**Media Outreach Guide**

Getting the attention of local and regional media outlets can prove worthwhile to help increase awareness of the Hybrid AF™ Therapy at your medical center. The following are tips for contacting local media who may pick up a story about your facility, the treatment and what it means for improving patients' lives.

**The Right Time to Reach Media**

* When your facility has a new treatment that would be of interest to the media outlet’s audience.
  + Local and regional news outlets have a great interest in their community’s public health.
  + In addition, many readers and viewers could likely benefit from the treatment.
* When treatment options or medical conditions are in national news, such as September’s Afib Awareness Month or February's Heart Month. That's a good time to jump in with your own treatment story.
  + Reporters often seize the opportunity to share topics covered in national news with a hometown twist, thus relating it to their audience.

**How to Identify the Right Reporters**

* Gather a list of media contact information that includes print and online publications, TV networks and radio stations.
  + These lists can be pieced together manually or automatically generated from online services, free and paid.
  + Be sure your research includes the reporter’s beat or area of specialty. This will help you target who is interested in healthcare and public health stories. (A commercial development reporter is not likely to pick up your story or read your release.)
  + If you cannot reach the editor or reporter, call the general news desk and ask for the assignment editor who will direct you to the best contact for the story.
* Do research and gather local knowledge of news—it is the best way to know who is likely to pick up your story. Note the bylines on other healthcare stories to help you refine your primary list of contacts.
* Visit your local news sources' websites and search for healthcare-related stories or competitors' names. Seeing who wrote other stories on heart health and healthcare can help narrow your research.

**Tools to Contact Reporters**

* Pitch Email
  + Pitch emails are used for your most targeted reporters likely to cover your story. Pick a reporter you want to cover your story and tailor your pitch to suit their interests and audience. Put the reporter's first name in the subject line; it allows them to see that they're not on a mass email list. Be sure to call following up on the pitch to answer any questions and offer access to potential interviews with physicians or post-op patients (with their consent).
  + Your pitch email might be worded like this:
  + Hello <NAME>, We have some news here at <HOSPITAL NAME> about our use of a newly FDA-approved therapy, Hybrid AF Therapy. We're using this therapy on patients who have atrial fibrillation, or AF—specifically, on patients who have long-standing persistent AF. This condition affects many of your <READERS / VIEWERS>. In fact 1 in 4 adults over 40 will develop AF in their lifetime. AF affects over 33 million people worldwide, and about 8 million people here in the U.S. Approximately 45% of AF patients have long-standing persistent AF, affecting more than 3.5 million patients in the U.S.—who now have a treatment option available to them. In addition to the information below, I can put you in touch with one of our MDs and perhaps a patient too. Thanks for considering, I'll follow up with you soon.
* News Release
  + News releases are sent more widely to anyone who is likely to pick up the story. These can be sent manually via email or through a wire service. For local news stories, sending the release manually to your contacts is often best. If you have the time, personalize the email by inserting the reporter's name and a sentence or two at the beginning.
  + Be prepared to follow up with the reporters via phone the next day to ask if they received your release and if you can help answer questions or organize interviews. Reporters often want to write their own story from your release instead of simply publishing a release as is.
  + To directly reach a specific reporter, it's best to distribute a press release via email so you can reach the reporter as quickly as possible.

**Additional Tips**

* Tell the story of someone in the community who has recently benefited from the procedure, which adds third-party credibility and a local name.
* Confirm that the patient is okay with the publicity and consult your legal team before sharing with media. If you use patient stories, be sure the patient is in good health and discharged before reaching out to media.
* When you make follow-up calls with reporters ask them if they are likely to publish your story and, if not, ask why. This will help tailor future stories that might be a better fit for them.
* When sending a release, make your subject line clear and concise. Don’t send the release as an attachment but paste it into the body of the email so it can be easily read.

***EPi-Sense® Guided Coagulation System***

***U.S. Indications****: The EPi-Sense Guided Coagulation System is intended for the treatment of symptomatic long-standing persistent atrial fibrillation (continuous atrial fibrillation greater than 12 months duration) when augmented in a hybrid procedure with an endocardial catheter listed in the instructions for use, in patients (1) who are refractory or intolerant to at least one Class I and/or III antiarrhythmic drug (AAD); and (2) in whom the expected benefit from rhythm control outweighs the potential known risks associated with a hybrid procedure such as delayed post-procedure inflammatory pericardial effusions.* ***Contraindications*** *include patients with Barrett’s Esophagitis, left atrial thrombus, a systemic infection, active endocarditis, or a localized infection at the surgical site at the time of surgery.* ***Adverse Events****: Reported adverse events associated with epicardial ablation procedure may include, but are not limited to, the following: pericardial effusion/cardiac tamponade, pericarditis, excessive bleeding, phrenic nerve injury, stroke/TIA/neurologic complication. Please review the Instructions for Use for a complete listing of contraindications, warnings, precautions and potential adverse events located at the following AtriCure web address: https://www.AtriCure.com/EPi-Sense-Coagulation-Device.* ***Warnings****: Physicians should consider post-operative anti-inflammatory medication to decrease the potential for post-operative pericarditis. and/or delayed post-procedure inflammatory pericardial effusions. Physicians should consider post-procedural imaging (i.e. 1-3 weeks post-procedure) for detection of post-procedure inflammatory pericardial effusions.* ***Precautions****: Precautionary measures should be taken prior to considering treatment of patients: (1) Deemed to be high risk and who may not tolerate a potential delayed post-procedure inflammatory pericardial effusion. (2) Who may not be compliant with needed follow-ups to identify potential safety risks. To ensure patients undergoing treatment with the EPi-Sense device are well informed, the benefits, potential risks and procedural outcomes associated with the EPi-Sense Hybrid Convergent procedure should be discussed with the patient. Physicians should document accordingly in the medical record. Qualified operators are physicians authorized by their institution to perform surgical sub-xyphoid pericardial access. The coagulation devices should be used by physicians trained in the techniques of minimally invasive endoscopic surgical procedures and in the specific approach to be used. Operators should undergo training on the use of EPi-Sense device before performing the procedure. Safety and effectiveness of concomitant left atrial appendage closure was not evaluated in the CONVERGE study. Follow-up should be conducted at approximately 30 days post-procedure to monitor for signs of delayed onset pericarditis or pericardial effusion.* ***Rx Only.***

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