

VOTING INSTRUCTION FORM
CML HEALTHCARE INC.

SEE VOTING INSTRUCTIONS ON REVERSE
WE NEED TO RECEIVE YOUR VOTING INSTRUCTIONS AT LEAST
ONE BUSINESS DAY BEFORE THE PROXY DEPOSIT DATE.

INTERNET VOTE: WWW.PROXYVOTE.COM
TELEPHONE VOTE: 1-800-474-7493

MEETING TYPE: ANNUAL MEETING
 MEETING DATE: THURSDAY, MAY 19, 2011 AT 4:30 P.M. EDT
 RECORD DATE: FOR HOLDERS AS OF APRIL 04, 2011
 PROXY DEPOSIT DATE: MAY 17, 2011
 ACCOUNT NUMBER: HRTSSSTA 01 OM
 CUSIP: 125892Q103 CUID: T770 C81 P11459 010 E
CONTROL NO.: 417185395885

APPOINTEE(S) PATRICE E. MERRIN, PAUL J. BRISTOW
 IF YOU WISH TO ATTEND THE MEETING OR DESIGNATE ANOTHER PERSON TO ATTEND, VOTE AND ACT ON YOUR BEHALF AT THE MEETING, OR ANY ADJOURNMENT THEREOF, OTHER THAN THE PERSON(S) SPECIFIED ABOVE, PRINT YOUR NAME OR THE NAME OF THE PERSON ATTENDING THE MEETING ON THE APPOINTEE LINE BELOW.

PLEASE PRINT APPOINTEE NAME

VOTING RECOMMENDATIONS

- 2 - THE APPOINTMENT OF THE AUDITORS OF THE COMPANY AS SPECIFIED IN ---->>>
 OF THE COMPANY TO FIX THEIR REMUNERATION.
 NOTE THIS FORM CONFERS DISCRETIONARY AUTHORITY TO VOTE ON SUCH OTHER BUSINESS AS MAY PROPERLY COME BEFORE THE MEETING OR ANY ADJOURNMENT THEREOF.
 NOTE THIS VOTING INSTRUCTION FORM SHOULD BE READ IN CONJUNCTION WITH THE ACCOMPANYING INFORMATION CIRCULAR.

AQ

--->>>

FOLD IN HALF - DO NOT DETACH

TELEPHONE VOTE AT 1-800-474-7493 OR
 INTERNET VOTE AT WWW.PROXYVOTE.COM

UNDER SECURITIES REGULATIONS, SECURITYHOLDERS MAY ELECT ANNUALLY TO RECEIVE THE ANNUAL/INTERIM FINANCIAL STATEMENTS OR BOTH INCLUDING RELEVANT MD&A BY MAIL. INDICATE YOUR PREFERENCE IN THE APPROPRIATE BOX(S) PROVIDED.

FOLD IN HALF - DO NOT DETACH

1 **ELECTION OF DIRECTORS** (fill in only one box " " per nominee in blue or black ink)
 VOTING RECOMMENDATION: FOR ALL THE NOMINEES PROPOSED AS DIRECTORS

- | | | | |
|-----------------------------|--------------------------|--------------------------|--------------------------|
| 01-MR. GERY J. BARRY | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| 02-MR. STEVEN W. CHEPA | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| 03-DR. JOSEPH FAIRBROTHER | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| 04-MR. ROBERT P. FISHER JR. | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| 05-MS. PATRICE E. MERRIN | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| 06-DR. JOHN D. MULL | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| 07-MR. STEPHEN R. WISEMAN | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |

ITEM(S) (fill in only one box " " per item in blue or black ink)

- | | | | |
|-----|--------------------------|-----------------------|--------------------------|
| FOR | <input type="checkbox"/> | WITHHOLD | <input type="checkbox"/> |
| 2 | <input type="checkbox"/> | 70000 | 9200000000800738 |
| | | CONTROL NO.: → | 417185395885 |



STATE STREET.
Serving Institutional Investors Worldwide

1776 HERITAGE DRIVE
 NORTH QUINCY MA 02171

17494
 17,132
 P11459
 1 OF 1

AVENUE INVESTMENT MANAGEMENT
 PAUL HARRIS
 47 COLBORNE STREET, SUITE 300
 TORONTO, ON M5E 1P8
 CANADA

[Signature]
 (SIGNATURE(S))
 DATE (DD/MM/YY)
 INVALID IF NOT SIGNED