Medtronic
8200 Coral Sea St. NE
Mounds View, MN
55112

Urgent Medical Device Correction

Potential for Shortened RRT-to-EOS

Subset of the following devices:
Claria MRI™/Amplia MRI™/Compia MRI™/Viva™/Brava™ CRT-Ds Visia AF™/Visia AF MRI™/Evera™/Evera MRI™ ICDs

February 2021

Dear Health Care Professional,

Medtronic is informing you of a potential issue for a subset of Implantable Cardioverter Defibrillators (ICDs) and Cardiac Resynchronization Therapy Defibrillators (CRT-Ds). Medtronic has identified that a small percentage of implanted cardiac devices, from a well-defined subset, may experience a shortened Recommended Replacement Time (RRT) to End of Service (EOS) interval following an earlier-than-expected RRT observation. The subset of ICDs and CRT-Ds affected by this issue were last implanted in February 2019 and manufactured with a specific battery design that is no longer being distributed.

We have received no reports of permanent harm to patients as a result of this issue.

Medtronic records indicate you are following one or more patients with one of these devices. Approximately 339,900 devices susceptible to this issue are estimated to still be active worldwide. Through 4 January 2021, confirmed events (observed rate 0.07%) have involved a rapid drop in battery voltage ranging from days to months, with unexpected RRT as one of the primary reported observations. For those devices in which RRT triggered earlier than expected, the median time from RRT to the EOS observation was 14 days. In a small number of the cases, no output/no telemetry was reported prior to device replacement. Medtronic projects approximately 0.22% of the affected device population may experience this issue during their service life.

The rapid depletion is caused by a latent shorting mechanism involving lithium plating, resulting from a thermal gradient between the anode and cathode components of the battery. **Devices with higher pacing outputs and high pacing percentages (e.g. CRT-D devices) have the lowest probability of occurrence (refer to Appendix A)**. Conversely, devices with low current drain (evidenced by a longer overall service time from implant to RRT) have a higher probability of experiencing this issue. Importantly, the probability of this issue developing is constant after approximately three years of service time.

Patient Management Guidance

We realize that each patient requires unique clinical considerations. In consultation with our Independent Physician Quality Panel (IPQP), Medtronic **recommends** the following:

- **Continue normal follow-up per local clinical protocol.**
    - Recognize that patients who require significant pacing support and high voltage therapy have the lowest risk for this issue - See Appendix A for additional details.
    - Where possible, take advantage of the CareLink™ home monitoring system and the wireless low battery voltage CareAlert.
    - The low battery voltage audible alert is shipped On with high-urgency tones; Remind patients to contact their clinic if they hear an audible alert, particularly since patients may be opting to delay clinic visits due to COVID-19 guidance.
    - Inform a Medtronic Representative of any unexpected device behaviors.
    - Be aware that the inability to interrogate the device, or to transmit data, may be an indicator that the device has experienced this issue.

- **If unexpected RRT is observed, prompt replacement of the device should occur commensurate with the underlying clinical situation of the patient:**
    - For non-pacing dependent patients or for primary prevention ICD patients, replacement within 1 week of an unexpected RRT notification is recommended.
    - For pacing dependent patients, immediate replacement is recommended following an unexpected RRT notification.

    Note: For all patients, this issue can also manifest as an unexpected change in the remaining longevity estimate that cannot be attributed to programming changes, or changes in use conditions.

Medtronic medical staff in consultation with the IPQP **recommends against prophylactic replacement** due to the low rate of occurrence and the low potential for permanent harm when prompt replacement occurs in response to an unexpected RRT.

Medtronic records indicate you are following one or more patients with an affected device, as noted in the enclosed Physician/Patient Detail Report. Additionally, patients and clinicians may determine if a specific device is affected by looking up the serial number on Medtronic's Product Performance website:
http://wwwp.medtronic.com/productperformance/

Please complete the enclosed Clinician Confirmation Certificate and return via email to **RS.CFQFCA@medtronic.com**>

Medtronic will notify all applicable regulatory agencies about this matter. Please share this notification with others in your organization as appropriate.

Please notify Medtronic of any adverse events or quality problems associated with your use of this product.
Adverse reactions or quality problems experienced with the use of this product may be reported to the FDA's MedWatch Adverse Event Reporting program either online, by regular mail or by fax.

- Complete and submit the report Online: www.fda.gov/medwatch/report.htm
- Regular Mail or Fax: Download form www.fda.gov/MedWatch/getforms.htm or call 1-800-332-1088 to request a reporting form, then complete and return to the address on the pre-addressed form, or submit by fax to 1-800-FDA- 0178

We sincerely regret any difficulties this may cause you and your patients. Medtronic remains dedicated to patient safety and will continue to monitor device performance to ensure we meet your needs and those of your patients. Medtronic Patient Services is available to assist patients at 800-551-5544 (Monday-Friday, 7 a.m.-6 p.m. Central Time). If you have any questions, please contact your local Medtronic Representative or Medtronic Technical Services:

Tachycardia Devices	800-723-4636	tshelp@medtronic.com

Sincerely,

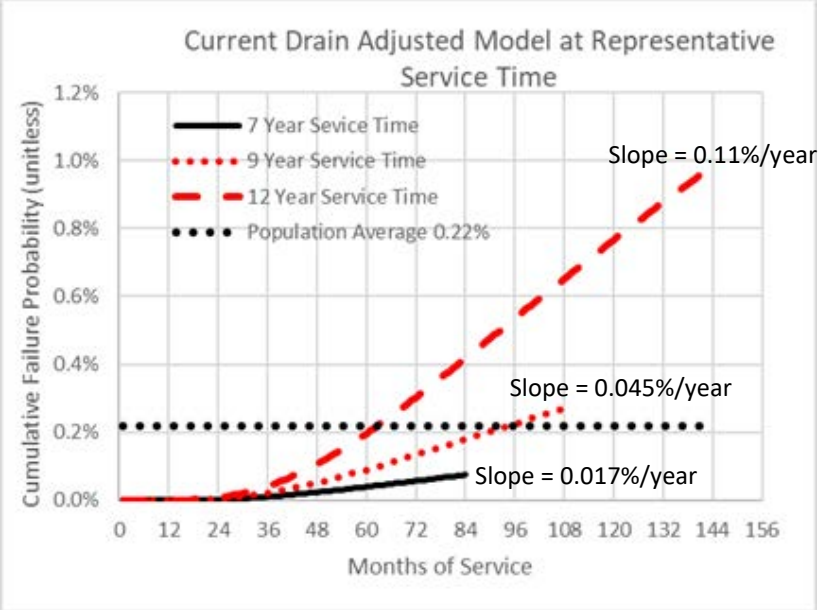
Kirk Hauge
Vice President, Quality
Medtronic Cardiac Rhythm Management

APPENDIX A

The table below provides a comparison of sample use conditions and their associated, projected service time (Implant to Recommended Replacement Time), along with their cumulative and per-year risk of encountering rapid depletion due to a latent shorting mechanism in the battery. Devices with higher pacing outputs and high pacing percentages have the lowest probability of occurrence. There have been no reports of permanent harm to patients as a result of this issue.

Probability (Risk per Year) of Rapid Depletion due to this Issue as a Function of Service Time

Projected Service Time * (based on sample programmed settings and use conditions)	Projected Risk per Year & Total Cumulative Risk at end of service time++	Notes/Example
12-year service time	0.11% per year, 0.98% cumulative	VR ICD patient with 0% pacing and no shocks delivered
10.25-year service time	0.070% per year, 0.50% cumulative	VR ICD patient with 50% pacing history and two (2) or fewer shocks per year
9-year service time	0.045% per year, 0.27% cumulative	DR ICD patient with little-to-no pacing history (e.g. 10%AP, 25%VP, and two (2) or fewer shocks per year)
8.25-year service time	0.033% per year, 0.18% cumulative	DR ICD patient with complete heart block (10% AP and 100% VP, and two (2) or fewer shocks per year)
7-year service time	0.017% per year, 0.075% cumulative	CRT-D patient with 15% AP, 90% RVP, 100% LVP, and two (2) or fewer shocks per year
* Assumes current drain remains stable throughout life of device (i.e. No change in remaining longevity due to reprogramming or changes in use conditions)	++ Per annum risk of issue becomes constant after approximately 3 years of service time. Cumulative risk = early risk plus annual risk over the projected service time.	A output = 1.5V, 0.4ms, 500 ohms RV output = 2.0V, 0.4ms, 500 ohms LV output = 2.5V, 0.4ms, 500 ohms Average pacing rate = 75 bpm



Cumulative Probability is the expected risk for a device to experience this issue between implant and end of service. When risk is evaluated for a device that has reached a service life beyond 3 years, the remaining risk can be estimated based on the yearly risk value shown.

The Population Average (0.22%) is the cumulative probability for the full subset of devices susceptible to this issue. This value takes into account expected longevity and patient mortality. Not all devices with projected service time of 12 years will be in service all 12 years.

Key Points:
Slope of the curve reflects the risk per year based on sample service times of 7, 9, and 12 years.

Slope (risk per year) is constant after approximately 3 years of service time.