SCS Candidates Quick Guide

- ✓ Chronic Back and Leg Pain
- ✓ Nonsurgical Back Pain (NSBP)
- ✓ Painful Diabetic Neuropathy (PDN)

Intelligent. Responsive. Relief.

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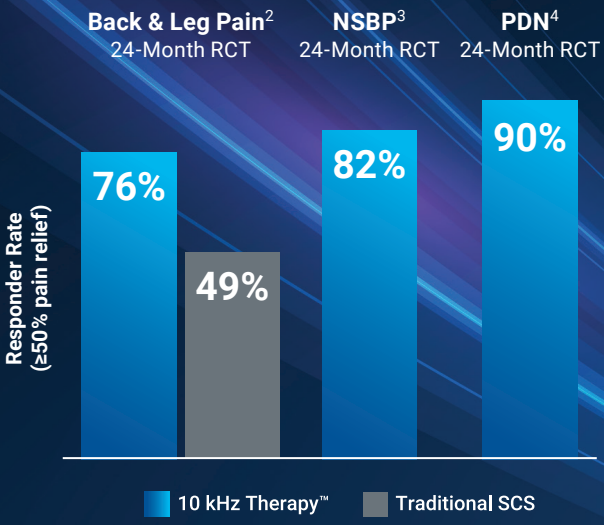
powering HFX iQ

Therapy Built on Level 1 Evidence[1]



HFX Adaptiv*AI*™ technology

is built on indication-specific algorithms, enhanced by big data and proven outcomes*

100,000+
Implanted Patients

100,000,000+
Outcomes Data Points[1]

FDA Superiority Labeling for Both Back and Leg Pain[1]

Potential Back & Leg Pain Candidates

- Chronic intractable neuropathic pain of the trunk and limbs
- Typically failed less invasive treatments such as physical therapy, injections, and medications
- Failed back surgery (not a requirement)
- Back and/or leg pain
- Radiating nerve pain of the limbs

ICD-10 Diagnosis Codes

Code Description	ICD-10-CM Code
Failed Back Surgery Syndrome	M96.1
Disc Degeneration	M51.35, M51.36
Disc Disorder	M51.06, M51.15, M51.16, M51.17
Disc Displacement	M51.25, M51.26
Dorsalgia	M54.89, M54.9
Lumbago	M54.40, M54.41, M54.42
Radiculopathy	M54.15, M54.16, M54.17
Spinal Stenosis	M48.06X, M48.07
Spondylopathy	M48.35, M48.36, M48.37, M48.8X5, M48.8X6, M48.8X7, M49.85, M49.86, M49.87
Spondylosis	M47.10, M47.16, M47.25, M47.26, M47.27, M47.815, M47.817

The First SCS with NSBP Indication[2]

Potential NSBP Candidates

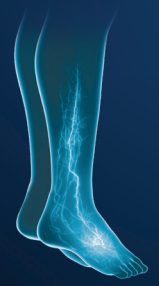
- Diagnosed with chronic, refractory axial low back pain
- Pain has a predominant neuropathic component
- No prior back surgery
- Not a candidate for back surgery based on an assessment by a spine surgeon

Code Description	ICD-10-CM Code
Intervertebral Disc Disorders/ Disc Degeneration	M51.16, M51.36, M51.26, M51.17
Spondylosis	M47.816, M47.817, M47.814, M54,812, M47.26
Radiculopathy	M54.16, M54.17, M54.12, M54.14
Spinal Stenosis	M48.062, M48.061, M48.02

Poor Candidates: Mechanical pain such as joint pain, unrealistic expectations, active opioid addiction or medication abuse

The Most Effective Treatment for Refractory PDN[3]

Potential PDN Candidates



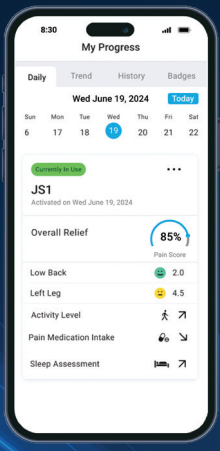
- Diagnosed with diabetes
- Diagnosed with painful diabetic neuropathy for > 1 year or more
- Tried 2+ medications
- Pain VAS ≥ 5
- HbA1c ≤ 10%
- Deemed medically suitable for minimally invasive procedure

Code Description	ICD-10-CM Code
Diabetes mellitus due to underlying condition with diabetic neuropathy, unspecified	E08.40
Diabetes mellitus due to underlying condition with diabetic polyneuropathy	E08.42
Type 1 diabetes mellitus with diabetic neuropathy, unspecified	E10.40
Type 1 diabetes mellitus with diabetic polyneuropathy	E10.42
Type 2 diabetes mellitus with diabetic neuropathy, unspecified	E11.40
Type 2 diabetes mellitus with diabetic polyneuropathy	E11.42
Other specified diabetes mellitus with diabetic neuropathy, unspecified	E13.40
Other specified diabetes mellitus with diabetic polyneuropathy	E13.42

Determinations about the medical needs of a patient and appropriate patient selection are solely the decisions of the physician. These recommendations are not intended to represent a guarantee of coverage or medical necessity. The recommendations are based on the criteria of the primary study of the HFX device for use in patients. Information provided by Nevro is presented for illustrative purposes only and is not intended to and does not constitute coding, reimbursement, legal, business, or other advice. It is the responsibility of the healthcare provider to make determinations regarding the medical necessity of treatment for their patients. Patient experiences with the HFX iQ™ or Senza Omnia™ spinal cord stimulation (SCS) system vary by individual, including the amount of pain relief. The occurrence of adverse effects associated with SCS implant surgery or use also varies by patient.

Indications for Use: The HFX iQ, Senza Omnia, and HFX Trial SCS systems aid in the management of chronic intractable pain of the trunk and/or limbs, and, when programmed to 10 kHz, are indicated as aids in the management of chronic intractable pain of the lower limbs associated with diabetic neuropathy and the management of non-surgical refractory back pain. **Contraindications**: These include patients who are poor SCS surgical candidates, are unable to operate the SCS system and fail to receive effective pain relief during trial stimulation. **Warnings**: Interference with other implanted stimulators, may result in sensing problems or inappropriate responses. Sources of electromagnetic interference may result in unexpected changes in stimulation, serious patient injury and system damage. Energy from diathermy can cause tissue damage, resulting in severe injury or death. Senza implantable stimulators are MR conditional and scanning under different conditions may result in severe patient injury or device malfunction. Use of certain medical devices or procedures (electrocautery, radiation therapy, ultrasonic scanning) may result in device damage. Induced electrical currents from radiofrequency (RF) or microwave ablation may cause heating, resulting in tissue damage. **Precautions**: Avoid activities that put stress on the implanted components. Safety has not been established for Transcranial Magnetic Stimulation (TMS) or Electroconvulsive Therapy (ECT) in patients who have an implanted SCS system. Persistent discomfort or excessive redness may indicate infection. **Adverse Events**: May include hematoma, epidural hemorrhage, paralysis, pain at implant site, infection and other surgical risks. Device related adverse events may include loss of pain relief or paresthesia, undesirable change in stimulation (uncomfortable, jolting or shocking sensation), tissue reaction or allergy to implanted materials. Refer to www.nevro.com/manuals for product manuals with complete indications, contraindications, warnings, precautions and potential adverse events.

Real-Time App Engagement



Real-time quality of life and device metrics enable more impactful patient interactions[1]

Patients report ***pain relief in significantly less time*** than with traditional programming[1]

Pain Relief in Less Time

Additional Benefits

No restrictions on driving

No restrictions on sleeping

No uncomfortable stimulation

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powering HFX iQ™

***** HFX AdaptivAI™ technology includes an advanced algorithm with an ability to interlace bipoles. Senza HFX iQ uses a fixed set of instructions to provide optimized treatment recommendations that utilize direct patient input from assessments on pain and quality of life measures.

1. Data on file. **2.** Kapural, L., et al. (2016). Comparison of 10-kHz high-frequency and traditional low-frequency spinal cord stimulation for the treatment of chronic back and leg pain: 24-month results from a multicenter, randomized, controlled pivotal trial. *Neurosurgery, 79*(5), 667–677. **3.** Patel, N.P., et al. (2023). Durable responses at 24 months with high-frequency spinal cord stimulation for nonsurgical refractory back pain. *J Neurosurg Spine:1-11*. **4.** Petersen, E., et al. (2023). Long-Term Efficacy of High-Frequency (10 kHz) Spinal Cord Stimulation for the Treatment of Painful Diabetic Neuropathy: 24-Month Results of a Randomized Controlled Trial. *Diabetes Research and Clinical Practice, 110865*.

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