

2022

Rhythm Management Product Performance Report

Q4 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 Q4 2022 report includes data through October 3rd, 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,

Alexandra Naughton
Vice President, Quality Assurance

Boston Scientific Reviewers

Alexandra Naughton

Vice President, Quality Assurance

John Kerrigan

Director, Quality Assurance

Maria Macuare-Gorden, M.D.

Vice President of Medical Safety

Monica Degnan, M.S.

Senior Statistician

John Risse

Manager, Product Performance Reporting

Independent Reviewer

Professor Douglas Hawkins, Ph.D.

Editor

Steven Brillhart

Senior Data Analyst

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.

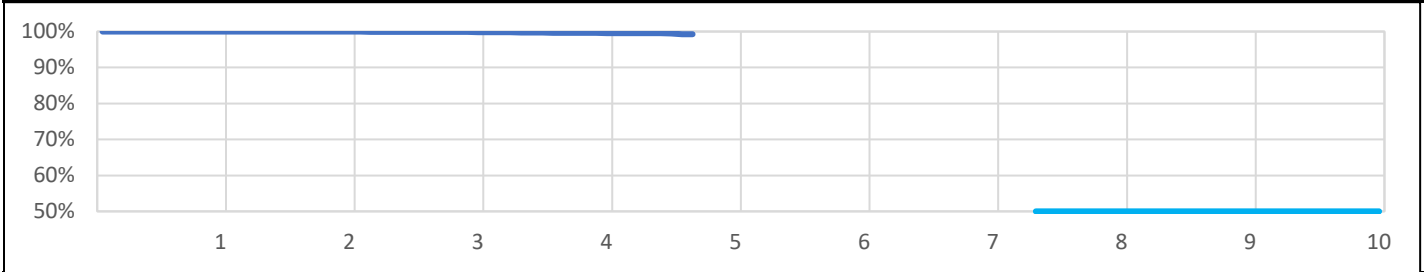


RESONATE/MOMENTUM/CHARISMA/VIGILANT CRT-D

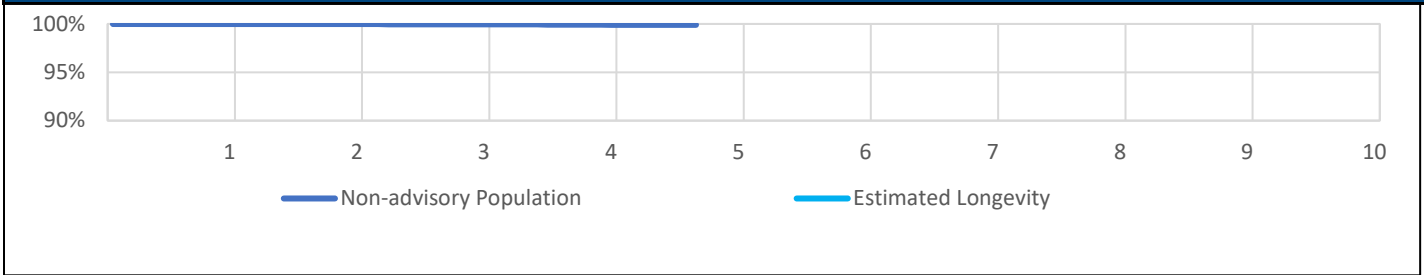
Models: G124/G125/G126/G128/G138/G224/G225/G228/G237/G247/G248/G324/G325/G347/G348/
G424/G425/G426/G428/G437/G447/G448/G524/G525/G526/G528/G537/G547/G548

US Summary			
US Registered Implants:	60,000	US Normal Battery Depletions:	39
US Approval Date:	September 2017	US Malfunctions:	15
US Estimated Active Implants:	55,000	Without Compromised Therapy:	13
		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%	99.7%	99.2%	--	--	--	--	--
Registered Implants:	Malfunctions Only		100.0%	100.0%	100.0%	99.9%	99.9%	--	--	--	--	--
	60,000 Effective Sample Size		40148	24201	12291	3571	331	--	--	--	--	--

@ 57 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	32
Worldwide Distribution	112,000

	With Compromised Therapy	Without Compromised Therapy	Total
Electrical			
Integrated circuit (63)	1	4	5
Low-voltage capacitor (69)	0	6	6
Battery (53)	2	5	7
High voltage capacitor (75)	1	0	1
Software			
Memory errors (51)	0	9	9
Other			
Non-patterned, other	1	3	4
Grand Total	5	27	32

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

AUTOGEN CRT-D

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

Worldwide Confirmed Malfunctions		29	
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	2	2
Battery (53)	2	7	9
Software			
Safety Core-unintended biventricular pacing (64)	0	1	1
Other			
Non-patterned, other	1	3	4
Grand Total	5	24	29

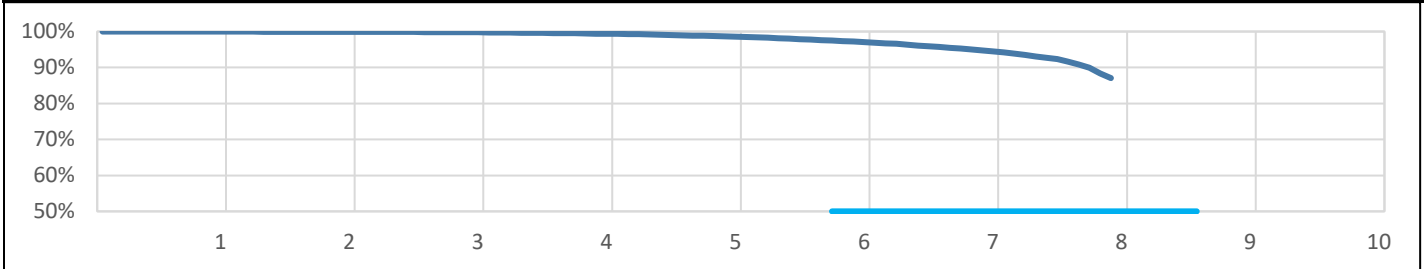
References cited in table above [\(link\)](#)

DYNAGEN/INOGEN/ORIGEN CRT-D

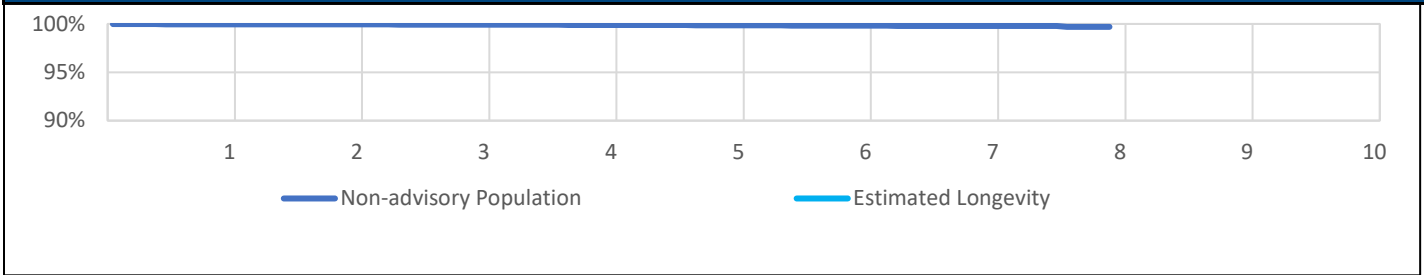
Models: G050/G051/G056/G058/G140/G141/G146/G148/G150/G151/G154/G156/G158

US Summary			
US Registered Implants:	74,000	US Normal Battery Depletions:	946
US Approval Date:	April 2014	US Malfunctions:	76
US Estimated Active Implants:	58,000	Without Compromised Therapy:	64
		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%	99.8%	99.4%	98.7%	97.2%	94.8%	87.1%	--	--
Registered Implants:	Malfunctions Only	100.0%	99.9%	99.9%	99.9%	99.9%	99.8%	99.8%	99.7%	--	--
74,000	Effective Sample Size	63167	53854	44662	34665	23453	12405	4548	339	--	--

@ 96 months

DYNAGEN/INOGEN/ORIGEN CRT-D

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

Worldwide Confirmed Malfunctions		113	
Worldwide Distribution		124,000	
	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	14	14
High voltage capacitor (75)	2	1	3
Battery (53)	0	14	14
Software			
Memory errors (51)	3	25	28
Safety Core-unintended biventricular pacing (64)	0	3	3
Other			
Non-patterned, other	10	9	19
Grand Total	19	94	113

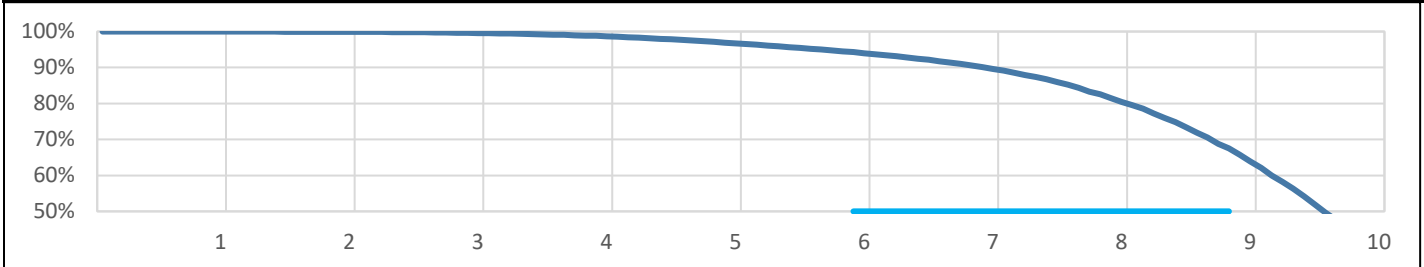
References cited in table above [\(link\)](#)

INCEPTA/ENERGEN/PUNCTUA CRT-D

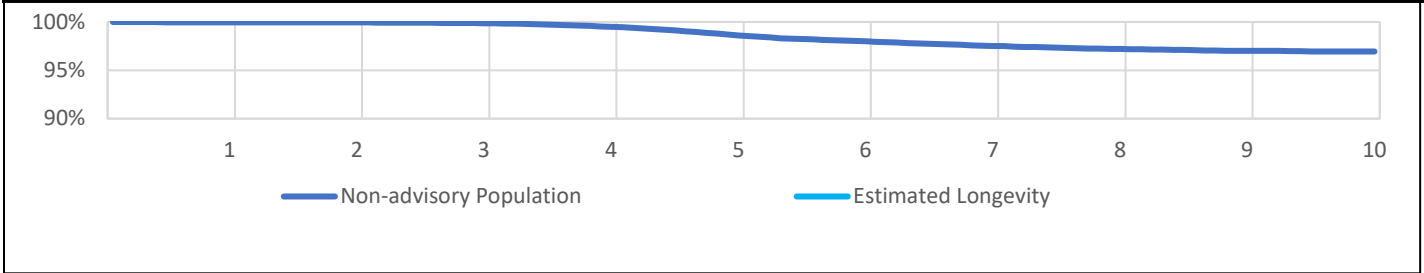
Models: N050/N051/N052/N053/N140/N141/N142/N143/N160/N161/N162/N163/N164/N165/P052/P053/P142/P143/P162/P163/P165

US Summary			
US Registered Implants:	53,000	US Normal Battery Depletions:	6,799
US Approval Date:	November 2011	US Malfunctions:	801
US Estimated Active Implants:	24,000	Without Compromised Therapy:	780
		With Compromised Therapy:	21

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%	81.5%	65.8%	40.0%
Registered Implants:	Malfunctions Only	100.0%	100.0%	99.9%	99.5%	98.7%	98.1%	97.5%	97.2%	97.0%	96.9%
53,000	Effective Sample Size	46309	41465	37008	32851	28797	24957	20661	14061	5619	782

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	1,287
Worldwide Distribution	81,000

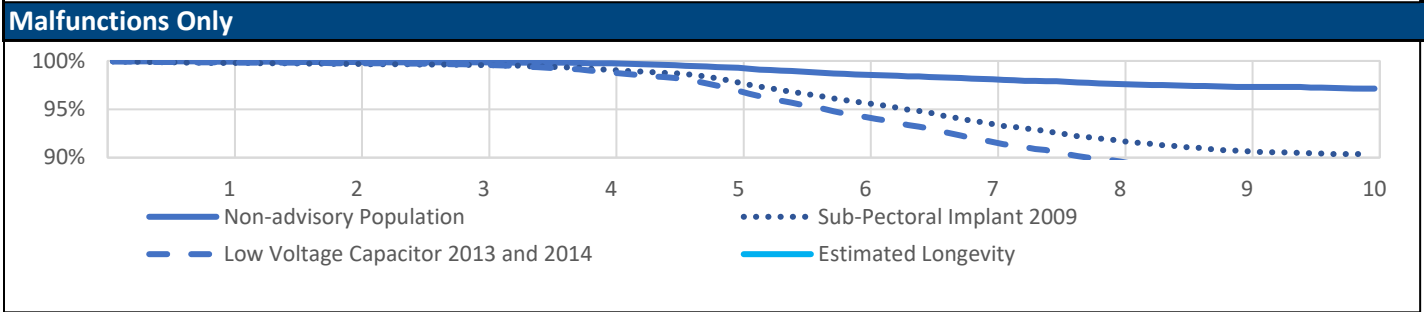
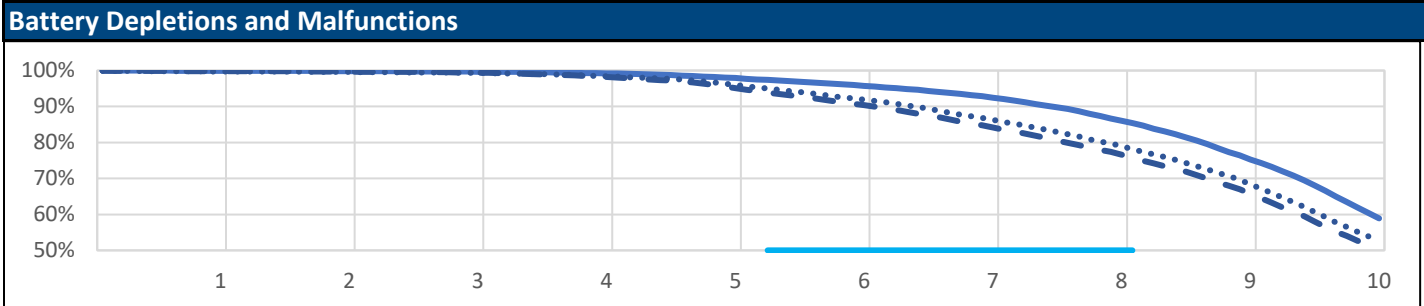
	With Compromised Therapy	Without Compromised Therapy	Total
Electrical			
Safety Core-electrocautery (42)	1	6	7
High-voltage capacitor (43)	5	0	5
Low-voltage capacitors (47)	0	1	1
Integrated circuit (50)	7	2	9
Battery (53)	1	11	12
Low-voltage capacitor (54)	6	1201	1207
Low-voltage capacitor (69)	0	8	8
Mechanical			
Transformer (38)	6	0	6
Software			
Memory errors (51)	0	8	8
Other			
Non-patterned, other	8	16	24
Grand Total	34	1253	1287

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:	15,206
US Approval Date:	March 2008	US Malfunctions:	2,096
US Estimated Active Implants:	15,000	Without Compromised Therapy:	1,903
		With Compromised Therapy:	193



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	31285	28057	25118	22400	19851	17366	14986	12492	9788	6781

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	16756	14281	11963	9735	7543	5151
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	15775	13722	11587	9612	7771	5969	4024

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

COGNIS CRT-D

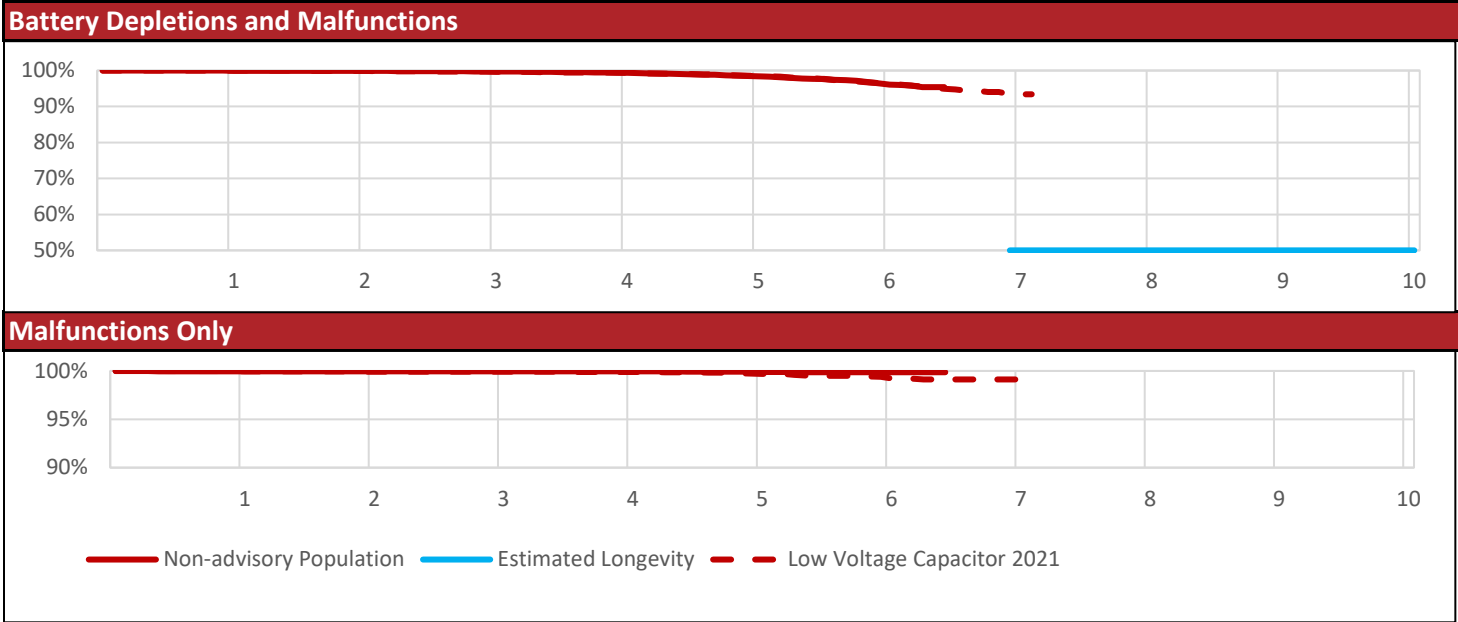
Models: N106/N107/N108/N118/N119/N120/P106/P107/P108

Worldwide Confirmed Malfunctions		2,956	
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	846	858
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	2687	2956

VISIONIST/VALITUDE

Models: U125/U128/U225/U226/U228

US Summary			
US Registered Implants:	46,000	US Normal Battery Depletions:	307
US Approval Date:	October 2014	US Malfunctions:	63
US Estimated Active Implants:	38,000	Without Compromised Therapy:	60
		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%	99.7%	99.4%	98.5%	96.5%	95.4%	--	--	--
Registered Implants:	Malfunctions Only		100.0%	99.9%	99.9%	99.9%	99.9%	99.9%	99.9%	--	--	--
	Effective Sample Size	40,000	28750	20285	13665	8071	4067	974	235	--	--	--

@ 78 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%	93.4%	93.4%	--	--
Registered Implants: 6,000	Malfunctions Only	100.0%	99.9%	99.9%	99.9%	99.7%	99.4%	99.1%	99.1%	--	--
	Effective Sample Size	5917	5285	4716	4152	3338	2101	468	276	--	--

@ 86 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

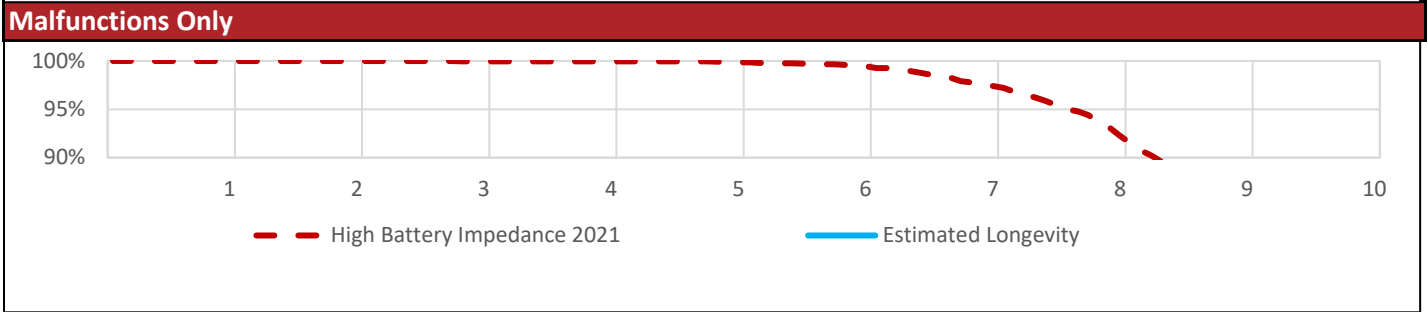
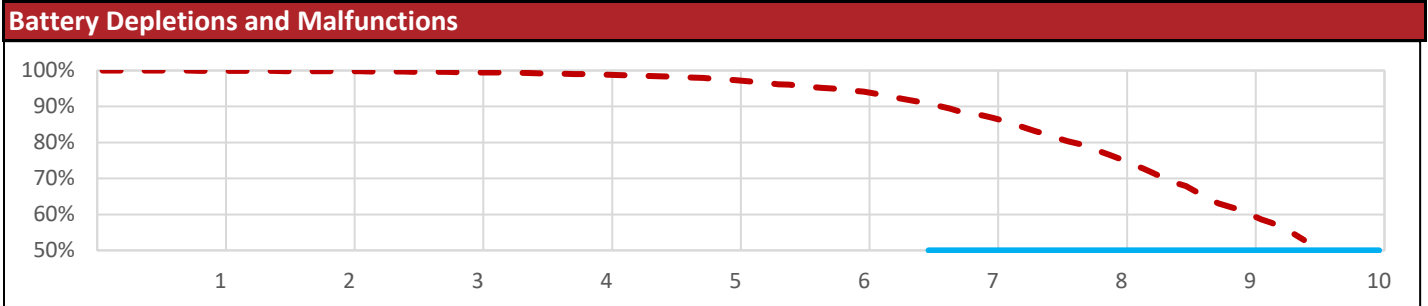
Worldwide Confirmed Malfunctions		99	
Worldwide Distribution		94,000	
	With Compromised Therapy	Without Compromised Therapy	Total
Electrical			
Low-voltage capacitors (47)	0	2	2
Integrated circuit (63)	1	8	9
Telemetry (68)	0	1	1
Hydrogen induced premature depletion - September 2018 (70)	0	18	18
Hydrogen induced premature depletion - June 2021 (83)	1	33	34
Software			
Memory errors (51)	0	13	13
Other			
Non-patterned, other	4	18	22
Grand Total	6	93	99

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:	940
US Approval Date:	May 2013	US Malfunctions:	331
US Estimated Active Implants:	4,000	Without Compromised Therapy:	327
		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%	94.3%	87.5%	76.4%	61.3%	52.9%
Registered Implants:	Malfunctions Only		100.0%	100.0%	100.0%	100.0%	99.9%	99.5%	97.7%	93.1%	85.0%	82.2%
	Effective Sample Size	10,000	8982	8008	7123	6314	5559	4727	3483	1846	560	240

@ 114 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	488		
Worldwide Distribution	24,000		
	With Compromised Therapy	Without Compromised Therapy	Total
Electrical			
High battery impedance initiating safety mode 2021 (82)	3	433	436
Low-voltage capacitors (47)	1	0	1
Other			
Non-patterned, other	4	47	51
Grand Total	8	480	488

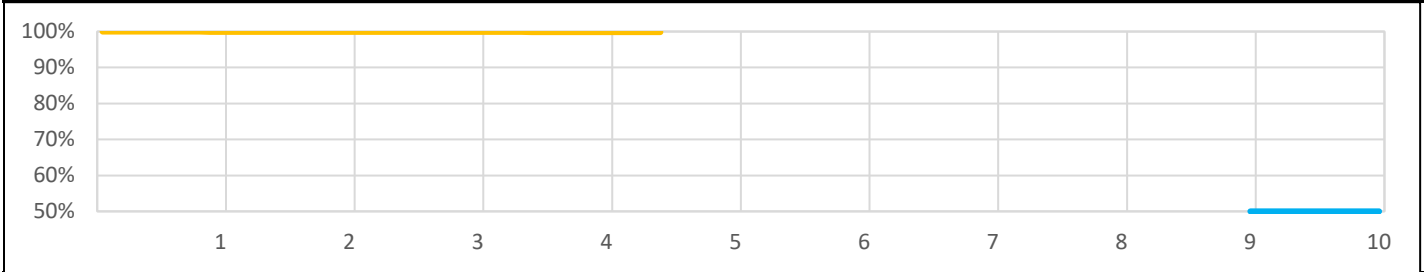
References cited in table above [\(link\)](#)

RESONATE/MOMENTUM/CHARISMA/VIGILANT ICD DR

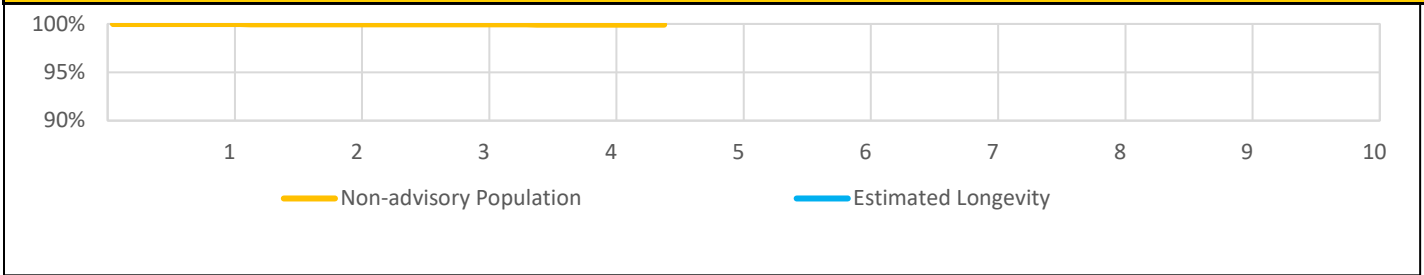
Models: D121/D221/D233/D321/D333/D421/D433/D521/D533

US Summary			
US Registered Implants:	36,000	US Normal Battery Depletions:	13
US Approval Date:	July 2017	US Malfunctions:	10
US Estimated Active Implants:	33,000	Without Compromised Therapy:	7
		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%	99.9%	99.8%	99.8%	--	--	--	--	--
Registered Implants:	Malfunctions Only	100.0%	100.0%	100.0%	99.9%	99.9%	--	--	--	--	--
	36,000 Effective Sample Size	22330	11837	5147	1180	228	--	--	--	--	--

@ 54 months

RESONATE/MOMENTUM/CHARISMA/VIGILANT ICD DR

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

Worldwide Confirmed Malfunctions		14	
Worldwide Distribution		65,000	
	With Compromised Therapy	Without Compromised Therapy	Total
Electrical			
High voltage capacitor (75)	2	0	2
Integrated circuit (63)	0	3	3
Software			
Memory errors (51)	0	5	5
Mechanical			
Solder joint (88)	1	0	1
Other			
Non-patterned, other	1	2	3
Grand Total	4	10	14

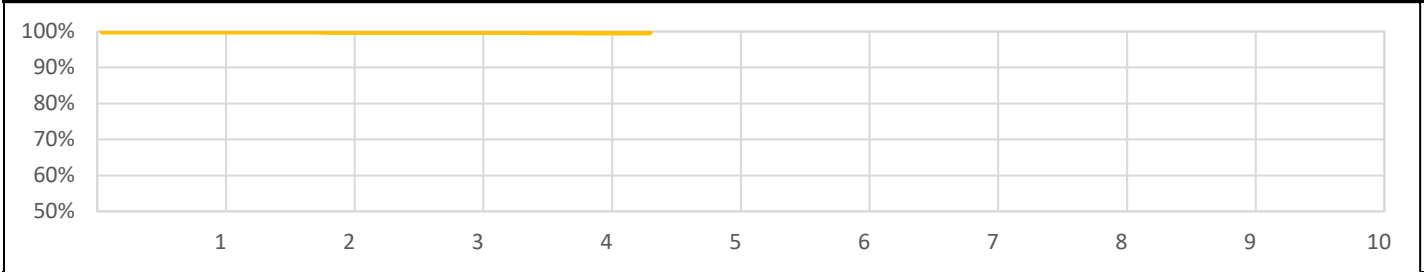
References cited in table above [\(link\)](#)

RESONATE/MOMENTUM/CHARISMA/VIGILANT ICD VR

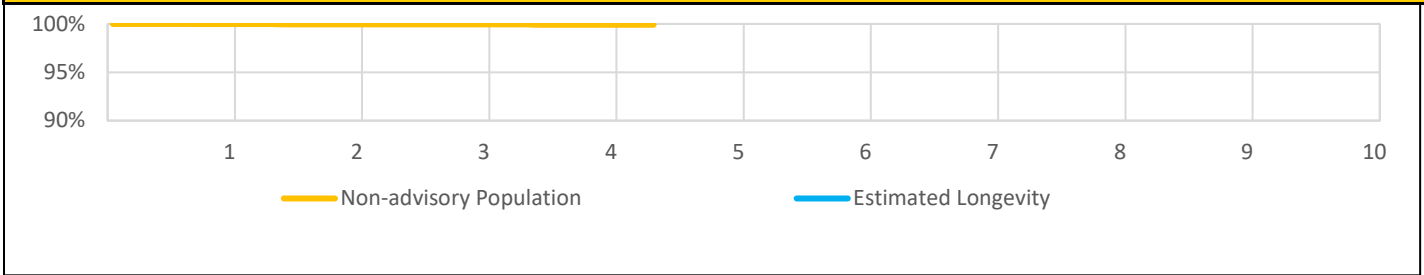
Models: D120/D220/D232/D320/D332/D420/D432/D520/D532

US Summary			
US Registered Implants:	20,000	US Normal Battery Depletions:	7
US Approval Date:	July 2017	US Malfunctions:	5
US Estimated Active Implants:	19,000	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%	--	--	--	--	--
	20,000 Effective Sample Size		12947	7499	3628	854	265	--	--	--	--	--

@ 53 months

RESONATE/MOMENTUM/CHARISMA/VIGILANT ICD VR

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

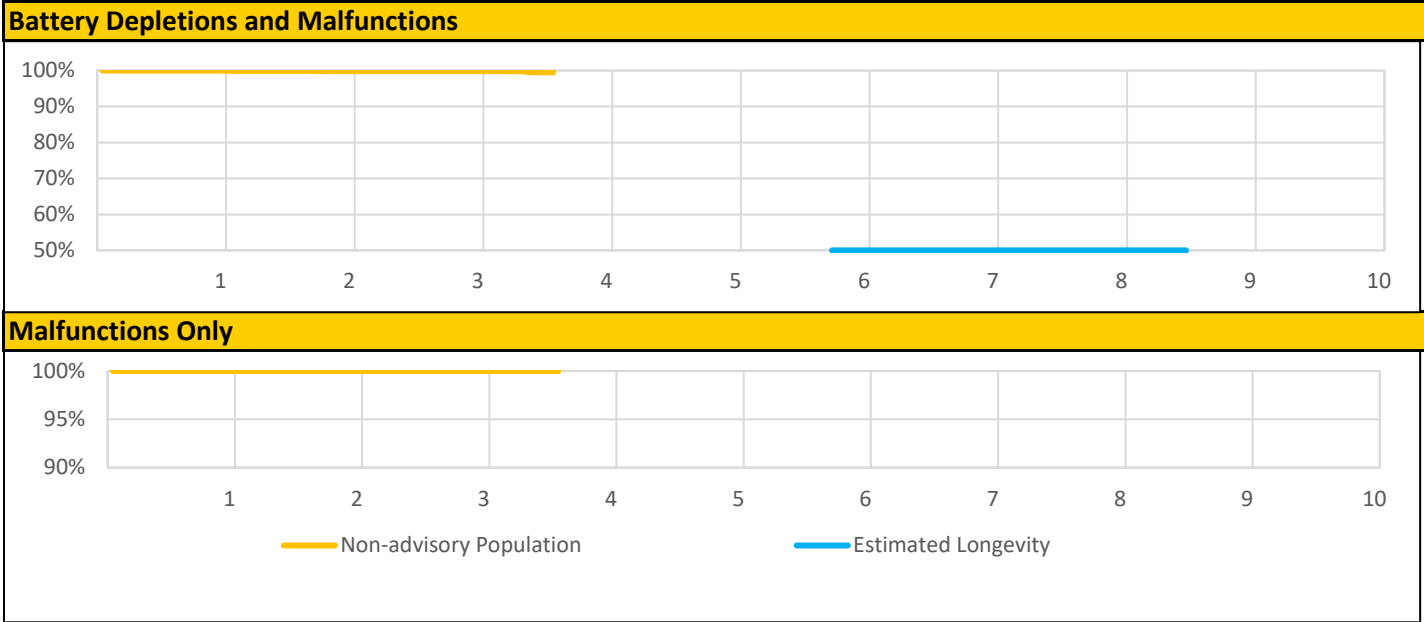
Worldwide Confirmed Malfunctions		13	
Worldwide Distribution		47,000	
	With Compromised Therapy	Without Compromised Therapy	Total
Electrical			
High voltage capacitor (75)	1	0	1
Integrated circuit (63)	1	0	1
Low-voltage capacitor (69)	0	1	1
Low-voltage capacitors (47)	0	1	1
Software			
Memory errors (51)	0	4	4
Other			
Non-patterned, other	0	5	5
Grand Total	2	11	13

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

PERCIVA DR

Models: D401/D413/D501/D513

US Summary			
US Registered Implants:	4,000	US Normal Battery Depletions:	5
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%	99.5%	--	--	--	--	--	--
Registered Implants:	Malfunctions Only	100.0%	100.0%	100.0%	100.0%	--	--	--	--	--	--
4,000	Effective Sample Size	2379	1282	567	230	--	--	--	--	--	--

@ 44 months

PERCIVA DR

Models: D401/D413/D501/D513

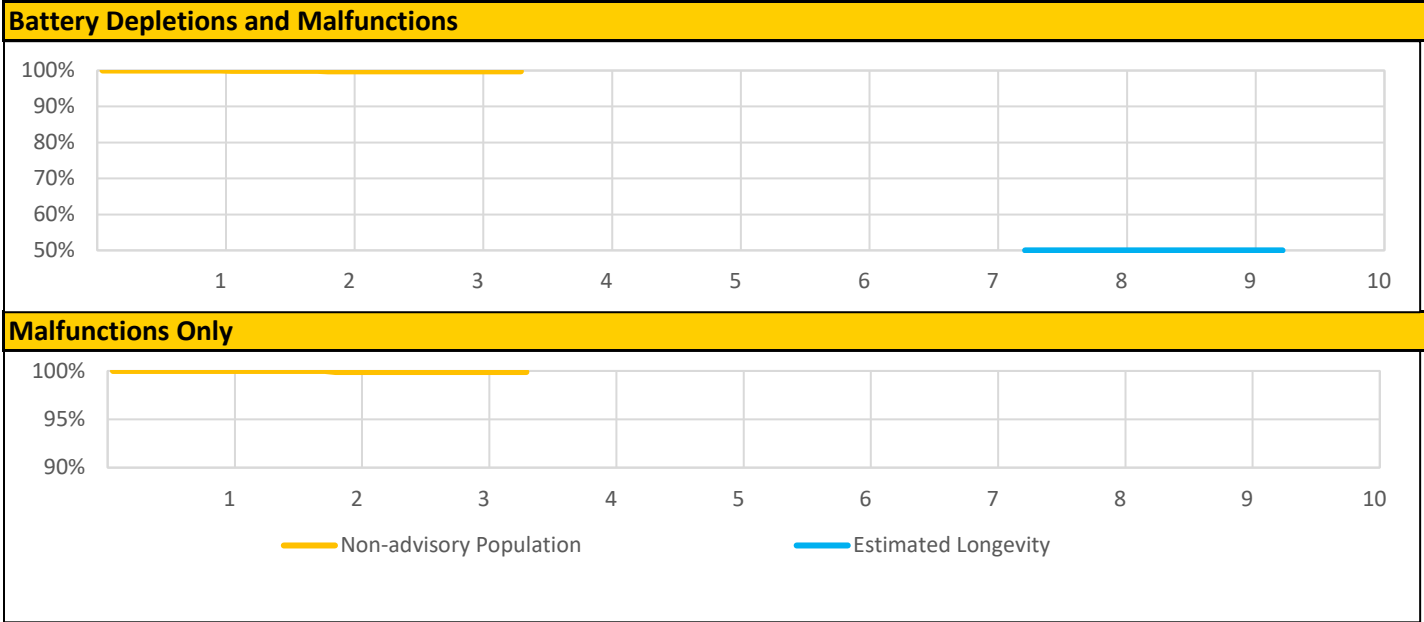
Worldwide Confirmed Malfunctions	0		
Worldwide Distribution	6,000		
	With Compromised Therapy	Without Compromised Therapy	Total
Other			
Non-patterned, other	0	0	0
Grand Total	0	0	0

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

PERCIVA VR

Models: D400/D412/D500/D512

US Summary			
US Registered Implants:	3,000	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:	-



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%	99.9%	99.9%	99.9%	--	--	--	--	--	--
	3,000 Effective Sample Size	1528	863	339	214	--	--	--	--	--	--

@ 41 months

PERCIVA VR

Models: D400/D412/D500/D512

Worldwide Confirmed Malfunctions	1		
Worldwide Distribution	5,000		
	With Compromised Therapy	Without Compromised Therapy	Total
Software			
Memory errors (51)	0	1	1
Grand Total	0	1	1

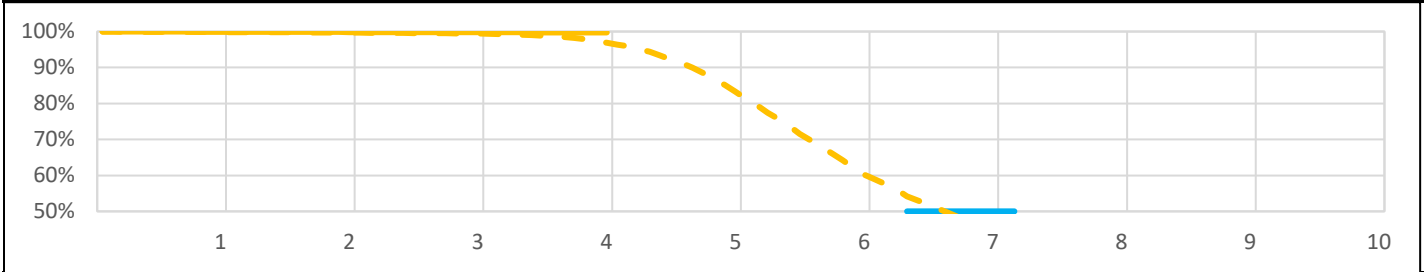
References cited in table above ([link](#))

EMBLEM S-ICD

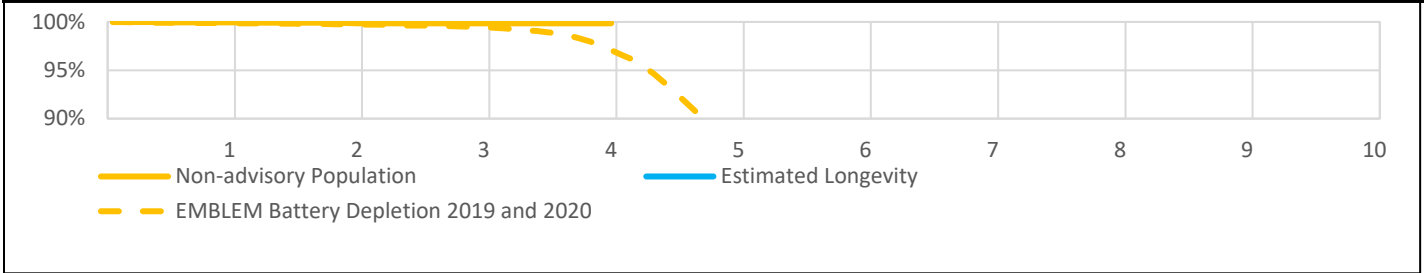
Models: A209/A219

US Summary			
US Registered Implants:	50,000	US Normal Battery Depletions:	593
US Approval Date:	March 2015	US Malfunctions:	2,542
US Estimated Active Implants:	40,000	Without Compromised Therapy:	2,476
		With Compromised Therapy:	66

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%	99.7%	99.7%	--	--	--	--	--
Registered Implants:	Malfunctions Only		100.0%	99.9%	99.9%	99.9%	99.9%	--	--	--	--	--
26,000	Effective Sample Size		17624	10160	4565	358	203	--	--	--	--	--

@ 49 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 Registered Implants: 22,000	Depletions and Malfunctions	99.9%	99.7%	99.5%	97.4%	85.1%	62.1%	47.2%	46.3%	--	--
	Malfunctions Only	99.9%	99.8%	99.5%	97.6%	86.5%	68.3%	58.0%	57.7%	--	--
	Effective Sample Size	18545	16466	14542	12121	6417	2532	494	310	--	--

@ 85 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		5,347	
Worldwide Distribution		112,000	
	With Compromised Therapy	Without Compromised Therapy	Total
Electrical			
High-voltage capacitor (43)	2	0	2
S-ICD battery depletion 2019 and 2020 (77)	51	5104	5155
Battery depletion (84)	1	1	2
Software			
Memory corruption (65)	1	0	1
Misaligned markers (73)	1	3	4
Memory corruption (85)	4	7	11
Mechanical			
Solder joint (78)	13	1	14
EMBLEM S-ICD electrical overstress 2020 (80)	8	0	8
RF antenna (81)	1	0	1
Cracked case (86)	9	0	9
Header (87)	1	0	1
Other			
Non-patterned, other	30	68	98
Telemetry (56)	16	25	41
Grand Total	138	5209	5347

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

AUTOGEN ICD EL DR

Models: D162/D163/D176/D177

Worldwide Confirmed Malfunctions		35	
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	11	11
Battery (53)	0	8	8
High voltage capacitor (75)	1	0	1
Software			
Memory errors (51)	0	5	5
Other			
Non-patterned, other	1	3	4
Grand Total	4	31	35

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

AUTOGEN ICD EL VR

Models: D160/D161/D174/D175

Worldwide Confirmed Malfunctions		26	
Worldwide Distribution		17,000	
	With Compromised Therapy	Without Compromised Therapy	Total
Electrical			
High voltage capacitor (75)	1	0	1
Low-voltage capacitor (69)	0	3	3
Battery (53)	4	13	17
Software			
Memory errors (51)	2	2	4
Other			
Non-patterned, other	0	1	1
Grand Total	7	19	26

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

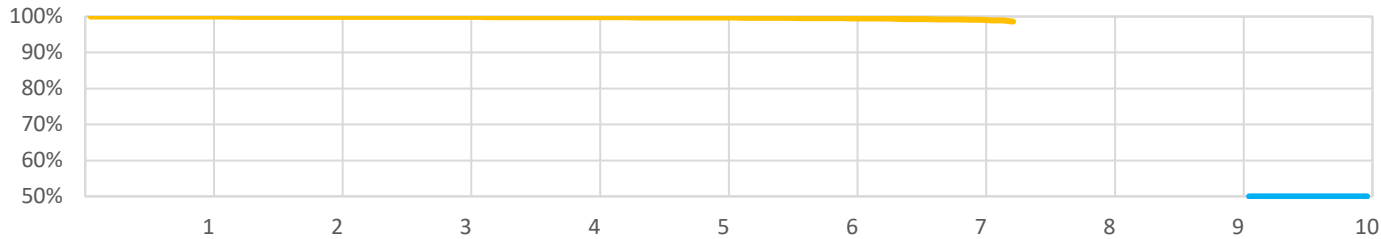
DYNAGEN/INOGEN/ORIGEN ICD EL DR

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

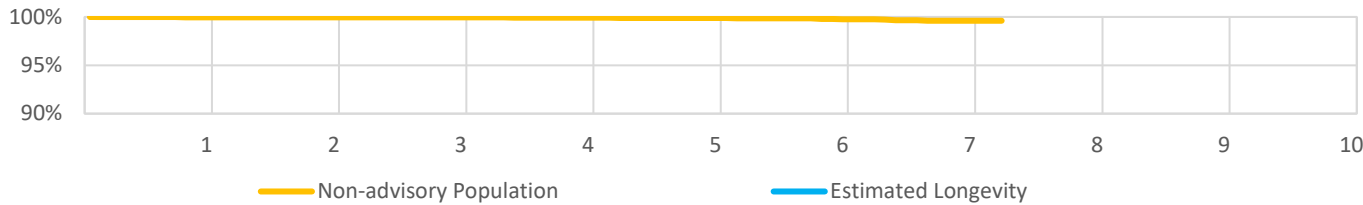
US Summary

US Registered Implants:	48,000	US Normal Battery Depletions:	61
US Approval Date:	April 2014	US Malfunctions:	43
US Estimated Active Implants:	39,000	Without Compromised Therapy:	33
		With Compromised Therapy:	10

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%	99.7%	99.5%	99.1%	98.6%	--	--
Registered Implants:	Malfunctions Only		100.0%	100.0%	100.0%	99.9%	99.9%	99.8%	99.6%	99.6%	--	--
48,000	Effective Sample Size		39730	32566	25935	18976	11545	5309	1303	282	--	--

@ 88 months

DYNAGEN/INOGEN/ORIGEN ICD EL DR

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

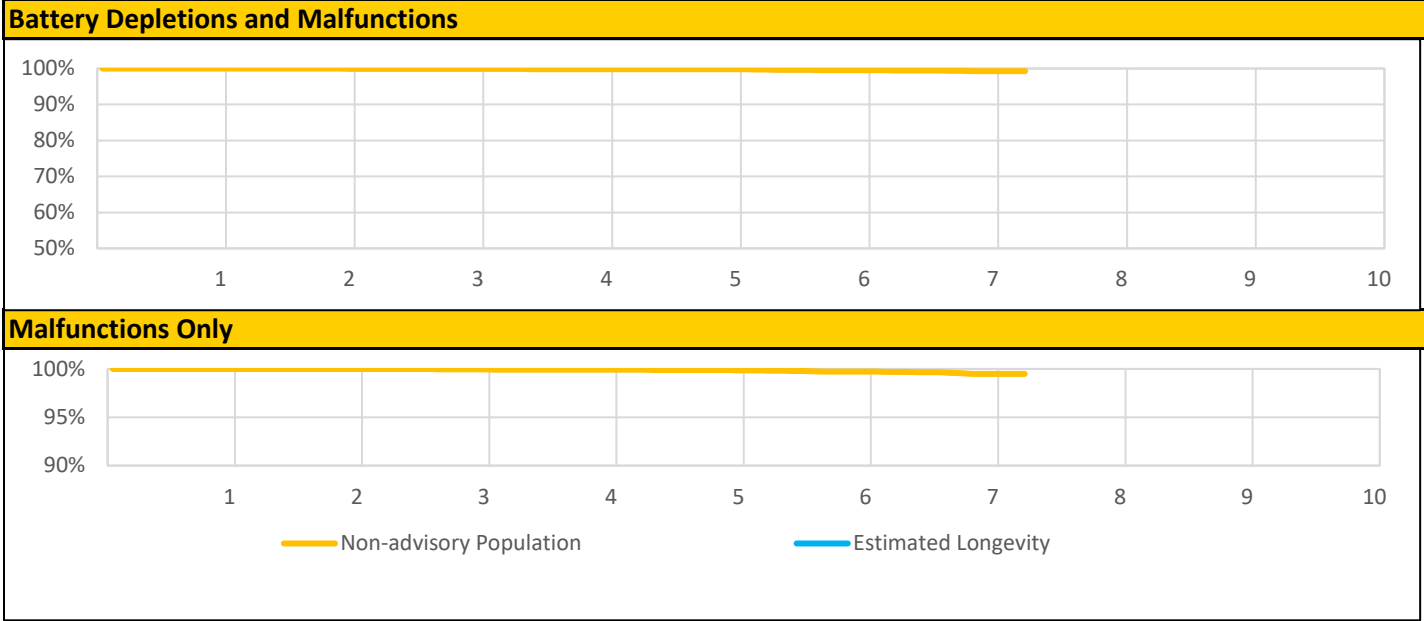
Worldwide Confirmed Malfunctions		61	
Worldwide Distribution		75,000	
	With Compromised Therapy	Without Compromised Therapy	Total
Electrical			
Low-voltage capacitors (47)	0	2	2
High voltage circuit component (62)	0	4	4
Integrated circuit (63)	2	1	3
Low-voltage capacitor (69)	0	16	16
High voltage capacitor (75)	7	0	7
Battery (53)	1	15	16
Software			
Memory errors (51)	0	2	2
Other			
Non-patterned, other	5	6	11
Grand Total	15	46	61

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

DYNAGEN/INOGEN/ORIGEN ICD EL VR

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

US Summary			
US Registered Implants:	38,000	US Normal Battery Depletions:	32
US Approval Date:	April 2014	US Malfunctions:	41
US Estimated Active Implants:	31,000	Without Compromised Therapy:	38
		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%	100.0%	99.9%	99.8%	99.8%	99.6%	99.3%	99.3%	--	--
Registered Implants:	Malfunctions Only	100.0%	100.0%	100.0%	99.9%	99.9%	99.7%	99.5%	99.5%	--	--
38,000	Effective Sample Size	31999	26918	21897	16378	10381	5236	1357	280	--	--

@ 88 months

DYNAGEN/INOGEN/ORIGEN ICD EL VR

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

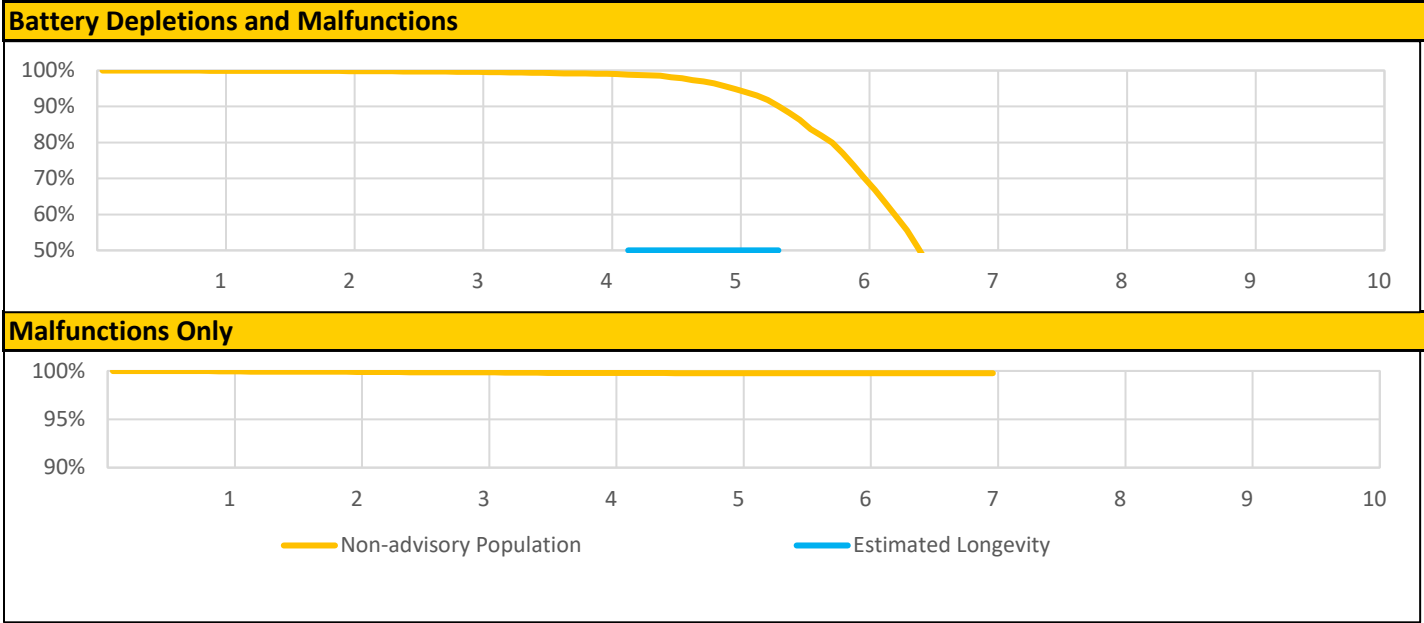
Worldwide Confirmed Malfunctions		67	
Worldwide Distribution		68,000	
	With Compromised Therapy	Without Compromised Therapy	Total
Electrical			
Low-voltage capacitors (47)	0	1	1
High voltage circuit component (62)	0	2	2
Integrated circuit (63)	0	2	2
Low-voltage capacitor (69)	1	22	23
Battery (53)	3	16	19
Software			
Memory errors (51)	0	7	7
Other			
Non-patterned, other	5	8	13
Grand Total	9	58	67

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:	1,581
US Approval Date:	April 2014	US Malfunctions:	16
US Estimated Active Implants:	7,000	Without Compromised Therapy:	13
		With Compromised Therapy:	3



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%	99.1%	95.6%	73.7%	25.1%	21.2%	--	--
Registered Implants:	Malfunctions Only	100.0%	99.9%	99.8%	99.8%	99.8%	99.8%	99.8%	99.8%	--	--
11,000	Effective Sample Size	8927	7417	5978	4624	3198	1671	306	204	--	--

@ 85 months

DYNAGEN/INOGEN/ORIGEN ICD MINI DR

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

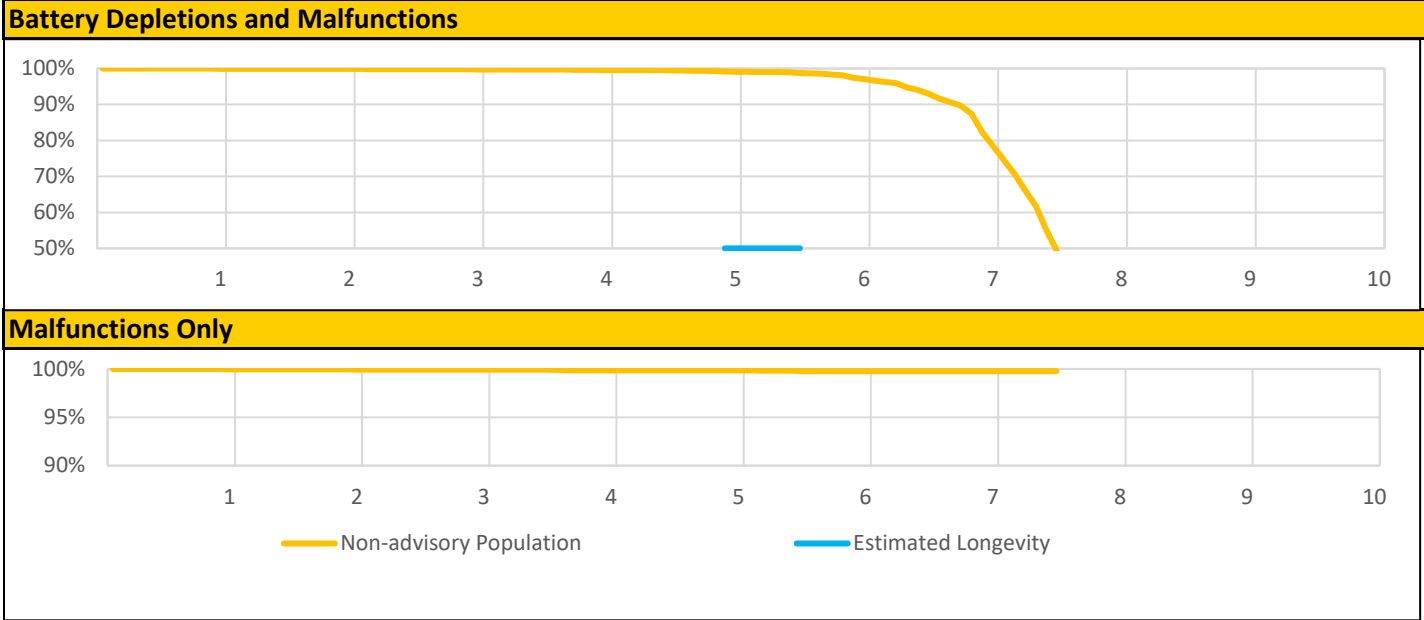
Worldwide Confirmed Malfunctions		25	
Worldwide Distribution		31,000	
	With Compromised Therapy	Without Compromised Therapy	Total
Electrical			
High voltage circuit component (62)	0	12	12
High voltage capacitor (75)	3	0	3
Integrated circuit (63)	0	1	1
Low-voltage capacitors (47)	1	0	1
Other			
Non-patterned, 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:	625
US Approval Date:	April 2014	US Malfunctions:	11
US Estimated Active Implants:	7,000	Without Compromised Therapy:	10
		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%	99.8%	99.6%	99.2%	97.4%	82.2%	49.1%	--	--
Registered Implants:	Malfunctions Only		100.0%	100.0%	99.9%	99.9%	99.8%	99.8%	99.8%	99.8%	--	--
	9,000 Effective Sample Size		7899	6742	5613	4430	3208	2180	1013	248	--	--

@ 91 months

DYNAGEN/INOGEN/ORIGEN ICD MINI VR

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

Worldwide Confirmed Malfunctions		26	
Worldwide Distribution		32,000	
	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	3	3
Battery (53)	1	1	2
Software			
Memory errors (51)	1	2	3
Other			
Non-patterned, other	0	3	3
Grand Total	8	18	26

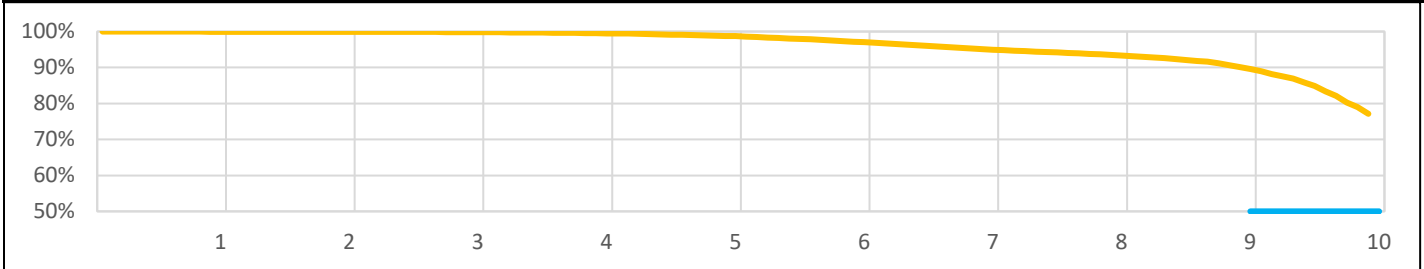
References cited in table above [\(link\)](#)

INCEPTA/ENERGEN/PUNCTUA ICD DR

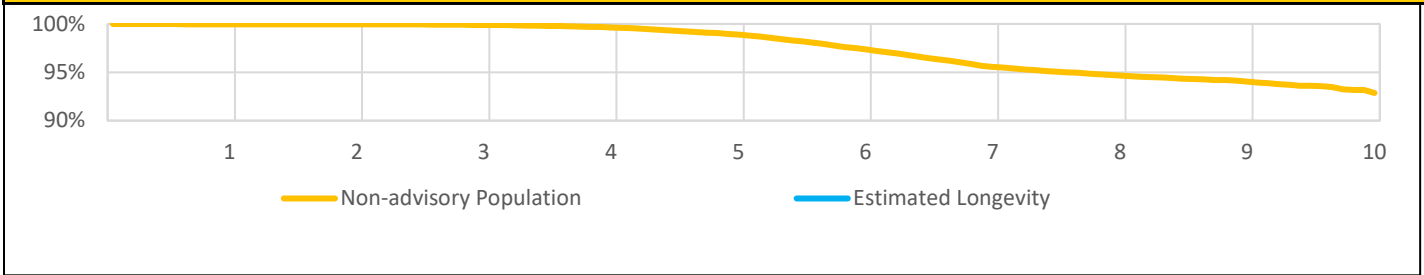
Models: E052/E053/E142/E143/E162/E163/F052/F053/F142/F143/F162/F163

US Summary			
US Registered Implants:	47,000	US Normal Battery Depletions:	918
US Approval Date:	November 2011	US Malfunctions:	1,247
US Estimated Active Implants:	28,000	Without Compromised Therapy:	1,215
		With Compromised Therapy:	32

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%	93.5%	90.1%	77.1%
Registered Implants:	Malfunctions Only		100.0%	100.0%	99.9%	99.7%	99.0%	97.5%	95.7%	94.7%	94.1%	93.2%
	Effective Sample Size	47,000	41225	36538	32289	28414	24883	21471	17913	12298	5825	1114

INCEPTA/ENERGEN/PUNCTUA ICD DR

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

Worldwide Confirmed Malfunctions		1,947	
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)	14	89	103
Low-voltage capacitor (54)	12	1743	1755
High voltage circuit (58)	0	1	1
Low-voltage capacitor (69)	0	30	30
Software			
Memory errors (51)	0	7	7
Other			
Non-patterned, other	10	18	28
Grand Total	47	1900	1947

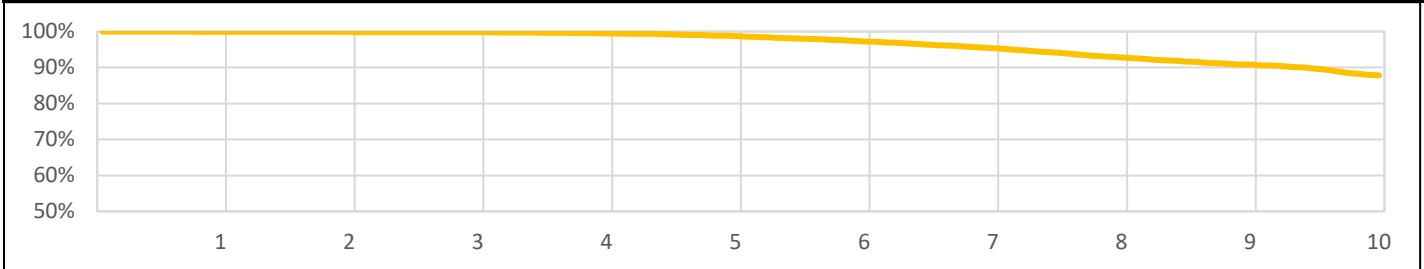
References cited in table above [\(link\)](#)

INCEPTA/ENERGEN/PUNCTUA ICD VR

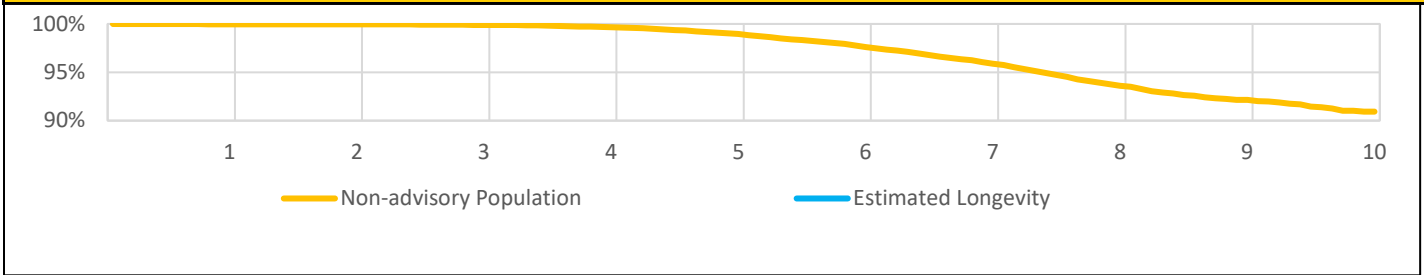
Models: E050/E051/E140/E141/E160/E161/F050/F051/F140/F141/F160/F161

US Summary			
US Registered Implants:	39,000	US Normal Battery Depletions:	249
US Approval Date:	November 2011	US Malfunctions:	1,234
US Estimated Active Implants:	24,000	Without Compromised Therapy:	1,194
		With Compromised Therapy:	40

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%	93.0%	90.9%	88.0%
Registered Implants:	Malfunctions Only		100.0%	100.0%	99.9%	99.7%	99.0%	97.8%	96.1%	93.8%	92.2%	90.9%
39,000	Effective Sample Size		34701	30726	27148	23902	20913	18122	15053	10051	4586	1026

INCEPTA/ENERGEN/PUNCTUA ICD VR

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

Worldwide Confirmed Malfunctions		2,087	
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)	22	132	154
Low-voltage capacitor (54)	16	1855	1871
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	65	2022	2087

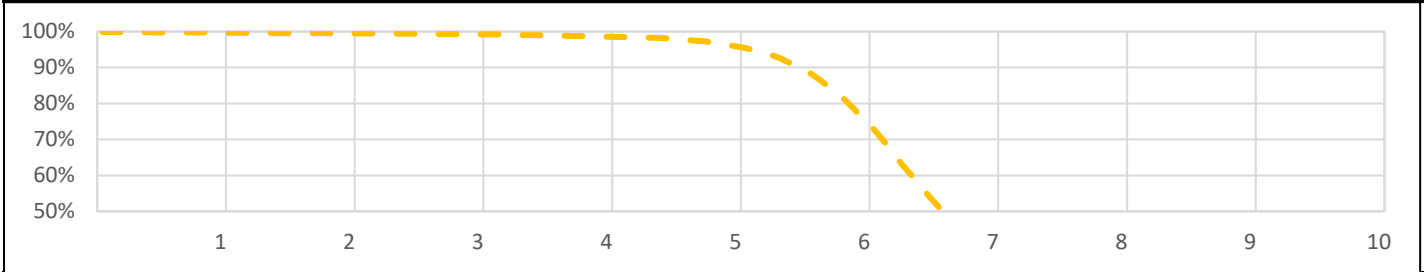
References cited in table above [\(link\)](#)

SQ-RX S-ICD

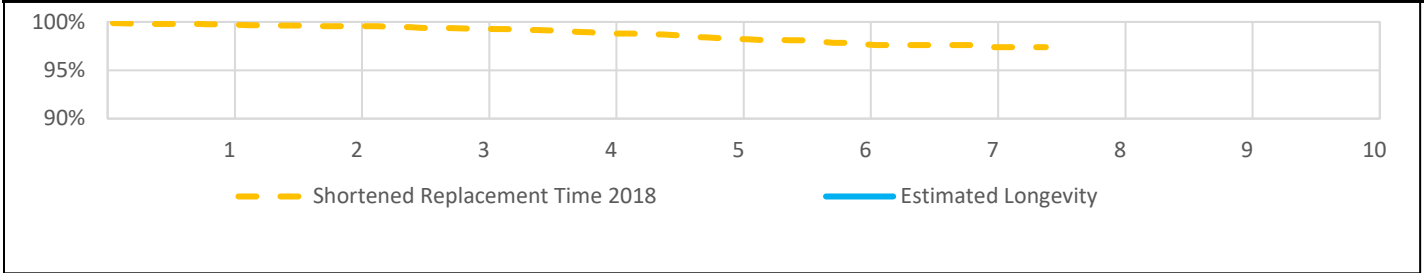
Models: 1010

US Summary			
US Registered Implants:	8,000	US Normal Battery Depletions:	2,619
US Approval Date:	September 2012	US Malfunctions:	109
US Estimated Active Implants:	3,000	Without Compromised Therapy:	46
		With Compromised Therapy:	63

Battery Depletions and Malfunctions



Malfunctions Only



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%	35.7%	15.0%	--	--
	Malfunctions Only	99.7%	99.5%	99.3%	98.8%	98.3%	97.8%	97.5%	97.4%	--	--
Registered Implants:	Effective Sample Size	6412	5649	4991	4382	3692	2675	1061	239	--	--

@ 90 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	219
Worldwide Distribution	11,000

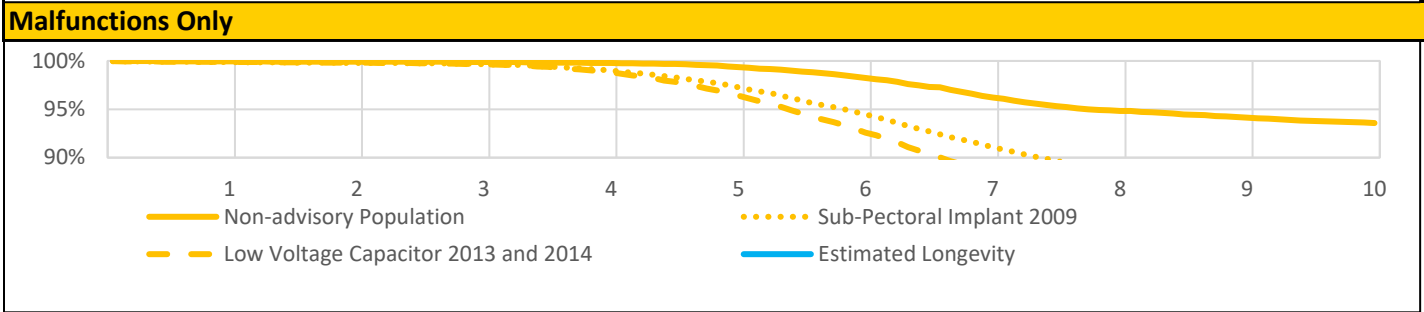
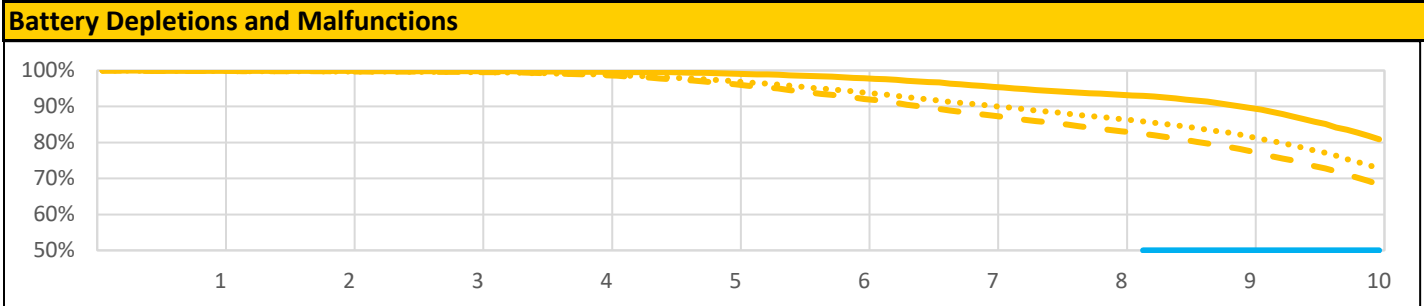
	With Compromised Therapy	Without Compromised Therapy	Total
Electrical			
Unintended Fuse Activation 2013 (4)	3	0	3
Charge Timeout Alert (61)	1	11	12
Mechanical			
High cathode condition (5)	1	1	2
Shortened replacement time 2018 (55)	65	46	111
Software			
Unintended Battery Depletion Alert (57)	0	10	10
Other			
Telemetry (56)	10	4	14
Non-patterned, other	39	28	67
Grand Total	119	100	219

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

TELIGEN DR

Models: E110/E111/F110/F111

US Summary			
US Registered Implants:	66,000	US Normal Battery Depletions:	9,698
US Approval Date:	March 2008	US Malfunctions:	3,030
US Estimated Active Implants:	18,000	Without Compromised Therapy:	2,868
		With Compromised Therapy:	162



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	13985	11978	10220	8618	6837

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	9504	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%	81.2%
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

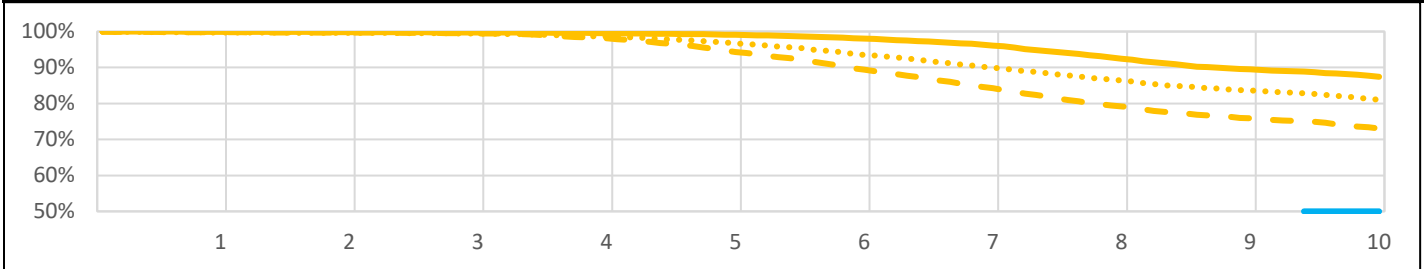
Worldwide Confirmed Malfunctions		4,170	
Worldwide Distribution		91,000	
	With Compromised Therapy	Without Compromised Therapy	Total
Electrical			
Low Voltage Capacitor 2014 - August 29, 2013 and September 17, 2014 Voluntary Physician Advisory (3)	53	2299	2352
Safety Core-electrocautery (42)	1	4	5
High-voltage 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)	11	1288	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)	18	3	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	216	3954	4170

TELIGEN VR

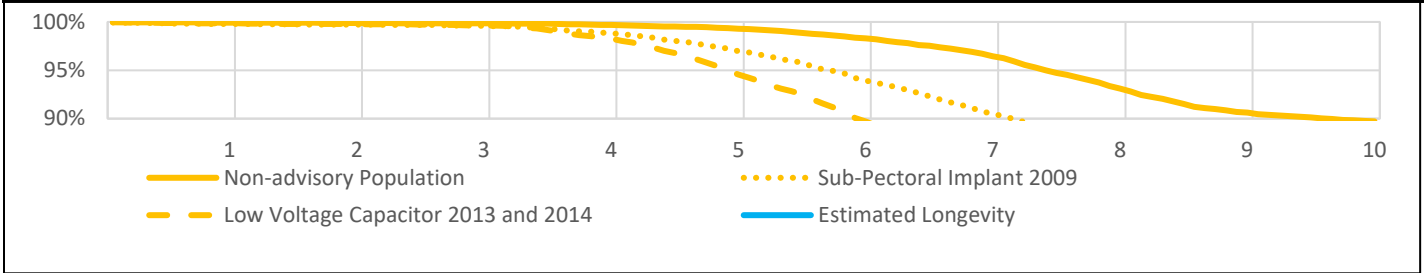
Models: E102/E103/F102/F103

US Summary			
US Registered Implants:	38,000	US Normal Battery Depletions:	1,637
US Approval Date:	March 2008	US Malfunctions:	2,375
US Estimated Active Implants:	14,000	Without Compromised Therapy:	2,242
		With Compromised Therapy:	133

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	16200	14331	12651	11155	9791	8518	7305	6107	5121	4397

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	9240	7984	6795	5703	4751	3990	3354
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

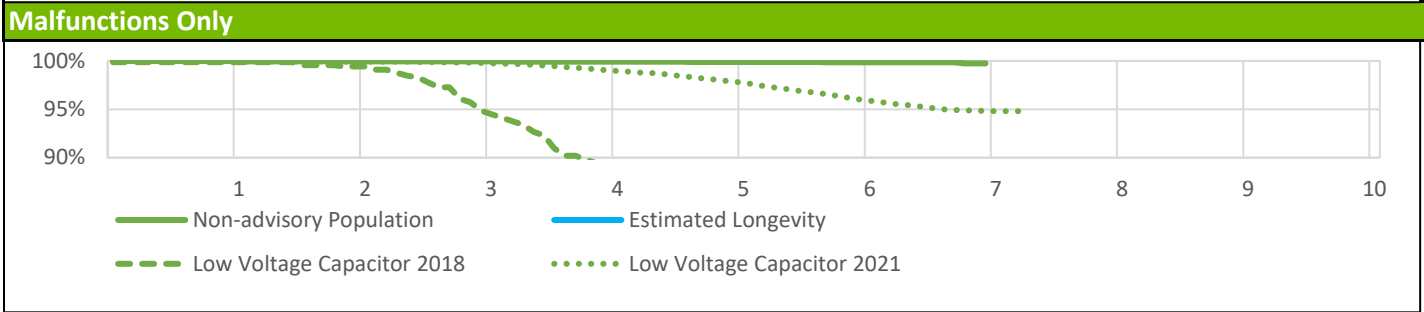
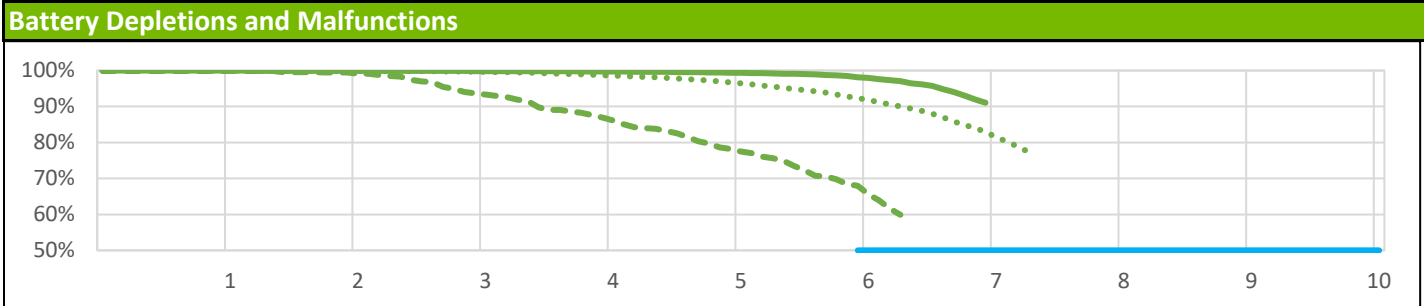
Models: E102/E103/F102/F103

Worldwide Confirmed Malfunctions		4,028	
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	1921	1968
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)	53	418	471
Low-voltage capacitor (54)	11	1389	1400
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	8	25
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	12	24
Grand Total	220	3808	4028

ACCOLADE/PROPONENT/ESSENTIO DR

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

US Summary			
US Registered Implants:	247,000	US Normal Battery Depletions:	2,178
US Approval Date:	October 2014	US Malfunctions:	1,242
US Estimated Active Implants:	204,000	Without Compromised Therapy:	1,191
		With Compromised Therapy:	51



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%	98.2%	91.1%	--	--	--
Registered Implants:	Malfunctions Only	100.0%	100.0%	99.9%	99.9%	99.9%	99.9%	99.7%	--	--	--
196000	Effective Sample Size	154604	113482	80641	51014	26864	7193	297	--	--	--

@ 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 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%	68.4%	59.9%	--	--	--
Registered Implants: 800	Malfunctions Only	99.9%	99.4%	94.8%	88.8%	83.5%	77.5%	74.3%	--	--	--
	Effective Sample Size	713	640	543	449	361	269	212	--	--	--
@ 77 months											
Low Voltage Capacitor 2021	Depletions and Malfunctions	100.0%	99.9%	99.7%	98.7%	96.7%	92.3%	82.9%	77.4%	--	--
Registered Implants: 42000	Malfunctions Only	100.0%	99.9%	99.8%	99.0%	97.9%	96.0%	94.8%	94.8%	--	--
	Effective Sample Size	37252	33207	29509	26010	21055	14382	3495	542	--	--
@ 88 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 2,089
Worldwide Distribution 534,000

	With Compromised Therapy	Without Compromised Therapy	Total
Electrical			
Low-voltage capacitors (47)	2	4	6
Integrated circuit (63)	16	34	50
Capacitor (67)	0	2	2
Telemetry (68)	2	13	15
Hydrogen induced premature depletion - September 2018 (70)	4	212	216
Hydrogen induced premature depletion - June 2021 (83)	26	1591	1617
Software			
Memory errors (51)	0	51	51
Mechanical			
Battery cathode (79)	3	0	3
Other			
Non-patterned, other	47	82	129
Grand Total	100	1989	2089

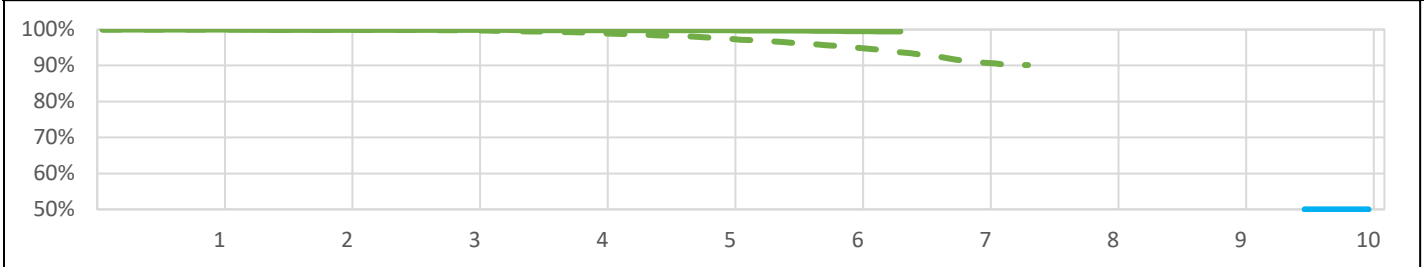
References cited in table above ([link](#))

ACCOLADE/PROPONENT/ESSENTIO EL DR

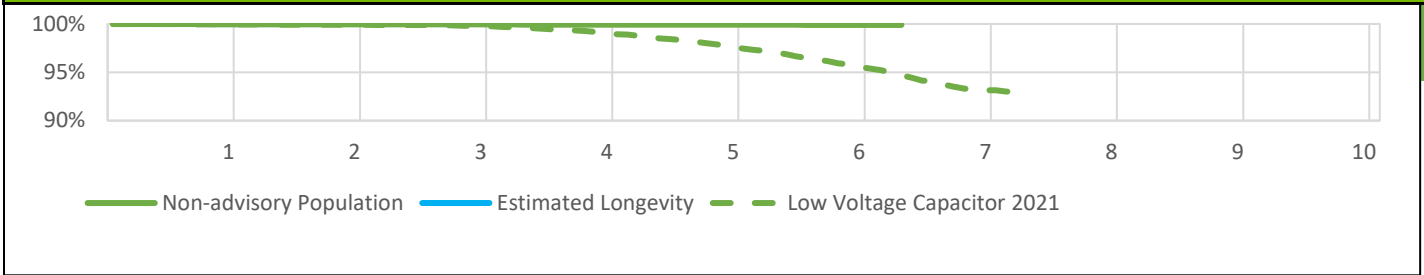
Models: L121/L131/L221/L231/L321/L331

US Summary			
US Registered Implants:	141,000	US Normal Battery Depletions:	185
US Approval Date:	October 2014	US Malfunctions:	567
US Estimated Active Implants:	125,000	Without Compromised Therapy:	560
		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		100.0%	99.9%	99.9%	99.8%	99.8%	99.6%	99.5%	--	--	--
Registered Implants:	Malfunctions Only		100.0%	100.0%	99.9%	99.9%	99.9%	99.9%	99.9%	--	--	--
117,000	Effective Sample Size		87126	58704	38248	21934	9797	1531	388	--	--	--

@ 77 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%	99.7%	98.9%	97.4%	94.9%	90.7%	90.1%	--	--
Registered Implants:	Malfunctions Only	100.0%	99.9%	99.8%	99.0%	97.6%	95.5%	93.1%	93.0%	--	--
17,000	Effective Sample Size	14981	13325	11850	10435	8294	5527	1175	206	--	--

@ 88 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	1,277
Worldwide Distribution	337,000

	With Compromised Therapy	Without Compromised Therapy	Total
Electrical			
Low-voltage capacitors (47)	0	10	10
Integrated circuit (63)	1	22	23
Telemetry (68)	1	13	14
Hydrogen induced premature depletion - September 2018 (70)	3	111	114
Hydrogen induced premature depletion - June 2021 (83)	7	1035	1042
Software			
Memory errors (51)	0	40	40
Mechanical			
Battery cathode (79)	2	0	2
Other			
Non-patterned, other	4	28	32
Grand Total	18	1259	1277

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

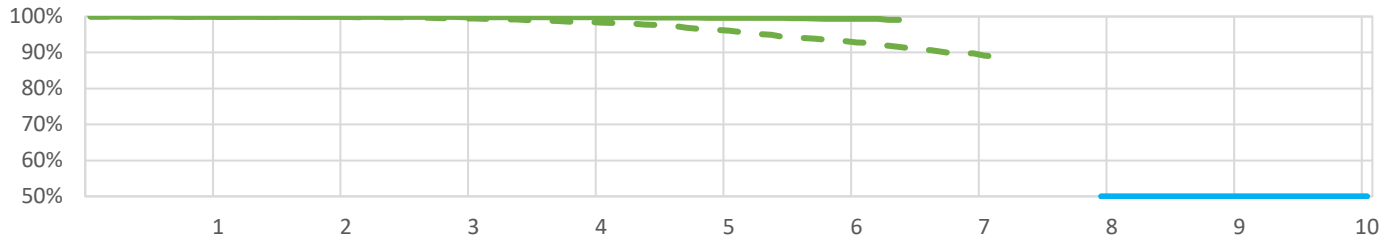
ACCOLADE/PROPONENT/ESSENTIO SR

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

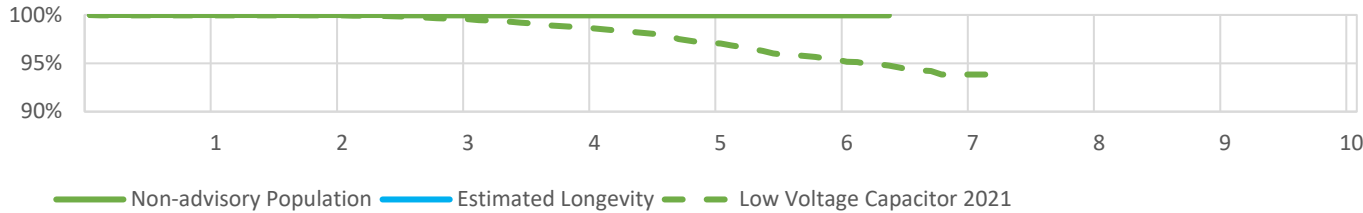
US Summary

US Registered Implants:	46,000	US Normal Battery Depletions:	225
US Approval Date:	October 2014	US Malfunctions:	362
US Estimated Active Implants:	34,000	Without Compromised Therapy:	355
		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%	99.6%	99.4%	99.1%	--	--	--
Registered Implants:	Malfunctions Only		100.0%	100.0%	100.0%	100.0%	100.0%	100.0%	100.0%	--	--	--
	33,000 Effective Sample Size		25237	18507	12895	7726	3487	685	235	--	--	--

@ 77 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%	96.3%	93.1%	89.7%	88.2%	--	--
Registered Implants:	Malfunctions Only	100.0%	99.9%	99.6%	98.7%	97.1%	95.4%	93.8%	93.8%	--	--
12,000	Effective Sample Size	10315	9157	8117	7129	5737	3419	748	261	--	--

@ 87 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	875
Worldwide Distribution	192,000

	With Compromised Therapy	Without Compromised Therapy	Total
Electrical			
Low-voltage capacitors (47)	1	3	4
Integrated circuit (63)	5	5	10
Telemetry (68)	0	4	4
Hydrogen induced premature depletion - September 2018 (70)	3	63	66
Hydrogen induced premature depletion - June 2021 (83)	21	741	762
Software			
Memory errors (51)	0	13	13
Other			
Non-patterned, other	3	13	16
Grand Total	33	842	875

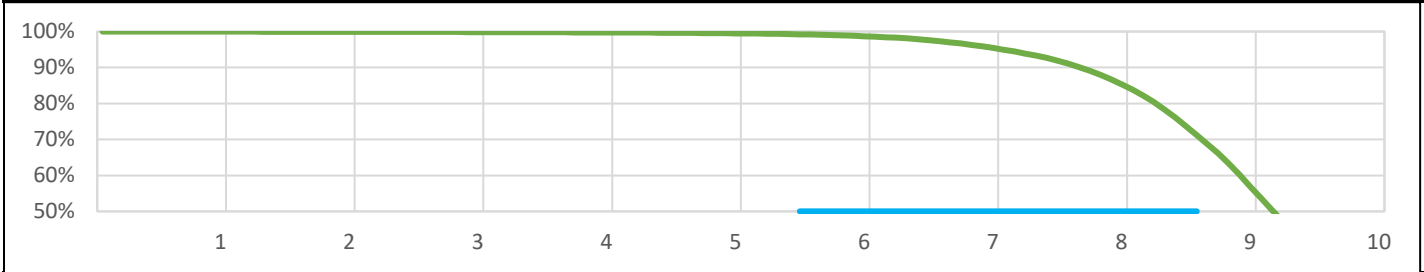
References cited in table above ([link](#))

ADVANTIO/INGENIO/VITALIO/FORMIO DR

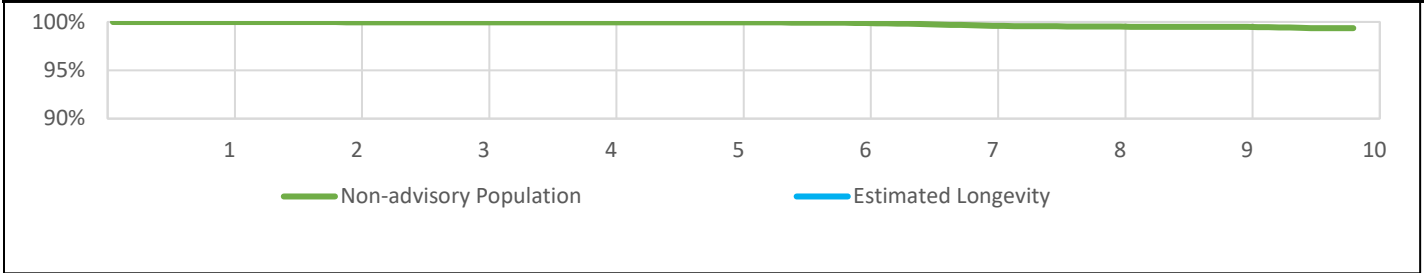
Models: J063/J066/J173/J176/J273/J276/J278/J279/K063/K066/K083/K086/K173/K176/K183/K186/K273/K276/K278/K279/
K283/K286/K288/K289

US Summary			
US Registered Implants:	121,000	US Normal Battery Depletions:	14,640
US Approval Date:	May 2012	US Malfunctions:	288
US Estimated Active Implants:	64,000	Without Compromised Therapy:	275
		With Compromised Therapy:	13

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%	86.7%	60.1%	19.5%
Registered Implants:	Malfunctions Only	100.0%	100.0%	100.0%	100.0%	99.9%	99.9%	99.6%	99.5%	99.5%	99.4%
121,000	Effective Sample Size	107350	95771	85402	76125	67682	59974	51617	31319	9240	272

@ 119 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

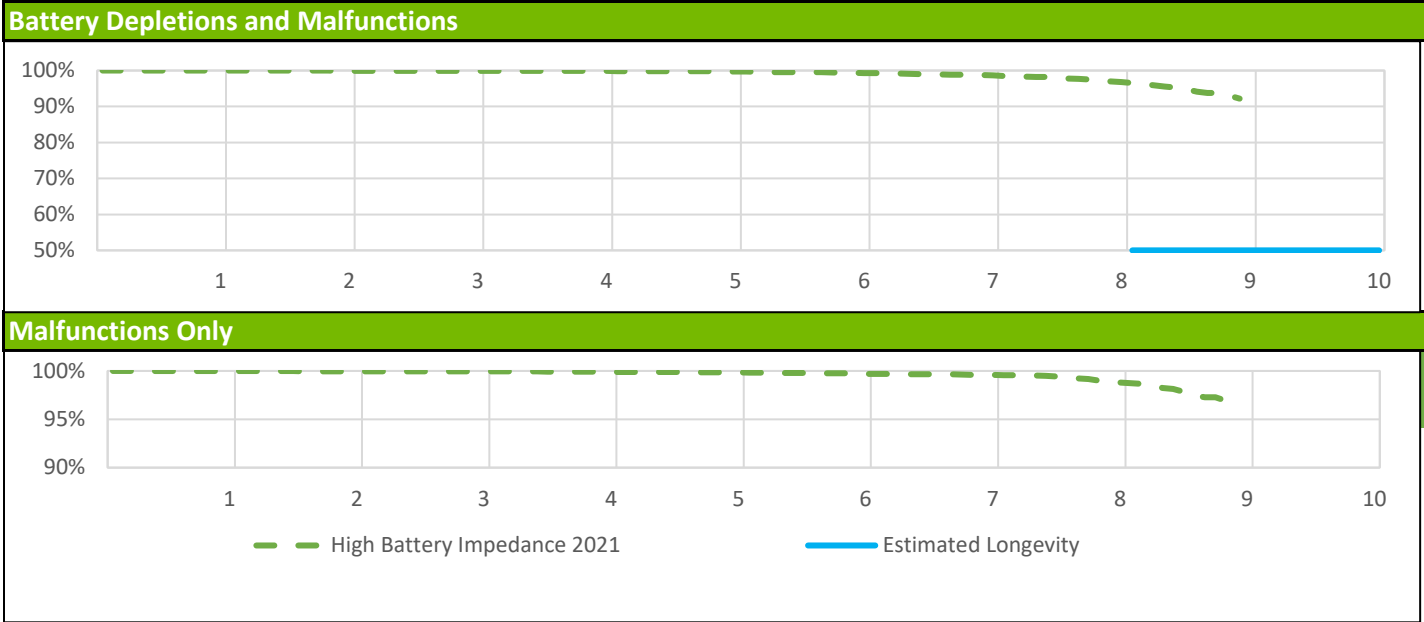
	With Compromised Therapy	Without Compromised Therapy	Total
Electrical			
Low-voltage capacitors (47)	0	8	8
Integrated circuit (50)	7	3	10
Titanium case material (60)	3	0	3
Software			
Memory errors (51)	1	28	29
Other			
Non-patterned, other	11	269	280
Grand Total	22	308	330

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:	103
US Approval Date:	May 2012	US Malfunctions:	65
US Estimated Active Implants:	7,000	Without Compromised Therapy:	63
		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%	96.9%	92.2%	--
Registered Implants:	Malfunctions Only	100.0%	100.0%	99.9%	99.9%	99.9%	99.7%	99.6%	98.8%	96.0%	--
11,000	Effective Sample Size	9676	8589	7640	6794	6040	5322	4438	2057	206	--

@ 108 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	307
Worldwide Distribution	76,000

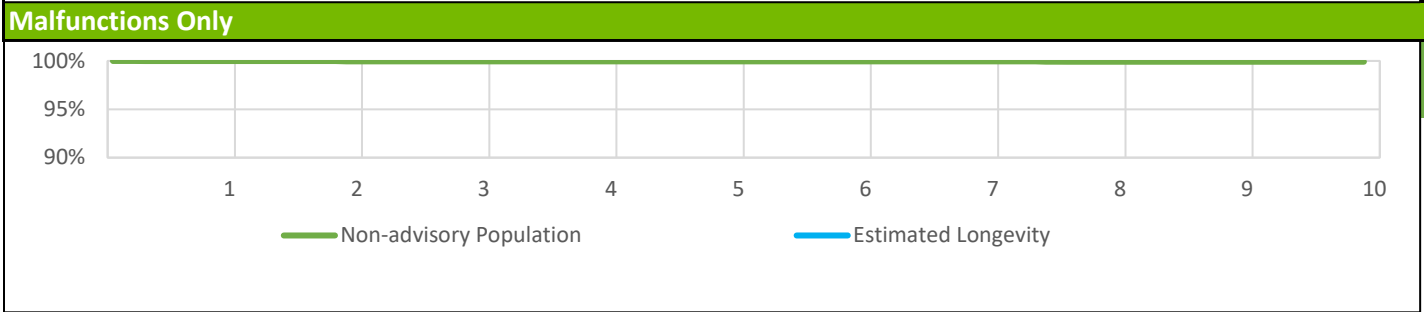
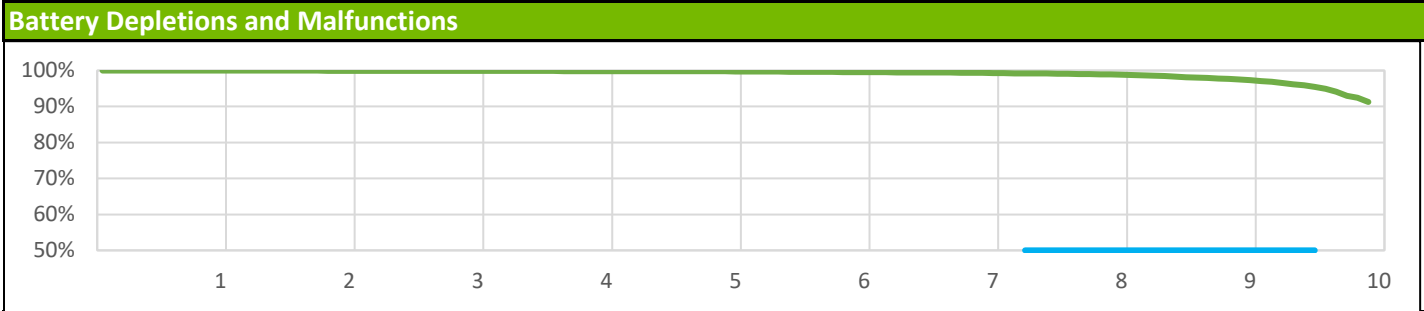
	With Compromised Therapy	Without Compromised Therapy	Total
Electrical			
Low-voltage capacitors (47)	1	5	6
Integrated circuit (50)	2	0	2
Titanium case material (60)	2	0	2
High battery impedance initiating safety mode 2021 (82)	0	70	70
Software			
Memory errors (51)	1	6	7
Respiratory sensor (59)	0	1	1
Other			
Non-patterned, other	7	212	219
Grand Total	13	294	307

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:	258
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%	97.5%	91.3%
Registered Implants:	Malfunctions Only		100.0%	100.0%	100.0%	100.0%	99.9%	99.9%	99.9%	99.9%	99.9%	99.9%
	Effective Sample Size	27,000	22812	20284	18091	16152	14402	12810	11011	7111	3076	316

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	11
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	10	10
Grand Total	0	11	11

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

ALTRUA 2 EL DR

Models: S722

Worldwide Confirmed Malfunctions	1
Worldwide Distribution	8,000

	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	10
Worldwide Distribution	9,000

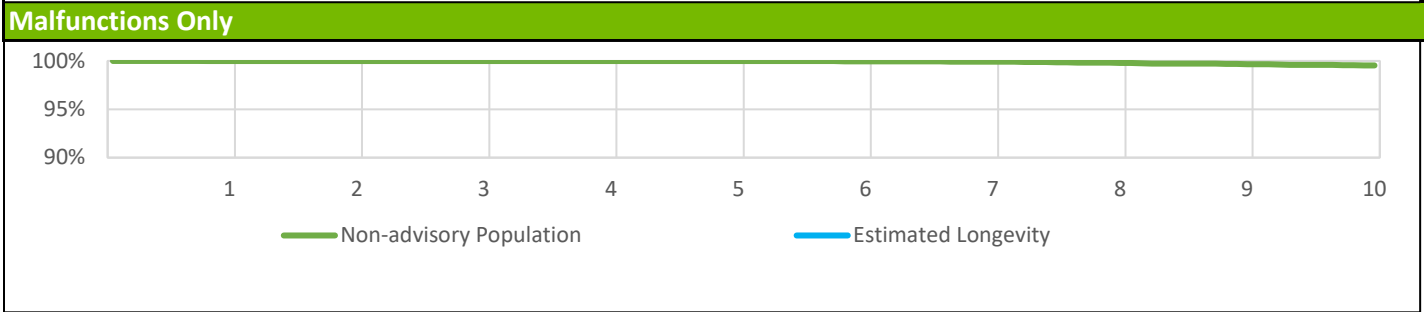
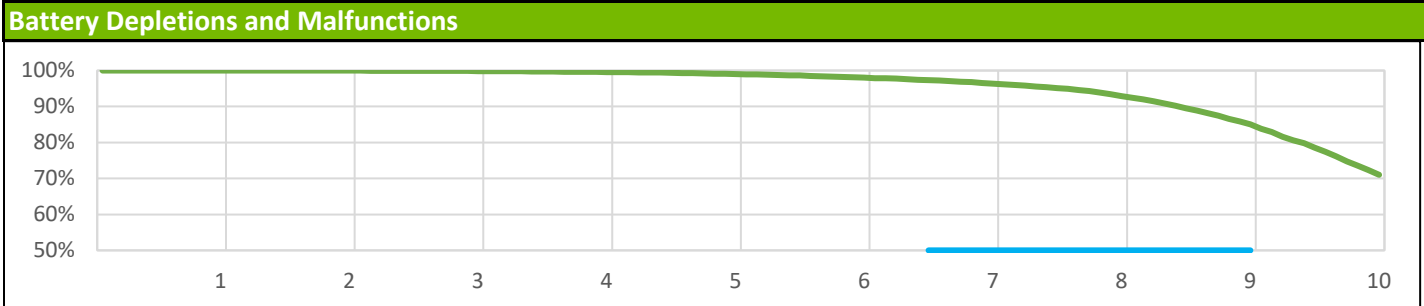
	With Compromised Therapy	Without Compromised Therapy	Total
Electrical			
Hydrogen induced premature depletion - June 2021 (83)	0	9	9
Other			
Non-patterned, other	0	1	1
Grand Total	0	10	10

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

ALTRUA 60 DR

Model: S602

US Summary			
US Registered Implants:	22,000	US Normal Battery Depletions:	4,379
US Approval Date:	April 2008	US Malfunctions:	43
US Estimated Active Implants:	7,000	Without Compromised Therapy:	39
		With Compromised Therapy:	4



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%	72.4%
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		19271	17231	15369	13667	12101	10639	9303	7941	6380	4610

ALTRUA 60 DR

Models: S602

Worldwide Confirmed Malfunctions	75
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	62	63
Non-patterned, other	3	4	7
Grand Total	6	69	75

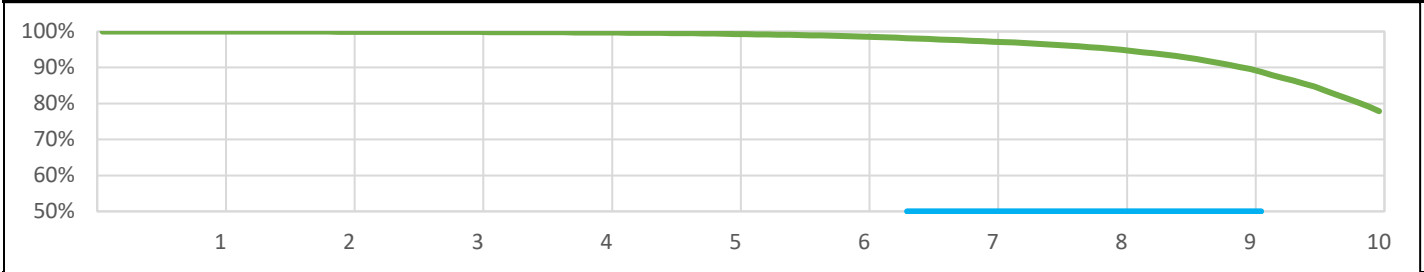
References cited in table above [\(link\)](#)

ALTRUA 60 EL DR

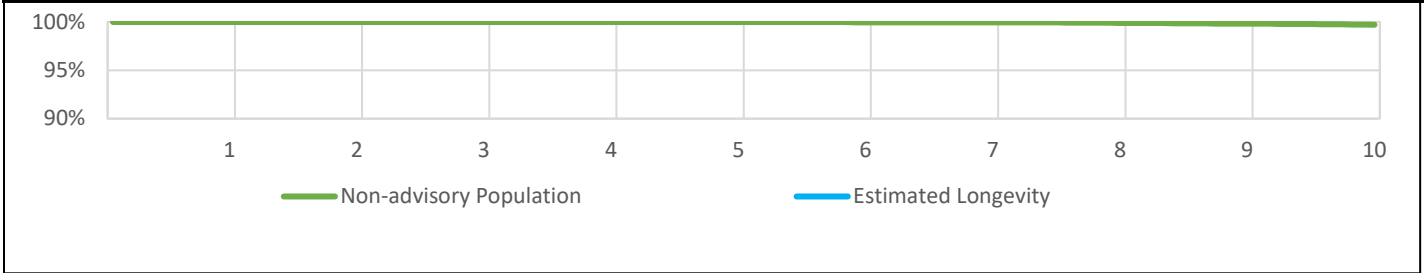
Model: S606

US Summary			
US Registered Implants:	59,000	US Normal Battery Depletions:	8,404
US Approval Date:	April 2008	US Malfunctions:	79
US Estimated Active Implants:	24,000	Without Compromised Therapy:	73
		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%	79.2%
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	52511	46930	41885	37337	33246	29402	25851	22517	18912	14096

ALTRUA 60 EL DR

Models: S606

Worldwide Confirmed Malfunctions	112
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	97	99
Magnet rate (44)	0	1	1
Non-patterned, other	2	3	5
Grand Total	7	105	112

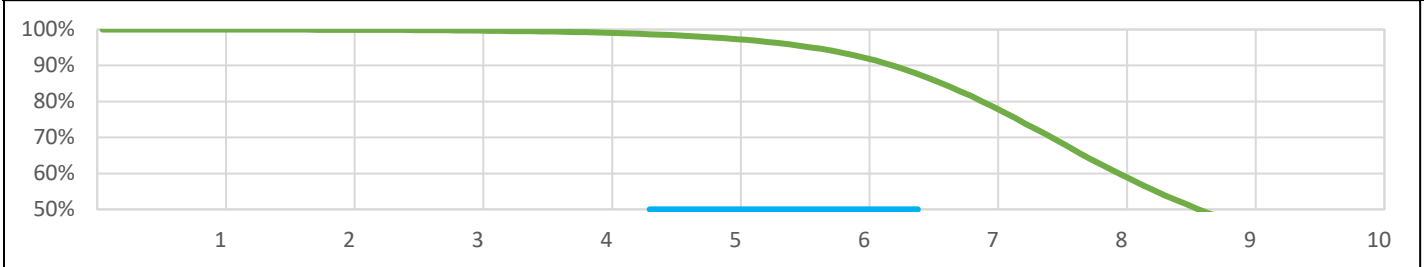
References cited in table above [\(link\)](#)

ALTRUA 60 DR (Downsize)

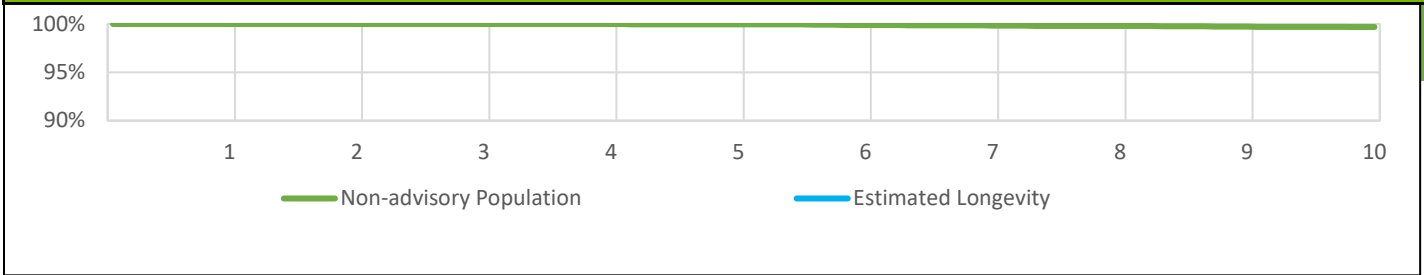
Model: S603

US Summary			
US Registered Implants:	90,000	US Normal Battery Depletions:	25,734
US Approval Date:	April 2008	US Malfunctions:	103
US Estimated Active Implants:	21,000	Without Compromised Therapy:	93
		With Compromised Therapy:	10

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%	99.2%	97.6%	92.9%	80.0%	61.1%	45.6%	33.3%
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	78653	70350	62828	55907	49208	41823	32096	21370	13685	8062

ALTRUA 60 DR (Downsize)

Models: S603

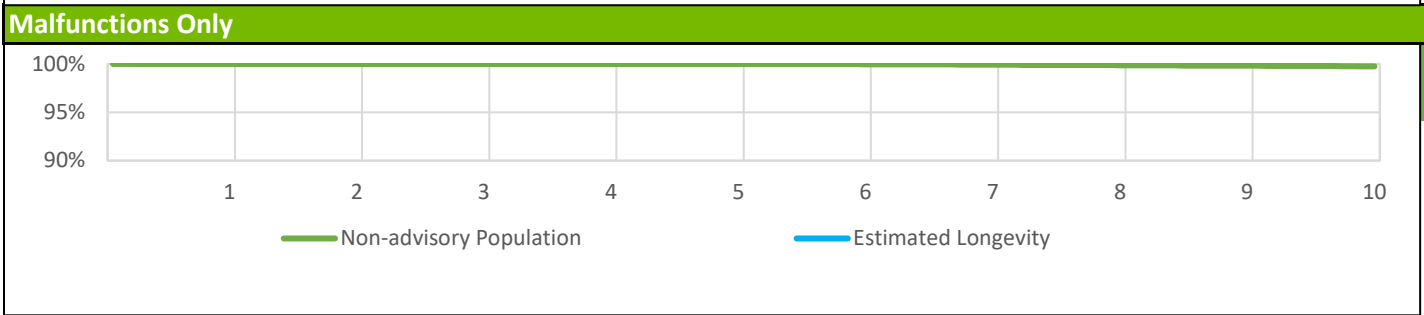
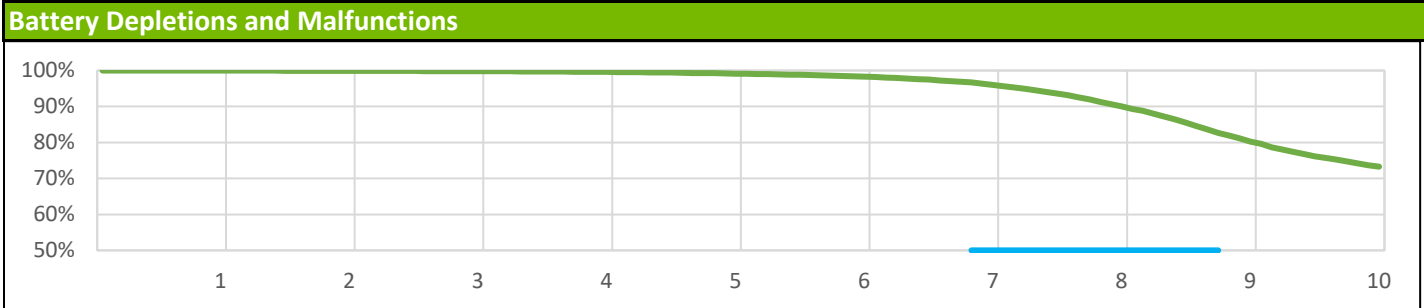
Worldwide Confirmed Malfunctions		132	
Worldwide Distribution		132,000	
	With Compromised Therapy	Without Compromised Therapy	Total
Electrical			
Capacitor (15)	7	4	11
Integrated circuit (30)	1	1	2
Mechanical			
Difficulty securing lead (41)	0	1	1
Connector block (39)	0	1	1
Software			
Underestimation 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:	3,616
US Approval Date:	April 2008	US Malfunctions:	30
US Estimated Active Implants:	9,000	Without Compromised Therapy:	27
		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%	73.7%
Registered Implants:	Malfunctions Only	100.0%	100.0%	100.0%	100.0%	100.0%	100.0%	99.9%	99.9%	99.8%	99.7%
	32,000 Effective Sample Size	26299	23054	20418	18170	16180	14335	12581	10551	8273	6314

ALTRUA 60 SR

Models: S601

Worldwide Confirmed Malfunctions	51		
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	41	42
Non-patterned, other	2	1	3
Grand Total	8	43	51

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

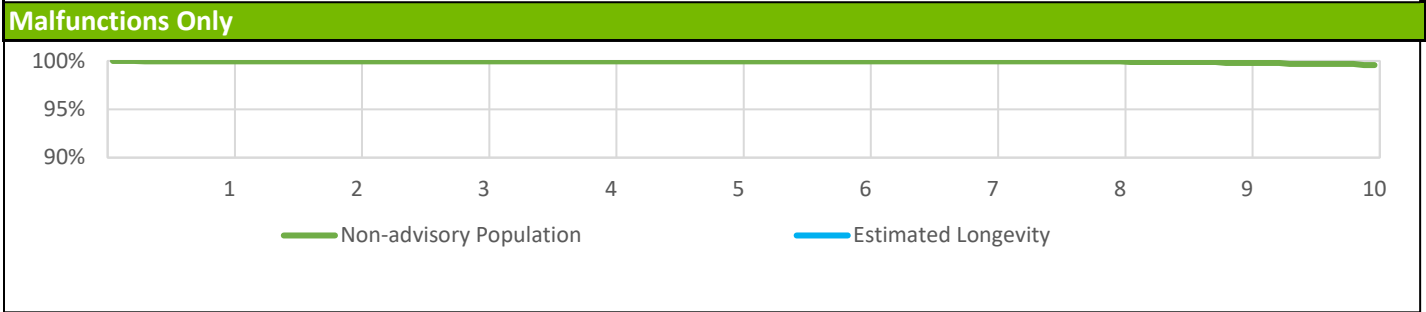
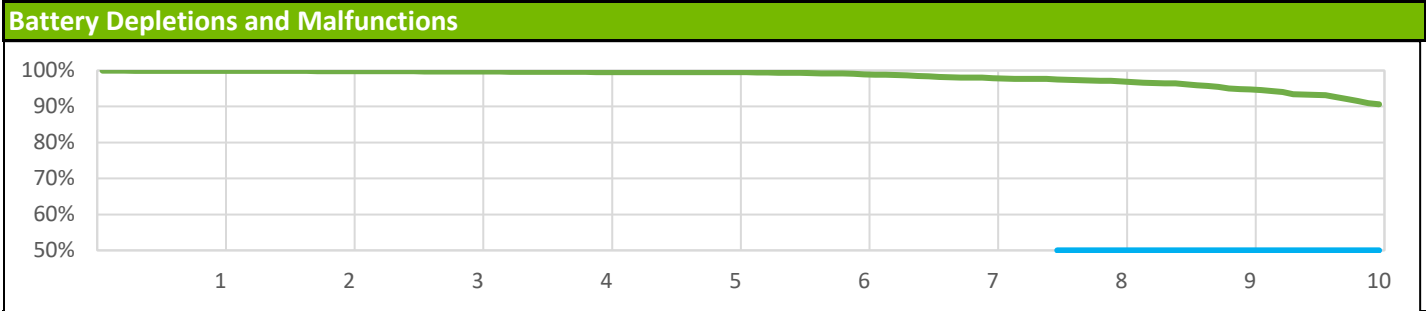
Worldwide Confirmed Malfunctions	7		
Worldwide Distribution	6,000		
	With Compromised Therapy	Without Compromised Therapy	Total
Other			
Battery status (49)	0	7	7
Grand Total	0	7	7

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

ALTRUA 20 EL DR

Model: S208

US Summary			
US Registered Implants:	3,000	US Normal Battery Depletions:	224
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%	90.9%
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	888

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 [\(link\)](#)

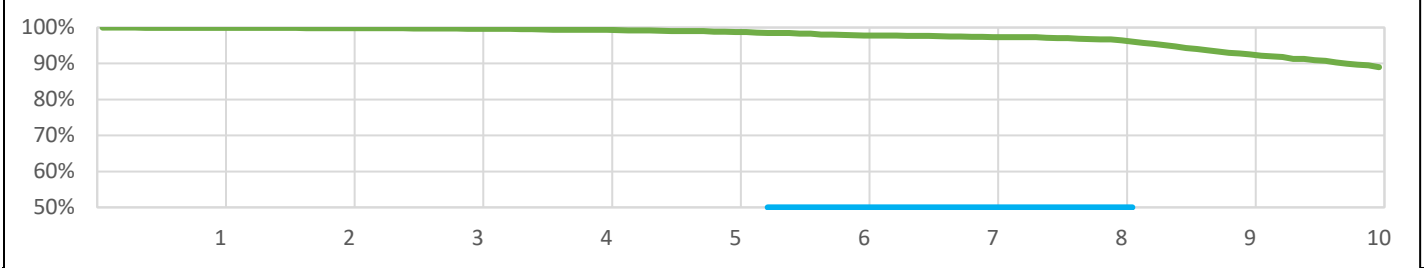
ALTRUA 20 SR

Model: S201/S204

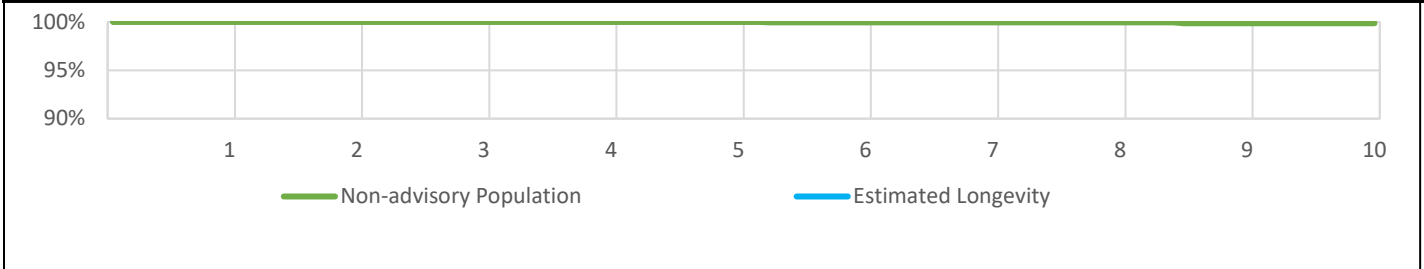
US Summary

US Registered Implants:	5,000	US Normal Battery Depletions:	249
US Approval Date:	April 2008	US Malfunctions:	3
US Estimated Active Implants:	1,000	Without Compromised Therapy:	3
		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		3567	3033	2603	2274	1996	1745	1536	1345	1145	926

ALTRUA 20 SR

Models: S201/S204

Worldwide Confirmed Malfunctions	6
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	4	4
Grand Total	1	5	6

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.
88. **Solder joint**— Error messages upon interrogation, low impedance measurements, loss of tachy therapy. Fractured solder joint.

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	112,000	1	2	7	9	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	124,000	3	4	5	17	0	0
CRT-P/Model	Worldwide Distribution	Electrical	Mechanical	Software	Other	Labeling	Packaging
VISIONIST/VALITUDE U125/U128//U225/U226/U228	94,000	5	0	2	5	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	65,000	0	1	5	6	0	0
RESONATE/MOMENTUM/CHARISMA/VIGILANT ICD VR D120/D220/D232/D320/D332/D420/D432/D520/D532	47,000	1	3	2	2	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	68,000	1	0	3	4	0	0
DYNAGEN/INOGEN/ORIGEN ICD EL DR D020/D021/D010/D011/D000/D001	75,000	0	3	2	3	0	0
DYNAGEN/INOGEN/ORIGEN ICD MINI VR D020/D021/D010/D011/D000/D001	32,000	1	0	4	2	0	0
DYNAGEN/INOGEN/ORIGEN ICD MINI DR D022/D023/D012/D013/D002/D003	31,000	2	0	0	3	0	0
S-ICD/Model	Worldwide Distribution	Electrical	Mechanical	Software	Other	Labeling	Packaging
EMBLEM S-ICD A209/A219	112,000	1	0	5	82	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	337,000	7	3	8	17	0	0
ACCOLADE/PROPONENT/ESSENTIO DR J064/K064/K067/K084	534,000	6	0	13	25	0	0
ACCOLADE/PROPONENT/ESSENTIO SR L100/L110/L200/L210/L300/L310	192,000	3	1	2	18	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	60000	39	203	15	688	4356
DYNAGEN/INOGEN/ORIGEN CRT-D G050/G051/G056/G058/G140/G141/G146/G148/G150/G151/G154/G156/G158	74000	944	407	79	1194	13095
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	6797	461	811	934	19477
COGNIS N118/N119/N120/P106/P107/P108	75000	15196	440	2108	1665	39910

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	46000	307	997	63	336	6554
INTUA/INVIVE/INLIVEN V272/V273/V282/V283/W272/W273/V172/V173/V182/V183/W172/ W173	10000	940	223	332	77	4472
CONTAK RENEWAL TR H120/H125	19000	4316	209	67	208	12032

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	50000	593	573	2544	1011	5320
SQ-RX S-ICD 1010	8000	2619	225	109	251	1939

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	36000	13	663	10	324	1684
RESONATE/MOMENTUM/CHARISMA/VIGILANT ICD VR D120/D220/D232/D320/D332/D420/D432/D520/D532	20000	7	422	5	189	905
DYNAGEN/INOGEN/ORIGEN ICD EL DR D052/D053/D142/D143/D152/D153	48000	61	2048	43	637	5719
DYNAGEN/INOGEN/ORIGEN ICD EL VR D050/D051/D140/D141/D150/D151	38000	31	1850	41	498	4274
DYNAGEN/INOGEN/ORIGEN ICD MINI DR D002/D003/D012/D013/D022/D023	11000	1581	423	16	140	1948
DYNAGEN/INOGEN/ORIGEN ICD MINI VR D000/D001/D010/D011/D020/D021	9000	625	441	11	131	1573
INCEPTA/ENERGEN/PUNCTUA ICD VR E050/E051/E140/E141/E160/E160/ F050/F051/F140/F141/F160/F161	39000	245	2343	1239	567	10586
INCEPTA/ENERGEN/PUNCTUA ICD DR E052/E053/E142/E143/E162/E163/F052/F053/F142/F143/F162/F163	47000	912	2670	1251	702	13575

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	1634	1954	2383	665	16882
TELIGEN DR E110/E111/F110/F111	66000	9691	2926	3041	1147	30954

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	141000	185	3645	567	698	10823
ACCOLADE/PROONENT/ESSENTIO DR L101/L111/L201/L211/L301/L311	247000	2173	5850	1248	1217	32127
ACCOLADE/PROONENT/ESSENTIO SR L100/L110/L200/L210/L300/L310	46000	224	1484	362	227	9788
ADVANTIO/INGENIO/VITALIO EL DR J064/J067/K064/K067/K084/K087/ J174/J177/K174/K177/K184/K187/ J274/J277/K274/K277/K284/K287	11000	103	463	65	54	2979
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	14636	3870	290	562	38300
ADVANTIO/INGENIO/VITALIO SR J062/J065/K062/K065/K082/K085/ J172/J175/K172/K175/K182/K185/ J272/J275/K272/K275/K282/K285	27000	258	704	14	109	11698

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	3612	485	30	144	18646
ALTRUA 60 DR (Downsize) S603	90000	25728	1259	103	471	40916
ALTRUA 60 DR S602	22000	4378	483	43	163	10324
ALTRUA 60 DR EL S606	59000	8400	1444	79	357	24629
ALTRUA 40 SR S401	5000	508	53	2	17	3029
ALTRUA 40 DR (downsize) S403	14000	4032	166	5	63	6898
ALTRUA 40 DR S402	2000	296	32	2	7	970
ALTRUA 40 DR EL S404	5000	671	89	6	35	2559
ALTRUA 20 SR S201/S204	5000	247	44	3	31	3011
ALTRUA 20 DR EL S208	3000	224	50	6	11	1691

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.

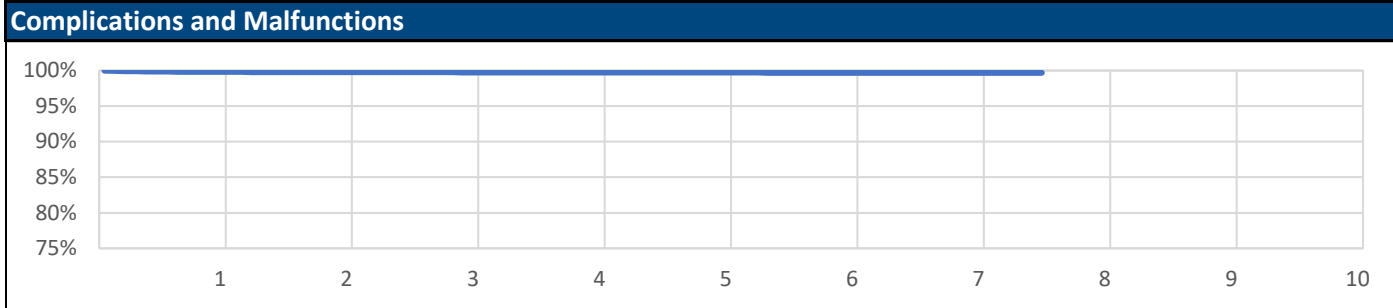
² System component and/or clinical condition complications may include, for example: infection, erosion, lead-to-PG interface.

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	41
US Approval Date:	February 2016	US Malfunctions:	-
US Estimated Active Implants:	16,000	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	14078	10814	8060	5278	2931	1178	289	203	--	--

@ 90 months

ACUITY X4 Spiral L

Models: 4677/4678

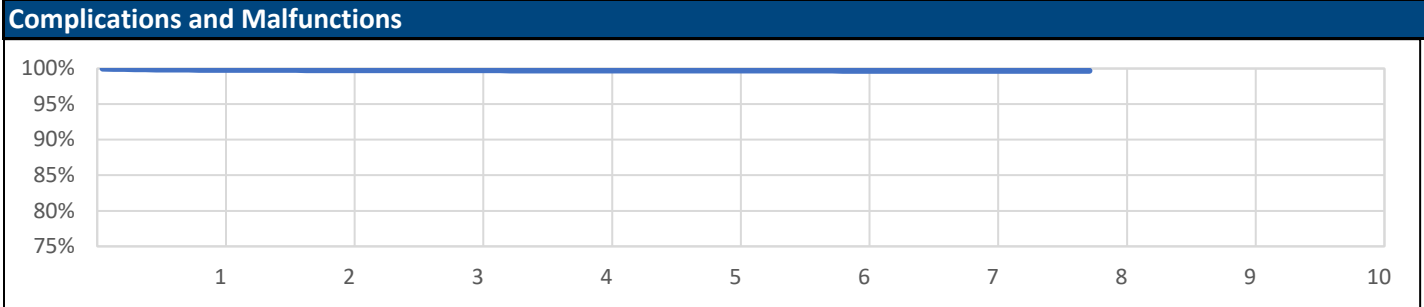
Worldwide Confirmed Malfunctions		1	
Worldwide Distribution		43,000	
	With Compromised Therapy	Without Compromised Therapy	Total
Other			
Non-patterned, other	0	1	1
Grand Total	0	1	1

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

ACUITY X4 Spiral S

Models: 4674/4675

US Summary			
US Registered Implants:	53,000	US Chronic Complications	112
US Approval Date:	February 2016	US Malfunctions:	1
US Estimated Active Implants:	46,000	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: 53000	Effective Sample Size	40494	30198	21419	13567	7412	2604	416	209	--	--

@ 93 months

ACUITY X4 Spiral S

Models: 4674/4675

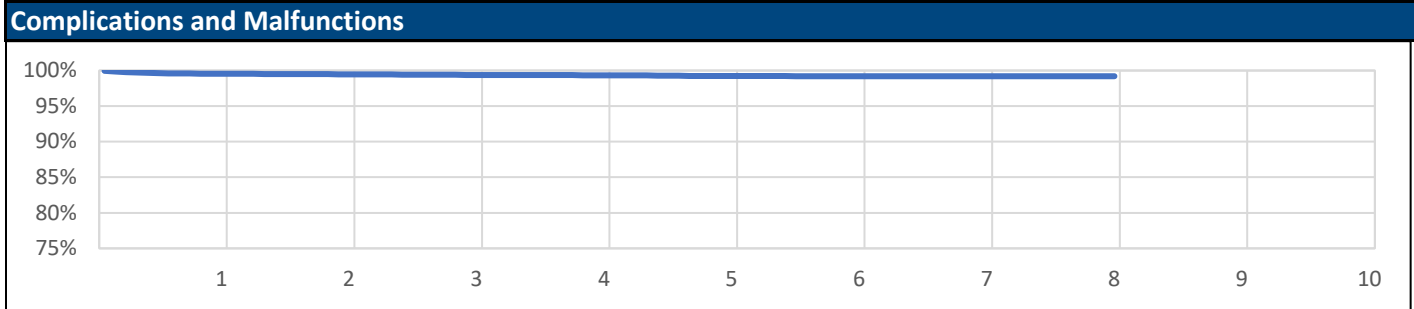
Worldwide Confirmed Malfunctions		1	
Worldwide Distribution		112,000	
	With Compromised Therapy	Without Compromised Therapy	Total
Other			
Non-patterned, other	0	1	1
Grand Total	0	1	1

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

ACUITY X4 Straight

Models: 4671/4672

US Summary			
US Registered Implants:	41,000	US Chronic Complications	217
US Approval Date:	February 2016	US Malfunctions:	1
US Estimated Active Implants:	35,000	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	99.5%	99.5%	99.4%	99.3%	99.3%	99.2%	99.2%	99.2%	--	--
Registered Implants: 41000	Effective Sample Size	30559	22456	15739	9730	5184	1761	424	211	--	--

@ 96 months

ACUITY X4 Straight

Models: 4671/4672

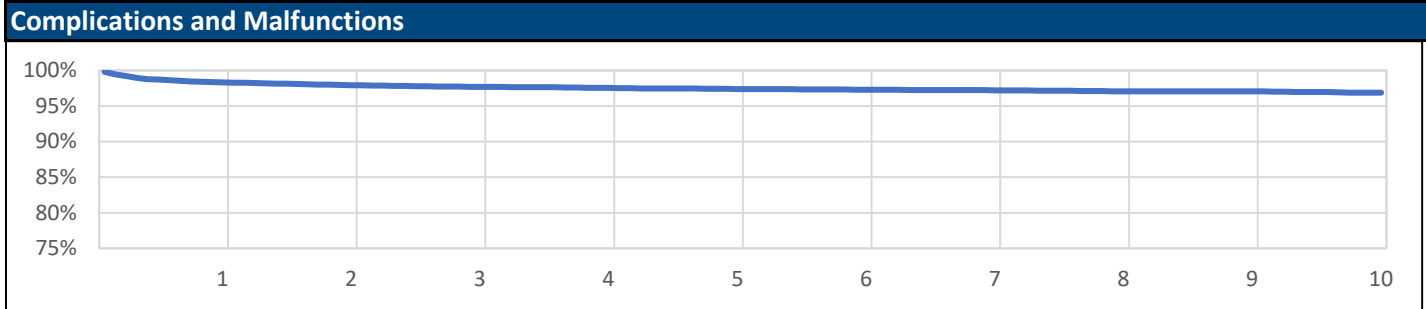
Worldwide Confirmed Malfunctions		1		
Worldwide Distribution		90,000		
	With Compromised Therapy	Without Compromised Therapy	Total	
Other				
Non-patterned, other	0	1	1	
Grand Total	0	1	1	

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

ACUITY Spiral

Models: 4591/4592/4593

US Summary			
US Registered Implants:	24,000	US Chronic Complications	577
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%	97.6%	97.4%	97.3%	97.2%	97.1%	97.1%	96.9%
Registered Implants: 24000	Effective Sample Size	20226	17948	15964	14158	12509	10987	9468	7725	5867	4221

ACUITY Spiral

Models: 4591/4592/4593

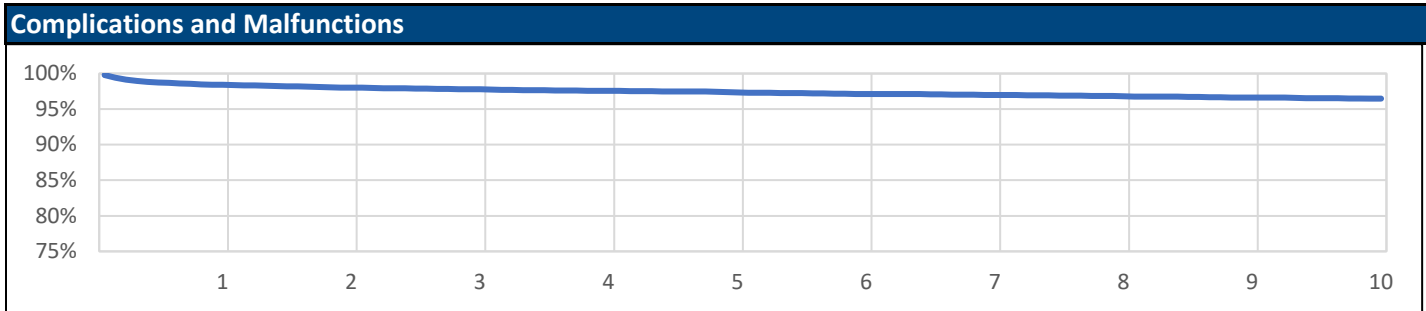
Worldwide Confirmed Malfunctions	9		
Worldwide Distribution	46,000		
	With Compromised Therapy	Without Compromised Therapy	Total
Other			
Non-patterned, other	4	5	9
Grand Total	4	5	9

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

ACUITY Steerable

Models: 4554/4555/4556

US Summary			
US Registered Implants:	29,000	US Chronic Complications	743
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%	97.4%	97.1%	97.0%	96.8%	96.6%	96.5%
Registered Implants: 29000	Effective Sample Size	24538	21935	19659	17640	15832	14144	12461	10566	8361	6476

ACUITY Steerable

Models: 4554/4555/4556

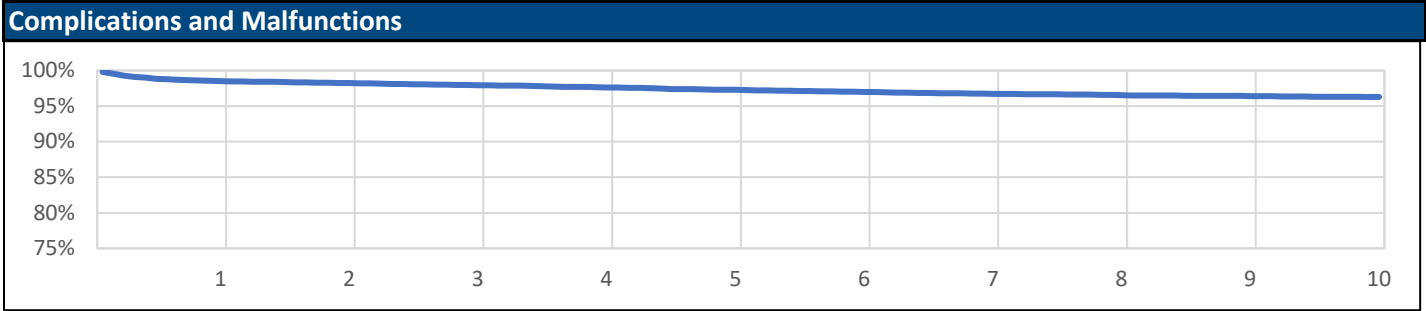
Worldwide Confirmed Malfunctions	57		
Worldwide Distribution	65,000		
	With Compromised Therapy	Without Compromised Therapy	Total
Conductor			
Extracardiac fracture (34)	28	8	36
Other			
Non-patterned, other	10	11	21
Grand Total	38	19	57

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	567
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	18431	16459	14737	13177	11764	10491	9273	7988	6529	5196

EASYTRAK 3

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

Worldwide Confirmed Malfunctions	52
Worldwide Distribution	43,000

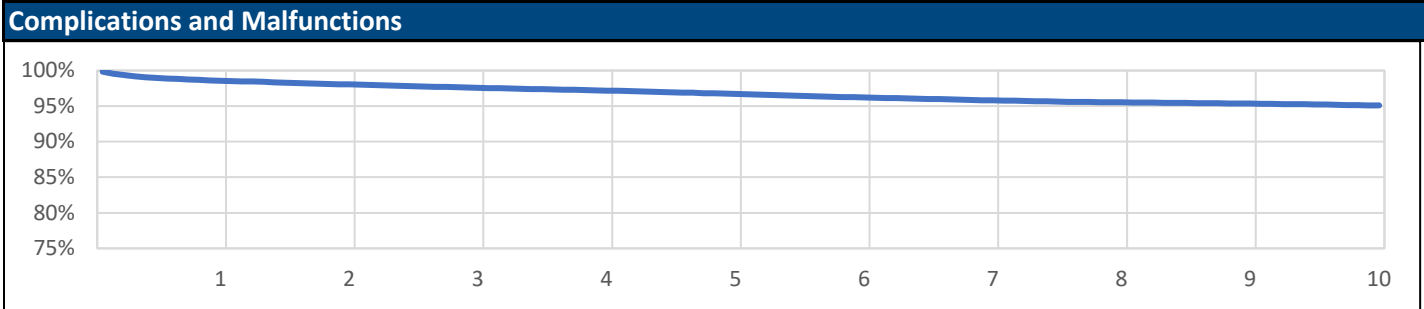
	With Compromised Therapy	Without Compromised Therapy	Total
Conductor			
Extracardiac fracture (34)	28	6	34
Other			
Non-patterned, other	7	11	18
Grand Total	35	17	52

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	2,968
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	82254	73303	65443	58477	52149	46308	40662	34782	28726	23355

EASYTRAK 2

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

Worldwide Confirmed Malfunctions	548
Worldwide Distribution	180,000

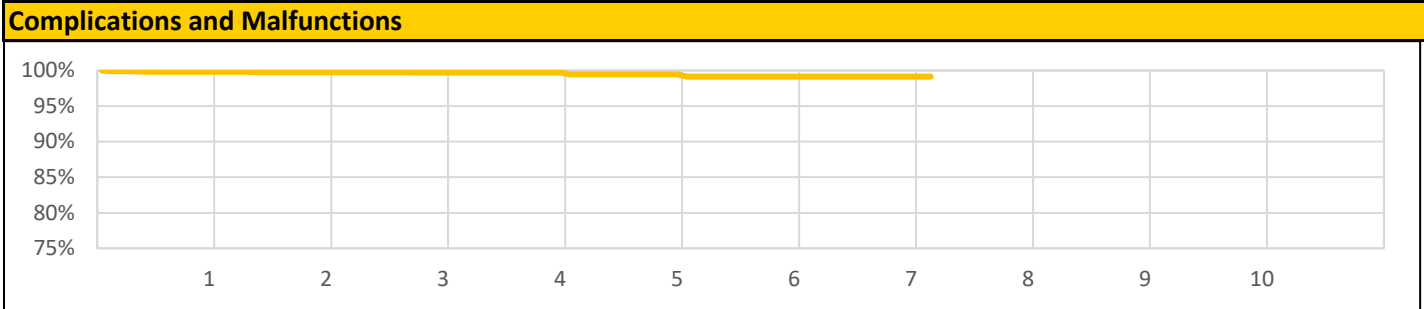
	With Compromised Therapy	Without Compromised Therapy	Total
Conductor			
Conductor fracture (25)	329	149	478
Other			
Non-patterned, other	39	31	70
Grand Total	368	180	548

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%	99.8%	99.7%	99.7%	99.4%	99.1%	99.1%	99.1%	--	--
Registered Implants: 9000	Effective Sample Size	6154	3548	1416	382	340	302	235	208	--	--

@ 86 months

ENDOTAK RELIANCE 4-FRONT Dual Coil Active Fixation

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

Worldwide Confirmed Malfunctions	5		
Worldwide Distribution	28,000		
	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

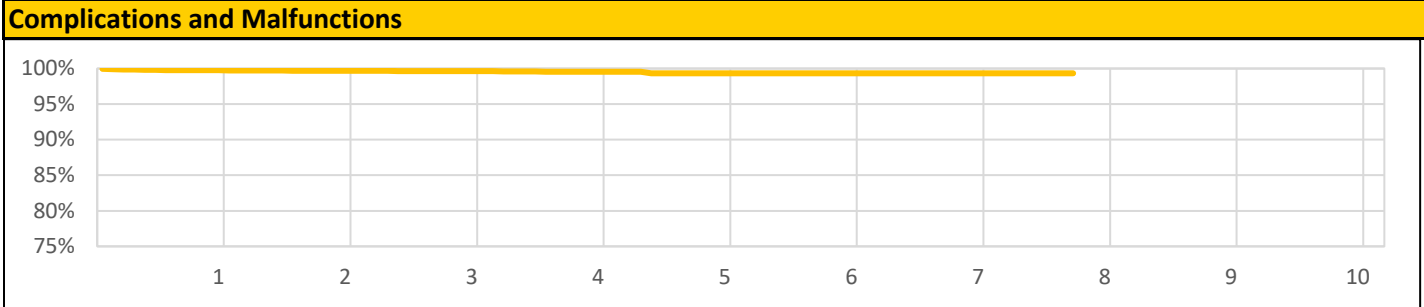
Worldwide Confirmed Malfunctions	0		
Worldwide Distribution	1,000		
	With Compromised Therapy	Without Compromised Therapy	Total
Other			
Non-patterned, other	0	0	0
Grand Total	0	0	0

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:	63,000	US Chronic Complications	159
US Approval Date:	May 2018	US Malfunctions:	12
US Estimated Active Implants:	58,000	Without Compromised Therapy:	1
		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%	99.7%	99.6%	99.6%	99.3%	99.3%	99.3%	99.3%	--	--
	Effective Sample Size	40330	22021	8326	969	831	744	550	234	--	--

Registered Implants: 63000

@ 93 months

ENDOTAK RELIANCE 4-FRONT Single Coil Active Fixation

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

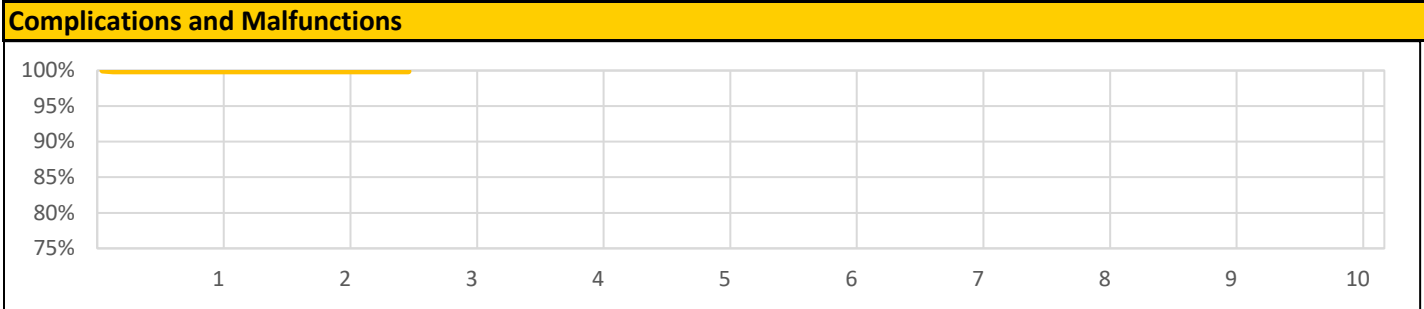
Worldwide Confirmed Malfunctions	71		
Worldwide Distribution	202,000		
	With Compromised Therapy	Without Compromised Therapy	Total
Conductor			
Conductor cable fracture (38)	24	0	24
Other			
Non-patterned, other	42	5	47
Grand Total	66	5	71

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	607	313	200	--	--	--	--	--	--	--

@ 30 months

Registered Implants: 1000

ENDOTAK RELIANCE 4-FRONT Single Coil Passive Fixation

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

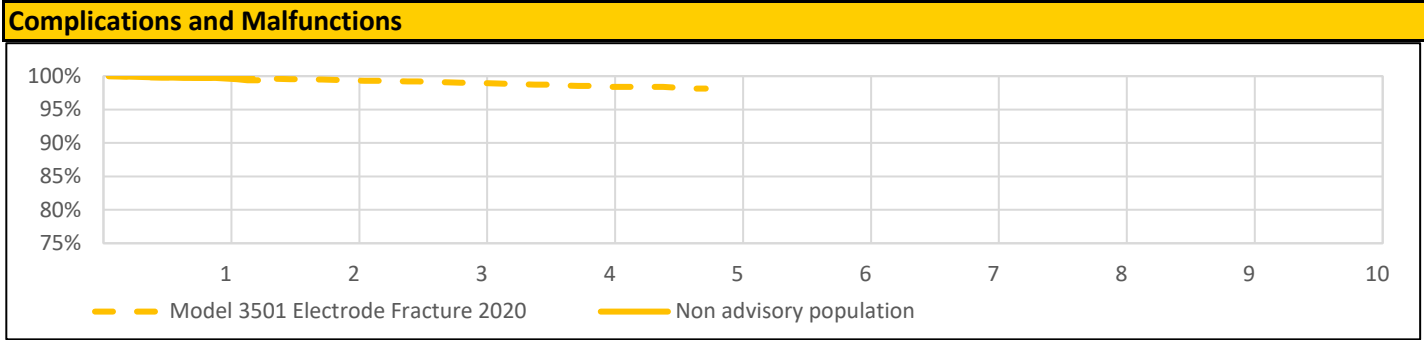
Worldwide Confirmed Malfunctions	1		
Worldwide Distribution	7,000		
	With Compromised Therapy	Without Compromised Therapy	Total
Conductor			
Conductor cable fracture (38)	1	0	1
Grand Total	1	0	1

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

EMBLEM S-ICD Electrode

Models: 3501

US Summary			
US Registered Implants:	27,000	US Chronic Complications	136
US Approval Date:	September 2017	US Malfunctions:	53
US Estimated Active Implants:	24,000	Without Compromised Therapy:	1
		With Compromised Therapy:	52



US Survival Probability											
Year		1	2	3	4	5	6	7	8	9	10
Non advisory population	Complications and Malfunctions	99.7%	99.7%	--	--	--	--	--	--	--	--
Registered Implants: 4000	Effective Sample Size	1279	261	--	--	--	--	--	--	--	--

@ 15 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%	98.9%	98.4%	98.1%	--	--	--	--	--
Registered Implants: 21000	Effective Sample Size	17549	12832	7422	2666	263	--	--	--	--	--

@ 57 months

EMBLEM S-ICD Electrode

Models: 3501

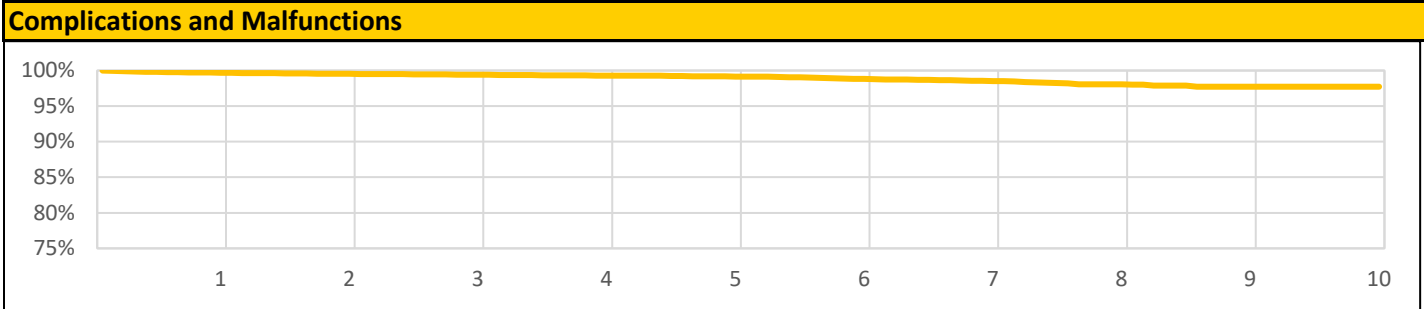
Worldwide Confirmed Malfunctions		134		
Worldwide Distribution		67,000		
	With Compromised Therapy	Without Compromised Therapy	Total	
Conductor				
Model 3501 electrode fracture 2020 (42)	61	1	62	
Electrode conductor fracture in or near the pocket (44)	65	1	66	
Other				
Non-patterned, other	6	0	6	
Grand Total	132	2	134	

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	196
US Approval Date:	September 2012	US Malfunctions:	22
US Estimated Active Implants:	18,000	Without Compromised Therapy:	2
		With Compromised Therapy:	20



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	20996	18668	16613	14677	11627	7116	3606	1361	350	213

@ 131 months

EMBLEM/Q-TRAK S-ICD Electrode

Models: 3010/3401

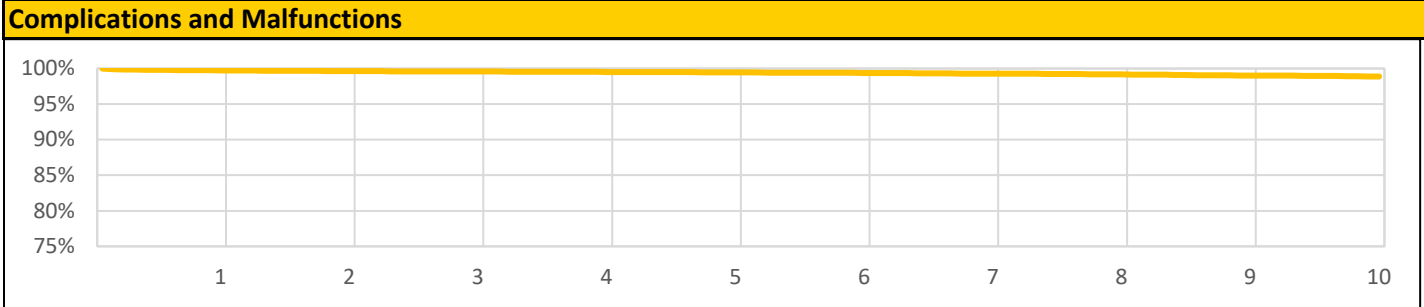
Worldwide Confirmed Malfunctions		66	
Worldwide Distribution		43,000	
	With Compromised Therapy	Without Compromised Therapy	Total
Conductor			
Electrode conductor fracture in or near the pocket (44)	27	3	30
Crimp/Weld/Bond			
Weld fracture (37)	3	0	3
Other			
Non-patterned, other	26	7	33
Grand Total	56	10	66

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	409
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	67933	60318	52944	44725	36163	28651	21778	15057	8771	2953

ENDOTAK RELIANCE 4-Site Dual Coil, Active Fixation

Models: 0275/0276/0295/0296

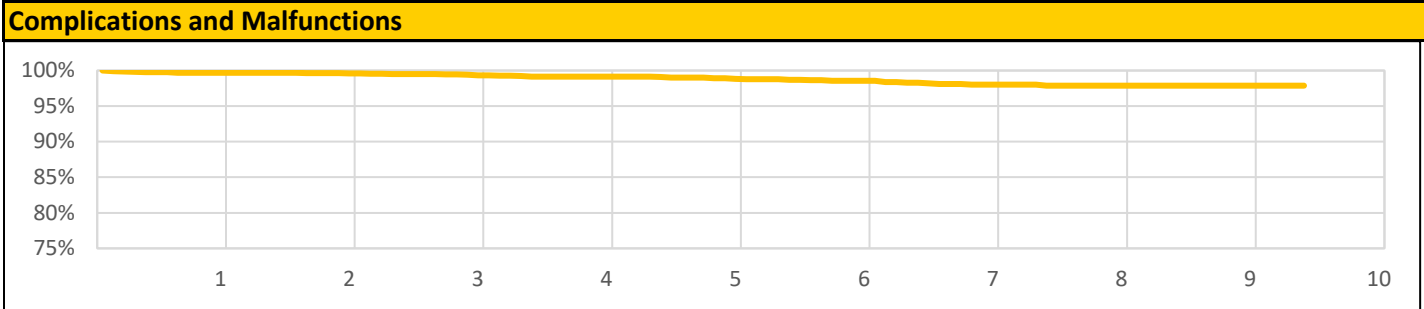
Worldwide Confirmed Malfunctions		67	
Worldwide Distribution		126,000	
	With Compromised Therapy	Without Compromised Therapy	Total
Conductor			
Conductor fracture (24)	3	0	3
Other			
Non-patterned, other	51	13	64
Grand Total	54	13	67

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	37
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%	99.3%	99.1%	98.8%	98.6%	98.0%	97.9%	97.9%	97.9%
Registered Implants: 3000	Effective Sample Size	2967	2626	2275	1900	1528	1213	898	583	296	206

@ 113 month

ENDOTAK RELIANCE 4-Site Dual Coil, Passive Fixation

Models: 0265/0266/0285/0286

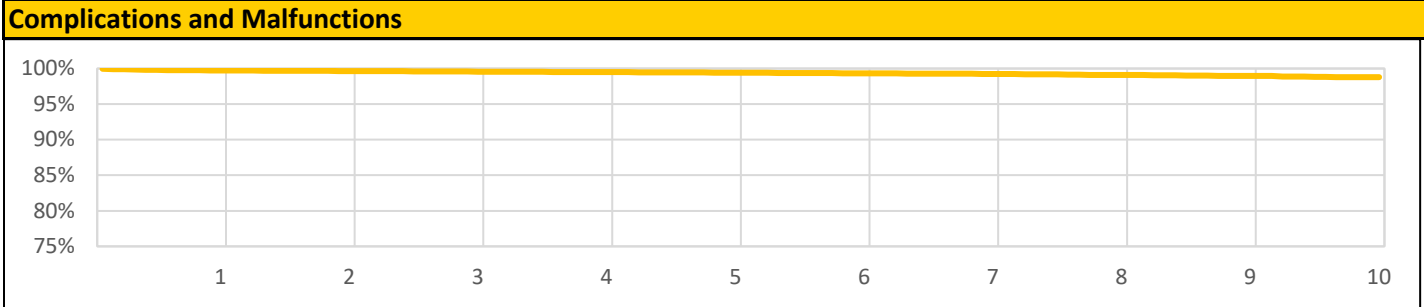
Worldwide Confirmed Malfunctions	3		
Worldwide Distribution	11,000		
	With Compromised Therapy	Without Compromised Therapy	Total
Other			
Non-patterned, other	0	3	3
Grand Total	0	3	3

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	608
US Approval Date:	November 2010	US Malfunctions:	46
US Estimated Active Implants:	96,000	Without Compromised Therapy:	10
		With Compromised Therapy:	36



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%	99.4%	99.3%	99.2%	99.1%	98.9%	98.8%
Registered Implants: 119000	Effective Sample Size	105361	94215	83246	67240	46468	31581	20024	11060	5045	1549

ENDOTAK RELIANCE 4-Site Single Coil, Active Fixation

Models: 0272/0273/0292/0293

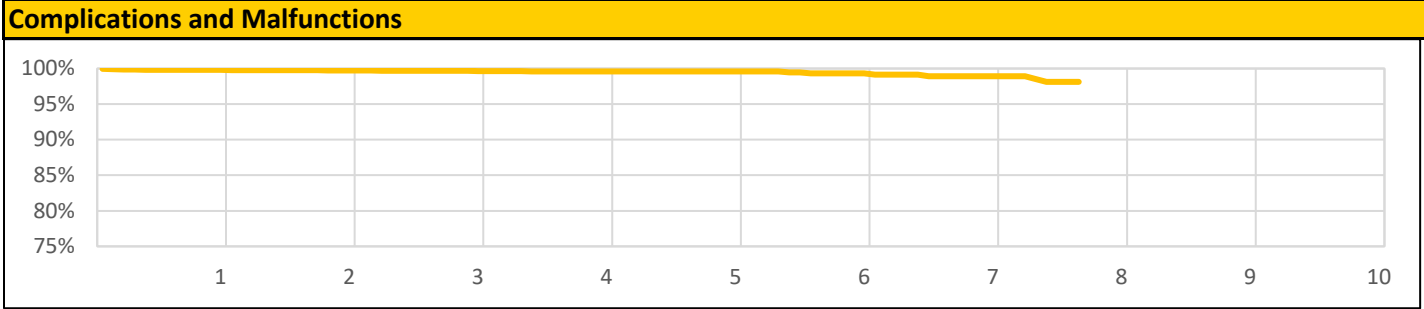
Worldwide Confirmed Malfunctions	91		
Worldwide Distribution	214,000		
	With Compromised Therapy	Without Compromised Therapy	Total
Conductor			
Conductor fracture (24)	10	0	10
Other			
Non-patterned, other	65	16	81
Grand Total	75	16	91

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

ENDOTAK RELIANCE 4-Site Single Coil, Passive Fixation

Models: 0262/0263/0282/0283

US Summary			
US Registered Implants:	19,000	US Chronic Complications	52
US Approval Date:	November 2010	US Malfunctions:	4
US Estimated Active Implants:	18,000	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%	98.1%	--	--
Registered Implants: 19000	Effective Sample Size	13381	8125	3900	1294	877	567	327	206	--	--

@ 92 months

ENDOTAK RELIANCE 4-Site Single Coil, Passive Fixation

Models: 0262/0263/0282/0283

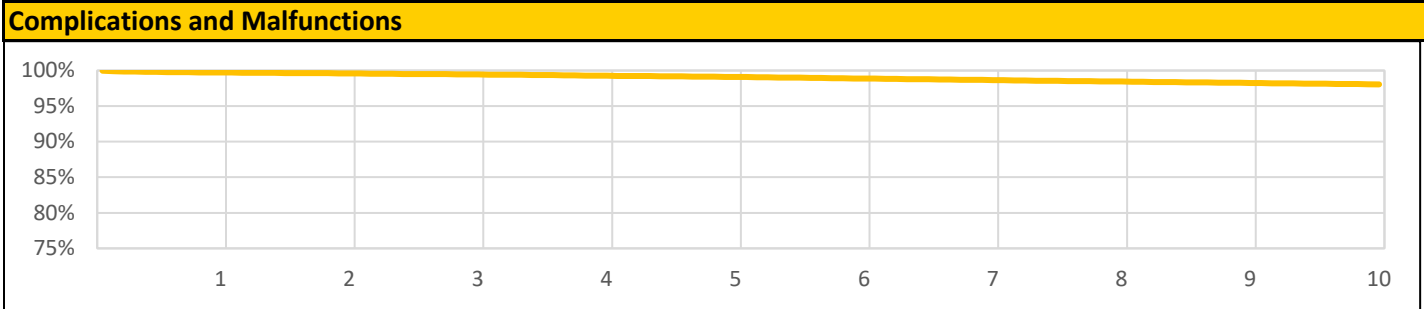
Worldwide Confirmed Malfunctions	6		
Worldwide Distribution	6,000		
	With Compromised Therapy	Without Compromised Therapy	Total
Other			
Non-patterned, other	5	1	6
Grand Total	5	1	6

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	3,676
US Approval Date:	July 2002	US Malfunctions:	389
US Estimated Active Implants:	105,000	Without Compromised Therapy:	124
		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%	98.6%	98.5%	98.2%	98.0%
Registered Implants: 287000	Effective Sample Size	252203	226385	203320	182457	163626	146486	130916	116702	103600	91171

ENDOTAK RELIANCE Dual Coil, Active Fixation

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

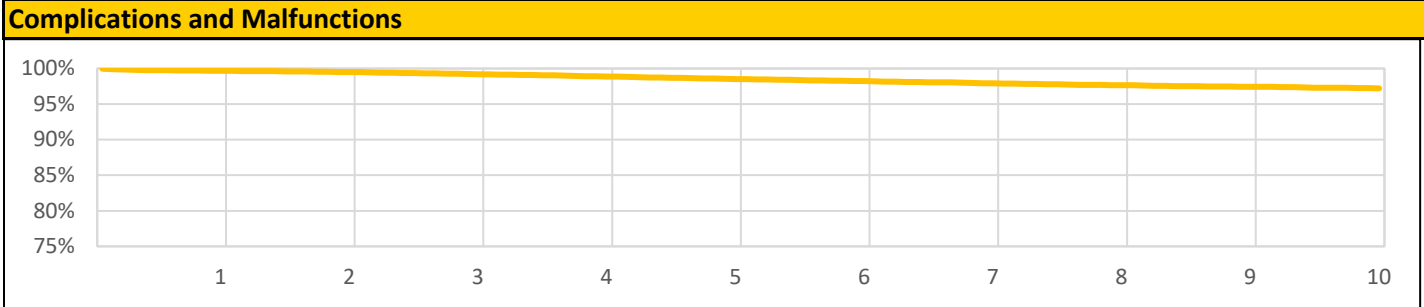
Worldwide Confirmed Malfunctions		590	
Worldwide Distribution		382,000	
	With Compromised Therapy	Without Compromised Therapy	Total
Conductor			
Conductor fracture (24)	106	0	106
Crimp/Weld/Bond			
Seal rings (5)	2	2	4
Other			
Non-patterned, other	275	205	480
Grand Total	383	207	590

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	905
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	40555	36393	32652	29242	26169	23416	20938	18692	16665	14706

ENDOTAK RELIANCE Dual Coil, Passive Fixation

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

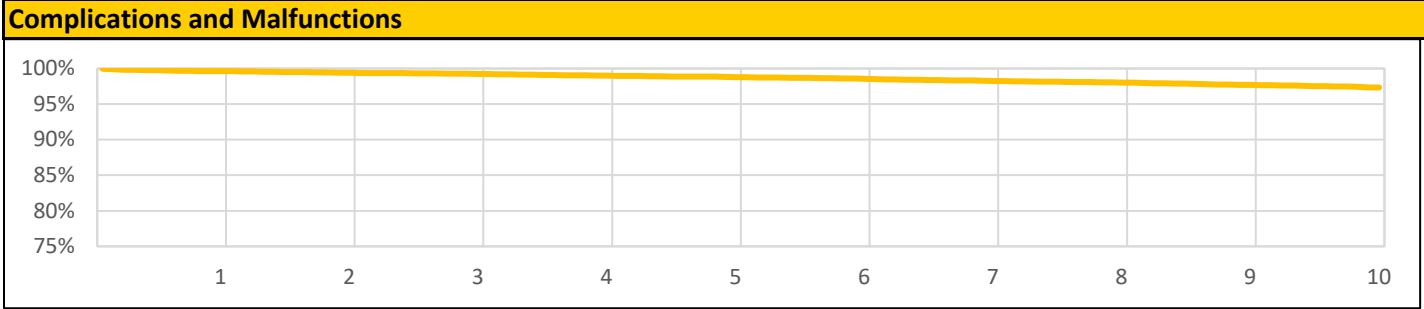
Worldwide Confirmed Malfunctions		167		
Worldwide Distribution		109,000		
	With Compromised Therapy	Without Compromised Therapy	Total	
Conductor				
Conductor fracture (24)	20	0	20	
Crimp/Weld/Bond				
Conductor connection (36)	3	0	3	
Other				
Non-patterned, other	88	55	143	
Manufacturing material (6)	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	486
US Approval Date:	October 2000	US Malfunctions:	88
US Estimated Active Implants:	20,000	Without Compromised Therapy:	24
		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	29625	26218	23239	20510	18068	15825	13592	11281	9101	7115

ENDOTAK RELIANCE Single Coil, Active Fixation

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

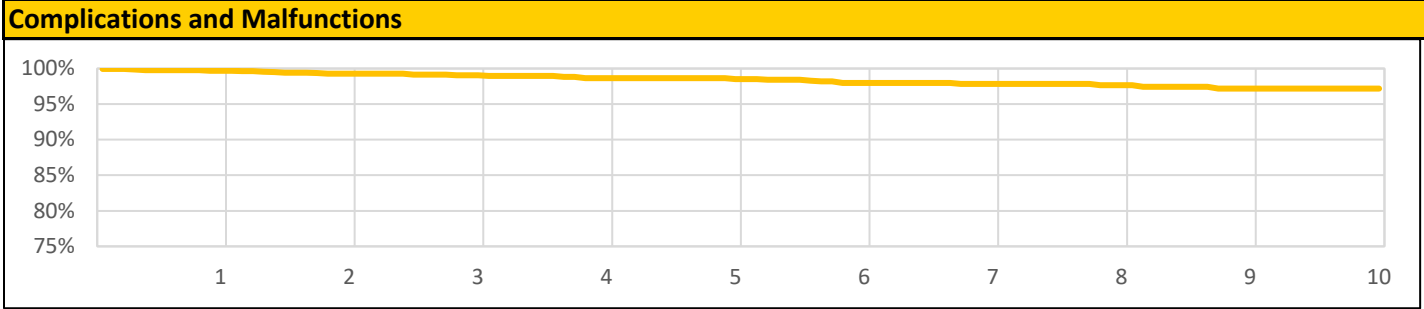
Worldwide Confirmed Malfunctions	211		
Worldwide Distribution	78,000		
	With Compromised Therapy	Without Compromised Therapy	Total
Conductor			
Conductor fracture (24)	62	1	63
Other			
Non-patterned, other	91	57	148
Grand Total	153	58	211

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	36
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%	97.2%	97.2%
Registered Implants: 2000	Effective Sample Size		1556	1390	1229	1088	960	829	665	485	350	213

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:	223,000	US Chronic Complications	375
US Approval Date:	December 2019	US Malfunctions:	45
US Estimated Active Implants:	212,000	Without Compromised Therapy:	25
		With Compromised Therapy:	20



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: 223000	Effective Sample Size	115730	29977	469	--	--	--	--	--	--	--

@ 32 months

INGEVITY+ Positive Fixation

Models: 7840/7841/7842

Worldwide Confirmed Malfunctions	46
Worldwide Distribution	311,000

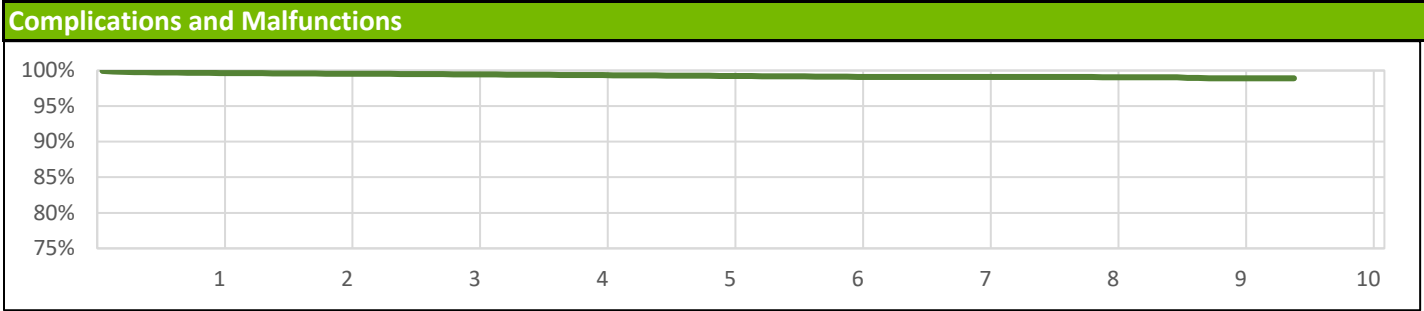
	With Compromised Therapy	Without Compromised Therapy	Total
Conductor			
Extracardiac fracture (41)	4	6	10
Other			
Non-patterned, other	16	20	36
Grand Total	20	26	46

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	1,834
US Approval Date:	April 2016	US Malfunctions:	284
US Estimated Active Implants:	307,000	Without Compromised Therapy:	158
		With Compromised Therapy:	126



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%	98.9%	98.9%
Registered Implants: 365000	Effective Sample Size	321952	288011	223565	140975	72788	17391	1968	1767	1514	1448

@ 113 months

INGEVITY Positive Fixation

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

Worldwide Confirmed Malfunctions	417
Worldwide Distribution	1,073,000

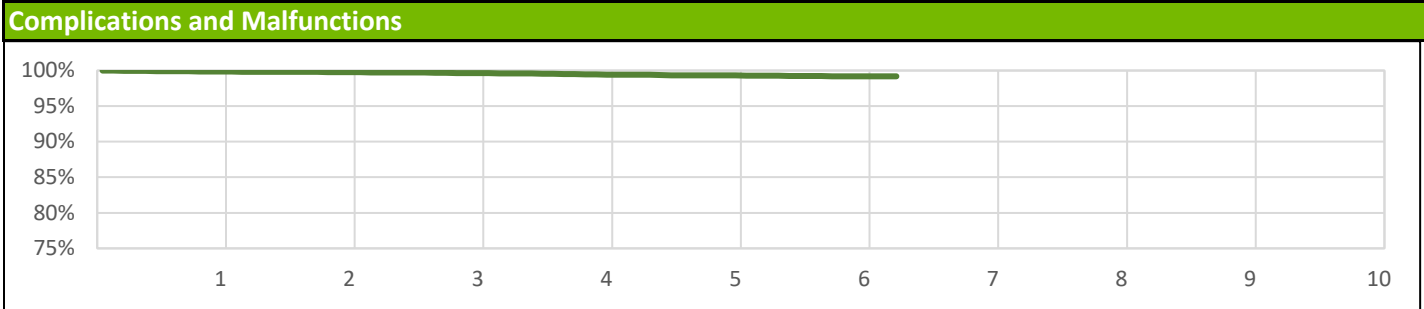
	With Compromised Therapy	Without Compromised Therapy	Total
Conductor			
Inner conductor break (39)	9	7	16
Extracardiac fracture (41)	100	125	225
Other			
Insulation (43)	2	17	19
Non-patterned, other	72	85	157
Grand Total	183	234	417

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

INGEVITY Passive Fixation

Models: 7631/7632/7731/7732

US Summary			
US Registered Implants:	26,000	US Chronic Complications	80
US Approval Date:	April 2016	US Malfunctions:	13
US Estimated Active Implants:	23,000	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	99.9%	99.8%	99.6%	99.4%	99.3%	99.2%	99.2%	--	--	--
Registered Implants: 26000	Effective Sample Size	20433	15351	11080	7109	3739	883	279	--	--	--

@ 75 months

INGEVITY Passive Fixation

Models: 7631/7632/7731/7732

Worldwide Confirmed Malfunctions	18
Worldwide Distribution	119,000

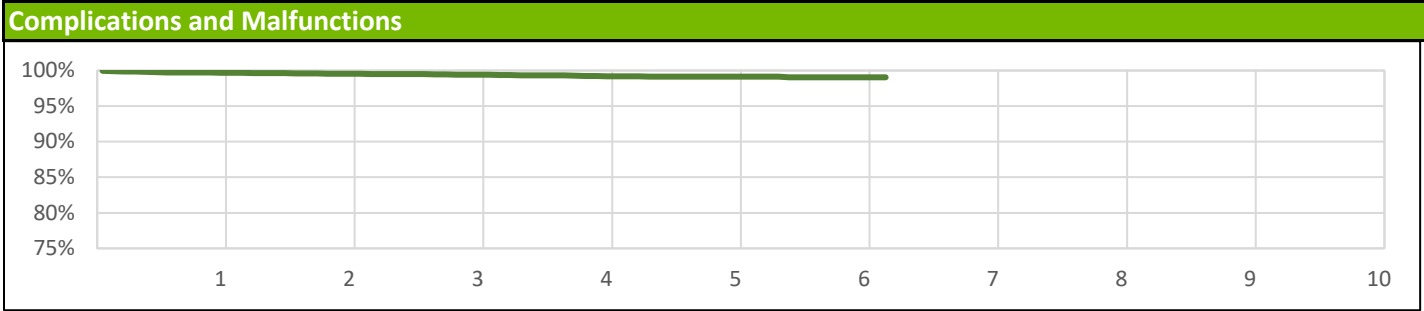
	With Compromised Therapy	Without Compromised Therapy	Total
Conductor			
Extracardiac fracture (41)	6	0	6
Other			
Insulation (43)	0	1	1
Non-patterned, other	10	1	11
Grand Total	16	2	18

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	73
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%	99.5%	99.4%	99.2%	99.1%	99.0%	99.0%	--	--	--
Registered Implants: 15000	Effective Sample Size	11774	8880	6377	4063	2074	485	266	--	--	--

@ 74 months

INGEVITY Atrial J Passive Fixation

Models: 7635/7636/7735/7736

Worldwide Confirmed Malfunctions	15
Worldwide Distribution	108,000

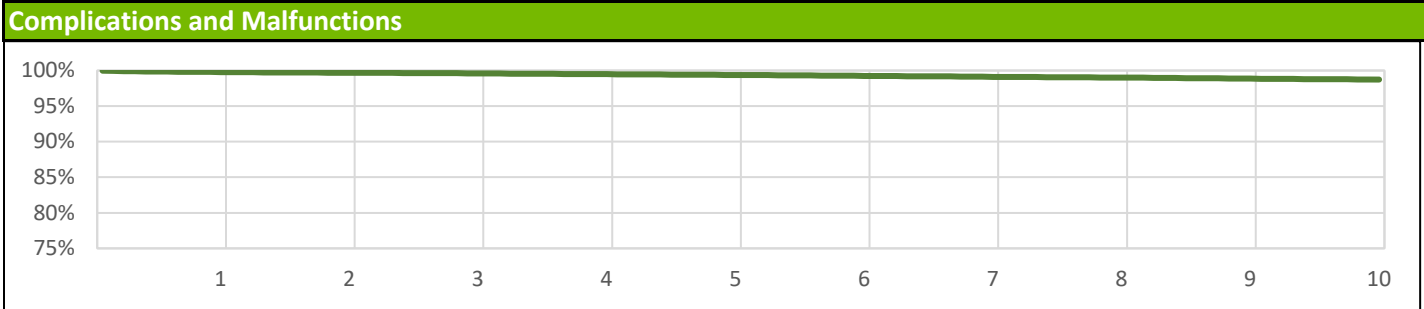
	With Compromised Therapy	Without Compromised Therapy	Total
Conductor			
Extracardiac fracture (41)	0	9	9
Crimp/Weld/Bond			
Weld (40)	0	1	1
Other			
Non-patterned, other	0	5	5
Grand Total	0	15	15

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:	512,000	US Chronic Complications	3,824
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: 512000	Effective Sample Size	444738	392342	344952	301107	262163	228110	193859	160847	131333	105787

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

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

Worldwide Confirmed Malfunctions	202
Worldwide Distribution	808,000

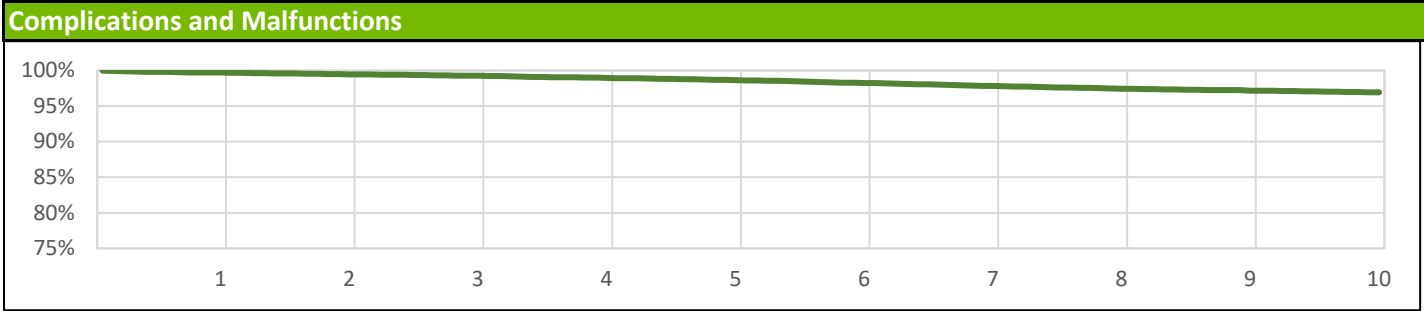
	With Compromised Therapy	Without Compromised Therapy	Total
Conductor			
Lead conductor (7)	66	17	83
Crimp/Weld/Bond			
Terminal weld (23)	1	0	1
Other			
Lead body (4)	71	31	102
Non-patterned, other	8	8	16
Grand Total	146	56	202

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	927
US Approval Date:	January 2000	US Malfunctions:	157
US Estimated Active Implants:	19,000	Without Compromised Therapy:	41
		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	46352	41570	37164	33122	29499	26181	22714	19406	16403	13720

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

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

Worldwide Confirmed Malfunctions	197
Worldwide Distribution	144,000

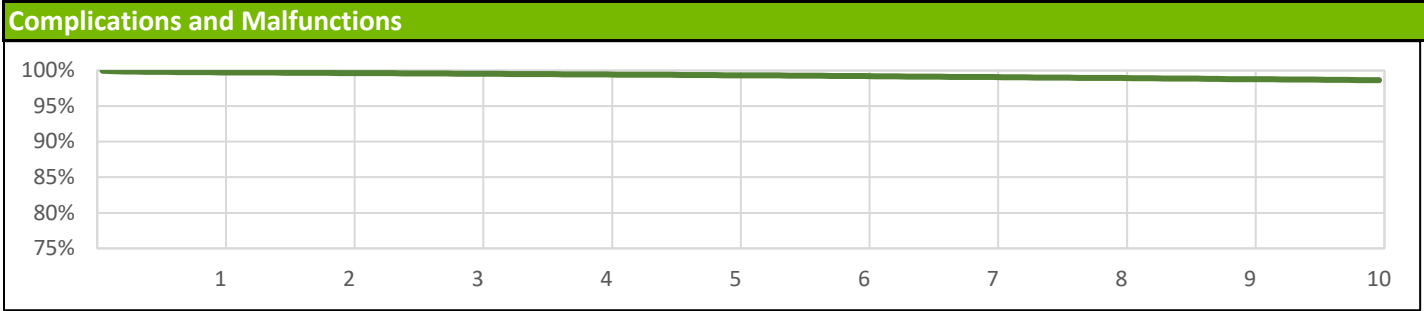
	With Compromised Therapy	Without Compromised Therapy	Total
Conductor			
Lead conductor (7)	90	13	103
Other			
Conductor damage (32)	55	25	80
Lead body (4)	0	1	1
Non-patterned, other	4	9	13
Grand Total	149	48	197

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	1,661
US Approval Date:	January 2000	US Malfunctions:	46
US Estimated Active Implants:	75,000	Without Compromised Therapy:	3
		With Compromised Therapy:	43



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	169987	151716	135195	120120	106447	94183	81280	68405	56753	46575

FINELINE II/FINELINE II Sterox Passive Fixation (Polyurethane)

Models: 4452/4453/4456/4457

Worldwide Confirmed Malfunctions	69
Worldwide Distribution	554,000

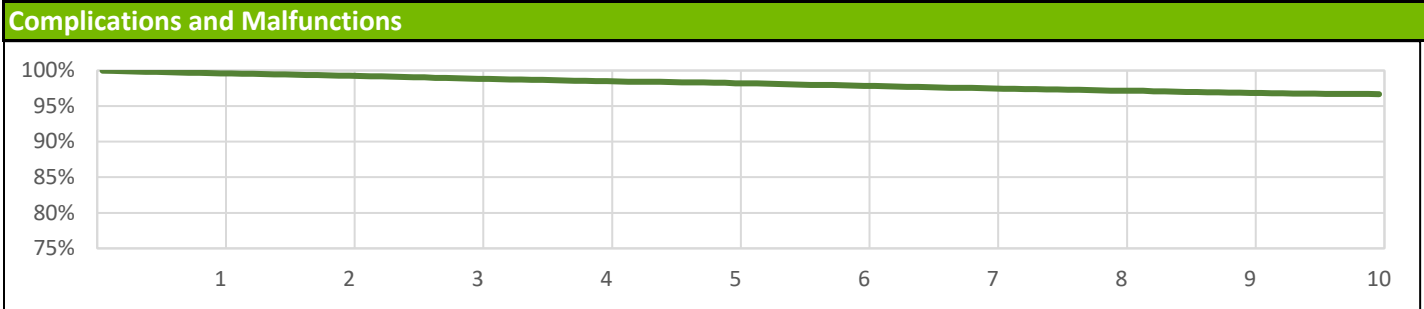
	With Compromised Therapy	Without Compromised Therapy	Total
Conductor			
Lead conductor (7)	19	0	19
Other			
Lead body (4)	41	3	44
Non-patterned, other	5	1	6
Grand Total	65	4	69

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	317
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%	96.9%	96.7%
Registered Implants: 14000	Effective Sample Size	12308	11021	9819	8718	7756	6870	6026	5247	4538	3905

FINELINE II/FINELINE II Sterox Passive Fixation (Silicone)

Models: 4454/4455/4458/4459

Worldwide Confirmed Malfunctions	60
Worldwide Distribution	105,000

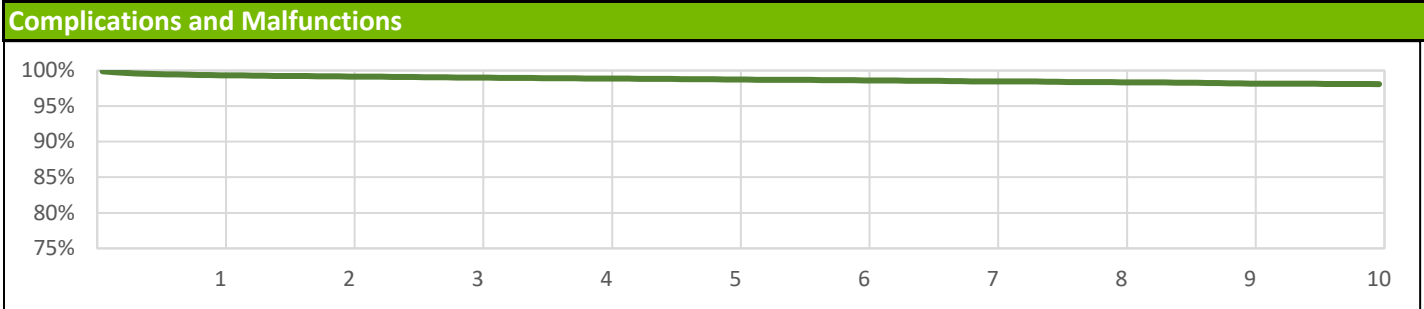
	With Compromised Therapy	Without Compromised Therapy	Total
Conductor			
Lead conductor (7)	20	0	20
Other			
Conductor damage (32)	35	3	38
Non-patterned, other	2	0	2
Grand Total	57	3	60

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	843
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%	98.4%	98.2%	98.1%
Registered Implants: 63000	Effective Sample Size	55014	49262	44134	39465	35112	31155	26803	22468	18580	15107

FINELINE II/FINELINE II Sterox Atrial J (Polyurethane)

Models: 4477/4478/4479/4480

Worldwide Confirmed Malfunctions	79
Worldwide Distribution	324,000

	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	59	47	203	37	13	8	0	7	0	1
INGEVITY Positive Fixation 7640/7641/7642/7740/7741/7742	365,000	146	549	572	234	108	28	45	127	0	25
INGEVITY Atrial J Passive Fixation 7635/7636/7735/7736	14,000	0	18	35	9	3	2	2	4	0	0
INGEVITY Passive Fixation 7631/7632/7731/7732	25,000	1	22	14	18	6	3	1	15	0	0
FINELINE II ; Passive Fixation (poly) 4452/4453/4456/4457	196,000	5	492	249	299	78	35	216	268	0	19
FINELINE II EZ ; Positive Fixation (poly) 4463/4464/4465/4469/4470/4471	507,000	24	822	898	528	208	156	609	548	0	31
FINELINE II Atrial J (poly) 4477/4478/4479/4480	63,000	1	127	369	139	31	34	80	54	0	8
FINELINE II/THINLINE II ; Passive Fixation (silicone) 4454/4455/4458/4459	14,000	2	126	20	71	30	5	24	38	0	1
FINELINE II/THINLINE II EZ ; Positive Fixation (silicone) 4466/4467/4468/4472/5573/4474	53,000	0	312	96	122	110	24	107	153	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	27	6	1	0	0	0	0	7
ACUITY X4 Spiral S 4674/4675	49,000	1	2	81	8	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	133	23	0	0	1	5	0	53
ACUITY Steerable 4554/4555/4556	29,000	4	43	463	67	6	2	18	42	0	98
ACUITY Spiral 4591/4592/4593	24,000	0	25	343	54	0	1	5	11	0	138
EASYTRAK 3 4522/4524/4525/4527/4548/4549/4550	22,000	2	44	315	64	5	2	16	24	0	95
EASYTRAK 2 4515/4517/4518/4520/4542/4543/4544	97,000	1	434	1374	388	15	8	118	182	0	448
EASYTRAK 4510/4511/4512/4513/4535/4536/ 4537/4538	38,000	2	91	489	150	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	22	22	75	12	11	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	23	57	122	36	74	12	14	25	39	7
ENDOTAK RELIANCE 4-Site ; Dual Coil, Passive Fixation 0285/0286	3,000	1	3	9	3	7	0	0	12	1	1
ENDOTAK RELIANCE 4-Site ; Single Coil, Active Fixation 0292/0293	133,000	36	80	210	64	103	25	17	44	50	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	782	434	239	898	103	170	461	526	30
ENDOTAK RELIANCE ; Dual Coil, Passive Fixation 0147/0148/0149/0174/0175/0176/0177	47,000	6	157	75	86	159	13	48	272	82	7
ENDOTAK RELIANCE ; Single Coil, Active Fixation 0137/0138/0160/0161/0162/0180/0181/0182	34,000	14	110	63	38	86	3	8	58	102	4
ENDOTAK RELIANCE ; Single Coil, Passive Fixation 0127/0128/0170/0171/0172/0173	2,000	0	5	5	3	7	0	1	10	5	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	6	7	0	114	5	0	0	4
EMBLEM/Q-TRAK S-ICD Electrode 3010, 3401	24,000	0	4	21	0	143	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	222,000	273	27	583	115	31	33	2	17	0	5
INGEVITY Positive Fixation 7640/7641/7642/7740/7741/7742	365,000	456	421	943	220	77	50	8	51	0	31
INGEVITY Atrial J Passive Fixation 7635/7636/7735/7736	15,000	1	0	36	7	1	1	0	1	0	0
INGEVITY Passive Fixation 7631/7632/7731/7732	26,000	1	0	40	11	0	3	0	0	0	0
FINELINE II ; Passive Fixation (poly) 4452/4453/4456/4457	197,000	9	11	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	512,000	56	49	698	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	31	37	9	0	0	6	0	21
ACUITY X4 Spiral S 4674/4675	53,000	0	2	64	47	7	0	0	24	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	40,000	2	0	140	32	6	1	0	12	0	60
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	62,000	52	9	127	17	15	3	1	6	3	3
ENDOTAK RELIANCE 4-FRONT Dual Coil Active Fixation 0653/0658/0675/0676/0695/0696	9,000	7	1	17	8	3	0	0	1	0	0
ENDOTAK RELIANCE 4-Site ; Dual Coil, Active Fixation 0275/0276/0295/0296	77,000	56	18	253	43	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	136,000	101	19	360	70	52	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
--	-------	---	---	---	---	---	---	---	---	---	---

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	27,000	1	0	23	0	221	6	0	0	7
EMBLEM/Q-TRAK S-ICD Electrode 3010/3401	24,000	1	0	21	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	43,000	0	0	0	2	0	0	0
ACUITY X4 Spiral S 4674/4675	112,000	0	0	0	4	0	0	0
ACUITY X4 Straight 4671/4672	90,000	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	47,000	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	28,000	0	0	0	8	0	0	0
ENDOTAK RELIANCE 4-FRONT Single Coil Active Fixation 0652/0657/0672/0673/0692/0693	202,000	3	1	0	72	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	126,000	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	214,000	0	0	0	63	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	67,000	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/Weld/Bond	Other	Labeling	Packaging	Implant Accessory
INGEVITY+ Positive Fixation 7840/7841/7842	311,000	0	0	0	16	0	0	0
INGEVITY Positive Fixation 7640/7641/7642/7740/7741/7742	1,073,000	2476	0	0	3296	0	0	0
INGEVITY Atrial J Passive Fixation 7635/7636/7735/7736	108,000	0	0	0	0	0	0	0
INGEVITY Passive Fixation 7631/7632/7731/7732	119,000	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*	554,000	1	0	3	8	6	26	0
FINELINE II EZ ; Positive Fixation (poly) 4463/4464/4465/4469/4470/4471*	808,000	0	0	6	727	1	52	3
FINELINE II Atrial J (poly) 4477/4478/4479/4480*	324,000	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 03-Oct-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	CURRENT RECOMMENDATION 03-Oct-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: <ul style="list-style-type: none"> • 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.
ADVANTIO DR EL Pacemaker Models: J064, J067, K064, K084, K087	Safety Mode, Physician Letter, June 2021
Safety Mode, Patient Letter, June 2021	

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	<p><i>Estimated Rate of Occurrence</i></p> <p>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.</p> <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.
ESSENTIO Pacemaker Models L100, L101, L110, L111, L121,	
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	<p>CURRENT STATUS 03-Oct-22</p> <p><i>Estimated Rate of Occurrence</i></p> <p>The combined 2018 and 2021 advisories subset is composed of approximately 107,000 active pacemakers. The observed malfunction rate for this behavior is 2.1% at 5 years, and 3.1% at 6 years. The observed potential for life-threatening harm is 1 in 1,000,000 (0.0001%) at 5 years.</p>
Hydrogen Induced Premature Depletion, Physician 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.
Hydrogen Induced Premature Depletion, Patient Letter, June 2021	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.
	<p>CURRENT RECOMMENDATION 03-Oct-22</p> <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 03-Oct-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 63 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 03-Oct-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 03-Oct-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 03-Oct-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
<p>Identifiable by serial number. Not all serial numbers are affected.</p> <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>EMBLEM S-ICD Models A209, A219</p> <p>EMBLEM Premature Depletion, Physician Letter, August 2019</p> <p>EMBLEM Premature Depletion, Patient Letter, August 2019</p> <p>EMBLEM Premature Battery Depletion, Physician Letter Update, December 2020</p> <p>EMBLEM Premature Depletion, Patient Letter Update, December 2020</p> <p>EMBLEM Premature Battery Depletion, Physician Letter Update, February 2022</p> <p>EMBLEM Premature Depletion, Patient Letter Update, February 2022</p>	<p>Voluntary Physician Advisory FDA Classification August 2019: Class II FDA Classification December 2020: Class II</p> <p>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.</p> <p>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.</p> <p>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.</p> <p><i>Estimated Rate of Occurrence</i></p> <ul style="list-style-type: none"> • 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. • 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. <p>Standard Warranty program available, please contact your local representative for terms and conditions.</p>
	<p>CURRENT STATUS 03-Oct-22</p> <p>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.</p> <p><i>Estimated Rate of Occurrence</i></p> <p>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.</p> <p>The malfunction rate is 11.5% at 5 years with a projected potential for life-threatening harm of approximately 1 in 140,000 at 5 years.</p> <p>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.</p>

CURRENT RECOMMENDATION 03-Oct-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.
SQ-RX 1010 Shortened Replacement Time, Physician Letter, November 2018	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, 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.
	<i>Estimated Rate of Occurrence</i> 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.
	Standard Warranty program available, please contact your local representative for terms and conditions.
	CURRENT STATUS 03-Oct-22
	<i>Estimated Rate of Occurrence</i> 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.
	CURRENT RECOMMENDATION 03-Oct-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 • 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 • 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. • 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

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

Voluntary Physician Advisory

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

Boston Scientific investigation has shown that the probability of harm associated with MV sensor signal oversensing 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 ⁴ :	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 ⁵	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 03-Oct-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 03-Oct-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 03-Oct-22**Confirmed Malfunctions (worldwide)**

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

MOMENTUM CRT-D

Models G124, G125, G126, G128, G138

CURRENT RECOMMENDATION 03-Oct-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.

CHARISMA CRT-D

G337, G347, G348

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 03-Oct-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 03-Oct-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>
---	---

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)
<hr/>	
CURRENT STATUS 03-Oct-22	
<hr/>	
<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>	
<hr/>	
CURRENT RECOMMENDATION 03-Oct-22	
<hr/>	
<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. 	
<hr/>	
<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
DYNAGEN	INLIVEN	VITALIO
EASYTRAK	INOGEN	VITALITY
EMBLEM	INTUA	4-SITE
ENDOTAK	INVIVE	

The following marks are registered trademarks for Intermedics, Inc and Cameron Health, Inc. (doing business as Cardiac Pacemakers, Inc., a Boston Scientific Company) used in connection with the goods or services indicated:

Q-TRAK	SQ-RX	S-ICD
--------	-------	-------



Rhythm Management

300 Boston Scientific Way
Marlborough, MA 01752-1234
www.bostonscientific.com

Medical Professionals:
1.800.CARDIAC (227.3422)

Patients and Families:
1.866.484.3268

© 2021 Boston Scientific Corporation
or its affiliates. All rights reserved.

CRM-373910-AD