

Forward-Looking Statements

This presentation contains "forward-looking statements" as defined by the Private Securities Litigation Reform Act of 1995. We caution investors that forward-looking statements are based on management's expectations and assumptions as of the date of this presentation, and involve substantial risks and uncertainties that could cause our clinical development programs, future results, performance or achievements to differ significantly from those expressed or implied by the forward-looking statements. These risks and uncertainties include, but are not limited to, those associated with: risks associated with achieving the full-year 2021 net product sales guidance for the CINV franchise; the timing of the commercial launch of ZYNRELEF in the U.S.; the timing of the commercial launch of ZYNRELEF in Europe; the potential market opportunity for ZYNRELEF in the US and Europe; the timing of Health Canada's NDS review process for HTX-011; whether Health Canada issues a Notice of Compliance for the NDS for HTX-011; the timing and results of studies for HTX-011, the HTX-034 development program, and the HTX-019 development program; the expected future balances of Heron's cash, cash equivalents and short-term investments; the expected duration over which Heron's cash, cash equivalents and short-term investments balances will fund its operations; the extent of the impact of the ongoing Coronavirus Disease 2019 (COVID-19) pandemic on our business; and other risks and uncertainties identified in the Company's filings with the Securities and Exchange Commission. Forward-looking statements reflect our analysis only on their stated date, and we take no obligation to update or revise these statements except as may be required by law.



Heron Pipeline

SUSTOL®
(granisetron)
extended-release injection

CINVANTI®
(aprepitant)
injectable emulsion

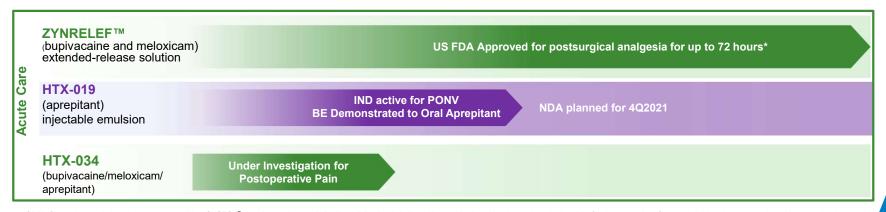
CLINICAL

NDA

APPROVED

US FDA Approved for CINV Prevention*

US FDA Approved for CINV Prevention*



CINV: Chemotherapy-induced nausea and vomiting. SUSTOL® (granisetron) extended-release injection is indicated in combination with other antiemetics in adults for the prevention of acute and delayed nausea and vomiting associated with initial and repeat courses of moderately emetogenic chemotherapy (MEC) or anthracycline and cyclophosphamide (AC) combination chemotherapy regimens. CINVANTI® (aprepitant) injectable emulsion, in combination with other antiemetic agentsis indicated in adults for the prevention of acute and delayed nausea and vomiting associated with initial and repeat courses of highly emetogenic cancer chemotherapy (HEC) including high-dose cisplatin as a single-dose regimen, delayed nausea and vomiting associated with initial and repeat courses of MEC as a 3-day regimen. CINVANTI has not been studied for treatment of established nausea and vomiting. ZYRNELEF (bupivacaine and meloxicam) extended-release solution is indicated in adults for soft tissue or periarticular instillation to produce postsurgical analgesia for up to 72 hours after bunionectomy, open inguinal herniorrhaphy, and total knee arthroplasty. Safety and efficacy have not been established in highly vascular surgeries, such as intrathoracic, large multilevel spinal, and head and neck procedures.



Why Approval of ZYNRELEF is so Important Postoperative Opioids Can Be a Doorway to Addiction

More than 50 million

surgical procedures happen in the United States.¹

67% of patients

filled an opioid prescription between 30 days before through 14 days after surgery.2*

> 2 million Americans

may become persistent opioid users annually after surgery. 1

In 2020, drug overdoses were linked to more than

90,000 deaths

the highest number ever recorded in a single year.³

In addition, most patients take fewer opioids than the amount prescribed after surgery, resulting in excess opioid pills that are accessible to others.⁴



80%

of patients report unused opioid tablets⁴



Up to **77%**

of opioid pills remain inside the home in unsecured locations⁴



51%

of nonmedical users of opioids received them from friends and family⁵



More than \$23.4 billion

in annual healthcare costs associated with persistent opioid users can be attributed to postoperative pain management.^{1,6}

References: 1. Brummett CM, Waljee JF, Gossling J, et al. New Persistent Opicid Use After Minor and Major Surgicial Procedures in US Adults [published correction appears in JAMA Surg. 2019 Mar 1;154(3):272]. JAMA Surg. 2017;152(6):e170504.
doi:10.1001/jamasurg.2017.0504. 2. Santaca Kib, Pt. Hu HB, Brummett CM, et al. New persistent opicid use among older patients following surgery. A Medicare ciaims analysis. Surgery. 2002;167(4):732-742. doi:10.1016/js.urg.2019.04.016.3. NICH, National Vital Statistics System. Estimates for 2002 are based on provisional data. Estimates for 2015-2019 are based on final data (available from: https://www.ocis.gov/orb.shr/sws/mortality_nuble_use_data.htm). 4. Bicket MC. Long JJ. Pronovost PJ. Wordsonder GC, Willing Comparison Control of Statistics and Quality. Substance Abuse and Mental Health Services Administration. Center for Behavioral Health Statistics and Quality. Substance Abuse and Mental Health Services Administration. Rockville, MD: 2019. Key Substance and Mental Health Services Administration. Policy of Statistics and Quality. Substance Abuse and Mental Health Services Administration. Policy of Statistics and Quality. Substance Abuse and Mental Health Services Administration. Center of Behavioral Health Statistics and Quality. Substance Abuse and Mental Health Services Administration. Policy of Statistics and Quality. Substance Abuse and Mental Health Services Administration. Policy of Statistics and Quality. Substance Abuse and Mental Health Services Administration. Rockville, MD: 2019. Key Substance Base and Mental Health Statistics. Results from the 2018 National Survey on Drug Use and Mental Health Statistics. Results from the 2018 National Survey on Drug Use and Mental Health Statistics. Results from the 2018 National Survey on Drug Use and Statistics. Accessed April 1999. 2021. 6. Burmmett CM. Evanual Statistics. Accessed April 1999. 2021. 6. Burmmett CM. Evanual Statistics. Accessed April



^{*} This was determined using a 20% national sample of Medicare claims among beneficiaries aged 65 and older with Medicare Part D claims who underwent a major or minor surgical procedure between January 1, 2009 and June 30, 2015.

ZYNRELEF Approved Indications and Limitations of Use

Indication

 ZYNRELEF is indicated in adults for soft tissue or periarticular instillation to produce postsurgical analgesia for up to 72 hours after bunionectomy, open inguinal herniorrhaphy, and total knee arthroplasty.

Limitations of Use

 Safety and efficacy have not been established in highly vascular surgeries, such as intrathoracic, large multilevel spinal, and head and neck procedures.



Unique Labeling Attributes for ZYNRELEF Extended-Release Solution

- ZYNRELEF is first modified-release local anesthetic to be classified by FDA as an "extended-release" product
 - ZYNRELEF only product to demonstrate superiority to immediate release bupivacaine HCL for 72 hours
- 72-hour duration in the indication statement
 - Registrational studies in clinical data section in indicated procedures include pain curves showing 72-hour duration of activity and superiority to standard of care
- Focus is on opioid-free results in clinical data section as both statistically superior and clinically meaningful
- Standard NSAID class warnings included, with modifications due to single-dose local application allowing for additional NSAID use in multimodal analgesia (MMA) with monitoring



FDA Approach to Modified-Release Local Anesthetics Changed Following Withdrawal of Guidance on Analgesic Indications

- Rather than approving a broad indication based on 1 soft tissue and 1 bony surgical model, FDA approved other modified-release local anesthetics for specific indications based on positive randomized, controlled trials in specific surgical procedures starting in 2020.
- Heron sought advice from FDA throughout development to discuss requirements for a broad label for ZYNRELEF, the only modified-release local anesthetic to demonstrate superiority to bupivacaine solution
- Based on these discussions with FDA, Heron believed that the studies submitted in the ZYNRELEF NDA would be sufficient to obtain a broad indication
- One week prior to PDUFA, FDA informed Heron more PK and safety data would be required to support additional surgical procedures
 - Heron has multiple studies in process intended to support expanded labelling







Executive Summary: Go-to-Market Strategy

Vision

ZYNRELEF is the foundation of acute postoperative pain management

Strategy

Establish ZYNRELEF as the market leader in indicated launch targets by replacing other local anesthetics, creating a positive user experience and strong base for expansion

Strategic Imperatives

- Establish ZYNRELEF as a new class and best choice for postoperative pain
- Raise the bar with ZYNRELEF's superior value proposition to expedite access
- 3 Highly focused targeting strategy to convert usage and accelerate sales



Strategic Imperative #1

Establish ZYNRELEF as a new class and best choice for postoperative pain



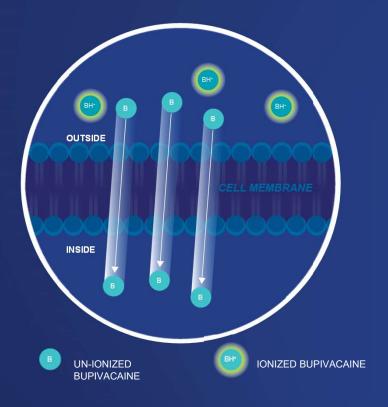


The first and only extended-release, dual-acting local anesthetic (DALA), keeping more patients out of severe pain and opioid-free for 72 hours after surgery¹⁻³

References: 1. ZYNRELEF [package insert]. San Diego, CA: Heron Therapeutics Inc; 2021. 2. Viscusi E, Gimbel JS, Pollack RA, et al. Reg Anesth Pain Med. 2019;44(7):700-706. 3. Viscusi E, Minkowitz H, Winkle P, et al. Hernia. 2019;23(6):1071-1080.



Differentiating ZYNRELEF and Establishing A Reason to Believe for Clinicians: A Novel Mechanism of Action



ZYNRELEF is the first and only extended-release dual-acting local anesthetic (DALA).¹⁻³

The synergistic combination of bupivacaine with low-dose meloxicam is designed to reduce local inflammation, thereby normalizing the pH and allowing considerably more bupivacaine to penetrate the cell membrane.^{1,4}

Market Research⁵

- The majority of physicians found ZYNRELEF's novel mechanism of action to be clinically relevant
- It was viewed as a valuable differentiator when compared to Exparel, which does not target the local inflammatory process

References: 1. ZYNRELEF [package insert]. San Diego, CA: Heron Therapeutics Inc; 2021. 2. Viscusi E, Gimbel JS, Pollack RA, et al. Reg Anesth Pain Med. 2019;44(7):700-706.
3. Viscusi E, Minkowitz H, Winkle P, et al. Hernia. 2019;23(6):1071-1080. 4. Ottoboni T, Quart B, Pawasauskas J, et al. Reg Anesth Pain Med. 2020;45(2):117-123. 5. LSSG Mechanic, 2018



ZYNRELEF Offers Superior Clinical Value Over Bupivacaine, Not Demonstrated with Exparel

Exparel Share is an early opportunity for ZYNRELEF

- > \$400M in sales
- Exparel has never demonstrated headto-head superiority to bupivacaine
- Exparel has efficacy challenges beyond 24 hours
- Surveyed pharmacy directors state that they would provide better access to ZYNRELEF than to Exparel⁶

	ZYNRELEF	Exparel
Extended-Release Local Anesthetic ¹	✓	×
Overcomes Challenges of Inflammation at Surgical Site ²	✓	×
Pain Reduction Through 72 Hours vs Bupivacaine ^{1,3-5}	✓	×
Superior Pain Reduction vs Bupivacaine ^{1,3,4}	✓	×
Greater Reduction in Severe Pain vs Bupivacaine ³⁻⁴	✓	×
Significant Increase in Opioid- Free Patients vs Bupivacaine ^{1,3,4}	/	×
Greater Decrease of Opioid- Related AEs vs Bupivacaine ³	✓	×
Needle-free Application ¹	✓	X

References: 1. ZYNRELEF [package insert]. San Diego, CA: Heron Therapeutics Inc; 2021. 2. Ottoboni T, Quart B, Pawasauskas J, et al. Reg Anesth Pain Med. 2020;45(2):117-123. 3. Viscusi E, Minkowitz H, Winkle P, et al. Hernia. 2019;23(6):1071-1080. 4. Viscusi E, Gimbel JS, Pollack RA, et al. Reg Anesth Pain Med. 2019;44(7):700-706. 5. Lachiewicz PF, Lee G-C, Pollak R, et al. J Arthroplasty. 2020;35(10):2843-2851. 6. DRG Pharmacy Director Surveys.



An Extensive Body of Peer-reviewed Data will be Available for Launch

MANUSCRIPTS

EPOCH 1 (301), RAPM—May 2019

EPOCH 2 (302), *Hernia*—Aug 2019

MOA (Inflammation and PK/PD), RAPM—Jan 2020

TKA (209), JoA—Oct 2020

Truven HEOR-opioid naive, JMCP-July 2019

Hernia (215), Surgery – Sept 2020

Bunion (218), JAPMA—Jan 2021

Truven HEOR, persistent users, *JMCP*—Feb 2021

POSTERS & ABSTRACTS

Bunion (202, 208, 301, 218) **Accepted for 2021 Congresses:**

HOPE Hernia 1 Bone Healing

Hernia (215, 302) Safety with NSAID containing MMA

TKA (209, 306) Safety with NSAID containing MMA

MOA PK/PD in the elderly

Truven HEOR HOPE Part 1 and 2 Combined

502/PK

211 (Augmentation Mammoplasty)

220 (PK in breast milk and plasma concentrations)

Healthagen TKA/THA opioid use

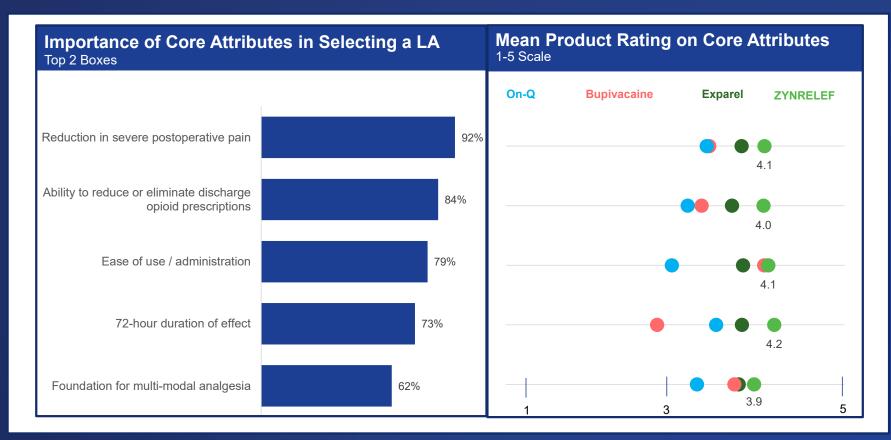
All Studies—Lack of LAST (C_{max})

All Studies—Max Dose and Release Rates

HOPE Algorithm, HOPE Regimen and Patient Satisfaction



ZYNRELEF Is Well Positioned on Core Drivers to Create Fast Access and Early Uptake



Source: Company-sponsored ATU Study July 2020 – Survey of 386 surgeons, anesthesiologists, pharmacists, NP/Pas of potential use of an approved product with the attributes for which ZYRELEF was developed



Targeting ~2.1M Procedures at Launch With Unprecedented Data Supporting Fast Uptake with Influential Specialties

Indicated Launch Targets					
Inguinal Hernia 617,100	Bunion 481,300	TKA 1,051,000			
Close	ly-Related Procedures Without F	Promotion			
Other Hernia 831,000	Other Foot & Ankle THA 630,000				
	Potential Combined Opportunity				
Total 1,448,100	Total 679,200	Total 1,681,000			

- Orthopedic and general surgeons account for 10.6M procedures or 76% of the 14M high value market procedures
- Orthopedic and general surgeons account for 82% of Exparel market utilization
- Orthopedic surgeons are heavy influencers (P&T, new drugs, profitability) across all settings of care



\$91M of Exparel 2019 Usage was in Our 3 Indicated Procedures

Procedure	Exparel Share	Procedure Volume	Exparel Annual WAC
TKA	25%	263,920	\$78M
Hernia	8%	23,212	\$7M
Bunion	4%	20,087	\$6M
Total Launch	17%	307,219	\$91M



Strategic Imperative #2

Raise the bar with ZYNRELEF's superior value proposition to expedite access



ZYNRELEF's Unprecedented Value Proposition

ZYNRELEF Go-to-Market Strategy Comparison

	ZYNRELEF	Exparel
Lower Acquisition and Average Cost to Support Broad Access	✓	×
340B Pricing	\checkmark	×
Pass-Through Status: Separate Reimbursement in HOPD*	✓	×
Positive Net Cost Recovery	✓	
Full-Line Wholesaler Distribution	\checkmark	×
GPO Contracting	✓	×

*Medicare Reimbursement only, pass-through status is for 3 years. **GPO** = Group Purchasing Organization. **HOPD** = Hospital Outpatient Department.



ZYNRELEF Reimbursement & Pricing Creates Economic Benefits Across All Settings of Care

Medicare: ZYNRELEF Is Reimbursed Separately in HOPD and ASC

Setting of Care	At Launch C9399	3-Year Pass-Through ^a Product-specific C-code /J-code
Inpatient	Diagnosis-Related G	roup (DRG) Payment
HOPD	95% of AWP	ASP + 6% ^c
HOPD (304B)	95% of AWP	ASP + 6% ^c
ASC	95% of AWP	ASP + 6%c,d

Heron will apply for a C-Code with expected grant date of October 1, 2021

Commercial Reimbursement Varies by Payer

- Heron will apply for a J-code to facilitate separate reimbursement with expected grant date of January 1, 2022
- Like all new products, until CMS assigns a permanent code, commercial payers will require a miscellaneous code (J3490 or C9399) for ZYNRELEF
- Heron Connect helps customers navigate coding and reimbursement for ZYNRELEF

HOPD: hospital outpatient department. AWP: average wholesale price. ASP: average selling price. ASC: ambulatory surgical center. WAC: wholesale acquisition cost.



a. Heron will apply for transitional pass-through status for ZYNRELEF. Typically, pass-through status is for 3 years. b. Exparel (bupivacaine liposome injectable suspension) is a trademark of Pacira Pharmaceuticals, Inc. c. ZYNRELEF will be reimbursed at WAC + 3% until ASP is established. d. Effective January 1, 2019, ASCs are reimbursed at ASP + 6% for non-opioid postoperative pain management drugs, like ZYNRELEF, when administered during a surgical procedure.

ZYNRELEF's Significant Economic Benefits Designed to Support Rapid Share Conversion and Broad Access

ZYNRELEF	WAC	340B	Exparel	WAC	340B
400 mg/12 mg	\$267.50	\$203.57	266 mg (20 mL)	\$344.20	\$344.20
200 mg/6 mg	\$135.50	\$103.12	133 mg (10 mL)	\$189.37	\$189.37

ZYNRELEF Savings vs Exparel				
WAC \$/unit	WAC %	340B \$/unit	340B %	
~ \$77	22%	~\$141	41%	
~ \$54	28%	~\$86	46%	

Medicare NCR By Site of Care**

	NCR 340B	NCR HOPD	ASC
ZYNRELEF 400 mg/12 mg	\$71.53	\$10.37	ASP +6%
Exparel 266 mg	(\$344.20)	(\$344.20)	ASP +6%
ZYNRELEF 200 mg/6 mg	\$34.50	\$3.45	ASP +6%
Exparel 133 mg	(\$189.37)	(\$189.37)	ASP + 6%

ZYNRELEF Economic Benefit vs. Exparel*

- 340B accounts: >\$415 (400 mg to 266 mg)
 and >\$223 (200 mg to 133 mg)
- HOPD accounts: >\$354 (400 mg to 266 mg)
 and >\$192 (200 mg to 133 mg)
- Research has shown all customer segments were more sensitive to and favored acquisition cost over reimbursement**

Does not include additional cost of bupivacaine to admix with Exparel to achieve efficacy



^{*}Comparing WAC acquisition cost to NCR reimbursement under Medicare/Exparel NCR assumes ASCs purchasing at WAC. †Medicare NCRs are shown based on estimated ASP reimbursement for ZYNRELEF and Exparel Q2'21 published ASP reimbursement. WAC: wholesale acquisition cost. NCR: net cost recovery. HOPD: hospital outpatient department. ASC: ambulatory surgical center. **DRG Research Pricing Research 2018 and Mock P&T Research 2019

Ease of Use and Implementation

The needle-free application¹

- Avoids risks of inadvertent venous punctures and eliminates accidental needle sticks with local anesthetics¹
- Eliminates the need for up to 120 injections (as in total knee arthroplasty)² and the time needed for aspiration and application

No specialized training or certification required to administer ZYNRELEF via needle-free application¹

Launching with 2 SKUs for different surgery requirements¹

- Reducing cost per procedure
- Minimizing waste

Room temperature storage^{1,3}

Kits fit standard OR medication carts (eg, Pyxis™) and include all components



400 mg bupivacaine 12 mg meloxicam 20-mL vial



200 mg bupivacaine 6 mg meloxicam 10-mL vial

Note: Kit components include single-dose glass vial, Luer lock syringe(s), vented vial spike, Luer lock applicator(s), and tip cap(s). **SKU**: stock keeping unit.

References: 1. ZYNRELEF [instructions for use]. San Diego, CA: Heron Therapeutics Inc; 2021. 2. Mont MA, Beaver WB, Dysart SH, et al. *J Arthroplasty*. 2018;33(1):90-96. 3. ZYNRELEF [package insert]. San Diego, CA: Heron Therapeutics Inc; 2021.



Strategic Imperative #3

Highly focused targeting strategy to convert usage and accelerate sales



High Performing and Focused Organization: Established Platform With Experienced Teams in Place

We are prepared for the launch of ZYNRELEF. Our critical teams are already in place, with extensive experience in successful hospital launches.



Existing Platform Advantages

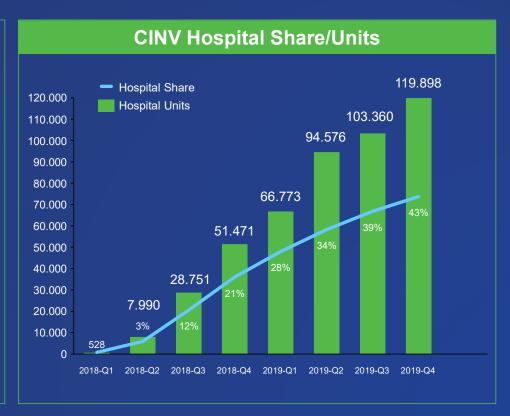
- Strong KOL relationships
- Successful hospital and Pain Management launch experience
- IDN/hospital/ASC expertise and relationships
- Reimbursement infrastructure in place
- GPO contracts, Full-line wholesaler agreements and 3PL in place
- 89 New Hospital Sales Reps
 - P&T Experience Pain Experience
 - OR Experience
 Pull-Through Experience



A Proven Track Record of Hospital Launch Success

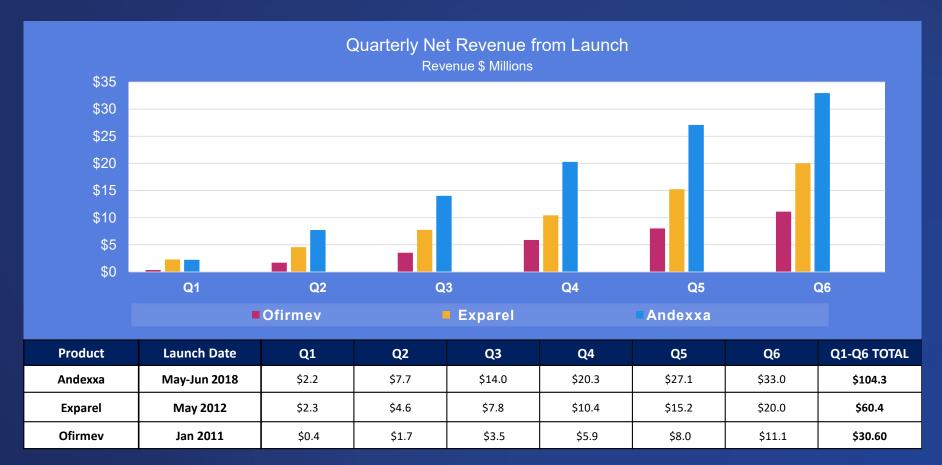
- Heron launched CINVANTI in January 2018
- In a very short time period, we quickly achieved significant market share
- Flawless execution:
 - Superior pricing and contracting
 - Providing 340B discount
 - Differentiated product attributes
 - Rapid formulary adoption
 - Accelerated account pull-through
 - Trade and reimbursement expertise

We will leverage the success and experience gained from CINVANTI as we enter the postoperative pain management landscape with ZYNRELEF.





Comparison of Successful Hospital Launches



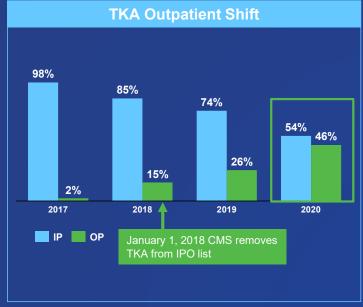
Source: Net product revenue & launch dates based on SEC filings



Outpatient Growth is Anticipated to Accelerate Over the Next 3 Years

- CMS will eliminate the Inpatient Procedure Only (IPO) list over 3 years starting in CY 2021
- CMS has expanded the ASC-Covered Procedures List including Total Hip Arthroplasty
- CMS has eliminated their exclusion criteria leaving the determination of appropriate site of care to the physician





Reference: Surgical procedure volume data, 2017-2020. New York, NY: LexisNexis; 2021



ZYNRELEF Competitive Position Across Settings of Care



~14M High Value Market Procedures¹

Hospital Inpatient 46% (6.5M procedures)

- Bundled in DRG
- 57% (3.7M) of inpatient procedures are done in 340B hospitals



Hospital Outpatient 39% (5.4M procedures)

- 17% (0.9M) have Medicare reimbursement (3-year pass-through)
- 58% (3.1M) eligible for 340B discount
- Multiple SKUs lower average costs



Ambulatory Surgical Centers 15% (2.1M procedures)

- 18% (0.4M) eligible for Medicare reimbursement at ASP + 6%
- Multiple SKUs lower average costs

OVERALL TOTAL

- ZYNRELEF has lower acquisition cost benefit versus Exparel
- ZYNRELEF will have HOPD reimbursement – 3-year pass-through
- ZYNRELEF will offer 340B pricing

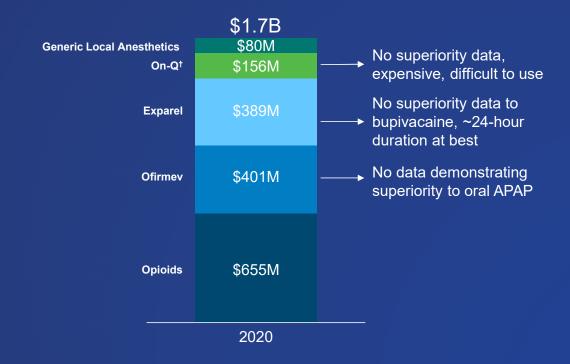
54% of the opportunity lends itself to favorable reimbursement and access

76% of ~2.1M indicated launch procedures opportunity lends itself to favorable reimbursement and access



Branded Product Utilization and Spending is ~\$1B Despite Limitations of Current Products

Units	2020	YOY%
Local Anesthetics	16.8M	12%
Exparel	1.3M	-4%
Ofirmev*	8.5M	-23%
Opioids	151.9M	-2%
TOTAL	178.4M	-2%





^{*}Ofirmev sales decline with generic entries.

[†]On-Q sales are estimated at ~\$150M (down mid-single digits) 2019. **Reference:** SHA Symphony Health – FY2019-2020.

58% of Prioritized Target Accounts are Fast Moving

\$742M

Total Hospital & ASC
Branded Annual WAC*

\$321M

Green/Yellow Branded Annual WAC* \$549M

Targeted Hospital & ASC Branded WAC*

	Accts	340B %	high value market Procedures	Indicated Launch Procedures	Branded Utilization
Hospitals	705	53%		1.2M	\$309M
ASC	398	0%	414K	144K	\$13M



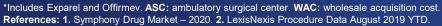
0-3 Months

When will the account order post commercial availability of ZYNRELEF



4-8 Months

When will the account order post commercial availability of ZYNRELEF





Heron Is Positioned to Execute a Blockbuster Launch for ZYNRELEF



Proven track record with hospital launch success



Existing platform and highly experienced team to execute launch



Shaped market on significant unmet need and opportunity



Unprecedented clinical and customer value proposition, with significant cost savings



Highly focused go-to-market launch strategy to accelerate sales



Important Safety Information for Patients

Important Safety Information

ZYNRELEF contains an NSAID (non-steroidal anti-inflammatory drug), a type of medicine which:

- can increase the risk of a heart attack or stroke that can lead to death. This risk increases with higher doses and longer use of an NSAID.
- cannot be used during heart bypass surgery
- can increase the risk of gastrointestinal bleeding, ulcers, and tears.

ZYNRELEF should also not be used:

- if you are allergic to any components of ZYNRELEF, aspirin or other NSAIDs (such as ibuprofen or naproxen), or have had an asthma attack, hives, or other allergic reaction after taking any of these medicines.
- as a paracervical block, during childbirth.



Important Safety Information for Patients (cont)

The most common side effects of ZYNRELEF are constipation, vomiting, and headache.

The medicines in ZYNRELEF (a local anesthetic and an NSAID) can affect the nervous and cardiovascular system; may reduce the effects of some blood pressure medications; should be avoided if you have severe heart failure; may cause liver or kidney problems, a rare blood disorder or life-threatening skin or allergic reactions; may harm your unborn baby if received at 20 weeks of pregnancy or later; and may cause low red blood cells (anemia).

Tell your healthcare provider about all your medical conditions and about all the medicines you take including prescription or over-the-counter medicines, vitamins, or herbal supplements to discuss if ZYNRELEF is right for you.

Talk to your healthcare provider for medical advice about side effects. Report side effects to Heron at 1-844-437-6611 or to FDA at 1-800-FDA-1088 or www.fda.gov/medwatch.

The information provided here is not comprehensive.

Please see full Prescribing Information, including Boxed Warning.



Financial Summary

Heron expects that its cash, cash equivalents and short-term investments of \$166.5 million as of March 31, 2021 will be sufficient to fund its operations into 2022.

Summary Statement of Operations and Net Cash Used in Operations (In thousands, except per share amounts)	Three Months Ended March 31, 2021
Net product sales	\$ 20,018
Operating expenses ¹	72,132
Other income (expense)	(500)
Net loss ¹	\$ (52,614)
Net loss per share ²	\$ (0.58)
Net cash used in operations	\$ (41,938)
Condensed Balance Sheet Data (In thousands)	March 31, 2021
Cash, cash equivalents and short-term investments	\$ 166,466
Accounts receivable, net	\$ 38,525
Total assets	\$ 310,932
Total stockholders' equity	\$ 196,225

Common shares outstanding as of March 31, 2021 totaled 91.4 million.



¹ Includes \$11.5 million of non-cash, stock-based compensation expense for the three months ended March 31, 2021.

² Based on 91.4 million weighted-average common shares outstanding for the three months ended March 31, 2021.