They live with anxiety, fear, and depression. Why Wait?

THE GOLD STANDARD OF DIAGNOSIS
remains the correlation
of a spontaneous
event with a specific
ECG finding.

78% of patients had a
Reveal ICM-guided
diagnosis.

72% of patients had a
Reveal LINQ™ ICM-guided
diagnosis.

2017 ACC/AHA/HRS
Syncope Guidelines
recommend cardiac
monitoring with
Reveal LINQ™ ICM for
syncope patients.

Don’t miss your opportunity
to find the answer for your
unexplained syncope patient.

They live with
anxiety, fear,
and depression.
Why Wait?

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Third-party brands are trademarks of their respective owners.
All other brands are trademarks of a Medtronic company.
SYNCOPE IS COMMON FINDING THE CAUSE MATTERS

SYNCOPE AVERAGES 740,000 ER VISITS PER YEAR*.

HALF OF PATIENTS ADMITTED TO THE HOSPITAL LEAVE WITHOUT A DIAGNOSIS*

SYNCOPE WITH A CARDIAC CAUSE INCREASES MORTALITY RATES

The only difference between syncope and sudden death is that, with syncope, you wake up†.

2X increased risk of death†

>10% mortality rate at six months†

PATIENTS WANT ANSWERS

Patients endure ongoing diagnostic testing and still come away with no answers‡.

3 specialists visited on average

13 inconclusive tests

1 in 4 undergo more than 20 tests

237,000 HOSPITALIZATIONS*†

Diagnostic tests performed‡

<table>
<thead>
<tr>
<th>Test</th>
<th>Percent of Patients</th>
</tr>
</thead>
<tbody>
<tr>
<td>Standard ECG</td>
<td>556 (98%)</td>
</tr>
<tr>
<td>Echocardiography</td>
<td>490 (86%)</td>
</tr>
<tr>
<td>Basic laboratory tests</td>
<td>488 (86%)</td>
</tr>
<tr>
<td>Ambulatory ECG monitoring</td>
<td>382 (67%)</td>
</tr>
<tr>
<td>In-house ECG monitoring</td>
<td>311 (55%)</td>
</tr>
<tr>
<td>Exercise testing</td>
<td>297 (52%)</td>
</tr>
<tr>
<td>Ortho static blood pressure measurements</td>
<td>275 (48%)</td>
</tr>
<tr>
<td>MRI/CT scan</td>
<td>267 (47%)</td>
</tr>
<tr>
<td>Neurological or psychiatric evaluation</td>
<td>270 (47%)</td>
</tr>
<tr>
<td>EEG</td>
<td>222 (39%)</td>
</tr>
<tr>
<td>Carotid sinus massage</td>
<td>205 (36%)</td>
</tr>
<tr>
<td>Tilt test</td>
<td>201 (35%)</td>
</tr>
<tr>
<td>Electrophysiology testing</td>
<td>144 (25%)</td>
</tr>
<tr>
<td>Coronary angiography</td>
<td>133 (23%)</td>
</tr>
<tr>
<td>External loop recording</td>
<td>67 (12%)</td>
</tr>
<tr>
<td>ATP test</td>
<td>15 (3%)</td>
</tr>
<tr>
<td>Other tests</td>
<td>52 (9%)</td>
</tr>
</tbody>
</table>
2017 AHA/ACC/HRS Guidelines for the Management of Syncope

**GUIDELINES RECOMMEND REVEAL LINQ™ ICM FOR SYNCOPE PATIENTS**

**GUIDELINE HIGHLIGHTS**
- If the initial evaluation is unclear and a cardiac cause is suspected, cardiac monitoring is a Class I recommendation.
- The IIa recommendation for ICM is supported by clinical evidence and randomized controlled trials.

**GUIDELINES RECOMMEND REVEAL LINQ™ ICM FOR SYNCOPE PATIENTS**

**COR — Class of Recommendation**

**LOE — Level of Evidence**

<table>
<thead>
<tr>
<th>COR</th>
<th>LOE</th>
<th>RECOMMENDATION</th>
</tr>
</thead>
<tbody>
<tr>
<td>I</td>
<td>C-E0</td>
<td>The choice of a specific cardiac monitor should be determined on the basis of the frequency and nature of syncope events.</td>
</tr>
<tr>
<td>IIa</td>
<td>B-R</td>
<td>To evaluate selected ambulatory patients with syncope of suspected arrhythmic etiology, an ICM can be useful.</td>
</tr>
</tbody>
</table>

**Historical Characteristics Associated with Increased Probability of Cardiac Causes of Syncope**

- Older age (> 60 yr)
- Male sex
- Presence of ischemic heart disease, structural heart disease, previous arrhythmias, or reduced ventricular function
- Brief (palpitations) or no symptoms prior to loss of consciousness
- Occurs with exertion
- Occurs in supine position
- Low number of events (1 or 2)
- Abnormal cardiac examination
- Family history of inheritable conditions or premature SCD (< 50 yr of age)
- Presence of known congenital heart disease

*Applies to patients after a normal initial evaluation without significant injury or cardiovascular morbidities, patient followed up by primary arrhythmology as needed.*

*Routine use of ICM in patients with syncope is not recommended.*
ICM SUCCESS IN DIAGNOSING PATIENTS WITH UNEXPLAINED SYNCOPE

STUDY DESIGN
- Investigated the effectiveness of Reveal™ ICM in the diagnosis of unexplained recurrent syncope in everyday clinical practice
- Helped inform current guidelines

Multiple studies show ICM monitoring resulted in cost savings in syncope patients compared to conventional testing through fewer tests and hospital admissions.\(^7\)\(^-\)\(^10\)

88% of patients who are guideline eligible for an ICM/ILR are over-tested with other modalities before being offered an ICM/ILR. \(^2\)

Over-testing increases cost with no improvement to diagnostic yield. \(^3\)

OPPORTUNITIES TO REDUCE COSTS WITHOUT COMPROMISING DIAGNOSTIC YIELD:
- Appropriate use of guideline-recommended tests in the initial evaluation of syncope
- Decreased repetition of inconclusive test
- Avoidance of early use of specialized tests usually performed only on specific suspicions about the underlying mechanism (e.g., MRI/CT and EEG)
- Utilize ICM earlier in the care pathway

REDUCE COST WITH EARLIER ICM UTILIZATION

A Reveal ICM should be implanted earlier rather than later in the evaluation of unexplained syncope

PICTURE STUDY
570 Patients Enrolled

218 patients experienced a recurrence within one year
- 38%

170 patients had a Reveal ICM guided diagnosis
- 78%

128 patients were diagnosed with a cardiac cause
- 75%

42 patients were confirmed to have a non-cardiac cause
- 25%

100% OF THESE PATIENTS RECEIVED A DIFFERENTIAL DIAGNOSIS
An Advanced Monitoring Solution

- **Reveal LINQ ICM**: Wireless
- **MyCareLink™ Patient Monitor**: Cellular
- **CareLink™ Network and Reports**

**Patient Assistant**
One-button symptom marking with the ability to store multiple patient-activated episodes.

**Exclusive smart detection algorithms that streamline data**

**INTELLIGENT**
New Smart Filtering algorithm improves detection accuracy for Brady & Pause.

**ACTIONABLE**
Streamlined Episodes & Report Updates simplify data review.

**NEW INTELLIGENCE INSIDE**

TruRhythm™ Detection inside the Reveal LINQ™ ICM

**DIAGNOSE YOUR SYNCOPE PATIENTS SOONER WITH THE REVEAL LINQ™ ICM SYSTEM**

Continuous cardiac monitoring to correlate symptoms to cardiac rhythms when they happen.

**LEADING INNOVATION**

- 1998: Reveal™ ICM World’s First ICM
- 2009: Reveal™ XT ICM World’s First AF Algorithm
- 2014: Reveal LINQ™ ICM World’s Smallest ICM
- 2016: Reveal LINQ Mobile Manager and Monitoring Service Innovative ICM Solutions
- 2017: TruRhythm™ Detection New smart detection algorithms inside the Reveal LINQ ICM

**4 episodes @ 7.5 minutes each**
- 6.5 min prior
- Patient-activated

**3 episodes @ 10 minutes each**
- 9 min prior
- Patient-activated

**2 episodes @ 15 minutes each**
- 14 min prior
- Patient-activated

**2018**
- Reveal LINQ Mobile Manager and Monitoring Service
- Innovative ICM Solutions

**2019**
- Reveal LINQ Mobile Manager and Monitoring Service
- Innovative ICM Solutions

**2020**
- Reveal LINQ Mobile Manager and Monitoring Service
- Innovative ICM Solutions

**2021**
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- Innovative ICM Solutions

**2022**
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**2023**
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**2028**
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- Innovative ICM Solutions

**2029**
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- Innovative ICM Solutions

**2030**
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- Innovative ICM Solutions