC LEADERSHIP TEAM

## Dr. Ravi Jain, PhD, Chief Scientific Officer

- Over 16 years' progressive scientific, research and development and management expertise
- Co-founder and President of cBio Inc., a bioinformatics/software development consulting firm
- cBio ranked as one of the Top-50 Fastest Growing Private Companies in 2010, 2011 and 2012 by the Silicon Valley/San Jose Business Journal
- BSc. in Genetics, University of California, Davis. Awarded Regents' Scholarship and President's Undergraduate Research Fellowship
- Ph.D. in Molecular Evolution from University of California, Los Angeles and was awarded NIH fellowships in Genetic Mechanisms and Bioinformatics

## Dr. Alan J. Jacobs, MSEE, MD, PhD, Chief Medical Consultant

- Former founder, president and chief medical officer of several biotech companies
- Responsible for clinical development resulting in two licensing transactions with big pharma
- Over 20 years of experience developing, manufacturing and launching commercial products and FDA approved therapeutics
- MD from University of Pennsylvania school of Medicine. PhD from University of Pennsylvania, David Mahoney Institute of Neuroscience, M.S.EE Stanford University, Dept of Electrical Engineering
- Awarded numerous research grants, fellowships, patents and patent applications, awards and honors and authored numerous publications

## Catherine St. George, B.Sc., C.C.R.P. Clinical Trial Manager

- Over 20 years of clinical research experience in phase II and III drug and device trials and multiple therapeutic disciplines
- Trial Management roles for North American multi-site trials focussing on regulatory, ethical, patient recruitment and financial processes
- Former clinical trial management roles at University of Calgary and Pfizer, Canada

# SCIENTIFIC ADVISORY BOARD

## Dr. Alan Lumsden, M.D.

- Walter W. Fondren III Chair, Medical Director of the Houston Methodist DeBakey Heart & Vascular Center and chair of the Department of Cardiovascular Surgery at Houston Methodist Hospital since 2008
- Emory University in Atlanta -completed his surgical residency and vascular training leading to position as Chief of the Division of Vascular Surgery
- International reputation as a leader in the field of endovascular surgery. He conducts FDA-mandated training for surgeons nationwide and has received millions of dollars for his research from the National Institutes of Health. He has contributed more than 200 papers to medical literature.

## Dr. Norman Wong, B.Sc (Hon), M.Sc, M.D., FRCP(C)

- Co-Founder of Resverlogix Corp. (TSX:RVX), and Chief Scientific Officer since 2003
- Currently Professor of Medicine and Biochemistry & Molecular Biology and Director of the Libin Gene/Cell Therapy Unit within the Faculty of Medicine at the University of Calgary
- Specializes in the areas of Endocrinology, Internal Medicine, Molecular Biology, and Gene/Cell Therapy
- Author and co-author of over 275 articles and abstracts and has been invited to sit on more than 40 national or international panels and committees
- Consulted for leading pharmaceutical companies, including Eli Lilly, Merck Frost, GlaxoSmithKline, Solvay Pharmaceuticals & Abbott Laboratories

## Dr. Kumar L. Hari, PhD

- Chief Scientific Officer at cBio, a private disease diagnostics and tracking firm
- Expertise is in chromosome biology, functional genomics, and bioinformatics and oversaw the development of the MRS and PATRN platforms
- At cBio, Dr. Hari led the team in engagements with the FDA, various universities and other US government organizations
- Former director of program management efforts at the California Institute of Regenerative Medicine and at the Myelin Repair Foundation
- PhD in Cell Biology from UC San Diego and a B.Sc. in Genetics from UC Davis

# SHARE CAPITAL OVERVIEW

Share capital structure as at September 30, 2018:

(Canadian dollars)

	Number	Ex. Price	Expiry
Common Shares Issued and outstanding	300,736,524		
Stock Options	30,057,230	\$0.05-\$0.10	Nov 2018-Sept 2023
Share Purchase Warrants <sup>2</sup>	114,899,607	\$0.05-\$0.65	Sept 2019-Dec 2020
Total Fully Diluted	447,702,940 <sup>1</sup>		
Insider Ownership	30%		
Market Capitalization (Sept 28, 2018)	\$33 million		

<sup>1</sup>Includes warrants issuable on exercise of broker warrants.

## <sup>2</sup>Share Purchase Warrants - details

Number	Ex. Price	Expiry
4,019,157	\$0.05	Sept 15, 2020
109,643,759	\$0.20	Sept 15, 2019
1,158,911	\$0.50	Nov 27, 2019
77,780	\$0.65	Dec 2, 2020

# DOCTOR AND PATIENT QUOTES

**Dr. Thomas Lindsay, Head of Division of Vascular Surgery  
UHN, Toronto General Hospital**

"Our experience with patients in this trial was very positive and I strongly support restarting the trial. New evidence from other trials continues to support stem cell therapy in PAD and the technology in the ACP-01 has promise. Obtaining definitive evidence of the benefit of this therapy, is a critical step in moving forward both scientifically and clinically."

**Dr. York N. Hsiang, MB ChB MHS Sc FRCSC  
Professor of Surgery Interim Head, Division of Vascular Surgery Department of Surgery, UBC**

"This trial is an important step forward in technology for treating vascular diseases such as CLI.... I feel this is an important study and we have seen some very impressive results."

**Dr. Norman Wong, B.Sc (Hon), M.Sc, M.D., FRCP(C) – Scientific Advisory Board**

"I feel that Hemostemix has a promising platform technology that will lead to novel therapies for many human diseases with unmet needs benefiting from the use of stem cells. HEM's current Phase 2 clinical trial in Critical Limb Ischemia (CLI) will yield much needed information applicable to patients with Peripheral Artery Disease (PAD). This proof of concept step will open the doors to a much bigger therapeutic arena for treating Congestive Heart Failure (CHF) and other related conditions. The stem cell therapies with HEM's reach has the potential to impact the lives of patients with not only CLI arising from PAD but in the near future expand to those with CHF."

**J. Tarachione - Age 77**

"I had the stem cell surgery and it's been 7 months. If it wasn't for that I know I wouldn't be here today. I was limited to what I did. After I had the stem cell surgery I felt 100% better. I kept slowly improving and improving. It's almost like a miracle that I could go from bad to feeling good again. I'm more physically and mentally capable now. This is something that absolutely needs to be done and made available for the public in this country."

# 2018/19: POISED FOR GROWTH AND INCREASED SHAREHOLDER VALUE

- ✓ CLI PHASE II CLINICAL TRIAL ENROLLING SITES AND PATIENTS
- ✓ FULLY EXPANDABLE PLATFORM DESIGNED FOR COMMERCIALIZATION
- ✓ PHASE I ANGINA TRIAL COMPLETE – PLANNING PHASE II TRIAL
- ✓ MANUFACTURING AGREEMENT IN PLACE FOR US CERTIFIED GMP FACILITY
- ✓ LICENSING AGREEMENT IN PLACE
- ✓ DEBT FREE
- ✓ PROPRIETARY TECHNOLOGY AND GROWING PATENT PORTFOLIO
- ✓ AUTOLOGOUS AND ALLOGENEIC PROCESS FOR ACP-01
- ✓ ROBUST R&D PIPELINE
- ✓ RECENT MANUFACTURING REFINEMENTS TO REDUCE ACP-01 MANUFACTURING TIME
- ✓ EXPERIENCED MANAGEMENT AND SCIENTIFIC TEAM
- ✓ WORLD-CLASS SCIENTIFIC ADVISORY BOARD
- ✓ GLOBAL INTEREST IN CELL BASED THERAPIES-POSITIVE GOVERNMENT AND PUBLIC SUPPORT
- ✓ POTENTIAL TO REVOLUTIONIZE TREATMENT THERAPIES FOR NUMEROUS DISEASES

# CONTACT INFORMATION

## **Hemostemix Inc.**

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403-506-3373

**SHAPING THE FUTURE OF MEDICINE**