Study Overview

- National Principal Investigators
  - Dr. Andrea Natale - Executive Medical Director, Texas Cardiac Arrhythmia Institute
  - Dr. Mintu Turakhia – Associate Professor, Stanford University School of Medicine
  - Dr. Steve Compton – Alaska Heart & Vascular Institute
- Prospective, multi-center, randomized 1:1 against manual compression
- 204 patients, 13 sites, 28 physicians
- All patients had multiple (3 or 4) mid-bore (6-12F Inner Diameter sheath) femoral venous access sites
- The treatment group had all sites closed with the VASCADE® MVP while the control group had all sites closed using Manual Compression
- Both Cryo and RF energy sources were used

Study Results

Time-To-Ambulation* (p < 0.0001)

64% reduction in median TTA 3.9 hours median reduction in TTA

Patient Satisfaction* (nominal p-value < 0.0001)

63% increase in patient satisfaction for duration of bed rest 8.3 out of 10 vs. 5.1 out of 10

Reduction of Opioid Use* (nominal p-value = 0.001)

58% fewer patients received opioids 15% of VASCADE® MVP patients vs. 36% of Manual Compression patients

* Procedure steps are a high level representation for communication purposes. Instructions for Use (IFU) contain all the procedural steps and associated precautions, warnings and adverse events regarding use of device.
VASCADE® MVP Technology

• Fully integrated, extravascular, bioabsorbable femoral access closure system
• Easy to use
• Leaves no permanent components behind.
• Combines Cardiva’s proven proprietary collapsible disc technology and a thrombogenic resorbable collagen patch in an integrated design.
• VASCADE® MVP is designed specifically for electrophysiology procedures
• Built upon the established and clinically proven VASCADE® Vascular Closure System which has been used with over 250,000 patients.

The AMBULATE Series of Clinical Studies

• AMBULATE IMPACT Study – a recently completed study that examines today’s workflow following ablation procedures with a focus on improving hospital economics through early patient ambulation and improved workflow. Results from the AMBULATE IMPACT study will be published in 2019.

• AMBULATE Continued Access Protocol (CAP) Study – a continued access protocol study designed to evaluate the safety of VASCADE® MVP with earlier hospital discharge, elimination of urinary catheters, and elimination of protamine drug use in the setting of electrophysiology procedures. The AMBULATE CAP protocol is currently being conducted with approval of the U.S. Food and Drug Administration (FDA).

About Cardiva Medical, Inc.

Cardiva Medical, Inc. is a privately held medical device company focused on developing and commercializing innovative vascular closure technologies. The Company is headquartered in Santa Clara, California. For further information, visit our website at www.cardivamedical.com and follow us on Twitter at @CardivaMedical. VASCADE® and Cardiva Catalyst® are registered trademarks of Cardiva Medical, Inc.

1. AMBULATE Clinical Study Report
2. p-values from two-sided t-test for means, and two-sided Wilcoxon rank sum test for medians, unadjusted for stratification factor
3. Nominal p-values by two-sided t-test, not pre-specified, however actual results imply superiority
4. Nominal p-values by two-sided Fisher’s exact test, not pre-specified, however actual results imply superiority