CARDIAC RHYTHM MANAGEMENT

Product Performance Report

Important Patient Management Information for Physicians

2024

2nd Edition – Issue 91



CRM Product Performance Report

Legacy Models

Introduction	3	2024
Method for Estimating CRT, ICD, and IPG	7	2nd Edition
Device Performance		Issue 91
CRT-D	12	
CRT-P	45	Publish Date:
ICD	54	20 November 2024
IPG	94	
Methods for Estimating TPS Performance (Micra)	118	Cutoff date for this edition is 31 July 2024 for Lead Study data and 04 November 2024
TPS	122	for all other data, unless otherwise stated.
Method for Estimating Lead Performance	126	
Pacing Leads	132	
Defibrillation Leads	146	
Left Heart Leads	159	
Epi/Myocardial Leads	169	
VDD Single Pass Lead	172	
Method for Estimating ICM Performance	173	
ICM	175	
ICD and CRT-D Charge Time Performance	176	
Charge Time	177	
Customer Communications	182	
Education Briefs	223	

228

Our Commitment to Quality

Medtronic was founded in 1949 and has grown to become a global leader in medical technology. Seeing what a difference medical technology could make in the lives of patients inspired our founder to develop the Medtronic Mission.

The third tenet of the mission is all about quality:

"To strive without reserve for the greatest possible reliability and quality in our products, to be the unsurpassed standard of comparison, and to be recognized as a company of dedication, honesty, integrity, and service."

Regardless of function, all CRM employees play a role in product quality. Whether designing new therapies, sourcing components, manufacturing products, hiring talented people, assigning financial resources to project teams, or serving in one of the hundreds of other roles, every employee has an influence on product quality.

Product performance information is received from many sources through various channels. Medtronic monitors information from many sources from Research and Development through Manufacturing and Field Performance Vigilance.

When a device is returned to Medtronic, laboratory technicians and engineers assess overall device function. Analysis of returned product is performed according to written procedures. These procedures determine the minimum analysis required. The analysis required varies depending on the type of device, age of the device, the associated information received with the device, actual experience with models of similar design, and other factors. Additional analysis is performed as necessary to investigate a performance concern from a customer, or to collect specific reliability data.

When a malfunction is identified, failure analysis is performed to provide the detailed information necessary to investigate possible causes and actions. Medtronic CRM maintains in-house expertise and performs its failure analysis using facilities it owns and supports. This capability permits detailed failure analysis.

Analysis results are compared to original manufacturing records and design intent. Clinical observations are added to laboratory findings to help determine root cause. Each event is then compared to other events. If a pattern is detected, actions are taken to identify a common root cause, assess patient risk and an appropriate course of action.

Medtronic instituted the industry's first product performance reports in 1983 by publishing data on our chronic lead studies. Pacemakers and other devices followed as our performance reporting has constantly evolved based on customer needs and feedback. One thing has been a constant. It is our sincere commitment to communicate clearly, offering timely and appropriate product performance data and reliability information. This has always been and will continue to be our goal.

Contact Information

We invite our customers to use these telephone numbers to call with suggestions, inquiries, or specific problems related to our products.

US 7	Γechnical	Services	Department

tshelp@medtronic.com

Phone:

1 (800) 723-4636 (Tachy)

1 (800) 505-4636 (Brady)

Fax:

1 (800) 824-2362

US Instrumental Technical Services

1 (800) 638-1991

Editorial Staff

Editor

Carrie Schleis, Vice President, CRM Quality

International Technical Centers

Europe, the Middle East and Africa (Heerlen NL)

Please contact local Medtronic Representative.

Japan (Tokyo)

Please contact local Medtronic Representative.

Australia-New Zealand

au.crdmtechservices@medtronic.com

For questions related to returning explanted product or returning product that shows signs of

malfunction, please contact:

Outside the United States:

Your Medtronic representative or international

technical center at the number above.

Within the United States:

Your Medtronic representative or

CRM Returned Product Analysis Laboratory

Phone: 1 (800) 328-2518, ext. 44800

<u>crdm.returnedproduct@medtronic.com</u>

Trademarks of Medtronic

Adapta®
AdaptivCRT™
Advisa DR MRI®
Advisa®
Amplia MRI™
Astra™
Atrial Lead Position Check™
Attain Ability®
Attain Performa™
Attain Prevail®
Attain Stability™
Attain StarFix®

Attesta™
Azure™
Brava™
CapSure Sense®
CapSure®
CapSureFix Novus™
CapSureFix®
Capture Management®
Cardia™
CareAlert™
CareLink Express™

CareLink™

Compia MRI™
Consulta®
Crome™
EffectivCRT™
Egida™
Encore™
Ensura MRI™
Evera™
LINQ II™
Maximo®

Claria MRI™

Cobalt™

Micra™
Mirro MRI™
MVP®
MyCareLink Heart™
Percepta™
Primo MRI™
Protecta®
Quick Look™
Relia™
Reveal LINQ™
Revo MRI®
Secura®

Secure®
SelectSecure®
Sensia®
Sensing Assurance
Serena™
SmartSync™
Solara™
Sphera™
Sphera™
Sprint Fidelis®
Sprint Quattro®

SureScan™

Syncra®

Transvene
TruRhythm™
Versa®
Virtuoso®
Visia AF MRI™
Viva™
Wavelet™

Introduction

For 41 years, Medtronic has monitored performance via both returned product analysis and multicenter clinical studies.

This Product Performance Report (PPR) presents device survival estimates, advisory summaries, performance notes, and other information pertinent to assessing the performance of Medtronic implantable pulse generators (IPGs), implantable cardioverter defibrillators (ICDs), cardiac resynchronization therapy (CRT) devices, insertable cardiac monitors (ICMs), and implantable pacing and defibrillation leads.

This Product Performance Report has been prepared in accordance with International Standard ISO 5841-2:2000(E). As Transcatheter Pacing Systems (TPS) combine the pacing functions of an IPG with the therapy delivery functions of an implantable lead into a single device implanted inside the heart, TPS is subject to complications similar to pacing leads and malfunctions or battery depletion events similar to an implanted pulse generator (IPG). The TPS performance report has been developed to align with these guidelines to the extent possible due to the unique difference between TPS compared to a typical implantable device or lead.

The survival estimates provided in this report are considered to be representative of worldwide performance.

Survival Estimates

Medtronic, like other companies, monitors CRT, ICD, and IPG device performance using returned product analysis. We also monitor CRT, ICD, and IPG device performance using an active multicenter clinical study.

Returned product analysis is a passive approach to assessing product performance. This approach provides a suitable measure of product performance only when a significant number of explanted products are returned to the manufacturer. Returned product analysis provides a measure of hardware performance, but not necessarily the total clinical performance (e.g., the incidence of complications such as infection, erosion, muscle stimulation, etc. are not estimated).

The survival estimates provided in this report for CRT, ICD, and IPG devices are based on returned product analysis. This approach is suitable because a significant number of explanted generators are returned for analysis.

Lead performance is monitored differently. In contrast to CRT, ICD, and IPG devices, a very small percentage of leads are returned to the manufacturer due to the difficulty of explanting them. For leads, an active clinical study provides more accurate survival estimates compared to estimates based solely on returned product analysis.

Survival estimates for leads are based on clinical observations recorded via Medtronic's PAN Registry. This multicenter clinical study is designed to record clinical observations representative of the total clinical experience. Therefore, the lead survival estimates include both lead hardware failure and lead-related medical complications, and do not differentiate a lead hardware failure from other clinical events such as exit block, perforation, dislodgement, or concurrent pulse generator failure.

Transcatheter Pacing Systems are monitored differently. Transcatheter pacing systems (TPS) combine the pacing functions of an IPG with the therapy delivery functions of an implantable lead into a single device implanted inside the heart. To account for the shortfalls of returned product analysis due to a very small percentage of devices being returned, a study of de-identified product data on the Medtronic CareLink™ network is used. The number of devices enrolled and transmitting actively enables a population large enough to give a representative volume of normal battery depletions and to provide insight into the complications that may occur after the device was successfully implanted. TPS survival estimates include both product failures and device-related medical complications and do not differentiate product failures from these complications such as perforation, dislodgement or elevated pacing thresholds.

Introduction continued

ICD Charge Times

Since May 2000, Medtronic has provided important information on charge time performance of ICDs. The information provided in this report shows how ICD charge time can vary during the time a device is implanted. The information is presented in graphical format showing charge time as a function of implant time. The data for charge times are collected from devices enrolled in the PAN Registry.

Customer Communications - Advisory Summaries

This Product Performance Report includes summaries of all Customer Communications classified as Advisories applicable to the performance of the products included in the report. An advisory is added to the report when any product affected by the advisory remains in service and at risk of experiencing the behavior described in the advisory. The advisory will remain in the report until Medtronic estimates no product affected by the advisory remains active, or the risk of experiencing the behavior described in the advisory has passed.

For most advisories, the products subject to the advisory retain essentially the same survival probability as the products of the same model(s) not affected by the advisory. For those advisories where the survival probabilities of the affected and non-affected populations do differ significantly, Medtronic will provide separate survival data for each population. The separate survival data will remain in the report until Medtronic estimates no affected product remains in active service.

Customer Communications - Performance Notes

This report concludes with a number of Customer Communications classified as Non-Advisory Performance Notes developed by Medtronic to provide additional product performance information relevant to follow-up practice and patient management.

Customer Communications - Product Education Briefs

These communications are educational in nature and typically elaborate on information found in the Instructions for Use (IFU) or other approved labeling materials. A product education brief typically serves to clarify information found in labeling that may be misunderstood or misinterpreted by physicians or healthcare professionals. Product education briefs do not provide new patient management guidance, but may be used to reinforce existing recommendations already discussed in the IFU.

How You Can Help

Medtronic urges all physicians to return explanted products and to notify Medtronic when a product is no longer in use, regardless of the reason for explant or removal from use. The procedures for returning products vary by geographic location.

Mailer kits with prepaid US postage are available for use within the United States to send CRTs, ICDs, IPGs, ICMs, and leads to Medtronic's Cardiac Rhythm Management (CRM) Returned Product Analysis Lab. These mailers are sized to accommodate the devices and leads from a single patient or clinical event and are designed to meet US postal regulations for mailing biohazard materials.

If the product being returned is located outside the United States, please contact your local Medtronic representative for instructions.

Medtronic also requests the return of explanted products from non-clinical sources, such as funeral homes, and will assume responsibility for storage and disposal of the product once received.

Introduction continued

Mailer kits can be obtained by contacting the Returned Product Lab. For information on how to contact the Lab, refer to the Contact Information page of this report.

We continually strive to improve this CRM Product Performance Report. In keeping with this philosophy, we ask for your suggestions on the content and format of this report, as well as any information you have regarding the performance of Medtronic products. For information on how to comment on this report, see the Contact Information page.

Overview of Survival Analysis

Medtronic uses the Cutler-Ederer actuarial life table method for devices, standard actuarial method for TPS and Kaplan-Meier for leads to estimate the length of time over which they will perform within performance limits established by Medtronic. This probability to perform within performance limits over time is called the survival probability.

Devices and leads are followed until an event occurs where the device or lead ceases to operate within performance limits. The length of time from implant to the event is recorded for individual devices and leads in the population sample. The population sample for CRT, ICD, and IPG devices is made up of patients whose devices are registered as implanted in the United States. For leads, the population sample is the patients enrolled in our multicenter, international prospective Product Surveillance Registry. For TPS, the population is the de-identified devices on the Medtronic CareLinkTM network.

For CRTs, IPGs and ICDs, the events can be normal battery depletion or a device malfunction. For leads, the events are complications as defined in the study protocol. For TPS, the events are complications or malfunctions as defined in the methods for estimating.

The actuarial life table method allows Medtronic to account for devices and leads removed from service for reasons unrelated to performance and for device and leads still in service. Devices and leads removed for reasons unrelated to performance or are still in service are said to be suspended. Examples of devices and leads removed from service for reasons unrelated to performance include:

- Removed to upgrade the device or lead
- No longer in service due to the death of the patient for reasons unrelated to the device or leads
- Implanted in patients who are lost to follow-up

For each suspension, the device or lead has performed within performance limits for a period of time, after which its performance is unknown.

Confidence Intervals

Since survival curves are based on a sample of the device and lead population, they are only estimates of survival. The larger the effective sample size, the more confident the estimate. A confidence interval can be calculated to assess the confidence in an estimate. In the Product Performance Report, Medtronic provides a 95% confidence interval. This can be interpreted as meaning that 95% of the time, the true survival of the device will fall somewhere in the interval.

Survival Curves in the Product Performance Report

Since the survival estimate can become very imprecise with small effective sample sizes, Medtronic truncates the survival curve when the effective sample size is less than 100 for CRTs, ICDs, and IPGs, and when the number entered is less than 50 for leads. The survival charts in the Product Performance Report show the effective sample size for

Introduction continued

each year interval where Medtronic has experience. When the effective sample size reaches 100 for CRTs, ICDs, and IPGs or when the number entered reaches 50 for leads, the next data point is added to the survival curve.

Although the report provides tabular data in one-year intervals, the device curves are actually computed and plotted using the Cutler-Ederer method and 1-month intervals (for CRT, ICD, and IPG devices), the TPS curves are actually computed and plotted using the standard actuarial method and 1-month intervals, and leads curves are computed and plotted using Kaplan-Meier, which uses individual survival times.

A number of references are available for additional information on survival analysis using the Cutler-Ederer life table method.²

¹Lee, Elisa T. (2003) Statistical Methods for Survival Data Analysis – 3rd Edition (Wiley Series in Probability and Statistics).

²Klein, John P., Moeschberger, Melvin L. Survival Analysis Techniques for Censored and Truncated Data, New York: Springer-Verlag New York, Inc., 1997.

The performance of CRT, ICD, and IPG devices is expressed in terms of device survival estimates, where "survival" refers to the function of the device, not the survival of the patient. These survival estimates are intended to illustrate the probability that a device will survive for a given number of years without malfunction or battery depletion.

The survival estimates are determined from the analysis of Medtronic Cardiac Rhythm Management (CRM's) United States device registration data and United States returned product analysis data. These data are presented graphically and numerically.

Because this analysis is based on returned product analysis, the performance data does not reflect any device-related medical complications such as erosion, infection, muscle stimulation, or muscle inhibition.

Categorization of Depleted and Malfunctioning Devices for Survival Analysis

For survival estimation, every device analyzed in the CRM Returned Product Analysis laboratory is assigned to one of three categories. The device 1) is functioning normally, 2) has reached normal battery depletion, or 3) has malfunctioned. This categorization is combined with data from our device registry for the total number of implants and the implant durations to create the survival curves presented on the following pages.

Definition of Malfunction

In alignment with industry guidance, Medtronic CRM considers a device as having malfunctioned when the device is removed from service and the analysis shows that any parameter was outside the performance limits established by Medtronic while in service.

Devices damaged after explant, damaged due to failure to heed warnings or contraindications in the labeling, or damaged due to interaction with other implanted devices (including leads) are not considered device malfunctions.

A device subject to a safety advisory is not considered to have malfunctioned unless it has been found, through analysis, to have performed outside the performance limits established by Medtronic.

Not all malfunctions expose the patient to a loss of therapy. Some malfunctions included in the following survival estimates may not have been detected at all by the physician or the patient. All malfunctions, however, are included in the survival estimates and provide important feedback to our product development organization.

To provide insight into the nature of malfunctions, each malfunction is categorized as Malfunction with Compromised Therapy Function or Malfunction without Compromised Therapy Function.

For this report, Normal Battery Depletion, Malfunction with Compromised Therapy Function, and Malfunction without Compromised Therapy Function are defined as follows:

Normal Battery Depletion - The condition when:

 (a) a device is returned with no associated complaint and the device has reached its elective replacement indicator(s) with implant time that meets or exceeds the nominal (50 percentile) predicted longevity at default (labeled) settings

Or

(b) a device is returned and the device has reached its elective replacement indicator(s) with implant time exceeding 80% of the expected longevity calculated using the available device setting information

Or

(c) a device is taken out of service without an associated complaint and with evidence the battery reached its elective replacement indicator(s).

Medtronic CRM establishes expected longevity by statistically characterizing the power consumed by the device and the power available from the device battery. This characterization is applied to a number of parameter configurations. The statistical mean value minus three standard deviations is used as the expected longevity for determining if a battery depleted normally. The actual longevity achieved for any device while implanted will depend on the actual programmed parameters and patient factors, and may differ significantly from these estimates.

Malfunction with Compromised Therapy Function

The condition when a device is found to have malfunctioned in a manner that compromised pacing or defibrillation therapy (including complete loss or partial degradation), while implanted and in service, as confirmed by returned product analysis.

Examples: Sudden loss of battery voltage; accelerated current drain such that low battery was not detected before loss of therapy; sudden malfunction during defibrillation therapy resulting in aborted delivery of therapy, intermittent malfunction where therapy is or may be compromised while in the malfunction state.

Malfunction without Compromised Therapy Function

The condition when a device is found to have malfunctioned in a manner that did not compromise pacing or defibrillation therapy, while implanted and in service, as confirmed by returned product analysis.

Examples: Error affecting diagnostic functions, telemetry function, data storage; malfunction of a component that causes battery to lose power quickly enough to cause premature battery depletion, but slowly enough that the condition is detected through normal follow-up before therapy is lost; mechanical problems with connector header that do not affect therapy.

Expanded Malfunction Detail

The malfunctions are further divided into categories that identify the subject area of the malfunction. The malfunctions are divided into the following subject areas:

Battery – Findings linked to the battery and its components

Device-Related Current Pathway – Findings confirmed through device or device memory returns linked to reduced or no energy shocks and other effects (e.g., 50% drop in daily pacing lead impedance measurements not due to a lead issue)

Electrical Component – Findings linked to electrical components such as integrated circuits, resistors, capacitors, diodes. etc.

Electrical Interconnect – Findings linked to the connections between electrical components such as wires, solder joints, wire bonds, etc.

Possible Early Battery Depletion – Findings where the actual reported implant time is less than 80% of the expected longevity calculated using the available device setting information with no device malfunction observed. There may not be sufficient device setting information to determine conclusively if battery depletion was normal or premature in the absence of a specific root cause finding. However, returned devices meeting the above criteria are conservatively classified as Possible Early Battery Depletion malfunctions.

Software/Firmware – Findings linked to software or firmware function

Other – Findings related to other components such as insulators, grommets, setscrews, and packaging, and findings where analysis is inconclusive.

Returned Product Analysis Process

Analysis of returned product or device memory data is performed according to written procedures. These procedures determine the minimum analysis required. The analysis required varies depending on the type of device, age of the device, the associated information received with the device, actual experience with models of similar design, and other factors. Additional analysis is performed as necessary to investigate a performance concern from a customer, or to collect specific reliability data.

When a device is returned with a performance concern from a customer, the general analysis process includes a preliminary analysis of the device in its as-received condition, followed by an automated functional test using test equipment equivalent to the equipment used in manufacturing.

When a malfunction is identified, failure analysis is performed to provide the detailed information necessary to investigate possible causes and actions. Medtronic CRM maintains in-house expertise and performs its failure analysis using facilities it owns and supports. This capability permits detailed failure analysis.

Statistical Methods for Survival Analysis

Of the several different statistical methods available for survival analysis, the Standard Actuarial Method, with suspensions assumed distributed evenly within the intervals (Cutler-Ederer Method), is used to determine survival estimates for CRT, IPG and ICD devices. Implant times are calculated from the implant date to the earlier of the explant date or the cutoff date of the report. From this data an estimate of the probability of device survival is calculated at each monthly interval.

On the following pages, each graph includes a survival curve where events include malfunctions and normal battery depletions (labeled as "Including Normal Battery Depletion"). This survival curve is a good representation of the probability a device will survive a period of time without malfunction and without battery depletion. For example, if a device survival probability is 95% after 5 years of service, then the device has a 5% chance of being removed due to battery depletion or malfunction in the first 5 years following implant.

In addition, a second curve is included to show survival excluding normal battery depletion (labeled as "Excluding Normal Battery Depletion"). This curve is a good representation of the probability for a device to survive without malfunction. This curve includes only malfunctions as events and excludes normal battery depletion.

Since the survival estimate can become very imprecise with small effective sample sizes, Medtronic truncates the survival curve when the effective sample size is less than 100 for CRT, ICD, and IPG devices. The survival charts in the

Product Performance Report show the effective sample size for each year interval where we have experience. When the effective sample size reaches 100, the next data point is added to the survival curve.

Although the report provides tabular data in one-year intervals, the curves are actually computed and plotted using one-month intervals.

The data in the tables are rounded to the nearest tenth of one percent. Occasionally, a graph may show 100% survival, but have one or more malfunctions or battery depletions. This occurs because, even with the malfunctions or battery depletions, the data rounds to 100%.

Sample Size and How the Population and Population Samples Are Defined

The population sample from which the survival estimates are derived is comprised of the devices registered as implanted in the United States as of the report cutoff date. The number of registered implants, as well as an estimate of the number that remain in active service, is listed for each model. To be included in the population, the device must have been registered with Medtronic's registration system and implanted for at least one day.

This sample based on US implants is considered to be representative of the worldwide population, and therefore the survival estimates shown in this report should be representative of the performance worldwide of these models.

A CRT, ICD, or IPG model or model family will be included in this report when it has accumulated at least 10,000 implant months and will remain in the report as long as at least 500 devices remain active.

Methods Used to Adjust for Underreporting of Malfunction and Battery Depletion

The tables on the following pages show the actual number of malfunctions and battery depletions recorded by the analysis lab for US registered devices. Since not all devices are returned to Medtronic CRM for analysis, these numbers underestimate the true number of malfunctions and battery depletions. To more accurately estimate the device survival probabilities, the number of malfunctions and battery depletions used to plot each interval of the "Including Normal Battery Depletion" survival curves is adjusted (multiplied) by a factor that is based on an estimate of the magnitude of underreporting. The magnitude of underreporting is estimated by comparing data in Medtronic's Device Registration Tracking Application (DTrak) with data from Returned Product Analysis.

The DTrak system is an important element of Medtronic's Quality System. The DTrak system is designed to meet or exceed the US FDA's device tracking requirements set forth by the Safe Medical Devices Act. In the United States, over 98% of Medtronic's CRT, ICD, and IPG implants become registered in the DTrak system.

Because pacemakers do not cure the patient's underlying health problem, when a pacemaker stops functioning (due to either normal battery replacement or malfunction) it is replaced with a new pacemaker. Therefore, the replacement recorded in the DTrak system is a good indication that the previous pacemaker experienced either battery depletion or malfunction. The fraction of replaced devices that are subsequently returned can be used to estimate the correction factor for the under reporting of the combination of battery depletion and malfunction.

Note that devices of patients who have expired do not factor into the calculation of the correction. It is possible some proportion of these devices experienced battery depletion or malfunction. Since these are not counted into the correction factor based on the return rate of replaced devices, a correction factor based only on the return rate of replaced devices may still underestimate the true rate of battery depletion and malfunction. However, devices that are replaced because the patient is receiving a system upgrade or are removed because the patient no longer needs it (e.g., due to heart transplant) do contribute to the calculation of the correction factor and therefore impart an opposite bias.

Also note that this method of calculating the correction factor cannot distinguish between devices that are removed due to malfunction and those due to normal battery depletion. It might seem intuitive that devices that unexpectedly malfunction should be much more likely to be returned to the manufacturer than a device with ordinary normal battery depletion. But this has not been conclusively demonstrated. Therefore, this method only provides a correction factor reflecting the combination of battery depletion and malfunction.

No adjustment for underreporting is applied to the malfunction-free survival curve because a method for estimating malfunction-only underreporting has not been developed.

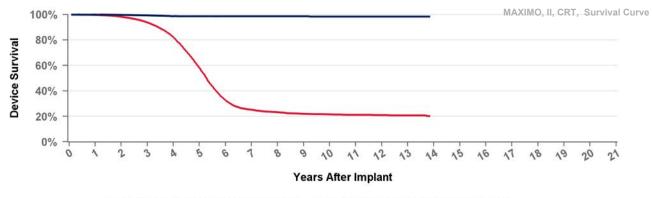
Adjustments to Registered Implants to Compensate for Unreported Devices Removed from Service

Devices are at times removed from service for reasons other than device malfunction or battery depletion. Examples are devices removed from service due to non-device related patient mortality and devices removed due to changes in the patient's medical condition. Because an accurate estimate of device survival depends on an accurate estimate of the number of devices in service, it is important not to overstate the number of devices in service.

Medtronic addresses this under reporting to ensure the number of devices in service is not overstated. Regular updates obtained from third party sources such as the Social Security Administration are used to update Medtronic's DTrak data about patients who have died but whose deaths had not been reported to Medtronic. In addition, the patient mortality rate derived from our DTrak system is monitored and compared to published mortality rates for comparable patient populations. If, during calculation of the survival curves, the patient mortality indicated by the data in DTrak is significantly different from published rates, an adjustment is applied to correct the difference. The correction factor is also applied to account for devices that were removed and not reported or returned.

D284TRK Maximo II CRT-D

US Market Release	17Sep2008	Total Malfunctions (USA)	135
CE Approval Date	14Mar2008	Therapy Function Not Compromised	129
Registered USA Implants	14,990	Electrical Component	5
Estimated Active USA Implants	1,327	Possible Early Battery Depletion	124
Normal Battery Depletions	4,084	Therapy Function Compromised	6
		Electrical Component	6



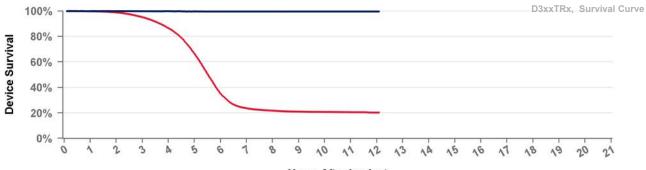
Including Normal Battery Depletion
 Excluding Normal Battery Depletion

Years	1	2	3	4	5	6	7	8	9	10	11	12	13	at 166 mo
Excluding NBD	100.0%	99.7%	99.3%	98.7%	98.6%	98.5%	98.5%	98.5%	98.5%	98.5%	98.5%	98.5%	98.5%	98.5%
Including NBD	99.7%	98.2%	93.7%	82.1%	58.2%	32.5%	25.3%	23.3%	22.0%	21.6%	21.3%	21.0%	20.8%	20.4%
Effective Sample Size	12496	11082	9495	7252	3990	1660	1091	915	801	744	676	540	335	102

D314TRG

Protecta XT CRT-D

US Market Release	25Mar2011	Total Malfunctions (USA)	94
CE Approval Date		Therapy Function Not Compromised	75
Registered USA Implants	41,864	Battery	8
Estimated Active USA Implants	4,649	Electrical Component	40
Normal Battery Depletions	10,523	Possible Early Battery Depletion	25
		Other	2
		Therapy Function Compromised	19
		Battery	11
		Electrical Component	8



Years After Implant

Years	1	2	3	4	5	6	7	8	9	10	11	12	at 145 mo
Excluding NBD	100.0%	99.9%	99.9%	99.8%	99.7%	99.6%	99.6%	99.6%	99.6%	99.6%	99.6%	99.6%	99.6%
Including NBD	99.8%	98.9%	95.1%	86.5%	66.7%	35.3%	23.7%	21.7%	21.0%	20.8%	20.6%	20.2%	20.2%
Effective Sample Size	54152	48925	42274	33505	21046	8894	4881	4038	3623	3382	2917	526	291

D354TRG Protecta XT CRT-D

US Market Release

CE Approval Date

25Mar2010

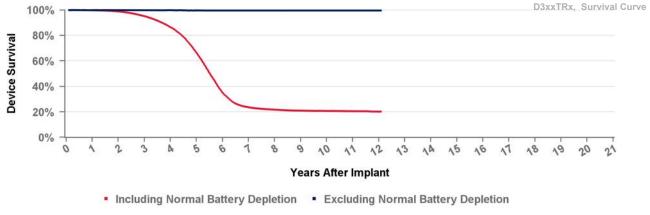
Registered USA Implants Estimated Active USA Implants 1

Therapy Function Not Compromised

Therapy Function Compromised

Total Malfunctions (USA)

Normal Battery Depletions



at 145 Years 2 3 5 6 8 9 10 11 12 mo **Excluding NBD** 100.0% 99.9% 99.9% 99.8% 99.7% 99.6% 99.6% 99.6% 99.6% 99.6% 99.6% 99.6% 99.6% 98.9% 21.7% 21.0% 20.8% 20.2% Including NBD 99.8% 86.5% 66.7% 35.3% 20.6% 20.2% Effective 21046 8894 4881 4038 3623 3382 2917 526 291 Sample Size

D354TRM

Protecta XT CRT-D

US Market Release CE Approval Date

15Jul2010

Registered USA Implants

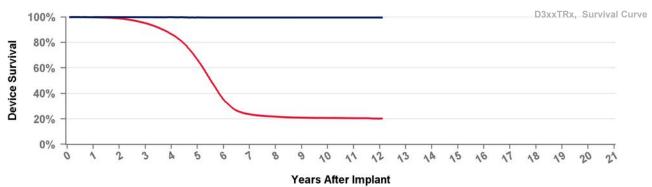
Estimated Active USA Implants

Normal Battery Depletions

Total Malfunctions (USA)

Therapy Function Not Compromised

Therapy Function Compromised



Years	1	2	3	4	5	6	7	8	9	10	11	12	at 145 mo
Excluding NBD	100.0%	99.9%	99.9%	99.8%	99.7%	99.6%	99.6%	99.6%	99.6%	99.6%	99.6%	99.6%	99.6%
Including NBD	99.8%	98.9%	95.1%	86.5%	66.7%	35.3%	23.7%	21.7%	21.0%	20.8%	20.6%	20.2%	20.2%
Effective	54152	48925	42274	33505	21046	8894	4881	4038	3623	3382	2917	526	291
Sample Size													

D364TRG

Protecta CRT-D

US Market Release

CE Approval Date

25Mar2010

Total Malfunctions (USA)

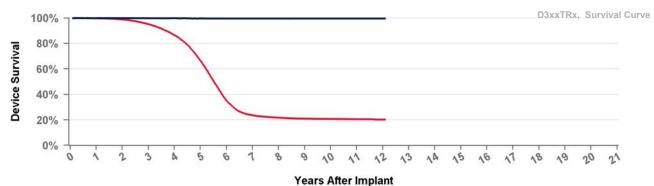
Therapy Function Not Compromised

Registered USA Implants

Estimated Active USA Implants

Normal Battery Depletions

Therapy Function Compromised



Including Normal Battery Depletion Excluding Normal Battery Depletion

Years	1	2	3	4	5	6	7	8	9	10	11	12	at 145 mo
Excluding NBD	100.0%	99.9%	99.9%	99.8%	99.7%	99.6%	99.6%	99.6%	99.6%	99.6%	99.6%	99.6%	99.6%
Including NBD	99.8%	98.9%	95.1%	86.5%	66.7%	35.3%	23.7%	21.7%	21.0%	20.8%	20.6%	20.2%	20.2%
Effective Sample Size	54152	48925	42274	33505	21046	8894	4881	4038	3623	3382	2917	526	291

D364TRM

Protecta CRT-D

US Market Release

15Jul2010 **CE Approval Date**

Registered USA Implants

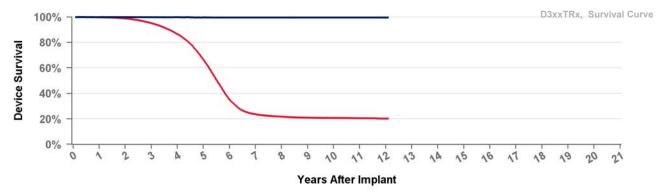
Estimated Active USA Implants

Normal Battery Depletions

Total Malfunctions (USA)

Therapy Function Not Compromised

Therapy Function Compromised





D394TRG Egida CRT-D

US Market Release

CE Approval Date

12Jan2011 Therap

Registered USA Implants

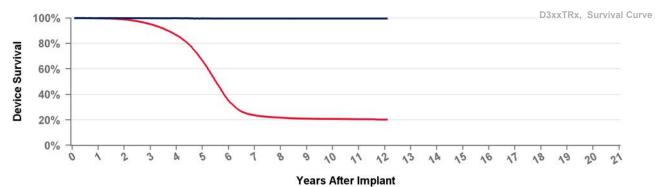
Estimated Active USA Implants

Normal Battery Depletions

Total Malfunctions (USA)

Therapy Function Not Compromised

Therapy Function Compromised

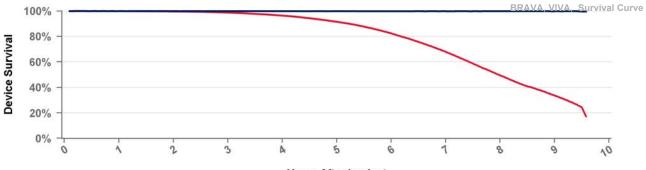


Including Normal Battery Depletion Excluding Normal Battery Depletion

Years	1	2	3	4	5	6	7	8	9	10	11	12	at 145 mo
Excluding NBD	100.0%	99.9%	99.9%	99.8%	99.7%	99.6%	99.6%	99.6%	99.6%	99.6%	99.6%	99.6%	99.6%
Including NBD	99.8%	98.9%	95.1%	86.5%	66.7%	35.3%	23.7%	21.7%	21.0%	20.8%	20.6%	20.2%	20.2%
Effective Sample Size	54152	48925	42274	33505	21046	8894	4881	4038	3623	3382	2917	526	291

DTBA1D1 Viva XT

US Market Release	29Jan2013	Total Malfunctions (USA)	71
CE Approval Date		Therapy Function Not Compromised	46
Registered USA Implants	56,946	Battery	10
Estimated Active USA Implants	14,182	Electrical Component	32
Normal Battery Depletions	16,168	Possible Early Battery Depletion	1
		Other	3
		Therapy Function Compromised	25
		Battery	19
		Device-Related Current Pathway	2
		Electrical Component	4



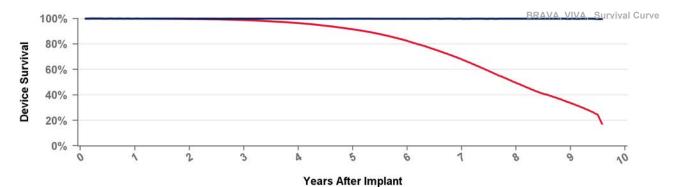
Years After Implant

	Including	Normal Battery	/ Depletion		Excluding	Normal	Battery	Depletion
--	-----------	----------------	-------------	--	-----------	--------	---------	------------------

Years	1	2	3	4	5	6	7	8	9	at 115 mo
Excluding NBD	100.0%	100.0%	99.9%	99.9%	99.9%	99.8%	99.8%	99.8%	99.8%	99.8%
Including NBD	99.9%	99.7%	98.8%	96.4%	91.5%	82.4%	67.9%	49.4%	33.7%	17.1%
Effective Sample Size	86422	78563	71228	62992	53097	41460	27946	13827	3595	112

DTBA1D4 Viva XT

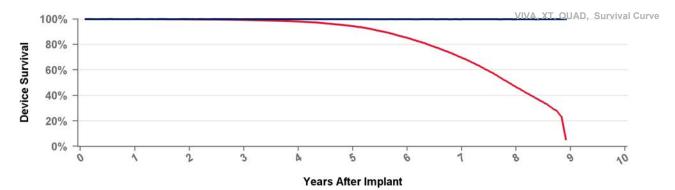
US Market Release	29Jan2013	Total Malfunctions (USA)	33
CE Approval Date		Therapy Function Not Compromised	24
Registered USA Implants	19,628	Battery	6
Estimated Active USA Implants	4,752	Electrical Component	15
Normal Battery Depletions	6,823	Possible Early Battery Depletion	3
		Therapy Function Compromised	9
		Battery	6
		Electrical Component	3



Years	1	2	3	4	5	6	7	8	9	at 115 mo
Excluding NBD	100.0%	100.0%	99.9%	99.9%	99.9%	99.8%	99.8%	99.8%	99.8%	99.8%
Including NBD	99.9%	99.7%	98.8%	96.4%	91.5%	82.4%	67.9%	49.4%	33.7%	17.1%
Effective Sample Size	86422	78563	71228	62992	53097	41460	27946	13827	3595	112

DTBA1Q1 Viva Quad XT

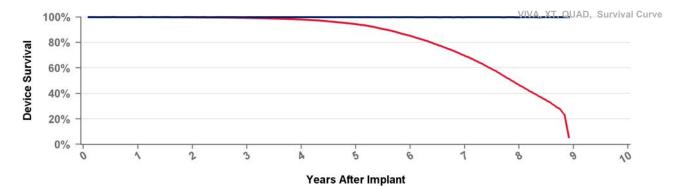
US Market Release	03Jul2014	Total Malfunctions (USA)	14
CE Approval Date		Therapy Function Not Compromised	9
Registered USA Implants	11,065	Battery	3
Estimated Active USA Implants	3,027	Electrical Component	4
Normal Battery Depletions	3,053	Possible Early Battery Depletion	1
		Other	1
		Therapy Function Compromised	5
		Battery	4
		Electrical Component	1



Years	1	2	3	4	5	6	7	8	at 107 mo
Excluding NBD	100.0%	100.0%	99.9%	99.9%	99.9%	99.8%	99.8%	99.8%	99.8%
Including NBD	99.9%	99.8%	99.3%	98.1%	94.4%	85.3%	69.6%	46.5%	5.4%
Effective Sample Size	33764	31339	28906	25966	22290	17399	11717	5327	108

DTBA1QQ Viva Quad XT

US Market Release	03Jul2014	Total Malfunctions (USA)	49
CE Approval Date		Therapy Function Not Compromised	37
Registered USA Implants	27,415	Battery	12
Estimated Active USA Implants	7,621	Electrical Component	20
Normal Battery Depletions	9,459	Electrical Interconnect	1
		Possible Early Battery Depletion	3
		Other	1
		Therapy Function Compromised	12
		Battery	9
		Electrical Component	3



Including Normal Battery Depletion
 Excluding Normal Battery Depletion

Years	1	2	3	4	5	6	7	8	at 107 mo
Excluding NBD	100.0%	100.0%	99.9%	99.9%	99.9%	99.8%	99.8%	99.8%	99.8%
Including NBD	99.9%	99.8%	99.3%	98.1%	94.4%	85.3%	69.6%	46.5%	5.4%
Effective Sample Size	33764	31339	28906	25966	22290	17399	11717	5327	108

DTBA2D1 Viva XT

US Market Release

E Annewal Data 20

CE Approval Date

29Aug2016

Therapy Function Not Compromised

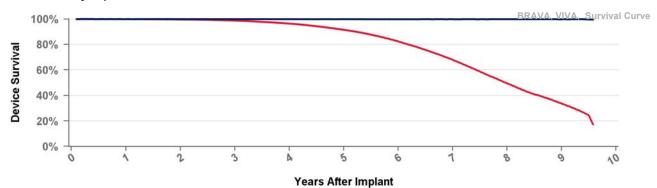
Registered USA Implants

Estimated Active USA Implants

Normal Battery Depletions

Therapy Function Compromised

Total Malfunctions (USA)



Years	1	2	3	4	5	6	7	8	9	at 115 mo
Excluding NBD	100.0%	100.0%	99.9%	99.9%	99.9%	99.8%	99.8%	99.8%	99.8%	99.8%
Including NBD	99.9%	99.7%	98.8%	96.4%	91.5%	82.4%	67.9%	49.4%	33.7%	17.1%
Effective Sample Size	86422	78563	71228	62992	53097	41460	27946	13827	3595	112

DTBA2D4

Viva XT

US Market Release

CE Approval Date

08Aug2012

Total Malfunctions (USA)

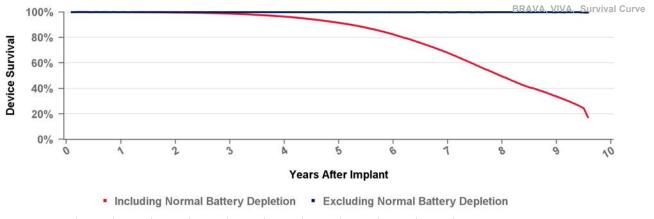
Registered USA Implants

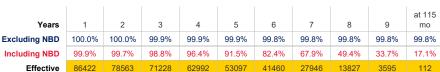
Estimated Active USA Implants

Therapy Function Compromised

Therapy Function Not Compromised

Normal Battery Depletions





Including NBD Effective Sample Size

DTBA2Q1

Viva Quad XT

US Market Release

12Sep2013

Total Malfunctions (USA)

CE Approval Date

Sample Size

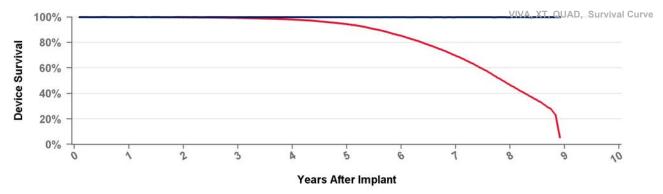
Therapy Function Not Compromised

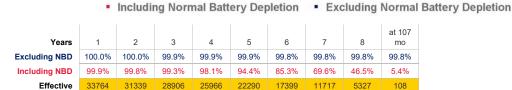
Registered USA Implants

Estimated Active USA Implants

Normal Battery Depletions

Therapy Function Compromised





DTBA2QQ Viva Quad XT

US Market Release

CE Approval Date

Total Malfunctions (USA)

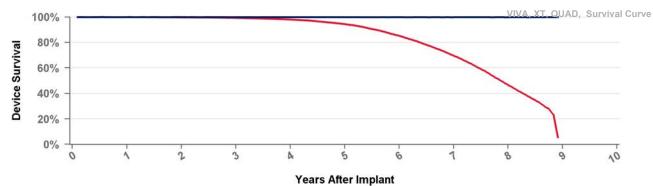
Therapy Function Not Compromised

Registered USA Implants

Estimated Active USA Implants

Normal Battery Depletions

Therapy Function Compromised



Including Normal Battery Depletion
 Excluding Normal Battery Depletion

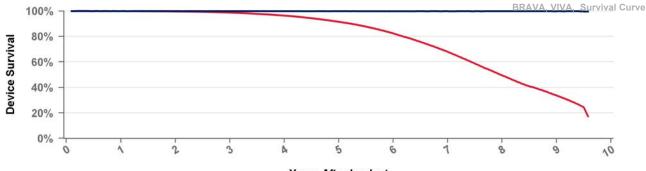
Years	1	2	3	4	5	6	7	8	at 107 mo
Excluding NBD	100.0%	100.0%	99.9%	99.9%	99.9%	99.8%	99.8%	99.8%	99.8%
Including NBD	99.9%	99.8%	99.3%	98.1%	94.4%	85.3%	69.6%	46.5%	5.4%
Effective Sample Size	33764	31339	28906	25966	22290	17399	11717	5327	108

08Aug2012

DTBB1D1

Viva S

US Market Release	29Jan2013	Total Malfunctions (USA)	25
CE Approval Date		Therapy Function Not Compromised	20
Registered USA Implants	14,103	Battery	9
Estimated Active USA Implants	2,931	Electrical Component	8
Normal Battery Depletions	4,843	Possible Early Battery Depletion	2
		Other	1
		Therapy Function Compromised	5
		Battery	4
		Electrical Component	1

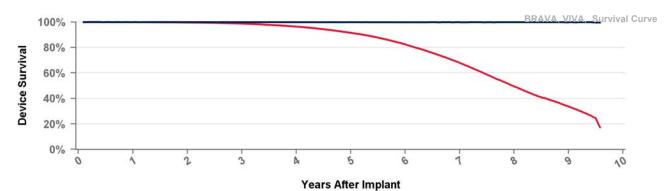


Years After Implant

Years	1	2	3	4	5	6	7	8	9	at 115 mo
Excluding NBD	100.0%	100.0%	99.9%	99.9%	99.9%	99.8%	99.8%	99.8%	99.8%	99.8%
Including NBD	99.9%	99.7%	98.8%	96.4%	91.5%	82.4%	67.9%	49.4%	33.7%	17.1%
Effective Sample Size	86422	78563	71228	62992	53097	41460	27946	13827	3595	112

DTBB1D4 Viva S

US Market Release	29Jan2013	Total Malfunctions (USA)	9
CE Approval Date		Therapy Function Not Compromised	6
Registered USA Implants	4,637	Battery	3
Estimated Active USA Implants	1,096	Electrical Component	2
Normal Battery Depletions	1,633	Other	1
		Therapy Function Compromised	3
		Batterv	3

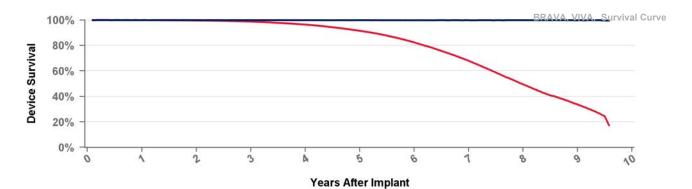


■ Including Normal Battery Depletion ■ Excluding Normal Battery Depletion

Years	1	2	3	4	5	6	7	8	9	at 115 mo
Excluding NBD	100.0%	100.0%	99.9%	99.9%	99.9%	99.8%	99.8%	99.8%	99.8%	99.8%
Including NBD	99.9%	99.7%	98.8%	96.4%	91.5%	82.4%	67.9%	49.4%	33.7%	17.1%
Effective Sample Size	86422	78563	71228	62992	53097	41460	27946	13827	3595	112

DTBB1Q1 Viva Quad S

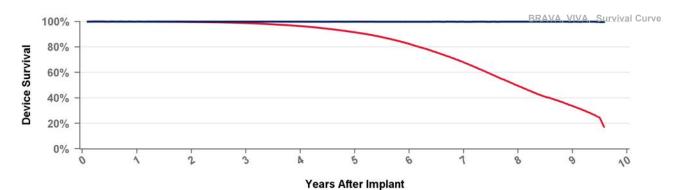
US Market Release	03Jul2014	Total Malfunctions (USA)	2
CE Approval Date		Therapy Function Not Compromised	2
Registered USA Implants	2,361	Battery	1
Estimated Active USA Implants	625	Electrical Component	1
Normal Battery Depletions	817	Therapy Function Compromised	0



Years	1	2	3	4	5	6	7	8	9	at 115 mo
Excluding NBD	100.0%	100.0%	99.9%	99.9%	99.9%	99.8%	99.8%	99.8%	99.8%	99.8%
Including NBD	99.9%	99.7%	98.8%	96.4%	91.5%	82.4%	67.9%	49.4%	33.7%	17.1%
Effective Sample Size	86422	78563	71228	62992	53097	41460	27946	13827	3595	112

DTBB1QQ Viva Quad S

US Market Release	03Jul2014	Total Malfunctions (USA)	10
CE Approval Date		Therapy Function Not Compromised	8
Registered USA Implants	5,113	Battery	1
Estimated Active USA Implants	1,361	Electrical Component	4
Normal Battery Depletions	2,102	Possible Early Battery Depletion	2
		Other	1
		Therapy Function Compromised	2
		Electrical Component	2



Including Normal Battery Depletion
 Excluding Normal Battery Depletion

Years	1	2	3	4	5	6	7	8	9	at 115 mo
Excluding NBD	100.0%	100.0%	99.9%	99.9%	99.9%	99.8%	99.8%	99.8%	99.8%	99.8%
Including NBD	99.9%	99.7%	98.8%	96.4%	91.5%	82.4%	67.9%	49.4%	33.7%	17.1%
Effective Sample Size	86422	78563	71228	62992	53097	41460	27946	13827	3595	112

08Aug2012

DTBB2D1

Viva S

US Market Release

CE Approval Date

Registered USA Implants

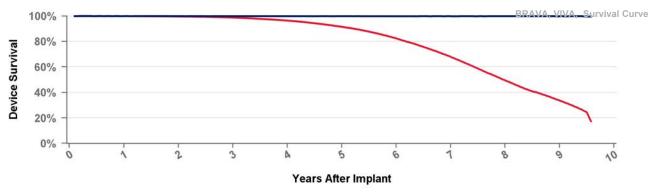
Estimated Active USA Implants

Normal Battery Depletions

Total Malfunctions (USA)

Therapy Function Not Compromised

Therapy Function Compromised



										at 115
Years	1	2	3	4	5	6	7	8	9	mo
Excluding NBD	100.0%	100.0%	99.9%	99.9%	99.9%	99.8%	99.8%	99.8%	99.8%	99.8%
Including NBD	99.9%	99.7%	98.8%	96.4%	91.5%	82.4%	67.9%	49.4%	33.7%	17.1%
Effective Sample Size	86422	78563	71228	62992	53097	41460	27946	13827	3595	112

DTBB2D4

Viva S

US Market Release

Total Malfunctions (USA)

CE Approval Date

08Aug2012

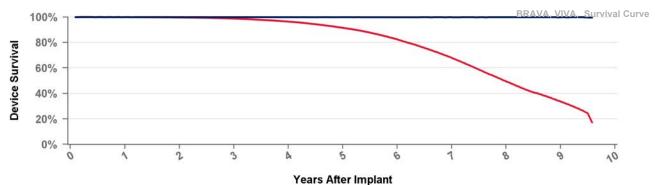
Therapy Function Not Compromised

Registered USA Implants

Estimated Active USA Implants

Normal Battery Depletions

Therapy Function Compromised



Including Normal Battery Depletion
 Excluding Normal Battery Depletion

Years	1	2	3	4	5	6	7		9	at 115 mo
Tears	- 1		3	4	3	0	1	0	9	1110
Excluding NBD	100.0%	100.0%	99.9%	99.9%	99.9%	99.8%	99.8%	99.8%	99.8%	99.8%
Including NBD	99.9%	99.7%	98.8%	96.4%	91.5%	82.4%	67.9%	49.4%	33.7%	17.1%
Effective Sample Size	86422	78563	71228	62992	53097	41460	27946	13827	3595	112

DTBB2QQ

Viva Quad S

US Market Release

08Aug2012

Total Malfunctions (USA)

CE Approval Date

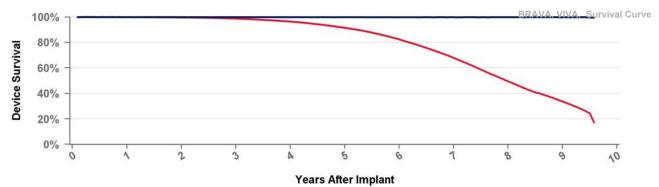
Therapy Function Not Compromised

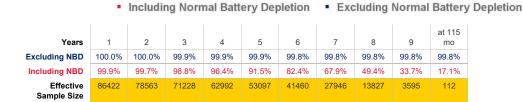
Registered USA Implants

Estimated Active USA Implants

Normal Battery Depletions

Therapy Function Compromised





DTBC2D1

Brava

US Market Release

Total Malfunctions (USA)

CE Approval Date 08Aug2012

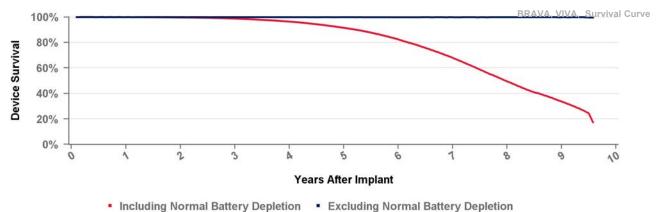
Therapy Function Not Compromised

Estimated Active USA Implants

Therapy Function Compromised

Normal Battery Depletions

Registered USA Implants



at 115 Years 2 3 5 6 8 9 mo **Excluding NBD** 100.0% 100.0% 99.9% 99.9% 99.9% 99.8% 99.8% 99.8% 99.8% 99.8% 99.9% 99.7% 96.4% 91.5% 82.4% 49.4% 17.1% Including NBD Effective 78563 71228 62992 53097 41460 27946 13827 3595 112 Sample Size

DTBC2D4

Brava

US Market Release

CE Approval Date

08Aug2012

Total Malfunctions (USA)

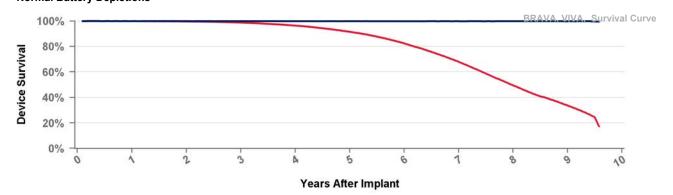
Therapy Function Not Compromised

Registered USA Implants

Estimated Active USA Implants

Normal Battery Depletions

Therapy Function Compromised



			•							
Years	1	2	3	4	5	6	7	8	9	at 115 mo
Excluding NBD	100.0%	100.0%	99.9%	99.9%	99.9%	99.8%	99.8%	99.8%	99.8%	99.8%
Including NBD	99.9%	99.7%	98.8%	96.4%	91.5%	82.4%	67.9%	49.4%	33.7%	17.1%
Effective Sample Size	86422	78563	71228	62992	53097	41460	27946	13827	3595	112

DTBC2Q1 **Brava Quad**

US Market Release

CE Approval Date

12Sep2013

Total Malfunctions (USA)

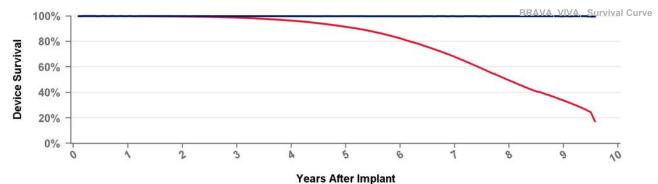
Therapy Function Not Compromised

Registered USA Implants

Estimated Active USA Implants

Normal Battery Depletions

Therapy Function Compromised





41460

53097

Excluding NBD Including NBD Effective

Years

78563 Sample Size DTBC2QQ

Brava Quad

71228

US Market Release

CE Approval Date

08Aug2012

62992

Registered USA Implants

Estimated Active USA Implants

Total Malfunctions (USA)

27946

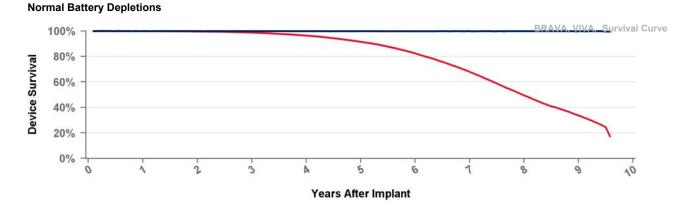
Therapy Function Not Compromised

13827

3595

112

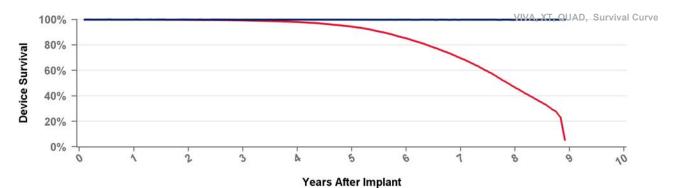
Therapy Function Compromised



	•	Includii	ng Norn	nal Batt	ery Dep	oletion	• Exc	luding	Normal	Battery	/ Depletion
Years	1	2	3	4	5	6	7	8	9	at 115 mo	
Excluding NBD	100.0%	100.0%	99.9%	99.9%	99.9%	99.8%	99.8%	99.8%	99.8%	99.8%	
Including NBD	99.9%	99.7%	98.8%	96.4%	91.5%	82.4%	67.9%	49.4%	33.7%	17.1%	
Effective Sample Size	86422	78563	71228	62992	53097	41460	27946	13827	3595	112	

DTBX1QQ Viva Quad C

US Market Release	03Jul2014	Total Malfunctions (USA)	1
CE Approval Date		Therapy Function Not Compromised	1
Registered USA Implants	638	Electrical Component	1
Estimated Active USA Implants	72	Therapy Function Compromised	0
Normal Battery Depletions	382		



Including Normal Battery Depletion
 Excluding Normal Battery Depletion

Years	1	2	3	4	5	6	7	8	at 107 mo
Excluding NBD	100.0%	100.0%	99.9%	99.9%	99.9%	99.8%	99.8%	99.8%	99.8%
Including NBD	99.9%	99.8%	99.3%	98.1%	94.4%	85.3%	69.6%	46.5%	5.4%
Effective Sample Size	33764	31339	28906	25966	22290	17399	11717	5327	108

DTBX2QQ

Viva Quad C

US Market Release CE Approval Date

Registered USA Implants

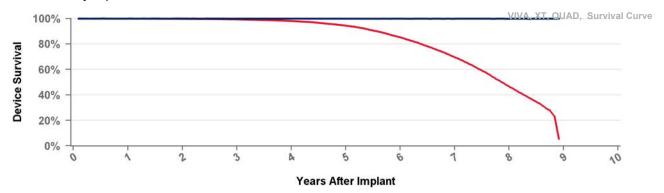
Estimated Active USA Implants

Normal Battery Depletions

03Jul2014 Total Malfunctions (USA)

Therapy Function Not Compromised

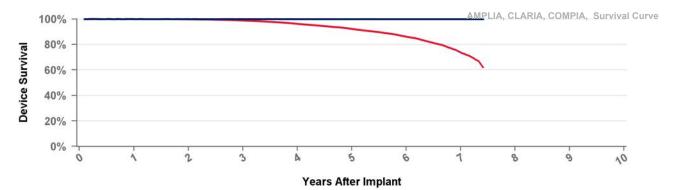
Therapy Function Compromised



Years	1	2	3	4	5	6	7	8	at 107 mo
Excluding NBD	100.0%	100.0%	99.9%	99.9%	99.9%	99.8%	99.8%	99.8%	99.8%
Including NBD	99.9%	99.8%	99.3%	98.1%	94.4%	85.3%	69.6%	46.5%	5.4%
Effective Sample Size	33764	31339	28906	25966	22290	17399	11717	5327	108

DTMA1D1 Claria MRI

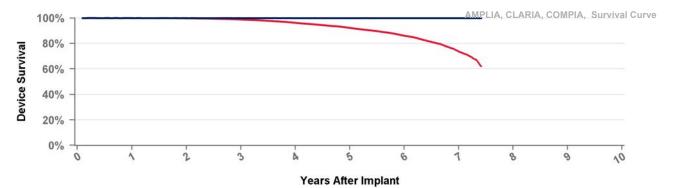
US Market Release	05Dec2016	Total Malfunctions (USA)	9
CE Approval Date		Therapy Function Not Compromised	7
Registered USA Implants	17,502	Battery	4
Estimated Active USA Implants	12,742	Electrical Component	1
Normal Battery Depletions	1,395	Electrical Interconnect	1
		Other	1
		Therapy Function Compromised	2
		Battery	1
		Electrical Component	1



Years	1	2	3	4	5	6	7	at 89 mo
Excluding NBD	100.0%	100.0%	99.9%	99.9%	99.9%	99.9%	99.9%	99.9%
Including NBD	99.9%	99.8%	98.8%	96.2%	92.3%	86.1%	73.6%	62.1%
Effective Sample Size	42585	35869	27542	20918	14261	8220	2176	393

DTMA1D4 Claria MRI

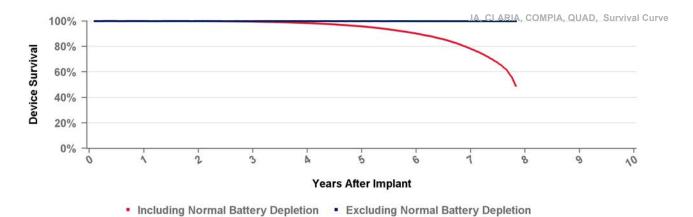
US Market Release	05Dec2016	Total Malfunctions (USA)	11		
CE Approval Date		Therapy Function Not Compromised	5		
Registered USA Implants	16,805	Battery	1		
Estimated Active USA Implants	12,844	Electrical Component	4		
Normal Battery Depletions	1,183	Therapy Function Compromised			
		Battery	1		
		Device-Related Current Pathway	2		
		Electrical Component	2		
		Electrical Interconnect	1		



Years	1	2	3	4	5	6	7	at 89 mo
Excluding NBD	100.0%	100.0%	99.9%	99.9%	99.9%	99.9%	99.9%	99.9%
Including NBD	99.9%	99.8%	98.8%	96.2%	92.3%	86.1%	73.6%	62.1%
Effective Sample Size	42585	35869	27542	20918	14261	8220	2176	393

DTMA1Q1 Claria MRI

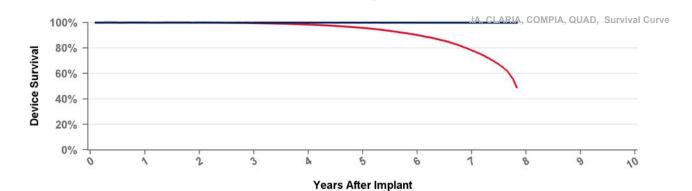
US Market Release	05Dec2016	Total Malfunctions (USA)	4
CE Approval Date		Therapy Function Not Compromised	4
Registered USA Implants	12,258	Battery	1
Estimated Active USA Implants	9,307	Electrical Interconnect	1
Normal Battery Depletions	735	Possible Early Battery Depletion	1
		Other	1
		Therapy Function Compromised	0



Years	1	2	3	4	5	6	7	at 94 mo
Excluding NBD	100.0%	100.0%	100.0%	99.9%	99.9%	99.9%	99.9%	99.9%
Including NBD	100.0%	99.9%	99.6%	98.4%	95.8%	90.2%	78.2%	49.0%
Effective Sample Size	114917	100747	82600	67393	46692	26834	10564	652

DTMA1QQ Claria MRI

US Market Release Total Malfunctions (USA) 05Dec2016 33 **Therapy Function Not Compromised CE Approval Date** 21 **Registered USA Implants** 2 76,356 Battery **Estimated Active USA Implants** 61,034 **Electrical Component** 13 **Normal Battery Depletions Electrical Interconnect** 4,425 1 Possible Early Battery Depletion 1 Software/Firmware Other 3 **Therapy Function Compromised** 12 Device-Related Current Pathway 5



Electrical Component

7

Including Normal Battery Depletion
 Excluding Normal Battery Depletion

Years	1	2	3	4	5	6	7	at 94 mo
Excluding NBD	100.0%	100.0%	100.0%	99.9%	99.9%	99.9%	99.9%	99.9%
Including NBD	100.0%	99.9%	99.6%	98.4%	95.8%	90.2%	78.2%	49.0%
Effective	114917	100747	82600	67393	46692	26834	10564	652

DTMA2D1

Claria MRI

US Market Release CE Approval Date

29Aug2016

Total Malfunctions (USA)

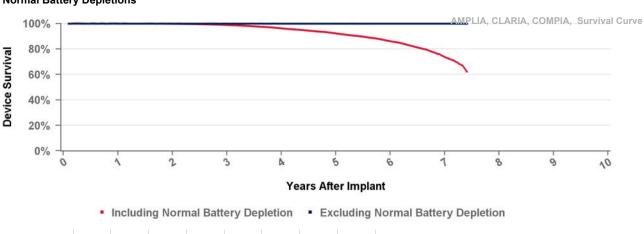
Registered USA Implants

Therapy Function Not Compromised

Estimated Active USA Implants

Therapy Function Compromised

Normal Battery Depletions



Years	1	2	3	4	5	6	7	at 89 mo
Excluding NBD	100.0%	100.0%	99.9%	99.9%	99.9%	99.9%	99.9%	99.9%
Including NBD	99.9%	99.8%	98.8%	96.2%	92.3%	86.1%	73.6%	62.1%
Effective Sample Size	42585	35869	27542	20918	14261	8220	2176	393

DTMA2D4

Claria MRI

US Market Release

CE Approval Date

19Feb2016

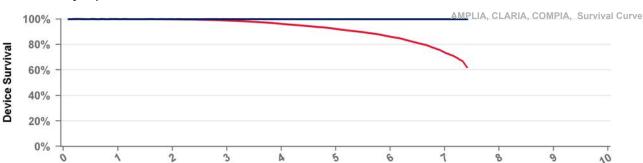
Total Malfunctions (USA) Therapy Function Not Compromised

Registered USA Implants

Estimated Active USA Implants

Normal Battery Depletions

Therapy Function Compromised



Years After Implant

Including Normal Battery Depletion
 Excluding Normal Battery Depletion

Years	1	2	3	4	5	6	7	at 89 mo
Excluding NBD	100.0%	100.0%	99.9%	99.9%	99.9%	99.9%	99.9%	99.9%
Including NBD	99.9%	99.8%	98.8%	96.2%	92.3%	86.1%	73.6%	62.1%
Effective Sample Size	42585	35869	27542	20918	14261	8220	2176	393

DTMA2Q1

Claria MRI

US Market Release CE Approval Date

Total Malfunctions (USA)

29Aug2016

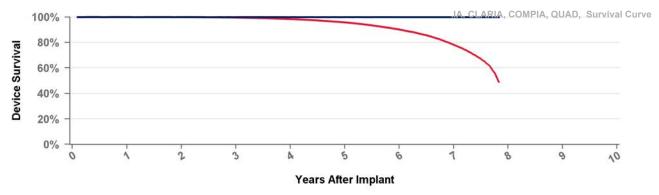
Therapy Function Not Compromised

Registered USA Implants

Estimated Active USA Implants

Normal Battery Depletions

Therapy Function Compromised



 Including Normal Battery Depletion 	 Excluding Normal Battery Depletion

Years	1	2	3	4	5	6	7	at 94 mo
Excluding NBD	100.0%	100.0%	100.0%	99.9%	99.9%	99.9%	99.9%	99.9%
Including NBD	100.0%	99.9%	99.6%	98.4%	95.8%	90.2%	78.2%	49.0%
Effective	114917	100747	82600	67393	46692	26834	10564	652

DTMA2QQ Claria MRI

US Market Release

19Feb2016 **CE Approval Date**

Registered USA Implants

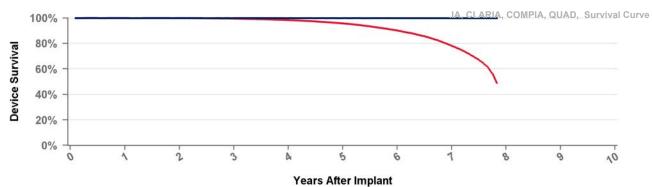
Estimated Active USA Implants

Normal Battery Depletions

Total Malfunctions (USA)

Therapy Function Not Compromised

Therapy Function Compromised



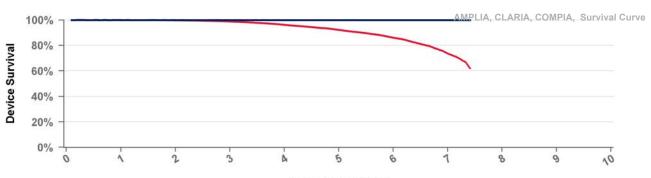
Including Normal Battery Depletion
 Excluding Normal Battery Depletion

Years	1	2	3	4	5	6	7	at 94 mo
Excluding NBD	100.0%	100.0%	100.0%	99.9%	99.9%	99.9%	99.9%	99.9%
Including NBD	100.0%	99.9%	99.6%	98.4%	95.8%	90.2%	78.2%	49.0%
Effective Sample Size	114917	100747	82600	67393	46692	26834	10564	652

DTMB1D1

Amplia MRI

US Market Release	05Dec2016	Total Malfunctions (USA)	5
CE Approval Date		Therapy Function Not Compromised	4
Registered USA Implants	6,756	Battery	1
Estimated Active USA Implants	4,383	Electrical Component	2
Normal Battery Depletions	661	Other	1
		Therapy Function Compromised	1
		Battery	1

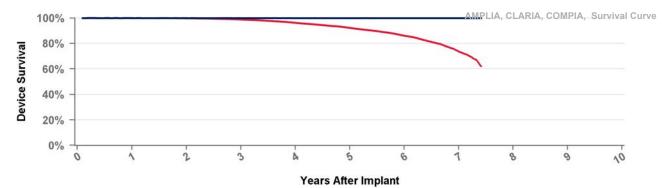


Years After Implant

Years	1	2	3	4	5	6	7	at 89 mo
Excluding NBD	100.0%	100.0%	99.9%	99.9%	99.9%	99.9%	99.9%	99.9%
Including NBD	99.9%	99.8%	98.8%	96.2%	92.3%	86.1%	73.6%	62.1%
Effective Sample Size	42585	35869	27542	20918	14261	8220	2176	393

DTMB1D4 Amplia MRI

US Market Release 01Feb2016		Total Malfunctions (USA)	3
CE Approval Date		Therapy Function Not Compromised	2
Registered USA Implants	6,996	Electrical Component	2
Estimated Active USA Implants	4,228	Therapy Function Compromised	1
Normal Battery Depletions	810	Possible Early Battery Depletion	1

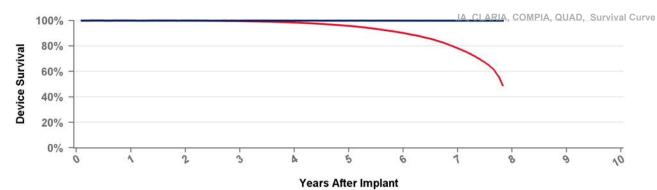


Including Normal Battery Depletion
 Excluding Normal Battery Depletion

Years	1	2	3	4	5	6	7	at 89 mo
Excluding NBD	100.0%	100.0%	99.9%	99.9%	99.9%	99.9%	99.9%	99.9%
Including NBD	99.9%	99.8%	98.8%	96.2%	92.3%	86.1%	73.6%	62.1%
Effective	42585	35869	27542	20918	14261	8220	2176	393

DTMB1Q1 Amplia MRI

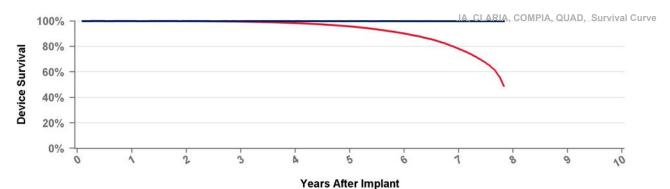
US Market Release	05Dec2016	Total Malfunctions (USA)	2
CE Approval Date		Therapy Function Not Compromised	1
Registered USA Implants	4,461	Battery	1
Estimated Active USA Implants	3,072	Therapy Function Compromised	1
Normal Battery Depletions	360	Battery	1



Years	1	2	3	4	5	6	7	at 94 mo
Excluding NBD	100.0%	100.0%	100.0%	99.9%	99.9%	99.9%	99.9%	99.9%
Including NBD	100.0%	99.9%	99.6%	98.4%	95.8%	90.2%	78.2%	49.0%
Effective Sample Size	114917	100747	82600	67393	46692	26834	10564	652

DTMB1QQ Amplia MRI

US Market Release	01Feb2016	Total Malfunctions (USA)	40
CE Approval Date		Therapy Function Not Compromised	31
Registered USA Implants	31,985	Battery	13
Estimated Active USA Implants	19,229	Electrical Component	12
Normal Battery Depletions	4,367	Possible Early Battery Depletion	3
		Other	3
		Therapy Function Compromised	9
		Battery	8
		Device-Related Current Pathway	1



Including Normal Battery Depletion
 Excluding Normal Battery Depletion

Years	1	2	3	4	5	6	7	at 94 mo
Excluding NBD	100.0%	100.0%	100.0%	99.9%	99.9%	99.9%	99.9%	99.9%
Including NBD	100.0%	99.9%	99.6%	98.4%	95.8%	90.2%	78.2%	49.0%
Effective	114917	100747	82600	67393	46692	26834	10564	652
· ·								

DTMB2D1 Amplia MRI

US Market Release

CE Approval Date 29Aug2016 Therapy Funct

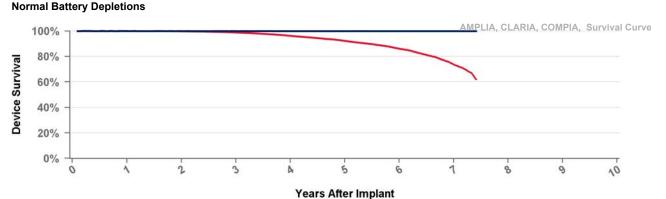
Registered USA Implants

Estimated Active USA Implants

Total Malfunctions (USA)

Therapy Function Not Compromised

Therapy Function Compromised



Years	1	2	3	4	5	6	7	at 89 mo
Excluding NBD	100.0%	100.0%	99.9%	99.9%	99.9%	99.9%	99.9%	99.9%
Including NBD	99.9%	99.8%	98.8%	96.2%	92.3%	86.1%	73.6%	62.1%
Effective Sample Size	42585	35869	27542	20918	14261	8220	2176	393

DTMB2D4

Amplia MRI

US Market Release

CE Approval Date

19Feb2016

Total Malfunctions (USA)

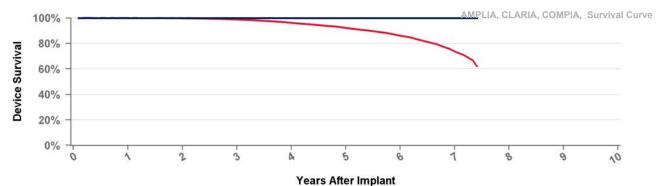
Therapy Function Not Compromised

Registered USA Implants

Estimated Active USA Implants

Normal Battery Depletions

Therapy Function Compromised



Including Normal Battery Depletion
 Excluding Normal Battery Depletion

Years	1	2	3	4	5	6	7	at 89 mo
Excluding NBD	100.0%	100.0%	99.9%	99.9%	99.9%	99.9%	99.9%	99.9%
Including NBD	99.9%	99.8%	98.8%	96.2%	92.3%	86.1%	73.6%	62.1%
Effective Sample Size	42585	35869	27542	20918	14261	8220	2176	393

DTMB2Q1

Amplia MRI

US Market Release

29Aug2016

Total Malfunctions (USA)

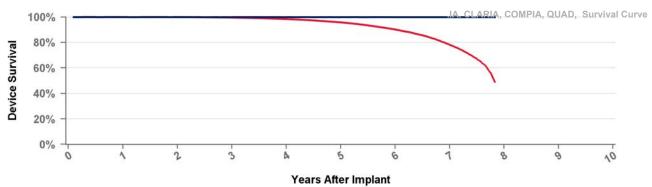
CE Approval Date

Therapy Function Not Compromised

Registered USA Implants

Estimated Active USA Implants

Normal Battery Depletions



- Including Normal Battery Depletion
 Excluding Normal Battery Depletion

Years	1	2	3	4	5	6	7	at 94 mo
Excluding NBD	100.0%	100.0%	100.0%	99.9%	99.9%	99.9%	99.9%	99.9%
Including NBD	100.0%	99.9%	99.6%	98.4%	95.8%	90.2%	78.2%	49.0%
Effective Sample Size	114917	100747	82600	67393	46692	26834	10564	652

DTMB2QQ Amplia MRI

US Market Release

19Feb2016

Total Malfunctions (USA)

CE Approval Date

Therapy Function Not Compromised

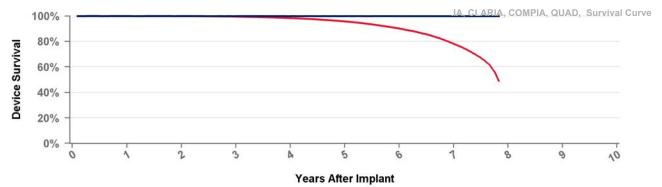
Registered USA Implants

Estimated Active USA Implants

.

Therapy Function Compromised

Normal Battery Depletions

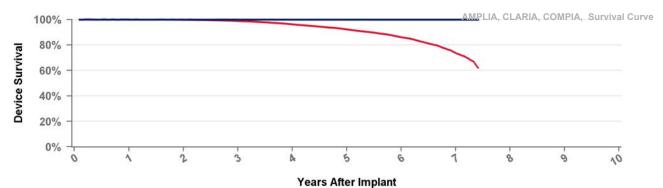


Including Normal Battery Depletion
 Excluding Normal Battery Depletion

Years	1	2	3	4	5	6	7	at 94 mo
Excluding NBD	100.0%	100.0%	100.0%	99.9%	99.9%	99.9%	99.9%	99.9%
Including NBD	100.0%	99.9%	99.6%	98.4%	95.8%	90.2%	78.2%	49.0%
Effective	114917	100747	82600	67393	46692	26834	10564	652

DTMC1D1 Compia MRI

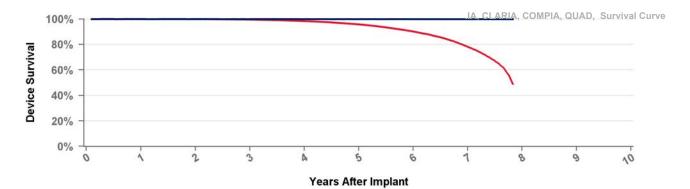
US Market Release	05Dec2016	Total Malfunctions (USA)	1
CE Approval Date		Therapy Function Not Compromised	0
Registered USA Implants	1,139		
Estimated Active USA Implants	805	Therapy Function Compromised	1
Normal Battery Depletions	111	Device-Related Current Pathway	1



Years	1	2	3	4	5	6	7	at 89 mo
Excluding NBD	100.0%	100.0%	99.9%	99.9%	99.9%	99.9%	99.9%	99.9%
Including NBD	99.9%	99.8%	98.8%	96.2%	92.3%	86.1%	73.6%	62.1%
Effective Sample Size	42585	35869	27542	20918	14261	8220	2176	393

DTMC1QQ Compia MRI

US Market Release	01Feb2016	Total Malfunctions (USA)	4
CE Approval Date		Therapy Function Not Compromised	4
Registered USA Implants	5,008	Battery	2
Estimated Active USA Implants	3,389	Electrical Component	2
Normal Battery Depletions	703	Therapy Function Compromised	0



Including Normal Battery Depletion
 Excluding Normal Battery Depletion

Years	1	2	3	4	5	6	7	at 94 mo
Excluding NBD	100.0%	100.0%	100.0%	99.9%	99.9%	99.9%	99.9%	99.9%
Including NBD	100.0%	99.9%	99.6%	98.4%	95.8%	90.2%	78.2%	49.0%
Effective Sample Size	114917	100747	82600	67393	46692	26834	10564	652

DTMC2D1 Compia MRI

US Market Release

29Aug2016

Total Malfunctions (USA)

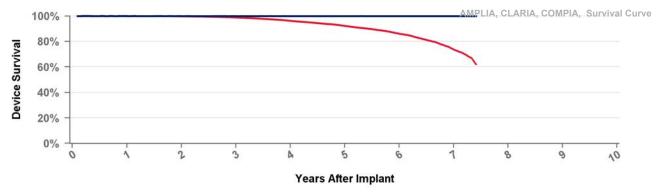
CE Approval Date Registered USA Implants

Therapy Function Not Compromised

Estimated Active USA Implants

Therapy Function Compromised

Normal Battery Depletions



Years	1	2	3	4	5	6	7	at 89 mo
Excluding NBD	100.0%	100.0%	99.9%	99.9%	99.9%	99.9%	99.9%	99.9%
Including NBD	99.9%	99.8%	98.8%	96.2%	92.3%	86.1%	73.6%	62.1%
Effective Sample Size	42585	35869	27542	20918	14261	8220	2176	393

DTMC2D4 Compia MRI

US Market Release

Total Malfunctions (USA)

19Feb2016

CE Approval Date

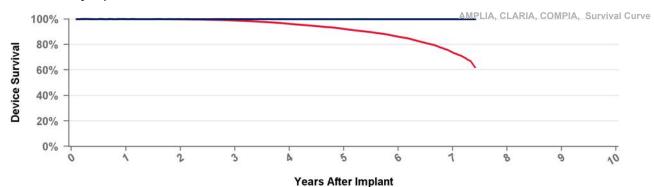
Therapy Function Not Compromised

Registered USA Implants

Estimated Active USA Implants

Normal Battery Depletions

Therapy Function Compromised



Including Normal Battery Depletion
 Excluding Normal Battery Depletion

Years	1	2	3	4	5	6	7	at 89 mo
Excluding NBD	100.0%	100.0%	99.9%	99.9%	99.9%	99.9%	99.9%	99.9%
Including NBD	99.9%	99.8%	98.8%	96.2%	92.3%	86.1%	73.6%	62.1%
Effective Sample Size	42585	35869	27542	20918	14261	8220	2176	393

DTMC2QQ

Compia MRI

US Market Release

19Feb2016

CE Approval Date 19

16

Therapy Function Not Compromised

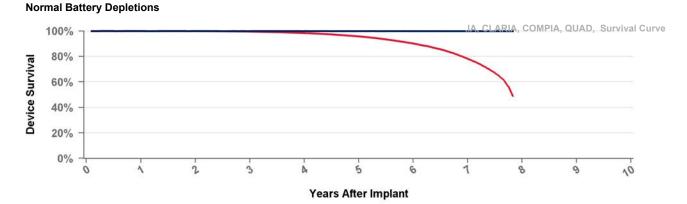
Registered USA Implants

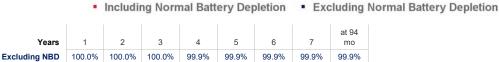
Implants 1

Estimated Active USA Implants

Therapy Function Compromised

Total Malfunctions (USA)





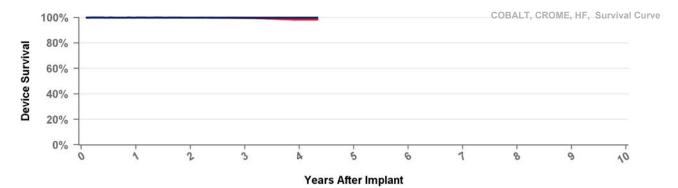
Including NBD

Effective
Sample Size

100.0% 100.0% 100.0% 99.9% 99.9% 99.9% 99.9% 99.9% 99.9% 99.6% 98.4% 95.8% 90.2% 78.2% 114917 100747 82600 67393 26834 10564 652 46692

DTPA2D1 Cobalt XT HF

US Market Release	23Apr2020	Total Malfunctions (USA)	1
CE Approval Date	18Dec2019	Therapy Function Not Compromised	1
Registered USA Implants	6,112	Other	1
Estimated Active USA Implants	5,813	Therapy Function Compromised	0
Normal Battory Donlations	12		

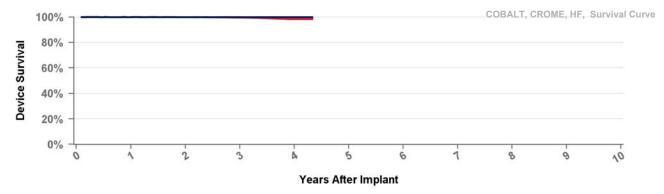


Including Normal Battery Depletion
 Excluding Normal Battery Depletion

Years	1	2	3	4	at 52 mo
Excluding NBD	100.0%	100.0%	99.9%	99.9%	99.9%
Including NBD	100.0%	99.9%	99.6%	98.3%	98.3%
Effective Sample Size	56949	31260	16772	1730	144

DTPA2D4 Cobalt XT HF

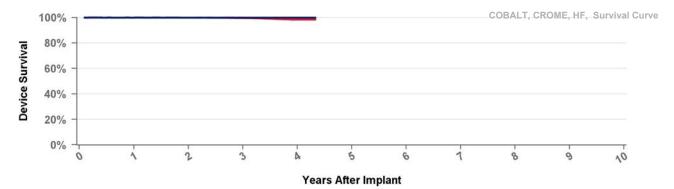
US Market Release	23Apr2020	Total Malfunctions (USA)	3
CE Approval Date	18Dec2019	Therapy Function Not Compromised	2
Registered USA Implants	9,169	Electrical Component	1
Estimated Active USA Implants	8,772	Electrical Interconnect	1
Normal Battery Depletions	10	Therapy Function Compromised	1
		Electrical Interconnect	1



Years	1	2	3	4	at 52 mo
Excluding NBD	100.0%	100.0%	99.9%	99.9%	99.9%
Including NBD	100.0%	99.9%	99.6%	98.3%	98.3%
Effective Sample Size	56949	31260	16772	1730	144

DTPA2Q1 Cobalt XT HF Quad

US Market Release	23Apr2020	Total Malfunctions (USA)	1
CE Approval Date	18Dec2019	Therapy Function Not Compromised	1
Registered USA Implants	4,202	Software/Firmware	1
Estimated Active USA Implants	3,978	Therapy Function Compromised	0
Normal Battery Depletions	4		



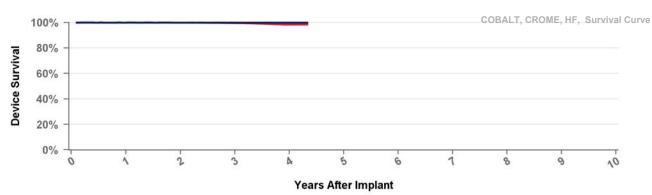
Including Normal Battery Depletion
 Excluding Normal Battery Depletion

Years	1	2	3	4	at 52 mo
Excluding NBD	100.0%	100.0%	99.9%	99.9%	99.9%
Including NBD	100.0%	99.9%	99.6%	98.3%	98.3%
Effective Sample Size	56949	31260	16772	1730	144

DTPA2QQ

Cobalt XT HF Quad

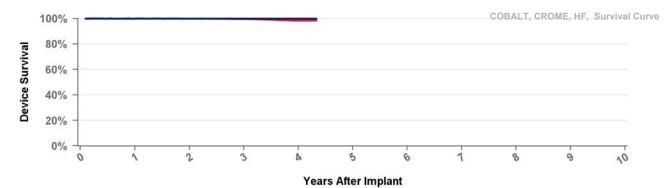
US Market Release	23Apr2020	Total Malfunctions (USA)	6
CE Approval Date	18Dec2019	Therapy Function Not Compromised	4
Registered USA Implants	40,338	Electrical Component	3
Estimated Active USA Implants	38,767	Software/Firmware	1
Normal Battery Depletions	18	Therapy Function Compromised	2
		Electrical Component	1
		Electrical Interconnect	1



Years	1	2	3	4	at 52 mo
Excluding NBD	100.0%	100.0%	99.9%	99.9%	99.9%
Including NBD	100.0%	99.9%	99.6%	98.3%	98.3%
Effective Sample Size	56949	31260	16772	1730	144

DTPB2D1 Cobalt HF

US Market Release	23Apr2020	Total Malfunctions (USA)	3
CE Approval Date	18Dec2019	Therapy Function Not Compromised	1
Registered USA Implants	4,064	Electrical Component	1
Estimated Active USA Implants	3,710	Therapy Function Compromised	2
Normal Battery Depletions	30	Electrical Component	1
		Electrical Interconnect	1

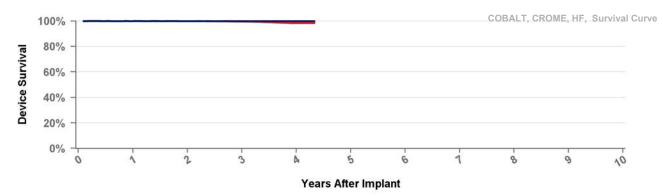


Including Normal Battery Depletion
 Excluding Normal Battery Depletion

Years	1	2	3	4	at 52 mo
Excluding NBD	100.0%	100.0%	99.9%	99.9%	99.9%
Including NBD	100.0%	99.9%	99.6%	98.3%	98.3%
Effective Sample Size	56949	31260	16772	1730	144

DTPB2D4 Cobalt HF

US Market Release	23Apr2020	Total Malfunctions (USA)	5
CE Approval Date	18Dec2019	Therapy Function Not Compromised	4
Registered USA Implants	4,418	Electrical Interconnect	3
Estimated Active USA Implants	4,106	Software/Firmware	1
Normal Battery Depletions	22	Therapy Function Compromised	1
		Electrical Component	1



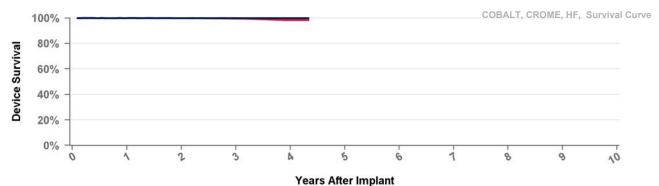
Years	1	2	3	4	at 52 mo
Excluding NBD	100.0%	100.0%	99.9%	99.9%	99.9%
Including NBD	100.0%	99.9%	99.6%	98.3%	98.3%
Effective Sample Size	56949	31260	16772	1730	144

DTPB2Q1 Cobalt HF Quad

US Market Release 23Apr2020 **Total Malfunctions (USA)** 18Dec2019 **Therapy Function Not Compromised CE Approval Date Registered USA Implants** 2,712

Therapy Function Compromised Estimated Active USA Implants 2,490

Normal Battery Depletions 8



Including Normal Battery Depletion
 Excluding Normal Battery Depletion

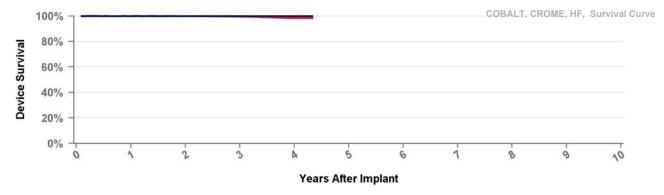
Years	1	2	3	4	at 52 mo
Excluding NBD	100.0%	100.0%	99.9%	99.9%	99.9%
Including NBD	100.0%	99.9%	99.6%	98.3%	98.3%
Effective Sample Size	56949	31260	16772	1730	144

DTPB2QQ Cobalt HF Quad

US Market Release	23Apr2020
CE Approval Date	18Dec2019
Registered USA Implants	21,089
Estimated Active USA Implants	19,811
Normal Battery Depletions	68

Total Malfunctions (USA) 13 **Therapy Function Not Compromised** 7 **Electrical Component** 5 Electrical Interconnect 1 Other 1 **Therapy Function Compromised** 6

Electrical Component 3 **Electrical Interconnect** 3



Years	1	2	3	4	at 52 mo
Excluding NBD	100.0%	100.0%	99.9%	99.9%	99.9%
Including NBD	100.0%	99.9%	99.6%	98.3%	98.3%
Effective Sample Size	56949	31260	16772	1730	144

DTPC2D1 **Crome HF**

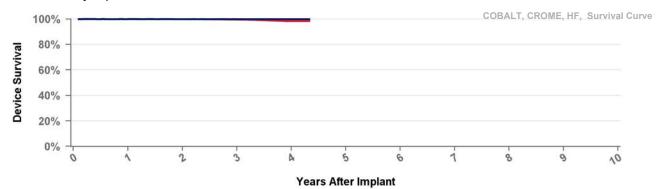
US Market Release 23Apr2020

18Dec2019 **Therapy Function Not Compromised CE Approval Date**

Registered USA Implants 413

Therapy Function Compromised Estimated Active USA Implants 381

Normal Battery Depletions 2



Total Malfunctions (USA)

Including Normal Battery Depletion
 Excluding Normal Battery Depletion

Years	1	2	3	4	at 52 mo
Excluding NBD	100.0%	100.0%	99.9%	99.9%	99.9%
Including NBD	100.0%	99.9%	99.6%	98.3%	98.3%
Effective Sample Size	56949	31260	16772	1730	144

DTPC2D4 Crome HF

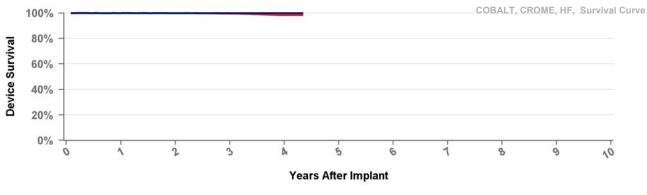
US Market Release Total Malfunctions (USA) 23Apr2020

Therapy Function Not Compromised CE Approval Date 18Dec2019

Registered USA Implants 462

Therapy Function Compromised Estimated Active USA Implants 433

Normal Battery Depletions 4



Years	1	2	3	4	at 52 mo
Excluding NBD	100.0%	100.0%	99.9%	99.9%	99.9%
Including NBD	100.0%	99.9%	99.6%	98.3%	98.3%
Effective Sample Size	56949	31260	16772	1730	144

Crome HF Quad DTPC2Q1

US Market Release 23Apr2020 18Dec2019 **CE Approval Date Registered USA Implants** 200

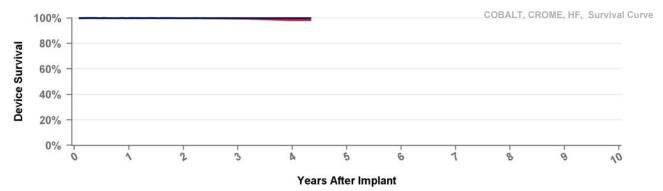
Total Malfunctions (USA) Therapy Function Not Compromised

Estimated Active USA Implants 188

Therapy Function Compromised

Normal Battery Depletions

4

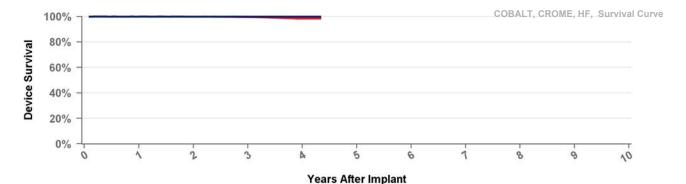


Including Normal Battery Depletion
 Excluding Normal Battery Depletion

Years	1	2	3	4	at 52 mo
Excluding NBD	100.0%	100.0%	99.9%	99.9%	99.9%
Including NBD	100.0%	99.9%	99.6%	98.3%	98.3%
Effective Sample Size	56949	31260	16772	1730	144

DTPC2QQ Crome HF Quad

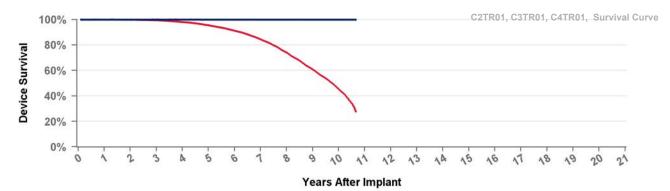
US Market Release Total Malfunctions (USA) 23Apr2020 1 **Therapy Function Not Compromised CE Approval Date** 18Dec2019 1 **Registered USA Implants Electrical Component** 1,846 1 **Estimated Active USA Implants Therapy Function Compromised** 0 1,743 **Normal Battery Depletions** 8



Years	1	2	3	4	at 52 mo
Excluding NBD	100.0%	100.0%	99.9%	99.9%	99.9%
Including NBD	100.0%	99.9%	99.6%	98.3%	98.3%
Effective Sample Size	56949	31260	16772	1730	144

C2TR01 Syncra CRT-P

US Market Release	22Mar2011	Total Malfunctions (USA)	7
CE Approval Date	11May2010	Therapy Function Not Compromised	6
Registered USA Implants	10,237	Possible Early Battery Depletion	5
Estimated Active USA Implants	2,114	Other	1
Normal Battery Depletions	1,008	Therapy Function Compromised	1
		Possible Early Battery Depletion	1





Years	1	2	3	4	5	6	7	8	9	10	at 128 mo
Excluding NBD	100.0%	100.0%	100.0%	100.0%	99.9%	99.9%	99.9%	99.9%	99.9%	99.9%	99.9%
Including NBD	99.9%	99.8%	99.5%	98.0%	95.5%	91.2%	84.4%	74.1%	60.7%	45.3%	27.6%
Effective Sample Size	26186	23391	20951	18300	15667	13090	10447	7237	4113	1577	132

C3TR01

Consulta CRT-P

US Market Release CE Approval Date

11May2010

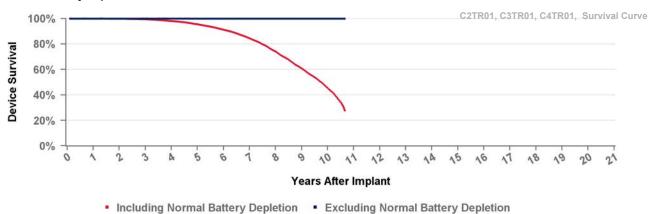
Total Malfunctions (USA)

Registered USA Implants

Estimated Active USA Implants

Therapy Function Not Compromised

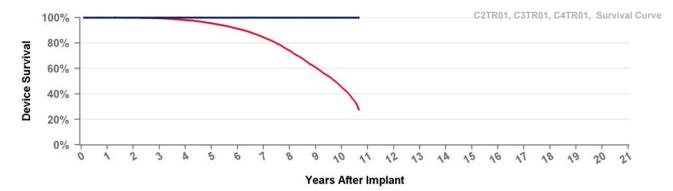
Normal Battery Depletions



Years	1	2	3	4	5	6	7	8	9	10	at 128 mo
Excluding NBD	100.0%	100.0%	100.0%	100.0%	99.9%	99.9%	99.9%	99.9%	99.9%	99.9%	99.9%
Including NBD	99.9%	99.8%	99.5%	98.0%	95.5%	91.2%	84.4%	74.1%	60.7%	45.3%	27.6%
Effective Sample Size	26186	23391	20951	18300	15667	13090	10447	7237	4113	1577	132

Consulta CRT-P **C4TR01**

US Market Release	22Mar2011	Total Malfunctions (USA)	8
CE Approval Date		Therapy Function Not Compromised	5
Registered USA Implants	23,406	Possible Early Battery Depletion	5
Estimated Active USA Implants	5,424	Therapy Function Compromised	3
Normal Battery Depletions	2,359	Electrical Component	2
		Possible Early Battery Depletion	1



Including Normal Battery Depletion
 Excluding Normal Battery Depletion

Years	1	2	3	4	5	6	7	8	9	10	at 128 mo
Excluding NBD	100.0%	100.0%	100.0%	100.0%	99.9%	99.9%	99.9%	99.9%	99.9%	99.9%	99.9%
Including NBD	99.9%	99.8%	99.5%	98.0%	95.5%	91.2%	84.4%	74.1%	60.7%	45.3%	27.6%
Effective	26186	23391	20951	18300	15667	13090	10447	7237	4113	1577	132

C5TR01

Viva CRT-P

US Market Release

Total Malfunctions (USA)

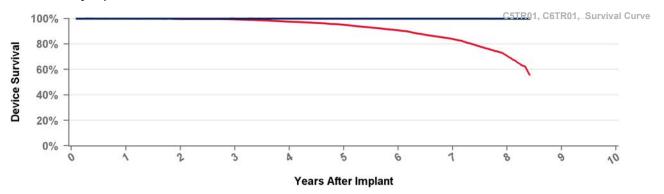
CE Approval Date Registered USA Implants 04Apr2014

Therapy Function Not Compromised

Estimated Active USA Implants

Normal Battery Depletions

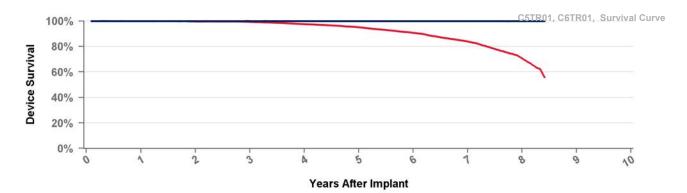
Therapy Function Compromised



Years	1	2	3	4	5	6	7	8	at 101 mo		
Excluding NBD	100.0%	100.0%	100.0%	99.9%	99.9%	99.9%	99.9%	99.8%	99.8%		
Including NBD	99.9%	99.7%	99.3%	97.5%	95.1%	90.7%	83.9%	70.6%	55.9%		
Effective Sample Size	7363	6602	5917	5148	4409	3634	2861	1029	251		

C6TR01 Viva CRT-P

US Market Release	09Jul2014	Total Malfunctions (USA)	8
CE Approval Date		Therapy Function Not Compromised	8
Registered USA Implants	9,202	Electrical Component	2
Estimated Active USA Implants	3,634	Possible Early Battery Depletion	6
Normal Battery Depletions	694	Therapy Function Compromised	0



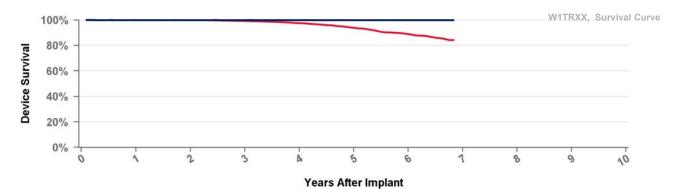
Including Normal Battery Depletion
 Excluding Normal Battery Depletion

Years	1	2	3	4	5	6	7	8	at 101 mo
Excluding NBD	100.0%	100.0%	100.0%	99.9%	99.9%	99.9%	99.9%	99.8%	99.8%
Including NBD	99.9%	99.7%	99.3%	97.5%	95.1%	90.7%	83.9%	70.6%	55.9%
Effective	7363	6602	5917	5148	4409	3634	2861	1029	251

W1TR01

Percepta CRTP MRI

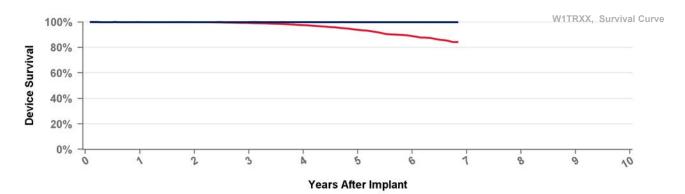
US Market Release	06May2017	Total Malfunctions (USA)	6
CE Approval Date		Therapy Function Not Compromised	4
Registered USA Implants	18,071	Electrical Component	2
Estimated Active USA Implants	15,201	Possible Early Battery Depletion	1
Normal Battery Depletions	175	Other	1
		Therapy Function Compromised	2
		Electrical Component	2



Years	1	2	3	4	5	6	at 82 mo
Excluding NBD	100.0%	100.0%	100.0%	99.9%	99.9%	99.9%	99.9%
Including NBD	100.0%	99.9%	99.3%	97.6%	93.9%	88.9%	84.2%
Effective Sample Size	19208	14409	10525	6913	3843	1480	168

W1TR02 Serena CRTP MRI

US Market Release	06May2017	Total Malfunctions (USA)	3
CE Approval Date		Therapy Function Not Compromised	3
Registered USA Implants	3,251	Electrical Component	2
Estimated Active USA Implants	2,606	Other	1
Normal Battery Depletions	51	Therapy Function Compromised	0



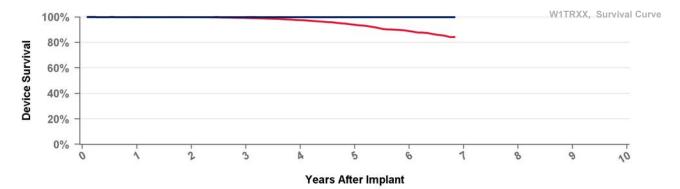
Including Normal Battery Depletion
 Excluding Normal Battery Depletion

Years	1	2	3	4	5	6	at 82 mo
Excluding NBD	100.0%	100.0%	100.0%	99.9%	99.9%	99.9%	99.9%
Including NBD	100.0%	99.9%	99.3%	97.6%	93.9%	88.9%	84.2%
Effective Sample Size	19208	14409	10525	6913	3843	1480	168

W1TR03

Solara CRTP MRI

US Market Release	06May2017	Total Malfunctions (USA)	3
CE Approval Date		Therapy Function Not Compromised	3
Registered USA Implants	4,044	Electrical Component	2
Estimated Active USA Implants	3,052	Possible Early Battery Depletion	1
Normal Battery Depletions	95	Therapy Function Compromised	0



Years	1	2	3	4	5	6	at 82 mo
Excluding NBD	100.0%	100.0%	100.0%	99.9%	99.9%	99.9%	99.9%
Including NBD	100.0%	99.9%	99.3%	97.6%	93.9%	88.9%	84.2%
Effective Sample Size	19208	14409	10525	6913	3843	1480	168

W1TR04 Percepta CRTP MRI

US Market Release

Total Malfunctions (USA)

CE Approval Date

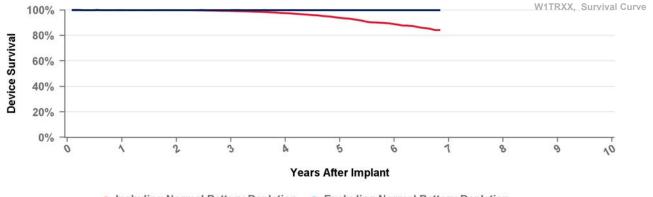
Therapy Function Not Compromised

Registered USA Implants

Estimated Active USA Implants

Therapy Function Compromised

Normal Battery Depletions



Including Normal Battery Depletion
 Excluding Normal Battery Depletion

Years	1	2	3	4	5	6	at 82 mo
Excluding NBD	100.0%	100.0%	100.0%	99.9%	99.9%	99.9%	99.9%
Including NBD	100.0%	99.9%	99.3%	97.6%	93.9%	88.9%	84.2%
Effective Sample Size	19208	14409	10525	6913	3843	1480	168

W1TR05

Serena CRTP MRI

US Market Release

Total Malfunctions (USA) 10Feb2017

CE Approval Date

Therapy Function Not Compromised

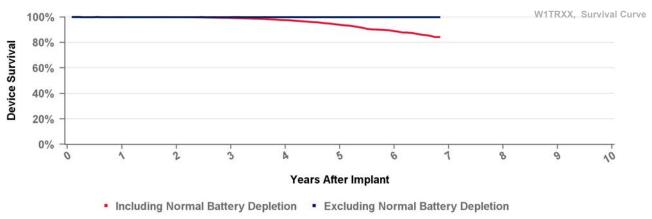
Registered USA Implants

10Feb2017

Estimated Active USA Implants

Therapy Function Compromised

Normal Battery Depletions



Years	1	2	3	4	5	6	at 82 mo
Excluding NBD	100.0%	100.0%	100.0%	99.9%	99.9%	99.9%	99.9%
Including NBD	100.0%	99.9%	99.3%	97.6%	93.9%	88.9%	84.2%
Effective Sample Size	19208	14409	10525	6913	3843	1480	168

W1TR06 Solara CRTP MRI

US Market Release

Total Malfunctions (USA)

CE Approval Date

Therapy Function Not Compromised

Registered USA Implants

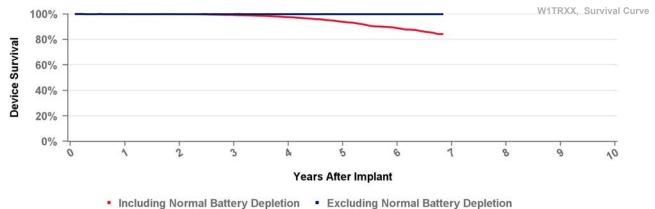
ne d LICA Imeniente

Estimated Active USA Implants

10Feb2017

Therapy Function Compromised

Normal Battery Depletions



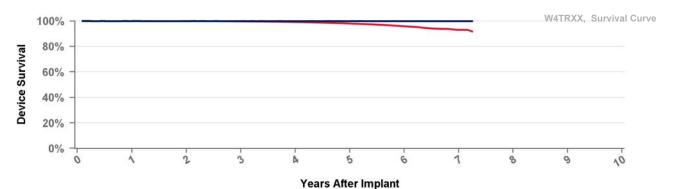
Including Normal Battery Depletion
 Excluding Normal Battery

Years	1	2	3	4	5	6	at 82 mo
Excluding NBD	100.0%	100.0%	100.0%	99.9%	99.9%	99.9%	99.9%
Including NBD	100.0%	99.9%	99.3%	97.6%	93.9%	88.9%	84.2%
Effective Sample Size	19208	14409	10525	6913	3843	1480	168

W4TR01

Percepta Quad CRTP MRI SureScan

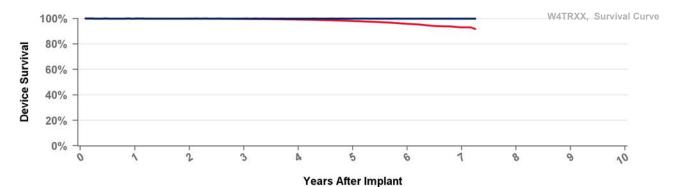
US Market Release	06May2017	Total Malfunctions (USA)	14
CE Approval Date		Therapy Function Not Compromised	13
Registered USA Implants	61,482	Electrical Component	11
Estimated Active USA Implants	52,289	Possible Early Battery Depletion	1
Normal Battery Depletions	309	Other	1
		Therapy Function Compromised	1
		Electrical Component	1



Years	1	2	3	4	5	6	7	at 87 mo
Excluding NBD	100.0%	100.0%	100.0%	100.0%	100.0%	99.9%	99.9%	99.9%
Including NBD	100.0%	100.0%	99.8%	99.2%	98.1%	95.9%	93.1%	91.7%
Effective Sample Size	62997	48587	35821	24357	14927	6906	1247	209

W4TR02 Serena Quad CRTP MRI SureScan

US Market Release	06May2017	Total Malfunctions (USA)	3
CE Approval Date		Therapy Function Not Compromised	3
Registered USA Implants	8,547	Electrical Component	3
Estimated Active USA Implants	6,929	Therapy Function Compromised	0
Normal Battery Depletions	53		

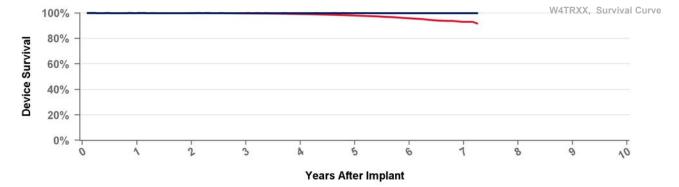


Including Normal Battery Depletion
 Excluding Normal Battery Depletion

Years	1	2	3	4	5	6	7	at 87 mo
Excluding NBD	100.0%	100.0%	100.0%	100.0%	100.0%	99.9%	99.9%	99.9%
Including NBD	100.0%	100.0%	99.8%	99.2%	98.1%	95.9%	93.1%	91.7%
Effective Sample Size	62997	48587	35821	24357	14927	6906	1247	209

W4TR03 Solara Quad CRTP MRI SureScan

US Market Release	06May2017	Total Malfunctions (USA)	6
CE Approval Date		Therapy Function Not Compromised	3
Registered USA Implants	10,490	Electrical Component	3
Estimated Active USA Implants	8,155	Therapy Function Compromised	3
Normal Battery Depletions	76	Electrical Component	2
		Possible Early Battery Depletion	1



Years	1	2	3	4	5	6	7	at 87 mo
Excluding NBD	100.0%	100.0%	100.0%	100.0%	100.0%	99.9%	99.9%	99.9%
Including NBD	100.0%	100.0%	99.8%	99.2%	98.1%	95.9%	93.1%	91.7%
Effective Sample Size	62997	48587	35821	24357	14927	6906	1247	209

W4TR04

Percepta Quad CRTP MRI SureScan

10Feb2017

US Market Release

Total Malfunctions (USA)

CE Approval Date

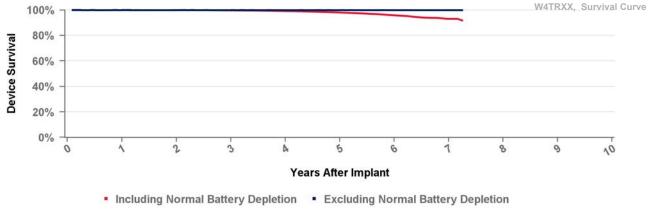
Therapy Function Not Compromised

Registered USA Implants

Estimated Active USA Implants

Therapy Function Compromised

Normal Battery Depletions



Years	1	2	3	4	5	6	7	at 87 mo
Excluding NBD	100.0%	100.0%	100.0%	100.0%	100.0%	99.9%	99.9%	99.9%
Including NBD	100.0%	100.0%	99.8%	99.2%	98.1%	95.9%	93.1%	91.7%
Effective Sample Size	62997	48587	35821	24357	14927	6906	1247	209

W4TR05

Serena Quad CRTP MRI SureScan

10Feb2017

US Market Release

Total Malfunctions (USA)

CE Approval Date

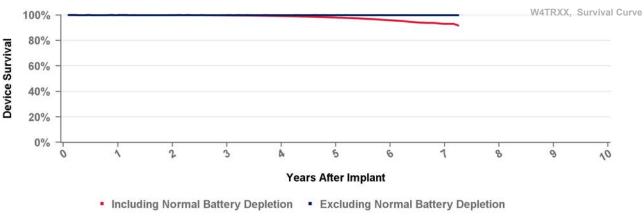
Therapy Function Not Compromised

Registered USA Implants

Estimated Active USA Implants

Therapy Function Compromised

Normal Battery Depletions



Years	1	2	3	4	5	6	7	at 87 mo
Excluding NBD	100.0%	100.0%	100.0%	100.0%	100.0%	99.9%	99.9%	99.9%
Including NBD	100.0%	100.0%	99.8%	99.2%	98.1%	95.9%	93.1%	91.7%
Effective Sample Size	62997	48587	35821	24357	14927	6906	1247	209

W4TR06

Solara Quad CRTP MRI SureScan

10Feb2017

US Market Release

Total Malfunctions (USA)

CE Approval Date

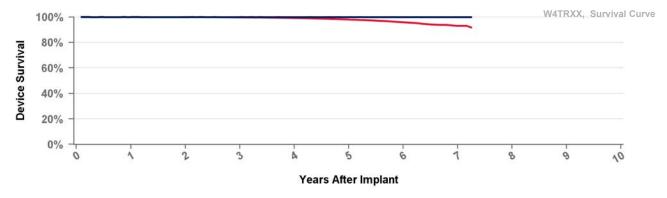
Therapy Function Not Compromised

Registered USA Implants

Estimated Active USA Implants

Therapy Function Compromised

Normal Battery Depletions



Years
Excluding NBD
Including NBD
Effective
Sample Size

rs	1	2	3	4	5	6	7	at 87 mo
BD	100.0%	100.0%	100.0%	100.0%	100.0%	99.9%	99.9%	99.9%
BD	100.0%	100.0%	99.8%	99.2%	98.1%	95.9%	93.1%	91.7%
ve	62997	48587	35821	24357	14927	6906	1247	209
7 e								

D214VRM

Secura VR

US Market Release

17Dec2010 **CE Approval Date**

Registered USA Implants

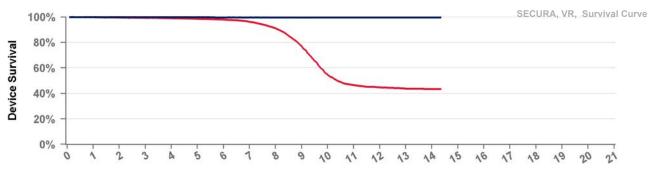
Estimated Active USA Implants

Normal Battery Depletions

Total Malfunctions (USA)

Therapy Function Not Compromised

Therapy Function Compromised



Years After Implant

Including Normal Battery Depletion
 Excluding Normal Battery Depletion

Years	1	2	3	1	5	6	7	8	Q	10	11	12	13	14	at 172	
16413	'		J	7	J	U	'	U	3	10	- 11	12	10	17	1110	
Excluding NBD	100.0%	99.9%	99.9%	99.9%	99.8%	99.8%	99.7%	99.6%	99.6%	99.6%	99.6%	99.6%	99.6%	99.6%	99.6%	
Including NBD	99.8%	99.6%	99.3%	99.0%	98.6%	98.0%	96.2%	91.1%	77.0%	54.6%	46.6%	44.8%	43.8%	43.5%	43.3%	
Effective	17637	16328	15175	14070	12958	11844	10615	8585	5566	2897	2072	1578	1144	425	150	ı
Sample Size																ı

D234VRC

Secura VR

US Market Release CE Approval Date

14Mar2008

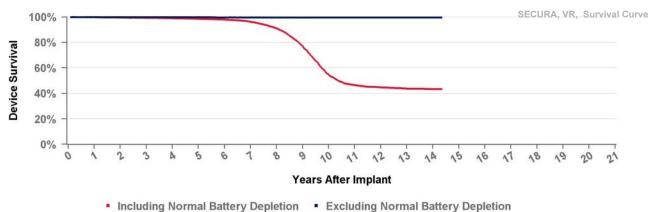
Total Malfunctions (USA)

Therapy Function Not Compromised

Registered USA Implants

Estimated Active USA Implants

Normal Battery Depletions



															at 172
Years	1	2	3	4	5	6	7	8	9	10	11	12	13	14	mo
Excluding NBD	100.0%	99.9%	99.9%	99.9%	99.8%	99.8%	99.7%	99.6%	99.6%	99.6%	99.6%	99.6%	99.6%	99.6%	99.6%
Including NBD	99.8%	99.6%	99.3%	99.0%	98.6%	98.0%	96.2%	91.1%	77.0%	54.6%	46.6%	44.8%	43.8%	43.5%	43.3%
Effective	17637	16328	15175	14070	12958	11844	10615	8585	5566	2897	2072	1578	1144	425	150
Sample Size															

D264DRM Maximo II DR

US Market Release

09Jan2012

Total Malfunctions (USA)

CE Approval Date Registered USA Implants 22Jul2010

Therapy Function Not Compromised

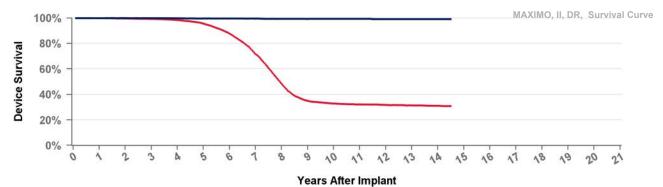
Estimated Active USA Implants

6

Therapy Function Compromised

Normal Battery Depletions

2



Including Normal Battery Depletion
 Excluding Normal Battery Depletion

															at 174
Years	1	2	3	4	5	6	7	8	9	10	11	12	13	14	mo
Excluding NBD	100.0%	100.0%	99.9%	99.8%	99.7%	99.7%	99.5%	99.3%	99.3%	99.3%	99.3%	99.2%	99.2%	99.2%	99.2%
Including NBD	99.9%	99.6%	99.3%	98.4%	95.6%	87.7%	71.7%	48.4%	35.0%	32.9%	32.2%	31.8%	31.4%	31.1%	30.8%
Effective	17236	15934	14783	13616	12097	9584	5993	2812	1730	1494	1356	1155	856	372	107
Sample Size															

D264VRM

Maximo II VR

US Market Release

02May2012

Total Malfunctions (USA)

CE Approval Date

17Dec2010

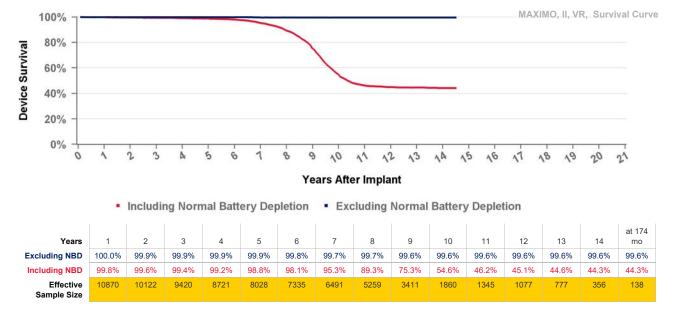
Therapy Function Not Compromised

Registered USA Implants

Estimated Active USA Implants

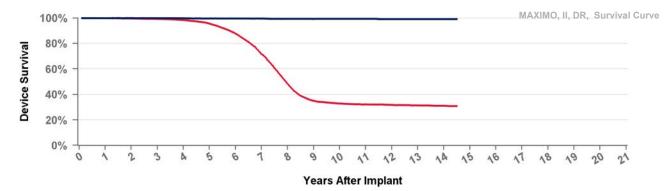
Therapy Function Compromised

Normal Battery Depletions



D284DRG Maximo II DR

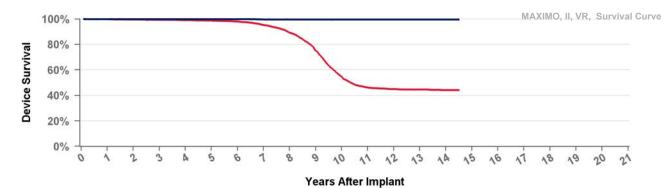
US Market Release	17Sep2008	Total Malfunctions (USA)	71
CE Approval Date	14Mar2008	Therapy Function Not Compromised	54
Registered USA Implants	19,956	Battery	7
Estimated Active USA Implants	2,339	Electrical Component	15
Normal Battery Depletions	3,647	Possible Early Battery Depletion	30
		Other	2
		Therapy Function Compromised	17
		Battery	11
		Electrical Component	5
		Possible Early Battery Depletion	1



															at 174
Years	1	2	3	4	5	6	7	8	9	10	11	12	13	14	mo
Excluding NBD	100.0%	100.0%	99.9%	99.8%	99.7%	99.7%	99.5%	99.3%	99.3%	99.3%	99.3%	99.2%	99.2%	99.2%	99.2%
Including NBD	99.9%	99.6%	99.3%	98.4%	95.6%	87.7%	71.7%	48.4%	35.0%	32.9%	32.2%	31.8%	31.4%	31.1%	30.8%
Effective	17236	15934	14783	13616	12097	9584	5993	2812	1730	1494	1356	1155	856	372	107
Sample Size															

Maximo II VR **D284VRC**

US Market Release	17Sep2008	Total Malfunctions (USA)	32
CE Approval Date	14Mar2008	Therapy Function Not Compromised	22
Registered USA Implants	12,860	Battery	10
Estimated Active USA Implants	2,063	Electrical Component	5
Normal Battery Depletions	1,623	Possible Early Battery Depletion	4
		Software/Firmware	3
		Therapy Function Compromised	10
		Battery	6
		Electrical Component	3
		Software/Firmware	1



Including Normal Battery Depletion
 Excluding Normal Battery Depletion

Years	1	2	3	4	5	6	7	8	9	10	11	12	13	14	at 174 mo
Excluding NBD	100.0%	99.9%	99.9%	99.9%	99.9%	99.8%	99.7%	99.7%	99.6%	99.6%	99.6%	99.6%	99.6%	99.6%	99.6%
Including NBD	99.8%	99.6%	99.4%	99.2%	98.8%	98.1%	95.3%	89.3%	75.3%	54.6%	46.2%	45.1%	44.6%	44.3%	44.3%
Effective Sample Size	10870	10122	9420	8721	8028	7335	6491	5259	3411	1860	1345	1077	777	356	138

D294VRC

Virtuoso II VR

US Market Release CE Approval Date

20Aug2008

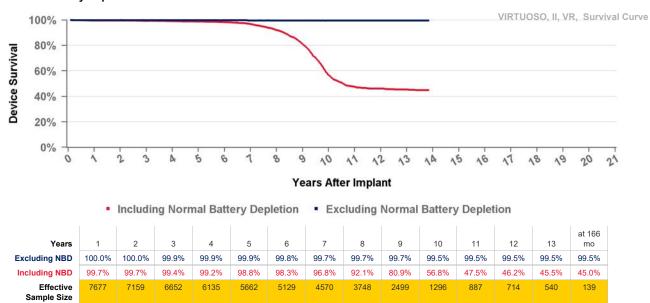
Total Malfunctions (USA)

Registered USA Implants

Therapy Function Not Compromised

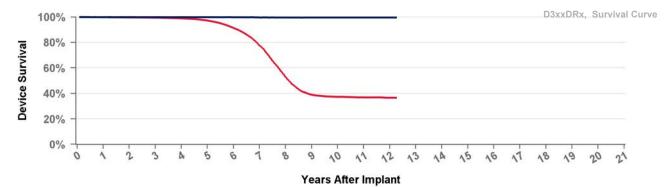
Estimated Active USA Implants

Normal Battery Depletions



D314DRG Protecta XT DR

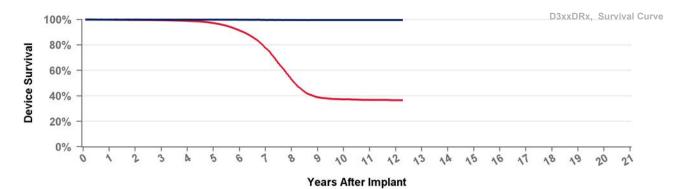
US Market Release	25Mar2011	Total Malfunctions (USA)	77
CE Approval Date		Therapy Function Not Compromised	40
Registered USA Implants	34,746	Battery	8
Estimated Active USA Implants	4,594	Electrical Component	26
Normal Battery Depletions	4,554	Electrical Interconnect	1
		Possible Early Battery Depletion	4
		Other	1
		Therapy Function Compromised	37
		Battery	30
		Electrical Component	7



Years	1	2	3	4	5	6	7	8	9	10	11	12	at 147 mo
Excluding NBD	100.0%	99.9%	99.9%	99.9%	99.9%	99.8%	99.7%	99.7%	99.6%	99.6%	99.6%	99.6%	99.6%
Including NBD	99.8%	99.7%	99.5%	99.0%	97.2%	91.3%	77.7%	53.0%	39.0%	37.4%	36.9%	36.7%	36.7%
Effective Sample Size	54185	50301	46253	42262	37892	31014	20480	9398	5321	4618	3945	1133	266

D314DRM Protecta XT DR

US Market Release	09Nov2011	Total Malfunctions (USA)	25
CE Approval Date		Therapy Function Not Compromised	17
Registered USA Implants	13,914	Battery	3
Estimated Active USA Implants	2,180	Electrical Component	12
Normal Battery Depletions	1,928	Other	2
		Therapy Function Compromised	8
		Battery	7
		Electrical Component	1



Including Normal Battery Depletion
 Excluding Normal Battery Depletion

Years	1	2	3	4	5	6	7	8	9	10	11	12	at 147 mo
Excluding NBD	100.0%	99.9%	99.9%	99.9%	99.9%	99.8%	99.7%	99.7%	99.6%	99.6%	99.6%	99.6%	99.6%
Including NBD	99.8%	99.7%	99.5%	99.0%	97.2%	91.3%	77.7%	53.0%	39.0%	37.4%	36.9%	36.7%	36.7%
Effective Sample Size	54185	50301	46253	42262	37892	31014	20480	9398	5321	4618	3945	1133	266

D354DRG Protecta XT DR

US Market Release

Effective

Sample Size

54185

25Mar2010

CE Approval Date

Registered USA Implants 2

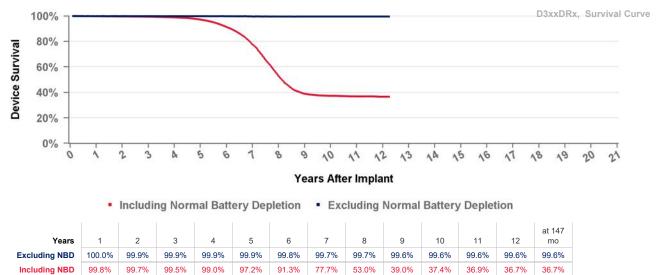
Estimated Active USA Implants

Normal Battery Depletions

Total Malfunctions (USA)

Therapy Function Not Compromised

Therapy Function Compromised



20480

9398

46253

42262

37892

31014

50301

5321

4618

3945

1133

266

D354DRM Protecta XT DR

US Market Release

Total Malfunctions (USA)

15Jul2010

1

CE Approval Date

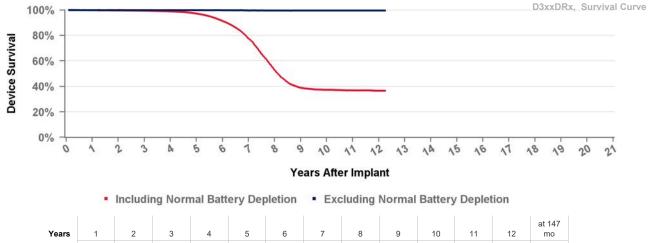
Registered USA Implants

Therapy Function Not Compromised

Estimated Active USA Implants

Therapy Function Compromised

Normal Battery Depletions



Excluding NBD 100.0% 99.9% 99.9% 99.9% 99.9% 99.8% 99.7% 99.7% 99.6% 99.6% 99.6% 99.6% 99.6% 37.4% 36.7% Including NBD 99.8% 99.7% 99.0% 97.2% 91.3% 53.0% 36.7% Effective 50301 46253 37892 31014 20480 9398 5321 4618 3945 266 1133 Sample Size

D354VRG

Protecta XT

US Market Release CE Approval Date

Total Malfunctions (USA)

25Mar2010

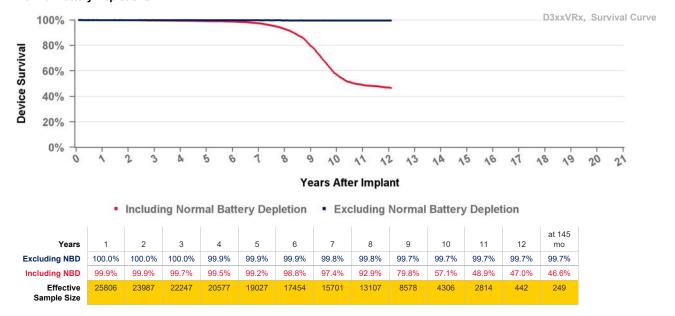
Therapy Function Not Compromised

Registered USA Implants

Estimated Active USA Implants

Therapy Function Compromised

Normal Battery Depletions



D354VRM Protecta XT VR

US Market Release

Total Malfunctions (USA)

CE Approval Date

17Dec2010

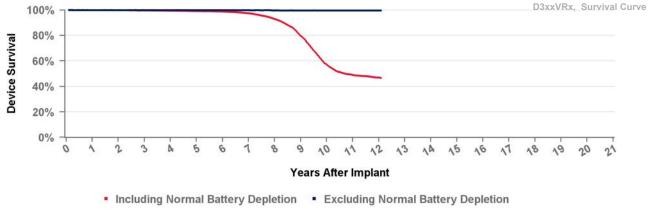
Registered USA Implants

Therapy Function Not Compromised

Estimated Active USA Implants

Therapy Function Compromised

Normal Battery Depletions



Years	1	2	3	4	5	6	7	8	9	10	11	12	at 145 mo
Excluding NBD	100.0%	100.0%	100.0%	99.9%	99.9%	99.9%	99.8%	99.8%	99.7%	99.7%	99.7%	99.7%	99.7%
Including NBD	99.9%	99.9%	99.7%	99.5%	99.2%	98.8%	97.4%	92.9%	79.8%	57.1%	48.9%	47.0%	46.6%
Effective Sample Size	25806	23987	22247	20577	19027	17454	15701	13107	8578	4306	2814	442	249

D364DRG

Protecta DR

US Market Release

25Mar2010 **CE Approval Date**

Therapy Function Not Compromised

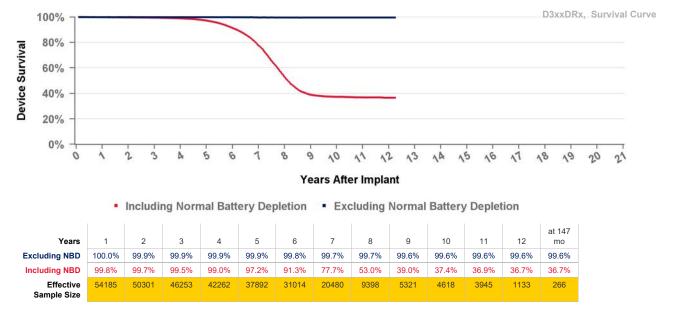
Registered USA Implants

Estimated Active USA Implants

Therapy Function Compromised

Total Malfunctions (USA)

Normal Battery Depletions



D364DRM

Protecta DR

US Market Release

CE Approval Date

15Jul2010

Therapy Function Not Compromised

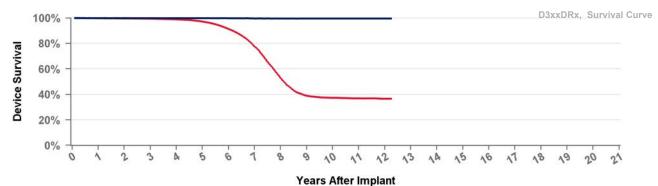
Registered USA Implants

Estimated Active USA Implants

Normal Battery Depletions

Therapy Function Compromised

Total Malfunctions (USA)



Including Normal Battery Depletion
 Excluding Normal Battery Depletion

Years	1	2	3	4	5	6	7	8	9	10	11	12	at 147 mo	
Excluding NBD	100.0%	99.9%	99.9%	99.9%	99.9%	99.8%	99.7%	99.7%	99.6%	99.6%	99.6%	99.6%	99.6%	
Including NBD	99.8%	99.7%	99.5%	99.0%	97.2%	91.3%	77.7%	53.0%	39.0%	37.4%	36.9%	36.7%	36.7%	
Effective Sample Size	54185	50301	46253	42262	37892	31014	20480	9398	5321	4618	3945	1133	266	

D364VRG

Protecta VR

US Market Release

25Mar2010

Total Malfunctions (USA)

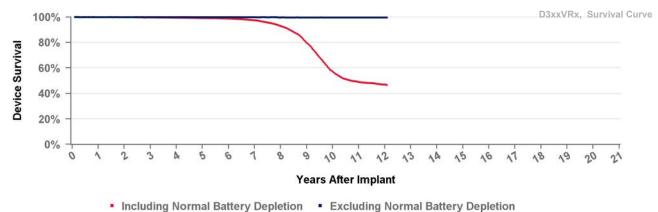
CE Approval Date

Therapy Function Not Compromised

Registered USA Implants

Estimated Active USA Implants

Normal Battery Depletions



			2500 0000										
Years	1	2	3	4	5	6	7	8	9	10	11	12	at 145 mo
Excluding NBD	100.0%	100.0%	100.0%	99.9%	99.9%	99.9%	99.8%	99.8%	99.7%	99.7%	99.7%	99.7%	99.7%
Including NBD	99.9%	99.9%	99.7%	99.5%	99.2%	98.8%	97.4%	92.9%	79.8%	57.1%	48.9%	47.0%	46.6%
Effective	25806	23987	22247	20577	19027	17454	15701	13107	8578	4306	2814	442	249
Sample Size													

D364VRM

Protecta VR

US Market Release

CE Approval Date

17Dec2010

Total Malfunctions (USA)

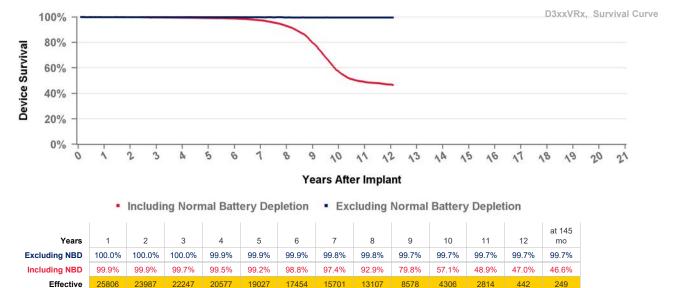
Therapy Function Not Compromised

Registered USA Implants

Estimated Active USA Implants

Therapy Function Compromised

Normal Battery Depletions



Sample Size
D384DRG

Cardia DR

US Market Release

CE Approval Date 12Jan2011

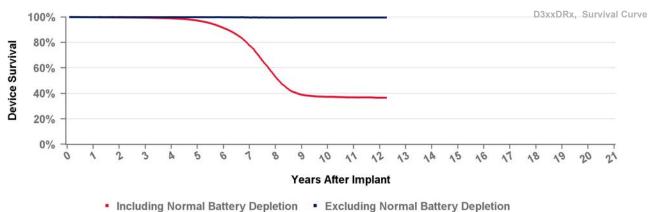
Registered USA Implants

Estimated Active USA Implants

Normal Battery Depletions

Total Malfunctions (USA)

Therapy Function Not Compromised



Years	1	2	3	4	5	6	7	8	9	10	11	12	at 147 mo
Excluding NBD	100.0%	99.9%	99.9%	99.9%	99.9%	99.8%	99.7%	99.7%	99.6%	99.6%	99.6%	99.6%	99.6%
Including NBD	99.8%	99.7%	99.5%	99.0%	97.2%	91.3%	77.7%	53.0%	39.0%	37.4%	36.9%	36.7%	36.7%
Effective	54185	50301	46253	42262	37892	31014	20480	9398	5321	4618	3945	1133	266

D384VRG

Cardia VR

US Market Release CE Approval Date

12Jan2011

Therapy Function Not Compromised

Registered USA Implants

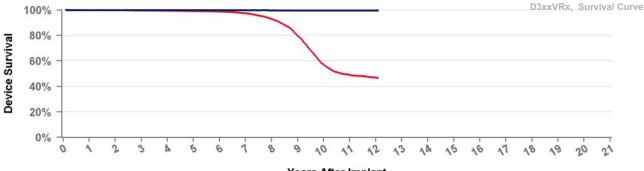
1

Total Malfunctions (USA)

Estimated Active USA Implants

Therapy Function Compromised





Years After Implant

Including Normal Battery Depletion
 Excluding Normal Battery Depletion

Years	1	2	3	4	5	6	7	8	9	10	11	12	at 145 mo
Excluding NBD	100.0%	100.0%	100.0%	99.9%	99.9%	99.9%	99.8%	99.8%	99.7%	99.7%	99.7%	99.7%	99.7%
Including NBD	99.9%	99.9%	99.7%	99.5%	99.2%	98.8%	97.4%	92.9%	79.8%	57.1%	48.9%	47.0%	46.6%
Effective Sample Size	25806	23987	22247	20577	19027	17454	15701	13107	8578	4306	2814	442	249

D394DRG

Egida DR

US Market Release

12Jan2011

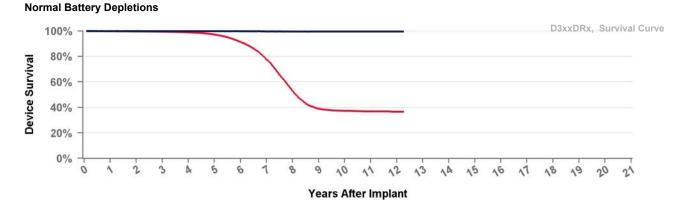
Total Malfunctions (USA)

CE Approval Date

Therapy Function Not Compromised

Registered USA Implants

Estimated Active USA Implants



	•	Includi	ng Norn	nal Batt	ery Dep	oletion	 Excluding Normal Battery Depletion 							
Years	1	2	3	4	5	6	7	8	9	10	11	12	at 147 mo	
Excluding NBD	100.0%	99.9%	99.9%	99.9%	99.9%	99.8%	99.7%	99.7%	99.6%	99.6%	99.6%	99.6%	99.6%	
Including NBD	99.8%	99.7%	99.5%	99.0%	97.2%	91.3%	77.7%	53.0%	39.0%	37.4%	36.9%	36.7%	36.7%	
Effective Sample Size	54185	50301	46253	42262	37892	31014	20480	9398	5321	4618	3945	1133	266	

D394VRG

Egida VR

US Market Release

12Jan2011

Total Malfunctions (USA)

CE Approval Date

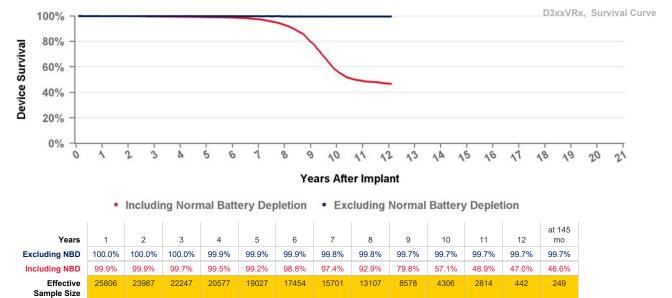
opiovai bate izoanz

Therapy Function Not Compromised

Registered USA Implants
Estimated Active USA Implants

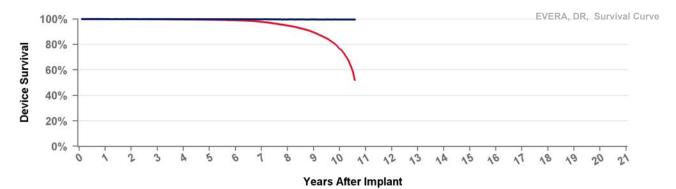
Therapy Function Compromised

Normal Battery Depletions



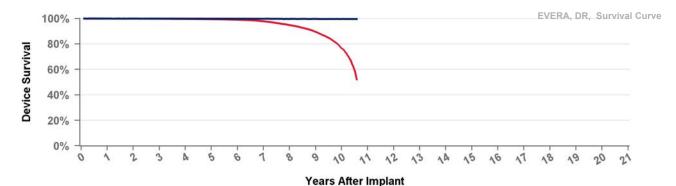
DDBB1D1 Evera XT

US Market Release	03Apr2013	Total Malfunctions (USA)	85
CE Approval Date		Therapy Function Not Compromised	50
Registered USA Implants	43,050	Battery	31
Estimated Active USA Implants	19,681	Electrical Component	16
Normal Battery Depletions	3,582	Software/Firmware	1
		Other	2
		Therapy Function Compromised	35
		Battery	30
		Device-Related Current Pathway	1
		Electrical Component	2
		Electrical Interconnect	1
		Other	1



Years	1	2	3	4	5	6	7	8	9	10	at 127 mo
Excluding NBD	100.0%	100.0%	100.0%	99.9%	99.9%	99.8%	99.8%	99.7%	99.7%	99.7%	99.7%
Including NBD	99.9%	99.9%	99.8%	99.7%	99.5%	99.1%	97.8%	94.8%	89.5%	76.7%	52.0%
Effective Sample Size	218225	198372	176480	156414	129273	100416	72513	46264	24723	8359	916

DDBB1D4 **Evera XT US Market Release** 03Apr2013 **Total Malfunctions (USA)** 77 **Therapy Function Not Compromised CE Approval Date** 47 **Registered USA Implants** 30,217 Battery 34 **Estimated Active USA Implants** 9 13,094 **Electrical Component Normal Battery Depletions Electrical Interconnect** 2 3,073 Possible Early Battery Depletion 1 1 **Therapy Function Compromised** 30 Battery 22 Device-Related Current Pathway 4 **Electrical Component** 4



Including Normal Battery Depletion Excluding Normal Battery Depletion at 127 2 10 mo **Excluding NBD** 100.0% 100.0% 100.0% 99.9% 99.9% 99.8% 99.8% 99.7% 99.7% 99.7% 99.7% 99.9% 99.9% 99.8% 99.7% 99.5% 99.1% 97.8% 94.8% 89.5% 76.7% 52.0% 218225 198372 176480 156414 129273 100416 72513 46264 24723 8359 916

17Dec2012

DDBB2D1 Evera XT

US Market Release

Years

Including NBD

Effective

Sample Size

CE Approval Date

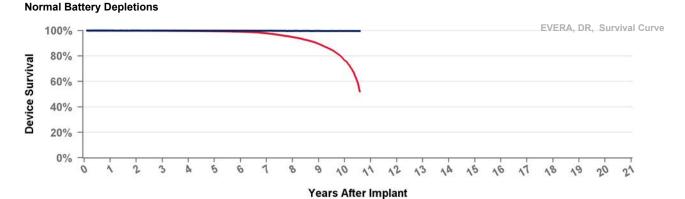
Registered USA Implants

Estimated Active USA Implants

Total Malfunctions (USA)

Therapy Function Not Compromised

Therapy Function Compromised



Including Normal Battery Depletion Excluding Normal Battery Depletion at 127 2 10 Years mo **Excluding NBD** 100.0% 100.0% 100.0% 99.9% 99.9% 99.8% 99.8% 99.7% 99.7% 99.7% 99.7% 99.9% 99.8% 99.1% 97.8% 94.8% 89.5% 76.7% 52.0% Including NBD 99.9% 99.7% 99.5% Effective 198372 176480 156414 129273 100416 72513 46264 24723 8359 916 Sample Size

DDBB2D4 Evera XT

US Market Release

CE Approval Date

17Dec2012 **T**

Therapy Function Not Compromised

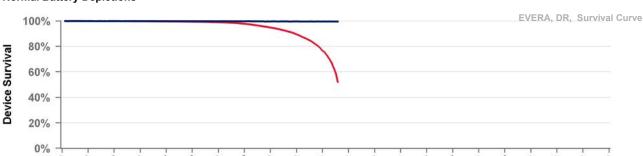
Total Malfunctions (USA)

Registered USA Implants

Estimated Active USA Implants

Normal Battery Depletions

Therapy Function Compromised



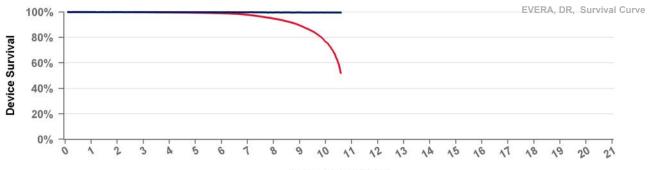
Years After Implant

Including Normal Battery Depletion
 Excluding Normal Battery Depletion

Years	1	2	3	4	5	6	7	8	9	10	at 127 mo
Excluding NBD	100.0%	100.0%	100.0%	99.9%	99.9%	99.8%	99.8%	99.7%	99.7%	99.7%	99.7%
Including NBD	99.9%	99.9%	99.8%	99.7%	99.5%	99.1%	97.8%	94.8%	89.5%	76.7%	52.0%
Effective	218225	198372	176480	156414	129273	100416	72513	46264	24723	8359	916
Sample Size											

DDBC3D1 Evera S

US Market Release Total Malfunctions (USA) 03Apr2013 18 **CE Approval Date** 17Dec2012 **Therapy Function Not Compromised** 9 **Registered USA Implants** Battery 7 8,434 **Estimated Active USA Implants** 3,729 **Electrical Component** 2 **Normal Battery Depletions** 864 **Therapy Function Compromised** 9 Battery 6 **Device-Related Current Pathway** 1 **Electrical Component** 2

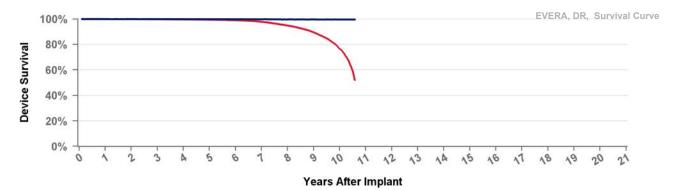


Years After Implant

Years	1	2	3	4	5	6	7	8	9	10	at 127 mo	
Excluding NBD	100.0%	100.0%	100.0%	99.9%	99.9%	99.8%	99.8%	99.7%	99.7%	99.7%	99.7%	
Including NBD	99.9%	99.9%	99.8%	99.7%	99.5%	99.1%	97.8%	94.8%	89.5%	76.7%	52.0%	
Effective	218225	198372	176480	156414	129273	100416	72513	46264	24723	8359	916	

DDBC3D4 Evera S

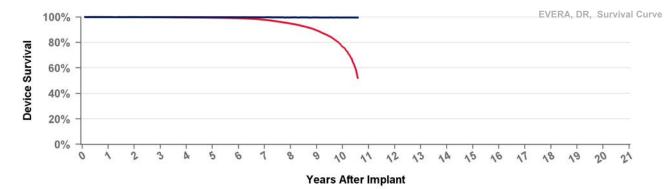
US Market Release	03Apr2013	Total Malfunctions (USA)	14				
CE Approval Date	17Dec2013	Therapy Function Not Compromised	5				
Registered USA Implants	6,064	Battery	3				
Estimated Active USA Implants	2,616	Electrical Component	2				
Normal Battery Depletions	717	Therapy Function Compromised					
		Battery	5				
		Device-Related Current Pathway	2				
		Electrical Component	1				
		Possible Early Battery Depletion	1				



Years	1	2	3	4	5	6	7	8	9	10	at 127 mo
Excluding NBD	100.0%	100.0%	100.0%	99.9%	99.9%	99.8%	99.8%	99.7%	99.7%	99.7%	99.7%
Including NBD	99.9%	99.9%	99.8%	99.7%	99.5%	99.1%	97.8%	94.8%	89.5%	76.7%	52.0%
Effective Sample Size	218225	198372	176480	156414	129273	100416	72513	46264	24723	8359	916

DDMB1D1 Evera MRI XT

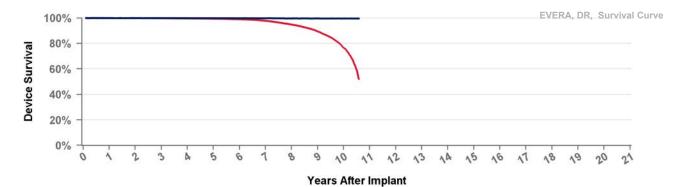
US Market Release	12Oct2016	Total Malfunctions (USA)	45
CE Approval Date		Therapy Function Not Compromised	26
Registered USA Implants	37,266	Battery	13
Estimated Active USA Implants	28,807	Electrical Component	11
Normal Battery Depletions	256	Electrical Interconnect	1
		Other	1
		Therapy Function Compromised	19
		Battery	6
		Device-Related Current Pathway	5
		Electrical Component	8



Years	1	2	3	4	5	6	7	8	9	10	at 127 mo
Excluding NBD	100.0%	100.0%	100.0%	99.9%	99.9%	99.8%	99.8%	99.7%	99.7%	99.7%	99.7%
Including NBD	99.9%	99.9%	99.8%	99.7%	99.5%	99.1%	97.8%	94.8%	89.5%	76.7%	52.0%
Effective Sample Size	218225	198372	176480	156414	129273	100416	72513	46264	24723	8359	916

DDMB1D4 Evera MRI XT

US Market Release	11Sep2015	Total Malfunctions (USA)	104
CE Approval Date		Therapy Function Not Compromised	63
Registered USA Implants	107,052	Battery	32
Estimated Active USA Implants	84,706	Electrical Component	24
Normal Battery Depletions	960	Electrical Interconnect	4
		Other	3
		Therapy Function Compromised	41
		Battery	24
		Device-Related Current Pathway	13
		Electrical Component	4



Including Normal Battery Depletion
 Excluding Normal Battery Depletion

Years	1	2	3	4	5	6	7	8	9	10	at 127 mo
Excluding NBD	100.0%	100.0%	100.0%	99.9%	99.9%	99.8%	99.8%	99.7%	99.7%	99.7%	99.7%
Including NBD	99.9%	99.9%	99.8%	99.7%	99.5%	99.1%	97.8%	94.8%	89.5%	76.7%	52.0%
Effective Sample Size	218225	198372	176480	156414	129273	100416	72513	46264	24723	8359	916

DDMB2D1 Ev

Evera MRI XT

US Market Release CE Approval Date

05Sep2016

Total Malfunctions (USA)

Registered USA Implants

033ep2010

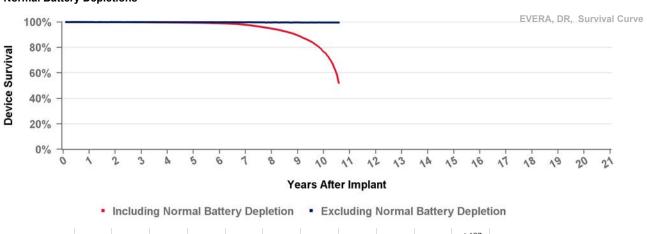
Therapy Function Not Compromised

Registered USA implants

Estimated Active USA Implants

Normal Battery Depletions

Therapy Function Compromised



Years	1	2	3	4	5	6	7	8	9	10	at 127 mo
Excluding NBD	100.0%	100.0%	100.0%	99.9%	99.9%	99.8%	99.8%	99.7%	99.7%	99.7%	99.7%
Including NBD	99.9%	99.9%	99.8%	99.7%	99.5%	99.1%	97.8%	94.8%	89.5%	76.7%	52.0%
Effective Sample Size	218225	198372	176480	156414	129273	100416	72513	46264	24723	8359	916

DDMB2D4 Evera MRI X7

US Market Release

Total Malfunctions (USA)

CE Approval Date

31Mar2014

1

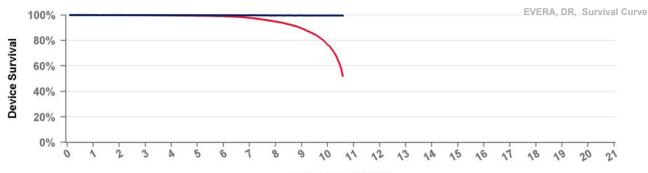
1

Registered USA Implants

Therapy Function Not Compromised

Estimated Active USA Implants Normal Battery Depletions

Therapy Function Compromised



Years After Implant

Years	1	2	3	4	5	6	7	8	9	10	at 127 mo	
Excluding NBD	100.0%	100.0%	100.0%	99.9%	99.9%	99.8%	99.8%	99.7%	99.7%	99.7%	99.7%	
Including NBD	99.9%	99.9%	99.8%	99.7%	99.5%	99.1%	97.8%	94.8%	89.5%	76.7%	52.0%	

100416

Including Normal Battery Depletion
 Excluding Normal Battery Depletion

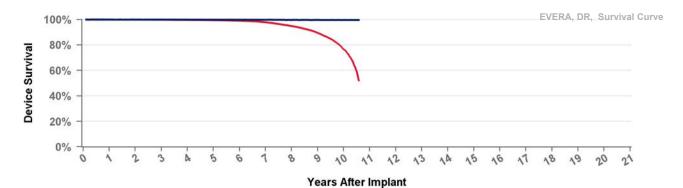
Including NBD Effective Sample Size

Evera MRI S DDMC3D1

US Market Release	12Oct2016	Total Malfunctions (USA)	3
CE Approval Date	05Sep2016	Therapy Function Not Compromised	2
Registered USA Implants	3,379	Battery	1
Estimated Active USA Implants	2,581	Electrical Component	1
Normal Battery Depletions	40	Therapy Function Compromised	1
		Device-Related Current Pathway	1

129273

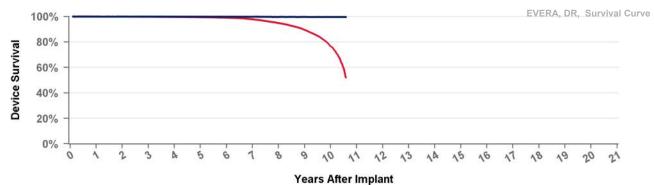
156414



	•	Includii	ng Norn	nal Batt	 Excluding Normal Battery Depleti 						
Years	1	2	3	4	5	6	7	8	9	10	at 127 mo
Excluding NBD	100.0%	100.0%	100.0%	99.9%	99.9%	99.8%	99.8%	99.7%	99.7%	99.7%	99.7%
Including NBD	99.9%	99.9%	99.8%	99.7%	99.5%	99.1%	97.8%	94.8%	89.5%	76.7%	52.0%
Effective Sample Size	218225	198372	176480	156414	129273	100416	72513	46264	24723	8359	916

DDMC3D4 **Evera MRI**

US Market Release	11Sep2015	Total Malfunctions (USA)	9
CE Approval Date	31Mar2014	Therapy Function Not Compromised	5
Registered USA Implants	7,178	Battery	4
Estimated Active USA Implants	5,591	Electrical Component	1
Normal Battery Depletions	66	Therapy Function Compromised	4
		Battery	1
		Device-Related Current Pathway	2
		Flectrical Component	1



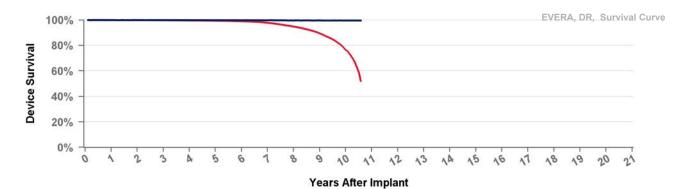
Including Normal Battery Depletion
 Excluding Normal Battery Depletion

Years	1	2	3	4	5	6	7	8	9	10	at 127 mo
Excluding NBD	100.0%	100.0%	100.0%	99.9%	99.9%	99.8%	99.8%	99.7%	99.7%	99.7%	99.7%
Including NBD	99.9%	99.9%	99.8%	99.7%	99.5%	99.1%	97.8%	94.8%	89.5%	76.7%	52.0%
Effective Sample Size	218225	198372	176480	156414	129273	100416	72513	46264	24723	8359	916

DDMD3D1 Primo

Normal Battery Depletions

US Market Release 01Mar2018 **Total Malfunctions (USA) CE Approval Date Therapy Function Not Compromised** 10Nov2017 **Registered USA Implants** 449 **Electrical Component Estimated Active USA Implants** 391 **Therapy Function Compromised** 0



Years	1	2	3	4	5	6	7	8	9	10	at 127 mo
Excluding NBD	100.0%	100.0%	100.0%	99.9%	99.9%	99.8%	99.8%	99.7%	99.7%	99.7%	99.7%
Including NBD	99.9%	99.9%	99.8%	99.7%	99.5%	99.1%	97.8%	94.8%	89.5%	76.7%	52.0%
Effective Sample Size	218225	198372	176480	156414	129273	100416	72513	46264	24723	8359	916

DDMD3D4 Primo

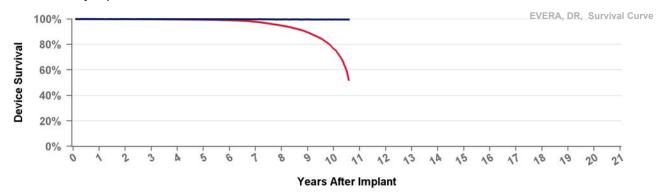
US Market Release 01Mar2018 **Total Malfunctions (USA)**

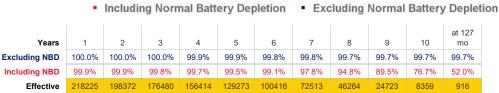
10Nov2017 **Therapy Function Not Compromised CE Approval Date**

Registered USA Implants 1,483

Therapy Function Compromised Estimated Active USA Implants 1,331

Normal Battery Depletions 3





Effective Sample Size DDME3D1

Years

Mirro

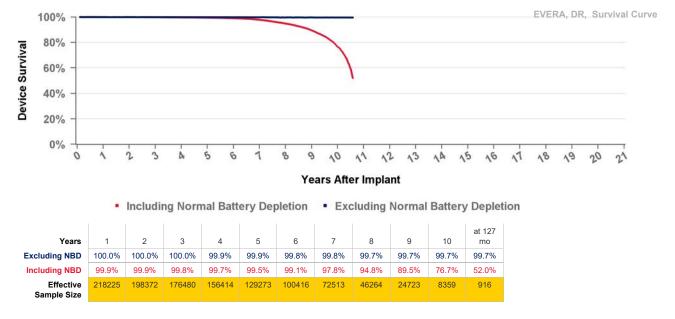
01Mar2018 **Total Malfunctions (USA) US Market Release**

CE Approval Date 10Nov2017 **Therapy Function Not Compromised**

Registered USA Implants

Estimated Active USA Implants

Therapy Function Compromised



DDME3D4

Mirro

US Market Release

01Mar2018

Total Malfunctions (USA)

CE Approval Date

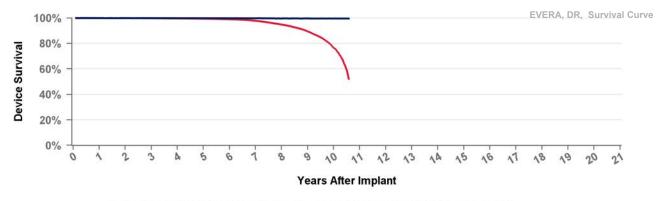
10Nov2017

Therapy Function Not Compromised

Registered USA Implants Estimated Active USA Implants

Therapy Function Compromised

Normal Battery Depletions



Including Normal Battery Depletion
 Excluding Normal Battery Depletion

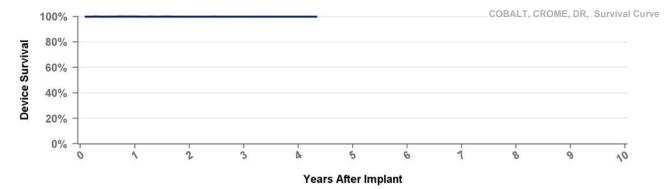
Years	1	2	3	4	5	6	7	8	9	10	at 127 mo
Excluding NBD	100.0%	100.0%	100.0%	99.9%	99.9%	99.8%	99.8%	99.7%	99.7%	99.7%	99.7%
Including NBD	99.9%	99.9%	99.8%	99.7%	99.5%	99.1%	97.8%	94.8%	89.5%	76.7%	52.0%
Effective Sample Size	218225	198372	176480	156414	129273	100416	72513	46264	24723	8359	916

DDPA2D1

Cobalt XT

US Market Release Total Malfunctions (USA) 23Apr2020 1 **Therapy Function Not Compromised CE Approval Date** 18Dec2019 1 **Registered USA Implants Electrical Component** 4,729 1 **Estimated Active USA Implants Therapy Function Compromised** 0 4,551

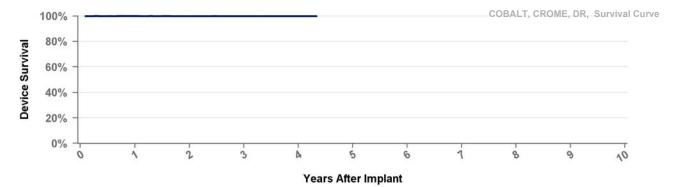
Normal Battery Depletions



Years	1	2	3	4	at 52 mo
Excluding NBD	100.0%	100.0%	100.0%	100.0%	100.0%
Including NBD	100.0%	99.9%	99.9%	99.9%	99.9%
Effective Sample Size	33348	18605	10156	1167	154

DDPA2D4 Cobalt XT

US Market Release	23Apr2020	Total Malfunctions (USA)	2
CE Approval Date	18Dec2019	Therapy Function Not Compromised	1
Registered USA Implants	33,757	Electrical Component	1
Estimated Active USA Implants	32,291	Therapy Function Compromised	1
Normal Battery Depletions	5	Electrical Component	1



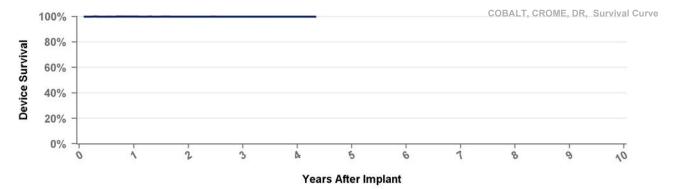
Including Normal Battery Depletion
 Excluding Normal Battery Depletion

Years	1	2	3	4	at 52 mo
Excluding NBD	100.0%	100.0%	100.0%	100.0%	100.0%
Including NBD	100.0%	99.9%	99.9%	99.9%	99.9%
Effective Sample Size	33348	18605	10156	1167	154

DDPB3D1

Cobalt

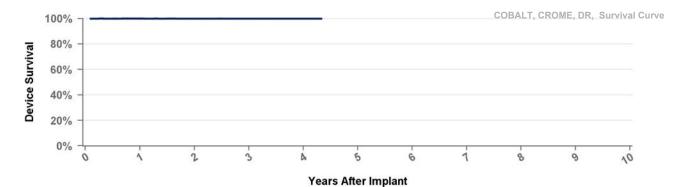
US Market Release	23Apr2020	Total Malfunctions (USA)	2
CE Approval Date	18Dec2019	Therapy Function Not Compromised	1
Registered USA Implants	2,554	Battery	1
Estimated Active USA Implants	2,375	Therapy Function Compromised	1
Normal Battery Depletions		Device-Related Current Pathway	1



Years	1	2	3	4	at 52 mo
Excluding NBD	100.0%	100.0%	100.0%	100.0%	100.0%
Including NBD	100.0%	99.9%	99.9%	99.9%	99.9%
Effective Sample Size	33348	18605	10156	1167	154

DDPB3D4 Cobalt

US Market Release	23Apr2020	Total Malfunctions (USA)	7
CE Approval Date	18Dec2019	Therapy Function Not Compromised	4
Registered USA Implants	14,566	Battery	1
Estimated Active USA Implants	13,547	Electrical Component	1
Normal Battery Depletions	4	Other	2
		Therapy Function Compromised	3
		Electrical Component	1
		Electrical Interconnect	2



Including Normal Battery Depletion
 Excluding Normal Battery Depletion

Years	1	2	3	4	at 52 mo
Excluding NBD	100.0%	100.0%	100.0%	100.0%	100.0%
Including NBD	100.0%	99.9%	99.9%	99.9%	99.9%
Effective Sample Size	33348	18605	10156	1167	154

DDPC3D1

Crome

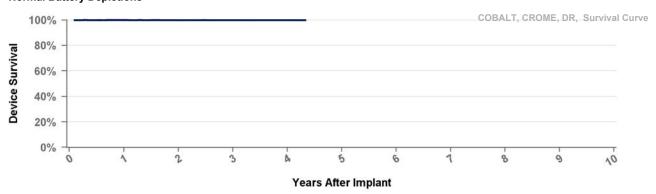
US Market Release 23Apr2020 **Total Malfunctions (USA)**

CE Approval Date 18Dec2019 **Therapy Function Not Compromised**

Registered USA Implants 277

Therapy Function Compromised Estimated Active USA Implants 254

Normal Battery Depletions



Years	1	2	3	4	at 52 mo
Excluding NBD	100.0%	100.0%	100.0%	100.0%	100.0%
Including NBD	100.0%	99.9%	99.9%	99.9%	99.9%
Effective Sample Size	33348	18605	10156	1167	154

DDPC3D4

Crome

US Market Release CE Approval Date

23Apr2020

Total Malfunctions (USA)

18Dec2019

Therapy Function Not Compromised

Registered USA Implants

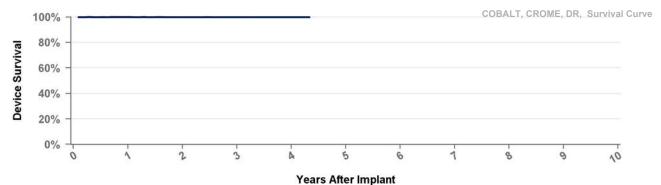
1,384

Estimated Active USA Implants

1,303

Therapy Function Compromised

Normal Battery Depletions

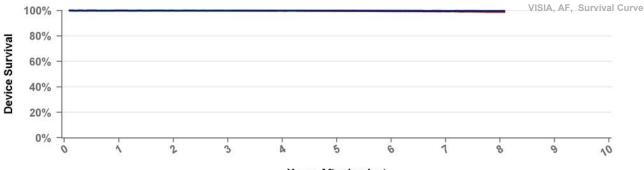


Including Normal Battery Depletion
 Excluding Normal Battery Depletion

Years	1	2	3	4	at 52 mo
Excluding NBD	100.0%	100.0%	100.0%	100.0%	100.0%
Including NBD	100.0%	99.9%	99.9%	99.9%	99.9%
Effective Sample Size	33348	18605	10156	1167	154

DVAB1D1 Visia AF

US Market Release 19Jan2016 **Total Malfunctions (USA)** 11 **Therapy Function Not Compromised CE Approval Date** 7 **Registered USA Implants** 7 3,051 Battery **Estimated Active USA Implants** 2,042 **Therapy Function Compromised** 4 **Normal Battery Depletions** 15 Battery 2 2 Device-Related Current Pathway

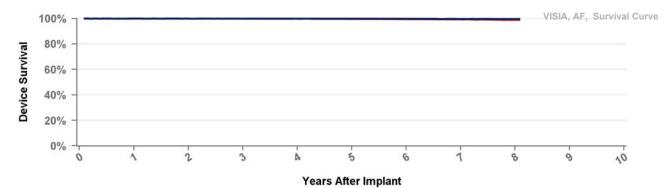


Years After Implant

Years	1	2	3	4	5	6	7	8	at 97 mo
Excluding NBD	100.0%	100.0%	100.0%	99.9%	99.9%	99.8%	99.7%	99.6%	99.6%
Including NBD	100.0%	99.9%	99.9%	99.8%	99.7%	99.5%	99.3%	99.0%	99.0%
Effective Sample Size	76404	68673	58504	49559	37571	24498	12154	877	180

DVAB1D4 Visia AF

US Market Release	19Jan2016	Total Malfunctions (USA)	5
CE Approval Date		Therapy Function Not Compromised	2
Registered USA Implants	2,045	Battery	2
Estimated Active USA Implants	1,423	Therapy Function Compromised	3
Normal Battery Depletions		Battery	2
		Device-Related Current Pathway	1



Including Normal Battery Depletion
 Excluding Normal Battery Depletion

Years	1	2	3	4	5	6	7	8	at 97 mo
Excluding NBD	100.0%	100.0%	100.0%	99.9%	99.9%	99.8%	99.7%	99.6%	99.6%
Including NBD	100.0%	99.9%	99.9%	99.8%	99.7%	99.5%	99.3%	99.0%	99.0%
Effective	76404	68673	58504	49559	37571	24498	12154	877	180

DVAB2D1 Visia AF XT

US Market Release CE Approval Date

19Oct2015

Registered USA Implants

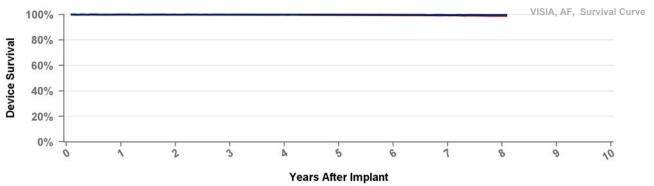
Estimated Active USA Implants

Normal Battery Depletions

Total Malfunctions (USA)

Therapy Function Not Compromised

Therapy Function Compromised



Years	1	2	3	4	5	6	7	8	at 97 mo
Excluding NBD	100.0%	100.0%	100.0%	99.9%	99.9%	99.8%	99.7%	99.6%	99.6%
Including NBD	100.0%	99.9%	99.9%	99.8%	99.7%	99.5%	99.3%	99.0%	99.0%
Effective Sample Size	76404	68673	58504	49559	37571	24498	12154	877	180

DVAC3D1 Visia AF S

US Market Release

19Jan2016

Total Malfunctions (USA)

CE Approval Date

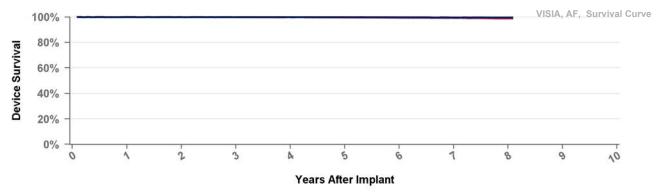
19Oct2015

Therapy Function Not Compromised

Registered USA Implants
Estimated Active USA Implants

Therapy Function Compromised

Normal Battery Depletions

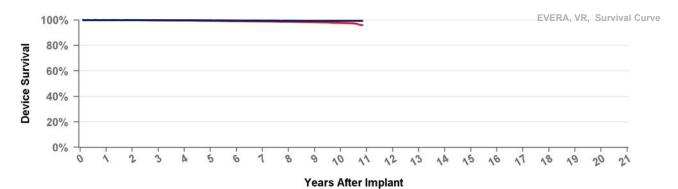


Including Normal Battery Depletion
 Excluding Normal Battery Depletion

Years	1	2	3	4	5	6	7	8	at 97 mo
Excluding NBD	100.0%	100.0%	100.0%	99.9%	99.9%	99.8%	99.7%	99.6%	99.6%
Including NBD	100.0%	99.9%	99.9%	99.8%	99.7%	99.5%	99.3%	99.0%	99.0%
Effective Sample Size	76404	68673	58504	49559	37571	24498	12154	877	180

DVBB1D1 Evera XT

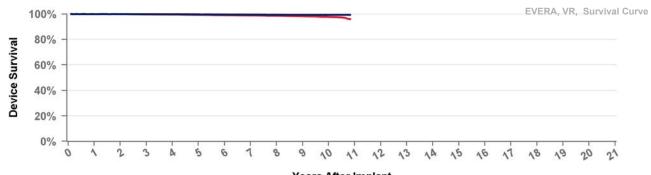
03Apr2013 **Total Malfunctions (USA) US Market Release** 74 **Therapy Function Not Compromised CE Approval Date** 52 **Registered USA Implants** 16,113 Battery 45 **Estimated Active USA Implants Electrical Component** 8,751 7 **Normal Battery Depletions** 92 **Therapy Function Compromised** 22 Battery 16 **Device-Related Current Pathway** 2 **Electrical Component** 4



Including Normal Battery Depletion Excluding Normal Battery Depletion at 130 Years 2 3 5 6 8 9 10 mo Excluding NBD 100.0% 100.0% 99.9% 99.8% 99.8% 99.7% 99.6% 99.5% 99.4% 99.3% 99.3% Including NBD 98.3% 96.1% 100.0% 99.9% 99.7% 99.6% 99.4% 99.1% 98.9% 98.7% 97.8% **Effective** 52428 48822 45453 42319 39231 36059 33207 30001 19453 7802 218 Sample Size

DVBB1D4 Evera XT

US Market Release	03Apr2013	Total Malfunctions (USA)	97
CE Approval Date		Therapy Function Not Compromised	65
Registered USA Implants	21,952	Battery	49
Estimated Active USA Implants	12,921	Electrical Component	9
Normal Battery Depletions	170	Possible Early Battery Depletion	2
		Other	5
		Therapy Function Compromised	32
		Battery	26
		Device-Related Current Pathway	5
		Electrical Component	1



Years After Implant

Including Normal Battery Depletion
 Excluding Normal Battery Depletion

Years	1	2	3	4	5	6	7	8	9	10	at 130 mo
Excluding NBD	100.0%	100.0%	99.9%	99.8%	99.8%	99.7%	99.6%	99.5%	99.4%	99.3%	99.3%
Including NBD	100.0%	99.9%	99.7%	99.6%	99.4%	99.1%	98.9%	98.7%	98.3%	97.8%	96.1%
Effective Sample Size	52428	48822	45453	42319	39231	36059	33207	30001	19453	7802	218

DVBB2D1 Evera XT

US Market Release

CE Approval Date

17Dec2012

Therapy Function Not Compromised

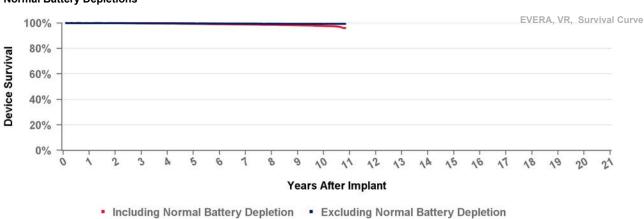
Total Malfunctions (USA)

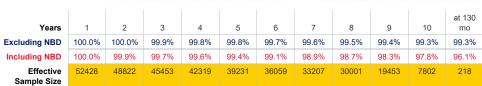
Registered USA Implants

Estimated Active USA Implants

Normal Battery Depletions

Therapy Function Compromised





DVBB2D4 Evera XT

US Market Release

CE Approval Date

17Dec2012

Total Malfunctions (USA)

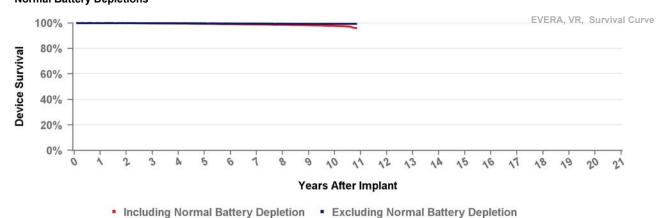
Therapy Function Not Compromised

Registered USA Implants

Estimated Active USA Implants

Normal Battery Depletions

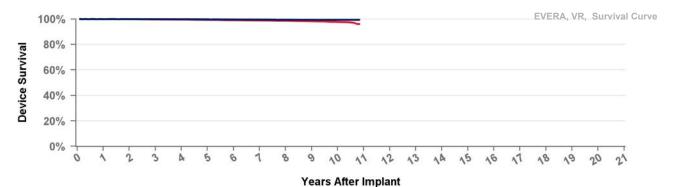
Therapy Function Compromised



at 130 Years 2 3 5 6 8 9 10 mo **Excluding NBD** 100.0% 100.0% 99.9% 99.8% 99.8% 99.7% 99.6% 99.5% 99.4% 99.3% 99.3% 100.0% 99.9% 99.1% 98.7% 98.3% 97.8% 96.1% Including NBD 99.6% Effective 48822 45453 42319 39231 36059 33207 30001 19453 7802 218 Sample Size

DVBC3D1 Evera S

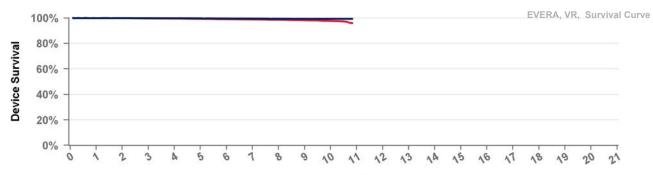
US Market Release	03Apr2013	Total Malfunctions (USA)	28
CE Approval Date	17Dec2012	Therapy Function Not Compromised	19
Registered USA Implants	4,642	Battery	17
Estimated Active USA Implants	2,636	Electrical Component	2
Normal Battery Depletions	30	Therapy Function Compromised	9
		Battery	8
		Electrical Component	1



Including Normal Battery Depletion Excluding Normal Battery Depletion at 130 Years 2 3 5 6 8 9 10 mo **Excluding NBD** 100.0% 100.0% 99.9% 99.8% 99.8% 99.7% 99.6% 99.5% 99.4% 99.3% 99.3% Including NBD 100.0% 99.9% 99.7% 99.6% 99 4% 99 1% 98.9% 98.7% 98.3% 97.8% 96.1% Effective 48822 45453 42319 39231 36059 33207 30001 19453 7802 218 Sample Size

DVBC3D4 Evera S

US Market Release	03Apr2013	Total Malfunctions (USA)	22
CE Approval Date	17Dec2012	Therapy Function Not Compromised	15
Registered USA Implants	5,623	Battery	12
Estimated Active USA Implants	3,430	Electrical Component	3
Normal Battery Depletions	32	Therapy Function Compromised	7
		Battery	5
		Device-Related Current Pathway	2



Years After Implant

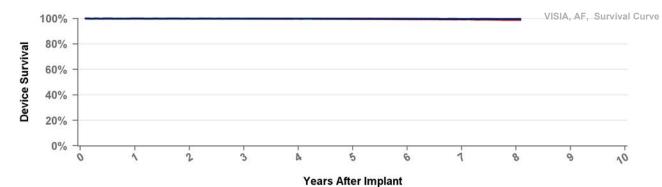
Including Normal Battery Depletion
 Excluding Normal Battery Depletion

Years	1	2	3	4	5	6	7	8	9	10	at 130 mo
Excluding NBD	100.0%	100.0%	99.9%	99.8%	99.8%	99.7%	99.6%	99.5%	99.4%	99.3%	99.3%
Including NBD	100.0%	99.9%	99.7%	99.6%	99.4%	99.1%	98.9%	98.7%	98.3%	97.8%	96.1%
Effective	52428	48822	45453	42319	39231	36059	33207	30001	19453	7802	218

DVFB1D1

Visia MRI AF

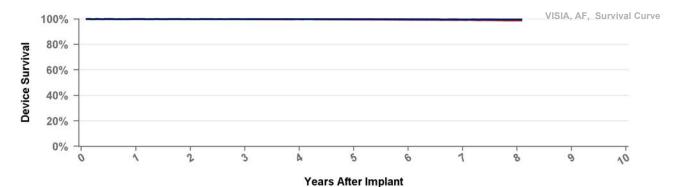
US Market Release	12Oct2016	Total Malfunctions (USA)	21
CE Approval Date		Therapy Function Not Compromised	12
Registered USA Implants	17,756	Battery	8
Estimated Active USA Implants	14,389	Electrical Component	3
Normal Battery Depletions	25	Other	1
		Therapy Function Compromised	9
		Battery	2
		Device-Related Current Pathway	3
		Electrical Component	4



Years	1	2	3	4	5	6	7	8	at 97 mo	
Excluding NBD	100.0%	100.0%	100.0%	99.9%	99.9%	99.8%	99.7%	99.6%	99.6%	
Including NBD	100.0%	99.9%	99.9%	99.8%	99.7%	99.5%	99.3%	99.0%	99.0%	
Effective Sample Size	76404	68673	58504	49559	37571	24498	12154	877	180	

Visia MRI AF

US Market Release	19Jan2016	Total Malfunctions (USA)	75
CE Approval Date		Therapy Function Not Compromised	46
Registered USA Implants	57,174	Battery	36
Estimated Active USA Implants	46,175	Electrical Component	9
Normal Battery Depletions	63	Other	1
		Therapy Function Compromised	29
		Battery	14
		Device-Related Current Pathway	12
		Electrical Component	3



Including Normal Battery Depletion Excluding Normal Battery Depletion

Years	1	2	3	4	5	6	7	8	at 97 mo
Excluding NBD	100.0%	100.0%	100.0%	99.9%	99.9%	99.8%	99.7%	99.6%	99.6%
Including NBD	100.0%	99.9%	99.9%	99.8%	99.7%	99.5%	99.3%	99.0%	99.0%
Effective Sample Size	76404	68673	58504	49559	37571	24498	12154	877	180

DVFB2D1 Visia MRI AF XT

US Market Release

Total Malfunctions (USA)

CE Approval Date

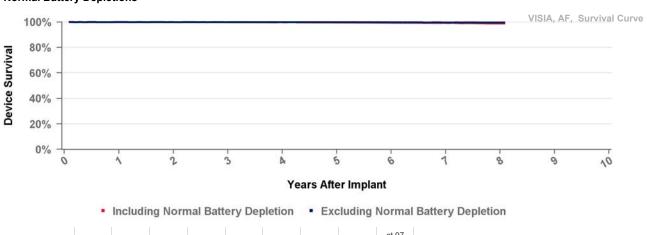
05Sep2016

Therapy Function Not Compromised

Registered USA Implants

Estimated Active USA Implants

Therapy Function Compromised



Years	1	2	3	4	5	6	7	8	at 97 mo
Excluding NBD	100.0%	100.0%	100.0%	99.9%	99.9%	99.8%	99.7%	99.6%	99.6%
Including NBD	100.0%	99.9%	99.9%	99.8%	99.7%	99.5%	99.3%	99.0%	99.0%
Effective Sample Size	76404	68673	58504	49559	37571	24498	12154	877	180

DVFB2D4 Visia MRI AF XT

US Market Release

Total Malfunctions (USA)

CE Approval Date

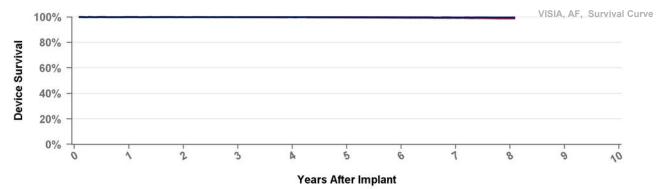
19Oct2015

Therapy Function Not Compromised

Registered USA Implants Estimated Active USA Implants 2 1

Therapy Function Compromised

Normal Battery Depletions



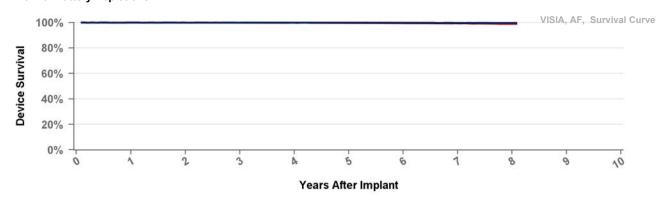
Including Normal Battery Depletion
 Excluding Normal Battery Depletion

Years	1	2	3	4	5	6	7	8	at 97 mo
Excluding NBD	100.0%	100.0%	100.0%	99.9%	99.9%	99.8%	99.7%	99.6%	99.6%
Including NBD	100.0%	99.9%	99.9%	99.8%	99.7%	99.5%	99.3%	99.0%	99.0%
Effective Sample Size	76404	68673	58504	49559	37571	24498	12154	877	180

DVFC3D1

Visia MRI AF S

US Market Release 12Oct2016 **Total Malfunctions (USA)** 1 05Sep2016 **Therapy Function Not Compromised CE Approval Date** 1 **Registered USA Implants** 1,477 Battery 1 **Estimated Active USA Implants Therapy Function Compromised** 0 1,221



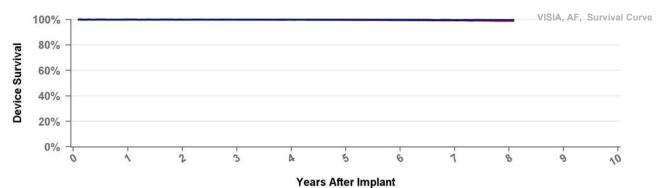
•	including	Normai	Battery	Depletion	Excluding	Normai	Battery	Depletion
						at 97		

Years	1	2	3	4	5	6	7	8	at 97 mo
Excluding NBD	100.0%	100.0%	100.0%	99.9%	99.9%	99.8%	99.7%	99.6%	99.6%
Including NBD	100.0%	99.9%	99.9%	99.8%	99.7%	99.5%	99.3%	99.0%	99.0%
Effective Sample Size	76404	68673	58504	49559	37571	24498	12154	877	180

DVFC3D4 Visia MRI AF S

US Market Release	19Jan2016	Total Malfunctions (USA)	4
CE Approval Date	19Oct2015	Therapy Function Not Compromised	4
Registered USA Implants	3,587	Battery	4
Estimated Active USA Implants	3,014	Therapy Function Compromised	0

Normal Battery Depletions 9

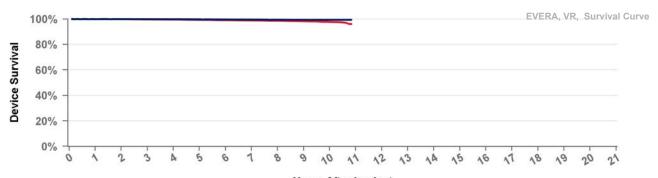


Including Normal Battery Depletion
 Excluding Normal Battery Depletion

Years	1	2	3	4	5	6	7	8	at 97 mo
Excluding NBD	100.0%	100.0%	100.0%	99.9%	99.9%	99.8%	99.7%	99.6%	99.6%
Including NBD	100.0%	99.9%	99.9%	99.8%	99.7%	99.5%	99.3%	99.0%	99.0%
Effective Sample Size	76404	68673	58504	49559	37571	24498	12154	877	180

DVMB1D4 Evera MRI XT

US Market Release	11Sep2015	Total Malfunctions (USA)	35
CE Approval Date		Therapy Function Not Compromised	17
Registered USA Implants	10,270	Battery	13
Estimated Active USA Implants	6,775	Electrical Component	3
Normal Battery Depletions	20	Other	1
		Therapy Function Compromised	18
		Battery	14
		Device-Related Current Pathway	4



Years After Implant

Years	1	2	3	4	5	6	7	8	9	10	at 130 mo
Excluding NBD	100.0%	100.0%	99.9%	99.8%	99.8%	99.7%	99.6%	99.5%	99.4%	99.3%	99.3%
Including NBD	100.0%	99.9%	99.7%	99.6%	99.4%	99.1%	98.9%	98.7%	98.3%	97.8%	96.1%
Effective Sample Size	52428	48822	45453	42319	39231	36059	33207	30001	19453	7802	218

DVMB2D1

Evera MRI XT

US Market Release

05Sep2016

CE Approval Date

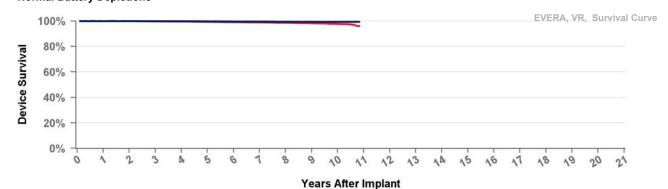
Registered USA Implants Estimated Active USA Implants

Normal Battery Depletions

Total Malfunctions (USA)

Therapy Function Not Compromised

Therapy Function Compromised





Years **Excluding NBD** 100.0% 100.0% 99.9% 99.8% 99.8% 99.7% 99.6% 99.5% 99.4% 99.3% 99.3% 100.0% 99.9% 99.6% 99.1% 98.9% 98.7% 98.3% 97.8% 96.1% Including NBD Effective 42319 39231 36059 33207 30001 19453 7802 218 Sample Size

DVMB2D4

Evera MRI

US Market Release

31Mar2014

CE Approval Date

Therapy Function Not Compromised

Registered USA Implants

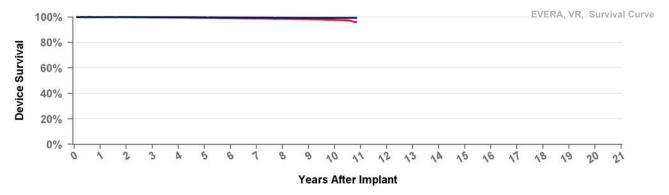
2

Estimated Active USA Implants

Normal Battery Depletions

Total Malfunctions (USA)

Therapy Function Compromised



	 Including Normal Battery Depletion 				 Excluding Normal Battery Depletion 						
Years	1	2	3	4	5	6	7	8	9	10	at 130 mo
Excluding NBD	100.0%	100.0%	99.9%	99.8%	99.8%	99.7%	99.6%	99.5%	99.4%	99.3%	99.3%
Including NBD	100.0%	99.9%	99.7%	99.6%	99.4%	99.1%	98.9%	98.7%	98.3%	97.8%	96.1%
Effective Sample Size	52428	48822	45453	42319	39231	36059	33207	30001	19453	7802	218

DVMC3D1 Evera MRI S

US Market Release

12Oct2016

Total Malfunctions (USA)

CE Approval Date

05Sep2016

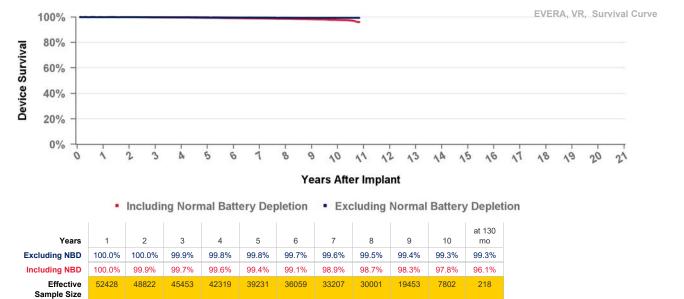
Therapy Function Not Compromised

Registered USA Implants

Estimated Active USA Implants

Therapy Function Compromised

Normal Battery Depletions



DVMC3D4

Evera MRI S

US Market Release

11Sep2015

Total Malfunctions (USA)

CE Approval Date

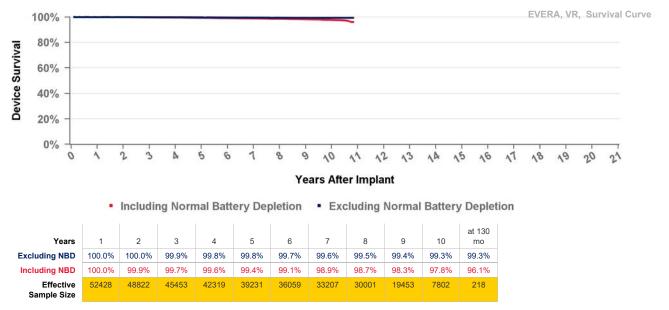
31Mar2014

Therapy Function Not Compromised

Registered USA Implants

Estimated Active USA Implants

Therapy Function Compromised



DVMD3D1

Primo

US Market Release

01Mar2018

Total Malfunctions (USA)

CE Approval Date

10Nov2017

Therapy Function Not Compromised

Registered USA Implants

274

Estimated Active USA Implants

242

Therapy Function Compromised

99.5%

98.7%

30001

99.4%

98.3%

19453

99.3%

97.8%

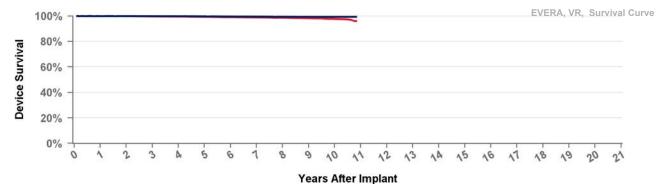
7802

99.3%

96.1%

218

Normal Battery Depletions





Years **Excluding NBD** 100.0% 100.0% 99.9% 99.8% 99.8% 99.7% 99.6% 99.9% Including NBD 100.0% 99.6% 99.1% Effective 48822 45453 42319 39231 36059 33207 Sample Size

DVMD3D4

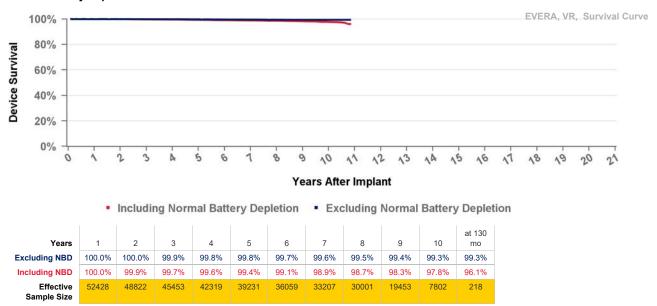
Primo

US Market Release 01Mar2018 Total Malfunctions (USA)

CE Approval Date 10Nov2017 Therapy Function Not Compromised

Registered USA Implants 624

Estimated Active USA Implants 562 Therapy Function Compromised



DVME3D1

Mirro

US Market Release

01Mar2018

Total Malfunctions (USA)

CE Approval Date

10Nov2017

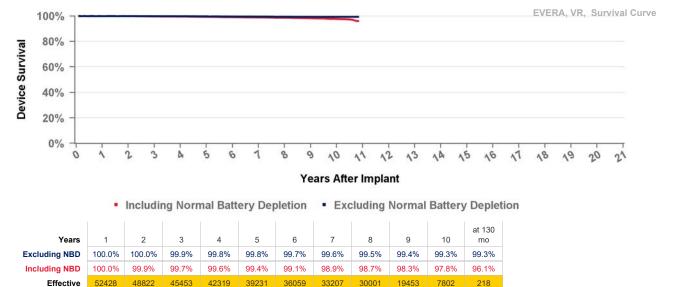
Therapy Function Not Compromised

Registered USA Implants

Estimated Active USA Implants

Therapy Function Compromised

Normal Battery Depletions



Sample Size DVME3D4

Mirro

US Market Release

01Mar2018

Total Malfunctions (USA)

CE Approval Date

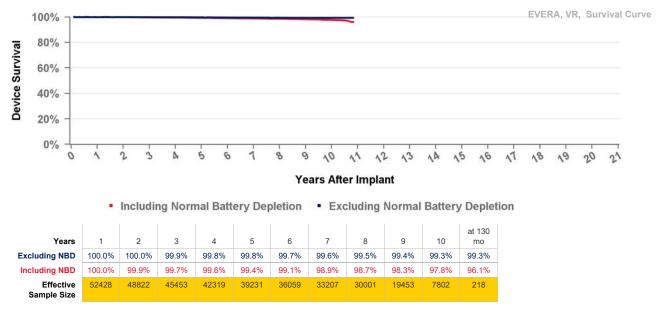
10Nov2017

Therapy Function Not Compromised

Registered USA Implants

Estimated Active USA Implants

Therapy Function Compromised



DVPA2D1 Cobalt XT

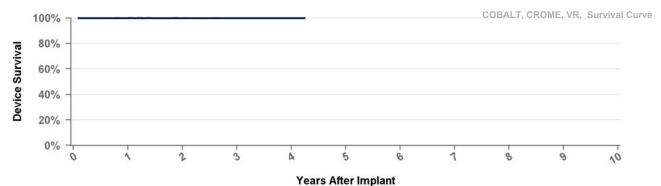
US Market Release 23Apr2020

18Dec2019 **Therapy Function Not Compromised CE Approval Date**

Registered USA Implants 1,680

Therapy Function Compromised Estimated Active USA Implants 1,578

Normal Battery Depletions 2



Total Malfunctions (USA)

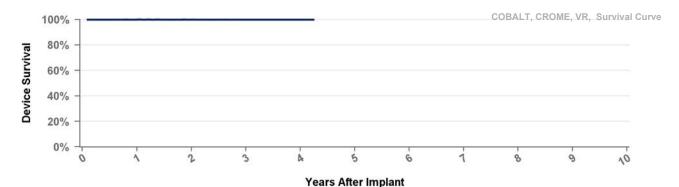
Including Normal Battery Depletion
 Excluding Normal Battery Depletion

Years	1	2	3	4	at 51 mo
Excluding NBD	100.0%	100.0%	99.9%	99.9%	99.9%
Including NBD	100.0%	99.9%	99.9%	99.9%	99.9%
Effective Sample Size	15363	9527	5508	651	176

DVPA2D4 Cobalt XT

US Market Release Total Malfunctions (USA) 23Apr2020 1 **Therapy Function Not Compromised CE Approval Date** 18Dec2019 0 **Registered USA Implants** 13,110 1

Therapy Function Compromised Estimated Active USA Implants 12,478 **Device-Related Current Pathway** 1 **Normal Battery Depletions**

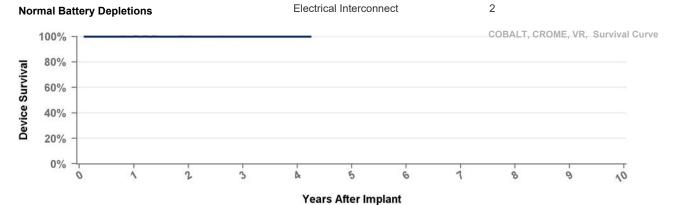


Years	1	2	3	4	at 51 mo
Excluding NBD	100.0%	100.0%	99.9%	99.9%	99.9%
Including NBD	100.0%	99.9%	99.9%	99.9%	99.9%
Effective Sample Size	15363	9527	5508	651	176

Cobalt

US Market Release	23Apr2020	lotal Malfunctions (USA)	2
CE Approval Date	18Dec2019	Therapy Function Not Compromised	0
Registered USA Implants	1,653		

Therapy Function Compromised Estimated Active USA Implants 1,504 **Electrical Interconnect**



Including Normal Battery Depletion
 Excluding Normal Battery Depletion

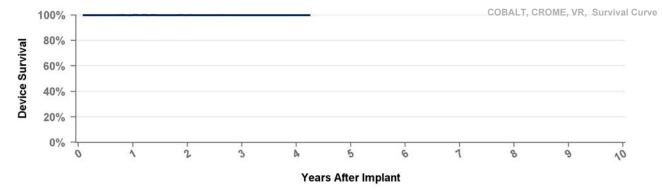
2

Years	1	2	3	4	at 51 mo
Excluding NBD	100.0%	100.0%	99.9%	99.9%	99.9%
Including NBD	100.0%	99.9%	99.9%	99.9%	99.9%
Effective Sample Size	15363	9527	5508	651	176

DVPB3D4

Cobalt

US Market Release	23Apr2020	Total Malfunctions (USA)	4
CE Approval Date	18Dec2019	Therapy Function Not Compromised	1
Registered USA Implants	6,197	Other	1
Estimated Active USA Implants	5,755	Therapy Function Compromised	3
Normal Battery Depletions	2	Device-Related Current Pathway	2
		Electrical Interconnect	1



Years	1	2	3	4	at 51 mo
Excluding NBD	100.0%	100.0%	99.9%	99.9%	99.9%
Including NBD	100.0%	99.9%	99.9%	99.9%	99.9%
Effective Sample Size	15363	9527	5508	651	176

DVPC3D1

Crome

US Market Release

23Apr2020

Total Malfunctions (USA)

CE Approval Date

18Dec2019

Therapy Function Not Compromised

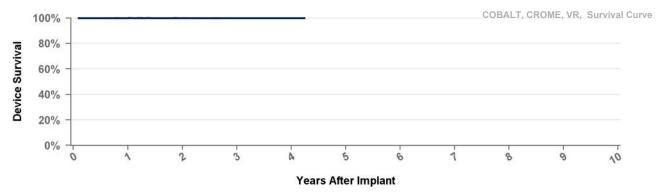
Registered USA Implants

140

Estimated Active USA Implants

Therapy Function Compromised 128

Normal Battery Depletions



Including Normal Battery Depletion
 Excluding Normal Battery Depletion

Years	1	2	3	4	at 51 mo
Excluding NBD	100.0%	100.0%	99.9%	99.9%	99.9%
Including NBD	100.0%	99.9%	99.9%	99.9%	99.9%
Effective Sample Size	15363	9527	5508	651	176

DVPC3D4

Crome

US Market Release

23Apr2020

Total Malfunctions (USA)

CE Approval Date

18Dec2019

Therapy Function Not Compromised

Registered USA Implants

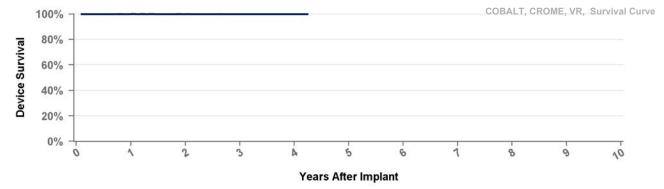
631

Estimated Active USA Implants

591

Therapy Function Compromised

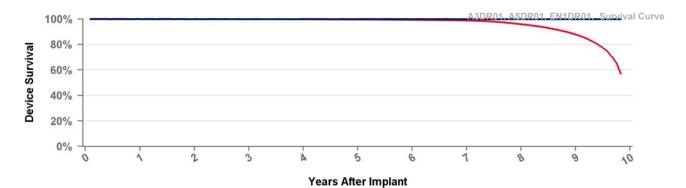
Normal Battery Depletions



Years	1	2	3	4	at 51 mo
Excluding NBD	100.0%	100.0%	99.9%	99.9%	99.9%
Including NBD	100.0%	99.9%	99.9%	99.9%	99.9%
Effective Sample Size	15363	9527	5508	651	176

A2DR01 Advisa DR MRI

US Market Release	15Jan2013	Total Malfunctions (USA)	84
CE Approval Date		Therapy Function Not Compromised	79
Registered USA Implants	344,430	Battery	1
Estimated Active USA Implants	206,040	Electrical Component	40
Normal Battery Depletions	10,341	Electrical Interconnect	4
		Possible Early Battery Depletion	25
		Software/Firmware	6
		Other	3
		Therapy Function Compromised	5
		Electrical Component	5



Including Normal Battery Depletion
 Excluding Normal Battery Depletion

Years	1	2	3	4	5	6	7	8	9	at 118 mo
Excluding NBD	100.0%	100.0%	100.0%	100.0%	100.0%	100.0%	100.0%	100.0%	100.0%	100.0%
Including NBD	100.0%	99.9%	99.9%	99.8%	99.7%	99.4%	98.8%	95.9%	87.9%	57.1%
Effective Sample Size	308384	290536	273794	257049	237637	216768	182503	109966	45804	3338

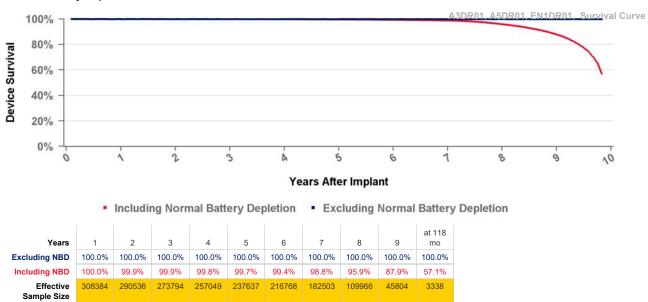
A3DR01 Adv

Advisa DR MRI

US Market Release Total Malfunctions (USA)
CE Approval Date 02Jun2009 Therapy Function Not Compromised

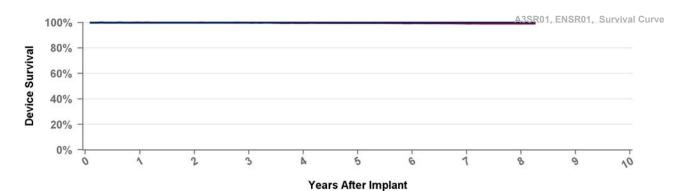
Registered USA Implants 23

Estimated Active USA Implants 3 Therapy Function Compromised



A3SR01 Advisa SR MRI

US Market Release	19Mar2015	Total Malfunctions (USA)	9
CE Approval Date	24Apr2014	Therapy Function Not Compromised	8
Registered USA Implants	28,082	Electrical Component	3
Estimated Active USA Implants	15,729	Electrical Interconnect	1
Normal Battery Depletions	57	Possible Early Battery Depletion	2
		Other	2
		Therapy Function Compromised	1
		Electrical Component	1



Including Normal Battery Depletion
 Excluding Normal Battery Depletion

Years	1	2	3	4	5	6	7	8	at 99 mo
Excluding NBD	100.0%	100.0%	100.0%	100.0%	100.0%	100.0%	100.0%	100.0%	100.0%
Including NBD	99.9%	99.9%	99.8%	99.7%	99.6%	99.5%	99.2%	99.0%	99.0%
Effective	22025	19382	17201	15020	12895	10984	7908	1730	268

02Jun2009

A5DR01

Advisa DR

US Market Release

CE Approval Date

Registered USA Implants

Estimated Active USA Implants

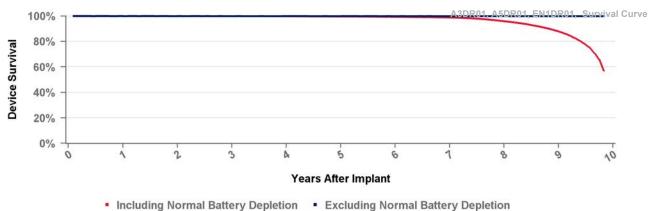
Name of Battama Bandatiana

Normal Battery Depletions

Total Malfunctions (USA)

Therapy Function Not Compromised

Therapy Function Compromised



Years	1	2	3	4	5	6	7	8	9	at 118
Excluding NBD	100.0%	100.0%	100.0%	100.0%	100.0%	100.0%	100.0%	100.0%	100.0%	100.0%
Including NBD	100.0%	99.9%	99.9%	99.8%	99.7%	99.4%	98.8%	95.9%	87.9%	57.1%
Effective Sample Size	308384	290536	273794	257049	237637	216768	182503	109966	45804	3338

ADD01 Adapta D

US Market Release

17Jul2006

Total Malfunctions (USA)

CE Approval Date

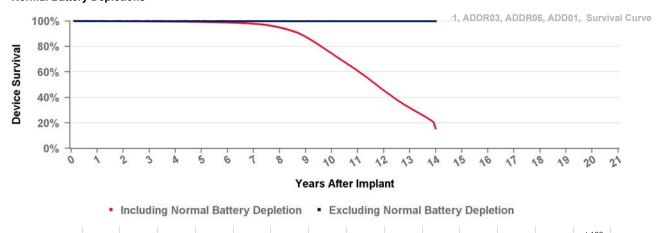
20Sep2005

Therapy Function Not Compromised

Registered USA Implants Estimated Active USA Implants

Therapy Function Compromised

Normal Battery Depletions



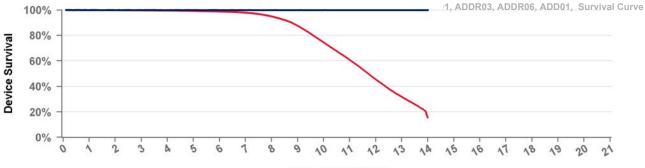
at 168 Years 2 3 6 8 9 10 11 12 13 mo **Excluding NBD** 100.0% 100.0% 100.0% 100.0% 100.0% 100.0% 100.0% 100.0% 100.0% 100.0% 100.0% 100.0% 100.0% 100.0% 99.9% 99.6% 99.3% 98.8% 94.9% 87.6% 74.5% 60.7% 31.7% 15.4% Including NBD 45.4% 365261 338800 313064 289162 264932 240345 209077 167005 120676 76751 40118 14946 465

Effective Sample Size

ADDR01

Adapta DR

US Market Release	17Jul2006	Total Malfunctions (USA)	94
CE Approval Date	20Sep2005	Therapy Function Not Compromised	66
Registered USA Implants	454,879	Electrical Component	58
Estimated Active USA Implants	117,929	Electrical Interconnect	1
Normal Battery Depletions	51,962	Possible Early Battery Depletion	6
		Other	1
		Therapy Function Compromised	28
		Electrical Component	23
		Electrical Interconnect	3
		Other	2

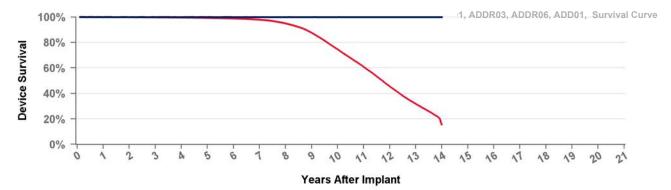


Years After Implant

Years	1	2	3	4	5	6	7	8	9	10	11	12	13	at 168 mo
Excluding NBD	100.0%	100.0%	100.0%	100.0%	100.0%	100.0%	100.0%	100.0%	100.0%	100.0%	100.0%	100.0%	100.0%	100.0%
Including NBD	99.9%	99.9%	99.8%	99.6%	99.3%	98.8%	97.9%	94.9%	87.6%	74.5%	60.7%	45.4%	31.7%	15.4%
Effective Sample Size	393167	365261	338800	313064	289162	264932	240345	209077	167005	120676	76751	40118	14946	465

ADDR03 Adapta DR

US Market Release	17Jul2006	Total Malfunctions (USA)	2
CE Approval Date	20Sep2005	Therapy Function Not Compromised	1
Registered USA Implants	4,565	Electrical Component	1
Estimated Active USA Implants	1,272	Therapy Function Compromised	1
Normal Battery Depletions	630	Electrical Component	1

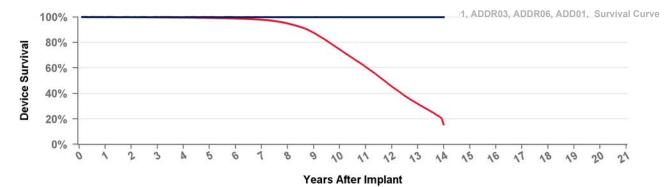


Including Normal Battery Depletion
 Excluding Normal Battery Depletion

Years	1	2	3	4	5	6	7	8	9	10	11	12	13	at 168 mo
Excluding NBD	100.0%	100.0%	100.0%	100.0%	100.0%	100.0%	100.0%	100.0%	100.0%	100.0%	100.0%	100.0%	100.0%	100.0%
Including NBD	99.9%	99.9%	99.8%	99.6%	99.3%	98.8%	97.9%	94.9%	87.6%	74.5%	60.7%	45.4%	31.7%	15.4%
Effective Sample Size	393167	365261	338800	313064	289162	264932	240345	209077	167005	120676	76751	40118	14946	465

ADDR06 Adapta DR

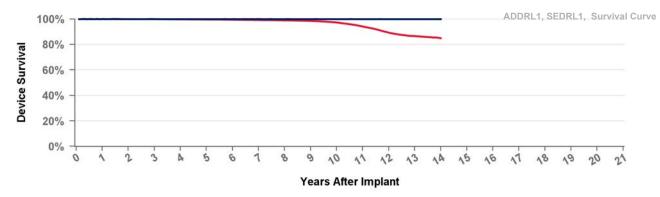
US Market Release	17Jul2006	Total Malfunctions (USA)	1
CE Approval Date	20Sep2005	Therapy Function Not Compromised	1
Registered USA Implants	3,641	Electrical Component	1
Estimated Active USA Implants	849	Therapy Function Compromised	0
Normal Rattery Depletions	432		



 Including Normal Battery Depletion Excluding Normal Battery Depletion at 168 Years 10 12 13 mo **Excluding NBD** 100.0% 100.0% 100.0% 100.0% 100.0% 100.0% 100.0% 100.0% 100.0% 100.0% 100.0% 100.0% 100.0% 100.0% Including NBD 15.4% 99.9% 99.9% 99.8% 99.6% 99.3% 98.8% 97.9% 94.9% 87.6% 74.5% 60.7% 45.4% 31.7% Effective 209077 365261 338800 313064 289162 264932 240345 167005 120676 76751 40118 14946 465 Sample Size

ADDRL1 Adapta L DR

US Market Release	17Jul2006	Total Malfunctions (USA)	25
CE Approval Date	20Sep2005	Therapy Function Not Compromised	17
Registered USA Implants	138,605	Electrical Component	13
Estimated Active USA Implants	64,630	Electrical Interconnect	1
Normal Battery Depletions	2,889	Possible Early Battery Depletion	2
		Software/Firmware	1
		Therapy Function Compromised	8
		Electrical Component	5
		Electrical Interconnect	1
		Other	2

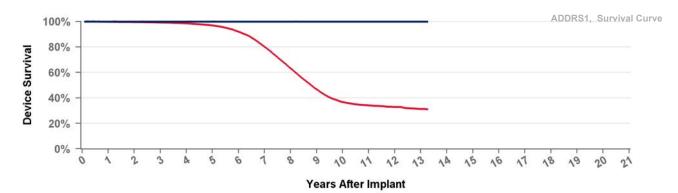


	Including Normal Batte	ry Depletion		Excluding	Normal	Battery	Depletion
--	------------------------	--------------	--	-----------	--------	---------	-----------

Years	1	2	3	4	5	6	7	8	9	10	11	12	13	at 168 mo
Excluding NBD	100.0%	100.0%	100.0%	100.0%	100.0%	100.0%	100.0%	100.0%	100.0%	100.0%	100.0%	100.0%	100.0%	100.0%
Including NBD	100.0%	99.9%	99.9%	99.8%	99.7%	99.5%	99.2%	99.0%	98.5%	97.2%	94.1%	89.2%	86.6%	84.9%
Effective Sample Size	119685	112697	106052	99500	92186	84456	76957	68062	57703	46414	32989	19845	8659	457

ADDRS1 Adapta S DR

US Market Release	17Jul2006	Total Malfunctions (USA)	15
CE Approval Date	20Sep2005	Therapy Function Not Compromised	9
Registered USA Implants	49,311	Electrical Component	5
Estimated Active USA Implants	9,722	Possible Early Battery Depletion	3
Normal Battery Depletions	6,646	Other	1
		Therapy Function Compromised	6
		Electrical Component	4
		Other	2

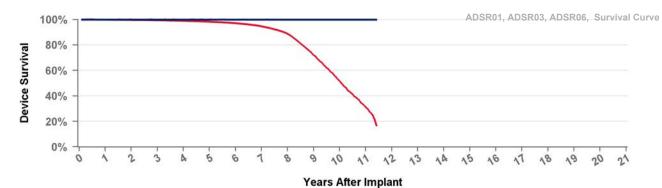


Including Normal Battery Depletion
 Excluding Normal Battery Depletion

Years	1	2	3	4	5	6	7	8	9	10	11	12	13	at 159 mo
Excluding NBD	100.0%	100.0%	100.0%	100.0%	100.0%	100.0%	100.0%	100.0%	100.0%	100.0%	100.0%	100.0%	100.0%	100.0%
Including NBD	99.8%	99.6%	99.2%	98.5%	96.9%	92.0%	80.1%	63.1%	46.8%	36.7%	34.1%	32.9%	31.3%	31.1%
Effective	40117	36090	32378	29007	25636	21621	16274	10707	6377	3743	2299	1282	325	125
Sample Size														

ADSR01 Adapta SR

US Market Release	17Jul2006	Total Malfunctions (USA)	18
CE Approval Date	20Sep2005	Therapy Function Not Compromised	12
Registered USA Implants	91,662	Electrical Component	7
Estimated Active USA Implants	18,928	Electrical Interconnect	1
Normal Battery Depletions	6,477	Possible Early Battery Depletion	4
		Therapy Function Compromised	6
		Electrical Component	5
		Electrical Interconnect	1



Years	1	2	3	4	5	6	7	8	9	10	11	at 137 mo
Excluding NBD	100.0%	100.0%	100.0%	100.0%	100.0%	100.0%	100.0%	100.0%	100.0%	100.0%	100.0%	100.0%
Including NBD	99.9%	99.7%	99.4%	99.0%	98.3%	97.1%	94.6%	88.7%	72.1%	51.7%	31.1%	16.8%
Effective Sample Size	72032	62950	55120	48082	41254	34912	28987	22404	14621	6795	1577	169

ADSR03 Adapta SR

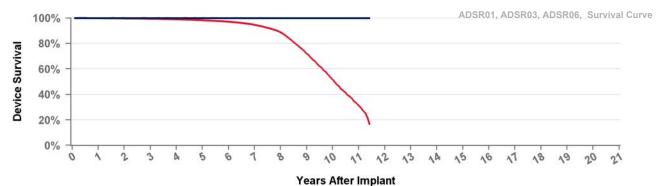
US Market Release 17Jul2006

CE Approval Date 20Sep2005 Therapy Function Not Compromised

Registered USA Implants 2,124

Estimated Active USA Implants 423 Therapy Function Compromised

Normal Battery Depletions 203



Total Malfunctions (USA)

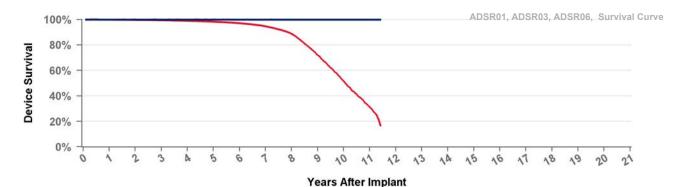
Including Normal Battery Depletion Excluding Normal Battery Depletion

Years	1	2	3	4	5	6	7	8	9	10	11	at 137 mo
Excluding NBD	100.0%	100.0%	100.0%	100.0%	100.0%	100.0%	100.0%	100.0%	100.0%	100.0%	100.0%	100.0%
Including NBD	99.9%	99.7%	99.4%	99.0%	98.3%	97.1%	94.6%	88.7%	72.1%	51.7%	31.1%	16.8%
Effective	72032	62950	55120	48082	41254	34912	28987	22404	14621	6795	1577	169
Sample Size												

ADSR06

Adapta SR

US Market Release 17Jul2006 **Total Malfunctions (USA)** 2 2 **CE Approval Date** 20Sep2005 **Therapy Function Not Compromised Registered USA Implants Electrical Component** 2 2,908 **Estimated Active USA Implants Therapy Function Compromised** 0 594 **Normal Battery Depletions** 277



Including Normal Battery Depletion Excluding Normal Battery Depletion at 137 Years 2 3 5 6 8 10 11 mo **Excluding NBD** 100.0% 100.0% 100.0% 100.0% 100.0% 100.0% 100.0% 100.0% 100.0% 100.0% 100.0% 100.0% Including NBD 99.9% 99.7% 99.4% 99.0% 98.3% 97.1% 94.6% 88.7% 72.1% 51.7% 31.1% 16.8% **Effective** 62950 55120 Sample Size

ADVDD01 Adapta VDD

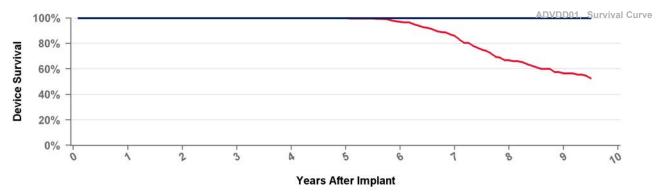
17Jul2006 **US Market Release**

20Sep2005 **Therapy Function Not Compromised CE Approval Date**

Registered USA Implants 856

Therapy Function Compromised Estimated Active USA Implants 214

Normal Battery Depletions 95



Excluding Normal Battery Depletion

52.5%

104

Total Malfunctions (USA)

at 114 2 3 4 5 6 8 9 mo 100.0% 100.0% 100.0% 100.0% 100.0% 100.0% 100.0% 100.0% 100.0%

Including NBD Effective

Years **Excluding NBD** 100.0% 100.0% 100.0% 100.0% 100.0% 100.0% 97.0% 86.0% 66.8% 56.6% 648 588 532 471 410 318 186 127 Sample Size

Including Normal Battery Depletion

Attesta DR MRI ATDR01

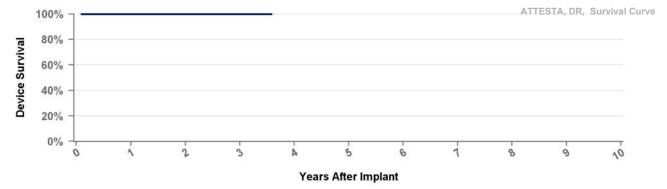
US Market Release Total Malfunctions (USA) 03Aug2017

CE Approval Date 16Jun2017 **Therapy Function Not Compromised**

Registered USA Implants 2,093

Therapy Function Compromised Estimated Active USA Implants 2,003

Normal Battery Depletions



Years	1	2	3	at 43 mo
Excluding NBD	100.0%	100.0%	100.0%	100.0%
Including NBD	100.0%	100.0%	100.0%	100.0%
Effective	1666	1039	405	100

ATDRL1 Attesta L DR MRI

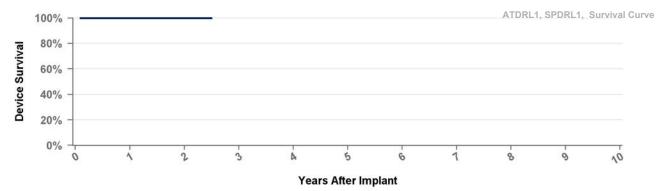
US Market Release 03Aug2017 Total Malfunctions (USA)

CE Approval Date 16Jun2017 Therapy Function Not Compromised

Registered USA Implants 295

Estimated Active USA Implants 286 Therapy Function Compromised

Normal Battery Depletions



Including Normal Battery Depletion
 Excluding Normal Battery Depletion

Years	1	2	at 30 mo
Excluding NBD	100.0%	100.0%	100.0%
Including NBD	100.0%	100.0%	100.0%
Effective Sample Size	234	150	100

ATDRS1

Attesta S DR MRI

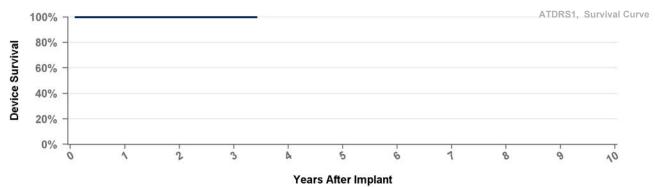
US Market Release 03Aug2017 Total Malfunctions (USA)

CE Approval Date 16Jun2017 Therapy Function Not Compromised

Registered USA Implants 1,362

Estimated Active USA Implants 1,250 Therapy Function Compromised

Normal Battery Depletions



Years	1	2	3	at 41 mo
Excluding NBD	100.0%	100.0%	100.0%	100.0%
Including NBD	100.0%	100.0%	100.0%	100.0%
Effective Sample Size	982	623	239	101

ATSR01 Attesta SR MRI

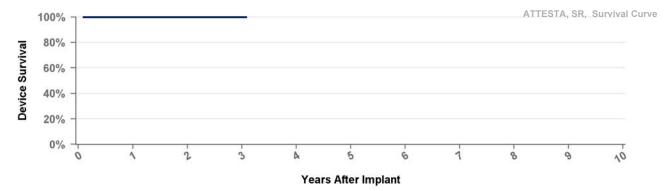
US Market Release 03Aug2017 Total Malfunctions (USA)

CE Approval Date 16Jun2017 Therapy Function Not Compromised

Registered USA Implants 1,183

Estimated Active USA Implants 893 Therapy Function Compromised

Normal Battery Depletions



Including Normal Battery Depletion
 Excluding Normal Battery Depletion

Years	1	2	3	at 37 mo
Excluding NBD	100.0%	100.0%	100.0%	100.0%
Including NBD	100.0%	100.0%	100.0%	100.0%
Effective Sample Size	681	392	146	116

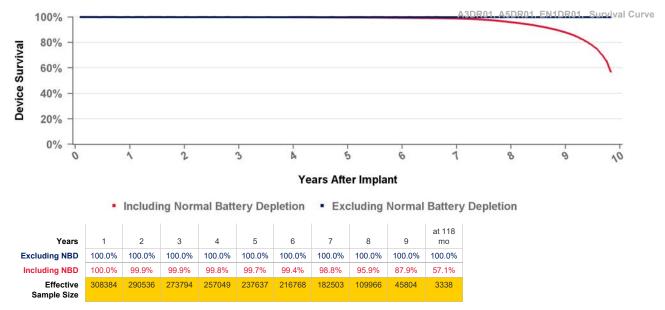
EN1DR01 Ensura MRI

US Market Release Total Malfunctions (USA)

CE Approval Date 23Jun2010 Therapy Function Not Compromised

Registered USA Implants 5

Estimated Active USA Implants 2 Therapy Function Compromised



EN1SR01 **Ensura SR MRI**

US Market Release

CE Approval Date

24Apr2014

Registered USA Implants

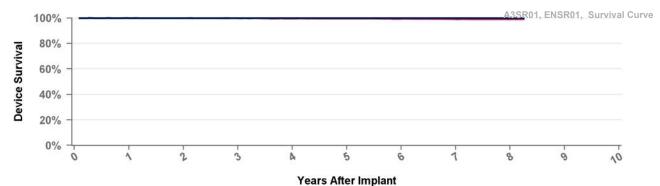
Normal Battery Depletions

Estimated Active USA Implants

Total Malfunctions (USA)

Therapy Function Not Compromised

Therapy Function Compromised



Including Normal Battery Depletion
 Excluding Normal Battery Depletion

Years	1	2	3	4	5	6	7	8	at 99 mo
Excluding NBD	100.0%	100.0%	100.0%	100.0%	100.0%	100.0%	100.0%	100.0%	100.0%
Including NBD	99.9%	99.9%	99.8%	99.7%	99.6%	99.5%	99.2%	99.0%	99.0%
Effective Sample Size	22025	19382	17201	15020	12895	10984	7908	1730	268

RED01

Relia D

US Market Release

Total Malfunctions (USA)

CE Approval Date

07May2008

Therapy Function Not Compromised

Registered USA Implants

Normal Battery Depletions

2

1

Estimated Active USA Implants

Therapy Function Compromised

1, ADDR03, ADDR06, ADD01, Survival Curve 100% 80% **Device Survival** 60% 40% 20% 0% **Years After Implant**

								-						
Years	1	2	3	4	5	6	7	8	9	10	11	12	13	at 168 mo
Excluding NBD	100.0%	100.0%	100.0%	100.0%	100.0%	100.0%	100.0%	100.0%	100.0%	100.0%	100.0%	100.0%	100.0%	100.0%
Including NBD	99.9%	99.9%	99.8%	99.6%	99.3%	98.8%	97.9%	94.9%	87.6%	74.5%	60.7%	45.4%	31.7%	15.4%
Effective	393167	365261	338800	313064	289162	264932	240345	209077	167005	120676	76751	40118	14946	465
Sample Size														

REDR01 Relia DR

US Market Release

Total Malfunctions (USA)

CE Approval Date

07May2008

Registered USA Implants

Therapy Function Not Compromised

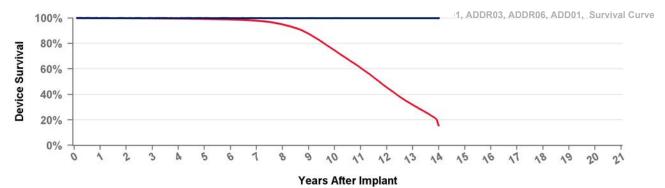
11

3

2

Therapy Function Compromised

Estimated Active USA Implants Normal Battery Depletions



 Including Normal Battery Depletion Excluding Normal Battery Depletion at 168 Years 2 3 6 8 9 10 11 12 13 mo **Excluding NBD** 100.0% 100.0% 100.0% 100.0% 100.0% 100.0% 100.0% 100.0% 100.0% 100.0% 100.0% 100.0% 100.0% 100.0% 99.9% 94.9% 87.6% 74.5% 31.7% 15.4% Including NBD 99.9% 99.6% 99.3% 98.8% 60.7% 45.4% Effective 365261 338800 313064 289162 264932 240345 209077 167005 120676 76751 40118 14946 465

RES01

Relia S

US Market Release

Sample Size

Total Malfunctions (USA)

CE Approval Date

Therapy Function Not Compromised

Registered USA Implants

07May2008

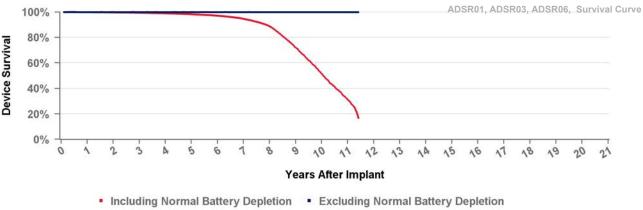
4

2

Therapy Function Compromised

Normal Battery Depletions

Estimated Active USA Implants



Years	1	2	3	4	5	6	7	8	9	10	11	at 137 mo
Excluding NBD	100.0%	100.0%	100.0%	100.0%	100.0%	100.0%	100.0%	100.0%	100.0%	100.0%	100.0%	100.0%
Including NBD	99.9%	99.7%	99.4%	99.0%	98.3%	97.1%	94.6%	88.7%	72.1%	51.7%	31.1%	16.8%
Effective Sample Size	72032	62950	55120	48082	41254	34912	28987	22404	14621	6795	1577	169

RESR01 Relia SR

US Market Release

Total Malfunctions (USA)

CE Approval Date

07May2008 **Therapy Function Not Compromised**

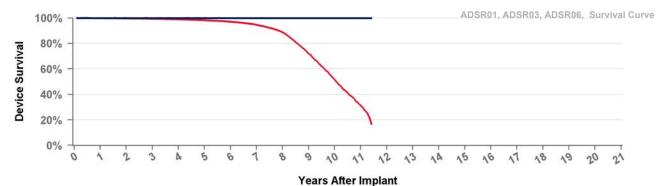
Registered USA Implants

7

Therapy Function Compromised

Normal Battery Depletions

Estimated Active USA Implants 1



Including Normal Battery Depletion Excluding Normal Battery Depletion

Years	1	2	3	4	5	6	7	8	9	10	11	at 137 mo
Excluding NBD	100.0%	100.0%	100.0%	100.0%	100.0%	100.0%	100.0%	100.0%	100.0%	100.0%	100.0%	100.0%
Including NBD	99.9%	99.7%	99.4%	99.0%	98.3%	97.1%	94.6%	88.7%	72.1%	51.7%	31.1%	16.8%
Effective Sample Size	72032	62950	55120	48082	41254	34912	28987	22404	14621	6795	1577	169

REVDD01

Relia VDD

US Market Release CE Approval Date

07May2008

Therapy Function Not Compromised

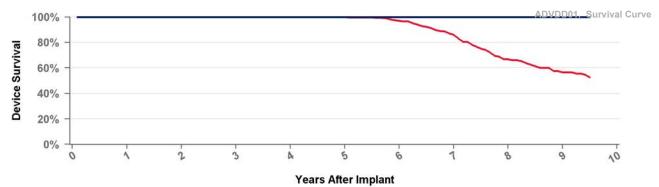
Registered USA Implants

Estimated Active USA Implants

Normal Battery Depletions

Therapy Function Compromised

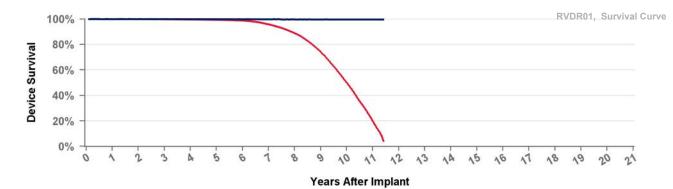
Total Malfunctions (USA)



	 Including Normal Battery Depletion Excluding Normal Battery Depletion 										
Years	1	2	3	4	5	6	7	8	9	at 114 mo	
Excluding NBD	100.0%	100.0%	100.0%	100.0%	100.0%	100.0%	100.0%	100.0%	100.0%	100.0%	
Including NBD	100.0%	100.0%	100.0%	100.0%	100.0%	97.0%	86.0%	66.8%	56.6%	52.5%	
Effective Sample Size	705	648	588	532	471	410	318	186	127	104	

RVDR01 Revo MRI SureScan

US Market Release	08Feb2011	Total Malfunctions (USA)	111
CE Approval Date		Therapy Function Not Compromised	108
Registered USA Implants	69,114	Battery	1
Estimated Active USA Implants	14,329	Electrical Component	40
Normal Battery Depletions	11,871	Electrical Interconnect	1
		Possible Early Battery Depletion	61
		Software/Firmware	4
		Other	1
		Therapy Function Compromised	3
		Electrical Component	3



Including Normal Battery Depletion
 Excluding Normal Battery Depletion

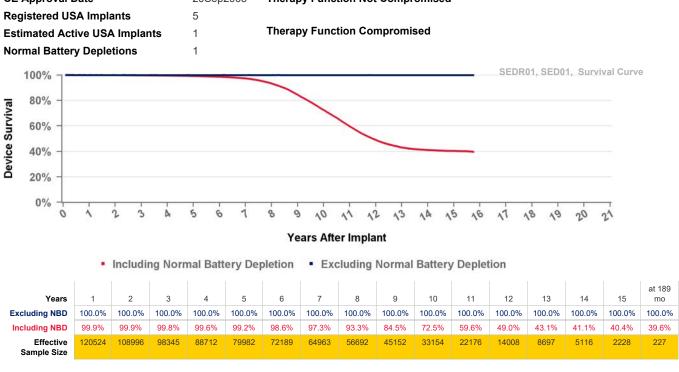
Years	1	2	3	4	5	6	7	8	9	10	11	at 137 mo
Excluding NBD	100.0%	100.0%	99.9%	99.9%	99.9%	99.8%	99.8%	99.8%	99.7%	99.7%	99.7%	99.7%
Including NBD	100.0%	99.9%	99.8%	99.6%	99.4%	98.8%	95.8%	88.8%	74.2%	50.2%	20.0%	4.3%
Effective Sample Size	59303	56149	53135	49973	46276	42262	37432	31261	22363	11778	2892	297

SED01

Sensia D

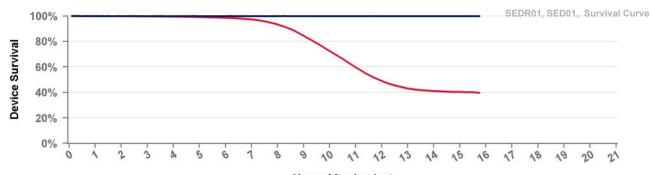
US Market Release 17Jul2006 Total Malfunctions (USA)

CE Approval Date 20Sep2005 Therapy Function Not Compromised



SEDR01 Sensia DR

US Market Release	17Jul2006	Total Malfunctions (USA)	33
CE Approval Date	20Sep2005	Therapy Function Not Compromised	17
Registered USA Implants	149,406	Electrical Component	15
Estimated Active USA Implants	28,923	Electrical Interconnect	1
Normal Battery Depletions	16,824	Other	1
		Therapy Function Compromised	16
		Electrical Component	6
		Electrical Interconnect	3
		Possible Early Battery Depletion	1
		Other	6



Years After Implant

Including Normal Battery Depletion
 Excluding Normal Battery Depletion

Years	1	2	3	4	5	6	7	8	9	10	11	12	13	14	15	at 189 mo
Excluding NBD	100.0%	100.0%	100.0%	100.0%	100.0%	100.0%	100.0%	100.0%	100.0%	100.0%	100.0%	100.0%	100.0%	100.0%	100.0%	100.0%
Including NBD	99.9%	99.9%	99.8%	99.6%	99.2%	98.6%	97.3%	93.3%	84.5%	72.5%	59.6%	49.0%	43.1%	41.1%	40.4%	39.6%
Effective	120524	108996	98345	88712	79982	72189	64963	56692	45152	33154	22176	14008	8697	5116	2228	227
Sample Size																

SEDRL1 Sensia L DR

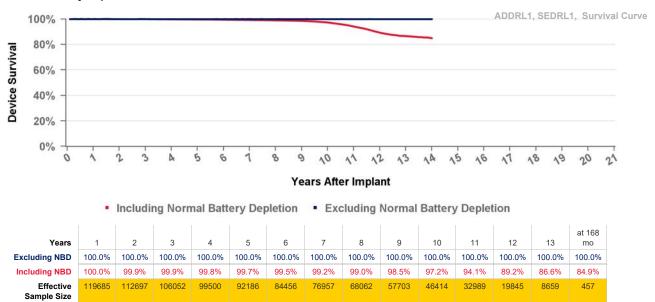
US Market Release 17Jul2006 Total Malfunctions (USA)

CE Approval Date 20Sep2005 Therapy Function Not Compromised

Registered USA Implants 5

Estimated Active USA Implants 1 Therapy Function Compromised

Normal Battery Depletions



SES01 Sensia S US Market Release 17Jul2006 CE Approval Date 20Sep2005 Registered USA Implants 4

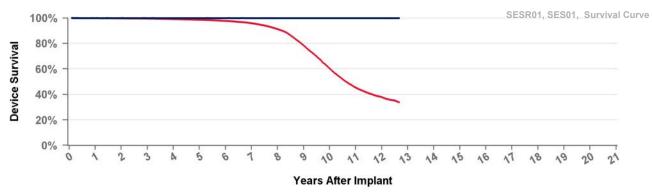
Total Malfunctions (USA)

Therapy Function Not Compromised

1 Therapy Function Compromised

Normal Battery Depletions

Estimated Active USA Implants

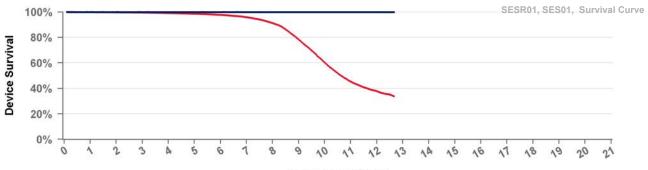


Including Normal Battery Depletion
 Excluding Normal Battery Depletion

Years	1	2	3	4	5	6	7	8	9	10	11	12	at 152 mo
Excluding NBD	100.0%	100.0%	100.0%	100.0%	100.0%	100.0%	100.0%	100.0%	100.0%	100.0%	100.0%	100.0%	100.0%
Including NBD	99.9%	99.8%	99.6%	99.2%	98.6%	97.8%	95.9%	91.2%	78.4%	60.2%	45.3%	37.8%	33.7%
Effective Sample Size	85820	74447	64542	56003	48244	41081	34577	27777	19746	11349	5317	1928	278

SESR01 Sensia SR

US Market Release	17Jul2006	Total Malfunctions (USA)	17
CE Approval Date	20Sep2005	Therapy Function Not Compromised	13
Registered USA Implants	117,372	Electrical Component	7
Estimated Active USA Implants	21,421	Possible Early Battery Depletion	4
Normal Battery Depletions	8,890	Other	2
		Therapy Function Compromised	4
		Electrical Component	3
		Electrical Interconnect	1



Years After Implant

Years	1	2	3	4	5	6	7	8	9	10	11	12	at 152 mo
Excluding NBD	100.0%	100.0%	100.0%	100.0%	100.0%	100.0%	100.0%	100.0%	100.0%	100.0%	100.0%	100.0%	100.0%
Including NBD	99.9%	99.8%	99.6%	99.2%	98.6%	97.8%	95.9%	91.2%	78.4%	60.2%	45.3%	37.8%	33.7%
Effective Sample Size	85820	74447	64542	56003	48244	41081	34577	27777	19746	11349	5317	1928	278

Including Normal Battery Depletion
 Excluding Normal Battery Depletion

SPDR01 Sphera DR MRI

US Market Release

03Aug2017

Total Malfunctions (USA)

CE Approval Date

16Jun2017

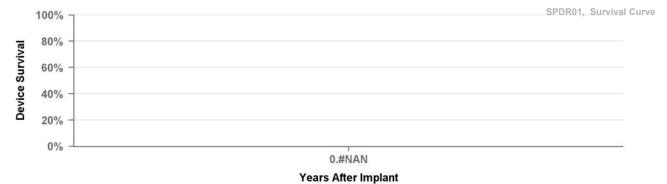
Therapy Function Not Compromised

Registered USA Implants

Estimated Active USA Implants

Therapy Function Compromised

Normal Battery Depletions



8.7

Years
Excluding NBD
Including NBD
Effective
Sample Size

SPDRL1 Sphera L DR MRI

US Market Release

03Aug2017

Total Malfunctions (USA)

CE Approval Date

16Jun2017

Therapy Function Not Compromised

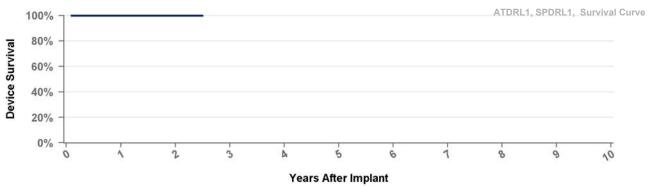
Registered USA Implants

1

Therapy Function Compromised

Estimated Active USA Implants

Normal Battery Depletions



Including Normal Battery Depletion
 Excluding Normal Battery Depletion

Years 1
Excluding NBD 100.0
Including NBD 100.0
Effective Sample Size

5	1	2	at 30 mo
)	100.0%	100.0%	100.0%
)	100.0%	100.0%	100.0%
Э	234	150	100
9			

SPSR01 Sphera SR MRI

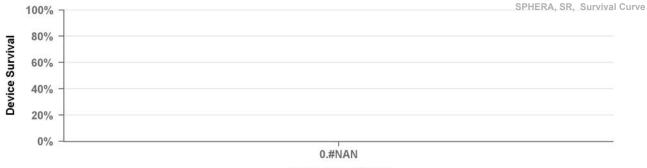
US Market Release 03Aug2017 Total Malfunctions (USA)

CE Approval Date 16Jun2017 Therapy Function Not Compromised

Registered USA Implants 1

Estimated Active USA Implants 1 Therapy Function Compromised

Normal Battery Depletions

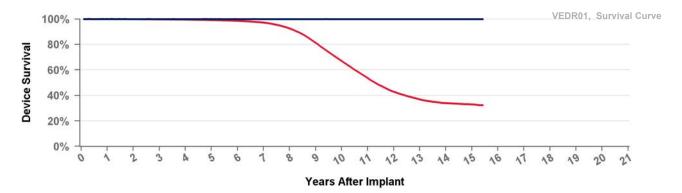


Years After Implant

Years
Excluding NBD
Including NBD
Effective
Sample Size

VEDR01 Versa DR

US Market Release	17Jul2006	Total Malfunctions (USA)	26
CE Approval Date	20Sep2005	Therapy Function Not Compromised	11
Registered USA Implants	118,955	Electrical Component	7
Estimated Active USA Implants	24,021	Electrical Interconnect	2
Normal Battery Depletions	14,699	Possible Early Battery Depletion	2
		Therapy Function Compromised	15
		Electrical Component	11
		Other	4

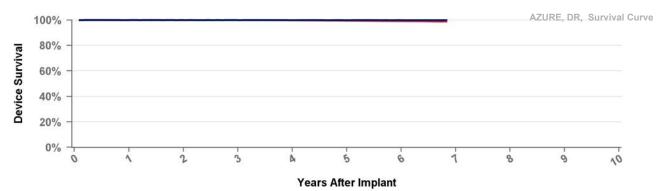


Including Normal Battery Depletion
 Excluding Normal Battery Depletion

																at 185
Years	1	2	3	4	5	6	7	8	9	10	11	12	13	14	15	mo
Excluding NBD	100.0%	100.0%	100.0%	100.0%	100.0%	100.0%	100.0%	100.0%	100.0%	100.0%	100.0%	100.0%	100.0%	100.0%	100.0%	100.0%
Including NBD	99.9%	99.9%	99.8%	99.6%	99.2%	98.6%	97.2%	92.5%	81.3%	67.0%	53.6%	42.9%	36.8%	34.0%	32.9%	32.4%
Effective	98650	90156	82067	74685	67978	62015	55278	46203	34735	24253	15839	9664	5679	2976	912	125
Sample Size																

W1DR01 Azure XT DR

US Market Release	16Aug2017	Total Malfunctions (USA)	150
CE Approval Date	02Mar2017	Therapy Function Not Compromised	137
Registered USA Implants	738,134	Battery	4
Estimated Active USA Implants	666,274	Electrical Component	84
Normal Battery Depletions	634	Possible Early Battery Depletion	5
		Software/Firmware	22
		Other	22
		Therapy Function Compromised	13
		Battery	2
		Electrical Component	11

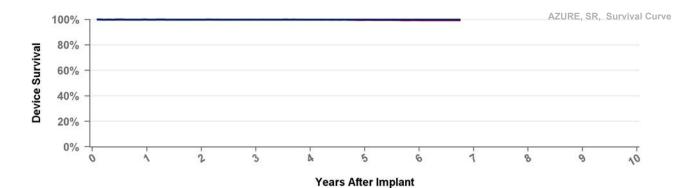


Including Normal Battery Depletion
 Excluding Normal Battery Depletion

Years	1	2	3	4	5	6	at 82 mo
Excluding NBD	100.0%	100.0%	100.0%	100.0%	100.0%	100.0%	100.0%
Including NBD	100.0%	100.0%	99.9%	99.8%	99.5%	99.2%	98.8%
Effective Sample Size	625708	471555	340627	226084	132936	48209	937

W1SR01 Azure XT SR

US Market Release	16Aug2017	Total Malfunctions (USA)	11
CE Approval Date	02Mar2017	Therapy Function Not Compromised	10
Registered USA Implants	57,825	Battery	1
Estimated Active USA Implants	48,145	Electrical Component	6
Normal Battery Depletions	29	Software/Firmware	1
		Other	2
		Therapy Function Compromised	1



Electrical Component

1

Including Normal Battery Depletion
 Excluding Normal Battery Depletion

Years	1	2	3	4	5	6	at 81 mo
Excluding NBD	100.0%	100.0%	100.0%	100.0%	100.0%	100.0%	100.0%
Including NBD	100.0%	100.0%	99.9%	99.9%	99.7%	99.4%	99.4%
Effective Sample Size	53593	40605	29489	19415	10997	3781	227

W2DR01

Azure XT DR

US Market Release Total Malfunctions (USA)

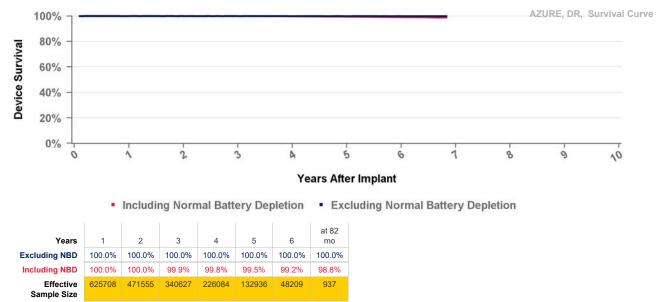
CE Approval Date 02Mar2017 Therapy Function Not Compromised

Registered USA Implants 2

tegistered out implants

Estimated Active USA Implants 2 Therapy Function Compromised

Normal Battery Depletions



W2SR01

Azure XT SR

US Market Release

02Mar2017

Total Malfunctions (USA)

CE Approval Date

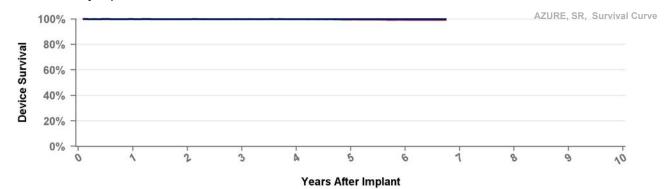
Therapy Function Not Compromised

Registered USA Implants

Estimated Active USA Implants

Normal Battery Depletions

Therapy Function Compromised



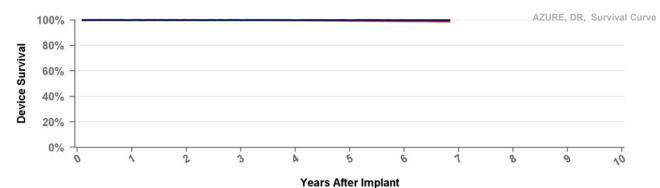
Including Normal Battery Depletion
 Excluding Normal Battery Depletion

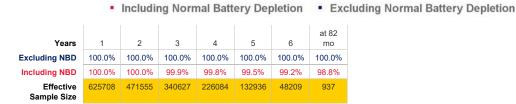
Years	1	2	3	4	5	6	at 81 mo
Excluding NBD	100.0%	100.0%	100.0%	100.0%	100.0%	100.0%	100.0%
Including NBD	100.0%	100.0%	99.9%	99.9%	99.7%	99.4%	99.4%
Effective Sample Size	53593	40605	29489	19415	10997	3781	227

W3DR01

Azure S DR

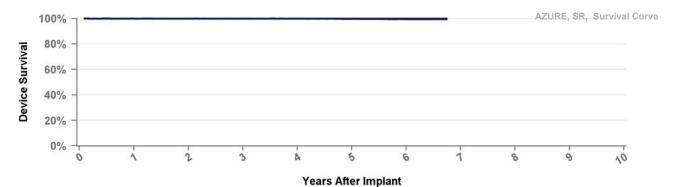
US Market Release	16Aug2017	Total Malfunctions (USA)	14
CE Approval Date	02Mar2017	Therapy Function Not Compromised	13
Registered USA Implants	63,131	Electrical Component	10
Estimated Active USA Implants	55,500	Possible Early Battery Depletion	1
Normal Battery Depletions	136	Software/Firmware	2
		Therapy Function Compromised	1
		Electrical Component	1





W3SR01 Azure S SR

US Market Release	16Aug2017	Total Malfunctions (USA)	1
CE Approval Date	02Mar2017	Therapy Function Not Compromised	1
Registered USA Implants	13,059	Electrical Component	1
Estimated Active USA Implants	10,792	Therapy Function Compromised	0
Normal Battery Depletions	6		



Including Normal Battery Depletion
 Excluding Normal Battery Depletion

Years	1	2	3	4	5	6	at 81 mo
Excluding NBD	100.0%	100.0%	100.0%	100.0%	100.0%	100.0%	100.0%
Including NBD	100.0%	100.0%	99.9%	99.9%	99.7%	99.4%	99.4%
Effective	53593	40605	29489	19415	10997	3781	227

X2DR01

Astra XT DR MRI SureScan

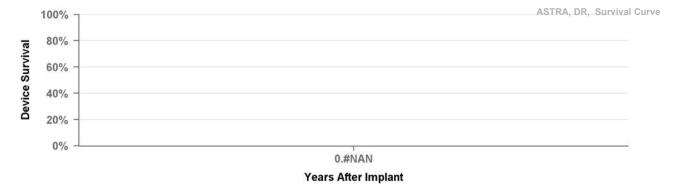
US Market Release Total Malfunctions (USA)

CE Approval Date 02Mar2017 **Therapy Function Not Compromised**

Registered USA Implants Estimated Active USA Implants

Normal Battery Depletions

Therapy Function Compromised



Years **Excluding NBD** Including NBD Effective

Sample Size

X2SR01 Astra XT SR MRI SureScan **US Market Release Total Malfunctions (USA)** 02Mar2017 **Therapy Function Not Compromised CE Approval Date Registered USA Implants Therapy Function Compromised Estimated Active USA Implants Normal Battery Depletions** ASTRA, SR, Survival Curve 100% 80% Device Survival 60% 40% 20% 0% 0.#NAN **Years After Implant** Years **Excluding NBD** Including NBD Effective Sample Size Astra S DR **X3DR01 US Market Release Total Malfunctions (USA) CE Approval Date Therapy Function Not Compromised** 02Mar2017

Registered USA Implants Therapy Function Compromised Estimated Active USA Implants Normal Battery Depletions



Years **Excluding NBD** Including NBD Effective Sample Size

Astra S SR X3SR01

US Market Release

Years **Excluding NBD** Including NBD Effective Sample Size

Total Malfunctions (USA) 02Mar2017

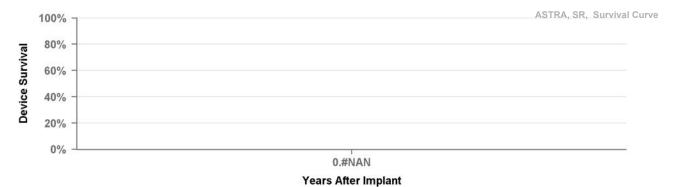
CE Approval Date

Therapy Function Not Compromised

Registered USA Implants

Estimated Active USA Implants Normal Battery Depletions

Therapy Function Compromised



Method for Estimating Transcatheter Pacing Performance

Micra TPS Performance Analysis

Transcatheter pacing systems (TPS) combine the pacing functions of an IPG with the therapy delivery functions of an implantable lead into a single device implanted inside the heart. Therefore, TPS is subject to complications similar to pacing leads (e.g. cardiac perforation) and malfunctions or battery depletion events similar to an implanted pulse generator (IPG). Although both transvenous systems and Micra IPG experience similar system level major complications, Micra has been shown to reduce the likelihood of major complications at a system level in postapproval registry data.

The performance report information is determined from the analysis of Medtronic Cardiac Rhythm Management (CRM) United States registration, complaint and CareLinkTM network data. A TPS model or model family will be included in this report when it has accumulated at least 10,000 implant months and will remain in the report as long as at least 500 devices remain active in the CareLinkTM population.

Shortfalls of using returned products to Estimate Micra TPS Performance

Micra TPS devices returned to Medtronic are analyzed to determine whether or not they meet performance limits established by Medtronic. Although returned product analyses are valuable for gaining insight into failure mechanisms, this data cannot be used by itself for determining the survival probability because only a small fraction of Micra devices are explanted and returned to Medtronic for analysis. Some devices are programmed off due to an adverse event, however, they are often not retrieved/ explanted. The devices that are retrieved and returned cannot be assumed to be statistically representative of the performance of the total population for a given model. For this same reason, devices that meet their expected longevity are also not expected to be returned to Medtronic CRM.

The CareLink™ Network

To account for the shortfalls of returned product analysis, a study of de-identified product data on the Medtronic CareLinkTM network is used. The number of devices enrolled and transmitting actively enables a population large enough to give a representative volume of normal battery depletions and to provide insight into the complications that may occur after the device was successfully implanted. As the intent of the product performance report is to provide visibility to long-term device performance, the devices reviewed from the CareLinkTM Network have been implanted for at least 30 days.

Categorization of Micra TPS Qualifying Complications or Malfunctions for Survival Analysis on CareLink™

For survival estimation, complication and premature battery depletion data from Medtronic's Complaint Handling System is adjudicated and subsequently cross-referenced with an assessment of device performance from the Medtronic CareLinkTM network to categorize if the device is 1) functioning normally, 2) has reached normal battery depletion, or 3) has experienced a qualifying malfunction or complication. This categorization is combined with the CareLinkTM data for the total number of implants and implant durations to create survival estimates for the likelihood of experiencing a qualifying complication or malfunction, and normal battery depletion. Ultimately, the data is summarized in two survival curves, one with only qualifying complications or malfunctions and the other including normal battery depletion.

Definition of Qualifying Complication or Malfunction

A longevity analysis is completed for all de-identified devices followed on CareLink™ that have reached the Recommended Replacement Time (RRT), to identify devices that experienced possible early battery depletion. These are findings where the actual reported implant time is less than 80% of the expected longevity calculated using the available device diagnostic information.

Methods for Estimating Transcatheter Pacing Performance continued

Additionally, all reported Micra TPS complaints are adjudicated by subject matter experts and medical safety personnel for inclusion as a product performance event given available information. These product performance events are then cross-referenced with the CareLink™ population for inclusion in the survival analysis.

Product Performance events include, but are not limited to, these that occur 30 days after the implant procedure:

- Premature Battery Depletion
- Cardiac Perforation
- Dislodgement
- Failure to Capture
- Elevated Pacing Threshold
- Tine Fracture

Normal Battery Depletion

A longevity analysis is completed for all devices followed on CareLinkTM that are at or within 6 months of RRT to identify devices were taken out of service due to normal battery depletion. The population that is within six months of RRT is assessed against the expected longevity of the product. Normal Battery Depletion is defined as the condition when the device has reached its elective replacement indicator(s) with implant time exceeding 80% of the expected longevity calculated using the available device diagnostic information.

Medtronic CRM establishes expected longevity by statistically characterizing the power consumed by the device and the power available from the device battery. This characterization is applied to a number of parameter configurations. The statistical mean value minus three standard deviations is used as the expected longevity for determining if a battery depleted normally. The actual longevity achieved for any device while implanted will depend on the actual programmed parameters and patient factors and may differ significantly from these estimates.

Statistical and Data Analysis Methods

The performance is expressed in terms of device survival estimates, where "survival" refers to the function of the device, not the survival of the patient. These survival estimates are intended to illustrate the probability that a device will survive for a given number of years without a chronic device-related complication.

Active surveillance normally begins at the time of implant and continues until a product performance or censoring event occurs. Of the several different statistical methods available for survival analysis, PPR survival analysis is estimated using the Standard Actuarial Method, with suspensions assumed distributed evenly within the intervals (Cutler-Ederer Method), and incorporated data from these retrospectively enrolled devices. Thus, in some cases sample sizes may fluctuate from one time interval to the next interval.

The survival estimate is the probability that a device is free of a product performance event or normal battery depletion at a given time point. For example, if a survival probability is 95% after 5 years of service, then the device has a 5% chance of experiencing a related complication or battery depletion in the first 5 years following implant.

Since the survival estimate can become very imprecise with small effective sample sizes, Medtronic truncates the survival curve when the effective sample size is less than 100 devices. The survival charts in the Product Performance Report show the effective sample size for each year interval where we have experience. When the effective sample size reaches 100, the next data point is added to the survival curve.

Methods for Estimating Transcatheter Pacing Performance continued

Because the de-identified information pulled from the CareLink $^{\text{TM}}$ network allows for assessment of all devices that were taken out of service there are no adjustments done for underreporting of malfunctions or battery depletion.

Definition of Analysis Dataset

To be included in the US survival analysis dataset, the product must have been successfully implanted and on the $CareLink^{TM}$ network for at least 30 days.

US Reports of Acute Observations

In the first weeks following implantation, physiologic responses and performance can vary until long-term stability is attained. Acute performance may be subject to a number of factors, including patient-specific anatomy, clinical conditions and/or varying implant conditions/techniques. After a period of time, the implant and performance stabilizes. It is for this reason that the CareLinkTM analysis, which is intended to measure long-term performance, do not include complications that occur within the first 30 days after implant.

Acute performance information, defined as the first month after implant, but not including the day of the implant procedure, is included in our reporting. The source of this information is the Medtronic complaint handling system database that includes events reported to Medtronic. This information is summarized in tables titled "Acute Observations".

Each Event Report received by Medtronic's complaint handling system is assigned one or more Reason for Report codes based on the information received. The Reason for Report codes have been grouped into Acute Observation categories. The categories are:

- Cardiac Perforation
- Dislodgement
- Failure to Capture
- Failure to Sense
- Elevated Pacing Threshold

Although multiple observations are possible for any given Micra, only one observation is reported per device. The observation reported is the observation highest on the list. For example, if an Event Report includes observations for both Cardiac Perforation and Elevated Pacing Thresholds, Cardiac Perforation is reported.

The event reported to Medtronic may or may not have involved clinical action or product returned to Medtronic. The product may have remained implanted and in service.

US Reports of the Day of Implant Observations

Due to the procedural differences with Micra products compared to transvenous leads and IPGs, information about the clinical experience on the day of implant is included in our reporting. The source of this information is the Medtronic complaint handling system database that includes events reported to Medtronic which may be related to either the Micra device or the delivery system. The information is summarized in tables titled "Day of Implant Observations."

Methods for Estimating Transcatheter Pacing Performance continued

Each Event Report received by Medtronic's complaint handling system is assigned one or more Reason for Report codes based on the information received. The Reason for Report codes have been grouped into Day of Implant Observation categories. The categories are:

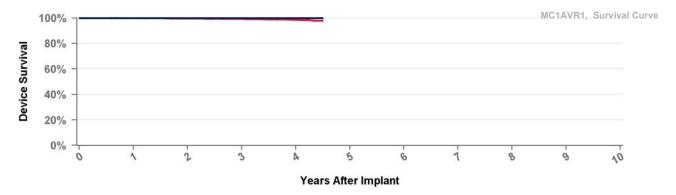
- Cardiac Perforation
- Dislodgement
- Failure to Capture
- Failure to Sense
- Elevated Pacing Threshold

Although multiple observations are possible for any given Micra, only one observation is reported per device. The observation reported is the observation highest on the list. For example, if an Event Report includes observations for both Cardiac Perforation and Elevated Pacing Thresholds, Cardiac Perforation is reported.

The event reported to Medtronic may or may not have involved clinical action or product returned to Medtronic. The product may have remained implanted and in service.

MC1AVR1 Micra AV

US Market Release	15Jan2020	CareLink Population	C	areLink Qualifying Malfunction	ns/Complications
CE Approval Date	31Mar2020	Enrolled	33,338	Dislodgements	3
Registered USA Implants	51,498	Active	25,894	Elevated Pacing Threshold	10
		Cumulative Follow-Up Months	709,116	Failure To Capture	7
		Normal Battery Depletion	102	Premature Battery Depletion	7
				Tine Fracture	1



Including Normal Battery Depletion
 Excluding Normal Battery Depletion

Years	1	2	3	4	at 54 mo
Excluding NBD	99.9%	99.9%	99.9%	99.9%	99.9%
Including NBD	99.9%	99.7%	99.3%	98.6%	97.9%
Effective Sample Size	24997	13567	5726	1154	109

*Acute Observations N = 51,498 *Day of Implant Observations N = 51,498

	,	,	
Cardiac Perforation	13	Cardiac Perforation	268
Dislodgement	30	Dislodgement	86
Elevated Pacing Threshold	89	Elevated Pacing Threshold	143
Failure to Capture	46	Failure to Capture	84
Failure To Sense	121	Failure to Sense	38

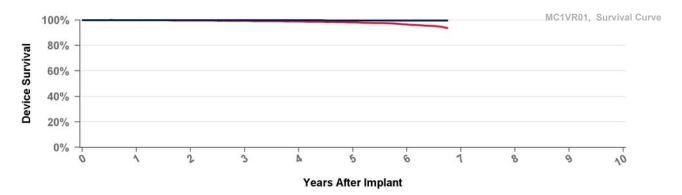
¹El-Chami et al. Heart Rhythm 2018 15(12): 1800-1807.

²Piccini et al. Heart Rhythm 2020 17(5 Supplement) D-PO02-089

^{*}Data in these tables is sourced direct from the MDT complaint handling database summarizing observations reported to Medtronic relative to the registered US implant population.

MC1VR01 Micra VR

US Market Release	06Apr2016	CareLink Population	CareLink Qualifying Malfunctions/Complica			
CE Approval Date	14Apr2015	Enrolled	47,296	Cardiac Perforation	8	
Registered USA Implants	stered USA Implants 71,898	Active	30,494	Dislodgements	1	
		Cumulative Follow-Up Months	1,510,074	Elevated Pacing Threshold	43	
		Normal Battery Depletion	327	Failure To Capture	7	
				Premature Battery Depletion	13	
				Tine Fracture	1	



Including Normal Battery Depletion Excluding Normal Battery Depletion

Years	1	2	3	4	5	6	at 81 mo
Excluding NBD	99.9%	99.9%	99.8%	99.8%	99.7%	99.7%	99.7%
Including NBD	99.9%	99.7%	99.3%	98.9%	98.1%	96.5%	93.6%
Effective Sample Size	39558	28471	18937	11438	5786	1924	366

*Acute Observations N = 71,898 *Day of Implant Observations N = 71,898

Cardiac Perforation	21	Cardiac Perforation	291
Dislodgement	22	Dislodgement	178
Elevated Pacing Threshold	165	Elevated Pacing Threshold	268
Failure to Capture	83	Failure to Capture	131
Failure To Sense	19	Failure to Sense	72

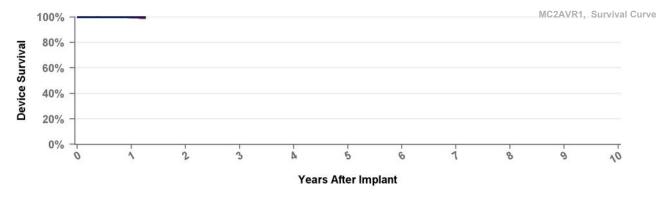
¹El-Chami et al. Heart Rhythm 2018 15(12): 1800-1807.

²Piccini et al. Heart Rhythm 2020 17(5 Supplement) D-PO02-089

^{*}Data in these tables is sourced direct from the MDT complaint handling database summarizing observations reported to Medtronic relative to the registered US implant population.

MC2AVR1 Micra AV2

US Market Release	20Apr2023	CareLink Population		CareLink Qualifying Malfunction	ons/Complications
CE Approval Date	04Jan2024	Enrolled	8,027	Elevated Pacing Threshold	4
Registered USA Implants	17,387	Active	7,666	Failure To Capture	1
		Cumulative Follow-Up Months	46,966		
		Normal Battery Depletion	5		



Including Normal Battery Depletion
 Excluding Normal Battery Depletion

Years	1	at 15 mo
Excluding NBD	99.9%	99.9%
Including NBD	99.7%	99.2%
Effective Sample Size	760	126

*Acute Observations N = 17	,387	*Day of Implant Observations N = 17,387		
Cardiac Perforation	2	Cardiac Perforation	31	
Dislodgement	5	Dislodgement	28	
Elevated Pacing Threshold	26	Elevated Pacing Threshold	32	
Failure to Capture	16	Failure to Capture	24	
Failure To Sense	23	Failure to Sense	11	

¹El-Chami et al. Heart Rhythm 2018 15(12): 1800-1807.

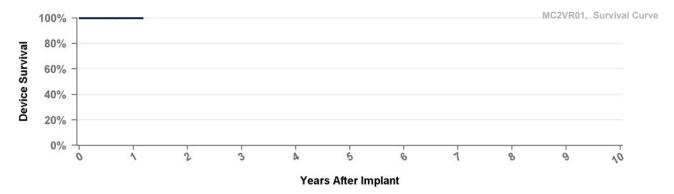
²Piccini et al. Heart Rhythm 2020 17(5 Supplement) D-PO02-089

^{*}Data in these tables is sourced direct from the MDT complaint handling database summarizing observations reported to Medtronic relative to the registered US implant population.

MC2VR01

Micra VR2

US Market Release	20Apr2023	CareLink Population		CareLink Qualifying Malfunctions/Complications
CE Approval Date	04Jan2024	Enrolled	2,992	
Registered USA Implants	6,428	Active	2,879	
		Cumulative Follow-Up Months	17,451	
		Normal Battery Depletion	2	



Including Normal Battery Depletion
 Excluding Normal Battery Depletion

Years	1	at 14 mo
Excluding NBD	100.0%	100.0%
Including NBD	99.8%	99.8%
Effective Sample Size	290	115

*Acute Observations N = 6,428

Dislodgement	3
Elevated Pacing Threshold	14
Failure to Capture	8
Failure To Sense	5

*Day of Implant Observations N = 6,428

Cardiac Perforation	7
Dislodgement	10
Elevated Pacing Threshold	20
Failure to Capture	13
Failure to Sense	4

¹El-Chami et al. Heart Rhythm 2018 15(12): 1800-1807.

²Piccini et al. Heart Rhythm 2020 17(5 Supplement) D-PO02-089

^{*}Data in these tables is sourced direct from the MDT complaint handling database summarizing observations reported to Medtronic relative to the registered US implant population.

Method for Estimating Lead Performance

Medtronic Cardiac Rhythm Management (CRM) has tracked lead survival for over 41 years with its multicenter, global chronic lead studies.

Leads Performance Analysis

Implanted leads operate in the challenging biochemical environment of the human body and the body's response to foreign objects. Implanted leads are also subject to mechanical stresses associated with heart motion, body motion, and patient anatomy.

In this environment, pacemaker and defibrillation leads cannot be expected to last forever. While IPGs and ICDs have a battery that will deplete after a predictable length of time, a lead's longevity cannot be predicted easily based on mechanical measurements, nor are there simple indicators that a lead is approaching the end of its service life. Therefore, regular monitoring while implanted, and evaluation of lead integrity upon IPG or ICD replacement, is necessary to determine if a lead may be approaching the end of its service life.

Shortfalls Of Using Returned Product And Complaints To Estimate Lead Performance

Leads and lead segments returned to Medtronic are analyzed to determine whether or not they meet performance limits established by Medtronic. Although returned product analyses are valuable for gaining insight into lead failure mechanisms, this data cannot be used by itself for determining the survival probability of leads because only a small fraction of leads are explanted and returned for analysis. Some leads are modified due to adverse device effect, however may not be explanted. Additionally, those leads that are returned cannot be assumed to be statistically representative of the performance of the total population for a given lead model. Partial or total lead extraction can result in significant damage to a lead, making a definitive analysis of a suspected failure, and its cause, impossible.

To account for the under reporting inherent with lead survival analysis based solely on returned product, some manufacturers add reported complaints where adverse product performance is evident but the product itself has not been returned. The improvement to the accuracy of survival estimates depends on the degree to which all complaints are actually communicated to the manufacturer. Since not all complaints are communicated to the manufacturer, adding complaints to the survival analysis does not completely solve the under reporting problem.

Lead survival probabilities are more appropriately determined through a prospective clinical surveillance study that includes active follow up with the patients. Although Medtronic monitors returned product analysis and complaints, these are not used to determine lead survival estimates.

Medtronic consolidated all cardiac rhythm surveillance registries into the PAN Registry. The PAN Registry is a patient centric surveillance platform which follows patients implanted with Medtronic cardiac rhythm product(s). The Product Performance Report (PPR) tracks PAN Registry enrolled patients to monitor lead performance status in vivo. The PAN Registry is designed to record clinical observations representative of the total clinical experience. Lead survival estimates include both lead hardware failure and lead-related clinical events that are classified as product performance events, and do not differentiate a lead hardware failure from other clinical events such as Failure to capture, perforation, dislodgement, or concurrent pulse generator failure.

PAN Registry

Medtronic has been monitoring the performance of its cardiac therapy products with a multicenter study since 1983 and has evaluated the performance of more than 131,000 leads, with data reported from countries around the world. Throughout this time period, Medtronic has continually worked to adapt systems and processes to more effectively monitor product performance following market release. The following summarizes current registry requirements.

Medtronic's product surveillance registry is a world-wide study that has a prospective, non-randomized, observational design. A key purpose of the registry is to provide continuing evaluation and periodic reporting of the long-term reliability and performance of Medtronic market-released cardiac rhythm therapy products. Product-related adverse events, indicating the status of the product, are collected to measure product survival probabilities. The data gathered may also be used to support the design and development of new cardiac therapy products. The registry is designed to continue indefinitely, encompassing new products as they become commercially available.

To ensure a sufficiently large and representative source of data, participating clinical sites must meet pre-specified selection criteria. Patients are enrolled upon implantation of a Medtronic Cardiac rhythm product. Every effort is made to ensure participants are representative of the range of clinical environments in which Medtronic cardiac rhythm products are used. Eligible products for enrollment include Medtronic market-released cardiac rhythm therapy products for which additional information to further characterize product performance following market release is desired. Number of enrollments is reviewed regularly to ensure adequate sample size is obtained for each individual product. Enrollment may be capped and follow-up discontinued when sufficient duration and precision is achieved to effectively characterize product survivability.

Enrolled patients are followed in accordance with the standard care practices of their care provider from their implant date until they can no longer be followed (e.g., death, lost to follow-up, etc.). However, to ensure regular patient status assessments are completed, follow-up windows consistent with typical care practices have been established with a minimum annual follow-up requirement. Product-related adverse events, system modifications and changes in patient status (e.g. death and withdrawal from the study) are required to be reported upon occurrence. This active surveillance model ensures a robust dataset for effectively monitoring product performance.

Patients are eligible for enrollment if:

- Patient is intended to be implanted or has been implanted with a Medtronic market-released cardiac lead connected to a market-released CRT, ICD, or IPG device, and the lead is used for a pacing, sensing, or defibrillation application, or
- Patient participated in a qualifying investigational study of a Medtronic cardiac rhythm product that is now market-released; complete implant and follow-up data are available; and the data can be appropriately and legally released

Each site is required to inform Medtronic whenever a lead event has occurred, a lead is modified, or when a patient is no longer participating. Timely, accurate, and complete reporting and analysis of safety information for surveillance is crucial for the protection of patients, clinicians, and the sponsor. Medtronic continually evaluates the quality and integrity of the data through a combination of on-site and centralized monitoring activities.

Lead Complications

Chronic lead performance is characterized by estimating lead related complication free survival probabilities. For analysis purposes, the complication criteria, which align with the AdvaMed 'Industry Guidance for Uniform Reporting of Clinical Performance of Cardiac Rhythm Management Pulse Generators and Leads', are defined below. These criteria do not, however, enable a lead integrity or "hardware" failure to be conclusively differentiated from other clinical events such as an undetected lead dislodgement, perforation, or concurrent pulse generator failure manifested as a sensing or capture problem.

All reported lead-related adverse events are classified by the reporting investigator and are adjudicated by an independent event adjudication committee¹. A lead-related event with at least one of the following classifications that is adjudicated by the committee as a complication and occurs more than 30 days after implant is considered a product performance event and will contribute to the survival analysis endpoint. Events with an onset date of 30 days or less after the implant are considered procedure related and therefore are not included as product performance events.

Product performance events include, but are not limited to:

- Failure to capture
- Failure to sense/undersensing
- Oversensing
- Elevated pacing thresholds
- Abnormal pacing impedance (based on lead model, but normal range is typically 200 2,000 ohms)
- Abnormal defibrillation impedance (based on lead model, but normal range is typically 20 200 ohms)
- Lead Insulation breach
- Lead Conductor fracture, confirmed electrically, visually or radiographically
- Extracardiac stimulation
- Cardiac perforation
- Lead dislodgement
- Structural Lead Failure

Data Analysis Methods

The performance of leads is expressed in terms of lead survival estimates, where "survival" refers to the function of the lead, not the survival of the patient. These survival estimates are intended to illustrate the probability that a lead will survive for a given number of years without a chronic lead-related complication.

Active surveillance normally begins at the time of implant and continues until a product performance or censoring event occurs. In some cases, in the PAN Registry, active surveillance of a device starts after the device was implanted. The survival probability of such device is conditional on survival to the time when the device enters the Registry. This phenomenon is called Left-truncation². PPR lead survival analysis is estimated using the Kaplan-Meier method, a statistical method to incorporate data from these retrospectively enrolled devices, left-truncated data, was applied. The statistical technique uses data from existing devices while appropriately adjusting the device survival curves for the time the device was not actively followed in the registry. Thus, in some cases sample sizes may fluctuate from one time interval to the next interval.

On the following pages, each graph includes a survival curve for each lead model. The survival estimates is the probability that a lead is free of a product performance event at a given time point. For example, if a survival probability is 95% after 5 years of service, then the lead has a 5% chance of experiencing a lead-related complication in the first 5 years following implant.

The data in the tables is rounded to the nearest tenth of one percent. Occasionally, a graph may show 100% survival, but have one or more complications. This occurs because even with the complications, the data rounds to 100%.

The survival curves are statistical estimates. As sample size increases and performance experience accumulates, the estimation improves. Confidence intervals are provided as a way to indicate the degree of certainty of the estimates. Greenwood's formula is used to calculate the standard errors, and the log-log method is used to produce the 2-sided 95% confidence bounds.

Since the survival estimate can become very imprecise with small effective sample sizes, Medtronic truncates the survival curve when the number of leads entering an interval is less than 50 leads. When the number of leads entering an interval reaches 50, the next data point is added to the survival curve. For those lead models that do not have sufficient sample size, a survival curve will not be presented.

Definition of Analysis Dataset

The survival estimates are derived from all device components successfully enrolled as of the data received cut-off date (e.g. date of data entry at a study site). The number of enrollments is listed for each lead model.

This sample is considered to be representative of the worldwide population, and therefore the survival estimates shown should be representative of the performance worldwide of these models.

Criteria for Model Inclusion

Survival probabilities and the associated study information for a model or model family will be published when more than 100 leads have been enrolled and no fewer than 50 leads followed for at least 6 months. Medtronic, at its discretion, may stop providing updated performance information on lead models that received original US market-release approval 20 or more years ago.

Returned Product Analysis Results

Although the returned product analysis data is not used to generate the survival estimates, the data provides valuable insight into the causes of lead malfunction.

For reporting returned product analysis results, Medtronic CRM considers a lead as having malfunctioned whenever the analysis shows that any parameter was outside the performance limits established by Medtronic while implanted and in service. To be considered a malfunction for returned product analysis reporting, the lead must have been returned to Medtronic and analyzed.

The results of the analysis are presented in four categories. The lead reporting categories are:

Conductor Fracture: Conductor malfunction with complete or intermittent loss of continuity that could interrupt current flow (e.g., fractured conductors), including those associated with clavicle flex fatigue or crush damage.

Insulation Breach: A malfunction of the insulation allowing inappropriate entry of body fluids or inappropriate current flow between the conductors, or between the conductor and the body. Examples include cuts, tears, depressions, abrasions, and material degradation.

Crimps/Welds/Bonds: Any malfunction in a conductor or lead body associated with a point of connection.

Other: Malfunctions of specific lead mechanical attributes, such as sensors, connectors, seal rings, or malfunction modes not included in the three categories above.

A lead subject to a safety advisory is not considered to have malfunctioned unless it has been returned to Medtronic CRM and found, through analysis, to actually have performed outside the performance limits established by Medtronic.

For leads designed for either ventricular or atrial use, the numbers listed in the Returned Product Analysis tables include both.

The numbers of malfunctions listed in the Returned Product Analysis tables are the actual numbers confirmed in the returned product analysis. The numbers of complications listed in the complications tables are the actual numbers observed in the PSR centers around the world.

US Reports of Acute Lead Observations (Occurring within First Month of Service)

In the first weeks following lead implantation, physiologic responses and lead performance can vary until long-term lead stability is attained. Acute (defined as the first month after implant) lead performance may be subject to a number of factors, including patient-specific anatomy, clinical conditions and/or varying implant conditions/techniques. After a period of time, the implant and the lead performance stabilizes. It is for this reason that the Product Surveillance Registry results, which are intended to measure long-term performance, do not include complications that occur within the first 30 days after implant.

Information about the clinical experience in the first month of service is included in our reporting. The source for this information is Medtronic's complaint handling system database. The information is summarized in tables titled "US Reports of Acute Lead Observations."

Each Event Report received by Medtronic's complaint handling system is assigned one or more Reason for Report codes based on the information received. The Reason for Report codes have been grouped into Acute Lead Observation categories. The categories used for this product performance reporting are drawn from the "FDA Guidance for Submission of Research and Marketing Applications for Permanent Pacemaker Leads and for Pacemaker Lead Adapter 510(k) Submissions." The categories are:

- Cardiac Perforation
- Conductor Fracture
- Lead Dislodgement
- Failure to Capture
- Oversensing
- Failure to Sense
- Insulation Breach
- Impedance Abnormal
- Extracardiac Stimulation
- Unspecified

Although multiple observations are possible for any given lead, only one observation is reported per lead. The observation reported is the observation highest on the list. For example, if an Event Report includes observations for both Lead Dislodgement and Failure to Sense, Lead Dislodgement is reported.

The lead event reported to Medtronic may or may not have involved clinical action or product returned to Medtronic. The lead may have remained implanted and in service.

Estimated Number of Implanted and Active Leads in the United States

In addition to providing the number of leads enrolled in the PSR, we also provide the number of leads registered as implanted and the number remaining active in the United States based on the status recorded in the Medtronic Device Registration Tracking Application (DTrak).

Footnotes:

¹During the evolution of SLS, event adjudication was transitioned from a Medtronic technical review committee to an independent event adjudication committee in 2011. Data analyses include adjudication using both methods.

²Klein, John P., Moeschberger, Melvin L. Survival Analysis Techniques for Censored and Truncated Data, New York: Springer-Verlag New York, Inc., 1997.

3830 SelectSecure US Market Release 03Aug2005 **US Returned Product Analysis US Acute Lead Observations** CE Approval 31Jan2003 Conductor Fracture Cardiac Perforation 41 86 Registered USA Implants 259,709 Insulation Breach 111 Conductor Fracture 5 Estimated Active USA Implants 225,918 Crimp/Weld/Bond 0 Extra Cardiac Stimulation 12 Fixation Type Fixed Screw Other 23 Failure to Capture 664 Pace Sense Polarity Bipolar Failure to Sense 103 Steroid Indicator Yes Impedance Out of Range 61 Insulation Breach 2 Lead Dislodgement 855

Atrial Placement

Product Surveillance Registry Results

Number of Leads Enrolled in Study	1,841
Cumulative Months of Follow-Up	93,107
Number of Leads Active in Study	667

Qualifying Complications

Cardiac Perforation	1
Conductor Fracture	3
Extra Cardiac Stimulation	1
Failure to Capture	4
Failure to Sense	3

19

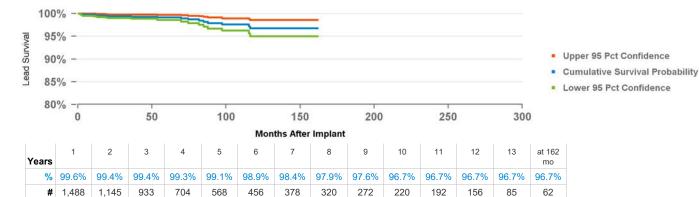
1	Impedance Out of Range	2
3	Insulation (not further defined)	1
1	Lead Dislodgement	4

Oversensing

Unspecified Clinical Failure

133

2



His Bundle Placement

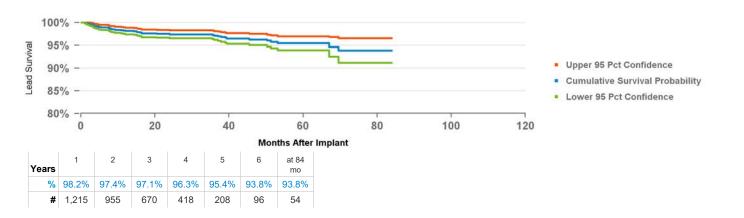
Product Surveillance Registry Results

Number of Leads Enrolled in Study	1,506
Cumulative Months of Follow-Up	51,303
Number of Leads Active in Study	916

Qualifying Complications

Extra Cardiac	Stimulation
Failure to Cap	ture
Failure to Sen	se

1	Lead Dislodgement	5
33	Oversensing	1
3	Other	3



Left Bundle Placement

Product Surveillance Registry Results

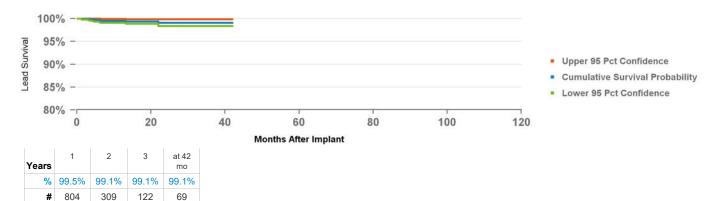
Number of Leads Enrolled in Study2,154Cumulative Months of Follow-Up21,713Number of Leads Active in Study1,926

Qualifying Complications

Failure to Capture

8

Impedance Out of Range
Lead Dislodgement



Ventricular Placement

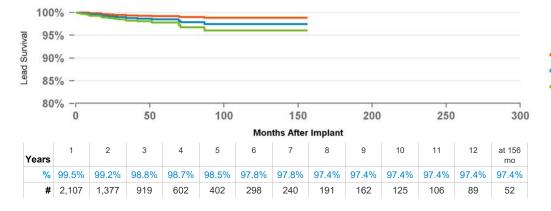
Product Surveillance Registry Results

Number of Leads Enrolled in Study2,602Cumulative Months of Follow-Up93,014Number of Leads Active in Study1,551

Qualifying Complications

Failure to Capture

2513 Impedance Out of Range Lead Dislodgement Other



- Cumulative Survival Probability
- Lower 95 Pct Confidence

4074 CapSure Sense

US Market Release	23Jun2002	US Returned Product Analysis US A		US Returned Product Analysis US Acu		US Returned Product Analysis US Acute Lead Obser		US Acute Lead Observation)bservations	
CE Approval	01Feb2002	Conductor Fracture	16	Cardiac Perforation	36					
Registered USA Implants	157,705	Insulation Breach	63	Conductor Fracture	2					
Estimated Active USA Implants	76,257	Crimp/Weld/Bond	0	Extra Cardiac Stimulation	4					
Fixation Type	Tines	Other	0	Failure to Capture	196					
Pace Sense Polarity	Bipolar			Failure to Sense	19					
Steroid Indicator	Yes			Impedance Out of Range	14					
				Lead Dislodgement	213					
				Oversensing	9					

Atrial Placement

Product Surveillance Registry Results

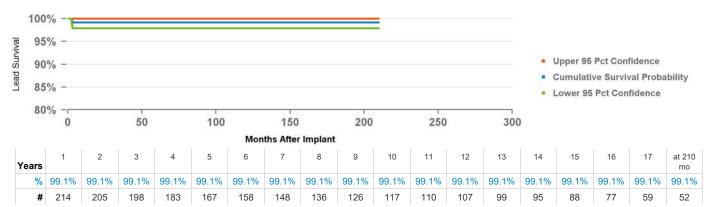
Number of Leads Enrolled in Study227Cumulative Months of Follow-Up29,664Number of Leads Active in Study56

Qualifying Complications

Failure to Sense

2

Lead Dislodgement 1



Ventricular Placement

Product Surveillance Registry Results

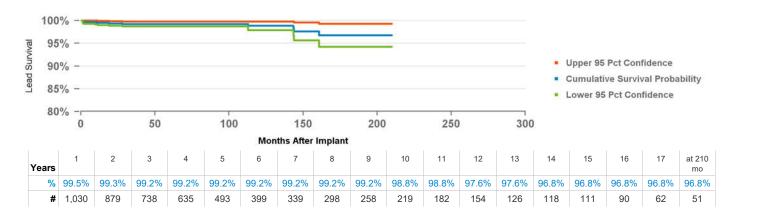
Number of Leads Enrolled in Study 1,192
Cumulative Months of Follow-Up 81,246
Number of Leads Active in Study 142

Qualifying Complications

Conductor Fracture Failure to Capture

12

1 Impedance Out of Range 2
4 Insulation (not further defined) 2
Lead Dislodgement 2
Other 1



4076 CapSureFix Novus

US Market Release	25Feb2004
CE Approval	14Jun2004
Registered USA Implants	845,596
Estimated Active USA Implants	496,060
Fixation Type	Active Screw Ir
Pace Sense Polarity	Bipolar
Steroid Indicator	Yes

US Returned Product Analysis

Conductor Fracture	134
Insulation Breach	231
Crimp/Weld/Bond	2
Other	23

US Acute Lead Observations

Cardiac Perforation	284
Conductor Fracture	11
Extra Cardiac Stimulation	28
Failure to Capture	435
Failure to Sense	306
Impedance Out of Range	77
Insulation Breach	2
Lead Dislodgement	966
Oversensing	171
Unspecified Clinical Failure	10

Atrial Placement

Product Surveillance Registry Results

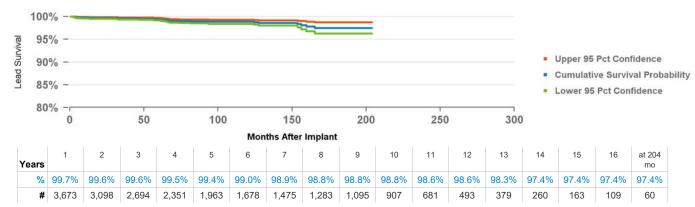
Number of Leads Enrolled in Study	5,106
Cumulative Months of Follow-Up	292,446
Number of Leads Active in Study	1,742

Qualifying Complications

Cardiac Perforation	
Conductor Fracture	
Failure to Capture	
Failure to Sense	

38

2	Insulation (not further defined)	3
3	Lead Dislodgement	14
9	Oversensing	2
2	Otto	0



Ventricular Placement

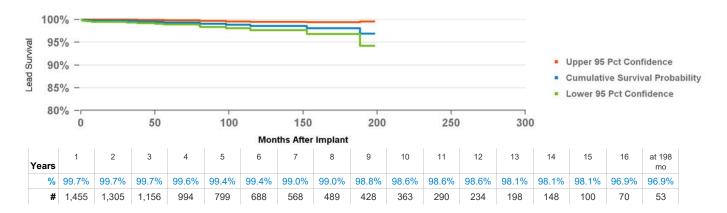
Product Surveillance Registry Results

Number of Leads Enrolled in Study	1,778
Cumulative Months of Follow-Up	121,366
Number of Leads Active in Study	279

Qualifying Complications

Conductor Fracture			
Extra Cardiac Stimulation			
Failure to Capture			
Failure to Sense			

1	Impedance Out of Range	2
1	Lead Dislodgement	1
6	Other	2
1		



4092 CapSure SP Novus

US Market Release	17Sep1998	US Returned Product Analysis		US Acute Lead Observation	ns
CE Approval	15Apr1998	Conductor Fracture	21	Cardiac Perforation	4
Registered USA Implants	186,243	Insulation Breach	101	Conductor Fracture	4
Estimated Active USA Implants	36,083	Crimp/Weld/Bond	0	Extra Cardiac Stimulation	1
Fixation Type	Tines	Other	0	Failure to Capture	35
Pace Sense Polarity	Bipolar			Impedance Out of Range	2
Steroid Indicator	Yes			Insulation Breach	1
				Lead Dislodgement	35
				Oversensing	1
				Unspecified Clinical Failure	1

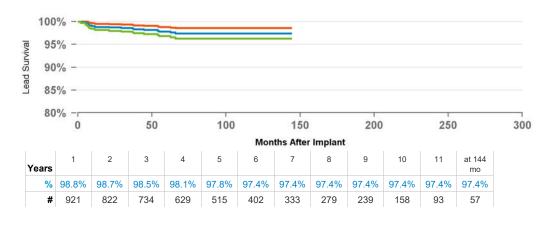
Product Surveillance Registry Results

Number of Leads Enrolled in Study	1,202
Cumulative Months of Follow-Up	70,291
Number of Leads Active in Study	8

Qualifying Complications

Conductor Fracture
Extra Cardiac Stimulation
Failure to Capture

3	Impedance Out of Range	1
1	Lead Dislodgement	4
12		



- Upper 95 Pct Confidence
- Cumulative Survival Probability
- Lower 95 Pct Confidence

4574 CapSure Sense

US Market Release	23Jun2002
CE Approval	01Feb2002
Registered USA Implants	124,110
Estimated Active USA Implants	71,424
Fixation Type	J-shape, tines
Pace Sense Polarity	Bipolar
Steroid Indicator	Yes

US Returned Product Analysis

Conductor Fracture	14
Insulation Breach	26
Crimp/Weld/Bond	0
Other	0

US Acute Lead Observations

Cardiac Perforation	4
Conductor Fracture	1
Extra Cardiac Stimulation	1
Failure to Capture	187
Failure to Sense	91
Impedance Out of Range	12
Lead Dislodgement	290
Oversensing	18
Unspecified Clinical Failure	4

Product Surveillance Registry Results

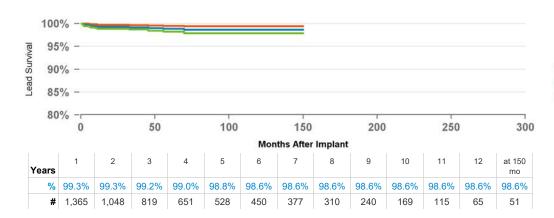
Number of Leads Enrolled in Study	1,777
Cumulative Months of Follow-Up	84,545
Number of Leads Active in Study	653

Qualifying Complications

Conductor Fracture
Failure to Capture

152 Lead Dislodgem

Lead Dislodgement 7



- Upper 95 Pct Confidence
- Cumulative Survival Probability
- Lower 95 Pct Confidence

4592 CapSure SP Novus US Market Release 05Oct1998 **US Returned Product Analysis US Acute Lead Observations** CE Approval 15Apr1998 Conductor Fracture 17 Failure to Capture 10 Registered USA Implants 89,801 Insulation Breach 34 Failure to Sense 2 Estimated Active USA Implants 19,678 Crimp/Weld/Bond 0 Insulation Breach 1 Fixation Type J-shape, tines Other 0 Lead Dislodgement 37 Bipolar Pace Sense Polarity Oversensing 2

Product Surveillance Registry Results

Steroid Indicator

Number of Leads Enrolled in Study	369
Cumulative Months of Follow-Up	23,033
Number of Leads Active in Study	26

Yes

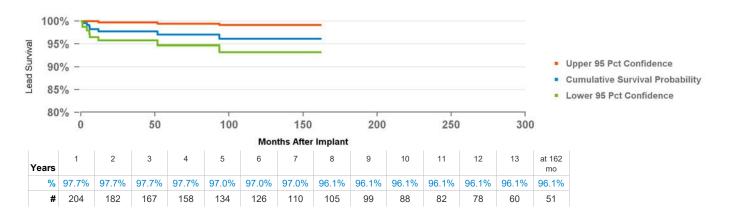
Qualifying Complications

	•	•
Failure	to	Capture
Failure	to	Sense

9

4	Lead Dislodgement	3
1	Other	1

Unspecified Clinical Failure



CapSure Z Novus 5054

US Market Release	03Jun1998	US Returned Product Analysis		US Acute Lead Observation	ns
CE Approval	05Jun1997	Conductor Fracture	16	Cardiac Perforation	2
Registered USA Implants	100,058	Insulation Breach	47	Conductor Fracture	2
Estimated Active USA Implants	18,278	Crimp/Weld/Bond	1	Failure to Capture	23
Fixation Type	Tines	Other	0	Impedance Out of Range	4
Pace Sense Polarity	Bipolar			Insulation Breach	1
Steroid Indicator	Yes			Lead Dislodgement	30
				Unspecified Clinical Failure	9

Atrial Placement

Product Surveillance Registry Results

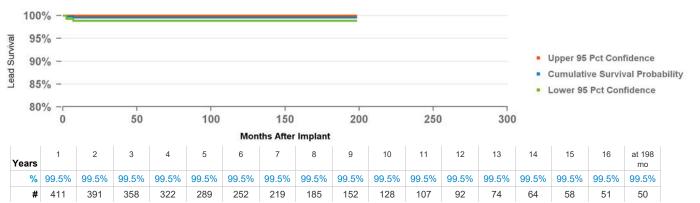
Number of Leads Enrolled in Study 425 Cumulative Months of Follow-Up 42,354 Number of Leads Active in Study 18

Qualifying Complications

Failure to Capture

2 Lead Dislodgement

3



Ventricular Placement

Product Surveillance Registry Results

Number of Leads Enrolled in Study	992
Cumulative Months of Follow-Up	35,826
Number of Leads Active in Study	13

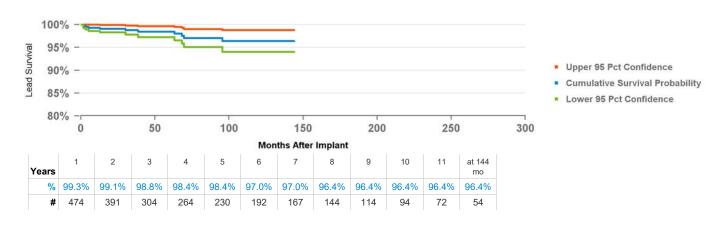
Qualifying Complications

Failure to Capture Failure to Sense

13

Impedance Out of Range Lead Dislodgement Other

1 2



5076 CapSureFix Novus

US Market Release	31Aug2000
CE Approval	12Aug1999
Registered USA Implants	3,442,082
Estimated Active USA Implants	1,961,260
Fixation Type	Active Screw In
Pace Sense Polarity	Bipolar
Steroid Indicator	Yes

US Returned Product Analysis

Conductor Fracture	1,571
Insulation Breach	1,666
Crimp/Weld/Bond	4
Other	206

US Acute Lead Observations

Cardiac Perforation	1,746
Conductor Fracture	35
Extra Cardiac Stimulation	115
Failure to Capture	2,722
Failure to Sense	1,723
Impedance Out of Range	468
Insulation Breach	16
Lead Dislodgement	5,589
Oversensing	976
Unspecified Clinical Failure	26

Atrial Placement

Product Surveillance Registry Results

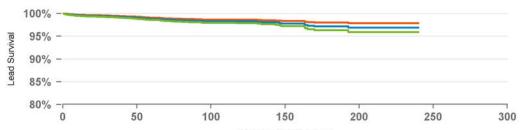
Number of Leads Enrolled in Study	14,182
Cumulative Months of Follow-Up	673,573
Number of Leads Active in Study	5,402

Qualifying Complications

Cardiac Perforation
Conductor Fracture
Extra Cardiac Stimulation
Failure to Capture
Failure to Sense

123

2	Impedance Out of Range	13
13	Insulation (not further defined)	3
3	Lead Dislodgement	47
18	Oversensing	3
12	Other	9



	Unner	95	Pct	Confidence
•	opper	20	LCI	Comindence

- Cumulative Survival Probability
- Lower 95 Pct Confidence

Months After Implant																						
1 2 3 4 5 6 7 8 9 10 11 12 13 14 15 16 17 18								18	19	at 240												
	Years																				mo	
	%	99.6%	99.4%	99.3%	99.1%	98.8%	98.6%	98.4%	98.3%	98.3%	98.2%	98.2%	98.0%	97.8%	97.3%	97.1%	97.1%	96.9%	96.9%	96.9%	96.9%	
	#	9,581	7,580	6,305	5,300	4,416	3,686	3,096	2,458	1,948	1,579	1,236	953	748	577	458	381	291	200	118	68	

Ventricular Placement

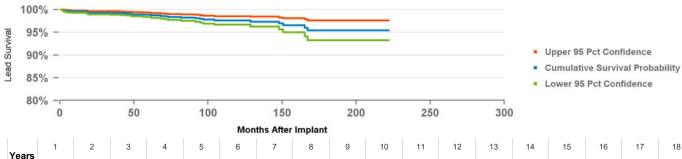
Product Surveillance Registry Results

Number of Leads Enrolled in Study	3,431
Cumulative Months of Follow-Up	170,887
Number of Leads Active in Study	578

Qualifying Complications

Cardiac Perforation
Conductor Fracture
Failure to Capture
Failure to Sense

1	Impedance Out of Range	4
9	Insulation (not further defined)	1
13	Lead Dislodgement	5
1	Oversensing	2
	Other	2



	1	2	3	4	5	6	7	8	9	10	11	12	13	14	15	16	17	18	at 222	
Years																			mo	
%	99.5%	99.3%	99.2%	99.0%	98.9%	98.5%	98.2%	97.9%	97.6%	97.6%	97.3%	97.3%	96.5%	95.4%	95.4%	95.4%	95.4%	95.4%	95.4%	
#	2,256	1,929	1,627	1,343	1,108	883	724	605	527	456	353	279	207	167	138	118	90	66	57	

5086MRI CapsureFix Novus MRI

US Market Release	08Feb2011	US Returned Product A	Inalysis	US Acute Lead Observations		
CE Approval	21Jan2009	Conductor Fracture	119	Cardiac Perforation	214	
Registered USA Implants	207,819	Insulation Breach	216	Conductor Fracture	4	
Estimated Active USA Implants	125,891	Crimp/Weld/Bond	0	Extra Cardiac Stimulation	18	
Fixation Type	Active Screw In	Other	12	Failure to Capture	144	
Pace Sense Polarity	Bipolar			Failure to Sense	29	
Steroid Indicator	Yes			Impedance Out of Range	9	
				Insulation Breach	2	
				Lead Dislodgement	311	

Atrial Placement

Product Surveillance Registry Results

Number of Leads Enrolled in Study	3,142
Cumulative Months of Follow-Up	147,112
Number of Leads Active in Study	1,288

Qualifying Complications

Conductor Fracture
Failure to Capture

21

3	Lead Dislodgement	12
3	Oversensing	2
	Other	1

Oversensing

31



Ventricular Placement

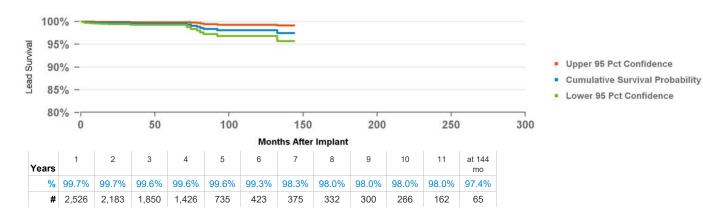
Product Surveillance Registry Results

Number of Leads Enrolled in Study	3,073
Cumulative Months of Follow-Up	144,430
Number of Leads Active in Study	1,268

Qualifying Complications

Conductor Fracture
Failure to Capture
Failure to Sense

3	Impedance Out of Range	2
8	Lead Dislodgement	3
1	Oversensing	2
	Other	1



5092 CapSure SP Novus

US Market Release	03Jun1998	US Returned Product A	nalysis	US Acute Lead Observations		
CE Approval	25Sep1997	Conductor Fracture	28	Cardiac Perforation	7	
Registered USA Implants	141,706	Insulation Breach	73	Conductor Fracture	3	
Estimated Active USA Implants	29,054	Crimp/Weld/Bond	0	Extra Cardiac Stimulation	3	
Fixation Type	Tines	Other	1	Failure to Capture	49	
Pace Sense Polarity	Bipolar			Failure to Sense	7	
Steroid Indicator	Yes			Impedance Out of Range	1	
				Insulation Breach	3	
				Lead Dislodgement	72	
				Oversensing	1	
				Unspecified Clinical Failure	8	

Product Surveillance Registry Results

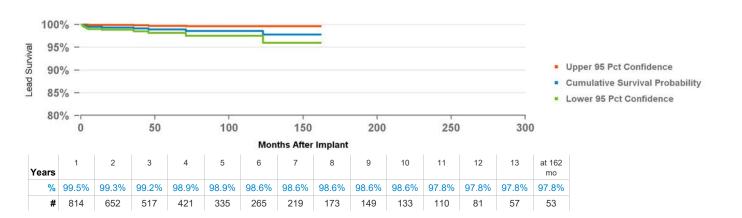
Number of Leads Enrolled in Study	1,218
Cumulative Months of Follow-Up	54,736
Number of Leads Active in Study	13

Qualifying Complications

Extra Cardiac Stimulation
Failure to Capture

10

1 Impedance Out of Range 1
3 Lead Dislodgement 5



5554 CapSure Z Novus US Market Release 03Jun1998 **US Returned Product Analysis US Acute Lead Observations** CE Approval 05Jun1997 Conductor Fracture 24 Conductor Fracture 1 Registered USA Implants 64,868 Insulation Breach 44 Failure to Capture 31 Estimated Active USA Implants 14,258 Crimp/Weld/Bond 0 Failure to Sense 2 Fixation Type Tines Other 0 Impedance Out of Range 1 Pace Sense Polarity Bipolar Lead Dislodgement 39 Steroid Indicator Yes Unspecified Clinical Failure 3

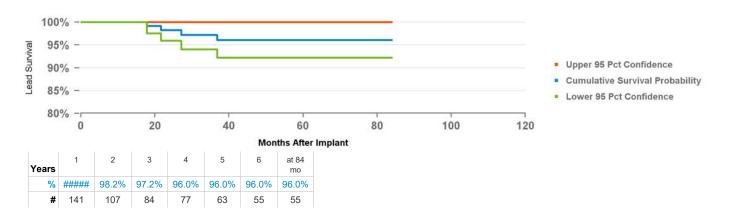
Product Surveillance Registry Results

Number of Leads Enrolled in Study	370
Cumulative Months of Follow-Up	9,500
Number of Leads Active in Study	9

Qualifying Complications

Failure to Capture

2	Impedance Out of Range	1
	Lead Dislodgement	1
	Oversensing	1



CapSure SP Novus 5592

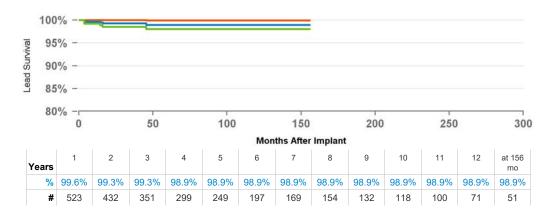
US Market Release	03Jun1998	US Returned Product Analysis		US Acute Lead Observation	ns
CE Approval	25Sep1997	Conductor Fracture	7	Cardiac Perforation	1
Registered USA Implants	37,335	Insulation Breach	7	Failure to Capture	4
Estimated Active USA Implants	9,806	Crimp/Weld/Bond	0	Failure to Sense	3
Fixation Type	Tines	Other	0	Lead Dislodgement	43
Pace Sense Polarity	Bipolar			Oversensing	1
Steroid Indicator	Yes			Unspecified Clinical Failure	1

Product Surveillance Registry Results

Number of Leads Enrolled in Study	722
Cumulative Months of Follow-Up	39,777
Number of Leads Active in Study	27

Qualifying Complications

5 Failure to Capture 3 Lead Dislodgement 2



- Upper 95 Pct Confidence
- Cumulative Survival Probability
- Lower 95 Pct Confidence

CapSure SP Novus

US Market Release	25Jun2001	US Returned Product A	nalysis	US Acute Lead Observation	กร
CE Approval	23Mar2001	Conductor Fracture	16	Failure to Capture	4
Registered USA Implants	17,612	Insulation Breach	18	Lead Dislodgement	14
Estimated Active USA Implants	5,469	Crimp/Weld/Bond	0	Unspecified Clinical Failure	2
Fixation Type	Tines	Other	0		
Pace Sense Polarity	Bipolar				

Product Surveillance Registry Results

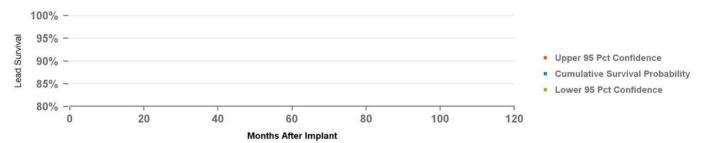
Steroid Indicator

Number of Leads Enrolled in Study	43
Cumulative Months of Follow-Up	4,691
Number of Leads Active in Study	11

Yes

Qualifying Complications

3 Conductor Fracture Insulation (not further defined) Oversensing



Years	at 0 mo
%	#####
#	

6721 Epicardial Patch

US Market Release	31Mar1994	US Returned Product Analysis		US Acute Lead Observatio	ns
CE Approval	01Jan1993	Conductor Fracture	15	Cardiac Perforation	1
Registered USA Implants	3,428	Insulation Breach	1	Conductor Fracture	2
Estimated Active USA Implants	863	Crimp/Weld/Bond	0	Failure to Capture	4
Fixation Type	Suture	Other	0	Failure to Sense	2
Pace Sense Polarity	n/a			Impedance Out of Range	24
Steroid Indicator	None			Oversensing	1

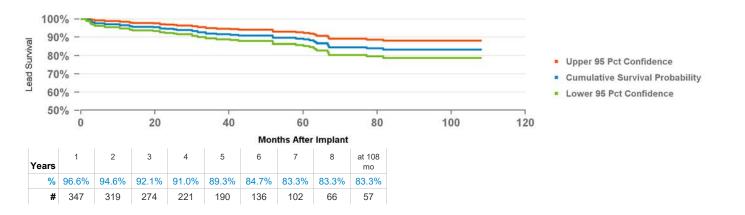
Product Surveillance Registry Results

Number of Leads Enrolled in Study	417
Cumulative Months of Follow-Up	24,217
Number of Leads Active in Study	5

Qualifying Complications

Conductor Fracture
Failure to Capture

21	Impedance Out of Range	4
8	Insulation (not further defined)	2
	Other	16



Sprint Fidelis 6930

US Market Release 02Sep2004 CE Approval Registered USA Implants 354 Estimated Active USA Implants 63 Fixation Type Tines Pace Sense Polarity True Bipolar/One Coil

Yes

US Returned Product Analysis

Conductor Fracture 5 Insulation Breach 0 Crimp/Weld/Bond 0 Other 0

US Acute Lead Observations

1

Unspecified Clinical Failure

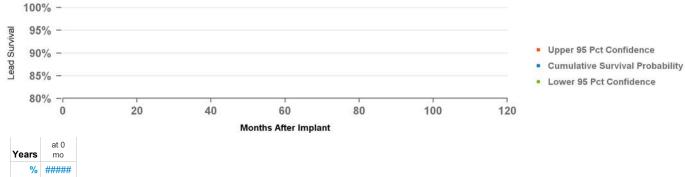
Product Surveillance Registry Results

Number of Leads Enrolled in Study 4 Cumulative Months of Follow-Up 332

Number of Leads Active in Study

#

Steroid Indicator



Sprint Fidelis 6931 US Market Release 02Sep2004 **US Returned Product Analysis US Acute Lead Observations** CE Approval Conductor Fracture 670 Cardiac Perforation 1 Registered USA Implants 8,081 2 Insulation Breach 1 Conductor Fracture Estimated Active USA Implants 1,161 Crimp/Weld/Bond 0 Failure to Capture 1 Fixation Type Active Screw In Other 5 Failure to Sense 1 Pace Sense Polarity True Bipolar/One Coil Lead Dislodgement 1 Steroid Indicator Yes Oversensing 3

Product Surveillance Registry Results

Number of Leads Enrolled in Study	311
Cumulative Months of Follow-Up	18,133
Number of Leads Active in Study	7

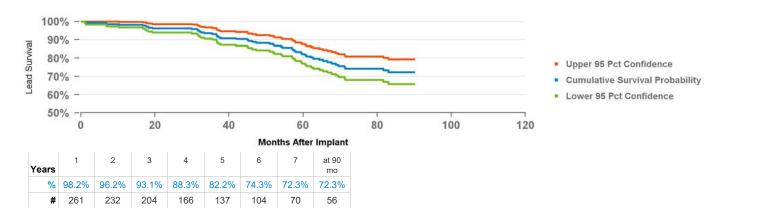
Qualifying Complications

, , ,
Conductor Fracture
Failure to Capture
Failure to Sense

59

36	Impedance Out of Range	10
3	Lead Dislodgement	2
1	Oversensing	7

Unspecified Clinical Failure



6935 Sprint Quattro Secure S

US Market Release	01Nov2008
CE Approval	31Mar2008
Registered USA Implants	68,869
Estimated Active USA Implants	40,278
Fixation Type	Active Screw In
Pace Sense Polarity	True Bipolar/One Coil
Steroid Indicator	Yes

US Returned Product Analysis

Conductor Fracture	492
Insulation Breach	14
Crimp/Weld/Bond	0
Other	44

US Acute Lead Observations

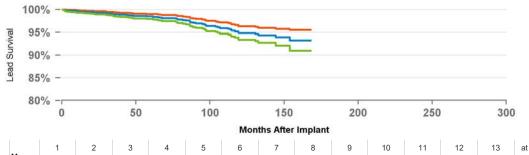
Cardiac Perforation	30
Conductor Fracture	3
Extra Cardiac Stimulation	2
Failure to Capture	42
Failure to Sense	16
Impedance Out of Range	34
Insulation Breach	1
Lead Dislodgement	68
Oversensing	70
Unspecified Clinical Failure	5

Product Surveillance Registry Results

Number of Leads Enrolled in Study	3,023
Cumulative Months of Follow-Up	172,950
Number of Leads Active in Study	608

Qualifying Complications

Cardiac Perforation	1	Impedance Out of Range	8
Conductor Fracture	26	Lead Dislodgement	8
Extra Cardiac Stimulation	1	Oversensing	9
Failure to Capture	8	Other	6
Failure to Sense	1	Unspecified Clinical Failure	1



 Upper 95 	Pct Confidence
------------------------------	----------------

- Cumulative Survival Probability
- Lower 95 Pct Confidence

Υ	ears	1	2	3	4	5	6	7	8	9	10	11	12	13	at 168 mo
	%	99.5%	99.3%	98.9%	98.6%	98.5%	98.1%	97.5%	96.8%	95.9%	94.8%	94.6%	94.3%	93.2%	93.2%
	#	2,476	2,022	1,657	1,352	1,152	997	832	702	601	496	376	223	118	51

6935M Sprint Quattro Secure S

US Market Release	02Aug2012	US Returned Product Analysis		US Acute Lead Observations	
CE Approval	12Jul2012	Conductor Fracture	844	Cardiac Perforation	
Registered USA Implants	414,235	Insulation Breach	37	Conductor Fracture	
Estimated Active USA Implants	341,226	Crimp/Weld/Bond	2	Extra Cardiac Stimulation	
Fixation Type	Active Screw In	Other	104	Failure to Capture	
Pace Sense Polarity	True Bipolar/One Coil			Failure to Sense	
Steroid Indicator	Yes			Impedance Out of Range	
				Insulation Breach	
				Lead Dislodgement	

Product Surveillance Registry Results

Number of Leads Enrolled in Study	10,085
Cumulative Months of Follow-Up	424,941
Number of Leads Active in Study	4,231

Qualifying Complications

Cardiac Perforation
Conductor Fracture
Extra Cardiac Stimulation
Failure to Capture

Failure to Sense

119

2	Impedance Out of Range	10
54	Insulation (not further defined)	3
1	Lead Dislodgement	23
14	Oversensing	5
1	Other	5
	Unspecified Clinical Failure	1

Oversensing

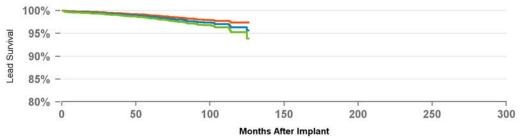
210

22 34

496 177

147 3

694



		Months After Implant										
Years	1	2	3	4	5	6	7	8	9	10	at 126 mo	
%	99.6%	99.5%	99.2%	99.0%	98.6%	98.2%	97.8%	97.4%	97.0%	96.3%	95.6%	
#	7,654	5,730	4,571	3,762	3,092	2,475	1,865	1,116	563	234	115	

- Upper 95 Pct Confidence
- Cumulative Survival Probability
- Lower 95 Pct Confidence

6937A Transvene SVC-CS

US Market Release	06Apr2001	US Returned Product Analysis		US Acute Lead Observations	
CE Approval		Conductor Fracture	6	Cardiac Perforation	1
Registered USA Implants	3,126	Insulation Breach	0	Conductor Fracture	3
Estimated Active USA Implants	1,611	Crimp/Weld/Bond	0	Impedance Out of Range	2
Fixation Type	Passive	Other	0	Lead Dislodgement	1
Pace Sense Polarity	One Coil			Oversensing	2
Steroid Indicator	None			Unspecified Clinical Failure	2

Product Surveillance Registry Results

119

117

114

Number of Leads Enrolled in Study	127
Cumulative Months of Follow-Up	14,560
Number of Leads Active in Study	8

109

98

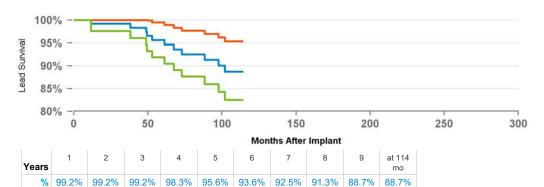
Qualifying Complications

54

Conductor Fracture

16

6	Impedance Out of Range	2
	Insulation (not further defined)	2
	Lead Dislodgement	1
	Other	1
	Unspecified Clinical Failure	4



73

79

Upper 95 Pct Confidence

- Cumulative Survival Probability
- Lower 95 Pct Confidence

6944 Sprint Quattro

US Market Release	13Dec2000
CE Approval	05Nov1999
Registered USA Implants	44,865
Estimated Active USA Implants	11,792
Fixation Type	Tines
Pace Sense Polarity	True Bipolar/Two Coils
Steroid Indicator	Yes

US Returned Product Analysis

Conductor Fracture	237
Insulation Breach	4
Crimp/Weld/Bond	1
Other	4

US Acute Lead Observations

Conductor Fracture	2
Failure to Capture	17
Failure to Sense	3
Impedance Out of Range	10
Lead Dislodgement	24
Oversensing	18
Unspecified Clinical Failure	6

Product Surveillance Registry Results

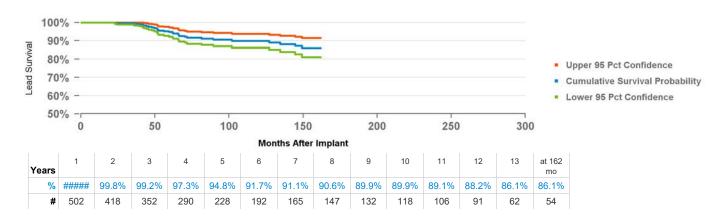
Number of Leads Enrolled in Study	
Cumulative Months of Follow-Up	
Number of Leads Active in Study	



Conductor Fracture
Failure to Capture
Failure to Sense

640 38,786 63

18	Impedance Out of Range	6
4	Oversensing	3
1	Other	1
	Unspecified Clinical Failure	1



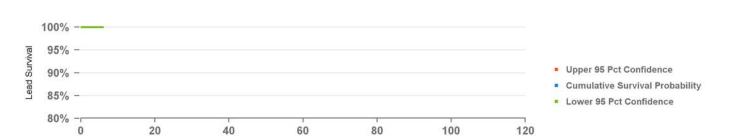
6946M Sprint Quattro

US Market Release	05Jan2016	US Returned Product Analysis		US Acute Lead Observations	
CE Approval	12Sep2013	Conductor Fracture	1	Cardiac Perforation	1
Registered USA Implants	4,556	Insulation Breach	0	Failure to Capture	6
Estimated Active USA Implants	3,959	Crimp/Weld/Bond	0	Failure to Sense	2
Fixation Type	Tines	Other	0	Impedance Out of Range	1
Pace Sense Polarity	True Bipolar/Two Coils			Lead Dislodgement	9
Steroid Indicator	Yes			Oversensing	6

Product Surveillance Registry Results

Number of Leads Enrolled in Study	62
Cumulative Months of Follow-Up	2,286
Number of Leads Active in Study	35

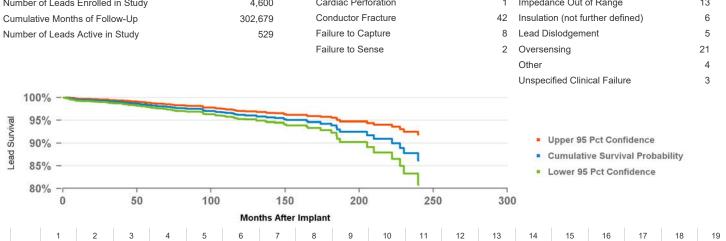
Qualifying ComplicationsConductor Fracture 1



Months After Implant

	at 6
Years	mo
%	#####
#	57

6947 **Sprint Quattro Secure** US Market Release 12Nov2001 **US Returned Product Analysis US Acute Lead Observations** CE Approval 04Oct2001 Conductor Fracture Cardiac Perforation 29 1,426 Registered USA Implants 375,691 Insulation Breach 103 Conductor Fracture 26 Estimated Active USA Implants 124,606 Crimp/Weld/Bond Extra Cardiac Stimulation 4 2 Fixation Type Active Screw In Other 197 Failure to Capture 83 True Bipolar/Two Coils Pace Sense Polarity Failure to Sense 36 Steroid Indicator Yes Impedance Out of Range 61 Insulation Breach 4 Lead Dislodgement 125 Oversensing 141 Unspecified Clinical Failure 20 **Product Surveillance Registry Results Qualifying Complications** 105 Cardiac Perforation Number of Leads Enrolled in Study Impedance Out of Range 13 4,600



months After Implant																					
.,	1	2	3	4	5	6	7	8	9	10	11	12	13	14	15	16	17	18	19	at 240	
Years																				mo	
%	99.5%	99.3%	99.0%	98.7%	98.2%	97.9%	97.5%	97.1%	96.7%	96.1%	95.9%	95.5%	95.0%	94.6%	94.3%	92.5%	92.5%	91.0%	88.9%	86.2%	
#	3,307	2,907	2,552	2,262	2,027	1,788	1,545	1,385	1,239	1,085	911	720	561	399	241	159	122	109	82	50	

6947M Sprint Quattro Secure

US Market Release	13Feb2012	US Returned Product A	nalysis	US Acute Lead Observation	ons
CE Approval	12Mar2010	Conductor Fracture	264	Cardiac Perforation	40
Registered USA Implants	139,606	Insulation Breach	15	Conductor Fracture	15
Estimated Active USA Implants	96,001	Crimp/Weld/Bond	1	Extra Cardiac Stimulation	12
Fixation Type	Active Screw In	Other	37	Failure to Capture	127
Pace Sense Polarity	True Bipolar/Two Coils			Failure to Sense	49
Steroid Indicator	Yes			Impedance Out of Range	36
				Insulation Breach	1
				Lead Dislodgement	243

Product Surveillance Registry Results

Number of Leads Enrolled in Study	2,444
Cumulative Months of Follow-Up	137,100
Number of Leads Active in Study	613

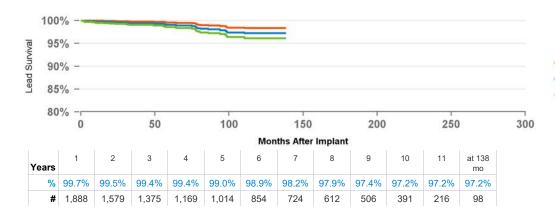
Qualifying Complications

Conductor Fracture
Failure to Capture
Failure to Sense

28

15	Impedance Out of Range	1
4	Lead Dislodgement	1
4	Oversensing	2
	Other	1

Oversensing



- Upper 95 Pct Confidence
- Cumulative Survival Probability
- Lower 95 Pct Confidence

6948	Sprint Fidelis					
US Mark	et Release	02Sep2004	US Returned Product A	Analysis	US Acute Lead Observations	
CE Appro	oval		Conductor Fracture	218	Conductor Fracture	2
Registere	ed USA Implants	10,381	Insulation Breach	3	Failure to Capture	7
Estimate	d Active USA Implants	1,634	Crimp/Weld/Bond	0	Lead Dislodgement	7
Fixation ⁻	Туре	Tines	Other	6	Oversensing	1
Pace Ser	nse Polarity	True Bipolar/Two Coils			Unspecified Clinical Failure	3
Steroid Ir	ndicator	Yes			·	

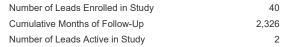
Product Surveillance Registry Results

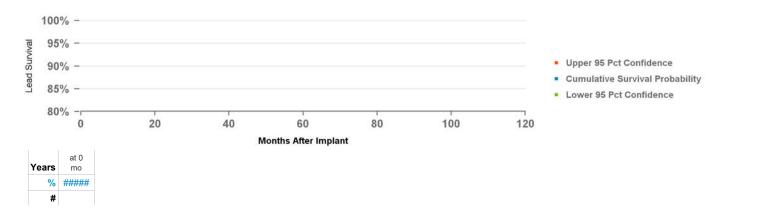
Qualifying Complications

Conductor Fracture

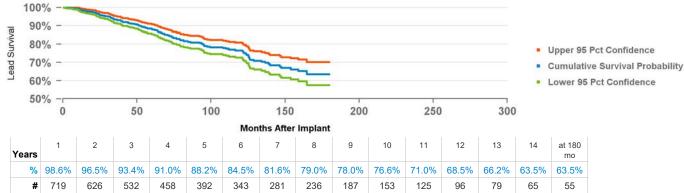
5

4 Impedance Out of Range





6949 **Sprint Fidelis** US Market Release 02Sep2004 **US Returned Product Analysis US Acute Lead Observations** CE Approval Conductor Fracture Cardiac Perforation 8,180 Registered USA Implants 186,211 Insulation Breach 37 Conductor Fracture 23,933 Estimated Active USA Implants Crimp/Weld/Bond 3 Failure to Capture Fixation Type Active Screw In Other 119 Failure to Sense True Bipolar/Two Coils Pace Sense Polarity Impedance Out of Range Steroid Indicator Yes Insulation Breach Lead Dislodgement Oversensing Unspecified Clinical Failure **Product Surveillance Registry Results Qualifying Complications** 136 Number of Leads Enrolled in Study Conductor Fracture 78 Impedance Out of Range 19 986 Failure to Capture Insulation (not further defined) 2 Cumulative Months of Follow-Up 58,066 Number of Leads Active in Study 28 Failure to Sense Lead Dislodgement 1 Oversensing 21 Other 3 Unspecified Clinical Failure 1



10

52

31

19

20

5

22

37

6996 Sub-Q Lead

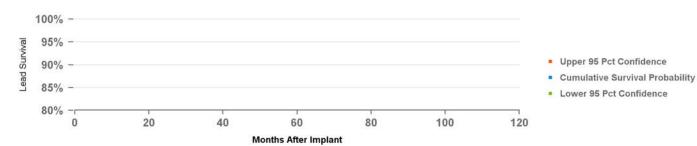
US Market Release	11Jun2001	US Returned Product A	US Acute Lead Observations		
CE Approval	19Dec1997	Conductor Fracture	39	Cardiac Perforation	1
Registered USA Implants	5,809	Insulation Breach	0	Failure to Capture	1
Estimated Active USA Implants	2,626	Crimp/Weld/Bond	0	Impedance Out of Range	19
Fixation Type	Suture on Anchor Sleeve	Other	0	Insulation Breach	1
**				Lead Dislodgement	3
Pace Sense Polarity	One Coil			Oversensing	1
Steroid Indicator	None			· ·	

Product Surveillance Registry Results

Number of Leads Enrolled in Study	56
Cumulative Months of Follow-Up	2,599
Number of Leads Active in Study	4

Qualifying Complications

Conductor Fracture 1 Impedance Out of Range



	at 0	
Years	mo	
%	#####	
#		

Attain LV

Steroid Indicator

US Market Release
CE Approval
Registered USA Implants
Estimated Active USA Implants
Fixation Type
Pace Sense Polarity

28Aug2001 **US Returned Product Analysis**

Conductor Fracture	1	
nsulation Breach	3	
Crimp/Weld/Bond	0	
Other	3	

US Acute Lead Observations

Extra Cardiac Stimulation	1
Failure to Capture	3
Failure to Sense	1
Lead Dislodgement	9

Product Surveillance Registry Results

Number of Leads Enrolled in Study	140
Cumulative Months of Follow-Up	7,260
Number of Leads Active in Study	4

11,921 977

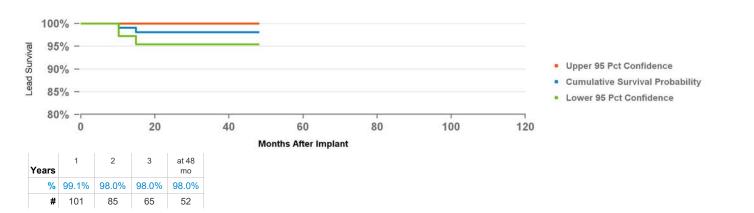
Unipolar

None

Distal Continous Curve



Failure to Capture 3



Attain OTW

4193

US Market Release	03May2002	US Returned Product A	nalysis	US Acute Lead Observation	าร
CE Approval	22Dec2000	Conductor Fracture	91	Extra Cardiac Stimulation	18
Registered USA Implants	100,665	Insulation Breach	31	Failure to Capture	11
Estimated Active USA Implants	12,101	Crimp/Weld/Bond	0	Lead Dislodgement	46
Fixation Type	Double Curve	Other	15	Oversensing	1
Pace Sense Polarity	Unipolar			Unspecified Clinical Failure	2
Steroid Indicator	Yes			·	

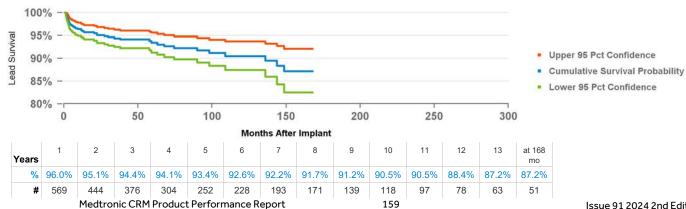
Product Surveillance Registry Results

Number of Leads Enrolled in Study	805
Cumulative Months of Follow-Up	42,652
Number of Leads Active in Study	18

Qualifying Complications

Conductor Fracture			
Extra Cardiac Stimulation			
Failure to Capture			

52		
1	Impedance Out of Range	2
10	Lead Dislodgement	16
20	Unspecified Clinical Failure	3



4194 Attain OTW

US Market Release	24Aug2004	US Returned
CE Approval	14Jul2003	Conductor Fractu
Registered USA Implants	114,258	Insulation Breach
Estimated Active USA Implants	28,425	Crimp/Weld/Bond
Fixation Type	Double Curve	Other
Pace Sense Polarity	Bipolar	
Steroid Indicator	Yes	

US Returned Product Analysis

onductor Fracture	48
sulation Breach	167
rimp/Weld/Bond	0
ther	2

US Acute Lead Observations

2
3
49
42
9
153
2
4

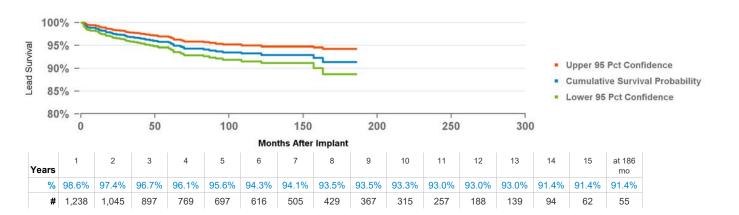
Product Surveillance Registry Results

Number of Leads Enrolled in Study	1,654
Cumulative Months of Follow-Up	100,787
Number of Leads Active in Study	144

Qualifying Complications

Conductor Fracture
Extra Cardiac Stimulation
Failure to Capture

2	Insulation (ESC)	1
11	Insulation (not further defined)	2
22	Lead Dislodgement	30



4195 Attain StarFix

US Market Release	15Aug2008	US Returned Product A	nalysis	US Acute Lead Observation	าร
CE Approval	13May2005	Conductor Fracture	10	Extra Cardiac Stimulation	30
Registered USA Implants	17,445	Insulation Breach	3	Failure to Capture	21
Estimated Active USA Implants	6,185	Crimp/Weld/Bond	0	Impedance Out of Range	4
Fination Type	Deployable Lobe	Other	2	Lead Dislodgement	30
Fixation Type	Fixation			Unspecified Clinical Failure	1
Pace Sense Polarity	Unipolar				

Product Surveillance Registry Results

Steroid Indicator

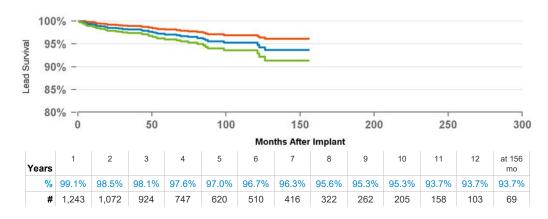
Number of Leads Enrolled in Study	1,486
Cumulative Months of Follow-Up	88,590
Number of Leads Active in Study	121

Qualifying Complications

J J	
Conductor Fracture	Э
Extra Cardiac Stim	ulation
Failure to Capture	

45

4	Impedance Out of Range	2
18	Insulation (not further defined)	6
9	Lead Dislodgement	5
	Other	1



Yes

- Upper 95 Pct Confidence
- Cumulative Survival Probability
- Lower 95 Pct Confidence

4196 Attain Ability

US Market Release	15May2009
CE Approval	24Jul2007
Registered USA Implants	69,108
Estimated Active USA Implants	27,677
Fixation Type	Double Curve
Pace Sense Polarity	Bipolar
Steroid Indicator	Yes

US Returned Product Analysis

Conductor Fracture	28
Insulation Breach	2
Crimp/Weld/Bond	0
Other	9

US Acute Lead Observations

Cardiac Perforation	3
Conductor Fracture	2
Extra Cardiac Stimulation	99
Failure to Capture	67
Failure to Sense	1
Impedance Out of Range	12
Insulation Breach	1
Lead Dislodgement	229
Oversensing	1
Unspecified Clinical Failure	2

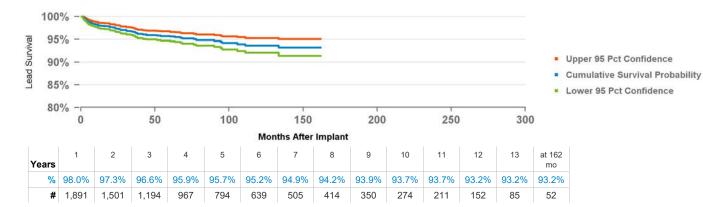
Product Surveillance Registry Results

Number of Leads Enrolled in Study	2,324
Cumulative Months of Follow-Up	121,001
Number of Leads Active in Study	192

Qualifying Complications

Conductor Fracture
Extra Cardiac Stimulation
Failure to Capture

3	Impedance Out of Range	2
17	Insulation (not further defined)	1
37	Lead Dislodgement	23
	Other	4



Attain Ability Plus 4296 US Market Release 01Apr2011 **US Returned Product Analysis US Acute Lead Observations** CE Approval 18Dec2009 2 Conductor Fracture 4 Cardiac Perforation Registered USA Implants 35,255 Insulation Breach 0 Conductor Fracture 1 Estimated Active USA Implants 17,177 Crimp/Weld/Bond 2 Extra Cardiac Stimulation 65 Fixation Type Double Curve Other 4 Failure to Capture 37 Pace Sense Polarity **Dual Electrodes** Impedance Out of Range 11 Steroid Indicator Yes Insulation Breach 4 Lead Dislodgement 120

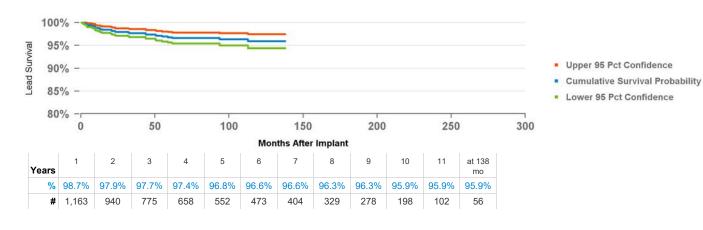
Product Surveillance Registry Results

Number of Leads Enrolled in Study	1,473
Cumulative Months of Follow-Up	78,911
Number of Leads Active in Study	213

Qualifying Complications

, , ,
Conductor Fracture
Extra Cardiac Stimulation
Failure to Capture

1	Lead Dislodgement	13
12	Other	2
9		



4298	Attain Performa	1				
US Mark	et Release	01Aug2014	US Returned Product A	nalysis	US Acute Lead Observati	ons
CE Appr	oval	01Jan2013	Conductor Fracture	7	Cardiac Perforation	7
Register	ed USA Implants	123,082	Insulation Breach	0	Conductor Fracture	1
Estimate	d Active USA Implants	94,914	Crimp/Weld/Bond	0	Extra Cardiac Stimulation	244
Fixation	Туре	Double Curve	Other	27	Failure to Capture	172
Pace Se	nse Polarity	Quadripolar			Failure to Sense	1
Steroid I	ndicator	Yes			Impedance Out of Range	46
					Lead Dislodgement	265

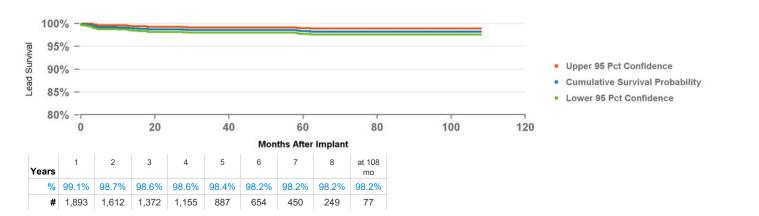
Product Surveillance Registry Results

Number of Leads Enrolled in Study	2,271
Cumulative Months of Follow-Up	112,894
Number of Leads Active in Study	617

Qualifying Complications

Extra Cardiac Stimulation
Failure to Capture

5	Lead Dislodgement	16	
5	Other	3	



4396 Attain Ability Straight

US Market Release	31Mar2011	US Returned Product An	nalysis	US Acute Lead Observation	ns
CE Approval	18Dec2009	Conductor Fracture	5	Cardiac Perforation	1
Registered USA Implants	8,462	Insulation Breach	1	Conductor Fracture	2
Estimated Active USA Implants	4,389	Crimp/Weld/Bond	0	Extra Cardiac Stimulation	21
Fixation Type	Tines	Other	0	Failure to Capture	14
Pace Sense Polarity	Dual Electrodes			Lead Dislodgement	35
Steroid Indicator	Yes				

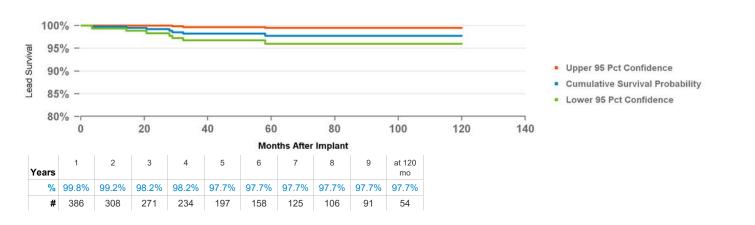
Product Surveillance Registry Results

Number of Leads Enrolled in Study	486
Cumulative Months of Follow-Up	26,299
Number of Leads Active in Study	81

Qualifying Complications

Extra Cardiac Stimulation
Failure to Capture

1	Insulation (not further defined)	1
4	Lead Dislodgement	4



4398 Attain Performa Straight

US Market Release	10Dec2014	US Returned Product Analysis		US Acute Lead Observation	ons
CE Approval	01Jan2013	Conductor Fracture	4	Cardiac Perforation	8
Registered USA Implants	42,676	Insulation Breach	0	Conductor Fracture	1
Estimated Active USA Implants	33,971	Crimp/Weld/Bond	0	Extra Cardiac Stimulation	111
Fixation Type	Tines	Other	7	Failure to Capture	81
Pace Sense Polarity	Quadripolar			Impedance Out of Range	13
Steroid Indicator	Yes			Lead Dislodgement	44

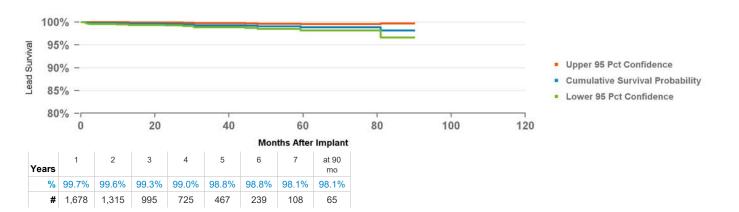
Product Surveillance Registry Results

Number of Leads Enrolled in Study	2,132
Cumulative Months of Follow-Up	78,542
Number of Leads Active in Study	1,101

Qualifying Complications

Extra Cardiac Stimulation
Failure to Capture

1	Impedance Out of Range	1
7	Lead Dislodgement	8



Attain Performa S 4598 US Market Release 10Dec2014 **US Returned Product Analysis US Acute Lead Observations** CE Approval 01Jan2013 Conductor Fracture 6 Cardiac Perforation 11 Registered USA Implants 79,543 Insulation Breach 0 Conductor Fracture 2 Estimated Active USA Implants 64,273 Crimp/Weld/Bond 0 Extra Cardiac Stimulation 144 Fixation Type S-shape Other 15 Failure to Capture 109 Pace Sense Polarity Quadripolar Impedance Out of Range 36 Steroid Indicator Yes Lead Dislodgement 90 Oversensing 1

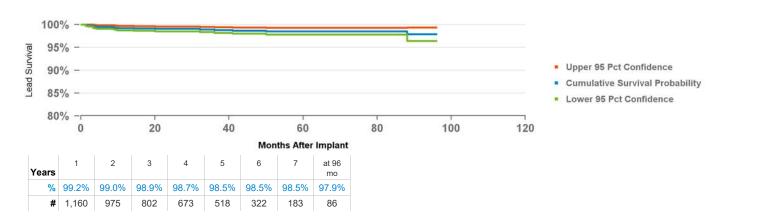
Product Surveillance Registry Results

Number of Leads Enrolled in Study	1,384
Cumulative Months of Follow-Up	64,646
Number of Leads Active in Study	412

Qualifying Complications

Extra Cardiac Stimulation	3
Failure to Capture	1
Failure to Sense	1

3	Lead Dislodgement	12
1		



Attain Stability Quad 4798 US Market Release 03Jun2019 **US Returned Product Analysis US Acute Lead Observations** CE Approval 24Apr2017 Conductor Fracture 1 Cardiac Perforation 9 Registered USA Implants 56,731 0 2 Insulation Breach Conductor Fracture Estimated Active USA Implants 52,807 Crimp/Weld/Bond 0 Extra Cardiac Stimulation 104 Non-electrically Active Other 15 Failure to Capture 125 Fixation Type Side Fixation Impedance Out of Range 42 Pace Sense Polarity Quadripolar Lead Dislodgement 113 Steroid Indicator Yes Oversensing 1

Product Surveillance Registry Results

Number of Leads Enrolled in Study	1,482
Cumulative Months of Follow-Up	29,681
Number of Leads Active in Study	993

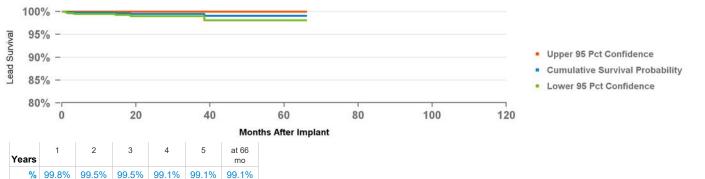
Qualifying Complications

Conductor Fracture	
Extra Cardiac Stimulation	
Failure to Capture	

8

3

1	Lead Dislodgement	2
2		

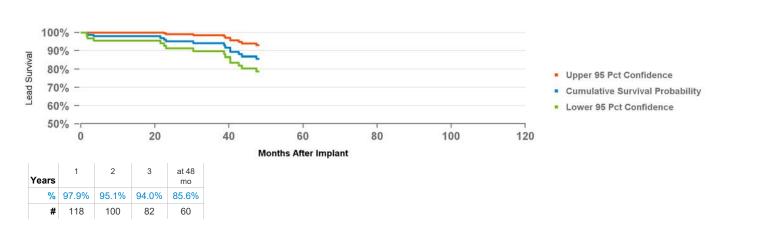


Years	1	2	3	4	5	at 66 mo	
%	99.8%	99.5%	99.5%	99.1%	99.1%	99.1%	
#	912	481	266	128	66	54	

4965 CapSure Epi US Market Release 06Sep1996 **US Returned Product Analysis US Acute Lead Observations** CE Approval 01Jan1993 Conductor Fracture 301 Cardiac Perforation 1 Registered USA Implants 24,337 Insulation Breach 64 Conductor Fracture 1 Estimated Active USA Implants 6,829 Crimp/Weld/Bond Failure to Capture 1 11 Fixation Type Suture Other 0 Failure to Sense 8 Pace Sense Polarity Unipolar Impedance Out of Range 21 Steroid Indicator Yes Oversensing 2 Unspecified Clinical Failure 3

Product Surveillance Registry Results

Product Surveillance Registry Results		Qualifying Complications	18	
Number of Leads Enrolled in Study	234	Conductor Fracture	10	Insulation (not further defined)
Cumulative Months of Follow-Up	7,507	Failure to Capture	4	Oversensing
Number of Leads Active in Study	3	Failure to Sense	1	



4968 CapSure Epi

US Market Release	16Sep1999	US Returned Product Analysis		US Acute Lead Observation	ons
CE Approval	21Apr1998	Conductor Fracture	154	Cardiac Perforation	1
Registered USA Implants	64,526	Insulation Breach	95	Conductor Fracture	4
Estimated Active USA Implants	35,330	Crimp/Weld/Bond	0	Extra Cardiac Stimulation	7
Fixation Type	Suture	Other	1	Failure to Capture	104
Pace Sense Polarity	Bipolar			Failure to Sense	14
Steroid Indicator	Yes			Impedance Out of Range	22
				Insulation Breach	1
				Lead Dislodgement	8
				Oversensing	33

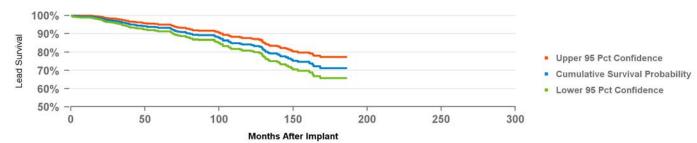
Product Surveillance Registry Results

Number of Leads Enrolled in Study	1,055
Cumulative Months of Follow-Up	72,922
Number of Leads Active in Study	191

Qualifying Complications

Conductor Fracture
Extra Cardiac Stimulation
Failure to Capture
Failure to Sense

34	Impedance Out of Range	5
2	Insulation (not further defined)	6
29	Lead Dislodgement	1
3	Oversensing	26
	Other	3



Years	1	2	3	4	5	6	7	8	9	10	11	12	13	14	15	at 186 mo
%	99.4%	97.5%	96.0%	94.4%	93.2%	91.1%	89.4%	89.2%	85.3%	84.3%	80.3%	77.7%	74.7%	72.3%	71.3%	71.3%
#	827	746	667	579	512	442	390	335	259	205	171	140	105	77	62	53

Screw-in

US Market Release	03Dec1992	US Returned Product Analysis		US Acute Lead Observations
CE Approval	01Jan1993	Conductor Fracture 35		Cardiac Perforation
Registered USA Implants	57,782	Insulation Breach	2	Extra Cardiac Stimulation
Estimated Active USA Implants	12,528	Crimp/Weld/Bond	0	Failure to Capture
Fixation Type	Fixed Screw	Other	1	Failure to Sense
Pace Sense Polarity	Unipolar			Impedance Out of Range
Steroid Indicator	None			Lead Dislodgement
				Oversensing

Product Surveillance Registry Results

Number of Leads Enrolled in Study	473
Cumulative Months of Follow-Up	17,847
Number of Leads Active in Study	47

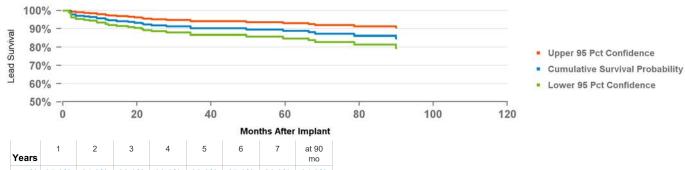
Qualifying Complications

Conductor Fracture	
Extra Cardiac Stimulation	
Failure to Capture	
Failure to Sense	

38

5	Impedance Out of Range	3
1	Lead Dislodgement	3
21	Oversensing	2
2	Other	1

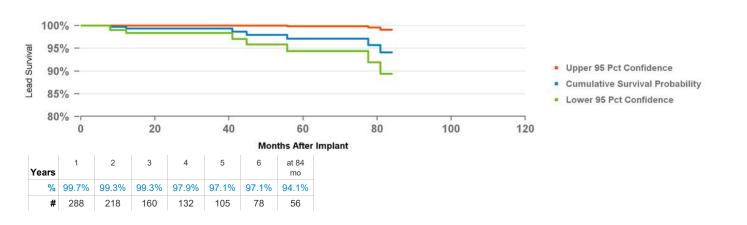
Unspecified Clinical Failure



Years	1	2	3	4	5	6	7	at 90 mo
%	95.0%	91.9%	90.3%	90.3%	88.9%	87.3%	86.3%	84.9%
#	237	192	160	142	121	96	75	60

5038 CapSure VDD-2 US Market Release 10Sep1998 **US Returned Product Analysis US Acute Lead Observations** CE Approval 15Apr1997 Conductor Fracture 8 Extra Cardiac Stimulation 1 Registered USA Implants 9,657 Insulation Breach 3 Failure to Capture 3 Estimated Active USA Implants 2,205 2 Crimp/Weld/Bond 0 Failure to Sense Fixation Type Tines Other 0 Lead Dislodgement 7 Pace Sense Polarity Quadripolar Oversensing 2 Steroid Indicator Yes **Product Surveillance Registry Results Qualifying Complications** 8 Number of Leads Enrolled in Study 570 Conductor Fracture 3 Cumulative Months of Follow-Up Failure to Capture 2 15,946

3



Failure to Sense

3

Number of Leads Active in Study

Method for Estimating Insertable Cardiac Monitor Performance

Insertable Cardiac Monitor (ICM) Performance Analysis

The Reveal LINQ™ and LINQ II™ ICMs are small, leadless devices that are inserted under the skin, in the chest that records subcutaneous ECG. These ICMs can be subject to malfunctions, similar to other implanted devices.

The performance report information is determined from the analysis of available complaint and available CareLinkTM network data. An ICM model will be included in this report when it has accumulated at least 10,000 implant months and will remain in the report as long as at least 500 devices remain active in the CareLinkTM population.

Using returned product data and CareLink™ to Estimate Insertable Cardiac Monitor Performance

ICMs returned to Medtronic are analyzed to determine whether or not they meet performance limits established by Medtronic. Although returned product analyses are valuable for gaining insight into failure mechanisms, this data can be limited in determining the survival probability as not all ICMs are returned to Medtronic for analysis. As ICMs are diagnostic devices, it is possible for a device not to be returned after meeting the device designated longevity or the patient receiving a diagnosis of their condition.

For certain malfunctions relating to oversensing for LINQ II[™], CareLink[™] Network data is leveraged. This data is related to FA1368: LINQ II[™] Insertable Cardiac Monitoring Systems (LNQ22) with Potential for Amplified Noise.

Qualifying Complication or Malfunctions

All reported ICM complaints are adjudicated by subject matter experts for inclusion as a product performance event given available information. These product performance events are then cross-referenced with the CareLinkTM population for inclusion in the survival analysis.

Product Performance events include, but are not limited to:

- Amplified Noise due to moisture (FA1368) this only affects LINQ II™
- Premature Battery Depletion
- Electrical Component
- Software/Firmware
- Other

The CareLink™ Network

As noted previously, the CareLink TM Network is leveraged for data related to FA1368, in addition to determining the inclusion of product performance events in the survival analysis.

Statistical and Data Analysis Methods

The performance is expressed in terms of device survival estimates, where "survival" refers to the function of the device, not the survival of the patient. These survival estimates are intended to illustrate the probability that a device will survive for a given number of years without a chronic device-related complication.

Method for Estimating Insertable Cardiac Monitor Performance continued

Active surveillance normally begins at the time of implant and continues until a product performance or censoring event occurs. Of the several different statistical methods available for survival analysis, PPR survival analysis is estimated using the Standard Actuarial Method, with suspensions assumed distributed evenly within the intervals (Cutler-Ederer Method), and incorporated data from these retrospectively enrolled devices. Thus, in some cases sample sizes may fluctuate from one time interval to the next interval.

The survival estimate is the probability that a device is free of a product performance event at a given time point. For example, if a survival probability is 95% after 5 years of service, then the device has a 5% chance of experiencing a related complication in the first 5 years following implant.

Since the survival estimate can become very imprecise with small effective sample sizes, Medtronic truncates the survival curve when the effective sample size is less than 100 devices. The survival charts in the Product Performance Report show the effective sample size for each year interval where we have experience. When the effective sample size reaches 100, the next data point is added to the survival curve.

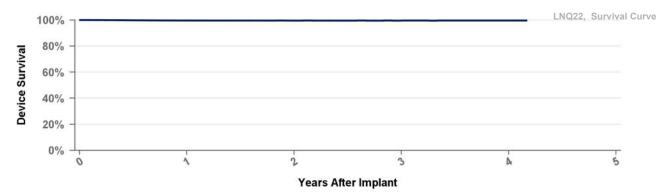
Because the information pulled from the CareLinkTM network allows for assessment of all devices that were taken out of service there are no adjustments done for underreporting of malfunctions.

Definition of Analysis Dataset

To be included in the survival analysis dataset, the product must have been successfully implanted and on the $CareLink^{TM}$ network for at least 30 days.

LNQ	LIN	\sim 1
	- 1 1 1 1 1	
	- 1 11 3	VJ I

US Market Release	03Jul2020	CareLink Population		Qualifying Malfunctions	/Complications
CE Approval Date	05Nov2019	Enrolled	308,758	Amplified Noise due to	
Serial Number Prefix	RLB	Active	250,171	moisture (FA1368)	920
Mass	3.4 g	Cumulative Follow-Up Months	4,748,277	Electrical Component	7
Volume	1.4 cc	·		Other	23
Estimated Longevity	4.5 years			Premature Battery	
				Depletion	87
				Software/Firmware	90



Freedom From Malfunction

Years	1	2	3	4	at 50 mo
Freedom From Malfunction	99.6%	99.6%	99.5%	99.5%	99.5%
Effective Sample Size	170514	73619	19800	1140	147

ICD and CRT-D Charge Time Performance

Medtronic continues its commitment to providing updated information on charge time performance.

Introduction

Information on charge time performance of Medtronic products is presented in this section of the CRM Product Performance Report. Medtronic implemented the collection of charge time data on July 1, 1999. The data are collected via our ongoing active clinical study of long-term system performance called the Product Surveillance Registry. The study protocol requests device data be routinely taken and sent to Medtronic at no more than 6-month intervals.

In our analysis performed for this report, only charge times resulting from full energy charges are considered. To ensure consistent reporting across devices, the charge time reported at implant represents the last charge time available from date of implant. When more than one charge time is available in a 6-month interval, a conservative approach has been adopted whereby only the maximum charge time in each 6-month interval is reported. As charge time is directly proportional to the time elapsed since the last capacitor reformation, charges occurring within 15 days of a previous charge are excluded. This precludes the reporting of overly optimistic results.

Data from over 20,000 devices contribute to the charge time data in this report. By tracking and reporting this charge time data, Medtronic is able to ascertain the actual performance of its charging circuitry. The insight gained through this information is applied to Medtronic's ongoing efforts to provide charge times that are short and consistent over the life of the product.

Charge time data for ICD and CRT-D models are presented using boxplots at 6-month intervals. The shaded box on the plots represents the middle half of the data – the Interquartile Range (IQR). The white line in the middle of each box is the median charge time. The top of the box representing the IQR is the third quartile or the 75th percentile (i.e., 75% of all charge times fall below this line), whereas the bottom of the box represents the first quartile or the 25th percentile. Vertical lines are drawn from the quartiles to the farthest value not more than 1.5 times the interquartile range. Any values more extreme than the vertical lines are considered outliers.

ICD and CRT-D Charge Time Performance

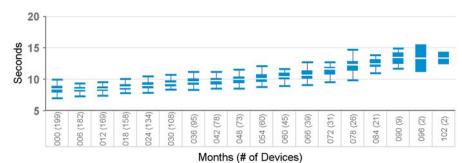
D204VRM, D214VRM, D224VRC, D234VRC

Model Number	Brand
D214VRM	Secura VR
D234VRC	Secura VR

20 Seconds 15 5 000 (246) (16) 990 072 (78) 084 (70) (99) 060 096 (45) 102 (30) 120 (2) 006 (219) 036 (147) 054 (112) 060 (100) 078 (76) 042 (137 048 (121 Months (# of Devices)

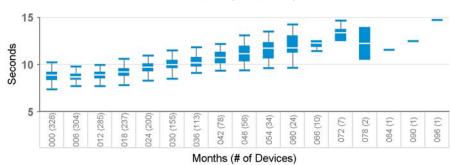
D264DRG, D284DRG, D384DRx, D394DRx

Model Number	Brand
D264DRM	Maximo II DR
D284DRG	Maximo II DR
D384DRG	Cardia DR
D394DRG	Egida DR
D394DRG	Egida DR



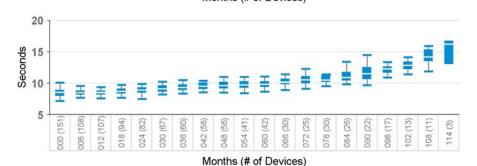
D264TRM, D284TRK, D384TRx, D394TRx

Model Number	Brand
D284TRK	Maximo II CRT-D
D394TRG	Egida CRT-D



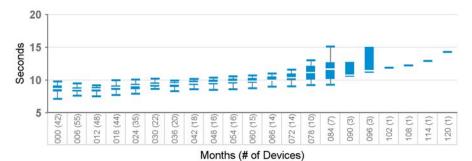
D264VRM, D284VRC, D384VRx, D394VRx

Model Number	Brand
D264VRM	Maximo II VR
D284VRC	Maximo II VR
D384VRG	Cardia VR
D394VRG	Egida VR



D274VRC, D294VRC

Model Number	Brand
D294\/RC	Virtuoso II VR



D314DRx

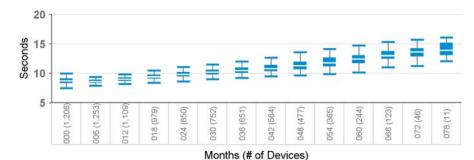
Model Number	Brand
D314DRG	Protecta XT DR
D314DRM	Protecta XT DR



ICD and CRT-D Charge Time Performance

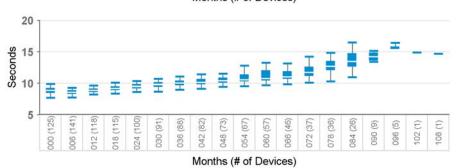
D314TRx

Model Number	Brand
D314TRG	Protecta XT CRT-D



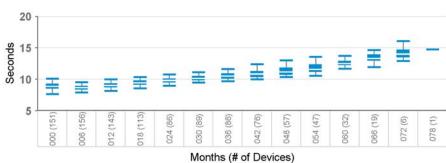
D334DRx, D364DRx

Model Number	Brand
D364DRG	Protecta DR
D364DRM	Protecta DR



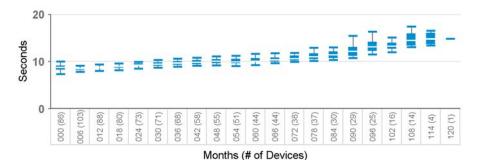
D334TRx, D364TRx

Model Number	Brand
D364TRG	Protecta CRT-D
D264TDM	Protecto CPT D



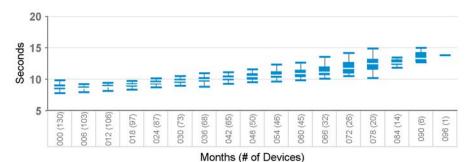
D334VRx, D364VRx

Model Number	Brand
D364VRG	Protecta VR
D364VRM	Protecta VR



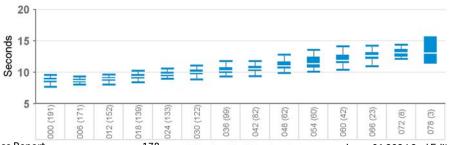
D354DRx

Model Number	Brand
D354DRG	Protecta XT DR
D3E4DDM	Protects VT DP



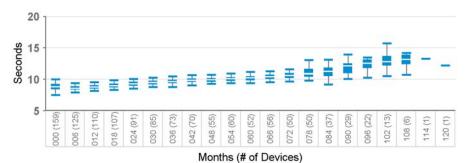
D354TRx

Model Number	Brand
D354TRG	Protecta XT CRT-D
D354TRM	Protecta XT CRT-D

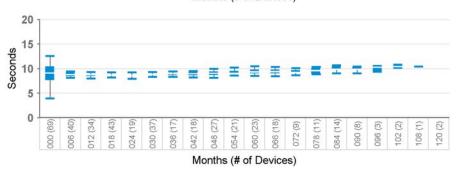


ICD and CRT-D Charge Time Performance

D354VRx	
Model Number	Brand
D354VRG	Protecta XT VR
D354VRM	Protecta XT VR



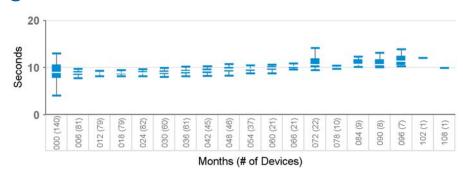
DDxxxxx, DF	₹
Model Number	Brand
DDBB1D1	Evera XT
DDBB1D4	Evera XT
DDBB2D1	Evera XT
DDBB2D4	Evera XT
DDBC3D1	Evera S
DDBC3D4	Evera S
DDMB1D1	Evera MRI XT
DDMB1D4	Evera MRI XT
DDMB2D1	Evera MRI XT
DDMB2D4	Evera MRI XT
DDMC3D1	Evera MRI S
DDMC3D4	Evera MRI
DDMD3D1	Primo
DDMD3D4	Primo
DDME3D1	Mirro
DDME3D4	Mirro



ICD and CRT-D Charge Time Performance

DTxxxxx, CR	T-D
Model Number	Brand
DTBA1D1	Viva XT
DTBA1D4	Viva XT
DTBA1Q1	Viva Quad XT
DTBA1QQ	Viva Quad XT
DTBA2D1	Viva XT
DTBA2D4	Viva XT
DTBA2Q1	Viva Quad XT
DTBA2QQ	Viva Quad XT
DTBB1D1	Viva S
DTBB1D4	Viva S
DTBB1Q1	Viva Quad S
DTBB1QQ	Viva Quad S
DTBB2D1	Viva S
DTBB2D4	Viva S
DTBB2QQ	Viva Quad S
DTBC2D1	Brava
DTBC2D4	Brava
DTBC2Q1	Brava Quad
DTBC2QQ	Brava Quad
DTBX1QQ	Viva Quad C
DTBX2QQ	Viva Quad C
DTMA1D1	Claria MRI
DTMA1D4	Claria MRI
DTMA1Q1	Claria MRI
DTMA1QQ	Claria MRI
DTMA2D1	Claria MRI
DTMA2D4	Claria MRI
DTMA2Q1	Claria MRI
DTMA2QQ	Claria MRI
DTMB1D1	Amplia MRI
DTMB1D4	Amplia MRI
DTMB1Q1	Amplia MRI
DTMB1QQ	Amplia MRI
DTMB2D1	Amplia MRI
DTMB2D4	Amplia MRI
DTMB2Q1	Amplia MRI
DTMB2QQ	Amplia MRI
DTMC1D1	Compia MRI
DTMC1QQ	Compia MRI
DTMC2D1	Compia MRI
DTMC2D4	Compia MRI
DTMCCOO	Cameria MDI

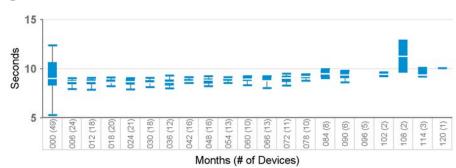
DTMC2QQ



Compia MRI

ICD and CRT-D Charge Time Performance

DVxxxxx, VR	
Model Number	Brand
DVAB1D1	Visia AF
DVAB1D4	Visia AF
DVAB2D1	Visia AF XT
DVAC3D1	Visia AF S
DVBB1D1	Evera XT
DVBB1D4	Evera XT
DVBB2D1	Evera XT
DVBB2D4	Evera XT
DVBC3D1	Evera S
DVBC3D4	Evera S
DVFB1D1	Visia MRI AF
DVFB1D4	Visia MRI AF
DVFB2D1	Visia MRI AF XT
DVFB2D4	Visia MRI AF XT
DVFC3D1	Visia MRI AF S
DVFC3D4	Visia MRI AF S
DVMB1D4	Evera MRI XT
DVMB2D1	Evera MRI XT
DVMB2D4	Evera MRI XT
DVMC3D1	Evera MRI S
DVMC3D4	Evera MRI S
DVMD3D1	Primo
DVMD3D4	Primo
DVME3D1	Mirro
DVME3D4	Mirro



Potential for Autonomous Cursor Motion

CareLink™ 2090 Programmer

Original Date of Communication: July 2024

STATUS UPDATE - OCTOBER 2024

As of 16 October 2024, Medtronic has 379 reports of autonomous cursor behavior including reports identified during the software update. There are no additional reports of unintended therapy delivered. There have been no reports of permanent harm or death associated with this behavior.

ORIGINAL COMMUNICATION - JULY 2024

Medtronic CareLink™ 2090 programmers with serial number prefixes PKK0 and PKK1 have the potential for autonomous cursor motion when Finger Touchscreen capability is enabled by software version 3.2 or higher. Through 11 June 2024, Medtronic has received 23 reports of autonomous cursor behavior, with 2 reports of unintended therapy delivered when the programmer was not under the control of trained personnel during a patient session. There have been no reports of permanent harm or death associated with this behavior.

If a programmer is unattended while in an active patient device session, a risk to patients may exist if an autonomous cursor motion engages in unintended programming. Medtronic estimates that 1.0% of Model 2090 programmers with serial number prefixes PKK0 or PKK1 could display this behavior when updated to software version 3.2 or higher.

INSTRUMENT MANAGEMENT RECOMMENDATIONS:

Software updates are necessary to maintain proper programmer function. Medtronic representatives will assist in performing the software update on all Medtronic CareLink $^{\text{TM}}$ 2090 programmers and assess proper function. Medtronic representatives will assist with returning programmers needing repair or replacement.

LINQ II ICM Potential for Amplified Noise June 2024

LINQ II Insertable Cardiac Monitoring Systems

Original Date of Communication: June 2024

STATUS UPDATE - OCTOBER 2024

As of 30 September 2024, Medtronic has identified 889 (1.37%) devices that have exhibited these characteristics, with zero (0) reports of serious harm. Medtronic estimates the projected rate of this issue to be 3.4% at 2 years or 8.7% at 4.5 years for the identified subset, and patient management recommendations are unchanged.

ORIGINAL COMMUNICATION – JUNE 2024

In November 2023, Medtronic communicated that a specific subset of LINQ II insertable cardiac monitors (ICMs) underwent a manufacturing process that may allow for moisture to impact electrode performance and create the potential for amplified noise and/or overall signal reduction of the ICM. This noise pattern is different from occasional noise due to device position/migration, patient activity, or external electromagnetic interference.

During continued investigation, Medtronic identified additional devices that have the potential for amplified noise. The identified subset now includes 64,700 total devices. Based on CareLink analysis and reported complaints as of 01 May 2024, 553 (0.85%) devices have exhibited these characteristics, with zero (0) reports of serious harm. Medtronic estimates the projected rate of this issue to be 2.9% at 2 years or 6.2% at 4.5 years for the identified subset. If an amplified noise pattern occurs, potential harms include missed/delayed diagnosis, delayed medical intervention, and early device replacement. **Medtronic recently implemented manufacturing changes to address this issue**. Overall LINQ II freedom from malfunction, including this issue, is projected to be 98.51% at 4.5 years.

PATIENT MANAGEMENT RECOMMENDATIONS:

In consultation with our Independent Physician Quality Panel (IPQP), Medtronic emphasizes continued care of patients implanted with an ICM per the existing device labeling. These recommendations are reflective of the November 2023 communication.

- Please encourage enrollment in and regular transmissions to CareLink.
 - Medtronic will continue to apply recurring algorithmic searches on CareLink for the specific amplified noise pattern and notify the clinician if present. No further action is required for patients regularly transmitting to CareLink.
- For patients not followed in CareLink:
 - Consider whether enrolling in CareLink is an option, per HRS/EHRA/APHRS/LAHRS guidance.¹
 CareLink monitoring will reduce the potential for episodes caused by amplified noise to overwrite true episodes before they are reviewed.

- o If noise interferes with the ability to assess the patient's rhythm or reason for monitoring, contact Medtronic Technical Services for assistance (dxhelp@medtronic.com or 1-800-929-4043).
- If the ICM is no longer in use, no further action is necessary.

¹Ferrick A, et. al. (2023). 2023 HRS/EHRA/APHRS/LAHRS expert consensus statement on practical management of the remote device clinic. Heart Rhythm, 20(9), e92-e144.

SOFTWARE UPDATE AVAILABLE - Increased Potential for Reduced Energy or No Energy Delivered During HV Therapy When Programmed AX>B (2023)

Claria, Amplia, Compia, Viva, Brava, Visia AF, Evera, Primo, Mirro ICDs & CRT-Ds

Original Date of Communication: May 2023

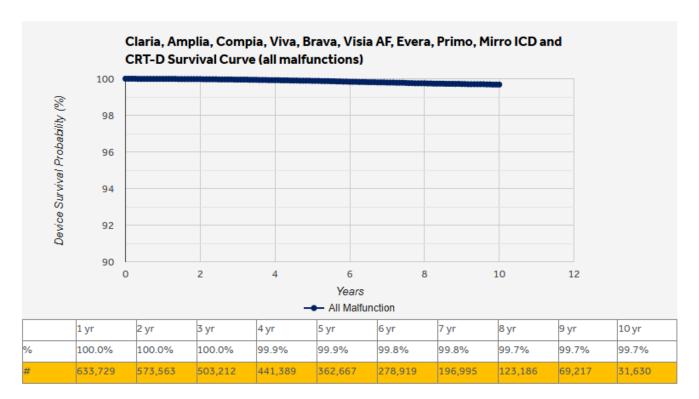
Devices managed with an updated programming system are no longer in scope of the May 2023 communication.

STATUS UPDATE - OCTOBER 2024

As of 18 October 2024, Medtronic has identified 38 devices (representing 0.0034% of devices distributed worldwide) that experienced the issue described in the communication. No permanent harms or deaths have been attributed to this issue. When programmed B>AX, the occurrence rate remains in line with the historic non-advisory population as described in the original communication. To support the recommendations in the May 2023 communication, Medtronic reviewed more than 680,000 shock events that occurred in over 228,000 unique devices.

Medtronic has released a software update that aligns programming systems with the programming recommendations in most geographies. Devices managed with an updated programming system are no longer in scope of the May 2023 communication.

The overall reliability of these devices remains high. The graph below shows device survival probability inclusive of all confirmed malfunctions.



ORIGINAL COMMUNICATION - MAY 2023

This communication advises physicians of a rare potential for reduced- or no-energy output during high voltage (HV) therapy (typically 0-12J) in implantable cardioverter defibrillators (ICDs) and cardiac resynchronization therapy defibrillators (CRT-Ds) manufactured with a specific (glassed) feedthrough, including currently available ICDs and CRT-Ds. Through 10 April 2023, Medtronic has identified 27 devices from approximately 816,000 devices (representing 0.003%) distributed worldwide that have experienced a reduced- or no-energy HV therapy due to the issue described in this letter. There have been no deaths due to this issue in the glassed feedthrough device population.

With current field programming, devices with a glassed feedthrough may experience increased potential (projected to be 0.02% at 5 years) for reduced- or no-energy output during HV therapy. In some cases, a persistent 50% drop in all pacing lead impedances may be displayed; lead function, however, is not affected. See Issue Details below for further information on root cause, projected rates, risks, and potential harms.

A broader analysis was conducted to determine the incidence of device related reduced- or no-energy HV therapy events outside of the above population, with implants dating back to 2012. Using these historical observed events, projected rates for this population of devices is 0.002% at five (5) years and 0.006% at nine (9) years. This analysis identified two deaths from the historical population in which there was evidence suggesting a device-related reduced- or no-energy HV therapy occurred.

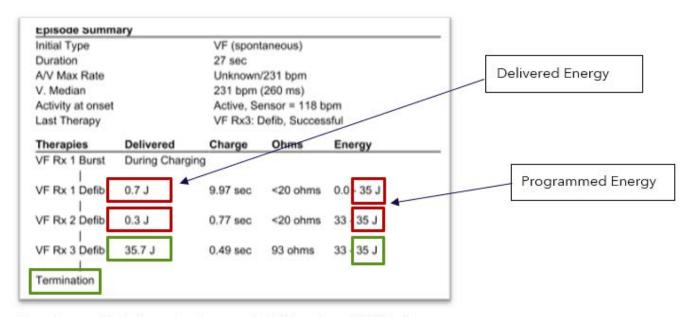
Should this issue occur, pacing, sensing, episode detection, anti-tachycardia pacing (ATP) therapies, battery longevity, and telemetry remain functional. **When devices in the glassed feedthrough population are programmed**

exclusively in the B>AX configuration, the potential for a reduced- or no-energy HV therapy is 0.002% at five (5) years and 0.005% at nine (9) years, comparable to historical device performance.

PATIENT MANAGEMENT RECOMMENDATIONS:

Medtronic recognizes that each patient requires unique clinical considerations. Based on internal investigation and external consultation with our Independent Physician Quality Panel (IPQP), Medtronic provides the following guidance:

- Prophylactic device replacement is NOT recommended.
 - The risk of mortality for patients after reprogramming is 0.001% at 9 years and is less than the risk of patient mortality due to complications associated with device replacement (0.032% - 0.043%^{1,2,3}).
- Program all HV therapy pathways B>AX in all therapy zones to minimize the risk for this issue.
 - Note: Using "Get Medtronic Nominals" will require manual reprogramming of Rx5 and Rx6 to B>AX for all ventricular therapies.
 - For patients remotely followed via CareLink, your Medtronic representative will provide a
 report to assist with identifying patients who may have one or more HV therapy pathways
 programmed AX>B. You may contact your local representative to obtain an updated copy of
 the report at any time.
- Prioritize reprogramming patients who have both a history of HV therapy and Rx1 programmed AX>B.
 - o Rx1 provides the greatest statistical likelihood to resolve an arrhythmia, and therefore it is important to minimize risk of a reduced- or no-energy HV therapy in the first sequence.
- For remaining patients with AX>B programming in any HV therapy sequence, schedule the next follow-up for in-clinic reprogramming, with the appropriate discretion, to minimize potential for reduced- or no-energy HV therapies to occur.
- Per standard practice, check tachyarrhythmia episodes to determine effectiveness of therapies that have been delivered.
 - o Instruct patients to contact the clinic if they receive HV therapy or hear an audible tone coming from their device.
 - Verify delivered energy is consistent with programmed energy in the Episode Summary.
 Note: The image below highlights an episode experiencing intermittent reduced HV therapies (red boxes).



Example screen illustrating reduced-energy shocks for an Evera XT DR device.

- After an SCP event, pacing, sensing, episode detection, and anti-tachycardia pacing (ATP) therapies are not impacted; additionally, HV charging, battery longevity and Bluetooth telemetry are not impacted.
- Contact Medtronic Technical Services (1-800-929-4043) or your local representative if one of the following is observed as these may be an indication of either a device or lead-related issue:
 - Reduced- or no-energy HV therapy is displayed in Episode Text (regardless of programmed pathway)
 - A persistent drop of approximately 50% in RA, RV and LV pacing lead impedance measurements as this may be an indication of increased potential for a future reduced- or no-energy therapy.

ISSUE DETAILS:

There is an increased potential for a reduced- or no-energy HV therapy in the AX>B configuration when all the following conditions are met:

- The device has a glassed feedthrough (manufactured after July 2017).
- There is significant separation of the layers of insulation materials in the feedthrough components of the device header.
- An unintended current pathway forms within the void created by the insulation separation, capable of conducting high levels of current during HV therapy.

When an unintended current pathway is detected during HV therapy, the Short Circuit Protection (SCP) feature may trigger (see Appendix A). This behavior can be intermittent; both full-energy and reduced-energy HV therapies within the same episode have been observed. SCP events may also be lead related; for both lead-related and device-related unintended current pathways, the defibrillation waveform is truncated early in the energy delivery sequence, resulting in reduced or no energy being delivered (~0-12J).

RATES OF OCCURRENCE FOR DEVICE-RELATED REDUCED- or NO-ENERGY HV THERAPY:

Through 10 April 2023, 27 devices with glassed feedthroughs have been identified as experiencing a reduced or no-energy HV therapy (0.003% out of 816,000 distributed devices). Of these, 26 were in devices with an AX>B delivered pathway. Based on an analysis of patients with a glassed feedthrough device and with a history of HV therapy, the observed rate for this issue is 0.03%. See Table 1 below for projected rates of occurrence and risk for harm. Potential harms related to reduced- or no-energy HV therapy include failure to terminate an arrhythmia, which could lead to death, as well as complications associated with device replacement and/or unnecessary lead replacement if the reduced- or no-energy HV therapy is erroneously attributed to a lead failure.

TABLE 1: Comparison of projected event rates and risk of catastrophic harm, with and without reprogramming

Рорг	ilation	Projected event rate (one or more reduced- or no-energy HV therapies in an episode)	Mortality risk of this issue, considering the probability a sequence of six HV therapies fails to terminate an arrhythmia
Glassed feedthrough devices with current	Overall Population of Devices	0.02% @ 5 years*	0.004% @ 5 years*
field programming (~816,000 devices)	For Patients with History of HV Therapy	0.48% @ 5 years*	0.08% @ 5 years*
Glassed feedthrough	Overall Population of Devices	0.005% @ 9 years**	0.001% @ 9 years**
pathways reprogrammed B>AX	For Patients with History of HV Therapy	0.04% @ 9 years**	0.01% @ 9 years**
Historical devices	Overall Population of Devices	0.006% @ 9years**	0.001% @ 9years**
(~651,000 devices)	For Patients with History of HV Therapy	0.05% @ 9 years**	0.01% @ 9 years**

^{*} A timeframe of 5 years is used for this projection given the average implant duration of the devices in scope of this communication is approximately 4 years and allowing for adequate time for reprogramming.

Medtronic is updating Instructions for Use, HV therapy nominals and the programmer interfaces for these device models to be consistent with information in this letter. Medtronic will release additional information once the necessary regulatory approvals have been received, as applicable in the local region.

APPENDIX A - ADDITIONAL DETAILS ON SHORT CIRCUIT PROTECTION (SCP)

^{**} A time frame of 9 years is used based on the weighted average for device longevity for ICDs and CRTDs.

Short Circuit Protection (SCP) is a safety feature that can only occur during high voltage (HV) therapy. SCP is designed to truncate energy delivery to protect the device when an unintended current pathway is detected during a shock. An SCP event can occur when an unintended current pathway develops either in the lead or in the device.

Contact Medtronic for additional guidance if you believe an SCP event occurred.

Programming all high voltage delivery pathways to B>AX will minimize the effect of an unintended current pathway in the device header (e.g., feedthrough), thereby minimizing the potential for an SCP event. Comparing the programmed energy to the delivered energy in the Episode Text for a treated episode can be used to identify SCP events. The lead impedance in the Episode Text will also display <20 ohms. Refer to the sections below on how to identify if an SCP event has occurred.

For Evera/Visia AF/Primo/Mirro ICDs and Viva/Brava/Claria/Amplia/Compia CRT-D devices:

Identifying SCP events: For episodes in which a high voltage therapy was delivered, if there is a significantly reduced-energy or no-energy shock delivered, the device may have experienced an SCP event. In each stored episode, delivered energy is displayed in the Episode Text and on the Interval Plot. If an SCP event occurred, this text may indicate that a lower energy was delivered and <20 ohm impedance value. Note: there is currently no available SCP alert in this family of devices.

Clinicians can consider enabling the device audible alert and/or CareAlert for "Number of Shocks Delivered in an Episode," with "N = 1." Turning this alert "ON" may help ensure the patient and/or clinic is made aware when a HV therapy is delivered by the device.

If an SCP event occurs during a manual shock delivery, there will be no episode data. For manual shock deliveries, review the shock impedance and the delivered energy from the Last High Voltage Therapy section on the Battery and Lead Measurement screen of the programmer.

¹Tarakji KG, et al. Antibacterial Envelope to Prevent Cardiac Implantable Device Infection. The New England Journal of Medicine. 2019; 380(20):1895-1905.

²Medtronic Data on File. MDT2260884-CRHF CIED Infection Report; Agile: MDT2260884, Version 2.0, 11/02/2015. ³Birnie D, et al. Complications associated with defibrillation threshold testing: The Canadian experience. Heart Rhythm. 2008; 5(3):387-90.

SOFTWARE UPDATE AVAILABLE - Increased Potential for Reduced Energy or No Energy Delivered During HV Therapy When Programmed AX>B (2023)

Cobalt™ XT, Cobalt and Crome™ ICDs and CRT-Ds

Original Date of Communication: May 2023

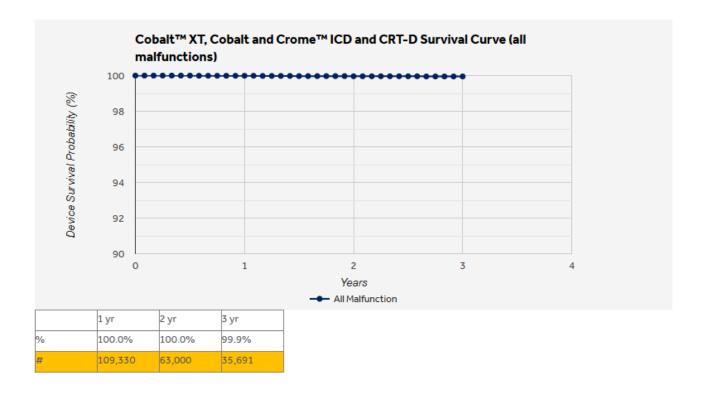
Devices managed with an updated programming system are no longer in scope of the May 2023 communication.

STATUS UPDATE - OCTOBER 2024

As of 18 October 2024, Medtronic has identified 38 devices (representing 0.0034% of devices distributed worldwide) that experienced the issue described in the communication. No permanent harms or deaths have been attributed to this issue. When programmed B>AX, the occurrence rate remains in line with the historic non-advisory population as described in the original communication. To support the patient management recommendations in the May 2023 communication, Medtronic reviewed more than 680,000 shock events that occurred in over 228,000 unique devices.

Medtronic has released a software update that aligns programming systems with the programming recommendations in most geographies. Devices managed with an updated programming system are no longer in scope of the May 2023 communication.

The overall reliability of these devices remains high. The graph below shows device survival probability inclusive of all confirmed malfunctions.



ORIGINAL COMMUNICATION - MAY 2023

This communication advises physicians of a rare potential for reduced- or no-energy output during high voltage (HV) therapy (typically 0-12J) in implantable cardioverter defibrillators (ICDs) and cardiac resynchronization therapy defibrillators (CRT-Ds) manufactured with a specific (glassed) feedthrough, including currently available ICDs and CRT-Ds. Through 10 April 2023, Medtronic has identified 27 devices from approximately 816,000 devices (representing 0.003%) distributed worldwide that have experienced a reduced- or no-energy HV therapy due to the issue described in this letter. There have been no deaths due to this issue in the glassed feedthrough device population.

With current field programming, devices with a glassed feedthrough may experience increased potential (projected to be 0.02% at 5 years) for reduced- or no-energy output during HV therapy. In some cases, a persistent 50% drop in all pacing lead impedances may be displayed; lead function, however, is not affected. See Issue Details below for further information on root cause, projected rates, risks, and potential harms.

A broader analysis was conducted to determine the incidence of device related reduced- or no-energy HV therapy events outside of the above population, with implants dating back to 2012. Using these historical observed events, projected rates for this population of devices is 0.002% at five (5) years and 0.006% at nine (9) years. This analysis identified two deaths from the historical population in which there was evidence suggesting a device-related reduced- or no-energy HV therapy occurred.

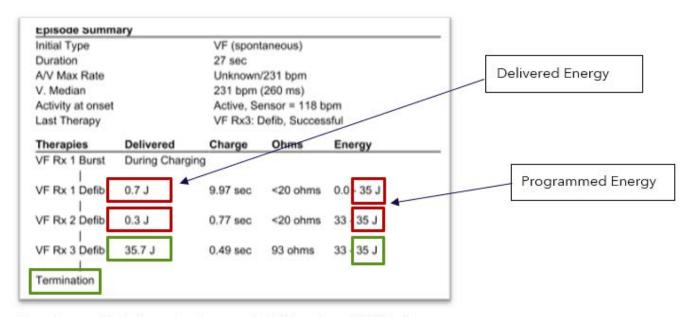
Should this issue occur, pacing, sensing, episode detection, anti-tachycardia pacing (ATP) therapies, battery longevity, and telemetry remain functional. **When devices in the glassed feedthrough population are programmed**

exclusively in the B>AX configuration, the potential for a reduced- or no-energy HV therapy is 0.002% at five (5) years and 0.005% at nine (9) years, comparable to historical device performance.

PATIENT MANAGEMENT RECOMMENDATIONS:

Medtronic recognizes that each patient requires unique clinical considerations. Based on internal investigation and external consultation with our Independent Physician Quality Panel (IPQP), Medtronic provides the following guidance:

- Prophylactic device replacement is NOT recommended.
 - The risk of mortality for patients after reprogramming is 0.001% at 9 years and is less than the risk of patient mortality due to complications associated with device replacement (0.032% - 0.043%^{1,2,3}).
- Program all HV therapy pathways B>AX in all therapy zones to minimize the risk for this issue.
 - Note: Using "Get Medtronic Nominals" will require manual reprogramming of Rx5 and Rx6 to B>AX for all ventricular therapies.
 - For patients remotely followed via CareLink, your Medtronic representative will provide a
 report to assist with identifying patients who may have one or more HV therapy pathways
 programmed AX>B. You may contact your local representative to obtain an updated copy of
 the report at any time.
- Prioritize reprogramming patients who have both a history of HV therapy and Rx1 programmed AX>B.
 - o Rx1 provides the greatest statistical likelihood to resolve an arrhythmia, and therefore it is important to minimize risk of a reduced- or no-energy HV therapy in the first sequence.
- For remaining patients with AX>B programming in any HV therapy sequence, schedule the next follow-up for in-clinic reprogramming, with the appropriate discretion, to minimize potential for reduced- or no-energy HV therapies to occur.
- Per standard practice, check tachyarrhythmia episodes to determine effectiveness of therapies that have been delivered.
 - o Instruct patients to contact the clinic if they receive HV therapy or hear an audible tone coming from their device.
 - Verify delivered energy is consistent with programmed energy in the Episode Summary.
 Note: The image below highlights an episode experiencing intermittent reduced HV therapies (red boxes).



Example screen illustrating reduced-energy shocks for an Evera XT DR device.

- After an SCP event, pacing, sensing, episode detection, and anti-tachycardia pacing (ATP) therapies are not impacted; additionally, HV charging, battery longevity and Bluetooth telemetry are not impacted.
- Contact Medtronic Technical Services (1-800-929-4043) or your local representative if one of the following is observed as these may be an indication of either a device or lead-related issue:
 - Reduced- or no-energy HV therapy is displayed in Episode Text (regardless of programmed pathway)
 - A persistent drop of approximately 50% in RA, RV and LV pacing lead impedance measurements as this may be an indication of increased potential for a future reduced- or no-energy therapy.

ISSUE DETAILS:

There is an increased potential for a reduced- or no-energy HV therapy in the AX>B configuration when all the following conditions are met:

- The device has a glassed feedthrough (manufactured after July 2017).
- There is significant separation of the layers of insulation materials in the feedthrough components of the device header.
- An unintended current pathway forms within the void created by the insulation separation, capable of conducting high levels of current during HV therapy.

When an unintended current pathway is detected during HV therapy, the Short Circuit Protection (SCP) feature may trigger (see Appendix A). This behavior can be intermittent; both full-energy and reduced-energy HV therapies within the same episode have been observed. SCP events may also be lead related; for both lead-related and device-related unintended current pathways, the defibrillation waveform is truncated early in the energy delivery sequence, resulting in reduced or no energy being delivered (~0-12J).

RATES OF OCCURRENCE FOR DEVICE-RELATED REDUCED- or NO-ENERGY HV THERAPY:

Through 10 April 2023, 27 devices with glassed feedthroughs have been identified as experiencing a reduced or no-energy HV therapy (0.003% out of 816,000 distributed devices). Of these, 26 were in devices with an AX>B delivered pathway. Based on an analysis of patients with a glassed feedthrough device and with a history of HV therapy, the observed rate for this issue is 0.03%. See Table 1 below for projected rates of occurrence and risk for harm.

Potential harms related to reduced- or no-energy HV therapy include failure to terminate an arrhythmia, which could lead to death, as well as complications associated with device replacement and/or unnecessary lead replacement if the reduced- or no-energy HV therapy is erroneously attributed to a lead failure.

TABLE 1: Comparison of projected event rates and risk of catastrophic harm, with and without reprogramming

Рори	lation	Projected event rate (one or more reduced- or no-energy HV therapies in an episode)	Mortality risk of this issue, considering the probability a sequence of six HV therapies fails to terminate an arrhythmia
Glassed feedthrough devices with current	Overall Population of Devices	0.02% @ 5 years*	0.004% @ 5 years*
field programming (~816,000 devices)	For Patients with History of HV Therapy	0.48% @ 5 years*	0.08% @ 5 years*
Glassed feedthrough	Overall Population of Devices	0.005% @ 9 years**	0.001% @ 9 years**
pathways reprogrammed B>AX	For Patients with History of HV Therapy	0.04% @ 9 years**	0.01% @ 9 years**
Historical devices	Overall Population of Devices	0.006% @ 9years**	0.001% @ 9years**
	For Patients with History of HV Therapy	0.05% @ 9 years**	0.01% @ 9 years**

^{*} A timeframe of 5 years is used for this projection given the average implant duration of the devices in scope of this communication is approximately 4 years and allowing for adequate time for reprogramming.

Medtronic is updating Instructions for Use, HV therapy nominals and the programmer interfaces for these device models to be consistent with information in this letter. Medtronic will release additional information once the necessary regulatory approvals have been received, as applicable in the local region.

APPENDIX A - ADDITIONAL DETAILS ON SHORT CIRCUIT PROTECTION (SCP)

^{**} A time frame of 9 years is used based on the weighted average for device longevity for ICDs and CRTDs.

Short Circuit Protection (SCP) is a safety feature that can only occur during high voltage (HV) therapy. SCP is designed to truncate energy delivery to protect the device when an unintended current pathway is detected during a shock. An SCP event can occur when an unintended current pathway develops either in the lead or in the device.

Contact Medtronic for additional guidance if you believe an SCP event occurred.

Programming all high voltage delivery pathways to B>AX will minimize the effect of an unintended current pathway in the device header (e.g., feedthrough), thereby minimizing the potential for an SCP event. Comparing the programmed energy to the delivered energy in the Episode Text for a treated episode can be used to identify SCP events. The lead impedance in the Episode Text will also display <20 ohms. Refer to the sections below on how to identify if an SCP event has occurred.

For Cobalt/Crome ICD and CRT-D devices:

Identifying SCP events during high voltage (HV) therapy delivery: When an SCP event has occurred, the device will issue an RV Defibrillation Lead Impedance CareAlert. Audible and wireless alerts are issued, if enabled. These devices are shipped with alerts enabled and are nominally active once implant detection completes.

A CareAlert will occur simultaneous with HV therapy delivery and will specifically report "RV Defib Lead Impedance 0 Ω " with the same time stamp as the therapy delivery. The alert condition is displayed in the CareAlert Events log (Data >> CareAlert Events). The Quick Look Observations will also display "Alert: RV defib lead impedance warning on Mmm/DD/YYYY." SCP events are not reflected in the long-term lead impedance trends.

Following an SCP event in devices with both the SVC Coil and Active Can enabled, the device will turn off the SVC coil. If the SCP event is caused by a lead integrity issue involving the SVC coil, turning off the SVC coil can allow any subsequent shocks to be delivered using the RV Coil -to- Active Can vector. The programmed therapy parameters will indicate the SVC Coil has been automatically disabled. The SVC coil will remain off until it is turned back on by the clinician.

If an SCP event occurs during a manual shock delivery, there will be no episode data. For manual shock deliveries, review the shock impedance and the delivered energy from the Last High Voltage Therapy section on the Battery and Lead Measurement screen of the programmer.

¹Tarakji KG, et al. Antibacterial Envelope to Prevent Cardiac Implantable Device Infection. The New England Journal of Medicine. 2019; 380(20):1895-1905.

²Medtronic Data on File. MDT2260884-CRHF CIED Infection Report; Agile: MDT2260884, Version 2.0, 11/02/2015. ³Birnie D, et al. Complications associated with defibrillation threshold testing: The Canadian experience. Heart Rhythm. 2008; 5(3):387-90.

SOFTWARE UPDATE AVAILABLE - Potential for Intermittent-Reduced-Energy Shock Due To Short Circuit Protection Event (2022)

Cobalt™ XT, Cobalt™ and Crome™ ICDs and CRT-Ds

Original Date of Communication: June 2022

STATUS UPDATE - OCTOBER 2024

 $Manufacturing\ updates\ may\ increase\ device\ programming\ options.\ Contact\ Medtronic\ Technical\ Services\ for\ details.$

As of 10 August 2022, a software release is now available for CareLink™ SmartSync™ Device Managers (SmartSync). Once a SmartSync tablet has been updated with software application D00U005 version 7.1.1 (or higher), the programmer will deploy a device update to Cobalt and Crome implantable cardioverter defibrillators (ICDs) and cardiac resynchronization therapy defibrillators (CRT-Ds) to prevent the potential for an intermittent, second-phase Short Circuit Protection (SCP) event during high-voltage (HV) therapy delivery. This software update was previously announced as part of an advisory communication Medtronic issued in June 2022 (see original communication posted below).

Through 21 October 2024, Medtronic has confirmed 152 devices (representing 0.08% of devices distributed worldwide) have experienced a second-phase SCP event. In all events, ~79% of the programmed shock energy was delivered. No events have occurred in devices programmed B>AX that have the August 2022 software update. No permanent harms or deaths have been directly attributed to this issue.

Medtronic representatives are available to work with clinicians to ensure all SmartSync tablets in their facility(s) are updated with application software D00U005 version 7.1.1 (or higher). The software can be installed by connecting each SmartSync tablet to the internet, opening the SmartSync App and accepting the on-screen prompts.

As disclosed in the June 2022 patient management recommendations, patients will require an in-clinic visit for the update to be installed into their device via interrogation with an updated SmartSync tablet. Once installed, the update will allow devices to deliver the full programmed shock energy. Programming B>AX pathway and Active Can enabled is still required. On-screen messaging will reinforce these programming recommendations.

Clinicians can identify if a patient's device has successfully received the update by viewing the displayed Configuration ID and confirming the first number in the sequence is as indicated below:

- 11-1-0 or higher for Cobalt/Crome VR devices
- 10-1-0 or higher for Cobalt/Crome DR and CRT-D devices

The Device Configuration ID can be found under the "Device Information" section of the SmartSync Parameters Report, or for CareLink patients, under the Transmission Details page by selecting < More Reports > 'Parameters.'

ORIGINAL COMMUNICATION - JUNE 2022

This communication provides notice of the potential for reduced shock energy (~79% of programmed energy) during high-voltage (HV) therapy for Cobalt and Crome implantable cardioverter defibrillators (ICDs) and cardiac resynchronization therapy defibrillators (CRT-Ds). Through 03 June 2022, Medtronic has identified 27 devices (0.03% of devices distributed worldwide) that have experienced a reduced-energy shock, which is accompanied by a Short Circuit Protection (SCP) alert. Medtronic has not received any reports of permanent harm or death due to this issue. Medtronic has submitted a device software update to address this issue and anticipates it will be available for download into implanted devices
beginning third/fourth quarter of calendar year 2022>, pending regulatory approvals.

ISSUE SUMMARY:

Short Circuit Protection (SCP) alerts trigger during HV therapy during the first- or second-phase of the HV biphasic waveform delivery. This communication focuses on second-phase SCP events that are the result of a secondary, low-level current pathway detected in the HV circuitry.

- A second-phase SCP event will deliver approximately 79% of programmed energy as a monophasic waveform.
- **Defibrillation efficacy is reduced by ~1%** for this type of SCP event when HV therapy is programmed to 40J, considering cumulative success across the full series of shocks (Rx1 through Rx6).

Based on analysis of peer-reviewed literature as well as CareLink data on shock efficacy from more than 279,000 episodes*, termination success rates for 32J (~79% of 40J), monophasic shocks versus 40J biphasic shocks are estimated in Table 1. Termination success may vary depending on individual patient risk factors and medication use.

TABLE 1

	Normal Operation	Second-phase SCP	
	(40J, Biphasic delivery)	(32J, Monophasic delivery)	
Estimated First Shock	89%	85%	
Success* (in VF Zone)			
Estimated Cumulative	99%	98%	
Success Shocks 1-6*			

^{*}Medtronic data on file; May 2022.

While 0.03% has been observed to date, Medtronic projects 0.18%** of the ~80,000 distributed devices
may experience a second-phase SCP event within 24 months of service life, when considering the
probability for these SCP events increases over time, and the likelihood a patient will need HV therapy
during that time.

For the population of patients who received HV therapy, the observed rate was 0.77%.
 When projecting for this population, the chance of encountering a second-phase SCP event is ~5.0%** at 24 months.

**The above projections are based on calculations without the planned device software update. Once installed, this update, in addition to the programming recommendations, will resolve occurrences of second-phase SCP events.

Potential harms related to a second-phase SCP event include failure to terminate the arrhythmia due to reduced-delivered-energy, a theoretical risk of proarrhythmia, and complications associated with device replacement, including unnecessary lead replacement due to misinterpretation of the SCP alert.

- While not observed clinically, Medtronic estimates the risk for proarrhythmia is 0.002% in the AX>B configuration, and improbable in the B>AX configuration (less than 0.00004%), with Active Can pathway enabled. These risks may be higher when Active Can is disabled.
- The overall risk for **patient mortality due to this issue is estimated to be 0.002%** at 24 months when combining the likelihood a patient will need therapy with the probability an arrhythmia fails to terminate after six sequences of 32J monophasic shocks.
 - Comparatively, the risk of patient mortality due to complications associated with device replacement is 0.032% - 0.043%^{1,2,3}

PATIENT MANAGEMENT RECOMMENDATIONS AND CONSIDERATIONS:

SCP events are evident to the patient and clinician. Devices will issue an audible tone and, for patients enrolled in CareLink, a wireless CareAlert will report RV Defib lead impedance 0 ohms.

Medtronic recognizes that each patient requires unique clinical considerations. Based on internal investigation and external consultation with our Independent Physician Quality Panel (IPQP), Medtronic recommends:

- Prophylactic device replacement is NOT recommended.
- Remote monitoring with normal frequency of follow-up per clinic protocol, with patients' next follow-up scheduled in-clinic to allow for device reprogramming (if necessary):
 - Programming all HV therapies to 40J with a B>AX pathway and Active Can/SVC Coil set with Active Can enabled across all therapy zones.
- Contact Medtronic Technical Services (1-800-723-4636) or your local representative if an RV Defib Lead
 Impedance Alert reporting zero (0) ohms is observed as this is an indicator that an SCP event was
 detected during HV therapy.
 - o Importantly, if the delivered energy during the episode is ~79% of the programmed energy AND the SCP alert indicates an RV Defib Lead impedance alert reporting exactly zero (0) ohms, this is an indication of a second-phase SCP event (as described in this letter) and not a lead issue.

- Consider device replacement only after observing and confirming the cause of an SCP event with a Medtronic representative, with the understanding a device has an ~81% probability of delivering subsequent reduced-energy shocks, and with the understanding an update for implanted devices is anticipated to be available beginning <third quarter/fourth quarter> of calendar year 2022.
 - Note: The software update will require an additional in-clinic follow-up in order for it to be installed into a patient's device. The update will ensure the full shock energy is delivered in the presence of a secondary, low-level current pathway in the HV circuitry.
- After an SCP event, pacing, sensing, episode detection, and anti-tachycardia pacing (ATP) therapies are not impacted; additionally, HV charging, battery longevity and Bluetooth telemetry are not impacted.

¹ Tarakji KG, et al. Antibacterial Envelope to Prevent Cardiac Implantable Device Infection. The New England Journal of Medicine. 2019; 380(20):1895-1905.

² Medtronic Data on File. MDT2260884-CRHF CIED Infection Report; Agile: MDT2260884, Version 2.0, 11/02/2015.

³ Birnie D, et al. Complications associated with defibrillation threshold testing: The Canadian experience. Heart Rhythm. 2008; 5(3):387-90.

Software Update Available to Correct Potential for SmartSync Telemetry Error

CareLink SmartSync™ Device Manager supporting Cobalt™ and Crome™ ICDs and CRT-Ds

Original Date of Communication: April 2022

STATUS UPDATE - OCTOBER 2024

As of 29 October 2024, Medtronic has received 219 reports of the SmartSync Telemetry Error in Cobalt and Crome devices. No serious adverse events or permanent harms have been reported.

ORIGINAL COMMUNICATION - APRIL 2022

Medtronic is notifying health care professionals of a software update for CareLink SmartSync™ Device

Managers (SmartSync) that will address a telemetry error that may occur with Medtronic Cobalt™ and Crome™ implantable cardioverter defibrillators (ICDs) and cardiac resynchronization therapy defibrillators (CRT-Ds).

Specifically, software application D00U005 version 6.0.3 will deploy an update to implanted devices that will correct the potential for temporary suspension of some device features (details below) due to a telemetry error involving inductive (non-Bluetooth) telemetry. As of 22 March 2022, 0.3% of devices have experienced this issue. No serious adverse events or permanent harms have been reported due to this error.

Medtronic representatives will work with you to ensure all SmartSync tablets in your facility are updated with application software D00U005 version 6.0.3 or higher. Once the software has been installed on a tablet, a patient's device will automatically receive an update (to prevent the telemetry error) during their next SmartSync session.

Details:

Some Cobalt and Crome devices may encounter a persistent "session-active" flag following the use of inductive telemetry. The persistent session-active flag is the result of a telemetry connection error that can occur when intermittent or disrupted signals manifest while communicating with the device at the end of the telemetry session. Inductive telemetry with a Cobalt/Crome device typically occurs during device interrogation with a CareLink ExpressTM Mobile reader head. A persistent session-active flag will result in temporary suspension of the following features (if available in the device) until the flag is cleared:

- Battery voltage measurements
- Capture Management™

- Atrial Lead Position Check™
- AdaptivCRT[™], EffectivCRT[™] diagnostic, and EffectivCRT[™] During AF
- Wavelet[™] template management
- Battery conditioning charges

Potential risks include loss of pacing or inadequate CRT support, and/or loss of Recommended Replacement Time (RRT) indicator.

When battery measurements are suspended for more than seven days, the longevity estimator cannot calculate a value and the estimator will display a grey bar with "???." Longevity estimates will be unavailable for approximately 82 weeks. A device that experiences a persistent session-active flag can be manually cleared via a specific sequence of steps, using a non-Bluetooth SmartSync telemetry session. Contact Medtronic Technical Services at 800-723-4636 for further instruction. After the persistent flag is manually cleared, the above features will automatically be restored. Remaining longevity estimates will resume approximately 82 weeks after the date the flag is cleared. The issue is unlikely to result in clinical impact to the patient given the features listed above can be restored with an inclinic SmartSync programmer session.

Devices manufactured after July 2021 have already received the software update and are not susceptible to the described behavior. Refer to Appendix A (below) for details on how to identify which Cobalt/Crome devices have already received the update.

Patient Management Recommendations:

We realize that each patient requires unique clinical considerations. In consultation with our Independent Physician Quality Panel (IPQP), Medtronic recommends continuing normal follow-up frequency per local clinic protocol.

Once the software is installed on a SmartSync tablet, please follow these recommendations:

- Patients routinely seen in the clinic will automatically receive the update during their next interrogation
 using an updated SmartSync tablet (D00U005 version 6.0.3 or higher). No additional programming of the
 device is required.
- Patients followed remotely who do not have regularly scheduled in-clinic sessions should have their next follow-up session conducted in clinic using an updated SmartSync tablet (D00U005 version 6.0.3 or higher). No additional programming of the device is required.

Note: If a patient's device displays a grey longevity estimator bar with "???," the device may have a persistent session-active flag. Contact Medtronic Technical Services at 800-723-4636 for assistance.

APPENDIX A

How to Confirm a Patient's Device Has Received the Update?

Each device will display a Device Configuration ID after interrogation by an updated SmartSync tablet, or after transmitting to CareLink. The Device Configuration ID can be found via the Parameters Report as noted below:

For SmartSync - the following is available from the Parameters Report PDF file.

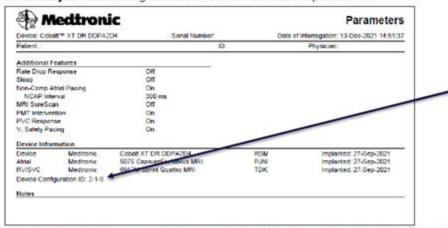


Image: Sample SmartSync-generated Parameters Report showing updated Device Configuration ID.

For CareLink - the following is available from the Transmission Details page by selecting 'More Reports' >

'Parameters.'



Image: Sample CareLink Parameters Report showing updated Device Configuration ID.

How do I update my SmartSync[™] application software for the issue described in the April/May 2022 communication?

On any tablet, you can update to the most recent version for all applications resident on that tablet by simply connecting to the internet and either automatically discover if new software is available by launching the SmartSync App (see images below), OR manually discover if new software is available by navigating to the Software Information

screen and perform "Check for Updates." Contact your local Medtronic representative or Medtronic Technical Services at 800-638-1991 if you need assistance.



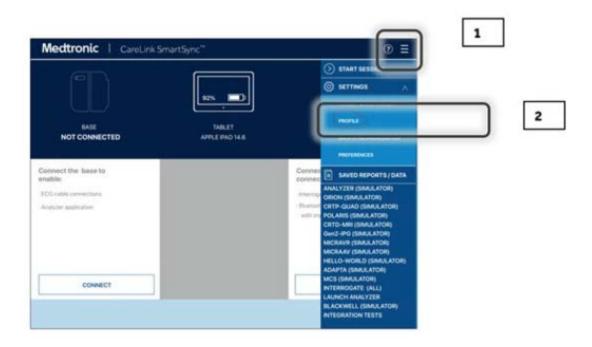
How do I confirm if a SmartSync tablet has already been installed with the updated software?

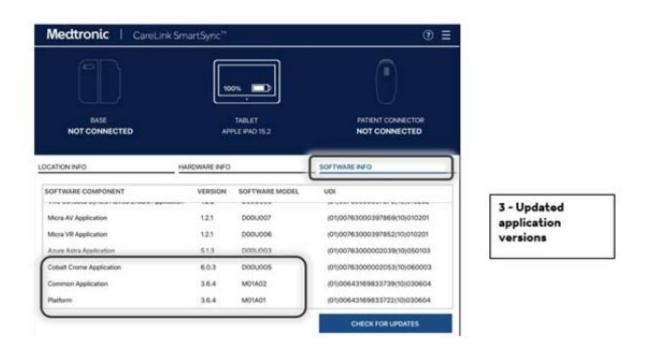
On any tablet, you can confirm the application software version for any device family by:

- 1. Selecting the MENU in the upper right corner of the SmartSync App [1]
- 2. Selecting PROFILE [2]
- 3. Selecting the SOFTWARE tab and scrolling through the SOFTWARE INFO list [3]

If the software update for this issue has already been installed, you will see the following versions listed:

- The Common/Platform application version is 3.6.4 (or higher)
- is 6.0.3 (or higher)





Reveal LINQ with TruRhythm - Brady & Pause Detections Disabled Following Electrical Reset

Reveal LINQ with TruRhythm Insertable Cardiac Monitoring Systems

Original Date of Communication: June 2021

STATUS UPDATE - OCTOBER 2024

This advisory is being addressed via a software update. Medtronic CareLink (2090) and Encore (29901) Programmer software, SW026 version 8.3, is available to correct a low rate of occurrence issue with Reveal LINQ ICMs (0.049%) where Brady and Pause detections are disabled following a partial electrical reset.

Reveal LINQ ICMs that are interrogated in-office with an updated 2090 or Encore programmer are no longer susceptible to this issue. This corrective fix to the device cannot be delivered with the Reveal LINQ™ Mobile Manager (LMM). Until the update is installed, future partial electrical resets may disable Brady and/or Pause detections as described in the June 2021 communication.

Note: The immediate availability of the software release is specific to countries that follow FDA approval, or that do not require software to be regulated. Release timing may differ for other geographies including those that require CE Mark approval. Check with your local Medtronic representative to determine if the software update is available in your region.

Please work with your local Medtronic Representative to update all 2090 and Encore device programmers. In addition, Medtronic requests you follow the below patient management recommendations:

Patient Management Recommendations:

- Reveal LINQ ICMs with <u>a confirmed partial electrical reset</u> will receive the corrective fix for this issue immediately by the device clinician completing the following steps:
 - Interrogate the ICM with an updated 2090 or Encore programmer (software application SW026 version 8.3). The corrective fix is automatically installed during initial interrogation. To confirm an ICM has successfully received the update, refer to Appendix A.
 - 2. Per the Instructions for Use (IFU), following any electrical reset, verify ICM parameters are set appropriately for the patient and reprogram if necessary.
- For Reveal LINQ ICMs that have <u>not</u> experienced a partial electrical reset, an update will occur during the
 next in-clinic visit in which an updated Model 2090 or Encore programmer installed with software
 application SW026 version 8.3 (or higher) is used to interrogate the ICM. Partial electrical resets will
 disable Brady and/or Pause detections as described in the June 2021 communication until the update is
 installed on to the patient's ICM.

- For patients who are actively followed on CareLink, continue routine monitoring for CareAlerts and verify notification settings for electrical resets.
- Per the IFU, notify your Medtronic representative if an electrical reset occurs. If a partial
 electrical reset is confirmed, the patient's ICM will require reprogramming.
- o During the programmer session, the corrective fix will be installed automatically.

ORIGINAL COMMUNICATION - JUNE 2021

This notice is to inform you that Reveal LINQ with TruRhythm ICMs that undergo a partial electrical reset appear to be programmed "ON," but are no longer able to detect and report Brady and Pause events to clinicians. Medtronic estimates that 0.049% of Reveal LINQ with TruRhythm ICMs have experienced a partial electrical reset resulting in the inability to detect Brady and Pause events. While there is a potential for underreporting due to lack of awareness that an electrical reset has occurred, there have been zero (0) serious or permanent harms or deaths reported as a result of this issue. After a partial electrical reset, these Brady and Pause episode types will not be reported to the clinician.

- Currently implanted/distributed Reveal LINQ with TruRhythm ICMs will receive a future software update to correct this issue delivered via the Model 2090 and Encore™ programmers. The corrective fix is anticipated to be available late calendar year 2021 (U.S.). Availability of the software will be communicated once Medtronic has obtained the necessary regulatory approvals.
- There will be an update for future manufactured Reveal LINQ with TruRhythm ICMs, which is anticipated
 to be available in the U.S. October 2021. Medtronic will inform physicians once this manufacturing
 update is implemented into newly manufactured Reveal LINQ with TruRhythm ICMs.

ISSUE DESCRIPTION

Medtronic has identified that Reveal LINQ with TruRhythm ICMs that undergo a partial electrical reset appear to be programmed "ON," but are no longer able to detect and report Brady and Pause events. A partial electrical reset is normal behavior that can occur when the device detects a possible issue with the device software. However, an error in the partial electrical reset implementation is causing this unintended behavior.

All Reveal LINQ with TruRhythm ICMs currently in distribution are susceptible to this issue. Through 10 May 2021, Medtronic has received 87 complaints related to an electrical reset. The projected rate of a Reveal LINQ with TruRhythm ICM experiencing a partial electrical reset that results in the inability to detect Brady and Pause events is 0.056% at 36 months. Complaint data suggests the majority of electrical resets were associated with Electromagnetic Interference (EMI) due to cardioversion or electrocautery. Potential harms include those associated with the risk of a delayed medical intervention or missed diagnosis for Brady and Pause events, and an explant procedure.

If a partial electrical reset occurs, CareLink™, Model 2090 and Encore programmer software and Reveal LINQ™ Mobile Manager (LMM) will continue to indicate that detection parameters are "ON;" however, Brady and Pause

events will not be automatically collected. The Patient Assistant (Patient Activator) will continue to function to manually trigger ECG collection, store the tracing, and mark symptoms.

Tachy and AT/AF detections are not affected by a partial electrical reset.

HOSPITAL RISK MANAGER ACTIONS (U.S. CUSTOMERS ONLY)

- Please share this notification with the Cardiology and cardiac monitoring departments,
 Pacemaker/Device Clinic leadership, and physicians who implant or manage patients with LINQ II insertable cardiac monitors (ICMs).
- 2. Complete the enclosed Confirmation Form and email to RS.CFQFCA@medtronic.com

PATIENT MANAGEMENT RECOMMENDATIONS

If an electrical reset has never occurred, all detection criteria are being monitored and recorded as programmed. Continue with normal follow-up per local clinic protocols for these patients.

Identifying if an electrical reset has occurred:

For patients who are actively followed on CareLink in the U.S: During our investigation of this issue, we identified patients whose device showed evidence of a partial electrical reset as of 10 May 2021. For those clinicians with identified patients, a supplemental letter was provided. If you have not received a supplemental letter, then none of your patients who are actively transmitting on CareLink were identified as having a recorded electrical reset event during our investigation.

All patients, including those on CareLink, should be carefully monitored for reports of an electrical reset condition. Follow instructions below.

- During in person or remote follow-up: If a device experiences an electrical reset, clinicians will be
 informed via programmer pop-up or CareLink display message. Actively monitor for these notifications
 at each patient follow-up, and contact Medtronic Technical Services should you receive an alert. Note:
 Once cleared, electrical reset notifications are no longer accessible.
- **Retroactively:** Review the Brady lifetime episode counter from the most recent session report (CareLink or in-office). If a report is not available, consider scheduling a follow-up for each patient being monitored for Brady or Pause events. Review the Brady lifetime episode counter:
 - o If the lifetime count for Brady is non-zero, a partial electrical reset has <u>not</u> occurred.
 - o If the lifetime count for Brady is zero, and the Brady detection parameter indicates it is "ON," a partial electrical reset <u>may</u> have occurred. Contact Medtronic Technical Services for assistance by emailing RS.LINQElectricalResetFCA@medtronic.com (U.S.) OR calling 1-800-929-4043 (U.S.).

Patients with a confirmed partial electrical reset:

- Medtronic medical staff, in consultation with our Independent Physician Quality Panel, recommends
 against device replacement for patients being monitoring for Tachy or AT/AF; continue normal patient
 follow-up.
- When monitoring for Brady or Pause events, it is important to note that the Patient Assistant (Patient
 Activator) will continue to manually mark symptoms even after a partial electrical reset. Patientactivated recordings are not impacted by this issue. If patients require monitoring for Brady and/or
 Pause events, and it is not acceptable to wait for the software update to become available (see details
 below), consider device replacement. Recognize that exposure to EMI could introduce this issue for new
 device implants that occur before the manufacturing update is implemented anticipated in the U.S. in
 October 2021.
- As a reminder, per the Reveal LINQ with TruRhythm ICM's Instructions for Use, contact Medtronic anytime an electrical reset occurs.

FUTURE SOFTWARE UPDATE AVAILABILITY

Medtronic is developing a programmer-delivered software update to correct this issue for Reveal LINQ with TruRhythm ICMs currently implanted or in distribution. Anticipated availability in the U.S. is late calendar year 2021; Medtronic representatives will inform you of the availability and work with you to install the software onto clinic and hospital 2090 and Encore programmers. LMM application software will be unable to deliver the software update for this issue. In order for patients with Reveal LINQ with TruRhythm ICMs to receive the update, the device will need to be interrogated with an updated 2090 or Encore programmer.

APPENDIX A

Reveal LINQ™ with TruRhythm™ Insertable Cardiac Monitoring Systems

Brady & Pause Detections Disabled Following Partial Electrical Reset

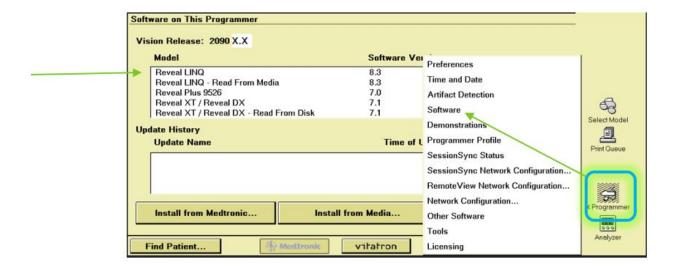
Software Update Available

How do I update my Model 2090 and Encore programmers with the Reveal LINQ with TruRhythm software described in the November 2021 communication)?

Software update SW026 version 8.3 can be installed onto all Model 2090 or Encore programmers through either the Medtronic Software Distribution Network (SDN) or via a USB. Medtronic representatives will work with you to install the software.

How do I confirm if a Model 2090 or Encore programmer has already been installed with the updated software (SW026 v8.3)?

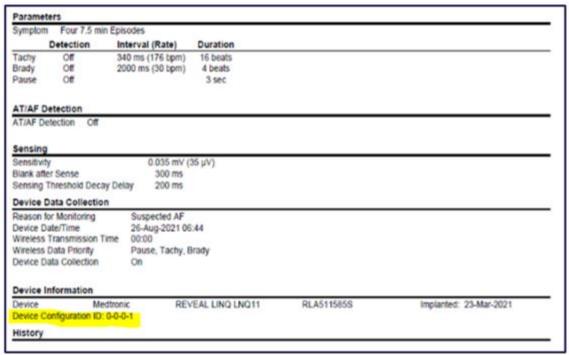
From the *Find Patient* screen on the programmer, Tap the Programmer Icon, select "Software," and scroll through the list of installed applications to find Reveal LINQ Software Version 8.3.



How do I confirm if a patient's Reveal LINQ ICM has received the software update?

Clinicians can confirm if a patient's ICM has received the software update by verifying the Device Configuration ID via a 2090 or Encore programmer (LMM will not display the Configuration ID). To locate the Device Configuration ID, enter a follow-up session and Print the Parameters Report. All Reveal LINQ ICMs that have received the software update will have their Configuration ID ending in a "1" (e.g. X-X-X-1).

NOTE: The Reveal LINQ Device Configuration ID can be viewed on CareLink beginning January 2022 after a manual transmission is completed by the patient.



LINQ II - Brady, Pause and PVC Detections Disabled Following Electrical Reset

LINQ II Insertable Cardiac Monitoring Systems

Original Date of Communication: June 2021

STATUS UPDATE - OCTOBER 2024

Medtronic released a software update in August 2023 to address this issue in LINQ II ICMs manufactured from July 2020 to June 2021. The update is available through SmartSync App 3.12.4 or higher.

Medtronic implemented a manufacturing update to all newly manufactured LINQ II ICMs released into distribution to prevent a partial electrical reset from disabling Brady, Pause and PVC event detection.

Updated LINQ II ICMs can be identified, before being implanted, by the GTIN that is printed under the barcode on the box. The new U.S. LINQ II GTIN ends with "002."

As a reminder, unused LINQ II devices manufactured prior to June 2021 were requested to be returned to Medtronic per the Original advisory (dated June 2021) – these devices cannot be updated in the field and will continue to be susceptible to the issue.

ORIGINAL COMMUNICATION - JUNE 2021

This notice is to inform you that LINQ II insertable cardiac monitors (ICMs) that undergo a partial electrical reset appear to be programmed "ON," but are no longer able to detect and report Brady, Pause and PVC events to clinicians. Medtronic estimates that 0.21% of LINQ II ICMs have experienced a partial electrical reset resulting in the inability to detect Brady, Pause and PVC events. While there is a potential for underreporting due to lack of awareness that an electrical reset has occurred, there have been zero (0) serious or permanent harms or deaths reported as a result of this issue. After a partial electrical reset, these Brady, Pause and PVC episode types will not be reported to the clinician.

- A correction for currently implanted LINQ II ICMs is not available.
- We are requesting that hospitals quarantine all LINQ II ICMs on hospital shelves. Physicians should cease
 implanting any remaining LINQ II ICMs that may remain in shelf stock and return any unused product to
 Medtronic.
- There will be an update for future manufactured LINQ II ICMs, which is anticipated to be available in the U.S. July 2021.

This letter contains a description of the information known to date and patient management recommendations.

ISSUE DESCRIPTION

Medtronic has identified that LINQ II ICMs that undergo a partial electrical reset appear to be programmed "ON," but are no longer able to detect and report Brady, Pause, and PVC events. A partial electrical reset is normal behavior that can occur when the device detects a possible issue with the device software. However, an error in the partial electrical reset implementation is causing this unintended behavior.

All LINQ II ICM devices currently in distribution are susceptible to this issue. Through 10 May 2021, Medtronic has received 37 complaints related to an electrical reset. The projected rate of a LINQ II ICM experiencing a partial electrical reset that results in the inability to detect Brady, Pause, and PVC events is 0.73% at 36 months. Complaint data suggests the majority of electrical resets were associated with Electromagnetic Interference (EMI) due to cardioversion or electrocautery. Potential harms include those associated with the risk of a delayed medical intervention or missed diagnosis for Brady, Pause, and/or PVC events, and an explant procedure.

If a partial electrical reset occurs, CareLink™ and Reveal LINQ™ Mobile Manager (LMM) will continue to indicate that detection parameters are "ON;" however, Brady, Pause, and PVC events will not be automatically collected. The Patient Assistant (Patient Activator) will continue to function to manually trigger ECG collection, store the tracing and mark symptoms.

Tachy and AT/AF detections are not affected by a partial electrical reset.

HOSPITAL RISK MANAGER ACTIONS (U.S. CUSTOMERS ONLY)

Medtronic is requesting customers with affected product on hand to take the following actions:

- 1. Identify and quarantine all unused affected Medtronic LINQ II ICMs.
- 2. Return all unused affected product in your inventory to Medtronic. Contact Medtronic Customer Service at 1-800-848-9300 to initiate a product return. Your local Medtronic Representative can assist you as necessary in initiating the return of this product.
- Please share this notification with the Cardiology and cardiac monitoring departments,
 Pacemaker/Device Clinic leadership, and physicians who implant or manage patients with LINQ II insertable cardiac monitors (ICMs).
- 4. Complete the enclosed Confirmation Form and email to RS.CFQFCA@medtronic.com

PATIENT MANAGEMENT RECOMMENDATIONS

If an electrical reset has never occurred, all detection criteria are being monitored and recorded as programmed. Continue with normal follow-up per local clinic protocols for these patients.

Identifying if an electrical reset has occurred:

For patients who are actively followed on CareLink in the U.S: During our investigation of this issue, we identified patients whose device showed evidence of a partial electrical reset as of 10 May 2021. For those clinicians with identified patients, a supplemental letter was provided. If you have not received a supplemental letter, then none of your patients who are actively transmitting on CareLink were identified as having a recorded electrical reset event during our investigation.

All patients, including those on CareLink, should be carefully monitored for reports of an electrical reset condition. Follow instructions below.

- During in person or remote follow-up: If a device experiences an electrical reset, clinicians will be
 informed via programmer pop-up or CareLink display message. Actively monitor for these notifications
 at each patient follow-up, and contact Medtronic Technical Services should you receive an alert. Note:
 Once cleared, electrical reset notifications are no longer accessible.
- **Retroactively:** Review the Brady lifetime episode counter from the most recent session report (CareLink or in-office). If a report is not available, consider scheduling a follow-up for each patient being monitored for Brady, Pause or PVC events. Review the Brady lifetime episode counter:
 - o If the lifetime count for Brady is non-zero, a partial electrical reset has **not** occurred.
 - If the lifetime count for Brady is zero, and the Brady detection parameter indicates it is "ON," a partial electrical reset <u>may</u> have occurred. Contact Medtronic Technical Services for assistance by emailing RS.LINQElectricalResetFCA@medtronic.com (U.S.) OR calling 1-800-929-4043 (U.S.).

Patients with a confirmed partial electrical reset:

- Medtronic medical staff, in consultation with our Independent Physician Quality Panel, recommends
 against device replacement for patients being monitoring for Tachy or AT/AF; continue normal patient
 follow-up.
- When monitoring for Brady, Pause, or PVC events, device replacement may be appropriate. Consider the following before device replacement:
 - It is important to note that the Patient Assistant (Patient Activator) will continue to manually mark symptoms even after a partial electrical reset. Patient-activated recordings are not impacted by this issue.
 - o If replacement is desirable, consider Reveal LINQ with TruRhythm™ or alternative ICM. While Reveal LINQ devices are also are susceptible to this issue (see correction notice, Reveal LINQ™ with TruRhythm™ Insertable Cardiac Monitoring Systems Brady & Pause Detections Disabled Following Partial Electrical Reset), the observed rate is 0.049% for Reveal LINQ with TruRhythm ICMs compared to 0.21% for LINQ II ICMs.

Note: Implanted Reveal LINQ with TruRhythm ICMs have the ability to receive a future software update to correct this issue, which will be implemented via the Model 2090 and Encore[™] programmers, and is anticipated to be available in the U.S. late calendar year 2021.

- Future manufactured LINQ II devices will have a correction for this issue implemented during manufacturing pending regulatory approval of the corrective fix, but initial supply may be limited.
- As a reminder, per the LINQ II ICM's Instructions for Use, contact Medtronic anytime an electrical reset occurs.

Potential for Shortened RRT-to-EOS in Subset of ICDs and CRT-Ds

Subset of ICDs and CRT-Ds

Original Date of Communication: February 2021

STATUS UPDATE - OCTOBER 2024

As of 15 October 2024, approximately 141,378 devices susceptible to this issue are estimated to still be active worldwide. Observed rate of occurrence is 0.16% and projected rate for the affected population of devices remains 0.22%. Devices with higher pacing outputs and high pacing percentages (e.g., CRT-D devices) have the lowest probability of occurrence (refer to Appendix A of the original communication for further details – see below). No permanent patient harms have been reported due to this issue.

ORIGINAL COMMUNICATION – FEBRUARY 2021

In February 2021, Medtronic informed physicians of a potential issue for a subset of Implantable Cardioverter Defibrillators (ICDs) and Cardiac Resynchronization Therapy Defibrillators (CRT-Ds). Medtronic has identified that a small percentage of implanted cardiac devices, from a well-defined subset, may experience a shortened Recommended Replacement Time (RRT) to End of Service (EOS) interval following an earlier-than-expected RRT observation. The subset of ICDs and CRT-Ds affected by this issue were last implanted in February 2019 and manufactured with a specific battery design that is no longer being distributed.

We have received no reports of permanent harm to patients as a result of this issue.

Approximately 339,900 devices susceptible to this issue are estimated to still be active worldwide. Through 4 January 2021, confirmed events (observed rate 0.07%) have involved a rapid drop in battery voltage ranging from days to months, with unexpected RRT as one of the primary reported observations. For those devices in which RRT triggered earlier than expected, the median time from RRT to the EOS observation was 14 days. In a small number of the cases, no output/no telemetry was reported prior to device replacement. Medtronic projects approximately 0.22% of the affected device population may experience this issue during their service life.

The rapid depletion is caused by a latent shorting mechanism involving lithium plating, resulting from a thermal gradient between the anode and cathode components of the battery. **Devices with higher pacing outputs and high pacing percentages (e.g. CRT-D devices) have the <u>lowest probability of occurrence (refer to Appendix A – see below)</u>. Conversely, devices with low current drain (evidenced by a longer overall service time from implant to RRT) have a higher probability of experiencing this issue. Importantly, the probability of this issue developing is constant after approximately three years of service time.**

Patient Management Guidance

We realize that each patient requires unique clinical considerations. In consultation with our Independent Physician Quality Panel (IPQP), Medtronic **recommends** the following:

- Continue normal follow-up per local clinical protocol.
 - o Recognize that patients who require significant pacing support and high voltage therapy have the lowest risk for this issue See Appendix A for additional details.
 - Where possible, take advantage of the CareLink[™] home monitoring system and the wireless low battery voltage CareAlert.
 - The low battery voltage audible alert is shipped On with high-urgency tones; Remind patients to contact their clinic if they hear an audible alert, particularly since patients may be opting to delay clinic visits due to COVID-19 guidance.
 - o Inform a Medtronic Representative of any unexpected device behaviors.
 - Be aware that the inability to interrogate the device, or to transmit data, may be an indicator that the device has experienced this issue.
- If unexpected RRT is observed, prompt replacement of the device should occur commensurate with the underlying clinical situation of the patient:
 - For non-pacing dependent patients or for primary prevention ICD patients, replacement within 1 week of an unexpected RRT notification is recommended.
 - o For pacing dependent patients, immediate replacement is recommended following an unexpected RRT notification.

Note: For all patients, this issue can also manifest as an unexpected change in the remaining longevity estimate that cannot be attributed to programming changes, or changes in use conditions.

Medtronic medical staff in consultation with the IPQP <u>recommends against prophylactic replacement</u> due to the low rate of occurrence and the low potential for permanent harm when prompt replacement occurs in response to an unexpected RRT.

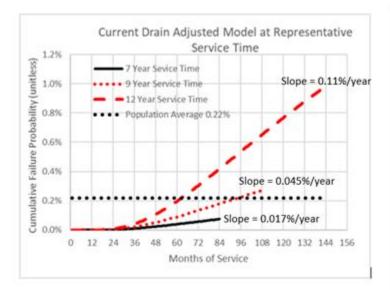
Patients and clinicians may determine if a specific device is affected by looking up the serial number on Medtronic's Product Performance website: http://wwwp.medtronic.com/productperformance/

APPENDIX A

The table below provides a comparison of sample use conditions and their associated, projected service time (Implant to Recommended Replacement Time), along with their cumulative and per-year risk of encountering rapid depletion due to a latent shorting mechanism in the battery. Devices with higher pacing outputs and high pacing percentages have the lowest probability of occurrence. There have been no reports of permanent harm to patients as a result of this issue.

Probability (Risk per Year) of Rapid Depletion due to this Issue as a Function of Service Time

Projected Service Time * (based on sample programmed settings and use conditions)	Projected Risk per Year & Total Cumulative Risk at end of service time++	Notes/Example
12-year service time	0.11% per year, 0.98% cumulative	VR ICD patient with 0% pacing and no shocks delivered
10.25-year service time	0.070% per year, 0.50% cumulative	VR ICD patient with 50% pacing history and two (2) or fewer shocks per year
9-year service time	0.045% per year, 0.27% cumulative	DR ICD patient with little-to-no pacing history (e.g. 10%AP, 25%VP, and two (2) or fewer shocks per year)
8.25-year service time	0.033% per year, 0.18% cumulative	DR ICD patient with complete heart block (10% AP and 100% VP, and two (2) or fewer shocks per year)
7-year service time	0.017% per year, 0.075% cumulative	CRT-D patient with 15% AP, 90% RVP, 100% LVP, and two (2) or fewer shocks per year
* Assumes current drain remains stable throughout life of device (i.e.	++ Per annum risk of issue becomes constant after approximately 3 years	A output = 1.5V, 0.4ms, 500 ohms
No change in remaining longevity due to reprogramming or changes in use	of service time. Cumulative risk = early risk plus annual risk over the	RV output = 2.0V, 0.4ms, 500 ohms
conditions)	projected service time.	LV output = 2.5V, 0.4ms, 500 ohms
		Average pacing rate = 75 bpm



Cumulative Probability is the expected risk for a device to experience this issue between implant and end of service. When risk is evaluated for a device that has reached a service life beyond 3 years, the remaining risk can be estimated based on the yearly risk value shown.

The Population Average (0.22%) is the cumulative probability for the full subset of devices susceptible to this issue. This value takes into account expected longevity and patient mortality. Not all devices with projected service time of 12 years will be in service all 12 years.

Key Points:

Slope of the curve reflects the risk per year based on sample service times of 7, 9, and 12 years.

Slope (risk per year) is constant after approximately 3 years of service time.

Performance Note: Potential for no output/no telemetry condition in subset of IPG and CRT-P products due to ceramic capacitor leakage pathway

Azure[™] and Astra[™] pacemakers, and Percepta[™], Serena[™] and Solara[™] CRT-P

Original Date of Communication: May 2019

STATUS UPDATE - OCTOBER 2024

As of 15 October 2024, there have been a total of 32 confirmed events worldwide associated with this failure mode. No additional deaths, beyond the two deaths previously disclosed*, have been reported since the October 2020 update. Confirmed events included reports of no output, premature depletion and electrical reset that reverted to VVI 65 operation.

Medtronic's ongoing monitoring of these failures have allowed us to improve long-term modeling projections for future device failures. The overall projected lifetime rate of occurrence for the remaining active devices manufactured with the original low voltage capacitor is projected to be 0.025%.

All products in distribution are unaffected. The specific low voltage capacitor susceptible to this issue was last used in manufacturing 01 June 2019. Patient management recommendations remain unchanged from the original posting (refer to the May 2019 text below).

*Assessment for cause of death determined loss of pacing therapy could not be ruled out as a contributing factor.

ORIGINAL COMMUNICATION - MAY 2019

Medtronic has identified a rare but potentially serious failure mode in a population of Azure[™] and Astra[™] pacemakers, and Percepta[™], Serena[™] and Solara[™] cardiac resynchronization therapy pacemakers (CRT-P), manufactured with a specific multilayer ceramic capacitor. These devices continue to perform within reliability projections.

While inherently very reliable, a known failure mode of these capacitors is the potential for internal cracking that can be caused by thermal-mechanical stress during manufacturing. Under rare conditions, internal cracking within a capacitor may result in the development of a leakage pathway, causing high current drain and leading to rapid battery depletion. While the issue presents as rapid battery depletion, this is not a battery performance issue.

As of April 26, 2019, three complaints out of \sim 266,700 devices distributed worldwide since February 2017, have been received that included a no output /no telemetry scenario resulting from rapid battery depletion. Battery depletion due to this issue can range from several days to several weeks. One of these reported events contributed to a patient

death. The three confirmed failures occurred within 9 months post implant. The projected rate for this issue is 0.0028%, with the most susceptible period for a leakage pathway to develop in the capacitor being the first 12 months post implant.

Based on the low predicted rate of failure and the recent implementation of process and component enhancements, Medtronic expects few, if any, additional events to occur. Medtronic, in consultation with our Independent Physician Quality Panel, does not recommend device replacement. Physicians should continue normal patient follow-up in accordance with standard practice, and where possible, continue to utilize the low battery voltage wireless CareAlertTM (shipped ON), together with remote monitoring via CareLinkTM home monitor or the MyCareLink HeartTM mobile app. Per the instructions for use, at each follow-up, verify the status of the implanted system as well as the clinical effectiveness of the device. Pay attention to any unexpected changes in remaining longevity estimates or the inability to interrogate the device and/or transmit data.

Contact Medtronic Technical Services if you have concerns on a specific patient.

Brady Technical Services | rs.techservices@medtronic.com | 800-505-4636

Potential Conductor Wire Fracture

6930, 6931, 6948, 6949 Sprint Fidelis Defibrillation Leads

Original Date of Communication: October 2007

STATUS UPDATE - OCTOBER 2024

As of October 15, 2024, of the initial implant population of 205,600 in the United States, approximately 26,800 remain implanted. According to Product Surveillance Registry results, lead survival is estimated to be 63.5% (+6.6/-6.0%) at 180 months. As the implanted population ages and the sample size increases for each time interval, the accuracy of the estimated survival probability will increase as shown by tighter confidence intervals.

Initial Affected Population	Number of Confirmed Advisory Related Events	Estimated Remaining Active Population
279,500 Worldwide (205,600 United States)	7,334 Worldwide (5,266 United States)	36,600 Worldwide (26,800 United States)

ORIGINAL COMMUNICATION - OCTOBER 2007

PRODUCT

All Model 6930, 6931, 6948, and 6949 implantable defibrillation leads

ADVISORY

There are two primary locations where chronic conductor fractures have occurred on Sprint Fidelis leads: 1) the distal portion of the lead, affecting the anode (ring electrode) and 2) near the anchoring sleeve tie-down, predominantly affecting the cathode (helix tip electrode), and occasionally the high voltage conductor. These two locations account for approximately 90% of the chronic fractures identified in Returned Product Analysis (RPA). The remaining 10% of chronic fractures occurred in the DF-1 connector leg and the proximal portion of the RV coil. High voltage conductor fractures could result in the inability to deliver defibrillation therapy. Anode or cathode conductor fractures (at either location) may present clinically as increased impedance, oversensing, increased interval counts, multiple inappropriate shocks, and/or loss of pacing output.

PATIENT MANAGEMENT RECOMMENDATIONS (UPDATED APRIL 2011)

The Lead Integrity Alert (LIA) provides three days advance notice prior to inappropriate therapy to 76% of patients with lead fractures¹. As a result, we strongly recommend that all Sprint Fidelis patients who have the ability to upgrade to Lead Integrity Alert do so promptly. Also ensure that high voltage lead impedance alerts (maximum of 100 ohms) are programmed. When a lead fracture is suspected or confirmed, immediate patient attention is strongly recommended. Physicians should inform their patients to seek medical attention without delay if they experience unexpected shocks.

- If a Fidelis lead fracture of any type has occurred, we recommend implanting a new high voltage lead with or without extraction of the Fidelis lead.
- In patients with normal device function and no manifestation of lead fracture, no action is recommended. The risk of prophylactic intervention appears to be greater than serious injury resulting from lead fracture even for pacemaker dependent patients, except in select individual patient circumstances as determined by the physician.
- In the event of a device change-out or upgrade procedure, with no manifestation of lead fracture, consider the patient age and lead model data above, as well as patient life expectancy, co-morbidities, ease of extraction related to implant time, patient preference, etc., for the following options:
 - Leave a properly performing lead intact.
 - o Implant a new ICD lead without extraction of the existing lead.
 - Carefully consider all factors before prophylactic placement of a pace-sense lead. Data shows an increased risk of high voltage conductor fracture if a pace-sense conductor fracture has previously occurred.
 - Individual patient circumstances may warrant extracting and implanting a new ICD lead. If warranted, Medtronic's Independent Physician Quality Panel recommends the lead extraction procedure be performed by a physician with extensive lead extraction experience.²

Footnotes:

- 1: Swerdlow C, Gunderson, B, et al. "Downloadable Algorithm to Reduce Inappropriate Shocks Caused by Fractures of Implantable Cardioverter-Defibrillator Leads", Circulation, November 2008, 118: 2122-2129.
- 2: "Transvenous Lead Extraction: Heart Rhythm Society Expert Consensus on Facilities, Training, Indications, and Patient Management", Heart Rhythm, Vol 6, No 7, July 2009.

Product Education Brief: Alert Threshold for Lead Impedances

Azure[™] and Astra[™] pacemakers, and Percepta[™], Serena[™] and Solara[™] CRT-P

Original Date of Communication: April 2023

Overview

This Product Education Brief describes a lead impedance alert behavior in Medtronic Azure[™], Astra[™], Percepta[™], Serena[™], and Solara[™] devices that may be observed when the pacing lead impedance displayed is slightly above the programmed lower alert threshold.

Details regarding CareAlerts and impedance measurements

In Azure, Astra, Percepta, Serena, and Solara devices, a CareAlert may be triggered when the lead impedance displayed is slightly above the programmed lower alert threshold.

See Figure 1 and 2 for an example case where the lower threshold for a lead impedance alert is programmed at 200 ohms. In the Lead Impedance Trend (Figure 1) the precise measured impedance value is 209 ohms; and yet in the CareAlert display (Figure 2) an alert was triggered indicating the impedance crossed the 200 ohm impedance threshold, and suggesting the impedance is 190 ohms. This scenario can happen due to the range of impedance values used for alert monitoring. In this scenario, the devices are functioning within design specifications and tolerances.

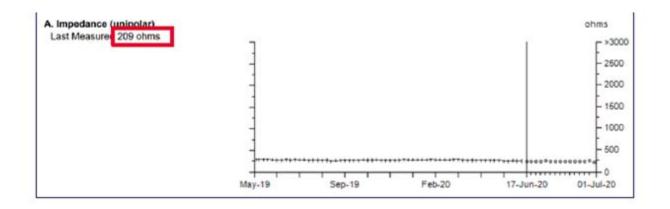


Figure 1-Lead Impedance Trend showing precise impedance values over time

Date/Time	Event		•	Threshold
01-Jul-2020 03:00:00	*A. Unipolar lead impedanc	190 ohms.		200 ohms

Figure 2- CareAlert triggered showing 190 ohms impedance value with a 200ohm alert threshold

While most leads are programmed to pace bipolar, every night the device will assess all lead impedance vectors. Unipolar measurements tend to be lower than bipolar measurements in the same system. Therefore, the nightly unipolar lead impedance measurement will likely be closer to the programmed lower alert threshold than the bipolar measurement.

The impedance value range for alerts is never higher than the measured impedance, so all impedance values that are below the programmed threshold will generate an alert as programmed.

Patient Management

Clinicians should continue to follow patients per their standard clinical practice when a CareAlert triggers for lead impedances. Impedance alerts are designed to prompt the clinician to review impedances in the Lead Impedance Trend Log. The Lead Impedance Trend records precise lead impedance measurements over time. These historic impedance measurements provide evidence as to whether the impedance is stable and functioning as designed (albeit near the programmed threshold); or unstable and necessitating further assessment and/or close monitoring. Note: If impedance values reported in the Lead Impedance Trend indicate impedances are below the programmed lower threshold, then the lead should be assessed for possible insulation breach per standard clinical practice.

Procedure Education Brief: Micra TPS Implant

Micra TPS devices

Original Date of Communication: November 2021

Overview

This Medtronic Procedure Education Brief provides a reminder of specific implant procedure safety recommendations included in the current labeling for Micra™ VR and Micra™ AV Transcatheter Pacing System (TPS) specifically from the Micra Instructions for Use (IFU) and the Micra implanter training program. Following instructions provided in the IFU and implanter training can reduce the risk of cardiac perforation, especially considerations for delivery system steering, repositioning the device, and patient selection.

Micra IFU and Implant Procedure Training

The Micra IFU is available on the Medtronic electronic manuals website (https://manuals.medtronic.com/manuals/main/region). Implanter training material for implanters who have attended training, and been certified to implant Micra TPS, can be found on the Medtronic Academy website. These instructional materials provide recommendations that limit implant complications such as:

- patient selection considerations to minimize perforation risk
- steering the delivery system with the use of fluoroscopy
- identifying implant location at the right ventricular septum with the use of contrast-enhanced fluoroscopy
- confirming position on the septum with contrast-enhanced fluoroscopy prior to deployment
- considerations for repositioning the device
- ensuring attending staff are prepared to manage pericardial effusion and tamponade, including immediate access to echocardiography equipment and availability of a pericardiocentesis kit
- recognizing clinical signs and symptoms of pericardial effusion and tamponade in order to minimize clinical response time
- preparedness for cardiac surgical intervention

Micra Safety and Effectiveness Data

On 17 November 2021, the US FDA posted a Letter to Healthcare Providers (*Leadless Pacing Systems: Risk of Major Complications Related to Cardiac Perforation During Implantation - Letter to Health Care Providers*) reminding physicians about the rare but possible risk of cardiac perforations associated with leadless pacemaker implantation. They reiterated the specific recommendations from Medtronic Micra implant training and IFU (reviewed above). This communication can be found here: https://www.fda.gov/medical-devices/medical-device-safety/letters-health-care-providers.

While regulatory agencies and Micra implanters are aware that cardiac perforation is a known risk, the FDA Letter to Healthcare Providers included data for which implanters may be seeking additional context. The letter indicated that

risk of cardiac perforation between transvenous pacing implants and Micra implants are similar, and that Micra implant complication rates are within expectations. The letter also indicated that in some scenarios, when a perforation occurs with a Micra implant procedure, the severity of the perforation complications can be higher than when a perforation occurs with a transvenous implant procedure.

Data from our Global Complaint Handling database suggests that the Micra rate of perforation is 0.6% and the rate of perforation related death is 0.13% out of over 100,000 implants worldwide. The Micra real-world perforation rate is in-line with, or lower than, the perforation rate observed in pre-market or post-market clinical studies¹.

Since Micra received pre-market approval in 2016, Medtronic has continuously monitored its safety and effectiveness. Multiple studies have shown that Micra has a high rate of implant success (exceeding 99%)^{2,3}. Additionally, in the global Micra Investigational Device Exemption (IDE) Trial, Micra has been shown to reduce the risk for major complications compared to transvenous implants (through 12-months) by 48%², and in the global Micra Post Approval Registry by 63%³.

Medtronic is further assessing the outcomes of Micra in the Micra Coverage with Evidence Development (CED) Study, which is a continuously enrolling, observational, cohort study evaluating complications, utilization, and outcomes of Micra.

Recent publications from the Micra CED Study in July 2021⁴ and November 2021⁵ based on 5,746 Micra patients and 9,622 with contemporaneously implanted transvenous single-chamber pacing patients show that at time of implant, Micra patients tend to be sicker than the transvenous single-chamber pacemaker population. Micra patients have a higher comorbidity burden as measured by the Charlson comorbidity index (5.1 vs 4.6, P<0.001) and a higher rate of end stage renal disease (12.0% vs 2.3%, P<0.001)⁴. Acute and longer-term outcomes reported in these publications are shown in the table below.

Measure	Unadjusted Results	Results Adjusted for Patient Medical History
	(Micra vs Transvenous-VVI)	(Micra vs Transvenous-VVI)
Acute (30-day) device-related complications including dislodgement, infection, pocket complications ⁴	1.4% vs 2.6% (P<0.001)	1.4% vs 2.5% (P<0.001)
Total acute (30-day) complications ⁴	8.4% vs 7.3%(P=0.02)	7.7% vs 7.4% (P=0.49)
Cardiac perforation/effusion⁴	0.8% vs 0.4% (P<0.001)	0.8% vs 0.4% (P<0.001)
30-day all-cause mortality⁵	4.4% vs 3.8% (P=0.10)	4.0% vs 4.4% (P=0.60)

2-year reintervention rate ⁵	3.0% vs 4.8% (P=0.006)	3.1% vs 4.9% (P=0.003)
2-year chronic complications⁵	4.9% vs 6.5% (P<0.001)	4.6% vs 6.5% (P<0.001)
2-year all-cause mortality⁵	34.0% vs 31.6% (P=0.002)	31.4% vs 32.5% (P=0.37)

Medtronic monitors and evaluates product performance and publishes device performance data on our product performance website http://productperformance.medtronic.com. In addition, Medtronic continues to collaborate with physicians and regulatory agencies to improve patient outcomes and clinical experience as part of our dedication to patient safety and product effectiveness.

¹ Micra IDE: 1.8% (13/726), Micra post-approval registry 0.8% (15/1811), Micra Coverage with Evidence Development 0.8% (47/5746)

² Reynolds et al. *NEJM* 2016; 374(6): 533-541.

³ El-Chami et al. *Heart Rhythm* 2018; 15(12): 1800-1807.

⁴ Piccini et al. *JAMA Cardiology* 2021; 6(10): 1187-1195.

⁵ El-Chami et al. *EHJ* 2021; ePub ahead of print

Legacy Models

Medtronic, at its discretion, may stop providing updated performance information on models in alignment with the inclusion criteria defined in the methods for estimating. Listed below are the final product performance reports for legacy models.

GENERATORS

Cardiac Resynchronization Therapy (CRT) Defibrillators

Product Name	Model	Final Issue
Cardia CRT-D	D384TRG	2023 2nd Edition (Issue 89)
Concerto CRT-D	C154DWK	2016 1st Edition (Issue 74)
Concerto CRT-D	C164AWK	2016 1st Edition (Issue 74)
Concerto CRT-D	C174AWK	2016 1st Edition (Issue 74)
Concerto II CRT-D	D274TRK	2023 2nd Edition (Issue 89)
Concerto II CRT-D	D294TRK	2023 2nd Edition (Issue 89)
Consulta CRT-D	D204TRM	2023 2nd Edition (Issue 89)
Consulta CRT-D	D214TRM	2023 2nd Edition (Issue 89)
Consulta CRT-D	D224TRK	2024 2nd Edition (Issue 91)
Consulta CRT-D	D234TRK	2023 2nd Edition (Issue 89)
InSync II Marquis	7289	2012 1st Edition (Issue 66)
InSync Maximo	7303	2012 1st Edition (Issue 66)
InSync Maximo	7304	2016 1st Edition (Issue 74)
InSync Sentry	7297	2012 1st Edition (Issue 66)
InSync Sentry	7299	2016 1st Edition (Issue 74)
Maximo II CRT-D	D264TRM	2023 2nd Edition (Issue 89)
Protecta CRT-D	D334TRG	2023 2nd Edition (Issue 89)
Protecta CRT-D	D334TRM	2023 2nd Edition (Issue 89)
Protecta XT CRT-D	D314TRM	2023 2nd Edition (Issue 89)

Cardiac Resynchronization Therapy (CRT) Pacemakers

Product Name	Model	Final Issue
InSync	8040	2016 1st Edition (Issue 74)
InSync III	8042	2023 2nd Edition (Issue 89)

Implantable Cardioverter Defibrillators (ICDs)

Product Name	Model	Final Issue
Entrust AT	D153ATG	2019 2nd Edition (Issue 81)
Entrust AT	D154ATG	2019 2nd Edition (Issue 81)
Entrust DR	D153DRG	2019 2nd Edition (Issue 81)
Entrust DR	D154DRG	2019 2nd Edition (Issue 81)
Entrust Escudo	D144DRG	2019 2nd Edition (Issue 81)

Implantable Cardioverter Defibrillators (ICDs) continued

Product Name	Model	Final Issue
Entrust Escudo	D144VRC	2019 2nd Edition (Issue 81)
Entrust VR	D153VRC	2019 2nd Edition (Issue 81)
Entrust VR	D154VRC	2019 2nd Edition (Issue 81)
GEM	7227B	2011 1st Edition (Issue 64)
GEM	7227Cx	2011 1st Edition (Issue 64)
GEM	7227D	2011 1st Edition (Issue 64)
GEM	7227E	2011 1st Edition (Issue 64)
GEM DR	7271	2011 1st Edition (Issue 64)
GEM III DR	7275	2012 1st Edition (Issue 66)
GEM III VR	7231Cx	2016 1st Edition (Issue 74)
Intrinsic	7288	2016 1st Edition (Issue 74)
Marquis DR	7274	2016 1st Edition (Issue 74)
Marquis VR	7230B	2019 2nd Edition (Issue 81)
Marquis VR	7230Cx	2019 2nd Edition (Issue 81)
Marquis VR	7230E	2019 2nd Edition (Issue 81)
Maximo DR	7278	2017 1st Edition (Issue 76)
Maximo VR	7232B	2019 2nd Edition (Issue 81)
Maximo VR	7232Cx	2023 2nd Edition (Issue 89)
Maximo VR	7232E	2019 2nd Edition (Issue 81)
Onyx	7290Cx	2013 1st Edition (Issue 68)
Protecta DR	D334DRG	2023 2nd Edition (Issue 89)
Protecta DR	D334DRM	2023 2nd Edition (Issue 89)
Protecta VR	D334VRG	2023 2nd Edition (Issue 89)
Protecta VR	D334VRM	2023 2nd Edition (Issue 89)
Protecta XT VR	D314VRG	2024 2nd Edition (Issue 91)
Protecta XT VR	D314VRM	2024 2nd Edition (Issue 91)
Secura DR	D204DRM	2023 2nd Edition (Issue 89)
Secura DR	D214DRM	2023 2nd Edition (Issue 89)
Secura DR	D224DRG	2024 2nd Edition (Issue 91)
Secura DR	D234DRG	2023 2nd Edition (Issue 89)
Secura VR	D204VRM	2023 2nd Edition (Issue 89)
Secura VR	D224VRC	2023 2nd Edition (Issue 89)
Virtuoso DR	D154AWG	2019 2nd Edition (Issue 81)
Virtuoso DR	D164AWG	2023 2nd Edition (Issue 89)
Virtuoso II DR	D274DRG	2023 2nd Edition (Issue 89)
Virtuoso II DR	D294DRG	2023 2nd Edition (Issue 89)
Virtuoso II VR	D274VRC	2023 2nd Edition (Issue 89)
Virtuoso VR	D154VWC	2019 2nd Edition (Issue 81)
Virtuoso VR	D164VWC	2023 2nd Edition (Issue 89)

Implantable Pulse Generators (IPGs)

Product Name	Model	Final Issue
Advisa DR	A4DR01	2019 1st Edition (Issue 80)
AT500	AT501	2013 1st Edition (Issue 68)
EnPulse	E2D01	2017 2nd Edition (Issue 77)
EnPulse	E2D03	2017 2nd Edition (Issue 77)
EnPulse DR	E1DR01	2017 2nd Edition (Issue 77)
EnPulse DR	E1DR03	2017 2nd Edition (Issue 77)
EnPulse DR	E1DR06	2017 2nd Edition (Issue 77)
EnPulse DR	E1DR21	2017 2nd Edition (Issue 77)
EnPulse DR	E2DR01	2017 2nd Edition (Issue 77)
EnPulse DR	E2DR03	2017 2nd Edition (Issue 77)
EnPulse DR	E2DR06	2017 2nd Edition (Issue 77)
EnPulse DR	E2DR21	2017 2nd Edition (Issue 77)
EnPulse DR	E2DR31	2017 2nd Edition (Issue 77)
EnPulse DR	E2DR33	2017 2nd Edition (Issue 77)
EnPulse SR	E2SR01	2017 2nd Edition (Issue 77)
EnPulse SR	E2SR03	2017 2nd Edition (Issue 77)
EnPulse SR	E2SR06	2017 2nd Edition (Issue 77)
EnPulse VDD	E2VDD01	2017 2nd Edition (Issue 77)
EnRhythm DR	P1501DR	2023 2nd Edition (Issue 89)
EnRhythm MRI	EMDR01	2017 1st Edition (Issue 76)
Kappa 400 DR	KDR401	2017 1st Edition (Issue 76)
Kappa 400 DR	KDR403	2017 1st Edition (Issue 76)
Kappa 400 SR	KSR401	2017 1st Edition (Issue 76)
Kappa 400 SR	KSR403	2017 1st Edition (Issue 76)
Kappa 600 DR	KDR601	2012 1st Edition (Issue 66)
Kappa 600 DR	KDR603	2012 1st Edition (Issue 66)
Kappa 600 DR	KDR606	2012 1st Edition (Issue 66)
Kappa 600 DR	KDR651	2012 1st Edition (Issue 66)
Kappa 600 DR	KDR653	2012 1st Edition (Issue 66)
Kappa 700 DR	KD700	2017 1st Edition (Issue 76)
Kappa 700 DR	KD701	2017 1st Edition (Issue 76)
Kappa 700 DR	KD703	2017 1st Edition (Issue 76)
Kappa 700 DR	KD706	2017 1st Edition (Issue 76)
Kappa 700 DR	KDR700	2017 1st Edition (Issue 76)
Kappa 700 DR	KDR701	2017 1st Edition (Issue 76)
Kappa 700 DR	KDR703	2017 1st Edition (Issue 76)
Kappa 700 DR	KDR706	2017 1st Edition (Issue 76)
Kappa 700 DR	KDR721	2017 1st Edition (Issue 76)
Kappa 700 SR	KSR700	2016 2nd Edition (Issue 75)
Kappa 700 SR	KSR701	2017 1st Edition (Issue 76)
Kappa 700 SR	KSR703	2017 1st Edition (Issue 76)
Kappa 700 SR	KSR706	2017 1st Edition (Issue 76)

Implantable Pulse Generators (IPGs) continued

Product Name	Model	Final Issue
Kappa 700 VDD	KVDD701	2012 2nd Edition (Issue 67)
Kappa 800 DR	KDR801	2013 1st Edition (Issue 68)
Kappa 800 DR	KDR803	2013 1st Edition (Issue 68)
Kappa 900 D	KD901	2017 1st Edition (Issue 76)
Kappa 900 D	KD903	2017 1st Edition (Issue 76)
Kappa 900 D	KD906	2017 1st Edition (Issue 76)
Kappa 900 DR	KDR901	2017 1st Edition (Issue 76)
Kappa 900 DR	KDR903	2017 1st Edition (Issue 76)
Kappa 900 DR	KDR906	2017 1st Edition (Issue 76)
Kappa 900 DR	KDR921	2017 1st Edition (Issue 76)
Kappa 900 SR	KSR901	2017 1st Edition (Issue 76)
Kappa 900 SR	KSR903	2017 1st Edition (Issue 76)
Kappa 900 SR	KSR906	2017 1st Edition (Issue 76)
Kappa 900 VDD	KVDD901	2017 1st Edition (Issue 76)
Legend II	8424	2012 1st Edition (Issue 66)
Legend II	8426	2012 1st Edition (Issue 66)
Legend II	8427	2012 1st Edition (Issue 66)
Minix	8340	2012 1st Edition (Issue 66)
Minix	8341	2012 1st Edition (Issue 66)
Minix	8341M	2012 1st Edition (Issue 66)
Minix	8342	2012 1st Edition (Issue 66)
Minix ST	8330	2012 1st Edition (Issue 66)
Minix ST	8331	2012 1st Edition (Issue 66)
Minix ST	8331M	2012 1st Edition (Issue 66)
Minuet	7107	2012 1st Edition (Issue 66)
Minuet	7108	2012 1st Edition (Issue 66)
Preva DR	7088	2012 1st Edition (Issue 66)
Preva DR	7089	2012 1st Edition (Issue 66)
Preva SR	8088	2012 1st Edition (Issue 66)
Preva SR	8089	2012 1st Edition (Issue 66)
Prevail S	8085	2012 1st Edition (Issue 66)
Prevail S	8086	2012 1st Edition (Issue 66)
Prodigy DR	7860	2012 1st Edition (Issue 66)
Prodigy DR	7861	2012 1st Edition (Issue 66)
Prodigy DR	7862	2012 1st Edition (Issue 66)
Prodigy SR	8158	2013 1st Edition (Issue 68)
Prodigy SR	8160	2013 1st Edition (Issue 68)
Prodigy SR	8161	2013 1st Edition (Issue 68)
Prodigy SR	8162	2013 1st Edition (Issue 68)
Sigma 100 S	SS103	2017 2nd Edition (Issue 77)
Sigma 100 S	SS106	2017 2nd Edition (Issue 77)
Sigma 200 D	SD203	2017 2nd Edition (Issue 77)

Implantable Pulse Generators (IPGs) continued

Product Name	Model	Final Issue
Sigma 200 DR	SDR203	2017 2nd Edition (Issue 77)
Sigma 200 S	SS203	2017 2nd Edition (Issue 77)
Sigma 200 SR	SSR203	2017 2nd Edition (Issue 77)
Sigma 300 D	SD303	2023 2nd Edition (Issue 89)
Sigma 300 DR	SDR303	2023 2nd Edition (Issue 89)
Sigma 300 DR	SDR306	2019 2nd Edition (Issue 81)
Sigma 300 S	SS303	2023 2nd Edition (Issue 89)
Sigma 300 SR	SSR303	2023 2nd Edition (Issue 89)
Sigma 300 SR	SSR306	2019 2nd Edition (Issue 81)
Sigma 300 VDD	SVDD303	2019 2nd Edition (Issue 81)
Thera-i DR	7960i	2012 1st Edition (Issue 66)
Thera-i DR	7961i	2012 1st Edition (Issue 66)
Thera-i DR	7962i	2012 1st Edition (Issue 66)
Thera-i SR	8960i	2012 1st Edition (Issue 66)
Thera-i SR	8961i	2012 1st Edition (Issue 66)
Thera-i SR	8962i	2012 1st Edition (Issue 66)
Thera-i VDD	8968i	2012 1st Edition (Issue 66)

LEADS

Pacing Leads

Product Name	Model	Final Issue
CapSure Sense	4073	2023 2nd Edition (Issue 89)
CapSure SP	4023	2012 2nd Edition (Issue 67)
CapSure SP	4024	2016 1st Edition (Issue 74)
CapSure SP	4523	2012 2nd Edition (Issue 67)
CapSure SP	4524	2016 1st Edition (Issue 74)
CapSure SP	5023	2012 2nd Edition (Issue 67)
CapSure SP	5023M	2012 2nd Edition (Issue 67)
CapSure SP	5024	2013 1st Edition (Issue 68)
CapSure SP	5024M	2013 1st Edition (Issue 68)
CapSure SP	5524	2013 1st Edition (Issue 68)
CapSure SP	5524M	2013 1st Edition (Issue 68)
CapSure Z	4033	2012 2nd Edition (Issue 67)
CapSure Z	4533	2012 2nd Edition (Issue 67)
CapSure Z	5033	2016 1st Edition (Issue 74)
CapSure Z	5034	2016 1st Edition (Issue 74)
CapSure Z	5534	2016 1st Edition (Issue 74)
CapSureFix	4067	2012 2nd Edition (Issue 67)
CapSureFix	4068	2016 1st Edition (Issue 74)

Pacing Leads continued

Product Name	Model	Final Issue
CapSureFix	4568	2017 2nd Edition (Issue 77)
CapSureFix	5068	2017 1st Edition (Issue 76)
CapSureFix	5568	2016 1st Edition (Issue 74)
CapSureFix	6940	2018 1st Edition (Issue 78)
Screw-In	4558M	2016 1st Edition (Issue 74)
SureFix	5072	2018 1st Edition (Issue 78)

Defibrillation Leads

Product Name	Model	Final Issue
Epicardial Patch	6921	2013 1st Edition (Issue 68)
Sprint	6932	2016 1st Edition (Issue 74)
Sprint	6942	2017 1st Edition (Issue 76)
Sprint	6943	2017 2nd Edition (Issue 77)
Sprint	6945	2017 2nd Edition (Issue 77)
Sub-Q	6999	2012 1st Edition (Issue 66)
Sub-Q Patch	6939	2012 1st Edition (Issue 66)
SVC/CS	6963	2013 1st Edition (Issue 68)
Transvene	6936	2013 1st Edition (Issue 68)
Transvene	6966	2013 1st Edition (Issue 68)
Transvene SVC	6937	2016 1st Edition (Issue 74)
Transvene SVC-CS	6933	2016 1st Edition (Issue 74)

Left Heart Pacing Leads

Product Name	Model	Final Issue
Attain CS	2188	2012 2nd Edition (Issue 67)

Epicardial/Myocardial Pacing Leads

Product Name	Model	Final Issue
Spectraflex	4951	2013 1st Edition (Issue 68)
Spectraflex	4951M	2013 1st Edition (Issue 68)

VDD Single Pass Pacing Leads

Product Name	Model	Final Issue
CapSure VDD	5032	2016 1st Edition (Issue 74)

Mailer Kits Available for Returning Product

Medtronic urges all physicians to return explanted products and to notify Medtronic when a product is no longer in use, regardless of reason for explant or removal from use. The procedures for returning products vary by geographic location.

Mailer kits with prepaid US postage are available for use within the United States to send CRT, ICD, IPG, and leads to Medtronic's CRM Returned Product Analysis Lab. These mailers are sized to accommodate the devices and leads from a single patient or clinical event and are designed to meet US postal regulations for mailing biohazard materials.

If the product being returned is located outside the United States, please contact your local Medtronic representative for instructions.

Medtronic also requests the return of devices from non-clinical sources, such as funeral homes, and will assume responsibility for storage and disposal of the product once received.

Mailer kits can be obtained by contacting the Returned Product Lab.

CRM Returned Product Analysis Laboratory Phone: 1 (800) 328-2518, ext. 44800 Email: crdm.returnedproduct@medtronic.com

For questions related to returning explanted product from outside the United States, please contact your local Medtronic Representative.



Medtronic 710 Medtronic Parkway Minneapolis, MN 55432-5604

USA Tel: (763) 514-4000 Fax: (763) 514-4879 Toll-free: 1 (800) 328-2518 (24-hour technical support for physicians

and medical professionals)

medtronic.com

