

**PCT  
GENERAL POWER OF ATTORNEY**

*(FOR SEVERAL INTERNATIONAL APPLICATIONS FILED UNDER THE PATENT COOPERATION TREATY)  
(PCT RULE 90.5)*

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**THE UNDERSIGNED PERSON(S):**

*(Family name followed by given name; for a legal entity, full official designation. The address must include postal code and name of county)*

**Boston Scientific SciMed, Inc.  
One SciMed Place  
Maple Grove, MN 55311  
United States of America**

hereby appoint(s) the following persons as:     Agent             Common representative

**Name and address**

*(Family name followed by given name; for a legal entity, full official designation. The address must include postal code and name of county)*

*PAULY, Daniel M., Reg. No. 40,123; DEVRIES SMITH, Katherine M., Reg. No. 42,157; DEFFNER, Mark E., Reg. No. 55,103; NIKHANI, Rakhi D., Reg. No. 66,654; FELLER, Michael, Reg. No. 59,296; CARLSON, Deborah, Reg. No. 73,403; DAHL, John, Reg. No. 44,639; SCHMIDT, Andrew, Reg. No. 74,256; and, all of PAULY DEVRIES SMITH & DEFFNER, L.L.C., 121 South 8th Street, TCF Tower, Suite 900, Minneapolis, MN 55402, USA and DOHMEN, Luke, Reg. No. 36,783; CHIAPETTA, Jim, 39,634; WITSCHEN, Katrina, Reg. No. 59,862; MESSAL, Todd, Reg. No. 42,883; HEINRICHS, Lori J., Reg. No. 43,667; CITROWSKE, Sara J., Reg. No. 55,076; LYNN Michael, Reg. No. 57,490; NYQUIST, Benjamin J., Reg. No. 61,712; LAI, Vincent, Reg. No. 63,816; HAYWOOD, Jennifer, Reg. No. 65,648; CRIST, Robert, Reg. No. 68,701; NICHOLS, Tiffany, Reg. No. 73,875; all of BOSTON SCIENTIFIC SCIMED, INC., One SciMed Place, Maple Grove, MN 55311, United States of America*

to represent the undersigned before

- All the competent International Authorities
- The International Searching Authority only
- The International Preliminary Examining Authority only

in connection with any and all international applications filed by the undersigned with the following Office: UNITED STATES PATENT AND TRADEMARK OFFICE

**Signature(s)** *(where they are several persons, each of them must sign; next to each signature, indicate the name of the person signing and the capacity in which the person signs, if such capacity is not obvious from reading this power)*

By: 

Date: 3/2/2016

Name: Sara J. Citrowske

Title: Assistant Secretary of Boston Scientific SciMed, Inc.