

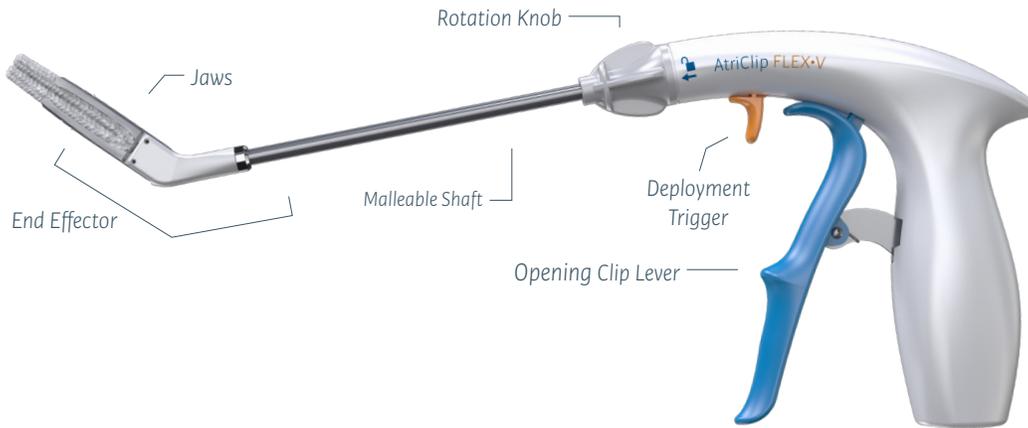
A Simplified Approach to LAA Exclusion

AtriClip FLEX•V[®] Device

STEP BY STEP GUIDE



AtriCure



1. To open the AtriClip Device, squeeze the blue lever toward the handle.

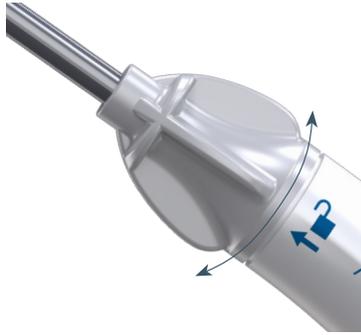


2. To close the AtriClip Device, release the blue lever.



Note: Do not squeeze or pull the orange trigger. This will deploy the AtriClip from the applicator.

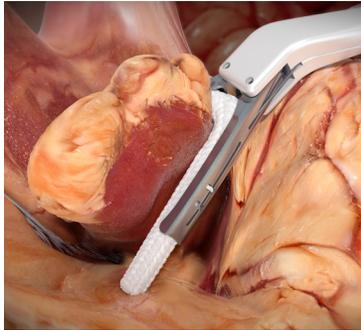
3. To rotate the shaft, pull the rotation knob towards the end effector and twist it either to the left or to the right side. The rotation knob is spring loaded, as soon as you release it, it will lock on its own.



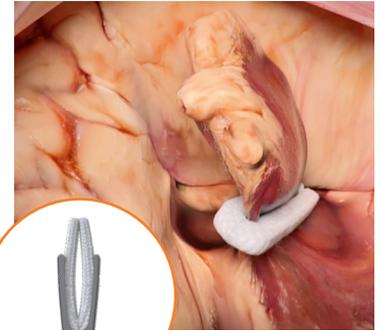
4. To bend the shaft, place both hands on either side of the shaft and apply pressure to the middle of the shaft to mold it in the preferred shape.



5. Place the opened AtriClip Device across the base of the left atrial appendage.



6. Ensure precise placement of the AtriClip Device and pull the orange trigger to deploy it from the applier.



Note: Check that the tips of the AtriClip Device extend beyond the left atrial appendage.



This material is intended to provide general information, including opinions and recommendations, contained herein for educational purposes only. Such information is not intended to be a substitute for professional medical advice, diagnosis or treatment. The material is not intended to direct clinical care in any specific circumstance. The judgment regarding a particular clinical procedure or treatment plan must be made by a qualified physician in light of the clinical data presented by the patient and the diagnostic and treatment options available.

Please review the Instructions for Use for a complete listing of indications, contraindications, warnings, precautions and potential adverse events prior to using these devices.

US Only: *The AtriClip LAA Exclusion System is indicated for the occlusion of the heart's left atrial appendage, performed under direct visualization and in conjunction with other cardiac surgical procedures.*

Direct visualization, in this context, requires that the surgeon is able to see the heart directly, with or without assistance from a camera, endoscope, etc., or other appropriate viewing technologies.

Rx Only.

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