Patient Journey:
MRI-Guided DBS Electrode Lead Placements
with the ClearPoint System

ED-201657 Rev. 0 12/2020

This slide is not for patient presentation. Begin at next slide.

Description & Purpose of this Deck:

This PowerPoint is intended for hospital staff to assist in communicating to patients about MRI-Guided DBS Electrode Placements with the ClearPoint System.

The intended presenters are DBS Program Coordinators and members of a surgical center's care team after the surgeon has prescribed it for a patient.
This material is not intended for patient recruitment purposes.

Presenters of this deck are encouraged to:

- Verify and customize the content to reflect the specifics of your program
- Replace the ## prompts embedded throughout to reflect figures and values for your center
- Re-order and/or delete slides as you prefer
- Request a table-top-display sample SmartFrame:

  Link – ClearPointNeuro.com

Shown here: *A table-top-display sample SmartFrame unit may provide each of your patients with a helpful hands-on look to understand how an MRI-Guided procedure works. Please inquire at the link to left to have an assembled unit shipped to your attention at no additional cost.*

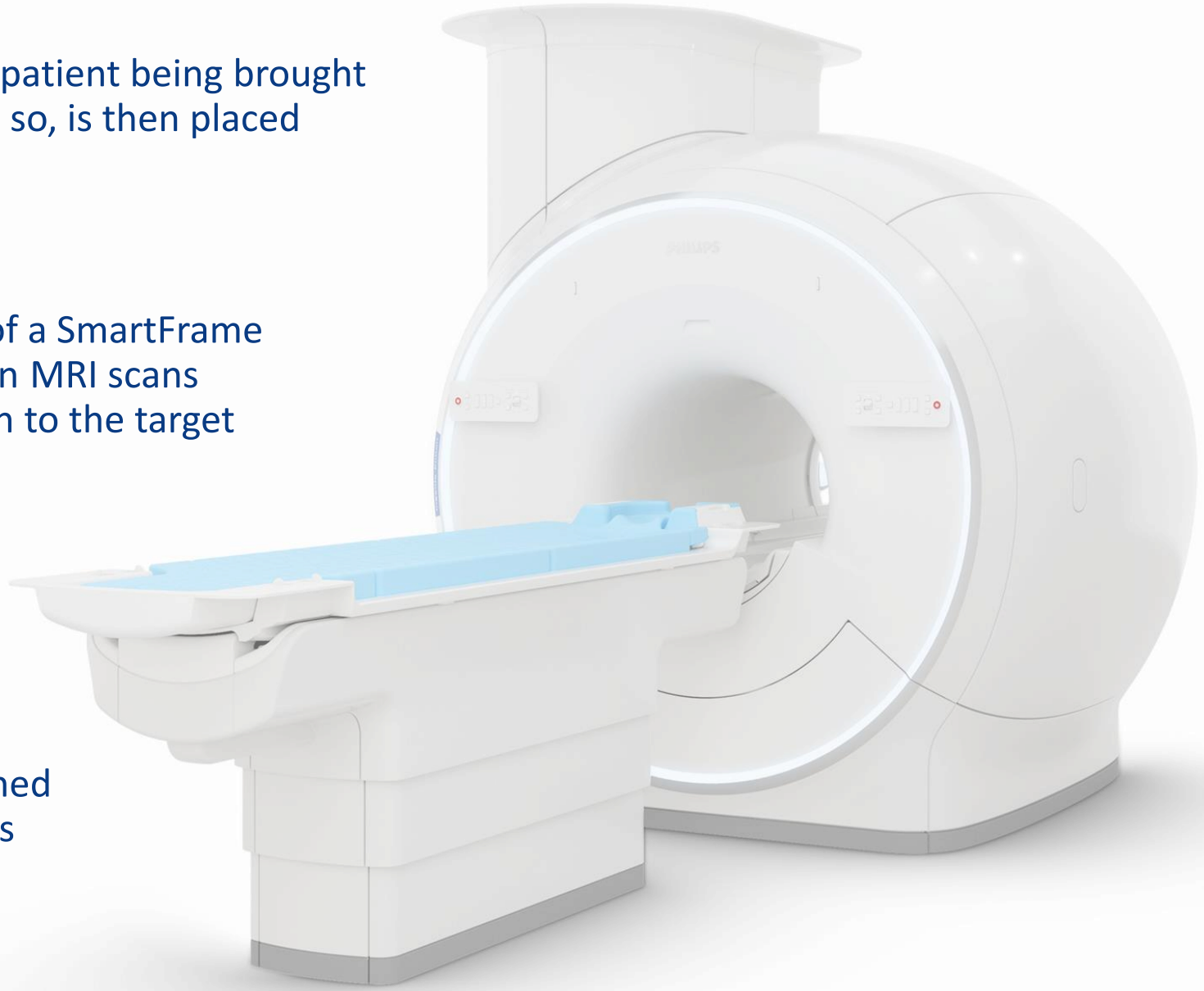
The ClearPoint System:
MRI-Guided Placement of DBS Leads *for* Movement Disorder Indications

The ClearPoint System is Alternative to Conventional Neurosurgery Methods

The **MRI-Guided** procedure begins with the patient being brought into the MRI suite and, if the surgeon orders so, is then placed under general anesthesia

The combination of a SmartFrame and high-resolution MRI scans guide your surgeon to the target

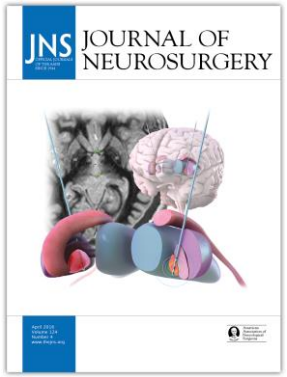
When general anesthesia is used, the patient is awakened after the procedure is completed



ClearPoint May Have Been Prescribed to Reduce Anxiety and Provide Added Comfort

There are several considerations that may have factored into prescribing you for the MRI-Guided method: [1,2,3]

- General anxiety about awake neurosurgery
- Severe off-medication symptoms
- Discomfort while on your back
- Concerns about airway
- Claustrophobia
- Chronic pain
- Considerable fatigue

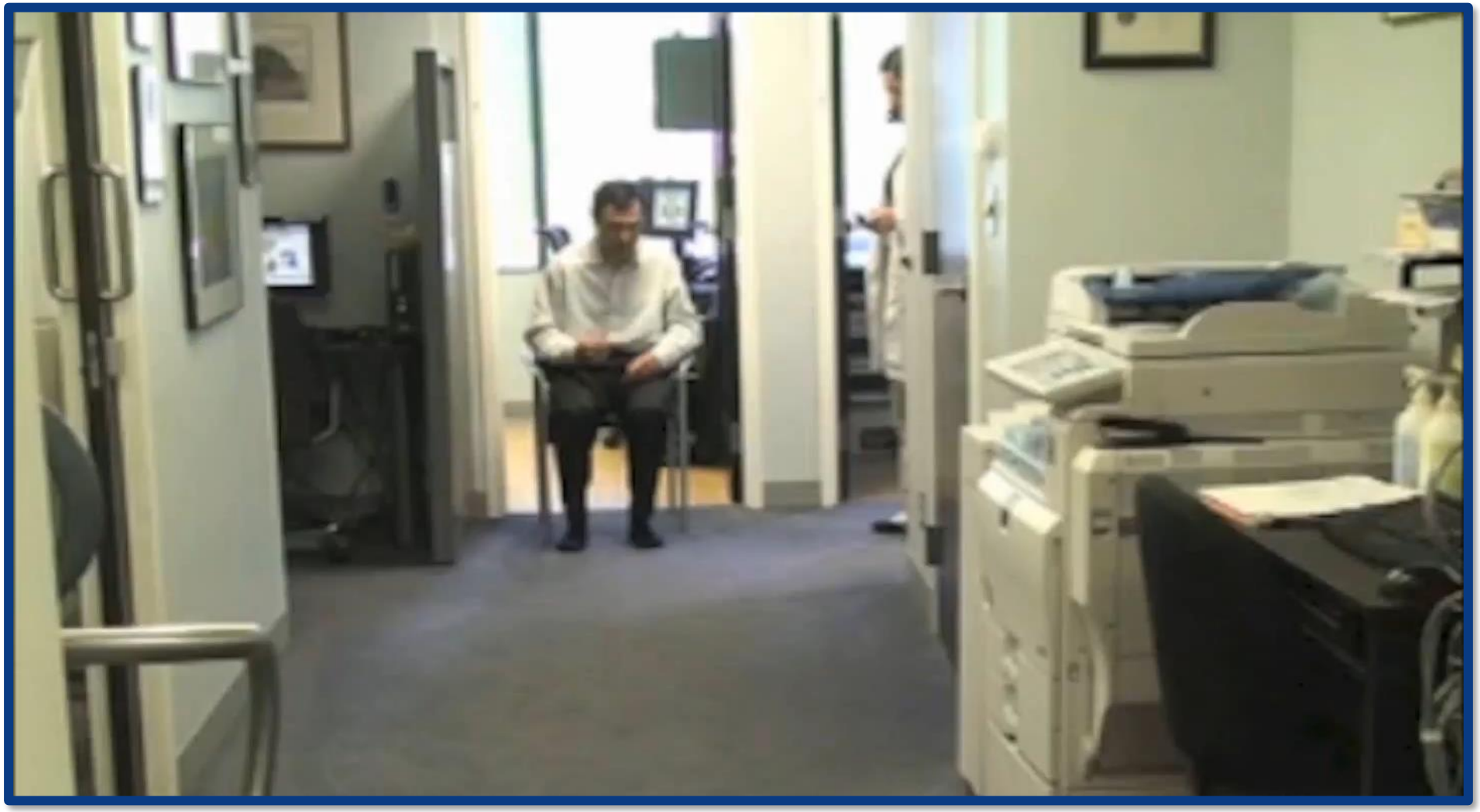


Your surgeon may keep you on your medications leading up to and during the ClearPoint MRI-Guided procedure.[5]

Program Coordinator: XX – Use this space to additional anything else that impacts your patient(s) specifically

1. Ostrem JL, Galifianakis NB, Markun LC, et al. Clinical outcomes of PD patients having bilateral STN DBS using high-field interventional MR-imaging for lead placement. Clin Neurol Neurosurg. 2013;115(6):708-712.
2. LaHue SC, Ostrem JL, Galifianakis NB, San Luciano M, Ziman N, Wang S, Racine CA, Starr PA, Larson PS, Katz M. Parkinson's disease patient preference and experience with various methods of DBS lead placement. Parkinsonism Relat Disord. 2017 Aug;41:25-30. doi: 10.1016/j.parkreldis.2017.04.010. Epub 2017 Apr 17. PMID: 28615151.
3. Lee PS, Weiner GM, Corson D, et al. Outcomes of Interventional-MRI Versus Microelectrode Recording-Guided Subthalamic Deep Brain Stimulation. Frontiers in Neurology. 2018 ;9:241.
4. Sillay KA, Larson PS, Starr PA. Deep brain stimulator hardware-related infections: incidence and management in a large series. Neurosurgery. 2008 Feb;62(2):360-6
5. Azmi H, Gupta F, Vukic M, et al. Interventional magnetic resonance imaging-guided subthalamic nucleus deep brain stimulation for Parkinson's disease: Patient selection. Surg Neurol Int. 2016;7(Suppl 19):S557-S563.

Video: Patient Testimonial for the MRI-Guided DBS Lead Placement Procedure



The testimonial presented in this video is applicable to the individual depicted. Results will vary and may not be representative of the experience of others. The testimonial is representative of this patient's experience, but the exact results and experience will be unique and individual to each patient.

What to Expect

ClearPoint Has Been Utilized with Over 4,000 Patients Since 2010:

UC San Francisco
Stanford Children's
Stanford University
UCSF Benioff Children's
San Francisco VA
USC Keck
UC San Diego
Mayo Phoenix
University of Colorado
University of Utah
University of Arizona
Cook Children's

Texas Children's Hospital
Cleveland Clinic
Children's Mercy
Univ of Kansas Med Center
MD Anderson
Houston Methodist Hospital
Dallas Presbyterian
Cincinnati Children's
Nationwide Children's
OhioHealth Riverside
Spectrum Health
Ohio State University

Boston Children's
Mass General Hospital
Brigham & Women's
Yale University
UPMC
University of Wisconsin
University of Michigan
Univ of Minnesota Med Ctr
Mt Sinai West
Memorial Sloan Kettering
Henry Ford Health System
Cincinnati Jewish

Johns Hopkins
Weill Cornell
Children's Hosp of Philadelphia
University of Pennsylvania HUP
Northwestern Central DuPage
Dartmouth Hitchcock
National Institutes of Health
University of Virginia
Children's of Alabama
CHOA Scottish Rite
Hackensack Univ Med Center
Beth Israel Deaconess

Duke University
Children's National
Le Bonheur
Emory University
Mayo Clinic Jacksonville
INOVA Fairfax
Tampa General
Willis Knighton
Carilion Clinic

What to Expect with MRI-Guided DBS Lead Placement Procedures

Before

- Your Neurology, Neurosurgery, Psychiatry, and Neuropsychology care providers may screen and qualify you for DBS placements similar to conventional methods
- A pre-surgical MRI and/or other imaging may be ordered to assess their surgical plan and map target(s)
- Your doctor and MR Tech will screen you for any existing implants that could effect the surgical imaging
- The care team may provide instructions for medications and eating restrictions prior to surgery

On the Day

- Routine medications may continue and/or restricted eating may be required per the directions of your physician
- Instructions for arrival may help ensure the procedure stays on time
- A foley catheter and IV may be required for the procedure
- Your surgeon may decide to shave your head as needed
- *## - Presenters may edit or add details specific to your center*

Afterwards

- You may wake-up in the recovery room before being transferred to the ICU ward later in the day
- A 1-2 night stay may be required at the direction of your physician
- Family visitation is often possible after the procedure
- Incisional pain may be controlled
- Patients are often walking around and feeling close to normal after 3 days
- Medications may be adjusted upon discussion with your neurologist

About Your Surgical Care Team

Consider Adding Names & Photos for Members of your Center's Team

Add Your
Program Logo

Neurology & Movement Disorder Specialists

Neurosurgeons

Program Coordinators & Nurse Navigators

MR Tech, Fellows, and Residents?

Consider Adding Anything Else You Typically Share re MRI-Guided DBS

Add Your Program Logo

Info about Patient Meet ups

Info from your website or flyers

For more information, please visit:

www.clearpointneuro.com

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