

**Medtronic**  
Structural Heart and Aortic  
3576 Unocal Place  
Santa Rosa, CA 95403

**SYNTAX**

**Valiant Navion™ Thoracic Stent Graft System**  
**SAFE-N LIMITED WARRANTY**

Uninsured Status Verification Form  
For SAFE-N Limited Warranty: Patient and Physician Support Program

Please complete and sign the form and submit to Syntactx. For any questions in completing this verification form, please contact Medtronic through Syntactx at the U.S. SAFE-N reimbursement helpline: 1-833-256-2308 or email: [SAFE-N-Reimburse@syntactx.com](mailto:SAFE-N-Reimburse@syntactx.com).

Patient Full Name: \_\_\_\_\_

Patient Address: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip Code: \_\_\_\_\_

Directions: Patients claiming uninsured status must read and fill-out the following verification statement and sign below. If a patient is unable to complete this form on his or her own behalf, a representative who has submitted the Legal Representative or Caregiver Authorization and provided the required documentation **may sign on the patient's behalf.**

Certification of Uninsured Status and Verification Statement:

I, \_\_\_\_\_, am the patient identified above that has been implanted **with the Valiant Navion™ Thoracic Stent Graft System** and am eligible for participation in the SAFE-N Limited Warranty Program ("**Program**"). I am currently uninsured and represent that I am not eligible for and, consequently, do not have individual, employer-sponsored (through self or spouse), or Medicare or Medicaid coverage.

I certify that the statements and information contained herein or provided are true, accurate, and complete.

Patient Signature: \_\_\_\_\_ Date: \_\_\_\_\_

Legal Representative Signature: \_\_\_\_\_ Date: \_\_\_\_\_

Additional limitations may apply. Reimbursements are subject to review and approval. The SAFE-N Limited Warranty is limited to its express terms and does not constitute a representation, judgment, admission, or assumption of liability by Medtronic with respect to imaging, reintervention, and/or utilized thoracic stent graft systems. No action taken by Medtronic in connection with the Voluntary Product Recall, including this SAFE-N Limited Warranty, shall be construed as an admission of any fault or liability whatsoever to the patient, doctor, health care professional, or to any third party. Medtronic makes no representation with respect to any potential impact of reimbursements on a **patient's eligibility to participate** in a Health Savings Account or other tax-favored health plan; please consult with a tax advisor as necessary. All rights reserved.