

Leading the Next Frontier in Precision Cardiovascular Medicine

2026

NASDAQ: CDIO

 **CardioDiagnostics**
Precision Cardiovascular Medicine with Epigenetics and AI



Forward-Looking Statements and Disclaimers

Certain statements and information included in this presentation constitute "forward-looking statements" within the meaning of the Private Securities Litigation Act of 1995. When used in this presentation, the words or phrases "will", "will likely result," "expected to," "will continue," "anticipated," "estimate," "projected," "intend," "goal," or similar expressions are intended to identify "forward-looking statements" within the meaning of the Private Securities Litigation Reform Act of 1995. Such statements are subject to certain risks, known and unknown, and uncertainties, many of which are beyond the control of Cardio Diagnostics Holdings, Inc. (the "Company"). Such uncertainties and risks include, but are not limited to, our ability to successfully execute our growth strategy, changes in laws or regulations, economic conditions, dependence on management, dilution to stockholders, lack of capital, the effects of rapid growth upon the Company and the ability of management to effectively respond to the growth and demand for products and services of the Company, newly developing technologies, the Company's ability to compete, regulatory matters, protection of technology, the effects of competition and the ability of the Company to obtain future financing. Actual results and events may differ significantly from results and events discussed in forward-looking statements.

An extensive list of factors that can affect future results are discussed in the Annual Report on Form 10-K for the period ended December 31, 2025, under the heading "Risk Factors" in Part I, Item 1A thereof, in the Quarterly Report on Form 10-Q for the period ended June 30, 2026, under the heading "Risk Factors" in Part II, Item 1A thereof, and other documents filed from time to time with the Securities and Exchange Commission. Such factors could materially adversely affect the Company's financial performance and could cause the Company's actual results for future periods to differ materially from any opinions or statements expressed within this presentation.

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Commercial Lifecycle of Diagnostic Tests



Scientific
Validation



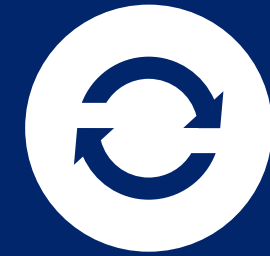
Regulatory
Requirements



Reimbursement
and Coverage



Physician Adoption
and Clinical
Guidelines



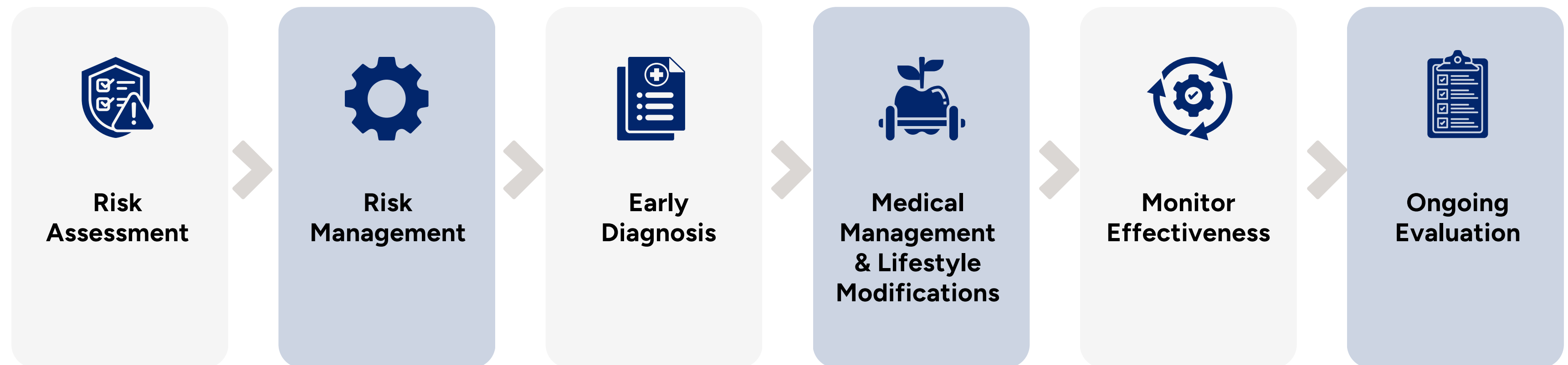
Behavioral and
Workflow
Integration

Toward a World Where Cardiovascular Disease Isn't the #1 Killer

Our Mission: To make cardiovascular disease prevention and early detection **more accessible, personalized and precise**.

Our Vision: Precision cardiovascular medicine, powered by **artificial intelligence** and **multi-modal** technologies, transforms the care continuum - improving outcomes, reducing costs, and easing the global burden of heart disease.

THE CARE CONTINUUM



Corporate Highlights

To our knowledge, we have developed the first and only commercial solutions leveraging epigenetics and AI for cardiovascular disease prevention and early detection



Over \$175B TAM across Epi+Gen CHD™ and PrecisionCHD™ ⁽¹⁾



Diversified US and international commercialization strategy



Commercially available, clinically validated tests, with growing adoption



Meaningful reimbursement milestones and progress



Robust IP portfolio



Significant opportunity to scale operations by meeting milestones



Strong and growing pipeline supported by ongoing studies and new product development



Experienced leadership team with expertise across diagnostics, AI, and commercialization

⁽¹⁾ Internal estimate

TAM was calculated by multiplying the CMS final gapfill rate with the estimated Americans eligible for the test. Price for test can vary for patients and organizations.

Leadership



Warren Hosseinion, MD

Chairman

President, Nutex Health, Inc. (NUTX)
Co-founder of Astrana Health (ASTH)
Director and former CEO of Clinigence Holdings (CLNH)
MD from Georgetown University School of Medicine



Meesha Dogan, PhD

CEO & Director

Co-founder of Cardio Diagnostics
Co-inventor of the AI-Driven Multi-Omics Engine™
16+ years bridging engineering, AI and medicine
PhD in Biomedical Engineering from the University of Iowa



Robert Philibert, MD PhD

CMO & Director

Co-founder of Cardio Diagnostics
Co-inventor of the AI-Driven Multi-Omics Engine™
NIH-trained molecular biologist
MD & PhD in Neuroscience from the University of Iowa



Tim Dogan, PhD

CTO

Founding engineer of Cardio Diagnostics
Co-inventor of the AI-Driven Multi-Omics Engine™
16+ years in AI and high performance computing systems
PhD in Mechanical Engineering from the University of Iowa



Elisa Luqman, JD MBA

CFO

Chief Legal Officer (SEC), Nutex Health, Inc. (NUTX)
Co-founder of bigVault Storage Technologies (acquired)
JD & MBA in Finance from Hofstra University
Licensed in NY/NJ and FL Corp Counsel

Cardiovascular Disease Remains the Leading Cause of Death Globally Despite Being Largely Preventable

1 in 2

By 2035, approximately 45% of the US population (or over 131 million people) is projected to have some form of cardiovascular disease, bringing the rate close to 1 in 2 ⁽¹⁾

\$2T

In the US alone, cardiovascular disease costs the healthcare system \$233 billion annually in direct medical costs and an additional \$185 billion in lost productivity, with total costs projected to approach \$2 trillion by 2050 ⁽¹⁾⁽²⁾

80%

Following a healthy lifestyle may prevent ~80% of premature cardiovascular disease events such as a heart attack ⁽³⁾

~35K

Only about 35,000 cardiologists are practicing in the US, far short of the growing demand for cardiovascular care ⁽⁴⁾

⁽¹⁾ American Heart Association

⁽²⁾ CDC

⁽³⁾ World Health Organization

⁽⁴⁾ Kaiser Family Foundation, 2024

The Burden of Cardiovascular Disease is Immense and Growing

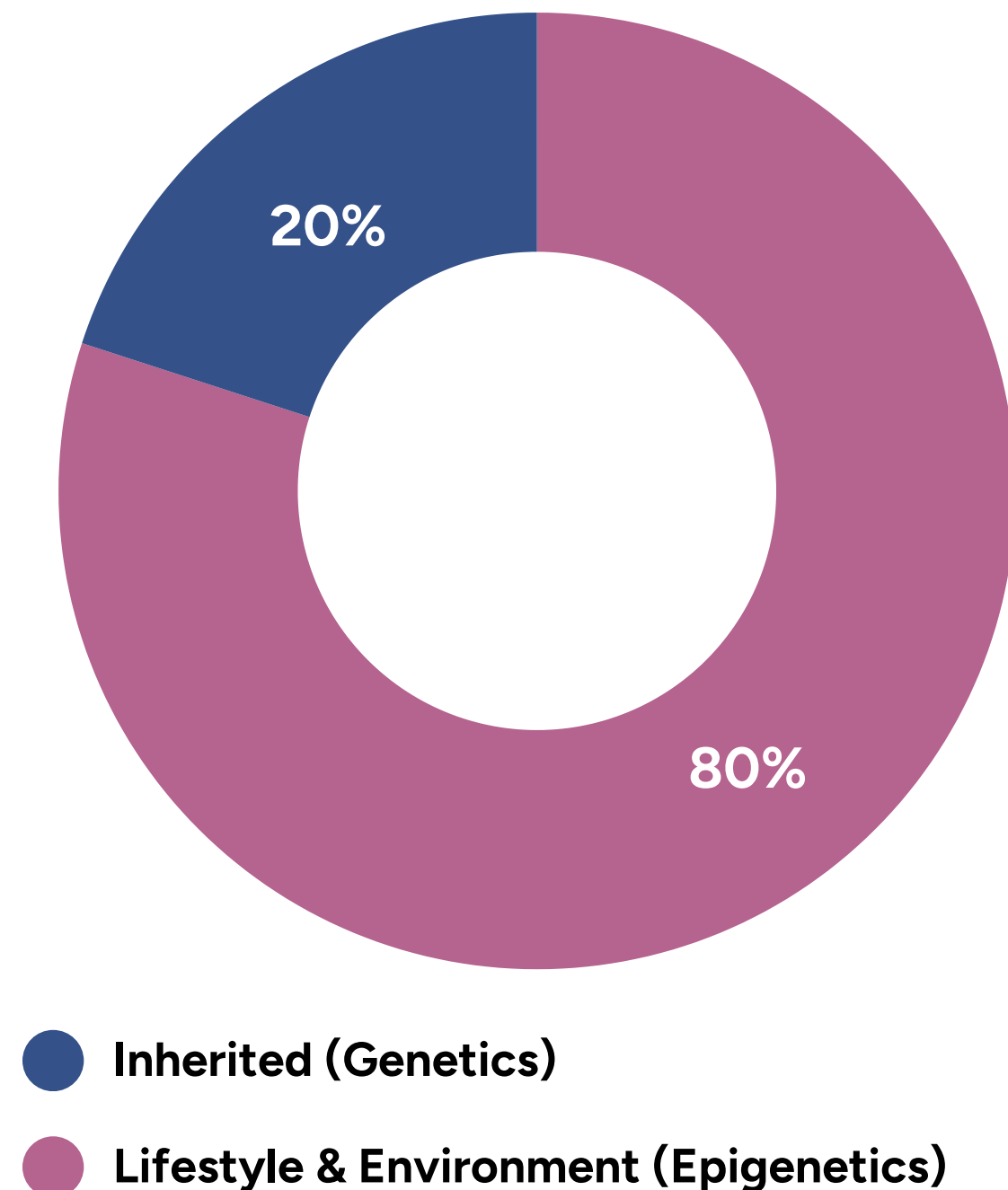
Patients	In the US, heart disease is responsible for approximately 920,000 deaths in 2023, which equates to 1 in every 3 deaths ⁽¹⁾
Physicians & Health Systems	In 2021 alone, there were approximately 4.7 million cardiovascular-related hospitalizations, representing one of the largest drivers of acute care volume nationwide ⁽²⁾
Employers	In addition to increasing premiums and direct medical costs, heart disease leads to an average of 13 lost workdays per year per patient ⁽¹⁾
Payers	Cardiovascular disease is one of the largest cost centers in healthcare, accounting for approximately \$233 billion annually in direct medical spending in the US ⁽³⁾

⁽¹⁾ American Heart Association

⁽²⁾ Haidar, A et al., The American Journal of Cardiology Jan 2025, /doi.org/10.1016/j.amjcard.2024.10.003

⁽³⁾ CDC

Multi-Omics: Epigenetics + Genes = An Individual's Unique Molecular Fingerprint



GENETICS (SINGLE NUCLEOTIDE POLYMORPHISMS)

- Inherited from parents
- <20% of risk for cardiovascular disease is driven by genetics⁽¹⁾
- Does not change over time (i.e., not dynamic, non-modifiable)

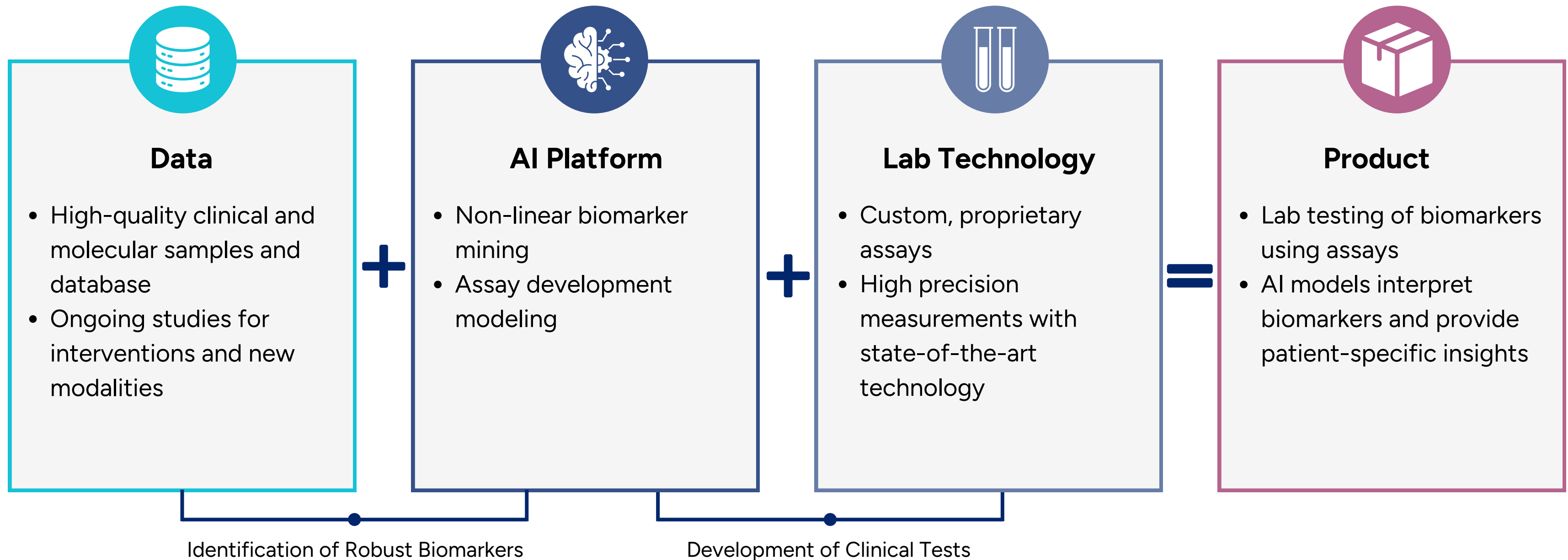
EPIGENETICS (DNA METHYLATION)

- Influenced by lifestyle & environment
- Larger driver of risk for cardiovascular disease as compared to genetics
- Largely confounded by genetics
- Changes over time (i.e, dynamic, modifiable - similar to HbA1c)

We pioneered this approach to measure and quantify an individual's unique molecular fingerprint to enable more precise clinical care

⁽¹⁾ Sum heritability from Hou, K et al., Nature Genetics Aug 2019, /doi.org/10.1038/S41588-019-0465-0

Our AI-Driven Multi-Omics Engine™ Turns Molecular Fingerprints Into Actionable Clinical Insights



Our Engine, designed and built over 14+ years, provides a scalable foundation for sustained product expansion, clinical impact, and long-term value creation

Beyond Multi-Omics:

A More Complete Picture of Cardiovascular Health

The platform we're building: a detection and monitoring platform that catches cardiovascular risk and disease earlier and with high precision, tracks how each patient's profile changes over time, and matches patients to interventions.

CURRENT PLATFORM

Multi-Omics

High Precision

Intervention-Sensitive

Scalable



EXPANDING CURRENT PLATFORM

Multi-Modal

Multi-Scale

Precision Monitoring

Therapy Response Quantification

IP Portfolio:

Patents, Trade Secrets & Proprietary Assets

PATENT FAMILIES

Detecting Predisposition to CVD	Granted patents in 12 jurisdictions with multiple granted patents in the US and Australia
Predicting & Monitoring CVD	15 pending applications in 11 jurisdictions
Diabetes Prediction & Monitoring	10 pending applications in 10 jurisdictions
Digital Healthcare Dashboard	10 pending applications in 10 jurisdictions
PrecisionCHD Test	11 pending applications in 11 jurisdictions
Algorithm for Determining Mortality	Pending international PCT application
Acute Coronary Syndrome	US provisional patent application pending

TRADE SECRETS & PROPRIETARY ASSETS

AI Platform	Proprietary Reagents	DNA Bank & Databank	Algorithms	Copyrights
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Cardio Diagnostics' AI-Powered Clinical Tests

Epi+Gen CHD™

Risk Stratification ⁽¹⁾

To our knowledge, Epi+Gen CHD is the first and only commercially available blood test capable of assessing the three-year risk of a coronary heart disease event, including a heart attack

PrecisionCHD™

Diagnostic Aid ⁽²⁾

To our knowledge, PrecisionCHD is the first and only commercially available blood test capable of detecting obstructive and non-obstructive coronary heart disease

Coupled to our Actionable Clinical Intelligence™ platform that provides patient-specific insights into the molecular drivers of disease

Radiation Free



Easy to Access (remote/onsite)



No Fasting

⁽¹⁾ Dogan et al., 2021 Epigenomics

⁽²⁾ Philibert R et al., 2023, Journal of American Heart Association

Epi+Gen CHD™ Risk Stratification Test (Rx Only)



Intended for those between
35-75 years old with no history of CHD

146M

Americans estimated to be
eligible for the test ⁽¹⁾

Easy to Interpret

Risk category and percentage results

2.4x

**more sensitive
for women**

1.7x

**more sensitive
for men**

compared to the average sensitivity of the
Framingham Risk Score and the ASCVD Pooled
Cohort Equation, the two common risk calculators
used by clinicians ⁽²⁾

Up to \$42K

cost savings

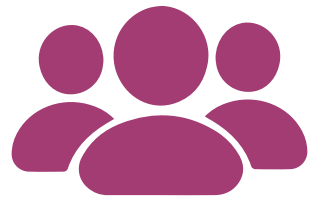
per quality adjusted life year (QALY) ⁽³⁾

⁽¹⁾ Internal estimate

⁽²⁾ Dogan et al., 2021 Epigenomics

⁽³⁾ Jung Y et al., 2021, Epigenomics - cost savings were not calculated for a specific payer

PrecisionCHD™ Diagnostic Aid Test (Rx Only)



Intended for those between 35-80 years old presenting to be evaluated for CHD

60M

Americans estimated to be eligible for the test ⁽¹⁾

Easy to Interpret

Signal detected or not detected result

1.3x

**more sensitive
for women**

1.4x

**more sensitive
for men**

compared to the average sensitivity of a stress ECG ⁽²⁾

~\$113M

cost savings

in the first year if PrecisionCHD used as the primary method of initial CHD assessment for one million lives ⁽³⁾

⁽¹⁾ Internal estimate

⁽²⁾ Philibert et al., 2023 JAHA

⁽³⁾ Frisvold D et al., 2024, Advances in Therapy - cost savings were not calculated for a specific payer

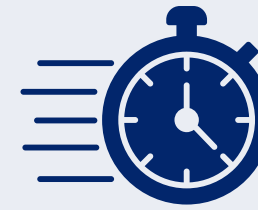
Our Tests Offer a Scalable, Novel Approach for Cardiovascular Disease Prevention and Detection



First-of-its-kind



Not one and done



Fast and convenient



No exposure to ionizing radiation

The use of Epi+Gen CHD™ and PrecisionCHD™ could save lives and reduce costs associated with cardiovascular disease

A Robust and Growing Evidence Base for Epi+Gen CHD™ and PrecisionCHD™

PUBLISHED

Clinical validations: rigorous studies in partnership with leading health systems

Economic evidence: demonstrating cost effectiveness and cost savings

Monitor treatment effectiveness: evidence demonstrating the utility of the tests

PEER-REVIEWED IN

Epigenomics

JAHA
Journal of the American Heart Association

Advances in Therapy

processes

genes

IN PROGRESS

INOCA detection: use of PrecisionCHD™ to detect non-obstructive coronary heart disease

PRELIMINARY DATA PRESENTED ⁽¹⁾ · EXPECTED TO COMPLETE IN 3–6 MONTHS

Multi-modal & multi-scale: combining imaging with PrecisionCHD™ for mortality prediction

PRELIMINARY DATA PRESENTED ⁽²⁾ · EXPECTED TO COMPLETE IN 3–6 MONTHS

Precision monitoring: uncertainty quantification (UQ) demonstrating robustness of digital PCR in detecting methylation change over time

EXPECTED TO COMPLETE IN 2027

PLANNED

Inform & monitor treatment: use of PrecisionCHD™ to inform treatment and monitor treatment effectiveness

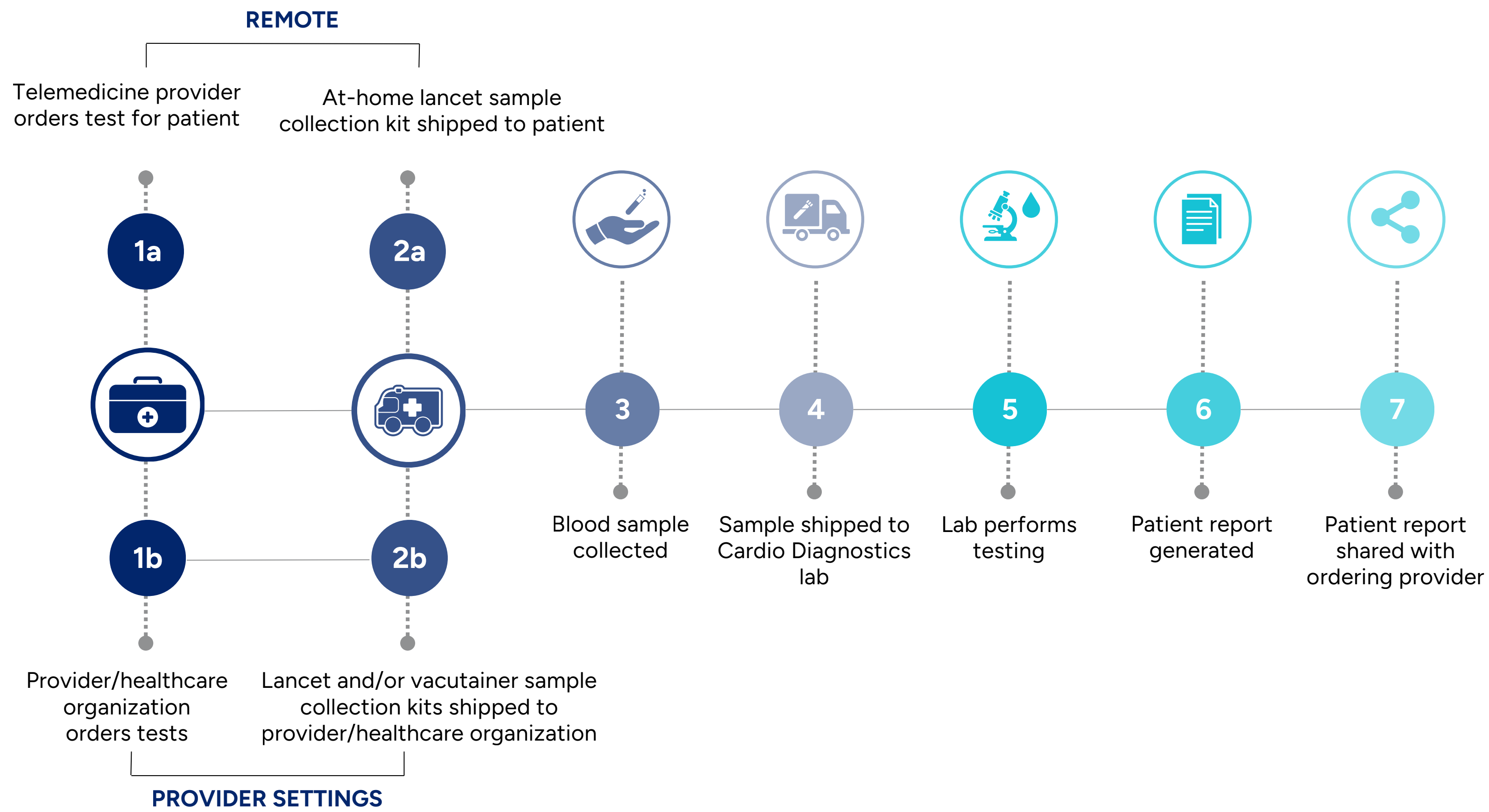
Clinical utility: studies demonstrating the use of the tests to inform and guide patient management

Cost savings & ROI: studies to further demonstrate the financial impact of utilizing the tests

⁽¹⁾ Synergistic Effects of Combining Methylation Data with Imaging Data in Predicting Mortality of Acute Coronary Syndrome (ACS) Patients, poster presented at the American College of Cardiology Annual Scientific Session (ACC.25), 2025

⁽²⁾ Data presented at the American Heart Association Scientific Sessions, New Orleans, LA, November 2025

A Highly Scalable Testing and Reporting Process



In-House Test Processing Has Begun in Our Company-Owned CLIA Lab to **Lower Costs and Increase Testing Capacity**



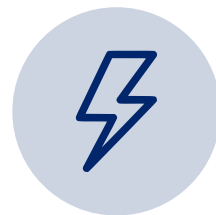
CLIA conditions met

Survey found no deficiencies; state licenses (CA, MD, PA, RI) obtained



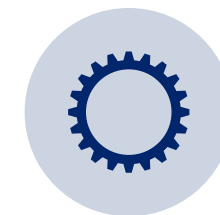
~30% reduction in cost

Initial lab COGS reduction by ~30% with additional reduction expected with scale



~7-10 business days TAT

Turn around time (TAT) from sample receipt



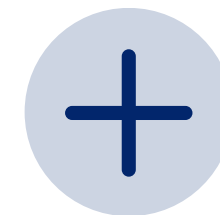
Increased testing capacity

Space to increase infrastructure and automation to increase capacity



Expand research studies

Expand research efforts for ongoing and future studies in precision monitoring of cardiovascular health



Expand testing menu

Leverage lab infrastructure to offer other testing services to diversify revenue

Epi+Gen CHD™ and PrecisionCHD™

US Market Opportunity

Epi+Gen CHD™

\$854 × **146M**

final CMS
payment rate

estimated eligible
Americans ⁽¹⁾

=

~125B

total addressable US market ⁽¹⁾

PrecisionCHD™

\$854 × **60M**

final CMS
payment rate

estimated eligible
Americans ⁽¹⁾

=

~51B

total addressable US market ⁽¹⁾

~40% target gross margin at scale

⁽¹⁾ Internal estimate

TAM was calculated by multiplying the CMS final gapfill rate with the estimated Americans eligible for the test. Price for test can vary for patients and organizations. Market opportunity reflects potential, not current or near-term revenue.

Commercial Targets in the US



Providers and Health Systems

Telemedicine and onsite options primarily with internists, PCPs and preventive cardiologists



Channel Partners

Strategic partnerships focused on increasing awareness, education and access



Employers/Unions

Offering remote and heart health fair options to drive engagement and utilization among employees



Government

Partnering with government departments focused on improving the health of Veterans, military members, and American Indian and Alaska Native communities

Opportunistic Global Expansion Through Partnerships

Partnership progress in India with Aimil Ltd and Dr. Lal PathLabs



Aimil to introduce PrecisionCHD to their extensive healthcare network



Dr. Lal PathLabs will be offering PrecisionCHD and has 290+ clinical labs and 300+ MD pathologists in their internal network

In active discussions for additional international partnerships that could be realized in the near-term



Exploring other partner-led international expansion opportunities in Asia, Middle East and Africa



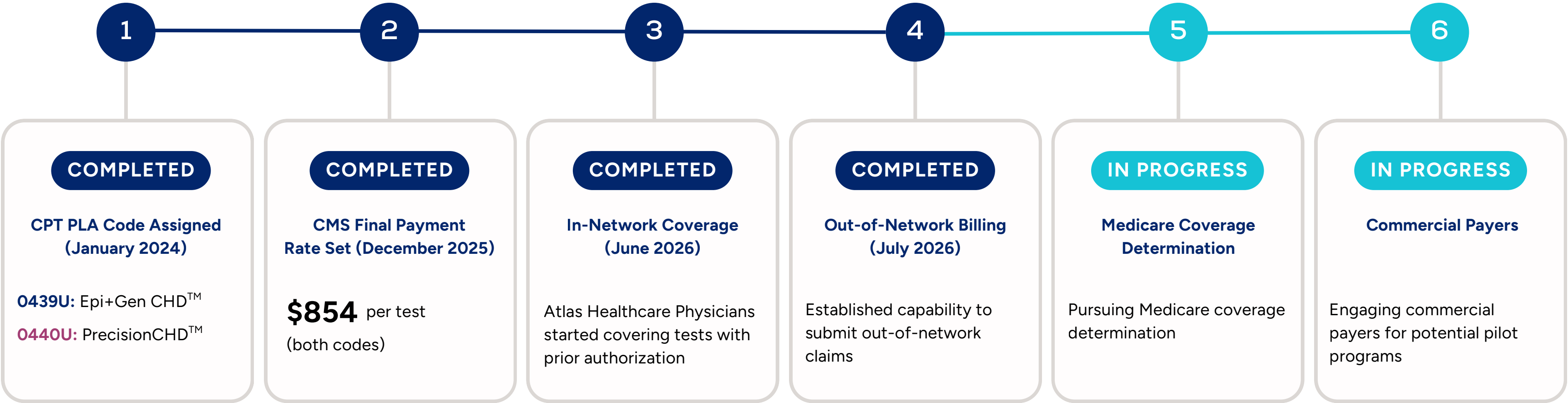
Significant global addressable market opportunity



Opportunity to diversify revenue beyond the US market

Major Reimbursement Milestones Achieved and Underway for Both Tests

● Completed ● In progress



Listed milestones are not exhaustive; US healthcare reimbursement journey is long and complex.

For more information, please email:



investors@cdio.ai

