



WATCHMAN™
LEFT ATRIAL APPENDAGE CLOSURE IMPLANT

**Boston
Scientific**
Advancing science for life™

One
Time.
For a
Lifetime.



Is life without blood thinners possible
for people with AFib? Yes.



Get to know the WATCHMAN Implant.

A man in a plaid shirt and blue jeans stands on a wooden deck in a lush garden. He is looking up at a large tree trunk on the right side of the frame. The background is filled with green foliage and a lattice fence. The scene is bathed in soft, natural light.

When I was on blood thinners, it was always a different life. WATCHMAN was a lifesaver. It put me back to being who I was.

— Cliff, 68

Did you know?

WATCHMAN™ is the #1 doctor recommended LAAC implant.

It is the most implanted device of its kind approved by the FDA for reducing the risk of stroke in people with atrial fibrillation not caused by a heart valve problem.

Over 400,000 people have left blood thinners behind for life with the WATCHMAN™ Implant.

Life with AFib can mean a lifetime of blood thinners. And if you're troubled by falls and bleeds, worry follows you everywhere. For 400,000+ people, that worry is gone thanks to the WATCHMAN Implant.

The WATCHMAN Implant is a safe, minimally invasive, one-time implant that reduces your stroke risk without the need for lifelong blood thinners.*[†] It has a high 99% success rate and a low 0.5% rate of major complications.[†]

As with any medical procedure, there are risks associated with the WATCHMAN Implant, including internal bleeding, stroke, and in rare cases, death.

Get to know the WATCHMAN Implant.

Inside this brochure, you'll find the following helpful information:

- Stroke risk reduction treatment options
- What the WATCHMAN Implant is and how it works
- Before, during, and after your procedure
- Living life with the WATCHMAN Implant
- How to get in touch with us

*In a clinical trial >96% of patients were able to discontinue their blood thinner 45 days after getting the WATCHMAN Implant

†In a clinical trial. Major complication is defined as an occurrence of one of the following events between the time of implant and within 7 days following the procedure or by hospital discharge, whichever is later: all-cause death, ischemic stroke, systemic embolism, or device or procedure related events requiring open cardiac surgery or major endovascular intervention

1. Kar, S., et al, Primary Outcome Evaluation of the Next Generation LAAC Device: Results from the PINNACLE FLX Trial, Circulation, 2021.

The goal: reducing your stroke risk.
Blood thinners are one way.

Blood thinners reduce the risk of clots that could lead to a stroke.

The blood thinner warfarin (also known as Coumadin®) has been around for more than 60 years. Newer blood thinners include Eliquis® (apixaban), Pradaxa® (dabigatran), Xarelto® (rivaroxaban), and Savaysa® (edoxaban).

These medications are effective, but because they prevent clots by thinning the blood, they can come with challenges and may increase your risk of bleeding.



Major and minor bleeding risks from other medical conditions or falls



Your job or hobbies could result in bleeding or bruising



Difficulty with once- or twice-daily pill dosing



Complications during surgery



High ongoing cost



If taking warfarin, regular monitoring and food/drug interactions

Did you know?

Blood thinners can increase bleeding risk over time.

People who take blood thinners for 10 years may be at a 6-9x higher risk of bleeding due to prolonged use.*¹

The WATCHMAN™ Implant is an alternative to blood thinners.

This safe, minimally invasive, one-time implant reduces your stroke risk without the need for lifelong blood thinners.^{†2}

*Assumes constant risk despite increasing age, and bleeding risk is independent from bleeding risk in previous years

†In a clinical trial >96% of patients were able to discontinue their blood thinner 45 days after getting the WATCHMAN Implant

1. Turagam MK, Parikh V, Afzal MR, et al. *J Cardiovasc Electrophysiol.* 2017; 28: 853-861.

2. Kar, S., et al, Primary Outcome Evaluation of the Next Generation LAAC Device: Results from the PINNACLE FLX Trial, *Circulation*, 2021.



I was restricted on blood thinners and now I can just go to where I want to go and do what I want to do. — Michael, 79

Is the WATCHMAN™ Implant right for you?

The WATCHMAN Implant is for people who have AFib not caused by a heart valve problem (also known as non-valvular AFib) and have been prescribed blood thinning medicines by their doctors, but need an alternative.

The WATCHMAN Implant may be right for you if:

- You have a job, hobby, or health concern that puts you at risk for serious bleeding
- You've experienced bleeding in the past due to blood thinners
- You have difficulty taking blood thinners as prescribed by your doctor

Talk to your doctor about the benefits and risks. Together, you'll decide if the WATCHMAN Implant is right for you.

Did you know?

Over time, the WATCHMAN Implant can cost less than blood thinners. Total out-of-pocket cost is lower than warfarin by year 2 and half its cost by year 5.¹ In fact, a typical 2023 Medicare patient is estimated to pay no more than \$2,600.*

In a clinical trial

96% 

were able to discontinue their blood thinner 45 days after getting the WATCHMAN Implant.²

What about cost?

While blood thinners must be taken every day for life and represent an ongoing cost, the WATCHMAN Implant is a one-time procedure and one-time cost. This means you can save money over time.

Medicare covers the WATCHMAN Implant for people who meet certain coverage criteria and an increasing number of other insurers do too. Insurance coverage can vary significantly from one plan to another. Be sure to contact your insurance carrier for any specific questions.

Cost includes: Pre-screen TEE, implant procedure, professional physician fees, and post-implant OAC therapy and TEE

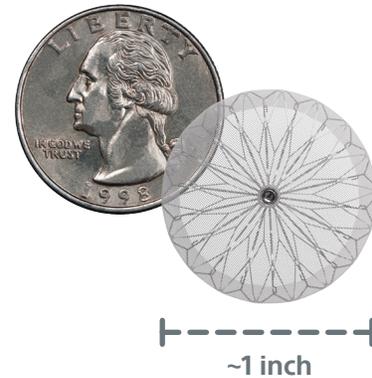
1. Armstrong S, Amorosi SL, Patel P, Erickson GC, Stein K. Medicare beneficiary out-of-pocket spending for stroke prevention in non-valvular atrial fibrillation: a budget analysis. Value Health (ISPOR). 2015;18:A1-A307 (A40,PMD13). [https://www.valueinhealthjournal.com/article/S1098-3015\(15\)00296-X/pdf](https://www.valueinhealthjournal.com/article/S1098-3015(15)00296-X/pdf). Accessed March 28, 2019.

2. Kar, S., et al, Primary Outcome Evaluation of the Next Generation LAAC Device: Results from the PINNACLE FLX Trial, Circulation, 2021.

What is the WATCHMAN™ Implant?

The WATCHMAN Implant is a small, flexible implant about the size of a quarter. It is made from very light, compact materials commonly used in many other medical implants.

It is placed into your heart during a short, minimally invasive procedure. It does not require open heart surgery and never needs to be replaced.



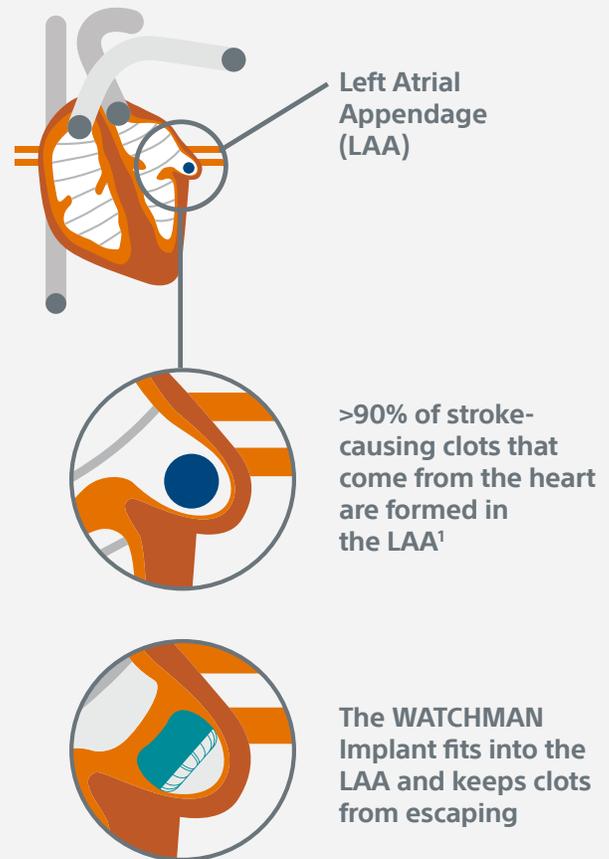
How exactly does it work?

To understand how the WATCHMAN Implant works, it helps to understand the connection between AFib and stroke.

Atrial fibrillation, or AFib, affects your heart's ability to pump normally. This can cause blood to pool in an area called the left atrial appendage, or LAA. There, blood cells can stick together and form a clot. When a blood clot escapes from the LAA and travels to another part of the body, it can cut off the blood supply to the brain, causing a stroke.^{1,2}

In people with AFib not caused by a heart valve problem, **more than 90% of stroke-causing clots that come from the heart are formed in the LAA.**¹ That's why closing off this part of the heart is an effective way to reduce stroke risk.

The WATCHMAN Implant fits right into your LAA. It's designed to permanently close it off and keep those blood clots from escaping.



Did you know?

AFib increases stroke risk.

On average, a person with AFib is 5x more likely to suffer a stroke than someone with a regular heartbeat.²

1. Blackshear JL, Odell JA. Appendage obliteration to reduce stroke in cardiac surgical patients with atrial fibrillation. *Ann Thorac Surg.* 1996;61:755-759.

2. National Stroke Association. Making the Afib-Stroke Connection. <https://www.stroke.org/sites/default/files/resources/Afib-Connection%20for%20hcp.pdf>. Published 2012. Accessed September 1, 2016.



“With WATCHMAN, I can forget about the concern of a stroke. I can forget about the concern of side effects from drugs and just try to live a happy, healthy life. — AJ, 68”

More than 400,000 people have chosen the WATCHMAN™ Implant.

Today, over 400,000 people have left blood thinners behind with WATCHMAN—the implant backed by 20 years of clinical and real-world experience, including 10 clinical trials.

Advanced, heart-friendly design.

Science always looks for ways to make effective treatments even better. The WATCHMAN Implant is no exception. The WATCHMAN FLX™ Implant design is an advancement that enables the implant to fit a greater number of patients, giving more people than ever a safe and effective alternative to blood thinners.

See back cover for important safety information, and talk to your doctor so you fully understand all the benefits and risks of the WATCHMAN Implant.



400k+
20 years

Did you know?

WATCHMAN is proven safe. It has a high implant success rate of 99%, and a low major complication rate of 0.5%.¹

Learn more about the WATCHMAN Implant and how it works at watchman.com/video



1. Kar, S., et al, Primary Outcome Evaluation of the Next Generation LAAC Device: Results from the PINNACLE FLX Trial, Circulation, 2021.

The WATCHMAN™ Implant procedure: What to expect.

The decision to get the WATCHMAN Implant is shared between you and your doctor. You'll talk about what's important to you, your goals, and the procedure's risks and benefits. Together, you'll decide whether the WATCHMAN Implant is the right choice for you. If so, here is what comes next.

Getting ready.

Get insurance approval.

The WATCHMAN Implant is covered for eligible Medicare patients and does not require advance approval. If you have commercial insurance, you may need prior authorization from your plan. Your doctor's office may be able to assist.

Choose a medical center.

You and your doctor will decide on a center. You can view options at watchman.com/centers, and your doctor will provide a referral. Typically, the medical center will call you to schedule a consultation, or your doctor's office may schedule it for you.

Have an exam and imaging test.

In addition to a physical, you may have pictures taken of your heart so the doctor can see your LAA and to make sure you don't have an existing blood clot.

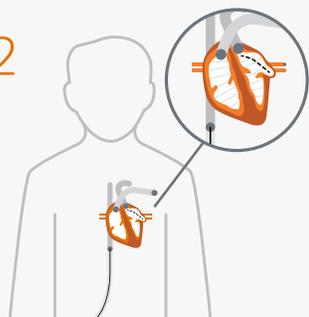
Set the date for your WATCHMAN Implant procedure.

Your doctor and implant team will tell you how to prepare. Make sure you understand all the instructions, including what medications you should and should not take, and ask any questions you have.

Procedure day.

1 

To begin the procedure, your doctor makes a small cut in your upper leg and inserts a narrow tube.

2 

Your doctor guides the WATCHMAN Implant through the tube, into your left atrial appendage (LAA).

3 

The procedure is typically done under general anesthesia, so you'll be asleep and won't feel any pain. Most people who get the WATCHMAN Implant stay in the hospital for a day or less.

4 

After the procedure, your own heart tissue will grow over the WATCHMAN Implant to form a barrier against blood clots.



“ Post-procedure, I was in the hospital for 24 hours with great food and a wonderful staff, and then home relaxing for the next week with a bit of limitation on strenuous activity. ”
 — Sean, 84

Your first year with your WATCHMAN™ Implant.

Your doctor will prescribe a medication regimen that is right for you. Typically, this will be one of two options:

Option A.

Your doctor may prescribe anti-platelet medicine called clopidogrel (also known as Plavix®) and aspirin for 6 months. At your 6-month appointment, your doctor may stop the anti-platelet medicine and you'll continue to take aspirin on an ongoing basis.

Medication options after your procedure.

Option A: Anti-Platelets



Option B.

You may be prescribed a short-term blood thinner (anticoagulant), typically for 45 days. Then your doctor may stop blood thinners and put you on an anti-platelet and aspirin until 6 months post-procedure. After that, you'll continue to take aspirin on an ongoing basis.

Option B: Short-Term Blood Thinners



Medication requirements.

These medications are taken until your left atrial appendage (LAA) is completely closed off. Whichever option is chosen, it's important that you discuss your medications with your doctor and do not change or modify your medications or dosages unless prescribed by your doctor.

Going back to work.

Most people can return to work within a few days. Gradually add activities to get back to your normal routine. Check with your doctor before resuming exercise or anything strenuous.

Follow-up visits.

You may have follow-up appointments after your procedure to have an imaging test to check on the implant and make sure your left atrial appendage (LAA) is sealed. Discuss scheduling your follow-up appointments with your doctor.

WATCHMAN. One Time. For a Lifetime.

The WATCHMAN Implant may provide a lifetime of stroke risk reduction that lets you leave blood thinner worries behind. After the WATCHMAN Implant procedure, life is a lot less restricted. Without the constant concern of blood thinner bleeds following you everywhere, you're freer to be active, to travel, to go where you want to go, and to do what you want to do.

Out in the world with the WATCHMAN Implant.



Travel.

Your WATCHMAN Implant will not set off metal detectors, so you can go through security screenings without worry.



Medical & Dental Procedures.

Always tell your doctor or dentist that you have a WATCHMAN Implant so they can work with your doctor to determine the best way to provide treatment—especially if the procedure requires you to stop taking your medications as prescribed.



MRI.

If you need an MRI (magnetic resonance imaging), it's important to show the doctor and MRI technologist your WATCHMAN Implant Card. The WATCHMAN Implant is "MRI conditional," which means you can safely have an MRI when your technologist takes certain precautions.



What is a WATCHMAN Implant Card and why do I need it?

You'll get a WATCHMAN Implant Card from the medical center that performs your procedure. This very important card lets medical personnel know that you have the WATCHMAN Implant. Remember to carry it with you at all times and register it in case it gets lost.

Go to [watchman.com/register](https://www.watchman.com/register).

I didn't have any problems getting the [WATCHMAN] procedure and I feel so much better since I had it. It makes me feel good that I can get up and go and not worry.

— Camille, 89



Want to know more? Let us answer your questions.



Talk to an Education Specialist.

Our trained professionals have healthcare experience. They're here to answer your WATCHMAN™ Implant questions and help you get ready to talk to your doctor.

Mon-Fri, 8 am to 5 pm CT
1.855.802.3909



Talk to a WATCHMAN Ambassador.

Our Ambassadors have the WATCHMAN Implant themselves and have volunteered to share their experiences. We hand-pick someone to talk with you based on your questions.

To learn more, call
1.844.355.9114



Get a customized discussion guide.

Ready to talk to your doctor about the WATCHMAN Implant? We make it easy. Answer a few questions and get a discussion guide that's customized to your needs.

Download it at
eligibility.watchman.com



Important Safety Information

The WATCHMAN™ and WATCHMAN FLX Devices are permanent implants designed to close the left atrial appendage in the heart in an effort to reduce the risk of stroke. With all medical procedures there are risks associated with the implant procedure and the use of the device. The risks include but are not limited to accidental heart puncture, air embolism, allergic reaction, anemia, anesthesia risks, arrhythmias, AV (Arteriovenous) fistula, bleeding or throat pain from the TEE (Trans Esophageal Echo) probe, blood clot or air bubbles in the lungs or other organs, bruising at the catheter insertion site, clot formation on the device, cranial bleed, excessive bleeding, gastrointestinal bleeding, groin puncture bleed, hypotension, infection/pneumonia, pneumothorax, pulmonary edema, pulmonary vein obstruction, renal failure, stroke, thrombosis and transient ischemic attack. In rare cases death can occur. Be sure to talk with your doctor so that you thoroughly understand all of the risks and benefits associated with the implantation of the device.

**Boston
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Cardiology

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