



Applied Medical Europe B.V.

VOLUNTARY SUSTAINABILITY REPORT 2025

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1. ABOUT

Applied Medical Europe B.V. ("AME") is the European headquarters of Applied Medical Corporation ("AMC" and "Applied Medical"), which was founded in 1987 and is based in Southern California. Applied Medical is a new generation medical device company that designs, develops, manufactures, sterilizes, and distributes medical devices to more than 75 countries globally through strategically located regional and global warehouses.

We are committed to conducting our operations in an environmentally and socially responsible manner, aligned with our company's mission of making a meaningful, positive difference.

2. BASIS FOR PREPARATION

This sustainability report has been prepared in alignment with the Basic Module of the Voluntary Standard for non-listed Micro-, Small- and Medium-sized undertakings ("VSME"), and incorporates selected disclosures from the VSME Comprehensive Module and the European Sustainability Reporting Standards ("ESRS").

The report covers AME and the subsidiaries and branches under its operational control for the calendar year 2025. AME is incorporated in the Netherlands as a private limited liability company and is headquartered at Wiekenweg 21, 3815 KL Amersfoort.

The following subsidiaries and branches are under AME's operational control:

Subsidiaries and Branches	City	Country
Applied Medical Distribution Europe ("AMDE") B.V. - Zweigniederlassung Österreich	Salzburg	Austria
Applied Medical Österreich GmbH	Salzburg	Austria
Applied Medical Belgium B.V.	Brussels	Belgium
Applied Medical Danmark Aps	Søborg	Denmark
Applied Medical Suomi Oy	Helsinki	Finland
Applied Medical France S.A.S.	Boulogne-Billancourt	France
Applied Medical Deutschland GmbH	Düsseldorf	Germany
Applied Medical Ireland, Ltd.	Dublin	Ireland
AMDE B.V. - Irish Branch	Dublin	Ireland
AMDE B.V. - Filiale Italiana	Milan	Italy
A.M. Warehousing Southcentral Europe S.R.L.	Milan	Italy
AMDE B.V.	Amersfoort	The Netherlands
Applied Medical Nederland B.V.	Amersfoort	The Netherlands
Applied Medical Norge AS	Oslo	Norway
Applied Medical Polska sp. z o.o.	Warsaw	Poland
AMDE B.V. - Sucursal em Portugal	Lisbon	Portugal
Applied Medical Portugal, LDA.	Lisbon	Portugal
AMDE B.V. - Sucursal en Espana	Madrid	Spain
Applied Medical España SL	Madrid	Spain
Applied Medical Sverige AB	Göteborg	Sweden
AMDE B.V. - Zweigniederlassung Steinhausen	Zug	Switzerland
Applied Medical United Kingdom Ltd.	Oxford	United Kingdom

Table 1: Subsidiaries and branches under the operational control of AME in 2025

The sustainability topics presented in this report are a prioritized selection of topics identified through AME's Double Materiality Assessment ("DMA") and stakeholder information needs.

2.1 TEAM MEMBERS

During the calendar year 2025, there were 1,037 full-time equivalent (“FTE”) team members at AME and the subsidiaries and branches under its operational control.

2.3 CERTIFICATIONS AND RATINGS

ISO 14001

ISO 14001 is the internationally recognized standard for Environmental Management Systems (“EMS”), providing a framework to design, implement, and manage environmental performance in areas such as GHG emissions, energy and resource usage, and waste.

AME has maintained ISO 14001 certification¹ of its EMS and successfully completed its most recent annual audit in October 2025.

2.2 SECTOR CLASSIFICATION

NACE Rev. 2 code 32.50: Manufacture of medical and dental instruments and supplies.

EcoVadis

EcoVadis is a leading provider of Sustainability Ratings, assessing the performance of companies across four themes: Environment, Labor & Human Rights, Ethics, and Sustainable Procurement.

In December 2025, AME was awarded an EcoVadis Committed Badge², placing us in the 63rd percentile among more than 150,000 companies assessed globally.

3. STRATEGY

AME is committed to developing innovative products that improve patient outcomes as well as improving the affordability and accessibility of high-quality healthcare. As a result of our dedication to understanding and satisfying our customers’ clinical and fiscal needs, we are a leading provider of breakthrough technologies for minimally invasive and general surgery, as well as bariatric, colorectal, gynecologic, obstetric, orthopaedic, urologic and vascular/cardiovascular specialties.

3.1 PRODUCT CATEGORIES

- **Laparoscopic Systems and Devices:** Kii™ abdominal and dissecting balloon access systems, Epix™ laparoscopic instrumentation, suction-irrigation systems, Inzii™ retrieval systems, and ancillary devices for laparoscopic procedures.
- **Voyant™ Energy Systems:** Bipolar energy sealing instruments for laparoscopic and open surgical procedures.
- **GelSeal™ Technology:** Access platforms for laparoscopic, endoscopic and natural orifice procedures.
- **Alexis™ Wound Protector-Retractors and Systems:** Wound protection and retraction systems for colorectal, gynecologic, obstetric, orthopaedic and other procedures.
- **Sureseal™ II Endoscopic Valve:** Instrument seal for endourologic procedures.
- **Atraumatic Occlusion Clips and Clamps:** Vessel occlusion for surgical procedures.

3.2 BUSINESS MODEL

We are guided by the belief that we are responsible for satisfying the three fundamental healthcare needs: cost containment, enhanced clinical outcomes, and unrestricted choice.

¹ AME, ISO 14001 Certificate (<https://appliedmedicalus-cdn-prd.azureedge.net/Resources/Sustainability/ISO-14001-certificate.pdf>).

² AME, Ecovadis 2025 Recognition Page (<https://recognition.ecovadis.com/wkvsibYnkGS908SLI8a5Q>).

We manufacture our products in-house at our facilities in Southern California (United States) and Amersfoort (the Netherlands). AME works with approximately 400 suppliers across materials, logistics, sterilization, utilities, and services, primarily concentrated in the United States and the European Union. Based on our vertically integrated business model, our primary suppliers are all owned and operated by our parent company AMC.

We operate in the business-to-business medical device market, serving hospitals and healthcare providers. From our European headquarters in the Netherlands and regional warehouses, we work with our teams to offer our products across the Netherlands, Germany, France, Spain, Italy, the United Kingdom, Belgium, Austria, Switzerland, Ireland, Norway, Poland, Portugal, Denmark, Finland, and Sweden. In addition, we offer our products to several other countries directly and through third-party distributors, mainly within Europe.

3.3 GOVERNANCE

Applied Medical is a privately held medical device company, governed by a Board of Directors that is responsible for overseeing the management of the company, including guidance on strategic direction, financial oversight, risk management, and corporate governance and compliance.

A Sustainability Governance Subpanel is responsible for the implementation of corporate sustainability reporting initiatives, and the review of relevant emerging regulations and mandates that could become applicable to the organization. This Subpanel comprises the financial statutory director of AME, as well as a finance executive and an Environmental and Policy Advocate, both members of senior management at the parent company AMC.

Sustainability assessments and initiatives are supported by subject matter experts across the organization that specialize in Corporate Sustainability, Health, Safety, and Environment (“HSE”), Finance, Team Member Relations, Community Relations, and more.

3.4 SUSTAINABILITY STRATEGY

At Applied Medical, we integrate sustainability considerations into our overall organizational strategy. Our strategy is reinforced by:

- Minimizing the outsourcing of operations to allow for direct oversight of our manufacturing processes, product quality, and environmental and social impacts.
- Embedding our global Environmental Policy³ into operations, with a focus on managing energy usage, water consumption, greenhouse gas emissions, and waste generation.
- Committing to improving the affordability and accessibility of high-quality healthcare by maintaining sustainable practices to reduce reliance on resources.
- Evaluating industry developments and stakeholder expectations.
- Monitoring updates from relevant governmental authorities, international organizations, and reporting regulations.

3.5 VERTICAL INTEGRATION

A central feature of our business model is vertical integration. Instead of outsourcing our operations, we continuously focus on the integration and implementation of processes in-house, further expanding our areas of expertise and manufacturing capabilities.

This enables us to efficiently make product enhancements and develop new technologies, reducing the turnaround time for implementing innovative ideas into our product solutions to positively impact patient care. It also allows us to control costs, closely manage supply lines, monitor product quality, and support

³ Applied Medical, Environmental Policy (https://appliedmedicalus-cdn-prd.azureedge.net/Resources/Sustainability/301769-EN-C%20Applied%20Medical%20Environmental%20Policy_2026.pdf).

compliance with sustainability and other regulatory standards more effectively.

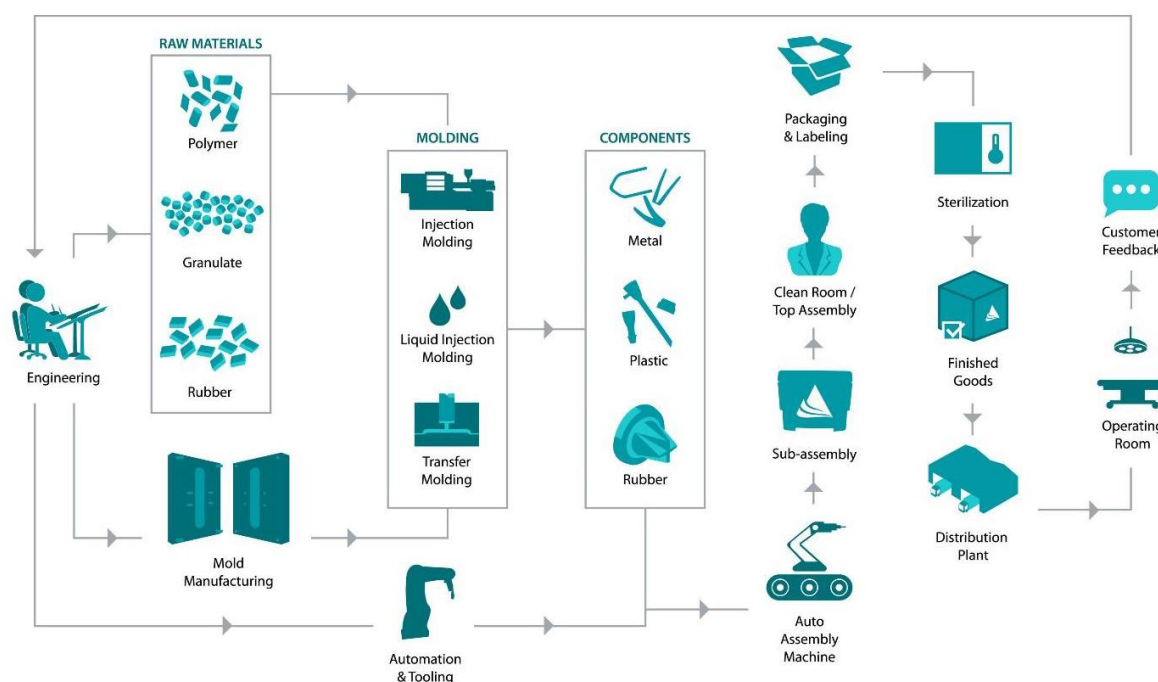


Figure 1: Applied Medical's Vertical Integration Process

4. DOUBLE MATERIALITY ASSESSMENT

To better understand and prioritize the sustainability topics most relevant to our business and stakeholders, we completed assessments for the material topics presented below as part of AME's Double Materiality Assessment, informed by the ESRS (2023)⁴.

The teams conducting the assessments were comprised of subject matter experts and representatives from relevant stakeholder departments. The results were subsequently reviewed by the Sustainability Governance Subpanel.

While stakeholder engagement is embedded into our business processes at various levels, we also conducted sustainability-specific stakeholder surveys and interviews to support the DMA.

4.1 OUR APPROACH

Our assessments drew on internal expertise, stakeholder input, and authoritative third-party sources. In addition to assessing a broad range of topics, sub-topics, and sub-sub-topics based on ESRS (2023) categorization, we reviewed sustainability frameworks, peer reports, third-party sustainability raters, and stakeholder feedback to identify any additional topics relevant to our business.

The assessments involved screening locations and business activities across our value chain, including upstream and downstream considerations.

We documented the assessments, rationales, and outcomes through each of the following steps:

Step 1: Detailed Descriptions primarily to establish common definitions and boundaries of subject matters and key concepts, including an initial assessment of relevance to the business.

Step 2: Preliminary Assessments to identify which subject matters have potentially material impacts, risks, and opportunities ("IROs") that require further assessment.

⁴ EFRAG, ESRS 1 (<https://eur-lex.europa.eu/legal-content/en/TXT/?uri=CELEX:32023R2772>).

Step 3: Materiality Assessments to evaluate and score the identified IROs using defined scales for likelihood and severity or magnitude.

- a. We considered short-, medium-, and long-term horizons, defined as up to a 12-month calendar year, from end of short term up to five years, and more than five years respectively.
- b. Impacts were scored based on the likelihood of occurrence, and severity for negative impacts (scale, scope, and irremediable character) or benefit magnitude for positive impacts (scale and scope).
- c. Risks and opportunities were scored based on likelihood of occurrence and magnitude of financial effect.

The teams conducting the assessments reviewed the outcomes at each step, and the Sustainability Governance Subpanel reviewed the Materiality Assessments.

The IROs were assessed against materiality thresholds defined in the context of our business and overall score distribution. This resulted in a prioritized list of material topics which forms the basis of our sustainability disclosure plan and strategy.

4.2 STAKEHOLDER ENGAGEMENT

Engaging with key stakeholders is embedded in our business practices and carried out through our interactions with suppliers, team members, distributors, customers, healthcare professionals, and local communities.

Further, we completed a subject-specific stakeholder engagement survey in conjunction with the DMA, where we requested and received input on sustainability topics from our stakeholders.

This engagement was based on core impact groups with the following European and global participants:

- **Affected Communities** – including the city of Amersfoort, the Netherlands.
- **Consumers and End-Users** – comprising surgeons and healthcare systems.
- **Own Workforce & Workers in the Value Chain** – including individuals performing work across the undertaking and its value chain.
- **Suppliers** – comprising both internal and external supplier partners.
- **Distributors** – including key direct and indirect (third-party) distributors.

We communicated with the most significant internal and external stakeholder groups to help determine which sustainability topics they deemed most relevant to our business and value chain. The interviews, surveys, and discussions were designed to yield qualitative and quantitative feedback for analysis.

Stakeholder interests and views contributed to the overall evaluation of material topics for reporting. This was in addition to topics determined material by the DMA. This two-fold approach provided a more comprehensive understanding of the potential impact of sustainability issues.

4.3 OUTCOMES

Based on the above assessments, we identified material IROs from the following eight sub- and sub-sub-topics, listed from most to least material:

Topic	Sub-Topic	Sub-Sub-Topic	Impact Material ⁵	Financially Material ⁶
E5 - Resource Use & Circular Economy	Resource Inflows		N	
E1 - Climate Change	Energy		N	R
E5 - Resource Use & Circular Economy	Resource Outflows		N	
E2 - Pollution	Microplastics		N	
E2 - Pollution	Pollution of Air		N	
S1 - Own Workforce	Working Conditions	Health and Safety	N	R
S4 - Consumers and End-users	Social Inclusion of Consumers and/or End-Users	Access to Products and Services	P	
E1 - Climate Change	Climate Change Mitigation			O

Table 2: Material Topics, DMA 2025 (based on the ESRS adopted in 2023)

Cognizant of the postponement of the Corporate Sustainability Reporting Directive (“CSRD”) and revised reporting thresholds introduced under the European Commission’s Omnibus I legislative package⁷, we have elected to publish this first report on a voluntary basis and focus on three of our highest-ranked material topics: Resource Inflows, Energy, and Resource Outflows.

In addition, we have added the sub-topic “Water” as a reporting area due to its relevance as a focus area in our global Environmental Policy and the results of our stakeholder engagement survey, where both “Water” and “Resource Use & Circular Economy” emerged as important topics for our stakeholders.

While the report focuses on the above environmental topics, we have also included general disclosures relating to our workforce and broader social considerations.

5. PRACTICES, POLICIES, & FUTURE INITIATIVES

5.1 GENERAL

5.1.1 Policies

Guided by our global Environmental Policy, we are committed to conducting our operations in an environmentally responsible manner, with a focus on energy usage, greenhouse gas (“GHG”) emissions, waste generation, and water consumption.

This policy defines the direction for our Environmental Management System, including setting objectives and our approach to identifying and complying with applicable environmental laws and regulations, permits, and other obligations. The policy is approved at the executive level and is made publicly available on our website⁸. Applied’s Corporate Social Responsibility Committee meets regularly to address global sustainability efforts and initiatives.

At the European level, we maintain an ISO 14001 certification that covers our manufacturing, distribution, and sales activities across Europe, and warehousing activities and ethylene oxide (“ETO”) sterilization in our headquarters in the Netherlands. Through our certified EMS, we systematically manage our environmental impact by implementing frameworks and procedures across key environmental topics.

We seek to work with suppliers that demonstrate strong environmental practices across the above-mentioned focus areas. Sustainability considerations are integrated into supplier selection and evaluation processes to

⁵ N=Negative, P=Positive.

⁶ R=Risk; O=Opportunity.

⁷ European Commission, Omnibus I (https://commission.europa.eu/publications/omnibus-i_en).

⁸ Applied Medical, Environmental Policy (https://appliedmedicalus-cdn-prd.azureedge.net/Resources/Sustainability/301769-EN-C%20Applied%20Medical%20Environmental%20Policy_2026.pdf).

support decision-making and supplier engagement. We have a publicly available Supplier Handbook⁹ that outlines our expectations for our suppliers, including environmental considerations.

5.1.2 Targets

Our European environmental targets are defined through our EMS procedures and in alignment with our Environmental Policy.

In 2025, we focused on strengthening our EMS, including our approach to target setting. As a result, long-term targets have been established from 2026 onwards for energy, GHG emissions, and resource use.

The high-level targets listed in the topical sections below are informed by identified environmental impacts, risks, opportunities, and compliance obligations. These are supported by low-level targets at the operational level to establish baselines, improve measurement, and enable further quantification.

The scope aligns with our EMS, covering AME's manufacturing, distribution, and sales activities across Europe, and warehousing activities and ETO sterilization in our European headquarters in the Netherlands. Targets are reviewed periodically by our Senior Management.

5.2 ENERGY

5.2.1 Policies

Our approach to energy use and GHG emissions is guided by our Environmental Policy and EMS. We are committed to managing energy usage and GHG emissions from our facilities, transportation, and other operational activities across operations in Europe. This includes monitoring energy consumption, promoting energy efficiency, and maximizing the use of renewable energy.

5.2.2 Actions and Resources

We demonstrate our commitment to managing energy use and reducing GHG emissions through targeted actions embedded within our EMS.

Energy-Efficient Buildings and Operations

- Our two largest buildings operate under an A+++ energy label based on their energy performance.
- In 2025, 100% of electricity used in our Netherlands headquarters was sourced from renewable energy.
- We utilize solar panels in our Netherlands facilities, with solar generation capacity recorded at 154,562 kilowatt-hours in 2025, equivalent to approximately 3.2% of our electricity consumption during the year.
- We activated peak shaving electric vehicle ("EV") charging stations on-site, which automatically reduce charging capacity when energy consumption is high and resume charging at full capacity when energy consumption is lower.
- Through our EMS, we continue to monitor our energy use, implement other energy-saving measures and procedures, and comply with Energy Efficiency Directive¹⁰ ("EED") requirements.

GHG Emissions Reduction and Initiatives

- Our vertically integrated business model supports reduction of freight-related emissions, by enabling direct shipment of our products to European customers through operations in strategically-located manufacturing headquarters in the Netherlands and product warehouses across Europe.
- In 2025, we continued commissioning on-site sterilization at our Netherlands facility, with the aim of further reducing transport-related emissions.
- We are progressing towards a fully electric vehicle fleet by 2030. In 2025, 100% of new vehicle orders

⁹ Applied Medical, Supplier Handbook (<https://appliedmedicalus-cdn-prd.azureedge.net/Resources/SupplierHandbook.pdf>).

¹⁰ Energy Efficiency Directive (Directive (EU) 2023/1791).

across Europe were electric. We also have on-site EV charging stations on campus that support the electrification of our fleet and encourage broader EV adoption among our team members.

- Our facilities in the Netherlands operate a geothermal system, which in 2025 provided heating and cooling that would have required a conventional fully electric system approximately 2.9 million kWh¹¹ of energy to deliver.
- We apply a form-fitting packaging system for many products and resize our boxes accordingly. In 2025, we launched further box optimization initiatives to enhance transport efficiency.
- For our distribution operations in the United Kingdom and Norway, we developed and maintain Carbon Reduction Plans outlining our emissions profile and reduction approach, in line with applicable public procurement requirements in these markets.

Governance and Data

- We regularly conduct evaluations on new and existing suppliers, assessing and ranking their performance on energy use, greenhouse gas emissions, and other environmental topics. This ranking enables us to monitor alignment with our environmental standards and identify opportunities for improvement across our supplier network. In 2025, we completed a supplier evaluation covering these criteria.
- Our energy efficiency measures are evaluated in periodic audits in line with the EED. In 2025, we completed an internal audit and submitted our Energy-Audit report to the regional competent authority where we reviewed energy pathways within Applied Medical in the Netherlands, evaluating the effectiveness of implemented measures and identifying improvement opportunities.
- In 2025, our EMS went through a successful ISO 14001 external audit, as well as two internal audits.
- Mandatory EMS trainings are provided to team members in Amersfoort, the Netherlands, in addition to role-specific training modules.
- Throughout 2025, we continued to strengthen the quality and reliability of our Scope 1 and 2 emissions data tracking and advanced Scope 3 data collection, including an assessment of relevant categories and reporting boundaries.

5.2.3 Targets

The targets are defined in accordance with the approach described in the Targets section (5.1.2) above. These high-level targets are supported by lower-level operational targets to level to establish baselines, improve measurement, and enable further quantification.

TARGET	TARGET YEAR	2025 PROGRESS
Reduce AME's energy intensity.	2030	Measurement approach under development through supporting operational targets.
Reduce GHG emissions intensity from business trips.	2030	In progress through supporting operational targets, including measurement approach and electrification of leased vehicles, with 100% of new vehicle orders in 2025 being electric.
Reduce GHG emissions intensity from product distribution.	2028	Measurement approach under development through supporting operational targets.

Table 3: Energy and GHG Emissions Targets

5.2.4 Metrics

The metrics presented below cover AME and activities under its operational control, including manufacturing, warehousing, and office activities across Europe.

¹¹ This figure is presented for comparison purposes and does not reflect actual energy consumed by the geothermal system.

The reporting period is the calendar year 2025 and represents the first year of AME's consolidated reporting of energy consumption and mix, as well as Scope 1 and Scope 2 greenhouse gas emissions.

In 2025, we advanced Scope 3 data collection, including assessments of relevant categories and reporting boundaries. We continue to refine our data collection processes and methodologies for completeness and comparability in future reporting.

ENERGY CONSUMPTION AND MIX (MWh)	2025
Total energy consumption	9,937
Total energy consumption from fossil sources	4,847
Fuel consumption from coal and coal products	0
Fuel consumption from crude oil and petroleum products	3,632
Fuel consumption from natural gas	1,065
Fuel consumption from other fossil sources	0
Consumption of purchased or acquired electricity, heat, steam, and cooling from fossil sources	150
Total energy consumption from nuclear sources	114
Total energy consumption from renewable sources	4,822
Total energy production	155
Non-renewable energy production	0
Renewable energy production	155

Table 4: Energy consumption and mix (2025)^{12,13,14,15}

Total energy consumption for the year was 9,937 MWh, of which 50% was renewable energy, 49% was fossil energy, and 1% was nuclear energy. The majority of this consumption occurred at the company's manufacturing and office facilities in the Netherlands headquarters.

GHG EMISSIONS (metric tonnes CO ₂ eq)	2025
Total gross Scope 1 and 2 (market-based)	1,467
Total gross Scope 1 and 2 (location-based)	3,727
Gross Scope 1	1,330
Gross Scope 2 (market-based)	137
Gross Scope 2 (location-based)	2,396
Scope 1 and 2 GHG emissions intensity per EUR million net revenue	
Market-based	5
Location-based	14

Table 5: GHG Emissions Scope 1 and 2 (2025)¹⁶

GHG emissions were calculated in accordance with the Greenhouse Gas Protocol, using actual consumption data obtained from meter readings and supplier records. Emissions from fuel combustion were calculated using a consistent emission factor across operations, while emissions from purchased electricity were calculated using country-specific emission factors from government and government-affiliated sources,

¹² Totals may not sum precisely due to rounding.

¹³ Where the underlying energy source could not be identified, estimates were derived from available grid-mix data.

¹⁴ Energy consumption from leased cars includes both business and private usage as separate data is not currently available.

¹⁵ Energy consumption associated with emergency generators and sprinkler systems were excluded due to related usage being limited and not part of normal business operations.

¹⁶ Totals may not sum precisely due to rounding.

supplemented by publicly available datasets where necessary.

5.3 RESOURCE INFLOWS, RESOURCE OUTFLOWS, AND WASTE

5.3.1 Policies

Our approach to Resource Inflows, Resource Outflows and Waste is guided by our Environmental Policy and EMS. We aim to utilize our resources efficiently and responsibly. We have implemented a waste management system in our facilities following the principles of the European Waste Framework Directive, prioritizing prevention, reusing, separating for recycling, and recovery, while also minimizing waste disposal where possible.

5.3.2 Actions & Resources

We address resource use and waste through procurement, operations, and waste management. Given the single-use nature of our medical surgical devices, our approach includes efforts to reduce material use where possible, while product design is guided by patient safety, regulatory requirements, and available technologies.

Resource Use and Circularity

- We apply a form-fitting packaging system for many products to minimize the amount of packaging material per product. In 2025, we launched further box optimization initiatives to improve packaging efficiency and deliver cost savings.
- In our injection molding operations, a percentage of scrap material is reused in the manufacturing process for certain components¹⁷, while the remainder that cannot be used internally is sold to a third party for recycling.
- We provide instructions for use (“IFUs”) with our products with guidance on safe handling, reflecting regulatory and safety requirements associated with single-use medical devices, where reuse is not permitted.

Waste Management

- We apply a structured waste management approach in our Netherlands facilities, which generates the largest share of our waste in Europe, including separation, handling, storage, and disposal. Waste is separated into designated streams to support reuse, recycling, or recovery where applicable, and to minimize disposal.
- We work with approved waste management vendors to collect and dispose of waste. Controls are in place to classify, label, and store waste, including hazardous waste, and we have procedures to prevent releases to land and water.

Governance and Data

- We regularly conduct evaluations on new and existing suppliers, assessing and ranking their environmental performance, including recycled content, recyclability, durability, and energy performance, as well as prioritizing FSC¹⁸-certified paper-based materials and EU Ecolabel-certified products for applicable product categories. This ranking enables us to monitor alignment with our environmental standards and identify opportunities for improvement across our supplier network. In 2025, we completed a supplier evaluation covering these criteria.
- We monitor our waste generation and packaging weight data, and in 2025 we further developed our approach to estimating total weight data for materials used in manufacturing. Packaging weight data is also used to support our compliance with Extended Producer Responsibility (“EPR”) requirements across EU countries and the United Kingdom, contributing to collective schemes for packaging waste management.
- Mandatory EMS trainings are provided to team members in Amersfoort, the Netherlands, in addition

¹⁷ These components have no patient contact.

¹⁸ Forest Stewardship Council.

to role-specific training modules.

- In 2025, our EMS went through a successful ISO 14001 external audit, as well as two internal audits.

5.3.3 Targets

The targets below are defined in accordance with the approach described in the Targets section (5.1.2) above. High-level targets are supported by lower-level operational targets to establish baselines, improve measurement, and enable further quantification.

TARGET	TARGET YEAR	2025 PROGRESS
Increase sustainably-sourced secondary and tertiary packaging material.	2028	Measurement approach under development through supporting operational targets.
Increase the percentage of evaluated suppliers rated 3 or above ¹⁹ .	2027	Measurement approach under development through supporting operational targets.
Increase the percentage of Recyclable Waste.	2028	Measurement approach under development through supporting operational targets.
Reduce waste generation intensity in AME's facilities.	2030	Measurement approach under development through supporting operational targets.

Table 6: Resource Inflows, Resource Outflows, and Waste Targets (2025)

5.3.4 Metrics

Resource Inflows

Applied Medical's products are mainly composed of plastics, with a smaller proportion of rubber, metals, electric components, and other materials. Packaging materials are primarily paper-based, such as corrugated board and cardboard used in tertiary and secondary packaging, as well as plastics used in primary packaging.

The total weight of key materials of AME in 2025 was **1,106 metric tonnes**. This includes materials received during the reporting year to manufacture our products and packaging, including raw materials from suppliers as well as semi-finished and finished goods received from the parent company in the U.S. This reported total was determined primarily through measured weights, supplemented by estimations for a subset of items where direct weight data was unavailable.

As reflected in the product composition described above, critical and strategic raw materials do not constitute a significant proportion of key materials.

A portion of scrap material is reused for certain components²⁰, and the remainder that cannot be reused internally are sold to a third party for recycling.

Sustainably sourced biological materials primarily consist of FSC Mix certified corrugated board and cardboard used in packaging. No biological materials are used in products.

Resource Outflows

Applied Medical's product portfolio primarily consists of single-use medical devices, designed to support patient safety, infection control, and sterility requirements within clinical settings.

The product design process incorporates durability considerations, alongside performance, reliability, and usability, in accordance with applicable regulatory standards and product-specific requirements. This helps ensure that each device performs as intended throughout its use, supporting consistent clinical performance while reducing the risk of cross-contamination and healthcare-associated infections.

Due to the nature of single-use medical devices, most products are not designed to be repaired or reused following their intended use. This approach aligns with regulatory expectations and infection prevention

¹⁹ This refers to a rating of 3 ("Sufficient") or higher on a supplier evaluation scale of 1 to 5, ranging from "Very Poor" to "Excellent". The evaluation informs material sourcing and addresses broader environmental topics through consideration of suppliers' policies, practices, procedures, reporting, audits, and certifications.

²⁰ These components have no patient contact.

practices in healthcare environments. For products that are not designated as single use, detailed instructions regarding maintenance, cleaning, reprocessing, and applicable lifespan considerations are provided in product IFUs and associated manuals to ensure safe and effective reuse where permitted.

Where possible, we seek to optimize packaging and material selection to support responsible disposal and recycling practices, while continuing to prioritize patient safety and product integrity. However, the recyclability of products and packaging differs between jurisdictions, depending on regulations, waste management infrastructure, and capabilities of third-party waste and recycling providers.

No recycled materials are used in products.

Waste

The metrics presented below cover waste generated through AME's office, warehousing, and manufacturing activities. The largest waste streams in 2025 were general waste and paper and carton waste, with additional streams including food (swill), hazardous, wood, and plastic waste.

TOTAL WASTE BY TREATMENT METHOD (metric tonnes)	2025
Total weight of waste generated	743
Weight diverted from disposal (% of total)	642 (86.3%)
Hazardous waste	38
Preparation for reuse	0
Recycling	7
Other recovery operations	30
Non-hazardous waste	604
Preparation for reuse	0
Recycling	450
Other recovery operations	154
Weight directed to disposal (% of total)	9 (1.3%)
Incineration (Thermal-based)	3
Landfill	7
Other disposal operations	0
Weight for which the final destination is unknown	92 (12.4%)

Table 7: Waste by treatment method (2025)

Where actual waste quantities and treatment information were provided by waste service providers, the data was reported directly. For locations where actual waste quantities or treatment information were unavailable, the data was estimated using information from the waste service providers and the nature of the waste stream.

5.4 WATER

5.4.1 Policies

Our approach to water usage is guided by our Environmental Policy and EMS. We monitor and manage water usage in our facilities, prevent and control the release of pollutants to water sources, and ensure compliance with legal requirements.

5.4.2 Actions and Resources

While not identified as a material topic in our European operations, water remains an area of focus for the organization, and we maintain several practices to support its management.

- At our Netherlands headquarters, we operate a stormwater attenuation and infiltration system that

directs stormwater runoff into the earth as groundwater instead of into the sewer system. This helps prevent sewer overflow and reduces the need for irrigation in the immediate area.

- We implement measures to prevent contamination of water sources, including controls for wastewater and chemical handling.
- We monitor water usage data centrally, with processes in place to identify and address any anomalies.
- Mandatory EMS trainings are provided to all team members in Amersfoort, the Netherlands, in addition to role-specific training modules.
- In 2025, our EMS went through a successful 2025 external audit, and an internal Management Review.

5.4.3 Targets

Water is included as a reporting area due to stakeholder input; however, no specific targets on this topic have been defined due to AME's limited water consumption and the sub-topic not being identified as material.

5.4.4 Metrics

The reported water usage data covers operations in the AME headquarters in the Netherlands. Based on our reporting scope and DMA, water usage at other locations was determined to be immaterial. These other locations are warehouses with water usage limited to sanitary and drinking water use.

WATER USAGE (m ³)	2025
Total water consumption	6,450
Total water consumption in areas with water stress	0
Total water withdrawal	0
Total water discharge	6,450
Total water recycled and reused	0
Total water stored	450

Table 8: Water usage (2025)^{21,22}

Based on the Water exploitation Index plus²³, the Netherlands is not classified to be under water stress. Accordingly, the total consumption in areas with water stress was reported as 0 m³.

²¹ Total water withdrawal is based on meter readings. As direct measurements of water discharge are not available, all withdrawn water is assumed to be discharged.

²² Water consumption is considered negligible due to the nature of the company's operations.

²³ European Environment Agency, Water exploitation Index plus (<https://www.eea.europa.eu/en/datahub/datahubitem-view/4d59470c-b3bd-4b06-9cc0-2515b29f56cc>).

5.5 SOCIAL PILLAR

While this report focuses on the most relevant topics which fall under the environmental pillar, we recognize the importance of operating responsibly and contributing positively to our team members, the communities where we operate, our customers, and end-users of our products.

5.5.1 General Characteristics

During the calendar year 2025, there were 1,037 FTEs employed by AME.

By Type of Employment	
Permanent	1,014 ²⁴
Temporary	23 ²⁵
By Gender	
Female	543
Male	494

Table 9: FTE by employment type and gender (2025)

The employee turnover rate was 14%.

By Country of Employment	
Netherlands	752
Germany	49
France	49
Spain	48
Italy	42
United Kingdom	34
Belgium	12
Austria	7
Switzerland	7
Ireland	6
Norway	6
Poland	6
Portugal	6
Denmark	5
Finland	4
Sweden	4

Table 10: FTE by country (2025)

5.2.1 Responsible Employment and Human Rights

We are committed to maintaining high standards of employment practices across our operations. Through vertical integration, we retain oversight of employment and working conditions within our own facilities. We foster an environment in which individuals of diverse backgrounds are valued, acknowledged, and supported.

We endorse the U.N. Universal Declaration of Human Rights, the U.N. Convention on the Rights of the Child, the U.N. Convention against Corruption, and the International Labor Organization conventions on forced labor, child labor, discrimination, and freedom of association. We have zero tolerance for any action that goes against these conventions both within our operations and from our suppliers. The standards we uphold and the expectations we have of our suppliers are outlined in our Applied Medical Supplier Handbook. In addition, relevant requirements are incorporated into the Terms and Conditions accompanying our purchase orders.

We promote open communication across all levels of the organization and provide multiple channels for team members to raise concerns, whether directly or anonymously.

5.5.2 Health, Safety, and Well-Being

Providing a safe and healthy working environment is a priority across AME. This is supported by our Occupational Health and Safety Policy and implemented through our Health and Safety Management System, through which we monitor workplace risks and comply with applicable occupational health and safety

²⁴ This refers to FTEs on Applied payroll.

²⁵ This refers to FTEs employed through an external agency.

regulations.

We support team members' well-being through health and wellness initiatives, including on-site fitness classes, company sports activities, preventive care programs (such as annual flu vaccinations), and workshops addressing physical, emotional, and financial health.

5.5.3 Learning and Development

We view learning as a continuous process. We offer training and development programs to all team members, including structured e-learning modules, in-person workshops, leadership development programs, tuition reimbursement, and career development pathways for skill development and long-term professional growth.

We also support the education and training of healthcare professionals through Applied-supported courses, clinical training programs, symposiums, and educational resources.

5.5.4 Community Engagement

We are dedicated to supporting the communities where we live and work. We collaborate with nonprofit organizations through financial and in-kind aid, as well as providing structured volunteer opportunities for team members throughout the year.

We provide career development opportunities to refugees and offer facility tours and workshops to local students. We also provide mentorship and hands-on learning experiences for students through internships.

Our community initiatives in 2025 included partnerships with various organizations, including UNICEF, Save The Children, Doctors Without Borders, ABC Amersfoort Foundation, Projecthuis Madiba, and more. Through these efforts, we aim to foster a culture of responsibility and safety, and strengthen our communities.

6. APPENDICES

AME VSME B2 Disclosure	Do you have existing sustainability practices/ policies/ future initiatives that address the sustainability issue?	Are they publicly available?	Do the policies have any targets?
Climate Change	Yes	Yes	Yes
Pollution	Yes	No	No
Water and Marine Resources	Yes	Yes	No
Biodiversity and Ecosystems	Yes	No	No
Circular Economy	Yes	Yes	Yes
Own Workforce	Yes	Yes	No
Workers in the Value Chain	Yes	Yes	No
Affected Communities	Yes	Yes	No
Consumers and End-users	Yes	Yes	No

Table 11: AME VSME B2 Disclosure (2025)

AME VSME Disclosure Index			
Basic Module		Section	Reason not Reported
B1	Basis for preparation	2	N/A
B2	Practices, policies and future initiatives for transitioning towards a more sustainable economy	5, 6 - Table 12	N/A
B3	Energy and GHG emissions	5.2.4	N/A
B4	Pollution of air, water and soil	Not reported	4.3
B5	Biodiversity	Not reported	4.3
B6	Water	5.4.4	N/A
B7	Resource use, circular economy and waste management	5.3.4	N/A
B8	Workforce - General characteristics	5.5.1	N/A
B9	Workforce - Health and safety	Not reported	4.3
B10	Workforce - Remuneration, collective bargaining and training	Not reported	4.3
B11	Convictions and fines for corruption and bribery	Not reported	4.3

Table 12: AME VSME Disclosure Index (2025)