



(b) (6)

U.S. Food and Drug Administration
Center for Devices and Radiological Health

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10903 New Hampshire Ave.
Silver Spring, MD 20903

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RE: Postmarket Surveillance (PS) Study: PS160001/R004
Annual Interim Postmarket Surveillance Report
Trade Name: Essure[®] System for Permanent Birth Control
Reference PMA: P020014

August 30, 2018

(b) (6)
Global Regulatory Affairs
921 Parker Street
Berkeley, CA 94710
Phone: (b) (6)

Dear (b) (6):

Reference is made to FDA's letter dated February 29, 2016 regarding order to conduct a postmarket surveillance study for Essure under Section 522 of the Federal Food, Drug and Cosmetic Act. Reference is also made to FDA's approval of the Essure 522 study plan on September 2, 2016.

Bayer is herewith submitting the 24-month Interim Postmarket Surveillance Report (see **Attachment 1**).

The information contained in this submission is considered confidential, and Bayer therefore requests protection of this information in accordance with 18 USC 1905, 21 USC 331 (1), 5 USC 522.

This submission is provided in accordance with the eCopy Program for Medical Device Submissions, Guidance for Industry and Food and Drug Administration Staff (October 10, 2013).

Bayer HealthCare Pharmaceuticals certifies that this submission has been scanned for viruses and is virus free using TREND MICRO[™] Office Scan[™], Program Version Office Scan[™], Program Version 11.0 or higher. For any questions regarding eCopy technical aspects of this electronic submission, please contact (b) (6).

Bayer looks forward to closely working with the FDA on this post market surveillance study. Should you require additional information, please feel free to contact (b) (6) or by email at (b) (6).

Company Confidential

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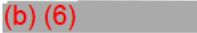
Respectfully,

(b) (6)



ATTACHMENT 1: 24-Month Interim Postmarket Surveillance Report

cc: (b) (6)





24-Month Interim Postmarket Surveillance Report

An open-label, non-randomized, prospective observational cohort study to assess post-procedural outcomes in two cohorts of women who chose to undergo either hysteroscopic sterilization (Essure®) or laparoscopic tubal sterilization

Bayer Study (b) (4)

Postmarket Surveillance
Application #PS160001

Date of Report: 30 AUG 2018

Data Current to:

02 JUL 2018



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List of abbreviations

AE	Adverse event
FAS	Full analysis set
HSG	Hysterosalpingogram
LTS	Laparoscopic tubal sterilization
MedDRA	Medical Dictionary for Medical Activities
(b) (4)	(b) (4)
PSV	Pre-selection visit
SAE	Serious adverse event
SOC	System organ class
TEAE	Treatment-emergent adverse event
TVU	Transvaginal ultrasound



1. General Information

Postmarket Surveillance Application Number: PS160001

1.1 Sponsor Information

Name: Bayer Healthcare LLC
Address: 100 Bayer Blvd.
P.O. Box 915
Whippany, NJ 07981 USA

Contact Person: (b) (6)
Telephone: (b) (6)
Email Address: (b) (6)

1.2 Product Information

Device trade name and model number: Essure[®] System (ESS305)

Date of the 522 order: 29 FEB 2016

Date of postmarket surveillance plan approval: 02 SEP 2016

2. Report Information

Date of report: 30 AUG 2018

Data included in this report: clinical study

Type of submission: interim Postmarket Surveillance Report

3. Postmarket Surveillance Information

3.1 Study Purpose

3.1.1 Goals

Study (b) (4) is an open-label, non-randomized, continuous enrollment, prospective observational, postmarket surveillance study of two cohorts of subjects who chose to undergo:



- hysteroscopic sterilization (Essure System), or
- laparoscopic tubal sterilization.

3.1.2 Objectives

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3.1.3 Study Endpoints

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3.2 Study Population

The planned study population includes subjects of reproductive age, between 21 and 45 years of age, who have not been pregnant within the past 6 weeks.

The Essure study population group will include subjects who chose to undergo hysteroscopic sterilization and who meet the criteria as outlined in the most current approved version of the Essure Instructions for Use.

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Subjects will be followed for a total of 36 months post-procedure. Table 1 provides the subject follow-up visit schedule.

Table 1 Subject Follow-up Visit Schedule

Time of Visit	Office Visit	Telephone Contact
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3.3 Report Dates

The postmarket surveillance plan was approved by the Food and Drug Administration on 02 SEP 2016.

The data extract used for the tabulations provided in this report includes all data entered into the database as of 02 JUL 2018. Data are preliminary and will be updated with ongoing monitoring efforts.

3.4 Summary of Study/Surveillance Progress Milestones/Timeline Elements

3.4.1 Site and Subject Recruitment Status

The site and subject enrollment progress as of 02 JUL 2018 is shown below. A subject is considered to be enrolled after signing informed consent.

- number of sites contacted: approximately 8774
- number completing Questionnaire #1 (Interest): 421 (341: Yes; 50: Maybe; 30: No)



- number completing Questionnaire #2 (Feasibility): 359
- number identified for pre-selection visit (PSV): 133
- number of PSVs completed: 104
- number of sites approved for participation: 90
- number of Institutional Review Board approvals: 74
- number of clinical sites activated (approved to begin screening): 67
 - type of facilities (note: additional categories have been added to this section to reflect the verbatim response provided by sites for type of facility):
 - University Hospital: 12
 - Public/Private Hospital: 4
 - Research Center: 3
 - Private Practice: 30
 - Private Practice/Research Center: 11
 - Public/Private Hospital/Private Practice/Research Center: 2
 - Public/Private Hospital/University Hospital: 1
 - Public/Private Hospital/Private Practice: 1
 - University Hospital/Research Center: 1
 - University Hospital/Private Practice: 1
 - Integrated Care System: 1
- number of sites with subjects enrolled: 56
- subject accrual start date: 03 MAY 2017
- subject accrual completion date: target = to be determined
- number of subjects enrolled (signed informed consent): 575 (Essure: 236; LTS: 339)
- percentage of subjects reaching each designated study phase: see Section 3.4.2.
- On 20 JUL 2018, Bayer announced a business decision to discontinue sales of the Essure device effective 31 DEC 2018. Impact on subject recruitment is to be determined.

3.4.2 Subject Disposition and Accounting

The disposition of subjects enrolled (signed informed consent) as of the 02 JUL 2018 data extract is shown in Table 2. Of the 236 subjects in the Essure group and 339 subjects in the LTS group who signed informed consent and entered the screening phase, (b) (4) and (b) (4) subjects, respectively, attended the procedure visit and of these, (b) (4) and (b) (4) subjects, respectively, had the procedure attempted. (b) (4)

(b) (4)

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A full accounting of subjects by treatment group and study phase is in Table 3.



Table 2 Disposition – Overview (All Enrolled Subjects)

Disposition	Essure	Laparoscopic Tubal Sterilization	Total
Number (%) of subjects enrolled	236	339	575
Screening Failures	(b) (4)		
Primary Reason	(b) (4)		
Inclusion/exclusion criteria not met	(b) (4)		
Lost to Follow-up	(b) (4)		
Withdrawal by Subject	(b) (4)		
Other	(b) (4)		
Entered Procedure Phase	(b) (4)		
No Procedure Attempted	(b) (4)		
Procedure Attempted	(b) (4)		
Told to Rely*	(b) (4)		
Completed the End of Study visit	(b) (4)		
Discontinued from the Study	(b) (4)		
Primary Reason	(b) (4)		
Pregnancy	(b) (4)		
Lost to follow-up	(b) (4)		
Withdrawal by Subject	(b) (4)		
Other	(b) (4)		

(b) (4)



Table 3 Subject Accountability by Treatment Group (Full Analysis Set)

Treatment Group: Essure

(b) (4)

Eligible for visit
Active
Visit performed
Missed visit
Discontinued
Lost to follow-up

Treatment group: Laparoscopic Tubal Sterilization

(b) (4)

Eligible for visit
Active
Visit performed
Missed visit
Discontinued
Lost to follow-up

(b) (4)

3.5 Subject Demographics, Baseline Characteristics, and Medical History

(b) (4)



Table 4 Demographics, Baseline Characteristics and Medical History (Full Analysis Set)

	Essure	Laparoscopic Tubal Sterilization	Total
(b) (4)	(b) (4)	(b) (4)	(b) (4)



Table 4 Demographics, Baseline Characteristics, and Medical History (Full Analysis Set) (continued; 2 of 3)

	Essure (b) (4)	Laparoscopic Tubal Sterilization (b) (4)	Total (b) (4)
(b) (4)			



Table 4 Demographics, Baseline Characteristics, and Medical History (Full Analysis Set) (continued 3 of 3)

	Essure (b) (4)	Laparoscopic Tubal Sterilization (b) (4)	Total (b) (4)
(b) (4)			

3.6 Procedure-Related Findings

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3.7 Interim Safety Results

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Table 6 Subject Incidence of Treatment-emergent Adverse Events (TEAEs) by SOC and Preferred Term (Full Analysis Set) (continued; 2 of 7)

	Essure (b) (4)		Laparoscopic Tubal Sterilization (b) (4)		Total (b) (4)	
	Number of AEs	Number of Subjects (%)	Number of AEs	Number of Subjects (%)	Number of AEs	Number of Subjects (%)
(b) (4)						



**Table 6 Subject Incidence of Treatment-emergent Adverse Events (TEAEs) by SOC and Preferred Term
(Full Analysis Set) (continued; 3 of 7)**

	Essure		Laparoscopic Tubal Sterilization		Total	
	Number	Number of	Number	Number of	Number	Number of
(b) (4)	(b) (4)		(b) (4)		(b) (4)	



**Table 6 Subject Incidence of Treatment-emergent Adverse Events (TEAEs) by SOC and Preferred Term
(Full Analysis Set) (continued; 7 of 7)**

	Essure		Laparoscopic Tubal Sterilization		Total	
	Number of AEs	Number of Subjects (%)	Number of AEs	Number of Subjects (%)	Number of AEs	Number of Subjects (%)
(b) (4)						



4. Summary

(b) (4)

A (b) (4) data review was conducted on 23 AUG 2018. (b) (4)

(b) (4)



5. Appendix



5.1 Adverse Events – Subject Listing (All Enrolled Subjects)

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Listing 14.3.4/2 Adverse Events - Subject Listing (All Enrolled Subjects)

Treatment Group: (b) (4)

Unique Subject Identifier/ Age/Race	Attended Sterilization Procedure/ Attempted Sterilization/ Rely on Sterilization	SOC/ Preferred Term/ Reported Term	Start Prior to Index Event/ After Censor/ AEOSI	Serious /Reason	Adverse Event Start Date (Day)/ End Date (Day)/ Duration (days)	Intensity	Relation to Procedure / Type of Procedure	Causal rel. to Pre-existing condition or Con Med or other non-study procedures	Treatment of AE	Outcome	Comment
(b) (4)											

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BAY (b) (4)



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Listing 14.3.4/2 Adverse Events - Subject Listing (All Enrolled Subjects)

Treatment Group: (b) (4)

Unique Subject Identifier/ Age/Race	Attended Sterilization Procedure/ Attempted Sterilization/ Rely on Sterilization	SOC/ Preferred Term/ Reported Term	Start Prior to Index Event/ After Censor/ AEOSI	Serious /Reason	Adverse Event Start Date (Day)/ End Date (Day)/ Duration (days)	Intensity	Relation to Procedure / Type of Procedure	Causal rel. to Pre-existing condition or Con Med or other non-study procedures	Treatment of AE	Outcome	Comment
(b) (4)											

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Listing 14.3.4/2 Adverse Events - Subject Listing (All Enrolled Subjects)

Treatment Group (b) (4)

Unique Subject Identifier/ Age/Race	Attended Steril-ization Procedure/ Attempted Steril-ization/ Rely on Steril-ization	SOC/ Preferred Term/ Reported Term	Start Prior to Index Event/ After Censor/ AEOSI	Adverse Event Start Date (Day)/ End Date (Day)/ Duration (days)	Serious /Reason	Intensity	Relation to Procedure / Type of Procedure	Causal rel. to Pre-existing condition or Con other non-study proce- dures	Treatment of AE	Outcome	Comment
(b) (4)											

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Listing 14.3.4/2 Adverse Events - Subject Listing (All Enrolled Subjects)

Treatment Group: (b) (4)

Unique Subject Identifier/ Age/Race	Attended Sterilization Procedure/ Attempted Sterilization/ Rely on Sterilization	SOC/ Preferred Term/ Reported Term	Start Prior to Index Event/ After Censor/ AEOSI	Serious /Reason	Adverse Event Start Date (Day)/ End Date (Day)/ Duration (days)	Intensity	Relation to Procedure	Causal rel. to Pre-existing condition or Con Med or other non-study proce- dures	Treatment of AE	Outcome	Comment
(b) (4)											

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BAY (b) (4)



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Listing 14.3.4/2 Adverse Events - Subject Listing (All Enrolled Subjects)

Treatment Group: (b) (4)

Unique Subject Identifier/ Age/Race	Attended Sterilization Procedure/ Attempted Sterilization/ Rely on Sterilization	SOC/ Preferred Term/ Reported Term	Start Prior to Index Event/ After Censor/ AEOSI	Serious /Reason	Adverse Event Start Date (Day)/ End Date (Day)/ Duration (days)	Intensity	Relation to Procedure / Type of Procedure	Causal rel. to Pre-existing condition or Con Med or other non-study procedures	Treatment of AE	Outcome	Comment
(b) (4)											

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BAY I(b) (4)



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Listing 14.3.4/2 Adverse Events - Subject Listing (All Enrolled Subjects)

Treatment Group: (b) (4)

Unique Subject Identifier/ Age/Race	Attended Sterilization Procedure/ Attempted Sterilization/ Rely on Sterilization	SOC/ Preferred Term/ Reported Term	Start Prior to Index Event/ After Censor/ AEOSI	Serious /Reason	Adverse Event Start Date (Day)/ End Date (Day)/ Duration (days)	Intensity	Relation to Procedure / Type of Procedure	Causal rel. to Pre-existing condition or Con Med or other non-study procedures	Treatment of AE	Outcome	Comment
(b) (4)											

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Listing 14.3.4/2 Adverse Events - Subject Listing (All Enrolled Subjects)

Treatment Group: (b) (4)

Unique Subject Identifier/	Attended Sterilization Procedure/ Attempted Sterilization/ Rely on Sterilization	SOC/ Preferred Term/ Reported	Start Prior to Index Event/ After Censor/ AFOSI	Serious /Reason	Adverse Event Start Date (Day)/ End Date (Day)/ Duration (days)	Intensity	Relation to Procedure / Type of	Causal rel. to Pre-existing condition or Con Med or other non-study proce-	Treatment
(b) (4)									

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Listing 14.3.4/2 Adverse Events - Subject Listing (All Enrolled Subjects)

Treatment Group: (b) (4)

Unique Subject Identifier/ Age/Race	Attended Sterilization Procedure/ Attempted Sterilization/ Rely on Sterilization	SOC/ Preferred Term/ Reported Term	Start Prior to Index Event/ After Censor/ AEOSI	Serious /Reason	Adverse Event Start Date (Day)/ End Date (Day)/ Duration (days)	Intensity	Relation to Procedure	Causal rel. to Pre-existing condition or Con Med or other non-study procedures	Treatment of AE	Outcome	Comment
(b) (4)											

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Listing 14.3.4/2 Adverse Events - Subject Listing (All Enrolled Subjects)

Treatment Group: (b) (4)

Unique Subject Identifier/ Age/Race	Attended Sterilization Procedure/ Attempted Sterilization/ Rely on Sterilization	SOC/ Preferred Term/ Reported Term	Start Prior to Index Event/ After Censor/ AEOSI	Serious /Reason	Adverse Event Start Date (Day)/ End Date (Day)/ Duration (days)	Intensity	Relation to Procedure / Type of Procedure	Causal rel. to Pre-existing condition or Con Med or other non-study procedures	Treatment of AE	Outcome	Comment
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BAY (b) (4)



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Listing 14.3.4/2 Adverse Events - Subject Listing (All Enrolled Subjects)

Treatment Group: (b) (4)

Unique Subject Identifier/ Age/Race	Attended Sterilization Procedure/ Attempted Sterilization/ Rely on Sterilization	SOC/ Preferred Term/ Reported Term	Start Prior to Index Event/ After Censor/ AE/OSI	Serious /Reason	Adverse Event Start Date (Day)/ End Date (Day)/ Duration (days)	Intensity	Relation to Procedure / Type of Procedure	Causal rel. to Pre-existing condition or Con Med or other non-study procedures	Treatment of AE	Outcome	Comment
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Listing 14.3.4/2 Adverse Events - Subject Listing (All Enrolled Subjects)

Treatment Group: (b) (4)

Unique Subject Identifier/ Age/Race	Attended Sterilization Procedure/ Attempted Sterilization/ Rely on Sterilization	SOC/ Preferred Term/ Reported Term	Start Prior to Index Event/ After Censor/ AEOSI	Serious /Reason	Adverse Event Start Date (Day)/ End Date (Day)/ Duration (days)	Intensity	Relation to Procedure / Type of Procedure	Causal rel. to Pre-existing condition or Con Med or other non-study procedures	Treatment of AE	Outcome	Comment
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Listing 14.3.4/2 Adverse Events - Subject Listing (All Enrolled Subjects)

Treatment Group (b) (4)

Unique Subject Identifier/ Age/Race	Attended Sterilization Procedure/ Attempted Sterilization/ Rely on Sterilization	SOC/ Preferred Term/ Reported Term	Start Prior to Index Event/ After Censor/ AEOSI	Serious /Reason	Adverse Event Start Date (Day)/ End Date (Day)/ Duration (days)	Intensity	Relation to Procedure / Type of Procedure	Causal rel. to Pre-existing condition or Con Med or other non-study procedures	Treatment of AE	Outcome	Comment
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Listing 14.3.4/2 Adverse Events - Subject Listing (All Enrolled Subjects)

Treatment Group: (b) (4)

Unique Subject Identifier/ Age/Race	Attended Sterilization Procedure/ Attempted Sterilization/ Rely on Sterilization	SOC/ Preferred Term/ Reported Term	Start Prior to Index Event/ After Censor/ AEOSI	Serious /Reason	Adverse Event Start Date (Day)/ End Date (Day)/ Duration (days)	Intensity	Relation to Procedure / Type of Procedure	Causal rel. to Pre-existing condition or Con Med or other non-study procedures	Treatment of AE	Outcome	Comment
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Listing 14.3.4/2 Adverse Events - Subject Listing (All Enrolled Subjects)

Treatment Group: (b) (4)

Unique Subject Identifier/ Age/Race	Attended Sterilization Procedure/ Attempted Sterilization/ Rely on Sterilization	SOC/ Preferred Term/ Reported Term	Start Prior to Index Event/ After Censor/ AEOSI	Serious /Reason	Adverse Event Start Date (Day)/ End Date (Day)/ Duration (days)	Intensity	Relation to Procedure / Type of Procedure	Causal rel. to Pre-existing condition or Con Med or other non-study procedures	Treatment of AE	Outcome	Comment
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Listing 14.3.4/2 Adverse Events - Subject Listing (All Enrolled Subjects)

Treatment Group: (b) (4)

Unique Subject Identifier/ Age/Race	Attended Steril-ization Procedure/ Attempted Steril-ization/ Rely on Steril-ization	SOC/ Preferred Term/ Reported Term	Start Prior to Index Event/ After Censor/ AEOSI	Serious /Reason	Adverse Event Start Date (Day)/ End Date (Day)/ Duration (days)	Intensity	Relation to Procedure / Type of Procedure	Causal rel. to Pre-existing condition or Con Med or other non-study proce-dures	Treatment of AE	Outcome	Comment
(b) (4)	[Redacted]										

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Listing 14.3.4/2 Adverse Events - Subject Listing (All Enrolled Subjects)

Treatment Group: (b) (4)

Unique Subject Identifier/ Age/Race	Attended Sterilization Procedure/ Attempted Sterilization/ Rely on Sterilization	SOC/ Preferred Term/ Reported Term	Start Prior to Index Event/ After Censor/ AE/OSI	Serious /Reason	Adverse Event Start Date (Day)/ End Date (Day)/ Duration (days)	Intensity	Relation to Procedure / Type of Procedure	Causal rel. to Pre-existing condition or Con Med or other non-study procedures	Treatment of AE	Outcome	Comment
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Listing 14.3.4/2 Adverse Events - Subject Listing (All Enrolled Subjects)

Treatment Group: (b) (4)

Unique Subject Identifier/ Age/Race	Attended Sterilization Procedure/ Attempted Sterilization/ Rely on Sterilization	SOC/ Preferred Term/ Reported Term	Start Prior to Index Event/ After Censor/ AEOSI	Serious /Reason	Adverse Event Start Date (Day)/ End Date (Day)/ Duration (days)	Intensity	Relation to Procedure / Type of Procedure	Causal rel. to Pre-existing condition or Con Med or other non-study procedures	Treatment of AE	Outcome	Comment
(b) (4)											

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Listing 14.3.4/2 Adverse Events - Subject Listing (All Enrolled Subjects)

Treatment Group: (b) (4)

Unique Subject Identifier/ Age/Race	Attended Sterilization Procedure/ Attempted Sterilization/ Rely on Sterilization	SOC/ Preferred Term/ Reported Term	Start Prior to Index Event/ After Censor/ AEOSI	Serious /Reason	Adverse Event Start Date (Day)/ End Date (Day)/ Duration (days)	Intensity	Relation to Procedure / Type of Procedure	Causal rel. to Pre existing condition or Con Med or other non-study procedures	Treatment of AE	Outcome	Comment
(b) (4)											

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Listing 14.3.4/2 Adverse Events - Subject Listing (All Enrolled Subjects)

Treatment Group (b) (4)

Unique Subject Identifier/ Age/Race	Attended Sterilization Procedure/ Attempted Sterilization/ Rely on Sterilization	SOC/ Preferred Term/ Reported Term	Start Prior to Index Event/ After Censor/ AEOSI	Adverse Event Start Date (Day)/ End Date (Day)/ Duration (days)	Serious /Reason	Intensity	Relation to Procedure / Type of Procedure	Causal rel. to Pre-existing condition or Con Med or other non-study procedures	Treatment of AE	Outcome	Comment
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Listing 14.3.4/2 Adverse Events - Subject Listing (All Enrolled Subjects)

Treatment Group: (b) (4)

Unique Subject Identifier/ Age/Race	Attended Sterilization Procedure/ Attempted Sterilization/ Rely on Sterilization	SOC/ Preferred Term/ Reported Term	Start Prior to Index Event/ After Censor/ AE/OSI	Adverse Event Start Date (Day)/ End Date (Day)/ Duration (days)	Serious /Reason	Intensity	Relation to Procedure / Type of Procedure	Causal rel. to Pre-existing condition or Con Med or other non-study procedures	Treatment of AE	Outcome	Comment
(b) (4)											

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Listing 14.3.4/2 Adverse Events - Subject Listing (All Enrolled Subjects)

Treatment Group (b) (4)

Unique Subject Identifier/ Age/Race	Attended Sterilization Procedure/ Attempted Sterilization/ Rely on Sterilization	SOC/ Preferred Term/ Reported Term	Start Prior to Index Event/ After Censor/ AEOSI	Serious /Reason	Adverse Event Start Date (Day)/ End Date (Day)/ Duration (days)	Intensity	Relation to Procedure / Type of Procedure	Causal rel to Pre-existing condition or Con Med or other non-study procedures	Treatment of AE	Outcome	Comment
(b) (4)											

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Listing 14.3.4/2 Adverse Events - Subject Listing (All Enrolled Subjects)

Treatment Group: (b) (4)

Unique Subject Identifier/ Age/Race	Attended Sterilization Procedure/ Attempted Sterilization/ Rely on Sterilization	SOC/ Preferred Term/ Reported Term	Start Prior to Index Event/ After Censor/AEOSI	Serious /Reason	Adverse Event Start Date (Day)/ End Date (Day)/ Duration (days)	Intensity	Relation to Procedure / Type of Procedure	Causal rel. to Pre-existing condition or Con Med or other non-study procedures	Treatment of AE	Outcome	Comment
(b) (4)											

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Listing 14.3.4/2 Adverse Events - Subject Listing (All Enrolled Subjects)

Treatment Group: (b) (4)

Unique Subject Identifier/ Age/Race	Attended Sterilization Procedure/ Attempted Sterilization/ Rely on Sterilization	SOC/ Preferred Term/ Reported Term	Start Prior to Index Event/ After Censor/ AEOSI	Serious /Reason	Adverse Event Start Date (Day)/ End Date (Day)/ Duration (days)	Intensity	Relation to Procedure / Type of Procedure	Causal rel. to Pre-existing condition or Con Med or other non-study procedures	Treatment of AE	Outcome	Comment
(b) (4)											

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Listing 14.3.4/2 Adverse Events - Subject Listing (All Enrolled Subjects)

Treatment Group: (b) (4)

Unique Subject Identifier/ Age/Race	Attended Steril-ization Procedure/ Attempted Steril-ization/ Rely on Steril-ization	SOC/ Preferred Term/ Reported Term	Start Prior to Index Event/ After Censor/ AEOSI	Serious /Reason	Adverse Event Start Date (Day)/ End Date (Day)/ Duration (days)	Intensity	Relation to Procedure / Type of Procedure	Causal rel. to Pre-existing condition or Con Med or other non-study proce-dures	Treatment of AE	Outcome	Comment
(b) (4)											

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Listing 14.3.4/2 Adverse Events - Subject Listing (All Enrolled Subjects)

Treatment Group: (b) (4)

Unique Subject Identifier/ Age/Race	Attended Sterilization Procedure/ Attempted Sterilization/ Rely on Sterilization	SOC/ Preferred Term/ Reported Term	Start Prior to Index Event/ After Censor/ AFOSI	Adverse Event Start Date (Day)/ End Date (Day)/ Duration (days)	Serious /Reason	Intensity	Relation to Procedure / Type of Procedure	Causal rel. to Pre-existing condition or Con Med or other non-study procedures	Treatment of AE	Outcome	Comment
(b) (4)											

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Listing 14.3.4/2 Adverse Events - Subject Listing (All Enrolled Subjects)

Treatment Group: (b) (4)

Unique Subject Identifier/ Age/Race	Attended Sterilization Procedure/ Attempted Sterilization/ Rely on Sterilization	SOC/ Preferred Term/ Reported Term	Start Prior to Index Event/ After Censor/ AEOSI	Serious /Reason	Adverse Event Start Date (Day)/ End Date (Day)/ Duration (days)	Intensity	Relation to Procedure / Type of Procedure	Causal rel. to Pre-existing condition or Con Med or non-study procedures	Treatment of AE	Outcome	Comment
(b) (4)											

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Listing 14.3.4/2 Adverse Events - Subject Listing (All Enrolled Subjects)

Treatment Group: (b) (4)

Unique Subject Identifier/ Age/Race	Attended Sterilization Procedure/ Attempted Sterilization/ Rely on Sterilization	SOC/ Preferred Term/ Reported Term	Start Prior to Index Event/ After Censor/ AEOSI	Serious /Reason	Adverse Event Start Date (Day)/ End Date (Day)/ Duration (days)	Intensity	Relation to Procedure / Type of Procedure	Causal rel. to Pre-existing condition or Con Med or other non-study procedures	Treatment of AE	Outcome	Comment
(b) (4)											

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Listing 14.3.4/2 Adverse Events - Subject Listing (All Enrolled Subjects)

Treatment Group: (b) (4)

Unique Subject Identifier/ Age/Race	Attended Sterilization Procedure/ Attempted Sterilization/ Rely on Sterilization	SOC/ Preferred Term/ Reported Term	Start Prior to Index Event/ After Censor/ AEOSI	Serious /Reason	Adverse Event Start Date (Day)/ End Date (Day)/ Duration (days)	Intensity	Relation to Procedure / Type of Procedure	Causal rel. to Pre-existing condition or Con Med or other non-study procedures	Treatment of AE	Outcome	Comment
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Listing 14.3.4/2 Adverse Events - Subject Listing (All Enrolled Subjects)

Treatment Group (b) (4)

Unique Subject Identifier/ Age/Race	Attended Steril-ization Procedure/ Attempted Steril-ization/ Rely on Steril-ization	SOC/ Preferred Term/ Reported Term	Start Prior to Index Event/ After Censor/ AEOSI	Serious /Reason	Adverse Event Start Date (Day)/ End Date (Day)/ Duration (days)	Intensity	Relation to Procedure / Type of Procedure	Causal rel. to Pre-existing condition or Con Med or other non-study proce-dures	Treatment of AE	Outcome	Comment
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Listing 14.3.4/2 Adverse Events - Subject Listing (All Enrolled Subjects)

Treatment Group: (b) (4)

Unique Subject Identifier/	Attended Sterilization Procedure/ Attempted Sterilization/ Rely on Steril-	SOC/ Preferred Term/ Reported	Start Prior to Index Event/ After Censor/ Serious	Adverse Event Start Date (Day)/ End Date (Day)/ Duration	Relation to Procedure / Type of	Causal rel. to Pre-existing condition or Con Med or other non-study proce- Treatment
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Listing 14.3.4/2 Adverse Events - Subject Listing (All Enrolled Subjects)

Treatment Group: (b) (4)

Unique Subject Identifier/ Age/Race	Attended Sterilization Procedure/ Attempted Sterilization/ Rely on Sterilization	SOC/ Preferred Term/ Reported Term	Start Prior to Index Event/ After Censor/ AEOSI	Serious /Reason	Adverse Event Start Date (Day)/ End Date (Day)/ Duration (days)	Intensity	Relation to Procedure / Type of Procedure	Causal rel. to Pre-existing condition or Con Med or other non-study procedures	Treatment of AE	Outcome	Comment
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Listing 14.3.4/2 Adverse Events - Subject Listing (All Enrolled Subjects)

Treatment Group: (b) (4)

Unique Subject Identifier/ Age/Race	Attended Sterilization Procedure/ Attempted Sterilization/ Rely on Sterilization	SOC/ Preferred Term/ Reported Term	Start Prior to Index Event/ After Censor/ AEOSI	Serious /Reason	Adverse Event Start Date (Day)/ End Date (Day)/ Duration (days)	Intensity	Relation to Procedure / Type of Procedure	Causal rel. to Pre-existing condition or Con Med or other non-study procedures	Treatment of AE	Outcome	Comment
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Listing 14.3.4/2 Adverse Events - Subject Listing (All Enrolled Subjects)

Treatment Group: (b) (4)

Unique Subject Identifier/ Age/Race	Attended Steril-ization Procedure/ Attempted Steril-ization/ Rely on Steril-ization	SOC/ Preferred Term/ Reported Term	Start Prior to Index Event/ After Censor/ AEOSI	Serious /Reason	Adverse Event Start Date (Day)/ End Date (Day)/ Duration (days)	Intensity	Relation to Procedure / Type of Procedure	Causal rel. to Pre-existing condition or Con Med or other non-study proce-dures	Treatment of AE	Outcome	Comment
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Listing 14.3.4/2 Adverse Events - Subject Listing (All Enrolled Subjects)

Treatment Group (b) (4)

Unique Subject Identifier/ Age/Race	Attended Steril-ization Procedure/ Attempted Steril-ization/ Rely on Steril-	SOC/ Preferred Term/ Reported Term	Start Prior to Index Event/ After Censor/ AEOSI	Serious /Reason	Adverse Event Start Date (Day)/ End Date (Day)/ Duration (days)	Intensity	Relation to Procedure / Type of Procedure	Causal rel. to Pre-existing condition or Con Med or other non-study proce- dures	Treatment of AE	Outcome	Comment
(b) (4)											

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Listing 14.3.4/2 Adverse Events - Subject Listing (All Enrolled Subjects)

Treatment Group: (b) (4)

Unique Subject Identifier/ Age/Race	Attended Sterilization Procedure/ Attempted Sterilization/ Rely on Sterilization	SOC/ Preferred Term/ Reported Term	Start Prior to Index Event/ After Censor/ AEOSI	Serious /Reason	Adverse Event Start Date (Day)/ End Date (Day)/ Duration (days)	Intensity	Relation to Procedure / Type of Procedure	Causal rel. to Pre-existing condition or Con Med or other non-study procedures	Treatment of AE	Outcome	Comment
(b) (4)											

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Listing 14.3.4/2 Adverse Events - Subject Listing (All Enrolled Subjects)

Treatment Group: (b) (4)

Unique Subject Identifier/ Age/Race	Attended Steril-ization Procedure/ Attempted Steril-ization/ Rely on Steril-ization	SOC/ Preferred Term/ Reported Term	Start Prior to Index Event/ After Censor/ AEOSI	Serious /Reason	Adverse Event Start Date (Day)/ End Date (Day)/ Duration (days)	Intensity	Relation to Procedure / Type of Procedure	Causal rel. to Pre-existing condition or Con Med or other non-study procedures	Treatment of AE	Outcome	Comment
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Listing 14.3.4/2 Adverse Events - Subject Listing (All Enrolled Subjects)

Treatment Group: (b) (4)

Unique Subject Identifier/ Age/Race	Attended Sterilization Procedure/ Attempted Sterilization/ Rely on Sterilization	SOC/ Preferred Term/ Reported Term	Start Prior to Index Event/ After Censor/ AEOSI	Serious /Reason	Adverse Event Start Date (Day)/ End Date (Day)/ Duration (days)	Intensity	Relation to Procedure / Type of Procedure	Causal rel. to Pre-existing condition or Con Med or other non-study procedures	Treatment of AE	Outcome	Comment
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Listing 14.3.4/2 Adverse Events - Subject Listing (All Enrolled Subjects)

Treatment Group (b) (4)

Unique Subject Identifier/ Age/Race	Attended Steril- ization Procedure/ Attempted Steril- ization/ Rely on Steril- ization	SOC/ Preferred Term/ Reported Term	Start Prior to Index Event/ After Censor/ AEOSI	Serious /Reason	Adverse Event Start Date (Day) End Date (Day) Duration (days)	Intensity	Relation to Procedure / Type of Procedure	Causal rel. to Pre-existing condition or Con Med or other non-study proce- dures	Treatment of AE	Outcome	Comment
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(b) (4)





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Listing 14.3.4/2 Adverse Events - Subject Listing (All Enrolled Subjects)

Treatment Group (b) (4)

Unique Subject Identifier/ Age/Race	Attended Sterilization Procedure/ Attempted Sterilization/ Rely on Sterilization	SOC/ Preferred Term/ Reported Term	Start Prior to Index Event/ After Censor/ AEOSI	Serious /Reason	Adverse Event Start Date (Day)/ End Date (Day)/ Duration (days)	Intensity	Relation to Procedure / Type of Procedure	Causal rel. to Pre-existing condition or Con Med or other non-study procedures	Treatment of AE	Outcome	Comment
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Listing 14.3.4/2 Adverse Events - Subject Listing (All Enrolled Subjects)

Treatment Group (b) (4)

Unique Subject Identifier/ Age/Race	Attended Sterilization Procedure/ Attempted Sterilization/ Rely on Sterilization	SOC/ Preferred Term/ Reported Term	Start Prior to Index Event/ After Censor/ AEOSI	Serious /Reason	Adverse Event Start Date (Day)/ End Date (Day)/ Duration (days)	Intensity	Relation to Procedure / Type of Procedure	Causal rel. to Pre-existing condition or Con Med or other non-study procedures	Treatment of AE	Outcome	Comment
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Treatment Group (b) (4)

Unique Subject Identifier/ Age/Race	Attended Sterilization Procedure/ Attempted Sterilization/ Rely on Sterilization	SOC/ Preferred Term/ Reported Term	Start Prior to Index Event/ After Censor/ AEOSI	Adverse Event Start Date (Day)/ End Date (Day)/ Duration (days)	Serious /Reason	Intensity	Relation to Procedure / Type of Procedure	Causal rel. to Pre-existing condition or Con Med or other non-study procedures	Treatment of AE	Outcome	Comment
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Listing 14.3.4/2 Adverse Events - Subject Listing (All Enrolled Subjects)

Treatment Group: (b) (4)

Unique Subject Identifier/ Age/Race	Attended Sterilization Procedure/ Attempted Sterilization/ Rely on Sterilization	SOC/ Preferred Term/ Reported Term	Start Prior to Index Event/ After Censor/ AEOSI	Serious /Reason	Adverse Event Start Date (Day)/ End Date (Day)/ Duration (days)	Intensity	Relation to Procedure / Type of Procedure	Causal rel. to Pre-existing condition or Con Med or other non-study procedures	Treatment of AE	Outcome	Comment
(b) (4)											

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Listing 14.3.4/2 Adverse Events - Subject Listing (All Enrolled Subjects)

Treatment Group (b) (4)

Unique Subject Identifier/ Age/Race	Attended Steril- ization Procedure/ Attempted Steril- ization/ Rely on Steril- ization	SOC/ Preferred Term/ Reported Term	Start Prior to Index Event/ After Censor/ AEOSI	Serious /Reason	Adverse Event Start Date (Day)/ End Date (Day)/ Duration (days)	Intensity	Relation to Procedure	Causal rel. to Pre existing condition or Con Med or other non-study proce- dures	Treatment of AE	Outcome	Comment
(b) (4)											

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Listing 14.3.4/2 Adverse Events - Subject Listing (All Enrolled Subjects)

Treatment Group (b) (4)

Unique Subject Identifier/	Attended Sterilization Procedure/ Attempted Sterilization/ Rely on Sterilization	SOC/ Preferred Term/ Reported Term	Start Prior to Index Event/ After Censor/ AEOSI	Serious /Reason	Adverse Event Start Date (Day)/ End Date (Day)/ Duration (days)	Intensity	Relation to Procedure / Type of Procedure	Causal rel. to Pre-existing condition or Con Med or other non-study procedures	Treatment of AE	Outcome	Comment
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Listing 14.3.4/2 Adverse Events - Subject Listing (All Enrolled Subjects)

Treatment Group: (b) (4)

Unique Subject Identifier/ Age/Race	Attended Sterilization Procedure/ Attempted Sterilization/ Rely on Sterilization	SOC/ Preferred Term/ Reported Term	Start Prior to Index Event/ After Censor/ AEOSI	Serious /Reason	Adverse Event Start Date (Day)/ End Date (Day)/ Duration (days)	Intensity	Relation to Procedure / Type of Procedure	Causal rel. to Pre-existing condition or Con Med or other non-study procedures	Treatment of AE	Outcome	Comment
(b) (4)											

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Listing 14.3.4/2 Adverse Events - Subject Listing (All Enrolled Subjects)

Treatment Group: (b) (4)

Unique Subject Identifier/ Age/Race	Attended Steril- ization Procedure/ Attempted Steril- ization/ Rely on Steril- ization	SOC/ Preferred Term/ Reported Term	Start Prior to Index Event/ After Censor/ AEOSI	Serious /Reason	Adverse Event Start Date (Day)/ End Date (Day)/ Duration (days)	Intensity	Relation to Procedure / Type of Procedure	Causal rel. to Pre- existing condition or Con Med or other non-study proce- dures	Treatment of AE	Outcome	Comment
(b) (4)											

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Listing 14.3.4/2 Adverse Events - Subject Listing (All Enrolled Subjects)

Treatment Group (b) (4)

Unique Subject Identifier/ Age/Race	Attended Steril-ization Procedure/ Attempted Steril-ization/ Rely on Steril-ization	SOC/ Preferred Term/ Reported Term	Start Prior to Index Event/ After Censor/ AEOSI	Serious /Reason	Adverse Event Start Date (Day)/ End Date (Day)/ Duration (days)	Intensity	Relation to Procedure / Type of Procedure	Causal rel. to Pre-existing condition or Con Med or other non-study proce-dures	Treatment of AE	Outcome	Comment
(b) (4)											

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Listing 14.3.4/2 Adverse Events - Subject Listing (All Enrolled Subjects)

Treatment Group: (b) (4)

Unique Subject Identifier/ Age/Race	Attended Sterilization Procedure/ Attempted Sterilization/ Rely on Sterilization	SOC/ Preferred Term/ Reported Term	Start Prior to Index Event/ After Censor/ AEOSI	Serious /Reason	Adverse Event Start Date (Day)/ End Date (Day)/ Duration (days)	Intensiv	Relation to Procedure / Type of Procedure	Causal rel. to Pre-existing condition or Con Med or other non-study proce- dures	Treatment of AE	Outcome	Comment
(b) (4)											

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Listing 14.3.4/2 Adverse Events - Subject Listing (All Enrolled Subjects)

Treatment Group (b) (4)

Unique Subject Identifier/ Age/Race	Attended Sterilization Procedure/ Attempted Sterilization/ Rely on Sterilization	SOC/ Preferred Term/ Reported Term	Start Prior to Index Event/ After Censor/ AEOSI	Serious /Reason	Adverse Event Start Date (Day)/ End Date (Day)/ Duration (days)	Intensity	Relation to Procedure / Type of Procedure	Causal rel. to Pre-existing condition or Con Med or other non-study procedures	Treatment of AE	Outcome	Comment
(b) (4)											

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Listing 14.3.4/2 Adverse Events - Subject Listing (All Enrolled Subjects)

Treatment Group (b) (4)

Unique Subject Identifier/ Age/Race	Attended Steril-ization Procedure/ Attempted Steril-ization/ Rely on Steril-ization	SOC/ Preferred Term/ Reported Term	Start Prior to Index Event/ After Censor/ AEOSI	Serious /Reason	Adverse Event Start Date (Day)/ End Date (Day)/ Duration (days)	Intensity	Relation to Procedure / Type of Procedure	Causal rel. to Pre-existing condition or Con Med or other non-study proce-dures	Treatment of AE	Outcome	Comment
(b) (4)											

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Listing 14.3.4/2 Adverse Events - Subject Listing (All Enrolled Subjects)

Treatment Group (b) (4)

Unique Subject Identifier/ Age/Race	Attended Sterilization Procedure/ Attempted Sterilization/ Rely on Sterilization	SOC/ Preferred Term/ Reported Term	Start Prior to Index Event/ After Censor/ AEOSI	Serious /Reason	Adverse Event Start Date (Day)/ End Date (Day)/ Duration (days)	Intensity	Relation to Procedure / Type of Procedure	Causal rel. to Pre-existing condition or Con Med or other non-study procedures	Treatment of AE	Outcome	Comment
(b) (4)											

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Listing 14.3.4/2 Adverse Events - Subject Listing (All Enrolled Subjects)

Treatment Group: (b) (4)

Unique Subject Identifier/ Age/Race	Attended Sterilization Procedure/ Attempted Sterilization/ Rely on Sterilization	SOC/ Preferred Term/ Reported Term	Start Prior to Index Event/ After Censor/ AEOSI	Serious /Reason	Adverse Event Start Date (Day)/ End Date (Day)/ Duration (days)	Intensity	Relation to Procedure / Type of Procedure	Causal rel. to Pre-existing condition or Con Med or other non-study procedures	Treatment of AE	Outcome	Comment
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Listing 14.3.4/2 Adverse Events - Subject Listing (All Enrolled Subjects)

Treatment Group: (b) (4)

Unique Subject Identifier/ Age/Race	Attended Steril-ization Procedure/ Attempted Steril-ization/ Rely on Steril-ization	SOC/ Preferred Term/ Reported Term	Start Prior to Index Event/ After Censor/ AEOSI	Serious /Reason	Adverse Event Start Date (Day)/ End Date (Day)/ Duration (days)	Intensity	Relation to Procedure / Type of Procedure	Causal rel. to Pre-existing condition or Con Med or other non-study proce- dures	Treatment of AE	Outcome	Comment
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Listing 14.3.4/2 Adverse Events - Subject Listing (All Enrolled Subjects)

Treatment Group: (b) (4)

Unique Subject Identifier/ Age/Race	Attended Sterilization Procedure/ Attempted Sterilization/ Rely on Sterilization	SOC/ Preferred Term/ Reported Term	Start Prior to Index Event/ After Censor/ AEOSI	Serious /Reason	Adverse Event Start Date (Day)/ End Date (Day)/ Duration (days)	Intensity	Relation to Procedure / Type of Procedure	Causal rel. to Pre-existing condition or Con Med or other non-study procedures	Treatment of AE	Outcome	Comment
(b) (4)											

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Listing 14.3.4/2 Adverse Events - Subject Listing (All Enrolled Subjects)

Treatment Group: (b) (4)

Unique Subject Identifier/ Age/Race	Attended Sterilization Procedure/ Attempted Sterilization/ Rely on Sterilization	SOC/ Preferred Term/ Reported Term	Start Prior to Index Event/ After Censor/ AEOSI	Serious /Reason	Adverse Event Start Date (Day)/ End Date (Day)/ Duration (days)	Intensity	Relation to Procedure / Type of Procedure	Causal rel. to Pre-existing condition or Con Med or other non-study procedures	Treatment of AE	Outcome	Comment
(b) (4)											

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Listing 14.3.4/2 Adverse Events - Subject Listing (All Enrolled Subjects)

Treatment Group (b) (4)

Unique Subject Identifier/ Age/Race	Attended Sterilization Procedure/ Attempted Sterilization/ Rely on Sterilization	SOC/ Preferred Term/ Reported Term	Start Prior to Index Event/ After Censor/ AEOSI	Serious /Reason	Adverse Event Start Date (Day)/ End Date (Day)/ Duration (days)	Intensity	Relation to Procedure	Causal rel. to Pre-existing condition or Con Med or other non-study procedures	Treatment of AE	Outcome	Comment
(b) (4)											

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Listing 14.3.4/2 Adverse Events - Subject Listing (All Enrolled Subjects)

Treatment Group (b) (4)

Unique Subject Identifier/ Age/Race	Attended Sterilization Procedure/ Attempted Sterilization/ Rely on Sterilization	SOC/ Preferred Term/ Reported Term	Start Prior to Index Event/ After Censor/ AEOSI	Serious /Reason	Adverse Event Start Date (Day)/ End Date (Day)/ Duration (days)	Intensity	Relation to Procedure / Type of Procedure	Causal rel. to Pre-existing condition or Con Med or other non-study procedures	Treatment of AE	Outcome	Comment
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Treatment Group: (b) (4)

Unique Subject Identifier/ Age/Race	Attended Sterilization Procedure/ Attempted Sterilization/ Rely on Sterilization	SOC/ Preferred Term/ Reported Term	Start Prior to Index Event/ After Censor/ AEOSI	Serious /Reason	Adverse Event Start Date (Day)/ End Date (Day)/ Duration (days)	Intensity	Relation to Procedure / Type of Procedure	Causal rel. to Pre-existing condition or Con Med or other non-study procedures	Treatment of AE	Outcome	Comment
(b) (4)											

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Listing 14.3.4/2 Adverse Events - Subject Listing (All Enrolled Subjects)

Treatment Group (b) (4)

Unique Subject Identifier/ Age/Race	Attended Steril-ization Procedure/ Attempted Steril-ization/ Rely on Steril-ization	SOC/ Preferred Term/ Reported Term	Start Prior to Index Event/ After Censor/ AEOSI	Serious /Reason	Adverse Event Start Date (Day)/ End Date (Day)/ Duration (days)	Intensity	Relation to Procedure / Type of Procedure	Causal rel. to Pre-existing condition or Con Med or other non-study proce-dures	Treatment of AE	Outcome	Comment
(b) (4)											

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Listing 14.3.4/2 Adverse Events - Subject Listing (All Enrolled Subjects)

Treatment Group: (b) (4)

Unique Subject Identifier/ Age/Race	Attended Sterilization Procedure/ Attempted Sterilization/ Rely on Sterilization	SOC/ Preferred Term/ Reported Term	Start Prior to Index Event/ After Censor/ AEOSI	Adverse Event Start Date (Day)/ End Date (Day)/ Duration (days)	Serious /Reason	Intensity	Relation to Procedure / Type of Procedure	Causal rel. to Pre-existing condition or Con Med or other non-study procedures	Treatment of AE	Outcome	Comment
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Treatment Group: (b) (4)

Unique Subject Identifier/ Age/Race	Attended Sterilization Procedure/ Attempted Sterilization/ Rely on Sterilization	SOC/ Preferred Term/ Reported Term	Start to Index Event/ After Censor/ AEOSI	Serious /Reason	Adverse Event Start Date (Day)/ End Date (Day)/ Duration (days)	Intensity	Relation to Procedure / Type of Procedure	Causal rel. to Pre-existing condition or Con Med or other non-study procedures	Treatment of AE	Outcome	Comment
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Treatment Group: (b) (4)

Unique Subject Identifier/ Age/Race	Attended Sterilization Procedure/ Attempted Sterilization/ Rely on Sterilization	SOC/ Preferred Term/ Reported Term	Start Prior to Index Event/ After Censor/ AEOSI	Serious /Reason	Adverse Event Start Date (Day/ End Date (Day/ Duration (days)	Intensity	Relation to Procedure / Type of Procedure	Causal rel. to Pre-existing condition or Con Med or other non-study procedures	Treatment of AE	Outcome	Comment
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Listing 14.3.4/2 Adverse Events - Subject Listing (All Enrolled Subjects)

Treatment Group (b) (4)

Unique Subject Identifier/ Age/Race	Attended Sterilization Procedure/ Attempted Sterilization/ Rely on Sterilization	SOC/ Preferred Term/ Reported Term	Start Prior to Index Event/ After Censor/ AEOSI	Serious Reason	Adverse Event Start Date (Day)/ End Date (Day)/ Duration (days)	Intensity	Relation to Procedure/ Type of Procedure	Causal rel. to Pre-existing condition or Con Med or other non-study procedures	Treatment of AE	Outcome	Comment
(b) (4)											

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Listing 14.3.4/2 Adverse Events - Subject Listing (All Enrolled Subjects)

Treatment Group: (b) (4)

Unique Subject Identifier/ Age/Race	Attended Sterilization Procedure/ Attempted Sterilization/ Rely on Sterilization	SOC/ Preferred Term/ Reported Term	Start Prior to Index Event/ After Censor/ AEOSI	Serious /Reason	Adverse Event Start Date (Day)/ End Date (Day)/ Duration (days)	Intensity	Relation to Procedure / Type of Procedure	Causal rel. to Pre-existing condition or Con Med or other non-study procedures	Treatment of AE	Outcome	Comment
(b) (4)											

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Listing 14.3.4/2 Adverse Events - Subject Listing (All Enrolled Subjects)

Treatment Group (b) (4)

Unique Subject Identifier/ Age/Race	Attended Sterilization Procedure/ Attempted Sterilization/ Rely on Sterilization	SOC/ Preferred Term/ Reported Term	Start Prior to Index Event/ After Censor/ AEOSI	Serious /Reason	Adverse Event Start Date (Day)/ End Date (Day)/ Duration (days)	Intensity	Relation to Procedure / Type of Procedure	Causal rel. to Pre-existing condition or Con Med or other non-study procedures	Treatment of AE	Outcome	Comment
(b) (4)											

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Listing 14.3.4/2 Adverse Events - Subject Listing (All Enrolled Subjects)

Treatment Group: (b) (4)

Unique Subject Identifier/ Age/Race	Attended Sterilization Procedure/ Attempted Sterilization/ Rely on Sterilization	SOC/ Preferred Term/ Reported Term	Start Prior to Index Event/ After Censor/ AEOSI	Serious /Reason	Adverse Event Start Date (Day) End Date (Day) Duration (days)	Intensity	Relation to Procedure / Type of Procedure	Causal rel. to Pre-existing condition or Con Med or other non-study procedures	Treatment of AE	Comment
(b) (4)										

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Listing 14.3.4/2 Adverse Events - Subject Listing (All Enrolled Subjects)

Treatment Group: (b) (4)

Unique Subject Identifier/ Age/Race	Attended Sterilization Procedure/ Attempted Sterilization/ Rely on Sterilization	SOC/ Preferred Term/ Reported Term	Start Prior to Index Event/ After Censor/ AEOSI	Serious /Reason	Adverse Event Start Date (Day)/ End Date (Day)/ Duration (days)	Intensity	Relation to Procedure / Type of Procedure	Causal rel. to Pre-existing condition or Con Med or other non-study procedures	Treatment of AE	Outcome	Comment
(b) (4)											

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Listing 14.3.4/2 Adverse Events - Subject Listing (All Enrolled Subjects)

Treatment Group (b) (4)

Unique Subject Identifier/ Age/Race	Attended Sterilization Procedure/ Attempted Sterilization/ Rely on Sterilization	SOC/ Preferred Term/ Reported Term	Start Prior to Index Event/ After Censor/ AE/OSI	Serious /Reason	Adverse Event Start Date (Day)/ End Date (Day)/ Duration (days)	Intensity	Relation to Procedure / Type of Procedure	Causal rel. to Pre-existing condition or Con Med or other non-study procedures	Treatment of AE	Outcome	Comment
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Listing 14.3.4/2 Adverse Events - Subject Listing (All Enrolled Subjects)

Treatment Group (b) (4)

Unique Subject Identifier/ Age/Race	Attended Sterilization Procedure/ Attempted Sterilization/ Rely on Sterilization	SOC/ Preferred Term/ Reported Term	Start Prior to Index Event/ After Censor/AEOSI	Serious Reason	Adverse Event Start Date (Day)/ End Date (Day)/ Duration (days)	Intensity	Relation to Procedure/ Type of Procedure	Causal rel. to Pre-existing condition or Con Med or other non-study procedures	Treatment of AE
(b) (4)									

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Listing 14.3.4/2 Adverse Events - Subject Listing (All Enrolled Subjects)

Treatment Group: (b) (4)

Unique Subject Identifier/ Age/Race	Attended Sterilization Procedure/ Attempted Sterilization/ Rely on Sterilization	SOC/ Preferred Term/ Reported Term	Start Prior to Index Event/ After Censor/ AEOSI	Serious /Reason	Adverse Event Start Date (Day) End Date (Day) Duration (days)	Intensity	Relation to Procedure / Type of Procedure	Causal rel. to Pre-existing condition or Con Med or other non-study procedures	Treatment of AE	Outcome	Comment
(b) (4)											

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Listing 14.3.4/2 Adverse Events - Subject Listing (All Enrolled Subjects)

Treatment Group (b) (4)

Unique Subject Identifier/ Age/Race	Attended Sterilization Procedure/ Attempted Sterilization/ Rely on Sterilization	SOC/ Preferred Term/ Reported Term	Start Prior to Index Event/ After Censor/ AEOSI	Serious /Reason	Adverse Event Start Date (Day)/ End Date (Day)/ Duration (days)	Intensity	Relation to Procedure/ Type of Procedure	Causal rel. to Pre-existing condition or Con Med or other non-study procedures	Treatment of AE	Outcome	Comment
(b) (4)											

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Listing 14.3.4/2 Adverse Events - Subject Listing (All Enrolled Subjects)

Treatment Group (b) (4)

Unique Subject Identifier/ Age/Race	Attended Sterilization Procedure/ Attempted Sterilization/ Rely on Sterilization	SOC/ Preferred Term/ Reported Term	Start Prior to Index Event/ After Censor/ AEOSI	Serious /Reason	Adverse Event Start Date (Day)/ End Date (Day)/ Duration (days)	Intensity	Relation to Procedure / Type of Procedure	Causal rel. to Pre-existing condition or Con Med or other non-study procedures	Treatment of AE	Outcome	Comment
(b) (4)											

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Listing 14.3.4/2 Adverse Events - Subject Listing (All Enrolled Subjects)

Treatment Group (b) (4)

Unique Subject Identifier/	Attended Sterilization Procedure/ Attempted Sterilization/ Rely on Sterilization	SOC/ Preferred Term/ Reported Term	Start Prior to Index Event/ After Censor/ AEOSI	Serious /Reason	Adverse Event Start Date (Day/ End Date (Day/ Duration (days)	Intensity	Relation to Procedure / Type of Procedure	Causal rel. to Pre existing condition or Con Med or other non-study procedures	Treatment of AE	Outcome	Comment
(b) (4)											

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Listing 14.3.4/2 Adverse Events - Subject Listing (All Enrolled Subjects)

Treatment Group (b) (4)

Unique Subject Identifier/	Attended Sterilization Procedure/ Attempted Sterilization/ Rely on Steril-	SOC/ Preferred Term/ Reported	Start Prior to Index Event/ After Censor/ Serious	Adverse Event Start Date (Day)/ End Date (Day)/ Duration	Relation to Procedure / Type of	Causal rel. to Pre-existing condition or Con Med or other non-study proce-	Treatment
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Listing 14.3.4/2 Adverse Events - Subject Listing (All Enrolled Subjects)

Treatment Group (b) (4)

Unique Subject Identifier/ Age/Race	Attended Sterilization Procedure/ Attempted Sterilization/ Rely on Sterilization	SOC/ Preferred Term/ Reported Term	Start Prior to Index Event/ After Censor/AEOSI	Serious /Reason	Adverse Event Start Date (Day)/ End Date (Day)/ Duration (days)	Intensity	Relation to Procedure/ Type of Procedure	Causal rel. to Pre-existing condition or Con Med or other non-study procedures	Treatment of AE	Outcome	Comment
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Listing 14.3.4/2 Adverse Events - Subject Listing (All Enrolled Subjects)

Treatment Group: (b) (4)

Unique Subject Identifier/ Age/Race	Attended Sterilization Procedure/ Attempted Sterilization/ Rely on Sterilization	SOC/ Preferred Term/ Reported Term	Start Prior to Index Event/ After Censor/AEOSI	Serious /Reason	Adverse Event Start Date (Day)/ End Date (Day)/ Duration (days)	Intensity	Relation to Procedure/ Type of Procedure	Causal rel. to Pre-existing condition or Con Med or other non-study procedures	Treatment of AE	Outcome	Comment
(b) (4)											

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Listing 14.3.4/2 Adverse Events - Subject Listing (All Enrolled Subjects)

Treatment Group: (b) (4)

Unique Subject Identifier/ Age/Race	Attended Sterilization Procedure/ Attempted Sterilization/ Rely on Sterilization	SOC/ Preferred Term/ Reported Term	Start Prior to Index Event/ After Censor/ AEOSI	Serious /Reason	Adverse Event Start Date (Day)/ End Date (Day)/ Duration (days)	Intensity	Relation to Procedure / Type of Procedure	Causal rel. to Pre-existing condition or Con Med or other non-study procedures	Treatment of AE	Outcome	Comment
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Listing 14.3.4/2 Adverse Events - Subject Listing (All Enrolled Subjects)

Treatment Group: (b) (4)

Unique Subject Identifier/ Age/Race	Attended Steril-ization Procedure/ Attempted Steril-ization/ Rely on Steril-ization	SOC/ Preferred Term/ Reported Term	Start Prior to Index Event/ After Censor/ AEOSI	Serious /Reason	Adverse Event Start Date (Day)/ End Date (Day)/ Duration (days)	Intensity	Relation to Procedure / Type of Procedure	Causal rel. to Pre-existing condition or Con Med or other non-study proce-dures	Treatment of AE	Outcome	Comment
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Listing 14.3.4/2 Adverse Events - Subject Listing (All Enrolled Subjects)

Treatment Group (b) (4)

Unique Subject Identifier/ Age/Race	Attended Sterilization Procedure/ Attempted Sterilization/ Rely on Sterilization	SOC/ Preferred Term/ Reported Term	Start Prior to Index Event/ After Censor/ AEOSI	Serious /Reason	Adverse Event Start Date (Day)/ End Date (Day)/ Duration (days)	Intensity	Relation to Procedure / Type of Procedure	Causal rel. to Pre-existing condition or Con other non-study procedures	Treatment of AE	Outcome	Comment
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Listing 14.3.4/2 Adverse Events - Subject Listing (All Enrolled Subjects)

Treatment Group: (b) (4)

Unique Subject Identifier/	Attended Sterilization Procedure/ Attempted Sterilization/ Rely on Steril-	SOC/ Preferred Term/ Reported	Start Prior to Index Event/ After Censor/ Serious	Adverse Event Start Date (Day)/ End Date (Day)/ Duration	Relation to Procedure / Type of	Causal rel. to Pre-existing condition or Con Med or other non-study proce-	Treatment
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Listing 14.3.4/2 Adverse Events - Subject Listing (All Enrolled Subjects)

Treatment Group (b) (4)

Unique Subject Identifier/ Age/Race	Attended Sterilization Procedure/ Attempted Sterilization/ Rely on Sterilization	SOC/ Preferred Term/ Reported Term	Start Prior to Index Event/ After Censor/ AEOSI	Serious /Reason	Adverse Event Start Date (Day)/ End Date (Day)/ Duration (days)	Intensity	Relation to Procedure / Type of Procedure	Causal rel. to Pre-existing condition or Con Med or other non-study procedures	Treatment of AE	Outcome	Comment
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Listing 14.3.4/2 Adverse Events - Subject Listing (All Enrolled Subjects)

Treatment Group (b) (4)

Unique Subject Identifier/ Age/Race	Attended Steril-ization Procedure/ Attempted Steril-ization/ Rely on Steril-ization	SOC/ Preferred Term/ Reported Term	Start Prior to Index Event/ After Censor/ AEOSI	Serious /Reason	Adverse Event Start Date (Day)/ End Date (Day)/ Duration (days)	Intensity	Relation to Procedure / Type of Procedure	Causal rel. to Pre-existing condition or Con other non-study proce-dures	Treatment of AE	Outcome	Comment
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Listing 14.3.4/2 Adverse Events - Subject Listing (All Enrolled Subjects)

Treatment Group: (b) (4)

Unique Subject Identifier/	Attended Sterilization Procedure/ Attempted Sterilization/ Rely on Steril-	SOC/ Preferred Term/ Reported	Start Prior to Index Event/ After Censor/	Serious /Reason	Adverse Event Start Date (Day)/ End Date (Day)/ Duration (days)	Intensiv	Relation to Procedure / Type of Procedure	Causal rel. to Pre-existing condition or Con Med or other non-study procedures	Treatment of AE	Outcome	Comment
(b) (4)											

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Listing 14.3.4/2 Adverse Events - Subject Listing (All Enrolled Subjects)

Treatment Group (b) (4)

Unique Subject Identifier/ Age/Race	Attended Steril-ization Procedure/ Attempted Steril-ization/ Rely on Steril-ization	SOC/ Preferred Term/ Reported Term	Start Prior to Index Event/ After Censor/ AFOSI	Adverse Event Start Date (Day)/ End Date (Day)/ Duration (days)	Serious /Reason	Intensity	Relation to Procedure / Type of Procedure	Causal rel. to Pre-existing condition or Con Med or other non-study proce-dures	Treatment of AE	Outcome	Comment
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Listing 14.3.4/2 Adverse Events - Subject Listing (All Enrolled Subjects)

Treatment Group: (b) (4)

Unique Subject Identifier / Age/Race	Attended Sterilization Procedure/ Attempted Sterilization/ Rely on Sterilization	SOC/ Preferred Term/ Reported Term	Start Prior to Index Event/ After Censor/ AEOSI	Serious /Reason	Adverse Event Start Date (Day)/ End Date (Day)/ Duration (days)	Intensity	Relation to Procedure / Type of Procedure	Causal rel. to Pre-existing condition or Con Med or other non-study procedures	Treatment of AE	Outcome	Comment
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Listing 14.3.4/2 Adverse Events - Subject Listing (All Enrolled Subjects)

Treatment Group (b) (4)

Unique Subject Identifier/ Age/Race	Attended Sterilization Procedure/ Attempted Sterilization/ Rely on Sterilization	SOC/ Preferred Term/ Reported Term	Start Prior to Index Event/ After Censor/ AE/OSI	Serious /Reason	Adverse Event Start Date (Day)/ End Date (Day)/ Duration (days)	Intensity	Relation to Procedure / Type of Procedure	Causal rel. to Pre-existing condition or Con Med or other non study procedures	Treatment of AE	Outcome	Comment
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Listing 14.3.4/2 Adverse Events - Subject Listing (All Enrolled Subjects)

Treatment Group (b) (4)

Unique Subject Identifier/ Age/Race	Attended Sterilization Procedure/ Attempted Sterilization/ Rely on Sterilization	SOC/ Preferred Term/ Reported Term	Start Prior to Index Event/ After Censor/ AEOSI	Serious /Reason	Adverse Event Start Date (Day)/ End Date (Day)/ Duration (days)	Intensity	Relation to Procedure / Type of Procedure	Causal rel. to Pre-existing condition or Con Med or other non-study procedures	Treatment of AE	Outcome	Comment
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Listing 14.3.4/2 Adverse Events - Subject Listing (All Enrolled Subjects)

Treatment Group: (b) (4)

Unique Subject Identifier/	Attended Sterilization Procedure/ Attempted Sterilization/ Rely on Sterilization	SOC/ Preferred Term/ Reported Term	Start Prior to Index Event/ After Censor/ AEOSI	Serious /Reason	Adverse Event Start Date (Day)/ End Date (Day)/ Duration (days)	Intensity	Relation to Procedure / Type of Procedure	Causal rel. to Pre-existing condition or Con Med or other non-study procedures	Treatment of AE	Outcome	Comment
(b) (4)											

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Listing 14.3.4/2 Adverse Events - Subject Listing (All Enrolled Subjects)

Treatment Group: (b) (4)

Unique Subject Identifier/ Age/Race	Attended Sterilization Procedure/ Attempted Sterilization/ Rely on Sterilization	SOC/ Preferred Term/ Reported Term	Start Prior to Index Event/ After Censor/ AEOSI	Serious /Reason	Adverse Event Start Date (Day)/ End Date (Day)/ Duration (days)	Intensity	Relation to Procedure / Type of Procedure	Causal rel. to Pre-existing condition or Con Med or other non-study procedures	Treatment of AE	Outcome	Comment
(b) (4)											

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Listing 14.3.4/2 Adverse Events - Subject Listing (All Enrolled Subjects)

Treatment Group: (b) (4)

Unique Subject Identifier/ Age/Race	Attended Sterilization Procedure/ Attempted Sterilization/ Rely on Sterilization	SOC/ Preferred Term/ Reported Term	Start Prior to Index Event/ After Censor/ AEOSI	Serious /Reason	Adverse Event Start Date (Day)/ End Date (Day)/ Duration (days)	Intensity	Relation to Procedure / Type of Procedure	Causal rel. to Pre-existing condition or Con Med or other non-study procedures	Treatment of AE	Outcome	Comment
(b) (4)											

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Listing 14.3.4/2 Adverse Events - Subject Listing (All Enrolled Subjects)

Treatment Group: (b) (4)

Unique Subject Identifier/	Attended Sterilization Procedure/ Attempted Sterilization/ Rely on Steril-	SOC/ Preferred Term/ Reported	Start Prior to Index Event/ After Censor/ AFOSI	Serious /Reason	Adverse Event Start Date (Day)/ End Date (Day)/ Duration (days)	Intensity	Relation to Procedure / Type of Procedure	Causal rel. to Pre-existing condition or Con Med or other non-study procedures	Treatment of AE	Outcome	Comment
(b) (4)											

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Listing 14.3.4/2 Adverse Events - Subject Listing (All Enrolled Subjects)

Treatment Group: (b) (4)

Unique Subject Identifier/ Age/Race	Attended Sterilization Procedure/ Attempted Sterilization/ Rely on Sterilization	SOC/ Preferred Term/ Reported Term	Start Prior to Index Event/ After Censor/ AEOSI	Serious /Reason	Adverse Event Start Date (Day) End Date (Day) Duration (days)	Intensity	Relation to Procedure / Type of Procedure	Causal rel. to Pre-existing condition or Con Med or other non-study procedures	Treatment of AE	Outcome	Comment
(b) (4)											

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Treatment Group: (b) (4)

Unique Subject Identifier/ Age/Race	Attended Sterilization Procedure/ Attempted Sterilization/ Rely on Sterilization	SOC/ Preferred Term/ Reported Term	Start Prior to Index Event/ After Censor/ AEOSI	Serious /Reason	Adverse Event Start Date (Day)/ End Date (Day)/ Duration (days)	Intensity	Relation to Procedure / Type of Procedure	Causal rel. to Pre-existing condition or Con Med or other non-study procedures	Treatment of AE	Outcome	Comment
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Treatment Group: (b) (4)

Unique Subject Identifier/ Age/Race	Attended Sterilization Procedure/ Attempted Sterilization/ Rely on Sterilization	SOC/ Preferred Term/ Reported Term	Start Prior to Index Event/ After Censor/ AEOSI	Serious /Reason	Adverse Event Start Date (Day)/ End Date (Day)/ Duration (days)	Intensity	Relation to Procedure / Type of Procedure	Causal rel. to Pre-existing condition or Con Med or other non-study procedures	Treatment of AE	Outcome	Comment
(b) (4)											

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Listing 14.3.4/2 Adverse Events - Subject Listing (All Enrolled Subjects)

Treatment Group: (b) (4)

Unique Subject Identifier/ Age/Race	Attended Steril- ization Procedure/ Attempted Steril- ization/ Rely on Steril- ization	SOC/ Preferred Term/ Reported Term	Start Prior to Index Event/ After Censor/ AEOSI	Serious /Reason	Adverse Event Start Date (Day)/ End Date (Day)/ Duration (days)	Intensity	Relation to Procedure / Type of Procedure	Causal rel. to Pre-existing condition or Con Med or other non-study proce- dures	Treatment of AE	Outcome	Comment
(b) (4)											

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Listing 14.3.4/2 Adverse Events - Subject Listing (All Enrolled Subjects)

Treatment Group: (b) (4)

Unique Subject Identifier/	Attended Sterilization Procedure/ Attempted Sterilization/ Rely on Sterilization	SOC/ Preferred Term/ Reported Term	Start Prior to Index Event/ After Censor/ AFOSI	Serious /Reason	Adverse Event Start Date (Day)/ End Date (Day)/ Duration (days)	Intensity	Relation to Procedure / Type of Procedure	Causal rel. to Pre-existing condition or Con Med or other non-study procedures	Treatment of AE	Outcome	Comment
(b) (4)											

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Listing 14.3.4/2 Adverse Events - Subject Listing (All Enrolled Subjects)

Treatment Group: (b) (4)

Unique Subject Identifier/ Age/Race	Attended Sterilization Procedure/ Attempted Sterilization/ Rely on Sterilization	SOC/ Preferred Term/ Reported Term	Start Prior to Index Event/ After Censor/ AEOSI	Serious /Reason	Adverse Event Start Date (Day)/ End Date (Day)/ Duration (days)	Intensity	Relation to Procedure / Type of Procedure	Causal rel. to Pre-existing condition or Con Med or other non-study procedures	Treatment of AE	Outcome	Comment
(b) (4)											

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Listing 14.3.4/2 Adverse Events - Subject Listing (All Enrolled Subjects)

Treatment Group (b)(4)

Unique Subject Identifier/ Age/Race	Attended Sterilization Procedure/ Attempted Sterilization/ Rely on Sterilization	SOC/ Preferred Term/ Reported Term	Start Prior to Index Event/ After Censor/ AEOSI	Serious /Reason	Adverse Event Start Date (Day)/ End Date (Day)/ Duration (days)	Intensity	Relation to Procedure / Type of Procedure	Causal rel. to Pre-existing condition or Con Med or other non-study procedures	Treatment of AE	Outcome	Comment
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Listing 14.3.4/2 Adverse Events - Subject Listing (All Enrolled Subjects)

Treatment Group: (b) (4)

Unique Subject Identifier/	Attended Sterilization Procedure/ Attempted Sterilization/ Rely on Sterilization	SOC/ Preferred Term/ Reported Term	Start Prior to Index Event/ After Censor/ AFOSI	Serious /Reason	Adverse Event Start Date (Day)/ End Date (Day)/ Duration (days)	Intensity	Relation to Procedure / Type of Procedure	Causal rel. to Pre-existing condition or Con Med or other non-study procedures	Treatment of AE	Outcome	Comment
(b) (4)											

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Listing 14.3.4/2 Adverse Events - Subject Listing (All Enrolled Subjects)

Treatment Group (b) (4)

Unique Subject Identifier/ Age/Race	Attended Sterilization Procedure/ Attempted Sterilization/ Rely on Sterilization	SOC/ Preferred Term/ Reported Term	Start Prior to Index Event/ After Censor/ AEOSI	Serious /Reason	Adverse Event Start Date (Day)/ End Date (Day)/ Duration (days)	Intensity	Relation to Procedure	Causal rel. to Pre-existing condition or Con Med or other non-study procedures	Treatment of AE	Outcome	Comment
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Listing 14.3.4/2 Adverse Events - Subject Listing (All Enrolled Subjects)

Treatment Group (b) (4)

Unique Subject Identifier/ Age/Race	Attended Steril- ization Procedure/ Attempted Steril- ization/ Rely on Steril- ization	SOC/ Preferred Term/ Reported Term	Start Prior to Index Event/ After Censor/ AEOSI	Serious /Reason	Adverse Event Start Date (Day)/ End Date (Day)/ Duration (days)	Intensity	Relation to Procedure / Type of Procedure	Causal rel. to Pre- existing condition or Con Med or other non-study proce- dures	Treatment of AE	Outcome	Comment
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Treatment Group: (b) (4)

Unique Subject Identifier/ Age/Race	Attended Sterilization Procedure/ Attempted Sterilization/ Rely on Sterilization	SOC/ Preferred Term/ Reported Term	Start Prior to Index Event/ After Censor/ AFOSI	Adverse Event Start Date (Day)/ End Date (Day)/ Duration (days)	Relation to Procedure / Type of	Causal rel. to Pre-existing condition or Con Med or other non-study proce- Treatment
(b) (4)						

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Listing 14.3.4/2 Adverse Events - Subject Listing (All Enrolled Subjects)

Treatment Group (b) (4)

Unique Subject Identifier/ Age/Race	Attended Steril-ization Procedure/ Attempted Steril-ization/ Rely on Steril-ization	SOC/ Preferred Term/ Reported Term	Start Prior to Index Event/ After Censor/ AEOSI	Serious /Reason	Adverse Event Start Date (Day)/ End Date (Day)/ Duration (days)	Intensity	Relation to Procedure / Type of Procedure	Causal rel. to Pre-existing condition or Con other non study proce- dures	Treatment of AE	Outcome	Comment
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Listing 14.3.4/2 Adverse Events - Subject Listing (All Enrolled Subjects)

Treatment Group (b) (4)

Unique Subject Identifier/ Age/Race	Attended Sterilization Procedure/ Attempted Sterilization/ Rely on Sterilization	SOC/ Preferred Term/ Reported Term	Start Prior to Index Event/ After Censor/ AEOSI	Serious /Reason	Adverse Event Start Date (Day)/ End Date (Day)/ Duration (days)	Intensity	Relation to Procedure / Type of Procedure	Causal rel. to Pre-existing condition or Con Med or other non-study procedures	Treatment of AE	Outcome	Comment
(b) (4)											



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Listing 14.3.4/2 Adverse Events - Subject Listing (All Enrolled Subjects)

Treatment Group (b) (4)

Unique Subject Identifier/ Age/Race	Attended Sterilization Procedure/ Attempted Sterilization/ Rely on Sterilization	SOC/ Preferred Term/ Reported Term	Start Prior to Index Event/ After Censor/ AEOSI	Serious /Reason	Adverse Event Start Date (Day)/ End Date (Day)/ Duration (days)	Intensity	Relation to Procedure / Type of Procedure	Causal rel. to Pre-existing condition or Con Med or other non-study procedures	Treatment of AE	Outcome	Comment
(b) (4)											

Footnotes please refer to the last page.



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Listing 14.3.4/2 Adverse Events - Subject Listing (All Enrolled Subjects)

Treatment Group (b) (4)

Unique Subject Identifier/ Age/Race	Attended Sterilization Procedure/ Attempted Sterilization/ Rely on Sterilization	SOC/ Preferred Term/ Reported Term	Start Prior to Index Event/ After Censor/ AEOSI	Serious Reason	Adverse Event Start Date (Day)/ End Date (Day)/ Duration (days)	Intensity	Relation to Procedure / Type of Procedure	Causal rel. to Pre-existing condition or Con Med or other non-study procedures	Treatment of AE	Outcome	Comment
(b) (4)											

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Listing 14.3.4/2 Adverse Events - Subject Listing (All Enrolled Subjects)

Treatment Group (b) (4)

Unique Subject Identifier/ Age/Race	Attended Sterilization Procedure/ Attempted Sterilization/ Rely on Sterilization	SOC/ Preferred Term/ Reported Term	Start Prior to Index Event/ After Censor/ AEOSI	Serious /Reason	Adverse Event Start Date (Day)/ End Date (Day)/ Duration (days)	Intensity	Relation to Procedure / Type of Procedure	Causal rel. to Pre-existing condition or Con other non study procedures	Treatment of AE	Outcome	Comment
(b) (4)											

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Listing 14.3.4/2 Adverse Events - Subject Listing (All Enrolled Subjects)

Treatment Group (b) (4)

Unique Subject Identifier/	Attended Sterilization Procedure/ Attempted Sterilization/ Rely on Steril-	SOC/ Preferred Term/ Reported Term	Start Prior to Index Event/ After Censor/ AFOSI	Adverse Event Start Date (Day)/ End Date (Day)/ Duration (days)	Serious (Reason)	Intensity	Relation to Procedure / Type of Procedure	Causal rel. to Pre-existing condition or Con Med or other non-study procedures	Treatment of AE	Outcome	Comment
(b) (4)											

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Listing 14.3.4/2 Adverse Events - Subject Listing (All Enrolled Subjects)

Treatment Group: (b) (4)

Unique Subject Identifier/ Age/Race	Attended Sterilization Procedure/ Attempted Sterilization/ Rely on Sterilization	SOC/ Preferred Term/ Reported Term	Start Prior to Index Event/ After Censor/ AEOSI	Adverse Event Start Date (Day)/ End Date (Day)/ Duration (days)	Serious /Reason	Intensity	Relation to Procedure / Type of Procedure	Causal rel. to Pre-existing condition or Con Med or other non-study procedures	Treatment of AE	Outcome	Comment
(b) (4)											

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Listing 14.3.4/2 Adverse Events - Subject Listing (All Enrolled Subjects)

Treatment Group: (b) (4)

Unique Subject Identifier/ Age/Race	Attended Sterilization Procedure/ Attempted Sterilization/ Rely on Sterilization	SOC/ Preferred Term/ Reported Term	Start Prior to Index Event/ After Censor/ AEOSI	Serious /Reason	Adverse Event Start Date (Day)/ End Date (Day)/ Duration (days)	Intensity	Relation to Procedure / Type of Procedure	Causal rel. to Pre-existing condition or Con Med or other non-study procedures	Treatment of AE	Outcome	Comment
(b) (4)											

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Listing 14.3.4/2 Adverse Events - Subject Listing (All Enrolled Subjects)

Treatment Group (b) (4)

Unique Subject Identifier/ Age/Race	Attended Sterilization Procedure/ Attempted Sterilization/ Rely on Sterilization	SOC/ Preferred Term/ Reported Term	Start Prior to Index Event/ After Censor/ AEOSI	Serious /Reason	Adverse Event Start Date (Day)/ End Date (Day)/ Duration (days)	Intensity	Relation to Procedure / Type of Procedure	Causal rel. to Pre-existing condition or Con Med or other non-study procedures	Treatment of AE	Outcome	Comment
(b) (4)											

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Listing 14.3.4/2 Adverse Events - Subject Listing (All Enrolled Subjects)

Treatment Group (b) (4)

Unique Subject Identifier/ Age/Race	Attended Sterilization Procedure/ Attempted Sterilization/ Rely on Sterilization	SOC/ Preferred Term/ Reported Term	Start Prior to Index Event/ After Censor/ AEOSI	Serious /Reason	Adverse Event Start Date (Day)/ End Date (Day)/ Duration (days)	Intensity	Relation to Procedure / Type of Procedure	Causal rel. to Pre-existing condition or Con Med or other non-study procedures	Treatment of AE	Outcome	Comment
(b) (4)											

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Listing 14.3.4/2 Adverse Events - Subject Listing (All Enrolled Subjects)

Treatment Group (b) (4)

Unique Subject Identifier/ Age/Race	Attended Sterilization Procedure/ Attempted Sterilization/ Rely on Sterilization	SOC/ Preferred Term/ Reported Term	Start Prior to Index Event/ After Censor/AEOSI	Serious /Reason	Adverse Event Start Date (Day)/ End Date (Day)/ Duration (days)	Intensity	Relation to Procedure / Type of Procedure	Causal rel. to Pre-existing condition or Con Med or other non-study procedures	Treatment of AE	Outcome	Comment
(b) (4)											

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Listing 14.3.4/2 Adverse Events - Subject Listing (All Enrolled Subjects)

Treatment Group: (b) (4)

Unique Subject Identifier/ Age/Race	Attended Sterilization Procedure/ Attempted Sterilization/ Rely on Sterilization	SOC/ Preferred Term/ Reported Term	Start Prior to Index Event/ After Censor/ AEOSI	Serious /Reason	Adverse Event Start Date (Day)/ End Date (Day)/ Duration (days)	Intensity	Relation to Procedure / Type of Procedure	Causal rel. to Pre-existing condition or Con Med or other non-study procedures	Treatment of AE	Outcome	Comment
(b) (4)											



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Listing 14.3.4/2 Adverse Events - Subject Listing (All Enrolled Subjects)

Treatment Group (b) (4)

Unique Subject Identifier/ Age/Race	Attended Sterilization Procedure/ Attempted Sterilization/ Rely on Sterilization	SOC/ Preferred Term/ Reported Term	Start Prior to Index Event/ After Censor/ AEOSI	Serious /Reason	Adverse Event Start Date (Day)/ End Date (Day)/ Duration (days)	Intensity	Relation to Procedure / Type of Procedure	Causal rel. to Pre-existing condition or Con Med or other non-study procedures	Treatment of AE	Outcome	Comment
(b) (4)											

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Listing 14.3.4/2 Adverse Events - Subject Listing (All Enrolled Subjects)

Treatment Group: (b) (4)

Unique Subject Identifier/	Attended Sterilization Procedure/ Attempted Sterilization/ Rely on Steril-	SOC/ Preferred Term/ Reported	Start Prior to Index Event/ After Censor/ AEOSI	Serious /Reason	Adverse Event Start Date (Day/ End Date (Day/ Duration (days)	Intensity	Relation to Procedure / Type of	Causal rel. to Pre-existing condition or Con Med or other non-study proce-	Treatment of AE	Outcome	Comment
(b) (4)											

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Listing 14.3.4/2 Adverse Events - Subject Listing (All Enrolled Subjects)

Treatment Group (b) (4)

Unique Subject Identifier/ Age/Race	Attended Sterilization Procedure/ Attempted Sterilization/ Rely on Sterilization	SOC/ Preferred Term/ Reported Term	Start Prior to Index Event/ After Censor/ AEOSI	Adverse Event Start Date (Day)/ End Date (Day)/ Duration (days)	Serious /Reason	Intensity	Relation to Procedure / Type of Procedure	Causal rel. to Pre-existing condition or Con Med or other non-study procedures	Treatment of AE	Outcome	Comment
(b) (4)											

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Listing 14.3.4/2 Adverse Events - Subject Listing (All Enrolled Subjects)

Treatment Group (b) (4)

Unique Subject Identifier/	Attended Sterilization Procedure/ Attempted Sterilization/ Rely on Steril-	SOC/ Preferred Term/ Reported	Start Prior to Index Event/ After Censor/ Serious	Adverse Event Start Date (Day)/ End Date (Day)/ Duration	Relation to Procedure / Type of	Causal rel. to Pre-existing condition or Con Med or other non-study proce- Treatment
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(b) (4)

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Listing 14.3.4/2 Adverse Events - Subject Listing (All Enrolled Subjects)

Treatment Group: (b) (4)

Unique Subject Identifier/ Age/Race	Attended Sterilization Procedure/ Attempted Sterilization/ Rely on Sterilization	SOC/ Preferred Term/ Reported Term	Start Prior to Index Event/ After Censor/ AEOSI	Serious /Reason	Adverse Event Start Date (Day)/ End Date (Day)/ Duration (days)	Intensity	Relation to Procedure / Type of Procedure	Causal rel. to Pre-existing condition or Con Med or other non-study procedures	Treatment of AE	Outcome	Comment
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Listing 14.3.4/2 Adverse Events - Subject Listing (All Enrolled Subjects)

Treatment Group: (b) (4)

Unique Subject Identifier/ Age/Race	Attended Sterilization Procedure/ Attempted Sterilization/ Rely on Sterilization	SOC/ Preferred Term/ Reported Term	Start Prior to Index Event/ After Censor/ AEOSI	Serious /Reason	Adverse Event Start Date (Day)/ End Date (Day)/ Duration (days)	Intensity	Relation to Procedure / Type of Procedure	Causal rel. to Pre-existing condition or Con Med or other non-study procedures	Treatment of AE	Outcome	Comment
(b) (4)											

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Listing 14.3.4/2 Adverse Events - Subject Listing (All Enrolled Subjects)

Treatment Group: (b) (4)

Unique Subject Identifier/ Age/Race	Attended Sterilization Procedure/ Attempted Sterilization/ Rely on Sterilization	SOC/ Preferred Term/ Reported Term	Start Prior to Index Event/ After Censor/ AEOSI	Serious /Reason	Adverse Event Start Date (Day)/ End Date (Day)/ Duration (days)	Intensity	Relation to Procedure / Type of Procedure	Causal rel. to Pre-existing condition or Con Med or other non-study proce- dures	Treatment of AE	Outcome	Comment
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Listing 14.3.4/2 Adverse Events - Subject Listing (All Enrolled Subjects)

Treatment Group: (b) (4)

Unique Subject Identifier/	Attended Sterilization Procedure/ Attempted Sterilization/ Rely on Steril-	SOC/ Preferred Term/ Reported Term	Start Prior to Index Event/ After Censor/ Serious	Adverse Event Start Date (Day)/ End Date (Day)/ Duration	Relation to Procedure / Type of	Causal rel. to Pre-existing condition or Con other non-study proce-	Treatment	Outcome	Comment
(b) (4)									

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Listing 14.3.4/2 Adverse Events - Subject Listing (All Enrolled Subjects)

Treatment Group: (b) (4)

Unique Subject Identifier/Age/Race	Attended Sterilization Procedure/Attempted Sterilization/Rely on Sterilization	SOC/Preferred Term/Reported Term	Start Prior to Index Event/After Censor/AEOSI	Serious /Reason	Adverse Event Start Date (Day)/End Date (Day)/Duration (days)	Intensity	Relation to Procedure / Type of Procedure	Causal rel. to Pre-existing condition or Con Med or other non-study procedures	Treatment of AE	Outcome	Comment
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Listing 14.3.4/2 Adverse Events - Subject Listing (All Enrolled Subjects)

Treatment Group: (b) (4)

Unique Subject Identifier/ Age/Race	Attended Sterilization Procedure/ Attempted Sterilization/ Rely on Sterilization	SOC/ Preferred Term/ Reported Term	Start Prior to Index Event/ After Censor/ AFOSI	Serious /Reason	Adverse Event Start Date (Day)/ End Date (Day)/ Duration (days)	Intensit	Relation to Procedure / Type of Procedure	Causal rel. to Pre-existing condition or Con Med or other non-study proce- dures	Treatment
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Listing 14.3.4/2 Adverse Events - Subject Listing (All Enrolled Subjects)

Treatment Group (b) (4)

Unique Subject Identifier/ Age/Race	Attended Sterilization Procedure/ Attempted Sterilization/ Rely on Sterilization	SOC/ Preferred Term/ Reported Term	Start Prior to Index Event/ After Censor/ AEOSI	Serious /Reason	Adverse Event Start Date (Day)/ End Date (Day)/ Duration (days)	Intensity	Relation to Procedure / Type of Procedure	Causal rel. to Pre-existing condition or Con Med or other non-study procedures	Treatment of AE	Outcome	Comment
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Listing 14.3.4/2 Adverse Events - Subject Listing (All Enrolled Subjects)

Treatment Group: (b) (4)

Unique Subject Identifier/	Attended Sterilization Procedure/ Attempted Sterilization/ Rely on Steril-	SOC/ Preferred Term/ Reported	Start Prior to Index Event/ After Censor/ AEOSI	Serious /Reason	Adverse Event Start Date (Day)/ End Date (Day)/ Duration (days)	Intensity	Relation to Procedure / Type of Procedure	Causal rel. to Pre-existing condition or Con Med or other non-study procedures	Treatment of AE	Outcome	Comment
(b) (4)											

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Postmarket Surveillance Report

BAY (b) (4)



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Listing 14.3.4/2 Adverse Events - Subject Listing (All Enrolled Subjects)

Footnotes:

Race is identified as: A = Asian, B = Black, W = White, AI = American Indian or Alaska Native, NH = Native Hawaiian or Other Pacific Islander, NR = Not Reported, MUL = Multiple.

The unit of 'Age' is years.

'Day' is the day relative to the index event date.

Y=Yes, N=No

AEOSI = adverse event of special interest

(b) (6)

From: (b) (6)
Sent: Friday, August 31, 2018 11:26 AM
To: (b) (6)
Cc: (b) (6)
Subject: PS160001/R4 - Bayer Healthcare, LLC - email receipt

Trade Name: Essure System for Permanent Birth Control
Document Number: PS160001/R4
Dated: August 30, 2018
Received: August 31, 2018

Dear (b) (6) :

The Center for Devices and Radiological Health (CDRH) of the Food and Drug Administration (FDA) has received your section 522 postmarket surveillance (PS) 2 year report. Within 60 days of the receipt date, FDA will notify you in writing of the decision.

Please be sure that future correspondence regarding your 522 PS study is sent to the attention of (b) (6). If you have any procedural or policy questions concerning postmarket surveillance requirements, please contact (b) (6).

Thank you,

(b) (6)



Excellent Customer Service is important to us. Please take a moment to provide feedback regarding the customer service you have received.

(b) (4)

(b) (6)

From: (b) (6)
Sent: Thursday, December 20, 2018 12:10 PM
To: (b) (6)
Cc: (b) (6)
Subject: FDA Decision - Bayer Healthcare, LLC - PS160001/R4

Dear (b) (6) :

The Center for Devices and Radiological Health (CDRH) of the Food and Drug Administration (FDA) has completed its review of your section 522 postmarket surveillance (PS) study report PS160001/R4. This report is for the Postmarket Surveillance Study.

We have determined that you have sufficiently met the reporting expectations for the above report.

Advisory

1. Please be advised that your study status will be marked as “Progress Adequate” on the Section 522 Postmarket Surveillance Studies webpage (www.fda.gov/522studies).
2. Please be advised that due to the changing nature of the device sales and study enrollment rate, the reporting schedule has been changed to include a 30-month interim report, due March 4, 2019.

(b)(4)

Your next scheduled report is due March 4, 2019.

Thank you,

(b) (6)



Excellent Customer Service is important to us. Please take a moment to provide feedback regarding the customer service you have received.

MEMORANDUM

Food and Drug Administration
10903 New Hampshire Ave
Silver Spring, MD 20993-0002

Date: December 20, 2018

From:

(b) (6)

Subject:

[PS160001/R004](#)

Essure System for Permanent Birth Control, Bayer Pharma AG
522 Study Requirement Name: Postmarket Surveillance Study
Epidemiologic Review of Postmarket Surveillance (PS) Study Interim Report

PS Order:

Date of PS Order: February 29, 2016
ODE/OIR Document(s) on which the PS order was issued: P020014

To:

(b) (6)

Through:

(b) (6)

Conclusion/Recommendation:

The interim report (PS160001/R004) can be accepted.

522 Requirement Progress Status: Progress Adequate

Purpose:

The purpose of this memorandum is to present the epidemiologic review for the 12-month 522 Postmarket Surveillance (PS) Study Interim Report for the Essure System for Permanent Birth Control submitted by Bayer Pharma AG.

This memo includes:

- background information
- PS study protocol overview
- the review and assessment of the interim study results
- PS study tracking information
- overall conclusions and recommendations

- any applicable deficiencies.

Background:

Device Description

A. Essure System Components

The Essure System is comprised of the Essure micro-insert, a disposable delivery system, and a disposable split introducer.

Essure Micro-Insert

The Essure micro-insert is a spring-like device that consists of a stainless steel inner coil, a nickel titanium (Nitinol) expanding outer coil, and polyethylene terephthalate (PET) fibers. The PET fibers are wound in and around the inner coil. The micro-insert is 4 cm in length and 0.8mm in diameter in its wound down configuration. When released from the delivery system, the outer coil expands to 1.5 to 2.0 mm in diameter to anchor the micro-insert in the varied diameters and shapes of the fallopian tube. The spring-like device is intended to provide the necessary anchoring forces during the acute phase of device implantation (3 months post-micro-insert placement), during which time the PET fibers are eliciting tissue in-growth into the coils of the Essure micro-insert and around the PET fibers.

The Essure Micro-insert is provided attached to the delivery wire, in a wound-down configuration. The delivery wire is composed of a nitinol core wire, which is ground at the distal end to result in a flexible, tapered profile. The device is constrained by the release catheter, which is sheathed by a flexible delivery catheter. A black positioning marker on the delivery catheter aids in proper placement of the device in the fallopian tube.

The delivery handle controls the device delivery and release mechanism. The thumbwheel on the delivery handle retracts both the delivery catheter and the release catheter. The button allows the physician to change the function of the thumbwheel from retracting the delivery catheter to retracting the release catheter. The delivery wire is detached from the micro-insert by rotating the system.

Split Introducer

The split introducer is placed into the sealing cap of the working channel of the hysteroscope, and is intended to help protect the Essure Micro-insert as it is being passed through the sealing cap of the hysteroscope working channel.

B. Mechanism of Action

1. Placement at Utero-Tubal Junction (UTJ)

The Essure Micro-insert is intended for placement into the fallopian tube with the implant portion of the device spanning the utero-tubal junction (UTJ). For purposes of micro-insert placement, the UTJ is defined as the portion of the fallopian tube, just as it enters the uterus. Placement at the UTJ is expected

to aid in anchoring since it most consistently represents the narrowest portion of the fallopian tube. Expulsion of the Essure Micro-insert has occurred when micro-insert placement was too proximal. If the device is placed without any trailing portion of the device in the uterus, then direct visualization of device location is not possible.

2. Tissue In-Growth

The effectiveness of the Essure Micro-insert in preventing pregnancy is believed to be due to a combination of the space-filling design of the device and a local, occlusive, benign tissue response to the PET fibers. The tissue response is the result of a chronic inflammatory and fibrotic response to the PET fibers. It is believed that the tissue ingrowth into the device caused by the PET fibers results in both device retention and pregnancy prevention.

3. Permanency of Tubal Occlusion (and Sterilization)

The long-term nature of the tissue response to the Essure micro-insert is not known. The majority of the clinical data regarding PET in the fallopian tube is based on 12-24 months of implantation, with little data at 36 months. Therefore, beyond 24 months, the nature of the cellular fibrotic response and the ability of the response and the device to maintain occlusion are not known.

Indications for Use

The Essure System is indicated for women who desire permanent birth control (female sterilization) by bilateral occlusion of the fallopian tubes.

PS Order

On September 24, 2015, FDA convened a [meeting](#) of the Obstetrics and Gynecology Devices Panel of the Medical Devices Advisory Committee (see [transcript](#)), and the panel recommended additional data collection via postmarket surveillance. On February 29, 2016, FDA issued a [522 order](#) for the Essure Permanent Birth Control System.

PS Study Protocol Overview:

(b)(4)



(b) (4)



Study Element	Description
Real-World Evidence (RWE)	N/A
Study Design	Open-label, non-randomized, prospective observational cohort study of two cohorts of subjects who chose to undergo either hysteroscopic sterilization (Essure) or laparoscopic tubal sterilization.
Study Hypothesis	There is no hypothesis testing.
Study Population	<p>The study population will include subjects of reproductive age, between 21 and 45 years of age* who have not been pregnant within the past 6 weeks. The study population will include women who chose to undergo hysteroscopic sterilization (Essure) and who meet the criteria as outlined in the Essure Instructions for Use (IFU).</p> <p>(b)(4)</p>
Sample Size	<p>Women seeking laparoscopic tubal sterilization must be considered appropriate surgical candidates by the investigator.</p> <p>2,800 women (1,400 per arm) enrolled at 50-75 sites.</p> <p>(b)(4)</p>
Study Endpoints	<p>(b)(4)</p> <p>Follow-up measures will include adverse event assessment, medical history including gynecological procedures, patient reported outcome (PRO) measures for chronic pelvic pain and abnormal uterine bleeding, bloodwork for women with certain adverse events, and analysis of removed Essure devices.</p> <p>Key Endpoints:</p> <p>Pain: The proportion of subjects reporting AEs of chronic lower abdominal and/or pelvic pain after insertion of Essure System (ESS305)</p> <p>(b)(4)</p> <p>Bleeding: The proportion of subjects reporting AEs of abnormal uterine</p>

Study Element	Description
	<p>bleeding after insertion of Essure System (b) (4)</p> <p>Total incidence of new onset or worsening abnormal bleeding events will be based on AE reporting.</p> <p>Hypersensitivity/allergy/autoimmune disorders: The proportion of subjects with adjudicated new onset (b) (4) allergic/hypersensitivity reactions (b) (4)</p> <p>Proportion of subjects undergoing invasive gynecologic surgery (b) (4); including (b) (4) Essure insert removal (b) (4)</p> <p>Additional endpoints:</p> <ul style="list-style-type: none"> • Patient reported outcome measures (b) (4) • Rates of AEs
Length of Follow-up and Frequency of Follow-up Assessments	<p>(b) (4)</p> <p>36 months.</p> <p>(b)(4)</p>
Enrollment Plan and Follow-up Measures	<p>(b) (4)</p>
Statistical Plan	<p>(b) (4)</p>

Study Element	Description
	(b) (4)

(b)(4)

Timeline for Study Implementation (approved on September 2, 2016: PS160001/A002)

Milestone:	Date:
Expected date of study initiation	September 2016
Expected monthly number of study sites with IRB approvals	Approximately 8 sites/month
Expected date of initiation of subject enrollment	May 2017
Expected number of subjects enrolled per month	Approximately 78 patients/month (when all sites activated)
Expected date of enrollment completion	May 2020
Expected date of study follow-up completion	May 2023
Expected date for final report submission	September 2023

(b)(4)

PS Study Interim Status/Results and Assessments:

Interactive Review was conducted to obtain updated information about enrollment status and safety findings; see [Attachment 1](#) and [Attachment 2](#) for IR exchanges.

Study Elements

Number of IRB Approvals

Description

- As of July 2, 2018: 74
- As of September 17, 2018 (interactive review): 76
- As of October 24, 2018 (interactive review): 76

Assessment

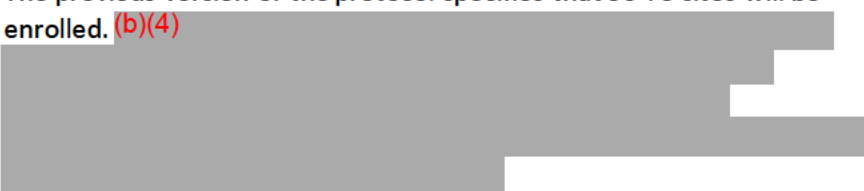
- Since the last interim report (PS160001/R003, data cutoff December 1, 2017), the number of IRB approvals has increased from 56 to 74 sites. The protocol specifies that 50-75 sites will be enrolled, and the study has met this goal. **Acceptable.**

Number of study sites enrolled

Description

- As of July 2, 2018: 67 sites have been activated, 56 sites have enrolled subjects.
- As of September 17, 2018 (interactive review): 67 sites have been activated, 58 sites have enrolled subjects. (b)(4); 63 sites are still open.
- As of October 24, 2018 (interactive review): 67 sites have been activated, 60 sites have enrolled subjects. (b)(4); 63 sites are still open.

Assessment

- The previous version of the protocol specifies that 50-75 sites will be enrolled. (b)(4)

- Since the last interim report (PS160001/R003, date of data cutoff December 1, 2017), the number of sites enrolled and activated has increased from 49 to 67 sites. The study has met the previous goal of 50-75 sites, and may now enroll additional sites, towards the new goal of up to 90 sites. **Acceptable.**

Number of subjects enrolled

Description

- Enrollment began on May 3, 2017.
- As of July 2, 2018: 575/2800 (20.5%), including 236/1400 (16.9%) in

Essure arm and 339/1400 (24.2%) in BTL arm.

- As of September 17, 2018 (interactive review): 691/2800 (24.7%), including 269/1400 (19.2%) in Essure arm and 422/1400 (30.1%) in BTL arm.
- As of October 24, 2018 (interactive review): 750/2800 (26.8%), including 282/1400 (20.1%) in Essure arm and 468/1400 (33.4%) in BTL arm.

Assessment

- On July 20, 2018, the manufacturer publicly announced that sales of Essure will cease after December 31, 2018. Enrollment into the 522 study is dependent on real world sales, and will cease once Essure sales/procedures cease; this almost certainly means that the study will not achieve the target sample size of 1400 patients per arm. (b)(4)

[Redacted]

- Therefore, due to these changes, the study enrollment will no longer be assessed against a target enrollment rate. (b)(4)

[Redacted]

- The enrollment rate has decreased to approximately 45 subjects per month (combined between both arms). This is likely due to the sponsor's announcement regarding the future cessation of sales of Essure. Although the rate is decreasing, the study is still enrolling new subjects into both arms, as agreed by FDA and the sponsor. The enrollment rate is acceptable.

Follow-up rate

Description

(b) (4)

[Redacted]

(b) (4)



(b) (4)



(b) (4)



(b)(4)



Summary of Interim Study Results for the 522 Webpage (updated on April 25, 2018) (b)(4)

	Description
Number of study sites enrolled	As of December 3, 2018, 791 patients have been enrolled (293 in the Essure arm and 498 in the laparoscopic tubal ligation arm).
Number of subjects enrolled	As of December 3, 2018, 67 sites have been enrolled. 63 sites are open for enrollment.

PS Study Tracking Information:

1. What is the Overall Study Status? Check only one.

	Plan Pending	FDA has not approved the study protocol, and it has been less than 6 months since issuance of the order.
	Plan Overdue	FDA has not approved the study protocol, and it has been 6 months or more since issuance of the order.
	Study Pending	The protocol has been approved, but no subjects have been enrolled.
X	Progress Adequate	The study has begun, and the study progress is consistent with the protocol (e.g., meeting enrollment schedule, follow-up rates, endpoints evaluated).
	Progress Inadequate	The study has begun, but the study progress is inconsistent with the protocol (e.g., not meeting enrollment schedule, missing timepoint evaluations, poor follow-up rates, not all endpoints evaluated).

	Completed	The sponsor has fulfilled the condition of approval, and FDA has closed the study. This is a final study status.
	Terminated	The sponsor has not fulfilled or cannot fulfill the condition of approval (e.g., study questions are no longer relevant, sponsor withdraws PMA, data cannot answer 522 question), and, after all appropriate efforts to fulfill the condition of approval have been exhausted, FDA has terminated the study. This is a final study status.
	Other	Used when the study status does not fit another category (e.g., not marketing the device and have no plans to market the device, change in ownership underway, redesigning device and need PMA approval prior to use in a PAS, pending separate study being used to address condition of approval). This is an interim study status.

Deficiency List:

None

Advisory

1. Please be advised that your study status will be marked as “Progress Adequate” on the Section 522 Postmarket Surveillance Studies webpage (www.fda.gov/522studies).
2. Please be advised that due to the changing nature of the device sales and study enrollment rate, the reporting schedule has been changed to include a 30-month interim report, due March 4, 2019.


(b)(4)



(b) (6)



cc: (b) (6)



Document History:

Date	Activity	Initials
10/25/18	Drafted	(b) (6)
10/25/18	Reviewed with comments	
10/26/18	Revised	
10/30/18	Reviewed/Cleared	
12/20/18	Finalized	

Reviewer's Sign-Off	(b) (6)
Branch Chief Sign-Off	

Attachment List

[Attachment 1](#): Interactive Review Response (September 28, 2018)

[Attachment 2](#): Interactive Review Response (October 24, 2018)

[Attachment 3](#): Interactive Review Response (December 5, 2018)

Attachment 1: Interactive Review Response (September 28, 2018)

From: (b) (6)
To: [Redacted]
Cc:
Subject: RE: PS160001/R004 Interactive Review Request (reply requested by 9/18)
Date: Friday, September 28, 2018 7:27:59 PM
Attachments: [image001.png](#)

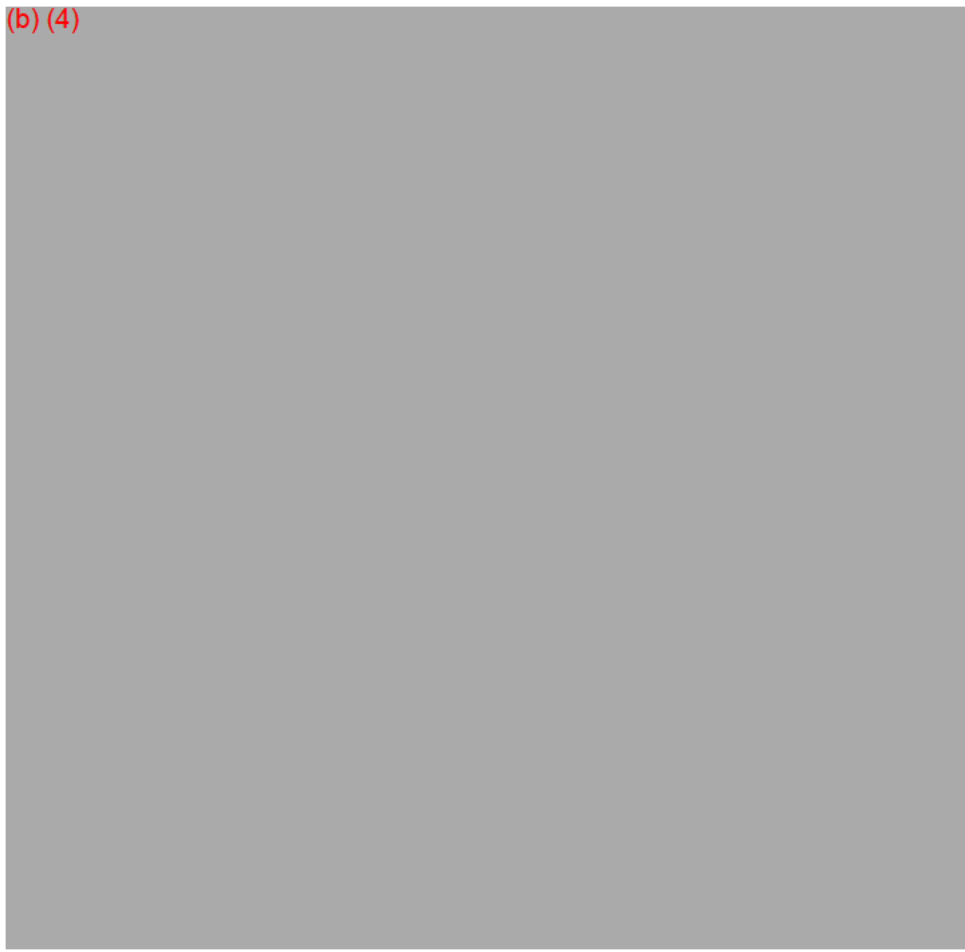
Dear (b) (6)
(b) (4)



(b) (4)



(b) (4)



Thank you,

(b) (6)

Freundliche Grüße / Best regards,

(b) (6)



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Bayer U.S. LLC
Development, Pharmaceuticals
Essure & Devices
921 Parker Street

Berkeley CA 94710
United States

(b)(6)

Web: <http://www.bayer.us>

From: (b) (6)
Sent: Monday, September 17, 2018 1:20 PM
To: (b) (6)
Cc: (b) (6)
Subject: RE: PS160001/R004 Interactive Review Request (reply requested by 9/18)

Dear (b) (6)

Please see the response to Query #1 and #5.

1. The date of database cutoff for the report is July 2, 2018, and therefore the enrollment information is out of date. Please provide an enrollment update with the following information: number of sites approved for participation, number of IRB approvals, number of clinical sites activated and open for enrollment, number of sites with subjects enrolled, and number of subjects enrolled (by arm).
 - Number of sites approved for participation: 90
 - Number of IRB approvals: 76
 - Number of clinical sites activated and open for enrollment: 67 activated, 63 open for enrollment
 - (b) (4)
 - Number of sites with subjects enrolled: 58
 - Number of subjects enrolled (by arm): Essure – 269; LTS – 422

(b) (4)

Thank you,

(b) (6)

Freundliche Grüße / Best regards,

(b) (6)

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Development, Pharmaceuticals
Essure & Devices
921 Parker Street
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United States

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Web: <http://www.bayer.us>

From: (b)(6)
Sent: Tuesday, September 11, 2018 12:49 PM
To: (b)(6)
Cc:
Subject: PS160001/R004 Interactive Review Request (reply requested by 9/18)
Importance: High

Dear (b)(6)

I am reviewing PS160001/R004, and I have a couple of questions I would like to resolve interactively. Please address the following questions:

(b)(4)



(b) (4)

Please send your responses via email by September 18, 2018. Please let me know if you have any questions or concerns.

Thank you!

(b) (6)

Center for Devices and Radiological Health

(b) (6)



Excellent customer service is important to us. Please take a moment to provide feedback regarding the customer service you have received:

Signal Management Program: [link](#)

Division of Epidemiology: [link](#)

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Attachment 2: Interactive Review Response (October 24, 2018)

From: (b) (6)
To: (b) (6)
Cc: (b) (6)
Subject: RE: PS160001/R004 Interactive Review Request (reply requested by 9/18)
Date: Wednesday, October 24, 2018 2:29:54 PM
Attachments: [image001.png](#)

Dear (b) (6)

Please see the enrollment update below.

- Number of sites approved for participation: 90
- Number of IRB approvals: 76
- Number of clinical sites activated and open for enrollment: 67 activated, 63 open for enrollment (b)(4)
(b) (4)
- Number of sites with subjects enrolled: 60
- Number of subjects enrolled (by arm): Essure – 282; LTS – 468

Thank you,

(b) (6)

Freundliche Grüße / Best regards,

(b) (6)

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921 Parker Street
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(b)(6)

Web: <http://www.bayer.us>

From: (b)(6)
Sent: Tuesday, October 23, 2018 12:30 PM
To: (b)(6)
Cc: (b)(6)
Subject: RE: PS160001/R004 Interactive Review Request (reply requested by 9/18)

Dear (b)(6)

(b) (4)

Thank you!

(b)(6)



Center for Devices and Radiological Health

(b)(6)



Excellent customer service is important to us. Please take a moment to provide feedback regarding the customer service you have received:

Signal Management Program: [link](#)

Division of Epidemiology: [link](#)

Attachment 3: Interactive Review Response (December 5, 2018)

From: (b)(6)
To: (b)(6)
Cc:
Subject: RE: PS160001/R004 Interactive Review Request
Date: Wednesday, December 05, 2018 12:32:35 PM
Attachments: [image001.png](#)

Dear (b)(6)

As discussed on the call on Nov. 30th, an enrollment update is included below.

As of December 3, 2018.

Number of sites approved for participation: 90

Number of IRB approvals: 76

Number of clinical sites activated and open for enrollment: 67 activated, 63 open for enrollment (b)(4)

(b)(4)

Number of sites with subjects enrolled: 60

Number of subjects enrolled (by arm): Essure – 293; LTS – 498

Freundliche Grüße / Best regards,

(b)(6)

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