WATCHMAN™ WORKFLOW MAP

1. **Referral**
2. **Initial Consult**
3. **Prior Authorization**
4. **Screening TEE**
5. **Procedure Planning**
6. **Inpatient Stay**
7. **Procedure Close-out**
8. **45-Day Follow Up**
9. **Continued Follow Up**

WATCHMAN™
LEFT ATRIAL APPENDAGE CLOSURE DEVICE