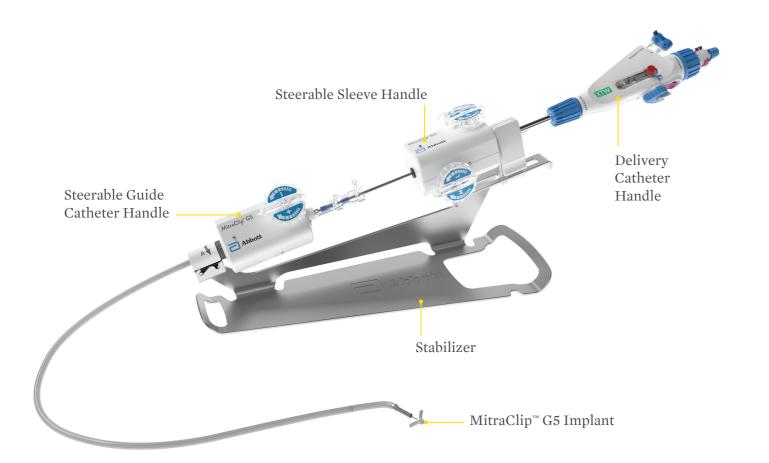
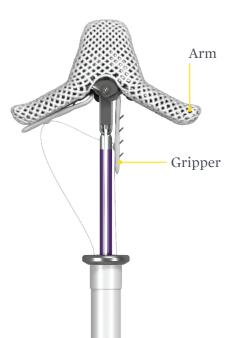
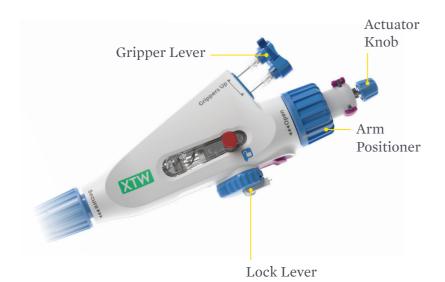
MitraClip™ G5 TEER System



MITRACLIP™ G5 IMPLANT CLOSE-UP



DELIVERY CATHETER HANDLE CLOSE-UP



Information contained herein for **DISTRIBUTION outside of the U.S. ONLY.** Always check the regulatory status of the device in your region or country.

CAUTION: Product(s) intended for use by or under the direction of a physician. Prior to use, reference the Instructions for Use inside the product carton (when available) or at www.eifu.abbott for more detailed information on Indications, Contraindications, Warnings, Precautions and Adverse Events.

Illustrations are artist's representations only and should not be considered as engineering drawings or photographs. Photos on file at Abbott.

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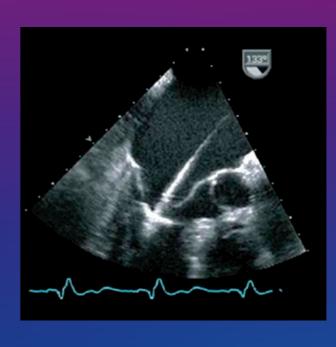
 $^{\scriptscriptstyle\mathsf{TM}}$ Indicates a trademark of the Abbott group of companies.

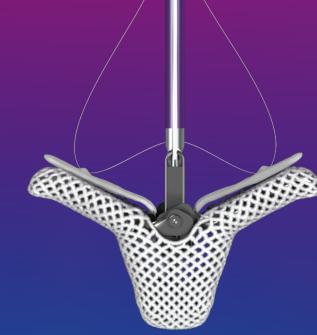
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PROCEDURAL POSITIONING AND IMAGING GUIDE







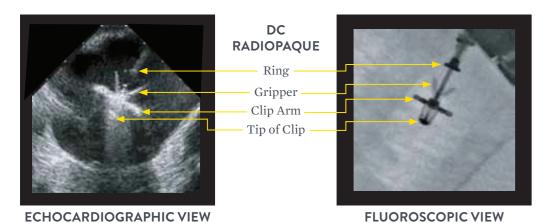
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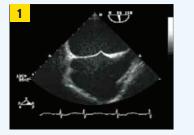


PROCEDURAL POSITIONING AND IMAGING GUIDE

CLIP DELIVERY SYSTEM COMPONENTS



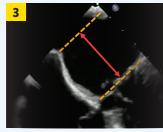




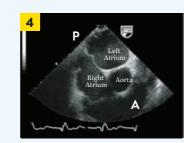
BICAVAL (80-110°) Proper SVC–IVC tenting location (Mid Bicaval)



SAX AT BASE (15-45°) Proper anterior–posterior tenting location

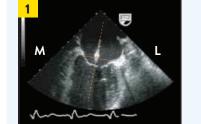


4 CHAMBER (0-20°) Confirmation of proper height above the annulus (4.0–5.0 cm) (Visualize AO when crossing



SAX AT BASE (15-45°) Puncture and cross the septum

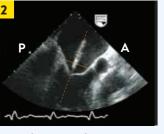
POSITIONING AND TRAJECTORY

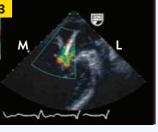


INTERCOMMISSURAL-2C (60-90°) Proper medial-lateral alignment

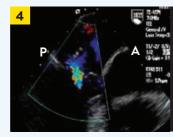


LVOT (100-160°) Proper anterior–posterior





INTERCOMMISSURAL-2C (60-90°) WITH COLOR Position Clip at MR origin



LVOT (100-160°) WITH COLOR Position Clip at MR origin

CLIP POSITIONING



LVOT (100-160°) Full length of both Clip Arms visible at 180° in LA



INTERCOMMISSURAL-2C (60-90°) Single Clip Arm visible in LA



INTERCOMMISSURAL X-PLANE

Use Intercommissural and X-Plane to achieve proper medial-lateral and anterior-posterior alignment simultaneously



TG SAX (0-20°) Clip Arms perpendicular to line of coaptation (LoC) in LA



LVOT VIEW (100-160°) **GRIPPER IDENTIFICATION** Full length of both Clip Arms Unlatch the Gripper Levers. Advance and retract the Gripper Lever with the tactile marker to identify the Gripper that corresponds to the associated leaflet



TG SAX (0-20°) Clip Arms perpendicular to LoC in LV



visible at 180° in LV



3D EN FACE IN LV Gain Down, past valve, to observe Clip Arms perpendicular to line of coaptation (LoC) in LV

LEAFLET INSERTION ASSESSMENT



LVOT (100-160°) Limited leaflet mobility relative to the tips of both Clip Arms; Both leaflets over the tips of the Clip Arms; Both leaflet tips are fully inserted to the base of "V" between Grippers and Clip Arms



(60-90°) Each leaflet should enter the center of the Clip at the same height; Stable leaflet tissue medial and lateral to the Clip



4 CHAMBER (0-20°) Limited leaflet mobility relative to the tips of both Clip Arms; Both leaflets over the tips of the Clip Arms; Both leaflet tips are fully inserted to the base of "V" between Grippers and Clip Arms



TG SAX (0-20°) Observation of double orifice valve ("dogbone" appearance); Stable leaflet tissue medial and lateral to the Clip; Clip positioned perpendicular to the LoC (not biased anterior or posterior relative to LoC)



BRIDGE Observation of double orifice valve ("dogbone" appearance); Stable leaflet tissue medial and lateral to the Clip; Clip positioned perpendicular to the LoC (not biased anterior or posterior relative to LoC)

