

## AtriClip FLEX•V® Device

AtriClip Device Performance with a  
Clip Deployment Trigger

**>98%**  
successful LAA  
exclusion<sup>1</sup>

AtriCure's AtriClip products are the most widely sold Left Atrial Appendage (LAA) management devices worldwide.

### **Epicardial Exclusion**

- Implant is not in the blood stream
- Ischemic injury electrically isolates the LAA
- Atrophy and resorption of the LAA

### **Dynamic Closing Force**

Continuous closing force maintains LAA exclusion throughout changes to the tissue caused by ischemia

### **Parallel / Linear Closing**

Minimized occurrence of tissue folds with optimal apposition of tissue along long axis of LAA ostia

### **Tissue Compression / Atraumatic**

No cutting, non-piercing, and atraumatic compression reduces risk of tissue tearing and bleeding

### **Stroke\* risk reduction**

Indicated for use in patients at high risk of thromboembolism for whom left atrial appendage exclusion is warranted



Now recommended **Class I**  
by ESC/EACTS 2024  
Recommendations

\*Originated from the LAA

The AtriClip FLEX•V Device **Applies  
Continual Force to the Base of the  
LAA** as it Atrophies

Open accesses

AtriClip FLEX•V

Features

- Small Footprint to Minimize the Interference with Adjacent Structures and Enhance LAA Visualization
- Suture-Less Clip Deployment
- Reduced Fatigue Clip Opening Lever
- One Handed Application
- Jaws
- End Effector



Open-Ended AtriClip



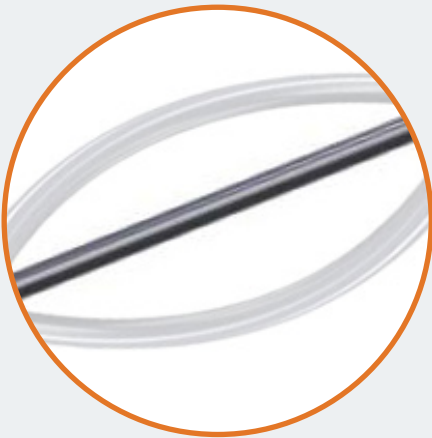
Tip-First Closure



Continual Force Applied to the Base of the LAA

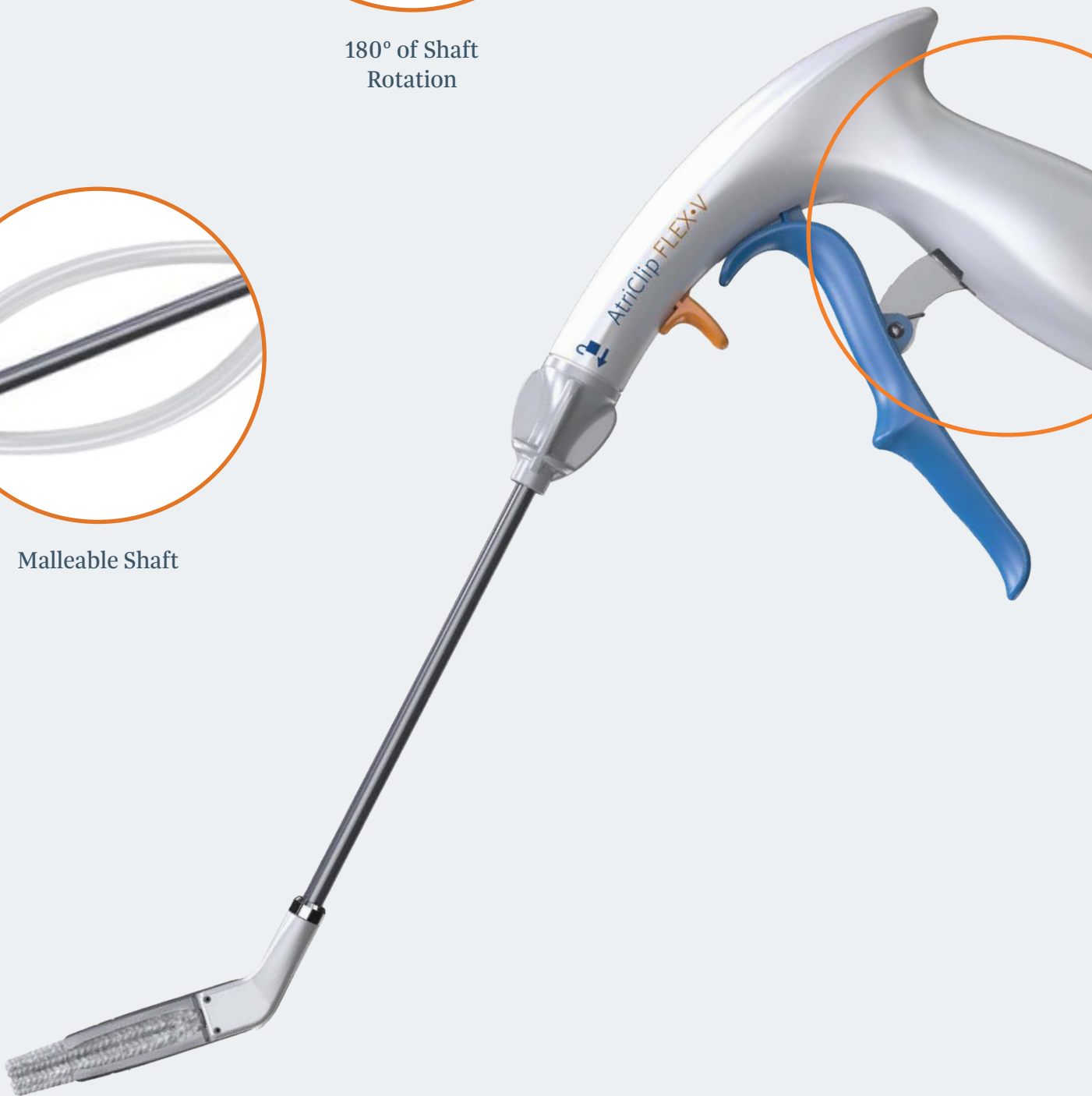


180° of Shaft  
Rotation



Malleable Shaft

New Clip Opening  
Handle with Reduced  
Fatigue Design



**AtriClip FLEX•V**

Device	Size
ACHV35	35 mm
ACHV40	40 mm
ACHV45	45 mm
ACHV50	50 mm

Selection device  
CGG

The AtriClip LAA Exclusion System is indicated for use in patients at high risk of thromboembolism for whom left atrial appendage exclusion is warranted.

Please review the Instructions for Use for a complete listing of contraindications, warnings, precautions and potential adverse events prior to using these devices.

1. Mean closure rate among the 3 studies is 98.1% per data on file at AtriCure, Inc. Ailawadi G. et al. J Thorac Cardiovasc Surg 2011;142:1002–9, 1009.e1; Gerdisch MW. et al. Innovations (Phila). 2022;17(6):463-470; Cartledge R et al., Interactive CardioVascular and Thoracic Surgery 34 (2022) 548–555

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PM-EU-2374B-0127-G

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