

Date of study exit ____ / ____ / ____ (DD/MMM/YYYY)

Subject Classification

☐ **Screen Failure**

- ☐ Subject did not meet I/E criteria prior to index procedure (if subject was randomized, please do not select)
- ☐ Subject did not meet I/E criteria after the Index Procedure TEE was performed and prior to the Access Sheath crossed the body
- ☐ Other Inc/Exc/Screening assessment failure; **Describe below:**

Subject Classification

☐ **Withdrawn**

- ☐ No Implant received at index procedure (after IMPLANT imaging, Access Sheath crossed the body)
- ☐ Subject withdrew consent
- ☐ Subject lost to follow up
- ☐ Investigator decision to withdraw subject
- ☐ Site terminated by Sponsor
- ☐ Sponsor terminated the Study
- ☐ Subject withdrew due to COVID -19 diagnosis
- ☐ Subject withdrew due to COVID -19 safety concerns
- ☐ Other; **Describe below**

Subject Classification

☐ **Subject Death**

Subject Classification

☐ **Completed Study** – Subject implanted and completed follow up through 5 years

Site Personnel Signature

____ / ____ / ____
Date (DD/MMM/YYYY)