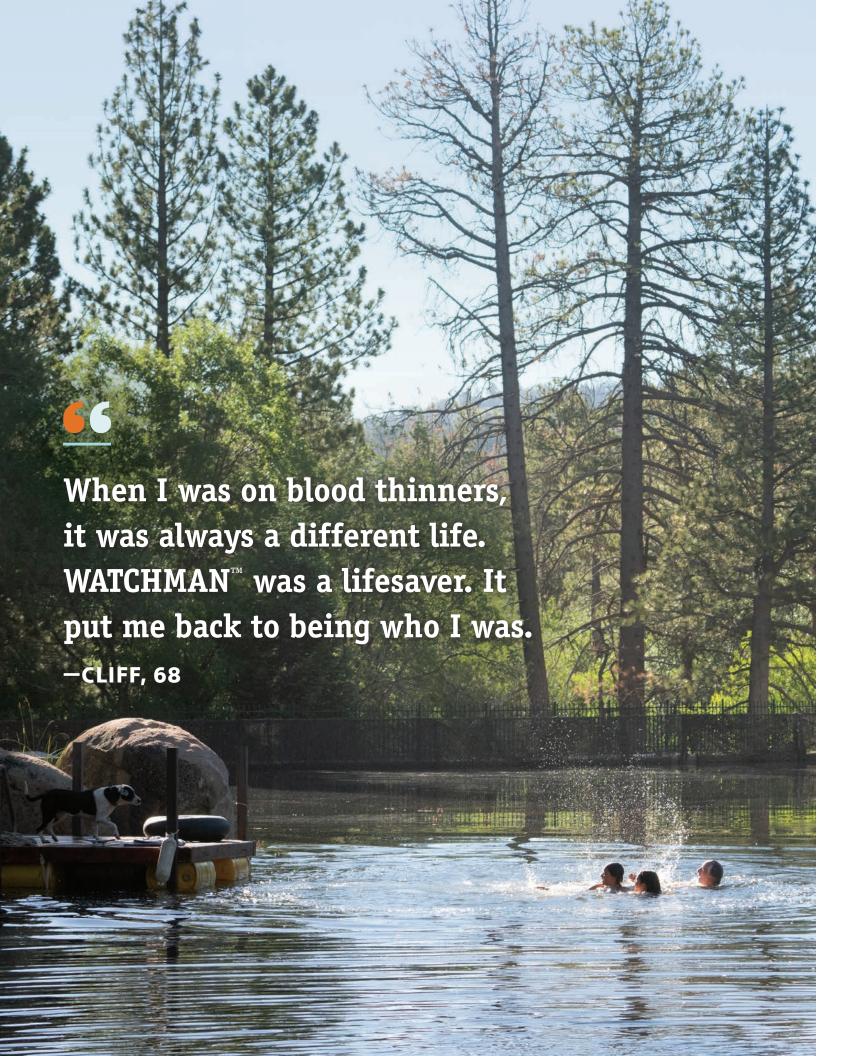


The one-time, minimally invasive procedure for people with non-valvular AFib who need an alternative to blood thinners.



MORE THAN 200,000 PEOPLE HAVE LEFT BLOOD THINNERS BEHIND WITH WATCHMAN™.

Non-valvular AFib can mean a lifetime of blood thinners. It can also mean a lifetime of worry about bleeds from falls, other medical issues, or an unexpected surgery.

The WATCHMAN procedure is a trusted alternative that permanently reduces both stroke risk and bleeding worry. With almost 20 years of clinical and real-world experience—including 10 clinical trials—it is proven to be safe and effective.

Here's what you'll find inside this brochure.

STROKE RISK REDUCTION OPTIONS

WHAT WATCHMAN IS AND HOW IT WORKS

BEFORE, DURING AND AFTER YOUR PROCEDURE

LIVING LIFE WITH WATCHMAN

HOW TO GET IN TOUCH WITH US



Read on to learn more about WATCHMAN.

THE GOAL: REDUCING YOUR STROKE RISK. BLOOD THINNERS ARE ONE WAY.

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

Anti-platelet medicines,

including aspirin, keep platelets in the blood from sticking together and forming clots.

Anti-clotting medicines, such as warfarin (Coumadin®), Xarelto® (rivaroxaban), Eliquis® (apixaban), Pradaxa® (dabigatran), and Savaysa® (edoxaban) also help prevent clots from forming in your blood.

Blood thinners are effective, but can come with challenges and potential bleeding worries.



Major and minor bleeding risks from other medical conditions or falls



Complications during surgery



Lifestyle activities that carry a risk of bleeding



High ongoing cost



Difficulty with once- or twice-daily pill dosing



If taking warfarin, regular monitoring and food/drug interactions



WATCHMAN"

WATCHMAN™ IS AN ALTERNATIVE.

It's a one time, minimally-invasive procedure that permanently reduces stroke risk without the worries that come with a lifetime of blood thinners.

For some people, that means an extra measure of safety if they have bleeding due to certain medical conditions, such as an ulcer. For others, it means peace of mind should they need surgery. A more active lifestyle is also less risky, including travel that's not near medical help.



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 WATCHMAN™ right for you?

WATCHMAN is indicated for people who have AFib not caused by a heart valve problem (also known as non-valvular AFib), have been recommended for blood thinning medicines by their doctor, and can take short-term blood thinners but need an alternative.

WATCHMAN may be right for you if:

- You have a lifestyle, occupation, or health concern that puts you at risk for bleeding
- You've had major bleeding while taking blood thinners
- You have difficulty taking blood thinners as prescribed by your doctor

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

1. PINNACLE FLX 12-month primary safety and efficacy endpoint results, Doshi, SK. presented at HRS 2020 Science. 2. 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. Accessed March 28,2019.



96% OF PEOPLE
WERE ABLE TO DISCONTINUE
THEIR BLOOD THINNER AT
45 DAYS WITH WATCHMAN¹



What about cost?

While blood thinners must be taken every day for life and represent an ongoing cost, WATCHMAN is a one-time procedure and one-time cost. This means WATCHMAN can save you money over time. For example, the total out-of-pocket spending for WATCHMAN is lower than warfarin by year 2 and half the cost by year 5.2

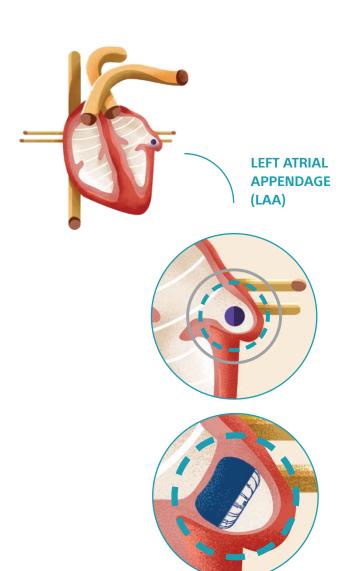
Medicare covers WATCHMAN for eligible patients and an increasing number of other insurers do, too. Insurance coverage can vary significantly from one plan to another. Be sure to contact your insurance carrier for any specific questions.

TAKING A CLOSER LOOK AT WATCHMAN™.

First things first: what is WATCHMAN?

WATCHMAN 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 minimally invasive procedure and never needs to be replaced.





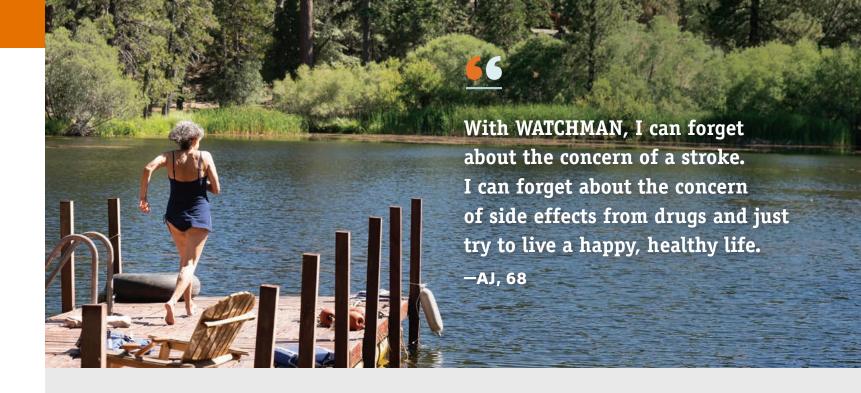
How exactly does it work?

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

Atrial fibrillation, or AFib, affects your heart's ability to pump blood 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.





Is WATCHMAN safe?

Over 200,000 people have already received the WATCHMAN Implant. With almost 20 years of clinical and real-world experience — including 10 clinical trials — WATCHMAN has a proven safety record.

Advanced, Heart-Friendly Design

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

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

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.

THE WATCHMAN™ PROCEDURE: WHAT TO EXPECT.

The decision to get WATCHMAN 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 WATCHMAN is the right choice for you. If so, here is what comes next.

BEFORE

GETTING READY.

Get insurance approval. WATCHMAN 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 heart scan. In addition to a physical, you may have a special test called a TEE (transesophogeal echocardiogram) which takes pictures 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 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.

DURING

PROCEDURE DAY.

The minimally invasive WATCHMAN procedure is done under general anesthesia and takes about an hour. Patients commonly stay in the hospital overnight and leave the next day.



STEP 1

Similar to getting a stent, your doctor makes a small cut in your upper leg and inserts a narrow tube.



STEP 2

Your doctor then guides WATCHMAN through the tube and into the left atrial appendage (LAA) of your heart.



STEP 3

After the procedure is finished, you'll stay in the hospital overnight and leave the next day.





OF PEOPLE WERE ABLE TO DISCONTINUE THEIR BLOOD THINNER AT 45 DAYS¹

AFTER

YOUR FIRST YEAR WITH WATCHMAN.

DAY 1

Starting on day 1 and for about 45 days afterward, you'll take a blood thinner while WATCHMAN and your heart's own tissue work together to form a seal against clots.

WEEK 1

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.

DAY 45

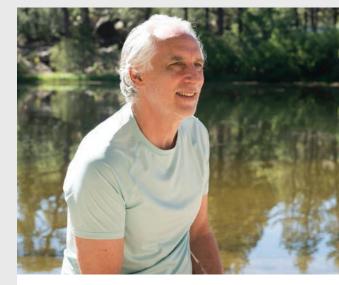
You'll have a TEE imaging test to see if you're ready to stop taking blood thinners. If so, you'll begin taking an antiplatelet medication called clopidogrel (Plavix®) and aspirin. If not, you'll have another TEE at 6 months.

6 MONTHS

If you were able to stop taking your blood thinner at day 45, you'll now be able to stop taking your antiplatelet medication. You'll keep taking aspirin on an ongoing basis.

1 YEAR

Your doctor may schedule another TEE to check on your implant and make sure that your left atrial appendage is fully sealed.





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

1. PINNACLE FLX 12-month primary safety and efficacy endpoint results, Doshi, SK. presented at HRS 2020 Science.

WATCHMAN™. IT'S ONE TIME. FOR A LIFETIME.

WATCHMAN may provide a lifetime of stroke risk reduction that lets you leave lifelong blood thinner worries behind.

After the WATCHMAN 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 do what you want to do. WATCHMAN protects you in all these situations.

Out in the world with WATCHMAN.



TRAVEL

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



MEDICAL AND DENTAL PROCEDURES

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



MR

If you need an MRI (magnetic resonance imaging), it's important to show the doctor and MRI technologist your **WATCHMAN Implant Card**. WATCHMAN 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**.

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 questions and help you get ready to talk to your cardiologist.

Call 1-855-802-3909 Mon-Fri, 8 am to 5 pm CT



TALK TO A PATIENT AMBASSADOR.

Our ambassadors have WATCHMAN 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 WATCHMAN? 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.



Interventional Cardiology

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