

<b>Patient</b>	THORPE, ROBIN	<b>Height</b>	m	<b>Physician</b>	Dr Ravinay Bhindi	<b>Received Date</b>	07-Aug-25
<b>Sex</b>	Male	<b>Weight</b>	kg	<b>Hospital</b>	North Shore Private Hospital	<b>Reviewed Date</b>	07-Aug-25
<b>Year Of Birth (Age)</b>	1946 (78)	<b>BMI</b>		<b>City</b>			
		<b>EOA needed to achieve an iEOA &gt; 0.85 cm<sup>2</sup>/m<sup>2</sup></b>		<b>Country</b>	Australia		

## Clinical History

Case 31610009

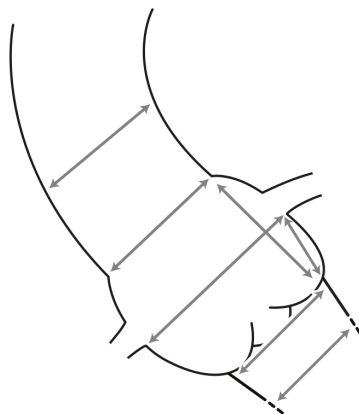
## MEDTRONIC ANALYSIS

### ANNULUS

Diameter (mm)	26.2	x	37.6	,	31.9
	Min		Max		Mean
Perimeter (mm)	102.5			, Derived Ø (mm)	32.6
Area (mm <sup>2</sup> )	795.1			, Derived Ø (mm)	31.8

### LVOT

Diameter (mm)	25.0	x	38.2	,	31.6
	Min		Max		Mean
Perimeter (mm)	101.6			, Derived Ø (mm)	32.3
Area (mm <sup>2</sup> )	759.6			, Derived Ø (mm)	31.1



Max Ascending Aorta Diameter (mm)	38.6		
Sinotubular Junction Diameter (mm)	36.5	x	37.2
	Min		Max
Sinus of Valsalva Diameter (mm)	42.3		36.0
	LCC		RCC
Sinus of Valsalva Height (mm)	26.2		30.3
	LCC		RCC
Coronary Ostia Height (mm)	17.5		19.8
	Left		Right

### VIEWS

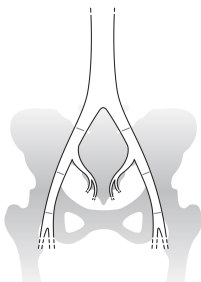
Cusp Overlap View	RAO: 46°, Caudal: 49°
3 Cusp Coplanar View	
Near Cusp Overlap View	

### RIGHT

CIA Min Diameter (mm)	12.3	x	12.7
EIA Min Diameter (mm)	9.9	x	10.0
Femoral Min Diameter (mm)	10.0	x	10.8

### LEFT

CIA Min Diameter (mm)	12.2	x	12.9
EIA Min Diameter (mm)	10.1	x	10.1
Femoral Min Diameter (mm)	9.8	x	10.3



### RIGHT

Subclavian Min Diameter (mm)

--- x ---

Annular Angulation

62°

### LEFT

Subclavian Min Diameter (mm)

--- x ---

Please review images for direct aortic evaluation.

Calcium: Mild ☐ Moderate ☐ Severe ☐

### VIV ADDITIONAL MEASUREMENTS

Valve to Coronary Distance (mm)	---	---
	To LCA	To RCA
Valve to STJ Distance (mm)	---	---
	LCC	RCC

## Procedural Considerations

Possible bicuspid AoV - RCC / LCC appear fused

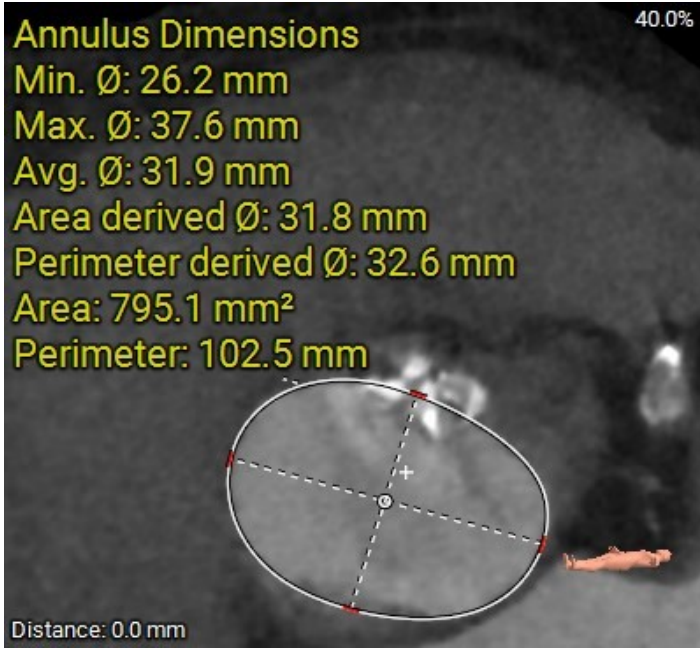
Aortic Annulus measures >30mm

**Please note:** Native aortic annulus size < 18 mm or > 30 mm per the baseline diagnostic imaging is listed as a precaution in the Commercial IFU

Annular calcification under the RCC extending into the LVOT

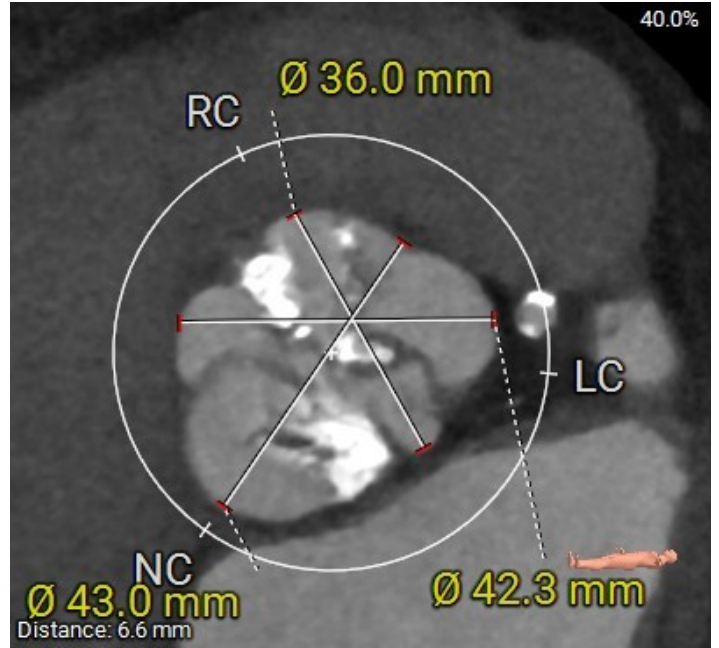
# Aorta

ANNULUS

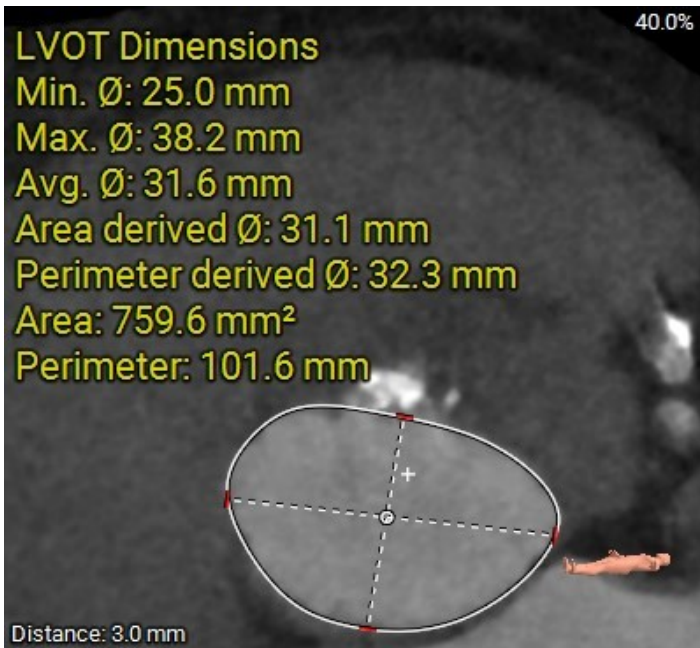


Aortic Annulus measures **>30mm**  
Annular calcification under the RCC

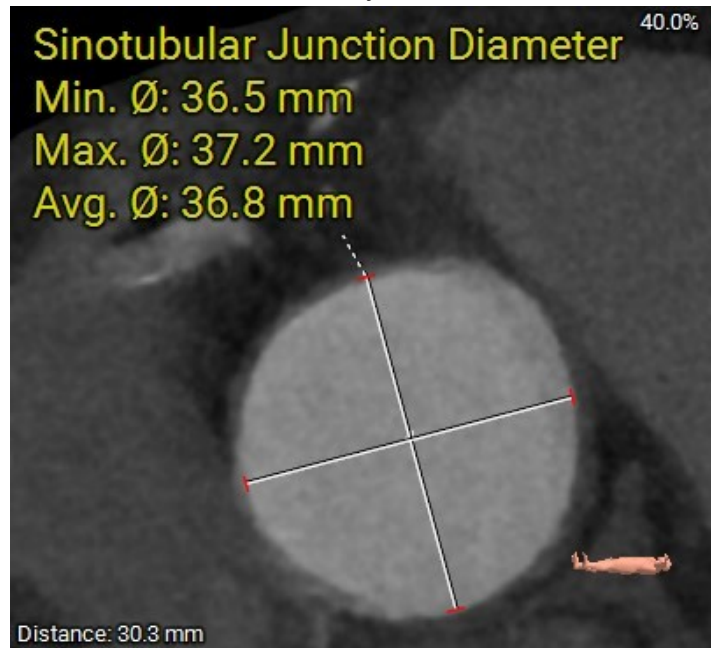
SOV DIAMETER



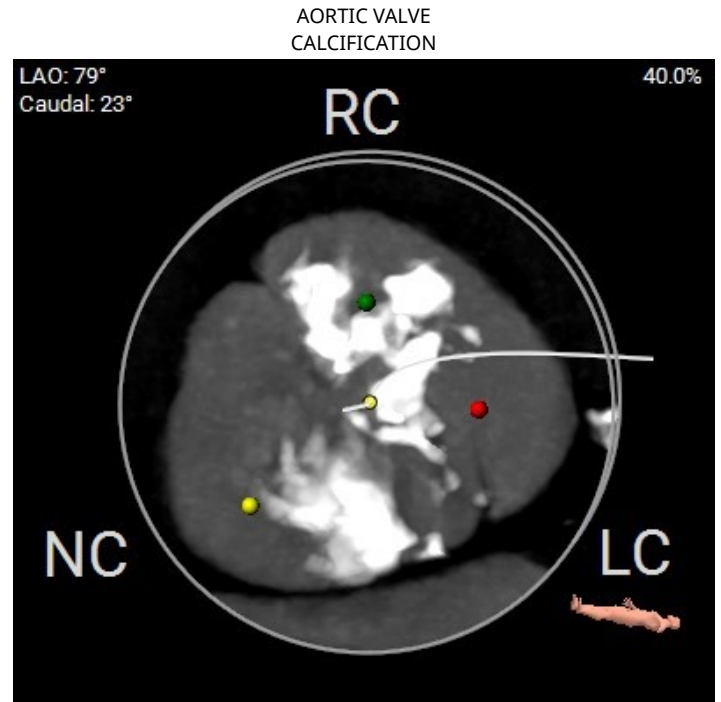
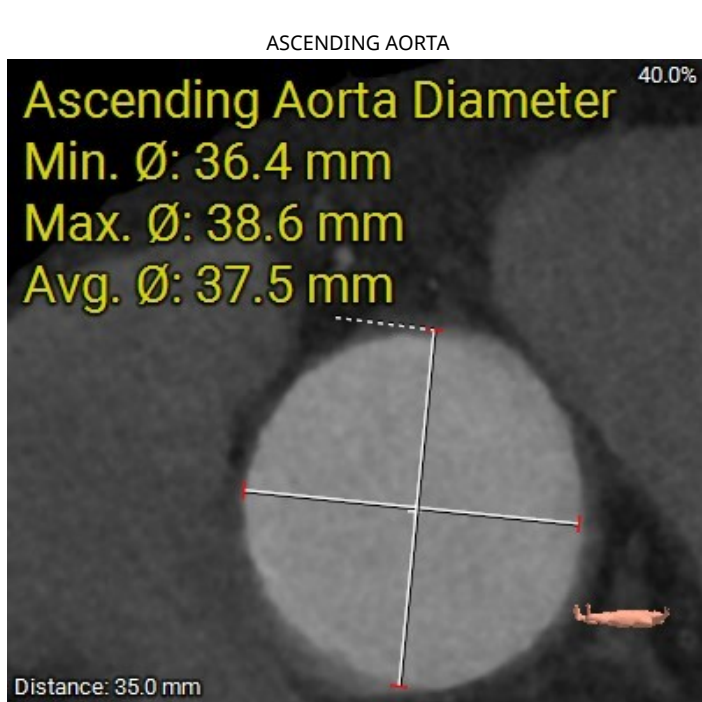
LVOT



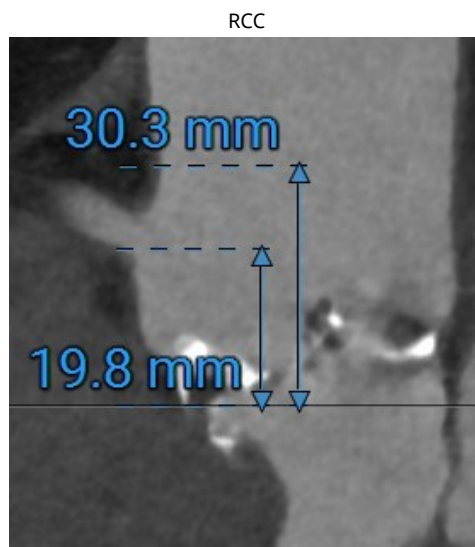
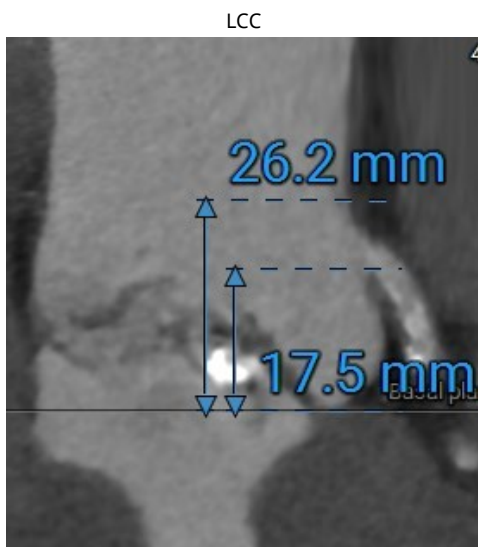
STJ



# Aorta



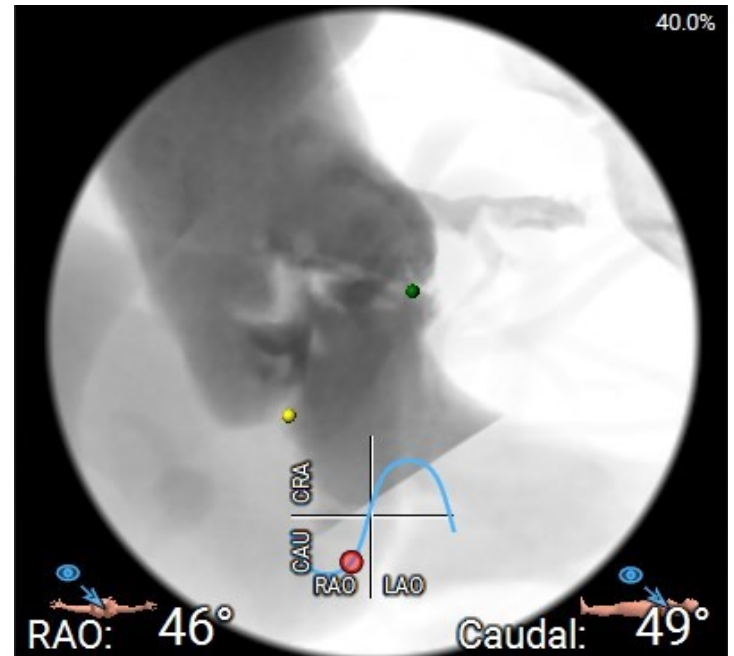
## SINUS HEIGHT



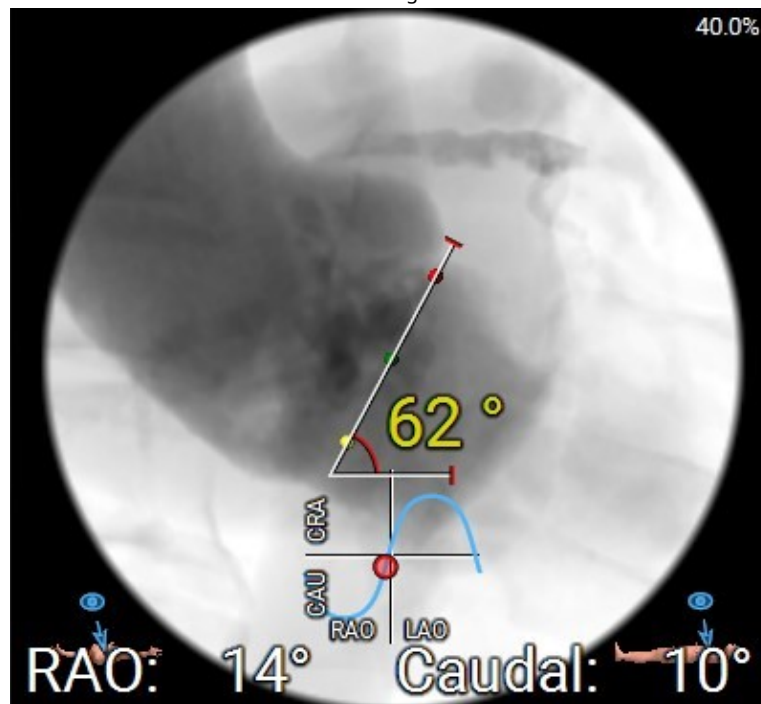
AORTIC ROOT



IMPLANTER'S VIEW

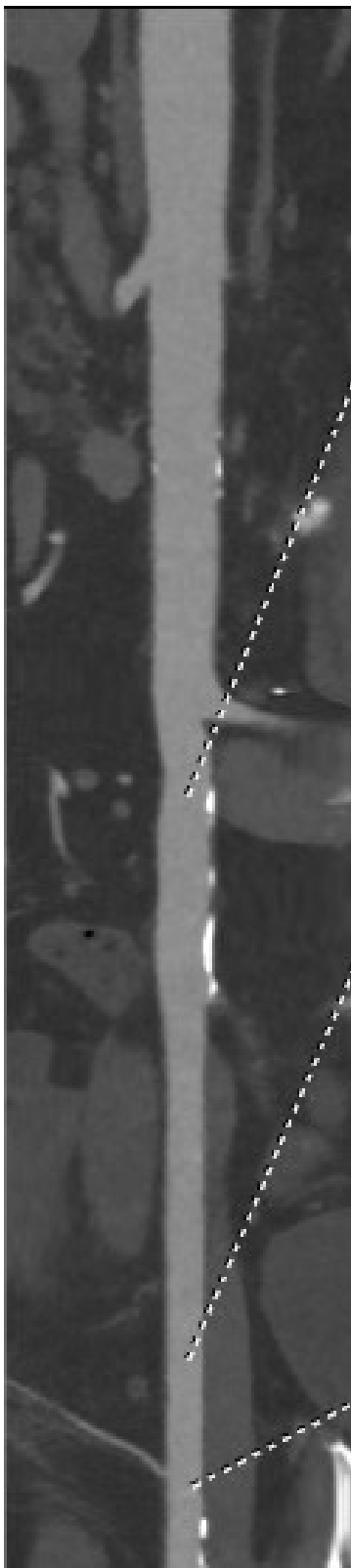


Annular Angulation



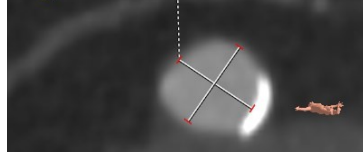


# Femoral Access - Right



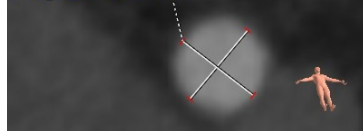
CIA (R)

Right Common Iliac Diameter  
Min. Ø: 12.3 mm  
Max. Ø: 12.7 mm  
Avg. Ø: 12.5 mm



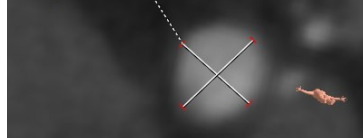
EIA (R)

Right External Iliac Diameter  
Min. Ø: 9.9 mm  
Max. Ø: 10.0 mm  
Avg. Ø: 9.9 mm



RFA

Right Femoral Diameter  
Min. Ø: 10.0 mm  
Max. Ø: 10.8 mm  
Avg. Ø: 10.4 mm

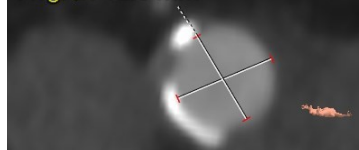


# Femoral Access - Left



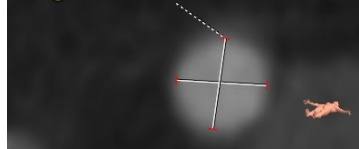
CIA (L)

Left Common Iliac Diameter  
Min. Ø: 12.2 mm  
Max. Ø: 12.9 mm  
Avg. Ø: 12.5 mm



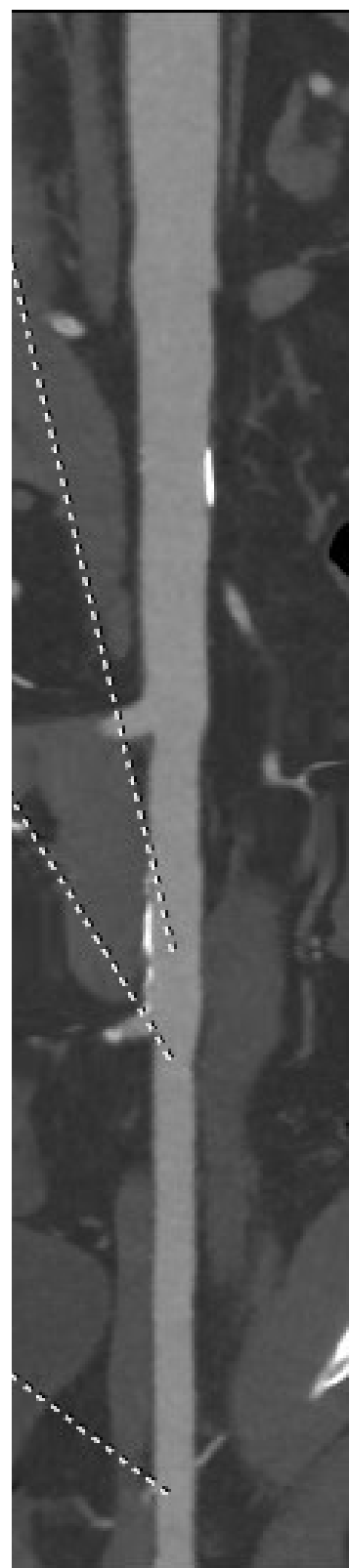
EIA (L)

Left External Iliac Diameter  
Min. Ø: 10.1 mm  
Max. Ø: 10.1 mm  
Avg. Ø: 10.1 mm

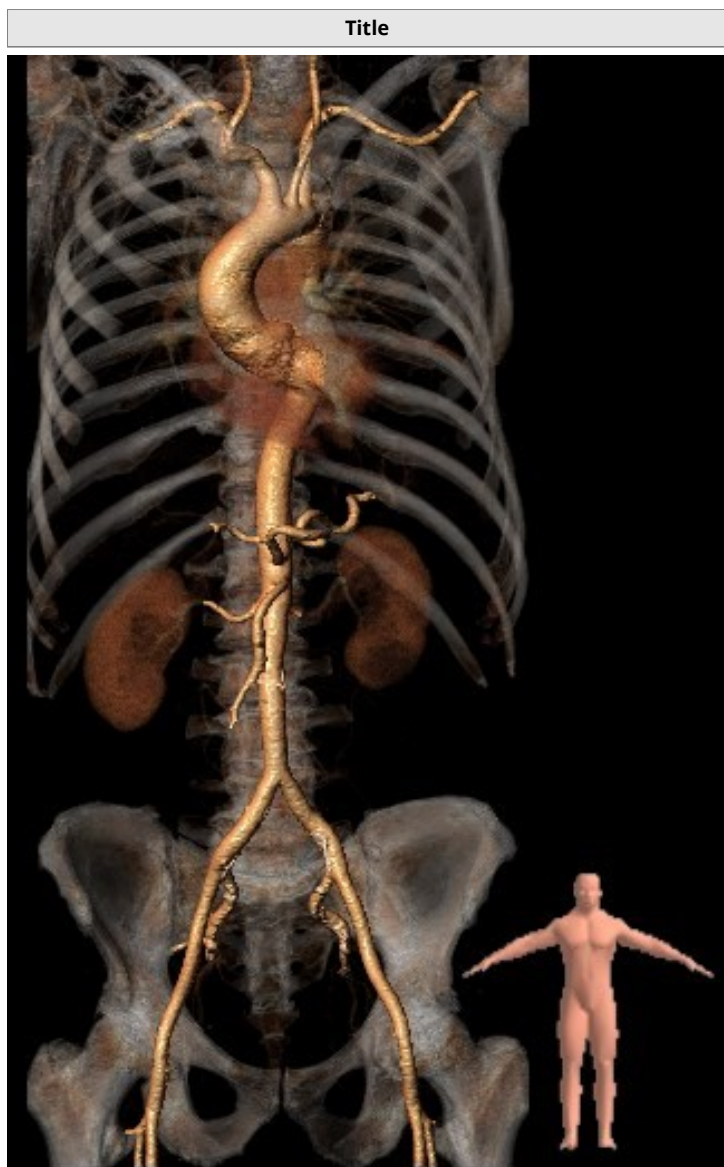


LFA

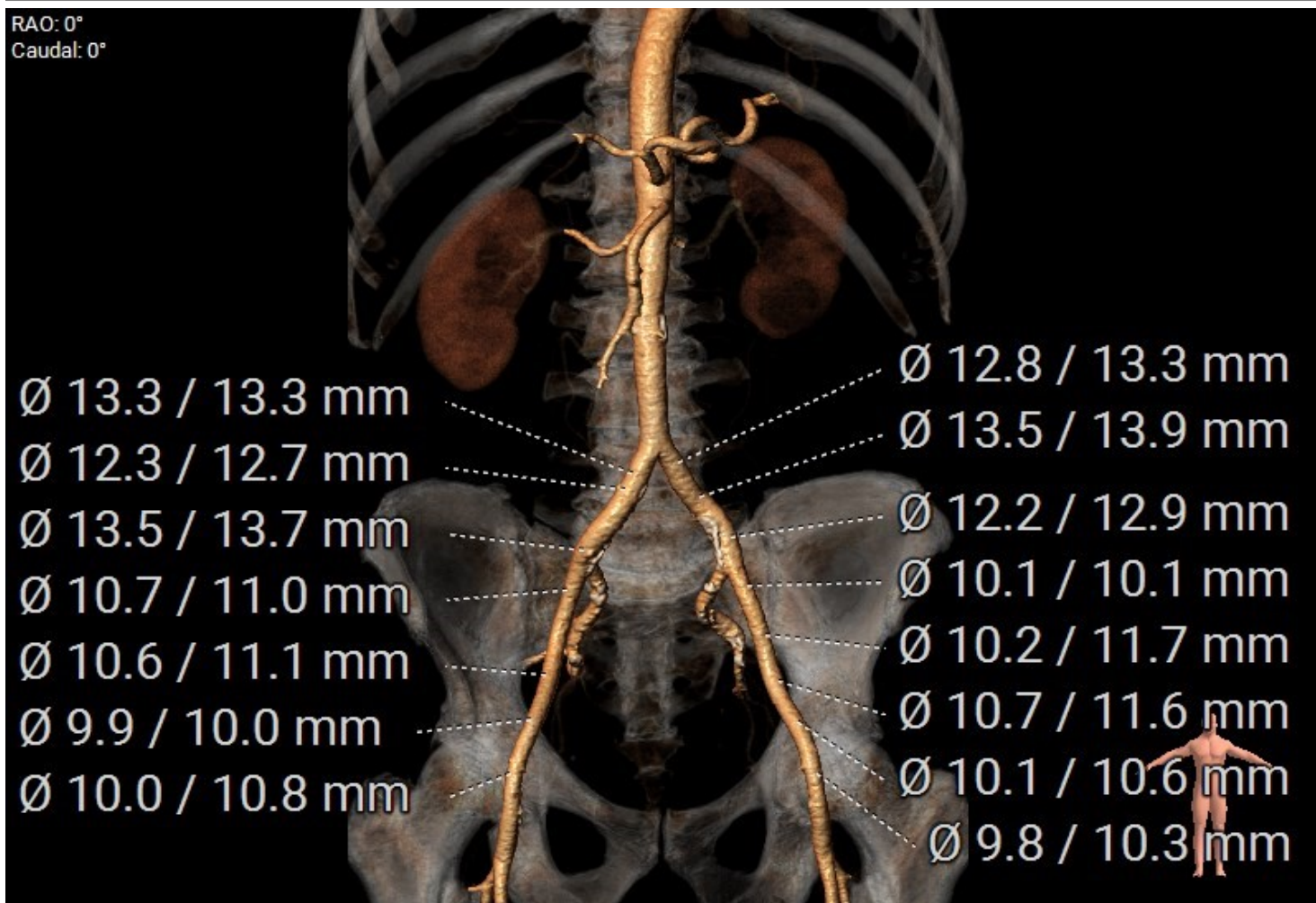
Left Femoral Diameter  
Min. Ø: 9.8 mm  
Max. Ø: 10.3 mm  
Avg. Ø: 10.0 mm



# Additional Femoral Images



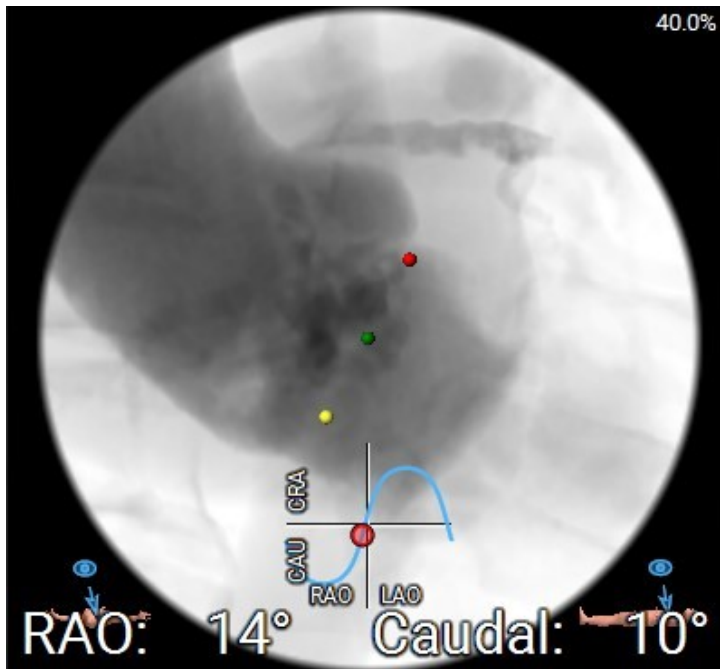
RAO: 0°  
Caudal: 0°



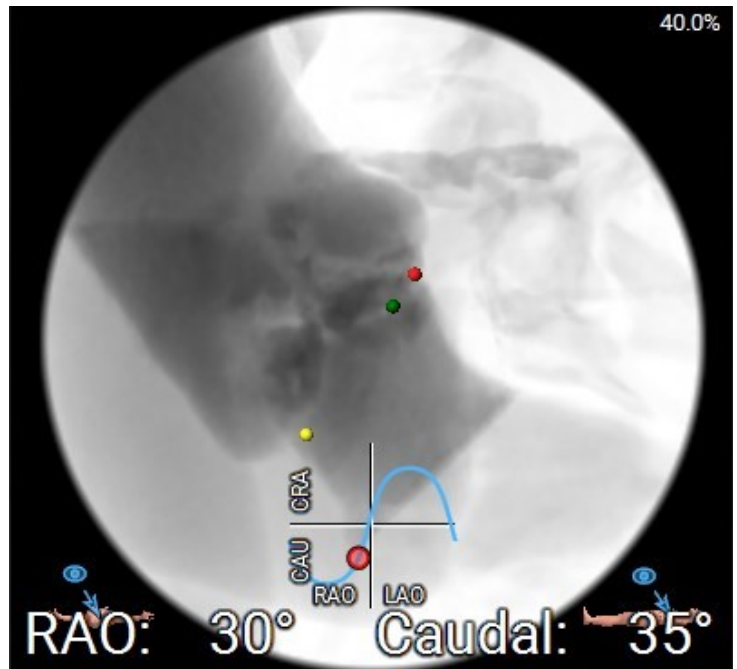


# Additional Images

3 Cusp Co-Planar



Near Overlap View

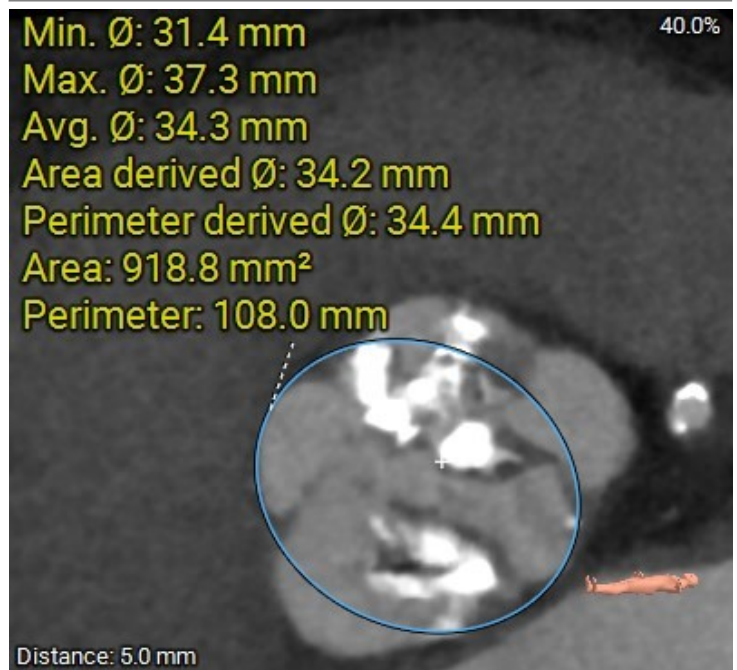


Perpendicular Plane



Possible bicuspid AoV - RCC / LCC appear fused

Perpendicular Plane

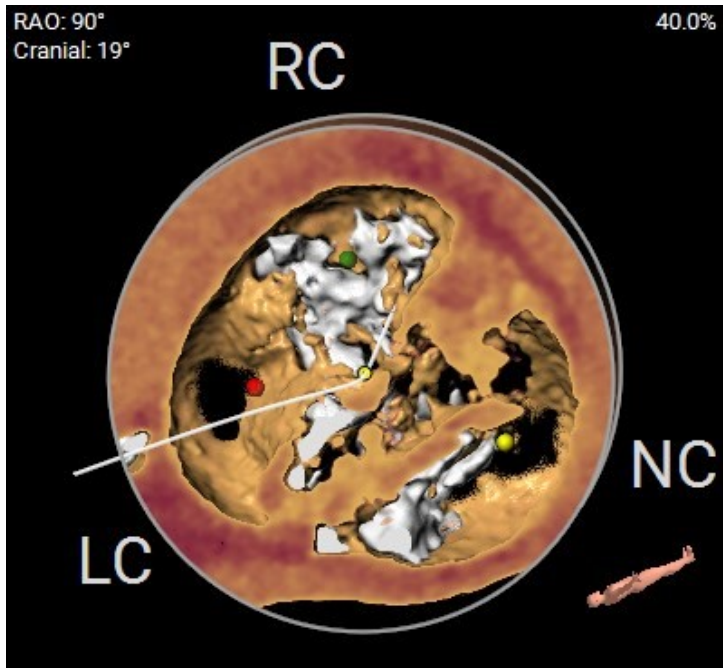


Estimated orifice area of possible bicuspid AV – 5 mm above basal plane

The methodology for supra-annular measurement is variable and has not been standardized. No prospective clinical evidence has been reported comparing clinical results using supra-annular technique to basal plane annulus measurement results. Supra-annular measurements may be provided for anatomical consideration in case planning only and are not intended to replace annular sizing guidance. Refer to the product IFU for annular sizing guidance.

NOTE: If the patient presents with a bicuspid aortic valve, the treating physician should consider the patient's age and the need for ascending aorta intervention when determining the appropriate treatment option for the patient.

Hockey Puck (VR)



Title



## Patient valve selection criteria

### Evolut FX bioprosthesis valve size selection

Size		23 mm	26 mm	29 mm	34 mm
Annulus diameter (A)	32.6 mm	18–20 mm	20–23 mm	23–26 mm	26–30 mm
Annulus perimeter†	102.5 mm	56.5–62.8 mm	62.8–72.3 mm	72.3–81.7 mm	81.7–94.2 mm
Sinus of Valsalva diameter (mean) (B)	40.4 mm	≥ 25 mm	≥ 27 mm	≥ 29 mm	≥ 31 mm
Sinus of Valsalva height (mean) (C)	28.3 mm	≥ 15 mm	≥ 15 mm	≥ 15 mm	≥ 16 mm
Oversizing Percentage		-29%	-20%	-11%	4%

†Annulus perimeter = annulus diameter x  $\pi$ .

### Selection criteria

#### Access consideration by MSCT

Minimum transarterial access vessel diameter

Aortic root angulation, femoral access

Aortic root angulation, left subclavian

Aortic root angulation, right subclavian

Vascular access location, direct aortic access

#### IFU guidance by MSCT

Evolut FX 23/26/29 mm TAVs ≥ 5.0 mm

Evolut FX 34 mm TAV ≥ 6.0 mm

Not recommended if > 70 degrees.

Not recommended if > 70 degrees.<sup>§</sup>

Not recommended if > 30 degrees.<sup>§</sup>

Ascending aorta access site ≥ 60 mm from basal plane.<sup>¶</sup>

<sup>§</sup>Patients with a patent LIMA or RIMA graft must present with access vessel diameters that are either ≥ 5.5 mm when using model D-EVOLUTFX-2329 or ≥ 6.5 mm when using model D-EVOLUTFX-34.

<sup>¶</sup>For direct aortic access, ensure access site and trajectory are free of patent RIMA or preexisting patent RIMA graft.

#### Note the position of any SVGs

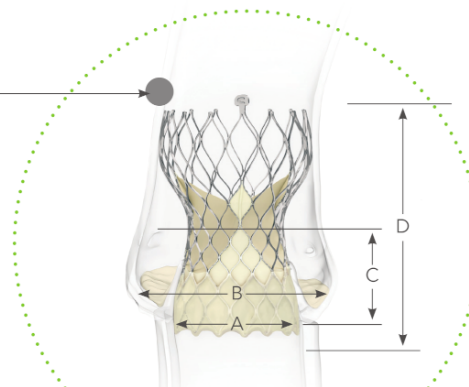
(A) Annulus diameter

(B) Sinus of Valsalva diameter

(C) Sinus of Valsalva height

(D) Frame height (≈ 45 mm, not including paddles)

Illustration not to scale.



**CAUTION:** For distribution only in markets where CoreValve™ Evolut™ R, CoreValve™ Evolut™ PRO, Evolut™ PRO+, Evolut™ FX Systems and Evolut™ FX+ Systems are approved. See the CoreValve™ Evolut™ R, the CoreValve™ Evolut™ PRO, the Evolut™ PRO+, the Evolut™ FX and the Evolut™ FX+ device manuals for detailed information regarding the instructions for use, the implant procedure, indications, contraindications, warnings, precautions, and potential adverse events. For further information, contact your local Medtronic representative and/or consult the Medtronic website at medtronic.eu. For applicable products, consult instructions for use on manuals.medtronic.com. Manuals can be viewed using a current version of any major internet browser. For best results, use Adobe Acrobat® Reader with the browser. The commercial name of the Evolut™ R device is Medtronic CoreValve™ Evolut™ R System, the commercial name of the Evolut™ PRO device is Medtronic CoreValve™ Evolut™ PRO System, the commercial name of the Evolut™ PRO+ device is Medtronic CoreValve™ Evolut™ PRO+ System, the commercial name of the Evolut™ FX device is Medtronic Evolut™ FX System and the commercial name of the Evolut™ FX+ device is Medtronic Evolut™ FX+ System.

**CAUTION:** This report is provided based on information and images provided by the physician to Medtronic. This report is intended to be a resource to support physicians in their determination of proper case selection, device sizing and procedure planning, and is in no way intended to constitute medical advice or in any way replace the independent medical judgment of a trained and licensed physician with respect to any patient needs or circumstances. Physicians must conduct their own measurements and make their own medical judgments based on all of their patient's clinical and diagnostic records and images. Physician is solely responsible for all decisions and any medical judgments relating to patient diagnosis and treatment, including case selection and sizing of the device. Please see the complete Instructions of Use for all product indications, contraindications, precautions, warnings, and adverse events.

See the CoreValve™ Evolut™ R, the CoreValve™ Evolut™ PRO, the Evolut™ PRO+ device and the Evolut™ FX device manuals for detailed information regarding the instructions for use, the implant procedure, indications, contraindications, warnings, precautions, and potential adverse events. For further information, contact your local Medtronic representative and/or consult the Medtronic website at medtronic.eu.

For applicable products, consult instructions for use on manuals.medtronic.com. Manuals can be viewed using a current version of any major internet browser. For best results, use Adobe Acrobat® Reader with the browser.

The commercial name of the Evolut™ R device is Medtronic CoreValve™ Evolut™ R System, the commercial name of the Evolut™ PRO device is Medtronic CoreValve™ Evolut™ PRO System, the commercial name of the Evolut™ PRO+ device is Medtronic Evolut™ PRO+ System, and the commercial name of the Evolut™ FX device is Medtronic Evolut™ FX System.

CE  
0344

## Medtronic

### Europe

Medtronic International Trading Sàrl.  
Route du Molliau 31  
Case postale  
CH-1131 Tolochenaz  
www.medtronic.eu

UC202202685a-evolut-fx-patient-evaluation-criteria-en-we-8664725

©2023 Medtronic. All rights reserved.

Medtronic, Medtronic logo, and Engineering the extraordinary are trademarks of Medtronic.

™\*Third-party brands are trademarks of their respective owners.

All other brands are trademarks of a Medtronic company.

**medtronic.eu**



Notes:

Conclusion:  
Reviewer Name: # 17  
Review Date: 07-Aug-2025