Neuronetics

COMPANY PRESENTATION

NASDAQ: STIM

August 2026

Forward Looking Statements

This presentation contains estimates and other statistical data prepared by independent parties and by Neuronetics, Inc. (“Neuronetics” or the “Company”) relating to market size and growth and other data about the industry in which the Company operates. These estimates and data involve a number of assumptions and limitations, and you are cautioned not to give undue weight to such estimates and data.

Certain statements in this presentation, including the documents incorporated by reference herein, include “forward-looking statements” within the meaning of Section 27A of the Securities Act of 1933, as amended (the “Securities Act”), Section 21E of the Securities Exchange Act of 1934, as amended, which are intended to be covered by the safe harbors created by those laws and other applicable laws and “forward-looking information” within the meaning of applicable Canadian securities laws. Statements in this presentation that are not historical facts constitute “forward-looking statements” within the meaning of the Private Securities Litigation Reform Act of 1995. These forward-looking statements may be identified by terms such as “may,” “will,” “would,” “should,” “expect,” “plan,” “design,” “anticipate,” “could,” “intend,” “target,” “project,” “contemplate,” “believe,” “estimate,” “predict,” “potential,” “outlook” or “continue” as well as the negative of these terms and similar expressions. These statements include those relating to the Company’s business outlook and current expectations for upcoming quarters and fiscal year 2026, including with respect to revenue, expenses, growth, and any statements of assumptions underlying any of the foregoing items. These statements are subject to significant risks and uncertainties and actual results could differ materially from those projected. The Company cautions investors not to place undue reliance on the forward-looking statements contained in this presentation. These risks and uncertainties include, without limitation, risks and uncertainties related to: the effect of the transaction with Greenbrook TMS Inc. (“Greenbrook”) on our business relationships; operating results and business generally; our ability to execute our business strategy; our ability to achieve or sustain profitable operations due to our history of losses; our reliance on the sale and usage of our NeuroStar Advanced Therapy System to generate revenues; the scale and efficacy of our salesforce; our ability to retain talent; availability of coverage and reimbursement from third-party payors for treatments using our products; physician and patient demand for treatments using our products; developments in respect of competing technologies and therapies for the indications that our products treat; product defects; our ability to obtain and maintain intellectual property protection for our technology; developments in clinical trials or regulatory review of the NeuroStar Advanced Therapy System for additional indications; developments in regulation in the U.S. and other applicable jurisdictions; potential effects of evolving and/or extensive government regulation; the terms of our credit facility; our self-sustainability; existing cash balance; our ability to achieve positive cash flows; and our ability to continue as a going concern. For a discussion of these and other related risks, please refer to the Company’s recent filings with the U.S. Securities and Exchange Commission (the “SEC”), which are available on the SEC’s website at www.sec.gov, including, without limitation, the factors described under the heading “Risk Factors” in Neuronetics’ Annual Report on Form 10-K for the fiscal year ended December 31, 2025, as may be updated or supplemented by subsequent reports that Neuronetics has filed or files with the SEC. These forward-looking statements are based on the Company’s expectations and assumptions as of the date of this presentation. Except as required by law, the Company undertakes no duty or obligation to update any forward-looking statements contained in this presentation as a result of new information, future events, or changes in the Company’s expectations.

Non-GAAP Financial Measures

In addition to financial measures prepared in accordance with accounting principles generally accepted in the United States ("GAAP"), from time to time we may use or publicly disclose certain non-GAAP financial measures in the course of our financial presentations, earnings releases, earnings conference calls, and otherwise. For these purposes, the SEC defines a non-GAAP financial measure as a numerical measure of historical or future financial performance, financial positions, or cash flows that (i) exclude amounts, or is subject to adjustments that effectively exclude amounts, included in the most directly comparable measure calculated and presented in accordance with GAAP in financial statements, and (ii) include amounts, or is subject to adjustments that effectively include amounts, that are excluded from the most directly comparable measure so calculated and presented.

Non-GAAP financial measures are provided as additional information to investors to provide an alternative method for assessing our financial condition and operating results. We believe that these non-GAAP measures, when taken together with our GAAP financial measures, allow us and our investors to better evaluate our performance and profitability. These measures are not in accordance with, or a substitute for, GAAP, and may be different from or inconsistent with non-GAAP financial measures used by other companies. These measures should be used in addition to and in conjunction with results presented in accordance with GAAP, and should not be relied upon to the exclusion of GAAP financial measures.

Pursuant to the requirements of Regulation G, whenever we refer to a non-GAAP financial measure, we will also generally present, the most directly comparable financial measure calculated and presented in accordance with GAAP, along with a reconciliation of the differences between the non-GAAP financial measure we reference with such comparable GAAP financial measure.

Neuronetics

The leading platform for delivering in-office mental health therapies when common anti-depressants fail

253,412
Unique Patients Treated[1]

9,133,855
Treatments Administered[1]

$149M
Annual Revenue (2025)

1) Neuronetics, Inc. internal estimate based on the Company's data on total treatment sessions and patients treated.

Seasoned Senior Leadership Team

Dan Reuvers
President & CEO

Tactile MEDICAL
INTEGRA LIMIT UNCERTAINTY
Codman SPECIALTY SURGICAL

Nir Naor
Chief Financial Officer

axogen
arbor PHARMACEUTICALS, LLC
Mölnlycke

Cory Anderson
Executive Vice President and General Manager of Greenbrook

AQUESYS
ACCUITIVE MEDICAL VENTURES

Rob Greene
Senior Vice President of Sales

EMSAR
INTEGRA LIMIT UNCERTAINTY
GE HealthCare

A Leader in Mental Health Care

Through its nationwide network of customers and company-run clinics, Neuronetics is facilitating access to leading therapies for mental health conditions.

*Psychedelics are not yet commercially available and pending FDA approval

Over 29 Million Lives Affected by Depression[1,2,3]

U.S. Adults and Adolescents (ages 15-21) suffering from depression, depression with anxiety and OCD

What is MDD?

Major depressive disorder is persistent low mood or loss of interest lasting two weeks or more, enough to disrupt daily life.

How does it present in patients?

Low mood, loss of interest, and changes in sleep, appetite, energy, and concentration, sometimes with thoughts of death or suicidal ideation.

How can MDD affect patients?

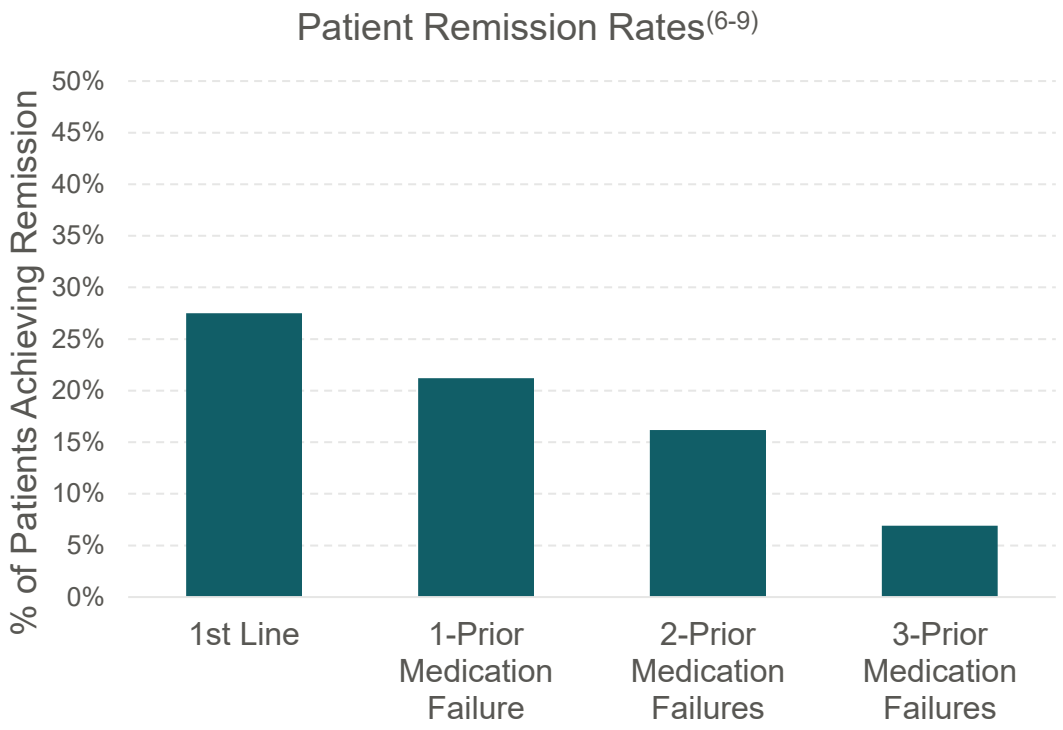
- Impairs work, relationships, and daily function
- A leading cause of disability
- Often recurrent, with high relapse risk

Adult Depression (MDD) 21million + Adolescent Depression 4.3 million + OCD 4 million **1)** NIMH https://www.nimh.nih.gov/health/statistics/major-depression.shtml, accessed 4/29/2024. **(2)** Depression- Pharma Intelligence Disease Analysis, www.datamonitorhealthcare.com, Publication Date: June 2021. **(3)** Harvard Medical School, 2007. National Comorbidity Survey (NCSSC).

8 Million Patients are Poorly Served by Medication[1,2,3,4,5]

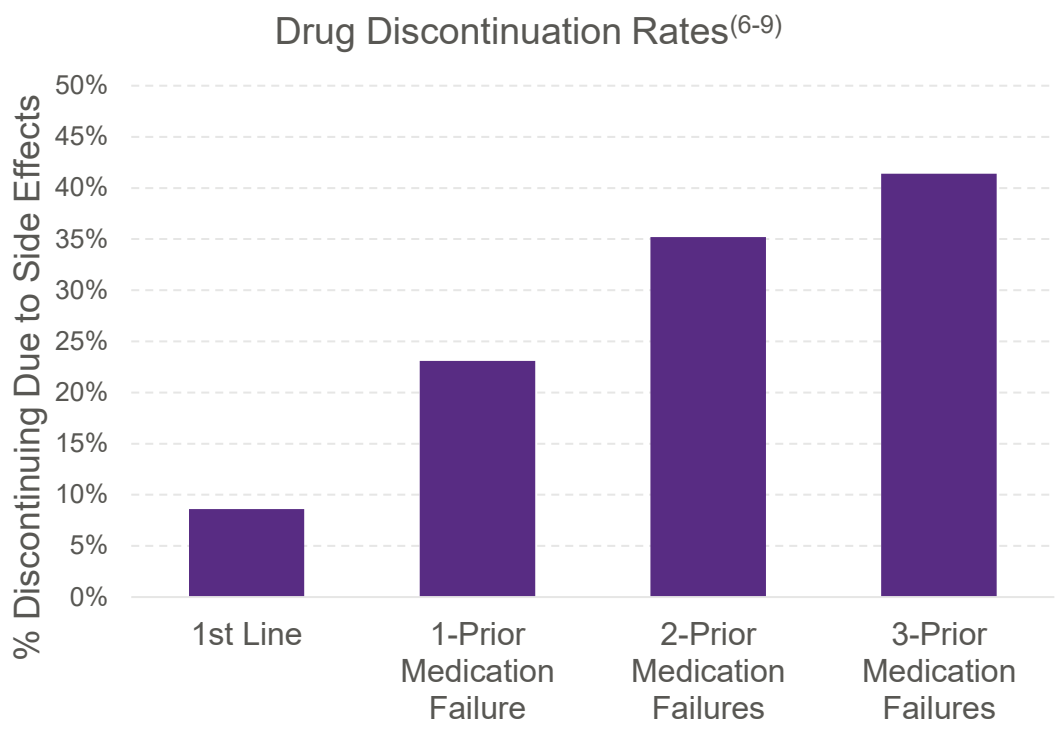
First-line medical management via anti-depressants has significant limitations

Antidepressants have limited effectiveness



Patients' chances for remission decreases with each subsequent medication attempt

Antidepressants have material side effects



Discontinuation of medication increases with each new drug due to impact of side effects

6) Trivedi (2006), Am J Psychiatry | 7) Rush (2006), Am J Psychiatry | 8) Fava (2006), Am J Psychiatry | 9) McGrath (2006), Am J Psychiatry

(1) NIMH https://www.nimh.nih.gov/health/statistics/major-depression.shtml, accessed 4/29/2024. (2) Per STAR*D patients that have failed one or more antidepressant trial of adequate dose and duration. (3) Journal of Clinical Psychiatry, accessed 3/7/2022. (4) Key Substance Use and Mental Health Indicators in the United States: Results from the 2017 National Survey on Drug Use and Health. (5) Definitive Health Diagnosis/Prescription Data: 3/25/22.

Innovative In-Office Therapies

Offering two rapidly growing therapies for treatment resistant depression (TRD) when common anti-depressants fail

Transcranial Magnetic Stimulation (TMS)

NeuroStar®
Advanced Therapy for Mental Health

+23%

Growth in Patients Treated with TMS in 2025[1]

Nasal Esketamine Spray

Spravato® (esketamine) CIII
28 mg nasal spray

+57%

Growth in Spravato Revenue in 2025[2]

1. US Procedures based on 2026 Definitive Healthcare INC. w/ +7% increase to account for cash pay not captured in billing data.
2. As reported by Johnson & Johnson for year ended Dec 31, 2025

NeuroStar TMS

The industry's leading TMS therapeutic platform

NeuroStar®
Advanced Therapy for Mental Health

83%	62%	36	19 min
measurable relief[1]	full remission[2]	daily sessions	per session

How it works
TMS uses focused magnetic pulses to gently activate brain circuits involved in mood, helping them function more normally over time.

Treatment course
A typical course is 36 daily sessions, with sessions as short as 19 minutes.

Safety and experience
Not a drug, surgery, or ECT "shock therapy". No sedation, and patients resume normal activities right after each session; side effects are typically mild scalp discomfort or headache.

Access and coverage
FDA-cleared and covered by most major insurers for patients who qualify.

1. Sackeim HA, et al. (2020). Clinical Outcomes in a Large Registry of Patients with Major Depressive Disorder Treated with Transcranial Magnetic Stimulation. Journal of Affective Disorders, 277(12):65-74.
2. Carpenter LL, et al. (2012). Transcranial Magnetic Stimulation (TMS) for Major Depression: A Multisite Naturalistic, Observational Study of Acute Treatment Outcomes in Clinical Practice. Depression and Anxiety, 29(7):587-596.

Spravato

Approved for use as monotherapy or in combination with existing antidepressants

24 hr
Results as early as 24 hours[1]

52%
remission at 4 weeks[2]

2 doses
for two weeks

2
hour treatments

How it works
Prescription nasal spray that is believed to target glutamate, working differently from standard antidepressants.

Treatment course
Twice weekly for four weeks, then weekly or every other week, in a certified office.

Safety and experience
Supervised dosing with at least 2-hours of monitoring; the majority of side effects resolved on the day of dosing.

Access and coverage
FDA-approved and covered by most major insurers with prior authorization.

1. SPRAVATO Prescribing Information, Janssen Pharmaceuticals, Inc. Revised 2025. Section 14, Clinical Studies.
2. SPRAVATO (esketamine) Summary of Product Characteristics. European Medicines Agency.

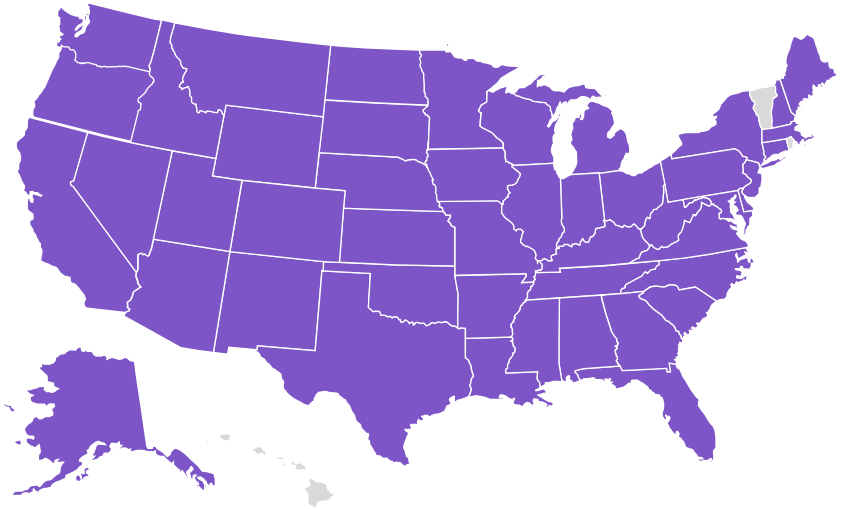
Deploying Therapies Through Unique, Scaled Model

Mix of company-owned sites and NeuroStar TMS customers facilitates widespread patient access

greenbrook
Mental Wellness Centers
a NeuroStar provider

92 Clinics Nationwide

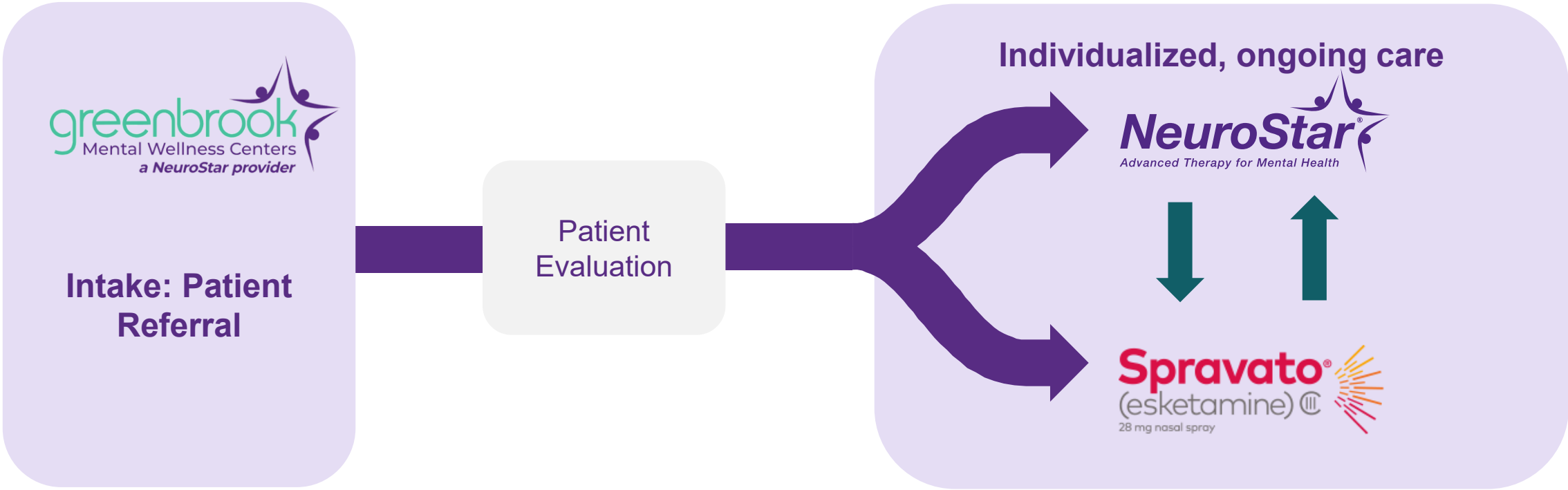
NeuroStar TMS Customers



800+ Sites Nationwide

Greenbrook Mental Wellness Centers

Referred patients are evaluated, matched to the right therapy, and managed over time



Offering both therapies within a single clinic enables continuity of care. Treatment is individualized at initiation and adjusted over time, managed within one integrated care relationship.

Greenbrook: A Leading Platform for Emerging Therapies

Greenbrook's infrastructure can support additional novel therapies as they reach the market

Greenbrook

Proven REMS[1] infrastructure, built through Spravato experience

- **REMS launch experience**
- **Certified sites**
- **Trained staff**
- **Benefits & prior-auth**
- **National footprint**
- **Available capacity**

Potential Near-Term Psychedelic Opportunities[2]

COMP360 psilocybin for MDD

First-ever psychedelic offering for depression · Existing Compass Pathways collaboration

- **Phase 3 trial complete**
- **FDA decision expected year-end 2026**
- **Preparing 2027 commercial rollout**

Additional psychedelic-class therapies in development TRD, including post-traumatic stress disorder and anxiety

Uniquely positioned to be at the forefront of psychedelic therapy administration

Neuronetics

1. REMS (Risk Evaluation and Mitigation Strategy): an FDA-required safety program mandating certified sites, trained staff, and supervised in-office administration.
2. Psychedelics are not yet commercially available and pending FDA approval

NeuroStar: Evolving our Go-to-Market Approach

Three ways to access NeuroStar, broadening reach while preserving high-touch support

From one model to three

Our Treatment Session model, high-touch and ongoing, set NeuroStar apart, but did not fit every customer. Now customers choose which economic best fits their needs.

SESSIONS

Partnership

Our established treatment-session model, retaining the high-touch support that has always distinguished NeuroStar.

Upfront: None | **Support: Full**

LEASE

Finance It

Use the system over time with no significant upfront commitment, broadening the set of customers we can reach.

Upfront: Low | **Support: À la carte**

CAPITAL

Own It Outright

Purchase the system directly, with support available à la carte, allowing customers to choose the elements they value most.

Upfront: High | **Support: À la carte**

Competing across a broader set of customers than ever before, while preserving the support that sets us apart.

Poised to Deliver Strong Growth While Improving Cash Flow

FY 2026 Guidance	*(As of August 11th, 2026)*
Revenue	***$160M to $164M (+7% to +10% YoY)***
Gross Margin	**Between 48% and 50%**
Operating Expenses	**$91M - $96M** excluding ~$4 million of non-cash stock-based compensation
Cash Flow	**Cash Flow from Operations and Investing: $(10.5)M to $(14.5)M**

Reconciliation Bridge Operating Expense to Operating Expense less Non-Cash Stock-Based Compensation

($ in millions)

The following table presents the Company's reconciliation between Operating Expenses and Operating Expenses less Stock Based Compensation. This adjusted guidance is based on assumptions that management believes are reasonable under the circumstances. However, they are not necessarily indicative of the Company's future performance. Operating Expenses less Stock Based Compensation are projected Operating Expenses for the fiscal year 2026, less non-cash stock-based compensation.

FY 2026 Guidance: Operating Expenses

	Range	
Operating expenses	$ 95	$ 100
Non-cash stock-based compensation expense ("SBC")[1]	$ (4)	$ (4)
Operating expenses, less SBC	$ 91	$ 96

(1) Stock-based compensation consists of expenses related to restricted stock units and performance based restricted stock units. We exclude these expenses from our non-GAAP financial measures because they are non-cash charges that we do not consider reflective of our core ongoing operational performance. While share-based compensation is a recurring expense and a key part of our employee retention strategy, excluding it allows management and investors to compare our operational profitability more consistently against prior periods and industry peers.

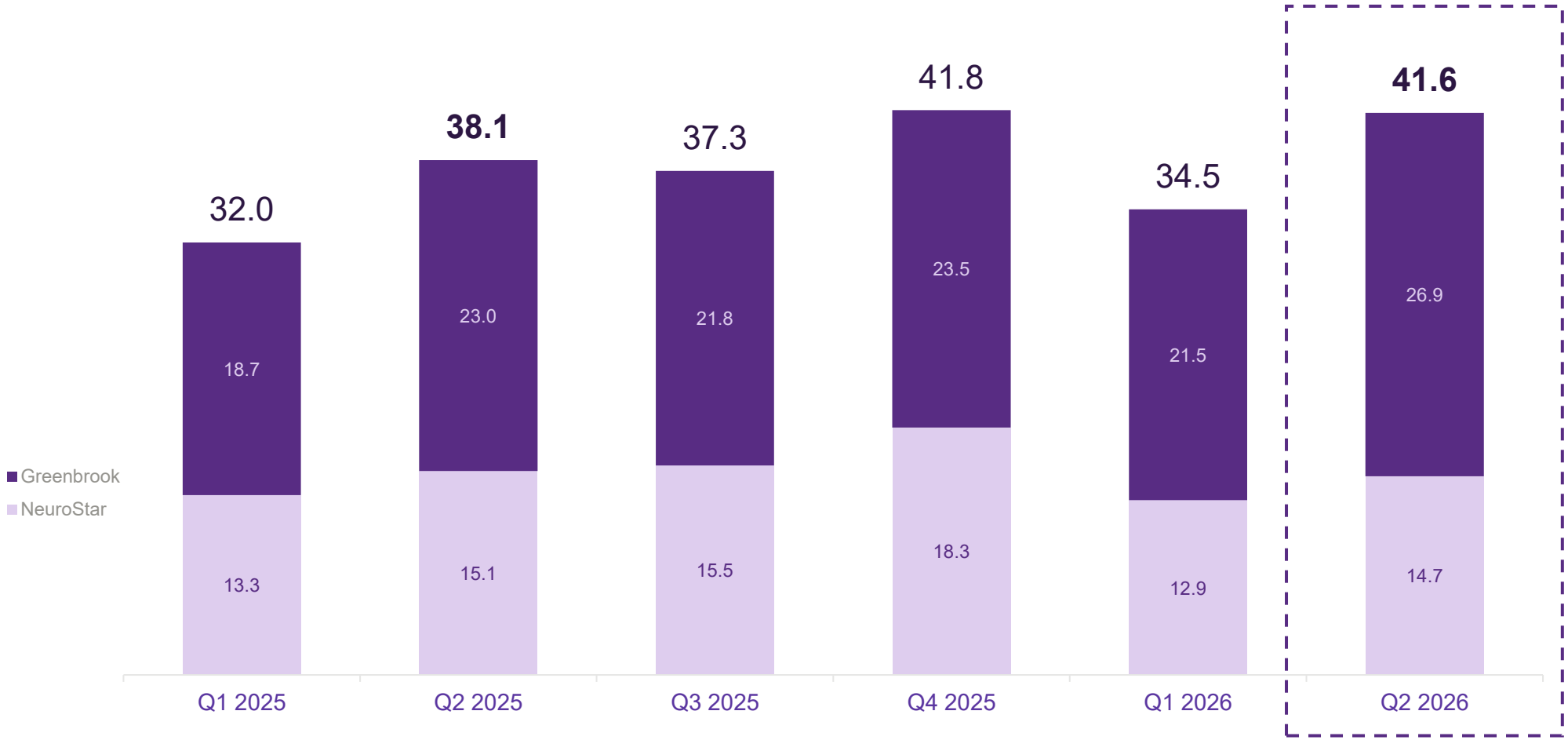
Financial Overview

Worldwide Quarterly Revenue[1]

($ in millions)

(As Reported)

Q2 2026 Revenue of $41.6M, a 9% increase from Q2 2025



(1) Actual results as reported and filed with the SEC for Neuronetics

Results of Operations[1]

($ in thousands)

(As Reported)

	Three Months Ended June 30,	
	2025	2026
Revenues	***$38,108***	***$41,568***
YOY Growth		*9%*
Gross Profit	**$17,758**	**$21,223**
Gross Margin	*47%*	*51%*
Total Operating Expenses	**$25,816**	**$22,724**
% of Revenues	*68%*	*55%*
Loss from Operations	**($8,058)**	**($1,501)**
% of Revenues	*-21%*	*-4%*
Adjusted EBITDA	**($5,624)**	**$254**
Net Loss	**($10,120)**	**($3,439)**
Cash	**$17,469**	**$24,947**

(1) Actual results as reported and filed with the SEC for Neuronetics except for adjusted EBITDA which is a Non-GAAP metric

Reconciliation Bridge EBITDA to Adjusted EBITDA

($ in thousands)

The following table presents the Company's reconciliation between EBITDA and adjusted EBITDA. These pro forma results are based on assumptions that management believes are reasonable under the circumstances. However, they are not necessarily indicative of the Company's future performance. Earnings before interest, taxes, depreciation, and amortization ("EBITDA") is defined as income (loss) before income taxes, excluding the following items: interest expense, depreciation, and amortization. Adjusted EBITDA ("Adjusted EBITDA") is defined as EBITDA, excluding the following items: stock based compensation, loss on extinguishment of debt, and other items not considered indicative of the Company's ongoing operational performance and expected to occur infrequently.

	Three Months Ended June 30,	
	2025	2026
Net Loss to STIM Shareholders'	***($10,120)***	***($3,439)***
Interest Expense, Net	$1,781	$1,963
Depreciation and Amortization	$901	$729
EBITDA	***($7,438)***	***($747)***
Stock Based Compensation[1]	$1,814	$688
Restructuring[2]		$313
Adjusted EBITDA	***($5,624)***	***$254***

(1) Stock-based compensation consists of expenses related to restricted stock units and performance based restricted stock units. We exclude these expenses from our non-GAAP financial measures because they are non-cash charges that we do not consider reflective of our core ongoing operational performance. While share-based compensation is a recurring expense and a key part of our employee retention strategy, excluding it allows management and investors to compare our operational profitability more consistently against prior periods and industry peers.

(2) Restructuring expense represents net costs incurred in connection with leadership workforce reductions, role eliminations, or organizational restructuring activities that are not expected to recur in the ordinary course of business. These costs have been added back to EBITDA because they are considered non-recurring and not reflective of the Company's ongoing operating performance. Management believes excluding these expenses provides a more meaningful measure of normalized earnings and period-to-period operating comparability. .

Financial Position

($ in thousands)

	As of June 30, 2026
Cash and Cash Equivalents	$19,197
Restricted Cash	$5,750
Total Cash	**$24,947**
Total Current Assets	$53,230
Total Assets	**$131,529**
Total Current Liabilities	$28,309
Long-Term Debt, net	**$61,519**
Total Liabilities	$109,889
Accumulated Deficit	($473,151)
Total Stockholders' Equity	**$17,850**

NeuroStar Indications and Safety Information

NeuroStar Adult Indications for Use

The NeuroStar Advanced Therapy System is indicated for the treatment of depressive episodes and for decreasing anxiety symptoms for those who may exhibit comorbid anxiety symptoms in adult patients suffering from Major Depressive Disorder (MDD) and who failed to achieve satisfactory improvement from previous antidepressant medication treatment in the current episode.

The NeuroStar Advanced Therapy System is intended to be used as an adjunct for the treatment of adult patients suffering from Obsessive-Compulsive Disorder (OCD).

NeuroStar Adolescent Indications for Use

NeuroStar Advanced Therapy is indicated as an adjunct for the treatment of Major Depressive Disorder (MDD) in adolescent patients (15-21).

Important Safety Information

NeuroStar Advanced Therapy is only available by prescription. A doctor can help decide if NeuroStar Advanced Therapy is right for you. Patients' results may vary.

The most common side effect is pain or discomfort at or near the treatment site. These events are transient; they occur during the TMS treatment course and do not occur for most patients after the first week of treatment. There is a rare risk of seizure associated with the use of TMS therapy (<0.1% per patient).

Visit neurostar.com for full safety and prescribing information.

SPRAVATO® Indications and Safety Information

IMPORTANT SAFETY INFORMATION

What is the most important information I should know about SPRAVATO®?

SPRAVATO® can cause serious side effects, including:

- **Sedation, dissociation, and respiratory depression.** SPRAVATO® may cause sleepiness (sedation), fainting, dizziness, spinning sensation, anxiety, or feeling disconnected from yourself, your thoughts, feelings, space and time (dissociation), and breathing problems (respiratory depression and respiratory arrest).
  - Tell your healthcare provider right away if you feel likeyou cannot stay awake or if you feel like you are going to pass out.
  - Your healthcare provider must monitor you for serious side effects for at least 2 hours after taking SPRAVATO®. Your healthcare provider will decide when you are ready to leave the healthcare setting.
- **Abuse and misuse.** There is a risk for abuse and misuse with SPRAVATO®, which may lead to physical and psychological dependence. Your healthcare provider should check you for signs of abuse, misuse, and dependence before and during treatment.
  - Tell your healthcare provider if you have ever abused or been dependent on alcohol, prescription medicines, or street drugs.
  - Your healthcare provider can tell you more about the differences between physical and psychological dependence in drug addiction.
- **SPRAVATO® Risk Evaluation and Mitigation Strategy (REMS).** Because of the risks for sedation, dissociation, respiratory depression, and abuse and misuse, SPRAVATO® is only available through a restricted program called the SPRAVATO® Risk Evaluation and Mitigation Strategy (REMS) Program. SPRAVATO® can only be administered at healthcare settings certified in the SPRAVATO® REMS Program. Patients treated in outpatient healthcare settings (such as medical offices and clinics) must be enrolled in the program.
- **Increased risk of suicidal thoughts and actions.** Antidepressant medicines may increase suicidal thoughts and actions in some people 24 years of age and younger, **especially within the first few months of treatment or when the dose is changed. SPRAVATO® is not for use in children.**
  - Depression and other serious mental illnesses are the most important causes of suicidal thoughts and actions. Some people may have a higher risk of having suicidal thoughts or actions. These include people who have (or have a family history of) depression or a history of suicidal thoughts or actions.
- **How can I watch for and try to prevent suicidal thoughts and actions in myself or a family member?**
  - Pay close attention to any changes, especially sudden changes, in mood, behavior, thoughts, or feelings, or if you develop suicidal thoughts or actions.
  - Tell your healthcare provider right away if you have any new or sudden changes in mood, behavior, thoughts, or feelings, or if you develop suicidal thoughts or actions.
  - Keep all follow-up visits with your healthcare provider as scheduled. Call your healthcare provider between visits as needed, especially if you have concerns about symptoms.
- **Tell your healthcare provider or get emergency help right away if you or your family member have any of the following symptoms, especially if they are new, worse, or worry you:**
  - thoughts about suicide or dying
  - new or worse depression
  - feeling very agitated or restless
  - trouble sleeping (insomnia)
  - acting aggressive, being angry or violent
  - an extreme increase in activity and talking (mania)
  - suicide attempts
  - new or worse anxiety
  - panic attacks
  - new or worse irritability
  - acting on dangerous impulses
  - other unusual changes in behavior or mood

SPRAVATO® Indications and Safety Information

What should I avoid while taking SPRAVATO®?

Do not drive, operate machinery, or do anything where you need to be completely alert after taking SPRAVATO®. Do not take part in these activities until the next day following a restful sleep. See **"What is the most important information I should know about SPRAVATO®?"**

What are the possible side effects of SPRAVATO®?

SPRAVATO® may cause serious side effects including:

See **"What is the most important information I should know about SPRAVATO®?"**

Increased blood pressure. SPRAVATO® can cause a temporary increase in your blood pressure that may last for about 4 hours after taking a dose. Your healthcare provider will check your blood pressure before taking SPRAVATO® and for at least 2 hours after you take SPRAVATO®. Tell your healthcare provider right away if you get chest pain, shortness of breath, sudden severe headache, change in vision, or seizures after taking SPRAVATO®.

Problems with thinking clearly. Tell your healthcare provider if you have problems thinking or remembering.

Bladder problems. Tell your healthcare provider if you develop trouble urinating, such as a frequent or urgent need to urinate, pain when urinating, or urinating frequently at night.

The most common side effects of SPRAVATO® include:

- feeling disconnected from yourself, your thoughts, feelings and things around you
- dizziness
- nausea
- feeling sleepy
- spinning sensation
- decreased feeling of sensitivity (numbness)
- feeling anxious
- lack of energy
- increased blood pressure
- vomiting
- feeling drunk
- headache
- feeling very happy or excited

If these common side effects occur, they usually happen right after taking SPRAVATO® and go away the same day.

These are not all the possible side effects of SPRAVATO®.

Call your doctor for medical advice about side effects. You may report side effects to Johnson & Johnson at 1-800-526-7736, or to the FDA at 1-800-FDA-1088.

What is SPRAVATO® (esketamine) CIII nasal spray?

SPRAVATO® is a prescription medicine used:

- with or without an antidepressant taken by mouth, to treat adults with treatment-resistant depression (TRD)
- with an antidepressant taken by mouth, to treat depressive symptoms in adults with major depressive disorder (MDD) with suicidal thoughts or actions

SPRAVATO® is not for use as a medicine to prevent or relieve pain (anesthetic). It is not known if SPRAVATO® is safe or effective as an anesthetic medicine.

It is not known if SPRAVATO® is safe and effective for use in preventing suicide or in reducing suicidal thoughts or actions. SPRAVATO® is not for use in place of hospitalization if your healthcare provider determines that hospitalization is needed, even if improvement is experienced after the first dose of SPRAVATO®.

It is not known if SPRAVATO® is safe and effective in children.

Please see full Prescribing Information, including Boxed WARNINGS, and Medication Guide for SPRAVATO® and discuss any questions you may have with your healthcare provider.

SPRAVATO® Indications and Safety Information

Do not take SPRAVATO® if you:

- have blood vessel (aneurysmal vascular) disease (including in the brain, chest, abdominal aorta, arms and legs)
- have an abnormal connection between your veins and arteries (arteriovenous malformation)
- have a history of bleeding in the brain
- are allergic to esketamine, ketamine, or any of the other ingredients in SPRAVATO®.

If you are not sure if you have any of the above conditions, talk to your healthcare provider before taking SPRAVATO®.

Before you take SPRAVATO®, tell your healthcare provider about all of your medical conditions, including if you:

- have heart or brain problems, including:
  - high blood pressure (hypertension)
  - slow or fast heartbeats that cause shortness of breath, chest pain, lightheadedness, or fainting
  - history of heart attack
  - history of stroke
  - heart valve disease or heart failure
  - history of brain injury or any condition where there is increased pressure in the brain
- have liver problems
- have ever had a condition called "psychosis" (see, feel, or hear things that are not there, or believe in things that are not true).
- are pregnant or plan to become pregnant. SPRAVATO® may harm your unborn baby. You should not take SPRAVATO® if you are pregnant.
  - Tell your healthcare provider right away if you become pregnant during treatment with SPRAVATO®.
  - If you are able to become pregnant, talk to your healthcare provider about methods to prevent pregnancy during treatment with SPRAVATO®.
  - There is a pregnancy registry for women who are exposed to SPRAVATO® during pregnancy. The purpose of the registry is to collect information about the health of women exposed to SPRAVATO® and their baby. If you become pregnant during treatment with SPRAVATO®, talk to your healthcare provider about registering with the National Pregnancy Registry for Antidepressants at 1-844-405-6185 oronline at https://womensmentalhealth.org/clinical-and-research-programs/pregnancyregistry/antidepressants/.
- are breastfeeding or plan to breastfeed. SPRAVATO® passes into your breast milk. You should not breastfeed during treatment with SPRAVATO®.

Tell your healthcare provider about all the medicines that you take, including prescription and over-the-counter medicines, vitamins and herbal supplements. Taking SPRAVATO® with certain medicine may cause side effects.

Especially tell your healthcare provider if you take central nervous system (CNS) depressants, psychostimulants, or monoamine oxidase inhibitors (MAOIs) medicine. Keep a list of them to show to your healthcare provider and pharmacist when you get a new medicine.

How will I take SPRAVATO®?

- You will take SPRAVATO® nasal spray yourself, under the supervision of a healthcare provider in a healthcare setting. Your healthcare provider will show you how to use the SPRAVATO® nasal spray device.
- Your healthcare provider will tell you how much SPRAVATO® you will take and when you will take it.
- Follow your SPRAVATO® treatment schedule exactly as your healthcare provider tells you to.
- During and after each use of the SPRAVATO® nasal spray device, you will be checked by a healthcare provider who will decide when you are ready to leave the healthcare setting.
- You will need to plan for a caregiver or family member to drive you home after taking SPRAVATO®.
- If you miss a SPRAVATO® treatment, your healthcare provider may change your dose and treatment schedule.
- Some people taking SPRAVATO® get nausea and vomiting. You should not eat for at least 2 hours before taking SPRAVATO® and not drink liquids at least 30 minutes before taking SPRAVATO®.
- If you take a nasal corticosteroid or nasal decongestantmedicine take these medicines at least 1 hour before taking SPRAVATO®.