

Fraido

**Radical improvements in invasive
access procedures.**

Endotracheal Intubation

Endotracheal Intubation is fundamental to securing the airway, yet the procedure still comes with notable **challenges** and **clinical risks**.

Likelihood of complications increases as the number of **failed attempts** grows^[1].

Attempt	Likelihood of complications
2	x 4.4
3	x 7.4
4	x 13.9

Significant **costs** are associated with the **management of** intubation-related **complications**^[2].

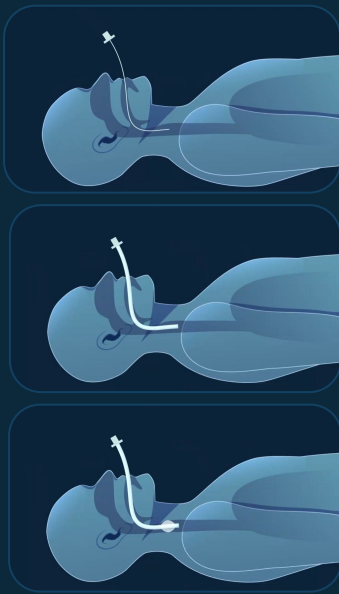
\$890 M annually in **Emergency Settings** throughout the **USA**.

[1]: April MD, Schauer SG, Nikolla DA, Casey JD, Semler MW, Ginde AA, Carlson JN, Long BJ, Brown CA 3rd. Association between multiple intubation attempts and complications during emergency department airway management: A national emergency airway registry study. Am J Emerg Med. 2024 Nov;85:202-207. doi: 10.1016/j.ajem.2024.09.014. Epub 2024 Sep 11. PMID: 39288499.

[2]: Estimating the Economic and Absolute Number of Complications Associated with Emergency Intubations Performed Outside the Operating Room: A Methodology for Estimating the Burden in the United States.

Our Patented Solution

A **fully mechanical** principle for a **controllable diameter**



- Inserted thin
- Expanded once in place
- Adaptable during ventilation
- Collapsible for safer extubation

Shaping the Next Decade of Airway Management

Our confidence comes from **building with clinicians** and designing for **where the market is headed**, not where it is today.

Co-developed with clinicians to directly reflect **real procedural experience**

Engineered to meet the **needs and expectations** of frontline users

Integrates critical elements from the **Difficult Airway Society Guidelines**

Designed to **anticipate** emerging procedural and **market trends** for rapid adoption

Shaping the Next Decade of Airway Management

Not an incremental improvement, but a radical shift in the approach

Collapsible Diameter

Current devices must be inserted at full diameter; ours collapses for easier, safer entry.

Guided Insertion

A built-in stylet guides placement for greater first-attempt success.

Visibility

A slim profile and no laryngoscope to maintain full visibility throughout.

Adjustability

Real-time adjustability eliminates the need for tube exchanges, by adapting to changing clinical needs.

Business Model

Razor & Blade business model

Reusable **Videostylet**

Sold in partnership with a second company

Consumable **Endotracheal Tube**

Produced and sold by Fraido

Reliance on an established distributor

TOTAL ADDRESSABLE MARKET

\$3.1B

Global Market Size

CAGR 6.3%

5-YEAR TARGET

€35M

in sales by 2035

1.4M units / year

5-YEAR MARKET PENETRATION

Difficult Intubation

18% 9%

EU

US

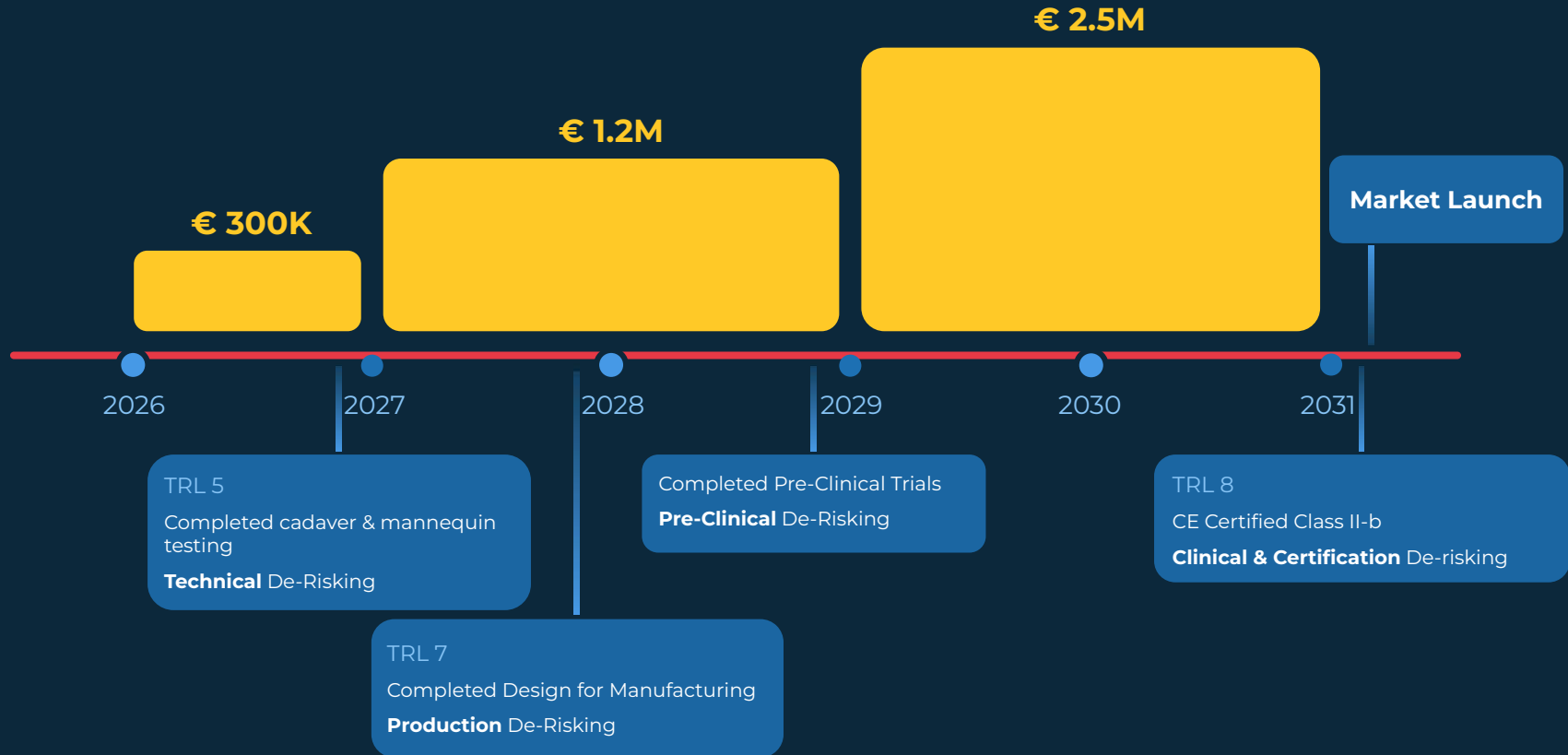
Nominal Intubation

3% 0.5%

EU

US

Timeline: Funding & Regulatory



Team & Traction

TEAM



Antonio Maria Vizioli

**CEO
&
A&E Nurse**

Elia Fregonese

**CTO
&
Mat & Nanotech Engineer**

TRACTION

LOI Signed

Anesthetists from

Aosta - Florence - Milan - Padua
Perugia - Ravenna - Rome
Trento - Turin - Verona

CLINICAL PARTNERS

Verona Cadaver Lab

R&D PARTNER

Polytechnic of Milan

ADVISORS

Prof. Giacomo Bellani

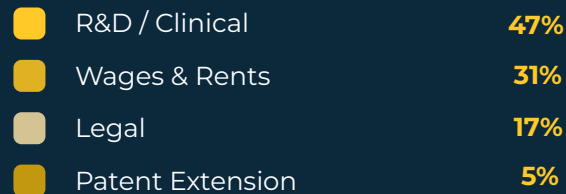
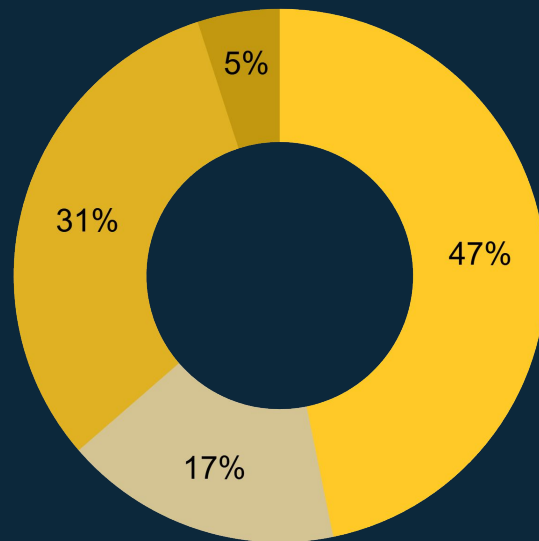
Dr. Roberto Righetti

Dr. Marco Garroni

Current Needs

SAFE Round

€300K



Platform of Devices

Built on a versatile **core principle**, our technology can be tailored for a variety of **invasive access** applications.

Airways

- Endotracheal Intubation
- Lung selective Intubation
- Tracheostomy

Vascular

- Structural Heart
- Aneurysm Treatment
- Extracorporeal Oxygenation
- Pacing Devices

Drainage

- Abdominal Drainage
- Thoracic Drainage
- Urethral Catheter

Let's Transform Invasive Access

Together,
we can redefine safety and simplicity in invasive access.

Questions? Let's talk.

info@fraido.it