

CRDM PRODUCT PERFORMANCE REPORT

Important Patient Management Information for Physicians



A Message from the Vice President

Medtronic Quality

Worldwide, more than 2.4 million people are living with a Medtronic pacemaker or defibrillator. More than 99% of our ICDs have performed as designed at five years or more post-implant. ICD therapy is proven 98% effective in treating life-threatening arrhythmias due to VT and VF. It may be difficult to find another drug or medical intervention that can match this performance record, yet we continue to seek ways to improve all levels of product quality and reliability. For each patient, with each device, quality means everything.

How does Medtronic qualify and test its medical devices to ensure years of precise and sophisticated performance inside a human body? Over 3,100 tests are conducted on each device and its components before implant. We then aggressively track actual performance through clinical studies, system longevity studies, chronic lead studies, and returned product analysis. For the past 23 years, we've measured our product performance and shared this information with physicians. We have continually applied this data to advance and refine our quality and reliability processes. Product design, development, and quality assurance testing have all been advanced through this valuable measurement.

At Medtronic, product quality and reliability has been and will continue to be a priority. This is the 55th report Medtronic has published and distributed since originating the industry's first Product Performance Report in 1983. It has been our mission since 1960 "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." Our quality goals cannot be reached without your help. We welcome your collaboration, insight, and recommendations. Please contact me with your feedback, comments, and any questions.

Your participation and assistance in returning explanted products is also critical. Returned product is tested and evaluated so that we can fully measure the performance of our devices. Please contact CRDM Returned Product Quality at 1 (800) 328-2518, extension 48644 or ask your local Medtronic representative to help facilitate the return of explanted Medtronic devices.

Sudden Cardiac Arrest (SCA) is a worldwide killer. Every day, nearly 1,000 people die in the United States alone from SCA. As you know, questions related to quality and reliability of medical devices have increased patient concern, fear, and device refusal, leaving thousands unprotected and at risk of SCA. Please join us in our efforts to increase awareness of this epidemic and share your stories of the lives you have saved through proven and reliable ICD therapy.

With appreciation and warm regards,

Reggie Groves Vice President, Quality and Regulatory Medtronic Cardiac Rhythm Disease Management Medtronic, Inc.

Contact Information

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

US Tec	hnical	Services	Depar	tment

Phone: 1 (800) 723-4636 (Tachy) 1 (800) 505-4636 (Brady) Fax: 1 (800) 824-2362 www.medtronic.com/corporate/contact.jsp

For questions related to this CRDM Product

Performance Report, please call US Technical Services at the number above, or write to:

Timothy Smith Medtronic, Inc. 7000 Central Avenue NE MS T135 Minneapolis, MN 55432-3576 USA

email: tim.smith@medtronic.com

International Technical Centers

Europe (Heerlen NL) Japan (Tokyo) +31-45-566-8844 +81-3-5753-4116

For questions related to returning explanted product or returning product that shows signs of malfunction, please contact:

Outside the United States:

Your Metronic representative or international technical center at the number above.

Within the United States: Your Medtronic representative or

> CRDM Returned Product Analysis Laboratory Medtronic, Inc. 7000 Central Avenue NE MS T172 Minneapolis, MN 55432-3576 USA

Phone: 1 (800) 328-2518, ext. 44800 email: crdm.returnedproduct@medtronic.com

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InSync II	Onyx® VR	Target Tip®
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InSync Maximo®	Premier®	Transvene™

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2006 Second Edition

Date cutoff for this edition is April 1, 2006 for leads and August 7, 2006 for devices

This report is available online at www.CRDMPPR.medtronic.com

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Product Advisory Update Product Performance Report

Sigma Implantable Pulse Generators Original Date of Advisory: November 2005

Potential Separation of Interconnect Wires

Status Update (August 2006)

In November 2005, Medtronic advised physicians that a specific subset of Sigma series pacemakers may fail due to separation of interconnect wires from the hybrid circuit.

The Sigma Family device performance related to the interconnect wires separation mechanism continues to be within Medtronic's engineering projections. As of August 22, 2006, 43 devices out of approximately 40,000 devices worldwide (0.10% incidence) have been confirmed as having experienced interconnect wire separation while implanted. Twenty-four (24) of these devices were returned from the United States. There have been no confirmed serious injuries or deaths due to this issue.

Twenty-five (25) of the 43 devices were returned with information indicating a problem with the patient's pacing system prior to explant. The remaining 18 devices were returned with no information indicating a potential malfunction while implanted or with insufficient information to determine the state of the device at explant. Lacking definite information indicating proper operation until explant, these devices are conservatively categorized as having experienced interconnect wire separation while implanted.

Implant duration for the 43 devices confirmed as having experienced interconnect wire separation has ranged between 17 and 50 months, with an average of 38 months.

Out of the initial advisory population of 40,000 worldwide, approximately 25,000 remain implanted. Approximately 5,800 of these are in the United States.

The Patient Management Recommendations set forth in the advisory remain unchanged.

<u>See page 152</u> for the full advisory text. In the next issue of the Product Performance Report, the advisory status update will be located in the Advisory section of the report.

7274 Marquis DR7278 Maximo DR7230 Marquis VR7232 Maximo VROriginal Date of Advisory: February 2005

7277 InSync Marquis 7289 InSync II Marquis 7279 InSync III Marquis 7285 InSync III Protect

Potential Premature Battery Depletion Due to Battery Short

Status Update (August 2006)

In February 2005, Medtronic advised physicians that Medtronic Marquis family of ICD and CRT-D devices having batteries manufactured prior to December 2003 may experience rapid battery depletion due to a specific internal battery short mechanism.

The Marquis Family device performance related to the battery shorting mechanism continues to be within Medtronic's engineering projections. As of August 22, 2006, 38 Marquis Family devices have been confirmed as having this internal battery shorting mechanism. Twenty-six (26) of these devices were returned from the United States. There have been no confirmed serious injuries or deaths due to this issue.

Of the 38 returns, 16 have been identified by a regularly scheduled follow-up or during a nondevice related hospital visit, 16 by patients reporting warmth in the ICD pocket, 1 by return of bradycardia symptoms, 2 by the PatientAlert sounding, and 3 by hand-held magnet test.

Implant duration for the 38 devices ranged between 11 to 46 months, with an average of 26 months.

Consistent with Medtronic projections, the observed rate of shorting is higher in the second half of device life than in the first half of device life. Of the devices that have exhibited shorting in the last half of device life, 59% occurred in the last quarter of device life, and 41% in the last 10% of device life.

Out of the initial advisory population of 87,000 worldwide, approximately 53,000 remain implanted. Approximately 36,000 of these are in the United States.

The Patient Management Recommendations set forth in the advisory remain unchanged.

Warranty

All Marquis devices are subject to a Limited Warranty. Devices returned to Medtronic and determined to be malfunctioning will be replaced or credited in accordance with the warranty terms. In addition, for devices subject to the Marquis advisory, should a physician decide to replace a device for a patient who is pacemaker dependent or who receives frequent VT/VF therapy, Medtronic will, upon receipt of a written statement from the physician setting forth the basis for early replacement of the device, provide a replacement device at no cost.

See page 153 for the full advisory text. In the next issue of the Product Performance Report, the advisory status update will be located in the Advisory section of the report.

Introduction

All product performance reports are not created equal. For over 20 years, Medtronic CRDM 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, and implantable pacing and defibrillation leads.

This Product Performance Report has been prepared in accordance with International Standard ISO 5841- 2:2000(E).

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

Survival Estimates

Medtronic CRDM uses both returned product analysis and multicenter clinical studies to monitor performance.

Medtronic, like other companies, monitors IPG, ICD, and CRT device performance using returned product analysis. We also monitor device performance using an active multicenter clinical study. Medtronic CRDM is unique in the industry in that we track device survival using both methods.

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 IPG, ICD, and CRT 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 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 will provide much 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 CRDM's System Longevity Study. 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.

The actuarial life table method is applied to the data collected for both devices and leads to provide the survival estimates included in this report. A general introduction to understanding this method of survival analysis is given later in this introduction.

The survival estimates for the IPG, ICD, and CRT devices are based on data available as of August 7, 2006. The survival estimates for leads are based on data available as of April 1, 2006. The cutoff dates for leads is different than the cutoff date for devices because of different data gathering processes between the active clinical study (for leads) and returned product analysis (for devices).

ICD Charge Times

For several years, 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 System Longevity Study.

Advisory Summaries

This Product Performance Report includes advisory summaries applicable to the performance of the devices included in the report. Each summary includes a description of the devices affected by the advisory, a description of the reason for the advisory, and patient management recommendations.

Performance Notes

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

Introduction continued

Medtronic urges all physicians to return explanted product and to notify Medtronic when a product is no longer in use, regardless of reason for explant or removal from use.

How You Can Help

Medtronic urges all physicians to return explanted product 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 product vary by geographic location.

Mailer kits with prepaid US postage are available for use within the United States to send CRTs, ICDs, IPGs, and leads to Medtronic's CRDM 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 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. For return of larger quantities of explanted products than the mailer can accommodate, Medtronic has handling and shipping guidelines available upon request.

Both mailers and guidelines can be requested by contacting the Returned Product Lab. For information on how to contact the Lab, refer to Contact Information on page 2 of this report.

We continually strive to improve this CRDM 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 Contact Information on page 2 of this report.

Overview of Survival Analysis

Medtronic uses the Cutler-Ederer actuarial life table method to estimate the length of time over which ICDs, IPGs, and leads 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 ceases to operate within performance limits. The length of time from implant to the event is recorded for each individual device in the *population sample*. The population sample for IPGs and ICDs 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 the System Longevity Study.

For IPGs and ICDs, the events can be normal battery depletion or a device malfunction. For leads, the events are complications as defined for the study.

The actuarial life table method allows Medtronic to account for devices and leads removed from service for reasons unrelated to performance. Devices and leads removed for these reasons are said to be *suspended*. Examples include IPGs, ICDs, and leads:

- still in service at the time the analysis is performed
- 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, or
- 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.

An Example

The following example describes the survival analysis method used to establish the survival probability estimates for Medtronic CRDM devices and leads. The example is intended to provide an overview of the analysis process. The definitions of malfunctions and complications, and other details specific to calculating device and lead survival estimates, are provided in the articles *Method for Estimating ICD and Pulse Generator Performance (page 10)* and *Method for Estimating Lead Performance (page 76)*.

This simple example describes the survival analysis method used to establish the survival probability estimates for Medtronic CRDM devices and leads.

Figure 1

Implant times for devices of 16 patients. Gray bars with an orange X indicate devices removed from service due to an event. Blue bars indicate suspended devices.



Figure 1 illustrates 16 patients who have implanted devices. The first patient's device (serial number BH004134) operated within performance limits for 32 months. At that time an event occurred. The fourth patient's device (serial number BH008926) did not have an event but is suspended, perhaps because it was still in service at the time of the analysis. This patient had 66 months of implant experience. In this example, Figure 1 shows that 7 of the 16 devices suffered events, and 9 are suspended.

The first step in the life table method is to divide the implant time into intervals of a specific length. This example will use 12-month intervals. The number of devices entered, suspended, and removed due to an event are counted and summarized as shown in Table 1. For the first two intervals, all 16 devices survived and none were removed. In the interval (24-36 months), device BH004134 was removed due to an event. Therefore the table entries show that 16 entered the interval, none were suspended, and one was removed due to an event.

For interval from 36-48 months, only 15 devices entered the interval and one was removed for an event. The remaining intervals are examined and the data entered in columns A, B, and C in like manner. The rest of the columns are filled in using calculations on the data in columns A, B, and C.

The *Effective Sample Size* (**D**) is the number of devices with full opportunity to experience a qualifying event in the interval. This is computed by subtracting one half the number suspended in the interval from the number that entered the interval. This calculation more accurately reflects the number of devices that could have experienced a qualifying event than simply using the number that entered the interval. Using the number of devices that enter an interval over-estimates the sample size because the suspended devices do not complete the interval. Ignoring the suspended devices are not credited with their full service time. Using one half the number of suspended devices effectively splits the difference.

The next column in the table is the *Proportion with Event* (E). This is the proportion of devices that had an event in the interval. It is calculated by dividing the *Number of Events* (C) by the *Effective Sample Size* (D). The number can be interpreted as the estimated rate at which events occur in the time interval.

The *Interval Survival Probability* (\mathbf{F}) is the estimate of probability of surviving to the end of the interval assuming the device was working at the beginning of the interval. It is calculated as 1 minus the *Proportion With Event* (\mathbf{E}). This number can be interpreted as the estimated rate at which events **do not** occur in the time interval.

The Cumulative Survival Probabilities from (G) the last column of the life table can be plotted versus time intervals in the first column to give a survival curve. Figure 2 shows the survival curve for the data shown in Table 1.

	Α	В	с	D	E	F	G
Interval in Months	Number Entered	Number Suspended	Number of Events	Effective Sample Size	Proportion with Event	Interval Survival Probability	Cumulative Survival Probability
0	16	0	0	16	0.000	1.000	1.000
0-12	16	0	0	16	0.000	1.000	1.000
12-24	16	0	0	16	0.000	1.000	1.000
24-36	16	0	1	16	0.063	0.938	0.938
36-48	15	0	1	15	0.067	0.933	0.875
48-60	14	0	1	14	0.071	0.929	0.813
60-72	13	1	2	12.5	0.160	0.840	0.683
72-84	10	2	0	9	0.000	1.000	0.683
84-96	8	3	0	6.5	0.000	1.000	0.683
96-108	5	2	2	4	0.500	0.500	0.341
108-120	1	0	0	1	0.000	1.000	0.341
120-132	1	1	0	0.5	0.000	1.000	0.341

Table 1 Life Table for Figure 1

Definitions:

A Number Entered	B Number Suspended	C Number of Events	D Effective Sample Size	E Proportion with Event	F Interval Survival Probability	G Cumulative Survival Probability
Number of devices active at the start of the interval	Number of devices removed from service for reasons other than an event	Number of units removed from service due to an event	Number of units with full opportunity to experience a qualifying event in the interval. Computed by subtracting one half the Number Suspended from the Number Entered	Proportion of devices that had an event in the interval. Computed by dividing the Number of Events by the Effective Sample Size	The probability of surviving to the end of the interval, assuming the device was working at the beginning of the interval. Computed as 1 minus the Proportion With Event	The overall probability of surviving to the end of the interval. Computed by multiplying the Interval Survival Probability by the previous interval's Cumulative Survival Probability

Cumulative Survival Probability (G) is the estimate of the unconditional probability of surviving to the end of the interval. It is computed by multiplying the *Interval Survival Probability* (F) by the previous interval's Cumulative Survival Probability. The probability of surviving to 132 months in the example is estimated for the table to be 0.341, or 34.1%. The *Cumulative Survival Probabilities* (G) of the life table can be plotted versus time intervals in the first column to give a survival curve. Figure 2 shows the survival curve for the data in Table 1.



Figure 2 Survival Curve for Data Given in Table 1

Confidence Intervals

Since survival curves are based on a sample of the device and lead population, they are only estimates of survival. Generally, 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 IPGs and ICDs, 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 each year interval where Medtronic has experience. When the effective sample size reaches 100 for IPGs and ICDs 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 curves are actually computed and plotted using one-month intervals (for IPGs and ICDs) or three-month intervals (for leads).

A number of references are available for additional information on survival analysis using the Cutler-Ederer life table method.¹

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

Method for Estimating ICD and Pulse Generator Performance

Medtronic urges all physicians to return explanted product and to notify Medtronic when a product is no longer in use, regardless of reason for explant or removal from use.

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 with neither malfunction nor battery depletion.

The survival estimates are determined from the analysis of Medtronic CRDM's device registration data and 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 returned to Medtronic CRDM and analyzed in the CRDM Returned Product Analysis laboratory is assigned to one of three categories. The device 1) has functioned 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.

Medtronic CRDM considers a device 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 or battery depletion, the device must have been returned to Medtronic and analyzed.

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 returned to Medtronic CRDM and found, through analysis, to actually have performed outside the performance limits established by Medtronic. Not all malfunctions expose the patient to a loss of pacing or defibrillation therapy. Some malfunctions included in the following survival estimates may not have been detected at all by the physician or the patient. These 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. A summary of these malfunctions is presented for the most recently market-released models.

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.

Medtronic CRDM 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 to derive a statistical mean longevity value and standard deviation for each parameter configuration. The statistical mean value minus three standard deviations is used as the expected longevity for determining if a battery depleted normally.

Method for Estimating ICD and Pulse Generator Performance, continued

The Standard Actuarial Method is used to estimate IPG and ICD survival. This product performance report has been prepared in accordance with International Standard ISO 5841-2:2000(E).

For reference purposes, the following pages include an estimated longevity for each model. The actual longevity achieved for any device while implanted will depend on the actual programmed parameters and patient factors, and may differ significantly from this estimate.

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 laboratory 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 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 laboratory 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.

Laboratory Analysis Process

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 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 CRDM 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 across the intervals (Cutler-Ederer Method), is used to determine estimates of IPG and ICD survival. This method is commonly used by medical researchers and clinicians.

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 an all-cause survival curve, where events include malfunctions and battery depletions. The all-cause survival 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 five years following implant.

In addition to the all-cause survival curve, a second curve is included to show malfunction-free survival. Malfunction-free survival 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, IPG, and ICD 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.

Method for Estimating ICD and Pulse Generator Performance, continued

Medtronic CRDM adjusts all-cause survival estimates to account for underreporting. While this lowers our all-cause survival estimates, we feel it gives a more accurate perspective on real performance.

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 is rounded to the nearest tenth of one percent. Occasionally, a graph may show 100% survival, but have 1 or more malfunctions or battery depletions. This occurs because even with the malfunctions or battery depletions, the data rounds to 100%.

The survival curves are statistical estimates. As 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 corresponding 95% confidence intervals for the standard errors and the complementary log-log method is used to produce the confidence bounds.

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.

In general, a 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 CRDM for analysis, these numbers underestimate the true number of malfunctions and battery depletions. To more accurately estimate the all-cause device survival probabilities, the number of malfunctions and battery depletions used to plot each interval of the all-cause 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 analyzing experience in clinical studies (including the System Longevity Study) and the device registration system.

However, at this time, 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.

To ensure the number of devices in service is not overstated, the patient mortality rate derived from our device registration 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 our device registration is significantly different from published rates, an adjustment is applied to correct the difference.

7272 InSync ICD

nSync ICD			Product Characteristics	
US Market Release		Jul-02	NBD Code	VVED
Registered US Implants		13,000	Serial Number Prefix/X-ray ID	РЈР
Estimated Active US Impla	nts	6,000	Max Delivered Energy	34 J
Normal Battery Depletions	5	182	Estimated Longevity	See page 34
Malfunctions		116		
Therapy Function N Therapy Functi	lot Compromised on Compromised	103 13		
Advisories		None		



	Tears Arter	Πηριατι		inunction inc					
		1 yr	2 yr	3 yr	4 yr	at 59 mo			
%		99.9	99.8	99.2	98.3	96.9			
%		99.8	99.2	95.8	91.3	66.1			
#		11,000	9,000	7,000	400	100			
	Effective Sam	ole Size							

7277 InSync Marquis

Product Characteristics

9

10

US Market Release	Mar-03	NBD Code	VVED
Registered US Implants	7,000	Serial Number Prefix/X-ray ID	PLT
Estimated Active US Implants	2,000	Max Delivered Energy	30 J
Normal Battery Depletions	174	Estimated Longevity	See page 34
Malfunctions	65 (6 related to advisory)		
Therapy Function Not Compromised Therapy Function Compromised	58 (0 related to advisory)7 (6 related to advisory)		
Advisories	1 see page 153 – 2005 Pote	ential Premature Battery Depletion	Due to Battery Short



289 I	nSync II N	Marquis					Product Ch	aracteristics	5		
	US Market R	Release		Jul-0	3		NBD Code			VVED	
	Registered l	JS Implants		27,000		Serial Number Prefix/X-ray ID		iy ID	PRJ		
	Estimated A	ctive US Impl	lants	17,000		Max Deliver	ed Energy		30 J		
	Normal Batt	ery Depletior	ıs	174		Estimated L	ongevity		See page 35		
	Malfunction	S		54 (3 related to advisory)							
	Ther	apy Function Therapy Func	Not Compron tion Compron	nised 30 nised 13	6 (0 related to 8 (3 related to	o advisory) advisory)					
	Advisories				1 see page 153	<u>3</u> – 2005 Pote	ential Prematur	e Battery Dep	letion Du	e to Battery S	Short
100 90 80			2	2				7			10
5	Years Afte	r Implant	Ma	alfunction-Fr	ee Survival		All-C	ause Surviva	1 		
%		99.9	99.7	99.6							
%		99.8	97.7	95.4							
#		22,000	10,000	400							
	Effective Sam	ple Size									

7297 InSync Sentry

7297	InSync Se	ntry					Product Characteristics					
	US Market R	Release		Nov-04			NBD Code		١	VVED		
	Registered l	JS Implants		9,000			Serial Number Prefix/X-ray ID		ay ID F	PRK		
	Estimated A	ctive US Impl	ants	7,000			Max Deliver	ed Energy	3	85 J		
	Normal Batt	ery Depletior	ıs	2			Estimated Longevity			See page 35		
	Malfunction	S		1								
	Ther	apy Function Therapy Funct	Not Comprom tion Comprom	nised 0 nised 1								
	Advisories			None								
ability (%)		1										
prob		1	2 .	2		 E		7 (2	0	10	
urvival F	Years Afte	r Implant	– Ma	Ifunction-Fre	e Survival		All-C	2 Cause Surviva	al 1	5		
e Si		l yr	at 17 mo									
% svic		100.0	100.0									
<u>گ</u> %		99.9	99.9									
#	F((6,000	400									
	Effective Sam	ple Size										

7299	InSync Se	ntry					Product Ch	aracteristics	5			
	US Market R	elease		Apr-05			NBD Code			VED		
	Registered l	JS Implants		20,000			Serial Number Prefix/X-ray ID		ay ID PI	PRK		
	Estimated A	ctive US Imp	lants	19,000			Max Deliver	ed Energy	3	5 J		
	Normal Batt	ery Depletion	ıs	1			Estimated Longevity			See page 35		
	Malfunction	s		2								
	Ther	ару Function Гherapy Func	Not Comprom tion Comprom	ised 2 ised 0								
	Advisories			None								
Probability (%) 06 001 001								7				
Survival F	Vears Afte	r Implant 1 yr	Mal	function-Fre	e Survival		All-C	ause Surviva	> 1 	9		
/ice		100.0										
% De		100.0										
#		400										
	Effective Sam	ple Size										

7303 InSync Maximo

730	3	nSync Ma	iximo					Product Ch	aracteristics	S		
		US Market R	elease		Jun-04			NBD Code			VVED	
		Registered L	JS Implants		17,000			Serial Number Prefix/X-ray ID		ay ID	PRL	
		Estimated A	ctive US Impl	ants	14,000			Max Delivered Energy			35 J	
		Normal Batt	ery Depletion	S	13			Estimated Longevity			See page 35	
		Malfunction	S		11							
		Thera 1	apy Function I Therapy Funct	Not Comprom ion Comprom	ised 8 ised 3							
		Advisories			None							
bability (%)	100 90											
Pro	())	1	2 3	3 2	4 5	(6	 7 {	8	9	10
urvival		Years After	r Implant	– Ma	lfunction-Fre	e Survival		All-C	Cause Surviva	al		
e S			l yr	at 23 mo								
evic	%		100.0	99.9								
Õ	%		99.9	99.1								
	#	F((C	13,000	300								
		Effective Sam	pie Size									



8040 InSync

8040	InSyn	С						Product Characteristics			
	US Ma	rket Re	elease		Aug-01			NBG Code		DDDR	
	Regist	ered U	S Implants		15,000			Serial Numb	er Prefix/X-ray	ID PIN	
	Estima	Estimated Active US Implants			6,000			Estimated L	ongevity	See page	e 72
	Norma	Normal Battery Depletions			133						
	Malfunctions				11						
		Thera T	py Function N herapy Funct	Not Comprom ion Comprom	ised 5 ised 6						
	Adviso	ories			None						
bability (%)							·,)				
vival Pro	0 Years	ا 1 After	2 Implant	2 3 — Ma	1 3 Ifunction-Fre	4 ee Survival	5	6 All-C	7 8 Cause Survival	9	10
Sur			l yr	2 yr	3 yr	4 yr	5 yr	at 69 mo			
vice %	ś 📃	_	100.0	100.0	99.9	99.9	99.9	99.9			
<mark>۳</mark> %	Ś 		99.9	99.8	98.4	96.6	93.3	85.6			
#	ŧ		12,000	10,000	8,000	3,000	200	100			
	Effectiv	e Samp	ole Size								



Device Survival Summary (95% Confidence Interval)

The following table shows CRT device survival estimates with 95% confidence intervals. Estimates are shown for both malfunction-free survival (which excludes normal battery depletion) and all-cause survival (which includes both malfunctions and normal battery depletion).

						Malf	unc	tion	S			Device S	Survival P	robabilit	y (%)		
Model Number	Family	US Market Release	Registered US Implants	Estimated Active US Implants	Normal Battery Depletions	Therapy Function Compromised		Therapy Function Not	Compromised	Total		Years A 1 yr	fter Impl 2 yr	ant 3 yr	4 yr	5 yr	6 yr
7272	InSync ICD	Jul-02	13,000	6,000	182	13	+	103	=	116	Malfunction- free	99.9 +0.0/-0.1	99.8 +0.1/-0.1	99.2 +0.2/-0.2	98.3 +0.3/-0.4	96.9 +1.2/-1.8	
											All-cause	99.8 +0.1/-0.1	99.2 +0.2/-0.2	95.8 +0.4/-0.5	91.3 +1.0/-1.2	66.1 +5.3/-6.0 at 59 mo	
7277	InSync Marquis	Mar-03	7,000	2,000	174	7	+	58	=	65	Malfunction- free	100.0 +0.0/-0.1	99.0 +0.3/-0.4	98.1 +0.4/-0.5	98.1 +0.4/-0.5 at 38 mo		
	Advisory: se Premature E Battery Sho	ee page 153 Battery De _l rt	<u>-</u> 2005 P pletion Du	otential le to		<mark>(6)</mark> (advis	+ sory-	(0) -relat	= ed sı	(6) ibset)	All-cause	99.9 +0.1/-0.1	92.4 +0.8/-0.8	86.8 +1.1/-1.2	86.8 +1.1/-1.2 at 38 mo		
7289	InSync II Marquis	Jul-03	27,000	17,000	174	18	+	36	=	54	Malfunction- free	99.9 +0.0/-0.0	99.7 +0.1/-0.1	99.6 +0.1/-0.1 at 33 mo			
	Advisory: se Premature E Battery Sho	ee page 153 Battery Dep rt	<u>– 2005 P</u> pletion Du	otential le to		<mark>(3)</mark> (advis	+ sory-	(0) -relat	= ed sı	(3) ibset)	All-cause	99.8 +0.0/-0.1	97.7 +0.2/-0.3	95.4 +0.6/-0.6 at 33 mo			
7297	InSync Sentry	Nov-04	9,000	7,000	2	1	+	0	=	1	Malfunction- free	100.0 +0.0/-0.1	100.0 +0.0/-0.1 at 17 mo				
											All-cause	99.9 +0.0/-0.1	99.9 +0.0/-0.1 at 17 mo				
7299	InSync Sentry	Apr-05	20,000	19,000	1	0	+	2	=	2	Malfunction- free	100.0 +0.0/-0.0					
											All-cause	100.0 +0.0/-0.1					
7303	InSync Maximo	Jun-04	17,000	14,000	13	3	+	8	=	11	Malfunction- free	100.0 +0.0/-0.0	99.9 +0.1/-0.1 at 23 mo				
											All-cause	99.9 +0.0/-0.1	99.1 +0.3/-0.5 at 23 mo				
7304	InSync Maximo	Apr-05	11,000	10,000	1	1	+	1	=	2	Malfunction- free	100.0 +0.0/-0.1	100.0 +0.0/-0.1 at 13 mo				
											All-cause	99.9 +0.0/-0.1	99.9 +0.0/-0.1 at 13 mo				
8040	InSync	Aug-01	15,000	6,000	133	6	+	5	=	11	Malfunction- free	100.0 +0.0/-0.0	100.0 +0.0/-0.1	99.9 +0.0/-0.1	99.9 +0.1/-0.1	99.9 +0.1/-0.1	99.9 +0.1/-0.1 at 69 mo
											All-cause	99.9 +0.0/-0.1	99.8 +0.1/-0.1	98.4 +0.2/-0.3	96.69 +0.4/-0.5	93.3 +1.6/-2.1	85.6 +4.2/-5.7 at 69 mo
8042	InSync III	Feb-03	19,000	13,000	16	1	+	1	=	2	Malfunction- free	100.0 +0.0/-0.0	100.0 +0.0/-0.0	100.0 +0.0/-0.0	100.0 +0.0/-0.0	100.0 +0.0/-0.0 at 57 mo	
											All-cause	100.0 +0.0/-0.0	99.9 +0.0/-0.1	99.5 +0.2/-0.3	98.4 +1.0/-2.4	96.0 +2.0/-3.9 at 57 mo	

ICD Implantable Cardioverter Defibrillators

223 Micro Jewel II	Non-Advisory Population	Advisory Population	Product Characteristics
US Market Release	Nov-96	Nov-96	NBD Code VVEV
Registered US Implants	10,000	11,000	Serial Number Prefix/X-ray ID PFR
Estimated Active US Implants	2,000	0	Max Delivered Energy 30 J
Normal Battery Depletions	589	497	Estimated Longevity See page 34
Malfunctions	65	1,292	
Advisories	2	see page 159 -	- 2000 Potential Long Charge Times Due to Capacitor

see page 154 2004 Potential Long Charge Times Due to Capacitor – Supplement



ICD Implantable Cardioverter Defibrillators, continued





7230 Marquis VR

US Market R	elease		Dec-02			NBD Code		V	/VEV	
Registered L	IS Implants		19,000			Serial Numb	er Prefix/X-ra	y ID P	PKD, PLW, PLY	
Estimated A	ctive US Impla	ants	12,000			Max Deliver	ed Energy	3	30 J	
Normal Batt	ery Depletion	S	6			Estimated L	ongevity	S	ee page 34	
Malfunctions	5		17	(0 related to	advisory)					
Thera T	apy Function N Therapy Funct	Not Comprom tion Comprom	ised 12 ised 5	(0 related to (0 related to	o advisory) o advisory)					
Advisories			1	see page 153	<u>8</u> – 2005 Pote	ntial Prematur	e Battery Dep	letion Due	to Battery Sho	rt
			1							
Years After	l mplant	2 Ma	3 Ifunction-Fre	e Survival	5	6 All-C	7	1	9	10
	100.0	99.9	99.8	99.8						
	99.9	99.7	99.6	99.6						
17,000 9,000 2,0 Effective Sample Size			2,000	100						
	US Market R Registered L Estimated A Normal Batt Malfunctions Thera T Advisories	US Market Release Registered US Implants Estimated Active US Impl Normal Battery Depletion Malfunctions Therapy Function I Therapy Function I Advisories Advisories Years After Implant 1 yr 100.0 99.9 17,000 Effective Sample Size	US Market Release Registered US Implants Estimated Active US Implants Normal Battery Depletions Malfunctions Therapy Function Not Comprom Therapy Function Comprom Advisories 4 4 1 2 Years After Implant 1 yr 2 99.9 99.7 17,000 9,000 Effective Sample Size	US Market Release Dec-02 Registered US Implants 19,000 Estimated Active US Implants 12,000 Normal Battery Depletions 6 Malfunctions 17 Therapy Function Not Compromised 12 Therapy Function Compromised 5 Advisories 1 Advisories 1 Years After Implant 4 1 yr 2 yr 3 yr 1 00.0 99.9 99.8 99.9 99.7 99.6 17,000 9,000 2,000 Effective Sample Size	US Market Release Dec-02 Registered US Implants 19,000 Estimated Active US Implants 12,000 Normal Battery Depletions 6 Malfunctions 17 (0 related to Therapy Function Not Compromised 12 (0 related to Therapy Function Compromised 5 (0 related to Advisories 1 see page 15: Advisories 1 see page 1 see page 15: Advisories 1 see page 1 see p	US Market Release Dec-02 Registered US Implants 19,000 Estimated Active US Implants 12,000 Normal Battery Depletions 6 Malfunctions 17 (0 related to advisory) Therapy Function Not Compromised Therapy Function Compromised 12 (0 related to advisory) Advisories 1 see page 153 – 2005 Pote Image: Complexity of the set of t	US Market Release Dec-02 NBD Code Registered US Implants 19,000 Serial Numb Estimated Active US Implants 12,000 Max Deliver Normal Battery Depletions 6 Estimated Lo Malfunctions 17 (0 related to advisory) Estimated Lo Therapy Function Not Compromised 12 (0 related to advisory) Estimated Lo Advisories 1 see page 153 – 2005 Potential Prematur Advisories 1 see page 153 – 2005 Potential Prematur 1 2 3 4 5 6 To the page 100 point is the p	US Market Release Dec-02 NBD Code Registered US Implants 19,000 Serial Number Prefix/X-rad Estimated Active US Implants 12,000 Max Delivered Energy Normal Battery Depletions 6 Estimated Longevity Malfunctions 17 (0 related to advisory) Therapy Function Not Compromised 12 (0 related to advisory) Therapy Function Compromised 5 (0 related to advisory) Serial Number Prefix/X-rad Advisories 1 see page 153 – 2005 Potential Premature Battery Dep 1 2 3 4 5 6 7 8 Years After Implant Malfunction-Free Survival All-Cause Survival All-Cause Survival 1 yr 2 yr 3 yr at 42 mo All-Cause Survival 1 yr 2 yr 3 yr at 42 mo All-Cause Survival 1 yr 2 yr 3 yr at 42 mo	US Market Release Dec-02 NBD Code N Registered US Implants 19,000 Serial Number Prefix/X-ray ID P Estimated Active US Implants 12,000 Max Delivered Energy 3 Normal Battery Depletions 6 Estimated Longevity 5 Malfunctions 17 (0 related to advisory) Therapy Function Not Compromised 12 (0 related to advisory) Therapy Function Compromised 5 (0 related to advisory) Advisories 1 see page 153 - 2005 Potential Premature Battery Depletion Due Vears After Implant 4 Structure Survival 4 Structure Survival 1 yr 2 yr 3 yr at 42 mo 1 100.0 99.9 99.8 99.8 99.8 99.8 Intervent 4 Structure Survival 1 100.0 99.9 99.7 99.6 99.6 Intervent 4 Structure Structure Survival 1 100.0 99.9 99.7 99.6 99.6 Intervent 4 Structure Structur	US Market Release Dec-02 NBD Code VVEV Registered US Implants 19,000 Serial Number Prefix/X-ray ID PKD, PLW, PLY Estimated Active US Implants 12,000 Max Delivered Energy 30 J Normal Battery Depletions 6 Malfunctions 17 (0 related to advisory) Therapy Function Not Compromised 12 (0 related to advisory) Therapy Function Compromised 5 (0 related to advisory) Advisories 1 see page 153 – 2005 Potential Premature Battery Depletion Due to Battery Sho

Product Characteristics

CD

/231 (SEM III VE	2					Product C	haracteristics			
	US Market F	Release		Dec-00)		NBD Code		VVEV		
	Registered l	JS Implants		17,000)		Serial Num	Serial Number Prefix/X-ray ID			
	Estimated A	ctive US Impl	ants	11,000)		Max Delive	red Energy	30 J	30 J	
	Normal Batt	ery Depletior	ıs	56	5		Estimated	ongevity	See page 34		
	Malfunction	s		2	1						
	Ther	apy Function Therapy Funct	Not Compron tion Compron	nised 15 nised 6	5						
	Advisories			None	see page 17	4 – Technic	al article on ICI) Battery Discharge I	Behavior		
001 (%)					[
lige 90											
<u>6</u> 80											
<u>ਲ</u>	0	1	2	3	4	5	6	7 8	9	1	0
<u>viv</u>	Years Afte	r Implant	Ma	lfunction-Fr	ee Survival		All-	Cause Survival			
Su		1 yr	2 yr	3 yr	4 yr	5 yr	at 62 mo				
% kice		99.9	99.9	99.9	99.8	99.8	99.8				
o %		99.8	99.5	99.2	98.8	98.0	97.6				
#		14,000	12,000	10,000	5,000	1,000	300				
	Effective Sam	ple Size									

7232 Maximo VR

7232	Maximo V	′R					Product Characteristics			
	US Market R	lelease		Oct-0	3		NBD Code		VVED	
	Registered l	JS Implants		32,00	0		Serial Numb	er Prefix/X-ray ID	PRN	
	Estimated A	ctive US Impl	ants	28,00	0		Max Deliver	ed Energy	35 J	
	Normal Batt	ery Depletior	IS		3		Estimated L	ongevity	See page 2	34
	Malfunction	s			8 (0 related to	advisory)				
	Ther	apy Function Therapy Funct	Not Comprom tion Comprom	nised nised	5 (0 related to 3 (0 related to	advisory) advisory)				
	Advisories				1 see page 153	– 2005 Pote	ential Prematur	e Battery Depletio	<mark>n Due to</mark> Batte	ry Short
robability (%) 06 001 001										
Survival P	0 Years Afte 	1 r Implant 1 yr	2 Ma	3 function-Fr at 30 mo	4 ! ree Survival	5	6 All-C	7 8 Cause Survival	9	10
% <u>c</u>		100.0	99.9	99.9						
% De		99.9	99.9	99.3						
#		15,000	2,000	200						
	Effective Sam	ple Size								



ICD Implantable Cardioverter Defibrillators, continued

7271	GEM DR	Non-Advisory Population	2002 Advisory Population	1999, 2004 Advisory Population	Product Characteristics	i
	US Market Release	Oct-98	Oct-98	Oct-98	NBD Code	VVED
	Registered US Implants	15,000	4,000	400	Serial Number Prefix/X-ra	y ID PIM
	Estimated Active US Implants	6,000	2	0	Max Delivered Energy	35 J
	Normal Battery Depletions	283	168	17	Estimated Longevity	See page 34
	Malfunctions	73	501	112		
	Advisories	3	see page 156 -	- 2002 Potenti	ial Sudden Increase in Charge Times	

3 see page 156 – 2002 Potential Sudden Increase in Charge Times

see page 161 – 1999 Potential Long Charge Times Due to Capacitor

see page 154 – 2004 Potential Long Charge Times Due to Capacitor – Supplement



7273	SEM II DR		Product Characteristics	
	US Market Release	Feb-99	NBD Code VVED	
	Registered US Implants	15,000	Serial Number Prefix/X-ray ID PJK	
	Estimated Active US Implants	200	Max Delivered Energy 30 J	
	Normal Battery Depletions	2,065	Estimated Longevity See page 34	
	Malfunctions	52		



		1 yr	2 yr	3 yr	4 yr	5 yr	at 66 mo		
%		99.8	99.7	99.6	99.6	99.6	99.6		
%		99.5	98.7	95.6	82.3	46.3	16.2		
#		13,000	12,000	9,000	6,000	2,000	200		
	Effective Sam	ple Size							

7274 Marquis DR

7274	Marquis D	R					Product Ch	naracteristic	S		
	US Market R	Release		Mar-02	2		NBD Code			VVED	
	Registered l	JS Implants		48,000)		Serial Numb	er Prefix/X-ra	ay ID	РКС	
	Estimated A	ctive US Imp	lants	26,000)		Max Deliver	ed Energy		30 J	
	Normal Batt	tery Depletior	15	142	2		Estimated L	ongevity		See page 34	
	Malfunction	S		87	7 (17 related t	o advisory)					
lity (%	Ther	apy Function Therapy Func	Not Compron tion Compron	nised 46 nised 4 [°]	6 (1 related to 1 (16 related t	advisory) to advisory)					
Dabi	Advisories				l see page 15	<mark>3 – 2005 Pote</mark>	ntial Prematur	<mark>re Battery</mark> Dep	oletion D	ue to Battery	Short
001 Pro 06 001 Pro					1						
Device S	0 Years Afte	1 1 r Implant	2 Ma	I 3 Ifunction-Fro	4 ee Survival	5	6	7 Sause Surviva	1 8 al	9	10
		1 yr	2 yr	3 yr	4 yr	at 51 mo					
%		100.0	99.9	99.7	99.5	99.5					
%		99.8	99.6	98.3	96.6	96.6					
#	Effective Sam	42,000	28,000	11,000	1,000	100					

7275 GEM III DR			Product Characteristics				
US Market Release	Nov-00		NBD Code	VVED			
Registered US Implants	20,000		Serial Number Prefix/X-ray ID	PJM			
Estimated Active US Implants	9,000		Max Delivered Energy	30 J			
Normal Battery Depletions	810		Estimated Longevity	See page 34			
Malfunctions	34						
Therapy Function Not Compro Therapy Function Compro	omised 24 omised 10						
Advisories	None see page	174 – Performa	nce note on ICD Battery Discharge	Behavior			
00 vival Probability (%)	· · · · · · · · · · · · · · · · · · ·						
Years After Implant M	3 4 Aalfunction-Free Surviva	5 al	6 7 8 All-Cause Survival	9 10			
		99.7	QQ 7				
% 99.7 99.0	96.8 91.2	71 7	651				
# 17,000 14,000 Effective Sample Size	11,000 7,000	1,000	200				

7276 GEM III AT

727	76 (SEM III A	Т					Product Ch	aracteristics		
		US Market F	Release		Feb-0	I		NBD Code		DDED	
		Registered l	US Implants		14,000)		Serial Numb	er Prefix/X-ray ID	PKE	
		Estimated A	Active US Imp	lants	6,000)		Max Delivere	ed Energy	30 J	
		Normal Batt	tery Depletio	15	582	2		Estimated Lo	ongevity	See page 34	
		Malfunction	S		2	I					
		Ther	apy Function Therapy Func	Not Compror tion Compror	nised 14 nised 7	ļ ,					
		Advisories			None	see page 17	4 – Performa	ance note on IC	D Battery Discharge	Behavior	
lity (%)	100 90						-				
iabi	80										
Prot	70										
val	60						۲ <u>۱</u>				
ivi	50										
e Sl	40										
evic	()	1	2	3	4	5	6 7	7 8	9	10
õ		Years Afte	r Implant	Ma	alfunction-Fr	ee Survival		All-C	ause Survival		
			1 yr	2 yr	3 yr	4 yr	5 yr	at 62 mo			
	%		100.0	99.9	99.8	99.7	99.7	99.7			
	%		99.7	98.9	96.8	89.1	67.7	64.1			

400

100

10,000

7,000

4,000

12,000

Effective Sample Size

#

S N	Aaximo D	R					Product Characteristics			
	US Market R	elease		Oct-0	3		NBD Code		VVED	
	Registered l	JS Implants		30,000)		Serial Numb	er Prefix/X-ray ID	PRM	
	Estimated A	ctive US Imp	ants	26,000	C		Max Deliver	ed Energy	35 J	
	Normal Batt	ery Depletion	ıs	1	7		Estimated L	ongevity	See page 3	4
	Malfunction	s		(6 (0 related to	o advisory)				
	Ther	apy Function Therapy Func	Not Compron tion Compron	nised 2 nised 4	2 (0 related to 4 (0 related to	o advisory) o advisory)				
	Advisories				1 see page 15	<u>3</u> – 2005 Pote	ential Prematur	re Battery Depletion	Due to Batter	y Short
)0 90 30				2				7 0		
	Years Afte	r Implant	– Ma	alfunction-Fr	ee Survival	5	All-C	Zause Survival	5	10
		l yr	2 yr	at 31 mo						
%		100.0	100.0	100.0						
%		99.9	99.8	99.8						
#		19,000	3,000	100						
)0)0)0)0)0)0)0)0)0)0)0)0)0)	Maximo D US Market R Registered U Estimated A Normal Batt Malfunction Ther Advisories	Maximo DR US Market Release Registered US Implants Estimated Active US Impl Normal Battery Depletion Malfunctions Therapy Function Therapy Function Advisories 0 0 1 Years After Implant 1 yr % 99.9 # 19,000	Maximo DR US Market Release Registered US Implants Estimated Active US Implants Normal Battery Depletions Malfunctions Therapy Function Not Compron Therapy Function Compron Advisories 0 0 0 1 2 Years After Implant 1 yr 2 yr 4 1 yr 2 yr 4 1 9 9 9 9 9 9 1 9 9 9 9 1 9 9 9 9 1 9 1 9 0 3 0 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	Maximo DR US Market Release Oct-0. Registered US Implants 30,000 Estimated Active US Implants 26,000 Normal Battery Depletions 30 Malfunctions 30 Therapy Function Not Compromised 30 Therapy Function Compromised 30 Advisories 30 0 1 2 3 Years After Implant Malfunction-Fr % 100.0 100.0 100.0 % 99.9 99.8 99.8 # 19,000 3,000 100	Maximo DR US Market Release Oct-03 Registered US Implants 30,000 Estimated Active US Implants 26,000 Normal Battery Depletions 7 Malfunctions 6 (0 related to Therapy Function Not Compromised 2 (0 related to Therapy Function Compromised Advisories 1 see page 15 0 1 see page 15 0 2 yr 1 lyr 2 yr 1 lyr 2 yr 1 lyr 2 yr 1 lyn 3,000	Maximo DR US Market Release Oct-03 Registered US Implants 30,000 Estimated Active US Implants 26,000 Normal Battery Depletions 7 Malfunctions 6 (0 related to advisory) Therapy Function Not Compromised 2 (0 related to advisory) Therapy Function Compromised 2 (0 related to advisory) Advisories 1 see page 153 – 2005 Pote 0 1 2 3 4 5 0 1 2 3 4 5 0 1 2 yr at 31 mo 1 1 1 1 2 3 4 5 Years After Implant Malfunction-Free Survival 1 1 1 1 % 100.0 100.0 100.0 1 1 1 1 1 % 19.000 3,000 100 100 100 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 <td>Maximo DR Product CH US Market Release Oct-03 NBD Code Registered US Implants 30,000 Serial Numb Estimated Active US Implants 26,000 Max Deliver Normal Battery Depletions 7 Estimated L Malfunctions 6 (0 related to advisory) Therapy Function Not Compromised 2 (0 related to advisory) Therapy Function Compromised 1 see page 153 – 2005 Potential Premature Advisories 1 see page 153 – 2005 Potential Premature 0 1 2 3 4 5 6 0 1 2 3 4 5 6 1 0 1 2 3 4 5 6 1 0 1 2 3 4 5 6 1 0 1 2 3 4 5 6 1 0 1 2 3 4 5 6 1 0 1 2 3 4 5 6 1 0 1 2 1</td> <td>Maximo DR Product Characteristics US Market Release Oct-03 NBD Code Registered US Implants 30,000 Serial Number Prefix/X-ray ID Estimated Active US Implants 26,000 Max Delivered Energy Normal Battery Depletions 7 Estimated Longevity Malfunctions 6 (0 related to advisory) Therapy Function Not Compromised 2 (0 related to advisory) Therapy Function Compromised 1 see page 153 – 2005 Potential Premature Battery Depletion Advisories 1 see page 153 – 2005 Potential Premature Battery Depletion 0 1 2 3 4 5 6 7 8 Years After Implant Malfunction-Free Survival All-Cause Survival All-Cause Survival All-Cause Survival % 100.0 100.0 100.0 100.0 100.0 100.0 % 99.9 99.8 99.8 4 </td> <td>Maximo DR Product Characteristics US Market Release Oct-03 NBD Code VVED Registered US Implants 30,000 Serial Number Prefix/X-ray ID PRM Estimated Active US Implants 26,000 Max Delivered Energy 35 J Normal Battery Depletions 7 Estimated Longevity See page 3 Malfunctions 6 (0 related to advisory) Therapy Function Not Compromised 2 (0 related to advisory) Advisories 1 see page 153 - 2005 Potential Premature Battery Depletion Due to Batter 0 1 2 3 4 5 6 7 8 9 Years After Implant Malfunction-Free Survival All-Cause Survival All-Cause Survival All-Cause Survival % 100.0 100.0 100.0 100.0 100.0 100.0 100.0 % 99.9 99.8 99.8 99.8 19.00 19.00 100.0</td>	Maximo DR Product CH US Market Release Oct-03 NBD Code Registered US Implants 30,000 Serial Numb Estimated Active US Implants 26,000 Max Deliver Normal Battery Depletions 7 Estimated L Malfunctions 6 (0 related to advisory) Therapy Function Not Compromised 2 (0 related to advisory) Therapy Function Compromised 1 see page 153 – 2005 Potential Premature Advisories 1 see page 153 – 2005 Potential Premature 0 1 2 3 4 5 6 0 1 2 3 4 5 6 1 0 1 2 3 4 5 6 1 0 1 2 3 4 5 6 1 0 1 2 3 4 5 6 1 0 1 2 3 4 5 6 1 0 1 2 3 4 5 6 1 0 1 2 1	Maximo DR Product Characteristics US Market Release Oct-03 NBD Code Registered US Implants 30,000 Serial Number Prefix/X-ray ID Estimated Active US Implants 26,000 Max Delivered Energy Normal Battery Depletions 7 Estimated Longevity Malfunctions 6 (0 related to advisory) Therapy Function Not Compromised 2 (0 related to advisory) Therapy Function Compromised 1 see page 153 – 2005 Potential Premature Battery Depletion Advisories 1 see page 153 – 2005 Potential Premature Battery Depletion 0 1 2 3 4 5 6 7 8 Years After Implant Malfunction-Free Survival All-Cause Survival All-Cause Survival All-Cause Survival % 100.0 100.0 100.0 100.0 100.0 100.0 % 99.9 99.8 99.8 4	Maximo DR Product Characteristics US Market Release Oct-03 NBD Code VVED Registered US Implants 30,000 Serial Number Prefix/X-ray ID PRM Estimated Active US Implants 26,000 Max Delivered Energy 35 J Normal Battery Depletions 7 Estimated Longevity See page 3 Malfunctions 6 (0 related to advisory) Therapy Function Not Compromised 2 (0 related to advisory) Advisories 1 see page 153 - 2005 Potential Premature Battery Depletion Due to Batter 0 1 2 3 4 5 6 7 8 9 Years After Implant Malfunction-Free Survival All-Cause Survival All-Cause Survival All-Cause Survival % 100.0 100.0 100.0 100.0 100.0 100.0 100.0 % 99.9 99.8 99.8 99.8 19.00 19.00 100.0

7288 Intrinsic

Product Characteristics US Market Release NBD Code VVED Aug-04 Registered US Implants PUB 26,000 Serial Number Prefix/X-ray ID Estimated Active US Implants 24,000 Max Delivered Energy 35 J 3 Normal Battery Depletions Estimated Longevity See page 35 Malfunctions 7 Therapy Function Not Compromised 4 Device Survival Probability (%) Therapy Function Compromised 3 Advisories None 100 90 80 9 10 0 2 3 4 5 6 7 8 Years After Implant Malfunction-Free Survival --- All-Cause Survival 1 yr at 21 mo % 100.0 100.0 % 99.9 99.9 12,000 100 # Effective Sample Size

							Product Cl	naracteristics				
	US Market R	elease		Mar-04	L .		NBD Code		VVE	V		
	Registered L	JS Implants		1,000)		Serial Number Prefix/X-ray ID			PRP		
	Estimated A	ctive US Impl	ants	1,000)		Max Deliver	ed Energy	30 J	30 J		
	Normal Batt	ery Depletior	ıs	0			Estimated L	See	See page 35			
	Malfunctions			1								
	Thera T	apy Function Therapy Funct	Not Comprom tion Comprom	ised ised C))							
	Advisories			None	2							
100 90 80			2	2		5	6	7 8			10	
100 90 80 0) Years Afte	r Implant	2	3 Ifunction-Fre	4 ee Survival	5	6 All-0	7 8 Cause Survival			10	
100 90 80 0) Years Afte	r Implant 1 yr	2 Ma Ma	3 Ifunction-Fre	4 ee Survival	5	6 All-0	7 8 Cause Survival)	10	
100 90 80 0 %	Years Afte	r Implant 1 yr 99.8	2 Ma at 20 mo 99.8	} } Ifunction-Fro	4 ee Survival	5	6 All-0	7 8 Cause Survival	<u>.</u>)	10	
100 90 80 0 %	Years Afte	1 yr 99.8 99.7	2 Ma at 20 mo 99.8 99.7	lfunction-Fre	4 ee Survival	5	6 All-0	7 8 Cause Survival	<u>(</u>)	10	

D153ATG, D153DRG EnTrust

DED,VVED		
PNR		
30J		
ee page 35		
9 10		
9		

D154A	T <mark>G,</mark> D154[ORG EnTr	rust	Product Characteristics									
	US Market R	elease		Jun-05						DDED,VVED			
	Registered l	JS Implants		15,000			Serial Number Prefix/X-ray ID			PNR			
	Estimated A	ctive US Impl	ants	14,000			Max Delivered Energy			35J			
	Normal Batt	ery Depletior	ıs	0			Estimated Longevity			See page 35			
	Malfunction	S		1									
	Ther	apy Function Therapy Funct	Not Comprom tion Comprom	ised 0 ised 1									
	Advisories			None									
100 90 80													
(0	1	2 3	}	1 5	0	6	7	8	9	10)	
	Years Afte	r Implant	— Ma	function-Fre	ee Survival	1	All-C	al	1	1			
		at 11 mo											
%		100.0											
%		100.0											
#	F((100											
	Effective Sam	pie Size											

D154VRC EnTrust **Product Characteristics** US Market Release Jun-05 NBD Code VVEV Registered US Implants 6,000 Serial Number Prefix/X-ray ID PNT 5,000 Estimated Active US Implants Max Delivered Energy 35J Normal Battery Depletions 0 Estimated Longevity See page 35 Malfunctions 2 Therapy Function Not Compromised 0 Therapy Function Compromised 2 Advisories None 100 90 80 0 2 3 5 6 8 9 10 4 7 Malfunction-Free Survival ---- All-Cause Survival Years After Implant at 9 mo 99.9 % % 99.8 300 # Effective Sample Size

Device Survival Summary (95% Confidence Interval)

The following table shows ICD device survival estimates with 95% confidence intervals. Estimates are shown for both malfunction-free survival (which excludes normal battery depletion) and all-cause survival (which includes both malfunctions and normal battery depletion).

						Malfun	ctions			Device Survival Probability (%)								
Model	Family	JS Market Release	Registered JS Implants	Estimated Active US mplants	Vormal Battery Depletions	Therapy Function Compromised	Therapy ⁻ unction Not Compromised	Total		Years A	fter Impl	ant 3 vr	4 vr	5 vr	6 vr	7 vr	8 vr	10 yr
7223 Non- Advisory	Micro Jewel II	Nov-96	10,000	2,000	589	-	-	65	Malfunction- free	99.9 +0.0/-0.1	99.8 +0.1/-0.1	99.7 +0.1/-0.1	99.6 +0.1/-0.2	99.6 +0.1/-0.2	99.3 +0.2/-0.2	99.2 +0.2/-0.3	98.4 +0.4/-0.5	98.4 +0.4/-0.5 at 99 mo
Population									All-cause	99.8 +0.1/-0.1	99.6 +0.1/-0.2	99.3 +0.2/-0.2	98.4 +0.3/-0.3	96.6 +0.4/-0.5	91.0 +0.7/-0.8	82.6 +1.1/-1.2	60.2 +2.0/-2.1	51.0 +3.6/-3.7 at 99 mo
7223 2000, 2004 Advisory	Micro Jewel II	Nov-96	11,000	0	497	_	-	1,292	Malfunction- free	99.9 +0.1/-0.1	99.3 +0.2/-0.2	94.7 +0.5/-0.5	86.3 +0.8/-0.8	84.1 +0.8/-0.9	83.7 +0.9/-0.9	80.9 +1.1/-1.1 at 80 mo		
Population	Advisories: see Times Due to C Long Charge Ti	e page 159 – apacitor; an mes Due to	2000 Poten id page 154 Capacitor -	ntial Long Cha – 2004 Poter - Supplemen	arge itial t	_	-	-	All-cause	99.7 +0.1/-0.1	98.4 +0.2/-0.3	89.0 +0.6/-0.7	70.8 +1.0/-1.1	62.1 +1.2/-1.2	51.8 +1.5/-1.5	20.4 +3.1/-3.0 at 80 mo		
7227 Non-2000 Advisory	GEM	Oct-98	22,000	9,000	315	_	-	131	Malfunction- free	99.7 +0.1/-0.1	99.6 +0.1/-0.1	99.5 +0.1/-0.1	99.4 +0.1/-0.1	99.2 +0.1/-0.1	99.2 +0.1/-0.2	99.2 +0.1/-0.2	99.2 +0.1/-0.2 at 91 mo	
Population	Advisories: see and page 164 -	<u>e page 162</u> – 1999 Potent	1999 Potent ial High Cur	tial Circuit O rent Drain	verload;	—	-	-	All-cause	99.3 +0.1/-0.1	99.0 +0.1/-0.1	98.7 +0.1/-0.2	98.3 +0.2/-0.2	97.6 +0.2/-0.3	96.0 +0.4/-0.4	86.5 +1.0/-1.1	79.1 +2.1/-2.3 at 91 mo	
7227 B, D, E 2000	GEM	Oct-98	1,000	0	2	_	-	304	Malfunction- free	90.7 +1.7/-2.0	77.6 +2.6/-2.9	68.6 +3.2/-3.4	67.3 +3.2/-3.5 at 38 mo					
Advisory Population	Advisory: <u>see p</u> Due to Remova	ble Connect	000 Potenti tor Header	ial High Impe	dance	_	_	-	All-cause	81.4 +2.3/-2.6	54.3 +3.3/-3.4	32.2 +3.8/-3.8	28.1 +3.9/-3.8					
7229	GEM II VR	Jul-99	11,000	4,000	331	_	_	24	Malfunction- free	99.9 +0.0/-0.1	99.8 +0.1/-0.1	99.8 +0.1/-0.1	99.7 +0.1/-0.1	99.7 +0.1/-0.1	99.7 +0.1/-0.1	99.7 +0.1/-0.1 at 79 mo		
	Advisories: see Connection; an also see page 17 Discharge Beha	e page 160 – d page 162 – 74 – Perfor wior	2000 Poter - 1999 Poter mance no	ntial Weak Sc ntial Circuit C te on ICD Ba	lder verload; ttery	_	_	_	All-cause	99.8 +0.1/-0.1	99.4 +0.1/-0.2	99.3 +0.2/-0.2	98.4 +0.3/-0.3	94.6 +0.5/-0.6	86.3 +1.0/-1.1	74.8 +3.4/-3.8 at 79 mo		
7230	Marquis VR	Dec-02	19,000	12,000	6	5 +	12 =	17	Malfunction- free	100.0 +0.0/-0.0	99.9 +0.0/-0.1	99.8 +0.1/-0.1	99.8 +0.1/-0.1 at 42 mo					
	Advisory: see p Depletion Due	<u>age 153</u> – 20 to Battery S)05 Potentia hort	al Premature	Battery	(0) (advisor	(0) y-related si	(0) ubset)	All-cause	99.9 +0.0/-0.1	99.7 +0.1/-0.1	99.6 +0.1/-0.2	99.6 +0.1/-0.2					
7231	GEM III VR	Dec-00	17,000	11,000	56	6 +	15 =	21	Malfunction- free	99.9 +0.0/-0.1	99.9 +0.0/-0.1	99.9 +0.1/-0.1	99.8 +0.1/-0.1	99.8 +0.1/-0.1	99.8 +0.1/-0.1 at 62 mo			
	<u>see page 174</u> – Discharge Beha	Performar	nce note or	n ICD Battery	,				All-cause	99.8 +0.1/-0.1	99.5 +0.1/-0.1	99.2 +0.1/-0.2	98.8 +0.2/-0.2	98.0 +0.4/-0.6	97.6 +0.6/-0.9 at 62 mo			

continued

Implantable Cardioverter Defibrillators, continued

Device Survival Summary continued

						Malfun	ctions			Device Survival Probability (%)							
Model Number	Family	US Market Release	Registered US Implants	Estimated Active US Implants	Normal Battery Depletions	Therapy Function Compromised	Therapy Function Not Compromised	Total		Years A	fter Impla	ant 3 yr	4 yr	5 yr	6 yr	7 yr	8 yr
7232	Maximo VR	Oct-03	32,000	28,000	3	3 +	5 =	8	Malfunction-	100.0	99.9	99.9					- /-
									free	+0.0/-0.0	+0.0/-0.1	+0.0/-0.1 at 30 mo					
	Advisory: <u>see p</u> Depletion Due t	<u>age 153</u> – 20 o Battery Sh	05 Potentia Iort	l Premature E	Battery	(0) + (advisory	(0) = v-related sul	(0) bset)	All-cause	99.9 +0.0/-0.0	99.9 +0.1/-0.1	99.3 +0.5/-1.4 at 30 mo					
7250	Jewel AF	Jun-00	1,000	300	56	—	-	16	Malfunction- free	99.6 +0.3/-0.6	99.4 +0.3/-0.7	99.3 +0.4/-0.7	99.3 +0.4/-0.7	98.8 +0.6/-1.1	97.9 +0.9/-1.4	97.9 +0.9/-1.4 at 78 mo	
									All-cause	99.1 +0.4/-0.7	98.7 +0.5/-0.9	98.5 +0.6/-0.9	96.7 +1.0/-1.4	91.3 +1.9/-2.4	79.8 +3.7/-4.4	72.9 +5.1/-6.0 at 78 mo	
7271 Non- Advisory	GEM DR	Oct-98	15,000	6,000	283	-	-	73	Malfunction- free	99.9 +0.0/-0.1	99.8 +0.1/-0.1	99.7 +0.1/-0.1	99.5 +0.1/-0.2	99.3 +0.2/-0.2	99.2 +0.2/-0.2	99.2 +0.2/-0.2	99.0 +0.3/-0.5 at 91 mo
Population									All-cause	99.7 +0.1/-0.1	99.5 +0.1/-0.1	98.9 +0.2/-0.2	97.9 +0.3/-0.3	96.0 +0.4/-0.5	92.1 +0.7/-0.8	84.1 +1.3/-1.4	71.6 +3.8/-4.3 at 91 mo
7271 2002 Advisory	GEM DR	Oct-98	4,000	2	168	_	-	501	Malfunction- free	99.9 +0.1/-0.2	99.6 +0.2/-0.3	95.1 +0.7/-0.9	82.2 +1.5/-1.6	78.5 +1.7/-1.8	77.0 +1.8/-2.0 at 66 mo		
Population	Advisory: <u>see p</u> in Charge Times	age 156 – 20	02 Potentia	l Sudden Incr	ease	_	-	-	All-cause	99.7 +0.1/-0.2	99.2 +0.3/-0.4	89.3 +1.1/-1.2	61.0 +2.0/-2.1	43.7 +2.5/-2.5	27.4 +3.3/-3.2 at 66 mo		
7271 1999, 2004	GEM DR	Oct-98	400	0	17	-	-	112	Malfunction- free	99.5 +0.4/-1.6	95.7 +1.7/-2.9	74.4 +4.7/-5.5	73.2 +4.8/-5.6 at 37 mo				
Advisory Population	Advisories: <u>see</u> Times Due to Ca Long Charge Tir	page 161 – 19 apacitor; and nes Due to (999 Potentia d page 154 – Capacitor –	al Long Charg 2004 Potent Supplement	je ial	_	_	-	All-cause	98.9 +0.7/-1.8	91.4 +2.6/-3.6	47.9 +5.9/-6.1	45.2 +5.9/-6.1 at 37 mo				
7273	GEM II DR	Feb-99	15,000	200	2,065	—	-	52	Malfunction- free	99.8 +0.1/-0.1	99.7 +0.1/-0.1	99.6 +0.1/-0.1	99.6 +0.1/-0.1	99.6 +0.1/-0.1	99.6 +0.1/-0.1 at 66 mo		
	Advisory: see p Connection; also ICD Battery Disc	age 160 – 20 o see page 17 charge Beha	000 Potentia 74_ – Perfor vior	al Weak Solde mance note	er E on	_	-	-	All-cause	99.5 +0.1/-0.1	98.7 +0.2/-0.2	95.6 +0.4/-0.4	82.3 +0.8/-0.8	46.3 +1.4/-1.4	16.2 +2.1/-1.9 at 66 mo		
7274	Marquis DR	Mar-02	48,000	26,000	142	41 +	46 =	87	Malfunction- free	100.0 +0.0/-0.0	99.9 +0.0/-0.0	99.7 +0.1/-0.1	99.5 +0.1/-0.2	99.5 +0.1/-0.2 at 51 mo			
	Advisory: <u>see p</u> Depletion Due t	age 153 – 20 o Battery Sh	05 Potentia lort	l Premature E	Battery	<mark>(16)</mark> + (advisory	(1) = v-related sul	(17) bset)	All-cause	9 9.8 +0.0/-0.0	99.6 +0.1/-0.1	98.3 +0.2/-0.2	96.6 +0.4/-0.5	96.6 +0.4/-0.5 at 51 mo			
7275	GEM III DR	Nov-00	20,000	9,000	810	10 +	24 =	34	Malfunction- free	99.9 +0.0/-0.0	99.9 +0.0/-0.1	99.8 +0.1/-0.1	99.8 +0.1/-0.1	99.7 +0.1/-0.1	99.7 +0.1/-0.1 at 64 mo		
	see page 174 – Discharge Behav	Technical art /ior	ticle on ICD	Battery					All-cause	99.7 +0.1/-0.1	99.0 +0.1/-0.2	96.8 +0.3/-0.3	91.2 +0.5/-0.6	71.7 +1.5/-1.6	65.1 +2.4/-2.5 at 64 mo		

0

Implantable Cardioverter Defibrillators, continued

Device Survival Summary continued

						Mal	fund	tion	IS			Device Survival Probability (%)							
Model Number	Family	US Market Release	Registered US Implants	Estimated Active US Implants	Normal Battery Depletions	Therapy Function		Therapy Function Not	Compromised	Total	_	Years A 1 vr	fter Impla	ant 3 vr	4 vr	5 vr	6 vr	7 vr	8 vr
7276	GEM III AT	Feb-01	14,000	6,000	582	7	+	14	=	21	Malfunction- free	100.0 +0.0/-0.1	99.9 +0.0/-0.1	99.8 +0.1/-0.1	99.7 +0.1/-0.1	99.7 +0.1/-0.1	99.7 +0.1/-0.1 at 62 mo		
	<u>see page 174</u> – Discharge Beha	Technical ar vior	ticle on ICD	Battery							All-cause	99.7 +0.1/-0.1	98.9 +0.2/-0.2	96.8 +0.3/-0.4	89.1 +0.8/-0.8	67.7 +2.1/-2.3	64.1 +2.8/-3.0 at 62 mo		
7278	Maximo DR	Oct-03	30,000	26,000	7	4	+	2	=	6	Malfunction- free	100.0 +0.0/-0.0	100.0 +0.0/-0.0	100.0 +0.0/-0.0 at 31 mo					
	Advisory: see p Depletion Due 1	bage 153 – 20 to Battery S	005 Potentia hort	l Premature	Battery	(0) (advis	+ sory-	(0) •relate	= ed su	(0) bset)	All-cause	99.9 +0.0/-0.0	99.8 +0.1/-0.1	99.8 +0.1/-0.1 at 31 mo					
7288	Intrinsic	Aug-04	26,000	24,000	3	3	+	4	=	7	Malfunction- free	100.0 +0.0/-0.0	100.0 +0.0/-0.1 at 21 mo						
											All-cause	99.9 +0.0/-0.0	99.9 +0.0/-0.1 at 21 mo						
7290	Onyx VR	Mar-04	1,000	1,000	0	0	+	1	=	1	Malfunction- free	99.8 +0.1/-1.0	99.8 +0.1/-1.0 at 20 mo						
											All-cause	99.7 +0.2/-0.9	99.7 +0.2/-0.9 at 20 mo						
D153ATG, D153DRG	EnTrust	Jun-05	400	300	0	1	+	0	=	1	Malfunction- free	99.7 +0.3/-2.0	99.7 +0.3/-2.0 at 22 mo						
											All-cause	99.3 +0.5/-1.9	99.3 +0.5/-1.9 at 22 mo						
D154ATG, D154DRG	EnTrust	Jun-05	15,000	14,000	0	1	+	0	=	1	Malfunction- free	100.0 +0.0/-0.0 at 11 mo							
											All-cause	100.0 +0.0/-0.0 at 11 mo							
D154VRC	EnTrust	Jun-05	6,000	5,000	0	2	+	0	=	2	Malfunction- free	99.9 +0.1/-0.3 at 9 mo							
											All-cause	99.8 +0.1/-0.3 at 9 mo							

33 Medtronic CRDM Product Performance Report

Reference Chart

			I	Estimate	d Longe	vity	Flective					
					y**					(E	RI)***	End of the
Model Number	Family	Connector Style	Volume/ Mass*	Delivered Energy	Charging Frequenc	100% Pacing‡	50% Pacing‡	15% Pacing‡	100% Sensing	Battery Voltage	Charge Time	End of Life (EOL) Battery Voltage
7202	Jewel CD	C, D, E	80-83 cc* 129-139 g	34 J	Monthly Quarterly Semiannual	3.6 4.5 4.8	4.1 5.3 5.7	4.5 6.0 6.6	4.7 6.4 7.1	≤ 4.91 V	Two≥14.5 sec	≤ 4.57 V
7219	Jewel	B, C, D, E	80-83 cc* 129-139 g	34 J	Monthly Quarterly Semiannual	3.6 4.5 4.8	4.1 5.3 5.7	4.5 6.0 6.6	4.7 6.4 7.1	≤ 4.91 V	Two≥14.5 sec	≤ 4.57 V
7220	Jewel Plus	B, C, D, E	80-83 cc* 135-143 g	34 J	Monthly Quarterly Semiannual	3.7 4.4 4.7	4.2 5.2 5.5	4.6 5.9 6.4	4.8 6.3 6.8	≤ 4.91 V	Two≥14.5 sec	≤ 4.57 V
7221	Micro Jewel	B, Cx, D, E	69-72 cc* 118-125 g	34 J	Monthly Quarterly Semiannual	4.4 5.7 6.2	4.8 6.4 7.0	5.2 7.0 7.7	5.3 7.2 8.0	≤ 4.91 V	_	≤ 4.57 V ^{‡‡}
7223	Micro Jewel II	Cx	54 cc 97 g	30 J	Monthly Quarterly Semiannual	4.9 6.3 6.8	5.4 7.1 7.7	5.8 7.8 8.5	6.0 8.1 9.0	≤ 4.91 V	-	≤ 4.57 V ^{‡‡}
7227	GEM	B, Cx, D, E	49 cc* 90 g	35 J	Monthly Quarterly Semiannual	5.3 7.7 8.8	5.7 8.5 10.0	6.0 9.3 11.0	6.1 9.6 11.5	≤ 2.55 V	_	≤ 2.40 V [§]
7229	GEM II VR	Cx	39 cc 77 g	30 J	Monthly Quarterly Semiannual	3.6 5.0 5.6	3.9 5.5 6.3	4.1 6.0 6.9	4.2 6.2 7.1	≤ 2.55 V	-	≤ 2.40 V
7230	Marquis VR	B, Cx, E	36 cc 75 g	30 J	Monthly Quarterly Semiannual	4.9 7.3 8.5	5.2 8.0 9.3	5.4 8.5 10.0	5.5 8.7 10.4	≤ 2.62 V	_	3 months after ERI
7231	GEM III VR	Cx	39 cc 77 g	30 J	Monthly Quarterly Semiannual	4.3 6.0 6.6	4.7 6.8 7.5	5.0 7.4 8.5	5.2 7.8 8.9	≤ 2.55 V	-	≤ 2.40 V
7232	Maximo VR	B, Cx, E	39 cc 76 g	35 J	Monthly Quarterly Semiannual	4.4 7.0 8.2	4.7 7.5 9.0	4.8 8.0 9.7	4.9 8.3 10.0	≤ 2.62 V	_	3 months after ERI
7250	Jewel AF	G, H	56 cc* 96 g	27 J	Monthly Quarterly Semiannual	5.3 6.5 7.0	6.1 7.6 8.2	6.7 8.7 9.4	7.0 9.2 10.0	≤ 4.94 V	_	≤ 4.50 V
7271	GEM DR	DR	62 cc 115 g	35 J	Monthly Quarterly Semiannual	6.0 7.4 7.9	6.9 8.4 9.0	7.5 9.3 10.0	7.8 9.8 10.6	≤ 4.91 V	_	≤ 4.57 V [§]
7272	InSync ICD	DR+LV	66 cc 117 g	34 J	Monthly Quarterly Semiannual	5.4 6.5 6.9	6.3 8.0 8.5	7.3 9.4 10.3	7.8 10.3 11.2	≤ 4.91 V	-	≤ 4.57 V
7273	GEM II DR	DR	39.5 cc 77 g	30 J	Monthly Quarterly Semiannual	2.8 3.7 4.0	3.2 4.3 4.7	3.5 4.8 5.4	3.7 5.1 5.8	≤ 2.55 V	_	≤ 2.40 V
7274	Marquis DR	DR+LV	36 cc 75 g	30 J	Monthly Quarterly Semiannual	4.0 5.6 6.2	4.4 6.4 7.2	4.8 7.1 8.1	4.9 7.5 8.6	≤ 2.62 V	-	3 months after ERI
7275	GEM III DR	DR	39.5 cc 78 g	30 J	Monthly Quarterly Semiannual	3.3 4.2 4.5	3.8 5.0 5.5	4.3 5.8 6.5	4.4 6.3 7.0	≤ 2.55 V	_	≤ 2.40 V
7276	GEM III AT	DR	39 cc 77 g	30 J	Monthly Quarterly Semiannual	3.3 4.3 4.5	3.8 5.1 5.5	4.3 5.9 6.5	4.5 6.3 7.0	≤ 2.55 V	-	≤ 2.40 V
7277	InSync Marquis	DR+LV split	38 cc 77 g	30 J	Monthly Quarterly Semiannual	3.7 5.0 5.5	4.3 6.0 6.7	4.7 7.0 8.0	4.9 7.5 8.6	≤ 2.62 V	_	3 months after ERI
7278	Maximo DR	DR	39 сс 77 g	35 J	Monthly Quarterly Semiannual	3.7 5.3 6.0	4.1 6.1 7.0	4.3 6.8 8.0	4.5 7.1 8.5	≤ 2.62 V	-	3 months after ERI
7287	Intrinsic 30	DR	36 cc 75 g	30 J	Monthly Quarterly Semiannual	4.0 5.5 6.2	4.3 6.3 7.2	4.7 7.0 8.2	4.8 7.4 8.6	≤ 2.62 V		3 months after ERI

Reference Chart continued

					E	Estimate	d Longe	vity		Elective	Replacement	
					'					(E	RI)*	
Model Number	Family	Connector Style	Volume/ Mass*	Delivered Energy	Charging Frequency	100% Pacing‡	50% Pacing‡	15% Pacing‡	100% Sensing	Battery Voltage	Charge Time	End of Life (EOL) Battery Voltage
7288	Intrinsic	DR	38 cc 76 g	35 J	Monthly Quarterly Semiannual	3.7 5.4 6.1	4.1 6.1 7.0	4.3 6.8 8.0	4.5 7.1 8.5	≤ 2.62 V	-	3 months after ERI
7289	InSync II Marquis	DR+LV true	38 cc 76 g	30 J	Monthly Quarterly Semiannual	3.3 4.2 4.5	3.6 4.9 5.4	4.0 5.5 6.1	4.2 5.8 6.6	≤ 2.62 V	_	3 months after ERI
7290	Onyx VR	Cx	39 cc 77 g	30 J	Monthly Quarterly Semiannual	3.8 5.0 5.4	4.1 5.6 6.1	4.3 6.2 6.7	4.5 6.4 7.0	≤ 2.55 V	-	≤ 2.40 V
7295	InSync II Protect	DR+LV true	38 cc 77 g	30 J	Monthly Quarterly Semiannual	3.3 4.2 4.5	3.7 4.9 5.4	4.0 5.5 6.2	4.2 5.9 6.6	≤ 2.62 V	_	3 months after ERI
7297	InSync Sentry	DR+LV true	40 cc 78 g	35 J	Monthly Quarterly Semiannual	3.3 4.5 5.0	3.7 5.3 6.0	4.1 6.2 7.1	4.3 6.6 7.7	≤ 2.62 V	-	3 months after ERI
7299	InSync Sentry	DR+LV true	40 cc 78 g	35 J	Monthly Quarterly Semiannual	3.3 4.5 5.0	3.7 5.3 6.0	4.1 6.2 7.1	4.3 6.6 7.7	≤ 2.62 V	_	3 months after ERI
7303	InSync Maximo	DR+LV true	40 cc 78 g	35 J	Monthly Quarterly Semiannual	3.3 4.5 5.0	3.7 5.3 6.0	4.1 6.2 7.1	4.3 6.6 7.7	≤ 2.62 V	—	3 months after ERI
7304	InSync Maximo	DR+LV true	40 cc 78 g	35 J	Monthly Quarterly Semiannual	3.3 4.5 5.0	3.7 5.3 6.0	4.1 6.2 7.1	4.3 6.6 7.7	≤ 2.62 V	_	3 months after ERI
D153ATG, D153DRG	EnTrust	DR	33 cc 63 g	30 J	Monthly Quarterly Semiannual	3.5 4.8 5.3	3.8 5.4 6.1	4.1 6.0 6.9	4.2 6.3 7.2	≤ 2.61 V	—	3 months after ERI
D153VRC	EnTrust	Cx	32 cc 63 g	30 J	Monthly Quarterly Semiannual	4.4 6.8 7.9	4.7 7.4 8.7	4.9 7.9 9.5	5.0 8.1 9.8	≤ 2.61 V	_	3 months after ERI
D154ATG, D154DRG	EnTrust	DR	35 cc 68 g	35 J	Monthly Quarterly Semiannual	3.8 5.5 6.1	4.2 6.1 7.0	4.4 6.8 7.9	4.6 7.0 8.3	≤ 2.61 V	-	3 months after ERI
D154VRC	EnTrust	Cx	35 cc 68 g	35 J	Monthly Quarterly Semiannual	4.8 7.5 9.0	5.0 8.3 10.0	5.2 8.8 10.7	5.3 9.0 11.0	≤ 2.61 V	_	3 months after ERI

* Volume and mass differ by connector style.

** A full charge is a full energy therapeutic shock or capacitor reformation.

*** The minimum time between ERI and EOL is 3 months (100% pacing, two charges per month).

‡ Pacing mode is DDD for dual chamber devices and VVI for others:

60 ppm, 3.0 V, 0.4 ms, 510 ohms for Intrinsic 30 7287, Intrinsic 7288, EnTrust D153ATG / D153DRG / D153VRC, EnTrust D154ATG / D154DRG / D154VRC, Onyx VR 7290, InSync Sentry 7299 (LV:3.0 V, 0.4 ms, 510 ohms), InSync II Protect 7295 (LV:3.0 V, 0.4 ms, 510 ohms), Maximo DR 7278, Maximo VR 7230, InSync II Marquis 7289 (LV:3.0 V, 0.4 ms, 510 ohms), InSync Marquis 7277 (LV:510 ohms), Marquis DR 7274, Marquis VR 7230, GEM III AT 7276, GEM III DR 7275, GEM III DR 7273, GEM II DR 7273, GEM II VR 7229, GEM DR 7271, GEM 7227, and Jewel AF 7250.

 $60~\mathrm{ppm}$ biven tricular pacing, 4.0 V, 0.4 ms, and 510 ohms for InSync ICD 7272;

65 ppm, 4.0 V, 0.4 ms, and 500 ohms for Micro Jewel II 7223 and Micro Jewel 7221;

65 ppm, 5.6 V, 0.5 ms, and 500 ohms for Jewel 7219, Jewel Plus 7220, and Jewel CD 7202.

For all cases, sensing rate was assumed at 70 bpm.

#‡ For Model 7221 and 7223 devices, if charge time exceeds 60 seconds, the devices are at EOL. If 2 consecutive charge cycles exceed 60 seconds, the "charge circuit inactive" indicator is tripped and all therapies except emergency output VVI pacing are disabled.

§ For Model 7271 and 7227 devices, if charge time exceeds 30 seconds, the device is at EOL. Immediate replacement is recommended. If 3 consecutive charge cycles exceed 30 seconds, the "charge circuit inactive" indicator is tripped and all therapies except emergency VVI pacing are disabled.
ICD Connector Styles



AT500 AT501, 7253

Product Characteristics

	US Market R	elease		Mar-03			NBG Code		[DDDRP	
	Registered L	IS Implants		11,000			Serial Numbe	er Prefix/X-ray	ID I	JF	
	Estimated A	ctive US Impla	ants	8,000			Estimated Lo	ongevity	5	See page 72	
	Normal Batt	ery Depletion:	S	113							
	Malfunctions	5		6	(2 related to a	advisory)					
	Thera T	apy Function N Therapy Functi	lot Compromi ion Compromi	sed 3 sed 3	(1 related to a (1 related to a	ıdvisory) ıdvisory)					
	Advisories			1	see page 155 also see page	– 2003 Poter 172 – Perfor	ntial Incorrect mance note of	Memory Circui n AT500 Pacing	t Setting System	Follow-Up Prot	ocol
100									, - , - , - , - , - , - , - , - , - , -		
100						1					
90					1						
80											
/0					1						
60											
50						1					
40	0	1 .	2 3		i . 5		6 7	7 8		9	10
	0	1 4	2 3	,			0 /	0		2	10
	Years Afte	r Implant	— Ma	function-Fre	e Survival		All-C	ause Survival			
		1	2	2		F				I	1
0/		1 yr	Z yr	3 yr	4 yr	5 yr	at 61 mo				
%		100.0	100.0	100.0	99.1	99.1	99.1				
%		100.0	99.9	99.5	89.6	55.5	4/.5				
#	Effective San	nle Size	6,000	1,000	400	100	100			I	

Elite 7074, 7075, 7076, 7077



Market Release istered US Implants		Dec-03			NBG Code		DDDR	
istered US Implants		7000						
Estimated Active US Implants			7,000			er Prefix/X-ray ID	PRA	
Normal Battery Depletions					Estimated L	ongevity	See page 72	
mal Battery Depletic	ons	0						
functions		0						
Therapy Function Therapy Fun	n Not Compromise Iction Compromise	ed 0 ed 0						
isories		None						
1	2 3	4	4 5		6	7 8	9	10
rs After Implant	– Malfı	unction-Fre	e Survival		All-(Cause Survival		
1 yr	2 yr af	t 29 mo						
	100.0 10	00.0						
100.0					1			
100.0	100.0 10	00.0						
	1 yr • 100.0	1 yr 2 yr a 100.0 100.0 1	1 yr 2 yr at 29 mo 100.0 100.0 100.0	1 yr 2 yr at 29 mo • 100.0 100.0 100.0	1 yr 2 yr at 29 mo • 100.0 100.0	1 yr 2 yr at 29 mo • 100.0 100.0	1 yr 2 yr at 29 mo 100.0 100.0 100.0 100.0 100.0 100.0	1 yr 2 yr at 29 mo 100.0 100.0 100.0 100.0

EnPulse DR EIDR21

EnPu	lse DR	EIDR21					Product Ch	aracteristics			
	US Mark	et Release		Dec-03	;		NBG Code		DD	DR	
	Register	red US Implants		2,000			Serial Numb	er Prefix/X-ra	y ID PP	Т	
	Estimate	ed Active US Imp	olants	1,000			Estimated Lo	ongevity	Se	e page 72	
	Normal	Battery Depletic	ons	0							
	Malfunc	tions		0							
	Т	Therapy Function Not Compromis Therapy Function Compromis									
	Advisori	es		None							
01 %)											
obab %				2	4	-		7 0			10
iurvival Pr	Years A	After Implant	- Ma	alfunction-Fre	ee Survival		All-C	ause Surviva		9	
e S		- 100 0	2 yr								
	o	- 100.0	100.0	100.0							
Ω /	°	2 000	100.0	200							
1	Effective	Sample Size	1,000	200	1		1			1	

uij	Se 2 DR E2	2DR01, E2DF	R03, E2DR0	6			Product	Characteristics			
	US Market R	elease		Feb-0	4		NBG Code	2	DD	DR	
	Registered L	JS Implants		82,00	0		Serial Nun	nber Prefix/X-ray	ID PNI	B, PNC, PNF	ł
	Estimated A	ctive US Imp	lants	73,00	0		Estimated	Longevity	See	page 72	
	Normal Batt	ery Depletior	15		0						
	Malfunction	S			2						
	Thera T	apy Function Therapy Func	Not Compro tion Compro	mised mised	1 1						
	Advisories			Non	e						
100											
100 90 80	0		2	3	4	5	6	7 8		9	10
100 90 80 (0 Years Afte	1 I mplant	2 N	3 Ialfunction-Fr	4 4 ee Survival	5	6 All	7 8 -Cause Survival		9	10
100 90 80 (0 Years Afte	r Implant 1 yr	2 N N	at 27 mo	4 ree Survival	5	6 All	7 8 -Cause Survival		9	10
100 90 80 (0 Years Afte	1 r Implant 1 yr 100.0	2 2 2 yr 100.0	3 lalfunction-Fr at 27 mo 100.0	4 ee Survival	5	6 All	7 8 -Cause Survival		9	10
100 90 80 (% %	0 Years Afte	r Implant 1 yr 100.0 100.0	2 yr 100.0 100.0	3 lalfunction-Fr at 27 mo 100.0 100.0	4 ree Survival	5	6 All	7 8 -Cause Survival		9	10

EnPulse 2 DR E2DR21

EnPuls	se 2 DR E2	2DR21				Product Characteristics				
	US Market R	elease		Feb-04		NBG Code		DD	DR	
	Registered L	JS Implants		9,000		Serial Numb	er Prefix/X-ra	y ID PN	IU	
	Estimated A	ctive US Impl	ants	8,000		Estimated L	ongevity	Se	e page 72	
	Normal Batt	ery Depletion	IS	0						
	Malfunction	S		0						
	Thera T	apy Function I Therapy Funct	Not Comprom tion Comprom	ised 0 ised 0						
	Advisories			None						
obability (%) 06 001 001										
e Survival Pro	0 Years Afte	I r Implant 1 yr	2 Ma 2 yr	3 Ifunction-Fre	ee Survival	6 All-C	/	1	9	
% ^{či} č		100.0	100.0							
o %		100.0	100.0							
#	Effective Sam	4,000 ple Size	200							

EnPuls	se 2 DR E	2DR31, E2DR	33			Product Characteristics					
	US Market R	lelease		Feb-04			NBG Code			DDDR	
	Registered l	JS Implants		400			Serial Number Prefix/X-ray ID		ay ID	PNL	
	Estimated A	ctive US Impl	ants	400			Estimated Longevity			See page 72	
	Normal Batt	ery Depletior	ıs	0							
	Malfunction	s		0							
	Therapy Function Not Co Therapy Function Co Advisories			sed 0 sed 0							
	Advisories			None							
bability (%) 06 001		-1									
Device Survival Prol # % %	0 Years Afte	1 r Implant 1 yr 100.0 100.0	2 3 Mal at 14 mo 100.0 100.0 100.0	function-Fre	4 Survival	5	5	7 Cause Surviva	8 al	9	10
#	Effective Sam					1	I	I			

EnPulse 2 SR E2SR01 E2SR03 E2SR06

EnPuls	se 2 SR E2	SR01, E2SR0)3, E2SR06				Product Characteristics						
	US Market R	elease		Dec-03	5		NBG Code		:	SSIR			
	Registered L	JS Implants		19,000)		Serial Numb	er Prefix/X-ra	ay ID I	PMW, PMY, P	NA		
	Estimated A	ctive US Impl	ants	16.000)		Estimated Lo	ongevity		See page 72			
	Normal Batt	ery Depletion	IS	١	I								
	Malfunction	S		1	I								
	Therapy Function Not Compromised Therapy Function Compromised			iised 0 iised 1	0 1								
	Advisories			None	2								
obability (%) 06 001 001													
urvival Pr	0 Years Afte	1 r Implant 1 yr	2 3 Ma	3 Ifunction-Fre	4 5 ee Survival		6 7 All-C	ause Surviva	3 al 	9	10		
e 8 %		100.0	100 0	100 0									
evic %		100.0	99.9	99.9									
□ ^° #		8.000	1.000	100									
11	Effective Sam	8,000 1,000 100 ffective Sample Size					1		1	1			

EnPuls	se 2 VDD	E2VDD01				Product Characteristics					
	US Market R	elease		Dec-03			NBG Code			VDD	
	Registered l	JS Implants		500			Serial Numb	er Prefix/X-r	ay ID	PMV	
	Estimated A	ctive US Imp	ants	400			Estimated L	ongevity		See page	72
	Normal Batt	ery Depletior	ıs	0							
	Malfunction	s		0							
	Thera	apy Function Therapy Func	Not Comprom tion Comprom	nised 0 nised 0							
	Advisories			None							
bability (% 06 00 001											
urvival Pro	0 Years Afte	1 r Implant	2 Ma	3 4 Ifunction-Fre	t ee Survival	5	6 All-C	7 Cause Surviv	8 al	9	10
e Sl		1 yr	at 17 mo								
%		100.0	100.0								
Ճ %		100.0	100.0								
#	Effective Com	200 100									
	Effective Sam	ffective Sample Size									

EnRhythm DR PI50IDR

EnR	hy	thm DR P	1501DR				Product Cl	naracteristics	S		
		US Market R	elease		May-05		NBG Code			DDDRP	
		Registered L	JS Implants		29,000		Serial Numb	er Prefix/X-ra	ay ID	PNP	
		Estimated A	ctive US Impl	ants	28,000		Estimated L	ongevity		See page 72	
		Normal Batt	ery Depletion	IS	0						
		Malfunction	S		6						
		Thera 1	apy Function I Therapy Funct	Not Comprom tion Comprom	iised 2 iised 4						
		Advisories			None						
oability (%) ⊒	00 90 80		-1								
Prol	Ċ) .	1	2 :	3 4	4 5	 6	7 8	8	9	10
vival		Years After	r Implant	Ma	lfunction-Fre	e Survival	All-(ause Surviva	al	•	· ·
Sur			l yr	at 13 mo							
ice	%		100.0	100.0							
De	%		99.9	99.9							
	#	1,000 300									
		Effective Sam	ple Size								

Kappa 400 DR KDR401, KDR403

US Market Release Jan-98 NBG Code DDD/RO 46,000 Serial Number Prefix/X-ray ID PER, PET **Registered US Implants** Estimated Active US Implants 16,000 Estimated Longevity See page 72 Normal Battery Depletions 1,284 Malfunctions 21 Therapy Function Not Compromised 12 Therapy Function Compromised 9

Product Characteristics

Advisories



None

	Years After	r Implant	- Ma	lfunction-Fre	e Survival		All-C	ause Surviva	ıl	
		1 yr	2 yr	3 yr	4 yr	5 yr	6 yr	7 yr	8 yr	at 99 mo
%		100.0	100.0	100.0	100.0	99.9	99.9	99.9	99.9	99.9
%		99.9	99.9	99.8	99.6	99.2	97.8	91.4	66.9	54.3
#		41,000	37,000	32,000	27,000	21,000	16,000	10,000	1,000	100
	Effective Sam	ple Size								

Kappa 400 SR KSR401, KSR403

Effective Sample Size

Карр	ba	400 SR	(SR401, KSR	403				Product	Characterist	tics		
		US Market R	elease		Feb-98			NBG Code	e		SSI/R	
		Registered l	JS Implants		15,000	1		Serial Nur	nber Prefix/X	(-ray ID	PEU, PGD	
		Estimated A	ctive US Impl	ants	6,000)		Estimated	Longevity		See page 72	
		Normal Batt	ery Depletion	IS	147	,						
		Malfunction	S		4							
(%)		Thera	apy Function I Therapy Funct	Not Compron tion Compron	nised 3 nised							
lity		Advisories			None							
ique 10	00									_		
Prob	90											
val F	30									·••		
ivi	()	 1 ·	2	3	4	5	6	7	8	9	10
e Sl		·		_	5			0	*	0	2	10
Devic		Years After Implant		— Ma	Ilfunction-Fr	ee Survival		Al	-Cause Surv	vival		
			l yr	2 yr	3 yr	4 yr	5 yr	6 yr	7 yr	8 yr	at 98 mo	
0	%		100.0	100.0	100.0	100.0	100.0	100.0	100.0	100.0	100.0	
0	%		99.9	99.9	99.8	99.6	99.5	98.8	96.4	82.9	80.3	
	#		12.000	10.000	9.000	7.000	5.000	4.000	2.000	400	100	



Kappa 600 DR KDR651 KDR653 KDR656

Kapp	a 600 D	R KDR651, KD	R653, KDR6	556		Product Characteristics				
	US Marl	ket Release		Mar-	·01		NBG Code		DDD/RO	
	Register	red US Implants		14,0	00		Serial Numb	er Prefix/X-ray ID	PLJ, PLK	
	Estimat	ed Active US Imp	olants	8,0	00		Estimated L	ongevity	See page 72	
	Normal	Battery Depletic	ons		34					
	Malfunc	tions			3 (0 related	d to advisory)				
	٦	Therapy Function Not Comp Therapy Function Comp			2 (0 related 1 (0 related	l to advisory) l to advisory)				
	Advisor	ies			1 see page	<u>157</u> – 2002 Pot	ential Fracture	Power Supply Wires	5	
obability (%)										
al Pr	0	1	2	3	4	5	6	7 8	9	10
rviv	Years A	After Implant	N	/alfunction-l	Free Surviva		All-C	Cause Survival		
s Su		1 yr	2 yr	3 yr	4 yr	5 yr	at 61 mo			
% vice	<u> </u>	- 100.0	100.0	100.0	100.0	100.0	100.0			
0 %	5	- 100.0	99.9	99.8	99.5	98.9	98.9			
Ŧ	#	12,000	11,000	10,000	7,000	500	200			
	Effective	Sample Size								



Kappa 700 DR KDR701 KDR703 KDR706

Кар	pa	700 DR 🛛	(DR701, KDR	703, KDR70	5			Product Ch	aracteristic	S		
		US Market R	elease		Feb-99			NBG Code			DDD/RO	
		Registered L	JS Implants		189,000			Serial Numb	er Prefix/X-r	ay ID	PGU, PGY, PGW	
		Estimated A	ctive US Impla	ants	110,000			Estimated Lo	ongevity		See page 73	
		Normal Batt	ery Depletion	s	1,094							
		Malfunction	5		138	(100 related	to advisory)					
		Thera 1	apy Function N Therapy Funct	Not Comprom ion Comprom	ised 19 ised 119	(0 related to (100 related	advisory) to advisory)					
		Advisories			1	see page 157		ntial Fractured	Power Supp	ly Wires		
obability (%)	100 90 80											
al Pr	C)	1 2	2	3 4	ļ :	5 (6 7	7	8	9 1	0
viva		Years After	r Implant	- Ma	lfunction-Fre	e Survival		All-C	ause Surviv	al		
Sur			l yr	2 yr	3 yr	4 yr	5 yr	6 yr	7 yr	at 88 mo		
vice	%		100.0	100.0	99.9	99.9	99.9	99.9	99.9	99.9		
De	%		99.9	99.9	99.7	99.3	98.5	96.9	91.6	86.2		
	#		162,000	136,000	109,000	84,000	52,000	23,000	4,000	200		
		Effective Sam	ple Size									



3,000

1,000

100

Kappa 700 SR KSR701, KSR703, KSR706

8,000

Effective Sample Size

7,000

6,000

5,000

#

ppa	700 SK 1	(SR/UI, KSR	703, KSR70	0			Product	Characteris	tics		
	US Market F	Release		Feb-9	99		NBG Cod	e		SSI/R	
	Registered	US Implants		53,00	00		Serial Nu	mber Prefix/>	(-ray ID	PHT, PHW	/, PHU
	Estimated A	Active US Imp	lants	25,00	00		Estimated	d Longevity		See page	73
	Normal Batt	tery Depletio	ns	34	42						
	Malfunction	IS			5						
	Ther	apy Function Therapy Func	Not Compro tion Compro	omised omised	1 4						
	Advisories			Nor	ne						
100											
001											
90								F ,			
00	0	1	2	3	4	5	6	7	8	9	10
	Years Afte	er Implant	N	1alfunction-F	ree Surviva	I	Al	I-Cause Surv	vival		
		l yr	2 yr	3 yr	4 yr	5 yr	6 yr	7 yr	at 87 mo		
%		100.0	100.0	100.0	100.0	100.0	100.0	100.0	100.0		
%		100.0	99.9	99.6	99.0	97.8	95.9	89.7	86.5		
#		41,000	33,000	25,000	19,000	11,000	5,000	1,000	100		
	Effective Sam	nple Size									

	700 VDL	KVDD701					Product	Characteristic	S		
	US Market F	Release		Jan	-99		NBG Cod	e		VDD/RO	
	Registered l	JS Implants		2,0	000		Serial Nu	mber Prefix/X-ra	ay ID	PHP	
	Estimated A	Active US Imp	lants	1,C	000		Estimated	d Longevity		See page 73	
	Normal Batt	tery Depletio	ns		29						
	Malfunction	S			2 (2 related	d to advisory)					
	Ther	apy Function Therapy Func	Not Compro tion Compro	omised omised	0 (0 related 2 (2 related	d to advisory) d to advisory)					
	Advisories				1 see page	157 – 2002 Pot	ential Fractu	red Power Supp	ly Wires		
100											
90 80											
90 80 (0 Years Afte	l r Implant	2 N	3 Ialfunction-	4 Free Surviva	5 al	6 Al	7. l-Cause Surviva	8 al	9	10
90 80 (0 Years Afte	1 r Implant 1 yr	2 N 2 yr	3 Aalfunction- 3 yr	4 Free Surviva 4 yr	5 al 5 yr	6 Al	7. I-Cause Surviva at 78 mo	8 al	9	10
90 80 (%	0 Years Afte	1 r Implant 1 yr 99.9	2 2 yr 99.9	3 1alfunction- 3 yr 99.9	4 Free Surviva 4 yr 99.8	5 al 5 yr 99.8	6 Al 6 yr 99.8	7. 5 I-Cause Surviva at 78 mo 99.8 86.0	8 al	9	10
90 80 (% %	0 Years Afte	1 r Implant 1 yr 99.9 99.9	2 2 yr 99.9 99.9	3 Malfunction- 3 yr 99.9 99.6	4 Free Surviva 4 yr 99.8 99.0	5 3 5 yr 99.8 98.8	6 Al 6 yr 99.8 94.6 300	7. 2 I-Cause Surviva at 78 mo 99.8 86.0	8 al	9	10

Kappa 800 DR KDR801, KDR803, KDR806

Кар	pa	800 DR I	KDR801, KDF	R803, KDR80	6			Product Cl	naracteristics				
		US Market R	lelease		Jan-02	:		NBG Code			DDD/RO		
		Registered L	JS Implants		4,000	1		Serial Numb	er Prefix/X-ra	y ID	PKW, PKY		
		Estimated A	ctive US Impl	ants	3,000)		Estimated L	ongevity		See page 73		
		Normal Batt	ery Depletion	IS	3	1							
		Malfunction	S		0)							
(%		Thera T	apy Function I Therapy Funct	Not Comprom tion Comprom	nised 0 nised 0	1							
EV (S		Advisories			None								
Irvival Probabil	00 90 80				1								
Device Su	() Years Afte	1 : r Implant 1 yr	2 Ma	3 / Ifunction-Fre	4 ee Survival at 46 mo	5	6 All-0 	7 8 Cause Surviva		9	10	
	%		100.0	100.0	100.0	100.0							
	%		100.0	99.9	99.8	99.8							
	#		4,000	3,000	2,000	100							
		Effective Sam	ple Size										



Kanna 920 DR KDP921

Кар	pa	920 DR 🛛	(DR921					Product C	naracteristics		
		US Market R	elease		Jan-02	2		NBG Code		DDD/RO	
		Registered L	JS Implants		16,000)		Serial Numb	oer Prefix/X-ray ID	PKR	
		Estimated A	ctive US Impl	ants	11,000)		Estimated L	ongevity	See page 73	
		Normal Batt	ery Depletior	ıs	3	1					
		Malfunction	s			1					
		Thera	apy Function Therapy Func	Not Compron tion Compron	nised (nised) 1					
		Advisories	.,		None	2					
obability (%)	100 90 80										
e Survival Pi	(Years Afte	! r Implant 1 yr	<u>–</u> Ma 2 yr	3 Ilfunction-Fr 3 yr	4 ee Survival 4 yr	5 at 50 mo	All-0	/ 8 Cause Survival	9	lò
evic	%		100.0	100.0	100.0	100.0	100.0				
Õ	%		100.0	99.9	99.6	98.0	98.0				
	#		13,000	10,000	5,000	1,000	200				
		Effective Sam	ple Size								



Kappa 900 VDD KVDD901

Kaj	ppa	900 VDD	KVDD901					Product Ch	aracteristic	5		
		US Market R	elease		Jan-02			NBG Code		١	/DD	
		Registered L	JS Implants		1,000			Serial Numb	er Prefix/X-ra	ay ID F	LE	
		Estimated A	ctive US Impl	ants	400			Estimated L	ongevity	5	ee page 73	
		Normal Batt	ery Depletion	S	0							
		Malfunction	S		0							
		Thera T	apy Function I Fherapy Funct	Not Comprom tion Comprom	nised 0 nised 0							
		Advisories			None							
ability (%)	100 90 80											
val Prob	() Voors After	l 1 :	2 :	1 3 Ifunction-Fre	4 A Survival	5	6	7 {	 8 	9	10
urvi		Tears Arte	r impiant I	Ivia			I			1	I.	I
e S			1 yr	2 yr	3 yr	at 44 mo						
svic	%		100.0	100.0	100.0	100.0						
ď	%		100.0	100.0	100.0	100.0						
	#		1,000	500	300	100						
		Effective Sam	ple Size									



Le	gen	d 8	424, 8	42 <mark>6,</mark> 8	427									Prod	uct Cł	aract	eristic	S						
		US M	arket R	elease					Nov-91	1				NBG	Code				SS	IR0				
		Regis	tered L	JS Impl	ants				59,000					Seria	l Numb	er Pref	fix/X-r	ay ID	2P	, 2T,	2U			
		Estim	ated A	ctive U	S Impla	ants			7,000					Estim	ated L	ongevi	ty		Se	e pa	ge 73			
		Norm	nal Batt	ery De	pletion	s			1,555															
		Malfu	inction	s					37															
		Advis	ories						None															
	100															_								
8	90															-								
ity (80																							
abil	70															-								
rob	60																							
/al P	() 1	 2) 1		[[56	5 7	ا ج ۲	ξ)](01]] [.]	 21	 31,	 4 1	 5 1	 6]	 7	18	 19	20	21	
irviv			-															-						
e SL		Voor	. Afto		ant		Ma	lfuncti	on-Ere		vival				ΔII_C	21150	Surviv	al						
vic		Tear	s Artei	i inipia	arri. 1		I	I		i Sui	1			1		lause .		1				1		
De			1 yr	2 yr	3 yr	4 yr	5 yr	6 yr	7 yr	8 yr	9 yr	10 yr	11 yr	12 yr	13 yr	14 yr	at 171 mo							
	%		100.0	100.0	100.0	99.9	99.9	99.9	99.9	99.9	99.9	99.9	99.9	99.9	99.9	99.9	99.9							
	%		99.9	99.7	99.5	99.2	98.8	98.2	97.3	94.9	92.0	89.3	86.2	83.8	80.7	76.2	75.3							
	#		52,000	46,000	41,000	35,000	31,000	27,000	23,000	20,000	16,000	12,000	9,000	6,000	3,000	1,000	200							
		Effecti	ve Samp	ole Size																				

IPG Implantable Pulse Generators, continued



Mi	nue	t 7107	7, 7108											Prod	uct Cł	naracte	eristic	S						
		US M	arket R	elease					Mar-92					NBG	Code				DD	DCO				
		Regis	tered L	JS Impl	ants				17,000					Seria	l Numb	er Pref	ix/Xra	y ID	1Z1	, 2G1				
		Estim	ated A	ctive U	S Impla	ants			3,000					Estim	nated L	ongevit	ty		See	e pag	e 73			
		Norm	al Batt	ery De	pletion	S			513															
		Malfu	nction	s					4															
		Advis	ories						None															
Survival Probability (%)	100 90 80 70)	2	2 3			5 6	5 7	7 8	3)](]];	2].	3]4	4 15	5 10	6	17	18	19	20	21	
evice		Years	s Aftei	r Impla	ant		Ma	lfuncti	ion-Fre	ee Sur	vival				All-C	ause S	Surviva	al						
ݣ			l yr	2 yr	3 yr	4 yr	5 yr	6 yr	7 yr	8 yr	9 yr	10 yr	11 yr	12 yr	13 yr	at 167 mo								
	%		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	99.8	99.5	98.9	98.2	96.9	94.7	92.1	89.4	85.9	83.0	79.2	76.1								
	#		15,000	13,000	12,000	11,000	9,000	8,000	7,000	6,000	5,000	4,000	3,000	2,000	1,000	100								
		Effecti	ve Samp	ole Size																				

US Market Release	Nov-96	NBG Code	DDDCO
Registered US Implants	1,000	Serial Number Prefix/X-ray ID	PIE
Estimated Active US Implants	300	Estimated Longevity	See page 73
Normal Battery Depletions	16		
Malfunctions	1		
Advisories	None		

rviv		Years Afte	r Implant	- Ma	lfunction-Fre	ee Survival		All-C	Cause Surviva	ıl		
s Su			1 yr	2 yr	3 yr	4 yr	5 yr	6 yr	7 yr	8 yr	at 99 mo	
vice	%		100.0	99.9	99.9	99.9	99.9	99.9	99.9	99.9	99.9	
De	%		100.0	99.7	99.1	98.3	98.3	96.4	92.7	91.9	91.9	
	#		1,000	1,000	1,000	1,000	400	400	300	200	100	
		Effective Sam	ple Size									

2 DP 7000 7000 Ρ

Pre	va l	DR 7088, 7	089					Product C	naracteristic	CS			
		US Market R	elease		Jul-96	i		NBG Code			DDD/RO		
		Registered l	JS Implants		25,000	1		Serial Numb	er Prefix/X-	ray ID	PGJ, PGK		
		Estimated A	ctive US Impl	lants	8,000)		Estimated L	ongevity		See page 7	'3	
		Normal Batt	ery Depletior	ıs	457	,							
		Malfunction	S		3								
		Advisories			None	1							
ability (%)	100 90 80											·	
robi	70												
alP	()	1	2	3 4	4	5	6	7	8	9	1	0
Surviv		Years Afte	r Implant	— Ma	alfunction-Fro	ee Survival		All-0	Cause Surviv	/al			
vice			l yr	2 yr	3 yr	4 yr	5 yr	6 yr	7 yr	8 yr	9 yr		at 117 mo
De	%		100.0	100.0	100.0	100.0	100.0	100.0	100.0	100.0	100.0)	100.0
	%		100.0	99.9	99.7	99.5	99.0	98.1	96.8	93.9	88.2		79.9
	#		22,000	20,000	18,000	16,000	14,000	12,000	10,000	5,000	2,000		200
		Effective Sam	ple Size										

eva SR 8088, 8089		Product Characteristics
US Market Release	Jul-96	NBG Code SSI/R
Registered US Implants	18,000	Serial Number Prefix/X-ray ID PGL, PGM
Estimated Active US Implants	4,000	Estimated Longevity See page 73
Normal Battery Depletions	225	
Malfunctions	1	
Advisories	None	
100		
90		
80		
0 1 2	3 4	5 6 7 8 9 10

rvival		Years Afte	r Implant	— Ma	alfunction-Fr	ee Survival		All-0	Cause Surviv	al		
s Su			1 yr	2 yr	3 yr	4 yr	5 yr	6 yr	7 yr	8 yr	9 yr	at 116 mo
vice	%		100.0	100.0	100.0	100.0	100.0	100.0	100.0	100.0	100.0	100.0
De	%		99.9	99.9	99.7	99.3	98.7	97.7	95.5	93.9	90.6	84.6
	#		15,000	12,000	11,000	9,000	8,000	6,000	5,000	3,000	1,000	100
		Effective Sam	ple Size									

Preva ST DR 7078

Prev	/a \$	ST DR 70	78					Product C	haracterist	ics		
		US Market R	Release		Nov-9	6		NBG Code			DDD/RO	
		Registered l	JS Implants		1,00	0		Serial Num	ber Prefix/X·	-ray ID	PIF	
		Estimated A	ctive US Imp	lants	30	0		Estimated I	_ongevity		See page 73	
		Normal Batt	ery Depletion	ıs	1	8						
		Malfunction	s			0						
		Advisories			Non	e						
ability (%)	00 90 80									•••••		
Prot	C)	1	2	3	4	5	6	7	8	9	10
rvival F		Years Afte	r Implant	— M	alfunction-Fr	ree Survival		All-	Cause Survi	val		
su			l yr	2 yr	3 yr	4 yr	5 yr	бyr	7 yr	8 yr	at 101 mo	
vice	%		100.0	100.0	100.0	100.0	100.0	100.0	100.0	100.0	100.0	
De	%		99.7	99.7	99.4	99.4	98.2	97.3	94.2	91.8	91.8	
	#		1,000	1,000	1,000	1,000	500	400	300	200	100	
		Effective Sam	ple Size									

LIS Market Release	Oct-95	NBG Code		122	
	4.000	Carriel Number Dr	fin (X non ID		
Registered 03 implants	4,000	Serial Nurriber Pr	enx/A-ray ID	PGL, PGIVI	
Estimated Active US Implants	1,000	Estimated Longe	/ity	See page 74	
Normal Battery Depletions	13				
Malfunctions	1				
Advisories	None				
Advisories	None				
Advisories	None				

Γ <u>ζ</u>		Years Afte	r Implant	Ma	Itunction-Fre	ee Survival		All-C	ause Surviva	al		
s Su			1 yr	2 yr	3 yr	4 yr	5 yr	6 yr	7 yr	8 yr	9 yr	at 114 mo
vice	%		100.0	100.0	100.0	100.0	99.9	99.9	99.9	99.9	99.9	99.9
De	%		100.0	100.0	99.9	99.9	99.3	99.1	98.5	98.2	97.0	97.0
	#		3,000	3,000	2,000	2,000	1,000	1,000	1,000	1,000	300	100
		Effective Sam	ple Size									

Prodigy D 7864 7865 7866

Prodig	y D 7864,	7865, 7866					Product (Characterist	ics		
	US Market R	lelease		Oct-95	5		NBG Code			DDDCO	
	Registered l	JS Implants		3,000)		Serial Num	ıber Prefix/X	-ray ID	PDL, PDM, PDI	N
	Estimated A	ctive US Imp	lants	1,000)		Estimated	Longevity		See page 74	
	Normal Batt	ery Depletion	ıs	45	5						
	Malfunction	S		()						
	Advisories			None	2						
robability (%) 06 06 001			2	3		5	6	7	8	9	10
urvival P	Years Afte	r Implant	Ma	llfunction-Fr	ee Survival		All-	-Cause Surv	ival	-	
e Sr		l yr	2 yr	3 yr	4 yr	5 yr	6 yr	7 yr	8 yr	9 yr	at 116 mo
%		100.0	100.0	100.0	100.0	100.0	100.0	100.0	100.0	100.0	100.0
o %		99.9	99.7	99.4	98.8	98.6	97.7	97.1	96.0	92.6	89.4
#		2,000	2,000	2,000	2,000	2,000	1,000	1,000	1,000	400	100
	Effective Sam	ple Size									

Prodigy DR 7860, 7861, 7862

y DR 7860, 7861, 7862		Product Characteristics	
US Market Release	Oct-95	NBG Code	DDD/RO
Registered US Implants	37,000	Serial Number Prefix/X-ray ID	PDH, PDJ, PDK
Estimated Active US Implants	12,000	Estimated Longevity	See page 74
Normal Battery Depletions	627		
Malfunctions	10		
Advisories	None		



Pro	aig	y S 8164, 8	165, 8166					Product	Characterist	ics		
		US Market R	elease		Oct-95	5		NBG Code	e		SSIC	
		Registered l	JS Implants		2,000)		Serial Nur	nber Prefix/X	(-ray ID	PEG, PEH, PEJ	
		Estimated A	ctive US Impl	ants	500)		Estimated	Longevity		See page 74	
		Normal Batt	ery Depletion	IS	17	7						
		Malfunction	S		()						
		Advisories			None	5						
%												
ity (100											
abil	90											
rob	80											
al P	(0	1	2	3	4	5	6	7	8	9	10
Surviv		Years Afte	r Implant	— Ma	Ilfunction-Fr	ee Survival		Al	-Cause Surv	vival		
G			1 yr	2 yr	3 yr	4 yr	5 yr	6 yr	7 yr	8 yr	9 yr	at 113 mo
Dev	%		100.0	100.0	100.0	100.0	100.0	100.0	100.0	100.0	100.0	100.0
_	%		99.9	99.9	99.8	99.2	99.2	99.2	98.9	97.0	94.7	91.8
	#		2,000	1,000	1,000	1,000	1,000	1,000	1,000	400	200	100
		Effective Sam	ple Size									

Prodigy SR 8158, 8160, 8161, 8162 **Product Characteristics** US Market Release Oct-95 NBG Code SSI/R 22,000 Serial Number Prefix/X-ray ID PEM, PED, PEE, PEF **Registered US Implants** Estimated Active US Implants 6,000 Estimated Longevity See page 74 Normal Battery Depletions 271 Malfunctions 5 Advisories None 100 90 obability (%) 80 2 3 5 8 9 0 6 7 10 4 Malfunction-Free Survival ---- All-Cause Survival Years After Implant

3			l yr	2 yr	3 yr	4 yr	5 yr	6 yr	7 yr	8 yr	9 yr	at 119 mo
%	6		100.0	100.0	100.0	100.0	100.0	100.0	100.0	100.0	100.0	100.0
%	6		99.9	99.7	99.5	99.0	98.4	97.6	96.1	94.0	90.6	87.8
Ŧ	#		18,000	16,000	13,000	11,000	9,000	8,000	6,000	3,000	1,000	100
		Effective Sam	ple Size									

Sigma 100 S 55103 55106

JIGI	ria.	100 3 331	03, 55100					Product C	naracteristics			
		US Market R	elease		Aug-99			NBG Code		SSI		
		Registered L	JS Implants		1,000			Serial Num	oer Prefix/X-ray ID) PJG, PJ	Н	
		Estimated A	ctive US Impl	ants	200			Estimated L	ongevity	See pa	ige 74	
		Normal Batt	ery Depletion	IS	۱							
		Malfunction	S		0	(0 related to	advisory)					
		Thera T	apy Function I Therapy Funct	Not Comprom tion Comprom	nised 0 nised 0	(0 related to (0 related to	o advisory) o advisory)					
		Advisories			2	see page 152 and page 163	2 – 2005 Pot 3 – 1999 Mar	ential Separati ufacturing Iss	on of Interconnect ue	t Wires		
ty (%)	00						1					
abili	90											
do 1	80						_				_	
rvival F	C) Years Afte	l r Implant	<u> </u>	3 Ifunction-Fre	4 ee Survival	5	6 All-	7 8 Cause Survival	9	1	Q
Su			1 yr	2 yr	3 yr	4 yr	5 yr	at 65 mo				
vice	%		100.0	100.0	100.0	100.0	100.0	100.0				
De	%		100.0	100.0	99.5	99.5	99.5	99.5				
	#		1,000	400	300	200	100	100				
		Effective Sam	ple Size									

ma	200 DR	SDR203					Product	Characteristics	5		
	US Market F	Release		Aug-	.99		NBG Cod	e		DDD/RO	
	Registered	US Implants		16,0	00		Serial Nu	mber Prefix/X-ra	ay ID	PJD	
	Estimated A	Active US Imp	lants	9,0	00		Estimate	d Longevity		See page 74	<u>1</u>
	Normal Bat	tery Depletio	ns		16						
	Malfunction	IS			3 (0 related	to advisory)					
	Ther	apy Function Therapy Func	Not Compro tion Compro	mised mised	1 (0 related 2 (0 related	to advisory) to advisory)					
	Advisories				2 see page and page	<mark>152</mark> – 2005 Pot 163 – 1999 Mar	ential Separ nufacturing I	ation of Intercon ssue	nect Wir	es	
90 80											
(Years Afte	I er Implant	2 N	3 Ialfunction-	4 Free Surviva	5	6 A	/ Note: Note	3 1	9	10
		l yr	2 yr	3 yr	4 yr	5 yr	бyr	at 77 mo			
%		100.0	100.0	100.0	100.0	100.0	100.0	100.0			
%		100.0	99.9	99.9	99.8	99.6	99.2	99.2			
#		13,000	11,000	9,000	6,000	4,000	1,000	200			
	Effoctive Som	and Cine									

Sigma 200 SR SSR203

Sigma	a 200 SR s	SR203					Product C	haracteristics			
	US Market R	Release		Sep-99			NBG Code		SSI/R	:	
	Registered l	JS Implants		12,000			Serial Num	ber Prefix/X-ray	ID PJG		
	Estimated A	ctive US Impl	ants	5,000			Estimated	ongevity	See p	age 74	
	Normal Batt	ery Depletior	IS	10							
	Malfunction	S		2	(2 related to	advisory)					
	Ther	apy Function I Therapy Funct	Not Comprom tion Comprom	nised 0 nised 2	(0 related to (2 related to	o advisory) o advisory)					
	Advisories			2	see page 152 and page 16	2 – 2005 Pot 3 – 1999 Mar	ential Separat ufacturing Iss	ion of Interconne ue	ct Wires		
001 [1											
06 babili 08 05											
Pro	0	1	2	3 4	4	5	6	7 8	9		10
rviva	Years Afte	r Implant	— Ma	lfunction-Fre	ee Survival	-	All-	Cause Survival	-		
Su		1 yr	2 yr	3 yr	4 yr	5 yr	б yr	at 77 mo			
% Vice		100.0	100.0	100.0	100.0	100.0	100.0	100.0			
o %		100.0	99.9	99.9	99.8	99.6	99.4	99.4			
#		9,000	7,000	5,000	4,000	2,000	1,000	100			
	Effective Sam	ple Size									

	LIS Market P			٨٠٠٣	99		NRG Cod	0			
	Desistered	IS lugarlauta		Aug-	-99		Carial Nu	e mhar Drafiv /V			
	Registered			96,0	00		Serial Nu	riber Prelix/A-r	ayıD	PJD, PJE	
	Estimated A	ctive US Impl	ants	64,0	00		Estimate	dLongevity		See page 74	4
	Normal Batt	ery Depletior	15		61						
	Malfunction	S			38 (17 relate	d to advisory)					
	Thera	apy Function Therapy Func	Not Compro tion Compro	mised mised	3 (0 related 35 (17 relate	d to advisory) d to advisory)					
	Advisories				2 see page	152 - 2005 Po	tential Separa	ation of Intercor	nnect W	ires	
10.0					and page	<u>103</u> – 1999 Ma		3300			
100 90 80			2	3		5		7	8	9	10
100 90 80 0) Years Afte	l I r Implant	2 M	3 alfunction-	4 Free Surviva	5 1	6 A	7 I-Cause Surviv	8 val	9	10
100 90 80 0) Years Afte	1 r Implant 1 yr	2 M 2 yr	3 alfunction-	4 Free Surviva	5 1 5 yr	6 6 6 Al	7 7 I-Cause Surviv at 80 mo	8. val	9	10
100 90 80 0 %) Years Afte	1 r Implant 1 yr 100.0	2 M 2 yr 100.0	3 alfunction- 3 yr 100.0	4 Free Surviva 4 yr 99.9	5 1 5 yr 99.9	6 A 6 yr 99.9	7 7 I-Cause Surviv at 80 mo 99.9	8 ral	9	10
100 90 80 0 %) Years Afte	1 r Implant 1 yr 100.0 100.0	2 M 2 yr 100.0 99.9	3 alfunction- 3 yr 100.0 99.9	4 Free Surviva 99.9 99.7	5 1 5 yr 99.9 99.5	6 A 6 yr 99.9 99.3	7 I-Cause Surviv at 80 mo 99.9 99.2	8. 	9.	10

Sigma 300 SR SSR303, SSR306

Sig	ma	300 SR s	SR303, SSR3	306				Product	Characteristics		
		US Market R	elease		Sep-99)		NBG Code	2	SSI/R	
		Registered L	JS Implants		48,000)		Serial Nur	nber Prefix/X-ray ID	PJG, PJH	
		Estimated A	ctive US Impl	ants	25,000)		Estimated	Longevity	See page 74	
		Normal Batt	ery Depletion	IS	34						
		Malfunction	S		8	(5 related to	o advisory)				
		Thera T	apy Function I Therapy Funct	Not Comprom tion Comprom	nised 1 nised 7	0 related to 0 (5 related to	o advisory) o advisory)				
		Advisories			2	see page 15 and page 16	<mark>2 – 2005 Pot</mark> 3 – 1999 Mar	ential Separa ufacturing Is	tion of Interconnect ` sue	Wires	
ity (%)	00										
obabil	90 80										
Å	C)	1	2	3 4	4	5	6	7 8	9	10
viva		Years Afte	r Implant	— Ma	lfunction-Fre	ee Survival		All	-Cause Survival		
Sur			1 yr	2 yr	3 yr	4 yr	5 yr	6 yr	at 78 mo		
vice	%		100.0	100.0	100.0	99.9	99.9	99.9	99.9		
De	%		100.0	99.9	99.9	99.7	99.5	98.9	98.9		
	#		35,000	25,000	17,000	10,000	5,000	1,000	100		
		Effective Sam	ple Size								

gma	300 VDD	SVDD303					Product (Characteristics	5			
	US Market R	Release		Sep-9	9		NBG Code			VDDD		
	Registered l	JS Implants		1,00	0		Serial Num	ıber Prefix/X-ra	ıy ID	PJD		
	Estimated A	ctive US Imp	lants	30	0		Estimated	Longevity		See page 7	74	
	Normal Batt	ery Depletion	ıs		0							
	Malfunction	S			0 (0 related	to advisory)						
	Ther	apy Function Therapy Func	Not Compror tion Compror	nised nised	0 (0 related 0 (0 related	to advisory) to advisory)						
	Advisories				2 <u>see page 1</u> and page 1	<mark>52</mark> – 2005 Pot 63 – 1999 Mar	ential Separat	tion of Intercon	nect Wi	res		
100 90 80	0	1	2	3	4	5	6	7		9	10)
	Years Afte	r Implant	Ma	alfunction-Fr	ree Survival	·	All-	-Cause Surviva	l	-		
		l yr	2 yr	3 yr	4 yr	5 yr	at 64 mo					
%		100.0	100.0	100.0	100.0	100.0	100.0					
%		100.0	100.0	100.0	100.0	100.0	100.0					
#	Effective Sam	1,000 ple Size	500	400	200	100	100					

ra	D 79	44, 79	45, 79	46								Proc	luct Cl	naract	eristic	S					
	US M	arket F	Release	2				Jan-95	;			NBG	Code				DDI	DCO			
	Regis	tered l	JS Imp	lants				2,000)			Seria	ıl Numt	er Pre	fix/X-r	ay ID	PBD), PBE,	PBF		
	Estim	nated A	ctive L	JS Impl	ants			5	j			Estin	nated L	ongevi	ity		See	page	74		
	Norm	nal Batt	ery De	pletior	ıs			174	Ļ												
	Malfu	unction	s					2	2												
	Advis	ories						None	2												
100			1											1		1		-			
90																		-			
80																					_
70																					_
60																					_
50																		- -			_
40																_					_
(C		1		2		3		4		5	6		7		8		9		10	
	Year	s Afte	r Impl	ant		- Ma	lfunct	ion-Fr	ee Sur	vival			- All-(Cause	Surviv	al					
		₁		2	4		c		0	0			1	1	1		1	1	1	1	
~		I yr	Z yr	3 yr	4 yr	5 yr	6 yr	/ yr	ð yr	9 yr	at 111 mo										
%		99.9	99.9	99.9	99.9	99.9	99.9	99.9	99.9	99.7	99.7										_
%		99.9	99.8	98.9	97.3	93.5	90.0	82.8	66.7	53.2	47.1										
#		2,000	1,000	1,000	1,000	1,000	1,000	1,000	300	100	100										



Thera DR-50 7950, 7951, 7952





Th	era	SR 8	8940, 8	8941, 8	942									Prod	uct Cł	naract	eristi	CS					
		US M	arket R	Release					Jan-95	;				NBG	Code				:	SSI/R			
		Regis	tered l	JS Imp	lants				14,000)				Seria	l Numb	er Pre	fix/X-	ray ID	I	PAU, P	AV, PA	W	
		Estim	nated A	Active L	JS Impl	ants			400)				Estim	ated L	ongevi	ty			See pa	ge 74		
		Norm	nal Batt	tery De	pletion	IS			800)													
		Malfu	unction	S					16	5													
		Advis	ories						1	l see p	age 16	5 – 1997	7 Poten	tial Int	egrate	d Circu	it Failı	ire					
	100											-											
	90								•••														
(%	80									•													
ty (70																	_	_				
abili	60																						
robi	50											1											
aP	40																						
rviv	()	1 2	2 3	3 4	4 !	5 6	5 7	7 8	3) 1	0 1	1 1	2 1	3 1	4 1	5	16	17	18	19	20	21
e Su																							
evice		Year	s Afte	r Impl	ant		Ma	lfunct	ion-Fr	ee Sur	vival				All-0	Lause	Surviv	/al					
			1 yr	2 yr	3 yr	4 yr	5 yr	6 yr	7 yr	8 yr	9 yr	10 yr	at 131 mo										
	%		100.0	99.9	99.9	99.8	99.8	99.8	99.8	99.8	99.8	99.8	99.8										
	%		99.8	99.5	99.0	97.7	96.2	93.3	87.8	77.4	65.4	54.0	47.2										
	#		12,000	10,000	9,000	8,000	7,000	5,000	4,000	2,000	1,000	1,000	100										
		Effecti	ive Sam	ple Size																			



Thera-i DR	7960i, 7961i, 7962i
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Thera-	-i DR	7960	i, 7961	i, 7962	2i								Prod	uct Ch	aracte	ristics					
	US M	arket R	elease					Oct-95	;				NBG	Code				DDD,	/RO		
	Regis	tered l	JS Imp	lants			1	22,000					Serial	Numb	er Prefi	x/X-ra	y ID	PDB,	PDC, PD	D	
	Estim	nated A	ctive U	IS Impl	ants			34,000					Estim	ated Lo	ongevit	у		See p	age 74		
	Norn	nal Batt	ery De	pletion	S			3,210													
	Malfu	unction	s					50													
	Advis	sories						None													
100																					
R 90										•••											
<u>80</u>																					
60						-															
	0	1 2	2	5 2	1 5) () /	ζ ξ	5) [(0 1		2 1.	5 2	1 15	16) I/	/ 18	19	20	21
ย กับ	Year	s Afte	r Impla	ant		– Ma	lfuncti	ion-Fre	ee Sur	vival				All-C	ause S	urviva					
evic		llvr	2 vr	3 vr	4 vr	5 vr	6 vr	7 vr	8 vr	9 vr	10 vr	at 126 mo									
ב %	_	100.0	100.0	100.0	100.0	100.0	99.9	99.9	99.9	99.9	99.9	99.9									
%		100.0	99.9	99.7	99.5	99.0	98.2	96.6	93.4	87.0	77.8	69.7									
#		109,000	99,000	89,000	80,000	71,000	62,000	50,000	35,000	17,000	4,000	200									
	Effect	ive Samı	ole Size																	1	



Thera-i S 8964i, 8965i, 8966i **Product Characteristics** US Market Release Oct-95 NBG Code SSIR **Registered US Implants** 4,000 Serial Number Prefix/X-ray ID PDY, PEA, PEB Estimated Active US Implants 1,000 Estimated Longevity See page 75 Normal Battery Depletions 35 Malfunctions 1 Advisories None 100 90 Device Survival Probability (%) 80 6 9 10 11 12 14 15 16 17 18 19 0 2 3 Δ 5 7 8 13 20 21 Years After Implant Malfunction-Free Survival ---- All-Cause Survival 1 yr 2 yr 3 yr 4 yr 5 yr 6 yr 7 yr 8 yr 9 yr 10 yr at 121 mc % 100.0 100.0 100.0 100.0 100.0 100.0 100.0 100.0 100.0 100.0 100.0 % . . . 99.9 99.9 99.8 99.3 98.9 98.2 97.5 96.2 93.3 93.3 93.3 # 3,000 3,000 2,000 2,000 2,000 1,000 1,000 500 200 100 Effective Sample Size



The	era-	-i VD	D 89	68i									Proc	luct C	haract	eristi	CS					
		US M	arket R	leease				1	Mar-96	;			NBG	Code					VDD			
		Regis	tered l	JS Impl	ants				5,000)			Seria	l Numl	oer Pre	fix/X-	ray II	C	PEC			
		Estim	ated A	ctive U	IS Impla	ants			2,000)			Estin	nated L	ongev	ity			See pa	ge 75		
		Norm	nal Batt	ery De	pletion	S			28													
		Malfu	inction	s					0)												
		Advis	ories						None													
e Survival Probability (%)	100 90 80 % %	Years	s Afte 1 yr 100.0	2 3 r Impla 2 yr 100.0 99.8	ant 3 yr 100.0 99.6	4 yr 100.0 99.6	5 e Ma 5 yr 100.0 99.3	5 7 Ifuncti 6 yr 100.0 99.2	7 yr 100.0 99.2	8 yr 100.0 98.4	9 yr 100.0 97.3	at 119 mc 100.0 94.8		3 1 - All-(4 Cause	5 Survi	16 val	17	18	19	20	21
evice	#	F ((+)	4,000	4,000	3,000	3,000	3,000	2,000	2,000	1,000	1,000	100										
പ്		Effecti	ve sam	pie Size																		

Device Survival Summary (95% Confidence Interval)

new new <th></th> <th></th> <th></th> <th></th> <th></th> <th></th> <th>Malf</th> <th>unct</th> <th>ions</th> <th></th> <th>_</th> <th>Device</th> <th>e Surviva</th> <th>al Proba</th> <th>bility (%</th> <th>)</th> <th></th> <th></th> <th></th> <th></th> <th></th> <th></th> <th></th>							Malf	unct	ions		_	Device	e Surviva	al Proba	bility (%)							
ATS0. 7233 Mer-03 10.00 8.000 113 3 + 3 6 Malfunction free 1000 90.0 90.1 9	Family	Model Number	US Market Release	Registered US Implants	Estimated Active US Implants	Normal Battery Depletions	Therapy Function Compromised	Therapy	Function Not Compromised	Total		Years 1 yr	After In 2 yr	nplant 3 yr	4 yr	5 yr	6 yr	7 yr	8 yr	10 yr	12 yr	14 yr	16 yr
Advisory: serge 155 - 2003 Period large registrations of the intervention of the interventing definition of the intervention of the int	AT500	AT501, 7253	Mar-03	11,000	8,000	113	3	+	3 =	6	Malfunction- free	100.0 +0.0/-0.1	100.0 +0.0/-0.1	100.0 +0.0/-0.1	99.1 +0.6/-1.5	99.1 +0.6/-1.5	99.1 +0.6/-1.5 at 61 mo						
Elite 2074, solution 48.000 1.000 3.200 c - - 8.50 Maifunction: free 00.0 99.0 <		Advisory: Memory C – Perform Follow-Up	see page 1 ircuit Setti ance note o Protocol	55 – 2003 P ng; <u>also see</u> on AT500 P	Potential Inco <u>e page 172</u> Pacing Systen	nrect	(1) (advi	+ sory-r	(1) = related	(2) subset)	All-cause	100.0 +0.0/-0.1	99.9 +0.1/-0.1	99.5 +0.2/-0.4	89.6 +2.5/-3.2	53.3 +5.6/-5.9	47.3 +5.9/-6.1 at 61 mo						
EnPuise R EnDR0 Dec-03 7.000 5.000 0	Elite	7074, 7075, 7076, 7077	Apr-91	48,000	1,000	3,240	_		_	85	Malfunction- free	100.0 +0.0/-0.0	99.9 +0.0/-0.0	99.9 +0.0/-0.0	99.8 +0.0/-0.0	99.8 +0.0/-0.1	99.8 +0.0/-0.1	99.8 +0.0/-0.1	99.8 +0.0/-0.1	99.8 +0.0/-0.1	99.8 +0.0/-0.1	99.8 +0.0/-0.1 at 157 mo	
EnPuise DR Dec-03 7,000 5,000 0 0 + 0 0 Maifunction- 100.0<											All-cause	99.9 +0.0/-0.0	99.8 +0.0/-0.0	99.6 +0.1/-0.1	99.5 +0.1/-0.1	98.9 +0.1/-0.1	97.8 +0.2/-0.2	95.7 +0.2/-0.3	91.1 +0.4/-0.4	76.5 +0.7/-0.7	54.0 +1.1/-1.1	24.5 +2.4/-2.3 at 157 mo	
EnPulse DR Dec-03 2,000 1,000 0 - 0 -00/-00 <td>EnPulse DR</td> <td>EIDR01</td> <td>Dec-03</td> <td>7,000</td> <td>5,000</td> <td>0</td> <td>0</td> <td>+</td> <td>0 =</td> <td>0</td> <td>Malfunction- free</td> <td>100.0 +0.0/-0.0</td> <td>100.0 +0.0/-0.0</td> <td>100.0 +0.0/-0.0 at 29 mo</td> <td></td> <td></td> <td></td> <td></td> <td></td> <td></td> <td></td> <td></td> <td></td>	EnPulse DR	EIDR01	Dec-03	7,000	5,000	0	0	+	0 =	0	Malfunction- free	100.0 +0.0/-0.0	100.0 +0.0/-0.0	100.0 +0.0/-0.0 at 29 mo									
EnPulse Prepulse											All-cause	100.0 +0.0/-0.0	100.0 +0.0/-0.0	100.0 +0.0/-0.0 at 29 mo									
EnPulse 2 DR E2DR03, Feb-04 82.000 73.000 0 1 + 1 = 2 Malfunction- free 100.0 127m0 100.0 100.0 <	EnPulse DR	EIDR21	Dec-03	2,000	1,000	0	0	+	0 =	0	Malfunction- free	100.0 +0.0/-0.0	100.0 +0.0/-0.0	100.0 +0.0/-0.0 at 28 mo									
EnPulse 2 DR E2DR01, E2DR03, E2DR04 Feb-04 82,000 73,000 0 1 + 1 = 2 Malfunction- free 100.0 +0.0/-00 100.0 at 27 mo 100.0 at											All-cause	100.0 +0.0/-0.0	100.0 +0.0/-0.0	100.0 +0.0/-0.0 at 28 mo									
$ \frac{1}{1} = 1$	EnPulse 2 DR	E2DR01, E2DR03, E2DR06	Feb-04	82,000	73,000	0	1	+	1 =	2	Malfunction- free	100.0 +0.0/-0.0	100.0 +0.0/-0.0	100.0 +0.0/-0.0 at 27 mo									
EnPulse 2 DR E2DR21 Feb-04 9,000 8,000 0 0 + 0 malfunction-free 100.0 11/2 11											All-cause	100.0 +0.0/-0.0	100.0 +0.0/-0.0	100.0 +0.0/-0.0 at 27 mo									
EnPulse 2 DR E2DR31 Feb-04 400 0 + 0 0 + 00.0 100.0 + 00.0 100.0 + 00.0 - 0	EnPulse 2 DR	E2DR21	Feb-04	9,000	8,000	0	0	+	0 =	0	Malfunction- free	100.0 +0.0/-0.0	100.0 +0.0/-0.0										
EnPulse 2 DR E2DR31 Feb-04 400 0 0 + 0 = 0 Malfunction- free 100.0 +0.0/-0.0 at 14 mo 100.0 at 14 mo L											All-cause	100.0 +0.0/-0.0	100.0 +0.0/-0.0										
All-cause 100.0 100.0 +0.0/-0.0 at 14 mo	EnPulse 2 DR	E2DR31	Feb-04	400	400	0	0	+	0 =	0	Malfunction- free	100.0 +0.0/-0.0	100.0 +0.0/-0.0 at 14 mo										
											All-cause	100.0 +0.0/-0.0	100.0 +0.0/-0.0 at 14 mo										

	Device	Surviv	al Sum	mary c	ontinue	ed																
						Malfu	Incti	ons			Device	e Surviva	al Probal	oility (%)							
Family	Model Number	US Market Release	Registered US Implants	Estimated Active US Implants	Normal Battery Depletions	Therapy Function Compromised	Therapy	Function Not Compromised	Total		Years 1 yr	After In	nplant 3 yr	4 yr	5 yr	6 yr	7 yr	8 yr	10 yr	12 yr	14 yr	16 yr
EnPulse 2 SR	E2SR01, E2SR03, E2SR06	Dec-03	19,000	16,000	1	1	+ (= C	1	Malfunction- free	100.0 +0.0/-0.0	100.0 +0.0/-0.0	100.0 +0.0/-0.0 at 28 mo							/		
										All-cause	100.0 +0.0/-0.0	99.9 +0.1/-0.2	99.9 +0.1/-0.2 at 28 mo									
EnPulse 2 VDD	E2VDD01	Dec-03	500	400	0	0	+ () =	0	Malfunction- free	100.0 +0.0/-0.0	100.0 +0.0/-0.0 at 17 mo										
										All-cause	100.0 +0.0/-0.0	100.0 +0.0/-0.0 at 17 mo										
EnRhythm DR	P1501DR	May-05	29,000	28,000	0	4	+ 3	2 =	6	Malfunction- free	100.0 +0.0/-0.0	100.0 +0.0/-0.0 at 13 mo										
										All-cause	99.9 +0.0/-0.0	99.9 +0.0/-0.0 at 13 mo										
Kappa 400 DR	KDR401, KDR403	Jan-98	46,000	16,000	1,284	9	+ 1	2 =	21	Malfunction- free	100.0 +0.0/-0.0	100.0 +0.0/-0.0	100.0 +0.0/-0.0	100.0 +0.0/-0.0	99.9 +0.0/-0.0	99.9 +0.0/-0.0	99.9 +0.0/-0.0	99.9 +0.0/-0.0	99.9 +0.0/-0.0 at 99 mo			
										All-cause	99.9 +0.0/-0.0	99.9 +0.0/-0.0	99.8 +0.0/-0.1	99.6 +0.1/-0.1	99.2 +0.1/-0.1	97.8 +0.2/-0.2	91.4 +0.5/-0.5	66.9 +1.4/-1.5	54.3 +3.6/-3.8 at 99 mo			
Kappa 400 SR	KSR401, KSR403	Feb-98	15,000	6,000	147	1	+ :	3 =	4	Malfunction- free	100.0 +0.0/-0.0	100.0 +0.0/-0.0	100.0 +0.0/-0.0	100.0 +0.0/-0.0	100.0 +0.0/-0.0	100.0 +0.0/-0.1	100.0 +0.0/-0.1	100.0 +0.0/-0.1	100.0 +0.0/-0.1 at 98 mo			
										All-cause	99.9 +0.0/-0.1	99.9 +0.0/-0.1	99.8 +0.1/-0.1	99.6 +0.1/-0.2	99.5 +0.1/-0.2	98.8 +0.3/-0.3	96.4 +0.6/-0.7	82.9 +2.2/-2.4	80.3 +2.9/-3.3 at 98 mo			
Kappa 600 DR	KDR601, KDR603, KDR606	Jan-99	24,000	11,000	185	11	+ 4	4 =	15	Malfunction- free	100.0 +0.0/-0.0	100.0 +0.0/-0.0	100.0 +0.0/-0.0	99.9 +0.0/-0.0	99.9 +0.0/-0.1	99.9 +0.0/-0.1	99.9 +0.0/-0.1	99.9 +0.0/-0.1 at 86 mo				
	Advisory: Power Sup	see page 1 ply Wires	5 <u>7</u> – 2002 P	otential Frac	tured	(10) (advis	+ ((0) = elated	(10) subset)	All-cause	100.0 +0.0/-0.0	99.9 +0.0/-0.0	99.9 +0.0/-0.1	99.6 +0.1/-0.1	99.1 +0.1/-0.2	97.4 +0.3/-0.3	93.3 +0.9/-1.0	92.7 +1.2/-1.4 at 86 mo				
Kappa 600 DR	KDR651, KDR653	Mar-01	14,000	8,000	34	1	+ 3	2 =	3	Malfunction- free	100.0 +0.0/-0.0	100.0 +0.0/-0.0	100.0 +0.0/-0.0	100.0 +0.0/-0.1	100.0 +0.0/-0.1	100.0 +0.0/-0.1 at 61 mo						
	Advisory: Power Sup	see page 1 ply Wires	5 <u>7</u> – 2002 P	otential Frac	tured	(0) (advis	+ ((0) = elated	(0) subset)	All-cause	100.0 +0.0/-0.1	99.9 +0.0/-0.1	99.8 +0.1/-0.1	99.5 +0.1/-0.2	98.9 +0.3/-0.4	98.9 +0.3/-0.4 at 61 mo						

						Malfu	ncti	ons			Device	Surviva	l Probab	oility (%))							
Family	Model Number	US Market Release	Registered US Implants	Estimated Active US Implants	Normal Battery Depletions	Therapy Function Compromised	Therapy	Function Not Compromised	Total		Years . 1 vr	After Im 2 vr	iplant 3 vr	4 vr	5 yr	6 vr	7 vr	8 vr	10 vr	12 vr	14 vr	16 vr
Kappa 700 D	KD701	Jan-99	300	200	3	0 -	+ () =	0	Malfunction- free	100.0 +0.0/-0.0	100.0 +0.0/-0.0	100.0 +0.0/-0.0	100.0 +0.0/-0.0	100.0 +0.0/-0.0	100.0 +0.0/-0.0 at 64 mo	,					
	Advisory: Power Sup	see page 15 ply Wires	5 <u>7</u> – 2002 Pc	otential Frac	tured	(0) - (adviso	+ ((ory-re)) = elated s	(0) subset)	All-cause	100.0 +0.0/-0.0	100.0 +0.0/-0.0	100.0 +0.0/-0.0	98.9 +0.9/-3.3	97.3 +1.7/-4.3	97.3 +1.7/-4.3 at 64 mo						
Kappa 700 DR	KDR701, KDR703, KDR706	Feb-99	189,000	110,000	1,094	119 -	+ 1	9 =	138	Malfunction- free	100.0 +0.0/-0.0	100.0 +0.0/-0.0	99.9 +0.0/-0.0	99.9 +0.0/-0.0	99.9 +0.0/-0.0	99.9 +0.0/-0.0	99.9 +0.0/-0.0	99.9 +0.0/-0.0 at 88 mo				
	Advisory: Power Sup	see page 15 ply Wires	57 – 2002 Pc	otential Frac	tured	(100) - (adviso	+ ((ory-re)) = elated s	(100) subset)	All-cause	99.9 +0.0/-0.0	99.9 +0.0/-0.0	99.7 +0.0/-0.0	99.3 +0.0/-0.1	98.5 +0.1/-0.1	96.9 +0.2/-0.2	91.6 +0.5/-0.5	86.2 +1.7/-1.9 at 88 mo				
Kappa 700 DR	KDR721	Feb-99	10,000	3,000	375	4 -	+ .	=	5	Malfunction- free	100.0 +0.0/-0.1	100.0 +0.0/-0.1	100.0 +0.0/-0.1	100.0 +0.0/-0.1	99.9 +0.1/-0.2	99.9 +0.1/-0.2	99.9 +0.1/-0.2 at 80 mo					
	Advisory: Power Sup	see page 15 ply Wires	57 – 2002 Pc	otential Frac	tured	(4) - (adviso	+ ((ory-re)) = elated s	(4) subset)	All-cause	99.9 +0.0/-0.1	99.7 +0.1/-0.2	99.0 +0.2/-0.3	96.9 +0.4/-0.5	92.2 +0.7/-0.8	75.9 +2.0/-2.1	54.8 +4.2/-4.4 at 80 mo					
Kappa 700 SR	KSR701, KSR703, KSR706	Feb-99	53,000	25,000	342	4 -	+ .	=	5	Malfunction- free	100.0 +0.0/-0.0	100.0 +0.0/-0.0	100.0 +0.0/-0.0	100.0 +0.0/-0.0	100.0 +0.0/-0.0	100.0 +0.0/-0.0	100.0 +0.0/-0.0	100.0 +0.0/-0.0 at 87 mo				
										All-cause	100.0 +0.0/-0.0	99.9 +0.0/-0.0	99.6 +0.1/-0.1	99.0 +0.1/-0.1	97.8 +0.2/-0.2	95.9 +0.4/-0.4	89.7 +1.3/-1.5	86.5 +2.3/-2.8 at 87 mo				
Kappa 700 VDD	KVDD701	Jan-99	2,000	1,000	29	2 -	+ () =	2	Malfunction- free	99.9 +0.1/-0.4	99.9 +0.1/-0.4	99.9 +0.1/-0.4	99.8 +0.1/-0.5	99.8 +0.1/-0.5	99.8 +0.1/-0.5	99.8 +0.1/-0.5 at 78 mo					
	Advisory: Power Sup	see page 15 ply Wires	5 <u>7</u> – 2002 Po	otential Frac	tured	(2) - (adviso	+ ((ory-re)) = elated s	(2) subset)	All-cause	99.9 +0.1/-0.4	99.9 +0.1/-0.4	99.6 +0.2/-0.5	99.0 +0.4/-0.8	98.8 +0.5/-0.8	94.6 +1.7/-2.5	86.0 +3.8/-5.0 at 78 mo					
Kappa 800 DR	KDR801, KDR803	Jan-02	4,000	3,000	3	0 -	+ () =	0	Malfunction- free	100.0 +0.0/-0.0	100.0 +0.0/-0.0	100.0 +0.0/-0.0	100.0 +0.0/-0.0 at 46 mo								
										All-cause	100.0 +0.0/-0.0	99.9 +0.1/-0.2	99.8 +0.1/-0.2	99.8 +0.1/-0.2 at 46 mo								
Kappa 900 DR	KDR901, KDR903, KDR906	Jan-02	119,000	89,000	50	4 -	+ 8	3 =	12	Malfunction- free	100.0 +0.0/-0.0	100.0 +0.0/-0.0	100.0 +0.0/-0.0	100.0 +0.0/-0.0	100.0 +0.0/-0.0 at 53 mo							
										All-cause	100.0 +0.0/-0.0	100.0 +0.0/-0.0	99.9 +0.0/-0.0	99.6 +0.1/-0.1	99.5 +0.1/-0.1 at 53 mo							

IPG

Implantable Pulse Generators, continued

	Device	Surviv	al Sum	mary с	ontinue	ed															
						Malfur	nctions	S		Device	Surviva	al Probal	bility (%)							
Family	Model Number	US Market Release	Registered US Implants	Estimated Active US Implants	Normal Battery Depletions	Therapy Function Compromised	Therapy Function Not	Compromised Total	_	Years 1 vr	After In	1plant 3 vr	4 vr	5 yr	6 vr	7 yr	8 vr	10 yr	12 vr	14 vr	16 vr
– Kappa 900 SR	KSR901, KSR903, KSR906	Jan-02	34,000	23,000	14	0 +	- 4	= 4	Malfunction- free	100.0 +0.0/-0.0	100.0 +0.0/-0.0	100.0 +0.0/-0.0	100.0 +0.0/-0.0	100.0 +0.0/-0.0 at 51 mo				10)1	12)1		
									All-cause	100.0 +0.0/-0.0	99.9 +0.0/-0.1	99.8 +0.1/-0.1	99.6 +0.1/-0.2	99.6 +0.1/-0.2 at 51 mo							
Kappa 900 VDD	KVDD901	Jan-02	1,000	400	0	0 +	- 0	= 0	Malfunction- free	100.0 +0.0/-0.0	100.0 +0.0/-0.0	100.0 +0.0/-0.0	100.0 +0.0/-0.0 at 44 mo								
									All-cause	100.0 +0.0/-0.0	100.0 +0.0/-0.0	100.0 +0.0/-0.0	100.0 +0.0/-0.0 at 44 mo								
Kappa 920 DR	KDR921	Jan-02	16,000	11,000	31	1 +	- 0	= 1	Malfunction- free	100.0 +0.0/-0.0	100.0 +0.0/-0.0	100.0 +0.0/-0.1	100.0 +0.0/-0.1	100.0 +0.0/-0.1 at 50 mo							
									All-cause	100.0 +0.0/-0.0	99.9 +0.0/-0.1	99.6 +0.1/-0.2	98.0 +0.6/-0.8	98.0 +0.6/-0.8 at 50 mo							
Legend	8416, 8417, 8417M, 8418, 8419	Aug-89	57,000	4,000	2,535	-	_	145	Malfunction- free	99.9 +0.0/-0.0	99.9 +0.0/-0.0	99.8 +0.0/-0.0	99.8 +0.0/-0.0	99.7 +0.0/-0.1	99.7 +0.1/-0.1	99.6 +0.1/-0.1	99.6 +0.1/-0.1	99.6 +0.1/-0.1	99.6 +0.1/-0.1	99.6 +0.1/-0.1	99.6 +0.1/-0.1 at 196 mo
									All-cause	99.9 +0.0/-0.0	99.7 +0.0/-0.1	99.4 +0.1/-0.1	98.9 +0.1/-0.1	98.3 +0.1/-0.1	97.2 +0.2/-0.2	94.7 +0.3/-0.3	90.7 +0.4/-0.4	81.4 +0.6/-0.6	73.2 +0.7/-0.7	64.7 +1.0/-1.0	57.3 +1.6/-1.7 at 196 mo
Legend II	8424, 8426, 8427	Nov-91	59,000	7,000	1,555	_	_	37	Malfunction- free	100.0 +0.0/-0.0	100.0 +0.0/-0.0	100.0 +0.0/-0.0	99.9 +0.0/-0.0	99.9 +0.0/-0.0	99.9 +0.0/-0.0	99.9 +0.0/-0.0	99.9 +0.0/-0.0	99.9 +0.0/-0.0	99.9 +0.0/-0.0	99.9 +0.0/-0.0	99.9 +0.0/-0.0 at 171 mo
									All-cause	99.9 +0.0/-0.0	99.7 +0.0/-0.1	99.5 +0.1/-0.1	99.2 +0.1/-0.1	98.8 +0.1/-0.1	98.2 +0.1/-0.1	97.3 +0.2/-0.2	94.9 +0.3/-0.3	89.3 +0.4/-0.4	83.8 +0.6/-0.6	76.2 +1.3/-1.4	75.3 +1.5/-1.6 at 171 mo
Minuet	7107, 7108	Mar-92	17,000	3,000	513	-	-	4	Malfunction- free	100.0 +0.0/-0.0	100.0 +0.0/-0.0	100.0 +0.0/-0.1	100.0 +0.0/-0.1	100.0 +0.0/-0.1	100.0 +0.0/-0.1	100.0 +0.0/-0.1	100.0 +0.0/-0.1	100.0 +0.0/-0.1	100.0 +0.0/-0.1	100.0 +0.0/-0.1 at 167 mo	
									All-cause	100.0 +0.0/-0.0	100.0 +0.0/-0.0	99.8 +0.1/-0.1	99.5 +0.1/-0.1	98.9 +0.2/-0.2	98.2 +0.2/-0.3	96.9 +0.3/-0.4	94.7 +0.5/-0.5	89.4 +0.7/-0.8	83.0 +1.1/-1.1	76.1 +1.9/-2.0 at 167 mo	
Minix/ Minix ST	8330, 8331, 8331M, 8340, 8341, 8341M, 8342	Dec-89	58,000	6,000	1,409	_	-	49	Malfunction- free	100.0 +0.0/-0.0	99.9 +0.0/-0.0	99.9 +0.0/-0.0	99.9 +0.0/-0.0	99.9 +0.0/-0.0	99.9 +0.0/-0.0	99.9 +0.0/-0.0	99.9 +0.0/-0.0	99.9 +0.0/-0.0	99.9 +0.0/-0.0	99.9 +0.0/-0.0	99.9 +0.0/-0.0 at 205 mo
	Advisory: Restoratio	see page 1 n of Perma	70 - 1991 Pot inent Settin	ential Delay gs	/ed	—	-	-	All-cause	99.9 +0.0/-0.0	99.7 +0.0/-0.0	99.5 +0.1/-0.1	99.2 +0.1/-0.1	98.7 +0.1/-0.1	97.7 +0.2/-0.2	95.3 +0.3/-0.3	92.0 +0.4/-0.4	87.3 +0.5/-0.5	83.9 +0.6/-0.6	81.2 +0.7/-0.7	78.6 +1.2/-1.3 at 205 mo

Source: Medtronic Device Registration and Returned Product Analysis Data as of August 7, 2006 continued

						Malfun	ctions		-	Device	e Surviva	al Proba	bility (%)							
Family	Model Number	US Market Release	Registered US Implants	Estimated Active US Implants	Normal Battery Depletions	Therapy Function Compromised	Therapy Function Not Compromised	Total		Years 1 yr	After In	nplant 3 yr	4 vr	5 vr	6 yr	7 vr	8 vr	10 yr	12 vr	14 vr	16 yr
Preva D	7068	Nov-96	1,000	300	16	_	-	1	Malfunction- free	100.0 +0.0/-0.0	99.9 +0.1/-0.9	99.9 +0.1/-0.9 at 99 mo									
									All-cause	100.0 +0.0/-0.0	99.7 +0.2/-0.8	99.1 +0.5/-1.2	98.3 +0.8/-1.4	98.3 +0.8/-1.4	96.4 +1.3/-2.1	92.7 +2.2/-3.1	91.9 +2.4/-3.3	91.9 +2.4/-3.3 at 99 mo			
Preva DR	7088, 7089	Jul-96	25,000	8,000	457	_	-	3	Malfunction- free	100.0 +0.0/-0.0	100.0 +0.0/-0.0	100.0 +0.0/-0.0	100.0 +0.0/-0.0	100.0 +0.0/-0.0	100.0 +0.0/-0.0	100.0 +0.0/-0.0	100.0 +0.0/-0.0	100.0 +0.0/-0.0 at 117 mo			
									All-cause	100.0 +0.0/-0.0	99.9 +0.0/-0.1	99.7 +0.1/-0.1	99.5 +0.1/-0.1	99.0 +0.1/-0.2	98.1 +0.2/-0.2	96.8 +0.3/-0.3	93.9 +0.5/-0.5	79.9 +2.3/-2.5 at 117 mo			
Preva SR	8088, 8089	Jul-96	18,000	4,000	225	—	-	1	Malfunction- free	100.0 +0.0/-0.0	100.0 +0.0/-0.0	100.0 +0.0/-0.0	100.0 +0.0/-0.1	100.0 +0.0/-0.1	100.0 +0.0/-0.1	100.0 +0.0/-0.1	100.0 +0.0/-0.1	100.0 +0.0/-0.1 at 116 mo			
									All-cause	99.9 +0.0/-0.1	99.9 +0.0/-0.1	99.7 +0.1/-0.1	99.3 +0.1/-0.2	98.7 +0.2/-0.3	97.7 +0.3/-0.4	95.5 +0.5/-0.5	93.9 +0.6/-0.7	84.6 +2.9/-3.6 at 116 mo			
Preva ST DR	7078	Nov-96	1,000	300	18	—	-	0	Malfunction- free	100.0 +0.0/-0.0	100.0 +0.0/-0.0	100.0 +0.0/-0.0	100.0 +0.0/-0.0	100.0 +0.0/-0.0	100.0 +0.0/-0.0	100.0 +0.0/-0.0	100.0 +0.0/-0.0	100.0 +0.0/-0.0 at 101 mo			
									All-cause	99.7 +0.2/-0.8	99.7 +0.2/-0.8	99.4 +0.4/-0.9	99.4 +0.4/-0.9	98.2 +0.8/-1.5	97.3 +1.1/-1.8	94.2 +1.9/-2.7	91.8 +2.5/-3.4	91.8 +2.5/-3.4 at 101 mo			
Prevail S	8084, 8085, 8086	Oct-95	4,000	1,000	13	_	-	1	Malfunction- free	100.0 +0.0/-0.0	100.0 +0.0/-0.0	100.0 +0.0/-0.0	100.0 +0.0/-0.0	99.9 +0.1/-0.4	99.9 +0.1/-0.4	99.9 +0.1/-0.4	99.9 +0.1/-0.4	99.9 +0.1/-0.4 at 114 mo			
									All-cause	100.0 +0.0/-0.1	100.0 +0.0/-0.1	99.9 +0.1/-0.2	99.9 +0.1/-0.2	99.3 +0.3/-0.6	99.1 +0.4/-0.6	98.5 +0.6/-0.9	98.2 +0.6/-1.0	97.0 +1.0/-1.6 at 114 mo			
Prodigy D	7864, 7865, 7866	Oct-95	3,000	1,000	45	—	-	0	Malfunction- free	100.0 +0.0/-0.0	100.0 +0.0/-0.0	100.0 +0.0/-0.0	100.0 +0.0/-0.0	100.0 +0.0/-0.0	100.0 +0.0/-0.0	100.0 +0.0/-0.0	100.0 +0.0/-0.0	100.0 +0.0/-0.0 at 116 mo			
									All-cause	99.9 +0.1/-0.2	99.7 +0.2/-0.3	99.4 +0.3/-0.4	98.8 +0.4/-0.6	98.6 +0.4/-0.6	97.7 +0.6/-0.8	97.1 +0.7/-1.0	96.0 +0.9/-1.2	89.4 +2.6/-3.4 at 116 mo			
Prodigy DR	7860, 7861, 7862	Oct-95	37,000	12,000	627	_	-	10	Malfunction- free	100.0 +0.0/-0.0	100.0 +0.0/-0.0	100.0 +0.0/-0.0	100.0 +0.0/-0.0	100.0 +0.0/-0.0	100.0 +0.0/-0.0	100.0 +0.0/-0.0	100.0 +0.0/-0.0	100.0 +0.0/-0.0			
									All-cause	99.9 +0.0/-0.0	99.9 +0.0/-0.0	99.8 +0.0/-0.1	99.5 +0.1/-0.1	99.0 +0.1/-0.1	98.3 +0.2/-0.2	96.9 +0.2/-0.3	94.0 +0.4/-0.4	81.7 +1.8/-2.0			
Prodigy S	8164, 8165, 8166	Oct-95	2,000	500	17	—	-	0	Malfunction- free	100.0 +0.0/-0.0	100.0 +0.0/-0.0	100.0 +0.0/-0.0	100.0+0.0/-0.0	100.0 +0.0/-0.0	100.0 +0.0/-0.0	100.0 +0.0/-0.0	100.0 +0.0/-0.0	100.0 +0.0/-0.0 at 113 mo			
									All-cause	99.9 +0.1/-0.3	99.9 +0.1/-0.3	99.8 +0.2/-0.4	99.2 +0.4/-0.7	99.2 +0.4/-0.7	99.2 +0.4/-0.7	98.9 +0.5/-0.9	97.0 +1.1/-1.6	91.8 +2.8/-4.2 at 113 mo			

PG

					-	Malfunctions			_	Device Survival Probability (%)											
Family	Model Number	US Market Release	Registered US Implants	Estimated Active US Implants	Normal Battery Depletions	Therapy Function Compromised	Therapy Function Not Compromised	Total		Years After Implant 1 yr 2 yr 3 yr 4 yr 5 yr 6 yr 7 yr 8 yr 10 yr 12 yr 14 yr 16 yr											16 yr
Prodigy SR	8158, 8160, 8161, 8162	Oct-95	22,000	6,000	271	—	-	5	Malfunction- free	100.0 +0.0/-0.0	100.0 +0.0/-0.0	100.0 +0.0/-0.0	100.0 +0.0/-0.0	100.0 +0.0/-0.0	100.0 +0.0/-0.0	100.0 +0.0/-0.0	100.0 +0.0/-0.0	100.0 +0.0/-0.0 at 119 mo			
									All-cause	99.9 +0.0/-0.1	99.7 +0.1/-0.1	99.5 +0.1/-0.1	99.0 +0.1/-0.2	98.4 +0.2/-0.2	97.6 +0.3/-0.3	96.1 +0.4/-0.4	94.0 +0.6/-0.6	87.8 +1.9/-2.3 at 119 mo			
Sigma 100 S	SS103, SS106	Aug-99	1,000	200	1	0 +	0 =	0	Malfunction- free	100.0 +0.0/-0.0	100.0 +0.0/-0.0	100.0 +0.0/-0.0	100.0 +0.0/-0.0	100.0 +0.0/-0.0	100.0 +0.0/-0.0 at 65 mo						
	Advisories: Separation – 1999 Man	see page of Intercon ufacturing	<u>152</u> – 2005 nnect Wires Issue	Potential s; and page 16	<u>53</u>	<mark>(0)</mark> + (advisor	(0) = y-related	(0) subset)	All-cause	100.0 +0.0/-0.0	100.0 +0.0/-0.0	99.5 +0.4/-1.4	99.5 +0.4/-1.4	99.5 +0.4/-1.4	99.5 +0.4/-1.4 at 65 mo						
Sigma 200 DR	SDR203	Aug-99	16,000	9,000	16	2 +	1 =	3	Malfunction- free	100.0 +0.0/-0.0	100.0 +0.0/-0.0	100.0 +0.0/-0.0	100.0 +0.0/-0.0	100.0 +0.0/-0.0	100.0 +0.0/-0.0	100.0 +0.0/-0.0 at 77 mo					
	Advisories: Separation – 1999 Man	see page of Intercon ufacturing	<u>152</u> – 2005 nnect Wires Issue	Potential s; and page 16	<u>53</u>	<mark>(0)</mark> + (advisor	(0) = y-related	(0) subset)	All-cause	100.0 +0.0/-0.0	99.9 +0.0/-0.1	99.9 +0.0/-0.1	99.8 +0.1/-0.1	99.6 +0.1/-0.2	99.2 +0.3/-0.4	99.2 +0.3/-0.4 at 77 mo					
Sigma 200 SR	SSR203	Sep-99	12,000	5,000	10	2 +	0 =	2	Malfunction- free	100.0 +0.0/-0.0	100.0 +0.0/-0.0	100.0 +0.0/-0.0	100.0 +0.0/-0.1	100.0 +0.0/-0.1	100.0 +0.0/-0.1	100.0 +0.0/-0.1 at 77 mo					
	Advisories: Separation – 1999 Man	see page of Intercon ufacturing	1 <u>52</u> – 2005 nnect Wires Issue	Potential s; and page 16	53	<mark>(2)</mark> + (advisor	(0) = y-related	(2) subset)	All-cause	100.0 +0.0/-0.1	99.9 +0.0/-0.1	99.9 +0.1/-0.1	99.8 +0.1/-0.2	99.6 +0.2/-0.3	99.4 +0.2/-0.4	99.4 +0.2/-0.4 at 77 mo					
Sigma 300 DR	SDR303, SDR306	Aug-99	98,000	64,000	61	35 +	3 =	38	Malfunction- free	100.0 +0.0/-0.0	100.0 +0.0/-0.0	100.0 +0.0/-0.0	99.9 +0.0/-0.0	99.9 +0.0/-0.0	99.9 +0.0/-0.0	99.9 +0.0/-0.0 at 80 mo					
	Advisories: Separation – 1999 Man	see page of Intercor ufacturing	152 – 2005 nnect Wire Issue	Potential s; and page 16	<u>53</u>	(17) + (advisor	(0) = y-related	(17) subset)	All-cause	100.0 +0.0/-0.0	99.9 +0.0/-0.0	99.9 +0.0/-0.0	99.7 +0.0/-0.1	99.5 +0.1/-0.1	99.3 +0.1/-0.2	99.2 +0.2/-0.2 at 80 mo					
Sigma 300 SR	SSR303, SSR306	Sep-99	48,000	25,000	34	7 +	1 =	8	Malfunction- free	100.0 +0.0/-0.0	100.0 +0.0/-0.0	100.0 +0.0/-0.0	99.9 +0.0/-0.1	99.9 +0.0/-0.1	99.9 +0.0/-0.1	99.9 +0.0/-0.1 at 78 mo					
	Advisories: Separation – 1999 Man	see page of Intercor ufacturing	152 – 2005 nnect Wire Issue	Potential s; and page 16	<u>53</u>	<mark>(5)</mark> + (advisor	(0) = y-related	(5) subset)	All-cause	100.0 +0.0/-0.0	99.9 +0.0/-0.0	99.9 +0.0/-0.1	99.7 +0.1/-0.1	99.5 +0.1/-0.2	98.9 +0.3/-0.4	98.9 +0.3/-0.4 at 78 mo					
Sigma 300 VDD	SVDD303	Sep-99	1,000	300	0	0 +	0 =	0	Malfunction- free	100.0 +0.0/-0.0	100.0 +0.0/-0.0	100.0 +0.0/-0.0	100.0+0.0/-0.0	100.0 +0.0/-0.0	100.0 +0.0/-0.0 at 64 mo						
	Advisories: Separation – 1999 Man	see page of Intercor ufacturing	152 – 2005 nnect Wires Issue	Potential s; and page 16	53	<mark>(0)</mark> + (advisor	(0) = y-related	(0) subset)	All-cause	100.0 +0.0/-0.0	100.0 +0.0/-0.0	100.0 +0.0/-0.0	100.0 +0.0/-0.0	100.0 +0.0/-0.0	100.0 +0.0/-0.0 at 64 mo						

continued

IPG

Implantable Pulse Generators, continued

						Malfunctions				Device Survival Probability (%)											
Family	Model Number	US Market Release	Registered US Implants	Estimated Active US Implants	Normal Battery Depletions	Therapy Function Compromised	herapy unction Not compromised otal			Years After Implant											
 Thera D	7944, 7945, 7946	Jan-95	2,000	5	174	-	-	2	Malfunction- free	99.9 +0.0/-0.3	99.9 +0.0/-0.3	99.9 +0.0/-0.3	99.9 +0.0/-0.3	99.9 +0.0/-0.3	99.9 +0.0/-0.3	99.9 +0.0/-0.3	99.9 +0.0/-0.3	99.7 +0.3/-1.3 at 111 mo			
									All-cause	99.9 +0.1/-0.3	99.8 +0.2/-0.4	98.9 +0.4/-0.7	97.3 +0.8/-1.0	93.5 +1.3/-1.6	90.0 +1.6/-2.0	82.8 +2.3/-2.6	66.7 +3.5/-3.8	47.1 +4.9/-5.0 at 111 mo			
Thera DR-40	7940, 7941, 7942	Jan-95	30,000	10	2,945	_	-	37	Malfunction- free	100.0 +0.0/-0.0	100.0 +0.0/-0.0	99.9 +0.0/-0.0	99.9 +0.0/-0.1	99.8 +0.0/-0.1	99.8 +0.0/-0.1	99.8 +0.0/-0.1	99.8 +0.0/-0.1	99.8 +0.0/-0.1 at 113 mo			
	Advisory: Circuit Fail	see page 1 ure	<u>65</u> – 1997 Po	otential Integ	grated	_	_	_	All-cause	100.0 +0.0/-0.0	99.7 +0.1/-0.1	98.5 +0.2/-0.2	96.5 +0.2/-0.3	93.5 +0.3/-0.4	88.8 +0.5/-0.5	80.8 +0.6/-0.6	66.3 +0.9/-0.9	20.7 +2.6/-2.5 at 113 mo			
Thera DR-50	7950, 7951, 7952	Jan-95	5,000	1,000	156	—	-	1	Malfunction- free	100.0 +0.0/-0.1	100.0 +0.0/-0.1	100.0 +0.0/-0.1	100.0 +0.0/-0.1	100.0 +0.0/-0.1	100.0 +0.0/-0.1	100.0 +0.0/-0.1	100.0 +0.0/-0.1	100.0 +0.0/-0.1	100.0 +0.0/-0.1 at 133 mo		
	Advisory: <u>see page 165</u> – 1997 Potential Integrated Circuit Failure						_	_	All-cause	100.0 +0.0/-0.1	100.0 +0.0/-0.1	99.7 +0.1/-0.2	99.5 +0.2/-0.3	99.2 +0.3/-0.4	98.5 +0.4/-0.5	97.3 +0.6/-0.7	96.0 +0.7/-0.9	86.9 +1.6/-1.8	71.7 +3.8/-4.3 at 133 mo		
Thera S	8944, 8945, 8946	Jan-95	3,000	200	80	—	-	3	Malfunction- free	100.0 +0.0/-0.0	100.0 +0.0/-0.0	99.9 +0.1/-0.4	99.8 +0.2/-0.5	99.8 +0.2/-0.5	99.8 +0.2/-0.5	99.8 +0.2/-0.5	99.8 +0.2/-0.5	99.8 +0.2/-0.5	99.8 +0.2/-0.5 at 126 mo		
									All-cause	100.0 +0.0/-0.0	99.9 +0.1/-0.3	99.5 +0.2/-0.5	98.4 +0.5/-0.8	96.7 +0.9/-1.2	95.9 +1.0/-1.3	93.2 +1.5/-1.8	88.5 +2.1/-2.6	69.9 +4.1/-4.6	69.0 +4.3/-4.8 at 126 mo		
Thera SR	8940, 8941, 8942	Jan-95	14,000	400	800	_	-	16	Malfunction- free	100.0 +0.0/-0.0	99.9 +0.0/-0.1	99.9 +0.0/-0.1	99.8 +0.1/-0.1	99.8 +0.1/-0.1	99.8 +0.1/-0.1	99.8 +0.1/-0.1	99.8 +0.1/-0.1	99.8 +0.1/-0.1	99.8 +0.1/-0.1 at 131 mo		
	Advisory: Circuit Fail	tential Integ	_	-	-	All-cause	99.8 +0.1/-0.1	99.5 +0.1/-0.1	99.0 +0.2/-0.2	97.7 +0.3/-0.3	96.2 +0.4/-0.4	93.3 +0.6/-0.6	87.8 +0.8/-0.9	77.4 +1.2/-1.3	54.0 +2.2/-2.2	47.2 +3.0/-3.1 at 131 mo					
Thera-i D	7964i, 7965i, 7966i	Oct-95	3,000	1,000	79	—	-	1	Malfunction- free	cause 100.0 +0.0/-0.0 100.0 +0.0/-0.2 100.0 100.0 100.0 </th <th>100.0 +0.0/-0.2 at 121 mo</th> <th></th> <th></th>	100.0 +0.0/-0.2 at 121 mo										
									All-cause	100.0 +0.0/-0.0	99.9 +0.1/-0.2	99.6 +0.2/-0.3	99.5 +0.2/-0.4	99.1 +0.3/-0.5	97.5 +0.6/-0.8	96.3 +0.8/-1.0	93.5 +1.2/-1.5	81.7 +3.1/-3.6	81.7 +3.1/-3.6 at 121 mo		
Thera-i DR	7960i, 7961i, 7962i	Oct-95	122,000	34,000	3,210	—	-	50	Malfunction- free	100.0 +0.0/-0.0	100.0 +0.0/-0.0	100.0 +0.0/-0.0	100.0 +0.0/-0.0	100.0 +0.0/-0.0	99.9 +0.0/-0.0	99.9 +0.0/-0.0	99.9 +0.0/-0.0	99.9 +0.0/-0.0	99.9 +0.0/-0.0 at 126 mo		
									All-cause	100.0 +0.0/-0.0	99.9 +0.0/-0.0	99.7 +0.0/-0.0	99.5 +0.0/-0.1	99.0 +0.1/-0.1	98.2 +0.1/-0.1	96.6 +0.1/-0.1	93.4 +0.2/-0.2	77.8 +07/-0.7	69.7 +2.0/-2.1 at 126 mo		

IPG

Implantable Pulse Generators, continued

	Device	e Surviv	al Sum	mary c	ontinue	ed															
						Malfunctions			_	Device Survival Probability (%)											
λ.	odel imber	US Market Release	gistered Implants	timated tive US plants	'mal Battery oletions	erapy Function mpromised	erapy nction Not mpromised	tal		Years After Implant											
Far	βÑ		Re. US	Ac Ac	n S	£°	두물 응	٩		1 yr	2 yr	3 yr	4 yr	5 yr	6 yr	7 yr	8 yr	10 yr	12 yr	14 yr	16 yr
Thera-i DR	7968i	Jul-96	4,000	1,000	164	-	_	3	Malfunction- free	100.0 +0.0/-0.0	100.0 +0.0/-0.0	99.9 +0.1/-0.2	99.9 +0.1/-0.2	99.9 +0.1/-0.2	99.9 +0.1/-0.2	99.9 +0.1/-0.2	99.9 +0.1/-0.2	99.9 +0.1/-0.2 at 106 mo			
									All-cause	100.0 +0.0/-0.0	99.8 +0.1/-0.2	99.5 +0.2/-0.3	98.6 +0.4/-0.6	97.0 +0.6/-0.8	94.1 +1.0/-1.1	88.9 +1.4/-1.6	78.2 +2.4/-2.7	61.7 +4.7/-5.1 at 106 mo			
Thera-i S	8964i, 8965i, 8966i	Oct-95	4,000	1,000	35	-	-	1	Malfunction- free	100.0 +0.0/-0.0	100.0 +0.0/-0.0	100.0 +0.0/-0.0	100.0 +0.0/-0.3	100.0 +0.0/-0.3	100.0 +0.0/-0.3	100.0 +0.0/-0.3	100.0 +0.0/-0.3	100.0 +0.0/-0.3	100.0 +0.0/-0.3 at 121 mo		
									All-cause	99.9 +0.0/-0.2	99.9 +0.1/-0.2	99.8 +0.1/-0.3	99.3 +0.3/-0.5	98.9 +0.4/-0.6	98.2 +0.5/-0.8	97.5 +0.7/-0.9	96.2 +0.9/-1.2	93.3 +1.5/-1.9	93.3 +1.5/-1.9 at 121 mo		
Thera-i SR	8960i, 8961i, 8962i	Oct-95	50,000	11,000	736	—	-	7	Malfunction- free	100.0 +0.0/-0.0	100.0 +0.0/-0.0	100.0 +0.0/-0.0	100.0 +0.0/-0.0	100.0 +0.0/-0.0	100.0 +0.0/-0.0	100.0 +0.0/-0.0	100.0 +0.0/-0.0	100.0 +0.0/-0.0	100.0 +0.0/-0.0 at 125 mo		
									All-cause	100.0 +0.0/-0.0	99.9 +0.0/-0.0	99.7 +0.1/-0.1	99.4 +0.1/-0.1	9 8.9 +0.1/-0.1	98.2 +0.2/-0.2	97.1 +0.2/-0.2	95.1 +0.3/-0.3	85.4 +1.0/-1.0	82.2 +1.5/-1.6 at 125 mo		
⁻ hera-i /DD	8968i	Mar-96	5,000	2,000	28	-	-	0	Malfunction- free	100.0 +0.0/-0.0	100.0 +0.0/-0.0	100.0 +0.0/-0.0	100.0 +0.0/-0.0	100.0 +0.0/-0.0	100.0 +0.0/-0.0	100.0 +0.0/-0.0	100.0 +0.0/-0.0	100.0 +0.0/-0.0 at 119 mo			
									All-cause	100.0 +0.0/-0.1	99.8 +0.1/-0.2	99.6 +0.1/-0.3	99.6 +0.2/-0.3	99.3 +0.2/-0.4	99.2 +0.3/-0.4	99.2 +0.3/-0.4	98.4 +0.5/-0.6	94.8 +1.7/-2.4 at 119 mo			
Reference Chart

The longevity estimates shown here assume a lower rate of 60 ppm, 100% pacing, and pulse width of 0.4 ms unless noted otherwise. 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. The elective replacement time is indicated via telemetry indication, and rate and mode change to 65 ppm and VVI respectively (VOO/65 with magnet), unless noted otherwise.

		Estimated Long			
Family	Model Number	Amplitude Setting	500 Lead Ω	1000 Lead Ω	Elective Replacement Time Indicators
AT500	AT501, 7253	Low 2.0 V (A, RV) Nominal 3.0 V (A, RV) High 5.0 V (A, RV)	7.7 5.8 3.7	8.3 7.0 5.2	Telemetry indication. Pacing mode and rate (magnet and non-magnet) as programmed.
Elite	7074, 7075, 7076, 7077	Low 2.5 V, 0.36 ms (A, RV) Nominal 3.3 V, 0.36 ms (A, RV) High 5.0 V, 0.36 ms (A, RV)	11.8 8.6 6.7	13.2 11.0 9.4	**
EnPulse DR	EIDR01, EIDR03, EIDR06	Low 2.5 V (A, RV) Nominal 3.5 V (A, RV) High 5.0 V (A, RV)	7.5 6.2 4.4	8.5 7.6 5.9	74-74-
EnPulse DR	EIDR21	Low 2.5 V (A, RV) Nominal 3.5 V (A, RV) High 5.0 V (A, RV)	5.4 4.3 3.0	6.0 5.4 4.2	**
EnPulse 2 DR	E2DR01, E2DR03, E2DR06	Low 2.5 V (A, RV) Nominal 3.5 V (A, RV) High 5.0 V (A, RV)	7.5 6.2 4.4	8.5 7.6 5.9	**
EnPulse 2 DR	E2DR21	Low 2.5 V (A, RV) Nominal 3.5 V (A, RV) High 5.0 V (A, RV)	5.4 4.3 3.0	6.0 5.4 4.2	**
EnPulse 2 DR	E2DR31, E2DR33	Low 2.5 V (A, RV) Nominal 3.5 V (A, RV) High 5.0 V (A, RV)	9.0 7.4 5.2	10.1 9.1 7.1	¥: ¥:
EnPulse 2 SR	E2SR01, E2SR03, E2SR06	Low 2.5 V (A, RV) Nominal 3.5 V (A, RV) High 5.0 V (A, RV)	7.2 6.3 4.8	7.7 7.3 6.1	**
EnPulse 2 VDD	E2VDD01	Low 2.5 V (RV) Nominal 3.5 V (RV) High 5.0 V (RV)	6.1 5.5 4.3	6.5 6.2 5.4	76-36
EnRhythm DR	P1501DR	Low 2.5 V (A, RV) Nominal 3.5 V (A, RV) High 5.0 V (A, RV)	10.6 8.0 5.4	12.3 10.3 7.8	**
InSync	8040	Low 2.5 V (A, RV) Nominal 3.5 V (A, RV) High 5.0 V (A, RV)	11.9 8.9 6.6	13.7 11.4 9.1	**
InSync III	8042	Low 2.5 V (A, RV, LV) Nominal 3.5 V (A, RV, LV) High 5.0 V (A, RV, LV)	8.3 5.9 4.1	9.9 7.8 6.0	***
Kappa 400 DR	KDR401, KDR403	Low 2.5 V (A, RV) Nominal 3.5 V (A, RV) High 5.0 V (A, RV)	7.8 6.4 5.1	8.5 7.5 6.5	vie vie
Kappa 400 SR	KSR401, KSR403	Low 2.5 V (RV) Nominal 3.5 V (RV) High 5.0 V (RV)	7.9 6.9 5.8	8.4 7.7 7.0	36 %
Kappa 600 DR	KDR601, KDR603, KDR606	Low 2.5 V (A, RV) Nominal 3.5 V (A, RV) High 5.0 V (A, RV)	7.7 6.3 4.4	8.6 7.7 6.0	**
Kappa 600 DR	KDR651, KDR653, KDR656	Low 2.5 V (A, RV) Nominal 3.5 V (A, RV) High 5.0 V (A, RV)	7.7 6.3 4.4	8.6 7.7 6.0	**
Kappa 700 D	KD701, KD703, KD706	Low 2.5 V (A, RV) Nominal 3.5 V (A, RV) High 5.0 V (A, RV)	7.7 6.3 4.4	8.6 7.7 6.0	**

**Telemetry indication. Rate and mode change to 65 ppm and VVI respectively (VOO/65 with magnet).

Reference Chart continued

		Estimated Long	evity		_			
Family	Model Number	Amplitude Setting	500 Lead Ω	1000 Lead Ω	Elective Replacement Time Indicators			
Kappa 700 DR	KDR701, KDR703, KDR706	Low 2.5 V (A, RV) Nominal 3.5 V (A, RV) High 5.0 V (A, RV)	7.7 6.3 4.4	8.6 7.7 6.0	**			
Kappa 700 DR	KDR721	Low 2.5 V (A, RV) Nominal 3.5 V (A, RV) High 5.0 V (A, RV)	5.5 4.4 3.0	6.1 5.5 4.2	**			
Kappa 700 SR	KSR701, KSR703, KSR706	Low 2.5 V (RV) Nominal 3.5 V (RV) High 5.0 V (RV)	7.4 6.5 4.9	7.9 7.5 6.2	**			
Kappa 700 VDD	KVDD701	Low 2.5 V (RV) Nominal 3.5 V (RV) High 5.0 V (RV)	6.2 5.6 4.4	6.6 6.3 5.3	**			
Kappa 800 DR	KDR801, KDR803, KDR806	Low 2.5 V (A, RV) Nominal 3.5 V (A, RV) High 5.0 V (A, RV)	7.7 6.3 4.4	8.6 7.7 6.0	**			
Kappa 900 DR	KDR901, KDR903, KDR906	Low 2.5 V (A, RV) Nominal 3.5 V (A, RV) High 5.0 V (A, RV)	7.7 6.3 4.4	8.6 7.7 6.0	**			
Kappa 920 DR	KDR921	Low 2.5 V (A, RV) Nominal 3.5 V (A, RV) High 5.0 V (A, RV)	5.5 4.4 3.0	6.1 5.5 4.3	**			
Kappa 900 SR	KSR901, KSR903, KSR906	Low 2.5 V (RV) Nominal 3.5 V (RV) High 5.0 V (RV)	7.3 6.4 4.9	7.9 7.4 6.1	**			
Kappa 900 VDD	KVDD901	Low 2.5 V (RV) Nominal 3.5 V (RV) High 5.0 V (RV)	6.2 5.6 4.4	6.6 6.3 5.4	**			
Legend	8416, 8417, 8417M, 8418, 8418, 8419	Low 2.5 V (RV) Nominal 3.3 V (RV) High 5.0 V (RV)	15.6 11.3 9.0	17.7 14.5 12.5	If programmed to non-rate responsive mode (e.g. VVI), rate decrease of 10% from programmed rate. Telemetry indication. If programmed to rate responsive mode (e.g. VVIR), rate change to 65 ppm and mode change to VVI. Telemetry indication.			
Legend II	8424, 8426, 8427	Low 2.5 V, 0.36 ms (RV) Nominal 3.3 V, 0.36 ms (RV) High 5.0 V, 0.36 ms (RV)	12.9 9.4 7.8	14.5 11.8 10.5	If programmed to non-rate responsive mode (e.g. VVI), rate decrease of 10% from programmed rate. Telemetry indication. If programmed to rate responsive mode (e.g. VVIR), rate change to 65 ppm and mode change to VVI. Telemetry indication.			
Minix	8340, 8341, 8341M, 8342	Low 2.5 V (RV) Nominal 3.3 V (RV) High 5.0 V (RV)	14.9 10.2 7.9	17.3 13.6 11.3	Telemetry indication. Rate decrease of 10% from programmed rate.			
Minix ST	8330, 8331, 8331M	Low 2.5 V (RV) Nominal 5.0 V (RV) High 8.0 V (RV)	14.9 7.9 4.0	17.3 11.4 7.0	Telemetry indication. Rate decrease of 10% from programmed rate.			
Minuet	7107, 7108	Low 2.5 V, 0.36 ms (A, RV) Nominal 4.0 V, 0.36 ms (A, RV) High 5.0 V, 0.36 ms (A, RV)	12.5 7.7 4.7	15.6 10.9 7.6	**			
Preva D	7068	Low 2.5 V (A, RV) Nominal 3.5 V (A, RV) High 5.0 V (A, RV)	10.0 7.4 5.4	11.4 9.5 7.6	**			
Preva DR	7088, 7089	Low 2.5 V (A, RV) Nominal 3.5 V (A, RV) High 5.0 V (A, RV)	9.9 7.4 5.4	11.3 9.4 7.5	**			
Preva SR	8088, 8089	Low 2.5 V (RV) Nominal 3.5 V (RV) High 5.0 V (RV)	9.8 8.0 6.4	10.7 9.5 8.1	**			
Preva ST DR	7078	Low 2.5 V (A, RV) Nominal 3.5 V (A, RV) High 5.0 V (A, RV)	9.9 7.4 5.4	11.3 9.4 7.5	**			

**Telemetry indication. Rate and mode change to 65 ppm and VVI respectively (VOO/65 with magnet).

Reference Chart continued

		Estimated Lon	gevity		
Family	Model Number	Amplitude Setting	500 Lead Ω	1000 Lead Ω	Elective Replacement Time Indicators
Prevail S	8084, 8085, 8086	Low 2.5 V, 0.42 ms (RV) Nominal 3.3 V, 0.42 ms (RV) High 5.0 V, 0.42 ms (RV)	16.4 10.8 8.6	19.4 14.4 12.4	Telemetry indication. Rate decrease of 10% from programmed rate.
Prodigy D	7864, 7865, 7866	Low 2.5 V (A, RV) Nominal 3.5 V (A, RV) High 5.0 V (A, RV)	10.0 7.4 5.4	11.4 9.5 7.6	**
Prodigy DR	7860, 7861, 7862	Low 2.5 V (A, RV) Nominal 3.5 V (A, RV) High 5.0 V (A, RV)	9.9 7.4 5.4	11.3 9.4 7.5	**
Prodigy S	8164, 8165, 8166	Low 2.5 V (RV) Nominal 3.5 V (RV) High 5.0 V (RV)	10.0 8.1 6.4	10.9 9.6 8.2	7k %
Prodigy SR	8158, 8160, 8161, 8162	Low 2.5 V (RV) Nominal 3.5 V (RV) High 5.0 V (RV)	9.8 8.0 6.4	10.7 9.5 8.1	**
Sigma 100 S	SS103, SS106	Low 2.5 V (RV) Nominal 3.5 V (RV) High 5.0 V (RV)	10.1 8.2 6.4	11.1 9.8 8.4	**
Sigma 200 DR	SDR203	Low 2.5 V (A, RV) Nominal 3.5 V (A, RV) High 5.0 V (A, RV)	10.1 7.5 5.5	11.7 9.6 7.8	**
Sigma 200 SR	SSR203	Low 2.5 V (RV) Nominal 3.5 V (RV) High 5.0 V (RV)	10.1 8.2 6.4	11.1 9.8 8.4	**
Sigma 300 DR	SDR303, SDR306	Low 2.5 V (A, RV) Nominal 3.5 V (A, RV) High 5.0 V (A, RV)	10.1 7.5 5.5	11.7 9.6 7.8	**
Sigma 300 SR	SSR303, SSR306	Low 2.5 V (RV) Nominal 3.5 V (RV) High 5.0 V (RV)	10.1 8.2 6.4	11.1 9.8 8.4	**
Sigma 300 VDD	SVDD303	Low 2.5 V (RV) Nominal 3.5 V (RV) High 5.0 V (RV)	8.9 7.3 5.8	9.7 8.6 7.4	**
Thera D	7944, 7945, 7946	Low 2.5 V (A, RV) Nominal 3.5 V (A, RV) High 5.0 V (A, RV)	7.6 5.5 3.7	8.8 7.1 5.6	**
Thera DR-40	7940, 7941, 7942	Low 2.5 V (A, RV) Nominal 3.5 V (A, RV) High 5.0 V (A, RV)	7.6 5.5 3.7	8.7 7.0 5.6	**
Thera DR-50	7950, 7951, 7952	Low 2.5 V (A, RV) Nominal 3.5 V (A, RV) High 5.0 V (A, RV)	12.2 9.1 6.7	14.0 11.6 9.3	**
Thera S	8944, 8945, 8946	Low 2.5 V (RV) Nominal 3.5 V (RV) High 5.0 V (RV)	7.5 6.1 4.8	8.2 7.2 6.2	**
Thera SR	8940, 8941, 8942	Low 2.5 V (RV) Nominal 3.5 V (RV) High 5.0 V (RV)	7.4 6.0 4.8	8.0 7.1 6.1	**
Thera-i D	7964i, 7965i, 7966i	Low 2.5 V (A, RV) Nominal 3.5 V (A, RV) High 5.0 V (A, RV)	10.0 7.4 5.4	11.4 9.5 7.6	**
Thera-i DR	7960i, 7961i, 7962i	Low 2.5 V (A, RV) Nominal 3.5 V (A, RV) High 5.0 V (A, RV)	9.9 7.4 5.4	11.3 9.4 7.5	**
Thera-i DR	7968i	Low 2.5 V (A, RV) Nominal 3.5 V (A, RV) High 5.0 V (A, RV)	7.2 5.4 3.9	8.3 6.9 5.5	** **

**Telemetry indication. Rate and mode change to 65 ppm and VVI respectively (VOO/65 with magnet).

Reference Chart continued

		Estimated	Longevity		
Family	Model Number	Amplitude Setting	500 Lead Ω	1000 Lead Ω	Elective Replacement Time Indicators
Thera-i S	8964i, 8965i, 8966i	Low 2.5 V (RV) Nominal 3.5 V (RV) High 5.0 V (RV)	10.0 8.1 6.4	10.9 9.6 8.2	**
Thera-i SR	8960i, 8961i, 8962i	Low 2.5 V (RV) Nominal 3.5 V (RV) High 5.0 V (RV)	9.8 8.0 6.4	10.7 9.5 8.1	***
Thera-i VDD	8968i	Low 2.5 V (RV) Nominal 3.5 V (RV) High 5.0 V (RV)	11.5 9.6 7.7	12.4 11.1 9.7	**

**Telemetry indication. Rate and mode change to 65 ppm and VVI respectively (VOO/65 with magnet).

Method for Estimating Lead Performance

Medtronic CRDM has tracked lead survival for over 20 years with its multicenter chronic lead studies.

Leads Performance Analysis

The human body is a hostile environment for an implantable device. Typically, the human body will attack and attempt to isolate or destroy any foreign object, including leads. Additionally, implanted leads are subjected to bending and twisting associated with heart motion, body motion, and patient anatomy, which can cause a lead to wear out.

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 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 lead may be approaching the end of its service life.

Returned Product Analysis Shortfalls

All 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. Additionally, those leads which 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. Thus, lead survival probabilities are more appropriately determined through a clinical surveillance study. Although laboratory analysis results are presented in this report, Medtronic tracks lead survival through its System Longevity Study.

System Longevity Study (SLS)

The SLS is a prospective, multicenter study designed to monitor the performance of market-released cardiac therapy products. The SLS is the unification of the Chronic Lead Study (CLS) for pacing leads and the Tachyarrhythmia Chronic Systems Study (TCSS) for ICD leads, which have been ongoing in several geographies since 1983 and 1991, respectively. More than 35 centers participating as CLS study sites or TCSS study sites, or both, are expected to complete the unification to become SLS study sites in 2007. Through these studies, Medtronic has over 20 years of lead data from over 65,000 leads studied.

Patients are eligible for enrollment in the study if

- 1 They are within 6 months post-implant of a Medtronic market-released lead connected to a market-released IPG, ICD, or CRT device, and the lead is used for a pacing, sensing, or defibrillation application, or
- 2 They participated in a qualifying study of a market-released Medtronic cardiac therapy product; complete implant and follow-up data are available; and the data is appropriately and legally released for use in the study.

Lead Complications

The SLS complication criteria 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, exit block, or concurrent pulse generator failure manifested as a sensing or capture problem.

A lead-related complication is considered to have occurred if at least one of the following clinical observations is reported and at least one of the following clinical actions is made 30 days or more after the implant.

Clinical Observations

- Failure to capture
- Failure to sense/undersensing
- Oversensing
- Abnormal pacing impedance (based on lead model, but normal range is typically 200-3000 ohms)
- Abnormal defibrillation impedance (based on lead model, but normal range is typically 20-200 ohms)
- Insulation breach, observed visually, that has degraded system performance

Method for Estimating Lead Performance continued

The Standard Actuarial Method is used to determine estimates of lead survival.

- Conductor fracture, observed visually or radiographically
- Extracardiac stimulation
- Cardiac perforation
- Lead dislodgement

Clinical Actions

- Lead surgically abandoned/capped
- Lead electrically abandoned/capped
- Lead explanted
- Lead replaced
- Polarity reprogrammed (i.e., bipolar to unipolar; unipolar to bipolar)
- Lead use continued based on medical judgment despite a known clinical performance issue
- Other lead-related surgery performed (e.g., lead mechanical alteration or unsuccessful repositioning)

Note: Successful lead repositioning is not a qualifying action.

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 lead-related complication.

The survival estimates are determined from the analysis of the data collected through the SLS. These data are presented graphically and numerically.

The SLS protocol requires regular follow-up reporting on all leads actively followed in the study. Each study center must inform Medtronic whenever a lead complication has occurred or when a patient is no longer participating in the study. Under the study protocol, each lead is assumed to be normally active unless a lead-related complication is confirmed, the lead is electively abandoned or explanted, or the patient is no longer available for follow-up. The data analyses assume that the patient is still part of the study and there are no lead complications at the time of the report cutoff date unless specifically reported by the center or by correlation with returned product analysis. Implant times are calculated from the implant date to the earlier of the complication date, out-of-service date (for example, patient leaves the study or the lead is no longer being used), or the cutoff date of the report.

If a lead experiences more than one complication, the first is used to calculate survival time; although all complications associated with a lead are reported in PPR tables.

Of the several different statistical methods available for survival analysis, the Standard Actuarial Method, with suspensions assumed distributed across the intervals (Cutler-Ederer Method), is used to determine estimates of lead survival. This method is commonly used by medical researchers and clinicians.

On the following pages, each graph includes a survival curve where events include qualifying lead-related complications. This survival estimate is a good representation of the probability a lead will survive a period of time without a lead-related complication. 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.

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.

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

The data in the tables is rounded to the nearest tenth of one percent. Occasionally, a graph may show 100% survival, but have 1 or more complications. This occurs because even with the complications, the data rounds to 100%.

The survival curves are statistical estimates. As 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 corresponding 95% confidence intervals for the standard errors, and the complementary log-log method is used to produce the confidence bounds.

Method for Estimating Lead Performance continued

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 patients successfully enrolled in the SLS as of the report cutoff date. The number of enrolled implants is listed for each model.

This sample based on SLS enrollments 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.

In general, a model or model family will be included in this report when more than 100 leads have been enrolled and no fewer than 50 leads followed for at least 6 months. Models will remain in the report as long as Medtronic estimates at least 500 leads remain active in the US, based on estimated US implants.

Chronic Lead Data Resolution

Because an accurate estimate of lead survival depends on an accurate estimate of the number of leads in service, it is important not to overstate the number of devices in service. Since the inception of the CLS and TCSS studies, the mechanism of patient follow-up has changed due to evolution in hospital follow-up practices and extrinsic issues such as the impact of the Health Insurance Portability and Accountability Act for US centers. As a result, some patients who were thought to be active participants in the study are actually no longer available for study follow-up. Therefore, Medtronic has initiated an additional data resolution process to verify lead status for all active study patients. This process is ongoing and is expected to conclude in 2007. Combined with our prospective study monitoring practices, this process aligns with our continuous efforts to improve product performance reporting. The survival curves in this edition of the Product Performance Report reflect this additional process.

This data resolution process can change survival estimates when patients in whom leads were thought to be active at the time of the previous analysis have since been determined to no longer be available for follow-up. This has the effect of shortening the curve if leads that were previously presumed to be among those with the longest survival are no longer active at that time. Such a determination also decreases the number of leads remaining in the analysis cohort, which generally lowers the estimated probability of survival.

As the data resolution process proceeds, survival curves can change from one issue of the PPR to the next. For example, as noted in the figure below, the curve for the ventricular lead model 4016 extends to 8 years with an estimated survival probability of 89.7% in the 2004 Second Edition PPR, but extends to 6.5 years with an estimated survival probability of 90.5% in the 2005 First Edition. In contrast, the curve for the ventricular lead model 6962 extends to 20.75 years with an estimated survival probability of 91.3% in the 2004 Second Edition, but extends to 20 years with an estimated survival probability of 90.1% in the 2005 First Edition. The confidence intervals at the ends of the curves are included here for consistency with those in the rest of the report. In general, these confidence intervals are not statistically comparable for assessing whether survival probability has changed between different editions of the PPR.

continued



4016, 6962 Ventricular Pacing Leads

Method for Estimating Lead Performance continued

Medtronic urges all physicians to return explanted product and to notify Medtronic when a product is no longer in use, regardless of reason for explant or removal from use.

Laboratory Analysis Results

Every lead or lead portion returned to Medtronic receives an analysis. Although the laboratory analysis data is not used to generate the survival estimates, the data provides valuable insight into the causes of lead malfunction.

For reporting laboratory analysis results, Medtronic CRDM 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 laboratory results reporting, the lead must have been returned to Medtronic and analyzed.

Lead malfunctions are divided into three categories: Implant Damage, Electrical, and Other. Typical examples of implant damage are stylet perforation, cut or torn insulation, bent or distorted conductors, over-retracted helixes, and conductor fracture due to overtorquing. An electrical malfunction is defined as a hardware malfunction resulting in a break in the insulation or a break in the conductor that could affect the electrical performance of the lead. A break in the insulation is defined as a breach allowing entry of body fluids, or inappropriate current flow between the conductors, or between the conductor and the body. Examples include cuts, tears, depressions, environmental stress cracking (ESC), and metal ion oxidation (MIO). A break in the conductor of a lead is defined as the loss of continuity in the metallic components that could interrupt the current flow or voltage. Examples include fractured conductors and defective crimps.

Leads damaged after explant or damaged due to failure to heed warnings or contraindications in the labeling are not considered device malfunctions.

A lead subject to a safety advisory is not considered to have malfunctioned unless it has been returned to Medtronic CRDM 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 Laboratory Results tables include both.

Estimated Number of Implanted and Active Leads in the United States

In addition to providing the number of leads enrolled in the SLS, this report also provides estimates for the number of leads implanted in the United States and the number remaining active in the United States. The number of US implants is estimated based on the total number of leads sold in the United States. The number of active implants is estimated using the total number of leads sold and projections for normal patient mortality, elective replacement, and lead failure. The number of implanted leads and active leads is adjusted for underreporting of patient mortality, elective replacement, and lead failure.

The numbers of malfunctions listed in the Laboratory Results tables are the actual numbers confirmed in the laboratory. The numbers of complications listed in the complications tables are the actual numbers observed in the SLS.

Some lead models do not have a survival curve presented in this report. These lead models do not have a survival curve because they have insufficient sample size in the System Longevity Study. Laboratory results for these models are included here for reference and comparison.

Left-Heart Leads



2188 Attain

2100 7	Ttam				.105				
	US Market Release	Aug-01	Se	rial Number Prefix	LEB		L	aboratory Analy	ysis
	Estimated US Implants	2,800	Ту	pe and/or Fixation	Transvenous, Co Cardiac Vein, Car	ronary Sinus/ 1ted		Implant Dama	age
	Estimated US Active	1,700	Po	larity	Bipolar		E	lectrical Malfunct	tion her (
	Advisories		Ste	eroid	No			Otr	
Prospec	tive Clinical Study Result	S		Corr	plications in Study	0 Total			
	Number of Leads Enrolle	d in Study	4						
	Cumulative Months of Fo	llow-Up	57						
001 ty (%)								1	
90 abili	Survival estimate not available	e due to insufficier	nt sample size	e					
dor 80									
al P	0 1	2 3		4 5	6	7	8	9 10	
urviv	Years After Implant								
ad S									
% Ľ									
#									
	Effective Sample Size								

Left-Heart Leads continued



4194 Attain

	Ttani			Troduct characterist					
	US Market Release	Aug-04		Serial Number Prefix	LFG		Laboratory	Analysis	
	Estimated US Implants	29,400		Type and/or Fixation	Transvenous, Left Cardiac Vein, Dista	Ventricular al Double Curve	Implan	t Damage	31
	Estimated US Active	27,300		Polarity	Bipolar		Electrical M	alfunction Other	1
	Advisories	None		Steroid	Yes			Other	0
Prospec	tive Clinical Study Result	ts		Com	plications in Study	1 Total			
	Number of Leads Enrolle	d in Study	117		Dislodgement	1			
	Cumulative Months of Fo	llow-Up	611		Ũ				
(%) (%)									
abili 90	Survival estimate not available	e due to insufficien	t samp	le size					
90 80									
a D	0 1	2 3		4 5	6 7	8	9	10	
Irviv	Years After Implant								
d Sı									
% <mark>Fe</mark> a									
#									
	Effective Sample Size								

Left-Heart Leads continued

Lead Survival Summary (95% Confidence Interval)



Source: System Longevity Study Data as of April 1, 2006

Laboratory Analysis Summary

Model Number	Family	US Market Release	Estimated US Implants	Estimated US Active	Implant Damage	Electrical Malfunction	Other
2187	Attain	Aug-01	17,000	11,900	7	0	16
2188	Attain	Aug-01	2,800	1,700	1	1	0
4193	Attain OTW	May-02	89,100	72,500	55	11	59
4194	Attain	Aug-04	29,400	27,300	31	1	6

Source: Returned Product Analysis Data as of April 30, 2006

Reference Chart

Model Number	Family	Туре	Insulation	Conductor Material	Tip Electrode	Connector Type
2187	Attain	Transvenous Cardiac Vein Preformed Body	Polyurethane (55D)	MP35N	Platinized Platinum	IS-1 UNI
2188	Attain	Transvenous Cardiac Vein Preformed Body	Polyurethane (55D)	MP35N	Platinized Platinum	IS-1 BI
4193	Attain OTW	Transvenous Cardiac Vein Preformed Body	Polyurethane (55D)	MP35N	Platinized Platinum	IS-1 UNI
4194	Attain	Transvenous Cardiac Vein Preformed Body	Polyurethane (55D)/ Silicone (4719)	MP35N	Platinum Alloy	IS-1 BI

Defibrillation Leads



6930 Sprint Fidelis

Product Characteristics

US Market Release	Jun-04	Serial Number Prefix	LFK	Laboratory Analysis	
Estimated US Implants	100	Type and/or Fixation	Transvenous, Vent, Defib and Pace/ Sense, Tines	Implant Damage	0
Estimated US Active	100	Polarity	True Bipolar/ One Coil	Electrical Malfunction Other	0
Advisories	None	Steroid	Yes	other	Ŭ

Prospective Clinical Study Results

		Number of L	_eads Enrollec	l in Study	0							
		Cumulative	Months of Fol	low-Up	0							
() ()												
y (%	100											
bilit	001	Survival estimation	ate not available	due to insufficie	nt sample size							
oba	90											
Pr	80								7			
a a	(0	1 1	2 .	5 4	4) (. C	/ 2	5 5) [(0
urviv		Years Afte	r Implant									
adS												
Ĕ	%											
	#											
		Effective Sam	ple Size									

6931 <mark>S</mark>	print Fidelis		Product Characteristics						
	US Market Release	Sep-04	Serial Number Prefix	LFL		Laboratory Analys	sis		
	Estimated US Implants	2,900	Type and/or Fixation	Transvenous, Ver Sense, Screw-in	nt, Defib and Pace/	Implant Dama	ge 6		
	Estimated US Active	2,800	Polarity	True Bipolar/One	Coil	Electrical Malfunctio	on 7 er 0		
	Advisories	None	Steroid	Yes		O th			
Prospec	tive Clinical Study Results	5	Co	mplications in Study	0 Total				
	Number of Leads Enrolled	in Study 36							
	Cumulative Months of Foll	ow-Up 35							
(%) ~ 100									
bilit au	Survival estimate not available	due to insufficient sampl	e size						
oba									
L B		2	4 5	6	 7 &	9 10			
urviva	Years After Implant		4 J	0					
ad									
° ۲									
#	Effective Sample Size								

6932 Sprint

	US Market Release	Aug-96		Serial Number	r Prefix	ТСА			Labora	tory Analysis	;
	Estimated US Implants	15,300		Type and/or Fixation		Transvenous, Sense, Tines	Transvenous, Vent, Defib and Pace/ Sense, Tines			Implant Damage	
	Estimated US Active	7,300		Polarity		True Bipolar/O	One Coil		Electric	al Malfunction	36
	Advisories	None		Steroid		Yes			Other		,
Prospec	tive Clinical Study Res	ults			Comp	lications in Stu	dy 8 Tot	al			
	Number of Leads Enro	lled in Study	411			Muscle Stimulati	ion 1				
	Cumulative Months of	Follow-Up	16,924			Failure to Captu	ure 1				
						Failure to Ser	ise 2				
				Fai	lure to Car	Oversens liovert /Defibrill	ing Z				
\bigcirc				i ai	luie to Cart	Misc: Oth	ner l				
♦> 100											
pilit							-				
oba											
P7 90			2	4			7	0		10	
iva	0 1	Z	3	4	5	6	/	ð	9	10	
urv	Years After Implant										
ad S	l yr	2 yr	3 yr	4 yr	5 yr	6 yr	7 yr				
% Ľ	99.4	98.3	98.3	98.3	97.7	97.7	96.4				
#	290	237	198	157	122	79	28				
	Effective Sample Size								·		

69	33, C	5 <mark>937, 6937</mark> ,	A, 6963	SVC/CS		Product Cha	racterist	tics						
		US Market R	elease	Dec-93		Serial Number	Prefix	TAT, TE	BU, or TAF			_aboratory A	nalysis	
		Estimated U	S Implants	17,100		Type and/or F	ixation	Transve	enous CS o	or SVC Defib				21
		Estimated U	S Active	6,100		Polarity		One De	fib Coil			Implant L Flectrical Malf	unction	31 190
		Advisories		None		Steroid		No					Other	13
Pro	spect	tive Clinical S	Study Result	ts			Corr	nplications	in Study	24 Total				
		Number of L	eads Enrolle	d in Study	965			Ove	ersensing	1	Defib Imp	edance Out o	f Range	2
		Cumulative I	Months of Fo	llow-Up	43,517			Conductor	Fracture	14		Dislod	gement	1
				·		-		Insulatio	on Breach	2		Misc	: Other	3
8						Fail	ure to Ca	ardiovert/D	efibrillate	I				
ility	100	*********	000000000000000000000000			177777 00000000000000000000000000000000		000000000000000000000000000000000000000					6933	91.3%
ab	90								•••		*********	••••••••••••••••	6963	93.5%
r d	80											6937 87.9%	I	
	(0 1		2	3	4	5	6		7	2 2	9 1	0	
viv	,	Veere After	luceus lo cente	2	5		Juarall	0	In div	/ vidual Load I	Vadala	5	0	
Sur		rears Atter	Impiant			Lead Group C	verali		Indi	vidual Lead i	viodels			
ad			l yr	2 yr	3 yr	4 yr	5 yr	6	yr	7 yr	8 yr	9 yr	10 yr	
لە ل	%		99.6	99.2	99.2	98.5	96.8	3 96	5.2	94.8	94.2	93.4	91.9	
	#		683	561	467	371	288	21	3	156	119	80	27	
		Effective Sam	ole Size of Lea	d Group Overa	II									

6936, 6966 Transven	e
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Product Characteristics

US Market Release	Dec-93	Serial Number Prefix	TAV or TAL	Laboratory Analysis
Estimated US Implants	24,600	Type and/or Fixation	Transvenous, Vent, Defib and Pace/Sense, Screw-in	Implant Damage 90
Estimated US Active	6,600	Polarity	True Bipolar/ One Coil	Electrical Malfunction 448 Other 19
Advisories	None	Steroid	No	other 15

Prospective Clinical Study Results Complications in Study 136 Total Number of Leads Enrolled in Study 1,353 Muscle Stimulation Failure to Cardiovert/Defibrillate 1 5 Failure to Capture 1 Pacing Impedance Out of Range 3 Cumulative Months of Follow-Up 61,968 Failure to Sense Defib Impedance Out of Range 3 2 74 Inappropriate VT Oversensing 1 Conductor Fracture 16 Inappropriate VF 13 Misc: Other Insulation Breach 12 5 100



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693	39, C	999 Sub-	-Q Patch			Product Charac	teristics						
		US Market R	elease	Dec-93		Serial Number Pr	efix TBA	or TAP			Laboratory	Analysis	
		Estimated U	S Implants	4,300		Type and/or Fixat	ion Sub	cutaneous De	fib Patch, Si	uture			
		Estimated US	S Active	1,100		Polarity	Def	ib Electrode C	Dnly		Implant Flectrical Ma	Damage	4 32
		Advisories		None		Steroid	No				Electrication	Other	1
Pros	spect	ive Clinical S	itudy Result	5			Complicatio	ons in Study	20 Total				
		Number of L	eads Enrolled	in Study	389		Conduc	ctor Fracture	10				
		Cumulative N	Months of Foll	ow-Up	17,003		Insu	lation Breach	6				
~						Failure	to Cardiover	t/Defibrillate	2				
y (%)								wise. Other	Z				
ility	100		000000000000000000000000000000000000000	******		THE REPORT OF THE REAL PROPERTY OF THE REAL PROPERT	Page Contract		693	9 90.6%			
bab	90						Contraction of the second seco	and the second second	690	9 84 8%			
Pro	80								05.	04.070			
/al F	() 1		2	3	4	5	6	7	8	9	10	
urviv		Years After	Implant		I	_ead Group Ove	rall	•••••• Indiv	vidual Lead	Models			
ad S			l yr	2 yr	3 yr	4 yr	5 yr	6 yr	7 yr	at 90 mo			
Ĕ	%		99.1	98.7	98.2	98.2	94.0	90.6	87.1	85.6			
	#		269	224	188	150	111	78	57	26			
		Effective Samp	ole Size of Lead	Group Overall									

6942 Sprint

	US Market Release	Jul-97		Serial Number Pr	refix	ТСВ			Laborator	y Analysis	
	Estimated US Implant	s 18,100		Type and/or Fixa	tion	Transvenous, Ven Pace/Sense, Tines	t, Defib and s		Impla	nt Damage	31
	Estimated US Active	9,400		Polarity		Integrated Bipolar	/Two Coils		Electrical N	Alfunction Other	35
	Advisories	None		Steroid		Yes				Other	5
Prospec	tive Clinical Study Re	sults			Comp	olications in Study	7 Total				
	Number of Leads Enr	olled in Study	351			Failure to Sense	1				
	Cumulative Months o	f Follow-Up	13,032			Oversensing	3				
						Dislodgement	1				
(%						Misc: Other	1				
) 100 <u>it</u>											
liq 90											
6 80											
	0 1	2	3	4	5	6 7	7	8	9	10	
urviv	Years After Implan	t									
ad Si	1 yr	2 yr	3 yr	4 yr	5 yr	6 yr					
% <mark>E</mark>	99.0	99.0	97.9	97.2	96.3	96.3					
#	239	193	150	124	89	27					
	Effective Sample Size										



6944 Sprint Quattro

		US Market R	elease	Dec-00		Serial Number Pro	efix	TDC			Laboratory A	nalysis	
		Estimated U	S Implants	27,800		Type and/or Fixat	ion	Transvenous, Ven Pace/Sense, Tines	t, Defib and s	-	Implant I	Damage	22
		Estimated US	S Active	20,300		Polarity		True Bipolar/Two	Coils		Electrical Malf	Unction Other	24 8
		Advisories		None		Steroid		Yes				other	0
Pro	spect	tive Clinical S	Study Result	S			Compli	cations in Study	3 Total				
		Number of L	eads Enrolleo.	l in Study	164			Inappropriate VF	1				
		Cumulative N	Nonths of Fol	low-Up	4,883			Misc: Other	2				
y (%)													
bility (%	100												
oba	90												
P	80			2	2	4	5	6	7	0	0		
rviva	(Years After	r Implant	Z	2	4	5	0		D	9	10	
l Su			1.00	2	2		1	I		I		I.	
eac			I yr	∠ yr	5 yr	at 42 mo							
	%		99.2	99.2	98.0	98.0							
	#		116	91	65	30							
		Effective Samp	ole Size										

69 4	945 Sprint						luct Charac	terist	ics						
		US Market R	elease	Sep-97		Seria	l Number Pr	efix	TDA			L	aboratory A	nalysis	
		Estimated U	S Implants	44,000		Туре	and/or Fixat	ion	Tran Pace	svenous, Ven /Sense, Screv	t, Defib and w-in	_	Implant D	amage	195
		Estimated U	S Active	24,700		Polar	ity		Integ	grated Bipolar	/Two Coils	E	ectrical Malfu	Unction Other	78 11
		Advisories		None		Sterc	bid		Yes					0	
Pros	pect	ive Clinical S	Study Result	5				Com	plicatio	ns in Study	19 Total				
		Number of L	eads Enrolled	in Study	1,152				Muscle	Stimulation	1	Pacing Imp	edance Out of	Range	2
(%		Cumulative N	Months of Fol	ow-Up	41,795				Failu (Conduc	re to Sense Oversensing tor Fracture	3 8 2		Inappropr Misc	iate VF : Other	2 1
ity (%)	100														
abili	90														
rob	80														
valF	() 1		2	3	4		5	6	7	۱ ۶ ۶	8	9 10	0	
urvi		Years After	r Implant												
ad S			l yr	2 yr	3 yr		4 yr	5 yr		бyr					
Ē	%		99.6	99.1	99.0		98.2	96.8		95.6					
	#	Effective Sam	869 ole Size	713	559		356	164		33					
Ľ	% #	Effective Samp	99.6 869 ole Size	99.1 713	99.0 559		98.2 356	96.8 164		95.6 33					

6947 Sprint Quattro Secure

		1 N												
		US Market R	elease	Nov-01		Serial Numbe	er Prefix	TDG				Laboratory A	nalysis	
		Estimated U	S Implants	121,700		Type and/or I	Fixation	Transvenous, Pace/Sense, S	Vent Screw	, Defib and /-in	-	Implant D	Damage	209
		Estimated U	S Active	94,800		Polarity		True Bipolar/1	Two C	Coils		Electrical Malf	Unction Other	71 12
		Advisories		None		Steroid		Yes					Other	12
Pros	spect	ive Clinical S	Study Result	5			Con	nplications in Stu	ıdy	10 Total				
		Number of L	eads Enrolled	in Study	1,339			Failure to Sen	ıse	1	Defib Im	pedance Out o	fRange	1
		Cumulative I	Months of Fol	ow-Up	27,598			Oversensi	ing	1		Dislod	gement	2
bility (%)								Conductor Fractu	ure	2		Misc	: Other	2
								insulation brea	acri	I				
	100				•									
bal	90													
Pro	80													
va	() [2	3	4	5	6	7	8	3	9 1	0	
urvi		Years After	r Implant											
ad S			l yr	2 yr	3 yr	at 42 mo								
Ľ	%		99.3	99.3	98.9	98.9								
	#		858	412	123	36								
		Effective Sam	ole Size											

694	18 5	Sprint Fidelis			Product Cha	aracteristi	cs					
		US Market Release	Sep-04		Serial Numbe	er Prefix	LFH			Laborato	ory Analysis	
		Estimated US Implants	5 4,100		Type and/or	Fixation	Transvenous Sense, Tines	s, Vent, Defib ar s	d Pace/	Imp	ant Damage	1
		Estimated US Active	3,900		Polarity		True Bipolar	/ Two Coils		Electrical	Malfunction Other	0
		Advisories	None		Steroid		Yes				0 11101	· ·
Pros	pec	tive Clinical Study Res	sults									
		Number of Leads Enro	olled in Study	0								
		Cumulative Months of	Follow-Up	0								
y (%)	100											
bilit	90	Survival estimate not avail	able due to insuffic	ient sample	e size							
oba	80											
al Pr			2	3	4	5	6	7	8	9	10	
urviva		Years After Implant	-	-		ī	·		-	ī.		
ad S												
Ē	%											
	#											
		Effective Sample Size										

6949 Sprint Fidelis

		US Market Release	Sep-04		Serial Number Pret	fix Ll	FJ			_aboratory Ar	nalysis	
		Estimated US Implants	93,200		Type and/or Fixation	on Ti Se	ransvenous, Ven ense, Screw-in	ıt, Defib and F	Pace/	Implant Da	amage	241
		Estimated US Active	86,500		Polarity	T	rue Bipolar/ Two	Coils		Electrical Malfu	nction Other	55 28
		Advisories	None		Steroid	Y	es				other	20
Pros	spect	tive Clinical Study Res	ults			Complica	tions in Study	3 Total				
		Number of Leads Enro	olled in Study	293		Fai	ure to Capture	1				
		Cumulative Months of	Follow-Up	1,796			Oversensing	2				
(%												
ty (5	100									_		
abili	90											
, ob	80											
al Pi	(0 1	2	3	4 5		6	7	8	9 10)	
urviv		Years After Implant										
ad Si		at 6 mo										
Le	%	99.6										
	#	76										
		Effective Sample Size										

699	96 5	Sub-Q Lead			Product Characte	eristics						
		US Market Release	Jun-01		Serial Number Prefi	ix TCR				Laboratory A	Analysis	
		Estimated US Implants	1,500		Type and/or Fixation	n Subci	itaneous De	tib Coil, Sutur	e .	Implant	Damage	0
		Estimated US Active	1,200		Polarity	One [Defib Coil			Electrical Mal	function	õ
		Advisories	None		Steroid	No					Other	0
Pros	pect	ive Clinical Study Resu	ts		C	Complication	s in Study	0 Total				
		Number of Leads Enrolle	ed in Study	3								
		Cumulative Months of Fo	ollow-Up	36								
:y (%)	100											
bilit	001	Survival estimate not availab	le due to insufficier	nt sample	e size							
oba	80											
P	00					6		7	2	9	10	
viva		Varue After levelant	Ζ 5		4 J	0		/	5	2	10	
Sur		rears After Implant						1		1		
ad												
Г	%											
	#											
		Effective Sample Size										

Lead Survival Summary (95% Confidence Interval)

				ions	e Months Up	Device S	urvival Pr	obability	(%)						
per el	<u>م</u>	larket ase	s lled	plicat udy	ulativ Ilow- udy	Years Af	ter Impla	nt							
Mode	Fami	US M Relea	Lead Enro	Com in Sti	Cum of Fo in Stı	l yr	2 yr	3 yr	4 yr	5 yr	бyr	7 yr	8 yr	9 yr	10 yr
6721, 6921	Epicardial Patch	Feb-93	398	26	17,338	100.0	98.6 +0.9/-2.4	95.9 +1.9/-3.5	94.7 +2.3/-3.9	92.7 +2.9/-4.7	84.7 +5.0/-7.3	82.2 +5.7/-8.0	82.2 +5.7/-8.0 at 90 mo		
6930	Sprint Fidelis	Jun-04	0	_	0	Survival es	timate not a	vailable due	to insuffici	ient sample	size				
6931	Sprint Fidelis	Sep-04	36	0	35	Survival es	timate not a	vailable due	to insuffici	ient sample	size				
6932	Sprint	Aug-96	411	8	16,924	99.4 +0.5/-1.9	98.3 +1.0/-2.3	98.3 +1.0/-2.3	98.3 +1.0/-2.3	97.7 +1.3/-2.9	97.7 +1.3/-2.9	96.4 +2.1/-4.8			
6933, 6937, 6937A, 6963	SVC/CS	Dec-93	965	24	43,517	99.6 +0.3/-0.8	99.2 +0.4/-1.1	99.2 +0.4/-1.1	98.5 +0.7/-1.4	96.8 +1.3/-2.1	96.2 +1.5/-2.4	94.8 +1.9/-3.0	94.2 +2.2/-3.3	93.4 +2.5/-3.8	91.9 +3.3/-5.3
6936, 6966	Transvene	Dec-93	1,353	136	61,968	99.2 +0.4/-0.7	98.5 +0.6/-1.0	97.1 +0.9/-1.4	96.0 +1.2/-1.6	92.7 +1.8/-2.2	87.1 +2.6/-3.2	78.9 +3.6/-4.2	74.4 +4.1/-4.8	67.3 +5.1/-5.8	65.0 +5.5/-6.2 at 114 mo
6939, 6999	Sub-Q Patch	Dec-93	389	20	17,003	99.1 +0.6/-2.0	98.7 +0.8/-2.3	98.2 +1.1/-2.6	98.2 +1.1/-2.6	94.0 +2.7/-4.8	90.6 +3.8/-6.1	87.1 +4.9/-7.5	85.6 +5.4/-8.2 at 90 mo		
6942	Sprint	Jul-97	351	7	13,032	99.0 +0.7/-2.2	99.0 +0.7/-2.2	97.9 +1.2/-3.1	97.2 +1.6/-3.5	96.3 +2.0/-4.2	96.3 +2.0/-4.2				
6943	Sprint	Oct-97	1,302	38	43,051	98.8 +0.5/-0.8	97.9 +0.7/-1.1	96.9 +1.0/-1.4	96.0 +1.2/-1.7	94.4 +1.8/-2.5	93.9 +1.9/-2.8				
6944	Sprint Quattro	Dec-00	164	3	4,883	99.2 +0.7/-4.4	99.2 +0.7/-4.4	98.0 +1.5/-6.3	98.0 +1.5/-6.3 at 42 mo						
6945	Sprint	Sep-97	1,152	19	41,795	99.6 +0.3/-0.7	99.1 +0.5/-0.9	99.0 +0.5/-1.0	98.2 +0.8/-1.3	96.8 +1.3/-2.2	95.6 +1.8/-3.0				
6947	Sprint Quattro Secure	Nov-01	1,339	10	27,598	99.3 +0.4/-0.7	99.3 +0.4/-0.7	98.9 +0.6/-1.4	98.9 +0.6/-1.4 at 42 mo						
6948	Sprint Fidelis	Sep-04	0	_	0	Survival es	timate not a	vailable due	to insuffici	ient sample	size				
6949	Sprint Fidelis	Sep-04	293	3	1,796	99.6 +0.3/-2.7 at 6 mo									
6996	Sub-Q Lead	Jun-01	3	0	36	Survival es	timate not a	vailable due	to insuffici	ent sample	size				

Laboratory Analysis Summary

Model Number	Family	US Market Release	Estimated US Implants	Estimated US Active	Implant Damage	Electrical Malfunction	Other
6721, 6921	Epicardial Patch	Feb-93	8,800	2,200	5	78	0
6930	Sprint Fidelis	Jun-04	100	100	0	0	0
6931	Sprint Fidelis	Sep-04	2,900	2,800	6	7	0
6932	Sprint	Aug-96	15,300	7,300	16	36	7
6933, 6937, 6937A, 6963	SVC/CS	Dec-93	17,100	6,100	31	190	13
6936, 6966	Transvene	Dec-93	24,600	6,600	90	448	19
6939, 6999	Sub-Q Patch	Dec-93	4,300	1,100	4	32	1
6942	Sprint	Jul-97	18,100	9,400	31	35	5
6943	Sprint	Oct-97	21,300	11,200	50	58	8
6944	Sprint Quattro	Dec-00	27,800	20,300	22	24	8
6945	Sprint	Sep-97	44,000	24,700	195	78	11
6947	Sprint Quattro Secure	Nov-01	121,700	94,800	209	71	12
6948	Sprint Fidelis	Sep-04	4,100	3,900	1	0	0
6949	Sprint Fidelis	Sep-04	93,200	86,500	241	55	28
6996	Sub-Q Lead	Jun-01	1,500	1,200	0	0	0

Reference Chart

Madal			Pin Con	figuration	Lood Pody	Inculation	
Number	Family	Туре	Pace/ Sense	High Voltage	Diameter	Lead Body	Fixation, Steroid
6721	Epicardial Patch	Epi Patch	-	DF-1	S, M, L	Silicone, Single Lumen	Suture
6921	Epicardial Patch	Epi Patch	_	6.5 mm	S, M, L	Silicone, Single Lumen	Suture
6930	Sprint Fidelis	Endo RV True Bipolar Sensing	IS-1	DF-1	6.6 Fr	Silicone with Polyurethane Overlay, Multilumen	Passive, Steroid
6931	Sprint Fidelis	Endo RV True Bipolar Sensing	IS-1	DF-1	6.6 Fr	Silicone with Polyurethane Overlay, Multilumen	Active, Steroid
6932	Sprint	Endo RV True Bipolar Sensing	IS-1	DF-1	7.8 Fr	Silicone, Multilumen	Passive, Steroid
6933	SVC/CS	Endo SVC/CS Coil	_	DF-1	7 Fr	Silicone, Single Lumen	Passive
6934S	Transvene	Endo RV True Bipolar Sensing	IS-1	DF-1	12 Fr	Silicone, Coaxial	Passive, Steroid
6936	Transvene	Endo RV True Bipolar Sensing	IS-1	DF-1	10 Fr	Polyurethane, Coaxial	Active
6937	SVC/CS	Endo SVC Coil	-	DF-1	5.5 Fr	Silicone, Single Lumen	Passive
6937A	SVC/CS	Endo SVC Coil	_	DF-1	7.5 Fr	Silicone with Polyurethane Overlay, Single Lumen	Passive
6939	Sub-Q Patch	SQ Patch	_	DF-1	One Size	Silicone, Single Lumen	Suture
6942	Sprint	Endo RV/SVC Integrated Bipolar Sensing	IS-1	2 DF-1	7.8 Fr	Silicone, Multilumen	Passive, Steroid
6943	Sprint	Endo RV True Bipolar Sensing	IS-1	DF-1	7.8 Fr	Silicone, Multilumen	Active, Steroid
6944	Sprint Quattro	Endo RV/SVC True Bipolar Sensing	IS-1	2 DF-1	8.2 Fr	Silicone with Polyurethane Overlay, Multilumen	Passive, Steroid
6945	Sprint	Endo RV/SVC Integrated Bipolar Sensing	IS-1	2 DF-1	7.8 Fr	Silicone, Multilumen	Active, Steroid
6947	Sprint Quattro Secure	Endo RV/SVC True Bipolar Sensing	IS-1	2 DF-1	8.2 Fr	Silicone with Polyurethane Overlay, Multilumen	Active, Steroid
6948	Sprint Fidelis	Endo RV/SVC True Bipolar Sensing	IS-1	2 DF-1	6.6 Fr	Silicone with Polyurethane Overlay, Multilumen	Passive, Steroid
6949	Sprint Fidelis	Endo RV/SVC True Bipolar Sensing	IS-1	2 DF-1	6.6 Fr	Silicone with Polyurethane Overlay, Multilumen	Active, Steroid
6963	SVC/CS	Endo SVC/CS Coil	—	6.5 mm	7 Fr	Silicone, Single Lumen	Passive
6966	Transvene	Endo RV True Bipolar Sensing	3.2 mm L.P.	6.5 mm	10 Fr	Polyurethane, Coaxial	Active
6996	Sub-Q Lead	SQ Coil	-	DF-1	7.5 Fr	Silicone, Single Lumen	Passive
6999	Sub-Q Patch	SQ Patch	_	6.5 mm	One Size	Silicone, Single Lumen	Suture

Pacing Leads

383	0 5	electSecu	ire			Product	t Characterist	ics						
		US Market Re	lease	Aug-05		Serial Nu	umber Prefix	LFF				Laboratory	Analysis	
		Estimated US	Implants	1,700		Type and	d/or Fixation	Transveno	us, V or	A, Screw-in				-
		Estimated US	Active	1,500		Polarity		Bipolar				Implan Flectrical M	t Damage alfunction	5
		Advisories		None		Steroid		Yes				Electricaria	Other	1
Atri Pros	<mark>al Pl</mark> pect	acement tive Clinical St	tudy Result	s			Com	plications in :	Study	1 Total				
	-	Number of Le	eads Enrolled	l in Study	111			Failure to	Sense	1				
		Cumulative M	Ionths of Fol	low-Up	3,223									
(%														
1 t ()	00													
abili	an [
- P	20													
аР	001	1)	3	4	5	6	7	S	2	9	10	
rviv	Ŷ	Years After	Implant	-		7	2	Ģ	<i>'</i> .			2	10	
l Su		.	1	2.45	3.11									
eac	0/		001	2 yr										
	/0 #		99.1 91	99.I	40									
	11-	Effective Samp	le Size	12	0								1	

Ventricular Placement

Pros	pect	ive Clinical S	Study Results	S			Complicatio	ons in Study	0 Total			
		Number of L	eads Enrolled	l in Study	108							
		Cumulative I	Months of Foll	low-Up	3,204							
(%)												
ility	100											
oab	90											
rot	80											
/al F	()	1 2	2	3.	4 5	5 6	5	7 8	3))]	0
urviv		Years Afte	r Implant		-							-
ado			1 yr	2 yr	3 yr							
Ū.	%		100.0	100.0	100.0							
	#		91	72	40							
		Effective Sam	ple Size									

4003,	4003M CapSure	!		Product Charac	teristics						
	US Market Release	Jul-86		Serial Number Pre	efix I	H or LAX			Laborator	y Analysis	
	Estimated US Implants	40,000		Type and/or Fixat	ion	Transvenous, Ve	nt., Tines				
	Estimated US Active	8,100		Polarity	I	Jnipolar			Impla Electrical N	nt Damage Ialfunction	24 54
	Advisories	None		Steroid	,	Yes				Other	2
Ventric Prospec	ular Placement tive Clinical Study Res	ults			Complic	ations in Study	7 Total				
	Number of Leads Enro	lled in Study	711		Extra Car	diac Stimulation	2				
	Cumulative Months of	Follow-Up	42,829		Fa	ilure to Capture Oversensing	4				
001 ty (%)											
90 abili											
08 Prob											
valF	0 1	2	3	4	5	6	7	8	9	10	
urvi	Years After Implant										
ad S	l l yr	2 yr	3 yr	4 yr	5 yr	6 yr	7 yr	8 yr	9 yr	10 yr	
% [e	99.4	99.4	99.4	99.1	99.1	98.8	98.5	98.5	98.5	98.5	
#	559	484	440	378	329	299	246	205	125	42	
	Effective Sample Size										

4004, 4004M CapSure

4004,	004, 4004M CapSure								Charac	teristi	cs										
	US Market F	Release		Feb	-89		Seri	al Nurr	ber Pr	efix	PS o	or LAV	,					Lat	oorato	orv Analys	is
	Estimated L	IS Impl	ants	74,5	500		Тур	e and/	or Fixat	ion	Trai	isvend	ous, Ve	ent., T	ines					.,	
	Estimated L	JS Activ	/e	3,7	700		Pola	arity			Bipo	olar						Elo	Impl ctrical	ant Damag	e 55
	Advisories see page 16 Below Exper	<u>8</u> – 199 ctation	3 Lead : s	Surviva	1		Ster	roid			Yes							Lie	ctricar	Oth	er 19
Ventric Prospect	ular Placen tive Clinical	n ent Study	Result	S						Comp	olicatio	ons in	Study	276	5 Tota	I					
	Number of	Leads E	Inrollec	l in Stu	dy	1,640)				Conduc	tor Fr	acture	e 7	,				Insเ	lation (ES	2) 4
	Cumulative	Month	s of Fol	low-Up	0	71,612	2			Elect	trical A	bando	nmen	t j	1		المعربات	tion (m	Insu	llation (MIC)) 4
										Extra	Failur	e to C	apture	e 13	1		irisula		Medica	il Judgemei	nt 1
										lucence	Fai	ure to	Sense	e 62	2				(find Cl	Oversensir	ig 25
	100									impe	uarice	Juloi	Range	: 52	-		0	nspeci	ned Ci	inical Fallui	e i
100																					
5) × 80																					
pilit 70																					
60 eda																					
<u> </u>																					
viva 0	Voars Afto	2 3	3 4 ant	4 5	6	5 7	γ ε	3	9 1	0 1	1 1	2	13	14	15	16	17	18	19	20	21
Sur		Т	an.	Γ.	1_		1_		1.		lat	I	1	1	1	1	1	I	I	I.	I
ead	1 yr	2 yr	3 yr	4 yr	5 yr	6 yr	/ yr	8 yr	9 yr	10 yr	129 mo										
Ľ %	99.8	99.3	96.3	87.5	77.2	69.4	64.1	58.1	53.2	51.5	50.7										
#	1,195 Effective Sam	1,023 ple Size	826	631	454	3 4	231	161	118	/8	51							1			

4011 Target Tip

Product Characteristics

US Market Release	Nov-82	Serial Number Prefix	IB	Laboratory Analysis	
Estimated US Implants	64,000	Type and/or Fixation	Transvenous, Vent., Tines		~
Estimated US Active	8,200	Polarity	Unipolar	Implant Damage 29 Electrical Malfunction 14	9 41
Advisories	None	Steroid	No	Other	5

Ventricular Placement

Pros	spective Clinical Study Results											Comp	olicatio	ons in S	Study	23 T	otal						
		Num	per of L	_eads E	nrollec	l in Stu	dy	85	1			Extra	Cardia	c Stimu	lation	4							
		Cumu	lative	Months	s of Fol	low-Up)	54,346	5		Incul	ntion (n	Failur	e to Ca	pture	9							
ty (%)	100							1			, insure			Overse	ensing	1							
abili	90																-						
rob	80																<u> </u>						
val F	()	1	2 :	3 4	4.	5 (6 7	7	8 9	9 1	0 1	1 1	2 1	3 1	4 1	5 1	6 1	7	18	19	20	21
urvi		Years	s Afte	r Impla	ant																		
ad S			1 yr	2 yr	3 yr	4 yr	5 yr	6 yr	7 yr	8 yr	9 yr	10 yr	11 yr	12 yr	13 yr	14 yr	15 yr	at 183 mo					
Ĕ	%		99.4	99.2	99.1	98.8	97.6	96.4	96.1	96.1	96.1	95.0	93.6	92.8	91.9	91.9	91.9	91.9					
	#		627	557	476	415	354	300	250	219	189	165	134	109	81	71	55	50					
		Effecti	ve Samj	ple Size																			

4012 Target Tip

US Market Release Jul-83 Serial Number Prefix ΗQ Laboratory Analysis **Estimated US Implants** 96,800 Type and/or Fixation Transvenous, Vent., Tines Implant Damage 50 **Estimated US Active** 6,700 Polarity Bipolar Electrical Malfunction 817 Advisories 1 Steroid No Other 34 see page 169 – 1991 Lead Survival Below Expectations **Ventricular Placement** Prospective Clinical Study Results Complications in Study 315 Total Number of Leads Enrolled in Study 2,543 **Conductor Fracture** 6 Insulation (ESC) 9 Extra Cardiac Stimulation Insulation (MIO) 4 Cumulative Months of Follow-Up 151,264 3 Failure to Capture 126 Insulation (not further defined) 16 Failure to Sense 76 Medical Judgement 1 Impedance Out of Range 26 Oversensing 48 100 90 80 70 60 0 2 3 4 5 6 7 8 9 10 11 12 13 14 15 16 17 18 19 20 21 Years After Implant

Product Characteristics

8	90																						1
S)	20																						
÷.	00																						Τ
oab	70																						t
Prol	60																						╞
vival	()		2 3	3 4	4	5 6	5 7	7	8 9	9 1	0 1	1 1	2 1	3 1	4 1	5 1	5 1	7 18	3 19	9 2	0 2	27
Sur		Years	s Afte	r Impla	ant																		
ad			1 yr	2 yr	3 yr	4 yr	5 yr	6 yr	7 yr	8 yr	9 yr	10 yr	11 yr	12 yr	13 yr	14 yr	15 yr	at 189 mo					
ē	%		99.6	99.2	98.4	95.8	92.5	88.1	83.9	77.8	73.6	69.8	66.9	65.7	65.0	63.0	62.3	62.3					
	#		1,941	1,720	1,534	1,313	1,087	889	699	524	402	308	244	201	145	99	70	52					T
		Effecti	ve Samj	ole Size																			

4023 CapSure SP

Product Characteristics

Aug-91	Serial Number Prefix	LAK	Laboratory Analysis
43,700	Type and/or Fixation	Transvenous, Vent., Tines	
16,900	Polarity	Unipolar	Implant Damage 48 Electrical Malfunction 18
None	Steroid	Yes	Other 6
	Aug-91 43,700 16,900 None	Aug-91Serial Number Prefix43,700Type and/or Fixation16,900PolarityNoneSteroid	Aug-91Serial Number PrefixLAK43,700Type and/or FixationTransvenous, Vent., Tines16,900PolarityUnipolarNoneSteroidYes

Ventri	icular	Place	emen	t

Pro	spect	tive Clinical S	Study Result	s			Complica	ations in Study	15 Tota	ıl			
		Number of L	_eads Enrolled	d in Study	1,158		Fa	ilure to Capture	12				
ty (%)		Cumulative	Months of Fo	llow-Up	54,878	In	sulation (not Lea	further defined) d Dislodgement	1 2				
Pili	100											-	
ba	90												
20	80												
Irvival I	() Years Afte	1 1 r Implant	2	3	4	5	6	7	8	9	10	
ad Su			l yr	2 yr	3 yr	4 yr	5 yr	бyr	7 yr	8 yr	9 yr	10 yr	
Ĕ.	%		99.9	99.3	98.8	98.6	98.6	98.3	97.3	97.3	97.3	97.3	
	#		889	769	682	550	392	264	182	101	81	43	

Effective Sample Size

4024 CapSure SP

Product Characteristics

	LIS Market Release	Oct-91	Serial Number Prefix	١Δ١	
	Estimated US Implants	229,200	Type and/or Fixation	Transvenous, Vent., Tines	Laboratory Analysis
	Estimated US Active	95,300	Polarity	Bipolar	Implant Damage 264 Electrical Malfunction 89
	Advisories	None	Steroid	Yes	Other 34
Ventric	ular Placement				

Prospective Clinical Study Results

(%)

Complications in Study 3 Total

3

Failure to Capture

Number of Leads Enrolled in Study	1,215
Cumulative Months of Follow-Up	50,045

lit)	100											
abi	00											
-e	90											
Å	80											
_								-				-
. <u>≥</u>	()	1 2	2	3 4	4 !	5 (5	7 8	5 5)](C
urv		Years After	r Implant									
ad S			l yr	2 yr	3 yr	4 yr	5 yr	6 yr	7 yr	8 yr	at 105 mo	
Le	%		99.9	99.8	99.8	99.8	99.8	99.8	99.8	99.8	99.8	
	#		872	687	558	420	319	230	164	102	55	
		Effective Sam	ple Size									

4033 CapSure Z

Product Characteristics

US Market Release	n/a	Serial Number Prefix	LCA	Laboratory Analysis	
Estimated US Implants	n/a	Type and/or Fixation	Transvenous, Vent., Tines	· · · ·	
Estimated US Active	n/a	Polarity	Unipolar	Implant Damage Electrical Malfunction	2
Advisories	None	Steroid	Yes	Other	0

Complications in Study

9 Total

Ventricular Placement	
Prospective Clinical Study Results	

Number of Leads Enrolled in Study	541	Conductor Fracture	1	
Cumulative Months of Follow-Up	27,571	Failure to Capture	8	



4057, 4057M Screw-In

057M Screw-In		Product Characteristi	Product Characteristics								
US Market Release	Aug-88	Serial Number Prefix	XQ or LAN	Laboratory Analysis							
Estimated US Implants	12,100	Type and/or Fixation	Type and/or Fixation Transvenous, V or A, Screw-in								
Estimated US Active	3,100	Polarity	Unipolar	Implant Damage Electrical Malfunction	39						
Advisories	None	Steroid	No	Other	4						

Ventricular Placement

Pro	spec	tive Clinical S	Study Result	S			Complic	ations in Study	7 Tota	l						
(%)		Number of L Cumulative	_eads Enrolled Months of Fo	d in Study llow-Up	259 14,990		Con Extra Car Fa	ductor Fracture diac Stimulatior ilure to Capture Failure to Sense	e 2 1 2 2 2 2 1	2 2 2 1						
al Probability	100 90 80		1	2	2			6	7	×		10				
ad Surviv		Years Afte	r Implant 1 yr	2 yr	3 yr	4 4 yr	5 yr	6 yr	7 yr	8 yr	9 yr	at 114 mo				
Ĕ	%		99.4	99.4	99.4	98.6	97.7	96.8	95.7	95.7	94.3	94.3				
	#	Effective Sam	163 ple Size	152	134	122	106	94	81	71	55	51				

4058, 4058M Screw-In								Product Characteristics																
		US Ma	arket R	Release		Jan	-89		Seri	Serial Number Prefix				ZY or LAW				Laboratory Analysis				is		
		Estim	ated U	IS Impla	ants	111,	100		Тур	e and/o	or Fixat	tion	n Transvenous, V or A, Screw-in											
		Estim	ated U	IS Activ	/e	29,6	500		Pola	Polarity			Bipolar				Implant Damage				ge 388			
		Advis	ories			No	one		Steroid			No				LICC	thearty	Othe	er 23					
Atrial Placement Prospective Clinical Study Results										Comp	olicatio	ons in S	Study	30 Total										
	Number of Leads Enrolled in Study 2,364									Extra Cardiac Stimulation 1 Insu								Insulatio	ulation (not further defined) 1					
		Cumulative Months of Follow-Up 12						129,835	;				Failur	e to Ca	apture	15			Le	ead Disl	lodgemei	nt 3		
(%								Imped	Fail dance (ure to Dut of I	Sense Range	6 3				0	versensir	ig I						
i it	00														-			1				1		
abil	90																							
rob	80																							
аР	00	 (2 :		 1. 1	 5 (6 7	 7 \$	 2 (9 1	0 1	 1 1	 21	3 1	 15	16	 17	18	19	20	21		
rviv		Years	s Afte	r Impl	ant	т.		0 /				0		۲ <u>۲</u>	5	- 15	10	17	10	12	20	21		
l Su			1.00	2.00	2.11	1.11	5.44	6.44	7.11	0.11	0.11	10	11	12	12	at		1			1			
eac	0/		1 yr		5 yr	4 yr	J yr		/ yr		9 yr					162 mo								
_	%		99.9	99.6	99.5	99.1	98.7	98.3	98.2	97.5	97.5	96.4	96.4	96.4	96.4	96.4								
	#	Effecti	ve Sam	ple Size	1,33/	1,156	993	1/91	010	430	330	21/	148	104	12	34	1				I			

Ventricular Placement

Pro	spec	tive Cl	inical S	Study	Result	S						Comp	olicatio	ons in S	Study	47 1	otal						
		Num	ber of l	_eads E	nrolled	d in Stu	dy	1,691					Conductor Fracture			2			Impeda	ince Oi	ut of Ra	nge	4
		Cum	ulative	Month	s of Fol	low-Up	0	75,820)			Extra Cardiac Stimulation Failure to Capture				3 22		Insulation (not further defined) Lead Dislodgement					
(%)													Fai	ure to !	Sense	11				0	versens	sing	1
oilit)	100																						
bal	90																						
Pro	80																						
val	(0	1 2	2 3	3 4	4 !	5 6	5 7	7 8	8 9	9 1	0 1	1 1	2 1	3 1	4 1	5 16	17	18	19	20	21	
urvi		Year	s Afte	r Impl	ant																		
ad S			1 yr	2 yr	3 yr	4 yr	5 yr	6 yr	7 yr	8 yr	9 yr	10 yr	11 yr	at 138 mo									
Ū.	%		99.4	99.2	99.1	98.7	97.9	96.7	94.4	93.5	90.9	89.8	89.0	89.0									
	#		1,127	947	793	668	538	426	318	232	174	112	67	47									
		Effecti	ive Sam	ple Size																			

4067 CapSureFix

Product Characteristics

•					
US Market Release	Jan-97	Serial Number Prefix	LCV	Laboratory Analysis	
Estimated US Implants	1,300	Type and/or Fixation	Transvenous, V or A, Screw-in		
Estimated US Active	600	Polarity	Unipolar	Implant Damage Electrical Malfunction	3
Advisories	None	Steroid	Yes	Other	1

Atrial Placement

Prospective Clinical Study Results



4068 CapSureFix

8	CapSureFix		Product Characteristics							
	US Market Release	Mar-96	Serial Number Prefix	LCE	Laboratory Analysis					
	Estimated US Implants	131,700	Type and/or Fixation	Transvenous, V or A, Screw-in						
	Estimated US Active	65,200	Polarity	Bipolar	Implant Damage 406 Electrical Malfunction 68					
	Advisories	None	Steroid	Yes	Other 11					

Atrial Placement Prospective Clinical Study Results

Pros	spec	tive Clinical S	Study Result	S			Complicati	ions in Study	43 Total			
(%)		Number of Leads Enrolled in Study Cumulative Months of Follow-Up			2,388 105,192		Extra Cardiac Stimulation 1 Insi Failure to Capture 19 Lead D Failure to Sense 9 Impedance Out of Range 1 Unspecified C				Insulatio Lead Dislod Over ecified Clinica	n (ESC) 2 gement 8 sensing 2 I Failure 1
Probability	100 90 80											
Survival	() Years Afte	r Implant	2	3	4	5	6	7	8	9 1	0
ead	0/		l yr	2 yr	3 yr	4 yr	5 yr	6 yr	/ yr	ð yr	9 yr	at 111 mo
	%		99.1	98.8	98.2	98.0	97.5	97.3	97.3	96.9	96.9	96.9
	#	Effective Com	1,900	1,625	1,298	953	637	454	299	182	68	49
		Effective Sam	pie Size									

Ventricular Placement

Pros	pec	tive Clinical S	Study Result	:s			Complicati	ons in Study	27 Total			
		Number of I	_eads Enrolle	d in Study	1,787		Condu	ctor Fracture	1			
(%)		Cumulative Months of Follow-Up		72,497		Extra Cardiac Stimulation 1 Failure to Capture 19 Failure to Sense 2 Impedance Out of Range 3 Lead Dislodgement 1						
ility	100											
bab	90									-		
2	80											
al F	(0	1	2	3	4	5	6	7	8	9	10
urviv		Years Afte	r Implant									
ad S			l yr	2 yr	3 yr	4 yr	5 yr	6 yr	7 yr	8 yr	at 102 mo	
Ē	%		99.4	99.0	98.9	98.5	98.1	97.6	96.4	95.4	95.4	
	#		1,424	1,212	913	637	393	225	122	79	46	
		Effective Sam	ple Size									

4073 CapSure Sense

Product Characteristics

US Market Release	Jun-02	Serial Number Prefix	BBF	Laboratory Analysis
Estimated US Implants	400	Type and/or Fixation	Transvenous, Vent., Tines	
Estimated US Active	300	Polarity	Unipolar	Implant Damage 0 Electrical Malfunction 0
Advisories	None	Steroid	Yes	Other 0

Atrial Placement

Prospective Clinical Study Results



Ventricular Placement

Pros	spect	ive Clinical S	Study Result	S			Complicatio	ons in Study	0 Total			
		Number of L	eads Enrolled	l in Study	101							
		Cumulative I	Months of Fol	low-Up	1,926							
ability (%)	100 90											
Prob	80											
va	()	1 2	2	3	4	5 (5 7	7 8	3) 1	0
urvi		Years Afte	r Implant									
ad S			l yr	at 15 mo								
Ĕ	%		100.0	100.0								
	#		93	63								
		Effective Sam	ple Size									

4074 CapSure Sense

Product Characteristics

•					
US Market Release	Jun-02	Serial Number Prefix	BBD	Laboratory Analysis	
Estimated US Implants	35,000	Type and/or Fixation	Transvenous, Vent., Tines		
Estimated US Active	29,700	Polarity	Bipolar	Implant Damage Electrical Malfunction	10
Advisories	None	Steroid	Yes	Other	1

Ventricular Placement

Prospective Clinical Study Results

Complications in Study 0 Total Number of Leads Enrolled in Study 382 Cumulative Months of Follow-Up 7,648 Lead Survival Probability (%) 100 90 80 0 2 3 4 5 6 7 8 9 10 Years After Implant 2 yr 1 yr at 33 mo % 100.0 100.0 100.0 # 230 140 32 Effective Sample Size

4076 CapSureFix Novus

Product Characteristics

1					
US Market Release	Feb-04	Serial Number Prefix	BBL	Laboratory Analysis	
Estimated US Implants	60,600	Type and/or Fixation	Transvenous, V or A, Screw-in		
Estimated US Active	55,400	Polarity	Bipolar	Implant Damage Flectrical Malfunction	27
Advisories	None	Steroid	Yes	Other	4

Atrial Placement

Prospective Clinical Study Results



Ventricular Placement

Pros	spect	ive Clinical S	Study Result	S			Complicatio	ons in Study	1 Total			
		Number of L	eads Enrolled	l in Study	169		Failur	e to Capture	1			
	Cumulative Months of Follow-Up 2,414			2,414								
(%	રે											
ity (100											
abil	90											
Prob	80											
/al F	()	1 2	2	3 4	4	5 6	5 7	7	8	9 1	0
urvi		Years After	r Implant									
ad S			l yr	at 18 mo								
Ŭ.	%		100.0	100.0								
	#		97	49								
		Effective Sample Size										

4081 Target Tip **Product Characteristics US Market Release** Jul-89 Serial Number Prefix LAC Laboratory Analysis **Estimated US Implants** 4,100 Type and/or Fixation Transvenous, Vent., Tines Implant Damage 4 **Estimated US Active** 1,000 Polarity Unipolar Electrical Malfunction 5 Advisories No None Steroid Other 0 **Ventricular Placement** Prospective Clinical Study Results **Complications in Study** 3 Total Number of Leads Enrolled in Study 260 **Conductor Fracture** 1 Failure to Sense 2 Cumulative Months of Follow-Up 9,587 Lead Survival Probability (%) 100 90 80 0 2 3 4 5 6 7 8 9 10 Years After Implant 5 yr 1 yr 2 yr 3 yr 4 yr at 63 mo % 100.0 100.0 98.2 100.0 100.0 100.0 191 156 116 81 55 45 # Effective Sample Size

4092 CapSure SP Novus

Product Characteristics

US Market Release	Sep-98	Serial Number Prefix	LEP	Laboratory Analysis
Estimated US Implants	126,200	Type and/or Fixation	Transvenous, Vent., Tines	
Estimated US Active	88,200	Polarity	Bipolar	Implant Damage Electrical Malfunction
Advisories	None	Steroid	Yes	Other

Ventricular Placement

Pro	spect	tive Clinical S	Study Result	S			Complicatio	ons in Study	15 Total			
		Number of Leads Enrolled in Study 1,139					Conduc	tor Fracture	2			
y (%)	10.0	Cumulative Months of Follow-Up		low-Up	37,061	Extra Cardiac Stimulation Failure to Capture Impedance Out of Range Lead Dislodgement		1 8 1 3				
ii.	001											
bab	90											
Pro	80											
a	(0	1 :	2	3 .	4 .	56	5 7	7	8	9 1	10
urviv		Years Afte	r Implant									
ad Si			1 yr	2 yr	3 yr	4 yr	5 yr					
Ĕ	%		99.0	98.9	98.9	98.4	97.1					
	#		935	716	475	240	42					
		Effective Sam	nle Size									

4503, 4503M CapSure

<u> </u>	l					
	US Market Release	Jul-86	Serial Number Prefix	MQ,LAY	Laboratory Analysis	
	Estimated US Implants	9,000	Type and/or Fixation	Transvenous, Atrial-J, Tines		_
	Estimated US Active	1,600	Polarity	Unipolar	Implant Damage Electrical Malfunction	2
	Advisories	None	Steroid	Yes	Other	0

Atrial Placement

Prospective Clinical Study Results

Number of Leads Enrolled in Study	59
Cumulative Months of Follow-Up	3,059

Lead Survival Probability (%)													
	100 90	Survival estima	ate not available	due to insufficie	nt sample size								
	80												
	(0	1	2 3	3	4 !	5 (6 7	7 8	3)]	0	
	Years After Implant												
			l yr										
	%												
	#		55										
		Effective Sam	ple Size										

4504, 4504M CapSure

Product Characteristics

US Market Release	Mar-90	Serial Number Prefix	QM or LBA	Laborato	
Estimated US Implants	16,600	Type and/or Fixation	Transvenous, Atrial-J, Tines		
Estimated US Active	1,900	Polarity	Bipolar	Impla Electrical N	
Advisories	1	Steroid	Yes	Electrical	
see page 166 – 1996 Lead Below Expectations	Survival				

Atrial Placement

Atr Pros	ial Plant	lacement tive Clinical S	Study Results	S			Complicatio	ons in Study	48 Total														
		Number of Leads Enrolled in Study Cumulative Months of Follow-Up			368 19,857		Electrical Abandonment Extra Cardiac Stimulation Failure to Capture Failure to Sense		3Impedance Out of Rar1Insulation (MI14Lead Dislodgement16Oversens		Range (MIO) gement gensing	ge 9 O) 1 nt 1 ng 3											
	100																						
8	90																						
ility	80																						
bab	70																						
Prof	60																						
urvival F	() Years Afte	i 1 2 r Implant	2	3. 4	4 5	5 6	5 7	7	8	9 1	0											
ad Sı			1 yr	2 yr	3 yr	4 yr	5 yr	6 yr	7 yr	8 yr	at 105 mo												
Ū.	%		100.0	100.0	99.1	98.2	90.3	82.2	73.0	69.9	66.1												
	#		294	260	220	186	145	109	74	59	47												
		Effective Sam	ple Size																				
4512	2 1	arge	t Tip)					Pro	duct (Charac	teristi	cs										
-------	------	---------	----------	--------------	---------	----------	------	--------	------	---------	----------	---------	----------------	-------------------	-----------------	--------------	-----	--------	----------	-------------------	---------------------	------------------	----
		US M	arket F	Release		Jul	-83		Ser	al Nurr	ber Pr	efix	PF						La	aborat	tory Ai	nalysis	
		Estim	nated U	IS Impl	ants	11,6	500		Тур	e and/	or Fixat	ion	Trar	isveno	us, Atri	ial-J, Tin	es			line	nlant D	000000	4
		Estim	nated U	IS Activ	/e	1,2	200		Pola	arity			Bipo	olar					El	ectrica	al Malfi	inction	82
		Advis	ories			No	one		Ste	roid			No									Other	8
Atria	al P	lacem	nent	C . 1								6	1			 							
Pros	pec	tive Cl	inical	Study	Result	S						Comp	olicatio	ons in S	study	35 Io	tal						
		Numl	ber of I	Leads E	nrolled	d in Stu	dy	600)			Elect	rical A	bandor	iment	1				Ins	ulation	(MIO)	4
		Cumi	ulative	Month	s of Fo	llow-Up	C	40,029	Ð				Failur Fail	e to Ca ure to	ipture Sense	6 14		Insula	ation (i	not fur Lead I	rther de Dislodø	efined) ement	2
												Imped	dance (Out of I	Range	3					Overs	ensing	2
_													Ins	ulation	(ESC)	2							
8 1	00																						
llity	90																						
pabi	80																						
Lo Lo	70																						
val I	()	1	2	3	4	5 (6	7	8	9 1	0 1	1 1	2 1	3 1	4 15	16	17	18	3 19	9 20	0 21	
urvi		Year	s Afte	r Impl	ant																		
d Si			1 yr	2 yr	3 yr	4 yr	5 yr	6 yr	7 yr	8 yr	9 yr	10 yr	11 yr	12 yr	13 yr	at 159 mo							
Lea	%		99.6	99.6	99.1	98.0	96.8	95.7	94.8	91.1	89.4	87.2	84.5	84.5	83.4	83.4							
	#		459	414	374	330	275	227	194	159	130	106	89	72	54	50							
		Effecti	ive Sam	ple Size																			

4523 CapSure SP

Product Characteristics

US Market Release	Aug-91	Serial Number Prefix	ZE	Laboratory Analysis	
Estimated US Implants	12,000	Type and/or Fixation	Transvenous, Atrial-J, Tines		-
Estimated US Active	4,000	Polarity	Unipolar	Implant Damage Electrical Malfunction	5 2
Advisories	None	Steroid	Yes	Other	1

Atrial Placement

Pro	spec	tive Clinical S	Study Result	S			Complicatio	ons in Study	3 Total			
		Number of L	_eads Enrolled	d in Study	121		Failur	re to Capture	1			
		Cumulative	Months of Fo	llow-Up	6,713		Lead D	oislodgement	2			
y (%)	100											
bilit	100											
ba	90											
Pro	80											
val	(0	1	2	3	4	5	6 7		8	9	0
Survi		Years Afte	r Implant									
adia			1 yr	2 yr	3 yr	4 yr	at 57 mo					
Ğ	%		98.1	98.1	98.1	98.1	98.1					
	#		95	81	71	58	50					
		Effective Sam	ple Size									

4524 CapSure SP

CapSure SP		Product Characteristi	CS		
US Market Release	Oct-91	Serial Number Prefix	LAR	Laboratory Analysis	
Estimated US Implants	106,900	Type and/or Fixation	Transvenous, Atrial-J, Tines		
Estimated US Active	43,200	Polarity	Bipolar	Implant Damage Electrical Malfunction	47
Advisories	None	Steroid	Yes	Other	8

Atrial Placement

Prospective Clinical Study Results

Pros	pect	tive Clinical S	Study Result	5			Complicatio	ns in Study	6 Total			
		Number of L Cumulative	eads Enrolled. Months of Fol	l in Study low-Up	911 37,375		Failur Fail Lead D	e to Capture ure to Sense islodgement	3 2 1			
obability (%)	100 90 80											
val Pr	()	1	2	 3 4	4 5	5 6	5 7	7	 8 9	 9 1	0
Survi		Years Afte	r Implant									
ad			1 yr	2 yr	3 yr	4 yr	5 yr	бyr	7 yr	8 yr	at 99 mo	
Ľ	%		99.6	99.3	99.3	99.0	99.0	99.0	99.0	99.0	99.0	
	#	Effective Sam	681 ple Size	536	427	326	240	170	116	65	50	

4533 CapSure Z

Product Characteristics

US Market Release	n/a	Serial Number Prefix	LCB	Laboratory Analysis	
Estimated US Implants	n/a	Type and/or Fixation	Transvenous, Atrial-J, Tines	International Development	0
Estimated US Active	n/a	Polarity	Unipolar	Electrical Malfunction	0
Advisories	None	Steroid	Yes	Other	0

Atrial Placement

_

Pro	spect	tive Clinical S	Study Result	S			Complica	ations in Study	4 Total				
		Number of L	eads Enrolleo	l in Study	206		Fa	ilure to Capture	1				
y (%)	10.0	Cumulative I	Months of Fol	low-Up	10,903		Lea	Failure to Sense d Dislodgement Oversensing	1 1 1				
bilit	90												
oba	80									_			
al Pr	() C	1	2	3	4	5	6	7	8	9	10	
urviv		Years Afte	r Implant										
adS			1 yr	2 yr	3 yr	4 yr	5 yr	6 yr	at 81 mo				
Ĕ	%		100.0	99.4	98.8	98.0	98.0	98.0	98.0				
	#		177	159	133	102	78	62	48				
		Effective Sam	ple Size										

45	57, 4	557N	Sc	rew-	In				Pro	duct (Charac	terist	ics											
		US Ma	arket R	elease		Aug	-88		Seri	al Nurr	ıber Pr	efix	VQ	or LA	M					Labo	orator	y Anal	ysis	
		Estim	ated U	S Impla	ants	22,5	500		Тур	e and/	or Fixat	tion	Tra	nsven	ous, At	rial, S	Screw-i	n				<u> </u>	, 	
		Estim	ated U	S Activ	/e	6,0	000		Pola	arity			Uni	polar						Floct	Implai trical M	nt Dam Ialfunct	age	53 14
		Advis	ories			No	one		Ster	roid			No							LIECI		Ot	her	4
Atr Pros	ial Pl spect	acem tive Cli	<mark>ent</mark> nical S	Study I	Result	S						Com	plicati	ons in	ı Study	1	6 Total							
		Numb	er of L	eads E	nrollec	l in Stu	dy	294	ļ.			Extra	Cardia	ic Stin	nulatior	1	1							
y (%)		Cumu	lative I	Months	s of Fol	low-Up	þ	18,182	2				Failu Fai	re to (ilure to Over:	Capture o Sense sensing	2	3 1 1							
bilit	100											+1												
oba	90																							
al Pro	80								7 0				1	12	12	14	15	16	17	10	10	20		
urviva	(Years	Afte	r Impla	ant 4	4 :) (0 /	/ 0	5	9 1	0	11	IZ	13	14	15	16	17	١ŏ	19	20	ZI	
ad Sı			l yr	2 yr	3 yr	4 yr	5 yr	6 yr	7 yr	8 yr	9 yr	10 yr	at 123 mo											
Ŭ.	%		99.1	99.1	99.1	97.8	97.8	97.8	96.9	96.9	96.9	96.9	96.9											
	#		199	181	165	144	127	113	100	85	64	56	52											
		Effectiv	ve Samp	ole Size																				

4558M Screw-In

Product Characteristics

US Market Release	Nov-94	Serial Number Prefix	LDC	Laboratory Analysis	
Estimated US Implants	21,000	Type and/or Fixation	Transvenous, Atrial-J, Screw-in		
Estimated US Active	7,100	Polarity	Bipolar	Implant Damage Electrical Malfunction	111 10
Advisories	None	Steroid	No	Other	1

Atrial Placement

Pro	spec	tive Clinical S	Study Result	s			Complicati	ons in Study	10 Total			
(%)		Number of L Cumulative	₋eads Enrollec Months of Fol	l in Study low-Up	539 21,930	Insul	Electrical A Failu Fa Impedance ation (not fur	Abandonment re to Capture ilure to Sense Out of Range ther defined)	1 3 3 2 1			
oility	100											
bab	90									-		
Pro	80											
d Survival	() Years Afte	1 r Implant 1 vr	2 2 vr	3 3 yr	4 4 vr	5	6 6 yr	7 7 yr	8 8 vr	9	10
Lea	%		99.3	99.3	99.3	99.3	99.3	97.7	96.6	96.6	95.1	
	#		357	300	251	193	142	99	87	64	50	
		Effective Sam	ple Size									

4568 CapSureFix

Product Characteristics	Product	Charact	teristics
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US Market Release	Jan-97	Serial Number Prefix	LDD	Laboratory Analysis
Estimated US Implants	72,700	Type and/or Fixation	Transvenous, Atrial-J, Screw-in	
Estimated US Active	43,600	Polarity	Bipolar	Implant Damage 196 Electrical Malfunction 5
Advisories	None	Steroid	Yes	Other 4

Atrial Placement

Prospective Clinical Study Results



457	74 🤇	CapSure Sense		Product Characteristics								
		US Market Release	Jun-02	Serial Number Prefix	BBE	Laboratory Analysis						
		Estimated US Implants	22,500	Type and/or Fixation	Transvenous, Atrial-J, Tines							
		Estimated US Active	18,900	Polarity	Bipolar	Implant Damage 5						
		Advisories	None	Steroid	Yes	Other 0						
Atr Pro:	ial P spect	acement tive Clinical Study Result	5	Com	plications in Study 0 Total							
		Number of Leads Enrolled	l in Study 3									
		Cumulative Months of Fol	low-Up 73									
(%)	100											
ty (90	Survival estimate not available	due to insufficient samp	ole size								
abili	80											
rob	(2 3	4 5	6 7 8	9 10						
/al P		Years After Implant										
urviv												
ad Si	%											
Le	#											
		Effective Sample Size										

4592 CapSure SP Novus

apSure SP Novus		Product Characteristi	cs		
US Market Release	Oct-98	Serial Number Prefix	LER	Laboratory Analysis	
Estimated US Implants	64,900	Type and/or Fixation	Transvenous, Atrial-J, Tines		
Estimated US Active	44,300	Polarity	Bipolar	Implant Damage Electrical Malfunction	11
Advisories	None	Steroid	Yes	Other	0

Atrial Placement

Pros	spect	tive Clinical S	Study Result	S			Complicatio	ns in Study	5 Total			
(%)		Number of L Cumulative I	eads Enrollec. Months of Fol	l in Study low-Up	239 8,037	Failure to Capture Failure to Sense Lead Dislodgement						
Probability	100 90 80											
Survival	() Years Afte	r Implant	2	3 4	4 5		o /	2	5 5	€ I	0
ead			1 yr	2 yr	3 yr	4 yr	at 57 mo					
Ľ	%		97.8	97.8	97.8	97.8	96.4					
	#	Effective Sam	159 ple Size	141	119	78	48					I

5023, 5023M CapSure SP

Product Characteristics

US Market Release	Nov-88	Serial Number Prefix	SX or LAS	Laboratory Analysis	
Estimated US Implants	10,600 3 300	Type and/or Fixation	Transvenous, Vent., Tines	Implant Damage	15
Advisories	None	Steroid	Yes	Electrical Malfunction Other	7 0

Ventric Prospect	ular Placen tive Clinical S	1ent Study Result	S			Complicatio	ons in Study
ity (%)	Number of I Cumulative	_eads Enrollec Months of Fol	l in Study low-Up	1,348 56,295		Extra Cardiao Failur Impedance C	t Stimulation e to Capture Dut of Range
id 90							
Pro							
vival (0	1	2	3	4 !	5 (5
l Sur	Years Afte	r Implant					
Leac		1 yr	2 yr	3 yr	4 yr	5 yr	6 yr
	1	1	1	1	1	1	1



5 Total

8

9

7

		l yr	2 yr	3 yr	4 yr	5 yr	6 yr	7 yr	at 93 mo	
%		99.7	99.7	99.7	99.6	99.6	99.6	98.9	98.9	
#		1,081	888	708	511	360	218	105	45	
	Effective Sam	ple Size								

10

5024, 5024M CapSure SP	5024,	5024M	CapSure	SP
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5024M CapSure SI	Р	Product Characterist	Product Characteristics							
US Market Release	Mar-90	Serial Number Prefix	SY or LAT	Laboratory Analysis						
Estimated US Implants	211,400	Type and/or Fixation	Transvenous, Vent., Tines							
Estimated US Active	82,500	Polarity	Bipolar	Implant Damage 723 Electrical Malfunction 103						
Advisories	None	Steroid	Yes	Other 29						

Ventricular Placement

Pros	spect	ive Cli	inical S	Study F	Results	5						Comp	licatio	ns in S	Study	43 To	otal						
(%		Numt Cumu	Number of Leads Enrolled in Study 8,142 Cumulative Months of Follow-Up 411,193							Conductor Fracture Extra Cardiac Stimulation Failure to Capture Failure to Sense Impedance Out of Range					lation pture Sense Range	3 1 25 2 1		Insula	ation (no L	Insu ot furth ead Di. (lation 1er def slodge Dverse	(ESC) ined) ment nsing	1 4 5 1
ity (100																						
pabil	80																						
Prof	() 1	 2	1 2 3	 4	 5	6	5 7	8) 10	1 D 1	1 1 12	1 2 13	∣ 3 1₄	4 15	16	17	18	19	20	21	
vival		Years	s Afte	r Impla	ant																		
Surv			1 yr	2 yr	3 yr	4 yr	5 yr	6 yr	7 yr	8 yr	9 yr	10 yr	11 yr	12 yr	13 yr	at 162 mo							
ead	%		99.7	99.6	99.5	99.5	99.4	99.4	99.3	99.1	98.9	98.7	98.7	98.7	98.7	98.7							
<u> </u>	#	Effectiv	6,148 ve Samp	5,301 ble Size	4,499	3,746	3,055	2,323	1,736	1,189	775	482	280	172	93	61							

5026 CapSure

Product Characteristics

US Market Release	Feb-88	Serial Number Prefix	RZ	Laboratory Analysis
Estimated US Implants	7,800	Type and/or Fixation	Transvenous, Vent., Tines	
Estimated US Active	1,500	Polarity	Bipolar	Implant Damage 60 Electrical Malfunction 7
Advisories	None	Steroid	Yes	Other

Ver Pro	n tric i spect	ular Placem	ient Study Results	5			Complicatio	ns in Study	4 Total			
		Number of L	eads Enrolled	in Study	168		Electrical Al	pandonment	1			
		Cumulative I	Months of Foll	ow-Up	9,439		Failur	e to Capture	3			
(%)												
ility	100											
oab	90											
rot	80											
alF	() .	1 2	2	3 4	4 5	5 6	5 7	,	8	9	0
urviv		Years After	r Implant									
s pg			l yr	2 yr	3 yr	4 yr	5 yr	6 yr	at 75 mo			
Le	%		100.0	99.2	98.2	97.1	97.1	95.7	95.7			
	#		128	111	96	83	70	56	52			
		Effective Sam	ple Size									

5033	CapSure Z				Product Characteristics								
	US Market Rele	ease	Feb-96		Serial Number Pre	fix LDK	(Laboratory Analysis				
	Estimated US In	mplants	2,500		Type and/or Fixati	on Trai	nsvenous, Ve	nt., Tines			(
	Estimated US A	Active	1,200		Polarity	Unip	oolar			1t Damage Ialfunction	6		
	Advisories		None		Steroid	Yes					Other	3	
Ventric Prospec	cular Placemer ctive Clinical Stu	nt ıdy Result	S			Complicatio	ons in Study	19 Total	al				
	Number of Lea	ds Enrolled	l in Study	1,899		Cardia							
	Cumulative Mo	nths of Fol	low-Up	85,907		Conduc	tor Fracture	4					
						Impedance (e to Capture Out of Range	2					
					Insula	tion (not furt	her defined)	1					
8						Lead D	vislodgement	2					
<u>100</u>													
lida 90				_									
4 80)												
a D	0 1		2	3	4 5)	6	7	8	9	10		
urviv	Years After Ir	mplant											
ad S	1	yr	2 yr	3 yr	4 yr	5 yr	бyr	7 yr	8 yr	9 yr	at 114 m	0	
۴ % آ	99	9.7	99.6	99.2	99.0	98.8	98.4	98.2	97.5	97.5	97.5		
#	1,4	417	1,148	950	801	638	484	354	226	75	41		
	Effective Sample	Size											

5034 CapSure Z

Product Characteristics

US Market Release	Feb-96	Serial Number Prefix	LDF	Laboratory Analysis	
Estimated US Implants	58,700	Type and/or Fixation	Transvenous, Vent., Tines		0.5
Estimated US Active	26,000	Polarity	Bipolar	Implant Damage Electrical Malfunction	85 29
Advisories	None	Steroid	Yes	Other	11

Ventricu	lar Placement
Destation	Charles I could be de

Prosp	ect	tive Clinical S	Study Result	S			Complications in Study			l		
		Number of L	eads Enrolled	d in Study	1,596		Con	ductor Fracture	e 1			
(%) / /	20	Cumulative Months of Follow-Up			75,632		Fa Lea	ilure to Capture Failure to Sense d Dislodgemen	9 9 1 2 2			
	90										•	
2 8	80											
3	()	1	2	3	4	5	6	7	8	9	10
5		Years Afte	r Implant									
ר כ			1 yr	2 yr	3 yr	4 yr	5 yr	6 yr	7 yr	8 yr	at 105 mo	
	%		99.8	99.6	99.3	99.2	99.0	99.0	98.8	98.3	98.3	
	#		1,279	1,064	896	728	576	392	251	151	65	
		Effective Sam	ple Size									

5054 CapSure Z Novus

Product Characteristics

•					
US Market Release	Jun-98	Serial Number Prefix	LEH	Laboratory Analysis	
Estimated US Implants	76,700	Type and/or Fixation	Transvenous, Vent., Tines		
Estimated US Active	50,300	Polarity	Bipolar	Implant Damage Electrical Malfunction	40 11
Advisories	None	Steroid	Yes	Other	6

Ventricular Placement

Pros	spect	tive Clinical S	Study Result	s		Complications in Study			11 Total			
y (%)	10.0	Number of Leads Enrolled in Study Cumulative Months of Follow-Up			1,381 45,382	1,381 Failure to Capture 15,382 Failure to Sense Impedance Out of Range Lead Dislodgement			7 1 1 2			
val Probability	90 80			2	3	4		6 7	, ,	2 0)))	0
d Surviv		Years After Implant			3 vr	4 vr	5 vr	at 69 mo				
Lea	%		99.5	99.4	99.4	99.3	99.3	96.8				
	#	Effective Sam	1,063 ple Size	817	613	358	138	48				

5068 CapSureFix

Product Characteristics

US Market Release	Jan-97	Serial Number Prefix	LDJ	Laboratory Analysis
Estimated US Implants	108,000	Type and/or Fixation	Transvenous, V or A, Screw-in	
Estimated US Active	59,100	Polarity	Bipolar	Implant Damage 455 Electrical Malfunction 52
Advisories	None	Steroid	Yes	Other 15

Atrial Placement

Pro	spect	tive Clinical S	Study Results	5			Complicatio	ons in Study	4 Total			
(%)		Number of Leads Enrolled in Study Cumulative Months of Follow-Up			963 Failure to Captur 31,081 Impedance Out of Rang Oversensin			re to Capture Out of Range Oversensing	2 1 1			
/al Probability (100 90 80			2	3	4	5	6 7	7	8	9 1	0
l Surviv		Years Afte	r Implant	2	2		E	C	7	0		I
-eac	%		l yr	2 yr	3 yr	4 yr	5 yr	6 yr	7 yr	8 yr	at 99 mo	
_	#		560	434	334	265	216	158	114	69	46	
		Effective Sam	ple Size									

Ventricular Placement

Pro	spec	tive Clinical S	Study Result	S			Complica	ations in Study	5 Total				
		Number of I	_eads Enrolled	d in Study	1,359		Con	iductor Fracture	1				
у (%)	10.0	Cumulative	Months of Fo	llow-Up	32,031		Lea	id Dislodgement	1				
bilit	001												
oba	90												
Pr	80		1	2	2	4	5	E	7	0	0	10	
Surviva		Years Afte	r Implant	2	5	4	5	0		0	5	10	
ad			1 yr	2 yr	3 yr	4 yr	5 yr	6 yr	at 78 mo				
Ē	%		99.8	99.6	99.4	99.4	99.4	99.4	99.4				
	#		696	493	357	244	152	74	50				
		Effective Sam	ple Size										

5072 SureFix

Product Characteristics

US Market Release	Jun-98	Serial Number Prefix	LEM	Laboratory Analysis	
Estimated US Implants Estimated US Active	8,500 5,300	Type and/or Fixation Polarity	Transvenous, V or A, Screw-in Bipolar	Implant Damage	21
Advisories	None	Steroid	Yes	Electrical Malfunction Other	2

Atrial Placement

Pros	pect	ive Clinical S	Study Result	s			Complicatio	ons in Study	2 Total			
		Number of L Cumulative I	eads Enrolled. Months of Fol	l in Study low-Up	451 19,235		Cardiao Failur	e Perforation e to Capture	1 1			
ty (%)	100										1	
pili	90							•				
oba	80											
al Pr	()	1	2	3	4 .	5 (6 7	7	8	 9 1	0
urviv		Years Afte	r Implant									
adia			1 yr	2 yr	3 yr	4 yr	5 yr	6 yr	at 81 mo			
Ĕ	%		99.7	99.7	99.4	99.4	99.4	99.4	99.4			
	#		342	291	250	212	137	77	49			
		Effective Sam	ple Size									

5076	C	CapSureFi	x Novus			Product Characteristics								
		US Market R	elease	Aug-00		Serial Numb	er Prefix	PJN	I			Labora	tory Analysis	
		Estimated US	S Implants	653,200		Type and/or	^r Fixation	Tra	nsvenous, V or	A, Screw-ir	ı			
		Estimated US	S Active	513,400		Polarity		Bip	olar			Im Electric	plant Damage al Malfunction	599 105
		Advisories		None		Steroid		Yes	5				Other	45
Atrial Prospe	Pl ect	acement ive Clinical S	itudy Result	:S			Corr	nplicati	ons in Study	8 Total				
		Number of L	eads Enrolle	d in Study	1,920			Cardia	c Perforation	1				
(%		Cumulative Months of Follow-Up			45,796		Extra	Condu a Cardia Failu edance Lead I	ctor Fracture of Stimulation re to Capture Out of Range Dislodgement	1 2 1 1 2				
€ → 100	0 +			,		1								
ili 9	0						•							
8 sp	0													
a	C) 1		2	3	4	5		6 7		8	9	10	
Jr viv		Years After	Implant											
d St			lvr	2 yr	3 vr	4 vr	at 57	' mo						
و لو	6		99.6	99.6	99.3	99.3	99.3	3						
i	#		1,251	774	533	225	50							
Ventri Prospe	icu ect	Jlar Placem ive Clinical S	ent itudy Result	:S			Corr	nplicati	ons in Study	6 Total				
		Number of L	eads Enrolle	d in Study	1,425			Cardia	c Perforation	1				
(%)		Cumulative N	Aonths of Fo	llow-Up	33,991		Impo	Failu Fai edance	re to Capture ilure to Sense Out of Range	2 1 2				
01 ility	0													
90 bab	0													
Bro	0			1		4	F			,			10	
viva	C) Vears After	Implant	Z	3	4	5		6 /		ŏ	9	10	
d Sur			lve	2.11	2.11	1.11								
-eac				∠ yr		4 yr	at 54	+ mo						
_ /	0 #		960	592	371	145	55	,						
1	it .	Effective Samp	ole Size		1	113	55		1		I	1	1	

5092 CapSure SP Novus

CapSure SP Novus		Product Characteristi	Product Characteristics						
US Market Release	Jun-98	Serial Number Prefix	LET	Laboratory Analysis					
Estimated US Implants 95,200		Type and/or Fixation	Transvenous, Vent., Tines						
Estimated US Active	66,000	Polarity	Bipolar	Implant Damage Flectrical Malfunction	42				
Advisories	None	Steroid	Yes	Other	10				

Ventricular Placement

Prospective Clinical Study Results

Pros	spect	ive Clinical S	Study Result	S			Complicatio	ons in Study	8 Total				
(%)		Number of L Cumulative	Number of Leads Enrolled in Study Cumulative Months of Follow-Up				c Stimulation e to Capture islodgement	1 2 2 5					
bability	100 90												
val Pro	80 ()	1 2	2	3	4	5 (5 7	7	8 9) 1	0	
Surviv		Years Afte	r Implant	1	I	I	1	I	1	I	1	I	
ad			1 yr	2 yr	3 yr	4 yr	5 yr	6 yr	at 75 mo				
Ľ	%		99.5	99.3	99.1	98.8	98.8	98.8	98.8				
	#	Effective Sam	780 ple Size	585	411	248	121	56	46				

5524, 5524M CapSure SP

Product Characteristics

US Market Release	Mar-90	Serial Number Prefix	XV or LAV	Laboratory Analysis
Estimated US Implants	63,800	Type and/or Fixation	Transvenous, Atrial-J, Tines	
Estimated US Active	26,400	Polarity	Bipolar	Implant Damage 66 Electrical Malfunction 18
Advisories	None	Steroid	Yes	Other 7

Arial Placement

_

Pros	spect	tive Cl	inical S	Study I	Result	S						Comp	olicatio	ons in S	Study	34 To	otal						
y (%)	100	Numb	Number of Leads Enrolled in Study Cumulative Months of Follow-Up 22				4,432 223,597	Conductor Fracture 1 Insu Failure to Capture 20 Failure to Sense 4 Impedance Out of Range 1							Insulat	nsulation (not further defined) Lead Dislodgement Oversensing				1 4 3			
balit	90																						
Pro	80																						
ad Surviva	(Year:	2 s Afte 1 yr	2 : r Impla 2 yr	3 / ant 3 yr	4 ! 4 yr	5 (5 yr	6 yr	/ §	8 yr	9 yr	0 1 10 yr	1 11 yr	2 1: 12 yr	3]4	4 15) 16	17	18	19	20	21	
Ğ	%		99.8	99.7	99.5	99.3	99.2	99.2	99.1	98.5	98.0	97.3	96.6	96.6									
	#	Effecti	3,396 ve Sam	2,941 ple Size	2,517	2,106	1,694	1,262	912	611	369	217	109	53									

5534 CapSure Z

Product Characteristics

•					
US Market Release	Feb-96	Serial Number Prefix	LDG	Laboratory Analysis	
Estimated US Implants	27,700	Type and/or Fixation	Transvenous, Atrial-J, Tines		
Estimated US Active	10,700	Polarity	Bipolar	Implant Damage Electrical Malfunction	29
Advisories	None	Steroid	Yes	Other	5

Atrial Placement

ctive Clinical Study Results D.

Complications in Study 6 Total

Number of Leads Enrolled in Study 260 Failure to Capture 5 Cumulative Months of Follow-Up 12,005 Impedance Out of Range 1 100 100 100 100 100 100 90 90 100 100 100 100 90 100 100 100 100 100 90 100 100 100 100 100 90 100 100 100 100 100 90 100 100 100 100 100 90 100 100 100 100 100 90 100 100 100 100 100 90 100 100 100 100 100 90 100 100 100 100 100 90 100 100 100 100 100 90 100 100 100 100 100	Pros	pect	ive Clinical s	study Result	S			Complicatio	6 Iotal				
Cumulative Months of Follow-Up 12,005 Impedance Out of Range 1 100 100 100 100 100 100 90 100 100 100 100 100 90 100 100 100 100 100 90 100 100 100 100 100 90 100 100 100 100 100 90 100 100 100 100 100 90 100 100 100 100 100 90 100 100 100 100 100 90 100 100 100 100 100 90 100 100 100 100 100 91 100 100 100 100 100 92 100 100 100 100 100			Number of L	eads Enrolled	d in Study	260		Failur	e to Capture	5			
100 1			Cumulative I	Months of Fol	low-Up	12,005		Impedance C	Out of Range	1			
100 100 90 90 80 0 1 2 3 4 5 6 7 8 Years After Implant 1 1	(%)												
90 90 90 80 1 0 1 2 3 4 5 6 7 80 1 1 2 3 4 5 6 7 8 Years After Implant 1 1yr 2 3 yr 4 4yr 5 5 98.3 97.8 97.1 97.1 97.1 97.1 97.1 97.1	lity (100											
80 0 1 2 3 4 5 6 7 8 Years After Implant % 98.3 97.8 97.1 97.1 97.1 97.1 # 203 178 152 105 69 52 48	abi	90											
Image: Non-State Image: Non-State Image: Non-State Vears After Implant 1 yr 2 yr 3 yr 4 yr 5 yr 6 yr at 78 mo % 98.3 97.8 97.1 97.1 97.1 97.1 # 203 178 152 105 69 52 48	rot	80											
Years After Implant 1 yr 2 yr 3 yr 4 yr 5 yr 6 yr at 78 mo % 98.3 97.8 97.1 97.1 97.1 97.1 # 203 178 152 105 69 52 48	a F	C) .	1 :	2 :	3 4	4	5 6	5	7	8	9	10
So per series 1 yr 2 yr 3 yr 4 yr 5 yr 6 yr at 78 mo % 98.3 97.8 97.1 97.1 97.1 97.1 # 203 178 152 105 69 52 48	urviv		Years Afte	r Implant									
9 98.3 97.8 97.1 97.1 97.1 # 203 178 153 105 69 52 48	s ba			1 yr	2 yr	3 yr	4 yr	5 yr	бyr	at 78 mo			
# 203 178 152 105 69 52 48	ĕ	%		98.3	97.8	97.8	97.1	97.1	97.1	97.1			
# 203 170 132 103 05 32 48		#		203	178	152	105	69	52	48			

5554 CapSure Z Novus

Effective Sample Size

Product Characteristics

US Market Release	Jun-98	Serial Number Prefix	LEJ	Laboratory Analysis	
Estimated US Implants	48,900	Type and/or Fixation	Transvenous, Atrial-J, Tines		7
Estimated US Active	32,200	Polarity	Bipolar	Implant Damage Electrical Malfunction	/ 6
Advisories	None	Steroid	Yes	Other	4

Atrial Placement

Pros	spect	tive Clinical S	Study Result	S			Complication	ons in Study	4 Total				
y (%)	10.0	Number of I Cumulative	∟eads Enrollec Months of Fol	l in Study low-Up	316 13,204		Failu Impedance Lead D	re to Capture Out of Range Dislodgement Oversensing	e 1 e 1 t 1 g 1				
abilit	90							1					
Prob	80												
urvival I	() Years Afte	i r Implant	2	3	4	5	6	7	8	9	10	
ad Si			1 yr	2 yr	3 yr	4 yr	5 yr	6 yr	at 75 mo				
Ē	%		100.0	99.1	98.6	98.0	98.0	98.0	98.0				
	#		249	205	174	120	92	68	57				
		Effective Sam	DIE SIZE										

5568 CapSureFix

CapSureFix		Product Characteristi	Product Characteristics							
US Market Release	Jan-97	Serial Number Prefix	LDN	Laboratory Analysis						
Estimated US Implants	50,000	Type and/or Fixation	Transvenous, A or V, Screw-in							
Estimated US Active	35,300	Polarity	Bipolar	Implant Damage 209 Electrical Malfunction 7						
Advisories	None	Steroid	Yes	Other 7						

Atrial Placement

Prospective Clinical Study Results



5592 CapSure SP Novus

Product Characteristics

US Market Release	Jun-98	Serial Number Prefix	LEU	Laboratory Analysis	
Estimated US Implants	22,000	Type and/or Fixation	Transvenous, Atrial-J, Tines	Implant Damage	5
Estimated US Active	16,500	Polarity	Bipolar	Electrical Malfunction	2
Advisories	None	Steroid	Yes	Other	0

Atrial Placement

Pro	spect	tive Clinical S	Study Result	S			Complica	tions in Study	4 Total			
		Number of L	eads Enrollec	d in Study	632		Fa	ilure to Capture	2			
		Cumulative	Months of Fol	low-Up	19,036		Lea	d Dislodgement	2			
:y (%)	10.0											1
bilit	001											
ba	90											
Pro	80									1		
val	(0	1 :	2	3	4	5	6 7	ξ	8	9 1	0
urvi		Years Afte	r Implant									
ad S			1 yr	2 yr	3 yr	4 yr	5 yr					
Ū.	%		99.6	99.2	99.2	99.2	99.2					
	#		473	357	229	124	49					
		Effective Sam	ple Size									

5594 CapSure SP Novus

Product Characteristics

•					
US Market Release	Jun-01	Serial Number Prefix	LFD	Laboratory Analysis	
Estimated US Implants	7,400	Type and/or Fixation	Transvenous, Atrial-J, Tines		•
Estimated US Active	6,000	Polarity	Bipolar	Implant Damage Flectrical Malfunction	0
Advisories	None	Steroid	Yes	Other	0

Atrial Placement

 Prospective Clinical Study Results
 Complications in Study
 0 Total

 Number of Leads Enrolled in Study
 10

 Cumulative Months of Follow-Up
 382

y (9	100														
bilit	90	Survival estima	ate not available	due to insufficie	nt sample size										
oba	80														
P	80			2 3	2	 /	5	 	 7 S) 1()			
urviva		0 1 2 3 4 5 6 7 8 9 10 Years After Implant													
ad															
Ĕ	%														
	#														
		Effective Sam	ple Size												

6907R

Product Characteristics

	iviay 75	Serial Number Prefix	FY	Laboratory Analysis	
Estimated US Implants	18,500	Type and/or Fixation	Transvenous, Vent., Flange		
Estimated US Active	1,300	Polarity	Unipolar	Implant Damage	3 25
Advisories	None	Steroid	No	Other	1

Ver Pros	n tric	ular Placerr tive Clinical S	ient Study Results	5			Complicatio	ns in Study	6 Total			
		Number of L	eads Enrolled	in Study	121		Failur	e to Capture	4			
lity (%)	10.0	Cumulative I	Months of Foll	low-Up	9,478			Oversensing	2			
abi	100											
Prot	90							-				
vival F	08))	1 2	2	3 2	1 5	5 6	5 7	7	8	9 1	0
Sur		Years Afte	r Implant									
-ead			l yr	2 yr	3 yr	4 yr	5 yr	бyr	at 81 mo			
	%		99.0	99.0	99.0	99.0	97.5	97.5	97.5			
	#		99	88	79	69	62	54	51			
		Effective Sam	ple Size									

6940 CapSureFix **Product Characteristics US Market Release** Oct-98 Serial Number Prefix ТСР Laboratory Analysis Transvenous, A or V, Screw-in Type and/or Fixation **Estimated US Implants** 26,600 Implant Damage 114 **Estimated US Active** 14,600 Polarity Bipolar Electrical Malfunction 18 Advisories Steroid None Yes Other 3 **Atrial Placement** Prospective Clinical Study Results Complications in Study 6 Total Number of Leads Enrolled in Study 616 Failure to Sense 2 2 Oversensing Cumulative Months of Follow-Up 22,623 Conductor Fracture 1 Dislodgement 1 Lead Survival Probability (%) 100 90 80 0 2 3 4 5 6 7 8 9 10 Years After Implant 1 yr 2 yr 3 yr 4 yr 5 yr at 66 mo 98.3 % 98.3 98.3 99.8 99.8 98.6 450 366 292 123 45 # 224 Effective Sample Size

6957 Spectraflex

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US Market Release	Jul-79	Serial Number Prefix	VC	Laboratory Analysis	
Estimated US Implants	29,100	Type and/or Fixation	Transvenous, V or A, Screw-in		
Estimated US Active	3,300	Polarity	Unipolar	Implant Damage Flectrical Malfunction	85 39
Advisories	None	Steroid	No	Other	25

Atrial Placement

Pros	pect	tive Clinical S	Study Result	S			Complicatio	ons in Study	10 Total			
		Number of L	eads Enrolled	l in Study	677		Extra Cardia	c Stimulation	1			
y (%)	100	Cumulative I	Months of Fol	low-Up	24,622		Failur Fail	re to Capture lure to Sense Oversensing	3 5 1			
abilit	90											
roba	80											
/al P	() .	1	2	3	4 !	5	6 7	7	8	9 1	10
urvi		Years After	r Implant									
ad S			l yr	2 yr	3 yr	4 yr	5 yr	6 yr	7 yr	8 yr	at 99 mo	
Le	%	100.0 99.7	99.7	99.4	98.5	98.0	98.0	95.7	93.6	93.6		
	#		403	316	253	208	173	140	98	62	53	
		Effective Sam	ple Size									

Ventricular Placement

Pro	spec	tive Cl	inical S	Study	Result	S						Comp	olicatio	ons in S	Study	42 T	otal							
(%)		Numb	ber of l ulative	_eads E Month	Enrolled s of Fol	d in Stu llow-Up	dy D	1,854 95,874	1 1			Extra	Conduo Cardia Failur Fai	ctor Fra c Stimu re to Ca lure to	acture Ilation apture Sense	13 2 19 2		Insı	Imp Ilation	edanc (not f	e Out urthe Ov	: of Ran r defin rersens	nge ed) sing	1 1 4
urvival Probability	90 80	0 Year	1 2 s Afte	2 :	3 ant	4	5	6	7	8	9 1	0 1	1 1	2 1	3].	4 1	5 1	6 1	7 1	8	19	20	21	
ad Sı			1 yr	2 yr	3 yr	4 yr	5 yr	6 yr	7 yr	8 yr	9 yr	10 yr	11 yr	12 yr	13 yr	14 yr	15 yr	16 yr	17 yr					
Ļ	%		99.6	99.2	98.8	98.2	97.7	97.0	96.8	96.1	96.1	95.3	94.9	94.3	94.3	93.6	93.6	92.5	91.1					
	#	Effecti	ve Sam	ple Size	000	1711	024	סוכן	431	34Z	280	228	192	129	132	108	00	00	120			I	I	

6957| Spectraflex

Spectraflex		Product Characteristi	cs	
US Market Release	Sep-80	Serial Number Prefix	GG	Laboratory Analysis
Estimated US Implants	30,000	Type and/or Fixation	Transvenous, Atrial-J, Screw-in	
Estimated US Active	2,700	Polarity	Unipolar	Implant Damage Electrical Malfunction
Advisories	None	Steroid	No	Other

Atrial Placement

Prospective Clinical Study Results



6961 Tenax

Product Characteristics

US Market Release	Jan-78	Serial Number Prefix	ТВ	Laboratory Analysis
Estimated US Implants	44,700	Type and/or Fixation	Transvenous, Vent., Tines	
Estimated US Active	2,000	Polarity	Unipolar	Implant Damage 103 Electrical Malfunction 27
Advisories	None	Steroid	No	Other 0

Ventricular Placement

Pros	spect	ive Cl	inical S	Study I	Result	S						Comp	olicatio	ons in S	Study	21 T	Total						
		Numb	per of L	_eads E	nrolled	l in Stu	dy	627	,			Extra	Cardia	: Stimu	lation	4							
		Cumu	lative	Months	s of Fol	low-Up)	43,069)				Failur	e to Ca	pture	7							
											Insula	ation (n	Faii ot furt	ure to : her de	Sense fined)	6 2							
%													Lead D	islodge	ement	1							
ity (Overse	ensing	1							
abili	100																						
rob	90															-			_				
al P	80															-			_				
rviv	()	1	2	3	4 !	5 (6 7	7 8	8	9 1	0 1	į 1	2 1	3 1	4 1	5	6	17	18	19	20	21
l Su		Years	s Afte	r Impla	ant																		
-eac			1 yr	2 yr	3 yr	4 yr	5 yr	6 yr	7 yr	8 yr	9 yr	10 yr	11 yr	12 yr	13 yr	14 yr	at 171 mo						
_	%		99.4	99.2	99.2	97.8	97.1	96.4	96.4	95.4	94.9	93.7	93.7	92.9	92.9	90.2	90.2						
	#		468	408	366	323	271	236	210	187	160	141	121	95	77	58	50						
		Effecti	ve Samı	ole Size																			

74 28 30

6962	Tenax			Product Charac	teristics			
	US Market Release	Jan-78		Serial Number Pr	efix UB	_	Laboratory Analysis	
	Estimated US Implants	70,600		Type and/or Fixat	tion Transvenous, Ven	t., Tines	Implant Damage	170
	Estimated US Active	3,700		Polarity	Bipolar		Electrical Malfunction	84
	Advisories	None		Steroid	No		Other	0
Ventri Prospe	cular Placement ctive Clinical Study Result:	5	1 492		Complications in Study	51 Total		
	Number of Leads Enrolled	in Study	1,483		Conductor Fracture	5	Impedance Out of Range	2
	Cumulative Months of Foll	ow-Up	110,904		Failure to Capture	27	Lead Dislodgement	1
(%) /					Failure to Sense	10	Oversensing	3
00 obal								
<u>م</u> ۵۵								
iva	0 1 2 3 4	4 5 6	5 7	8 9 1	0 11 12 13 14	15 16	i 17 18 19 20 21	

NV		Years	s Afte	r Impl	ant																		
ad S			1 yr	2 yr	3 yr	4 yr	5 yr	6 yr	7 yr	8 yr	9 yr	10 yr	11 yr	12 yr	13 yr	14 yr	15 yr	16 yr	17 yr	18 yr	19 yr	20 yr	at 243 mo
Le	%		99.0	98.2	97.4	96.9	96.7	96.5	96.4	96.2	96.0	95.3	95.0	94.7	93.5	93.5	93.5	92.2	91.4	90.5	90.5	90.5	90.5
	#		1,085	971	860	761	680	615	563	493	424	368	310	264	217	181	150	125	106	86	68	54	48
		Effecti	ve Samı	ple Size																			

Lead Survival Summary (95% Confidence Interval)

					ons	e Months Jp	Device	Survival F	Probabilit	v (%)										
Jer Jer	~	ber	arket se	ed	olicati dy	Iative Iow-L dy	Years A	fter Imp	ant											
Mode Numb	Famil	Cham	US M Relea	Leads Enroll	Comp in Stu	Cumu of Fol in Stu	l yr	2 yr	3 yr	4 yr	5 yr	6 yr	7 yr	8 yr	10 yr	12 yr	14 yr	16 yr	18 yr	20 yr
3830	SelectSecure	Atrial	Aug-05	111	1	3,223	99.1 +0.8/-5.5	99.1 +0.8/-5.5	99.1 +0.8/-5.5											
3830	SelectSecure	Vent	Aug-05	108	0	3,204	100.0	100.0	100.0											
4003, 4003M	CapSure	Vent	Jul-86	711	7	42,829	99.4 +0.4/-1.1	99.4 +0.4/-1.1	99.4 +0.4/-1.1	99.1 +0.5/-1.2	99.1 +0.5/-1.2	98.8 +0.7/-1.5	98.5 +0.8/-1.7	98.5 +0.8/-1.7	98.5 +0.8/-1.7					
4004,	CapSure	Vent	Feb-89	1,640	276	71,612	99.8 +0.1/-0.5	99.3 +0.4/-0.7	96.3	87.5	77.2	69.4 +3.4/-3.7	64.1	58.1	51.5	50.7				
4004M	Advisory: <u>see pa</u> Expectations	ige 168 -	1993 Lead	Survival I	Below		10.17 0.3			12.07 2.3	12.07 5.2	13.4/ 5./	13.07 4.0	14.2/ 4.4	14.07 5.0	at 129 mo				
4011	Target Tip	Vent	Nov-82	851	23	54,346	99.4 +0.4/-1.0	99.2 +0.5/-1.0	99.1 +0.5/-1.2	98.8 +0.7/-1.2	97.6 +1.1/-1.8	96.4 +1.4/-2.3	96.1 +1.5/-2.5	96.1 +1.5/-2.5	95.0 +1.9/-3.0	92.8 +2.7/-4.2	91.9 +3.1/-4.7	91.9 +3.1/-4.7 at 183 mo		
4012	Target Tip	Vent	Jul-83	2,543	315	151,264	99.6 +0.2/-0.3	99.2 +0.3/-0.6	98.4 +0.5/-0.7	95.8 +0.9/-1.1	92.5	88.1	83.9	77.8	69.8 +3.1/-3.3	65.7	63.0 +3.9/-4.3	62.3		
	Advisory: <u>see pa</u> Expectations	ige 169 -	1991 Lead S	Survival E	Below								,					at 189 mo		
4023	CapSure SP	Vent	Aug-91	1,158	15	54,878	99.9 +0.1/-0.6	99.3 +0.4/-0.9	98.8 +0.5/-1.1	98.6 +0.6/-1.1	98.6 +0.6/-1.1	98.3 +0.8/-1.5	97.3 +1.3/-2.2	97.3 +1.3/-2.2	97.3 +1.3/-2.2					
4024	CapSure SP	Vent	Oct-91	1,215	3	50,045	99.9 +0.1/-0.5	99.8 +0.1/-0.7	99.8 +0.1/-0.7	99.8 +0.1/-0.7	99.8 +0.1/-0.7	99.8 +0.1/-0.7	99.8 +0.1/-0.7	99.8 +0.1/-0.7 at 105 mo						
4033	CapSure Z	Vent	Mar-94	541	9	27,571	99.3 +0.5/-1.3	99.3 +0.5/-1.3	99.1 +0.5/-1.6	98.7 +0.8/-1.8	98.3 +1.0/-2.1	97.8 +1.2/-2.7	97.8 +1.2/-2.7	96.9 +1.7/-3.7	95.7 +2.3/-4.8 at 102 mo					
4057, 4057M	Screw-In	Vent	Aug-88	259	7	14,990	99.4 +0.5/-3.5	99.4 +0.5/-3.5	99.4 +0.5/-3.5	98.6 +1.1/-4.0	97.7 +1.6/-4.7	96.8 +2.0/-5.3	95.7 +2.5/-5.9	95.7 +2.5/-5.9	94.3 +3.2/-6.8 at 114 mo					
4058, 4058M	Screw-In	Atrial	Jan-89	2,364	30	129,835	99.9 +0.1/-0.4	99.6 +0.2/-0.4	99.5 +0.2/-0.5	99.1 +0.4/-0.6	98.7 +0.5/-0.7	98.3 +0.6/-0.9	98.2 +0.6/-1.0	97.5 +0.8/-1.3	96.4 +1.3/-1.9	96.4 +1.3/-1.9	96.4 +1.3/-1.9 at 162 mo			
4058, 4058M	Screw-In	Vent	Jan-89	1,691	47	75,820	99.4 +0.3/-0.7	99.2 +0.4/-0.7	99.1 +0.4/-0.8	98.7 +0.5/-1.0	97.9 +0.8/-1.2	96.7 +1.1/-1.6	94.4 +1.7/-2.3	93.5 +1.9/-2.7	89.8 +2.8/-3.9	89.0 +3.1/-4.3 at 138 mo				
4067	CapSureFix	Atrial	Jan-97	108	3	5,503	97.1 +2.0/-5.9	97.1 +2.0/-5.9	97.1 +2.0/-5.9	97.1 +2.0/-5.9 at 39 mo										
4068	CapSureFix	Atrial	Mar-96	2,388	43	105,192	99.1 +0.3/-0.5	98.8 +0.4/-0.6	98.2 +0.5/-0.7	98.0 +0.5/-0.8	97.5 +0.7/-1.0	97.3 +0.7-1.1	97.3 +0.7/-1.1	96.9 +1.0/-1.3	96.9 +1.0/-1.3 at 111 mo					
4068	CapSureFix	Vent	Mar-96	1,787	27	72,497	99.4 +0.3/-0.5	99.0 +0.4/-0.7	98.9 +0.4/-0.7	98.5 +0.6/-0.9	98.1 +0.7/-1.1	97.6 +0.9/-1.5	96.4 +1.5/-2.7	95.4 +2.1/-3.6	95.4 +2.1/-3.6 at 102 mo					

continued

Leads

Pacing Leads continued

Lead Survival Summary continued

					ions	e Months Up	Device	Survival F	Probabilit	y (%)										
el ber	≥	nber	1arke1 ase	s lled	plicat udy	ulativ Mow- udy	Years A	fter Impl	lant											
Mod Num	Fami	Char	US N Rele	Lead Enro	Com in St	Cum of Fc in St	1 yr	2 yr	3 yr	4 yr	5 yr	6 yr	7 yr	8 yr	10 yr	12 yr	14 yr	16 yr	18 yr	20 yr
4073	CapSure Sense	Atrial	Jun-02	1	0	18	Survival e	stimate no	t available o	due to insuf	ficient sam	ple size								
4073	CapSure Sense	Vent	Jun-02	101	0	1,926	100.0	100.0 at 15 mo												
4074	CapSure Sense	Vent	Jun-02	382	0	7,648	100.0	100.0	100.0 at 33 mo											
4076	CapSureFix Novus	Atrial	Feb-04	140	0	2,011	100.0	100.0 at 18 mo												
4076	CapSureFix Novus	Vent	Feb-04	169	1	2,414	100.0	100.0 at 18 mo												
4081	Target Tip	Vent	Jul-89	260	3	9,587	100.0	100.0	100.0	100.0	100.0	98.2 +1.5/-10.5 at 63 mo								
4092	CapSure SP Novus	Vent	Sep-98	1,139	15	37,061	99.0 +0.5/-0.8	98.9 +0.5/-0.9	98.9 +0.5/-0.9	98.4 +0.7/-1.3	97.1 +1.5/-2.8									
4503, 4503M	CapSure	Atrial	Jul-86	59	_	3,059	Survival e	stimate not	t available o	due to insuf	ficient sam	ple size								
4504,	CapSure	Atrial	Mar-90	368	48	19,857	100.0	100.0	99.1	98.2 +1.1/-3.0	90.3	82.2	73.0	69.9 +7.0/-8.7	66.1					
4504M	Advisory: see pa Expectations	age 166 -	1996 Lead	Survival I	Below										at 105 mo					
4512	Target Tip	Atrial	Jul-83	600	35	40,029	99.6 +0.3/-1.2	99.6 +0.3/-1.2	99.1 +0.6/-1.5	98.0 +1.0/-2.0	96.8 +1.4/-2.5	95.7 +1.7/-2.9	94.8 +2.0/-3.2	91.1 +3.0/-4.3	87.2 +3.9/-5.5	84.5 +4.6/-6.2	83.4 +4.9/-6.8 at 159 mo			
4523	CapSure SP	Atrial	Aug-91	121	3	6,713	98.1 +1.4/-5.3	98.1 +1.4/-5.3	98.1 +1.4/-5.3	98.1 +1.4/-5.3	98.1 +1.4/-5.3 at 57 mo									
4524	CapSure SP	Atrial	Oct-91	911	6	37,375	99.6 +0.3/-0.7	99.3 +0.4/-1.0	99.3 +0.4/-1.0	99.0 +0.6/-1.2	99.0 +0.6/-1.2	99.0 +0.6/-1.2	99.0 +0.6/-1.2	99.0 +0.6/-1.2	99.0 +0.6/-1.2 at 99 mo					
4533	CapSure Z	Atrial	Mar-94	206	4	10,903	100.0	99.4 +0.5/-3.5	98.8 +0.9/-3.6	98.0 +1.3/-4.3	98.0 +1.3/-4.3	98.0 +1.3/-4.3	98.0 +1.3/-4.3 at 81 mo							
4557, 4557M	Screw-In	Atrial	Aug-88	294	6	18,182	99.1 +0.7/-2.7	99.1 +0.7/-2.7	99.1 +0.7/-2.7	97.8 +1.4/-3.5	97.8 +1.4/-3.5	97.8 +1.4/-3.5	96.9 +1.9/-4.4	96.9 +1.9/-4.4	96.9 +1.9/-4.4	96.9 +1.9/-4.4 at 123 mo				
4558M	Screw-In	Atrial	Nov-94	539	10	21,930	99.3 +0.5/-1.4	99.3 +0.5/-1.4	99.3 +0.5/-1.4	99.3 +0.5/-1.4	99.3 +0.5/-1.4	97.7 +1.5/-4.1	96.6 +2.1/-5.0	96.6 +2.1/-5.0	95.1 +2.9/-6.6 at 105 mo					

Lead Survival Summary continued

					ions	e Months Up	Device	Survival F	Probabilit	:y (%)										
lel nber	ý	mber	Aarket ase	ds olled	nplicat udy	ulativ ollow- udy	Years A	fter Imp	lant											
Mod Nurr	Fam	Chai	US N Rele	Lead	Com in St	Cum of Fo in St	1 yr	2 yr	3 yr	4 yr	5 yr	6 yr	7 yr	8 yr	10 yr	12 yr	14 yr	16 yr	18 yr	20 yr
4568	CapSureFix	Atrial	Jan-97	573	25	16,801	96.3 +1.4/-2.1	95.8 +1.5/-2.2	95.1 +1.7/-2.4	95.1 +1.7/-2.4	94.2 +2.2/-3.5									
4574	CapSure Sense	Atrial	Jun-02	3	0	73	Survival e	estimate no	t available	due to insuf	ficient sam	ple size								
4592	CapSure SP Novus	Atrial	Oct-98	239	5	8,037	97.8 +1.4/-3.5	97.8 +1.4/-3.5	97.8 +1.4/-3.5	97.8 +1.4/-3.5	96.4 +2.2/-5.9 at 57 mo									
5023, 5023M	CapSure SP	Vent	Nov-88	1,348	5	56,295	99.7 +0.2/-0.5	99.7 +0.2/-0.5	99.7 +0.2/-0.5	99.6 +0.2/-0.8	99.6 +0.2/-0.8	99.6 +0.2/-0.8	98.9 +0.8/-2.5	98.9 +0.8/-2.5 at 93 mo						
5024, 5024M	CapSure SP	Vent	Mar-90	8,142	43	411,193	99.7 +0.1/-0.2	99.6 +0.1/-0.1	99.5 +0.2/-0.1	99.5 +0.1/-0.2	99.4 +0.2/-0.2	99.4 +0.2/-0.3	99.3 +0.2/-0.3	99.1 +0.3/-0.4	98.7 +0.5/-0.7	98.7 +0.5/-0.7	98.7 +0.5/-0.7 at 162 mo			
5026	CapSure	Vent	Feb-88	168	4	9,439	100.0	99.2 +0.7/-4.8	98.2 +1.4/-5.2	97.1 +2.0/-5.9	97.1 +2.0/-5.9	95.7 +2.7/-7.2	95.7 +2.7/-7.2 at 75 mo							
5033	CapSure Z	Vent	Feb-96	1,899	19	85,907	99.7 +0.2/-0.4	99.6 +0.2/-0.4	99.2 +0.3/-0.7	99.0 +0.5/-0.7	98.8 +0.5/-0.9	98.4 +0.7/-1.1	98.2 +0.7/-1.2	97.5 +1.0/-1.7	97.5 +1.0/-1.7 at 114 mo					
5034	CapSure Z	Vent	Feb-96	1,596	13	75,632	99.8 +0.1/-0.4	99.6 +0.2/-0.6	99.3 +0.3/-0.7	99.2 +0.3/-0.8	99.0 +0.5/-0.8	99.0 +0.5/-0.8	98.8 +0.5/-1.1	98.3 +0.9/-1.8	98.3 +0.9/-1.8 at 105 mo					
5054	CapSure Z Novus	Vent	Jun-98	1,381	11	45,382	99.5 +0.3/-0.6	99.4 +0.3/-0.6	99.4 +0.3/-0.6	99.3 +0.3/-0.8	99.3 +0.3/-0.8	96.8 +2.1/-6.1 at 69 mo								
5068	CapSureFix	Atrial	Jan-97	963	4	31,081	99.7 +0.2/-0.9	99.7 +0.2/-0.9	99.7 +0.2/-0.9	99.4 +0.4/-1.6	99.4 +0.4/-1.6	99.4 +0.4/-1.6	99.4 +0.4/-1.6	98.4 +1.1/-4.3	98.4 +1.1/-4.3 at 99 mo					
5068	CapSureFix	Vent	Jan-97	1,359	5	32,031	99.8 +0.1/-0.6	99.6 +0.3/-0.8	99.4 +0.4/-1.1	99.4 +0.4/-1.1	99.4 +0.4/-1.1	99.4 +0.4/-1.1	99.4 +0.4/-1.1 at 78 mo							
5072	SureFix	Atrial	Jun-98	451	2	19,235	99.7 +0.3/-1.5	99.7 +0.3/-1.5	99.4 +0.4/-1.9	99.4 +0.4/-1.9	99.4 +0.4/-1.9	99.4 +0.4/-1.9	99.4 +0.4/-1.9 at 81 mo							
5076	CapSureFix Novus	Atrial	Aug-00	1,920	8	45,796	99.6 +0.2/-0.4	99.6 +0.2/-0.4	99.3 +0.4/-0.7	99.3 +0.4/-0.7	99.3 +0.4/-0.7 at 57 mo									
5076	CapSureFix Novus	Vent	Aug-00	1,425	6	33,991	99.8 +0.1/-0.5	99.6 +0.3/-0.6	99.6 +0.3/-0.6	99.3 +0.5/-1.3	99.3 +0.5/-1.3 at 54 mo									
5092	CapSure SP Novus	Vent	Jun-98	1,144	8	33,503	99.5 +0.3/-0.8	99.3 +0.4/-0.8	99.1 +0.5/-1.0	98.8 +0.6/-1.5	98.8 +0.6/-1.5	98.8 +0.6/-1.5	98.8 +0.6/-1.5 at 75 mo							
5524, 5524M	CapSure SP	Atrial	Mar-90	4,432	34	223,597	99.8 +0.1/-0.3	99.7 +0.2/-0.2	99.5 +0.2/-0.3	99.3 +0.3/-0.3	99.2 +0.3/-0.4	99.2 +0.3/-0.4	99.1 +0.3/-0.6	98.5 +0.6/-0.8	97.3 +1.0/-1.7	96.6 +1.4/-2.5				

continued

Leads

Pacing Leads continued

Lead Survival Summary continued

			ц.		tions	re Months .Up	Device	Survival F	Probabilit	:y (%)										
lel 1ber	Ŀ.	mber	Aarke ase	ds olled	plica: udy	ulativ- ollow- udy	Years A	fter Imp	lant											
Num	Fam	Chai	US N Rele	Lead	Corr in St	Curr of Fo in St	l yr	2 yr	3 yr	4 yr	5 yr	6 yr	7 yr	8 yr	10 yr	12 yr	14 yr	16 yr	18 yr	20 yr
5534	CapSure Z	Atrial	Feb-96	260	6	12,005	98.3 +1.1/-2.8	97.8 +1.3/-3.1	97.8 +1.3/-3.1	97.1 +1.6/-3.6	97.1 +1.6/-3.6	97.1 +1.6/-3.6	97.1 +1.6/-3.6 at 78 mo							
5554	CapSure Z Novus	Atrial	Jun-98	316	4	13,204	100.0	99.1 +0.7/-2.6	98.6 +0.9/-2.9	98.0 +1.3/-3.2	98.0 +1.3/-3.2	98.0 +1.3/-3.2	98.0 +1.3/-3.2 at 75 mo							
5568	CapSureFix	Atrial	Jan-97	825	4	21,957	99.9 +0.1/-1.0	99.6 +0.3/-1.3	99.6 +0.3/-1.3	99.6 +0.3/-1.3	98.7 +1.0/-4.2	97.4 +1.8/-5.8 at 69 mo								
5592	CapSure SP Novus	Atrial	Jun-98	632	4	19,036	99.6 +0.3/-1.1	99.2 +0.5/-1.3	99.2 +0.5/-1.3	99.2 +0.5/-1.3	99.2 +0.5/-1.3									
5594	CapSure SP Novus	Atrial	Jun-01	10	0	382	Survival e	stimate no	t available	due to insu	ficient sam	iple size								
6907R	(no brand name)	Vent	May-79	121	6	9,478	100.0	99.0 +0.9/-5.7	99.0 +0.9/-5.7	99.0 +0.9/-5.7	99.0 +0.9/-5.7	97.5 +1.9/-7.3	97.5 +1.9/-7.3	97.5 +1.9/-7.3 at 81 mo						
6940	CapSureFix	Atrial	Oct-98	616	6	22,623	99.8 +0.2/-1.0	99.8 +0.2/-1.0	98.6 +0.8/-1.9	98.3 +0.9/-2.1	98.3 +0.9/-2.1	98.3 +0.9/-2.1 at 66 mo								
6957	Spectraflex	Atrial	Jul-79	677	10	24,622	100.0	99.7 +0.3/-1.6	99.4 +0.4/-2.0	98.5 +0.9/-2.5	98.0 +1.2/-2.8	98.0 +1.2/-2.8	95.7 +2.2/-4.6	93.6 +3.1/-5.8 at 99 mo						
6957	Spectraflex	Vent	Jul-79	1,854	42	95,874	99.6 +0.2/-0.5	99.2 +0.4/-0.6	98.8 +0.5/-0.9	98.2 +0.7/-1.0	97.7 +0.8/-1.2	97.0 +1.0/-1.4	96.8 +1.0/-1.5	96.1 +1.2/-1.7	95.3 +1.5/-2.1	94.3 +1.9/-2.7	93.6 +2.2/-3.2	92.5 +2.8/-4.2	91.1 +3.5/-5.4 at 17 yr	
6957J	Spectraflex	Atrial	Sep-80	2,348	84	160,448	99.5 +0.2/-0.5	99.0 +0.4/-0.6	98.6 +0.4/-0.7	97.8 +0.6/-0.8	97.5 +0.7/-0.9	96.8 +0.8/-1.1	96.2 +1.0/-1.2	95.7 +1.0/-1.3	93.3 +1.5/-1.8	92.2 +1.7/-2.1	91.5 +1.9/-2.4	90.9 +2.1/-2.7	87.8 +3.3/-4.4	87.8 +4.1/-5.5 at 225 mo
6961	Tenax	Vent	Jan-78	627	21	43,069	99.4 +0.4/-1.1	99.2 +0.5/-1.3	99.2 +0.5/-1.3	97.8 +1.1/-2.0	97.1 +1.3/-2.3	96.4 +1.5/-2.7	96.4 +1.5/-2.7	95.4 +1.9/-3.0	93.7 +2.4/-3.9	92.9 +2.7/-4.3	90.2 +3.9/-6.2	90.2 +3.9/-6.2 at 171 mo		
6962	Tenax	Vent	Jan-78	1,483	51	110,904	99.0 +0.4/-0.8	98.2 +0.7/-0.9	97.4 +0.8/-1.1	96.9 +0.9/-1.2	96.7 +0.9/-1.3	96.5 +1.0/-1.3	96.4 +1.0/-1.4	96.2 +1.1/-1.5	95.3 +1.3/-1.8	94.7 +1.5/-2.0	93.5 +1.8/-2.5	92.2 +2.4/-3.3	90.5 +3.0/-4.3	90.5 +3.0/-4.3 at 243 mo

Laboratory Analysis Summary

Model Number	Family	US Market Release	Estimated US Implants	Estimated US Active	Implant Damage	Electrical Malfunction	Other
3830	SelectSecure	Aug-05	1,700	1,500	5	0	1
4003, 4003M	CapSure	Jul-86	40,000	8,100	24	54	2
4004, 4004M	CapSure	Feb-89	74,500	3,700	55	680	19
4011	Target Tip	Nov-82	64,000	8,200	29	141	5
4012	Target Tip	Jul-83	96,800	6,700	50	817	34
4023	CapSure SP	Aug-91	43,700	16,900	48	18	6
4024	CapSure SP	Oct-91	229,200	95,300	264	89	34
4033	CapSure Z	not US released	_	_	2	0	0
4057, 4057M	Screw-in	Aug-88	12,100	3,100	39	6	4
4058, 4058M	Screw-in	Jan-89	111,100	29,600	388	223	23
4067	CapSureFix	Jan-97	1,300	600	3	1	1
4068	CapSureFix	Mar-96	131,700	65,200	406	68	11
4073	CapSure Sense	Jun-02	400	300	0	0	0
4074	CapSure Sense	Jun-02	35,000	29,700	10	1	1
4076	CapSureFix Novus	Feb-04	60,600	55,400	27	2	4
4081	Target Tip	Jul-89	4,100	1,000	4	5	0
4092	CapSure SP Novus	Sep-98	126,200	88,200	30	7	5
4503, 4503M	CapSure	Jul-86	9,000	1,600	2	9	0
4504, 4504M	CapSure	Mar-90	16,600	1,900	5	170	4
4512	Target Tip	Jul-83	11,600	1,200	4	82	8
4523	CapSure SP	Aug-91	12,000	4,000	5	2	1
4524	CapSure SP	Oct-91	106,900	43,200	47	17	8
4533	CapSure Z	not US released	—	—	0	0	0
4557, 4557M	Screw-in	Aug-88	22,500	6,000	53	14	4
4558M	Screw-in	Nov-94	21,000	7,100	111	10	1
4568	CapSureFix	Jan-97	72,700	43,600	196	5	4
4574	CapSure Sense	Jun-02	22,500	18,900	5	0	0
4592	CapSure SP Novus	Oct-98	64,900	44,300	11	2	0
5023, 5023M	CapSure SP	Nov-88	10,600	3,300	15	7	0
5024, 5024M	CapSure SP	Mar-90	211,400	82,500	723	103	29
5026	CapSure	Feb-88	7,800	1,500	60	7	1
5033	CapSure Z	Feb-96	2,500	1,200	6	1	3
5034	CapSure Z	Feb-96	58,700	26,000	85	29	11
5054	CapSure Z Novus	Jun-98	76,700	50,300	40	11	6
5068	CapSureFix	Jan-97	108,000	59,100	455	52	15
5072	SureFix	Jun-98	8,500	5,300	21	2	1
5076	CapSureFix Novus	Aug-00	653,200	513,400	599	105	45
5092	CapSure SP Novus	Jun-98	95,200	66,000	42	15	10
5524, 5524M	CapSure SP	Mar-90	63,800	26,400	66	18	7
5534	CapSure Z	Feb-96	27,700	10,700	29	6	5
5554	CapSure Z Novus	Jun-98	48,900	32,200	7	6	4
5568	CapSureFix	Jan-97	50,000	35,300	209	7	7
5592	CapSure SP Novus	Jun-98	22,000	16,500	5	2	0

continued

Laboratory Analysis Summary continued

Model Number	Family	US Market Release	Estimated US Implants	Estimated US Active	Implant Damage	Electrical Malfunction	Other
5594	CapSure SP Novus	Jun-01	7,400	6,000	0	1	0
6907R	(no brand name)	May-79	18,500	1,300	3	25	1
6940	CapSureFix	Oct-98	26,600	14,600	114	18	3
6957	Spectraflex	Jul-79	29,100	3,300	85	39	25
6957J	Spectraflex	Sep-80	30,000	2,700	74	28	30
6961	Tenax	Jan-78	44,700	2,000	103	27	0
6962	Tenax	Jan-78	70,600	3,700	170	84	0

Reference Chart

Model Number	Family	Туре	Insulation	Conductor Material	Tip Electrode	Connector Type
3830	SelectSecure	Transvenous V or A Screw-In	Polyurethane/ Silicone (55D,4719)	MP35N 5 Filars/ Cable	1.8 mm Helix/Steroid	IS-1BI
4003, 4003M	CapSure	Transvenous Ventricular Tines	Polyurethane (80A)	MP35N 4 Filars	Porous/Steroid	5 mm (4003) IS-1 UNI (4003M)
4004, 4004M	CapSure	Transvenous Ventricular Tines	Polyurethane (80A)	MP35N 6/4 Filars	Porous/Steroid	3.2 mm Low Profile (4004) IS-1 BI (4004M)
4011	Target Tip	Transvenous Ventricular Tines	Polyurethane (80A)	MP35N 4 Filars	Target Tip Concentric Grooves	5 mm
4012	Target Tip	Transvenous Ventricular Tines	Polyurethane (80A)	MP35N 6/4 Filars	Target Tip Concentric Grooves	3.2 mm Low Profile
4023	CapSure SP	Transvenous Ventricular Tines	Polyurethane (55D)	MP35N 4 Filars	Porous Platinized/ Steroid	IS-1 UNI
4024	CapSure SP	Transvenous Ventricular Tines	Polyurethane (55D)	MP35N 4/5 Filars	Porous Platinized/ Steroid	IS-1BI
4033	CapSure Z	Transvenous Ventricular Tines	Polyurethane (55D)	MP35N 2 Filars	CapSure Z Platinized/Steroid	IS-1 UNI
4057, 4057M	Screw-In	Transvenous V or A Screw-In	Polyurethane (80A)	MP35N 1 Filar	2.0 mm Helix	5 mm (4057) IS-1 UNI (4057M)
4058, 4058M	Screw-In	Transvenous V or A Screw-In	Polyurethane (80A/55D)	MP35N 4/1 Filars	2.0 mm Helix	3.2 mm Low Profile (4058) IS-1 BI (4058M)
4067	CapSureFix	Transvenous V or A Screw-In	Polyurethane (80A)	MP35N 3 Filars	1.8 mm Helix/Steroid	IS-1 UNI
4068	CapSureFix	Transvenous V or A Screw-In	Polyurethane (80A/55D)	MP35N 4/3 Filars	1.8 mm Helix/Steroid	IS-1BI
4073	CapSure Sense	Transvenous Ventricular Tines	Polyurethane (55D)	MP35N 5 Filars	TiN Coated Platinum Iridium/Steroid	IS-1 UNI
4074	CapSure Sense	Transvenous Ventricular Tines	Polyurethane/ Silicone (55D, 4719)	MP35N 5/5 Filars	TiN Coated Platinum Iridium/ Steroid	IS-1 BI
4076	CapSureFix Novus	Transvenous V or A Screw-In	Polyurethane/ Silicone (55D, 4719)	MP35N 4/6 Filars	TiN Coated Platinum Alloy/Steroid	IS-1BI
4081	Target Tip	Transvenous Ventricular Tines	Polyurethane (80A)	MP35N 4 Filars	Target Tip Concentric Grooves	IS-1 UNI w/Removable 5 mm Sleeve
4092	CapSure SP Novus	Transvenous Ventricular Tines	Polyurethane/ Silicone (55D/4719)	MP35N 6/4 Filars	Porous Platinized/ Steroid	IS-1BI
4503, 4503M	CapSure	Transvenous Atrial-J Tines	Polyurethane (80A)	MP35N 4 Filars	Porous/Steroid	5 mm (4503) IS-1 UNI (4503M)
4504, 4504M	CapSure	Transvenous Atrial-J Tines	Polyurethane (80A)	MP35N 3/4 Filars	Porous/Steroid	3.2 mm Low Profile (4504) IS-1BI (4504M)
4512	Target Tip	Transvenous Atrial-J Tines	Polyurethane (80A)	MP35N 2/4 Filars	Target Tip Concentric Grooves	3.2 mm Low Profile
4523	CapSure SP	Transvenous Atrial-J Tines	Polyurethane (55D)	MP35N 2 Filars	Porous Platinized/ Steroid	IS-1 UNI
4524	CapSure SP	Transvenous Atrial-J Tines	Polyurethane (55D)	MP35N 4/5 Filars	Porous Platinized/ Steroid	IS-1BI
4533	CapSure Z	Transvenous Atrial-J Tines	Polyurethane (55D)	MP35N 2 Filars	CapSure Z Platinized/Steroid	IS-1 UNI
4557, 4557M	Screw-In	Transvenous Atrial-J Screw-In	Polyurethane (80A)	MP35N 1 Filar	1.5 mm Helix	5 mm (4557) IS-1 UNI (4557M)
4558M	Screw-In	Transvenous Atrial-J Screw-In	Polyurethane (80A/55D)	MP35N 6/3 Filars	1.8 mm Helix/Steroid	IS-1BI
4568	CapSureFix	Transvenous Atrial-J Screw-In	Polyurethane (80A/55D)	MP35N 6/3 Filars	1.8 mm Helix/Steroid	IS-1BI
4574	CapSure Sense	Transvenous Atrial -J Tines	Polyurethane/ Silicone (55D,4719)	MP35N 5/5 Filars	TiN Coated Platinum Iridium	IS-1BI
4592	CapSure SP Novus	Transvenous Atrial-J Tines	Polyurethane/ Silicone (55D/4719)	MP35N 6/3 Filars	Porous Platinized/ Steroid	IS-1BI
5023, 5023M	CapSure SP	Transvenous Ventricular Tines	Silicone	MP35N 4 Filars	Porous Platinized/ Steroid	5 mm (5023) IS-1 UNI (5023M)

continued

Reference Chart continued

Model Number	Family	Туре	Insulation	Conductor Material	Tip Electrode	Connector Type
5024, 5024M	CapSure SP	Transvenous Ventricular Tines	Silicone	MP35N 4/5 Filars	Porous Platinized/ Steroid	3.2 mm Low Profile (5024) IS-1 BI (5024M)
5026	CapSure	Transvenous Ventricular Tines	Silicone	MP35N 6/4 Filars	Porous Platinized/ Steroid	3.2 mm Low Profile
5033	CapSure Z	Transvenous Ventricular Tines	Silicone	MP35N 4 Filars	CapSure Z Platinized/Steroid	IS-1 UNI
5034	CapSure Z	Transvenous Ventricular Tines	Silicone	MP35N 4/5 Filars	CapSure Z Platinized/Steroid	IS-1 BI
5054	CapSure Z Novus	Transvenous Ventricular Tines	Silicone (4719)	MP35N 5/5 Filars	CapSure Z Porous/Platinized/ Steroid	IS-1BI
5068	CapSureFix	Transvenous V or A Screw-In	Silicone	MP35N 4/3 Filars	1.8 mm Helix/Steroid	IS-1 BI
5072	SureFix	Transvenous V or A Screw-In	Silicone	MP35N 4/5 Filars	1.8 mm Helix/Steroid	IS-1 BI
5076	CapSureFix Novus	Transvenous V or A Screw-In	Silicone (4719)	MP35N 4/6 Filars	Porous Platinized/ Steroid	IS-1 BI
5092	CapSure SP Novus	Transvenous Ventricular Tines	Silicone (4719)	MP35N 5/5 Filars	Porous Platinized/ Steroid	IS-1 BI
5524, 5524M	CapSure SP	Transvenous Atrial-J Tines	Silicone	MP35N 6/5 Filars	Porous Platinized/ Steroid	3.2 mm Low Profile (5524) IS-1 BI (5524M)
5534	CapSure Z	Transvenous Atrial Tines	Silicone	MP35N 4/5 Filars	CapSure Z Platinized/Steroid	IS-1BI
5554	CapSure Z Novus	Transvenous Atrial-J Screw-In	Silicone (4719)	MP35N 6/5 Filars	CapSure Z Porous Platinized/ Steroid	IS-1 BI
5568	CapSureFix	Transvenous Atrial-J Screw-In	Silicone	MP35N 6/3 Filars	1.8 mm Helix/Steroid	IS-1 BI
5592	CapSure SP Novus	Transvenous Atrial-J Tines	Silicone (4719)	MP35N 6/5 Filars	Porous Platinized/ Steroid	IS-1 BI
5594	CapSure SP Novus	Transvenous Atrial-J Tines	Silicone (4719)	MP35N 6/5 Filars	Platinized Platinum/ Steroid	IS-1 BI
6907R	(no brand name)	Transvenous Ventricular Flange	Silicone	MP35N 2 Filars	Ring Tip	5 mm
6940	CapSureFix	Transvenous A or V Screw-in	Silicone	MP35N 3/6 Filars	Platinum Alloy	IS-1 BI
6957	Spectraflex	Transvenous V or A Screw-In	Polyurethane (80A)	MP35N 1 Filar	2.0 mm Helix	5 mm
6957J	Spectraflex	Transvenous Atrial-J Screw-In	Polyurethane (80A)	MP35N 1 Filar	1.5 mm Helix	5 mm
6961	Tenax	Transvenous Ventricular Tines	Silicone	MP35N 3 Filars	Ring Tip	5 mm
6962	Tenax	Transvenous Ventricular Tines	Silicone	MP35N 4 Filars	Ring Tip	5 mm Bifurcated

Epi/Myocardial Pacing Leads



4965 CapSure Epi

Product Characteristics

US Market Release	Sep-96	Serial Number Prefix	LBT	Laboratory Analysis	
Estimated US Implants	16,400	Type and/or Fixation	Epicardial Suture-On V or A		-
Estimated US Active	9,900	Polarity	Unipolar	Implant Damage Electrical Malfunction	74
Advisories	None	Steroid	Yes	Other	2

Prosp	ect	ive Clinical S	Study Result	S			Complicatio	ons in Study	6 Total		
lity (%) 001 (%)		Number of L Cumulative I	eads Enrolled. Months of Fol	l in Study low-Up	158 3,837		Conduc Failur Fail	ctor Fracture e to Capture ure to Sense Oversensing	2 1 1 2		
al Probability	20 20 30			2	1		5	5 7	,	R (0
ead Surviva		, Years Afte	r Implant 1 yr	2 yr	3 yr	-		, 			
Ľ.	% #	Effective Sam	99.2 81 ple Size	97.8 68	97.8 51						

Epi/Myocardial Pacing Leads continued



5071

Product Characteristics

	US Market Release	Dec-92	Serial Number Prefix	LAQ	Laboratory Analysis	
	Estimated US Implants	27,900	Type and/or Fixation	Myocardial Screw-in Vent.		
	Estimated US Active	18,300	Polarity	Unipolar	Implant Damage Electrical Malfunction	23 4
	Advisories	None	Steroid	No	Other	i
Prospec	tive Clinical Study Result	S	Сотр	lications in Study 7 Total		

Number of Leads Enrolled in Study 158 Failure to Capture 7 Cumulative Months of Follow-Up 4,253 Lead Survival Probability (%) 100 90 80 2 3 8 9 5 6 7 10 0 Δ Years After Implant 1 yr 2 yr at 30 mo % 95.4 94.2 94.2 # 75 55 48 Effective Sample Size

Epi/Myocardial Pacing Leads continued



Lead Survival Summary (95% Confidence Interval)

Aodel Jumber	amily	JS Market telease	eads inrolled	Complications n Study	Cumulative Months of Follow-Up n Study	Device S Years A	Survival F fter Impl	Probabilit lant	y (%)	5 yr	6 yr	7 yr	8 yr	9 vr	10 yr	11 yr	12 yr
4951, 4951M	Spectraflex	Oct-81	177	10	5,941	97.7 +1.5/-4.9	96.4 +2.3/-5.9	96.4 +2.3/-5.9	93.3 +3.8/-8.2								
4965	CapSure Epi	Sep-96	158	6	3,837	99.2 +0.7/-4.5	97.8 +1.7/-6.8	97.8 +1.7/-6.8									
4968	CapSure Epi	Sep-99	220	9	10,332	99.5 +0.4/-3.2	97.1 +1.7/-3.9	96.3 +2.0/-4.4	95.4 +2.4/-5.1	95.4 +2.4/-5.1	95.4 +2.4/-5.1 at 69 mo						
5071	(no brand name)	Dec-92	158	7	4,253	95.4 +2.7/-6.2	94.2 +3.2/-7.0	94.2 +3.2/-7.0 at 30 mo									
6917, 6917A	Tenax	Jun-73	598	35	30,424	99.2 +0.5/-1.7	98.0 +1.0/-2.2	96.0 +1.6/-2.9	95.2 +1.9/-3.0	94.8 +2.0/-3.2	94.8 +2.0/-3.2	93.6 +2.4/-3.8	91.5 +3.0/-4.6	88.3 +3.9/-5.7	88.3 +3.9/-5.7	88.3 +3.9/-5.7	87.2 +4.3/-6.2

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Epi/Myocardial Pacing Leads continued

Laboratory Analysis Summary

Model Number	Family	US Market Release	Estimated US Implants	Estimated US Active	Implant Damage	Electrical Malfunction	Other
4951, 4951M	Spectraflex	Oct-81	25,100	4,200	15	95	28
4965	CapSure Epi	Sep-96	16,400	9,900	7	74	2
4968	CapSure Epi	Sep-99	10,200	7,700	2	3	0
5071	(no brand name)	Dec-92	27,900	18,300	23	4	1
6917, 6917A	Tenax	Jun-73	180,100	7,000	115	42	1

Source: Returned Product Analysis Data as of April 30, 2006

Reference Chart

Model Number	Family	Туре	Insulation	Conductor Material	Tip Electrode	Connector Type
4951, 4951M	Spectraflex	Myocardial Stab-In V or A/Peds	Polyurethane (80A)	MP35N 4 Filars	Barb	5 mm (4951) IS-1 UNI (4951M)
4965	CapSure Epi	Epicardial Suture-On V or A	Silicone	MP35N 5 Filars	Porous Platinized/ Steroid	IS-1 UNI
4968	CapSure Epi	Epicardial Suture V or A	Silicone	MP35N 5 Filars	Porous Platinized/ Steroid	IS-1 B1
5069	(no brand name)	Myocardial Screw-In	Silicone	MP35N Multifilars	3-Turn Helix	IS-1 UNI
5071	(no brand name)	Myocardial Screw-In Ventricular	Silicone	MP35N Multifilars	2-Turn Helix	IS-1 UNI
6917	Tenax	Myocardial Screw-In Ventricular	Silicone	Pt Ir Tinsel Wire	3-Turn Helix	5 mm
6917A	Tenax	Myocardial Screw-In Ventricular	Silicone	Pt Ir Tinsel Wire	2-Turn Helix	5 mm

VDD Single Pass Pacing Leads



5038 CapSure VDD-2				Product Characteristics									
		US Market Release Sep-98		Sep-98		Serial Number Pre	efix LEE	LEE, LEG, or LEF Transvenous, Atr-Vent.,Tines			Laboratory Analysis		
		Estimated US Implants 7,200		7,200		Type and/or Fixat	ion Tra			_			
		Estimated US	stimated US Active 4,500			Polarity	Qu	Quadripolar		Impl		ant Damage (Malfunction	6
		Advisories		None		Steroid	Yes	5			Oth		er 1
Pros	spect	tive Clinical S	itudy Result	S			Complicati	ons in Study	4 Total				
		Number of Leads Enrolled in Study			542		Condu						
		Cumulative Months of Follow-Up			17,209		Failu Fai	Failure to Capture 1 Failure to Sense 2					
(%	100									1		1	
ty (90												
abili	80												
rob	(י ו ד כ		2	3	4	5	6 7	7	8	9 1	0	
ival P		Years After	r Implant										
Survi			l yr	2 yr	3 yr	4 yr	5 yr	at 69 mo					
ad	%		99.8	99.8	99.8	98.5	97.6	97.6					
ē	#		409	279	183	124	85	53					
		Effective Samp	ole Size										

VDD Single Pass Pacing Leads continued

Lead Survival Summary (95% Confidence Interval)



Source: System Longevity Study Data as of April 1, 2006

Laboratory Analysis Summary

Model Number	Family	US Market Release	Estimated US Implants	Estimated US Active	Implant Damage	Electrical Malfunction	Other
5032	CapSure VDD	Mar-96	5,400	2,400	24	12	0
5038	CapSure VDD-2	Sep-98	7,200	4,500	6	2	1

Source: Returned Product Analysis Data as of April 30, 2006

Reference Chart

Model Number	Family	Туре	Insulation	Conductor Material	Tip Electrode	Connector Type
5032	CapSure VDD	Transvenous V and A Tines	Silicone	MP35N 5/6/1 Filars	Porous Platinized/ Steroid	Atr. IS-1 BI, Vent. IS-1 BI
5038	CapSure VDD-2	Transvenous Ventricular Tines	Silicone	MP35N	Porous Platinized/ Steroid	Atr. IS-1 BI, Vent. IS-1 BI

ICD Charge Time Data

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

Introduction

Information on charge time performance of Medtronic ICDs is presented in this section of the CRDM Product Performance Report. The collection of Save-to-Disk files for all Medtronic ICD models, from 7221 Micro Jewel onwards, was implemented on July 1, 1999. The files are collected via our ongoing active clinical study of long-term system performance called the System Longevity Study.

Charge times are normally affected by several factors:

- (a) The gradual decline in battery voltage and increase in battery resistance that occurs over the life of the device,
- (b) The deformation of capacitors that occurs normally between capacitor formations, and
- (c) The different rates of capacitor deformation due to component variability.

Certain early Model 7223Cx and Model 7271 devices demonstrated longer than typical charge times due to greater component variability in the capacitors used in these devices. This information has been communicated directly to physicians via Safety Advisories. At this time, we estimate very few, if any, of the affected advisory populations of 7223Cx and 7271 ICDs remain implanted and in-service. Charge time data for these advisory populations are no longer included in this issue of the Performance Report.

Data Presentation

Charge time data for ICD models are presented via 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 75th percentile (i.e., 75% of all charge times fall below this line), whereas the bottom of the box represents the 25th percentile. The brackets around the box represent the variance in charge times (analogous to a confidence interval), and are calculated as a function of the median and IQR. Individual values falling outside the brackets are labeled as outliers.

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. A conservative approach has been adopted whereby only the maximum charge in each 6-month interval is reported. As charge time is a direct product of time since last capacitor reformation, charges occurring within 15 days of a previous charge are excluded. This precludes the reporting of overly optimistic results.



ICD Charge Times continued



7223 Micro Jewel II Charge Time

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7229 GEM II VR Charge Time



^{(#} of devices)

7231 GEM III VR Charge Time 35 30 Charge Time (seconds) 25 20 15 10 罵 5 0 6 12 18 24 30 36 42 48 (210) (108) (13) (174) (161) (134) (90) (60) (35) Months from Implant (# of devices) Interquartile Range (IQR)

Save-to-Disk files have been collected 48 months post-implant. All observed charge times are less than 12 seconds with a maximum of 10.66 seconds at 48 months post-implant.



Save-to-Disk files have been collected 78 months post-implant. All observed charge times are less than 20 seconds with a maximum of 18.99 seconds observed at 78 months post-implant.





(# of devices)





(# of devices)

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Outliers

Median +/- 1.5 IQR

7275 GEM III DR Charge Time





7277 InSync Marquis Charge Time



Save-to-Disk files have been collected 24 months post-implant. All observed charge times are less than 9 seconds with a maximum of 8.54 seconds observed at 24 months post-implant.



Save-to-Disk files have been collected 36 months post-implant. All observed charge times are less than 10 seconds with a maximum of 9.52 seconds observed at implant.







D153ATG, D153DRG EnTrust Charge Time

Save-to-Disk files have been collected 24 months post-implant. All observed charge times are less than 9 seconds with a maximum of 8.2 seconds observed at implant.



Save-to-Disk files have been collected 6 months post-implant. All observed charge times are less than 11 seconds with a maximum of 10.5 seconds observed at implant.

D154ATG, D154DRG EnTrust Charge Time



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D154VRC EnTrust Charge Time



Save-to-Disk files have been collected 6 months post-implant. All observed charge times are less than 10 seconds with a maximum of 9.7 seconds observed at implant.



Advisories

Sigma Implantable Pulse Generators Original Date of Advisory: November 2005

Potential Separation of Interconnect Wires

Product

A specific subset of Sigma series pacemakers may fail due to separation of interconnect wires from the hybrid circuit. Approximately 28,000 devices, with approximately 6,650 in the United States, out of an initial implant population of 40,000 worldwide, remain implanted and in service. Specific model and serial numbers of affected devices are available online at http://SigmaSNList.medtronic.com.

Advisory

This subset of Sigma series pacemakers that may fail due to separation of interconnect wires from the hybrid circuit may present clinically as loss of rate response, premature battery depletion, intermittent or total loss of telemetry, or no output. There have been no reported patient injuries or deaths due to this issue.

Separation of redundant interconnect wires has been observed on hybrid terminal blocks. Device failure occurs only where both interconnect wires separate from a hybrid terminal block. In October 2005, testing and analysis identified the root cause of these failures and the affected population. Hybrid circuits used in this subset of devices were cleaned during manufacturing with a particular cleaning solvent that could potentially reduce the strength of the interconnect wire bond over time.

Our modeling predicts a failure rate from 0.17% to 0.30% over the remaining lifetime of these pacemakers. No provocative testing can predict which devices may fail.

Patient Management Recommendations

To assist physicians in their patient care and after discussion with physician consultants, Medtronic offers the following recommendations:

- Medtronic does not recommend replacement of these devices prior to normal elective replacement (ERI), based on the low probability of occurrence of a serious event in this population.
- Continue routine follow-up in accordance with standard practice.
- Advise patients to seek attention immediately if they experience return of symptoms (e.g., syncope or light-headedness).

 Determine whether device replacement is warranted on a case-by-case basis based upon consultation with patients, review of the individual patient's medical history, and consideration of the relative risks of an invasive procedure.

Status Update (August 2006)

The Sigma Family device performance related to the interconnect wires separation mechanism continues to be within Medtronic's engineering projections. As of August 22, 2006, 43 devices out of approximately 40,000 devices worldwide (0.10% incidence) have been confirmed as having experienced interconnect wire separation while implanted. Twenty-four (24) of these devices were returned from the United States. There have been no confirmed serious injuries or deaths due to this issue.

Twenty-five (25) of the 43 devices were returned with information indicating a problem with the patient's pacing system prior to explant. The remaining 18 devices were returned with no information indicating a potential malfunction while implanted or with insufficient information to determine the state of the device at explant. Lacking definite information indicating proper operation until explant, these devices are conservatively categorized as having experienced interconnect wire separation while implanted.

Implant duration for the 43 devices confirmed as having experienced interconnect wire separation has ranged between 17 and 50 months, with an average of 38 months.

Out of the initial advisory population of 40,000 worldwide, approximately 25,000 remain implanted. Approximately 5,800 of these are in the United States.

The Patient Management Recommendations set forth in the advisory remain unchanged.

7274 Marquis DR 7230 Marquis VR 7232 Maximo VR 7277 InSync Marquis 7289 InSync II Marquis 7279 InSync III Marquis 7285 InSync III Protect

Original Date of Advisory: February 2005

Potential Premature Battery Depletion Due to Battery Short

Product

The specific subset of Marquis family ICD and CRT-D devices having batteries manufactured prior to December 2003 is affected. Devices manufactured with batteries produced after December 2003 are not affected. Specific model and serial numbers of affected devices are available online at http://MarquisSNList.medtronic.com.

Advisory

Medtronic Marquis family of ICD and CRT-D devices having batteries manufactured prior to December 2003 may experience rapid battery depletion due to a specific internal battery short mechanism. Battery design changes were implemented in December 2003 that eliminate the possibility of this internal shorting mechanism.

Highly accelerated bench testing indicated the rate of this shorting mechanism may increase as the battery is depleted. As of February 2005, the rate of shorting was approximately 1 in 10,000 (0.01%); bench test data indicated the rate may increase to between 0.2% and 1.5% over the second half of device life.

No provocative testing can predict which of these devices will experience this issue. Once a short occurs, battery depletion can take place within a few hours to a few days. After depletion the device ceases to function. It is also possible that as the battery depletes quickly, patients may experience temporary warmth in the area surrounding the ICD.

Patient Management Recommendations

We recommend you consider the following patient management options:

- Conduct quarterly (i.e., every three months) follow-up procedures.
- Inform patients that should they experience warmth in the area surrounding the ICD to seek follow-up care promptly.
- Program Low Battery Voltage ERI Patient Alert to "On-High." This will result in an audible, alternating tone in the limited circumstances where a battery depletes slowly over a number of days. Data indicates most shorts will occur rapidly and will not be detected by this feature.

 Provide a hand-held magnet to patients to check device status and program the Low Battery Voltage ERI Patient Alert to "On-High." Device operation may be monitored periodically (e.g., daily) by patients placing the magnet over the device for 1-2 seconds. If the device is functional, a steady tone will sound for approximately 20 seconds. If no tone is heard, followup care should be sought promptly.

Status Update (August 2006)

The Marquis Family device performance related to the battery shorting mechanism continues to be within Medtronic's engineering projections. As of August 22, 2006, 38 Marquis Family devices have been confirmed as having this internal battery shorting mechanism. Twenty-six (26) of these devices were returned from the United States. There have been no confirmed serious injuries or deaths due to this issue.

Of the 38 returns, 16 have been identified by a regularly scheduled follow-up or during a nondevice related hospital visit, 16 by patients reporting warmth in the ICD pocket, 1 by return of bradycardia symptoms, 2 by the PatientAlert sounding, and 3 by hand-held magnet test.

Implant duration for the 38 devices ranged between 11 to 46 months, with an average of 26 months.

Consistent with Medtronic projections, the observed rate of shorting is higher in the second half of device life than in the first half of device life. Of the devices that have exhibited shorting in the last half of device life, 59% occurred in the last quarter of device life and 41% in the last 10% of device life.

Out of the initial advisory population of 87,000 worldwide, approximately 53,000 remain implanted. Approximately 36,000 of these are in the United States.

The Patient Management Recommendations set forth in the advisory remain unchanged.

Warranty

All Marquis devices are subject to a Limited Warranty. Devices returned to Medtronic and determined to be malfunctioning will be replaced or credited in accordance with the warranty terms. In addition, for devices subject to the Marquis advisory, should a physician decide to replace a device for a patient who is pacemaker dependent or who receives frequent VT/VF therapy, Medtronic will, upon receipt of a written statement from the physician setting forth the basis for early replacement of the device, provide a replacement device at no cost.

Advisories continued

7223 Micro Jewel II 7271 GEM DR Original Date of Advisory: April 5, 2004

Potential Long Charge Times Due to Capacitor - Supplement

Product

Micro Jewel II Model 7223Cx ICDs with capacitor lots received from a supplier that were implanted in 1997 and GEM DR Model 7271 ICDs with capacitor lots received from a supplier that were implanted between November 1997 and December 1998. It is estimated that less than 0.5% of currently implanted Micro Jewel II and GEM DR devices built with these specific capacitors may exhibit performance concerns with typical battery depletion.

Affected devices that were subjects of previous physician letters in 1999 and 2000, defined as an isolated group of suspect capacitors, may not be consistently capable of providing high voltage energy delivery near or at ERI (4.91 volts) and continuing through EOL (4.57 volts).

Advisory

Several Micro Jewel II devices have been reported or returned which exhibited the inability to provide a full energy shock when the battery voltage was below 5.13 volts.

Because the same capacitor component lots were also used in a small subset of GEM DR Model 7271 ICDs (implanted from late 1997 through 1998) the company is providing these recommendations for both devices.

Patient Management Recommendations

April 5, 2004 letter supplements earlier Micro Jewel II letters (August 1999 and November 2000) and a GEM DR letter (December 1999) regarding this same previously identified population of devices with capacitors from specific component lots.

The following recommendations apply to Micro Jewel II 7223 and GEM DR Model 7271 devices for advisory population:

- As soon as possible, verify the charge time and battery voltage of each affected device by scheduling a follow-up with the patient, or, if the patient's last follow-up was within the previous 3 months, through review of the patient's medical records.
- Schedule replacement for any device with
 - battery voltage of 5.16 volts or less
 - OR charge time of 18 seconds or greater.
- If the verified charge time is less than 18 seconds but greater than 14 seconds, program the Automatic Capacitor Formation Interval to 1 month. If verified charge time is less than 14 seconds, no additional reprogramming is required.
- Follow these patients every 3 months, at a minimum.

Status

Device performance related to this advisory continues to be within Medtronic's engineering projections and expectations. Patient management recommendations remain unchanged. Medtronic estimates that very few, if any, of the devices affected by this advisory remain active and in service.

AT500 Pacing System

Original Date of Advisory: September 15, 2003

Potential Incorrect Memory Circuit Setting

Product

The affected devices are limited to AT500 implantable pulse generators manufactured prior to November 2001 and it is predicted that less than 1% of these devices will experience this high current drain. A list of affected serial numbers is attached to the September 15, 2003 physician communication letter, or is available from your Medtronic representative, or by calling US Technical Services at 1 (800) 723-4636.

AT500 devices manufactured after October 2001 are not affected.

Advisory

At the time of the advisory, Medtronic had received 14 AT500 Pacing System devices Model AT501 returned for premature battery depletion due to high current drain from a subpopulation of approximately 4,500 devices. Our investigation isolated the root cause to a unique condition that involves the use of the AT/AF EGM "All Episodes" (Episode Full Disclosure mode) feature. The affected device's memory circuit contains 4 bytes of information that can cause the high current drain when specific memory locations store patient intrinsic activity. This results in sooner than anticipated battery depletion; generally within a 2-month period from the time the error occurs. While implanted, each of the returned devices initially appeared to be operating normally and in many cases had been through multiple follow-ups in which the battery level was monitored and at predicted levels.

Patient Management Recommendations

A simple non-invasive procedure will permanently correct the memory circuit and prevent this cause of premature depletion from occurring in the affected AT500 devices. It involves programming the diagnostic setup for Summary Data and EGM strips to "Treated Episodes" followed by a reprogramming to "All Episodes." Note that diagnostic data will be cleared with this programming; therefore, we recommend that a full summary printout or a save-to-disk be done. This will correctly reset the device's software and prevent the identified premature depletion. Programming will only need to be done once over the life of the device. Step-by-step reprogramming instructions are available from your Medtronic representative.

For patients who are pacemaker dependent with no underlying rhythm, it is recommended the reprogramming be done as soon as possible. For non-pacemaker dependent patients the reprogramming could be done at the next regularly scheduled follow-up.

Status

Device performance related to this advisory continues to be within Medtronic's engineering projections and expectations. Patient management recommendations remain unchanged. The devices affected by this advisory are generally at or beyond the midpoint of their expected battery longevity.

7271 GEM DR ICDs

Original Date of Advisory: November 14, 2002

Potential Sudden Increase in Charge Times

Product

A specific subset of devices consisting of less than 20% of the GEM DR ICD manufactured between 1998 to 1999 have suspect batteries that could exhibit sudden increased charge times. Suspect devices are GEM DR Model 7271 ICDs with the engineering series number "4" in the fourth position of the serial number. For example, PIM4xxxxx.

Advisory

Suspect GEM DR devices can exhibit sudden increase in charge times (charge time greater than 18 seconds) at approximately 32 months post-implant.

Patient Management Recommendations

Verify the charge time of each affected suspect device either by scheduling a follow-up with the patient, or through review of the patient's medical records, if the patient's last follow-up was within the previous 3 months.

- Automatic capacitor formation should be programmed to monthly on all suspect devices. This will provide additional warning should an extended charge time unexpectedly occur.
- PatientAlert for Excessive Charge Time should be programmed ON. 18 seconds is the default setting for PatientAlert – Excessive Charge Time.
- Replacement of the device should be considered for any GEM DR device with an unformed charge time of 18 seconds or greater.

At the time of the advisory, a written communication was provided to physicians who have patients implanted with the affected devices, along with serial numbers of those devices.

Status

Device performance related to this advisory continues to be within Medtronic's engineering projections and expectations. Patient management recommendations remain unchanged. Very few, if any, of the devices affected by this advisory remain active and in service.

Kappa 600, 700 Dual Chamber (D, DR, and VDD) IPGs

Original Date of Advisory: March 15, 2002

Potential Fractured Power Supply Wires

Product

A specific subset of Kappa 700/600 Dual Chamber (D, DR, and VDD) Implantable Pulse Generators have been identified by serial numbers. Hospitals and Physicians were notified. Specific model and serial numbers of affected devices are available by calling US Technical Services at 1 (800) 723-4636.

Advisory

As of March 15, 2002, Medtronic observed 53 related failures (0.02%) in over 255,000 Kappa 700/600 Dual Chamber (D, DR, and VDD) Series devices sold worldwide. Medtronic voluntarily communicated this information to physicians because these failures had been observed in patients having submuscular implants.

These devices have presented with an electrical reset, intermittent output, or no output. Our investigation identified the root cause as fractured wires supplying power to the pacemaker. This has been directly correlated to submuscular placement of these devices. Submuscular implant locations (e.g., subpectoral, abdominal, etc.) can result in additional stress and repetitive flexing on the implanted device causing excessive fatigue on these wires. Of the estimated 4,000 devices implanted submuscular, approximately 200 (5%) may experience this failure. These stresses on the implanted device are unique to submuscular implant sites and do not exist with subcutaneous implants.

Patient Management Recommendations

While there is no provocative testing or time dependency that will predict which submuscular placed device will fail, certain electrical resets may be an indicator that a wire fracture has occurred. Normal electrical resets can occur as a result of electrosurgical procedures such as cautery and ablation or from defibrillation therapy. If none of the normal causes of electrical reset can be confirmed, or if a device serial number presents as "000000" following an electrical reset, this may be an indicator of a wire fracture.

For patients who have submuscular implants of devices within the designated serial number range and who are pacemaker dependent with no underlying rhythm, replacement of the device should be considered. Medtronic will provide the replacement device free-of-charge under the terms of its warranty program if a device is replaced in these patients.

For patients having subcutaneous implants, no change to your current patient care and follow-up is advised.

Status

Device performance related to this advisory continues to be within Medtronic's engineering projections and expectations. Patient management recommendations remain unchanged.

7227 with Interchangeable Connector System

Original Date of Advisory: December 20, 2000

Potential High Impedance Due to Removable Connector Header

Product

All Model 7227 devices with the interchangeable connector system may be affected.

Advisory

Affected devices may exhibit high impedance warnings due to the connection between the removable header piece and its receptacle on the device. These high impedance measurements may trigger the PatientAlert feature.

Testing and analysis indicate that despite the high connector impedance, after further evaluation and confirmation of lead integrity, these devices should continue to provide therapy over their service life.

As of December 20, 2000, 45 instances of this out of 1,200 implants worldwide have been identified where connector-related high impedance warnings have occurred. While the warning messages displayed at device interrogation appear to indicate a potential lead problem, it is possible for the source of the high impedance measurement to be located in the connection between the removable header piece and its receptacle on the device.

If device interrogation displays a high impedance warning message, further investigation is recommended prior to taking corrective action. In cases where a high impedance warning is displayed and follow-up has determined that the lead is functioning normally, analysis indicates that

- high voltage therapy delivery is not affected.
- sensing of VT and VF will not be affected.
- oversensing may occur which could potentially result in unwarranted delivery of therapy.
- pacing threshold increases may be observed.

Patient Management Recommendations

- The PatientAlert option for "Lead Impedance Outof-Range" should be enabled at the next scheduled follow-up for both the pacing and defibrillation lead. This will support identification of patients with outof-range lead impedances.
- When a patient presents with a high impedance warning, a "Save To Disk" file should be created and forwarded to Medtronic Technical Services. Your Medtronic representative can coordinate and support evaluation of the implanted system. Analysis of this data can identify if the impedance increase is a result of connector issues, lead failure, or a combination of both. The save-to-disk file can be sent as an email attachment to <u>crmtechnicalservices</u> <u>@medtronic.com</u>. Medtronic Technical Services can also be contacted at 1(800) 723-4636.
- After a high impedance trigger of the PatientAlert has occurred as a result of this issue, we would recommend disabling the feature for that lead to avoid recurrent triggering of the alert tone. In cases where the interchangeable connector is the source of the impedance increase, routine follow-up of the patient to assess pacing, sensing, and defibrillation performance is warranted.

Status

Device performance related to this advisory continues to be within Medtronic's engineering projections and expectations. Patient management recommendations remain unchanged. Medtronic estimates that very few, if any, of the devices affected by this advisory remain active and in service.

7223Cx Micro Jewel II ICDs

Original Date of Advisory: November 20, 2000

Potential Long Charge Times Due to Capacitor

Product

Affected devices within an isolated group of suspect capacitors could exhibit a sudden increase in charge times > 18 seconds.

Several Micro Jewel II devices have been returned which exhibited charge times in excess of 60 seconds.

November 20, 2000 letter updating previous recommendations communicated August 5, 1999. A separate written communication has been provided to physicians who have patients implanted with the affected devices, along with serial numbers of those devices.

Advisory

May 2000 Product Performance Report combines the Micro Jewel II Model 7223Cx and GEM DR Model 7271 advisory. Based on performance differences these model advisories have been separated.

Micro Jewel II devices implanted throughout 1997 can exhibit formed and/or unformed charge times greater than 18 seconds at approximately 18 months post-implant. Devices displaying this behavior contain capacitors from specific component lots.

Patient Management Recommendations

The following recommendations apply to Micro Jewel II 7223 devices.

- As soon as possible, verify the charge time of each affected device either by scheduling a follow-up with the patient, or through review of the patient's medical records, if the patient's last follow-up was within the previous 3 months.
- If you identify any affected devices that have a charge time of 18 seconds or greater, replacement of the device is recommended. If the verified charge time is less than 18 seconds, at a minimum, quarterly follow-ups are recommended for those patients.

Status

Device performance related to this advisory continues to be within Medtronic's engineering projections and expectations. Patient management recommendations remain unchanged. Medtronic estimates that very few, if any, of the devices affected by this advisory remain active and in service.

Advisories continued

7273 GEM II DR 7229Cx GEM II VR Original Date of Advisory: February 11, 2000

Potential Weak Solder Connection

Product

Sixteen hundred (1,600) devices with potential for a weakened solder connection have been implanted worldwide. Medtronic estimates that this failure mode will affect less than 50 devices worldwide. Specific model and serial numbers of affected devices are available by calling US Technical Services at 1 (800) 723-4636.

IMPORTANT REMINDER:

Medtronic strongly advises physicians who have patients under their care affected by this issue to reprogram the PatientAlert feature "ON" without delay.

Advisory

Solder connections on a specific component may exhibit loss of integrity.

Affected devices have solder connection that may weaken over time and can result in loss of telemetry and device therapy output.

Patient Management Recommendations

- Program "Lead Impedance Out-of-Range" to ON within the PatientAlert feature. *Both pacing and defibrillation lead alerts must be enabled.*
- In the event of a device malfunction, the pacing or defibrillation lead impedance will be reported as outof-range – this will cause an activated PatientAlert tone to sound. The PatientAlert feature will check the lead impedances once each day.
- If the PatientAlert tone sounds, evaluate the device to determine the cause of the alert. If the device cannot be interrogated (no telemetry), then device replacement is recommended. If the device can be interrogated, it is unlikely the alert tone is due to this issue, and other potential causes for the PatientAlert tone should be investigated.

The PatientAlert parameter must be programmed ON for the remainder of the device life in order to detect any future occurrences of this failure mode.

Status

Device performance related to this advisory continues to be within Medtronic's engineering projections and expectations. Patient management recommendations remain unchanged. The devices affected by this advisory are nearing the end of their expected battery longevity.

7271 GEM DR ICDs

Original Date of Advisory: December 16, 1999

Potential Long Charge Times Due to Capacitor

Product

GEM DR devices implanted November 1997 -December 1998 (during the PMA clinical trial and early commercial release) can exhibit unformed charge times greater than 18 seconds, and formed charge times greater than 10 seconds, at approximately 18 months post-implant.

Advisory

Affected devices can exhibit unformed charge times > 18 seconds 12-24 months post-implant.

Devices displaying this behavior contain capacitors from specific component lots.

Patient Management Recommendations

The following recommendations apply to the GEM DR 7271 device.

- At normal scheduled follow-up, check the stored automatic capacitor formation time to ensure the charge time is in a range acceptable for each individual patient.
- If the charge time is greater than 14 seconds prior to battery elective replacement indicator (ERI), program the Automatic Capacitor Formation Interval to 1 month.

Note: Stabilization and/or reduction in charge times may take 3-6 months to become apparent after programming the formation to 1 month.

Status

Device performance related to this advisory continues to be within Medtronic's engineering projections and expectations. Patient management recommendations remain unchanged. Medtronic estimates that very few, if any, of the devices affected by this advisory remain active and in service.

Advisories continued

7227Cx GEM 7229Cx GEM II VR Original Date of Advisory: October 15, 1999

Potential Circuit Overload

Product

Model 7227Cx and Model 7229Cx Implantable Cardioverter Defibrillators supplied before October 15, 1999, with serial numbers ending in an "H." For example, PIPxxxxxH or PJJxxxxxH, where x is a variable numeric, may be affected. Specific model and serial numbers of affected devices are available by calling US Technical Services at 1 (800) 723-4636.

IMPORTANT REMINDER:

Medtronic strongly advises physicians who have patients under their care affected by this issue to reprogram the PatientAlert feature "ON" without delay.

Advisory

Manufacturing error in a small percentage of devices may cause circuit overload when AX ≥ B High Voltage energy is delivered via an integrated bipolar lead. GEM Model 7227Cx and GEM II VR Model 7229Cx devices with dedicated bipolar sensing leads are not affected by this issue. Devices affected may not be able to subsequently charge to full energy and experience "charge circuit timeout."

Patient Management Recommendations

- Assessment of all patients with the potentially affected devices implanted **AND** an integrated bipolar ICD lead such as the 6942 and 6945 should take place without delay.
- Reprogram polarity pathway to B ≥ AX for all cardioversion and defibrillation therapies.
- Confirm correct device function:
 - Perform a full energy charging sequence.
 - If "charge circuit timeout" is observed, contact your Medtronic representative.
 - If device charges normally, it has not been damaged and will function appropriately with polarity programmed $B \ge AX$.

Recent studies have demonstrated that DFTs are similar or lower in a $B \ge AX$ polarity pathway when compared to $AX \ge B$.

Devices implanted with functional dedicated bipolar leads such as the 6932, 6934S, 6936, 6943, and 6966 are not affected.

Status

Device performance related to this advisory continues to be within Medtronic's engineering projections and expectations. Patient management recommendations remain unchanged. The devices affected by this advisory are nearing the end of their expected battery longevity. Sigma Implantable Pulse Generators Original Date of Advisory: September 27, 1999

Manufacturing Issue

Product

The affected devices are limited to subset of Sigma pulse generators manufactured between July 5, 1999 and August 31, 1999. All affected devices were distributed outside the United States. Medtronic representatives provided a list of affected device serial numbers of this Implantable Pulse Generator.

Advisory

A manufacturing issue was identified which could result in a sudden loss of sensing or pacing output, under worst case conditions. The cause was isolated to a defined manufacturing time period, a specific manufacturing process, and a limited number of units distributed in various countries outside the United States.

Patient Management Recommendations

There is no patient monitoring or provocative testing that will predict the occurrence of this potential failure. If any of these devices have been implanted, you may wish to consider whether prophylactic replacement would be appropriate, especially in patients at high risk such as pacemaker dependent patients. However, individual patient circumstances and medical judgment should, as always, dictate patient care. If you choose to replace the device, Medtronic will provide a new device under the applicable warranty program.

Status

Device performance related to this advisory continues to be within Medtronic's engineering projections and expectations. Patient management recommendations remain unchanged. The devices affected by this advisory are beyond the midpoint of their expected battery longevity. 7227Cx GEM ICDs

Original Date of Advisory: April 2, 1999

Potential High Current Drain

Product

Affected devices can be identified by reviewing battery voltage: If the battery voltage is > 3.03 volts and it is at least 3 months post-implant, then the ICD is not affected. Model 7227Cx devices delivered after April 2, 1999 are not affected.

Advisory

High current drain in the electronic hybrid circuit causes premature battery depletion in affected devices. The high current drain occurred during manufacturing and has been traced to a specific component.

Patient Management Recommendations

Review battery voltage records for each 7227Cx patient.

- 1 If the battery voltage at implant was:
 - ≤ 3.07 volts or unknown, then bring the patient in for evaluation as soon as possible.
 - > 3.07 volts, then review the battery voltage at 3 months post-implant.
- **2** If the battery voltage at the 3 month follow-up is:
 - ≤ 3.03 volts, then contact your Medtronic representative for further evaluation.
 - > 3.03 volts, then no further action is required.

Status

All potentially affected implanted devices have been implanted for at least 3 months. No further action is required.

Advisories continued

Thera Implantable Pulse Generators Original Date of Advisory: February 18, 1997

Potential Integrated Circuit Failure

Product

One hundred seventy-seven (177) Thera Implantable Pulse Generators are affected. These have been identified by serial number and each respective physician has been notified. The models of the affected generators include 7940, 7941, 7942, 7950, 8940, 8941, 8942, and 8948. Specific model and serial numbers of affected devices are available by calling US Technical Services at 1 (800) 723-4636.

Advisory

These devices are susceptible to a sudden loss of telemetry, sensing, or pacing output functions.

The cause of the anomaly is a potential failure in one integrated circuit.

Patient Management Recommendations

There is no patient monitoring or provocative testing that will predict the occurrence of this anomaly. You may wish to consider prophylactic replacement of the device if your patient is at high risk, e.g., pacemaker dependent.

Status

Device performance related to this advisory continues to be within Medtronic's engineering projections and expectations. Patient management recommendations remain unchanged. The devices affected by this advisory are nearing the end of their expected battery longevity.

4504, 4504M CapSure Atrial Lead 4582 Target Tip Atrial Lead Original Date of Advisory: October 4, 1996

Lead Survival Below Expectations

Product

All Models 4504, 4504M, and 4582 Implantable Pacing Leads

Advisory

Lead survival probability is below expectations and is primarily associated with insulation degradation due to Metal Ion Oxidation (MIO).

Patient Management Recommendations

- Follow patients in accordance with Medicare Guidelines.
- Avoid the use of the AAI or AOO mode.
- During patient evaluation, give careful attention to lead performance such as:
 - Review patient ECG for indications of transient sensing and/or capture abnormalities.
 - Monitor in clinic for impedance less than
 250 ohms or a decrease of more than 30% from
 implant values (or an established baseline using
 telemetry) which would suggest lead failure.
- Consider the use of unipolar if the pulse generator has this capability.
- At the time of pacemaker system revision (e.g., normal pulse generator or ventricular lead revision), carefully evaluate lead integrity and patient status before choosing to reuse.

Status

Patient management recommendations remain unchanged. Laboratory analysis trends and engineering conclusions remain unchanged. According to System Longevity Study results, lead survival is estimated to be 66.1% at 8 years, 9 months.

Advisories continued

8446, 8448 Legend Plus IPGs

Original Date of Advisory: June 14, 1996

Potential for Improper Programming

Product

All Models 8446 and 8448 Implantable Pulse Generators

Advisory

Potential for improper acceptance of the programming of a rate responsive mode resulting in irregular rate intervals.

Patient Management Recommendations

The anomaly can be initiated only during the programming (or reprogramming) of the pacing system to a rate responsive mode. In the unlikely event that the anomaly occurs, reprogramming the pacing system to the desired mode should restore normal operation.

- New software has been developed that provides clinicians the ability to verify the proper programming of the rate responsive modes.
- As always, individual circumstances and medical judgment dictate patient care.

Status

Device performance related to this advisory continues to be within Medtronic's engineering projections and expectations. Patient management recommendations remain unchanged. The devices affected by this advisory are nearing the end of their expected longevity.

4004, 4004M CapSure Ventricular Lead 4082 Target Tip Ventricular Lead

Original Date of Advisory: October 8, 1993

Lead Survival Below Expectations

Product

All Models 4004/4004M and 4082 Implantable Pacing Leads

Advisory

Lead survival probability is below expectations due primarily to polyurethane insulation failure (MIO) and conductor fracture (associated with "subclavian crush").

Patient Management Recommendations

- Increase, as appropriate, the frequency of patient evaluation through in-clinic visits supplemented with transtelephonic and/or ambulatory monitoring; for example, consistent with Guideline I under Medicare Pacemaker Monitoring Guidelines (50-1 Cardiac Pacemaker Evaluation Services).
- During patient evaluations, give careful attention to lead performance such as:
 - Reviewing patient ECGs carefully for indications of transient sensing and/or capture abnormalities.
 - Monitoring in-clinic for impedances less than 300 ohms or a decrease of more than 30% from implant values (or an established baseline using telemetry) which would suggest lead failure.
 - Eliciting and thoroughly investigating any patient complaints suggestive of lead failure.

- Consider whether prophylactic replacement would be appropriate, especially in patients at high risk, such as pacemaker dependent patients.
- Carefully evaluate lead integrity when performing routine pulse generator replacements. Replace lead if
 - insulation breaches are observed.
 - lead impedance is less than 300 ohms or has decreased by more than 30% from implant values.
 - impedance or voltage threshold measurements vary significantly when multiple readings are taken.
 - if the risk of continued use outweighs the risk associated with implanting a new lead.
- As always, individual circumstances and medical judgment dictate patient care and frequency of follow-up.
- Consider lead replacement during normal pulse generator change-out. Carefully evaluate lead integrity and patient status before choosing to reuse.

Status

Patient management recommendations remain unchanged. Laboratory analysis trends and engineering conclusions remain unchanged. According to System Longevity Study results, lead survival is 50.7% at 10 years, 9 months.

Advisories continued

4012 Target Tip Ventricular Lead

Original Date of Advisory: September 26, 1991

Lead Survival Below Expectations

Product

All Model 4012 Implantable Pacing Leads

Advisory

Lead survival probability beyond 5 years is below expectations due primarily to polyurethane insulation failure (due to ESC and/or MIO) and conductor fracture (associated with "subclavian crush").

Patient Management Recommendations

Consider increasing frequency of monitoring (e.g., from quarterly to bimonthly or monthly). Consider the following activities as part of normal follow-up procedures:

- Monitor for significant changes in impedance which could be an indication of impending failure (pulse generator must have impedance telemetry capabilities).
- Review patient ECGs carefully for indications of transient sensing and/or capture abnormalities. This can be done using transtelephonic or in-clinic monitoring and/or using ambulatory monitoring.
- Elicit any patient complaints suggestive of lead failure and investigate thoroughly lead integrity/ performance characteristics following reports of patient complaints or symptoms using the above techniques.

- Consider whether prophylactic replacement would be appropriate in patients at high risk, such as pacemaker dependent patients.
- Evaluate carefully the integrity of the lead during routine pulse generator replacement before choosing to reuse. Specifically, Medtronic recommends placement of a new lead if:
 - insulation breaches are observed.
 - lead impedance is less than 300 ohms or has decreased by more than 30% from implant values.
 - electrical properties such as impedance and threshold vary significantly when multiple readings are taken.

As always, medical judgment must be used to establish the appropriate schedule and course of care for every individual, particularly pacemaker dependent or other patients at higher risk.

Status

Patient management recommendations remain unchanged. Laboratory analysis trends and engineering conclusions remain unchanged. The System Longevity Study results show 62.3% lead survival at 15 years, 9 months.

Advisories continued

Minix, Minix ST, Micro Minix IPGs

Original Date of Advisory: May 6, 1991

Potential Delayed Restoration of Permanent Settings

Product

All Models of the Minix, Minix ST, and Micro Minix families of Implantable Pulse Generators

Advisory

Possibility of delayed restoration of permanent pacing mode and parameters, after the magnet or programming head is removed under certain conditions.

Patient Management Recommendations

To eliminate any potential risk associated with temporary programming, depress the INTERROGATE KEY and verify successful interrogation before moving the programming head away from the pulse generator. The delay condition can also be terminated by repositioning the programming head and depressing the EMERGENCY VVI key.

Status

Device performance related to this advisory continues to be within Medtronic's engineering projections and expectations. Patient management recommendations remain unchanged. The devices affected by this advisory are nearing the end of their expected longevity.

Performance Notes

Interactions between Cardiac Pacing and Ventricular Arrhythmia Initiation.

Purpose of this Information

This article is intended to provide information for consideration when programming pacemaker operation in ICDs and pacemakers.

Background

Right ventricular pacing has been associated with increased risk of appropriate therapy for ventricular tachycardia (VT) and ventricular fibrillation (VF) in ICD patients.¹ Abrupt changes in ventricular cycle lengths (short-long-short, S-L-S) may precede initiation of VT/VF in some instances. S-L-S sequences may be permitted in all forms of cardiac pacing. The pause lengths depend upon pacing mode and lower rate programming.²⁻⁴ Because pauses may be associated with VT/VF initiation, pause suppression algorithms have been developed in ICDs. Although pause suppression may have utility in specific patients with repolarization abnormalities and pause dependent VT, it has not been shown to reduce arrhythmia incidence in the general ICD population.⁵ Conversely, S-L-S sequences may occur with ventricular pacing in a variety of ways, including atrial tracking of premature atrial contractions (PACs) or by terminating pauses with ventricular paced beats.6 In some patients, the ectopic depolarization pattern of a ventricular paced beat may be pro-arrhythmic, independent of pause timing. These observations have further enforced the desire to reduce unnecessary ventricular pacing.

Clinical Trial Observations

Medtronic-sponsored clinical trials were retrospectively analyzed to further understand pause-mediated (i.e., S-L-S) scenarios prior to VT/VF. S-L-S onset scenarios were observed in a minority of patients in all pacing modes. Pacemaker interactions prior to VT/VF are dependent on patient conditions, as well as the technical aspects of pacing operation (i.e., pacing mode, lower rate and AV interval). Because a very low frequency of ventricular pacing is observed during Managed Ventricular Pacing (MVP)⁷⁻⁹ or VVI 40¹⁰ pacing modes, the long interval tended to terminate with a ventricular sense. In DDD mode, the long interval tended to be terminated by a ventricular pace. Long intervals of > 1000 ms prior to VT/VF were rare in MVP mode. In these analyses, only an association between cardiac pacing and VT/VF initiation can be observed, causality cannot be established. The ongoing MVP (Managed Ventricular Pacing vs. VVI 40 Pacing) Trial, a 2-year, 1000-patient prospective, randomized trial in ICD patients may offer more insight into the frequency of VT/VF across pacing modes.11

Pacemaker Patients

In pacemaker patients, ventricular pacing has been associated with higher incidence of AT/AF and heart failure hospitalization.^{12,13} MVP provides atrial rate support while dramatically reducing ventricular pacing in patients with sinus node dysfunction and transient AV block.⁹ However, as stated in Medtronic reference manuals, depending upon the patient's intrinsic rhythm and conduction, MVP may allow ventricular cycle variation and occasional pauses of up to twice the lower rate. DDD pacing with long AV intervals may reduce ventricular pacing and may decrease the potential length of pauses compared to MVP. However, DDD with long AV interval programming does not appear to be as effective as AAI-based pacing modes at reducing ventricular pacing,^{13,14} may lead to endless loop tachycardia,^{14,15} and does not completely eliminate pauses. Also, in DDD mode, a higher programmed lower rate or activation of rate response can lead to an increase in AV conduction times and a higher percentage of ventricular pacing. The potential benefits of reducing ventricular pacing must be weighed against the potential for longer ventricular pacemaker mode and lower rate programming, particularly in the setting of frequent AV block and repolarization abnormalities due to congenital Long QT, electrolyte imbalances, and some medications which prolong QT.

Conclusion

Pacemaker operation may interact with VT/VF initiation in a variety of ways. The patient's heart failure status, arrhythmia substrate, medications, and the relative importance of maintaining ventricular synchrony vs. ensuring ventricular rate support must be weighed when choosing optimal hardware (ICD vs. pacemaker) and pacemaker programming (pacing mode, lower rate, etc.).

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AT500 Pacing System Follow-Up Protocol

Purpose of This Information

This article is intended to provide clinical guidance regarding follow-up practice and patient management when the AT500 battery voltage approaches the Elective Replacement Indicator (ERI) level of 2.6 volts.

Background

Many AT500 pacing systems are now reaching their ERI voltage level (2.6 volts). This is expected since the battery used has an approximate longevity of 5-6 years under normal conditions (100% DDD pacing, 3 volts, 0.4 ms).

Technical Services has received reports of battery voltage levels below End-of-Life (EOL of 2.2 volts) where EGM prestorage is programmed ON, or higher outputs and/or pacing rates are necessary. It is important for physicians and allied professionals to understand battery depletion characteristics between ERI and EOL so that they, in turn, can understand how this affects management of follow-up visits for the AT500 as this device nears the end of its expected longevity.

AT500 Battery and Longevity Information

In contrast to other IPGs, the AT500 does not change its mode, stimulation rate, or any other parameter when the battery voltage drops below the ERI level of 2.6 volts (with or without magnet applied). The Threshold Margin Test (TMT) is also not available.

Therefore, it is not possible to perform trans-telephonic assessment of AT500 battery status. This must be done during an in-clinic follow-up session. A warning will be displayed on the Quick Look screen at the beginning of a programmer (follow-up) session when the ERI battery level



AT500 Battery Depletion Curve

occurs. The measured battery voltage will also appear on the programmer display and on printouts.

Battery depletion curves at **common parameter settings** are shown in Figure 1, with special focus on device longevity when programming EGM pre-storage ON or OFF.

Medtronic's review of ongoing AT500 battery life test data matches our original longevity modeling and so meets our expectations. However, when using longer durations between follow-up periods (> 3 months), clinicians should consider the following in setting their remaining longevity expectations.

- Enabling the "EGM Pre-storage On" capability will increase current and reduce device longevity by approximately 9 days for each month pre-storage is ON.
- Longevity decreases with an increase in pacing rate, an increase in pacing amplitude or pulse width, a decrease in pacing impedance, a higher ratio of paced to sensed events, or extended use of the Atrial Preference Pacing, EGM pre-storage, or Holter Telemetry features.

Recommendations

Follow-up frequency should always be accelerated as devices reach ERI voltage levels to ensure device explant/ replacement occurs prior to End-of-Life voltage levels. With the wide variety of follow-up schedules being used, Medtronic recommends a 3-month follow-up frequency for the AT500 pacing systems. This is particularly important for patients in whom EGM pre-storage is programmed ON, or higher outputs and/or pacing rates are necessary.

Figure 1

AT500 battery depletion curve for common parameter settings of DDDR, LR 70 ppm, UR 120 ppm, 100% pacing, Atrial – 2 V, 0.4 ms, 600 ohms, Ventricle – 2 V, 0.6 ms, 900 ohms, and EGM Pre-storage ON versus OFF.

Insertion of the Lead into the Device

The implantable system consists of a pulse generator and at least 1 lead. The system operation depends on proper electrical and mechanical operation. With the advent of internationally recognized connector standards the challenge of ensuring proper mechanical fit between the lead and device connectors has been simplified, although the international connector standard does not address all aspects of the procedure for connecting a lead to the device.

If the lead connector is not fully installed, oversensing may result as described in the connector problems section of the technical article, "Clinical Management of High Voltage Lead System Oversensing."

Performing the following steps can be used for each lead connection during the implant procedure.

 Insert the torque wrench into the appropriate setscrew. For easier lead insertion, insert the lead closest to the device first.

- **2** Look down the connector port to verify that the port is not obstructed. If the port is obstructed, retract the setscrew to clear the bore. Take care not to disengage the setscrew from the connector block.
- **3** Push the lead into the connector port until the lead pin is clearly visible beyond the setscrew block.
- **4** Hold the lead in position while tightening the setscrew until the torque wrench clicks.
- 5 Tug gently on the lead to confirm a secure fit.

Current publications may provide additional information on implant procedures used by others, e.g., radiographic evaluation of the terminal pin beyond the terminal post.¹

¹ Pickett RA III, Saavedra P, Ali MF, Darbar D, Rottman JN. Implantable cardioverter-defibrillator malfunction due to mechanical failure of the header connection. *J Cardiovasc Electrophysiol.* September 2004;15(9):1095-1099.



GEM II DR/VR and GEM III DR/VR/AT ICD Battery Discharge Behavior

Medtronic manufactures and utilizes a unique Lithium/Silver Vanadium Oxide battery in the GEM II/III family of ICDs. This battery has a distinctive voltage discharge with two regions of constant voltage at 3.2 volts and 2.6 volts.

The battery discharge curve (see curve below) is characterized by a significant decrease in the battery voltage approaching Middle-of-Life (MOL), followed by a plateau (MOL to ERI) where the battery voltage remains around 2.6 volts. The transition to the plateau could be easily misinterpreted as the battery rapidly approaches ERI, which occurs at 2.55 volts, when the battery may in fact have several years remaining until ERI.

It is important to understand that this battery voltage decrease in the GEM II/III family of ICDs is a normal

characteristic of the battery function in these devices and should not create a need for additional follow-up or monitoring.

As a general rule of thumb, the longevity from implant to MOL = MOL to ERI.

The design of the recently released Marquis battery has been modified to present a more linear battery discharge curve.

If you are concerned about early ERI in your patient's device, you can utilize the battery trend measurements stored in the save-to-disk file, which can be accessed and interpreted through the Medtronic Technical Services at 1 (800) 723-4636.



GEM II/III Battery Discharge Curve

General Follow-Up and Replacement of ICD Leads

The human body is a hostile environment for an implantable device. Typically, the human body will attack and attempt to isolate or destroy any foreign object. Additionally, implanted leads are subjected to continuous flexural and torsional stresses associated with cardiac activity, body motion, and patient anatomy, which can adversely impact lead integrity.

In this environment, pacemaker and defibrillation leads cannot be expected to last forever. Unlike implantable cardioverter defibrillators (ICDs), a lead's longevity cannot be predicted nor are there simple indicators that a lead is approaching the end of its service life. The determination that a lead may be approaching end of service life requires follow-up of the chronically implanted lead and thorough evaluation of lead integrity at ICD replacement.

Follow-Up of Chronically Implanted Leads

The frequency of follow-up for ICD patients will depend on a number of factors including the patient's medical condition, ICD system implant time, hospital/clinic follow-up practice, and Medicare guidelines. In all cases, it is important to assess the functionality of the ICD system and the integrity. For newly implanted leads, it is beneficial to establish a baseline of chronic performance parameters once the lead has stabilized, generally within 6 to 12 months after implant. These performance parameters should include pacing and sensing thresholds and impedance. During routine patient follow-up, these procedures can be used to evaluate lead integrity.

- Measure pacing and sensing threshold and compare to the chronic baseline. Significant increases or decreases may be indicative of lead failure, dislodgement, perforation, exit block, etc.
- Measure pacing impedance where possible and compare to the chronic baseline. Decreases of 30% or more or pacing impedances below 200-250 ohms may be indicative of insulation failure. Sudden and significant increases in pacing impedance may be indicative of conductor fracture.
- High voltage lead circuit impedance should be between 10-75 ohms at system implant. Chronic measurements below 10 and above 200 ohms may be indicative of high voltage lead circuit failure.
- Carefully review ECGs or the non-sustained detection log on Medtronic ICDs for indications of pacing and/or sensing abnormalities such as oversensing, undersensing, and loss of capture.
- Elicit and investigate any patient complaints/symptoms which may be suggestive of potential lead failure.

Where routine follow-up indicates, additional tools should be used to further evaluate performance. Tools include radiographic data, ICD electrograms, ICD PatientAlert and performance information from the Tachyarrhythmia Chronic Systems Study (TCSS).

The final decision on the functional integrity and continued use of an implanted lead must be a matter of medical judgment based on these factors as well as specific patient conditions.

General Criteria for Lead Replacement

The evaluation of a chronically implanted lead is an important part of the decision to continue to use the lead with a new ICD. However, these results alone do not necessarily predict the future integrity of that lead. With the expected longevity of today's ICDs varying between approximately 5 and 10 years, a physician replacing a device should consider a number of factors, including those listed below.

Factors which should be considered in a decision to replace or continue to use include:

- Pacing and sensing thresholds should be evaluated for the potential to maintain acceptable levels.
- Pacing impedance should be measured. Bear in mind that pacing impedance below 250 ohms results in excessive battery current drain, which may seriously compromise ICD longevity, regardless of lead integrity.
- The physical appearance of the lead should be examined for insulation cracks, breaches, or other indications of lead wear or degradation.
- Medtronic Chronic Systems data should be referenced. Actuarial survival of the lead and the observed lead failure mechanisms are specific factors to consider. Use of a new lead should be considered if failure mechanisms suggest an increased time dependency as suggested in the shape of performance curve for the specific lead model.
- Current publications may provide additional information on the clinical management of leads.^{1,2} Ultimately, the decision to replace an implanted lead involves medical judgment.
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Performance Notes

Clinical Management of High Voltage Lead System Oversensing

Appropriate sensing by an ICD system refers to the sensing of cardiac events that may or may not require therapy delivery. ICD systems must sense relatively large QRS complexes while avoiding sensing of smaller T-waves, yet continue to sense often small variable amplitude ventricular fibrillation. Thus ICD systems attempt to dynamically adjust sensing of electrical events, and discriminate between them based on detection algorithms and programmed settings.

Inappropriate sensing can occur when an ICD system classifies events of non-cardiac origin as QRS/VF events, or senses and counts T- and far field P-waves as ventricular depolarizations. This is often referred to as "oversensing," and may result in delivery of inappropriate high voltage therapies. This is due, in part, to the desire to err on the side of delivering life-saving high voltage therapy rather than withholding it. Thus, an ICD system which is experiencing oversensing issues will continue to deliver therapeutic shocks as required, but may also subject the patient to unnecessary shocks.

Oversensing can be difficult to manage, in that the precipitating cause of the oversensing can be problematic to isolate. Oversensing can be caused by many factors, including myopotentials/far field sensing, electromagnetic interference, T-wave sensing, connector issues, incomplete conductor fractures, and insulation breaches. While the individual physician must exercise medical judgment in determination of appropriate clinical management of ICD systems, the chart below may assist in the process of causal factor differentiation and possible intervention.

Phenomenon	Causal Factors	Characteristics	Management/Comments
Myopotentials/ Far Field Sensing	Diaphragmatic muscle potentials in breathing, wide tip-ring (coil on integrated bipolar leads) spacing.	Nonphysiological sensed event on EGM, which may confuse detection potentially resulting in false positive shocks.	Check R-waves for deterioration. Reprogram sensitivity. Try repositioning lead. Consider change- out to true bipolar lead, or if true bipolar lead in use, one with closer tip-ring spacing than current lead.
EMI (Electro-Magnetic Interference)	Arc welders, electrical generators, store walk-through security scanners, poorly insulated electrical equipment.	Multiple and consecutive short intervals (< 140 ms) independent of underlying sinus beats. Associated with proximity to the EMI source.	Avoid EMI areas. True bipolar leads less susceptible.
T-wave Sensing	Drugs, ischemic tissue, exercise, long QT syndrome, electrolyte imbalance.	Sense markers seen on EGM related to T-wave. False positive detection.	Check for R-wave deterioration and characteristics. If R-wave > 3.0 mV, reprogram sensitivity. If R-wave < 3.0 mV, reposition/replace lead. Address causal factor (e.g., drugs lif appropriate/medically viable]).
Connector Problems	Loose setscrew, cross-threaded setscrew, incomplete lead insertion into header.	This is an acute phenomenon seen within 6 months of implant (usually sooner).	Requires invasive check of connections. May be reproducible with pocket manipulation.
Incomplete Conductor Fracture	One or more filars of a multifilar conductor fracturing while leaving enough filars intact to provide a conduction circuit.	Characterized by chaotic oversensing related to motion of the fracture site.	Check EGMs and x-rays. Manipulate lead at suspected fracture site if possible as a provocative test. If confirmed, replace lead.
Lead Insulation Breach	Cuts, tears, metal ion oxidization, abrasion, cold flow, environmental stress cracking.	Characterized by cyclical and/or erratic, intermittent, spontaneous oversensing; often post-pace or post-shock can cause false positives.	Replace lead. If acute, usually secondary to implant damage/ replacement damage. If late, material characteristic.

Technical Services is available at all times to advise clinicians in the troubleshooting and management of Medtronic products. For assistance in the United States, please call 1 (800) 723-4636. In other countries, please contact your local Medtronic representative.

Tests and Observations for Clinical Assessment of Chronic Pacing Leads

Test/Observation	Possible Insulation Failure	Possible Conductor Failure	Possible Other System Failure	Affect on Test/ Observation
Pacing Impedance (Telemetered or Measured Invasively)	Sudden and Significant Decrease	Sudden and Significant Increase	Dislodgement. Perforation. Electrolyte Imbalance. Improper IPG/Lead Connection.	. Decrease .Increase or Decrease .Increase or Decrease . Increase or Decrease
Pacing Thresholds (Telemetered/Programmed or Measured Invasively)	Sudden and Significant Increase Especially in Bipolar System	Sudden and Significant Increase	Dislodgement. Exit Block. Infarct at Electrode Site. Perforation. Improper IPG/Lead Connection.	. Increase . Increase . Increase . Increase . Increase
Electrograms (Telemetered or Measured Invasively)	Sudden and Significant Decrease in Amplitudes and/or Slew Rates for P- and/or R-Waves	Sudden and Significant Decrease or Disappearance of Amplitudes and/or Slew Rates for P- and/or R- Waves	Dislodgement. Perforation Infarct at Electrode Site Electrolyte Imbalance Improper IPG/Lead Connection.	. Decrease . Decrease . Decrease . Decrease . Decrease
Waveform Analysis (Oscillographs of Pacer Artifact from ECG Electrodes)	Sudden Increase in Ratios of Leading-Edge Voltages to Trailing-Edge Voltages (i.e., over 25% increase)	Intermittent or No Pacer Artifacts (Even in Asynchronous Mode)	Improper IPG/Lead Connection	Intermittent or No Pacer Artifacts (Even in Asynchronous Mode)
Radiographs (Post-Implant, Recent, Current)	Not Discernible	Visual Observation of Conductor/Connector/ Electrode Fracture (Sometimes Discernible)	Dislodgement or Perforation. Improper IPG/Lead Connection.	Sometimes Discernible
Visual Inspection (Invasive)	Insulation Breach and/or Degradation, or Ligature Cut-Through	Not Easily Discernible	Connector Defect or Connector Pulled Apart. Improper IPG/ Lead Connection.	Sometimes Discernible
Pectoral Muscle Stimulation	Sudden Onset Especially in Bipolar System		Connector Defect in Bipolar or Unipolar. Hypersensitivity to Unipolar Pulse Generator Can. Anti-Stim Coating or Protection Deficient.	
Phrenic Nerve/ Diaphragmatic Stimulation	Sudden Onset in Bipolar or Unipolar Systems		Perforation or Displacement of Atrial Lead (Phrenic Nerve)	
Pacemaker ECG Stimulus Artifact Size and Morphology Change (May Not Be Possible with Digital ECG)	Sudden Onset and Significant Change, Especially in Bipolar System (Increase in Size)	Sudden Changes, Usually a Decrease in Size	Perforation or Dislodgement. Connector Defect. Improper IPG/Lead Connection.	Sometimes Discernible
Oversensing (Intermittent or Continuous)	Sudden Onset, Especially in Bipolar Systems		Physical Contact between the Electrode(s) on the Lead and that of Another Lead. Inappropriate IPG Parameter Setting. Improper IPG/Lead Connection.	Sometimes Discernible
Undersensing (Intermittent or Continuous)	Sudden Onset in Either Unipolar or Bipolar Systems	Sudden Onset in Either Unipolar or Bipolar Systems	Dislodgement or Perforation. Infarct at Electrode Site. Electrolyte Imbalance. Inappropriate IPG Parameter Setting. Improper IPG/Lead Connection.	Sometimes Discernible
Loss of Capture	See "Pacing Thresholds" Above	See "Pacing Thresholds" Above	See "Pacing Thresholds" Above	

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