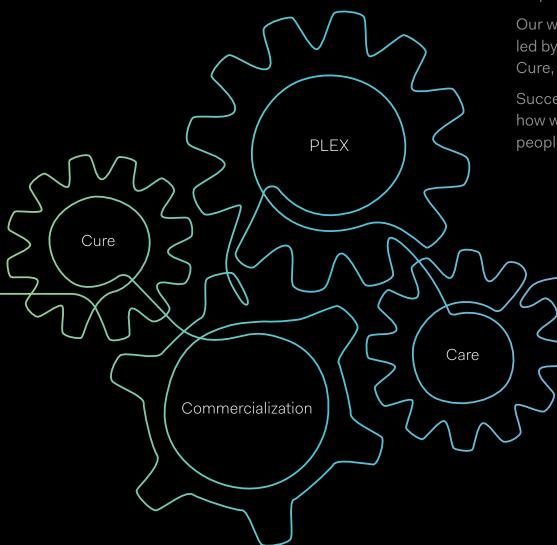


Collaboration Drives Impact

Making a difference in the lives of those living with SCI



What We Do



Praxis is a Canadian-based not-for-profit organization that leads global collaboration in spinal cord injury (SCI) research, innovation and care. We accelerate the translation of discoveries and best practices into improved treatments for people with spinal cord injuries.

Our work is driven by the priorities of people with SCI and led by our four teams — PLEX (people with lived experience), Cure, Care and Commercialization.

Success means **IMPACT**; we measure our success through how we make a difference and improve quality of life for people living with SCI and the SCI community.

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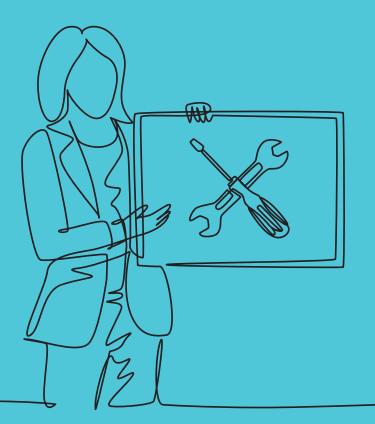
Praxis Land Acknowledgement

Praxis Spinal Cord Institute would like to begin by acknowledging that the land on which we are located is on the unceded traditional territory of the Coast Salish Peoples, specifically the shared traditional territories of the Skwxwú7mesh (Squamish), səlil'ilw'əta? (Tsleil-Waututh), and xwməθkwəy'əm (Musqueam) First Nations.



Encouraging Physical Activity Boosts Outcomes

ProACTIVE toolkit helps boost fitness during SCI rehab and beyond



When individuals return to living in the community after a spinal cord injury, there is a significant reduction in physical activity. This lack of activity impacts an individual's health and recovery. To address this, researchers and physiotherapists are combining peer coaching with exercise guidelines from the ProACTIVE toolkit to set motivational milestones.

For many patients with an SCI in B.C., the recovery process starts with acute stage clinical management right after the injury. Once stabilized, care often moves into rehabilitation in the hospital, followed by a return to the community. The initial two phases are closely supervised but in the community many individuals are unsupported and can end up with reduced physical activity and poor health outcomes.

The ProACTIVE toolkit was developed with support from Praxis with input from more than 300 members of the SCI community in B.C. Developed by physiotherapists and researchers from UBC Okanagan, the toolkit focuses beyond rehab towards physical activity, promoting leisure time activity and wheeling or active transportation. Current guidelines state that people with SCI should aim for 20 minutes of moderate to vigorous intensity aerobic activity and three sets of eight to ten repetitions of strength training exercises for each major functioning muscle group twice a week for fitness. For cardiometabolic health, they should also aim for 30 minutes of moderate to vigorous intensity aerobic activity at least three times per week.

*Text-hyperlink

PROACTIVE TOOLKIT

A recent study funded by Praxis has looked at the impact peer coaching and support had on physical activity levels among those returning to the community, using the ProACTIVE toolkit as a framework and guide for exercise. Participants and physiotherapists found the results highly encouraging.

"Well, I would have to talk about the mental health aspect (of it)... there have been times where it was really dark. The (mental health boost is the) most important benefit that I'm getting from this, even though the physical benefit is massive as well. So, it is kind of tough, but I think without the mental the physical wouldn't be possible."

ProACTIVE study participant with SCI

"The ProACTIVE project has changed how we provide support for our patients as they are discharged, by allowing us to start a conversation with them about overall physical activity and know that there is someone (SCI-BC peers) available in the community to follow up and continue to support them. Prior to this project, often therapists had no opportunity to provide a cardiovascular fitness program to patients, and the ProActive toolkit has given us a standard way to start this conversation."

Therapists at GF Strong, Vancouver BC

"This project allows patients to return to physical activity with the focus of incorporating it into their normal lives instead of being focused solely on their "rehab exercises", which often are seen as temporary. For patients not yet ready to start a cardiovascular fitness routine when they are discharged from GF Strong, they can be followed up by SCI BC peers to support them when they are ready."

Therapists at GF Strong

*Text-hyperlink





Bringing Lived Perspectives to Local SCI Care

Outreach brings best practices for SCI care to remote and rural practitioners

Praxis BC Interior Regional Clinical Liaison, Shannon Rockall, and Community Liaison, James Hektner hosted a series of supplementary education sessions for clinical practitioners to tackle the lack of local specialized services for SCI. Using an integrated knowledge translation (IKT) model that involved panel sessions with people living with experience of SCI (PLEX), James and Shannon hosted both hands-on and virtual workshops.

Sustaining a spinal cord injury causes varying degrees of paralysis in addition to lifelong risk from secondary complications such as pressure injury. Without proper care, these are often extremely debilitating or even fatal. Secondary complications are difficult to diagnose and to treat unless care providers are fully prepared. And treatment often needs prolonged bed rest and hospitalization, both of which impact quality of life.

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PRAXIS | ANNUAL REPORT 2022 O6

Quality of care and support for spinal cord injury is essential for quality of life and connecting back into the community.

However, the standard of care often depends on where you are treated and where you live. Best practices in care are often limited to urban centres of excellence so people living with SCI are often required to travel to the Lower Mainland to access specialized services. As a solution, SCI workshops that bring local providers up-to-speed can help fill knowledge gaps and bring best practices into action.

Feedback showed that sessions made an impact on the attendees. Pre- and post-session polling showed not only enthusiasm for the format and the topics covered, but also increased confidence and awareness of the issues raised. Attendees noted how important it was for them to hear directly from PLEX and how much more aware they felt of priorities in care. Feedback also showed increasing awareness of common secondary issues, such as pressure injuries and respiratory health.

Outreach increases knowledge and clinical practice skills to ensure higher quality care is delivered locally. More sessions are planned, and they're already oversubscribed; the team will continue establishing networks and communities of practice in the region.

Feedback from workshop participants:

- "Learned a lot about how experiences can be so different even with similar injuries 'on paper'. Good reminder to be personcentered and listen to my clients."
- "What I liked best about the workshop was hearing the functional and lived-experience perspectives. I can do my own reading about spinal cord injury medically; however, it was SO valuable to talk to someone about it and hear about different functional options for functional differences."

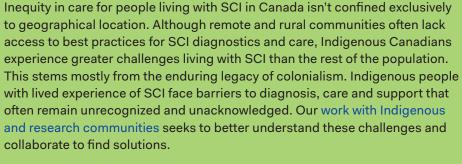






Same, But Different

Indigenous Experience of SCI in Canada



Praxis supports Indigenous academic research positions—two post-doctoral research positions and one contract professorship—to address ethical concerns and cultural boundaries when it comes to Indigenous health data. Part of the research into Indigenous SCI needs and priorities will come from data collected for the Praxis-led Canadian National SCI Registry*, but before this happens, all involved need to understand that there is a duty of care towards the data that acknowledges the ethical concerns and cultural boundaries. There is reticence around self-identification and government interaction, and unwillingness to continue with what is a deficit model for describing Indigenous health and social issues. Establishing ethical frameworks and understanding the cultural implications of collecting and storing clinical data is essential for establishing a strong foundation.



PRAXIS | ANNUAL REPORT 2022 * Rick Hansen SCI Registry (RHSCIR)

We are also working at the community level, supporting the creation of Indigenous-led SCI Networks to identify and then advance solutions to health issues and barriers.

Richard Peter, Indigenous Peoples' Liaison at Praxis, facilitates outreach to connect with Indigenous individuals and organizations as well as SCI associations, health care providers, researchers and public policy decision makers.

In November 2022, supported by a diverse, multidisciplinary team at Praxis, Richard facilitated the first Indigenous SCI Gathering held with SCI BC in Vancouver, BC. As initial outreach to enable inclusion of Indigenous perspectives in SCI research and health care, the gathering heard from diverse voices and experiences. All attending gave personal insight into life as an Indigenous person with a disability, hearing about funding, access to wheelchairs, housing and loss of community. There's a diversity of needs that are not being addressed currently and the goal is to expand these gatherings into a regional SCIfocused Indigenous network to address this.

Indigenous perspectives are critical to Praxis' mission of improving quality of life and health outcomes for people with lived experience of SCI (PLEX). Collaborating with Indigenous researchers and communities helps prioritize and accelerate relevant research and innovation that addresses the particular SCI issues facing the Indigenous SCI community.

"Impacts for Indigenous health data governance in registries, biobanks need to be understood – there's a duty of care, responsibility towards data that acknowledges and acts on ethical concerns and cultural boundaries."

Dr. Melanie Jeffrey, Praxis-funded postdoc researcher

"The challenge is bringing the right people to the table; what we know best is our people."

Attendee, first gathering Nov 2022

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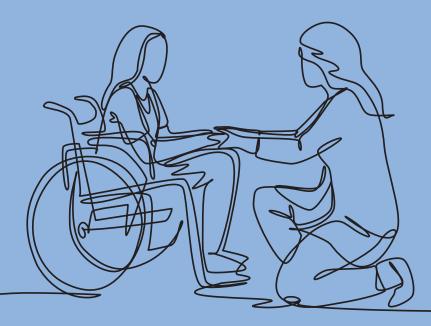


Sitting Solutions

Smart tech seat cushion automates, relieves and reduces pressure injury risk for wheelchair users

Spinal cord injury isn't just paralysis; it means living with heightened risk of serious and life-threatening secondary complications. One of these is the innocuously sounding bed sore, aka pressure injury. It comes from prolonged immobility in one position that results in skin damage through abrasion and loss of circulation. It might sound like just a break in the skin but to people living with SCI, it's serious. Healing can be prolonged, often requiring bed rest, and yes – sometimes it leads to death.

Wheelchair users are under constant risk of pressure sores from remaining in a seated position and need to constantly shift position to maintain skin health.



KALOGON'S WHEELCHAIR CUSHION REDUCES PRESSURE INJURY RISK

Kalogon, a Praxis commercialization program alum, has developed a solution. Their pressure-relieving seat cushion aims to help wheelchair users avoid pressure injuries and pain by automating regular changes in seated position multiple times per day. Machine learning helps 'orbit' support around the cushion to redistribute bodyweight through patent-pending air cell technology.

"Kalogon is freedom," said John Miller, one of Kalogon's first users. "I've been able to take pain-free road trips for the first time in 18 years; I've worked in the garden longer than I used to; I've traveled to see my grandchildren. Kalogon gave me my life back."

From TechCrunch

As part of Praxis's SCI incubate program, the Kalogon team were mentored by people with lived experience of SCI (PLEX) for user experience feedback to further refine the technology.

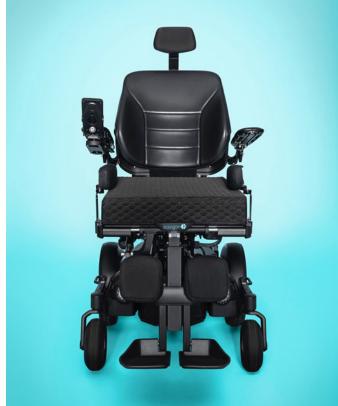
The device, which analyzes pressure points in real-time, adjusts the user's seating position so that blood flow through at-risk tissues is maintained. This aims to avoid damages and proactively prevents pressure sores. User studies are ongoing but recent success includes attention from Veterans Affairs in the United States, where the cushion is under evaluation in 20 of their hospitals. Kalogon also received a successful seed funding round that raised \$3.3 million along with support from the U.S. Air Force.

"Significant improvements in overall comfort, accelerated healing, and an ability to sit two times longer."

Early Kalogon Orbiter Smart Cushion User

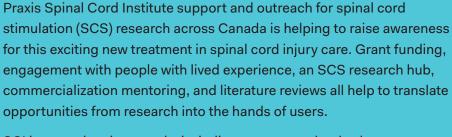
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More Than Just the Ability to Walk

A life-changing therapy with potential for multiple benefits



SCI is more than just paralysis; it disrupts many other body systems, leading to issues with bowel and bladder emptying, temperature regulation, sexual dysfunction, blood pressure maintenance, and respiratory function among others. These seriously impact quality of life and can precipitate conditions such as autonomic dysreflexia that can be fatal.



SCS reduces many of the secondary complications arising post SCI and has the potential to impact quality of life.

A lot of the secondary complications that arise post-SCI that impact quality of life could be managed or abolished with SCS of specific spinal regions.

On-going research shows that non-invasive spinal cord stimulation therapy re-awakens dormant spinal circuits following an injury, and this restores partial bladder, bowel, and sexual function.

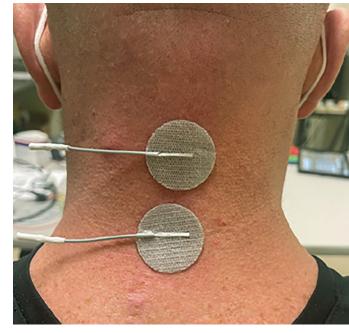
John Chernesky, Praxis PLEX Program Manager, has been living with SCI for more than 25 years. He took part in one of the Praxis-partner studies on spinal cord stimulation and its impact on SCI. Although the study focused on upper extremity function, John noticed better sleep, bowel and cardiovascular function increased strength and endurance, improved hand grip and fine motor skills. The impact extended down into his torso and lower limbs.

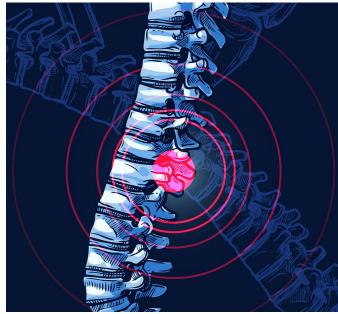
Spinal cord stimulation has the potential to be a game changer in the lives of many people living with SCI, but only where there is access to and support for clinical trials and commercialization of technology. Praxis support for spinal cord stimulation therapy has included grant funding and research support, engagement with and user feedback from PLEX, and commercialization mentoring for medical device innovation, which accelerates stimulation technology into clinical use.

"The positive effects were substantial; with an increase in strength and endurance, particularly in gross motor function, over a much longer time period with reduced fatigue and enhanced recovery."

John Chernesky
(SCI Line interview – taking part in SCS study)

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Pressure Research Delivers Life Changing Tech and Clinical Best Practices

Research informs acute SCI care to enhance recovery, avoid further neurotrauma



Maintaining adequate spinal cord perfusion pressure (SCPP), for the circulation of blood to the spinal cord at the time of injury and during recovery improves neurological recovery. Praxis has supported surgeon-scientist Dr. Brian Kwon and his team at the University of British Columbia (UBC) as they lead research on personalizing SCPP management to each SCI patient's need. Data from these studies have shown that prompt and consistent intervention in the acute phase of injury maintains adequate SCPP and improves neurological recovery.

The work has been taken even further through the CASPER (Canadian-American Spinal Cord Perfusion Pressure and Biomarker) study. This multicentre clinical study funded by Praxis is developing protocols for use in clinical acute care. The study is also looking at whether draining cerebral spinal fluid helps maintain spinal cord perfusion to minimize further tissue damage.

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Praxis support for UBC study is developing protocols for use in clinical acute care.

New recommendations from the AO Spine/Praxis Spinal Cord Institute Clinical Practice Guidelines were presented for the first time at the Global Spine Congress 2023 in Prague, May 31–June 3.

Praxis support of work from the Kwon lab has also led to development of next generation med tech for monitoring oxygenation and hemodynamics in the injured spinal cord. An implantable biosensor, based on Near-Infrared Spectroscopy technology, is implanted at the injury site during initial SCI trauma management surgery. It then gives real-time read outs so clinicians can optimize SCPP management during the acute phase of injury.

This new medtech, which is heading for commercialization in a partnership grant with the Michael Smith Foundation for Health Research, is part of a U.S. Defense Advanced Research Project Agency grant to revolutionize SCI treatments using innovative, implantable technologies.

"Results are already impacting standards of care for SCI in BC, with Praxis and AOSpine supporting the development of clinical practice guidelines to ensure this evidence is available worldwide."

*Text-hyperlink





COLLABORATING DRIVES IMPACT

Collaboration brings up images of partnership, two or more teams coming together to work on a common project. As a global hub of research and innovation, collaboration is an essential part of our life, driving impact in the spinal cord injury community for health, wellness and a world without paralysis. Praxis—translating theory into action—happens best with teamwork; our best results come through collaboration.

For example, active collaboration created the ProACTIVE Toolkit that guides post-rehab activity for patients sustaining an SCI returning to the community; input from physiotherapists created a workable and practical resource that supports a return to active living post-injury.

"Collaboration is more than just multiplying effort; collaboration drives equity, diversity and inclusion for meaningful engagement."

Collaboration avoids tokenism in research, in innovation, and in commercialization. A common thread running through all our work at Praxis is engagement with people living with SCI (PLEX). This kind of collaboration shows up as mentorship for companies and entrepreneurs developing medical technologies that address the many secondary complications following SCI.

Collaboration also shows as equity, diversity and inclusion. Indigenous experience of SCI, healthcare and disability is often overlooked, meaning that without their voices, we fail in simple foundational actions such as gathering clinical data and providing clinical care. Collaboration with Indigenous communities, PLEX and academics opens us up to learn about and respect cultural practices and community priorities that should influence our work.

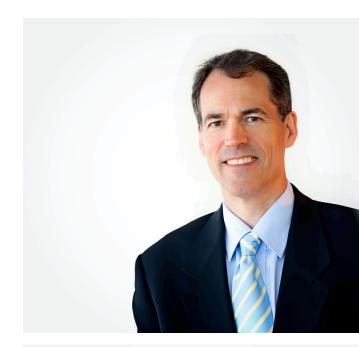
In addition to thanking our volunteers and personal donors in and around the SCI community, we acknowledge the generous financial support from the Government of Canada, the Province of British Columbia and Genome BC. We're also grateful for the generosity and professionalism shown by our professional partner networks, the exemplary leadership of our dedicated Board of Directors, and the Praxis team. Each guides our vision and implements our work, driving theory into practice and knowledge into action. From the strength of these collaborations, Praxis continues to transform the lives of people with SCI.



Chief Executive Officer

Dr. Ian Rigby

Chair, Board of Directors







Encouraging Collaboration on a National and Global Scale

84

Active partners national and internationally



Improving Spinal Cord
Injury Care, Accelerating
Cure-Based Research

30

Participating facilities in Praxis-led Canadian National SCI Registry*

6,552

Canadians with spinal cord injury benefited from the implementation of best practices

50%

Praxis-led Canadian National SCI Registry network accredited with Accreditation Canada's Qmentum Standards for Spinal Cord Injury

\$2,135M

Grant funding distributed to support and accelerate SCI research and best practice implementation (Cure and Care Apr2022/Mar2023)



1,445

Enrolments in Praxis-led Canadian National SCI Registry (April 2022 - March 2023) 11,615

Total participants in Praxis-led Canadian National SCI Registry*

5

Praxis people with lived experience team members



Driving Innovation since 2019

28

SMEs supported**

55

Grad students engaged in Ideation Clinic
- a facilitated innovation development program

18

Total number of prototypes ready for demonstration in an operational environment

9

Number of products, processes, services or technologies to market

54

Entrepreneurs trained since start of accelerator programs

2,160

Total hours of 1:1 mentorship with SMEs

\$840K

Venture funding provided to SMEs to advance innovations in spinal cord injury cure and care

\$21.5M

Leveraged funding provided to participants developing new life-changing products after participation in Praxis programs

^{*} Rick Hansen SCI Registry (RHSCIR)

^{**} SME - small-to-medium enterprise

Note: these metrics cover life of institute unless otherwise specified

Collaboration and Community Outreach Creates Awareness

Shim's Ride is an annual cycling event in Victoria, BC that fundraises for spinal cord injury research and innovation. Shim's Ride was started by friends of Mathew Szymanowski aka "Shim", who was profoundly injured during a bike ride.

The group chose to focus on supporting health technology and collaborating with Praxis. The group of friends are keen to support medtech innovation that answers the priorities of the SCI community to relieve or prevent debilitating secondary complications that are common following injury.

Working together with Praxis, their team not only brings communities together but also raises awareness and funds for people living with SCI. In the summer of 2022, the Shim's Ride team collected over \$24,000 from their event—a criterium bike race—through donations and merchandise sales.

Community outreach and partnership with Praxis helps Shim's Ride meet their goal of improving the quality of life for Shim and the greater SCI community. "Working with the team at Praxis made it easy for us to focus on the event itself and reach out to our community. Collaborating with Praxis to support the SCI community makes sense; we know that our vision aligns with theirs and that our donations make a meaningful impact in the lives of people living with SCI. Working for a second summer with the Praxis team helps us support programs to accelerate technology into use."

Shim's Ride

Image Above: Praxis at Shim's Ride 2022; Chris Marks, Andrew Forshner, Richard Peter, Bill Barrable (from left to right)

Image Below: Praxis at Shim's Ride 2022





Praxis Active Partners

Canadian

Canadian Friends of Hebrew University

India-Canada Centre for Innovative Multidisciplinary Partnerships to Accelerate Community Transformation and Sustainability (IC-Impacts - Canadian-Indian Research Collaborative in SCI Innovations)

The University of British Columbia

- Faculty of Medicine
- Faculty of Human and Social Development, School of Health and Exercise Sciences
- School of Biomedical Engineering

Michael Smith Health Research BC

International Collaboration on Repair Discoveries (ICORD)

Vancouver Coastal Health Authority

Simon Fraser University

- Department of Gerontology
- Faculty of Engineering

University of Alberta

- Donadeo Innovation Centre for Engineering
- Faculty of Medicine
- Faculty of Nursing

University of Toronto

- Institute of Biomaterials and Biomedical Engineering (IBBME)
- Innovations & Partnership Office

University of Calgary

- The Governors of the University of Calgary
- Clinical Research Unit (CRU)

Health Standards Organization

Spinal Cord Injury BC

Genome BC

University of Waterloo - Centre for Bioengineering and Biotechnology

McMaster University - Faculty of Health Sciences

University of Manitoba

- University of Manitoba Spinal Cord

University Health Network

The Governors of the University of Alberta

Regional Health Authority B

Université de Montréal - Department of Specialized Medicine

Naqi Logix

Focal Lines Technologies

Game Changer Technologies

University of Saskatchewan

Nova Scotia Health Authority

Lawson Research Institute

Hamilton Health Sciences Corporation

Ottawa Hospital Research Institute

Unity Health Toronto

Sunnybrook Research Institute

CHU de Québec - Université Laval

Centre Intégré Universitaire de Santé et de Services Sociaux (CIUSSS) Nord-de-L'Îlede-Montréal

Centre intégré universitaire de santé et de services sociaux de la Capitale-Nationale (CIUSSS-CN)

Centre Intégré Universitaire de Santé et de Services Sociaux du Centre-Sud-de-L'Îlede-Montréal

Centre intégré universitaire de santé et de services sociaux de la Capitale-Nationale (CIUSSS-CN)

La Corporation de L'Ecole Polytechnique de Montréal

Canadian Spine Outcomes and Research Network

International

Hebrew University of Jerusalem

Indian Spinal Injuries Centre

Indian Institute of Technology, Delhi

International Spinal Cord Society (ISCOS)

Comphya SA

Battelle

Munevo

ONWARD

AO Spine

New Zealand Spinal Cord Injury Registry

Praxis-led National Spinal Cord Injury Registry Facilities

GF Strong Rehabilitation Centre

Vancouver General Hospital

Foothills Hospital

Glenrose Rehabilitation Hospital

Royal Alexandra Hospital

University of Alberta Hospital

Royal University Hospital

Saskatoon City Hospital

Winnipeg Health Sciences Centre

Toronto Rehabilitation Institute -

Lyndhurst Centre

St. Michael's Hospital

Sunnybrook Health Sciences Centre

Toronto Western Hospital

Hamilton Regional Rehabilitation Centre

Hamilton General Hospital

Parkwood Institute

University Hospital

Victoria Hospital

Ottawa Hospital - Rehabilitation Centre

Ottawa General Hospital

Hôpital de l'Enfant-Jésus

Institut de réadaptation en déficience physique de Québec

Hôpital du Sacré-Coeur de Montréal

l'Institut deréadaptation Gingras-Lindsayde-Montréal Rehabilitation Institute (IRGLM)

Queen Elizabeth II Health Sciences Centre

Nova Scotia Rehabilitation Centre

L.A. Miller Rehabilitation Centre

Saint John Regional Hospital

Stan Cassidy Centre for Rehabilitation

General Hospital - Health Science Centre

Our work would not be possible without the significant contribution of individuals living with spinal cord injury.

Also, the projects highlighted in this year's annual report are made possible through the generous support of our funders.

Government of Canada

Funded by the Government of Canada Financé par le gouvernement du Canada



20

Province of British Columbia



Genome British Columbia



Donor List

Advocates

\$25,000-\$100,000

Shim's Ride

Benefactors

\$2,500 - \$10,000

Robert Half Talent Solutions

Bill Barrable

Benjamin Beattie

Champions

\$500 - \$2,500

Jeremy Abitbol

Ben Almond

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AeroTrack Technologies Inc.

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Peter Guo Partner, Leader, Enterprise Risk Services, MNP

Jauvonne Kitto Co-Founder & CEO, Saa Dene Group of Companies

Dr. Christine Sang Director, Translational Pain Research, Brigham and Women's Hospital, Harvard Medical School

Nava Swersky Sofer International Speaker, Innovation & Commercialization Expert Co-Chair, Directors Leading Change

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Director, Spinal Cord Research Centre,
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Center, Peter Lougheed Hospital
Clinical Associate Professor of Medicine
at the University of Calgary

Jeremy Abitbol Vice President, Business Development, Northleaf Capital

Jeff Charpentier
Retired CFO in the Biotech Sector

Governance Committee

Dr. Christine Sang, Chair Director Translational Pain Research, Brigham and Women's Hospital Associate Professor, Harvard Medical School

Members:

Dr. Ian Rigby Emergency Physician, Foothills Medical Center, Peter Lougheed Hospital Clinical Associate Professor of Medicine at the University of Calgary

Jeff Charpentier Retired CFO in the Biotech Sector

YEAR ENDED MARCH 31, 2023, WITH COMPARATIVE INFORMATION FOR 2022	2023	2022
Revenue:		
Grants and contributions	\$ 7,819,487	\$ 7,272,200
Donations and sponsorships	56,743	559,388
Investment income	23,677	28,367
Other income	412,631	258,494
	8,312,538	8,118,449
Expenses:		
Translational research	2,656,229	2,016,330
Best practice implementation	1,627,456	2,575,889
Commercialization	1,433,319	852,641
Informatics	1,179,598	1,193,906
Consumer engagement	356,999	439,011
Fundraising	106,939	104,409
Management and administration	479,033	487,243
	7,839,573	7,669,429
Excess of revenue over expenses	472,965	449,020
Unrestricted fund balance, beginning of year	1,197,828	748,808
Unrestricted fund balance, end of year	\$ 1,670,793	\$ 1,197,828

YEAR ENDED MARCH 31, 2023, WITH COMPARATIVE INFORMATION FOR 2022	2023	2022
Cash provided by (used in):		
Operations:		
Excess of revenue over expenses	\$ 472,965	\$ 449,020
Items not involving cash:		
Depreciation of capital assets	79,136	102,661
Unrealized gains (losses) on investments	3,866	(25,154)
	555,967	526,527
Changes in non-cash working capital:		
Accounts receivable	(6,525,627)	(3,447,049)
Prepaid expenses	(16,503)	48,092
Accounts payable and accrued liabilities	392,706	(343,743)
Deferred contributions	7,172,513	2,517,789
	1,579,056	(698,384)
Investing:		
Purchase of capital assets	(28,706)	-
Purchase of short-term investments and investment funds	· · · · · · · · · · · · · · · · · · ·	(750,000)
Purchase of long-term investments	(152,865)	(51,040)
Proceeds from short-term investments	758,606	2,052,791
	577,035	1,251,791
Increase in cash and cash equivalents	2,156,091	553,407
Cash and cash equivalents (bank indebtedness), beginning of year	538,556	(14,851)
Cash and cash equivalents, end of year	\$ 2,694,647	\$ 538,556

For Praxis Spinal Cord Institute's complete audited financial statements, please visit our website: praxisinstitute.org

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