VASCASCADE MVP®
VASCULAR CLOSURE FOR EP PROCEDURES


Same Day Discharge for AF Ablation Patients¹


CARDIVA MEDICAL, INC.
www.cardivamedical.com
Evolution of AF Ablation Workflow

**PAST**
*Long Procedure & Post-Procedure Time*
- Procedure Time: 6–8 hours
- Post-Procedure Time: 6–8 hours
  - Heparin reversal and ACT recovery
  - Manual compression
  - Prolonged bed rest

**PRESENT**
*Procedure Innovations*
- Procedure Time: 1–3 hours
- Post-Procedure Time: 6–8 hours
  - No change
  - Impact on patient quality of life
  - Impact on hospital cost
  - Contributing factor to overnight stay

**WITH VASCADe MVP**
*Cardiva Workflow Innovations*
- Procedure Time: 1–3 hours
- Post-Procedure Time: 2–3 hours
  - Shorter time to ambulation
  - Improved patient satisfaction
  - Reduced utilization of opioids
  - Potential for earlier discharge
Early Ambulation & Same Day Discharge

A New Era

Introducing VASCADER MVP
VASCULAR CLOSURE FOR EP PROCEDURES

VASCADER MVP eliminates the need for manual compression with a demonstrated median Time to Ambulation of 2.2 hours.\(^2\)

Get patients up and out hours earlier, with significantly less discomfort, with a demonstrated median Time to Discharge Eligibility of 2.5 hours.\(^2\)
Simple

Designed for EP Procedures

Multiple access venous closure utilizing 6-12F inner diameter (15F maximum outer diameter) procedure sheaths.

Simple and easy to use
- Single operator
- No sutures or material left in the vessel

Extravascular design
- No permanent or intraluminal implants

Bioabsorbable and thrombogenic collagen plug
- Expands to fill tissue tract
Proven
Proven by EPs

VASCADE MVP® was evaluated in the AMBULATE pivotal trial. AMBULATE was a prospective, multi-center, randomized clinical trial with 13 sites and 28 investigators. 204 patients were randomized 1:1 to VASCADE MVP or manual compression.

<table>
<thead>
<tr>
<th></th>
<th>VASCADE MVP (n=100)</th>
<th>Manual Compression (n=104)</th>
<th>P Value</th>
</tr>
</thead>
<tbody>
<tr>
<td>Median Time to Ambulation (TTA)</td>
<td>2.2 hours</td>
<td>6.1 hours</td>
<td>&lt;0.0001*</td>
</tr>
<tr>
<td>Median Time to Discharge Eligibility (TTDE)</td>
<td>2.5 hours</td>
<td>6.3 hours</td>
<td>&lt;0.0001*</td>
</tr>
<tr>
<td>Major Complication Rate</td>
<td>0%</td>
<td>0%</td>
<td>-</td>
</tr>
<tr>
<td>Minor Complication Rate</td>
<td>1.0%</td>
<td>2.4%</td>
<td>.45*</td>
</tr>
</tbody>
</table>

**Patient Satisfaction with Duration of Bedrest**

63% IMPROVEMENT

**Opioid Use**

58% REDUCTION

**All Patients**
Manual Comp = 5.1 vs. VASCADE MVP = 8.3 mean

**Number of Patients Receiving Opioids Post-Procedure**
Manual Comp = 37 pts VASCADE MVP = 15 pts
Ordering Information

<table>
<thead>
<tr>
<th>PRODUCT</th>
<th>CATALOG NUMBER</th>
<th>DESCRIPTION</th>
<th>QUANTITY</th>
</tr>
</thead>
<tbody>
<tr>
<td>VASCADE MVP® Venous Vascular Closure</td>
<td>800-612C-10U</td>
<td>6–12F Inner Diameter (15F maximum outer diameter)</td>
<td>1 box (10 devices per box)</td>
</tr>
</tbody>
</table>

The VASCADE MVP Venous Vascular Closure System (VVCS) Model 800-612C is indicated for the percutaneous closure of femoral venous access sites while reducing time to ambulation, total post-procedure time, time to hemostasis and time to discharge eligibility in patients who have undergone catheter-based procedures utilizing 6–12F inner diameter (15F maximum outer diameter) procedural sheaths, with single or multiple access sites in one or both limbs.

Hover your camera over the QR Code to learn more about VASCADE MVP.

CONTRAINDICATIONS: The VASCADE MVP VVCS should not be used in patients with a known allergy to bovine derivatives.

Before use, physicians should review all risk information, which can be found in the “Instructions for Use.”

Founded in July 2002, CARDIVA Medical Inc. is a privately held medical device company that is focused on developing and commercializing innovative vascular closure technologies designed to help the body heal itself.

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1. VASCADE MVP demonstrated median Time to Discharge Eligibility of 2.5 hours in the AMBULATE Clinical Trial.
3. Cardiac ablations requiring two or more access sites within the same limb. See VASCADE MVP IFU 3972 Indications for Use.
4. P values by two-sided Fisher’s exact test.
5. P values from two-sided t test for means, and two-sided Wilcoxon rank-sum test for medians, unadjusted for stratification factor.
6. IFU and/or SSED for VASCADE MVP.
7. On a scale of 0-10, with 0 being the worst and 10 being the best.