

Zephyr® Valves

FOR SEVERE COPD/EMPHYSEMA

Initial Referral Criteria

- Confirmed diagnosis of COPD
- FEV₁ of 50% predicted or less
- Breathless despite optimal medical management (mMRC ≥ 2)



Once Referred, An Interventional Pulmonologist Will Confirm:

- Diagnosis of severe emphysema as quantified by CT
- 6MWD = 100-500m
- Presence of hyperinflation (RV ≥ 150% predicted)
- Confirmation the target lobe has little to no collateral ventilation

Complications of the Zephyr® Endobronchial Valve treatment can include but are not limited to pneumothorax, worsening of COPD symptoms, hemoptysis, pneumonia, dyspnea and, in rare cases, death.

Important Safety Information: The Pulmonx Zephyr® Endobronchial Valves are implantable bronchial valves indicated for the bronchoscopic treatment of adult patients with hyperinflation associated with severe emphysema in regions of the lung that have little to no collateral ventilation. The Zephyr Valve is contraindicated for: Patients for whom bronchoscopic procedures are contraindicated; those with evidence of active pulmonary infection; known allergies to Nitinol (nickel-titanium) or its constituent metals (nickel or titanium); known allergies to silicone; or with large bullae encompassing greater than 30% of either lung; Patients who have not quit smoking. The Zephyr Valve should be used with caution and only after careful consideration in treating patients with: Prior lung transplant, LVRS, median sternotomy, lobectomy, or pleurodesis on the target lung side; Congestive heart failure or recent myocardial infarction; FEV1 < 15% of predicted value. Use is restricted to a trained physician. Prior to use, please reference the Zephyr Endobronchial Valve System Instructions for more information on indications, contraindications, warnings, all precautions, and adverse events.

Caution: Federal law restricts this device to sale by or on the order of a physician.