

2022

Rhythm Management Product Performance Report

Q3 Edition



RESONATE™
Family of ICDs AND CRT-Ds



ACCOLADE™
Family of Pacemakers

INGEVITY™ +
Pacing Lead



CRM Quality Pledge

I improve
the quality
of patient care
and all things
Boston Scientific

Advancing Science for Life.

For over forty years, meaningful innovation at Boston Scientific Rhythm Management has helped patients live healthier, longer lives. We are committed to providing performance data which are accurate, transparent and responsive to topics of contemporary clinical interest. This Q3 2022 report includes data through July 5th, 2022.

Boston Scientific provides performance data for pulse generators and leads that meets or exceeds the 2014 revision of ISO 5841-2: 2014 (E), the AdvaMed Industry Guidance for Uniform Reporting of Clinical Performance, and addresses recommendations from the Heart Rhythm Society Task Force.

This report provides the most comprehensive presentation of rhythm management product performance data available, including:

- ✓ U.S. lead and pulse generator survival probability
- ✓ Worldwide malfunction counts and patterns
- ✓ Worldwide malfunctions during an implant procedure
- ✓ Acute (first month) lead observations
- ✓ Chronic (after first month) lead complications
- ✓ Reasons for out of service
- ✓ Return rates

Your feedback is always welcome, and plays a vital role in our effort to continuously improve our products and services, advancing science to transform the lives of our patients.

Sincerely,

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Vice President, Quality Assurance

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Statistical Methodology

What Is Device Survival Probability?

Medical journals have traditionally used patient survival probability to display information on treatment option effectiveness. In the report, **pulse generator and lead** survival probabilities convey information about long-term performance of implantable cardiac rhythm management products.

Device survival probability shows the percentage of implanted devices that remain implanted and in service at various points in a product's service life, in the absence of competing risks, such as natural mortality or voluntary explants. Conceptually, a pulse generator of high reliability and large battery capacity or low current drain remains near 100% survival until eventually, normal battery depletion begins to cause significant numbers of devices to be removed, and the device survival probability drops rapidly. For example, a device survival probability of 99% indicates that within the stated implant duration, the pulse generator had a 1% risk of removal for battery depletion or for incurring a malfunction that required replacement. Survival probabilities are provided with and without normal battery depletions, depicted as "Battery Depletions and Malfunctions" and "Malfunctions Only," respectively.

Boston Scientific estimates survival probability in compliance with the 2014 revision of international standard ISO 5841-2: 2014 (E). Survival probability is calculated at a given time by separately estimating the probability of surviving each interval and multiplying the survival probabilities of all intervals through which a device has passed. To estimate the probability of surviving any interval, the number of units that successfully functioned during the interval is divided by the number of units exposed to malfunction/depletion during the interval. The number of units exposed is calculated using the actuarial method, where device suspensions in an interval are distributed uniformly across the interval. Reasons for device suspension from survival probability statistics are detailed in the report section entitled U.S. Reason for Out of Service.

Inclusion Criteria for Pulse Generator and Lead Survival Probability Datasets

Pulse generator survival probability is reported for U.S. implanted devices in product families that meet inclusion criteria described below. Lead survival probability is reported for both the U.S. Registered Implant population and for leads enrolled in the Longitude Surveillance Registry, for product families that meet inclusion criteria described below.

To be included in survival probability statistics, a device must first be successfully implanted (defined in this report as occurring upon pocket closure). Prophylactic device removals are tracked as part of the active population up until the time the device is removed from service; devices removed prophylactically and are not identified as malfunctions at the time of explant do not contribute to a reduction in survival probability. Reasons for device explant or out of service, if known, are provided in this report for each pulse generator product/product grouping.

Survival probabilities are based on devices registered as implanted in the U.S. Privacy laws in many other geographies preclude manufacturers from obtaining specific patient implant and explant information, thus device survival probabilities cannot be constructed from these data. Boston Scientific considers U.S. experience representative of worldwide performance. The Malfunction Details for leads and pulse generators reflect worldwide malfunctions, inclusive of U.S. data.

Criteria for inclusion of product families in this report are in compliance with the AdvaMed *Industry Guidance for Uniform Reporting of Clinical Performance of Pulse Generators and Leads*. Survival estimates are provided for product families once they have at least 10,000 cumulative U.S. implant

months. The minimum interval sample size is 200 U.S. implanted units. Pulse generator product families with fewer than 500 total remaining estimated active U.S. devices are not included in this report. Lead product families that received original U.S. market release approval twenty or more years ago are not included in this report.

Estimated Longevity information is provided for pulse generator products in the U.S. Survival Probability - Battery Depletions and Malfunctions graphs, depicted as a blue bar on the x axis for Years Implanted. The estimated longevity values from the Instructions for Use for each product family are used to construct the blue longevity bars on their U.S. Survival Probability graph. They represent the range of estimated longevity based on a variety of programmed settings and therapy usage.

Survival probability data are presented in tabular and graphical formats online at www.bostonscientific.com/ppr. Performance data for Intermedics products may also be found on www.bostonscientific.com/ppr. Specific inclusion criteria for pulse generator and lead survival probability datasets are described here. Not all products may be approved for use in all geographies, as product approval is geography specific.

Worldwide distribution, U.S. registered implant, and U.S. estimated active implant numbers have been rounded to provide population size context.

To convey implant experience for a product family, U.S. approval dates are provided. The U.S. approval date listed is the earliest date Boston Scientific received approval for one or more of the models in the family.

Survival Probability – Battery Depletions and Malfunctions (Pulse Generators)

Reduction in survival probability for **pulse generators** is due to:

- Devices removed for normal battery depletion
- Device malfunctions occurring while implanted, as confirmed by returned product analysis

Survival Probability – Malfunctions Only (Pulse Generators)

Reduction in survival probability for **pulse generators** is due only to:

- Device malfunctions occurring while implanted, as confirmed by returned product analysis; premature battery depletions are considered device malfunctions.

In this case, normal battery depletions do not contribute to the reduction in survival probability; rather, reduction in survival probability is due only to confirmed pulse generator malfunctions. Furthermore, unconfirmed reports of premature battery depletions do not reduce “Malfunctions Only” survival probability. Put another way, this information depicts the percentage of confirmed malfunction-free devices remaining in service at various intervals in the product's service life, based on returned product analysis.

Survival Probability — Complications and Malfunctions (Leads)

The 2014 version of ISO 5841-2: 2014(E) outlines a methodology for lead survival probability inclusion. Boston Scientific has applied this methodology for survival probability to all lead families implanted as of May 2009 and forward. Worldwide malfunctions are not included for previous lead families.

Reduction in survival probability is due to:

- Leads and lead segments returned for analysis and determined to be non-compliant in form, fit, or function at any time while implanted
- Leads removed from service with reported complications 30 days or more post-implant, whether returned or not. See the Chronic Lead Complications Table in this report for the observations which are included.

Further Adjustments for Device and Lead Survival

Because underreporting of patient deaths unrelated to device function would result in overestimation of pulse generator or lead survival by overstating the number of devices in service, Boston Scientific addresses this underreporting in two ways. First, regular updates are obtained from the Social Security Administration about deceased persons and compared to Boston Scientific patient data to identify patients who have died but whose deaths had not been reported to Boston Scientific. Second, Boston Scientific uses 10% annual patient mortality as a baseline and adjusts reported patient deaths in any interval for which reports are less than the baseline rate. No adjustment is applied to account for underreporting of malfunctions, as the rate of underreporting is unknown.

Boston Scientific does not make statistical adjustments to account for underreporting of battery depletion. However, as mentioned earlier, Boston Scientific includes non-returned devices removed from service for battery depletion with no associated complaint as normal battery depletions.

Categorization of Malfunctions for Survival Probability Reporting

Malfunctions represent pulse generators and leads removed from service and confirmed through laboratory analysis to have operated outside the specified performance limits established by Boston Scientific while implanted and in service. Device damage occurring during or after explant, or caused by external factors including those warned against in product labeling (such as ionizing therapeutic radiation), are not reported as device malfunctions in survival data. Damage to a pulse generator caused by a lead malfunction is reported as a lead malfunction. Malfunctions are further classified according to their impact on therapy, as follows:

- **Malfunction With Compromised Therapy —**

The condition when a device is confirmed through laboratory analysis to have malfunctioned in a manner that compromised pacing or defibrillation therapy (including complete loss or partial degradation) while implanted and in service.

Examples include (but are not limited to): sudden loss of battery voltage; accelerated current drain such that low battery was not detected before loss of therapy; sudden malfunction during defibrillation therapy resulting in aborted therapy delivery; intermittent malfunction in which therapy is compromised while in the malfunction state.

- **Malfunction Without Compromised Therapy —**

The condition when a device is confirmed through laboratory analysis to have malfunctioned in a manner that did not compromise pacing or defibrillation therapy while implanted and in service. Malfunctions in which critical patient-protective pacing and defibrillation therapies remain available are included here.

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

Categorization of Normal Battery Depletion for Survival Probability Reporting

Per the AdvaMed *Industry Guidance for Uniform Reporting of Clinical Performance of Pulse Generators and Leads*, **Normal Battery Depletion** is defined as the condition when:

- a) A device is returned with no associated complaint and the device has reached its elective replacement indicator(s) with implant time that meets or exceeds the nominal (50 percentile) predicted longevity at default (labeled) settings, or
- b) A device is returned and the device has reached its elective replacement indicator(s) with implant time exceeding 75% of the expected longevity using actual device settings and therapeutic use.

Boston Scientific includes within this count both returned *and non-returned* devices removed from service for battery depletion with no associated complaint. In conformance with the AdvaMed guidance document, Boston Scientific performs battery usage analysis, including battery status verification, on all devices returned without a complaint. We continue to include non-returned devices reported by our customers as being removed from service due to normal battery depletion within this count.

Boston Scientific CRM's Corrective and Preventive Actions (CPA) System

Boston Scientific strives to provide implantable devices of high quality and reliability. However, these devices are not perfect and may exhibit malfunctions at a low rate of occurrence. Device performance information is received from many sources through various channels. Boston Scientific monitors information from many sources including suppliers, testing, manufacturing and field performance to identify opportunities for improvement.

When a device is returned to Boston Scientific, laboratory technicians and engineers assess overall device function and perform analysis using specific tests related to the clinical observation(s). Test results are compared to original manufacturing records and design intent. Clinical observations are added to laboratory findings to help determine cause of the clinical observation(s). Each discrete event is then compared to other similar-appearing events. If a pattern is detected, actions are taken to identify a common root cause, and improvements intended to improve product reliability and/or performance may be implemented. Observations from supplier data and internal manufacturing operations also lead to opportunities for improvement. Improvements, when made, may include design changes, manufacturing and supplier process modifications, software updates, educational communications, or labeling changes to preceding, existing, or subsequent generations. Improvement implementation may vary by geography due to various factors including regulatory review timing. They may not be applied to every product susceptible to the malfunction pattern and may not mitigate or eliminate the potential for additional malfunctions. In cases where an improvement is made to an approved product line, devices made without the improvement may continue to be distributed where such products meet our high reliability and performance standards, particularly when changes are incremental and in accordance with our overall philosophy of continuous product improvement.

Improvements are closely monitored for effectiveness. Boston Scientific informs regulatory bodies of each significant event that poses potential risk to patient health to meet regulatory obligations, and shares returned product investigation findings with physicians. The malfunction details section for pulse generators and leads includes a summary of these findings.

In summary, thorough investigation of internal and external data coupled with low trigger levels for improvements creates a continuous product improvement system that is very responsive to patient and physician needs. Boston Scientific is committed to sharing an accurate picture of product performance and addressing identified opportunities for improvement in a timely fashion for our customers.

Malfunction Details: Overview

Boston Scientific CRM pursues product quality and reliability with a passion. We therefore continuously monitor product performance to make improvements whenever possible. Worldwide Malfunction tables provide a count and description of malfunctions associated with the majority of actively in-service Boston Scientific products. Intermedics co-branded product data are included in corresponding pacemaker and pacing lead malfunction counts and details. Information presented is based on malfunctions reported to and analyzed by Boston Scientific. Each table contains malfunction counts listed by category, pattern and therapy availability.

Category

Malfunctions are categorized by the nature of their root cause. For example, a malfunction due to the software within a pulse generator is listed in the Software category. There are four pulse generator malfunction categories and four malfunction categories for leads (described below).

Patterns

Patients and physicians have asked for more access to Quality System details; therefore, we provide information on patterns of product performance. Patterns listed are informational and do not represent actions that need to be taken. Boston Scientific is committed to direct communication when predicted product performance fails to achieve design or performance expectations or when actions may be taken to improve patient outcomes. Malfunctions associated with product advisories are denoted. Refer to the Product Advisories section for more information.

Each pattern description includes:

- **Clinical Manifestation and Root Cause** – Malfunctions for each product are characterized according to root cause. Descriptions provide clinical observations and/or analysis findings associated with each malfunction pattern listed in this report. Malfunctions listed within “Other” either do not yet have an identified root cause, or are related to a proprietary product feature, such as connectors or seal rings.
- **Improvement Implementation** – All of the patterns listed are thoroughly investigated and analyzed. As part of Boston Scientific's process of continuous improvement, when possible, improvements have been or will be implemented in response to identified malfunction patterns. Improvements may include product design changes, manufacturing process modifications, software updates, educational communications, or labeling changes to preceding, existing, or subsequent generations. Improvement implementation may vary by geography due to various factors, including regulatory review timing. They may not be applied to every product susceptible to the malfunction pattern, and may not completely mitigate or eliminate the potential for additional malfunctions.

Pattern information in this report is dynamic. Pattern names, superscript number assignments and descriptions may all change from quarter to quarter; as Boston Scientific's investigations progress and improvements are implemented, updated information is provided.

Therapy Availability

Malfunctions are further classified according to their impact on therapy, as follows:

- **Malfunction With Compromised Therapy** – The condition when a device is confirmed through laboratory analysis to have malfunctioned in a manner that compromised pacing or defibrillation therapy (including complete loss or partial degradation) while implanted and in service. Examples include (but are not limited to): sudden loss of battery voltage; accelerated current drain such that low battery was not detected before loss of therapy; sudden malfunction during defibrillation therapy resulting in aborted therapy delivery; intermittent malfunction in which therapy is compromised while in the malfunction state.
- **Malfunction Without Compromised Therapy** – The condition when a device is confirmed through laboratory analysis to have malfunctioned in a manner that did not compromise pacing or defibrillation therapy while implanted and in service. Malfunctions in which critical patient-protective pacing and defibrillation therapies remain available are included here. Examples include (but are not limited to): error affecting diagnostic functions, telemetry function, data storage; malfunction of a component that causes the battery to lose power quickly enough to result in premature battery depletion, but slowly enough that the condition is detected through normal follow-up before therapy is lost; mechanical problems with connector header that do not affect therapy.

Pulse Generator Malfunctions

Pulse generator malfunctions represent devices removed from service and confirmed through laboratory analysis to have operated outside the performance limits established by Boston Scientific while implanted and in service. Device damage occurring during or after explant, or caused by external factors including those warned against in product labeling (e.g. therapeutic radiation), are not considered device malfunctions. Damage to a pulse generator caused by a lead malfunction is reported as a lead malfunction.

Lead Confirmed Malfunctions

Lead confirmed malfunctions represent leads removed from service and confirmed through laboratory analysis to have operated outside the performance limits established by Boston Scientific while implanted and in service. The Boston Scientific Product Performance Report is in compliance with the 2014 version of ISO 5841-2: 2 (E), Reporting of Clinical Performance of Populations of Pulse Generators or Leads. This version categorizes leads with reported complications which are taken out of service and returned, but for which no malfunction can be confirmed, as Chronic Lead Complications. This methodology also addresses the Recommendations from the Heart Rhythm Society Task Force on Lead Performance Policies and Guidelines.

Supporting Greater Return of Explanted Devices

The Heart Rhythm Society (HRS) Task Force on Device Performance Policies and Guidelines stated that knowledge, confidence, and trust in cardiac rhythm management devices can be strengthened through enhancing systems that increase the return of devices to the manufacturer. Boston Scientific CRM shares in this belief and supports the HRS-specified actions geared toward achieving the goal of greater device return to the manufacturer, including post-mortem device interrogation, explantation and return to the manufacturer.¹ Approximately 60% of ICD, CRT-D, and PM pulse generators are returned for analysis.

Help Us Provide You With More Complete Product Performance Data

Reporting Adverse Events

The data in this report reflect Boston Scientific's understanding of product performance. We acknowledge that there is underreporting. If you have product performance observations to report, please contact your local Boston Scientific sales representative or Boston Scientific's Technical Services department at:

United States: Phone 1.800.CARDIAC (1.800.227.3422) or 1.651.582.2698.

International: Please refer to the Country Offices List for local contact information.

E-mail: crmevent@bsci.com

Returning Products to Boston Scientific

Boston Scientific provides a Returned Products Kit (Model 6499) that includes proper forms, shipping/packaging (biohazard bags), and a prepaid shipping label. It can be ordered at no charge through Boston Scientific's Customer Service department at 1.800.CARDIAC (1.800.227.3422) or 1.651.582.2698, or you can order a Returned Products Kit online at www.bostonscientific.com/ppr.

¹Carlson et al. Recommendations from the Heart Rhythm Society Task Force. Heart Rhythm. October 2006; 3(special issue):1251 — 1252.

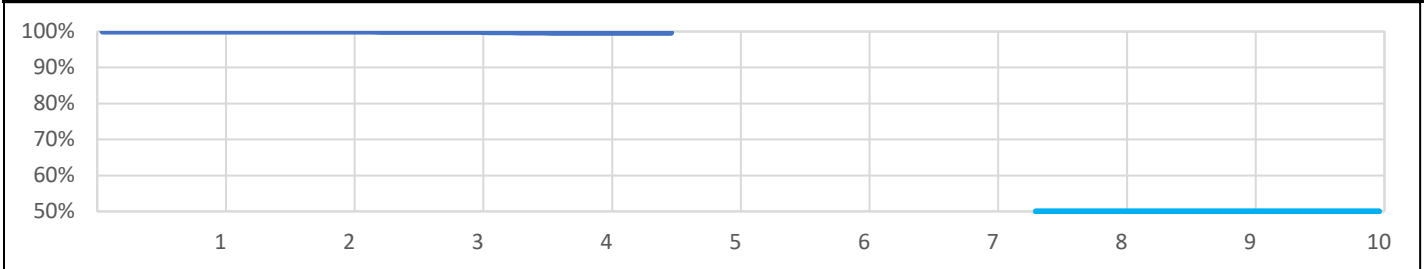


RESONATE/MOMENTUM/CHARISMA/VIGILANT CRT-D

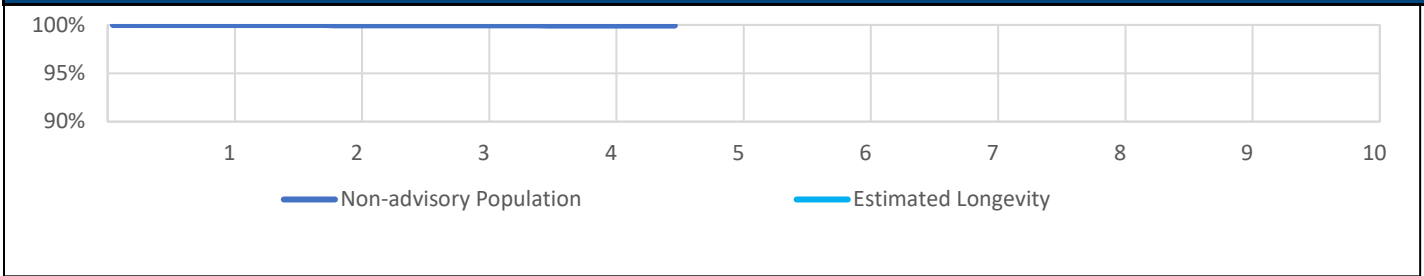
Models: G124/G125/G126/G128/G138/G224/G225/G228/G237/G247/G248/G324/G325/G347/G348/
G424/G425/G426/G428/G437/G447/G448/G524/G525/G526/G528/G537/G547/G548

US Summary			
US Registered Implants:	56,000	US Normal Battery Depletions:	27
US Approval Date:	September 2017	US Malfunctions:	13
US Estimated Active Implants:	52,000	Without Compromised Therapy:	11
		With Compromised Therapy:	2

Battery Depletions and Malfunctions



Malfunctions Only



US Survival Probability											
	Year	1	2	3	4	5	6	7	8	9	10
Non-Advisory Population	Depletions and Malfunctions	100.0%	100.0%	99.9%	99.6%	99.6%	--	--	--	--	--
Registered Implants:	Malfunctions Only	100.0%	100.0%	100.0%	99.9%	99.9%	--	--	--	--	--
	56,000 Effective Sample Size	36845	21362	9958	2286	200	--	--	--	--	--

@ 55 months

RESONATE/MOMENTUM/CHARISMA/VIGILANT CRT-D

Models: G124/G125/G126/G128/G138/G224/G225/G228/G237/G247/G248/G324/G325/G347/
G348/G424/G425/G426/G428/G437/G447/G448/G524/G525/G526/G528/G537/G547/G548

Worldwide Confirmed Malfunctions	26
Worldwide Distribution	105,000

	With Compromised Therapy	Without Compromised Therapy	Total
Electrical			
Integrated circuit (63)	1	4	5
Low-voltage capacitor (69)	0	3	3
Battery (53)	1	4	5
High voltage capacitor (75)	1	0	1
Software			
Memory errors (51)	0	7	7
Other			
Non-patterned, other	1	4	5
Grand Total	4	22	26

References cited in table above ([link](#))

AUTOGEN CRT-D

Models: G160/G161/G164/G166/G168/G172/G173/G175/G177/G179

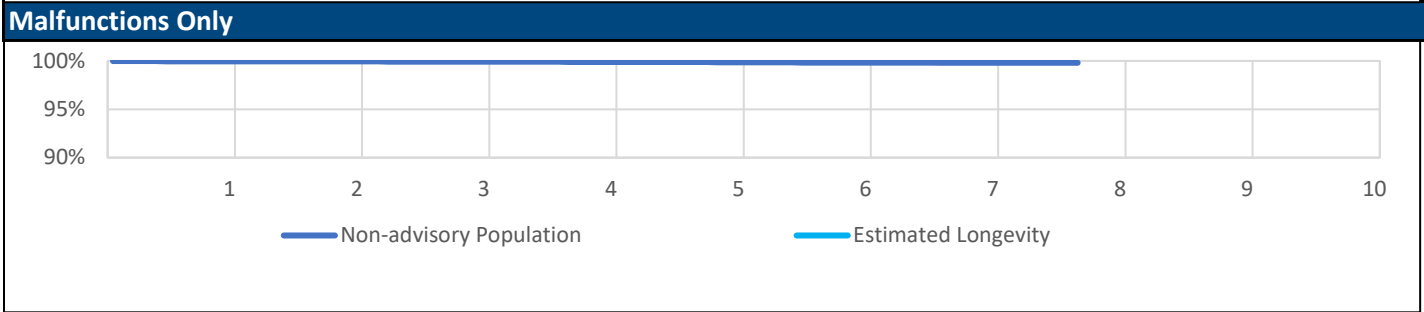
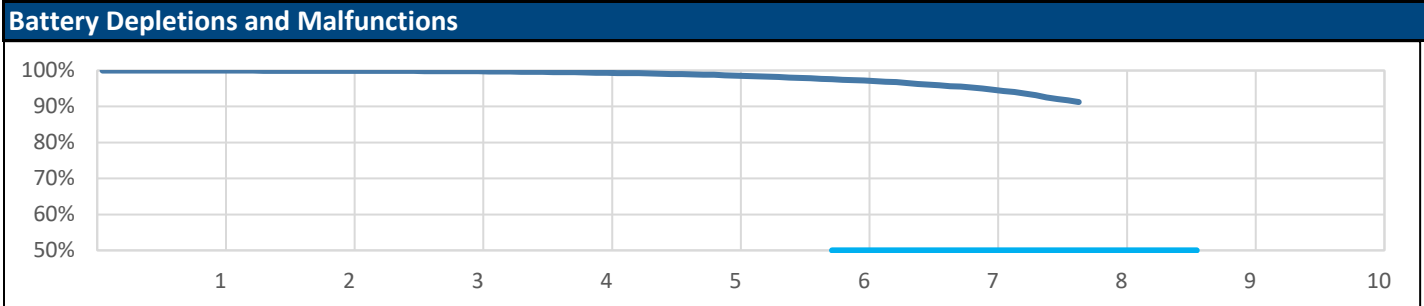
Worldwide Confirmed Malfunctions		25	
Worldwide Distribution		24,000	
	With Compromised Therapy	Without Compromised Therapy	Total
Electrical			
High voltage circuit component (62)	0	7	7
Integrated circuit (63)	2	4	6
Low-voltage capacitor (69)	0	1	1
Battery (53)	2	4	6
Software			
Safety Core-unintended biventricular pacing (64)	0	1	1
Other			
Non-patterned, other	1	3	4
Grand Total	5	20	25

References cited in table above [\(link\)](#)

DYNAGEN/INOGEN/ORIGEN CRT-D

Models: G050/G051/G056/G058/G140/G141/G146/G148/G150/G151/G154/G156/G158

US Summary			
US Registered Implants:	73,000	US Normal Battery Depletions:	775
US Approval Date:	April 2014	US Malfunctions:	68
US Estimated Active Implants:	58,000	Without Compromised Therapy:	56
		With Compromised Therapy:	12



US Survival Probability											
Year		1	2	3	4	5	6	7	8	9	10
Non-Advisory Population	Depletions and Malfunctions	100.0%	99.9%	99.8%	99.4%	98.7%	97.3%	95.0%	91.2%	--	--
Registered Implants:	Malfunctions Only	100.0%	99.9%	99.9%	99.9%	99.9%	99.8%	99.8%	99.8%	--	--
73,000	Effective Sample Size	62553	52994	43530	32900	21286	10574	3194	368	--	--

@ 93 months

DYNAGEN/INOGEN/ORIGEN CRT-D

Models: G050/G051/G056/G058/G140/G141/G146/G148/G150/G151/G154/G156/G158

Worldwide Confirmed Malfunctions		101	
Worldwide Distribution		122,000	
	With Compromised Therapy	Without Compromised Therapy	Total
Electrical			
High voltage circuit component (62)	0	17	17
Integrated circuit (63)	4	11	15
Low-voltage capacitor (69)	0	11	11
High voltage capacitor (75)	2	1	3
Battery (53)	0	7	7
Software			
Memory errors (51)	3	25	28
Safety Core-unintended biventricular pacing (64)	0	2	2
Other			
Non-patterned, other	9	9	18
Grand Total	18	83	101

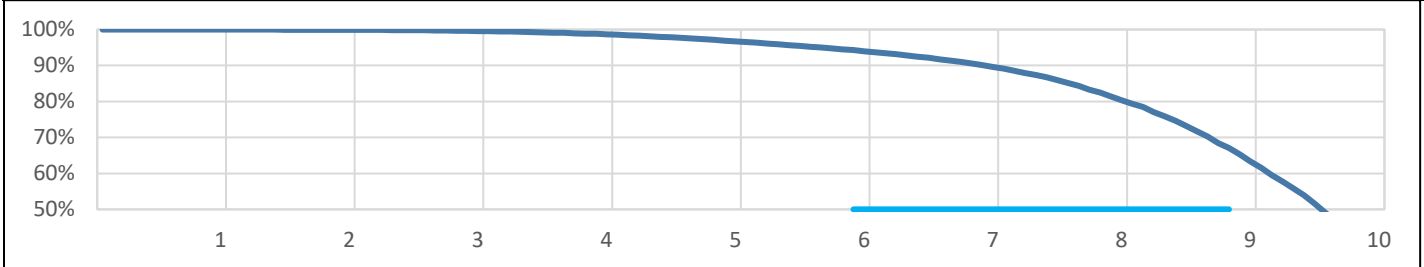
References cited in table above [\(link\)](#)

INCEPTA/ENERGEN/PUNCTUA CRT-D

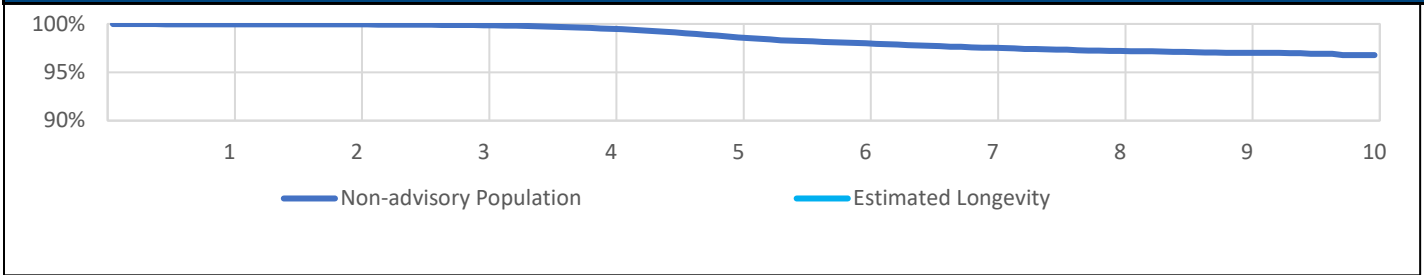
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US Summary			
US Registered Implants:	53,000	US Normal Battery Depletions:	6,094
US Approval Date:	November 2011	US Malfunctions:	795
US Estimated Active Implants:	25,000	Without Compromised Therapy:	775
		With Compromised Therapy:	20

Battery Depletions and Malfunctions



Malfunctions Only



US Survival Probability											
	Year	1	2	3	4	5	6	7	8	9	10
Non-Advisory Population	Depletions and Malfunctions	100.0%	99.9%	99.6%	98.8%	96.9%	94.3%	90.1%	81.4%	65.3%	37.7%
Registered Implants:	Malfunctions Only	100.0%	100.0%	99.9%	99.5%	98.7%	98.1%	97.6%	97.2%	97.0%	96.8%
53,000	Effective Sample Size	46307	41463	37006	32850	28795	24866	20345	12785	4510	350

INCEPTA/ENERGEN/PUNCTUA CRT-D

Models: N050/N051/N052/N053/N140/N141/N142/N143/N160/N161/N162/N163/N164/N165/
P052/P053/P142/P143/P162/P163/P165

Worldwide Confirmed Malfunctions	1,278
Worldwide Distribution	81,000

	With Compromised Therapy	Without Compromised Therapy	Total
Electrical			
Safety Core-electrocautery (42)	1	5	6
High-voltage capacitor (43)	5	0	5
Low-voltage capacitors (47)	0	1	1
Integrated circuit (50)	7	2	9
Battery (53)	1	11	12
Low-voltage capacitor (54)	6	1198	1204
Low-voltage capacitor (69)	0	6	6
Mechanical			
Transformer (38)	6	0	6
Software			
Memory errors (51)	0	8	8
Other			
Non-patterned, other	5	16	21
Grand Total	31	1247	1278

References cited in table above [\(link\)](#)

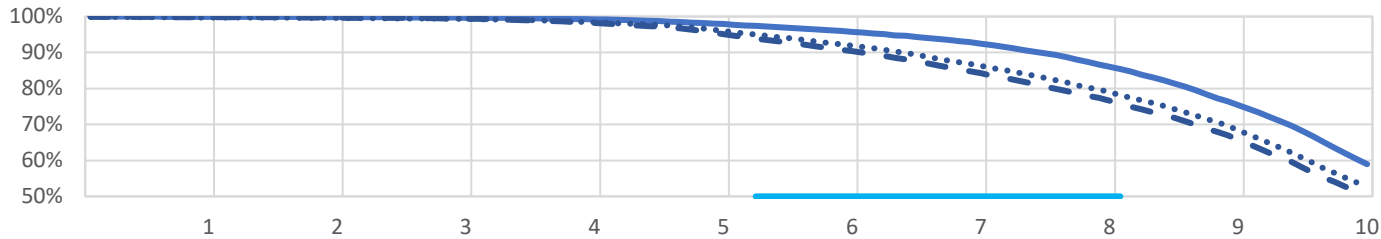
COGNIS CRT-D

Models: N106/N107/N108/N118/N119/N120/P106/P107/P108

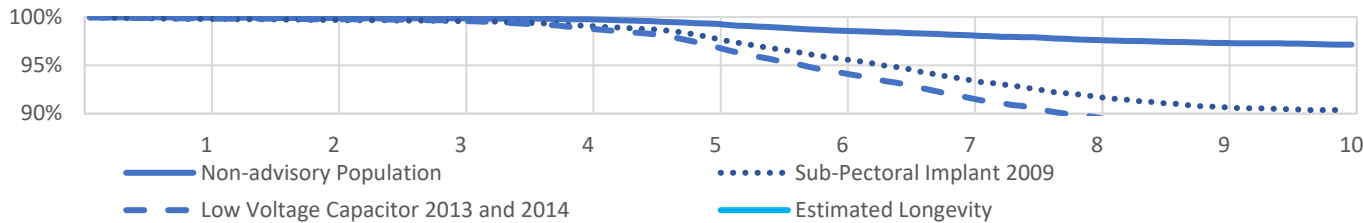
US Summary

US Registered Implants:	75,000	US Normal Battery Depletions:	14,911
US Approval Date:	March 2008	US Malfunctions:	2,095
US Estimated Active Implants:	16,000	Without Compromised Therapy:	1,902
		With Compromised Therapy:	193

Battery Depletions and Malfunctions



Malfunctions Only



US Survival Probability

	Year	1	2	3	4	5	6	7	8	9	10
Non-Advisory Population	Depletions and Malfunctions	99.9%	99.8%	99.7%	99.3%	98.0%	96.0%	92.9%	86.6%	76.4%	60.4%
Registered Implants:	Malfunctions Only	99.9%	99.9%	99.9%	99.8%	99.3%	98.6%	98.2%	97.6%	97.3%	97.1%
36,000	Effective Sample Size	31276	28049	25112	22394	19846	17361	14982	12489	9750	6719

COGNIS CRT-D

Models: N106/N107/N108/N118/N119/N120/P106/P107/P108

US Survival Probability (cont.)											
	Year	1	2	3	4	5	6	7	8	9	10
Subpectoral Implant 2009	Depletions and Malfunctions	99.8%	99.6%	99.4%	98.5%	96.3%	92.2%	86.8%	79.7%	69.6%	53.9%
Registered Implants:	Malfunctions Only	99.8%	99.7%	99.6%	99.1%	98.0%	95.8%	93.7%	91.9%	90.7%	90.4%
32,000	Effective Sample Size	27326	24214	21614	19187	16757	14282	11963	9736	7543	5152
Low Voltage Capacitor 2013 and 2014	Depletions and Malfunctions	99.8%	99.7%	99.5%	98.4%	95.6%	90.7%	84.8%	77.4%	67.0%	51.5%
Registered Implants:	Malfunctions Only	99.8%	99.8%	99.6%	98.9%	97.2%	94.4%	91.8%	89.8%	88.4%	88.0%
26,000	Effective Sample Size	22463	19938	17825	15776	13723	11588	9614	7772	5971	4025

*Devices subject to an advisory. Refer to the Advisories for more details. Devices may be part of more than one advisory.

COGNIS CRT-D

Models: N106/N107/N108/N118/N119/N120/P106/P107/P108

Worldwide Confirmed Malfunctions		2,953	
Worldwide Distribution		109,000	
	With Compromised Therapy	Without Compromised Therapy	Total
Electrical			
Low Voltage Capacitor 2014 - August 29, 2013 and September 17, 2014 Voluntary Physician Advisory (3)	83	1617	1700
Safety Core-electrocautery (42)	25	54	79
High-voltage capacitor (43)	6	1	7
Low-voltage capacitors (47)	0	7	7
Integrated circuit (50)	21	8	29
High voltage circuit (52)	1	0	1
Battery (53)	10	51	61
Low-voltage capacitor (54)	12	843	855
Low-voltage capacitor (69)	0	2	2
Mechanical			
Transformer (38)	9	0	9
Difficulty securing lead (41)	8	8	16
Header contacts (45)	8	10	18
Subpectoral implant 2009 - December 01, 2009 Voluntary Physician Advisory (6)	48	20	68
Header (74)	25	9	34
Software			
Safety Core-programming (46)	0	1	1
Alert messages not displayed post-EOL (48)	0	2	2
Memory errors (51)	2	15	17
Other			
Non-patterned, other	11	36	47
Grand Total	269	2684	2953

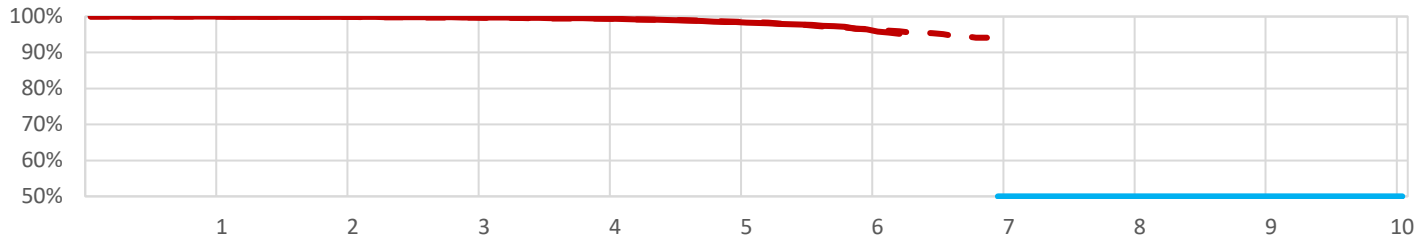
VISIONIST/VALITUDE

Models: U125/U128/U225/U226/U228

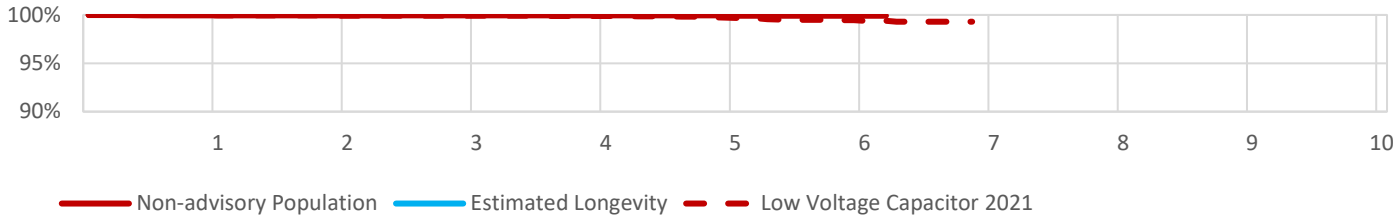
US Summary

US Registered Implants:	45,000	US Normal Battery Depletions:	267
US Approval Date:	October 2014	US Malfunctions:	52
US Estimated Active Implants:	37,000	Without Compromised Therapy:	50
		With Compromised Therapy:	2

Battery Depletions and Malfunctions



Malfunctions Only



US Survival Probability

		Year	1	2	3	4	5	6	7	8	9	10
Non-Advisory Population	Depletions and Malfunctions		100.0%	99.9%	99.7%	99.5%	98.4%	96.4%	95.2%	--	--	--
Registered Implants:	Malfunctions Only		100.0%	100.0%	100.0%	100.0%	100.0%	99.9%	99.9%	--	--	--
	Effective Sample Size	39,000	27181	18993	12517	7166	3273	606	253	--	--	--

@ 75 months

*Devices subject to an advisory. Refer to the Advisories for more details. Devices may be part of more than one advisory.

VISIONIST/VALITUDE

Models: U125/U128/U225/U226/U228

US Survival Probability (cont.)											
	Year	1	2	3	4	5	6	7	8	9	10
Low Voltage Capacitor 2021	Depletions and Malfunctions	100.0%	99.9%	99.7%	99.4%	98.6%	96.5%	94.1%	--	--	--
Registered Implants: 6,000	Malfunctions Only	100.0%	99.9%	99.9%	99.9%	99.7%	99.4%	99.3%	--	--	--
	Effective Sample Size	5916	5284	4698	4112	3294	1731	288	--	--	--

@ 83 months

*Devices subject to an advisory. Refer to the Advisories for more details. Devices may be part of more than one advisory.

VISIONIST/VALITUDE

Models: U125/U128/U225/U226/U228

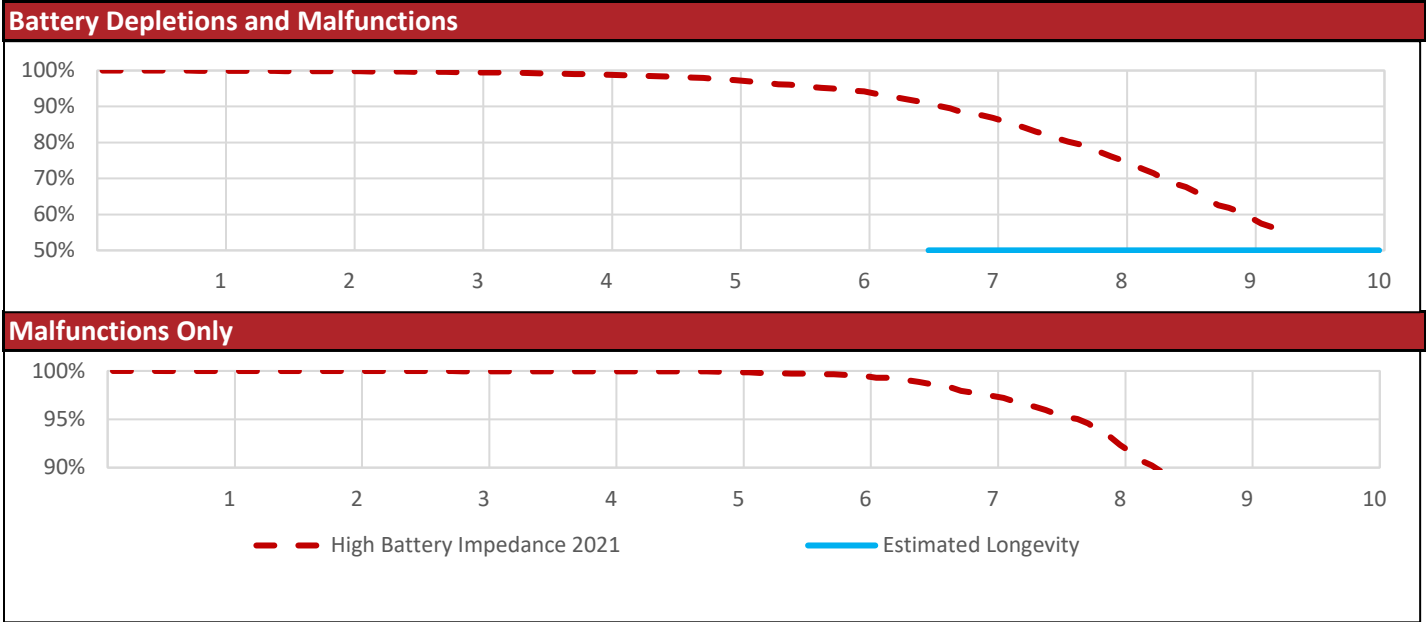
Worldwide Confirmed Malfunctions		81	
Worldwide Distribution		90,000	
	With Compromised Therapy	Without Compromised Therapy	Total
Electrical			
Low-voltage capacitors (47)	0	2	2
Integrated circuit (63)	1	8	9
Telemetry (68)	0	1	1
Hydrogen induced premature depletion - September 2018 (70)	0	17	17
Hydrogen induced premature depletion - June 2021 (83)	1	26	27
Software			
Memory errors (51)	0	11	11
Other			
Non-patterned, other	2	12	14
Grand Total	4	77	81

References cited in table above ([link](#))

INTUA/INVIVE/INLIVEN

Models: V272/V273/V282/V283/W272/W273/V172/V173/V182/V183/W172/W173/V274/V275/V284/V285/W275

US Summary			
US Registered Implants:	10,000	US Normal Battery Depletions:	889
US Approval Date:	May 2013	US Malfunctions:	300
US Estimated Active Implants:	4,000	Without Compromised Therapy:	296
		With Compromised Therapy:	4



US Survival Probability											
Year		1	2	3	4	5	6	7	8	9	10
High Battery Impedance 2021	Depletions and Malfunctions	99.9%	99.8%	99.5%	99.0%	97.5%	94.4%	87.5%	76.1%	60.7%	55.0%
Registered Implants:	Malfunctions Only	100.0%	100.0%	100.0%	100.0%	99.9%	99.5%	97.7%	93.2%	84.8%	82.9%
10,000	Effective Sample Size	8979	8005	7119	6309	5556	4697	3299	1621	446	227

@ 112 months

*Devices subject to an advisory. Refer to the Advisories for more details. Devices may be part of more than one advisory.

INTUA/INVIVE/INLIVEN

Models: V272/V273/V282/V283/W272/W273/V172/V173/V182/V183/W172/W173/V274/V275/V284/V285/W275

Worldwide Confirmed Malfunctions	431
Worldwide Distribution	24,000

	With Compromised Therapy	Without Compromised Therapy	Total
Electrical			
High battery impedance initiating safety mode 2021 (82)	2	379	381
Low-voltage capacitors (47)	1	0	1
Other			
Non-patterned, other	4	45	49
Grand Total	7	424	431

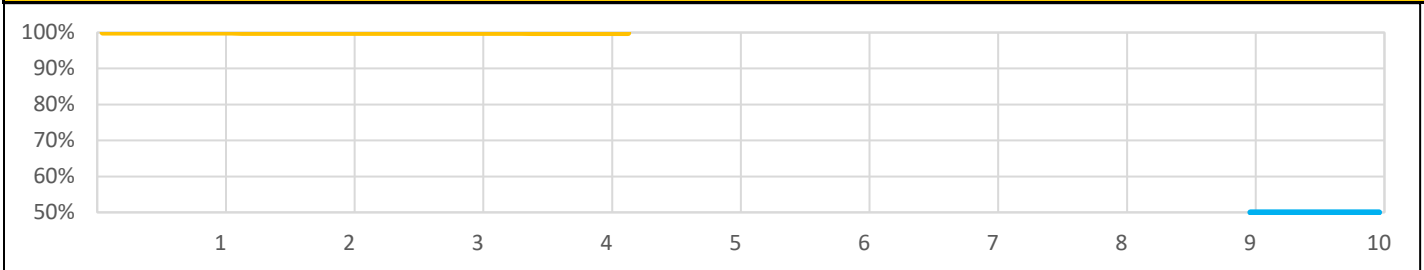
References cited in table above ([link](#))

RESONATE/MOMENTUM/CHARISMA/VIGILANT ICD DR

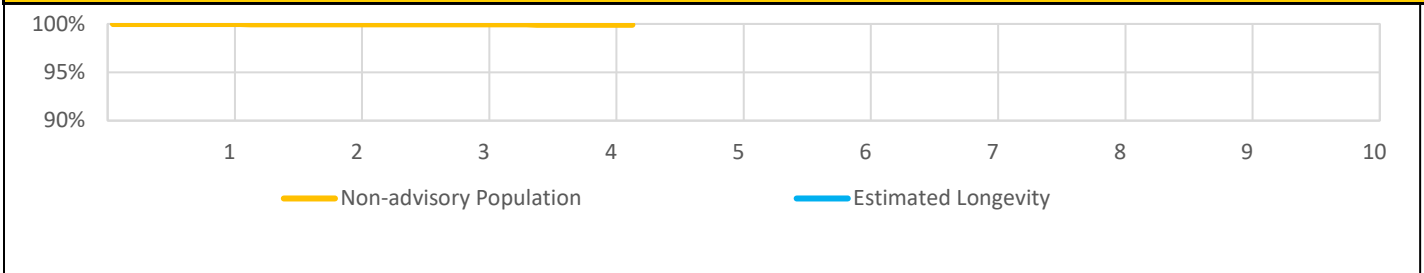
Models: D121/D221/D233/D321/D333/D421/D433/D521/D533

US Summary			
US Registered Implants:	33,000	US Normal Battery Depletions:	10
US Approval Date:	July 2017	US Malfunctions:	9
US Estimated Active Implants:	31,000	Without Compromised Therapy:	6
		With Compromised Therapy:	3

Battery Depletions and Malfunctions



Malfunctions Only



US Survival Probability												
		Year	1	2	3	4	5	6	7	8	9	10
Non-Advisory Population	Depletions and Malfunctions		100.0%	99.9%	99.9%	99.9%	99.9%	--	--	--	--	--
Registered Implants:	Malfunctions Only		100.0%	100.0%	100.0%	99.9%	99.9%	--	--	--	--	--
	Effective Sample Size	33,000	20006	10088	4010	686	249	--	--	--	--	--

@ 51 months

RESONATE/MOMENTUM/CHARISMA/VIGILANT ICD DR

Models: D121/D221/D233/D321/D333/D421/D433/D521/D533

Worldwide Confirmed Malfunctions	9		
Worldwide Distribution	60,000		
	With Compromised Therapy	Without Compromised Therapy	Total
Electrical			
High voltage capacitor (75)	1	0	1
Integrated circuit (63)	0	3	3
Other			
Non-patterned, other	3	2	5
Grand Total	4	5	9

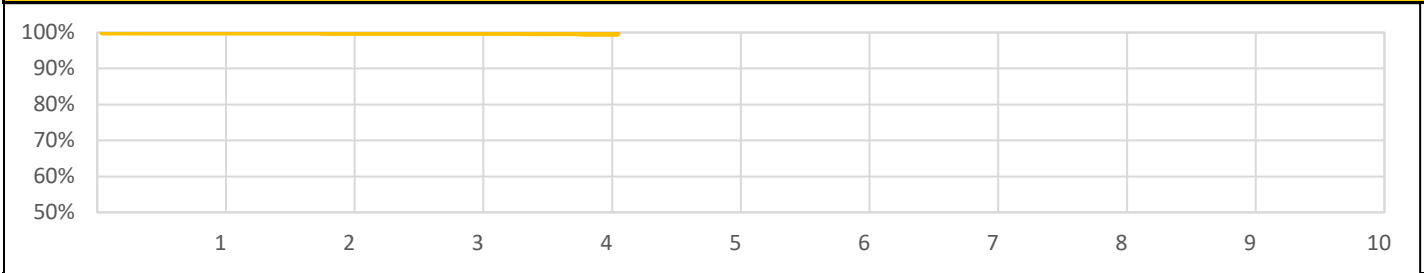
References cited in table above [\(link\)](#)

RESONATE/MOMENTUM/CHARISMA/VIGILANT ICD VR

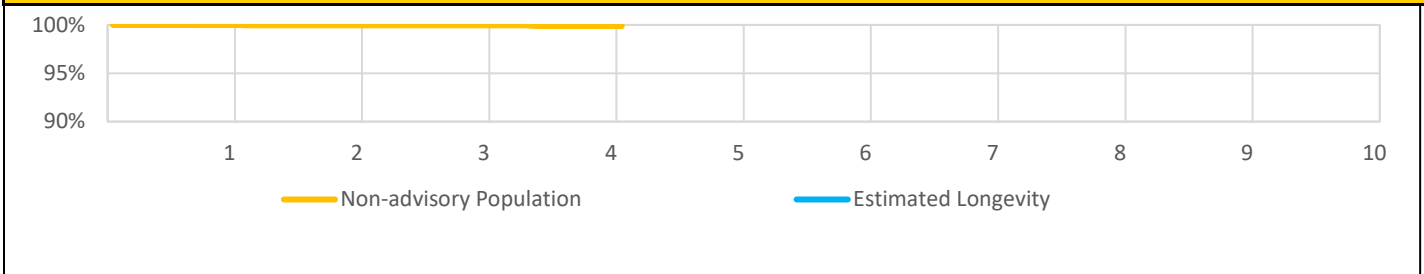
Models: D120/D220/D232/D320/D332/D420/D432/D520/D532

US Summary			
US Registered Implants:	19,000	US Normal Battery Depletions:	7
US Approval Date:	July 2017	US Malfunctions:	5
US Estimated Active Implants:	17,000	Without Compromised Therapy:	4
		With Compromised Therapy:	1

Battery Depletions and Malfunctions



Malfunctions Only



US Survival Probability

		Year	1	2	3	4	5	6	7	8	9	10
Non-Advisory Population	Depletions and Malfunctions		100.0%	99.9%	99.9%	99.7%	99.7%	--	--	--	--	--
Registered Implants:	Malfunctions Only		100.0%	100.0%	100.0%	99.9%	99.9%	--	--	--	--	--
19,000	Effective Sample Size		11841	6581	2879	498	283	--	--	--	--	--

@ 50 months

RESONATE/MOMENTUM/CHARISMA/VIGILANT ICD VR

Models: D120/D220/D232/D320/D332/D420/D432/D520/D532

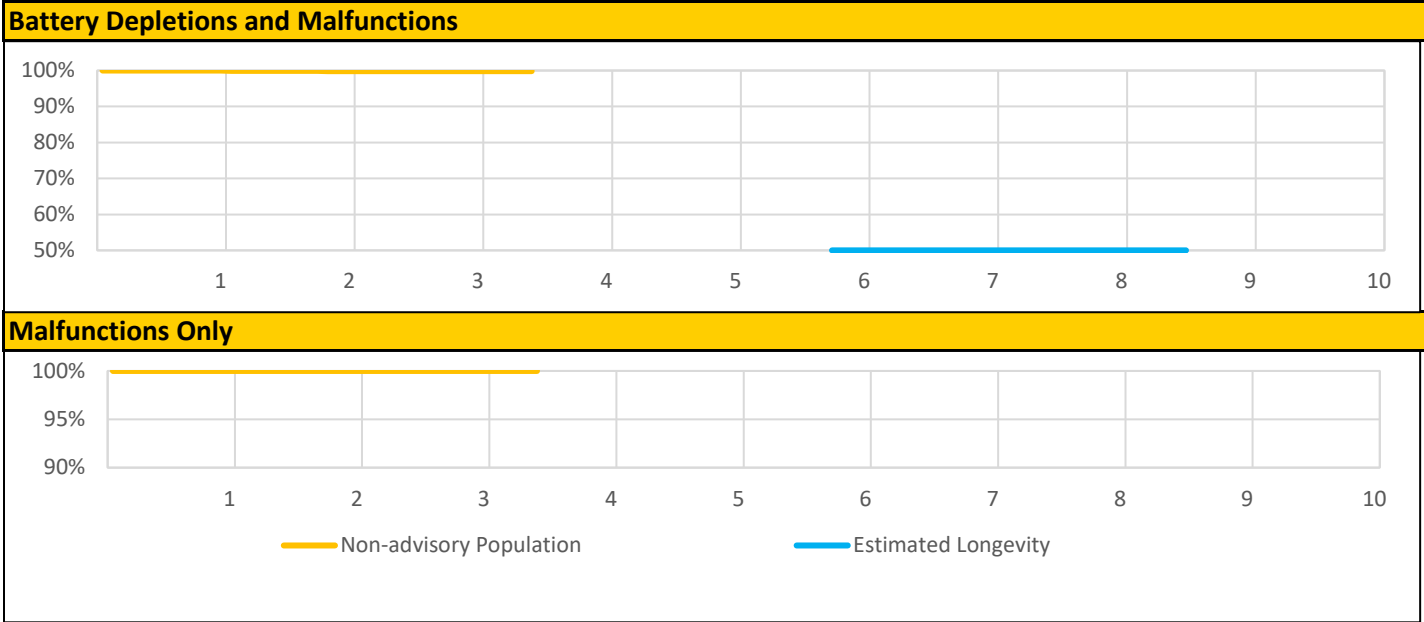
Worldwide Confirmed Malfunctions		11	
Worldwide Distribution		44,000	
	With Compromised Therapy	Without Compromised Therapy	Total
Electrical			
High voltage capacitor (75)	1	0	1
Integrated circuit (63)	1	0	1
Low-voltage capacitor (69)	0	1	1
Low-voltage capacitors (47)	0	1	1
Software			
Memory errors (51)	0	3	3
Other			
Non-patterned, other	0	4	4
Grand Total	2	9	11

References cited in table above [\(link\)](#)

PERCIVA DR

Models: D401/D413/D501/D513

US Summary			
US Registered Implants:	3,000	US Normal Battery Depletions:	3
US Approval Date:	July 2017	US Malfunctions:	-
US Estimated Active Implants:	3,000	Without Compromised Therapy:	-
		With Compromised Therapy:	-



US Survival Probability											
Year		1	2	3	4	5	6	7	8	9	10
Non-Advisory Population	Depletions and Malfunctions	100.0%	99.8%	99.8%	99.8%	--	--	--	--	--	--
Registered Implants:	Malfunctions Only	100.0%	100.0%	100.0%	100.0%	--	--	--	--	--	--
3,000	Effective Sample Size	2120	1087	429	204	--	--	--	--	--	--

@ 42 months

PERCIVA DR

Models: D401/D413/D501/D513

Worldwide Confirmed Malfunctions	0		
Worldwide Distribution	6,000		
	With Compromised Therapy	Without Compromised Therapy	Total
Other			
Non-patterned, other	0	0	0
Grand Total	0	0	0

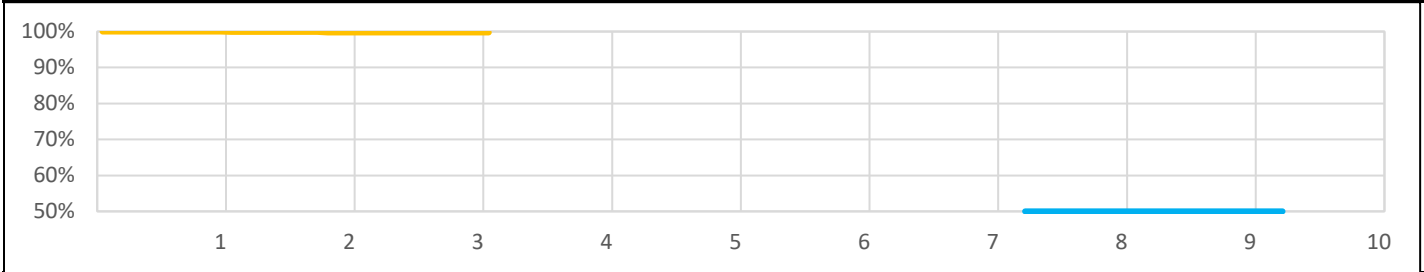
References cited in table above [\(link\)](#)

PERCIVA VR

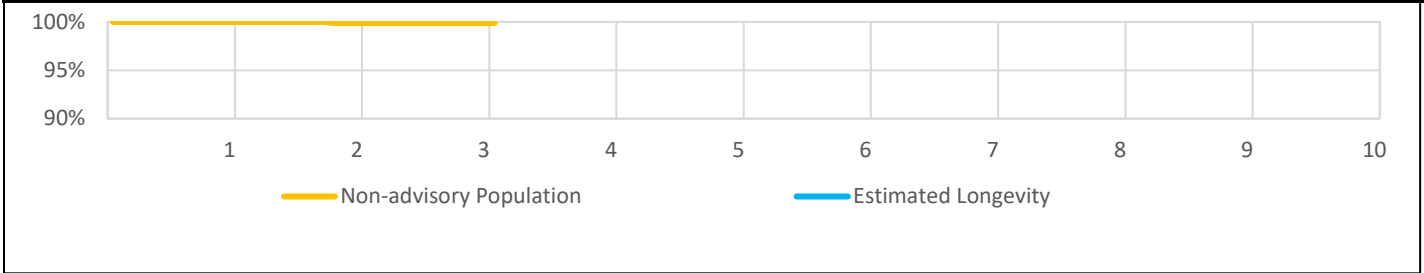
Models: D400/D412/D500/D512

US Summary			
US Registered Implants:	2,000	US Normal Battery Depletions:	2
US Approval Date:	July 2017	US Malfunctions:	1
US Estimated Active Implants:	2,000	Without Compromised Therapy:	1
		With Compromised Therapy:	-

Battery Depletions and Malfunctions



Malfunctions Only



US Survival Probability												
		Year	1	2	3	4	5	6	7	8	9	10
Non-Advisory Population	Depletions and Malfunctions		99.9%	99.7%	99.7%	99.7%	--	--	--	--	--	--
Registered Implants:	Malfunctions Only		100.0%	99.9%	99.9%	99.9%	--	--	--	--	--	--
	2,000 Effective Sample Size		1382	739	265	221	--	--	--	--	--	--

@ 38 months

PERCIVA VR

Models: D400/D412/D500/D512

Worldwide Confirmed Malfunctions	1
Worldwide Distribution	4,000

	With Compromised Therapy	Without Compromised Therapy	Total
Software			
Memory errors (51)	0	1	1
Grand Total	0	1	1

References cited in table above [\(link\)](#)

AUTOGEN ICD EL DR

Models: D162/D163/D176/D177

Worldwide Confirmed Malfunctions		24	
Worldwide Distribution		16,000	
	With Compromised Therapy	Without Compromised Therapy	Total
Electrical			
High voltage circuit component (62)	0	4	4
Integrated circuit (63)	2	0	2
Low-voltage capacitor (69)	0	4	4
Battery (53)	0	6	6
High voltage capacitor (75)	1	0	1
Software			
Memory errors (51)	0	3	3
Other			
Non-patterned, other	1	3	4
Grand Total	4	20	24

References cited in table above [\(link\)](#)

AUTOGEN ICD EL VR

Models: D160/D161/D174/D175

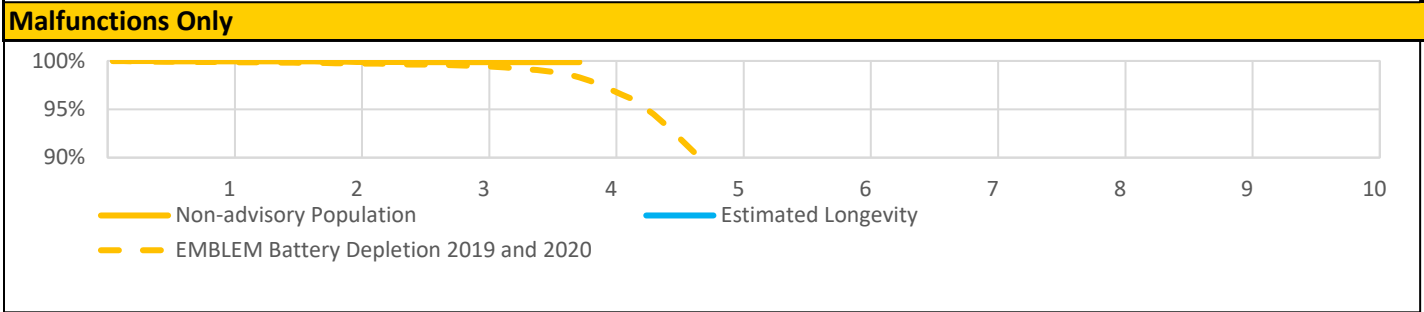
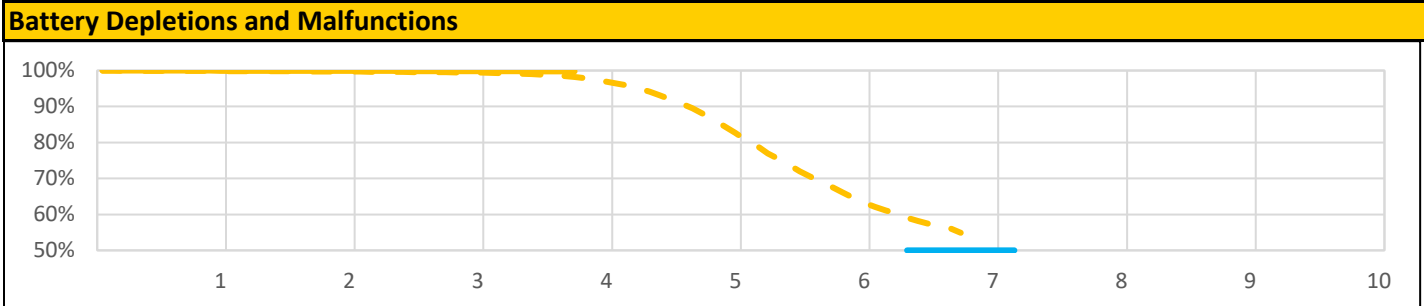
Worldwide Confirmed Malfunctions		19	
Worldwide Distribution		17,000	
	With Compromised Therapy	Without Compromised Therapy	Total
Electrical			
High voltage capacitor (75)	1	0	1
Low-voltage capacitor (69)	0	1	1
Battery (53)	2	10	12
Software			
Memory errors (51)	2	2	4
Other			
Non-patterned, other	0	1	1
Grand Total	5	14	19

References cited in table above [\(link\)](#)

EMBLEM S-ICD

Models: A209/A219

US Summary			
US Registered Implants:	48,000	US Normal Battery Depletions:	510
US Approval Date:	March 2015	US Malfunctions:	2,063
US Estimated Active Implants:	39,000	Without Compromised Therapy:	2,020
		With Compromised Therapy:	43



US Survival Probability											
	Year	1	2	3	4	5	6	7	8	9	10
Non-Advisory Population	Depletions and Malfunctions	100.0%	99.9%	99.8%	99.8%	--	--	--	--	--	--
Registered Implants:	Malfunctions Only	100.0%	99.9%	99.9%	99.9%	--	--	--	--	--	--
26,000	Effective Sample Size	16115	8764	3471	215	--	--	--	--	--	--

@ 46 months

*Devices subject to an advisory. Refer to the Advisories for more details. Devices may be part of more than one advisory.

EMBLEM S-ICD

Models: A209/A219

US Survival Probability (cont.)											
Year		1	2	3	4	5	6	7	8	9	10
Battery Depletion 2019 and 2020	Depletions and Malfunctions	99.9%	99.7%	99.4%	97.4%	84.5%	64.6%	54.9%	--	--	--
Registered Implants: 22,000	Malfunctions Only	99.9%	99.8%	99.5%	97.5%	86.1%	71.4%	66.1%	--	--	--
	Effective Sample Size	18536	16458	14484	11444	5629	2215	327	--	--	--

@ 82 months

*Devices subject to an advisory. Refer to the Advisories for more details. Devices may be part of more than one advisory.

EMBLEM S-ICD

Models: A209/A219

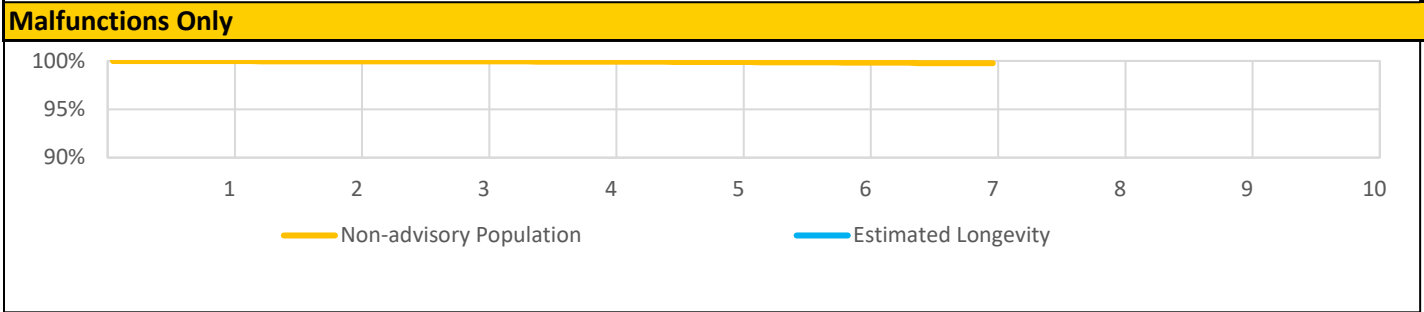
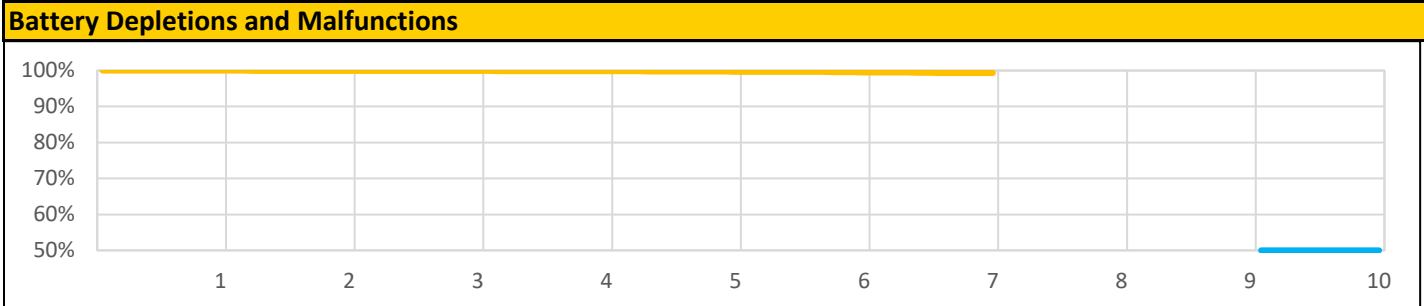
Worldwide Confirmed Malfunctions		4,496	
Worldwide Distribution		107,000	
	With Compromised Therapy	Without Compromised Therapy	Total
Electrical			
High-voltage capacitor (43)	1	0	1
S-ICD battery depletion 2019 and 2020 (77)	29	4303	4332
Battery depletion (84)	1	1	2
Software			
Memory corruption (65)	1	0	1
Misaligned markers (73)	1	3	4
Memory corruption (85)	4	8	12
Mechanical			
Solder joint (78)	10	1	11
EMBLEM S-ICD electrical overstress 2020 (80)	8	0	8
RF antenna (81)	1	0	1
Cracked case (86)	7	0	7
Header (87)	1	0	1
Other			
Non-patterned, other	24	51	75
Telemetry (56)	16	25	41
Grand Total	104	4392	4496

References cited in table above [\(link\)](#)

DYNAGEN/INOGEN/ORIGEN ICD EL DR

Models: D052/D053/D142/D143/D152/D153

US Summary			
US Registered Implants:	47,000	US Normal Battery Depletions:	57
US Approval Date:	April 2014	US Malfunctions:	33
US Estimated Active Implants:	39,000	Without Compromised Therapy:	24
		With Compromised Therapy:	9



US Survival Probability											
Year		1	2	3	4	5	6	7	8	9	10
Non-Advisory Population	Depletions and Malfunctions	100.0%	99.9%	99.9%	99.8%	99.7%	99.5%	99.3%	99.3%	--	--
Registered Implants:	Malfunctions Only	100.0%	100.0%	100.0%	99.9%	99.9%	99.8%	99.8%	99.8%	--	--
47,000	Effective Sample Size	39122	31755	25050	17701	10141	4276	560	306	--	--

@ 85 months

DYNAGEN/INOGEN/ORIGEN ICD EL DR

Models: D052/D053/D142/D143/D152/D153

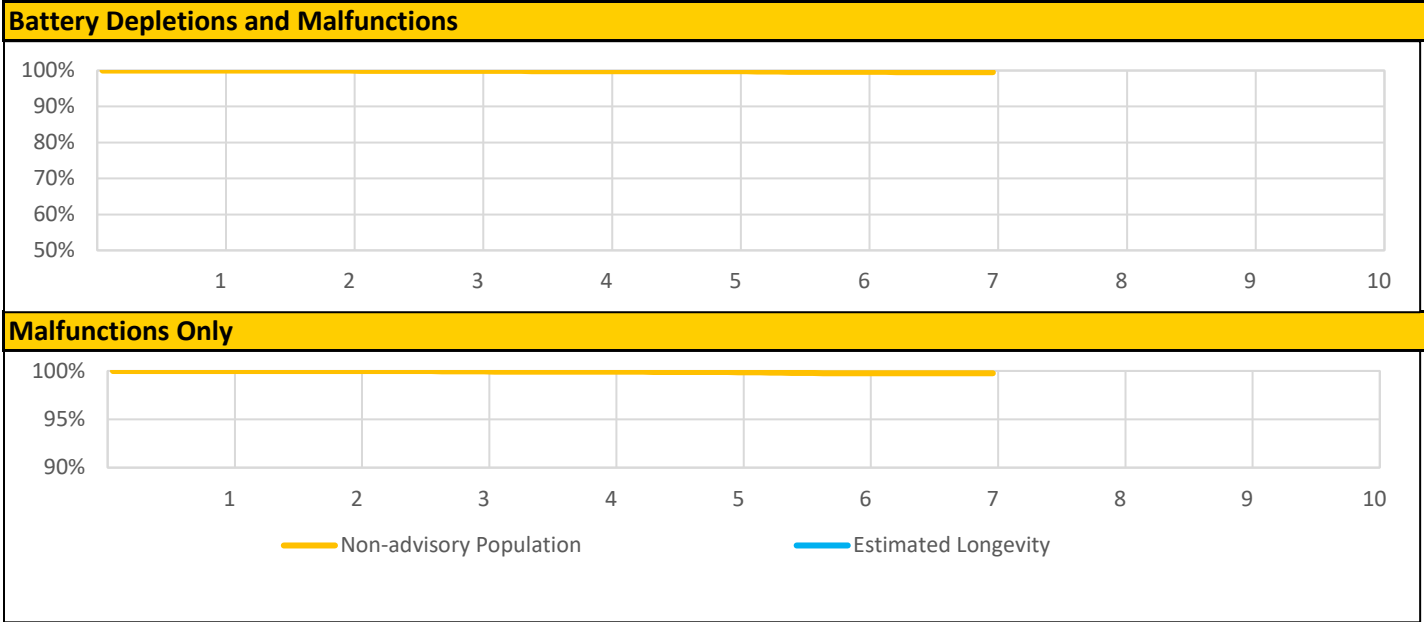
Worldwide Confirmed Malfunctions		43	
Worldwide Distribution		74,000	
	With Compromised Therapy	Without Compromised Therapy	Total
Electrical			
Low-voltage capacitors (47)	0	2	2
High voltage circuit component (62)	0	4	4
Integrated circuit (63)	2	1	3
Low-voltage capacitor (69)	0	8	8
High voltage capacitor (75)	6	0	6
Battery (53)	0	7	7
Software			
Memory errors (51)	0	2	2
Other			
Non-patterned, other	4	7	11
Grand Total	12	31	43

References cited in table above [\(link\)](#)

DYNAGEN/INOGEN/ORIGEN ICD EL VR

Models: D050/D051/D140/D141/D150/D151

US Summary			
US Registered Implants:	37,000	US Normal Battery Depletions:	29
US Approval Date:	April 2014	US Malfunctions:	31
US Estimated Active Implants:	31,000	Without Compromised Therapy:	29
		With Compromised Therapy:	2



US Survival Probability											
Year		1	2	3	4	5	6	7	8	9	10
Non-Advisory Population	Depletions and Malfunctions	100.0%	100.0%	99.9%	99.8%	99.8%	99.6%	99.5%	99.5%	--	--
Registered Implants:	Malfunctions Only	100.0%	100.0%	100.0%	99.9%	99.9%	99.8%	99.8%	99.8%	--	--
37,000	Effective Sample Size	31693	26483	21246	15438	9303	4295	535	293	--	--

@ 85 months

DYNAGEN/INOGEN/ORIGEN ICD EL VR

Models: D050/D051/D140/D141/D150/D151

Worldwide Confirmed Malfunctions		53	
Worldwide Distribution		67,000	
	With Compromised Therapy	Without Compromised Therapy	Total
Electrical			
Low-voltage capacitors (47)	0	1	1
High voltage circuit component (62)	0	2	2
Integrated circuit (63)	0	2	2
Low-voltage capacitor (69)	1	19	20
Battery (53)	2	9	11
Software			
Memory errors (51)	0	6	6
Other			
Non-patterned, other	4	7	11
Grand Total	7	46	53

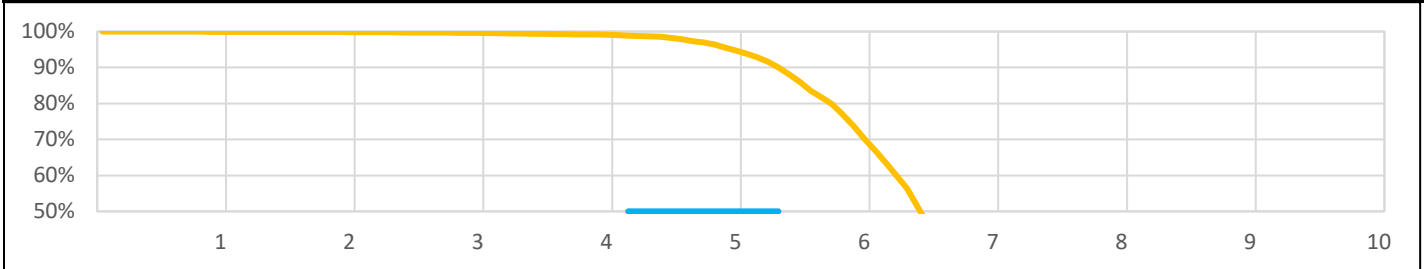
References cited in table above [\(link\)](#)

DYNAGEN/INOGEN/ORIGEN ICD MINI DR

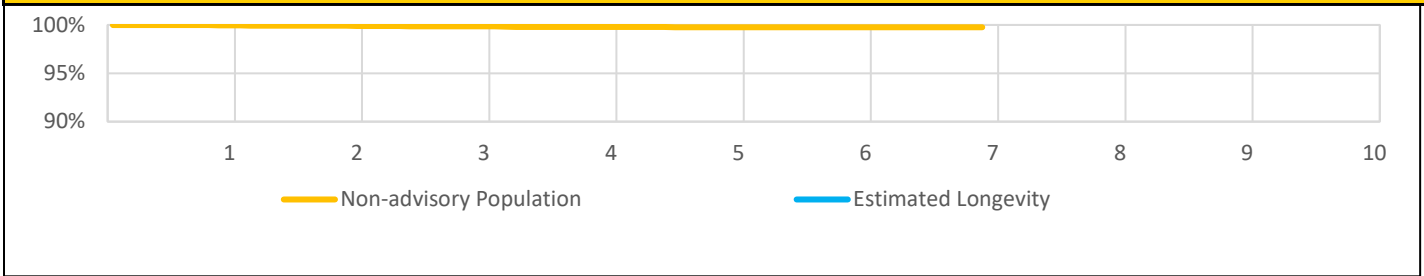
Models: D002/D003/D012/D013/D022/D023

US Summary			
US Registered Implants:	11,000	US Normal Battery Depletions:	1,437
US Approval Date:	April 2014	US Malfunctions:	16
US Estimated Active Implants:	7,000	Without Compromised Therapy:	13
		With Compromised Therapy:	3

Battery Depletions and Malfunctions



Malfunctions Only



US Survival Probability

		Year	1	2	3	4	5	6	7	8	9	10
Non-Advisory Population	Depletions and Malfunctions		99.9%	99.9%	99.6%	99.2%	95.6%	73.8%	23.9%	--	--	--
Registered Implants:	Malfunctions Only		100.0%	99.9%	99.8%	99.8%	99.8%	99.8%	99.8%	--	--	--
	11,000 Effective Sample Size		8803	7264	5821	4396	3003	1534	237	--	--	--

@ 84 months

DYNAGEN/INOGEN/ORIGEN ICD MINI DR

Models: D002/D003/D012/D013/D022/D023

Worldwide Confirmed Malfunctions	25		
Worldwide Distribution	30,000		
	With Compromised Therapy	Without Compromised Therapy	Total
Electrical			
High voltage circuit component (62)	0	12	12
High voltage capacitor (75)	3	0	3
Integrated circuit (63)	0	1	1
Low-voltage capacitors (47)	1	0	1
Other			
Non-patterned, other	3	5	8
Grand Total	7	18	25

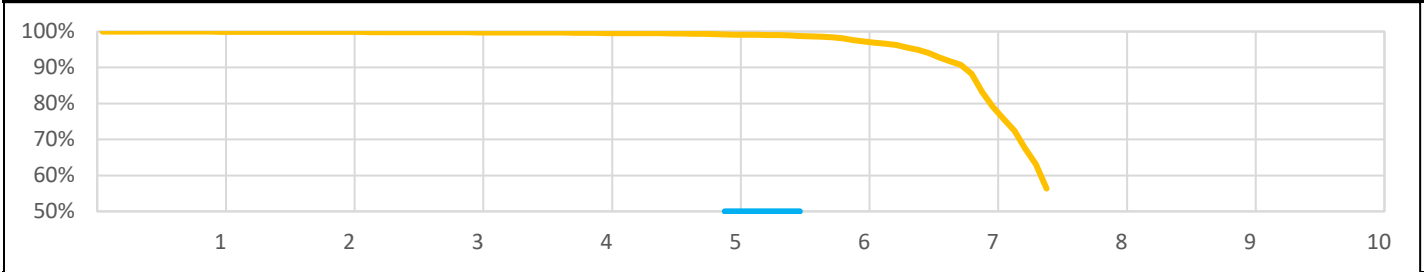
References cited in table above [\(link\)](#)

DYNAGEN/INOGEN/ORIGEN ICD MINI VR

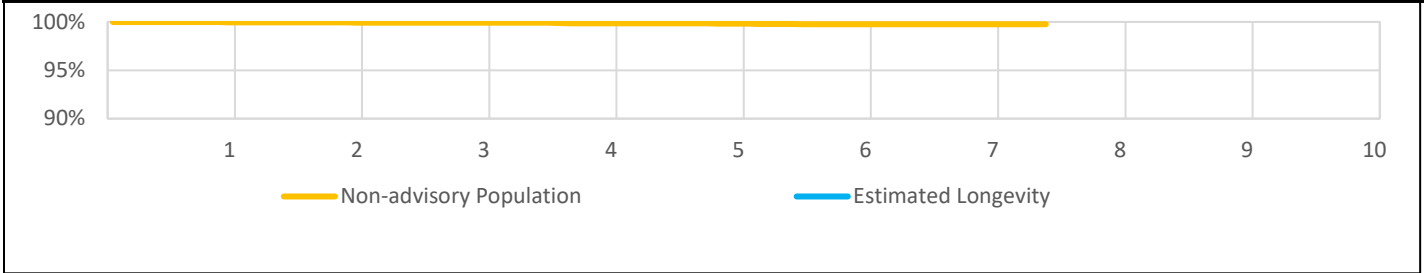
Models: D000/D001/D010/D011/D020/D021

US Summary			
US Registered Implants:	9,000	US Normal Battery Depletions:	421
US Approval Date:	April 2014	US Malfunctions:	11
US Estimated Active Implants:	7,000	Without Compromised Therapy:	10
		With Compromised Therapy:	1

Battery Depletions and Malfunctions



Malfunctions Only



US Survival Probability

		Year	1	2	3	4	5	6	7	8	9	10
Non-Advisory Population	Depletions and Malfunctions		100.0%	99.9%	99.8%	99.6%	99.2%	97.6%	83.1%	56.3%	--	--
Registered Implants:	Malfunctions Only		100.0%	99.9%	99.9%	99.9%	99.8%	99.8%	99.8%	99.8%	--	--
	9,000 Effective Sample Size		7853	6675	5477	4253	3046	2001	767	214	--	--

@ 90 months

DYNAGEN/INOGEN/ORIGEN ICD MINI VR

Models: D000/D001/D010/D011/D020/D021

Worldwide Confirmed Malfunctions		24	
Worldwide Distribution		31,000	
	With Compromised Therapy	Without Compromised Therapy	Total
Electrical			
Low-voltage capacitors (47)	0	2	2
High voltage circuit component (62)	0	7	7
High voltage capacitor (75)	6	0	6
Low-voltage capacitor (69)	0	2	2
Battery (53)	0	1	1
Software			
Memory errors (51)	1	2	3
Other			
Non-patterned, other	0	3	3
Grand Total	7	17	24

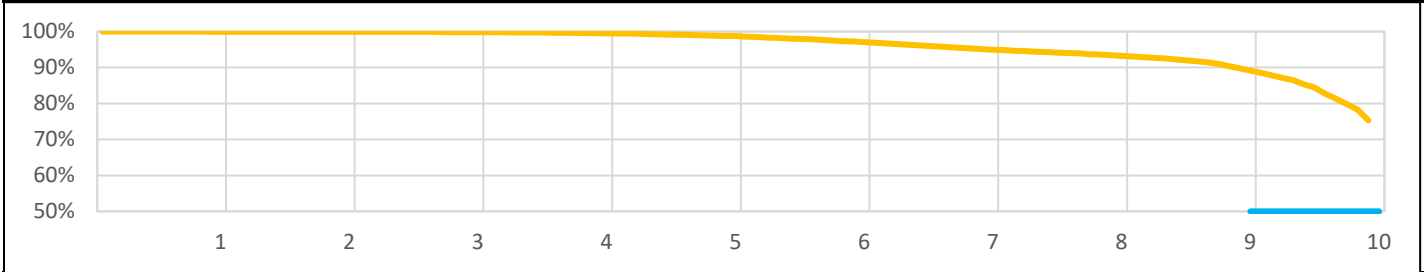
References cited in table above [\(link\)](#)

INCEPTA/ENERGEN/PUNCTUA ICD DR

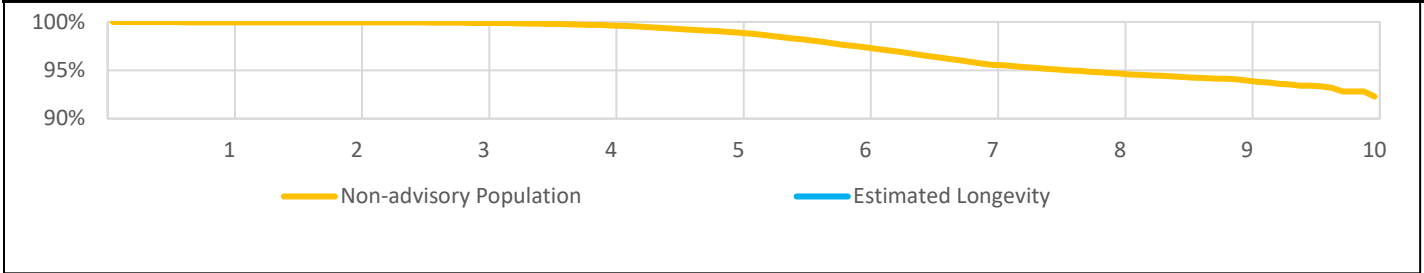
Models: E052/E053/E142/E143/E162/E163/F052/F053/F142/F143/F162/F163

US Summary			
US Registered Implants:	47,000	US Normal Battery Depletions:	743
US Approval Date:	November 2011	US Malfunctions:	1,227
US Estimated Active Implants:	28,000	Without Compromised Therapy:	1,198
		With Compromised Therapy:	29

Battery Depletions and Malfunctions



Malfunctions Only



US Survival Probability

		Year	1	2	3	4	5	6	7	8	9	10
Non-Advisory Population	Depletions and Malfunctions		99.9%	99.9%	99.8%	99.6%	98.8%	97.2%	95.1%	93.4%	89.8%	75.3%
Registered Implants:	Malfunctions Only		100.0%	100.0%	99.9%	99.7%	99.0%	97.5%	95.7%	94.7%	94.1%	92.8%
47,000	Effective Sample Size		41226	36538	32290	28414	24884	21360	17632	11005	4662	524

INCEPTA/ENERGEN/PUNCTUA ICD DR

Models: E052/E053/E142/E143/E162/E163/F052/F053/F142/F143/F162/F163

Worldwide Confirmed Malfunctions		1,923	
Worldwide Distribution		72,000	
	With Compromised Therapy	Without Compromised Therapy	Total
Mechanical			
Transformer (38)	2	0	2
Electrical			
High-voltage capacitor (43)	4	1	5
Low-voltage capacitors (47)	0	4	4
Integrated circuit (50)	5	7	12
Battery (53)	13	84	97
Low-voltage capacitor (54)	12	1733	1745
High voltage circuit (58)	0	1	1
Low-voltage capacitor (69)	0	25	25
Software			
Memory errors (51)	0	7	7
Other			
Non-patterned, other	8	17	25
Grand Total	44	1879	1923

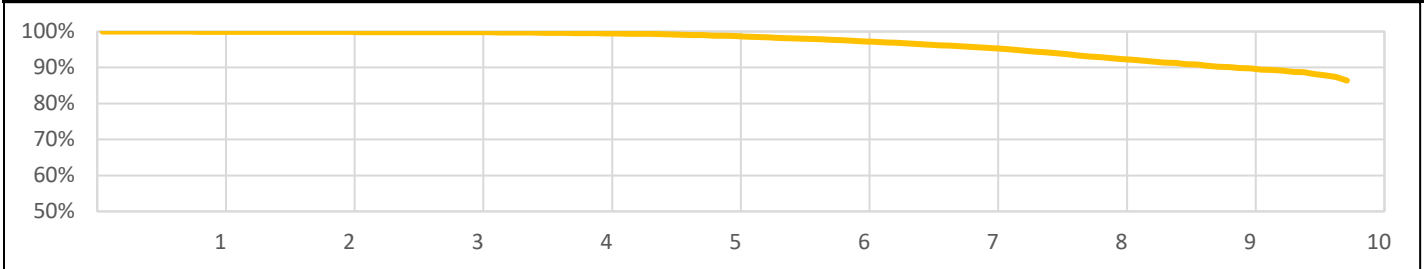
References cited in table above [\(link\)](#)

INCEPTA/ENERGEN/PUNCTUA ICD VR

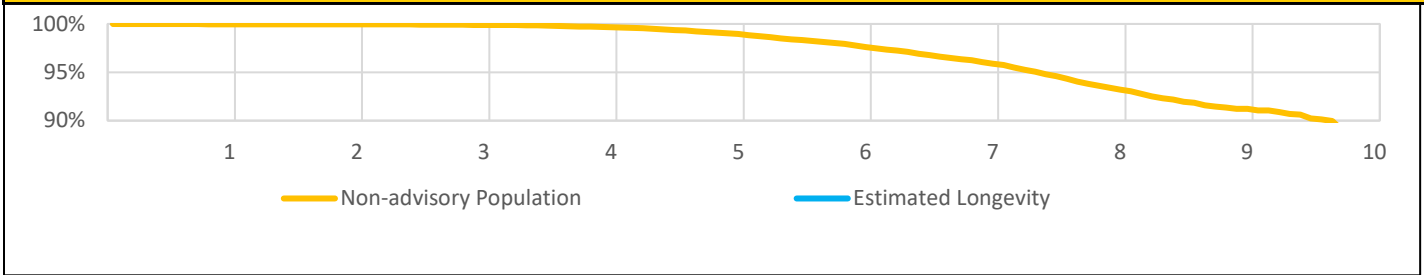
Models: E050/E051/E140/E141/E160/E161/F050/F051/F140/F141/F160/F161

US Summary			
US Registered Implants:	39,000	US Normal Battery Depletions:	195
US Approval Date:	November 2011	US Malfunctions:	1,200
US Estimated Active Implants:	25,000	Without Compromised Therapy:	1,164
		With Compromised Therapy:	36

Battery Depletions and Malfunctions



Malfunctions Only



US Survival Probability

		Year	1	2	3	4	5	6	7	8	9	10
Non-Advisory Population	Depletions and Malfunctions		99.9%	99.9%	99.8%	99.5%	98.8%	97.4%	95.6%	92.6%	89.8%	86.4%
Registered Implants:	Malfunctions Only		100.0%	100.0%	99.9%	99.7%	99.0%	97.8%	96.0%	93.4%	91.2%	89.0%
39,000	Effective Sample Size		34701	30726	27149	23905	20915	17967	14212	7846	2771	362

@ 118 months

INCEPTA/ENERGEN/PUNCTUA ICD VR

Models: E050/E051/E140/E141/E160/E161/F050/F051/F140/F141/F160/F161

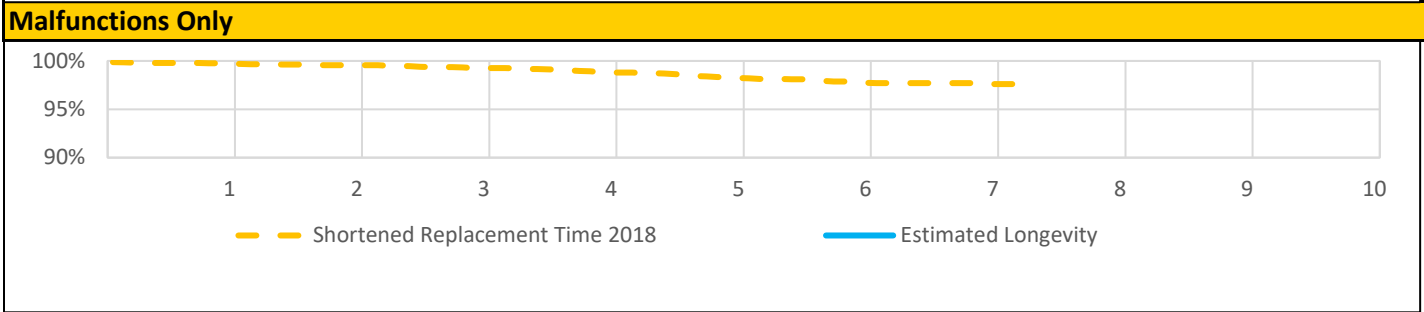
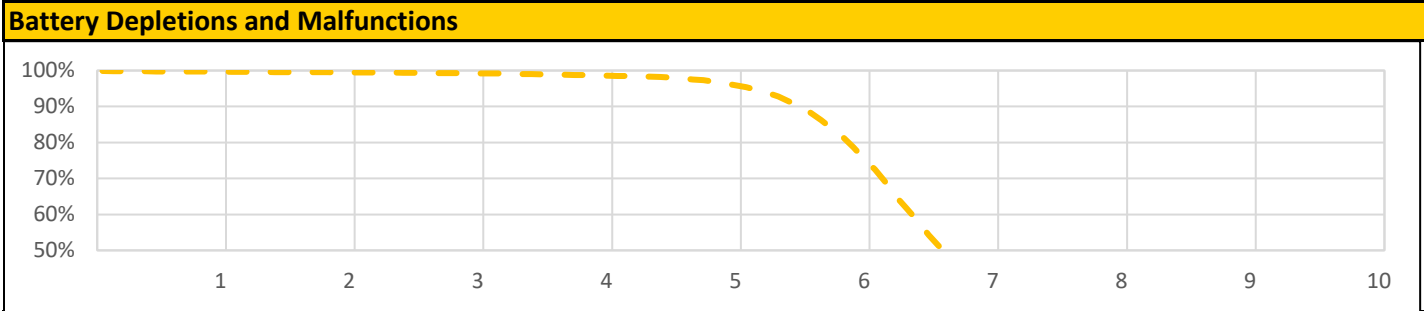
Worldwide Confirmed Malfunctions		2,059	
Worldwide Distribution		68,000	
	With Compromised Therapy	Without Compromised Therapy	Total
Electrical			
High-voltage capacitor (43)	4	1	5
Integrated circuit (50)	5	4	9
Battery (53)	19	126	145
Low-voltage capacitor (54)	15	1837	1852
High voltage circuit (58)	1	0	1
Low-voltage capacitor (69)	0	10	10
Mechanical			
Transformer (38)	6	0	6
Software			
Memory errors (51)	1	7	8
Other			
Non-patterned, other	10	13	23
Grand Total	61	1998	2059

References cited in table above [\(link\)](#)

SQ-RX S-ICD

Models: 1010

US Summary			
US Registered Implants:	8,000	US Normal Battery Depletions:	2,440
US Approval Date:	September 2012	US Malfunctions:	105
US Estimated Active Implants:	3,000	Without Compromised Therapy:	43
		With Compromised Therapy:	62



US Survival Probability											
Year		1	2	3	4	5	6	7	8	9	10
Shortened Replacement Time 2018	Depletions and Malfunctions	99.7%	99.5%	99.2%	98.6%	96.5%	78.6%	35.5%	16.0%	--	--
	Malfunctions Only	99.7%	99.5%	99.3%	98.8%	98.3%	97.9%	97.6%	97.6%	--	--
Registered Implants:	Effective Sample Size	6404	5642	4985	4376	3687	2670	1009	307	--	--

@ 89 months

*Devices subject to an advisory. Refer to the Advisories for more details. Devices may be part of more than one advisory.

SQ-RX S-ICD

Models: 1010

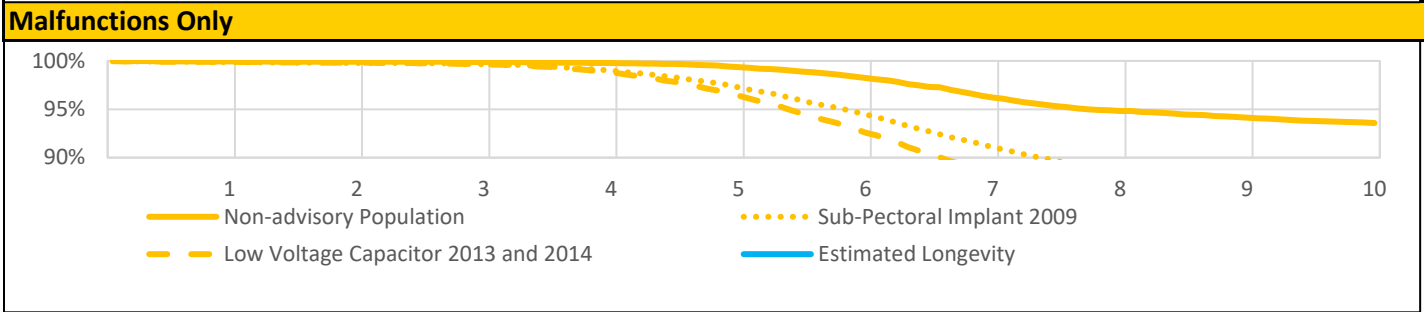
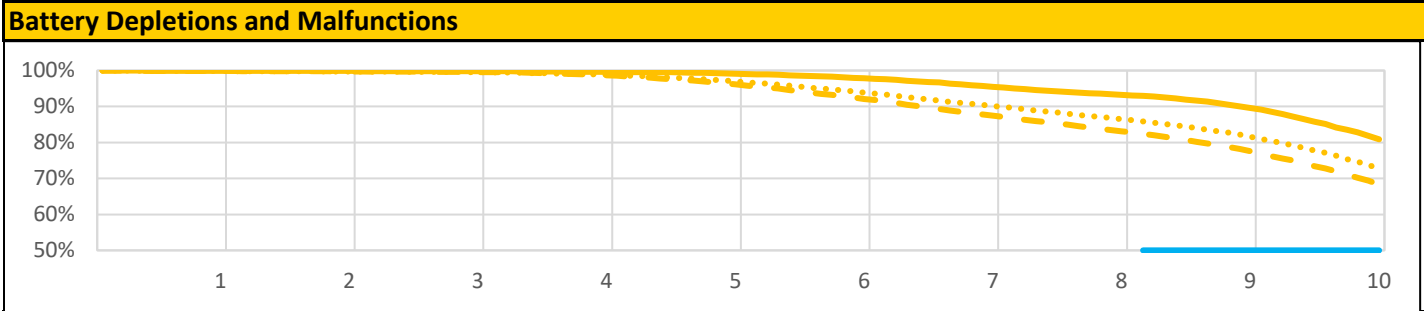
Worldwide Confirmed Malfunctions		215	
Worldwide Distribution		11,000	
	With Compromised Therapy	Without Compromised Therapy	Total
Electrical			
Unintended Fuse Activation 2013 (4)	3	0	3
Charge Timeout Alert (61)	0	11	11
Mechanical			
High cathode condition (5)	1	1	2
Shortened replacement time 2018 (55)	65	43	108
Software			
Unintended Battery Depletion Alert (57)	0	10	10
Other			
Telemetry (56)	10	4	14
Non-patterned, other	39	28	67
Grand Total	118	97	215

References cited in table above [\(link\)](#)

TELIGEN DR

Models: E110/E111/F110/F111

US Summary			
US Registered Implants:	66,000	US Normal Battery Depletions:	9,022
US Approval Date:	March 2008	US Malfunctions:	3,028
US Estimated Active Implants:	19,000	Without Compromised Therapy:	2,867
		With Compromised Therapy:	161



US Survival Probability

	Year	1	2	3	4	5	6	7	8	9	10
Non-Advisory Population	Depletions and Malfunctions	99.9%	99.9%	99.8%	99.6%	99.2%	98.0%	95.7%	93.4%	90.0%	81.8%
Registered Implants:	Malfunctions Only	99.9%	99.9%	99.9%	99.8%	99.4%	98.4%	96.4%	94.9%	94.2%	93.6%
30000	Effective Sample Size	26328	23353	20707	18286	16082	13986	11979	10220	8621	6791

TELIGEN DR

Models: E110/E111/F110/F111

US Survival Probability (cont.)											
	Year	1	2	3	4	5	6	7	8	9	10
Subpectoral Implant 2009	Depletions and Malfunctions	99.9%	99.8%	99.6%	98.9%	97.2%	94.2%	90.4%	86.8%	82.2%	73.7%
Registered Implants:	Malfunctions Only	99.9%	99.8%	99.7%	99.1%	97.5%	94.7%	91.3%	88.6%	86.6%	85.3%
30000	Effective Sample Size	26629	23511	20786	18251	15858	13509	11366	9505	7807	6052
Low Voltage Capacitor 2013 and 2014	Depletions and Malfunctions	99.9%	99.8%	99.6%	98.8%	96.5%	92.5%	87.8%	83.4%	78.2%	69.3%
Registered Implants:	Malfunctions Only	99.9%	99.8%	99.7%	98.9%	96.7%	93.0%	88.7%	85.3%	82.9%	81.3%
23000	Effective Sample Size	20615	18222	16099	14124	12169	10248	8517	7040	5714	4368

*Devices subject to an advisory. Refer to the Advisories for more details. Devices may be part of more than one advisory.

TELIGEN DR

Models: E110/E111/F110/F111

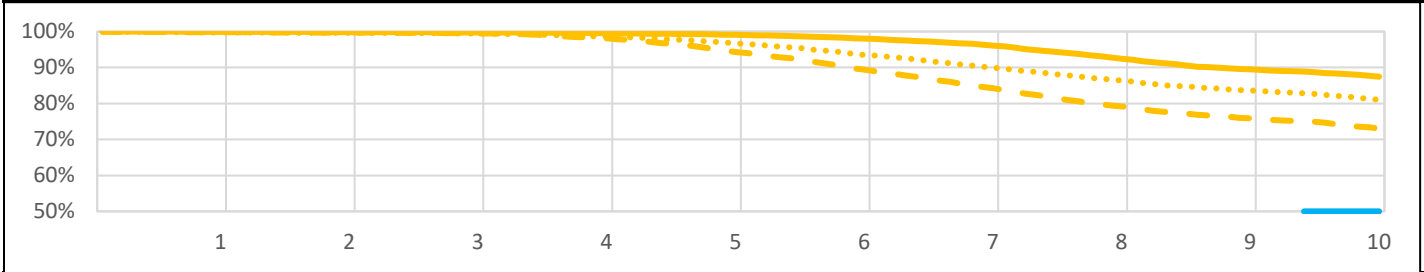
Worldwide Confirmed Malfunctions		4,168	
Worldwide Distribution		91,000	
	With Compromised Therapy	Without Compromised Therapy	Total
Electrical			
Low Voltage Capacitor 2014 - August 29, 2013 and September 17, 2014 Voluntary Physician Advisory (3)	53	2297	2350
Safety Core-electrocautery (42)	1	4	5
High-voltage capacitor (43)	8	1	9
Low-voltage capacitors (47)	0	8	8
Integrated circuit (50)	22	22	44
Battery (53)	43	256	299
Low-voltage capacitor (54)	10	1289	1299
Low-voltage capacitor (69)	0	7	7
Mechanical			
Transformer (38)	20	0	20
Seal plug (40)	0	3	3
Difficulty securing lead (41)	7	7	14
Header contacts (45)	13	3	16
Subpectoral implant 2009 - December 01, 2009 Voluntary Physician Advisory (6)	12	9	21
Header (74)	9	3	12
Software			
Alert messages not displayed post-EOL (48)	0	3	3
Memory errors (51)	0	19	19
Other			
Non-patterned, other	11	28	39
Grand Total	209	3959	4168

TELIGEN VR

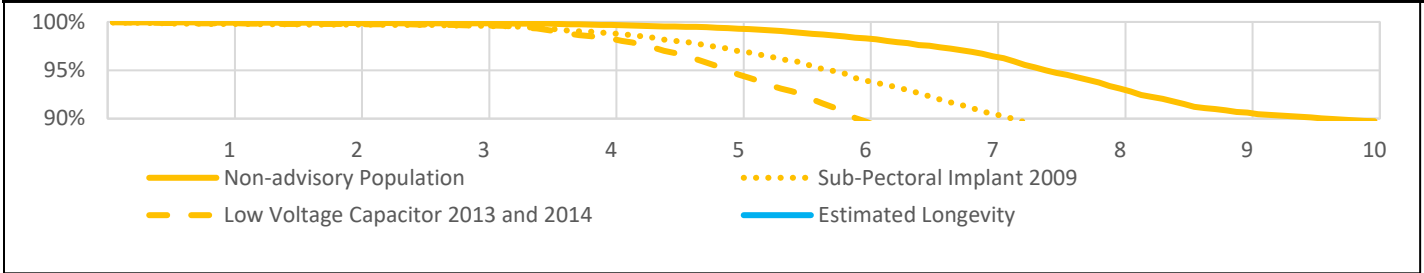
Models: E102/E103/F102/F103

US Summary			
US Registered Implants:	38,000	US Normal Battery Depletions:	1,341
US Approval Date:	March 2008	US Malfunctions:	2,366
US Estimated Active Implants:	15,000	Without Compromised Therapy:	2,234
		With Compromised Therapy:	132

Battery Depletions and Malfunctions



Malfunctions Only



US Survival Probability

		Year	1	2	3	4	5	6	7	8	9	10
Non-Advisory Population	Depletions and Malfunctions		99.9%	99.8%	99.7%	99.6%	99.1%	98.1%	96.3%	92.8%	89.6%	87.7%
Registered Implants:	Malfunctions Only		99.9%	99.9%	99.9%	99.7%	99.3%	98.4%	96.7%	93.4%	90.7%	89.8%
18000	Effective Sample Size		16199	14330	12650	11154	9790	8516	7304	6106	5121	4365

TELIGEN VR

Models: E102/E103/F102/F103

US Survival Probability (cont.)											
	Year	1	2	3	4	5	6	7	8	9	10
Subpectoral Implant 2009	Depletions and Malfunctions	99.8%	99.6%	99.5%	98.7%	96.9%	93.8%	90.2%	86.6%	83.7%	81.3%
Registered Implants:	Malfunctions Only	99.8%	99.7%	99.6%	98.9%	97.2%	94.2%	90.7%	87.4%	84.8%	83.4%
16000	Effective Sample Size	13609	11993	10569	9241	7985	6796	5704	4752	3990	3355
Low Voltage Capacitor 2013 and 2014	Depletions and Malfunctions	99.8%	99.7%	99.5%	98.2%	94.8%	89.7%	84.6%	79.5%	76.0%	73.4%
Registered Implants:	Malfunctions Only	99.8%	99.8%	99.6%	98.4%	95.0%	90.1%	85.1%	80.2%	77.1%	75.5%
12000	Effective Sample Size	10848	9578	8444	7363	6262	5194	4245	3442	2854	2383

*Devices subject to an advisory. Refer to the Advisories for more details. Devices may be part of more than one advisory.

TELIGEN VR

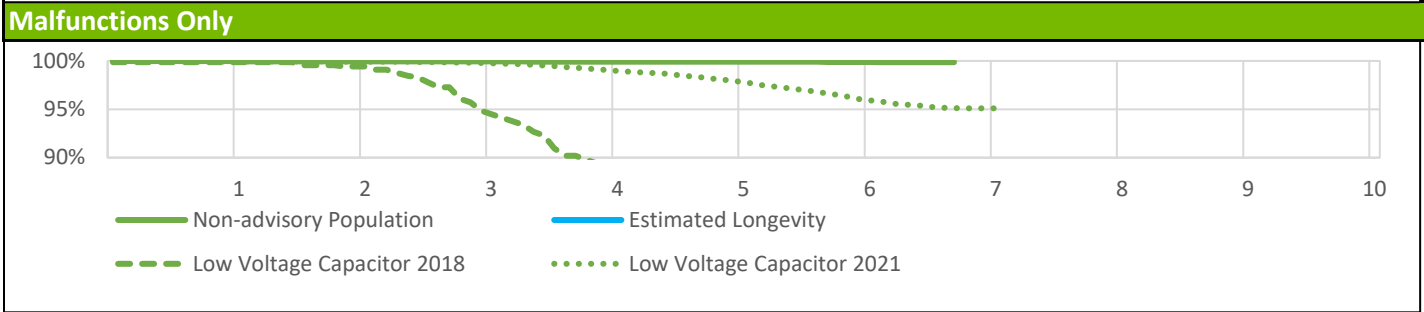
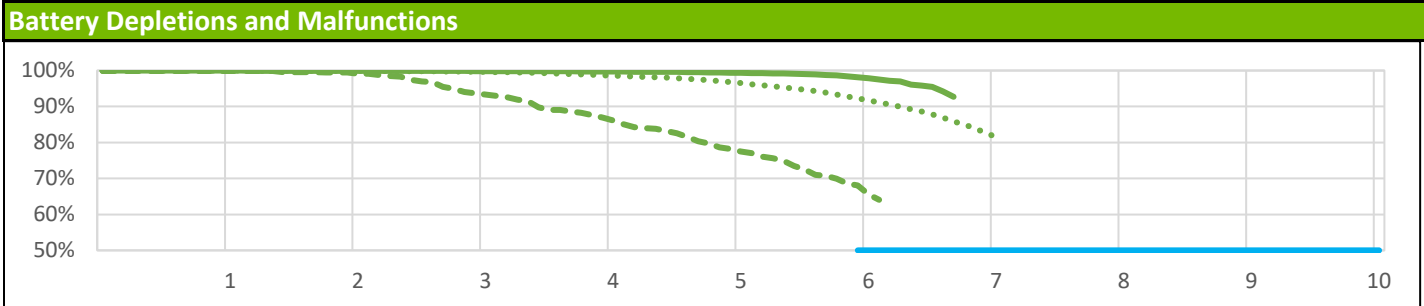
Models: E102/E103/F102/F103

Worldwide Confirmed Malfunctions		4,016	
Worldwide Distribution		66,000	
	With Compromised Therapy	Without Compromised Therapy	Total
Electrical			
Low Voltage Capacitor 2014 - August 29, 2013 and September 17, 2014 Voluntary Physician Advisory (3)	47	1918	1965
Safety Core-electrocautery (42)	1	1	2
High-voltage capacitor (43)	3	0	3
Low-voltage capacitors (47)	0	5	5
Integrated circuit (50)	17	11	28
Battery (53)	52	418	470
Low-voltage capacitor (54)	10	1382	1392
Low-voltage capacitor (69)	0	5	5
Mechanical			
Transformer (24)	1	0	1
Transformer (38)	14	0	14
Seal plug (40)	0	1	1
Difficulty securing lead (41)	9	0	9
Header contacts (45)	22	16	38
Subpectoral implant 2009 - December 01, 2009 Voluntary Physician Advisory (6)	17	9	26
Header (74)	13	4	17
Software			
Alert messages not displayed post-EOL (48)	0	4	4
Memory errors (51)	0	11	11
Respiratory Sensor Oversensing - March 23, 2009 Voluntary Physician Advisory (7)	0	2	2
Other			
Non-patterned, other	12	11	23
Grand Total	218	3798	4016

ACCOLADE/PROPONENT/ESSENTIO DR

Models: L101/L111/L201/L211/L301/L311

US Summary			
US Registered Implants:	239,000	US Normal Battery Depletions:	1,738
US Approval Date:	October 2014	US Malfunctions:	1,131
US Estimated Active Implants:	199,000	Without Compromised Therapy:	1,096
		With Compromised Therapy:	35



US Survival Probability												
		Year	1	2	3	4	5	6	7	8	9	10
Non-Advisory Population	Depletions and Malfunctions		100.0%	99.9%	99.9%	99.7%	99.4%	98.1%	92.7%	--	--	--
Registered Implants:	Malfunctions Only		100.0%	100.0%	99.9%	99.9%	99.9%	99.9%	99.9%	--	--	--
196000	Effective Sample Size		147626	107552	75052	45539	21381	5196	363	--	--	--

@ 81 months

*Devices subject to an advisory. Refer to the Advisories for more details. Devices may be part of more than one advisory.

ACCOLADE/PROPONENT/ESSENTIO DR

Models: L101/L111/L201/L211/L301/L311

US Survival Probability (cont.)											
Year		1	2	3	4	5	6	7	8	9	10
Low Voltage Capacitor 2018	Depletions and Malfunctions	99.9%	99.4%	94.0%	87.7%	78.6%	68.6%	64.1%	--	--	--
Registered Implants: 800	Malfunctions Only	99.9%	99.4%	94.8%	88.8%	83.5%	77.7%	75.7%	--	--	--
	Effective Sample Size	713	640	543	449	359	264	222	--	--	--
@ 75 months											
Low Voltage Capacitor 2021	Depletions and Malfunctions	100.0%	99.9%	99.7%	98.7%	96.8%	92.3%	82.6%	81.5%	--	--
Registered Implants: 42000	Malfunctions Only	100.0%	99.9%	99.8%	99.1%	97.9%	96.1%	95.1%	95.1%	--	--
	Effective Sample Size	37245	33200	29483	25920	20903	11148	1282	601	--	--
@ 85 months											

*Devices subject to an advisory. Refer to the Advisories for more details. Devices may be part of more than one advisory.

ACCOLADE/PROPONENT/ESSENTIO DR

Models: L101/L111/L201/L211/L301/L311

Worldwide Confirmed Malfunctions	1,907
Worldwide Distribution	513,000

	With Compromised Therapy	Without Compromised Therapy	Total
Electrical			
Low-voltage capacitors (47)	2	4	6
Integrated circuit (63)	15	30	45
Capacitor (67)	0	1	1
Telemetry (68)	2	12	14
Hydrogen induced premature depletion - September 2018 (70)	4	204	208
Hydrogen induced premature depletion - June 2021 (83)	24	1467	1491
Software			
Memory errors (51)	0	45	45
Mechanical			
Battery cathode (79)	1	0	1
Other			
Non-patterned, other	29	67	96
Grand Total	77	1830	1907

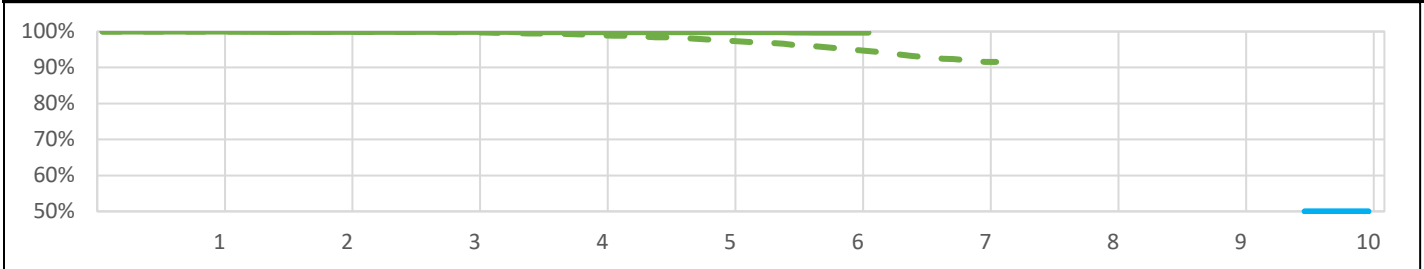
References cited in table above ([link](#))

ACCOLADE/PROPONENT/ESSENTIO EL DR

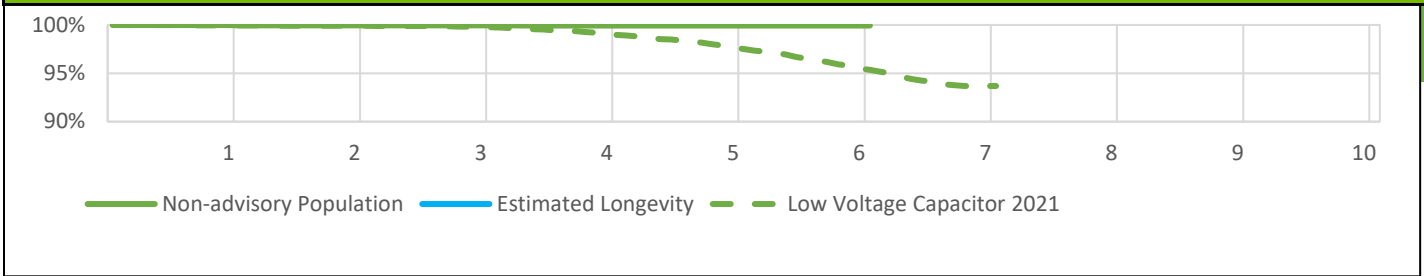
Models: L121/L131/L221/L231/L321/L331

US Summary			
US Registered Implants:	134,000	US Normal Battery Depletions:	148
US Approval Date:	October 2014	US Malfunctions:	509
US Estimated Active Implants:	119,000	Without Compromised Therapy:	501
		With Compromised Therapy:	8

Battery Depletions and Malfunctions



Malfunctions Only



US Survival Probability											
Year		1	2	3	4	5	6	7	8	9	10
Non-Advisory Population	Depletions and Malfunctions	100.0%	99.9%	99.9%	99.8%	99.8%	99.7%	99.7%	--	--	--
Registered Implants:	Malfunctions Only	100.0%	100.0%	100.0%	99.9%	99.9%	99.9%	99.9%	--	--	--
117,000	Effective Sample Size	81322	54336	34535	18950	7249	881	430	--	--	--

@ 74 months

*Devices subject to an advisory. Refer to the Advisories for more details. Devices may be part of more than one advisory.

ACCOLADE/PROPONENT/ESSENTIO EL DR

Models: L121/L131/L221/L231/L321/L331

US Survival Probability											
Year	1	2	3	4	5	6	7	8	9	10	
Low Voltage Capacitor 2021	Depletions and Malfunctions	100.0%	99.9%	99.8%	99.0%	97.4%	94.8%	91.6%	91.6%	--	--
Registered Implants:	Malfunctions Only	100.0%	99.9%	99.8%	99.0%	97.7%	95.5%	93.7%	93.7%	--	--
17,000	Effective Sample Size	14979	13323	11830	10382	8192	4183	418	216	--	--

@ 85 months

*Devices subject to an advisory. Refer to the Advisories for more details. Devices may be part of more than one advisory.

ACCOLADE/PROPONENT/ESSENTIO EL DR

Models: L121/L131/L221/L231/L321/L331

Worldwide Confirmed Malfunctions 1,163
Worldwide Distribution 320,000

	With Compromised Therapy	Without Compromised Therapy	Total
Electrical			
Low-voltage capacitors (47)	0	10	10
Integrated circuit (63)	1	18	19
Telemetry (68)	1	12	13
Hydrogen induced premature depletion September 2018 (70)	4	102	106
Hydrogen induced premature depletion June 2021 (83)	7	941	948
Software			
Memory errors (51)	0	36	36
Mechanical			
Battery cathode (79)	2	0	2
Other			
Non-patterned, other	4	25	29
Grand Total	19	1144	1163

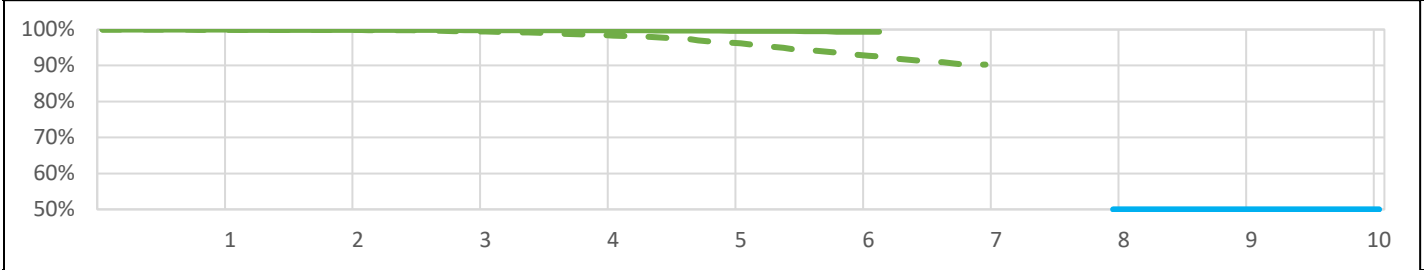
References cited in table above ([link](#))

ACCOLADE/PROPONENT/ESSENTIO SR

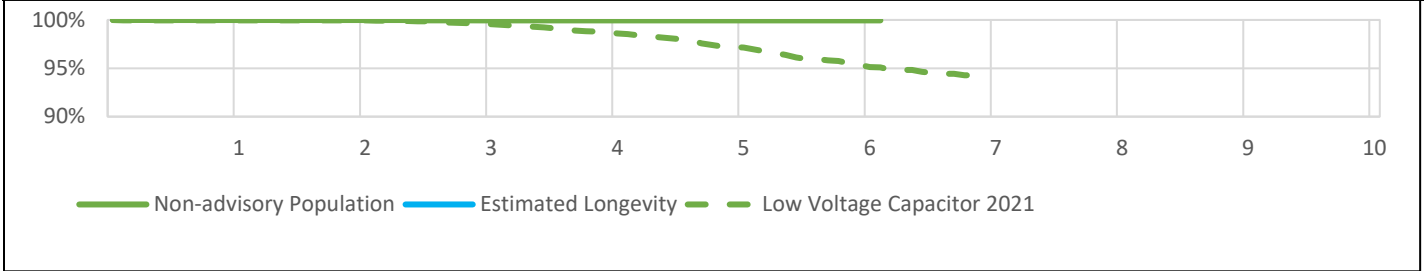
Models: L100/L110/L200/L210/L300/L310

US Summary			
US Registered Implants:	45,000	US Normal Battery Depletions:	195
US Approval Date:	October 2014	US Malfunctions:	334
US Estimated Active Implants:	33,000	Without Compromised Therapy:	327
		With Compromised Therapy:	7

Battery Depletions and Malfunctions



Malfunctions Only



US Survival Probability

		Year	1	2	3	4	5	6	7	8	9	10
Non-Advisory Population	Depletions and Malfunctions		99.9%	99.9%	99.8%	99.8%	99.7%	99.4%	99.4%	--	--	--
Registered Implants:	Malfunctions Only		100.0%	100.0%	100.0%	100.0%	100.0%	100.0%	100.0%	--	--	--
	33,000 Effective Sample Size		24144	17474	11889	6720	2587	464	248	--	--	--

@ 74 months

*Devices subject to an advisory. Refer to the Advisories for more details. Devices may be part of more than one advisory.

ACCOLADE/PROPONENT/ESSENTIO SR

Models: L100/L110/L200/L210/L300/L310

US Survival Probability											
Year		1	2	3	4	5	6	7	8	9	10
Low Voltage Capacitor 2021	Depletions and Malfunctions	99.9%	99.9%	99.5%	98.5%	96.4%	93.0%	90.2%	--	--	--
Registered Implants:	Malfunctions Only	100.0%	99.9%	99.6%	98.7%	97.2%	95.4%	94.3%	--	--	--
12,000	Effective Sample Size	10315	9157	8103	7081	5552	2594	273	--	--	--

@ 84 months

*Devices subject to an advisory. Refer to the Advisories for more details. Devices may be part of more than one advisory.

ACCOLADE/PROPONENT/ESSENTIO SR

Models: L100/L110/L200/L210/L300/L310

Worldwide Confirmed Malfunctions	817
Worldwide Distribution	186,000

	With Compromised Therapy	Without Compromised Therapy	Total
Electrical			
Low-voltage capacitors (47)	1	3	4
Integrated circuit (63)	5	5	10
Capacitor (67)	0	1	1
Telemetry (68)	0	4	4
Hydrogen induced premature depletion - September 2018 (70)	3	61	64
Hydrogen induced premature depletion - June 2021 (83)	18	691	709
Software			
Memory errors (51)	0	11	11
Other			
Non-patterned, other	2	12	14
Grand Total	29	788	817

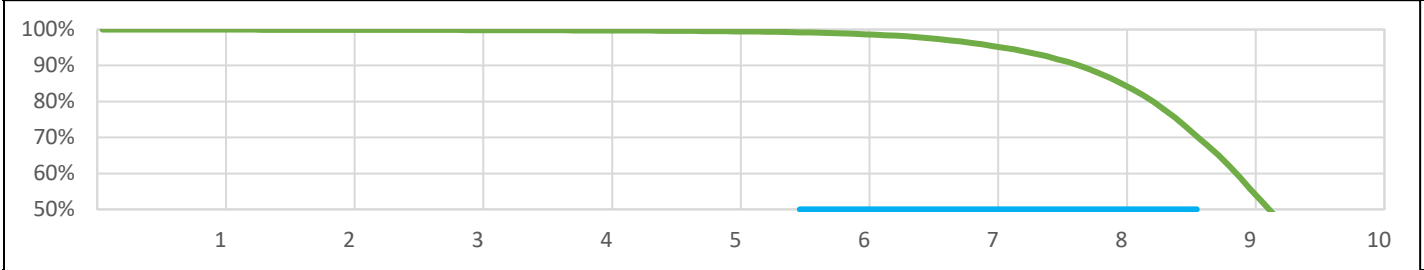
References cited in table above ([link](#))

ADVANTIO/INGENIO/VITALIO/FORMIO DR

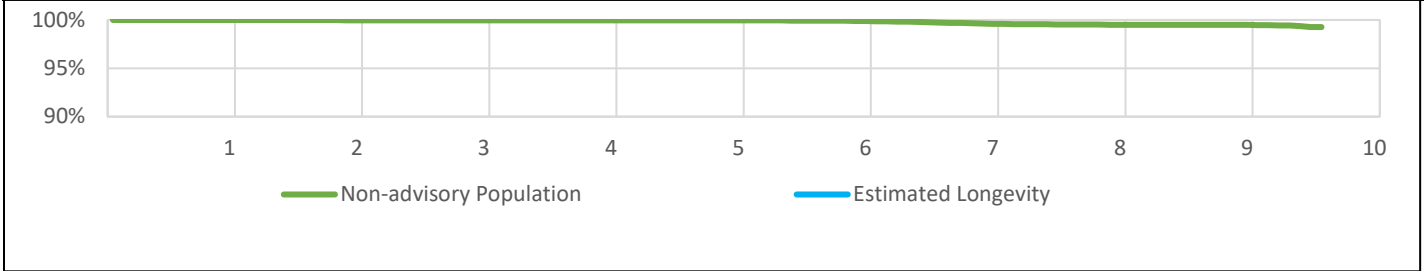
Models: J063/J066/J173/J176/J273/J276/J278/J279/K063/K066/K083/K086/K173/K176/K183/K186/K273/K276/K278/K279/
K283/K286/K288/K289

US Summary			
US Registered Implants:	121,000	US Normal Battery Depletions:	12,565
US Approval Date:	May 2012	US Malfunctions:	288
US Estimated Active Implants:	66,000	Without Compromised Therapy:	276
		With Compromised Therapy:	12

Battery Depletions and Malfunctions



Malfunctions Only



US Survival Probability

		Year	1	2	3	4	5	6	7	8	9	10
Non-Advisory Population	Depletions and Malfunctions		100.0%	99.9%	99.9%	99.7%	99.5%	98.9%	95.9%	86.4%	59.0%	22.9%
Registered Implants:	Malfunctions Only		100.0%	100.0%	100.0%	100.0%	99.9%	99.9%	99.6%	99.5%	99.5%	99.3%
121,000	Effective Sample Size		107338	95759	85392	76116	67676	59965	50878	27059	6766	601

@ 117 months

ADVANTIO/INGENIO/VITALIO/FORMIO DR

Models: J063/J066/J173/J176/J273/J276/J278/J279/K063/K066/K083/K086/K173/K176/K183/K186/K273/K276/
K278/K279/K283/K286/K288/K289

Worldwide Confirmed Malfunctions	330
Worldwide Distribution	218,000

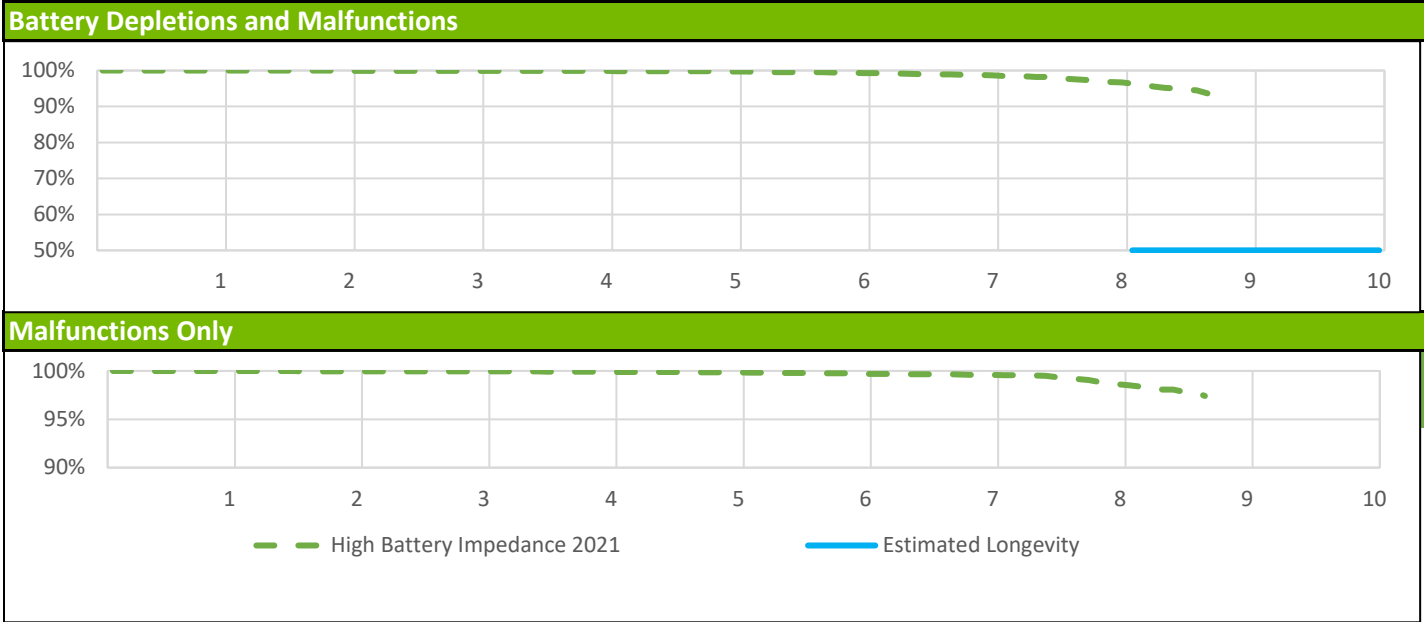
	With Compromised Therapy	Without Compromised Therapy	Total
Electrical			
Low-voltage capacitors (47)	0	8	8
Integrated circuit (50)	7	3	10
Titanium case material (60)	3	0	3
Software			
Memory errors (51)	1	29	30
Other			
Non-patterned, other	10	269	279
Grand Total	21	309	330

References cited in table above [\(link\)](#)

ADVANTIO/INGENIO/VITALIO EL DR

Models: J064/J067/J174/J177/J274/J277/K064/K067/K084/K087/K174/K177/K184/K187/K274/K277/K284/K287

US Summary			
US Registered Implants:	11,000	US Normal Battery Depletions:	87
US Approval Date:	May 2012	US Malfunctions:	51
US Estimated Active Implants:	7,000	Without Compromised Therapy:	49
		With Compromised Therapy:	2



US Survival Probability											
Year		1	2	3	4	5	6	7	8	9	10
High Battery Impedance 2021	Depletions and Malfunctions	100.0%	99.9%	99.9%	99.9%	99.8%	99.3%	98.7%	96.8%	93.7%	--
Registered Implants:	Malfunctions Only	100.0%	100.0%	99.9%	99.9%	99.9%	99.7%	99.6%	98.7%	97.4%	--
11,000	Effective Sample Size	9675	8588	7640	6793	6040	5302	4285	1434	232	--

@ 105 months

*Devices subject to an advisory. Refer to the Advisories for more details. Devices may be part of more than one advisory.

ADVANTIO/INGENIO/VITALIO/FORMIO EL DR

Models: J064/J067/J174/J177/J274/J277/K064/K067/K084/K087/K174/K177/K184/K187/K274/K277/K284/K287

Worldwide Confirmed Malfunctions 254
Worldwide Distribution 76,000

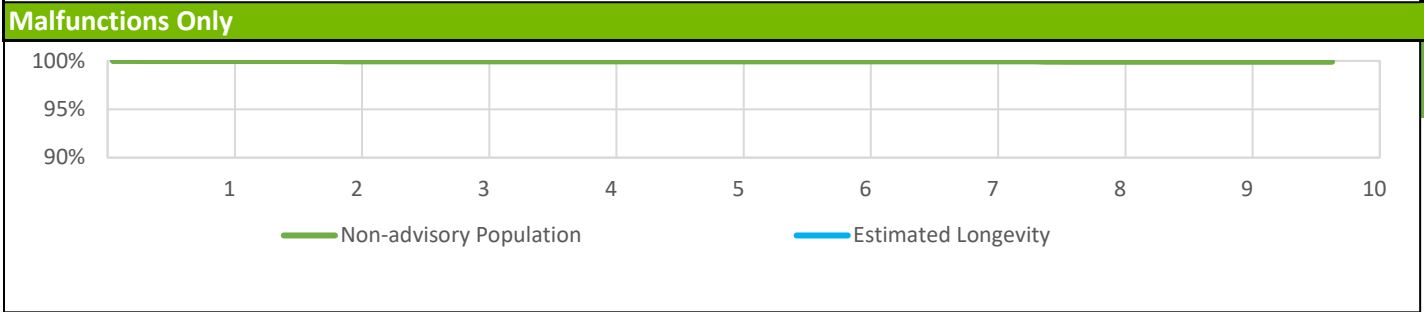
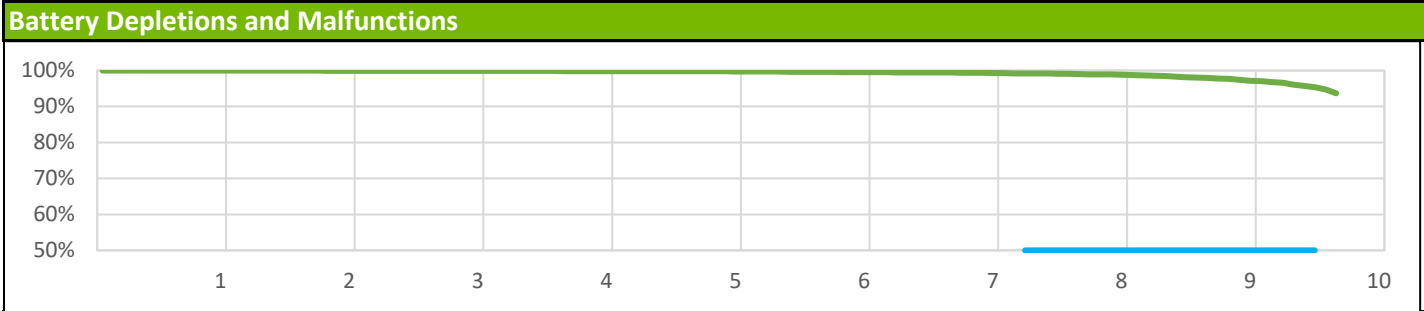
	With Compromised Therapy	Without Compromised Therapy	Total
Electrical			
Low-voltage capacitors (47)	1	5	6
Integrated circuit (50)	2	0	2
Titanium case material (60)	2	0	2
High battery impedance initiating safety mode 2021 (82)	0	39	39
Software			
Memory errors (51)	1	6	7
Respiratory sensor (59)	0	1	1
Other			
Non-patterned, other	6	191	197
Grand Total	12	242	254

References cited in table above ([link](#))

ADVANTIO/INGENIO/VITALIO/FORMIO SR

Models: J062/J065/J172/J175/J272/J275/K062/K065/K082/K085/K172/K175/K182/K185/K272/K275/K282/K285

US Summary			
US Registered Implants:	27,000	US Normal Battery Depletions:	211
US Approval Date:	May 2012	US Malfunctions:	13
US Estimated Active Implants:	14,000	Without Compromised Therapy:	12
		With Compromised Therapy:	1



US Survival Probability

		Year	1	2	3	4	5	6	7	8	9	10
Non-Advisory Population	Depletions and Malfunctions		100.0%	99.9%	99.9%	99.8%	99.8%	99.6%	99.4%	98.9%	97.4%	93.7%
Registered Implants:	Malfunctions Only		100.0%	100.0%	100.0%	100.0%	99.9%	99.9%	99.9%	99.9%	99.9%	99.9%
27,000	Effective Sample Size		22808	20281	18088	16150	14400	12759	10631	6160	2272	340

@ 117 months

ADVANTIO/INGENIO/VITALIO SR

Models: J062/J065/J172/J175/J272/J275/K062/K065/K082/K085/K172/K175/K182/K185/K272/K275/K282/K285

Worldwide Confirmed Malfunctions	27
Worldwide Distribution	86,000

	With Compromised Therapy	Without Compromised Therapy	Total
Electrical			
Low-voltage capacitors (47)	1	3	4
Integrated circuit (50)	3	2	5
Titanium case material (60)	1	0	1
Software			
Memory errors (51)	0	9	9
Other			
Non-patterned, other	3	5	8
Grand Total	8	19	27

References cited in table above [\(link\)](#)

ALTRUA 2 DR

Models: S702

Worldwide Confirmed Malfunctions	10
Worldwide Distribution	11,000

	With Compromised Therapy	Without Compromised Therapy	Total
Software			
Memory errors (51)	0	1	1
Electrical			
Hydrogen induced premature depletion - June 2021 (83)	0	9	9
Grand Total	0	10	10

References cited in table above ([link](#))

ALTRUA 2 EL DR

Models: S722

Worldwide Confirmed Malfunctions	1
Worldwide Distribution	7,000

	With Compromised Therapy	Without Compromised Therapy	Total
Electrical			
Hydrogen induced premature depletion - June 2021 (83)	0	1	1
Grand Total	0	1	1

References cited in table above [\(link\)](#)

ALTRUA 2 SR

Models: S701

Worldwide Confirmed Malfunctions	9
Worldwide Distribution	9,000

	With Compromised Therapy	Without Compromised Therapy	Total
Electrical			
Hydrogen induced premature depletion - June 2021 (83)	0	8	8
Other			
Non-patterned, other	0	1	1
Grand Total	0	9	9

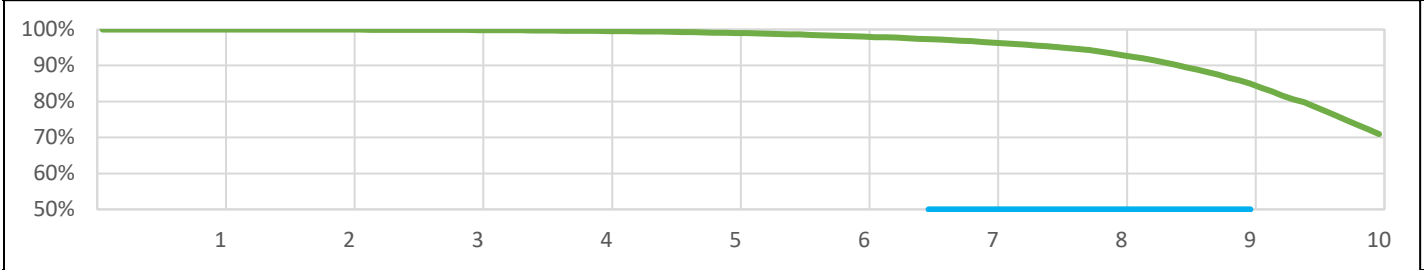
References cited in table above ([link](#))

ALTRUA 60 DR

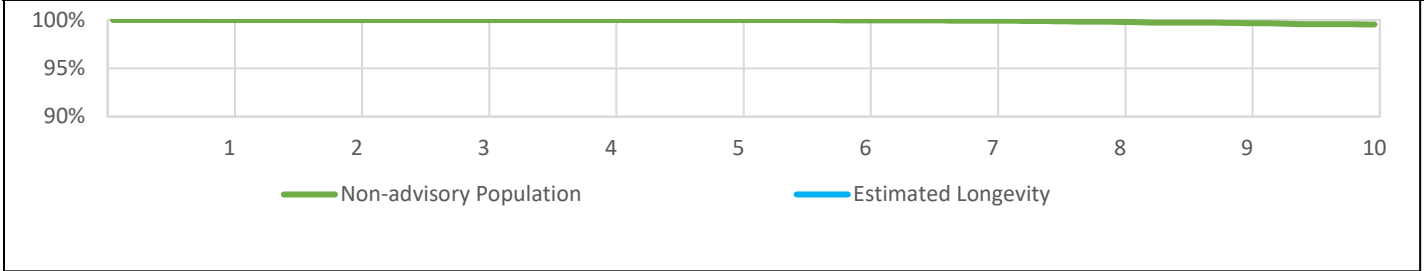
Model: S602

US Summary			
US Registered Implants:	22,000	US Normal Battery Depletions:	4,261
US Approval Date:	April 2008	US Malfunctions:	43
US Estimated Active Implants:	7,000	Without Compromised Therapy:	39
		With Compromised Therapy:	4

Battery Depletions and Malfunctions



Malfunctions Only



US Survival Probability											
Year		1	2	3	4	5	6	7	8	9	10
Non-Advisory Population	Depletions and Malfunctions	100.0%	100.0%	99.9%	99.6%	99.1%	98.1%	96.6%	93.4%	85.9%	72.3%
Registered Implants:	Malfunctions Only	100.0%	100.0%	100.0%	100.0%	100.0%	100.0%	99.9%	99.8%	99.7%	99.5%
22,000	Effective Sample Size	19254	17215	15355	13655	12081	10618	9283	7915	6346	4527

ALTRUA 60 DR

Models: S602

Worldwide Confirmed Malfunctions	73
Worldwide Distribution	56,000

	With Compromised Therapy	Without Compromised Therapy	Total
Electrical			
Capacitor (15)	0	1	1
Mechanical			
Capacitor array (16)	0	1	1
Difficulty securing lead (41)	1	0	1
Other			
Battery depletion (26)	1	1	2
Battery status (49)	1	60	61
Non-patterned, other	3	4	7
Grand Total	6	67	73

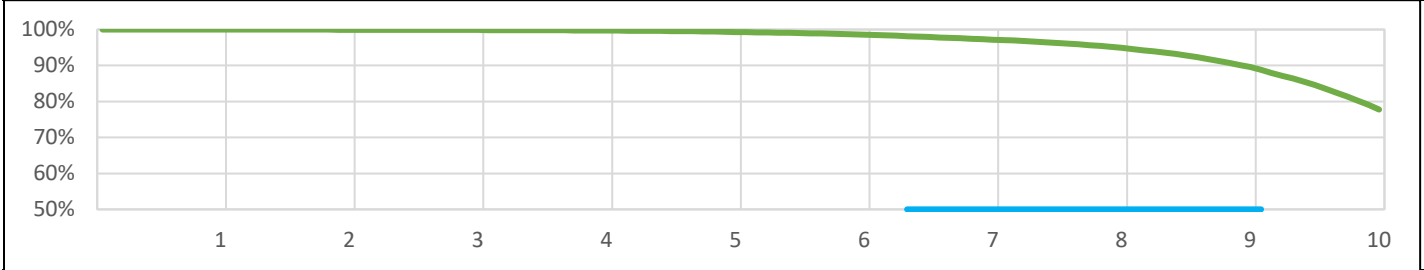
References cited in table above [\(link\)](#)

ALTRUA 60 EL DR

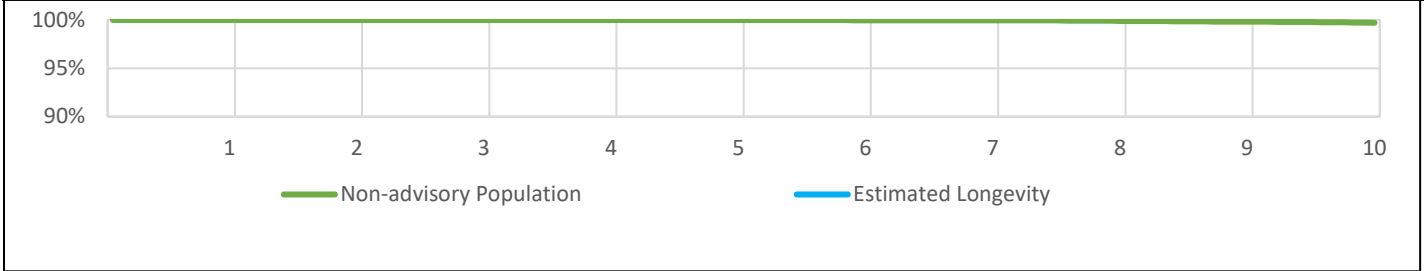
Model: S606

US Summary			
US Registered Implants:	59,000	US Normal Battery Depletions:	7,879
US Approval Date:	April 2008	US Malfunctions:	76
US Estimated Active Implants:	25,000	Without Compromised Therapy:	70
		With Compromised Therapy:	6

Battery Depletions and Malfunctions



Malfunctions Only



US Survival Probability											
Year		1	2	3	4	5	6	7	8	9	10
Non-Advisory Population	Depletions and Malfunctions	100.0%	99.9%	99.9%	99.7%	99.4%	98.6%	97.3%	95.2%	90.1%	79.1%
Registered Implants:	Malfunctions Only	100.0%	100.0%	100.0%	100.0%	100.0%	100.0%	100.0%	99.9%	99.8%	99.7%
59,000	Effective Sample Size	52505	46924	41881	37334	33242	29398	25847	22507	18808	13485

ALTRUA 60 EL DR

Models: S606

Worldwide Confirmed Malfunctions	108
Worldwide Distribution	90,000

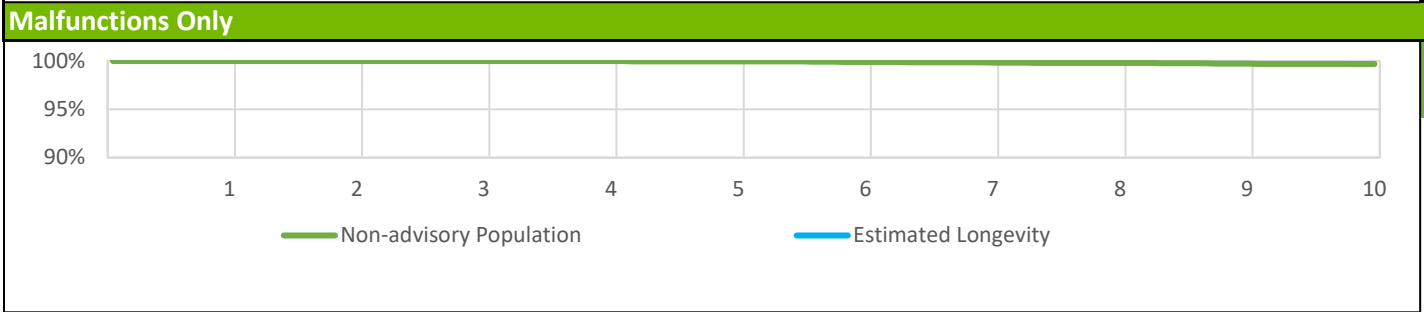
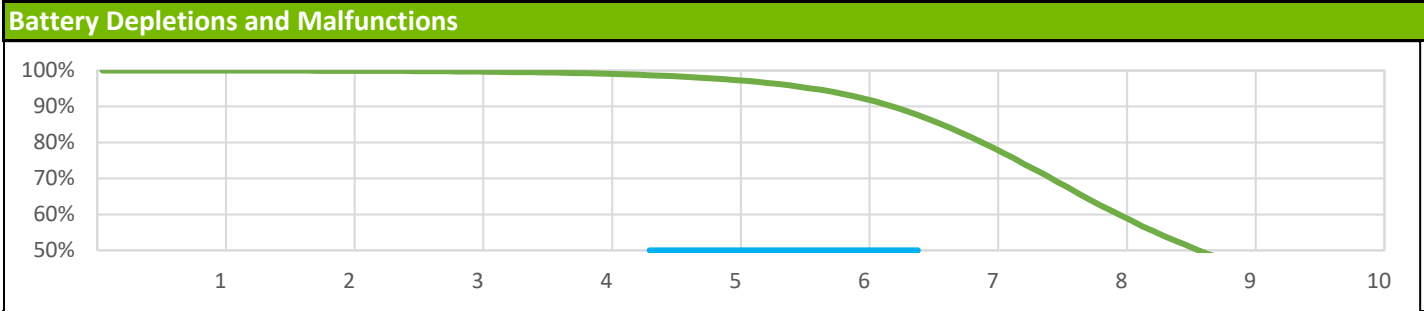
	With Compromised Therapy	Without Compromised Therapy	Total
Electrical			
Capacitor (15)	0	3	3
Integrated circuit (17)	0	1	1
Mechanical			
Difficulty securing lead (41)	1	0	1
Other			
Battery depletion (26)	2	0	2
Battery status (49)	2	93	95
Magnet rate (44)	0	1	1
Non-patterned, other	2	3	5
Grand Total	7	101	108

References cited in table above [\(link\)](#)

ALTRUA 60 DR (Downsize)

Model: S603

US Summary			
US Registered Implants:	90,000	US Normal Battery Depletions:	25,578
US Approval Date:	April 2008	US Malfunctions:	103
US Estimated Active Implants:	21,000	Without Compromised Therapy:	93
		With Compromised Therapy:	10



US Survival Probability											
Year		1	2	3	4	5	6	7	8	9	10
Non-Advisory Population	Depletions and Malfunctions	100.0%	99.9%	99.7%	99.2%	97.6%	92.9%	80.0%	61.1%	45.6%	33.1%
Registered Implants:	Malfunctions Only	100.0%	100.0%	100.0%	100.0%	100.0%	99.9%	99.8%	99.8%	99.7%	99.7%
90,000	Effective Sample Size	78613	70314	62796	55877	49182	41799	32074	21347	13592	7630

ALTRUA 60 DR (Downsize)

Models: S603

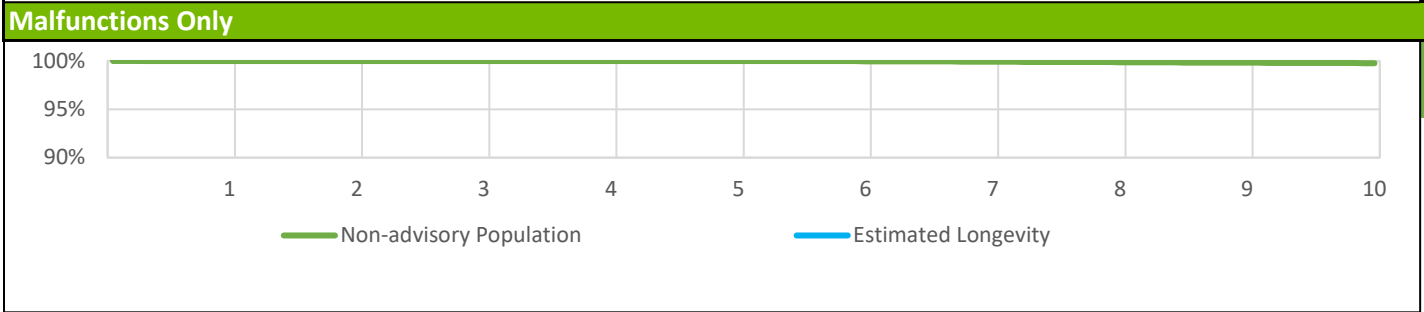
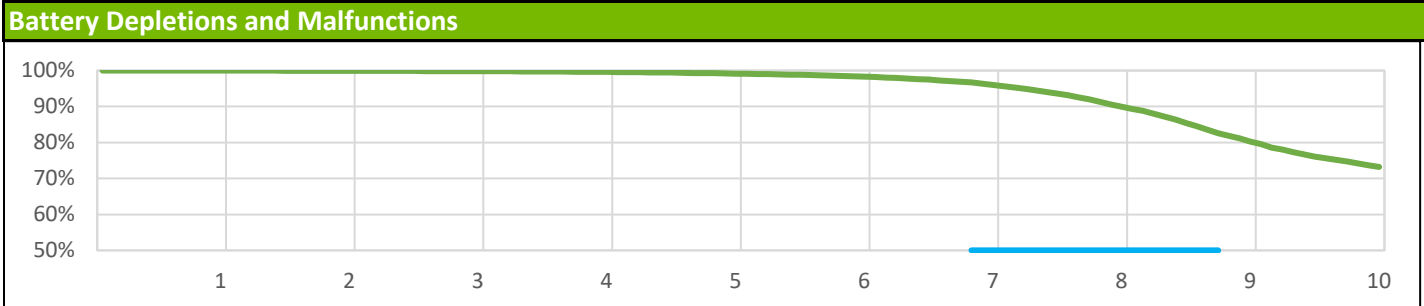
Worldwide Confirmed Malfunctions		132	
Worldwide Distribution		132,000	
	With Compromised Therapy	Without Compromised Therapy	Total
Electrical			
Capacitor (15)	7	4	11
Integrated circuit (30)	1	1	2
Mechanical			
Difficulty securing lead (41)	0	1	1
Connector block (39)	0	1	1
Software			
Underestimation of battery status (34)	0	1	1
Other			
Battery depletion (26)	1	3	4
Battery status (49)	0	101	101
Magnet response (21)	0	2	2
Non-patterned, other	4	5	9
Grand Total	13	119	132

References cited in table above [\(link\)](#)

ALTRUA 60 SR

Model: S601

US Summary			
US Registered Implants:	32,000	US Normal Battery Depletions:	3,553
US Approval Date:	April 2008	US Malfunctions:	27
US Estimated Active Implants:	9,000	Without Compromised Therapy:	24
		With Compromised Therapy:	3



US Survival Probability											
	Year	1	2	3	4	5	6	7	8	9	10
Non-Advisory Population	Depletions and Malfunctions	100.0%	99.9%	99.8%	99.6%	99.2%	98.4%	96.3%	90.6%	81.1%	73.6%
Registered Implants:	Malfunctions Only	100.0%	100.0%	100.0%	100.0%	100.0%	100.0%	99.9%	99.9%	99.8%	99.8%
	32,000 Effective Sample Size	26286	23041	20408	18163	16175	14331	12577	10539	8213	6094

ALTRUA 60 SR

Models: S601

Worldwide Confirmed Malfunctions	48		
Worldwide Distribution	68,000		
	With Compromised Therapy	Without Compromised Therapy	Total
Electrical			
Capacitor (15)	2	1	3
Integrated circuit (30)	2	0	2
Other			
Battery depletion (26)	1	0	1
Battery status (49)	1	38	39
Non-patterned, other	2	1	3
Grand Total	8	40	48

References cited in table above [\(link\)](#)

ALTRUA 50 DR (Downsize)

Models: S502

Worldwide Confirmed Malfunctions	39		
Worldwide Distribution	48,000		
	With Compromised Therapy	Without Compromised Therapy	Total
Electrical			
Capacitor (15)	1	2	3
Integrated circuit (30)	0	1	1
Other			
Battery depletion (26)	0	2	2
Battery status (49)	0	31	31
Non-patterned, other	1	1	2
Grand Total	2	37	39

References cited in table above [\(link\)](#)

ALTRUA 50 SR

Models: S501

Worldwide Confirmed Malfunctions	16
Worldwide Distribution	25,000

	With Compromised Therapy	Without Compromised Therapy	Total
Electrical			
Capacitor (15)	4	1	5
Other			
Battery depletion (26)	2	0	2
Battery status (49)	0	8	8
Non-patterned, other	1	0	1
Grand Total	7	9	16

References cited in table above [\(link\)](#)

ALTRUA 50 DDD (Downsize)

Models: S504

Worldwide Confirmed Malfunctions	13
Worldwide Distribution	12,000

	With Compromised Therapy	Without Compromised Therapy	Total
Other			
Battery depletion (26)	3	0	3
Battery status (49)	0	9	9
Non-patterned, other	0	1	1
Grand Total	3	10	13

References cited in table above [\(link\)](#)

ALTRUA 50 SSI

Models: S508

Worldwide Confirmed Malfunctions	5
Worldwide Distribution	6,000

	With Compromised Therapy	Without Compromised Therapy	Total
Other			
Battery depletion (26)	1	0	1
Battery status (49)	0	4	4
Grand Total	1	4	5

References cited in table above [\(link\)](#)

ALTRUA 50 VDD (Downsize)

Models: S504

Worldwide Confirmed Malfunctions	7		
Worldwide Distribution	6,000		
	With Compromised Therapy	Without Compromised Therapy	Total
Other			
Battery status (49)	0	7	7
Grand Total	0	7	7

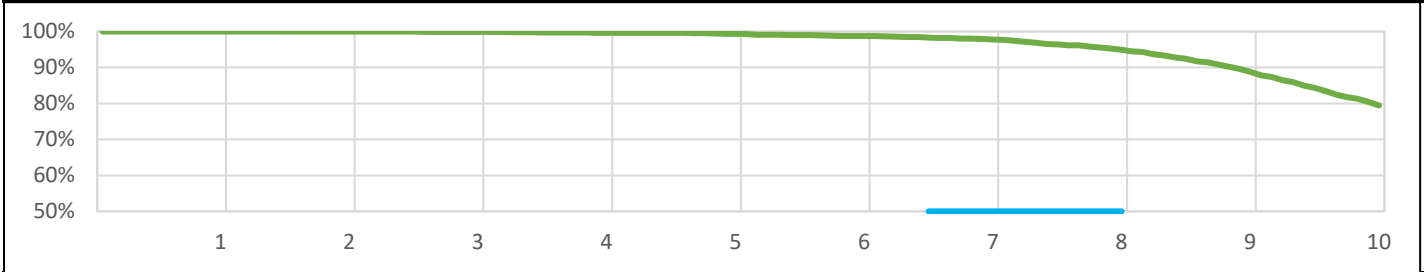
References cited in table above [\(link\)](#)

ALTRUA 40 EL DR

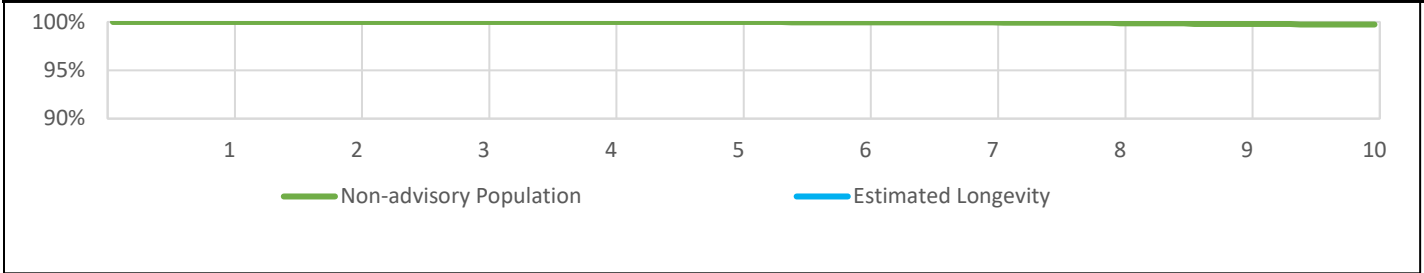
Model: S404

US Summary			
US Registered Implants:	5,000	US Normal Battery Depletions:	632
US Approval Date:	April 2008	US Malfunctions:	5
US Estimated Active Implants:	2,000	Without Compromised Therapy:	5
		With Compromised Therapy:	-

Battery Depletions and Malfunctions



Malfunctions Only



US Survival Probability												
		Year	1	2	3	4	5	6	7	8	9	10
Non-Advisory Population	Depletions and Malfunctions		100.0%	100.0%	99.9%	99.7%	99.4%	98.7%	98.0%	95.3%	89.6%	80.5%
Registered Implants:	Malfunctions Only		100.0%	100.0%	100.0%	100.0%	100.0%	100.0%	100.0%	99.9%	99.8%	99.7%
	5,000 Effective Sample Size		4429	3960	3555	3176	2835	2511	2223	1926	1606	1248

ALTRUA 40 EL DR

Models: S404

Worldwide Confirmed Malfunctions	7
Worldwide Distribution	11,000

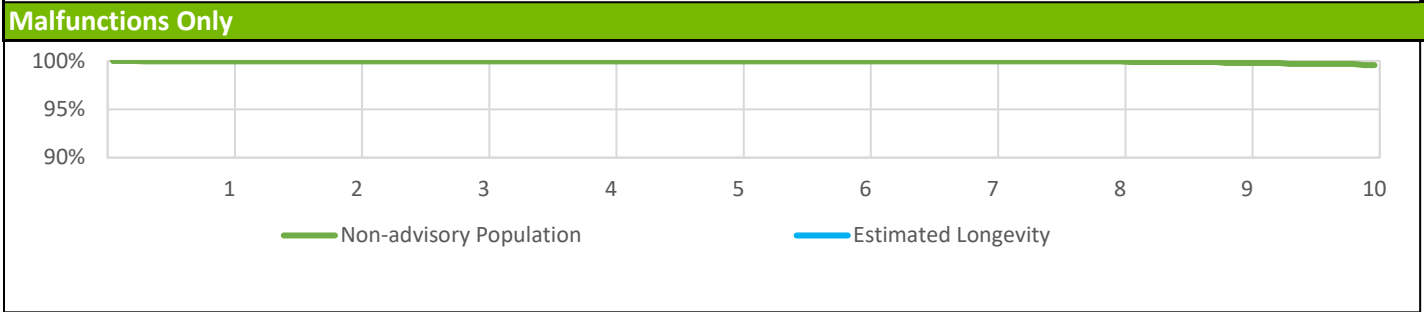
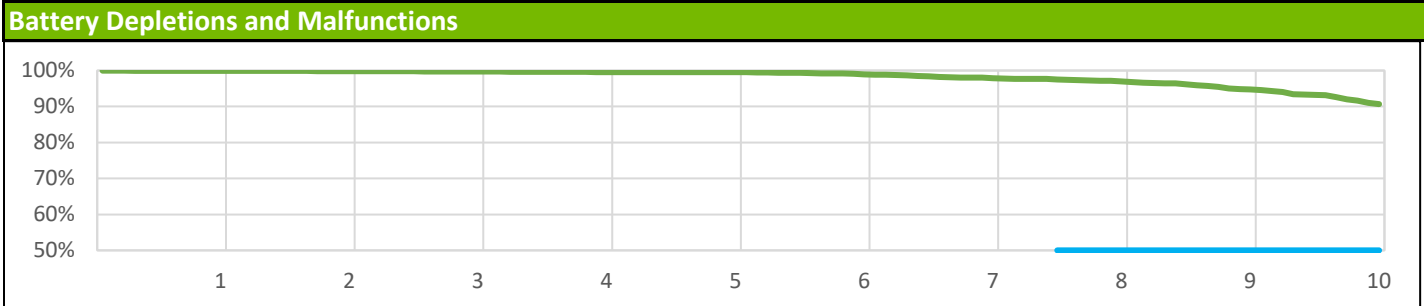
	With Compromised Therapy	Without Compromised Therapy	Total
Electrical			
Capacitor (15)	0	1	1
Other			
Battery status (49)	0	6	6
Grand Total	0	7	7

References cited in table above [\(link\)](#)

ALTRUA 20 EL DR

Model: S208

US Summary			
US Registered Implants:	3,000	US Normal Battery Depletions:	213
US Approval Date:	April 2008	US Malfunctions:	6
US Estimated Active Implants:	1,000	Without Compromised Therapy:	5
		With Compromised Therapy:	1



US Survival Probability												
		Year	1	2	3	4	5	6	7	8	9	10
Non-Advisory Population	Depletions and Malfunctions		99.9%	99.9%	99.8%	99.6%	99.5%	99.1%	98.0%	97.2%	94.8%	91.0%
Registered Implants:	Malfunctions Only		100.0%	100.0%	100.0%	100.0%	100.0%	100.0%	100.0%	100.0%	99.8%	99.6%
	3,000 Effective Sample Size		2762	2472	2200	1968	1745	1553	1369	1209	1047	871

ALTRUA 20 EL DR

Models: S208

Worldwide Confirmed Malfunctions	9
Worldwide Distribution	11,000

	With Compromised Therapy	Without Compromised Therapy	Total
Electrical			
Capacitor (15)	2	0	2
Other			
Battery status (49)	0	6	6
Non-patterned, other	1	0	1
Grand Total	3	6	9

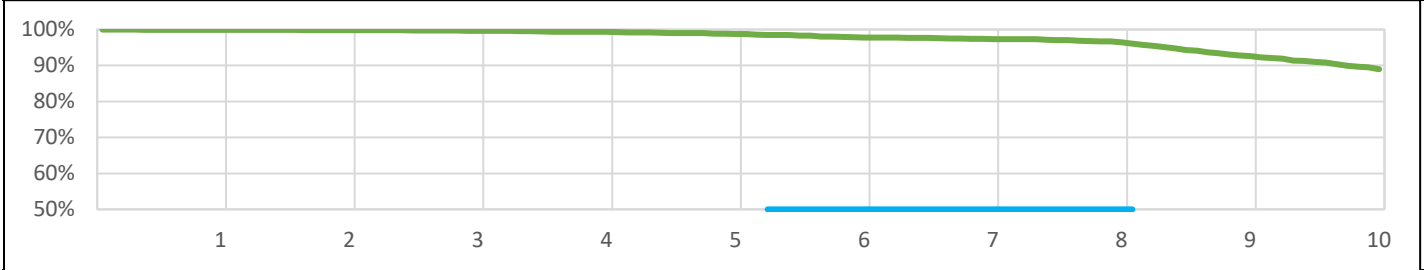
References cited in table above [\(link\)](#)

ALTRUA 20 SR

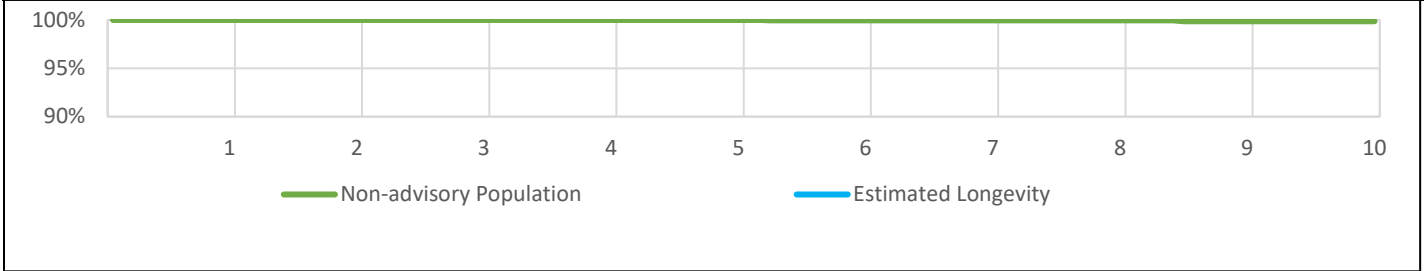
Model: S201/S204

US Summary			
US Registered Implants:	5,000	US Normal Battery Depletions:	242
US Approval Date:	April 2008	US Malfunctions:	2
US Estimated Active Implants:	1,000	Without Compromised Therapy:	2
		With Compromised Therapy:	-

Battery Depletions and Malfunctions



Malfunctions Only



US Survival Probability												
		Year	1	2	3	4	5	6	7	8	9	10
Non-Advisory Population	Depletions and Malfunctions		99.9%	99.8%	99.7%	99.3%	98.8%	97.9%	97.4%	96.7%	92.8%	89.5%
Registered Implants:	Malfunctions Only		100.0%	100.0%	100.0%	100.0%	100.0%	99.9%	99.9%	99.9%	99.9%	99.9%
	5,000 Effective Sample Size		3566	3032	2603	2274	1996	1743	1534	1343	1138	901

ALTRUA 20 SR

Models: S201/S204

Worldwide Confirmed Malfunctions	5
Worldwide Distribution	24,000

	With Compromised Therapy	Without Compromised Therapy	Total
Electrical			
Capacitor (15)	0	1	1
Other			
Non-patterned, other	1	0	1
Battery status (49)	0	3	3
Grand Total	1	4	5

References cited in table above [\(link\)](#)

ALTRUA 20 DDD

Models: S207

Worldwide Confirmed Malfunctions	0		
Worldwide Distribution	1,000		
	With Compromised Therapy	Without Compromised Therapy	Total
Other			
Non-patterned, other	0	0	0
Grand Total	0	0	0

References cited in table above [\(link\)](#)

ALTRUA 20 SSI

Models: S206

Worldwide Confirmed Malfunctions	0
Worldwide Distribution	8,000

	With Compromised Therapy	Without Compromised Therapy	Total
Other			
Non-patterend, other	0	0	0
Grand Total	0	0	0

References cited in table above [\(link\)](#)

Confirmed Malfunction Details: Pulse Generator References

Descriptions listed below provide an overview of the clinical observations and/or analysis findings associated with each pulse generator confirmed malfunction pattern listed in this report.

All of the patterns listed are thoroughly investigated and analyzed. As part of Boston Scientific's process of continuous improvement, when possible, changes have been or will be implemented in response to identified malfunction patterns. "Improvements implemented" may include product design changes in existing or subsequent generations, manufacturing process modifications, software updates, educational communications, labeling changes, etc. Improvement implementation may vary by geography due to various factors, including regulatory review timing, and may not completely mitigate or eliminate the potential for additional malfunctions.

3. **Low Voltage Capacitor 2014**— *Aug 2013 and Sep 2014 Voluntary Physician Advisory.* Alert message during followup, beeping tones, premature battery depletion. Diminished low voltage capacitor performance. Improvement implemented.
4. **Unintended Fuse Activation 2013**— *March 1, 2013 Voluntary Physician Advisory.* Inability to interrogate, no magnet response, permanent loss of therapy without warning. Improvement implemented.
5. **High cathode condition**— *June 1, 2011 Voluntary Physician Advisory.* Premature battery depletion. Misaligned battery component. Improvement implemented.
6. **Subpectoral implant 2009**— *December 01, 2009 Voluntary Physician Advisory.* Noise, oversensing, inappropriate shocks, pacing inhibition, high impedance when implanted subpectorally. Weakened bond between header and titanium case. Improvement implemented.
7. **Respiratory Sensor Oversensing**— *March 23, 2009 Voluntary Physician Advisory.* Oversensing, noise, inappropriate shock, pacing inhibition. When Respiratory Sensor is ON, RV lead or system complications may cause oversensing or noise. Improvement implemented.
8. **Low-voltage capacitor**— *June 23, 2006 and August 24, 2006 Voluntary Physician Advisory.* Premature battery depletion, no output, no interrogation. Failed low-voltage capacitor. Improvement implemented.
9. **Crystal timing component Failure Mode 1**— *September 22, 2005 Voluntary Physician Advisory.* Intermittent or permanent loss of pacing output without warning, intermittent or permanent loss of telemetry, reversion to VVI mode or appearance of a reset warning message upon interrogation. Foreign material within a crystal timing component. Improvement implemented.
10. **Crystal timing component Failure Mode 2**— *September 22, 2005 Voluntary Physician Advisory.* At implant procedure or during pre-implant testing: Intermittent or permanent loss of pacing output without warning, intermittent or permanent loss of telemetry, reversion to VVI mode, or appearance of a reset warning message upon interrogation. Microscopic particle within a crystal timing component. Three failures have been reported following confirmation of successful implantation. No currently distributed devices are subject to this peri-implant failure mode. Improvement implemented.
11. **Longevity labeling**— Battery longevity inconsistent with longevity labeling. Device battery status indicators are accurate and no loss of therapy has been reported.
12. **Solder bond**— Loss of device output, loss of sensing. Separation of component solder from substrate. Improvement implemented.
13. **Integrated circuit**— Power on Reset state, loss of telemetry, safety mode operation or loss of output. Failed digital integrated circuit.
14. **Capacitor**— Premature battery depletion, inability to interrogate. Damage to low-voltage capacitor.
15. **Capacitor**— No telemetry, no pacing, premature battery depletion. Gradual, premature battery depletion most common; in rare instances, rapid depletion occurred with no therapy available. Failed low-voltage capacitor.
16. **Capacitor array**— Loss of device output, loss of capture, inability to accurately measure charge times causing elective replacement indicator declaration. Damage to capacitor array. Improvement implemented.
17. **Integrated circuit**— No telemetry, premature battery depletion. Integrated circuit issue within high-voltage transistor.
18. **Battery depletion**— Premature battery depletion and loss of capture.
19. **Seal plug**— Non-cardiac signals on electrograms leading to inhibition of pacing and/or inappropriate shock delivery. Damaged seal plug. Improvement implemented.
20. **Header**— High impedance, compromised header bonding identified during lead revision procedures. Insufficient medical adhesive bonding between header and case. Improvement implemented.
21. **Magnet response**— No magnet response. Particulate material in component. Improvement implemented.
22. **Battery depletion**— Premature battery depletion.
23. **Memory error**— Device resets (including pacing at reset parameters) and inability to interrogate. Errors in device memory.
24. **Transformer**— Charge time alert message and/or end of life (EOL) indicator displayed, loss of shock therapy. Damaged transformer. Improvement implemented.
25. **Setscrew block**— No pacing or pauses in pacing, intermittent or lack of setscrew contact with lead. Incorrect setscrew block. Improvement implemented.
26. **Battery depletion**— Loss of therapy, inability to interrogate, no magnet response, premature battery depletion.

27. **Solder bond**— Inability to interrogate, no magnet response, no pacing output. Broken solder bond between wire mounting surface and internal circuitry. Improvement implemented.
28. **Stored EGMs**— Inability to view stored EGMs. Incorrect EGM index location.
29. **Battery post**— Inability to interrogate, no pacing output. Bent battery post. Improvement implemented.
30. **Integrated circuit**— Premature battery depletion, loss of pacing output, inability to interrogate, loss of sensing, high-rate pacing, loss of shock therapy. Damage to integrated circuit. Improvement implemented.
31. **Alert messages**— During programmer interactions, alert messages appear which are able to be cleared. In one case, an alert message occurred with two memory errors after multiple device resets.
32. **Setscrew**— Inability to tighten or loosen setscrews during implant or replacement procedure due to process variability. Improvement implemented.
33. **Seal plug**— Lifted or missing seal plugs. Inadequate medical adhesive bond. Improvement implemented
34. **Underestimation of battery status**— Underestimation of remaining longevity due to invalid charge time measurement. Improvement implemented.
35. **Interrupted telemetry**— Early appearance of Elective Replacement Time (ERT) indicator, unexpected impedance measurements (>2500 ohms). Interruption in telemetry sequence during software upgrade. Improvement implemented.
36. **Pacing rate limit**— Inability to interrogate. Inappropriate pacing due to feature interaction. Improvement implemented.
37. **Solder joint**— Inappropriate shocks, beeping, fallback mode, errors or inability to interrogate or program. Cracked solder joint due to repetitive mechanical stress-induced component damage, only when implanted subpectorally with serial number facing the ribs.
38. **Transformer**— Inability to interrogate, loss of pacing and shock therapy. Failed transformer.
39. **Connector block**— Connector block can be moved out of alignment or displaced from header. Prolonged implant procedure, high impedance, no pacing, no sensing. Improvement implemented.
40. **Seal plug**— Non-cardiac signals on electrograms may result in loss of pacing or inappropriate shocks. Seal plug allows air in lead port to escape.
41. **Difficulty securing lead**— Noise, high impedance, inappropriate shocks or loss of therapy due to crossthreaded setscrews, intermittent or lack of contact between lead and header. Improvement implemented.
42. **Safety Core-electrocautery**— During electrocautery, device may enter Safety Core. Circuitry response to noise caused by electrocautery. Improvement implemented.
43. **High-voltage capacitor**— Alert message upon interrogation, extended charge time. Damaged high voltage capacitor.
44. **Magnet rate**— During interrogation, magnet rate remains after removal of magnet. Reed switch stuck in closed position. Improvement implemented.
45. **Header contacts**— Noise, oversensing, inappropriate shock, high pacing impedance, possible loss of pacing and sensing. Poor header connection with lead terminals due to contacts.
46. **Safety Core-programming**— Device enters Safety Core after three consecutive invalid programming attempts, due to firmware issue. Improvement implemented.
47. **Low-voltage capacitors**— Premature battery depletion, voltage alert during followup, device beeping. Capacitor failure.
48. **Alert messages not displayed post-EOL**— No alert message display after EOL declaration. Improvement implemented.
49. **Battery status**— Longevity remaining, battery status, gas gauge and/or magnet rate do not align or are inconsistent.
50. **Integrated circuit**— Loss of telemetry, premature battery depletion, alert message during followup. Integrated circuit issue. Improvement implemented.
51. **Memory errors**— Safety mode operation, inaccurately labeled pacing data. Errors in device memory
52. **High voltage circuit**— Alert message after implant, loss of shock therapy. Failed output module.
53. **Battery**— Beeping tones and alert message upon interrogation. Reduced battery voltage. Improvement implemented.
54. **Low-voltage capacitor**— Alert message during followup, beeping tones, premature battery depletion. Diminished low voltage capacitor performance. Improvement implemented.
55. **Shortened replacement time 2018 November 2018 Voluntary Physician Advisory**. Premature, gradual depletion of battery; in rare instances, rapid depletion with no therapy available. Improvement implemented.
56. **Telemetry**— Inability to interrogate, premature battery depletion.
57. **Unintended Battery Depletion Alert**— Beeping tones, Battery Depletion alert during followup despite normal battery depletion. Alert may be cleared without impact to battery status or therapy availability. Improvement implemented.
58. **High voltage circuit**— Long charge time at implant, inability to interrogate, loss of pacing and shock therapy. Improvement implemented.
59. **Respiratory sensor**— Temporary increase or decrease in pacing rate as a result of respiratory sensor response to non-respiratory signals. No loss of pacing output.
60. **Titanium case material**— Noise, oversensing, abnormal pacing impedance, loss of capture, premature battery depletion. Titanium case material creating a higher than normal current drain condition. Improvement implemented.
61. **Charge Timeout Alert**— Beeping tones, programmer warning screen, abnormal shock impedance. Charge timeout alert.
62. **High voltage circuit component**— Charge time alert message and/or Elective Replacement indicator (ERI) displayed, beeping tones. High voltage circuit component. Improvement implemented.
63. **Integrated circuit**— Abnormal lead impedance, no telemetry, premature battery depletion. Integrated circuit issue within high-voltage transistor Improvement implemented

64. **Safety Core-unintended biventricular pacing**— *Dec 2017 Voluntary Physician Advisory*. Device enters Safety Core after detecting unintended asynchronous biventricular pacing due to software issue.
65. **Memory corruption** - *Jun 2017 Voluntary Physician Advisory*. Atypical energy delivery, error messages upon interrogation, loss of tachy therapy. Memory corruption. Improvement implemented.
67. **Capacitor**— Premature battery depletion. Diminished low voltage capacitor performance.
68. **Telemetry**— Alert message during followup, inability to interrogate, premature battery depletion, loss of pacing therapy. Telemetry component.
69. **Low-voltage capacitor**— Alert message during followup, beeping tones, premature battery depletion.
70. **Hydrogen induced premature depletion - September 2018** - *September 2018 Voluntary Physician Advisory*. Premature battery depletion. Diminished low voltage capacitor performance.
71. **Battery** – Premature, gradual depletion of battery; in rare instances, rapid depletion with no therapy available. Improvement implemented.
72. **Capacitor**— Premature battery depletion. Diminished capacitor performance
73. **Misaligned markers**— Stored episode markers do not match recorded EGM.
74. **Header**— Noise, oversensing, inappropriate shocks, pacing inhibition, high impedance when implanted subcutaneously. Weakened bond between header and titanium case. Improvement Implemented.
75. **High voltage capacitor**— Charge time alert message, end of life (EOL) indicator displayed, beeping tones. Loss of tachy therapy without loss of brady therapy. Internal high-voltage capacitor issue. Improvement implemented.
76. **Internal insulation**— Beeping tones, loss of telemetry, premature battery depletion, loss of tachy therapy. Internal insulation issue.
77. **S-ICD battery depletion 2019 and 2020** – *August 2019 and December 2020 Voluntary Physician Advisory*. Premature battery depletion. Diminished capacitor performance.
78. **Solder joint**— Beeping tones, device errors, loss of tachy therapy. Cracked solder joint.
79. **Battery cathode**— Safety mode operation, inability to interrogate, loss of brady therapy. Internal battery cathode issue.
80. **EMBLEM S-ICD electrical overstress 2020**— *December 2020 Voluntary Physician Advisory*. Beeping tones, loss of telemetry, loss of sensing, premature battery depletion, loss of tachy therapy.
81. **RF antenna**— Beeping tones, loss of telemetry, loss of sensing, premature battery depletion, loss of tachy therapy. Exposed antenna issue.
82. **High battery impedance initiating safety mode 2021**— *June 2021 Voluntary Physician Advisory*. Safety mode operation, system resets. Temporary reduction in battery voltage later in device life.
83. **Hydrogen induced premature depletion June 2021**— *June 2021 Voluntary Physician Advisory*. Premature battery depletion. Diminished low voltage capacitor performance.
84. **Battery depletion**— Beeping tones, device errors, premature battery depletion.
85. **Memory corruption**— Inability to interrogate, error messages upon interrogation, inappropriate shocks, loss of tachy therapy, and/or inaccurate patient information. Product returned with evidence of transient memory corruption.
86. **Cracked case**— Error messages upon interrogation, inability to interrogate, inappropriate shocks, loss of tachy therapy. Cracked outer case.
87. **Header**— Inability to interrogate, loss of tachy therapy. Header insulation issue.

Before/During Implant Procedure - Worldwide Malfunctions: Pulse Generators

This section of the report depicts the number of product malfunctions that occurred worldwide either before implant (prior to opening the sterile product packaging) or during implant (once the sterile product packaging has been opened). In all cases, the product in question must be returned to Boston Scientific CRM and confirmed through laboratory analysis to have operated or exhibited a problem outside the specified performance limits established by Boston Scientific. Damage incurred during shipping/transit or due to external factors warned against in labeling (e.g. radiation) is not reported as device malfunction here.

The Electrical category is comprised of confirmed malfunctions involving electrical components such as batteries and capacitors, and also includes fault codes encountered at implant. The majority of before/during implant pulse generator confirmed malfunctions in the Mechanical category are issues occurring within the connector block (e.g. stuck setscrews, seal plug/ring issues). The Software category consists primarily of confirmed malfunctions that result in telemetry issues. Confirmed malfunctions in the Labeling and Packaging categories include product labeling/identification issues and damage to sterile packaging, respectively. The Other category is comprised of non-patterned confirmed malfunctions.

CRT-D/Model	Worldwide Distribution	Electrical	Mechanical	Software	Other	Labeling	Packaging
RESONATE/MOMENTUM/CHARISMA/VIGILANT CRT-D							
G124/G125/G126/G128/G138/G224/G225/G228/G237/G247/ G248/G324/G325/G347/G348/G424/G425/G426/G428/G437/ G447/G448/G524/G525/G526/G528/G537/G547/G548	105,000	1	2	5	10	0	0
AUTOGEN CRT-D							
G160/G161/G164/G166/G168/G172/G173/G175/ G177/G179	24,000	3	0	0	4	0	0
DYNAGEN/INOGEN/ORIGEN CRT-D							
G150/G151/G154/G156/G158/G140/G141/ G146/G148/G050/G051/G056/G058	122,000	3	4	5	16	0	0
CRT-P/Model	Worldwide Distribution	Electrical	Mechanical	Software	Other	Labeling	Packaging
VISIONIST/VALITUDE							
U125/U128//U225/U226/U228	90,000	5	0	2	4	0	0
INTUA/INVIVE/INLIVEN							
V272/V273/V282/V283/W272/W273/V172/V173/V182/V183/W172/ W173	24,000	0	0	1	5	0	0
CONTAK RENEWAL TR 2							
H140/H145	31,000	1	7	0	5	0	0

ICD/Model	Worldwide Distribution	Electrical	Mechanical	Software	Other	Labeling	Packaging
RESONATE/MOMENTUM/CHARISMA/VIGILANT ICD DR D121/D221/D233/D321/D333/D421/D433/D521/D533	60,000	0	1	3	6	0	0
RESONATE/MOMENTUM/CHARISMA/VIGILANT ICD VR D120/D220/D232/D320/D332/D420/D432/D520/D532	44,000	1	3	2	1	0	0
AUTOGEN ICD EL VR D160/D161/D174/D175	17,000	1	0	0	0	0	0
AUTOGEN ICD EL DR D162/D163/D176/D177	16,000	1	0	1	0	0	0
DYNAGEN/INOGEN/ORIGEN ICD EL VR D020/D021/D010/D011/D000/D001	67,000	1	0	3	4	0	0
DYNAGEN/INOGEN/ORIGEN ICD EL DR D020/D021/D010/D011/D000/D001	74,000	0	3	2	3	0	0
DYNAGEN/INOGEN/ORIGEN ICD MINI VR D020/D021/D010/D011/D000/D001	31,000	1	0	4	2	0	0
DYNAGEN/INOGEN/ORIGEN ICD MINI DR D022/D023/D012/D013/D002/D003	30,000	2	0	0	3	0	0
S-ICD/Model	Worldwide Distribution	Electrical	Mechanical	Software	Other	Labeling	Packaging
EMBLEM S-ICD A209/A219	107,000	1	0	5	75	0	0
SQ-RX S-ICD 1010	11,000	11	0	21	27	0	0

Pacemaker/Model	Worldwide Distribution	Electrical	Mechanical	Software	Other	Labeling	Packaging
ACCOLADE/PROPONENT/ESSENTIO DR EL J064/K064/K067/K084	320,000	7	3	5	15	0	0
ACCOLADE/PROPONENT/ESSENTIO DR J064/K064/K067/K084	513,000	6	0	11	22	0	0
ACCOLADE/PROPONENT/ESSENTIO SR L100/L110/L200/L210/L300/L310	186,000	3	1	2	16	0	0
ADVANTIO/INGENIO/VITALIO EL DR J064/J067/K064/K067/K084/K087/ J174/J177/K174/K177/K184/K187/ J274/J277/K274/K277/K284/K287	76,000	1	1	0	4	0	0
ADVANTIO/INGENIO/VITALIO/FORMIO DR J064/J067/K064/K067/K084/K087/J174/J177/ K174/K177/K184/K187/J274/J277/K274/K277/ K284/K287/J278/J279/K278/K279/K288/K289	218,000	4	0	1	15	0	0
ADVANTIO/INGENIO/VITALIO SR J062/J065/K062/K065/K082/K085/ J172/J175/K172/K175/K182/K185/ J272/J275/K272/K275/K282/K285	86,000	0	0	1	5	0	0

U.S. Reason for Out of Service

As requested by the Heart Rhythm Society Task Force on Device Performance Policies and Guidelines, Boston Scientific provides reasons for device explant or out of service, if known. The reasons consist of normal battery depletion, unconfirmed premature battery depletion, device upgrade, device malfunction (which includes devices under advisory that have experienced a malfunction), complication related to another system component or clinical condition, (such as infection), or "other," a category consisting of patient death, prophylactic device explant, elective replacement, general product dissatisfaction, other observation/complication, unspecified, or unknown.

The counts for normal battery depletion, unconfirmed premature battery depletion, and device malfunction are reflected in the U.S. survival probability data. Reason for device explant or out of service may either be confirmed through laboratory analysis (as in the case of device malfunction) or it may be reported to Boston Scientific with no associated device return or laboratory analysis. Although a device may be indicated by the health care provider to have been taken out of service for more than one reason, the table below indicates only one reason per device in category counts.

CRT-D/Model	U.S. Registered Implants	Normal Battery Depletion	Device Upgrade	Device Malfunction ¹	Complication related to another system component or clinical condition ²	Other ³
RESONATE/MOMENTUM/CHARISMA/VIGILANT CRT-D G124/G125/G126/G128/G138/G224/G225/G228/G237/G247/G248/G324/G325/G347/G348/G424/G425/G426/G428/G437/G447/G448/G524/G525/G526/G528/G537/G547/G548	56000	27	182	13	630	4002
DYNAGEN/INOGEN/ORIGEN CRT-D G050/G051/G056/G058/G140/G141/G146/G148/G150/G151/G154/G156/G158	73000	773	387	71	1170	12731
INCEPTA/ENERGEN/PUNCTUA CRT-D N050/N051/N052/N053/N140/N141/N142/N143/N160/N161/N162/N163/N164/N165/P052/P053/P142/P143/ P162/P163/P165	53000	6092	450	805	930	19323
COGNIS N118/N119/N120/P106/P107/P108	75000	14901	434	2107	1665	39828

CRT-P/Model	U.S. Registered Implants	Normal Battery Depletion	Device Upgrade	Device Malfunction ¹	Complication related to another system component or clinical condition ²	Other ³
VISIONIST/VALITUDE U125/U128/U225/U226/U228	45000	267	940	52	320	6254
INTUA/INVIVE/INLIVEN V272/V273/V282/V283/W272/W273/V172/V173/V182/V183/W172/ W173	10000	889	220	301	78	4414
CONTAK RENEWAL TR H120/H125	19000	4310	209	67	208	12020

S-ICD/Model	U.S. Registered Implants	Normal Battery Depletion	Device Upgrade	Device Malfunction ¹	Complication related to another system component or clinical condition ²	Other ³
EMBLEM S-ICD A209, A219	48000	510	537	2065	968	5088
SQ-RX S-ICD 1010	8000	2440	220	105	251	1931

ICD/Model	U.S. Registered Implants	Normal Battery Depletion	Device Upgrade	Device Malfunction ¹	Complication related to another system component or clinical condition ²	Other ³
RESONATE/MOMENTUM/CHARISMA/VIGILANT ICD DR D121/D221/D233/D321/D333/D421/D433/D521/D533	33000	10	592	9	299	1532
RESONATE/MOMENTUM/CHARISMA/VIGILANT ICD VR D120/D220/D232/D320/D332/D420/D432/D520/D532	18000	7	385	5	171	823
DYNAGEN/INOGEN/ORIGEN ICD EL DR D052/D053/D142/D143/D152/D153	47000	57	1931	33	626	5541
DYNAGEN/INOGEN/ORIGEN ICD EL VR D050/D051/D140/D141/D150/D151	37000	28	1759	31	484	4124
DYNAGEN/INOGEN/ORIGEN ICD MINI DR D002/D003/D012/D013/D022/D023	11000	1437	411	16	139	1889
DYNAGEN/INOGEN/ORIGEN ICD MINI VR D000/D001/D010/D011/D020/D021	9000	421	427	11	130	1522
INCEPTA/ENERGEN/PUNCTUA ICD VR E050/E051/E140/E141/E160/E160/ F050/F051/F140/F141/F160/F161	39000	214	2273	1220	563	10466
INCEPTA/ENERGEN/PUNCTUA ICD DR E052/E053/E142/E143/E162/E163/F052/F053/F142/F143/F162/F163	47000	737	2599	1231	693	13420

ICD/Model, continued...	U.S. Registered Implants	Normal Battery Depletion	Device Upgrade	Device Malfunction ¹	Complication related to another system component or clinical condition ²	Other ³
TELIGEN VR E102/E103/F102/F103	38000	1338	1904	2374	662	16798
TELIGEN DR E110/E111/F110/F111	66000	9015	2887	3039	1146	30808

Pacemaker/Model	U.S. Registered Implants	Normal Battery Depletion	Device Upgrade	Device Malfunction ¹	Complication related to another system component or clinical condition ²	Other ³
ACCOLADE/PROONENT/ESSENTIO DR EL L121/L131/L221/L231/L321/L331	134000	148	3382	509	655	10203
ACCOLADE/PROONENT/ESSENTIO DR L101/L111/L201/L211/L301/L311	239000	1733	5555	1137	1164	30740
ACCOLADE/PROONENT/ESSENTIO SR L100/L110/L200/L210/L300/L310	45000	194	1405	334	222	9414
ADVANTIO/INGENIO/VITALIO EL DR J064/J067/K064/K067/K084/K087/ J174/J177/K174/K177/K184/K187/ J274/J277/K274/K277/K284/K287	11000	87	448	51	54	2885
ADVANTIO/INGENIO/VITALIO/FORMIO DR J064/J067/K064/K067/K084/K087/J174/J177/ K174/K177/K184/K187/J274/J277/K274/K277/ K284/K287/J278/J279/K278/K279/K288/K289	121000	12560	3789	290	559	37696
ADVANTIO/INGENIO/VITALIO SR J062/J065/K062/K065/K082/K085/ J172/J175/K172/K175/K182/K185/ J272/J275/K272/K275/K282/K285	27000	211	694	14	109	11575

Pacemaker/Model, continued...	U.S. Registered Implants	Normal Battery Depletion	Device Upgrade	Device Malfunction ¹	Complication related to another system component or clinical condition ²	Other ³
ALTRUA 60 SR S601	32000	3549	482	27	144	18579
ALTRUA 60 DR (Downsize) S603	90000	25571	1258	103	470	40795
ALTRUA 60 DR S602	22000	4260	479	43	162	10286
ALTRUA 60 DR EL S606	59000	7875	1418	76	357	24429
ALTRUA 40 SR S401	5000	497	53	2	17	3021
ALTRUA 40 DR (downsize) S403	14000	4009	166	5	63	6887
ALTRUA 40 DR S402	2000	289	32	2	7	963
ALTRUA 40 DR EL S404	5000	631	88	5	34	2542
ALTRUA 20 SR S201/S204	5000	240	44	2	31	3004
ALTRUA 20 DR EL S208	3000	213	49	6	11	1683

¹ Device malfunction consists of all U.S. confirmed malfunctions for a product/product grouping. These include confirmed malfunctions for advisory populations, as well as any other type of malfunction in which a device was returned and confirmed by laboratory analysis to have malfunctioned.. U.S. confirmed malfunction counts are reflected in U.S. survival probability.

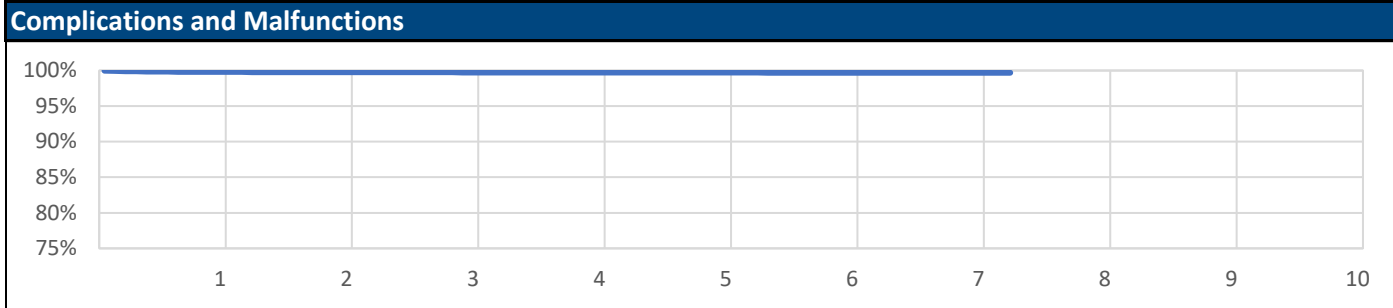
² System component and/or clinical condition complications may include, for example: infection, erosion, lead-to-PG interface.

³ Other consists of: patient death, elective replacement, general product dissatisfaction, other observation/complication, unspecified, or unknown.

ACUITY X4 Spiral L

Models: 4677/4678

US Summary			
US Registered Implants:	18,000	US Chronic Complications	39
US Approval Date:	February 2016	US Malfunctions:	-
US Estimated Active Implants:	15,000	Without Compromised Therapy:	-
		With Compromised Therapy:	-



US Survival Probability											
Year		1	2	3	4	5	6	7	8	9	10
Non-Advisory Population	Complications and Malfunctions	99.8%	99.8%	99.7%	99.7%	99.7%	99.7%	99.7%	99.7%	--	--
Registered Implants: 18000	Effective Sample Size	13590	10326	7559	4815	2546	845	254	206	--	--

@ 87 months

ACUITY X4 Spiral L

Models: 4677/4678

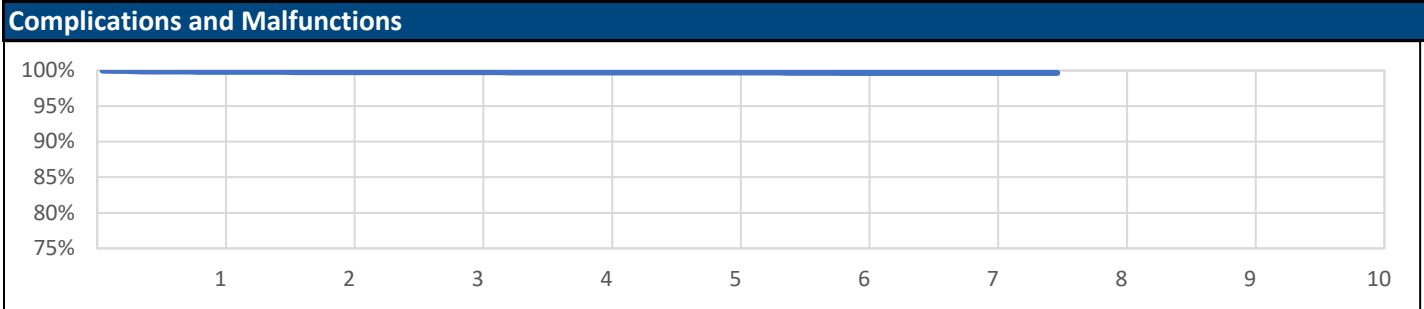
Worldwide Confirmed Malfunctions	1		
Worldwide Distribution	42,000		
	With Compromised Therapy	Without Compromised Therapy	Total
Other			
Non-patterned, other	0	1	1
Grand Total	0	1	1

References cited in table above [\(link\)](#)

ACUITY X4 Spiral S

Models: 4674/4675

US Summary			
US Registered Implants:	51,000	US Chronic Complications	108
US Approval Date:	February 2016	US Malfunctions:	1
US Estimated Active Implants:	45,000	Without Compromised Therapy:	1
		With Compromised Therapy:	-



US Survival Probability											
Year		1	2	3	4	5	6	7	8	9	10
Non-Advisory Population	Complications and Malfunctions	99.8%	99.8%	99.8%	99.7%	99.7%	99.7%	99.7%	99.7%	--	--
Registered Implants: 51000	Effective Sample Size	38793	28590	19830	12251	6311	1714	349	209	--	--

@ 90 months

ACUITY X4 Spiral S

Models: 4674/4675

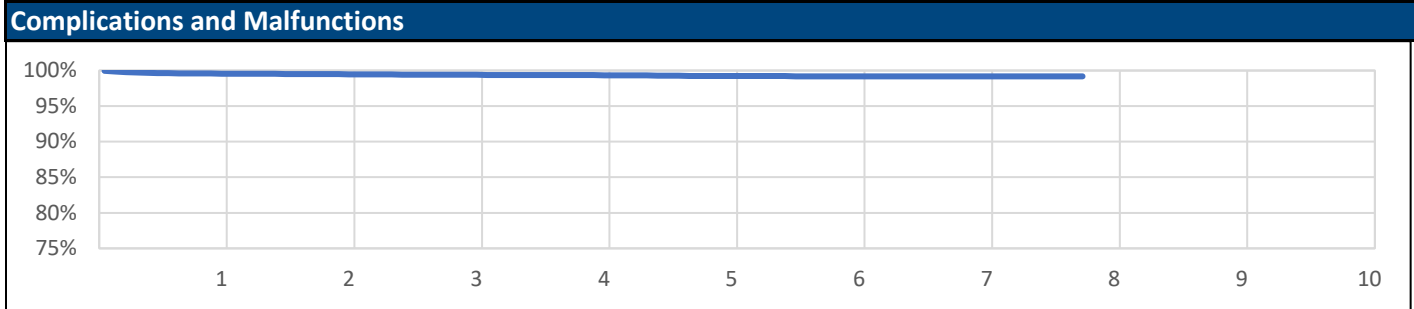
Worldwide Confirmed Malfunctions		1	
Worldwide Distribution		108,000	
	With Compromised Therapy	Without Compromised Therapy	Total
Other			
Non-patterned, other	0	1	1
Grand Total	0	1	1

References cited in table above [\(link\)](#)

ACUITY X4 Straight

Models: 4671/4672

US Summary			
US Registered Implants:	38,000	US Chronic Complications	193
US Approval Date:	February 2016	US Malfunctions:	1
US Estimated Active Implants:	32,000	Without Compromised Therapy:	1
		With Compromised Therapy:	-



US Survival Probability											
Year		1	2	3	4	5	6	7	8	9	10
Non-Advisory Population	Complications and Malfunctions	99.6%	99.5%	99.4%	99.3%	99.2%	99.2%	99.2%	99.2%	--	--
Registered Implants: 38000	Effective Sample Size	29268	21187	14529	8717	4457	1110	364	208	--	--

@ 93 months

ACUITY X4 Straight

Models: 4671/4672

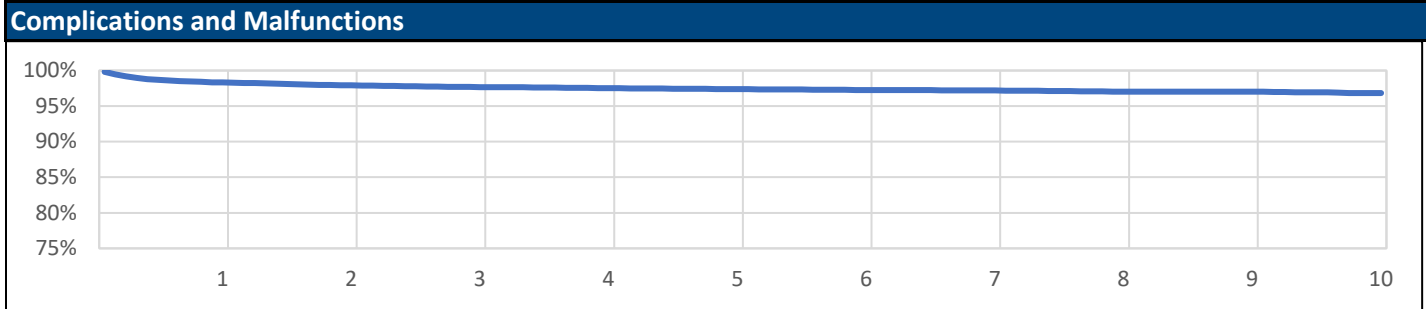
Worldwide Confirmed Malfunctions		1		
Worldwide Distribution		87,000		
	With Compromised Therapy	Without Compromised Therapy	Total	
Other				
Non-patterned, other	0	1	1	
Grand Total	0	1	1	

References cited in table above [\(link\)](#)

ACUITY Spiral

Models: 4591/4592/4593

US Summary			
US Registered Implants:	24,000	US Chronic Complications	576
US Approval Date:	May 2008	US Malfunctions:	9
US Estimated Active Implants:	12,000	Without Compromised Therapy:	5
		With Compromised Therapy:	4



US Survival Probability											
Year		1	2	3	4	5	6	7	8	9	10
Non-Advisory Population	Complications and Malfunctions	98.3%	97.9%	97.7%	97.5%	97.4%	97.3%	97.2%	97.0%	97.0%	96.8%
Registered Implants: 24000	Effective Sample Size	20004	17735	15764	13952	12327	10813	9193	7354	5488	3881

ACUITY Spiral

Models: 4591/4592/4593

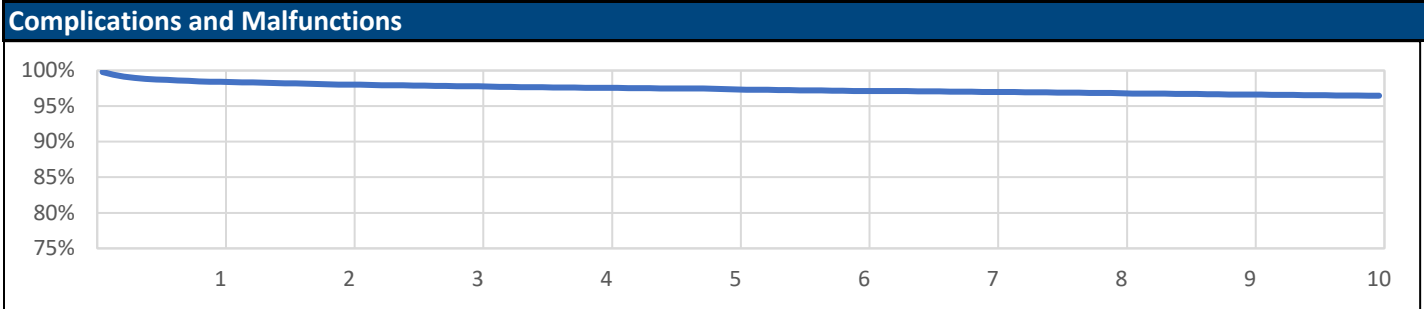
Worldwide Confirmed Malfunctions	9		
Worldwide Distribution	46,000		
	With Compromised Therapy	Without Compromised Therapy	Total
Other			
Non-patterned, other	4	5	9
Grand Total	4	5	9

References cited in table above [\(link\)](#)

ACUITY Steerable

Models: 4554/4555/4556

US Summary			
US Registered Implants:	29,000	US Chronic Complications	741
US Approval Date:	May 2008	US Malfunctions:	33
US Estimated Active Implants:	12,000	Without Compromised Therapy:	12
		With Compromised Therapy:	21



US Survival Probability											
Year		1	2	3	4	5	6	7	8	9	10
Non-Advisory Population	Complications and Malfunctions	98.4%	98.0%	97.8%	97.6%	97.3%	97.1%	97.0%	96.8%	96.6%	96.5%
Registered Implants: 29000	Effective Sample Size	24534	21931	19656	17634	15820	14123	12342	10347	8107	6266

ACUITY Steerable

Models: 4554/4555/4556

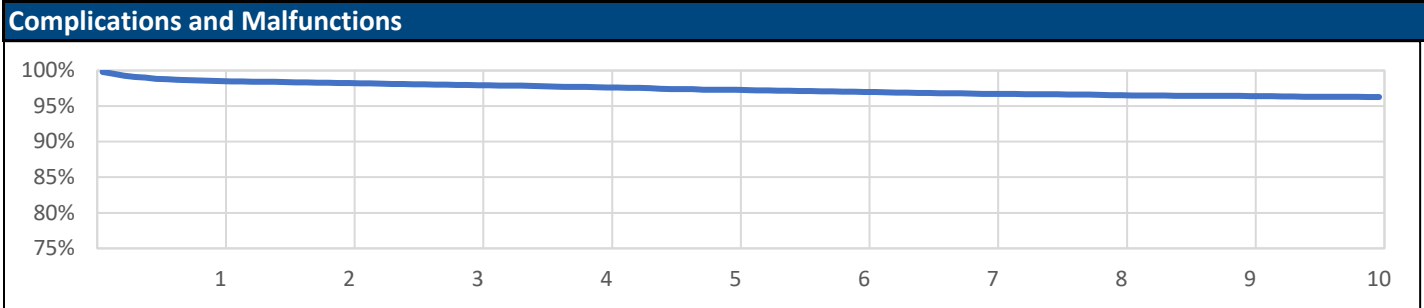
Worldwide Confirmed Malfunctions		57	
Worldwide Distribution		65,000	
	With Compromised Therapy	Without Compromised Therapy	Total
Conductor			
Extracardiac fracture (34)	28	8	36
Other			
Non-patterned, other	10	11	21
Grand Total	38	19	57

References cited in table above ([link](#))

EASYTRAK 3

Models: 4522/4524/4525/4527/4548/4549/4550

US Summary			
US Registered Implants:	22,000	US Chronic Complications	565
US Approval Date:	August 2004	US Malfunctions:	32
US Estimated Active Implants:	7,000	Without Compromised Therapy:	9
		With Compromised Therapy:	23



US Survival Probability											
Year		1	2	3	4	5	6	7	8	9	10
Non-Advisory Population	Complications and Malfunctions	98.5%	98.2%	97.9%	97.6%	97.3%	97.0%	96.7%	96.5%	96.4%	96.3%
Registered Implants: 22000	Effective Sample Size	18417	16445	14724	13164	11750	10470	9198	7837	6376	5069

EASYTRAK 3

Models: 4522/4524/4525/4527/4548/4549/4550

Worldwide Confirmed Malfunctions	52
Worldwide Distribution	43,000

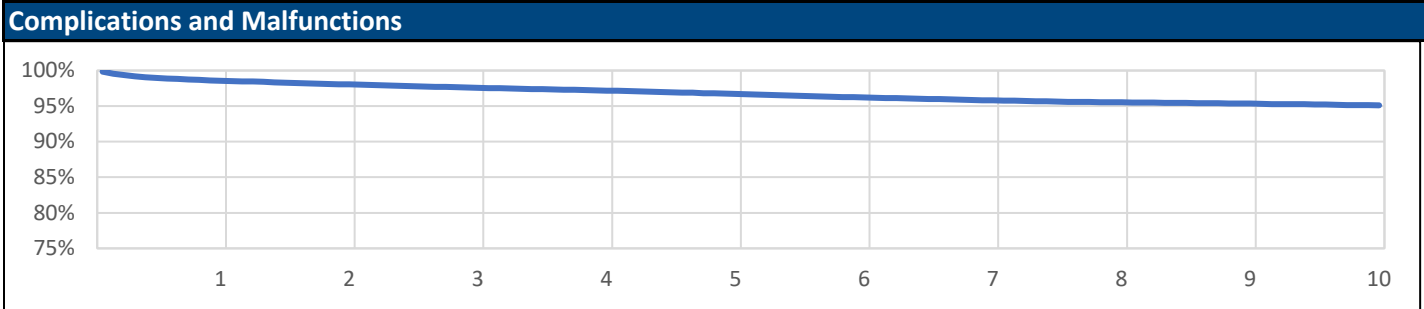
	With Compromised Therapy	Without Compromised Therapy	Total
Conductor			
Extracardiac fracture (34)	28	6	34
Other			
Non-patterned, other	7	11	18
Grand Total	35	17	52

References cited in table above ([link](#))

EASYTRAK 2

Models: 4515/4517/4518/4520/4542/4543/4544

US Summary			
US Registered Implants:	97,000	US Chronic Complications	2,960
US Approval Date:	August 2004	US Malfunctions:	405
US Estimated Active Implants:	32,000	Without Compromised Therapy:	146
		With Compromised Therapy:	259



US Survival Probability											
Year		1	2	3	4	5	6	7	8	9	10
Non-Advisory Population	Complications and Malfunctions	98.6%	98.0%	97.6%	97.2%	96.7%	96.2%	95.8%	95.5%	95.4%	95.1%
Registered Implants: 97000	Effective Sample Size	82253	73303	65443	58472	52125	46236	40330	34241	28161	22874

EASYTRAK 2

Models: 4515/4517/4518/4520/4542/4543/4544

Worldwide Confirmed Malfunctions	548
Worldwide Distribution	180,000

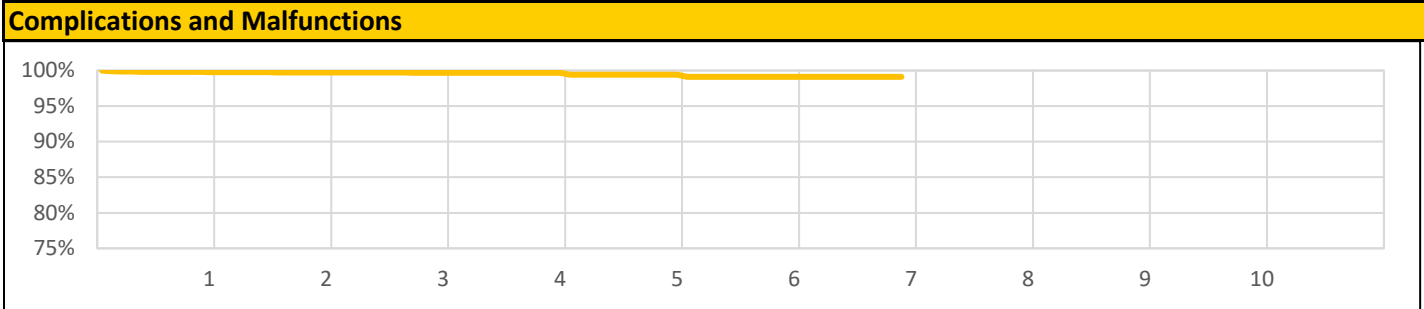
	With Compromised Therapy	Without Compromised Therapy	Total
Conductor			
Conductor fracture (25)	329	149	478
Other			
Non-patterned, other	39	31	70
Grand Total	368	180	548

References cited in table above [\(link\)](#)

ENDOTAK RELIANCE 4-FRONT Dual Coil Active Fixation

Models: 0653/0658/0675/0676/0695/0696

US Summary			
US Registered Implants:	9,000	US Chronic Complications	22
US Approval Date:	May 2018	US Malfunctions:	-
US Estimated Active Implants:	8,000	Without Compromised Therapy:	-
		With Compromised Therapy:	-



US Survival Probability											
Year		1	2	3	4	5	6	7	8	9	10
Non-Advisory Population	Complications and Malfunctions	99.8%	99.7%	99.7%	99.7%	99.4%	99.1%	99.1%	--	--	--
Registered Implants: 9000	Effective Sample Size	5604	3023	990	379	339	302	213	--	--	--

@ 83 months

ENDOTAK RELIANCE 4-FRONT Dual Coil Active Fixation

Models: 0653/0658/0675/0676/0695/0696

Worldwide Confirmed Malfunctions	5		
Worldwide Distribution	27,000		
	With Compromised Therapy	Without Compromised Therapy	Total
Other			
Non-patterned, other	5	0	5
Grand Total	5	0	5

References cited in table above [\(link\)](#)

ENDOTAK RELIANCE 4-FRONT Dual Coil Passive Fixation

Models: 0636/0651/0655/0665/0685/0686

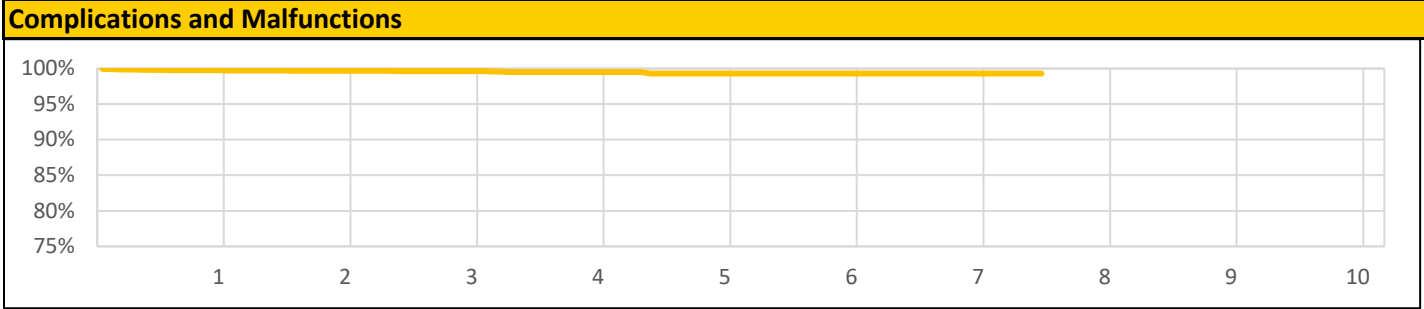
Worldwide Confirmed Malfunctions	0		
Worldwide Distribution	1,000		
	With Compromised Therapy	Without Compromised Therapy	Total
Other			
Non-patterned, other	0	0	0
Grand Total	0	0	0

References cited in table above [\(link\)](#)

ENDOTAK RELIANCE 4-FRONT Single Coil Active Fixation

Models: 0657/0672/0673/0692/0693

US Summary			
US Registered Implants:	58,000	US Chronic Complications	148
US Approval Date:	May 2018	US Malfunctions:	9
US Estimated Active Implants:	54,000	Without Compromised Therapy:	-
		With Compromised Therapy:	9



US Survival Probability											
Year		1	2	3	4	5	6	7	8	9	10
Non-Advisory Population	Complications and Malfunctions	99.7%	99.7%	99.6%	99.5%	99.3%	99.3%	99.3%	99.3%	--	--
	Effective Sample Size	36534	18515	5504	928	830	744	447	234	--	--

@ 90 months

Registered Implants: 58000

ENDOTAK RELIANCE 4-FRONT Single Coil Active Fixation

Models: 0652/ 0657/0672/0673/0692/0693

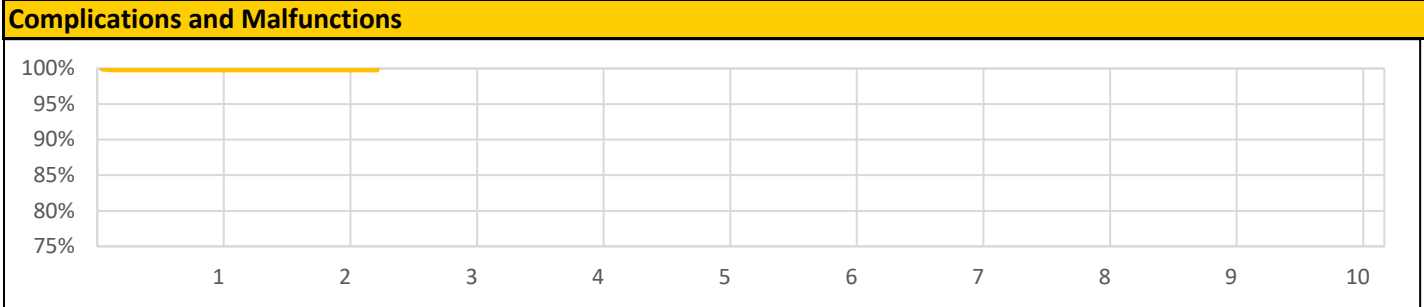
Worldwide Confirmed Malfunctions		65	
Worldwide Distribution		191,000	
	With Compromised Therapy	Without Compromised Therapy	Total
Conductor			
Conductor cable fracture (38)	24	0	24
Other			
Non-patterned, other	38	3	41
Grand Total	62	3	65

References cited in table above [\(link\)](#)

ENDOTAK RELIANCE 4-FRONT Single Coil Passive Fixation

Models: 0650/0654/0662/0663/0682/0683

US Summary			
US Registered Implants:	1,000	US Chronic Complications	1
US Approval Date:	May 2018	US Malfunctions:	-
US Estimated Active Implants:	1,000	Without Compromised Therapy:	-
		With Compromised Therapy:	-



US Survival Probability											
Year		1	2	3	4	5	6	7	8	9	10
Non-Advisory Population	Complications and Malfunctions	99.9%	99.9%	99.9%	--	--	--	--	--	--	--
	Effective Sample Size	539	258	204	--	--	--	--	--	--	--

Registered Implants: 1000

@ 27 months

ENDOTAK RELIANCE 4-FRONT Single Coil Passive Fixation

Models: 0650/0654/0662/0663/0682/0683

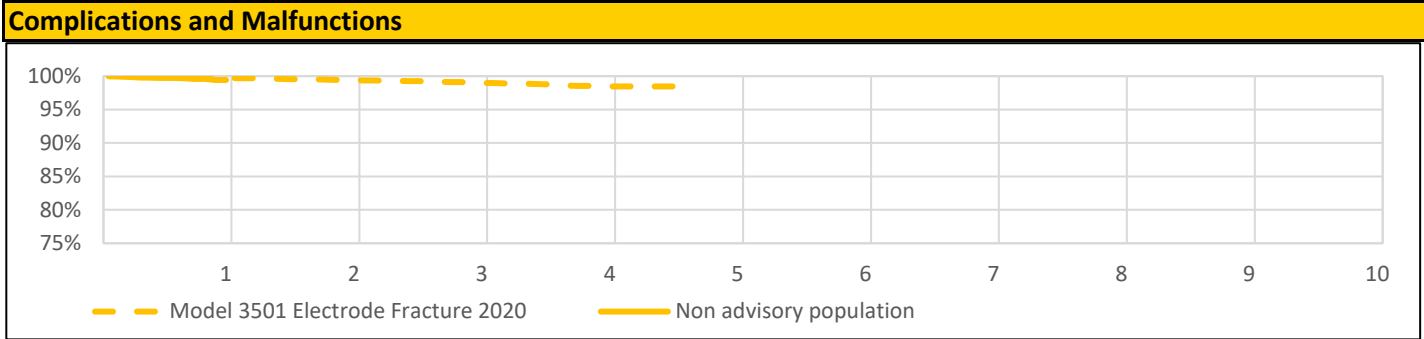
Worldwide Confirmed Malfunctions	1		
Worldwide Distribution	7,000		
	With Compromised Therapy	Without Compromised Therapy	Total
Conductor			
Conductor cable fracture (38)	1	0	1
Grand Total	1	0	1

References cited in table above [\(link\)](#)

EMBLEM S-ICD Electrode

Models: 3501

US Summary			
US Registered Implants:	26,000	US Chronic Complications	117
US Approval Date:	September 2017	US Malfunctions:	48
US Estimated Active Implants:	23,000	Without Compromised Therapy:	1
		With Compromised Therapy:	47



US Survival Probability											
Year		1	2	3	4	5	6	7	8	9	10
Non advisory population	Complications and Malfunctions	99.4%	--	--	--	--	--	--	--	--	--
Registered Implants: 4000	Effective Sample Size	260	--	--	--	--	--	--	--	--	--

@ 12 months

*Devices subject to an advisory. Refer to the Advisories for more details. Devices may be part of more than one advisory.

EMBLEM S-ICD Electrode

Models: 3501

US Survival Probability (cont.)											
Year		1	2	3	4	5	6	7	8	9	10
Model 3501 Electrode Fracture 2020	Complications and Malfunctions	99.7%	99.4%	99.0%	98.5%	98.5%	--	--	--	--	--
Registered Implants: 21000	Effective Sample Size	17551	11634	6345	1800	266	--	--	--	--	--

@ 54 months

EMBLEM S-ICD Electrode

Models: 3501

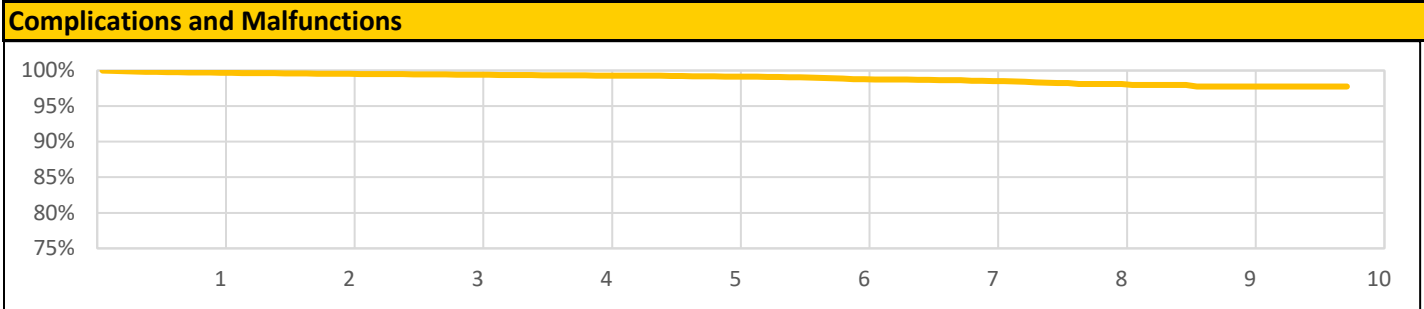
Worldwide Confirmed Malfunctions		125		
Worldwide Distribution		64,000		
	With Compromised Therapy	Without Compromised Therapy	Total	
Conductor				
Model 3501 electrode fracture 2020 (42)	59	1	60	
Electrode conductor fracture in or near the pocket (44)	59	1	60	
Other				
Non-patterned, other	5	0	5	
Grand Total	123	2	125	

References cited in table above [\(link\)](#)

EMBLEM/Q-TRAK S-ICD Electrode

Models: 3010/3401

US Summary			
US Registered Implants:	24,000	US Chronic Complications	189
US Approval Date:	September 2012	US Malfunctions:	21
US Estimated Active Implants:	18,000	Without Compromised Therapy:	2
		With Compromised Therapy:	19



US Survival Probability											
Year		1	2	3	4	5	6	7	8	9	10
Non-Advisory Population	Complications and Malfunctions	99.7%	99.5%	99.4%	99.3%	99.1%	98.8%	98.5%	98.1%	97.7%	97.7%
Registered Implants: 24000	Effective Sample Size	20997	18669	16610	14612	10762	6391	2968	1011	317	214

@ 117 months

EMBLEM/Q-TRAK S-ICD Electrode

Models: 3010/3401

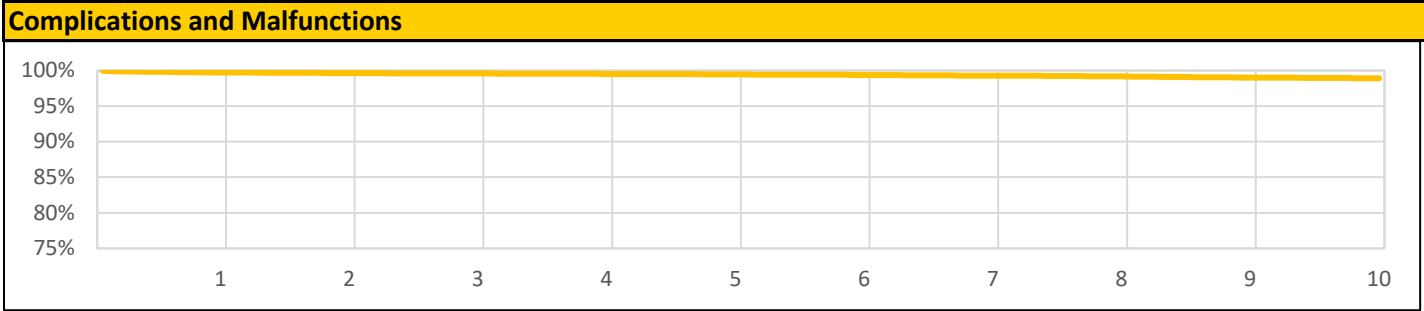
Worldwide Confirmed Malfunctions		63		
Worldwide Distribution		43,000		
	With Compromised Therapy	Without Compromised Therapy	Total	
Conductor				
Electrode conductor fracture in or near the pocket (44)	27	3	30	
Crimp/Weld/Bond				
Weld fracture (37)	3	0	3	
Other				
Non-patterned, other	23	7	30	
Grand Total	53	10	63	

References cited in table above [\(link\)](#)

ENDOTAK RELIANCE 4-Site Dual Coil, Active Fixation

Models: 0275/0276/0295/0296

US Summary			
US Registered Implants:	77,000	US Chronic Complications	402
US Approval Date:	November 2010	US Malfunctions:	31
US Estimated Active Implants:	57,000	Without Compromised Therapy:	6
		With Compromised Therapy:	25



US Survival Probability											
Year		1	2	3	4	5	6	7	8	9	10
Non-Advisory Population	Complications and Malfunctions	99.7%	99.6%	99.6%	99.5%	99.5%	99.4%	99.3%	99.2%	99.0%	98.9%
Registered Implants: 77000	Effective Sample Size	67821	60070	52450	43669	35245	27655	20741	13846	7466	1814

ENDOTAK RELIANCE 4-Site Dual Coil, Active Fixation

Models: 0275/0276/0295/0296

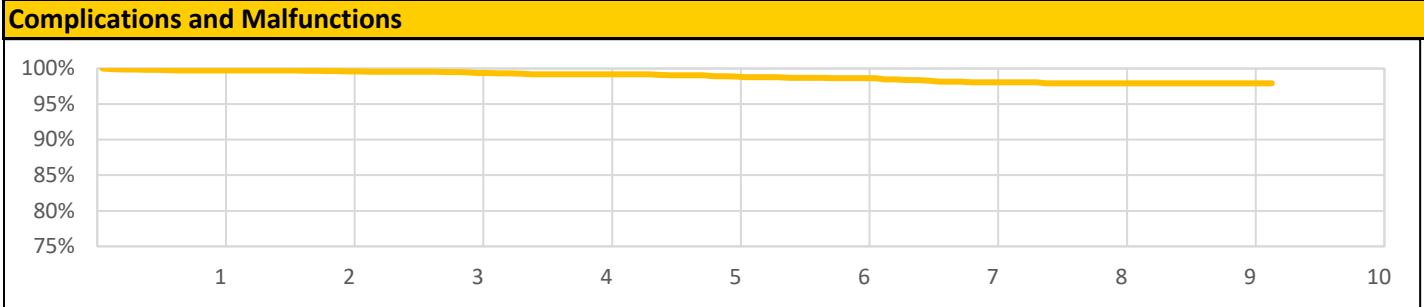
Worldwide Confirmed Malfunctions		67	
Worldwide Distribution		125,000	
	With Compromised Therapy	Without Compromised Therapy	Total
Conductor			
Conductor fracture (24)	3	0	3
Other			
Non-patterned, other	51	13	64
Grand Total	54	13	67

References cited in table above [\(link\)](#)

ENDOTAK RELIANCE 4-Site Dual Coil, Passive Fixation

Models: 0265/0266/0285/0286

US Summary			
US Registered Implants:	3,000	US Chronic Complications	35
US Approval Date:	Novemeber 2010	US Malfunctions:	2
US Estimated Active Implants:	3,000	Without Compromised Therapy:	2
		With Compromised Therapy:	-



US Survival Probability											
Year		1	2	3	4	5	6	7	8	9	10
Non-Advisory Population	Complications and Malfunctions	99.7%	99.6%	99.4%	99.2%	98.9%	98.6%	98.1%	97.9%	97.9%	97.9%
Registered Implants: 3000	Effective Sample Size	2955	2606	2243	1868	1497	1163	862	523	248	214

@ 110 month

ENDOTAK RELIANCE 4-Site Dual Coil, Passive Fixation

Models: 0265/0266/0285/0286

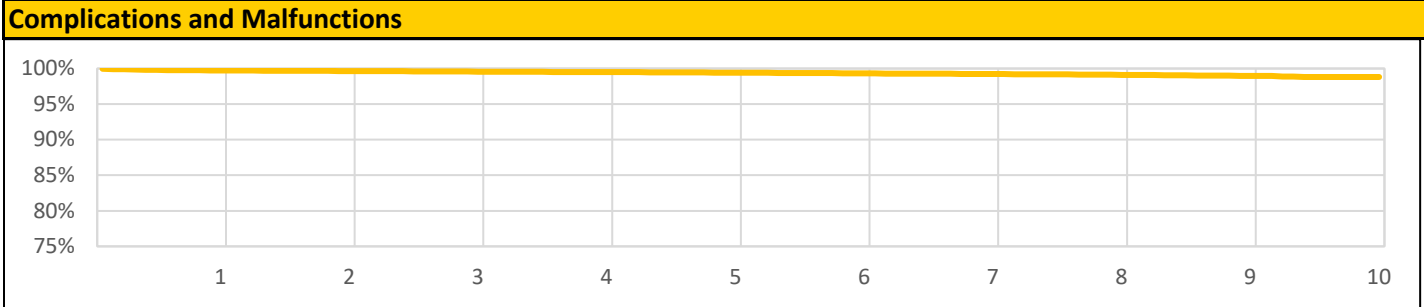
Worldwide Confirmed Malfunctions	3		
Worldwide Distribution	11,000		
	With Compromised Therapy	Without Compromised Therapy	Total
Other			
Non-patterned, other	0	3	3
Grand Total	0	3	3

References cited in table above [\(link\)](#)

ENDOTAK RELIANCE 4-Site Single Coil, Active Fixation

Models: 0272/0273/0292/0293

US Summary			
US Registered Implants:	119,000	US Chronic Complications	591
US Approval Date:	November 2010	US Malfunctions:	45
US Estimated Active Implants:	97,000	Without Compromised Therapy:	10
		With Compromised Therapy:	35



US Survival Probability											
Year		1	2	3	4	5	6	7	8	9	10
Non-Advisory Population	Complications and Malfunctions	99.7%	99.7%	99.6%	99.5%	99.4%	99.3%	99.2%	99.1%	99.0%	98.8%
Registered Implants: 119000	Effective Sample Size	105304	94015	82512	63324	43601	29240	18048	9606	4141	1022

ENDOTAK RELIANCE 4-Site Single Coil, Active Fixation

Models: 0272/0273/0292/0293

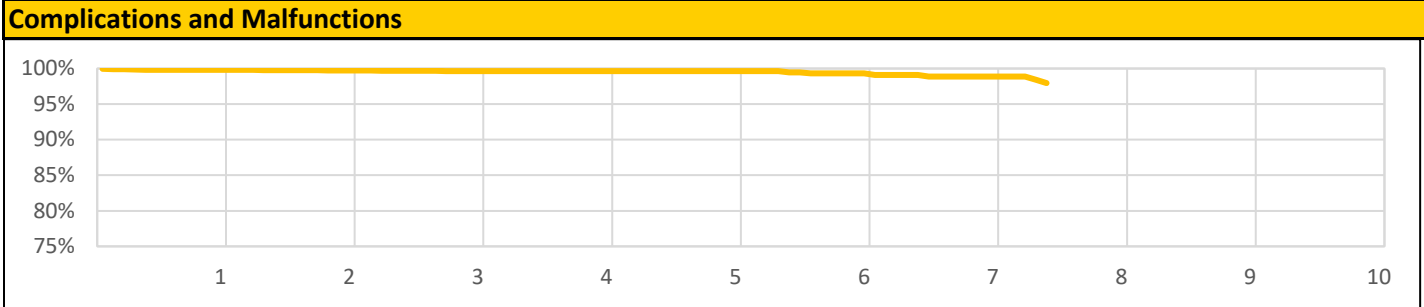
Worldwide Confirmed Malfunctions	89		
Worldwide Distribution	212,000		
	With Compromised Therapy	Without Compromised Therapy	Total
Conductor			
Conductor fracture (24)	9	0	9
Other			
Non-patterned, other	64	16	80
Grand Total	73	16	89

References cited in table above [\(link\)](#)

ENDOTAK RELIANCE 4-Site Single Coil, Passive Fixation

Models: 0262/0263/0282/0283

US Summary			
US Registered Implants:	18,000	US Chronic Complications	48
US Approval Date:	November 2010	US Malfunctions:	4
US Estimated Active Implants:	17,000	Without Compromised Therapy:	-
		With Compromised Therapy:	4



US Survival Probability											
Year		1	2	3	4	5	6	7	8	9	10
Non-Advisory Population	Complications and Malfunctions	99.8%	99.7%	99.6%	99.6%	99.6%	99.3%	98.9%	98.0%	--	--
Registered Implants: 18000	Effective Sample Size	12308	7079	2961	1227	821	524	295	213	--	--

@ 89 months

ENDOTAK RELIANCE 4-Site Single Coil, Passive Fixation

Models: 0262/0263/0282/0283

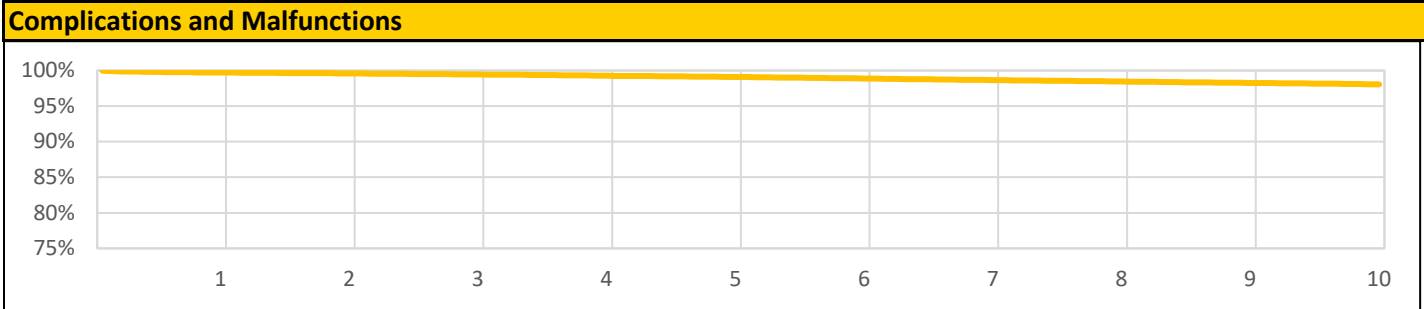
Worldwide Confirmed Malfunctions	6		
Worldwide Distribution	6,000		
	With Compromised Therapy	Without Compromised Therapy	Total
Other			
Non-patterned, other	5	1	6
Grand Total	5	1	6

References cited in table above [\(link\)](#)

ENDOTAK RELIANCE Dual Coil, Active Fixation

Models: 0157/0158/0159/0164/0165/0166/0167/0184/0185/0186/0187

US Summary			
US Registered Implants:	287,000	US Chronic Complications	3,646
US Approval Date:	July 2002	US Malfunctions:	388
US Estimated Active Implants:	106,000	Without Compromised Therapy:	123
		With Compromised Therapy:	265



US Survival Probability											
Year		1	2	3	4	5	6	7	8	9	10
Non-Advisory Population	Complications and Malfunctions	99.7%	99.6%	99.4%	99.3%	99.1%	98.9%	98.7%	98.5%	98.3%	98.1%
Registered Implants: 287000	Effective Sample Size	252857	226968	203846	182911	164027	146841	131150	116842	103581	90986

ENDOTAK RELIANCE Dual Coil, Active Fixation

Models: 0157/0158/0159/0164/0165/0166/0167/0184/0185/0186/0187

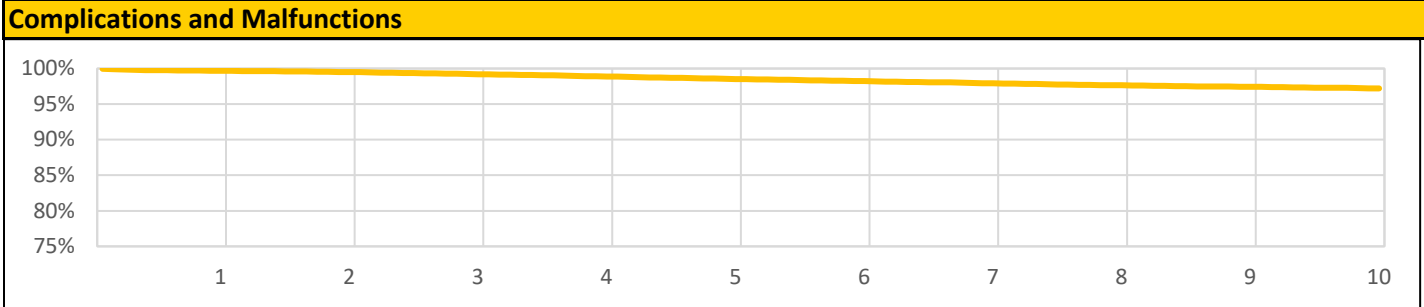
Worldwide Confirmed Malfunctions		588		
Worldwide Distribution		382,000		
	With Compromised Therapy	Without Compromised Therapy	Total	
Conductor				
Conductor fracture (24)	106	0	106	
Crimp/Weld/Bond				
Seal rings (5)	2	2	4	
Other				
Non-patterned, other	274	204	478	
Grand Total	382	206	588	

References cited in table above [\(link\)](#)

ENDOTAK RELIANCE Dual Coil, Passive Fixation

Models: 0147/0148/0149/0174/0175/0176/0177

US Summary			
US Registered Implants:	47,000	US Chronic Complications	902
US Approval Date:	October 2000	US Malfunctions:	62
US Estimated Active Implants:	13,000	Without Compromised Therapy:	14
		With Compromised Therapy:	48



US Survival Probability											
Year		1	2	3	4	5	6	7	8	9	10
Non-Advisory Population	Complications and Malfunctions	99.7%	99.5%	99.2%	98.9%	98.5%	98.2%	97.9%	97.7%	97.4%	97.2%
Registered Implants: 47000	Effective Sample Size	40554	36391	32651	29242	26167	23411	20920	18672	16624	14634

ENDOTAK RELIANCE Dual Coil, Passive Fixation

Models: 0147/0148/0149/0174/0175/0176/0177

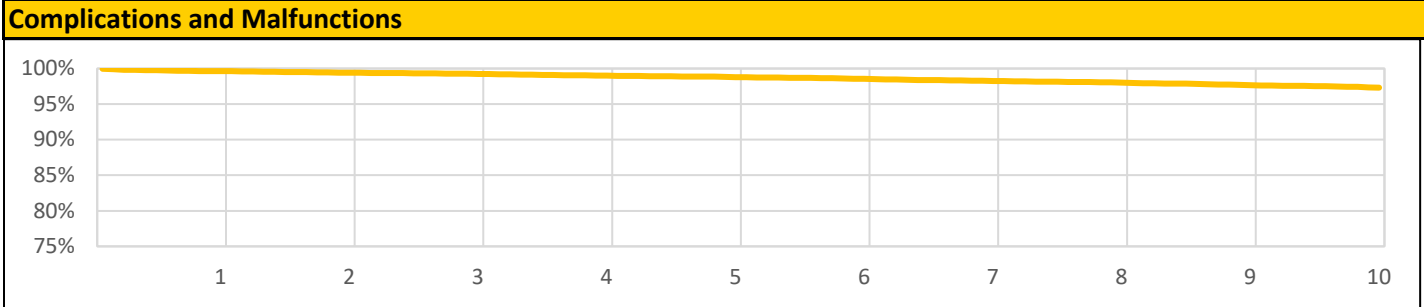
Worldwide Confirmed Malfunctions		167		
Worldwide Distribution		109,000		
	With Compromised Therapy	Without Compromised Therapy	Total	
Conductor				
Conductor fracture (24)	20	0	20	
Crimp/Weld/Bond				
Conductor connection (36)	3	0	3	
Other				
Non-patterned, other	88	55	143	
Manufacturing material (6)	1	0	1	
Grand Total	112	55	167	

References cited in table above ([link](#))

ENDOTAK RELIANCE Single Coil, Active Fixation

Models: 0137/0138/0160/0161/0162/0180/0181/0182

US Summary			
US Registered Implants:	34,000	US Chronic Complications	475
US Approval Date:	October 2000	US Malfunctions:	87
US Estimated Active Implants:	20,000	Without Compromised Therapy:	23
		With Compromised Therapy:	64



US Survival Probability											
Year		1	2	3	4	5	6	7	8	9	10
Non-Advisory Population	Complications and Malfunctions	99.6%	99.4%	99.2%	99.0%	98.8%	98.5%	98.3%	98.0%	97.7%	97.3%
Registered Implants: 34000	Effective Sample Size	29529	26132	23169	20446	17996	15735	13400	11040	8847	6911

ENDOTAK RELIANCE Single Coil, Active Fixation

Models: 0137/0138/0160/0161/0162/0180/0181/0182

Worldwide Confirmed Malfunctions	210
Worldwide Distribution	78,000

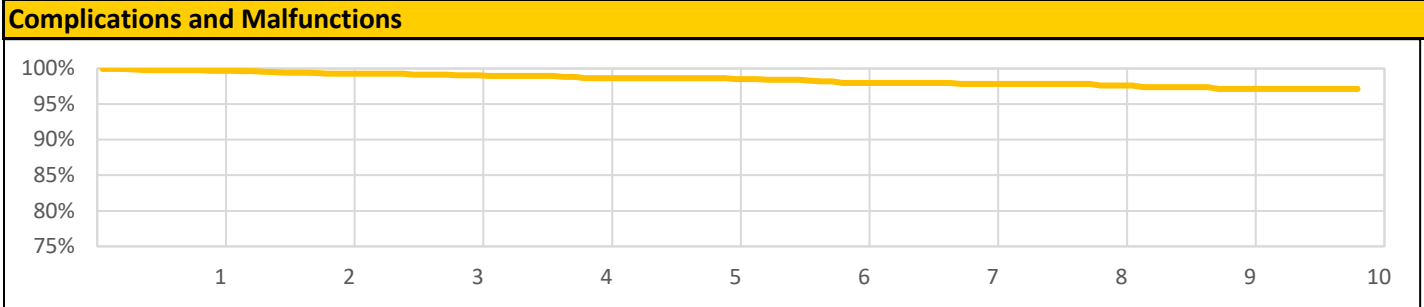
	With Compromised Therapy	Without Compromised Therapy	Total
Conductor			
Conductor fracture (24)	62	1	63
Other			
Non-patterned, other	91	56	147
Grand Total	153	57	210

References cited in table above [\(link\)](#)

ENDOTAK RELIANCE Single Coil, Passive Fixation

Models: 0127/0128/0170/0171/0172/0173

US Summary			
US Registered Implants:	2,000	US Chronic Complications	34
US Approval Date:	October 2000	US Malfunctions:	4
US Estimated Active Implants:	1,000	Without Compromised Therapy:	1
		With Compromised Therapy:	3



US Survival Probability											
Year		1	2	3	4	5	6	7	8	9	10
Non-Advisory Population	Complications and Malfunctions	99.7%	99.3%	99.1%	98.6%	98.5%	98.0%	97.8%	97.6%	97.1%	97.1%
Registered Implants: 2000	Effective Sample Size	1555	1385	1228	1085	955	807	634	472	332	210

@ 118 month

ENDOTAK RELIANCE Single Coil, Passive Fixation

Models: 0127/0128/0170/0171/0172/0173

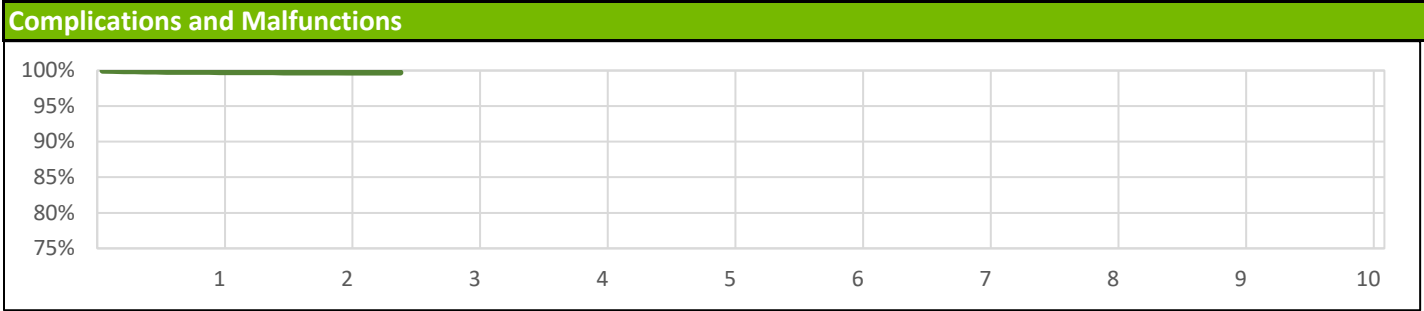
Worldwide Confirmed Malfunctions	20		
Worldwide Distribution	8,000		
	With Compromised Therapy	Without Compromised Therapy	Total
Conductor			
Conductor fracture (24)	3	0	3
Other			
Non-patterned, other	9	8	17
Grand Total	12	8	20

References cited in table above [\(link\)](#)

INGEVITY+ Positive Fixation

Models: 7840/7841/7842

US Summary			
US Registered Implants:	198,000	US Chronic Complications	332
US Approval Date:	December 2019	US Malfunctions:	33
US Estimated Active Implants:	189,000	Without Compromised Therapy:	19
		With Compromised Therapy:	14



US Survival Probability		Year	1	2	3	4	5	6	7	8	9	10
Non-Advisory Population	Complications and Malfunctions		99.8%	99.7%	99.7%	--	--	--	--	--	--	--
Registered Implants: 198000	Effective Sample Size		94065	12546	446	--	--	--	--	--	--	--

@ 29 months

INGEVITY+ Positive Fixation

Models: 7840/7841/7842

Worldwide Confirmed Malfunctions	33
Worldwide Distribution	258,000

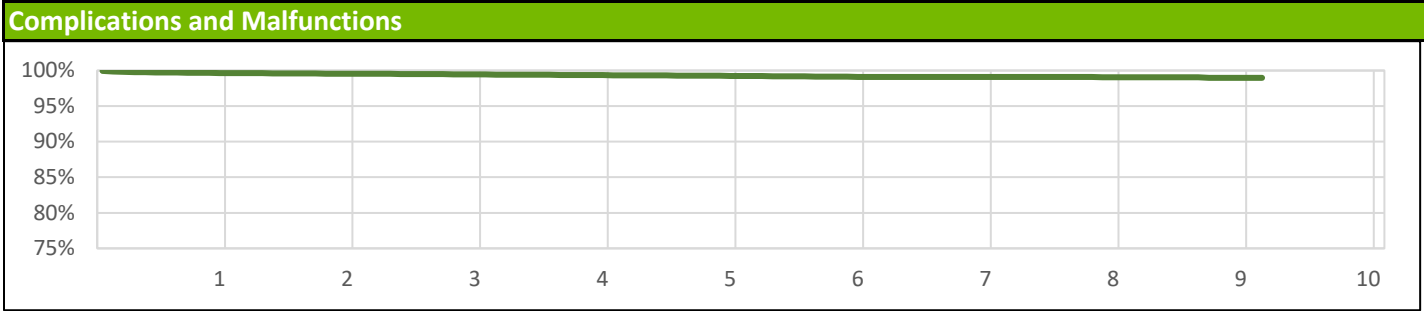
	With Compromised Therapy	Without Compromised Therapy	Total
Conductor			
Extracardiac fracture (41)	3	4	7
Other			
Non-patterned, other	11	15	26
Grand Total	14	19	33

References cited in table above ([link](#))

INGEVITY Positive Fixation

Models: 7640/7641/7642/7740/7741/7742

US Summary			
US Registered Implants:	365,000	US Chronic Complications	1,774
US Approval Date:	April 2016	US Malfunctions:	276
US Estimated Active Implants:	309,000	Without Compromised Therapy:	153
		With Compromised Therapy:	123



US Survival Probability											
Year		1	2	3	4	5	6	7	8	9	10
Non-Advisory Population	Complications and Malfunctions	99.7%	99.6%	99.5%	99.4%	99.2%	99.1%	99.1%	99.0%	99.0%	99.0%
Registered Implants: 365000	Effective Sample Size	321890	286542	206209	125661	58993	6391	1929	1723	1464	1443

@ 110 months

INGEVITY Positive Fixation

Models: 7640/7641/7642/7740/7741/7742

Worldwide Confirmed Malfunctions	417
Worldwide Distribution	1,062,000

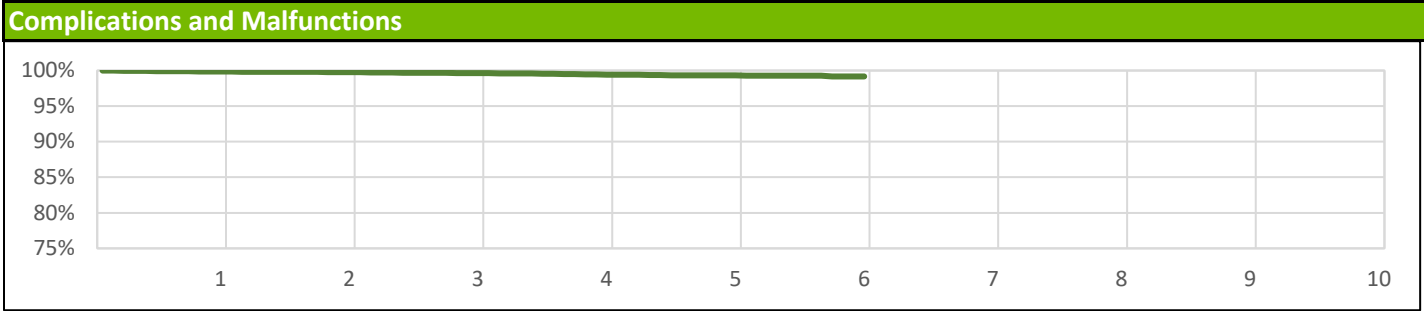
	With Compromised Therapy	Without Compromised Therapy	Total
Conductor			
Inner conductor break (39)	9	7	16
Extracardiac fracture (41)	100	125	225
Other			
Insulation (43)	2	17	19
Non-patterned, other	72	85	157
Grand Total	183	234	417

References cited in table above ([link](#))

INGEVITY Passive Fixation

Models: 7631/7632/7731/7732

US Summary			
US Registered Implants:	25,000	US Chronic Complications	75
US Approval Date:	April 2016	US Malfunctions:	13
US Estimated Active Implants:	22,000	Without Compromised Therapy:	2
		With Compromised Therapy:	11



US Survival Probability											
Year		1	2	3	4	5	6	7	8	9	10
Non-Advisory Population	Complications and Malfunctions	99.8%	99.8%	99.6%	99.4%	99.3%	99.2%	--	--	--	--
Registered Implants: 25000	Effective Sample Size	19609	14635	10226	6352	3032	291	--	--	--	--

@ 72 months

INGEVITY Passive Fixation

Models: 7631/7632/7731/7732

Worldwide Confirmed Malfunctions	18
Worldwide Distribution	116,000

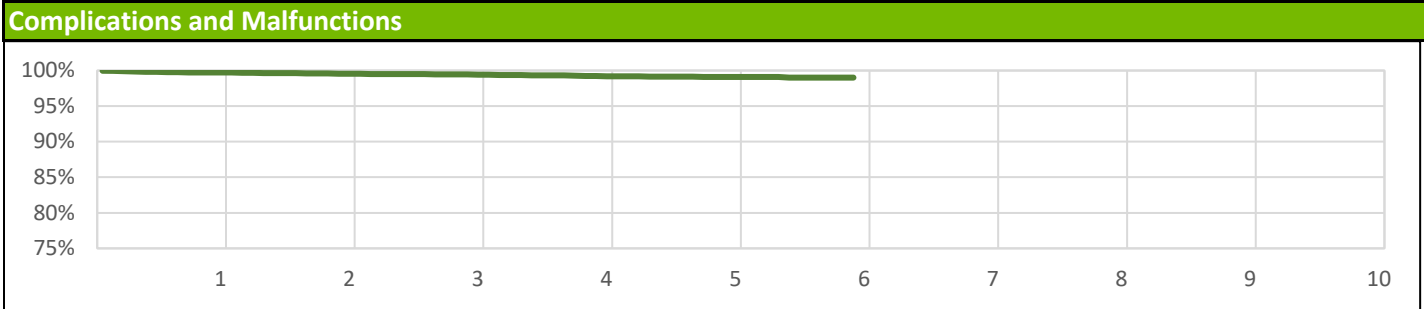
	With Compromised Therapy	Without Compromised Therapy	Total
Conductor			
Extracardiac fracture (41)	6	0	6
Other			
Insulation (43)	0	1	1
Non-patterned, other	10	1	11
Grand Total	16	2	18

References cited in table above ([link](#))

INGEVITY Atrial J Passive Fixation

Models: 7635/7636/7735/7736

US Summary			
US Registered Implants:	15,000	US Chronic Complications	68
US Approval Date:	April 2016	US Malfunctions:	8
US Estimated Active Implants:	13,000	Without Compromised Therapy:	8
		With Compromised Therapy:	-



US Survival Probability											
Year		1	2	3	4	5	6	7	8	9	10
Non-Advisory Population	Complications and Malfunctions	99.7%	99.6%	99.4%	99.2%	99.1%	99.0%	--	--	--	--
Registered Implants: 15000	Effective Sample Size	11307	8420	5896	3604	1637	275	--	--	--	--

@ 71 months

INGEVITY Atrial J Passive Fixation

Models: 7635/7636/7735/7736

Worldwide Confirmed Malfunctions	15
Worldwide Distribution	104,000

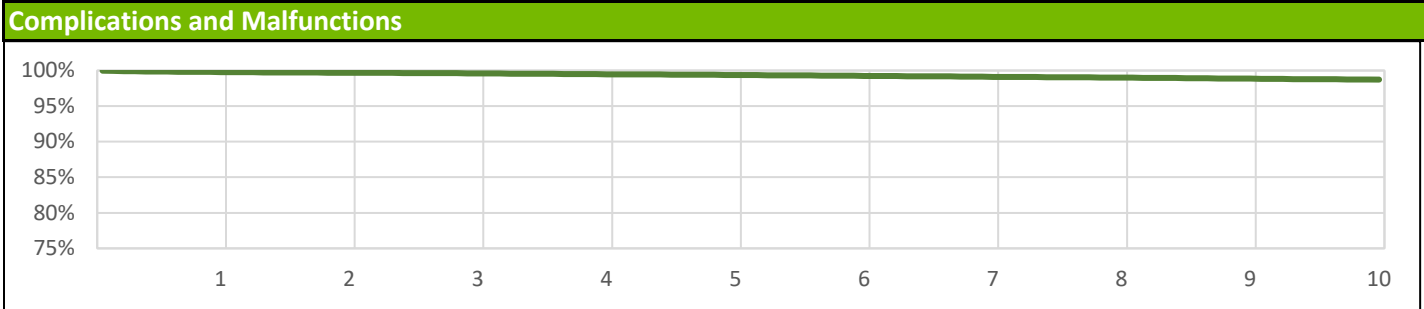
	With Compromised Therapy	Without Compromised Therapy	Total
Conductor			
Extracardiac fracture (41)	0	8	8
Crimp/Weld/Bond			
Weld (40)	0	1	1
Other			
Non-patterned, other	0	6	6
Grand Total	0	15	15

References cited in table above ([link](#))

FINELINE II EZ/FINELINE II Sterox EZ Positive Fixation (Polyurethane)

Models: 4463/4464/4465/4469/4470/4471

US Summary			
US Registered Implants:	510,000	US Chronic Complications	3,793
US Approval Date:	January 2000	US Malfunctions:	169
US Estimated Active Implants:	253,000	Without Compromised Therapy:	51
		With Compromised Therapy:	118



US Survival Probability											
Year		1	2	3	4	5	6	7	8	9	10
Non-Advisory Population	Complications and Malfunctions	99.8%	99.7%	99.6%	99.5%	99.4%	99.2%	99.1%	99.0%	98.9%	98.7%
Registered Implants: 510000	Effective Sample Size	442726	390461	342650	298949	260274	226602	190855	157895	128661	103391

FINELINE II EZ/FINELINE II Sterox EZ Positive Fixation (Polyurethane)

Models: 4463/4464/4465/4469/4470/4471

Worldwide Confirmed Malfunctions	202
Worldwide Distribution	804,000

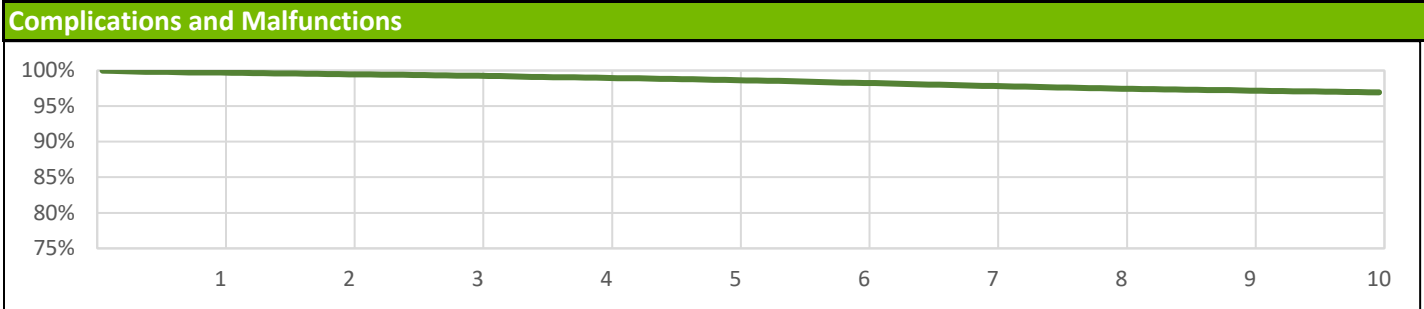
	With Compromised Therapy	Without Compromised Therapy	Total
Conductor			
Lead conductor (7)	66	17	83
Crimp/Weld/Bond			
Terminal weld (23)	1	0	1
Other			
Lead body (4)	71	31	102
Non-patterned, other	8	8	16
Grand Total	146	56	202

References cited in table above [\(link\)](#)

FINELINE II EZ/FINELINE II Sterox EZ Positive Fixation (Silicone)

Models: 4466/4467/4468/4472/4473/4474

US Summary			
US Registered Implants:	53,000	US Chronic Complications	924
US Approval Date:	January 2000	US Malfunctions:	155
US Estimated Active Implants:	19,000	Without Compromised Therapy:	39
		With Compromised Therapy:	116



US Survival Probability		Year	1	2	3	4	5	6	7	8	9	10
Non-Advisory Population	Complications and Malfunctions		99.7%	99.5%	99.3%	99.0%	98.7%	98.3%	97.8%	97.4%	97.2%	96.9%
Registered Implants: 53000	Effective Sample Size		46349	41537	37110	33088	29442	26111	22481	19200	16180	13495

FINELINE II EZ/FINELINE II Sterox EZ Positive Fixation (Silicone)

Models: 4466/4467/4468/4472/4473/4474

Worldwide Confirmed Malfunctions	195
Worldwide Distribution	144,000

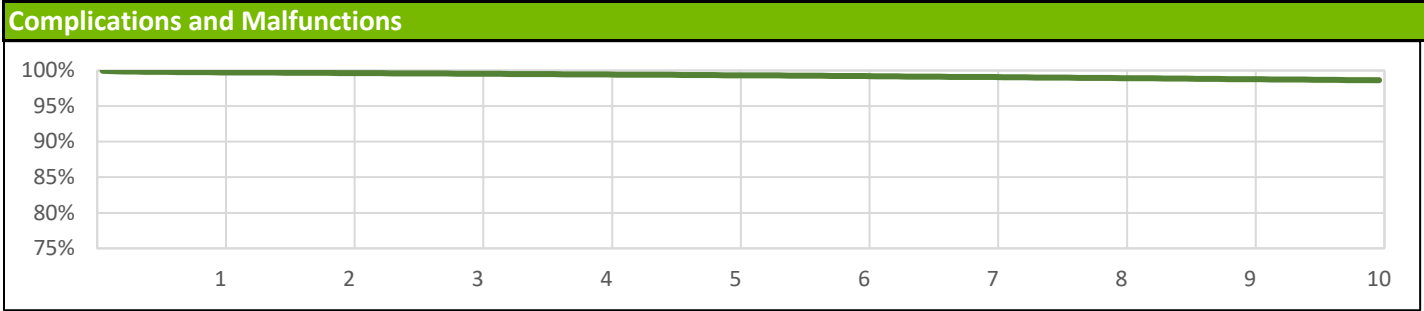
	With Compromised Therapy	Without Compromised Therapy	Total
Conductor			
Lead conductor (7)	90	15	105
Other			
Conductor damage (32)	55	23	78
Lead body (4)	0	1	1
Non-patterned, other	4	7	11
Grand Total	149	46	195

References cited in table above ([link](#))

FINELINE II/FINELINE II Sterox Passive Fixation (Polyurethane)

Models: 4452/4453/4456/4457

US Summary			
US Registered Implants:	197,000	US Chronic Complications	1,654
US Approval Date:	January 2000	US Malfunctions:	45
US Estimated Active Implants:	75,000	Without Compromised Therapy:	3
		With Compromised Therapy:	42



US Survival Probability											
Year		1	2	3	4	5	6	7	8	9	10
Non-Advisory Population	Complications and Malfunctions	99.7%	99.7%	99.5%	99.4%	99.3%	99.2%	99.1%	98.9%	98.8%	98.6%
Registered Implants: 197000	Effective Sample Size	169660	151411	134858	119772	106110	93783	80167	67321	55730	45631

FINELINE II/FINELINE II Sterox Passive Fixation (Polyurethane)

Models: 4452/4453/4456/4457

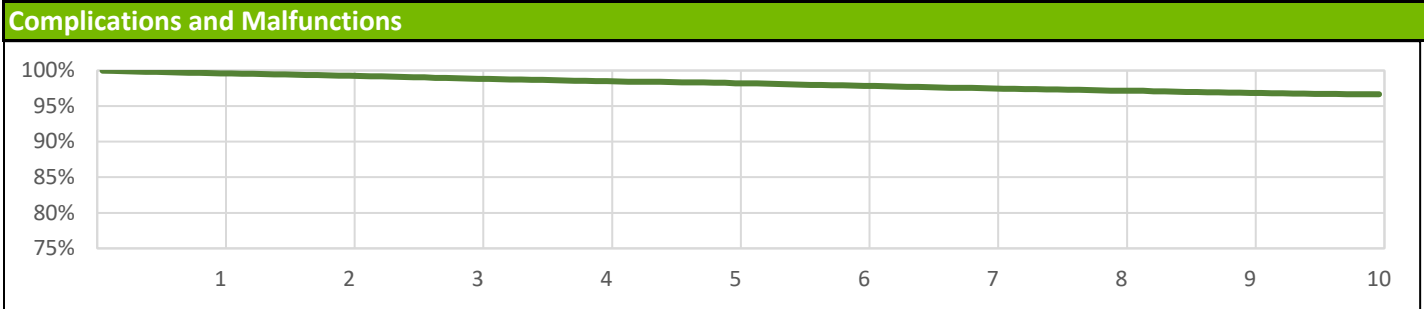
Worldwide Confirmed Malfunctions		68	
Worldwide Distribution		553,000	
	With Compromised Therapy	Without Compromised Therapy	Total
Conductor			
Lead conductor (7)	18	0	18
Other			
Lead body (4)	41	3	44
Non-patterned, other	5	1	6
Grand Total	64	4	68

References cited in table above [\(link\)](#)

FINELINE II EZ/FINELINE II Sterox Passive Fixation (Silicone)

Models: 4454/4455/4458/4459

US Summary			
US Registered Implants:	14,000	US Chronic Complications	316
US Approval Date:	January 2000	US Malfunctions:	23
US Estimated Active Implants:	4,000	Without Compromised Therapy:	-
		With Compromised Therapy:	23



US Survival Probability											
Year		1	2	3	4	5	6	7	8	9	10
Non-Advisory Population	Complications and Malfunctions	99.6%	99.3%	98.8%	98.5%	98.2%	97.9%	97.5%	97.2%	96.8%	96.7%
Registered Implants: 14000	Effective Sample Size	12307	11016	9815	8712	7742	6862	5991	5215	4494	3845

FINELINE II/FINELINE II Sterox Passive Fixation (Silicone)

Models: 4454/4455/4458/4459

Worldwide Confirmed Malfunctions	60
Worldwide Distribution	105,000

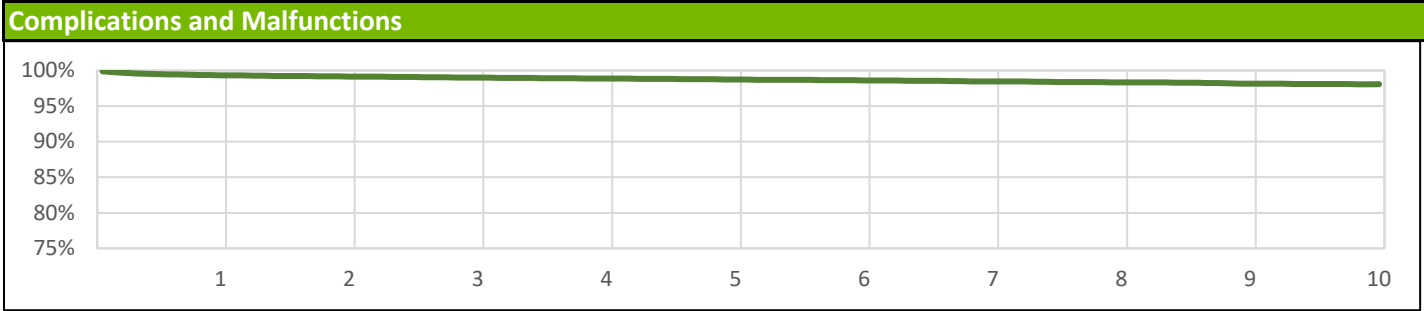
	With Compromised Therapy	Without Compromised Therapy	Total
Conductor			
Lead conductor (7)	20	0	20
Other			
Conductor damage (32)	35	3	38
Non-patterned, other	2	0	2
Grand Total	57	3	60

References cited in table above ([link](#))

FINELINE II/FINELINE II Sterox Atrial J (Polyurethane)

Models: 4477/4478/4479/4480

US Summary			
US Registered Implants:	63,000	US Chronic Complications	841
US Approval Date:	January 2000	US Malfunctions:	39
US Estimated Active Implants:	26,000	Without Compromised Therapy:	20
		With Compromised Therapy:	19



US Survival Probability											
Year		1	2	3	4	5	6	7	8	9	10
Non-Advisory Population	Complications and Malfunctions	99.3%	99.2%	99.0%	98.9%	98.7%	98.6%	98.5%	98.3%	98.1%	98.1%
Registered Implants: 63000	Effective Sample Size	54966	49203	44082	39394	35019	31035	26393	22099	18188	14784

FINELINE II/FINELINE II Sterox Atrial J (Polyurethane)

Models: 4477/4478/4479/4480

Worldwide Confirmed Malfunctions		79	
Worldwide Distribution		323,000	
	With Compromised Therapy	Without Compromised Therapy	Total
Conductor			
Lead conductor (7)	5	2	7
Other			
J-shape (22)	26	30	56
Lead body (4)	8	3	11
Non-patterned, other	3	2	5
Grand Total	42	37	79

References cited in table above [\(link\)](#)

Confirmed Malfunction Details: Leads References

Descriptions listed below provide an overview of the clinical observations and/or analysis findings associated with each confirmed lead malfunction pattern listed in this report. All of the patterns listed are thoroughly investigated and analyzed. As part of Boston Scientific's process of continuous improvement, when possible, changes have been or will be implemented in response to identified malfunction patterns. "Improvements implemented" may include product design changes in existing or subsequent generations, manufacturing process modifications, educational communications, labeling changes, etc. Improvement implementation may vary by geography due to various factors, including regulatory review timing, and may not completely mitigate or eliminate the potential for additional malfunctions.

1. **IS-1 terminal pin**— Compromised insulation and/or conductor integrity if lead is bent sharply away from the header block when placed in implant pocket or if pulse generator migrates from implant site. Improvement implemented.
2. **Inner insulation abrasion**— Loss of capture, decreasing impedance, increased pacing thresholds, noisy signals, oversensing. Abrasion of inner insulation.
3. **Terminal leg insulation**— Loss of sensing, loss of pacing, loss of defibrillation therapy. Abraded insulation on terminal leg portion of lead due to lead-on-lead or lead-on-can contact. Improvement implemented.
4. **Lead body**— Insulation abrasion due to lead-on-lead or lead-on-can contact combined with damage attributed to application of compressive or torsional loads which may be due to clavicle-first rib entrapment. Damage to lead body may expose conductor.
5. **Seal rings**— Insertion difficulty at implant, difficulty removing lead from header post-implant. Proximal silicone seal rings not fully adhered to lead terminal. Improvement implemented.
6. **Manufacturing material**— Loss of sensing, loss of pacing, noisy signals. Manufacturing material embedded in lead body.
7. **Lead conductor**— Loss of capture, inability to deliver therapy. Fatigue of lead conductor due to repeated flexing.
8. **Lead body**— Lead fracture, inappropriate shocks, oversensing. Insulation damage resulting from implant stresses or manufacturing variability.
9. **Lead conductor**— Loss of sensing, loss of pacing. Physical damage to lead body due to repeated flexing.
10. **Lead connector**— Insulation damage resulting from bending or tension at the terminal connector. May lead to inappropriate shocks, oversensing.
11. **Lead conductor**— Physical damage to lead conductor, inappropriate shocks, oversensing. Displacement of yoke component may lead to fatigue of high-voltage lead conductor. Improvement implemented.
12. **Conductor connection**— Loss of sensing, loss of pacing, loss of defibrillation output. Improper conductor wire connection. Improvement implemented.
13. **Serial number label**— Loss of sensing, loss of pacing. Sharp edge in serial number label resulting in breach in outer lead insulation. Improvement implemented.
14. **Terminal component**— Loss of sensing, loss of pacing, terminal pin separation from terminal ring during implant or ICD replacement. Improvement implemented.
15. **Electrode tip**— Separation between electrode tip and lead body.
16. **Lead body**— Physical damage to lead body, inappropriate shocks. Abraded insulation due to contact with patient anatomy.
17. **DF-1 terminal pin**— Loss of sensing, loss of pacing, loss of defibrillation output. Compromised insulation and/or conductor integrity from sharp or excessive bending. Improvement implemented.
18. **Yoke component**— Noise, impedance anomalies, threshold variation. Use of multiple or pre-formed stylets may cause component within lead yoke to dislodge. Improvement implemented.
19. **Lead conductor**— Muscle stimulation, inappropriate shocks, oversensing, high pacing impedance, inability to deliver therapy. Repeated flexing leading to fatigue of lead conductor.
20. **Serial number label**— Loss of sensing, loss of pacing. Broken serial number label due to either sharp bend away from header at implant or repetitive movement during implant.
21. **IS-1 terminal pin**— Compromised insulation and/or conductor integrity if lead is bent sharply away from the header block when placed in implant pocket or if pulse generator migrates from implant site. Improvement implemented.
22. **J-shape**— Placement difficulty, dislodgement. Elevated temperatures resulting in a relaxation of pre-formed J-shape. Improvement implemented.
23. **Terminal weld**— Impedance rise, loss of pacing. Loss of connection on terminal weld. Improvement implemented.
24. **Conductor fracture**— High impedance, loss of capture, loss of pacing, inappropriate shocks. Flex fatigue leading to discontinuity of pace/sense conductor.
25. **Conductor fracture**— High impedance, loss of LV capture, loss of LV pacing. Flex fatigue leading to discontinuity of conductor.
26. **Non-patterned, Other**— Confirmed malfunction for which the root cause does not fit within other categories and is not associated with other malfunctions, or has not yet been identified.
32. **Conductor damage**— Noise, oversensing, inappropriate shocks, possible loss of therapy. Conductor damage attributed to application of compressive or torsional loads which may be due to clavicle-first rib entrapment.
33. **Insulation damage**— Low pacing impedance, noise, possible loss of therapy. Insulation abrasion due to lead-on-lead or lead-on-can contact, or due to application of compressive or torsional loads which may be due to clavicle first rib entrapment. Damage to lead body may expose conductor.

34. **Extracardiac fracture**— High impedance, loss of LV capture, loss of LV pacing. Flex fatigue near suture sleeve, not including clavicle-first rib damage, leading to discontinuity of conductor.
35. **Lead conductor**— High impedance, loss of sensing, loss of pacing. Variability in wire conductor material. Improvement implemented.
36. **Conductor connection**— Loss of sensing, loss of pacing, loss of defibrillation output. Improper conductor wire connection. Improvement implemented.
37. **Weld fracture**— Noise, loss of sensing. Fractured weld.
38. **Conductor cable fracture**— High impedance, potential loss of pacing and defibrillation therapy. Fractured high voltage cable. Improvement implemented.
39. **Inner conductor break**— High impedance, loss of capture, loss of sensing. Inner conductor break. Commonly associated with helix extension/retraction difficulties at implant.
40. **Weld**— Out of range impedance measurements, noise, oversensing. Incomplete weld.
41. **Extracardiac fracture**— High impedance, noise, oversensing, loss of capture, loss of pacing. Flex fatigue leading to discontinuity of outer conductor.
42. **Model 3501 electrode fracture 2020**— *December 2020 Voluntary Physician Advisory*. High shock impedance, loss of tachy therapy. Fractured electrode conductor immediately distal to the proximal sense electrode. Note: per ISO 5841-2:2(E), only returned and confirmed failures are included in this table. All failures associated with this pattern – including reports that are not returned - are included in rate calculations and projections updated in the advisory section.
43. **Insulation**— High pacing impedance, noise, undersensing. Insulation issue.
44. **Electrode conductor fracture in or near pocket**— High shock impedance, loss of tachy therapy. Fractured electrode conductor proximal to the proximal sense electrode.

U.S. Chronic Lead Complications (Occurring After the First Month of Service)

Boston Scientific strives to provide meaningful detail in describing the performance of our products. U.S. Chronic Lead Complications are reported in compliance with ISO 5841-2: 2014 (E), Reporting of Clinical Performance of Populations of Pulse Generators or Leads. To be included in the Chronic Lead Complications table, a lead must be successfully implanted, with clinical observations (as listed in the table) occurring after the first month of implant, and have been removed from service surgically or electronically. The lead either was not returned for analysis, or was returned but had no confirmation of a malfunction.

While multiple complications are possible for any given lead, only one complication is reported per lead. The complication reported is determined by an observation hierarchy, indicated by the order of the categories from left to right in the table. The number of U.S. Registered Implants is also provided as context for the data. Chronic Lead Complications are included in the calculation of survival probability.

Pacing Leads/Model	U.S. Registered Implants	Cardiac Perforation	Conductor fracture/ helix damage	Lead dislodgement	Failure to capture	Oversensing	Failure to sense	Insulation breach	Abnormal pacing impedance	Abnormal defibrillation impedance	Extracardiac stimulation
INGEVITY+ Positive Fixation 7840/7841/7842	173,000	53	43	182	31	11	6	0	6	0	0
INGEVITY Positive Fixation 7640/7641/7642/7740/7741/7742	365,000	144	529	564	222	102	25	43	120	0	25
INGEVITY Atrial J Passive Fixation 7635/7636/7735/7736	14,000	0	18	31	9	3	1	2	4	0	0
INGEVITY Passive Fixation 7631/7632/7731/7732	25,000	1	20	13	17	6	3	1	14	0	0
FINELINE II ; Passive Fixation (poly) 4452/4453/4456/4457	196,000	5	490	249	297	78	35	215	266	0	19
FINELINE II EZ ; Positive Fixation (poly) 4463/4464/4465/4469/4470/4471	507,000	23	811	891	524	208	155	602	548	0	31
FINELINE II Atrial J (poly) 4477/4478/4479/4480	63,000	1	125	369	139	31	34	80	54	0	8
FINELINE II/THINLINE II ; Passive Fixation (silicone) 4454/4455/4458/4459	14,000	2	126	20	70	30	5	24	38	0	1
FINELINE II/THINLINE II EZ ; Positive Fixation (silicone) 4466/4467/4468/4472/5573/4474	53,000	0	310	96	122	110	24	107	152	0	3
CRT Leads/Model	U.S. Registered Implants	Cardiac Perforation	Conductor fracture/ helix damage	Lead dislodgement	Failure to capture	Oversensing	Failure to sense	Insulation breach	Abnormal pacing impedance	Abnormal defibrillation impedance	Extracardiac stimulation
ACUITY X4 Spiral L 4677/4678	17,000	0	0	26	5	1	0	0	0	0	7
ACUITY X4 Spiral S 4674/4675	49,000	1	1	79	7	2	0	0	0	0	18

CRT Leads/Model (cont.)	U.S. Registered Implants	Cardiac Perforation	Conductor fracture/ helix damage	Lead dislodgement	Failure to capture	Oversensing	Failure to sense	Insulation breach	Abnormal pacing impedance	Abnormal defibrillation impedance	Extracardiac stimulation
ACUITY X4 Straight 4671/4672	38,000	1	1	123	21	0	0	1	5	0	52
ACUITY Steerable 4554/4555/4556	29,000	4	42	462	67	6	2	18	42	0	98
ACUITY Spiral 4591/4592/4593	24,000	0	24	343	54	0	1	5	11	0	138
EASYTRAK 3 4522/4524/4525/4527/4548/4549/4550	22,000	2	44	314	63	5	2	16	24	0	95
EASYTRAK 2 4515/4517/4518/4520/4542/4543/4544	97,000	1	429	1373	386	15	8	118	182	0	448
EASYTRAK 4510/4511/4512/4513/4535/4536/ 4537/4538	38,000	2	91	489	149	4	1	77	53	0	269

Defibrillation Leads/Model	U.S. Registered Implants	Cardiac Perforation	Conductor fracture/ helix damage	Lead dislodgement	Failure to capture	Oversensing	Failure to sense	Insulation breach	Abnormal pacing impedance	Abnormal defibrillation impedance	Extracardiac stimulation
ENDOTAK RELIANCE 4-FRONT Single Coil Active Fixation 0652/0657/0672/0673/0692/0693	54,000	19	20	68	12	12	6	0	3	5	3
ENDOTAK RELIANCE 4-FRONT Dual Coil Active Fixation 0653/0658/0675/0676/0695/0696	8,000	2	2	12	1	2	0	1	0	1	1
ENDOTAK RELIANCE 4-Site ; Dual Coil, Active Fixation 0275/0276/0295/0296	77,000	22	56	122	36	73	12	14	24	36	7
ENDOTAK RELIANCE 4-Site ; Dual Coil, Passive Fixation 0285/0286	3,000	1	3	9	1	7	0	0	12	1	1
ENDOTAK RELIANCE 4-Site ; Single Coil, Active Fixation 0292/0293	133,000	36	74	206	63	102	25	14	40	48	12
ENDOTAK RELIANCE 4-Site ; Single Coil, Passive Fixation 0282/0283	3,000	2	4	3	4	1	0	0	4	1	0
ENDOTAK RELIANCE ; Dual Coil, Active Fixation 0157/0158/0159/0164/0165/0167/ 0184/0185/0186/0187	287,000	33	773	432	237	893	103	170	458	517	30
ENDOTAK RELIANCE ; Dual Coil, Passive Fixation 0147/0148/0149/0174/0175/0176/0177	47,000	6	157	75	86	159	13	48	270	81	7
ENDOTAK RELIANCE ; Single Coil, Active Fixation 0137/0138/0160/0161/0162/0180/0181/0182	34,000	14	109	63	38	85	3	8	57	94	4
ENDOTAK RELIANCE ; Single Coil, Passive Fixation 0127/0128/0170/0171/0172/0173	2,000	0	5	5	3	7	0	1	10	3	0

S-ICD Electrodes/Model	U.S. Registered Implants	Perforation	Conductor fracture	Lead dislodgement	Failure to capture	Oversensing	Failure to sense	Insulation breach	Abnormal defibrillation impedance	Extracardiac stimulation
EMBLEM S-ICD Electrode 3501	24,000	0	4	7	0	98	4	0	0	4
EMBLEM/Q-TRAK S-ICD Electrode 3010, 3401	24,000	0	4	20	0	137	15	4	0	9

U.S. Acute Lead Observations

Boston Scientific strives to provide meaningful detail reflective of real-world product experience. In the first weeks following lead implantation, physiologic responses and lead performance can vary until chronic lead stability is attained. Acute lead performance may be subject to a number of factors, including patient-specific anatomy, clinical conditions and/or varying implant conditions/techniques.

Because acute implant time contributes to overall clinical experience, Boston Scientific provides specific information regarding acute lead performance. To be included in the Acute Lead Observations table, a lead must first be successfully implanted, with clinical observations occurring within the first month of implant. These reports may or may not have resulted in clinical action and/or product return to Boston Scientific. The categories are consistent with the AdvaMed guidance for *Uniform Reporting of Clinical Performance of Cardiac Rhythm Management Pulse Generators and Leads*. Although multiple observations are possible for any given lead, only one observation is reported per lead. The observation reported is determined by an observation hierarchy, indicated by the order of the categories from left to right in the table. The number of U.S. Registered Implants is also provided as context for the data. Acute Lead Observations are not included in calculation of lead survival probability.

Pacing Leads/Model	U.S. Registered Implants	Cardiac Perforation	Conductor fracture/ helix damage	Lead dislodgement	Failure to capture	Oversensing	Failure to sense	Insulation breach	Abnormal pacing impedance	Abnormal defibrillation impedance	Extracardiac stimulation
INGEVITY+ Positive Fixation 7840/7841/7842	196,000	256	25	521	102	26	32	2	16	0	5
INGEVITY Positive Fixation 7640/7641/7642/7740/7741/7742	365,000	456	421	943	220	78	50	8	51	0	31
INGEVITY Atrial J Passive Fixation 7635/7636/7735/7736	15,000	0	0	36	6	1	1	0	1	0	0
INGEVITY Passive Fixation 7631/7632/7731/7732	25,000	1	0	39	11	0	3	0	0	0	0
FINELINE II ; Passive Fixation (poly) 4452/4453/4456/4457	197,000	9	10	402	102	7	12	16	15	0	10
FINELINE II Atrial J (poly) 4477/4478/4479/4480	63,000	0	10	396	51	2	16	5	7	0	5
FINELINE II EZ ; Positive Fixation (poly) 4463/4464/4465/4469/4470/4471	509,000	56	49	690	145	86	67	29	79	0	26
FINELINE II/THINLINE II ; Passive Fixation (silicone) 4454/4455/4458/4459	14,000	0	1	28	10	0	0	3	4	0	0
FINELINE II/THINLINE II EZ ; Positive Fixation (silicone) 4466/4467/4468/4472/4473/4474	53,000	2	13	90	13	3	8	6	4	0	3

CRT Leads/Model	U.S. Registered Implants	Cardiac Perforation	Conductor fracture/ helix damage	Lead dislodgement	Failure to capture	Oversensing	Failure to sense	Insulation breach	Abnormal pacing impedance	Abnormal defibrillation impedance	Extracardiac stimulation
ACUITY X4 Spiral L 4677/4678	18,000	0	0	30	34	9	0	0	6	0	21
ACUITY X4 Spiral S 4674/4675	51,000	0	2	61	45	7	0	0	23	0	56

CRT Leads/Model (cont.)	U.S. Registered Implants	Cardiac Perforation	Conductor fracture/ helix damage	Lead dislodgement	Failure to capture	Oversensing	Failure to sense	Insulation breach	Abnormal pacing impedance	Abnormal defibrillation impedance	Extracardiac stimulation
ACUITY X4 Straight 4671/4672	39,000	2	0	134	30	6	1	0	12	0	59
ACUITY Steerable 4554/4555/4556	29,000	1	1	291	22	13	1	1	21	0	162
ACUITY Spiral 4591/4592/4593	24,000	1	2	172	29	5	0	3	9	0	167
EASYTRAK 3 4522/4524/4525/4527/4548/4549/4550	22,000	0	1	240	23	8	1	3	17	0	128
EASYTRAK 2 4515/4517/4518/4520/4542/4543/4544	97,000	7	4	806	84	30	4	14	64	0	512
EASYTRAK 4510/4511/4512/4513/4535/4536/ 4537/4538	38,000	4	4	168	24	11	1	10	20	0	141

Defibrillation Leads/Model	U.S. Registered Implants	Cardiac Perforation	Conductor fracture/ helix damage	Lead dislodgement	Failure to capture	Oversensing	Failure to sense	Insulation breach	Abnormal pacing impedance	Abnormal defibrillation impedance	Extracardiac stimulation
ENDOTAK RELIANCE 4-FRONT Single Coil Active Fixation 0652/0657/0672/0673/0692/0693	58,000	51	8	114	17	14	3	1	5	3	2
ENDOTAK RELIANCE 4-FRONT Dual Coil Active Fixation 0653/0658/0675/0676/0695/0696	9,000	7	1	15	7	3	0	0	1	0	0
ENDOTAK RELIANCE 4-Site ; Dual Coil, Active Fixation 0275/0276/0295/0296	77,000	56	18	253	42	29	3	2	27	7	6
ENDOTAK RELIANCE 4-Site ; Dual Coil, Passive Fixation 0285/0286	3,000	2	0	10	1	0	0	0	4	0	0
ENDOTAK RELIANCE 4-Site ; Single Coil, Active Fixation 0292/0293	134,000	100	19	357	70	51	15	6	31	13	21
ENDOTAK RELIANCE 4-Site ; Single Coil, Passive Fixation 0282/0283	3,000	3	1	6	0	1	1	0	7	0	0
ENDOTAK RELIANCE ; Dual Coil, Active Fixation 0157/0158/0159/0164/0165/0167/ 0184/0185/0186/0187	287,000	82	137	510	130	223	12	17	178	108	44
ENDOTAK RELIANCE ; Dual Coil, Passive Fixation 0147/0148/0149/0174/0175/0176/0177	47,000	5	4	92	36	41	4	3	47	5	0
ENDOTAK RELIANCE ; Single Coil, Active Fixation 0137/0138/0160/0161/0162/0180/0181/0182	34,000	31	7	69	15	19	3	2	18	24	9

ENDOTAK RELIANCE ; Single Coil, Passive Fixation 0127/0128/0170/0171/0172/0173	2,000	0	0	3	1	2	0	0	1	0	0
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S-ICD Electrodes/Model	U.S. Registered Implants	Perforation	Conductor fracture	Lead dislodgement	Failure to capture	Oversensing	Failure to sense	Insulation breach	Abnormal defibrillation impedance	Extracardiac stimulation
EMBLEM S-ICD Electrode 3501	26,000	1	0	22	0	208	6	0	0	7
EMBLEM/Q-TRAK S-ICD Electrode 3010/3401	24,000	1	0	20	0	207	6	1	0	15

Before/During Implant Procedure - Worldwide Malfunctions: Leads

This section of the report depicts the number of product malfunctions that occurred worldwide either before implant (prior to opening the sterile product packaging) or during implant (once the sterile product packaging has been opened). In all cases, the product in question must be returned to Boston Scientific CRM and confirmed through laboratory analysis to have operated or exhibited a problem outside the specified performance limits established by Boston Scientific. Damage incurred during shipping/transit or due to external factors warned against in labeling is not reported as device malfunction here.

The Conductor category includes any conductor break or damage with complete or intermittent loss of continuity that could interrupt current flow, including clavicle fatigue or crush damage. The Insulation category includes any lead insulation breach, such as damage due to lead-on-lead or lead-on-anatomy contact, or clavicle fatigue or crush. The Crimp/Weld/Bond category includes any interruption in the conductor or lead body associated with a point of connection. The Other category includes malfunctions for which the root cause does not fit within other categories or has not yet been determined. The Labeling and Packaging categories include product identification issues and damage to sterile packaging, respectively. The Implant Accessory category includes lead malfunctions due to catheter, guidewire or sheath issues.

CRT Leads/Model	Worldwide Distribution	Conductor	Insulation	Crimp/Weld/Bond	Other	Labeling	Packaging	Implant Accessory
ACUITY X4 Spiral L 4677/4678	42,000	0	0	0	2	0	0	0
ACUITY X4 Spiral S 4674/4675	108,000	0	0	0	4	0	0	0
ACUITY X4 Straight 4671/4672	87,000	0	0	0	0	0	0	0
ACUITY Steerable 4554/4555/4556	65,000	0	0	0	5	0	2	0
ACUITY Spiral 4591/4592/4593	46,000	0	0	0	2	1	0	0

Defibrillation Leads/Model	Worldwide Distribution	Conductor	Insulation	Crimp/Weld/Bond	Other	Labeling	Packaging	Implant Accessory
ENDOTAK RELIANCE 4-FRONT Dual Coil Active Fixation 0653/0658/0675/0676/0695/0696	27,000	0	0	0	7	0	0	0
ENDOTAK RELIANCE 4-FRONT Single Coil Active Fixation 0652/0657/0672/0673/0692/0693	191,000	3	1	0	68	0	0	0
ENDOTAK RELIANCE 4-FRONT Dual Coil Passive Fixation 0636/0651/0655/0665/0685/0686	1,000	0	0	0	0	0	0	0
ENDOTAK RELIANCE 4-FRONT Single Coil Passive Fixation 0650/0654/0662/0682/0663/0683	7,000	0	1	0	0	0	0	0
ENDOTAK RELIANCE 4-Site ; Dual Coil, Active Fixation 0275/0276/0295/0296	125,000	0	0	0	90	0	1	0
ENDOTAK RELIANCE 4-Site ; Dual Coil, Passive Fixation 0265/0266/0285/0286	11,000	0	0	0	7	15	1	0
ENDOTAK RELIANCE 4-Site ; Single Coil, Active Fixation 0292/0293	212,000	0	0	0	62	0	1	0
ENDOTAK RELIANCE 4-Site ; Single Coil, Passive Fixation 0282/0283	6,000	0	0	0	0	0	0	0
ENDOTAK RELIANCE ; Dual Coil, Active Fixation 0157/0158/0159/0164/0165/0167/ 0184/0185/0186/0187	382,000	0	0	92	571	1	3	10
ENDOTAK RELIANCE ; Dual Coil, Passive Fixation 0147/0148/0149/0174/0175/0176/0177	109,000	1	0	20	108	0	3	0
ENDOTAK RELIANCE ; Single Coil, Active Fixation 0137/0138/0160/0161/0162/0180/0181/0182	78,000	0	0	15	80	0	1	1
ENDOTAK RELIANCE ; Single Coil, Passive Fixation 0127/0128/0170/0171/0172/0173	8,000	0	0	1	6	0	0	0

S-ICD Electrodes/Model	Worldwide Distribution	Conductor	Insulation	Crimp/Weld/Bond	Other	Labeling	Packaging	Implant Accessory
EMBLEM S-ICD Electrode 3501	64,000	0	0	0	1	0	0	0
EMBLEM/Q-TRAK S-ICD Electrode 3010, 3401	43,000	0	0	1	0	0	0	0

Pacing Leads/Model	Worldwide Distribution	Conductor	Insulation	Crimp/Weid/Bond	Other	Labeling	Packaging	Implant Accessory
INGEVITY+ Positive Fixation 7840/7841/7842	258,000	0	0	0	13	0	0	0
INGEVITY Positive Fixation 7640/7641/7642/7740/7741/7742	1,062,000	2446	0	0	3295	0	0	0
INGEVITY Atrial J Passive Fixation 7635/7636/7735/7736	104,000	0	0	0	0	0	0	0
INGEVITY Passive Fixation 7631/7632/7731/7732	116,000	1	0	1	2	0	0	0
FLEXTEND 2 Active Fixation 4095/4096/4097	185,000	0	0	11	136	1	0	0
FLEXTEND Active Fixation 4086/4087/4088	290,000	0	0	66	636	1	1	4
FINELINE II ; Passive Fixation (poly) 4452/4453/4456/4457*	553,000	1	0	3	8	6	26	0
FINELINE II EZ ; Positive Fixation (poly) 4463/4464/4465/4469/4470/4471*	804,000	0	0	6	727	1	52	3
FINELINE II Atrial J (poly) 4477/4478/4479/4480*	323,000	0	0	1	144	6	18	0
FINELINE II/THINLINE II ; Passive Fixation (silicone) 4454/4455/4458/4459*	105,000	0	0	2	2	1	1	0
FINELINE II/THINLINE II EZ ; Positive Fixation (silicone) 4466/4467/4468/4472/5573/4474*	144,000	0	0	0	233	4	6	0

*Counts consist of Boston Scientific and Intermedics co-branded pacing leads data.

Product Advisories

A Product Advisory is a voluntary letter issued to inform physicians of an anomalous device behavior identified by Boston Scientific's Quality System. A Product Advisory is issued when there is a material elevation in risk to patient safety with potential for compromised lifesaving therapy, or when Boston Scientific can provide meaningful guidance to improve patient outcomes or device performance. Boston Scientific considers many perspectives in the decision to issue a Product Advisory, including internal expertise and guidance from an independent Patient Safety Advisory Board (PSAB).

This report section includes summaries of Product Advisories for which significant, active U.S. device populations exist. In general, this includes advisories for which the estimated active U.S. advisory population is at least 200. Physician and patient letters, as well as Advisory Updates, are available at www.bostonscientific.com. With respect to the number of reported events listed in the summaries below, Boston Scientific recognizes that the actual number of clinical malfunctions may be greater than the number reported. Information reported in the Current Status section of each summary represents Boston Scientific's most current understanding of the data presented, but is not necessarily updated in every report. Additionally, rate projections are provided with the acknowledgment that predictive modeling is inherently uncertain due to its dependence on the device age distribution of reported events and resultant statistical approximations and assumptions. Advisory notifications may vary by geography, based upon local regulatory requirements. Please contact the local Boston Scientific office for more information. Not all products may be approved for use in all geographies, as product approval is geography specific.

PRODUCT	ORIGINAL COMMUNICATION Jun 2021 – High Battery Impedance Initiating Safety Mode in INGENIO EL Pacemakers and CRT-Ps
Identifiable by serial number. Not all serial numbers are affected.	Voluntary Physician Advisory FDA Classification: Class I
A serialized search tool to determine if a specific device is affected by this product advisory is available here: Device Lookup Tool	Affected devices built with the EL battery have the potential to transition to Safety Mode during interrogation attempts by either a programmer or a LATITUDE™ communicator. The EL battery impedance of affected devices may increase over time causing a device to exhibit transient voltage decreases during the high-power consumption associated with telemetry communication via programmer or LATITUDE communicator. If the battery voltage drops below a minimum threshold during communication attempts, the device will temporarily halt telemetry, and a system reset will be performed. Subsequent telemetry attempts may result in additional system resets due to the high battery impedance. If three (3) system resets occur within a 48-hour period, the device is designed to immediately enter Safety Mode to maintain back-up pacing with pre-defined non-programmable settings.
INLIVEN CRT-P Models: V284, V285, W274, W275	Once a device is in Safety Mode, it cannot be reprogrammed and must be replaced. There is a high degree of detectability when a device is operating in Safety Mode based on displayed programmer warning screen and/or LATITUDE alert condition. Although the most common clinical outcome has been early device replacement, Safety Mode parameters may result in unintended clinical impact for certain patients. Prior to device replacement, some patients may experience the following due to non-programmable Safety Mode pacing parameters: myopotential oversensing resulting in pacing inhibition, phrenic nerve stimulation; and/or loss of AV/VV synchrony. The most common clinical impact has been early device replacement. No patient deaths have been reported. No affected devices remain available for implant.
INTUA CRT-P Models: V272, V273, W273	Estimated Rate It is estimated that one third or more of affected devices will experience Safety Mode prior to reaching Explant battery indicator. The potential for life-threatening harm due to loss of pacing (occurring because of prolonged inhibition) over a device's lifetime is estimated to be less than 1 in 15,000.
INVIVE CRT-P Models: V172, V173, V182, V183, W172, W173	Standard Warranty program available, please contact your local representative for terms and conditions.
VITALIO DR EL Pacemaker Models: J274, J277, K274, K277, K284	CURRENT STATUS 05-Jul-22 <i>Estimated Rate of Occurrence</i> It is estimated that one third or more of affected devices will experience Safety Mode prior to reaching Explant battery indicator. The potential for life-threatening harm due to loss of pacing (occurring because of prolonged inhibition) over a device's lifetime is estimated to be less than 1 in 26,000.
INGENIO DR EL Pacemaker Models: J174, J177, K174, K184, K187	The INGENIO devices built with the standard life (SL) battery, as well as all contemporary Boston Scientific pacemakers and CRT-Ps, have different batteries and have not exhibited this latent battery condition.
ADVANTIO DR EL Pacemaker Models: J064, J067, K064, K084, K087 Safety Mode, Physician Letter, June 2021 Safety Mode, Patient Letter, June 2021	CURRENT RECOMMENDATION 05-Jul-22 <ul style="list-style-type: none"> • As noted above, Safety Mode provides back-up pacing under critical circumstances; it is not intended to be a substitute for chronic pacing therapy. When assessing potential risk for a patient if their device initiates Safety Mode prior to the Explant indicator, consider patient-specific physiological factors (which may vary over time), including: adequacy of underlying escape rhythm and/or the need for AV/VV pacing for cardiac synchrony. • If a device enters Safety Mode, schedule replacement. Boston Scientific does not recommend general prophylactic replacement for affected devices. However, for individual patients, factors such as those listed above and shared decision-making may support consideration of device replacement to mitigate unintended clinical impact(s) due to potential entry into Safety Mode prior to the Explant indicator. In these cases, the following guidance should be considered: <ul style="list-style-type: none"> - For EL pacemakers, replace with a longevity remaining of 4 years (or less, if the device currently indicates fewer than 4 years longevity remaining). - For CRT-Ps, replace with a longevity remaining of 3 years (or less, if the device currently indicates fewer than 3 years longevity remaining). • Follow-up interval. Perform a system follow-up via remote or in-office interrogation at least every 12 months. For patients who may not require early device replacement, continue with existing follow-up protocols until the longevity reaches One-Year-Remaining and then follow-up every three (3) months thereafter until replacement is indicated (in accordance with the device's instructions for use). • For each patient with an affected device, append their medical record with this letter to maintain awareness of this topic for the remaining service life of the device.

PRODUCT	ORIGINAL COMMUNICATION Sep 2018 and Jun 2021 – Hydrogen-Induced Premature Depletion
Identifiable by serial number. Not all serial numbers are affected.	Voluntary Physician Advisory FDA Classification: Sep 2018 – Class II; Jun 2021 - Class II
A serialized search tool to determine if a specific device is affected by this product advisory is available here: Device Lookup Tool	This advisory discusses two separate, distinct subsets of pacemakers and cardiac resynchronization therapy pacemakers (CRT-Ps) with a potential for early pacemaker replacement due to hydrogen-induced accelerated battery depletion. The 2018 advisory population included approximately 2,900 active pacemakers, and the 2021 advisory population included approximately 125,000 active pacemakers.
VALITUDE CRT-P Models U125, U128	Latent release of small amounts of hydrogen within the pacemaker may compromise electrical function of a low voltage capacitor over time, resulting in accelerated depletion of the battery. The susceptibility of a pacemaker to this hydrogen-induced accelerated battery depletion mechanism is dependent upon the amount of hydrogen accumulation within the device and the susceptibility of the low voltage capacitors to hydrogen. The 2018 population is composed of pacemakers built with specific batches/lots of a liner component exhibiting a higher likelihood for this behavior. The 2021 population is composed of pacemakers built with a discontinued/original low voltage capacitor that is susceptible to compromised electrical performance in the presence of hydrogen. The use of the original low voltage capacitor in pacemaker and production of pacemakers from these advisory populations ceased in Nov 2017, and therefore they are no longer available for implantation. The most common clinical outcome has been device replacement. There have been no reported deaths associated with this behavior.
VISIONIST CRT-P Models U225, U226, U228	
ACCOLADE Pacemaker Models L300, L301, L310, L311, L321, L331	
PROPONENT Pacemaker Models L200, L201, L209, L210, L211, L221, L231	<i>Estimated Rate of Occurrence</i> In June 2021 Boston Scientific identified an additional population of devices and the rate of occurrence at that time is described for each population below.
ESSENTIO Pacemaker Models L100, L101, L110, L111, L121,	<ul style="list-style-type: none"> The 2018 advisory subset was composed of approximately 2,100 active pacemakers. The observed malfunction rate for this behavior was 11.0% at 5 years with a potential for life-threatening harm of 1 in 500,000 (0.0002%) at 5 years. The 2021 advisory subset was composed of approximately 125,000 active pacemakers. The observed malfunction rate for this behavior was 1.3% at 5 years with a potential for life-threatening harm of 1 in 5,000,000 (0.00002%) at 5 years.
ALTRUA 2 Pacemaker Models S701, S702, S722	
Hydrogen Induced Premature Depletion, Physician Letter, September 2018	Standard Warranty program available, please contact your local representative for terms and conditions.
Hydrogen Induced Premature Depletion, Patient Letter, September 2018	CURRENT STATUS 05-Jul-22 <i>Estimated Rate of Occurrence</i> <ul style="list-style-type: none"> The 2018 advisory subset is composed of approximately 750 active pacemakers. The observed malfunction rate for this behavior is 12.6% at 5 years with a potential for life-threatening harm of 1 in 143,000 (0.0007%) at 5 years. The 2021 advisory subset is composed of approximately 109,000 active pacemakers. The observed malfunction rate for this behavior is 1.8% at 5 years with a potential for life-threatening harm of 1 in 1,000,000 (0.0001%) at 5 years.
Hydrogen Induced Premature Depletion, Physician Letter, June 2021	
Hydrogen Induced Premature Depletion, Patient Letter, June 2021	More than 98% of hydrogen-induced confirmed events have been replaced before the battery reached a depleted state; therefore, normal battery assessment during labeled 12-month follow-ups is effective and recommended for both advisory populations.
	A polymer material, designed to remove excess hydrogen within the pulse generator, was added to this device family in March 2018 and is intended to mitigate hydrogen-induced accelerated battery depletion due to the low voltage capacitors. Additionally, improvements were implemented in the liner component starting in May 2021 intended to further reduce the device's overall capacity to generate hydrogen.
	CURRENT RECOMMENDATION 05-Jul-22 <ul style="list-style-type: none"> Per labeling, perform a system follow-up via remote or in-office interrogation every 12 months until One-Year-Remaining and then every three (3) months thereafter until replacement is indicated. Promptly investigate any suspected indication of accelerated battery depletion, and contact Boston Scientific Technical Services for assistance as needed. Replace any affected pacemakers suspected of exhibiting accelerated battery depletion within 90 days of the Explant battery status indicator. Alternatively, Boston Scientific Technical Services can provide a recommended replacement interval specific to an individual device by using data from the programmer or LATITUDE. Prophylactic replacement is not recommended for pacemakers with normal battery consumption as the risk of surgical replacement outweighs the risk of accelerated battery depletion. For each patient with an affected device, append their medical record with this letter to maintain awareness of this topic for the remaining service life of the device.

PRODUCT

ORIGINAL COMMUNICATION Dec 2020 — Model 3501 Electrode Fracture

A serialized search tool to determine if a specific device is affected by this product advisory is available here:
[Device Lookup Tool](#)

EMBLEM Subcutaneous Electrode
Model 3501

[Model 3501 Electrode Fracture, Physician Letter, December 2020](#)

[Model 3501 Electrode Fracture, Patient Letter, December 2020](#)

Voluntary Physician Advisory
FDA Classification: Class I

This advisory discusses the performance of approximately 47,000 EMBLEM S-ICD Subcutaneous Electrodes (Model 3501). During assembly of the EMBLEM S-ICD Subcutaneous Electrode, a small amount of adhesive is applied to a location just distal to the proximal sense ring. Over time, mechanical stresses on the electrode body at this location may create the potential for a fatigue crack to initiate from the outer lumen. This crack then propagates inward toward the center-oriented distal sense conductor, eventually resulting in a fracture of the two high voltage conductors.

The cumulative occurrence rate for this specific electrode body fracture location is 0.2% at 41 months with a potential for life-threatening harm of 1 in 25,000 (0.004%) at 10 years.

The physician letter (link provided) details device programming considerations and troubleshooting and detection techniques.

Standard Warranty program available, please contact your local representative for terms and conditions.

CURRENT STATUS 05-Jul-22

Estimated Rate of Occurrence

The occurrence rate for EMBLEM S-ICD Subcutaneous Electrode (Model 3501) body fractures at a location just distal to the proximal sense ring is 0.28% at 57 months and the potential for life-threatening harm is 1 in 25,000 (0.004%) at 10 years. This rate was derived by including all reports of this failure mode, whether or not the product was returned.

An enhanced version of the EMBLEM Electrode has been developed to address the risks associated with this device behavior. Based on accelerated, extreme laboratory test, the enhanced EMBLEM Electrode design has demonstrated statistical survival of the electrode body around the sense ring to 10 implant years. Contact your local Boston Scientific sales professionals for availability.

CURRENT RECOMMENDATION 05-Jul-22

1. Remote monitoring. Enroll and monitor patients through LATITUDE remote monitoring to facilitate detection of high electrode impedance alert or non-physiologic, mechanical artifacts on stored S-ECGs during the interval between in-office device checks. Instruct patients to comply with weekly remote interrogations.
2. Follow-up interval. Perform a system follow-up every three months via remote or in-office interrogation.
3. During follow-ups. For every remote or in-office follow-up:
 - 3.1. Promptly investigate any high impedance alerts in-clinic, as this may indicate an electrode body fracture and an inability of the system to provide therapy.
 - 3.2. Review stored episode S-ECGs for non-physiologic, mechanical artifacts, as this may indicate onset of electrode body fracture.
 - 3.3. During in-clinic follow-up, capture all sensing vectors, and review for the following conditions, any of which may indicate onset of electrode body fracture:
 - 3.3.1. cardiac signals on the S-ECGs of the Primary and Secondary sensing vector look nearly identical; or
 - 3.3.2. flatline S-ECGs in the Alternate sensing vector.
 - 3.4. Assess sensing performance in-clinic during isometrics and/or posture changes if any of the following is observed: non-physiologic, mechanical artifacts and/or high electrode impedance alerts. If isometrics and/or posture changes provoke non-physiologic, mechanical artifacts, this may indicate onset of an electrode body fracture.
4. Imaging. If an electrode body fracture is suspected, perform chest radiography in PA and left lateral view projections, ensuring the entire electrode length can be visualized to enable differential diagnosis of competing causes of high impedance or artifact signals. Portable X-ray images typically provide insufficient clarity to evaluate electrode integrity. In the absence of any indications of electrode fracture, surveillance X-rays are not recommended.
5. Shocks and beeping tones. During the next in-office follow-up visit, demonstrate the device beeper to the patient using the programmer's Test Beeper function available from the Beeper Control screen within the Utilities menu.
 - For patients not monitored by LATITUDE, repeat the beeper demonstration following any MRI scan, as strong magnetic fields may cause permanent loss of beeper volume; and
 - Remind all patients to promptly contact their physician if beeping tones are heard from their device or if a shock is delivered.
6. Evaluate risk. The potential for life-threatening harm due to an electrode body fracture is greatest for:
 - patients with a history of life-threatening ventricular arrhythmias such as secondary prevention indication or previous appropriate shock for VT/VF;
 - patients who are unable to be reliably followed remotely or in person every three months; or
 - patients who are not monitored via LATITUDE and are unable to hear beeping tones
7. Replacement. Following consultation with Boston Scientific Technical Services, promptly replace any electrode that is indicated to have compromised integrity as evidenced by non-physiologic, mechanical artifacts, high impedance alert, and/or X-ray. Routine prophylactic replacement of an electrode without evidence of fracture is not recommended. Return explanted devices to Boston Scientific.
8. De novo and replacement S-ICD candidates. Consider overall S-ICD performance with respect to the competing risks for transvenous ICDs. The Product Performance Report includes up-to-date performance data on Boston Scientific transvenous leads and subcutaneous electrodes.

PRODUCT

Identifiable by serial number. Not all serial numbers are affected.

A serialized search tool to determine if a specific device is affected by this product advisory is available here: [Device Lookup Tool](#)

EMBLEM S-ICD
Models A209, A219

[EMBLEM Electrical Overstress, Physician Letter, December 2020](#)

[EMBLEM Electrical Overstress, Patient Letter, December 2020](#)

ORIGINAL COMMUNICATION Dec 2020 — EMBLEM S-ICD Electrical Overstress

Voluntary Physician Advisory
FDA Classification: Class I

This advisory discusses the potential for a specific subset of approximately 3,350 EMBLEM™ Subcutaneous Implantable Cardioverter Defibrillators (S-ICDs) (Model A209 and A219) to experience a malfunction during high voltage therapy delivery, necessitating device replacement due to electrical overstress (i.e., damage to the device caused by electrical shorting).

Laboratory analysis of the returned devices confirmed evidence of electrical overstress damage in the device feedthrough area. Investigation has shown that, over time, variations in header assembly allowed a very small pathway for moisture ingress enabling a shorting condition to occur during delivery of high voltage therapy. Each of the devices exhibiting electrical overstress were built within a specific timeframe (between May 2015 through December 2017); a header assembly subprocess was found to be subject to process variations directly contributing to this behavior. There is no available method to detect whether an individual device is vulnerable to this condition prior to its occurrence. It is important to note that not all S-ICDs built during this timeframe were exposed to these process variations.

Estimated Rate of Occurrence

- Boston Scientific has confirmed six (6) events of EMBLEM S-ICD electrical overstress malfunctions that have occurred in association with delivery of high voltage therapy. These events manifested clinically by the subsequent inability to interrogate the device or by display of device-based errors/alerts. Boston Scientific Technical Services recommended device replacement in each instance, and no serious patient injury or death has been reported.

- The projected occurrence rate for this electrical overstress behavior is 0.3% at 5 years, and the most common clinical outcome is early device replacement. Although there have been no serious injuries reported to date, the potential exists for life-threatening harm due to an inability to provide needed defibrillation therapy, as it is possible that either all or a portion of programmed defibrillation shock energy may not actually be delivered in the event of an electrical overstress malfunction. We estimate that the probability of the hypothetical worst-case harm associated with loss of ambulatory ventricular tachycardia/ventricular fibrillation therapy resulting in death is 0.09% at 5 years

Standard Warranty program available, please contact your local representative for terms and conditions.

CURRENT STATUS 05-Jul-22

Estimated Rate of Occurrence

- The projected occurrence rate for this electrical overstress behavior is 0.3% at 5 years, and the most common clinical outcome is early device replacement.

- We estimate that the probability of the hypothetical worst-case harm associated with loss of ambulatory ventricular tachycardia/ventricular fibrillation therapy resulting in death is 0.09% at 5 years

CURRENT RECOMMENDATION 05-Jul-22

1. Remote monitoring. Enroll and monitor patients through the LATITUDE NXT Patient Management System to facilitate prompt detection of accelerated depletion or alert conditions such as ERI or EOL during the interval between in-office device checks. Instruct patients to comply with remote checks and interrogations.
2. Follow-up interval. Perform a system follow-up every 3 months per labeling via remote or in-office interrogation.
3. During follow-ups. Promptly investigate any suspected indication of accelerated battery depletion, and contact Boston Scientific Technical Services for assistance as needed.
4. Demonstrate beeping tones. During the next in-office follow-up visit, demonstrate the device beeper to the patient using the programmer's Test Beeper function available from the Beeper Control screen within the Utilities menu.
 - For patients not monitored by LATITUDE, repeat the beeper demonstration following any MRI scan as strong magnetic fields may cause permanent loss of beeper volume; and
 - Remind patients to promptly contact their physician if beeping tones are heard from their device as this may be an indication of ERI.
5. Evaluate risk. The potential for life-threatening harm due to accelerated depletion is greatest for:
 - Patients with a history of life-threatening ventricular arrhythmias such as secondary prevention indication or previous appropriate shock for ventricular arrhythmias;
 - Patients who are unable to be reliably followed remotely or in person every 3 months; or
 - Patients who are not monitored via LATITUDE and are unable to hear beeping tones.
6. Replacement. Replace any affected EMBLEM S-ICD suspected of exhibiting accelerated battery depletion within 21 days of ERI. Alternatively, Boston Scientific Technical Services can provide a recommended replacement interval specific to an individual device by using data from the programmer or LATITUDE.
 - In other cases of high risk, as indicated by the factors listed above, consider prophylactic device replacement after taking individual patient preferences and circumstances into account through a process of shared decision-making.
 - Return explanted devices to Boston Scientific. A no cost Return Product kit is available from your local Boston Scientific representative.

PRODUCT	ORIGINAL COMMUNICATION Aug 2019 and Dec 2020 — EMBLEM S-ICD Premature Depletion
Identifiable by serial number. Not all serial numbers are affected.	Voluntary Physician Advisory FDA Classification August 2019: Class II FDA Classification December 2020: Class II
A serialized search tool to determine if a specific device is affected by this product advisory is available here: Device Lookup Tool	In August 2019, a physician communication discussed a subset of EMBLEM™ Subcutaneous Implantable Cardioverter Defibrillators (S-ICDs) that may result in a need for device replacement (ERI/EOL) earlier than expected due to compromised performance of an electrical component causing accelerated battery depletion.
EMBLEM S-ICD Models A209, A219	In December 2020, the advisory population was expanded to a total of approximately 42,000 distributed EMBLEM S-ICDs with an elevated likelihood of a low voltage capacitor causing accelerated battery depletion. This behavior can be detected if an unexpected decrease in remaining battery capacity is observed between remote/in-clinic follow-ups. Progression of accelerated depletion eventually produces a battery status replacement indicator (ERI) which is detectable through ambulatory beeping tones, remote monitoring, or in-clinic follow-up. Devices exhibiting this accelerated depletion behavior are capable of providing therapy for a minimum of 21 days after ERI independent of when EOL is initiated.
EMBLEM Premature Depletion, Physician Letter, August 2019	
EMBLEM Premature Depletion, Patient Letter, August 2019	
EMBLEM Premature Battery Depletion, Physician Letter Update, December 2020	The most common clinical outcome associated with this device behavior is early replacement. In August 2018, Boston Scientific transitioned S-ICDs to an alternative low voltage capacitor. All EMBLEM S-ICDs with the original low voltage capacitor are included in either the original or the expanded advisory population and none are available for implantation.
EMBLEM Premature Depletion, Patient Letter Update, December 2020	<i>Estimated Rate of Occurrence</i> • The August 2019 advisory subset is comprised of approximately 400 distributed worldwide devices manufactured in July 2017. The August 2019 advisory subset has a projected rate of accelerated depletion of 15.1% at 5 years with a projected potential for life-threatening harm in this subset of approximately 1 in 50,000 at 5 years.
EMBLEM Premature Battery Depletion, Physician Letter Update, February 2022	• The December 2020 advisory subset is comprised of approximately 42,000 distributed worldwide devices manufactured before August 2018. The December 2020 advisory subset has a projected rate of accelerated depletion of 3.7% at 5 years with a projected potential for life-threatening harm in this subset of approximately 1 in 250,000 at 5 years.
EMBLEM Premature Depletion, Patient Letter Update, February 2022	Standard Warranty program available, please contact your local representative for terms and conditions.
	CURRENT STATUS 05-Jul-22
	The existing Battery Depletion (BD) alert has been enhanced to enable detection of hydrogen-induced accelerated battery depletion in Model A209 and A219 EMBLEM S-ICDs. Affected devices must be interrogated by a programmer with updated software.
	<i>Estimated Rate of Occurrence</i> Because the 5-year malfunction rate for the August 2019 and December 2020 populations has converged, a single malfunction rate is reported for the combined populations. There are approximately 28,000 active worldwide devices.
	The malfunction rate is 11.7% at 5 years with a projected potential for life-threatening harm of approximately 1 in 200,000 at 5 years.
	There have been zero deaths associated with this behavior. There have been zero malfunctions for this behavior in devices manufactured with contemporary low-voltage capacitors.

CURRENT RECOMMENDATION 05-Jul-22

Recommendations for countries where enhanced BD alert software upgrade is available. Contact your local Boston Scientific sales representative to determine availability of software in your country.

1. Programmer Software Upgrade. Confirm programmers at your center have been upgraded.
 - Model 3300 LATITUDE Programmers are supported with Model 3877 v1.03 application
 - Model 3200 EMBLEM Programmers are supported with Model 2877 v4.09 application
2. Next Follow-up. Boston Scientific continues to recommend 3-month follow-ups per labeling. Bearing in mind the risk versus benefits of in-person visits in the setting of the global COVID-19 pandemic, consider an in-person visit at the next scheduled follow-up, so the enhanced BD alert can be enabled in each affected device.
 - When an EMBLEM S-ICD is first interrogated by an upgraded programmer, an S-ICD software update will be performed. Per labeling, monitor the patient and have external defibrillation equipment available as tachycardia therapy is suspended during a S-ICD software update.
 - If a BD alert occurs, follow screen prompts and contact Technical Services. Using device data, Technical Services can provide a replacement interval.
3. Update Records. For each patient with an affected EMBLEM S-ICD, append their medical record with this letter to maintain awareness of this topic for the remaining service life of the device.

Follow-up Recommendations:

1. Remote monitoring. Enroll and monitor patients through the LATITUDE NXT Patient Management System to facilitate prompt detection of accelerated depletion or alert conditions such as ERI or EOL during the interval between in-office device checks. Instruct patients to comply with remote checks and interrogations.
2. Follow-up interval. Perform a system follow-up every 3 months per labeling via remote or in-office interrogation.
3. During follow-ups. Promptly investigate any suspected indication of accelerated battery depletion, and contact Boston Scientific Technical Services for assistance as needed.
4. Demonstrate beeping tones. During the next in-office follow-up visit, demonstrate the device beeper to the patient using the programmer's Test Beeper function available from the Beeper Control screen within the Utilities menu.
 - For patients not monitored by LATITUDE, repeat the beeper demonstration following any MRI scan as strong magnetic fields may cause permanent loss of beeper volume; and
 - Remind patients to promptly contact their physician if beeping tones are heard from their device as this may be an indication of ERI.
5. Evaluate risk. The potential for life-threatening harm due to accelerated depletion is greatest for:
 - Patients with a history of life-threatening ventricular arrhythmias such as secondary prevention indication or previous appropriate shock for ventricular arrhythmias;
 - Patients who are unable to be reliably followed remotely or in person every 3 months; or
 - Patients who are not monitored via LATITUDE and are unable to hear beeping tones.
6. Replacement. Replace any affected EMBLEM S-ICD suspected of exhibiting accelerated battery depletion within 21 days of ERI. Alternatively, Boston Scientific Technical Services can provide a recommended replacement interval specific to an individual device by using data from the programmer or LATITUDE.
 - In other cases of high risk, as indicated by the factors listed above, consider prophylactic device replacement after taking individual patient preferences and circumstances into account through a process of shared decision-making.
 - Return explanted devices to Boston Scientific. A no cost Return Product kit is available from your local Boston Scientific representative.

PRODUCT	ORIGINAL COMMUNICATION November 2018 — SQ-RX 1010 Shortened Replacement Time
Identifiable by serial number. Not all serial numbers are affected.	Voluntary Physician Advisory FDA Classification: Unclassified
A serialized search tool to determine if a specific device is affected by this product advisory is available here: Device Lookup Tool	This advisory discusses the potential for a shortened replacement interval after a Charge Time (CT) / Battery Depletion (BD) alert has occurred or after the battery status reaches Elective Replacement Indicator (ERI) in the first-generation Subcutaneous Implantable Cardioverter Defibrillator (S-ICD) system's SQ-RX™ Model 1010 Pulse Generator (PG).
S-ICD Model 1010	The SQ-RX Model 1010 PG provides an Elective Replacement Indicator (ERI) as the PG approaches the end of its expected battery service life. When the battery reaches ERI through normal use, there is sufficient capacity to support up to 90 days of continued operation, including up to 6 maximum energy charges/shocks before fully depleting. However, if the PG experiences a latent battery malfunction resulting in accelerated battery depletion, the reserve battery capacity available beyond ERI may not be sufficient to support the full 90-day interval or additional shock therapy before depleting. The rate of depletion for a latent battery malfunctions varies.
SQ-RX 1010 Shortened Replacement Time, Physician Letter, November 2018	
SQ-RX 1010 Shortened Replacement Time, Patient Letter, November 2018	The SQ-RX model 1010 PGs include separate monitors for charging and battery performance. The Charge Time (CT) alert is designed to detect unsuccessful charging of the high voltage capacitors within 44 seconds. The Battery Depletion (BD) alert is designed to detect higher rates of accelerated battery depletion. When an alert condition occurs, the patient is notified through beeping tones and the clinician user is notified through programmer messages. Most battery malfunctions exhibit a sufficient rate of accelerated depletion to be detected by one of these alerts. Some battery malfunctions exhibit a slower rate of accelerated depletion, which is not detected as an alert condition. Based on an analysis of accelerated battery depletion events where only ERI presented (no alert condition), at least one maximum energy shock has been determined to be available for at least 20 days after ERI.
	<p><i>Estimated Rate of Occurrence</i></p> <p>The projected occurrence rate for latent battery malfunctions for SQ-RX Model 1010 PGs is up to 2% at 5 years. There have been no reports of injuries or deaths associated with this behavior. Laboratory analysis of returned PGs with latent battery malfunctions has shown some depletions to a level at which therapy would not have been available if not replaced in accordance with the recommendations above. Based on a 3-month follow-up interval, the potential for life threatening harm for this behavior is 0.006% (1 in 16,667) at 5 years. However, the potential for life-threatening harm is greater for secondary prevention patients or those who have received appropriate therapy previously, patients with longer follow-up intervals, and/or patients who are unable to hear beeping tones. For these patients, the benefit associated with prophylactically replacing the PG may outweigh the risks associated with a shortened replacement interval due to latent battery malfunction.</p>
	Standard Warranty program available, please contact your local representative for terms and conditions.
	CURRENT STATUS 05-Jul-22
	<p><i>Estimated Rate of Occurrence</i></p> <p>The projected occurrence rate for latent battery malfunctions for SQ-RX Model 1010 PGs is up to 2% at 5 years. There have been no reports of injuries or deaths associated with this behavior.</p>
	CURRENT RECOMMENDATION 05-Jul-22
	<ul style="list-style-type: none"> • Follow-Up. Consistent with the SQ-RX Model 1010 PG User Manual: <ul style="list-style-type: none"> - Perform in-clinic checks every 3 months as the PG is not capable of remote patient management; - If it has been more than 3 months since a patient's last in-clinic follow-up, schedule a follow-up within the next month and every 3 months thereafter; - During the next follow-up visit, demonstrate the beeper by applying a magnet over the PG to elicit beeping tones; and - Remind patients to promptly contact their physician if beeping tones are heard from their PG as this may be an indication of a CT / BD alert or ERI. - Append the patient's medical record with this letter to maintain awareness of this topic for the remaining service life of their PG
	<ul style="list-style-type: none"> • Evaluate Risk. The potential for life-threatening harm is greater for patients who have experienced life-threatening ventricular arrhythmias, patients not followed every 3 months, and/or patients who are unable to hear beeping tones. For these patients, the benefit associated with prophylactically replacing the PG may outweigh the risks associated with a shortened replacement interval due to latent battery malfunction
	<ul style="list-style-type: none"> • CT / BD Alerts. Promptly investigate any beeping tones, CT alerts, or BD alerts and report them to Boston Scientific Technical Services. Using saved PG data, Technical Services can determine if an accelerated battery depletion exists and provide guidance for replacement.
	<ul style="list-style-type: none"> • ERI. To mitigate the rare potential for undetected accelerated battery depletion, replace SQ-RX Model 1010 PGs within 20 days of ERI. If a longer replacement interval is desired, save PG data and contact Technical Service to determine a recommended replacement interval. Note: CT / BD Alerts appearing before or after ERI should always be reported to Technical Services for evaluation

PRODUCT

ORIGINAL COMMUNICATION December 2017 — Minute Ventilation Signal Oversensing

Voluntary Physician Advisory

A serialized search tool to determine if a specific device is affected by this product advisory is available here: [Device Lookup Tool](#)

VALITUDE CRT-P
Models U125, U128

VISIONIST CRT-P
Models U225, U226, U228

ACCOLADE Pacemaker
Models L300, L301, L310, L311, L321, L331

PROPONENT Pacemaker
Models L200, L201, L209, L210, L211, L221, L231

ESSENTIO Pacemaker
L131

ALTRUA 2 Pacemaker
Models S701, S702, S722

This advisory discusses intermittent oversensing of the Minute Ventilation (MV) sensor signal with certain Boston Scientific pacemaker and cardiac resynchronization therapy pacemaker systems (pacemakers). MV sensor signal oversensing may cause pre-syncope or syncope due to periods of pacing inhibition. This MV behavior may occur with any manufacturer's pacing lead system, but Boston Scientific has determined it to be more likely for affected Boston Scientific pacemakers using Medtronic or Abbott/St. Jude (Abbott) leads implanted in either the right atrium (RA) or right ventricle (RV).

The MV sensor in Boston Scientific pacemakers can be used for RightRate™ (rate adaptive pacing), Respiratory Rate Trend, or AP Scan. When the RA/RV pacing leads and lead terminal connections are operating as intended, the MV sensor signal is appropriately filtered and therefore is not detected by the pacemaker or displayed on electrograms (EGMs). However, intermittency related to the lead or pacemaker-lead connection has the potential to create a transient high impedance condition. A high impedance condition may subsequently alter the MV sensor signal such that it becomes visible on EGMs and potentially subject to oversensing on the RA or RV channels. For a technical description of the Boston Scientific's MV sensor, please refer to Appendix A in the December 2017 physician letter.

Engineering analysis and testing, as well as evaluation of post-market surveillance data, demonstrates an elevated potential for oversensing of the MV sensor signal in certain pacemaker systems connected to Medtronic or Abbott pacing leads. Although all leads evaluated in simulated testing environments comply with appropriate connector standards, we have discovered subtle differences amongst lead manufacturers in the surface finish of the lead terminal ring and amount of axial and radial terminal ring motion within the pacemaker header. These factors may result in intermittent increases in impedance leading to oversensing of the MV sensor signal or changes in daily impedance test measurements.

Estimated Rate of Occurrence

behavior is significantly greater when affected pacemakers are connected to Medtronic or Abbott pacing leads.

Affected pacemaker systems connected to the following RA/RV pacing leads ¹ :	Probability of Injury at 5 years	Probability of Life Threatening Harm at 5 years
Medtronic or Abbott pacing leads	0.0005 (1 in 2,000)	0.00001 (1 in 100,000)
Boston Scientific pacing leads (including DEXTRUS)	0.00003 (1 in 33,333)	0.0000008 (1 in 1,250,000)
All pacing leads combined ²	0.00008 (1 in 12,500)	0.000002 (1 in 500,000)

[Minute Ventilation Signal Oversensing, Physician Letter, December 2017](#)

[Minute Ventilation Signal Oversensing, Patient Letter, December 2017](#)

[Minute Ventilation Signal Oversensing, Update letter, January 2019](#)

CURRENT STATUS 05-Jul-22

Software has been developed that eliminates the risk of pacing inhibition due to Minute Ventilation (MV) sensor signal oversensing in pacemakers and cardiac resynchronization therapy pacemaker (CRT-P) systems. The software includes a Signal Artifact Monitor (SAM) which further expands our proprietary suite of Safety Architecture automatic self-diagnostics. Once programmers are upgraded with this software, the SAM is automatically enabled whenever the MV sensor is enabled and continuously monitors electrograms for MV sensor signal artifacts. If MV artifacts are detected, the SAM either switches to the right ventricular vector or disables the MV sensor in approximately one second thus eliminating the risk of pacing inhibition due to MV sensor signal oversensing. Contact your local Boston Scientific sales representative to find out if this software is available in your country.

CURRENT RECOMMENDATION 05-Jul-22

Software is available in most countries to address the potential for pacing inhibition due to MV sensor signal oversensing in affected pacemakers. The software adds the Signal Artifact Monitor (SAM) to Boston Scientific's proprietary suite of Safety Architecture diagnostics. When enabled, the SAM continuously monitors electrograms for MV sensor signal artifacts and measures MV vector lead impedance values. If artifacts are detected or the MV vector lead impedance is out of range, the monitor either switches to the right ventricular vector or disables the MV sensor in approximately one second. In this manner, the SAM promptly eliminates the clinical risk of pacing inhibition associated with MV sensor signal oversensing.

Programmer	Software Model	Software Version
Model 3120 ZOOM Programmer	2869	2.06
Model 3300 LATITUDE Programmer	3869	1.05

If software is not available in your country, continue to follow advisory recommendations.

PRODUCT**ORIGINAL COMMUNICATION December 2017 — CRT Positive LV Offset and TPP Interaction**

Identifiable by serial number. Not all serial numbers are affected.

Voluntary Physician Advisory
FDA Classification: Unclassified

A serialized search tool to determine if a specific device is affected by this product advisory is available here:
[Device Lookup Tool](#)

This advisory discusses unintended asynchronous biventricular (BiV) pacing behavior when tracking elevated atrial intrinsic rhythms in certain Boston Scientific Cardiac Resynchronization Therapy (CRT) pacemakers (CRT-Ps) and defibrillators (CRT-Ds). Repeated detection of this unintended asynchronous BiV pacing behavior may result in the implanted device reverting to a permanent Safety Mode (Safety Core™) status thus requiring early replacement. The unintended asynchronous BiV pacing behavior can only occur when an infrequent combination of parameters are programmed, specifically:

VALITUDE CRT-P

Models U125, U128

- Left Ventricular (LV) Offset programmed to a positive value which exceeds the Atrial Blank after Ventricular Pace (A-Blank after V-Pace) interval; and
- Tracking Preference = ON (nominal).

VISIONIST CRT-P

Models U225, U226, U228

RESONATE CRT-D

Models G424, G425, G426, G428, G437, G447, G448, G524, G525, G526, G528, G537, G547, G548

Observed Rate

Of the 60,500 CRT devices distributed worldwide, Boston Scientific estimates approximately 300 CRT devices are programmed with the combination of parameters which may lead to this device behavior. There have been two confirmed instances of early device replacement due to this device behavior (0.7%). Of the two cases, a single patient death occurred due to complications related to the replacement procedure.

VIGILANT CRT-D

Models G224, G225, G228, G237, G247, G248

CURRENT STATUS 05-Jul-22**MOMENTUM CRT-D**

Models G124, G125, G126, G128, G138

Confirmed Malfunctions (worldwide)

There have been four confirmed instances of early device replacement due to this device behavior.

CHARISMA CRT-D

G337, G347, G348

CURRENT RECOMMENDATION 05-Jul-22

Software is available in most countries to address the rare potential for early replacement due to permanent Safety Mode status. The software imposes an interactive limit which prevents programming the device into a susceptible manner. Affected devices interrogated by an updated programmer are no longer susceptible to this issue.

AUTOGEN CRT-D

Models G172, G173, G175, G177, G179

Programmer	Device Therapy	Software Model	Software Version
Model 3120 ZOOM Programmer	CRT-Ps	2869	2.06
Model 3300 LATITUDE Programmer	CRT-Ps	3869	1.05
Model 3120 ZOOM Programmer	CRT-Ds	2868	4.07
Model 3300 LATITUDE Programmer	CRT-Ds	3868	1.07

DYNAGEN CRT-D

Models G150, G151, G156, G158

If software is not available in your country, continue to follow advisory recommendations.

INOGEN CRT-D

Models G140, G141, G146, G148

ORIGEN CRT-D

Models G050, G051, G056, G058

[CRT Positive LV Offset and TPP Interaction, Physician Letter, Dec 2017](#)

[CRT Positive LV Offset and TPP Interaction, Patient Letter, December 2017](#)

[CRT Positive LV Offset and TPP Interaction, Update Letter, January 2019](#)

<p>PRODUCT</p> <p>A serialized search tool to determine if a specific device is affected by this product advisory is available here:</p> <p>Device Lookup Tool</p> <p>COGNIS Models N106/N107/N108/N118/ N119/N120/P106/P107/P108</p> <p>TELIGEN VR Models E102/E103/F102/F103</p> <p>TELIGEN DR Models E110/E111/F110/F111</p> <p>Low Voltage Capacitor 2014 Physician Letter, Sep 17, 2014</p> <p>Low Voltage Capacitor 2014 Patient Letter, Sep 17, 2014</p> <p>Low Voltage Capacitor 2013 Physician Letter, Aug 29, 2013</p>	<p>ORIGINAL COMMUNICATION Aug 2013 and Sep 2014 — Low Voltage Capacitor</p> <p>Voluntary Physician Advisory FDA Classification August 2013: Class II FDA Classification September 2014: Class II</p> <p>In August 2013, a physician communication discussed a subset of COGNIS CRT-Ds and TELIGEN ICDs that had experienced an increased rate of premature battery depletion due to compromised performance of a low voltage (LV) capacitor. It also informed physicians how to identify and respond to a Safety Architecture low voltage alert. In September 2014, a second subset of devices was identified that may exhibit compromised LV capacitor performance at a rate that is similar to the August 2013 advisory subset. The second communication also discussed improvements to Safety Architecture's low voltage alert, which were released through a programmer software update.</p> <p>The performance of an LV capacitor may be compromised in some devices after two or more years of implant time, which will increase battery use and may eventually initiate one or more Safety Architecture alerts and patient-audible beeping.</p> <p>The most common alert is a yellow programmer screen that states, "Voltage is too low for projected remaining capacity. Contact Technical Services with Code 1003". LATITUDE issues a corresponding yellow alert (nominally configured "On"). In other instances, diminished LV capacitor performance can result in an early "Explant" battery status indicator (ERI) and a replacement window that may be less than 3 months.</p> <p>Devices that experience a low voltage alert require replacement. If not replaced, increased current drain could deplete the battery and impact therapy delivery and telemetry.</p> <p>Advisory population Approximately 22,800 devices identified in the August 2013 communication remain in service. In September 2014, Boston Scientific identified an additional 27,300 active devices that may exhibit diminished LV capacitor performance at a rate that is similar to the August 2013 advisory population. The projected cumulative rate of occurrence for LV capacitor malfunction within the total advisory population is approximately 2.9% at 60 months. Due to Safety Architecture alerts and timely physician response, the potential for life-threatening harm from loss of therapy is estimated to be less than 1 in 125,000 (0.0008%) at 60 months.</p> <p>CURRENT STATUS 05-Jul-22</p> <p><i>Estimated Rate of Occurrence</i></p> <ul style="list-style-type: none"> • COGNIS CRT-D and TELIGEN ICD advisory population - The rate of occurrence is 2.8% at 60 months, 5.8% at 72 months, 8.6% at 84 months, 10.9% at 96 months, 12.2% at 108 months, and 12.9% at 120 months. The potential for life-threatening harm from loss of therapy is approximately 1 in 200,000 (0.0005%) at 60 months. • COGNIS CRT-D and TELIGEN ICD populations (advisory and non-advisory) - The overall rate of occurrence is approximately 1.1% at 60 months, 2.4% at 72 months, 3.9% at 84 months, 5.2% at 96 months, 6.0% at 108 months, and 6.2% at 120 months. Since notifying customers of this behavior in September 2014 and improving the Safety Architecture voltage alert, the portion of malfunctions with compromised therapy is approximately 2.2%. The potential for life-threatening harm from loss of therapy is approximately 1 in 500,000 (0.0002%) at 60 months. • INCEPTA, ENERGEN and PUNCTUA CRT-Ds and ICDs - The rate of occurrence is 1.1% at 60 months, 2.0% at 72 months, 3.0% at 84 months, 3.8% at 96 months, 4.3% at 108 months, and 4.5% at 120 months. The portion of malfunctions with compromised therapy is approximately 0.3%. The potential for life-threatening harm from loss of therapy is approximately 1 in 2,500,000 (0.00004%) at 60 months. <p>CURRENT RECOMMENDATION 05-Jul-22</p> <p>Updated Software In 2014 BSC released software that enhances the effectiveness of the Safety Architecture tools later in device life. When the software was introduced, BSC recommended an in-clinic follow-up with an updated programmer at first opportunity, but within 3 months for patients within the advisory population. In-clinic interrogation with a current programmer automatically downloads Safety Architecture software upgrades from the programmer into individual patient devices, enhancing detection of a compromised LV capacitor before therapy delivery is impacted.</p> <p>LATITUDE Patient Management System Boston Scientific recommends that advisory patients utilize the LATITUDE Patient Management System (remote monitoring), which offers additional/supplemental device checks between office visits. Use of LATITUDE may accelerate detection of Safety Architecture alerts, and can notify if/when scheduled checkups have not occurred. Verify that the yellow alert "Voltage was too low for projected remaining capacity" is configured "On".</p> <p>Additional Recommendations</p> <ul style="list-style-type: none"> - After a device has been upgraded with new software, Boston Scientific recommends normal device monitoring as described in device labeling. - Device replacement is not recommended for advisory devices displaying normal behavior. - Promptly investigate alerts, device beeping, and unanticipated replacement indicator messages. - Following a Safety Architecture alert, contact Boston Scientific Technical Services as directed on programmer screens. Technical Services can facilitate an evaluation of device information downloaded from a recent in-clinic or remote LATITUDE interrogation, which may help to clarify available replacement time. <p>Standard Warranty program available, please contact your local representative for terms and conditions.</p>
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PRODUCT	ORIGINAL COMMUNICATION 01-Dec-09 — Subpectoral Implant
<p>A serialized search tool to determine if a specific device is affected by this product advisory is available here: Device Lookup Tool</p> <p><i>This advisory is limited to those models listed below implanted subpectorally.</i></p>	<p>Voluntary Physician Advisory FDA Classification: Class II</p> <p>This advisory is limited to devices identified in the product model list that were implanted subpectorally. Devices implanted subcutaneously are not included in this advisory.</p> <p>Boston Scientific has determined that the bond between the header and case could be weakened by significant forces associated with a subpectoral implant procedure or when a device in a subpectoral position is pushed against a rib during contraction of the pectoralis muscle. A weakened header bond may alter lead impedance and introduce noise that may inhibit pacing therapy or initiate inappropriate tachy therapy. Additional mechanical stress applied to a weakened bond may eventually cause header connection wires to fracture, resulting in loss of therapy.</p>
<p>COGNIS Models N106/N107/N108/N118/N119 P106/P107/P108</p>	<p>A weakened header bond can result in one or more of the following device behaviors:</p> <ul style="list-style-type: none"> – Significant changes in measured lead impedance – Noise on real-time or stored electrograms – Intermittent inhibition of pacing – Inappropriate anti-tachy pacing or shock therapy
<p>TELIGEN VR Models E102/F102</p>	<ul style="list-style-type: none"> – Loss of pacing therapy – Loss of anti-tachy pacing and shock therapy
<p>TELIGEN DR Models E110/E111/F110/F111</p>	<p>No patient deaths related to this behavior have been reported. Patients have required early device replacement due to inappropriate shocks and/or noise induced by pocket manipulation or arm movement.</p> <p><i>Rate of Occurrence</i> The implant orientation of devices is not reported to Boston Scientific, making it difficult to provide rate of occurrence and prediction information. Two (2) reports have been received worldwide of subpectoral implants with weakened header bonds. An estimated 5% of approximately 77,000 COGNIS and TELIGEN devices worldwide have been implanted in a subpectoral location.</p>
<p>Subpectoral Implant 2009 Physician Letter, Dec 01, 2009</p> <p>Subpectoral Implant 2009 Patient Letter, Dec 01, 2009</p>	<p>The following factors may also impact the risk of failure if implanted in a subpectoral location:</p> <ul style="list-style-type: none"> – Exact location of the patient's ribs relative to the device – Body size and/or muscle mass of the patient (risk may increase for larger/muscular patients) – Activity level and/or occupation of the patient (risk may increase for more active patients)
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CURRENT STATUS 05-Jul-22	
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<i>Reported events (worldwide)</i>	
<p>106 reports have been received worldwide of subpectoral implants with weakened header bonds. An estimated 10% of approximately 104,000 COGNIS and TELIGEN devices worldwide have been implanted in a subpectoral location.</p> <p>There have been no reported patient deaths associated with this advisory.</p>	
<i>Rate of Occurrence</i>	
<p>An estimated 10% of COGNIS and TELIGEN devices worldwide have been implanted in a subpectoral position. The rate of occurrence for subpectoral implants of COGNIS advisory devices is 1.95% at 60 months. The rate of occurrence for subpectoral implants of TELIGEN advisory devices is 0.53% at 60 months.</p>	
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CURRENT RECOMMENDATION 05-Jul-22	
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<p>If a patient's device was implanted subcutaneously, it is excluded from this advisory and no change to current patient management is recommended.</p>	
<p>For affected devices implanted in a subpectoral location:</p>	
<ul style="list-style-type: none"> – Follow patient at least once every three months as recommended in device instructions for use. – Consider advising patients to contact their physician or clinic if they receive shocks, in order to ensure timely review of associated electrograms and other device data via in-clinic or remote interrogation. – Where available, consider using the LATITUDE® Patient Management System to facilitate remote device checks between in-clinic follow-ups. 	
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<p>Standard Warranty program available, please contact your local representative for terms and conditions.</p>	

Trademarks

The following are trademarks of Boston Scientific Corporation, CRM Division (doing business as Cardiac Pacemakers, Inc., a Boston Scientific Company) used in connection with the goods or services indicated:

ACCOLADE	EQUIO	LUX-DX
ACUITY	ENDOTAK ENDURANCE	MOMENTUM
ACUITY X4	ENDOTAK ENDURANCE EZ	ORIGEN
ADVANTIO	ENDOTAK ENDURANCE RX	PERCIVA
ALTITUDE	ENDOTAK RELIANCE	PROPONENT
ALTRUA	ENERGEN	PUNCTUA
AUTOGEN	ESSENTIO	RELIANCE 4-FRONT
AVT	FINELINE	RESONATE
CHARISMA	FLEXTEND	SELUTE
COGNIS	FORMIO	SWEET PICOTIP
CONFIENT	INSIGNIA	SWEET TIP
CONTAK	INGENIO	TELIGEN
CONTAK RENEWAL	INGEVITY	VIGILANT
CONTAK RENEWAL TR	INCEPTA	VISIONIST
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Q-TRAK	SQ-RX	S-ICD
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Rhythm Management

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