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This presentation includes forward-looking statements. All statements other than statements of historical facts contained in these materials or elsewhere, including statements regarding the Company's future financial position, business strategy and plans and objectives of management for future operations, are forward-looking statements. Forward-looking statements use words like “believe,” “plan,” “expect,” “intend,” “will,” “would,” “anticipate,” “estimate,” and similar words or expressions in discussions of the Company's future operations, financial performance or the Company's strategies. These statements are based on current expectations or objectives that are inherently uncertain. In light of these uncertainties, and the assumptions underlying the expectations and other forward-looking statements expressed, the forward-looking events and circumstances discussed in the accompanying materials may not occur and actual results could differ materially and adversely from those anticipated or implied in the forward-looking statements.

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The Healthcare Dilemma

Clinician burnout and chronic staffing shortages are creating a significant gap between health systems’ capacity to provide care and the demand for care from a growing and aging patient population.

Today’s point-of-care delivery policies and technologies consume up to one-third of a clinician’s workday, widening the care gap.

Moreover, they have become an intrusion, creating a virtual “wall” between clinician and patient. They have exacerbated clinician burnout and led to high levels of patient dissatisfaction.
Augmedix Mission & Vision

Our mission is to help healthcare providers shrink their care gap and increase patient access at scale by unburdening their clinicians from medical documentation so they can redirect more of their time towards patient care.

We manage medical documentation virtually and unobtrusively, helping clinicians to see the patient, not the technology, enabling them to deeply and fully connect at the point of care.

Our vision is to deliver rapid, actionable insights at the point of care that can improve patient outcomes and serve as the vehicle of choice for change management.
Augmedix Benefits

Save clinicians up to **3 hours** per day

Increase clinician productivity by up to **20%**

Accessible products for health systems to **adopt at scale**
Augmedix at a Glance

- **Real-time and asynchronous medical documentation for clinicians**
- **Connect clinicians with the Augmedix Platform through mobile devices and proprietary software**
- **Comprehensive and flexible solution capable of being delivered at scale to ~295,000 addressable clinicians**
- **Let clinicians focus on what matters most: patient care**

**Revenue** ($ in millions)

- **$7.9** Q3 2022
- **$11.8** Q3 2023

- **$48M** 9/30/23 ARR
- **157%** Q3 2023 YoY Net Revenue Retention
- **20+** Health Systems Served
- **>60,000** Notes Per Week
Augmedix Eases the EHR Burden on Providers & Creates System Efficiencies

Electronic Health Record
Medical documentation uploaded for clinician's sign-off

The Augmedix Platform

Structured Data Models

Natural Language Processing (NLP) and Large Language Models (LLMs)

Automatic Speech Recognition (ASR)

EHR Adaptors

Streaming Services

LIVESTREAM
Record

Clinician-Patient

Natural Conversation

Augmedix Platform

Natural Language Processing (NLP) and Large Language Models (LLMs)

Automatic Speech Recognition (ASR)

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Streaming Services
Driving a $6 Billion Market Opportunity for Augmedix

Opportunity

~295,000¹ Addressable Clinicians in U.S.

$6B U.S. Market Opportunity

Select Current Customers
Major Health Systems

>57,000¹ Addressable Clinicians

$1.2B+ Expansion Opportunity within Existing Customers

Scale Today

4 Countries

60K+ Notes / Week

(1) Company estimates out of a total of more than 1.1m U.S. clinicians.
<table>
<thead>
<tr>
<th>Augmedix Prep</th>
<th>Augmedix Go</th>
<th>Augmedix Notes</th>
<th>Augmedix Live</th>
</tr>
</thead>
<tbody>
<tr>
<td>Chart Prep</td>
<td>Instantaneous</td>
<td>Asynchronous</td>
<td>Synchronous</td>
</tr>
<tr>
<td>Prior to start of day</td>
<td>Draft medical note</td>
<td>Quality-assured medical note</td>
<td>Quality-assured medical note + point-of-care support (orders, reminders, referrals)</td>
</tr>
<tr>
<td>RPA → AI-powered</td>
<td>TAT - Real Time</td>
<td>TAT - 4 hrs</td>
<td>TAT - 30 min</td>
</tr>
<tr>
<td>$</td>
<td>AI-powered</td>
<td>AI-powered + Augmedix quality control</td>
<td>AI-powered + Augmedix MDS</td>
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$TAT = Turnaround Time$
Documentation Market Landscape

Dictation/Transcription

Remote

Draft Note / Pure AI

Complete Note / Human in the Loop

In-Person

Remote / Real Time

Ambient Products

Low Clinician Burden

High Clinician Burden

Augmedix Go

Augmedix Notes

DeepScribe

AQuity SA

AQuity

Augmedix Live

Suki

Nabla CoPilot

Nuance Dragon CoPilot

Ambience

abridge

Nuance DAX

Nuance Dax CoPilot

3M Fluency Direct

Price
Note automation is ultimate goal

Lower cost
Scalable
Standardization
Rapid turnaround

LLMs are helpful but inadequate today

LLMs alone insufficient:

- Encounters rarely follow note format - typically non-linear
- Complex conditions often result in errors and “note” bloat
- Need to convert conversational language into appropriate medical terminology

User trust of technology will dictate adoption

Industry will resist “black box” solutions
Ambient Conversation
Clinician-Patient

Automatic Speech Recognition (ASR)
Google Cloud

Natural Language Processing (NLP) and Large Language Models (LLMs)

Clinician: Nice to meet you. What brings you in today?

Patient: I got a headache yesterday and it just won’t go away.

Clinician: Any fever or chills?

Patient: No, just the headache and a sore throat. I’m taking Tylenol but it’s not helping.

Clinician: Let’s start you on Ibuprofen, 800 mg, as needed.

Notebuilder Canvas

Medical Note
Electronic Health Record

HPI
The patient is a 55-year-old female presenting today with a headache.

Headache
Patient reports onset 1 day ago, occurring constantly. She complains of associated sore throat but denies fever or chills. She is taking Tylenol without relief.

A/P
Headache
New, acute. Uncontrolled. I advised the patient to start ibuprofen 800 mg PRN.
Augmedix NLP is a collection of traditional neural network models and LLM output, with guardrails that verify relationships against datasets, as part of our responsible approach to using AI.

Multiple Ways to Render Structured Data

- Medical Note
- Point-of-Care Nudges
- Raw Structured Data
Demonstrated & Strong  
>3x ROI

Augmedix can drive clinician productivity through better charge capture and/or improved patient access.

20% increase in revenue capture per visit

Before Augmedix: 2.5 wRVUs/visit  
With Augmedix: 3.0 wRVUs/visit

Results from: Health System  |  Augmedix In-Service since 2016  
100 Physicians  |  15 Specialties

Add’l $840 rev/day vs. $90-$150 avg. cost/day*

*Avg results = $840 incremental rev/day less $120 cost = $720/day/clinician  
Assuming 3 days of work per week $720 x 3 = $2,150 week, ~$9,000 month, $110,000 yr
Competitive Differentiation

Transparency
User control
Structured data
Product fungibility
Broad care settings & specialties
Bi-directional communication channel
Robust KPI Performance

1. Dollar-based NRR is derived from current period revenue including any expansion or new services and is net of contraction or churn compared to the previous period one year ago, but excludes revenue from new Health Enterprises for the current period.

2. 125% is world class per Gainsight (https://info.gainsight.com/rs/231-EAT-840/images/2021-GS-NRReBook.pdf)
Consistent Strong Growth

$12M strategic financing, including HCA Healthcare, provides capital to reach cash flow sustainability. Current trajectory points to CF breakeven exiting 4Q24.

Note: Fiscal years are audited through December 31, 2022. Quarterly results are unaudited.

1. LTM to 9/30/2023. The Lifetime Value (LTV) of Augmedix Live is calculated by ARPU / (Annual Churn Percentage) x expected contribution margin. Customer Acquisition Cost (CAC) is the sales and marketing spend in the previous quarter divided by number of new clinicians sold in the most recent quarter plus the onboarding costs in the most recent quarter divided by the number of go lives in the most recent quarter.
2. LTM to 9/30/2023. Payback period in months is calculated by CAC divided by the expected contribution profit in the first-year x 12.
Highly Experienced Management Team

- **Manny Krakaris**
  - Chief Executive Officer

- **Sandra Breber**
  - Chief Operating Officer

- **Ian Shakil**
  - Co-Founder & Chief Strategy Officer

- **Davin Lundquist**
  - Chief Medical Officer

- **Paul Ginocchio**
  - Chief Financial Officer

- **Jonathan Hawkins**
  - Chief Revenue Officer

- **Saurav Chatterjee**
  - Chief Technology Officer

- **Rashed Noman**
  - Country Manager, Bangladesh
Investment Highlights

- Broad ambient documentation offerings that are differentiated and flexible across a variety of care settings
- Increases clinician productivity, optimizes reimbursement and improves patient access
- Deployed at 5 of top 10 US healthcare enterprises with high Net Revenue Retention
- Attractive scalable business model with compelling unit economics
- Building on AI-powered platform delivers automated add-ons and drives growth and efficiency
Thank You