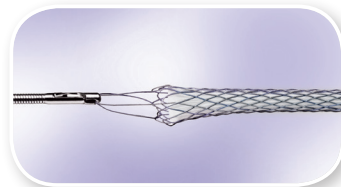
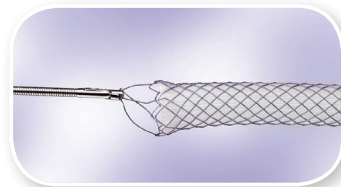
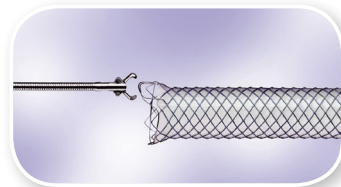


WallFlex™ Biliary RX Fully Covered Stent System RMV

**Boston
Scientific**
Advancing science for life™

**Now indicated in the U.S.
for benign biliary strictures
secondary to chronic pancreatitis
with indwell up to 12 months.**

This expanded indication represents a significant clinical milestone in achieving optimal treatment strategies for chronic pancreatitis patients suffering from bile duct strictures. The unique stent design, with an integrated retrieval loop and Permalume™ covering, **allows for removal up to 12 months post-deployment, unlike most plastic stents that may require replacement an average of 5 times per year***.



Designed for removal up to 12 months post-placement

Potential Economic Impact (U.S. Only)



Initial placement of a fully covered self-expanding metal stent for benign biliary strictures secondary to chronic pancreatitis may help to avoid the cost of multiple ERCP with stent placement procedures, potentially saving the hospital system at least \$3,820 per procedure.

| CPT® Code | Description | 2014 Medicare Geometric Mean Cost – Outpatient ** |
|-----------|--|---|
| 43274 | Endoscopic retrograde cholangiopancreatography (ERCP); with placement of endoscopic stent into biliary or pancreatic duct, including pre- and post-dilation and guide wire passage, when performed, including sphincterotomy, when performed, each stent | \$3,820 |

**Source: Medicare's CY 2016 OPPTS Cost Statistic File

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The potential economic impact identified in this case only takes into account procedural costs avoided and does not take into account reimbursement.

Health economic and reimbursement information provided by Boston Scientific Corporation is gathered from third-party sources and is subject to change without notice as a result of complex and frequently changing laws, regulations, rules and policies. This information is presented for illustrative purposes only and does not constitute reimbursement or legal advice. Boston Scientific encourages providers to submit accurate and appropriate claims for services. It is always the provider's responsibility to determine medical necessity, the proper site for delivery of any services and to submit appropriate codes, charges, and modifiers for services that are rendered. Boston Scientific recommends that you consult with your payers, reimbursement specialists and/or legal counsel regarding coding, coverage and reimbursement matters. Boston Scientific does not promote the use of its products outside their FDA-approved label.

*Devieere J, Nageshwar Reddy D, Püspök A, et al. Successful management of benign biliary strictures with fully covered self-expanding metal stents. *Gastroenterology* 2014; 147:385-395

Indications, contraindications, warnings and instructions for use can be found in the product labeling supplied with each device.

All trademarks are the property of their respective owners.

CAUTION: Federal (USA) law restricts this device to sale by or on the order of a physician

Warning: The safety and effectiveness of this device for use in the vascular system has not been established.

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ENDO-397511-AA June 2016