Implantable Electronic Systems Product Performance Report 2016 First Edition



Letter from St. Jude Medical

As a world leader in the development of state-of-the-art technology for cardiac rhythm management devices, St. Jude Medical continuously strives to partner with physicians in reducing risks and facilitating the best possible patient outcomes. We understand that our products are implanted in people whose health and well-being depend on their performance. From product design through patient follow-up, St. Jude Medical employees are dedicated to product quality and patient safety.

In keeping with this commitment, we publish a Product Performance Report (PPR) semi-annually to ensure that the healthcare community and the patients it serves are informed about the overall performance of our cardiac devices, which include implantable cardiac monitors (ICMs), implantable cardioverter defibrillators (ICDs), implantable pacemakers, and implantable pacing and defibrillation leads. St. Jude Medical recognizes that such performance data must be transparent and consistent. In order to meet these goals we continue our commitment to the reporting methods described in the 2009 AdvaMed document "Industry Guidance for Uniform Reporting of Clinical Performance of Cardiac Rhythm Management Pulse Generators and Leads", which set new standards for lead performance reporting and specifically addressed the reporting of active registry performance data. Determined to provide the highest level of transparency, St. Jude Medical goes beyond the AdvaMed recommendations by identifying the root cause of each ICM, ICD, and pacemaker laboratory-confirmed malfunction and providing subcategories of laboratory-confirmed lead abrasion and fracture malfunctions.

Continuing within this edition of the PPR and consistent with the previously published edition, St. Jude Medical reports on expanded data from actively monitored studies. Since 2007, the PPR has featured pacemaker, ICD, and lead data from the St. Jude Medical Product Longevity and Performance Registry (SCORE). Post-Approval studies are now standard practice for St. Jude Medical, providing a rich source of actively collected and continuously monitored reliability and performance data for cardiac rhythm management products. This PPR also features a product performance data set which includes OPTIMUM, SCORE and three Post-Approval Studies. This combined dataset encompasses more than 62,000 implants from multiple product families, including leads, ICDs and pacemakers, making it the most comprehensive actively monitored product performance dataset in the industry. We are continuing to expand the scope of confirmed product malfunction summaries with worldwide confirmed malfunctions in Durata[™] and Optisure[™] defibrillation lead models and our more recent ICD and pacemaker models, which will further expand to different devices and leads in future additions.

As we continually strive to provide unbiased and reliable information on the performance of our products, St. Jude Medical is pleased to release the first edition of the 2016 Product Performance Report containing the latest performance information on our ICMs, ICDs, pacemakers and lead systems.

Sincerely,

Jeff Fecho Vice President, Global Quality



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Serving Our Mission

Our vision is to transform the treatment of expensive, epidemic diseases. It is our mission to create cost-effective medical technologies that save and improve lives. We carry out this vision and mission by pursuing new treatments, efficiencies and ideas that improve the lives of people affected by disease; keeping the highest ethical standards in all business practices; and continually adapting and responding to the rapidly changing health care environment.

Toward this mission, we maintain a rigorous approach to ensuring the quality of our products. The key elements of this effort include:

- Compliance with U.S. and international quality system standards, such as the U.S. FDA Quality Systems Regulation (21 CFR Part 820) and ISO 13485 (an
 international standard for the Quality Management System for medical devices)
- Thorough evaluation of product design, including extensive design verification and validation, as well as product qualification testing
- Rigorous control of the design and manufacturing processes
- Inspection and qualification of externally supplied components and materials
- Timely analysis of returned products, including extensive malfunction investigation
- Extensive internal auditing
- Post market surveillance
- Continuous improvement programs
- Ensuring the highest ethical standards

We continue to be committed to answering your questions and keeping you informed. If you have any questions or concerns, please contact your St. Jude Medical Representative or St. Jude Medical Technical Services at 1-800-722-3774. Thank you for your input and continued support, allowing St. Jude Medical to positively impact the lives of thousands of patients every year.



What You'll Find in This Report

- Table of Contents
- A summary of the methods St. Jude Medical has used for measuring product performance, including key definitions of terms used in preparing this report
- For each Implantable Cardioverter Defibrillator (ICD), Pacemaker, Implantable Cardiac Monitor (ICM), and Lead model with at least 500 active devices in service, St. Jude Medical provides product performance data, according to industry guidelines, collected through December 31, 2015, including:
 - A table of basic information about each model
 - Survival probability provided in graphical and tabular format
 - For the more recent products, the quantity, rate, and type of product malfunctions are detailed
 - For the more recent lead models, the quantity, rate, and type of customer complaints (acute observations and chronic complications) are detailed
- Summary tables of performance data, organized by product type and model
- For all ICD, pacemaker, ICM, and lead models that meet Actively Monitored Study Data Registry inclusion criteria, St. Jude Medical provides active registry performance data, collected through December 31, 2015, including:
 - A table of basic information about each model
 - Survival probability provided in graphical and tabular format
 - A table of all Qualifying Complications including quantity and rate
 - A table with quantity, rate, and type of product malfunctions
- A Focus on Clinical Performance section which provides product performance data on a variety of unique topics, including:
 - Riata[™] lead performance
 - Durata[™] lead performance including an independent analysis of active registry data by Public Health Research Institute, PHRI
 - The effect of Optim[™] lead insulation on HV lead abrasion
- An updated summary of advisories on all implantable devices since 1999
- A summary of communications to Healthcare Professionals
- An index by product type and model name
- An index of phased-out models by product type and model name



What's New in This Report

Update on Riata[™] Lead Performance

In order to provide our physician customers and patients the most up-to-date information, St. Jude Medical has included an update on Riata lead performance in the Focus on Clinical Performance section (see pages 277-281). This section provides the latest Riata externalized conductor rates from the St. Jude Medical Riata Lead Evaluation Study, passive complaint and returns handling, and describes in considerable detail the rates of other types of Riata insulation abrasion failure mechanisms that St. Jude Medical has identified from returns analysis.

Update on Durata[™] Lead Performance

Durata lead performance continues to meet expectations by all measures. Our confidence in the Durata lead performance is based on combined data from three prospective, actively monitored registries that include approximately 11,000 Optim[™] insulated defibrillation leads. Additionally, this section provides details on the very low rate of abrasion failures that have been identified on Optim insulated St. Jude Medical[™] defibrillation leads. A statistical analysis of this registry data performed by PHRI, an independent, third-party, is presented in this special Focus on Clinical Performance section (see pages 282-286).

Update on Optim[™] Lead Insulation

St. Jude Medical's Optim lead insulation combines the best characteristics of two established lead insulation materials, polyurethane and silicone. This novel insulation technology imparts lubricity, strength, and abrasion resistance while still maintaining flexibility and biostability. This product performance report provides an up-to-date statistical assessment of the benefits of Optim lead insulation on St. Jude Medical tachycardia leads (see pages 287-288).



Worldwide Laboratory Analysis

In addition to the previously added worldwide laboratory analysis results of returned Durata[™] leads, this Product Performance Report includes worldwide laboratory analysis results for Optisure[™] defibrillation leads and various low voltage leads, CRT leads, pacemakers and defibrillators categorized into the malfunction types as outlined on pages 7-8 and 10-12. These worldwide malfunction summaries can be found following the U.S. malfunction summaries in their respective sections. St. Jude Medical is dedicated to full transparency, and will continue to incorporate worldwide laboratory analysis results of additional models in future publications of this report.

Customer Reported Performance Data

Product performance data derived from customer-initiated complaints and returned products is referred to as Customer Reported Performance Data. While St. Jude Medical strongly encourages the submission of any relevant complaints and product returns, this data is not proactively solicited or regularly monitored like data from the Post-Approval studies. Underreporting of events within customer reported performance data is recognized throughout our industry. St. Jude Medical is constantly improving the accuracy and utility of the data within this Product Performance Report.

Summary Information

The Customer Reported Performance Data page for each model or model group includes a table of model-specific information. Several terms from this table that are relevant to performance data calculations are defined below:

Registered U.S. Implants - The total number of U.S. implanted devices for which patient and device information has been provided to St. Jude Medical. This total includes devices which have been explanted or are otherwise out of service.

Estimated Active U.S. Implants - The total number of U.S. registered implants that have not been identified to St. Jude Medical as explanted or otherwise out of service. An adjustment is made to account for the underreporting of patient mortality. St. Jude Medical performed an analysis of the data gathered from multiple clinical studies including some St. Jude Medical sponsored studies to determine the mortality rate within the pacemaker and ICD patient population and has factored this into the estimation of the number of active U.S. implants.



Estimated Longevity - The estimated number of years in which a device is expected to reach its Elective Replacement Indicator (ERI), as stated in the product literature. The estimate is based on battery life approximations and empirical battery performance distributions. It is strongly affected by many factors such as programmed parameters, percentage of time paced, internal impedance, etc. For example, the 9.2 year estimated longevity of an Accent[™] DR model PM2110 pacemaker is based on the mean longevity (or 50%) value in the product literature corresponding to pacing at 60 ppm, 2.5V dual-chamber output at 0.4 ms pulse width, 500 ohm lead impedance, 100% DDD pacing, and Stored EGMs On. Actual performance can vary considerably, depending on the actual programmed settings and operations.

Normal Battery Depletion - The condition where a returned device met its electrical specification and reached its elective replacement indicator voltage (1) with an implant duration meeting or exceeding the nominal predicted longevity at default shipped settings, or (2) with an implant duration exceeding 75% of its estimated longevity, based on longevity calculations using information from device usage and the actual device settings. The quantity of normal battery depletions reported is determined directly from laboratory analysis and does not represent any adjustment to account for underreporting.

Survival Calculation General Methods

For ICDs, pacemakers, ICMs, and leads, we compile cumulative survival data based on the actuarial (or life-table) method of survival analysis, consistent with ISO 5841-2:2014(E) "Reporting of Clinical Performance of Populations of Pulse Generators and Leads" and the 2009 AdvaMed document "Industry Guidance for Uniform Reporting of Clinical Performance of Cardiac Rhythm Management Pulse Generators and Leads". Product performance is plotted over a maximum range of 20 years, with a minimum of 500 registered implants required for inclusion in the report, and a minimum sample size for each reported time period of 200 devices. "Survival" refers to the proper function of the device, not the survival of the patient, and is intended to illustrate the calculated probability of device survival at a given point in time. A survival probability of 99% at five years, for example, indicates that at five years after implant, the system has a 1% risk of incurring a malfunction and/or normal battery depletion. All domestically implanted devices within each model family are included in the calculations.

With the large size of the U.S. data pool, and the same products are generally used both in the U.S. and internationally, we consider the data in this report to accurately represent each device's performance, regardless of where in the world it was implanted.

The ISO 5841-2:2014(E) "Reporting of Clinical Performance of Populations of Pulse Generators and Leads" was revised in August 2014. The revision clarified survivor definitions and reporting methods, further standardizing product performance reporting across the cardiac rhythm management implantable device and lead manufacturers. In aligning with the ISO standard, certain reported chronic complications which remained in service were not included in survival probability



calculations in prior PPR revisions but are now provided in the tabular display of chronic complications. However, this revision of the ISO standard specifically excludes lead malfunctions confirmed through returned product analysis which were received with no accompanying complaint from the survival probability calculations. To provide the highest level of transparency, St. Jude Medical continues to include malfunctions not associated with a complaint in the survival probability calculations and in the tabular display of laboratory-confirmed malfunctions.

ICD, Pacemaker, and ICM Survival Analysis

The data used for the analysis of ICDs, pacemakers, and ICMs includes up-to-date device registration information and the laboratory analysis of all domestically implanted devices returned to St. Jude Medical. The analysis measures device performance to specification, and does not reflect medical complications, such as infection, erosion, muscle stimulation or inhibition, or units implanted for fewer than 24 hours.

In accordance with ISO 5841-2:2014(E), the survival calculations for ICDs, pacemakers, and ICMs are adjusted to reduce the bias caused by underreporting of malfunctions and normal battery depletions. St. Jude Medical compared the malfunctions and normal battery depletion rates calculated from our actively monitored populations to the rates calculated from our passively monitored populations and have adjusted the survival calculations accordingly.

Survival data are presented in a single table and graph. The survival data is separated into "Including Normal Battery Depletion" and "Excluding Normal Battery Depletion" categories. For the purposes of this data, non-returned devices removed from service for battery depletion with no associated complaint are considered as normal battery depletions. The "Including Normal Battery Depletion" data reflects the frequency of device removal due to normal battery depletion and malfunction of any type. The "Excluding Normal Battery Depletion" category reflects the frequency of device removal due to malfunctions only.

ICD, Pacemaker, and ICM Malfunction Reporting

The quantity and rate of malfunctions recorded for each ICD, pacemaker, and ICM model are presented in a tabular format on both the Customer Reported Performance Data and Actively Monitored Study Data pages. The root cause of all laboratory-confirmed malfunctions is classified into one of eight categories: Electrical Component, Electrical Interconnect, Battery, High Voltage Capacitor (ICDs and CRT-Ds only), Software/Firmware, Mechanical, Possible Early Battery Depletion, or Other. Note that in the rare cases where multiple malfunctions are identified in a single device, a single malfunction category will be selected with priority given in the order of the list above. Consistent with previous performance reports, ICD and Pacemaker malfunctions are further classified as with or without compromised therapy.



Malfunction Definitions

Malfunction - Having characteristics that are outside the performance limits established by the manufacturer while implanted and in service, as confirmed by laboratory analysis, except changes to characteristics due to normal battery depletion or induced malfunction. Device damage caused after or during explant is not considered a malfunction. Note that lead-related malfunctions of a pacemaker or ICD system are assigned to the lead.

Malfunction with Compromised Therapy - The condition when a device is found to have "malfunctioned," as defined above, in a manner that compromised pacing or defibrillation therapy (including complete loss or partial degradation) while implanted and in service. Therapy is considered to have been compromised if no therapy is available or critical patient-protective pacing or defibrillation therapy is not available.

A malfunction with compromised therapy does not imply that a patient has actually experienced a serious complication or death as a result of the malfunction although it does imply that the potential for a serious complication or death did exist during the period of the malfunction.

Malfunction without Compromised Therapy - The condition when a device is found to have "malfunctioned," as defined above, in a manner that did not compromise pacing or defibrillation therapy while implanted and in service, as confirmed by laboratory analysis. Therapy is not compromised as long as the critical patient-protective pacing and defibrillation therapies are available. Changes in device settings that occur as intended by the design (for example, reversion to a designed Safe Mode) that do not result in loss of critical patient-protective therapies but are the reported reasons for explant are categorized as a Malfunction without Compromised Therapy.



Malfunction Root Cause Category Definitions

Electrical Component - Findings linked to electrical components such as integrated circuits, resistors, low voltage capacitors, diodes, etc. Does not include high voltage capacitors or batteries as those are separately listed.

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

Battery - Findings linked to the battery and its components.

High Voltage Capacitor - Findings linked to the high voltage capacitor and its components.

Software/Firmware - Findings linked to software or firmware function.

Mechanical - Findings linked to mechanical components such as headers, setscrews, fluid seals, internal supports, the hermetic case, etc.

Possible Early Battery Depletion - Findings where the actual reported implant time is less than 75% of the expected longevity calculated using the available device setting information and no root cause was able to be identified. Additionally, in the absence of a specific root cause finding, returned devices with insufficient device setting information to determine conclusively if battery depletion was normal or premature are conservatively classified as Possible Early Battery Depletion malfunctions.

Other - Findings linked to other components such as packaging and accessories, and findings where analysis is inconclusive, as well as other complications not included above.

Leads Survival Analysis

Implanted cardiac leads are subjected to constant, complex flexural and torsional forces, interactions with other leads and/or the pulse generator device, plus other forces associated with cardiac contractions, patient physical activity, posture, and anatomy. Therefore, the functional lifetime of cardiac leads is limited and cannot be predicted with a high degree of confidence. Understanding these limitations, survival estimates are provided for all leads included in this report.

The data used for the survival analysis of leads includes up-to-date device registration information, chronic complications (>30 days) reported by the field, and the laboratory analysis of all domestically implanted leads returned to St. Jude Medical. Complaints reported within 30 days of implant (acute observations), are considered to be related to factors other than lead malfunction, such as patient specific characteristics or implant technique, and are therefore excluded from the survival calculations, consistent with industry practice. If there is laboratory data that determines the lead to have exhibited a malfunction, and the lead is known to



have been implanted for more than 24 hours, the lead is counted as a non-survivor. If a lead is the subject of a complaint (chronic complication) report, is no longer in service as a result of the complication, and was implanted for more than 30 days, then the lead is counted as a non-survivor. These criteria are also followed for partial lead returns. This method for non-returned complications is used to ensure a conservative failure estimate for lead performance. Chronic complications commonly associated with non-returned leads and partial lead returns include, but are not limited to, reports of sensing, pacing, and capture anomalies, perforation, and dislodgement.

Leads Observation and Complication Reporting

Reporting for recently released lead models provides detail on specific chronic complications (more than 30 days implant), as well as acute observations (post implant to 30 days), that are reported to St. Jude Medical as complaints. In aligning with the ISO 5841-2:2014 standard, some chronic complications previously not included in calculations for survival probability are now provided in the tabular display. Each complication and observation is categorized into one of the eleven categories below, irrespective of whether the lead has been returned for analysis. The quantity and rate of each complication and observation type is provided in a tabular format on the Customer Reported Performance Data page. Note that in the rare cases where multiple complaints are identified for a single device, a single category will be selected with priority given in the order of the list below.

Cardiac Perforation: Penetration of the lead tip through the myocardium, clinically suspected and confirmed by chest x-ray, fluoroscopy, echocardiogram, or visual observation, which results in clinical symptoms, typically degradation of pacing/ICD lead electrical performance (high thresholds), chest pain, or tamponade.

Conductor Fracture: A mechanical break within a lead conductor (includes connectors, coils, cables and/or electrodes) observed visually, electrically, or radiographically.

Lead Dislodgement: Radiographic, electrical or electrocardiographic evidence of electrode displacement from the original implant site or electrode displacement that adversely affects pacing and/or lead performance.

Failure to Capture: Intermittent or complete failure to achieve cardiac stimulation (atrial or ventricular) at programmed output delivered outside of the cardiac refractory period. A sudden and significant increase in the pacing threshold value (elevated thresholds compared to previous measured value) at which 2:1 safety margin can no longer be achieved.

Oversensing: Misinterpretation of cardiac or non-cardiac events as cardiac depolarization, e.g. T-waves, skeletal muscle potentials, and extracardiac electromagnetic interference (EMI).



Failure to Sense (undersensing): Intermittent or complete loss of sensing or failure to detect intended intrinsic cardiac signals (atrial or ventricular) during non-refractory periods at programmed sensitivity settings.

Insulation Breach: A disruption or break in lead insulation observed visually, electrically, or radiographically.

Abnormal Pacing Impedance: Pacing impedance is typically considered abnormal if a measurement is < 200 Ω or > 2000 Ω (based on lead model and measurement range of the device).

Abnormal Defibrillation Impedance: Defibrillation impedance is typically considered abnormal if a measurement is $< 20 \Omega$ or $> 200 \Omega$ (based on lead model and measurement range of the device).

Extracardiac Stimulation: Clinical observation of inadvertent nerve/muscle stimulation other than cardiac muscle.

Other: Specific proprietary lead mechanical attributes such as lead incorporated sensors, connectors or seal rings which affect a lead's ability to perform as designed or remain in service, as well as other complications not included above.

Leads Malfunction Reporting

As a supplement to the survival estimates, the categorization of lead malfunctions emphasizes the root cause of malfunction rather than a functional longevity prediction. In accordance with AdvaMed guidelines, laboratory analysis results of returned leads are categorized into one of the following five categories of malfunctions. The quantity and rate of each malfunction type is provided in a tabular format on the Customer Reported Performance Data and the Actively Monitored Study Data pages. Note that in the rare cases where multiple malfunctions are identified in a single lead, a single malfunction category will be selected with priority given in the order of the list below. The definition for each malfunction type is provided below:

Conductor Fracture: Conductor break with complete or intermittent loss of continuity that could interrupt current flow. This type of malfunction includes any conductor fracture such as those associated with flex-fatigue or clavicular crush damage.

In an effort to further increase customer understanding of St. Jude Medical[™] defibrillation and left-heart lead performance, subcategories of conductor fracture are also provided. The definitions of these subcategories are provided below:

Clavicular Crush: Conductor fracture due to strong compression and bending at the approximation of the first rib and clavicle.



In the Pocket: Conductor fracture not within the vascular or cardiac systems, typically within the subcutaneous pocket or associated with the suture sleeve, excluding the mechanism of clavicular crush.

Intravascular: Conductor fracture within the vascular or cardiac systems.

Insulation Breach: Any lead insulation breach, such as: 1) proximal abrasion associated with lead-to-lead or lead-to-can contact in the pocket, 2) mid-lead insulation damage caused by clavicular crush or insulation wear in the region of vein insertion, 3) distal abrasion due to lead-to-lead interactions or contact with anatomic structures, and 4) externalized conductors in the distal region.

Subcategories of insulation breach for defibrillation and left-heart leads are also provided. The definitions of these subcategories are provided below:

Lead-to-Can Contact: Direct contact between the lead and the can (i.e. pacemaker, ICD, or CRT-D) combined with repetitive skeletal movement caused abrasion that resulted in a full thickness outer insulation breach.

Lead-to-Lead Contact: Repetitive contact between two leads caused abrasion that resulted in a full thickness outer insulation breach.

Clavicular Crush: Damage due to strong compression between the first rib and clavicle resulted in a full thickness outer insulation breach.

Externalized Conductors: Abrasion resulted in an outer insulation breach within the vascular or cardiac systems allowing the normally contained conductors to become visible outside the lead body. Externalized conductors were described in our December 2010 and November 2011 communications regarding insulation abrasion failures on silicone Riata[™] and Riata[™] ST lead families (summary on pages 305-307) and in our April 2012 communication regarding insulation abrasion failures on QuickSite[™] and QuickFlex[™] lead families. Additional information regarding externalized conductors on Riata[™] and Riata[™] ST leads can be found at www.RiataCommunication.com.

Other (Insulation Breach): Insulation breaches that resulted from a failure mode not represented by the other four categories. This includes a variety of failure modes, such as damage at the suture sleeve and contact with patient anatomy. Also includes insulation breaches for which analysis was unable to isolate a specific cause.

Crimps, Welds and Bonds: Any interruption in the conductor or lead body associated with a point of connection.

Other: Includes specific proprietary lead mechanical attributes, such as lead incorporated sensors, connectors, and seal rings, as well as other analysis results not included in the alternate categories.



Extrinsic Factors: The lead was implanted greater than 30 days, removed from service with an associated complaint and returned for analysis, however analysis was inconclusive because (1) only portions of the lead were available, or (2) the returned lead was damaged by the explantation process, or (3) lab analysis could not determine an out of specification condition (typically with complaints such as dislodgements, perforations, or failure to capture).

Actively Monitored Study Data

Summary Information

Since 2007 the Product Performance Report has included data from the St. Jude Medical Product Longevity and Performance Registry (SCORE). This comprehensive study provided monitored performance data on pacemakers, ICDs, and leads. With product-specific, post-market registries being standard practice, St. Jude Medical continues to complement the SCORE registry with data from the SJ4 Post-Approval Study, the QuickFlex[™] µ Post-Approval Study, the Quadripolar CRT-D Post-Approval Study, and the OPTIMUM registry. These actively monitored study data now represent >62,000 implanted devices, and continues to be a very powerful source of product performance information which complements the data collected from Customer Reported Performance Data. Actively monitored study data is not susceptible to underreporting and provides the most accurate understanding of product performance. The many sites participating in these actively monitored studies are individually providing data on the performance of St. Jude Medical cardiac rhythm management products using common definitions and criteria. In addition, each of these sites is regularly audited by St. Jude Medical personnel to ensure comprehensive reporting.



	Study Description	Study Initiated	# Sites	# Patients	Product Types/Families
SCORE (St. Jude Medical Product Longevity and Performance Registry)	Prospective, actively monitored, multicenter registry to evaluate the long-term performance of St. Jude Medical market-released cardiac rhythm management products.	September 2007	80	11,247	Pacemakers, ICDs, CRT-Ds, Leads (all types)
SJ4 Post-Approval Study	Prospective, actively monitored, multicenter study to evaluate the acute and chronic performance of the St. Jude Medical SJ4/DF4 connector and SJ4/DF4 defibrillation leads.	June 2009	58	1,701	ICDs, CRT-Ds, Leads (all types)
QuickFlex [™] µ Post-Approval Study	Prospective, actively monitored, multicenter study to evaluate the acute and chronic performance of the St. Jude Medical QuickFlex [™] µ 1258T left ventricular leads.	September 2010	76	1,930	CRT-Ds, Leads (all types)
Quadripolar CRT-D Post-Approval Study	Prospective, actively monitored, multicenter study to evaluate the acute and chronic performance of the St. Jude Medical Quadripolar CRT-D system.	February 2012	71	1,970	Unify Quadra [™] and Quadra Assura™ CRT-Ds, Leads (all types)
Optimum Registry	Prospective, actively monitored, multicenter registry to evaluate the long-term performance of market- released St. Jude Medical leads with Optim [™] insulation material.	August 2006	241	14,120	Leads (any model with Optim [™] Insulation)



The models included in the actively monitored dataset are listed below:

ICDs

Current[™] + DR (Model CD2211-36) Current[™] + DR (Model CD2211-36Q) Current[™] + VR (Model CD1211-36Q) Current[™] DR RF (Model 2207-36) Current[™] VR RF (Model 1207-36) Fortify[™] DR (Model CD2231-40) Fortify[™] DR (Model CD2231-40Q) Fortify[™] VR (Model CD1231-40Q) Promote[™] + CRT-D (Model CD3211-36) Promote[™] + CRT-D (Model CD3211-36Q) Promote[™] RF CRT-D (Model 3207-36) Quadra Assura[™] CRT-D (Model CD3265-40Q) Quadra Assura[™] CRT-D (Model CD3365-40Q) Unify Assura[™] CRT-D (Model CD3357-40Q)* Unify Quadra[™] CRT-D (Model CD3249-40) Unify Quadra[™] CRT-D (Model CD3249-40Q) Unify[™] CRT-D (Model CD3231-40) Unify[™] CRT-D (Model CD3231-40Q)

Defibrillation Leads

Durata[™] (Model 7122) Durata[™] (Models 7120/7121) Durata[™] DF4 (Model 7122Q) Durata[™] DF4 (Models 7120Q/7121Q) Durata[™] DF4 (Models 7170Q/7171Q) Riata[™] (Models 1580/1581) Riata[™] ST (Models 7000/7001) Riata[™] ST Optim[™] (Models 7020/7021) Riata[™] ST Optim[™] (Models 7070/7071)

CRT Leads

Quartet[™] (Model 1458Q) QuickFlex[™] (Model 1156T) QuickFlex[™] XL (Model 1158T) QuickFlex[™] µ (Model 1258T) QuickSite[™] (Model 1056T) QuickSite[™] XL (Model 1058T)

Pacemakers

Accent[™] DR (Model PM2110) Accent[™] DR RF (Model PM2210) Accent[™] SR RF (Model PM1210) Anthem[™] RF CRT-P (Model PM3210) Identity ADx[™] XL DR (Model 5386) Victory[™] XL DR (Model 5816) Zephyr[™] DR (Model 5820) Zephyr[™] XL DR (Model 5826) Zephyr[™] XL SR (Model 5626)

Pacing Leads

IsoFlex[™] Optim[™] (Model 1944) IsoFlex[™] Optim[™] (Model 1948) IsoFlex[™] S (Model 1646) OptiSense[™] (Model 1699) OptiSense[™] (Model 1699) Tendril[™] (Model 1782) Tendril[™] (Model 1788) Tendril[™] SDX (Model 1388) Tendril[™] SDX (Model 1488) Tendril[™] ST (Model 1688) Tendril[™] ST Optim[™] (Model 1882) Tendril[™] ST Optim[™] (Model 1888)

Qualifying Complications

When abnormal performance is suspected of an actively monitored study device, the related clinical event and any resulting clinical action is reported to St. Jude Medical. A Qualifying Complication is defined to have occurred if the report identifies one of the following Clinical Events that resulted in one of the following Clinical Actions. Any Clinical Event without a related Clinical Action is not considered a Qualifying Complication.

Qualifying Clinical Events

Qualifying Clinical Action

Abnormal Defibrillation Impedance Abnormal Pacing Impedance Cardiac Perforation Conductor Fracture Extracardiac Stimulation Failure to Capture Failure to Capture Failure to Sense Inappropriate Shock Insulation Breach Lead Dislodgement Loss of Telemetry Oversensing Pericardial Effusion Premature Battery Depletion Skin Erosion Generator Pacing Mode Changed Lead Electrically Abandoned/Capped Lead/Generator Explanted Lead/Generator Replaced Lead Polarity Changed Lead Surgically Abandoned/Capped Lead Surgically Repositioned



Survival Calculation Methods

Survival calculations for actively monitored studies are made in a manner consistent with the ISO 5841-2:2014(E) method used for Customer Reported Performance Data. A minimum of 100 devices are required to have been enrolled, with the latest interval to be reported having a minimum of 50 devices which have been followed for at least six months. Any device with a Qualifying Complication is defined as a non-survivor. Consistent with industry practice, Qualifying Complications for leads are included in the survival calculations for events with an implant duration greater than 30 days. For pacemakers and ICDs, Qualifying Complications are included in the survival calculations for events with an implant duration more than 24 hours. Medical complications unrelated to device performance are not considered as Qualified Complications. Devices included in the actively monitored studies are excluded from the Customer Reported Performance Data. Certain devices and leads, including any which transferred from Customer Reported Performance Data into Actively Monitored Study Data are subsequently excluded from the Customer Reported Performance Data and subject to these Survival Calculation methods.

Malfunction Reporting

The Actively Monitored Study Data page contains a table of all device malfunctions. The type, quantity, and rate of all laboratory-confirmed malfunctions are listed using the same categories reported in Customer Reported Performance Data. The malfunction data is not utilized in the actively monitored study survival calculations, but does provide important supplementary information about product performance and reliability.



Medical Advisory Board Review

St. Jude Medical has an established and independent Medical Advisory Board (MAB) focused on cardiac rhythm management systems, including pulse generators and leads. One of the important tasks assigned to the MAB is the review of the performance data contained in this report prior to its release and publication on a semi-annual basis. MAB members and their location of practice include:

Dr. Anne Curtis, Buffalo, New York	Dr. Thomas Mattioni, Paradise Valley, Arizona
Dr. Roger Freedman, Salt Lake City, Utah	Dr. Raymond Schaerf, Burbank, California
Dr. Christoph Geller, Bad Berka, Germany	Dr. Bruce Wilkoff, Cleveland, Ohio

Returning Devices to St. Jude Medical

To maintain the continued accuracy of our performance reporting, St. Jude Medical strongly encourages physicians to notify our Patient Records department (888-SJM-2763) each time a device is removed from service for any reason. Additionally, all explanted products are requested to be returned to St. Jude Medical for laboratory evaluation whether or not a malfunction is suspected. To facilitate the return of explanted devices, St. Jude Medical offers a no-cost Returned Products Kit comprised of a postage paid explant box with a shipping address label, a removed device information form, a biohazard bag, and biohazard labels to seal the explant box. This kit, #N0004, can be ordered free of charge by contacting St. Jude Medical Customer Service (888-SJM-2763).

Contact Us

The St. Jude Medical team is always ready to respond to questions, comments or suggestions as well as receive product performance feedback. You can reach us by phone at 888-SJM-2763, on the web at www.SJMprofessional.com, or by contacting your local St. Jude Medical representative.



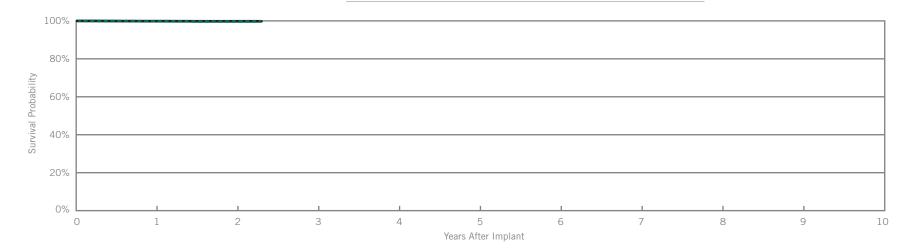
CARDIAC RESYNCHRONIZATION THERAPY (CRT) DEVICES

CRT ICDs



Quadra Assura[™] CRT-D

Model CD3365-40Q*	0		w/ Co	functions mpromised herapy	w/o Co	functions mpromised herapy
US Regulatory Approval	June 2013		Qty	Rate	Qty	Rate
Registered US Implants	28,951	Electrical Component	2	<0.01%	3	0.01%
Estimated Active US Implants	25,343	Electrical Interconnect	3	0.01%	0	0.00%
Estimated Longevity	(see table on page 46)	Battery	0	0.00%	1	<0.01%
Normal Battery Depletion	5	High Voltage Capacitor	0	0.00%	0	0.00%
Max. Delivered Energy	40 joules	Software/Firmware	0	0.00%	1	<0.01%
Number of US Advisories	None	Mechanical	0	0.00%	Qty 3 0 1	0.01%
		Possible Early Battery Depletion	0	0.00%		0.00%
		Other	3	0.01%	0	0.00%
		Total	8	0.03%	8	0.03%



Including Normal Battery Depletion

Year	1	2	at 28 months				
Survival Probability	99.81%	99.70%	99.70%				
± 1 standard error	0.03%	0.05%	0.05%				
Sample Size	20,920	7,110	230				

Year	1	2	at 28 months				
Survival Probability	99.85%	99.80%	99.80%				
± 1 standard error	0.03%	0.04%	0.04%				

Actively Monitored Study Data

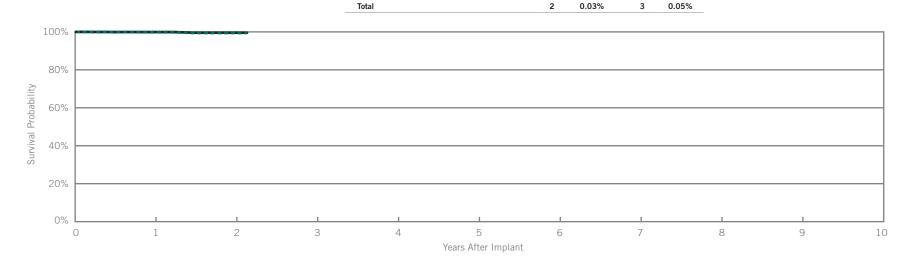
Quadra Assura[™] CRT-D

uadra Assura CRT- odel CD3365-40Q*	-D						Malf w/ Cor Th	unctions npromised nerapy	w/o Coi	unctions npromise erapy
JS Regulatory Approval	June 2013	Qualifying Comp	lications				Qty	Rate	Qty	Rate
Number of Devices Enrolled in Study	163	None Reported				Electrical Component	0	0.00%	0	0.00%
Active Devices Enrolled in Study	133					Electrical Interconnect	0	0.00%	0	0.00
Cumulative Months of Follow-up	3,422					Battery	0	0.00%	0	0.00
stimated Longevity	(see table on page 46)					High Voltage Capacitor	0	0.00%	0	0.00
lax. Delivered Energy	40 joules					Software/Firmware	0	0.00%	0	0.00
						Mechanical	0	0.00%	0	0.00
						Possible Early Battery Depletion	0	0.00%	0	0.00
						Other	0	0.00%	0	0.00
						Total	0	0.00%	0	0.00
60% 40%										
20%										
0%	I	I		I	I	I				
0 1	2	3	4	5 Years After Implan	6 t	7 8		9	1	.0

Year	1	2	at 26 months			
Survival Probability	100.00%	100.00%	100.00%			
± 1 standard error	0.00%	0.00%	0.00%			
Sample Size	150	120	80			

Quadra Assura[™] CRT-D

Model CD3365-40C*			w/ Co	functions mpromised herapy	w/o Co	unctions mpromised nerapy
US Regulatory Approval	June 2013		Qty	Rate	Qty	Rate
Registered US Implants	5,757	Electrical Component	0	0.00%	1	0.02%
Estimated Active US Implants	5,025	Electrical Interconnect	1	0.02%	0	0.00%
Estimated Longevity	(see table on page 46)	Battery	0	0.00%	0	0.00%
Normal Battery Depletion	2	High Voltage Capacitor	0	0.00%	0	0.00%
Max. Delivered Energy	40 joules	Software/Firmware	0	0.00%	0	0.00%
Number of US Advisories	None	· · · · · · · · · · · · · · · · · · ·		0.00%	0	0.00%
		Possible Early Battery Depletion	0	0.00%	1	0.02%
		Other	1	0.02%	1	0.02%



Including Normal Battery Depletion

Year	1	2	at 26 months				
Survival Probability	99.78%	99.43%	99.43%				
± 1 standard error	0.07%	0.16%	0.16%				
Sample Size	4,220	1,510	240				

Year	1	2	at 26 months				
Survival Probability	99.91%	99.57%	99.57%				
± 1 standard error	0.04%	0.15%	0.15%				



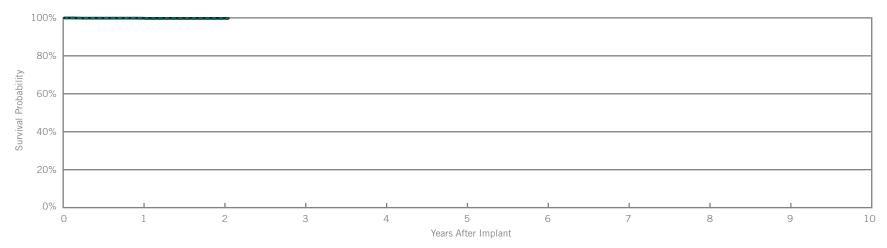
Unify Assura[™] CRT-D Model CD3357-400*

US Regulatory Approval	June 2013	
Registered US Implants	5,790	Electrical Com
Estimated Active US Implants	5,046	Electrical Interd
Estimated Longevity	(see table on page 46)	Battery
Normal Battery Depletion	3	High Voltage C
Max. Delivered Energy	40 joules	Software/Firmw
Number of US Advisories	None	Mechanical

		w/ Compromised Therapy		mpromised herapy
	Qty	Rate	Qty	Rate
Electrical Component	0	0.00%	0	0.00%
Electrical Interconnect	2	0.03%	0	0.00%
Battery	0	0.00%	0	0.00%
High Voltage Capacitor	1	0.02%	0	0.00%
Software/Firmware	0	0.00%	0	0.00%
Mechanical	0	0.00%	1	0.02%
Possible Early Battery Depletion	0	0.00%	0	0.00%
Other	0	0.00%	0	0.00%
Total	3	0.05%	1	0.02%

Malfunctions

Malfunctions



Including Normal Battery Depletion

Year	1	2	at 25 months	
Survival Probability	99.70%	99.61%	99.61%	
± 1 standard error	0.07%	0.11%	0.11%	
Sample Size	4,030	1,280	280	

Year	1	2	at 25 months				
Survival Probability	99.86%	99.77%	99.77%				
± 1 standard error	0.05%	0.08%	0.08%				

Actively Monitored Study Data

Unify Assura[™] CRT-D

lel CD3357-40Q*)	Qualifying Complications			Malfunctions w/ Compromised Therapy		Malfunctions w/o Compromised Therapy			
Regulatory Approval	June 2013	Qualifying Com	plications				Qty	Rate	Qty	Rate
Imber of Devices Enrolled in Study	101	None Reported				Electrical Component	0	0.00%	0	0.00%
tive Devices Enrolled in Study	93					Electrical Interconnect	0	0.00%	0	0.00
imulative Months of Follow-up	1,088					Battery	0	0.00%	0	0.00
timated Longevity	(see table on page 46)					High Voltage Capacitor	0	0.00%	0	0.00
ax. Delivered Energy	40 joules					Software/Firmware	0	0.00%	0	0.00
						Mechanical	0	0.00%	0	0.00
						Possible Early Battery Depletion	0	0.00%	0	0.00
						Other	0	0.00%	0	0.00
						Total	0	0.00%	0	0.00
80%										
80%										-
60%										-
80%	I 2		<u> </u>	I5	I6	7 8		1 9		

Year	at 11 months					
Survival Probability	100.00%					
± 1 standard error	0.00%					
Sample Size	50					

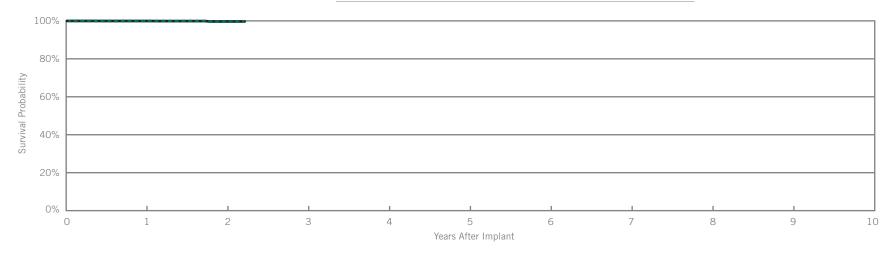
C	RT	IC	Ds



Unify Assura[™] CRT-D Model CD3357-40C*

US Regulatory Approval	June 2013
Registered US Implants	10,958
Estimated Active US Implants	9,562
Estimated Longevity	(see table on page 46)
Normal Battery Depletion	1
Max. Delivered Energy	40 joules
Number of US Advisories	None

	w/ Co	functions mpromised herapy	w/o Co	lalfunctions Compromised Therapy	
	Qty	Rate	Qty	Rate	
Electrical Component	1	<0.01%	1	<0.01%	
Electrical Interconnect	0	0.00%	0	0.00%	
Battery	0	0.00%	0	0.00%	
High Voltage Capacitor	1	<0.01%	0	0.00%	
Software/Firmware	0	0.00%	0	0.00%	
Mechanical	0	0.00%	1	<0.01%	
Possible Early Battery Depletion	1	<0.01%	0	0.00%	
Other	0	0.00%	0	0.00%	
Total	3	0.03%	2	0.02%	



Including Normal Battery Depletion

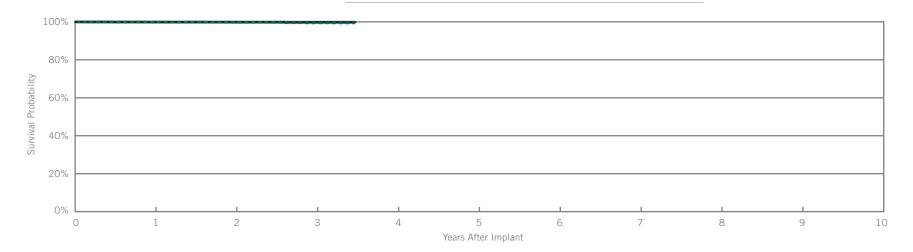
Year	1	2	at 27 months				
Survival Probability	99.92%	99.67%	99.67%				
± 1 standard error	0.03%	0.15%	0.15%				
Sample Size	7,880	2,630	220				

Year	1	2	at 27 months				
Survival Probability	99.94%	99.69%	99.69%				
± 1 standard error	0.03%	0.15%	0.15%				



Quadra Assura[™] CRT-D

odel CD3265-40Q*			w/ Co	functions mpromised herapy	Malfunctions w/o Compromised Therapy	
US Regulatory Approval	May 2012	-	Qty	Rate	Qty	Rate
Registered US Implants	13,523	Electrical Component	1	<0.01%	2	0.01%
Estimated Active US Implants	10,142	Electrical Interconnect	1	<0.01%	0	0.00%
Estimated Longevity	(see table on page 46)	Battery	0	0.00%	0	0.00%
Normal Battery Depletion	10	High Voltage Capacitor	0	0.00%	0	0.00%
Max. Delivered Energy	40 joules	Software/Firmware	0	0.00%	1	<0.01%
Number of US Advisories	None	Mechanical	0	0.00%	1	<0.01%
		Possible Early Battery Depletion	1	<0.01%	0	0.00%
		Other	1	<0.01%	0	0.00%
		Total	4	0.03%	4	0.03%



Including Normal Battery Depletion

Year	1	2	3	at 42 months			
Survival Probability	99.84%	99.75%	99.46%	99.46%			
± 1 standard error	0.03%	0.04%	0.10%	0.10%			
Sample Size	12,660	10,540	5,520	310			

Year	1	2	3	at 42 months			
Survival Probability	99.89%	99.87%	99.82%	99.82%			
± 1 standard error	0.03%	0.03%	0.05%	0.05%			



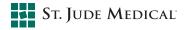
Actively Monitored Study Data

Quadra Assura[™] CRT-D

Idra Assura" CRT-D II CD3265-40Q*							w/ Con	unctions npromised nerapy	w/o Cor	unctions mpromise erapy
S Regulatory Approval	May 2012	Qualifying Compl	ications				Qty	Rate	Qty	Rate
umber of Devices Enrolled in Study	418	None Reported				Electrical Component	0	0.00%	0	0.00%
tive Devices Enrolled in Study	306					Electrical Interconnect	1	0.24%	0	0.00
umulative Months of Follow-up	9,731					Battery	0	0.00%	0	0.00
timated Longevity	(see table on page 46)					High Voltage Capacitor	0	0.00%	0	0.00
ax. Delivered Energy	40 joules					Software/Firmware	0	0.00%	0	0.00
						Mechanical	0	0.00%	0	0.00
						Possible Early Battery Depletion	0	0.00%	0	0.00
						Other	0	0.00%	0	0.00
						Total	1	0.24%	0	0.00
80%										
										-
										-
										-
60%										
60% 40% 20%	I 	 		<u> </u>	 6	I				-

Year	1	2	at 31 months				
Survival Probability	100.00%	100.00%	100.00%				
± 1 standard error	0.00%	0.00%	0.00%				
Sample Size	390	330	70				

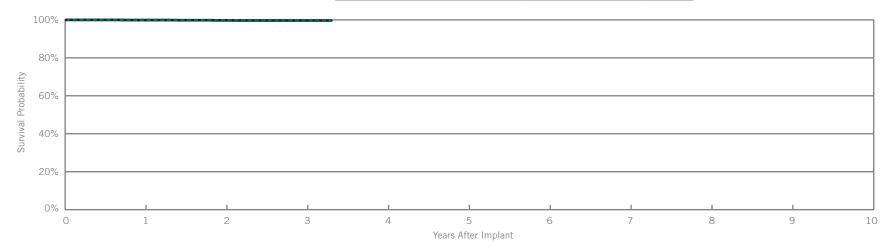
CRT	ICDs



Quadra Assura[™] CRT-D

Model CD3265-40			w/ Cor	unctions npromised herapy	promised w/o Cor	
US Regulatory Approval	May 2012		Qty	Rate	Qty	Rate
Registered US Implants	4,020	Electrical Component	0	0.00%	0	0.00%
Estimated Active US Implants	3,053	Electrical Interconnect	1	0.02%	0	0.00%
Estimated Longevity	(see table on page 46)	Battery	0	0.00%	0	0.00%
Normal Battery Depletion	1	High Voltage Capacitor	0	0.00%	0	0.00%
Max. Delivered Energy	40 joules	Software/Firmware	0	0.00%	0	0.00%
Number of US Advisories	None	Mechanical	0	0.00%	1	0.02%
		Possible Early Battery Depletion	0	0.00%	0	0.00%
		Other	2	0.05%	1	0.02%

		npromised herapy		mpromisec herapy
	Qty	Rate	Qty	Rate
Electrical Component	0	0.00%	0	0.00%
Electrical Interconnect	1	0.02%	0	0.00%
Battery	0	0.00%	0	0.00%
High Voltage Capacitor	0	0.00%	0	0.00%
Software/Firmware	0	0.00%	0	0.00%
Mechanical	0	0.00%	1	0.02%
Possible Early Battery Depletion	0	0.00%	0	0.00%
Other	2	0.05%	1	0.02%
Total	3	0.07%	2	0.05%



Including Normal Battery Depletion

Year	1	2	3	at 40 months			
Survival Probability	99.89%	99.70%	99.61%	99.61%			
± 1 standard error	0.06%	0.10%	0.11%	0.11%			
Sample Size	3,740	3,060	1,590	230			

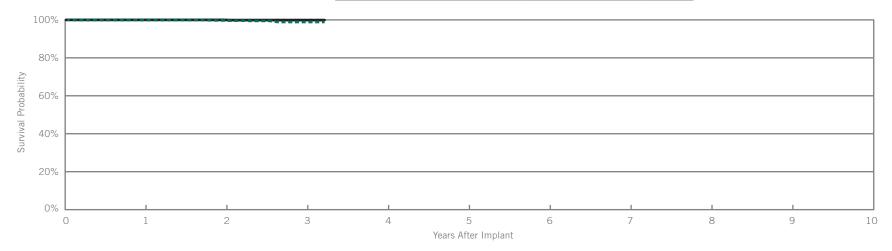
Year	1	2	3	at 40 months			
Survival Probability	99.89%	99.76%	99.68%	99.68%			
± 1 standard error	0.06%	0.09%	0.10%	0.10%			



Unify Assura[™] CRT-D Model CD3257-40Q*

US Regulatory Approval	May 2012	
Registered US Implants	2,710	Electrical (
Estimated Active US Implants	2,001	Electrical I
Estimated Longevity	(see table on page 46)	Battery
Normal Battery Depletion	6	High Volta
Max. Delivered Energy	40 joules	Software/F
Number of US Advisories	None	Mechanica

	w/ Cor	Malfunctions w/ Compromised Therapy		functions mpromised herapy
	Qty	Rate	Qty	Rate
Electrical Component	0	0.00%	0	0.00%
Electrical Interconnect	0	0.00%	0	0.00%
Battery	0	0.00%	0	0.00%
High Voltage Capacitor	0	0.00%	0	0.00%
Software/Firmware	0	0.00%	0	0.00%
Mechanical	0	0.00%	0	0.00%
Possible Early Battery Depletion	1	0.04%	0	0.00%
Other	0	0.00%	0	0.00%
Total	1	0.04%	0	0.00%



Including Normal Battery Depletion

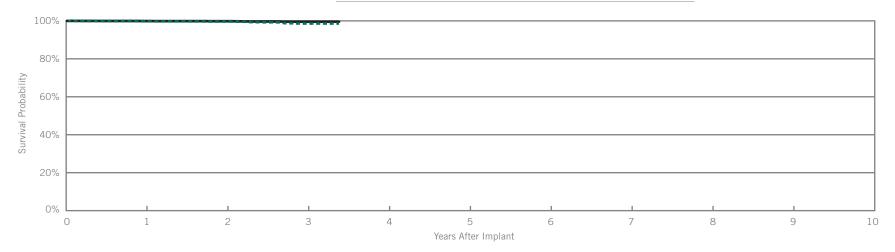
Year	1	2	3	at 39 months	
Survival Probability	99.92%	99.72%	98.89%	98.89%	
± 1 standard error	0.05%	0.12%	0.31%	0.31%	
Sample Size	2,520	2,070	1,070	200	

Year	1	2	3	at 39 months			
Survival Probability	100.00%	100.00%	99.89%	99.89%			
± 1 standard error	0.00%	0.00%	0.08%	0.08%			

Unify Assura[™] CRT-D Model CD3257-40

May 2012				
6,728				
4,992				
(see table on page 46)				
12				
40 joules				
None				

	w/ Cor	Malfunctions w/ Compromised Therapy		Malfunctions w/o Compromised Therapy		
	Qty	Rate	Qty	Rate		
Electrical Component	3	0.04%	2	0.03%		
Electrical Interconnect	0	0.00%	0	0.00%		
Battery	0	0.00%	0	0.00%		
High Voltage Capacitor	0	0.00%	0	0.00%		
Software/Firmware	0	0.00%	0	0.00%		
Mechanical	0	0.00%	0	0.00%		
Possible Early Battery Depletion	1	0.01%	1	0.01%		
Other	1	0.01%	1	0.01%		
Total	5	0.07%	4	0.06%		



Including Normal Battery Depletion

Year	1	2	3	at 41 months			
Survival Probability	99.81%	99.66%	98.63%	98.63%			
± 1 standard error	0.05%	0.08%	0.22%	0.22%			
Sample Size	6,300	5,190	2,790	270			

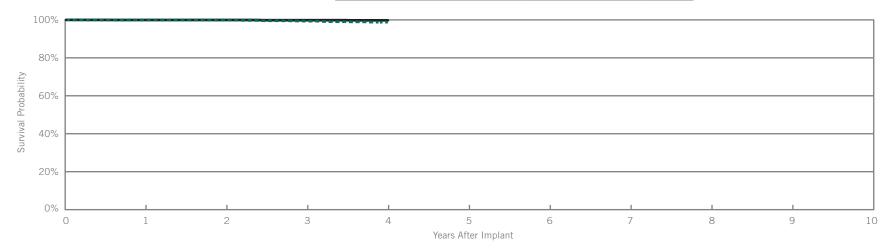
Year	1	2	3	at 41 months			
Survival Probability	99.90%	99.83%	99.57%	99.57%			
± 1 standard error	0.03%	0.05%	0.11%	0.11%			



Unify Quadra[™] CRT-D Model CD3249-40Q*

US Regulatory Approval	Nov 2011	
Registered US Implants	8,931	Elec
Estimated Active US Implants	6,151	Elec
Estimated Longevity	(see table on page 46)	Batt
Normal Battery Depletion	20	High
Max. Delivered Energy	40 joules	Soft
Number of US Advisories	None	Med

	w/ Cor	Malfunctions w/ Compromised Therapy		Malfunctions w/o Compromised Therapy		
	Qty	Rate	Qty	Rate		
Electrical Component	1	0.01%	0	0.00%		
Electrical Interconnect	0	0.00%	0	0.00%		
Battery	0	0.00%	0	0.00%		
High Voltage Capacitor	0	0.00%	0	0.00%		
Software/Firmware	0	0.00%	0	0.00%		
Mechanical	0	0.00%	0	0.00%		
Possible Early Battery Depletion	3	0.03%	0	0.00%		
Other	2	0.02%	0	0.00%		
Total	6	0.07%	0	0.00%		



Including Normal Battery Depletion

Year	1	2	3	4			
Survival Probability	99.87%	99.84%	99.37%	98.80%			
± 1 standard error	0.04%	0.04%	0.09%	0.18%			
Sample Size	8,400	7,410	6,050	530			

Year	1	2	3	4			
Survival Probability	99.95%	99.95%	99.84%	99.77%			
± 1 standard error	0.02%	0.02%	0.05%	0.07%			



Actively Monitored Study Data

Unify Quadra[™] CRT-D

del CD3249-40Q*						w/ Con Th	npromised herapy	w/o Co Th	mpromise
IS Regulatory Approval	Nov 2011	Qualifying Complications	Qty	Rate		Qty	Rate	Qty	Rate
lumber of Devices Enrolled in Study	991	Skin Erosion	1	0.10%	Electrical Component	0	0.00%	0	0.00
ctive Devices Enrolled in Study	653				Electrical Interconnect	0	0.00%	0	0.00
umulative Months of Follow-up	27,874				Battery	0	0.00%	0	0.00
stimated Longevity	(see table on page 46)				High Voltage Capacitor	0	0.00%	0	0.00
lax. Delivered Energy	40 joules				Software/Firmware	0	0.00%	0	0.00
					Mechanical	0	0.00%	0	0.00
					Possible Early Battery Depletion	0	0.00%	0	0.00
					Other	0	0.00%	0	0.00
					Total	0	0.00%	0	0.00
40%									
20%									
	<u>I</u> 2	 	5	<u>I</u> 6	<u>11</u>		9		-

Year	1	2	3	at 43 months			
Survival Probability	99.89%	99.89%	99.89%	99.89%			
± 1 standard error	0.11%	0.11%	0.11%	0.11%			
Sample Size	930	790	510	50			

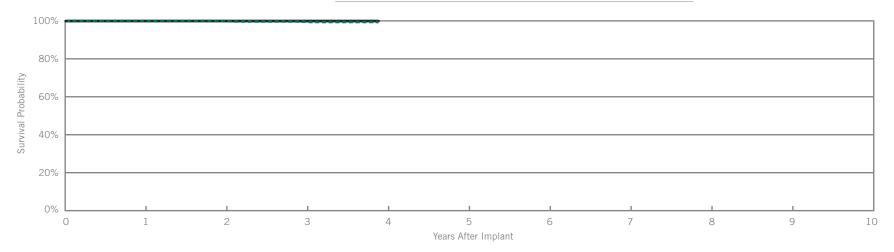
Malfunctions

Malfunctions

Unify Quadra[™] CRT-D Model CD3249-40

US Regulatory Approval	Nov 2011
Registered US Implants	2,520
Estimated Active US Implants	1,726
Estimated Longevity	(see table on page 46)
Normal Battery Depletion	4
Max. Delivered Energy	40 joules
Number of US Advisories	None

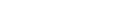
	w/ Cor	Malfunctions w/ Compromised Therapy		Malfunctions w/o Compromised Therapy	
	Qty	Rate	Qty	Rate	
Electrical Component	0	0.00%	0	0.00%	
Electrical Interconnect	0	0.00%	0	0.00%	
Battery	0	0.00%	0	0.00%	
High Voltage Capacitor	0	0.00%	0	0.00%	
Software/Firmware	0	0.00%	0	0.00%	
Mechanical	0	0.00%	0	0.00%	
Possible Early Battery Depletion	0	0.00%	0	0.00%	
Other	1	0.04%	0	0.00%	
Total	1	0.04%	0	0.00%	



Including Normal Battery Depletion

Year	1	2	3	at 47 months	
Survival Probability	99.92%	99.92%	99.58%	99.45%	
± 1 standard error	0.06%	0.06%	0.12%	0.18%	
Sample Size	2,360	2,090	1,730	300	

Year	1	2	3	at 47 months			
Survival Probability	99.92%	99.92%	99.92%	99.92%			
± 1 standard error	0.06%	0.06%	0.06%	0.06%			



Actively Monitored Study Data

Unify Quadra[™] CRT-D

odel CD3249-40							w/ Cor	npromised nerapy	w/o Co	mpromise
US Regulatory Approval	Nov 2011	Qualifying Complications	s	Qty	Rate		Qty	Rate	Qty	Rate
Number of Devices Enrolled in Study	242	Skin Erosion		1	0.41%	Electrical Component	0	0.00%	0	0.00%
Active Devices Enrolled in Study	159					Electrical Interconnect	0	0.00%	0	0.00%
Cumulative Months of Follow-up	6,712					Battery	0	0.00%	0	0.00%
Estimated Longevity	(see table on page 46)					High Voltage Capacitor	0	0.00%	0	0.009
Max. Delivered Energy	40 joules					Software/Firmware	0	0.00%	0	0.009
						Mechanical	0	0.00%	0	0.00
						Possible Early Battery Depletion	0	0.00%	0	0.009
						Other	0	0.00%	0	0.00
						Total	0	0.00%	0	0.009
60% 40%										
20%										
0%	I									
0	1 2	3	4	5	6	7 8		9		_

Year	1	2	3	at 38 months			
Survival Probability	99.56%	99.56%	99.56%	99.56%			
± 1 standard error	0.44%	0.44%	0.44%	0.44%			
Sample Size	220	190	120	50			



Malfunctions

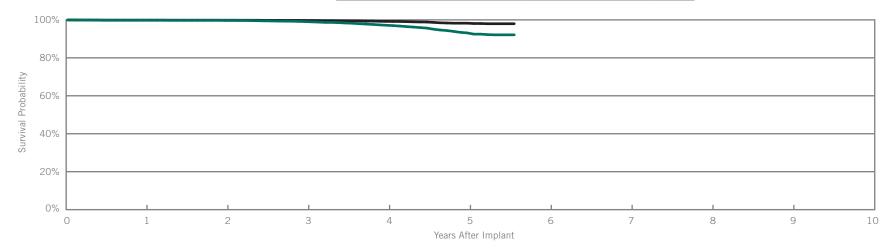
Malfunctions



Unify[™] CRT-D Model CD3231-40Q*

US Regulatory Approval	May 2010
Registered US Implants	18,982
Estimated Active US Implants	10,940
Estimated Longevity	(see table on page 46)
Normal Battery Depletion	183
Max. Delivered Energy	40 joules
Number of US Advisories	None

	w/ Co	functions mpromised herapy	w/o Co	functions ompromised herapy	
	Qty	Rate	Qty	Rate	
Electrical Component	2	0.01%	3	0.02%	
Electrical Interconnect	1	<0.01%	0	0.00%	
Battery	8	0.04%	2	0.01%	
High Voltage Capacitor	7	0.04%	2	0.01%	
Software/Firmware	0	0.00%	1	<0.01%	
Mechanical	1	<0.01%	2	0.01%	
Possible Early Battery Depletion	27	0.14%	10	0.05%	
Other	4	0.02%	2	0.01%	
Total	50	0.26%	22	0.12%	



Including Normal Battery Depletion

Year	1	2	3	4	5	at 67 months		
Survival Probability	99.77%	99.70%	99.09%	97.17%	93.14%	92.12%		
± 1 standard error	0.04%	0.04%	0.07%	0.14%	0.28%	0.36%		
Sample Size	17,720	15,590	13,840	11,350	6,430	370		

Year	1	2	3	4	5	at 67 months		
Survival Probability	99.88%	99.83%	99.69%	99.20%	98.25%	97.97%		
± 1 standard error	0.03%	0.03%	0.04%	0.08%	0.15%	0.18%		

Cardiac Resynchronization Therapy (CRT) Devices

Actively Monitored Study Data

Qty

2

1

1

Rate

0.12%

0.06%

0.06%

Unify[™] CRT-D

Estimated Longevity

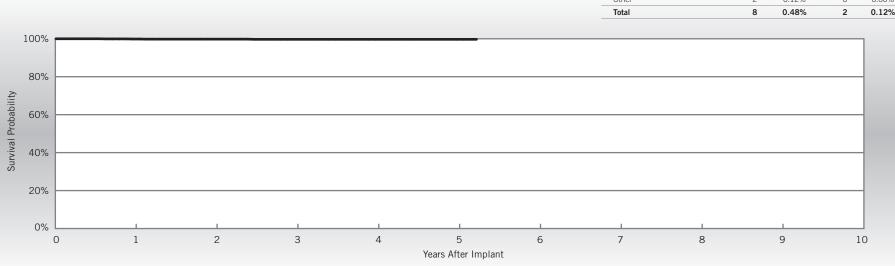
Max. Delivered Energy

Model CD3231-40Q*		
US Regulatory Approval	May 2010	Qualifying Complications
Number of Devices Enrolled in Study	1,677	Inappropriate Shock
Active Devices Enrolled in Study	937	Premature Battery Depletion
Cumulative Months of Follow-up	65,987	Skin Erosion

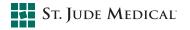
40 joules

(see table on page 46)

	w/ Con	Inctions promised erapy	w/o Cor	unctions npromised erapy
	Qty	Rate	Qty	Rate
Electrical Component	0	0.00%	1	0.06%
Electrical Interconnect	0	0.00%	0	0.00%
Battery	1	0.06%	0	0.00%
High Voltage Capacitor	0	0.00%	0	0.00%
Software/Firmware	0	0.00%	0	0.00%
Mechanical	0	0.00%	0	0.00%
Possible Early Battery Depletion	5	0.30%	1	0.06%
Other	2	0.12%	0	0.00%
Total	8	0.48%	2	0.12%



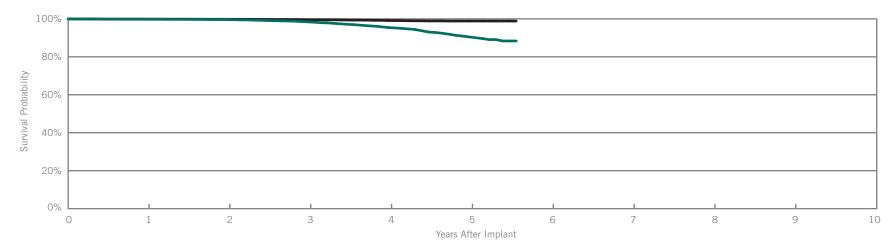
Year	1	2	3	4	5	at 63 months		
Survival Probability	99.87%	99.80%	99.71%	99.71%	99.71%	99.71%		
± 1 standard error	0.07%	0.12%	0.14%	0.14%	0.14%	0.14%		
Sample Size	1,570	1,370	1,190	950	460	70		



Unify[™] CRT-D Model CD3231-40

US Regulatory Approval	May 2010
Registered US Implants	20,470
Estimated Active US Implants	11,632
Estimated Longevity	(see table on page 46)
Normal Battery Depletion	286
Max. Delivered Energy	40 joules
Number of US Advisories	None

	w/ Co	functions mpromised herapy	w/o Co	functions mpromised herapy	
	Qty	Rate	Qty	Rate	
Electrical Component	7	0.03%	3	0.01%	
Electrical Interconnect	3	0.01%	0	0.00%	
Battery	4	0.02%	1	<0.01%	
High Voltage Capacitor	0	0.00%	0	0.00%	
Software/Firmware	0	0.00%	0	0.00%	
Mechanical	1	<0.01%	0	0.00%	
Possible Early Battery Depletion	13	0.06%	5	0.02%	
Other	9	0.04%	11	0.05%	
Total	37	0.18%	20	0.10%	



Including Normal Battery Depletion

Year	1	2	3	4	5	at 67 months		
Survival Probability	99.79%	99.64%	98.44%	95.44%	90.49%	88.36%		
± 1 standard error	0.03%	0.04%	0.09%	0.18%	0.35%	0.56%		
Sample Size	19,110	16,690	14,370	10,640	5,200	210		

Year	1	2	3	4	5	at 67 months		
Survival Probability	99.88%	99.80%	99.54%	99.14%	98.86%	98.86%		
± 1 standard error	0.02%	0.03%	0.05%	0.08%	0.11%	0.11%		



Actively Monitored Study Data

Unify[™] CRT-D Madal CD2021 40

llly CRT-D lel CD3231-40						w/ Co	functions mpromised herapy	w/o Co	unctions mpromise nerapy
S Regulatory Approval	May 2010	Qualifying Complications	Qty	Rate		Qty	Rate	Qty	Rate
umber of Devices Enrolled in Study	681	Skin Erosion	1	0.15%	Electrical Component	0	0.00%	0	0.00%
tive Devices Enrolled in Study	319				Electrical Interconnect	1	0.15%	0	0.00%
umulative Months of Follow-up	24,613				Battery	0	0.00%	2	0.29%
timated Longevity	(see table on page 46)				High Voltage Capacitor	0	0.00%	0	0.00
ax. Delivered Energy	40 joules				Software/Firmware	0	0.00%	1	0.159
					Mechanical	0	0.00%	0	0.00
					Possible Early Battery Depletion	0	0.00%	0	0.00
					Other	0	0.00%	0	0.00
					Total	1	0.15%	3	0.44
80%]
80%									
80% 60% 40%									
80%									-
80% 60% 40% 20%									
80% 60% 40%	1 2		i 5	1 6			- I 		

Year	1	2	3	4	5	at 61 months		
Survival Probability	99.84%	99.84%	99.84%	99.84%	99.84%	99.84%		
± 1 standard error	0.16%	0.16%	0.16%	0.16%	0.16%	0.16%		
Sample Size	620	510	420	340	180	60		



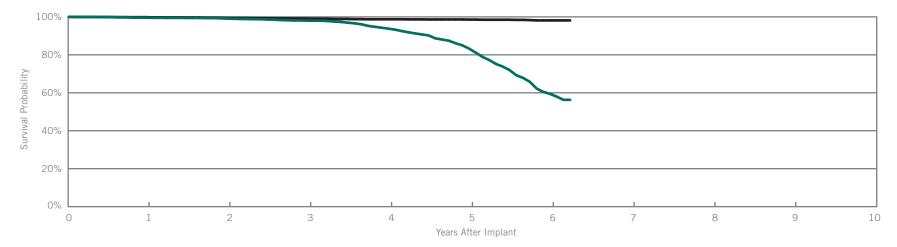
CRT ICDs

Promote[™] + CRT-D

Model CD3211-36Q*

US Regulatory Approval	February 2009
Registered US Implants	6,900
Estimated Active US Implants	2,386
Estimated Longevity	(see table on page 46)
Normal Battery Depletion	540
Max. Delivered Energy	36 joules
Number of US Advisories	None

	w/ Cor	Malfunctions w/ Compromised Therapy		functions mpromised herapy
	Qty	Rate	Qty	Rate
Electrical Component	4	0.06%	3	0.04%
Electrical Interconnect	0	0.00%	0	0.00%
Battery	9	0.13%	5	0.07%
High Voltage Capacitor	1	0.01%	0	0.00%
Software/Firmware	0	0.00%	3	0.04%
Mechanical	1	0.01%	0	0.00%
Possible Early Battery Depletion	2	0.03%	0	0.00%
Other	5	0.07%	4	0.06%
Total	22	0.32%	15	0.22%



Including Normal Battery Depletion

Year	1	2	3	4	5	6	at 75 months		
Survival Probability	99.59%	99.10%	98.01%	93.80%	83.27%	59.44%	56.28%		
± 1 standard error	0.08%	0.11%	0.18%	0.34%	0.55%	0.90%	1.11%		
Sample Size	6,380	5,570	4,990	4,390	3,600	1,860	260		

Excluding Normal Battery Depletion

Year	1	2	3	4	5	6	at 75 months		
Survival Probability	99.84%	99.46%	99.09%	98.73%	98.57%	98.14%	98.14%		
± 1 standard error	0.05%	0.09%	0.13%	0.16%	0.16%	0.23%	0.23%		

*DF4-LLHH connector type.



Actively Monitored Study Data

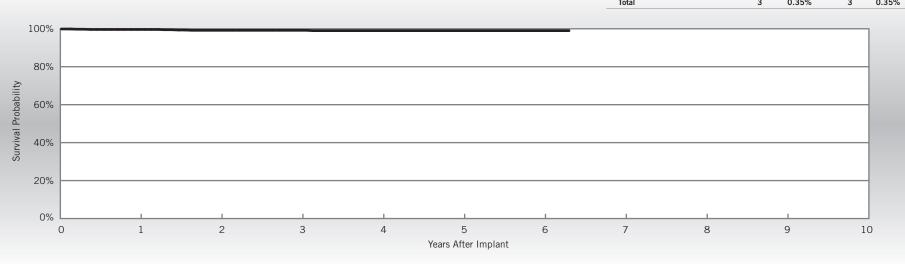
Promote[™] + CRT-D

Model CD3211-36Q*

US Regulatory Approval	February 2009
Number of Devices Enrolled in Study	854
Active Devices Enrolled in Study	312
Cumulative Months of Follow-up	37,861
Estimated Longevity	(see table on page 46)
Max. Delivered Energy	36 joules

Qualifying Complications	Qty.	Rate
Inappropriate Shock	3	0.35%
Premature Battery Depletion	2	0.23%
Skin Erosion	2	0.23%

	w/ Cor	unctions mpromised herapy	Malfunctions w/o Compromised Therapy		
	Qty	Rate	Qty	Rate	
Electrical Component	1	0.12%	1	0.12%	
Electrical Interconnect	0	0.00%	0	0.00%	
Battery	1	0.12%	1	0.12%	
High Voltage Capacitor	0	0.00%	0	0.00%	
Software/Firmware	0	0.00%	0	0.00%	
Mechanical	0	0.00%	1	0.12%	
Possible Early Battery Depletion	1	0.12%	0	0.00%	
Other	0	0.00%	0	0.00%	
Total	3	0.35%	3	0 35%	

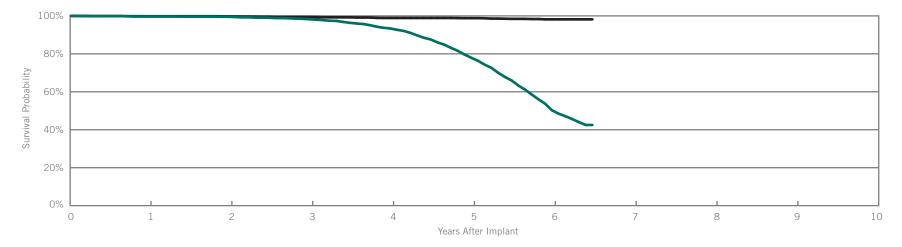


Year	1	2	3	4	5	6	at 76 months		
Survival Probability	99.63%	99.19%	99.19%	99.00%	99.00%	99.00%	99.00%		
± 1 standard error	0.21%	0.33%	0.33%	0.38%	0.38%	0.38%	0.38%		
Sample Size	790	680	580	480	380	230	50		

Promote[™] + CRT-D Model CD3211-36

US Regulatory Approval	February 2009
Registered US Implants	8,645
Estimated Active US Implants	2,478
Estimated Longevity	(see table on page 46)
Normal Battery Depletion	823
Max. Delivered Energy	36 joules
Number of US Advisories	None

	w/ Cor	unctions npromised herapy	w/o Co	functions mpromised herapy
	Qty	Rate	Qty	Rate
Electrical Component	3	0.03%	3	0.03%
Electrical Interconnect	0	0.00%	0	0.00%
Battery	11	0.13%	3	0.03%
High Voltage Capacitor	2	0.02%	0	0.00%
Software/Firmware	0	0.00%	5	0.06%
Mechanical	0	0.00%	0	0.00%
Possible Early Battery Depletion	3	0.03%	1	0.01%
Other	5	0.06%	3	0.03%
Total	24	0.28%	15	0.17%



Including Normal Battery Depletion

Year	1	2	3	4	5	6	at 78 months		
Survival Probability	99.63%	99.51%	98.24%	93.37%	77.97%	50.24%	42.51%		
± 1 standard error	0.07%	0.08%	0.15%	0.32%	0.57%	0.82%	1.07%		
Sample Size	8,000	6,910	6,080	5,220	4,100	2,220	230		

Year	1	2	3	4	5	6	at 78 months		
Survival Probability	99.79%	99.73%	99.39%	98.89%	98.79%	98.17%	98.17%		
± 1 standard error	0.05%	0.06%	0.09%	0.14%	0.15%	0.22%	0.22%		



Actively Monitored Study Data

Promote[™] + CRT-D

del CD3211-36						Mal w/ Co T	functions mpromised herapy	w/o Co	unctions mpromise nerapy
S Regulatory Approval	February 2009	Qualifying Complications	Qty	Rate		Qty	Rate	Qty	Rate
umber of Devices Enrolled in Study	223	Skin Erosion	1	0.45%	Electrical Component	0	0.00%	0	0.00%
ctive Devices Enrolled in Study	51				Electrical Interconnect	0	0.00%	0	0.00%
umulative Months of Follow-up	8,878				Battery	0	0.00%	0	0.00%
timated Longevity	(see table on page 46)				High Voltage Capacitor	0	0.00%	0	0.00%
ax. Delivered Energy	36 joules				Software/Firmware	0	0.00%	1	0.45%
					Mechanical	0	0.00%	0	0.00%
					Possible Early Battery Depletion	0	0.00%	0	0.00%
					Other	0	0.00%	0	0.00%
					Total	0	0.00%	1	0.45%
80%									
80%									
80%									-
80%									-
80% 60% 40% 20%									-
80% 60% 40% 20%	I 2	<u> </u>	5 Years After Implant	I6			1 9	1	0

Year	1	2	3	4	5	at 64 months		
Survival Probability	100.00%	100.00%	100.00%	100.00%	98.57%	98.57%		
± 1 standard error	0.00%	0.00%	0.00%	0.00%	1.42%	1.42%		
Sample Size	210	170	130	100	70	50		

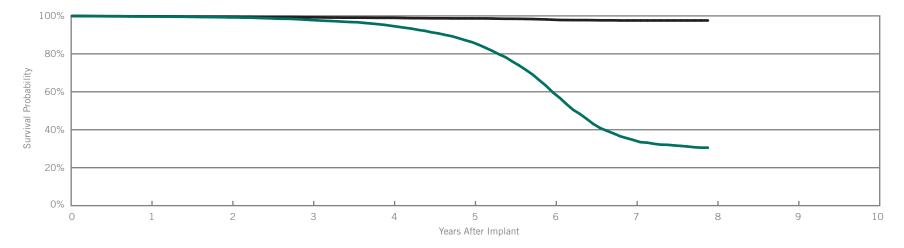


ST. JUDE MEDICAL

Promote[™] RF CRT-D Model 3207-36

US Regulatory Approval	September 2007
Registered US Implants	24,001
Estimated Active US Implants	3,996
Estimated Longevity	(see table on page 46)
Normal Battery Depletion	2,724
Max. Delivered Energy	36 joules
Number of US Advisories	None

	w/ Cor	unctions npromised nerapy	w/o Co	functions mpromised herapy
	Qty	Rate	Qty	Rate
Electrical Component	4	0.02%	6	0.02%
Electrical Interconnect	5	0.02%	3	0.01%
Battery	18	0.07%	9	0.04%
High Voltage Capacitor	5	0.02%	1	<0.01%
Software/Firmware	0	0.00%	12	0.05%
Mechanical	3	0.01%	7	0.03%
Possible Early Battery Depletion	10	0.04%	5	0.02%
Other	17	0.07%	16	0.07%
Total	62	0.26%	59	0.25%



Including Normal Battery Depletion

Year	1	2	3	4	5	6	7	at 95 months	
Survival Probability	99.67%	99.18%	97.83%	94.76%	86.15%	59.63%	34.52%	30.55%	
± 1 standard error	0.04%	0.06%	0.10%	0.17%	0.28%	0.45%	0.50%	0.59%	
Sample Size	22,190	19,060	16,620	14,390	11,840	8,240	3,870	250	

Year	1	2	3	4	5	6	7	at 95 months	
Survival Probability	99.77%	99.54%	99.24%	98.97%	98.67%	97.98%	97.58%	97.58%	
± 1 standard error	0.03%	0.04%	0.06%	0.08%	0.09%	0.12%	0.16%	0.16%	



36 joules

Actively Monitored Study Data

Promote[™] RF CRT-D

Number of Devices Enrolled in Study

Active Devices Enrolled in Study

Cumulative Months of Follow-up

Model	3207-36
	0207 00

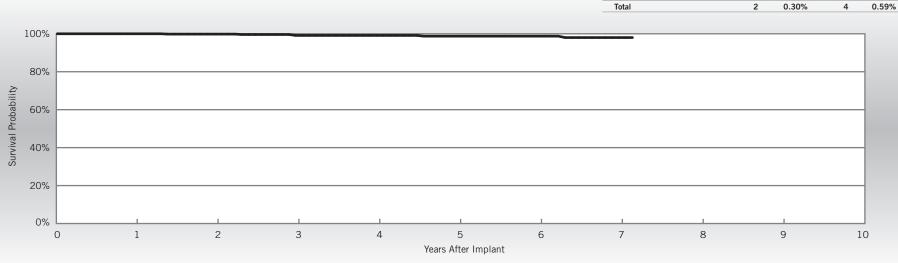
US Regulatory Approval

Estimated Longevity

Max. Delivered Energy

September 2007	Qualifying Complications	Qty	Rate
677	Inappropriate Shock	1	0.15%
122	Premature Battery Depletion	3	0.44%
30,412	Skin Erosion	2	0.30%
(see table on page 46)			

	w/ Cor	unctions npromised herapy	w/o Co	unctions mpromised herapy	
	Qty	Rate	Qty	Rate	
Electrical Component	0	0.00%	1	0.15%	
Electrical Interconnect	0	0.00%	0	0.00%	
Battery	0	0.00%	1	0.15%	
High Voltage Capacitor	0	0.00%	0	0.00%	
Software/Firmware	0	0.00%	0	0.00%	
Mechanical	0	0.00%	0	0.00%	
Possible Early Battery Depletion	0	0.00%	1	0.15%	
Other	2	0.30%	1	0.15%	
Total	2	0.30%	4	0 59%	



Year	1	2	3	4	5	6	7	at 86 months	
Survival Probability	100.00%	99.82%	99.13%	99.13%	98.74%	98.74%	98.00%	98.00%	
± 1 standard error	0.00%	0.18%	0.27%	0.44%	0.58%	0.58%	0.94%	0.94%	
Sample Size	630	550	460	350	260	190	110	50	

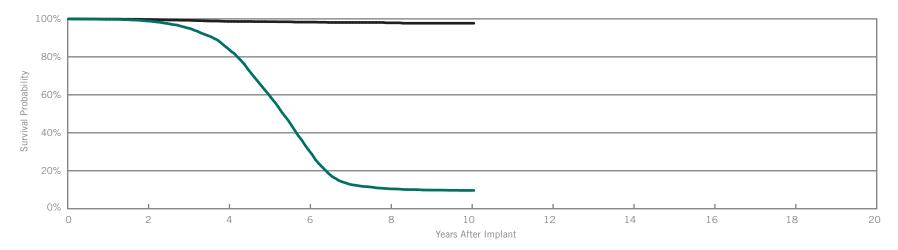


Atlas[™] + HF CRT-D

Model V-343

JS Regulatory Approval	November 2004
egistered US Implants	18,777
Estimated Active US Implants	946
Estimated Longevity	(see table on page 46)
ormal Battery Depletion	3,422
lax. Delivered Energy	36 joules
Number of US Advisories (see pgs. 290-295)	Two

	w/ Cor	unctions npromised herapy	w/o Co	functions mpromised herapy
	Qty	Rate	Qty	Rate
Electrical Component	3	0.02%	1	<0.01%
Electrical Interconnect	0	0.00%	0	0.00%
Battery	40	0.21%	4	0.02%
High Voltage Capacitor	0	0.00%	0	0.00%
Software/Firmware	0	0.00%	1	<0.01%
Mechanical	0	0.00%	1	<0.01%
Possible Early Battery Depletion	7	0.04%	11	0.06%
Other	10	0.05%	4	0.02%
Total	60	0.32%	22	0.12%



Including Normal Battery Depletion

Year	2	4	6	8	10	at 121 months		
Survival Probability	98.89%	84.45%	30.86%	10.49%	9.65%	9.65%		
± 1 standard error	0.08%	0.32%	0.49%	0.32%	0.31%	0.31%		
Sample Size	15,140	10,350	4,160	1,150	450	220		

Year	2	4	6	8	10	at 121 months		
Survival Probability	99.67%	98.65%	98.30%	97.92%	97.70%	97.70%		
± 1 standard error	0.04%	0.10%	0.13%	0.21%	0.26%	0.26%		



BATTERY LONGEVITY SUMMARY

CRT ICDs



Cardiac Resynchronization Therapy (CRT) Devices

Battery Longevity

			Approximate D	Ouration (years)	
Models	Family	No Pacing	25% Pacing	50% Pacing	100% Pacing
CD3365-40Q	Quadra Assura™ CRT-D*	11.1	9.9	8.9	7.4
CD3365-40C	Quadra Assura™ CRT-D*	11.1	9.9	8.9	7.4
CD3357-40Q	Unify Assura™ CRT-D*	11.1	9.9	8.9	7.4
CD3357-40C	Unify Assura™ CRT-D*	11.1	9.9	8.9	7.4
CD3265-40Q	Quadra Assura™ CRT-D*	11.1	9.9	8.9	7.4
CD3265-40	Quadra Assura™ CRT-D*	11.1	9.9	8.9	7.4
CD3257-40Q	Unify Assura™ CRT-D*	11.1	9.9	8.9	7.4
CD3257-40	Unify Assura™ CRT-D*	11.1	9.9	8.9	7.4
CD3249-40Q	Unify Quadra™ CRT-D*	10.2	9.0	8.1	6.7
CD3249-40	Unify Quadra™ CRT-D*	10.2	9.0	8.1	6.7
CD3231-40Q	Unify [™] CRT-D*	10.1	9.0	8.1	6.7
CD3231-40	Unify [™] CRT-D*	10.1	9.0	8.1	6.7
CD3211-36Q	Promote [™] + CRT-D**	8.2	7.2	6.5	5.4
CD3211-36	Promote [™] + CRT-D**	8.2	7.2	6.5	5.4
3207-36	Promote [™] RF CRT-D**	8.2	7.2	6.5	5.4
V-343	Atlas™ + HF CRT-D**	7.9	7.1	6.4	5.4

Pacing parameters: DDD-BiV, RV 2.5V, LV 2.5V, A 2.5V, 0.5 ms, 60 ppm, 500 ohms

*Battery voltage range: 3.20-2.59. Three maximum charges per year.

**Battery voltage range: 3.20-2.45. Four maximum charges per year as well as monthly charging during the battery's mid-life voltage range.

SUMMARY INFORMATION

CRT ICDs



Survival Summary

			1	1	1	Survival P	Probability	1			1
Models	Family	1 year	2 year	3 year	4 year	5 year	6 year	7 year	8 year	9 year	10 year
CD3365-40Q	Quadra Assura™ CRT-D	99.81%	99.70%								
CD3365-40C	Quadra Assura™ CRT-D	99.78%	99.43%								
CD3357-40Q	Unify Assura™ CRT-D	99.70%	99.61%								
CD3357-40C	Unify Assura™ CRT-D	99.92%	99.67%								
CD3265-40Q	Quadra Assura™ CRT-D	99.84%	99.75%	99.46%							
CD3265-40	Quadra Assura™CRT-D	99.89%	99.70%	99.61%							
CD3257-40Q	Unify Assura™ CRT-D	99.92%	99.72%	98.89%							
CD3257-40	Unify Assura™ CRT-D	99.81%	99.66%	98.63%							
CD3249-40Q	Unify Quadra™ CRT-D	99.87%	99.84%	99.37%	98.80%						
CD3249-40	Unify Quadra™ CRT-D	99.92%	99.92%	99.58%							
CD3231-40Q	Unify™ CRT-D	99.77%	99.70%	99.09%	97.17%	93.14%					
CD3231-40	Unify™ CRT-D	99.79%	99.64%	98.44%	95.44%	90.49%					
CD3211-36Q	Promote™ + CRT-D	99.59%	99.10%	98.01%	93.80%	83.27%	59.44%				
CD3211-36	Promote [™] + CRT-D	99.63%	99.51%	98.24%	93.37%	77.97%	50.24%				
3207-36	Promote [™] RF CRT-D	99.67%	99.18%	97.83%	94.76%	86.15%	59.63%	34.52%			
V-343	Atlas™ + HF CRT-D	99.73%	98.89%	95.22%	84.45%	60.44%	30.86%	12.93%	10.49%	9.82%	9.65%



Survival Summary

			1		1	Survival P	robability	1			1
Models	Family	1 year	2 year	3 year	4 year	5 year	6 year	7 year	8 year	9 year	10 year
CD3365-40Q	Quadra Assura™ CRT-D	99.85%	99.80%								
CD3365-40C	Quadra Assura™ CRT-D	99.91%	99.57%								
CD3357-40Q	Unify Assura™ CRT-D	99.86%	99.77%								
CD3357-40C	Unify Assura™ CRT-D	99.94%	99.69%								
CD3265-40Q	Quadra Assura™ CRT-D	99.89%	99.87%	99.82%							
CD3265-40	Quadra Assura™CRT-D	99.89%	99.76%	99.68%							
CD3257-40Q	Unify Assura™ CRT-D	100.00%	100.00%	99.89%							
CD3257-40	Unify Assura™ CRT-D	99.90%	99.83%	99.57%							
CD3249-40Q	Unify Quadra™ CRT-D	99.95%	99.95%	99.84%	99.77%						
CD3249-40	Unify Quadra™ CRT-D	99.92%	99.92%	99.92%							
CD3231-40Q	Unify [™] CRT-D	99.88%	99.83%	99.69%	99.20%	98.25%					
CD3231-40	Unify™ CRT-D	99.88%	99.80%	99.54%	99.14%	98.86%					
CD3211-36Q	Promote™ + CRT-D	99.84%	99.46%	99.09%	98.73%	98.57%	98.14%				
CD3211-36	Promote [™] + CRT-D	99.79%	99.73%	99.39%	98.89%	98.79%	98.17%				
3207-36	Promote [™] RF CRT-D	99.77%	99.54%	99.24%	98.97%	98.67%	97.98%	97.58%			
V-343	Atlas™ + HF CRT-D	99.88%	99.67%	99.26%	98.65%	98.52%	98.30%	98.11%	97.92%	97.70%	97.70%





U.S. Malfunction Summary

										U.	S. Malfund	ctions w/	Comprom	ised Ther	ару						
		Registered	Percent Returned for		trical ponent		trical onnect	Ba	ttery		Voltage acitor		ware/ ware	Mech	anical	Bat	le Early ttery letion	Of	ther	Тс	otal
Models	Family	US Implants	Analysis	Qty.	Rate	Qty.	Rate	Qty.	Rate	Qty.	Rate	Qty.	Rate	Qty.	Rate	Qty.	Rate	Qty.	Rate	Qty.	Rate
CD3365-40Q	Quadra Assura™ CRT-D	28,951	1.20%	2	<0.01%	3	0.01%	0	0.00%	0	0.00%	0	0.00%	0	0.00%	0	0.00%	3	0.01%	8	0.03%
CD3365-40C	Quadra Assura™ CRT-D	5,757	1.80%	0	0.00%	1	0.02%	0	0.00%	0	0.00%	0	0.00%	0	0.00%	0	0.00%	1	0.02%	2	0.03%
CD3357-40Q	Unify Assura™ CRT-D	5,790	2.00%	0	0.00%	2	0.03%	0	0.00%	1	0.02%	0	0.00%	0	0.00%	0	0.00%	0	0.00%	3	0.05%
CD3357-40C	Unify Assura™ CRT-D	10,958	1.40%	1	<0.01%	0	0.00%	0	0.00%	1	<0.01%	0	0.00%	0	0.00%	1	<0.01%	0	0.00%	3	0.03%
CD3265-40Q	Quadra Assura™ CRT-D	13,523	2.60%	1	<0.01%	1	<0.01%	0	0.00%	0	0.00%	0	0.00%	0	0.00%	1	<0.01%	1	<0.01%	4	0.03%
CD3265-40	Quadra Assura™ CRT-D	4,020	3.30%	0	0.00%	1	0.02%	0	0.00%	0	0.00%	0	0.00%	0	0.00%	0	0.00%	2	0.05%	3	0.07%
CD3257-40Q	Unify Assura™ CRT-D	2,710	3.80%	0	0.00%	0	0.00%	0	0.00%	0	0.00%	0	0.00%	0	0.00%	1	0.04%	0	0.00%	1	0.04%
CD3257-40	Unify Assura™ CRT-D	6,728	3.30%	3	0.04%	0	0.00%	0	0.00%	0	0.00%	0	0.00%	0	0.00%	1	0.01%	1	0.01%	5	0.07%
CD3249-40Q	Unify Quadra™ CRT-D	8,931	3.00%	1	0.01%	0	0.00%	0	0.00%	0	0.00%	0	0.00%	0	0.00%	3	0.03%	2	0.02%	6	0.07%
CD3249-40	Unify Quadra™ CRT-D	2,520	4.40%	0	0.00%	0	0.00%	0	0.00%	0	0.00%	0	0.00%	0	0.00%	0	0.00%	1	0.04%	1	0.04%
CD3231-40Q	Unify™ CRT-D	18,982	5.30%	2	0.01%	1	<0.01%	8	0.04%	7	0.04%	0	0.00%	1	<0.01%	27	0.14%	4	0.02%	50	0.26%
CD3231-40	Unify™ CRT-D	20,470	6.50%	7	0.03%	3	0.01%	4	0.02%	0	0.00%	0	0.00%	1	<0.01%	13	0.06%	9	0.04%	37	0.18%
CD3211-36Q	Promote [™] + CRT-D	6,900	15.80%	4	0.06%	0	0.00%	9	0.13%	1	0.01%	0	0.00%	1	0.01%	2	0.03%	5	0.07%	22	0.32%
CD3211-36	Promote [™] + CRT-D	8,645	19.90%	3	0.03%	0	0.00%	11	0.13%	2	0.02%	0	0.00%	0	0.00%	3	0.03%	5	0.06%	24	0.28%
3207-36	Promote [™] RF CRT-D	24,001	24.20%	4	0.02%	5	0.02%	18	0.07%	5	0.02%	0	0.00%	3	0.01%	10	0.04%	17	0.07%	62	0.26%
V-343	Atlas [™] + HF CRT-D	18,777	24.80%	3	0.02%	0	0.00%	40	0.21%	0	0.00%	0	0.00%	0	0.00%	7	0.04%	10	0.05%	60	0.32%

U.S. Malfunction Summary

										U.9	S. Malfunc	tions w/o	Comprom	ised The	rapy						
		Registered	Percent Returned for	Elec Comp	trical oonent		trical connect	Bat	ttery	0	Voltage acitor		ware/ ware	Mech	anical	Bat	le Early ttery letion	Ot	ther	Тс	otal
Models	Family	US Implants	Analysis	Qty.	Rate	Qty.	Rate	Qty.	Rate	Qty.	Rate	Qty.	Rate	Qty.	Rate	Qty.	Rate	Qty.	Rate	Qty.	Rate
CD3365-40Q	Quadra Assura™ CRT-D	28,951	1.20%	3	0.01%	0	0.00%	1	<0.01%	0	0.00%	1	<0.01%	3	0.01%	0	0.00%	0	0.00%	8	0.03%
CD3365-40C	Quadra Assura™ CRT-D	5,757	1.80%	1	0.02%	0	0.00%	0	0.00%	0	0.00%	0	0.00%	0	0.00%	1	0.02%	1	0.02%	3	0.05%
CD3357-40Q	Unify Assura™ CRT-D	5,790	2.00%	0	0.00%	0	0.00%	0	0.00%	0	0.00%	0	0.00%	1	0.02%	0	0.00%	0	0.00%	1	0.02%
CD3357-40C	Unify Assura™ CRT-D	10,958	1.40%	1	<0.01%	0	0.00%	0	0.00%	0	0.00%	0	0.00%	1	<0.01%	0	0.00%	0	0.00%	2	0.02%
CD3265-40Q	Quadra Assura™ CRT-D	13,523	2.60%	2	0.01%	0	0.00%	0	0.00%	0	0.00%	1	<0.01%	1	<0.01%	0	0.00%	0	0.00%	4	0.03%
CD3265-40	Quadra Assura™ CRT-D	4,020	3.30%	0	0.00%	0	0.00%	0	0.00%	0	0.00%	0	0.00%	1	0.02%	0	0.00%	1	0.02%	2	0.05%
CD3257-40Q	Unify Assura™ CRT-D	2,710	3.80%	0	0.00%	0	0.00%	0	0.00%	0	0.00%	0	0.00%	0	0.00%	0	0.00%	0	0.00%	0	0.00%
CD3257-40	Unify Assura™ CRT-D	6,728	3.30%	2	0.03%	0	0.00%	0	0.00%	0	0.00%	0	0.00%	0	0.00%	1	0.01%	1	0.01%	4	0.06%
CD3249-40Q	Unify Quadra™ CRT-D	8,931	3.00%	0	0.00%	0	0.00%	0	0.00%	0	0.00%	0	0.00%	0	0.00%	0	0.00%	0	0.00%	0	0.00%
CD3249-40	Unify Quadra™ CRT-D	2,520	4.40%	0	0.00%	0	0.00%	0	0.00%	0	0.00%	0	0.00%	0	0.00%	0	0.00%	0	0.00%	0	0.00%
CD3231-40Q	Unify™ CRT-D	18,982	5.30%	3	0.02%	0	0.00%	2	0.01%	2	0.01%	1	<0.01%	2	0.01%	10	0.05%	2	0.01%	22	0.12%
CD3231-40	Unify™ CRT-D	20,470	6.50%	3	0.01%	0	0.00%	1	<0.01%	0	0.00%	0	0.00%	0	0.00%	5	0.02%	11	0.05%	20	0.10%
CD3211-36Q	Promote [™] + CRT-D	6,900	15.80%	3	0.04%	0	0.00%	5	0.07%	0	0.00%	3	0.04%	0	0.00%	0	0.00%	4	0.06%	15	0.22%
CD3211-36	Promote [™] + CRT-D	8,645	19.90%	3	0.03%	0	0.00%	3	0.03%	0	0.00%	5	0.06%	0	0.00%	1	0.01%	3	0.03%	15	0.17%
3207-36	Promote [™] RF CRT-D	24,001	24.20%	6	0.02%	3	0.01%	9	0.04%	1	<0.01%	12	0.05%	7	0.03%	5	0.02%	16	0.07%	59	0.25%
V-343	Atlas™ + HF CRT-D	18,777	24.80%	1	<0.01%	0	0.00%	4	0.02%	0	0.00%	1	<0.01%	1	<0.01%	11	0.06%	4	0.02%	22	0.12%

Worldwide Malfunction Summary

										World	lwide Malf	unctions	w/ Compre	omized Th	nerapy						
		Worldwide	Percent Returned for		trical conent		ctrical connect	Ba	ttery		/oltage acitor		ware/ ware	Mech	anical	Ba	le Early ttery letion	Ot	:her	To	otal
Models	Family	Sales	Analysis	Qty.	Rate	Qty.	Rate	Qty.	Rate	Qty.	Rate	Qty.	Rate	Qty.	Rate	Qty.	Rate	Qty.	Rate	Qty.	Rate
CD3365-40Q	Quadra Assura™ CRT-D	30,416	1.44%	2	<0.01%	3	<0.01%	0	0.00%	0	0.00%	0	0.00%	0	0.00%	0	0.00%	3	<0.01%	8	0.03%
CD3365-40C	Quadra Assura™ CRT-D	6,049	2.28%	0	0.00%	1	0.02%	0	0.00%	0	0.00%	0	0.00%	0	0.00%	0	0.00%	1	0.02%	2	0.03%
CD3357-40Q	Unify Assura™ CRT-D	6,194	2.47%	0	0.00%	2	0.03%	0	0.00%	1	0.02%	0	0.00%	0	0.00%	0	0.00%	0	0.00%	3	0.05%
CD3357-40C	Unify Assura™ CRT-D	11,410	1.78%	1	<0.01%	0	0.00%	0	0.00%	1	<0.01%	0	0.00%	0	0.00%	1	<0.01%	0	0.00%	3	0.03%
CD3265-40Q	Quadra Assura™ CRT-D	13,975	2.92%	1	<0.01%	2	0.01%	0	0.00%	0	0.00%	0	0.00%	0	0.00%	1	<0.01%	1	<0.01%	5	0.04%
CD3265-40	Quadra Assura™ CRT-D	4,049	4.00%	0	0.00%	1	0.02%	0	0.00%	0	0.00%	0	0.00%	0	0.00%	0	0.00%	2	0.05%	3	0.07%
CD3257-40Q	Unify Assura™ CRT-D	2,738	4.64%	0	0.00%	0	0.00%	0	0.00%	0	0.00%	0	0.00%	0	0.00%	1	0.04%	0	0.00%	1	0.04%
CD3257-40	Unify Assura™ CRT-D	6,742	3.72%	3	0.04%	0	0.00%	0	0.00%	0	0.00%	0	0.00%	0	0.00%	1	0.01%	1	0.01%	5	0.07%
CD3249-40Q	Unify Quadra™ CRT-D	10,300	3.19%	1	<0.01%	0	0.00%	0	0.00%	0	0.00%	0	0.00%	0	0.00%	3	0.03%	2	0.02%	6	0.06%
CD3249-40	Unify Quadra™ CRT-D	3,137	4.72%	0	0.00%	0	0.00%	0	0.00%	0	0.00%	0	0.00%	0	0.00%	0	0.00%	1	0.03%	1	0.03%
CD3231-40Q	Unify [™] CRT-D	20,916	5.81%	3	0.01%	1	<0.01%	9	0.04%	7	0.03%	0	0.00%	1	<0.01%	32	0.15%	6	0.03%	59	0.28%
CD3231-40	Unify [™] CRT-D	21,713	6.84%	7	0.03%	4	0.02%	4	0.02%	0	0.00%	0	0.00%	1	<0.01%	14	0.06%	9	0.04%	39	0.18%
CD3211-36Q	Promote [™] + CRT-D	15,415	9.04%	11	0.07%	0	0.00%	11	0.07%	3	0.02%	0	0.00%	2	0.01%	4	0.03%	5	0.03%	36	0.23%
CD3211-36	Promote [™] + CRT-D	20,242	9.44%	12	0.06%	1	<0.01%	15	0.07%	4	0.02%	0	0.00%	0	0.00%	4	0.02%	10	0.05%	46	0.23%
3207-36	Promote [™] RF CRT-D	25,838	24.13%	5	0.02%	5	0.02%	20	0.08%	5	0.02%	0	0.00%	3	0.01%	10	0.04%	20	0.08%	68	0.26%
V-343	Atlas [™] + HF CRT-D	19,292	24.63%	3	0.02%	0	0.00%	41	0.21%	0	0.00%	0	0.00%	0	0.00%	7	0.04%	10	0.05%	61	0.32%



Worldwide Malfunction Summary

										World	wide Malf	unctions	w/o Compr	omized T	herapy						
		Worldwide	Percent Returned for		trical conent		trical connect	Bat	ttery		Voltage acitor		tware/ nware	Mech	anical	Bat	le Early ttery letion	Ot	her	Тс	otal
Models	Family	Sales	Analysis	Qty.	Rate	Qty.	Rate	Qty.	Rate	Qty.	Rate	Qty.	Rate	Qty.	Rate	Qty.	Rate	Qty.	Rate	Qty.	Rate
CD3365-40Q	Quadra Assura™ CRT-D	30,416	1.44%	3	<0.01%	0	0.00%	1	<0.01%	0	0.00%	1	<0.01%	3	<0.01%	0	0.00%	0	0.00%	8	0.03%
CD3365-40C	Quadra Assura™ CRT-D	6,049	2.28%	1	0.02%	0	0.00%	0	0.00%	0	0.00%	0	0.00%	0	0.00%	1	0.02%	1	0.02%	3	0.05%
CD3357-40Q	Unify Assura [™] CRT-D	6,194	2.47%	0	0.00%	0	0.00%	0	0.00%	0	0.00%	0	0.00%	1	0.02%	0	0.00%	0	0.00%	1	0.02%
CD3357-40C	Unify Assura™ CRT-D	11,410	1.78%	1	<0.01%	0	0.00%	0	0.00%	0	0.00%	0	0.00%	1	<0.01%	0	0.00%	0	0.00%	2	0.02%
CD3265-40Q	Quadra Assura™ CRT-D	13,975	2.92%	2	0.01%	0	0.00%	0	0.00%	0	0.00%	1	<0.01%	1	<0.01%	0	0.00%	0	0.00%	4	0.03%
CD3265-40	Quadra Assura [™] CRT-D	4,049	4.00%	0	0.00%	0	0.00%	0	0.00%	0	0.00%	0	0.00%	1	0.02%	0	0.00%	1	0.02%	2	0.05%
CD3257-40Q	Unify Assura™ CRT-D	2,738	4.64%	0	0.00%	0	0.00%	0	0.00%	0	0.00%	0	0.00%	0	0.00%	0	0.00%	0	0.00%	0	0.00%
CD3257-40	Unify Assura™ CRT-D	6,742	3.72%	2	0.03%	0	0.00%	0	0.00%	0	0.00%	0	0.00%	0	0.00%	1	0.01%	1	0.01%	4	0.06%
CD3249-40Q	Unify Quadra™ CRT-D	10,300	3.19%	0	0.00%	0	0.00%	0	0.00%	0	0.00%	0	0.00%	0	0.00%	0	0.00%	1	<0.01%	1	<0.01%
CD3249-40	Unify Quadra™ CRT-D	3,137	4.72%	0	0.00%	0	0.00%	0	0.00%	0	0.00%	0	0.00%	0	0.00%	0	0.00%	0	0.00%	0	0.00%
CD3231-40Q	Unify [™] CRT-D	20,916	5.81%	4	0.02%	0	0.00%	2	<0.01%	2	<0.01%	1	<0.01%	2	<0.01%	11	0.05%	2	<0.01%	24	0.11%
CD3231-40	Unify [™] CRT-D	21,713	6.84%	4	0.02%	0	0.00%	3	0.01%	0	0.00%	1	<0.01%	0	0.00%	5	0.02%	11	0.05%	24	0.11%
CD3211-36Q	Promote [™] + CRT-D	15,415	9.04%	5	0.03%	0	0.00%	7	0.05%	0	0.00%	3	0.02%	2	0.01%	2	0.01%	6	0.04%	25	0.16%
CD3211-36	Promote [™] + CRT-D	20,242	9.44%	6	0.03%	0	0.00%	4	0.02%	0	0.00%	6	0.03%	1	<0.01%	1	<0.01%	4	0.02%	22	0.11%
3207-36	Promote [™] RF CRT-D	25,838	24.13%	7	0.03%	3	0.01%	10	0.04%	1	<0.01%	13	0.05%	7	0.03%	6	0.02%	17	0.07%	64	0.25%
V-343	Atlas™ + HF CRT-D	19,292	24.63%	1	<0.01%	0	0.00%	4	0.02%	0	0.00%	1	<0.01%	1	<0.01%	11	0.06%	4	0.02%	22	0.11%



Actively Monitored Study Data Summary

Qualifying Complications

	Number of	umber of Active	Active			Active		Cumulative Months of		ropriate 10ck		ss of metry		ardial Ision	Bat	iature tery etion		kin sion	То	otal
Models	Devices Enrolled	Devices Enrolled	Follow-Up	Qty.	Rate	Qty.	Rate	Qty.	Rate	Qty.	Rate	Qty.	Rate	Qty.	Rate					
CD3365-40Q	163	133	3,422	0	0.00%	0	0.00%	0	0.00%	0	0.00%	0	0.00%	0	0.00%					
CD3357-40Q	101	93	1,088	0	0.00%	0	0.00%	0	0.00%	0	0.00%	0	0.00%	0	0.00%					
CD3265-40Q	418	306	9,731	0	0.00%	0	0.00%	0	0.00%	0	0.00%	0	0.00%	0	0.00%					
CD3249-40Q	991	653	27,874	0	0.00%	0	0.00%	0	0.00%	0	0.00%	1	0.10%	1	0.10%					
CD3249-40	242	159	6,712	0	0.00%	0	0.00%	0	0.00%	0	0.00%	1	0.41%	1	0.41%					
CD3231-40Q	1,677	937	65,987	2	0.12%	0	0.00%	0	0.00%	1	0.06%	1	0.06%	4	0.24%					
CD3231-40	681	319	24,613	0	0.00%	0	0.00%	0	0.00%	0	0.00%	1	0.15%	1	0.15%					
CD3211-36Q	854	312	37,861	3	0.35%	0	0.00%	0	0.00%	2	0.23%	2	0.23%	7	0.82%					
CD3211-36	223	51	8,878	0	0.00%	0	0.00%	0	0.00%	0	0.00%	1	0.45%	1	0.45%					
3207-36	677	122	30,412	1	0.15%	0	0.00%	0	0.00%	3	0.44%	2	0.30%	6	0.89%					

Actively Monitored Study Data Summary

Malfunctions

					Malfunctions w/ Compromised Therapy																
		Number of Devices	Percent Returned for	Comp	trical conent		trical onnect	Ba	ttery		Voltage acitor		ware/ ware	Mech	anical	Bat	le Early ttery letion	Of	ther	Te	otal
Models	Family	Enrolled	Analysis	Qty.	Rate	Qty.	Rate	Qty.	Rate	Qty.	Rate	Qty.	Rate	Qty.	Rate	Qty.	Rate	Qty.	Rate	Qty.	Rate
CD3365-40Q	Quadra Assura™ CRT-D	163	3.70%	0	0.00%	0	0.00%	0	0.00%	0	0.00%	0	0.00%	0	0.00%	0	0.00%	0	0.00%	0	0.00%
CD3357-40Q	Unify Assura™ CRT-D	101	2.00%	0	0.00%	0	0.00%	0	0.00%	0	0.00%	0	0.00%	0	0.00%	0	0.00%	0	0.00%	0	0.00%
CD3265-40Q	Quadra Assura™ CRT-D	418	3.60%	0	0.00%	1	0.24%	0	0.00%	0	0.00%	0	0.00%	0	0.00%	0	0.00%	0	0.00%	1	0.24%
CD3249-40Q	Unify Quadra™ CRT-D	991	2.60%	0	0.00%	0	0.00%	0	0.00%	0	0.00%	0	0.00%	0	0.00%	0	0.00%	0	0.00%	0	0.00%
CD3249-40	Unify Quadra™ CRT-D	242	4.10%	0	0.00%	0	0.00%	0	0.00%	0	0.00%	0	0.00%	0	0.00%	0	0.00%	0	0.00%	0	0.00%
CD3231-40Q	Unify [™] CRT-D	1,677	6.00%	0	0.00%	0	0.00%	1	0.06%	0	0.00%	0	0.00%	0	0.00%	5	0.30%	2	0.12%	8	0.48%
CD3231-40	Unify [™] CRT-D	681	8.40%	0	0.00%	1	0.15%	0	0.00%	0	0.00%	0	0.00%	0	0.00%	0	0.00%	0	0.00%	1	0.15%
CD3211-36Q	Promote [™] + CRT-D	854	21.30%	1	0.12%	0	0.00%	1	0.12%	0	0.00%	0	0.00%	0	0.00%	1	0.12%	0	0.00%	3	0.35%
CD3211-36	Promote [™] + CRT-D	223	16.60%	0	0.00%	0	0.00%	0	0.00%	0	0.00%	0	0.00%	0	0.00%	0	0.00%	0	0.00%	0	0.00%
3207-36	Promote [™] RF CRT-D	677	31.90%	0	0.00%	0	0.00%	0	0.00%	0	0.00%	0	0.00%	0	0.00%	0	0.00%	2	0.30%	2	0.30%

					Malfunctions w/o Compromised Therapy																
		Number of Devices	Percent		trical oonent		trical onnect	Ba	ttery		Voltage acitor		ware/ ware	Mech	anical	Bat	le Early ttery letion	Ot	her	Тс	otal
Models	Family	Enrolled	Returned for Analysis	Qty.	Rate	Qty.	Rate	Qty.	Rate	Qty.	Rate	Qty.	Rate	Qty.	Rate	Qty.	Rate	Qty.	Rate	Qty.	Rate
CD3365-40Q	Quadra Assura™ CRT-D	163	3.70%	0	0.00%	0	0.00%	0	0.00%	0	0.00%	0	0.00%	0	0.00%	0	0.00%	0	0.00%	0	0.00%
CD3357-40Q	Unify Assura™ CRT-D	101	2.00%	0	0.00%	0	0.00%	0	0.00%	0	0.00%	0	0.00%	0	0.00%	0	0.00%	0	0.00%	0	0.00%
CD3265-40Q	Quadra Assura™ CRT-D	418	3.60%	0	0.00%	0	0.00%	0	0.00%	0	0.00%	0	0.00%	0	0.00%	0	0.00%	0	0.00%	0	0.00%
CD3249-40Q	Unify Quadra™ CRT-D	991	2.60%	0	0.00%	0	0.00%	0	0.00%	0	0.00%	0	0.00%	0	0.00%	0	0.00%	0	0.00%	0	0.00%
CD3249-40	Unify Quadra™ CRT-D	242	4.10%	0	0.00%	0	0.00%	0	0.00%	0	0.00%	0	0.00%	0	0.00%	0	0.00%	0	0.00%	0	0.00%
CD3231-40Q	Unify [™] CRT-D	1,677	6.00%	1	0.06%	0	0.00%	0	0.00%	0	0.00%	0	0.00%	0	0.00%	1	0.06%	0	0.00%	2	0.12%
CD3231-40	Unify [™] CRT-D	681	8.40%	0	0.00%	0	0.00%	2	0.29%	0	0.00%	1	0.15%	0	0.00%	0	0.00%	0	0.00%	3	0.44%
CD3211-36Q	Promote [™] + CRT-D	854	21.30%	1	0.12%	0	0.00%	1	0.12%	0	0.00%	0	0.00%	1	0.12%	0	0.00%	0	0.00%	3	0.35%
CD3211-36	Promote [™] + CRT-D	223	16.60%	0	0.00%	0	0.00%	0	0.00%	0	0.00%	1	0.45%	0	0.00%	0	0.00%	0	0.00%	1	0.45%
3207-36	Promote [™] RF CRT-D	677	31.90%	1	0.15%	0	0.00%	1	0.15%	0	0.00%	0	0.00%	0	0.00%	1	0.15%	1	0.15%	4	0.59%

CARDIAC RESYNCHRONIZATION THERAPY (CRT) DEVICES

CRT Pacemakers

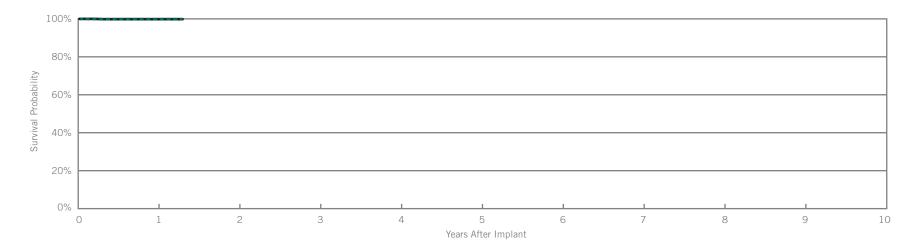


Customer Reported Performance Data

Allure[™] RF CRT-P

odel PM3222		
US Regulatory Approval	March 2014	
Registered US Implants	1,857	
Estimated Active US Implants	1,693	
Estimated Longevity	8 Years	
Normal Battery Depletion	0	
Number of US Advisories	None	

	w/ Cor	unctions npromised herapy	Malfunctions w/o Compromis Therapy	
	Qty	Rate	Qty	Rate
Electrical Component	0	0.00%	0	0.00%
Electrical Interconnect	0	0.00%	0	0.00%
Battery	0	0.00%	0	0.00%
Software/Firmware	0	0.00%	0	0.00%
Mechanical	0	0.00%	1	0.05%
Possible Early Battery Depletion	0	0.00%	0	0.00%
Other	0	0.00%	0	0.00%
Total	0	0.00%	1	0.05%



Including Normal Battery Depletion

Year	1	at 16 months				
Survival Probability	99.84%	99.84%				
± 1 standard error	0.11%	0.11%				
Sample Size	1,130	210				

Year	1	at 16 months				
Survival Probability	99.84%	99.84%				
± 1 standard error	0.11%	0.11%				



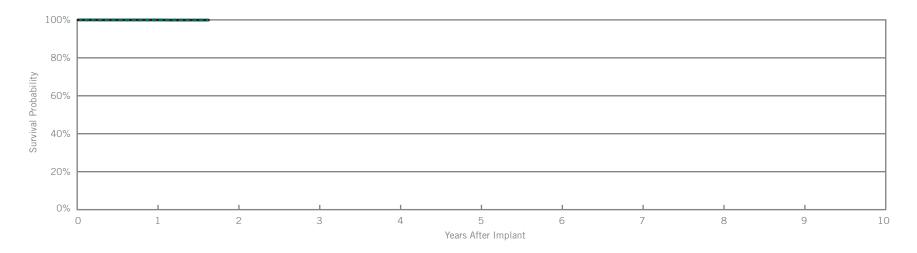
Customer Reported Performance Data

Allure Quadra[™] RF CRT-P

Model PM3242

US Regulatory Approval	March 2014
Registered US Implants	12,440
Estimated Active US Implants	11,307
Estimated Longevity	8 Years
Normal Battery Depletion	0
Number of US Advisories	None

	w/ Co	functions mpromised herapy	Malfunctions w/o Compromise Therapy		
	Qty	Rate	Qty	Rate	
Electrical Component	0	0.00%	0	0.00%	
Electrical Interconnect	0	0.00%	0	0.00%	
Battery	0	0.00%	0	0.00%	
Software/Firmware	0	0.00%	0	0.00%	
Mechanical	1	<0.01%	2	0.02%	
Possible Early Battery Depletion	0	0.00%	0	0.00%	
Other	0	0.00%	0	0.00%	
Total	1	<0.01%	2	0.02%	



Including Normal Battery Depletion

Year	1	at 20 months				
Survival Probability	99.96%	99.90%				
± 1 standard error	0.02%	0.05%				
Sample Size	8,100	460				

Year	1	at 20 months				
Survival Probability	99.96%	99.90%				
± 1 standard error	0.02%	0.05%				



One

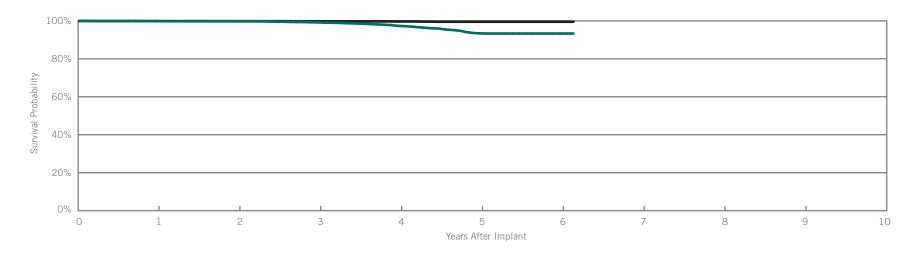
Customer Reported Performance Data

Anthem[™] RF CRT-P

Number of US Advisories (see pgs. 296-300)

I	Model PM3210	
	US Regulatory Approval	July 2009
	Registered US Implants	20,440
	Estimated Active US Implants	12,647
	Estimated Longevity	8 Years
	Normal Battery Depletion	119

	w/ Co	functions mpromised herapy	w/o Co	functions ompromised herapy
	Qty	Rate	Qty	Rate
Electrical Component	3	0.01%	2	<0.01%
Electrical Interconnect	3	0.01%	0	0.00%
Battery	0	0.00%	0	0.00%
Software/Firmware	0	0.00%	5	0.02%
Mechanical	0	0.00%	0	0.00%
Possible Early Battery Depletion	1	<0.01%	2	<0.01%
Other	0	0.00%	7	0.03%
Total	7	0.03%	16	0.08%



Including Normal Battery Depletion

Year	1	2	3	4	5	6	at 74 months		
Survival Probability	99.84%	99.77%	99.22%	97.36%	93.43%	93.33%	93.33%		
± 1 standard error	0.03%	0.03%	0.08%	0.17%	0.38%	0.40%	0.40%		
Sample Size	18,750	15,050	10,700	6,640	3,420	1,110	220		

Year	1	2	3	4	5	6	at 74 months		
Survival Probability	99.87%	99.82%	99.76%	99.69%	99.54%	99.54%	99.54%		
± 1 standard error	0.03%	0.03%	0.04%	0.04%	0.08%	0.08%	0.08%		



Cardiac Resynchronization Therapy (CRT) Devices

Actively Monitored Study Data

Anthem[™] RF CRT-P

0%

del PM3210				Mal w/ Co T	functions mpromised herapy	w/o Co	functions ompromise herapy
IS Regulatory Approval	July 2009	Qualifying Complications		Qty	Rate	Qty	Rate
lumber of Devices Enrolled in Study	199	None Reported	Electrical Component	0	0.00%	0	0.00%
ctive Devices Enrolled in Study	32		Electrical Interconnect	0	0.00%	0	0.00
umulative Months of Follow-up	4,341		Battery	0	0.00%	0	0.00
stimated Longevity	8 Years		Software/Firmware	0	0.00%	0	0.00
			Mechanical	0	0.00%	0	0.00
			Possible Early Battery Depletion	0	0.00%	0	0.00
			Other	0	0.00%	0	0.00
			Total	0	0.00%	0	0.00
100%							7
80%							-
80%							

5	
Years After Implant	

Year	1	2	at 28 months				
Survival Probability	100.00%	100.00%	100.00%				
± 1 standard error	0.00%	0.00%	0.00%				
Sample Size	170	100	50				

CRT Pacemakers



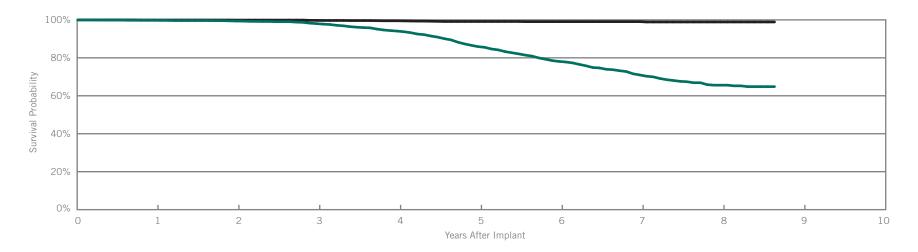
Customer Reported Performance Data

Frontier[™] II CRT-P

Model 5586

US Regulatory Approval	August 2004
Registered US Implants	6,909
Estimated Active US Implants	1,371
Estimated Longevity	6.5 Years
Normal Battery Depletion	376
Number of US Advisories	None

	w/ Cor	unctions npromised herapy	Malfunctions w/o Compromised Therapy		
	Qty	Rate	Qty	Rate	
Electrical Component	0	0.00%	7	0.10%	
Electrical Interconnect	0	0.00%	0	0.00%	
Battery	0	0.00%	0	0.00%	
Software/Firmware	0	0.00%	0	0.00%	
Mechanical	0	0.00%	0	0.00%	
Possible Early Battery Depletion	0	0.00%	7	0.10%	
Other	1	0.01%	3	0.04%	
Total	1	0.01%	17	0.25%	



Including Normal Battery Depletion

Year	1	2	3	4	5	6	7	8	at 104 months	
Survival Probability	99.76%	99.39%	98.04%	94.08%	85.90%	78.11%	70.97%	65.59%	64.82%	
± 1 standard error	0.06%	0.10%	0.19%	0.36%	0.56%	0.71%	0.84%	1.05%	1.10%	
Sample Size	6,250	5,210	4,480	3,800	3,130	2,460	1,620	770	220	

Year	1	2	3	4	5	6	7	8	at 104 months	
Survival Probability	99.93%	99.89%	99.72%	99.52%	99.15%	99.07%	99.07%	98.89%	98.89%	
± 1 standard error	0.03%	0.03%	0.07%	0.11%	0.15%	0.16%	0.16%	0.21%	0.21%	



SUMMARY INFORMATION

CRT Pacemakers



Survival Summary

Including Normal Battery Depletion

		Survival Probability									
Models	Family	1 year	2 year	3 year	4 year	5 year	6 year	7 year	8 year	9 year	10 year
PM3222	Allure [™] RF CRT-P*	99.84%									
PM3242	Allure Quadra™ RF CRT-P	99.96%									
PM3210	Anthem [™] RF CRT-P	99.84%	99.77%	99.22%	97.36%	93.43%	93.33%				
5586	Frontier [™] II CRT-P	99.76%	99.39%	98.04%	94.08%	85.90%	78.11%	70.97%	65.59%		

			Survival Probability									
Models	Family	1 year	year 2 year 3 year 4 year 5 year 6 year 7 year 8 year 9 year 1									
PM3222	Allure [™] RF CRT-P*	99.84%	2 year	Jyean	- year	Jyean	0 year	7 year	0 year	Jyean	10 year	
PM3242	Allure Quadra™ RF CRT-P	99.96%										
PM3210	Anthem [™] RF CRT-P	99.87%	99.82%	99.76%	99.69%	99.54%	99.54%					
5586	Frontier™ II CRT-P	99.93%	99.89%	99.72%	99.52%	99.15%	99.07%	99.07%	98.89%			



U.S. Malfunction Summary

				U.S. Malfunctions w/ Compromised Therapy															
		Registered	Percent Returned for		trical ponent		trical onnect	Bat	ttery		ware/ ware	Mech	anical	Ba	le Early ttery letion	Ot	her	Тс	otal
Models	Family	US Implants	Analysis	Qty.	Rate	Qty.	Rate	Qty.	Rate	Qty.	Rate	Qty.	Rate	Qty.	Rate	Qty.	Rate	Qty.	Rate
PM3222	Allure [™] RF CRT-P	1,857	0.80%	0	0.00%	0	0.00%	0	0.00%	0	0.00%	0	0.00%	0	0.00%	0	0.00%	0	0.00%
PM3242	Allure Quadra™ RF CRT-P	12,440	0.60%	0	0.00%	0	0.00%	0	0.00%	0	0.00%	1	<0.01%	0	0.00%	0	0.00%	1	<0.01%
PM3210	Anthem [™] RF CRT-P	20,440	4.30%	3	0.01%	3	0.01%	0	0.00%	0	0.00%	0	0.00%	1	<0.01%	0	0.00%	7	0.03%
5586	Frontier [™] II CRT-P	6,909	14.30%	0	0.00%	0	0.00%	0	0.00%	0	0.00%	0	0.00%	0	0.00%	1	0.01%	1	0.01%

									U.9	6. Malfun	ctions w/o	Compron	nised Ther	ару					
		Deviatored	Percent Returned for				Electrical Interconnect				Software/ ry Firmware		Mechanical		le Early ttery letion	Other		То	otal
Models	Family	Registered US Implants		Qty.	Rate	Qty.	Rate	Qty.	Rate	Qty.	Rate	Qty.	Rate	Qty.	Rate	Qty.	Rate	Qty.	Rate
PM3222	Allure [™] RF CRT-P	1,857	0.80%	0	0.00%	0	0.00%	0	0.00%	0	0.00%	1	0.05%	0	0.00%	0	0.00%	1	0.05%
PM3242	Allure Quadra™ RF CRT-P	12,440	0.60%	0	0.00%	0	0.00%	0	0.00%	0	0.00%	2	0.02%	0	0.00%	0	0.00%	2	0.02%
PM3210	Anthem [™] RF CRT-P	20,440	4.30%	2	<0.01%	0	0.00%	0	0.00%	5	0.02%	0	0.00%	2	<0.01%	7	0.03%	16	0.08%
5586	Frontier [™] II CRT-P	6,909	14.30%	7	0.10%	0	0.00%	0	0.00%	0	0.00%	0	0.00%	7	0.10%	3	0.04%	17	0.25%



Worldwide Malfunction Summary

				Worldwide Malfunctions w/ Compromised Therapy															
		Worldwide	Percent Returned for		trical ponent		trical onnect	Bat	ttery		ware/ ware	Mech	anical	Bat	le Early ttery letion	Ot	her	To	otal
Models	Family	Sales	Analysis	Qty.	Rate	Qty.	Rate	Qty.	Rate	Qty.	Rate	Qty.	Rate	Qty.	Rate	Qty.	Rate	Qty.	Rate
PM3222	Allure [™] RF CRT-P	7,164	0.82%	0	0.00%	0	0.00%	0	0.00%	0	0.00%	0	0.00%	0	0.00%	0	0.00%	0	0.00%
PM3242	Allure Quadra™ RF CRT-P	24,496	0.96%	0	0.00%	0	0.00%	0	0.00%	0	0.00%	1	<0.01%	0	0.00%	0	0.00%	1	<0.01%
PM3210	Anthem [™] RF CRT-P	21,058	5.21%	3	0.01%	3	0.01%	0	0.00%	0	0.00%	0	0.00%	1	<0.01%	0	0.00%	7	0.03%

				Worldwide Malfunctions w/o Compromised Therapy															
		Worldwide	Percent Returned for		trical oonent		trical onnect	Battery		Software/ Firmware		Mechanical		Possible Early Battery Depletion		Other		Тс	otal
Models	Family	Sales	Analysis	Qty.	Rate	Qty.	Rate	Qty.	Rate	Qty.	Rate	Qty.	Rate	Qty.	Rate	Qty.	Rate	Qty.	Rate
PM3222	Allure [™] RF CRT-P	7,164	0.82%	0	0.00%	0	0.00%	0	0.00%	0	0.00%	1	0.01%	0	0.00%	0	0.00%	1	0.01%
PM3242	Allure Quadra™ RF CRT-P	24,496	0.96%	0	0.00%	0	0.00%	0	0.00%	0	0.00%	2	<0.01%	0	0.00%	0	0.00%	2	<0.01%
PM3210	Anthem [™] RF CRT-P	21,058	5.21%	1	<0.01%	0	0.00%	0	0.00%	5	0.02%	0	0.00%	2	<0.01%	7	0.03%	15	0.07%



LEFT-HEART LEADS



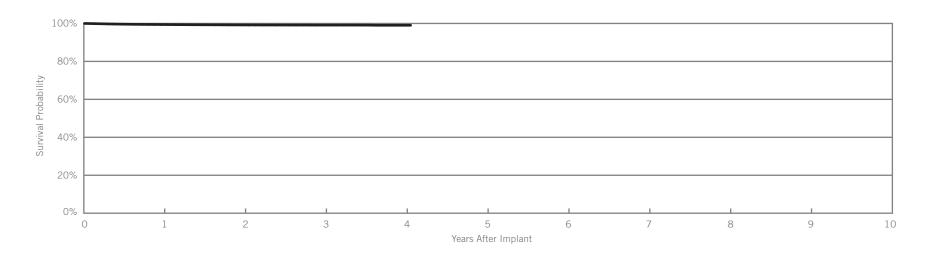
Left-Heart Leads

Customer Reported Performance Data

Quartet[™] Model 1458Q

US Regulatory Approval	November 2011
Registered US Implants	82,351
Estimated Active US Implants	69,487
Insulation	Optim [™] *
Type and/or Fixation	S-Curve
Polarity	Quadpolar
Steroid	Yes
Number of US Advisories	None

		bservations		omplications	Malfunctions	Qty.	Rate
	(Post Impla Qty.	int, ≤30 days) Rate	(>3) Qty.	0 days) Rate	Conductor Fracture	1	<0.01%
Orandia a Desferration					Clavicular Crush	0	0.00%
Cardiac Perforation	2	<0.01%	2	<0.01%	In the Pocket	1	<0.01%
Conductor Fracture	0	0.00%	4	<0.01%	Intravascular	0	0.00%
Lead Dislodgement	110	0.13%	387	0.47%		0	
Failure to Capture	45	0.05%	126	0.15%	Insulation Breach	1	<0.01%
Oversensing	2	<0.01%	4	<0.01%	Lead-to-Can Contact	0	0.00%
Failure to Sense	0	0.00%	0	0.00%	Lead-to-Lead Contact	0	0.00%
Insulation Breach	1	<0.01%	2	<0.01%	Clavicular Crush	0	0.00%
Abnormal Pacing Impedance	4	<0.01%	19	0.02%	Externalized Conductors	0	0.00%
Extracardiac Stimulation	57	0.07%	77	0.09%	Other	1	<0.01%
Other	66	0.08%	19	0.02%	Crimps, Welds & Bonds	0	0.00%
Total	287	0.35%	640	0.78%	Other	7	<0.01%
Total Returned for Analysis	111		280		Extrinsic Factors	276	0.34%
······································					Total	285	0.35%



Year	1	2	3	4	at 49 months			
Survival Probability	99.41%	99.20%	99.12%	99.02%	99.02%			
± 1 standard error	0.03%	0.04%	0.04%	0.07%	0.07%			
Sample Size	64,480	35,160	16,910	5,250	400			

*Optim[™] lead insulation is a copolymer of silicone and polyurethane.



Left-Heart Leads

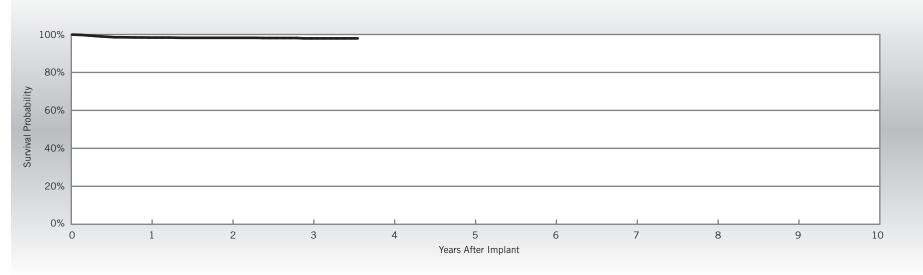
Actively Monitored Study Data

Quartet[™] Model 1458Q

US Regulatory Approval	Nov 2011
Number of Devices Enrolled in Study	2,030
Active Devices Enrolled in Study	1,383
Cumulative Months of Follow-up	51,521
Insulation	Optim [™] *
Type and/or Fixation	S-Curve
Polarity	Quadpolar
Steroid	Yes

Qualifying Complications	Qtv.	Rate
Abnormal Pacing Impedance	1	0.05%
Extracardiac Stimulation	3	0.15%
Failure to Capture	1	0.05%
Lead Dislodgement	30	1.48%

Malfunctions	Qty	Rate
Conductor Fracture	0	0.00%
Clavicular Crush	0	0.00%
In the Pocket	0	0.00%
Intravascular	0	0.00%
Insulation Breach	0	0.00%
Lead-to-Can Contact	0	0.00%
Lead-to-Lead Contact	0	0.00%
Clavicular Crush	0	0.00%
Externalized Conductors	0	0.00%
Other	0	0.00%
Crimps, Welds & Bonds	0	0.00%
Other	0	0.00%
Extrinsic Factors	17	0.84%
Total	17	0.84%



Year	1	2	3	at 43 months		
Survival Probability	98.38%	98.25%	97.95%	97.95%		
± 1 standard error	0.28%	0.30%	0.38%	0.38%		
Sample Size	1,870	1,550	880	70		

*Optim[™] lead insulation is a copolymer of silicone and polyurethane.

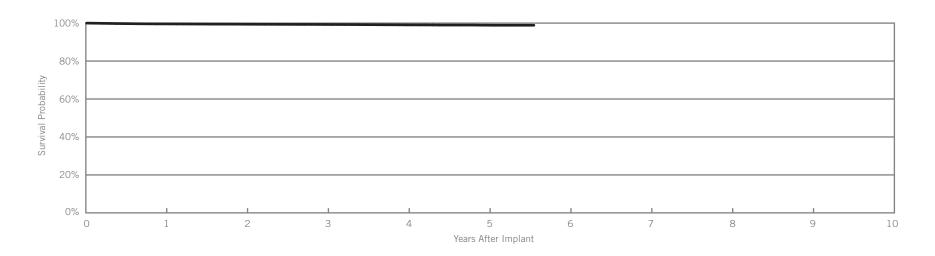


Customer Reported Performance Data

QuickFlex[™] µ Model 1258T

US Regulatory Approval	May 2010
Registered US Implants	44,487
Estimated Active US Implants	29,778
Insulation	Optim [™] *
Type and/or Fixation	S-Curve
Polarity	Bipolar
Steroid	Yes
Number of US Advisories	None

	Acute Observations			omplications	Malfunctions	Qty.	Rate
	(Post Implai Qty.	nt, ≤30 days) Rate	(>3 Qty.	0 days) Rate	Conductor Fracture	5	0.01%
Cardiac Perforation	0	0.00%	0. C	0.00%	Clavicular Crush	1	<0.01%
	0		-		In the Pocket	1	< 0.01%
Conductor Fracture	0	0.00%	11	0.02%	Intravascular	3	<0.01%
Lead Dislodgement	44	0.10%	152	0.34%			
Failure to Capture	16	0.04%	98	0.22%	Insulation Breach	1	<0.01%
Oversensing	0	0.00%	8	0.02%	Lead-to-Can Contact	0	0.00%
Failure to Sense	1	<0.01%	1	<0.01%	Lead-to-Lead Contact	0	0.00%
Insulation Breach	0	0.00%	3	<0.01%	Clavicular Crush	0	0.00%
Abnormal Pacing Impedance	5	0.01%	24	0.05%	Externalized Conductors	0	0.00%
Extracardiac Stimulation	19	0.04%	51	0.11%	Other	1	<0.01%
Other	12	0.03%	5	0.01%	Crimps, Welds & Bonds	0	0.00%
Total	97	0.22%	353	0.79%	Other	1	<0.01%
Total Returned for Analysis	50		165		Extrinsic Factors	182	0.41%
Hulysis			-00		Total	189	0.42%



Year	1	2	3	4	5	at 67 months		
Survival Probability	99.58%	99.42%	99.29%	99.07%	98.89%	98.86%		
± 1 standard error	0.03%	0.04%	0.04%	0.06%	0.07%	0.08%		
Sample Size	40,230	31,880	23,530	15,730	7,870	510		

*Optim[™] lead insulation is a copolymer of silicone and polyurethane.



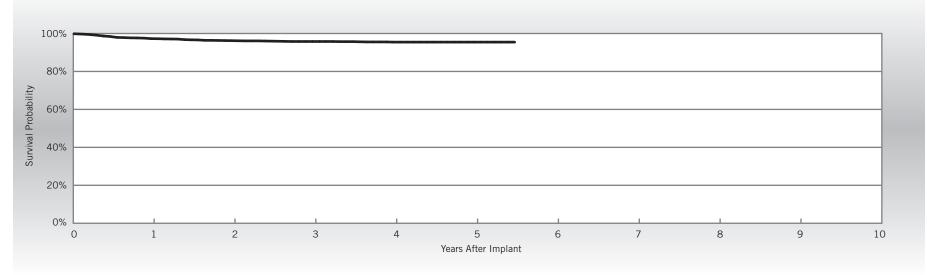
Actively Monitored Study Data

QuickFlex[™] µ Model 1258T

US Regulatory Approval	May 2010
Number of Devices Enrolled in Study	2,355
Active Devices Enrolled in Study	1,242
Cumulative Months of Follow-up	86,807
Insulation	Optim [™] *
Type and/or Fixation	S-Curve
Polarity	Bipolar
Steroid	Yes

Qualifying Complications	Qty.	Rate
Abnormal Pacing Impedance	6	0.25%
Conductor Fracture	1	0.04%
Extracardiac Stimulation	6	0.25%
Failure to Capture	32	1.36%
Lead Dislodgement	45	1.91%

Malfunctions	Qty	Rate
Conductor Fracture	1	0.04%
Clavicular Crush	1	0.04%
In the Pocket	0	0.00%
Intravascular	0	0.00%
Insulation Breach	0	0.00%
Lead-to-Can Contact	0	0.00%
Lead-to-Lead Contact	0	0.00%
Clavicular Crush	0	0.00%
Externalized Conductors	0	0.00%
Other	0	0.00%
Crimps, Welds & Bonds	0	0.00%
Other	0	0.00%
Extrinsic Factors	31	1.32%
Total	32	1.36%



Year	1	2	3	4	5	at 66 months		
Survival Probability	97.30%	96.22%	95.78%	95.46%	95.46%	95.46%		
± 1 standard error	0.33%	0.42%	0.45%	0.47%	0.48%	0.48%		
Sample Size	2,150	1,790	1,520	1,210	590	50		

*Optim[™] lead insulation is a copolymer of silicone and polyurethane.



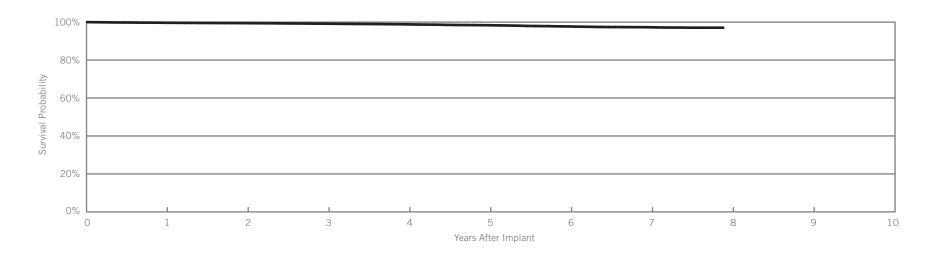
Customer Reported Performance Data

QuickFlex™

Model 1156T

US Regulatory Approval	July 2007	
Registered US Implants	27,639	
Estimated Active US Implants	13,617	Cardiac Per
Insulation	Polyurethane/Silicone	
Type and/or Fixation	S-Curve	Conductor l
Polarity	Bipolar	Failure to C
Steroid	Yes	Oversensing
Number of US Advisories	One	Failure to S
(see pg. 301)		Insulation E

	Acute Observations			omplications	Malfunctions	Qty.	Rate
	(Post Impla Qty.	nt, ≤30 days) Rate	(>3 Qty.	0 days) Rate	Conductor Fracture	5	0.02%
Cardian Derforation	0	0.00%	0	0.00%	Clavicular Crush	0	0.00%
Cardiac Perforation					In the Pocket	0	0.00%
Conductor Fracture	0	0.00%	5	0.02%	Intravascular	5	0.02%
Lead Dislodgement	11	0.04%	122	0.44%			
Failure to Capture	4	0.01%	149	0.54%	Insulation Breach	70	0.25%
Oversensing	0	0.00%	10	0.04%	Lead-to-Can Contact	0	0.00%
Failure to Sense	0	0.00%	0	0.00%	Lead-to-Lead Contact	2	<0.01%
Insulation Breach	0	0.00%	35	0.13%	Clavicular Crush	0	0.00%
Abnormal Pacing Impedance	0	0.00%	43	0.16%	Externalized Conductors	13	0.05%
Extracardiac Stimulation	13	0.05%	70	0.25%	Other	55	0.20%
Other	9	0.03%	5	0.02%	Crimps, Welds & Bonds	0	0.00%
Total	37	0.13%	439	1.59%	Other	0	0.00%
Total Returned for Analysis	14		140		Extrinsic Factors	122	0.44%
		1	1.0		Total	197	0.71%



Year	1	2	3	4	5	6	7	at 95 months	
Survival Probability	99.67%	99.47%	99.19%	98.82%	98.35%	97.70%	97.30%	97.06%	
± 1 standard error	0.03%	0.05%	0.06%	0.07%	0.09%	0.12%	0.15%	0.19%	
Sample Size	25,380	21,760	19,340	17,200	14,310	9,980	5,100	300	



Actively Monitored Study Data

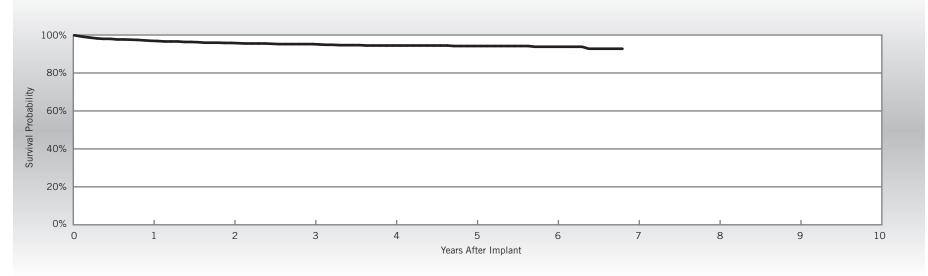
QuickFlex™

Model 1156T

US Regulatory Approval	July 2007
Number of Devices Enrolled in Study	982
Active Devices Enrolled in Study	355
Cumulative Months of Follow-up	41,167
Insulation	Polyurethane/Silicone
Type and/or Fixation	S-Curve
Polarity	Bipolar
Steroid	Yes

Qualifying Complications	Qty.	Rate
Abnormal Pacing Impedance	1	0.10%
Extracardiac Stimulation	15	1.53%
Failure to Capture	8	0.81%
Lead Dislodgement	24	2.44%

Malfunctions	Qty	Rate
Conductor Fracture	0	0.00%
Clavicular Crush	0	0.00%
In the Pocket	0	0.00%
Intravascular	0	0.00%
Insulation Breach	1	0.10%
Lead-to-Can Contact	0	0.00%
Lead-to-Lead Contact	0	0.00%
Clavicular Crush	0	0.00%
Externalized Conductors	0	0.00%
Other	1	0.10%
Crimps, Welds & Bonds	0	0.00%
Other	0	0.00%
Extrinsic Factors	17	1.73%
Total	18	1.83%



Year	1	2	3	4	5	6	at 82 months		
Survival Probability	96.97%	95.83%	95.22%	94.47%	94.20%	93.82%	92.78%		
± 1 standard error	0.54%	0.67%	0.74%	0.82%	0.86%	0.94%	1.39%		
Sample Size	900	750	610	480	370	250	50		

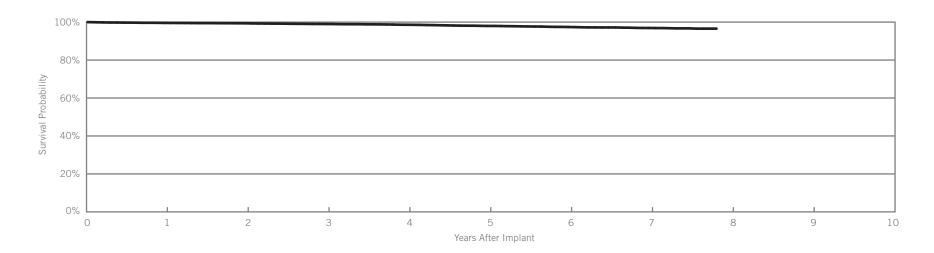


QuickFlex[™] XL

Model 1158T

US Regulatory Approval	July 2007
Registered US Implants	15,333
Estimated Active US Implants	7,691
Insulation	Polyurethane/Silicone
Type and/or Fixation	S-Curve
Polarity	Bipolar
Steroid	Yes
Number of US Advisories (see pg. 301)	One

		Acute Observations Chronic Complications		Malfunctions	Qty.	Rate	
	(Post Impla Qty.	nt, ≤30 days) Rate	(>3 Qty.	0 days) Rate	Conductor Fracture	5	0.03%
Cardiac Perforation	0	0.00%	0. C	0.00%	Clavicular Crush	0	0.00%
					In the Pocket	1	<0.01%
Conductor Fracture	0	0.00%	3	0.02%	Intravascular	4	0.03%
Lead Dislodgement	9	0.06%	85	0.55%	Insulation Breach	44	0.29%
Failure to Capture	2	0.01%	106	0.69%			
Oversensing	0	0.00%	1	<0.01%	Lead-to-Can Contact	0	0.00%
Failure to Sense	0	0.00%	1	<0.01%	Lead-to-Lead Contact	2	0.01%
Insulation Breach	0	0.00%	28	0.18%	Clavicular Crush	0	0.00%
Abnormal Pacing Impedance	2	0.01%	19	0.12%	Externalized Conductors	7	0.05%
Extracardiac Stimulation	6	0.04%	26	0.17%	Other	35	0.23%
Other	6	0.04%	6	0.04%	Crimps, Welds & Bonds	1	<0.01%
Total	25	0.16%	275	1.79%	Other	0	0.00%
Total Returned for Analysis	13		101		Extrinsic Factors	81	0.53%
Tetal Retained to: Analysis	10		-01		Total	131	0.85%



Year	1	2	3	4	5	6	7	at 94 months	
Survival Probability	99.59%	99.41%	99.05%	98.67%	98.06%	97.50%	96.99%	96.63%	
± 1 standard error	0.05%	0.07%	0.09%	0.11%	0.13%	0.17%	0.22%	0.29%	
Sample Size	14,100	12,130	10,810	9,600	7,810	5,290	2,780	320	



Actively Monitored Study Data

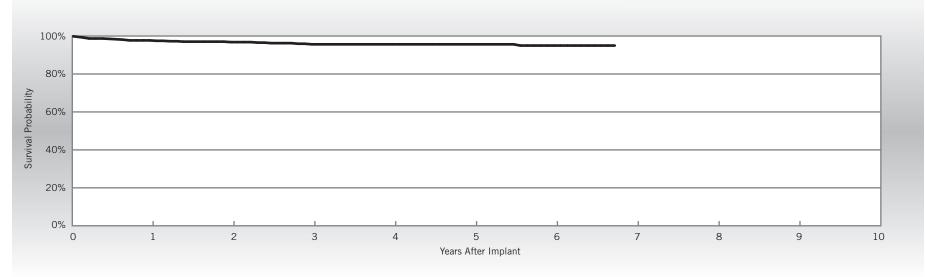
QuickFlex[™] XL

Model 1158T

US Regulatory Approval	July 2007
Number of Devices Enrolled in Study	559
Active Devices Enrolled in Study	177
Cumulative Months of Follow-up	23,358
Insulation	Polyurethane/Silicone
Type and/or Fixation	S-Curve
Polarity	Bipolar
Steroid	Yes

Qualifying Complications	Qty.	Rate
Extracardiac Stimulation	9	1.61%
Failure to Capture	4	0.72%
Insulation Breach	1	0.18%
Lead Dislodgement	6	1.07%
Skin Erosion	1	0.18%

Malfunctions	Qty	Rate
Conductor Fracture	0	0.00%
Clavicular Crush	0	0.00%
In the Pocket	0	0.00%
Intravascular	0	0.00%
Insulation Breach	1	0.18%
Lead-to-Can Contact	0	0.00%
Lead-to-Lead Contact	0	0.00%
Clavicular Crush	0	0.00%
Externalized Conductors	1	0.18%
Other	0	0.00%
Crimps, Welds & Bonds	0	0.00%
Other	0	0.00%
Extrinsic Factors	7	1.25%
Total	8	1.43%



Year	1	2	3	4	5	6	at 81 months		
Survival Probability	97.70%	96.79%	95.63%	95.63%	95.63%	94.98%	94.98%		
± 1 standard error	0.66%	0.75%	0.93%	0.97%	0.97%	1.17%	1.17%		
Sample Size	510	430	350	270	200	140	50		



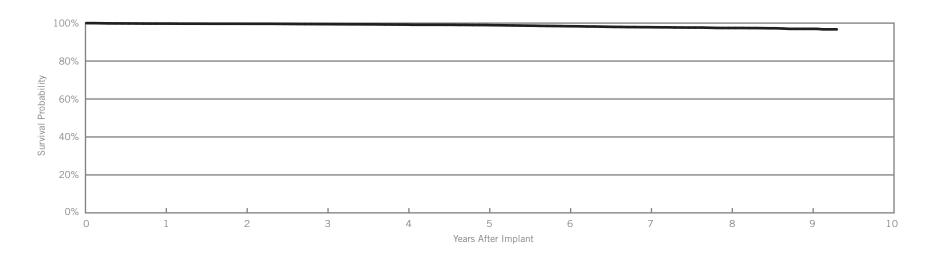
Customer Reported Performance Data

QuickSite[™] XL

Model 1058T

February 2006
9,951
4,010
Polyurethane/Silicone
S-Curve
Bipolar
Yes
One

		Acute Observations Chronic Complications			Malfunctions	Qty.	Rate
	(Post Impla Qty.	nt, ≤30 days) Rate	(>3) Qty.	0 days) Rate	Conductor Fracture	2	0.02%
Cardiac Perforation		0.00%			Clavicular Crush	0	0.00%
	0		0	0.00%	In the Pocket	0	0.00%
Conductor Fracture	0	0.00%	2	0.02%	Intravascular	2	0.02%
Lead Dislodgement	10	0.10%	29	0.29%		_	
Failure to Capture	3	0.03%	69	0.69%	Insulation Breach	21	0.21%
Oversensing	1	0.01%	2	0.02%	Lead-to-Can Contact	0	0.00%
Failure to Sense	0	0.00%	2	0.02%	Lead-to-Lead Contact	1	0.01%
Insulation Breach	0	0.00%	29	0.29%	Clavicular Crush	0	0.00%
Abnormal Pacing Impedance	2	0.02%	18	0.18%	Externalized Conductors	6	0.06%
Extracardiac Stimulation	9	0.09%	20	0.20%	Other	14	0.14%
Other	1	0.01%	2	0.02%	Crimps, Welds & Bonds	0	0.00%
Total	26	0.26%	173	1.74%	Other	1	0.01%
Total Returned for Analysis	11		34		Extrinsic Factors	28	0.28%
Total retained to Analysis			34		Total	52	0.52%



Year	1	2	3	4	5	6	7	8	9	at 112 months
Survival Probability	99.74%	99.64%	99.42%	99.20%	98.93%	98.26%	97.78%	97.36%	96.78%	96.53%
± 1 standard error	0.05%	0.06%	0.08%	0.10%	0.12%	0.17%	0.20%	0.23%	0.30%	0.39%
Sample Size	9,180	7,910	6,960	6,140	5,480	4,880	4,230	3,370	1,700	220



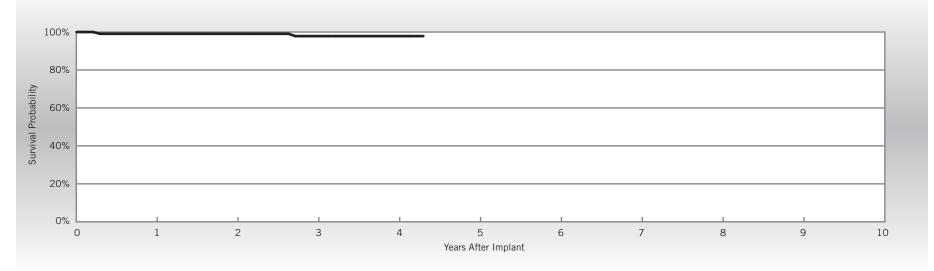
Actively Monitored Study Data

QuickSite[™] XL

Model 1058T

JS Regulatory Approval	February 2006	Qualifying Complications	Qty.	Rate
Number of Devices Enrolled in Study	111	Failure to Capture	2	1.80%
Active Devices Enrolled in Study	42			
Cumulative Months of Follow-up	5,605			
nsulation	Polyurethane/Silicone			
Type and/or Fixation	S-Curve			
Polarity	Bipolar			
Steroid	Yes			

Malfunctions	Qty	Rate
Conductor Fracture	0	0.00%
Clavicular Crush	0	0.00%
In the Pocket	0	0.00%
Intravascular	0	0.00%
Insulation Breach	0	0.00%
Lead-to-Can Contact	0	0.00%
Lead-to-Lead Contact	0	0.00%
Clavicular Crush	0	0.00%
Externalized Conductors	0	0.00%
Other	0	0.00%
Crimps, Welds & Bonds	0	0.00%
Other	0	0.00%
Extrinsic Factors	0	0.00%
Total	0	0.00%



Year	1	2	3	4	at 52 months			
Survival Probability	99.07%	99.07%	97.85%	97.85%	97.85%			
± 1 standard error	0.92%	0.92%	1.52%	1.52%	1.52%			
Sample Size	100	90	80	70	50			



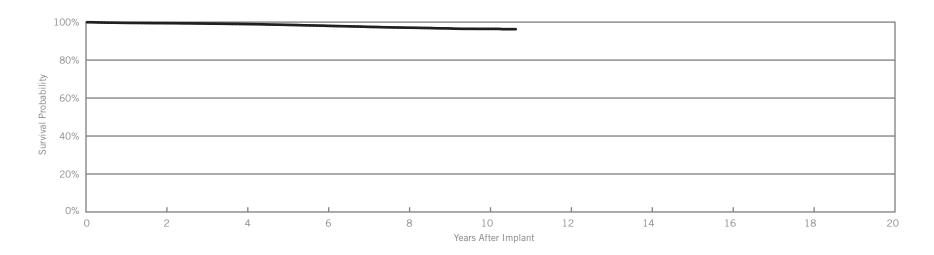
Customer Reported Performance Data

QuickSite™

Model 1056T

	April 2005	US Regulatory Approval
	32,326	Registered US Implants
Cardiac	11,797	Estimated Active US Implants
Cardiac	Polyurethane/Silicone	Insulation
Lead Di	S-Curve	Type and/or Fixation
Failure	Bipolar	Polarity
Overser	Yes	Steroid
Failure	One	Number of US Advisories
Insulatio		(see pg. 301)

		bservations		omplications	Malfunctions	Qty.	Rate
	(Post Impla Qty.	ant, ≤30 days) Rate	(>3 Qty.	0 days) Rate	Conductor Fracture	6	0.02%
Ormalia - Drafamatian			-		Clavicular Crush	0	0.00%
Cardiac Perforation	0	0.00%	0	0.00%	In the Pocket	2	<0.01%
Conductor Fracture	0	0.00%	6	0.02%	Intravascular	4	0.01%
Lead Dislodgement	31	0.10%	158	0.49%			
Failure to Capture	15	0.05%	247	0.76%	Insulation Breach	80	0.25%
Oversensing	2	<0.01%	19	0.06%	Lead-to-Can Contact	1	<0.01%
Failure to Sense	0	0.00%	1	<0.01%	Lead-to-Lead Contact	11	0.03%
Insulation Breach	1	<0.01%	99	0.31%	Clavicular Crush	0	0.00%
Abnormal Pacing Impedance	3	<0.01%	48	0.15%	Externalized Conductors	31	0.10%
Extracardiac Stimulation	22	0.07%	95	0.29%	Other	37	0.11%
Other	9	0.03%	19	0.06%	Crimps, Welds & Bonds	0	0.00%
Total	83	0.26%	692	2.14%	Other	1	<0.01%
Total Returned for Analysis	27		182		Extrinsic Factors	152	0.47%
ioual recurred to: Analysis	L /		-02		Total	239	0.74%



Year	2	4	6	8	10	at 128 months		
Survival Probability	99.43%	98.96%	98.06%	97.08%	96.45%	96.28%		
± 1 standard error	0.04%	0.06%	0.10%	0.13%	0.16%	0.20%		
Sample Size	25,720	19,970	15,360	11,150	4,000	250		



Actively Monitored Study Data

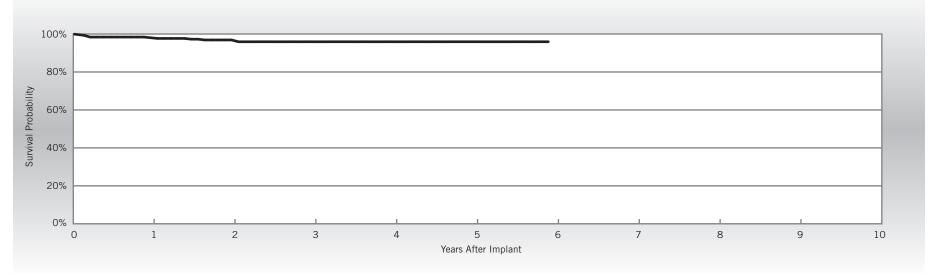
QuickSite™

Model 1056T

US Regulatory Approval	April 2005
Number of Devices Enrolled in Study	321
Active Devices Enrolled in Study	100
Cumulative Months of Follow-up	12,822
Insulation	Polyurethane/Silicone
Type and/or Fixation	S-Curve
Polarity	Bipolar
Steroid	Yes

Qualifying Complications	Qtv.	Rate
Qualitying complications	GLY.	Rate
Abnormal Pacing Impedance	1	0.31%
Extracardiac Stimulation	2	0.62%
Failure to Capture	3	0.93%
Lead Dislodgement	5	1.56%

Malfunctions	Qty	Rate
Conductor Fracture	0	0.00%
Clavicular Crush	0	0.00%
In the Pocket	0	0.00%
Intravascular	0	0.00%
Insulation Breach	0	0.00%
Lead-to-Can Contact	0	0.00%
Lead-to-Lead Contact	0	0.00%
Clavicular Crush	0	0.00%
Externalized Conductors	0	0.00%
Other	0	0.00%
Crimps, Welds & Bonds	0	0.00%
Other	0	0.00%
Extrinsic Factors	4	1.25%
Total	4	1.25%



Year	1	2	3	4	5	at 71 months		
Survival Probability	98.04%	96.87%	95.93%	95.93%	95.93%	95.93%		
± 1 standard error	0.71%	1.03%	1.22%	1.22%	1.22%	1.22%		
Sample Size	300	240	190	140	100	50		



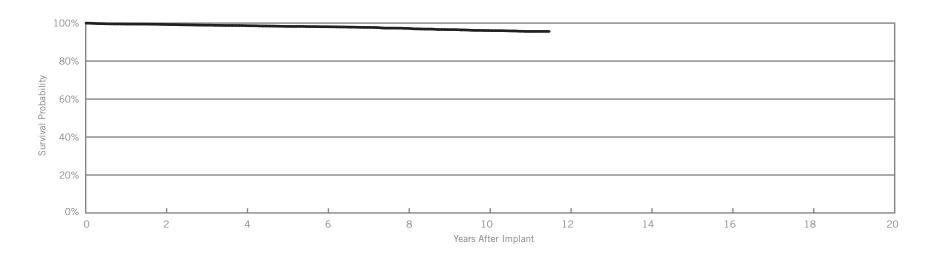
Customer Reported Performance Data

QuickSite™

Model 1056K

June 2004
7,871
2,082
Polyurethane/Silicone
S-Curve
Unipolar
Yes
None

		oservations		omplications	Malfunctions	Qty.	Rate
	(Post Impla Qty.	nt, ≤30 days) Rate	(>30 Qty.) days) Rate	Conductor Fracture	3	0.04%
Cardian Derferentian	Q().	0.00%	-	0.00%	Clavicular Crush	0	0.00%
Cardiac Perforation	0		0		In the Pocket	0	0.00%
Conductor Fracture	0	0.00%	4	0.05%	Intravascular	3	0.04%
Lead Dislodgement	10	0.13%	34	0.43%	Insulation Breach	1	0.01%
Failure to Capture	3	0.04%	66	0.84%		1	
Oversensing	0	0.00%	1	0.01%	Lead-to-Can Contact	0	0.00%
Failure to Sense	0	0.00%	0	0.00%	Lead-to-Lead Contact	1	0.01%
Insulation Breach	0	0.00%	3	0.04%	Clavicular Crush	0	0.00%
Abnormal Pacing Impedance	0	0.00%	7	0.09%	Externalized Conductors	0	0.00%
Extracardiac Stimulation	10	0.13%	31	0.39%	Other	0	0.00%
Other	2	0.03%	10	0.13%	Crimps, Welds & Bonds	0	0.00%
Total	25	0.32%	156	1.98%	Other	0	0.00%
Total Returned for Analysis	13		45		Extrinsic Factors	49	0.62%
					Total	53	0.67%



Year	2	4	6	8	10	at 138 months		
Survival Probability	99.29%	98.65%	98.10%	97.23%	96.09%	95.62%		
± 1 standard error	0.10%	0.15%	0.19%	0.26%	0.35%	0.39%		
Sample Size	6,220	4,660	3,420	2,530	1,820	270		



SUMMARY INFORMATION

Left-Heart Leads



Survival Summary

						Survival P	robability				
Models	Family	1 year	2 year	3 year	4 year	5 year	6 year	7 year	8 year	9 year	10 year
1458Q	Quartet™	99.41%	99.20%	99.12%	99.02%						
1258T	QuickFlex™ µ	99.58%	99.42%	99.29%	99.07%	98.89%					
1156T	QuickFlex™	99.67%	99.47%	99.19%	98.82%	98.35%	97.70%	97.30%			
1158T	QuickFlex [™] XL	99.59%	99.41%	99.05%	98.67%	98.06%	97.50%	96.99%			
1058T	QuickSite [™] XL	99.74%	99.64%	99.42%	99.20%	98.93%	98.26%	97.78%	97.36%	96.78%	
1056T	QuickSite™	99.62%	99.43%	99.23%	98.96%	98.56%	98.06%	97.52%	97.08%	96.69%	96.45%
1056K	QuickSite™	99.50%	99.29%	98.90%	98.65%	98.27%	98.10%	97.73%	97.23%	96.57%	96.09%



Acute Observation Summary

Post Implant ≤30 Days

	US Regulatory	Registered	Estimated Active US		ardiac rforation		nductor acture		.ead dgement		lure to pture	Ov	ersensing		ilure to Sense		sulation Breach	F	onormal Pacing pedance		racardiac mulation		Other	1	īotal	Total Returned for
Models	Approval	US Implants	Implants	Qty.	Rate	Qty.	Rate	Qty.	Rate	Qty.	Rate	Qty.	Rate	Qty.	Rate	Qty.	Rate	Qty.	Rate	Qty.	Rate	Qty.	Rate	Qty.	Rate	Analysis
1458Q	Nov-11	82,351	69,487	2	<0.01%	0	0.00%	110	0.13%	45	0.05%	2	<0.01%	0	0.00%	1	<0.01%	4	<0.01%	57	0.07%	66	0.08%	287	0.35%	111
1258T	May-10	44,487	29,778	0	0.00%	0	0.00%	44	0.10%	16	0.04%	0	0.00%	1	<0.01%	0	0.00%	5	0.01%	19	0.04%	12	0.03%	97	0.22%	50
1156T	Jul-07	27,639	13,617	0	0.00%	0	0.00%	11	0.04%	4	0.01%	0	0.00%	0	0.00%	0	0.00%	0	0.00%	13	0.05%	9	0.03%	37	0.13%	14
1158T	Jul-07	15,333	7,691	0	0.00%	0	0.00%	9	0.06%	2	0.01%	0	0.00%	0	0.00%	0	0.00%	2	0.01%	6	0.04%	6	0.04%	25	0.16%	13
1058T	Feb-06	9,951	4,010	0	0.00%	0	0.00%	10	0.10%	3	0.03%	1	0.01%	0	0.00%	0	0.00%	2	0.02%	9	0.09%	1	0.01%	26	0.26%	11
1056T	Apr-05	32,326	11,797	0	0.00%	0	0.00%	31	0.10%	15	0.05%	2	<0.01%	0	0.00%	1	<0.01%	3	<0.01%	22	0.07%	9	0.03%	83	0.26%	27
1056K	Jun-04	7,871	2,082	0	0.00%	0	0.00%	10	0.13%	3	0.04%	0	0.00%	0	0.00%	0	0.00%	0	0.00%	10	0.13%	2	0.03%	25	0.32%	13

Chronic Complication Summary

>30 Days

	US Regulatory	Registered	Estimated Active US		ardiac foration		nductor acture		ead Igement		lure to pture	Ove	rsensing		ilure to Sense		sulation Breach	P	normal acing oedance		acardiac nulation	c	Ither	т	otal	Total Returned for
Models	Approval	US Implants	Implants	Qty.	Rate	Qty.	Rate	Qty.	Rate	Qty.	Rate	Qty.	Rate	Qty.	Rate	Qty.	Rate	Qty.	Rate	Qty.	Rate	Qty.	Rate	Qty.	Rate	Analysis
1458Q	Nov-11	82,351	69,487	2	<0.01%	4	<0.01%	387	0.47%	126	0.15%	4	<0.01%	0	0.00%	2	<0.01%	19	0.02%	77	0.09%	19	0.02%	640	0.78%	280
1258T	May-10	44,487	29,778	0	0.00%	11	0.02%	152	0.34%	98	0.22%	8	0.02%	1	<0.01%	3	<0.01%	24	0.05%	51	0.11%	5	0.01%	353	0.79%	165
1156T	Jul-07	27,639	13,617	0	0.00%	5	0.02%	122	0.44%	149	0.54%	10	0.04%	0	0.00%	35	0.13%	43	0.16%	70	0.25%	5	0.02%	439	1.59%	140
1158T	Jul-07	15,333	7,691	0	0.00%	3	0.02%	85	0.55%	106	0.69%	1	<0.01%	1	<0.01%	28	0.18%	19	0.12%	26	0.17%	6	0.04%	275	1.79%	101
1058T	Feb-06	9,951	4,010	0	0.00%	2	0.02%	29	0.29%	69	0.69%	2	0.02%	2	0.02%	29	0.29%	18	0.18%	20	0.20%	2	0.02%	173	1.74%	34
1056T	Apr-05	32,326	11,797	0	0.00%	6	0.02%	158	0.49%	247	0.76%	19	0.06%	1	<0.01%	99	0.31%	48	0.15%	95	0.29%	19	0.06%	692	2.14%	182
1056K	Jun-04	7,871	2,082	0	0.00%	4	0.05%	34	0.43%	66	0.84%	1	0.01%	0	0.00%	3	0.04%	7	0.09%	31	0.39%	10	0.13%	156	1.98%	45



U.S. Malfunction Summary

						Conducto	r Fractu	re								Insulatio	n Breac	h												
	Registered US	Percent Returned		icular ush	In the	Pocket	Intrava	ascular	Cond	otal luctor cture		to-Can tact		o-Lead Itact		cular Jsh		nalized luctors	Of	ther	Insu	otal lation each	Wel	nps, ds & nds	Ot	her		insic tors	To	otal
Models	Implants	for Analysis	Qty.	Rate	Qty.	Rate	Qty.	Rate	Qty.	Rate	Qty.	Rate	Qty.	Rate	Qty.	Rate	Qty.	Rate	Qty.	Rate	Qty.	Rate	Qty.	Rate	Qty.	Rate	Qty.	Rate	Qty.	Rate
1458Q	82,351	4.80%	0	0.00%	1	<0.01%	0	0.00%	1	<0.01%	0	0.00%	0	0.00%	0	0.00%	0	0.00%	1	<0.01%	1	<0.01%	0	0.00%	7	<0.01%	276	0.34%	285	0.35%
1258T	44,487	8.70%	1	<0.01%	1	<0.01%	3	<0.01%	5	0.01%	0	0.00%	0	0.00%	0	0.00%	0	0.00%	1	<0.01%	1	<0.01%	0	0.00%	1	<0.01%	182	0.41%	189	0.42%
1156T	27,639	8.00%	0	0.00%	0	0.00%	5	0.02%	5	0.02%	0	0.00%	2	<0.01%	0	0.00%	13	0.05%	55	0.20%	70	0.25%	0	0.00%	0	0.00%	122	0.44%	197	0.71%
1158T	15,333	9.10%	0	0.00%	1	<0.01%	4	0.03%	5	0.03%	0	0.00%	2	0.01%	0	0.00%	7	0.05%	35	0.23%	44	0.29%	1	<0.01%	0	0.00%	81	0.53%	131	0.85%
1058T	9,951	9.00%	0	0.00%	0	0.00%	2	0.02%	2	0.02%	0	0.00%	1	0.01%	0	0.00%	6	0.06%	14	0.14%	21	0.21%	0	0.00%	1	0.01%	28	0.28%	52	0.52%
1056T	32,326	8.90%	0	0.00%	2	<0.01%	4	0.01%	6	0.02%	1	<0.01%	11	0.03%	0	0.00%	31	0.10%	37	0.11%	80	0.25%	0	0.00%	1	<0.01%	152	0.47%	239	0.74%
1056K	7,871	14.80%	0	0.00%	0	0.00%	3	0.04%	3	0.04%	0	0.00%	1	0.01%	0	0.00%	0	0.00%	0	0.00%	1	0.01%	0	0.00%	0	0.00%	49	0.62%	53	0.67%

Worldwide Malfunction Summary

					C	Conductor	r Fractu	re								Insulatio	n Breac	h												
	Worldwide	Percent Returned for		icular ush	In the	Pocket	Intrav	ascular	Cond	tal luctor :ture		to-Can ntact		to-Lead ntact		cular ush		nalized luctors	Ot	her	Insu	otal lation each	Wel	nps, ds & nds	Ot	her		insic tors	To	otal
Models	Sales	Analysis	Qty.	Rate	Qty.	Rate	Qty.	Rate	Qty.	Rate	Qty.	Rate	Qty.	Rate	Qty.	Rate	Qty.	Rate	Qty.	Rate	Qty.	Rate	Qty.	Rate	Qty.	Rate	Qty.	Rate	Qty.	Rate
1458Q	166,114	3.0%	2	<0.01%	6	<0.01%	2	<0.01%	10	0.01%	1	<0.01%	1	<0.01%	1	<0.01%	0	0.00%	3	<0.01%	6	<0.01%	0	0.00%	118	0.07%	454	0.27%	588	0.35%
1258T	142,996	3.5%	7	<0.01%	14	0.01%	10	0.01%	31	0.02%	1	<0.01%	1	<0.01%	1	<0.01%	0	0.00%	3	<0.01%	6	<0.01%	0	0.00%	31	0.02%	309	0.22%	377	0.26%



Actively Monitored Study Data Summary

Qualifying Complications

	Number of Devices	Active Devices	Cumulative Months of	Pa	ormal cing dance		diac tion		luctor cture		ardiac Ilation	1	lure to oture	1	ilure to :nse		lation each	Dislo	ead odge- ent	Overs	ensing		ardial usion		kin Ision	То	otal
Models	Enrolled	Enrolled	Follow-Up	Qty.	Rate	Qty.	Rate	Qty.	Rate	Qty.	Rate	Qty.	Rate	Qty.	Rate	Qty.	Rate	Qty.	Rate	Qty.	Rate	Qty.	Rate	Qty.	Rate	Qty.	Rate
1458Q	2,030	1,383	51,521	1	0.05%	0	0.00%	0	0.00%	3	0.15%	1	0.05%	0	0.00%	0	0.00%	30	1.48%	0	0.00%	0	0.00%	0	0.00%	35	1.72%
1258T	2,355	1,242	86,807	6	0.25%	0	0.00%	1	0.04%	6	0.25%	32	1.36%	0	0.00%	0	0.00%	45	1.91%	0	0.00%	0	0.00%	0	0.00%	90	3.82%
1156T	982	355	41,167	1	0.10%	0	0.00%	0	0.00%	15	1.53%	8	0.81%	0	0.00%	0	0.00%	24	2.44%	0	0.00%	0	0.00%	0	0.00%	48	4.89%
1158T	559	177	23,358	0	0.00%	0	0.00%	0	0.00%	9	1.61%	4	0.72%	0	0.00%	1	0.18%	6	1.07%	0	0.00%	0	0.00%	1	0.18%	21	3.76%
1058T	111	42	5,605	0	0.00%	0	0.00%	0	0.00%	0	0.00%	2	1.80%	0	0.00%	0	0.00%	0	0.00%	0	0.00%	0	0.00%	0	0.00%	2	1.80%
1056T	321	100	12,822	1	0.31%	0	0.00%	0	0.00%	2	0.62%	3	0.93%	0	0.00%	0	0.00%	5	1.56%	0	0.00%	0	0.00%	0	0.00%	11	3.43%

Malfunctions

					(Conducto	r Fractu	re								Insulatio	n Breac	h												
	Registered US	Percent Returned		icular ush	In the	Pocket	Intrav	ascular	Cond	otal luctor cture		to-Can ntact		o-Lead Itact		icular ush		nalized luctors	Of	ther	Insu	otal lation each	Wel	mps, Ids & Inds	Ot	her		insic tors	Tc	otal
Models	Implants	for Analysis	Qty.	Rate	Qty.	Rate	Qty.	Rate	Qty.	Rate	Qty.	Rate	Qty.	Rate	Qty.	Rate	Qty.	Rate	Qty.	Rate	Qty.	Rate	Qty.	Rate	Qty.	Rate	Qty.	Rate	Qty.	Rate
1458Q	2,030	3.50%	0	0.00%	0	0.00%	0	0.00%	0	0.00%	0	0.00%	0	0.00%	0	0.00%	0	0.00%	0	0.00%	0	0.00%	0	0.00%	0	0.00%	17	0.84%	17	0.84%
1258T	2,355	4.40%	1	0.04%	0	0.00%	0	0.00%	1	0.04%	0	0.00%	0	0.00%	0	0.00%	0	0.00%	0	0.00%	0	0.00%	0	0.00%	0	0.00%	31	1.32%	32	1.36%
1156T	982	7.10%	0	0.00%	0	0.00%	0	0.00%	0	0.00%	0	0.00%	0	0.00%	0	0.00%	0	0.00%	1	0.10%	1	0.10%	0	0.00%	0	0.00%	17	1.73%	18	1.83%
1158T	559	3.90%	0	0.00%	0	0.00%	0	0.00%	0	0.00%	0	0.00%	0	0.00%	0	0.00%	1	0.18%	0	0.00%	1	0.18%	0	0.00%	0	0.00%	7	1.25%	8	1.43%
1058T	111	2.70%	0	0.00%	0	0.00%	0	0.00%	0	0.00%	0	0.00%	0	0.00%	0	0.00%	0	0.00%	0	0.00%	0	0.00%	0	0.00%	0	0.00%	0	0.00%	0	0.00%
1056T	321	5.90%	0	0.00%	0	0.00%	0	0.00%	0	0.00%	0	0.00%	0	0.00%	0	0.00%	0	0.00%	0	0.00%	0	0.00%	0	0.00%	0	0.00%	4	1.25%	4	1.25%

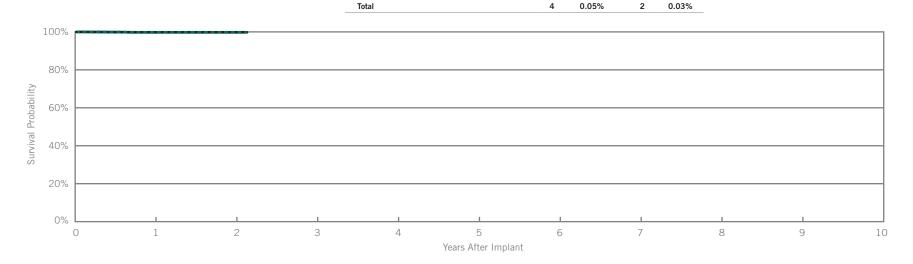


IMPLANTABLE CARDIOVERTER Defibrillator (ICD) Devices

Dual-Chamber



Ilipse [™] DR Iodel CD2411-36Q*			Mal w/ Co	functions mpromised herapy	w/o Co	functions ompromised herapy
US Regulatory Approval	June 2013		Qty	Rate	Qty	Rate
Registered US Implants	7,418	Electrical Component	0	0.00%	1	0.01%
Estimated Active US Implants	6,464	Electrical Interconnect	1	0.01%	0	0.00%
Estimated Longevity	(see table on page 107)	Battery	0	0.00%	0	0.00%
Normal Battery Depletion	0	High Voltage Capacitor	0	0.00%	1	0.01%
Max. Delivered Energy	36 joules	Software/Firmware	1	0.01%	0	0.00%
Number of US Advisories (see pgs. 290-295)	One	Mechanical	1	0.01%	0	0.00%
		Possible Early Battery Depletion	0	0.00%	0	0.00%
		Other	1	0.01%	0	0.00%
		Total	4	0.05%	2	0.03%



Including Normal Battery Depletion

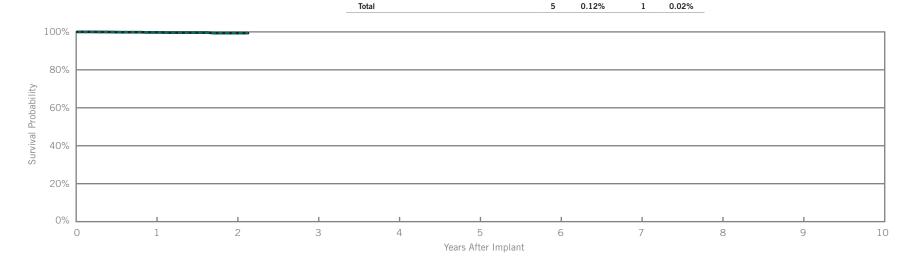
Year	1	2	at 26 months				
Survival Probability	99.78%	99.78%	99.78%				
± 1 standard error	0.06%	0.06%	0.06%				
Sample Size	5,270	1,740	260				

Year	1	2	at 26 months				
Survival Probability	99.78%	99.78%	99.78%				
± 1 standard error	0.06%	0.06%	0.06%				



Customer Reported Performance Data

llipse [™] DR Iodel CD2411-36C*			Mali w/ Co	functions mpromised herapy	w/o Co	unctions mpromised herapy
US Regulatory Approval	June 2013		Qty	Rate	Qty	Rate
Registered US Implants	4,290	Electrical Component	1	0.02%	0	0.00%
Estimated Active US Implants	3,732	Electrical Interconnect	0	0.00%	0	0.00%
Estimated Longevity	(see table on page 107)	Battery	0	0.00%	0	0.00%
Normal Battery Depletion	0	High Voltage Capacitor	4	0.09%	1	0.02%
Max. Delivered Energy	36 joules	Software/Firmware	0	0.00%	0	0.00%
Number of US Advisories (see pgs. 290-295)	One	Mechanical	0	0.00%	0	0.00%
		Possible Early Battery Depletion	0	0.00%	0	0.00%
		Other	0	0.00%	0	0.00%



Including Normal Battery Depletion

Year	1	2	at 26 months				
Survival Probability	99.73%	99.34%	99.34%				
± 1 standard error	0.10%	0.23%	0.23%				
Sample Size	3,190	1,200	230				

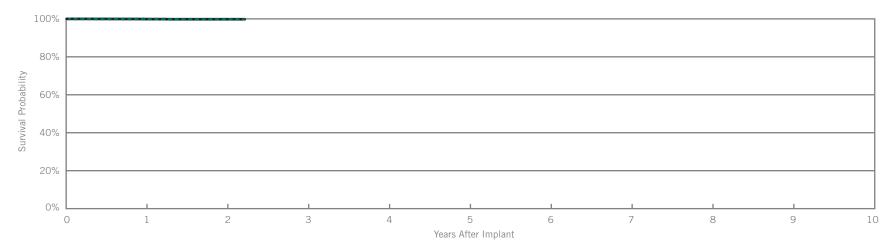
Year	1	2	at 26 months				
Survival Probability	99.73%	99.34%	99.34%				
± 1 standard error	0.10%	0.23%	0.23%				



Fortify Assura[™] DR Model CD2357-40Q*

US Regulatory Approval	June 2013
Registered US Implants	13,639
Estimated Active US Implants	11,869
Estimated Longevity	(see table on page 107)
Normal Battery Depletion	0
Max. Delivered Energy	40 joules
Number of US Advisories	None

	w/ Co	functions mpromised herapy	w/o Co	functions mpromised herapy
	Qty	Rate	Qty	Rate
Electrical Component	3	0.02%	2	0.01%
Electrical Interconnect	1	<0.01%	0	0.00%
Battery	0	0.00%	0	0.00%
High Voltage Capacitor	0	0.00%	0	0.00%
Software/Firmware	0	0.00%	0	0.00%
Mechanical	0	0.00%	0	0.00%
Possible Early Battery Depletion	0	0.00%	0	0.00%
Other	0	0.00%	0	0.00%
Total	4	0.03%	2	0.01%



Including Normal Battery Depletion

Year	1	2	at 27 months				
Survival Probability	99.90%	99.81%	99.81%				
± 1 standard error	0.03%	0.06%	0.06%				
Sample Size	9,690	3,150	230				

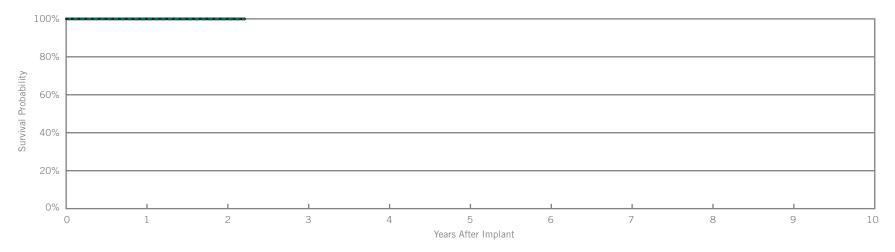
Year	1	2	at 27 months				
Survival Probability	99.90%	99.81%	99.81%				
± 1 standard error	0.03%	0.06%	0.06%				



Fortify Assura[™] DR Model CD2357-40C*

US Regulatory Approval	June 2013
Registered US Implants	6,878
Estimated Active US Implants	5,964
Estimated Longevity	(see table on page 107)
Normal Battery Depletion	2
Max. Delivered Energy	40 joules
Number of US Advisories	None

	w/ Cor	unctions npromised nerapy	w/o Co	functions mpromised herapy
	Qty	Rate	Qty	Rate
Electrical Component	0	0.00%	0	0.00%
Electrical Interconnect	0	0.00%	0	0.00%
Battery	0	0.00%	0	0.00%
High Voltage Capacitor	0	0.00%	0	0.00%
Software/Firmware	0	0.00%	0	0.00%
Mechanical	0	0.00%	0	0.00%
Possible Early Battery Depletion	0	0.00%	0	0.00%
Other	0	0.00%	0	0.00%
Total	0	0.00%	0	0.00%



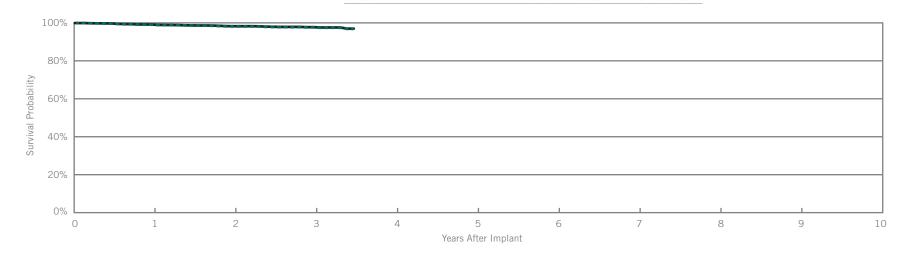
Including Normal Battery Depletion

Year	1	2	at 27 months				
Survival Probability	99.91%	99.91%	99.91%				
± 1 standard error	0.05%	0.05%	0.05%				
Sample Size	5,130	1,920	200				

Year	1	2	at 27 months	
Survival Probability	100.00%	100.00%	100.00%	
± 1 standard error	0.00%	0.00%	0.00%	



llipse [™] DR odel CD2311-36Q*		•	Mali w/ Coi T	Malfunctions w/o Compromised Therapy		
US Regulatory Approval	May 2012		Qty	Rate	Qty	Rate
Registered US Implants	5,898	Electrical Component	3	0.05%	1	0.02%
Estimated Active US Implants	4,297	Electrical Interconnect	0	0.00%	0	0.00%
Estimated Longevity	(see table on page 107)	Battery	0	0.00%	0	0.00%
Normal Battery Depletion	3	High Voltage Capacitor	30	0.51%	4	0.07%
Max. Delivered Energy	36 joules	Software/Firmware	1	0.02%	0	0.00%
Number of US Advisories (see pgs. 290-295)	One	Mechanical	2	0.03%	2	0.03%
		Possible Early Battery Depletion	0	0.00%	0	0.00%
		Other	1	0.02%	2	0.03%
		Total	37	0.63%	9	0.15%



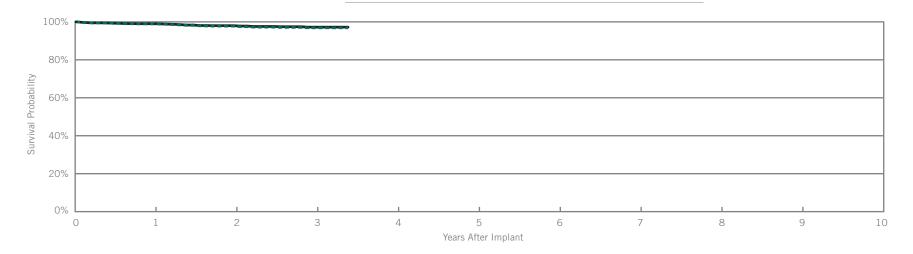
Including Normal Battery Depletion

Year	1	2	3	at 42 months			
Survival Probability	99.04%	98.09%	97.60%	96.82%			
± 1 standard error	0.13%	0.19%	0.24%	0.50%			
Sample Size	5,520	4,560	2,590	230			

Year	1	2	3	at 42 months			
Survival Probability	99.13%	98.25%	97.75%	96.97%			
± 1 standard error	0.12%	0.18%	0.23%	0.50%			



Ilipse [™] DR Iodel CD2311-36			w/ Cor	functions mpromised herapy	w/o Co	functions ompromised herapy
US Regulatory Approval	May 2012		Qty	Rate	Qty	Rate
Registered US Implants	3,744	Electrical Component	2	0.05%	2	0.05%
Estimated Active US Implants	2,723	Electrical Interconnect	0	0.00%	0	0.00%
Estimated Longevity	(see table on page 107)	Battery	0	0.00%	0	0.00%
Normal Battery Depletion	4	High Voltage Capacitor	16	0.43%	4	0.11%
Max. Delivered Energy	36 joules	Software/Firmware	0	0.00%	0	0.00%
Number of US Advisories (see pgs. 290-295)	One	Mechanical	4	0.11%	3	0.08%
		Possible Early Battery Depletion	0	0.00%	0	0.00%
		Other	3	0.08%	0	0.00%
		Total	25	0.67%	9	0.24%



Including Normal Battery Depletion

Year	1	2	3	at 41 months			
Survival Probability	98.94%	97.76%	96.87%	96.87%			
± 1 standard error	0.17%	0.26%	0.35%	0.35%			
Sample Size	3,510	2,870	1,570	200			

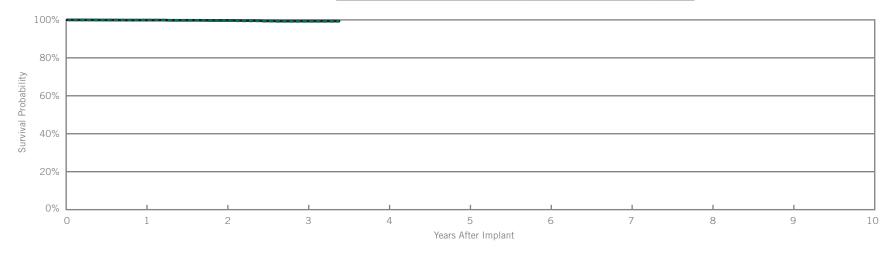
Year	1	2	3	at 41 months			
Survival Probability	99.02%	98.01%	97.23%	97.23%			
± 1 standard error	0.16%	0.24%	0.33%	0.33%			



Fortify Assura[™] DR Model CD2257-40Q*

US Regulatory Approval	May 2012
Registered US Implants	6,793
Estimated Active US Implants	4,982
Estimated Longevity	(see table on page 107)
Normal Battery Depletion	3
Max. Delivered Energy	40 joules
Number of US Advisories	None

	w/ Cor	unctions npromised herapy	w/o Co	lfunctions ompromised Therapy	
	Qty	Rate	Qty	Rate	
Electrical Component	3	0.04%	1	0.01%	
Electrical Interconnect	0	0.00%	0	0.00%	
Battery	0	0.00%	0	0.00%	
High Voltage Capacitor	0	0.00%	0	0.00%	
Software/Firmware	0	0.00%	1	0.01%	
Mechanical	0	0.00%	1	0.01%	
Possible Early Battery Depletion	3	0.04%	1	0.01%	
Other	3	0.04%	0	0.00%	
Total	9	0.13%	4	0.06%	



Including Normal Battery Depletion

Year	1	2	3	at 41 months			
Survival Probability	99.87%	99.61%	99.21%	99.21%			
± 1 standard error	0.04%	0.08%	0.14%	0.14%			
Sample Size	6,350	5,250	2,710	240			

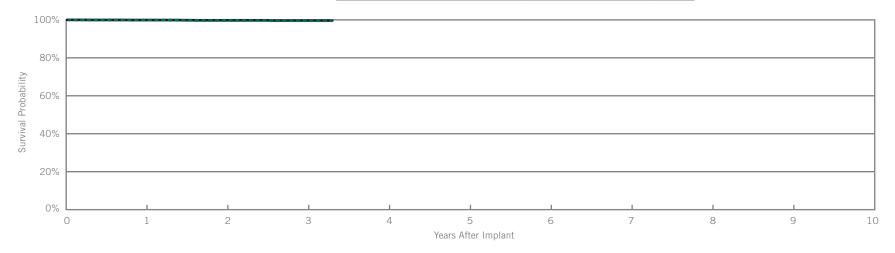
Year	1	2	3	at 41 months			
Survival Probability	99.87%	99.71%	99.35%	99.35%			
± 1 standard error	0.04%	0.07%	0.13%	0.13%			



Fortify Assura[™] DR Model CD2257-40

US Regulatory Approval	May 2012
Registered US Implants	4,224
Estimated Active US Implants	3,140
Estimated Longevity	(see table on page 107)
Normal Battery Depletion	2
Max. Delivered Energy	40 joules
Number of US Advisories	None

	w/ Cor	unctions npromised herapy	w/o Co	lfunctions Compromised Therapy	
	Qty	Rate	Qty	Rate	
Electrical Component	1	0.02%	0	0.00%	
Electrical Interconnect	0	0.00%	0	0.00%	
Battery	0	0.00%	0	0.00%	
High Voltage Capacitor	1	0.02%	0	0.00%	
Software/Firmware	0	0.00%	1	0.02%	
Mechanical	0	0.00%	0	0.00%	
Possible Early Battery Depletion	0	0.00%	1	0.02%	
Other	0	0.00%	1	0.02%	
Total	2	0.05%	3	0.07%	



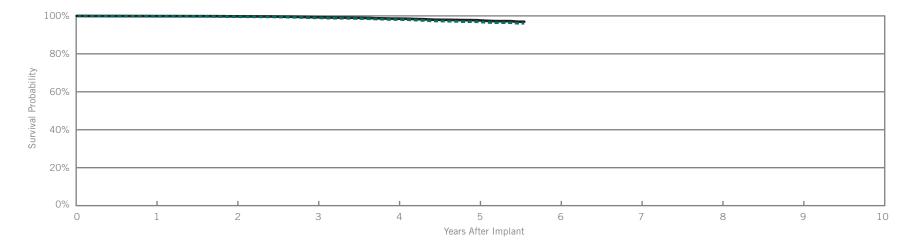
Including Normal Battery Depletion

Year	1	2	3	at 40 months			
Survival Probability	99.85%	99.67%	99.55%	99.55%			
± 1 standard error	0.06%	0.09%	0.13%	0.13%			
Sample Size	3,960	3,290	1,730	240			

Year	1	2	3	at 40 months			
Survival Probability	99.90%	99.78%	99.66%	99.66%			
± 1 standard error	0.05%	0.08%	0.12%	0.12%			



Fortify [™] DR						
Model CD2231-40Q*			w/ Co	functions mpromised herapy	w/o Co	functions ompromised herapy
US Regulatory Approval	May 2010		Qty	Rate	Qty	Rate
Registered US Implants	26,841	Electrical Component	5	0.02%	5	0.02%
Estimated Active US Implants	15,930	Electrical Interconnect	2	<0.01%	2	<0.01%
Estimated Longevity	(see table on page 107)	Battery	17	0.06%	11	0.04%
Normal Battery Depletion	46	High Voltage Capacitor	2	<0.01%	0	0.00%
Max. Delivered Energy	40 joules	Software/Firmware	1	<0.01%	0	0.00%
Number of US Advisories	None	Mechanical	0	0.00%	0	0.00%
		Possible Early Battery Depletion	58	0.22%	21	0.08%
		Other	9	0.03%	4	0.01%
		Total	94	0.35%	43	0.16%



Including Normal Battery Depletion

Year	1	2	3	4	5	at 67 months		
Survival Probability	99.76%	99.58%	98.97%	98.08%	96.90%	96.11%		
± 1 standard error	0.03%	0.04%	0.07%	0.10%	0.16%	0.29%		
Sample Size	25,120	22,060	19,210	14,430	7,430	430		

Excluding Normal Battery Depletion

Year	1	2	3	4	5	at 67 months		
Survival Probability	99.87%	99.76%	99.29%	98.55%	97.71%	96.92%		
± 1 standard error	0.02%	0.03%	0.06%	0.09%	0.14%	0.28%		

*DF4-LLHH connector type.



Actively Monitored Study Data

Fortify[™] DR Model CD2231-400

del CD2231-40Q*						Т	mpromised herapy	Т	mpromise nerapy
JS Regulatory Approval	May 2010	Qualifying Complications	Qty	Rate		Qty	Rate	Qty	Rate
Number of Devices Enrolled in Study	390	Premature Battery Depletion	2	0.51%	Electrical Component	0	0.00%	0	0.00%
Active Devices Enrolled in Study	247				Electrical Interconnect	0	0.00%	0	0.00%
Cumulative Months of Follow-up	17,882				Battery	0	0.00%	0	0.00%
Estimated Longevity	(see table on page 107)				High Voltage Capacitor	0	0.00%	0	0.00%
Max. Delivered Energy	40 joules				Software/Firmware	0	0.00%	0	0.00
					Mechanical	0	0.00%	0	0.00
					Possible Early Battery Depletion	1	0.26%	0	0.00
					Other	1	0.26%	0	0.00
					Total	2	0.51%	0	0.00
80%]
80%									
80%									-
80%									
80% 60% 40%									-

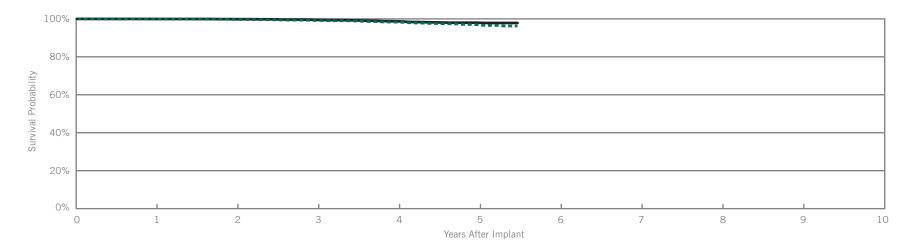
Years	After	Imp	lant

Year	1	2	3	4	5	at 63 months		
Survival Probability	99.74%	99.74%	99.74%	99.74%	99.32%	99.32%		
± 1 standard error	0.26%	0.26%	0.26%	0.26%	0.49%	0.49%		
Sample Size	380	340	310	270	170	60		

Malfunctions

Malfunctions

ortify™ DR Iodel CD2231-40			w/ Co	functions mpromised herapy	w/o Co	functions mpromised herapy
US Regulatory Approval	May 2010		Qty	Rate	Qty	Rate
Registered US Implants	12,072	Electrical Component	3	0.02%	2	0.02%
Estimated Active US Implants	7,081	Electrical Interconnect	1	<0.01%	0	0.00%
Estimated Longevity	(see table on page 107)	Battery	2	0.02%	5	0.04%
Normal Battery Depletion	24	High Voltage Capacitor	6	0.05%	0	0.00%
Max. Delivered Energy	40 joules	Software/Firmware	0	0.00%	0	0.00%
Number of US Advisories	None	Mechanical	0	0.00%	0	0.00%
		Possible Early Battery Depletion	21	0.17%	7	0.06%
		Other	4	0.03%	2	0.02%
		Total	37	0.31%	16	0.13%



Including Normal Battery Depletion

Year	1	2	3	4	5	at 66 months		
Survival Probability	99.88%	99.66%	99.14%	98.29%	96.92%	96.22%		
± 1 standard error	0.02%	0.05%	0.09%	0.15%	0.25%	0.39%		
Sample Size	11,300	9,860	8,470	6,120	2,930	320		

Year	1	2	3	4	5	at 66 months		
Survival Probability	99.95%	99.86%	99.47%	98.73%	97.99%	97.84%		
± 1 standard error	0.02%	0.03%	0.07%	0.13%	0.20%	0.23%		



Actively Monitored Study Data

Fortify[™] DR Μ

Model CD2231-40						w/ Co	functions mpromised herapy	w/o Co	iunctions mpromised herapy
US Regulatory Approval	May 2010	Qualifying Complications	Qty	Rate		Qty	Rate	Qty	Rate
Number of Devices Enrolled in Study	177	Premature Battery Depletion	1	0.56%	Electrical Component	0	0.00%	0	0.00%
Active Devices Enrolled in Study	82				Electrical Interconnect	0	0.00%	0	0.00%
Cumulative Months of Follow-up	6,508				Battery	0	0.00%	0	0.00%
Estimated Longevity	(see table on page 107)				High Voltage Capacitor	0	0.00%	0	0.00%
Max. Delivered Energy	40 joules				Software/Firmware	0	0.00%	0	0.00%
					Mechanical	0	0.00%	0	0.00%
					Possible Early Battery Depletion	0	0.00%	0	0.00%
					Other	0	0.00%	0	0.00%
					Total	0	0.00%	0	0.00%
400 gpg iii ty.									-
bility									-

Year	1	2	3	4	at 56 months	
Survival Probability	100.00%	99.12%	99.12%	99.12%	99.12%	
± 1 standard error	0.00%	0.88%	0.88%	0.88%	0.88%	
Sample Size	160	130	100	90	50	

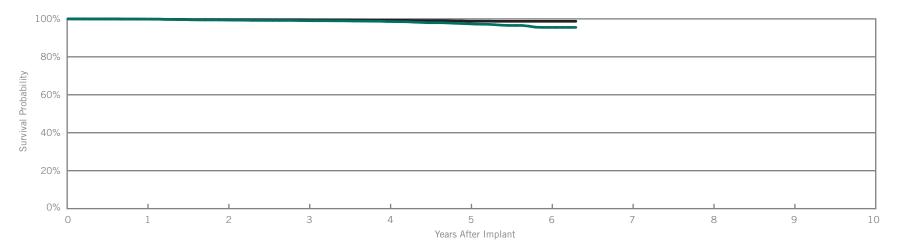
Years After Implant



Current [™] + DR	
Model CD2211-36Q*	

US Regulatory Approval	February 2009
Registered US Implants	8,141
Estimated Active US Implants	4,046
Estimated Longevity	(see table on page 107)
Normal Battery Depletion	50
Max. Delivered Energy	36 joules
Number of US Advisories	None

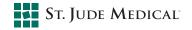
	w/ Cor	Malfunctions w/ Compromised Therapy		functions mpromised herapy
	Qty	Rate	Qty	Rate
Electrical Component	5	0.06%	2	0.02%
Electrical Interconnect	0	0.00%	0	0.00%
Battery	5	0.06%	6	0.07%
High Voltage Capacitor	1	0.01%	0	0.00%
Software/Firmware	0	0.00%	0	0.00%
Mechanical	0	0.00%	1	0.01%
Possible Early Battery Depletion	3	0.04%	3	0.04%
Other	4	0.05%	2	0.02%
Total	18	0.22%	14	0.17%



Including Normal Battery Depletion

Year	1	2	3	4	5	6	at 76 months		
Survival Probability	99.85%	99.40%	99.05%	98.60%	97.43%	95.51%	95.51%		
± 1 standard error	0.04%	0.09%	0.12%	0.14%	0.21%	0.34%	0.34%		
Sample Size	7,570	6,610	5,890	5,170	4,410	2,550	260		

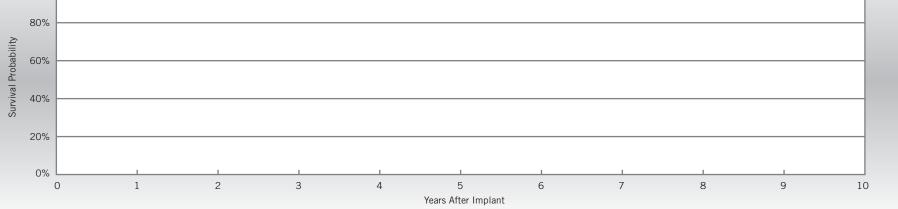
Year	1	2	3	4	5	6	at 76 months		
Survival Probability	99.85%	99.58%	99.41%	99.22%	98.78%	98.73%	98.73%		
± 1 standard error	0.04%	0.07%	0.09%	0.11%	0.14%	0.15%	0.15%		



Actively Monitored Study Data

Current[™] + DR 44 002211 200* ...

del CD2211-36Q*						w/ Co	functions mpromised herapy	w/o Co	functions mpromised herapy
S Regulatory Approval	February 2009	Qualifying Complications	Qty	Rate		Qty	Rate	Qty	Rate
umber of Devices Enrolled in Study	834	Premature Battery Depletion	3	0.36%	Electrical Component	0	0.00%	0	0.00%
ctive Devices Enrolled in Study	431	Skin Erosion	1	0.12%	Electrical Interconnect	0	0.00%	0	0.00%
umulative Months of Follow-up	43,168				Battery	1	0.12%	2	0.24%
stimated Longevity	(see table on page 107)				High Voltage Capacitor	0	0.00%	0	0.00%
ax. Delivered Energy	36 joules				Software/Firmware	0	0.00%	0	0.00%
					Mechanical	0	0.00%	0	0.00%
					Possible Early Battery Depletion	0	0.00%	1	0.12%
					Other	0	0.00%	0	0.00%
					Total	1	0.12%	3	0.36%

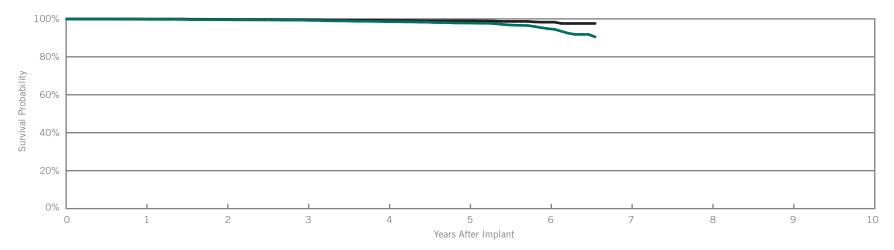


Year	1	2	3	4	5	6	at 76 months		
Survival Probability	99.75%	99.61%	99.61%	99.44%	99.44%	99.44%	99.44%		
± 1 standard error	0.18%	0.23%	0.23%	0.28%	0.28%	0.28%	0.28%		
Sample Size	790	710	640	570	500	320	70		

Current[™] + DR Model CD2211-36

US Regulatory Approval	February 2009
Registered US Implants	6,270
Estimated Active US Implants	3,025
Estimated Longevity	(see table on page 107)
Normal Battery Depletion	50
Max. Delivered Energy	36 joules
Number of US Advisories	None

	w/ Cor	Malfunctions w/ Compromised Therapy		functions mpromised herapy
	Qty	Rate	Qty	Rate
Electrical Component	2	0.03%	1	0.02%
Electrical Interconnect	2	0.03%	0	0.00%
Battery	5	0.08%	4	0.06%
High Voltage Capacitor	0	0.00%	0	0.00%
Software/Firmware	0	0.00%	2	0.03%
Mechanical	0	0.00%	0	0.00%
Possible Early Battery Depletion	5	0.08%	4	0.06%
Other	5	0.08%	0	0.00%
Total	19	0.30%	11	0.18%



Including Normal Battery Depletion

Year	1	2	3	4	5	6	at 79 months		
Survival Probability	99.78%	99.57%	99.30%	98.51%	97.82%	94.85%	90.51%		
± 1 standard error	0.05%	0.09%	0.11%	0.17%	0.23%	0.40%	0.69%		
Sample Size	5,850	5,080	4,460	3,900	3,300	2,170	210		

Year	1	2	3	4	5	6	at 79 months		
Survival Probability	99.90%	99.76%	99.53%	99.13%	98.98%	98.27%	97.57%		
± 1 standard error	0.03%	0.07%	0.09%	0.13%	0.15%	0.24%	0.34%		

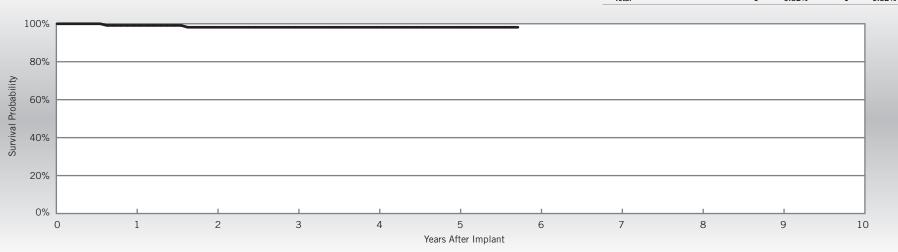


Actively Monitored Study Data

Current[™] + DR

US Regulatory Approval	February 2009	Qualifying Complications	Qty	Rate	
Number of Devices Enrolled in Study	122	Inappropriate Shock	1	0.82%	Electrical Cor
Active Devices Enrolled in Study	53	Premature Battery Depletion	1	0.82%	Electrical Inte
Cumulative Months of Follow-up	5,706				Battery
Estimated Longevity	(see table on page 107)				High Voltage
Max. Delivered Energy	36 joules				Software/Firr
					Mechanical

	w/ Cor	unctions npromised herapy	w/o Co	functions ompromised herapy	
	Qty	Rate	Qty	Rate	
Electrical Component	0	0.00%	0	0.00%	
Electrical Interconnect	0	0.00%	0	0.00%	
Battery	0	0.00%	0	0.00%	
High Voltage Capacitor	0	0.00%	0	0.00%	
Software/Firmware	0	0.00%	0	0.00%	
Mechanical	0	0.00%	0	0.00%	
Possible Early Battery Depletion	0	0.00%	0	0.00%	
Other	1	0.82%	1	0.82%	
Total	1	0.82%	1	0.82%	



Year	1	2	3	4	5	at 69 months		
Survival Probability	99.13%	98.16%	98.16%	98.16%	98.16%	98.16%		
± 1 standard error	0.87%	1.29%	1.29%	1.29%	1.29%	1.29%		
Sample Size	120	100	80	70	60	50		



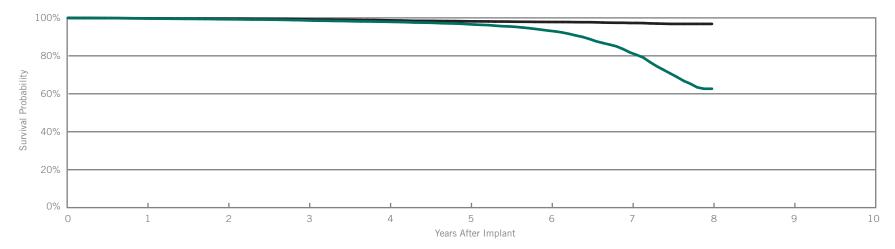


Current[™] DR RF

Model 2207-36

US Regulatory Approval	September 2007
Registered US Implants	22,372
Estimated Active US Implants	7,832
Estimated Longevity	(see table on page 107)
Normal Battery Depletion	752
Max. Delivered Energy	36 joules
Number of US Advisories	None

	w/ Co	mpromised w/o Co		lfunctions ompromised Therapy	
	Qty	Rate	Qty	Rate	
Electrical Component	9	0.04%	11	0.05%	
Electrical Interconnect	6	0.03%	2	<0.01%	
Battery	19	0.08%	9	0.04%	
High Voltage Capacitor	1	<0.01%	0	0.00%	
Software/Firmware	0	0.00%	6	0.03%	
Mechanical	1	<0.01%	5	0.02%	
Possible Early Battery Depletion	32	0.14%	17	0.08%	
Other	30	0.13%	6	0.03%	
Total	98	0.44%	56	0.25%	



Including Normal Battery Depletion

Year	1	2	3	4	5	6	7	8	
Survival Probability	99.70%	99.28%	98.68%	97.94%	96.67%	93.24%	81.82%	62.65%	
± 1 standard error	0.04%	0.06%	0.08%	0.11%	0.14%	0.21%	0.39%	0.95%	
Sample Size	20,860	18,180	16,010	14,170	12,550	10,700	6,860	330	

Year	1	2	3	4	5	6	7	8	
Survival Probability	99.75%	99.60%	99.22%	98.72%	98.20%	97.84%	97.31%	96.82%	
± 1 standard error	0.03%	0.05%	0.06%	0.09%	0.11%	0.12%	0.14%	0.21%	



2

3

4

Actively Monitored Study Data

Current[™] DR RF

20%

0%

0

1

odel 2207-36						w/ Cor	mpromised herapy	w/o Co	mpromised
US Regulatory Approval	September 2007	Qualifying Complications	Qty.	Rate		Qty	Rate	Qty	Rate
Number of Devices Enrolled in Study	630	Inappropriate Shock	1	0.16%	Electrical Component	0	0.00%	0	0.00%
Active Devices Enrolled in Study	188				Electrical Interconnect	0	0.00%	0	0.00%
Cumulative Months of Follow-up	30,930				Battery	0	0.00%	0	0.00%
Estimated Longevity	(see table on page 107)				High Voltage Capacitor	0	0.00%	0	0.00%
Max. Delivered Energy	36 joules				Software/Firmware	0	0.00%	0	0.00%
					Mechanical	0	0.00%	0	0.00%
					Possible Early Battery Depletion	1	0.16%	1	0.16%
					Other	0	0.00%	0	0.00%
					Total	1	0.16%	1	0.16%
100% 80% ≧									
Survival Probability 40%									_

Year	1	2	3	4	5	6	7	at 88 months	
Survival Probability	99.84%	99.84%	99.84%	99.84%	99.84%	99.84%	99.84%	99.84%	
± 1 standard error	0.16%	0.16%	0.16%	0.16%	0.16%	0.16%	0.16%	0.16%	
Sample Size	600	520	430	340	280	240	160	60	

5

Years After Implant

6

7



Malfunctions

Malfunctions

8

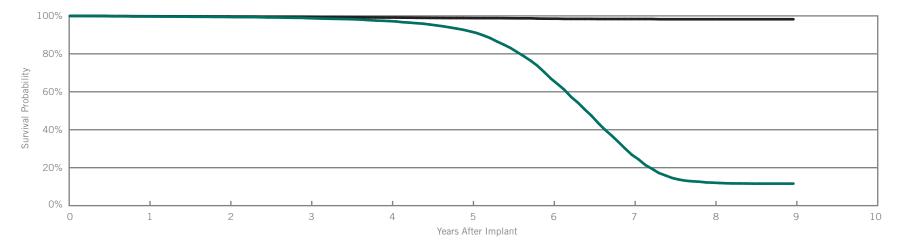
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10

Atlas[™] II + DR Model V-268

US Regulatory Approval	July 2006
Registered US Implants	14,807
Estimated Active US Implants	1,637
Estimated Longevity	(see table on page 107)
Normal Battery Depletion	2,731
Max. Delivered Energy	36 joules
Number of US Advisories (see pgs. 290-295)	One

	w/ Cor	Malfunctions w/ Compromised Therapy		Malfunctions w/o Compromised Therapy		
	Qty	Rate	Qty	Rate		
Electrical Component	6	0.04%	4	0.03%		
Electrical Interconnect	4	0.03%	0	0.00%		
Battery	9	0.06%	3	0.02%		
High Voltage Capacitor	0	0.00%	0	0.00%		
Software/Firmware	0	0.00%	0	0.00%		
Mechanical	0	0.00%	1	<0.01%		
Possible Early Battery Depletion	18	0.12%	6	0.04%		
Other	10	0.07%	5	0.03%		
Total	47	0.32%	19	0.13%		



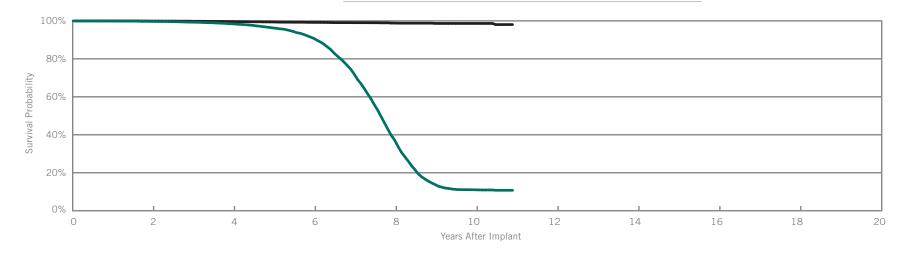
Including Normal Battery Depletion

Year	1	2	3	4	5	6	7	8	at 107 months	
Survival Probability	99.68%	99.43%	98.79%	97.26%	91.84%	66.94%	26.81%	12.10%	11.60%	
± 1 standard error	0.05%	0.07%	0.09%	0.16%	0.27%	0.51%	0.52%	0.37%	0.36%	
Sample Size	13,800	12,080	10,670	9,360	8,090	6,310	3,690	1,520	200	

Year	1	2	3	4	5	6	7	8	at 107 months	
Survival Probability	99.80%	99.68%	99.41%	99.12%	98.83%	98.51%	98.35%	98.23%	98.23%	
± 1 standard error	0.04%	0.05%	0.07%	0.09%	0.11%	0.13%	0.14%	0.17%	0.17%	



tlas™ + DR Iodel V-243			Mal w/ Co	functions mpromised herapy	w/o Co	functions ompromised herapy
US Regulatory Approval	October 2003		Qty	Rate	Qty	Rate
Registered US Implants	21,081	Electrical Component	5	0.02%	3	0.01%
Estimated Active US Implants	1,649	Electrical Interconnect	1	<0.01%	0	0.00%
Estimated Longevity	(see table on page 107)	Battery	12	0.06%	4	0.02%
Normal Battery Depletion	3,436	High Voltage Capacitor	1	<0.01%	0	0.00%
Max. Delivered Energy	36 joules	Software/Firmware	0	0.00%	0	0.00%
Number of US Advisories (see pgs. 290-295)	Three	Mechanical	0	0.00%	3	0.01%
		Possible Early Battery Depletion	6	0.03%	4	0.02%
		Other	17	0.08%	2	<0.01%
		Total	42	0.20%	16	0.08%



Including Normal Battery Depletion

Year	2	4	6	8	10	at 131 months		
Survival Probability	99.70%	98.43%	90.80%	37.22%	11.02%	10.77%		
± 1 standard error	0.04%	0.10%	0.26%	0.50%	0.31%	0.32%		
Sample Size	17,310	13,400	9,760	5,180	1,030	200		

Year	2	4	6	8	10	at 131 months		
Survival Probability	99.90%	99.63%	99.19%	98.83%	98.65%	98.05%		
± 1 standard error	0.02%	0.05%	0.08%	0.11%	0.15%	0.45%		



BATTERY LONGEVITY SUMMARY

Dual-Chamber ICDs



Battery Longevity

			Approximate D	Ouration (years)	
Models	Family	No Pacing	25% Pacing	50% Pacing	100% Pacing
CD2411-36Q	Ellipse [™] DR*	10.4	9.6	8.9	7.7
CD2411-36C	Ellipse™ DR*	10.4	9.6	8.9	7.7
CD2357-40C	Fortify Assura [™] DR*	11.1	10.2	9.5	8.3
CD2357-40Q	Fortify Assura [™] DR*	11.1	10.2	9.5	8.3
CD2311-36Q	Ellipse™ DR*	10.4	9.6	8.9	7.7
CD2311-36	Ellipse™ DR*	10.4	9.6	8.9	7.7
CD2257-40Q	Fortify Assura [™] DR*	11.1	10.2	9.5	8.3
CD2257-40	Fortify Assura [™] DR*	11.1	10.2	9.5	8.3
CD2231-40Q	Fortify [™] DR*	10.1	9.3	8.6	7.5
CD2231-40	Fortify [™] DR*	10.1	9.3	8.6	7.5
CD2211-36Q	Current [™] + DR**	8.2	7.5	7.0	6.1
CD2211-36	Current [™] + DR**	8.2	7.5	7.0	6.1
2207-36	Current [™] DR RF**	8.2	7.5	7.0	6.1
V-268	Atlas [™] II + DR**	8.2	7.5	7.0	6.1
V-243	Atlas [™] + DR**	7.9	7.3	6.9	6.1

Pacing parameters: DDD, 2.5V, 0.5 ms, 60 ppm, 500 ohms

*Battery voltage range: 3.20-2.59. Three maximum charges per year.

**Battery voltage range: 3.20-2.45. Four maximum charges per year as well as monthly charging during the battery's mid-life voltage range.



SUMMARY INFORMATION

Dual-Chamber ICDs



Survival Summary

			1	1	1	Survival P	robability	1	1	1	1
Models	Family	1 year	2 year	3 year	4 year	5 year	6 year	7 year	8 year	9 year	10 year
CD2411-36Q	Ellipse™ DR	99.78%	99.78%								
CD2411-36C	Ellipse™ DR	99.73%	99.34%								
CD2357-40Q	Fortify Assura [™] DR	99.90%	99.81%								
CD2357-40C	Fortify Assura™ DR	99.91%	99.91%								
CD2311-36Q	Ellipse [™] DR	99.04%	98.09%	97.60%							
CD2311-36	Ellipse™ DR	98.94%	97.76%	96.87%							
CD2257-40Q	Fortify Assura [™] DR	99.87%	99.61%	99.21%							
CD2257-40	Fortify Assura [™] DR	99.85%	99.67%	99.55%							
CD2231-40Q	Fortify [™] DR	99.76%	99.58%	98.97%	98.08%	96.90%					
CD2231-40	Fortify [™] DR	99.88%	99.66%	99.14%	98.29%	96.92%					
CD2211-36Q	Current [™] + DR	99.85%	99.40%	99.05%	98.60%	97.43%	95.51%				
CD2211-36	Current [™] + DR	99.78%	99.57%	99.30%	98.51%	97.82%	94.85%				
2207-36	Current [™] DR RF	99.70%	99.28%	98.68%	97.94%	96.67%	93.24%	81.82%	62.65%		
V-268	Atlas™ II + DR	99.68%	99.43%	98.79%	97.26%	91.84%	66.94%	26.81%	12.10%		
V-243	Atlas™ + DR	99.89%	99.70%	99.30%	98.43%	96.27%	90.80%	71.99%	37.22%	13.79%	11.02%





Survival Summary

					1	Survival P	robability	1		1	1
Models	Family	1 year	2 year	3 year	4 year	5 year	6 year	7 year	8 year	9 year	10 year
CD2411-36Q	Ellipse™ DR	99.78%	99.78%								
CD2411-36C	Ellipse™ DR	99.73%	99.34%								
CD2357-40Q	Fortify Assura™ DR	99.90%	99.81%								
CD2357-40C	Fortify Assura™ DR	100.00%	100.00%								
CD2311-36Q	Ellipse [™] DR	99.13%	98.25%	97.75%							
CD2311-36	Ellipse™ DR	99.02%	98.01%	97.23%							
CD2257-40Q	Fortify Assura™ DR	99.87%	99.71%	99.35%							
CD2257-40	Fortify Assura™ DR	99.90%	99.78%	99.66%							
CD2231-40Q	Fortify [™] DR	99.87%	99.76%	99.29%	98.55%	97.71%					
CD2231-40	Fortify [™] DR	99.95%	99.86%	99.47%	98.73%	97.99%					
CD2211-36Q	Current [™] + DR	99.85%	99.58%	99.41%	99.22%	98.78%	98.73%				
CD2211-36	Current [™] + DR	99.90%	99.76%	99.53%	99.13%	98.98%	98.27%				
2207-36	Current [™] DR RF	99.75%	99.60%	99.22%	98.72%	98.20%	97.84%	97.31%	96.82%		
V-268	Atlas™ II + DR	99.80%	99.68%	99.41%	99.12%	98.83%	98.51%	98.35%	98.23%		
V-243	Atlas™ + DR	99.97%	99.90%	99.80%	99.63%	99.43%	99.19%	99.03%	98.83%	98.65%	98.65%





U.S. Malfunction Summary

										U.	S. Malfun	ctions w/	Compromi	sed Ther	ару						
		Registered	Percent Returned for		trical oonent		trical connect	Ba	ttery	0	Voltage acitor		ware/ ware	Mech	anical	Bat	le Early ttery letion	Ot	ther	Тс	otal
Models	Family	US Implants	Analysis	Qty.	Rate	Qty.	Rate	Qty.	Rate	Qty.	Rate	Qty.	Rate	Qty.	Rate	Qty.	Rate	Qty.	Rate	Qty.	Rate
CD2411-36Q	Ellipse [™] DR	7,418	1.90%	0	0.00%	1	0.01%	0	0.00%	0	0.00%	1	0.01%	1	0.01%	0	0.00%	1	0.01%	4	0.05%
CD2411-36C	Ellipse [™] DR	4,290	1.80%	1	0.02%	0	0.00%	0	0.00%	4	0.09%	0	0.00%	0	0.00%	0	0.00%	0	0.00%	5	0.12%
CD2357-40Q	Fortify Assura [™] DR	13,639	1.70%	3	0.02%	1	<0.01%	0	0.00%	0	0.00%	0	0.00%	0	0.00%	0	0.00%	0	0.00%	4	0.03%
CD2357-40C	Fortify Assura [™] DR	6,878	1.80%	0	0.00%	0	0.00%	0	0.00%	0	0.00%	0	0.00%	0	0.00%	0	0.00%	0	0.00%	0	0.00%
CD2311-36Q	Ellipse [™] DR	5,898	4.80%	3	0.05%	0	0.00%	0	0.00%	30	0.51%	1	0.02%	2	0.03%	0	0.00%	1	0.02%	37	0.63%
CD2311-36	Ellipse [™] DR	3,744	5.10%	2	0.05%	0	0.00%	0	0.00%	16	0.43%	0	0.00%	4	0.11%	0	0.00%	3	0.08%	25	0.67%
CD2257-40Q	Fortify Assura [™] DR	6,793	4.00%	3	0.04%	0	0.00%	0	0.00%	0	0.00%	0	0.00%	0	0.00%	3	0.04%	3	0.04%	9	0.13%
CD2257-40	Fortify Assura [™] DR	4,224	4.50%	1	0.02%	0	0.00%	0	0.00%	1	0.02%	0	0.00%	0	0.00%	0	0.00%	0	0.00%	2	0.05%
CD2231-40Q	Fortify [™] DR	26,841	5.50%	5	0.02%	2	<0.01%	17	0.06%	2	<0.01%	1	<0.01%	0	0.00%	58	0.22%	9	0.03%	94	0.35%
CD2231-40	Fortify [™] DR	12,072	7.00%	3	0.02%	1	<0.01%	2	0.02%	6	0.05%	0	0.00%	0	0.00%	21	0.17%	4	0.03%	37	0.31%
CD2211-36Q	Current [™] + DR	8,141	7.50%	5	0.06%	0	0.00%	5	0.06%	1	0.01%	0	0.00%	0	0.00%	3	0.04%	4	0.05%	18	0.22%
CD2211-36	Current [™] + DR	6,270	9.40%	2	0.03%	2	0.03%	5	0.08%	0	0.00%	0	0.00%	0	0.00%	5	0.08%	5	0.08%	19	0.30%
2207-36	Current [™] DR RF	22,372	13.40%	9	0.04%	6	0.03%	19	0.08%	1	<0.01%	0	0.00%	1	<0.01%	32	0.14%	30	0.13%	98	0.44%
V-268	Atlas™ II + DR	14,807	28.10%	6	0.04%	4	0.03%	9	0.06%	0	0.00%	0	0.00%	0	0.00%	18	0.12%	10	0.07%	47	0.32%
V-243	Atlas™ + DR	21,081	26.10%	5	0.02%	1	<0.01%	12	0.06%	1	<0.01%	0	0.00%	0	0.00%	6	0.03%	17	0.08%	42	0.20%



U.S. Malfunction Summary

										U.9	S. Malfund	ctions w/o	Comprom	ised The	rapy						
		Registered	Percent Returned for		trical conent		ctrical connect	Bat	ttery		/oltage acitor		ware/ ware	Mech	nanical	Ba	le Early ttery letion	Ot	ther	Te	otal
Models	Family	US Implants	Analysis	Qty.	Rate	Qty.	Rate	Qty.	Rate	Qty.	Rate	Qty.	Rate	Qty.	Rate	Qty.	Rate	Qty.	Rate	Qty.	Rate
CD2411-36Q	Ellipse [™] DR	7,418	1.90%	1	0.01%	0	0.00%	0	0.00%	1	0.01%	0	0.00%	0	0.00%	0	0.00%	0	0.00%	2	0.03%
CD2411-36C	Ellipse [™] DR	4,290	1.80%	0	0.00%	0	0.00%	0	0.00%	1	0.02%	0	0.00%	0	0.00%	0	0.00%	0	0.00%	1	0.02%
CD2357-40Q	Fortify Assura [™] DR	13,639	1.70%	2	0.01%	0	0.00%	0	0.00%	0	0.00%	0	0.00%	0	0.00%	0	0.00%	0	0.00%	2	0.01%
CD2357-40C	Fortify Assura [™] DR	6,878	1.80%	0	0.00%	0	0.00%	0	0.00%	0	0.00%	0	0.00%	0	0.00%	0	0.00%	0	0.00%	0	0.00%
CD2311-36Q	Ellipse [™] DR	5,898	4.80%	1	0.02%	0	0.00%	0	0.00%	4	0.07%	0	0.00%	2	0.03%	0	0.00%	2	0.03%	9	0.15%
CD2311-36	Ellipse [™] DR	3,744	5.10%	2	0.05%	0	0.00%	0	0.00%	4	0.11%	0	0.00%	3	0.08%	0	0.00%	0	0.00%	9	0.24%
CD2257-40Q	Fortify Assura [™] DR	6,793	4.00%	1	0.01%	0	0.00%	0	0.00%	0	0.00%	1	0.01%	1	0.01%	1	0.01%	0	0.00%	4	0.06%
CD2257-40	Fortify Assura [™] DR	4,224	4.50%	0	0.00%	0	0.00%	0	0.00%	0	0.00%	1	0.02%	0	0.00%	1	0.02%	1	0.02%	3	0.07%
CD2231-40Q	Fortify [™] DR	26,841	5.50%	5	0.02%	2	<0.01%	11	0.04%	0	0.00%	0	0.00%	0	0.00%	21	0.08%	4	0.01%	43	0.16%
CD2231-40	Fortify [™] DR	12,072	7.00%	2	0.02%	0	0.00%	5	0.04%	0	0.00%	0	0.00%	0	0.00%	7	0.06%	2	0.02%	16	0.13%
CD2211-36Q	Current [™] + DR	8,141	7.50%	2	0.02%	0	0.00%	6	0.07%	0	0.00%	0	0.00%	1	0.01%	3	0.04%	2	0.02%	14	0.17%
CD2211-36	Current [™] + DR	6,270	9.40%	1	0.02%	0	0.00%	4	0.06%	0	0.00%	2	0.03%	0	0.00%	4	0.06%	0	0.00%	11	0.18%
2207-36	Current [™] DR RF	22,372	13.40%	11	0.05%	2	<0.01%	9	0.04%	0	0.00%	6	0.03%	5	0.02%	17	0.08%	6	0.03%	56	0.25%
V-268	Atlas™ II + DR	14,807	28.10%	4	0.03%	0	0.00%	3	0.02%	0	0.00%	0	0.00%	1	<0.01%	6	0.04%	5	0.03%	19	0.13%
V-243	Atlas™ + DR	21,081	26.10%	3	0.01%	0	0.00%	4	0.02%	0	0.00%	0	0.00%	3	0.01%	4	0.02%	2	<0.01%	16	0.08%





Worldwide Malfunction Summary

										Worle	dwide Malf	unctions	w/ Compre	mised T	herapy						
		Worldwide	Percent Returned for		trical conent		ctrical connect	Ba	ttery		Voltage acitor		tware/ nware	Mech	nanical	Ba	ble Early attery bletion	Ot	ther	Te	otal
Models	Family	Sales	Analysis	Qty.	Rate	Qty.	Rate	Qty.	Rate	Qty.	Rate	Qty.	Rate	Qty.	Rate	Qty.	Rate	Qty.	Rate	Qty.	Rate
CD2411-36Q	Ellipse [™] DR	7,925	2.25%	0	0.00%	1	0.01%	0	0.00%	0	0.00%	1	0.01%	1	0.01%	0	0.00%	1	0.01%	4	0.05%
CD2411-36C	Ellipse [™] DR	4,461	2.33%	1	0.02%	0	0.00%	0	0.00%	4	0.09%	0	0.00%	0	0.00%	0	0.00%	0	0.00%	5	0.11%
CD2357-40Q	Fortify Assura™ DR	14,332	1.88%	3	0.02%	1	<0.01%	0	0.00%	0	0.00%	0	0.00%	0	0.00%	0	0.00%	0	0.00%	4	0.03%
CD2357-40C	Fortify Assura™ DR	7,204	2.08%	0	0.00%	0	0.00%	0	0.00%	0	0.00%	0	0.00%	0	0.00%	0	0.00%	0	0.00%	0	0.00%
CD2311-36Q	Ellipse [™] DR	5,928	6.22%	3	0.05%	0	0.00%	0	0.00%	30	0.51%	1	0.02%	2	0.03%	0	0.00%	1	0.02%	37	0.62%
CD2311-36	Ellipse [™] DR	3,762	5.98%	2	0.05%	0	0.00%	0	0.00%	16	0.43%	0	0.00%	4	0.11%	0	0.00%	3	0.08%	25	0.66%
CD2257-40Q	Fortify Assura [™] DR	6,794	4.40%	3	0.04%	0	0.00%	0	0.00%	0	0.00%	0	0.00%	0	0.00%	3	0.04%	3	0.04%	9	0.13%
CD2257-40	Fortify Assura [™] DR	4,242	5.02%	1	0.02%	0	0.00%	0	0.00%	1	0.02%	0	0.00%	0	0.00%	0	0.00%	0	0.00%	2	0.05%
CD2231-40Q	Fortify™ DR	27,893	5.76%	5	0.02%	2	<0.01%	17	0.06%	2	<0.01%	1	<0.01%	0	0.00%	59	0.21%	10	0.04%	96	0.34%
CD2231-40	Fortify™ DR	13,006	7.30%	3	0.02%	1	<0.01%	2	0.02%	6	0.05%	0	0.00%	0	0.00%	22	0.17%	5	0.04%	39	0.30%
CD2211-36Q	Current [™] + DR	14,637	5.16%	6	0.04%	0	0.00%	7	0.05%	2	0.01%	0	0.00%	0	0.00%	5	0.03%	8	0.05%	28	0.19%
CD2211-36	Current [™] + DR	12,809	5.40%	2	0.02%	3	0.02%	5	0.04%	0	0.00%	0	0.00%	0	0.00%	7	0.05%	7	0.05%	24	0.19%
2207-36	Current [™] DR RF	33,048	11.08%	16	0.05%	11	0.03%	25	0.08%	9	0.03%	0	0.00%	2	<0.01%	47	0.14%	38	0.11%	148	0.45%
V-268	Atlas™ II + DR	25,779	18.44%	15	0.06%	5	0.02%	19	0.07%	1	<0.01%	0	0.00%	0	0.00%	31	0.12%	19	0.07%	90	0.35%
V-243	Atlas™ + DR	34,105	18.24%	5	0.01%	3	<0.01%	25	0.07%	1	<0.01%	0	0.00%	0	0.00%	14	0.04%	30	0.09%	78	0.23%



Worldwide Malfunction Summary

										World	wide Malf	unctions	w/o Compr	omised T	herapy						
		Worldwide	Percent Returned for		trical ponent		ctrical connect	Bat	tery		Voltage acitor		ware/ ware	Mech	anical	Ba	ole Early ttery letion	Ot	ther	Te	otal
Models	Family	Sales	Analysis	Qty.	Rate	Qty.	Rate	Qty.	Rate	Qty.	Rate	Qty.	Rate	Qty.	Rate	Qty.	Rate	Qty.	Rate	Qty.	Rate
CD2411-36Q	Ellipse [™] DR	7,925	2.25%	1	0.01%	0	0.00%	0	0.00%	1	0.01%	0	0.00%	0	0.00%	0	0.00%	0	0.00%	2	0.03%
CD2411-36C	Ellipse [™] DR	4,461	2.33%	0	0.00%	0	0.00%	0	0.00%	1	0.02%	0	0.00%	0	0.00%	0	0.00%	0	0.00%	1	0.02%
CD2357-40Q	Fortify Assura™ DR	14,332	1.88%	2	0.01%	0	0.00%	0	0.00%	0	0.00%	0	0.00%	0	0.00%	0	0.00%	0	0.00%	2	0.01%
CD2357-40C	Fortify Assura [™] DR	7,204	2.08%	0	0.00%	0	0.00%	0	0.00%	0	0.00%	0	0.00%	0	0.00%	0	0.00%	0	0.00%	0	0.00%
CD2311-36Q	Ellipse [™] DR	5,928	6.22%	1	0.02%	0	0.00%	0	0.00%	4	0.07%	0	0.00%	2	0.03%	0	0.00%	2	0.03%	9	0.15%
CD2311-36	Ellipse [™] DR	3,762	5.98%	2	0.05%	0	0.00%	0	0.00%	4	0.11%	0	0.00%	3	0.08%	0	0.00%	0	0.00%	9	0.24%
CD2257-40Q	Fortify Assura [™] DR	6,794	4.40%	1	0.01%	0	0.00%	0	0.00%	0	0.00%	1	0.01%	1	0.01%	1	0.01%	0	0.00%	4	0.06%
CD2257-40	Fortify Assura [™] DR	4,242	5.02%	0	0.00%	0	0.00%	0	0.00%	0	0.00%	1	0.02%	0	0.00%	1	0.02%	1	0.02%	3	0.07%
CD2231-40Q	Fortify™ DR	27,893	5.76%	5	0.02%	2	<0.01%	12	0.04%	0	0.00%	0	0.00%	0	0.00%	21	0.08%	4	0.01%	44	0.16%
CD2231-40	Fortify [™] DR	13,006	7.30%	2	0.02%	0	0.00%	5	0.04%	0	0.00%	0	0.00%	1	<0.01%	7	0.05%	2	0.02%	17	0.13%
CD2211-36Q	Current [™] + DR	14,637	5.16%	4	0.03%	0	0.00%	8	0.05%	0	0.00%	0	0.00%	2	0.01%	5	0.03%	2	0.01%	21	0.14%
CD2211-36	Current [™] + DR	12,809	5.40%	1	<0.01%	0	0.00%	4	0.03%	0	0.00%	2	0.02%	1	<0.01%	4	0.03%	1	<0.01%	13	0.10%
2207-36	Current [™] DR RF	33,048	11.08%	16	0.05%	5	0.02%	13	0.04%	4	0.01%	11	0.03%	9	0.03%	23	0.07%	10	0.03%	91	0.28%
V-268	Current [™] DR RF	25,779	18.44%	7	0.03%	0	0.00%	8	0.03%	1	<0.01%	0	0.00%	2	<0.01%	9	0.03%	6	0.02%	33	0.13%
V-243	Atlas™ II + DR	34,105	18.24%	6	0.02%	0	0.00%	6	0.02%	0	0.00%	0	0.00%	5	0.01%	6	0.02%	3	<0.01%	26	0.08%



Actively Monitored Study Data Summary

Qualifying Complications

	Number of	Active	Cumulative Months of		ropriate lock		ss of metry		ardial Ision	Bat	ature tery etion	SI Ero	kin sion	To	otal
Models	Devices Enrolled	Devices Enrolled	Follow-Up	Qty.	Rate	Qty.	Rate	Qty.	Rate	Qty.	Rate	Qty.	Rate	Qty.	Rate
CD2231-40Q	390	247	17,882	0	0.00%	0	0.00%	0	0.00%	2	0.51%	0	0.00%	2	0.51%
CD2231-40	177	82	6,508	0	0.00%	0	0.00%	0	0.00%	1	0.56%	0	0.00%	1	0.56%
CD2211-36Q	834	431	43,168	0	0.00%	0	0.00%	0	0.00%	3	0.36%	1	0.12%	4	0.48%
CD2211-36	122	53	5,706	1	0.82%	0	0.00%	0	0.00%	1	0.82%	0	0.00%	2	1.64%
2207-36	630	188	30,930	1	0.16%	0	0.00%	0	0.00%	0	0.00%	0	0.00%	1	0.16%

Malfunctions

											Malfuncti	ons w/ Co	ompromise	d Therap	y						
		Number of Devices	Percent Returned for		trical oonent		trical onnect	Bat	ttery		Voltage acitor		ware/ ware	Mech	anical	Bat	le Early tery etion	Ot	her	Тс	otal
Models	Family	Enrolled	Analysis	Qty.	Rate	Qty.	Rate	Qty.	Rate	Qty.	Rate	Qty.	Rate	Qty.	Rate	Qty.	Rate	Qty.	Rate	Qty.	Rate
CD2231-40Q	Fortify™ DR	390	7.40%	0	0.00%	0	0.00%	0	0.00%	0	0.00%	0	0.00%	0	0.00%	1	0.26%	1	0.26%	2	0.51%
CD2231-40	Fortify [™] DR	177	9.60%	0	0.00%	0	0.00%	0	0.00%	0	0.00%	0	0.00%	0	0.00%	0	0.00%	0	0.00%	0	0.00%
CD2211-36Q	$Current^{\scriptscriptstyleTM} + DR$	834	8.00%	0	0.00%	0	0.00%	1	0.12%	0	0.00%	0	0.00%	0	0.00%	0	0.00%	0	0.00%	1	0.12%
CD2211-36	Current [™] + DR	122	10.70%	0	0.00%	0	0.00%	0	0.00%	0	0.00%	0	0.00%	0	0.00%	0	0.00%	1	0.82%	1	0.82%
2207-36	Current [™] DR RF	630	15.90%	0	0.00%	0	0.00%	0	0.00%	0	0.00%	0	0.00%	0	0.00%	1	0.16%	0	0.00%	1	0.16%

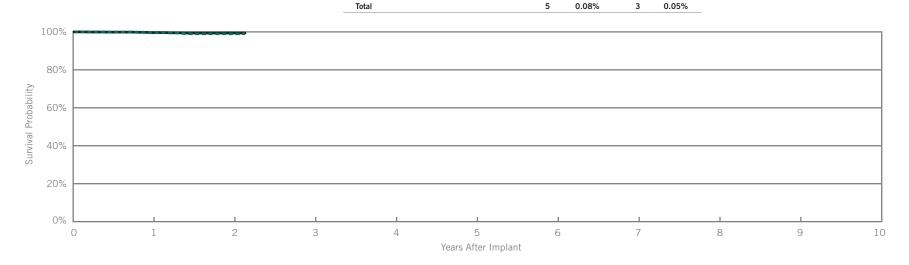
				Malfunctions w/o Compromised Therapy																	
	Number	Number of Devices		Percent Returned for		lectrical Electrical Interconnect		Battery		High Voltage Capacitor			ware/ ware	Mech	anical	Bat	le Early tery etion	Other		Тс	otal
Models	Family	Enrolled	Analysis	Qty.	Rate	Qty.	Rate	Qty.	Rate	Qty.	Rate	Qty.	Rate	Qty.	Rate	Qty.	Rate	Qty.	Rate	Qty.	Rate
CD2231-40Q	Fortify [™] DR	390	7.40%	0	0.00%	0	0.00%	0	0.00%	0	0.00%	0	0.00%	0	0.00%	0	0.00%	0	0.00%	0	0.00%
CD2231-40	Fortify™ DR	177	9.60%	0	0.00%	0	0.00%	0	0.00%	0	0.00%	0	0.00%	0	0.00%	0	0.00%	0	0.00%	0	0.00%
CD2211-36Q	Current [™] + DR	834	8.00%	0	0.00%	0	0.00%	2	0.24%	0	0.00%	0	0.00%	0	0.00%	1	0.12%	0	0.00%	3	0.36%
CD2211-36	Current [™] + DR	122	10.70%	0	0.00%	0	0.00%	0	0.00%	0	0.00%	0	0.00%	0	0.00%	0	0.00%	1	0.82%	1	0.82%
2207-36	Current [™] DR RF	630	15.90%	0	0.00%	0	0.00%	0	0.00%	0	0.00%	0	0.00%	0	0.00%	1	0.16%	0	0.00%	1	0.16%

IMPLANTABLE CARDIOVERTER Defibrillator (ICD) Devices

Single-Chamber



Illipse [™] VR Iodel CD1411-36Q*			Mal w/ Co	functions mpromised herapy	w/o Co	functions ompromised herapy
US Regulatory Approval	June 2013		Qty	Rate	Qty	Rate
Registered US Implants	6,271	Electrical Component	1	0.02%	0	0.00%
Estimated Active US Implants	5,468	Electrical Interconnect	0	0.00%	0	0.00%
Estimated Longevity	(see table on page 136)	Battery	0	0.00%	0	0.00%
Normal Battery Depletion	3	High Voltage Capacitor	4	0.06%	1	0.02%
Max. Delivered Energy	36 joules	Software/Firmware	0	0.00%	1	0.02%
Number of US Advisories (see pgs. 290-295)	One	Mechanical	0	0.00%	1	0.02%
		Possible Early Battery Depletion	0	0.00%	0	0.00%
		Other	0	0.00%	0	0.00%
		Total	5	0.08%	3	0.05%



Including Normal Battery Depletion

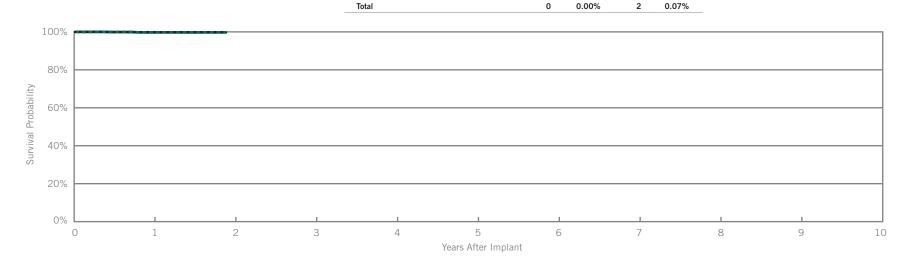
Year	1	2	at 26 months				
Survival Probability	99.55%	99.00%	99.00%				
± 1 standard error	0.08%	0.22%	0.22%				
Sample Size	4,440	1,460	230				

Year	1	2	at 26 months				
Survival Probability	99.62%	99.39%	99.39%				
± 1 standard error	0.07%	0.15%	0.15%				



Customer Reported Performance Data

Illipse [™] VR Iodel CD1411-36C*			Mali w/ Coi	functions mpromised herapy	w/o Co	functions mpromised herapy
US Regulatory Approval	June 2013		Qty	Rate	Qty	Rate
Registered US Implants	2,766	Electrical Component	0	0.00%	1	0.04%
Estimated Active US Implants	2,442	Electrical Interconnect	0	0.00%	0	0.00%
Estimated Longevity	(see table on page 136)	Battery	0	0.00%	0	0.00%
Normal Battery Depletion	0	High Voltage Capacitor	0	0.00%	1	0.04%
Max. Delivered Energy	36 joules	Software/Firmware	0	0.00%	0	0.00%
Number of US Advisories (see pgs. 290-295)	One	Mechanical	0	0.00%	0	0.00%
		Possible Early Battery Depletion	0	0.00%	0	0.00%
		Other	0	0.00%	0	0.00%
		Total	0	0.00%	2	0.07%



Including Normal Battery Depletion

Year	1	at 23 months				
Survival Probability	99.76%	99.76%				
± 1 standard error	0.12%	0.12%				
Sample Size	1,930	240				

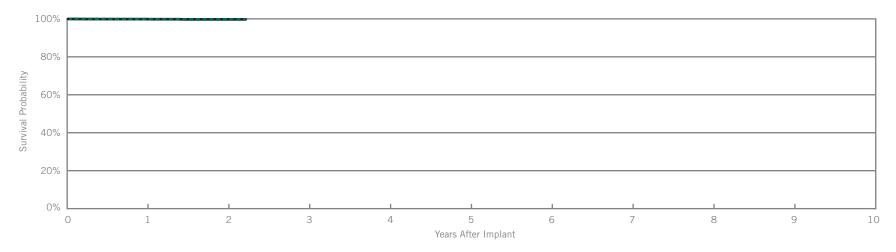
Year	1	at 23 months				
Survival Probability	99.76%	99.76%				
± 1 standard error	0.12%	0.12%				



Fortify Assura[™] VR Model CD1357-40Q*

US Regulatory Approval	June 2013
Registered US Implants	11,582
Estimated Active US Implants	9,963
Estimated Longevity	(see table on page 136)
Normal Battery Depletion	1
Max. Delivered Energy	40 joules
Number of US Advisories	None

	w/ Co	functions mpromised herapy	Malfunctions w/o Compromise Therapy		
	Qty	Rate	Qty	Rate	
Electrical Component	0	0.00%	3	0.03%	
Electrical Interconnect	1	<0.01%	0	0.00%	
Battery	0	0.00%	0	0.00%	
High Voltage Capacitor	0	0.00%	0	0.00%	
Software/Firmware	0	0.00%	0	0.00%	
Mechanical	0	0.00%	0	0.00%	
Possible Early Battery Depletion	0	0.00%	0	0.00%	
Other	2	0.02%	2	0.02%	
Total	3	0.03%	5	0.04%	



Including Normal Battery Depletion

Year	1	2	at 27 months				
Survival Probability	99.84%	99.71%	99.71%				
± 1 standard error	0.04%	0.08%	0.08%				
Sample Size	8,200	2,650	240				

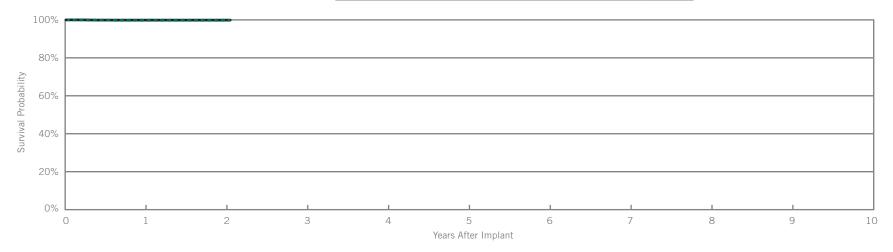
Year	1	2	at 27 months			
Survival Probability	99.86%	99.74%	99.74%			
± 1 standard error	0.04%	0.08%	0.08%			



Fortify Assura[™] VR Model CD1357-40C*

US Regulatory Approval	June 2013
Registered US Implants	4,222
Estimated Active US Implants	3,680
Estimated Longevity	(see table on page 136)
Normal Battery Depletion	2
Max. Delivered Energy	40 joules
Number of US Advisories	None

	w/ Cor	Malfunctions w/ Compromised Therapy		functions mpromised herapy
	Qty	Rate	Qty	Rate
Electrical Component	1	0.02%	0	0.00%
Electrical Interconnect	0	0.00%	0	0.00%
Battery	0	0.00%	0	0.00%
High Voltage Capacitor	0	0.00%	0	0.00%
Software/Firmware	0	0.00%	0	0.00%
Mechanical	1	0.02%	0	0.00%
Possible Early Battery Depletion	0	0.00%	0	0.00%
Other	0	0.00%	0	0.00%
Total	2	0.05%	0	0.00%



Including Normal Battery Depletion

Year	1	2	at 25 months				
Survival Probability	99.75%	99.75%	99.75%				
± 1 standard error	0.09%	0.09%	0.09%				
Sample Size	2,970	960	200				

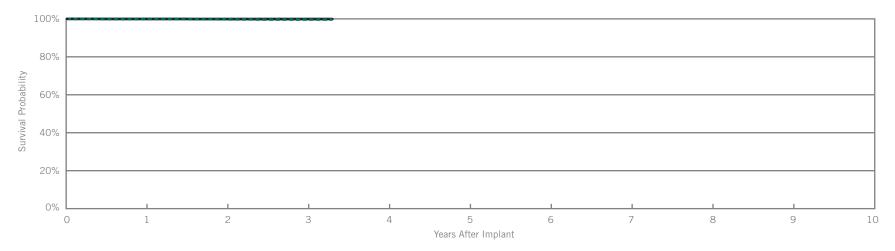
Year	1	2	at 25 months	
Survival Probability	99.88%	99.88%	99.88%	
± 1 standard error	0.06%	0.06%	0.06%	



Fortify Assura[™] VR Model CD1257-40Q*

US Regulatory Approval	May 2012
Registered US Implants	5,068
Estimated Active US Implants	3,697
Estimated Longevity	(see table on page 136)
Normal Battery Depletion	4
Max. Delivered Energy	40 joules
Number of US Advisories	None

	w/ Cor	unctions npromised herapy	w/o Co	functions mpromised herapy	
	Qty	Rate	Qty	Rate	
Electrical Component	0	0.00%	0	0.00%	
Electrical Interconnect	0	0.00%	0	0.00%	
Battery	0	0.00%	0	0.00%	
High Voltage Capacitor	0	0.00%	0	0.00%	
Software/Firmware	0	0.00%	0	0.00%	
Mechanical	0	0.00%	0	0.00%	
Possible Early Battery Depletion	1	0.02%	0	0.00%	
Other	1	0.02%	0	0.00%	
Total	2	0.04%	0	0.00%	



Including Normal Battery Depletion

Year	1	2	3	at 40 months	
Survival Probability	99.92%	99.81%	99.67%	99.67%	
± 1 standard error	0.04%	0.07%	0.10%	0.10%	
Sample Size	4,750	3,920	2,000	240	

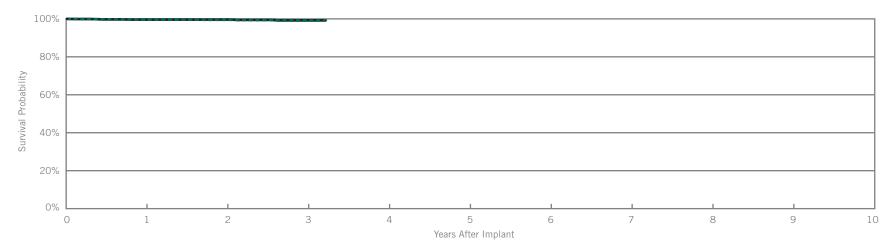
Year	1	2	3	at 40 months			
Survival Probability	99.96%	99.91%	99.91%	99.91%			
± 1 standard error	0.03%	0.05%	0.05%	0.05%			



Fortify Assura[™] VR Model CD1257-40

US Regulatory Approval	May 2012
Registered US Implants	2,288
Estimated Active US Implants	1,712
Estimated Longevity	(see table on page 136)
Normal Battery Depletion	1
Max. Delivered Energy	40 joules
Number of US Advisories	None

	w/ Cor	Malfunctions w/ Compromised Therapy		Malfunctions w/o Compromised Therapy		
	Qty	Rate	Qty	Rate		
Electrical Component	0	0.00%	0	0.00%		
Electrical Interconnect	2	0.09%	0	0.00%		
Battery	1	0.04%	1	0.04%		
High Voltage Capacitor	0	0.00%	0	0.00%		
Software/Firmware	0	0.00%	0	0.00%		
Mechanical	0	0.00%	0	0.00%		
Possible Early Battery Depletion	0	0.00%	0	0.00%		
Other	1	0.04%	1	0.04%		
Total	4	0.17%	2	0.09%		



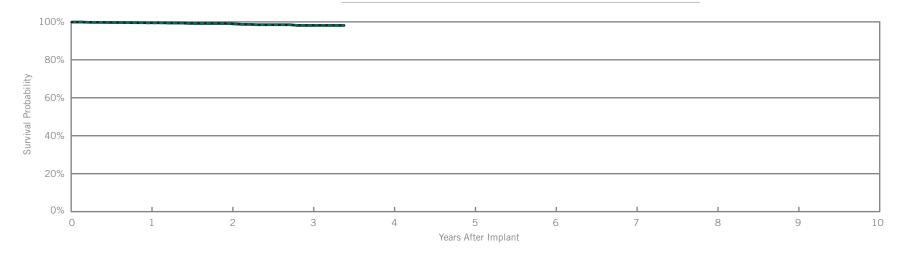
Including Normal Battery Depletion

Year	1	2	3	at 39 months			
Survival Probability	99.63%	99.51%	99.09%	99.09%			
± 1 standard error	0.13%	0.16%	0.27%	0.27%			
Sample Size	2,130	1,700	870	200			

Year	1	2	3	at 39 months			
Survival Probability	99.63%	99.63%	99.21%	99.21%			
± 1 standard error	0.13%	0.13%	0.25%	0.25%			



Ellipse [™] VR /odel CD1311-36Q *			Malf w/ Cor	unctions npromised herapy	w/o Co	Malfunctions w/o Compromised Therapy	
US Regulatory Approval	May 2012		Qty	Rate	Qty	Rate	
Registered US Implants	4,736	Electrical Component	1	0.02%	1	0.02%	
Estimated Active US Implants	3,466	Electrical Interconnect	0	0.00%	0	0.00%	
Estimated Longevity	(see table on page 136)	Battery	0	0.00%	0	0.00%	
Normal Battery Depletion	0	High Voltage Capacitor	17	0.36%	2	0.04%	
Max. Delivered Energy	36 joules	Software/Firmware	1	0.02%	0	0.00%	
Number of US Advisories (see pgs. 290-295)	One	Mechanical	1	0.02%	0	0.00%	
		Possible Early Battery Depletion	0	0.00%	0	0.00%	
		Other	1	0.02%	2	0.04%	
		Total	21	0.44%	5	0.11%	



Including Normal Battery Depletion

Year	1	2	3	at 41 months			
Survival Probability	99.51%	99.10%	98.14%	98.14%			
± 1 standard error	0.10%	0.14%	0.26%	0.26%			
Sample Size	4,460	3,710	2,060	300			

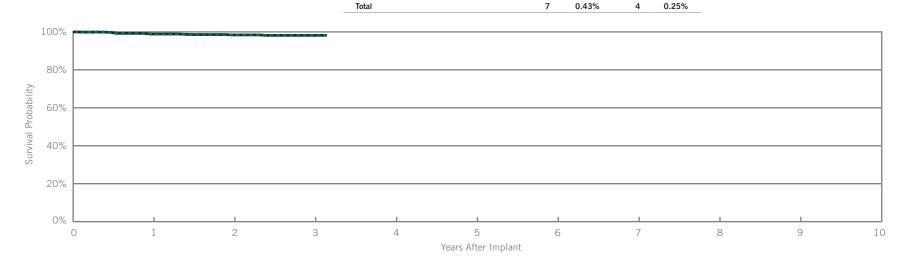
Excluding Normal Battery Depletion

Year	1	2	3	at 41 months			
Survival Probability	99.51%	99.10%	98.14%	98.14%			
± 1 standard error	0.10%	0.14%	0.26%	0.26%			

*DF4-LLHH connector type.



llipse [™] VR Iodel CD1311-36			Mal w/ Co	functions mpromised herapy	w/o Co	functions mpromised herapy
US Regulatory Approval	May 2012		Qty	Rate	Qty	Rate
Registered US Implants	1,620	Electrical Component	2	0.12%	0	0.00%
Estimated Active US Implants	1,197	Electrical Interconnect	1	0.06%	0	0.00%
Estimated Longevity	(see table on page 136)	Battery	0	0.00%	0	0.00%
Normal Battery Depletion	0	High Voltage Capacitor	2	0.12%	2	0.12%
Max. Delivered Energy	36 joules	Software/Firmware	0	0.00%	1	0.06%
Number of US Advisories (see pgs. 290-295)	One	Mechanical	2	0.12%	1	0.06%
		Possible Early Battery Depletion	0	0.00%	0	0.00%
		Other	0	0.00%	0	0.00%



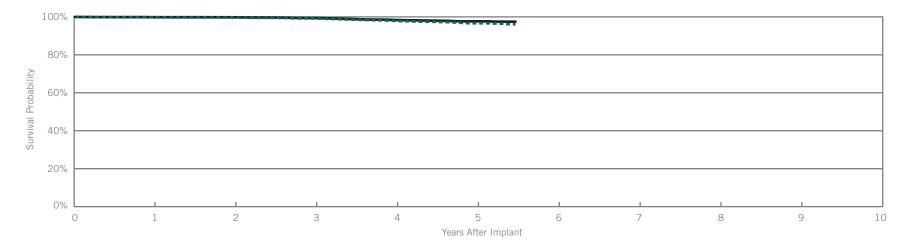
Including Normal Battery Depletion

Year	1	2	3	at 38 months			
Survival Probability	98.87%	98.41%	98.17%	98.17%			
± 1 standard error	0.22%	0.31%	0.37%	0.37%			
Sample Size	1,520	1,260	690	240			

Year	1	2	3	at 38 months			
Survival Probability	98.87%	98.41%	98.17%	98.17%			
± 1 standard error	0.22%	0.31%	0.37%	0.37%			



ortify™ VR ₀del CD1231-40Q*			w/ Co	functions mpromised herapy	w/o Co	unctions mpromised herapy
US Regulatory Approval	May 2010		Qty	Rate	Qty	Rate
Registered US Implants	16,152	Electrical Component	5	0.03%	2	0.01%
Estimated Active US Implants	9,584	Electrical Interconnect	2	0.01%	0	0.00%
Estimated Longevity	(see table on page 136)	Battery	8	0.05%	8	0.05%
Normal Battery Depletion	29	High Voltage Capacitor	1	<0.01%	0	0.00%
Max. Delivered Energy	40 joules	Software/Firmware	0	0.00%	0	0.00%
Number of US Advisories	None	Mechanical	0	0.00%	0	0.00%
		Possible Early Battery Depletion	32	0.20%	18	0.11%
		Other	5	0.03%	2	0.01%
		Total	53	0.33%	30	0.19%



Including Normal Battery Depletion

Year	1	2	3	4	5	at 66 months		
Survival Probability	99.75%	99.67%	99.17%	97.88%	96.64%	96.10%		
± 1 standard error	0.04%	0.05%	0.08%	0.14%	0.24%	0.37%		
Sample Size	15,100	13,260	11,510	8,410	4,050	390		

Excluding Normal Battery Depletion

Year	1	2	3	4	5	at 66 months		
Survival Probability	99.84%	99.79%	99.40%	98.37%	97.66%	97.48%		
± 1 standard error	0.03%	0.04%	0.07%	0.12%	0.19%	0.22%		

*DF4-LLHH connector type.



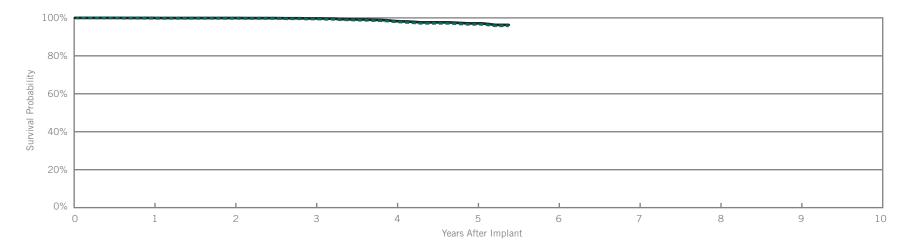
Actively Monitored Study Data

Fortify[™] VR

							w/ Co	functions mpromised herapy	w/o Co	unctions mpromise nerapy
Má	May 2010	Qualifying Com	nplications				Qty	Rate	Qty	Rate
tudy 15	158	None Reported	1			Electrical Component	0	0.00%	0	0.00%
11	111					Electrical Interconnect	0	0.00%	0	0.00%
7,6	7,656					Battery	0	0.00%	0	0.00%
(se	(see table on page 136)					High Voltage Capacitor	0	0.00%	0	0.00%
40	40 joules					Software/Firmware	0	0.00%	0	0.00%
						Mechanical	0	0.00%	0	0.00%
						Possible Early Battery Depletion	1	0.63%	0	0.00%
						Other	0	0.00%	0	0.00%
						Total	1	0.63%	0	0.00%
										-
										-
1	2	3	4	5	6	7 8		9		10

Year	1	2	3	4	5	
Survival Probability	100.00%	100.00%	100.00%	100.00%	100.00%	
± 1 standard error	0.00%	0.00%	0.00%	0.00%	0.00%	
Sample Size	160	150	130	120	50	

ortify™ VR odel CD1231-40			w/ Cor	functions mpromised herapy	w/o Co	functions mpromised herapy
US Regulatory Approval	May 2010		Qty	Rate	Qty	Rate
Registered US Implants	6,776	Electrical Component	1	0.01%	3	0.04%
Estimated Active US Implants	3,983	Electrical Interconnect	0	0.00%	0	0.00%
Estimated Longevity	(see table on page 136)	Battery	3	0.04%	0	0.00%
Normal Battery Depletion	10	High Voltage Capacitor	5	0.07%	0	0.00%
Max. Delivered Energy	40 joules	Software/Firmware	0	0.00%	0	0.00%
Number of US Advisories	None	Mechanical	0	0.00%	0	0.00%
		Possible Early Battery Depletion	14	0.21%	7	0.10%
		Other	2	0.03%	3	0.04%
		Total	25	0.37%	13	0.19%



Including Normal Battery Depletion

Year	1	2	3	4	5	at 65 months		
Survival Probability	99.78%	99.71%	99.41%	97.97%	96.59%	95.81%		
± 1 standard error	0.06%	0.07%	0.10%	0.20%	0.37%	0.53%		
Sample Size	6,350	5,560	4,820	3,530	1,700	260		

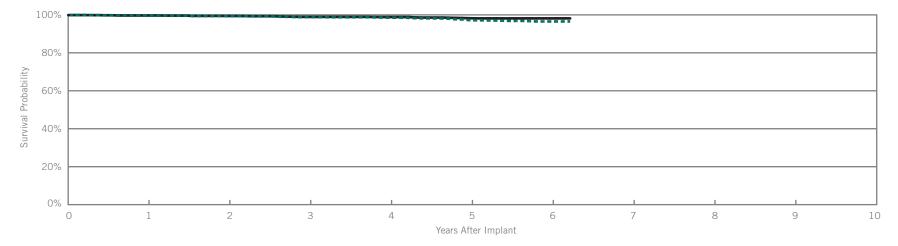
Year	1	2	3	4	5	at 65 months		
Survival Probability	99.97%	99.93%	99.70%	98.35%	97.09%	96.30%		
± 1 standard error	0.02%	0.03%	0.08%	0.18%	0.35%	0.53%		



Current[™] + VR Model CD1211-36Q*

US Regulatory Approval	February 2009
Registered US Implants	4,430
Estimated Active US Implants	2,267
Estimated Longevity	(see table on page 136)
Normal Battery Depletion	16
Max. Delivered Energy	36 joules
Number of US Advisories	None

	w/ Cor	unctions npromised herapy	w/o Co	functions mpromised herapy
	Qty	Rate	Qty	Rate
Electrical Component	4	0.09%	3	0.07%
Electrical Interconnect	0	0.00%	0	0.00%
Battery	4	0.09%	3	0.07%
High Voltage Capacitor	1	0.02%	0	0.00%
Software/Firmware	0	0.00%	0	0.00%
Mechanical	0	0.00%	0	0.00%
Possible Early Battery Depletion	6	0.14%	1	0.02%
Other	2	0.05%	2	0.05%
Total	17	0.38%	9	0.20%



Including Normal Battery Depletion

Year	1	2	3	4	5	6	at 75 months		
Survival Probability	99.61%	99.36%	98.83%	98.54%	97.22%	96.53%	96.53%		
± 1 standard error	0.09%	0.12%	0.18%	0.20%	0.29%	0.37%	0.37%		
Sample Size	4,120	3,600	3,200	2,790	2,380	1,380	260		

Excluding Normal Battery Depletion

Year	1	2	3	4	5	6	at 75 months		
Survival Probability	99.67%	99.41%	98.94%	98.87%	98.24%	98.15%	98.15%		
± 1 standard error	0.09%	0.12%	0.17%	0.18%	0.23%	0.25%	0.25%		

*DF4-LLHH connector type.

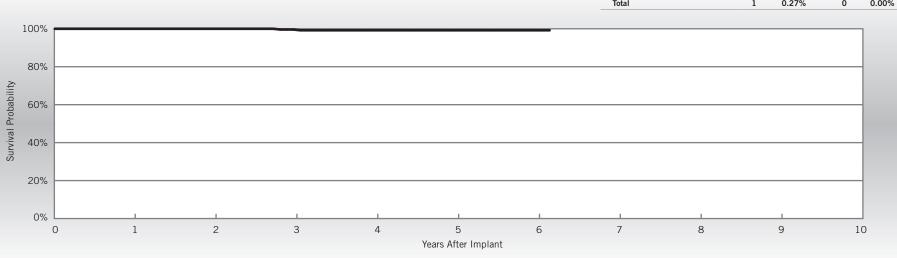


Actively Monitored Study Data

Current[™] + VR Model CD1211-36Q*

US Regulatory Approval	February 2009	Qualifying Complications	Qty	Rate
Number of Devices Enrolled in Study	364	Inappropriate Shock	1	0.27%
Active Devices Enrolled in Study	182	Premature Battery Depletion	1	0.27%
Cumulative Months of Follow-up	18,215			
Estimated Longevity	(see table on page 136)			
Max. Delivered Energy	36 joules			

	w/ Com	unctions promised erapy	w/o Cor	unctions npromised erapy
	Qty	Rate	Qty	Rate
Electrical Component	0	0.00%	0	0.00%
Electrical Interconnect	0	0.00%	0	0.00%
Battery	1	0.27%	0	0.00%
High Voltage Capacitor	0	0.00%	0	0.00%
Software/Firmware	0	0.00%	0	0.00%
Mechanical	0	0.00%	0	0.00%
Possible Early Battery Depletion	0	0.00%	0	0.00%
Other	0	0.00%	0	0.00%
Total	1	0.27%	0	0.00%



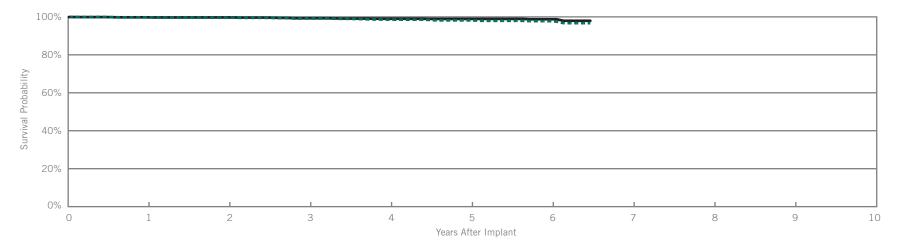
Year	1	2	3	4	5	6	at 74 months		
Survival Probability	100.00%	100.00%	99.61%	99.21%	99.21%	99.21%	99.21%		
± 1 standard error	0.00%	0.00%	0.39%	0.55%	0.55%	0.55%	0.55%		
Sample Size	350	310	270	240	210	130	60		



Current [™] + VR	
Model CD1211-36	

US Regulatory Approval	February 2009
Registered US Implants	3,636
Estimated Active US Implants	1,822
Estimated Longevity	(see table on page 136)
Normal Battery Depletion	11
Max. Delivered Energy	36 joules
Number of US Advisories	None

	w/ Cor	unctions npromised nerapy	w/o Co	functions mpromised herapy
	Qty	Rate	Qty	Rate
Electrical Component	2	0.06%	2	0.06%
Electrical Interconnect	2	0.06%	0	0.00%
Battery	3	0.08%	0	0.00%
High Voltage Capacitor	2	0.06%	0	0.00%
Software/Firmware	0	0.00%	0	0.00%
Mechanical	0	0.00%	0	0.00%
Possible Early Battery Depletion	4	0.11%	1	0.03%
Other	1	0.03%	0	0.00%
Total	14	0.39%	3	0.08%



Including Normal Battery Depletion

Year	1	2	3	4	5	6	at 78 months		
Survival Probability	99.77%	99.57%	99.14%	98.52%	98.16%	97.76%	96.69%		
± 1 standard error	0.08%	0.12%	0.17%	0.23%	0.27%	0.32%	0.51%		
Sample Size	3,390	2,960	2,620	2,260	1,890	1,240	240		

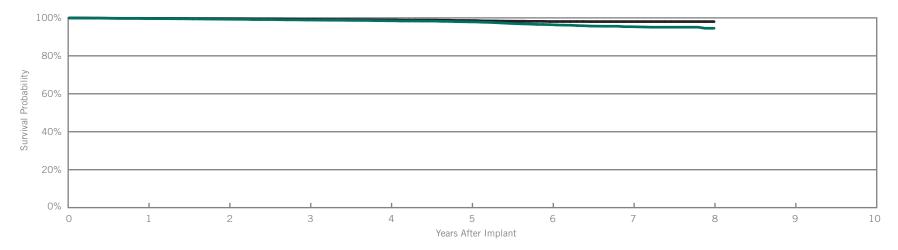
Year	1	2	3	4	5	6	at 78 months		
Survival Probability	99.77%	99.70%	99.28%	99.02%	98.92%	98.75%	97.95%		
± 1 standard error	0.08%	0.09%	0.16%	0.19%	0.20%	0.23%	0.43%		



Current[™] VR RF Model 1207-36

US Regulatory Approval	September 2007
Registered US Implants	13,273
Estimated Active US Implants	5,622
Estimated Longevity	(see table on page 136)
Normal Battery Depletion	75
Max. Delivered Energy	36 joules
Number of US Advisories	None

	w/ Co	unctions npromised herapy	Malfunctions w/o Compromise Therapy	
	Qty	Rate	Qty	Rate
Electrical Component	6	0.05%	6	0.05%
Electrical Interconnect	10	0.08%	0	0.00%
Battery	8	0.06%	4	0.03%
High Voltage Capacitor	1	<0.01%	1	<0.01%
Software/Firmware	0	0.00%	1	<0.01%
Mechanical	0	0.00%	2	0.02%
Possible Early Battery Depletion	11	0.08%	13	0.10%
Other	8	0.06%	3	0.02%
Total	44	0.33%	30	0.23%



Including Normal Battery Depletion

Year	1	2	3	4	5	6	7	8	
Survival Probability	99.62%	99.28%	98.85%	98.46%	97.88%	96.43%	95.35%	94.52%	
± 1 standard error	0.05%	0.08%	0.10%	0.12%	0.15%	0.20%	0.26%	0.49%	
Sample Size	12,370	10,760	9,510	8,490	7,560	6,390	4,150	260	

Year	1	2	3	4	5	6	7	8	
Survival Probability	99.73%	99.57%	99.19%	98.94%	98.61%	98.08%	98.04%	98.04%	
± 1 standard error	0.04%	0.06%	0.08%	0.10%	0.12%	0.15%	0.15%	0.15%	



Actively Monitored Study Data

Current[™] VR RF

odel 1207-36							Mali w/ Cor T	functions mpromised herapy	w/o Co	unctions mpromis nerapy
US Regulatory Approval	September 2007	Qualifying Comp	lications				Qty	Rate	Qty	Rate
Number of Devices Enrolled in Study	396	None Reported				Electrical Component	0	0.00%	1	0.25%
Active Devices Enrolled in Study	123					Electrical Interconnect	0	0.00%	0	0.00
Cumulative Months of Follow-up	19,628					Battery	0	0.00%	0	0.00
Estimated Longevity	(see table on page 136)					High Voltage Capacitor	0	0.00%	0	0.00
Max. Delivered Energy	36 joules					Software/Firmware	0	0.00%	0	0.00
						Mechanical	0	0.00%	0	0.00
						Possible Early Battery Depletion	0	0.00%	0	0.00
						Other	0	0.00%	0	0.00
						Total	0	0.00%	1	0.25
60%										
40%										
40% 20%										-
	I									-
20%	I 2		i 4	5	6			<u>г</u> 9	1	-
20%	2	3	4	5 Years After Implan				9	1	0

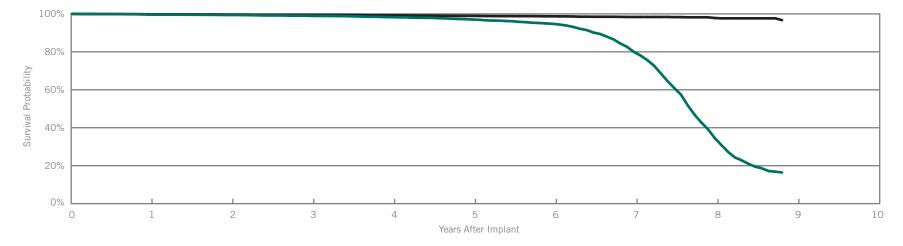
Year	1	2	3	4	5	6	7	at 87 months	
Survival Probability	100.00%	100.00%	100.00%	100.00%	100.00%	100.00%	100.00%	100.00%	
± 1 standard error	0.00%	0.00%	0.00%	0.00%	0.00%	0.00%	0.00%	0.00%	
Sample Size	380	340	280	220	170	140	100	50	



Atlas[™] II VR Model V-168

US Regulatory Approval	July 2006
Registered US Implants	10,599
Estimated Active US Implants	1,843
Estimated Longevity	(see table on page 136)
Normal Battery Depletion	1,239
Max. Delivered Energy	36 joules
Number of US Advisories (see pgs. 290-295)	One

	w/ Co	Malfunctions w/ Compromised Therapy		Malfunctions w/o Compromised Therapy		
	Qty	Rate	Qty	Rate		
Electrical Component	4	0.04%	3	0.03%		
Electrical Interconnect	2	0.02%	0	0.00%		
Battery	10	0.09%	2	0.02%		
High Voltage Capacitor	1	<0.01%	0	0.00%		
Software/Firmware	0	0.00%	0	0.00%		
Mechanical	1	<0.01%	3	0.03%		
Possible Early Battery Depletion	10	0.09%	5	0.05%		
Other	10	0.09%	5	0.05%		
Total	38	0.36%	18	0.17%		



Including Normal Battery Depletion

Year	1	2	3	4	5	6	7	8	at 106 months	
Survival Probability	99.63%	99.40%	98.96%	98.26%	97.03%	94.75%	79.99%	34.65%	16.43%	
± 1 standard error	0.05%	0.08%	0.11%	0.15%	0.20%	0.28%	0.54%	0.78%	0.71%	
Sample Size	9,940	8,730	7,680	6,720	5,920	5,200	4,120	2,320	230	

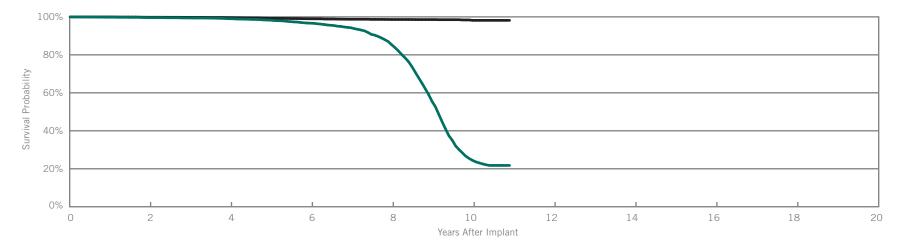
Year	1	2	3	4	5	6	7	8	at 106 months	
Survival Probability	99.78%	99.60%	99.45%	99.22%	98.94%	98.72%	98.37%	97.82%	96.70%	
± 1 standard error	0.04%	0.06%	0.08%	0.10%	0.12%	0.14%	0.16%	0.18%	0.28%	



Atlas™	+	VR
Model V-	19	3

US Regulatory Approval	October 2003
Registered US Implants	20,778
Estimated Active US Implants	3,145
Estimated Longevity	(see table on page 136)
Normal Battery Depletion	1,990
Max. Delivered Energy	36 joules
Number of US Advisories (see pgs. 290-295)	Three

	w/ Con	unctions promised erapy	Malfunctions w/o Compromised Therapy				
	Qty	Rate	Qty	Rate			
Electrical Component	2	<0.01%	2	<0.01%			
Electrical Interconnect	5	0.02%	1	<0.01%			
Battery	8	0.04%	2	<0.01%			
High Voltage Capacitor	2	<0.01%	1	<0.01%			
Software/Firmware	0	0.00%	1	<0.01%			
Mechanical	0	0.00%	1	<0.01%			
Possible Early Battery Depletion	26	0.13%	5	0.02%			
Other	12	0.06%	6	0.03%			
Total	55	0.26%	19	0.09%			



Including Normal Battery Depletion

Year	2	4	6	8	10	at 131 months		
Survival Probability	99.61%	99.03%	96.67%	85.34%	24.42%	21.76%		
± 1 standard error	0.04%	0.08%	0.17%	0.36%	0.58%	0.59%		
Sample Size	17,110	13,170	9,870	7,080	2,250	230		

Year	2	4	6	8	10	at 131 months		
Survival Probability	99.81%	99.61%	98.98%	98.61%	98.16%	98.16%		
± 1 standard error	0.03%	0.05%	0.09%	0.11%	0.16%	0.22%		



BATTERY LONGEVITY SUMMARY

Single-Chamber ICDs



Battery Longevity

			Approximate D	Ouration (years)	
Models	Family	No Pacing	25% Pacing	50% Pacing	100% Pacing
CD1411-36Q	Ellipse [™] VR*	11.1	10.6	10.1	9.4
CD1411-36C	Ellipse™ VR*	11.1	10.6	10.1	9.4
CD1357-40Q	Fortify Assura [™] VR*	11.7	11.3	10.8	10.1
CD1357-40C	Fortify Assura [™] VR*	11.7	11.3	10.8	10.1
CD1257-40Q	Fortify Assura [™] VR*	11.7	11.3	10.8	10.1
CD1257-40	Fortify Assura™ VR*	11.7	11.3	10.8	10.1
CD1311-36Q	Ellipse™ VR*	11.1	10.6	10.1	9.4
CD1311-36	Ellipse [™] VR*	11.1	10.6	10.1	9.4
CD1231-40Q	Fortify™ VR*	10.8	10.3	9.9	9.1
CD1231-40	Fortify [™] VR*	10.8	10.3	9.9	9.1
CD1211-36Q	Current [™] + VR**	8.4	8.0	7.6	7.0
CD1211-36	Current [™] + VR**	8.4	8.0	7.6	7.0
1207-36	Current [™] VR RF**	8.4	8.0	7.6	7.0
V-168	Atlas™ II VR**	8.4	8.0	7.6	7.0
V-193	Atlas™ + VR**	8.6	8.2	7.9	7.3

Pacing parameters: VVI, 2.5V, 0.5 ms, 60 ppm, 500 ohms

*Battery voltage range: 3.20-2.59. Three maximum charges per year.

**Battery voltage range: 3.20-2.45. Four maximum charges per year as well as monthly charging during the battery's mid-life voltage range.



SUMMARY INFORMATION

Single-Chamber ICDs



Survival Summary

	-		Survival Probability													
Models	Family	1 year	2 year	3 year	4 year	5 year	6 year	7 year	8 year	9 year	10 year					
CD1411-36Q	Ellipse™ VR	99.55%	99.00%													
CD1411-36C	Ellipse™ VR	99.76%														
CD1357-40Q	Fortify Assura™ VR	99.84%	99.71%													
CD1357-40C	Fortify Assura™ VR	99.75%	99.75%													
CD1257-40Q	Fortify Assura [™] VR	99.92%	99.81%	99.67%												
CD1257-40	Fortify Assura™ VR	99.63%	99.51%	99.09%												
CD1311-36Q	Ellipse™ VR	99.51%	99.10%	98.14%												
CD1311-36	Ellipse™ VR	98.87%	98.41%	98.17%												
CD1231-40Q	Fortify [™] VR	99.75%	99.67%	99.17%	97.88%	96.64%										
CD1231-40	Fortify [™] VR	99.78%	99.71%	99.41%	97.97%	96.59%										
CD1211-36Q	Current [™] + VR	99.61%	99.36%	98.83%	98.54%	97.22%	96.53%									
CD1211-36	Current [™] + VR	99.77%	99.57%	99.14%	98.52%	98.16%	97.76%									
1207-36	Current [™] VR RF	99.62%	99.28%	98.85%	98.46%	97.88%	96.43%	95.35%	94.52%							
V-168	Atlas™ II VR	99.63%	99.40%	98.96%	98.26%	97.03%	94.75%	79.99%	34.65%							
V-193	Atlas™ + VR	99.82%	99.61%	99.43%	99.03%	98.25%	96.67%	94.26%	85.34%	55.45%	24.42%					





Single-Chamber

Survival Summary

	-	Survival Probability												
Models	Family	1 year	2 year	3 year	4 year	5 year	6 year	7 year	8 year	9 year	10 year			
CD1411-36Q	Ellipse™ VR	99.62%	99.39%											
CD1411-36C	Ellipse™ VR	99.76%												
CD1357-40Q	Fortify Assura™ VR	99.86%	99.74%											
CD1357-40C	Fortify Assura™ VR	99.88%	99.88%											
CD1257-40Q	Fortify Assura™ VR	99.96%	99.91%	99.91%										
CD1257-40	Fortify Assura™ VR	99.63%	99.63%	99.21%										
CD1311-36Q	Ellipse™ VR	99.51%	99.10%	98.14%										
CD1311-36	Ellipse [™] VR	98.87%	98.41%	98.17%										
CD1231-40Q	Fortify [™] VR	99.84%	99.79%	99.40%	98.37%	97.66%								
CD1231-40	Fortify [™] VR	99.97%	99.93%	99.70%	98.35%	97.09%								
CD1211-36Q	Current [™] + VR	99.67%	99.41%	98.94%	98.87%	98.24%	98.15%							
CD1211-36	Current [™] + VR	99.77%	99.70%	99.28%	99.02%	98.92%	98.75%							
1207-36	Current [™] VR RF	99.73%	99.57%	99.19%	98.94%	98.61%	98.08%	98.04%	98.04%					
V-168	Atlas™ II VR	99.78%	99.60%	99.45%	99.22%	98.94%	98.72%	98.37%	97.82%					
V-193	Atlas™ + VR	99.95%	99.81%	99.74%	99.61%	99.23%	98.98%	98.74%	98.61%	98.57%	98.16%			



U.S. Malfunction Summary

										U.	S. Malfun	ctions w/	Comprom	ised The	ару						
	els Family	Registered	Percent Returned for		trical conent		trical connect	Ba	ttery		Voltage acitor		ware/ ware	Mech	anical	Ba	le Early ttery letion	O	ther	Тс	otal
Models		US Implants	Analysis	Qty.	Rate	Qty.	Rate	Qty.	Rate	Qty.	Rate	Qty.	Rate	Qty.	Rate	Qty.	Rate	Qty.	Rate	Qty.	Rate
CD1411-36Q	Ellipse [™] VR	6,271	1.50%	1	0.02%	0	0.00%	0	0.00%	4	0.06%	0	0.00%	0	0.00%	0	0.00%	0	0.00%	5	0.08%
CD1411-36C	Ellipse [™] VR	2,766	1.50%	0	0.00%	0	0.00%	0	0.00%	0	0.00%	0	0.00%	0	0.00%	0	0.00%	0	0.00%	0	0.00%
CD1357-40Q	Fortify Assura [™] VR	11,582	1.50%	0	0.00%	1	<0.01%	0	0.00%	0	0.00%	0	0.00%	0	0.00%	0	0.00%	2	0.02%	3	0.03%
CD1357-40C	Fortify Assura [™] VR	4,222	1.90%	1	0.02%	0	0.00%	0	0.00%	0	0.00%	0	0.00%	1	0.02%	0	0.00%	0	0.00%	2	0.05%
CD1257-40Q	Fortify Assura [™] VR	5,068	3.40%	0	0.00%	0	0.00%	0	0.00%	0	0.00%	0	0.00%	0	0.00%	1	0.02%	1	0.02%	2	0.04%
CD1257-40	Fortify Assura [™] VR	2,288	4.90%	0	0.00%	2	0.09%	1	0.04%	0	0.00%	0	0.00%	0	0.00%	0	0.00%	1	0.04%	4	0.17%
CD1311-36Q	Ellipse [™] VR	4,736	4.20%	1	0.02%	0	0.00%	0	0.00%	17	0.36%	1	0.02%	1	0.02%	0	0.00%	1	0.02%	21	0.44%
CD1311-36	Ellipse [™] VR	1,620	5.60%	2	0.12%	1	0.06%	0	0.00%	2	0.12%	0	0.00%	2	0.12%	0	0.00%	0	0.00%	7	0.43%
CD1231-40Q	Fortify [™] VR	16,152	6.20%	5	0.03%	2	0.01%	8	0.05%	1	<0.01%	0	0.00%	0	0.00%	32	0.20%	5	0.03%	53	0.33%
CD1231-40	Fortify™ VR	6,776	7.50%	1	0.01%	0	0.00%	3	0.04%	5	0.07%	0	0.00%	0	0.00%	14	0.21%	2	0.03%	25	0.37%
CD1211-36Q	Current [™] + VR	4,430	7.50%	4	0.09%	0	0.00%	4	0.09%	1	0.02%	0	0.00%	0	0.00%	6	0.14%	2	0.05%	17	0.38%
CD1211-36	Current [™] + VR	3,636	7.40%	2	0.06%	2	0.06%	3	0.08%	2	0.06%	0	0.00%	0	0.00%	4	0.11%	1	0.03%	14	0.39%
1207-36	Current [™] VR RF	13,273	9.30%	6	0.05%	10	0.08%	8	0.06%	1	<0.01%	0	0.00%	0	0.00%	11	0.08%	8	0.06%	44	0.33%
V-168	Atlas™ II VR	10,599	22.30%	4	0.04%	2	0.02%	10	0.09%	1	<0.01%	0	0.00%	1	<0.01%	10	0.09%	10	0.09%	38	0.36%
V-193	Atlas [™] + VR	20,778	20.70%	2	<0.01%	5	0.02%	8	0.04%	2	<0.01%	0	0.00%	0	0.00%	26	0.13%	12	0.06%	55	0.26%





U.S. Malfunction Summary

										U.:	S. Malfunc	tions w/o	Comprom	ised The	rapy						
		Registered	Percent Returned for		trical conent		trical onnect	Ва	ttery		Voltage acitor		ware/ ware	Mech	anical	Ba	le Early ttery letion	Of	ther	Тс	otal
Models	Family	US Implants	Analysis	Qty.	Rate	Qty.	Rate	Qty.	Rate	Qty.	Rate	Qty.	Rate	Qty.	Rate	Qty.	Rate	Qty.	Rate	Qty.	Rate
CD1411-36Q	Ellipse [™] VR	6,271	1.50%	0	0.00%	0	0.00%	0	0.00%	1	0.02%	1	0.02%	1	0.02%	0	0.00%	0	0.00%	3	0.05%
CD1411-36C	Ellipse [™] VR	2,766	1.50%	1	0.04%	0	0.00%	0	0.00%	1	0.04%	0	0.00%	0	0.00%	0	0.00%	0	0.00%	2	0.07%
CD1357-40Q	Fortify Assura [™] VR	11,582	1.50%	3	0.03%	0	0.00%	0	0.00%	0	0.00%	0	0.00%	0	0.00%	0	0.00%	2	0.02%	5	0.04%
CD1357-40C	Fortify Assura [™] VR	4,222	1.90%	0	0.00%	0	0.00%	0	0.00%	0	0.00%	0	0.00%	0	0.00%	0	0.00%	0	0.00%	0	0.00%
CD1257-40Q	Fortify Assura [™] VR	5,068	3.40%	0	0.00%	0	0.00%	0	0.00%	0	0.00%	0	0.00%	0	0.00%	0	0.00%	0	0.00%	0	0.00%
CD1257-40	Fortify Assura [™] VR	2,288	4.90%	0	0.00%	0	0.00%	1	0.04%	0	0.00%	0	0.00%	0	0.00%	0	0.00%	1	0.04%	2	0.09%
CD1311-36Q	Ellipse [™] VR	4,736	4.20%	1	0.02%	0	0.00%	0	0.00%	2	0.04%	0	0.00%	0	0.00%	0	0.00%	2	0.04%	5	0.11%
CD1311-36	Ellipse [™] VR	1,620	5.60%	0	0.00%	0	0.00%	0	0.00%	2	0.12%	1	0.06%	1	0.06%	0	0.00%	0	0.00%	4	0.25%
CD1231-40Q	Fortify [™] VR	16,152	6.20%	2	0.01%	0	0.00%	8	0.05%	0	0.00%	0	0.00%	0	0.00%	18	0.11%	2	0.01%	30	0.19%
CD1231-40	Fortify™ VR	6,776	7.50%	3	0.04%	0	0.00%	0	0.00%	0	0.00%	0	0.00%	0	0.00%	7	0.10%	3	0.04%	13	0.19%
CD1211-36Q	Current [™] + VR	4,430	7.50%	3	0.07%	0	0.00%	3	0.07%	0	0.00%	0	0.00%	0	0.00%	1	0.02%	2	0.05%	9	0.20%
CD1211-36	Current [™] + VR	3,636	7.40%	2	0.06%	0	0.00%	0	0.00%	0	0.00%	0	0.00%	0	0.00%	1	0.03%	0	0.00%	3	0.08%
1207-36	Current [™] VR RF	13,273	9.30%	6	0.05%	0	0.00%	4	0.03%	1	<0.01%	1	<0.01%	2	0.02%	13	0.10%	3	0.02%	30	0.23%
V-168	Atlas™ II VR	10,599	22.30%	3	0.03%	0	0.00%	2	0.02%	0	0.00%	0	0.00%	3	0.03%	5	0.05%	5	0.05%	18	0.17%
V-193	Atlas™ + VR	20,778	20.70%	2	<0.01%	1	<0.01%	2	<0.01%	1	<0.01%	1	<0.01%	1	<0.01%	5	0.02%	6	0.03%	19	0.09%





Worldwide Malfunction Summary

										World	lwide Malf	unctions	w/ Compro	omised T	herapy						
		Worldwide	Percent Returned for		trical oonent		trical connect	Bat	tery		Voltage acitor		tware/ nware	Mech	anical	Ba	le Early ttery letion	Of	ther	Тс	otal
Models	Family	Sales	Analysis	Qty.	Rate	Qty.	Rate	Qty.	Rate	Qty.	Rate	Qty.	Rate	Qty.	Rate	Qty.	Rate	Qty.	Rate	Qty.	Rate
CD1411-36Q	Ellipse [™] VR	6,613	1.97%	1	0.02%	0	0.00%	0	0.00%	4	0.06%	0	0.00%	0	0.00%	0	0.00%	0	0.00%	5	0.08%
CD1411-36C	Ellipse [™] VR	2,937	2.18%	0	0.00%	0	0.00%	0	0.00%	0	0.00%	0	0.00%	0	0.00%	0	0.00%	0	0.00%	0	0.00%
CD1357-40Q	Fortify Assura [™] VR	12,009	1.68%	0	0.00%	1	<0.01%	0	0.00%	0	0.00%	0	0.00%	0	0.00%	0	0.00%	2	0.02%	3	0.02%
CD1357-40C	Fortify Assura [™] VR	4,443	2.30%	2	0.05%	0	0.00%	0	0.00%	0	0.00%	0	0.00%	1	0.02%	0	0.00%	0	0.00%	3	0.07%
CD1257-40Q	Fortify Assura [™] VR	5,046	3.79%	0	0.00%	0	0.00%	0	0.00%	0	0.00%	0	0.00%	0	0.00%	1	0.02%	1	0.02%	2	0.04%
CD1257-40	Fortify Assura [™] VR	2,302	5.60%	0	0.00%	2	0.09%	1	0.04%	0	0.00%	0	0.00%	0	0.00%	0	0.00%	1	0.04%	4	0.17%
CD1311-36Q	Ellipse [™] VR	4,813	4.80%	1	0.02%	0	0.00%	0	0.00%	17	0.35%	1	0.02%	1	0.02%	0	0.00%	1	0.02%	21	0.44%
CD1311-36	Ellipse [™] VR	1,637	7.39%	2	0.12%	1	0.06%	0	0.00%	3	0.18%	0	0.00%	2	0.12%	0	0.00%	0	0.00%	8	0.49%
CD1231-40Q	Fortify [™] VR	17,201	6.26%	5	0.03%	2	0.01%	8	0.05%	1	<0.01%	0	0.00%	0	0.00%	34	0.20%	5	0.03%	55	0.32%
CD1231-40	Fortify™ VR	7,272	7.73%	1	0.01%	0	0.00%	3	0.04%	5	0.07%	0	0.00%	0	0.00%	14	0.19%	2	0.03%	25	0.34%
CD1211-36Q	Current [™] + VR	14,677	2.95%	7	0.05%	1	<0.01%	6	0.04%	1	<0.01%	0	0.00%	0	0.00%	7	0.05%	3	0.02%	25	0.17%
CD1211-36	Current [™] + VR	13,936	2.48%	2	0.01%	2	0.01%	3	0.02%	3	0.02%	0	0.00%	0	0.00%	4	0.03%	4	0.03%	18	0.13%
1207-36	Current [™] VR RF	24,845	6.62%	11	0.04%	30	0.12%	13	0.05%	1	<0.01%	0	0.00%	0	0.00%	22	0.09%	10	0.04%	87	0.35%
V-168	Atlas™ II VR	23,946	12.66%	8	0.03%	5	0.02%	19	0.08%	1	<0.01%	0	0.00%	1	<0.01%	22	0.09%	20	0.08%	76	0.32%
V-193	Atlas [™] + VR	39,597	13.58%	5	0.01%	9	0.02%	14	0.04%	4	0.01%	1	<0.01%	1	<0.01%	70	0.18%	30	0.08%	134	0.34%





Worldwide Malfunction Summary

										World	wide Malfu	Inctions	w/o Compr	omised 1	herapy						
		Worldwide	Percent Returned for		trical conent		trical onnect	Ва	ttery		Voltage acitor		ware/ nware	Mech	anical	Ba	ole Early ttery letion	0	ther	Тс	otal
Models	Family	Sales	Analysis	Qty.	Rate	Qty.	Rate	Qty.	Rate	Qty.	Rate	Qty.	Rate	Qty.	Rate	Qty.	Rate	Qty.	Rate	Qty.	Rate
CD1411-36Q	Ellipse [™] VR	6,613	1.97%	0	0.00%	0	0.00%	0	0.00%	1	0.02%	1	0.02%	1	0.02%	0	0.00%	0	0.00%	3	0.05%
CD1411-36C	Ellipse [™] VR	2,937	2.18%	1	0.03%	0	0.00%	0	0.00%	1	0.03%	0	0.00%	0	0.00%	0	0.00%	0	0.00%	2	0.07%
CD1357-40Q	Fortify Assura [™] VR	12,009	1.68%	3	0.02%	0	0.00%	0	0.00%	0	0.00%	0	0.00%	0	0.00%	0	0.00%	2	0.02%	5	0.04%
CD1357-40C	Fortify Assura [™] VR	4,443	2.30%	0	0.00%	0	0.00%	0	0.00%	0	0.00%	0	0.00%	0	0.00%	0	0.00%	0	0.00%	0	0.00%
CD1257-40Q	Fortify Assura [™] VR	5,046	3.79%	0	0.00%	0	0.00%	0	0.00%	0	0.00%	0	0.00%	0	0.00%	0	0.00%	0	0.00%	0	0.00%
CD1257-40	Fortify Assura [™] VR	2,302	5.60%	0	0.00%	0	0.00%	1	0.04%	0	0.00%	0	0.00%	0	0.00%	0	0.00%	1	0.04%	2	0.09%
CD1311-36Q	Ellipse [™] VR	4,813	4.80%	1	0.02%	0	0.00%	0	0.00%	2	0.04%	0	0.00%	0	0.00%	0	0.00%	2	0.04%	5	0.10%
CD1311-36	Ellipse [™] VR	1,637	7.39%	0	0.00%	0	0.00%	0	0.00%	2	0.12%	1	0.06%	1	0.06%	0	0.00%	0	0.00%	4	0.24%
CD1231-40Q	Fortify [™] VR	17,201	6.26%	3	0.02%	1	<0.01%	8	0.05%	0	0.00%	0	0.00%	0	0.00%	18	0.10%	2	0.01%	32	0.19%
CD1231-40	Fortify™ VR	7,272	7.73%	3	0.04%	0	0.00%	0	0.00%	0	0.00%	0	0.00%	0	0.00%	7	0.10%	3	0.04%	13	0.18%
CD1211-36Q	Current [™] + VR	14,677	2.95%	4	0.03%	0	0.00%	5	0.03%	0	0.00%	0	0.00%	0	0.00%	1	<0.01%	4	0.03%	14	0.10%
CD1211-36	Current [™] + VR	13,936	2.48%	3	0.02%	0	0.00%	1	<0.01%	0	0.00%	0	0.00%	0	0.00%	1	<0.01%	0	0.00%	5	0.04%
1207-36	Current [™] VR RF	24,845	6.62%	12	0.05%	3	0.01%	11	0.04%	1	<0.01%	3	0.01%	3	0.01%	19	0.08%	7	0.03%	59	0.24%
V-168	Atlas [™] II VR	23,946	12.66%	4	0.02%	0	0.00%	6	0.03%	0	0.00%	0	0.00%	8	0.03%	9	0.04%	9	0.04%	36	0.15%
V-193	Atlas™ + VR	39,597	13.58%	4	0.01%	3	<0.01%	8	0.02%	1	<0.01%	1	<0.01%	1	<0.01%	11	0.03%	11	0.03%	40	0.10%





Actively Monitored Study Data Summary

Qualifying Complications

	Number of	Active	Cumulative Months of		ropriate lock		ss of metry		ardial Ision	Bat	ature tery etion		kin sion	То	tal
Models	Devices Enrolled	Devices Enrolled	Follow-Up	Qty.	Rate	Qty.	Rate	Qty.	Rate	Qty.	Rate	Qty.	Rate	Qty.	Rate
CD1231-40Q	158	111	7,656	0	0.00%	0	0.00%	0	0.00%	0	0.00%	0	0.00%	0	0.00%
CD1211-36Q	364	182	18,215	1	0.27%	0	0.00%	0	0.00%	1	0.27%	0	0.00%	2	0.55%
1207-36	396	123	19,628	0	0.00%	0	0.00%	0	0.00%	0	0.00%	0	0.00%	0	0.00%

Malfunctions

											Malfuncti	ons w/ Co	ompromise	d Therapy	1						
		Number of Devices	Percent Returned for		trical ponent				ttery		Voltage acitor		ware/ ware	Mech	anical	Bat	e Early tery etion	Ot	her	То	otal
Models	Family	Enrolled	Analysis	Qty.	Rate	Qty.	Rate	Qty.	Rate	Qty.	Rate	Qty.	Rate	Qty.	Rate	Qty.	Rate	Qty.	Rate	Qty.	Rate
CD1231-40Q	Fortify [™] VR	158	6.30%	0	0.00%	0	0.00%	0	0.00%	0	0.00%	0	0.00%	0	0.00%	1	0.63%	0	0.00%	1	0.63%
CD1211-36Q	Current [™] + VR	364	6.90%	0	0.00%	0	0.00%	1	0.27%	0	0.00%	0	0.00%	0	0.00%	0	0.00%	0	0.00%	1	0.27%
1207-36	Current [™] VR RF	396	11.40%	0	0.00%	0	0.00%	0	0.00%	0	0.00%	0	0.00%	0	0.00%	0	0.00%	0	0.00%	0	0.00%

										I	Malfunctio	ons w/o Co	ompromise	ed Therap	у						
		Number of Devices	Percent Returned for		trical oonent				tery		/oltage acitor		ware/ ware	Mech	anical	Bat	le Early tery etion	Ot	her	То	otal
Models	Family	Enrolled	Analysis	Qty.	Rate	Qty.	Rate	Qty.	Rate	Qty.	Rate	Qty.	Rate	Qty.	Rate	Qty.	Rate	Qty.	Rate	Qty.	Rate
CD1231-40Q	Fortify [™] VR	158	6.30%	0	0.00%	0	0.00%	0	0.00%	0	0.00%	0	0.00%	0	0.00%	0	0.00%	0	0.00%	0	0.00%
CD1211-36Q	Current [™] + VR	364	6.90%	0	0.00%	0	0.00%	0	0.00%	0	0.00%	0	0.00%	0	0.00%	0	0.00%	0	0.00%	0	0.00%
1207-36	Current [™] VR RF	396	11.40%	1	0.25%	0	0.00%	0	0.00%	0	0.00%	0	0.00%	0	0.00%	0	0.00%	0	0.00%	1	0.25%

DEFIBRILLATION LEADS

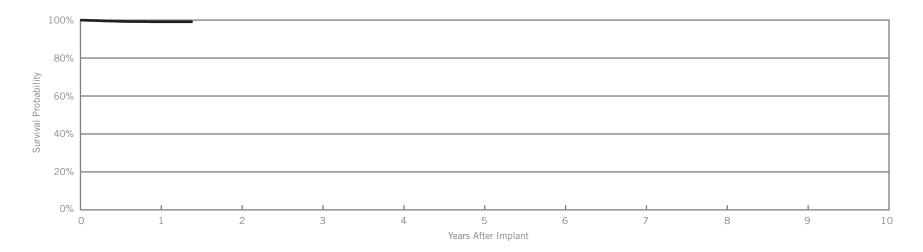


Optisure[™] DF4

Model LDA220Q

February 2014
3,297
2,962
Optim [™] *
Dual Coil, Active
Bipolar
Yes
One

		bservations		Complications	Malfunctions	Qty.	Rate
	Qty.	ant, ≤30 days) Rate	Qty.	0 days) Rate	Conductor Fracture	0	0.00%
Cardiac Perforation	4	0.12%	3	0.09%	Clavicular Crush	0	0.00%
	4				In the Pocket	0	0.00%
Conductor Fracture	0	0.00%	0	0.00%	Intravascular	0	0.00%
Lead Dislodgement	10	0.30%	14	0.42%			
Failure to Capture	7	0.21%	7	0.21%	Insulation Breach	0	0.00%
Oversensing	1	0.03%	2	0.06%	Lead-to-Can Contact	0	0.00%
	1				Lead-to-Lead Contact	0	0.00%
Failure to Sense	0	0.00%	0	0.00%	Clavicular Crush	0	0.00%
Insulation Breach	0	0.00%	0	0.00%		0	
Abnormal Pacing Impedance	0	0.00%	0	0.00%	Externalized Conductors	0	0.00%
Abnormal Defibrillation Impedance	2	0.06%	0	0.00%	Other	0	0.00%
	۷				Crimps, Welds & Bonds	0	0.00%
Extracardiac Stimulation	1	0.03%	0	0.00%	Other	0	0.00%
Other	2	0.06%	0	0.00%		0	
Total	27	0.82%	26	0.79%	Extrinsic Factors	9	0.27%
		0.52 /6		0.75%	Total	9	0.27%
Total Returned for Analysis	10		9				



Year	1	at 17 months				
Survival Probability	99.18%	99.18%				
± 1 standard error	0.20%	0.20%				
Sample Size	2,020	210				

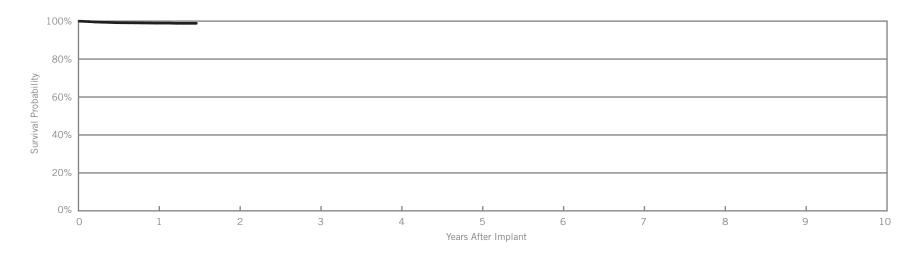


Optisure[™] DF4

Model LDA210Q

US Regulatory Approval	February 2014
Registered US Implants	8,132
Estimated Active US Implants	7,552
Insulation	Optim [™] *
Type and/or Fixation	Single Coil, Active
Polarity	Bipolar
Steroid	Yes
Number of US Advisories	None

				Malfunctions	Qty.	Rate
				Conductor Fracture	0	0.00%
-	1		1	Clavicular Crush	0	0.00%
9				In the Pocket	0	0.00%
0	0.00%	0	0.00%	Intravascular	0	0.00%
19	0.23%	37	0.45%			
10	0.12%	13	0.16%	Insulation Breach	0	0.00%
				Lead-to-Can Contact	0	0.00%
				Lead-to-Lead Contact	0	0.00%
6	0.07%	3	0.04%	Clavicular Crush	0	0.00%
0	0.00%	0	0.00%			
0	0.00%	1	0.01%	Externalized Conductors	0	0.00%
2		-		Other	0	0.00%
2				Crimps, Welds & Bonds	0	0.00%
0	0.00%	0	0.00%		0	0.00%
5	0.06%	4	0.05%		0	
55	0.68%	74	0.91%	Extrinsic Factors	30	0.37%
12	0.0070	29	0.5170	Total	30	0.37%
	(Post Impli Qty. 9 0 19 10 4 6 0 0 0 2 0 0 5 5 55	9 0.11% 0 0.00% 19 0.23% 10 0.12% 4 0.05% 6 0.07% 0 0.00% 2 0.02% 0 0.00% 5 0.66% 55 0.68%	(Post Implant, ≤30 days) Qty. (>3 Qty. 9 0.11% 5 0 0.00% 0 19 0.23% 37 10 0.12% 13 4 0.05% 8 6 0.07% 3 0 0.00% 0 12 0.02% 3 0 0.00% 1 2 0.02% 3 0 0.00% 0 5 0.66% 4	(Post Implant, ≤30 days) Qty. Rate (>30 days) Qty. Rate 9 0.11% 5 0.06% 0 0.00% 0 0.00% 19 0.23% 37 0.45% 10 0.12% 13 0.16% 4 0.05% 8 0.10% 6 0.07% 3 0.04% 0 0.00% 1 0.01% 2 0.02% 3 0.04% 0 0.00% 0 0.00% 5 0.06% 4 0.05%	(Post Implant, ≤30 days) Qty. Rate Conductor Fracture 9 0.11% 5 0.06% 0 0.00% 0 0.00% 19 0.23% 37 0.45% 10 0.12% 13 0.16% 4 0.05% 8 0.10% 6 0.07% 3 0.04% 0 0.00% 0 0.00% 2 0.02% 3 0.04% 2 0.02% 3 0.04% 0 0.00% 0 0.00% 5 0.66% 4 0.05% 55 0.68% 74 0.91%	(Post Implant, ≤30 days) Qty. Rate Conductor Fracture 0 9 0.11% 5 0.06% 0 Conductor Fracture 0 0 0.00% 0 0.00% 0 In the Pocket 0 19 0.23% 37 0.45% Insulation Breach 0 10 0.12% 13 0.16% Lead-to-Can Contact 0 4 0.05% 8 0.04% Clavicular Crush 0 0 0.00% 0 0.04% Clavicular Crush 0 0 0.00% 0 0.00% Clavicular Crush 0 0 0.00% 0 0.00% Clavicular Crush 0 0 0.00% 0 0.00% Clavicular Crush 0 1 0.01% 0 0.00% Other 0 0 0.00% 0 0.00% Other 0 1 0.01% 0 0 0 1 0.00



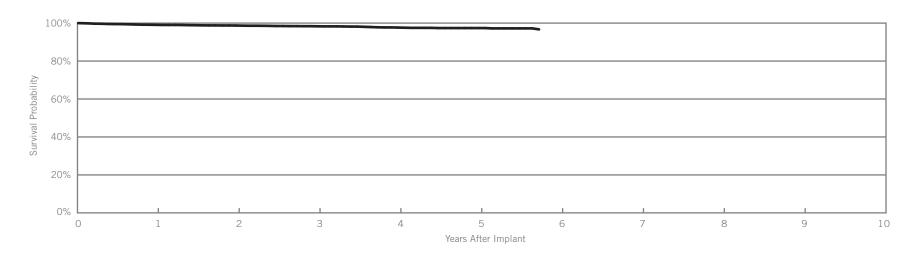
Year	1	at 19 months				
Survival Probability	98.95%	98.84%				
± 1 standard error	0.14%	0.18%				
Sample Size	4,930	200				



Durata[™] DF4 Models 7170Q & 7171Q

US Regulatory Approval	July 2009
Registered US Implants	5,159
Estimated Active US Implants	3,438
Insulation	Optim [™] *
Type and/or Fixation	Dual Coil, Passive
Polarity	Bipolar
Steroid	Yes
Number of US Advisories	None

,	Acute Observations			Complications	Malfunctions	Qty.	Rate
	Qty.	ant, ≤30 days) Rate	Qty.	0 days) Rate	Conductor Fracture	1	0.02%
Cardiac Perforation	6	0.12%	4	0.08%	Clavicular Crush	0	0.00%
	0				In the Pocket	0	0.00%
Conductor Fracture	1	0.02%	5	0.10%	Intravascular	1	0.02%
Lead Dislodgement	11	0.21%	18	0.35%		1	
Failure to Capture	8	0.16%	30	0.58%	Insulation Breach	4	0.08%
	3	0.06%	20	0.39%	Lead-to-Can Contact	3	0.06%
Oversensing	3				Lead-to-Lead Contact	1	0.02%
Failure to Sense	0	0.00%	0	0.00%	Clavicular Crush	0	0.00%
Insulation Breach	0	0.00%	2	0.04%		0	
Abnormal Pacing Impedance	1	0.02%	8	0.16%	Externalized Conductors	0	0.00%
	-		6		Other	0	0.00%
Abnormal Defibrillation Impedance	0	0.00%	6	0.12%	Crimps, Welds & Bonds	0	0.00%
Extracardiac Stimulation	0	0.00%	0	0.00%		0	0.00%
Other	1	0.02%	0	0.00%	Other	0	
Total	31	0.60%	93	1.80%	Extrinsic Factors	29	0.56%
		0.00 //		1.30 %	Total	34	0.66%
Total Returned for Analysis	13		31				



Year	1	2	3	4	5	at 69 months		
Survival Probability	99.14%	98.73%	98.29%	97.68%	97.41%	96.69%		
± 1 standard error	0.13%	0.17%	0.22%	0.28%	0.33%	0.37%		
Sample Size	4,490	3,330	2,420	1,630	950	200		

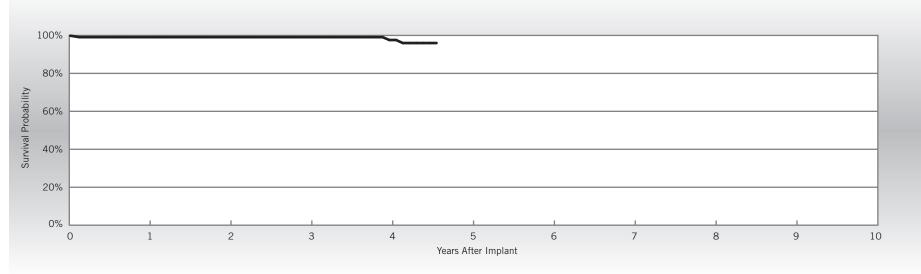


Durata[™] DF4 Models 7170Q & 7171Q

July 2009
114
63
5,066
Optim [™] *
Dual Coil, Passive
Bipolar
Yes

Qualifying Complications	Qty.	Rate
Abnormal Pacing Impedance	1	0.88%
Conductor Fracture	1	0.88%
Lead Dislodgement	1	0.88%

Malfunctions	Qty	Rate
Conductor Fracture	0	0.00%
Clavicular Crush	0	0.00%
In the Pocket	0	0.00%
Intravascular	0	0.00%
Insulation Breach	0	0.00%
Lead-to-Can Contact	0	0.00%
Lead-to-Lead Contact	0	0.00%
Clavicular Crush	0	0.00%
Externalized Conductors	0	0.00%
Other	0	0.00%
Crimps, Welds & Bonds	0	0.00%
Other	0	0.00%
Extrinsic Factors	2	1.75%
Total	2	1.75%



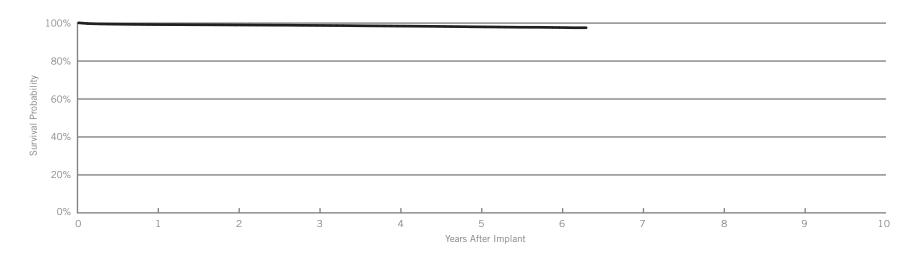
Year	1	2	3	4	at 55 months			
Survival Probability	99.09%	99.09%	99.09%	97.59%	95.99%			
± 1 standard error	0.90%	0.90%	0.90%	0.90%	2.33%			
Sample Size	110	100	80	70	50			



Durata[™] DF4 Models 7120Q & 7121Q

US Regulatory Approval	January 2009			
Registered US Implants	112,642			
Estimated Active US Implants	74,227			
Insulation	Optim [™] *			
Type and/or Fixation	Dual Coil, Active			
Polarity	Bipolar			
Steroid	Yes			
Number of US Advisories	None			

		bservations		complications	Malfunctions	Qty.	Rate
	Qty.	ant, ≤30 days) Rate	(>3 Qty.	0 days) Rate	Conductor Fracture	21	0.02%
Cardiac Perforation	70	0.06%	31	0.03%	Clavicular Crush	2	<0.01%
	1				In the Pocket	5	<0.01%
Conductor Fracture	1	<0.01%	65	0.06%	Intravascular	14	0.01%
Lead Dislodgement	195	0.17%	468	0.42%		97	
Failure to Capture	86	0.08%	364	0.32%	Insulation Breach		0.09%
Oversensing	39	0.03%	302	0.27%	Lead-to-Can Contact	45	0.04%
Failure to Sense	12	0.03%	50	0.04%	Lead-to-Lead Contact	9	<0.01%
					Clavicular Crush	16	0.01%
Insulation Breach	0	0.00%	16	0.01%	Externalized Conductors	0	0.00%
Abnormal Pacing Impedance	5	<0.01%	55	0.05%		-	
Abnormal Defibrillation Impedance	8	< 0.01%	156	0.14%	Other	27	0.02%
Extracardiac Stimulation	3	<0.01%	5	<0.01%	Crimps, Welds & Bonds	2	<0.01%
	-				Other	32	0.03%
Other	31	0.03%	46	0.04%	Extrinsic Factors	618	0.55%
Total	450	0.40%	1558	1.38%			
Total Returned for Analysis	227		692		Total	770	0.68%



Year	1	2	3	4	5	6	at 76 months		
Survival Probability	99.23%	99.01%	98.78%	98.43%	98.03%	97.65%	97.54%		
± 1 standard error	0.03%	0.03%	0.04%	0.05%	0.06%	0.09%	0.13%		
Sample Size	100,390	78,470	59,650	41,850	24,950	9,570	560		

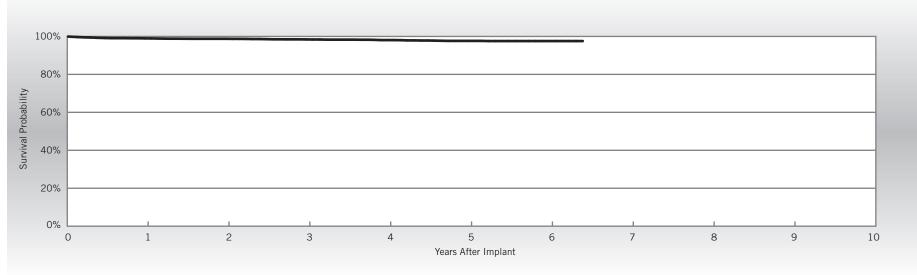


Durata[™] DF4 Models 7120Q & 7121Q

US Regulatory Approval	January 2009
Number of Devices Enrolled in Study	4,301
Active Devices Enrolled in Study	2,378
Cumulative Months of Follow-up	180,394
Insulation	Optim [™] *
Type and/or Fixation	Dual Coil, Active
Polarity	Bipolar
Steroid	Yes

Qualifying Complications	Qty.	Rate
Abnormal Defibrillation Impedance	4	0.09%
Abnormal Pacing Impedance	2	0.05%
Cardiac Perforation	1	0.02%
Conductor Fracture	10	0.23%
Failure to Capture	7	0.16%
Failure to Sense	4	0.09%
Inappropriate Shock	4	0.09%
Insulation Breach	1	0.02%
Lead Dislodgement	38	0.88%
Oversensing	5	0.12%

Malfunctions	Qty	Rate	
Conductor Fracture	5	0.12%	
Clavicular Crush	1	0.02%	
In the Pocket	2	0.05%	
Intravascular	2	0.05%	
Insulation Breach	4	0.09%	
Lead-to-Can Contact	2	0.05% 0.02%	
Lead-to-Lead Contact	1		
Clavicular Crush	0	0.00%	
Externalized Conductors	0		
Other	1	0.02%	
Crimps, Welds & Bonds	0	0.00%	
Other	1	0.02%	
Extrinsic Factors	42	0.98%	
Total	52	1.21%	



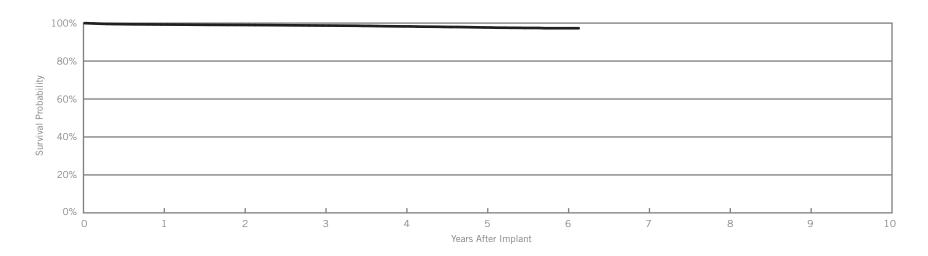
Year	1	2	3	4	5	6	at 77 months		
Survival Probability	98.97%	98.76%	98.42%	98.07%	97.65%	97.56%	97.56%		
± 1 standard error	0.15%	0.18%	0.20%	0.24%	0.28%	0.30%	0.30%		
Sample Size	4,020	3,500	2,930	2,310	1,590	790	80		



Durata[™] DF4

Model 7122Q

US Regulatory Approval	January 2009			bservations		Complications	Malfunctions	Qty.	Rate
Registered US Implants	59,643	_	Qty.	ant, ≤30 days) Rate	(>3 Qty.	0 days) Rate	Conductor Fracture	8	0.01%
Estimated Active US Implants	43,746	Cardiac Perforation	69	0.12%	30	0.05%	Clavicular Crush	0	0.00%
Insulation	Optim [™] *	- Conductor Fracture	03	<0.01%	23	0.04%	In the Pocket	6	0.01%
Type and/or Fixation	Single Coil, Active		111		23		Intravascular	2	<0.01%
Polarity	Bipolar	- Lead Dislodgement		0.19%	-	0.38%	Insulation Breach	38	0.06%
Steroid	Yes	- Failure to Capture	51	0.09%	134	0.22%	Lead-to-Can Contact	21	0.04%
Number of US Advisories	None	- Oversensing	18	0.03%	127	0.21%	Lead-to-Lead Contact	5	<0.01%
		Failure to Sense	7	0.01%	24	0.04%	Clavicular Crush	5	<0.01%
		Insulation Breach	0	0.00%	8	0.01%	Externalized Conductors	0	0.00%
		Abnormal Pacing Impedance	4	<0.01%	27	0.05%			
		Abnormal Defibrillation Impedance	5	< 0.01%	41	0.07%	Other	/	0.01%
		Extracardiac Stimulation	3	<0.01%	8	0.01%	Crimps, Welds & Bonds	0	0.00%
		Other	26	0.04%	22	0.04%	Other	11	0.02%
			-				Extrinsic Factors	302	0.51%
		Total	296	0.50%	669	1.12%	Total	359	0.60%
		Total Returned for Analysis	135		321				0.0070



Year	1	2	3	4	5	6	at 73 months		
Survival Probability	99.25%	99.02%	98.71%	98.27%	97.72%	97.27%	97.27%		
± 1 standard error	0.04%	0.05%	0.06%	0.09%	0.14%	0.24%	0.24%		
Sample Size	49,250	31,020	18,000	9,660	4,540	1,420	260		



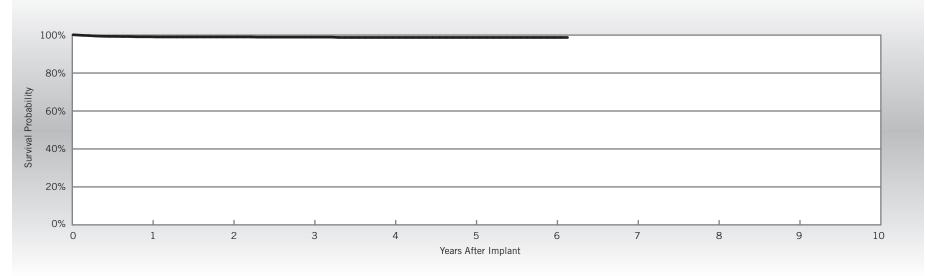
Durata[™] DF4

Model 7122Q

January 2009
1,515
953
54,545
Optim [™] *
Single Coil, Active
Bipolar
Yes

Qualifying Complications	Qty.	Rate
Abnormal Defibrillation Impedance	1	0.07%
Conductor Fracture	3	0.20%
Failure to Capture	3	0.20%
Lead Dislodgement	7	0.46%
Pericardial Effusion	2	0.13%

Malfunctions	Qty	Rate	
Conductor Fracture	2	0.13%	
Clavicular Crush	1	0.07%	
In the Pocket	1	0.07%	
Intravascular	0	0.00%	
Insulation Breach	4	0.26%	
Lead-to-Can Contact	3	0.20% 0.00%	
Lead-to-Lead Contact	0		
Clavicular Crush	0	0.00%	
Externalized Conductors	0		
Other	1	0.07%	
Crimps, Welds & Bonds	0	0.00%	
Other	0	0.00%	
Extrinsic Factors	14	0.92%	
Total	20	1.32%	

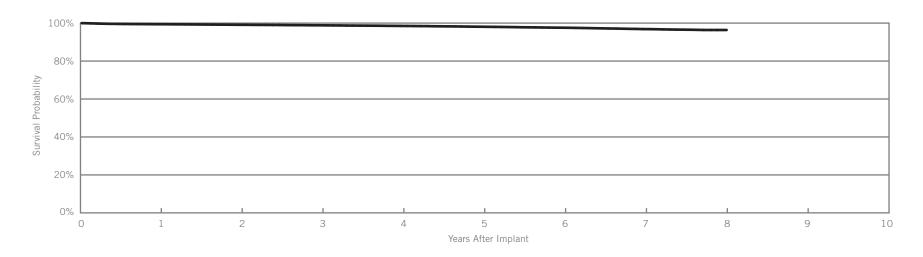


Year	1	2	3	4	5	6	at 74 months		
Survival Probability	99.10%	99.02%	98.92%	98.75%	98.75%	98.75%	98.75%		
± 1 standard error	0.25%	0.26%	0.28%	0.32%	0.32%	0.32%	0.32%		
Sample Size	1,420	1,230	900	570	360	160	70		



Durata[™] Models 7120 & 7121

US Regulatory Approval	September 2007			bservations		omplications	Malfunctions	Qty.	Rate
Registered US Implants	59,218		(Post Impla Qty.	ant, ≤30 days) Rate	(>3 Qty.	0 days) Rate	Conductor Fracture	30	0.05%
Estimated Active US Implants	30,907	Cardiac Perforation	39	0.07%	15	0.03%	Clavicular Crush	2	<0.01%
Insulation	Optim [™] *				-		In the Pocket	20	0.03%
Type and/or Fixation	Dual Coil, Active	Conductor Fracture	1	<0.01%	101	0.17%	Intravascular	8	0.01%
Polarity	Bipolar	 Lead Dislodgement 	69	0.12%	173	0.29%	Insulation Breach	96	0.16%
2		 Failure to Capture 	22	0.04%	218	0.37%	Lead-to-Can Contact	47	0.08%
Steroid	Yes	 Oversensing 	48	0.08%	398	0.67%			
Number of US Advisories	None	 Failure to Sense 	5	<0.01%	53	0.09%	Lead-to-Lead Contact	20	0.03%
		Insulation Breach	0	0.00%	39	0.07%	Clavicular Crush	12	0.02%
		Abnormal Pacing Impedance	1	<0.01%	124	0.21%	Externalized Conductors	0	0.00%
		Abnormal Defibrillation Impedance	19	0.03%	175	0.30%	Other	17	0.03%
					1/5		Crimps, Welds & Bonds	1	<0.01%
		Extracardiac Stimulation	0	0.00%	1	<0.01%	Other	9	0.02%
		Other	21	0.04%	32	0.05%	Extrinsic Factors	345	0.58%
		Total	225	0.38%	1329	2.24%	Total	481	0.81%
		Total Returned for Analysis	91		413		IULAI	401	0.81%



Year	1	2	3	4	5	6	7	8	
Survival Probability	99.42%	99.14%	98.87%	98.51%	98.06%	97.55%	96.81%	96.12%	
± 1 standard error	0.03%	0.04%	0.05%	0.06%	0.07%	0.08%	0.10%	0.23%	
Sample Size	54,800	47,290	41,520	36,320	30,590	23,890	14,220	220	

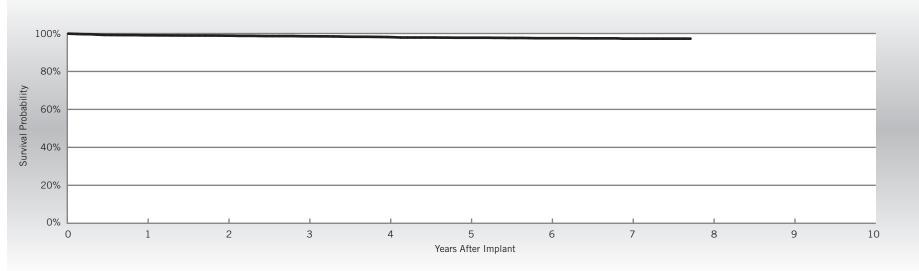


Durata[™] Models 7120 & 7121

US Regulatory Approval	September 2007
Number of Devices Enrolled in Study	3,571
Active Devices Enrolled in Study	1,499
Cumulative Months of Follow-up	188,193
Insulation	Optim [™] *
Type and/or Fixation	Dual Coil, Active
Polarity	Bipolar
Steroid	Yes

Qualifying Complications	Qty.	Rate
Abnormal Defibrillation Impedance	1	0.03%
Abnormal Pacing Impedance	8	0.22%
Conductor Fracture	11	0.31%
Failure to Capture	8	0.22%
Failure to Sense	2	0.06%
Inappropriate Shock	2	0.06%
Insulation Breach	9	0.25%
Lead Dislodgement	20	0.56%
Oversensing	8	0.22%

Malfunctions	Qty	Rate
Conductor Fracture	1	0.03%
Clavicular Crush	0	0.00%
In the Pocket	1	0.03%
Intravascular	0	0.00%
Insulation Breach	10	0.28%
Lead-to-Can Contact	5	0.14%
Lead-to-Lead Contact	4	0.11%
Clavicular Crush	0	0.00%
Externalized Conductors	0	0.00%
Other	1	0.03%
Crimps, Welds & Bonds	0	0.00%
Other	1	0.03%
Extrinsic Factors	25	0.70%
Total	37	1.04%



Year	1	2	3	4	5	6	7	at 93 months	
Survival Probability	99.04%	98.87%	98.53%	98.13%	97.77%	97.52%	97.29%	97.29%	
± 1 standard error	0.16%	0.18%	0.21%	0.25%	0.28%	0.31%	0.35%	0.35%	
Sample Size	3,380	2,980	2,590	2,230	1,870	1,570	990	60	

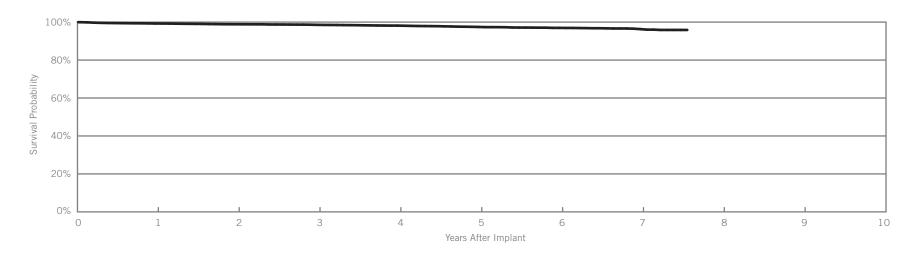


Durata™

Model 7122

US Regulatory Approval	September 2007	
Registered US Implants	13,785	
Estimated Active US Implants	8,077	Cardiac Perforat
Insulation	Optim [™] *	- Conductor Fract
Type and/or Fixation	Single Coil, Active	- Lead Dislodgem
Polarity	Bipolar	- Failure to Captu
Steroid	Yes	- Oversensing
Number of US Advisories	None	Failure to Sense

		bservations		ic Complications Malfunctions		Qty.	Rate
	(Post Impl Qty.	ant, ≤30 days) Rate	(>3 Qty.	0 days) Rate	Conductor Fracture	15	0.11%
Cardiac Perforation	10	0.07%	2	0.01%	Clavicular Crush	0	0.00%
	10				In the Pocket	12	0.09%
Conductor Fracture	1	<0.01%	21	0.15%	Intravascular	3	0.02%
Lead Dislodgement	18	0.13%	49	0.36%	Insulation Breach	40	0.29%
Failure to Capture	15	0.11%	49	0.36%			
Oversensing	10	0.07%	76	0.55%	Lead-to-Can Contact	23	0.17%
	0	0.00%	8	0.06%	Lead-to-Lead Contact	11	0.08%
Failure to Sense	0		-		Clavicular Crush	0	0.00%
Insulation Breach	0	0.00%	19	0.14%	Externalized Conductors	1	<0.01%
Abnormal Pacing Impedance	2	0.01%	28	0.20%		1	
Abnormal Defibrillation Impedance	1	<0.01%	20	0.15%	Other	5	0.04%
Extracardiac Stimulation	1	<0.01%	2	0.01%	Crimps, Welds & Bonds	0	0.00%
	1				Other	4	0.03%
Other	4	0.03%	6	0.04%	Extrinsic Factors	107	0.78%
Total	62	0.45%	280	2.03%			
Total Returned for Analysis	30		141		Total	166	1.20%



Year	1	2	3	4	5	6	7	at 90 months	
Survival Probability	99.24%	98.85%	98.51%	98.06%	97.28%	96.81%	96.14%	95.68%	
± 1 standard error	0.07%	0.10%	0.11%	0.14%	0.18%	0.22%	0.28%	0.42%	
Sample Size	12,430	10,040	8,130	6,570	4,970	3,240	1,590	290	

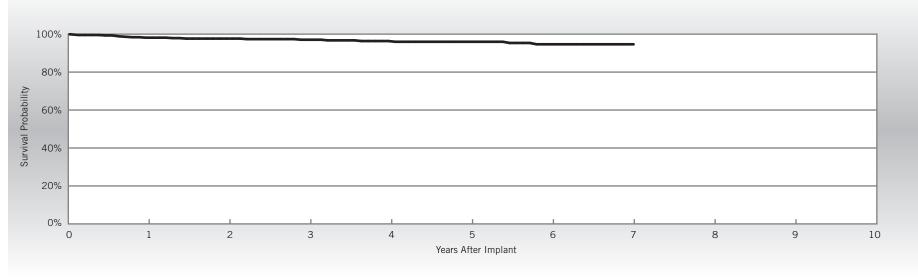


Durata[™] Model 7122

US Regulatory Approval	September 2007
Number of Devices Enrolled in Study	447
Active Devices Enrolled in Study	245
Cumulative Months of Follow-up	22,530
Insulation	Optim [™] *
Type and/or Fixation	Single Coil, Active
Polarity	Bipolar
Steroid	Yes

Qualifying Complications	Qty.	Rate
Abnormal Pacing Impedance	2	0.45%
Conductor Fracture	5	1.12%
Failure to Capture	2	0.45%
Failure to Sense	1	0.22%
Lead Dislodgement	4	0.89%
Oversensing	3	0.67%

Malfunctions	Qty	Rate
Conductor Fracture	2	0.45%
Clavicular Crush	0	0.00%
In the Pocket	1	0.22%
Intravascular	1	0.22%
Insulation Breach	0	0.00%
Lead-to-Can Contact	0	0.00%
Lead-to-Lead Contact	0	0.00%
Clavicular Crush	0	0.00%
Externalized Conductors	0	0.00%
Other	0	0.00%
Crimps, Welds & Bonds	0	0.00%
Other	0	0.00%
Extrinsic Factors	5	1.12%
Total	7	1.57%



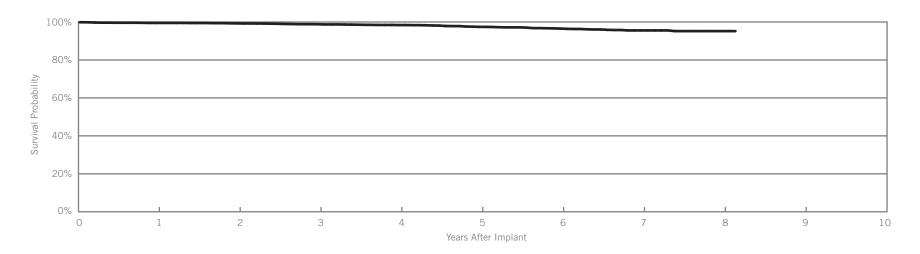
Year	1	2	3	4	5	6	7		
Survival Probability	98.14%	97.65%	97.06%	96.36%	95.98%	94.65%	94.65%		
± 1 standard error	0.61%	0.74%	0.84%	0.97%	1.04%	1.39%	1.39%		
Sample Size	430	390	330	280	220	150	50		



Riata[™] ST Optim[™] Models 7070 & 7071

US Regulatory Approval	July 2006
Registered US Implants	3,311
Estimated Active US Implants	1,570
Insulation	Optim*
Type and/or Fixation	Dual Coil, Passive
Polarity	Bipolar
Steroid	Yes
Number of US Advisories	None

		bservations		Complications	Malfunctions	Qty.	
	(Post Impl Qty.	ant, ≤30 days) Rate	Qty.	0 days) Rate	Conductor Fracture	1	0.03%
Cardiac Perforation	3	0.09%	2	0.06%	Clavicular Crush	0	0.00%
			1		In the Pocket	0	0.00%
Conductor Fracture	1	0.03%	15	0.45%	Intravascular	1	0.03%
Lead Dislodgement	3	0.09%	12	0.36%			
Failure to Capture	5	0.15%	23	0.69%	Insulation Breach	8	0.24%
Oversensing	4	0.12%	37	1.12%	Lead-to-Can Contact	3	0.09%
	· ·				Lead-to-Lead Contact	2	0.06%
Failure to Sense	3	0.09%	2	0.06%	Clavicular Crush	1	0.03%
Insulation Breach	0	0.00%	4	0.12%		1	
Abnormal Pacing Impedance	0	0.00%	10	0.30%	Externalized Conductors	1	0.03%
Abnormal Defibrillation Impedance	0	0.00%	10	0.30%	Other	1	0.03%
	0		10		Crimps, Welds & Bonds	0	0.00%
Extracardiac Stimulation	0	0.00%	1	0.03%	Other	0	0.00%
Other	0	0.00%	2	0.06%		0	
Total	19	0.57%	118	3.56%	Extrinsic Factors	19	0.57%
Total Returned for Analysis	6		26		Total	28	0.85%



Year	1	2	3	4	5	6	7	8	at 98 months	
Survival Probability	99.44%	99.21%	98.78%	98.35%	97.23%	96.42%	95.45%	95.10%	95.10%	
± 1 standard error	0.14%	0.16%	0.21%	0.25%	0.34%	0.42%	0.51%	0.56%	0.56%	
Sample Size	3,040	2,620	2,340	2,080	1,760	1,440	1,010	490	210	

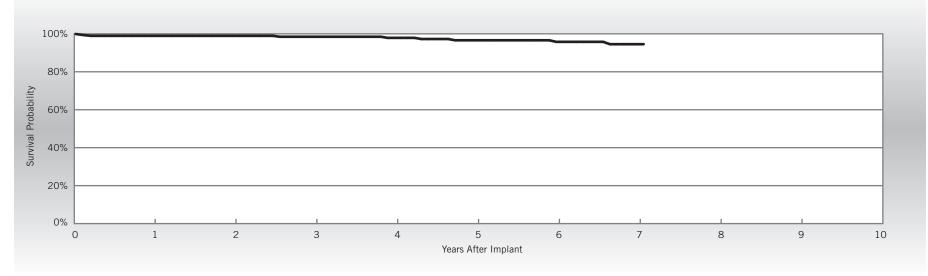


Riata[™] ST Optim[™] Models 7070 & 7071

US Regulatory Approval	July 2006
Number of Devices Enrolled in Study	288
Active Devices Enrolled in Study	109
Cumulative Months of Follow-up	15,216
Insulation	Optim*
Type and/or Fixation	Dual Coil, Passive
Polarity	Bipolar
Steroid	Yes

Qualifying Complications	Qty.	Rate
Abnormal Defibrillation Impedance	1	0.35%
Abnormal Pacing Impedance	2	0.69%
Cardiac Perforation	1	0.35%
Conductor Fracture	2	0.69%
Failure to Capture	1	0.35%
Lead Dislodgement	1	0.35%
Oversensing	1	0.35%

Malfunctions	Qty	Rate
Conductor Fracture	0	0.00%
Clavicular Crush	0	0.00%
In the Pocket	0	0.00%
Intravascular	0	0.00%
Insulation Breach	0	0.00%
Lead-to-Can Contact	0	0.00%
Lead-to-Lead Contact	0	0.00%
Clavicular Crush	0	0.00%
Externalized Conductors	0	0.00%
Other	0	0.00%
Crimps, Welds & Bonds	0	0.00%
Other	0	0.00%
Extrinsic Factors	1	0.35%
Total	1	0.35%



Year	1	2	3	4	5	6	7	at 85 months	
Survival Probability	98.94%	98.94%	98.46%	97.88%	96.60%	95.78%	94.53%	94.53%	
± 1 standard error	0.61%	0.61%	0.77%	0.96%	1.31%	1.31%	1.96%	1.96%	
Sample Size	270	240	210	180	150	130	80	50	

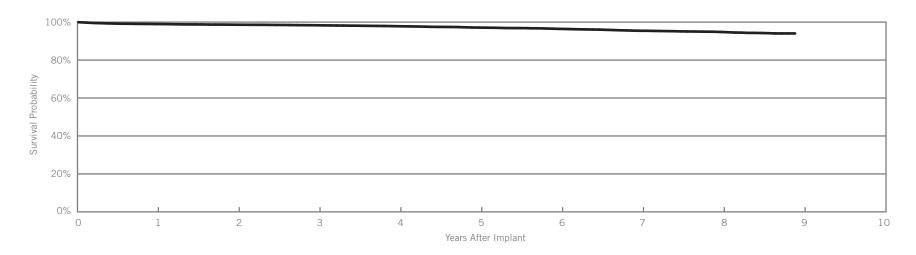


Riata[™] ST Optim[™]

Models 7020 & 7021

US Regulatory Approval	July 2006
Registered US Implants	14,236
Estimated Active US Implants	6,042
Insulation	Optim*
Type and/or Fixation	Dual Coil, Active
Polarity	Bipolar
Steroid	Yes
Number of US Advisories	None

		Acute Observations		Complications	Malfunctions	Qty.	Rate
	Qty.	ant, ≤30 days) Rate	(>30 days) Qty. Rate		Conductor Fracture	8	0.06%
Cardiac Perforation	33	0.23%	16	0.11%	Clavicular Crush	1	<0.01%
					In the Pocket	2	0.01%
Conductor Fracture	0	0.00%	48	0.34%	Intravascular	5	0.04%
Lead Dislodgement	27	0.19%	63	0.44%		-	
Failure to Capture	17	0.12%	122	0.86%	Insulation Breach	32	0.22%
Oversensing	19	0.13%	179	1.26%	Lead-to-Can Contact	12	0.08%
					Lead-to-Lead Contact	4	0.03%
Failure to Sense	8	0.06%	16	0.11%	Clavicular Crush	4	0.03%
Insulation Breach	0	0.00%	22	0.15%			
Abnormal Pacing Impedance	1	< 0.01%	31	0.22%	Externalized Conductors	0	0.00%
Abnormal Defibrillation Impedance	4	0.03%	66	0.46%	Other	12	0.08%
					Crimps, Welds & Bonds	0	0.00%
Extracardiac Stimulation	3	0.02%	2	0.01%	Other	0	0.00%
Other	0	0.00%	26	0.18%		-	
Total	112	0.79%	591	4.15%	Extrinsic Factors	158	1.11%
Total Returned for Analysis	53		174		Total	198	1.39%



Year	1	2	3	4	5	6	7	8	at 107 months	
Survival Probability	98.99%	98.65%	98.37%	97.91%	97.19%	96.51%	95.56%	94.86%	94.01%	
± 1 standard error	0.09%	0.10%	0.11%	0.13%	0.16%	0.18%	0.22%	0.24%	0.34%	
Sample Size	13,120	11,310	10,060	9,000	8,130	7,320	6,370	4,600	230	

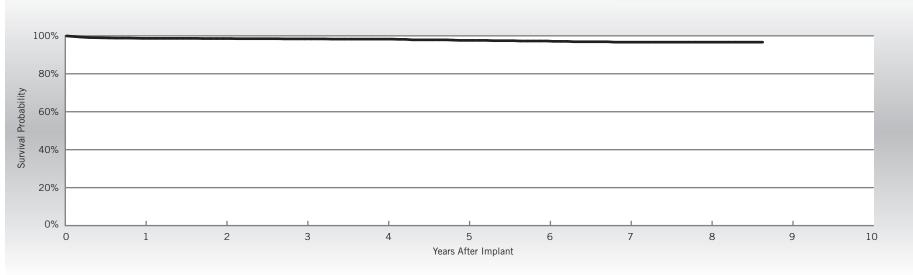


Riata[™] ST Optim[™] Models 7020 & 7021

US Regulatory Approval July 2006 Number of Devices Enrolled in Study 1,472 Active Devices Enrolled in Study 413 Cumulative Months of Follow-up 79,563 Insulation Optim* Type and/or Fixation Dual Coil, Active Polarity Bipolar Steroid Yes

Qualifying Complications	Qty	Rate
Abnormal Pacing Impedance	5	0.34%
Conductor Fracture	5	0.34%
Failure to Capture	6	0.41%
Failure to Sense	1	0.07%
Insulation Breach	2	0.14%
Lead Dislodgement	9	0.61%
Oversensing	4	0.27%
Skin Erosion	1	0.07%

Malfunctions	Qty	Rate
Conductor Fracture	3	0.20%
Clavicular Crush	0	0.00%
In the Pocket	3	0.20%
Intravascular	0	0.00%
Insulation Breach	3	0.20%
Lead-to-Can Contact	1	0.07%
Lead-to-Lead Contact	0	0.00%
Clavicular Crush	2	0.14%
Externalized Conductors	0	0.00%
Other	0	0.00%
Crimps, Welds & Bonds	0	0.00%
Other	0	0.00%
Extrinsic Factors	14	0.95%
Total	20	1.36%



Year	1	2	3	4	5	6	7	8	at 104 months	
Survival Probability	98.66%	98.57%	98.38%	98.27%	97.60%	97.27%	96.66%	96.66%	96.66%	
± 1 standard error	0.30%	0.32%	0.34%	0.36%	0.47%	0.52%	0.62%	0.62%	0.62%	
Sample Size	1,380	1,200	1,020	870	720	590	470	320	70	

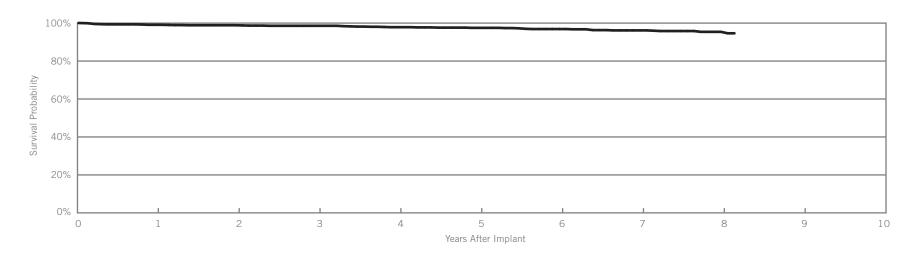


Riata[™] ST Optim[™]

Model 7022

US Regulatory Approval	July 2006		
Registered US Implants	1,468	_	
Estimated Active US Implants	664	Cardiac Perforation	
Insulation	Optim*	- Conductor Fracture	
Type and/or Fixation	Single Coil, Active	Lead Dislodgement	
Polarity	Bipolar	- Failure to Capture	
Steroid	Yes	- Oversensing	
Number of US Advisories	None	- Failure to Sense	
		Insulation Breach	

		bservations	Chronic Complications (>30 days) Qty. Rate		Malfunctions	Qty.	Rate
	Qty.	ant, ≤30 days) Rate			Conductor Fracture	3	0.20%
Cardiac Perforation	5	0.34%	2	0.14%	Clavicular Crush	0	0.00%
			2		In the Pocket	2	0.14%
Conductor Fracture	0	0.00%	7	0.48%	Intravascular	1	0.07%
Lead Dislodgement	3	0.20%	10	0.68%			
Failure to Capture	1	0.07%	8	0.54%	Insulation Breach	5	0.34%
Oversensing	0	0.00%	15	1.02%	Lead-to-Can Contact	4	0.27%
			15		Lead-to-Lead Contact	0	0.00%
Failure to Sense	0	0.00%	1	0.07%	Clavicular Crush	0	0.00%
Insulation Breach	0	0.00%	5	0.34%		0	
Abnormal Pacing Impedance	1	0.07%	2	0.14%	Externalized Conductors	0	0.00%
Abnormal Defibrillation Impedance	0	0.00%	2	0.14%	Other	1	0.07%
			1		Crimps, Welds & Bonds	0	0.00%
Extracardiac Stimulation	0	0.00%	1	0.07%	Other	0	0.00%
Other	0	0.00%	1	0.07%		10	
Total	10	0.68%	54	3.68%	Extrinsic Factors	16	1.09%
Total Returned for Analysis	3		18		Total	24	1.63%

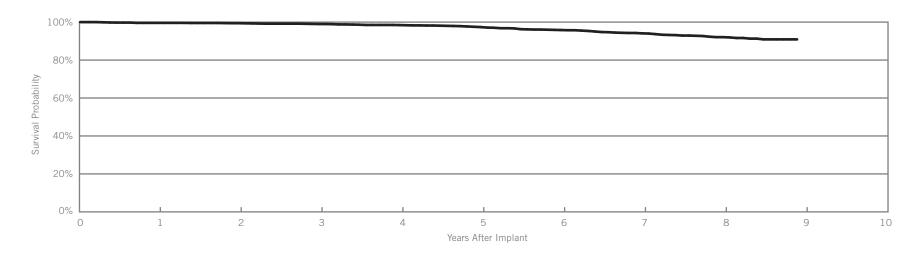


Year	1	2	3	4	5	6	7	8	at 98 months	
Survival Probability	99.04%	98.87%	98.60%	97.88%	97.32%	96.71%	95.88%	95.13%	94.38%	
± 1 standard error	0.27%	0.29%	0.33%	0.43%	0.49%	0.56%	0.65%	0.75%	0.91%	
Sample Size	1,360	1,190	1,060	950	860	790	680	450	230	



Riata[™] ST Models 7010 & 7011

US Regulatory Approval	March 2006			Observations		Complications	Malfunctions	Qty.	Rate
Registered US Implants	2,199		(Post Imp Qty.	lant, ≤30 days) Rate	(>3 Qty.	0 days) Rate	Conductor Fracture	2	0.09%
Estimated Active US Implants	868	Cardiac Perforation	3	0.14%	3	0.14%	Clavicular Crush	0	0.00%
Insulation	Silicone		3				In the Pocket	2	0.09%
Type and/or Fixation	Dual Coil, Active	Conductor Fracture	0	0.00%	4	0.18%	Intravascular	0	0.00%
Polarity	Integrated Bipolar	 Lead Dislodgement 	1	0.05%	8	0.36%	Insulation Breach	32	1.46%
		 Failure to Capture 	2	0.09%	6	0.27%	Lead-to-Can Contact	9	0.41%
Steroid	Yes	- Oversensing	2	0.09%	34	1.55%			
Number of US Advisories	One	Failure to Sense	1	0.05%	3	0.14%	Lead-to-Lead Contact	16	0.73%
(see pgs. 302-304)		 Insulation Breach 	0	0.00%	38	1.73%	Clavicular Crush	1	0.05%
		Abnormal Pacing Impedance	1	0.05%	18	0.82%	Externalized Conductors	2	0.09%
			1				Other	4	0.18%
		Abnormal Defibrillation Impedance	0	0.00%	14	0.64%	Crimps, Welds & Bonds	0	0.00%
		Extracardiac Stimulation	0	0.00%	0	0.00%	Other	0	0.00%
		Other	1	0.05%	2	0.09%	Extrinsic Factors	9	0.41%
		Total	11	0.50%	130	5.91%		5	
		Total Returned for Analysis	4		30		Total	43	1.96%



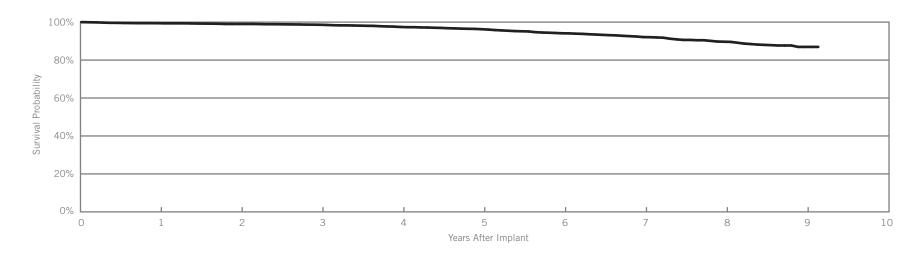
Year	1	2	3	4	5	6	7	8	at 107 months	
Survival Probability	99.60%	99.43%	99.05%	98.77%	97.56%	96.00%	94.18%	91.95%	90.56%	
± 1 standard error	0.14%	0.17%	0.22%	0.26%	0.39%	0.54%	0.66%	0.82%	0.95%	
Sample Size	2,040	1,780	1,590	1,410	1,240	1,110	990	810	240	



Riata[™] ST Models 7040 & 7041

US Regulatory Approval	March 2006	
Registered US Implants	4,054	
Estimated Active US Implants	1,595	Car
Insulation	Silicone	- <u>Con</u>
Type and/or Fixation	Dual Coil, Passive	
Polarity	Bipolar	- Eea
Steroid	Yes	
Number of US Advisories	One	 Fail
(see pgs. 302-304)		
		- Insi

		bservations		complications	Malfunctions	Qty.	Rate
	Qty.	ant, ≤30 days) Rate	(>3 Qty.	0 days) Rate	Conductor Fracture	4	0.10%
Cardiac Perforation	4	0.10%	3	0.07%	Clavicular Crush	0	0.00%
	4	0.00%	29	0.72%	In the Pocket	1	0.02%
Conductor Fracture					Intravascular	3	0.07%
Lead Dislodgement	5	0.12%	6	0.15%	Insulation Breach	44	1.09%
Failure to Capture	0	0.00%	42	1.04%	Lead-to-Can Contact	20	0.49%
Oversensing	3	0.07%	82	2.02%	Lead-to-Lead Contact	13	0.32%
Failure to Sense	0	0.00%	14	0.35%		15	
Insulation Breach	0	0.00%	50	1.23%	Clavicular Crush	0	0.00%
Abnormal Pacing Impedance	2	0.05%	14	0.35%	Externalized Conductors	2	0.05%
Abnormal Defibrillation Impedance	0	0.00%	19	0.47%	Other	9	0.22%
Extracardiac Stimulation	0	0.00%	0	0.00%	Crimps, Welds & Bonds	0	0.00%
Other	1	0.02%	6	0.15%	Other	0	0.00%
	1		_		Extrinsic Factors	26	0.64%
Total	15	0.37%	265	6.54%	Total	74	1.83%
Total Returned for Analysis	3		57				2.5070



Year	1	2	3	4	5	6	7	8	9	at 110 months
Survival Probability	99.41%	99.11%	98.66%	97.46%	96.29%	94.21%	92.15%	89.62%	86.86%	86.86%
± 1 standard error	0.12%	0.16%	0.20%	0.28%	0.35%	0.46%	0.55%	0.69%	0.95%	0.95%
Sample Size	3,760	3,280	2,930	2,610	2,340	2,050	1,690	1,200	590	210



Defibrillation Leads

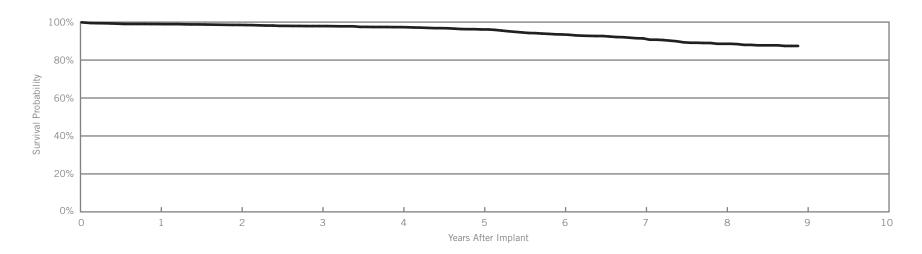
Customer Reported Performance Data

Riata[™] ST

Model 7002

US Regulatory Approval	June 2005
Registered US Implants	2,405
Estimated Active US Implants	911
Insulation	Silicone
Type and/or Fixation	Single Coil, Active
Polarity	Bipolar
Steroid	Yes
Number of US Advisories	One
(see pgs. 302-304)	

		bservations		Complications	Malfunctions	Qty.	Rate
	Qty.	ant, ≤30 days) Rate	Qty.	0 days) Rate	Conductor Fracture	5	0.21%
Cardiac Perforation	6	0.25%	5	0.21%	Clavicular Crush	0	0.00%
	-				In the Pocket	2	0.08%
Conductor Fracture	0	0.00%	9	0.37%	Intravascular	3	0.12%
Lead Dislodgement	2	0.08%	9	0.37%			
Failure to Capture	4	0.17%	17	0.71%	Insulation Breach	57	2.37%
	· · ·		17		Lead-to-Can Contact	29	1.21%
Oversensing	4	0.17%	54	2.25%	l ead-to-l ead Contact	13	0.54%
Failure to Sense	0	0.00%	2	0.08%	Clavicular Crush	0	0.00%
Insulation Breach	0	0.00%	60	2.49%		0	
Abnormal Pacing Impedance	2	0.08%	3	0.12%	Externalized Conductors	5	0.21%
	-				Other	10	0.42%
Abnormal Defibrillation Impedance	1	0.04%	6	0.25%	Crimps, Welds & Bonds	0	0.00%
Extracardiac Stimulation	0	0.00%	0	0.00%		0	
Other	1	0.04%	6	0.25%	Other	0	0.00%
Total	20	0.83%	171	7.11%	Extrinsic Factors	22	0.91%
		0.63%		7.11%	Total	84	3.49%
Total Returned for Analysis	11		63			34	0



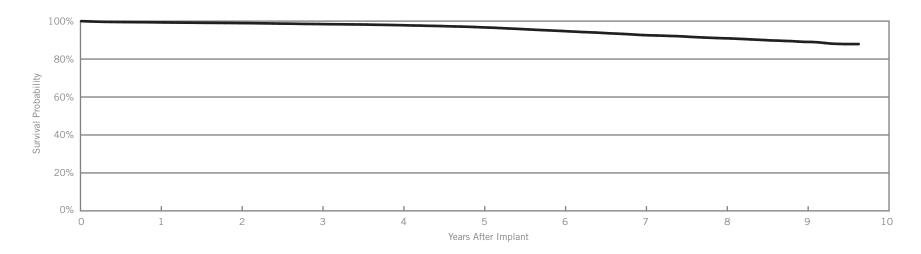
Year	1	2	3	4	5	6	7	8	at 107 months	
Survival Probability	99.02%	98.51%	97.96%	97.28%	95.95%	93.28%	91.25%	88.21%	87.04%	
± 1 standard error	0.21%	0.26%	0.31%	0.37%	0.46%	0.64%	0.75%	0.93%	1.07%	
Sample Size	2,220	1,950	1,750	1,560	1,390	1,230	1,050	740	210	



Riata[™] ST Models 7000 & 7001

US Regulatory Approval	June 2005
Registered US Implants	34,864
Estimated Active US Implants	12,963
Insulation	Silicone
Type and/or Fixation	Dual Coil, Active
Polarity	Bipolar
Steroid	Yes
Number of US Advisories	One
(see pgs. 302-304)	

		bservations		omplications	Malfunctions	Qty.	Rate
	(Post Impla Qty.	ant, ≤30 days) Rate	(>3 Qty.	0 days) Rate	Conductor Fracture	23	0.07%
Cardiac Perforation	42	0.12%	29	0.08%	Clavicular Crush	4	0.01%
			-		In the Pocket	7	0.02%
Conductor Fracture	0	0.00%	126	0.36%	Intravascular	12	0.03%
Lead Dislodgement	38	0.11%	57	0.16%	Insulation Breach	499	1.43%
Failure to Capture	42	0.12%	271	0.78%	Lead-to-Can Contact	264	0.76%
Oversensing	40	0.11%	708	2.03%			
Failure to Sense	7	0.02%	61	0.17%	Lead-to-Lead Contact	132	0.38%
Insulation Breach	1	<0.01%	632	1.81%	Clavicular Crush	10	0.03%
Abnormal Pacing Impedance	8	0.02%	97	0.28%	Externalized Conductors	30	0.09%
		0.02%			Other	63	0.18%
Abnormal Defibrillation Impedance	4		156	0.45%	Crimps, Welds & Bonds	1	<0.01%
Extracardiac Stimulation	3	<0.01%	4	0.01%	Other	1	<0.01%
Other	11	0.03%	86	0.25%	Extrinsic Factors	271	0.78%
Total	196	0.56%	2227	6.39%			
Total Returned for Analysis	96		617		Total	795	2.28%



Year	1	2	3	4	5	6	7	8	9	at 116 months
Survival Probability	99.34%	98.99%	98.49%	97.89%	96.81%	94.88%	92.70%	91.00%	89.13%	88.01%
± 1 standard error	0.04%	0.06%	0.07%	0.09%	0.11%	0.15%	0.18%	0.21%	0.25%	0.33%
Sample Size	32,500	28,530	25,450	22,670	20,190	17,910	15,580	12,520	7,400	420

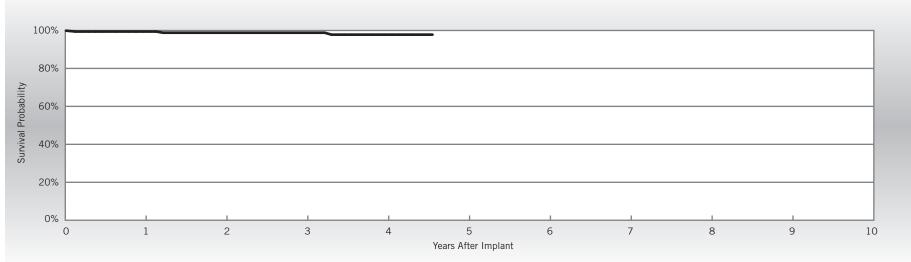


Riata[™] ST Models 7000 & 7001

US Regulatory Approval	June 2005
Number of Devices Enrolled in Study	180
Active Devices Enrolled in Study	44
Cumulative Months of Follow-up	7,398
Insulation	Silicone
Type and/or Fixation	Dual Coil, Active
Polarity	Bipolar
Steroid	Yes

Qualifying Complications	Qty	Rate
Failure to Capture	1	0.56%
Insulation Breach	1	0.56%
Lead Dislodgement	1	0.56%

Malfunctions	Qty	Rate
Conductor Fracture	0	0.00%
Clavicular Crush	0	0.00%
In the Pocket	0	0.00%
Intravascular	0	0.00%
Insulation Breach	3	1.67%
Lead-to-Can Contact	2	1.11%
Lead-to-Lead Contact	1	0.56%
Clavicular Crush	0	0.00%
Externalized Conductors	0	0.00%
Other	0	0.00%
Crimps, Welds & Bonds	1	0.56%
Other	0	0.00%
Extrinsic Factors	0	0.00%
Total	4	2.22%



Year	1	2	3	4	at 55 months			
Survival Probability	99.43%	98.81%	98.81%	97.80%	97.80%			
± 1 standard error	0.56%	0.84%	0.84%	1.30%	1.30%			
Sample Size	170	150	120	90	50			



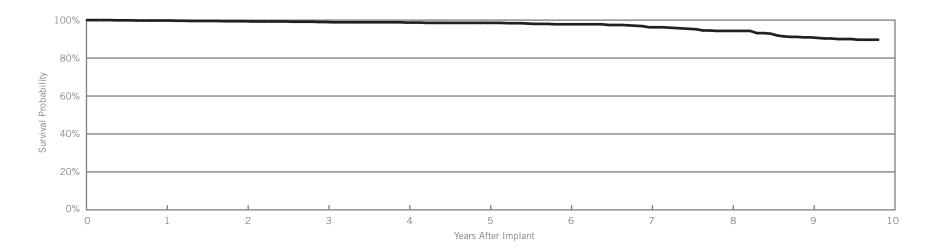
Defibrillation Leads

Customer Reported Performance Data

Riata[™] *i* Models 1560 & 1561

US Regulatory Approval	April 2004
Registered US Implants	981
Estimated Active US Implants	352
nsulation	Silicone
ype and/or Fixation	Dual Coil, Passive
Polarity	Integrated Bipolar
Steroid	Yes
Number of US Advisories	One
(see pgs. 302-304)	

Malfunctions	Qty.	Rate
Conductor Fracture	0	0.00%
Clavicular Crush	0	0.00%
 In the Pocket	0	0.00%
Intravascular	0	0.00%
Insulation Breach	18	1.83%
Lead-to-Can Contact	8	0.82%
Lead-to-Lead Contact	6	0.61%
Clavicular Crush	1	0.10%
Externalized Conductors	2	0.20%
Other	1	0.10%
Crimps, Welds & Bonds	0	0.00%
Other	0	0.00%
Extrinsic Factors	2	0.20%
Total	20	2.04%



Year	1	2	3	4	5	6	7	8	9	at 118 months
Survival Probability	99.78%	99.41%	99.00%	98.71%	98.21%	97.48%	95.88%	93.73%	90.30%	89.07%
± 1 standard error	0.16%	0.26%	0.35%	0.38%	0.50%	0.61%	0.75%	1.05%	1.35%	1.47%
Sample Size	920	810	730	660	590	530	490	440	370	200



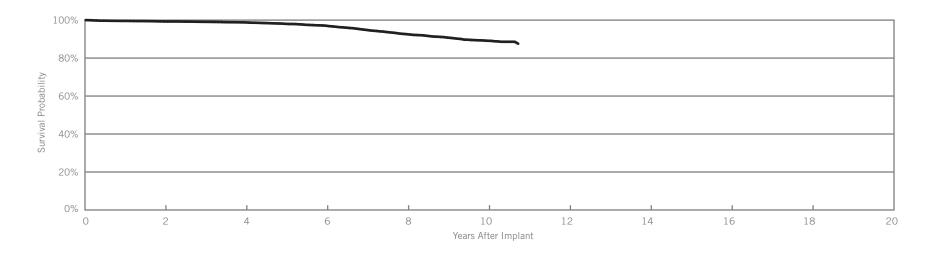
Defibrillation Leads

Customer Reported Performance Data

Riata[™] *i* Models 1590 & 1591

US Regulatory Approval	April 2004	
Registered US Implants	9,697	-
Estimated Active US Implants	3,181	-
Insulation	Silicone	-
Type and/or Fixation	Dual Coil, Active	-
Polarity	Integrated Bipolar	-
Steroid	Yes	
Number of US Advisories (see pgs. 302-304)	One	-

	Malfunctions	Qty.	Rate
	Conductor Fracture	7	0.07%
	Clavicular Crush	1	0.01%
	In the Pocket	1	0.01%
е	Intravascular	5	0.05%
lar	Insulation Breach	147	1.52%
	Lead-to-Can Contact	55	0.57%
	Lead-to-Lead Contact	45	0.46%
	Clavicular Crush	2	0.02%
	Externalized Conductors	17	0.18%
	Other	28	0.29%
	Crimps, Welds & Bonds	0	0.00%
	Other	1	0.01%
	Extrinsic Factors	49	0.51%
	Total	204	2.10%



Year	2	4	6	8	10	at 129 months		
Survival Probability	99.31%	98.79%	97.00%	92.54%	89.25%	87.69%		
± 1 standard error	0.09%	0.12%	0.21%	0.37%	0.48%	0.51%		
Sample Size	8,100	6,480	5,070	3,920	2,270	310		

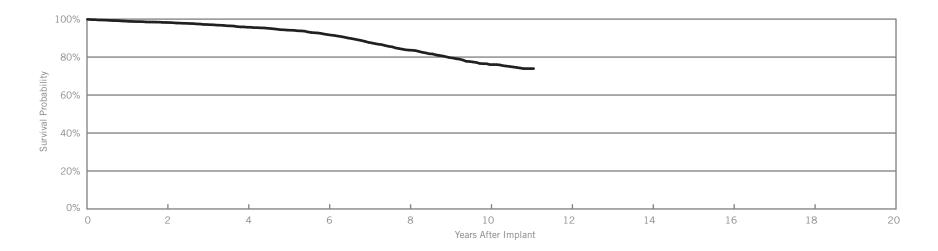


Riata™

Model 1582

US Regulatory Approval	March 2003
Registered US Implants	3,129
Estimated Active US Implants	851
Insulation	Silicone
Type and/or Fixation	Single Coil, Active
Polarity	Bipolar
Steroid	Yes
Number of US Advisories (see pgs. 302-304)	One

Malfunctions	Qty.	Rate
Conductor Fracture	3	0.10%
Clavicular Crush	0	0.00%
In the Pocket	0	0.00%
Intravascular	3	0.10%
Insulation Breach	150	4.79%
Lead-to-Can Contact	47	1.50%
Lead-to-Lead Contact	27	0.86%
Clavicular Crush	2	0.06%
Externalized Conductors	45	1.44%
Other	29	0.93%
Crimps, Welds & Bonds	0	0.00%
Other	0	0.00%
Extrinsic Factors	34	1.09%
Total	187	5.98%
	Conductor Fracture Clavicular Crush In the Pocket Intravascular Insulation Breach Lead-to-Can Contact Lead-to-Lead Contact Clavicular Crush Externalized Conductors Other Crimps, Welds & Bonds Other Extrinsic Factors	Conductor Fracture3Clavicular Crush0In the Pocket0Intravascular3Insulation Breach150Lead-to-Can Contact47Lead-to-Lead Contact27Clavicular Crush2Externalized Conductors45Other29Crimps, Welds & Bonds0Other0Extrinsic Factors34



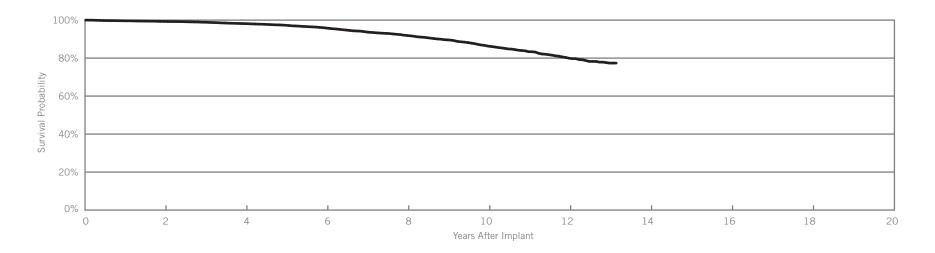
Year	2	4	6	8	10	at 133 months	
Survival Probability	98.26%	95.73%	91.81%	83.72%	76.12%	74.04%	
± 1 standard error	0.25%	0.41%	0.60%	0.92%	1.19%	1.36%	
Sample Size	2,560	2,040	1,560	1,080	620	210	



Riata[™] Models 1570 & 1571

US Regulatory Approval	March 2002	Malfunctions
Registered US Implants	10,278	Conductor Fra
Estimated Active US Implants	2,966	Clavicular
Insulation	Silicone	In the Poo
Type and/or Fixation	Dual Coil, Passive	Intravascu
Polarity	Bipolar	Insulation Bre
Steroid	Yes	Lead-to-C
Number of US Advisories	One	Lead-to-Le
(see pgs. 302-304)		Clavicular
		Externalize

	Malfunctions	Qty.	Rate
	Conductor Fracture	5	0.05%
	Clavicular Crush	2	0.02%
	In the Pocket	3	0.03%
sive	Intravascular	0	0.00%
	Insulation Breach	191	1.86%
	Lead-to-Can Contact	94	0.91%
	Lead-to-Lead Contact	33	0.32%
	Clavicular Crush	1	<0.01%
	Externalized Conductors	36	0.35%
	Other	27	0.26%
	Crimps, Welds & Bonds	0	0.00%
	Other	0	0.00%
	Extrinsic Factors	52	0.51%
	Total	248	2.41%



Year	2	4	6	8	10	12	at 158 months		
Survival Probability	99.34%	98.26%	95.88%	92.00%	86.39%	79.97%	77.40%		
± 1 standard error	0.08%	0.15%	0.24%	0.37%	0.53%	0.79%	1.02%		
Sample Size	8,650	7,030	5,460	3,900	2,520	1,040	230		

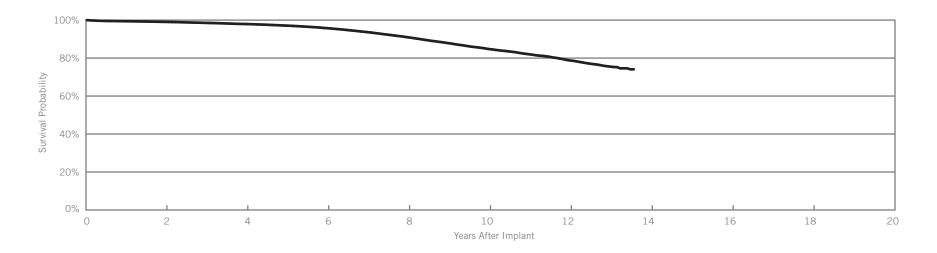


Riata™

Models 1580 & 1581

US Regulatory Approval	March 2002	Malfun
Registered US Implants	68,383	Conduc
Estimated Active US Implants	18,612	Cla
Insulation	Silicone	In t
Type and/or Fixation	Dual Coil, Active	Intr
Polarity	Bipolar	Insulat
Steroid	Yes	Lea
Number of US Advisories	One	Lea
(see pgs. 302-304)		Cla
		Evt

	Malfunctions	Qty.	Rate
	Conductor Fracture	30	0.04%
	Clavicular Crush	4	<0.01%
	In the Pocket	11	0.02%
ve	Intravascular	15	0.02%
	Insulation Breach	1500	2.19%
	Lead-to-Can Contact	609	0.89%
	Lead-to-Lead Contact	306	0.45%
	Clavicular Crush	17	0.02%
	Externalized Conductors	309	0.45%
	Other	259	0.38%
	Crimps, Welds & Bonds	3	<0.01%
	Other	0	0.00%
	Extrinsic Factors	497	0.73%
	Total	2,030	2.97%



Year	2	4	6	8	10	12	at 163 months		
Survival Probability	99.07%	97.93%	95.77%	90.97%	84.81%	78.87%	74.20%		
± 1 standard error	0.04%	0.06%	0.09%	0.15%	0.22%	0.34%	0.69%		
Sample Size	56,670	45,330	35,050	25,670	16,400	4,900	240		



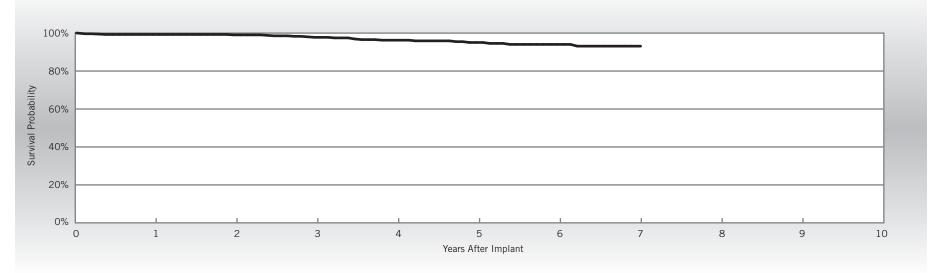
Riata™

Models 1580 & 1581

US Regulatory Approval	March 2002
Number of Devices Enrolled in Study	566
Active Devices Enrolled in Study	220
Cumulative Months of Follow-up	26,597
Insulation	Silicone
Type and/or Fixation	Dual Coil, Active
Polarity	Bipolar
Steroid	Yes

Qualifying Complications	Qty	Rate
Conductor Fracture	2	0.35%
Failure to Capture	1	0.18%
Insulation Breach	9	1.59%
Lead Dislodgement	2	0.35%
Oversensing	6	1.06%
Skin Erosion	1	0.18%

Malfunctions	Qty	Rate
Conductor Fracture	0	0.00%
Clavicular Crush	0	0.00%
In the Pocket	0	0.00%
Intravascular	0	0.00%
Insulation Breach	17	3.00%
Lead-to-Can Contact	5	0.88%
Lead-to-Lead Contact	5	0.88%
Clavicular Crush	0	0.00%
Externalized Conductors	6	1.06%
Other	1	0.18%
Crimps, Welds & Bonds	0	0.00%
Other	0	0.00%
Extrinsic Factors	6	1.06%
Total	23	4.06%



Year	1	2	3	4	5	6	7		
Survival Probability	99.28%	99.05%	97.76%	96.26%	95.05%	94.04%	93.12%		
± 1 standard error	0.36%	0.36%	0.66%	0.97%	1.18%	1.37%	1.64%		
Sample Size	530	470	400	320	250	170	60		



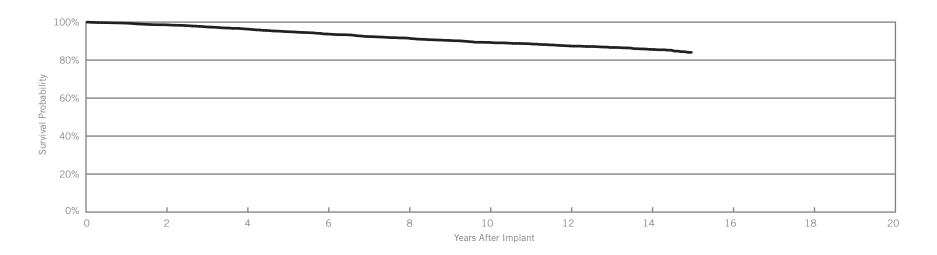
Defibrillation Leads

Customer Reported Performance Data

TVL[™] ADX

Model 1559

US Regulatory Approval	November 1999
Registered US Implants	4,559
Estimated Active US Implants	767
Insulation	Silicone
Type and/or Fixation	Single Coil, Active
Polarity	Bipolar
Steroid	Yes
Number of US Advisories	None



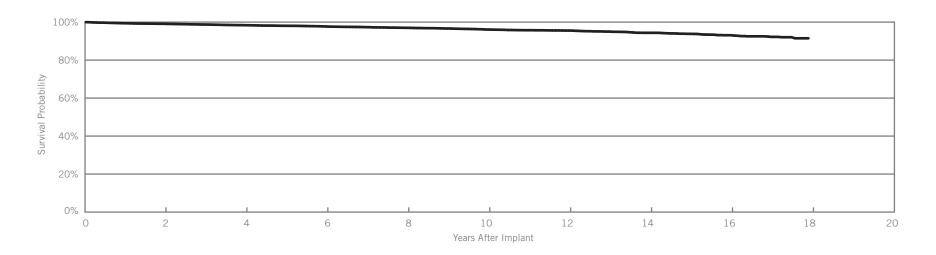
Year	2	4	6	8	10	12	14	at 180 months	
Survival Probability	98.61%	96.36%	93.73%	91.55%	89.32%	87.44%	85.60%	84.08%	
± 1 standard error	0.19%	0.31%	0.44%	0.54%	0.65%	0.75%	0.85%	1.05%	
Sample Size	3,730	2,960	2,290	1,720	1,260	980	700	220	



SPL™

Models SP01, SP02, SP03 & SP04

US Regulatory Approval	September 1997		
Registered US Implants	12,373		
Estimated Active US Implants	2,339		
Insulation	Silicone		
Type and/or Fixation	Dual Coil, Passive		
Polarity	Bipolar		
Steroid	Yes		
Number of US Advisories	None		



Year	2	4	6	8	10	12	14	16	at 215 months	
Survival Probability	99.11%	98.36%	97.69%	96.99%	96.10%	95.56%	94.37%	93.10%	91.49%	
± 1 standard error	0.09%	0.12%	0.15%	0.19%	0.23%	0.26%	0.33%	0.42%	0.68%	
Sample Size	10,400	8,490	6,880	5,450	4,210	3,270	2,560	1,350	200	



SUMMARY INFORMATION

Defibrillation Leads



Survival Summary

						Survival P	robability				
Models	Family	1 year	2 year	3 year	4 year	5 year	6 year	7 year	8 year	9 year	10 year
LDA220Q	Optisure™ DF4	99.18%									
LDA210Q	Optisure™ DF4	98.95%									
7170Q/7171Q	Durata™ DF4	99.14%	98.73%	98.29%	97.68%	97.41%					
7120Q/7121Q	Durata™ DF4	99.23%	99.01%	98.78%	98.43%	98.03%	97.65%				
7122Q	Durata™ DF4	99.25%	99.02%	98.71%	98.27%	97.72%	97.27%				
7120/7121	Durata™	99.42%	99.14%	98.87%	98.51%	98.06%	97.55%	96.81%	96.12%		
7122	Durata™	99.24%	98.85%	98.51%	98.06%	97.28%	96.81%	96.14%			
7070/7071	Riata™ ST Optim™	99.44%	99.21%	98.78%	98.35%	97.23%	96.42%	95.45%	95.10%		
7020/7021	Riata™ ST Optim™	98.99%	98.65%	98.37%	97.91%	97.19%	96.51%	95.56%	94.86%		
7022	Riata™ ST Optim™	99.04%	98.87%	98.60%	97.88%	97.32%	96.71%	95.88%	95.13%		
7010/7011	Riata™ ST	99.60%	99.43%	99.05%	98.77%	97.56%	96.00%	94.18%	91.95%		
7040/7041	Riata™ ST	99.41%	99.11%	98.66%	97.46%	96.29%	94.21%	92.15%	89.62%	86.86%	
7002	Riata™ ST	99.02%	98.51%	97.96%	97.28%	95.95%	93.28%	91.25%	88.21%		
7000/7001	Riata™ ST	99.34%	98.99%	98.49%	97.89%	96.81%	94.88%	92.70%	91.00%	89.13%	
1560/1561	Riata™ i	99.78%	99.41%	99.00%	98.71%	98.21%	97.48%	95.88%	93.73%	90.30%	
1590/1591	Riata™ i	99.61%	99.31%	99.08%	98.79%	98.03%	97.00%	94.78%	92.54%	90.79%	89.25%
1582	Riata™	98.95%	98.26%	97.06%	95.73%	94.12%	91.81%	87.76%	83.72%	79.63%	76.12%
1570/1571	Riata™	99.65%	99.34%	98.99%	98.26%	97.39%	95.88%	93.81%	92.00%	89.77%	86.39%
1580/1581	Riata™	99.40%	99.07%	98.54%	97.93%	97.10%	95.77%	93.68%	90.97%	87.88%	84.81%
1559	TVL [™] ADX	99.47%	98.61%	97.51%	96.36%	94.97%	93.73%	92.40%	91.55%	90.38%	89.32%
SP01/SP02/SP03/SP04	SPL™	99.39%	99.11%	98.73%	98.36%	98.07%	97.69%	97.34%	96.99%	96.63%	96.10%



Acute Observation Summary

Post Implant ≤30 Days

	US Regulatory	Registered	Estimated Active US		rdiac pration		ductor cture		ead gement		ure to oture	Overs	ensing		ure to ense		ulation each	Pa	ormal icing edance	Defibr	ormal illation dance		cardiac ulation	Ot	her	Тс	otal	Total Returned for
Models	Approval	US Implants	Implants	Qty.	Rate	Qty.	Rate	Qty.	Rate	Qty.	Rate	Qty.	Rate	Qty.	Rate	Qty.	Rate	Qty.	Rate	Qty.	Rate	Qty.	Rate	Qty.	Rate	Qty.	Rate	Analysis
LDA220Q	Feb-14	3,297	2,962	4	0.12%	0	0.00%	10	0.30%	7	0.21%	1	0.03%	0	0.00%	0	0.00%	0	0.00%	2	0.06%	1	0.03%	2	0.06%	27	0.82%	10
LDA210Q	Feb-14	8,132	7,552	9	0.11%	0	0.00%	19	0.23%	10	0.12%	4	0.05%	6	0.07%	0	0.00%	0	0.00%	2	0.02%	0	0.00%	5	0.06%	55	0.68%	12
7170Q/7171Q	Jul-09	5,159	3,438	6	0.12%	1	0.02%	11	0.21%	8	0.16%	3	0.06%	0	0.00%	0	0.00%	1	0.02%	0	0.00%	0	0.00%	1	0.02%	31	0.60%	13
7120Q/7121Q	Jan-09	112,642	74,227	70	0.06%	1	<0.01%	195	0.17%	86	0.08%	39	0.03%	12	0.01%	0	0.00%	5	<0.01%	8	<0.01%	3	<0.01%	31	0.03%	450	0.40%	227
7122Q	Jan-09	59,643	43,746	69	0.12%	2	<0.01%	111	0.19%	51	0.09%	18	0.03%	7	0.01%	0	0.00%	4	<0.01%	5	<0.01%	3	<0.01%	26	0.04%	296	0.50%	135
7120/7121	Sep-07	59,218	30,907	39	0.07%	1	<0.01%	69	0.12%	22	0.04%	48	0.08%	5	<0.01%	0	0.00%	1	<0.01%	19	0.03%	0	0.00%	21	0.04%	225	0.38%	91
7122	Sep-07	13,785	8,077	10	0.07%	1	<0.01%	18	0.13%	15	0.11%	10	0.07%	0	0.00%	0	0.00%	2	0.01%	1	<0.01%	1	<0.01%	4	0.03%	62	0.45%	30
7070/7071	Jul-06	3,311	1,570	3	0.09%	1	0.03%	3	0.09%	5	0.15%	4	0.12%	3	0.09%	0	0.00%	0	0.00%	0	0.00%	0	0.00%	0	0.00%	19	0.57%	6
7020/7021	Jul-06	14,236	6,042	33	0.23%	0	0.00%	27	0.19%	17	0.12%	19	0.13%	8	0.06%	0	0.00%	1	<0.01%	4	0.03%	3	0.02%	0	0.00%	112	0.79%	53
7022	Jul-06	1,468	664	5	0.34%	0	0.00%	3	0.20%	1	0.07%	0	0.00%	0	0.00%	0	0.00%	1	0.07%	0	0.00%	0	0.00%	0	0.00%	10	0.68%	3
7010/7011	Mar-06	2,199	868	3	0.14%	0	0.00%	1	0.05%	2	0.09%	2	0.09%	1	0.05%	0	0.00%	1	0.05%	0	0.00%	0	0.00%	1	0.05%	11	0.50%	4
7040/7041	Mar-06	4,054	1,595	4	0.10%	0	0.00%	5	0.12%	0	0.00%	3	0.07%	0	0.00%	0	0.00%	2	0.05%	0	0.00%	0	0.00%	1	0.02%	15	0.37%	3
7002	Jun-05	2,405	911	6	0.25%	0	0.00%	2	0.08%	4	0.17%	4	0.17%	0	0.00%	0	0.00%	2	0.08%	1	0.04%	0	0.00%	1	0.04%	20	0.83%	11
7000/7001	Jun-05	34,864	12,963	42	0.12%	0	0.00%	38	0.11%	42	0.12%	40	0.11%	7	0.02%	1	<0.01%	8	0.02%	4	0.01%	3	<0.01%	11	0.03%	196	0.56%	96





Chronic Complication Summary

>30 Days

	US Regulatory	Registered	Estimated Active US		rdiac pration		ductor cture		ead gement		ure to oture	Overs	ensing		ure to inse		lation each	Pa	ormal cing edance	Defib	ormal rillation edance		cardiac ulation	Ot	her	то	otal	Total Returned for
Models	Approval	US Implants	Implants	Qty.	Rate	Qty.	Rate	Qty.	Rate	Qty.	Rate	Qty.	Rate	Qty.	Rate	Qty.	Rate	Qty.	Rate	Qty.	Rate	Qty.	Rate	Qty.	Rate	Qty.	Rate	Analysis
LDA220Q	Feb-14	3,297	2,962	3	0.09%	0	0.00%	14	0.42%	7	0.21%	2	0.06%	0	0.00%	0	0.00%	0	0.00%	0	0.00%	0	0.00%	0	0.00%	26	0.79%	9
LDA210Q	Feb-14	8,132	7,552	5	0.06%	0	0.00%	37	0.45%	13	0.16%	8	0.10%	3	0.04%	0	0.00%	1	0.01%	3	0.04%	0	0.00%	4	0.05%	74	0.91%	29
7170Q/7171Q	Jul-09	5,159	3,438	4	0.08%	5	0.10%	18	0.35%	30	0.58%	20	0.39%	0	0.00%	2	0.04%	8	0.16%	6	0.12%	0	0.00%	0	0.00%	93	1.80%	31
7120Q/7121Q	Jan-09	112,642	74,227	31	0.03%	65	0.06%	468	0.42%	364	0.32%	302	0.27%	50	0.04%	16	0.01%	55	0.05%	156	0.14%	5	<0.01%	46	0.04%	1558	1.38%	692
7122Q	Jan-09	59,643	43,746	30	0.05%	23	0.04%	225	0.38%	134	0.22%	127	0.21%	24	0.04%	8	0.01%	27	0.05%	41	0.07%	8	0.01%	22	0.04%	669	1.12%	321
7120/7121	Sep-07	59,218	30,907	15	0.03%	101	0.17%	173	0.29%	218	0.37%	398	0.67%	53	0.09%	39	0.07%	124	0.21%	175	0.30%	1	<0.01%	32	0.05%	1329	2.24%	413
7122	Sep-07	13,785	8,077	2	0.01%	21	0.15%	49	0.36%	49	0.36%	76	0.55%	8	0.06%	19	0.14%	28	0.20%	20	0.15%	2	0.01%	6	0.04%	280	2.03%	141
7070/7071	Jul-06	3,311	1,570	2	0.06%	15	0.45%	12	0.36%	23	0.69%	37	1.12%	2	0.06%	4	0.12%	10	0.30%	10	0.30%	1	0.03%	2	0.06%	118	3.56%	26
7020/7021	Jul-06	14,236	6,042	16	0.11%	48	0.34%	63	0.44%	122	0.86%	179	1.26%	16	0.11%	22	0.15%	31	0.22%	66	0.46%	2	0.01%	26	0.18%	591	4.15%	174
7022	Jul-06	1,468	664	2	0.14%	7	0.48%	10	0.68%	8	0.54%	15	1.02%	1	0.07%	5	0.34%	2	0.14%	2	0.14%	1	0.07%	1	0.07%	54	3.68%	18
7010/7011	Mar-06	2,199	868	3	0.14%	4	0.18%	8	0.36%	6	0.27%	34	1.55%	3	0.14%	38	1.73%	18	0.82%	14	0.64%	0	0.00%	2	0.09%	130	5.91%	30
7040/7041	Mar-06	4,054	1,595	3	0.07%	29	0.72%	6	0.15%	42	1.04%	82	2.02%	14	0.35%	50	1.23%	14	0.35%	19	0.47%	0	0.00%	6	0.15%	265	6.54%	57
7002	Jun-05	2,405	911	5	0.21%	9	0.37%	9	0.37%	17	0.71%	54	2.25%	2	0.08%	60	2.49%	3	0.12%	6	0.25%	0	0.00%	6	0.25%	171	7.11%	63
7000/7001	Jun-05	34,864	12,963	29	0.08%	126	0.36%	57	0.16%	271	0.78%	708	2.03%	61	0.17%	632	1.81%	97	0.28%	156	0.45%	4	0.01%	86	0.25%	2227	6.39%	617



U.S. Malfunction Summary

						Conducto	r Fractu	e								Insulatio	n Breac	h												
	Registered US	Percent Returned for		ricular rush	In the	Pocket	Intrav	ascular	Conc	otal luctor cture		to-Can Itact		o-Lead tact		icular ush		nalized uctors	Ot	her	Insu	otal lation each	Wel	nps, ds & nds	Ot	her		rinsic ctors	Tc	otal
Models	Implants	Analysis	Qty.	Rate	Qty.	Rate	Qty.	Rate	Qty.	Rate	Qty.	Rate	Qty.	Rate	Qty.	Rate	Qty.	Rate	Qty.	Rate	Qty.	Rate	Qty.	Rate	Qty.	Rate	Qty.	Rate	Qty.	Rate
LDA220Q	3,297	1.50%	0	0.00%	0	0.00%	0	0.00%	0	0.00%	0	0.00%	0	0.00%	0	0.00%	0	0.00%	0	0.00%	0	0.00%	0	0.00%	0	0.00%	9	0.27%	9	0.27%
LDA210Q	8,132	1.70%	0	0.00%	0	0.00%	0	0.00%	0	0.00%	0	0.00%	0	0.00%	0	0.00%	0	0.00%	0	0.00%	0	0.00%	0	0.00%	0	0.00%	30	0.37%	30	0.37%
7170Q/7171Q	5,159	3.40%	0	0.00%	0	0.00%	1	0.02%	1	0.02%	3	0.06%	1	0.02%	0	0.00%	0	0.00%	0	0.00%	4	0.08%	0	0.00%	0	0.00%	29	0.56%	34	0.66%
7120Q/7121Q	112,642	3.50%	2	<0.01%	5	<0.01%	14	0.01%	21	0.02%	45	0.04%	9	<0.01%	16	0.01%	0	0.00%	27	0.02%	97	0.09%	2	<0.01%	32	0.03%	618	0.55%	770	0.68%
7122Q	59,643	3.20%	0	0.00%	6	0.01%	2	<0.01%	8	0.01%	21	0.04%	5	<0.01%	5	<0.01%	0	0.00%	7	0.01%	38	0.06%	0	0.00%	11	0.02%	302	0.51%	359	0.60%
7120/7121	59,218	4.50%	2	<0.01%	20	0.03%	8	0.01%	30	0.05%	47	0.08%	20	0.03%	12	0.02%	0	0.00%	17	0.03%	96	0.16%	1	<0.01%	9	0.02%	345	0.58%	481	0.81%
7122	13,785	5.50%	0	0.00%	12	0.09%	3	0.02%	15	0.11%	23	0.17%	11	0.08%	0	0.00%	1	<0.01%	5	0.04%	40	0.29%	0	0.00%	4	0.03%	107	0.78%	166	1.20%
7070/7071	3,311	6.60%	0	0.00%	0	0.00%	1	0.03%	1	0.03%	3	0.09%	2	0.06%	1	0.03%	1	0.03%	1	0.03%	8	0.24%	0	0.00%	0	0.00%	19	0.57%	28	0.85%
7020/7021	14,236	6.00%	1	<0.01%	2	0.01%	5	0.04%	8	0.06%	12	0.08%	4	0.03%	4	0.03%	0	0.00%	12	0.08%	32	0.22%	0	0.00%	0	0.00%	158	1.11%	198	1.39%
7022	1,468	8.70%	0	0.00%	2	0.14%	1	0.07%	3	0.20%	4	0.27%	0	0.00%	0	0.00%	0	0.00%	1	0.07%	5	0.34%	0	0.00%	0	0.00%	16	1.09%	24	1.63%
7010/7011	2,199	7.40%	0	0.00%	2	0.09%	0	0.00%	2	0.09%	9	0.41%	16	0.73%	1	0.05%	2	0.09%	4	0.18%	32	1.46%	0	0.00%	0	0.00%	9	0.41%	43	1.96%
7040/7041	4,054	7.10%	0	0.00%	1	0.02%	3	0.07%	4	0.10%	20	0.49%	13	0.32%	0	0.00%	2	0.05%	9	0.22%	44	1.09%	0	0.00%	0	0.00%	26	0.64%	74	1.83%
7002	2,405	8.10%	0	0.00%	2	0.08%	3	0.12%	5	0.21%	29	1.21%	13	0.54%	0	0.00%	5	0.21%	10	0.42%	57	2.37%	0	0.00%	0	0.00%	22	0.91%	84	3.49%
7000/7001	34,864	6.50%	4	0.01%	7	0.02%	12	0.03%	23	0.07%	264	0.76%	132	0.38%	10	0.03%	30	0.09%	63	0.18%	499	1.43%	1	<0.01%	1	<0.01%	271	0.78%	795	2.28%
1560/1561	981	8.70%	0	0.00%	0	0.00%	0	0.00%	0	0.00%	8	0.82%	6	0.61%	1	0.10%	2	0.20%	1	0.10%	18	1.83%	0	0.00%	0	0.00%	2	0.20%	20	2.04%
1590/1591	9,697	6.40%	1	0.01%	1	0.01%	5	0.05%	7	0.07%	55	0.57%	45	0.46%	2	0.02%	17	0.18%	28	0.29%	147	1.52%	0	0.00%	1	0.01%	49	0.51%	204	2.10%
1582	3,129	10.10%	0	0.00%	0	0.00%	3	0.10%	3	0.10%	47	1.50%	27	0.86%	2	0.06%	45	1.44%	29	0.93%	150	4.79%	0	0.00%	0	0.00%	34	1.09%	187	5.98%
1570/1571	10,278	7.30%	2	0.02%	3	0.03%	0	0.00%	5	0.05%	94	0.91%	33	0.32%	1	<0.01%	36	0.35%	27	0.26%	191	1.86%	0	0.00%	0	0.00%	52	0.51%	248	2.41%
1580/1581	68,383	7.20%	4	<0.01%	11	0.02%	15	0.02%	30	0.04%	609	0.89%	306	0.45%	17	0.02%	309	0.45%	259	0.38%	1500	2.19%	3	<0.01%	0	0.00%	497	0.73%	2030	2.97%



Worldwide Malfunction Summary

						Conducto	or Fractu	re								Insulatio	n Breac	h												
	Worldwide	Percent Returned for		icular ush	In the	e Pocket	Intrav	ascular	Con	otal ductor cture		to-Can ntact		to-Lead ntact		icular ush		nalized luctors	Of	ther	Insu	otal lation each	Wel	nps, ds & nds	Ot	her		rinsic ctors	Tc	otal
Models	Sales	Analysis	Qty.	Rate	Qty.	Rate	Qty.	Rate	Qty.	Rate	Qty.	Rate	Qty.	Rate	Qty.	Rate	Qty.	Rate	Qty.	Rate	Qty.	Rate	Qty.	Rate	Qty.	Rate	Qty.	Rate	Qty.	Rate
LDA220Q	5,002	1.4%	0	0.00%	0	0.00%	0	0.00%	0	0.00%	0	0.00%	0	0.00%	0	0.00%	0	0.00%	0	0.00%	0	0.00%	0	0.00%	1	0.02%	15	0.30%	16	0.32%
LDA210Q	13,927	1.6%	0	0.00%	0	0.00%	0	0.00%	0	0.00%	0	0.00%	0	0.00%	0	0.00%	0	0.00%	1	0.01%	1	0.01%	0	0.00%	5	0.04%	57	0.41%	63	0.45%
7170Q/7171Q	15,802	2.1%	0	0.00%	2	0.01%	4	0.03%	6	0.04%	6	0.04%	1	0.01%	3	0.02%	0	0.00%	2	0.01%	12	0.08%	7	0.04%	0	0.00%	55	0.35%	80	0.51%
7120Q/7121Q	187,663	2.8%	6	<0.01%	16	0.01%	22	0.01%	44	0.02%	64	0.03%	12	0.01%	29	0.02%	0	0.00%	33	0.02%	138	0.07%	3	<0.01%	128	0.07%	987	0.53%	1300	0.69%
7122Q	154,167	2.2%	2	<0.01%	21	0.01%	6	<0.01%	29	0.02%	59	0.04%	7	<0.01%	17	0.01%	0	0.00%	13	0.01%	96	0.06%	2	<0.01%	197	0.13%	735	0.48%	1059	0.69%
7120/7121	136,543	2.7%	7	0.01%	81	0.06%	21	0.02%	109	0.08%	89	0.07%	27	0.02%	20	0.01%	0	0.00%	32	0.02%	168	0.12%	2	<0.01%	51	0.04%	657	0.48%	987	0.72%
7122	57,548	2.7%	2	<0.01%	82	0.14%	8	0.01%	92	0.16%	63	0.11%	17	0.03%	6	0.01%	1	<0.01%	12	0.02%	99	0.17%	1	<0.01%	39	0.07%	361	0.63%	592	1.03%





Actively Monitored Study Data Summary

Qualifying Complications

	Number of Devices	Active Devices	Cumulative Months of	Defibr	ormal illation dance	Pa	ormal cing dance		rdiac pration		luctor cture		ardiac Ilation	1	ilure to oture		lure to nse		ropriate lock		lation each		ead gement	Overs	ensing		ardial Ision		kin osion	τα	otal
Models	Enrolled	Enrolled	Follow-Up	Qty.	Rate	Qty.	Rate	Qty.	Rate	Qty.	Rate	Qty.	Rate	Qty.	Rate	Qty.	Rate	Qty.	Rate	Qty.	Rate	Qty.	Rate	Qty.	Rate	Qty.	Rate	Qty.	Rate	Qty.	Rate
7170Q/7171Q	114	63	5,066	0	0.00%	1	0.88%	0	0.00%	1	0.88%	0	0.00%	0	0.00%	0	0.00%	0	0.00%	0	0.00%	1	0.88%	0	0.00%	0	0.00%	0	0.00%	3	2.63%
7120Q/7121Q	4,301	2,378	180,394	4	0.09%	2	0.05%	1	0.02%	10	0.23%	0	0.00%	7	0.16%	4	0.09%	4	0.09%	1	0.02%	38	0.88%	5	0.12%	0	0.00%	0	0.00%	76	1.77%
7122Q	1,515	953	54,545	1	0.07%	0	0.00%	0	0.00%	3	0.20%	0	0.00%	3	0.20%	0	0.00%	0	0.00%	0	0.00%	7	0.46%	0	0.00%	2	0.13%	0	0.00%	16	1.06%
7120/7121	3,571	1,499	188,193	1	0.03%	8	0.22%	0	0.00%	11	0.31%	0	0.00%	8	0.22%	2	0.06%	2	0.06%	9	0.25%	20	0.56%	8	0.22%	0	0.00%	0	0.00%	69	1.93%
7122	447	245	22,530	0	0.00%	2	0.45%	0	0.00%	5	1.12%	0	0.00%	2	0.45%	1	0.22%	0	0.00%	0	0.00%	4	0.89%	3	0.67%	0	0.00%	0	0.00%	17	3.80%
7070/7071	288	109	15,216	1	0.35%	2	0.69%	1	0.35%	2	0.69%	0	0.00%	1	0.35%	0	0.00%	0	0.00%	0	0.00%	1	0.35%	1	0.35%	0	0.00%	0	0.00%	9	3.13%
7020/7021	1,472	413	79,563	0	0.00%	5	0.34%	0	0.00%	5	0.34%	0	0.00%	6	0.41%	1	0.07%	0	0.00%	2	0.14%	9	0.61%	4	0.27%	0	0.00%	1	0.07%	33	2.24%
7000/7001	180	44	7,398	0	0.00%	0	0.00%	0	0.00%	0	0.00%	0	0.00%	1	0.56%	0	0.00%	0	0.00%	1	0.56%	1	0.56%	0	0.00%	0	0.00%	0	0.00%	3	1.67%
1580/1581	566	220	26,597	0	0.00%	0	0.00%	0	0.00%	2	0.35%	0	0.00%	1	0.18%	0	0.00%	0	0.00%	9	1.59%	2	0.35%	6	1.06%	0	0.00%	1	0.18%	21	3.71%

Malfunctions

					(Conducto	or Fractu	re								Insulatio	n Breac	h												
	Number of Devices	Percent Returned		icular ush	In the	Pocket	Intrav	ascular	Conc	tal luctor cture		-to-Can ntact		to-Lead ntact		icular ush		nalized uctors	OI	ther	Insu	ital lation each	Wel	nps, ds & nds	Of	her		rinsic ctors	т	otal
Models	Enrolled	for Analysis	Qty.	Rate	Qty.	Rate	Qty.	Rate	Qty.	Rate	Qty.	Rate	Qty.	Rate	Qty.	Rate	Qty.	Rate	Qty.	Rate	Qty.	Rate	Qty.	Rate	Qty.	Rate	Qty.	Rate	Qty.	Rate
7170Q/7171Q	114	4.40%	0	0.00%	0	0.00%	0	0.00%	0	0.00%	0	0.00%	0	0.00%	0	0.00%	0	0.00%	0	0.00%	0	0.00%	0	0.00%	0	0.00%	2	1.75%	2	1.75%
7120Q/7121Q	4,301	4.60%	1	0.02%	2	0.05%	2	0.05%	5	0.12%	2	0.05%	1	0.02%	0	0.00%	0	0.00%	1	0.02%	4	0.09%	0	0.00%	1	0.02%	42	0.98%	52	1.21%
7122Q	1,515	4.40%	1	0.07%	1	0.07%	0	0.00%	2	0.13%	3	0.20%	0	0.00%	0	0.00%	0	0.00%	1	0.07%	4	0.26%	0	0.00%	0	0.00%	14	0.92%	20	1.32%
7120/7121	3,571	3.60%	0	0.00%	1	0.03%	0	0.00%	1	0.03%	5	0.14%	4	0.11%	0	0.00%	0	0.00%	1	0.03%	10	0.28%	0	0.00%	1	0.03%	25	0.70%	37	1.04%
7122	447	4.00%	0	0.00%	1	0.22%	1	0.22%	2	0.45%	0	0.00%	0	0.00%	0	0.00%	0	0.00%	0	0.00%	0	0.00%	0	0.00%	0	0.00%	5	1.12%	7	1.57%
7070/7071	288	1.70%	0	0.00%	0	0.00%	0	0.00%	0	0.00%	0	0.00%	0	0.00%	0	0.00%	0	0.00%	0	0.00%	0	0.00%	0	0.00%	0	0.00%	1	0.35%	1	0.35%
7020/7021	1,472	4.70%	0	0.00%	3	0.20%	0	0.00%	3	0.20%	1	0.07%	0	0.00%	2	0.14%	0	0.00%	0	0.00%	3	0.20%	0	0.00%	0	0.00%	14	0.95%	20	1.36%
7000/7001	180	6.10%	0	0.00%	0	0.00%	0	0.00%	0	0.00%	2	1.11%	1	0.56%	0	0.00%	0	0.00%	0	0.00%	3	1.67%	1	0.56%	0	0.00%	0	0.00%	4	2.22%
1580/1581	566	5.50%	0	0.00%	0	0.00%	0	0.00%	0	0.00%	5	0.88%	5	0.88%	0	0.00%	6	1.06%	1	0.18%	17	3.00%	0	0.00%	0	0.00%	6	1.06%	23	4.06%



PACEMAKERS

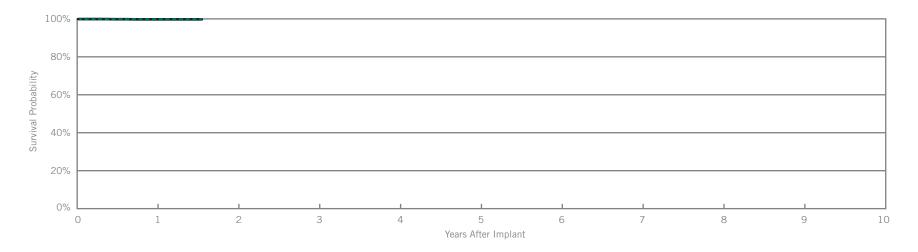
Dual-Chamber



Endurity[™] DR Model PM2160

US Regulatory Approval	March 2014
Registered US Implants	7,024
Estimated Active US Implants	6,326
Estimated Longevity	9.7 Years
Normal Battery Depletion	0
Number of US Advisories	None

	w/ Cor	unctions npromised nerapy	w/o Co	functions mpromised herapy
	Qty	Rate	Qty	Rate
Electrical Component	0	0.00%	0	0.00%
Electrical Interconnect	0	0.00%	0	0.00%
Battery	0	0.00%	0	0.00%
Software/Firmware	0	0.00%	0	0.00%
Mechanical	0	0.00%	5	0.07%
Possible Early Battery Depletion	0	0.00%	0	0.00%
Other	0	0.00%	1	0.01%
Total	0	0.00%	6	0.09%



Including Normal Battery Depletion

Year	1	at 19 months				
Survival Probability	99.76%	99.76%				
± 1 standard error	0.07%	0.07%				
Sample Size	4,990	350				

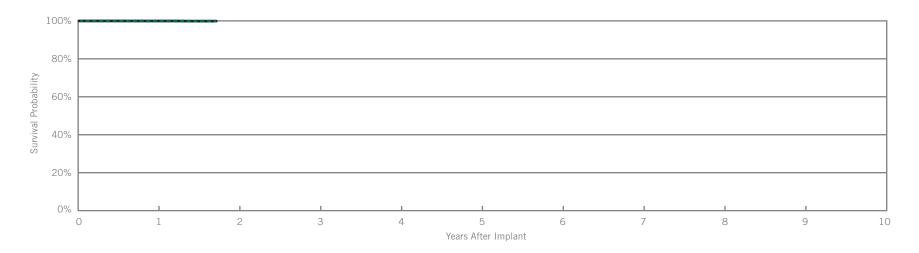
Year	1	at 19 months				
Survival Probability	99.76%	99.76%				
± 1 standard error	0.07%	0.07%				



Customer Reported Performance Data

Assurity[™] DR RF

Model PM2240			w/ Co	functions mpromised herapy	w/o Co	functions ompromised herapy
US Regulatory Approval	March 2014		Qty	Rate	Qty	Rate
Registered US Implants	82,203	Electrical Component	0	0.00%	0	0.00%
Estimated Active US Implants	76,669	Electrical Interconnect	0	0.00%	0	0.00%
Estimated Longevity	9.4 Years	Battery	0	0.00%	0	0.00%
Normal Battery Depletion	0	Software/Firmware	0	0.00%	0	0.00%
Number of US Advisories	None	Mechanical	0	0.00%	15	0.02%
		Possible Early Battery Depletion	0	0.00%	0	0.00%
		Other	0	0.00%	3	<0.01%
		Total	0	0.00%	18	0.02%



Including Normal Battery Depletion

Year	1	at 21 months				
Survival Probability	99.94%	99.86%				
± 1 standard error	0.01%	0.04%				
Sample Size	51,210	220				

Year	1	at 21 months				
Survival Probability	99.94%	99.86%				
± 1 standard error	0.01%	0.04%				

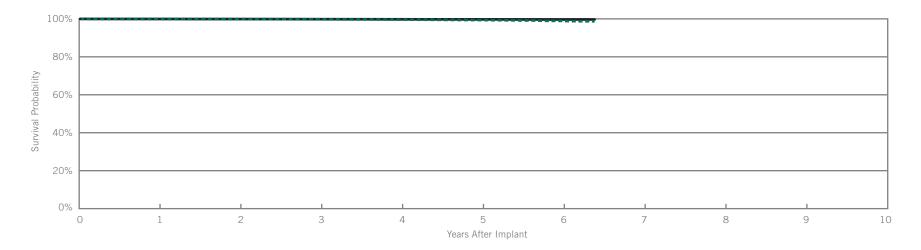


Accent[™] DR RF

Model	PM2210
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US Regulatory Approval	July 2009
Registered US Implants	242,999
Estimated Active US Implants	158,888
Estimated Longevity	8 Years
Normal Battery Depletion	145
Number of US Advisories (see pgs. 296-300)	One

	w/ Co	functions mpromised herapy	w/o Co	functions mpromised herapy
	Qty	Rate	Qty	Rate
Electrical Component	15	<0.01%	33	0.01%
Electrical Interconnect	6	<0.01%	30	0.01%
Battery	0	0.00%	0	0.00%
Software/Firmware	0	0.00%	2	<0.01%
Mechanical	0	0.00%	10	<0.01%
Possible Early Battery Depletion	7	<0.01%	17	<0.01%
Other	5	<0.01%	31	0.01%
Total	33	0.01%	123	0.05%



Including Normal Battery Depletion

Year	1	2	3	4	5	6	at 77 months		
Survival Probability	99.93%	99.87%	99.78%	99.62%	99.38%	98.96%	98.73%		
± 1 standard error	0.01%	0.01%	0.01%	0.02%	0.03%	0.06%	0.09%		
Sample Size	227,220	188,030	138,150	90,130	50,900	19,680	780		

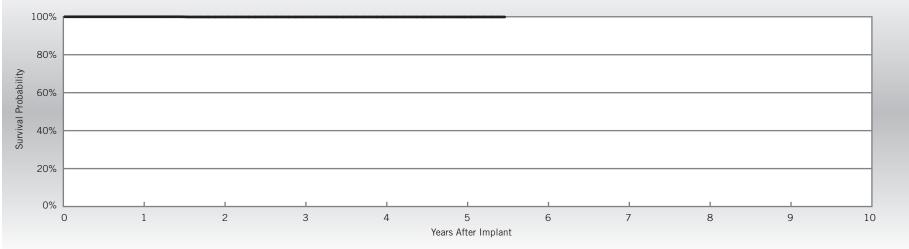
Year	1	2	3	4	5	6	at 77 months		
Survival Probability	99.94%	99.90%	99.84%	99.79%	99.74%	99.68%	99.68%		
± 1 standard error	0.01%	0.01%	0.01%	0.01%	0.02%	0.02%	0.02%		



Actively Monitored Study Data

Accent[™] DR RF

lodel PM2210						w/ Co	Malfunctions w/ Compromised Therapy		Malfunctions w/o Compromised Therapy	
US Regulatory Approval	July 2009	Qualifying Complications	Qty.	Rate		Qty	Rate	Qty	Rate	
Number of Devices Enrolled in Study	1,773	Premature Battery Depletion	1	0.06%	Electrical Component	0	0.00%	1	0.06%	
Active Devices Enrolled in Study	418				Electrical Interconnect	0	0.00%	1	0.06%	
Cumulative Months of Follow-up	47,446				Battery	0	0.00%	0	0.00%	
Estimated Longevity	8 Years				Software/Firmware	0	0.00%	0	0.00%	
					Mechanical	0	0.00%	0	0.00%	
					Possible Early Battery Depletion	0	0.00%	0	0.00%	
					Other	0	0.00%	0	0.00%	
					Total	0	0.00%	2	0.11%	



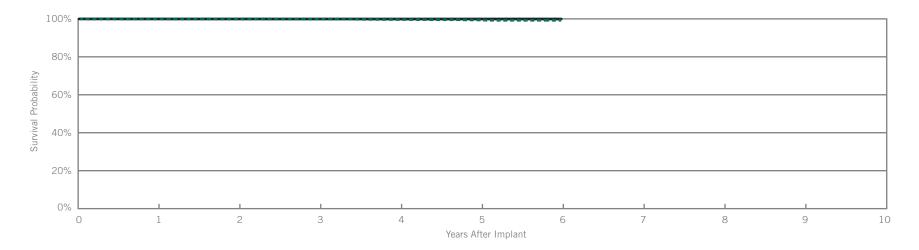
Year	1	2	3	4	5	at 66 months		
Survival Probability	100.00%	99.90%	99.90%	99.90%	99.90%	99.90%		
± 1 standard error	0.00%	0.10%	0.10%	0.10%	0.10%	0.10%		
Sample Size	1,540	1,060	660	470	290	60		



Accent[™] DR Model PM2110

US Regulatory Approval	July 2009
Registered US Implants	48,889
Estimated Active US Implants	32,703
Estimated Longevity	9.2 Years
Normal Battery Depletion	32
Number of US Advisories (see pgs. 296-300)	One

	w/ Co	functions mpromised herapy	w/o Co	functions ompromised herapy
	Qty	Rate	Qty	Rate
Electrical Component	1	<0.01%	3	<0.01%
Electrical Interconnect	2	<0.01%	0	0.00%
Battery	0	0.00%	0	0.00%
Software/Firmware	0	0.00%	3	<0.01%
Mechanical	0	0.00%	3	<0.01%
Possible Early Battery Depletion	0	0.00%	1	<0.01%
Other	0	0.00%	0	0.00%
Total	3	<0.01%	10	0.02%



Including Normal Battery Depletion

Year	1	2	3	4	5	6		
Survival Probability	99.97%	99.93%	99.87%	99.67%	99.44%	99.27%		
± 1 standard error	0.01%	0.01%	0.02%	0.04%	0.07%	0.09%		
Sample Size	45,750	38,030	27,980	17,700	8,730	240		

Year	1	2	3	4	5	6		
Survival Probability	99.97%	99.95%	99.93%	99.93%	99.93%	99.93%		
± 1 standard error	0.01%	0.01%	0.01%	0.01%	0.01%	0.01%		



Actively Monitored Study Data

Accent[™] DR

del PM2110					w/ Cor	functions npromised herapy	Malf w/o Cor Th	unctions npromise erapy
IS Regulatory Approval	July 2009	Qualifying Complications			Qty	Rate	Qty	Rate
lumber of Devices Enrolled in Study	226	None Reported		Electrical Component	0	0.00%	0	0.00%
ctive Devices Enrolled in Study	79			Electrical Interconnect	0	0.00%	0	0.00%
umulative Months of Follow-up	7,413	-		Battery	0	0.00%	0	0.00%
stimated Longevity	9.2 Years	-		Software/Firmware	0	0.00%	0	0.00%
		•		Mechanical	0	0.00%	0	0.00%
				Possible Early Battery Depletion	0	0.00%	0	0.00%
				Other	0	0.00%	0	0.00%
				Total	0	0.00%	0	0.00%
80%								
80%								
								-
								-
40%								-

5	
Years After Implant	

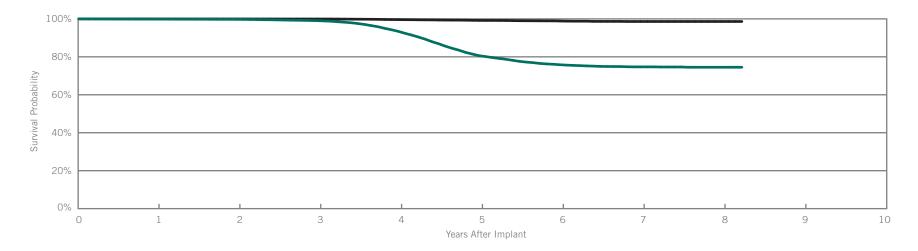
Year	1	2	3	4	at 57 months	
Survival Probability	100.00%	100.00%	100.00%	100.00%	100.00%	
± 1 standard error	0.00%	0.00%	0.00%	0.00%	0.00%	
Sample Size	210	150	100	90	60	



Zephyr[™] DR Model 5820

US Regulatory Approval	March 2007
Registered US Implants	52,880
Estimated Active US Implants	22,993
Estimated Longevity	6.5 Years
Normal Battery Depletion	1,934
Number of US Advisories	None

	w/ Co	functions mpromised herapy	Malfunctions w/o Compromised Therapy		
	Qty	Rate	Qty	Rate	
Electrical Component	2	<0.01%	34	0.06%	
Electrical Interconnect	0	0.00%	0	0.00%	
Battery	0	0.00%	0	0.00%	
Software/Firmware	0	0.00%	9	0.02%	
Mechanical	0	0.00%	2	<0.01%	
Possible Early Battery Depletion	0	0.00%	1	<0.01%	
Other	0	0.00%	47	0.09%	
Total	2	<0.01%	93	0.18%	



Including Normal Battery Depletion

Year	1	2	3	4	5	6	7	8	at 99 months	
Survival Probability	99.85%	99.75%	99.04%	93.43%	80.61%	75.83%	74.71%	74.51%	74.51%	
± 1 standard error	0.02%	0.02%	0.05%	0.14%	0.26%	0.31%	0.34%	0.35%	0.35%	
Sample Size	48,480	40,390	33,080	25,580	17,570	10,300	4,860	1,480	250	

Year	1	2	3	4	5	6	7	8	at 99 months	
Survival Probability	99.97%	99.96%	99.93%	99.62%	99.19%	98.87%	98.62%	98.62%	98.62%	
± 1 standard error	0.01%	0.01%	0.01%	0.04%	0.06%	0.08%	0.11%	0.11%	0.11%	



Actively Monitored Study Data

Zephyr[™] DR

del 5820						w/ Cor	functions mpromised herapy	w/o Co	unctions mpromise nerapy
S Regulatory Approval	March 2007	Qualifying Complications	Qty.	Rate		Qty	Rate	Qty	Rate
umber of Devices Enrolled in Study	283	Skin Erosion	1	0.35%	Electrical Component	0	0.00%	0	0.00
ctive Devices Enrolled in Study	19				Electrical Interconnect	0	0.00%	0	0.00
umulative Months of Follow-up	7,659				Battery	0	0.00%	0	0.00
stimated Longevity	6.5 Years				Software/Firmware	0	0.00%	0	0.00
					Mechanical	0	0.00%	0	0.00
					Possible Early Battery Depletion	0	0.00%	0	0.00
					Other	0	0.00%	0	0.00
					Total	0	0.00%	0	0.00
80%									
80%									-
80%									-
80%									-
80%									

5	6
Years After Implant	

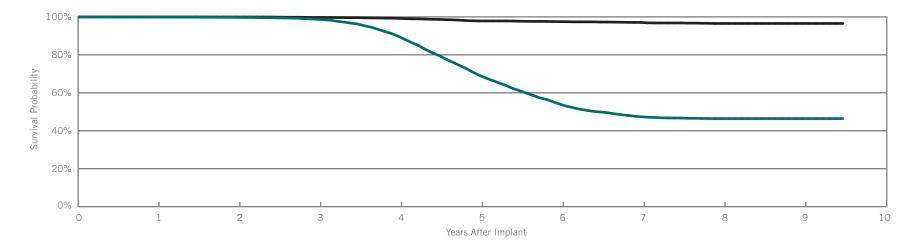
Year	1	2	3	at 41 months			
Survival Probability	99.62%	99.62%	99.62%	99.62%			
± 1 standard error	0.38%	0.38%	0.38%	0.38%			
Sample Size	260	200	120	50			



Victory[™] DR Model 5810

US Regulatory Approval	December 2005
Registered US Implants	26,306
Estimated Active US Implants	3,722
Estimated Longevity	6.5 Years
Normal Battery Depletion	2,761
Number of US Advisories	None

	w/ Co	functions mpromised herapy	w/o Co	functions mpromised herapy
	Qty	Rate	Qty	Rate
Electrical Component	1	<0.01%	89	0.34%
Electrical Interconnect	0	0.00%	0	0.00%
Battery	0	0.00%	0	0.00%
Software/Firmware	0	0.00%	8	0.03%
Mechanical	0	0.00%	2	<0.01%
Possible Early Battery Depletion	0	0.00%	17	0.06%
Other	0	0.00%	28	0.11%
Total	1	<0.01%	144	0.55%



Including Normal Battery Depletion

Year	1	2	3	4	5	6	7	8	9	at 114 months
Survival Probability	99.87%	99.75%	98.71%	89.78%	69.26%	54.00%	47.38%	46.41%	46.41%	46.41%
± 1 standard error	0.02%	0.03%	0.08%	0.22%	0.37%	0.42%	0.45%	0.46%	0.46%	0.46%
Sample Size	24,460	21,230	18,520	15,490	11,690	7,840	4,750	2,680	1,280	210

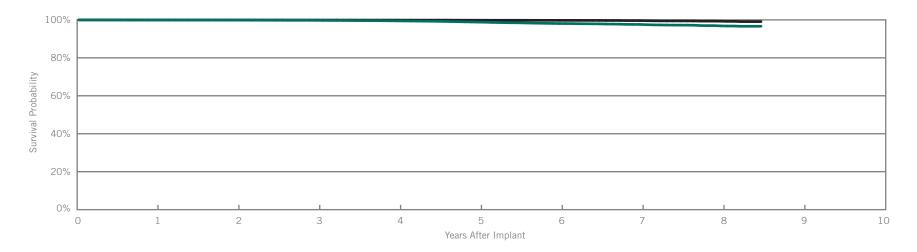
Year	1	2	3	4	5	6	7	8	9	at 114 months
Survival Probability	99.98%	99.93%	99.70%	99.22%	97.85%	97.50%	97.08%	96.53%	96.53%	96.53%
± 1 standard error	0.01%	0.02%	0.04%	0.06%	0.12%	0.14%	0.17%	0.22%	0.22%	0.22%



Zephyr[™] XL DR

odel 5826		
US Regulatory Approval	March 2007	
Registered US Implants	112,010	Ele
Estimated Active US Implants	49,181	Ele
Estimated Longevity	11.7 Years	Bat
Normal Battery Depletion	465	Soft
Number of US Advisories	None	Med

	w/ Co	functions mpromised herapy	w/o Co	functions mpromised herapy
	Qty	Rate	Qty	Rate
Electrical Component	1	<0.01%	17	0.02%
Electrical Interconnect	4	<0.01%	0	0.00%
Battery	0	0.00%	0	0.00%
Software/Firmware	0	0.00%	10	<0.01%
Mechanical	0	0.00%	9	<0.01%
Possible Early Battery Depletion	0	0.00%	3	<0.01%
Other	1	<0.01%	66	0.06%
Total	6	<0.01%	105	0.09%



Including Normal Battery Depletion

Year	1	2	3	4	5	6	7	8	at 102 months	
Survival Probability	99.91%	99.84%	99.75%	99.48%	98.82%	98.07%	97.60%	96.83%	96.63%	
± 1 standard error	0.01%	0.01%	0.02%	0.02%	0.04%	0.06%	0.07%	0.10%	0.16%	
Sample Size	104,810	91,540	80,120	69,980	60,280	49,410	31,420	11,230	460	

Year	1	2	3	4	5	6	7	8	at 102 months	
Survival Probability	99.96%	99.93%	99.92%	99.89%	99.82%	99.74%	99.62%	99.29%	99.09%	
± 1 standard error	0.01%	0.01%	0.01%	0.01%	0.02%	0.02%	0.03%	0.06%	0.13%	



Actively Monitored Study Data

Zephyr[™] XL DR

20%

0% L

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del 5826				Mal w/ Co T	functions mpromised herapy	w/o Co	functions mpromise herapy
S Regulatory Approval	March 2007	Qualifying Complications		Qty	Rate	Qty	Rate
umber of Devices Enrolled in Study	1,517	None Reported	Electrical Component	0	0.00%	1	0.07%
tive Devices Enrolled in Study	22		Electrical Interconnect	0	0.00%	0	0.00%
mulative Months of Follow-up	47,564		Battery	0	0.00%	0	0.00%
timated Longevity	11.7 Years		Software/Firmware	0	0.00%	0	0.00%
			Mechanical	0	0.00%	0	0.00%
			Possible Early Battery Depletion	0	0.00%	0	0.00%
			Other	0	0.00%	0	0.00%
			Total	0	0.00%	1	0.07
100%							
80%							-
80% 60% 40%							-

Year	1	2	3	4	at 50 months			
Survival Probability	100.00%	100.00%	100.00%	100.00%	100.00%			
± 1 standard error	0.00%	0.00%	0.00%	0.00%	0.00%			
Sample Size	1,450	1,270	900	360	50			

5

Years After Implant

6

7



9

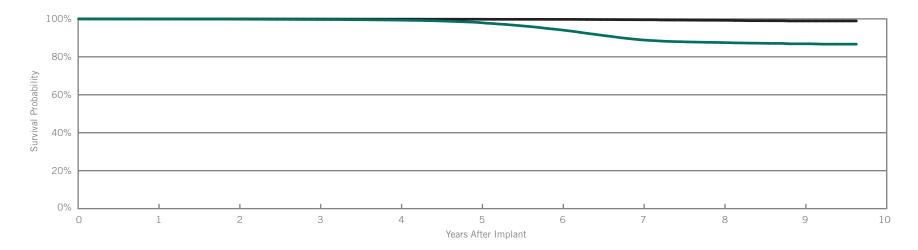
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10

Victory[™] XL DR Model 5816

US Regulatory Approval	December 2005
Registered US Implants	62,639
Estimated Active US Implants	17,526
Estimated Longevity	11.7 Years
Normal Battery Depletion	1,450
Number of US Advisories	None

	w/ Co	functions mpromised herapy	w/o Co	functions mpromised herapy
	Qty	Rate	Qty	Rate
Electrical Component	2	<0.01%	25	0.04%
Electrical Interconnect	0	0.00%	0	0.00%
Battery	0	0.00%	0	0.00%
Software/Firmware	0	0.00%	6	<0.01%
Mechanical	0	0.00%	7	0.01%
Possible Early Battery Depletion	0	0.00%	5	<0.01%
Other	1	<0.01%	57	0.09%
Total	3	<0.01%	100	0.16%



Including Normal Battery Depletion

Year	1	2	3	4	5	6	7	8	9	at 116 months
Survival Probability	99.91%	99.84%	99.67%	99.34%	98.09%	94.27%	88.98%	87.53%	86.87%	86.68%
± 1 standard error	0.01%	0.02%	0.02%	0.04%	0.07%	0.12%	0.17%	0.19%	0.21%	0.23%
Sample Size	58,950	52,280	46,550	41,370	36,830	32,160	25,280	16,300	7,150	330

Year	1	2	3	4	5	6	7	8	9	at 116 months
Survival Probability	99.97%	99.95%	99.91%	99.86%	99.81%	99.74%	99.53%	99.23%	98.90%	98.90%
± 1 standard error	0.01%	0.01%	0.01%	0.02%	0.02%	0.03%	0.04%	0.05%	0.09%	0.09%



Actively Monitored Study Data

Victory[™] XL DR

del 5816						Malfunctions w/ Compromised Therapy		Malfunctions w/o Compromised Therapy	
S Regulatory Approval	December 2005	Qualifying Complications				Qty	Rate	Qty	Rate
umber of Devices Enrolled in Study	332	None Reported		Electrical	Component	0	0.00%	0	0.00%
ctive Devices Enrolled in Study	0			Electrical	Interconnect	0	0.00%	0	0.00%
umulative Months of Follow-up	10,627			Battery		0	0.00%	0	0.00%
stimated Longevity	11.7 Years			Software/	Firmware	0	0.00%	0	0.00%
				Mechanic	al	0	0.00%	0	0.00%
				Possible I	Early Battery Depletion	0	0.00%	0	0.00%
				Other		0	0.00%	0	0.00%
				Total		0	0.00%	0	0.00%
80%									
80%									
80%									-
80% 60%									-
80% 60% 40%									-

Years After	Implant
ICALS ALLEL	IIIIDIAIIL

Year	1	2	3	at 45 months			
Survival Probability	100.00%	100.00%	100.00%	100.00%			
± 1 standard error	0.00%	0.00%	0.00%	0.00%			
Sample Size	320	280	200	50			

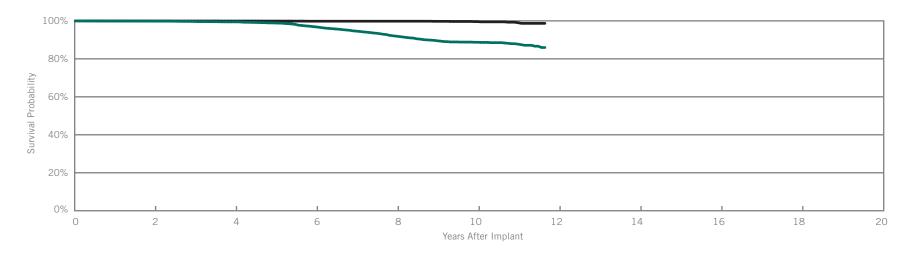


Verity ADx[™] XL DR Model 5356 Verity ADx[™] XL DR M/S Model 5357M/S Verity ADx[™] XL DC Model 5256

US Regulatory Approval	May 2003
Registered US Implants	17,297
Estimated Active US Implants	4,876
Estimated Longevity	6.9 Years
Normal Battery Depletion	302
Number of US Advisories	None

Customer Reported Performance Data

w/ Co	Malfunctions w/ Compromised Therapy		functions ompromised herapy
Qty	Rate	Qty	Rate
0	0.00%	9	0.05%
1	<0.01%	0	0.00%
0	0.00%	1	<0.01%
0	0.00%	0	0.00%
0	0.00%	0	0.00%
0	0.00%	1	<0.01%
0	0.00%	5	0.03%
1	<0.01%	16	0.09%
	w/ Co T 0 1 0 0 0 0 0 0 0 0 0	Therapy Qty Rate 0 0.00% 1 <0.01%	w/ Compromised Therapy w/o Cr Qty Qty Rate Qty 0 0.00% 9 1 <0.01%



Including Normal Battery Depletion

Year	2	4	6	8	10	at 140 months		
Survival Probability	99.83%	99.47%	96.85%	91.92%	88.74%	85.97%		
± 1 standard error	0.03%	0.06%	0.18%	0.31%	0.41%	0.82%		
Sample Size	14,200	10,960	8,140	5,740	2,650	230		

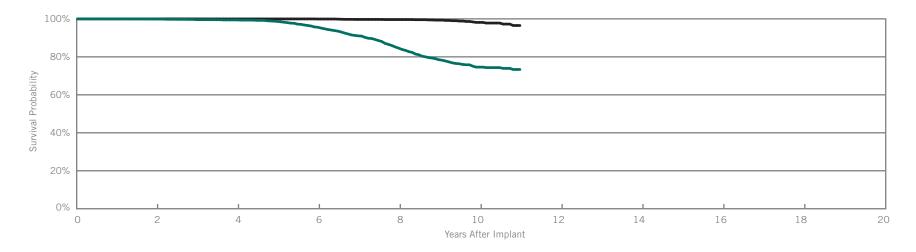
Year	2	4	6	8	10	at 140 months		
Survival Probability	99.95%	99.91%	99.82%	99.82%	99.60%	98.69%		
± 1 standard error	0.02%	0.03%	0.04%	0.04%	0.10%	0.35%		



Integrity[™] ADx DR Model 5366

US Regulatory Approval	May 2003
Registered US Implants	8,075
Estimated Active US Implants	1,749
Estimated Longevity	6.9 Years
Normal Battery Depletion	317
Number of US Advisories	None

	w/ Cor	unctions npromised herapy	w/o Co	functions mpromised herapy	
	Qty	Rate	Qty	Rate	
Electrical Component	0	0.00%	7	0.09%	
Electrical Interconnect	0	0.00%	0	0.00%	
Battery	0	0.00%	0	0.00%	
Software/Firmware	0	0.00%	1	0.01%	
Mechanical	0	0.00%	0	0.00%	
Possible Early Battery Depletion	0	0.00%	1	0.01%	
Other	0	0.00%	10	0.12%	
Total	0	0.00%	19	0.24%	



Including Normal Battery Depletion

Year	2	4	6	8	10	at 132 months		
Survival Probability	99.94%	99.45%	95.58%	84.59%	74.59%	73.35%		
± 1 standard error	0.03%	0.10%	0.30%	0.57%	0.85%	0.99%		
Sample Size	6,820	5,420	4,250	3,100	1,090	220		

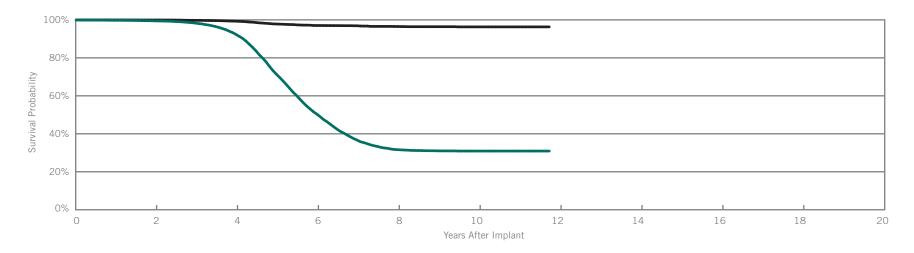
Year	2	4	6	8	10	at 132 months		
Survival Probability	100.00%	99.97%	99.92%	99.63%	98.14%	96.51%		
± 1 standard error	0.00%	0.02%	0.02%	0.10%	0.38%	0.79%		



Identity ADx[™] DR

US Regulatory Approval	March 2003	
Registered US Implants	54,043	Electrical Compone
Estimated Active US Implants	3,885	Electrical Interconn
Estimated Longevity	3.8 Years	Battery
Normal Battery Depletion	6,196	Software/Firmware
Number of US Advisories (see pgs. 296-300)	One	Mechanical
		Possible Early Batte

	w/ Co	functions mpromised herapy	Malfunctions w/o Compromis Therapy	
	Qty	Rate	Qty	Rate
Electrical Component	4	<0.01%	262	0.48%
Electrical Interconnect	1	<0.01%	0	0.00%
Battery	0	0.00%	0	0.00%
Software/Firmware	0	0.00%	2	<0.01%
Mechanical	0	0.00%	6	0.01%
Possible Early Battery Depletion	0	0.00%	11	0.02%
Other	0	0.00%	15	0.03%
Total	5	<0.01%	296	0.55%



Including Normal Battery Depletion

Year	2	4	6	8	10	at 141 months		
Survival Probability	99.46%	92.40%	50.39%	31.63%	30.91%	30.91%		
± 1 standard error	0.03%	0.13%	0.32%	0.34%	0.35%	0.35%		
Sample Size	44,210	32,530	13,860	4,570	2,050	220		

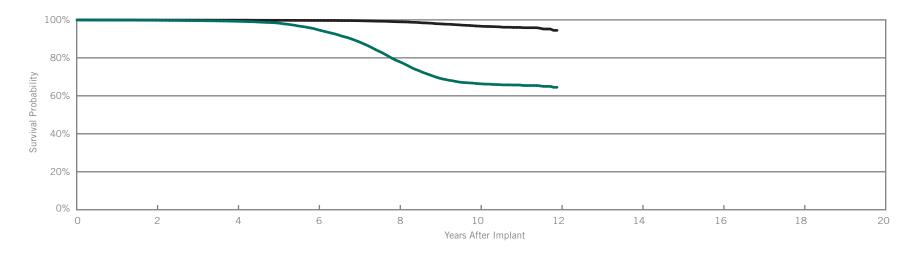
Year	2	4	6	8	10	at 141 months		
Survival Probability	99.93%	99.29%	97.04%	96.51%	96.31%	96.31%		
± 1 standard error	0.01%	0.04%	0.12%	0.15%	0.17%	0.17%		



Identity ADx [™]	ХL	DR	Model 5386
Identity ADx [™]	XL	DC	Model 5286

US Regulatory Approval	March 2003
Registered US Implants	67,331
Estimated Active US Implants	13,766
Estimated Longevity	6.9 Years
Normal Battery Depletion	3,265
Number of US Advisories (see pgs. 296-300)	One

Malfunctions w/ Compromised Therapy		Malfunctions w/o Compromised Therapy	
Qty	Rate	Qty	Rate
2	<0.01%	131	0.19%
0	0.00%	2	<0.01%
0	0.00%	0	0.00%
0	0.00%	7	0.01%
0	0.00%	10	0.01%
0	0.00%	6	<0.01%
0	0.00%	83	0.12%
2	<0.01%	239	0.35%
	w/ Con T Qty 2 0 0 0 0 0 0 0 0 0 0 0 0	W/ Compromised Therapy Qty Rate 2 <0.01%	w/ Compromised Therapy w/o Co TI Qty Rate Qty 2 <0.01%



Including Normal Battery Depletion

Year	2	4	6	8	10	at 143 months		
Survival Probability	99.78%	99.25%	94.81%	78.16%	66.35%	64.48%		
± 1 standard error	0.02%	0.04%	0.11%	0.24%	0.32%	0.55%		
Sample Size	56,570	44,850	33,770	21,920	7,800	240		

Year	2	4	6	8	10	at 143 months		
Survival Probability	99.90%	99.85%	99.70%	98.98%	96.69%	94.47%		
± 1 standard error	0.01%	0.02%	0.03%	0.06%	0.16%	0.66%		



20%

0%

0

1

Actively Monitored Study Data

Identity ADx[™] XL DR

odel 5386				Mali w/ Cor T	functions mpromised herapy	w/o Co	functions mpromised herapy
S Regulatory Approval	March 2003	Qualifying Complications		Qty	Rate	Qty	Rate
umber of Devices Enrolled in Study	102	None Reported	Electrical Component	0	0.00%	0	0.00%
ctive Devices Enrolled in Study	0		Electrical Interconnect	0	0.00%	0	0.00%
umulative Months of Follow-up	3,251		Battery	0	0.00%	0	0.00%
timated Longevity	6.9 Years		Software/Firmware	0	0.00%	0	0.00%
			Mechanical	0	0.00%	0	0.00%
			Possible Early Battery Depletion	0	0.00%	0	0.00%
			Other	0	0.00%	0	0.00%
			Total	0	0.00%	0	0.00%
80%]
							-

Year	1	2	at 34 months			
Survival Probability	100.00%	100.00%	100.00%			
± 1 standard error	0.00%	0.00%	0.00%			
Sample Size	100	80	50			

5

Years After Implant

6

3

4

2



10

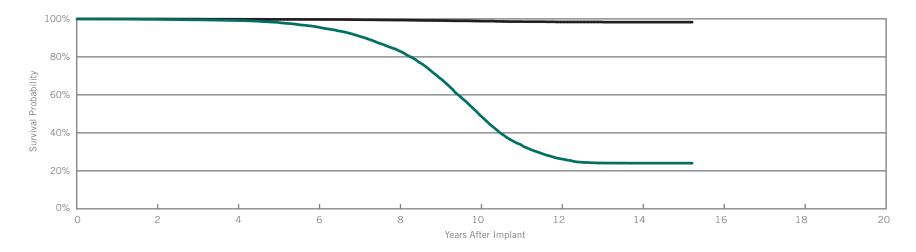
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ntegrity™ AFx DR odels 5342 & 5346						
(5342) April 2000						
(5346) July 2001	Elec					
47,441	Elec					
1,961	Batt					
6.3 Years	Soft					
4,610	Mec					
None	Pos					
	(5346) July 2001 47,441 1,961 6.3 Years 4,610					

	w/ Co	Malfunctions w/ Compromised Therapy		functions mpromised herapy
	Qty	Rate	Qty	Rate
Electrical Component	2	<0.01%	92	0.19%
Electrical Interconnect	3	<0.01%	1	<0.01%
Battery	0	0.00%	2	<0.01%
Software/Firmware	0	0.00%	0	0.00%
Mechanical	1	<0.01%	3	<0.01%
Possible Early Battery Depletion	0	0.00%	0	0.00%
Other	0	0.00%	5	0.01%
Total	6	0.01%	103	0.22%



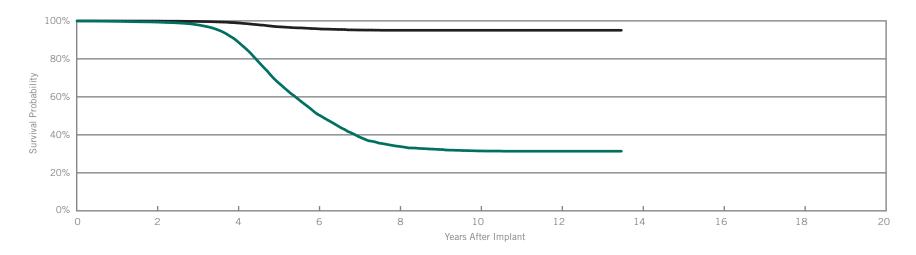
Including Normal Battery Depletion

Year	2	4	6	8	10	12	14	at 183 months	
Survival Probability	99.73%	99.14%	95.70%	83.23%	49.40%	26.34%	24.04%	24.04%	
± 1 standard error	0.02%	0.05%	0.11%	0.25%	0.40%	0.39%	0.39%	0.39%	
Sample Size	40,340	33,110	25,740	17,210	8,340	3,340	1,440	240	

Year	2	4	6	8	10	12	14	at 183 months	
Survival Probability	99.92%	99.81%	99.70%	99.36%	98.82%	98.38%	98.27%	98.27%	
± 1 standard error	0.01%	0.02%	0.03%	0.05%	0.09%	0.14%	0.16%	0.16%	



ldentity™ Model 5370			Mal w/ Co	functions mpromised herapy	w/o Co	functions mpromised herapy
US Regulatory Approval	November 2001		Qty	Rate	Qty	Rate
Registered US Implants	58,365	Electrical Component	3	<0.01%	398	0.68%
Estimated Active US Implants	2,258	Electrical Interconnect	2	<0.01%	2	<0.01%
Estimated Longevity	3.8 Years	Battery	0	0.00%	0	0.00%
Normal Battery Depletion	6,068	Software/Firmware	0	0.00%	1	<0.01%
Number of US Advisories (see pgs. 296-300)	One	Mechanical	0	0.00%	5	<0.01%
		Possible Early Battery Depletion	0	0.00%	12	0.02%
		Other	0	0.00%	12	0.02%
		Total	5	<0.01%	430	0.74%



Including Normal Battery Depletion

Year	2	4	6	8	10	12	at 162 months		
Survival Probability	99.37%	89.46%	50.74%	33.95%	31.53%	31.38%	31.38%		
± 1 standard error	0.03%	0.15%	0.32%	0.37%	0.38%	0.38%	0.38%		
Sample Size	48,150	35,200	12,640	4,050	2,360	1,400	230		

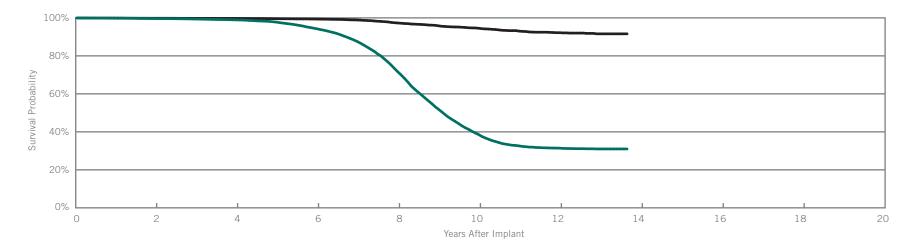
Year	2	4	6	8	10	12	at 162 months		
Survival Probability	99.88%	98.94%	95.84%	95.05%	95.05%	95.05%	95.05%		
± 1 standard error	0.01%	0.05%	0.14%	0.18%	0.18%	0.18%	0.18%		



Identity[™] XL Model 5376

US Regulatory Approval	November 2001
Registered US Implants	51,506
Estimated Active US Implants	4,637
Estimated Longevity	6.9 Years
Normal Battery Depletion	5,315
Number of US Advisories (see pgs. 296-300)	One

	w/ Co	functions mpromised herapy	Malfunctions w/o Compromis Therapy	
	Qty	Rate	Qty	Rate
Electrical Component	2	<0.01%	311	0.60%
Electrical Interconnect	4	<0.01%	2	<0.01%
Battery	0	0.00%	0	0.00%
Software/Firmware	0	0.00%	12	0.02%
Mechanical	2	<0.01%	5	<0.01%
Possible Early Battery Depletion	0	0.00%	5	<0.01%
Other	0	0.00%	77	0.15%
Total	8	0.02%	412	0.80%



Including Normal Battery Depletion

Year	2	4	6	8	10	12	at 164 months		
Survival Probability	99.64%	98.94%	94.26%	71.61%	38.54%	31.42%	31.00%		
± 1 standard error	0.03%	0.05%	0.13%	0.29%	0.35%	0.36%	0.37%		
Sample Size	43,960	35,480	27,170	18,160	7,970	2,690	220		

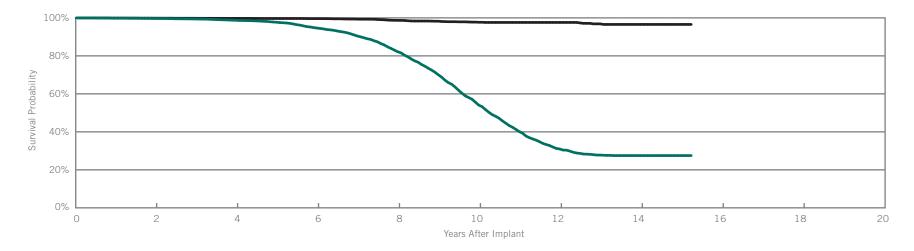
Year	2	4	6	8	10	12	at 164 months		
Survival Probability	99.81%	99.71%	99.37%	97.31%	94.53%	92.20%	91.60%		
± 1 standard error	0.02%	0.03%	0.04%	0.11%	0.19%	0.31%	0.38%		



Entity[™] DR Model 5326 Entity[™] DC Model 5226

US Regulatory Approval	June 1999
Registered US Implants	21,828
Estimated Active US Implants	710
Estimated Longevity	6.3 Years
Normal Battery Depletion	1,546
Number of US Advisories	None

	w/ Co	functions mpromised herapy	w/o Co	functions ompromised herapy
	Qty	Rate	Qty	Rate
Electrical Component	1	<0.01%	65	0.30%
Electrical Interconnect	2	<0.01%	2	<0.01%
Battery	0	0.00%	1	<0.01%
Software/Firmware	0	0.00%	1	<0.01%
Mechanical	0	0.00%	1	<0.01%
Possible Early Battery Depletion	0	0.00%	1	<0.01%
Other	0	0.00%	2	<0.01%
Total	3	0.01%	73	0.33%



Including Normal Battery Depletion

Year	2	4	6	8	10	12	14	at 183 months	
Survival Probability	99.66%	98.73%	94.65%	82.16%	54.07%	30.97%	27.51%	27.51%	
± 1 standard error	0.04%	0.09%	0.20%	0.41%	0.66%	0.71%	0.71%	0.71%	
Sample Size	17,840	14,050	10,280	6,320	3,000	1,280	560	200	

Year	2	4	6	8	10	12	14	at 183 months	
Survival Probability	99.85%	99.74%	99.60%	98.68%	97.69%	97.60%	96.55%	96.55%	
± 1 standard error	0.03%	0.04%	0.05%	0.13%	0.20%	0.22%	0.43%	0.43%	



US Regulatory Approval

Registered US Implants

Normal Battery Depletion

Estimated Longevity

Estimated Active US Implants

Number of US Advisories (see pgs. 296-300)

Customer Reported Performance Data

Affinity [™]	DR	Models 5330 & 5331
Affinity [™]	DC	Model 5230

(5330) January 1999 (5230/5331) June 1999

65,713

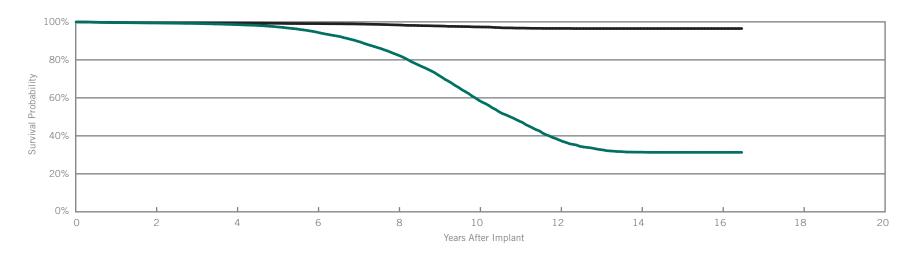
6.3 Years

2,338

4,543

One

	w/ Co	functions mpromised herapy	w/o Co	13 0.02% 6 <0.01% 2 <0.01% 5 <0.01% 1 <0.01%	
	Qty	Rate	Qty	Rate	
Electrical Component	5	<0.01%	283	0.43%	
Electrical Interconnect	9	0.01%	13	0.02%	
Battery	0	0.00%	6	<0.01%	
Software/Firmware	0	0.00%	2	<0.01%	
Mechanical	0	0.00%	5	<0.01%	
Possible Early Battery Depletion	0	0.00%	1	<0.01%	
Other	1	<0.01%	5	<0.01%	
Total	15	0.02%	315	0.48%	



Including Normal Battery Depletion

Year	2	4	6	8	10	12	14	16	at 198 months	
Survival Probability	99.42%	98.57%	94.57%	82.56%	58.74%	37.69%	31.41%	31.31%	31.31%	
± 1 standard error	0.03%	0.05%	0.11%	0.22%	0.36%	0.42%	0.43%	0.43%	0.43%	
Sample Size	55,290	44,820	33,820	21,140	9,920	4,370	2,290	1,020	220	

Year	2	4	6	8	10	12	14	16	at 198 months	
Survival Probability	99.56%	99.36%	99.08%	98.39%	97.35%	96.55%	96.49%	96.49%	96.49%	
± 1 standard error	0.03%	0.03%	0.04%	0.07%	0.11%	0.16%	0.17%	0.17%	0.17%	



SUMMARY INFORMATION

Dual-Chamber Pacemakers



Pacemakers

Survival Summary

						Survival P	robability				
Models	Family	1 year	2 year	3 year	4 year	5 year	6 year	7 year	8 year	9 year	10 year
PM2160	Endurity [™] DR	99.76%									
PM2240	Assurity™ DR RF	99.94%									
PM2210	Accent [™] DR RF	99.93%	99.87%	99.78%	99.62%	99.38%	98.96%				
PM2110	Accent [™] DR	99.97%	99.93%	99.87%	99.67%	99.44%	99.27%				
5820	Zephyr™ DR	99.85%	99.75%	99.04%	93.43%	80.61%	75.83%	74.71%	74.51%		
5810	Victory [™] DR	99.87%	99.75%	98.71%	89.78%	69.26%	54.00%	47.38%	46.41%	46.41%	
5826	Zephyr™ XL DR	99.91%	99.84%	99.75%	99.48%	98.82%	98.07%	97.60%	96.83%		
5816	Victory [™] XL DR	99.91%	99.84%	99.67%	99.34%	98.09%	94.27%	88.98%	87.53%	86.87%	
5356/5357/5256	Verity ADx™ XL DR/ DR(M/S) / DC	99.89%	99.83%	99.69%	99.47%	98.87%	96.85%	94.59%	91.92%	89.54%	88.74%
5366	Integrity [™] ADx XL DR	100.00%	99.94%	99.58%	99.45%	98.67%	95.58%	91.06%	84.59%	78.47%	74.59%
5380	ldentity ADx™ DR	99.77%	99.46%	98.28%	92.40%	71.45%	50.39%	36.65%	31.63%	31.00%	30.91%
5386/5286	Identity ADx™ XL DR/DC	99.88%	99.78%	99.58%	99.25%	98.37%	94.81%	88.63%	78.16%	69.34%	66.35%
5342/5346	Integrity [™] AFx DR	99.87%	99.73%	99.49%	99.14%	98.18%	95.70%	91.07%	83.23%	69.05%	49.40%
5370	Identity™	99.75%	99.37%	97.99%	89.46%	67.89%	50.74%	39.13%	33.95%	32.31%	31.53%
5376	Identity [™] XL	99.79%	99.64%	99.39%	98.94%	97.76%	94.26%	87.53%	71.61%	51.96%	38.54%
5326/5226	Entity [™] DR/DC	99.79%	99.66%	99.40%	98.73%	97.70%	94.65%	90.45%	82.16%	70.06%	54.07%
5330/5331/5230	Affinity [™] DR/DC	99.64%	99.42%	99.15%	98.57%	97.41%	94.57%	89.84%	82.56%	72.00%	58.74%



Pacemakers

Survival Summary

						Survival P	robability				
Models	Family	1 year	2 year	3 year	4 year	5 year	6 year	7 year	8 year	9 year	10 year
PM2160	Endurity [™] DR	99.76%									
PM2240	Assurity™ DR RF	99.94%									
PM2210	Accent [™] DR RF	99.94%	99.90%	99.84%	99.79%	99.74%	99.68%				
PM2110	Accent [™] DR	99.97%	99.95%	99.93%	99.93%	99.93%	99.93%				
5820	Zephyr™ DR	99.97%	99.96%	99.93%	99.62%	99.19%	98.87%	98.62%	98.62%		
5810	Victory [™] DR	99.98%	99.93%	99.70%	99.22%	97.85%	97.50%	97.08%	96.53%	96.53%	
5826	Zephyr™ XL DR	99.96%	99.93%	99.92%	99.89%	99.82%	99.74%	99.62%	99.29%		
5816	Victory [™] XL DR	99.97%	99.95%	99.91%	99.86%	99.81%	99.74%	99.53%	99.23%	98.90%	
5356/5357/5256	Verity ADx™ XL DR/ DR(M/S) / DC	99.96%	99.95%	99.93%	99.91%	99.89%	99.82%	99.82%	99.82%	99.76%	99.60%
5366	Integrity [™] ADx XL DR	100.00%	100.00%	99.97%	99.97%	99.97%	99.92%	99.70%	99.63%	99.32%	98.14%
5380	ldentity ADx™ DR	99.96%	99.93%	99.75%	99.29%	97.83%	97.04%	96.90%	96.51%	96.40%	96.31%
5386/5286	Identity ADx™ XL DR/DC	99.92%	99.90%	99.88%	99.85%	99.78%	99.70%	99.55%	98.98%	97.95%	96.69%
5342/5346	Integrity [™] AFx DR	99.96%	99.92%	99.86%	99.81%	99.73%	99.70%	99.57%	99.36%	99.12%	98.82%
5370	Identity™	99.93%	99.88%	99.71%	98.94%	96.93%	95.84%	95.19%	95.05%	95.05%	95.05%
5376	Identity [™] XL	99.90%	99.81%	99.76%	99.71%	99.56%	99.37%	98.89%	97.31%	95.85%	94.53%
5326/5226	Entity [™] DR/DC	99.91%	99.85%	99.79%	99.74%	99.67%	99.60%	99.32%	98.68%	98.24%	97.69%
5330/5331/5230	Affinity [™] DR/DC	99.69%	99.56%	99.46%	99.36%	99.24%	99.08%	98.87%	98.39%	97.85%	97.35%



U.S. Malfunction Summary

									U	.S. Malfu	nctions w/	Comprom	ised Thera	ру					
		Registered	Percent Returned for		trical ponent		ctrical connect	Ba	ttery		ware/ ware	Mech	anical	Ba	le Early ttery letion	Of	ther	Т	otal
Models	Family	US Implants	Analysis	Qty.	Rate	Qty.	Rate	Qty.	Rate	Qty.	Rate	Qty.	Rate	Qty.	Rate	Qty.	Rate	Qty.	Rate
PM2160	Endurity™ DR	7,024	0.40%	0	0.00%	0	0.00%	0	0.00%	0	0.00%	0	0.00%	0	0.00%	0	0.00%	0	0.00%
PM2240	Assurity™ DR RF	82,203	0.30%	0	0.00%	0	0.00%	0	0.00%	0	0.00%	0	0.00%	0	0.00%	0	0.00%	0	0.00%
PM2210	Accent [™] DR RF	242,999	2.70%	15	<0.01%	6	<0.01%	0	0.00%	0	0.00%	0	0.00%	7	<0.01%	5	<0.01%	33	0.01%
PM2110	Accent [™] DR	48,899	2.70%	1	<0.01%	2	<0.01%	0	0.00%	0	0.00%	0	0.00%	0	0.00%	0	0.00%	3	<0.01%
5820	Zephyr [™] DR	52,880	8.20%	2	<0.01%	0	0.00%	0	0.00%	0	0.00%	0	0.00%	0	0.00%	0	0.00%	2	<0.01%
5810	Victory [™] DR	26,306	16.80%	1	<0.01%	0	0.00%	0	0.00%	0	0.00%	0	0.00%	0	0.00%	0	0.00%	1	<0.01%
5826	Zephyr™ XL DR	112,010	6.00%	1	<0.01%	4	<0.01%	0	0.00%	0	0.00%	0	0.00%	0	0.00%	1	<0.01%	6	<0.01%
5816	Victory [™] XL DR	62,639	11.50%	2	<0.01%	0	0.00%	0	0.00%	0	0.00%	0	0.00%	0	0.00%	1	<0.01%	3	<0.01%
5356/5357/5256	Verity ADx [™] XL DR/ DR(M/S) / DC	17,297	6.60%	0	0.00%	1	<0.01%	0	0.00%	0	0.00%	0	0.00%	0	0.00%	0	0.00%	1	<0.01%
5366	Integrity [™] ADx XL DR	8,075	10.90%	0	0.00%	0	0.00%	0	0.00%	0	0.00%	0	0.00%	0	0.00%	0	0.00%	0	0.00%
5380	Identity ADx [™] DR	54,043	15.60%	4	<0.01%	1	<0.01%	0	0.00%	0	0.00%	0	0.00%	0	0.00%	0	0.00%	5	<0.01%
5386/5286	Identity ADx™ XL DR/DC	67,331	13.10%	2	<0.01%	0	0.00%	0	0.00%	0	0.00%	0	0.00%	0	0.00%	0	0.00%	2	<0.01%
5342/5346	Integrity [™] AFx DR	47,441	14.20%	2	<0.01%	3	<0.01%	0	0.00%	0	0.00%	1	<0.01%	0	0.00%	0	0.00%	6	0.01%
5370	Identity™	58,365	13.70%	3	<0.01%	2	<0.01%	0	0.00%	0	0.00%	0	0.00%	0	0.00%	0	0.00%	5	<0.01%
5376	Identity™ XL	51,506	17.50%	2	<0.01%	4	<0.01%	0	0.00%	0	0.00%	2	<0.01%	0	0.00%	0	0.00%	8	0.02%
5326/5226	Entity [™] DR/DC	21,828	11.10%	1	<0.01%	2	<0.01%	0	0.00%	0	0.00%	0	0.00%	0	0.00%	0	0.00%	3	0.01%
5330/5331/5230	Affinity [™] DR/DC	65,713	10.90%	5	<0.01%	9	0.01%	0	0.00%	0	0.00%	0	0.00%	0	0.00%	1	<0.01%	15	0.02%



U.S. Malfunction Summary

									U.	S. Malfur	nctions w/o	Comprom	nised Thera	ру					
		Registered	Percent Returned for		trical ponent		trical onnect	Bat	ttery		ware/ nware	Mech	nanical	Ba	le Early ttery letion	Of	ther	Te	otal
Models	Family	US Implants	Analysis	Qty.	Rate	Qty.	Rate	Qty.	Rate	Qty.	Rate	Qty.	Rate	Qty.	Rate	Qty.	Rate	Qty.	Rate
PM2160	Endurity™ DR	7,024	0.40%	0	0.00%	0	0.00%	0	0.00%	0	0.00%	5	0.07%	0	0.00%	1	0.01%	6	0.09%
PM2240	Assurity™ DR RF	82,203	0.30%	0	0.00%	0	0.00%	0	0.00%	0	0.00%	15	0.02%	0	0.00%	3	<0.01%	18	0.02%
PM2210	Accent [™] DR RF	242,999	2.70%	33	0.01%	30	0.01%	0	0.00%	2	<0.01%	10	<0.01%	17	<0.01%	31	0.01%	123	0.05%
PM2110	Accent [™] DR	48,899	2.70%	3	<0.01%	0	0.00%	0	0.00%	3	<0.01%	3	<0.01%	1	<0.01%	0	0.00%	10	0.02%
5820	Zephyr™ DR	52,880	8.20%	34	0.06%	0	0.00%	0	0.00%	9	0.02%	2	<0.01%	1	<0.01%	47	0.09%	93	0.18%
5810	Victory [™] DR	26,306	16.80%	89	0.34%	0	0.00%	0	0.00%	8	0.03%	2	<0.01%	17	0.06%	28	0.11%	144	0.55%
5826	Zephyr™ XL DR	112,010	6.00%	17	0.02%	0	0.00%	0	0.00%	10	<0.01%	9	<0.01%	3	<0.01%	66	0.06%	105	0.09%
5816	Victory [™] XL DR	62,639	11.50%	25	0.04%	0	0.00%	0	0.00%	6	<0.01%	7	0.01%	5	<0.01%	57	0.09%	100	0.16%
5356/5357/5256	Verity ADx [™] XL DR/ DR(M/S) / DC	17,297	6.60%	9	0.05%	0	0.00%	1	<0.01%	0	0.00%	0	0.00%	1	<0.01%	5	0.03%	16	0.09%
5366	Integrity [™] ADx XL DR	8,075	10.90%	7	0.09%	0	0.00%	0	0.00%	1	0.01%	0	0.00%	1	0.01%	10	0.12%	19	0.24%
5380	Identity ADx [™] DR	54,043	15.60%	262	0.48%	0	0.00%	0	0.00%	2	<0.01%	6	0.01%	11	0.02%	15	0.03%	296	0.55%
5386/5286	Identity ADx™ XL DR/DC	67,331	13.10%	131	0.19%	2	<0.01%	0	0.00%	7	0.01%	10	0.01%	6	<0.01%	83	0.12%	239	0.35%
5342/5346	Integrity™ AFx DR	47,441	14.20%	92	0.19%	1	<0.01%	2	<0.01%	0	0.00%	3	<0.01%	0	0.00%	5	0.01%	103	0.22%
5370	Identity™	58,365	13.70%	398	0.68%	2	<0.01%	0	0.00%	1	<0.01%	5	<0.01%	12	0.02%	12	0.02%	430	0.74%
5376	Identity™ XL	51,506	17.50%	311	0.60%	2	<0.01%	0	0.00%	12	0.02%	5	<0.01%	5	<0.01%	77	0.15%	412	0.80%
5326/5226	Entity™ DR/DC	21,828	11.10%	65	0.30%	2	<0.01%	1	<0.01%	1	<0.01%	1	<0.01%	1	<0.01%	2	<0.01%	73	0.33%
5330/5331/5230	Affinity [™] DR/DC	65,713	10.90%	283	0.43%	13	0.02%	6	<0.01%	2	<0.01%	5	<0.01%	1	<0.01%	5	<0.01%	315	0.48%



Worldwide Malfunction Summary

									Worl	dwide Ma	Ifunctions	w/ Compro	omised The	erapy					
		Worldwide	Percent Returned for		trical onent		trical onnect	Bat	tery		ware/ ware	Mech	anical	Bat	le Early tery etion	Ot	her	То	otal
Models	Family	Sales	Analysis	Qty.	Rate	Qty.	Rate	Qty.	Rate	Qty.	Rate	Qty.	Rate	Qty.	Rate	Qty.	Rate	Qty.	Rate
PM2160	Endurity™ DR	42,573	0.44%	0	0.00%	0	0.00%	0	0.00%	0	0.00%	0	0.00%	0	0.00%	0	0.00%	0	0.00%
PM2240	Assurity™ DR RF	92,473	0.82%	0	0.00%	0	0.00%	0	0.00%	0	0.00%	0	0.00%	0	0.00%	0	0.00%	0	0.00%
PM2210	Accent [™] DR RF	246,809	3.28%	15	<0.01%	6	<0.01%	0	0.00%	0	0.00%	0	0.00%	6	<0.01%	5	<0.01%	32	0.01%
PM2110	Accent [™] DR	49,742	3.19%	1	<0.01%	2	<0.01%	0	0.00%	0	0.00%	0	0.00%	0	0.00%	0	0.00%	3	<0.01%

									World	dwide Malf	functions v	v/o Compi	omised Th	erapy					
		Worldwide	Percent Returned for	Elec: Comp	trical onent		trical onnect	Bat	tery		ware/ ware	Mech	anical	Bat	le Early tery etion	Ot	her	То	otal
Models	Family	Sales	Analysis	Qty.	Rate	Qty.	Rate	Qty.	Rate	Qty.	Rate	Qty.	Rate	Qty.	Rate	Qty.	Rate	Qty.	Rate
PM2160	Endurity™ DR	42,573	0.44%	1	<0.01%	0	0.00%	0	0.00%	0	0.00%	7	0.02%	0	0.00%	2	<0.01%	10	0.02%
PM2240	Assurity™ DR RF	92,473	0.82%	1	<0.01%	0	0.00%	0	0.00%	0	0.00%	15	0.02%	0	0.00%	2	<0.01%	18	0.02%
PM2210	Accent [™] DR RF	246,809	3.28%	35	0.01%	31	0.01%	0	0.00%	2	<0.01%	10	<0.01%	17	<0.01%	30	0.01%	125	0.05%
PM2110	Accent [™] DR	49,742	3.19%	3	<0.01%	0	0.00%	0	0.00%	3	<0.01%	3	<0.01%	1	<0.01%	0	0.00%	10	0.02%



Actively Monitored Study Data Summary

Qualifying Complications

					Pericardial Ba		mature attery pletion Skin Erosion		Erosion	Total			
Models	Enrolled	Enrolled	Follow-Up	Qty.	Rate	Qty.	Rate	Qty.	Rate	Qty.	Rate	Qty.	Rate
PM2210	1,773	418	47,446	0	0.00%	0	0.00%	1	0.06%	0	0.00%	1	0.06%
PM2110	226	79	7,413	0	0.00%	0	0.00%	0	0.00%	0	0.00%	0	0.00%
5820	283	19	7,659	0	0.00%	0	0.00%	0	0.00%	1	0.35%	1	0.35%
5826	1,517	22	47,564	0	0.00%	0	0.00%	0	0.00%	0	0.00%	0	0.00%
5816	332	0	10,627	0	0.00%	0	0.00%	0	0.00%	0	0.00%	0	0.00%
5386	102	0	3,251	0	0.00%	0	0.00%	0	0.00%	0	0.00%	0	0.00%

Malfunctions

			Malfunctions w/ Compromised Therapy															
	Number of Devices			Electrical Component		Electrical Interconnect		Battery		Software/ Firmware		Mechanical		Possible Early Battery Depletion		Other		otal
Models	Enrolled	Analysis	Qty.	Rate	Qty.	Rate	Qty.	Rate	Qty.	Rate	Qty.	Rate	Qty.	Rate	Qty.	Rate	Qty.	Rate
PM2210	1,773	4.20%	0	0.00%	0	0.00%	0	0.00%	0	0.00%	0	0.00%	0	0.00%	0	0.00%	0	0.00%
PM2110	226	3.50%	0	0.00%	0	0.00%	0	0.00%	0	0.00%	0	0.00%	0	0.00%	0	0.00%	0	0.00%
5820	283	17.00%	0	0.00%	0	0.00%	0	0.00%	0	0.00%	0	0.00%	0	0.00%	0	0.00%	0	0.00%
5826	1,517	6.90%	0	0.00%	0	0.00%	0	0.00%	0	0.00%	0	0.00%	0	0.00%	0	0.00%	0	0.00%
5816	332	5.10%	0	0.00%	0	0.00%	0	0.00%	0	0.00%	0	0.00%	0	0.00%	0	0.00%	0	0.00%
5386	102	2.90%	0	0.00%	0	0.00%	0	0.00%	0	0.00%	0	0.00%	0	0.00%	0	0.00%	0	0.00%

			Malfunctions w/o Compromised Therapy															
Number of Devices		Electrical Component		Electrical Interconnect		Battery		Software/ Firmware		Mechanical		Possible Early Battery Depletion		Other		Total		
Models	Enrolled	Analysis	Qty.	Rate	Qty.	Rate	Qty.	Rate	Qty.	Rate	Qty.	Rate	Qty.	Rate	Qty.	Rate	Qty.	Rate
PM2210	1,773	4.20%	1	0.06%	1	0.06%	0	0.00%	0	0.00%	0	0.00%	0	0.00%	0	0.00%	2	0.11%
PM2110	226	3.50%	0	0.00%	0	0.00%	0	0.00%	0	0.00%	0	0.00%	0	0.00%	0	0.00%	0	0.00%
5820	283	17.00%	0	0.00%	0	0.00%	0	0.00%	0	0.00%	0	0.00%	0	0.00%	0	0.00%	0	0.00%
5826	1,517	6.90%	1	0.07%	0	0.00%	0	0.00%	0	0.00%	0	0.00%	0	0.00%	0	0.00%	1	0.07%
5816	332	5.10%	0	0.00%	0	0.00%	0	0.00%	0	0.00%	0	0.00%	0	0.00%	0	0.00%	0	0.00%
5386	102	2.90%	0	0.00%	0	0.00%	0	0.00%	0	0.00%	0	0.00%	0	0.00%	0	0.00%	0	0.00%

A list of complications can be found on page 15. Definitions of malfunction categories can be found on pages 7-8.

PACEMAKERS

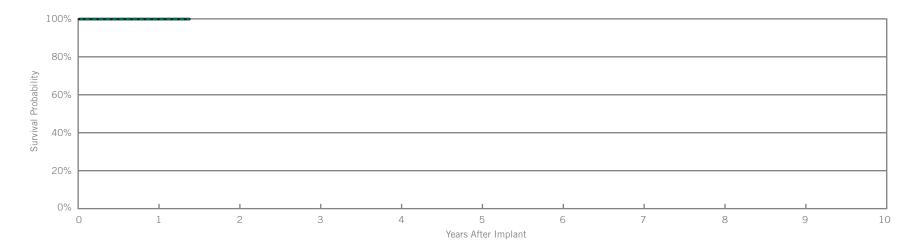
Single-Chamber



Endurity[™] VR Model PM1160

Manala 0014
March 2014
1,787
1,599
14.6 Years
0
None

	w/ Cor	unctions npromised nerapy	Malfunctions w/o Compromised Therapy		
	Qty	Rate	Qty	Rate	
Electrical Component	0	0.00%	0	0.00%	
Electrical Interconnect	0	0.00%	0	0.00%	
Battery	0	0.00%	0	0.00%	
Software/Firmware	0	0.00%	0	0.00%	
Mechanical	0	0.00%	1	0.06%	
Possible Early Battery Depletion	0	0.00%	0	0.00%	
Other	0	0.00%	0	0.00%	
Total	0	0.00%	1	0.06%	



Including Normal Battery Depletion

Year	1	at 17 months				
Survival Probability	99.88%	99.88%				
± 1 standard error	0.08%	0.08%				
Sample Size	1,180	220				

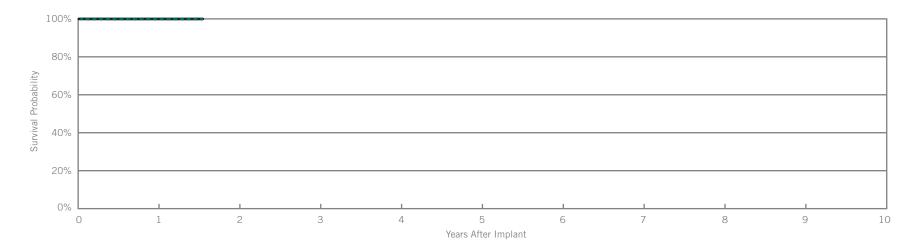
Year	1	at 17 months				
Survival Probability	99.88%	99.88%				
± 1 standard error	0.08%	0.08%				



Assurity[™] VR Model PM1240

US Regulatory Approval	March 2014
Registered US Implants	12,265
Estimated Active US Implants	11,029
Estimated Longevity	14.1 Years
Normal Battery Depletion	0
Number of US Advisories	None

	w/ Cor	unctions npromised herapy	Malfunctions w/o Compromised Therapy		
	Qty	Rate	Qty	Rate	
Electrical Component	0	0.00%	1	<0.01%	
Electrical Interconnect	0	0.00%	0	0.00%	
Battery	0	0.00%	0	0.00%	
Software/Firmware	0	0.00%	0	0.00%	
Mechanical	0	0.00%	1	<0.01%	
Possible Early Battery Depletion	0	0.00%	0	0.00%	
Other	0	0.00%	0	0.00%	
Total	0	0.00%	2	0.02%	



Including Normal Battery Depletion

Year	1	at 19 months				
Survival Probability	99.96%	99.96%				
± 1 standard error	0.02%	0.02%				
Sample Size	7,560	270				

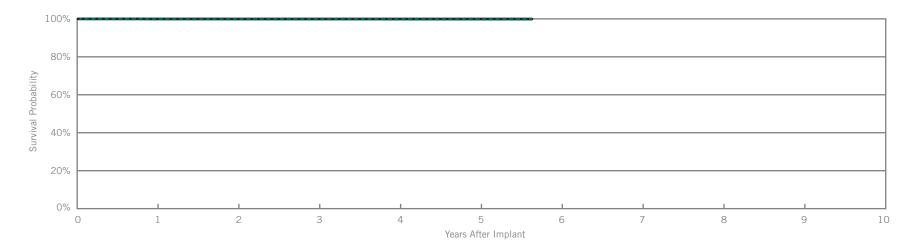
Year	1	at 19 months				
Survival Probability	99.96%	99.96%				
± 1 standard error	0.02%	0.02%				



Accent[™] SR Model PM1110

US Regulatory Approval	July 2009
Registered US Implants	13,587
Estimated Active US Implants	9,002
Estimated Longevity	12.9 Years
Normal Battery Depletion	4
Number of US Advisories	None

	w/ Cor	unctions npromised nerapy	w/o Co	functions ompromised herapy	
	Qty	Rate	Qty	Rate	
Electrical Component	0	0.00%	1	<0.01%	
Electrical Interconnect	0	0.00%	0	0.00%	
Battery	0	0.00%	0	0.00%	
Software/Firmware	0	0.00%	1	<0.01%	
Mechanical	0	0.00%	0	0.00%	
Possible Early Battery Depletion	0	0.00%	1	<0.01%	
Other	0	0.00%	0	0.00%	
Total	0	0.00%	3	0.02%	



Including Normal Battery Depletion

Year	1	2	3	4	5	at 68 months		
Survival Probability	99.94%	99.88%	99.88%	99.82%	99.82%	99.82%		
± 1 standard error	0.02%	0.03%	0.03%	0.05%	0.05%	0.05%		
Sample Size	12,500	10,060	7,130	4,230	1,900	240		

Year	1	2	3	4	5	at 68 months		
Survival Probability	99.96%	99.93%	99.93%	99.93%	99.93%	99.93%		
± 1 standard error	0.02%	0.02%	0.02%	0.02%	0.02%	0.02%		

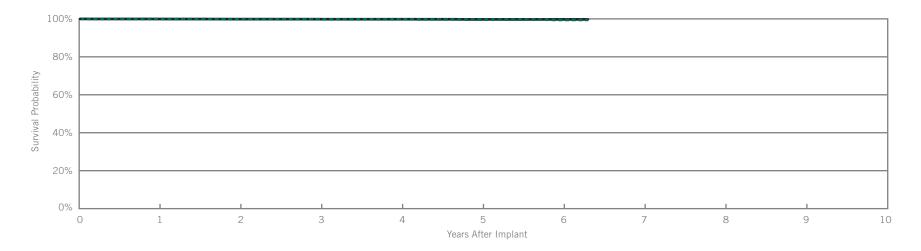


Accent[™] SR RF

Model	PM1210	

US Regulatory Approval	July 2009
Registered US Implants	39,809
Estimated Active US Implants	25,613
Estimated Longevity	10.9 Years
Normal Battery Depletion	11
Number of US Advisories	None

	w/ Co	functions mpromised herapy	w/o Co	functions ompromised herapy
	Qty	Rate	Qty	Rate
Electrical Component	1	<0.01%	7	0.02%
Electrical Interconnect	1	<0.01%	3	<0.01%
Battery	0	0.00%	1	<0.01%
Software/Firmware	0	0.00%	0	0.00%
Mechanical	0	0.00%	3	<0.01%
Possible Early Battery Depletion	2	<0.01%	2	<0.01%
Other	0	0.00%	7	0.02%
Total	4	0.01%	23	0.06%



Including Normal Battery Depletion

Year	1	2	3	4	5	6	at 76 months		
Survival Probability	99.89%	99.80%	99.78%	99.76%	99.61%	99.44%	99.44%		
± 1 standard error	0.02%	0.02%	0.03%	0.03%	0.06%	0.13%	0.13%		
Sample Size	36,550	29,430	21,200	13,350	7,190	2,690	280		

Year	1	2	3	4	5	6	at 76 months		
Survival Probability	99.93%	99.86%	99.84%	99.82%	99.73%	99.73%	99.73%		
± 1 standard error	0.01%	0.02%	0.02%	0.03%	0.05%	0.05%	0.05%		



Actively Monitored Study Data

Accent[™] SR RF

del PM1210	/1210			Malfunctions w/ Compromised Therapy		Malfunctions w/o Compromised Therapy			
JS Regulatory Approval	July 2009	Qualifying Complic	ations			Qty	Rate	Qty	Rate
Number of Devices Enrolled in Study	236	None Reported			Electrical Component	0	0.00%	0	0.00%
Active Devices Enrolled in Study	34				Electrical Interconnect	0	0.00%	0	0.00%
Cumulative Months of Follow-up	5,191				Battery	0	0.00%	0	0.00%
stimated Longevity	10.9 Years				Software/Firmware	0	0.00%	0	0.00%
					Mechanical	0	0.00%	0	0.00%
					Possible Early Battery Depletion	0	0.00%	0	0.00%
					Other	0	0.00%	0	0.00%
					Total	0	0.00%	0	0.00%
80%									-
60%									
40%									-
40% 20%									-
	I				 I				-

Years	Aftor	Imn	lant
IEars	AILEI	unp	Iant

Year	1	2	at 30 months				
Survival Probability	100.00%	100.00%	100.00%				
± 1 standard error	0.00%	0.00%	0.00%				
Sample Size	200	120	50				



Malfunctions w/o Compromised Therapy

Rate

0.02%

0.00%

0.00%

0.00%

0.00%

0.03%

0.05%

Qty

4

0

0

0

0

6

10

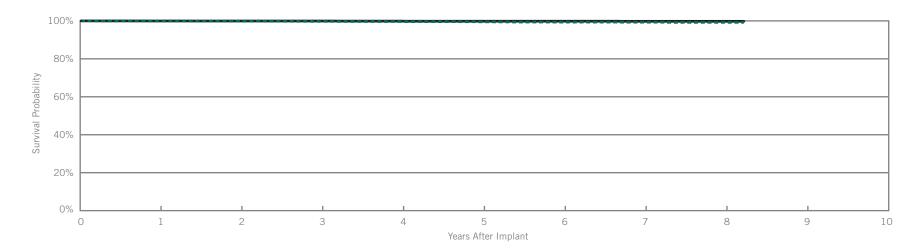
2

<0.01%

Zephyr[™] XL SR

Model 5626			w/ Cor	functions mpromised herapy
US Regulatory Approval	May 2007		Qty	Rate
Registered US Implants	20,619	Electrical Component	0	0.00%
Estimated Active US Implants	9,777	Electrical Interconnect	1	<0.01%
Estimated Longevity	15.8 Years	Battery	0	0.00%
Normal Battery Depletion	26	Software/Firmware	0	0.00%
Number of US Advisories	None	Mechanical	0	0.00%
		Possible Early Battery Depletion	0	0.00%
		Other	1	<0.01%

Total



Including Normal Battery Depletion

Year	1	2	3	4	5	6	7	8	at 99 months	
Survival Probability	99.92%	99.83%	99.73%	99.64%	99.48%	99.35%	99.30%	99.21%	99.21%	
± 1 standard error	0.02%	0.03%	0.04%	0.05%	0.06%	0.08%	0.08%	0.10%	0.10%	
Sample Size	18,840	15,830	13,540	11,570	9,800	7,870	4,960	1,800	260	

Year	1	2	3	4	5	6	7	8	at 99 months	
Survival Probability	99.95%	99.93%	99.93%	99.88%	99.83%	99.83%	99.78%	99.78%	99.78%	
± 1 standard error	0.02%	0.02%	0.02%	0.03%	0.04%	0.04%	0.05%	0.05%	0.05%	



Actively Monitored Study Data

Zephyr[™] XL SR

DHYF AL SR del 5626							w/ Co	functions mpromised herapy	w/o Co	functions mpromis herapy
S Regulatory Approval	May 2007	Qualifying Compli	cations				Qty	Rate	Qty	Rate
umber of Devices Enrolled in Study	230	None Reported				Electrical Component	0	0.00%	0	0.00%
ctive Devices Enrolled in Study	3					Electrical Interconnect	0	0.00%	0	0.00%
umulative Months of Follow-up	6,515					Battery	0	0.00%	0	0.00
stimated Longevity	15.8 Years					Software/Firmware	0	0.00%	0	0.00
						Mechanical	0	0.00%	0	0.00
						Possible Early Battery Depletion	0	0.00%	0	0.00
						Other	0	0.00%	0	0.00
						Total	0	0.00%	0	0.00
60%										-
40%										
60% 40% 20%										-
20%	i 1 2	 3	4	I 5	<u>і</u> б	7 8		- I 9	1	-

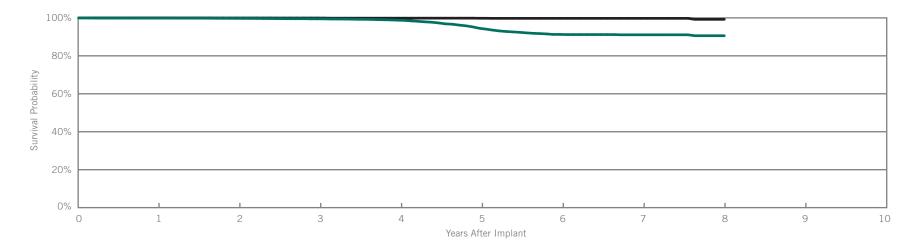
Year	1	2	3	at 41 months	
Survival Probability	100.00%	100.00%	100.00%	100.00%	
± 1 standard error	0.00%	0.00%	0.00%	0.00%	
Sample Size	220	180	120	50	



Zephyr[™] SR Model 5620

US Regulatory Approval	March 2007
Registered US Implants	16,974
Estimated Active US Implants	8,438
Estimated Longevity	8.8 Years
Normal Battery Depletion	176
Number of US Advisories	None

	w/ Cor	Malfunctions w/ Compromised Therapy		functions mpromised herapy
	Qty	Rate	Qty	Rate
Electrical Component	0	0.00%	4	0.02%
Electrical Interconnect	0	0.00%	0	0.00%
Battery	0	0.00%	0	0.00%
Software/Firmware	0	0.00%	2	0.01%
Mechanical	0	0.00%	0	0.00%
Possible Early Battery Depletion	0	0.00%	0	0.00%
Other	0	0.00%	4	0.02%
Total	0	0.00%	10	0.06%



Including Normal Battery Depletion

Year	1	2	3	4	5	6	7	8	
Survival Probability	99.87%	99.74%	99.49%	98.76%	94.53%	91.28%	91.08%	90.60%	
± 1 standard error	0.03%	0.04%	0.07%	0.11%	0.28%	0.41%	0.43%	0.54%	
Sample Size	15,160	12,060	9,590	7,310	5,230	3,370	1,750	200	

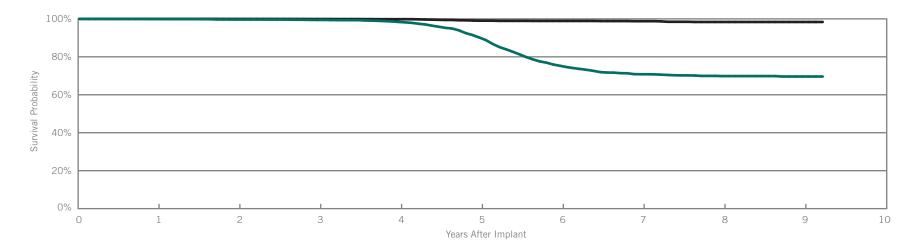
Year	1	2	3	4	5	6	7	8	
Survival Probability	99.99%	99.95%	99.93%	99.85%	99.80%	99.75%	99.75%	99.23%	
± 1 standard error	0.01%	0.02%	0.02%	0.04%	0.04%	0.06%	0.06%	0.38%	



Victory[™] SR Model 5610

US Regulatory Approval	December 2005
Registered US Implants	13,681
Estimated Active US Implants	2,655
Estimated Longevity	8.8 Years
Normal Battery Depletion	662
Number of US Advisories	None

	w/ Co	Malfunctions w/ Compromised Therapy		functions ompromised herapy
	Qty	Rate	Qty	Rate
Electrical Component	0	0.00%	23	0.17%
Electrical Interconnect	0	0.00%	0	0.00%
Battery	0	0.00%	0	0.00%
Software/Firmware	0	0.00%	1	<0.01%
Mechanical	0	0.00%	0	0.00%
Possible Early Battery Depletion	0	0.00%	1	<0.01%
Other	1	<0.01%	9	0.07%
Total	1	<0.01%	34	0.25%



Including Normal Battery Depletion

Year	1	2	3	4	5	6	7	8	9	at 111 months
Survival Probability	99.92%	99.66%	99.44%	98.40%	90.22%	75.28%	70.82%	69.85%	69.62%	69.62%
± 1 standard error	0.02%	0.06%	0.07%	0.13%	0.35%	0.55%	0.61%	0.62%	0.65%	0.65%
Sample Size	12,340	10,130	8,540	7,260	6,070	4,690	3,260	2,020	880	220

Year	1	2	3	4	5	6	7	8	9	at 111 months
Survival Probability	99.98%	99.96%	99.91%	99.83%	99.05%	98.91%	98.78%	98.37%	98.37%	98.37%
± 1 standard error	0.01%	0.02%	0.03%	0.05%	0.12%	0.13%	0.15%	0.20%	0.20%	0.20%

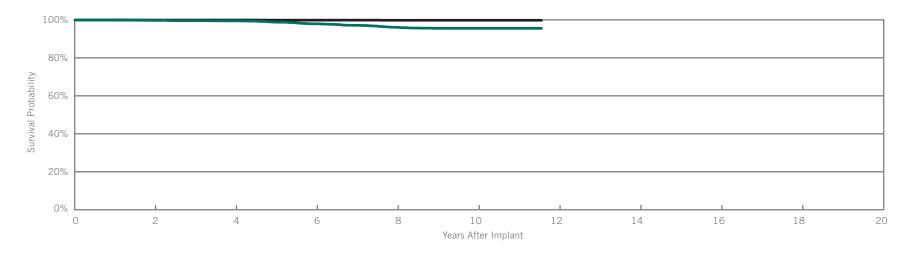


Verity ADx[™] XL SR Model 5156 Verity ADx[™] XL SR M/S Model 5157M/S Verity ADx[™] XL SC Model 5056

US Regulatory Approval	May 2003
Registered US Implants	14,479
Estimated Active US Implants	3,928
Estimated Longevity	10.2 Years
Normal Battery Depletion	91
Number of US Advisories	None

Customer Reported Performance Data

	w/ Co	functions mpromised herapy	Malfunctions w/o Compromised Therapy		
	Qty	Rate	Qty	Rate	
Electrical Component	1	<0.01%	3	0.02%	
Electrical Interconnect	0	0.00%	0	0.00%	
Battery	0	0.00%	0	0.00%	
Software/Firmware	0	0.00%	1	<0.01%	
Mechanical	0	0.00%	1	<0.01%	
Possible Early Battery Depletion	0	0.00%	0	0.00%	
Other	0	0.00%	2	0.01%	
Total	1	<0.01%	7	0.05%	



Including Normal Battery Depletion

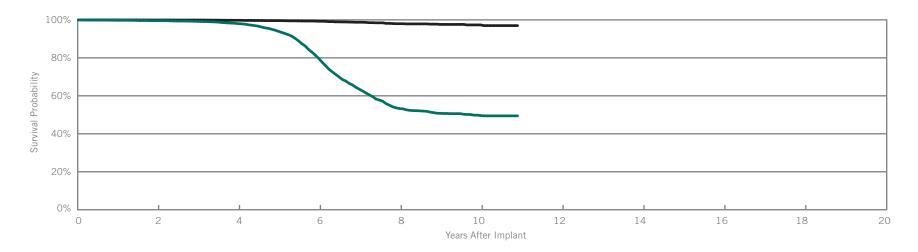
Year	2	4	6	8	10	at 139 months		
Survival Probability	99.73%	99.46%	97.92%	96.11%	95.55%	95.55%		
± 1 standard error	0.05%	0.07%	0.18%	0.27%	0.31%	0.31%		
Sample Size	10,850	7,730	5,430	3,580	1,470	200		

Year	2	4	6	8	10	at 139 months		
Survival Probability	99.91%	99.91%	99.85%	99.79%	99.79%	99.79%		
± 1 standard error	0.03%	0.03%	0.04%	0.06%	0.06%	0.06%		



Identity[™] ADx SR

lodel 5180			w/ Co	functions mpromised herapy	w/o Co	functions ompromised herapy
US Regulatory Approval	May 2003		Qty	Rate	Qty	Rate
Registered US Implants	20,862	Electrical Component	0	0.00%	35	0.17%
Estimated Active US Implants	2,506	Electrical Interconnect	0	0.00%	0	0.00%
Estimated Longevity	5.7 Years	Battery	0	0.00%	0	0.00%
Normal Battery Depletion	1,238	Software/Firmware	0	0.00%	6	0.03%
Number of US Advisories	None	Mechanical	0	0.00%	1	<0.01%
		Possible Early Battery Depletion	0	0.00%	8	0.04%
		Other	0	0.00%	8	0.04%
		Total	0	0.00%	58	0.28%



Including Normal Battery Depletion

Year	2	4	6	8	10	at 131 months		
Survival Probability	99.57%	98.02%	79.68%	53.27%	49.63%	49.45%		
± 1 standard error	0.05%	0.12%	0.44%	0.65%	0.71%	0.73%		
Sample Size	15,440	10,880	6,600	2,760	910	210		

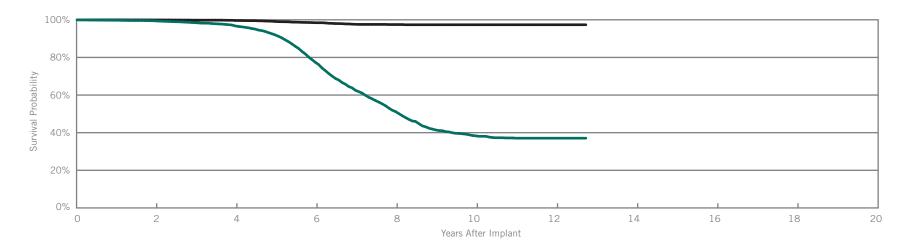
Year	2	4	6	8	10	at 131 months		
Survival Probability	99.94%	99.78%	99.26%	97.98%	97.35%	96.98%		
± 1 standard error	0.02%	0.04%	0.09%	0.22%	0.32%	0.41%		



Identity[™] SR Model 5172

US Regulatory Approval	November 2001
Registered US Implants	21,884
Estimated Active US Implants	1,151
Estimated Longevity	7.8 Years
Normal Battery Depletion	1,470
Number of US Advisories (see pgs. 296-300)	One

	w/ Co	functions mpromised herapy	Malfunctions w/o Compromised Therapy		
	Qty	Rate	Qty	Rate	
Electrical Component	1	<0.01%	64	0.29%	
Electrical Interconnect	0	0.00%	0	0.00%	
Battery	0	0.00%	0	0.00%	
Software/Firmware	0	0.00%	1	<0.01%	
Mechanical	0	0.00%	0	0.00%	
Possible Early Battery Depletion	0	0.00%	8	0.04%	
Other	0	0.00%	4	0.02%	
Total	1	<0.01%	77	0.35%	



Including Normal Battery Depletion

Year	2	4	6	8	10	12	at 153 months		
Survival Probability	99.45%	96.75%	77.39%	51.21%	38.30%	37.07%	37.07%		
± 1 standard error	0.05%	0.14%	0.45%	0.65%	0.73%	0.75%	0.75%		
Sample Size	16,210	11,390	6,580	2,730	1,080	450	200		

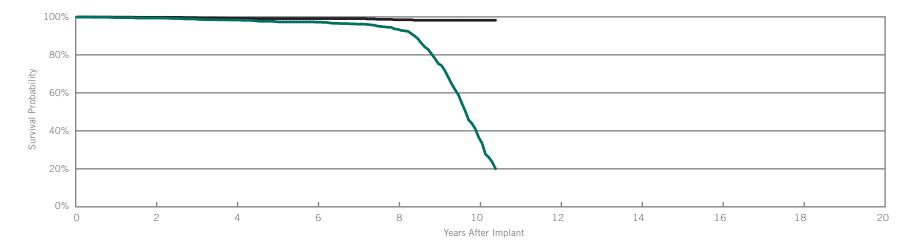
Year	2	4	6	8	10	12	at 153 months		
Survival Probability	99.92%	99.63%	98.44%	97.47%	97.37%	97.37%	97.37%		
± 1 standard error	0.02%	0.04%	0.13%	0.21%	0.22%	0.22%	0.22%		



Microny[™] Models 2425T, 2525T & 2535K

US Regulatory Approval	April 2001
Registered US Implants	7,584
Estimated Active US Implants	1,376
Estimated Longevity	7.5 Years
Normal Battery Depletion	308
Number of US Advisories	None

	w/ Cor	unctions npromised nerapy	Malfunctions w/o Compromised Therapy		
	Qty	Rate	Qty	Rate	
Electrical Component	0	0.00%	1	0.01%	
Electrical Interconnect	0	0.00%	0	0.00%	
Battery	0	0.00%	0	0.00%	
Software/Firmware	0	0.00%	0	0.00%	
Mechanical	0	0.00%	0	0.00%	
Possible Early Battery Depletion	0	0.00%	1	0.01%	
Other	0	0.00%	0	0.00%	
Total	0	0.00%	2	0.03%	



Including Normal Battery Depletion

Year	2	4	6	8	10	at 125 months		
Survival Probability	99.37%	98.36%	97.22%	93.45%	36.54%	20.02%		
± 1 standard error	0.11%	0.20%	0.29%	0.63%	1.78%	1.49%		
Sample Size	4,850	3,060	1,820	990	430	220		

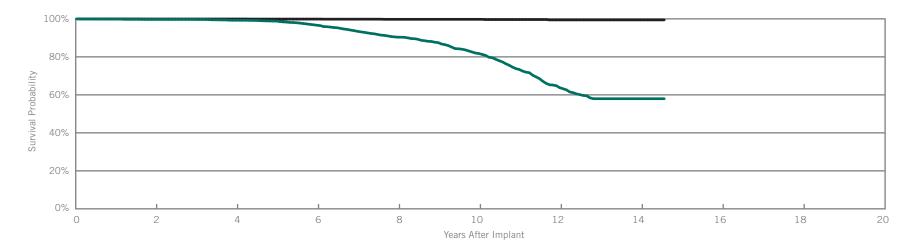
Year	2	4	6	8	10	at 125 months		
Survival Probability	99.78%	99.25%	99.09%	98.48%	98.22%	98.22%		
± 1 standard error	0.06%	0.14%	0.16%	0.29%	0.35%	0.35%		



Integrity[™] SR Model 5142

US Regulatory Approval	April 2000
Registered US Implants	10,489
Estimated Active US Implants	705
Estimated Longevity	8.6 Years
Normal Battery Depletion	384
Number of US Advisories	None

	w/ Co	functions mpromised herapy	Malfunctions w/o Compromised Therapy		
	Qty	Rate	Qty	Rate	
Electrical Component	0	0.00%	5	0.05%	
Electrical Interconnect	0	0.00%	0	0.00%	
Battery	0	0.00%	0	0.00%	
Software/Firmware	0	0.00%	0	0.00%	
Mechanical	0	0.00%	1	<0.01%	
Possible Early Battery Depletion	0	0.00%	1	<0.01%	
Other	1	<0.01%	0	0.00%	
Total	1	<0.01%	7	0.07%	



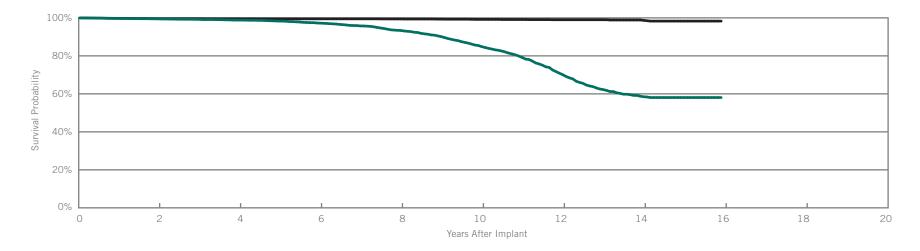
Including Normal Battery Depletion

Year	2	4	6	8	10	12	14	at 175 months	
Survival Probability	99.71%	99.26%	96.65%	90.35%	81.78%	63.79%	57.97%	57.97%	
± 1 standard error	0.06%	0.10%	0.25%	0.48%	0.72%	1.05%	1.17%	1.17%	
Sample Size	8,050	5,870	4,200	2,890	1,920	1,120	440	200	

Year	2	4	6	8	10	12	14	at 175 months	
Survival Probability	99.93%	99.93%	99.89%	99.77%	99.77%	99.46%	99.46%	99.46%	
± 1 standard error	0.03%	0.03%	0.04%	0.07%	0.07%	0.18%	0.18%	0.18%	



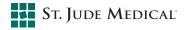
ffinity [™] SR odels 5130 & 5131			w/ Co	functions mpromised herapy	w/o Co	functions ompromised herapy
US Regulatory Approval	(5130) January 1999		Qty	Rate	Qty	Rate
	(5131) June 1999	Electrical Component	0	0.00%	46	0.16%
Registered US Implants	28,796	Electrical Interconnect	3	0.01%	2	<0.01%
Estimated Active US Implants	1,448	Battery	0	0.00%	3	0.01%
Estimated Longevity	8.6 Years	Software/Firmware	0	0.00%	0	0.00%
Normal Battery Depletion	792	Mechanical	0	0.00%	1	<0.01%
Number of US Advisories (see pgs. 296-300)	One	Possible Early Battery Depletion	0	0.00%	0	0.00%
		Other	1	<0.01%	7	0.02%
		Total	4	0.01%	59	0.20%



Including Normal Battery Depletion

Year	2	4	6	8	10	12	14	at 191 months	
Survival Probability	99.47%	98.83%	97.23%	93.37%	84.86%	70.09%	58.47%	58.06%	
± 1 standard error	0.05%	0.08%	0.14%	0.25%	0.43%	0.66%	0.81%	0.83%	
Sample Size	21,460	15,250	10,680	7,180	4,560	2,830	1,350	210	

Year	2	4	6	8	10	12	14	at 191 months	
Survival Probability	99.64%	99.54%	99.49%	99.44%	99.20%	99.01%	98.69%	98.30%	
± 1 standard error	0.04%	0.05%	0.05%	0.06%	0.09%	0.12%	0.15%	0.28%	



SUMMARY INFORMATION

Single-Chamber Pacemakers



Pacemakers

Survival Summary

						Survival P	robability				
Models	Family	1 year	2 year	3 year	4 year	5 year	6 year	7 year	8 year	9 year	10 year
PM1160	Endurity [™] SR	99.88%									
PM1240	Assurity™ SR	99.96%									
PM1110	Accent [™] SR	99.94%	99.88%	99.88%	99.82%	99.82%					
PM1210	Accent [™] SR RF	99.89%	99.80%	99.78%	99.76%	99.61%	99.44%				
5626	Zephyr™ XL SR	99.92%	99.83%	99.73%	99.64%	99.48%	99.35%	99.30%	99.21%		
5620	Zephyr™ SR	99.87%	99.74%	99.49%	98.76%	94.53%	91.28%	91.08%	90.60%		
5610	Victory [™] SR	99.92%	99.66%	99.44%	98.40%	90.22%	75.28%	70.82%	69.85%	69.62%	
5156/5157/5056	Verity ADx [™] XL SR/SR(M/S) / SC	99.87%	99.73%	99.60%	99.46%	98.81%	97.92%	97.14%	96.11%	95.55%	95.55%
5180	ldentity™ ADx SR	99.79%	99.57%	99.21%	98.02%	93.97%	79.68%	63.52%	53.27%	50.78%	49.63%
5172	Identity™ SR	99.76%	99.45%	98.46%	96.75%	91.95%	77.39%	62.52%	51.21%	41.45%	38.30%
2425T/2525T/2535T	Microny™	99.62%	99.37%	98.85%	98.36%	97.44%	97.22%	96.16%	93.45%	75.42%	36.54%
5142	Integrity [™] SR	99.86%	99.71%	99.68%	99.26%	98.81%	96.65%	93.46%	90.35%	87.49%	81.78%
5130/5131	Affinity™ SR	99.69%	99.47%	99.22%	98.83%	98.29%	97.23%	95.76%	93.37%	90.12%	84.86%



Pacemakers

Survival Summary

			Survival Probability									
Models	Family	1 year	2 year	3 year	4 year	5 year	6 year	7 year	8 year	9 year	10 year	
PM1160	Endurity [™] SR	99.88%										
PM1240	Assurity™ SR	99.96%										
PM1110	Accent [™] SR	99.96%	99.93%	99.93%	99.93%	99.93%						
PM1210	Accent [™] SR RF	99.93%	99.86%	99.84%	99.82%	99.73%	99.73%					
5626	Zephyr™ XL SR	99.95%	99.93%	99.93%	99.88%	99.83%	99.83%	99.78%	99.78%			
5620	Zephyr™ SR	99.99%	99.95%	99.93%	99.85%	99.80%	99.75%	99.75%	99.23%			
5610	Victory [™] SR	99.98%	99.96%	99.91%	99.83%	99.05%	98.91%	98.78%	98.37%	98.37%		
5156/5157/5056	Verity ADx [™] XL SR/SR(M/S) / SC	99.96%	99.91%	99.91%	99.91%	99.85%	99.85%	99.85%	99.79%	99.79%	99.79%	
5180	Identity™ ADx SR	99.96%	99.94%	99.91%	99.78%	99.60%	99.26%	98.74%	97.98%	97.60%	97.35%	
5172	Identity™ SR	99.97%	99.92%	99.81%	99.63%	99.10%	98.44%	97.61%	97.47%	97.37%	97.37%	
2425T/2525T/2535T	Microny™	99.86%	99.78%	99.59%	99.25%	99.09%	99.09%	99.09%	98.48%	98.22%	98.22%	
5142	Integrity [™] SR	99.98%	99.93%	99.93%	99.93%	99.89%	99.89%	99.84%	99.77%	99.77%	99.77%	
5130/5131	Affinity™ SR	99.78%	99.64%	99.58%	99.54%	99.51%	99.49%	99.49%	99.44%	99.33%	99.20%	



U.S. Malfunction Summary

									U	.S. Malfu	nctions w/	Comprom	ised Thera	ру					
		Registered	Percent Returned for		etrical ponent		trical onnect	Ва	ttery		tware/ nware	Mech	anical	Ba	le Early ttery letion	Of	her	Т	otal
Models	Family	US Implants	Analysis	Qty.	Rate	Qty.	Rate	Qty.	Rate	Qty.	Rate	Qty.	Rate	Qty.	Rate	Qty.	Rate	Qty.	Rate
PM1160	Endurity [™] SR	1,787	0.70%	0	0.00%	0	0.00%	0	0.00%	0	0.00%	0	0.00%	0	0.00%	0	0.00%	0	0.00%
PM1240	Assurity™ SR	12,265	0.20%	0	0.00%	0	0.00%	0	0.00%	0	0.00%	0	0.00%	0	0.00%	0	0.00%	0	0.00%
PM1110	Accent [™] SR	13,587	3.60%	0	0.00%	0	0.00%	0	0.00%	0	0.00%	0	0.00%	0	0.00%	0	0.00%	0	0.00%
PM1210	Accent [™] SR RF	39,809	3.60%	1	<0.01%	1	<0.01%	0	0.00%	0	0.00%	0	0.00%	2	<0.01%	0	0.00%	4	0.01%
5626	Zephyr [™] XL SR	20,619	5.40%	0	0.00%	1	<0.01%	0	0.00%	0	0.00%	0	0.00%	0	0.00%	1	<0.01%	2	<0.01%
5620	Zephyr™ SR	16,974	5.80%	0	0.00%	0	0.00%	0	0.00%	0	0.00%	0	0.00%	0	0.00%	0	0.00%	0	0.00%
5610	Victory [™] SR	13,681	12.70%	0	0.00%	0	0.00%	0	0.00%	0	0.00%	0	0.00%	0	0.00%	1	<0.01%	1	<0.01%
5156/5157/5056	Verity ADx [™] XL SR/SR(M/S) / SC	14,479	5.80%	1	<0.01%	0	0.00%	0	0.00%	0	0.00%	0	0.00%	0	0.00%	0	0.00%	1	<0.01%
5180	Identity [™] ADx SR	20,862	11.70%	0	0.00%	0	0.00%	0	0.00%	0	0.00%	0	0.00%	0	0.00%	0	0.00%	0	0.00%
5172	Identity [™] SR	21,884	11.30%	1	<0.01%	0	0.00%	0	0.00%	0	0.00%	0	0.00%	0	0.00%	0	0.00%	1	<0.01%
2425T/2525T/2535T	Microny™	7,584	6.60%	0	0.00%	0	0.00%	0	0.00%	0	0.00%	0	0.00%	0	0.00%	0	0.00%	0	0.00%
5142	Integrity [™] SR	10,489	8.60%	0	0.00%	0	0.00%	0	0.00%	0	0.00%	0	0.00%	0	0.00%	1	<0.01%	1	<0.01%
5130/5131	Affinity [™] SR	28,796	7.00%	0	0.00%	3	0.01%	0	0.00%	0	0.00%	0	0.00%	0	0.00%	1	<0.01%	4	0.01%

									U.	S. Malfur	nctions w/o	Comprom	ised Thera	ру					
		Registered	Percent Returned for		trical ponent		trical onnect	Bat	ttery		ware/ ware	Mech	anical	Bat	le Early ttery letion	O	ther	Тс	otal
Models	Family	US Implants	Analysis	Qty.	Rate	Qty.	Rate	Qty.	Rate	Qty.	Rate	Qty.	Rate	Qty.	Rate	Qty.	Rate	Qty.	Rate
PM1160	Endurity [™] SR	1,787	0.70%	0	0.00%	0	0.00%	0	0.00%	0	0.00%	1	0.06%	0	0.00%	0	0.00%	1	0.06%
PM1240	Assurity™ SR	12,265	0.20%	1	<0.01%	0	0.00%	0	0.00%	0	0.00%	1	<0.01%	0	0.00%	0	0.00%	2	0.02%
PM1110	Accent [™] SR	13,587	3.60%	1	<0.01%	0	0.00%	0	0.00%	1	<0.01%	0	0.00%	1	<0.01%	0	0.00%	3	0.02%
PM1210	Accent [™] SR RF	39,809	3.60%	7	0.02%	3	<0.01%	1	<0.01%	0	0.00%	3	<0.01%	2	<0.01%	7	0.02%	23	0.06%
5626	Zephyr™ XL SR	20,619	5.40%	4	0.02%	0	0.00%	0	0.00%	0	0.00%	0	0.00%	0	0.00%	6	0.03%	10	0.05%
5620	Zephyr™ SR	16,974	5.80%	4	0.02%	0	0.00%	0	0.00%	2	0.01%	0	0.00%	0	0.00%	4	0.02%	10	0.06%
5610	Victory [™] SR	13,681	12.70%	23	0.17%	0	0.00%	0	0.00%	1	<0.01%	0	0.00%	1	<0.01%	9	0.07%	34	0.25%
5156/5157/5056	Verity ADx [™] XL SR/SR(M/S) / SC	14,479	5.80%	3	0.02%	0	0.00%	0	0.00%	1	<0.01%	1	<0.01%	0	0.00%	2	0.01%	7	0.05%
5180	Identity [™] ADx SR	20,862	11.70%	35	0.17%	0	0.00%	0	0.00%	6	0.03%	1	<0.01%	8	0.04%	8	0.04%	58	0.28%
5172	Identity™ SR	21,884	11.30%	64	0.29%	0	0.00%	0	0.00%	1	<0.01%	0	0.00%	8	0.04%	4	0.02%	77	0.35%
2425T/2525T/2535T	Microny™	7,584	6.60%	1	0.01%	0	0.00%	0	0.00%	0	0.00%	0	0.00%	1	0.01%	0	0.00%	2	0.03%
5142	Integrity [™] SR	10,489	8.60%	5	0.05%	0	0.00%	0	0.00%	0	0.00%	1	<0.01%	1	<0.01%	0	0.00%	7	0.07%
5130/5131	Affinity™ SR	28,796	7.00%	46	0.16%	2	<0.01%	3	0.01%	0	0.00%	1	<0.01%	0	0.00%	7	0.02%	59	0.20%

Definitions of malfunction categories can be found on pages 7-8.

Worldwide Malfunction Summary

				Worldwide Malfunctions w/ Compromised Therapy															
		Worldwide	Percent Returned for		trical ponent		trical onnect	Bat	tery		ware/ ware	Mech	anical	Bat	le Early tery etion	Ot	her	То	otal
Models	Family	Sales	Analysis	Qty.	Rate	Qty.	Rate	Qty.	Rate	Qty.	Rate	Qty.	Rate	Qty.	Rate	Qty.	Rate	Qty.	Rate
PM1160	Endurity™ SR	17,991	0.29%	0	0.00%	0	0.00%	0	0.00%	0	0.00%	0	0.00%	0	0.00%	0	0.00%	0	0.00%
PM1240	Assurity™ SR RF	14,811	0.82%	0	0.00%	0	0.00%	0	0.00%	0	0.00%	0	0.00%	0	0.00%	0	0.00%	0	0.00%
PM1110	Accent [™] SR	52,402	1.38%	0	0.00%	0	0.00%	0	0.00%	0	0.00%	0	0.00%	0	0.00%	0	0.00%	0	0.00%
PM1210	Accent [™] SR RF	47,556	3.65%	3	<0.01%	1	<0.01%	0	0.00%	0	0.00%	0	0.00%	2	<0.01%	0	0.00%	6	0.01%

									World	lwide Mal	functions v	v/o Compi	omised Th	erapy					
		Worldwide	Percent Returned for		trical ponent		trical onnect	Bat	ttery		ware/ ware	Mech	anical	Bat	le Early ttery letion	Ot	her	Тс	otal
Models	Family	Sales	Analysis	Qty.	Rate	Qty.	Rate	Qty.	Rate	Qty.	Rate	Qty.	Rate	Qty.	Rate	Qty.	Rate	Qty.	Rate
PM1160	Endurity [™] SR	17,991	0.29%	0	0.00%	0	0.00%	0	0.00%	0	0.00%	1	<0.01%	0	0.00%	0	0.00%	1	<0.01%
PM1240	Assurity™ SR RF	14,811	0.82%	1	<0.01%	0	0.00%	0	0.00%	0	0.00%	1	<0.01%	0	0.00%	0	0.00%	2	0.01%
PM1110	Accent [™] SR	52,402	1.38%	1	<0.01%	0	0.00%	0	0.00%	2	<0.01%	0	0.00%	1	<0.01%	2	<0.01%	6	0.01%
PM1210	Accent [™] SR RF	47,556	3.65%	9	0.02%	3	<0.01%	1	<0.01%	0	0.00%	3	<0.01%	2	<0.01%	8	0.02%	26	0.05%

Actively Monitored Study Data Summary

Qualifying Complications

	Number of Devices	Active Devices	Cumulative Months of	Loss Te	lemetry		ardial Ision	Bat	ature tery etion	Skin E	Erosion	То	tal
Models	Enrolled	Enrolled	Follow-Up	Qty.	Rate	Qty.	Rate	Qty.	Rate	Qty.	Rate	Qty.	Rate
PM1210	236	34	5,191	0	0.00%	0	0.00%	0	0.00%	0	0.00%	0	0.00%
5626	230	3	6,515	0	0.00%	0	0.00%	0	0.00%	0	0.00%	0	0.00%

Malfunctions

				Malfunctions w/ Compromised Therapy														
	Number of Devices			trical oonent		trical onnect	Bat	tery		ware/ ware	Mech	anical	Bat	le Early tery etion	Ot	her	То	otal
Models	Enrolled	Returned for Analysis	Qty.	Rate	Qty.	Rate	Qty.	Rate	Qty.	Rate	Qty.	Rate	Qty.	Rate	Qty.	Rate	Qty.	Rate
PM1210	236	3.40%	0	0.00%	0	0.00%	0	0.00%	0	0.00%	0	0.00%	0	0.00%	0	0.00%	0	0.00%
5626	230	3.90%	0	0.00%	0	0.00%	0	0.00%	0	0.00%	0	0.00%	0	0.00%	0	0.00%	0	0.00%

				Malfunctions w/o Compromised Therapy														
	Number of Devices	Percent Returned for		trical oonent		trical onnect	Bat	tery		ware/ ware	Mech	anical	Bat	le Early ttery letion	Ot	ther	Тс	otal
Models	Enrolled	Analysis	Qty.	Rate	Qty.	Rate	Qty.	Rate	Qty.	Rate	Qty.	Rate	Qty.	Rate	Qty.	Rate	Qty.	Rate
PM1210	236	3.40%	0	0.00%	0	0.00%	0	0.00%	0	0.00%	0	0.00%	0	0.00%	0	0.00%	0	0.00%
5626	230	3.90%	0	0.00%	0	0.00%	0	0.00%	0	0.00%	0	0.00%	0	0.00%	0	0.00%	0	0.00%



PACING LEADS



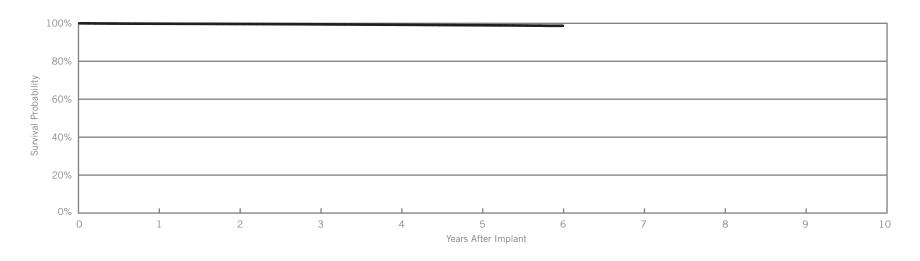
Tendril[™] STS

Model 2088TC

US Regulatory Approval	May 2009
Registered US Implants	425,470
Estimated Active US Implants	327,035
Insulation	Optim [™] *
Type and/or Fixation	Active
Polarity	Bipolar
Steroid	Yes
Number of US Advisories	None

		bservations int, ≤30 days)		mplications days)
	Qty.	Rate	Qty.	Rate
Cardiac Perforation	66	0.02%	35	<0.01%
Conductor Fracture	5	<0.01%	100	0.02%
Lead Dislodgement	378	0.09%	476	0.11%
Failure to Capture	103	0.02%	346	0.08%
Oversensing	31	<0.01%	863	0.20%
Failure to Sense	17	<0.01%	64	0.02%
Insulation Breach	10	<0.01%	115	0.03%
Abnormal Pacing Impedance	24	<0.01%	75	0.02%
Extracardiac Stimulation	3	<0.01%	14	<0.01%
Other	87	0.02%	84	0.02%
Total	724	0.17%	2172	0.51%
Total Returned for Analysis	346		853	

Lead Malfunctions	Qty.	Rate
Conductor Fracture	25	<0.01%
Insulation Breach	309	0.07%
Crimps, Welds & Bonds	0	0.00%
Other	22	<0.01%
Extrinsic Factors	652	0.15%
Total	1008	0.24%



Year	1	2	3	4	5	6	
Survival Probability	99.79%	99.64%	99.47%	99.24%	98.99%	98.74%	
± 1 standard error	0.01%	0.01%	0.01%	0.02%	0.03%	0.09%	
Sample Size	361,600	250,510	165,760	97,890	44,700	350	



Actively Monitored Study Data

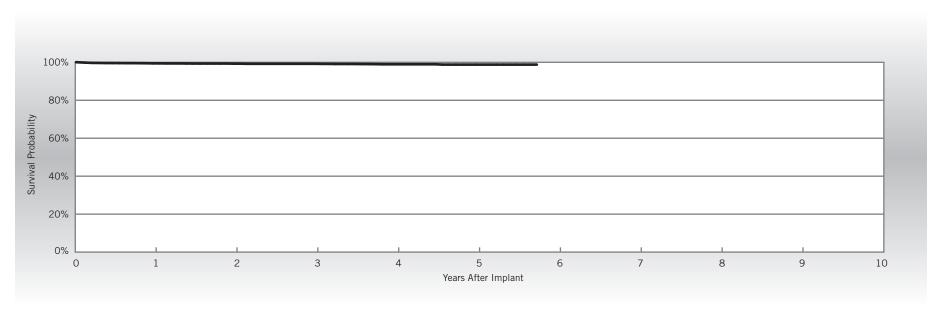
Tendril[™] STS

Model 2088TC

US Regulatory Approval	May 2009
Number of Devices Enrolled in Study	3,804
Active Devices Enrolled in Study	2,297
Cumulative Months of Follow-up	150,734
Insulation	Optim [™] *
Type and/or Fixation	Active
Polarity	Bipolar
Steroid	Yes

Qualifying Complications	Qty	Rate	
Abnormal Pacing Impedance	1	0.03%	
Cardiac Perforation	1	0.03%	
Conductor Fracture	1	0.03%	
Failure to Capture	2	0.05%	
Failure to Sense	1	0.03%	
Insulation Breach	5	0.13%	
Lead Dislodgement	14	0.37%	
Oversensing	8	0.21%	
Pericardial Effusion	1	0.03%	

Malfunctions	Qty	Rate	
Conductor Fracture	0	0.00%	
Insulation Breach	11	0.29%	
Crimps, Welds & Bonds	0	0.00%	
Other	0	0.00%	
Extrinsic Factors	10	0.26%	
Total	21	0.55%	



Year	1	2	3	4	5	at 69 months		
Survival Probability	99.45%	99.30%	99.23%	98.97%	98.80%	98.80%		
± 1 standard error	0.12%	0.13%	0.15%	0.19%	0.22%	0.22%		
Sample Size	3,600	3,190	2,600	1,980	1,170	80		



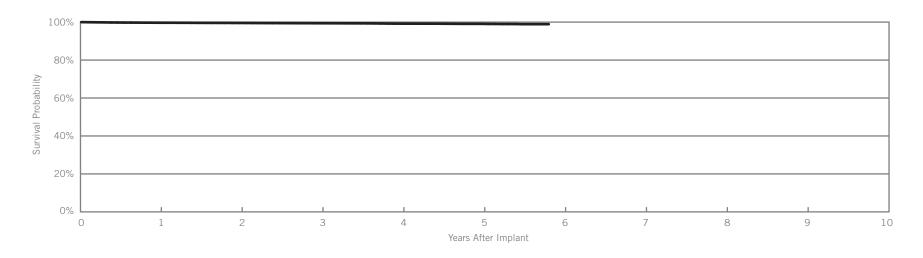
OptiSense™

Model 1999

US Regulatory Approval	May 2007
Registered US Implants	40,670
Estimated Active US Implants	28,533
Insulation	Optim [™] *
Type and/or Fixation	Active
Polarity	Bipolar
Steroid	Yes
Number of US Advisories	None

		bservations ant, ≤30 days)		omplications) days)
	Qty.	Rate	Qty.	Rate
Cardiac Perforation	2	<0.01%	0	0.00%
Conductor Fracture	0	0.00%	2	<0.01%
Lead Dislodgement	48	0.12%	111	0.27%
Failure to Capture	6	0.01%	32	0.08%
Oversensing	5	0.01%	68	0.17%
Failure to Sense	3	<0.01%	14	0.03%
Insulation Breach	1	<0.01%	21	0.05%
Abnormal Pacing Impedance	0	0.00%	3	<0.01%
Extracardiac Stimulation	0	0.00%	0	0.00%
Other	10	0.02%	11	0.03%
Total	75	0.18%	262	0.64%
Total Returned for Analysis	44		122	

Lead Malfunctions	Qty.	Rate
Conductor Fracture	3	<0.01%
Insulation Breach	20	0.05%
Crimps, Welds & Bonds	0	0.00%
Other	4	<0.01%
Extrinsic Factors	111	0.27%
Total	138	0.34%



Year	1	2	3	4	5	at 70 months	
Survival Probability	99.69%	99.55%	99.38%	99.16%	99.06%	98.84%	
± 1 standard error	0.03%	0.04%	0.05%	0.06%	0.08%	0.13%	
Sample Size	35,250	25,770	18,220	11,780	6,150	360	



Pacing Leads

Actively Monitored Study Data

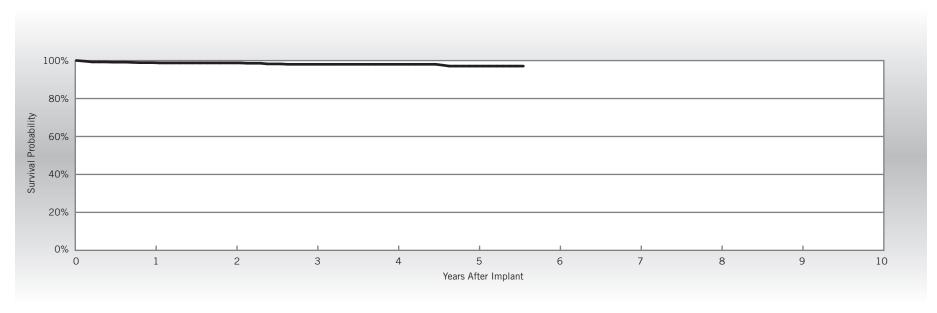
OptiSense™

Model 1999

US Regulatory Approval	May 2007
Number of Devices Enrolled in Study	855
Active Devices Enrolled in Study	501
Cumulative Months of Follow-up	31,661
Insulation	Optim [™] *
Type and/or Fixation	Active
Polarity	Bipolar
Steroid	Yes

Qualifying Complications	Qty	Rate	
Abnormal Pacing Impedance	1	0.12%	
Conductor Fracture	1	0.12%	
Failure to Sense	2	0.23%	
Insulation Breach	1	0.12%	
Lead Dislodgement	10	1.17%	
Oversensing	1	0.12%	

Malfunctions	Qty	Rate	
Conductor Fracture	0	0.00%	
Insulation Breach	2	0.23%	
Crimps, Welds & Bonds	0	0.00%	
Other	0	0.00%	
Extrinsic Factors	8	0.94%	
Total	10	1.17%	



Year	1	2	3	4	5	at 67 months		
Survival Probability	98.90%	98.76%	98.04%	98.04%	97.10%	97.10%		
± 1 standard error	0.37%	0.39%	0.53%	0.53%	0.84%	0.84%		
Sample Size	790	680	530	400	240	60		



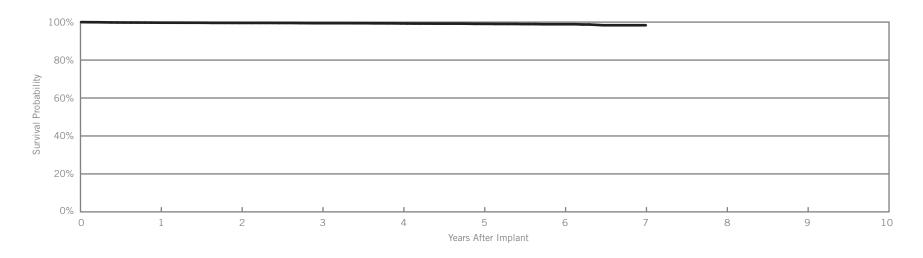
IsoFlex[™] Optim[™]

Model 1944

US Regulatory Approval	March 2008
Registered US Implants	14,223
Estimated Active US Implants	9,491
Insulation	Optim*
Type and/or Fixation	Passive
Polarity	Bipolar
Steroid	Yes
Number of US Advisories	None

	Acute Observations (Post Implant, ≤30 days)			omplications) days)
	Qty.	Rate	Qty.	Rate
Cardiac Perforation	0	0.00%	1	<0.01%
Conductor Fracture	0	0.00%	4	0.03%
Lead Dislodgement	49	0.34%	35	0.25%
Failure to Capture	7	0.05%	17	0.12%
Oversensing	0	0.00%	24	0.17%
Failure to Sense	2	0.01%	4	0.03%
Insulation Breach	0	0.00%	4	0.03%
Abnormal Pacing Impedance	0	0.00%	1	<0.01%
Extracardiac Stimulation	2	0.01%	1	<0.01%
Other	1	<0.01%	2	0.01%
Total	61	0.43%	93	0.65%
Total Returned for Analysis	35		19	

Lead Malfunctions	Qty.	Rate
Conductor Fracture	0	0.00%
Insulation Breach	5	0.04%
Crimps, Welds & Bonds	0	0.00%
Other	1	<0.01%
Extrinsic Factors	16	0.11%
Total	22	0.15%



Year	1	2	3	4	5	6	7		
Survival Probability	99.71%	99.59%	99.45%	99.31%	99.10%	98.90%	98.40%		
± 1 standard error	0.05%	0.06%	0.08%	0.09%	0.13%	0.17%	0.34%		
Sample Size	12,450	9,360	6,910	4,790	2,990	1,560	220		



Pacing Leads

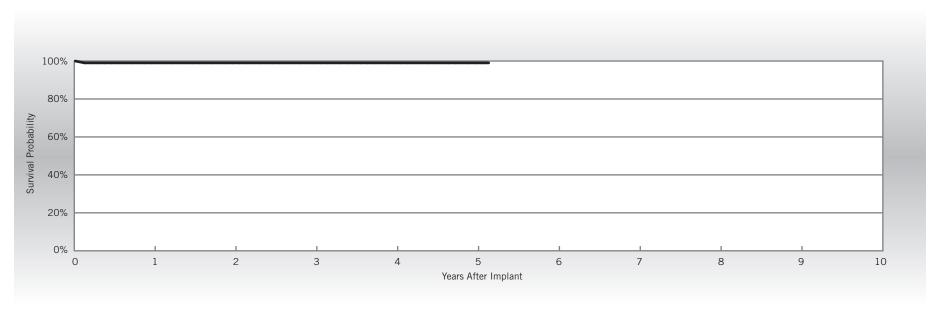
Actively Monitored Study Data

IsoFlex[™] Optim[™]

Model 1944

US Regulatory Approval	March 2008	Qualifying Complications	Qty	Rate
Number of Devices Enrolled in Study	104	Lead Dislodgement	1	0.96%
Active Devices Enrolled in Study	39			
Cumulative Months of Follow-up	5,162			
Insulation	Optim*			
Type and/or Fixation	Passive			
Polarity	Bipolar			
Steroid	Yes			

Malfunctions	Qty	Rate
Conductor Fracture	0	0.00%
Insulation Breach	0	0.00%
Crimps, Welds & Bonds	0	0.00%
Other	0	0.00%
Extrinsic Factors	0	0.00%
Total	0	0.00%



Year	1	2	3	4	5	at 62 months		
Survival Probability	99.02%	99.02%	99.02%	99.02%	99.02%	99.02%		
± 1 standard error	0.97%	0.97%	0.97%	0.97%	0.97%	0.97%		
Sample Size	100	80	70	60	50	50		



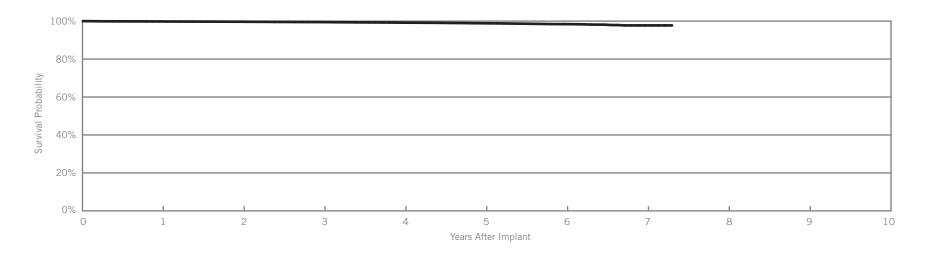
IsoFlex[™] Optim[™]

Model 1948

US Regulatory Approval	March 2008
Registered US Implants	53,449
Estimated Active US Implants	35,836
Insulation	Optim*
Type and/or Fixation	Passive
Polarity	Bipolar
Steroid	Yes
Number of US Advisories	None

	Acute Observations (Post Implant, ≤30 days)		Chronic Complications (>30 days)		
	Qty.	Rate	Qty.	Rate	
Cardiac Perforation	2	<0.01%	9	0.02%	
Conductor Fracture	0	0.00%	42	0.08%	
Lead Dislodgement	36	0.07%	44	0.08%	
Failure to Capture	23	0.04%	72	0.13%	
Oversensing	1	<0.01%	109	0.20%	
Failure to Sense	1	<0.01%	2	<0.01%	
Insulation Breach	4	<0.01%	28	0.05%	
Abnormal Pacing Impedance	1	<0.01%	19	0.04%	
Extracardiac Stimulation	1	<0.01%	2	<0.01%	
Other	5	<0.01%	4	<0.01%	
Total	74	0.14%	331	0.62%	
Total Returned for Analysis	38		72		

Lead Malfunctions	Qty.	Rate
Conductor Fracture	7	0.01%
Insulation Breach	40	0.07%
Crimps, Welds & Bonds	0	0.00%
Other	1	<0.01%
Extrinsic Factors	50	0.09%
Total	98	0.18%



Year	1	2	3	4	5	6	7	at 88 months	
Survival Probability	99.81%	99.68%	99.50%	99.22%	98.88%	98.46%	97.77%	97.77%	
± 1 standard error	0.02%	0.03%	0.04%	0.05%	0.08%	0.12%	0.24%	0.24%	
Sample Size	46,550	34,510	24,810	16,550	10,080	5,210	1,810	230	



Pacing Leads

Actively Monitored Study Data

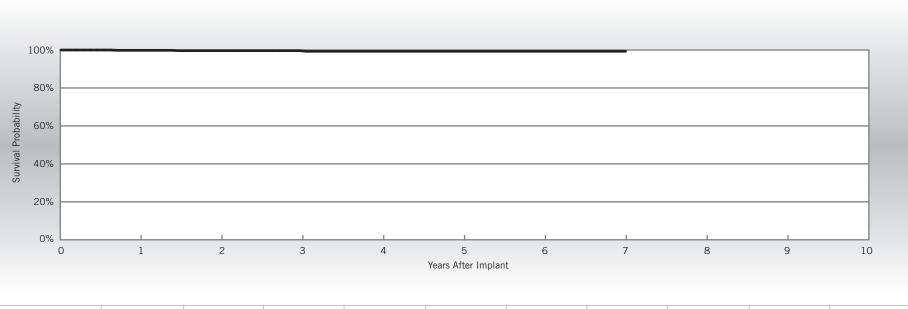
IsoFlex[™] Optim[™]

Model 1948

US Regulatory Approval	March 2008
Number of Devices Enrolled in Study	766
Active Devices Enrolled in Study	241
Cumulative Months of Follow-up	29,927
Insulation	Optim*
Type and/or Fixation	Passive
Polarity	Bipolar
Steroid	Yes

Qualifying Complications	Qty	Rate
Insulation Breach	1	0.13%
Lead Dislodgement	2	0.26%

Malfunctions	Qty	Rate
Conductor Fracture	0	0.00%
Insulation Breach	4	0.52%
Crimps, Welds & Bonds	0	0.00%
Other	0	0.00%
Extrinsic Factors	1	0.13%
Total	5	0.65%



Year	1	2	3	4	5	6	7		
Survival Probability	99.85%	99.66%	99.66%	99.34%	99.34%	99.34%	99.34%		
± 1 standard error	0.15%	0.24%	0.24%	0.40%	0.40%	0.40%	0.40%		
Sample Size	690	530	380	300	270	230	60		

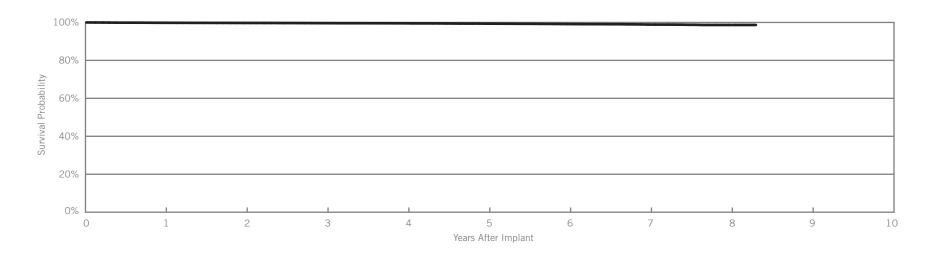


OptiSense[™] Models 1699T & 1699TC

US Regulatory Approval	May 2007
Registered US Implants	22,873
Estimated Active US Implants	11,497
Insulation	Silicone
Type and/or Fixation	Active
Polarity	Bipolar
Steroid	Yes
Number of US Advisories	None

	Acute Observations (Post Implant, ≤30 days)			mplications days)
	Qty.	Rate	Qty.	Rate
Cardiac Perforation	1	<0.01%	0	0.00%
Conductor Fracture	0	0.00%	11	0.05%
Lead Dislodgement	4	0.02%	40	0.17%
Failure to Capture	3	0.01%	30	0.13%
Oversensing	2	<0.01%	62	0.27%
Failure to Sense	8	0.03%	18	0.08%
Insulation Breach	0	0.00%	4	0.02%
Abnormal Pacing Impedance	0	0.00%	16	0.07%
Extracardiac Stimulation	0	0.00%	3	0.01%
Other	2	<0.01%	3	0.01%
Total	20	0.09%	187	0.82%
Total Returned for Analysis	16		61	

Qty.	Rate
13	0.06%
19	0.08%
0	0.00%
0	0.00%
49	0.21%
81	0.35%
	13 19 0 0 49



Year	1	2	3	4	5	6	7	8	at 100 months	
Survival Probability	99.82%	99.72%	99.58%	99.50%	99.32%	99.09%	98.81%	98.54%	98.54%	
± 1 standard error	0.03%	0.04%	0.05%	0.05%	0.06%	0.08%	0.09%	0.14%	0.14%	
Sample Size	21,320	18,760	16,870	15,230	13,650	11,370	7,460	2,940	270	



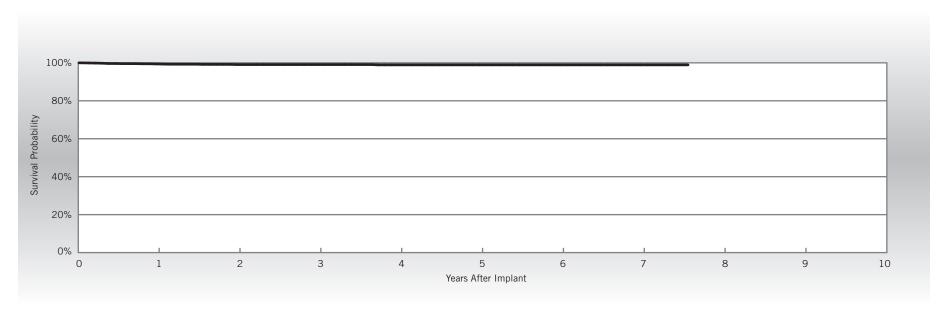
Actively Monitored Study Data

OptiSense[™] Models 1699T & 1699TC

US Regulatory Approval	May 2007
Number of Devices Enrolled in Study	1,451
Active Devices Enrolled in Study	419
Cumulative Months of Follow-up	63,583
Insulation	Silicone
Type and/or Fixation	Active
Polarity	Bipolar
Steroid	Yes

Qualifying Complications	Qty	Rate
Abnormal Pacing Impedance	1	0.07%
Conductor Fracture	1	0.07%
Failure to Capture	1	0.07%
Insulation Breach	1	0.07%
Lead Dislodgement	8	0.55%
Oversensing	1	0.07%

Malfunctions	Qty	Rate
Conductor Fracture	0	0.00%
Insulation Breach	1	0.07%
Crimps, Welds & Bonds	0	0.00%
Other	0	0.00%
Extrinsic Factors	5	0.34%
Total	6	0.41%



Year	1	2	3	4	5	6	7	at 91 months	
Survival Probability	99.42%	99.08%	99.08%	98.92%	98.92%	98.92%	98.92%	98.92%	
± 1 standard error	0.19%	0.25%	0.27%	0.31%	0.31%	0.31%	0.31%	0.31%	
Sample Size	1,360	1,160	940	690	510	400	230	60	



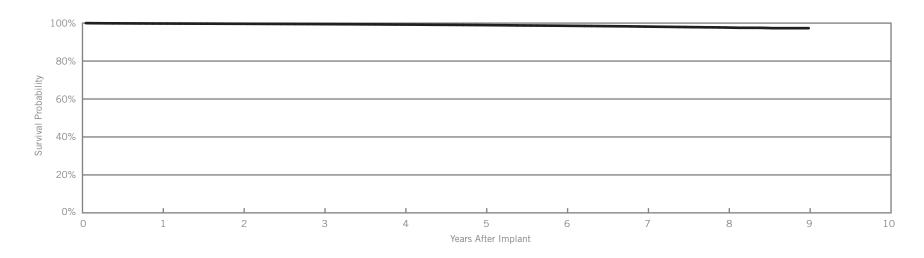
Tendril[™] ST Optim[™]

Models 1888T & 1888TC

US Regulatory Approval	June 2006
Registered US Implants	299,938
Estimated Active US Implants	168,571
Insulation	Optim*
Type and/or Fixation	Active
Polarity	Bipolar
Steroid	Yes
Number of US Advisories	None

		bservations int, ≤30 days)		mplications days)
	Qty.	Rate	Qty.	Rate
Cardiac Perforation	39	0.01%	37	0.01%
Conductor Fracture	7	<0.01%	163	0.05%
Lead Dislodgement	153	0.05%	458	0.15%
Failure to Capture	84	0.03%	539	0.18%
Oversensing	16	<0.01%	1130	0.38%
Failure to Sense	14	<0.01%	91	0.03%
Insulation Breach	7	<0.01%	223	0.07%
Abnormal Pacing Impedance	9	<0.01%	167	0.06%
Extracardiac Stimulation	5	<0.01%	30	0.01%
Other	40	0.01%	78	0.03%
Total	374	0.12%	2916	0.97%
Total Returned for Analysis	197		979	

Lead Malfunctions	Qty.	Rate
Conductor Fracture	28	<0.01%
Insulation Breach	561	0.19%
Crimps, Welds & Bonds	1	<0.01%
Other	12	<0.01%
Extrinsic Factors	690	0.23%
Total	1292	0.43%



Year	1	2	3	4	5	6	7	8	9	
Survival Probability	99.79%	99.64%	99.46%	99.24%	98.95%	98.61%	98.17%	97.69%	97.34%	
± 1 standard error	0.01%	0.01%	0.02%	0.02%	0.02%	0.03%	0.04%	0.06%	0.11%	
Sample Size	274,460	228,800	190,780	156,590	124,150	88,940	51,260	21,480	310	



Actively Monitored Study Data

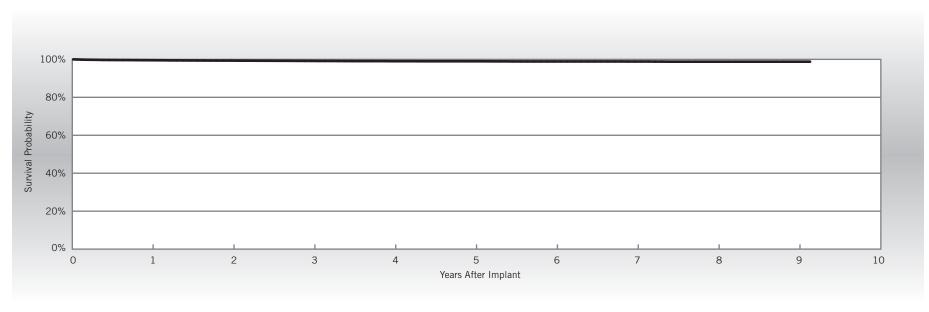
Tendril[™] ST Optim[™]

Models 1888T & 1888TC

US Regulatory Approval	June 2006	
Number of Devices Enrolled in Study	14,513	
Active Devices Enrolled in Study	5,435	
Cumulative Months of Follow-up	731,028	
Insulation	Optim*	
Type and/or Fixation	Active	
Polarity	Bipolar	
Steroid	Yes	
		_

Qualifying Complications	Qty	Rate
Abnormal Pacing Impedance	6	0.04%
Cardiac Perforation	2	0.01%
Conductor Fracture	6	0.04%
Extracardiac Stimulation	4	0.03%
Failure to Capture	8	0.06%
Failure to Sense	4	0.03%
Insulation Breach	25	0.17%
Lead Dislodgement	55	0.38%
Oversensing	15	0.10%
Skin Erosion	1	<0.01%

Malfunctions	Qty	Rate
Conductor Fracture	3	0.02%
Insulation Breach	21	0.14%
Crimps, Welds & Bonds	0	0.00%
Other	0	0.00%
Extrinsic Factors	33	0.23%
Total	57	0.39%



Year	1	2	3	4	5	6	7	8	9	at 110 months
Survival Probability	99.55%	99.36%	99.18%	99.03%	98.99%	98.90%	98.87%	98.79%	98.79%	98.79%
± 1 standard error	0.06%	0.07%	0.08%	0.09%	0.10%	0.10%	0.11%	0.12%	0.12%	0.12%
Sample Size	13,720	11,930	9,760	7,670	6,220	5,380	4,060	2,200	720	50



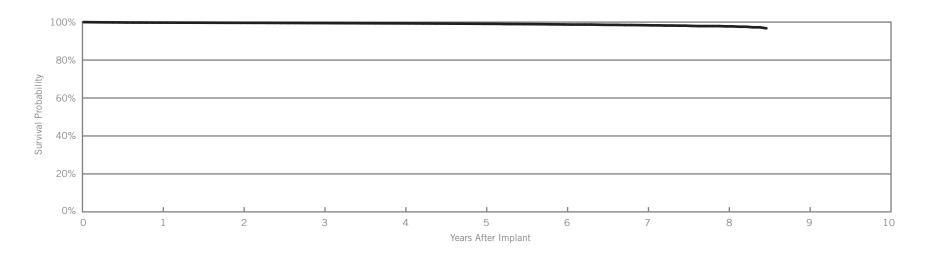
Tendril[™] ST Optim[™]

Models 1882T & 1882TC

US Regulatory Approval	June 2006
Registered US Implants	43,633
Estimated Active US Implants	27,867
Insulation	Optim*
Type and/or Fixation	Active
Polarity	Bipolar
Steroid	Yes
Number of US Advisories	None

		bservations ant, ≤30 days)		omplications) days)
	Qty.	Rate	Qty.	Rate
Cardiac Perforation	3	<0.01%	3	<0.01%
Conductor Fracture	0	0.00%	7	0.02%
Lead Dislodgement	38	0.09%	93	0.21%
Failure to Capture	10	0.02%	50	0.11%
Oversensing	5	0.01%	95	0.22%
Failure to Sense	4	<0.01%	11	0.03%
Insulation Breach	0	0.00%	27	0.06%
Abnormal Pacing Impedance	0	0.00%	8	0.02%
Extracardiac Stimulation	0	0.00%	1	<0.01%
Other	13	0.03%	18	0.04%
Total	73	0.17%	313	0.72%
Total Returned for Analysis	42		118	

Lead Malfunctions	Qty.	Rate
Conductor Fracture	2	< 0.01%
Insulation Breach	38	0.09%
Crimps, Welds & Bonds	0	0.00%
Other	3	<0.01%
Extrinsic Factors	102	0.23%
Total	145	0.33%



Year	1	2	3	4	5	6	7	8	at 102 months	
Survival Probability	99.73%	99.62%	99.50%	99.36%	99.14%	98.79%	98.44%	97.76%	96.79%	
± 1 standard error	0.03%	0.03%	0.04%	0.05%	0.06%	0.09%	0.13%	0.23%	0.43%	
Sample Size	38,600	29,840	22,950	16,960	11,790	7,470	3,960	1,560	230	

*Optim[™] lead insulation is a copolymer of silicone and polyurethane.



Actively Monitored Study Data

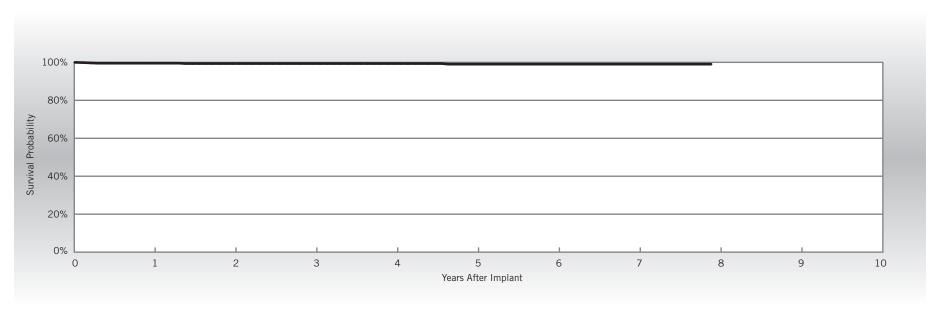
Tendril[™] ST Optim[™]

Models 1882T & 1882TC

US Regulatory Approval	June 2006
Number of Devices Enrolled in Study	689
Active Devices Enrolled in Study	303
Cumulative Months of Follow-up	34,107
Insulation	Optim*
Type and/or Fixation	Active
Polarity	Bipolar
Steroid	Yes

Qualifying Complications	Qty	Rate
Extracardiac Stimulation	1	0.15%
Lead Dislodgement	2	0.29%
Oversensing	1	0.15%
Skin Erosion	1	0.15%

Malfunctions	Qty	Rate
Conductor Fracture	0	0.00%
Insulation Breach	2	0.29%
Crimps, Welds & Bonds	0	0.00%
Other	0	0.00%
Extrinsic Factors	0	0.00%
Total	2	0.29%



Year	1	2	3	4	5	6	7	at 95 months	
Survival Probability	99.56%	99.38%	99.38%	99.38%	99.05%	99.05%	99.05%	99.05%	
± 1 standard error	0.26%	0.31%	0.31%	0.31%	0.45%	0.45%	0.45%	0.45%	
Sample Size	650	560	450	370	310	260	180	60	

*Optim[™] lead insulation is a copolymer of silicone and polyurethane.

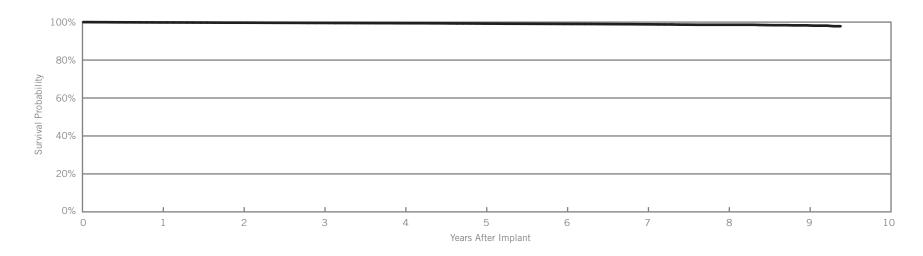


Tendril[™] Models 1782T & 1782TC

February 2006 16,399 7,848
7,848
Silicone
Active
Bipolar
Yes
None

		bservations int, ≤30 days)		omplications) days)
	Qty.	Rate	Qty.	Rate
Cardiac Perforation	6	0.04%	0	0.00%
Conductor Fracture	0	0.00%	2	0.01%
Lead Dislodgement	13	0.08%	42	0.26%
Failure to Capture	5	0.03%	34	0.21%
Oversensing	0	0.00%	36	0.22%
Failure to Sense	0	0.00%	5	0.03%
Insulation Breach	0	0.00%	3	0.02%
Abnormal Pacing Impedance	2	0.01%	13	0.08%
Extracardiac Stimulation	1	<0.01%	1	<0.01%
Other	2	0.01%	2	0.01%
Total	29	0.18%	138	0.84%
Total Returned for Analysis	16		53	

Lead Malfunctions	Qty.	Rate
Conductor Fracture	1	<0.01%
Insulation Breach	20	0.12%
Crimps, Welds & Bonds	0	0.00%
Other	0	0.00%
Extrinsic Factors	46	0.28%
Total	67	0.41%



Year	1	2	3	4	5	6	7	8	9	at 113 months
Survival Probability	99.82%	99.70%	99.56%	99.41%	99.19%	99.01%	98.81%	98.57%	98.26%	97.55%
± 1 standard error	0.03%	0.04%	0.06%	0.07%	0.08%	0.10%	0.11%	0.14%	0.20%	0.47%
Sample Size	15,310	13,540	12,200	10,840	9,320	7,540	5,640	3,710	1,700	280



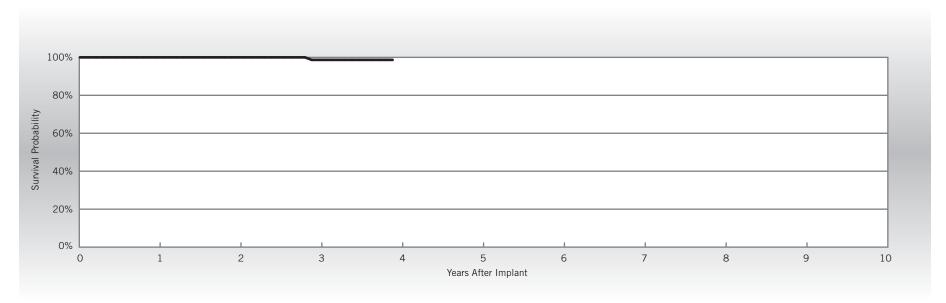
Pacing Leads

Actively Monitored Study Data

Tendril™ Models 1782T & 1782TC

US Regulatory Approval	February 2006	Qualifying Complications	Qty	Rate
Number of Devices Enrolled in Study	165	Oversensing	1	0.61%
Active Devices Enrolled in Study	26			
Cumulative Months of Follow-up	5,747			
Insulation	Silicone			
Type and/or Fixation	Active			
Polarity	Bipolar			
Steroid	Yes			

Malfunctions	Qty	Rate
Conductor Fracture	0	0.00%
Insulation Breach	1	0.61%
Crimps, Welds & Bonds	0	0.00%
Other	0	0.00%
Extrinsic Factors	0	0.00%
Total	1	0.61%



Year	1	2	3	at 47 months			
Survival Probability	100.00%	100.00%	98.68%	98.68%			
± 1 standard error	0.00%	0.00%	1.32%	1.32%			
Sample Size	150	120	80	50			

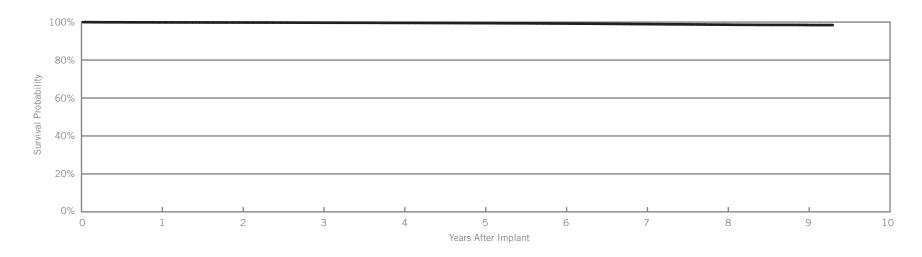


Tendril[™] Models 1788T & 1788TC

US Regulatory Approval	February 2006
Registered US Implants	65,181
Estimated Active US Implants	28,597
Insulation	Silicone
Type and/or Fixation	Active
Polarity	Bipolar
Steroid	Yes
Number of US Advisories	None

		bservations int, ≤30 days)		omplications) days)
	Qty.	Rate	Qty.	Rate
Cardiac Perforation	12	0.02%	7	0.01%
Conductor Fracture	1	<0.01%	20	0.03%
Lead Dislodgement	31	0.05%	72	0.11%
Failure to Capture	30	0.05%	129	0.20%
Oversensing	2	<0.01%	135	0.21%
Failure to Sense	2	<0.01%	21	0.03%
Insulation Breach	1	<0.01%	28	0.04%
Abnormal Pacing Impedance	9	0.01%	38	0.06%
Extracardiac Stimulation	2	<0.01%	6	<0.01%
Other	20	0.03%	24	0.04%
Total	110	0.17%	480	0.74%
Total Returned for Analysis	46		138	

Qty.	Rate
8	0.01%
89	0.14%
1	<0.01%
1	<0.01%
98	0.15%
197	0.30%
	8 89 1 1 98



Year	1	2	3	4	5	6	7	8	9	at 112 months
Survival Probability	99.84%	99.78%	99.68%	99.58%	99.44%	99.25%	98.96%	98.68%	98.47%	98.43%
± 1 standard error	0.01%	0.02%	0.02%	0.03%	0.03%	0.04%	0.05%	0.06%	0.08%	0.09%
Sample Size	60,620	53,030	47,290	42,200	37,620	32,950	27,200	19,620	9,240	500



Pacing Leads

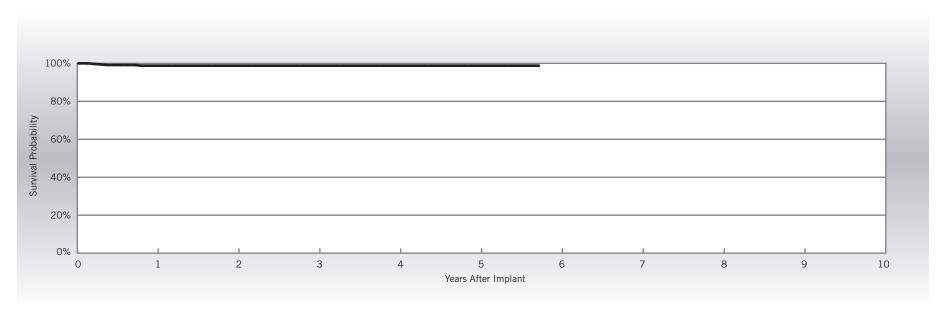
Actively Monitored Study Data

Tendril[™] Models 1788T & 1788TC

US Regulatory Approval	February 2006
Number of Devices Enrolled in Study	363
Active Devices Enrolled in Study	73
Cumulative Months of Follow-up	11,569
Insulation	Silicone
Type and/or Fixation	Active
Polarity	Bipolar
Steroid	Yes

Qualifying Complications	Qty	Rate
Extracardiac Stimulation	1	0.28%
Lead Dislodgement	3	0.83%

Malfunctions	Qty	Rate
Conductor Fracture	0	0.00%
Insulation Breach	0	0.00%
Crimps, Welds & Bonds	0	0.00%
Other	0	0.00%
Extrinsic Factors	0	0.00%
Total	0	0.00%



Year	1	2	3	4	5	at 69 months		
Survival Probability	98.79%	98.79%	98.79%	98.79%	98.79%	98.79%		
± 1 standard error	0.61%	0.61%	0.61%	0.61%	0.61%	0.61%		
Sample Size	320	240	180	110	70	50		



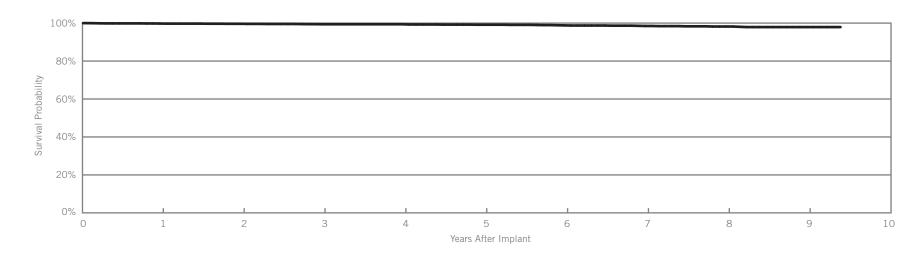
IsoFlex[™] P

Model 1648T

US Regulatory Approval	April 2005			
Registered US Implants	2,834			
Estimated Active US Implants	1,196			
Insulation	Polyurethane			
Type and/or Fixation	Passive			
Polarity	Bipolar			
Steroid	Yes			
Number of US Advisories	None			

		bservations int, ≤30 days)	Chronic Co (>30	omplications) days)
	Qty.	Rate	Qty.	Rate
Cardiac Perforation	0	0.00%	0	0.00%
Conductor Fracture	0	0.00%	4	0.14%
Lead Dislodgement	2	0.07%	2	0.07%
Failure to Capture	2	0.07%	8	0.28%
Oversensing	0	0.00%	2	0.07%
Failure to Sense	1	0.04%	1	0.04%
Insulation Breach	0	0.00%	7	0.25%
Abnormal Pacing Impedance	0	0.00%	3	0.11%
Extracardiac Stimulation	1	0.04%	0	0.00%
Other	0	0.00%	3	0.11%
Total	6	0.21%	30	1.06%
Total Returned for Analysis	1		5	

Qty.	Rate
0	0.00%
10	0.35%
0	0.00%
2	0.07%
4	0.14%
16	0.56%
	0 10 0 2 4



Year	1	2	3	4	5	6	7	8	9	at 113 months
Survival Probability	99.77%	99.64%	99.39%	99.39%	99.15%	98.80%	98.49%	98.20%	97.91%	97.91%
± 1 standard error	0.08%	0.12%	0.16%	0.16%	0.20%	0.24%	0.29%	0.34%	0.40%	0.40%
Sample Size	2,620	2,270	2,020	1,820	1,640	1,470	1,290	980	530	210

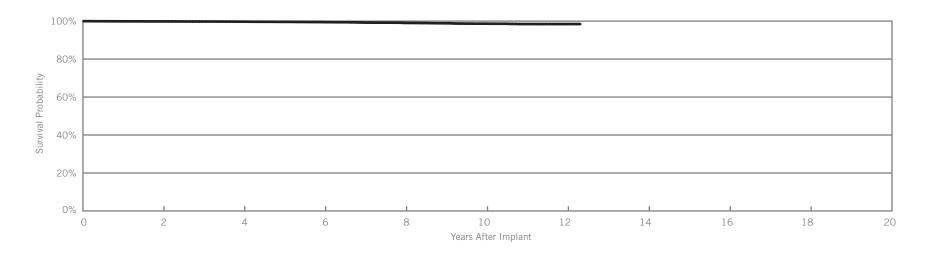


IsoFlex[™] S Model 1642T

US Regulatory Approval	May 2002			
Registered US Implants	27,093			
Estimated Active US Implants	11,268			
Insulation	Silicone			
Type and/or Fixation	Passive			
Polarity	Bipolar			
Steroid	Yes			
Number of US Advisories	None			

		bservations ant, ≤30 days)		omplications) days)
	Qty.	Rate	Qty.	Rate
Cardiac Perforation	0	0.00%	0	0.00%
Conductor Fracture	0	0.00%	6	0.02%
Lead Dislodgement	49	0.18%	39	0.14%
Failure to Capture	6	0.02%	49	0.18%
Oversensing	0	0.00%	30	0.11%
Failure to Sense	3	0.01%	15	0.06%
Insulation Breach	0	0.00%	6	0.02%
Abnormal Pacing Impedance	3	0.01%	6	0.02%
Extracardiac Stimulation	1	<0.01%	2	<0.01%
Other	0	0.00%	2	<0.01%
Total	62	0.23%	155	0.57%
Total Returned for Analysis	39		23	

Lead Malfunctions	Qty.	Rate
Conductor Fracture	0	0.00%
Insulation Breach	19	0.07%
Crimps, Welds & Bonds	1	<0.01%
Other	2	<0.01%
Extrinsic Factors	17	0.06%
Total	39	0.14%



Year	2	4	6	8	10	12	at 148 months		
Survival Probability	99.83%	99.70%	99.48%	99.06%	98.69%	98.49%	98.49%		
± 1 standard error	0.03%	0.04%	0.05%	0.08%	0.13%	0.16%	0.16%		
Sample Size	22,200	17,760	13,080	8,070	3,710	910	210		



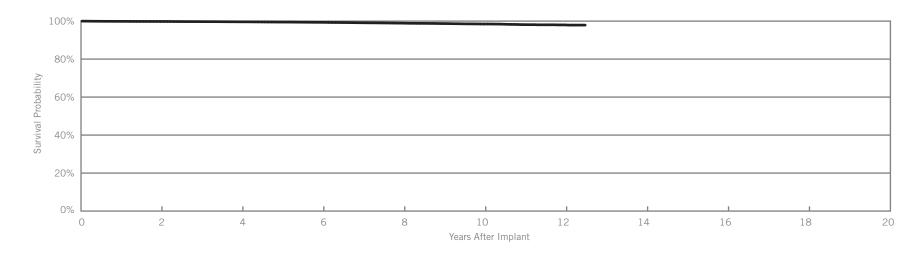
IsoFlex[™] S

Model 1646T

US Regulatory Approval	May 2002			
Registered US Implants	90,287			
Estimated Active US Implants	36,323			
Insulation	Silicone			
Type and/or Fixation	Passive			
Polarity	Bipolar			
Steroid	Yes			
Number of US Advisories	None			

		oservations nt, ≤30 days)		omplications) days)
	Qty.	Rate	Qty.	Rate
Cardiac Perforation	4	<0.01%	2	<0.01%
Conductor Fracture	2	<0.01%	86	0.10%
Lead Dislodgement	37	0.04%	34	0.04%
Failure to Capture	33	0.04%	246	0.27%
Dversensing	0	0.00%	95	0.11%
ailure to Sense	2	<0.01%	11	0.01%
nsulation Breach	2	<0.01%	38	0.04%
Abnormal Pacing Impedance	6	<0.01%	92	0.10%
Extracardiac Stimulation	0	0.00%	3	< 0.01%
Other	2	<0.01%	17	0.02%
Total	88	0.10%	624	0.69%
Total Returned for Analysis	38		86	

Qty.	Rate
20	0.02%
43	0.05%
0	0.00%
6	<0.01%
61	0.07%
130	0.14%
	20 43 0 6 61



Year	2	4	6	8	10	12	at 150 months		
Survival Probability	99.81%	99.62%	99.33%	98.90%	98.44%	97.96%	97.87%		
± 1 standard error	0.01%	0.02%	0.03%	0.05%	0.08%	0.13%	0.16%		
Sample Size	72,700	56,950	40,670	24,760	11,220	2,620	290		



Pacing Leads

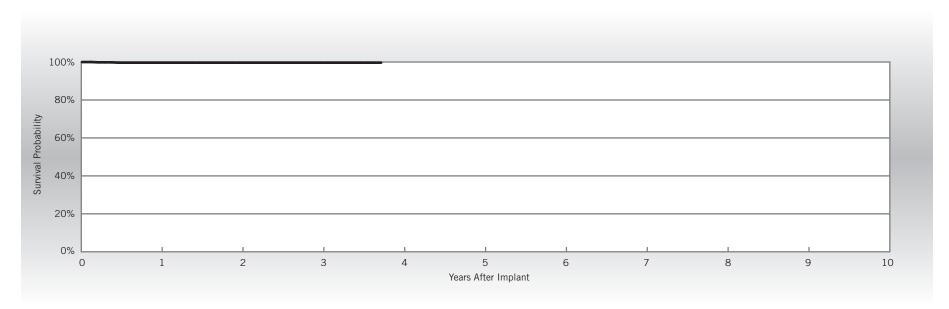
Actively Monitored Study Data

IsoFlex[™] S Model 1646T

US Regulatory Approval	May 2002
Number of Devices Enrolled in Study	641
Active Devices Enrolled in Study	3
Cumulative Months of Follow-up	15,751
Insulation	Silicone
Type and/or Fixation	Passive
Polarity	Bipolar
Steroid	Yes

Qualifying Complications	Qty	Rate
Failure to Capture	1	0.16%
Lead Dislodgement	1	0.16%

Malfunctions	Qty	Rate
Conductor Fracture	0	0.00%
Insulation Breach	0	0.00%
Crimps, Welds & Bonds	0	0.00%
Other	0	0.00%
Extrinsic Factors	0	0.00%
Total	0	0.00%



Year	1	2	3	at 45 months			
Survival Probability	99.67%	99.67%	99.67%	99.67%			
± 1 standard error	0.23%	0.23%	0.23%	0.23%			
Sample Size	570	410	250	60			

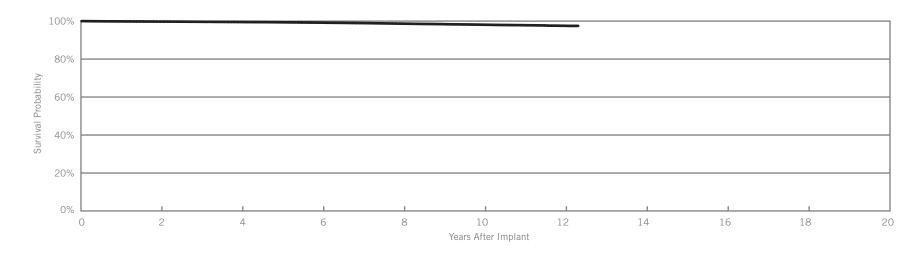


Tendril[™] SDX Models 1688T & 1688TC

US Regulatory Approval	June 2003
Registered US Implants	472,130
Estimated Active US Implants	260,979
Insulation	Silicone
Type and/or Fixation	Active
Polarity	Bipolar
Steroid	Yes
Number of US Advisories	None

	Acute Observations (Post Implant, ≤30 days)		Chronic Co (>30	mplications days)
	Qty.	Rate	Qty.	Rate
Cardiac Perforation	73	0.02%	33	< 0.01%
Conductor Fracture	4	<0.01%	370	0.08%
Lead Dislodgement	291	0.06%	463	0.10%
Failure to Capture	175	0.04%	1065	0.23%
Oversensing	16	<0.01%	1081	0.23%
Failure to Sense	31	<0.01%	114	0.02%
Insulation Breach	10	<0.01%	185	0.04%
Abnormal Pacing Impedance	28	<0.01%	456	0.10%
Extracardiac Stimulation	6	<0.01%	35	< 0.01%
Other	59	0.01%	130	0.03%
Total	693	0.15%	3932	0.83%
Total Returned for Analysis	323		1095	

Qty.	Rate
189	0.04%
641	0.14%
2	<0.01%
14	<0.01%
657	0.14%
1503	0.32%
	189 641 2 14 657



Year	2	4	6	8	10	12	at 148 months		
Survival Probability	99.75%	99.52%	99.19%	98.66%	98.09%	97.54%	97.48%		
± 1 standard error	0.01%	0.01%	0.02%	0.03%	0.04%	0.08%	0.10%		
Sample Size	373,590	275,720	194,280	124,670	62,050	9,370	530		



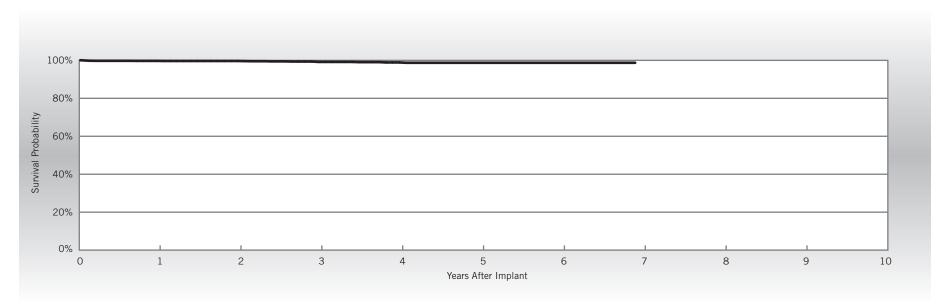
Actively Monitored Study Data

Tendril[™] SDX Models 1688T & 1688TC

US Regulatory Approval	June 2003
Number of Devices Enrolled in Study	2,637
Active Devices Enrolled in Study	532
Cumulative Months of Follow-up	82,855
Insulation	Silicone
Type and/or Fixation	Active
Polarity	Bipolar
Steroid	Yes

Qualifying Complications	Qty	Rate
Abnormal Pacing Impedance	3	0.11%
Conductor Fracture	1	0.04%
Failure to Capture	2	0.08%
Insulation Breach	3	0.11%
Lead Dislodgement	5	0.19%
Oversensing	2	0.08%
Pericardial Effusion	1	0.04%

Malfunctions	Qty	Rate	
Conductor Fracture	1	0.04%	
Insulation Breach	4	0.15%	
Crimps, Welds & Bonds	0	0.00%	
Other	0	0.00%	
Extrinsic Factors	5	0.19%	
Total	10	0.38%	

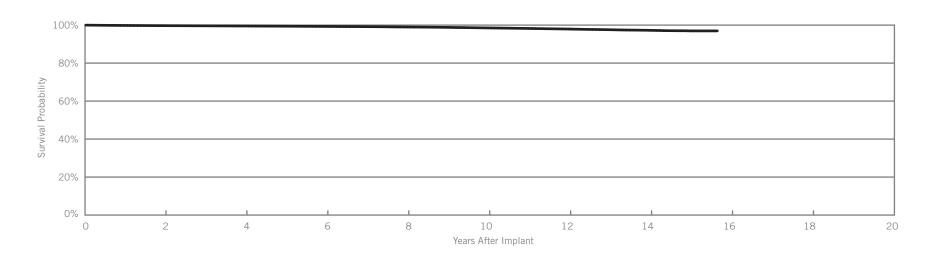


Year	1	2	3	4	5	6	at 83 months		
Survival Probability	99.73%	99.68%	99.19%	98.91%	98.73%	98.73%	98.73%		
± 1 standard error	0.10%	0.11%	0.18%	0.30%	0.35%	0.35%	0.35%		
Sample Size	2,380	1,840	1,280	790	430	220	50		



Tendril[™] SDX Models 1488T & 1488TC

US Regulatory Approval	March 2000	Lead Malfunctions	Qty.	Rate
Registered US Implants	271,461	Conductor Fracture	154	0.06%
Estimated Active US Implants	69,416	Insulation Breach	245	0.09%
Insulation	Silicone	Crimps, Welds & Bonds	5	< 0.01%
Type and/or Fixation	Active	Other	3	<0.01%
Polarity	Bipolar	Extrinsic Factors	347	0.13%
Steroid	Yes	Total	754	0.28%
Number of US Advisories	None			



Year	2	4	6	8	10	12	14	at 188 months	
Survival Probability	99.71%	99.52%	99.29%	99.00%	98.51%	97.92%	97.24%	96.96%	
± 1 standard error	0.01%	0.01%	0.02%	0.02%	0.03%	0.05%	0.07%	0.10%	
Sample Size	224,320	181,400	141,840	108,670	81,800	53,410	19,650	350	



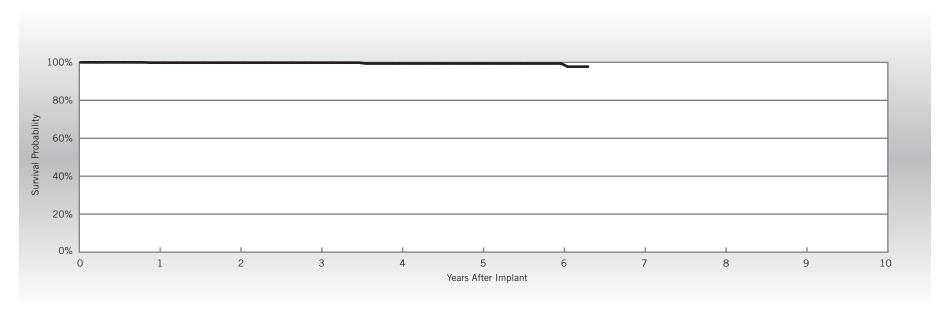
Actively Monitored Study Data

Tendril[™] SDX Models 1488T & 1488TC

March 2000
802
102
25,711
Silicone
Active
Bipolar
Yes

Qualifying Complications	Qty	Rate
Failure to Capture	1	0.12%
Insulation Breach	1	0.12%
Oversensing	2	0.25%

Malfunctions	Qty	Rate
Conductor Fracture	0	0.00%
Insulation Breach	4	0.50%
Crimps, Welds & Bonds	0	0.00%
Other	0	0.00%
Extrinsic Factors	1	0.12%
Total	5	0.62%



Year	1	2	3	4	5	6	at 76 months		
Survival Probability	99.85%	99.85%	99.85%	99.39%	99.39%	99.39%	97.72%		
± 1 standard error	0.15%	0.15%	0.15%	0.48%	0.48%	0.48%	1.72%		
Sample Size	730	580	400	220	110	70	50		



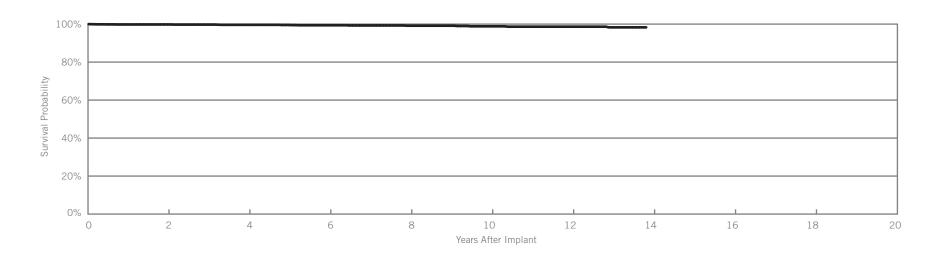
Pacing Leads

Customer Reported Performance Data

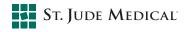
AV Plus™ DX

Model 1368

US Regulatory Approval	May 1999
Registered US Implants	2,811
Estimated Active US Implants	836
Insulation	Silicone
Type and/or Fixation	Passive
Atrial Polarity	Bipolar
Ventricular Polarity	Bipolar
Steroid	Yes
Number of US Advisories	None

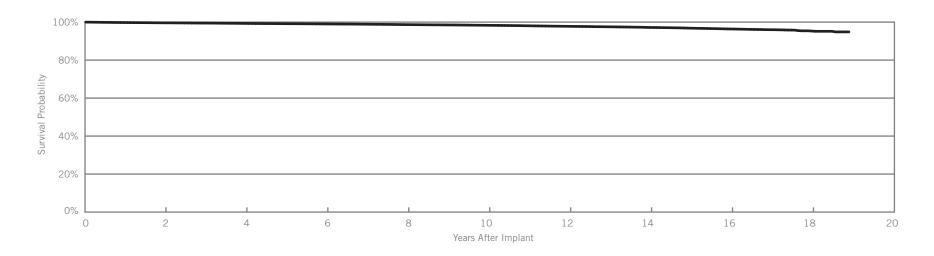


Year	2	4	6	8	10	12	at 166 months		
Survival Probability	99.81%	99.63%	99.39%	99.16%	98.84%	98.64%	98.29%		
± 1 standard error	0.09%	0.13%	0.19%	0.25%	0.34%	0.39%	0.53%		
Sample Size	2,130	1,570	1,140	840	600	390	200		



Tendril[™] DX Models 1388T & 1388TC

US Regulatory Approval	June 1997
Registered US Implants	266,491
Estimated Active US Implants	53,526
Insulation	Silicone
Type and/or Fixation	Active
Polarity	Bipolar
Steroid	Yes
Number of US Advisories	None



Year	2	4	6	8	10	12	14	16	18	at 227 months
Survival Probability	99.62%	99.31%	99.03%	98.67%	98.32%	97.78%	97.19%	96.38%	95.28%	94.85%
± 1 standard error	0.01%	0.02%	0.02%	0.03%	0.03%	0.05%	0.06%	0.08%	0.16%	0.37%
Sample Size	219,980	177,640	140,560	108,520	78,330	53,490	34760	18,700	4,220	200



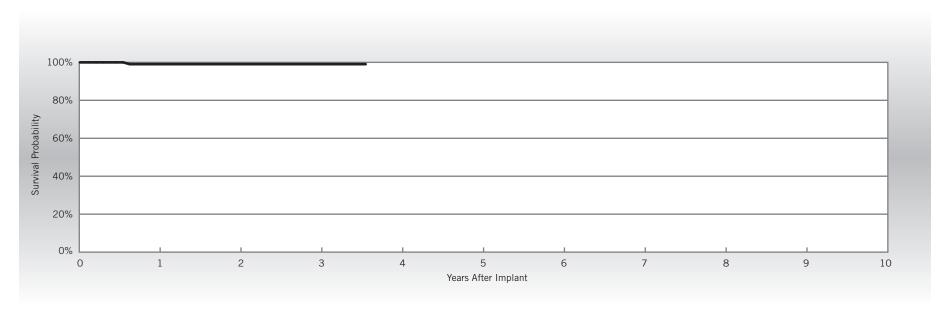
Actively Monitored Study Data

Tendril[™] DX Models 1388T & 1388TC

US Regulatory Approval	June 1997
Number of Devices Enrolled in Study	238
Active Devices Enrolled in Study	17
Cumulative Months of Follow-up	7,001
Insulation	Silicone
Type and/or Fixation	Active
Polarity	Bipolar
Steroid	Yes

Qty	Rate
1	0.42%
1	0.42%
	Qty 1 1

Malfunctions	Qty	Rate
Conductor Fracture	0	0.00%
Insulation Breach	1	0.42%
Crimps, Welds & Bonds	0	0.00%
Other	0	0.00%
Extrinsic Factors	1	0.42%
Total	2	0.84%



Year	1	2	3	at 43 months			
Survival Probability	99.05%	99.05%	99.05%	99.05%			
± 1 standard error	0.67%	0.67%	0.67%	0.67%			
Sample Size	220	170	110	50			



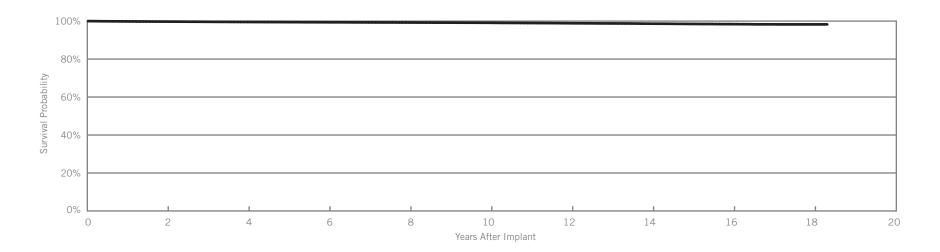
Pacing Leads

Customer Reported Performance Data

Passive Plus[™] DX

Models 1336T, 1342T & 1346T

US Regulatory Approval	(1336T) August 1999; (1342T, 1346T) January 1998
Registered US Implants	198,469
Estimated Active US Implants	39,497
Insulation	Silicone
Type and/or Fixation	Passive
Polarity	Bipolar
Steroid	Yes
Number of US Advisories	None



Year	2	4	6	8	10	12	14	16	18	at 220 months
Survival Probability	99.73%	99.53%	99.37%	99.26%	99.11%	98.86%	98.63%	98.40%	98.27%	98.27%
± 1 standard error	0.01%	0.02%	0.02%	0.02%	0.03%	0.04%	0.05%	0.06%	0.08%	0.08%
Sample Size	161,310	128,930	100,950	77,720	58,490	43,260	26,960	11,940	1,830	200



SUMMARY INFORMATION

Pacing Leads



Pacing Leads

Survival Summary

						Survival P	robability				
Models	Family	1 year	2 year	3 year	4 year	5 year	6 year	7 year	8 year	9 year	10 year
2088TC	Tendril [™] STS	99.79%	99.64%	99.47%	99.24%	98.99%	98.74%				
1999	OptiSense™ Optim™	99.69%	99.55%	99.38%	99.16%	99.06%					
1944	IsoFlex [™] Optim [™]	99.71%	99.59%	99.45%	99.31%	99.10%	98.90%	98.40%			
1948	IsoFlex [™] Optim [™]	99.81%	99.68%	99.50%	99.22%	98.88%	98.46%	97.77%			
1699T/TC	OptiSense™	99.82%	99.72%	99.58%	99.50%	99.32%	99.09%	98.81%	98.54%		
1888T/TC	Tendril™ ST Optim™	99.79%	99.64%	99.46%	99.24%	98.95%	98.61%	98.17%	97.69%	97.34%	
1882T/TC	Tendril [™] ST Optim [™]	99.73%	99.62%	99.50%	99.36%	99.14%	98.79%	98.44%	97.76%		
1782T/TC	Tendril™	99.82%	99.70%	99.56%	99.41%	99.19%	99.01%	98.81%	98.57%	98.26%	
1788T/TC	Tendril™	99.84%	99.78%	99.68%	99.58%	99.44%	99.25%	98.96%	98.68%	98.47%	
1648T	IsoFlex [™] P	99.77%	99.64%	99.39%	99.39%	99.15%	98.80%	98.49%	98.20%	97.91%	
1642T	IsoFlex [™] S	99.88%	99.83%	99.78%	99.70%	99.61%	99.48%	99.26%	99.06%	98.88%	98.69%
1646T	IsoFlex [™] S	99.87%	99.81%	99.71%	99.62%	99.49%	99.33%	99.11%	98.90%	98.69%	98.44%
1688T/TC	Tendril™ SDX	99.85%	99.75%	99.64%	99.52%	99.37%	99.19%	98.95%	98.66%	98.39%	98.09%
1488T/TC	Tendril [™] SDX	99.82%	99.71%	99.62%	99.52%	99.41%	99.29%	99.18%	99.00%	98.81%	98.51%
1368	AV Plus™ DX	99.81%	99.81%	99.75%	99.63%	99.55%	99.39%	99.29%	99.16%	99.16%	98.84%
1388T/TC	Tendril™ + DX	99.77%	99.62%	99.48%	99.31%	99.16%	99.03%	98.88%	98.67%	98.52%	98.32%
1336T, 1342T, 1346T	Passive Plus [™] DX	99.84%	99.73%	99.63%	99.53%	99.45%	99.37%	99.31%	99.26%	99.19%	99.11%



Acute Observation Summary

Post Implant ≤30 Days

	US Regulatory	Registered	Estimated Active US		diac pration	Conc Frac	luctor ture		ead gement		ıre to ture	Overs	ensing		ure to ense		lation each	Pa	ormal cing dance		cardiac ulation	O	ther	Тс	otal	Total Returned
Models	Approval	US Implants	Implants	Qty.	Rate	Qty.	Rate	Qty.	Rate	Qty.	Rate	Qty.	Rate	Qty.	Rate	Qty.	Rate	Qty.	Rate	Qty.	Rate	Qty.	Rate	Qty.	Rate	for Analysis
2088TC	May-09	425,470	327,035	66	0.02%	5	<0.01%	378	0.09%	103	0.02%	31	<0.01%	17	<0.01%	10	<0.01%	24	<0.01%	3	<0.01%	87	0.02%	724	0.17%	346
1999	May-07	40,670	28,533	2	<0.01%	0	0.00%	48	0.12%	6	0.01%	5	0.01%	3	<0.01%	1	<0.01%	0	0.00%	0	0.00%	10	0.02%	75	0.18%	44
1944	Mar-08	14,223	9,491	0	0.00%	0	0.00%	49	0.34%	7	0.05%	0	0.00%	2	0.01%	0	0.00%	0	0.00%	2	0.01%	1	<0.01%	61	0.43%	35
1948	Mar-08	53,449	35,836	2	<0.01%	0	0.00%	36	0.07%	23	0.04%	1	<0.01%	1	<0.01%	4	<0.01%	1	<0.01%	1	<0.01%	5	<0.01%	74	0.14%	38
1699T/TC	May-07	22,873	11,497	1	<0.01%	0	0.00%	4	0.02%	3	0.01%	2	<0.01%	8	0.03%	0	0.00%	0	0.00%	0	0.00%	2	<0.01%	20	0.09%	16
1888T/TC	Jun-06	299,938	168,571	39	0.01%	7	<0.01%	153	0.05%	84	0.03%	16	<0.01%	14	<0.01%	7	<0.01%	9	<0.01%	5	<0.01%	40	0.01%	374	0.12%	197
1882T/TC	Jun-06	43,633	27,867	3	<0.01%	0	0.00%	38	0.09%	10	0.02%	5	0.01%	4	<0.01%	0	0.00%	0	0.00%	0	0.00%	13	0.03%	73	0.17%	42
1782T/TC	Feb-06	16,399	7,848	6	0.04%	0	0.00%	13	0.08%	5	0.03%	0	0.00%	0	0.00%	0	0.00%	2	0.01%	1	<0.01%	2	0.01%	29	0.18%	16
1788T/TC	Feb-06	65,181	28,597	12	0.02%	1	<0.01%	31	0.05%	30	0.05%	2	<0.01%	2	<0.01%	1	<0.01%	9	0.01%	2	<0.01%	20	0.03%	110	0.17%	46
1648T	Apr-05	2,834	1,196	0	0.00%	0	0.00%	2	0.07%	2	0.07%	0	0.00%	1	0.04%	0	0.00%	0	0.00%	1	0.04%	0	0.00%	6	0.21%	1
1642T	May-02	27,093	11,268	0	0.00%	0	0.00%	49	0.18%	6	0.02%	0	0.00%	3	0.01%	0	0.00%	3	0.01%	1	<0.01%	0	0.00%	62	0.23%	39
1646T	May-02	90,287	36,323	4	<0.01%	2	<0.01%	37	0.04%	33	0.04%	0	0.00%	2	<0.01%	2	<0.01%	6	<0.01%	0	0.00%	2	<0.01%	88	0.10%	38
1688T/TC	Jun-03	472,130	260,979	73	0.02%	4	<0.01%	291	0.06%	175	0.04%	16	<0.01%	31	<0.01%	10	<0.01%	28	<0.01%	6	<0.01%	59	0.01%	693	0.15%	323

Chronic Complication Summary

>30 Days

	US Regulatory	Registered	Estimated Active US		rdiac pration		luctor ture		ead gement		ire to oture	Overs	ensing		ure to nse		llation each	Pa	ormal cing dance		cardiac ulation	Ot	her	Тс	otal	Total Returned
Models	Approval	US Implants	Implants	Qty.	Rate	Qty.	Rate	Qty.	Rate	Qty.	Rate	Qty.	Rate	Qty.	Rate	Qty.	Rate	Qty.	Rate	Qty.	Rate	Qty.	Rate	Qty.	Rate	for Analysis
2088TC	May-09	425,470	327,035	35	<0.01%	100	0.02%	476	0.11%	346	0.08%	863	0.20%	64	0.02%	115	0.03%	75	0.02%	14	<0.01%	84	0.02%	2172	0.51%	853
1999	May-07	40,670	28,533	0	0.00%	2	<0.01%	111	0.27%	32	0.08%	68	0.17%	14	0.03%	21	0.05%	3	<0.01%	0	0.00%	11	0.03%	262	0.64%	122
1944	Mar-08	14,223	9,491	1	<0.01%	4	0.03%	35	0.25%	17	0.12%	24	0.17%	4	0.03%	4	0.03%	1	<0.01%	1	<0.01%	2	0.01%	93	0.65%	19
1948	Mar-08	53,449	35,836	9	0.02%	42	0.08%	44	0.08%	72	0.13%	109	0.20%	2	<0.01%	28	0.05%	19	0.04%	2	<0.01%	4	<0.01%	331	0.62%	72
1699T/TC	May-07	22,873	11,497	0	0.00%	11	0.05%	40	0.17%	30	0.13%	62	0.27%	18	0.08%	4	0.02%	16	0.07%	3	0.01%	3	0.01%	187	0.82%	61
1888T/TC	Jun-06	299,938	168,571	37	0.01%	163	0.05%	458	0.15%	539	0.18%	1130	0.38%	91	0.03%	223	0.07%	167	0.06%	30	0.01%	78	0.03%	2916	0.97%	979
1882T/TC	Jun-06	43,633	27,867	3	<0.01%	7	0.02%	93	0.21%	50	0.11%	95	0.22%	11	0.03%	27	0.06%	8	0.02%	1	<0.01%	18	0.04%	313	0.72%	118
1782T/TC	Feb-06	16,399	7,848	0	0.00%	2	0.01%	42	0.26%	34	0.21%	36	0.22%	5	0.03%	3	0.02%	13	0.08%	1	<0.01%	2	0.01%	138	0.84%	53
1788T/TC	Feb-06	65,181	28,597	7	0.01%	20	0.03%	72	0.11%	129	0.20%	135	0.21%	21	0.03%	28	0.04%	38	0.06%	6	<0.01%	24	0.04%	480	0.74%	138
1648T	Apr-05	2,834	1,196	0	0.00%	4	0.14%	2	0.07%	8	0.28%	2	0.07%	1	0.04%	7	0.25%	3	0.11%	0	0.00%	3	0.11%	30	1.06%	5
1642T	May-02	27,093	11,268	0	0.00%	6	0.02%	39	0.14%	49	0.18%	30	0.11%	15	0.06%	6	0.02%	6	0.02%	2	<0.01%	2	<0.01%	155	0.57%	23
1646T	May-02	90,287	36,323	2	<0.01%	86	0.10%	34	0.04%	246	0.27%	95	0.11%	11	0.01%	38	0.04%	92	0.10%	3	<0.01%	17	0.02%	624	0.69%	86
1688T/TC	Jun-03	472,130	260,979	33	<0.01%	370	0.08%	463	0.10%	1065	0.23%	1081	0.23%	114	0.02%	185	0.04%	456	0.10%	35	<0.01%	130	0.03%	3932	0.83%	1095

Definitions of observations and complications can be found on pages 9-10.



Pacing Leads

U.S. Malfunction Summary

	Registered US	Percent Returned for		luctor cture		lation each	Wel	nps, ds & nds	Ot	her		insic tors	То	otal
Models	Implants	Analysis	Qty.	Rate	Qty.	Rate	Qty.	Rate	Qty.	Rate	Qty.	Rate	Qty.	Rate
2088TC	425,470	2.40%	25	<0.01%	309	0.07%	0	0.00%	22	<0.01%	652	0.15%	1008	0.24
1999	40,670	2.50%	3	<0.01%	20	0.05%	0	0.00%	4	<0.01%	111	0.27%	138	0.34
1944	14,223	3.40%	0	0.00%	5	0.04%	0	0.00%	1	<0.01%	16	0.11%	22	0.15
1948	53,449	2.20%	7	0.01%	40	0.07%	0	0.00%	1	<0.01%	50	0.09%	98	0.18
1699T/TC	22,873	3.90%	13	0.06%	19	0.08%	0	0.00%	0	0.00%	49	0.21%	81	0.3
1888T/TC	299,938	3.10%	28	<0.01%	561	0.19%	1	<0.01%	12	<0.01%	690	0.23%	1292	0.4
1882T/TC	43,633	2.70%	2	<0.01%	38	0.09%	0	0.00%	3	<0.01%	102	0.23%	145	0.3
1782T/TC	16,399	4.10%	1	<0.01%	20	0.12%	0	0.00%	0	0.00%	46	0.28%	67	0.4
1788T/TC	65,181	4.30%	8	0.01%	89	0.14%	1	<0.01%	1	<0.01%	98	0.15%	197	0.3
1648T	2,834	4.10%	0	0.00%	10	0.35%	0	0.00%	2	0.07%	4	0.14%	16	0.5
1642T	27,093	3.60%	0	0.00%	19	0.07%	1	<0.01%	2	<0.01%	17	0.06%	39	0.14
1646T	90,287	3.70%	20	0.02%	43	0.05%	0	0.00%	6	<0.01%	61	0.07%	130	0.1
1688T/TC	472,130	3.80%	189	0.04%	641	0.14%	2	<0.01%	14	<0.01%	657	0.14%	1503	0.3
1488T/TC	271,461	4.00%	154	0.06%	245	0.09%	5	<0.01%	3	<0.01%	347	0.13%	754	0.2

Worldwide Malfunction Summary (Tendril[™] 2088 & 1888)

	Worldwide	Percent Returned for		luctor		lation each	Wel	nps, ds & nds	Ot	her		insic tors	То	tal
Models	Sales	Analysis	Qty.	Rate	Qty.	Rate	Qty.	Rate	Qty.	Rate	Qty.	Rate	Qty.	Rate
2088TC	949,931	1.3%	35	<0.01%	390	0.04%	3	<0.01%	231	0.02%	890	0.09%	1549	0.16%
1888T/TC	1,027,459	1.2%	47	<0.01%	700	0.07%	2	<0.01%	162	0.02%	1,117	0.11%	2028	0.20%





Actively Monitored Study Data Summary

Qualifying Complications

	Number of Devices	Active Devices	Cumulative Months of	Pa	ormal cing dance		diac vration		luctor cture		cardiac ulation	1	ilure to oture	1	ilure to ense		lation each		ead gement	Overs	ensing		ardial usion	Skin I	Erosion	Т	otal
Models	Enrolled	Enrolled	Follow-Up	Qty.	Rate	Qty.	Rate	Qty.	Rate	Qty.	Rate	Qty.	Rate	Qty.	Rate	Qty.	Rate	Qty.	Rate	Qty.	Rate	Qty.	Rate	Qty.	Rate	Qty.	Rate
2088	3,804	2,297	150,734	1	0.03%	1	0.03%	1	0.03%	0	0.00%	2	0.05%	1	0.03%	5	0.13%	14	0.37%	8	0.21%	1	0.03%	0	0.00%	34	0.89%
1999	855	501	31,661	1	0.12%	0	0.00%	1	0.12%	0	0.00%	0	0.00%	2	0.23%	1	0.12%	10	1.17%	1	0.12%	0	0.00%	0	0.00%	16	1.87%
1944	104	39	5,162	0	0.00%	0	0.00%	0	0.00%	0	0.00%	0	0.00%	0	0.00%	0	0.00%	1	0.96%	0	0.00%	0	0.00%	0	0.00%	1	0.96%
1948	766	241	29,927	0	0.00%	0	0.00%	0	0.00%	0	0.00%	0	0.00%	0	0.00%	1	0.13%	2	0.26%	0	0.00%	0	0.00%	0	0.00%	3	0.39%
1699T/TC	1,451	419	63,583	1	0.07%	0	0.00%	1	0.07%	0	0.00%	1	0.07%	0	0.00%	1	0.07%	8	0.55%	1	0.07%	0	0.00%	0	0.00%	13	0.90%
1888T/TC	14,513	5,435	731,028	6	0.04%	2	0.01%	6	0.04%	4	0.03%	8	0.06%	4	0.03%	25	0.17%	55	0.38%	15	0.10%	0	0.00%	1	<0.01%	126	0.87%
1882T/TC	689	303	34,107	0	0.00%	0	0.00%	0	0.00%	1	0.15%	0	0.00%	0	0.00%	0	0.00%	2	0.29%	1	0.15%	0	0.00%	1	0.15%	5	0.73%
1782T/TC	165	26	5,747	0	0.00%	0	0.00%	0	0.00%	0	0.00%	0	0.00%	0	0.00%	0	0.00%	0	0.00%	1	0.61%	0	0.00%	0	0.00%	1	0.61%
1788T/TC	363	73	11,569	0	0.00%	0	0.00%	0	0.00%	1	0.28%	0	0.00%	0	0.00%	0	0.00%	3	0.83%	0	0.00%	0	0.00%	0	0.00%	4	1.10%
1646T	641	3	15,751	0	0.00%	0	0.00%	0	0.00%	0	0.00%	1	0.16%	0	0.00%	0	0.00%	1	0.16%	0	0.00%	0	0.00%	0	0.00%	2	0.31%
1688T/TC	2,637	532	82,855	3	0.11%	0	0.00%	1	0.04%	0	0.00%	2	0.08%	0	0.00%	3	0.11%	5	0.19%	2	0.08%	1	0.04%	0	0.00%	17	0.64%
1488T/TC	802	102	25,711	0	0.00%	0	0.00%	0	0.00%	0	0.00%	1	0.12%	0	0.00%	1	0.12%	0	0.00%	2	0.25%	0	0.00%	0	0.00%	4	0.50%
1388T/TC	238	17	7,001	0	0.00%	0	0.00%	0	0.00%	0	0.00%	1	0.42%	0	0.00%	1	0.42%	0	0.00%	0	0.00%	0	0.00%	0	0.00%	2	0.84%

Malfunction Summary

	Number of Devices	Percent Returned for		luctor cture		lation each	Wel	mps, Ids & onds	Ot	her		rinsic ctors	то	otal
Models	Enrolled	Analysis	Qty.	Rate	Qty.	Rate	Qty.	Rate	Qty.	Rate	Qty.	Rate	Qty.	Rate
2088	3,804	2.80%	0	0.00%	11	0.29%	0	0.00%	0	0.00%	10	0.26%	21	0.55%
1999	855	3.70%	0	0.00%	2	0.23%	0	0.00%	0	0.00%	8	0.94%	10	1.179
1944	104	1.90%	0	0.00%	0	0.00%	0	0.00%	0	0.00%	0	0.00%	0	0.00%
1948	766	3.10%	0	0.00%	4	0.52%	0	0.00%	0	0.00%	1	0.13%	5	0.65%
1699T/TC	1,451	2.60%	0	0.00%	1	0.07%	0	0.00%	0	0.00%	5	0.34%	6	0.41%
1888T/TC	14,513	2.50%	3	0.02%	21	0.14%	0	0.00%	0	0.00%	33	0.23%	57	0.39%
1882T/TC	689	3.00%	0	0.00%	2	0.29%	0	0.00%	0	0.00%	0	0.00%	2	0.29%
1782T/TC	165	2.40%	0	0.00%	1	0.61%	0	0.00%	0	0.00%	0	0.00%	1	0.61%
1788T/TC	363	1.90%	0	0.00%	0	0.00%	0	0.00%	0	0.00%	0	0.00%	0	0.009
1646T	641	0.90%	0	0.00%	0	0.00%	0	0.00%	0	0.00%	0	0.00%	0	0.009
1688T/TC	2,637	3.80%	1	0.04%	4	0.15%	0	0.00%	0	0.00%	5	0.19%	10	0.389
1488T/TC	802	3.00%	0	0.00%	4	0.50%	0	0.00%	0	0.00%	1	0.12%	5	0.62
1388T/TC	238	1.70%	0	0.00%	1	0.42%	0	0.00%	0	0.00%	1	0.42%	2	0.849

A list of complications can be found on page 15. Definitions of malfunction categories can be found on pages 10-12.

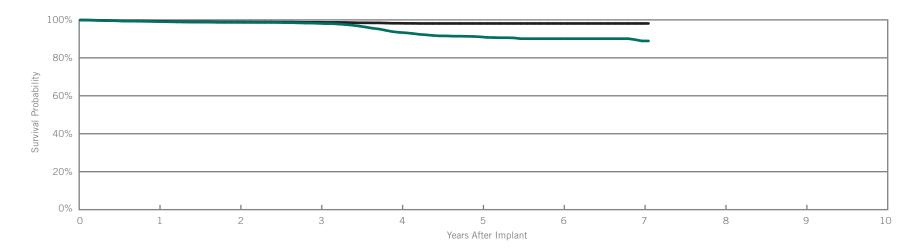


IMPLANTABLE CARDIAC MONITORS (ICMS)



SJM Confirm[™]

lodel DM2100			Mal	functions
US Regulatory Approval	August 2008		Qty	Rate
Registered US Implants	18,676	Electrical Component	13	0.07%
Estimated Active US Implants	8,926	Electrical Interconnect	1	<0.01%
Estimated Longevity	3 Years*	Battery	17	0.09%
Normal Battery Depletion	157	Software/Firmware	10	0.05%
Number of US Advisories (see pg. 305)	One	Mechanical	0	0.00%
		Possible Early Battery Depletion	8	0.04%
		Other	36	0.19%
		Total	85	0.46%



Including Normal Battery Depletion

Year	1	2	3	4	5	6	7	at 85 months	
Survival Probability	99.12%	98.68%	98.17%	93.41%	91.08%	90.10%	88.90%	88.90%	
± 1 standard error	0.07%	0.09%	0.12%	0.30%	0.39%	0.44%	0.58%	0.74%	
Sample Size	16,130	11,770	8,350	5,460	3,280	1,800	720	230	

Excluding Normal Battery Depletion

Year	1	2	3	4	5	6	7	at 85 months	
Survival Probability	99.27%	98.90%	98.74%	98.21%	98.11%	98.11%	98.11%	98.11%	
± 1 standard error	0.07%	0.09%	0.10%	0.14%	0.15%	0.15%	0.15%	0.15%	

*After 12 month shelf-life.



SUMMARY INFORMATION

Implantable Cardiac Monitors (ICMs)



Survival Summary

Including Normal Battery Depletion

		Survival Probability									
Models	Family	1 year	2 year	3 year	4 year	5 year	6 year	7 year	8 year	9 year	10 year
DM2100	SJM Confirm [™]	99.12%	98.68%	98.17%	93.41%	91.08%	90.10%	88.90%			

Excluding Normal Battery Depletion

		Survival Probability									
Models	Family	1 year	2 year	3 year	4 year	5 year	6 year	7 year	8 year	9 year	10 year
DM2100	SJM Confirm [™]	99.27%	98.90%	98.74%	98.21%	98.11%	98.11%	98.11%			

U.S. Malfunction Summary

				Malfunctions															
		Registered	Percent Returned for	Electrical Component				Battery		Software/ Firmware		Mechanical		Possible Early Battery Depletion		Other		Total	
Models	Family	US Implants	Analysis	Qty.	Rate	Qty.	Rate	Qty.	Rate	Qty.	Rate	Qty.	Rate	Qty.	Rate	Qty.	Rate	Qty.	Rate
DM2100	SJM Confirm [™]	18,676	14.70%	13	0.07%	1	<0.01%	17	0.09%	10	0.05%	0	0.00%	8	0.04%	36	0.19%	85	0.46%



Update on Riata[™] Lead Performance

Registry and Post-Market Studies

Prospective, monitored registries continue to provide the best data to support clinical decision making. St. Jude Medical initiated the Riata Lead Evaluation Study (RLES), which began in December 2011 and has enrolled 782 patients with Riata leads at sites in U.S., Canada and Japan. Phase I of the study involved enrollment, collection of patient information, thorough (3 angle) cinefluoroscopic imaging, and adjudication of cinefluoroscopic data by experienced, independent electrophysiologists for the presence of externalized conductors. U.S., Canadian, and Japanese data from Phase I were first reported by St. Jude Medical in the November 2012 Product Performance Report 2nd Edition. RLES data was subsequently presented at the 2013 and 2014 Heart Rhythm Society Scientific Sessions and detailed in a peer-reviewed manuscript.^{1,2,3}

In 2013, St. Jude Medical expanded the RLES to include Durata[™] and Quicksite[™]/Quickflex[™] leads and to increase the quantity of Riata[™] and Riata[™] ST leads. The expanded study, known as the "St. Jude Medical Cardiac Lead Assessment Study" (CLAS), began enrollment in February 2013 to ensure at least 500 leads in each of the following lead families: Riata, Riata ST, Durata and Quicksite/Quickflex. Under the new CLAS protocol, patients will be followed every six months for three years and cinefluoroscopy will be done at the enrollment, 1-year, 2-year and 3-year follow-up visits. The main objective of the study is to determine the prevalence and incidence of lead compromise evidenced by imaging (includes externalized conductors and other visual lead anomalies) and electrical dysfunction in Riata, Riata ST, Quicksite/Quickflex and Durata leads. All images were adjudicated by an independent panel of experienced electrophysiologists for determining the presence of externalized conductors. Additionally, upon occurrence of a lead revision during follow-up, another physician panel determined whether electrical dysfunction had occurred based upon predefined criteria.⁴ Enrollment is ongoing in CLAS. The following summaries for Riata/Riata ST and QuickSite/QuickFlex leads represent all data collected as of February 29, 2016. The Durata leads CLAS summary is available on page 282.

⁴ Electrical dysfunction is defined as a lead that exhibits at least one of the following criteria: 1) Presence of non-physiologic noise not due to external interference. 2) Rise in pace/sense (p/s) conductor impedance to > 2000 Ω or increase of more than 200 Ω over previous 6 months or increase of 400 Ω over any period of time. 3) Decrease of more than 200 Ω over previous 6 months or to impedance < 200 Ω from baseline impedance > 300 Ω or decrease of 400 Ω over any period of time. 4) Change in any high voltage coil impedance of > 25 Ω or to > 125 Ω or < 20 Ω . 5) A capture threshold > 5 V or an increase of > 2 V from baseline (all measurements) of < 1 V.



¹ David Hayes, Roger Freedman, Mark Niebauer, Vance Plumb, Jay Dinerman, Scott Beau, Anne Curtis, Incidence of New Externalized Conductors and Electrical Dysfunction in Riata and Riata ST Silicone ICD Leads: 1 year Results from a Prospective, Multicenter Study, Heart Rhythm Society's Annual Scientific Sessions, San Francisco, CA, May 8, 2014.

² David Hayes, Roger Freedman, Anne Curtis, Mark Niebauer, G.Neal Kay, Jay Dinerman, Scott Beau, Wilson Wong, *Prevalence of Externalized Conductors in Riata and Riata ST Silicone ICD Leads: Results from a Prospective, Multicenter Study*, Heart Rhythm Society's Annual Scientific Sessions, Denver, CO, May 9, 2013.

³ David Hayes, Roger Freedman, Anne B. Curtis, Mark Niebauer, G. Neal Kay, Jay Dinerman, Scott Beau, *Prevalence of Externalized Conductors in Riata and Riata ST Silicone Leads: Results from the Prospective, Multicenter, Riata Lead Evaluation Study, Heart Rhythm*, Vol. 10, Issue 12, Pages 1778-1782, December 2013.

Riata[™]/**Riata[™] ST CLAS Summary (as of February 29, 2016):** A total of 776 patients with Riata/Riata ST silicone leads across 23 centers (8F/7F= 66.6%/33.4%) were analyzed at enrollment. The prevalence of externalized conductors (EC) at enrollment was significantly lower in 7F Riata ST leads compared to 8F Riata leads (9.3% vs. 24.0%, p<0.0001). A total of 546 patients (70%) completed at least 1 year of follow-up with fluoroscopic evaluation. The incidence of new EC during the first year of follow-up in the study was 1.7% (3/176) in 7F leads and 4.3% (12/279) in 8F leads (p = 0.13). A total of 425 patients (55%) completed at least 2 years of follow-up with fluoroscopic evaluation. The incidence of new EC during the second year of follow-up in the study was 2.2% (3/138) in 7F leads and 7.2% (15/208) in 8F leads (p = 0.04). A total of 293 patients (38%) completed at least 3 years of follow-up with fluoroscopic evaluation. The incidence of new EC during the third year of follow-up in the study was 0.9% (1/109) in 7F leads and 10.2% (13/128) in 8F leads (p = 0.003). A total of 28 leads (10 with EC, 18 without EC) were identified as having electrical dysfunction. The electrical failure rate is 5.1% (10/195) in leads with EC and 3.1% (18/581) in leads without EC; the difference is not statistically significant at p = 0.19. Fluoroscopy data for 28 additional leads are pending adjudication and the minimum enrollment of Riata/Riata ST leads has been met in the Cardiac Lead Assessment Study.

QuickSiteTM/**QuickFlex**TM **CLAS Summary (as of February 29, 2016):** A total of 600 patients implanted with QuickSite/QuickFlex Left Ventricular CRT leads at 42 centers underwent fluoroscopic evaluation. These include 93 leads implanted in 2006, 113 leads in 2007, 135 leads in 2008, 171 leads in 2009, and 88 leads in 2010, with an implant duration of 5.0±1.4 years (mean±stdev; median = 4.9 years; IQR = 4.0 to 5.9 years) at enrollment. The prevalence of externalized conductors at enrollment was 1.5%. A total of 405 patients (68%) completed at least 1 year of follow-up with fluoroscopic evaluation. The incidence of new EC at 1 year of follow-up was 4.0% (16/400). A total of 216 patients (36%) completed at least 2 years of follow-up with fluoroscopic evaluation. The incidence of new EC at 2 years of follow-up was 1.0% (2/208). A total of 2 leads were identified as having electrical dysfunction. Neither of these 2 leads exhibited externalized conductors. Fluoroscopy data for 35 additional leads are pending adjudication and enrollment of QuickSite/QuickFlex leads is on-going in the Cardiac Lead Assessment Study.

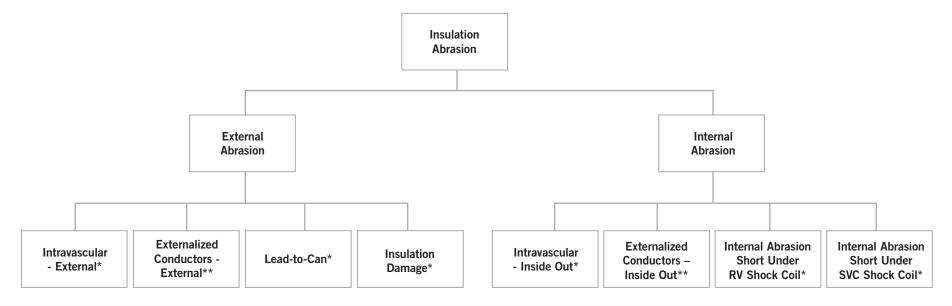
Customer Reported Performance Data

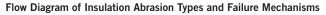
St. Jude Medical understands that the passive system of complaint reporting and returned product analysis results in under-reporting and hence underestimates the true failure rate associated with any given failure mechanism. This is especially true for externalized conductors since most manifest as visual anomalies only with normal electrical performance. While acknowledging these limitations, St. Jude Medical provides externalized conductor rates from the passive data system to maintain continuity with previously published data and to provide full disclosure of the data available to St. Jude Medical. As of February 29, 2016, there were

5,258 cases of externalized conductors reported to St. Jude Medical worldwide on Riata[™] (8F) and Riata[™] ST (7F) silicone defibrillation leads, equating to a 2.85% (4,444/156,000) incidence rate for Riata (8F) and 1.15% (814/70,600) for Riata ST (7F) leads. Of these 5,258 leads, 3,960 were not returned and 1,298 were returned for analysis.

As with any lead, there are failure mechanisms other than externalized conductors which result from insulation abrasion. Historically, the rate of all-cause insulation abrasion failures has been reported in the range of 3 to 10% (Kleemann et al., Annual Rate of Transvenous Defibrillation Lead Defects in Implantable Cardioverter Defibrillators over a Period > 10 years, Circulation 2007; 115:2474-2480). The most common form of insulation abrasion has been lead-to-can abrasion occurring in the pocket area. Externalization of conductors is another manifestation of insulation abrasion. It is most commonly caused by a mechanism referred to as inside-out abrasion, where the conductor cables become visible outside the insulation body. Approximately 86% of confirmed externalized conductors from product returns analysis are caused by inside-out abrasion, while 14% result from external sources of abrasion.

A flow diagram depicting specific insulation abrasion failure mechanisms for Riata[™] and Riata[™] ST silicone leads is shown in the following figure.





*Determined by returned product analysis.

**Includes cases determined by returned product analysis as well as cases identified only by fluoroscopy or visualization of explanted leads.



Definitions of the failure mechanisms are provided below:

- **External Abrasion:** Abrasion resulting from direct contact with an implanted device (e.g., pulse generator can, another lead), calcified anatomy, or anatomical structure that results in an outer insulation breach.
- Internal Abrasion: "Inside-out" abrasion between a lead conductor and the outer insulation that results in an insulation breach.
- Intravascular Abrasion External: Direct contact with a foreign body (e.g., another lead), calcified anatomy, or cardiac structure within the vascular system or the heart that results in an outer insulation breach. The nature of the breach does not result in the conductors becoming visible outside the lead body. Determined by returned product analysis.
- Externalized Conductors External Source of Abrasion: Direct contact with a foreign body (e.g., another lead), calcified anatomy, or cardiac structure within the vascular system or the heart that results in an outer insulation breach and the normally contained conductors becoming visible outside the lead body. Includes cases determined by returned product analysis as well as cases identified only by fluoroscopy or visualization of explanted leads. For those cases not returned, the assignment of an external source of abrasion is based on the fraction of externalized conductor cases identified by returned product analysis as external.
- Lead-to-Can Abrasion: Direct contact between the lead and the can (i.e. pacemaker, ICD, or CRT-D) that results in an outer insulation breach. Determined by returned product analysis.
- Insulation Damage: Insulation breaches that result from external mechanisms, including clavicular crush and outside-in abrasion by lead conductors. Determined by returned product analysis.
- Intravascular Abrasion Inside Out: "Inside-out" abrasion between a lead conductor and the outer insulation within the vascular system or the heart that results in an outer insulation breach. The nature of the breach does not result in the conductors becoming visible outside the lead body. Determined by returned product analysis.
- Externalized Conductors Inside-Out: Outward abrasion of conductors that results in an outer insulation breach within the vascular system or heart and the normally contained conductors becoming visible outside the lead body. Includes cases determined by returned product analysis as well as cases identified only by fluoroscopy or visualization of explanted leads. For those cases not returned, the assignment of an inside-out source of abrasion is based on the fraction of externalized conductor cases identified by returned product analysis as inside-out.
- Internal Abrasion Short under RV Shock Coil: Outward abrasion of the conductor cables under the RV shock coil that results in breaches of the outermost silicone insulation and the ETFE cable insulator, allowing the exposed metal surface of the conductor cables to make direct contact with, and potentially short against, the overlying RV shock coil. Determined by returned product analysis.



Internal Abrasion Short under SVC Shock Coil: Outward abrasion of the conductor cables under the SVC shock coil that results in breaches of the outermost silicone insulation and the ETFE cable insulator, allowing the exposed metal surface of the conductor cables to make direct contact with, and potentially short against, the overlying SVC shock coil. Determined by returned product analysis.

The table below summarizes the incidence of insulation abrasion failure mechanisms confirmed by returns analysis of Riata[™] and Riata[™] ST leads. Approximately 12,700 Riata and Riata ST leads have been returned for analysis worldwide through February 29, 2016. Returned leads may exhibit more than one failure mechanism; hence the incidence rates presented in the table are not mutually exclusive. Note that the rates for externalized conductors also include visual-only observations that have been reported for leads remaining implanted.

Insulation Failure Mechanism	Abrasion Type	Riata (8F) Worldwide (WW) Incidence Rate (WW Sales = 156,100)	Riata ST (7F) Worldwide (WW) Incidence Rate (WW Sales = 70,600)
Intravascular – External*	External Abrasion	0.45%	0.45%
Externalized Conductors – External**	External Abrasion	0.39%	0.20%
Lead-to-Can*	External Abrasion	0.84%	0.77%
Insulation Damage*	External Abrasion	0.10%	0.06%
Intravascular - Inside Out*	Internal Abrasion	0.48%	0.31%
Externalized Conductors - Inside Out**	Internal Abrasion	2.47%	0.96%
Internal Abrasion Short Under RV Shock Coil*	Internal Abrasion	0.10%	0.04%
Internal Abrasion Short Under SVC Shock Coil*	Internal Abrasion	0.08%	0.016%

Riata[™] (8F) and Riata[™] ST (7F) Lead Insulation Abrasion Failure Mechanisms from Complaints and Returns

*Determined by returned product analysis.

**Includes cases determined by returned product analysis as well as cases identified only by fluoroscopy or visualization of explanted leads.



Update on Durata[™] Lead Performance

Registry and Post-Market Studies

The safety and reliability of our Durata[™] high voltage leads is supported by robust post-market surveillance monitoring. Data are collected on case report forms at each scheduled and unscheduled patient visit with additional information documented for any adverse event. We also employ a dedicated field monitoring organization to ensure that the data from the clinical site are accurately and completely submitted. Because of the size and scope of these actively monitored registries, they represent the true commercial experience with our current generation high voltage leads.

As described on page 280, the Durata lead family was added to the CLAS registry study in 2013 to determine the prevalence and incidence of lead compromise evidenced by imaging (includes externalized conductors and other visual lead anomalies) and electrical dysfunction. As of February 29, 2016, a total of 893 patients implanted with Durata leads at 42 centers underwent fluoroscopic evaluation. These include 271 leads implanted in 2008, 377 leads in 2009, and 245 leads in 2010, with an implant duration of 4.4±1.0 years (mean±stdev; median = 4.4 years; IQR = 3.6 to 5.1 years) at enrollment. None of the 893 leads at enrollment exhibited externalized conductors. A total of 658 patients (74%) completed 1 year follow-up with fluoroscopic evaluation. The incidence of new EC at 1 year of follow-up was 0.15% (1/658). Based on fluoroscopic images of this lead, the externalization appears to be extravascular, under the clavicle and is likely due to clavicular crush. The electrical function of this lead has been normal. A total of 333 patients (37%) completed 2 years of follow-up with fluoroscopic evaluation. The incidence of new EC at 2 years of follow-up was 0.30% (1/332). Based on fluoroscopic images of this lead, the location of externalized conductors is coincident with an annuloplasty tricuspid ring. Therefore, the mechanism of externalization is likely to be external insulation abrasion due to friction with this triscupid ring. The electrical function of this lead has been normal. A total of 10 leads (1.1%) out of the 893 enrolled patients were identified as having electrical dysfunction. None of these 10 leads exhibited externalized conductors. Fluoroscopy data for 28 additional leads are pending adjudication and the minimum enrollment of Durata leads has been met in the Cardiac Lead Assessment Study.

Beginning in 2006, three prospective, outcome-oriented, actively monitored registry studies have enrolled Durata and Riata[™] ST Optim[™] leads: the OPTIMUM registry, SCORE registry, and the SJ4 Post Approval Study (PAS). A total of 11,099 Optim insulated leads (8,233 Durata and 2,866 Riata ST Optim leads) were enrolled in these studies at 293 sites. The raw data from these registries, current as of February 29, 2016, were independently analyzed by the Population Health Research Institute (PHRI) of McMaster University/Hamilton Health Science. Their results quantify the performance of the Durata and Riata ST Optim leads in the categories of externalized conductors, all-cause insulation breach, and all-cause mechanical failures. An externalized conductor represents an outer insulation



breach within the vascular or cardiac systems resulting in the normally contained conductors becoming visible outside the lead body. All-cause insulation breach includes all types of abrasion and other mechanical types of insulation damage, including externalized conductors. The all-cause mechanical failure category includes any insulation breach (including abrasion), conductor fracture, failure of a crimp, weld, or bond, or other mechanical failure. Additionally, if the lead is reported to have been "taken out of service" (extracted, capped, or electrically abandoned) and the site reports (i) noise artifact, abnormal pacing impedance, or abnormal high-voltage lead impedance or (ii) a large impedance change coupled with any of elevated pacing threshold, loss of sensing, loss of capture, oversensing, or undersensing then that is also included in the all-cause mechanical failure category.¹ Overall incidence rates for these three failure categories are provided in the table below.

Failure Category	Durata and Riata ST Optim %	Durata and Riata ST Optim 95% Cl	Freedom from failures at 8 years (%)
Externalized Conductors	0.00%	0.00% - 0.03%	100%
All-Cause Insulation Abrasion	0.23%	0.15% - 0.32%	99.6%
All-Cause Mechanical Failures	1.02%	0.84% - 1.21%	97.4%

An Independent Analysis of Durata[™] and Riata[™] ST Optim[™] Lead Failure Rates in Active Registries by PHRI (data through February 29, 2016)

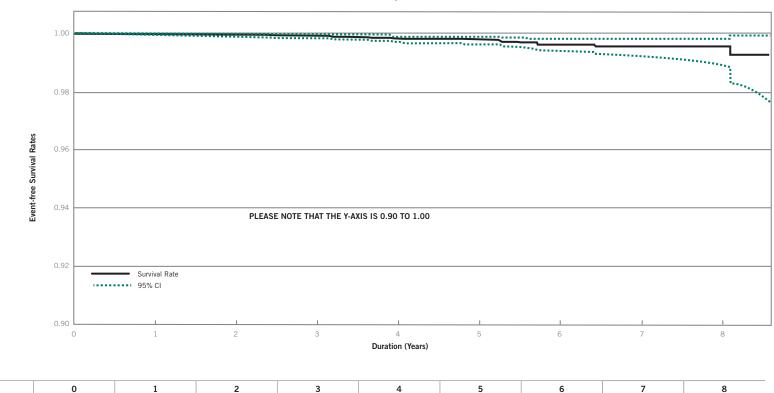
Event-Free Survival Rates for All-Cause Insulation Abrasion (Figure 1), and All-Cause Mechanical Failures (Figure 2) in Optim[™] ICD leads were calculated by PHRI. The follow-up duration for active leads was based on last reported patient contact either in office or through remote monitoring. Lead implant date is used as time zero for these survival curves.

NOTE: The rates of all-cause mechanical failure, all-cause insulation abrasion and externalized conductors have been calculated based upon independent analyses of SJM databases by PHRI. The total number of each event is derived from the sum of those events which have been adjudicated by PHRI as of October 2014 and those which have not yet been adjudicated by PHRI. The final calculated rates may change slightly once adjudication is completed.

¹ John A. Cairns, Andrew E. Epstein, John Rickard, Stuart J. Connolly, Christopher Buller, Bruce L. Wilkoff, Janice Pogue, Ellison Themeles, Jeff S. Healey, *Prospective long-term evaluation of Optim-insulated (Riata ST Optim and Durata) implantable cardioverter-defibrillator leads*, Heart Rhythm, Vol 11, Issue 12, Pages 2156–2162, December 2014.







Year

Leads at Risk

11,099

9,769

8,476

7,251

Followed to Last Reported Patient Contact



6,090

4,430

2,769

1,257

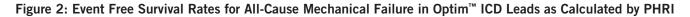
343

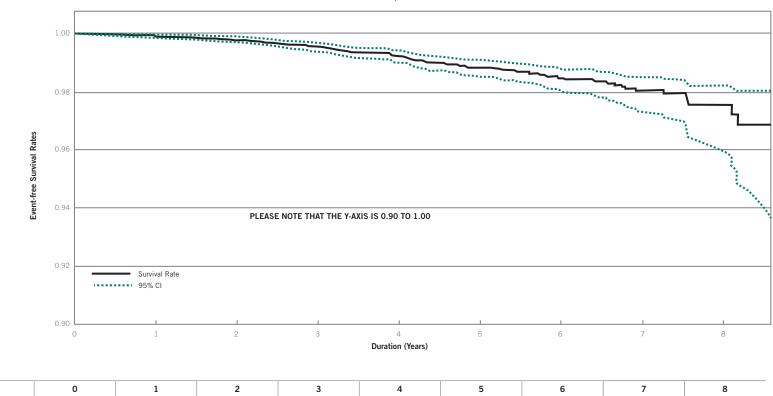
2,767

1,254

342

4,428





Year

Leads at Risk

11,099

9,768

8,475

7,248

Followed to Last Reported Patient Contact



6,087

Customer Reported Performance Data

While large active registry data are robust for determining the true incidence rate of failures, passively collected data from worldwide complaints and returns analysis provides an important data source for better understanding the root cause of lead failures, as well as an appropriate method for comparing relative incidence rates of failure between lead models. The table below summarizes the incidence of insulation abrasion failure mechanisms confirmed by returns analysis of Riata[™] ST Optim[™] and Durata[™] leads. Approximately 17,000 Riata ST Optim and Durata leads have been returned for analysis worldwide through February 29, 2016. Returned leads may exhibit more than one failure mechanism; hence the incidence rates presented in the table are not mutually exclusive.

Durata[™] (WW Sales 583,000) and Riata[™] ST Optim[™] (WW Sales = 33,000) Leads Insulation Failure Mechanisms from Complaints and Returns Analysis

Insulation Failure Mechanism	Abrasion Type	Optim Defib Lead Worldwide (WW) Incidence Rate (WW Sales = 616,000)
Intravascular – External*	External Abrasion	0.018%
Externalized Conductors – External**	External Abrasion	0.005%
Lead-to-Can*	External Abrasion	0.059%
Insulation Damage*	External Abrasion	0.021%
Intravascular - Inside Out*	Internal Abrasion	0.0008%***
Externalized Conductors - Inside Out**	Internal Abrasion	0.0002%***
Internal Abrasion Short Under RV Shock Coil*	Internal Abrasion	0.007%
Internal Abrasion Short Under SVC Shock Coil*	Internal Abrasion	0.006%

*Determined by returned product analysis.

**Includes cases determined by returned product analysis as well as cases identified only by fluoroscopy or visualization of explanted leads.

***These values reflect a total of six cases of silicone insulation breach due to inside-out abrasion in the short region not protected by Optim insulation.

These incidence rates from complaints and returns analysis demonstrate the effectiveness of the Riata ST Optim and Durata lead design changes in reducing insulation-related failures when compared to the same type of data for Riata, Riata ST silicone leads (see page 281).



Update on Optim[™] Lead Insulation

In 2006 St. Jude Medical brought to the cardiac rhythm management (CRM) market the first novel insulation technology in over 20 years: a silicone-polyurethane co- polymer known as $Optim^{M}$ lead insulation, now featured in $IsoFlex^{M}$ $Optim^{M}$, $Tendril^{M}$ STS, $OptiSense^{M}$, $QuickFlex^{M} \mu$, $Quartet^{M}$, $Durata^{M}$, and $Optisure^{M}$ lead families. Optim lead insulation consolidates the best characteristics of two established CRM lead insulation materials, polyurethane and silicone.

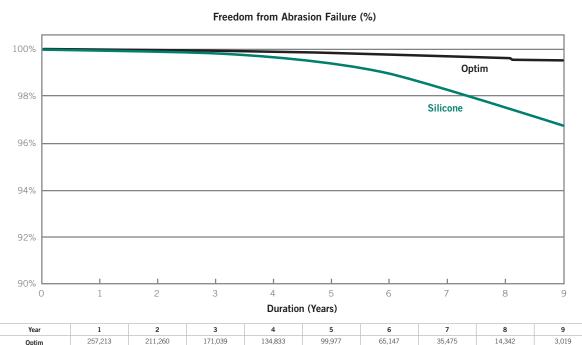
The polyurethane content of Optim lead insulation imparts lubricity, strength, and abrasion resistance while the nearly 50% silicone content imparts flexibility and biostability.^{1.2} The clinical performance of >3.9 million Optim insulated pacing and tachycardia leads implanted worldwide continues to be excellent. All aspects of Optim lead insulation performance can be appreciated by referring to the Acute Observation, Chronic Complication, Lead Malfunction, and Survival Probability data found in this Product Performance Report. One noteworthy reliability benefit of Optim lead insulation is a significant reduction in the most common mode of lead malfunction: insulation abrasion.³ Insulation abrasion can occur as a result of lead motion and contact with pacemakers, ICDs, adjacent leads, or anatomical structures and can occur in the subcutaneous, intravascular, or intracardiac areas of the lead. Abrasion within a lead can occur as a result of contact between internal components, as noted in our November 2011 Riata[™] lead advisory. The clinical effects associated with all types of insulation abrasion malfunctions can include sensing noise and changes in both pacing and defibrillation impedances and thresholds. As indicated in our December 2010 Riata communication, the presence of Optim lead insulation on the Riata[™] ST Optim and Durata defibrillation lead family has greatly reduced the quantity of all abrasion types.

This product performance report provides an up-to-date statistical assessment of the benefits of Optim lead insulation on St. Jude Medical tachycardia leads. A Kaplan-Meier analysis including all U.S. data through December 31, 2015 was performed on two groups of leads: (1) tachycardia leads with silicone insulation [Riata and Riata ST lead families], and (2) tachycardia leads with Optim lead insulation [Riata ST Optim and Durata lead families]. For each group, the U.S. registration and tracking data was combined with data from all U.S. confirmed abrasion malfunctions. This analysis does not include data from prospective registries or non-returned complaints. A Kaplan-Meier curve representing freedom from abrasion for both groups is provided below. The longest implant duration that is common to both model groups was 110 months. To provide a direct comparison of both model groups, the probability of an abrasion malfunction by 110 months of implant time is also presented in graphical format below.



The data show that the presence of $Optim^{M}$ lead insulation dramatically reduces the probability of abrasion malfunction in tachycardia leads at 110 months by 85%, which was confirmed to be statistically significant (p<0.001) by a log-rank test.

Optim[™] Lead Insulation Effects on SJM Tachycardia Lead Abrasion



96,156

Silicone

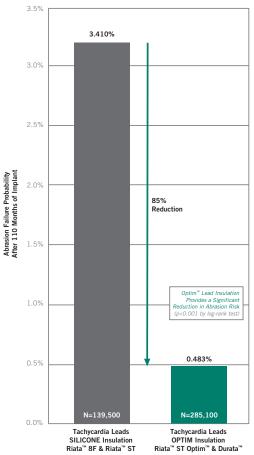
129,519

116,106

105,806

Kaplan-Meier Analysis of U.S. Returns Analysis Data

Abrasion Malfunction Probability after 110 Months of Implant



¹ C. Jenney, J. Tan, A. Karicherla, J. Burke, and J. Helland, "A New Insulation Material for Cardiac Leads with Potential for Improved Performance," HRS 2005, HeartRhythm, 2, S318-S319 (2005).

78,605

² J. Tan and C. Jenney, "Comparative In Vivo Biostability Study of A New Lead Insulation Material Versus Polyurethanes," HRS2006, Heart Rhythm, 3, S146 (2006).

87,166

³ T. Kleemann, T. Becker, K. Doenges, M. Vater, J. Senges, S. Schneider, W. Saggau, U. Weisse, and K. Seidl, "Annual Rate of Transvenous Defibrillation Lead Defects in Implantable Cardioverter-Defibrillators Over a Period of >10 Years," Circulation, 115, 2474-2480 (2007).



69,878

59,629

46,082



The following table summarizes recalls, advisories and safety alerts regarding St. Jude Medical implantable devices since 1999. These advisories have been previously communicated to physicians. Advisories associated with non-implantable devices such as catheters are not included in the table. For more information please contact St. Jude Medical Technical Services at 1-800-722-3774.

ICD and CRT-D Devices

Model Identification	Advisory	Follow-up Recommendations at Time of Advisory
Ellipse™ and Ellipse ST™ VR/DR	8/19/2014	St. Jude Medical recommends that patients with affected devices be enrolled in Merlin.net Patient Care Network (PCN) so that any extend
US: CD1309, CD1311*, CD1409, CD1411*, CD2309, CD2311*,	Class II	charge time alert ("Capacitor Charge Time Limit reached" message) will be transmitted to Merlin.net PCN for patients being actively monitored and can be viewed by your clinic staff.
CD2409, CD2411* (all -36, -36Q, -36C and -36QC suffixes).	Extended Charge Time may result in delayed delivery of high voltage therapy or prevent delivery of part or all of a	If your patient has received a vibratory notification and/or if a programmer or Merlin.net alert for an extended charge time has been observed:
*Denotes models also sold OUS.	programmed high voltage therapy shock. The anomaly most	Schedule your Ellipse ICD patient for an in-office follow-up evaluation as soon as possible.
OUS: CD1277, CD1279, CD1293, CD1295, CD1377, CD1393, CD2277,	commonly presents as a vibratory patient notification and upon interrogation, a programmer or Merlin.net™ Patient	Interrogate the Ellipse ICD and perform a manual capacitor maintenance charge. Note the charge time to full charge; it should be approximately 15 seconds or less.
CD2279, CD2293, CD2295, CD2377, CD2393 (all -36, -36Q, -36C and	Care Network (PCN) alert indicating a "Capacitor Charge Time Limit reached" message. This may occur during a	 Contact St. Jude Medical's Technical Services Department at 800-722-3774 to review the results of the capacitor maintenance test and discuss if additional evaluation is required.
-36QC suffixes).	capacitor maintenance or charging for high voltage therapy. The anomaly occurs as a result of internal damage to the	A device that has experienced repeated extended charge time out warnings should be considered for replacement.
	capacitors used in the high voltage charging circuitry of the	As the large majority of the extended charge time events have presented at the routine 6 month automatic capacitor maintenance interva
	subject devices, which may result in an extended charge time. As designed, the device will deliver the available energy	programming the interval to every 4 months at your patient's next scheduled follow up visit may provide an earlier indication of this potential anomaly. It should be noted that changing the device programming to a 4 month capacitor maintenance interval will reduce
	on the capacitors once the charge time limit of 32 seconds	device longevity by approximately 9%. Device replacement is not recommended for an Ellipse device exhibiting normal charge times,
	is reached, even if the energy is less than the programmed	and patients should continue to be followed at routine follow up intervals, per HRS/EHRA Expert Consensus on Monitoring Cardiovascular
	value. This condition is detectable as the device will initiate a vibratory patient alert and, for patients enrolled and actively	Implantable Electronic Devices (CIED), April 2008.
	being followed, a Merlin.net PCN notification. Additionally,	Current Status (December 31, 2015): At the time of the advisory, the The worldwide event rate of extended charge time on the

upon device interrogation, an alert message will indicate

"Capacitor Charge Time Limit reached" on a specific date.

Approximately 97% of Ellipse ICD extended charge time events reported to St. Jude Medical have been detected during capacitor maintenance with the remainder detected during defibrillation threshold (DFT) testing. There have been no reported cases of an Ellipse device failing to deliver high

voltage therapy to a patient when needed.

Current Status (December 31, 2015): At the time of the advisory, the The worldwide event rate of extended charge time on the affected population was 0.42%, based on 179 extended charge time events out of 43,000 worldwide sales. As of December 31, 2015, there were additional reports and the rate is now 0.67%. There have been no reports of serious injury or death within this population.



ICD and CRT-D Devices

CD1377-36C, CD1377-36QC)

CD2359-40C, CD2359-40QC)

CD1359-40C, CD1359-40QC)

CD2235-40Q)

CD1235-40Q)

CD3215-36Q)

CD3239-400) Promote[™] (Model 3213-36) Quadra Assura[™] (Models CD3267-40, CD3267-400, CD3367-40, CD3367-400, CD3367-40C, CD3367-40QC) Quadra Assura[™] MP (Models CD3371-40, CD3371-400, CD3371-40C, CD3371-40QC)

CD3251-40Q)

Fortify[™] ST DR (Models CD2235-40,

Fortify[™] ST VR (Models CD1235-40,

Promote Accel[™] RF (Models CD3215-36,

Promote Quadra[™] (Models CD3239-40.

Unify Assura[™] (Models CD3261-40, CD3261-40Q, CD3361-40, CD3361-40Q, CD3361-40C, CD3361-40QC) Unify Quadra[™] (Models CD3251-40,

Unifv[™] (Models CD3235-40, CD3235-40Q)

Fortify Assura[™] DR (Models CD2259-40,

CD2259-40Q, CD2359-40, CD2359-40Q,

Fortify Assura[™] VR (Models CD1259-40.

CD1259-40Q, CD1359-40, CD1359-40Q,

Model Identification Follow-up Recommendations at Time of Advisory Advisory AnalvST Accel[™] DR RF 1/23/2014 Immediate Resolution Steps: (Models CD2219-36, CD2219-36Q) Outside US only Review your SJM ICD/CRT-D* patient records for patients with affected devices implanted or seen in clinic starting in September 2013 AnalyST Accel[™] VR RF and programmed to a single VF detection zone with the 17.2.2 software. For patients identified during this review we recommend that (Models CD1219-36, CD1219-36Q) In November 2013, St. Jude Medical released the Merlin™ you schedule an immediate follow-up visit. The programmer software version is printed on the bottom of each report page. Current Accel[™] DR RF Programmer Software version 17.2.2 rev. 0 (herein after For patient devices programmed as described above with 17.2.2 software, a new software version 17.2.3 will correct this issue and is (Models CD2215-36, CD2215-36Q) referred to as 17.2.2) as an upgrade to existing programmers. expected to be available by February 2014. Your St. Jude Medical representative will assist you with obtaining and installing the 17.2.3 Current Accel[™] VR RF Testing has shown that, when using a programmer with the software on your programmer. Using this software, programming any parameter will reset the return to sinus criteria to normal function. (Models CD1215-36, CD1215-36Q) 17.2.2 software, an incorrect value for sinus redetection, If a patient is seen before the 17.2.3 software is installed, then program the device to a two or three zone configuration, even if one of the Current[™] DR (Model 2207-36) potentially affecting the high voltage therapy delivery zones is strictly a monitor zone. This will resolve the issue when using a programmer with 17.2.2 software. Current[™] VR (Model 1207-36) sequence can occur when a device is programmed to a Ellipse[™] DR (Models CD2277-36. single VF detection zone. The issue can be introduced during Current Status (December 31, 2015): No occurrences have been reported following the field communication and correction. CD2277-36Q. CD2377-36. CD2377-36Q. programming of certain families of St. Jude Medical ICD/ CD2377-36C, CD2377-36QC) CRTD devices. The issue is not present when a device is Ellipse[™] VR (Models CD1277-36, programmed to a two or three zone configuration. When CD1277-36Q, CD1377-36, CD1377-36Q, using the 17.2.2 software and any parameter is programmed

as part of a single VF detection zone configuration, the

sinus redetection value will be inappropriately set to zero

milliseconds. As a result, any intrinsic activity following the

first shock will be considered a "sinus rate" and the device

will diagnose "return to sinus". Therefore, if the arrhythmia

was not terminated by the initial high voltage therapy, the

causing the next high voltage therapy to also be delivered at

are programmed to higher energy values, the only HV therapy

the patient would receive if the arrhythmia continues and is

redetected, would be 20 joules, rather than the increasing HV

energy levels as programmed.

the first programmed energy level. For example, if the first

shock is programmed to 20 joules and subsequent shocks

ongoing arrhythmia would be considered a new episode

ICD and CRT-D Devices

Model Identification	Advisory	Follow-up Recommendations at Time of Advisory
Fortify ST™ (Models CD1235-40, CD1235-40Q, CD2235-40, CD2235-40Q)	4/18/2013 Outside US only The Merlin™ PCS programmer software Model 3330 versions 14.2.2, 16.2.1 and 17.2.1.1 provide new features for St. Jude Medical ICDs, including an option to enhance the ST diagnostic features in St. Jude Medical Fortify ST™ ICD models CD1235-40, CD1235-400, CD2235-40 and CD2235-40Q via a device software upgrade. During a device software upgrade, implanted devices are temporarily placed into the back-up pacing (BVVI) and back-up defibrillation only (BDFO) mode. The back-up mode parameter settings will be in effect for the two minute upgrade process. Once the upgrade successfully completes, the device will revert to the previously programmed parameter settings. Depending on the individual patient, this temporary change in parameter values while in back-up defibrillation only mode could make the device susceptible to oversensing and potentially deliver high voltage therapy during the upgrade procedure.	In order to prevent the potential for inappropriate therapy during the software upgrade process, consider programming the "Tachy Therapy Enabled/Disabled" function to Disabled prior to proceeding with the software upgrade. It is imperative to re-interrogate the device and program the "Tachy Therapy Enabled/Disabled" function to Enabled after the upgrade has been successfully completed. As with any device evaluation and programming, ECG monitoring and availability of back up external defibrillation equipment is recommended during the entire software upgrade process. Current Status (December 31, 2015): At the time of the advisory there were 20 devices confirmed to be affected by this issue. As of December 31, 2015 there were an additional 52 devices confirmed with this issue. There have been no reports of serious injury or death.

Model Identification	Advisory	Follow-up Recommendations at Time of Advisory
Convert™+ (Model V-195)	5/6/2010 Outside US only A condition where devices programmed to a two-zone tachy therapy configuration, using a Merlin [™] Patient Care System (PCS) programmer running version 7.2.1, 8.2.1 or 10.2.0 software, can result in the VT Therapy Timeout parameter being programmed OFF and HV therapy not being available if ATP therapies are unsuccessful.	If a patient's device is already programmed to a two zone configuration with a Merlin [™] PCS programmer running version 7.2.1, 8.2.1 or 10.2.0, a follow-up visit should be scheduled to perform the recommendations outlined below: A permanent correction is available in the new release of the Merlin [™] PCS programmer software version 10.2.2 which has received regulatory approval. Subsequently using a Merlin [™] programmer with 10.2.2 (or later) software and following the steps outlined below will ensure that the VT Therapy Timeout parameter is programmed to a two zone configuration. 1. Interrogate the Convert+ ICD and verify that it is programmed to a two zone configuration. 2. Program the device to a single zone, fibrillation only tachycardia mode. This action will program the VT Therapy Timeout parameter ON. 3. Re-program the device to the desired two zone configuration. (VT Therapy Timeout will remain ON).
		If your patient's device is programmed to a single zone (fib only) there is no need to perform any reprogramming action.
		As these actions fully correct the potential issue there is no need to consider any device explant.
		Current Status (December 31, 2015). At the time of the advisory there was one report of this issue out of approximately 220

Current Status (December 31, 2015): At the time of the advisory there was one report of this issue out of approximately 330 Convert+ Model V-195 ICDs distributed in Europe and Asia. As of December 31, 2015, there have been no additional reports associated with this advisory.



ICD and CRT-D Devices

Model Identification	Advisory	Follow-up Recommendations at Time of Advisory
Epic [™] ICDs (Models V-197, V-235, V-337, V-338, V-339), Epic [™] + ICDs (Models V-196, V-233, V-236, V-239, V-350) Epic [™] II ICDs (Models V-158, V-255, V-258, V-355, V-356, V-357) Atlas [™] + ICDs (Model V-340, V-341, V-343, V-193, V-242, V-243) Atlas [™] II ICDs (Models V-168, V-265, V-268, V-365, V-366, V-367)	1/16/2008 Class II A very rare condition (incidence of eight in 143,000 devices worldwide; six in the US and two outside the US) that could lead to a ventricular sensing anomaly in Epic [™] and Atlas [™] family of implantable cardioverter defibrillators (ICDs) has been identified. A loss of ventricular sensing would prevent an ICD from being able to detect an arrhythmia. The loss of ventricular sensing anomaly can only occur when the device's software writes to a particular memory location and only if there is a precise alignment of two timing parameters that normally do not coincide during routine operation of the device. The precise alignment requires the software write to occur at the exact time that a comparison is made during a specific 61 microsecond (µsec) window.	A simple programmer software/device firmware upgrade will resolve the issue and prevent a future occurrence. Patients who are followed on a routine basis with scheduled follow-up visits every three to six months should continue with their scheduled visit. Upon interrogation of one of the subject devices, the Merlin [™] Patient Care System and Model 3510 programmers with the newly provided software will automatically identify a device that can benefit from a firmware upgrade and will instruct the clinician that an upgrade is available. St. Jude Medical, along with our independent Medical Advisory Board members, has determined that no other action is recommended. Current Status (December 31, 2015): At the time of the advisory, there were 8 worldwide (6 U.S.) devices confirmed to have been affected by this issue. As of December 31, 2015 there have been no additional devices confirmed to have this issue since the time of the advisory.

Model Identification	Advisory	Follow-up Recommendations at Time of Advisory
Photon™ DR (V-230HV) (certain serial numbers), Photon™ Micro VR/DR (Models V-194, V-232), Atlas™ VR/DR (Models V-199, V-240)	10/7/2005 Class II A particular vendor-supplied memory chip can be affected at a low frequency rate by background levels of atmospheric ionizing cosmic radiation ("background cosmic radiation"). The anomaly can trigger a temporary loss of pacing function and permanent loss of defibrillation support.	In the unlikely event that a device chip is affected by background cosmic radiation, the high current drain condition will deplete the battery voltage rapidly. This can result in loss of output for a period up to approximately 48 hours. During this period, the patient would be without pacing or defibrillation therapy. After this initial period, the battery will reach a voltage level at which the device will enter its "Hardware Reset Mode." This safety mode is designed to preserve the device's ability to provide VVI pacing support. A device that has been reset to the Hardware Reset Mode will operate in the VVI mode at 60 ppm, but will not be capable of providing tachycardia detection or therapy. This will be noted by a warning message on the programmer screen upon device interrogation. To assist in your patient care and following discussions with our independent Medical Advisory Board, St. Jude Medical recommends: If it is not already your current practice, physicians should perform routine device monitoring every three months for patients with the affected models listed above. In determining whether additional patient management or follow up may be needed, consider the low failure rate for the anomaly and the unique medical needs and situation of each individual patient, including whether the patient is pacemaker dependent or at high risk for life-threatening arrhythmias. If a patient's device is found in the Hardware Reset Mode, you should arrange for device replacement as soon as possible.You should continue to provide patients with the usual admonitions to keep scheduled appointments and to report all changes in symptoms.

Current Status (December 31, 2015): At the time of the advisory, there were 60 worldwide (38 U.S.) devices confirmed to have been affected by this issue. As of December 31, 2015 there were an additional 42 worldwide (28 U.S.) devices confirmed with this issue. This is within the 95% confidence interval prediction made at the time of the advisory. There have been no reports of serious injury or death.



ICD and CRT-D Devices

Model Identification	Advisory	Follow-up Recommendations at Time of Advisory
Epic [™] DR/HF (V-233, V-337, V-338), Epic [™] Plus DR/VR/HF (V-236, V-239, V-196, V-239T, V-196T, V-350), Atlas [™] DR (V-242), and Atlas [™] Plus DR/VR/HF (V-243, V-193, V-193C, V-340, V-341, V-343)	 6/13/2005 Class II Two anomalies have been identified: 1. Due to a device software anomaly, it is possible that when the device's battery is nearing its elective replacement indicator (ERI), a charging cycle may be skipped. 2. After a capacitor charge, if a rate responsive pacing mode (e.g., DDDR, VVIR, etc.) is programmed "On," this "noise" may be interpreted by the device's accelerometer (activity sensor) as physical activity, causing a temporary increase in the pacing rate that may persist after charging is completed. 	Two anomalies were discovered during routine product monitoring. Neither of these anomalies presents a significant clinical risk to your patients, and no clinical complications have been reported to St. Jude Medical. Both are easily corrected by performing a simple, automated software download to the device. This potentially affects approximately 30,000 implanted ICDs in the United States and includes the following model numbers: Epic [®] DR/HF (V-233/V-337/V-338), Epic [®] Plus DR/NR/HF (V-236/V-239/V-196/V-239T/V-196T/V-350), Atlas [®] DR (V-242), and Atlas [®] Plus DR/NR/HF (V-243/V-193/V-193/V-341/V-341). The first anomaly can occur when one of the affected devices attempts to deliver multiple shocks in rapid succession. Due to a device software anomaly, it is possible that when the device's battery is nearing its elective replacement indicator (ERI), a charging cycle may be skipped. If this were to occur, the first shock will always be delivered as programmed sequence would be delivered after a delay of only two to four seconds. A skipped charge would result in less than the full number of programmed shocks being available for delivery during that episode, but all delivered shocks would be at their programmed energy. This behavior was discovered as an incidental finding during analysis of one returned device that had delivered a large number of high-voltage shocks over a short time period.

a capacitor charge, if a rate responsive pacing mode (e.g., DDDR, WIR, etc.) is programmed "On," this "noise" may be interpreted by the device's accelerometer (activity sensor) as physical activity, causing a temporary increase in the pacing rate that may persist after charging is completed. The degree and duration of the rate increase will depend on a variety of factors, but the rate will never exceed the programmed Maximum Sensor Rate, and the device will gradually return to the appropriate rate. The anomalous behavior, which has been observed during the performance of manual capacitor maintenance, has been traced back to a component supplied to St. Jude Medical by one vendor; therefore, only the subset of the device models listed above that were manufactured with the affected component (device serial numbers below 141000 for any model) will exhibit this behavior.

St. Jude Medical has developed **programmer software that will automatically detect the affected ICDs and download device software that will correct the "skipped charge" anomaly and mitigate the response to electrical noise.** Once the upgrade is performed, the potential for a skipped charge will be eliminated. Additionally, once the upgrade is performed if a rate responsive mode is programmed "On," devices with serial numbers below 141000 will have their rate response functions suspended for the time period during which the electrical noise could be present (i.e., while significant residual voltage remains on the high- voltage capacitors); non-rate responsive pacing at the programmed base rate will continue to be provided as appropriate. This period during which rate response is suspended may last anywhere from a few minutes up to approximately 90 minutes. If rate responsive pacing was ongoing prior to charging, the pacing rate will gradually decrease to the base pacing rate according to the normal rate response recovery algorithm and will remain there while rate responsive pacing is suspended. The rate response behavior for devices with serial numbers greater than 141000 will not be affected by the software download.

The software download for potentially affected devices will automatically be initiated the next time the patient's device is interrogated with the v4.8.5 programmer software. Since a skipped charge is more likely to occur in devices that are closer to their elective replacement indicator (ERI), St. Jude Medical recommends that if the next patient follow-up is not scheduled to occur within the next six months that the patient be seen within this time period.

In addition, if devices are programmed to pacing settings that result in high current consumption, such as high output bi-ventricular pacing, consideration should be given to scheduling the patient for a follow-up visit within three months if it is not scheduled to occur within that time period. As always, St. Jude Medical defers to your clinical judgment on any decisions regarding the management of your patients.

Current Status (December 31, 2015): There have been no implanted devices confirmed to have been affected by this issue since the time of the advisory.



ICD and CRT-D Devices

Model Identification	Advisory	Follow-up Recommendations at Time of Advisory
Epic [™] (V-197, V-235), Epic [™] + (V-196, V-236), Epic [™] HF CRT-D (V-338), Epic [™] HF CRT-D (V-350), Atlas [™] + HF CRT-D (V-340), or Atlas [™] (model V-242) ICDs	3/10/2005 Class II A software parameter that affects the sensitivity of the reed switch in the listed devices was being set to an incorrect value which could prevent these devices from entering the magnet mode to inhibit tachy therapy when an external magnet is applied.	During routine product evaluation, St. Jude Medical Quality Assurance identified that a software parameter that affects the sensitivity of the reed switch in the listed devices was being set to an incorrect value during manufacturing beginning in late November of last year. This has the effect of preventing these devices from entering the magnet mode to inhibit tachy therapy when an external magnet is applied. This is a software controlled parameter that can be easily corrected via the programmer. All other bradycardia pacing and tachyarnythmia detection and therapy features are not affected in devices subject to this notification. Until the magnet sensitivity parameter is corrected via the programmer, tachy therapy may not be properly inhibited as is customary with placement of an external magnet, but can be inhibited by using the programmer to program the device to Defib Off, and then back On as needed. The affected devices were manufactured during a three month period beginning November 22, 2004. To date, there have been no field reports of any magnet mode failures, nor have there been any clinical complications reported associated with this issue. Magnet mode application is usually used to inhibit tachycardia therapy such as when a patient is subjected to electrocautery during a surgical procedure. In order to remedy this situation, in addition to this notification, St. Jude Medical Sales Representatives and Field Clinical Engineers have been provided with a simple software tool that can be used to set, via the programmer, the reed switch's magnet sensitivity to the proper value. You may contact them to schedule this reprogramming at the patient's next scheduled follow-up visit or at your discretion.

Model Identification	Advisory	Follow-up Recommendations at Time of Advisory
Profile™ V-186	7/13/2001 Class II Failure of a ceramic capacitor could lead to sensing anomalies/ early battery depletion	This Advisory applies to a well-defined group of Profile [™] MD (Model V-186HV3) implantable cardioverter-defibrillators (ICDs) which have been observed to exhibit decreased reliability. These devices had specific modules (subcircuits) manufactured during a five-month period during the first half of 1999. Those potentially affected devices that have not exhibited any anomalous behavior within 24 months of manufacture are not at increased risk of failure at a later date. These failures were caused by a component anomaly that is limited to a specific, traceable lot (group) of capacitors.

If these capacitors fail, two different clinical manifestations may be observed, depending on the location of the failed capacitors: Low Voltage Module: The devices may exhibit sudden loss of sensing or oversensing of internally generated interference (noise) resulting in aborted or delivered shocks. Due to the potential for sudden loss of sensing, which would prevent the ICD from detecting ventricular tachyarrhythmias, device replacement should be considered for patients with devices incorporating the suspect capacitors in this location. In making this decision, you should weigh the likelihood that your patient will have one of the few additional devices expected to fail against the risk associated with the replacement procedure. For patients who do not have their devices replaced, St. Jude Medical recommends monthly monitoring for the remaining months during which additional failures are expected to occur and every three months thereafter.

High-Voltage Module: The devices may exhibit premature battery depletion with no other clinical manifestations. While the battery voltage may drop rapidly to a value near or below the device's ERI, it stabilizes for several months at a value at which the device continues to detect arrhythmias and deliver therapy appropriately. In addition, some of these devices may exhibit oversensing of internally generated electrical interference (noise), which may result in false detection of tachyarrhythmias. However, during charging, the interference abates, and the therapy is usually aborted without the delivery of inappropriate shocks to the patient. Because these devices generally continue to respond appropriately to spontaneous tachyarrhythmias, and because the battery voltage stabilizes for several months at a level that does not compromise device function, St. Jude Medical recommends that patients with devices incorporating suspect capacitors in this location be monitored monthly for the remaining months during which additional failures are expected to occur and every three months thereafter.



Pacemaker and CRT-P Devices

Model Identification	Advisory	Follow-up Recommendations at Time of Advisory
Accent [™] SR (Model PM1110) Accent [™] DR (Model PM2112)	12/7/2012 Outside US Only Due to an incorrect software setting, a specific subset of the Accent [™] SR and Accent [™] DR devices shipped to certain countries outside the US will not provide a change in the sensor driven (rate responsive) pacing rates in response to patient physical activity. All other programmed parameters, features and functions operate as designed, e.g. an Accent DR device programmed to DDDR will appropriately track atrial activity and properly function in the DDD mode. A non-invasive programmer software solution that will correct the issue in all affected, implanted devices will be available once regulatory approval has been completed.	 St. Jude Medical makes the following recommendations: Identify affected patient Review your patient's clinical indications for pacing and determine the clinical need for rate responsive, sensor driven pacing. In the event that a patient requires rate responsive sensor driven activity pacing and exhibits clinical symptoms due to the lack of increased pacing rates with exercise, please contact your local Sales Representative or our Technical Support Continue to follow patients on their standard follow-up schedule. Current Status (December 31, 2015): The programmer software update was released in April 2013. At the time of the advisory, approximately 6,000 affected devices were implanted. There have been no additional devices confirmed to have this issue since the time o the software release in April 2013.

Model Identification	Advisory	Follow-up Recommendations at Time of Advisory
Accent [™] DR (Models PM2110, PM2112, PM2210, PM2212), Anthem [™] CRT-P (Models PM3110, PM3112, PM3210, PM3212)	9/22/2011 Class II A small amount of electrical charge may accumulate within an internal capacitor which results in a low or varying pacing lead impedance (PLI) value during the automatic daily measurements. An out of range lead impedance measurement may result in a patient notifier alert, a remote monitoring Merlin.net [™] Patient Care Network alert, or a prior alert message to be displayed on the programmer screen at the next in-clinic follow-up.	In order to prevent a false reading, a new Merlin [™] Patient Care System programmer software version is available. When used to interrogate an Accent DR or Anthem CRT-P pacemaker this software will eliminate the potential for this anomaly to occur. With the new software, the programmer will automatically activate circuitry in the pacemaker during the interrogation process to ensure that any residual charge on the capacitor is discharged prior to performing the daily PLI measurement. The onetime upgrade is performed automatically on affected devices and will not change the operation of the implanted device. Your St. Jude Medical Sales Representative will assist you in loading the new programmer software onto your Merlin programmer.
		Ensure that the new programmer software version is loaded on your programmers as soon as practical.
		Continue to follow patients on their standard follow-up schedule. Since the likelihood of the low lead impedance measurement is low, the device interrogation can be performed at the patient's next regular scheduled follow-up visit.
		In the event that a patient receives a low lead impedance alert before the new programmer software has been loaded, we suggest that you evaluate the device as you normally would for any such instance. If the daily pacing lead impedance value is out-of range, re-interrogate the device's measured data and look at the lead impedance values. This "in-clinic" measurement is not affected by the aforementioned capacitor charge build-up and will provide an accurate lead impedance measurement.

Current Status (December 31, 2015): Worldwide, 13 Accent DR (<0.01%) and 225 Anthem CRT-P (1.6%) devices have exhibited this diagnostic anomaly.



ADVISORIES & SAFETY ALERTS

Pacemaker and CRT-P Devices

Model Identification	Advisory	Follow-up Recommendations at Time of Advisory
Identity™ SR (Model 5172) Identity™ DR (Model 5370) Identity™ XL DR (Model 5376)	10/12/2006 Class II A programmer software anomaly can lead to incorrect reporting of battery voltage, expected battery longevity and elective replacement indicator (ERI) status in St. Jude Medical Identity [™] pacemakers. The anomaly does not affect the device's actual battery voltage, longevity or functionality, but could result in inaccurate reporting of the status of these measured data parameters. This software anomaly can appear in the St. Jude Medical Identity [™] family of pacemakers when programmed by the St. Jude Medical APS [™] III Model 3500/3510 or Merlin [™] Patient Care System Model 3650 programmers.	No follow-up is recommended at the time of advisory. Devices do not need to be replaced. A programmer software update, pending FDA and other regulatory agency approval, will mitigate this anomaly when the device is interrogated. Before the programmer software update is available, any subsequent measured data update that is performed during the session would be valid and the device operating magnet rate would be up-to-date. After the programmer software update is available, any device affected by this issue will be automatically corrected via the normal interrogation process. Current Status (December 31, 2015): At the time of the advisory, there were 53 worldwide (50 U.S.) devices confirmed to have been affected by this issue. As of December 31, 2015 there were an additional 78 worldwide (65 U.S.) devices confirmed with this issue, all prior to the distribution of the software fix.
Model Identification	Advisory	Follow-up Recommendations at Time of Advisory
Identity ADx [™] DR (Models 5286, 5380, 5386, 5480)	7/31/2003 Class II An anomaly in the pacemaker code, which under a certain set of programmed settings and specific event timing circumstances could deliver a short coupled pacing interval of 300 ms (200 ppm). Consecutive (up to a maximum of 12) shorter than anticipated pacing intervals could be experienced.	 St. Jude Medical's software engineering department has identified an anomaly in the pacemaker code, which under a certain set of programmed settings and specific event timing circumstances has a potential to deliver a short coupled pacing interval of approximately 300 milliseconds (200 ppm). It is also possible, however unlikely, that a patient could experience consecutive (up to a maximum of 12) shorter than anticipated pacing intervals. To date, the only clinical observation has been the delivery of a single short interval. There have been no reports of patient injury as a result of the shortened pacing interval. In order for the above mentioned shortened pacing interval to potentially occur, the programmed settings of the dual-chamber device would have to satisfy both of the following conditions: Base rate, rate hysteresis or rest rate programmed to 55 ppm or lower AutoCapture[™] pacing system programmed 0N Additionally, it should be noted that even with the following settings, the shortened pacing interval will not occur unless specific internal timing and other conditions are met. If the device is programmed to any other combination of settings (e.g. base rate, hysteresis rate and rest rate all at 60 ppm or above, or AutoCapture programmed OFF), the scenario described above cannot occur. St. Jude Medical recommends that physicians review their records to identify which, if any, of their patients implanted with a subject device have programmed settings as described above. For these patients, they should schedule a pacemaker programmed soft part programmate of potentially delivering the short program to base. The root cause of potentially delivering the short pacing interval has been identified and a downloadable firmware correction has been developed to prevent any future occurrence. The revised firmware will be made available to the physicians via a new programmer software event and program Matthe following the short pacing interval has been identified and a do

Current Status (December 31, 2015): There have been no implanted devices confirmed to have been affected by this issue since

version immediately following FDA approval. The revised code will be downloaded automatically during pacer interrogation and will take approximately six seconds. At the time of the FDA approval, all newly manufactured and distributed products will also have the new

There is no need to consider replacement of the devices as the temporary programming outlined above and the forthcoming device firmware

update will eliminate the potential for the described phenomenon from occurring in the future.



pacemaker code.

the time of the advisory.

Pacemaker and CRT-P Devices

Model Identification	Advisory	Follow-up Recommendations at Time of Advisory
Tempo™ (Model 2102) Meta™ (Model 1256D)	11/04/2002 Class II Dendritic growth at the battery/hybrid connection could cause a short circuit, which in turn could result in premature battery depletion.	Decreased reliability has been observed in a group of these devices. The devices in the advisory population were manufactured at the Telectronics' manufacturing facility between the second quarter of 1996 and the second quarter of 1997. Premature battery depletion resulting from bridging between adjacent connectors has resulted in no output or no telemetry in 1% of this population of devices to da The following recommendations are made: Physicians are advised to review patients who have 1256D/2102 pacemakers at an early date to evaluate pacemaker function.
		For patients who are pacemaker dependent, the physician should give consideration to explantation and replacement as soon as practicable.
		For patients who are not considered pacemaker dependent, the physician should consider replacement only if any abnormal function is identified (such as no output, telemetry loss, telemetry abnormality or premature end of life indication). All remaining non-pacemaker dependent patients with 1256D/2102 pacemakers should subsequently be reviewed at least every six months.

Model Identification	Advisory	Follow-up Recommendations at Time of Advisory
Tempo™ (Models 1102, 1902, 2102, 2902) Meta [™] (Model 1256D)	11/04/2002 Class II Dendritic growth at the battery/hybrid connection could cause a short circuit, which in turn could result in premature battery depletion.	This Advisory applies to a well-defined group of Tempo [™] and Meta [™] 1256D pacemakers which have been observed to exhibit premature battery depletion. This is an extension of a previous Tempo [™] /Meta [™] advisory dated 6/6/00. The following recommendations are made: For patients who are significantly pacemaker dependent. The decision as to whether or not to replace a pacemaker prophylactically remains one of clinical judgment. We therefore recommend that you strongly consider replacing these pacemakers on a prophylactic basis for all patients who are significantly pacemaker dependent, unless pacemaker replacement is medically contraindicated.
		For patients who are not considered pacemaker dependent. Again, this is a matter of clinical judgment. In the event a device is not

For patients who are not considered pacemaker dependent. Again, this is a matter of clinical judgment. In the event a device is not replaced, continued routine monitoring is advised.

Model Identification	Advisory	Follow-up Recommendations at Time of Advisory
Meta™ DDDR (Model 1256)	6/6/2000 Class II Integrated circuit failure due to electrostatic discharge during	This Advisory applies to a well-defined group of Meta [™] 1256 pacemakers, which have been observed to exhibit decreased reliability. The following recommendations are made:
	manufacturing resulting in no output or sensing anomalies.	For patients who are significantly pacemaker dependent. The decision as to whether or not to replace a pacemaker prophylactically remains one of clinical judgment. We therefore recommend that you strongly consider replacing these pacemakers on a prophylactic basis for all patients who are significantly pacemaker dependent, unless pacemaker replacement is medically contraindicated.

For patients who are not considered pacemaker dependent. Again, this is a matter of clinical judgment. In the event a device is not replaced, continued routine monitoring is advised.



Pacemaker and CRT-P Devices

Model Identification	Advisory	Follow-up Recommendations at Time of Advisory
Tempo™ (Models 1102, 1902, 2102, 2902) Meta™ (Model 1256D)	6/6/2000 Class II Dendritic growth at the battery/hybrid connection could cause a short circuit, which in turn could result in premature battery depletion.	This Advisory applies to a well-defined group of Tempo [™] and Meta [™] 1256D pacemakers, which have been observed to exhibit premature battery depletion. The following recommendations are made: For patients who are significantly pacemaker dependent. The decision as to whether or not to replace a pacemaker prophylactically remains one of clinical judgment. We therefore recommend that you strongly consider replacing these pacemakers on a prophylactic basis for all patients who are significantly pacemaker dependent, unless pacemaker replacement is medically contraindicated. For patients who are not considered pacemaker dependent . Again, this is a matter of clinical judgment. In the event a device is not replaced, continued routine monitoring is advised.
Model Identification	Advisory	Follow-up Recommendations at Time of Advisory

Trilogy[™] (Models 2250L, 2260L, 2264L, 2308L, 2318L, 2350L, 2360L, 2364L)

3/10/2000 Class II

Risk of malfunction due to an anomaly of the pacemaker's microprocessor. Typical manifestations of this anomaly are dashes observed on the programmer screen, unexpected rate variation, abnormally high battery current drain, and mode change. Continued monitoring of Trilogy[™] devices affected by an Advisory issued in July 1999 has revealed an additional low level of adverse events. A sub-population of the above models, principally those manufactured before January 1999, is potentially affected by a risk of malfunction due to an anomaly of the pacemaker's microprocessor. To date this has been reported in only 0.11% of the implanted population. Typical manifestations of this anomaly are:

Interrogation/programming difficulties, including the presence of dashes (---) on the programmer screen for some parameter values after interrogation

Unexpected rate variations

Abnormally high battery current drain

Mode change

The presence of dashes on the programmer screen is typically caused by partial programming of one or more of the programmed parameters and may be corrected by reprogramming. In the event that observed dashes (——) cannot be resolved by reprogramming, please contact your St. Jude Medical representative, as it may be possible to resolve the situation non-invasively via special programming and may not be indicative of a microprocessor anomaly.

Considering the low level of incidence of this anomaly, the following steps are recommended:

 Assess the patient population, relative to the potential for an inappropriate mode change to single-chamber atrial pacing, to determine which patients are pacemaker-dependent and have an inadequate ventricular escape rhythm.

Replacement of a device always remains a matter of clinical judgement, including balancing the clinical risk associated with pacemaker replacement against the risk of device malfunction.

3. Almost all microprocessor malfunctions described in this notification were found during routine follow-up. This reinforces the importance that pacemaker patients should be followed regularly in accordance with best prevailing medical practices.



Pacemaker and CRT-P Devices

Model Identification	Advisory	Follow-up Recommendations at Time of Advisory
Affinity™ (Models 5130L, 5130R, 5330L, 5330R, 5230L, 5230R)	2/14/2000 Class II An unsecured resistor connection to the hybrid circuit might cause abnormal measured data, false RRT indication, backup VVI mode, or intermittent loss of output.	This advisory applies to a very specific, well-defined group of Affinity devices that have been implanted worldwide. The device may exhibit any or all of the following output anomalies: Abnormal measured battery data, A false recommended replacement (RRT) indication, Reversion to back-up VVI mode, Intermittent loss of output. One marker of an affected device that may be apparent during a routine follow-up interrogation is an abnormally high reading for battery current (taking into consideration the device's programmed output parameters). If this or an early indication of RRT or reversion to back-up VVI mode is observed, please contact your local St. Jude Medical representative or Technical Services. Although the time course is variable, these behavioral anomalies will occur before there is any affect on device output.
Model Identification	Advisory	Follow-up Recommendations at Time of Advisory
Trilogy [™] (Models 2250L, 2260L, 2264L, 2308L, 2318L, 2350L, 2360L, 2364L)	7/19/1999 Class II Premature battery depletion caused by a current leakage path that could be created during the laser welding process to attach the battery to the device hybrid	 Analysis of the clinical data associated with the failed devices has shown that an early increase in battery impedance could be observed at one or more previous routine follow-up visits prior to reaching RRT. The observed rise in battery impedance is an earlier and more reliable indicator than the reported battery voltage. The battery depletion, although accelerated, does not occur abruptly and patients can be monitored using the measured data telemetry in the pacemaker. The following follow-up schedule and device monitoring is advised. 1. For patients who have had a follow-up visit at least 12 months after their device was implanted, check the measured data printout from the last follow-up schedule for that patient (6-month intervals recommended). If follow-up visits every 6 months is not your routine schedule, then an additional visit at 18 months should be performed. 2. For patients who have not yet had a follow-up visit at least 12 months after their device was implanted, the following is recommended: If the patient has had their device implanted for less than two months or has not had a device interrogation with measured data within the last three months, an evaluation of the battery impedance is recommended as soon as possible. This should be printed and a copy retained in the patient's pacemaker or office chart. Otherwise, if the battery impedance from the most recent evaluation is "< 1 k0hm," begin an every 3-month follow-up schedule with respect to measured data telemetry until that value has been recorded at least 12 months should be performed.

If the battery impedance reading is 1 k0hm or higher and the pacemaker has been implanted for less than two years, it is likely that the system is demonstrating accelerated battery depletion. Please contact your local Field Representative or Technical Services.



Left-Heart Leads

Model Identification	Advisory	Follow-up Recommendations at Time of Advisory
QuickSite™ (Models 1056T, 1058T) QuickFlex™ (Models 1156T, 1158T)	4/3/2012 Class II Abrasion of the silicone insulation in the distal portion of QuickSite and QuickFlex leads has led to visual observations of externalized conductors.	St. Jude Medical and its Medical Advisory Board recommend that physicians continue to monitor their patient's implanted system at regularly scheduled intervals with attention paid to diagnostic information related to LV pacing performance, in particular LV lead impedance and capture thresholds. Programming of alerts that monitor lead impedance changes outside of the nominal range and enabling the patient notifier should be considered. A special X-ray or fluoroscopic imaging is not recommended for LV CRT leads with normal electrical function. CRT pacing functionality should be evaluated during routine device checks and only leads exhibiting electrical anomalies that cannot be reprogrammed to deliver effective CRT pacing should be considered for replacement.
	There have been no reports of death or serious injury associated with the externalized conductors; likewise there have been no electrical dysfunctions attributable to the externalized conductors. The reported rate of externalized conductors in the QuickSite and QuickFlex leads is 0.023%, based on 39 confirmed cases of externalized conductors in a population of approximately 82,000 QuickSite and 89,000 QuickFlex leads sold worldwide. This issue is under-detected because these cases are visual observations without any signs of electrical dysfunction and fluoroscopic/xray imaging is not routine. Based on a review of returned leads and available fluoroscopic and x-ray images of patients with QuickSite and QuickFlex leads (1,219 leads), it is estimated that the incidence of conductor externalization on these leads may be 3% to 4%.	Current Status (December 31, 2015): At the time of the advisory there was a worldwide reported externalized conductor rate of 0.023% in QuickSite and QuickFlex leads. As of December 31, 2015, the worldwide reported externalized conductor rate for QuickSite and QuickFlex leads was 0.19%.



Defibrillation Leads

Model Identification	Advisory	Follow-up Recommendations at Time of Advisory
Optisure™ Defibrillation Lead	11/3/2015	St. Jude Medical recommends the following actions depending on the device the affected patients have implanted. According to our reco
(Models LDA220, LDA220Q, LDA230Q, LDP220Q)	A limited number of dual coil Optisure defibrillation leads may have been compromised during the manufacturing process.	the vast majority of patients with the subject leads have devices with the DynamicTx™ feature that provides additional protection to he ensure therapy delivery in the case of a compromised lead.
	A trim technique to remove excess medical adhesive around the SVC shock coil may have introduced damage to the lead's	For patients implanted with a potentially-impacted Optisure lead connected to a device WITH DynamicTx TM * technology, we recommend:
	insulation.	Review the Patient Records: 1. Ensure DynamicTx™ is programmed "On"
	A thorough investigation has determined the probability of a lead malfunction as a result of this trim technique is very	 Enroll these patients in our Merlin.net network Monitor patients as normal, with no additional testing or follow-up needed.
	low. A total of 447 leads subjected to the trim technique were distributed globally. Of those, 278 were implanted in the	For patients implanted with a potentially-impacted Optisure lead connected to a device WITHOUT DynamicTx ^{***} technology we recommend
	United States. St. Jude Medical is not aware of any adverse	1. Enroll these patients in our Merlin.net network
	clinical events related to this matter. Furthermore, an analysis of patients implanted with the subject leads that are being actively monitored via Merlin.net™ Patient Care Network has	 Where clinically appropriate, consider turning off the SVC coil (select RV-to-Can vector) If dual coil shocking configuration is desired, consider performing a high voltage test using maximum energy. a. If shock delivery is normal - no additional testing is required
	shown that none of these patients have experienced any recorded electrical issues.	b. If shock delivery identifies a short circuit – consider lead replacement
		* DynamicTx [™] technology automatically adjusts shock configurations to ensure the delivery of high-voltage therapy even if an electrical short were to occur.
		We recommend at your patient's next follow-up visit a St. Jude Medical representative be present to program an alert message into the implanted device. This will provide clinicians following patients with impacted subject lead an alert message on the Merlin [™] Programm upon interrogation, ensuring that future caregivers assessing the diagnostics of these devices receive the latest information and be ma aware of this corrective action. We believe such actions will further the ability of our clinician partners to most optimally manage the ca

of their patients.

Defibrillation Leads

Model Identification	Advisory	Follow-up Recommendations at Time of Advisory
Riata™ Defibrillation Lead (Models 1570, 1571, 1572, 1580, 1581, 1582) Riata™ i Defibrillation Lead (Models	11/28/2011 Class I	St. Jude Medical and its Medical Advisory Board (MAB) make the following recommendations, which are consistent with standard best practices and our December 2010 product communication.
1560, 1561, 1562, 1590, 1591, 1592) Riata™ ST Defibrillation Lead (Models 7000, 7001, 7002, 7010, 7011, 7040,	Externalized conductors occur when an abrasion results in an outer insulation breach, allowing the normally contained conductors to become visible outside the lead body. Even though causality cannot be established, when externalized conductors are accompanied by reports of electrical malfunction, these reports typically include pacing or defibrillation impedance changes, inappropriate therapy, noise and oversensing, and pacing threshold rise. Externalized conductors have not been observed in Riata ST Optim [™] and Durata [™] models due to the presence of an abrasion resistant outer Optim [™] lead insulation sheath. A summary of the types and incidence rates of Riata lead abrasion malfunctions is presented on pages 277-281 of this Product Performance Report.	Whenever possible, monitor devices and leads remotely and advise your patients of the importance of contacting you should they experience any adverse events. St. Jude Medical remote monitoring features can be used to detect electrical changes early that may be associated with externalized conductors.
7041, 7042)		Continue to monitor your patient's implanted system at regularly scheduled intervals with particular attention to diagnostic information related to defibrillation lead performance. The recommendations for frequency of in-person are a follow-up period of every 3 - 6 months for ICD/CRT-D devices per the HRS/EHRA consensus.
		Review lead measurements including pacing and high voltage lead impedances per your standard follow-up procedures in particular looking for significant changes from the patient's previous follow-up visits.
		If there is evidence of a lead electrical failure, manage the patient per standard practice. ¹ This may include x-ray or fluoroscopy. Additional testing, if necessary, could include provocative methods such as shoulder and arm movements and deep respiration while looking at the surface ECG and intracardiac electrograms with the programmer, which may reveal an intermittent problem associated with any source of lead electrical failure.
		The value of routine x-ray or fluoroscopy for patients with leads having no electrical abnormalities is unknown at this time and is therefore not recommended.
		In addition, prophylactic explant or replacement of a lead without electrical dysfunction is not recommended.
		Currently there is no expert consensus regarding whether patients undergoing pulse generator replacement should undergo fluoroscopy or lead replacement should an externalized conductor without electrical anomalies be present. This is, in part, because the risk versus benefit of replacing a lead in such a patient may vary from patient to patient and center to center. Clinical decisions in this setting should be individualized based on specific patient conditions and circumstances.
		Based on input from the MAB, St. Jude Medical is conducting a prospective study to evaluate further the incidence of externalized conductors and the long-term performance of leads with externalized conductors that do not exhibit electrical abnormalities.
		Current Status (February 29, 2016): At the time of the advisory there was a worldwide reported all-cause insulation abrasion rate of 0.63% for Riata silicone leads. The worldwide reported rate for the subcategory of externalized conductors in Riata silicone leads was 0.10%. As of February 29, 2016, there have been additional reports. The worldwide reported rates of all-cause abrasion and externalized conductors for Riata silicone leads was 4.26% and 2.33% respectively.

The latest information related to the silicone Riata lead advisory, including references to independent studies of Riata lead performance, can be obtained at www.RiataCommunication.com.

¹ Epstein, A.E. "Troubleshooting of Implantable Cardioverter-Defibrillators." <u>Clinical Cardiac Pacing. Defibrillation, and Resynchronization</u> <u>Therapy, 3rd ed.</u> Eds. Ellenbogen, K.A., Kay G.N., Lau, C-P., Wilkoff, B.L. Philadelphia: Elsevier, 2007. 1063-1086.



Defibrillation Leads

Model Identification	Advisory	Follow-up Recommendations at Time of Advisory
Riata [™] Defibrillation Lead (Models 1570, 1571, 1572, 1580, 1581, 1582) Riata [™] i Defibrillation Lead (Models 1560, 1561, 1562, 1590, 1591, 1592) Riata [™] ST Defibrillation Lead (Models 7000, 7001, 7002, 7010, 7011, 7040, 7041, 7042)	12/15/2010 Outside US Only Abrasion of silicone defibrillation leads is acknowledged within the clinical community as a well known clinical risk and is documented in the literature as the number one cause of lead failure across the industry with reported failure rates ranging from 3 to 10%. After more than 9 years of clinical use and approximately 227,000 implants, silicone insulated Riata™, Riata1™ i, and Riata™ ST defibrillation leads have exhibited an insulation abrasion rate of 0.47% (inclusive of confirmed returns and complaints/observations with no associated return). There are several factors that can contribute to lead abrasion in implanted pacing and defibrillation systems, including physiological stresses placed on the lead due to patient anomy, implant orientation, and mechanical stresses applied form concomitant devices in the body.	Continue to monitor your patient's implanted system at regularly scheduled intervals with particular attention to diagnostic information related to defibrillation lead performance. The recommendations for frequency of in-person or remote monitoring are a follow-up period of every 3 - 6 months for ICD/CRT-D devices per the HRS/EHRA consensus. Review lead measurements including pacing and high voltage lead impedances per your standard follow-up procedure in particular looking for significant changes from the patient's previous follow-up visits. If there is evidence of a lead electrical failure, manage the patient per standard practice. ¹ This may include x-ray or fluoroscopy. Additional testing if necessary could include provocative methods such as shoulder and arm movements and deep respiration while looking at the surface ECG and intracardiac electrograms with the programmer, which may reveal an intermittent problem if one exists. Consider remote monitoring and advise your patients of the importance of contacting you if they experience any adverse events. Current Status (February 29, 2016): At the time of the advisory there was a worldwide insulation abrasion rate of 0.47% for Riata silicone leads. As of February 29, 2016, there have been additional reports and the worldwide reported insulation abrasion rate is 4.26%.

¹ Epstein, A.E. "Troubleshooting of Implantable Cardioverter-Defibrillators." <u>Clinical Cardiac Pacing, Defibrillation, and Resynchronization</u> <u>Therapy, 3rd ed.</u> Eds. Ellenbogen, K.A., Kay G.N., Lau, C-P., Wilkoff, B.L. Philadelphia: Elsevier, 2007. 1063-1086.



ICM Devices

Model Identification	Advisory	Follow-up Recommendations at Time of Advisory
SJM Confirm™ ICM (Models DM2100, DM2102)		If you are following any patients implanted with the SJM Confirm Models DM2100 or DM2102 and their device was upgraded using the Merlin programmer with the above mentioned software versions it is recommended to determine the patient's clinical reason for the implant and their continued need for the device: If the device has previously been used to record and assist in the diagnosis of an arrhythmia and is no longer needed, no further action is required. The device will exhaust its battery capacity prior to the 3 year expected longevity. If the unit is still indicated for diagnosing a potential clinical arrhythmia, contact your Field Clinical Engineer and he/she will assist in
		 If the device is no longer indicated it can be left implanted until such time that a routine explant is desired.
		If the device is determined to be necessary and is experiencing increased current usage as described above, it can be corrected with assistance from your Sales Representative or St. Jude Medical Technical Services.
		St. Jude Medical is in the process of developing new Merlin PCS programmer software that will properly upgrade SJM Confirm devices.
		Current Status (December 31, 2015): At the time of the advisory, 83 implanted devices world-wide were identified as having undergone the problematic firmware upgrade. All of these devices have been corrected using the Merlin PCS programmer or were determined by the clinician to not require further action because the device had already provided the necessary diagnostic information and was no longer required. There have been no additional implanted devices confirmed to have been affected by this issue. Updated Merlin PCS programmer software has been implemented which prevents this issue from occurring in the future.



Remote Monitoring/Transmitters

Model Identification	Advisory	Follow-up Recommendations at Time of Advisory	
Merlin@home [™] RF Remote Monitoring Transmitter EX1150	<text><text><text><text><text></text></text></text></text></text>	The Merlin@home transmitter software has been modified to prevent this issue from or A Merlin@home software update will be performed automatically over its telephone, br any action from you or you patients. No changes to your patient's remote or in-clinic fo automatically "uploading" this new version of software to patient transmitters has bee above, patients who are being remotely followed with inductive telemetry (wand direct iremotely are not affected by this issue. Current Status (December 31, 2015) : The worldwide event rate of Merlin@ho in backup operation for Ellipse, Forti's Assura, Unity Assura and Quadra Assura (IQbs, v Merlin.net" remote monitoring. For Assurity and Allure pacemakers, the rate of occurre remotely. As of December 31, 2015, there were additional reports and the rate for Ellipse (Dbs, was 0.42%. For Assurity and Allure pacemakers, the rate of occurrence was 0.100 10 Status 10	badband, or cellular connection without requiring llow up schedules are required. The process of un. Patients with implanted devices not mentioned y over the device) and patients not being followed me transmitters initiating a software reset resulting vas 0.30% based on 83,000 devices followed via nee was 0.06% based on 12,000 devices followed ie, Fortify Assura, Unify Assura and Quadra Assura
		Page 306	ST. JUDE MEDICAL

HEALTHCARE PROFESSIONAL COMMUNICATIONS



HEALTHCARE PROFESSIONAL COMMUNICATIONS

Pacemaker and CRT-P Devices

Model Identification	Communication	Details
Affinity™, Entity™, Integrity™, Identity™, Sustain™, Frontier™, Victory™ and Zephyr™ models	1/29/2014 Worldwide As part of St. Jude Medical's commitment to communications on device performance, and in consultation with our Medical Advisory Board, we provided Health Care Professionals information regarding possible effects of electrocautery on older generation St. Jude Medical pacemakers.	St. Jude Medical has reviewed incident reports on specific older generation pacemaker models exposed to electrocautery. When devices from these pacemaker families are exposed to electrocautery (as well as the PEAK PlasmaBlade""blade), they may exhibit a temporary change in function that could persist for 30 seconds or longer after the electrocautery exposure has been terminated. The duration of the effect depends on several factors including the battery voltage of the device, the energy of the electrocautery output, and the distance from the electrocautery source to the implanted system. The most clinically significant observation has been loss of capture due to a transient reduction in the pacing output voltage. Placing a magnet over the device or programming to an asynchronous pacing mode will not prevent this temporary reduction in pacing output.
		The effects of electrocautery on cardiac implantable electronic device operation are well documented in the scientific literature and most, if not all, pacemaker and implantable cardioverter defibrillator (ICD) User's Manuals include labeling about the use of electrosurgery equipment and its possible effects on the operational characteristics and/or internal circuitry of these devices.
		As is the case with all perioperative assessments in patients with cardiac implantable electronic devices, evaluating the individual patient's dependence on the implanted device should be assessed prior to any procedure that would ordinarily require electrocautery, particularly a pacemaker procedure. If pacemaker dependency is identified, either do not use electrocautery or employ appropriate precautions to ensure that the heart rate will be supported in the presence of electrocautery. Consideration of placing a temporary transvenous pacemaker is appropriate. ^{1,2}
		All St. Jude Medical pacemaker and ICD User's Manuals provide Warnings and Precautions regarding the use of electrosurgical devices in the vicinity of an implanted device.
		Importantly, the more recent families of St. Jude Medical pacemakers (Accent and Anthem) and all ICDs are not subject to this temporary change in function from the extended effects of electrocautery.
		References: ¹ Hayes and Friedman, Cardiac Pacing, Defibrillation and Resynchronization, 2nd Edition, p. 192

rayes and ritedinan, Cardiac racing, Denormation and Resynchronization, 2nd Edition, p. ² Ellenbogen and Wood, Cardiac Pacing and ICDs, 4th Edition, p. 227



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Anthem [™] RF CRT-P (PM3210)	59	Current [™] VR RF (1207-36)	132
Atlas ^{M} + HF CRT-D (V-343)	44	Ellipse™ DR (CD2311-36)	91
Frontier™ II CRT-P (5586)	61	Ellipse™ DR (CD2311-36Q)	90
Promote ^{m} + CRT-D (CD3211-36)	40	Ellipse [™] DR (CD2411-36C)	87
Promote ^{m} + CRT-D (CD3211-36Q)	38	Ellipse™ DR (CD2411-36Q)	86
Promote [™] RF CRT-D (3207-36)	42	Ellipse™ VR (CD1311-36)	124
Quadra Assura ^{m} CRT-D (CD3265-40)	27	Ellipse [™] VR (CD1311-36Q)	124
Quadra Assura \sim CRT-D (CD3265-400)	25	Ellipse™ VR (CD1411-36C)	118
Quadra Assura™ CRT-D (CD3365-40C)	21	Ellipse™ VR (CD1411-36Q)	110
Quadra Assura [™] CRT-D (CD3365-40Q)	19	Fortify Assura [™] DR (CD2257-40)	93
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Atlas™ II + DR (V-268)	104	Riata™ (1580, 1581)	172
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Current [™] + DR (CD2211-36)	100	Riata™ i (1560, 1561)	168
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Riata [™] ST Optim [™] (7022)	162	Zephyr [™] SR (5620)	222
Riata™ ST Optim™ (7070, 7071)	158	Zephyr [™] XL DR (5826)	193
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Accent [™] DR RF (PM2210)	186	IsoFlex [™] Optim™ (1948)	243
Accent [™] SR (PM1110)	217	IsoFlex™ P (1648T)	255
Accent [™] SR RF (PM1210)	218	IsoFlex™ S (1642T)	256
Affinity™ DC (5230)	206	IsoFlex™ S (1646T)	257
Affinity™ DR (5330, 5331)	206	OptiSense™ (1699T, 1699TC)	245
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INDEX OF PHASED-OUT MODELS



Phased-out Models

As stated in the introduction of this Product Performance Report, product performance is plotted over a maximum range of 20 years, with a minimum of 500 registered implants required for inclusion in the report. As such, models that no longer meet the criteria for inclusion have been phased-out of the Product Performance Report over time. In order to provide our customers with information on these phased-out models, an index including the final edition for each phased-out model has been included. Previous Product Performance Reports can be viewed on the web at www.SJMprofessional.com.

CRT Devices	Final Edition	ICDs	Final Edition
Atlas [™] + HF (V-340)	Apr 2011	Photon [™] µ DR (V-232)	Oct 2009
Atlas™ II HF (V-365)	Dec 2015	Photon [™] µ VR (V-194)	May 2010
Atlas™ II + HF (V-366)	Dec 2015	Profile [™] (V-186F, V-186HV3)	Oct 2007
Epic™ HF (V-337)	Apr 2011		
Epic™ HF (V-338)	May 2010	Defibrillation Leads	Final Edition
Epic™ II HF (V-355)	Apr 2011	Riata™ ST Optim™ (7030, 7031)	Nov 2013
Frontier™ (5508)	May 2010	TVL [™] RV (RV01, RV02, RV03, RV06, RV07)	May 2010
Promote™ (3107-36)	Nov 2010	TVL [™] SVC (SV01, SV02, SV03)	May 2010
Promote™ RF (3207-30)	May 2014	Pacemakers	Final Edition
		AddVent [™] (2060)	May 2010
		Addvent (2000) Affinity™ VDR (5430)	May 2010 May 2010
ICDs	Final Edition	Integrity [™] µ SR (5136)	Nov 2013
Atlas™ DR (V-240)	May 2010	Integrity [™] ADx DR (5360)	Nov 2013
Atlas™ DR (V-242)	Dec 2014	Integrity [™] ADx SR (5160)	Nov 2013
Atlas™ II DR (V-265)	May 2014	Integrity™ μ DR (5336)	Nov 2013
Atlas™ VR (V-199)	Nov 2010	Meta™ DDDR (1256)	Oct 2008
Contour [™] II (V-185, V-185AC, V-185B, V-185C, V-185D)	May 2008	Meta™ DDDR (1256) Meta™ DDDR (1256D)	Oct 2008
Contour™ MD (V-175, V-175AC, V-175B, V-175C, V-175D)	May 2010	Paragon [™] (2010, 2011, 2012)	Nov 2010
Current™ DR (2107-36)	Nov 2010		Nov 2010
Current™ DR RF (2207-30)	Dec 2015	Paragon [™] II (2016) Paragon [™] III (2204, 2214, 2215)	
Current [™] VR (1107-36)	May 2010	Paragon [™] III (2304, 2314, 2315)	May 2010
Current™ VR (1207-30)	Nov 2013	Phoenix [™] II (2005, 2008, 2009)	Nov 2010
Epic™ + DR (V-236)	May 2010	Phoenix [™] III (2204, 2205)	Apr 2009
Epic™ + DR (V-239)	May 2014	Regency [™] SC+ (2400L, 2402L)	May 2010 Nov 2010
Epic™ DR (V-233)	Apr 2011	Solus [™] (2002, 2003) Solus [™] II (2005, 2007)	Nov 2010
Epic™ DR (V-235)	Nov 2010	Solus™ II (2006, 2007) Synchrony™ II (2022, 2023)	Oct 2009
Epic™ II DR (V-255)	May 2010	Synchrony [™] III (2028, 2029)	May 2010
Epic™ II DR (V-258)	Nov 2013		-
Epic™ II VR (V-158)	Nov 2013	Tempo™ D (2902) Tempo™ DR (2102)	Oct 2008 Oct 2008
Epic [™] + VR (V-196)	Dec 2015	Tempo [™] V (1102)	May 2010
Epic™ VR (V-197)	Nov 2010		-
Photon [™] DR (V-230HV)	Oct 2007	Tempo™ VR (1902)	May 2010



Phased-out Models

Pacemakers Trilogy [™] DC (2308) Trilogy [™] DC+ (2318) Trilogy [™] DR (2350) Trilogy [™] DR+ (2360, 2364) Trilogy [™] SR (2250) Trilogy [™] SR+ (2260, 2264)	Final Edition Oct 2006 Oct 2009 Apr 2007 May 2010 Oct 2009 Nov 2010
Pacing Leads	Final Edition
ACE [™] (1015M, 1025M)	Oct 2009
Fast-Pass™ (1018T, 1028T)	Oct 2009
IsoFlex™ P (1644T)	Apr 2011
Passive Plus™ (1135K, 1143K, 1145K,1235K, 1243K, 1245K)	May 2010
Passive Plus™ (1136T, 1142T, 1146T, 1222T, 1226T,	Dec 2014
1236T, 1242T, 1246T)	
Passive Plus™ DX (1343K, 1345K)	May 2010
Permathane [™] ACE (1035M)	May 2010
Permathane™ ACE (1036T, 1038T)	May 2010
Tendril™ (1148T, 1188T)	Dec 2015
Tendril™ (1188K)	May 2010
Tendril [™] DX (1388K)	May 2010
Unipolar Lead (Model 1007)	May 2010
•	-



Rx Only

Brief Summary: Prior to using these devices, please review the Instructions for Use for a complete listing of indications, contraindications, warnings, precautions, potential adverse events and directions for use.

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