



PACIFIC EDGE

Annual Shareholders Meeting
Fullwood Room
1 Harrop Street
Dunedin
28 July 2022



IMPORTANT NOTICE AND DISCLAIMER

Important Notice

This presentation has been prepared by Pacific Edge Limited (PEL) solely to provide interested parties with further information about PEL and its activities at the date of this presentation.

Information of a general nature

The information in this presentation is of a general nature and does not purport to be complete nor does it contain all the information which a prospective investor may require in evaluating a possible investment in PEL or that would be required in a product disclosure statement, prospectus or other disclosure document for the purposes of the New Zealand Financial Markets Conduct Act 2013 (FMCA) or the Australian Corporations Act. PEL is subject to a disclosure obligation that requires it to notify certain material information to NZX Limited (NZX) and ASX Limited (ASX) for the purpose of that information being made available to participants in the market and that information can be found by visiting www.nzx.com/companies/PEB and www2.asx.com.au/markets/company/PEB. This presentation should be read in conjunction with PEL's other periodic and continuous disclosure announcements released to NZX and ASX.

Not an offer

This presentation is for information purposes only and is not an invitation or offer of securities for subscription, purchase or sale in any jurisdiction where such offer purchase or sale would not be permitted.

Not financial product advice

This presentation does not constitute legal, financial, tax, financial product advice or investment advice or a recommendation to acquire PEL securities, and has been prepared without taking into account the objectives, financial situation or needs of investors. Before making an investment decision, prospective investors should consider the appropriateness of the information having regard to their own objectives, financial situation and needs and consult an NZX Firm, solicitor, accountant or other professional advisor if necessary.

Forward-looking statements

This presentation contains forward-looking statements that reflect PEL's current views with respect to future events. Forward-looking statements,

by their very nature, involve inherent risks and uncertainties. Many of those risks and uncertainties are matters which are beyond PEL's control and could cause actual results to differ from those predicted. Variations could either be materially positive or materially negative. The information is stated only as at the date of this presentation. Except as required by law or regulation (including the NZX Listing Rules and ASX Listing Rules), PEL undertakes no obligation to update or revise any forward-looking statements, whether as a result of new information, future events or otherwise. To the maximum extent permitted by law, the directors of PEL, PEL and any of its related bodies corporate and affiliates, and their respective officers, partners, employees, agents, associates and advisers do not make any representation or warranty, express or implied, as to the accuracy, reliability or completeness of such information, or the likelihood of fulfilment of any forward-looking statement or any event or results expressed or implied in any forward-looking statement, and disclaim all responsibility and liability for these forward-looking statements (including, without limitation, liability for negligence).

Financial data

All dollar values are in New Zealand dollars unless otherwise stated. This presentation should be read in conjunction with, and subject to, the explanations and views of future outlook on market conditions, earnings and activities given in the announcements relating to the results, and report, for the twelve months ended 31 March 2022.

Effect of rounding

A number of figures, amounts, percentages, estimates, calculations of value and fractions in this presentation are subject to the effect of rounding. Accordingly, the actual calculation of these figures may differ from the figures set out in this presentation.

Past performance

Investors should note that past performance, including past share price performance, cannot be relied upon as an indicator of (and provides no guidance as to) future PEL performance, including future financial position or share price performance.

Investment risk

An investment in securities of PEL is subject to investment risk and other known and unknown risks, some of which are beyond the control of PEL. PEL does not guarantee any particular return or the performance of PEL.

Disclaimer

None of PEL or PEL's advisers or any of their respective affiliates, related bodies corporate, directors, officers, partners, employees and agents, have authorised, permitted or caused the issue, submission, dispatch or provision of this presentation and, except to the extent referred to in this presentation, none of them makes or purports to make any statement in this presentation and there is no statement in this presentation which is based on any statement by any of them. To the maximum extent permitted by law, none of PEL and its advisers, affiliates, related bodies corporate, nor their respective directors, officers, partners, employees and agents makes any representation or warranty, express or implied, as to the currency, accuracy, reliability or completeness of information in this presentation; and none of them shall have any liability (including for negligence) for:

- any errors or omissions in this presentation; or
- any failure to correct or update this presentation, or any other written or oral communications provided in relation to this presentation; or
- any claim, loss or damage (whether foreseeable or not) arising from the use of any information in this presentation or otherwise arising in connection with this presentation or the information contained in it.

By receiving this presentation, you agree to the above terms and conditions.



CHRIS GALLAHER
Chairman



PACIFIC EDGE
CANCER DIAGNOSTICS COMPANY

DIRECTORS



SARAH PARK



ANATOLE MASFEN



BRYAN WILLIAMS



ANNA STOVE



MARK GREEN



TONY BARCLAY

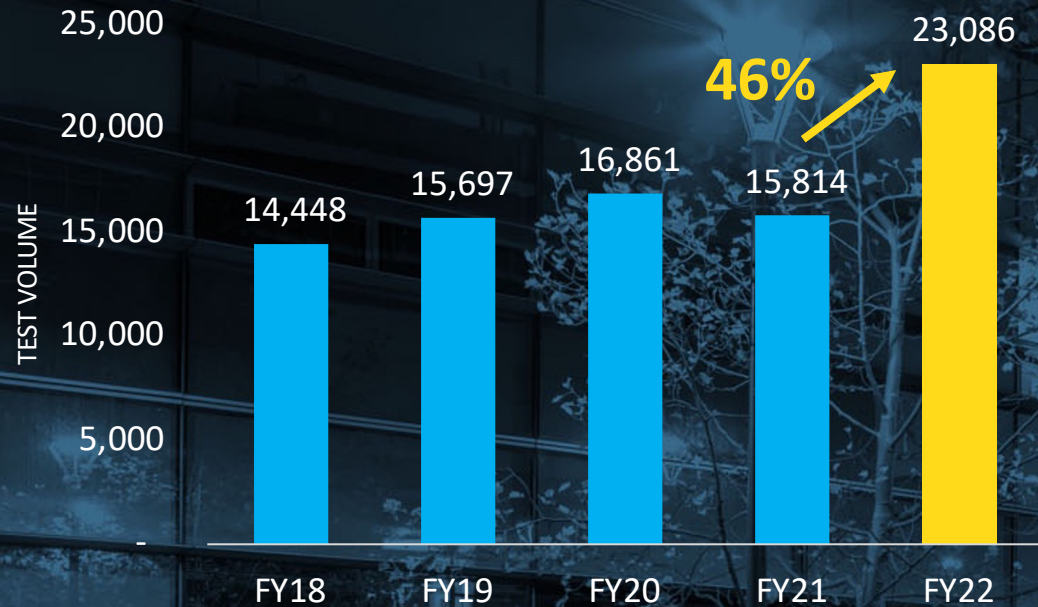
MEETING AGENDA

1. CHAIRMAN AND CEO PRESENTATIONS
2. SHAREHOLDER DISCUSSION
3. RESOLUTIONS
4. GENERAL BUSINESS
5. MEETING CLOSE



FY 22 HIGHLIGHTS: TEST VOLUMES ACCELERATE IN THE PIVOTAL US MARKET

PACIFIC EDGE GLOBAL TEST VOLUMES¹



PACIFIC EDGE OPERATING REVENUE



▲ 59%
US TEST
VOLUMES¹

\$19.8M
NET LOSS AFTER
TAX

\$105.4M
CASH, CASH
EQUIVALENTS²

¹ Testing volume is measure by Total Laboratory (TLT) Throughput including commercial, pre-commercial and clinical studies testing

² Cash, cash equivalents and short-term deposits

NEW EXECUTIVE AND BOARD LEADERSHIP



TONY BARCLAY
Independent Director



DR PETER MEINTJES
Chief Executive Officer

OUTLOOK: INVESTING FOR LONG TERM GROWTH

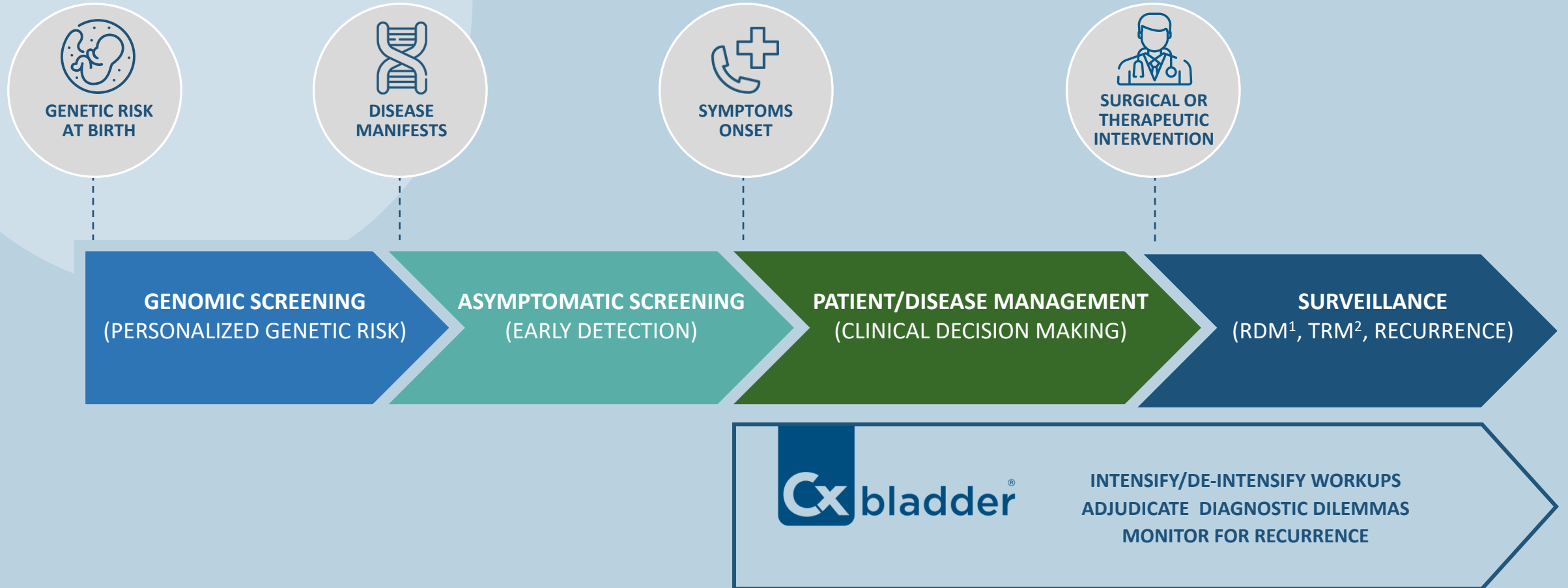


- Directors have noted the sharp shift in global share market sentiment since the start of the year and the impact that this has had on company valuations, particularly among growth companies such as Pacific Edge.
- We remain focused on the things that we can control and that is building long-term sustainable value through the execution of our strategy and prudent management of the capital shareholders have entrusted us with.
- We expect our investment in innovation, evidence, people, and brand to drive growth in total testing volumes, clinical studies enrolment and revenue generation and shareholder value.



DR PETER MEINTJES
Chief Executive Officer

MOLECULAR DIAGNOSTICS VALUE CHAIN: PATIENT JOURNEY



1. RDM: Residual Disease Monitoring
2. TRM: Therapeutic Response Monitoring.

CXBLADDER IN THE PATIENT CARE PATHWAY

Typical standard of care on the patient care pathway

Primary Care Physician

Patient presents with hematuria and clinician cannot rule out cancer. Patient referred to urologist

Urologist

Current guidelines for hematuria evaluation recommend ~95% get cystoscopy¹ ahead of diagnosis & treatment

Urologist

Monitor for recurrence with cystoscopy, frequency varies according to patient presentation

VALUE PROPOSITION

Cxbladder TRIAGE (CxbT) Cxbladder DETECT (CxbD) Cxbladder MONITOR (CxbM)



For use in the **PRIMARY CARE** and **SPECIALIST** settings to de-intensify hematuria workup or rule out urothelial cancer (UC)

Assists clinicians to **safely de-intensify** hematuria evaluation from low incidence populations
Sensitivity 95% / NPV 99%

For use by **SPECIALISTS** to detect the presence of urothelial cancer and adjudicate diagnostic dilemmas

Assists clinicians to **adjudicate diagnostic dilemmas** (e.g. equivocal cystoscopy & atypical cytology) in any patient population
Sensitivity 82% / Specificity 85% / NPV 97%

For use by **SPECIALISTS** to monitor for recurrence at a frequency proportional to risk

Assists clinicians in **monitoring for UC recurrence**. Intended to reduce the frequency of surveillance cystoscopy and improve patient compliance
Sensitivity 93% / NPV 97%

Cx bladder
TRIAGE

Cx bladder
DETECT

Cx bladder
MONITOR

Sensitivity: the likelihood of the test to be positive in a patient with the disease **Specificity:** the likelihood of the test to be negative when the patient does not have the disease; **NPV:** the likelihood of a negative test being a true negative.

¹ AUA Guidelines and Woldu SL, Ng CK, Loo RK, Slezak JM, Jacobsen SJ, Tan WS, et al. (2021a). "Evaluation of the New American Urological Association Guidelines Risk Classification for Hematuria." *J Urol* 205(5): 1387-1393.

UROTHELIAL CANCER IS A SIGNIFICANT GLOBAL HEALTHCARE CHALLENGE

~570K

Annual cases
and growing¹

6TH

Most common
cancer in men¹

US\$7.7b

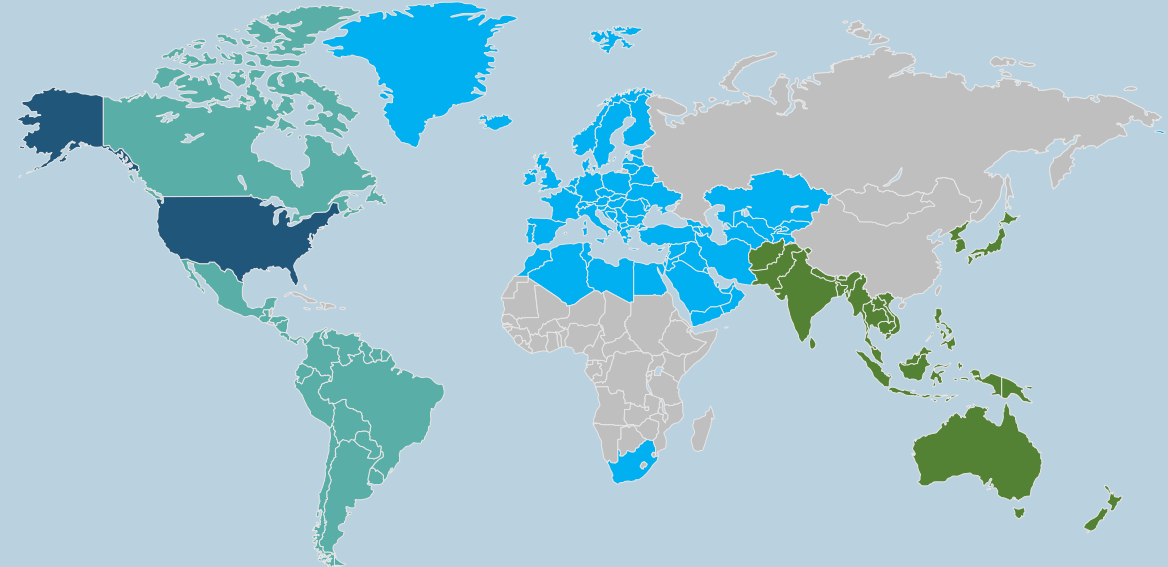
Total
Addressable
Market (TAM)*

~210K

Annual
deaths¹

>70%

Recurrence²



Market opportunity	TAM (\$US)
United States	\$3.5bn
Americas (non-US)	\$0.5bn
EMEA (w/o most of Africa)	\$1.5bn
APAC (w/o China)	\$2.2bn

1. Sung et al. Global Cancer Statistics 2020: GLOBOCAN Estimates of Incidence and Mortality Worldwide for 36 Cancers in 185 Countries CA: A Cancer Journal for Clinicians 2021; 71: 209-249

2. Chamie K, Litwin MS, Bassett JC, et al. Recurrence of high-risk bladder cancer: a population-based analysis. Cancer. 2013;119:3219-3227.

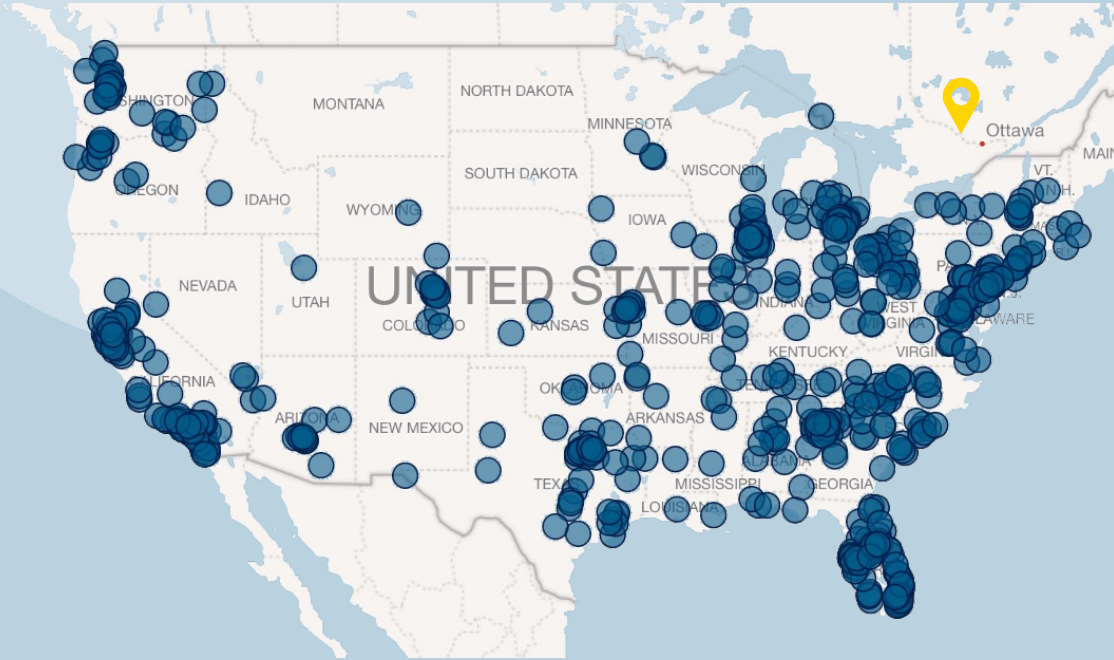
3. *TAM is the Total Addressable Market based on Pacific Edge estimates.

OPERATIONAL AND FINANCIAL PERFORMANCE



STRONG GROWTH IN THE USE PACIFIC EDGE'S LARGEST MARKET

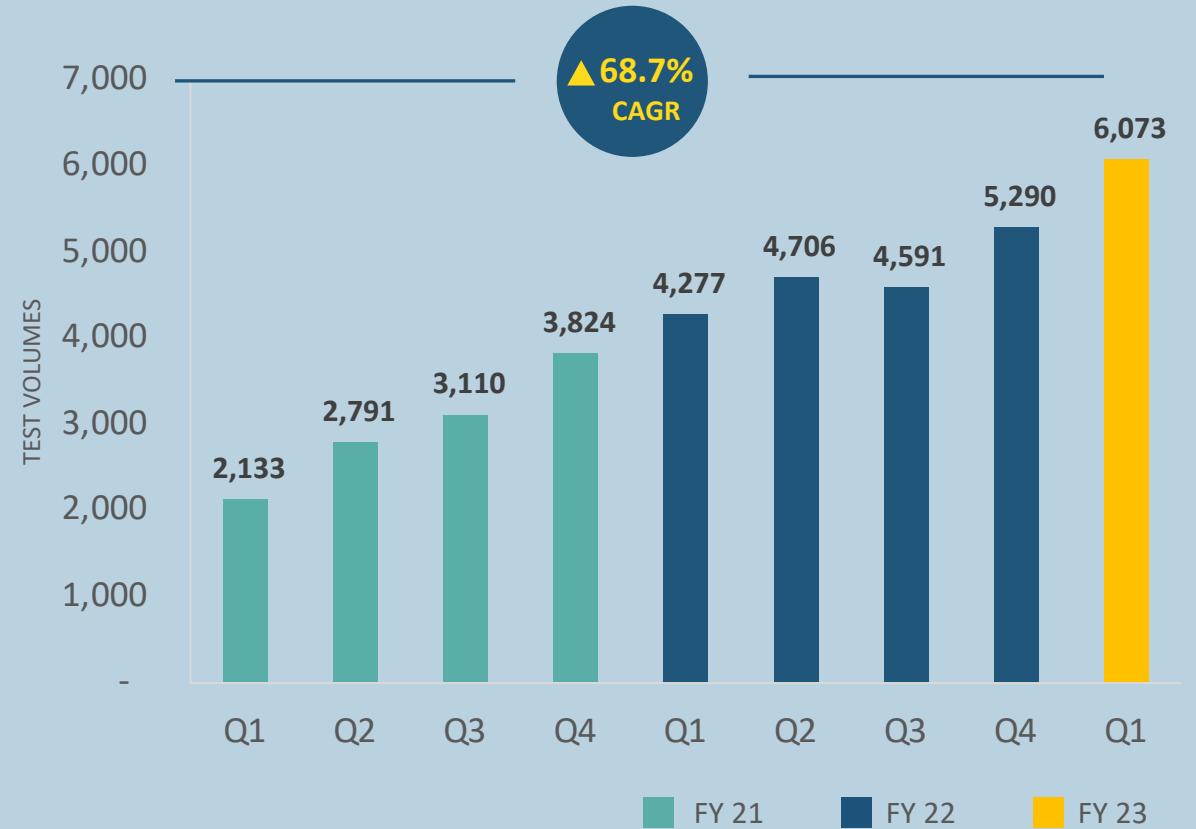
CXBLADDER USED ACROSS THE US



- U.S. Customers
- 📍 Pacific Edge Diagnostics USA, Hershey, Pennsylvania

AMERICAS QUARTERLY TEST VOLUMES¹

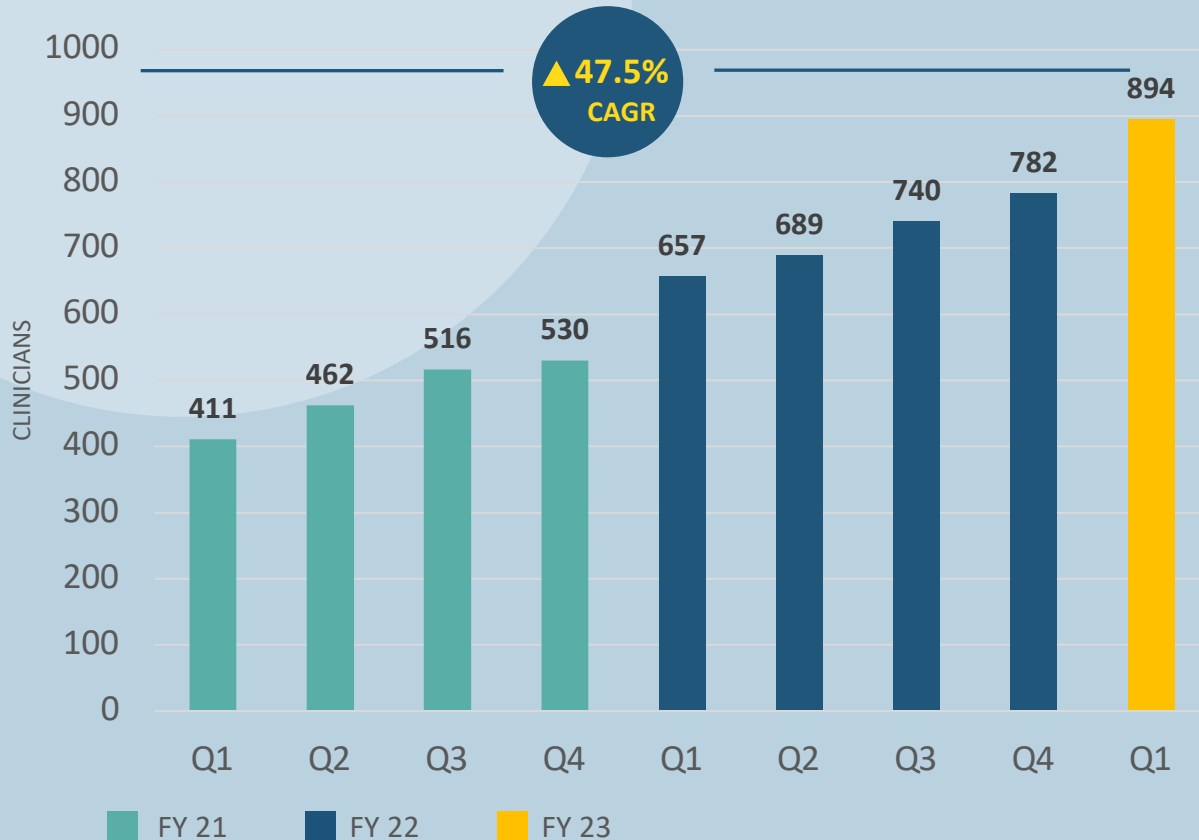
Americas' Commercial Testing represent 84% of FY22 volumes



¹Total Laboratory Throughput including commercial, pre-commercial and clinical studies testing

BUILDING THE ADOPTION OF CXBLADDER BY CLINICIANS

UNIQUE ORDERING CLINICIANS (US)



KEY US PAYORS ACTIVATED



- Centers for Medicare and Medicaid Services (CMS) covers more than 61.5m US citizens over 65 and people on low incomes
- >2/3 of patient population covered by Medicare

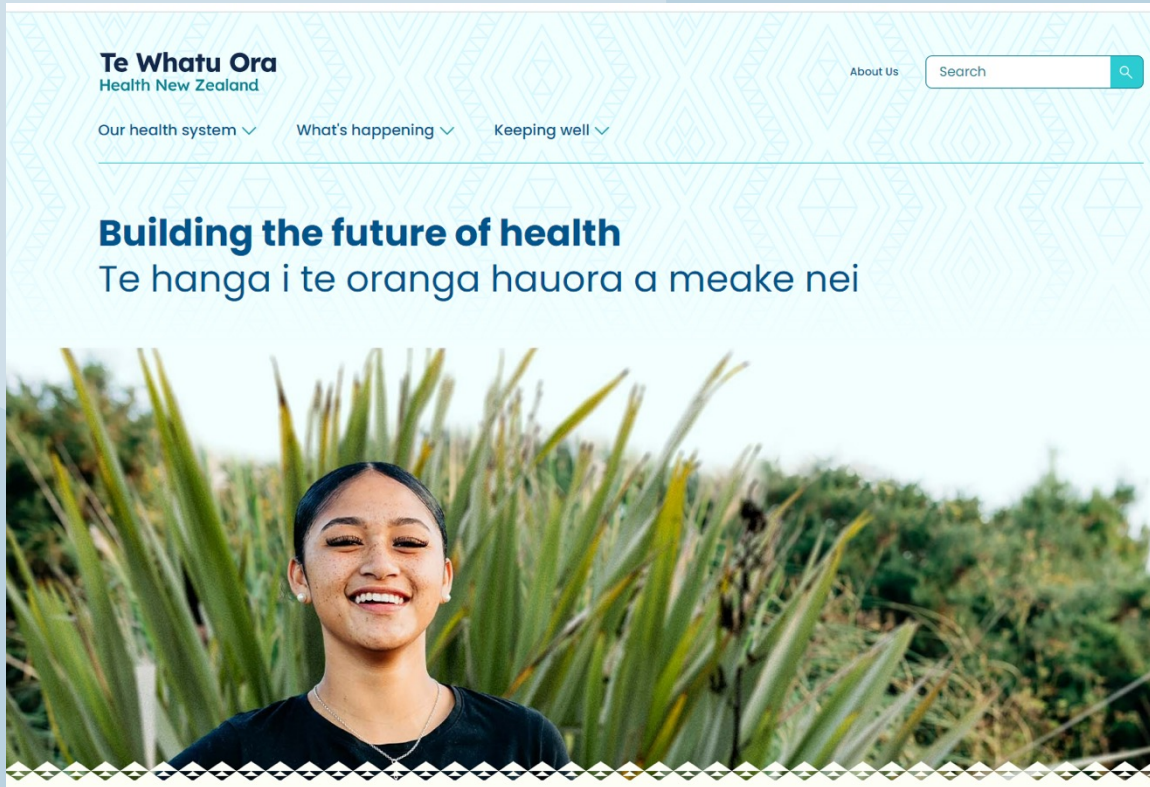


- The Kaiser Health Plan covers over 12.5m members, with >85% of those members in California
- Cxbladder rolled out across clinics in Southern California and being integrated into Kaiser EMR



- The Veterans Health Administration (VHA) within is the second largest integrated healthcare system in the US serving >9m veterans each year
- The DRIVE clinical study is an important engagement with VA urologists to determine utility in a cohort of VA patients

APAC: NEW ZEALAND AT THE FOREFRONT WITH ADOPTION BY PRIMARY CARE



Pacific Edge now has Cxbladder coverage in 15 of the 20 new Te Whatu Ora, Health New Zealand, regions, representing ~75% of the country's population

APAC QUARTERLY TEST VOLUMES¹

Commercial tests represent 82% of FY22 volumes



¹Total Laboratory Throughput including commercial, pre-commercial and clinical studies testing

ACCELERATING INVESTMENT TO CAPTURE THE US OPPORTUNITY

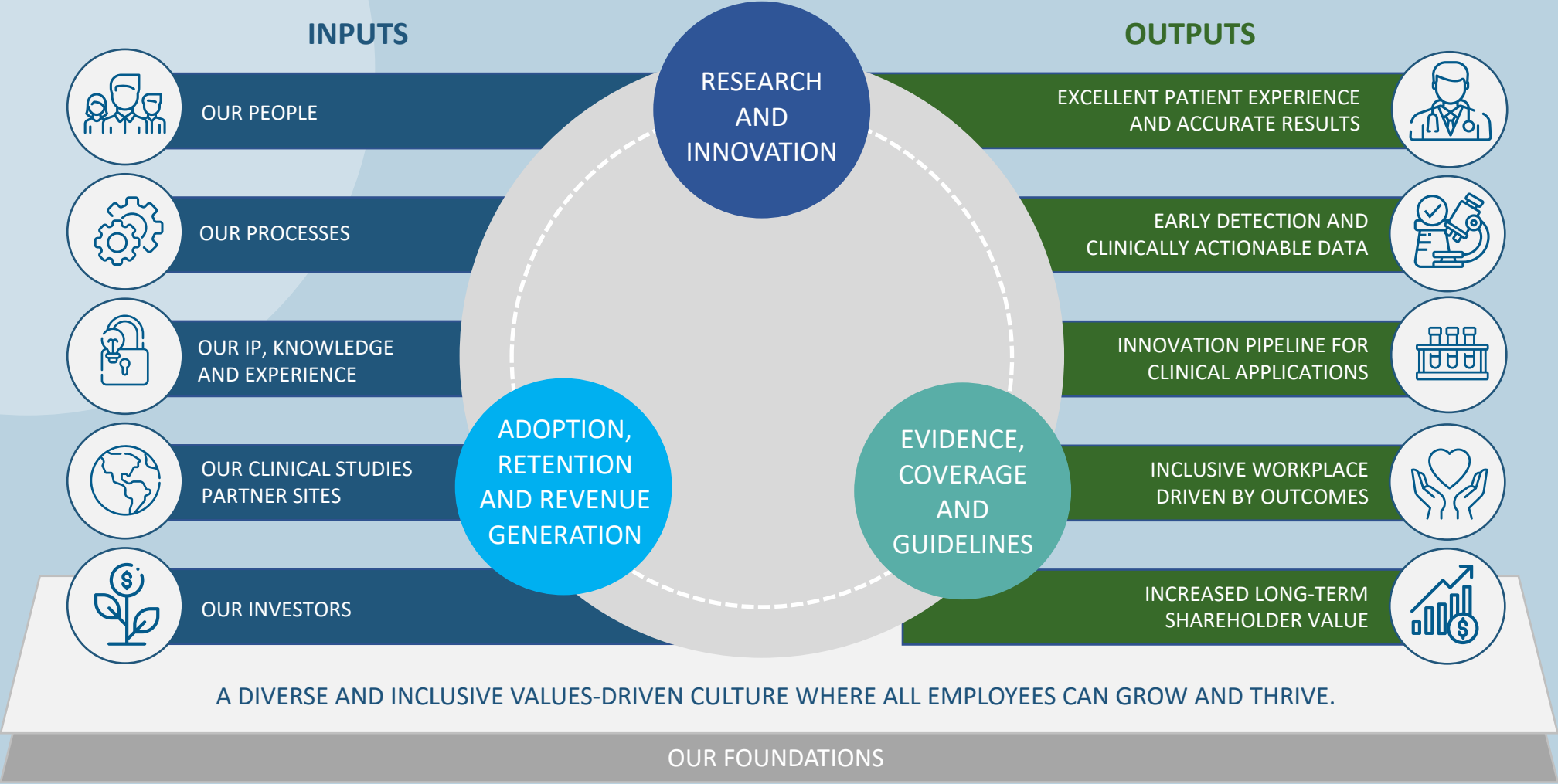
Year to 31 March	2022 \$000	2021 \$000	Variance \$000	Change %
Operating revenue	11,445	7,701	3,744	49%
Total revenue	13,878	10,439	3,439	33%
Operating expenses	(33,666)	(24,662)	(9,004)	37%
Total comprehensive loss	(19,674)	(14,177)	(5,497)	39%
Cash receipts from customers	10,942	6,747	4,195	62%
Net operating cash outflow	(17,552)	(13,570)	(3,982)	29%
Net cash, cash equivalents and short-term deposits	105,412	23,129	82,283	356%

- Operating revenue growth of 49%
- Operating expenses up 37%, with sales and marketing making up 56% of this growth as we invest in future growth
- Cash receipts rise strongly year on year (up 62%), as reimbursement rates continue to increase
- Strong balance sheet following the \$103.5m capital raise in September / October 2021

THE FUTURE: PACIFIC EDGE INVESTING FOR GROWTH



FRAMING OUR INVESTMENT PROGRAM



RESEARCH AND INNOVATION:

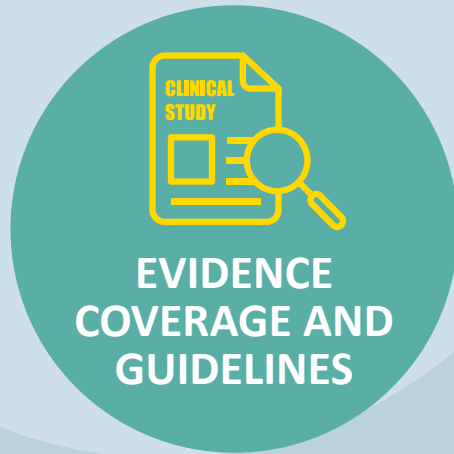
UNDERSTANDING THE ENTIRE COMMERCIALISATION PATHWAY



FOCUS AREAS:

1. Evaluate 'product concepts' to address unmet clinical needs through market research and scientific/clinical advisory boards
2. Evaluate cutting-edge technologies to meet the market requirements of desired product concepts
3. Continue to build a patent portfolio for novel clinical applications of cutting-edge molecular technologies
4. Turn patented technology into clinically-validated molecular diagnostic tools that address an unmet clinical need

EVIDENCE, COVERAGE AND GUIDELINES: CHANGE CLINICAL PRACTICE



FOCUS AREAS:

Generate high-quality clinical validation and utility evidence through clinical studies

Use Clinical Utility evidence to:

- Drive the adoption of Cxbladder by clinicians, insurers and hospitals ahead of guideline inclusion
- Pursue inclusion of Cxbladder in globally-relevant standards and guidelines of clinical care across the breadth of patient pathways
- Foster trusted relationships with key opinion leaders, relevant uro-oncology centers of excellence, professional societies and patient advocacy networks to drive a broader awareness and demand for Cxbladder
- Develop the scientific and clinical credibility of the Cxbladder brand



STRENGTHENING THE CASE FOR CXBLADDER IN KEY GUIDELINES

BEFORE INCLUSION

We use clinical validity and utility evidence to attract interest from opinion-leading clinicians, and payers, drive early adoption of Cxbladder and build momentum for guideline inclusion

- Two studies pending publication
- Five more studies underway
 - STRATA
 - DRIVE
 - DEDUCT
 - LOBSTER
 - MONSTER

INCLUSION

Review



American
Urological
Association



European
Association
of Urology



National Comprehensive
Cancer Network®

AFTER INCLUSION

We use clinical validity and utility evidence to strengthen the language in guidelines supporting the use of Cxbladder to expand patient types eligible for testing

MORE INCLUSIVE GUIDELINES LANGUAGE,
MORE PATIENT TYPES ELIGIBLE FOR SOC TESTING

MORE AND STRONGER UTILITY EVIDENCE

3) ADOPTION, RETENTION AND REVENUE GENERATION



FOCUS AREAS:

1. Diversify sales process to target Strategic Accounts differently, including education and Key Opinion Leader (KOL) engagement activities by our Medical Affairs team
2. Drive protocolized adoption of Cxbladder at the earliest point in the patient care pathway
3. Increase event marketing, sponsorship and marketing communications to amplify our clinical evidence generation within the urology and oncology communities
4. Establish “in-network” or contracted relationships for the reimbursement of Cxbladder with government healthcare funders and private payors
5. Empower patients through patient awareness and patient advocacy initiatives through established societies and our Cxbladder website



FY23 INVESTMENT PROGRAM LINKED TO REVENUE MILESTONES

AMERICAS INITIATIVES

- Expanding Direct Selling Team
- Adding Strategic Account Selling Team
- Adding a new Medical Affairs Team
- Lifting marketing investment
- Improving the Customer experience

APAC INITIATIVES

- Adding remaining DHBs and positioning Cxbladder for nation-wide coverage under *Te Whatu Ora* Health New Zealand
- Driving Cxbladder adoption to primary care in NZ
- Market development through clinical studies in Australia, Singapore
- Commencement of commercial revenue in Australia through hospital and state contracting



Providing actionable clinical information at the earliest point in the patient care pathway

PATIENTS: BUILDING THE CX BRAND AND ADVOCACY



The Bladder Cancer Advocacy Network represents the voice of the patient in the USA

Partnership activity:

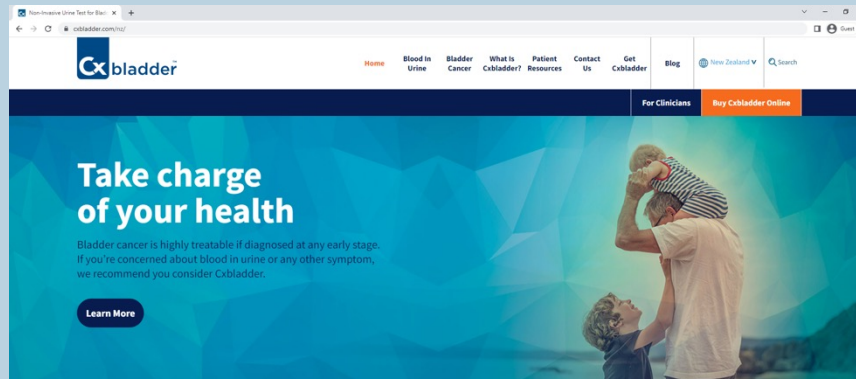
- Sponsorship of Walk to End Bladder Cancer events around the country and thought leadership and networking events
- Co-development of leading patient resources



New Zealand's leading organisation dedicated to reducing cancer incidence, and care

Partnership activity:

- Collaboration on patient resources.
- Promote awareness of bladder cancer symptoms and risk factors among high-risk groups



Evolution of Cxbladder.com as a resource hub for patients and caregivers:

- Growing library of clinical and care-focused articles designed to design to address topics of interest and common questions



A DIVERSE AND INCLUSIVE PERFORMANCE CULTURE

ATTRACTING AND RETAINING TALENT

- Building a performance culture through a shared mission and vision
- Driving engagement across all departments, and management levels for tenured and new staff
- Celebrating and driving diversity at all levels

ESG

- Pacific Edge has a social purpose of improving the detection and management of cancer
- Management of ESG factors are fundamental to our success
- Aiming to improve disclosure, including charting our carbon footprint

BLADDER CANCER AWARENESS MONTH AT PACIFIC EDGE





DAVID LEVISON
Executive Chairman
Pacific Edge Diagnostics USA



SPOTLIGHT ON: STRATEGIES AND TACTICS FOR US MARKET EXECUTION

EXPANDING CAPACITY AND CAPABILITY

TARGET US RELATIONSHIPS

13,790

Practicing urologists¹

1,900

Large urology group practice sites²

>2,000

Clinicians that used Cxbladder in FY22³

AMERICAS INITIATIVES

- **Direct Sales Force:**
 - Up to 9 additional Account Executives and 1 Regional Sales Director to be added to the sales team taking the total to up to 40*
 - New Marketing & Sales Support Managers (+3 FTE)*
 - New Virtual Sales Team (up to +5 FTE)* to enhance the customer experience and streamline test ordering and results delivery
 - Strategic Accounts Sales personnel (up to +2 FTE)
- **Medical Affairs Team:**
 - VP Medical Affairs, leading a team of Medical Science Liaison (MSL) (3-5 FTE)*
 - MSLs are educators and experts on clinical, scientific and medical matters relevant to products and urology in general
 - Drive Key Opinion Leader (KOL) engagement with speakers' bureaus, advisory boards and similar
 - Targeting podium presentations of our clinical evidence at major conferences



¹ American Urological Assn Census 2021, ²BHN Network ³ Company data
*All planned hires subject to achievement of business milestones.

TARGETED AND TACTICAL EXECUTION

ENGAGING WITH CLINICIANS AND CUSTOMERS

50

Urology conferences across the US and APAC

4 + 36

Planned total Sales Execs*

5

New virtual sales team members*

AMERICAS INITIATIVES

- **Marketing Activities:**
 - Conference podiums, presentations, posters
 - Conference advertising/sponsorship
 - Increased and targeted marcom activities
- **Customer Experience:**
 - Electronic Medical Records (EMR) integration – streamlining customer ordering and reporting.
 - PIHSS – continued promotion of our patient in-home sampling system
- **Market Access and Reimbursement:**
 - Establishing medical intent for simplifying EOB, billing and claims processing
 - Agreeing medical policy, prior to “in-network” contracting at VA and Private Payors
 - Ex-US business opportunities in the Americas
- **Performance Management:**
 - Extending access to performance data for sales and service organizations
 - Adoption of focused selling strategies
 - Tracking impact of key activities in sales process



¹ American Urological Assn Census 2021, ² BHN Network ³ Company data
*36 Account Execs and 4 Regional Sales Directors. Executives All planned hires subject to achievement of business milestones.



DR PETER MEINTJES
Chief Executive Officer

BUILDING SHAREHOLDER VALUE



- We are setting the foundations for strong throughput and revenue growth over the upcoming years.
- Operating costs will rise the business, but investment is linked to growth milestones.
- We are focused on long-term shareholder value and we are well positioned to deliver that over the coming years.



CHRIS GALLAHER
Chairman

QUESTIONS

RESOLUTIONS





BRYAN WILLIAMS
Independent Director



PACIFIC EDGE
CANCER DIAGNOSTICS COMPANY

RESOLUTION 1:

That Chris Gallaher, who retires by rotation and is eligible for re-election, be re-elected as a director of the company.

RESOLUTION 1:

That Chris Gallaher, who retires by rotation and is eligible for re-election, be re-elected as a director of the company.

Proxy Votes Received

FOR	OPEN	AGAINST	TOTAL	ABSTAIN
312,476,188 (96.0%)	8,772,307 (2.7%)	4,168,995 (1.3%)	325,417,490	15,039



CHRIS GALLAHER
Chairman



RESOLUTION 2:

That Sarah Park, who retires by rotation and is eligible for re-election, be re-elected as a Director of the Company

RESOLUTION 2:

That Sarah Park, who retires by rotation and is eligible for re-election, be re-elected as a Director of the Company

Proxy Votes Received

FOR	OPEN	AGAINST	TOTAL	ABSTAIN
315,139,015 (96.9%)	8,795,835 (2.7%)	1,262,324 (0.4%)	325,197,174	235,355

RESOLUTION 3:

That Tony Barclay, who was appointed as a Director by the Board during the year, be elected as a Director of the Company.

RESOLUTION 3:

That Tony Barclay, who was appointed as a Director by the Board during the year, be elected as a Director of the Company.

Proxy Votes Received

FOR	OPEN	AGAINST	TOTAL	ABSTAIN
315,303,523 (97.0%)	8,810,804 (2.7%)	1,062,847 (0.3%)	325,177,174	255,355

RESOLUTION 4:

To record the re-appointment of PricewaterhouseCoopers as auditor of the Company and to authorise the Directors to fix the auditors' remuneration for the ensuing year.

RESOLUTION 4:

To record the re-appointment of PricewaterhouseCoopers as auditor of the Company and to authorise the Directors to fix the auditors' remuneration for the ensuing year.

Proxy Votes Received

FOR	OPEN	AGAINST	TOTAL	ABSTAIN
313,744,228 (96.4%)	8,803,443 (2.7%)	2,861,689 (0.9%)	325,409,360	23,169

VOTING



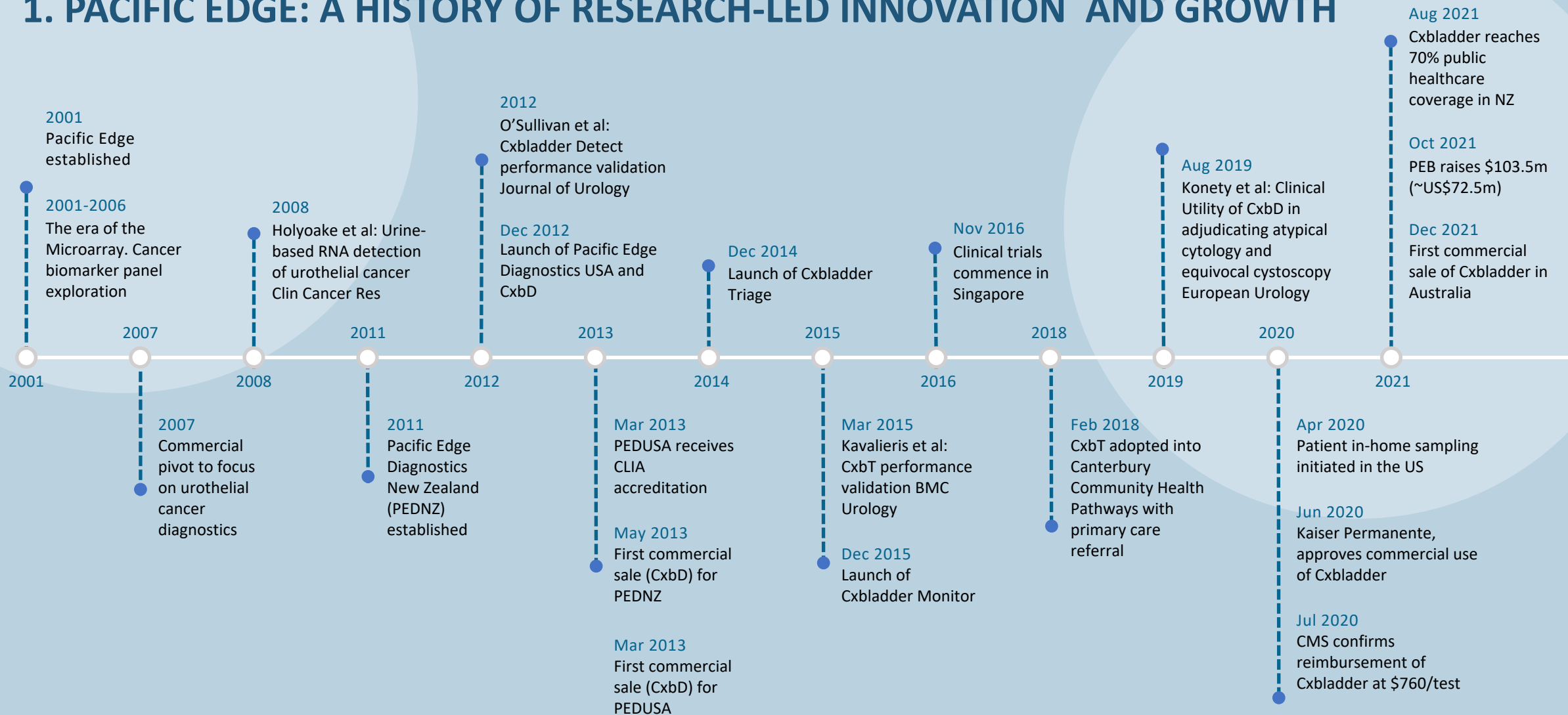
GENERAL BUSINESS

MEETING CLOSE

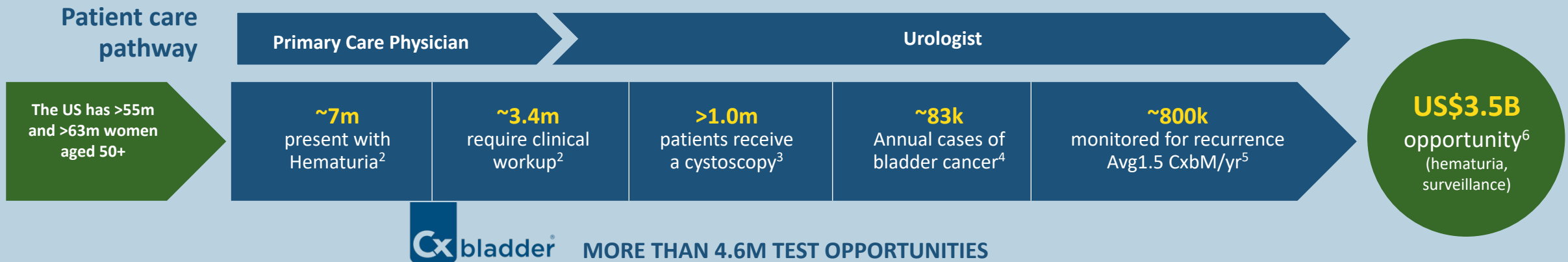
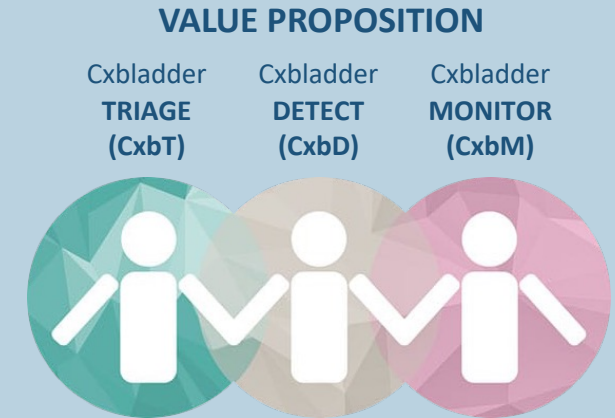


APPENDIX

1. PACIFIC EDGE: A HISTORY OF RESEARCH-LED INNOVATION AND GROWTH



2. UROTHELIAL CANCER IN THE US MARKET



¹ American Cancer Society

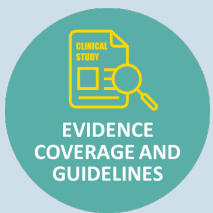
² Presentation from Dr Sia Daneshmand (Director of Urologic Oncology and Clinical Research, USC) July 2019 2. NIH National Cancer Institute, 2021 4. Bladder Cancer Advocacy Network, 2017

³ Kenigsberg, A, et al. The Economics of Cystoscopy: A Microcost Analysis, Urology 157: 29-34, 2021.

⁴ National Cancer Institute 2021 forecast

⁵ Pacific Edge Estimate

⁶ Pacific Edge estimates at US\$760/Per test



3a. GLOBAL GUIDELINES PIVOTAL TO THE WIDESPREAD ADOPTION OF CXBLADDER

Recognition in national guidelines deepens and accelerates commercial use of Cxbladder tests and entrenches coverage by nationally relevant healthcare institutions.



American
Urological
Association

- Most influential and largest urological association in the world
- U.S. based - 23,000 members worldwide.
- Standards of care relevant to Cxbladder:
 - Hematuria and micro-hematuria management
 - Non-muscle invasive bladder cancer (NMIBC). (Standard makes an allowance for the use of biomarkers in surveillance)
- Guidelines reviewed as new evidence emerges
- Pacific Edge can influence this process by publishing new clinical evidence

www.auanet.org



European
Association
of Urology

- Leading urologic authority in Europe
- Netherlands-based, 18,000 members
- Standards relevant to Cxbladder
 - Non-muscle invasive bladder cancer (NMIBC)
 - Guidelines loosely followed in New Zealand, Australia and Singapore, but localised at a national and regional level
- Guidelines recently reviewed with favourable biomarker language and are updated regularly

www.uroweb.org

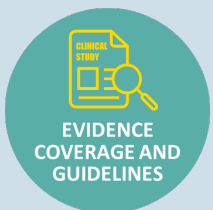


National Comprehensive
Cancer Network®

- US-based not-for-profit alliance of 32 leading US cancer centres
- Bladder cancer standard suggests biomarkers may be considered during surveillance of high-risk non-muscle-invasive bladder cancer
- Guidelines reviewed annually

www.nccn.org



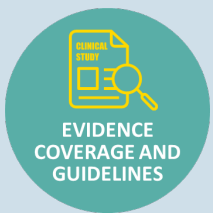


3b. CLINICAL EVIDENCE GENERATION TOWARDS GUIDELINE INCLUSION (1/2)

STUDY	AIM	LOCATIONS	ENROLLED SITES*	STATUS**
US Primary study	Prospective, single-arm, observational study to develop clinical evidence for Cxbladder tests in facilitating early detection, intensifying or de-intensify hematuria evaluation and assistance in adjudicating equivocal cystoscopy	USA	12/12	Enrolment complete Analysis complete Publication pending
Singapore Study	Prospective, single-arm, observational study to develop clinical evidence for Cxbladder tests in facilitating early detection, intensifying or de-intensify hematuria evaluation and assistance in adjudicating equivocal cystoscopy	Singapore	4 / 4	Enrolment complete Analysis complete Publication pending
STRATA (formerly RCT)	<p><u>S</u>afe <u>T</u>esting of <u>R</u>isk for <u>A</u>symptoma<u>T</u>ic Microhematuria</p> <p>Demonstrate the clinical utility of Cxbladder using a prospective, two-arm randomized design to safely risk-stratify patients and rule out from further hematuria evaluation</p> <ul style="list-style-type: none"> Safely risk stratifying patients in order to rule out from cystoscopy Demonstrate the clinical utility of Cxbladder against the AUA guidelines 	USA Canada	10 / 11	Recruitment re-started after COVID-related delays Full data collected 2023 Q4
DRIVE (formerly VA Study)	<p><u>D</u>etection and <u>R</u>isk Stratification in <u>V</u>eterans Presenting with Hematuria</p> <p>Prospective, single-arm, observational study to demonstrate the performance and utility of Cxbladder tests in risk stratifying Veterans presenting with hematuria</p> <ul style="list-style-type: none"> Demonstrate performance with Veterans and contribute to commercial adoption of Cxbladder for use with Veterans Pivotal for the adoption of Cxbladder by Veterans Affairs but relevant to the AUA Recruitment re-started after COVID-related delays Targeting inclusion of all veterans presenting for evaluation of hematuria 	VA Sites (USA)	7 / 11	Study expanded to get more data on low-risk patients Full data collected mid 2025

*Estimated number of enrolled sites

**All dates are best-case estimates and subject to change



3c. CLINICAL EVIDENCE GENERATION TOWARDS GUIDELINE INCLUSION (2/2)

STUDY	AIM	LOCATIONS	ENROLLED SITES*	STATUS**
DEDUCT	<p>Detection of Disease in the Upper traCT</p> <p>Prospective, single-arm, observational study to validate performance of Cxbladder for the detection of urothelial carcinoma (UC) in the upper tract (UTUC)</p> <ul style="list-style-type: none"> Evaluate Cxbladder to safely avoid ureteroscopy Safely risk stratify patients suspected to have UTUC and avoid unnecessary ureteroscopy and radiation exposure through imaging Targeting inclusion of Cxbladder utility for UTUC in AUA guidelines 	USA	0 / 4	Pilot data analysed in early 2024 – decision point to expand the study
LOBSTER	<p>Longitudinal Bladder Cancer Study for Tumor RecurRence</p> <p>Prospective, single-arm, observational study to evaluate the performance characteristics and clinical utility of CxbM in a new surveillance protocol vs standard of care over four visits</p> <ul style="list-style-type: none"> Safely risk stratify patients under surveillance for recurrence of UC Safely alternate CxbM with cystoscopy for intermediate and high-risk patients under surveillance for recurrence of UC Targeting AUA guidelines inclusion for biomarkers as an alternative to cystoscopy in a surveillance setting 	USA (including some VA sites) Australia	2 / 10	First patient expected in 2022 Q2
MONSTER	<p>MONitoring Study of post-Treatment Effectiveness for Residual Disease</p> <p>Single-arm, observational study to validate the performance characteristics of Cxbladder against white light cystoscopy during surveillance of UC</p> <ul style="list-style-type: none"> Christchurch District Health Board study to measure tumor burden To safely risk stratify patients for residual disease prior to the 6-week re-resection for high grade patients or the 3-month flexible cystoscopy check for all patients 	NZ	0 / 1	In planning, once pilot analysed then consider expansion to USA

*Estimated number of enrolled sites

**All dates are best-case estimates and subject to change



FOR MORE INFORMATION:

Dr. Peter Meintjes
Chief Executive Officer
email: peter.meintjes@pelnz.com

Grant Gibson
Chief Financial Officer
email: grant.gibson@pelnz.com

Pacific Edge
87 St David Street, PO Box 56, Dunedin, New Zealand
P +64 3 479 5800 F +64 3 479 5801
email: investors@pacificedge.co.nz
www.pacificedgedx.com