



# CARDIAC RHYTHM DISEASE MANAGEMENT

## Product Performance Report

*Important Patient Management Information for Physicians*

**2007** First Edition  
Issue 56



# A Message from the Vice President

Physicians are the foundation of our Quality efforts. For many years, Medtronic has involved independent physicians in our quality reporting process. Building on this model of manufacturer and physician collaboration, the Heart Rhythm Society (HRS) has now established formal guidelines for our entire industry. In full support of HRS recommendations, I am pleased to report that our Independent Physician Panel has recently convened and reviewed this 56th issue of Medtronic's Product Performance Report. We welcome and appreciate their valued insight, direction, and dedicated support.

In this issue, you will find new articles and data explaining how we estimate and perform relative to device battery longevity and ICD and CRT-D charge times. By striving to meet your expectations, we hope to continue to improve in these areas with each new device. In a third party study published in the October 2006 issue of *Pacing and Clinical Electrophysiology*<sup>1</sup>, Medtronic was the only manufacturer whose devices met and even exceeded our longevity estimates. Since 1996, we have focused on charge time performance and have shown a progression toward shorter mean charge times and less variation of these charge times over the battery life of a device. We hope this added information will be helpful.

Our mission since 1960 has been "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." Your participation in our quality process is valued and appreciated. Medtronic tests and evaluates returned product to measure and report the performance of our devices and improve our technologies. Please contact CRDM Returned Product Quality at 1 (800) 328-2518, extension 44800 or ask your local Medtronic representative to help facilitate the return of explanted Medtronic devices.

We also welcome your collaboration, insight, and recommendations. Please contact our Technical Services Department at 1 (800) 723-4636 with your feedback, comments, and any questions.

With appreciation and warm regards,



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

<sup>1</sup> Senaratne J, Irwin ME, Senaratne MP. Pacemaker longevity: Are we getting what we are promised? *Pacing Clin Electrophysiol*. October 2006;29(10):1044-1054.

# Contact Information

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

## US Technical Services Department

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

## International Technical Centers

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

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](mailto:tim.smith@medtronic.com)

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

*Outside the United States:*  
Your Medtronic representative or international technical center at the number above.

*Within the United States:*  
Your Medtronic representative or  
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](mailto:crdm.returnedproduct@medtronic.com)

## Editorial Staff

### Editor

Reggie Groves, *Vice President, CRDM Quality and Regulatory*

### Authors

Timothy Smith, *Senior Principal Product Performance Engineer, CRDM, Trending and Data Analysis*  
Sheri Halverson, *Senior Clinical Trial Leader, CRDM*  
Hongyan Qiao, *Statistician, CRDM*  
Tim Hamann, *Graphic Designer, CRDM*

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This report is available online at  
[www.CRDMPPR.medtronic.com](http://www.CRDMPPR.medtronic.com)

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### New Products

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Concerto CRT-D  
Sensia  
Versa  
Virtuoso ICD

# Introduction

**All product performance reports are not created equal. For over 20 years, Medtronic has monitored performance via both returned product analysis and multicenter clinical studies.**

This Product Performance Report (PPR) presents device survival estimates, advisory summaries, performance notes, and other information pertinent to assessing the performance of Medtronic implantable pulse generators (IPGs), implantable cardioverter defibrillators (ICDs), Cardiac Resynchronization Therapy (CRT) devices, 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 representative of worldwide performance.

## Survival Estimates

Medtronic Cardiac Rhythm Disease Management (CRDM) uses both returned product analysis and multicenter clinical studies to monitor performance.

Medtronic, like other companies, monitors CRT, ICD, and IPG device performance using returned product analysis. We also monitor CRT, ICD, and IPG device performance using an active multicenter clinical study. Medtronic CRDM is unique in the industry in that we track CRT, ICD, and IPG 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 CRT, ICD, and IPG devices are based on returned product analysis. This approach is suitable because a significant number of explanted generators are returned for analysis.

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

Survival estimates for leads are based on clinical observations recorded via Medtronic 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 CRT, ICD, and IPG 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.

## 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 summaries of all advisories applicable to the performance of the products included in the report. An advisory is added to the report when any product affected by the advisory remains in service and at risk of experiencing the behavior described in the advisory. The advisory will remain in the report until Medtronic estimates no product affected by the advisory remains active, or the risk of experiencing the behavior described in the advisory has passed.

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

## 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.

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 explanted product 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 devices 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 or lead ceases to operate within performance limits. The length of time from implant to the event is recorded for each individual device and lead in the *population sample*. The population sample for CRT, ICD, and IPG devices is made up of patients whose devices are registered as implanted in the United States. For leads, the population sample is the patients enrolled in 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 devices 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 CRT, ICD, and IPG Device Performance* (page 9) and *Method for Estimating Lead Performance* (page 79).

continued

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.

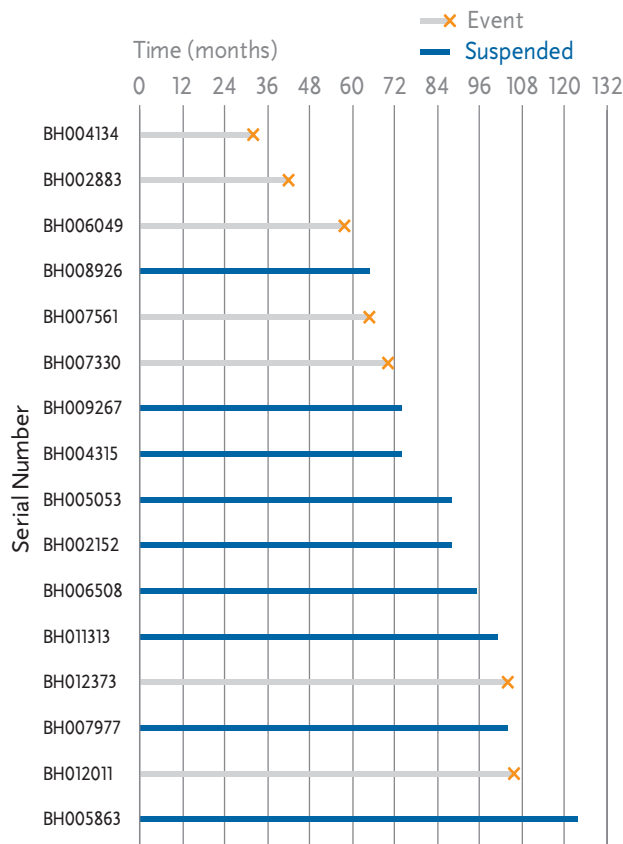


Figure 1 illustrates 16 patients who have implanted devices. The first patient’s device (serial number BH004134) operated within performance limits for 32 months. At that time an event occurred. The fourth patient’s device (serial number BH008926) did not have an event but is suspended, perhaps because 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 under-estimates the sample size because 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 (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 (E)*. This number can be interpreted as the estimated rate at which events **do not** occur in the time interval.

continued

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.

**Table 1** Life Table for Figure 1

	A	B	C	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

*Definitions:*

A	B	C	D	E	F	G
Number Entered	Number Suspended	Number of Events	Effective Sample Size	Proportion with Event	Interval Survival Probability	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

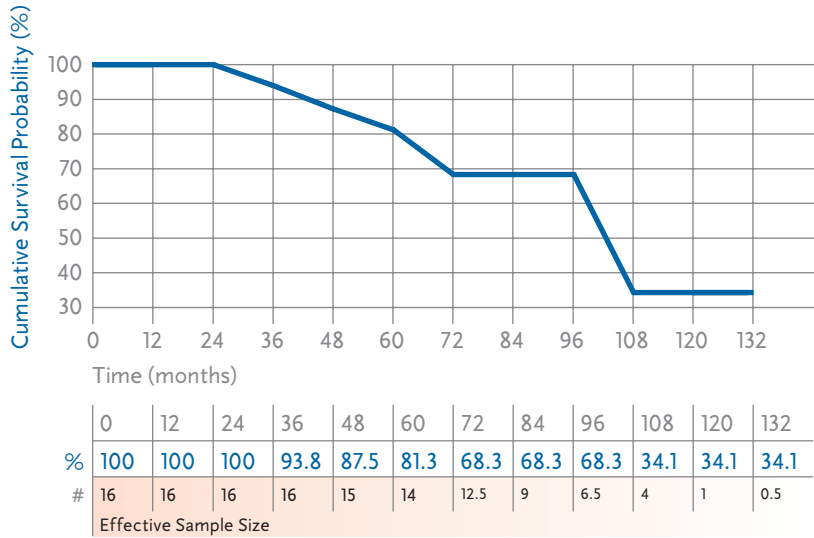
*Cumulative Survival Probability* (G) is the estimate of the unconditional probability of surviving to the end of the interval. It is computed by multiplying the *Interval Survival Probability* (F) by the previous interval's *Cumulative Survival Probability*. The probability of surviving to 132 months 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.

continued



**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. The larger the effective sample size, the more confident the estimate. A confidence interval can be calculated to assess the confidence in an estimate. In the Product Performance Report, Medtronic provides a 95% confidence interval. This can be interpreted as meaning that 95% of the time, the true survival of the device will fall somewhere in the interval.

**Survival Curves in the Product Performance Report**

Since the survival estimate can become very imprecise with small effective sample sizes, Medtronic truncates the survival curve when the effective sample size is less than 100 for CRTs, ICDs, and IPGs, and when the number entered is less than 50 for leads. The survival charts in the Product Performance Report show the effective sample size for each year interval where Medtronic has experience. When the effective sample size reaches 100 for CRTs, ICDs, and IPGs or when the number entered reaches 50 for leads, the next data point is added to the survival curve.

Although the report provides tabular data in one-year intervals, the curves are actually computed and plotted using one-month intervals (for CRT, ICD, and IPG devices) 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<sup>1</sup>

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

# Method for Estimating CRT, ICD, and IPG Device 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.

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

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**

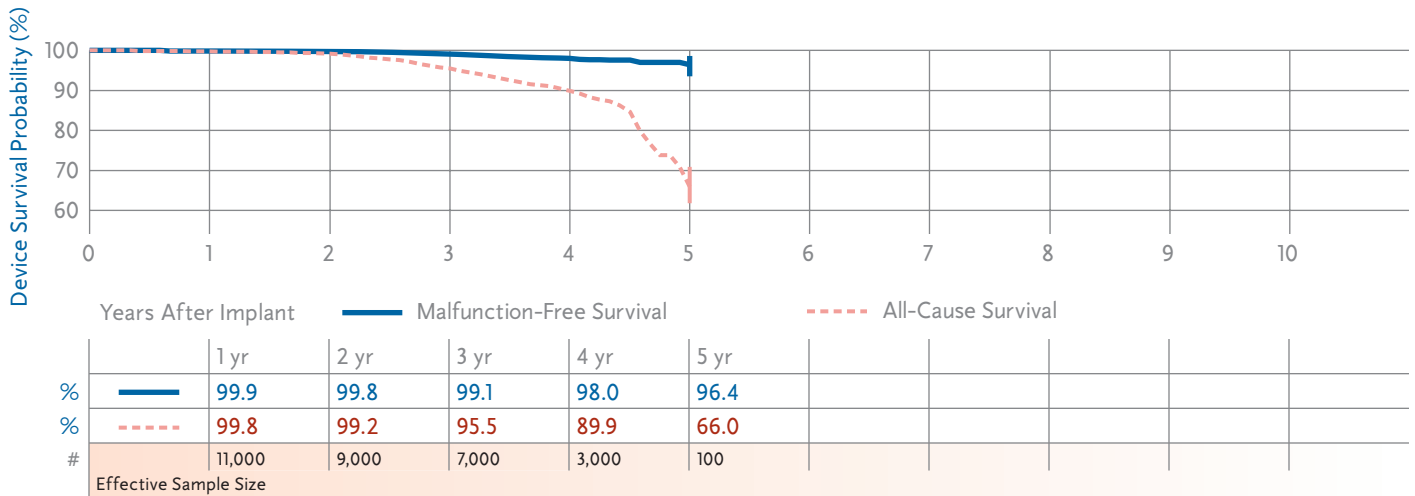
Devices are at times removed from service for reasons other than device malfunction or battery depletion. Examples are devices removed from service due to non-device related patient mortality and devices removed due to changes in the patient's medical condition. Because an accurate estimate of device 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**

Product Characteristics

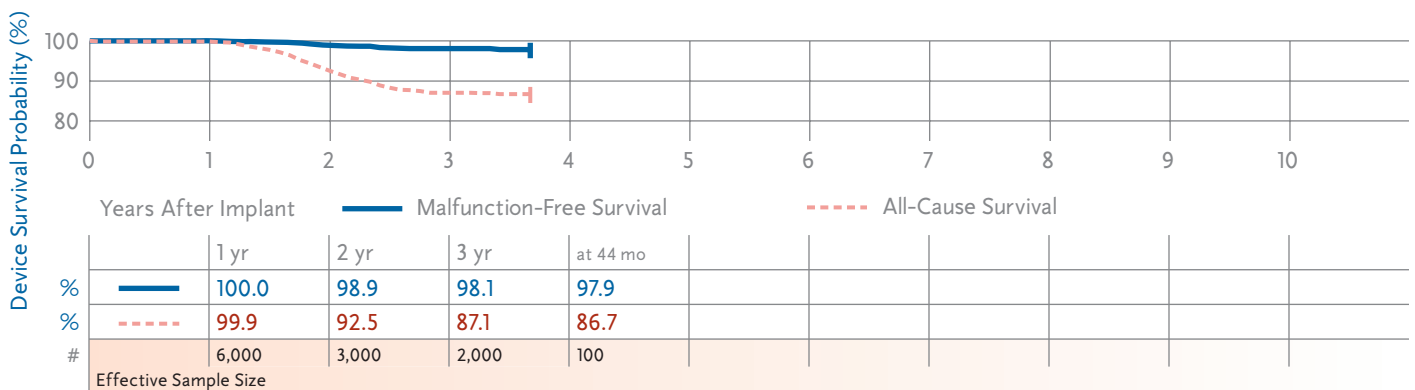
US Market Release	Jul-02	NBD Code	VVED
Registered US Implants	13,000	Serial Number Prefix/X-ray ID	PJP
Estimated Active US Implants	5,000	Max Delivered Energy	34 J
Normal Battery Depletions	261	Estimated Longevity	<a href="#">See page 19</a>
Malfunctions	153		
Therapy Function Not Compromised	140		
Therapy Function Compromised	13		
Advisories	None		



**7277 InSync Marquis**

Product Characteristics

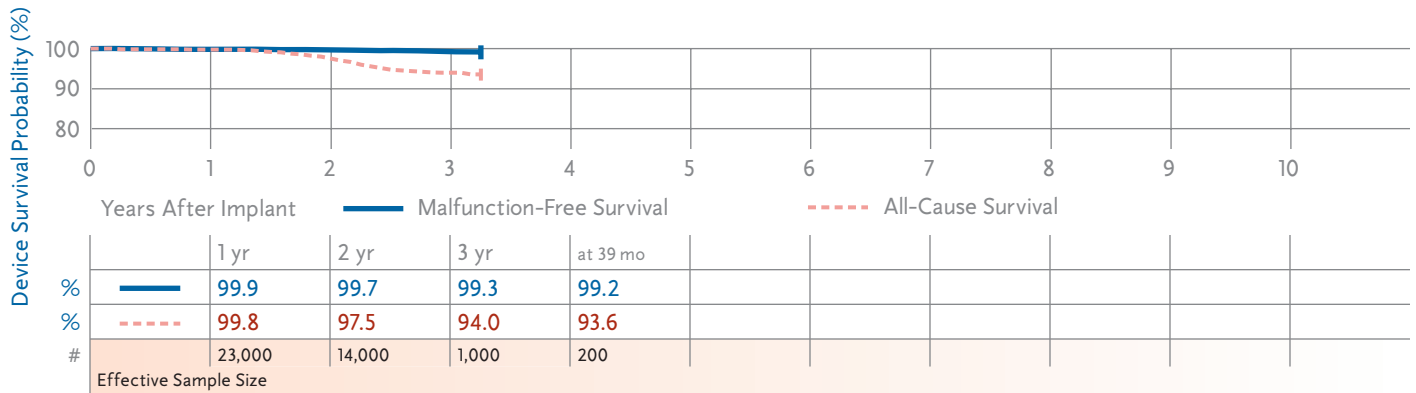
US Market Release	Mar-03	NBD Code	VVED
Registered US Implants	7,000	Serial Number Prefix/X-ray ID	PLT
Estimated Active US Implants	2,000	Max Delivered Energy	30 J
Normal Battery Depletions	175	Estimated Longevity	<a href="#">See page 19</a>
Malfunctions	69 (8 related to advisory)		
Therapy Function Not Compromised	60 (0 related to advisory)		
Therapy Function Compromised	9 (8 related to advisory)		
Advisories	1 <a href="#">see page 156</a> – 2005 Potential Premature Battery Depletion Due to Battery Short		



**7289 InSync II Marquis**

Product Characteristics

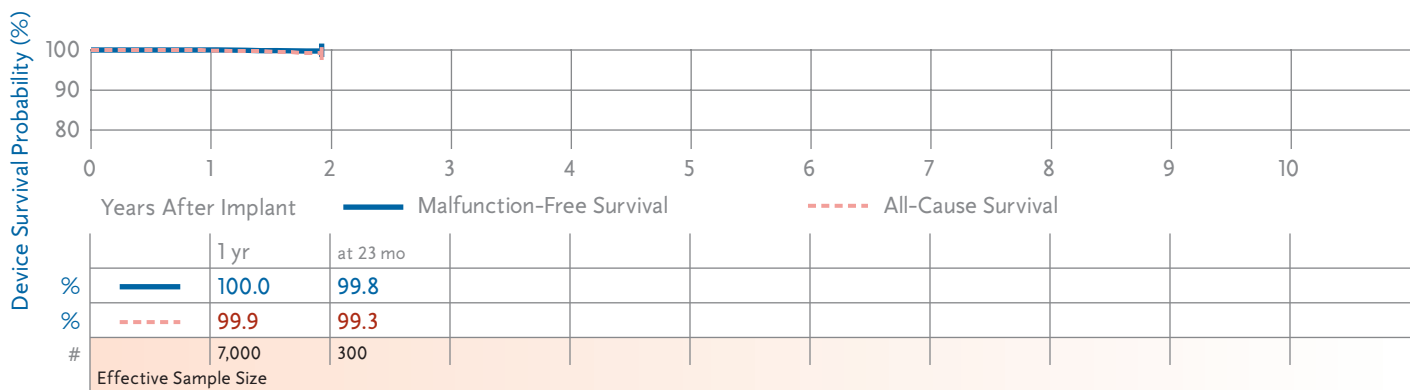
US Market Release	Jul-03	NBD Code	VVED
Registered US Implants	28,000	Serial Number Prefix/X-ray ID	PRJ
Estimated Active US Implants	15,000	Max Delivered Energy	30 J
Normal Battery Depletions	315	Estimated Longevity	<a href="#">See page 19</a>
Malfunctions	87 (5 related to advisory)		
Therapy Function Not Compromised	64 (0 related to advisory)		
Therapy Function Compromised	23 (5 related to advisory)		
Advisories	1 <a href="#">see page 156</a> – 2005 Potential Premature Battery Depletion Due to Battery Short		



**7297 InSync Sentry**

Product Characteristics

US Market Release	Nov-04	NBD Code	VVED
Registered US Implants	9,000	Serial Number Prefix/X-ray ID	PRK
Estimated Active US Implants	7,000	Max Delivered Energy	35 J
Normal Battery Depletions	10	Estimated Longevity	<a href="#">See page 19</a>
Malfunctions	7		
Therapy Function Not Compromised	6		
Therapy Function Compromised	1		
Advisories	None		

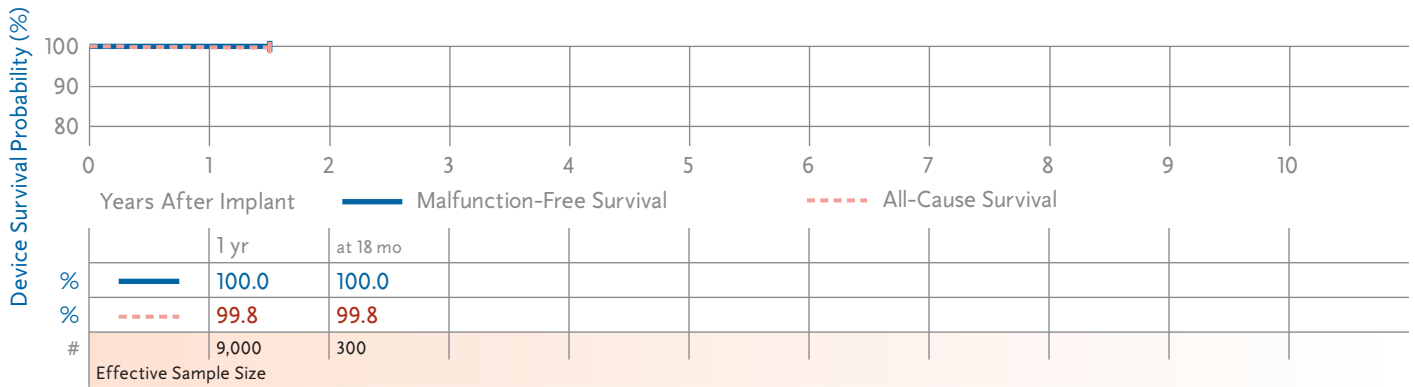


**7299 InSync Sentry**

Product Characteristics

US Market Release	Apr-05
Registered US Implants	28,000
Estimated Active US Implants	25,000
Normal Battery Depletions	5
Malfunctions	8
Therapy Function Not Compromised	5
Therapy Function Compromised	3
Advisories	None

NBD Code	VVED
Serial Number Prefix/X-ray ID	PRK
Max Delivered Energy	35 J
Estimated Longevity	<a href="#">See page 19</a>

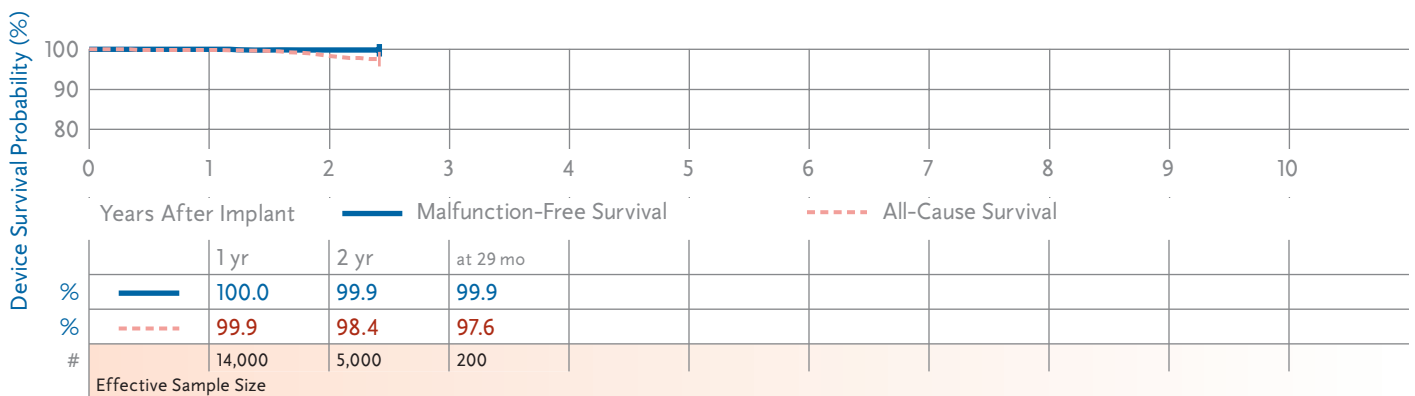


**7303 InSync Maximo**

Product Characteristics

US Market Release	Jun-04
Registered US Implants	17,000
Estimated Active US Implants	13,000
Normal Battery Depletions	64
Malfunctions	16
Therapy Function Not Compromised	13
Therapy Function Compromised	3
Advisories	None

NBD Code	VVED
Serial Number Prefix/X-ray ID	PRL
Max Delivered Energy	35 J
Estimated Longevity	<a href="#">See page 19</a>

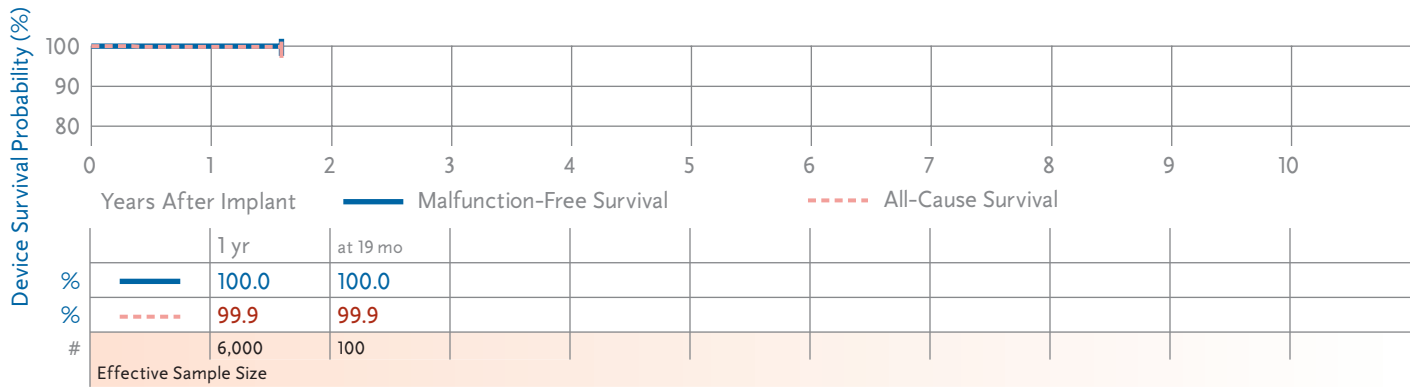


**7304 InSync Maximo**

Product Characteristics

US Market Release	Apr-05
Registered US Implants	14,000
Estimated Active US Implants	12,000
Normal Battery Depletions	3
Malfunctions	3
Therapy Function Not Compromised	2
Therapy Function Compromised	1
Advisories	None

NBD Code	VVED
Serial Number Prefix/X-ray ID	PRL
Max Delivered Energy	35 J
Estimated Longevity	<a href="#">See page 19</a>

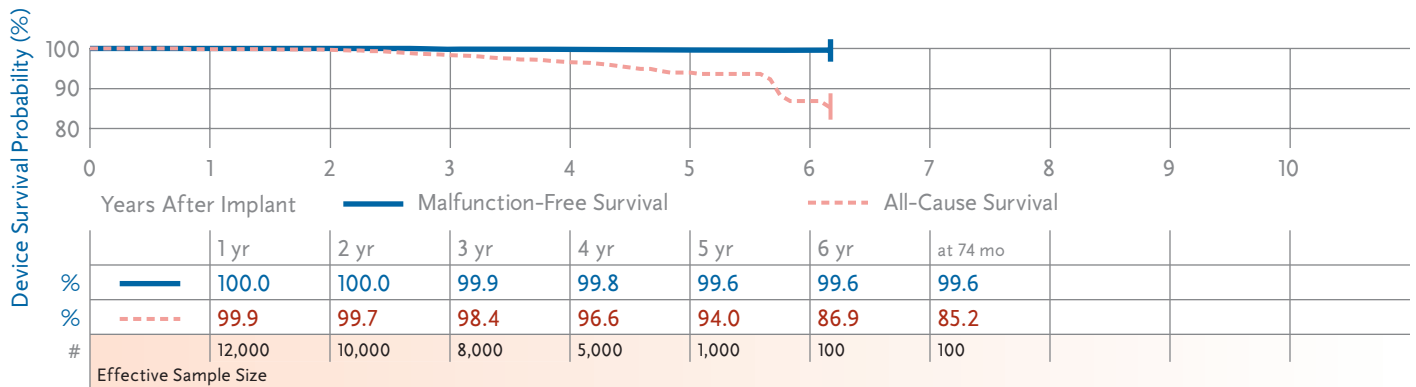


**8040 InSync**

Product Characteristics

US Market Release	Aug-01
Registered US Implants	15,000
Estimated Active US Implants	6,000
Normal Battery Depletions	161
Malfunctions	20
Therapy Function Not Compromised	5
Therapy Function Compromised	15
Advisories	None

NBG Code	DDDR
Serial Number Prefix/X-ray ID	PIN
Estimated Longevity	<a href="#">See page 19</a>



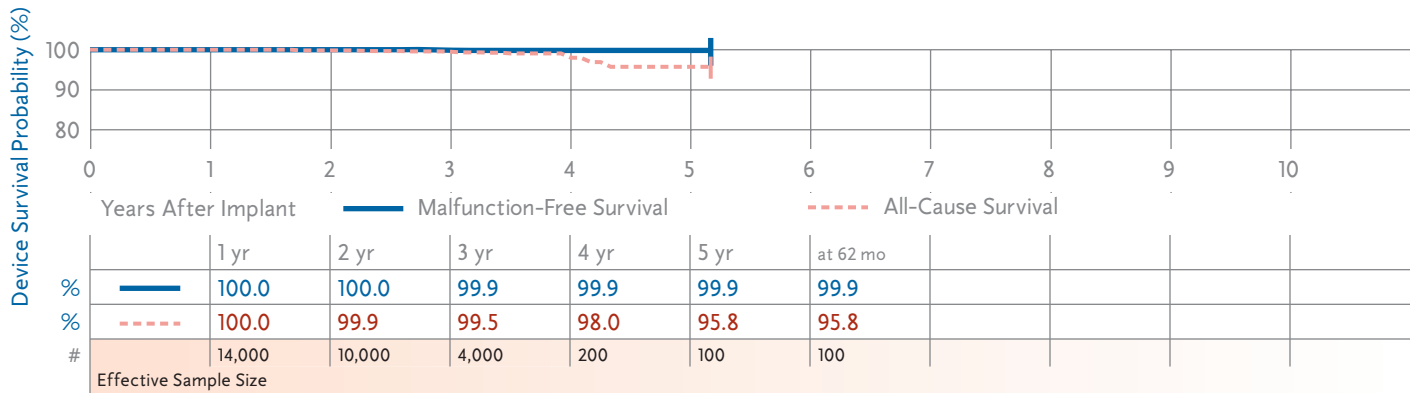


**8042 InSync III**

Product Characteristics

US Market Release	Feb-03
Registered US Implants	21,000
Estimated Active US Implants	14,000
Normal Battery Depletions	22
Malfunctions	5
Therapy Function Not Compromised	2
Therapy Function Compromised	3
Advisories	None

NBG Code	DDDR
Serial Number Prefix/X-ray ID	PKF
Estimated Longevity	<a href="#">See page 19</a>

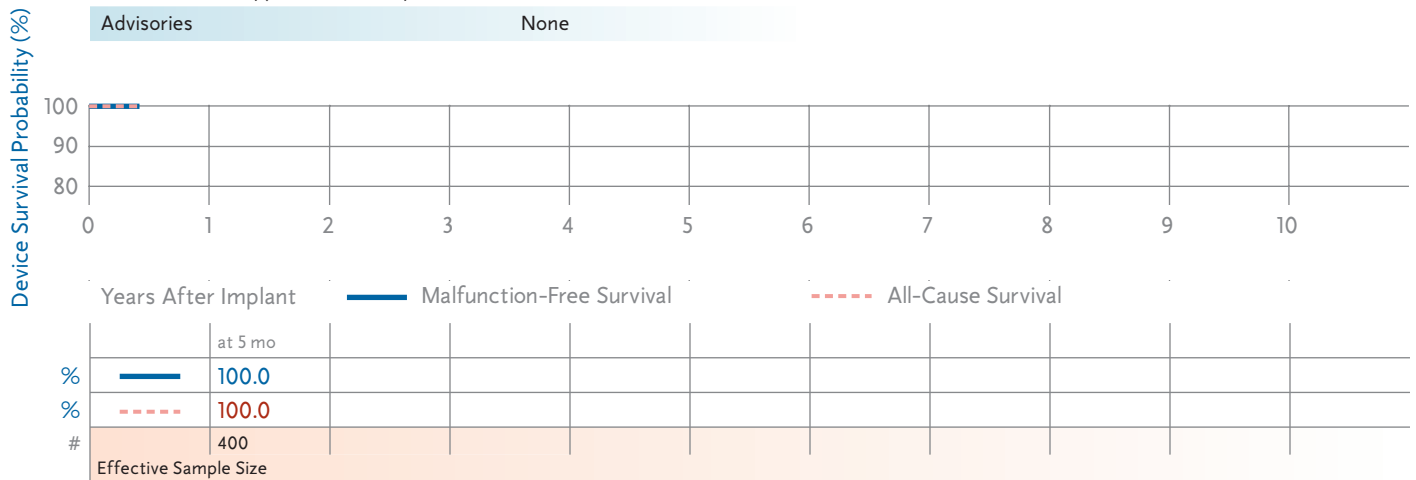


**C154DWK, C164AWK, C174AWK Concerto**

Product Characteristics

US Market Release	May-06
Registered US Implants	6,000
Estimated Active US Implants	6,000
Normal Battery Depletions	0
Malfunctions	0
Therapy Function Not Compromised	0
Therapy Function Compromised	0
Advisories	None

NBD Code	VVED
Serial Number Prefix/X-ray ID	PVU, PVT, PVR
Max Delivered Energy	35 J
Estimated Longevity	<a href="#">See page 19</a>



**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).

Model Number	Family	US Market Release	Registered US Implants	Estimated Active US Implants	Normal Battery Depletions	Malfunctions		Device Survival Probability (%)																	
						Therapy Function Compromised	Therapy Function Not Compromised	Years After Implant																	
						Therapy Function Compromised	Therapy Function Not Compromised	1 yr	2 yr	3 yr	4 yr	5 yr	6 yr	7 yr	8 yr	10 yr									
7272	InSync ICD	Jul-02	13,000	5,000	261	13	+ 140	= 153	Malfunction-free	99.9	+0.0/-0.1	99.8	+0.1/-0.1	99.1	+0.2/-0.2	98.0	+0.3/-0.4	96.4	+1.2/-1.7						
7277	InSync Marquis	Mar-03	7,000	2,000	175	9	+ 60	= 69	Malfunction-free	100.0	+0.0/-0.1	98.9	+0.3/-0.4	98.1	+0.4/-0.5	97.9	+0.5/-0.6								
7289	InSync II Marquis	Jul-03	28,000	15,000	315	(8)	+ (0)	= (8)	All-cause	99.9	+0.1/-0.1	92.5	+0.7/-0.8	87.1	+1.1/-1.2	86.7	+1.1/-1.2								
7297	InSync Sentry	Nov-04	9,000	7,000	10	23	+ 64	= 87	Malfunction-free	99.9	+0.0/-0.0	99.7	+0.1/-0.1	99.3	+0.2/-0.2	99.2	+0.3/-0.4								
7299	InSync Sentry	Apr-05	28,000	25,000	5	(5)	+ (0)	= (5)	All-cause	99.8	+0.0/-0.1	97.5	+0.2/-0.2	94.0	+0.5/-0.5	93.6	+0.6/-0.7								
7303	InSync Maximo	Jun-04	17,000	13,000	64	1	+ 6	= 7	Malfunction-free	100.0	+0.0/-0.1	99.8	+0.1/-0.2	99.3	+0.2/-0.3										
7304	InSync Maximo	Apr-05	14,000	12,000	3	3	+ 5	= 8	Malfunction-free	100.0	+0.0/-0.0	100.0	+0.0/-0.0	100.0	+0.0/-0.0										
						3	+ 13	= 16	All-cause	99.8	+0.1/-0.1	99.8	+0.1/-0.1	99.8	+0.1/-0.1										
						1	+ 2	= 3	Malfunction-free	100.0	+0.0/-0.0	99.9	+0.1/-0.1	99.9	+0.1/-0.1										
						3	+ 0	= 3	All-cause	99.9	+0.0/-0.1	98.4	+0.3/-0.3	97.6	+0.5/-0.6										
						1	+ 2	= 3	Malfunction-free	100.0	+0.0/-0.0	100.0	+0.0/-0.1	100.0	+0.0/-0.1										
						3	+ 0	= 3	All-cause	99.9	+0.0/-0.1	99.9	+0.1/-0.1	99.9	+0.1/-0.1										

continued

**Device Survival Summary** continued

Model Number	Family	US Market Release	Registered US Implants	Estimated Active US Implants	Normal Battery Depletions	Malfunctions			Device Survival Probability (%)									
						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	
8040	InSync	Aug-01	15,000	6,000	161	15 + 5 = 20	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	99.6 +0.2/-0.3	99.6 +0.2/-0.3	99.6 +0.2/-0.3	99.6 +0.2/-0.3	99.6 +0.2/-0.3 at 74 mo		
						All-cause	99.9 +0.0/-0.1	98.4 +0.2/-0.3	96.6 +0.4/-0.4	94.0 +0.7/-0.8	86.9 +3.6/-4.8	85.2 +4.0/-5.3 at 74 mo						
8042	InSync III	Feb-03	21,000	14,000	22	3 + 2 = 5	Malfunction-free	100.0 +0.0/-0.0	99.9 +0.0/-0.0	99.9 +0.0/-0.1	99.9 +0.1/-0.3	99.9 +0.1/-0.3	99.9 +0.1/-0.3	99.9 +0.1/-0.3	99.9 +0.1/-0.3 at 62 mo			
						All-cause	100.0 +0.0/-0.0	99.9 +0.0/-0.1	99.5 +0.1/-0.2	98.0 +1.0/-2.2	95.8 +1.9/-3.6	95.8 +1.9/-3.6 at 62 mo						
C154DWK, C164AWK, C174AWK	Concerto	May-06	6,000	6,000	0	0 + 0 = 0	Malfunction-free	100.0 +0.0/-0.0 at 5 mo										
						All-cause	100.0 +0.0/-0.0 at 5 mo											

### Reference Chart

The longevity estimates provided are mean values calculated for the parameters given. 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.

Model Number	Family	Connector Style	Volume/ Mass*	Delivered Energy	Estimated Longevity					Elective Replacement (ERI)**		End of Life (EOL) Battery Voltage
					Charging Frequency**	100% Pacing†	50% Pacing†	15% Pacing†	100% Sensing	Battery Voltage	Charge Time	
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
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	> 16 second charge time	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	> 16 second charge time	3 months after ERI
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	> 16 second charge time	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	> 16 second charge time	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	> 16 second charge time	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	> 16 second charge time	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	> 16 second charge time	3 months after ERI

Family	Model Number	Estimated Longevity			Elective Replacement Time Indicators
		Amplitude Setting	500 Lead Ω	1000 Lead Ω	
InSync	8040	Low 2.5 V (A, RV)	11.9	13.7	**
		Nominal 3.5 V (A, RV)	8.9	11.4	
		High 5.0 V (A, RV)	6.6	9.1	
InSync III	8042	Low 2.5 V (A, RV, LV)	8.3	9.9	**
		Nominal 3.5 V (A, RV, LV)	5.9	7.8	
		High 5.0 V (A, RV, LV)	4.1	6.0	

Model Number	Family	Connector Style	Volume/ Mass*	Delivered Energy	Estimated Longevity					Recommended Replacement (RRT)***		End of Service (EOS)
					Charging Frequency**	100% Pacing†	50% Pacing†	15% Pacing†	100% Sensing	Battery Voltage	Charge Time	
C154DWK, C164AWK, C174AWK	Concerto	DR+LV true	38 cm 68 g	35 J	Monthly Quarterly Semiannual	3.8 5.5 6.3	4.3 6.8 8.0	4.8 8.0 9.8	5.0 8.8 11.0	≤ 2.62 V	—	3 month after RRT or > 16-second charge time

\* Volume and mass differ by connector style.

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

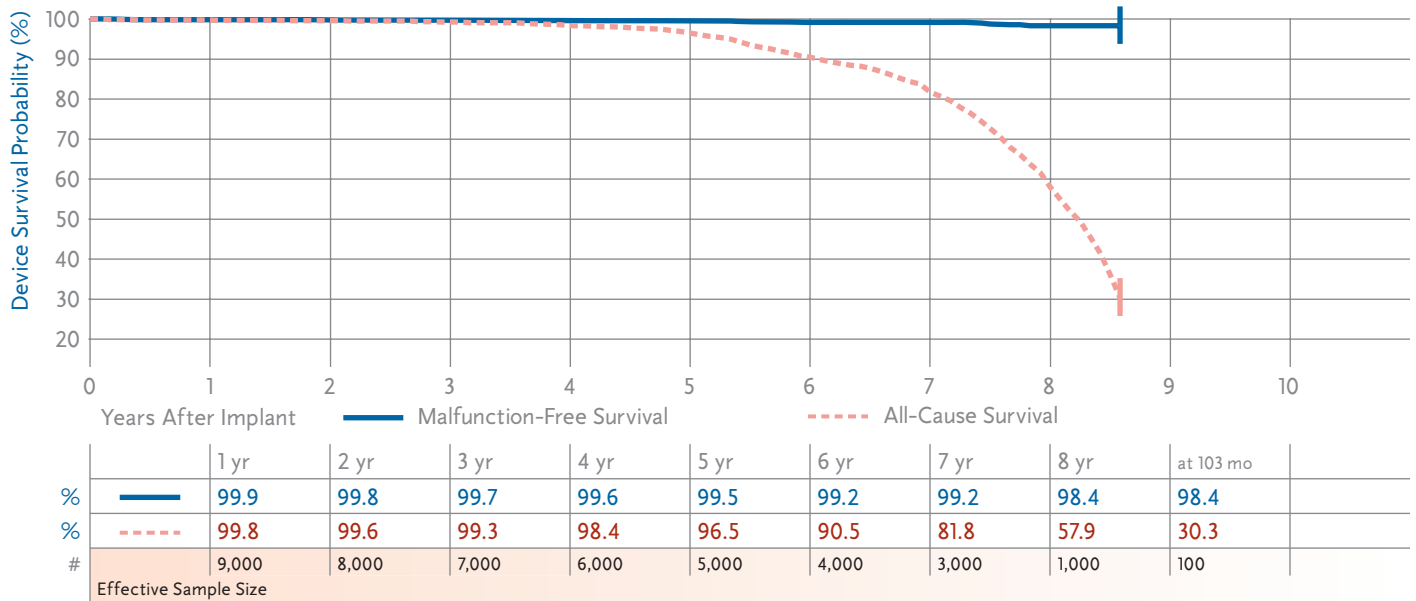
\*\*\* The minimum time between ERI and EOL (or RRT and EOS) is 3 months (100% pacing, two charges per month).

† Pacing mode is DDD for CRT models. Parameter settings; lower rate at 60 ppm, sensing rate at 70 bpm, (A, RV, LV) 3.0 V amplitude, 0.4 ms pulse width, and 510 ohm pace load per applicable channel. CRT models with shared biventricular pacing; InSync Marquis 7277 (LV impedance set to 510 ohms), InSync ICD 7272 (RV amplitude set to 4.0 V).

**7223 Micro Jewel II**

Product Characteristics

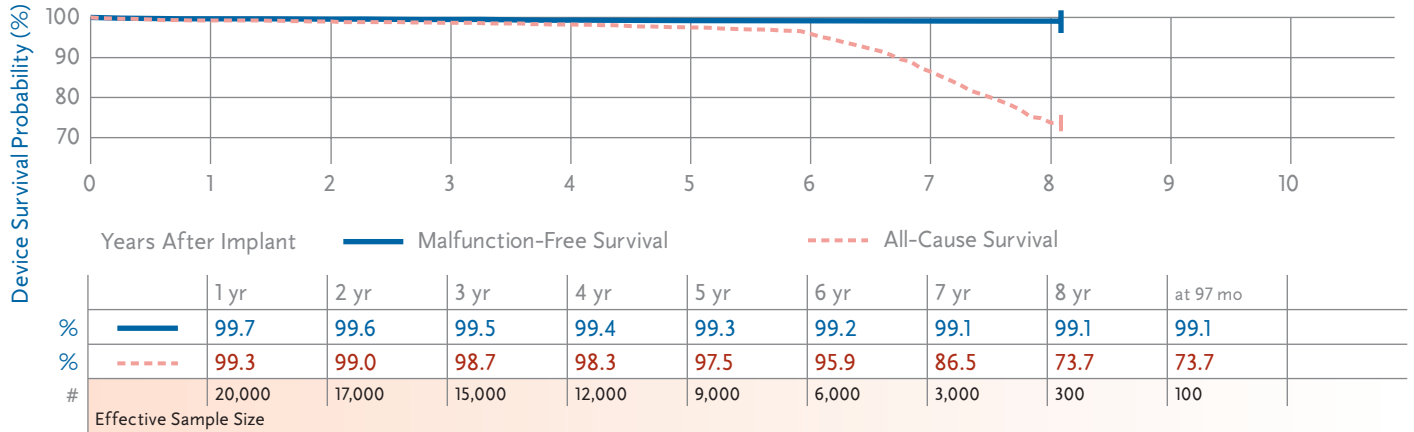
US Market Release	Nov-96	NBD Code	VVEV
Registered US Implants	10,000	Serial Number Prefix/X-ray ID	PFR
Estimated Active US Implants	1,000	Max Delivered Energy	30 J
Normal Battery Depletions	781	Estimated Longevity	<a href="#">See page 33</a>
Malfunctions	68		
Advisories	None		



**7227 GEM**

Product Characteristics

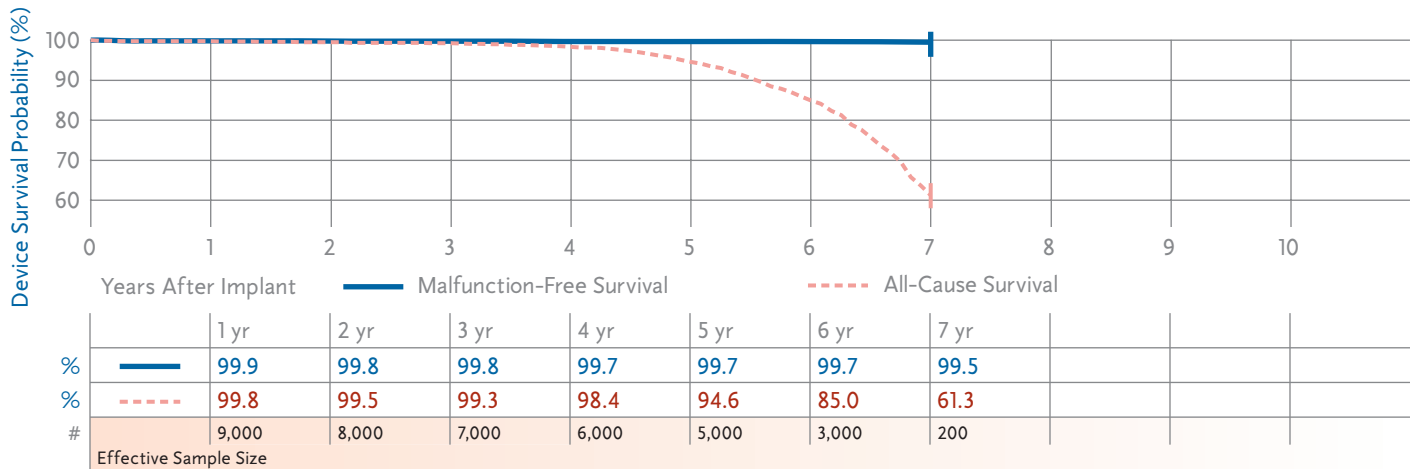
US Market Release	Oct-98	NBD Code	VVEV
Registered US Implants	22,000	Serial Number Prefix/X-ray ID	PIP, PLN, PLP, PLR
Estimated Active US Implants	8,000	Max Delivered Energy	35 J
Normal Battery Depletions	459	Estimated Longevity	<a href="#">See page 33</a>
Malfunctions	135		
Advisories	1 <a href="#">see page 158</a> – 1999 Potential Circuit Overload		



**7229 GEM II VR**

Product Characteristics

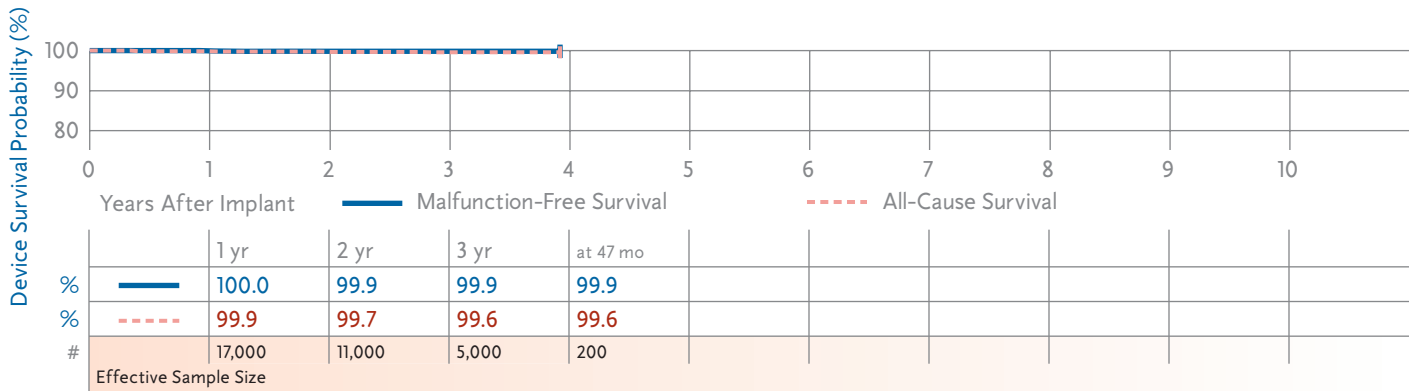
US Market Release	Jul-99	NBD Code	VVEV
Registered US Implants	11,000	Serial Number Prefix/X-ray ID	PJJ
Estimated Active US Implants	3,000	Max Delivered Energy	30 J
Normal Battery Depletions	522	Estimated Longevity	<a href="#">See page 33</a>
Malfunctions	26		
Advisories	1 <a href="#">see page 158</a> – 1999 Potential Circuit Overload also <a href="#">see page 167</a> – Performance note on ICD Battery Discharge Behavior		



**7230 Marquis VR**

Product Characteristics

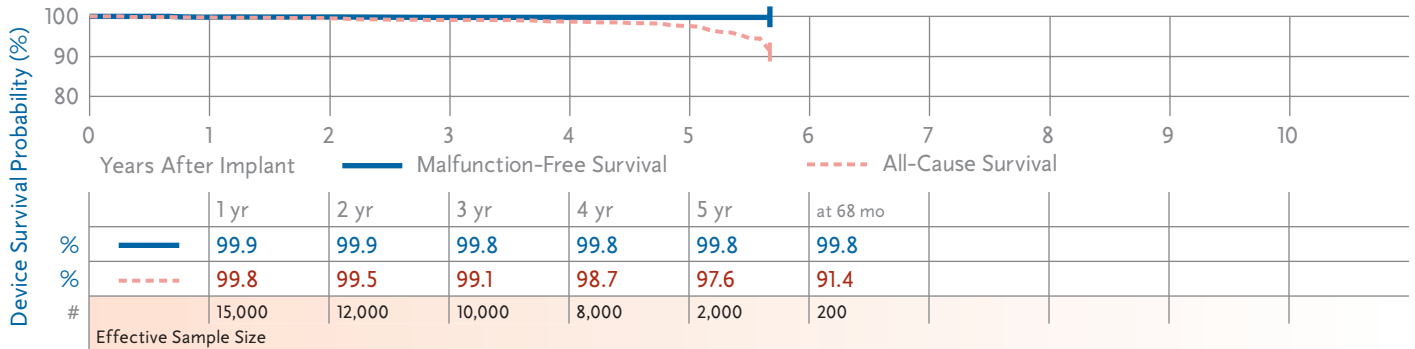
US Market Release	Dec-02	NBD Code	VVEV
Registered US Implants	19,000	Serial Number Prefix/X-ray ID	PKD, PLW, PLY
Estimated Active US Implants	11,000	Max Delivered Energy	30 J
Normal Battery Depletions	6	Estimated Longevity	<a href="#">See page 33</a>
Malfunctions	19 (0 related to advisory)		
Therapy Function Not Compromised	13 (0 related to advisory)		
Therapy Function Compromised	6 (0 related to advisory)		
Advisories	1 <a href="#">see page 156</a> – 2005 Potential Premature Battery Depletion Due to Battery Short		



**7231 GEM III VR**

Product Characteristics

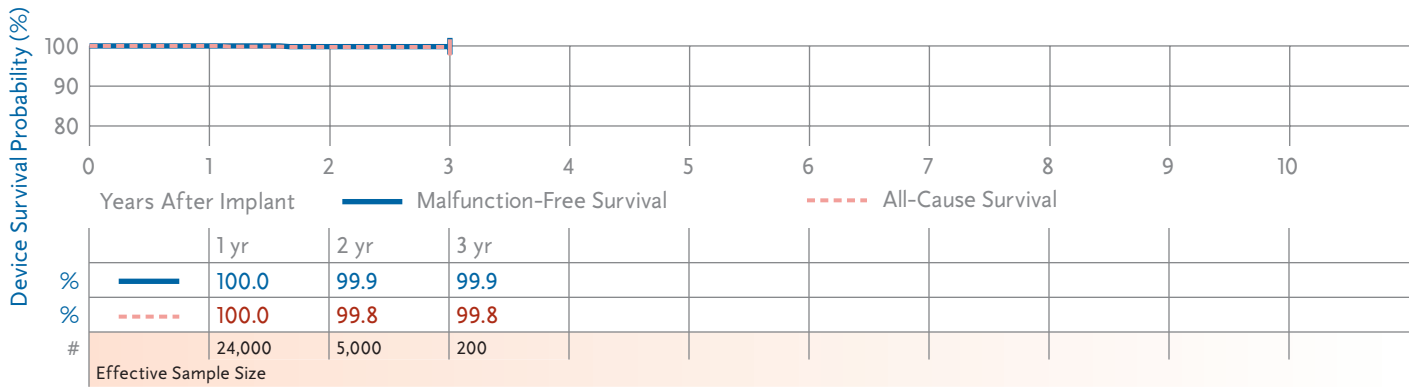
US Market Release	Dec-00	NBD Code	VVEV
Registered US Implants	17,000	Serial Number Prefix/X-ray ID	PJL
Estimated Active US Implants	10,000	Max Delivered Energy	30 J
Normal Battery Depletions	97	Estimated Longevity	<a href="#">See page 33</a>
Malfunctions	24		
Therapy Function Not Compromised	18		
Therapy Function Compromised	6		
Advisories	None <a href="#">see page 167</a> – Performance note on ICD Battery Discharge Behavior		



**7232 Maximo VR**

Product Characteristics

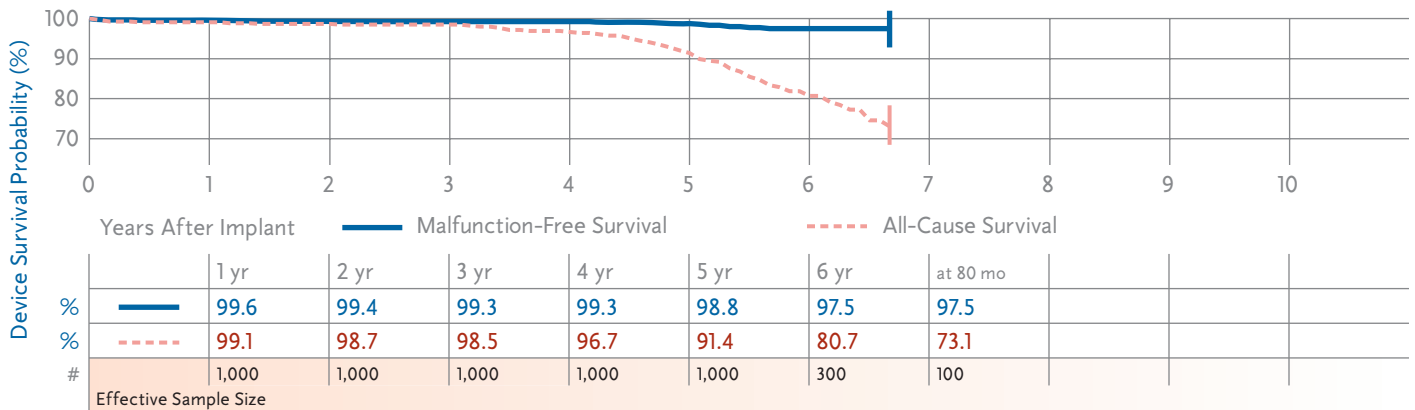
US Market Release	Oct-03	NBD Code	VVED
Registered US Implants	37,000	Serial Number Prefix/X-ray ID	PRN
Estimated Active US Implants	32,000	Max Delivered Energy	35 J
Normal Battery Depletions	4	Estimated Longevity	<a href="#">See page 33</a>
Malfunctions	11 (0 related to advisory)		
Therapy Function Not Compromised	5 (0 related to advisory)		
Therapy Function Compromised	6 (0 related to advisory)		
Advisories	1 <a href="#">see page 156</a> – 2005 Potential Premature Battery Depletion Due to Battery Short		



**7250 Jewel AF**

Product Characteristics

US Market Release	Jun-00	NBD Code	VVED
Registered US Implants	1,000	Serial Number Prefix/X-ray ID	PID
Estimated Active US Implants	200	Max Delivered Energy	27 J
Normal Battery Depletions	67	Estimated Longevity	<a href="#">See page 33</a>
Malfunctions	18		
Advisories	None		

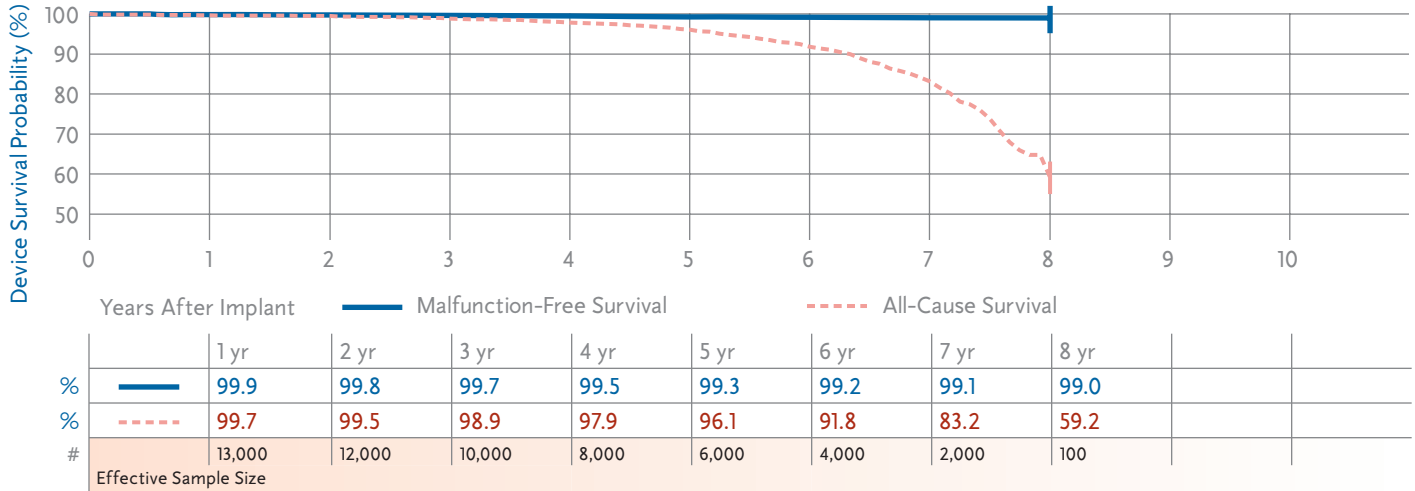




**7271 GEM DR**

Product Characteristics

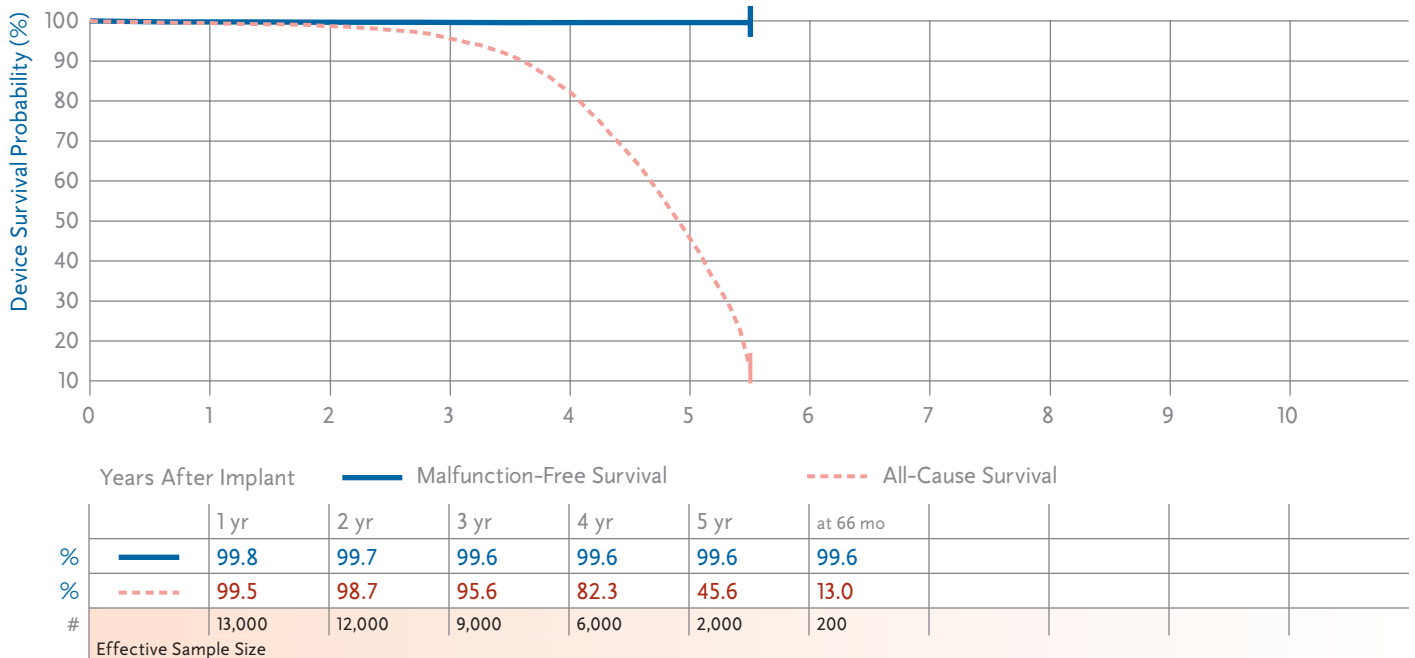
US Market Release	Oct-98	NBD Code	VVED
Registered US Implants	15,000	Serial Number Prefix/X-ray ID	PID
Estimated Active US Implants	5,000	Max Delivered Energy	27 J
Normal Battery Depletions	405	Estimated Longevity	<a href="#">See page 33</a>
Malfunctions	78		
Advisories	None		



**7273 GEM II DR**

Product Characteristics

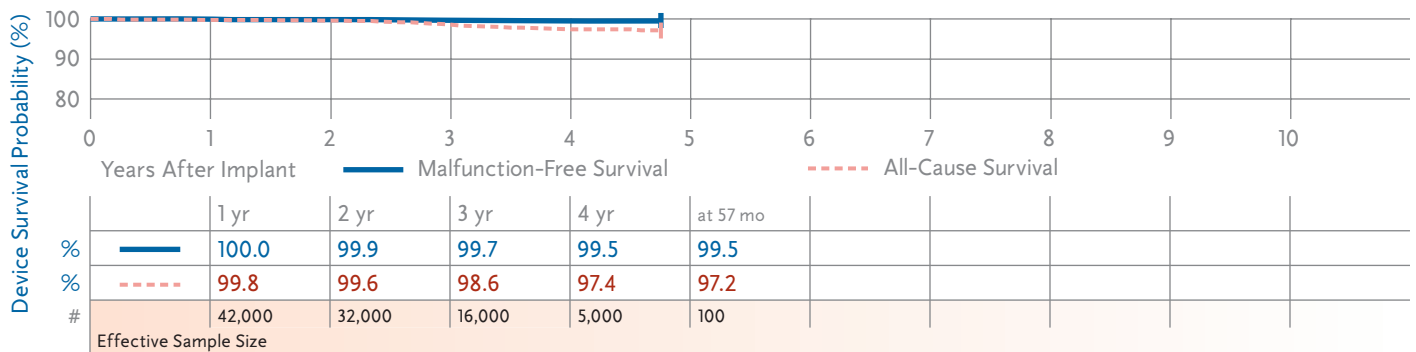
US Market Release	Feb-99	NBD Code	VVED
Registered US Implants	15,000	Serial Number Prefix/X-ray ID	PJK
Estimated Active US Implants	40	Max Delivered Energy	30 J
Normal Battery Depletions	2,219	Estimated Longevity	<a href="#">See page 33</a>
Malfunctions	52		
Advisories	None <a href="#">see page 167</a> – Performance note on ICD Battery Discharge Behavior		



**7274 Marquis DR**

Product Characteristics

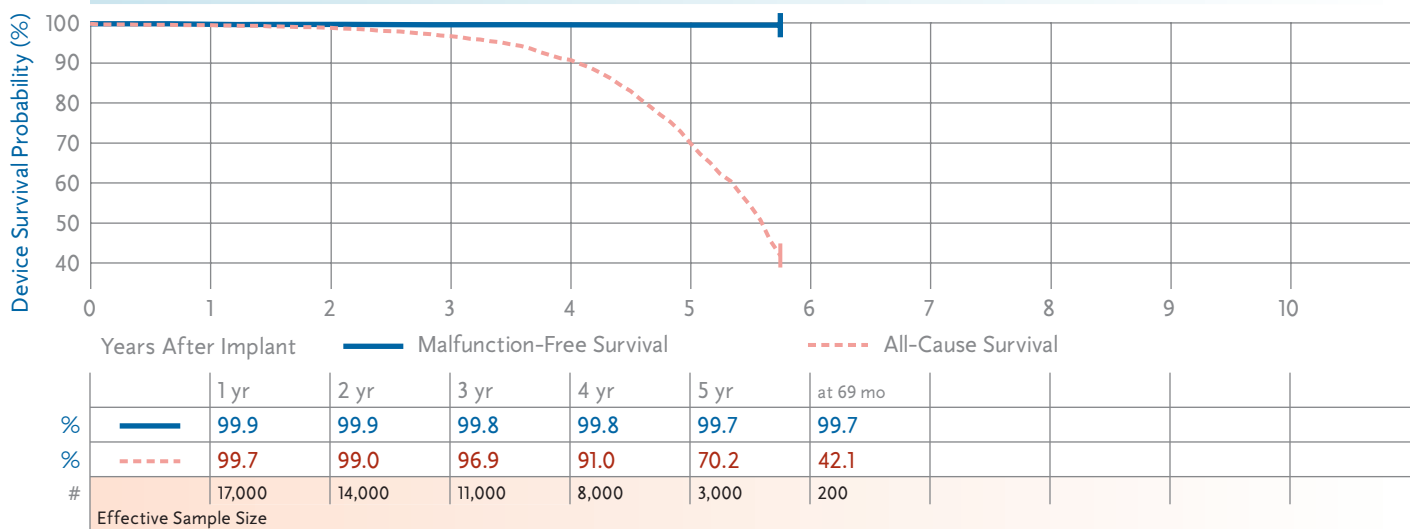
US Market Release	Mar-02	NBD Code	VVED
Registered US Implants	48,000	Serial Number Prefix/X-ray ID	PKC
Estimated Active US Implants	24,000	Max Delivered Energy	30 J
Normal Battery Depletions	145	Estimated Longevity	<a href="#">See page 33</a>
Malfunctions	104 (30 related to advisory)		
Therapy Function Not Compromised	49 (2 related to advisory)		
Therapy Function Compromised	55 (28 related to advisory)		
Advisories	1 <a href="#">see page 156</a> – 2005 Potential Premature Battery Depletion Due to Battery Short		



**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	7,000	Max Delivered Energy	30 J
Normal Battery Depletions	1,256	Estimated Longevity	<a href="#">See page 33</a>
Malfunctions	35		
Therapy Function Not Compromised	25		
Therapy Function Compromised	10		
Advisories	None <a href="#">see page 167</a> – Performance note on ICD Battery Discharge Behavior		

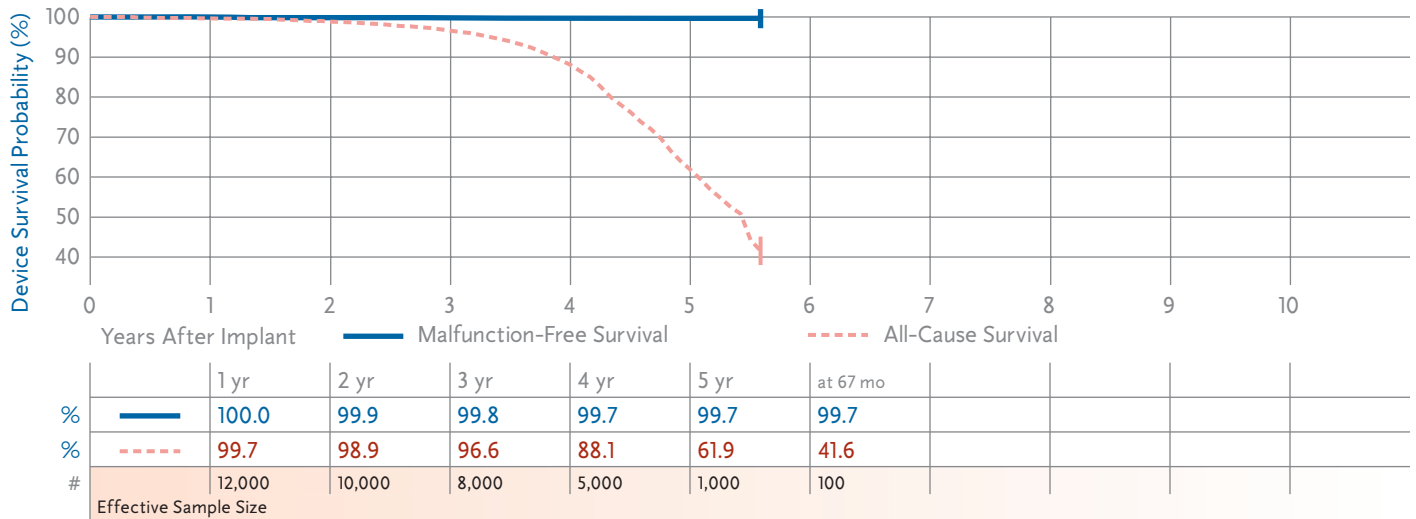


**7276 GEM III AT**

Product Characteristics

US Market Release	Feb-01	NBD Code	DDED
Registered US Implants	14,000	Serial Number Prefix/X-ray ID	PKE
Estimated Active US Implants	4,000	Max Delivered Energy	30 J
Normal Battery Depletions	945	Estimated Longevity	<a href="#">See page 33</a>
Malfunctions	25		
Therapy Function Not Compromised	18		
Therapy Function Compromised	7		

Advisories: None [see page 167](#) – Performance note on ICD Battery Discharge Behavior

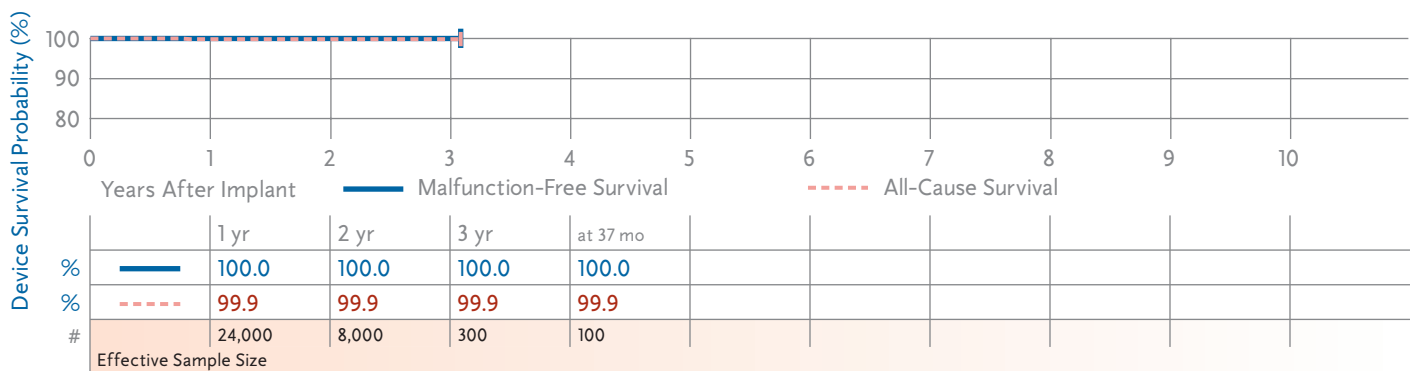


**7278 Maximo DR**

Product Characteristics

US Market Release	Oct-03	NBD Code	VVED
Registered US Implants	33,000	Serial Number Prefix/X-ray ID	PRM
Estimated Active US Implants	27,000	Max Delivered Energy	35 J
Normal Battery Depletions	8	Estimated Longevity	<a href="#">See page 33</a>
Malfunctions	8 (0 related to advisory)		
Therapy Function Not Compromised	3 (0 related to advisory)		
Therapy Function Compromised	5 (0 related to advisory)		

Advisories: 1 [see page 156](#) – 2005 Potential Premature Battery Depletion Due to Battery Short

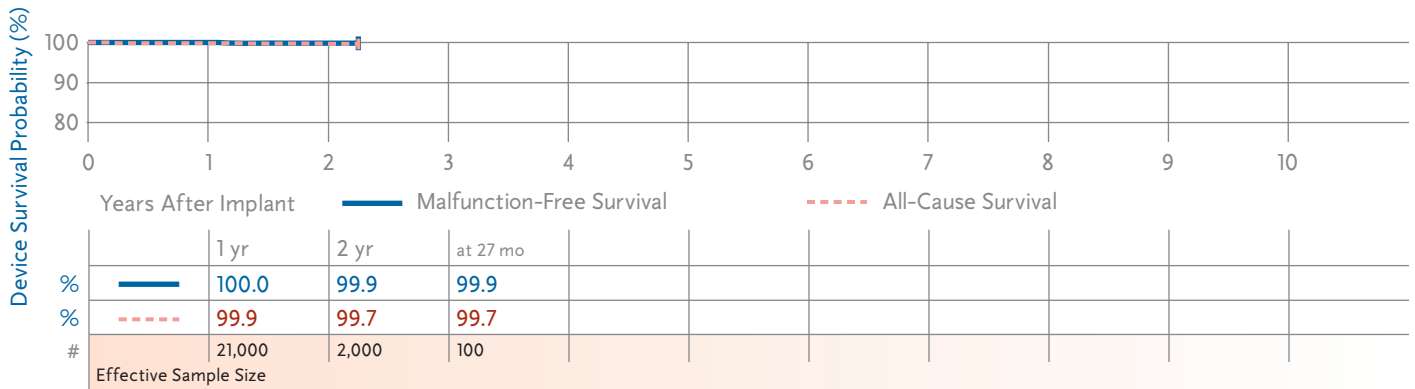


**7288 Intrinsic**

Product Characteristics

US Market Release	Aug-04
Registered US Implants	29,000
Estimated Active US Implants	26,000
Normal Battery Depletions	5
Malfunctions	18
Therapy Function Not Compromised	13
Therapy Function Compromised	5
Advisories	None

NBD Code	VVED
Serial Number Prefix/X-ray ID	PUB
Max Delivered Energy	35 J
Estimated Longevity	<a href="#">See page 33</a>



**7290 Onyx**

Product Characteristics

US Market Release	Mar-04
Registered US Implants	1,000
Estimated Active US Implants	1,000
Normal Battery Depletions	0
Malfunctions	1
Therapy Function Not Compromised	1
Therapy Function Compromised	0
Advisories	None

NBD Code	VVEV
Serial Number Prefix/X-ray ID	PRP
Max Delivered Energy	30 J
Estimated Longevity	<a href="#">See page 33</a>

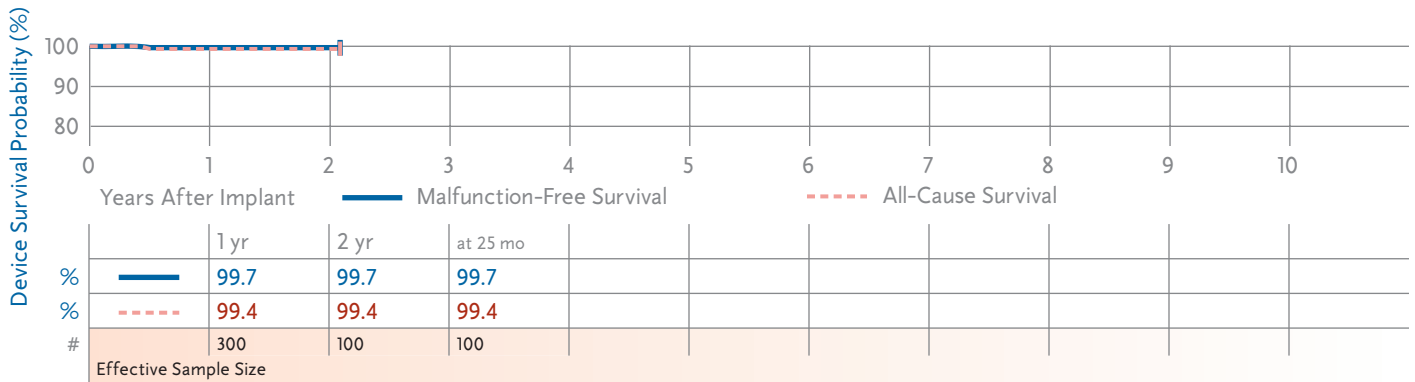


**D153ATG, D153DRG EnTrust**

Product Characteristics

US Market Release	Jun-05
Registered US Implants	400
Estimated Active US Implants	300
Normal Battery Depletions	0
Malfunctions	1
Therapy Function Not Compromised	0
Therapy Function Compromised	1
Advisories	None

NBD Code	DDED, VVED
Serial Number Prefix/X-ray ID	PNR
Max Delivered Energy	30 J
Estimated Longevity	<a href="#">See page 34</a>

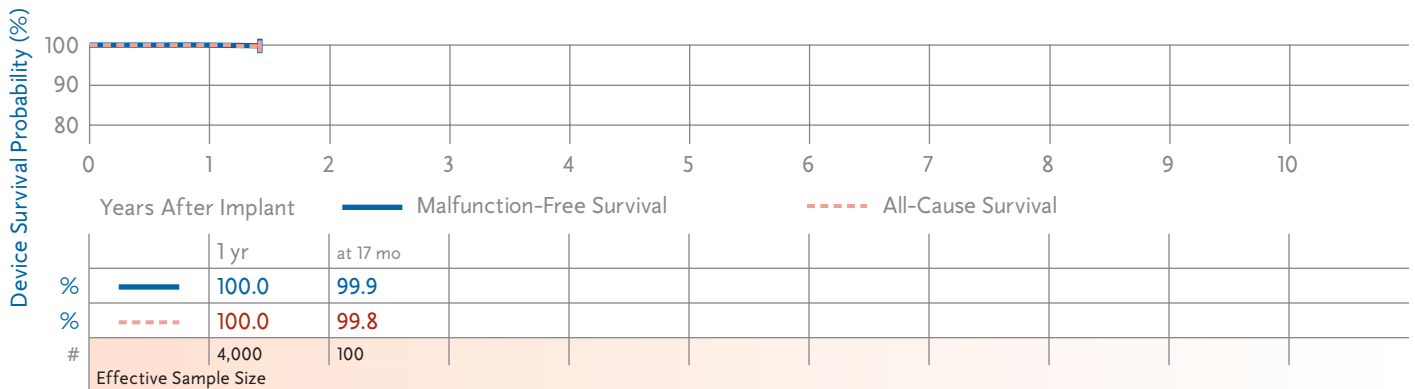


**D154ATG, D154DRG EnTrust**

Product Characteristics

US Market Release	Jun-05
Registered US Implants	23,000
Estimated Active US Implants	21,000
Normal Battery Depletions	0
Malfunctions	2
Therapy Function Not Compromised	1
Therapy Function Compromised	1
Advisories	None

NBD Code	DDED, VVED
Serial Number Prefix/X-ray ID	PNR
Max Delivered Energy	35 J
Estimated Longevity	<a href="#">See page 34</a>



**D154AWG, D164AWG Virtuoso**

Product Characteristics

US Market Release	May-06
Registered US Implants	5,000
Estimated Active US Implants	5,000
Normal Battery Depletions	0
Malfunctions	0
Advisories	None

NBD Code	VVED
Serial Number Prefix/X-ray ID	PVV, PUL
Max Delivered Energy	35 J
Estimated Longevity	<a href="#">See page 34</a>



**D154VRC EnTrust**

Product Characteristics

US Market Release	Jun-05
Registered US Implants	11,000
Estimated Active US Implants	11,000
Normal Battery Depletions	0
Malfunctions	4
Therapy Function Not Compromised	2
Therapy Function Compromised	2
Advisories	None

NBD Code	VVEV
Serial Number Prefix/X-ray ID	PNT
Max Delivered Energy	35 J
Estimated Longevity	<a href="#">See page 34</a>



**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).

Model Number	Family	US Market Release	Registered US Implants	Estimated Active US Implants	Normal Battery Depletions	Malfunctions			Device Survival Probability (%)									
						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	
7223	MicroJewel III	Nov-96	10,000	1,000	781	—	—	68	99.9 +0.0/-0.1	99.8 +0.1/-0.1	99.7 +0.1/-0.1	99.6 +0.1/-0.2	99.5 +0.1/-0.2	99.2 +0.2/-0.3	99.2 +0.2/-0.3	98.4 +0.4/-0.5 at 103 mo		
						—	—	—	99.8 +0.1/-0.1	99.3 +0.2/-0.2	98.4 +0.3/-0.3	96.5 +0.4/-0.5	90.5 +0.8/-0.8	81.8 +1.1/-1.2	30.3 +3.2/-3.2 at 103 mo	57.9 +1.8/-1.9	99.1 +0.2/-0.2	98.4 +0.4/-0.5
7227	GEM	Oct-98	22,000	8,000	459	—	—	135	99.7 +0.1/-0.1	99.6 +0.1/-0.1	99.5 +0.1/-0.1	99.4 +0.1/-0.1	99.3 +0.1/-0.1	99.2 +0.1/-0.2	99.1 +0.1/-0.2	99.1 +0.2/-0.2 at 97 mo		
						—	—	—	99.3 +0.1/-0.1	98.7 +0.1/-0.2	98.3 +0.2/-0.2	97.5 +0.2/-0.3	95.9 +0.4/-0.4	86.5 +0.9/-0.9	73.7 +2.0/-2.2 at 97 mo	99.1 +0.2/-0.2	98.4 +0.4/-0.5	
7229	GEM II VR	Jul-99	11,000	3,000	522	—	—	26	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	99.5 +0.2/-0.4			
						—	—	—	99.8 +0.1/-0.1	99.5 +0.1/-0.2	98.4 +0.3/-0.3	94.6 +0.5/-0.6	85.0 +1.0/-1.0	61.3 +3.1/-3.2				
7230	Marquis VR	Dec-02	19,000	11,000	6	6 + 13 =	19	100.0 +0.0/-0.0	99.9 +0.0/-0.1	99.9 +0.1/-0.1	99.9 +0.1/-0.1	99.9 +0.1/-0.1	99.9 +0.1/-0.1	99.9 +0.1/-0.1	99.9 +0.1/-0.1			
						(0) + (0) = (0) (advisory-related subset)	99.9 +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	99.6 +0.1/-0.1	99.6 +0.1/-0.1	99.6 +0.1/-0.1	99.6 +0.1/-0.1
7231	GEM III VR	Dec-00	17,000	10,000	97	6 + 18 =	24	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			
						see page 167 – Performance note on ICD Battery Discharge Behavior	99.8 +0.1/-0.1	99.5 +0.1/-0.1	99.1 +0.1/-0.2	98.7 +0.2/-0.2	97.6 +0.4/-0.4	91.4 +2.1/-2.7 at 68 mo	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
7232	Maximo VR	Oct-03	37,000	32,000	4	6 + 5 =	11	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	99.9 +0.0/-0.1	99.9 +0.0/-0.1	99.9 +0.0/-0.1			
						Advisories: see page 156 – 2005 Potential Premature Battery Depletion Due to Battery Short	100.0 +0.0/-0.0	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	99.8 +0.1/-0.1	99.8 +0.1/-0.1	99.8 +0.1/-0.1	99.8 +0.1/-0.1
7250	Jewel AF	Jun-00	1,000	200	67	—	18	99.6 +0.3/-0.6	99.4 +0.3/-0.7	99.3 +0.4/-0.7	99.3 +0.4/-0.7	99.3 +0.4/-0.7	99.3 +0.4/-0.7	99.3 +0.4/-0.7	99.3 +0.4/-0.7			
						Advisories: see page 156 – 2005 Potential Premature Battery Depletion Due to Battery Short	99.1 +0.4/-0.7	98.7 +0.5/-0.9	98.5 +0.6/-0.9	96.7 +1.0/-1.4	91.4 +1.9/-2.4	80.7 +3.1/-3.7	97.5 +1.0/-1.6 at 80 mo	97.5 +1.0/-1.6	97.5 +1.0/-1.6	97.5 +1.0/-1.6	97.5 +1.0/-1.6	97.5 +1.0/-1.6

continued

**Device Survival Summary** continued

Model Number	Family	US Market Release	Registered US Implants	Estimated Active US Implants	Normal Battery Depletions	Malfunctions		Device Survival Probability (%)								
						Therapy Function Compromised	Therapy Function Not Compromised	Years After Implant								
								1 yr	2 yr	3 yr	4 yr	5 yr	6 yr	7 yr	8 yr	
<b>7271</b>	GEM DR	Oct-98	15,000	5,000	405	—	78	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 +0.1/-0.2	99.2 +0.2/-0.2	99.1 +0.2/-0.2	99.0 +0.2/-0.3
								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	96.1 +0.4/-0.4	91.8 +0.7/-0.7	83.2 +1.2/-1.3	59.2 +3.9/-4.2
<b>7273</b>	GEM IICR	Feb-99	15,000	40	2,219	—	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	99.6 +0.1/-0.1	
								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	45.6 +1.4/-1.4	13.0 +1.9/-1.8		
<b>7274</b>	Marquis DR	Mar-02	48,000	24,000	145	55 + 49 =	104	Malfunction-free	100.0 +0.0/-0.0	99.9 +0.0/-0.0	99.7 +0.1/-0.1	99.5 +0.1/-0.1	99.5 +0.1/-0.1	99.5 +0.1/-0.1	99.7 +0.1/-0.1	
						(28) + (2) =	(30)	All-cause	99.8 +0.0/-0.0	99.6 +0.1/-0.1	98.6 +0.1/-0.2	97.4 +0.3/-0.3	97.2 +0.4/-0.4	97.2 +0.4/-0.4	97.2 +0.4/-0.4	
<b>7275</b>	GEM IICR	Nov-00	20,000	7,000	1,256	10 + 25 =	35	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	99.7 +0.1/-0.1	
								All-cause	99.7 +0.1/-0.1	99.0 +0.1/-0.2	96.9 +0.3/-0.3	91.0 +0.5/-0.6	70.2 +1.2/-1.2	42.1 +3.0/-3.1		
<b>7276</b>	GEM III AT	Feb-01	14,000	4,000	945	7 + 18 =	25	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	99.7 +0.1/-0.1	
								All-cause	99.7 +0.1/-0.1	98.9 +0.2/-0.2	96.6 +0.3/-0.4	88.1 +0.7/-0.8	61.9 +1.6/-1.7	41.6 +3.5/-3.6		
<b>7278</b>	Maximo DR	Oct-03	33,000	27,000	8	5 + 3 =	8	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	
						(0) + (0) =	(0)	All-cause	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	99.9 +0.0/-0.1	99.9 +0.0/-0.1	
<b>7288</b>	Intrinsic	Aug-04	29,000	26,000	5	5 + 13 =	18	Malfunction-free	100.0 +0.0/-0.0	99.9 +0.1/-0.2	99.9 +0.1/-0.2	99.7 +0.1/-0.2	99.7 +0.1/-0.2	99.7 +0.1/-0.2	99.7 +0.1/-0.2	
								All-cause	99.9 +0.0/-0.0	99.7 +0.1/-0.2	99.7 +0.1/-0.2	99.7 +0.1/-0.2	99.7 +0.1/-0.2	99.7 +0.1/-0.2	99.7 +0.1/-0.2	
<b>7290</b>	Ornyx	Mar-04	1,000	1,000	0	0 + 1 =	1	Malfunction-free	99.9 +0.1/-0.8	99.9 +0.1/-0.8	99.9 +0.1/-0.8	99.9 +0.1/-0.8	99.9 +0.1/-0.8	99.9 +0.1/-0.8	99.9 +0.1/-0.8	
								All-cause	99.7 +0.2/-0.8	99.7 +0.2/-0.8	99.7 +0.2/-0.8	99.7 +0.2/-0.8	99.7 +0.2/-0.8	99.7 +0.2/-0.8	99.7 +0.2/-0.8	

continued



Device Survival Summary continued

Model Number	Family	US Market Release	Registered US Implants	Estimated Active US Implants	Normal Battery Depletions	Malfunctions		Device Survival Probability (%)									
						Therapy Function Compromised	Therapy Function Not Compromised	Years After Implant									
								1 yr	2 yr	3 yr	4 yr	5 yr	6 yr	7 yr	8 yr		
D153ATG, D153DRG	EnTrust DR	Jun-05	400	300	0	1	0	1	Malfunction-free	99.7 +0.3/-1.8	99.7 +0.3/-1.8	99.7 +0.3/-1.8 at 25 mo					
						1	0	0	All-cause	99.4 +0.4/-1.7	99.4 +0.4/-1.7	99.4 +0.4/-1.7 at 25 mo					
D154ATG, D154DRG	EnTrust DR	Jun-05	23,000	21,000	0	1	1	2	Malfunction-free	100.0 +0.0/-0.0	99.9 +0.1/-0.6 at 17 mo						
						1	1	0	All-cause	100.0 +0.0/-0.0	99.8 +0.2/-0.6 at 17 mo						
D154AWG, D164AWG	Virtuoso DR	May-06	5,000	5,000	0	0	0	0	Malfunction-free	100.0 +0.0/-0.0 at 5 mo							
						0	0	0	All-cause	100.0 +0.0/-0.0 at 5 mo							
D154VRC	EnTrust VR	Jun-05	11,000	11,000	0	2	2	4	Malfunction-free	99.9 +0.1/-0.3	99.9 +0.1/-0.3 at 15 mo						
						2	2	0	All-cause	99.8 +0.1/-0.3	99.8 +0.1/-0.3 at 15 mo						

Reference Chart

The longevity estimates provided are mean values calculated for the parameters given. 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.

Model Number	Family	Connector Style	Volume/ Mass*	Delivered Energy	Estimated Longevity					Elective Replacement (ERI)**		End of Life (EOL) Battery Voltage
					Charging Frequency**	100% Pacing‡	50% Pacing‡	15% Pacing‡	100% Sensing	Battery Voltage	Charge Time	
7223	Micro Jewel II	Cx	54 cc 97 g	30 J	Monthly	4.9	5.4	5.8	6.0	≤ 4.91 V	—	≤ 4.57 V††
					Quarterly	6.3	7.1	7.8	8.1			
					Semiannual	6.8	7.7	8.5	9.0			
7227	GEM	B, Cx, D, E	49 cc* 90 g	35 J	Monthly	5.3	5.7	6.0	6.1	≤ 2.55 V	—	≤ 2.40 V§
					Quarterly	7.7	8.5	9.3	9.6			
					Semiannual	8.8	10.0	11.0	11.5			
7229	GEM II VR	Cx	39 cc 77 g	30 J	Monthly	3.6	3.9	4.1	4.2	≤ 2.55 V	—	≤ 2.40 V
					Quarterly	5.0	5.5	6.0	6.2			
					Semiannual	5.6	6.3	6.9	7.1			
7230	Marquis VR	B, Cx, E	36 cc 75 g	30 J	Monthly	4.9	5.2	5.4	5.5	≤ 2.62 V	> 16-second charge time	3 months after ERI
					Quarterly	7.3	8.0	8.5	8.7			
					Semiannual	8.5	9.3	10.0	10.4			
7231	GEM III VR	Cx	39 cc 77 g	30 J	Monthly	4.3	4.7	5.0	5.2	≤ 2.55 V	—	≤ 2.40 V
					Quarterly	6.0	6.8	7.4	7.8			
					Semiannual	6.6	7.5	8.5	8.9			
7232	Maximo VR	B, Cx, E	39 cc 76 g	35 J	Monthly	4.4	4.7	4.8	4.9	≤ 2.62 V	> 16-second charge time	3 months after ERI
					Quarterly	7.0	7.5	8.0	8.3			
					Semiannual	8.2	9.0	9.7	10.0			
7250	Jewel AF	G, H	56 cc* 96 g	27 J	Monthly	5.3	6.1	6.7	7.0	≤ 4.94 V	—	≤ 4.50 V
					Quarterly	6.5	7.6	8.7	9.2			
					Semiannual	7.0	8.2	9.4	10.0			
7271	GEM DR	DR	62 cc 115 g	35 J	Monthly	6.0	6.9	7.5	7.8	≤ 4.91 V	—	≤ 4.57 V§
					Quarterly	7.4	8.4	9.3	9.8			
					Semiannual	7.9	9.0	10.0	10.6			
7273	GEM II DR	DR	39.5 cc 77 g	30 J	Monthly	2.8	3.2	3.5	3.7	≤ 2.55 V	—	≤ 2.40 V
					Quarterly	3.7	4.3	4.8	5.1			
					Semiannual	4.0	4.7	5.4	5.8			
7274	Marquis DR	DR+LV	36 cc 75 g	30 J	Monthly	4.0	4.4	4.8	4.9	≤ 2.62 V	> 16-second charge time	3 months after ERI
					Quarterly	5.6	6.4	7.1	7.5			
					Semiannual	6.2	7.2	8.1	8.6			
7275	GEM III DR	DR	39.5 cc 78 g	30 J	Monthly	3.3	3.8	4.3	4.4	≤ 2.55 V	—	≤ 2.40 V
					Quarterly	4.2	5.0	5.8	6.3			
					Semiannual	4.5	5.5	6.5	7.0			
7276	GEM III AT	DR	39 cc 77 g	30 J	Monthly	3.3	3.8	4.3	4.5	≤ 2.55 V	—	≤ 2.40 V
					Quarterly	4.3	5.1	5.9	6.3			
					Semiannual	4.5	5.5	6.5	7.0			
7278	Maximo DR	DR	39 cc 77 g	35 J	Monthly	3.7	4.1	4.3	4.5	≤ 2.62 V	> 16-second charge time	3 months after ERI
					Quarterly	5.3	6.1	6.8	7.1			
					Semiannual	6.0	7.0	8.0	8.5			
7287	Intrinsic 30	DR	36 cc 75 g	30 J	Monthly	4.0	4.3	4.7	4.8	≤ 2.62 V	> 16-second charge time	3 months after ERI
					Quarterly	5.5	6.3	7.0	7.4			
					Semiannual	6.2	7.2	8.2	8.6			
7288	Intrinsic	DR	38 cc 76 g	35 J	Monthly	3.7	4.1	4.3	4.5	≤ 2.62 V	> 16-second charge time	3 months after ERI
					Quarterly	5.4	6.1	6.8	7.1			
					Semiannual	6.1	7.0	8.0	8.5			
7290	Onyx	Cx	39 cc 77 g	30 J	Monthly	3.8	4.1	4.3	4.5	≤ 2.55 V	> 16-second charge time	≤ 2.40 V
					Quarterly	5.0	5.6	6.2	6.4			
					Semiannual	5.4	6.1	6.7	7.0			

\* 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 VVI for single chamber models and DDD for dual chamber and CRT models. Parameter settings: lower rate at 60 ppm, sensing rate at 70 bpm, (A, RV, LV) 3.0 V amplitude, 0.4 ms pulse width, and 510 ohm pace load per applicable channel. CRT models with shared biventricular pacing: InSync Marquis 7277 (LV impedance set to 510 ohms), InSync ICD 7272 (RV amplitude set to 4.0 V).

†† For Model 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.

continued

Reference Chart continued

Model Number	Family	Connector Style	Volume/ Mass*	Delivered Energy	Estimated Longevity					Recommended Replacement (RRT)***		End of Service (EOS)
					Charging Frequency**	100% Pacing†	50% Pacing†	15% Pacing†	100% Sensing	Battery Voltage	Charge Time	
D153ATG, D153DRG	EnTrust	DR	33 cc 63 g	30 J	Monthly	3.5	3.8	4.1	4.2	≤ 2.61 V	—	3 months after RRT or > 16-second charge time
					Quarterly	4.8	5.4	6.0	6.3			
					Semiannual	5.3	6.1	6.9	7.2			
D153VRC	EnTrust	Cx	32 cc 63 g	30 J	Monthly	4.4	4.7	4.9	5.0	≤ 2.61 V	—	3 months after RRT or > 16-second charge time
					Quarterly	6.8	7.4	7.9	8.1			
					Semiannual	7.9	8.7	9.5	9.8			
D154ATG, D154DRG	EnTrust	DR	35 cc 68 g	35 J	Monthly	3.8	4.2	4.4	4.6	≤ 2.61 V	—	3 months after RRT or > 16-second charge time
					Quarterly	5.5	6.1	6.8	7.0			
					Semiannual	6.1	7.0	7.9	8.3			
D154AWG, D164AWG	Virtuoso	DR	37 cc 68 g	35 J	Monthly	4.1	4.5	4.8	5.0	≤ 2.62 V	—	3 months after RRT or > 19-second charge time
					Quarterly	6.3	7.3	8.3	8.8			
					Semiannual	7.3	8.7	10.1	11.0			
D154VRC	EnTrust	Cx	35 cc 68 g	35 J	Monthly	4.8	5.0	5.2	5.3	≤ 2.61 V	—	3 months after RRT or > 16-second charge time
					Quarterly	7.5	8.3	8.8	9.0			
					Semiannual	9.0	10.0	10.7	11.0			
D154VWC, D164VWC	Virtuoso	Cx	37 cc 68 g	35 J	Monthly	4.8	5.1	5.3	5.4	≤ 2.62 V	—	3 months after RRT or > 19-second charge time
					Quarterly	8.1	9.0	9.6	10.0			
					Semiannual	10.0	11.2	12.3	12.9			

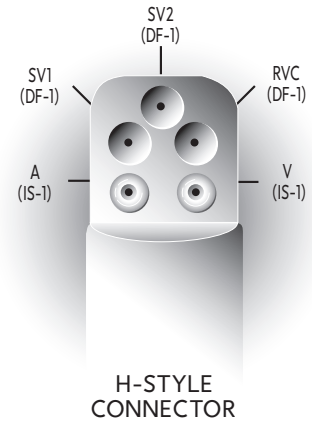
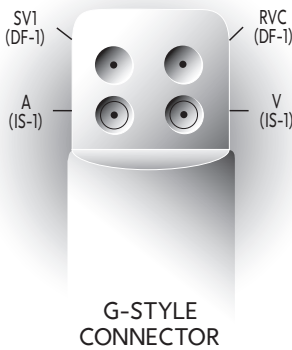
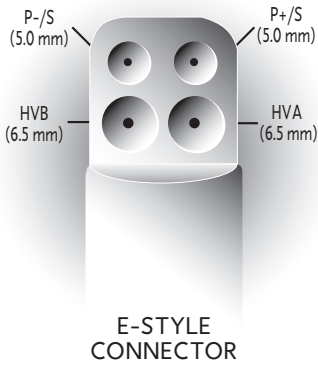
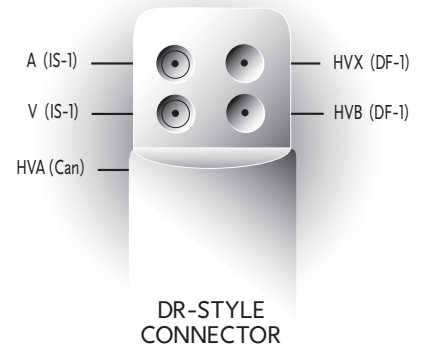
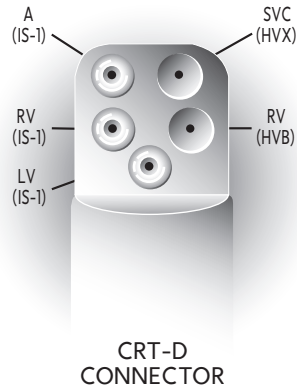
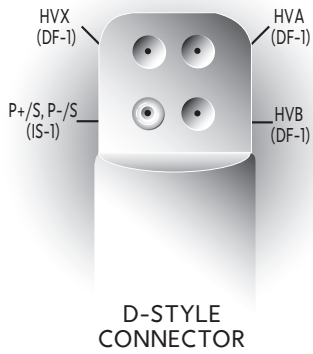
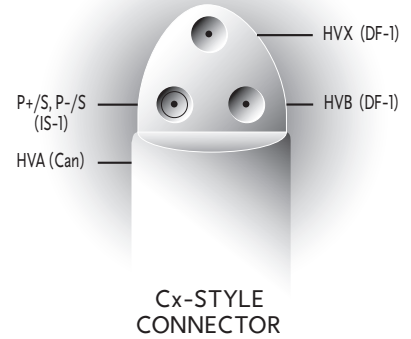
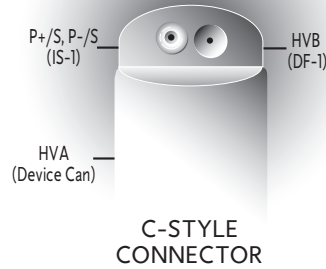
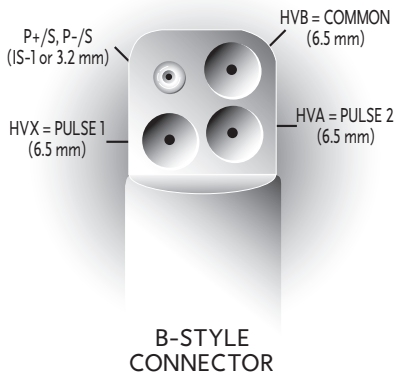
\* Volume and mass differ by connector style.

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

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

† Pacing mode is VVI for single chamber models and DDD for dual chamber models. Parameter settings: lower rate at 60 ppm, sensing rate at 70 bpm, (A, RV, LV) 3.0 V amplitude, 0.4 ms pulse width, and 510 ohm pace load per applicable channel.

ICD Connector Styles



**Adapta DR ADDR01, ADDR03, ADDR06, ADD01**

Product Characteristics

US Market Release	Jul-06	NBG Code	DDDR, DDD
Registered US Implants	6,000	Serial Number Prefix/X-ray ID	PWB, PWD, PWC
Estimated Active US Implants	6,000	Estimated Longevity	<a href="#">See page 75</a>
Normal Battery Depletions	0		
Malfunctions	0		
Therapy Function Not Compromised	0		
Therapy Function Compromised	0		
Advisories	None		



**Adapta SR ADSR01, ADSR03, ADSR06**

Product Characteristics

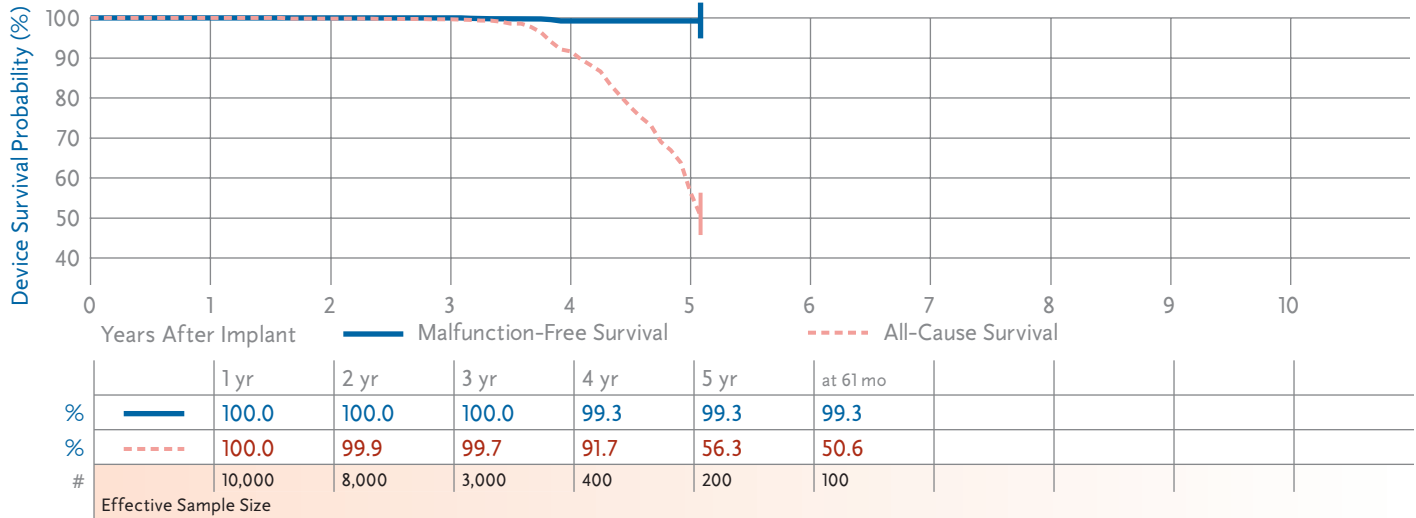
US Market Release	Jul-06	NBG Code	SSIR
Registered US Implants	1,000	Serial Number Prefix/X-ray ID	PWM, PWP, PWN
Estimated Active US Implants	1,000	Estimated Longevity	<a href="#">See page 75</a>
Normal Battery Depletions	0		
Malfunctions	0		
Therapy Function Not Compromised	0		
Therapy Function Compromised	0		
Advisories	None		



**AT500 AT501, 7253**

Product Characteristics

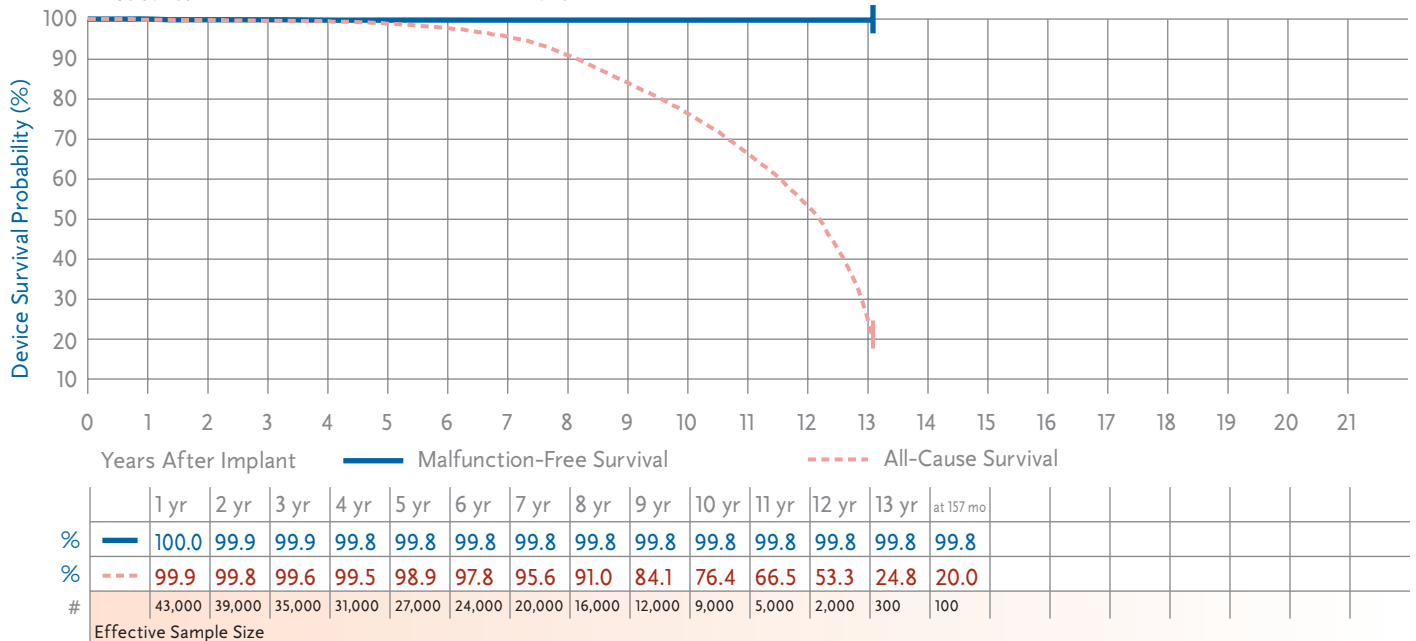
US Market Release	Mar-03	NBG Code	DDDRP
Registered US Implants	11,000	Serial Number Prefix/X-ray ID	IJF
Estimated Active US Implants	8,000	Estimated Longevity	<a href="#">See page 75</a>
Normal Battery Depletions	127		
Malfunctions	7		
Therapy Function Not Compromised	3		
Therapy Function Compromised	4		
Advisories	None <a href="#">see page 165</a> – Performance note on AT500 Pacing System Follow-Up Protocol		



**Elite 7074, 7075, 7076, 7077**

Product Characteristics

US Market Release	Apr-91	NBG Code	DDD/RO
Registered US Implants	48,000	Serial Number Prefix/X-ray ID	YE, YF, 2E, 1X
Estimated Active US Implants	1,000	Estimated Longevity	<a href="#">See page 75</a>
Normal Battery Depletions	3,439		
Malfunctions	85		
Advisories	None		



**EnPulse DR E1DR01, E1DR03, E1DR06**

Product Characteristics

US Market Release	Dec-03
Registered US Implants	7,000
Estimated Active US Implants	5,000
Normal Battery Depletions	1
Malfunctions	1
Therapy Function Not Compromised	1
Therapy Function Compromised	0
Advisories	None

NBG Code	DDDR
Serial Number Prefix/X-ray ID	PRA
Estimated Longevity	<a href="#">See page 75</a>



**EnPulse DR E1DR21**

Product Characteristics

US Market Release	Dec-03
Registered US Implants	2,000
Estimated Active US Implants	1,000
Normal Battery Depletions	0
Malfunctions	0
Therapy Function Not Compromised	0
Therapy Function Compromised	0
Advisories	None

NBG Code	DDDR
Serial Number Prefix/X-ray ID	PPT
Estimated Longevity	<a href="#">See page 75</a>



**EnPulse 2 DR E2DR01, E2DR03, E2DR06**

Product Characteristics

US Market Release	Feb-04
Registered US Implants	98,000
Estimated Active US Implants	85,000
Normal Battery Depletions	0
Malfunctions	4
Therapy Function Not Compromised	2
Therapy Function Compromised	2
Advisories	None

NBG Code	DDDR
Serial Number Prefix/X-ray ID	PNB, PNC, PNH
Estimated Longevity	<a href="#">See page 75</a>



**EnPulse 2 DR E2DR21**

Product Characteristics

US Market Release	Feb-04
Registered US Implants	12,000
Estimated Active US Implants	10,000
Normal Battery Depletions	3
Malfunctions	0
Therapy Function Not Compromised	0
Therapy Function Compromised	0
Advisories	None

NBG Code	DDDR
Serial Number Prefix/X-ray ID	PMU
Estimated Longevity	<a href="#">See page 75</a>





**EnPulse 2 DR E2DR31, E2DR33**

Product Characteristics

US Market Release	Feb-04
Registered US Implants	1,000
Estimated Active US Implants	1,000
Normal Battery Depletions	0
Malfunctions	0
Therapy Function Not Compromised	0
Therapy Function Compromised	0
Advisories	None

NBG Code	DDDR
Serial Number Prefix/X-ray ID	PNL
Estimated Longevity	<a href="#">See page 75</a>



**EnPulse 2 SR E2SR01, E2SR03, E2SR06**

Product Characteristics

US Market Release	Dec-03
Registered US Implants	24,000
Estimated Active US Implants	20,000
Normal Battery Depletions	2
Malfunctions	3
Therapy Function Not Compromised	2
Therapy Function Compromised	1
Advisories	None

NBG Code	SSIR
Serial Number Prefix/X-ray ID	PMW, PMY, PNA
Estimated Longevity	<a href="#">See page 75</a>



**EnPulse 2 VDD E2VDD01**

Product Characteristics

US Market Release	Dec-03
Registered US Implants	1,000
Estimated Active US Implants	500
Normal Battery Depletions	0
Malfunctions	0
Therapy Function Not Compromised	0
Therapy Function Compromised	0
Advisories	None

NBG Code	VDD
Serial Number Prefix/X-ray ID	PMV
Estimated Longevity	<a href="#">See page 75</a>



**EnRhythm DR P1501DR**

Product Characteristics

US Market Release	May-05
Registered US Implants	48,000
Estimated Active US Implants	44,000
Normal Battery Depletions	0
Malfunctions	9
Therapy Function Not Compromised	2
Therapy Function Compromised	7
Advisories	None

NBG Code	DDDRP
Serial Number Prefix/X-ray ID	PNP
Estimated Longevity	<a href="#">See page 75</a>

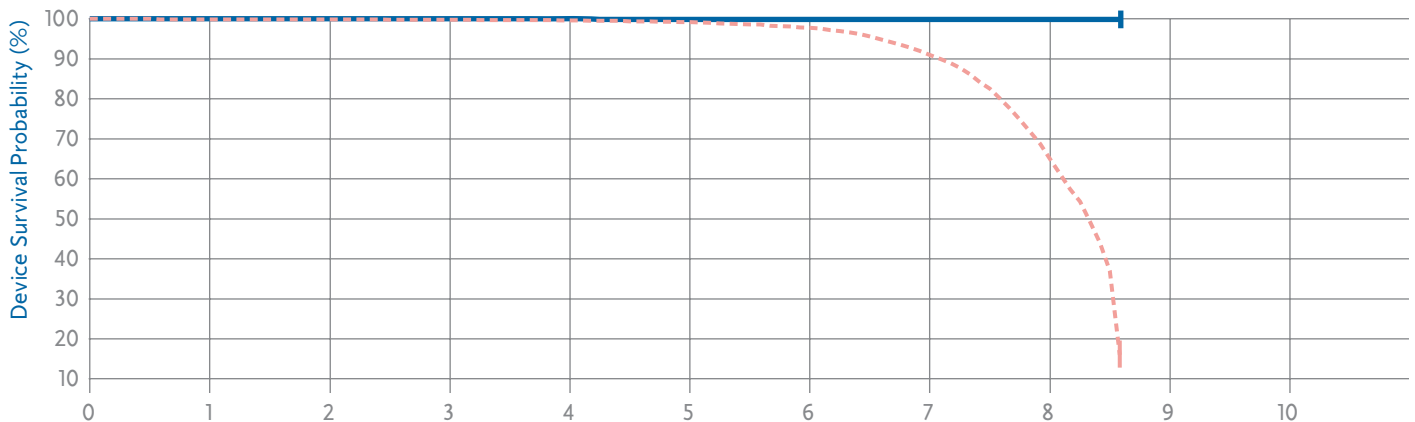


**Kappa 400 DR** KDR401, KDR403

Product Characteristics

US Market Release	Jan-98
Registered US Implants	46,000
Estimated Active US Implants	13,000
Normal Battery Depletions	2,009
Malfunctions	21
Therapy Function Not Compromised	12
Therapy Function Compromised	9
Advisories	None

NBG Code	DDD/RO
Serial Number Prefix/X-ray ID	PER, PET
Estimated Longevity	<a href="#">See page 75</a>



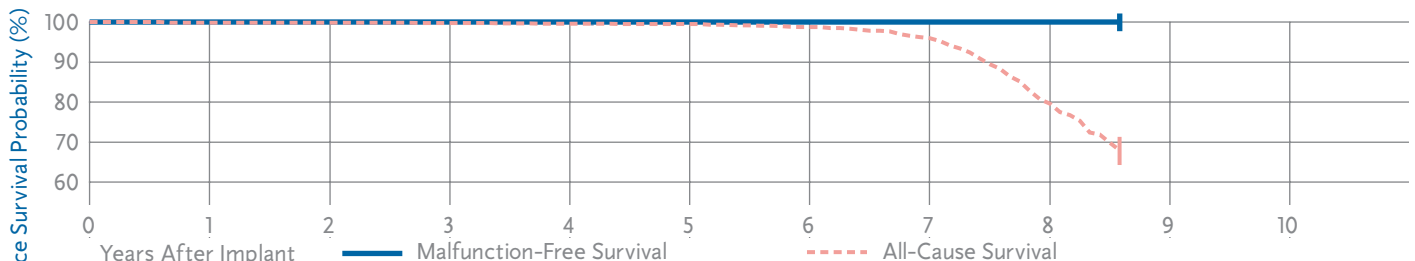
	1 yr	2 yr	3 yr	4 yr	5 yr	6 yr	7 yr	8 yr	at 103 mo
% ———	100.0	100.0	100.0	100.0	99.9	99.9	99.9	99.9	99.9
% - - - -	99.9	99.9	99.8	99.6	99.2	97.8	91.0	64.9	16.0
#	41,000	37,000	32,000	28,000	23,000	17,000	11,000	3,000	100
Effective Sample Size									

**Kappa 400 SR** KSR401, KSR403

Product Characteristics

US Market Release	Feb-98
Registered US Implants	15,000
Estimated Active US Implants	5,000
Normal Battery Depletions	256
Malfunctions	4
Therapy Function Not Compromised	3
Therapy Function Compromised	1
Advisories	None

NBG Code	SSI/R
Serial Number Prefix/X-ray ID	PEU, PGD
Estimated Longevity	<a href="#">See page 75</a>

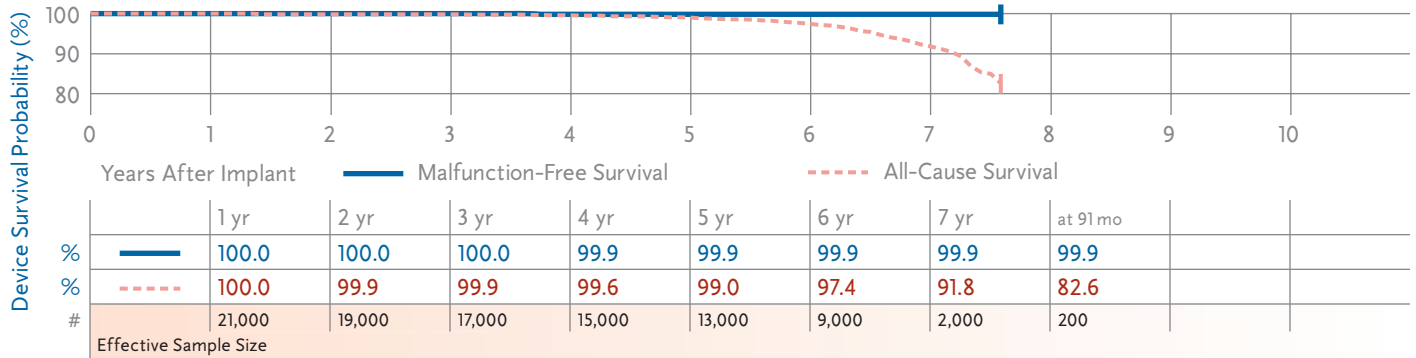


	1 yr	2 yr	3 yr	4 yr	5 yr	6 yr	7 yr	8 yr	at 103 mo
% ———	100.0	100.0	100.0	100.0	100.0	100.0	100.0	100.0	100.0
% - - - -	99.9	99.9	99.8	99.6	99.5	98.8	96.0	79.6	68.0
#	13,000	11,000	9,000	7,000	6,000	4,000	3,000	1,000	100
Effective Sample Size									

**Kappa 600 DR KDR601, KDR603, KDR606**

Product Characteristics

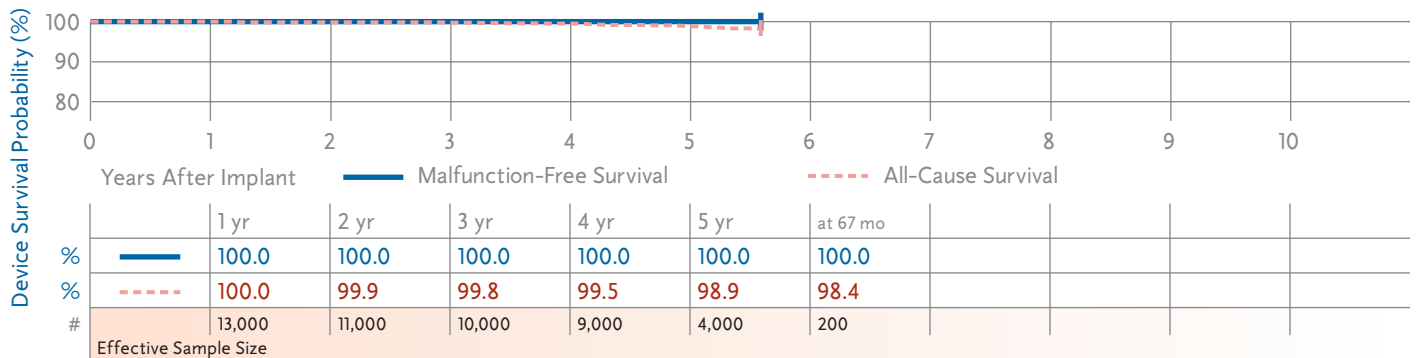
US Market Release	Jan-99	NBG Code	DDD/RO
Registered US Implants	24,000	Serial Number Prefix/X-ray ID	PHF, PHH, PHG
Estimated Active US Implants	10,000	Estimated Longevity	<a href="#">See page 76</a>
Normal Battery Depletions	333		
Malfunctions	16 (11 related to advisory)		
Therapy Function Not Compromised	3 (0 related to advisory)		
Therapy Function Compromised	13 (11 related to advisory)		
Advisories	1 <a href="#">see page 157</a> – 2002 Potential Fractured Power Supply Wires		



**Kappa 600 DR KDR651, KDR653**

Product Characteristics

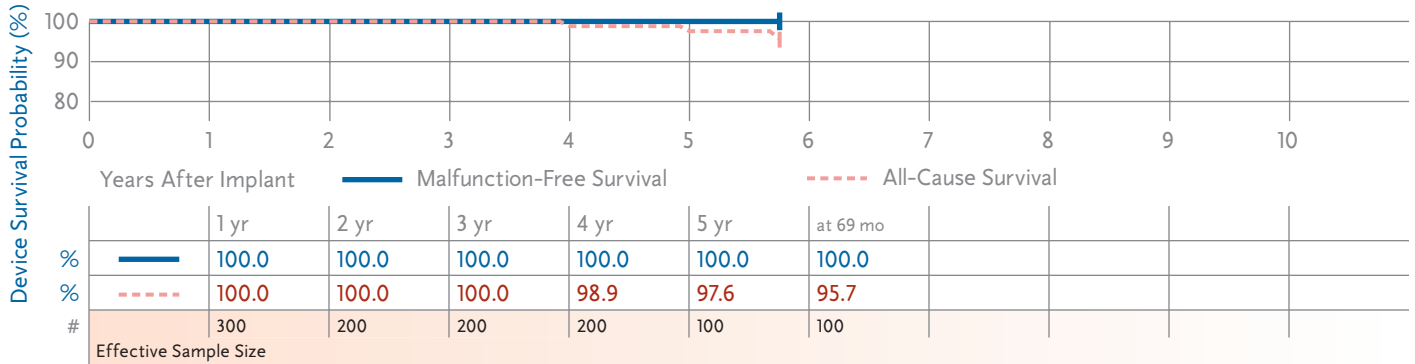
US Market Release	Mar-01	NBG Code	DDD/RO
Registered US Implants	14,000	Serial Number Prefix/X-ray ID	PLJ, PLK
Estimated Active US Implants	8,000	Estimated Longevity	<a href="#">See page 76</a>
Normal Battery Depletions	47		
Malfunctions	3 (0 related to advisory)		
Therapy Function Not Compromised	2 (0 related to advisory)		
Therapy Function Compromised	1 (0 related to advisory)		
Advisories	1 <a href="#">see page 157</a> – 2002 Potential Fractured Power Supply Wires		



**Kappa 700 D** KD701, KD703, KD706

Product Characteristics

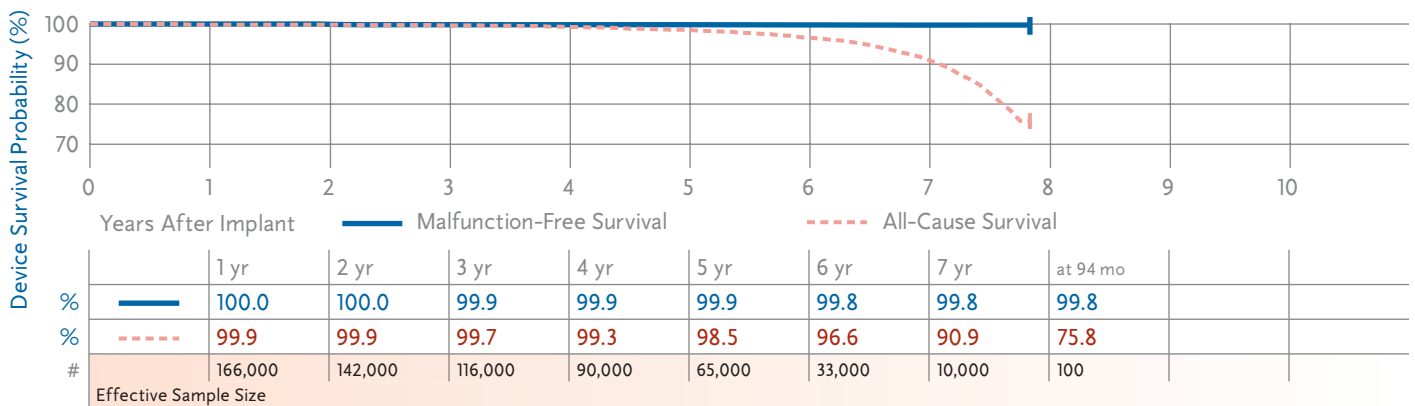
US Market Release	Jan-99	NBG Code	DDD
Registered US Implants	300	Serial Number Prefix/X-ray ID	PHK
Estimated Active US Implants	100	Estimated Longevity	<a href="#">See page 76</a>
Normal Battery Depletions	4		
Malfunctions	0 (0 related to advisory)		
Therapy Function Not Compromised	0 (0 related to advisory)		
Therapy Function Compromised	0 (0 related to advisory)		
Advisories	None <a href="#">see page 157</a> – 2002 Potential Fractured Power Supply Wires		



**Kappa 700 DR** KDR701, KDR703, KDR706

Product Characteristics

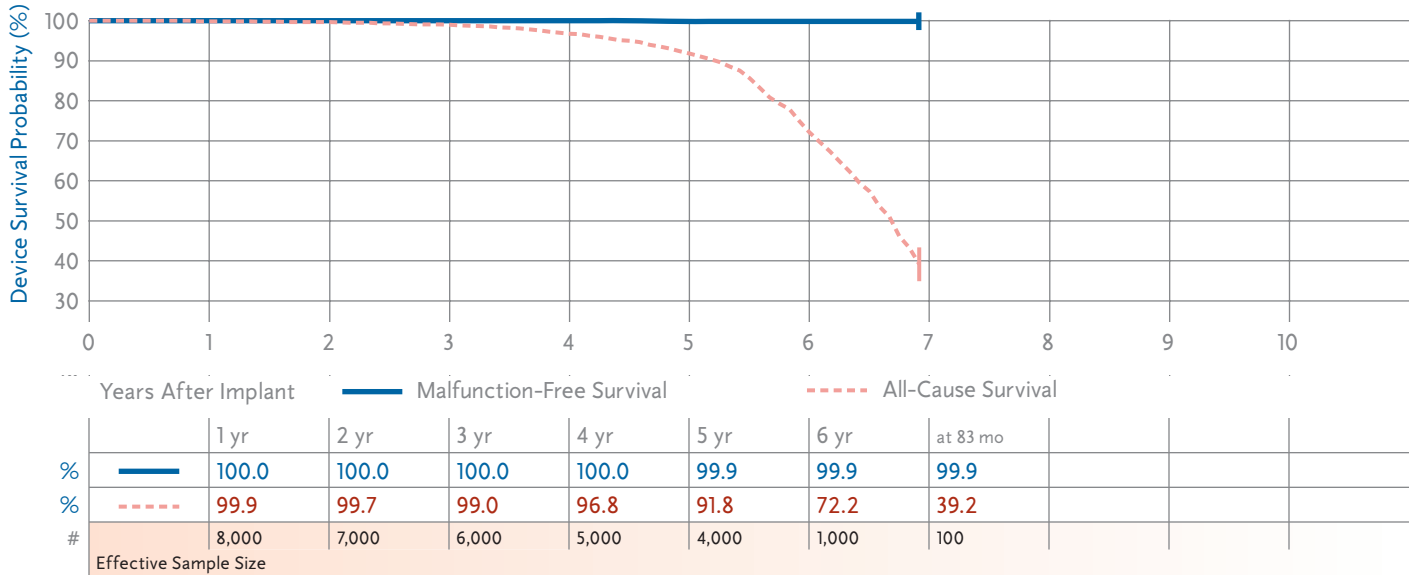
US Market Release	Feb-99	NBG Code	DDD/RO
Registered US Implants	192,000	Serial Number Prefix/X-ray ID	PGU, PGY, PGW
Estimated Active US Implants	104,000	Estimated Longevity	<a href="#">See page 76</a>
Normal Battery Depletions	1,799		
Malfunctions	169 (117 related to advisory)		
Therapy Function Not Compromised	23 (0 related to advisory)		
Therapy Function Compromised	146 (117 related to advisory)		
Advisories	None <a href="#">see page 157</a> – 2002 Potential Fractured Power Supply Wires		



**Kappa 700 DR KDR721**

Product Characteristics

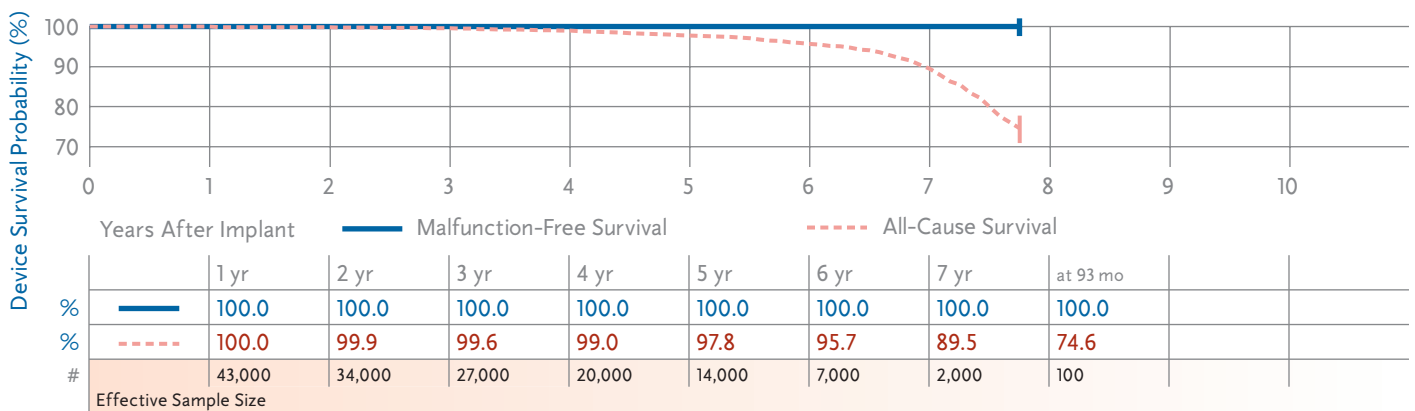
US Market Release	Feb-99	NBG Code	DDD/RO
Registered US Implants	10,000	Serial Number Prefix/X-ray ID	PGR
Estimated Active US Implants	2,000	Estimated Longevity	<a href="#">See page 76</a>
Normal Battery Depletions	548		
Malfunctions	5 (4 related to advisory)		
Therapy Function Not Compromised	1 (0 related to advisory)		
Therapy Function Compromised	4 (4 related to advisory)		
Advisories	None <a href="#">see page 157</a> – 2002 Potential Fractured Power Supply Wires		



**Kappa 700 SR KSR701, KSR703, KSR706**

Product Characteristics

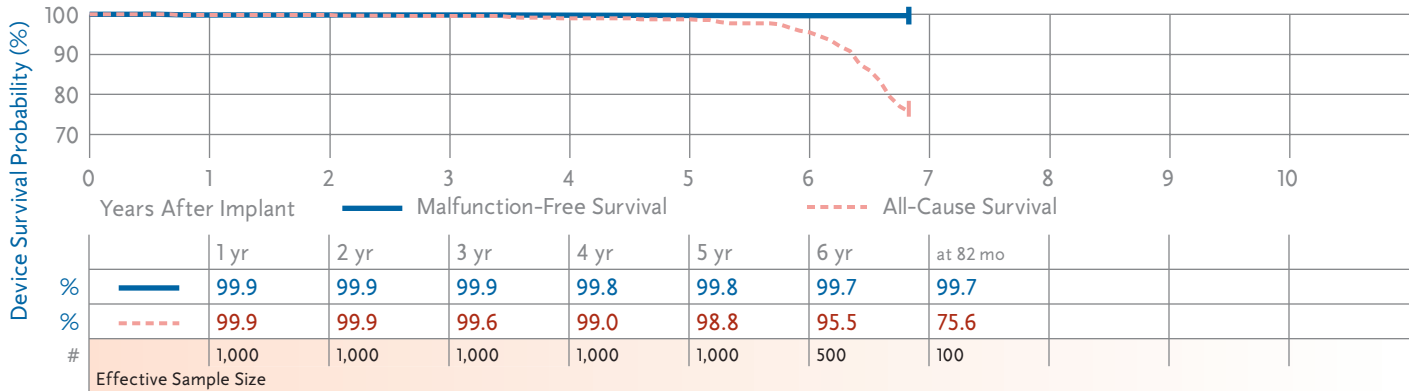
US Market Release	Feb-99	NBG Code	SSI/R
Registered US Implants	55,000	Serial Number Prefix/X-ray ID	PHT, PHW, PHU
Estimated Active US Implants	24,000	Estimated Longevity	<a href="#">See page 76</a>
Normal Battery Depletions	513		
Malfunctions	9		
Therapy Function Not Compromised	3		
Therapy Function Compromised	6		
Advisories	None		



**Kappa 700 VDD KVDD701**

Product Characteristics

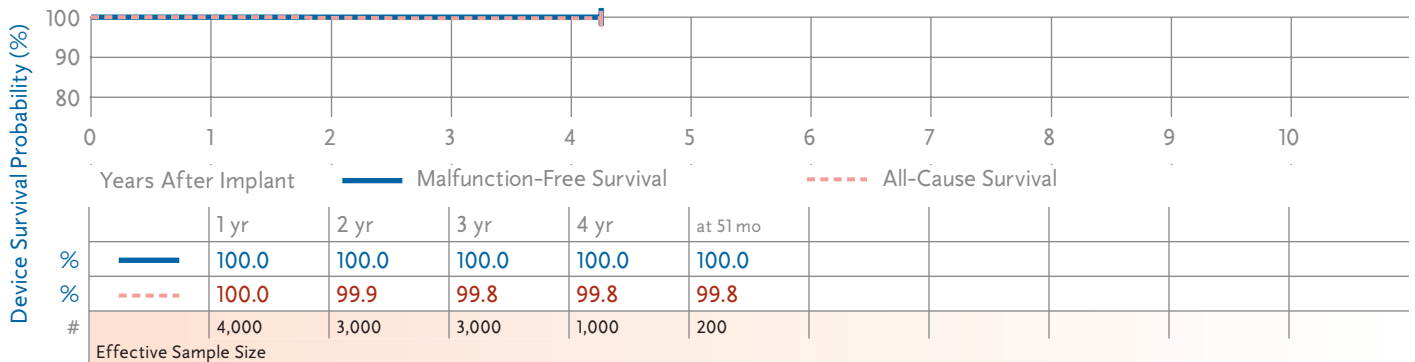
US Market Release	Jan-99	NBG Code	VDD/RO
Registered US Implants	2,000	Serial Number Prefix/X-ray ID	PHP
Estimated Active US Implants	1,000	Estimated Longevity	<a href="#">See page 76</a>
Normal Battery Depletions	42		
Malfunctions	3 (3 related to advisory)		
Therapy Function Not Compromised	0 (0 related to advisory)		
Therapy Function Compromised	3 (3 related to advisory)		
Advisories	None <a href="#">see page 157</a> – 2002 Potential Fractured Power Supply Wires		



**Kappa 800 DR KDR801, KDR803**

Product Characteristics

US Market Release	Jan-02	NBG Code	DDD/RO
Registered US Implants	4,000	Serial Number Prefix/X-ray ID	PKW, PKY
Estimated Active US Implants	3,000	Estimated Longevity	<a href="#">See page 76</a>
Normal Battery Depletions	3		
Malfunctions	0		
Therapy Function Not Compromised	0		
Therapy Function Compromised	0		
Advisories	None		

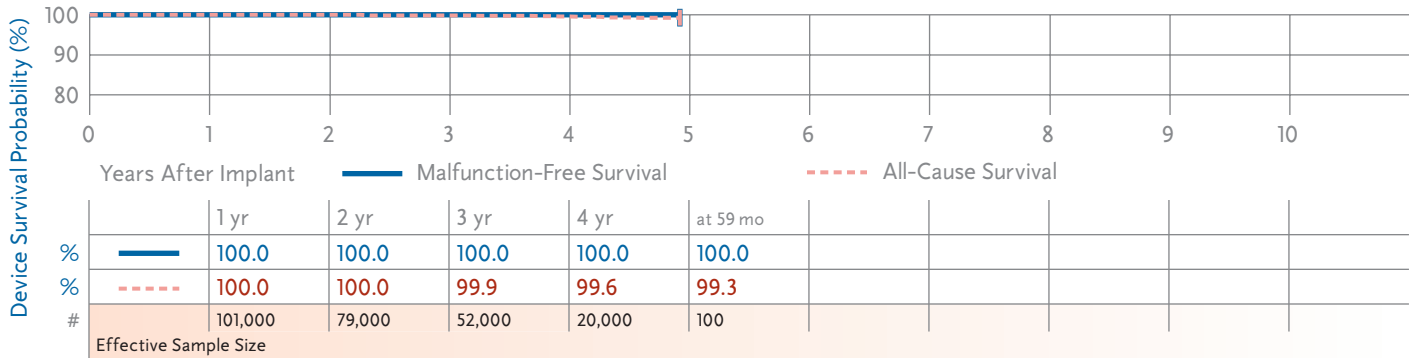


**Kappa 900 DR** KDR901, KDR903, KDR906

Product Characteristics

US Market Release	Jan-02
Registered US Implants	124,000
Estimated Active US Implants	90,000
Normal Battery Depletions	87
Malfunctions	16
Therapy Function Not Compromised	9
Therapy Function Compromised	7
Advisories	None

NBG Code	DDD/RO
Serial Number Prefix/X-ray ID	PKM, PKN, PKP
Estimated Longevity	<a href="#">See page 76</a>

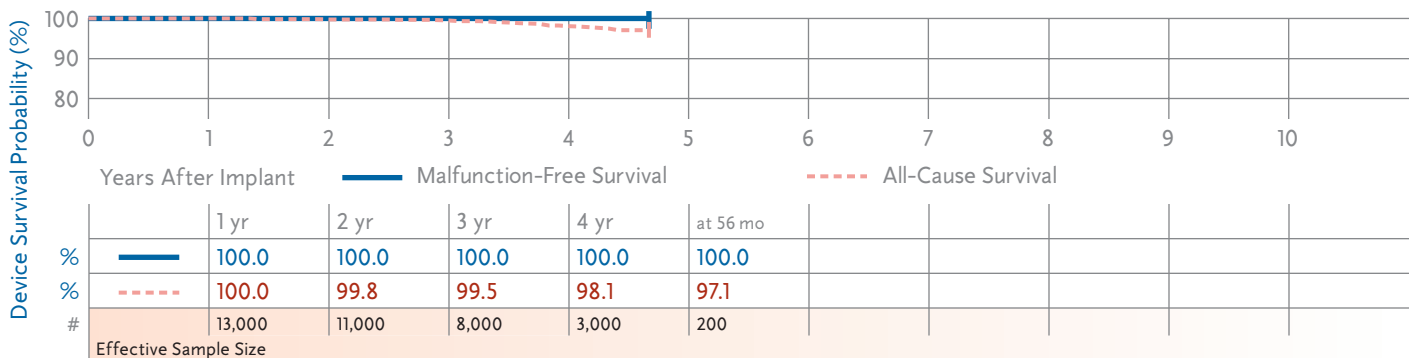


**Kappa 920 DR** KDR921

Product Characteristics

US Market Release	Jan-02
Registered US Implants	16,000
Estimated Active US Implants	11,000
Normal Battery Depletions	60
Malfunctions	1
Therapy Function Not Compromised	0
Therapy Function Compromised	1
Advisories	None

NBG Code	DDD/RO
Serial Number Prefix/X-ray ID	PKR
Estimated Longevity	<a href="#">See page 76</a>



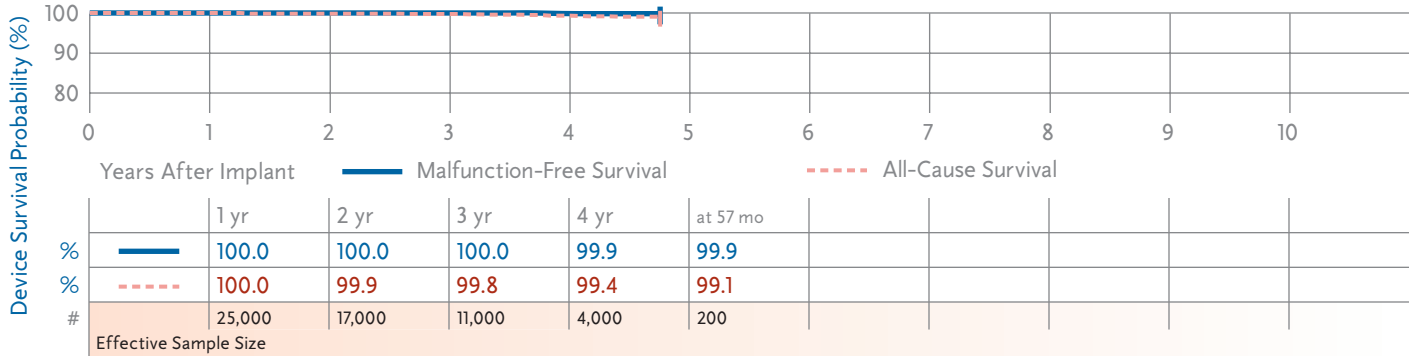


**Kappa 900 SR** KSR901, KSR903, KSR906

Product Characteristics

US Market Release	Jan-02
Registered US Implants	36,000
Estimated Active US Implants	24,000
Normal Battery Depletions	28
Malfunctions	8
Therapy Function Not Compromised	7
Therapy Function Compromised	1
Advisories	None

NBG Code	SSI/R
Serial Number Prefix/X-ray ID	PLF, PLG, PLH
Estimated Longevity	<a href="#">See page 76</a>

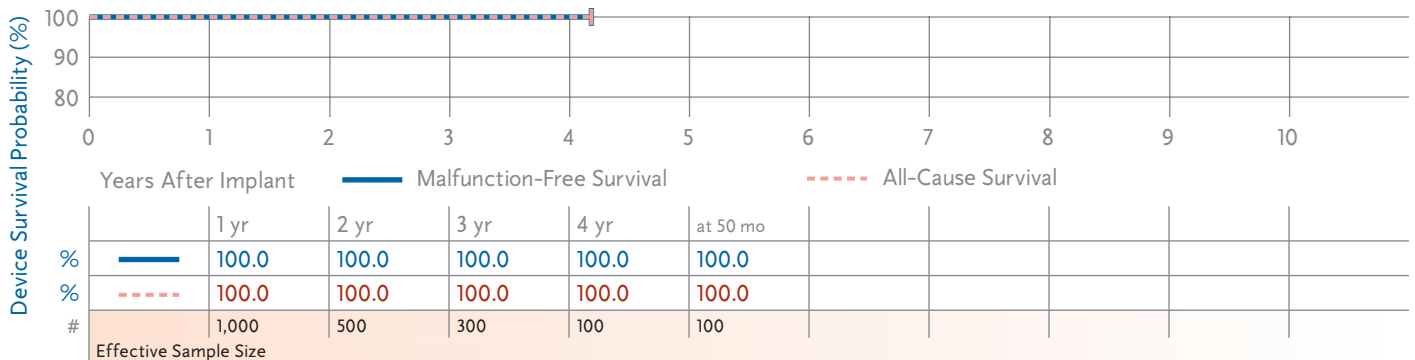


**Kappa 900 VDD** KVDD901

Product Characteristics

US Market Release	Jan-02
Registered US Implants	1,000
Estimated Active US Implants	400
Normal Battery Depletions	0
Malfunctions	0
Therapy Function Not Compromised	0
Therapy Function Compromised	0
Advisories	None

NBG Code	VDD
Serial Number Prefix/X-ray ID	PLE
Estimated Longevity	<a href="#">See page 76</a>

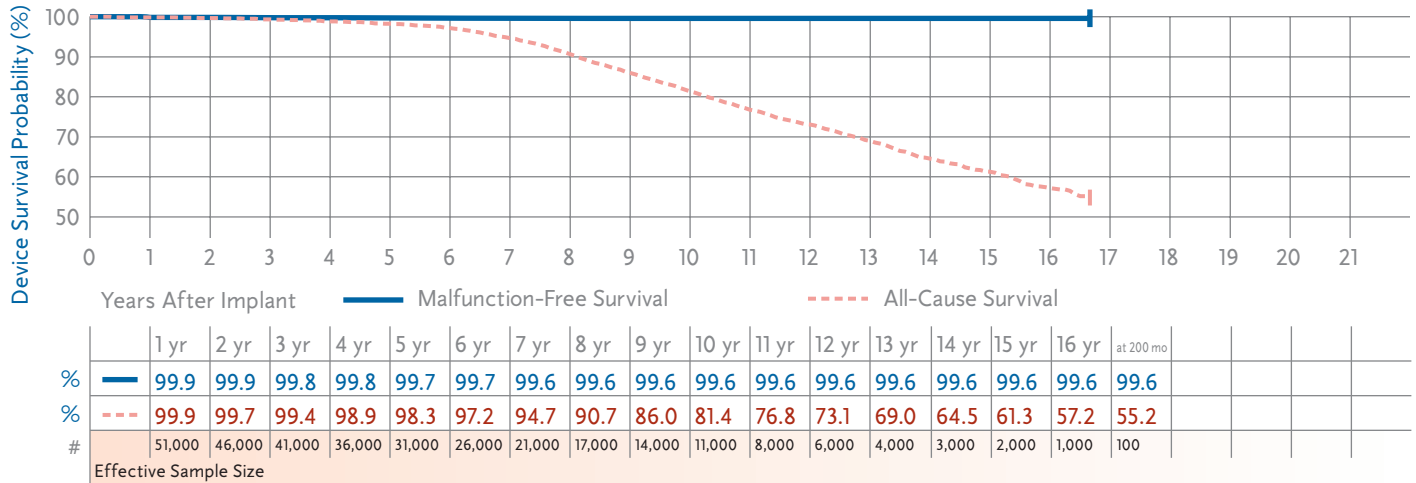


**Legend 8416, 8417, 8417M, 8418, 8419**

**Product Characteristics**

US Market Release	Aug-89
Registered US Implants	57,000
Estimated Active US Implants	3,000
Normal Battery Depletions	2,603
Malfunctions	145
Advisories	None

NBG Code	SSIRO
Serial Number Prefix/X-ray ID	XT, WJ, WN, ZT
Estimated Longevity	<a href="#">See page 76</a>

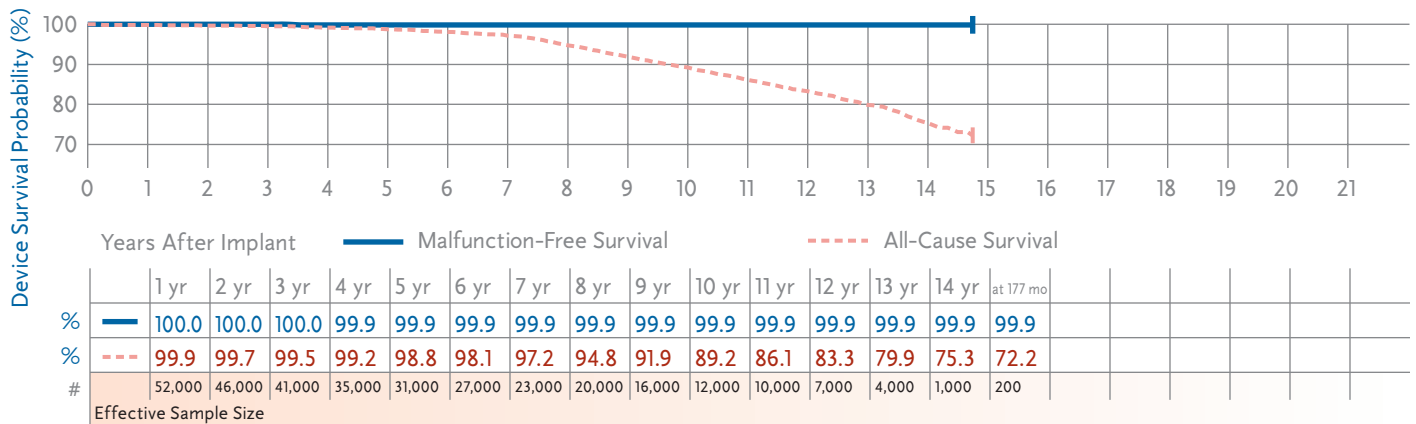


**Legend II 8424, 8426, 8427**

**Product Characteristics**

US Market Release	Nov-91
Registered US Implants	59,000
Estimated Active US Implants	6,000
Normal Battery Depletions	1,671
Malfunctions	37
Advisories	None

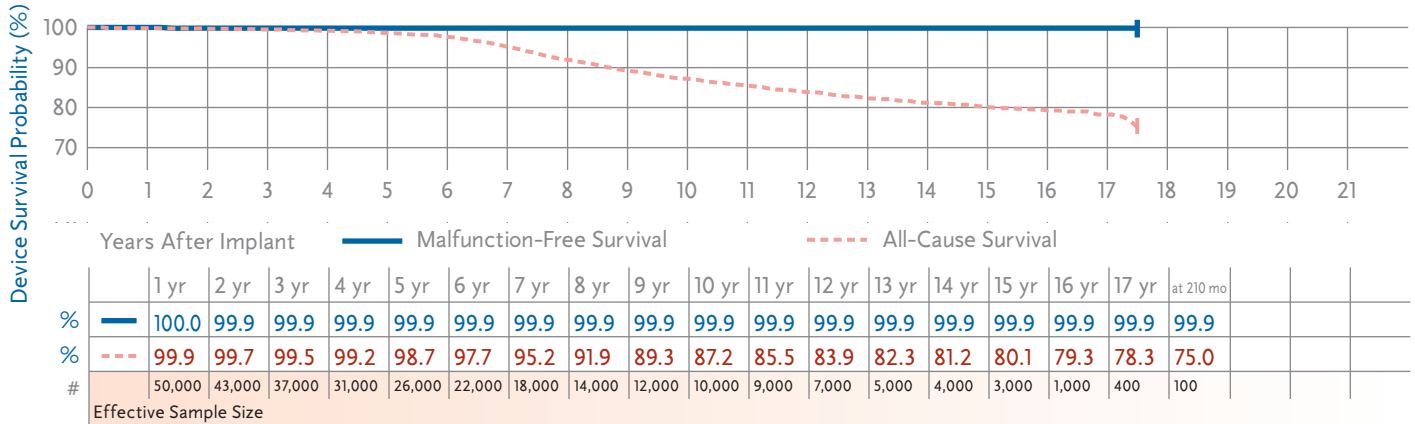
NBG Code	SSIRO
Serial Number Prefix/X-ray ID	2P, 2T, 2U
Estimated Longevity	<a href="#">See page 76</a>



**Minix/Minix ST 8330, 8331, 8331M, 8340, 8341, 8341M, 8342**

Product Characteristics

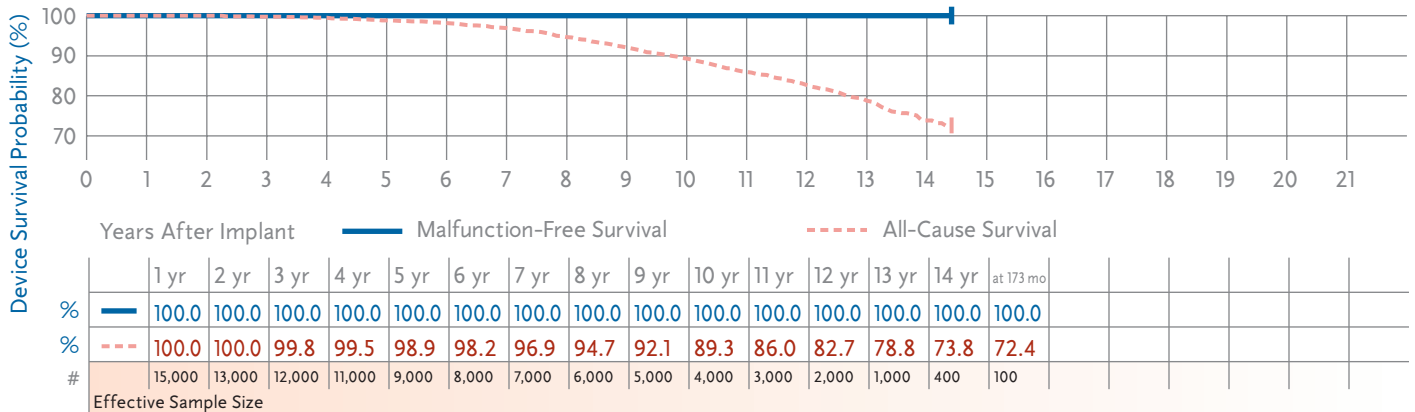
US Market Release	Dec-89	NBG Code	SSIRO
Registered US Implants	58,000	Serial Number Prefix/X-ray ID	2P, 2T, 2U
Estimated Active US Implants	5,000	Estimated Longevity	<a href="#">See page 76</a>
Normal Battery Depletions	1,446		
Malfunctions	49		
Advisories	1 <a href="#">see page 162</a> – 1991 Potential Delayed Restoration of Permanent Settings		



**Minuet 7107, 7108**

Product Characteristics

US Market Release	Mar-92	NBG Code	DDDCO
Registered US Implants	17,000	Serial Number Prefix/Xray ID	1Z1, 2G1
Estimated Active US Implants	2,000	Estimated Longevity	<a href="#">See page 76</a>
Normal Battery Depletions	552		
Malfunctions	4		
Advisories	None		

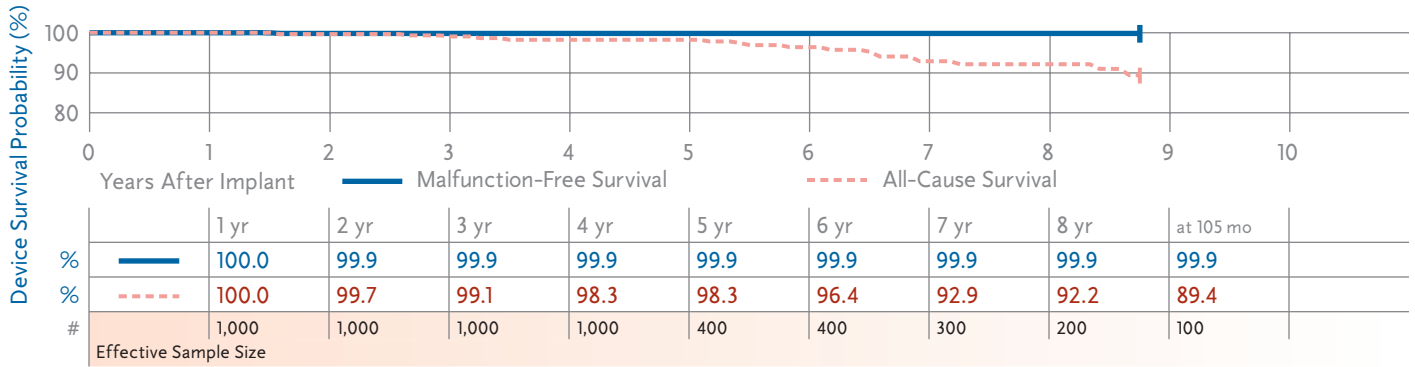


**Preva D 7068**

Product Characteristics

US Market Release	Nov-96
Registered US Implants	1,000
Estimated Active US Implants	200
Normal Battery Depletions	19
Malfunctions	1
Advisories	None

NBG Code	DDDCO
Serial Number Prefix/X-ray ID	PIE
Estimated Longevity	<a href="#">See page 76</a>

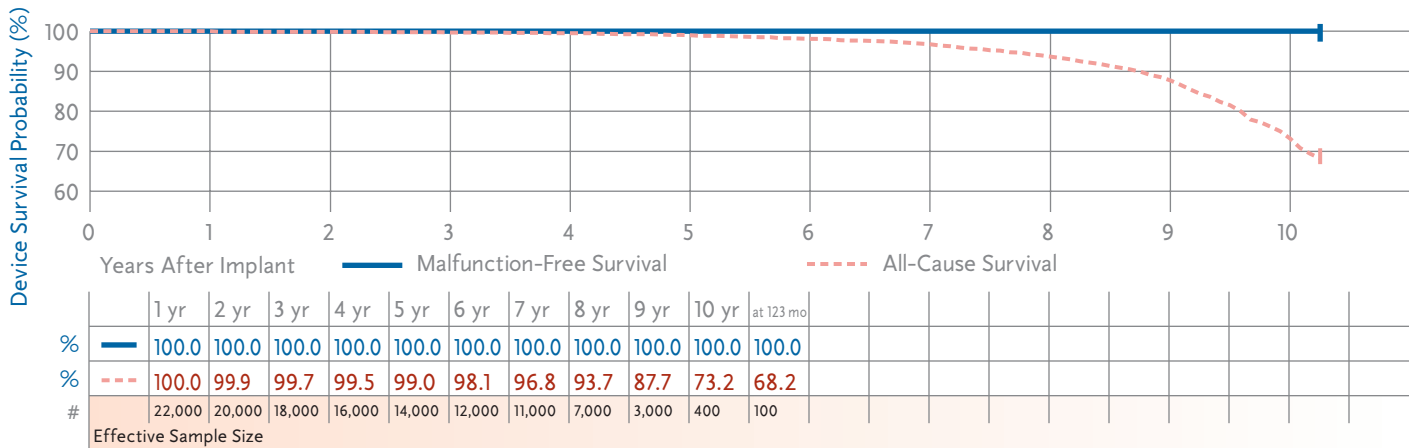


**Preva DR 7088, 7089**

Product Characteristics

US Market Release	Jul-96
Registered US Implants	26,000
Estimated Active US Implants	7,000
Normal Battery Depletions	628
Malfunctions	3
Advisories	None

NBG Code	DDD/RO
Serial Number Prefix/X-ray ID	PGJ, PGK
Estimated Longevity	<a href="#">See page 77</a>

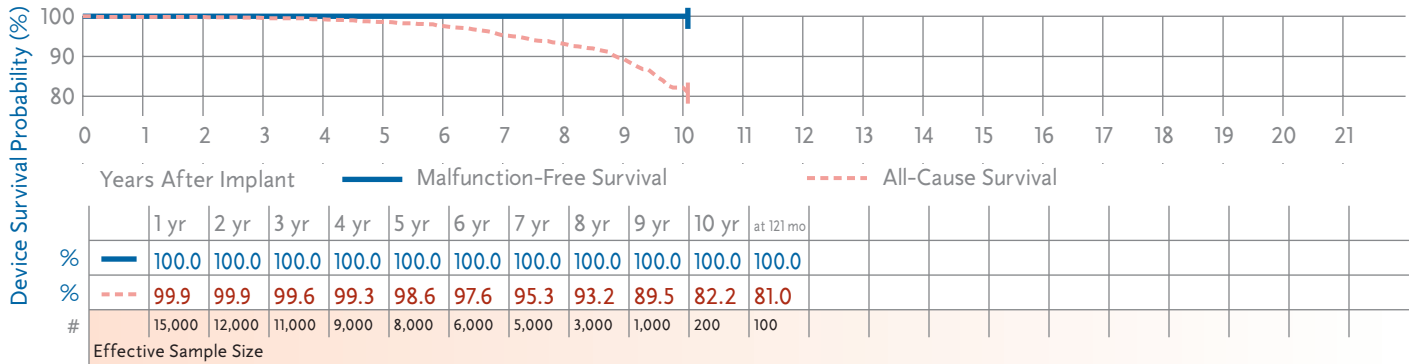


**Preva SR 8088, 8089**

Product Characteristics

US Market Release	Jul-96
Registered US Implants	18,000
Estimated Active US Implants	4,000
Normal Battery Depletions	288
Malfunctions	1
Advisories	None

NBG Code	SSI/R
Serial Number Prefix/X-ray ID	PGL, PGM
Estimated Longevity	<a href="#">See page 77</a>

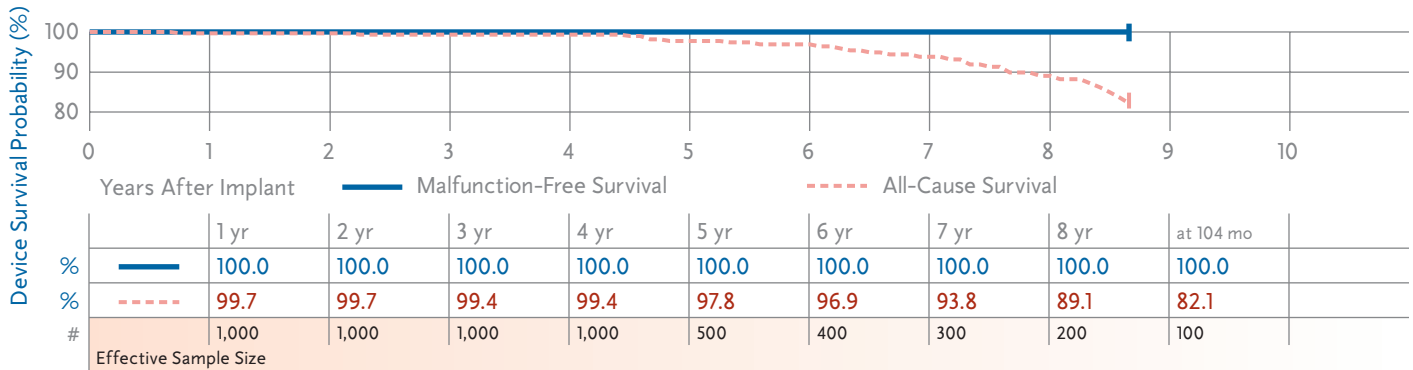


**Preva ST DR 7078**

Product Characteristics

US Market Release	Nov-96
Registered US Implants	1,000
Estimated Active US Implants	200
Normal Battery Depletions	32
Malfunctions	0
Advisories	None

NBG Code	DDD/RO
Serial Number Prefix/X-ray ID	PIF
Estimated Longevity	<a href="#">See page 77</a>

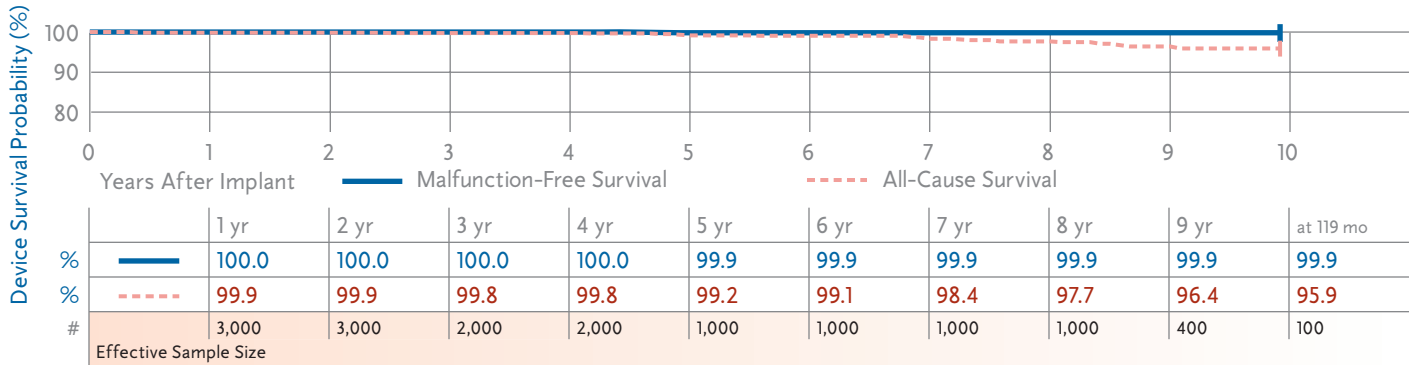


**Prevail S 8085, 8086**

Product Characteristics

US Market Release	Oct-95
Registered US Implants	4,000
Estimated Active US Implants	1,000
Normal Battery Depletions	19
Malfunctions	1
Advisories	None

NBG Code	SSI
Serial Number Prefix/X-ray ID	PGL, PGM
Estimated Longevity	<a href="#">See page 77</a>

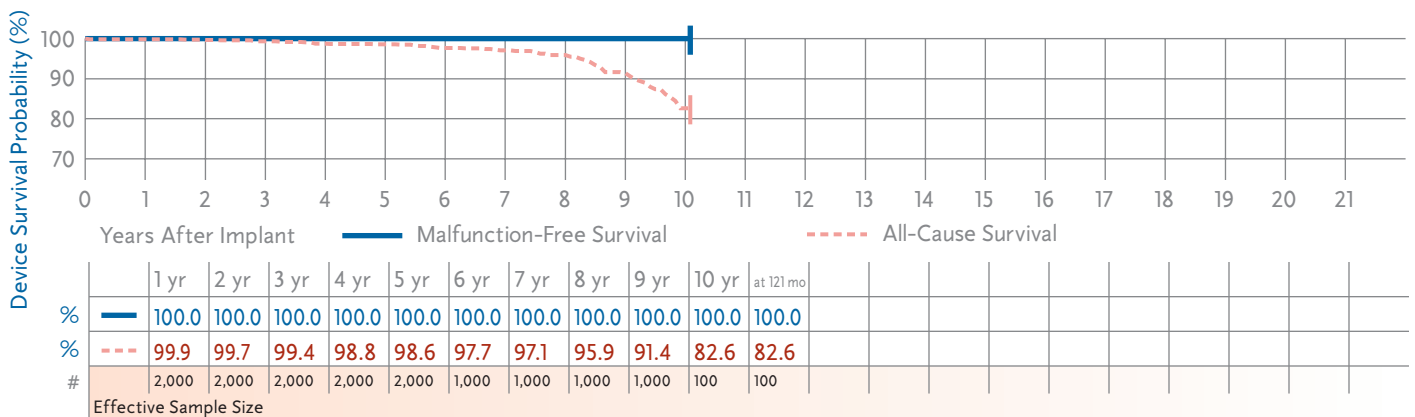


**Prodigy D 7864, 7865, 7866**

Product Characteristics

US Market Release	Oct-95
Registered US Implants	3,000
Estimated Active US Implants	1,000
Normal Battery Depletions	64
Malfunctions	0
Advisories	None

NBG Code	DDDCO
Serial Number Prefix/X-ray ID	PDL, PDM, PDN
Estimated Longevity	<a href="#">See page 77</a>

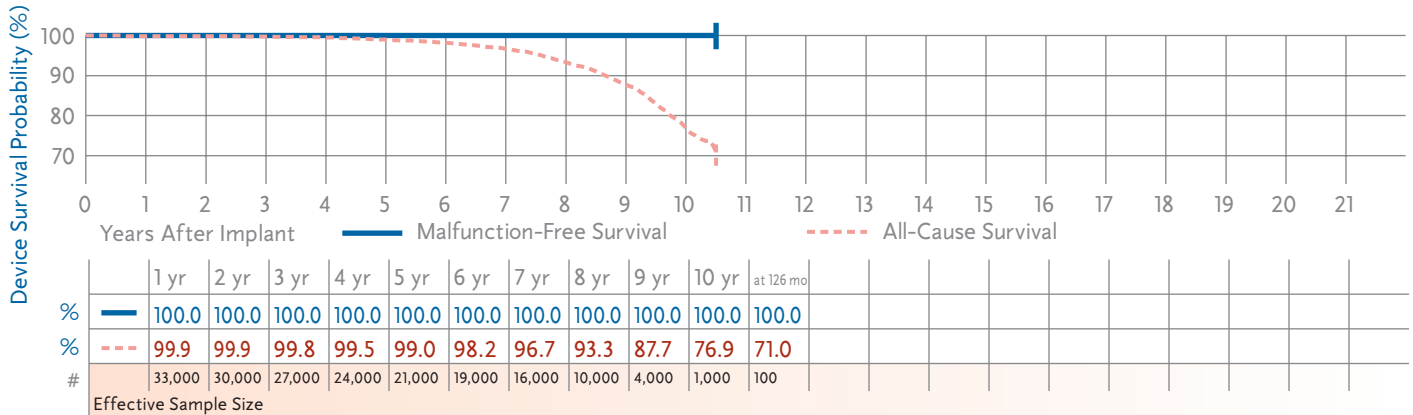


**Prodigy DR 7860, 7861, 7862**

Product Characteristics

US Market Release	Oct-95
Registered US Implants	37,000
Estimated Active US Implants	11,000
Normal Battery Depletions	868
Malfunctions	11
Advisories	None

NBG Code	DDD/RO
Serial Number Prefix/X-ray ID	PDH, PDJ, PDK
Estimated Longevity	<a href="#">See page 77</a>

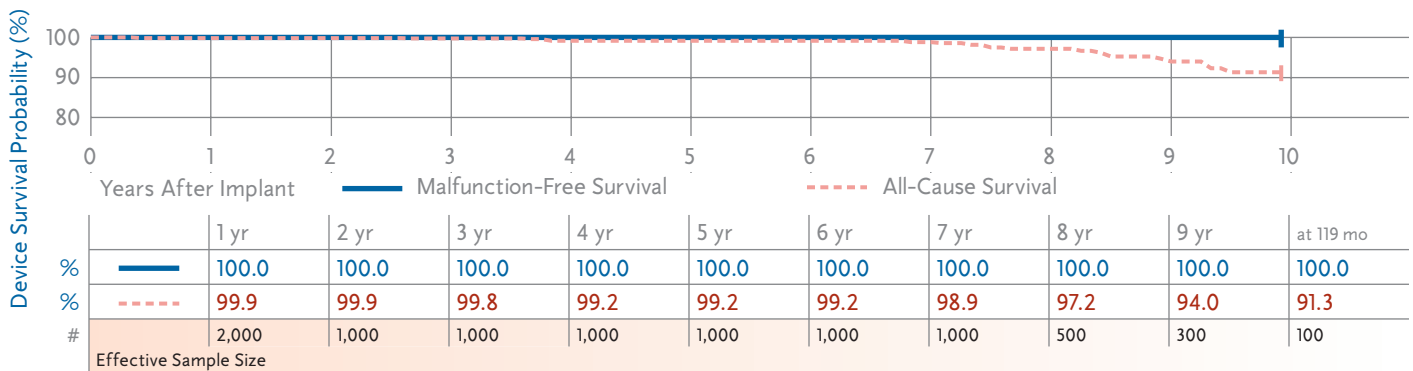


**Prodigy S 8164, 8165, 8166**

Product Characteristics

US Market Release	Oct-95
Registered US Implants	2,000
Estimated Active US Implants	400
Normal Battery Depletions	22
Malfunctions	0
Advisories	None

NBG Code	SSIC
Serial Number Prefix/X-ray ID	PEG, PEH, PEJ
Estimated Longevity	<a href="#">See page 77</a>

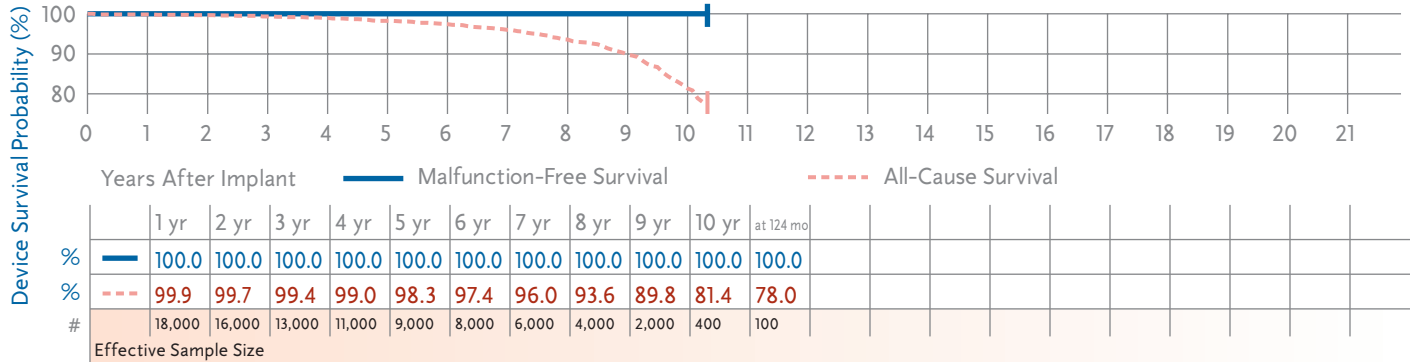


**Prodigy SR 8158, 8160, 8161, 8162**

Product Characteristics

US Market Release	Oct-95
Registered US Implants	22,000
Estimated Active US Implants	5,000
Normal Battery Depletions	354
Malfunctions	5
Advisories	None

NBG Code	SSI/R
Serial Number Prefix/X-ray ID	PEM, PED, PEE, PEF
Estimated Longevity	<a href="#">See page 77</a>



**Sensia DR SEDR01, SED01**

Product Characteristics

US Market Release	Jul-06
Registered US Implants	2,000
Estimated Active US Implants	1,000
Normal Battery Depletions	0
Malfunctions	0
Therapy Function Not Compromised	0
Therapy Function Compromised	0
Advisories	None

NBG Code	DDD, DDDR
Serial Number Prefix/X-ray ID	PWL, PWK
Estimated Longevity	<a href="#">See page 77</a>





**Sensia SR SESR01, SES01**

Product Characteristics

US Market Release	Jul-06
Registered US Implants	1,000
Estimated Active US Implants	1,000
Normal Battery Depletions	0
Malfunctions	0
Therapy Function Not Compromised	0
Therapy Function Compromised	0
Advisories	None

NBG Code	SSIR, SSI
Serial Number Prefix/X-ray ID	PWR, PWS
Estimated Longevity	<a href="#">See page 77</a>

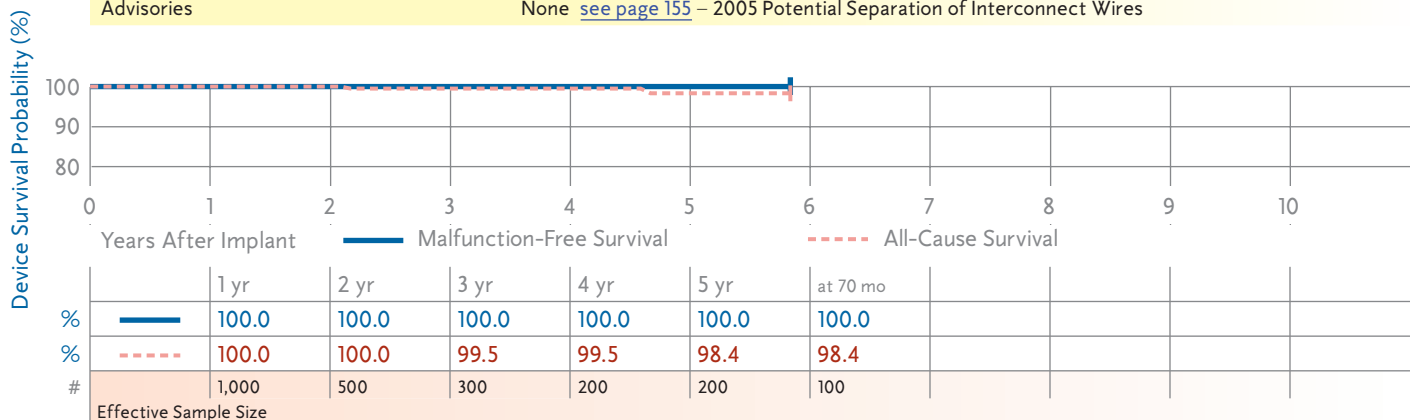


**Sigma 100 S SS103, SS106**

Product Characteristics

US Market Release	Aug-99
Registered US Implants	1,000
Estimated Active US Implants	200
Normal Battery Depletions	3
Malfunctions	0 (0 related to advisory)
Therapy Function Not Compromised	0 (0 related to advisory)
Therapy Function Compromised	0 (0 related to advisory)
Advisories	None <a href="#">see page 155</a> – 2005 Potential Separation of Interconnect Wires

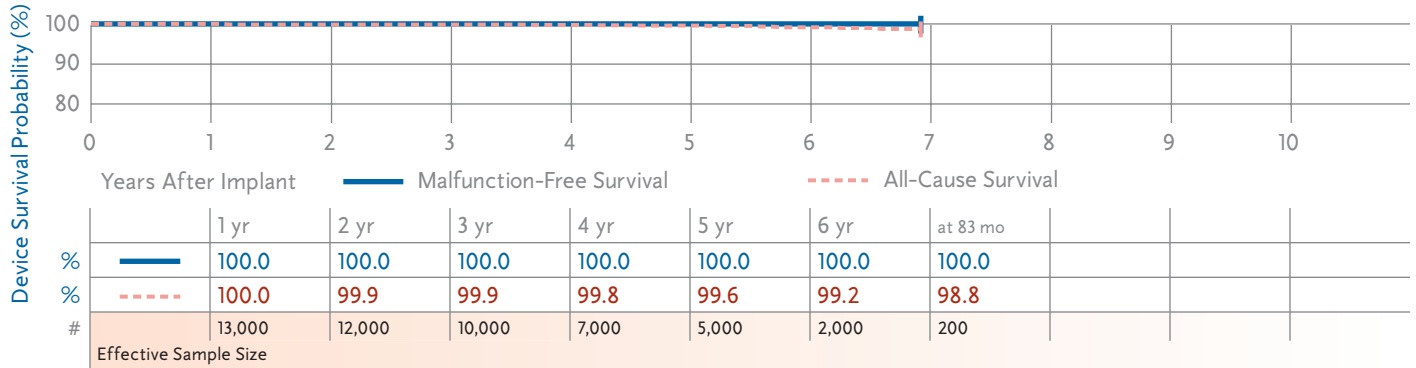
NBG Code	SSI
Serial Number Prefix/X-ray ID	PJG, PJH
Estimated Longevity	<a href="#">See page 77</a>



**Sigma 200 DR SDR203**

Product Characteristics

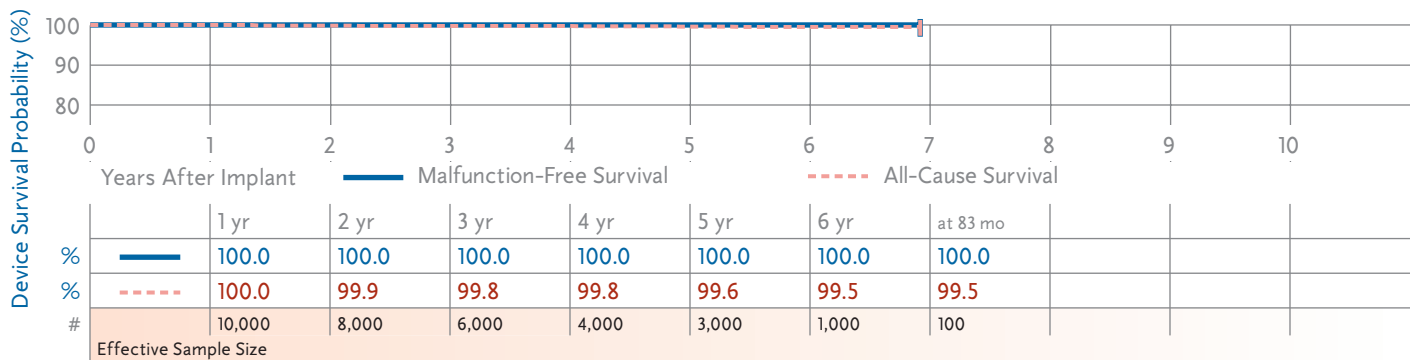
US Market Release	Aug-99	NBG Code	DDD/RO
Registered US Implants	16,000	Serial Number Prefix/X-ray ID	PJD
Estimated Active US Implants	8,000	Estimated Longevity	<a href="#">See page 77</a>
Normal Battery Depletions	23		
Malfunctions	3 (0 related to advisory)		
Therapy Function Not Compromised	1 (0 related to advisory)		
Therapy Function Compromised	2 (0 related to advisory)		
Advisories	None <a href="#">see page 155</a> – 2005 Potential Separation of Interconnect Wires		



**Sigma 200 SR SSR203**

Product Characteristics

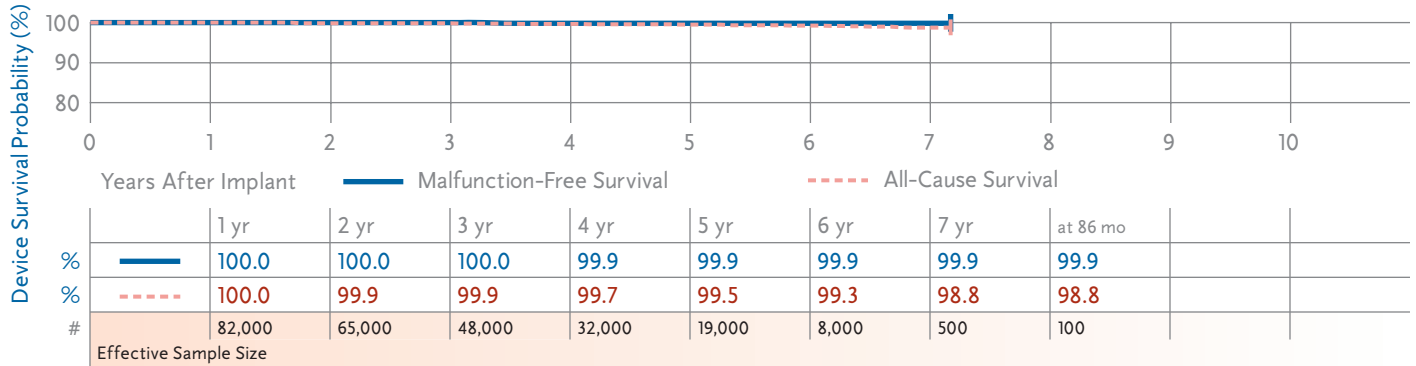
US Market Release	Sep-99	NBG Code	SSI/R
Registered US Implants	12,000	Serial Number Prefix/X-ray ID	PJG
Estimated Active US Implants	5,000	Estimated Longevity	<a href="#">See page 77</a>
Normal Battery Depletions	11		
Malfunctions	2 (2 related to advisory)		
Therapy Function Not Compromised	0 (0 related to advisory)		
Therapy Function Compromised	2 (2 related to advisory)		
Advisories	None <a href="#">see page 155</a> – 2005 Potential Separation of Interconnect Wires		



**Sigma 300 DR SDR303, SDR306**

Product Characteristics

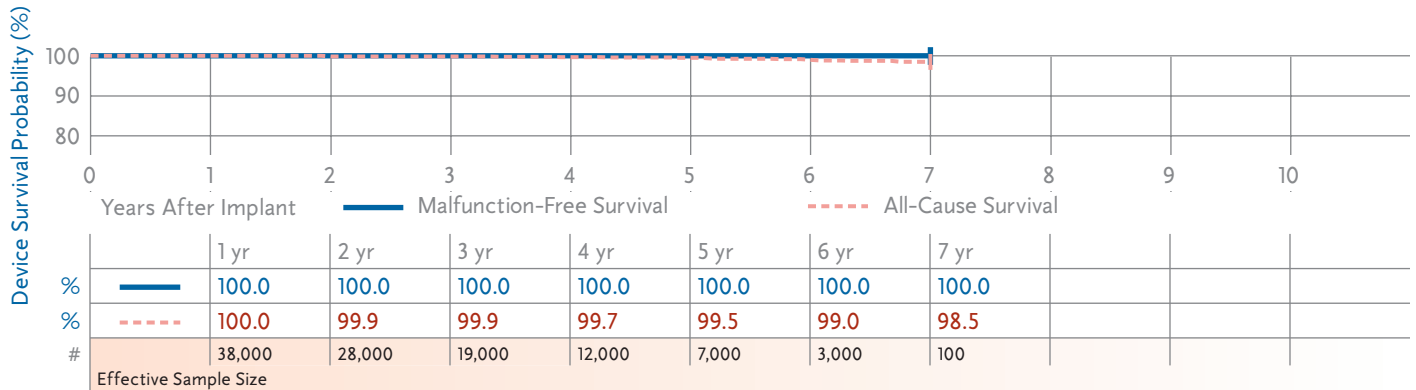
US Market Release	Aug-99	NBG Code	DDD/RO
Registered US Implants	102,000	Serial Number Prefix/X-ray ID	PJD, PJE
Estimated Active US Implants	64,000	Estimated Longevity	<a href="#">See page 77</a>
Normal Battery Depletions	81		
Malfunctions	47 (20 related to advisory)		
Therapy Function Not Compromised	4 (0 related to advisory)		
Therapy Function Compromised	43 (20 related to advisory)		
Advisories	None <a href="#">see page 155</a> – 2005 Potential Separation of Interconnect Wires		



**Sigma 300 SR SSR303, SSR306**

Product Characteristics

US Market Release	Sep-99	NBG Code	SSI/R
Registered US Implants	51,000	Serial Number Prefix/X-ray ID	PJG, PJH
Estimated Active US Implants	26,000	Estimated Longevity	<a href="#">See page 77</a>
Normal Battery Depletions	44		
Malfunctions	8 (5 related to advisory)		
Therapy Function Not Compromised	1 (0 related to advisory)		
Therapy Function Compromised	7 (5 related to advisory)		
Advisories	None <a href="#">see page 155</a> – 2005 Potential Separation of Interconnect Wires		



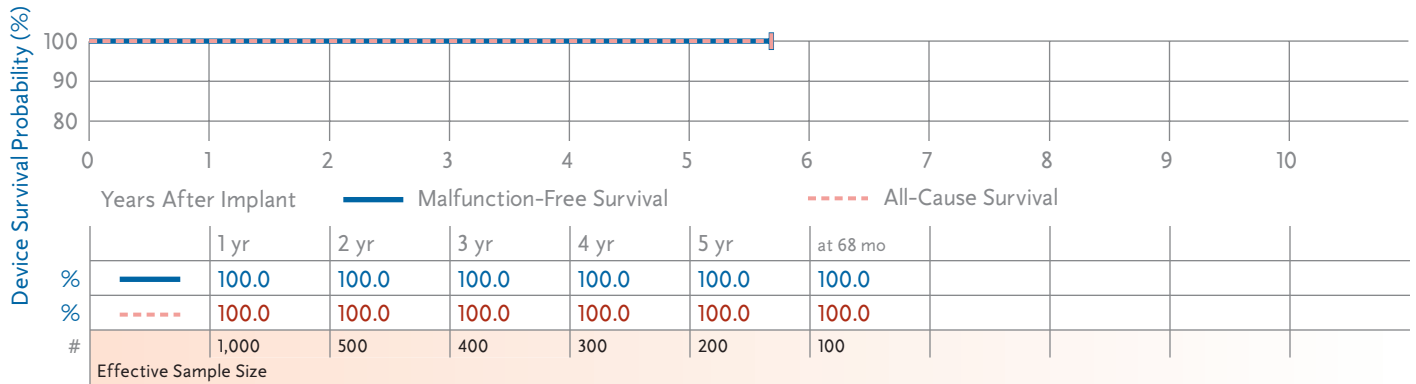
**Sigma 300 VDD SVDD303**

Product Characteristics

US Market Release	Sep-99
Registered US Implants	1,000
Estimated Active US Implants	300
Normal Battery Depletions	0
Malfunctions	0 (0 related to advisory)
Therapy Function Not Compromised	0 (0 related to advisory)
Therapy Function Compromised	0 (0 related to advisory)

NBG Code	VDDD
Serial Number Prefix/X-ray ID	PJD
Estimated Longevity	<a href="#">See page 77</a>

Advisories: None [see page 155](#) – 2005 Potential Separation of Interconnect Wires

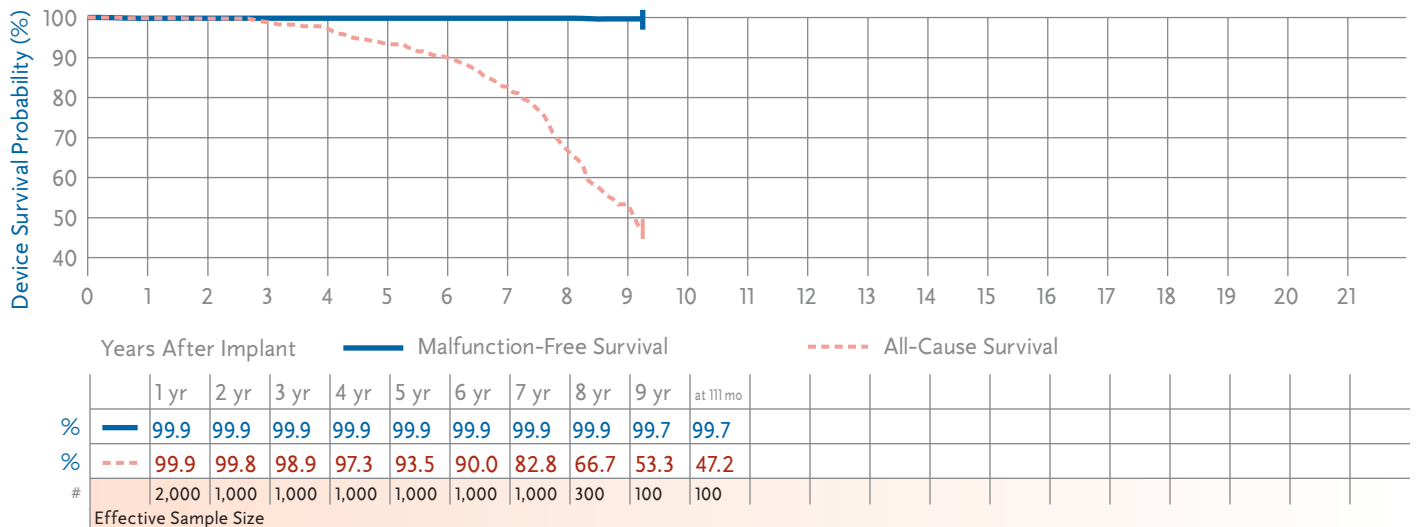


**Thera D 7944, 7945, 7946**

Product Characteristics

US Market Release	Jan-95
Registered US Implants	2,000
Estimated Active US Implants	2
Normal Battery Depletions	175
Malfunctions	2
Advisories	None

NBG Code	DDDCO
Serial Number Prefix/X-ray ID	PBD, PBE, PBF
Estimated Longevity	<a href="#">See page 77</a>

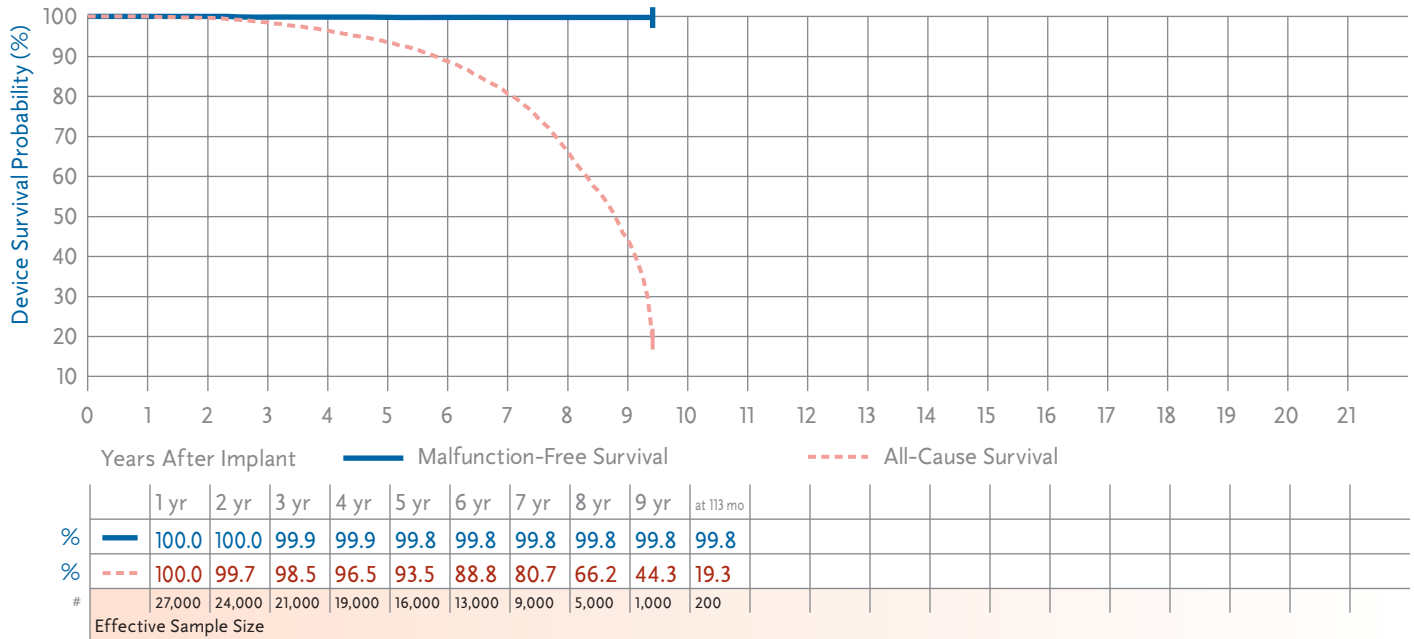


**Thera DR-40 7940, 7941, 7942**

Product Characteristics

US Market Release	Jan-95
Registered US Implants	30,000
Estimated Active US Implants	2
Normal Battery Depletions	2,998
Malfunctions	37
Advisories	None

NBG Code	DDD/RO
Serial Number Prefix/X-ray ID	PAF, PAP, PAT
Estimated Longevity	<a href="#">See page 77</a>

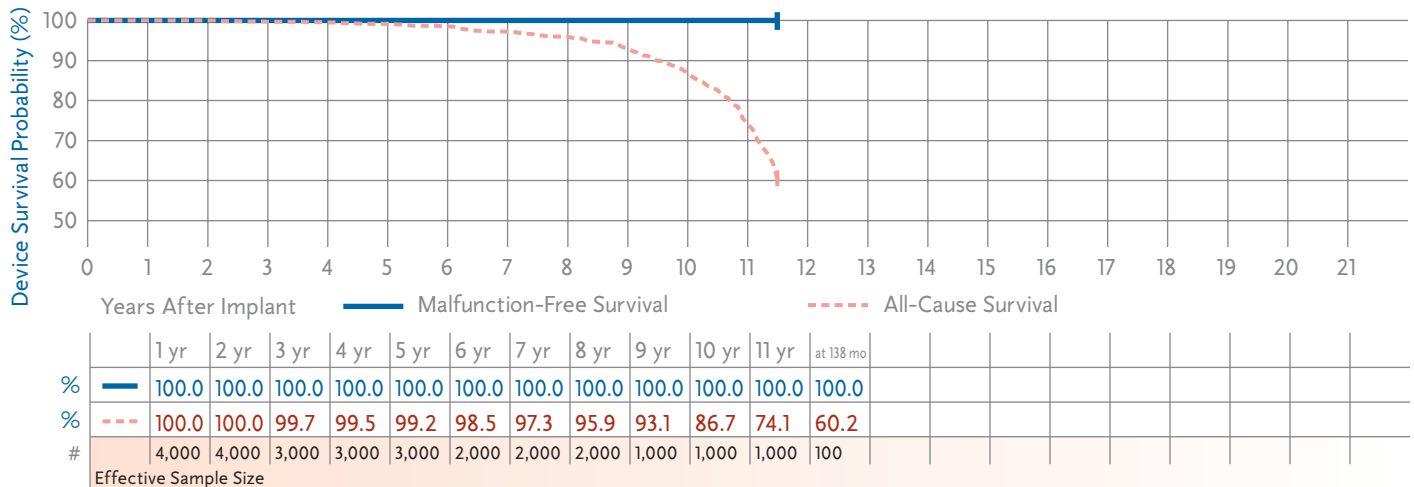


**Thera DR-50 7950, 7951, 7952**

Product Characteristics

US Market Release	Jan-95
Registered US Implants	5,000
Estimated Active US Implants	1,000
Normal Battery Depletions	203
Malfunctions	1
Advisories	None

NBG Code	DDD/RO
Serial Number Prefix/X-ray ID	PBR, PBV, PBW
Estimated Longevity	<a href="#">See page 77</a>

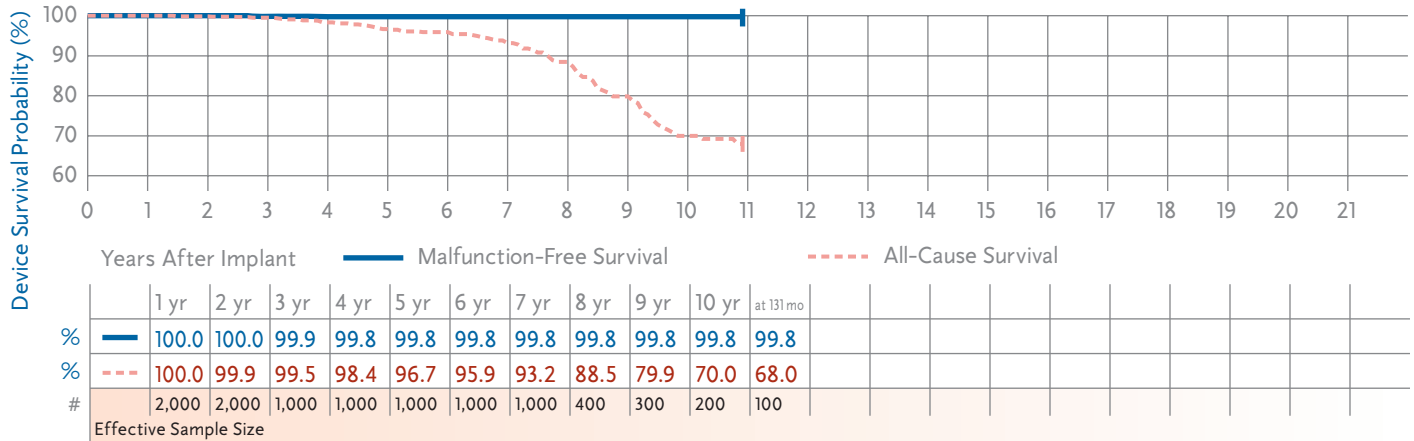


**Thera S 8944, 8945, 8946**

Product Characteristics

US Market Release	Jan-95
Registered US Implants	3,000
Estimated Active US Implants	100
Normal Battery Depletions	81
Malfunctions	3
Advisories	None

NBG Code	SSI/R
Serial Number Prefix/X-ray ID	PBG, PBH, PBJ
Estimated Longevity	<a href="#">See page 78</a>

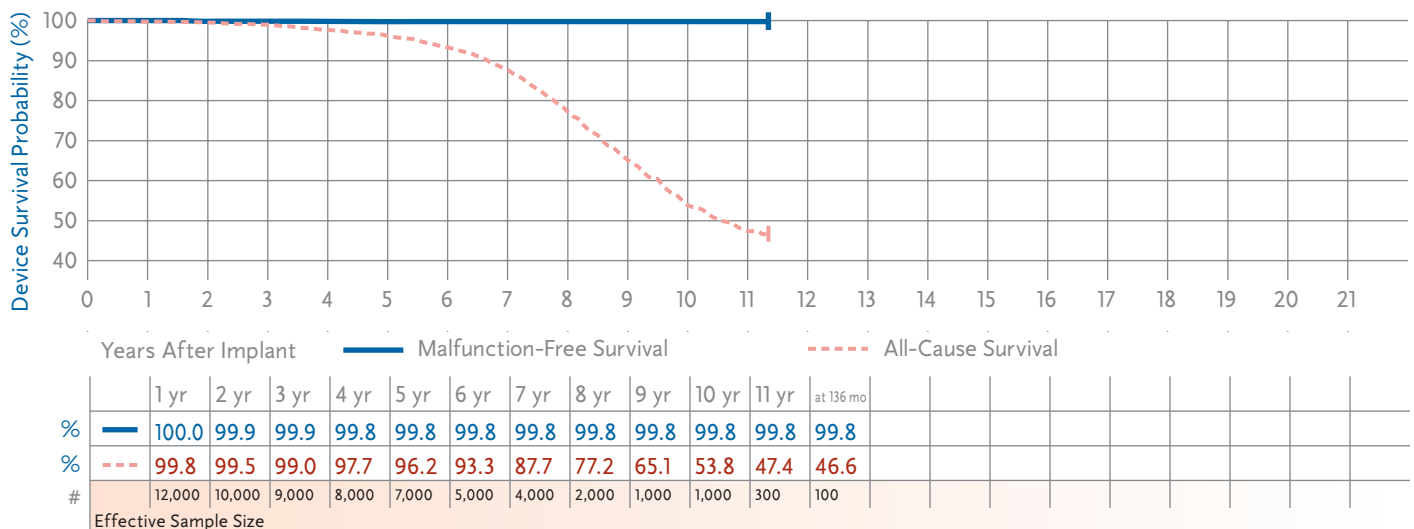


**Thera SR 8940, 8941, 8942**

Product Characteristics

US Market Release	Jan-95
Registered US Implants	14,000
Estimated Active US Implants	300
Normal Battery Depletions	812
Malfunctions	16
Advisories	None

NBG Code	SSI/R
Serial Number Prefix/X-ray ID	PAU, PAV, PAW
Estimated Longevity	<a href="#">See page 78</a>

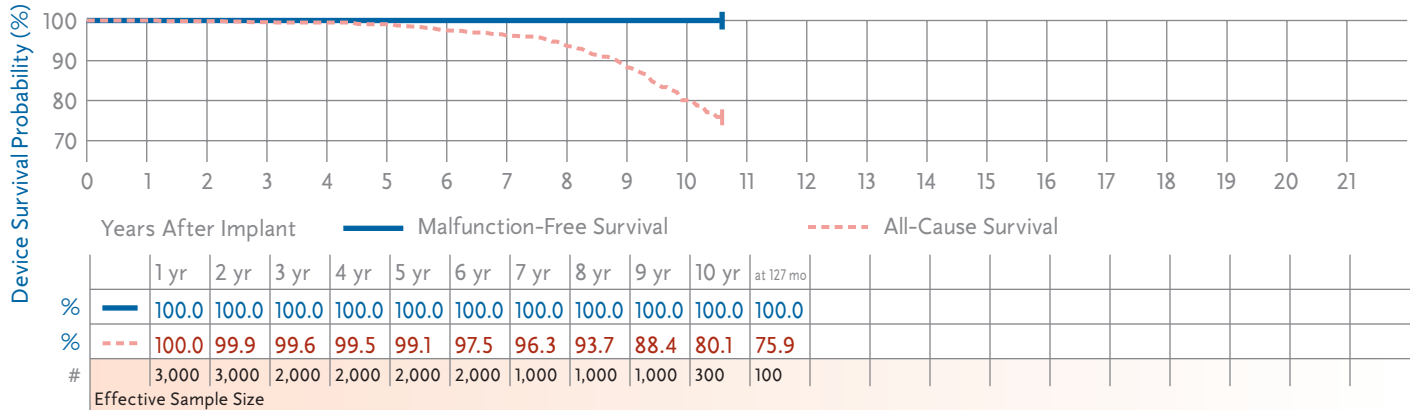


**Thera-i D 7964i, 7965i, 7966i**

Product Characteristics

US Market Release	Oct-95
Registered US Implants	3,000
Estimated Active US Implants	1,000
Normal Battery Depletions	98
Malfunctions	1
Advisories	None

NBG Code	DDDCO
Serial Number Prefix/X-ray ID	PDE, PDF, PDG
Estimated Longevity	<a href="#">See page 78</a>

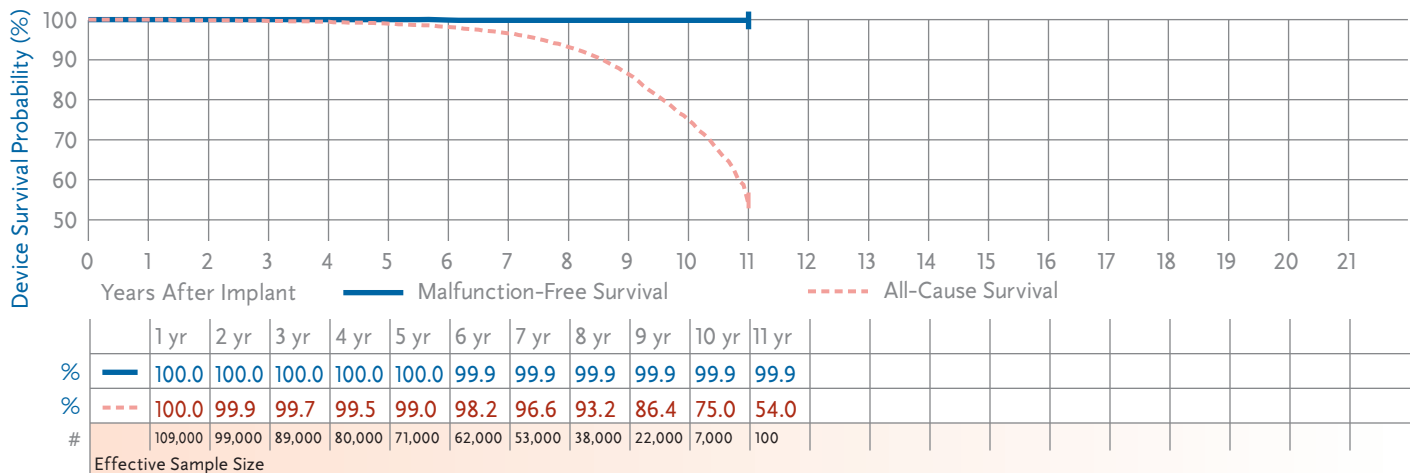


**Thera-i DR 7960i, 7961i, 7962i**

Product Characteristics

US Market Release	Oct-95
Registered US Implants	122,000
Estimated Active US Implants	28,000
Normal Battery Depletions	4,217
Malfunctions	50
Advisories	None

NBG Code	DDD/RO
Serial Number Prefix/X-ray ID	PDB, PDC, PDD
Estimated Longevity	<a href="#">See page 78</a>

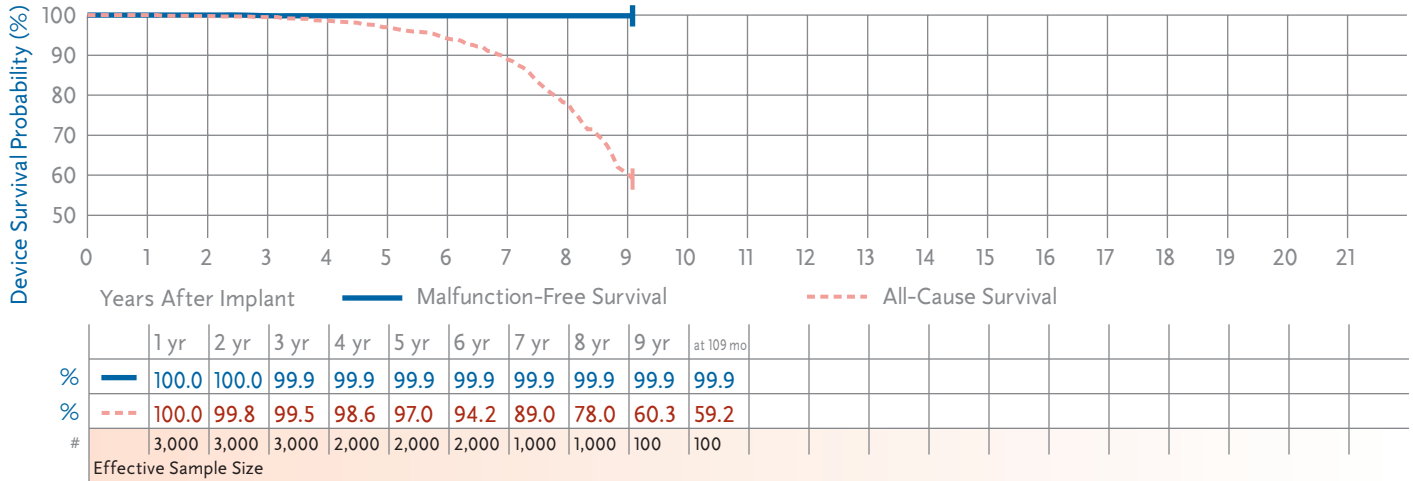


**Thera-i DR 7968i**

Product Characteristics

US Market Release	Jul-96
Registered US Implants	4,000
Estimated Active US Implants	500
Normal Battery Depletions	190
Malfunctions	3
Advisories	None

NBG Code	DDD/RO
Serial Number Prefix/X-ray ID	PGH
Estimated Longevity	<a href="#">See page 78</a>

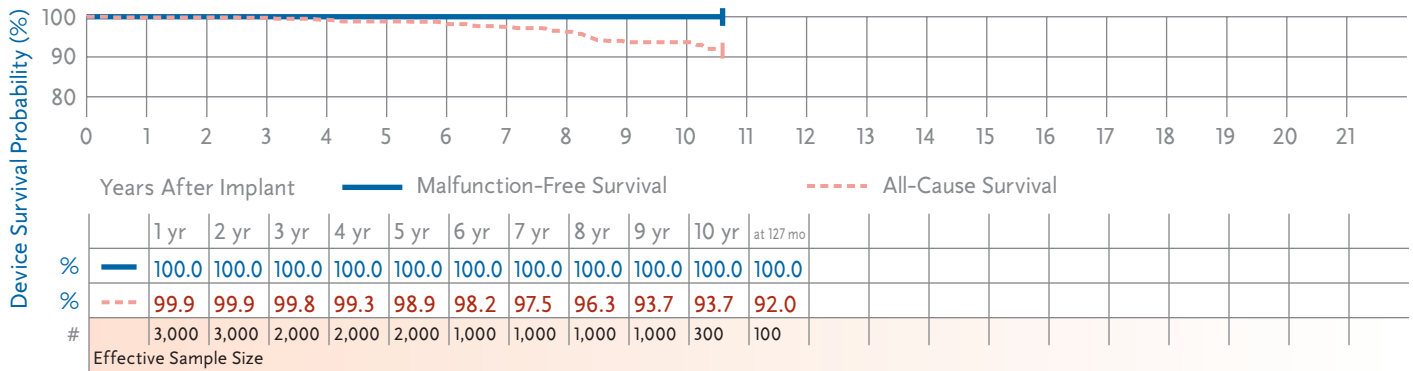


**Thera-i S 8964i, 8965i, 8966i**

Product Characteristics

US Market Release	Oct-95
Registered US Implants	4,000
Estimated Active US Implants	1,000
Normal Battery Depletions	38
Malfunctions	1
Advisories	None

NBG Code	SSIR
Serial Number Prefix/X-ray ID	PDY, PEA, PEB
Estimated Longevity	<a href="#">See page 78</a>



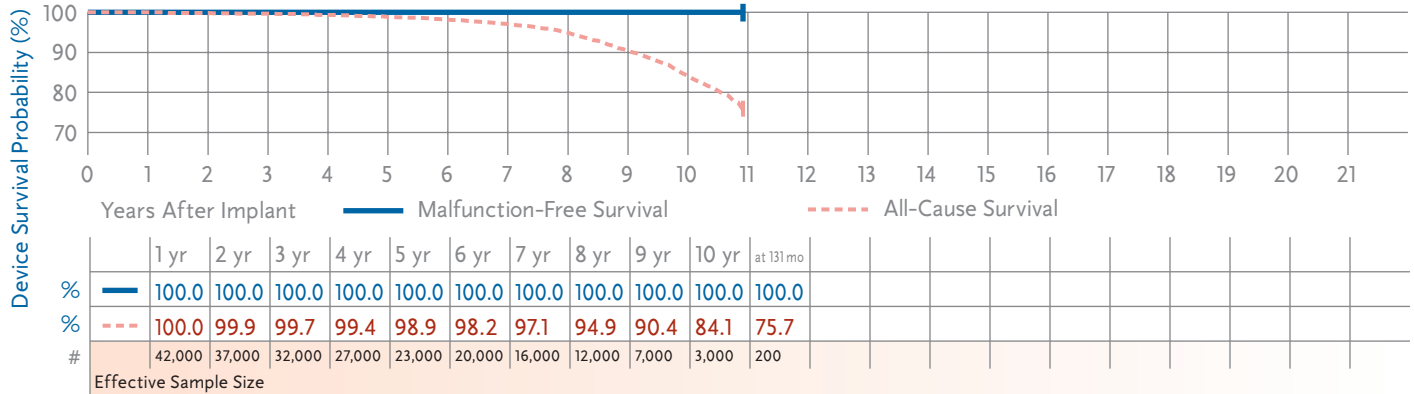


**Thera-i SR 8960i, 8961i, 8962i**

Product Characteristics

US Market Release	Oct-95
Registered US Implants	50,000
Estimated Active US Implants	10,000
Normal Battery Depletions	920
Malfunctions	7
Advisories	None

NBG Code	SSIR
Serial Number Prefix/X-ray ID	PDU, PDV, PDW
Estimated Longevity	<a href="#">See page 78</a>

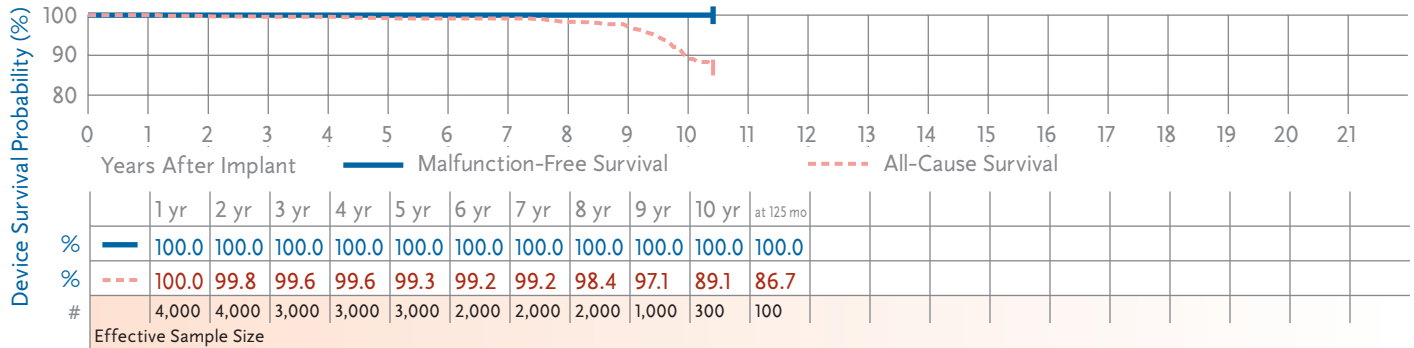


**Thera-i VDD 8968i**

Product Characteristics

US Market Release	Mar-96
Registered US Implants	5,000
Estimated Active US Implants	1,000
Normal Battery Depletions	49
Malfunctions	0
Advisories	None

NBG Code	VDD
Serial Number Prefix/X-ray ID	PEC
Estimated Longevity	<a href="#">See page 78</a>



**Versa DR VEDR01**

Product Characteristics

US Market Release	Jul-06
Registered US Implants	2,000
Estimated Active US Implants	2,000
Normal Battery Depletions	0
Malfunctions	0
Therapy Function Not Compromised	0
Therapy Function Compromised	0
Advisories	None

NBG Code	DDDR
Serial Number Prefix/X-ray ID	PWH
Estimated Longevity	<a href="#">See page 78</a>



**Device Survival Summary** (95% Confidence Interval)

The following table shows IPG device survival estimates with 95% confidence intervals. Estimates are shown both with and without normal battery depletions included.

Family		Model Number	US Market Release	Registered US Implants	Estimated Active US Implants	Normal Battery Depletions	Malfunctions		Device Survival Probability (%)													
							Therapy Function Compromised	Therapy Function Not Compromised	Total	Years After Implant												
							0	0 + 0 = 0	0	1 yr	2 yr	3 yr	4 yr	5 yr	6 yr	7 yr	8 yr	10 yr	12 yr	14 yr	16 yr	
Adapta DR	ADDR01, ADDR03, ADDR06, ADD01	Jul-06	6,000	6,000	0	Malfunction-free	0	0	0	100.0	100.0	100.0	99.3	99.3	99.3	99.8	99.8	99.8	99.8	99.8	99.8	99.8
										+0.0/-0.0 at 3 mo	+0.0/-0.0 at 3 mo	+0.0/-0.0 at 3 mo	+0.4/-1.2 at 61mo	+0.4/-1.2 at 61mo	+0.4/-1.2 at 61mo	+0.0/-0.1 at 61mo	+0.0/-0.1 at 61mo	+0.0/-0.1 at 61mo	+0.0/-0.1 at 157 mo	+0.0/-0.1 at 157 mo	+0.0/-0.1 at 157 mo	+0.0/-0.1 at 157 mo
Adapta SR	ADSR01, ADSR03, ADSR06	Jul-06	1,000	1,000	0	Malfunction-free	0	0	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
										+0.0/-0.0 at 2 mo	+0.0/-0.0 at 2 mo	+0.0/-0.0 at 2 mo	+0.0/-0.0 at 2 mo	+0.0/-0.0 at 2 mo	+0.0/-0.0 at 2 mo	+0.0/-0.0 at 2 mo	+0.0/-0.0 at 2 mo	+0.0/-0.0 at 2 mo	+0.0/-0.0 at 2 mo	+0.0/-0.0 at 2 mo	+0.0/-0.0 at 2 mo	+0.0/-0.0 at 2 mo
AT500	AT501, 7253	Mar-03	11,000	8,000	127	Malfunction-free	4	3	7	100.0	100.0	100.0	99.3	99.3	99.3	99.8	99.8	99.8	99.8	99.8	99.8	99.8
										+0.0/-0.1 at 2 mo	+0.0/-0.1 at 2 mo	+0.0/-0.1 at 2 mo	+0.4/-1.2 at 61mo	+0.4/-1.2 at 61mo	+0.4/-1.2 at 61mo	+0.0/-0.1 at 61mo	+0.0/-0.1 at 61mo	+0.0/-0.1 at 61mo	+0.0/-0.1 at 61mo	+0.0/-0.1 at 61mo	+0.0/-0.1 at 61mo	+0.0/-0.1 at 61mo
Elite	7074, 7075, 7076, 7077	Apr-91	48,000	1,000	3,439	Malfunction-free	—	—	85	100.0	100.0	100.0	99.8	99.8	99.8	99.8	99.8	99.8	99.8	99.8	99.8	99.8
										+0.0/-0.0 at 2 mo	+0.0/-0.0 at 2 mo	+0.0/-0.0 at 2 mo	+0.0/-0.0 at 2 mo	+0.0/-0.0 at 2 mo	+0.0/-0.0 at 2 mo	+0.0/-0.0 at 2 mo	+0.0/-0.0 at 2 mo	+0.0/-0.0 at 2 mo	+0.0/-0.0 at 2 mo	+0.0/-0.0 at 2 mo	+0.0/-0.0 at 2 mo	+0.0/-0.0 at 2 mo
EnPulse DR	EIDR01, EIDR03, EIDR06	Dec-03	7,000	5,000	1	Malfunction-free	0	1	1	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
										+0.0/-0.0 at 35 mo	+0.0/-0.0 at 35 mo	+0.0/-0.0 at 35 mo	+0.0/-0.1 at 35 mo	+0.0/-0.1 at 35 mo	+0.0/-0.1 at 35 mo	+0.0/-0.1 at 35 mo	+0.0/-0.1 at 35 mo	+0.0/-0.1 at 35 mo	+0.0/-0.1 at 35 mo	+0.0/-0.1 at 35 mo	+0.0/-0.1 at 35 mo	+0.0/-0.1 at 35 mo
EnPulse DR	EIDR21	Dec-03	2,000	1,000	0	Malfunction-free	0	0	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
										+0.0/-0.0 at 34 mo	+0.0/-0.0 at 34 mo	+0.0/-0.0 at 34 mo	+0.0/-0.0 at 34 mo	+0.0/-0.0 at 34 mo	+0.0/-0.0 at 34 mo	+0.0/-0.0 at 34 mo	+0.0/-0.0 at 34 mo	+0.0/-0.0 at 34 mo	+0.0/-0.0 at 34 mo	+0.0/-0.0 at 34 mo	+0.0/-0.0 at 34 mo	+0.0/-0.0 at 34 mo
EnPulse 2 DR	E2DR01, E2DR03, E2DR06	Feb-04	98,000	85,000	0	Malfunction-free	2	2	4	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
										+0.0/-0.0 at 33 mo	+0.0/-0.0 at 33 mo	+0.0/-0.0 at 33 mo	+0.0/-0.0 at 33 mo	+0.0/-0.0 at 33 mo	+0.0/-0.0 at 33 mo	+0.0/-0.0 at 33 mo	+0.0/-0.0 at 33 mo	+0.0/-0.0 at 33 mo	+0.0/-0.0 at 33 mo	+0.0/-0.0 at 33 mo	+0.0/-0.0 at 33 mo	+0.0/-0.0 at 33 mo

continued

Device Survival Summary continued

		Device Survival Probability (%)												
		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	
EnPulse 2 DR	Model Number	E2DR21	Feb-04	12,000	10,000	3	Normal Battery Depletions	Malfunctions		Therapy Function Compromised		Therapy Function Not Compromised		Total
								0	+	0	=	0	Malfunction-free	0
									100.0	+0.0/-0.0	100.0	+0.0/-0.0	100.0	+0.0/-0.0
EnPulse 2 DR	Model Number	E2DR31, E2DR33	Feb-04	1,000	1,000	0	Normal Battery Depletions	Malfunctions		Therapy Function Compromised		Therapy Function Not Compromised		Total
								0	+	0	=	0	Malfunction-free	0
									100.0	+0.0/-0.0	100.0	+0.0/-0.0	100.0	+0.0/-0.0
EnPulse 2 SR	Model Number	E2SR01, E2SR03, E2SR06	Dec-03	24,000	20,000	2	Normal Battery Depletions	Malfunctions		Therapy Function Compromised		Therapy Function Not Compromised		Total
								1	+	2	=	3	Malfunction-free	3
									100.0	+0.0/-0.0	100.0	+0.0/-0.0	100.0	+0.0/-0.0
EnPulse 2 VDD	Model Number	E2VDD01	Dec-03	1,000	500	0	Normal Battery Depletions	Malfunctions		Therapy Function Compromised		Therapy Function Not Compromised		Total
								0	+	0	=	0	Malfunction-free	0
									100.0	+0.0/-0.0	100.0	+0.0/-0.0	100.0	+0.0/-0.0
EnRhythm DR	Model Number	P150TDR	May-05	48,000	44,000	0	Normal Battery Depletions	Malfunctions		Therapy Function Compromised		Therapy Function Not Compromised		Total
								7	+	2	=	9	Malfunction-free	9
									99.9	+0.0/-0.0	99.9	+0.0/-0.1	99.9	+0.0/-0.1
Kappa 400 DR	Model Number	KDR401, KDR403	Jan-98	46,000	13,000	2,009	Normal Battery Depletions	Malfunctions		Therapy Function Compromised		Therapy Function Not Compromised		Total
								9	+	12	=	21	Malfunction-free	21
									99.9	+0.0/-0.0	99.9	+0.0/-0.1	99.9	+0.0/-0.0
Kappa 400 SR	Model Number	KSR401, KSR403	Feb-98	15,000	5,000	256	Normal Battery Depletions	Malfunctions		Therapy Function Compromised		Therapy Function Not Compromised		Total
								1	+	3	=	4	Malfunction-free	4
									99.9	+0.0/-0.1	99.9	+0.1/-0.1	99.9	+0.1/-0.1

continued

Device Survival Summary continued

						Device Survival Probability (%)																
						Malfunctions						Years After Implant										
Family	Model Number	US Market Release	Registered US Implants	Estimated Active US Implants	Normal Battery Depletions	Therapy Function Compromised	Therapy Function Not Compromised	Total	Malfunction-free	1 yr	2 yr	3 yr	4 yr	5 yr	6 yr	7 yr	8 yr	10 yr	12 yr	14 yr	16 yr	
Kappa 600 DR	KDR601, KDR603, KDR606	Jan-99	24,000	10,000	333	13 + 3 = 16	16	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/-0.1	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 91 mo					
		Advisories: see page 157 – 2002 Potential Fractured Power Supply Wires					(11) + (0) = (11) (advisory-related subset)		All-cause	100.0 +0.0/-0.0	99.9 +0.0/-0.0	99.9 +0.0/-0.1	99.6 +0.3/-0.2	99.0 +0.1/-0.2	99.0 +0.3/-0.3	97.4 +0.7/-0.8	91.8 +2.3/-2.7 at 91 mo	82.6 +0.7/-0.8 at 91 mo				
Kappa 600 DR	KDR651, KDR653	Mar-01	14,000	8,000	47	1 + 2 = 3	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 67 mo	100.0 +0.0/-0.1 at 67 mo							
		Advisories: see page 157 – 2002 Potential Fractured Power Supply Wires					(0) + (0) = (0) (advisory-related 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 +0.2/-0.3	98.4 +0.4/-0.4 at 67 mo	98.4 +0.4/-0.4 at 67 mo						
Kappa 700 D	KD701, KD703, KD706	Jan-99	300	100	4	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 69 mo	100.0 +0.0/-0.0 at 69 mo							
		Advisories: see page 157 – 2002 Potential Fractured Power Supply Wires					(0) + (0) = (0) (advisory-related subset)		All-cause	100.0 +0.0/-0.0	100.0 +0.0/-0.0	100.0 +0.0/-0.0	98.9 +0.8/-3.1	97.6 +1.5/-3.9	95.7 +2.4/-5.2 at 69 mo	95.7 +2.4/-5.2 at 69 mo						
Kappa 700 DR	KDR701, KDR703, KDR706	Feb-99	192,000	104,000	1,799	146 + 23 = 169	169	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	99.8 +0.0/-0.0	99.8 +0.0/-0.0 at 94 mo	99.8 +0.0/-0.0 at 94 mo					
		Advisories: see page 157 – 2002 Potential Fractured Power Supply Wires					(117) + (0) = (117) (advisory-related 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/-0.0	98.5 +0.1/-0.1	96.6 +0.1/-0.2	90.9 +0.4/-0.4 at 94 mo	75.8 +1.7/-1.8 at 94 mo					
Kappa 700 DR	KDR721	Feb-99	10,000	2,000	548	4 + 1 = 5	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	100.0 +0.0/-0.1	99.9 +0.0/-0.1 at 83 mo	99.9 +0.0/-0.1 at 83 mo							
		Advisories: see page 157 – 2002 Potential Fractured Power Supply Wires					(4) + (0) = (4) (advisory-related subset)		All-cause	99.9 +0.0/-0.1	99.7 +0.1/-0.2	99.0 +0.2/-0.3	96.8 +0.4/-0.5	91.8 +0.7/-0.8	72.2 +1.8/-1.9	39.2 +4.2/-4.3 at 83 mo						
Kappa 700 SR	KSR701, KSR703, KSR706	Feb-99	55,000	24,000	513	6 + 3 = 9	9	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/-0.1 at 93 mo	100.0 +0.0/-0.1 at 93 mo				
		Advisories: see page 157 – 2002 Potential Fractured Power Supply Wires					(3) + (0) = (3) (advisory-related subset)		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	89.5 +0.9/-0.9	89.5 +0.9/-0.9 at 93 mo	74.6 +3.3/-3.6 at 93 mo					
Kappa 700 VDD	KVDD701	Jan-99	2,000	1,000	42	3 + 0 = 3	3	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	99.7 +0.2/-0.6 at 82 mo	99.7 +0.2/-0.6 at 82 mo							
		Advisories: see page 157 – 2002 Potential Fractured Power Supply Wires					(3) + (0) = (3) (advisory-related 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	95.5 +1.3/-1.9	75.6 +4.9/-5.8 at 82 mo						

continued

Device Survival Summary continued

Family	Model Number	US Market Release	Registered US Implants	Estimated Active US Implants	Normal Battery Depletions	Malfunctions			Device Survival Probability (%)																										
						Therapy Function Compromised	Therapy Function Not Compromised	Total	Years After Implant																										
						0	+	0	=	0	1 yr	2 yr	3 yr	4 yr	5 yr	6 yr	7 yr	8 yr	10 yr	12 yr	14 yr	16 yr													
Kappa 800 DR	KDR801, KDR803	Jan-02	4,000	3,000	3	Therapy Function Compromised	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	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	100.0 +0.0/-0.0	100.0 +0.0/-0.0					
						Therapy Function Not Compromised	0	+	0	=	0	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	99.8 +0.1/-0.2	99.8 +0.1/-0.2	99.8 +0.1/-0.2	99.8 +0.1/-0.2	99.8 +0.1/-0.2	99.8 +0.1/-0.2	99.8 +0.1/-0.2	99.8 +0.1/-0.2	99.8 +0.1/-0.2	99.8 +0.1/-0.2	99.8 +0.1/-0.2	99.8 +0.1/-0.2	99.8 +0.1/-0.2	99.8 +0.1/-0.2	99.8 +0.1/-0.2	99.8 +0.1/-0.2	99.8 +0.1/-0.2		
Kappa 900 DR	KDR901, KDR903, KDR906	Jan-02	124,000	90,000	87	Therapy Function Compromised	7	+	9	=	16	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	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			
						Therapy Function Not Compromised	7	+	9	=	16	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	99.3 +0.1/-0.1	99.3 +0.1/-0.1	99.3 +0.1/-0.1	99.3 +0.1/-0.1	99.3 +0.1/-0.1	99.3 +0.1/-0.1	99.3 +0.1/-0.1	99.3 +0.1/-0.1	99.3 +0.1/-0.1	99.3 +0.1/-0.1	99.3 +0.1/-0.1	99.3 +0.1/-0.1	99.3 +0.1/-0.1	99.3 +0.1/-0.1	99.3 +0.1/-0.1	99.3 +0.1/-0.1	99.3 +0.1/-0.1	99.3 +0.1/-0.1	99.3 +0.1/-0.1
Kappa 900 SR	KSR901, KSR903, KSR906	Jan-02	36,000	24,000	28	Therapy Function Compromised	1	+	7	=	8	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	99.9 +0.1/-0.3	99.9 +0.1/-0.3	99.9 +0.1/-0.3	99.9 +0.1/-0.3	99.9 +0.1/-0.3	99.9 +0.1/-0.3	99.9 +0.1/-0.3	99.9 +0.1/-0.3	99.9 +0.1/-0.3	99.9 +0.1/-0.3	99.9 +0.1/-0.3	99.9 +0.1/-0.3	99.9 +0.1/-0.3	99.9 +0.1/-0.3	99.9 +0.1/-0.3	99.9 +0.1/-0.3	99.9 +0.1/-0.3		
						Therapy Function Not Compromised	1	+	7	=	8	All-cause	100.0 +0.0/-0.0	99.9 +0.0/-0.1	99.8 +0.1/-0.1	99.4 +0.2/-0.2	99.1 +0.2/-0.3	99.1 +0.2/-0.3	99.1 +0.2/-0.3	99.1 +0.2/-0.3	99.1 +0.2/-0.3	99.1 +0.2/-0.3	99.1 +0.2/-0.3	99.1 +0.2/-0.3	99.1 +0.2/-0.3	99.1 +0.2/-0.3	99.1 +0.2/-0.3	99.1 +0.2/-0.3	99.1 +0.2/-0.3	99.1 +0.2/-0.3	99.1 +0.2/-0.3	99.1 +0.2/-0.3	99.1 +0.2/-0.3	99.1 +0.2/-0.3	99.1 +0.2/-0.3
Kappa 900 VDD	KVDD901	Jan-02	1,000	400	0	Therapy Function Compromised	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	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	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	
						Therapy Function Not Compromised	0	+	0	=	0	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	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	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
Kappa 920 DR	KDR921	Jan-02	16,000	11,000	60	Therapy Function Compromised	1	+	0	=	1	Malfunction-free	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	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	100.0 +0.0/-0.1	100.0 +0.0/-0.1	
						Therapy Function Not Compromised	1	+	0	=	1	All-cause	100.0 +0.0/-0.0	99.8 +0.1/-0.1	99.5 +0.1/-0.2	98.1 +0.4/-0.4	97.1 +0.6/-0.7	97.1 +0.6/-0.7	97.1 +0.6/-0.7	97.1 +0.6/-0.7	97.1 +0.6/-0.7	97.1 +0.6/-0.7	97.1 +0.6/-0.7	97.1 +0.6/-0.7	97.1 +0.6/-0.7	97.1 +0.6/-0.7	97.1 +0.6/-0.7	97.1 +0.6/-0.7	97.1 +0.6/-0.7	97.1 +0.6/-0.7	97.1 +0.6/-0.7	97.1 +0.6/-0.7	97.1 +0.6/-0.7	97.1 +0.6/-0.7	97.1 +0.6/-0.7
Legend	8416, 8417, 8417M, 8418, 8419	Aug-89	57,000	3,000	2,603	Therapy Function Compromised	—	+	—	=	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 +0.0/-0.1	99.7 +0.0/-0.1	99.7 +0.0/-0.1	99.7 +0.0/-0.1	99.7 +0.0/-0.1	99.7 +0.0/-0.1	99.7 +0.0/-0.1	99.7 +0.0/-0.1	99.7 +0.0/-0.1	99.7 +0.0/-0.1	99.7 +0.0/-0.1	99.7 +0.0/-0.1	99.7 +0.0/-0.1	99.7 +0.0/-0.1	99.7 +0.0/-0.1	99.7 +0.0/-0.1	99.7 +0.0/-0.1	
						Therapy Function Not Compromised	—	+	—	=	145	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	98.3 +0.1/-0.1	98.3 +0.1/-0.1	98.3 +0.1/-0.1	98.3 +0.1/-0.1	98.3 +0.1/-0.1	98.3 +0.1/-0.1	98.3 +0.1/-0.1	98.3 +0.1/-0.1	98.3 +0.1/-0.1	98.3 +0.1/-0.1	98.3 +0.1/-0.1	98.3 +0.1/-0.1	98.3 +0.1/-0.1	98.3 +0.1/-0.1	98.3 +0.1/-0.1	98.3 +0.1/-0.1	98.3 +0.1/-0.1	98.3 +0.1/-0.1
Legend II	8424, 8426, 8427	Nov-91	59,000	6,000	1,671	Therapy Function Compromised	—	+	—	=	37	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	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	99.9 +0.0/-0.0	99.9 +0.0/-0.0	99.9 +0.0/-0.0
						Therapy Function Not Compromised	—	+	—	=	37	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	98.8 +0.1/-0.1	98.8 +0.1/-0.1	98.8 +0.1/-0.1	98.8 +0.1/-0.1	98.8 +0.1/-0.1	98.8 +0.1/-0.1	98.8 +0.1/-0.1	98.8 +0.1/-0.1	98.8 +0.1/-0.1	98.8 +0.1/-0.1	98.8 +0.1/-0.1	98.8 +0.1/-0.1	98.8 +0.1/-0.1	98.8 +0.1/-0.1	98.8 +0.1/-0.1	98.8 +0.1/-0.1	98.8 +0.1/-0.1	98.8 +0.1/-0.1	98.8 +0.1/-0.1

continued

**Device Survival Summary** continued

**Device Survival Probability (%)**

Family	Model Number	US Market Release	Registered US Implants	Estimated Active US Implants	Normal Battery Depletions	Malfunctions			Years After Implant																					
						Therapy Function Compromised	Therapy Not Functioning	Total	1 yr	2 yr	3 yr	4 yr	5 yr	6 yr	7 yr	8 yr	10 yr	12 yr	14 yr	16 yr										
									Therapy Function Compromised	Therapy Not Functioning	Total	%	%	%	%	%	%	%	%	%	%	%	%	%						
<b>Minix/Minix ST</b>	<b>8330, 8331, 8331M, 8340, 8341, 8341M, 8342</b>	Dec-89	58,000	5,000	1,446	—	—	49	Malfunction-free	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	99.9	99.9	99.9	99.9	99.9		
	Advisories: see page 162 – 1991 Potential Delayed Restoration of Permanent Settings								<b>All-cause</b>	99.9	99.7	99.5	99.2	98.7	97.7	95.2	91.9	87.2	83.9	81.2	81.2	83.9	81.2	83.9	81.2	83.9	81.2	75.0	+2.4/-2.7 at 210 mo	
<b>Minuet</b>	<b>7107, 7108</b>	Mar-92	17,000	2,000	552	—	—	4	Malfunction-free	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	100.0	100.0	100.0	+0.0/-0.1 at 173 mo	
									<b>All-cause</b>	100.0	100.0	99.8	99.5	98.9	98.2	96.9	94.7	89.3	82.7	73.8	73.8	82.7	89.3	82.7	89.3	73.8	73.8	72.4	+2.3/-2.4 at 173 mo	
<b>Preva D</b>	<b>7068</b>	Nov-96	1,000	200	19	—	—	1	Malfunction-free	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	99.9	99.9	99.9	99.9	99.9	+0.1/-0.9 at 105 mo	
									<b>All-cause</b>	100.0	99.7	99.1	98.3	98.3	96.4	92.9	92.2	89.4	89.4	82.7	73.8	92.2	92.2	89.4	89.4	89.4	89.4	89.4	89.4	+3.2/-4.5 at 105 mo
<b>Preva DR</b>	<b>7088, 7089</b>	Jul-96	26,000	7,000	628	—	—	3	Malfunction-free	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	100.0	100.0	100.0	+0.0/-0.0 at 123 mo	
									<b>All-cause</b>	100.0	99.9	99.7	99.5	99.0	98.1	96.8	93.7	89.4	82.7	73.8	73.8	93.7	93.2	82.7	82.7	81.0	81.0	81.0	81.0	+3.1/-3.3 at 123 mo
<b>Preva SR</b>	<b>8088, 8089</b>	Jul-96	18,000	4,000	288	—	—	1	Malfunction-free	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	100.0	100.0	100.0	+0.0/-0.1 at 121 mo	
									<b>All-cause</b>	99.9	99.9	99.6	99.3	98.6	97.6	95.3	93.2	89.1	82.7	73.8	73.8	93.2	93.2	82.2	81.0	81.0	81.0	81.0	81.0	+2.5/-2.8 at 121 mo
<b>Preva ST DR</b>	<b>7078</b>	Nov-96	1,000	200	32	—	—	0	Malfunction-free	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	100.0	100.0	100.0	+0.0/-0.0 at 104 mo	
									<b>All-cause</b>	99.7	99.7	99.4	99.4	97.8	96.9	93.8	89.1	82.1	73.8	73.8	93.8	93.8	82.1	82.1	81.0	81.0	81.0	81.0	81.0	+4.4/-5.6 at 104 mo
<b>Prevail S</b>	<b>8085, 8086</b>	Oct-95	4,000	1,000	19	—	—	1	Malfunction-free	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	100.0	100.0	100.0	+0.1/-0.4 at 119 mo	
									<b>All-cause</b>	99.9	99.9	99.8	99.8	99.2	99.1	98.4	97.7	95.9	93.2	89.1	82.1	82.1	82.1	82.1	82.1	81.0	81.0	81.0	81.0	+1.2/-1.7 at 119 mo

Device Survival Summary continued

Family	Model Number	US Market Release	Registered US Implants	Estimated Active US Implants	Normal Battery Depletions	Malfunctions		Device Survival Probability (%)																	
						Therapy Function Compromised	Therapy Function Not Compromised	Years After Implant																	
						Therapy Function Compromised	Therapy Function Not Compromised	1 yr	2 yr	3 yr	4 yr	5 yr	6 yr	7 yr	8 yr	10 yr	12 yr	14 yr	16 yr						
Prodigy D	7864, 7865, 7866	Oct-95	3,000	1,000	64	0	Malfunction-free	Malfunction-free	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	
							All-cause	All-cause	99.9	99.7	99.4	98.8	98.6	97.7	97.1	95.9	82.6	82.6	82.6	82.6	82.6	82.6	82.6	82.6	82.6
Prodigy DR	7860, 7861, 7862	Oct-95	37,000	11,000	868	11	Malfunction-free	Malfunction-free	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	100.0
							All-cause	All-cause	99.9	99.9	99.8	99.5	99.0	98.2	96.7	93.3	76.9	71.0	71.0	71.0	71.0	71.0	71.0	71.0	71.0
Prodigy S	8164, 8165, 8166	Oct-95	2,000	400	22	0	Malfunction-free	Malfunction-free	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	100.0
							All-cause	All-cause	99.9	99.9	99.8	99.2	99.2	99.2	98.9	97.2	91.3	91.3	91.3	91.3	91.3	91.3	91.3	91.3	91.3
Prodigy SR	8158, 8160, 8161, 8162	Oct-95	22,000	5,000	354	5	Malfunction-free	Malfunction-free	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	100.0
							All-cause	All-cause	99.9	99.7	99.4	99.0	98.3	97.4	96.0	93.6	81.4	78.0	78.0	78.0	78.0	78.0	78.0	78.0	78.0
Sensia DR	SEDR01, SED01	Jul-06	2,000	1,000	0	0	Malfunction-free	Malfunction-free	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	100.0
							All-cause	All-cause	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	100.0
Sensia SR	SESR01, SES01	Jul-06	1,000	1,000	0	0	Malfunction-free	Malfunction-free	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	100.0
							All-cause	All-cause	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	100.0
Sigma 100 S	SS103, SS106	Aug-99	1,000	200	3	0	Malfunction-free	Malfunction-free	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	100.0
							All-cause	All-cause	100.0	100.0	99.5	99.5	98.4	98.4	98.4	98.4	98.4	98.4	98.4	98.4	98.4	98.4	98.4	98.4	98.4

continued





Device Survival Summary continued

Device Survival Probability (%)																								
Family	Model Number	US Market Release	Registered US Implants	Estimated Active US Implants	Normal Battery Depletions	Malfunctions		Years After Implant																
						Therapy Function Compromised	Therapy Function Not Compromised	1 yr	2 yr	3 yr	4 yr	5 yr	6 yr	7 yr	8 yr	10 yr	12 yr	14 yr	16 yr					
Sigma 200 DR	SDR203	Aug-99	16,000	8,000	23	2 + 1 = 3	Malfunction-free	Total	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						
	Advisories: see page 155 – 2005 Potential Separation of Interconnect Wires					(0) + (0) = (0) (advisory-related subset)	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	99.2 +0.2/-0.3	98.8 +0.4/-0.6 at 83 mo	98.8 +0.4/-0.6 at 83 mo									
Sigma 200 SR	SSR203	Sep-99	12,000	5,000	11	2 + 0 = 2	Malfunction-free	Total	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						
	Advisories: see page 155 – 2005 Potential Separation of Interconnect Wires					(2) + (0) = (2) (advisory-related subset)	All-cause		100.0 +0.0/-0.1	99.9 +0.1/-0.1	99.8 +0.1/-0.2	99.6 +0.1/-0.2	99.5 +0.2/-0.3	99.5 +0.2/-0.3 at 83 mo	99.5 +0.2/-0.3 at 83 mo									
Sigma 300 DR	SDR303, SDR306	Aug-99	102,000	64,000	81	43 + 4 = 47	Malfunction-free	Total	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	99.9 +0.0/-0.0 at 86 mo	99.9 +0.0/-0.0 at 86 mo				
	Advisories: see page 155 – 2005 Potential Separation of Interconnect Wires					(20) + (0) = (20) (advisory-related subset)	All-cause		100.0 +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/-0.1	98.8 +0.3/-0.4 at 86 mo	98.8 +0.3/-0.4 at 86 mo									
Sigma 300 SR	SSR303, SSR306	Sep-99	51,000	26,000	44	7 + 1 = 8	Malfunction-free	Total	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	100.0 +0.0/-0.0	100.0 +0.0/-0.0				
	Advisories: see page 155 – 2005 Potential Separation of Interconnect Wires					(5) + (0) = (5) (advisory-related subset)	All-cause		100.0 +0.0/-0.0	99.9 +0.0/-0.0	99.7 +0.1/-0.1	99.5 +0.1/-0.1	99.0 +0.2/-0.3	98.5 +0.3/-0.7	98.5 +0.3/-0.7									
Sigma 300 VDD	SVDD303	Sep-99	1,000	300	0	0 + 0 = 0	Malfunction-free	Total	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 68 mo	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				
	Advisories: see page 155 – 2005 Potential Separation of Interconnect Wires					(0) + (0) = (0) (advisory-related 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	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			
Thera D	7944, 7945, 7946	Jan-95	2,000	2	175	—	Malfunction-free	Total	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	99.9 +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	99.7 +0.3/-1.3 at 111 mo			
	Advisories: see page 155 – 2005 Potential Separation of Interconnect Wires					(0) + (0) = (0) (advisory-related subset)	All-cause		99.9 +0.1/-0.3	99.8 +0.2/-0.4	97.3 +0.8/-1.0	93.5 +1.3/-1.6	90.0 +1.6/-2.0	82.8 +2.3/-2.6 +3.5/-3.8	82.8 +2.3/-2.6 +3.5/-3.8						47.2 +4.9/-5.0 at 111 mo	47.2 +4.9/-5.0 at 111 mo		
Thera DR-40	7940, 7941, 7942	Jan-95	30,000	2	2,998	—	Malfunction-free	Total	100.0 +0.0/-0.0	100.0 +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	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	99.8 +0.0/-0.1
	Advisories: see page 155 – 2005 Potential Separation of Interconnect Wires					(0) + (0) = (0) (advisory-related subset)	All-cause		100.0 +0.0/-0.0	99.7 +0.1/-0.1	96.5 +0.2/-0.3	93.5 +0.3/-0.4	88.8 +0.5/-0.5	80.7 +0.6/-0.6 +0.9/-0.9	80.7 +0.6/-0.6 +0.9/-0.9						19.3 +2.7/-2.5 at 113 mo	19.3 +2.7/-2.5 at 113 mo		

continued

Device Survival Summary continued

Family	Model Number	US Market Release	Registered US Implants	Estimated Active US Implants	Normal Battery Depletions	Malfunctions		Device Survival Probability (%)																									
						Therapy Function Compromised	Therapy Function Not Compromised	Years After Implant																									
						Total		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 DR-50	7950, 7951, 7952	Jan-95	5,000	1,000	203	—	1	Malfunction-free	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	100.0	100.0	100.0						
									+0.0/-0.1	+0.0/-0.1	+0.0/-0.1	+0.0/-0.1	+0.0/-0.1	+0.0/-0.1	+0.0/-0.1	+0.0/-0.1	+0.0/-0.1	+0.0/-0.1	+0.0/-0.1	+0.0/-0.1	+0.0/-0.1	+0.0/-0.1	+0.0/-0.1	+0.0/-0.1	+0.0/-0.1	+0.0/-0.1	+0.0/-0.1	+0.0/-0.1	+0.0/-0.1	+0.0/-0.1	+0.0/-0.1	+0.0/-0.1	+0.0/-0.1
Thera S	8944, 8945, 8946	Jan-95	3,000	100	81	—	3	Malfunction-free	100.0	100.0	99.9	99.8	99.8	99.8	99.8	99.8	99.8	99.8	99.8	99.8	99.8	99.8	99.8	99.8	99.8	99.8	99.8	99.8					
									+0.0/-0.0	+0.0/-0.0	+0.1/-0.4	+0.2/-0.5	+0.2/-0.5	+0.2/-0.5	+0.2/-0.5	+0.2/-0.5	+0.2/-0.5	+0.2/-0.5	+0.2/-0.5	+0.2/-0.5	+0.2/-0.5	+0.2/-0.5	+0.2/-0.5	+0.2/-0.5	+0.2/-0.5	+0.2/-0.5	+0.2/-0.5	+0.2/-0.5	+0.2/-0.5	+0.2/-0.5	+0.2/-0.5	+0.2/-0.5	+0.2/-0.5
Thera SR	8940, 8941, 8942	Jan-95	14,000	300	812	—	16	Malfunction-free	100.0	99.9	99.9	99.8	99.8	99.8	99.8	99.8	99.8	99.8	99.8	99.8	99.8	99.8	99.8	99.8	99.8	99.8	99.8	99.8					
									+0.0/-0.0	+0.0/-0.1	+0.0/-0.1	+0.1/-0.1	+0.1/-0.1	+0.1/-0.1	+0.1/-0.1	+0.1/-0.1	+0.1/-0.1	+0.1/-0.1	+0.1/-0.1	+0.1/-0.1	+0.1/-0.1	+0.1/-0.1	+0.1/-0.1	+0.1/-0.1	+0.1/-0.1	+0.1/-0.1	+0.1/-0.1	+0.1/-0.1	+0.1/-0.1	+0.1/-0.1	+0.1/-0.1	+0.1/-0.1	+0.1/-0.1
Thera-iD	7964i, 7965i, 7966i	Oct-95	3,000	1,000	98	—	1	Malfunction-free	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	100.0	100.0	100.0						
									+0.0/-0.0	+0.0/-0.2	+0.0/-0.2	+0.0/-0.2	+0.0/-0.2	+0.0/-0.2	+0.0/-0.2	+0.0/-0.2	+0.0/-0.2	+0.0/-0.2	+0.0/-0.2	+0.0/-0.2	+0.0/-0.2	+0.0/-0.2	+0.0/-0.2	+0.0/-0.2	+0.0/-0.2	+0.0/-0.2	+0.0/-0.2	+0.0/-0.2	+0.0/-0.2	+0.0/-0.2	+0.0/-0.2	+0.0/-0.2	+0.0/-0.2
Thera-iDR	7960i, 7961i, 7962i	Oct-95	122,000	28,000	4,217	—	50	Malfunction-free	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	100.0	100.0	100.0						
									+0.0/-0.0	+0.0/-0.0	+0.0/-0.0	+0.0/-0.0	+0.0/-0.0	+0.0/-0.0	+0.0/-0.0	+0.0/-0.0	+0.0/-0.0	+0.0/-0.0	+0.0/-0.0	+0.0/-0.0	+0.0/-0.0	+0.0/-0.0	+0.0/-0.0	+0.0/-0.0	+0.0/-0.0	+0.0/-0.0	+0.0/-0.0	+0.0/-0.0	+0.0/-0.0	+0.0/-0.0	+0.0/-0.0	+0.0/-0.0	+0.0/-0.0
Thera-iDR	7968i	Jul-96	4,000	500	190	—	3	Malfunction-free	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	99.9	99.9	99.9	99.9						
									+0.0/-0.0	+0.0/-0.0	+0.1/-0.2	+0.1/-0.2	+0.1/-0.2	+0.1/-0.2	+0.1/-0.2	+0.1/-0.2	+0.1/-0.2	+0.1/-0.2	+0.1/-0.2	+0.1/-0.2	+0.1/-0.2	+0.1/-0.2	+0.1/-0.2	+0.1/-0.2	+0.1/-0.2	+0.1/-0.2	+0.1/-0.2	+0.1/-0.2	+0.1/-0.2	+0.1/-0.2	+0.1/-0.2	+0.1/-0.2	+0.1/-0.2
Thera-iS	8964i, 8965i, 8966i	Oct-95	4,000	1,000	38	—	1	Malfunction-free	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	100.0	100.0	100.0						
									+0.0/-0.0	+0.0/-0.0	+0.0/-0.0	+0.0/-0.0	+0.0/-0.0	+0.0/-0.0	+0.0/-0.0	+0.0/-0.0	+0.0/-0.0	+0.0/-0.0	+0.0/-0.0	+0.0/-0.0	+0.0/-0.0	+0.0/-0.0	+0.0/-0.0	+0.0/-0.0	+0.0/-0.0	+0.0/-0.0	+0.0/-0.0	+0.0/-0.0	+0.0/-0.0	+0.0/-0.0	+0.0/-0.0	+0.0/-0.0	+0.0/-0.0

Device Survival Summary continued

			Device Survival Probability (%)																							
Family	Model Number	US Market Release	Registered US Implants	Estimated Active US Implants	Normal Battery Depletions	Malfunctions			Years After Implant																	
						Therapy Function Compromised	Therapy Function Not Compromised	Total	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 SR	8960i, 8961i, 8962i	Oct-95	50,000	10,000	920	Therapy Function Compromised	—	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	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	
						Therapy Function Not Compromised	—	—	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	98.9 +0.1/-0.1	98.2 +0.2/-0.2	97.1 +0.2/-0.2	94.9 +0.3/-0.3	84.1 +0.8/-0.9	75.7 +2.3/-2.5	—	—	—	—	—	—	—
Thera-i VDD	8968i	Mar-96	5,000	1,000	49	Therapy Function Compromised	—	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	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
						Therapy Function Not Compromised	—	—	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 +0.4/-0.6	89.1 +2.4/-3.0	86.7 +3.2/-4.1	—	—	—	—	—	—	—
Versa DR	VEDR01	Jul-06	2,000	2,000	0	Therapy Function Compromised	—	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	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
						Therapy Function Not Compromised	—	—	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	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	100.0 +0.0/-0.0

## Reference Chart

The longevity estimates provided are mean values calculated for the parameters given. 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.**

Family	Model Number	Amplitude Setting	Estimated Longevity		Elective Replacement Indicators
			500 Lead $\Omega$	1000 Lead $\Omega$	
Adapta DR	ADDR01, ADDR03, ADDR06, ADD01	Low 2.5 V (A, RV)	7.4	8.2	**
		Nominal 3.5 V (A, RV)	6.0	7.3	
		High 5.0 V (A, RV)	4.5	6.0	
Adapta DR	ADDRS1	Low 2.5 V (A, RV)	5.5	6.1	**
		Nominal 3.5 V (A, RV)	4.3	5.4	
		High 5.0 V (A, RV)	3.2	4.4	
Adapta DR	ADDRL1	Low 2.5 V (A, RV)	9.1	10.1	**
		Nominal 3.5 V (A, RV)	7.4	9.0	
		High 5.0 V (A, RV)	5.4	7.3	
Adapta SR	ADSR01, ADSR03, ADSR06	Low 2.5 V (RV)	7.3	7.8	**
		Nominal 3.5 V (RV)	6.4	7.4	
		High 5.0 V (RV)	5.0	6.2	
Adapta VDD	ADVDD01	Low 2.5 V (RV)	6.2	6.5	**
		Nominal 3.5 V (RV)	5.5	6.2	
		High 5.0 V (RV)	4.4	5.4	
AT500	AT501, 7253	Low 2.0 V (A, RV)	7.7	8.3	Telemetry indication. Pacing mode and rate (magnet and non-magnet) as programmed.
		Nominal 3.0 V (A, RV)	5.8	7.0	
		High 5.0 V (A, RV)	3.7	5.2	
Elite	7074, 7075, 7076, 7077	Low 2.5 V, 0.36 ms (A, RV)	11.8	13.2	**
		Nominal 3.3 V, 0.36 ms (A, RV)	8.6	11.0	
		High 5.0 V, 0.36 ms (A, RV)	6.7	9.4	
EnPulse DR	E1DR01, E1DR03, E1DR06	Low 2.5 V (A, RV)	7.5	8.5	**
		Nominal 3.5 V (A, RV)	6.2	7.6	
		High 5.0 V (A, RV)	4.4	5.9	
EnPulse DR	E1DR21	Low 2.5 V (A, RV)	5.4	6.0	**
		Nominal 3.5 V (A, RV)	4.3	5.4	
		High 5.0 V (A, RV)	3.0	4.2	
EnPulse 2 DR	E2DR01, E2DR03, E2DR06	Low 2.5 V (A, RV)	7.5	8.5	**
		Nominal 3.5 V (A, RV)	6.2	7.6	
		High 5.0 V (A, RV)	4.4	5.9	
EnPulse 2 DR	E2DR21	Low 2.5 V (A, RV)	5.4	6.0	**
		Nominal 3.5 V (A, RV)	4.3	5.4	
		High 5.0 V (A, RV)	3.0	4.2	
EnPulse 2 DR	E2DR31, E2DR33	Low 2.5 V (A, RV)	9.0	10.1	**
		Nominal 3.5 V (A, RV)	7.4	9.1	
		High 5.0 V (A, RV)	5.2	7.1	
EnPulse 2 SR	E2SR01, E2SR03, E2SR06	Low 2.5 V (A, RV)	7.2	7.7	**
		Nominal 3.5 V (A, RV)	6.3	7.3	
		High 5.0 V (A, RV)	4.8	6.1	
EnPulse 2 VDD	E2VDD01	Low 2.5 V (RV)	6.1	6.5	**
		Nominal 3.5 V (RV)	5.5	6.2	
		High 5.0 V (RV)	4.3	5.4	
EnRhythm DR	P1501DR	Low 2.5 V (A, RV)	10.6	12.3	Telemetry indication. Pacing mode and rate (magnet and non-magnet) as programmed.
		Nominal 3.5 V (A, RV)	8.0	10.3	
		High 5.0 V (A, RV)	5.4	7.8	
Kappa 400 DR	KDR401, KDR403	Low 2.5 V (A, RV)	7.8	8.5	**
		Nominal 3.5 V (A, RV)	6.4	7.5	
		High 5.0 V (A, RV)	5.1	6.5	
Kappa 400 SR	KSR401, KSR403	Low 2.5 V (RV)	7.9	8.4	**
		Nominal 3.5 V (RV)	6.9	7.7	
		High 5.0 V (RV)	5.8	7.0	

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

continued

Reference Chart continued

Family	Model Number	Amplitude Setting	Estimated Longevity		Elective Replacement Indicators
			500 Lead $\Omega$	1000 Lead $\Omega$	
Kappa 600 DR	KDR601, KDR603, KDR606	Low 2.5 V (A, RV)	7.7	8.6	**
		Nominal 3.5 V (A, RV)	6.3	7.7	
		High 5.0 V (A, RV)	4.4	6.0	
Kappa 600 DR	KDR651, KDR653	Low 2.5 V (A, RV)	7.7	8.6	**
		Nominal 3.5 V (A, RV)	6.3	7.7	
		High 5.0 V (A, RV)	4.4	6.0	
Kappa 700 D	KD701, KD703, KD706	Low 2.5 V (A, RV)	7.7	8.6	**
		Nominal 3.5 V (A, RV)	6.3	7.7	
		High 5.0 V (A, RV)	4.4	6.0	
Kappa 700 DR	KDR701, KDR703, KDR706	Low 2.5 V (A, RV)	7.7	8.6	**
		Nominal 3.5 V (A, RV)	6.3	7.7	
		High 5.0 V (A, RV)	4.4	6.0	
Kappa 700 DR	KDR721	Low 2.5 V (A, RV)	5.5	6.1	**
		Nominal 3.5 V (A, RV)	4.4	5.5	
		High 5.0 V (A, RV)	3.0	4.2	
Kappa 700 SR	KSR701, KSR703, KSR706	Low 2.5 V (RV)	7.4	7.9	**
		Nominal 3.5 V (RV)	6.5	7.5	
		High 5.0 V (RV)	4.9	6.2	
Kappa 700 VDD	KVDD701	Low 2.5 V (RV)	6.2	6.6	**
		Nominal 3.5 V (RV)	5.6	6.3	
		High 5.0 V (RV)	4.4	5.3	
Kappa 800 DR	KDR801, KDR803	Low 2.5 V (A, RV)	7.7	8.6	**
		Nominal 3.5 V (A, RV)	6.3	7.7	
		High 5.0 V (A, RV)	4.4	6.0	
Kappa 900 DR	KDR901, KDR903, KDR906	Low 2.5 V (A, RV)	7.7	8.6	**
		Nominal 3.5 V (A, RV)	6.3	7.7	
		High 5.0 V (A, RV)	4.4	6.0	
Kappa 920 DR	KDR921	Low 2.5 V (A, RV)	5.5	6.1	**
		Nominal 3.5 V (A, RV)	4.4	5.5	
		High 5.0 V (A, RV)	3.0	4.3	
Kappa 900 SR	KSR901, KSR903, KSR906	Low 2.5 V (RV)	7.3	7.9	**
		Nominal 3.5 V (RV)	6.4	7.4	
		High 5.0 V (RV)	4.9	6.1	
Kappa 900 VDD	KVDD901	Low 2.5 V (RV)	6.2	6.6	**
		Nominal 3.5 V (RV)	5.6	6.3	
		High 5.0 V (RV)	4.4	5.4	
Legend	8416, 8417, 8417M, 8418, 8419	Low 2.5 V (RV)	15.6	17.7	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.
		Nominal 3.3 V (RV)	11.3	14.5	
		High 5.0 V (RV)	9.0	12.5	
Legend II	8424, 8426, 8427	Low 2.5 V, 0.36 ms (RV)	12.9	14.5	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.
		Nominal 3.3 V, 0.36 ms (RV)	9.4	11.8	
		High 5.0 V, 0.36 ms (RV)	7.8	10.5	
Minix	8340, 8341, 8341M, 8342	Low 2.5 V (RV)	14.9	17.3	Telemetry indication. Rate decrease of 10% from programmed rate.
		Nominal 3.3 V (RV)	10.2	13.6	
		High 5.0 V (RV)	7.9	11.3	
Minix ST	8330, 8331, 8331M	Low 2.5 V (RV)	14.9	17.3	Telemetry indication. Rate decrease of 10% from programmed rate.
		Nominal 5.0 V (RV)	7.9	11.4	
		High 8.0 V (RV)	4.0	7.0	
Minuet	7107, 7108	Low 2.5 V, 0.36 ms (A, RV)	12.5	15.6	**
		Nominal 4.0 V, 0.36 ms (A, RV)	7.7	10.9	
		High 5.0 V, 0.36 ms (A, RV)	4.7	7.6	
Preva D	7068	Low 2.5 V (A, RV)	10.0	11.4	**
		Nominal 3.5 V (A, RV)	7.4	9.5	
		High 5.0 V (A, RV)	5.4	7.6	

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

continued

Reference Chart continued

Family	Model Number	Amplitude Setting	Estimated Longevity		Elective Replacement Indicators
			500 Lead $\Omega$	1000 Lead $\Omega$	
Preva DR	7088, 7089	Low 2.5 V (A, RV)	9.9	11.3	**
		Nominal 3.5 V (A, RV)	7.4	9.4	
		High 5.0 V (A, RV)	5.4	7.5	
Preva SR	8088, 8089	Low 2.5 V (RV)	9.8	10.7	**
		Nominal 3.5 V (RV)	8.0	9.5	
		High 5.0 V (RV)	6.4	8.1	
Preva ST DR	7078	Low 2.5 V (A, RV)	9.9	11.3	**
		Nominal 3.5 V (A, RV)	7.4	9.4	
		High 5.0 V (A, RV)	5.4	7.5	
Prevail S	8085, 8086	Low 2.5 V, 0.42 ms (RV)	16.4	19.4	Telemetry indication. Rate decrease of 10% from programmed rate.
		Nominal 3.3 V, 0.42 ms (RV)	10.8	14.4	
		High 5.0 V, 0.42 ms (RV)	8.6	12.4	
Prodigy D	7864, 7865, 7866	Low 2.5 V (A, RV)	10.0	11.4	**
		Nominal 3.5 V (A, RV)	7.4	9.5	
		High 5.0 V (A, RV)	5.4	7.6	
Prodigy DR	7860, 7861, 7862	Low 2.5 V (A, RV)	9.9	11.3	**
		Nominal 3.5 V (A, RV)	7.4	9.4	
		High 5.0 V (A, RV)	5.4	7.5	
Prodigy S	8164, 8165, 8166	Low 2.5 V (RV)	10.0	10.9	**
		Nominal 3.5 V (RV)	8.1	9.6	
		High 5.0 V (RV)	6.4	8.2	
Prodigy SR	8158, 8160, 8161, 8162	Low 2.5 V (RV)	9.8	10.7	**
		Nominal 3.5 V (RV)	8.0	9.5	
		High 5.0 V (RV)	6.4	8.1	
Sensia DR	SEDR01, SED01	Low 2.5 V (A, RV)	7.5	8.3	**
		Nominal 3.5 V (A, RV)	6.1	7.4	
		High 5.0 V (A, RV)	4.5	6.0	
Sensia DR	SEDRL1	Low 2.5 V (A, RV)	9.1	10.1	**
		Nominal 3.5 V (A, RV)	7.4	9.0	
		High 5.0 V (A, RV)	5.4	7.3	
Sensia SR	SESR01, SES01	Low 2.5 V (RV)	7.3	7.8	**
		Nominal 3.5 V (RV)	6.4	7.4	
		High 5.0 V (RV)	5.0	6.2	
Sigma 100 S	SS103, SS106	Low 2.5 V (RV)	10.1	11.1	**
		Nominal 3.5 V (RV)	8.2	9.8	
		High 5.0 V (RV)	6.4	8.4	
Sigma 200 DR	SDR203	Low 2.5 V (A, RV)	10.1	11.7	**
		Nominal 3.5 V (A, RV)	7.5	9.6	
		High 5.0 V (A, RV)	5.5	7.8	
Sigma 200 SR	SSR203	Low 2.5 V (RV)	10.1	11.1	**
		Nominal 3.5 V (RV)	8.2	9.8	
		High 5.0 V (RV)	6.4	8.4	
Sigma 300 DR	SDR303, SDR306	Low 2.5 V (A, RV)	10.1	11.7	**
		Nominal 3.5 V (A, RV)	7.5	9.6	
		High 5.0 V (A, RV)	5.5	7.8	
Sigma 300 SR	SSR303, SSR306	Low 2.5 V (RV)	10.1	11.1	**
		Nominal 3.5 V (RV)	8.2	9.8	
		High 5.0 V (RV)	6.4	8.4	
Sigma 300 VDD	SVDD303	Low 2.5 V (RV)	8.9	9.7	**
		Nominal 3.5 V (RV)	7.3	8.6	
		High 5.0 V (RV)	5.8	7.4	
Thera D	7944, 7945, 7946	Low 2.5 V (A, RV)	7.6	8.8	**
		Nominal 3.5 V (A, RV)	5.5	7.1	
		High 5.0 V (A, RV)	3.7	5.6	
Thera DR-40	7940, 7941, 7942	Low 2.5 V (A, RV)	7.6	8.7	**
		Nominal 3.5 V (A, RV)	5.5	7.0	
		High 5.0 V (A, RV)	3.7	5.6	
Thera DR-50	7950, 7951, 7952	Low 2.5 V (A, RV)	12.2	14.0	**
		Nominal 3.5 V (A, RV)	9.1	11.6	
		High 5.0 V (A, RV)	6.7	9.3	

continued

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

Reference Chart continued

Family	Model Number	Amplitude Setting	Estimated Longevity		Elective Replacement Indicators
			500 Lead $\Omega$	1000 Lead $\Omega$	
Thera S	8944, 8945, 8946	Low 2.5 V (RV)	7.5	8.2	**
		Nominal 3.5 V (RV)	6.1	7.2	
		High 5.0 V (RV)	4.8	6.2	
Thera SR	8940, 8941, 8942	Low 2.5 V (RV)	7.4	8.0	**
		Nominal 3.5 V (RV)	6.0	7.1	
		High 5.0 V (RV)	4.8	6.1	
Thera-i D	7964i, 7965i, 7966i	Low 2.5 V (A, RV)	10.0	11.4	**
		Nominal 3.5 V (A, RV)	7.4	9.5	
		High 5.0 V (A, RV)	5.4	7.6	
Thera-i DR	7960i, 7961i, 7962i	Low 2.5 V (A, RV)	9.9	11.3	**
		Nominal 3.5 V (A, RV)	7.4	9.4	
		High 5.0 V (A, RV)	5.4	7.5	
Thera-i DR	7968i	Low 2.5 V (A, RV)	7.2	8.3	**
		Nominal 3.5 V (A, RV)	5.4	6.9	
		High 5.0 V (A, RV)	3.9	5.5	
Thera-i S	8964i, 8965i, 8966i	Low 2.5 V (RV)	10.0	10.9	**
		Nominal 3.5 V (RV)	8.1	9.6	
		High 5.0 V (RV)	6.4	8.2	
Thera-i SR	8960i, 8961i, 8962i	Low 2.5 V (RV)	9.8	10.7	**
		Nominal 3.5 V (RV)	8.0	9.5	
		High 5.0 V (RV)	6.4	8.1	
Thera-i VDD	8968i	Low 2.5 V (RV)	11.5	12.4	**
		Nominal 3.5 V (RV)	9.6	11.1	
		High 5.0 V (RV)	7.7	9.7	
Versa DR	VEDR01	Low 2.5 V (A, RV)	7.5	8.3	**
		Nominal 3.5 V (A, RV)	6.1	7.4	
		High 5.0 V (A, RV)	4.5	6.0	

\*\*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 70,000 leads studied. More than 19,000 of these leads are currently active.

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 CRT, ICD, or IPG 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

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.

*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 United States, based on estimated US implants.

## Chronic Lead Data Resolution

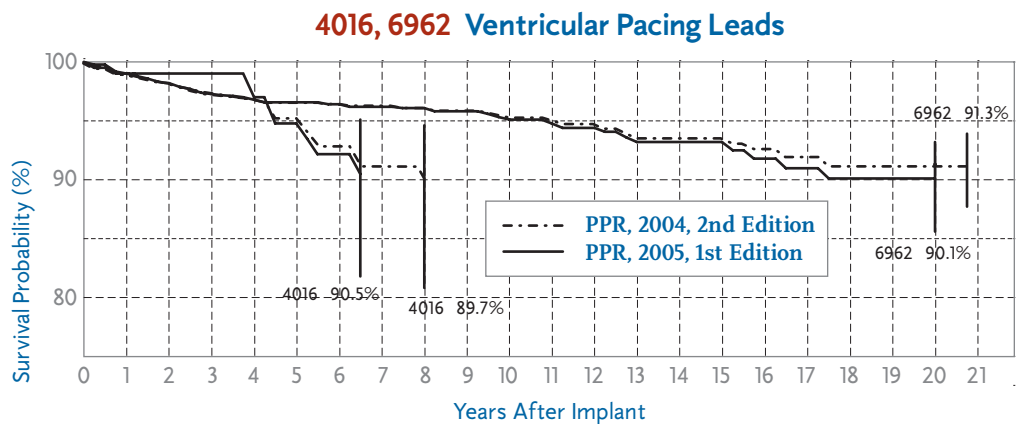
Because an accurate estimate of lead survival depends on an accurate estimate of the number of leads in service, it is important not to overstate the number of devices in service. Since the inception of the CLS and TCSS studies, the mechanism of patient follow-up has changed due to evolution in hospital 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



**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

## 2187 Attain

### Product Characteristics

US Market Release	Aug-01	Serial Number Prefix	LEY
Estimated US Implants	17,100	Type and/or Fixation	Transvenous, Left Ventricular Cardiac Vein, Distal Continuous Curve
Estimated US Active	11,200	Polarity	Unipolar
Advisories	None	Steroid	No

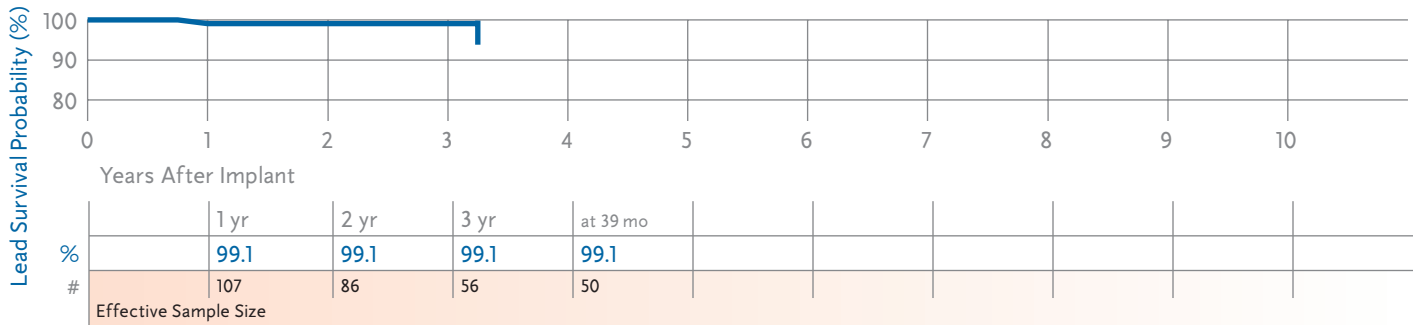
### Laboratory Analysis

Implant Damage	7
Electrical Malfunction	0
Other	16

### Prospective Clinical Study Results

### Qualifying Complications 1 Total

Number of Leads Enrolled in Study	132	Failure to Capture	1
Cumulative Months of Follow-Up	4,943		



Leads

## 2188 Attain

### Product Characteristics

US Market Release	Aug-01	Serial Number Prefix	LEB
Estimated US Implants	2,800	Type and/or Fixation	Transvenous, Coronary Sinus/ Cardiac Vein, Canted
Estimated US Active	1,600	Polarity	Bipolar
Advisories	None	Steroid	No

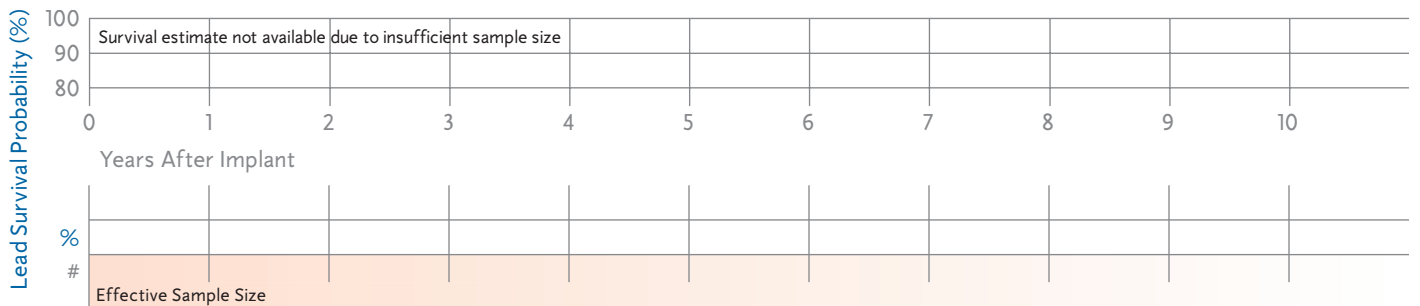
### Laboratory Analysis

Implant Damage	1
Electrical Malfunction	1
Other	0

### Prospective Clinical Study Results

### Qualifying Complications 1 Total

Number of Leads Enrolled in Study	14	Extra Cardiac Stimulation	1
Cumulative Months of Follow-Up	490		



# Left-Heart Leads continued

## 4193 Attain

### Product Characteristics

US Market Release	May-02	Serial Number Prefix	BAA
Estimated US Implants	99,000	Type and/or Fixation	Transvenous, Left Ventricular Cardiac Vein, Distal Double Curve
Estimated US Active	76,800	Polarity	Unipolar
Advisories	None	Steroid	Yes

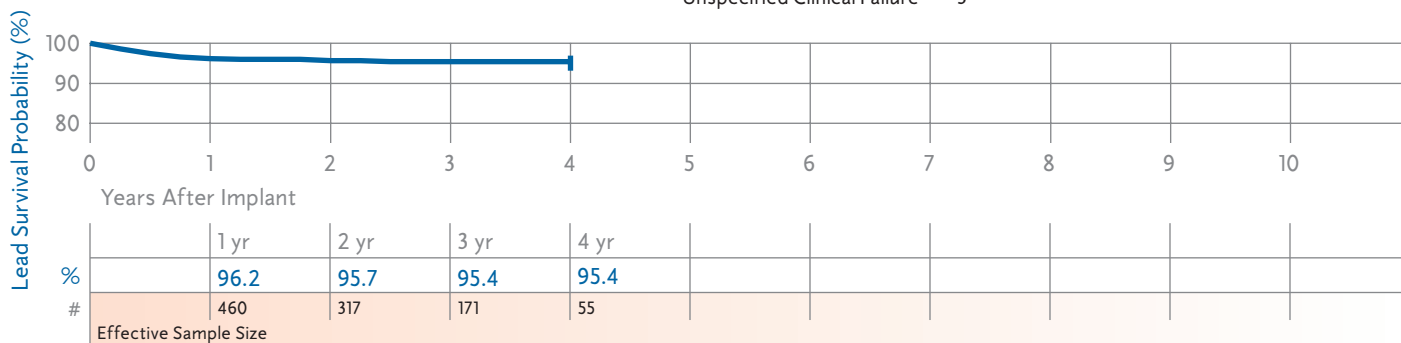
### Laboratory Analysis

Implant Damage	58
Electrical Malfunction	15
Other	63

### Prospective Clinical Study Results

### Qualifying Complications 26 Total

Number of Leads Enrolled in Study	665	Conductor Fracture	1
Cumulative Months of Follow-Up	16,560	Extra Cardiac Stimulation	4
		Failure to Capture	9
		Lead Dislodgement	9
		Unspecified Clinical Failure	3



## 4194 Attain

### Product Characteristics

US Market Release	Aug-04	Serial Number Prefix	LFG
Estimated US Implants	46,600	Type and/or Fixation	Transvenous, Left Ventricular Cardiac Vein, Distal Double Curve
Estimated US Active	41,800	Polarity	Bipolar
Advisories	None	Steroid	Yes

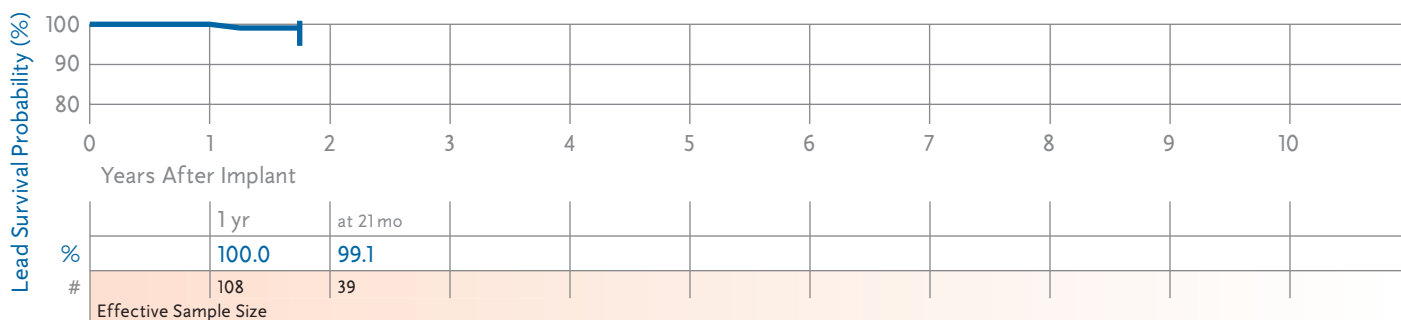
### Laboratory Analysis

Implant Damage	55
Electrical Malfunction	1
Other	6

### Prospective Clinical Study Results

### Qualifying Complications 2 Total

Number of Leads Enrolled in Study	273	Failure to Capture	1
Cumulative Months of Follow-Up	3,296	Lead Dislodgement	1



## Lead Survival Summary (95% Confidence Interval)

Model Number	Family	US Market Release	Leads Enrolled	Qualifying Complications	Cumulative Months of Follow-Up in Study	Device Survival Probability (%)									
						Years After Implant									
						1 yr	2 yr	3 yr	4 yr	5 yr	6 yr	7 yr	8 yr	9 yr	10 yr
2187	Attain	Aug-01	132	1	4,943	99.1 +0.8/-5.3	99.1 +0.8/-5.3	99.1 +0.8/-5.3	99.1 +0.8/-5.3 at 39 mo						
2188	Attain	Aug-01	14	1	490	Survival estimate not available due to insufficient sample size									
4193	Attain	May-02	665	26	16,560	96.2 +1.3/-1.9	95.7 +1.4/-2.0	95.4 +1.5/-2.2	95.4 +1.5/-2.2						
4194	Attain	Aug-04	273	2	3,296	100.0	99.1 +0.8/-5.5 at 21 mo								

Source: System Longevity Study  
Data as of January 31, 2007

## Laboratory Analysis Summary

Model Number	Family	US Market Release	Estimated US Implants	Estimated US Active	Implant Damage	Electrical Malfunction	Other
2187	Attain	Aug-01	17,100	11,200	7	0	16
2188	Attain	Aug-01	2,800	1,600	1	1	0
4193	Attain	May-02	99,000	76,800	58	15	63
4194	Attain	Aug-04	46,600	41,800	55	1	6

Source: Returned Product Analysis  
Data as of January 31, 2007

## Reference Chart

Model Number	Family	Type	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	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

## 6721, 6921 Epicardial Patch

### Product Characteristics

US Market Release	Feb-93	Serial Number Prefix	TBH, TBG, TBB, TAD, TAC, or TAB
Estimated US Implants	8,900	Type and/or Fixation	Epicardial Defib Patch, Suture
Estimated US Active	2,100	Polarity	Defib Electrode only
Advisories	None	Steroid	No

### Laboratory Analysis

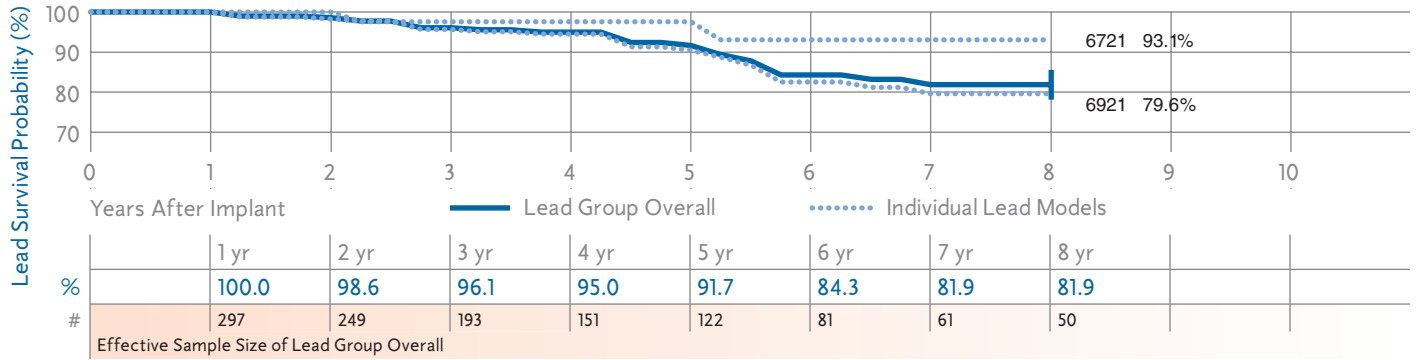
Implant Damage	5
Electrical Malfunction	79
Other	0

### Prospective Clinical Study Results

### Qualifying Complications 29 Total

Number of Leads Enrolled in Study	407
Cumulative Months of Follow-Up	18,127

Conductor Fracture	21
Failure to Capture	2
Impedance Out of Range	3
Insulation (not further defined)	3



## 6930 Sprint Fidelis

### Product Characteristics

US Market Release	Sep-04	Serial Number Prefix	LFK
Estimated US Implants	200	Type and/or Fixation	Transvenous, Vent, Defib and Pace/ Sense, Tines
Estimated US Active	200	Polarity	True Bipolar/One Coil
Advisories	None	Steroid	Yes

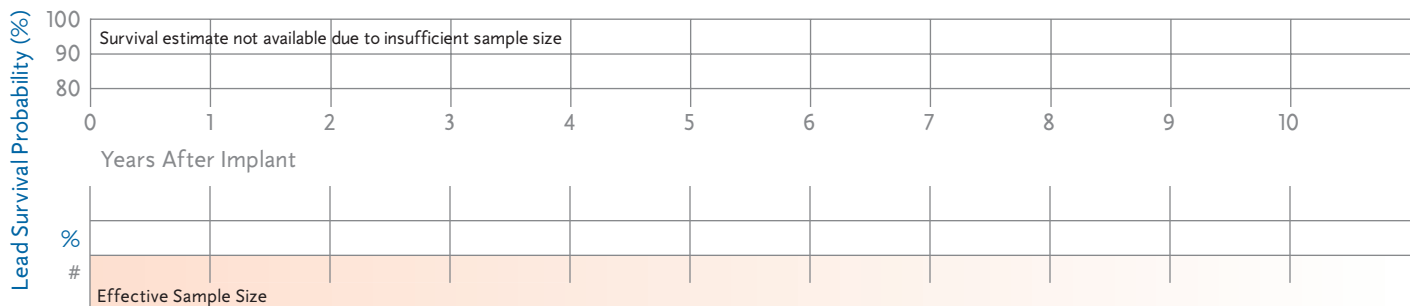
### Laboratory Analysis

Implant Damage	0
Electrical Malfunction	0
Other	0

### Prospective Clinical Study Results

### Qualifying Complications 0 Total

Number of Leads Enrolled in Study	0
Cumulative Months of Follow-Up	0



# Defibrillation Leads continued

## 6931 Sprint Fidelis

### Product Characteristics

US Market Release	Sep-04	Serial Number Prefix	LFL
Estimated US Implants	5,400	Type and/or Fixation	Transvenous, Vent, Defib and Pace/ Sense, Screw-in
Estimated US Active	4,900	Polarity	True Bipolar/One Coil
Advisories	None	Steroid	Yes

### Laboratory Analysis

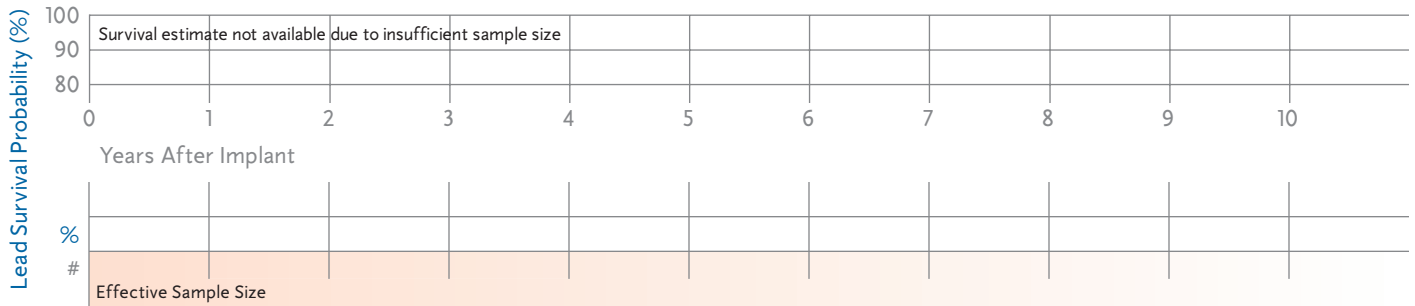
Implant Damage	12
Electrical Malfunction	22
Other	0

### Prospective Clinical Study Results

### Qualifying Complications

1 Total

Number of Leads Enrolled in Study	152	Lead Dislodgement	1
Cumulative Months of Follow-Up	1,050		



## 6932 Sprint

### Product Characteristics

US Market Release	Aug-96	Serial Number Prefix	TCA
Estimated US Implants	15,300	Type and/or Fixation	Transvenous, Vent, Defib and Pace/ Sense, Tines
Estimated US Active	6,800	Polarity	True Bipolar/One Coil
Advisories	None	Steroid	Yes

### Laboratory Analysis

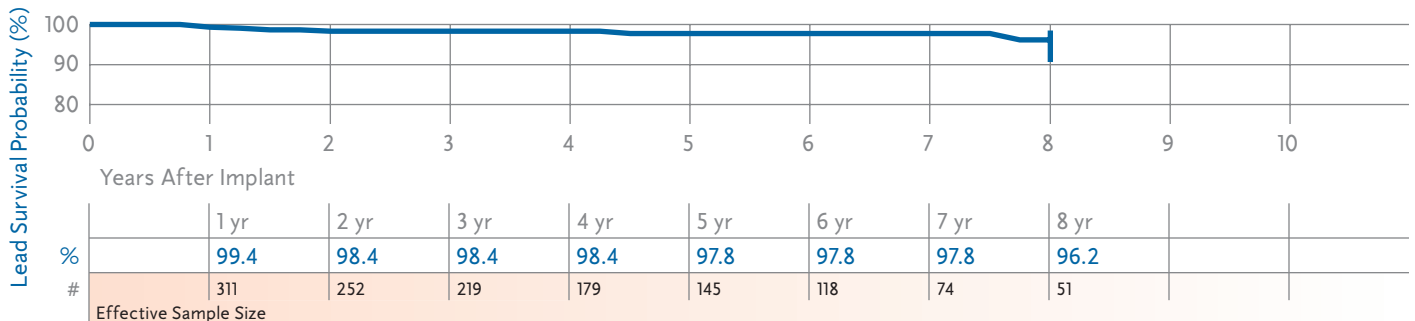
Implant Damage	16
Electrical Malfunction	37
Other	7

### Prospective Clinical Study Results

### Qualifying Complications

7 Total

Number of Leads Enrolled in Study	411	Extra Cardiac Stimulation	1
Cumulative Months of Follow-Up	19,204	Failure to Capture	2
		Failure to Sense	2
		Oversensing	2





# Defibrillation Leads continued

## 6933, 6937, 6937A, 6963 SVC/CS

### Product Characteristics

US Market Release	Dec-93	Serial Number Prefix	TAT, TBU, or TAF
Estimated US Implants	17,300	Type and/or Fixation	Transvenous CS or SVC Defib
Estimated US Active	5,800	Polarity	One Defib Coil
Advisories	None	Steroid	No

### Laboratory Analysis

Implant Damage	31
Electrical Malfunction	192
Other	13

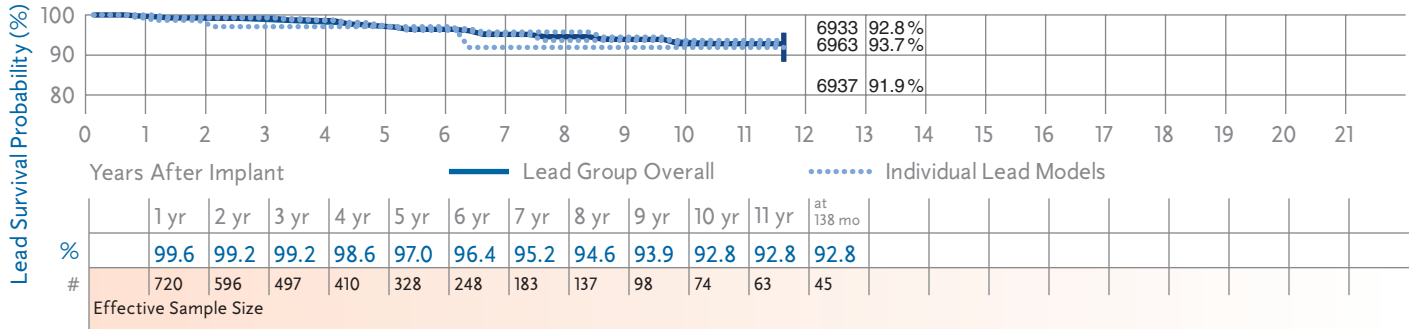
### Prospective Clinical Study Results

Number of Leads Enrolled in Study	966
Cumulative Months of Follow-Up	46,981

### Qualifying Complications 23 Total

Conductor Fracture	14
Failure to Capture	1
Impedance Out of Range	2
Insulation (not further defined)	2

Lead Dislodgement	1
Unspecified Clinical Failure	3



## 6936, 6966 Transvene

### Product Characteristics

US Market Release	Dec-93	Serial Number Prefix	TAV or TAL
Estimated US Implants	24,600	Type and/or Fixation	Transvenous, Vent, Defib and Pace/Sense, Screw-in
Estimated US Active	6,200	Polarity	True Bipolar/One Coil
Advisories	None	Steroid	No

### Laboratory Analysis

Implant Damage	90
Electrical Malfunction	456
Other	19

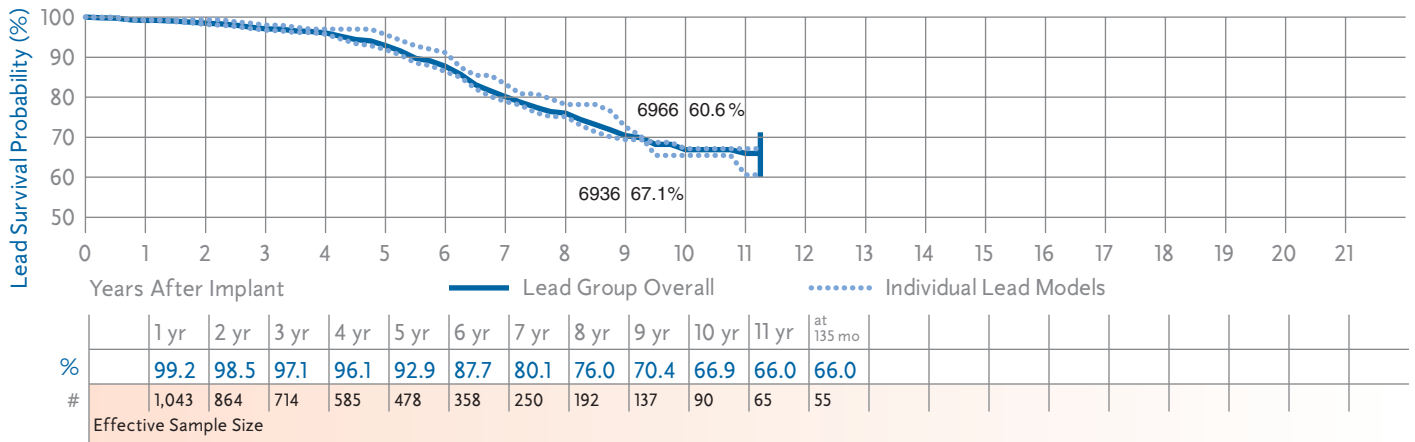
### Prospective Clinical Study Results

Number of Leads Enrolled in Study	1,349
Cumulative Months of Follow-Up	66,564

### Qualifying Complications 139 Total

Conductor Fracture	16
Extra Cardiac Stimulation	2
Failure to Capture	7
Failure to Sense	3
Impedance Out of Range	4
Insulation (not further defined)	13

Oversensing	89
Unspecified Clinical Failure	5



# Defibrillation Leads continued

## 6939, 6999 Sub-Q Patch

### Product Characteristics

US Market Release	Dec-93	Serial Number Prefix	TBA or TAP
Estimated US Implants	4,300	Type and/or Fixation	Subcutaneous Defib Patch, Suture
Estimated US Active	1,000	Polarity	Defib Electrode Only
Advisories	None	Steroid	No

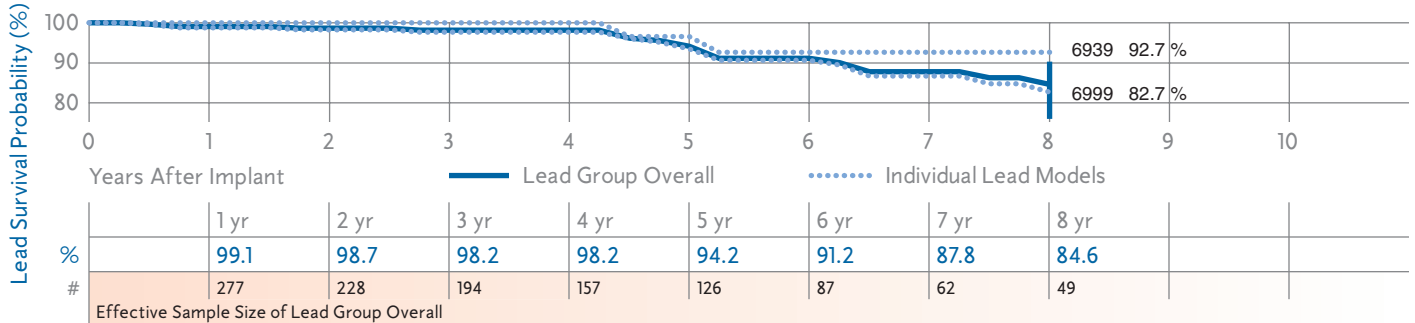
### Laboratory Analysis

Implant Damage	4
Electrical Malfunction	32
Other	1

### Prospective Clinical Study Results

### Qualifying Complications 20 Total

Number of Leads Enrolled in Study	384	Conductor Fracture	10
Cumulative Months of Follow-Up	17,628	Failure to Capture	2
		Insulation (not further defined)	6
		Unspecified Clinical Failure	2



## 6942 Sprint

### Product Characteristics

US Market Release	Jul-97	Serial Number Prefix	TCB
Estimated US Implants	18,100	Type and/or Fixation	Transvenous, Vent, Defib and Pace/Sense, Tines
Estimated US Active	8,700	Polarity	Integrated Bipolar/Two Coils
Advisories	None	Steroid	Yes

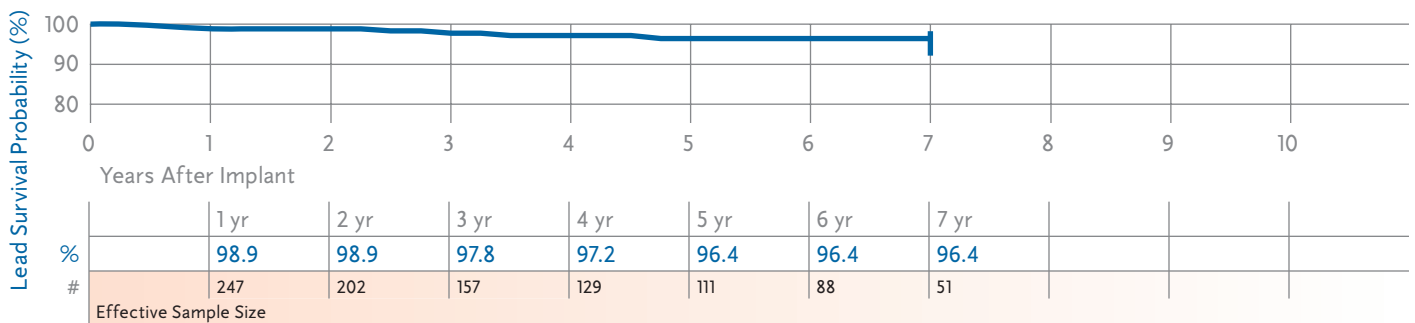
### Laboratory Analysis

Implant Damage	31
Electrical Malfunction	36
Other	5

### Prospective Clinical Study Results

### Qualifying Complications 7 Total

Number of Leads Enrolled in Study	353	Conductor Fracture	1
Cumulative Months of Follow-Up	14,509	Failure to Sense	1
		Lead Dislodgement	1
		Oversensing	3
		Unspecified Clinical Failure	1



Leads

# Defibrillation Leads continued

## 6943 Sprint

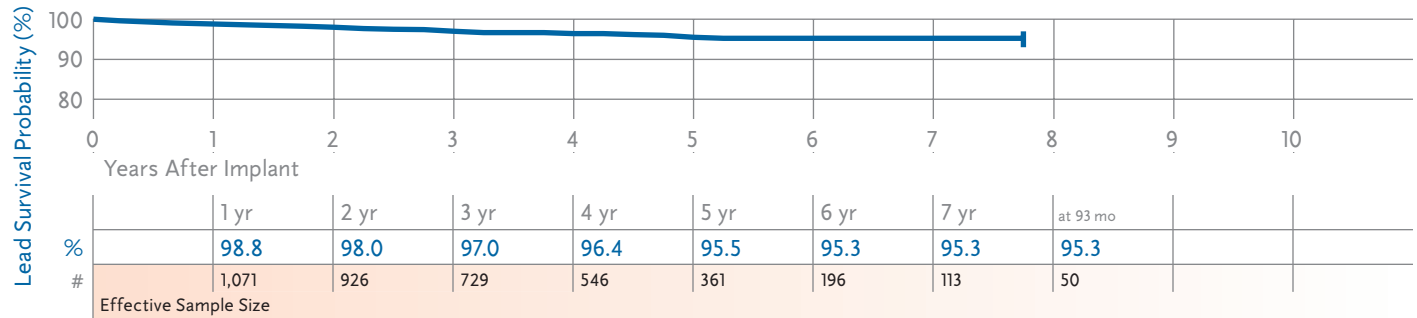
### Product Characteristics

US Market Release	Oct-97	Serial Number Prefix	TCE	<b>Laboratory Analysis</b>	
Estimated US Implants	21,300	Type and/or Fixation	Transvenous, Vent, Defib and Pace/Sense, Screw-in		
Estimated US Active	10,400	Polarity	True Bipolar/One Coil		
Advisories	None	Steroid	Yes		
				Implant Damage	50
				Electrical Malfunction	61
				Other	8

### Prospective Clinical Study Results

### Qualifying Complications 40 Total

Number of Leads Enrolled in Study	1,300	Conductor Fracture	7	Lead Dislodgement	1
Cumulative Months of Follow-Up	56,795	Failure to Capture	4	Oversensing	19
		Failure to Sense	3	Unspecified Clinical Failure	3
		Impedance Out of Range	2		
		Insulation (not further defined)	1		



## 6944 Sprint Quattro

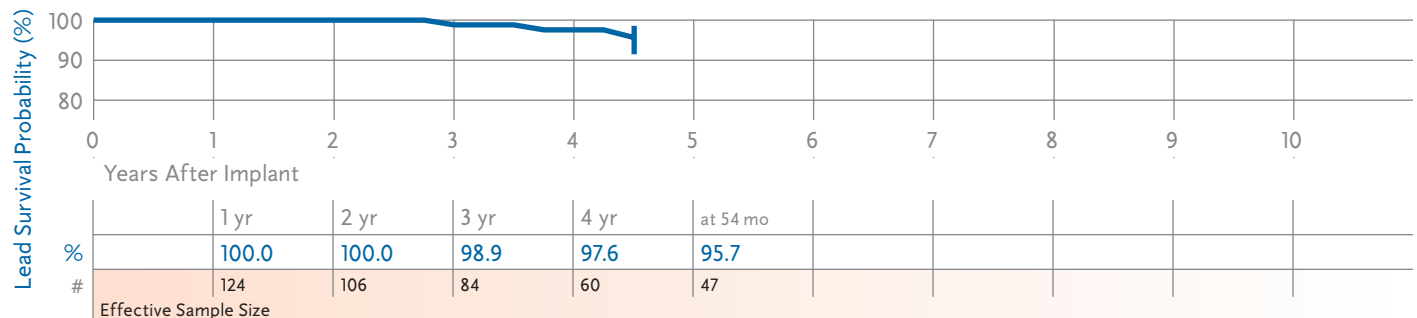
### Product Characteristics

US Market Release	Dec-00	Serial Number Prefix	TDC	<b>Laboratory Analysis</b>	
Estimated US Implants	28,300	Type and/or Fixation	Transvenous, Vent, Defib and Pace/Sense, Tines		
Estimated US Active	19,400	Polarity	True Bipolar/Two Coils		
Advisories	None	Steroid	Yes		
				Implant Damage	23
				Electrical Malfunction	29
				Other	8

### Prospective Clinical Study Results

### Qualifying Complications 3 Total

Number of Leads Enrolled in Study	170	Oversensing	2
Cumulative Months of Follow-Up	6,104	Unspecified Clinical Failure	1



# Defibrillation Leads continued

## 6945 Sprint

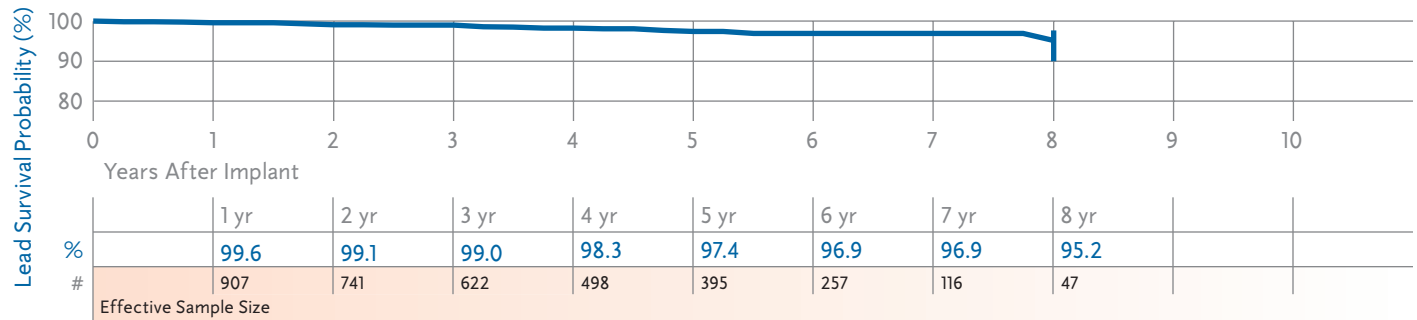
### Product Characteristics

US Market Release	Sep-97	Serial Number Prefix	TDA	<b>Laboratory Analysis</b>	
Estimated US Implants	44,000	Type and/or Fixation	Transvenous, Vent, Defib and Pace/Sense, Screw-in		
Estimated US Active	22,900	Polarity	Integrated Bipolar/Two Coils		
Advisories	None	Steroid	Yes		
				Implant Damage	196
				Electrical Malfunction	85
				Other	11

### Prospective Clinical Study Results

### Qualifying Complications 20 Total

Number of Leads Enrolled in Study	1,153	Conductor Fracture	2	Impedance Out of Range	2
Cumulative Months of Follow-Up	50,639	Extra Cardiac Stimulation	1	Oversensing	9
		Failure to Capture	1	Unspecified Clinical Failure	1
		Failure to Sense	4		



Leads

## 6947 Sprint Quattro Secure

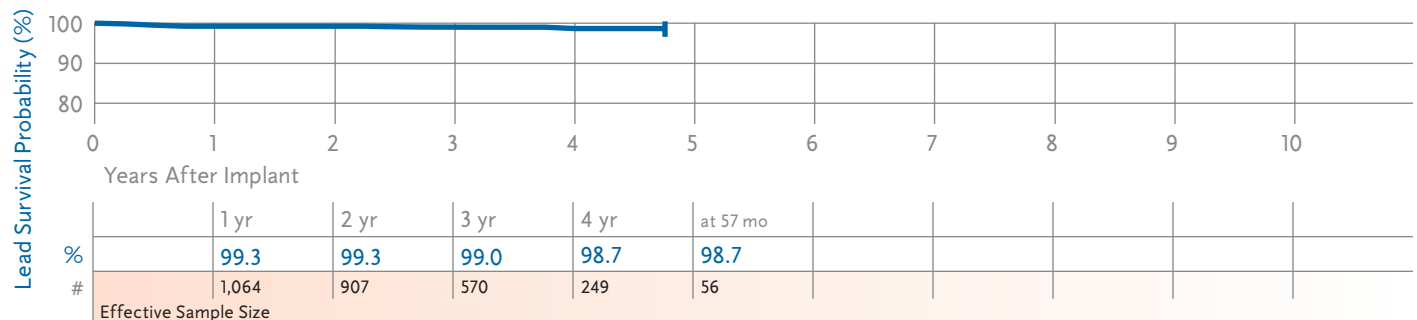
### Product Characteristics

US Market Release	Nov-01	Serial Number Prefix	TDG	<b>Laboratory Analysis</b>	
Estimated US Implants	126,400	Type and/or Fixation	Transvenous, Vent, Defib and Pace/Sense, Screw-in		
Estimated US Active	92,700	Polarity	True Bipolar/Two Coils		
Advisories	None	Steroid	Yes		
				Implant Damage	218
				Electrical Malfunction	82
				Other	12

### Prospective Clinical Study Results

### Qualifying Complications 12 Total

Number of Leads Enrolled in Study	1,348	Conductor Fracture	2	Lead Dislodgement	3
Cumulative Months of Follow-Up	43,062	Failure to Sense	1	Oversensing	2
		Impedance Out of Range	1	Unspecified Clinical Failure	2
		Insulation (not further defined)	1		



# Defibrillation Leads continued

## 6948 Sprint Fidelis

### Product Characteristics

US Market Release	Sep-04	Serial Number Prefix	LFH
Estimated US Implants	7,500	Type and/or Fixation	Transvenous, Vent, Defib and Pace/ Sense, Tines
Estimated US Active	6,900	Polarity	True Bipolar/Two Coils
Advisories	None	Steroid	Yes

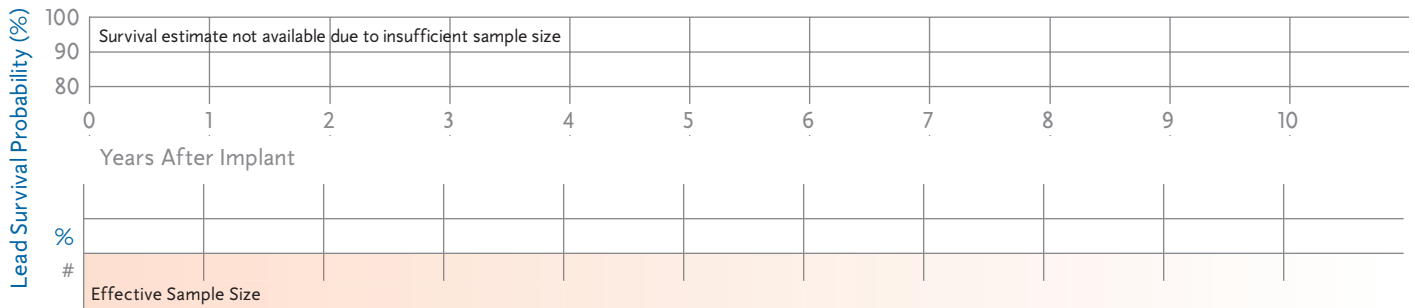
### Laboratory Analysis

Implant Damage	5
Electrical Malfunction	3
Other	2

### Prospective Clinical Study Results

### Qualifying Complications 0 Total

Number of Leads Enrolled in Study	19
Cumulative Months of Follow-Up	169



## 6949 Sprint Fidelis

### Product Characteristics

US Market Release	Sep-04	Serial Number Prefix	LFJ
Estimated US Implants	144,300	Type and/or Fixation	Transvenous, Vent, Defib and Pace/ Sense, Screw-in
Estimated US Active	129,000	Polarity	True Bipolar/Two Coils
Advisories	None	Steroid	Yes

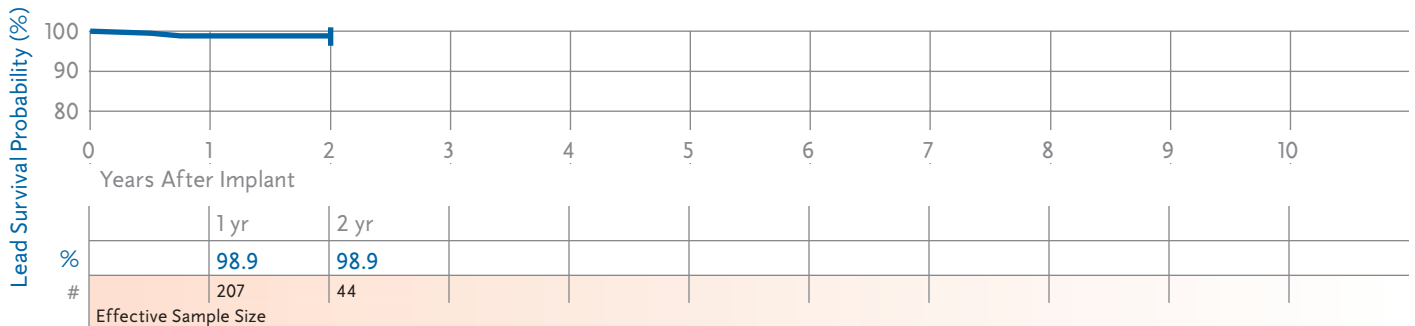
### Laboratory Analysis

Implant Damage	350
Electrical Malfunction	213
Other	33

### Prospective Clinical Study Results

### Qualifying Complications 4 Total

Number of Leads Enrolled in Study	487	Failure to Capture	1
Cumulative Months of Follow-Up	6,156	Oversensing	3



# Defibrillation Leads continued

## 6996 Sub-Q Lead

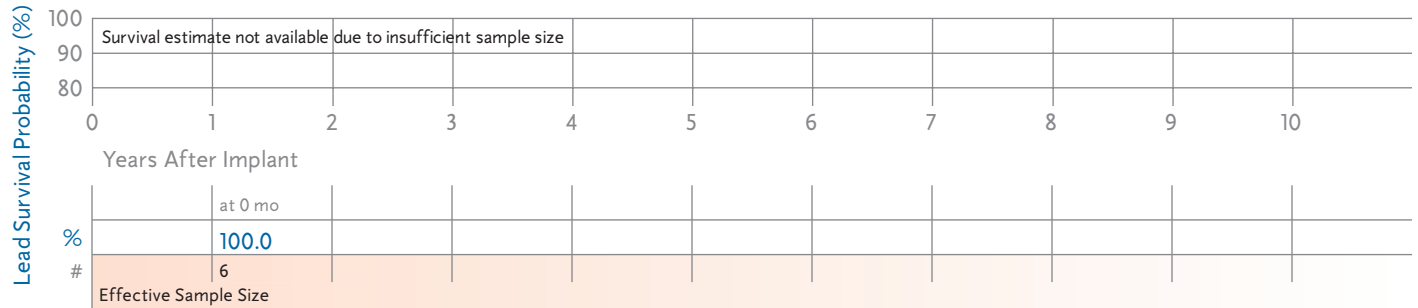
### Product Characteristics

US Market Release	Jun-01	Serial Number Prefix	TCR	<b>Laboratory Analysis</b>	
Estimated US Implants	1,900	Type and/or Fixation	Subcutaneous Defib Coil, Suture		
Estimated US Active	1,600	Polarity	One Defib Coil		
Advisories	None	Steroid	No		
				Implant Damage	0
				Electrical Malfunction	2
				Other	0

### Prospective Clinical Study Results

Qualifying Complications 0 Total

Number of Leads Enrolled in Study	6
Cumulative Months of Follow-Up	103



Leads

# Defibrillation Leads continued

## Lead Survival Summary (95% Confidence Interval)

Model Number	Family	US Market Release	Leads Enrolled	Qualifying Complications	Cumulative Months of Follow-Up in Study	Device Survival Probability (%)									
						Years After Implant									
						1 yr	2 yr	3 yr	4 yr	5 yr	6 yr	7 yr	8 yr	9 yr	10 yr
6721, 6921	Epicardial Patch	Feb-93	407	29	18,127	100.0	98.6 +0.9/-2.3	96.1 +1.8/-3.3	95.0 +2.1/-3.7	91.7 +3.1/-5.0	84.3 +5.0/-6.9	81.9 +5.6/-7.7	81.9 +5.6/-7.7		
6930	Sprint Fidelis	Sep-04	0	—	0	Survival estimate not available due to insufficient sample size									
6931	Sprint Fidelis	Sep-04	152	1	1,050	Survival estimate not available due to insufficient sample size									
6932	Sprint	Aug-96	411	7	19,204	99.4 +0.4/-1.8	98.4 +0.9/-2.3	98.4 +0.9/-2.3	98.4 +0.9/-2.3	97.8 +1.2/-2.9	97.8 +1.2/-2.9	97.8 +1.2/-2.9	96.2 +2.3/-5.5		
6933, 6937, 6937A, 6963	SVC/CS	Dec-93	966	23	46,981	99.6 +0.3/-0.8	99.2 +0.4/-1.0	99.2 +0.4/-1.0	98.6 +0.7/-1.4	97.0 +1.2/-2.0	96.4 +1.4/-2.2	95.2 +1.8/-2.8	94.6 +2.0/-3.0	92.8 +2.8/-4.5	92.8 +2.8/-4.5 at 138 mo
6936, 6966	Transvene	Dec-93	1,349	139	66,564	99.2 +0.4/-0.7	98.5 +0.6/-1.0	97.1 +0.9/-1.3	96.1 +1.1/-1.6	92.9 +1.7/-2.1	87.7 +2.4/-3.0	80.1 +3.4/-3.9	76.0 +3.9/-4.4	66.9 +5.0/-5.7	66.0 +5.2/-5.9 at 135 mo
6939, 6999	Sub-Q Patch	Dec-93	384	20	17,628	99.1 +0.6/-2.0	98.7 +0.8/-2.3	98.2 +1.1/-2.6	98.2 +1.1/-2.6	94.2 +2.6/-4.8	91.2 +3.5/-5.7	87.8 +4.6/-7.1	84.6 +5.7/-8.6		
6942	Sprint	Jul-97	353	7	14,509	98.9 +0.8/-2.2	98.9 +0.8/-2.2	97.8 +1.3/-3.1	97.2 +1.6/-3.6	96.4 +1.9/-4.2	96.4 +1.9/-4.2	96.4 +1.9/-4.2			
6943	Sprint	Oct-97	1,300	40	56,795	98.8 +0.5/-0.8	98.0 +0.7/-1.0	97.0 +0.9/-1.2	96.4 +1.0/-1.4	95.5 +1.3/-1.7	95.3 +1.3/-1.8	95.3 +1.3/-1.8	95.3 +1.3/-1.8 at 93 mo		
6944	Sprint Quattro	Dec-00	170	3	6,104	100.0	100.0	98.9 +0.9/-6.5	97.6 +1.8/-7.1	95.7 +2.9/-8.7 at 54 mo					
6945	Sprint	Sep-97	1,153	20	50,639	99.6 +0.2/-0.7	99.1 +0.4/-0.9	99.0 +0.5/-1.0	98.3 +0.7/-1.3	97.4 +1.0/-1.6	96.9 +1.1/-1.9	96.9 +1.1/-1.9	95.2 +2.5/-5.2		
6947	Sprint Quattro Secure	Nov-01	1,348	12	43,062	99.3 +0.3/-0.7	99.3 +0.3/-0.7	99.0 +0.4/-0.9	98.7 +0.6/-1.2	98.7 +0.6/-1.2 at 57 mo					
6948	Sprint Fidelis	Sep-04	19	0	169	Survival estimate not available due to insufficient sample size									
6949	Sprint Fidelis	Sep-04	487	4	6,156	98.9 +0.7/-1.8	98.9 +0.7/-1.8								
6996	Sub-Q Lead	Jun-01	6	0	103	Survival estimate not available due to insufficient 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	8,900	2,100	5	79	0
6930	Sprint Fidelis	Sep-04	200	200	0	0	0
6931	Sprint Fidelis	Sep-04	5,400	4,900	12	22	0
6932	Sprint	Aug-96	15,300	6,800	16	37	7
6933, 6937, 6937A, 6963	SVC/CS	Dec-93	17,300	5,800	31	192	13
6936, 6966	Transvene	Dec-93	24,600	6,200	90	456	19
6939, 6999	Sub-Q Patch	Dec-93	4,300	1,000	4	32	1
6942	Sprint	Jul-97	18,100	8,700	31	36	5
6943	Sprint	Oct-97	21,300	10,400	50	61	8
6944	Sprint Quattro	Dec-00	28,300	19,400	23	29	8
6945	Sprint	Sep-97	44,000	22,900	196	85	11
6947	Sprint Quattro Secure	Nov-01	126,400	92,700	218	82	12
6948	Sprint Fidelis	Sep-04	7,500	6,900	5	3	2
6949	Sprint Fidelis	Sep-04	144,300	129,000	350	213	33
6996	Sub-Q Lead	Jun-01	1,900	1,600	0	2	0



## Reference Chart

Model Number	Family	Type	Pin Configuration		Lead Body Diameter	Insulation, Lead Body	Fixation, Steroid
			Pace/ Sense	High Voltage			
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

## 3830 SelectSecure

### Product Characteristics

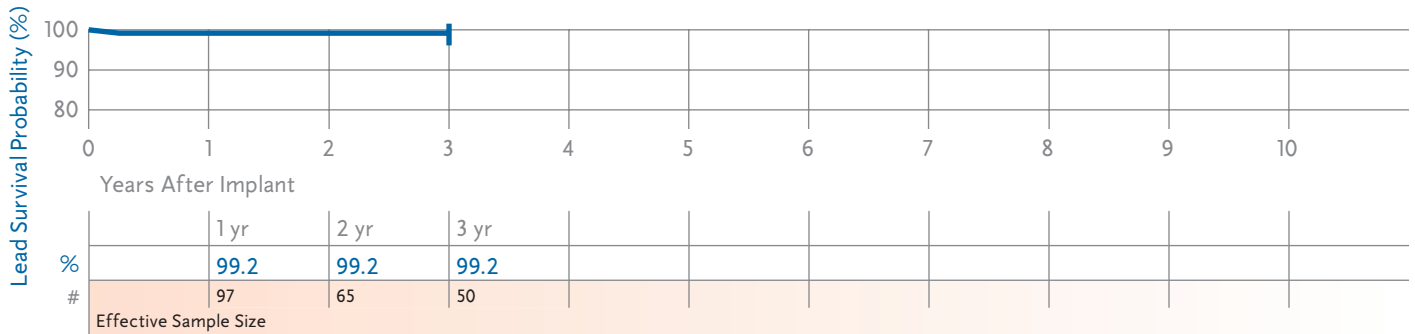
US Market Release	Aug-05	Serial Number Prefix	LFF	<b>Laboratory Analysis</b>	
Estimated US Implants	4,800	Type and/or Fixation	Transvenous, V or A, Screw-in		
Estimated US Active	4,400	Polarity	Bipolar		
Advisories	None	Steroid	Yes		
				Implant Damage	12
				Electrical Malfunction	1
				Other	1

### Atrial Placement

#### Prospective Clinical Study Results

#### Qualifying Complications 1 Total

Number of Leads Enrolled in Study	127	Failure to Sense	1
Cumulative Months of Follow-Up	3,716		

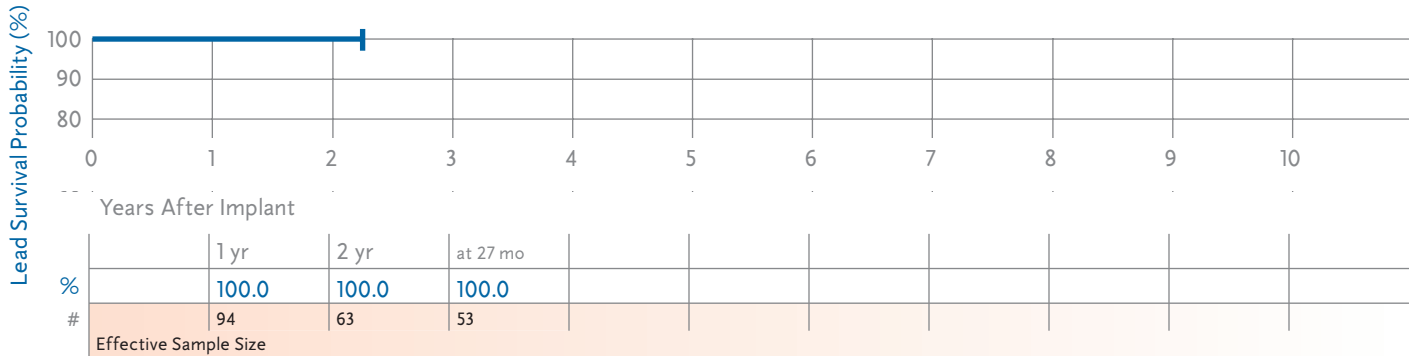


### Ventricular Placement

#### Prospective Clinical Study Results

#### Qualifying Complications 0 Total

Number of Leads Enrolled in Study	129
Cumulative Months of Follow-Up	3,597



Leads

# Pacing Leads continued

## 4003, 4003M CapSure

### Product Characteristics

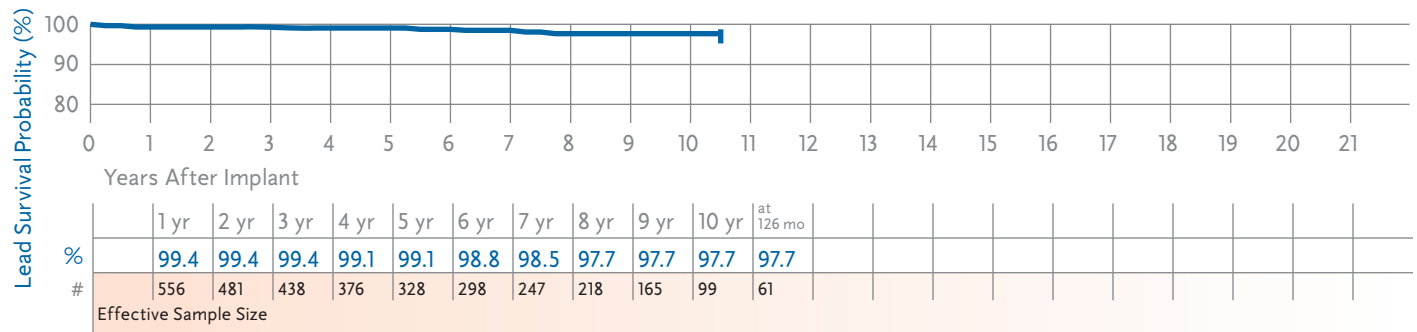
US Market Release	Jul-86	Serial Number Prefix	IH or LAX	<b>Laboratory Analysis</b>	
Estimated US Implants	40,000	Type and/or Fixation	Transvenous, Vent., Tines		
Estimated US Active	7,500	Polarity	Unipolar		
Advisories	None	Steroid	Yes		
				Implant Damage	24
				Electrical Malfunction	57
				Other	2

## Ventricular Placement

### Prospective Clinical Study Results

### Qualifying Complications 10 Total

Number of Leads Enrolled in Study	711	Extra Cardiac Stimulation	2
Cumulative Months of Follow-Up	44,116	Failure to Capture	6
		Oversensing	2



## 4004, 4004M CapSure

### Product Characteristics

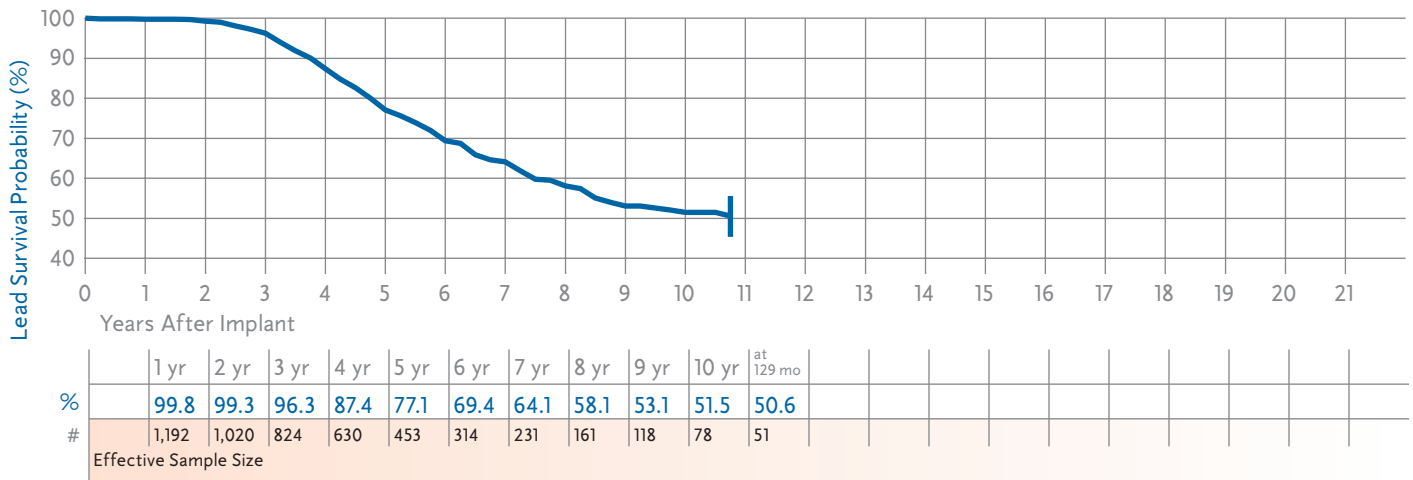
US Market Release	Feb-89	Serial Number Prefix	PS or LAV	<b>Laboratory Analysis</b>	
Estimated US Implants	74,500	Type and/or Fixation	Transvenous, Vent., Tines		
Estimated US Active	3,100	Polarity	Bipolar		
Advisories	1	Steroid	Yes		
see page 160 – 1993 Lead Survival Below Expectations				Implant Damage	55
				Electrical Malfunction	683
				Other	19

### Ventricular Placement

#### Prospective Clinical Study Results

#### Qualifying Complications 276 Total

Number of Leads Enrolled in Study	1,640	Conductor Fracture	7	Insulation (ESC)	4
Cumulative Months of Follow-Up	71,592	Electrical Abandonment	1	Insulation (MIO)	4
		Extra Cardiac Stimulation	2	Insulation (not further defined)	6
		Failure to Capture	131	Medical Judgement	1
		Failure to Sense	62	Oversensing	25
		Impedance Out of Range	32	Unspecified Clinical Failure	1



Leads

## 4011 Target Tip

### Product Characteristics

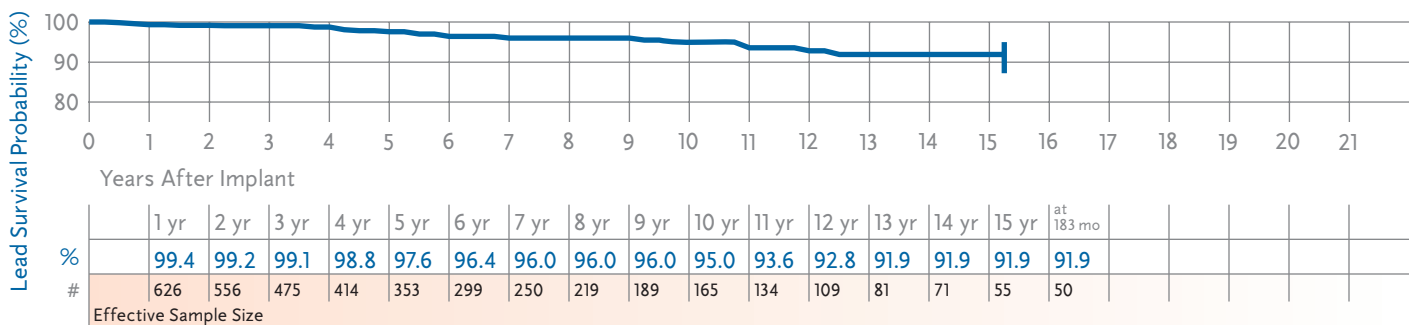
US Market Release	Nov-82	Serial Number Prefix	IB	<b>Laboratory Analysis</b>	
Estimated US Implants	64,000	Type and/or Fixation	Transvenous, Vent., Tines		
Estimated US Active	7,600	Polarity	Unipolar		
Advisories	None	Steroid	No		
				Implant Damage	29
				Electrical Malfunction	141
				Other	5

### Ventricular Placement

#### Prospective Clinical Study Results

#### Qualifying Complications 25 Total

Number of Leads Enrolled in Study	851	Conductor Fracture	1	Oversensing	1
Cumulative Months of Follow-Up	54,343	Extra Cardiac Stimulation	4	Failure to Capture	9
		Insulation (not further defined)	10		



# Pacing Leads continued

## 4012 Target Tip

### Product Characteristics

US Market Release	Jul-83
Estimated US Implants	96,800
Estimated US Active	6,100
Advisories	1
see page 161 – 1991 Lead Survival Below Expectations	

Serial Number Prefix	HQ
Type and/or Fixation	Transvenous, Vent., Tines
Polarity	Bipolar
Steroid	No

### Laboratory Analysis

Implant Damage	50
Electrical Malfunction	820
Other	34

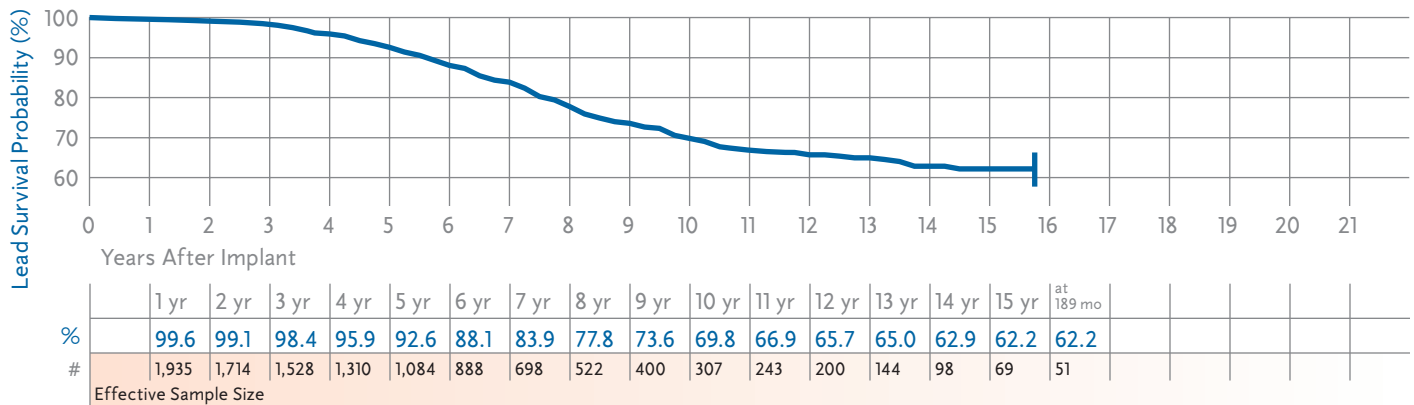
## Ventricular Placement

### Prospective Clinical Study Results

### Qualifying Complications 316 Total

Number of Leads Enrolled in Study	2,543
Cumulative Months of Follow-Up	150,878

Conductor Fracture	6	Insulation (ESC)	9
Extra Cardiac Stimulation	3	Insulation (MIO)	4
Failure to Capture	126	Insulation (not further defined)	16
Failure to Sense	77	Medical Judgement	1
Impedance Out of Range	26	Oversensing	48



## 4023 CapSure SP

### Product Characteristics

US Market Release	Aug-91
Estimated US Implants	43,700
Estimated US Active	15,700
Advisories	None

Serial Number Prefix	LAK
Type and/or Fixation	Transvenous, Vent., Tines
Polarity	Unipolar
Steroid	Yes

### Laboratory Analysis

Implant Damage	48
Electrical Malfunction	19
Other	6

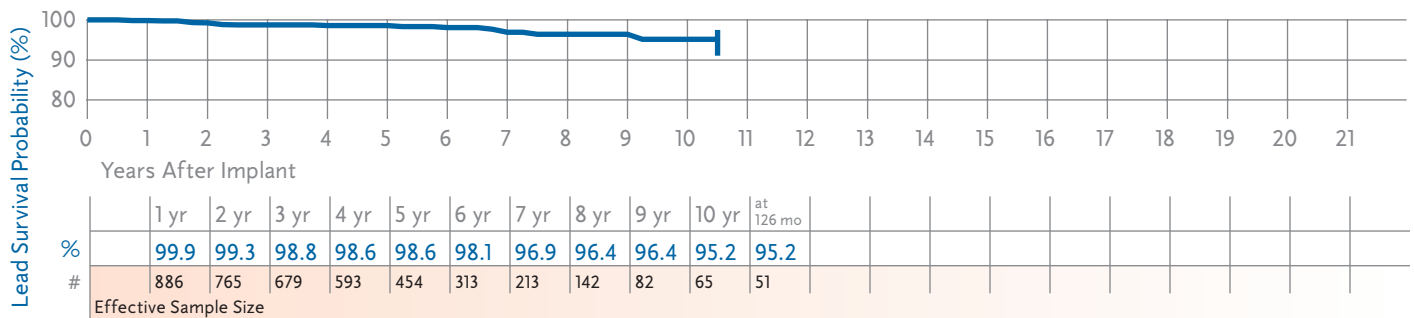
## Ventricular Placement

### Prospective Clinical Study Results

### Qualifying Complications 19 Total

Number of Leads Enrolled in Study	1,157
Cumulative Months of Follow-Up	58,076

Extra Cardiac Stimulation	1	Lead Dislodgement	2
Failure to Capture	14		
Impedance Out of Range	1		
Insulation (not further defined)	1		



# Pacing Leads continued

## 4024 CapSure SP

### Product Characteristics

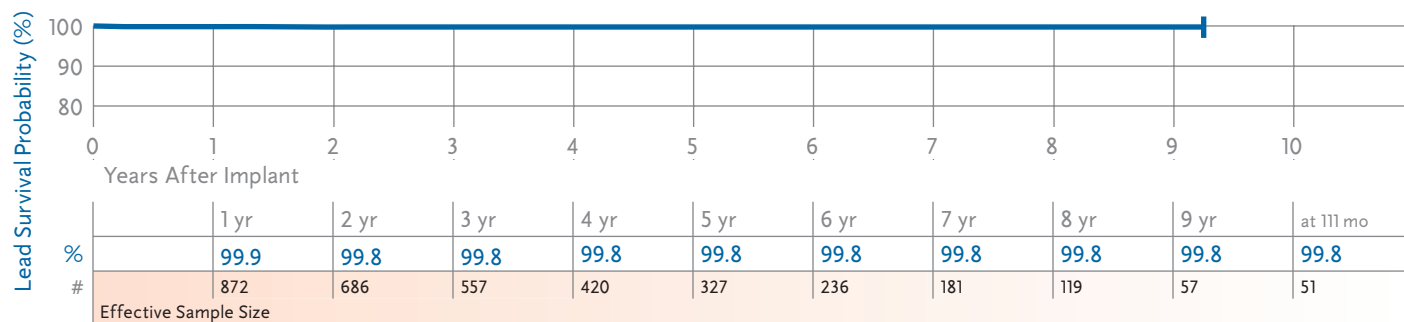
US Market Release	Oct-91	Serial Number Prefix	LAJ	<b>Laboratory Analysis</b>	
Estimated US Implants	229,200	Type and/or Fixation	Transvenous, Vent., Tines		
Estimated US Active	88,700	Polarity	Bipolar		
Advisories	None	Steroid	Yes		
				Implant Damage	264
				Electrical Malfunction	100
				Other	34

### Ventricular Placement

#### Prospective Clinical Study Results

#### Qualifying Complications 3 Total

Number of Leads Enrolled in Study	1,215	Failure to Capture	3
Cumulative Months of Follow-Up	50,950		



Leads

## 4033 CapSure Z

### Product Characteristics

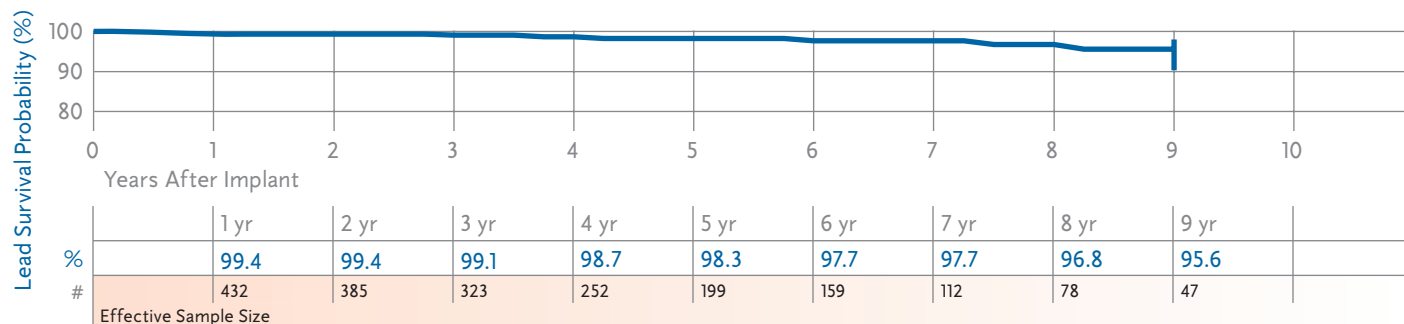
US Market Release	n/a	Serial Number Prefix	LCA	<b>Laboratory Analysis</b>	
Estimated US Implants	n/a	Type and/or Fixation	Transvenous, Vent., Tines		
Estimated US Active	n/a	Polarity	Unipolar		
Advisories	None	Steroid	Yes		
				Implant Damage	2
				Electrical Malfunction	0
				Other	0

### Ventricular Placement

#### Prospective Clinical Study Results

#### Qualifying Complications 9 Total

Number of Leads Enrolled in Study	541	Conductor Fracture	1
Cumulative Months of Follow-Up	27,807	Failure to Capture	8



# Pacing Leads continued

## 4057, 4057M Screw-In

### Product Characteristics

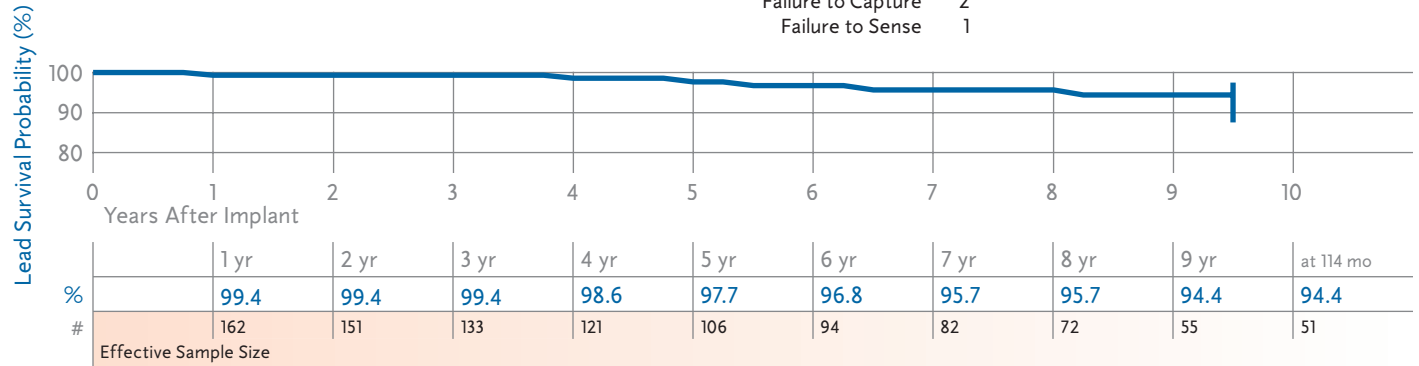
US Market Release	Aug-88	Serial Number Prefix	XQ or LAN	<b>Laboratory Analysis</b>	
Estimated US Implants	12,100	Type and/or Fixation	Transvenous, V or A, Screw-in		
Estimated US Active	2,900	Polarity	Unipolar		
Advisories	None	Steroid	No		
				Implant Damage	39
				Electrical Malfunction	6
				Other	4

## Ventricular Placement

### Prospective Clinical Study Results

### Qualifying Complications 7 Total

Number of Leads Enrolled in Study	259	Conductor Fracture	2
Cumulative Months of Follow-Up	15,131	Extra Cardiac Stimulation	2
		Failure to Capture	2
		Failure to Sense	1



# Pacing Leads continued

## 4058, 4058M Screw-In

### Product Characteristics

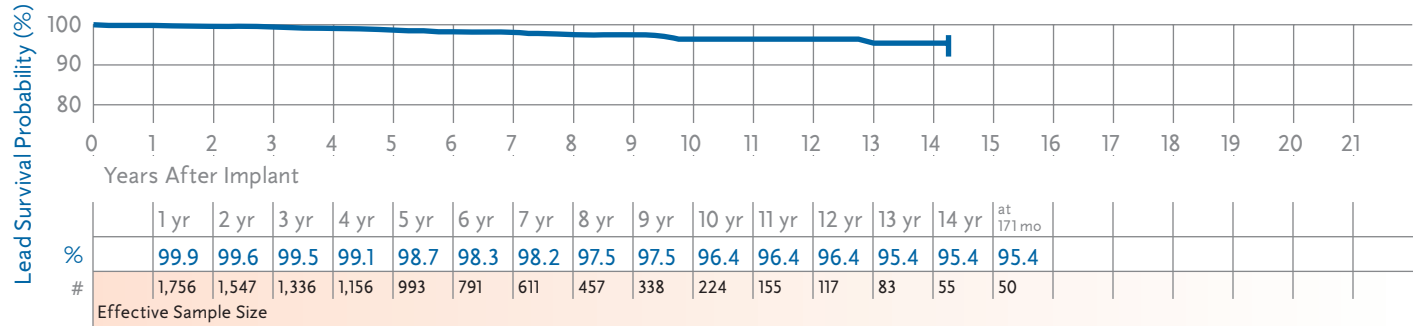
US Market Release	Jan-89	Serial Number Prefix	ZY or LAW	<b>Laboratory Analysis</b>	
Estimated US Implants	111,100	Type and/or Fixation	Transvenous, V or A, Screw-in		
Estimated US Active	27,300	Polarity	Bipolar		
Advisories	None	Steroid	No		
				Implant Damage	388
				Electrical Malfunction	227
				Other	23

### Atrial Placement

#### Prospective Clinical Study Results

#### Qualifying Complications 31 Total

Number of Leads Enrolled in Study	2,363	Extra Cardiac Stimulation	1	Insulation (not further defined)	1
Cumulative Months of Follow-Up	130,731	Failure to Capture	15	Lead Dislodgement	3
		Failure to Sense	7	Oversensing	1
		Impedance Out of Range	3		

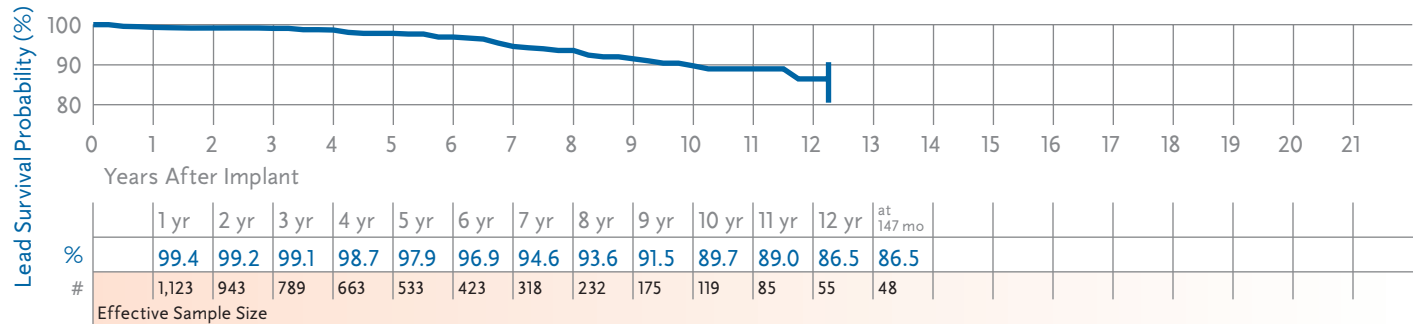


### Ventricular Placement

#### Prospective Clinical Study Results

#### Qualifying Complications 48 Total

Number of Leads Enrolled in Study	1,690	Conductor Fracture	2	Impedance Out of Range	5
Cumulative Months of Follow-Up	76,349	Extra Cardiac Stimulation	3	Insulation (not further defined)	4
		Failure to Capture	22	Lead Dislodgement	1
		Failure to Sense	10	Oversensing	1



Leads



# Pacing Leads continued

## 4067 CapSureFix

### Product Characteristics

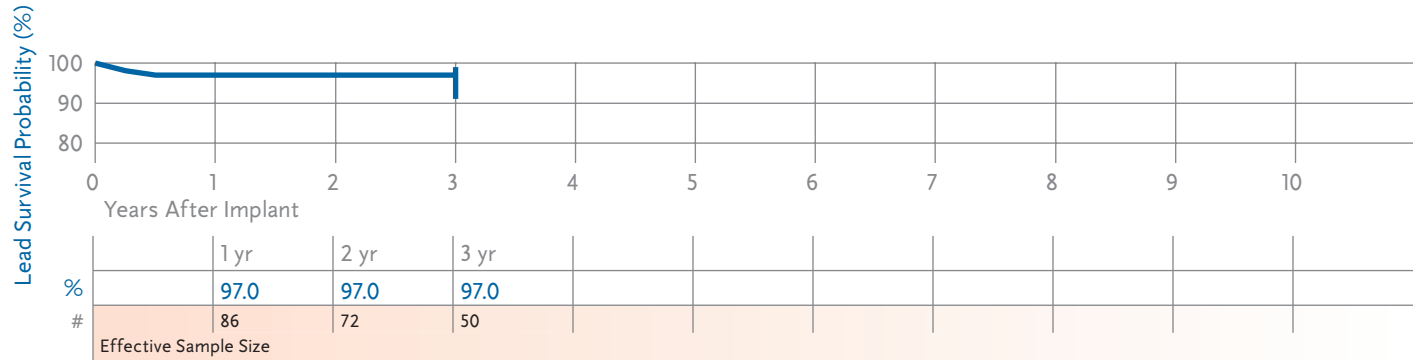
US Market Release	Jan-97	Serial Number Prefix	LCV	<b>Laboratory Analysis</b>	
Estimated US Implants	1,300	Type and/or Fixation	Transvenous, V or A, Screw-in		
Estimated US Active	500	Polarity	Unipolar		
Advisories	None	Steroid	Yes		
				Implant Damage	3
				Electrical Malfunction	1
				Other	1

## Atrial Placement

### Prospective Clinical Study Results

### Qualifying Complications 6 Total

Number of Leads Enrolled in Study	108	Failure to Capture	5
Cumulative Months of Follow-Up	5,603	Oversensing	1



## 4068 CapSureFix

### Product Characteristics

US Market Release	Mar-96	Serial Number Prefix	LCE	<b>Laboratory Analysis</b>	
Estimated US Implants	131,700	Type and/or Fixation	Transvenous, V or A, Screw-in		
Estimated US Active	60,500	Polarity	Bipolar		
Advisories	None	Steroid	Yes		
				Implant Damage	406
				Electrical Malfunction	78
				Other	11

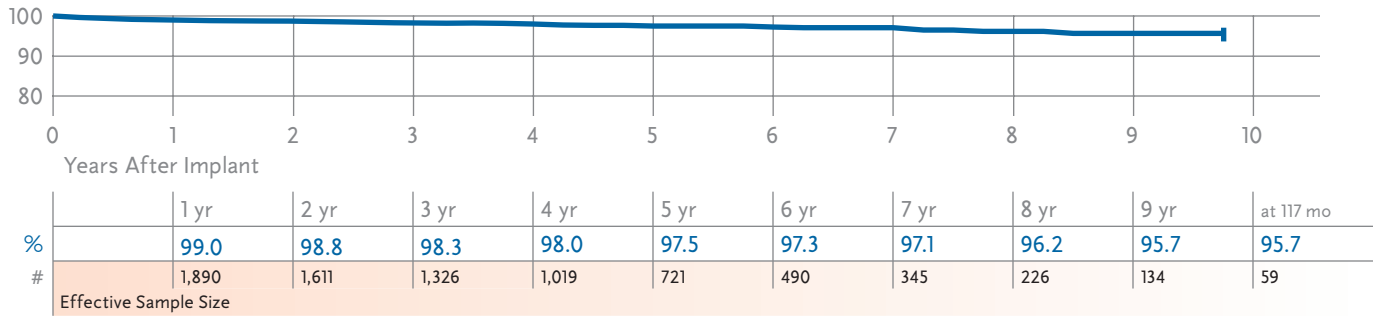
### Atrial Placement

#### Prospective Clinical Study Results

#### Qualifying Complications 48 Total

Number of Leads Enrolled in Study	2,394	Conductor Fracture	1	Insulation (ESC)	2
Cumulative Months of Follow-Up	109,765	Extra Cardiac Stimulation	1	Lead Dislodgement	8
		Failure to Capture	19	Oversensing	3
		Failure to Sense	11	Unspecified Clinical Failure	1
		Impedance Out of Range	2		

Lead Survival Probability (%)



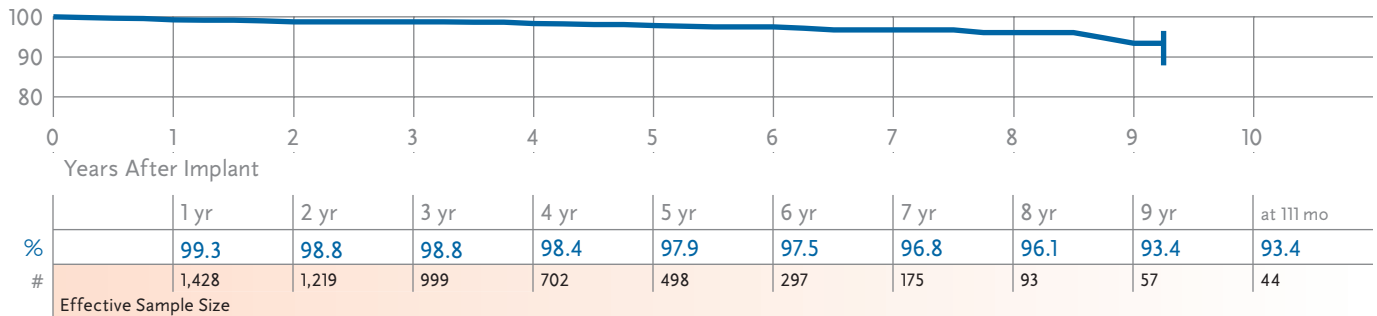
### Ventricular Placement

#### Prospective Clinical Study Results

#### Qualifying Complications 30 Total

Number of Leads Enrolled in Study	1,799	Conductor Fracture	2
Cumulative Months of Follow-Up	78,005	Extra Cardiac Stimulation	2
		Failure to Capture	18
		Failure to Sense	3
		Impedance Out of Range	3
		Oversensing	2

Lead Survival Probability (%)



Leads

# Pacing Leads continued

## 4073 CapSure Sense

### Product Characteristics

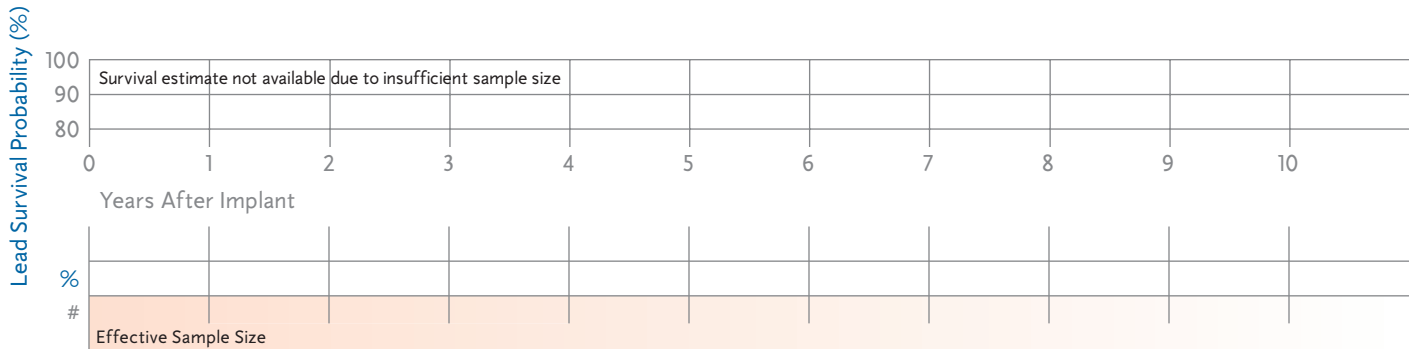
US Market Release	Jun-02	Serial Number Prefix	BBF	<b>Laboratory Analysis</b>	
Estimated US Implants	500	Type and/or Fixation	Transvenous, Vent., Tines		
Estimated US Active	400	Polarity	Unipolar		
Advisories	None	Steroid	Yes		
				Implant Damage	1
				Electrical Malfunction	0
				Other	0

## Atrial Placement

### Prospective Clinical Study Results

Qualifying Complications 0 Total

Number of Leads Enrolled in Study	1
Cumulative Months of Follow-Up	28

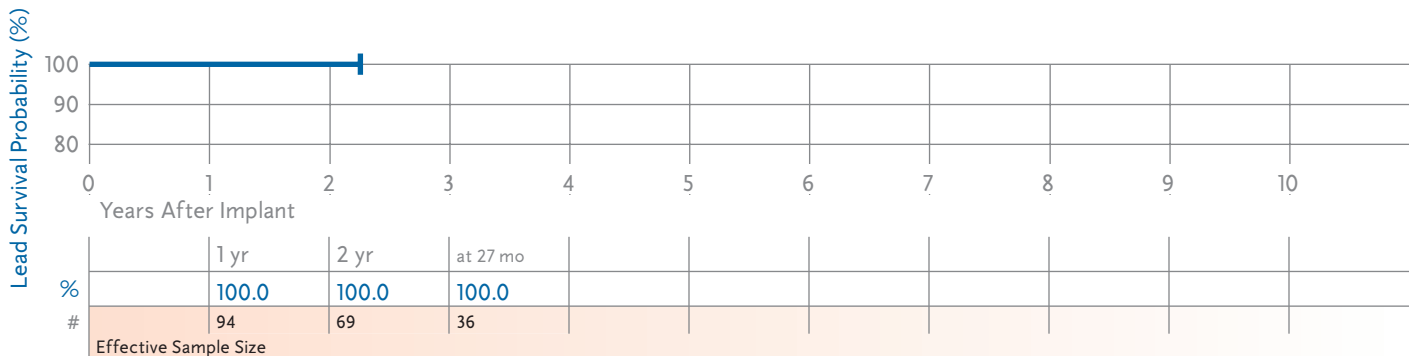


## Ventricular Placement

### Prospective Clinical Study Results

Qualifying Complications 0 Total

Number of Leads Enrolled in Study	100
Cumulative Months of Follow-Up	2,778



# Pacing Leads continued

## 4074 CapSure Sense

### Product Characteristics

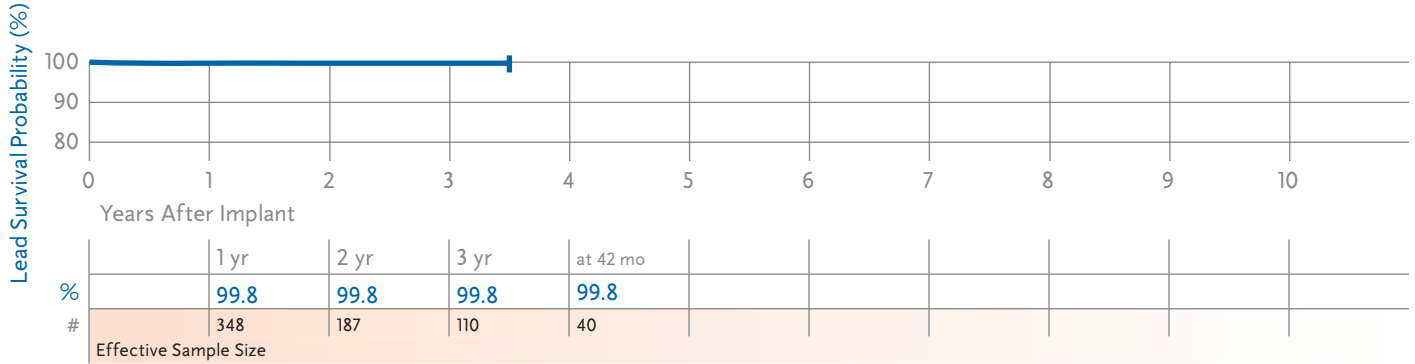
US Market Release	Jun-02	Serial Number Prefix	BBD	<b>Laboratory Analysis</b>	
Estimated US Implants	43,500	Type and/or Fixation	Transvenous, Vent., Tines		
Estimated US Active	35,600	Polarity	Bipolar		
Advisories	None	Steroid	Yes		
				Implant Damage	11
				Electrical Malfunction	3
				Other	1

## Ventricular Placement

### Prospective Clinical Study Results

### Qualifying Complications 1 Total

Number of Leads Enrolled in Study	608	Lead Dislodgement	1
Cumulative Months of Follow-Up	12,289		



Leads

# Pacing Leads continued

## 4076 CapSureFix Novus

### Product Characteristics

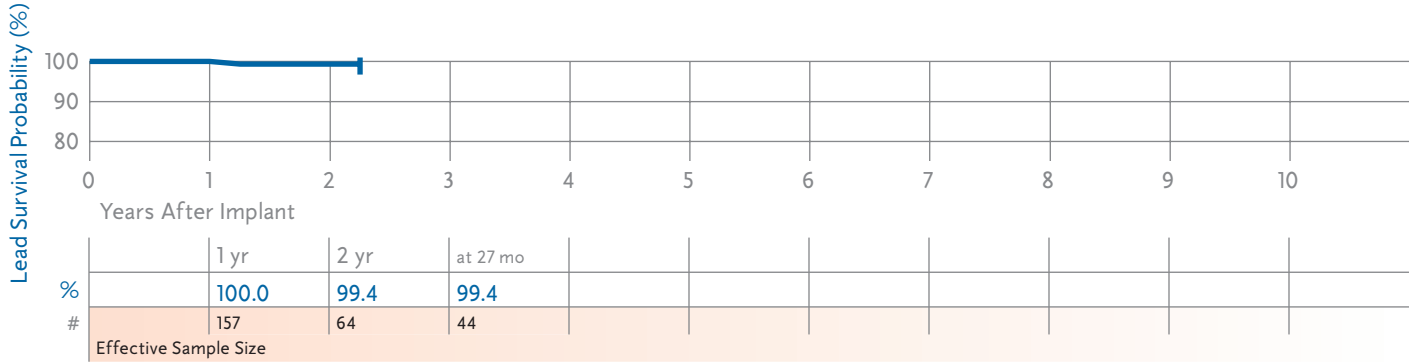
US Market Release	Feb-04	Serial Number Prefix	BBL	<b>Laboratory Analysis</b>	
Estimated US Implants	96,600	Type and/or Fixation	Transvenous, V or A, Screw-in		
Estimated US Active	85,700	Polarity	Bipolar		
Advisories	None	Steroid	Yes		
				Implant Damage	47
				Electrical Malfunction	3
				Other	5

### Atrial Placement

#### Prospective Clinical Study Results

#### Qualifying Complications 1 Total

Number of Leads Enrolled in Study	289	Failure to Capture	1
Cumulative Months of Follow-Up	4,536		

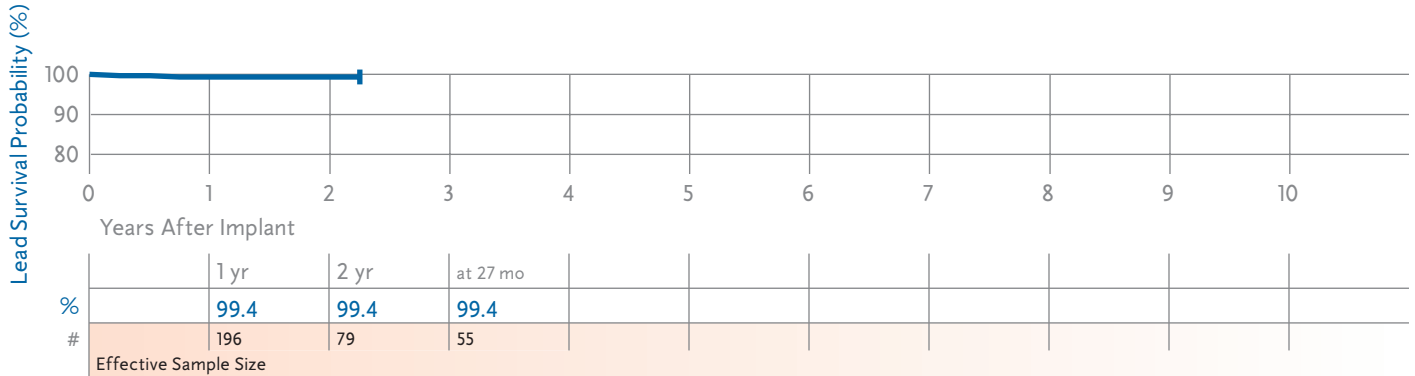


### Ventricular Placement

#### Prospective Clinical Study Results

#### Qualifying Complications 2 Total

Number of Leads Enrolled in Study	408	Failure to Capture	2
Cumulative Months of Follow-Up	6,068		



## 4081 Target Tip

### Product Characteristics

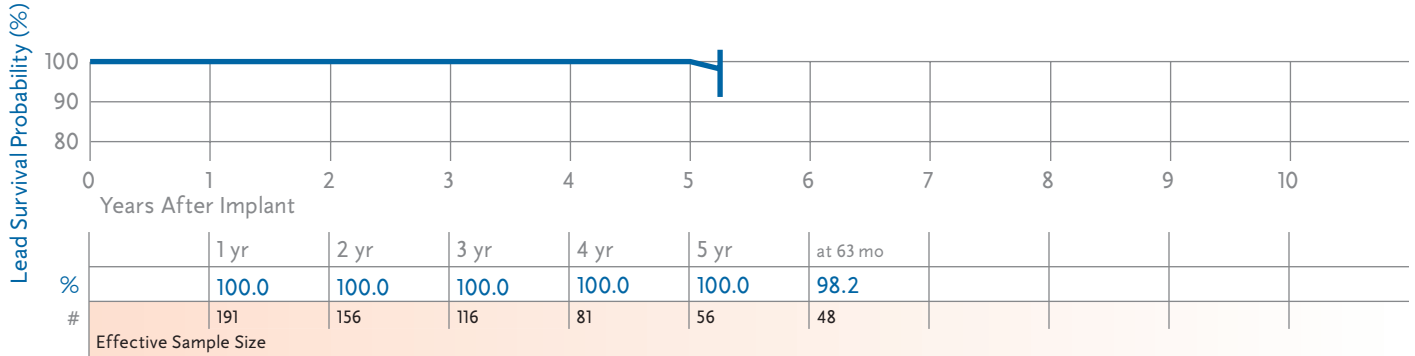
US Market Release	Jul-89	Serial Number Prefix	LAC	<b>Laboratory Analysis</b>	
Estimated US Implants	4,100	Type and/or Fixation	Transvenous, Vent., Tines		
Estimated US Active	900	Polarity	Unipolar		
Advisories	None	Steroid	No		
				Implant Damage	4
				Electrical Malfunction	5
				Other	0

### Ventricular Placement

#### Prospective Clinical Study Results

#### Qualifying Complications 3 Total

Number of Leads Enrolled in Study	260	Conductor Fracture	1
Cumulative Months of Follow-Up	9,749	Failure to Sense	2



Leads

## 4092 CapSure SP Novus

### Product Characteristics

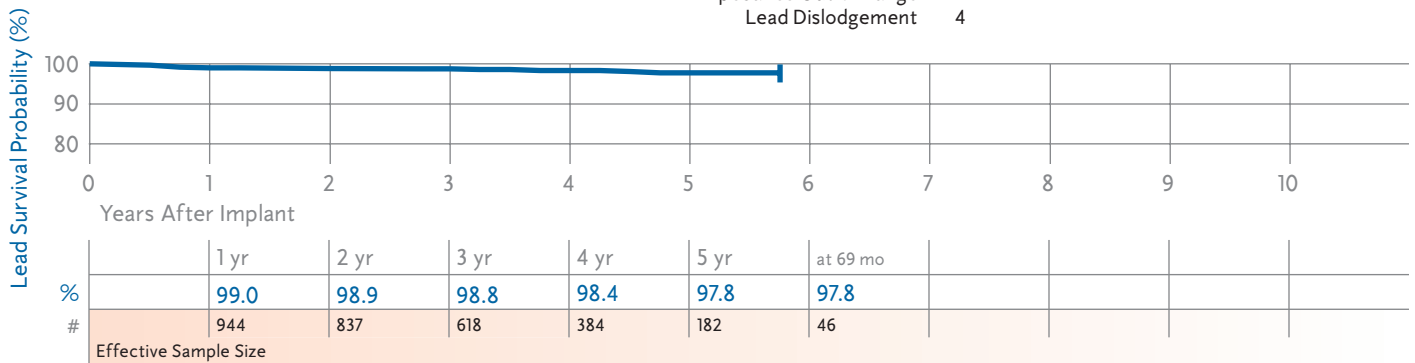
US Market Release	Sep-98	Serial Number Prefix	LEP	<b>Laboratory Analysis</b>	
Estimated US Implants	134,800	Type and/or Fixation	Transvenous, Vent., Tines		
Estimated US Active	89,800	Polarity	Bipolar		
Advisories	None	Steroid	Yes		
				Implant Damage	31
				Electrical Malfunction	11
				Other	5

### Ventricular Placement

#### Prospective Clinical Study Results

#### Qualifying Complications 16 Total

Number of Leads Enrolled in Study	1,142	Conductor Fracture	2
Cumulative Months of Follow-Up	43,905	Extra Cardiac Stimulation	1
		Failure to Capture	8
		Impedance Out of Range	1
		Lead Dislodgement	4



# Pacing Leads continued

## 4503, 4503M CapSure

### Product Characteristics

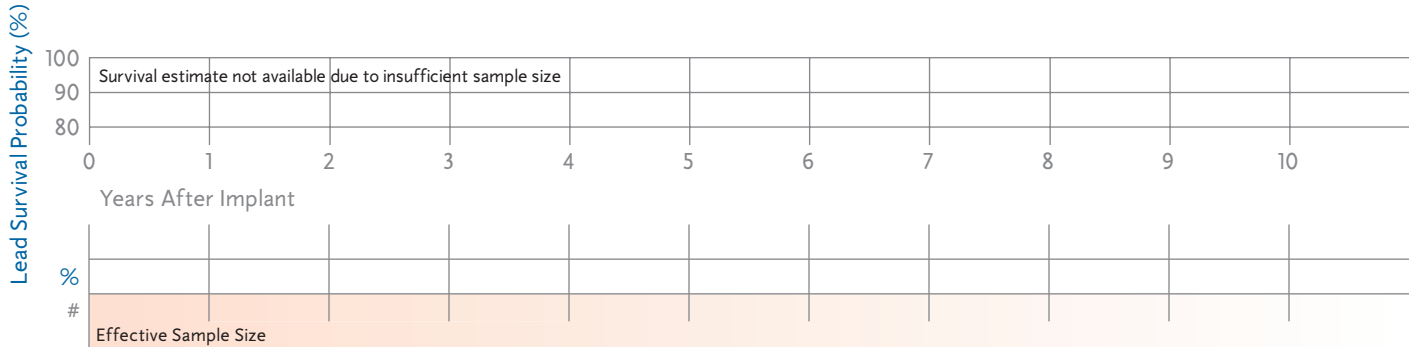
US Market Release	Jul-86	Serial Number Prefix	MQ, LAY	<b>Laboratory Analysis</b>	
Estimated US Implants	9,000	Type and/or Fixation	Transvenous, Atrial-J, Tines		
Estimated US Active	1,500	Polarity	Unipolar		
Advisories	None	Steroid	Yes		
				Implant Damage	2
				Electrical Malfunction	11
				Other	0

### Atrial Placement

#### Prospective Clinical Study Results

#### Qualifying Complications 1

Number of Leads Enrolled in Study	59	Failure to Sense	1
Cumulative Months of Follow-Up	3,317		



## 4504, 4504M CapSure

### Product Characteristics

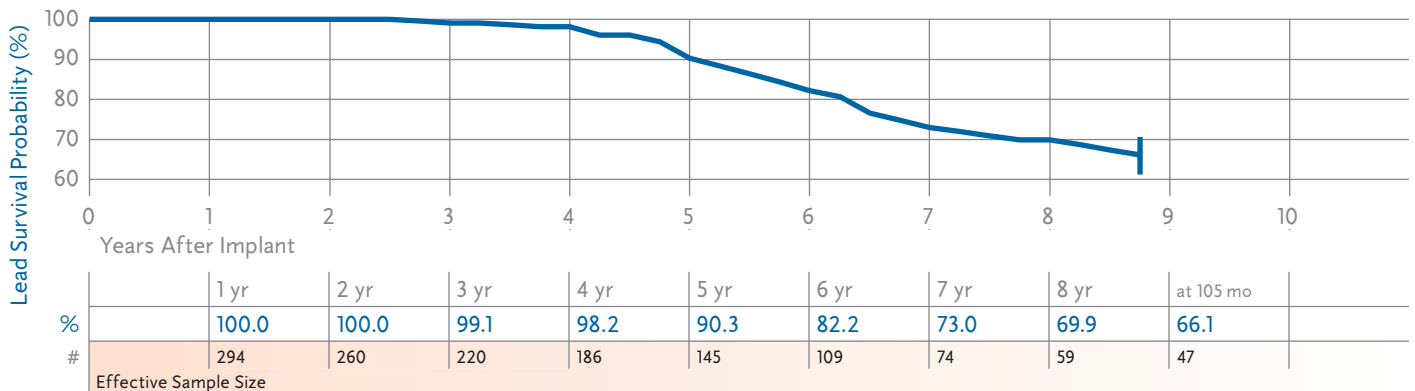
US Market Release	Mar-90	Serial Number Prefix	QM or LBA	<b>Laboratory Analysis</b>	
Estimated US Implants	16,600	Type and/or Fixation	Transvenous, Atrial-J, Tines		
Estimated US Active	1,700	Polarity	Bipolar		
Advisories	1	Steroid	Yes		
see page 159 – 1996 Lead Survival Below Expectations				Implant Damage	5
				Electrical Malfunction	171
				Other	4

### Atrial Placement

#### Prospective Clinical Study Results

#### Qualifying Complications 48 Total

Number of Leads Enrolled in Study	368	Electrical Abandonment	3	Impedance Out of Range	9
Cumulative Months of Follow-Up	19,863	Extra Cardiac Stimulation	1	Insulation (MIO)	1
		Failure to Capture	14	Lead Dislodgement	1
		Failure to Sense	16	Oversensing	3



## 4512 Target Tip

### Product Characteristics

US Market Release	Jul-83
Estimated US Implants	11,600
Estimated US Active	1,100
Advisories	None

Serial Number Prefix	PF
Type and/or Fixation	Transvenous, Atrial-J, Tines
Polarity	Bipolar
Steroid	No

### Laboratory Analysis

Implant Damage	4
Electrical Malfunction	83
Other	8

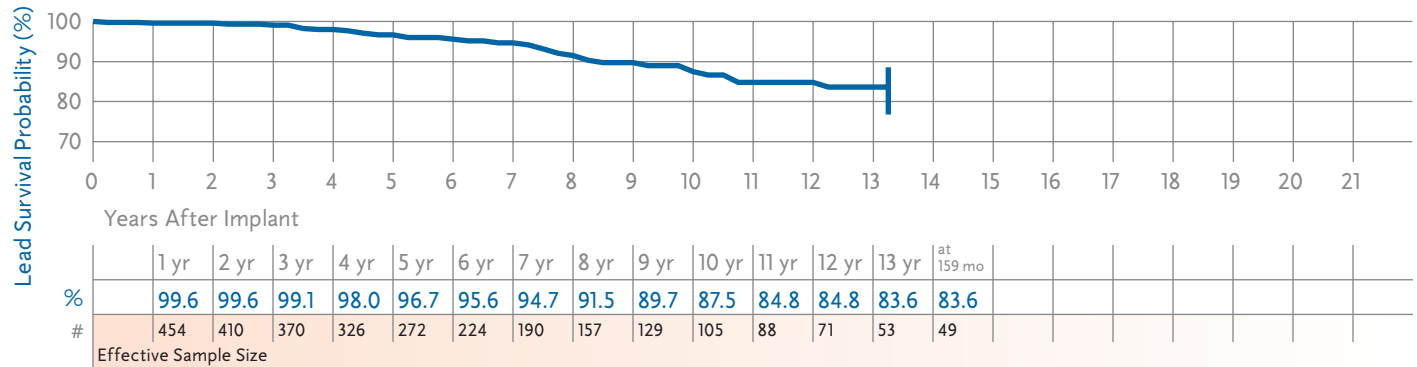
### Atrial Placement

#### Prospective Clinical Study Results

Number of Leads Enrolled in Study	600
Cumulative Months of Follow-Up	39,702

#### Qualifying Complications 35 Total

Electrical Abandonment	1	Insulation (MIO)	4
Failure to Capture	6	Insulation (not further defined)	2
Failure to Sense	14	Lead Dislodgement	1
Impedance Out of Range	3	Oversensing	2
Insulation (ESC)	2		



Leads

## 4523 CapSure SP

### Product Characteristics

US Market Release	Aug-91
Estimated US Implants	12,000
Estimated US Active	3,700
Advisories	None

Serial Number Prefix	ZE
Type and/or Fixation	Transvenous, Atrial-J, Tines
Polarity	Unipolar
Steroid	Yes

### Laboratory Analysis

Implant Damage	5
Electrical Malfunction	2
Other	1

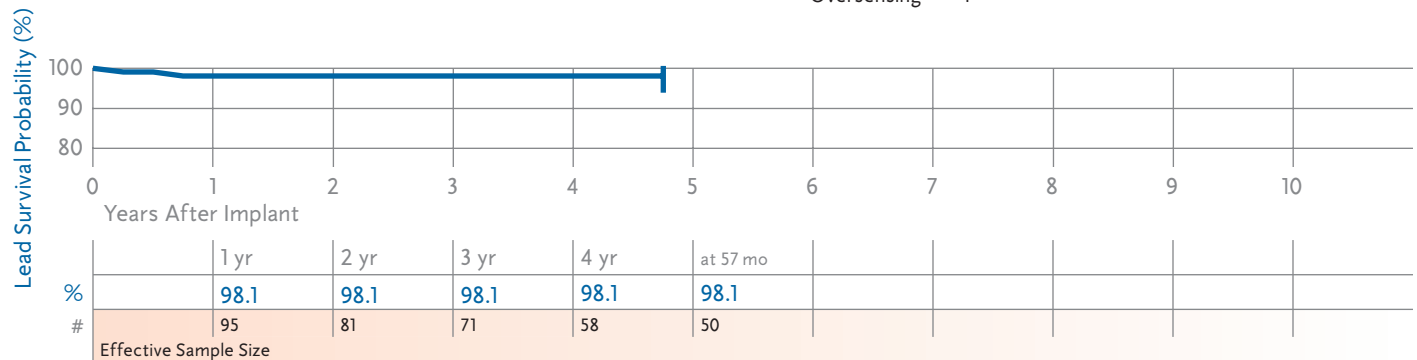
### Atrial Placement

#### Prospective Clinical Study Results

Number of Leads Enrolled in Study	121
Cumulative Months of Follow-Up	6,864

#### Qualifying Complications 4 Total

Impedance Out of Range	1
Lead Dislodgement	2
Oversensing	1





# Pacing Leads continued

## 4524 CapSure SP

### Product Characteristics

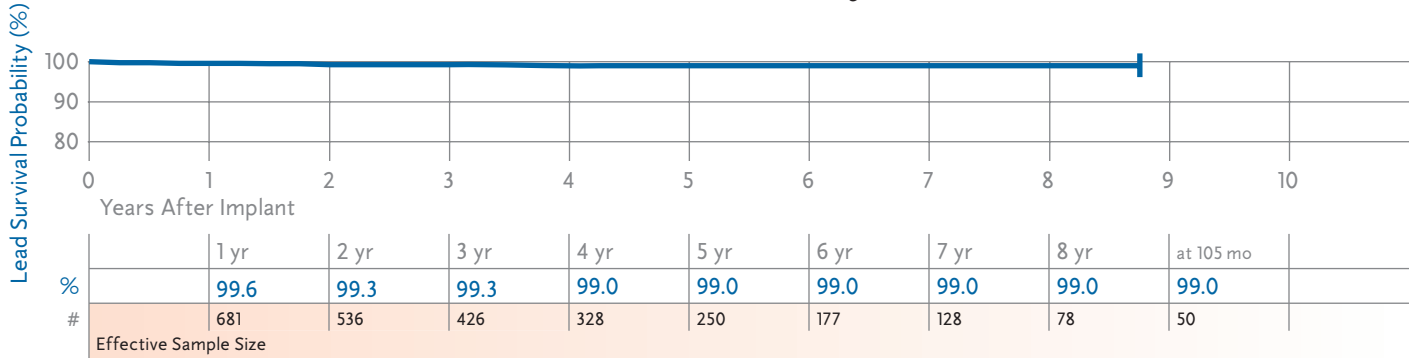
US Market Release	Oct-91	Serial Number Prefix	LAR	<b>Laboratory Analysis</b>	
Estimated US Implants	106,900	Type and/or Fixation	Transvenous, Atrial-J, Tines		
Estimated US Active	40,100	Polarity	Bipolar		
Advisories	None	Steroid	Yes		
				Implant Damage	47
				Electrical Malfunction	21
				Other	8

### Atrial Placement

#### Prospective Clinical Study Results

#### Qualifying Complications 6 Total

Number of Leads Enrolled in Study	910	Failure to Capture	3
Cumulative Months of Follow-Up	38,221	Failure to Sense	2
		Lead Dislodgement	1



## 4533 CapSure Z

### Product Characteristics

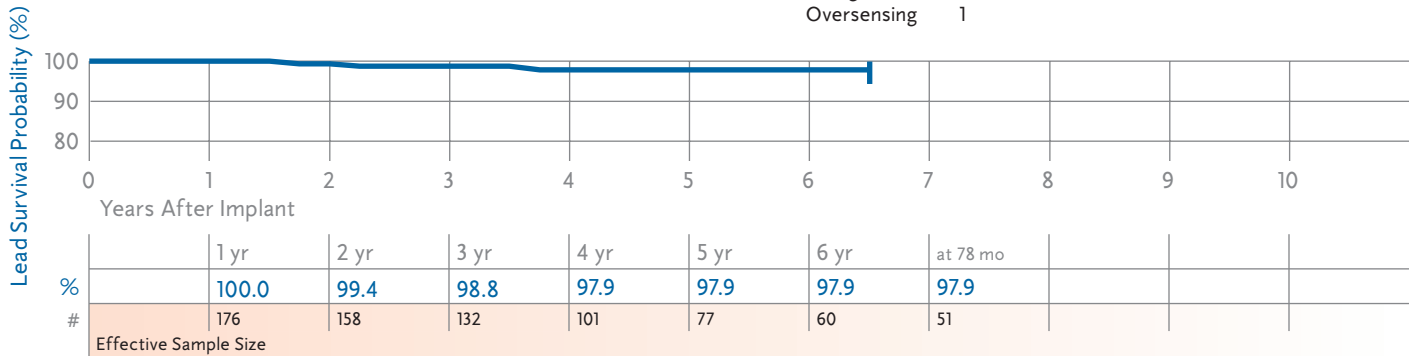
US Market Release	n/a	Serial Number Prefix	LCB	<b>Laboratory Analysis</b>	
Estimated US Implants	n/a	Type and/or Fixation	Transvenous, Atrial-J, Tines		
Estimated US Active	n/a	Polarity	Unipolar		
Advisories	None	Steroid	Yes		
				Implant Damage	0
				Electrical Malfunction	0
				Other	0

### Atrial Placement

#### Prospective Clinical Study Results

#### Qualifying Complications 4 Total

Number of Leads Enrolled in Study	206	Failure to Capture	1
Cumulative Months of Follow-Up	10,925	Failure to Sense	1
		Lead Dislodgement	1
		Oversensing	1



## 4557, 4557M Screw-In

### Product Characteristics

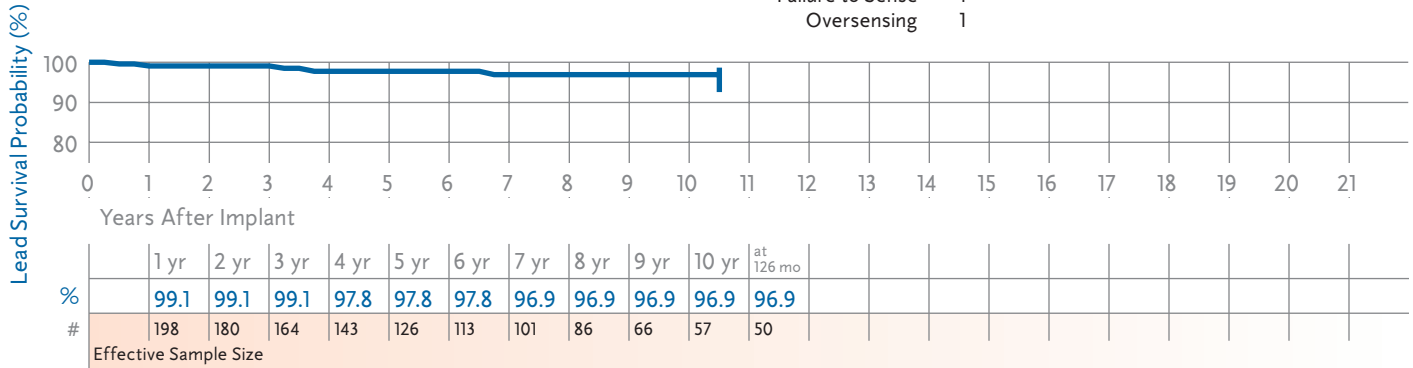
US Market Release	Aug-88	Serial Number Prefix	VQ or LAM	<b>Laboratory Analysis</b>	
Estimated US Implants	22,500	Type and/or Fixation	Transvenous, Atrial, Screw-in		
Estimated US Active	5,500	Polarity	Unipolar		
Advisories	None	Steroid	No		
				Implant Damage	53
				Electrical Malfunction	14
				Other	4

### Atrial Placement

#### Prospective Clinical Study Results

#### Qualifying Complications 6 Total

Number of Leads Enrolled in Study	294	Extra Cardiac Stimulation	1
Cumulative Months of Follow-Up	18,335	Failure to Capture	3
		Failure to Sense	1
		Oversensing	1



Leads

## 4558M Screw-In

### Product Characteristics

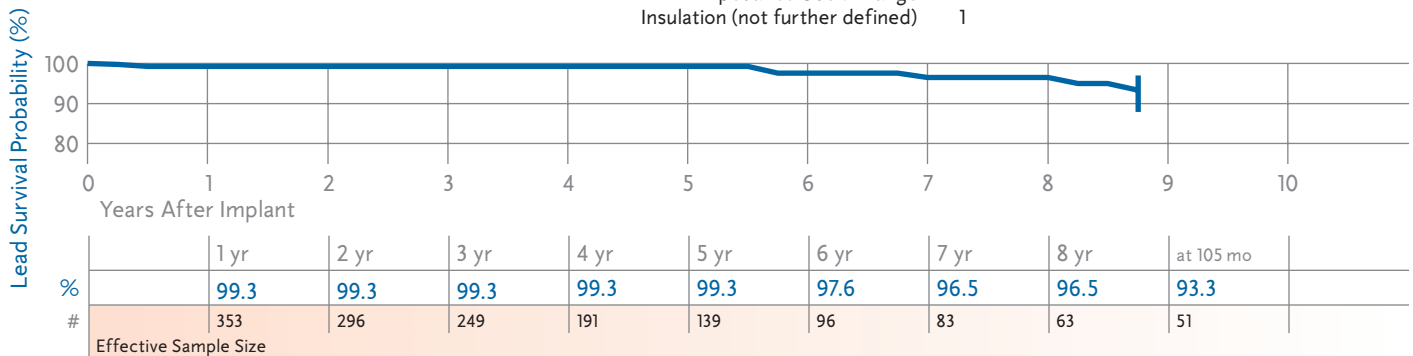
US Market Release	Nov-94	Serial Number Prefix	LDC	<b>Laboratory Analysis</b>	
Estimated US Implants	21,000	Type and/or Fixation	Transvenous, Atrial-J, Screw-in		
Estimated US Active	6,500	Polarity	Bipolar		
Advisories	None	Steroid	No		
				Implant Damage	111
				Electrical Malfunction	11
				Other	1

### Atrial Placement

#### Prospective Clinical Study Results

#### Qualifying Complications 11 Total

Number of Leads Enrolled in Study	539	Electrical Abandonment	1	Oversensing	2
Cumulative Months of Follow-Up	21,822	Failure to Capture	3		
		Failure to Sense	2		
		Impedance Out of Range	2		
		Insulation (not further defined)	1		



# Pacing Leads continued

## 4568 CapSureFix

### Product Characteristics

US Market Release	Jan-97	Serial Number Prefix	LDD
Estimated US Implants	72,800	Type and/or Fixation	Transvenous, Atrial-J, Screw-in
Estimated US Active	40,200	Polarity	Bipolar
Advisories	None	Steroid	Yes

### Laboratory Analysis

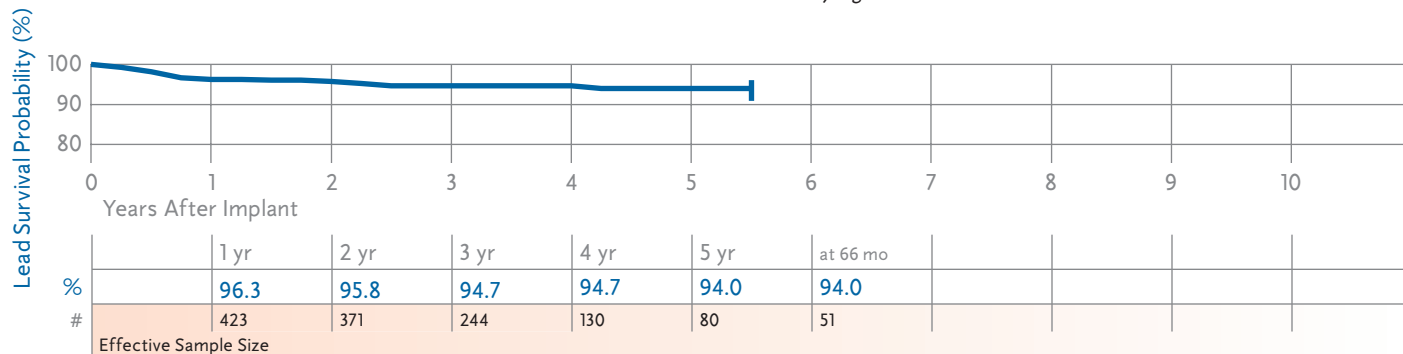
Implant Damage	197
Electrical Malfunction	5
Other	4

### Atrial Placement

#### Prospective Clinical Study Results

#### Qualifying Complications 28 Total

Number of Leads Enrolled in Study	573	Failure to Capture	19
Cumulative Months of Follow-Up	19,435	Lead Dislodgement	8
		Medical Judgement	1



## 4574 CapSure Sense

### Product Characteristics

US Market Release	Jun-02	Serial Number Prefix	BBE
Estimated US Implants	27,900	Type and/or Fixation	Transvenous, Atrial-J, Tines
Estimated US Active	22,600	Polarity	Bipolar
Advisories	None	Steroid	Yes

### Laboratory Analysis

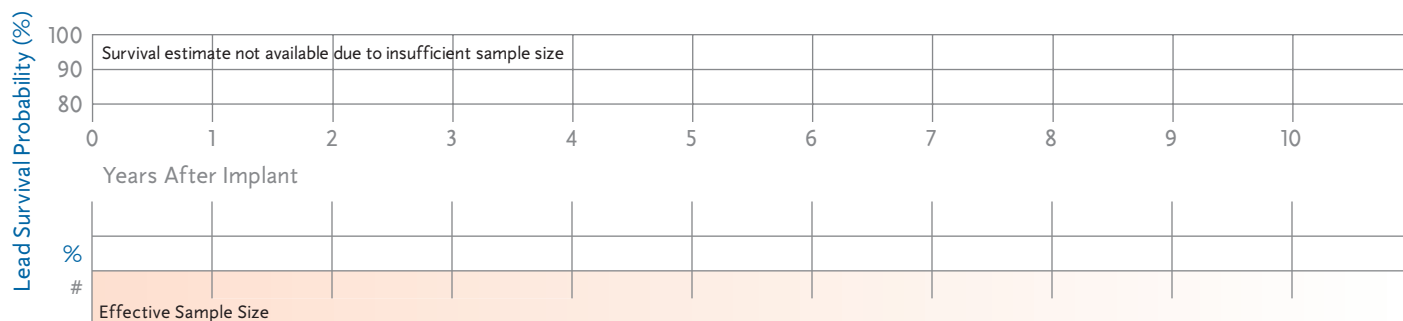
Implant Damage	5
Electrical Malfunction	1
Other	0

### Atrial Placement

#### Prospective Clinical Study Results

#### Qualifying Complications 0 Total

Number of Leads Enrolled in Study	4
Cumulative Months of Follow-Up	107



## 4592 CapSure SP Novus

### Product Characteristics

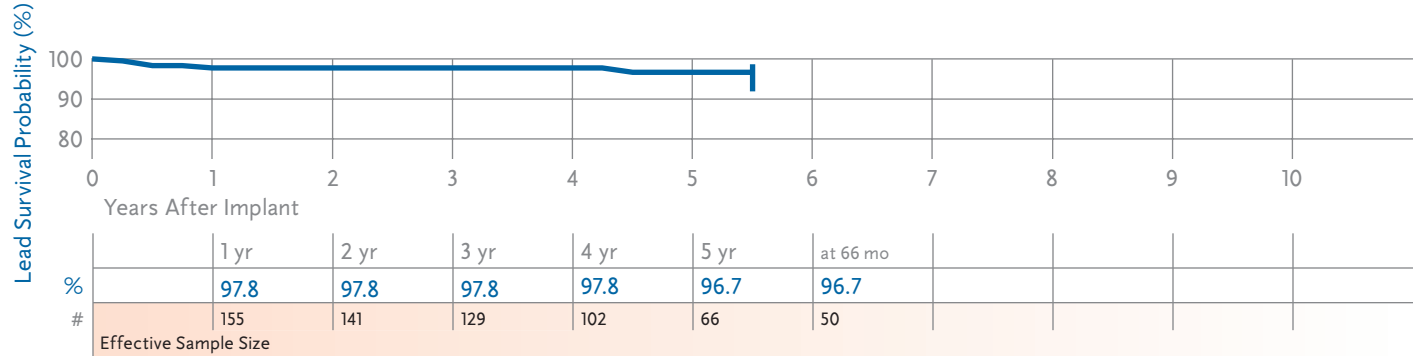
US Market Release	Oct-98	Serial Number Prefix	LER	<b>Laboratory Analysis</b>	
Estimated US Implants	68,700	Type and/or Fixation	Transvenous, Atrial-J, Tines		
Estimated US Active	44,600	Polarity	Bipolar		
Advisories	None	Steroid	Yes		
				Implant Damage	12
				Electrical Malfunction	3
				Other	0

### Atrial Placement

#### Prospective Clinical Study Results

#### Qualifying Complications 5 Total

Number of Leads Enrolled in Study	241	Failure to Capture	2
Cumulative Months of Follow-Up	8,910	Failure to Sense	1
		Lead Dislodgement	2



Leads

## 5023, 5023M CapSure SP

### Product Characteristics

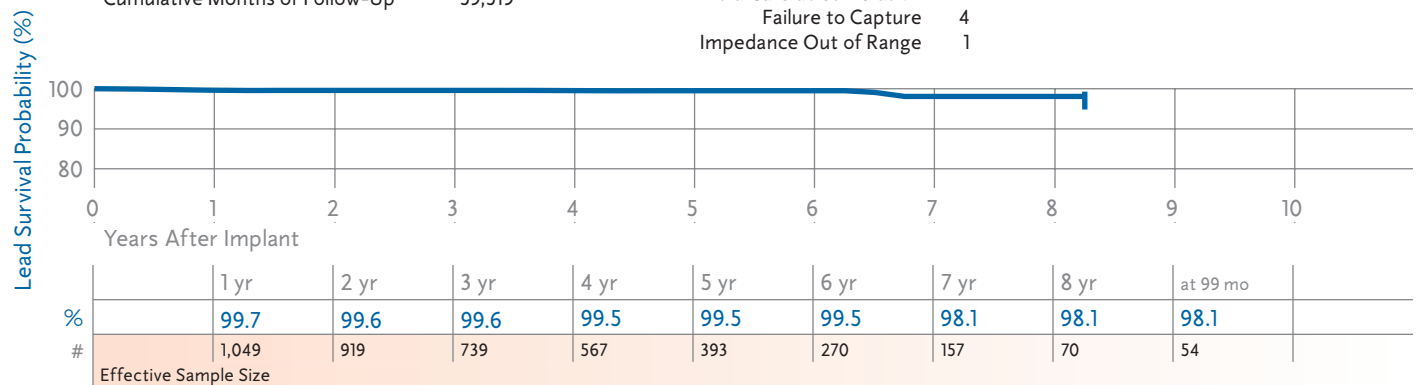
US Market Release	Nov-88	Serial Number Prefix	SX or LAS	<b>Laboratory Analysis</b>	
Estimated US Implants	10,600	Type and/or Fixation	Transvenous, Vent., Tines		
Estimated US Active	3,100	Polarity	Unipolar		
Advisories	None	Steroid	Yes		
				Implant Damage	15
				Electrical Malfunction	7
				Other	0

### Ventricular Placement

#### Prospective Clinical Study Results

#### Qualifying Complications 8 Total

Number of Leads Enrolled in Study	1,350	Conductor Fracture	1
Cumulative Months of Follow-Up	59,519	Extra Cardiac Stimulation	2
		Failure to Capture	4
		Impedance Out of Range	1



# Pacing Leads continued

## 5024, 5024M CapSure SP

### Product Characteristics

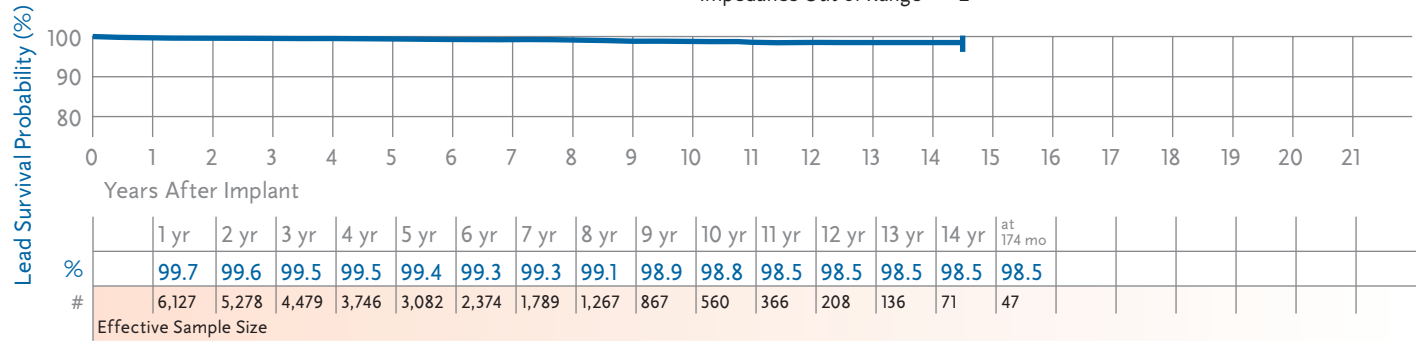
US Market Release	Mar-90	Serial Number Prefix	SY or LAT	<b>Laboratory Analysis</b>	
Estimated US Implants	211,400	Type and/or Fixation	Transvenous, Vent., Tines		
Estimated US Active	76,500	Polarity	Bipolar		
Advisories	None	Steroid	Yes		
				Implant Damage	723
				Electrical Malfunction	106
				Other	29

### Ventricular Placement

#### Prospective Clinical Study Results

#### Qualifying Complications 45 Total

Number of Leads Enrolled in Study	8,142	Conductor Fracture	3	Insulation (ESC)	1
Cumulative Months of Follow-Up	417,491	Extra Cardiac Stimulation	2	Insulation (not further defined)	5
		Failure to Capture	24	Lead Dislodgement	5
		Failure to Sense	2	Oversensing	1
		Impedance Out of Range	2		



## 5026 CapSure

### Product Characteristics

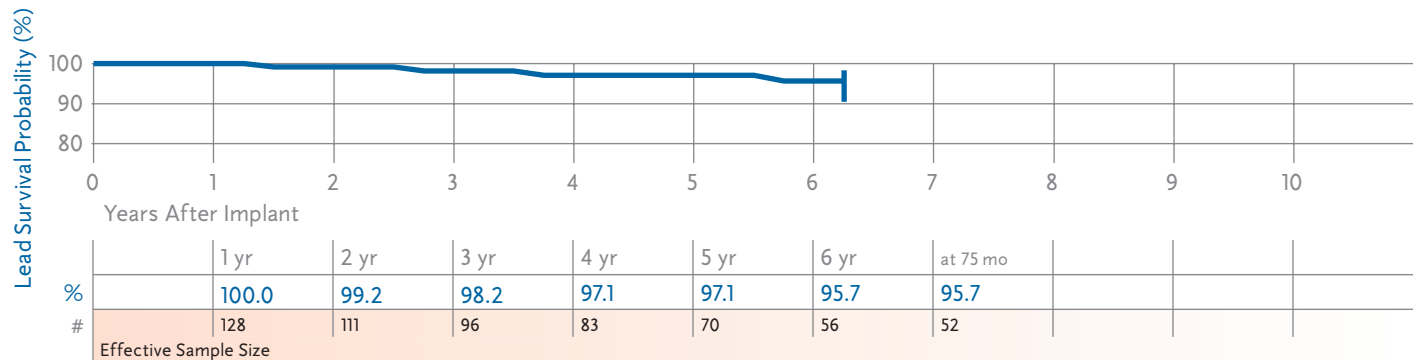
US Market Release	Feb-88	Serial Number Prefix	RZ	<b>Laboratory Analysis</b>	
Estimated US Implants	7,800	Type and/or Fixation	Transvenous, Vent., Tines		
Estimated US Active	1,400	Polarity	Bipolar		
Advisories	None	Steroid	Yes		
				Implant Damage	60
				Electrical Malfunction	7
				Other	1

### Ventricular Placement

#### Prospective Clinical Study Results

#### Qualifying Complications 4 Total

Number of Leads Enrolled in Study	168	Electrical Abandonment	1
Cumulative Months of Follow-Up	9,486	Failure to Capture	3



## 5033 CapSure Z

### Product Characteristics

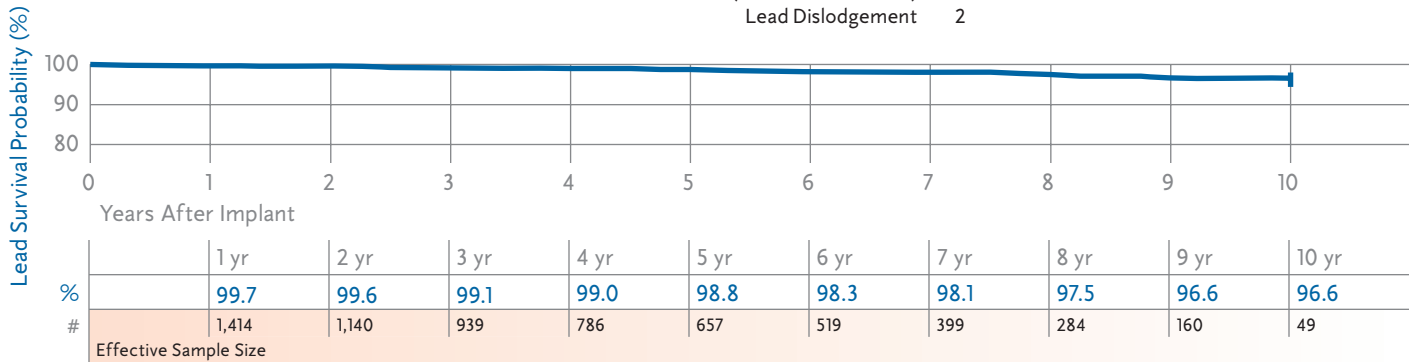
US Market Release	Feb-96	Serial Number Prefix	LDK	<b>Laboratory Analysis</b>	
Estimated US Implants	2,500	Type and/or Fixation	Transvenous, Vent., Tines		
Estimated US Active	1,100	Polarity	Unipolar		
Advisories	None	Steroid	Yes		
				Implant Damage	6
				Electrical Malfunction	1
				Other	3

### Ventricular Placement

#### Prospective Clinical Study Results

#### Qualifying Complications 22 Total

Number of Leads Enrolled in Study	1,901	Cardiac Perforation	1
Cumulative Months of Follow-Up	88,805	Conductor Fracture	4
		Failure to Capture	9
		Impedance Out of Range	5
		Insulation (not further defined)	1
		Lead Dislodgement	2



Leads

## 5034 CapSure Z

### Product Characteristics

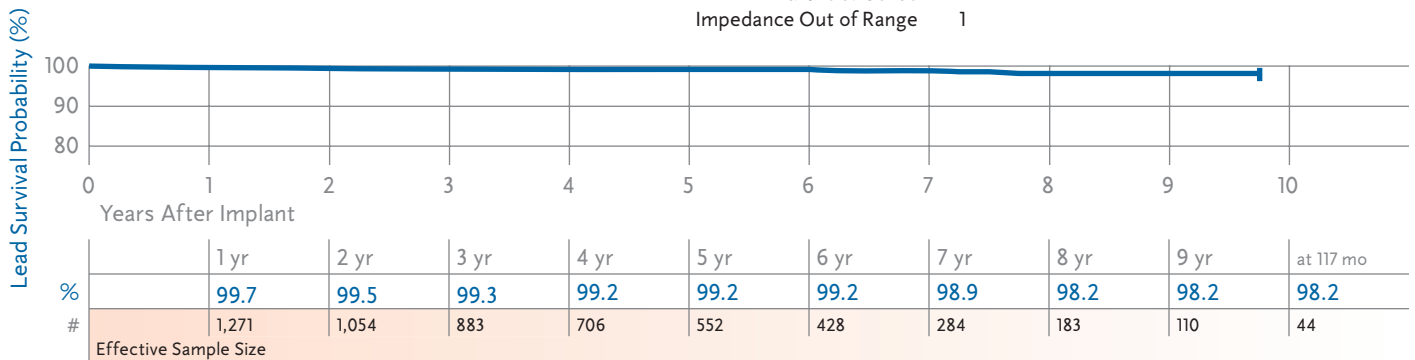
US Market Release	Feb-96	Serial Number Prefix	LDF	<b>Laboratory Analysis</b>	
Estimated US Implants	58,700	Type and/or Fixation	Transvenous, Vent., Tines		
Estimated US Active	24,200	Polarity	Bipolar		
Advisories	None	Steroid	Yes		
				Implant Damage	85
				Electrical Malfunction	29
				Other	11

### Ventricular Placement

#### Prospective Clinical Study Results

#### Qualifying Complications 13 Total

Number of Leads Enrolled in Study	1,596	Conductor Fracture	1	Lead Dislodgement	1
Cumulative Months of Follow-Up	77,119	Failure to Capture	9		
		Failure to Sense	1		
		Impedance Out of Range	1		



# Pacing Leads continued

## 5054 CapSure Z Novus

### Product Characteristics

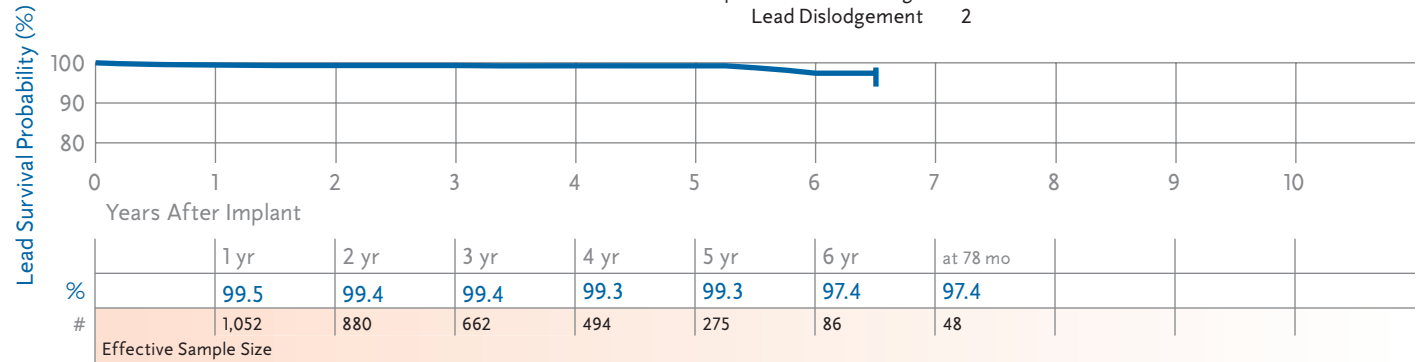
US Market Release	Jun-98	Serial Number Prefix	LEH	<b>Laboratory Analysis</b>	
Estimated US Implants	80,400	Type and/or Fixation	Transvenous, Vent., Tines		
Estimated US Active	50,300	Polarity	Bipolar		
Advisories	None	Steroid	Yes		
				Implant Damage	40
				Electrical Malfunction	13
				Other	6

### Ventricular Placement

#### Prospective Clinical Study Results

#### Qualifying Complications 11 Total

Number of Leads Enrolled in Study	1,392	Failure to Capture	7
Cumulative Months of Follow-Up	50,804	Failure to Sense	1
		Impedance Out of Range	1
		Lead Dislodgement	2



## 5068 CapSureFix

### Product Characteristics

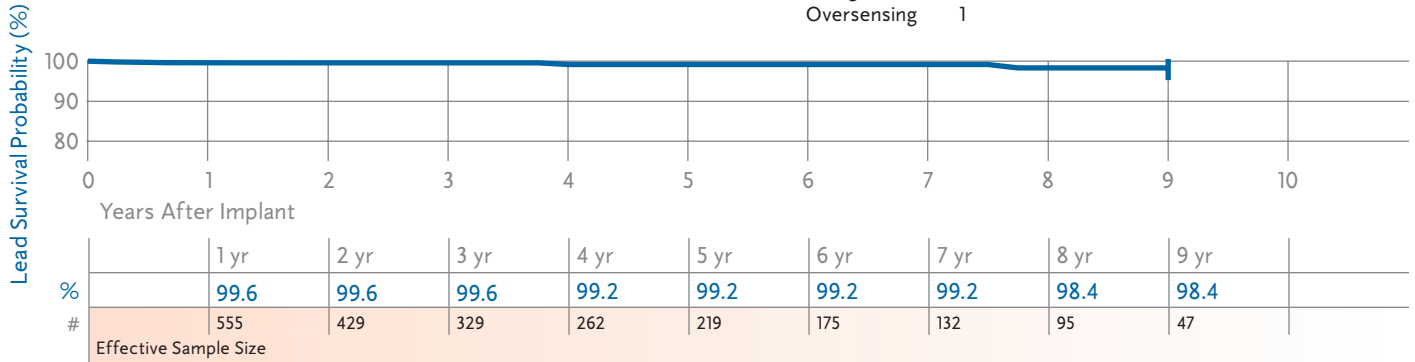
US Market Release	Jan-97	Serial Number Prefix	LDJ	<b>Laboratory Analysis</b>	
Estimated US Implants	108,000	Type and/or Fixation	Transvenous, V or A, Screw-in		
Estimated US Active	54,900	Polarity	Bipolar		
Advisories	None	Steroid	Yes		
				Implant Damage	455
				Electrical Malfunction	59
				Other	15

### Atrial Placement

#### Prospective Clinical Study Results

#### Qualifying Complications 5 Total

Number of Leads Enrolled in Study	965	Failure to Capture	2
Cumulative Months of Follow-Up	32,110	Impedance Out of Range	1
		Lead Dislodgement	1
		Oversensing	1

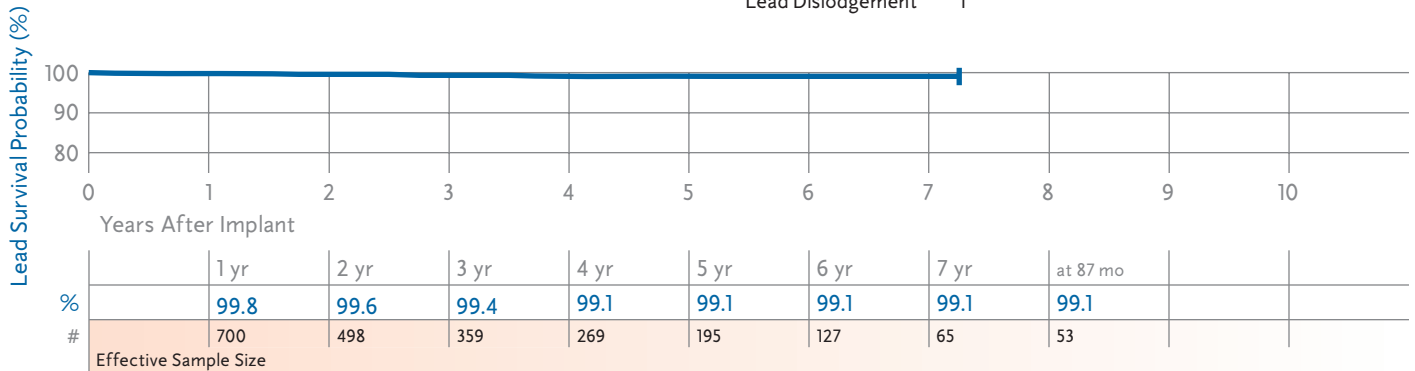


### Ventricular Placement

#### Prospective Clinical Study Results

#### Qualifying Complications 5 Total

Number of Leads Enrolled in Study	1,360	Conductor Fracture	1
Cumulative Months of Follow-Up	34,265	Failure to Capture	3
		Lead Dislodgement	1





# Pacing Leads continued

## 5072 SureFix

### Product Characteristics

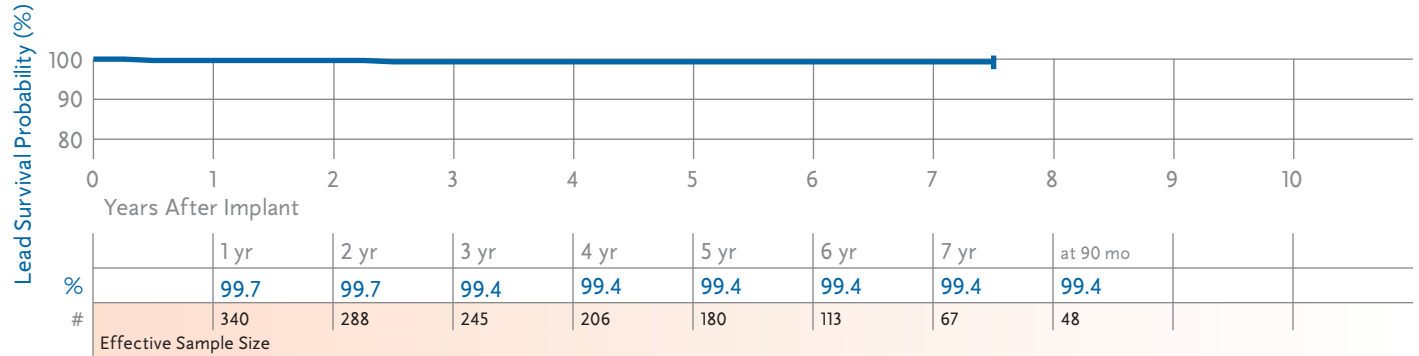
US Market Release	Jun-98	Serial Number Prefix	LEM	<b>Laboratory Analysis</b>	
Estimated US Implants	8,800	Type and/or Fixation	Transvenous, V or A, Screw-in		
Estimated US Active	5,200	Polarity	Bipolar		
Advisories	None	Steroid	Yes		
				Implant Damage	25
				Electrical Malfunction	3
				Other	1

## Atrial Placement

### Prospective Clinical Study Results

### Qualifying Complications 2 Total

Number of Leads Enrolled in Study	450	Cardiac Perforation	1
Cumulative Months of Follow-Up	20,567	Failure to Capture	1



## 5076 CapSureFix Novus

### Product Characteristics

US Market Release	Aug-00	Serial Number Prefix	PJN	<b>Laboratory Analysis</b>	
Estimated US Implants	766,500	Type and/or Fixation	Transvenous, V or A, Screw-in		
Estimated US Active	584,100	Polarity	Bipolar		
Advisories	None	Steroid	Yes		
				Implant Damage	659
				Electrical Malfunction	135
				Other	48

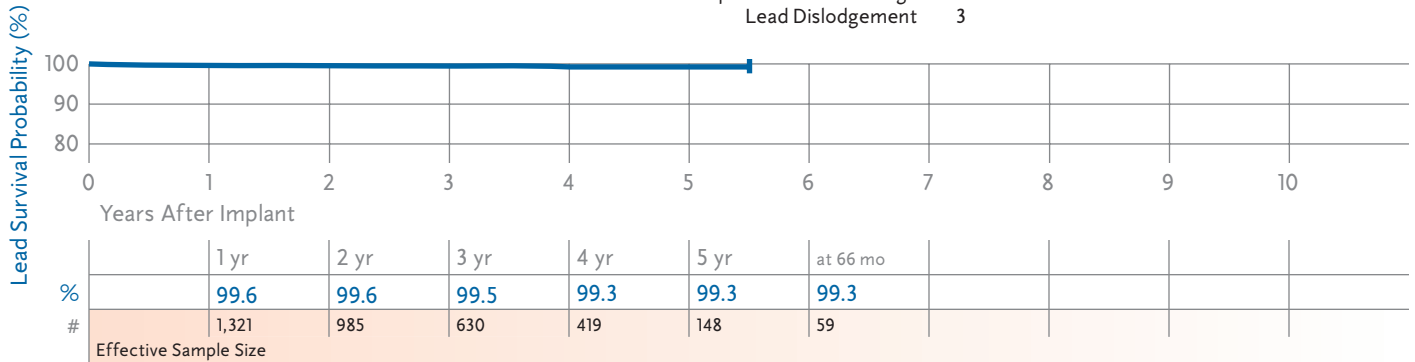
### Atrial Placement

#### Prospective Clinical Study Results

#### Qualifying Complications 10 Total

Number of Leads Enrolled in Study	1,993
Cumulative Months of Follow-Up	55,024

Cardiac Perforation	1
Conductor Fracture	1
Extra Cardiac Stimulation	2
Failure to Capture	2
Impedance Out of Range	1
Lead Dislodgement	3



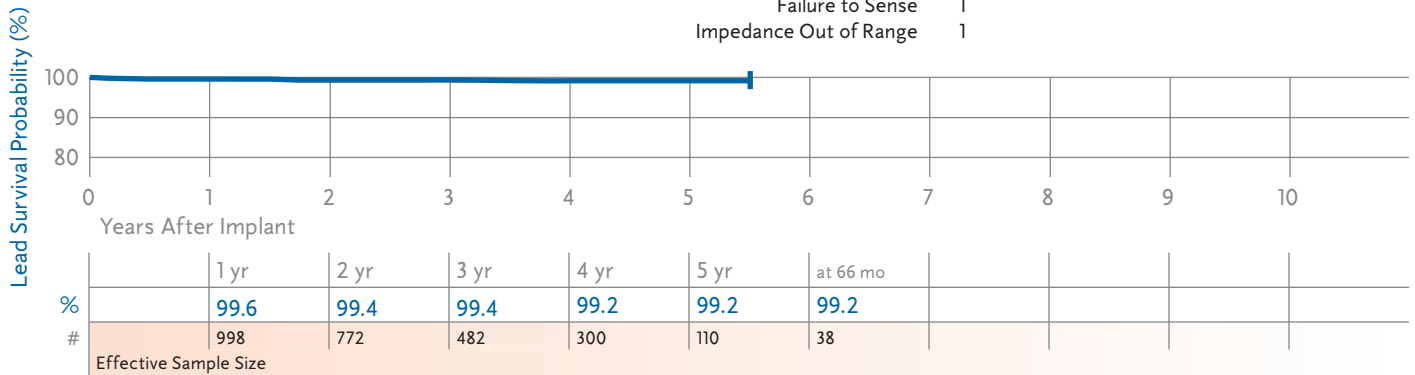
### Ventricular Placement

#### Prospective Clinical Study Results

#### Qualifying Complications 8 Total

Number of Leads Enrolled in Study	1,496
Cumulative Months of Follow-Up	41,506

Cardiac Perforation	1	Lead Dislodgement	2
Failure to Capture	3		
Failure to Sense	1		
Impedance Out of Range	1		



# Pacing Leads continued

## 5092 CapSure SP Novus

### Product Characteristics

US Market Release	Jun-98	Serial Number Prefix	LET
Estimated US Implants	101,800	Type and/or Fixation	Transvenous, Vent., Tines
Estimated US Active	67,700	Polarity	Bipolar
Advisories	None	Steroid	Yes

### Laboratory Analysis

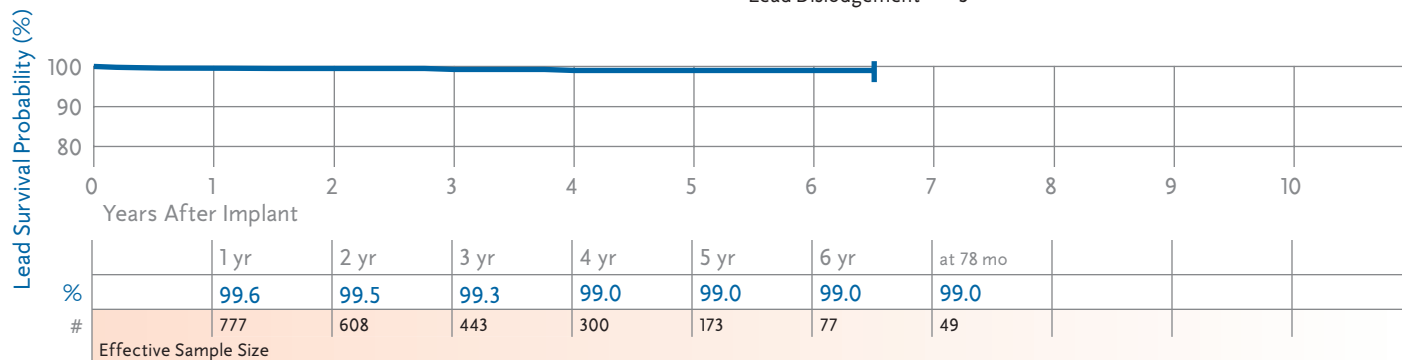
Implant Damage	44
Electrical Malfunction	18
Other	11

## Ventricular Placement

### Prospective Clinical Study Results

### Qualifying Complications 8 Total

Number of Leads Enrolled in Study	1,171	Extra Cardiac Stimulation	1
Cumulative Months of Follow-Up	35,893	Failure to Capture	2
		Lead Dislodgement	5



## 5524, 5524M CapSure SP

### Product Characteristics

US Market Release	Mar-90	Serial Number Prefix	XV or LAV
Estimated US Implants	63,800	Type and/or Fixation	Transvenous, Atrial-J, Tines
Estimated US Active	24,600	Polarity	Bipolar
Advisories	None	Steroid	Yes

### Laboratory Analysis

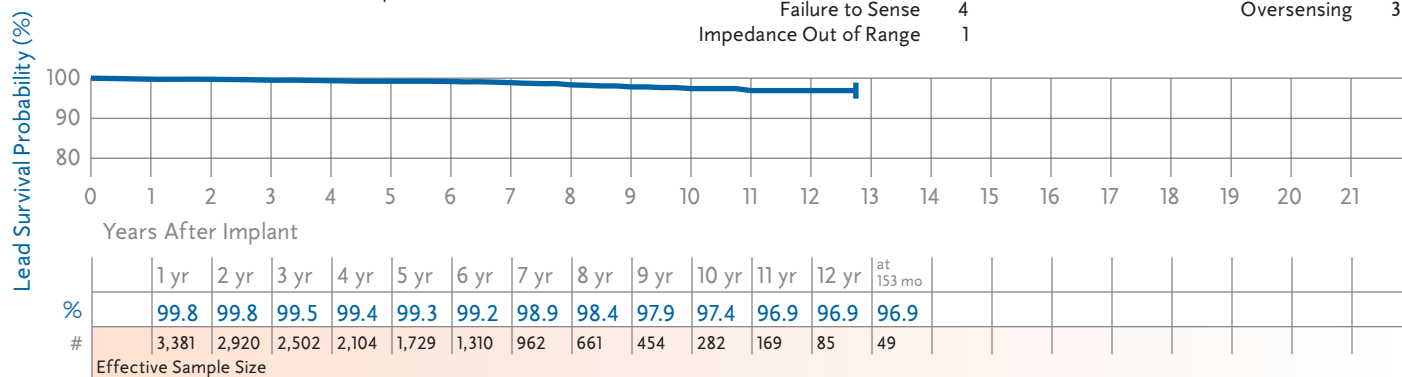
Implant Damage	66
Electrical Malfunction	21
Other	7

## Atrial Placement

### Prospective Clinical Study Results

### Qualifying Complications 36 Total

Number of Leads Enrolled in Study	4,430	Conductor Fracture	1	Insulation (not further defined)	2
Cumulative Months of Follow-Up	228,508	Failure to Capture	21	Lead Dislodgement	4
		Failure to Sense	4	Oversensing	3
		Impedance Out of Range	1		



## 5534 CapSure Z

### Product Characteristics

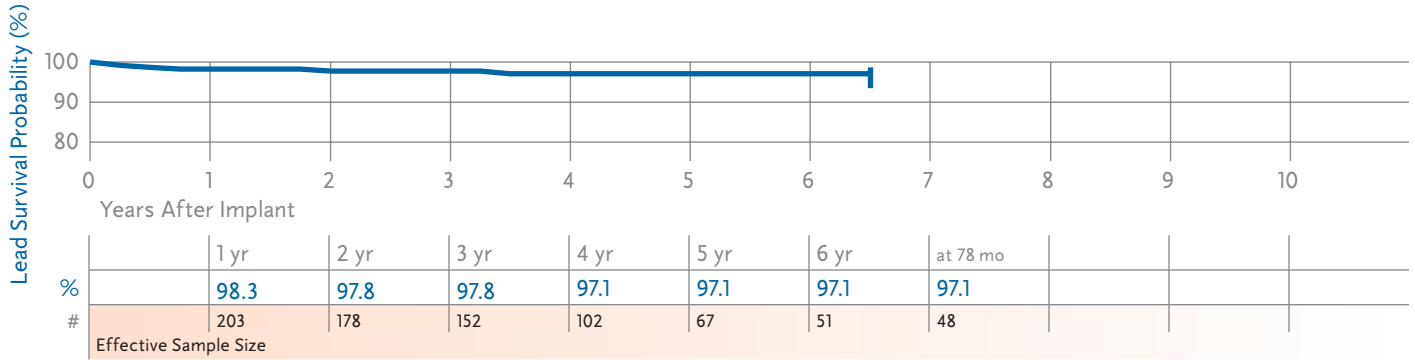
US Market Release	Feb-96	Serial Number Prefix	LDG	<b>Laboratory Analysis</b>	
Estimated US Implants	27,700	Type and/or Fixation	Transvenous, Atrial-J, Tines		
Estimated US Active	9,800	Polarity	Bipolar		
Advisories	None	Steroid	Yes		
				Implant Damage	29
				Electrical Malfunction	6
				Other	5

### Atrial Placement

#### Prospective Clinical Study Results

#### Qualifying Complications 6 Total

Number of Leads Enrolled in Study	260	Failure to Capture	5
Cumulative Months of Follow-Up	12,176	Impedance Out of Range	1



Leads

## 5554 CapSure Z Novus

### Product Characteristics

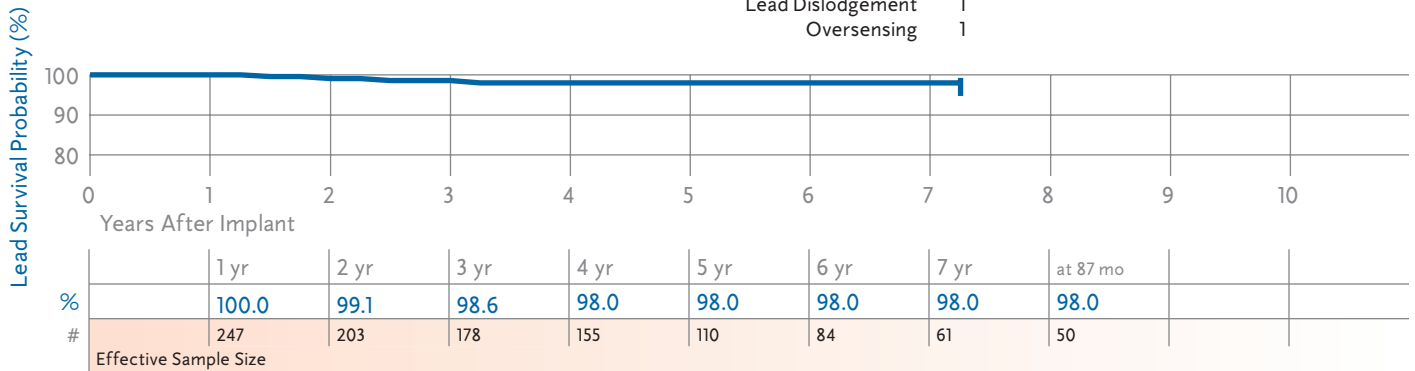
US Market Release	Jun-98	Serial Number Prefix	LEJ	<b>Laboratory Analysis</b>	
Estimated US Implants	51,600	Type and/or Fixation	Transvenous, Atrial-J, Tines		
Estimated US Active	32,500	Polarity	Bipolar		
Advisories	None	Steroid	Yes		
				Implant Damage	7
				Electrical Malfunction	6
				Other	4

### Atrial Placement

#### Prospective Clinical Study Results

#### Qualifying Complications 4 Total

Number of Leads Enrolled in Study	338	Failure to Capture	1
Cumulative Months of Follow-Up	14,843	Impedance Out of Range	1
		Lead Dislodgement	1
		Oversensing	1



# Pacing Leads continued

## 5568 CapSureFix

### Product Characteristics

US Market Release	Jan-97	Serial Number Prefix	LDN
Estimated US Implants	57,700	Type and/or Fixation	Transvenous, A or V, Screw-in
Estimated US Active	40,200	Polarity	Bipolar
Advisories	None	Steroid	Yes

### Laboratory Analysis

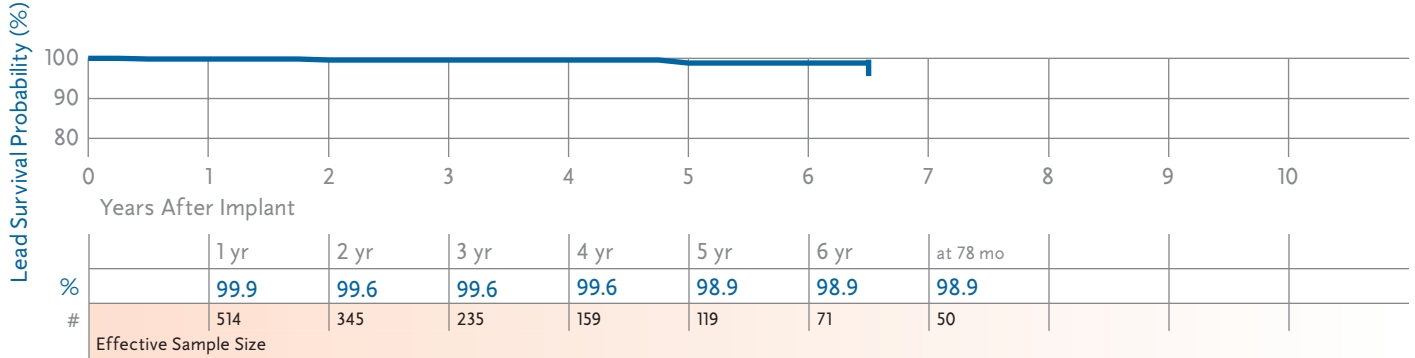
Implant Damage	223
Electrical Malfunction	7
Other	9

### Atrial Placement

#### Prospective Clinical Study Results

#### Qualifying Complications 4 Total

Number of Leads Enrolled in Study	864	Failure to Capture	2
Cumulative Months of Follow-Up	23,463	Failure to Sense	1
		Lead Dislodgement	1



## 5592 CapSure SP Novus

### Product Characteristics

US Market Release	Jun-98	Serial Number Prefix	LEU
Estimated US Implants	24,200	Type and/or Fixation	Transvenous, Atrial-J, Tines
Estimated US Active	17,400	Polarity	Bipolar
Advisories	None	Steroid	Yes

### Laboratory Analysis

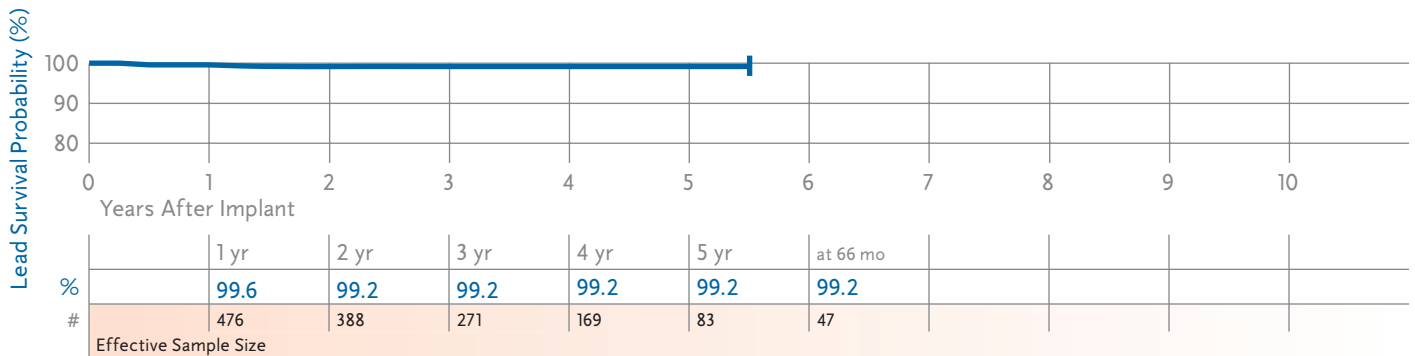
Implant Damage	5
Electrical Malfunction	2
Other	0

### Atrial Placement

#### Prospective Clinical Study Results

#### Qualifying Complications 4 Total

Number of Leads Enrolled in Study	665	Failure to Capture	2
Cumulative Months of Follow-Up	21,261	Lead Dislodgement	2



## 5594 CapSure SP Novus

### Product Characteristics

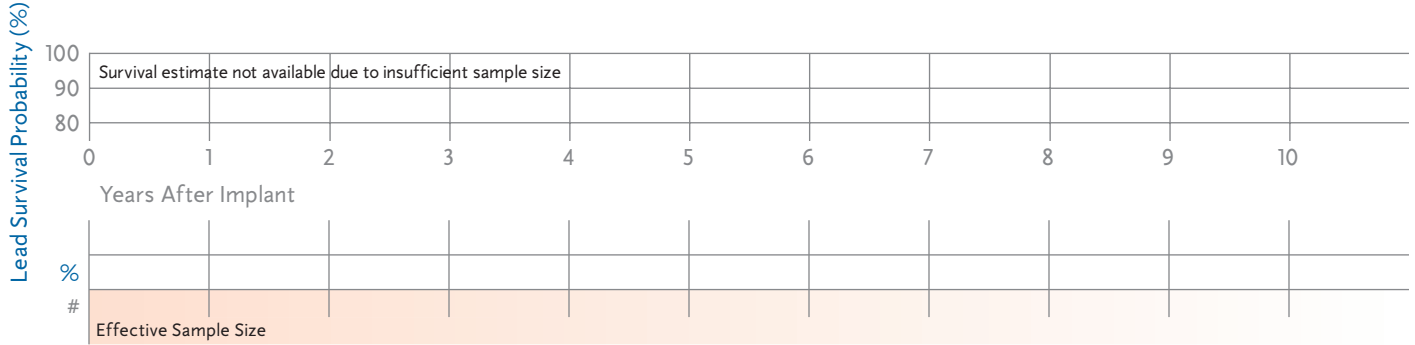
US Market Release	Jun-01	Serial Number Prefix	LFD	<b>Laboratory Analysis</b>	
Estimated US Implants	8,500	Type and/or Fixation	Transvenous, Atrial-J, Tines		
Estimated US Active	6,700	Polarity	Bipolar		
Advisories	None	Steroid	Yes		
				Implant Damage	0
				Electrical Malfunction	1
				Other	0

### Atrial Placement

#### Prospective Clinical Study Results

Qualifying Complications 0 Total

Number of Leads Enrolled in Study	10
Cumulative Months of Follow-Up	415



## 6907R

### Product Characteristics

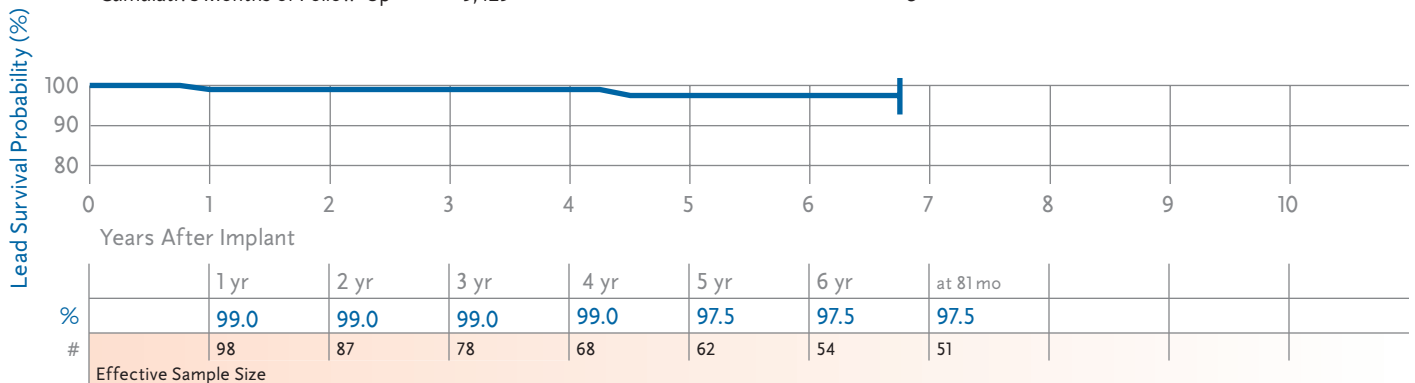
US Market Release	May-79	Serial Number Prefix	FY	<b>Laboratory Analysis</b>	
Estimated US Implants	18,500	Type and/or Fixation	Transvenous, Vent., Flange		
Estimated US Active	900	Polarity	Unipolar		
Advisories	None	Steroid	No		
				Implant Damage	3
				Electrical Malfunction	25
				Other	1

### Ventricular Placement

#### Prospective Clinical Study Results

Qualifying Complications 6 Total

Number of Leads Enrolled in Study	121	Failure to Capture	4
Cumulative Months of Follow-Up	9,429	Oversensing	2



# Pacing Leads continued

## 6940 CapSureFix

### Product Characteristics

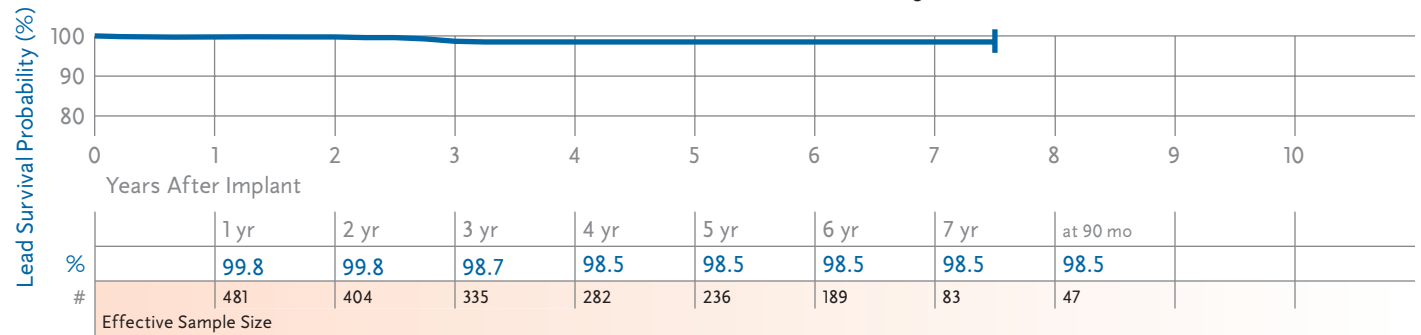
US Market Release	Oct-98	Serial Number Prefix	TCP	<b>Laboratory Analysis</b>	
Estimated US Implants	26,600	Type and/or Fixation	Transvenous, A or V, Screw-in		
Estimated US Active	13,600	Polarity	Bipolar		
Advisories	None	Steroid	Yes		
				Implant Damage	114
				Electrical Malfunction	19
				Other	3

## Atrial Placement

### Prospective Clinical Study Results

### Qualifying Complications 6 Total

Number of Leads Enrolled in Study	614	Conductor Fracture	1
Cumulative Months of Follow-Up	28,515	Failure to Sense	2
		Lead Dislodgement	1
		Oversensing	2



# Pacing Leads continued

## 6957 Spectraflex

### Product Characteristics

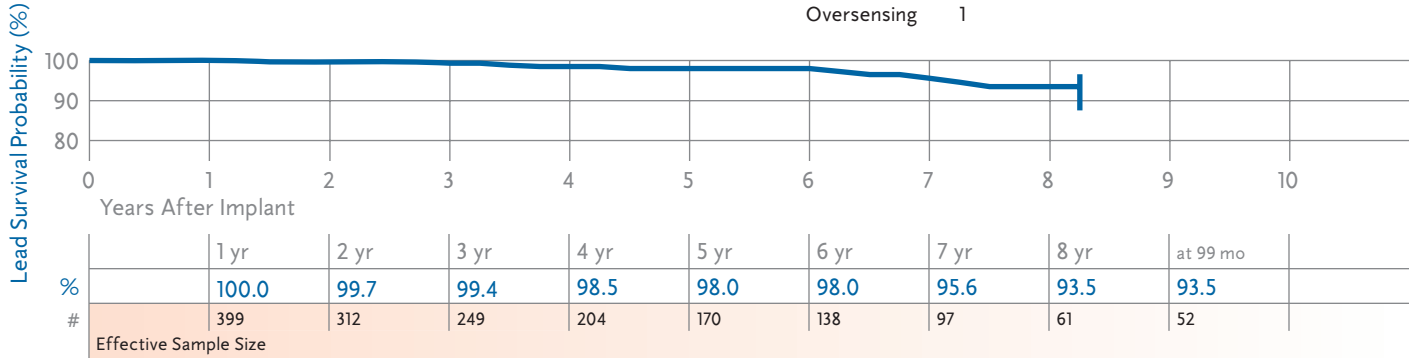
US Market Release	Jul-79	Serial Number Prefix	VC	<b>Laboratory Analysis</b>	
Estimated US Implants	29,100	Type and/or Fixation	Transvenous, V or A, Screw-in		
Estimated US Active	3,000	Polarity	Unipolar		
Advisories	None	Steroid	No		
				Implant Damage	85
				Electrical Malfunction	39
				Other	25

### Atrial Placement

#### Prospective Clinical Study Results

#### Qualifying Complications 10 Total

Number of Leads Enrolled in Study	673	Extra Cardiac Stimulation	1
Cumulative Months of Follow-Up	24,255	Failure to Capture	3
		Failure to Sense	5
		Oversensing	1

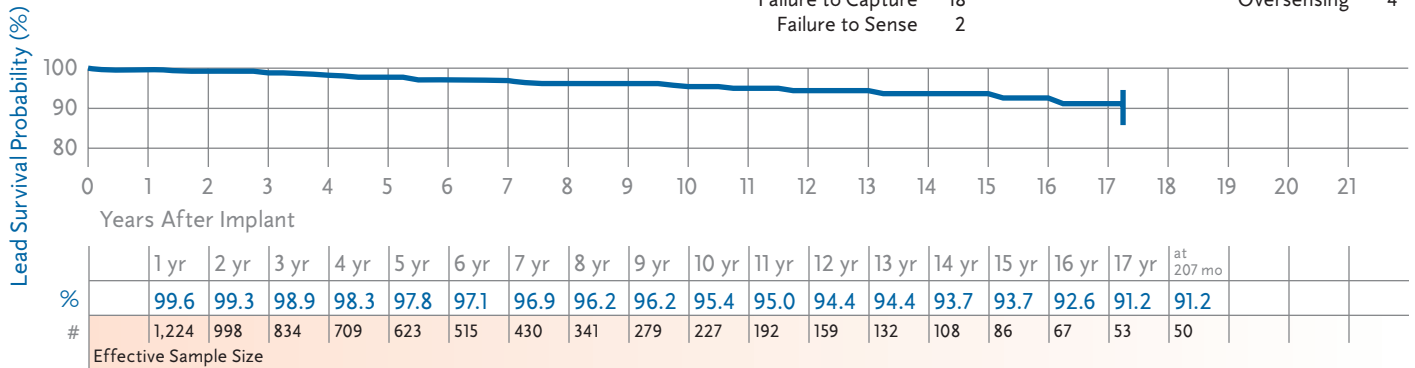


### Ventricular Placement

#### Prospective Clinical Study Results

#### Qualifying Complications 41 Total

Number of Leads Enrolled in Study	1,853	Conductor Fracture	13	Impedance Out of Range	1
Cumulative Months of Follow-Up	95,910	Extra Cardiac Stimulation	2	Insulation (not further defined)	1
		Failure to Capture	18	Oversensing	4
		Failure to Sense	2		



Leads



## 6957J Spectraflex

### Product Characteristics

US Market Release	Sep-80	Serial Number Prefix	GG
Estimated US Implants	30,000	Type and/or Fixation	Transvenous, Atrial-J, Screw-in
Estimated US Active	2,500	Polarity	Unipolar
Advisories	None	Steroid	No

### Laboratory Analysis

Implant Damage	74
Electrical Malfunction	28
Other	30

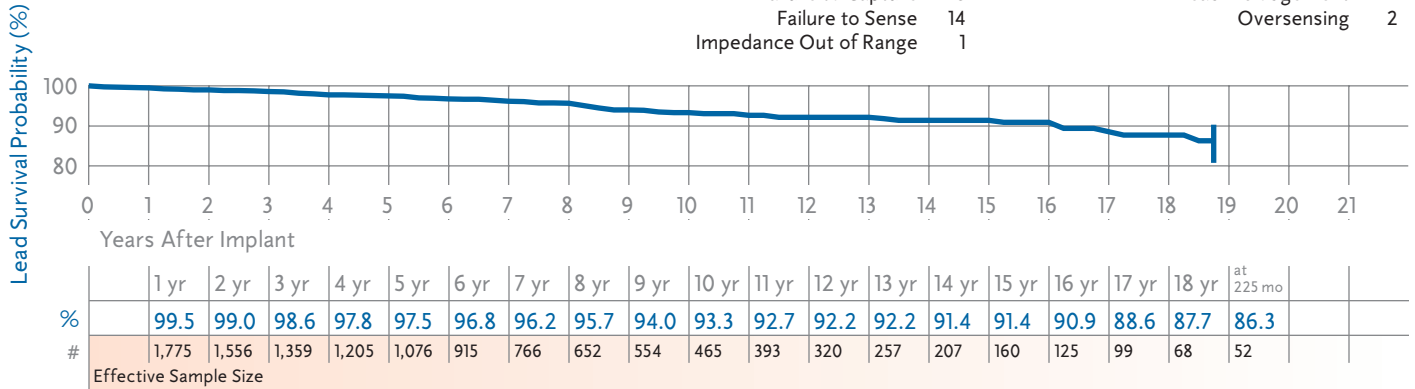
### Atrial Placement

#### Prospective Clinical Study Results

#### Qualifying Complications 86 Total

Number of Leads Enrolled in Study	2,348
Cumulative Months of Follow-Up	159,990

Conductor Fracture	12	Insulation (ESC)	1
Extra Cardiac Stimulation	3	Insulation (not further defined)	3
Failure to Capture	48	Lead Dislodgement	2
Failure to Sense	14	Oversensing	2
Impedance Out of Range	1		



## 6961 Tenax

### Product Characteristics

US Market Release	Jan-78	Serial Number Prefix	TB
Estimated US Implants	44,700	Type and/or Fixation	Transvenous, Vent., Tines
Estimated US Active	1,500	Polarity	Unipolar
Advisories	None	Steroid	No

### Laboratory Analysis

Implant Damage	103
Electrical Malfunction	27
Other	0

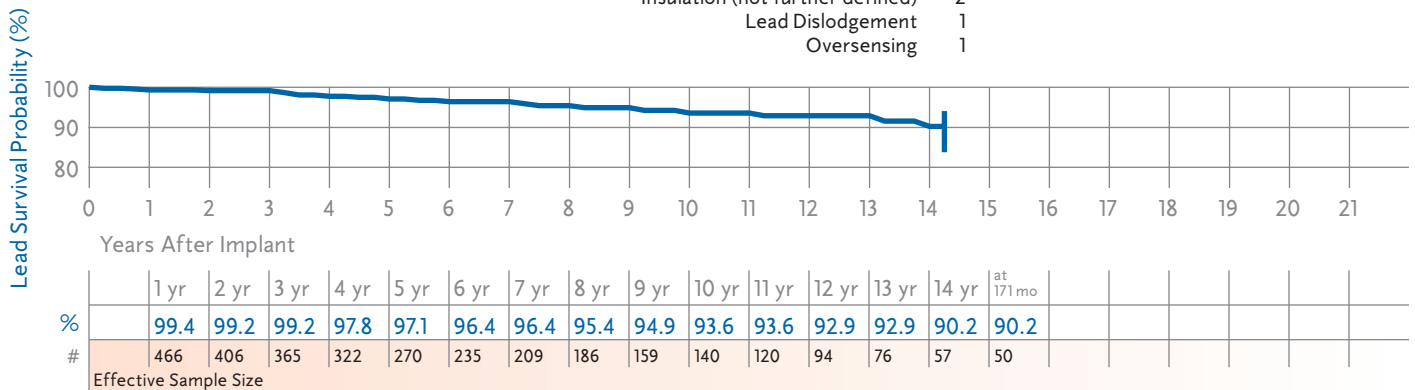
### Ventricular Placement

#### Prospective Clinical Study Results

#### Qualifying Complications 22 Total

Number of Leads Enrolled in Study	627
Cumulative Months of Follow-Up	42,879

Extra Cardiac Stimulation	4
Failure to Capture	8
Failure to Sense	6
Insulation (not further defined)	2
Lead Dislodgement	1
Oversensing	1



# Pacing Leads continued

## 6962 Tenax

### Product Characteristics

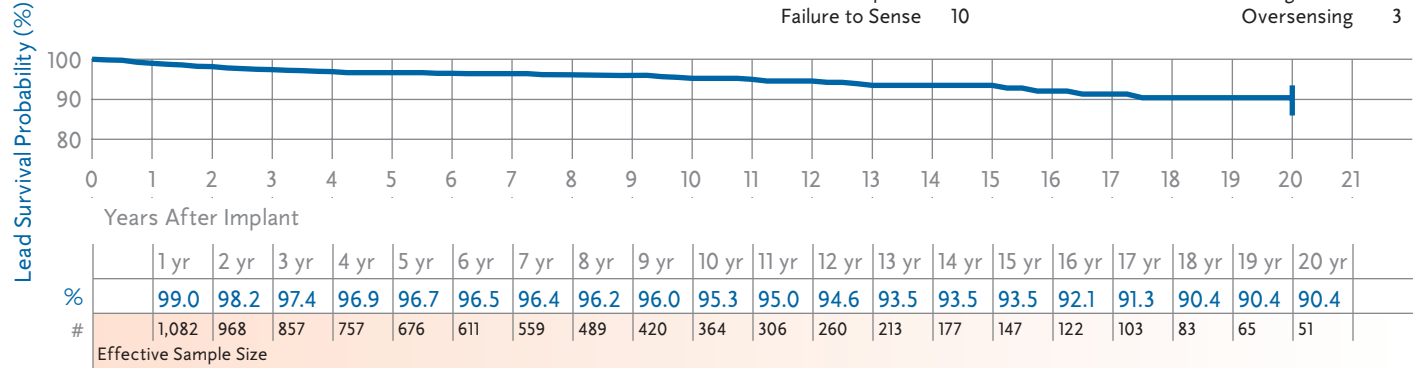
US Market Release	Jan-78	Serial Number Prefix	UB	<b>Laboratory Analysis</b>	
Estimated US Implants	70,600	Type and/or Fixation	Transvenous, Vent., Tines		
Estimated US Active	2,800	Polarity	Bipolar		
Advisories	None	Steroid	No		
				Implant Damage	170
				Electrical Malfunction	84
				Other	0

## Ventricular Placement

### Prospective Clinical Study Results

### Qualifying Complications 51 Total

Number of Leads Enrolled in Study	1,483	Conductor Fracture	5	Impedance Out of Range	2
Cumulative Months of Follow-Up	109,891	Extra Cardiac Stimulation	1	Insulation (not further defined)	2
		Failure to Capture	27	Lead Dislodgement	1
		Failure to Sense	10	Oversensing	3



Leads



Lead Survival Summary continued

Model Number	Family	Chamber	US Market Release	Leads Enrolled	Qualifying Complications	Cumulative Months of Follow-Up	Device Survival Probability (%)																		
							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	18 yr	20 yr					
4073	CapSure Sense	Atrial	Jun-02	1	0	28	Survival estimate not available due to insufficient sample size																		
4073	CapSure Sense	Vent	Jun-02	100	0	2,778	100.0	100.0	at 27 mo	100.0	Survival estimate not available due to insufficient sample size														
4074	CapSure Sense	Vent	Jun-02	608	1	12,289	99.8 +0.2/-1.1	99.8 +0.2/-1.1	99.8 +0.2/-1.1 at 42 mo	99.8 +0.2/-1.1	99.8 +0.2/-1.1 at 42 mo														
4076	CapSureFix Novus	Atrial	Feb-04	289	1	4,536	100.0	99.4 +0.5/-3.8	99.8 +0.5/-3.8 at 27 mo	99.8 +0.5/-3.8 at 27 mo															
4076	CapSureFix Novus	Vent	Feb-04	408	2	6,068	99.4 +0.4/-1.9	99.4 +0.4/-1.9	99.4 +0.4/-1.9 at 27 mo	99.4 +0.4/-1.9															
4081	Target Tip	Vent	Jul-89	260	3	9,749	100.0	100.0	100.0	100.0	100.0	98.2 +1.5/-10.3 at 63 mo													
4092	CapSure SP Novus	Vent	Sep-98	1,142	16	43,905	99.0 +0.5/-0.8	98.9 +0.5/-0.9	98.8 +0.5/-0.9	98.4 +0.7/-1.1	97.8 +0.9/-1.7 at 69 mo	97.8 +0.9/-1.7 at 69 mo													
4503, 4503M	CapSure	Atrial	Jul-86	59	1	3,137	Survival estimate not available due to insufficient sample size																		
4504, 4504M	CapSure	Atrial	Mar-90	368	48	19,863	100.0	100.0	99.1 +0.7/-2.5	98.2 +1.1/-3.0	90.3 +3.5/-5.3	82.2 +5.1/-6.8	73.0 +6.5/-8.2	69.9 +7.0/-8.7	66.1 +7.7/-9.2 at 105 mo										
4512	Target Tip	Atrial	Jul-83	600	35	39,702	99.6 +0.3/-1.2	99.6 +0.3/-1.2	99.1 +0.6/-1.5	98.0 +1.0/-2.0	96.7 +1.4/-2.4	95.6 +1.8/-2.8	94.7 +2.0/-3.2	91.5 +2.9/-4.3	87.5 +3.9/-5.5	83.6 +5.0/-6.8 at 159 mo									
4523	CapSure SP	Atrial	Aug-91	121	4	6,864	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	910	6	38,221	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 105 mo										
4533	CapSure Z	Atrial	Mar-94	206	4	10,925	100.0	99.4 +0.5/-3.5	98.8 +0.9/-3.6	97.9 +1.4/-4.2	97.9 +1.4/-4.2	97.9 +1.4/-4.2	97.9 +1.4/-4.2 at 78 mo												
4557, 4557M	Screw-In	Atrial	Aug-88	294	6	18,335	99.1 +0.7/-2.8	99.1 +0.7/-2.8	99.1 +0.7/-2.8	97.8 +1.4/-3.6	97.8 +1.4/-3.6	97.8 +1.4/-3.6	96.9 +1.8/-4.3	96.9 +1.8/-4.3	96.9 +1.8/-4.3 at 126 mo										
4558M	Screw-In	Atrial	Nov-94	539	11	21,822	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	97.6 +1.6/-4.2	96.5 +2.1/-5.2	96.5 +2.1/-5.2	93.3 +3.7/-8.2 at 105 mo										

continued

Lead Survival Summary continued

Model Number	Family	Chamber	US Market Release	Leads Enrolled	Qualifying Complications	Cumulative Months of Follow-Up	Device Survival Probability (%)														
							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	18 yr	20 yr	
4568	CapSureFix	Atrial	Jan-97	573	28	19,435	96.3 +1.4/-2.1	95.8 +1.5/-2.2	94.7 +1.8/-2.5	94.7 +1.4/-3.6	94.0 +2.1/-3.1	94.0 +2.0/-4.8 at 66 mo	94.0 +2.1/-3.1								
4574	CapSure Sense	Atrial	Jun-02	4	0	107	Survival estimate not available due to insufficient sample size														
4592	CapSure SP Novus	Atrial	Oct-98	241	5	8,910	97.8 +1.4/-3.6	97.8 +1.4/-3.6	97.8 +1.4/-3.6	97.8 +1.4/-3.6	96.7 +2.0/-4.8 at 66 mo	96.7 +2.0/-4.8									
5023, 5023M	CapSure SP	Vent	Nov-88	1,350	8	59,519	99.7 +0.2/-0.5	99.6 +0.3/-0.6	99.6 +0.3/-0.6	99.5 +0.3/-0.8	99.5 +0.3/-0.8	99.5 +0.3/-0.8	98.1 +1.1/-2.6	98.1 +1.1/-2.6	98.1 +1.1/-2.6 at 99 mo						
5024, 5024M	CapSure SP	Vent	Mar-90	8,142	45	417,491	99.7 +0.1/-0.2	99.6 +0.1/-0.2	99.5 +0.2/-0.2	99.5 +0.1/-0.2	99.4 +0.2/-0.2	99.3 +0.2/-0.2	99.3 +0.2/-0.2	99.1 +0.3/-0.4	98.8 +0.4/-0.7	98.5 +0.6/-0.9	98.5 +0.6/-0.9 at 174 mo				
5026	CapSure	Vent	Feb-88	168	4	9,486	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 at 75 mo	95.7 +2.7/-7.2								
5033	CapSure Z	Vent	Feb-96	1,901	22	88,805	99.7 +0.2/-0.4	99.6 +0.2/-0.4	99.1 +0.4/-0.7	99.0 +0.5/-0.7	98.8 +0.5/-1.0	98.3 +0.7/-1.2	98.1 +0.7/-1.2	97.5 +1.0/-1.6	96.6 +1.4/-2.2						
5034	CapSure Z	Vent	Feb-96	1,596	13	77,119	99.7 +0.2/-0.4	99.5 +0.3/-0.6	99.3 +0.3/-0.7	99.2 +0.4/-0.8	99.2 +0.4/-0.8	99.2 +0.4/-0.8	98.9 +0.5/-0.9	98.2 +0.9/-1.9	98.2 +0.9/-1.9 at 117 mo						
5054	CapSure Z Novus	Vent	Jun-98	1,392	11	50,804	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	97.4 +1.5/-3.3 at 78 mo	97.4 +1.5/-3.3								
5068	CapSureFix	Atrial	Jan-97	965	5	32,110	99.6 +0.3/-0.9	99.6 +0.3/-0.9	99.6 +0.3/-0.9	99.2 +0.5/-1.5	99.2 +0.5/-1.5	99.2 +0.5/-1.5	99.2 +0.5/-1.5	98.4 +1.1/-3.6 at 108 mo	98.4 +1.1/-3.6						
5068	CapSureFix	Vent	Jan-97	1,360	5	34,265	99.8 +0.1/-0.6	99.6 +0.3/-0.8	99.4 +0.4/-1.1	99.1 +0.3/-1.5	99.1 +0.3/-1.5	99.1 +0.3/-1.5	99.1 +0.3/-1.5	99.1 +0.3/-1.5 at 87 mo	99.1 +0.3/-1.5						
5072	SureFix	Atrial	Jun-98	450	2	20,567	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	99.4 +0.4/-1.9 at 90 mo	99.4 +0.4/-1.9						
5076	CapSureFix Novus	Atrial	Aug-00	1,993	10	55,024	99.6 +0.2/-0.5	99.6 +0.2/-0.5	99.5 +0.2/-0.5	99.3 +0.4/-0.9	99.3 +0.4/-0.9	99.3 +0.4/-0.9 at 66 mo	99.3 +0.4/-0.9								
5076	CapSureFix Novus	Vent	Aug-00	1,496	8	41,506	99.6 +0.2/-0.5	99.4 +0.3/-0.7	99.4 +0.3/-0.7	99.2 +0.4/-1.0	99.2 +0.4/-1.0	99.2 +0.4/-1.0 at 66 mo	99.2 +0.4/-1.0								
5092	CapSure SP Novus	Vent	Jun-98	1,171	8	35,893	99.6 +0.2/-0.7	99.5 +0.3/-0.8	99.3 +0.4/-1.0	99.0 +0.5/-1.3	99.0 +0.5/-1.3	99.0 +0.5/-1.3	99.0 +0.5/-1.3 at 78 mo	99.0 +0.5/-1.3							
5524, 5524M	CapSure SP	Atrial	Mar-90	4,430	36	228,508	99.8 +0.1/-0.2	99.8 +0.1/-0.3	99.5 +0.2/-0.3	99.4 +0.2/-0.4	99.3 +0.2/-0.5	99.2 +0.3/-0.5	98.9 +0.4/-0.6	98.4 +0.6/-0.8	97.4 +0.9/-1.5	96.9 +1.2/-2.0 at 153 mo	96.9 +1.2/-2.0 at 153 mo				

continued

Lead Survival Summary continued

Device Survival Probability (%)																								
Model Number	Family	Chamber	US Market Release	Leads Enrolled	Qualifying Complications	Cumulative Months of Follow-Up In Study	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	18 yr	20 yr				
<b>5534</b>	CapSure Z	Atrial	Feb-96	260	6	12,176	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	97.1 +1.6/-3.6	97.1 +1.6/-3.6	97.1 +1.6/-3.6	97.1 +1.6/-3.6	97.1 +1.6/-3.6	97.1 +1.6/-3.6	97.1 +1.6/-3.6	97.1 +1.6/-3.6	97.1 +1.6/-3.6		
<b>5554</b>	CapSure Z Novus	Atrial	Jun-98	338	4	14,843	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	98.0 +1.3/-3.2	98.0 +1.3/-3.2	98.0 +1.3/-3.2	98.0 +1.3/-3.2	98.0 +1.3/-3.2	98.0 +1.3/-3.2	98.0 +1.3/-3.2	98.0 +1.3/-3.2	98.0 +1.3/-3.2	98.0 +1.3/-3.2	
<b>5568</b>	CapSureFix	Atrial	Jan-97	864	4	23,463	99.9 +0.1/-0.9	99.6 +0.3/-1.3	99.6 +0.3/-1.3	99.6 +0.3/-1.3	99.6 +0.3/-1.3	99.6 +0.3/-1.3	99.6 +0.3/-1.3	99.6 +0.3/-1.3	99.6 +0.3/-1.3	99.6 +0.3/-1.3	99.6 +0.3/-1.3	99.6 +0.3/-1.3	99.6 +0.3/-1.3	99.6 +0.3/-1.3	99.6 +0.3/-1.3	99.6 +0.3/-1.3	99.6 +0.3/-1.3	
<b>5592</b>	CapSure SP Novus	Atrial	Jun-98	665	4	21,261	99.6 +0.3/-1.0	99.2 +0.5/-1.3	99.2 +0.5/-1.3	99.2 +0.5/-1.3	99.2 +0.5/-1.3	99.2 +0.5/-1.3	99.2 +0.5/-1.3	99.2 +0.5/-1.3	99.2 +0.5/-1.3	99.2 +0.5/-1.3	99.2 +0.5/-1.3	99.2 +0.5/-1.3	99.2 +0.5/-1.3	99.2 +0.5/-1.3	99.2 +0.5/-1.3	99.2 +0.5/-1.3	99.2 +0.5/-1.3	
<b>5594</b>	CapSure SP Novus	Atrial	Jun-01	10	0	415	Survival estimate not available due to insufficient sample size																	
<b>6907R</b>	(no brand name)	Vent	May-79	121	6	9,429	99.0 +0.9/-5.8	99.0 +0.9/-5.8	99.0 +0.9/-5.8	99.0 +0.9/-5.8	99.0 +0.9/-5.8	99.0 +0.9/-5.8	99.0 +0.9/-5.8	99.0 +0.9/-5.8	99.0 +0.9/-5.8	99.0 +0.9/-5.8	99.0 +0.9/-5.8	99.0 +0.9/-5.8	99.0 +0.9/-5.8	99.0 +0.9/-5.8	99.0 +0.9/-5.8	99.0 +0.9/-5.8	99.0 +0.9/-5.8	
<b>6940</b>	CapSureFix	Atrial	Oct-98	614	6	28,515	99.8 +0.2/-1.0	99.8 +0.2/-1.0	98.7 +0.8/-1.7	98.5 +0.8/-1.9	98.5 +0.8/-1.9	98.5 +0.8/-1.9	98.5 +0.8/-1.9	98.5 +0.8/-1.9	98.5 +0.8/-1.9	98.5 +0.8/-1.9	98.5 +0.8/-1.9	98.5 +0.8/-1.9	98.5 +0.8/-1.9	98.5 +0.8/-1.9	98.5 +0.8/-1.9	98.5 +0.8/-1.9	98.5 +0.8/-1.9	
<b>6957</b>	Spectraflex	Atrial	Jul-79	673	10	24,255	100.0	99.7 +0.3/-1.6	99.4 +0.4/-2.0	98.5 +0.9/-2.5	98.0 +1.2/-2.9	98.0 +1.2/-2.9	98.0 +1.2/-2.9	98.0 +1.2/-2.9	98.0 +1.2/-2.9	98.0 +1.2/-2.9	98.0 +1.2/-2.9	98.0 +1.2/-2.9	98.0 +1.2/-2.9	98.0 +1.2/-2.9	98.0 +1.2/-2.9	98.0 +1.2/-2.9	98.0 +1.2/-2.9	98.0 +1.2/-2.9
<b>6957</b>	Spectraflex	Vent	Jul-79	1,853	41	95,910	99.6 +0.2/-0.5	99.3 +0.3/-0.6	98.9 +0.4/-0.9	98.3 +0.7/-1.0	97.8 +0.8/-1.2	97.8 +0.8/-1.2	97.8 +0.8/-1.2	97.8 +0.8/-1.2	97.8 +0.8/-1.2	97.8 +0.8/-1.2	97.8 +0.8/-1.2	97.8 +0.8/-1.2	97.8 +0.8/-1.2	97.8 +0.8/-1.2	97.8 +0.8/-1.2	97.8 +0.8/-1.2	97.8 +0.8/-1.2	97.8 +0.8/-1.2
<b>6957J</b>	Spectraflex	Atrial	Sep-80	2,348	86	159,990	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/-1.0	97.5 +0.7/-1.0	97.5 +0.7/-1.0	97.5 +0.7/-1.0	97.5 +0.7/-1.0	97.5 +0.7/-1.0	97.5 +0.7/-1.0	97.5 +0.7/-1.0	97.5 +0.7/-1.0	97.5 +0.7/-1.0	97.5 +0.7/-1.0	97.5 +0.7/-1.0	97.5 +0.7/-1.0	97.5 +0.7/-1.0
<b>6961</b>	Tenax	Vent	Jan-78	627	22	42,879	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	96.4 +1.5/-2.7	96.4 +1.5/-2.7	96.4 +1.5/-2.7	96.4 +1.5/-2.7	96.4 +1.5/-2.7	96.4 +1.5/-2.7	96.4 +1.5/-2.7	96.4 +1.5/-2.7	96.4 +1.5/-2.7	96.4 +1.5/-2.7	96.4 +1.5/-2.7
<b>6962</b>	Tenax	Vent	Jan-78	1,483	51	109,891	99.0 +0.4/-0.8	98.2 +0.7/-0.9	97.4 +0.8/-1.2	96.9 +0.9/-1.2	96.7 +0.9/-1.4	96.5 +1.0/-1.3	96.4 +1.0/-1.4	96.2 +1.0/-1.4	96.2 +1.0/-1.4	96.2 +1.0/-1.4	96.2 +1.0/-1.4	96.2 +1.0/-1.4	96.2 +1.0/-1.4	96.2 +1.0/-1.4	96.2 +1.0/-1.4	96.2 +1.0/-1.4	96.2 +1.0/-1.4	96.2 +1.0/-1.4

### Laboratory Analysis Summary

Model Number	Family	US Market Release	Estimated US Implants	Estimated US Active	Implant Damage	Electrical Malfunction	Other
3830	SelectSecure	Aug-05	4,800	4,400	12	1	1
4003, 4003M	CapSure	Jul-86	40,000	7,500	24	57	2
4004, 4004M	CapSure	Feb-89	74,500	3,100	55	683	19
4011	Target Tip	Nov-82	64,000	7,600	29	141	5
4012	Target Tip	Jul-83	96,800	6,100	50	820	34
4023	CapSure SP	Aug-91	43,700	15,700	48	19	6
4024	CapSure SP	Oct-91	229,200	88,700	264	100	34
4033	CapSure Z	not US released	—	—	2	0	0
4057, 4057M	Screw-in	Aug-88	12,100	2,900	39	6	4
4058, 4058M	Screw-in	Jan-89	111,100	27,300	388	227	23
4067	CapSureFix	Jan-97	1,300	500	3	1	1
4068	CapSureFix	Mar-96	131,700	60,500	406	78	11
4073	CapSure Sense	Jun-02	500	400	1	0	0
4074	CapSure Sense	Jun-02	43,500	35,600	11	3	1
4076	CapSureFix Novus	Feb-04	96,600	85,700	47	3	5
4081	Target Tip	Jul-89	4,100	900	4	5	0
4092	CapSure SP Novus	Sep-98	134,800	89,800	31	11	5
4503, 4503M	CapSure	Jul-86	9,000	1,500	2	11	0
4504, 4504M	CapSure	Mar-90	16,600	1,700	5	171	4
4512	Target Tip	Jul-83	11,600	1,100	4	83	8
4523	CapSure SP	Aug-91	12,000	3,700	5	2	1
4524	CapSure SP	Oct-91	106,900	40,100	47	21	8
4533	CapSure Z	not US released	—	—	0	0	0
4557, 4557M	Screw-in	Aug-88	22,500	5,500	53	14	4
4558M	Screw-in	Nov-94	21,000	6,500	111	11	1
4568	CapSureFix	Jan-97	72,800	40,200	197	5	4
4574	CapSure Sense	Jun-02	27,900	22,600	5	1	0
4592	CapSure SP Novus	Oct-98	68,700	44,600	12	3	0
5023, 5023M	CapSure SP	Nov-88	10,600	3,100	15	7	0
5024, 5024M	CapSure SP	Mar-90	211,400	76,500	723	106	29
5026	CapSure	Feb-88	7,800	1,400	60	7	1
5033	CapSure Z	Feb-96	2,500	1,100	6	1	3
5034	CapSure Z	Feb-96	58,700	24,200	85	29	11
5054	CapSure Z Novus	Jun-98	80,400	50,300	40	13	6
5068	CapSureFix	Jan-97	108,000	54,900	455	59	15
5072	SureFix	Jun-98	8,800	5,200	25	3	1
5076	CapSureFix Novus	Aug-00	766,500	584,100	659	135	48
5092	CapSure SP Novus	Jun-98	101,800	67,700	44	18	11
5524, 5524M	CapSure SP	Mar-90	63,800	24,600	66	21	7
5534	CapSure Z	Feb-96	27,700	9,800	29	6	5
5554	CapSure Z Novus	Jun-98	51,600	32,500	7	6	4
5568	CapSureFix	Jan-97	57,700	40,200	223	7	9
5592	CapSure SP Novus	Jun-98	24,200	17,400	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	8,500	6,700	0	1	0
6907R	(no brand name)	May-79	18,500	900	3	25	1
6940	CapSureFix	Oct-98	26,600	13,600	114	19	3
6957	Spectraflex	Jul-79	29,100	3,000	85	39	25
6957J	Spectraflex	Sep-80	30,000	2,500	74	28	30
6961	Tenax	Jan-78	44,700	1,500	103	27	0
6962	Tenax	Jan-78	70,600	2,800	170	84	0



Reference Chart

Model Number	Family	Type	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-1 BI
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-1 BI
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-1 BI
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-1 BI
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-1 BI
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-1 BI (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-1 BI
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-1 BI
4568	CapSureFix	Transvenous Atrial-J Screw-In	Polyurethane (80A/55D)	MP35N 6/3 Filars	1.8 mm Helix/Steroid	IS-1 BI
4574	CapSure Sense	Transvenous Atrial-J Tines	Polyurethane/Silicone (55D,4719)	MP35N 5/5 Filars	TiN Coated Platinum Iridium	IS-1 BI
4592	CapSure SP Novus	Transvenous Atrial-J Tines	Polyurethane/Silicone (55D/4719)	MP35N 6/3 Filars	Porous Platinized/Steroid	IS-1 BI
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	Type	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-1 BI
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-1 BI
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

## 4951, 4951M Spectraflex

### Product Characteristics

US Market Release	Oct-81	Serial Number Prefix	TF or LBJ
Estimated US Implants	25,200	Type and/or Fixation	Myocardial Stab-in, V or A, Peds
Estimated US Active	3,900	Polarity	Unipolar
Advisories	None	Steroid	No

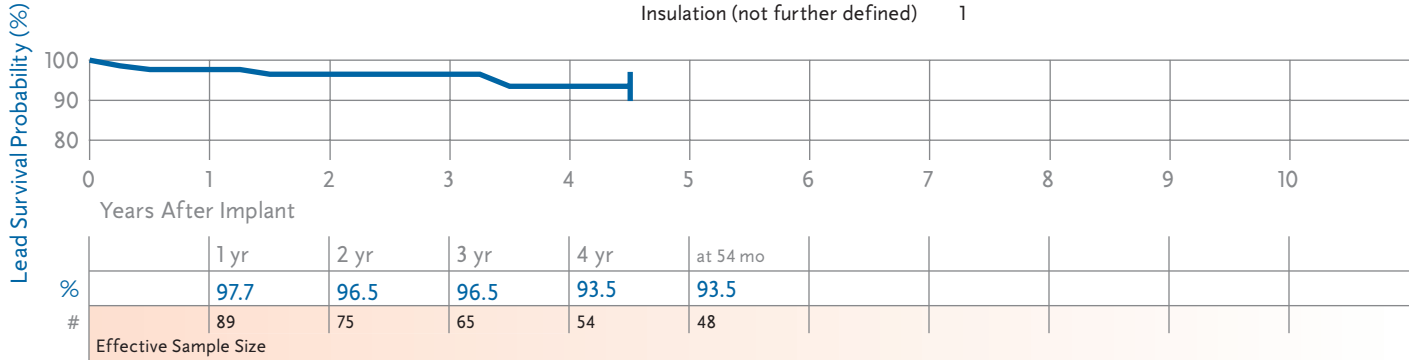
### Laboratory Analysis

Implant Damage	15
Electrical Malfunction	95
Other	28

### Prospective Clinical Study Results

### Qualifying Complications 10 Total

Number of Leads Enrolled in Study	181	Failure to Capture	4
Cumulative Months of Follow-Up	6,167	Failure to Sense	3
		Impedance Out of Range	1
		Insulation (ESC)	1
		Insulation (not further defined)	1



## 4965 CapSure Epi

### Product Characteristics

US Market Release	Sep-96	Serial Number Prefix	LBT
Estimated US Implants	17,800	Type and/or Fixation	Epicardial Suture-On V or A
Estimated US Active	10,400	Polarity	Unipolar
Advisories	None	Steroid	Yes

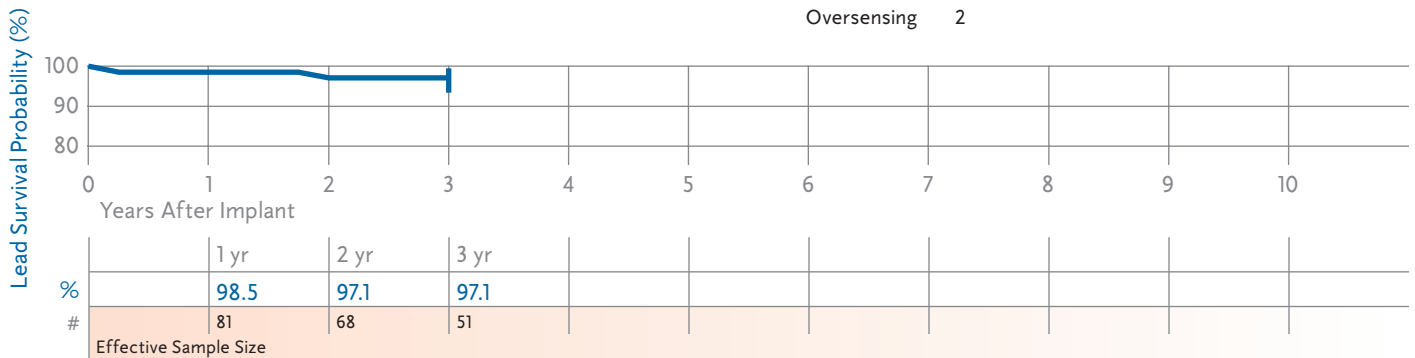
### Laboratory Analysis

Implant Damage	8
Electrical Malfunction	75
Other	2

### Prospective Clinical Study Results

### Qualifying Complications 7 Total

Number of Leads Enrolled in Study	162	Conductor Fracture	2
Cumulative Months of Follow-Up	3,914	Failure to Capture	2
		Failure to Sense	1
		Oversensing	2



# Epi/Myocardial Pacing Leads continued

## 4968 CapSure Epi

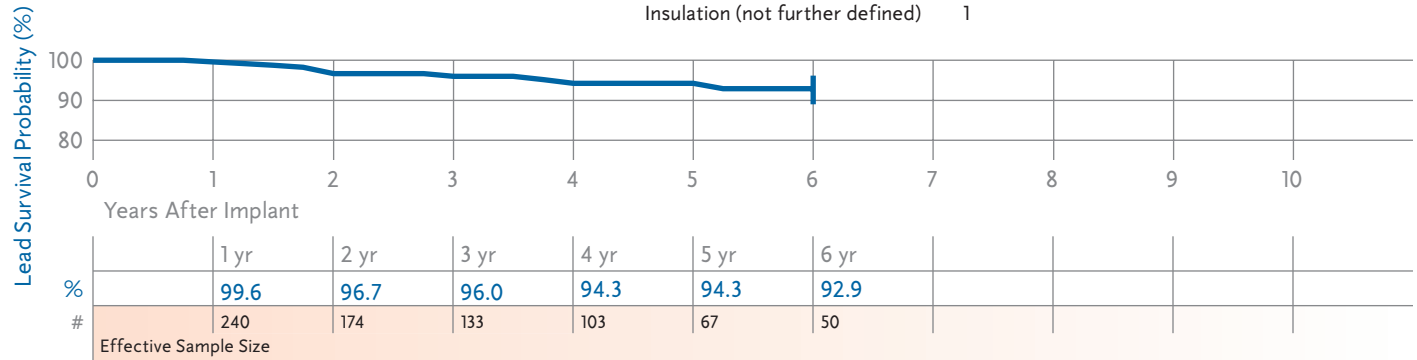
### Product Characteristics

US Market Release	Sep-99	Serial Number Prefix	LEN	<b>Laboratory Analysis</b>	
Estimated US Implants	12,400	Type and/or Fixation	Epicardial Suture-On V or A		
Estimated US Active	9,100	Polarity	Bipolar		
Advisories	None	Steroid	Yes		
				Implant Damage	2
				Electrical Malfunction	3
				Other	0

### Prospective Clinical Study Results

### Qualifying Complications 15 Total

Number of Leads Enrolled in Study	340	Conductor Fracture	5	Oversensing	2
Cumulative Months of Follow-Up	13,029	Failure to Capture	5		
		Failure to Sense	2		
		Insulation (not further defined)	1		



## 5071

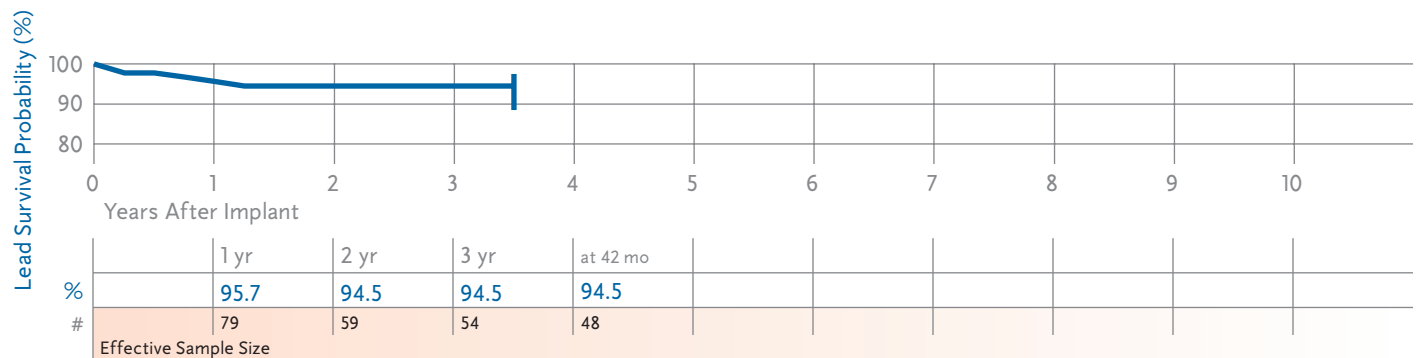
### Product Characteristics

US Market Release	Dec-92	Serial Number Prefix	LAQ	<b>Laboratory Analysis</b>	
Estimated US Implants	31,700	Type and/or Fixation	Myocardial Screw-in Vent.		
Estimated US Active	20,100	Polarity	Unipolar		
Advisories	None	Steroid	No		
				Implant Damage	24
				Electrical Malfunction	4
				Other	1

### Prospective Clinical Study Results

### Qualifying Complications 7 Total

Number of Leads Enrolled in Study	165	Failure to Capture	7
Cumulative Months of Follow-Up	4,877		



Leads

# Epi/Myocardial Pacing Leads continued

## 6917, 6917A Tenax

### Product Characteristics

US Market Release	Jun-73	Serial Number Prefix	WV or WC
Estimated US Implants	180,100	Type and/or Fixation	Myocardial Screw-in Vent.
Estimated US Active	6,100	Polarity	Unipolar
Advisories	None	Steroid	No

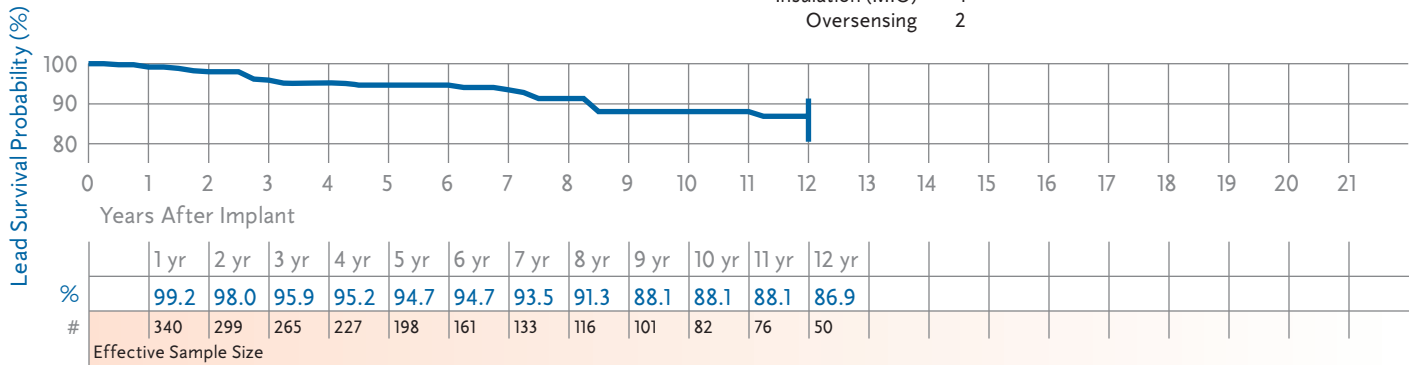
### Laboratory Analysis

Implant Damage	115
Electrical Malfunction	42
Other	1

### Prospective Clinical Study Results

### Qualifying Complications 35 Total

Number of Leads Enrolled in Study	598	Failure to Capture	26
Cumulative Months of Follow-Up	29,502	Failure to Sense	6
		Insulation (MIO)	1
		Oversensing	2



## Lead Survival Summary (95% Confidence Interval)

Model Number	Family	US Market Release	Leads Enrolled	Qualifying Complications	Cumulative Months of Follow-Up in Study	Device Survival Probability (%)												
						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	
<b>4951, 4951M</b>	<b>Spectraflex</b>	Oct-81	181	10	6,167	97.7 +1.6/-4.7	96.5 +2.2/-5.7	96.5 +2.2/-5.7	93.5 +3.6/-8.1	93.5 +3.6/-8.1 at 54 mo								
<b>4965</b>	<b>CapSure Epi</b>	Sep-96	162	7	3,914	98.5 +1.1/-4.3	97.1 +2.0/-6.3	97.1 +2.0/-6.3										
<b>4968</b>	<b>CapSure Epi</b>	Sep-99	340	15	13,029	99.6 +0.3/-2.3	96.7 +1.7/-3.5	96.0 +2.0/-3.9	94.3 +2.7/-4.9	94.3 +2.7/-4.9	92.9 +3.3/-6.1							
<b>5071</b>	(no brand name)	Dec-92	165	7	4,877	95.7 +2.5/-5.9	94.5 +3.0/-6.7	94.5 +3.0/-6.7	94.5 +3.0/-6.7 at 42 mo									
<b>6917, 6917A</b>	<b>Tenax</b>	Jun-73	598	35	29,502	99.2 +0.5/-1.7	98.0 +1.0/-2.2	95.9 +1.7/-2.9	95.2 +1.9/-3.1	94.7 +2.1/-3.2	94.7 +2.1/-3.2	93.5 +2.4/-3.9	91.3 +3.1/-4.7	88.1 +4.0/-5.9	86.9 +4.4/-6.4			

## 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	25,200	3,900	15	95	28
4965	CapSure Epi	Sep-96	17,800	10,400	8	75	2
4968	CapSure Epi	Sep-99	12,400	9,100	2	3	0
5071	(no brand name)	Dec-92	31,700	20,100	24	4	1
6917, 6917A	Tenax	Jun-73	180,100	6,100	115	42	1

Source: Returned Product Analysis  
Data as of January 31, 2007

## Reference Chart

Model Number	Family	Type	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

## 5032 CapSure VDD

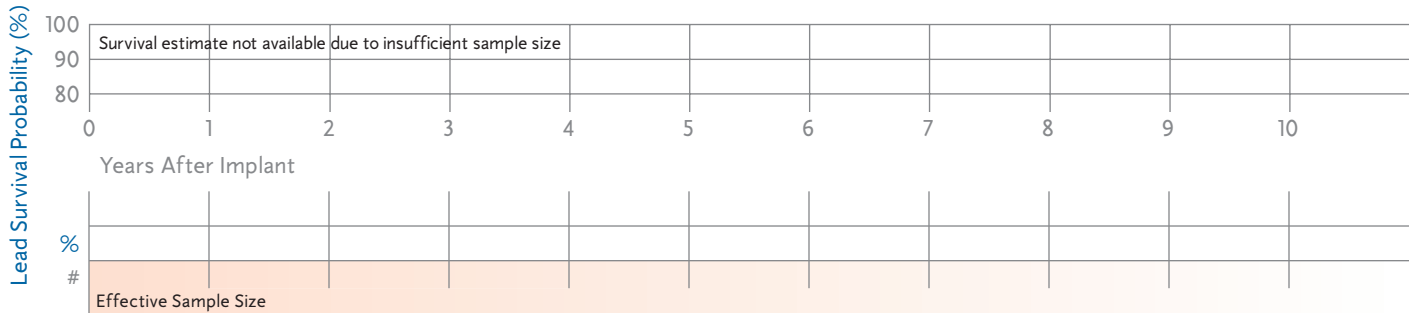
### Product Characteristics

US Market Release	Mar-96	Serial Number Prefix	LCL, LCN, LCM	<b>Laboratory Analysis</b>	
Estimated US Implants	5,400	Type and/or Fixation	Transvenous, Atr-Vent.,Tines		
Estimated US Active	2,200	Polarity	Quadripolar		
Advisories	None	Steroid	Yes		
				Implant Damage	24
				Electrical Malfunction	12
				Other	0

### Prospective Clinical Study Results

### Qualifying Complications 1 Total

Number of Leads Enrolled in Study	38	Failure to Sense	1
Cumulative Months of Follow-Up	1,819		



## 5038 CapSure VDD-2

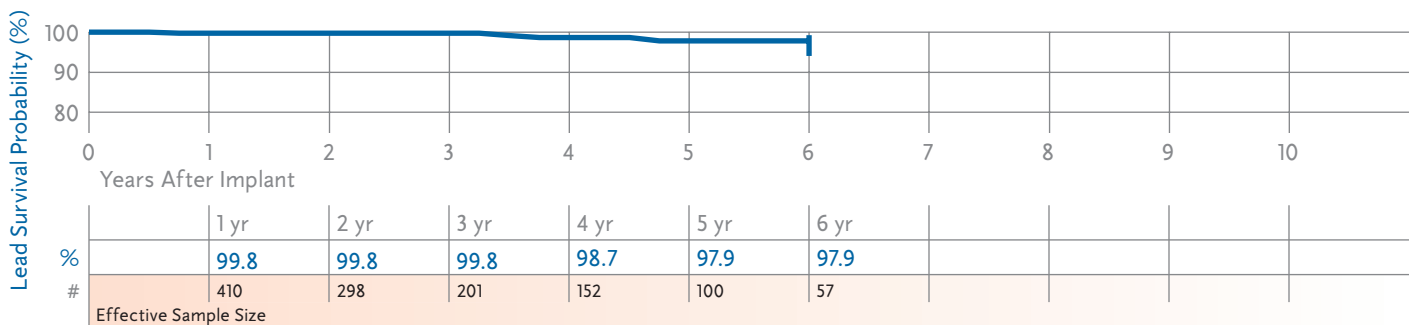
### Product Characteristics

US Market Release	Sep-98	Serial Number Prefix	LEE, LEG, or LEF	<b>Laboratory Analysis</b>	
Estimated US Implants	7,400	Type and/or Fixation	Transvenous, Atr-Vent.,Tines		
Estimated US Active	4,500	Polarity	Quadripolar		
Advisories	None	Steroid	Yes		
				Implant Damage	6
				Electrical Malfunction	2
				Other	1

### Prospective Clinical Study Results

### Qualifying Complications 4 Total

Number of Leads Enrolled in Study	545	Conductor Fracture	1
Cumulative Months of Follow-Up	18,609	Failure to Capture	1
		Failure to Sense	2



Leads



# VDD Single Pass Pacing Leads continued

## Lead Survival Summary (95% Confidence Interval)

Model Number	Family	US Market Release	Leads Enrolled	Qualifying Complications	Cumulative Months of Follow-Up in Study	Device Survival Probability (%)									
						Years After Implant									
						1 yr	2 yr	3 yr	4 yr	5 yr	6 yr	7 yr	8 yr	9 yr	10 yr
5032	CapSure VDD	Mar-96	38	1	1,819	Survival estimate not available due to insufficient sample size									
5038	CapSure VDD-2	Sep-98	545	4	18,609	99.8 +0.2/-1.4	99.8 +0.2/-1.4	99.8 +0.2/-1.4	98.7 +0.9/-3.1	97.9 +1.4/-3.8	97.9 +1.4/-3.8				

Source: System Longevity Study  
Data as of January 31, 2007

## 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	2,200	24	12	0
5038	CapSure VDD-2	Sep-98	7,400	4,500	6	2	1

Source: Returned Product Analysis  
Data as of January 31, 2007

## Reference Chart

Model Number	Family	Type	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 and CRT-D Charge Time Performance

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

## Introduction

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

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

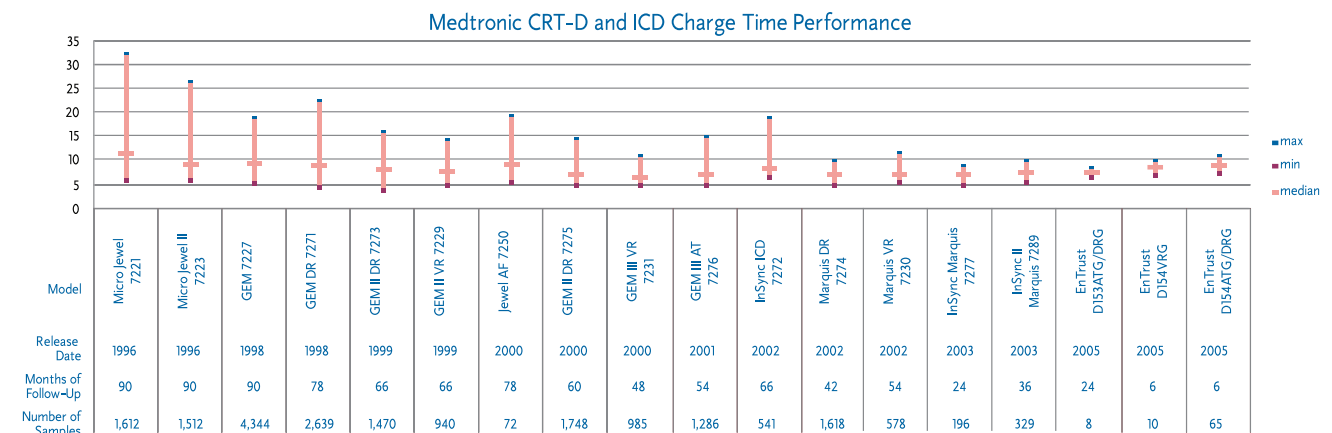
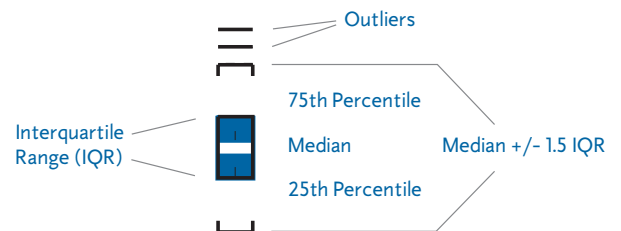
Data from over 20,000 devices contribute to the charge time data in this report. By tracking and reporting this charge time data, Medtronic is able to ascertain the actual performance of its charging circuitry. The insight gained through this information is applied to Medtronic's ongoing efforts to provide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

## Data Presentation

Charge time data for ICD and CRT-D models are presented using boxplots at 6-month intervals. The shaded box on the plots represents the middle half of the data – the Interquartile Range (IQR). The white line in the middle of each box is the median charge time. The top of the box representing the IQR is the 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.

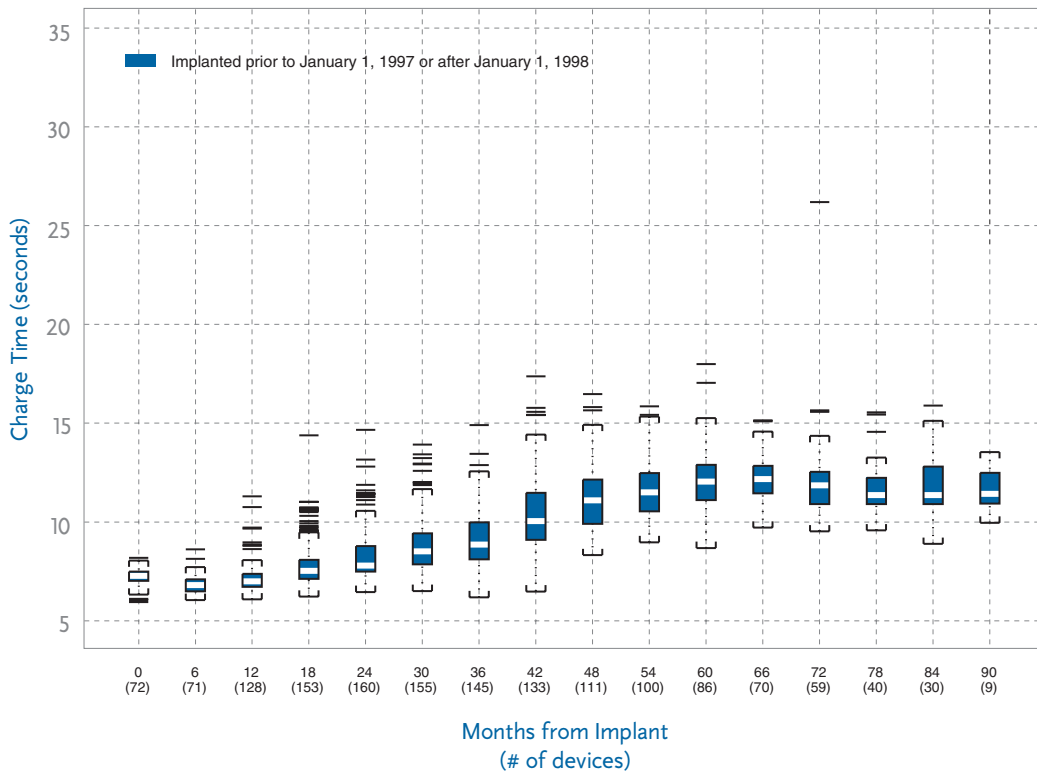
## Results

As shown in the graph below, the performance of Medtronic ICD and CRT-D devices has improved. This graph shows the overall maximums, minimums, and medians for Medtronic ICD and CRT-D products, beginning with the 7221 Micro Jewel. A progression toward shorter mean charge times and less variation as occurred between 1996 and 2002. Models released after 2002 have limited experience, but appear to be continuing this performance.

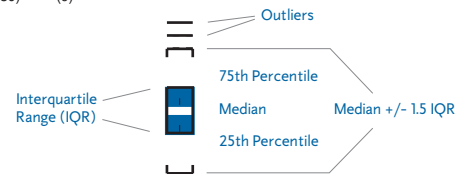


ICD Charge Times

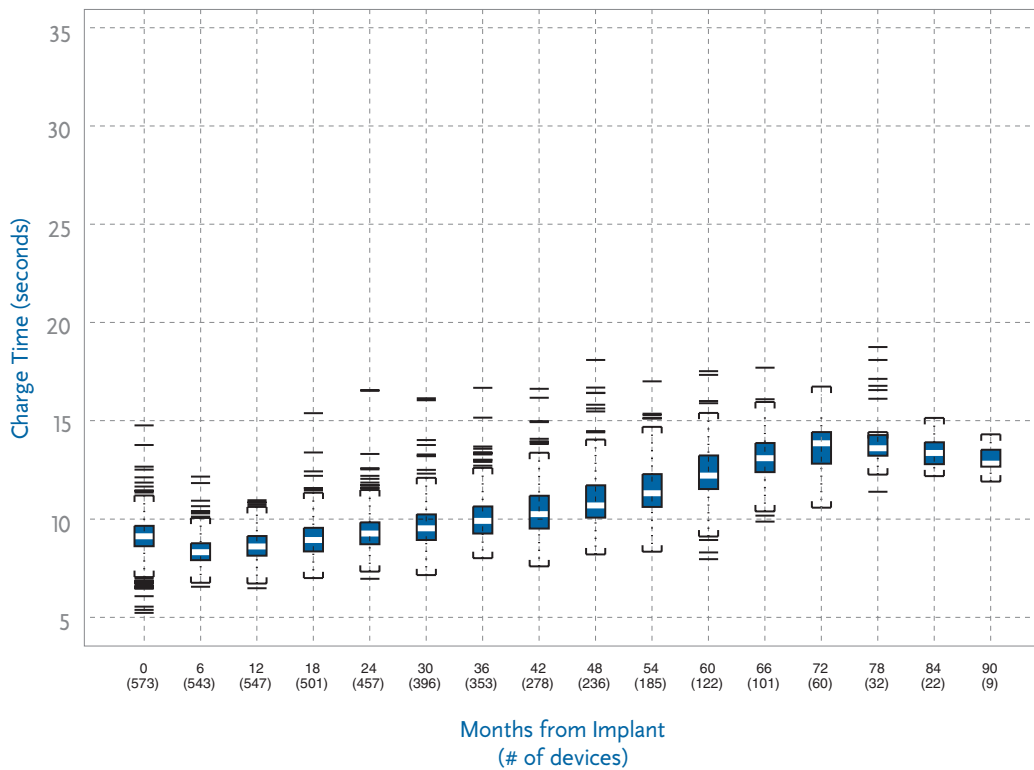
## 7223 Micro Jewel II Charge Time



Save-to-Disk files have been collected 90 months post-implant. All observed charge times are below 20 seconds, except one of 26.2 seconds at 72 months post-implant.



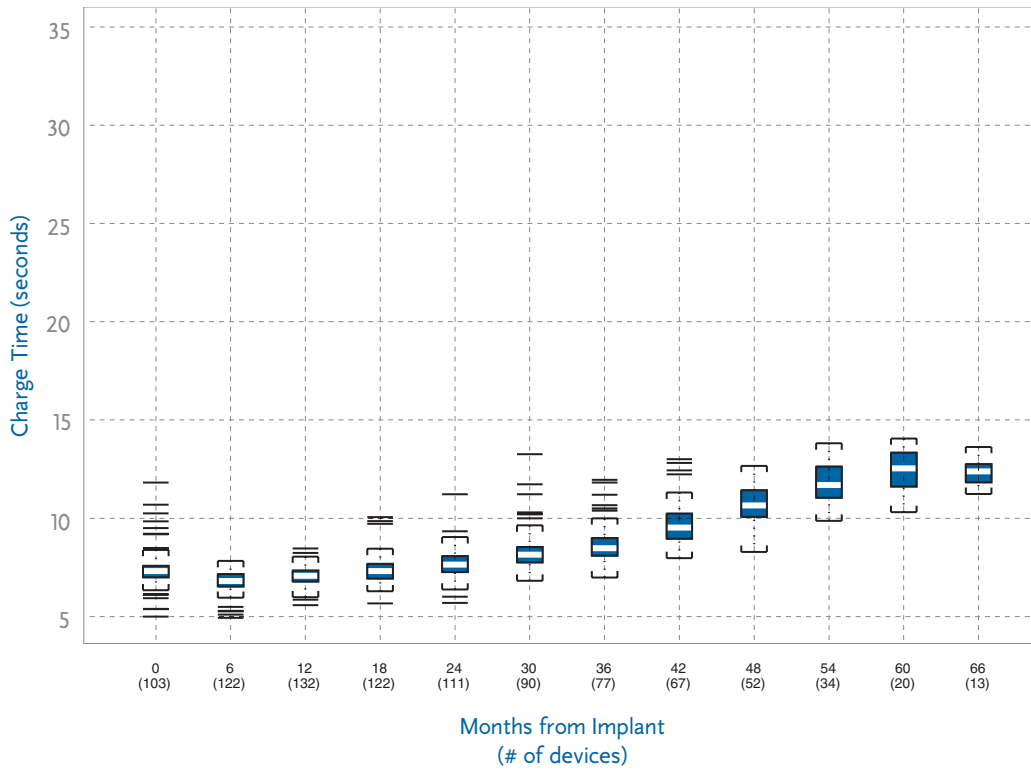
## 7227 GEM Charge Time



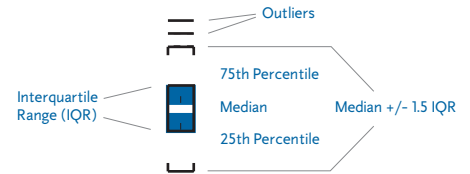
Save-to-Disk files have been collected 90 months post-implant. All observed charge times are below 20 seconds, with a maximum charge time of 18.75 seconds at 78 months post-implant.

# ICD and CRT-D Charge Time Performance continued

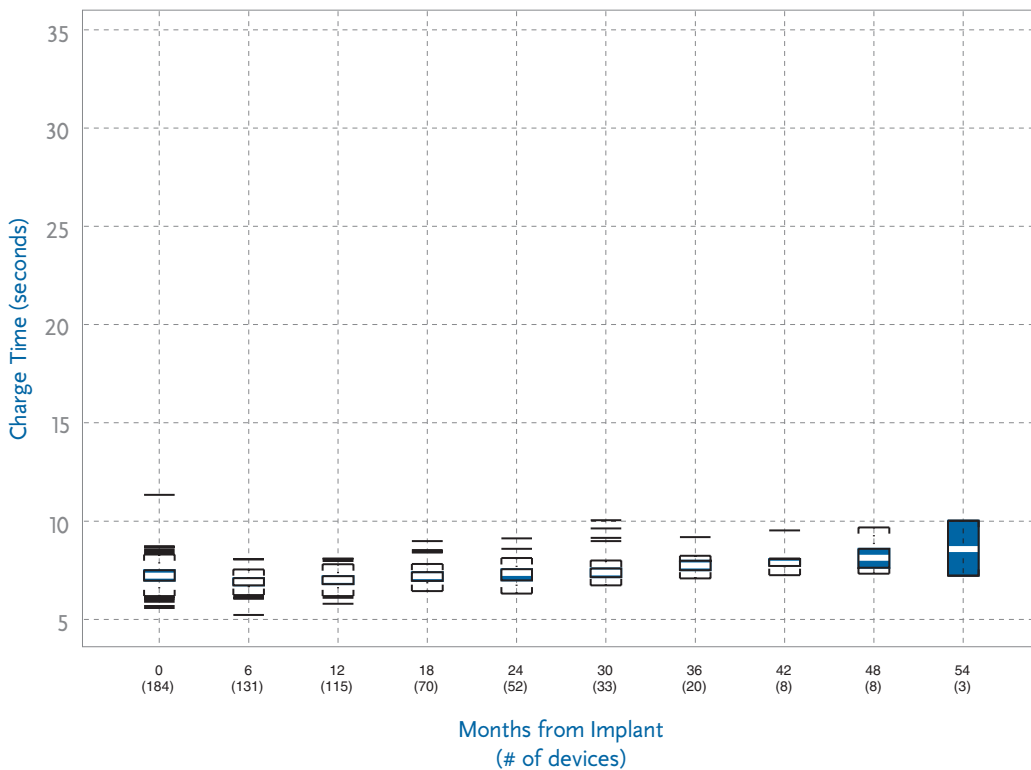
## 7229 GEM II VR Charge Time



Save-to-Disk files have been collected 66 months post-implant. All observed charge times are below 15 seconds, with a maximum charge time of 14.06 seconds at 60 months post-implant.



## 7230 Marquis VR Charge Time

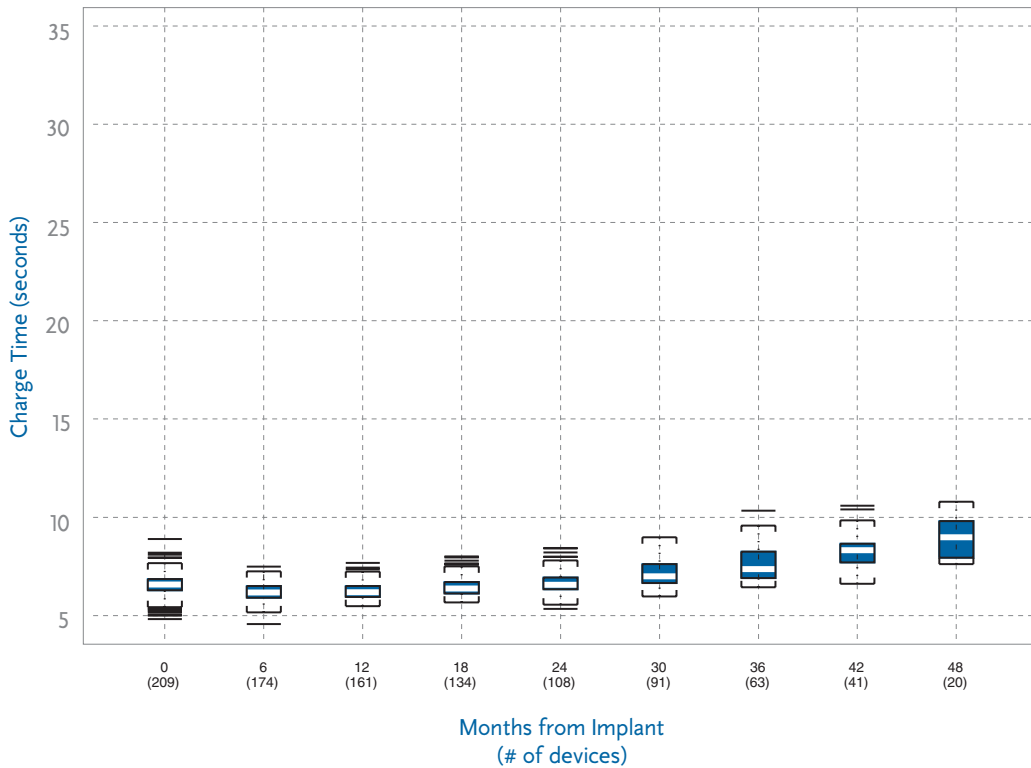


Save-to-Disk files have been collected 54 months post-implant. All observed charge times are less than 12 seconds with a maximum of 11.34 seconds observed at implant.

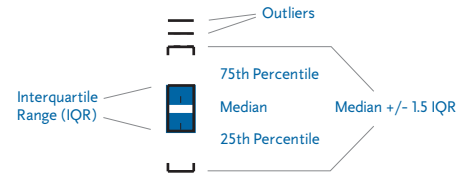
ICD Charge Times

# ICD and CRT-D Charge Time Performance continued

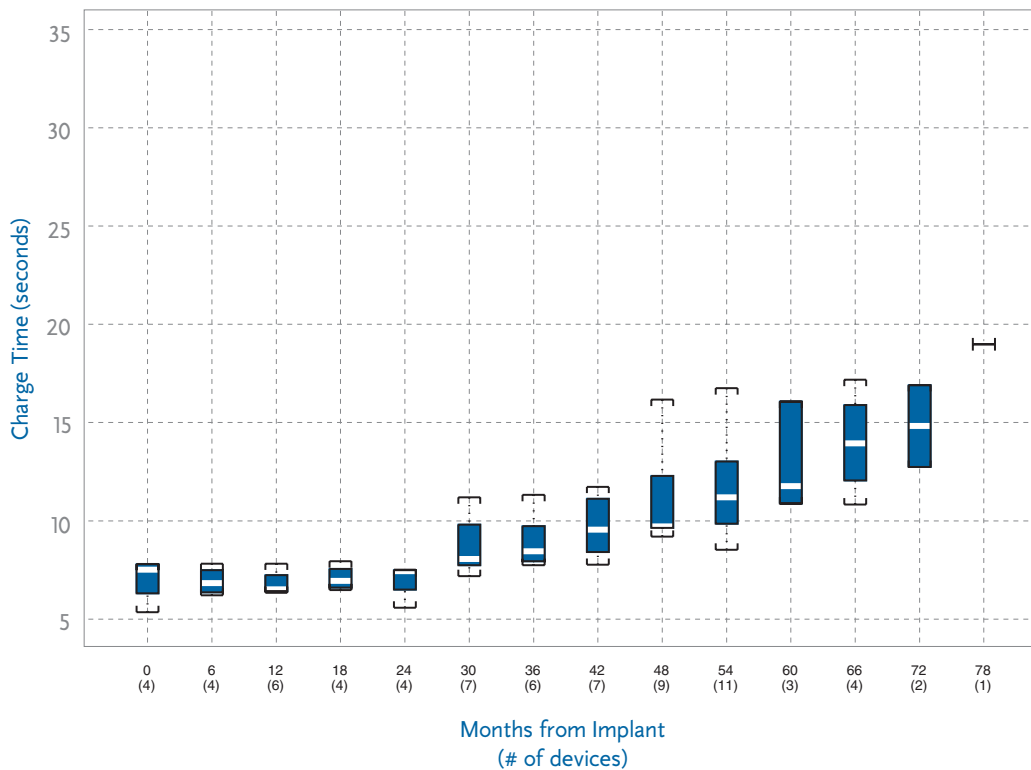
## 7231 GEM III VR Charge Time



Save-to-Disk files have been collected 48 months post-implant. All observed charge times are less than 12 seconds with a maximum of 10.79 seconds at 48 months post-implant.

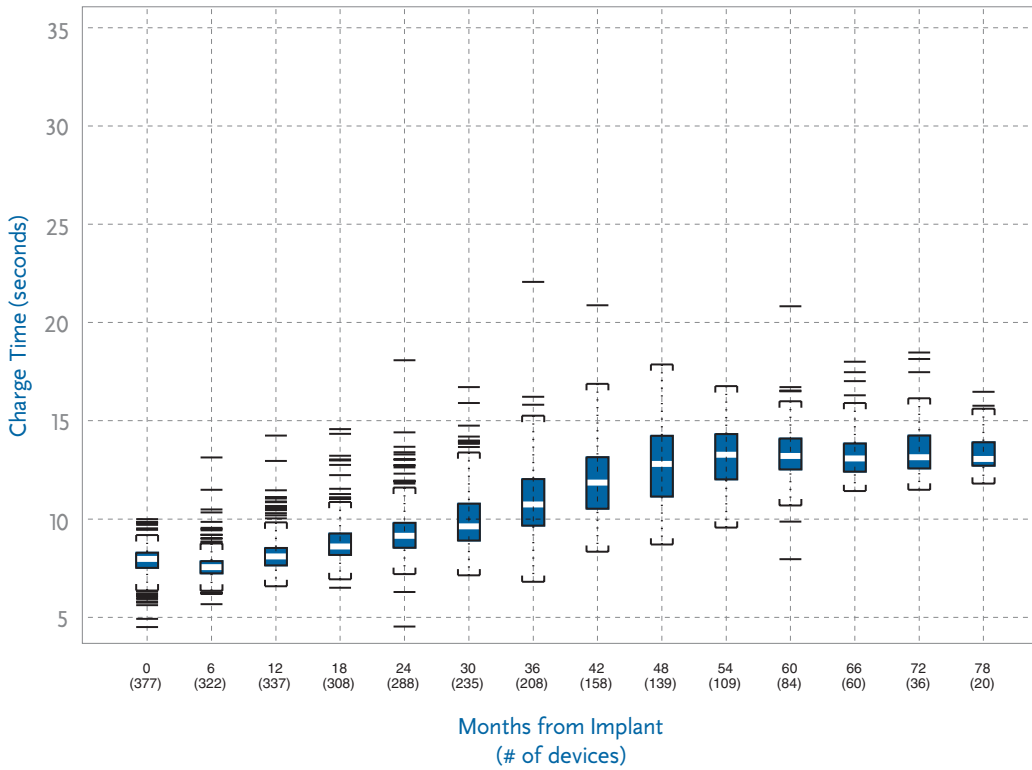


## 7250 Jewel AF Charge Time

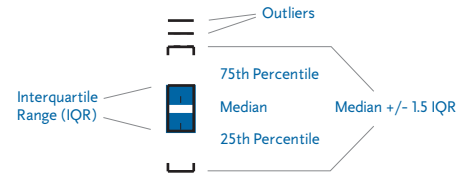


Save-to-Disk files have been collected 78 months post-implant. All observed charge times are less than 20 seconds with a maximum of 18.99 seconds observed at 78 months post-implant.

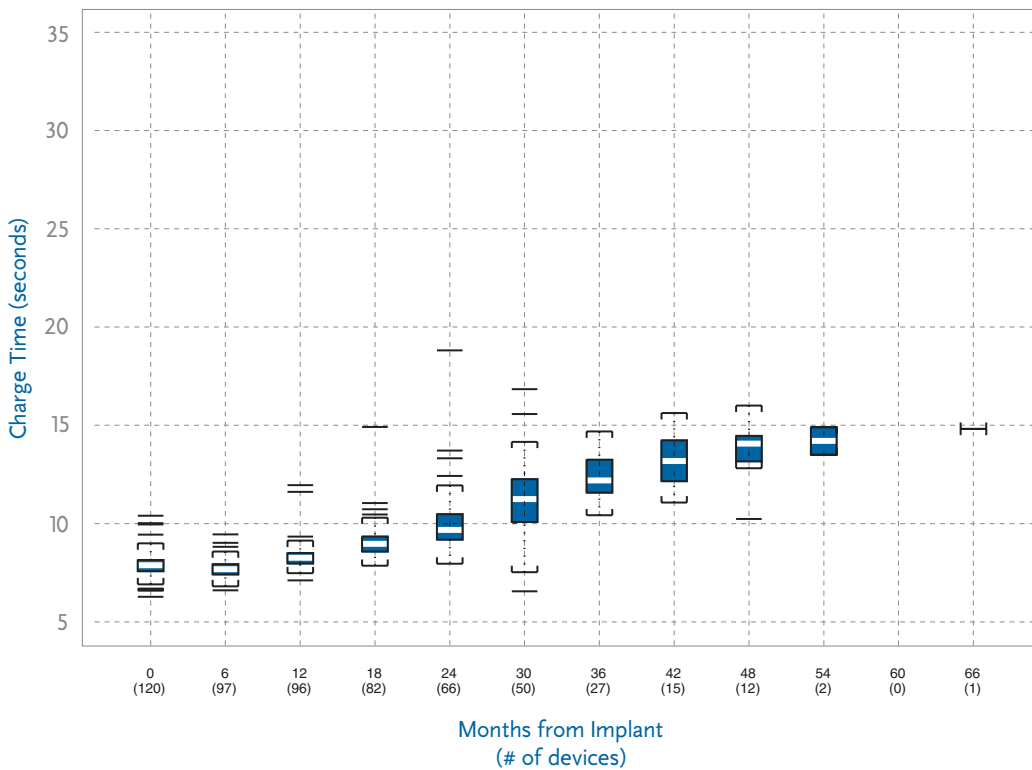
## 7271 GEM DR Charge Time



Save-to-Disk files have been collected 78 months post-implant. All observed charge times are less than 25 seconds with a maximum of 22.07 seconds observed at 36 months post-implant.



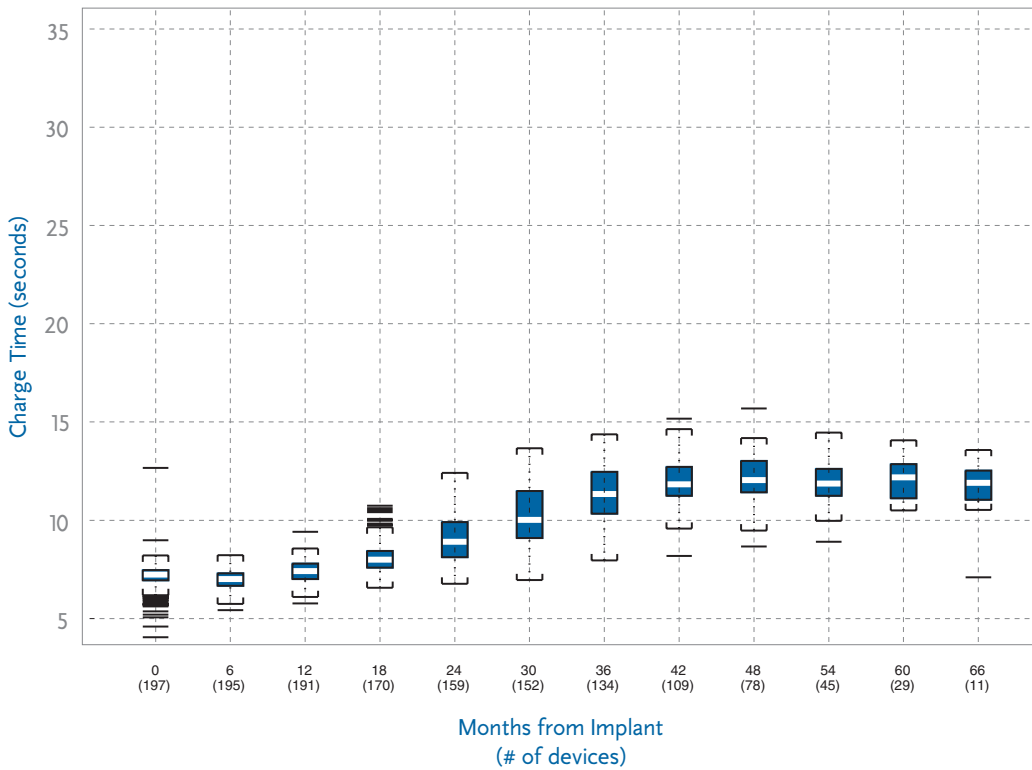
## 7272 InSync ICD Charge Time



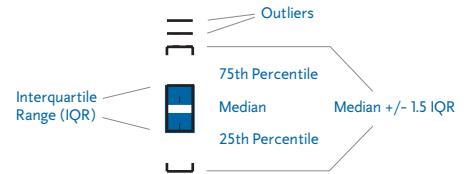
Save-to-Disk files have been collected 66 months post-implant. All observed charge times are less than 20 seconds with a maximum of 18.81 seconds observed at 24 months post-implant.

# ICD and CRT-D Charge Time Performance continued

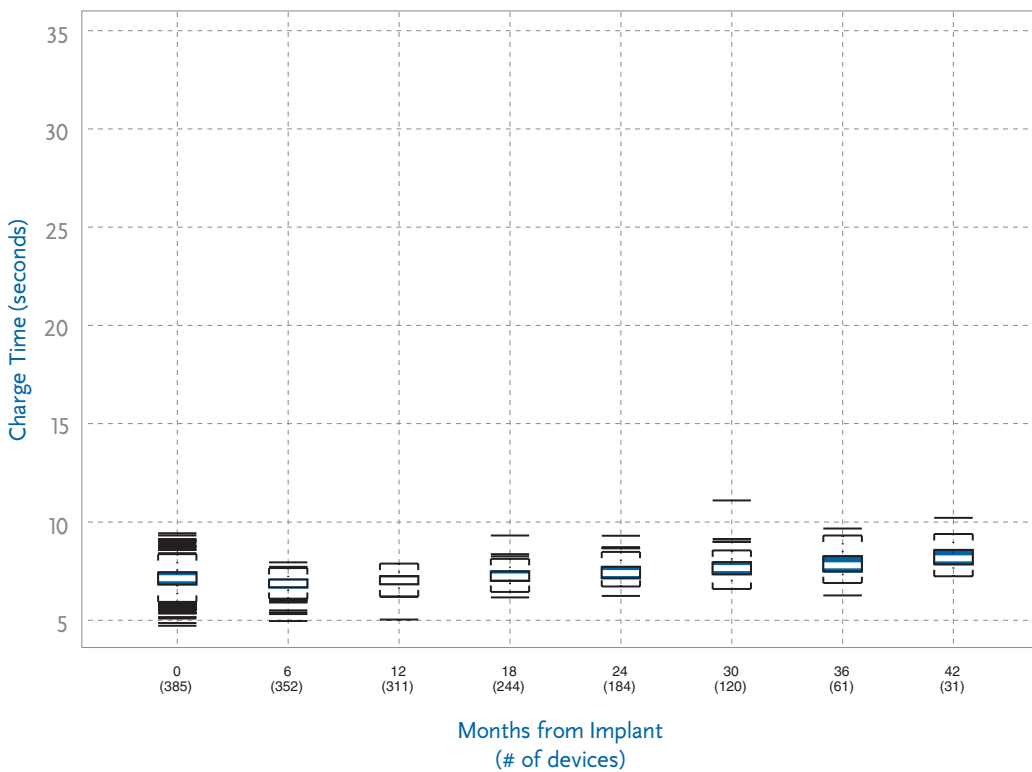
## 7273 GEM II DR Charge Time



Save-to-Disk files have been collected 66 months post-implant. All observed charge times are below 20 seconds, with a maximum charge time of 15.69 seconds observed at 48 months post-implant.



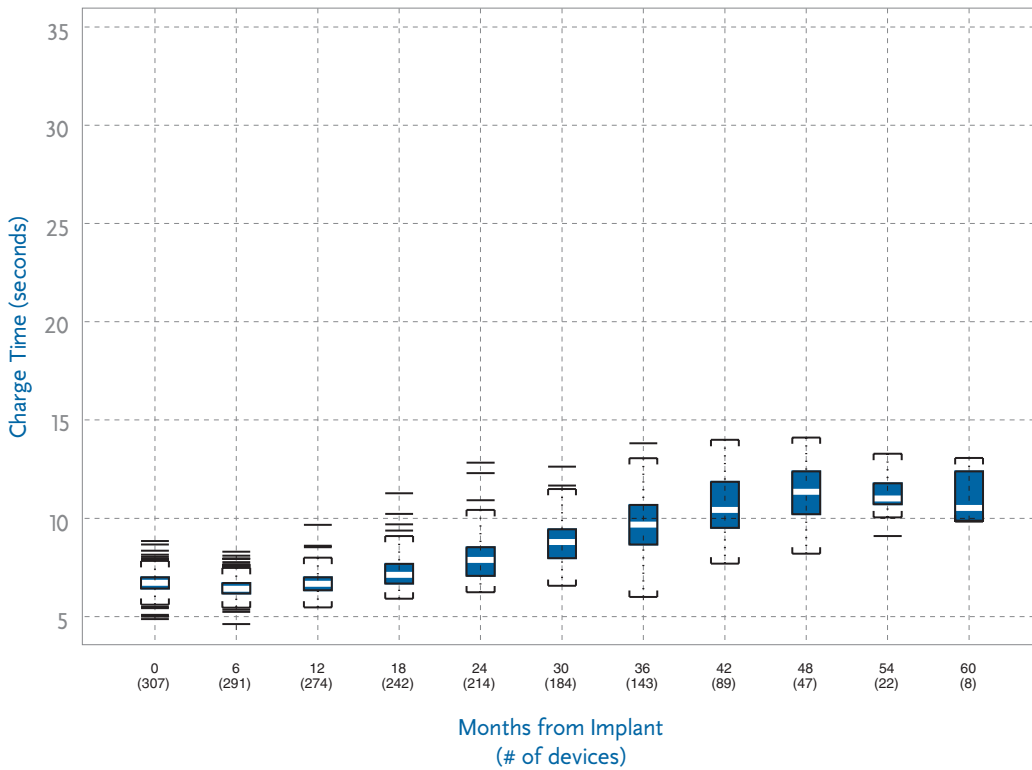
## 7274 Marquis DR Charge Time



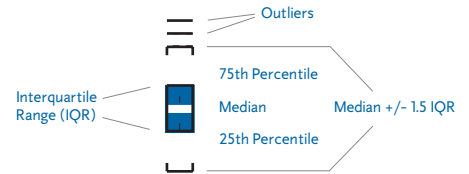
Save-to-Disk files have been collected 42 months post-implant. All observed charge times are less than 12 seconds with a maximum of 11.09 seconds observed at 30 months post-implant.

# ICD and CRT-D Charge Time Performance continued

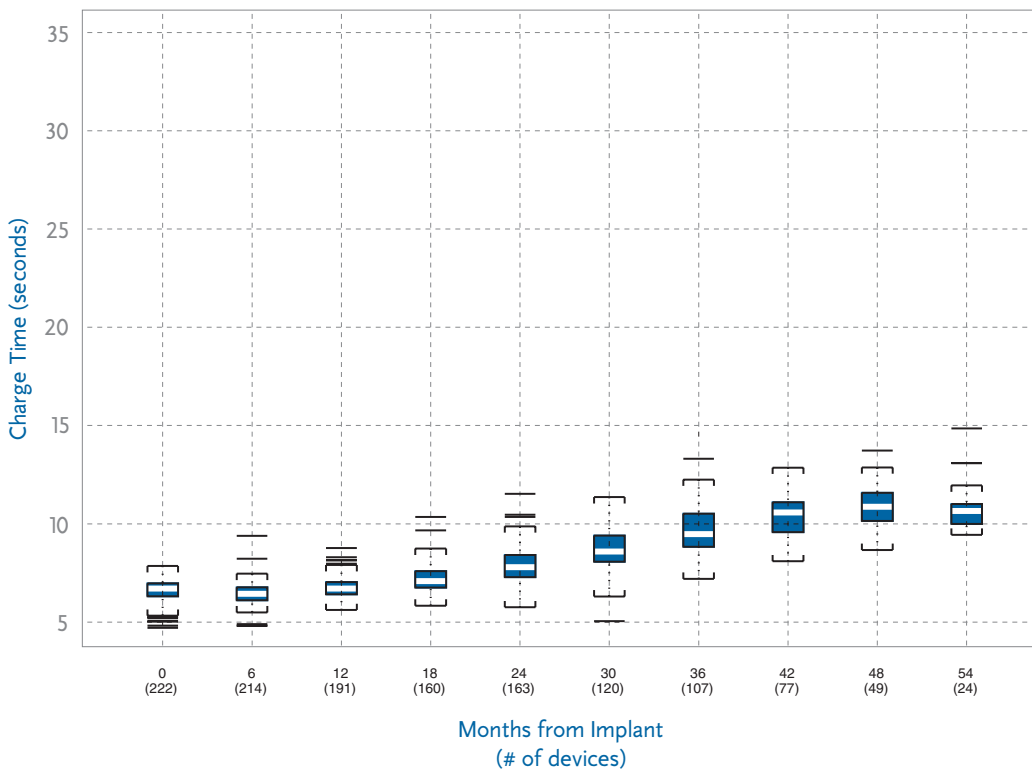
## 7275 GEM III DR Charge Time



Save-to-Disk files have been collected 60 months post-implant. All observed charge times are less than 15 seconds with a maximum of 14.11 seconds seen at 48 months post-implant.



## 7276 GEM III AT Charge Time

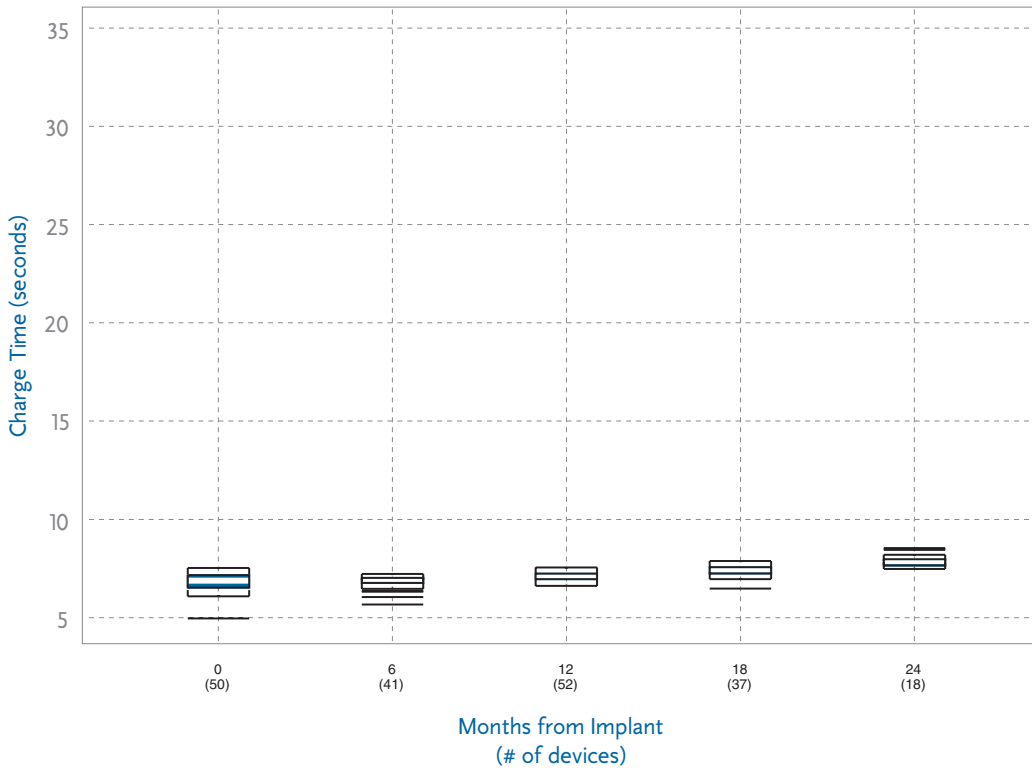


Save-to-Disk files have been collected 54 months post-implant. All observed charge times are less than 15 seconds with a maximum of 14.85 seconds observed at 54 months post-implant.

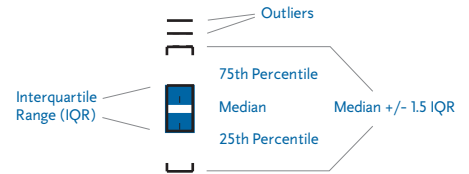


# ICD and CRT-D Charge Time Performance continued

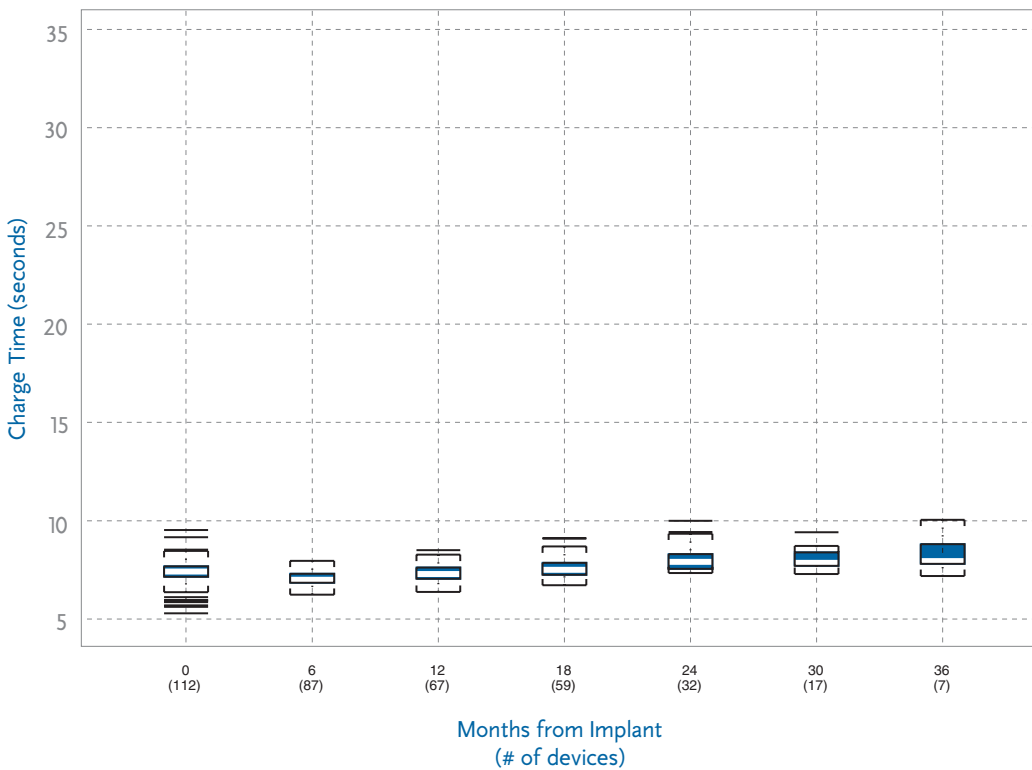
## 7277 InSync Marquis Charge Time



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.



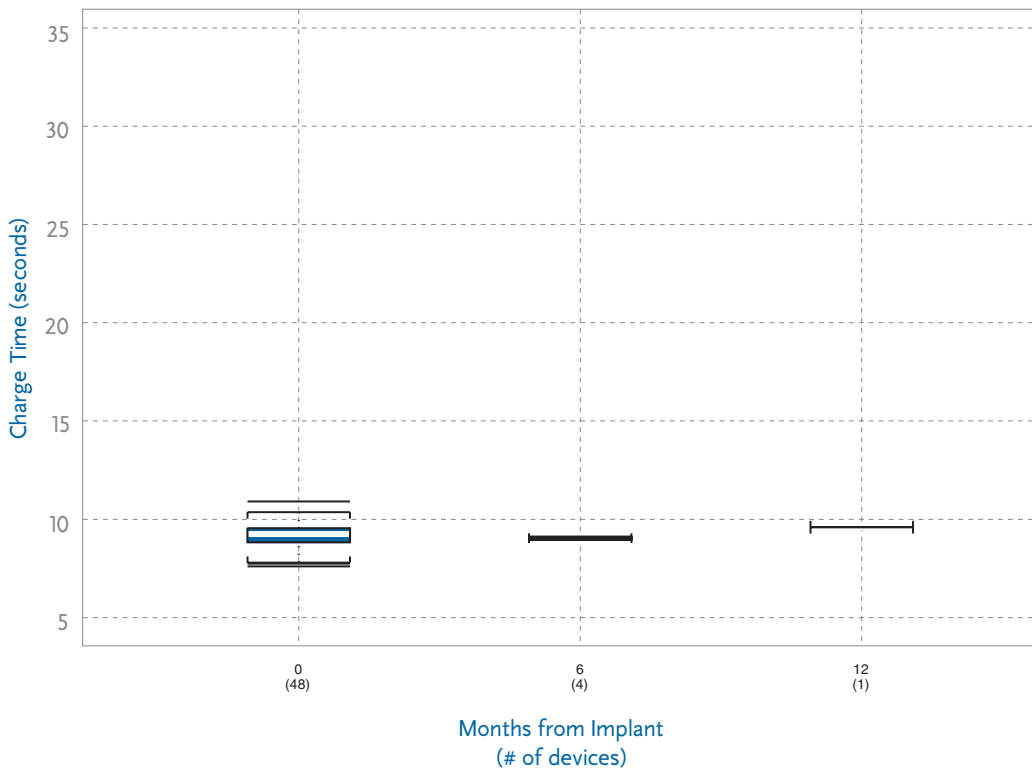
## 7289 InSync II Marquis Charge Time



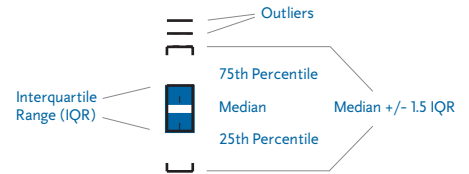
Save-to-Disk files have been collected 36 months post-implant. All observed charge times are less than 12 seconds with a maximum of 10.05 seconds observed at 36 months post-implant.

# ICD and CRT-D Charge Time Performance continued

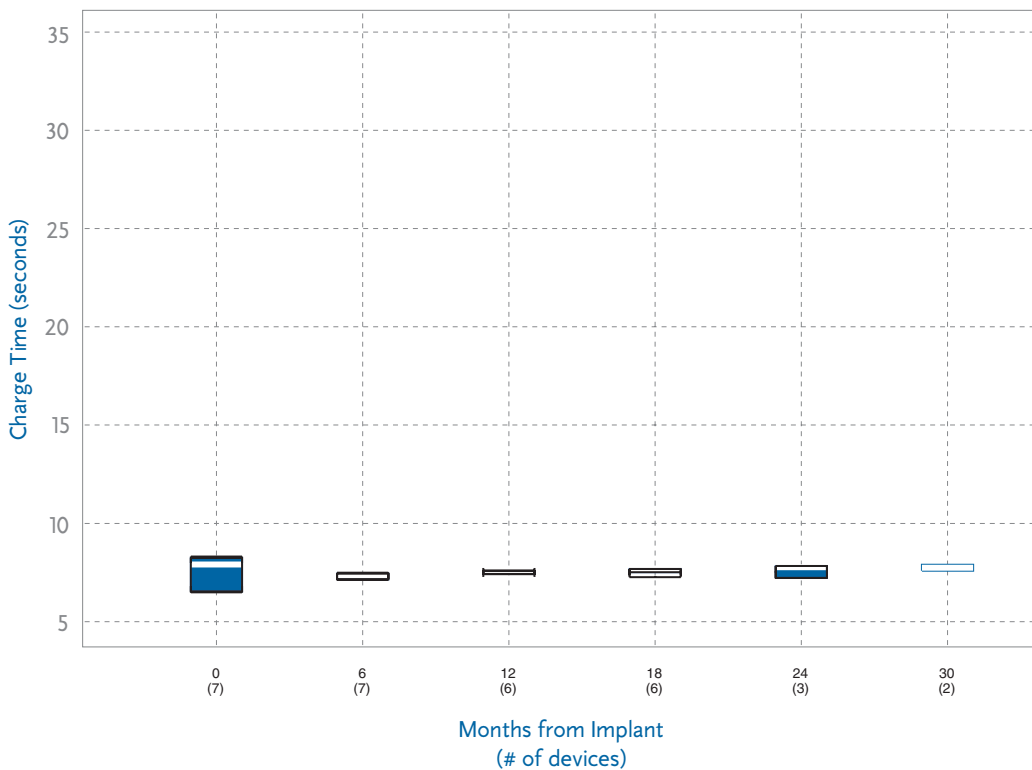
### C154DWK Concerto Charge Time



Save-to-Disk files have been collected 12 months post-implant. All observed charge times are less than 12 seconds with a maximum of 10.91 seconds observed at implant.



### D153ATG, D153DRG EnTrust Charge Time

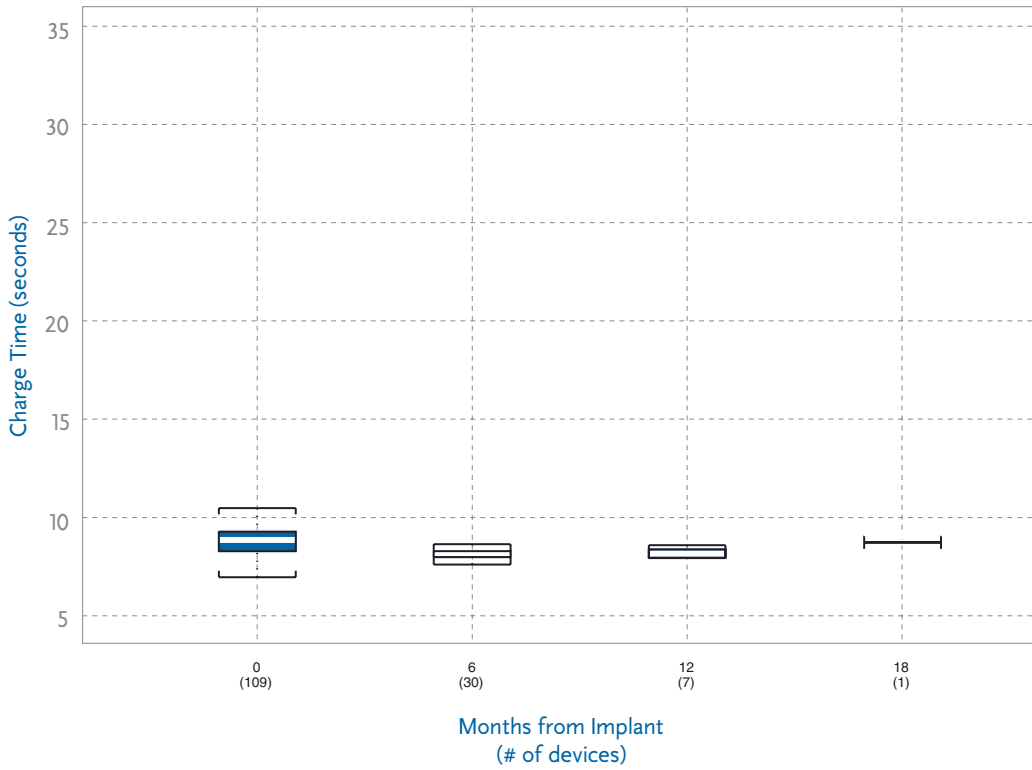


Save-to-Disk files have been collected 24 months post-implant. All observed charge times are less than 9 seconds with a maximum of 8.31 seconds observed at implant.

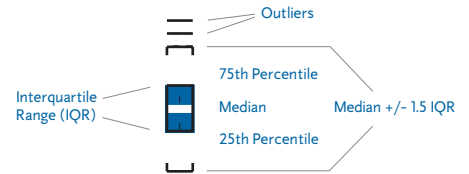
ICD Charge Times

# ICD and CRT-D Charge Time Performance continued

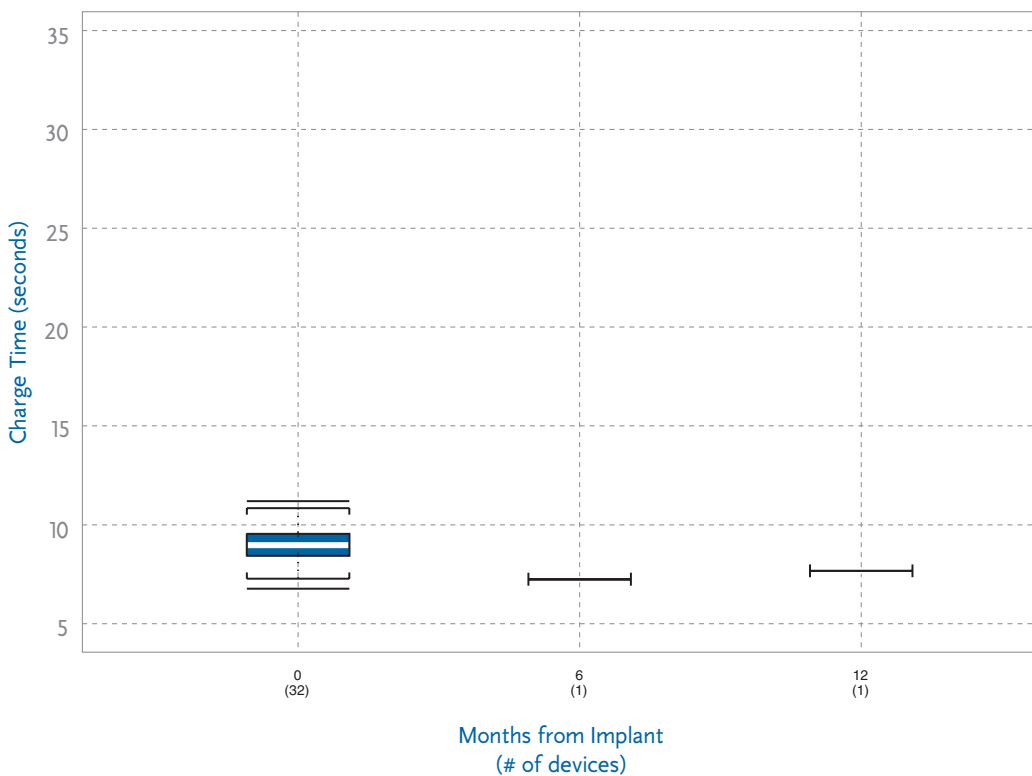
**D154ATG, D154DRG EnTrust Charge Time**



*Save-to-Disk files have been collected 18 months post-implant. All observed charge times are less than 11 seconds with a maximum of 10.85 seconds observed at implant.*



**D154VRC EnTrust Charge Time**



*Save-to-Disk files have been collected 12 months post-implant. All observed charge times are less than 12 seconds with a maximum of 11.19 seconds observed at implant.*

## 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. 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.

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 (January 2007)

**The Sigma Family device performance related to the interconnect wires separation mechanism continues to be within Medtronic's engineering projections.** As of January 31, 2007, 67 devices out of approximately 40,000 devices worldwide (0.16% 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.**

Thirty-four (34) of the 67 devices were returned with information indicating a problem with the patient's pacing system prior to explant. The remaining 33 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 67 devices confirmed as having experienced interconnect wire separation has ranged between 17 and 56 months, with an average of 42 months.

Out of the initial advisory population of 40,000 worldwide, approximately 21,000 remain implanted. Approximately 5,300 of these are in the United States.

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

**7274 Marquis DR**  
**7230 Marquis VR**

**7278 Maximo DR**  
**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, follow-up care should be sought promptly.

### Status Update (January 2007)

**The Marquis Family device performance related to the battery shorting mechanism continues to be within Medtronic's engineering projections.** As of January 31, 2007, 73 Marquis Family devices have been confirmed as having this internal battery shorting mechanism. Forty-three (43) of these devices were returned from the United States. **There have been no confirmed serious injuries or deaths due to this issue.**

Of the 73 returns, 29 have been identified by patients reporting warmth in the ICD pocket, 27 by a regularly scheduled follow-up or during a nondevice related hospital visit, 8 by hand-held magnet test or CareLink™ attempt, 5 by return of bradycardia symptoms, and 4 by the Patient Alert sounding.

Implant duration for the 73 devices ranged between 11 to 47 months, with an average of 32 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, 45% occurred in the last quarter of device life and 31% in the last 10% of device life.

Out of the initial advisory population of 87,000 worldwide, approximately 37,000 remain implanted. Approximately 33,000 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.

## 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) 505-4636.

#### 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.** As of January 31, 2007, 135 out of approximately 180,000 (0.07% incidence) Kappa family devices worldwide have been confirmed as having fractured power supply wires. Out of the initial implant population of 121,000 in the United States, approximately 57,000 remain implanted.

## 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, PIPxxxxxxH or PJJxxxxxxH, 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 Patient Alert feature "ON" without delay.

#### Advisory

Manufacturing error in a small percentage of devices may cause circuit overload when  $AX \geq B$  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  $B \geq AX$  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  $B \geq AX$ .

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

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.** Out of the initial implant population of 10,000 in the United States, approximately 2,900 remain implanted. 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.**

Out of the initial implant population of 17,000 in the United States, approximately 1,700 remain implanted. According to System Longevity Study results, lead survival is estimated to be 66.1% at 8 years, 9 months.



## 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.**

Out of the initial implant population of 97,000 in the United States, approximately 3,100 remain implanted. According to System Longevity Study results, lead survival is 50.6% at 10 years, 9 months.

## 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.**

Out of the initial implant population of 97,000 in the United States, approximately 6,000 remain implanted. The System Longevity Study results show 62.2% lead survival at 15 years, 9 months.

## 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.** Out of the initial implant population of 65,000 in the United States, approximately 5,300 remain implanted. The devices affected by this advisory are nearing the end of their expected longevity.

# Performance Notes

## Ensuring the Accuracy of Battery Longevity Estimates

### Purpose of This Information

This article is intended to help the clinician understand how Medtronic estimates CRT-D, ICD, and IPG device longevity and Medtronic's performance against these estimates.

### Device Longevity and Battery Depletion

The device service life ends when the usable battery capacity is depleted. The time to battery depletion depends on three factors:

- the amount of electrical energy expended in providing therapy to the patient
- the amount of energy consumed by the electronic circuitry to perform the functions of the device (e.g., operating the microprocessor, telemetry, memory, and charging component).
- the energy capacity of the battery

Medtronic has developed a statistical model for device longevity that accounts for each of these factors, and has validated the model with real time clinical performance. During the development of its products, Medtronic engineers characterize device longevity using this model. Testing begins during development and continues after market release to ensure the accuracy of device longevity estimates.

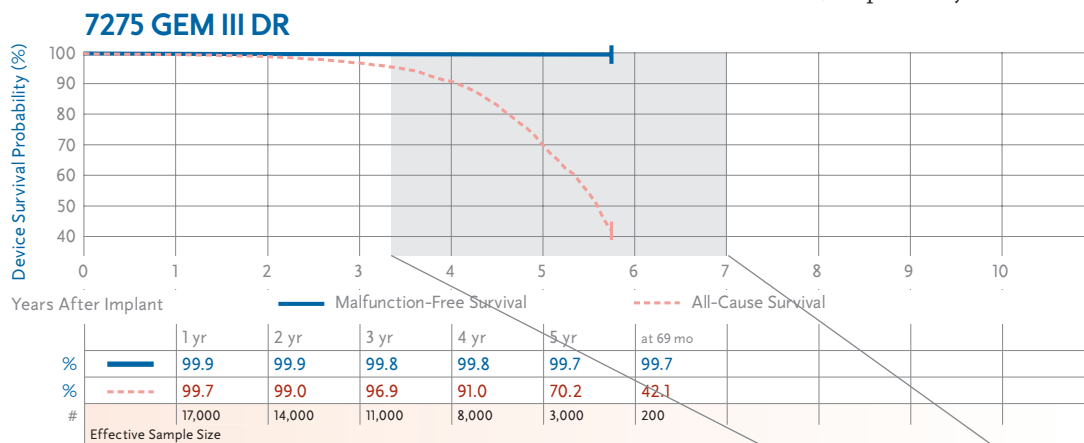
### Using Survival Curves to Assess Longevity

The survival curves in the Product Performance Report represent the composite experience of thousands of devices over a wide range of programming options and patient use conditions. While the curves are useful for understanding the overall performance of a population of devices, they cannot be used to accurately predict the longevity of a specific device in a specific patient. To get a longevity prediction for a specific device, the longevity model must be used. The model is available by contacting Medtronic's Technical Services Department.

Because the survival curves are an aggregate result, the Reference pages in the Product Performance Report include several longevity estimates for a range of use conditions. These longevity estimates, originally published in the device Technical Manual, are mean values calculated for the parameters given. This range of longevity estimates can be compared to the all-cause survival curve to assess the overall clinical performance of a device model against the original longevity estimates.

If most of a device model's population is being used at nominal parameters and conditions, the time at which the all-cause survival curve equals 50% should approximate the midpoint in the range of longevity estimates.

If devices tend to be used at conditions that consume more or less energy than nominal, then the time at which the survival curve equals 50% should tend toward the lower or higher end of the range of longevity estimates, respectively.



This figure shows the range of the estimated longevity values given in the reference chart in relation to the survival curve for the Model 7275 ICD. The range of longevity is representative of a typical range of use values, not the absolute minimum or maximum longevity possible. In this example, the All-Cause survival curve is approaching 50% at approximately the mid-point of the range of longevity values.

Charging Frequency**	Estimated Longevity			
	100% Pacing†	50% Pacing†	15% Pacing†	100% Sensing
Monthly	3.3	3.8	4.3	4.4
Quarterly	4.2	5.0	5.8	6.3
Semiannual	4.5	5.5	6.5	7.0

## 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.<sup>1</sup> 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.<sup>2-4</sup> 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.<sup>5</sup> 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.<sup>6</sup> 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)<sup>7-9</sup> or VVI 40 pacing modes<sup>10</sup>, 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.<sup>11</sup>

### Pacemaker Patients

In pacemaker patients, ventricular pacing has been associated with higher incidence of AT/AF and heart failure hospitalization.<sup>12,13</sup> MVP provides atrial rate support while dramatically reducing ventricular pacing in patients with sinus node dysfunction and transient AV block.<sup>9</sup> 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.<sup>13,14</sup> may lead to endless loop tachycardia,<sup>14,15</sup> 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 pauses. Therefore, careful consideration should be given to 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 pre-storage 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

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

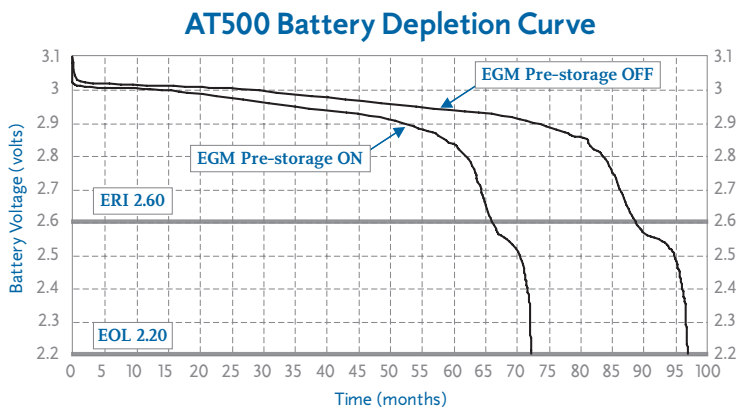
Battery depletion curves at **common parameter settings** are shown in Figure 1, with special focus on device longevity when programming EGM pre-storage ON or OFF.

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.

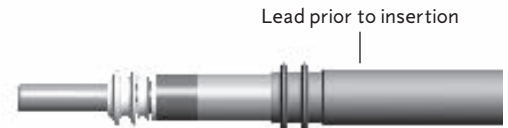
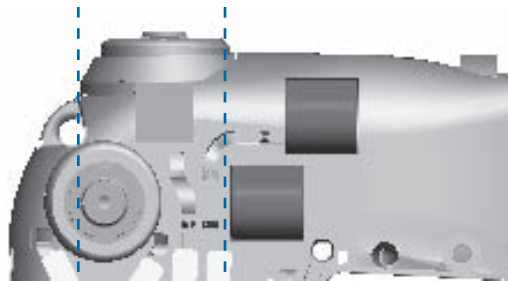
- 1 Insert the torque wrench into the appropriate setscrew. For easier lead insertion, insert the lead closest to the device first.

- 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.

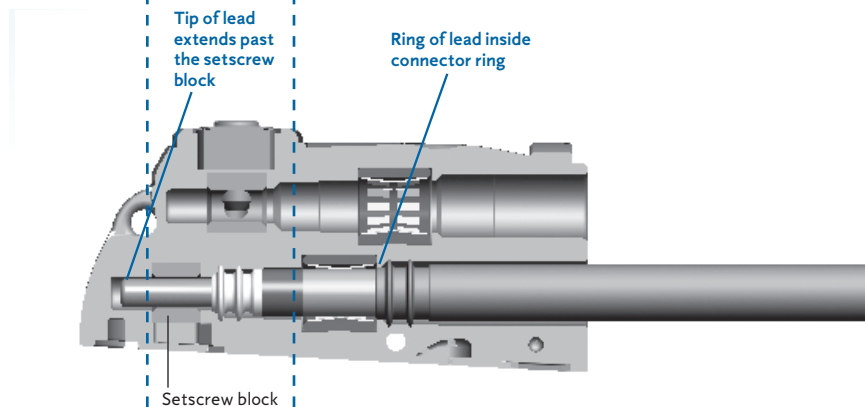
Current publications may provide additional information on implant procedures used by others, e.g., radiographic evaluation of the terminal pin beyond the terminal post.<sup>1</sup>

<sup>1</sup>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.

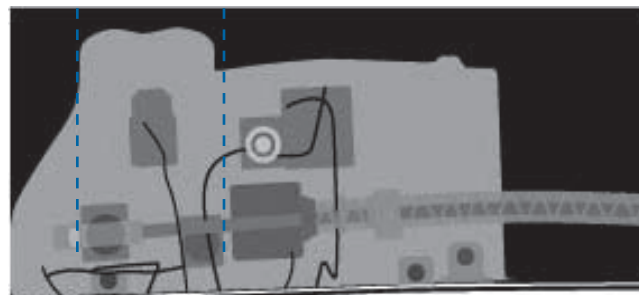
Connector module before lead insertion



Cross-section of connector module after lead fully installed



X-ray image of connector module after lead fully installed



## 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

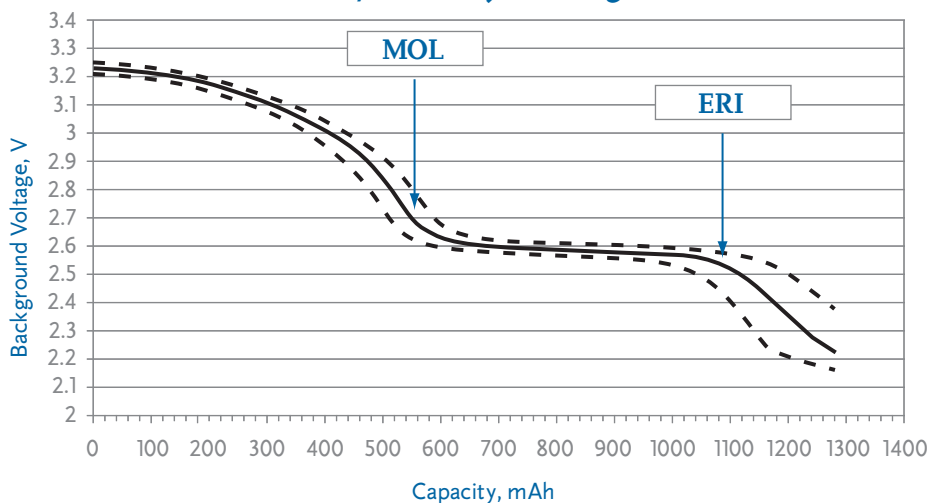
characteristic of the battery function in these devices and should not create a need for additional follow-up or monitoring.

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 Patient Alert 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.<sup>1,2</sup> Ultimately, the decision to replace an implanted lead involves medical judgment.

<sup>1</sup> Hauser RG, Cannom D, Hayes DL, et al. Long-term structural failure of coaxial polyurethane implantable cardioverter defibrillator leads. *PACE*. June 2002;25(6):879-882.

<sup>2</sup> Ellenbogen KA, Wood MA, Shepard RK, et al. Detection and management of an implantable cardioverter defibrillator lead failure: incidence and clinical implications. *J Am Coll Cardiol*. January 1, 2003;41(1):73-80.

## 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 [if 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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*If you are looking for a model number or family that is not included in this report, you may call US Technical Services (see page 2).*

# Mailer Kits Available for Returning Product

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 procedures for returning product vary by geographic location.

Mailer kits (pictured right) with prepaid US postage are available for use within the United States to send CRT, ICD, IPG, 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.



## World Headquarters

Medtronic, Inc.  
710 Medtronic Parkway  
Minneapolis, MN 55432-5604  
USA  
Tel: (763) 514-4000  
Fax: (763) 514-4879  
www.medtronic.com

Medtronic USA, Inc.  
Toll-free: 1 (800) 328-2518  
(24-hour technical support for  
physicians and medical professionals)

## Europe

Medtronic International Trading Sàrl  
Route du Molliau 31  
CH-1131 Tolochenaz  
Switzerland  
Tel: (41 21) 802 7000  
Fax: (41 21) 802 7900  
www.medtronic.com

## Canada

Medtronic of Canada Ltd.  
6733 Kitimat Road  
Mississauga, Ontario L5N 1W3  
Canada  
Tel: (905) 826-6020  
Fax: (905) 826-6620  
Toll-free: 1 (800) 268-5346

## Asia Pacific

Medtronic International, Ltd.  
16/F Manulife Plaza  
The Lee Gardens, 33 Hysan Avenue  
Causeway Bay  
Hong Kong  
Tel: (852) 2891 4456  
Fax: (852) 2891 6830  
enquiryap@medtronic.com  
www.medtronic.com

## Latin America

Medtronic USA, Inc.  
Doral Corporate Center II  
3750 NW 87th Avenue Suite 700  
Miami, FL 33178  
USA  
Tel: (305) 500-9328  
Fax: (786) 709-4244  
www.medtronic.com

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