

UNITED STATES
SECURITIES AND EXCHANGE COMMISSION
WASHINGTON, D.C. 20549

FORM 8-K

CURRENT REPORT

PURSUANT TO SECTION 13 OR 15(d) OF THE
SECURITIES EXCHANGE ACT OF 1934

Date of Report (Date of earliest event reported): January 13, 2020

ATRICURE, INC.

(Exact name of registrant as specified in charter)

Delaware
(State or other jurisdiction of
incorporation)

000-51470
(Commission File Number)

34-1940305
(IRS Employer Identification No.)

7555 Innovation Way
Mason, OH
(Address of principal executive offices)

45040
(Zip Code)

Registrant's telephone number, including area code: (513) 755-4100

Not Applicable
(Former name or former address, if changed since last report)

Check the appropriate box below if the Form 8-K filing is intended to simultaneously satisfy the filing obligation of the registrant under any of the following provisions (see General Instruction A.2. below):

- Written communications pursuant to Rule 425 under the Securities Act (17 CFR 230.425)
- Soliciting material pursuant to Rule 14a-12 under the Exchange Act (17 CFR 240.14a-12)
- Pre-commencement communications pursuant to Rule 14d-2(b) under the Exchange Act (17 CFR 240.14d-2(b))
- Pre-commencement communications pursuant to Rule 13e-4(c) under the Exchange Act (17 CFR 240.13e-4(c))

Indicate by check mark whether the registrant is an emerging growth company as defined in Rule 405 of the Securities Act of 1933 (§230.405 of this chapter) or Rule 12b-2 of the Securities Exchange Act of 1934 (§240.12b-2 of this chapter).

Emerging growth company

If an emerging growth company, indicate by check mark if the registrant has elected not to use the extended transition period for complying with any new or revised financial accounting standards provided pursuant to Section 13(a) of the Exchange Act.

Item 2.02. Results of Operations and Financial Condition.

On January 13, 2020, AtriCure, Inc. (“AtriCure” or the “Company”) issued a press release announcing its preliminary financial results for the fourth quarter and full year ended December 31, 2019. A copy of the press release is furnished as Exhibit 99.1 to this Form 8-K and is incorporated herein by reference.

Item 7.01. Regulation FD Disclosure.

During the week of January 13, 2020 the Company is holding meetings with investors discussing, among other topics, an overview of the Company’s business and growth strategy. A copy of the investor presentation, which is available at www.atricure.com, is furnished as Exhibit 99.2 to this Form 8-K and is incorporated herein by reference.

The Company’s presentation discloses certain financial results both in accordance with generally accepted accounting principles (“GAAP”) and on a non-GAAP basis with adjustments for certain items. The Company’s management believes that presentation of these non-GAAP financial measures and their related reconciliations are useful to investors because the non-GAAP financial measures provide investors with a basis for comparing the results to financial results from prior periods.

Information in the presentation contains forward-looking statements regarding future events and performance of the Company. All such forward-looking statements are based largely on the Company’s experience and perception of current conditions, trends, expected future developments and other factors, and on management’s expectations, and are subject to risks and uncertainties that could cause actual results to differ materially, including, but not limited to, those factors described in the presentation and in the Company’s filings with the Securities and Exchange Commission. The Company disclaims any intention or obligation to update or revise any financial or other projections or other forward-looking statements, whether because of new information, future events or otherwise.

The information in each of Item 2.02 and Item 7.01 of this Form 8-K and in the press release attached as Exhibit 99.1 and the presentation attached as Exhibit 99.2 is being furnished and shall not be deemed “filed” for purposes of Section 18 of the Securities Exchange Act of 1934, as amended (the “Exchange Act”), or otherwise subject to the liabilities of that Section. The information in each of Item 2.02 and Item 7.01 of this Form 8-K and each of Exhibit 99.1 and Exhibit 99.2 shall not be incorporated by reference in any filing (whether made before or after the date hereof) or any other document under the Securities Act of 1933, as amended, or the Exchange Act, except as expressly set forth by specific reference in any such filing or document.

Item 9.01 Financial Statements and Exhibits.

(d) Exhibits

No. Description

[99.1](#) [Press Release dated January 13, 2020](#)

[99.2](#) [Investor Presentation](#)

SIGNATURES

Pursuant to the requirements of the Securities Exchange Act of 1934, the registrant has duly caused this report to be signed on its behalf by the undersigned hereunto duly authorized.

ATRICURE, INC.

Dated: January 13, 2020

By: /s/ M. Andrew Wade
M. Andrew Wade
Senior Vice President and Chief Financial Officer



For immediate release
January 13, 2020

AtriCure Reports Preliminary Results for Fourth Quarter and Full Year 2019

Provides Financial Outlook for 2020

MASON, Ohio, January 13, 2020 – AtriCure, Inc. (Nasdaq: ATRC), a leading innovator in treatments for atrial fibrillation (Afib) and left atrial appendage (LAA) management, announced preliminary financial results for the fourth quarter and full year 2019 and provided 2020 financial guidance.

Preliminary, unaudited revenue for fourth quarter 2019 is expected to be approximately \$61.3 million, reflecting growth of approximately 16% over the fourth quarter of 2018. U.S. revenue is expected to be \$49.5 million, reflecting growth of 15% and driven again by strong sales of open ablation and appendage management products. International revenue is expected to be approximately \$11.8 million, an increase of 20% as reported and an increase of 23% on a constant currency basis.

Preliminary revenue for full year 2019 is expected to be \$230.8 million, reflecting growth of approximately 14% over full year 2018 (15% on a constant currency basis). Adjusted EBITDA for the full year 2019 is currently estimated to be a loss in the previously communicated range of \$7 to \$9 million. Adjusted EBITDA and constant currency revenue growth are non-GAAP measures. AtriCure will provide a reconciliation of non-GAAP measures to the related GAAP measure in the release of final 2019 results.

“Throughout 2019, we generated consistent double-digit revenue growth while achieving several important milestones. We acquired SentreHEART to bolster our Left Atrial Appendage Management portfolio and leverage our growing commercial channel in the electrophysiology market, completed enrollment in the aMAZE IDE clinical trial, received approval for Continued Access Protocols for both CONVERGE and aMAZE IDE trials, surpassed 200,000 AtriClip devices sold, and launched the crvoICE® crvoSPHERE™ device for pain management,” said Michael Carrel, President and Chief Executive Officer of AtriCure. “We are excited about the strength of our open ablation and appendage management businesses as we enter 2020 as well as our longer-term prospects for significant market-expansion resulting from the completion of our CONVERGE and aMAZE IDE trials.”

2020 Financial Guidance

Management projects 2020 revenue of approximately \$254 million to \$261 million, reflecting growth of approximately 10% to 13% over full year 2019. Adjusted EBITDA, a non-GAAP measure, is projected to be a loss of approximately \$10 million for 2020.

About AtriCure

AtriCure, Inc. provides innovative technologies for the treatment of Afib and related conditions. Afib affects more than 33 million people worldwide. Electrophysiologists and cardiothoracic surgeons around the globe use AtriCure technologies for the treatment of Afib and reduction of Afib related complications. AtriCure’s Isolator® Synergy™ Ablation System is the first and only medical device to receive FDA approval for the treatment of persistent Afib. AtriCure’s AtriClip® Left Atrial Appendage Exclusion System products are the most widely sold left atrial appendage management devices worldwide. For more information, visit AtriCure.com or follow us on Twitter @AtriCure.

Forward-Looking Statements

This press release contains “forward-looking statements”—that is, statements related to future events that by their nature address matters that are uncertain. For details on the uncertainties that may cause our actual results to be materially

different than those expressed in our forward-looking statements, visit <http://www.atricure.com/fls> as well as our Annual Reports on Form 10-K and Quarterly Reports on Form 10-Q which contain risk factors. We do not undertake to update our forward-looking statements. This document also includes forward-looking projected financial information that is based on current estimates and forecasts. Actual results could differ materially.

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AtriCure Investor Presentation

Creating a World Class Afib Platform



January 2020

Forward Looking Statements

This presentation contains "forward-looking statements," which are statements related to future events that by their nature address matters that are uncertain. All forward-looking information is inherently uncertain and actual results may differ materially from assumptions, estimates or expectations reflected or contained in the forward-looking statements as a result of various factors. For details on the uncertainties that may cause our actual results to be materially different than those expressed in our forward-looking statements, see our Annual Report on Form 10-K and Quarterly Reports on Form 10-Q filed with the SEC and available at <http://www.sec.gov>, which contain risk factors. Forward-looking statements address our expected future business, financial performance, financial condition as well as results of operations, and often contain words such as "intends," "estimates," "anticipates," "hopes," "projects," "plans," "expects," "seek," "believes," "see," "should," "will," "would," "could," "target," "guidance," "forecast," "goal," "objective," "aim," and similar expressions and the negative versions thereof. Such statements are based only upon current expectations of AtriCure. Any forward-looking statement speaks only as of the date made. Reliance should not be placed on forward-looking statements because they involve known and unknown risks, uncertainties and other factors which may cause actual results, performance or achievements to differ materially from those expressed or implied. Forward-looking statements include statements that address activities, events or developments that AtriCure expects, believes or anticipates will or may occur in the future, including, without limitation, statements about AtriCure's anticipated future operating and financial performance, business plans, and prospects and expectations for our product pipeline. Forward-looking statements are based on AtriCure's experience and perception of current conditions, trends, expected future developments and other factors it believes are appropriate under the circumstances and are subject to numerous substantial risks and uncertainties, many of which are beyond AtriCure's control. With respect to the forward-looking statements, we claim the protection of the safe harbor for forward-looking statements contained in the Private Securities Litigation Reform Act of 1995. We undertake no obligation to publicly update or revise any forward-looking statements to reflect new information or future events or otherwise unless required by law.

AtriCure Overview



Large Markets

Addressing an underserved and growing patient population

- Approximately 33 million Afib patients globally, with majority having advanced forms of the disease
- Current standard of care does not adequately address this population



Strong Portfolio

Existing products and solutions driving consistent growth

- 29 straight quarters of double-digit revenue growth, driven by great products, commitment to education, and societal guideline support
- Only PMA product for the surgical treatment of Afib
- The AtriClip® device is the most widely used Left Atrial Appendage (LAA) device with over 220,000 sold to date
- Expanding product portfolio from internal development and acquisitions



Bright Future

Novel therapies supported by growing body of clinical evidence

- PMA pivotal trials underway for hybrid approaches for Afib: CONVERGE, aMAZE, DEEP
- Launched pain management business to address pain associated with surgery
- Early in market development process – Evolution to minimally invasive therapies will drive growth, diversifying and accelerating in 2021 and beyond

Afib: a Serious and Costly Problem

Atrial Fibrillation (Afib) is an irregular heartbeat (or arrhythmia) that affects more than 33 million people worldwide.

Approximately 1.2 million Afib diagnoses annually in the US.

Afib leads to:



Afib diagnosis means:



Two Distinct Patient Profiles



Referring Physician:
GP, Cardiologist



STRUCTURAL HEART ISSUE

Surgery required – Afib corrected at same time (Valve, CABG)

GUIDELINES

Surgical Ablation is **RECOMMENDED**
LAA management is **REASONABLE**

Concomitant Open Procedures
(Ablation/ LAAM)



NO STRUCTURAL ISSUE

Afib is primary concern

50% Intervention is better choice

50% Medicine is effective

Paroxysmal (occasional)



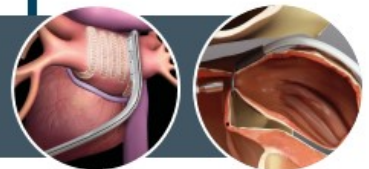
Non-Paroxysmal (Persistent/LS Persistent)

*Type of Afib matters!
Afib is a progressive disease*

Standalone Hybrid Procedures

(Ablation/ LAAM)

Catheter often first line of treatment





Atrial Fibrillation

\$1.0-1.6B

US Ablation +
Appendage
Management



\$700-800M

US Ablation +
Appendage
Management



\$350M

US Ablation

Significant Market Opportunity

US Standalone Market: Expanding Growth

- More than 150k Afib patients annually
- **Vastly underpenetrated and increasing market** (estimating 10-15% market expansion)
- Multiple approaches to treatment
 - Convergent + AtriClip, DEEP, LARIAT®

**\$3B+
Worldwide**

**Total US
market
opportunity
\$2B+
annually**

**International
Afib market
\$1B+ annually**

US Concomitant Markets: Steady Growth

Cardiac Surgery (“Open”)

- Estimated 300k total patients annually (Afib, non-Afib)
- Surgical market opportunity is steady

Pain Management

- Estimated 140k thoracic patients annually
- Boosting growth via new, adjacent market

See Supplemental Information for market workups.

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Strong Financial Performance

Worldwide Revenue (\$ Millions)



Revenue Growth	20.8%	19.5%	12.6%	15.4%	14% ¹
Gross Margin	71.6%	71.6%	72.2%	73.0%	73-74% ²

Consistent Revenue Growth

29 consecutive quarters of double-digit YoY growth

Q4 2019 Revenue at \$61.3M

16% growth over Q4 2018

\$100M Cash & Investments

at September 30, 2019

Steady Improvement to Gross Margin

2020 Revenue Guidance

10-13% growth or \$254-261M

¹ 2019 revenues (annual and Q4) are preliminary and unaudited.
² 2019 gross margin reflects fiscal year guidance.

Innovative and Expanding Product Portfolio



Ablation

ISOLATOR®
SYNERGY™
CLAMP

cryoICE®
CRYOABLATION
PROBE

EPI-SENSE®
DEVICE

cryoSPHERE™
CRYOABLATION
PROBE

2020 Product Launch:
ISOLATOR® SYNERGY™
ENCOMPASS™ CLAMP

2000 to 2015: Foundation in surgical Afib tools
Future pipeline expansion across franchises

2015 and Beyond: Building the future in minimally invasive therapies
Innovation toward less invasive, simpler, and more efficient products

Appendage Management

ATRICLIP®
FLEX DEVICE

ATRICLIP PRO®
DEVICE

ATRICLIP PRO•V®
DEVICE

ATRICLIP® FLEX•V®
DEVICE

LARIAT®
DEVICE



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SPOTLIGHT: Cryo Nerve Block for Pain Management

Therapy Overview

- Long-lasting pain management therapy, designed for use in thoracic surgical procedures
- Temporarily stops the transmission of pain signals coming from the chest wall during surgery
- Nerve “scaffolds” remain intact allowing axons to regenerate and restore nerve function over the course of 1-3 months
- Applicability in a wide variety of thoracic surgical approaches (thoracotomy, video-assisted, robotic) and procedures (resection, transplant, thoracoabdominal, surgical rib fixation, pectus repair)



Growth Drivers

- Q1 2019 launch of cryoSPHERE™ probe
- Building a small team to begin market development
- Continuing to gather data to support evidence development the therapy
- Potential to contribute to combatting the opioid epidemic – 1 in 7 thoracic surgery patients become reliant upon opioids after their procedure¹

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¹ STS press release <https://www.sts.org/media/news-releases/1-7-lung-surgery-patients-risk-opioid-dependence>

Advancing Clinical Outcomes

Multiple studies to generate clinical evidence and expand indications



Trial/Study	Description	Status
CONVERGE Pivotal	Designed to support FDA approval of EPI-Sense device specifically for the treatment of persistent Afib through an abdominal approach	Final PMA module submitted; continued access protocol approved
aMAZE Pivotal	Designed to support FDA approval of LARIAT System to percutaneously isolate and ligate the Left Atrial Appendage, adjunct to pulmonary vein isolation (PVI) catheter ablation, for persistent or longstanding persistent Afib	Enrolled and in follow up; continued access protocol approved
DEEP Pivotal	Designed to support FDA approval of various devices specifically for the treatment of persistent Afib through a bi-lateral totally thoracoscopic approach	Enrolling
FROST Study	Designed to demonstrate that intraoperative intercostal cryoanalgesia in conjunction with standard of care (SOC) provides improved analgesic efficacy in patients undergoing unilateral thoracotomy cardiac procedures as compared to current SOC	Complete; submitting abstract to STS
ICE-AFIB Pivotal	Designed to support FDA approval of CryoICE Ablation System for the treatment of persistent and long-standing persistent Afib during concomitant open chest cardiac surgery	Enrolling
ABLATE Pivotal	Designed to demonstrate the safety and effectiveness of the AtriCure Bipolar System for treating permanent atrial fibrillation during concomitant on-pump cardiac surgery	Complete – PMA obtained in 2011

CONVERGE Overview

SUPERIORITY TRIAL designed to support FDA approval of Epi-Sense device specifically for the treatment of persistent Afib

STUDY DESIGN

Summary

Multi-center, prospective, open label randomized 2:1 (Convergent procedure vs endocardial catheter ablation) pivotal study

Number of Subjects and Sites

Up to 153 subjects
Up to 30 sites (27 US and 3 OUS)

Study Duration

5 year follow-up of all subjects

PRIMARY ENDPOINTS

Effectiveness

Primary efficacy endpoint is success or failure to be AF/AT/AFL free absent class I and III AADs except for a previously failed or intolerant class I or III AAD with no increase in dosage following the 3 month blanking period through the 12 months post procedure follow-up visit

Safety

Primary safety endpoint for the study is 12% freedom from MAE's as adjudicated by the CEC for the procedural to 30-day post procedure time period



CONVERGE
Clinical Trial

HIGHLIGHTS

- Completed enrollment in August 2018
- Final PMA module submitted in late 2019
- Submitting late-breaker for HRS in May 2020
- Continued Access Protocol approved; enrollment begins in 2020

SUPERIORITY TRIAL designed to evaluate safety and effectiveness of the LARIAT System to percutaneously isolate and ligate the Left Atrial Appendage for the treatment of persistent or longstanding persistent Afib

STUDY DESIGN

Study is conducted in two stages:

- Limited Early Stage (Stage 1): up to 250 subjects at up to 65 sites – COMPLETE
- Pivotal Stage/ Phase III (Stage 2): up to 600 subjects at up to 65 sites – ONGOING
- All subjects from both stages will be included in the primary analysis

PRIMARY ENDPOINTS

- Freedom from episodes of atrial fibrillation > 30 seconds at 12 months post index pulmonary vein isolation
- Time Frame: 12 months following pulmonary vein isolation catheter ablation procedure, measured by 24-hour Holter monitoring

HIGHLIGHTS

- Acquired SentreHEART August 2019
- Trial enrollment completed December 2019
- Continued Access Protocol recently approved; enrollment begins in 2020
- Expect PMA in 2022; will update with more specific timing as trial progresses

Aligning Expertise with Opportunity

Commercial Headcount

- Shifting headcount growth from Sales Managers to Clinical Specialists
 - Managers build relationships, broaden adoption
 - Specialists provide case coverage
 - Improving productivity and leverage
- Dedicated MIS and cryoNB teams for market development

Education Support

- Significant investment in physician education
- Multiple training options including didactic, hands-on, proctoring, and case observations
- AATS Fellowships, STS and EACTs endorsed training program

US Commercial Organization



Accounts by State
85+ 30+
10+ 1-10

11 Sales Areas in US support over 1,000 customer accounts

Each Area includes:
Area Director
Regional Sales Managers (5-6)
Minimally Invasive Managers (1-2)
CryoNB Sales Manager
Clinical Specialists (6-8)



Trained 2,000+ Physicians

Established network of physician trainers supported by dedicated internal training headcount (1 per Area)

ATRICURE PILLARS

Foundation of our past and strengthening our future



Innovation

Significant growth from AtriClip devices and cryoSPHERE probe

Expanding pipeline to drive Open ablation penetration and build MIS market



Clinical Science

First and only PMA approved device for surgical treatment of Afib

Multiple trials underway; priorities are CONVERGE & aMAZE

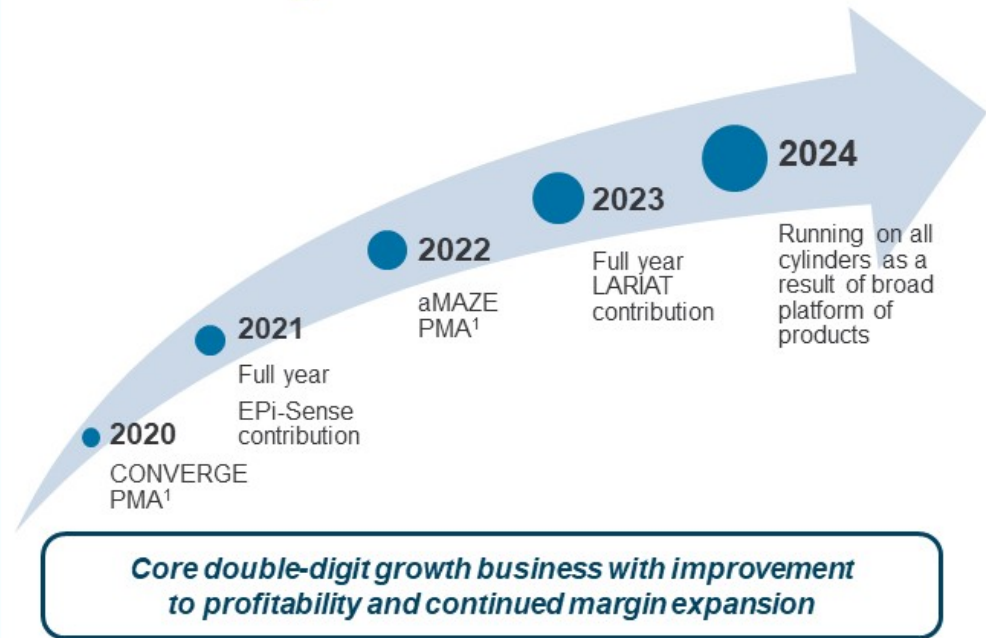


Education and Awareness

Afib training programs delivered to 3,000+ professionals worldwide

Updated Guidelines: STS/HRS Class I for surgical ablation

An Exciting Future



¹ Reflects estimated approval dates

AtriCure Highlights

Creating a world class Afib platform



Large Markets

Addressing an underserved and growing patient population

- **Large, vastly underpenetrated markets: over \$3B annually**
 - US market opportunity in excess of \$2B
 - International market opportunity in excess of \$1B
- **Current standard of care is not adequate for this population**



Strong Portfolio

Existing products and solutions driving consistent growth

- **Diverse and growing portfolio**
Broad offering of products/solutions
- **Commitment to innovation, education, and clinical science**
 - Multiple product launches in last decade
 - Trained over 3,000 professionals
- **Improving profitability profile**



Bright Future

Novel therapies supported by growing body of clinical evidence

- **Evolution to minimally invasive therapies will drive growth**
- **Clinical evidence to support**
Multiple clinical trials readout out over next few years
- **Launched pain management business**
Adjacent use of technology adds to growth prospects



Thank You!

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Supplemental Information

Note that citations/references for any comments, statistics, or figures in this presentation are available upon request.

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Q4 2019 Highlights

Worldwide revenue of \$61.3 million – growth of 16% over Q4 2018

- 29th consecutive quarter of double-digit growth!
- **Appendage Management** continued to be our fastest growing business at **33% worldwide** revenue growth year over year

Completed enrollment in aMAZE Pivotal Trial

- 600th patient enrolled in December 2019
- Received approval for continued access protocol; expect to begin enrollment in 2020

Multiple submissions to FDA

- Final CONVERGE PMA module
- Isolator Synergy EnCompass™ clamp – expect approval and launch in 2020

Expanded Board of Directors with addition of two industry veterans

US Concomitant Market Opportunity



Estimated **Afib** Opportunity in Cardiac Surgery

Annual Cardiac Surgeries	300,000
Pre-Operative Afib Rate	~28%
Cardiac Opportunity – Pre-Op Afib	85,000
ASP Mix (Ablation and Appendage Management)	\$4,500
Open Cardiac Surgery Opportunity – Afib	\$382M

Estimated **Non-Afib** Opportunity in Cardiac Surgery

Annual Cardiac Surgeries	300,000
Pre-Operative Non-Afib Rate	~72%
Cardiac Opportunity – Pre-Op Afib	215,000
ASP Mix (Appendage Management ONLY)	\$1,750
Open Cardiac Surgery Opportunity – Non-Afib	\$376M

- US annual cardiac surgery volume steady over the past 5 years with shifts in procedure types¹
- Pre-Op Afib occurs frequently in cardiac surgery patients²
- New onset Post-Op Afib is a well-documented complication of cardiac surgery, even if patients do not present with pre-op Afib³

1. STS Adult Cardiac Surgery Database, 2018/2019 Harvest Executive Summary
2. McCarthy, Davidson et al, JIVCS 2019
3. Lin et al, Stroke 2019

US Standalone Market Opportunity



Estimated Standalone Afib Opportunity

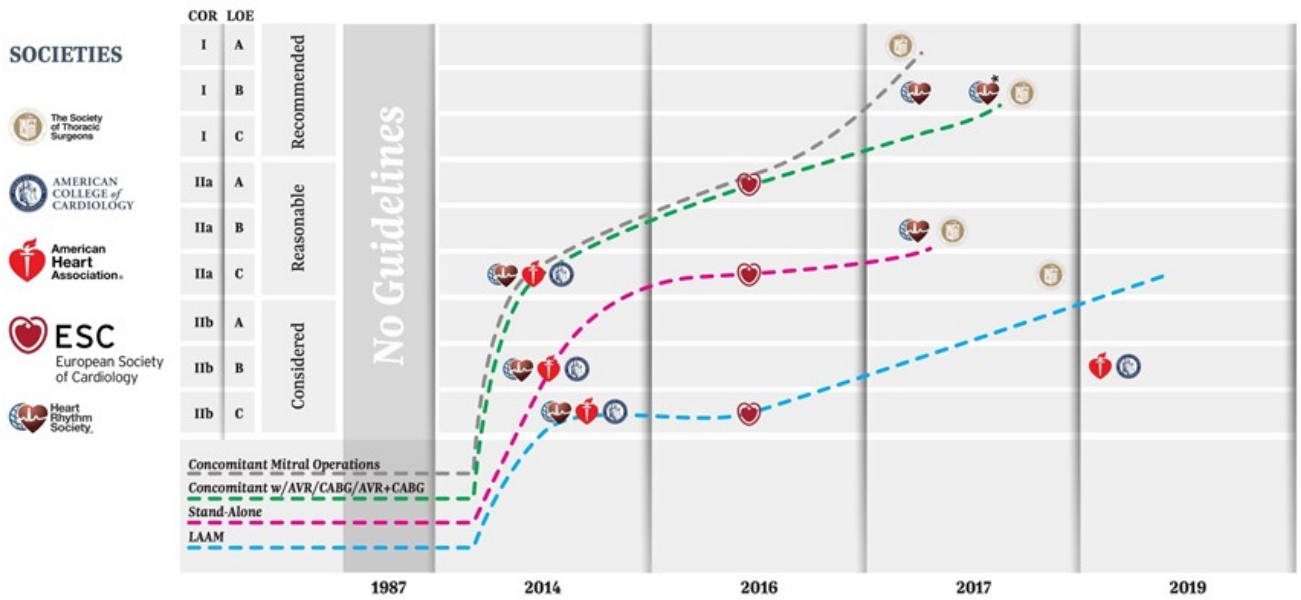
Paroxysmal Afib Catheter Ablation	100,000
Failed Paroxysmal Afib Catheter Ablation (30%)	30,000
Persistent/Longstanding Persistent Afib Catheter Ablation	56,000
ASP Mix (Ablation + Appendage Management)	\$18,500
Standalone Afib Opportunity (Persistent Only)	\$1.0B
Standalone Afib Opportunity (Failed Paroxysmal & Persistent)	\$1.6B

- Prevalence of Afib in the US is 6M patients with ~50% resistant to medical management. ~50% of these patient are classified as persistent Afib, or roughly 1.5M patients.¹
- However, the US healthcare system lacks sufficient capacity to treat the true prevalence of Afib; market opportunity in analysis at left only considers catheter ablation patients.
- Catheter ablation procedures have grown 10-15% annually.²

1. Am Journal of Cardiology 2013, 112: 1142-1147, Clinical Epidemiology 2014, American Col of Card 2013, Circulation. 2006;114:119-125.

2. Catheter manufacturer investor presentations

Advancing Surgical Ablation Guidelines



Guidelines to Fuel Adoption



WHAT'S NEXT?

2017 STS Guidelines

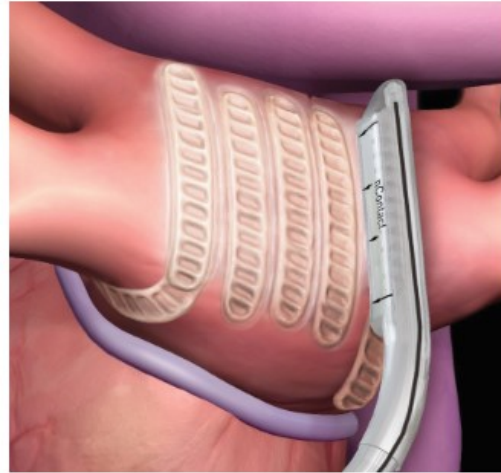
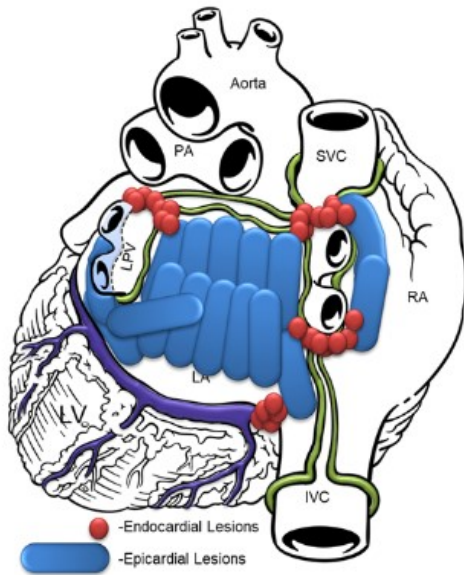
- Applies to **ALL-COMER Afib patients**; previously only "symptomatic patients refractory or intolerant to at least one AAD"
- Surgical Ablation is **RECOMMENDED** not just reasonable; it doesn't increase operative risk
- **LAA Management** is mentioned for the first time in the STS Guidelines; LAA Management is reasonable in conjunction with ablation or alone during cardiac surgery
- Acknowledges the positive impact of **hybrid ablations**

2017 HRS Guidelines

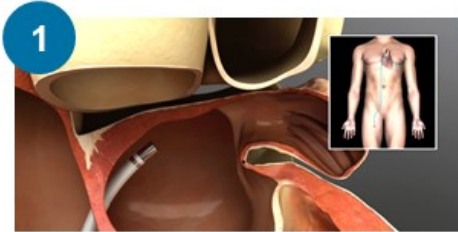
- Mitral Valve Replacement is **RECOMMENDED** for all symptomatic patients refractory or prior to antiarrhythmic drugs
- Surgical Ablation is **RECOMMENDED** for CABG and AVR patients who had initiated antiarrhythmics prior to surgery
- Standalone / Hybrid is **REASONABLE** for long-standing persistent symptomatic patients refractory or intolerant to at least one AAD and have failed one or more attempts at catheter ablation or prefer a surgical approach

- **Educate the market**
Continue investments in physician training across therapies
- **Generate evidence**
Numerous clinical trials and studies underway
- **Drive deep understanding of the benefits of hybrid ablation**

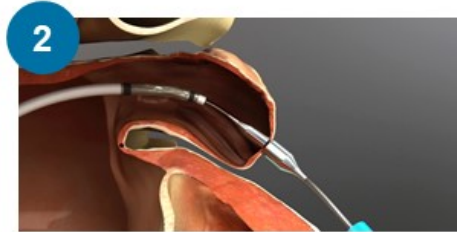
The CONVERGENT Approach



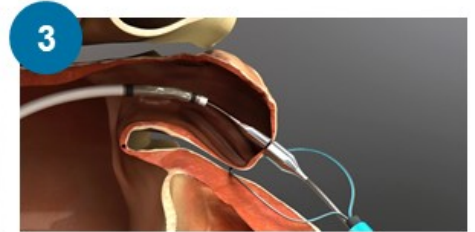
The LARIAT Procedure



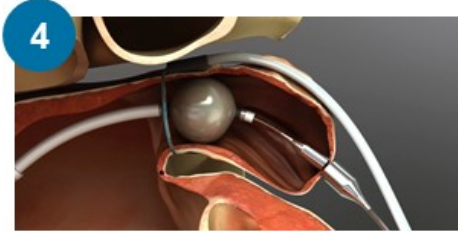
1 Access: Routine percutaneous techniques for pericardial and transseptal access are performed using fluoroscopy and transesophageal echocardiography.



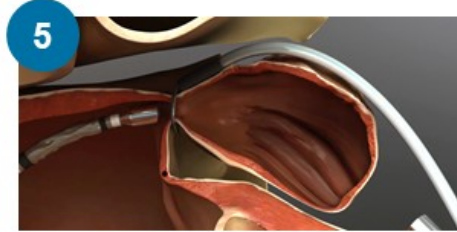
2 Delivery: Two magnet-tipped guidewires (FindrWIRZ) are attached to stabilize the LAA with minimal trauma and manipulation for delivery of the LARIAT.



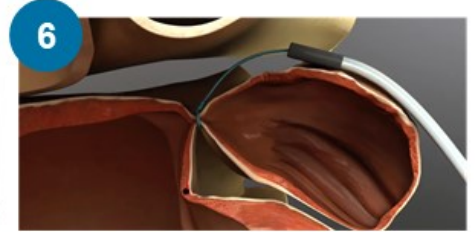
3 Delivery: The LARIAT snare is delivered over the epicardial FindrWIRZ to the apex of the LAA.



4 Capture: The LARIAT snare is positioned to the base of the LAA using the EndoCATH balloon for anatomic landmarking of the optimal closure site.



5 Closure: The LARIAT snare is closed and the FindrWIRZ and the EndoCATH are removed prior to release and tightening of the suture.



6 Removal: The suture is released and tightened at the base of the LAA and the LARIAT is removed. The SureCUT suture cutter is used to remotely cut the excess suture.

The Cox-Maze IV Procedure

