BIOMIMETIC THERAPEUTICS, INC. Form 425 November 27, 2012

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Subject Company: BioMimetic Therapeutics, Inc.

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This filing relates to the proposed acquisition by Wright Medical Group, Inc., a Delaware corporation (Wright), of BioMimetic Therapeutics, Inc., a Delaware corporation (BioMimetic), pursuant to the terms of an Agreement and Plan of Merger, dated as of November 19, 2012, by and among Wright, BioMimetic and Wright s direct wholly owned merger subsidiaries, Achilles Merger Subsidiary, Inc., a Delaware corporation and Achilles Acquisition Subsidiary, LLC, a Delaware limited liability company.

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NOVEMBER 27, 2012 / 3:30PM, WMGI - Wright Medical Group, Inc. at Piper Jaffray Healthcare Conference

CORPORATE PARTICIPANTS

Bob Palmisano Wright Medical Group, Inc. - President, CEO

Lance Berry Wright Medical Group, Inc. - SVP, CFO

CONFERENCE CALL PARTICIPANTS

Matt Miksic Piper Jaffray - Analyst

PRESENTATION

Matt Miksic - Piper Jaffray - Analyst

Why don t we get started? It is the bottom of the hour here. My name is Matt Miksic from Piper Jaffray. Very pleased to have with us again this year Wright Medical, Lance Berry, Bob Palmisano and Julie Tracy.

So I guess the hot topic, given last week s events, what we should probably talk about first is BioMimetic. So maybe can you talk a little bit about the process criteria, rationale that got you to this opportunity? I think we know from your public comments over the past nine to 12 months that we should have been expecting an investment in biologics as part of your multiyear strategy to build out extremities in biologics. But specifically, how did you get to BioMimetic?

Bob Palmisano - Wright Medical Group, Inc. - President, CEO

Thanks, Matt, and thanks for inviting us. I don t think anybody should be surprised that we made an acquisition in the biologics area. We ve been talking about that for some time as part of our strategy.

Wright Medical has been tracking BioMimetic for several years, quite frankly, and has had a lot of interactions with the company over a period of time. I first met with them about a year ago, shortly after I joined Wright Medical, and really have been very interested in pursuing that company, that technology. And what may be a little bit worth some discussion at least is why do that now, at this point, as opposed to waiting. Because this is a pre-approval acquisition, and I think that deserves a little bit of conversation.

We thought that this is this company is right in the core of what we do every day at Wright Medical. So we have a lot of internal expertise around biologics and these kinds of products. And we also certainly did get outside assistance in evaluating this, and felt that the ideal time for us to do this acquisition was now as opposed to post-approval. And the reason for that is we felt very confident about the submission and the supplemental submission that the company made. This is, again, right in the core of what we do. And we actually felt that the supplemental submission made this was even stronger than what we originally that was in the original submission, of which there were several questions asked by the FDA.

So we got really comfortable around where they were and how they responded in such a robust and thorough manner to the questions raised by the FDA, and therefore, decided that it was the right time for us to pursue this, rather than waiting and taking all the risk out of it, because there is always risk when you are doing something pre-approval to after. Because we felt really comfortable, really good about the responses that the company made.

I also think it was the right time for BioMimetics in terms of that they wanted to do share some of the risk, but they also were faced with how they were going to refinance the company going forward, and this made sense for them rather than go out and do a financing until post-approval. So I think all in all, the timing it is the right company at the right time at the right price, although I ll stipulate it was expensive, it is expensive, and there is some risk to it.

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Matt Miksic - Piper Jaffray - Analyst

And we would agree. We don t follow the company, but we have followed them from a distance for a number of years, and clearly, a very promising clinical data behind this product.

But just to play Devil s Advocate, I guess stepping back and looking at the things that you could have done on biologics, you ve got a leadership position in foot and ankle, you ve got a great draw from your implant business as it is today. Why not go with something, Matt not to diminish your enthusiasm and the promise of Augment but why not go with something that is sort of good enough to get that business with the current implant position in the market that you have?

Bob Palmisano - Wright Medical Group, Inc. - President, CEO

We are in this for the long term, in that we want to have a business that in total, Wright Medical, when you consider all the aspects of Wright Medical, is a growth company and a high operating margin company. And that we wouldn t get that solely from anything else that we thought that was available. You could get some things that give you some size, but are limited in their growth and also would limit your margins.

The best way to retain our objectives, we felt, was to get a highly-differentiated product into our portfolio, one that we could then leverage our foot and ankle direct foot and ankle salesforce that we now have, and that would then produce superior margins, superior growth. And so we look at this product as having a market size of about \$300 million, when you consider the fusion as well as the hindfoot market. And a very attractive not only gross margin aspect to it, but also attractive from a capital intensity business.

So I think that all those things added together, considering everything that was available and there were things available there still might be other things that we may do in the future but right now is to get this asset, go through the process of getting it approved, get it implemented into our organization, I think, gives us the best chance of being a Company that has a growth profile and a high operating margin profile, which is all that we are after.

Matt Miksic - Piper Jaffray - Analyst

Okay, so one of the things that you wouldn t have gotten with sort of a pretty good, but not market-leading, recombinant product is not the same kind of margin accretion, for starters.

Bob Palmisano - Wright Medical Group, Inc. - President, CEO

That s exactly right.

Matt Miksic - Piper Jaffray - Analyst

And a number of other things we can get into, if we have time. Maybe just to frame it, for those folks not totally familiar with what this product can achieve, is the standard of care is maybe what is the standard of care today. And a couple of quick points as to why Augment could be potentially so much better.

Bob Palmisano - Wright Medical Group, Inc. - President, CEO

Well, autograft is used is pretty much the standard of care, which is somewhat limited in the way you can use it. Whereas Augment is both soft tissue and bone, which is a big advantage, specifically indicated for ankle fusions and hindfoot, which is really the strength of where we are. And it performs well, we think.

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The other big product in the market is INFUSE, Medtronic s INFUSE, which has been on the market now for about 10 years, and grows bone. It will grow and perhaps in some instances grows a lot of bone, which this product does not. This product really just increases the attraction of cells, it stimulates cells and it increases flow, blood flow, that enhances healing. So it has all the kind of attributes that we feel are very, very attractive from a clinical point of view, and I think once introduced into the market should be able to grow significantly grow significant share against the INFUSE or the other products that are out there.

Matt Miksic - Piper Jaffray - Analyst

Okay. And of course, one of the benefits of not using autograft is the donor site [mobility] and you don t have to do two operations basically to get the graphs that you need (multiple speakers).

Bob Palmisano - Wright Medical Group, Inc. - President, CEO

That s exactly right.

Matt Miksic - Piper Jaffray - Analyst

Got it. We could spend a lot of time talking about this. Maybe just the final thing on margins and R&D spend downstream. So you ve got, I guess you could say, a fair amount of the R&D investment for the hindfoot and ankle fusion indication behind you, where hopefully, if you are right, getting close to the end of this pathway. How should we think about the spend going forward? How quickly would you go after other indications over the next couple of years?

Bob Palmisano - Wright Medical Group, Inc. - President, CEO

We are primarily concerned about getting Augment approved. This is a platform technology, though, and there are other products in the pipeline. And we will and that our theory of this acquisition is to pretty much leave it alone as best we can. They know the products, they know they are deep into the approval process.

And we will continue the spending on the pipeline, probably at the same levels that current management is spending at, which is not nearly as significant as it is towards getting Augment approved. So I think we will just continue as it is. When we there is about a year to 18 months of spend that will be covered by the cash that comes over in the acquisition from BMTI. So I think that we intend to continue down the path that they are currently on.

Matt Miksic - Piper Jaffray - Analyst

And last thing on this, and it maybe is a harder question for you to answer, but you mentioned it is an expensive deal. I got a fair amount of questions around, boy, this is an expensive deal and there is risk. I don t know if you can answer this question, but what gave you confidence that investors would be as patient as they have been with the investment?

Bob Palmisano - Wright Medical Group, Inc. - President, CEO

I just think that first of all, I would say investors should understand that there is some risk and it is expensive. Okay? Everything is a risk-reward kind of equation. But this is right in the heart of what Wright Medical does. We know we are not out acquiring a dental company or something that we don t know anything about. We are acquiring something that we know about; we have people that in our Company have spent their lies in this field. And so they feel that the product not only will be approved, but the product is a superior product and a highly-differentiated product. Outside people have given us that same level of confidence.

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So while it is an expensive deal, it s not too expensive. While there is some risk, there is not too much risk, in our opinion. So I think that is the way I would look at it, and I think hopefully investors will look at it the same way.

Matt Miksic - Piper Jaffray - Analyst

Okay. Any other questions from the group on the transaction before we move on? So I did want to talk a little bit about one of the things that has made this story, at least in our opinion, so successful this year, execution this year on cash flows. Maybe talk about what have been the drivers there, from which business lines, across which geographies. Give us some sense of where is this strength coming from.

Bob Palmisano - Wright Medical Group, Inc. - President, CEO

I ll answer, and maybe Lance could answer some of this also. I think we set out a year ago to significantly increase our cash flow. 2011, I believe, we did about \$14 million in free cash flow. And we gave guidance this year to double that actually, to go to \$25 million to \$30 million. And at the end of Q3, we had already produced \$44 million or so and increased our guidance.

And it is from a broad, broad spectrum of activities reducing inventories, reducing working capital, watching capital spending, all those kinds of issues that we felt that if we really paid attention to, we could do. And we ve reaped those benefits a little bit quicker than we anticipated. But it was one of these projects in our Company. We call them the vital few; we had four or five things that we thought that we really important that we execute. This was one of them, and I think we are ahead of schedule.

Lance, do you want to add anything to that?

Lance Berry - Wright Medical Group, Inc. - SVP, CFO

Sure. As Bob said, the cash flow is being driven by multiple things across the business, and really starting with the tone at the top, this is a key priority for the company. A couple of things that are more obvious that they ve contributed is our capital spending. Capital spending down quite a bit from what it was in the past. And a lot of that has to do with the inventory project, which we include into that, the surgical instruments that we use for most of our surgeries. So that project also got at the efficiency of those as well. That has helped to keep our capital spending down, and we would expect to be able to keep that down in the future.

And then we ve also we are a little bit ahead of schedule on our inventory plan. So we had a goal to reduce or generate \$100 million of cash out of inventory over a period of four years, and still on track for that and a little ahead of schedule as far as timing. So that project is doing really well this year and helped to produce the upside to the original guidance.

So I would assume most of that capital control is on the large joint side, which is kind of where most of that set expense has been in the past. Can you provide maybe some context as to sort of where was your run rate, where is it now, and if you can, maybe how far into that \$100 million opportunity you are on the inventory side?

Lance Berry - Wright Medical Group, Inc. - SVP, CFO

Yes, on the run rate, we have been running \$45 million to \$50 million of total CapEx, which is not just instruments, for the past several years. We are going to be closer to \$25 million or \$30 million this year. So as we grow the business, that may tick up some, but we d expect to be able to keep it down significantly from that previous run rate, based on the work that we ve done. A lot of that does have to do with the hip and knee side of the business.

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And then the other thing is foot and ankle. Even growing it quickly, it is not nearly as capital intensive, but it can be inventory intensive if you re not careful. So we have already seen benefits from the inventory project, enabling us to grow foot and ankle quickly, accelerate growth, but doing it with much lower investment in inventory than we would have, say, if we had done that two years ago. So we ve seen those benefits in both places.

The other thing is with the instrument side is if you can free up instruments in some of your direct areas to allow you to be aggressive in trying to grow your stock and distributor business. And so that is something we see as a potential advantage, as well.

Matt Miksic - Piper Jaffray - Analyst

So out of that \$100 million, if we do is sort of the math on what are you maybe 20% in is that 15%, 25%?

Lance Berry - Wright Medical Group, Inc. - SVP, CFO

Yes, probably 20%, 25%, probably by the end of the year.

Matt Miksic - Piper Jaffray - Analyst

And how much of that I guess our understanding earlier in the year as you laid out the plan was that a tailwind to this process was going to come with on the back of the reorganization of the distributors. So some of this inventory management discipline was going to come out of getting through the transition that you performed on the lower extremity sales force. Is that fair? Should we see an acceleration into this inventory benefit next year or is it same pace maybe in the next few years?

Bob Palmisano - Wright Medical Group, Inc. - President, CEO

I think is pretty much going to be the same pace. The big benefit in terms of the foot and ankle salesforce on us delving into this inventory project that has the benefits of cash flow, it also frees up our salesforce. It is that our salesforce, like most orthopedic salesforces, spends about 40% of its time on managing inventory and logistics around inventory. We ve taken that away from them.

So we are looking to see big productivity gains on our foot and ankle salesforce for a lot of reasons, but this being a big piece of this. Is that when we completed the reorganization of our salesforce at the end of Q3, and currently we have about 80% of our revenues coming from direct salesforce, and that was a big move, obviously a big move for us. And we looked at we thought just looking at the data we had, it was approximately somewhere around \$600,000 per sales rep. We think we can get that to \$1 million per sales rep. And taking inventory and logistics management away from them is a big piece of getting that productivity gain.

Matt Miksic - Piper Jaffray - Analyst

Okay, so we ve got about nine or 10 minutes. I do want to come back to extremities, because that is an important part of your longer-term strategy and part of what is working. But I did want to make sure we touch on hips and knees, because I think it is something investors have a little bit of a hard time getting their mind around, which is it is down. Why is it down so much? When does it settle out?

Maybe help us understand this decline in that business, maybe help us understand how you were looking at it a year ago in the beginning of the year versus today? Does it look like a longer process to you? And at the end of that, what should we expect to see in the hip and knee business?

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Bob Palmisano - Wright Medical Group, Inc. - President, CEO

Most of the issues around our hip and knee business came out of the deferred prosecution agreement the Company was under, and the compliance activities around that, where the Company had (inaudible) agreements with surgeons to do work at a certain price over a certain period of time. And the surgeons did the work that they were required. But then under the deferred prosecution agreement, we were unable to pay them the amounts that they felt was owed to them, and over the period of time that they thought was owed to them. It therefore put us into a big conflict situation with a lot of surgeons.

We said at the beginning of the year that this was going to be somewhere around \$10 million to \$15 million in lost revenue. And through the first part of the year, it didn t seem that way. But it did tick up in Q3, and we see the same thing in Q4. So it is going to be right about where we thought it would be, probably at the high end of that. So we are not surprised at all at where we are. And we think that by the end of this year, we should be mostly all through that. However, we still will see the anniversarying of that as we go into 2013.

So I would suspect that we will anniversary those losses through the first three quarters, and hopefully by the end of the year, Q4 or so, is that we will see a leveling out there, and then should be able to be back at a market growth activity in terms of the hip and knee business.

Matt Miksic - Piper Jaffray - Analyst

Okay, but the goal then being, of course, driving it for cash flows and not growth.

Bob Palmisano - Wright Medical Group, Inc. - President, CEO

Yes.

Matt Miksic - Piper Jaffray - Analyst

With that in mind, too I don t want to spend too much time on that business, even though it is important and obviously going to continue to be important can you give us a sense maybe of what is the performance metrics of the hip and knee business? What did it look like a year ago?

You ve disclosed more on the margin side, the operating margin contribution, which I think was surprising to a lot of folks last quarter, actually just a touch above where extremities were, which is a surprise to me. What was holding it down before? What is changing? Maybe if you can talk about is it are the turns and set turns in that business improving? To your point about sales rep productivity, is that improving? What other things are improving besides shedding some of these relationships that you weren t able to maintain [post-TPA]?

Bob Palmisano - Wright Medical Group, Inc. - President, CEO

I think that we ve reorganized the whole Company. Now we have an OrthoRecon division, headed by a president that is focused on that 24/7. And the job there is to produce cash and to grow cash flow in that business. And then as we get through the customer issues that we just spoke about is to be able to grow that business at market rates. I think that is what we should look forward to. I feel very confident we will be able to execute that.

Part of the reason that we broke that out first of all, we had in our mind that we wanted to separate our businesses. Now we have four businesses when you think about it; we have both our recon businesses, we have an extremities biologics business extremities business, a biologics business and an international business. So we have these four kind of segments now, and we have focus now on each of them.

We felt that once investors were able to see the OrthoRecon business and its operating margins and its cash generation, is that they would give some value to it. And that I almost I use the word at times that we should shame people into giving some value to this. Because there is some value there. And it certainly hasn t surprised us, but I think it has surprised investors and we get a lot of questions about it.

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Matt Miksic - Piper Jaffray - Analyst

Okay, and then last thing on this I guess is you just quickly, you mentioned the directive there is to create cash, generate cash. Would it be correct to say maybe the directive for Wright Medical in that business three, four, five years ago Lance, you can speak to this was more about growth, more about share?

Lance Berry - Wright Medical Group, Inc. - SVP, CFO

Yes, absolutely. We attempted to grow that at above-market and spent a lot of money trying to do that.

Matt Miksic - Piper Jaffray - Analyst

Okay, fair enough. On extremities, you set the goal I think earlier in the year to end the year significantly above market. You are sort of you are above market. Now you are headed to hit that goal for the year. You had a very strong Q3.

Is there anything about that business that we should assume is could be uneven in terms of going to have a great Q3, maybe Q4 is going to require some consolidation, and then it picks back up in Q1? Or should we think of it as more linear improvements over the next several quarters?

Bob Palmisano - Wright Medical Group, Inc. - President, CEO

I think we said on our Q3 calls that we expect the business to continue to accelerate, and I think it will. I mean, it is a year ago, we were growing at 7% in that business. In Q3, we grew 14% on a constant currency basis, and we think that we should continue to keep on ratcheting that business up.

There is a tremendously underpenetrated market in the businesses that we are in, and particularly in foot and ankle, toe hammertoes, as well as total ankle replacements. And now that we have a direct salesforce, we are able to align people to the goals we have of growing that business by taking the message to physicians who currently do not do total ankle replacements or implants for hammertoes and getting them comfortable with making that change. So we now have an organization that can institute that changed management process that is necessary to penetrate that market.

Secondly, we ve ramped up in a significant way our medical education. It is in 2011, we trained 600 physicians in foot and ankle. At the end of Q3, we trained over 1200 this year, and we continue to see that to accelerate. And further, we are introduced a number of new products.

So I think those three things will continue to give us confidence that we should be able to continue accelerating that business, that it isn t kind of a one-off kind of a thing, because those three things are still in place.

Matt Miksic - Piper Jaffray - Analyst

And you say significantly above market. Where would you put market growth on (multiple speakers)?

Bob Palmisano - Wright Medical Group, Inc. - President, CEO

It is not a science; it is more of an art here. But all the data that we have has the market at 8% to 10%. So we are at 14%; I think we can accelerate off that.

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Matt Miksic - Piper Jaffray - Analyst

Last thing, I have to mention something, is these goals for significantly above market you set before you had Augment in your pipeline. So you don t have Augment approved yet, but on approval, is it fair to say, in addition to driving Augment, you will also be able to drive additional pull-through of your products?

Bob Palmisano - Wright Medical Group, Inc. - President, CEO

I totally believe that. I think we ll be in places that we ve never been before because of Augment. And it is one of these things that you are going to get every doctor that is doing these kind of surgeries will realize that Wright Medical is a very serious company as it comes to foot and ankle best products, best training, educated salesforce, everything that you ll need.

Matt Miksic - Piper Jaffray - Analyst

Great. Thanks so much.

Bob Palmisano - Wright Medical Group, Inc. - President, CEO

You re welcome. Thank you.

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This presentation may be deemed to be solicitation material regarding the proposed business combination of Wright and BioM In connection with the proposed transaction, Wright intends to file with the SEC a registration statement on Form S-4, which w a proxy statement/prospectus and other relevant materials in connection with the proposed transaction, and each of Wright and BioMimetic intend

to

file

with the SEC other documents regarding the proposed transaction. The proxy statement/prospectus and this presentation are not offers to sell Wright securities and are not soliciting an offer to buy Wright securities in any state where the and sale is not permitted. The final proxy statement/prospectus will be mailed to the stockholders of **BioMimetic**. **INVESTORS** AND SECURITY HOLDERS OF BIOMIMETIC ARE URGED TO READ THE PROXY STATEMENT/PROSPECTUS (INCLUI AMENDMENTS OR SUPPLEMENTS THERETO) AND THE OTHER RELEVANT MATERIAL CAREFULLY IN THEIR WHEN THEY BECOME AVAILABLE BECAUSE THEY WILL CONTAIN IMPORTANT INFORMATION ABOUT WRI BIOMIMETIC AND THE PROPOSED TRANSACTION. The proxy statement/prospectus and other relevant materials (when they become available), and any and all documents filed w

The proxy statement/prospectus and other relevant materials (when they become available), and any and all documents filed w SEC, may be obtained free of charge at the SEC s web site at *www.sec.gov*. In addition, investors and security holders may ol copies of the documents filed with the SEC by Wright by directing a written request to Wright Medical Group, Inc, 5677 Airlin Arlington, TN 38002, Attention: Investor Relations, and by BioMimetic by directing a written request to BioMimetic Therape 389 Nichol Mill Lane, Franklin, TN 37067, Attention: Investor Relations.

Wright and its respective executive officers and directors and other persons, including BioMimetic and its respective executive and directors, may be deemed to be participants in the solicitation of proxies from BioMimetic stockholders in connection with proposed transaction. Information about the executive officers and directors of BioMimetic and their ownership of BioMimeti stock is set forth in its annual report on Form 10-K for the year ended December 31, 2011, filed with the SEC on March 13, 20 the proxy statement for BioMimetic s 2012 annual meeting of stockholders, filed with the SEC on April 27, 2012. Informatio executive officers and directors of Wright Medical Group is set forth in its annual report on Form 10-K for the year ended December 31, 2011, filed with the SEC on April 27, 2012. Information executive officers and directors of Wright Medical Group is set forth in its annual report on Form 10-K for the year ended December 31, 2012, annual meeting of stockholders, filed with the SEC on April 27, 2012. Information executive officers and directors of Wright Medical Group is set forth in its annual report on Form 10-K for the year ended December 2011, filed with the SEC on February 24, 2012 and the proxy statement for Wright Medical Group is 2012 annual meeting of wright Medical Group is 2012 annual meeting of wright Medical Group is 2012 annual meeting of 2012 annual meeting 2012 annual 2012 annual 2012 annual 2012 annual 2

stockholders, filed with the SEC on March 27, 2012. Certain directors and executive officers of BioMimetic and other persons have direct or indirect interests in the merger due to securities holdings, pre-existing or future indemnification arrangements ar to severance payments if their employment is terminated prior to or following the transaction. If and to the extent that any of the BioMimetic participants will receive any additional benefits in connection with the transaction, the details of those benefits wi described in the proxy statement/prospectus relating to the transaction. Investors and security holders may obtain additional information regarding the direct and indirect interests of BioMimetic and its executive officers and directors in the transaction the proxy statement/prospectus regarding the transaction when it becomes available. Additional Information about the Proposed Transaction between Wright and BioMimetic 3

Wright Medical uses certain non-GAAP financial measures in this presentation. Wright Medical uses non-GAAP financial measures as supplemental measures of performance and believes these measures provide useful information to investors in evaluating our operations, period over period. However,

non-GAAP financial measures have limitations as analytical tools, and should not be considered in isolation or as a substitute for Wright Medical s financial results prepared in accordance with GAAP.

In addition, investors should note that any non-GAAP financial measures Wright Medical uses may not be the same non-GAAP financial measures, and may not be calculated in the same manner, as that of other companies.

We have posted a reconciliation of our non-GAAP financial measures to

the most directly comparable GAAP financial measures on our website at www.wmt.com.

Use of Non-GAAP Financial Measures

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New Strategic Focus. Building on Solid Fundamentals.

The platforms The future The strategy 5

Wright Medical Today

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Midpoint of guidance range communicated on 11/5/2012. The fact that we include these projections in this presentation should not be taken to mean that these amounts continue to be our projections as of any subsequent date.

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Global

Orthopaedic medical device company Sales 2012E Market cap (as of 11/23/12) ~\$843M ~\$480M (1) Countries >60 ~115 Marketed product lines

Positioned in Two Large Markets Extremities (incl. Biologics) Size: ~\$3.7B (1) Market Growth: ~8-10%

Recognized leader in Foot & Ankle

Primarily US ~40% of sales Ortho-Recon (Hips and Knees) Size: ~\$12B (2) Market Growth: ~0-3%

Mid-sized player

Balanced between US and International ~60% of sales Business Market Size / Growth Our Position 7 1 U.S. Market 2011 Millennium Research Group, Management Estimates 2 Worldwide Market 2011 Millennium Research Group, Management Estimates



A N Е W F Ο С U S : Strategic Priorities Going Forward Steady stream of new products Accelerate medical education Improve sales force productivity 1. Drive growth in Foot & Ankle Focused R&D, sales and marketing activities Improve inventory and instrument productivity 2. Improve Ortho-Recon efficiency **Key Priorities** Working capital focus, reduce inventory Focused capital spending 3. Increase cash generation 8 Improve Long-Term growth cash flow margins

Roadmap for Executing New Strategic Priorities Time 4Q 2011

Identify priorities

Narrow focus

identify Vital Few initiatives Phase #1 Planning

New initiatives

Continue to drive customer satisfaction

Sales growth & margin expansion Phase #3 Build Momentum

Accelerate Foot & Ankle growth

Improve customer satisfaction

Improve cash flow

Productivity gains Phase #2 Execution 2012 2013-2014 9

Executing on Our Priorities

Good progress Successfully executing Vital Few initiatives Exited Deferred Prosecution Agreement (DPA) Demonstrated ability to grow Foot & Ankle above market through 3Q 12 three consecutive quarters of accelerating global foot & ankle growth Focus on reducing inventories _ has brought increased cash flow generation in 2012 Completed conversion of major portion of U.S. Foot & Ankle territories to direct Increased foot and ankle medical education and R&D 1,360 physicians trained through 3Q 2012, surpassing goal of training 1,200 for 2012 Next steps: Narrow focus and improve execution of OrthoRecon activities

Productivity gains

Improve long-term growth, cash flow, margins 10

New Strategic Focus. Building on Solid Fundamentals. The platforms The future The strategy 11 T H

Two Fundamentally Solid Platforms 1. Extremities

Extremity hardware

Biologics

Comprehensive portfolio Strong R&D Focused sales force 12

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Е Т Focused on Most Attractive Segment of Extremities Market Upper Extremity \$2.3B 27,000 surgeons Foot and Ankle \$1.4B 7,500 surgeons and podiatrists Breakdown of \$3.7B U.S. Extremities Market More concentrated call point Complex treatment issues, less mature products need innovative solutions significant mix opportunity Strong growth drivers trauma osteoarthritis diabetes obesity High margin Underpenetrated market significant opportunity for int l expansion Foot & Ankle: An Attractive Segment Source: 2011 Millennium Research Group, Management Estimates 13

S T R E N G T Η S : Most Comprehensive Foot and Ankle Product Portfolio **CHARLOTTE® CLAW®** 3.5mm Implant BIOFOAM® Wedge LIS FRANC Plate **ORTHOSPHERE®** Implant **SWANSON** Hammer Toe Implant **CHARLOTTE®** Snap-Off Screw **GRAFTJACKET® Regenerative Tissue** Matrix LPT® Toe Implant DARCO® BOW® Plate **BIOARCH®** Implant **ENDO-FUSE®** Rods and Beams **CHARLOTTE®** Compression **CHARLOTTE® CLAW®** 2.7mm Implant **DART-FIRE®** Screws **CHARLOTTE®** 3.0 MUC Screw DARCO® Screws **SWANSON** Great Toe DARCO® **RPS** Plate DARCO® **MPJ** Plate DARCO® LPS Plate DARCO® **DPS** Plate

ORTHOLOC Plate CHARLOTTE ® 7.0 MUC Screw AM Surgical Endoscopic Blade **SIDEKICK®** Stealth Fixation **CORETRAK®** Tube Fixator **SIDEKICK®** Fixation VALOR® NAIL Fixation PRO-TOE Hammer Toe Fixation **INBONE®** Total Ankle 14 **CHARLOTTE®** Jones Fracture Screw ORTHOLOC Plate DARCO® PIA Plate

2010 S Т R Е Ν G Т Η S : Strong Record of Launching Innovative Products 64 Products 2009 Recognized leader in Foot & Ankle Opportunity to increase R&D

Improve new product cadence ~ 80+ Products 2011-2012 15

Number of Foot & Ankle Focused Sales Reps

2010
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:
Built the Largest Dedicated Foot & Ankle Sales Force in the US
~200
Opportunity for increasing sales rep productivity
125
~70%
Indirect
~30%
Direct
16

Completed Conversion of Major Portion of U.S. Foot and Ankle Territories to Direct Sales Representation

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A T Е G I С F 0 С U S : G R 0 W Т Η Maximize the Foot and Ankle Opportunity Goal: Exit 2012 well above market growth rates 17 Opportunity for increased sales rep productivity More efficient inventory management Improved pricing processes 2012 ~200 Benefits of Direct Sales ~20% Indirect 2011 ~200 ~70% Indirect ~30% Direct ~80% Direct

S T R A T E G Ι С F 0 С U S : G R 0 W Т Η Multiple Factors Driving Extremities Growth Market growth in foot and ankle Recently launched products including: PRO-TOE VO Hammertoe Fixation System **INBONE** ® Π Total Ankle Replacement System PROPHECY R **INBONE** ® Pre-Pre-Operative Navigation Alignment Guides ORTHOLOC 3Di Ankle Fracture System and Foot Reconstruction Plating System CLAW ® II Polyaxial Compression Plating System QUICKDRAW Knotless Soft Tissue Fixation System More new products planned in 2012

Increased number of surgeons trained

1,360 surgeons trained +113% vs 2011 Surpassed target of ~1,200 18 Our Goal Above-market growth in Foot & Ankle

Two Fundamentally Solid Platforms

Global distribution network Innovative technologies 2. Ortho-Recon

Hips

Knees 19

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E T Slower Growth, Stable Customer Base \$12B Ortho-Recon Worldwide Market Our Focus

Customer satisfaction

Efficiency

Cash flow generation Source: 2011 Millennium Research Group, Management Estimates 20

Innovative Hip Portfolio

Fast recovery instrument systems (4,5) Modular hip systems

Comprehensive acetabular systems S Т R Е Ν G Т Η S Portfolio of Innovative Primary Knee and Hip Products Examples **EVOLUTION** ® Knee System Launched in 2010 Medial-pivot design mimics healthy knee kinematics Patient benefits: stable, (1)quiet, (2)natural motion (3)1 Data on file 2 Anderson M. Patello-femoral complications after posterior-stabilized total knee arthroplasty: a comparison of two different im 3 Freeman M. The movement of the normal tibiofemoral joint. J Biomechanics. 2005;38:197-208. 4 Penenberg BL, Bolling WS,

Riley М. Percutaneously assisted total hip arthroplasty (PATH): а preliminary report. J Bone Joint Surg Am. Nov 2008; 90 Suppl 4:209-220 5 Penenberg BL, Van Winkle GN, Schoch EP, Isaacson J, Batts J. Early Clinical Outcomes in THA Patients Implanted via Mini-Assisted Technique. Mid America Orthopaedic Association. 2009:Poster 21

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Italy

France

Germany

Australia S T R E N G T H S Strong Global Sales Coverage

United States

Japan

Canada

United Kingdom

80 international stocking distributors

Over 1,100 sales representatives Direct sales in major markets Distributors in 60+ countries 22

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Multiple Initiatives Driving Improved Efficiency
Focused R&D spend, product
line optimization
Targeted sales & marketing
efforts

Improved inventory & instrument management

Streamline international distribution network Our Goal Improve cash generation, High level of customer satisfaction 23

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Building the New Wright Medical 25 Wright Medical Past Future Foot & Ankle business Growth Abovemarket growth Ortho-Recon business Growth Efficiency, cash flow Cash flow Low High Operating margin Single digit double digit Mid-

1 Amounts presented are as reconciled on the Company s website, www.wmt.com

Corporate Investor Info 2 Midpoint of guidance range communicated on 11/5/2012. The fact that we include these projections in this presentation should continue to be our projections as of any subsequent date. 3 2012 adjusted EPS guidance range communicated on 11/5/2012. The fact that we include these projections in this presentation amounts continue to be our projections as of any subsequent date. S А L E S E Ρ S а n d F R E Е С А S Η F L 0 W Significant Investment in 2012 to Drive Transformational Change 26 Net Sales (\$M) EPS (1)(Adjusted, incl. stock-based expense) Conversion to increased direct U.S. foot & ankle sales

representation

Investment in R&D, Medical Education

Currency headwinds Free Cash Flow (1) (\$M)

Lower levels of Capex spending

Improved inventory management \$519M \$513M \$480M \$0.70 \$0.69 \$24m \$15m \$48m \$0.16 to \$0.22

~

Strong Balance Sheet, Cash Flow to Improve