

## Materials TABLE OF CONTENTS

**Balloons:** SC (p. 2), NC (p. 11), DCB (p. 17), Trapping (p. 23), Re-entry (p. 26)

Calcium modifiers (p. 28)

Closure Devices (p. 36)

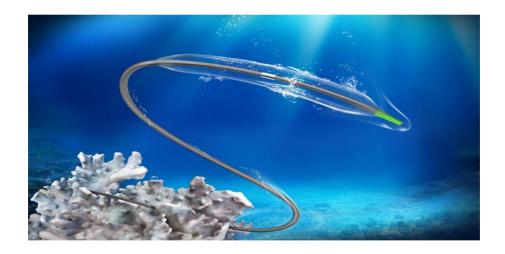
Coils (p. 39) Guide Catheters (p. 41) Guide Extensions (p. 44)

Guidewires (p. 50) Imaging (p. 91) MCS (p. 96) Microcatheters (p. 101) Physiology (p. 123) Sheaths (p. 128) Stents (p. 132)

# SC Balloons





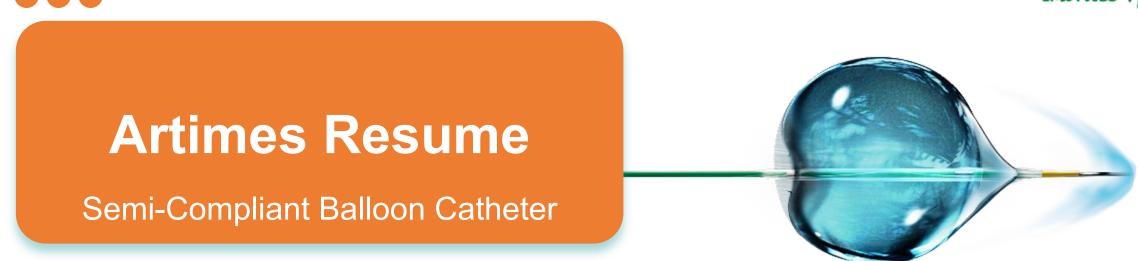


Ø 0.75mm

## **CTO Balloon Catheter**

- With 0.75 mm in diameter Alveo HP is the smallest high pressure CTO balloon catheter in the world.Its tip entry profile is 0.0156.
- Specifically designed for crossing complex lesions and Chronic Total Occlusions (CTO) as well as tracking tortuous anatomy.
- It is ideal used as Lesions preparation for complex CTO, when the normal SC balloon easily scratched by severe calcification, Alveo can cross it due to its unique balloon material, high pressure resistance(20atm RBP) and smallest profile.
- (Alveo may not be the only one that passes through, but it's certainly the one that passes through without being punctured by calcification and can be expansioned to RBP 20 atm!Average 28atm)





Artimes is a SC pre-dilatation balloon sizes 1.0 and 1.25mm are designed for small and narrow lesions and for the treatment of CTOs. It is 5F Compatible, 6F Guiding Kissing • Balanced with Ultra-low 0.016" Profile Tip as well as Enhanced Balloon

Flexibility and crossibility

Artimes comes with unique technology:

(1) Balanced tip processing and distal welding technique balanced tip processing and distal welding technique

(2)Patented microcrystalline grid balloon technology

(3)Laser spiral cut pole-vault hypotube design

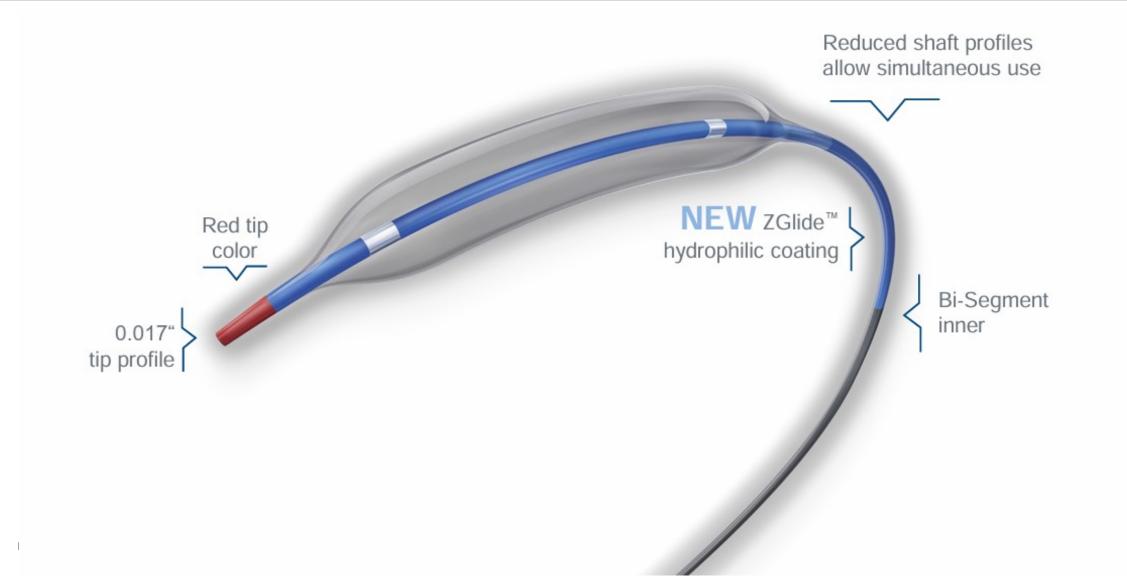
(4)Ultra-lubricated coating technique













**Hydrophilic Coating** 

minimum coeffcient of friction

**Lowest Crossing Profile** 

Semi-compiant Balloon Catheter

#### \_ Delicate Tip Design

across all balloon sizes

#### **1mm Diameter**

for the most challenge CTO lesions

#### **Optimal Hypotube**

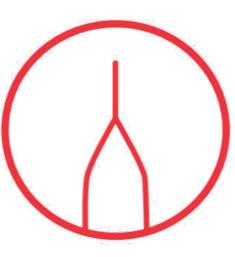
seamless-force conduction excellen pushibilty

**Unlimited Crossing Force** 



## **Delicate Tip Design**

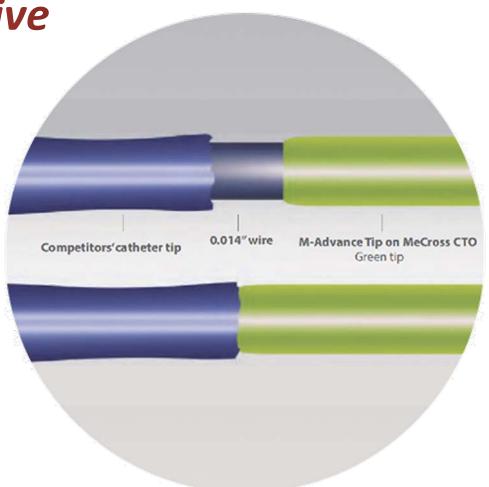
Semi-compiant Balloon Catheter



## "m-advanced" tip penetration technology

## *more flexible, more protective*

- tapered tip design
- 0.016" tip entry profile
- 1.5mm-2mm tip length

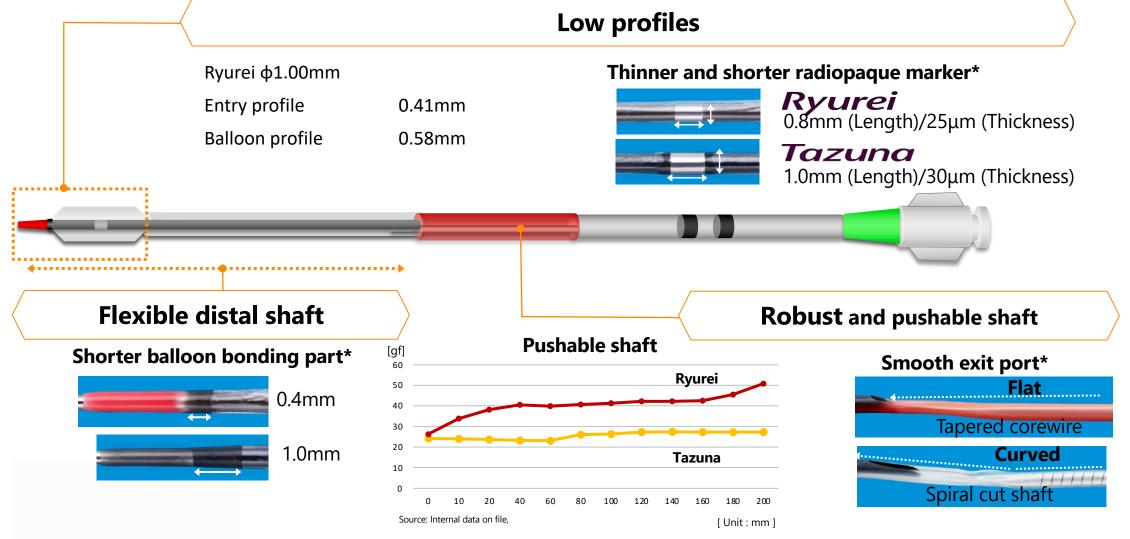


#### **Unlimited Crossing Force**





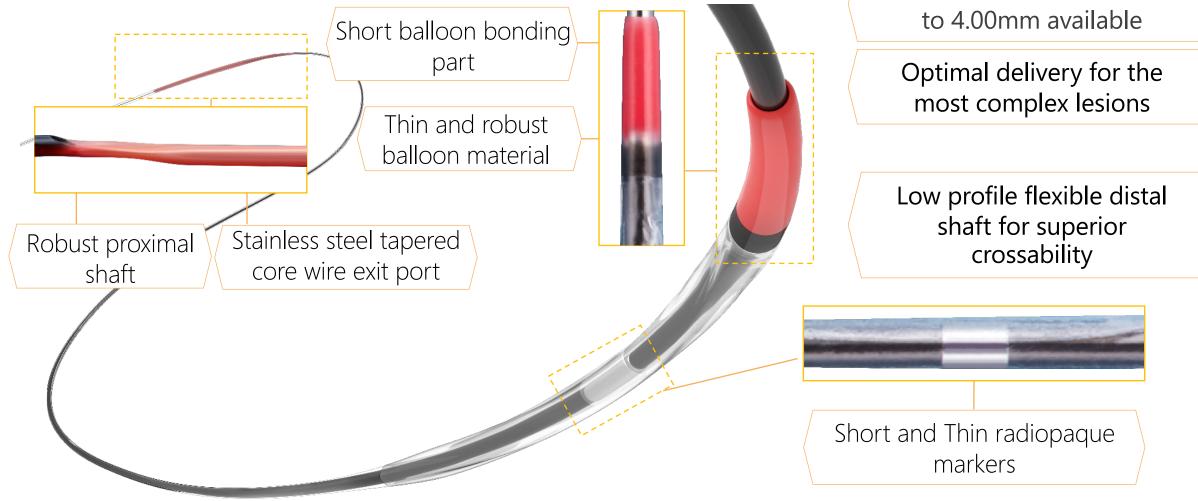
### PTCA Balloon Dilatation Catheter



\* Compared to Tazuna PTCA dilatation catheter



### PTCA Balloon Dilatation Catheter





Diameters from 1.00 mm

# xperience pro

#### Semi compliant PTCA balloon

#### **OPTIMAL CROSSABILITY**

Low tip entry, penetration and crossing profiles for crossing the most-challenging lesions

#### **HIGH TRACKABILITY**

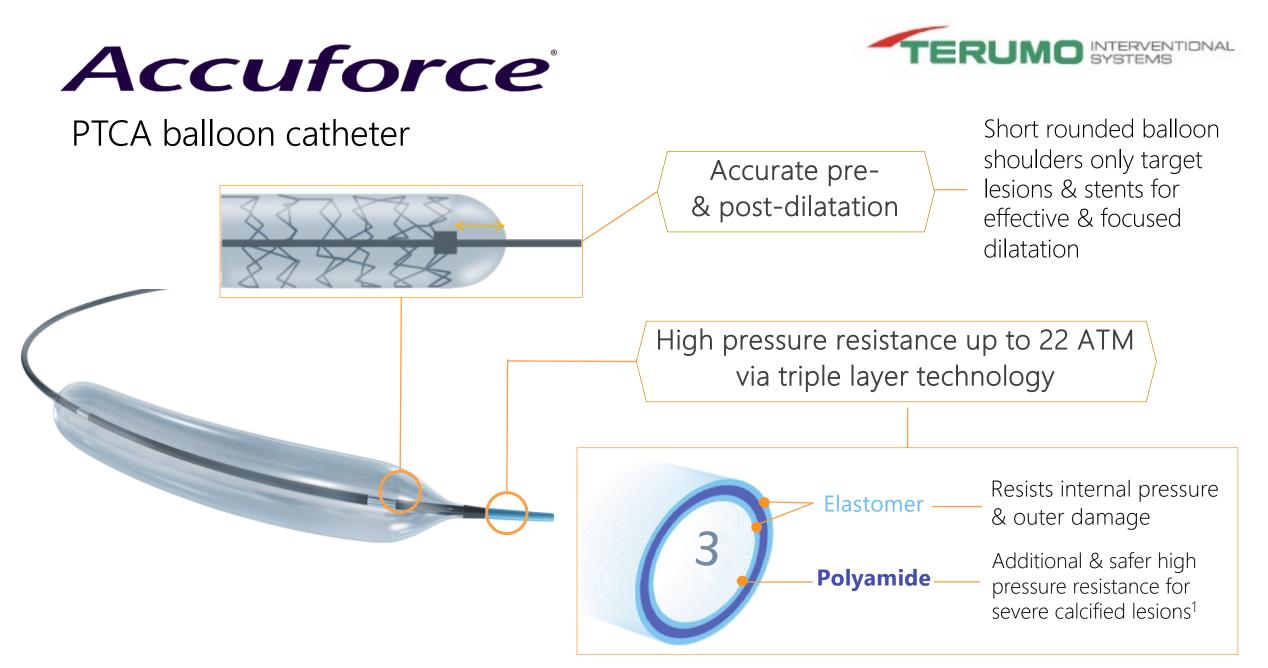
Proprietary durable hydrophilic coating *Hydrax plus* in all catheter balloon. It reduces the friction with the arterial wall improving the navigation.



Ø1.25<sub>mm</sub>



# NC Balloons









Improved balloon shoulder to marker band alignment Over-the-inner tip design 0.031" Crossing profile performance, and lessen tip catch Platinum iridium marker bands Provide optimal radiopacity and visibility 0.017" Ultra-low lesion entry profile Improves overall flexibility and performance Dual-layer non-compliant balloon material • Designed for less balloon growth and increased recross performance Bi-segment<sup>™</sup> inner shaft · Designed for maximum deliverability Reduced shaft profile Designed for exceptional simultaneous use performance Hydrophilic coating Х Reduces frictional force

Master the Complex<sup>™</sup>

Crossing



Accurate inflation is achieved by compliance of 0.55%/(atm) and axial elongation of 3%/(atm)

"Seamless" force conduction technology ensures enough **pushability** 

b.Outstanding kissing capabilities to 6F guiding catheter

#### High pressure resistant, RBP=22atm

#### High Rated Burst Pressure Available

•Nylon balloon material provides non-compliance at high pressure

•Puncture-resistant performance enables passing easily through the most hard calcification and being suitable for in-stent and after stent dilatation

> **Hydrophilic** S-coating with the newest technology can ensure durable and strong hydrophilic ability to pass through the most complex lesions with Zero resistance





# **POT PTCA**

#### **Balloon Dilatation Catheter**

A dedicated balloon for: Proximal Optimization Technique Distal Optimization Technique

www.brosmed.com



Hydrax -

#### **OPTIMAL CROSSABILITY**

Low tip entry, penetration and crossing profiles for crossing the most-challenging lesions

#### **HIGH TRACKABILITY**

Proprietary durable hydrophilic coating *Hydrax plus* in all catheter balloon. It reduces the friction with the arterial wall improving the navigation.

Non compliant PTCA balloon



## Drug Coated Balloons

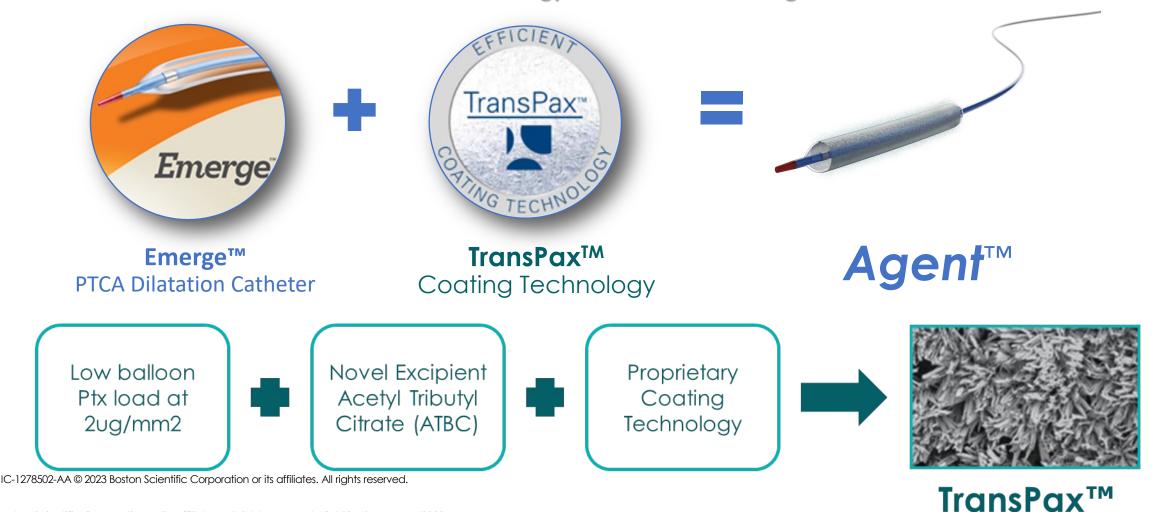


### AGENT<sup>™</sup> Drug Coated Balloon Features





Agent combines the exceptional deliverability of the Emerge<sup>™</sup> platform with the efficient drug transfer technology of TransPax<sup>™</sup> coating



## BECAUSE TIME MATTERS

Fast deliverability:

Latest balloon design

## **essential pro** Drug coated balloon



### Transfer **Tech**

**Rapid drug transfer and** 

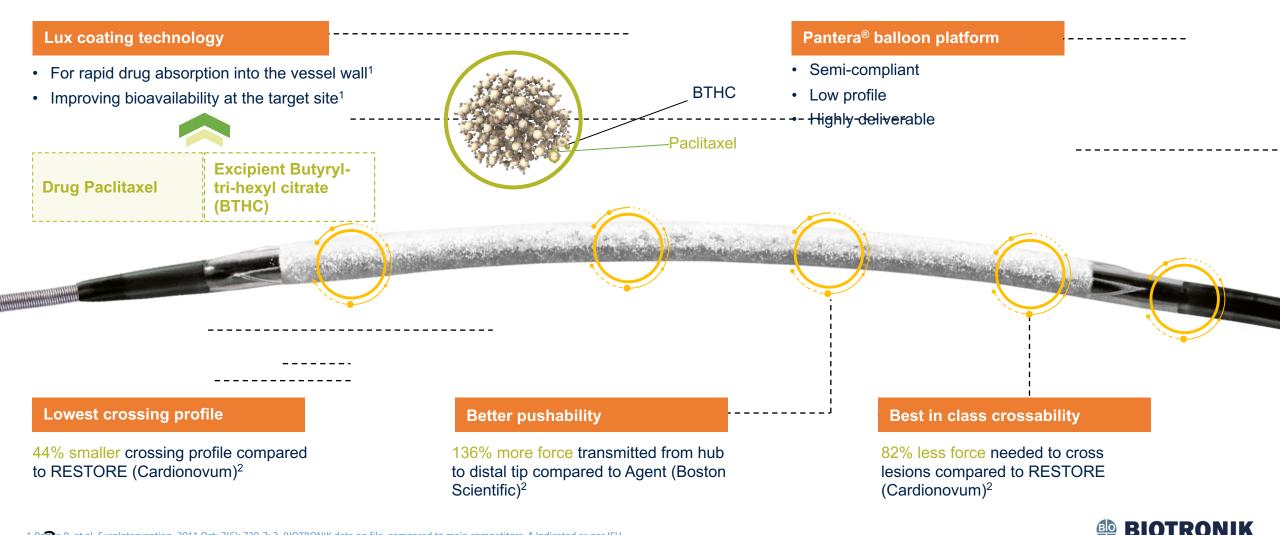
long term efficacy

Nanotechnology that makes the difference



www.ivascular.global

#### **Coronary Drug Coated Balloon**



excellence for life

1.Radie P. et al. EuroIntervention. 2011 Oct; 7(6): 730-7; 2. BIOTRONIK data on file, compared to main competitors. \* Indicated as per IFU.

Δ

## Medtronic

Engineering the extraordinary

#### Paclitaxel-Coated Balloon

## Prevail™

## **Performance you want for** treating complex patients

#### Superior deliverability<sup>1</sup>

Deliberately designed to maximize pushability: 2 times more pushable vs. InPact Falcon DCB

#### Rapid absorption of paclitaxel<sup>2</sup>

Facilitated by biocompatible urea expcipient<sup>3</sup>, 65% of drug is protected within the folds

#### Excellent safety and efficacy<sup>4</sup>

Demonstrated in the IN.PACT Falcon clinical program, confirmed by the PREVAIL study





1. Compared with IN.PACT FalconTM DCB, SeQuent®\* Please NEO DCB Agent™\* DCB and MagicTouch™\* DCB. Deliverability defined as pushability. Based on bench test data, 2020. Bench test data may not be indicative of clinical performance.

2. Prevail Instructions for Use.

3. Chang GH et al. Scientific Reports. May 2, 2019;9(1):6839.

4. Latib A, et al. J Invasive Cardiol. Published online August 19, 2021. PREVAIL study did not have powered endpoints. Prevail DCB and IN.PACT Falcon DCB uses the same drug coating.

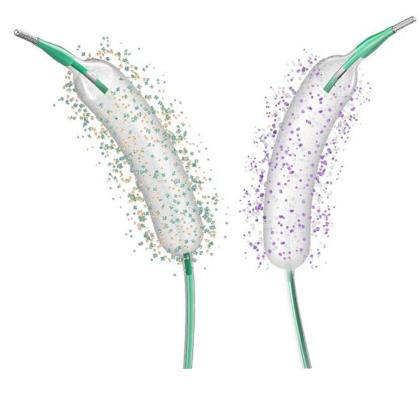


## SeQuent<sup>®</sup> DCBs The Proven Performers in Coronary Angioplasty

If you rely on decades of evidence...

#### **SEQUENT PLEASE NEO**

- Paclitaxel + lopromide coating
- Best Evidence for all coronary DCBs
- 110+ Studies
  - o ISR: 55+ studies
  - De-Novo: 65+ studies
- 25.000+ enrolled patients in 20+ countries
- 15+ years experience



If you want a new technology with a clinical pioneering role...

SEQUENT SCB

Sirolimus + BHT coating

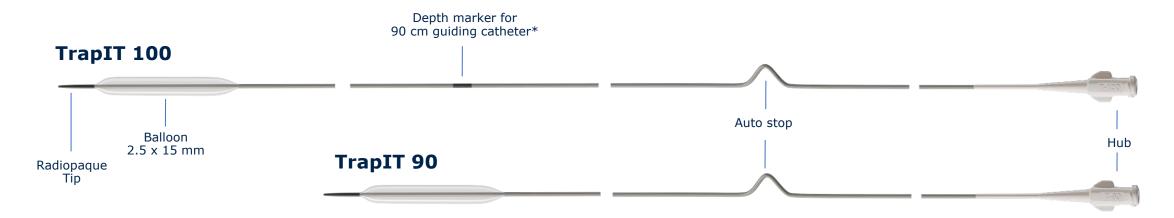
New innovative coating technology for:

o ISR: 3 RCTs

- o De-Novo: 2 RCTs
- Multi-center trials from Europe and Asia
- Ongoing trials for de-novo and real world

# Trapping Balloons

#### **Trapping Balloon**



## Unique auto-stop for positioning aid<sup>1</sup>

- Tactile auto-stop at hemostatic valve correct insertion depth
- Prevents the tip from exiting guiding catheter
- No X-ray required to position



#### Designed to trap with high trapping force<sup>1</sup>

- Dedicated trapping balloon to securely trap guide wires within guiding catheters to exchange OTW catheters
- No guide wire required to deliver TrapIT
- High trapping force at Nominal Pressure (8atm)
- 2.5mm diameter allows trapping in 6-8F guiding catheters





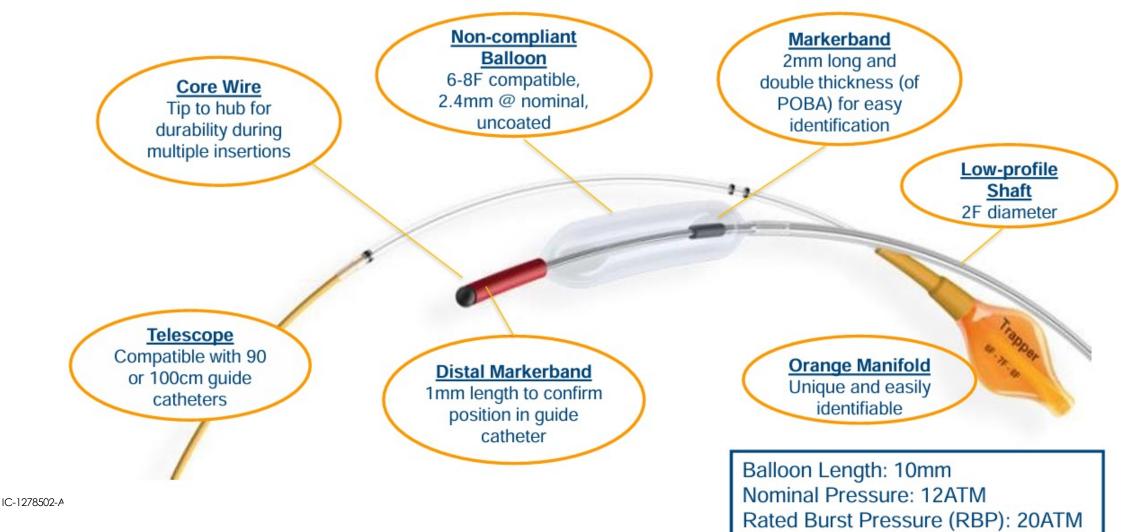
24OTW = over-the-wire. \*TrapIT 100 (TRP10015) only. Two versions available (T-90 and T-100) with respective auto-stop position for respective guiding catheter lengths (90 cm and 100 cm) 1. IMDS data on file.







#### Maximize the efficiency of complex cases by facilitating device exchanges



# **Re-entry Balloons**

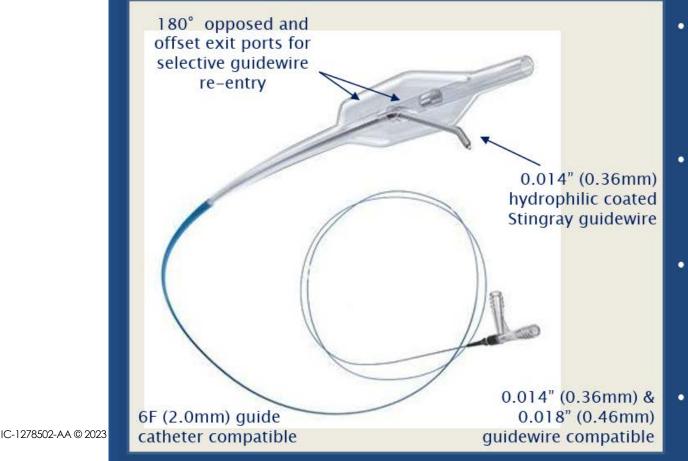


#### Stingray™ LP CTO Balloon Re-Entry Device Features





The Stingray LP System (catheter and guidewire) is designed to accurately target and re-enter the true lumen from a subintimal position in coronary arteries\*



- Self-orienting, flat balloon hugs the vessel, automatically positioning one exit port toward the true lumen
- 3.2F (1.07mm) shaft diameter
  Trap in 7F (2.33mm) guide
  STRAW in 8F (2.67mm) guide
- Stingray Guidewire's angled tip and distal probe are designed for facilitated re-entry into the true lumen
  - 2 radiopaque marker bands for exact placement

# Calcium Modifiers



AngioSculpt EVO

RX PTCA Scoring Balloon Catheter

Superb deliverability Reduced push force by 38% compared to previous-gen AngioSculpt with new hydrophilic coating<sup>1</sup>

## Maximize gain. Minimize risk.

D Koninklijke Philips N.V.

# Naviscore

Balloon for calcified lesions

Unique design combining the benefits of scoring and cutting balloons e Hybrid oesign

**Easy advance** Large plaque **Excellent recross without** up to the lesion modification capacity modifying its profile

Naviscore. Challenging calcifications limits









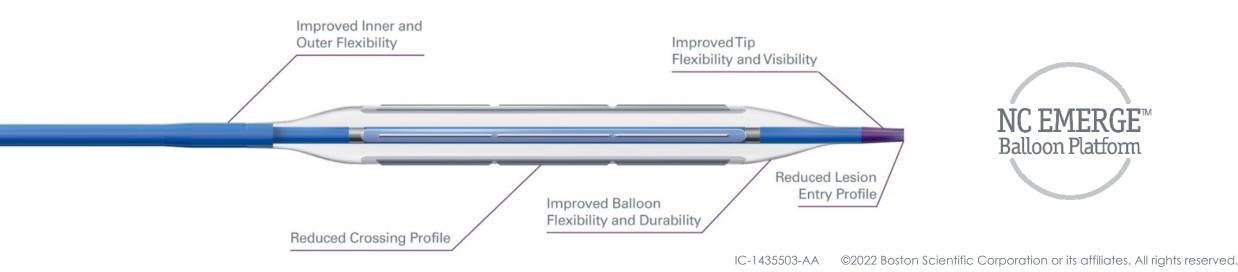
31

Traditional balloon angioplasty can result in complications like:

VESSEL DISSECTION POOR LUMINAL GAIN LESION RECOIL BALLOON SLIPPAGE POOR STENT APPOSITION

#### The WOLVERINE™ Advantage

The unique design of the WOLVERINE Cutting Balloon is designed with **proprietary atherotomes** on a **low pressure non-compliant balloon** to directly address each of these complications





120

**Coronary IVL System Components** 

Integrated 12mm SC balloon

facilitates energy transfer IVL=4 atm Nominal=6atm RBP=10 atm

Distal and proximal marker bands

**Generator** Portable, IV-pole Mountable Battery-Powered No External Connections

2 emitters that pulse once per second (120 pulses/catheter)

**Connector Cable** Smart Magnetic Connection Push-Button Activated Catheter RX System Any .014" Guidewire Standard PCI Technique 120 Lithotripsy Pulses

Diameter	Length	Pulses	Guide- wire	Guide Cath	Length	Tip Profile	Max Crossing Profile (in)
2.5-3.0- 3.5-4.0mm	12mm	120	0.014"	5F	138cm	0.023"	0.044"-0.047"

SHOCKWAVE C

## **ROTAPRO**<sup>TM</sup> Rotational Atherectomy System

#### Easy to Use. Hard on Calcium.

The ROTAPRO Atherectomy System is the gold standard in atherectomy technology.

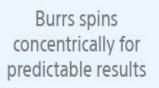


Access harder to reach anatomy and tighter lesions



Preferred in complex cases







Multiple burr sizes for better versatility



Trusted for 30 years to treat over 1.5 million patients in over 115 countries<sup>1</sup>





#### **CORONARY GUIDE WIRE**







## ELCA

**Coronary Laser Atherectomy Catheter** 

## Treatment versatility for vascular interventions

C Koninklijke Philips N.V.



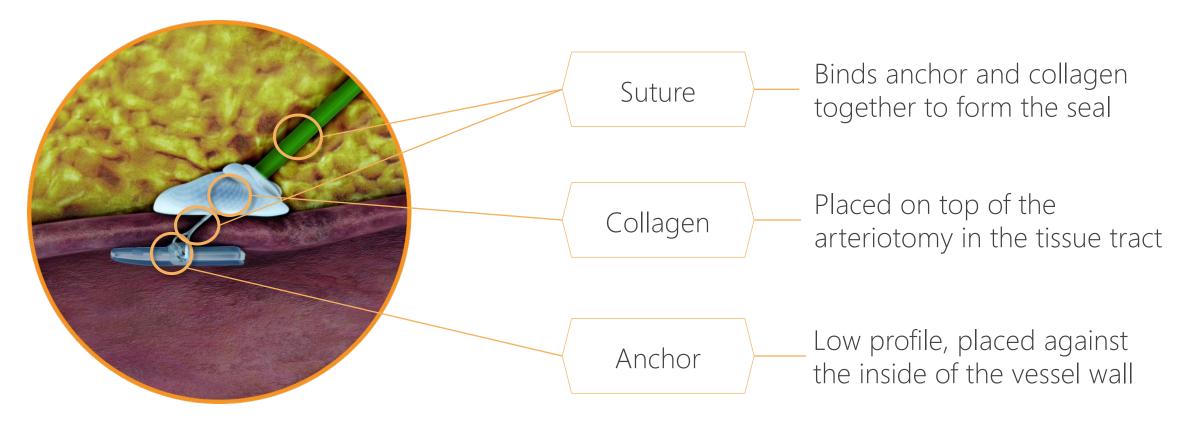
# Closure Devices





Hemostasis is achieved primarily by mechanical means (like a sandwich)

All components are completely **bio-absorbable** within 60-90 days by hydrolysis<sup>1</sup>



# Built upon the Perclose<sup>™</sup> Legacy

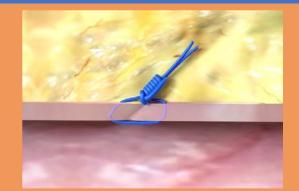


#### **REDESIGNED.**

Perclose<sup>™</sup> ProStyle<sup>™</sup>

Suture-Mediated Closure and Repair System

Perclose<sup>™</sup> ProStyle<sup>™</sup> SMCR System is the next generation Perclose<sup>™</sup> device redesigned with higher tensile-strength needles, enhanced usability, and a more intuitive deployment experience compared to earlier Perclose<sup>™</sup> generations.<sup>1,2</sup> **REPAIR.** 



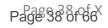
Perclose<sup>™</sup> devices achieve immediate and durable hemostasis via suture-mediated repair giving confidence of a secure close<sup>1</sup>, while preserving access sites for immediate re-access<sup>1</sup>, and enabling primary intention healing to begin.<sup>3</sup>

#### **RECOVER.**



The Perclose<sup>™</sup> ProStyle<sup>™</sup> SMCR System can enhance the patient experience by providing earlier patient mobilization, shortened hospital length of stay <sup>4,5</sup>, and a reduced risk of access site-related complications.<sup>6,7</sup>

1. Perclose<sup>™</sup> ProStyle<sup>™</sup> SMCR System – Instructions for Use (IFU). Refer to IFU for additional information. 2. Data on file at Abbott. 3. Primary intention healing occurs where vessel wall edges are brought together, adjacent to each other. This can be achieved with suture, stitches, staples and clips. Advances in Skin & Wound Care: Healing by Intention. Salcido, Richard. 2017. 4. Based on arterial access data. 5. Bhatt, Deepak L. et al. Successful "Pre-Closure" of 7Fr and 8Fr Femoral Arteriotomies With a 6Fr Suture-Based Device (The Multicenter Interventional Closer Registry). American Journal of Cardiology Vol 89. March 2002. 6. Perclose ProGlide<sup>™</sup> Versus Surgical Closure Outcomes – Real World Evidence. Schneider, Darren B; Krajcer, Zvonimir; et al. LINC 2018. 7. The Use of the Perclose ProGlide<sup>™</sup> Suture Mediated Closure (SMC) Device for Venous Access-Site Closure up to 24F Sheaths. Kar, Saibal; Hermiller, James; et al. CRT 2018.





# Coils

# **AZUR CX**

A unique balance of coil design and hydrogel technology for a wide range of procedures

Soft, flexible hydrogel for efficiency and controlled delivery

- Superior volume and packing density<sub>1,2</sub>
- Sustainable, natural tissue proliferation may reduce incidence of recanalization<sub>3,4</sub>
- Mechanical occlusion
- Up to 20-30 minutes of repositioning time



Anchor – use for control in high flow areas

Soft and flexible

*Solid core* – Supports neointima growth with hydrogel technology



*Cross coverage* – Designed to fill vessel with no gap in center



# Guide Catheters

# Medtronic

Engineering the extraordinary

Guide Catheter

# Launcher™

**Balanced performance** that's ahed of the curve

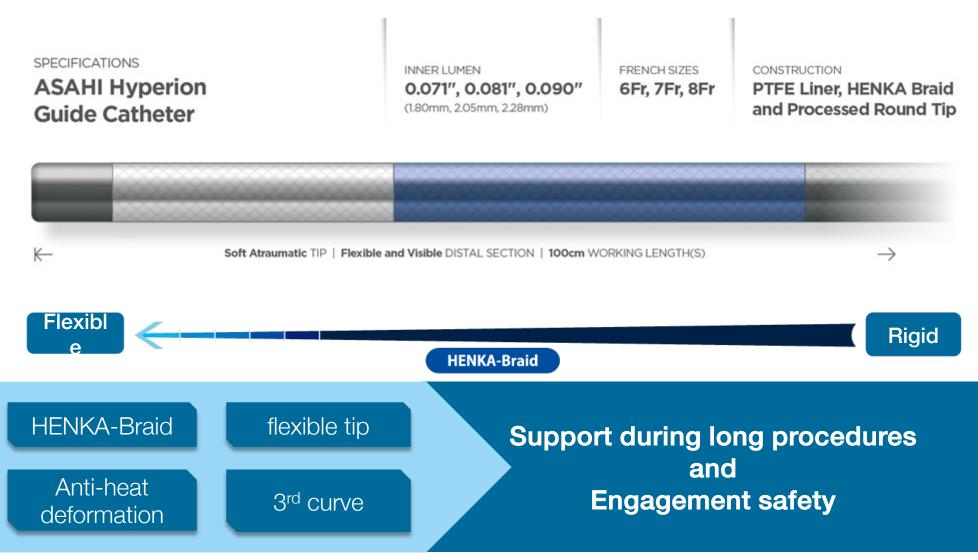
The Launcher<sup>™</sup> guide catheter offers you a blend of flexibility, support and visualization – the capability you need to respond to your challenging cases.

Advanced platform designed for multiple interventional approaches

- Full-wall technology construction provides kink resistance and stable torque control
- Supportive secondary curve for increased backup support and curve retention

Enhanced visualization Full range of traditional and specialty curves

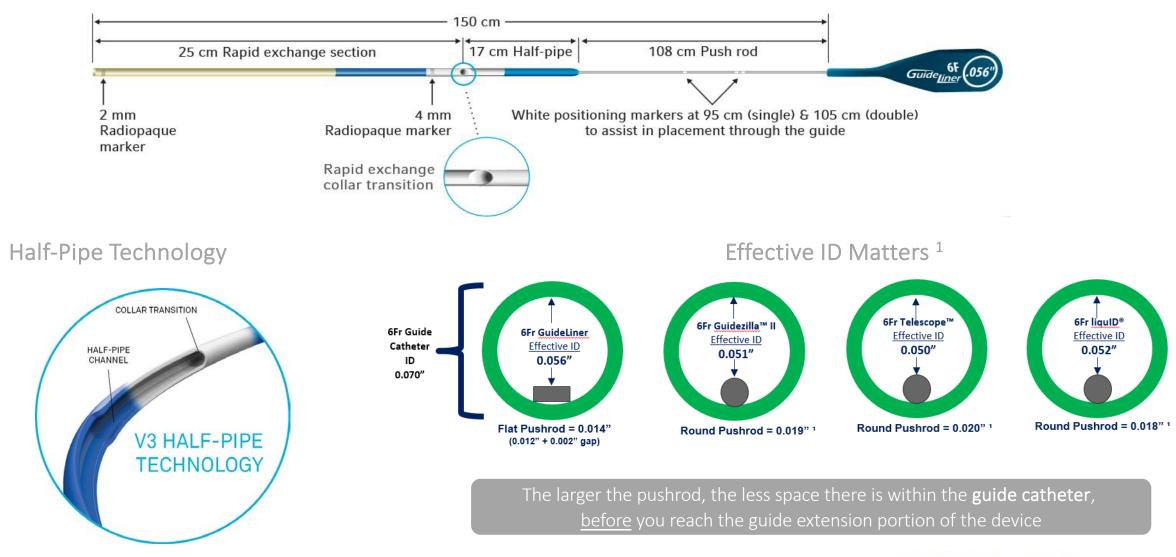
# **ASAHI Hyperion**





# Guide Extensions

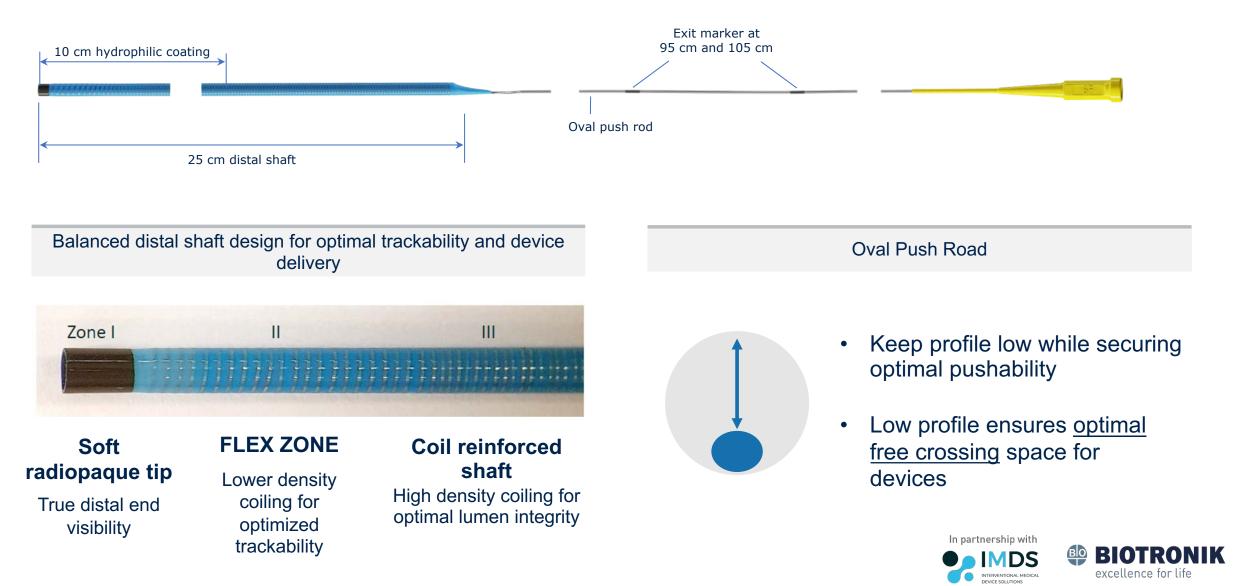
# GuideLiner V3 Catheter





<sup>1</sup> Effective ID = Guide Catheter I.D. (0.070") – Pushrod O.D. Dimensions taken from manufacturer's labeling and internal testing by Teleflex. Data on file at Teleflex All comparisons based on bench test results. Testing completed by Teleflex. Data on file.

#### **Guide Extension Catheter**









#### Z-Glide<sup>™</sup> Coating **Radiopaque Helical Collar** For improved **Designed for improved** deliverability Short Hypotube Transition strength and visibility for reduced device interaction **Expanded Size Matrix** 6, 7 & 8F 25 cm; Green Ergonomic Hub 6F 40cm Unique and easily (Rapid Exchange Length Noted) identifiable

# Medtronic

Engineering the extraordinary

Guide Extension Catheter

# Telescope™

**Extended reach**, smooth delivery

### Solid, round pushwire

Enhances pushability, which is a critical component of deliverability<sup>1</sup>

### Hydrophilic coating

Reduces friction with the inner lumen of the guide catheter and contributes to superior deliverability<sup>1</sup>

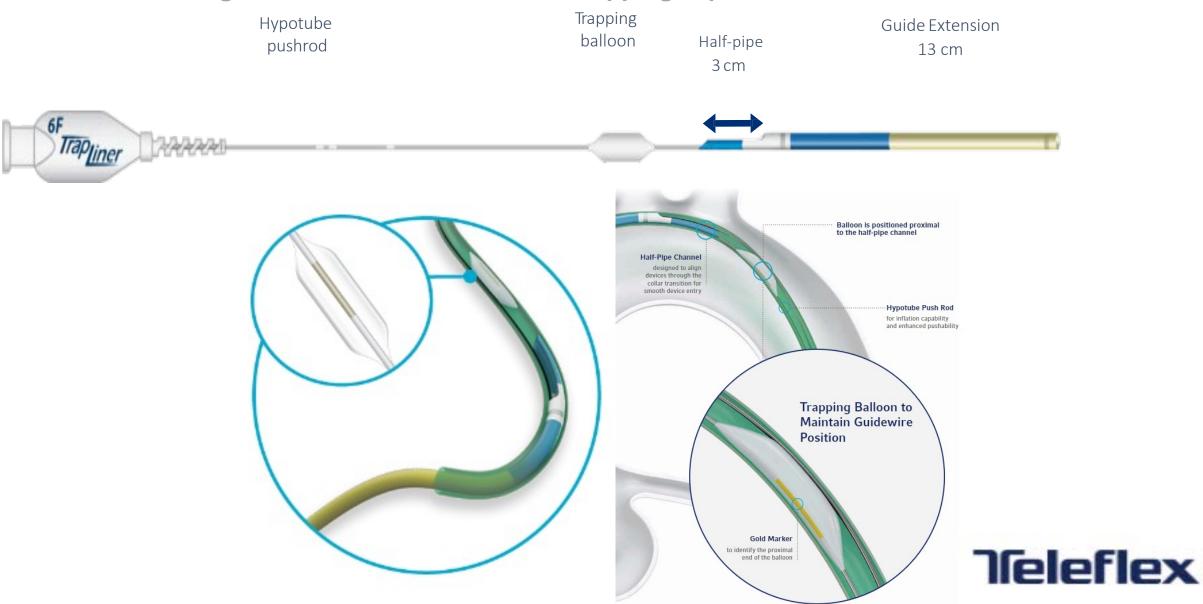
### Atraumatic soft polymer tip

Designed to responsively deflect and provide flexibility<sup>2</sup>



# TrapLiner

#### 2-in-1 device — guide extension catheter with trapping capabilities



# Guidewires



# Workhorse wires

# Hydrophilic coating + Hydrophobic tip

Sion Blue (0.5 g) Sion Blue ES (0.5 g)

### **Hydrophilic coating**

Samurai (0.5 g) Sion (0.7 g) Marvel (0.9 g) Samurai RC (1.2 g)

# Crossing wires (0.6 - 2.0 g)

### Hydrophilic coating

JUDO 1 (1.0 g) Gaia First (1.7 g) Gaia Next 1 (2.0 g)

Hydrophilic coating + Polymer jacket

Fielder XT-R (0.6 g) Fielder XT (0.8 g) Bandit (0.8 g) Fielder XT-A (1.0 g) FIGHTER (1.5 g)



# Crossing wires (2.1 - 3.9 g)

Hydrophilic coating

Ultimate Bros 3 (3.0 g) JUDO 3 (3.0 g) Gaia Second (3.5 g)

Hydrophilic coating + Polymer jacket Gladius EX (3.0 g) Gladius MG (3.0 g - Knuckle)



# Crossing wires (4.0 - 6.0 g)

Hydrophilic coating Gaia Next 2 (4.0 g) Gaia Third (4.5 g) Gaia Next 3 (6.0 g) JUDO 6 (6.0 g)

Hydrophilic coating + Polymer jacket

Raider (4.0 g)



# **Crossing wires (9.0 - 14.0 g)**

**Hydrophilic coating** 

Confianza Pro (9 g / 12 g) Hornet (10 g / 14 g) HT-INFILTRAC (10 g / 14 g) Warrior (14 g)

Hydrophobic coating

Miracle Bros (12 g)



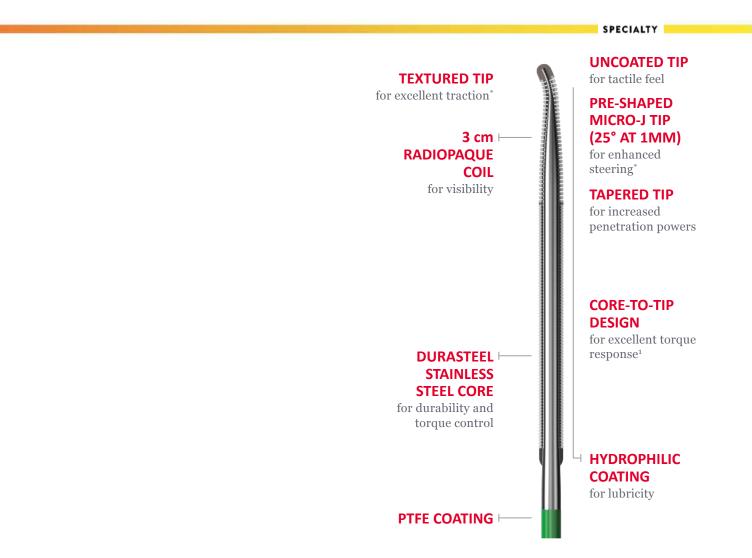


# **Externalization**

RG3, R350

# HI-TORQUE INFILTRAC<sup>™</sup> Guide Wire





#### **TECHINCAL FEATURES**

- Durasteel
- Core to tip
- Tapered tip
- Pre-shaped micro-J tip
- Micro-textured tip
- Uncoated tip
- 0.009" tip diameter

### **ASAHI CONFIANZA PRO 9**

**Tip Load** 9.0gf

**Core Material** Stainless Steel

Wire OD

0.23mm (0.009") / 0.36mm (0.014")

Cover

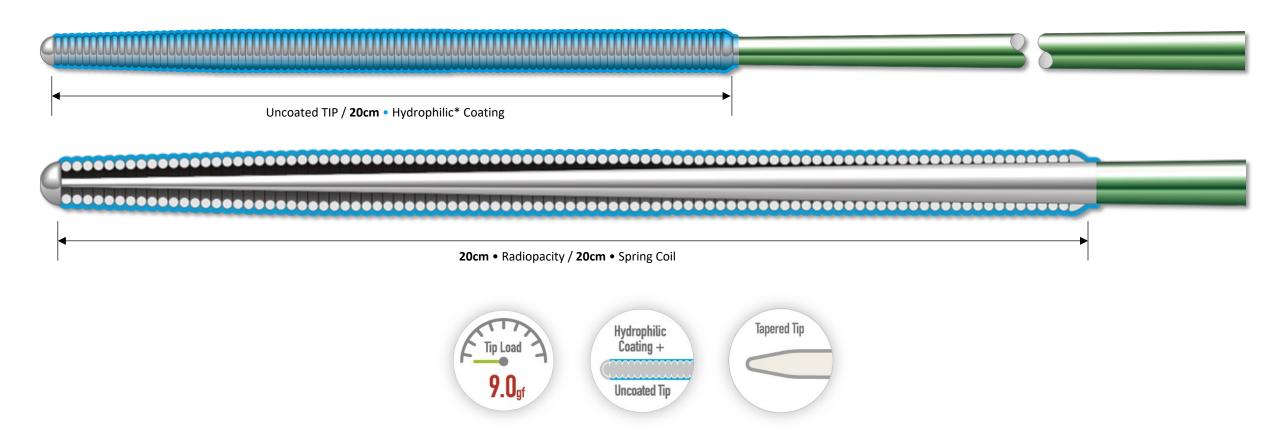
None

Coating

Uncoated Tip + Hydrophilic



\*Coated with SLIP-COAT® coating





## ASAHI CONFIANZA PRO 12

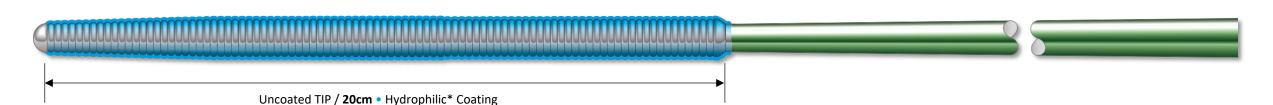
CONFIANZA PRO 12

**Tip Load** 12.0gf Core MaterialWire ODStainless Steel0.23mm

Wire OD 0.23mm (0.009") / 0.36mm (0.014") Coating

Uncoated Tip + Hydrophilic





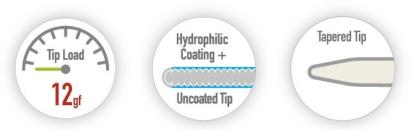
Cover

None



#### \_\_\_\_\_\_

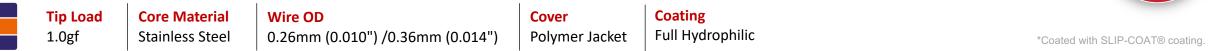
20cm • Radiopacity / 20cm • Spring Coil

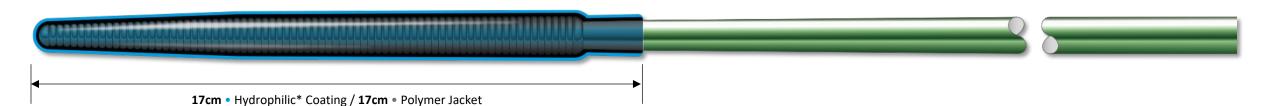


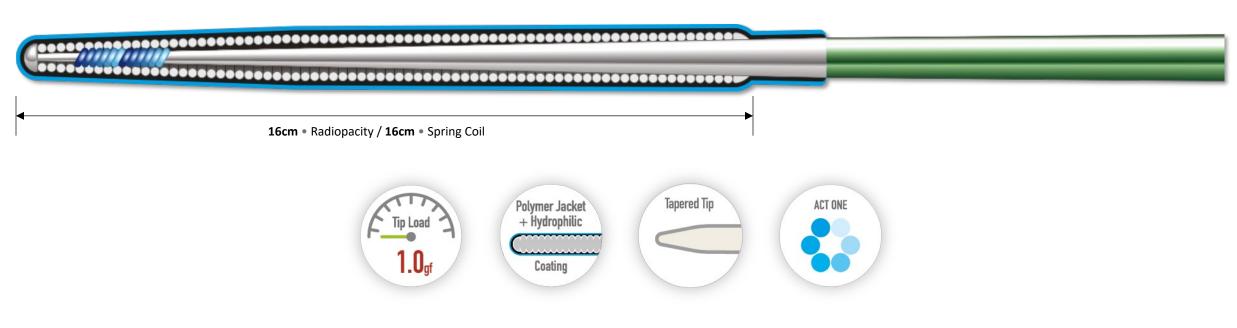


## Fielder XT-A





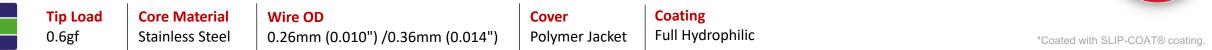


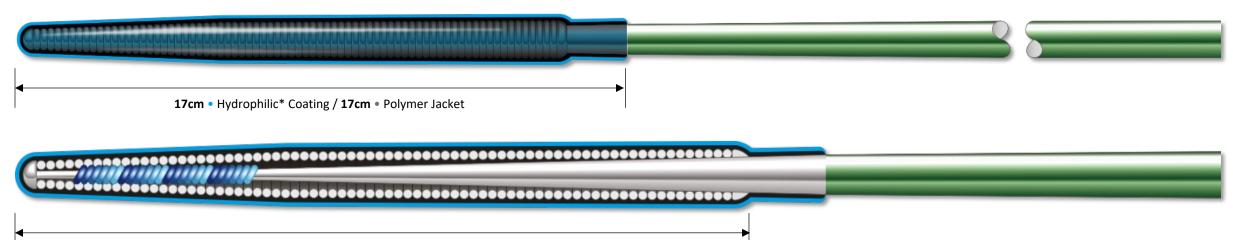




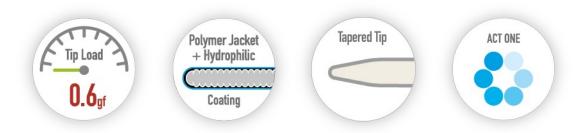
## Fielder XT-R







16cm • Radiopacity / 16cm • Spring Coil





0.8gf

**Tip Load** 

Fielder XT

**Core Material** Stainless Steel

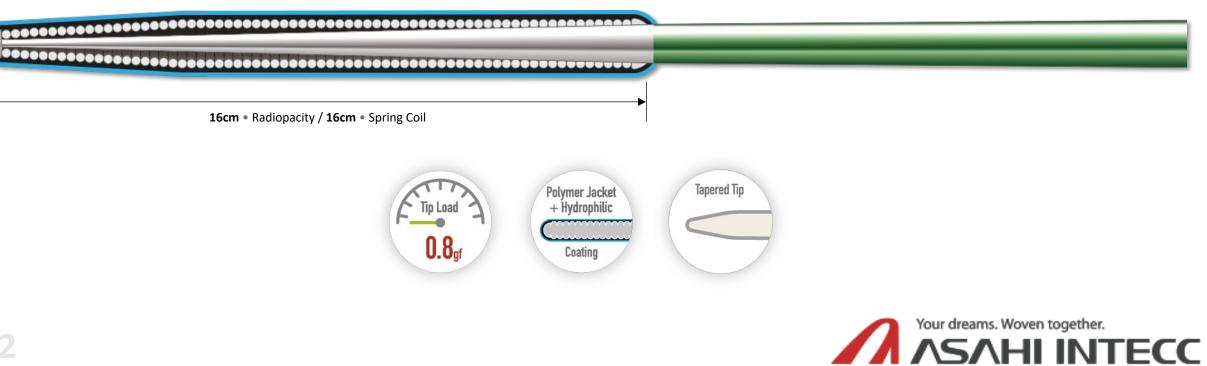
16cm • Hydrophilic\* Coating / 16cm • Polymer Jacket

Wire OD 0.23mm (0.009") /0.36mm (0.014")

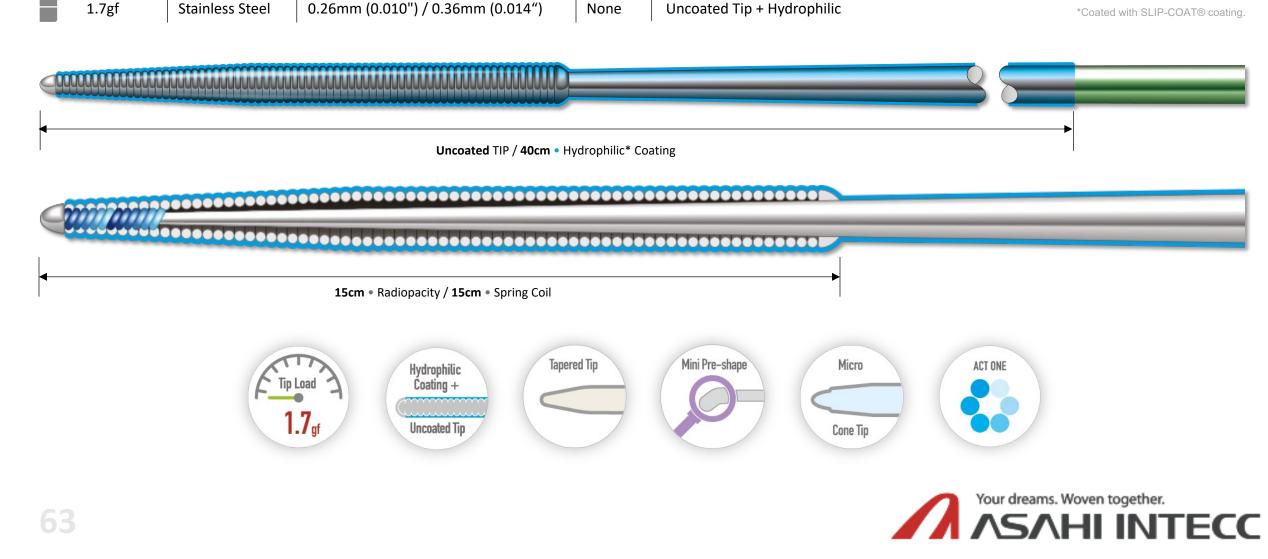
Cover

Coating Full Hydrophilic Polymer Jacket

\*Coated with SLIP-COAT® coating.







Cover

Coating

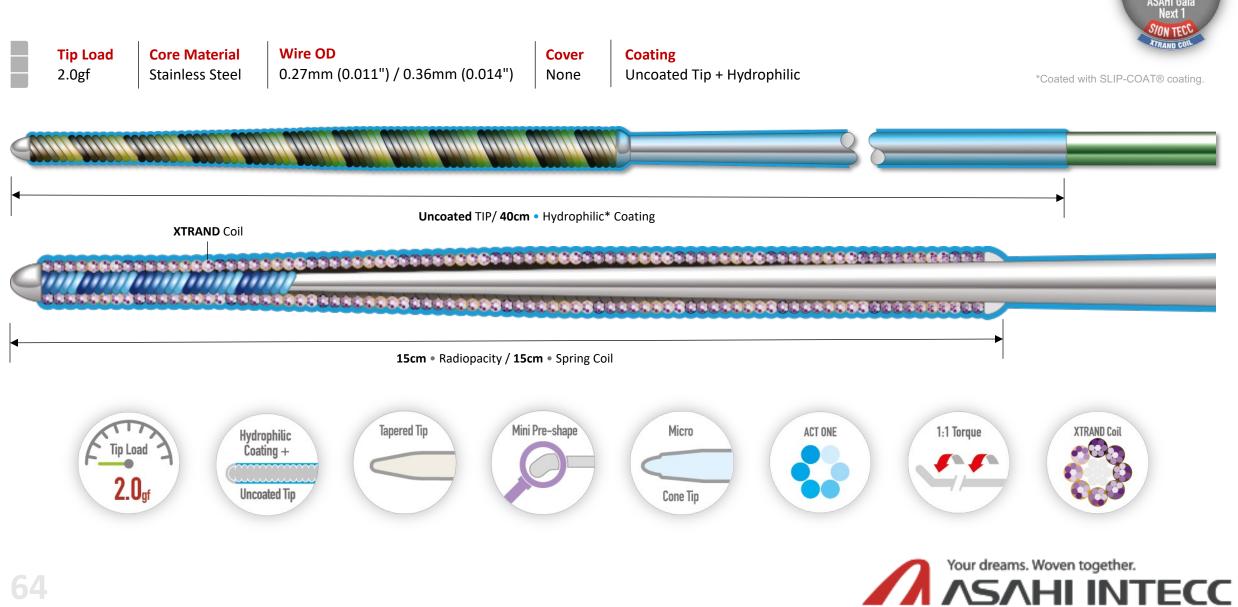
## ASAHI Gaia First

**Core Material** 

Wire OD

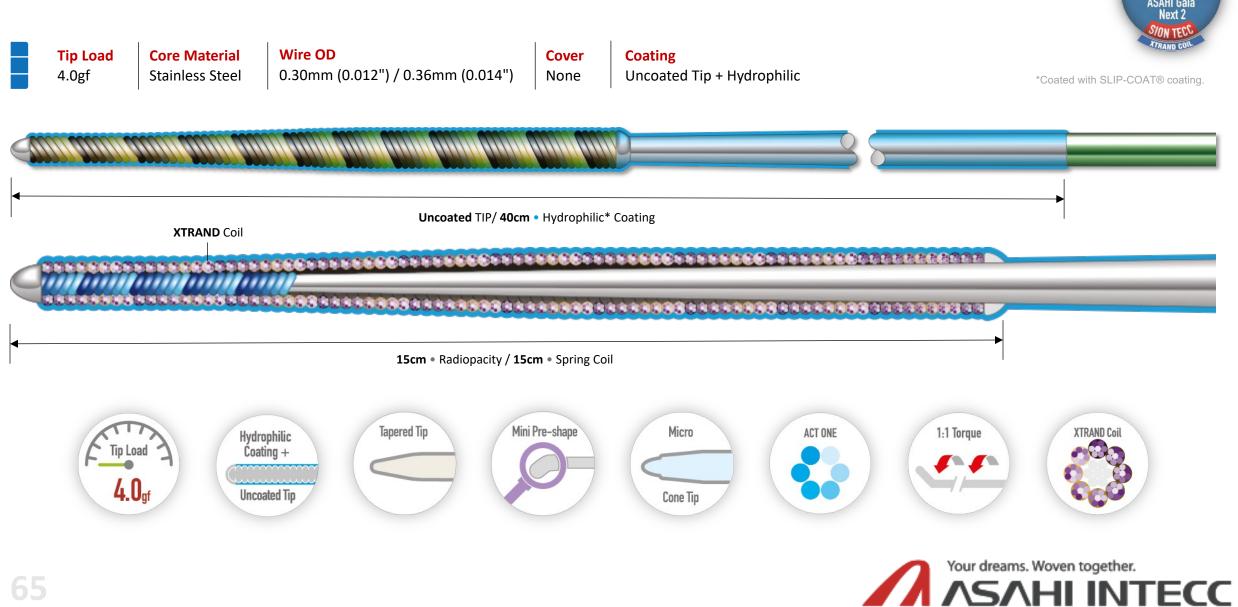
**Tip Load** 

Gaia First PLEXIBILITY SON TECS



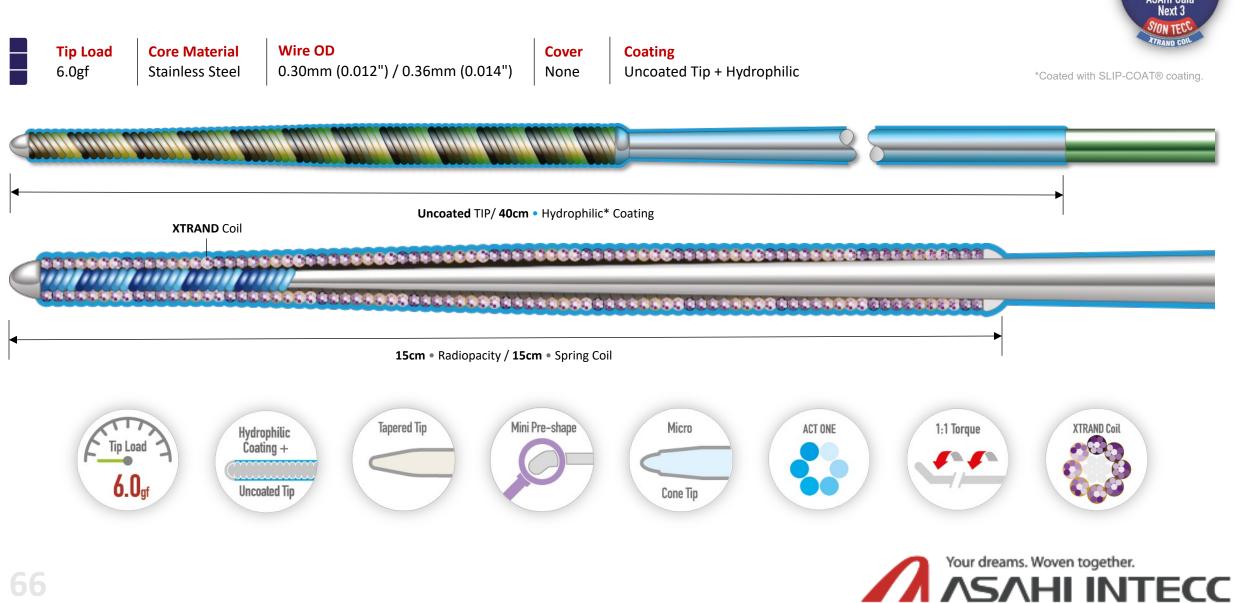
# ASAHI Gaia Next 1





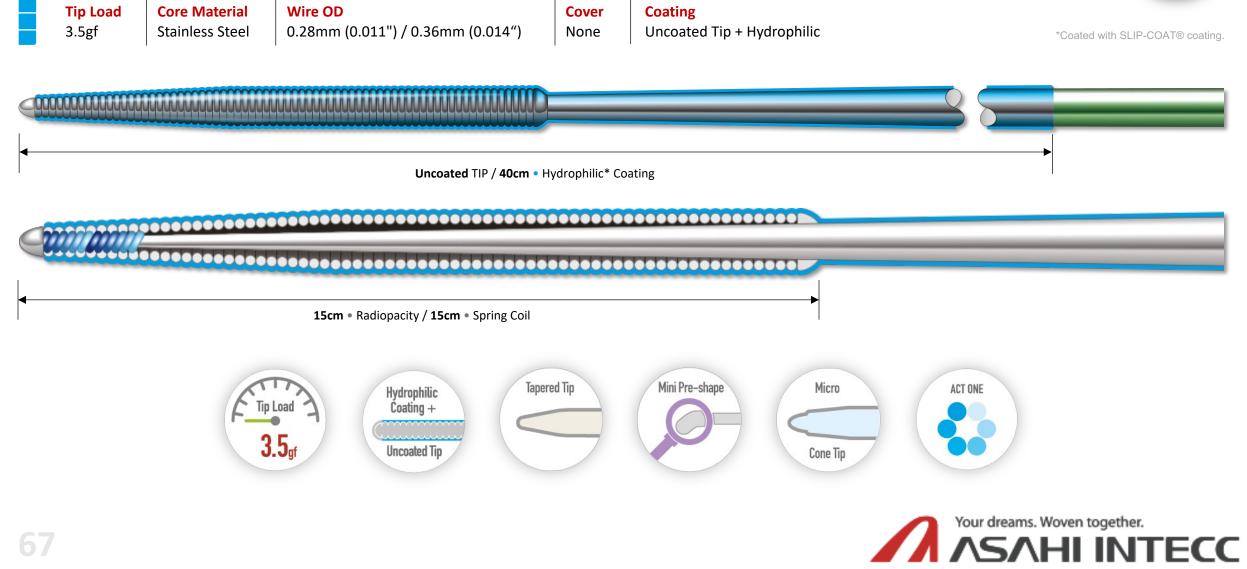
# ASAHI Gaia Next 2





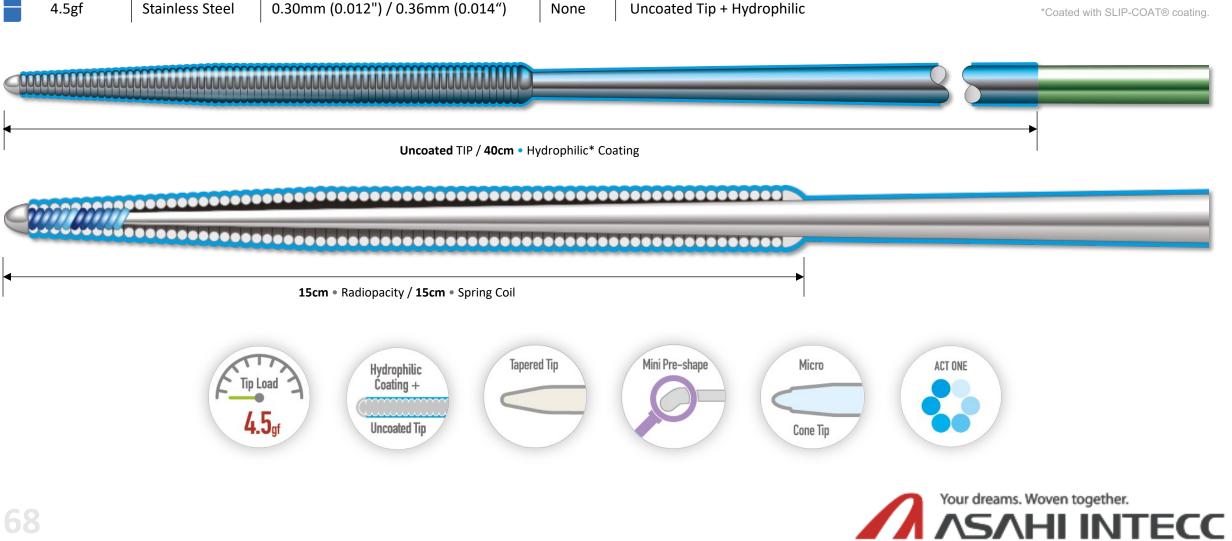
# ASAHI Gaia Next 3





# ASAHI Gaia Second





Cover

Coating

## ASAHI Gaia Third

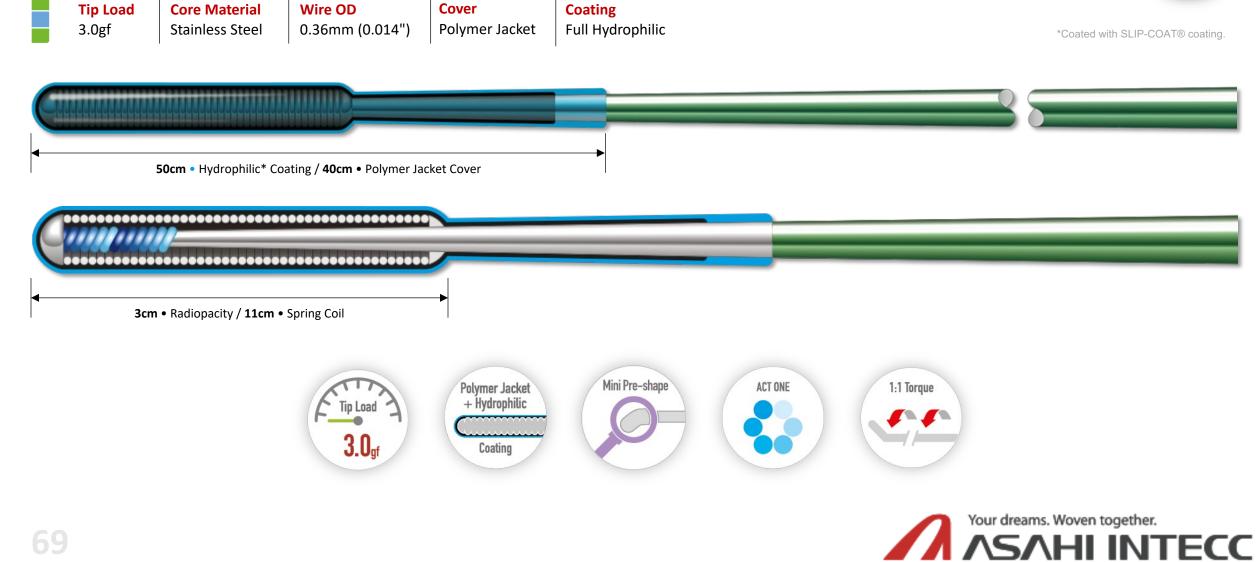
**Core Material** 

Wire OD

**Tip Load** 

# **ASAHI Gladius EX**





# **ASAHI Gladius MG**

**Tip Load** 3.0gf

**Core Material** Wire OD Stainless Steel

0.36mm (0.014")

Polymer Jacket

Cover

Coating Full Hydrophilic

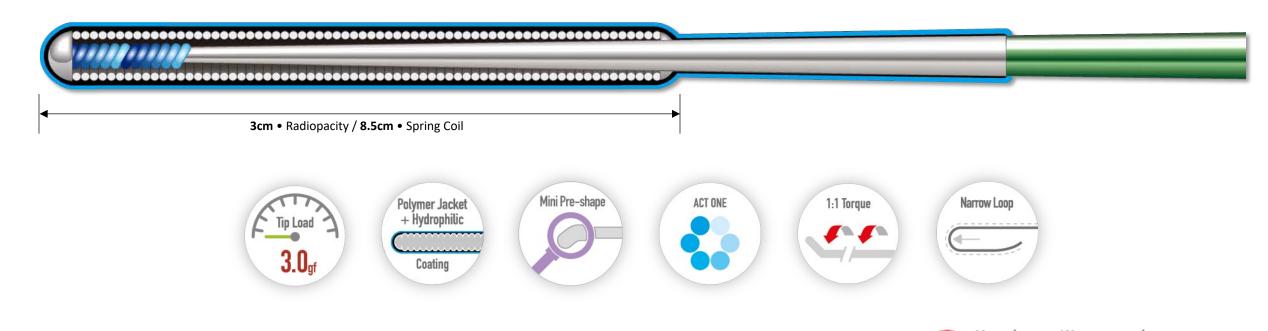
\*Coated with SLIP-COAT® coating.

ASAHI Gladius MG

SION TECS

# 

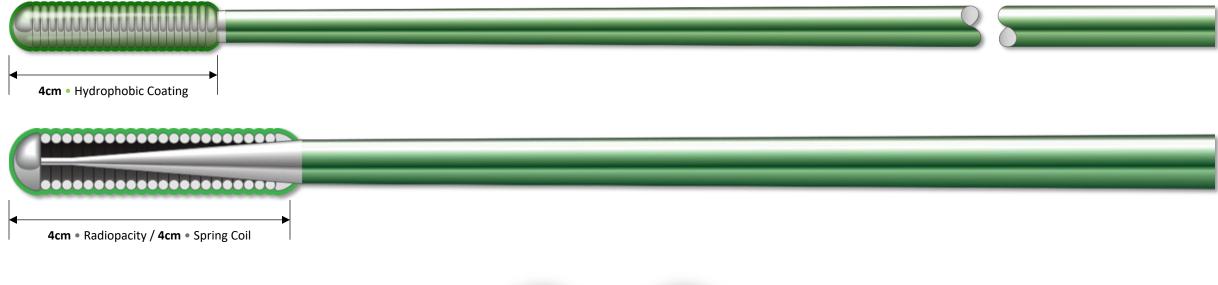
41cm • Hydrophilic\* Coating / 41cm • Polymer Jacket Cover







Tip Load	Core Material	Wire OD	Cover	Coating
0.7gf	Stainless Steel	0.36mm (0.014")	None	Full Hydrophobic





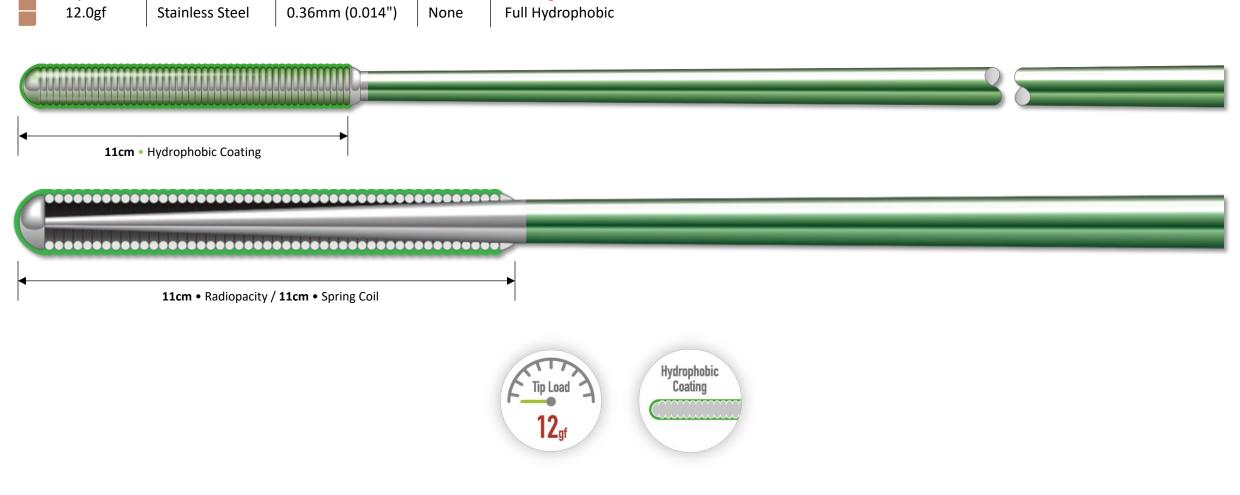


# MIRACLEbros 12

Wire OD

**Core Material** 





Coating

Cover

**Tip Load** 



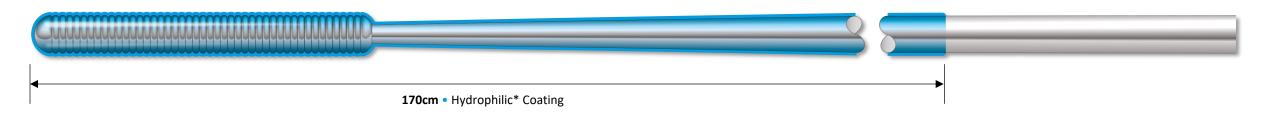




Tip LoadCore MaterialWire ODCover3.0gfStainless Steel0.26mm (0.010")None

Coating Full Hydrophilic

\*Coated with SLIP-COAT® coating.





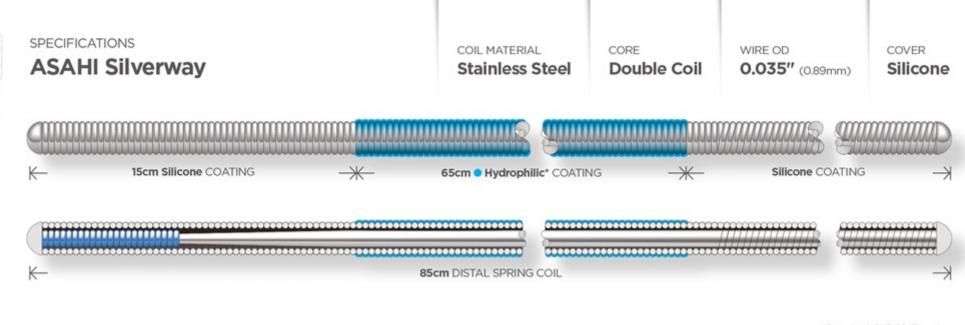
#### \_\_\_\_\_\_

3cm • Radiopacity / 8cm • Spring Coil

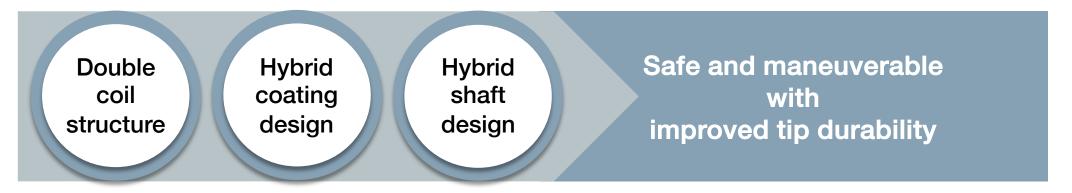




# **ASAHI Silverway**



\*Coated with SLIP-COAT\* coating





# **ASAHI SION black**

**Tip Load Core Material** 0.8gf Stainless Steel

Wire OD

0.36mm (0.014")

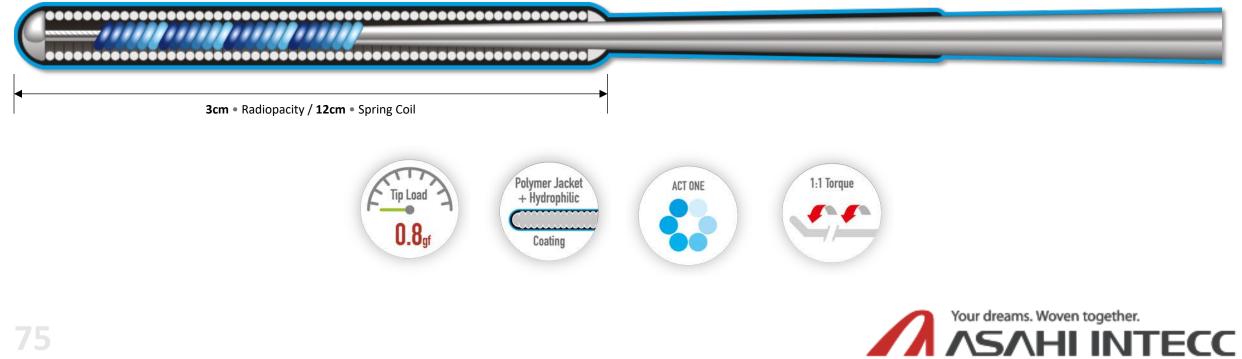
Polymer Jacket

Cover

Coating Full Hydrophilic

\*Coated with SLIP-COAT® coating.

# \_\_\_\_\_ 40cm • Hydrophilic\* Coating / 20cm • Polymer Jacket





# ASAHI SION blue ES

**Core Material** 

Stainless Steel

Wire OD

0.36mm (0.014")



\*Coated with SLIP-COAT® coating.



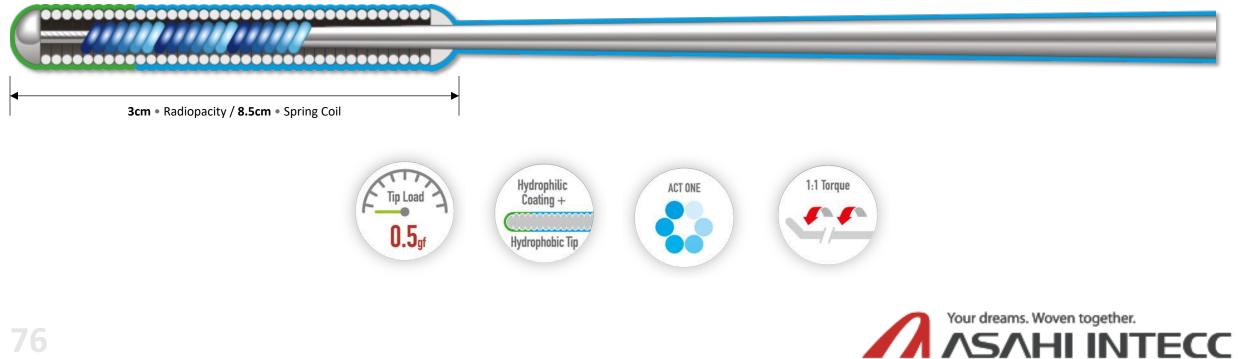
Hydrophobic + Hydrophilic

2.5cm • Hydrophobic Coating / 39.5cm • Hydrophilic\* Coating

Coating

Cover

None

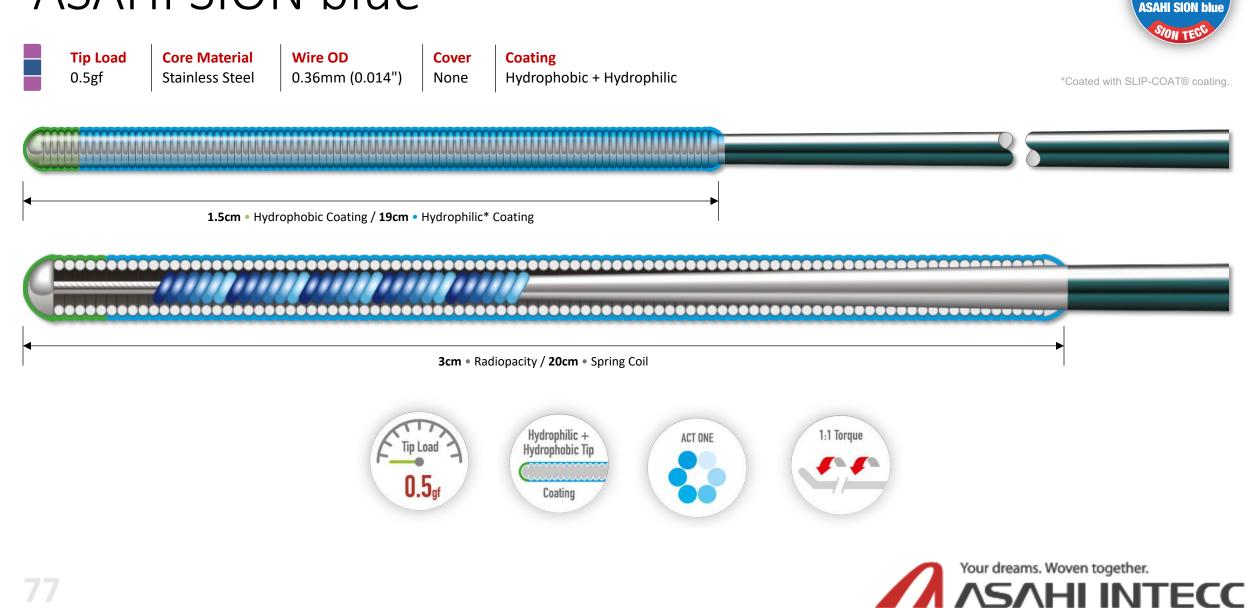


**Tip Load** 

0.5gf

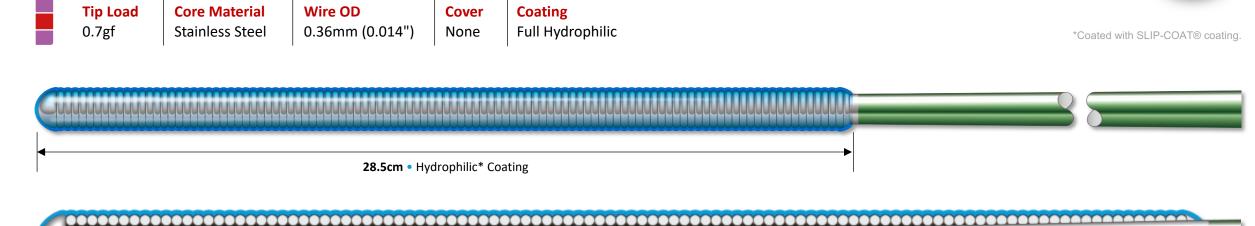
# ASAHI SION blue



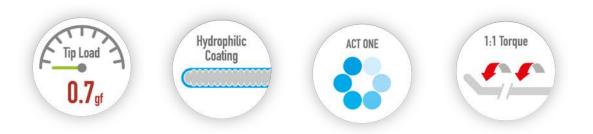


# ASAHI SION





3cm • Radiopacity / 28cm • Spring Coil





## ASAHI SUOH 03

**Core Material** 

Stainless Steel

**Tip Load** 

0.3gf

Wire OD

0.36mm (0.014")

Cover

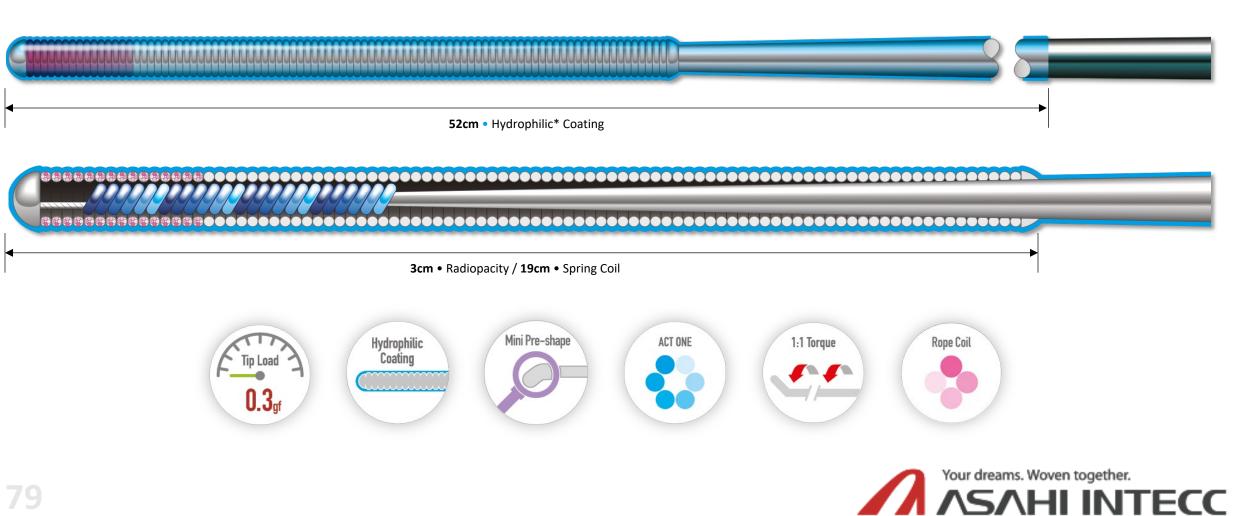
None

Coating

Full Hydrophilic







# ULTIMATEbros 3

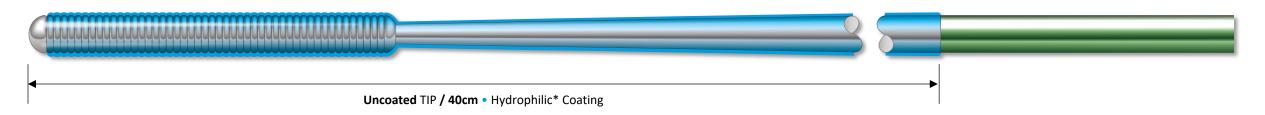


Tip LoadCore MaterialWi3.0gfStainless Steel0.3

Wire OD 0.36mm (0.014") CoverCoatingNoneUncoate

**Coating** Uncoated Tip + Hydrophilic

\*Coated with SLIP-COAT® coating.



#### 

#### 

11cm • Radiopacity / 11cm • Spring Coil



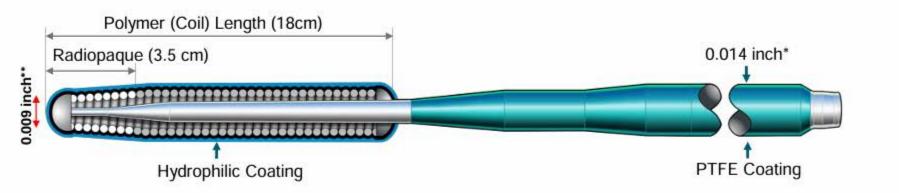








	Key Points	
Tapered tip		
Clear polymer jacket		
Hydrophilic coating		
Ideal prolapse wire		
Moderate rail support		



Name	Diameter* (inch/ mm)	Tip Diameter** (inch/mm)	Length (cm)	Coil length (cm)	Radiopaque (cm)	Tip Load (gf)	Core Material	Tip Shape	Coating
FIGHTER	0.014/ 0.36	0.009/ 0.23	190 300	18	3.5	1.5	Stainless Steel	Straight	Polymer Jacket, Hydrophilic







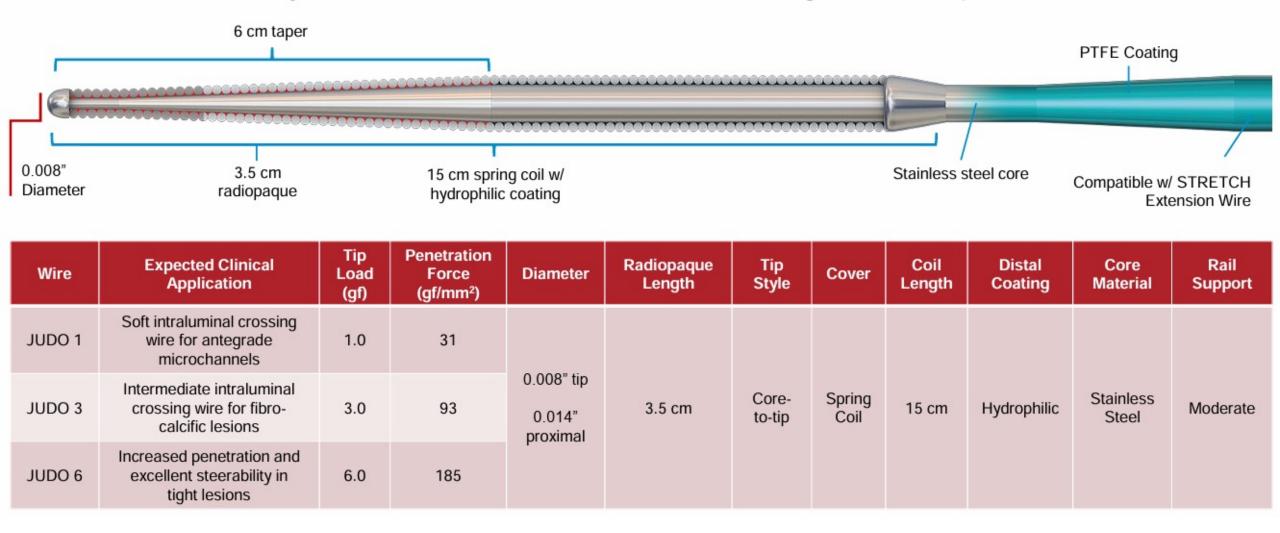








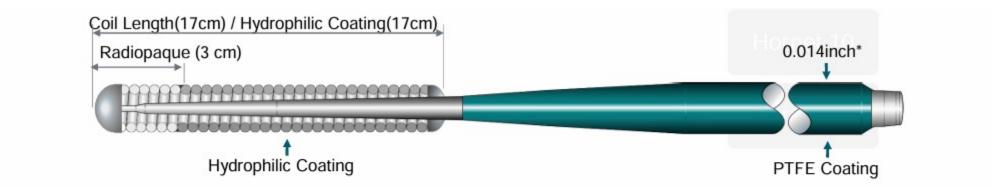
Designed with **Micro EMT** technology to have an ultra low crossing profile, excellent tactile feedback, and superb steerability, JUDO Guidewires are ideal **intraluminal crossing wires** for complex lesions











Name	Diameter* (inch/ mm)	Length (cm)	Coil (cm)	Radiopaque (cm)	Tip Load (gf)	Core Material	Tip Shape	Coating
MARVEL	0.014/ 0.37	190 300	17	3	0.9	Stainless Steel	Straight J	Hydrophilic







# Enhanced torque transmission for predictable and precise lesion access in calcified lesions



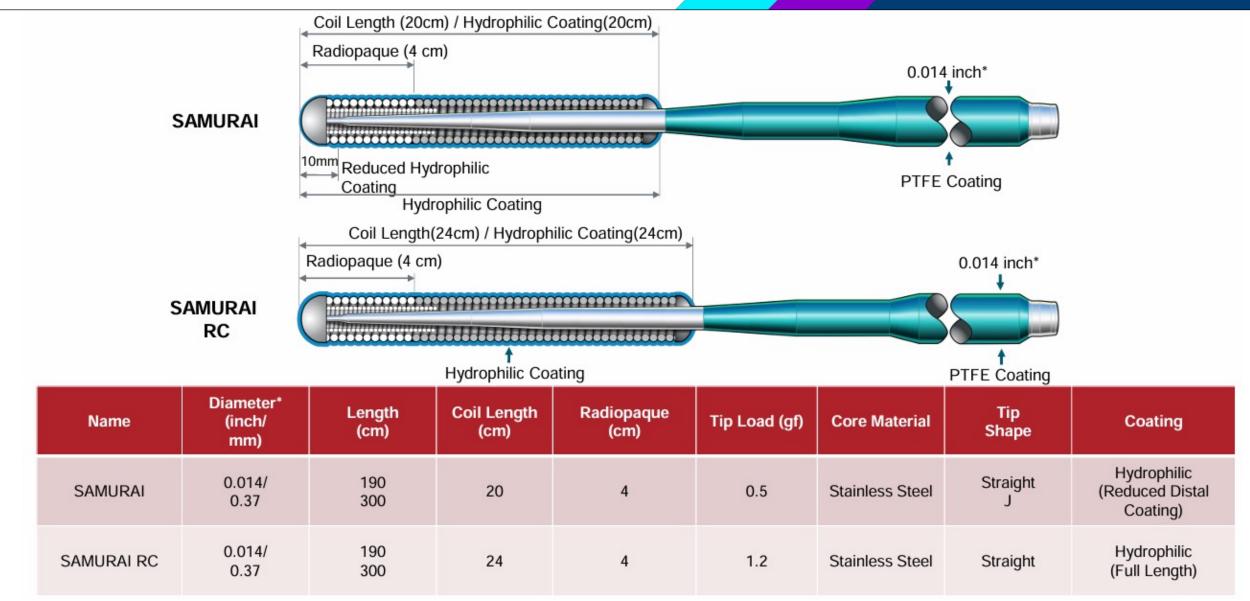
Reduce reliance on wire exchange devices, saving procedural time and lowering overall device spend



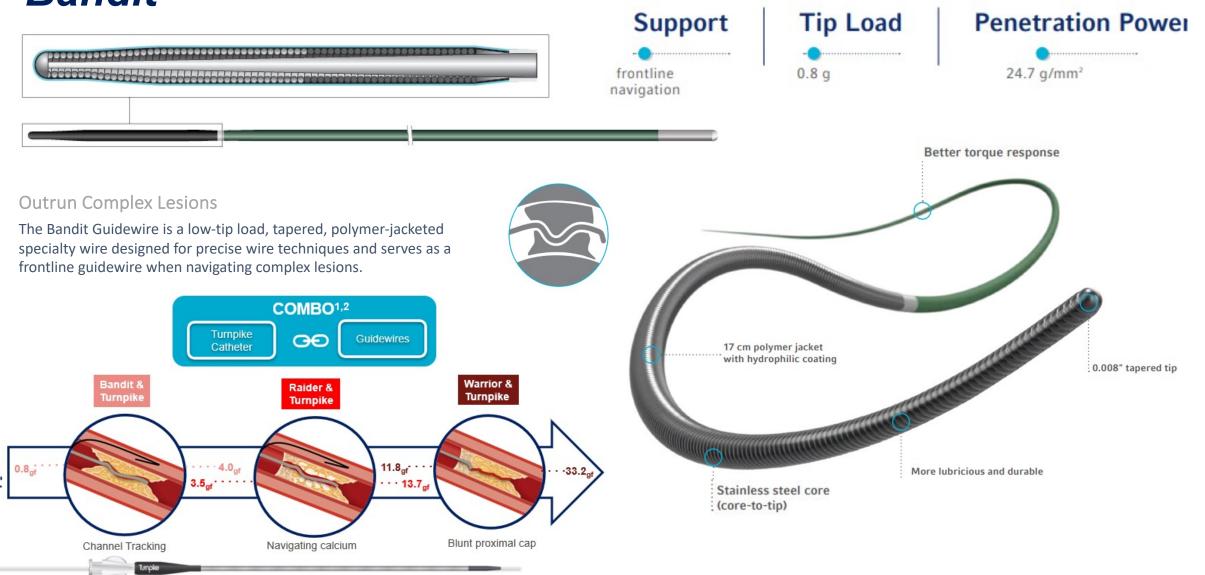
### SAMURAI – SAMURAI RC Features







# **Bandit**

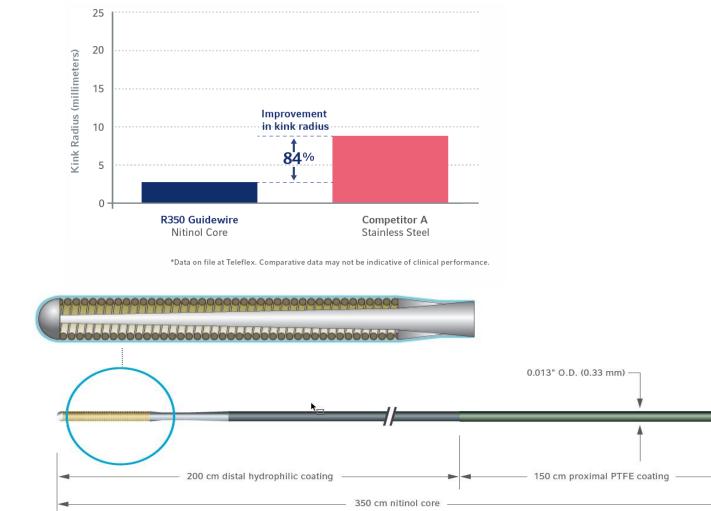


Teleflex

<sup>1</sup> All data based on bench test averages, n=5, performed by Teleflex. Bench test results may not necessarily be indicative of clinical performance. Data on file. <sup>2</sup> Effective tip load range is the tip load range that a guidewire exhibits as a microcatheter is advanced from 12mm to 2mm from the distal tip of the guidewire. <sup>3</sup> Penetration power refers to the tested tip load divided by the cross-sectional area of the distal tip.

## • R350

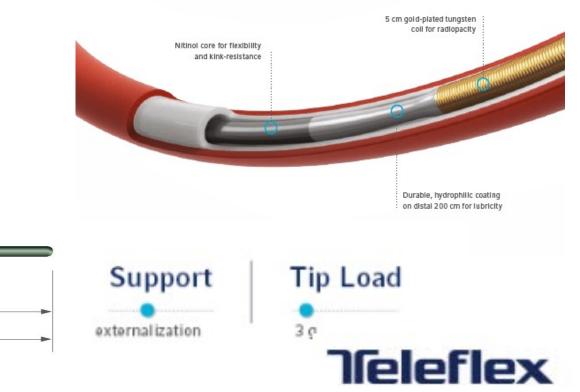
#### Nitinol Core for Improved Kink-Resistance\*



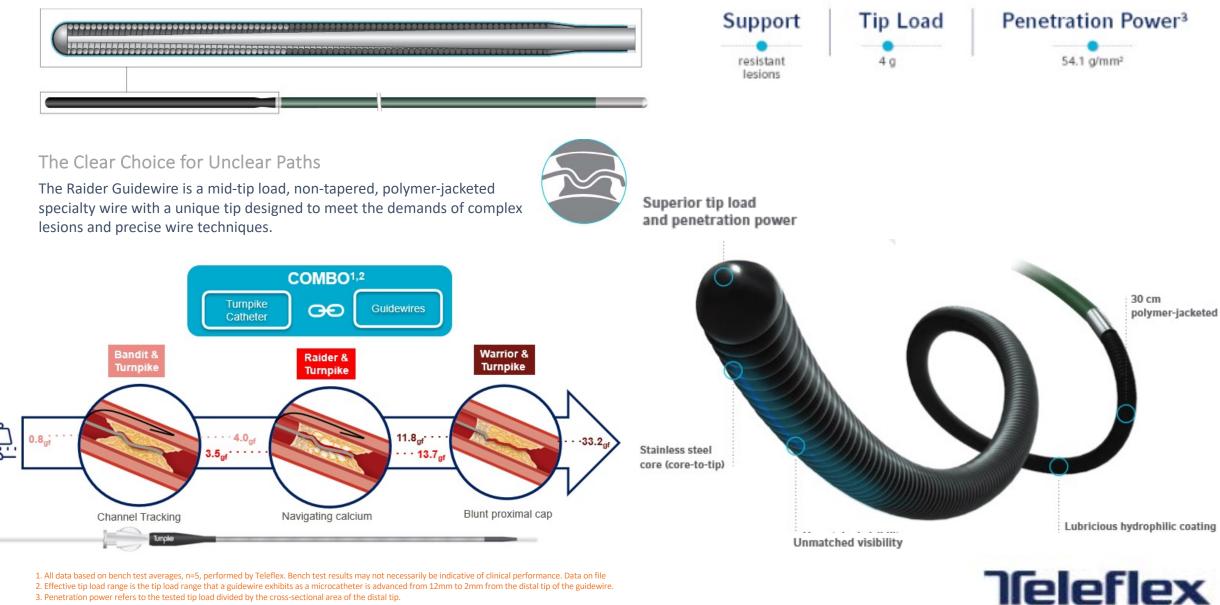
#### Nitinol Core for Enhanced Deliverability

The R350 Guidewire combines a 350 cm length for externalization with a nitinol core for flexibility and kink-resistance, resulting in excellent deliverability during advancement through tortuous vessels.

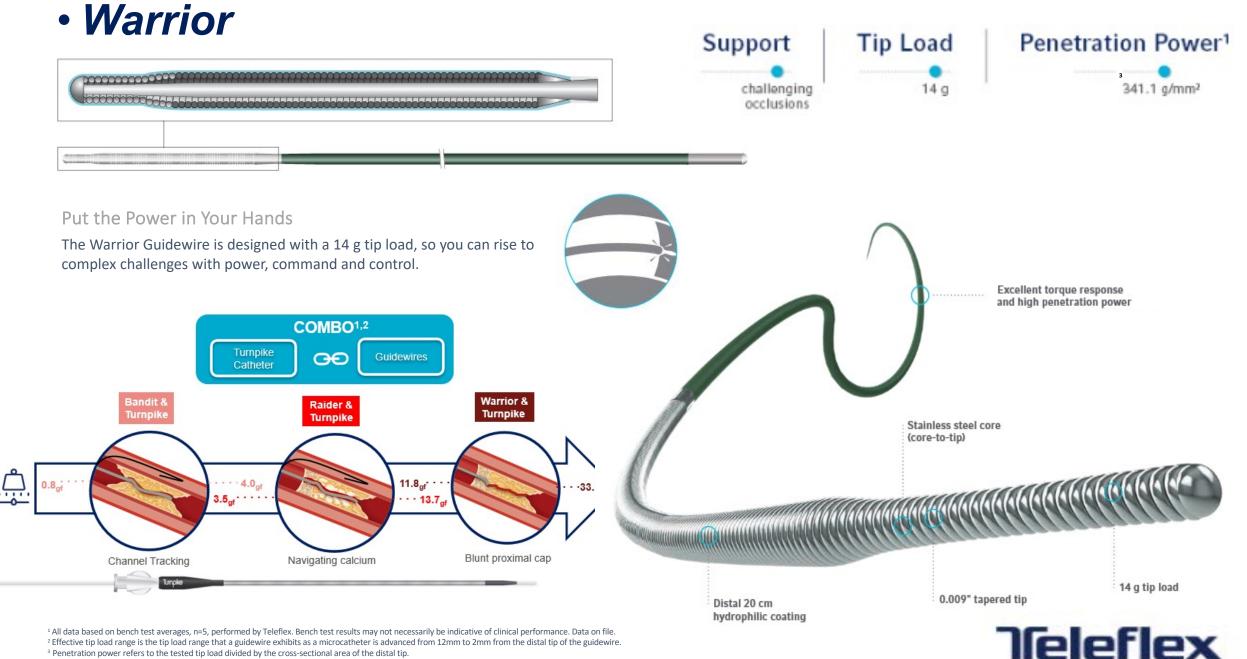
#### **Designed for Performance**



# Raider



1. All data based on bench test averages, n=5, performed by Teleflex. Bench test results may not necessarily be indicative of clinical performance. Data on file 2. Effective tip load range is the tip load range that a guidewire exhibits as a microcatheter is advanced from 12mm to 2mm from the distal tip of the guidewire. 3. Penetration power refers to the tested tip load divided by the cross-sectional area of the distal tip.



<sup>3</sup> Penetration power refers to the tested tip load divided by the cross-sectional area of the distal tip.



# Imaging

# Ultreon<sup>™</sup> Software

See Simply. Act Decisively.

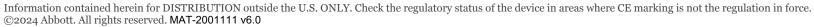
Make fast, accurate clinical decisions with the help of Al<sup>2</sup>

The artificial intelligence (AI) in Ultreon™ Software gives you:

#### Calcium assessment

- Calcium presence in target vessel
- Calcium arc on a given frame
- Calcium thickness on a given frame
- External Elastic Lamina (EEL) Assessment
  - EEL presence
  - EEL diameter















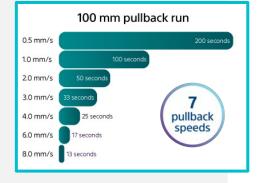
### Automated Lesion Assessment (ALA™)

#### Precise Vessel Measurements<sup>1</sup>

- Al-enhanced lumen and vessel borders
- Vessel profile
- Key frame markers

#### Fast Pullback §§ High quality images at the pullback speed you want

Automatic pullback now includes faster speeds up to 8 mm/s allowing for quicker vessel imaging





Optimize your treatment decisions by quickly locating regions of pressure change during a pullback

#### Tableside Control § Complete control from the sterile field

Operate IVUS and capture physiological measurements on your integrated system without leaving the sterile field



<sup>§§</sup>Fast pullback includes 0.5, 1, 2, 3, 4, 6, or 8 mm/s
\*DFR or Diastolic hyperemia free ratio is a type of hyperemia free physiologic index
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Images for educational purposes only and are not predictive of results in other cases. 2023 © Boston Scientific Corporation or its affiliates. All rights reserved. IC-1717601-AA



### Opticross<sup>™</sup> HD 60 MhZ Features





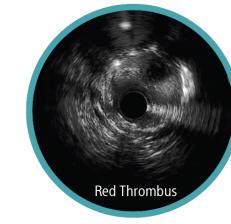
High definition imaging catheters with clear images and exceptional deliverability to guide confident treatment decisions

# Exceptional Deliverability

Well-balanced engineering design







#### 5F and 6F Compatible

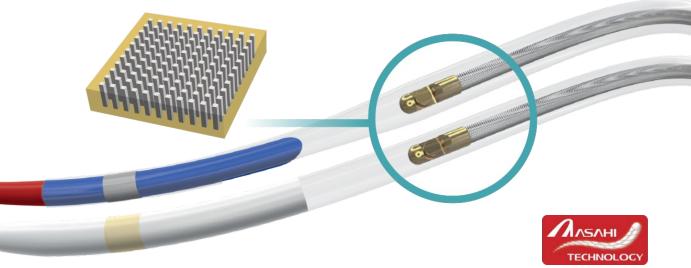
Assist in more cases

### Advanced 60 MHz Composite Transducer

Precise image with 6 mm depth for small to large vessel assessment



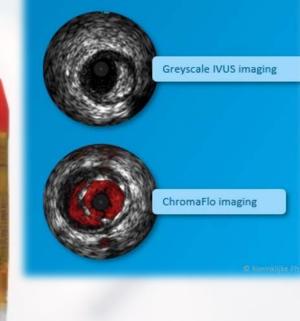
Case images courtesy of Dr. Claudia COSGROVE, St George's Hospital, London, UK. Images for educational purposes only and are not predictive of results in other cases 2023 © Boston Scientific Corporation or its affiliates. All rights reserved. IC-1717601-AA



# Eagle Eye Platinum Eagle Eye Platinum Short Tip

RX Digital IVUS Catheters

# The trusted IVUS catheters





# MCS

# Impella CP<sup>®</sup> with SmartAssist<sup>®</sup>

### **CARDIAC PUMP**

 ✓ INCREASE HEMODYNAMIC SUPPORT
 ✓ PEAK FLOW UP TO A 4.3 L/MIN
 ✓ NO MORE UFH IN THE CIRCUIT

### **ADVANCED METRICS**

- ✓ SMART METRICS FOR REAL TIME EVALUATION OF HEART FUNCTION
- ✓ WEANING TRENDS TO IMPROVE MCS DESCALATION

### **ARTERIAL ACCESS**

✓ REPOSITIONING UNIT TO INCREASE HEMOSTASIS AND CATHETER STABILITY

ALLOW A SAFE AND QUICK ARTERIAL REACCESS

### **SMART SOFTWARE**

✓ SAFE, QUICK AND USER-FRIENDLY SOFTWARE

✓ ALARM AND PROBLEMS GUIDE ASSISTANCE

Recovering hearts. Saving Lives.<sup>™</sup>

ABIOMED

# 6 Fr pigtail inlet area radiopaque marker optical senso outlet area ump motor: 14 Fr **Fr delivery** catheter

# Impella CP<sup>®</sup> with SmartAssist<sup>®</sup>

Overview

- 1. Impella CP with SmartAssist
- 2. Catheter Shaft
- 3. StatLock® Suture Pad
- 4. Reaccess Sheath
- 5. Anticontamination Sleeve
- 6. Impella Plug with Sidearm

3 4 2 6 5 Glucose

**BIOMED** 

Recovering hearts. Saving lives.

Peak Flow: 4.3L/min Maximum Mean: 3.7 L/min Speed Range: 0 to 46,000 rpm Interventional Length: 92-98cm

## SmartAssist – Intelligently Manage Guidance for Successful Weaning



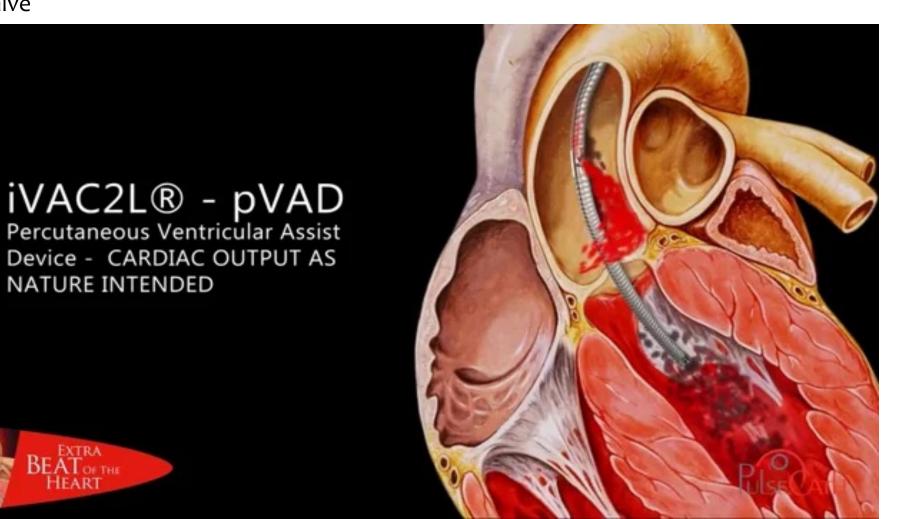
Recovering hearts. Saving lives.

FDA Approved, PMA Supplement, 2018

Metrics are for informational purposes and are not intended for diagnostic use. Values must be verified independently using an approved diagnostic device and must not be used for patient monitoring

### iVAC 2L Short Term Mechanical Assist Device

- 17 Fr Catheter based pulsatile LV support, 40 cc Membrane pump
- Provides short term solution to support complex high risk PCI procedures.
- Unloading LV and overtake myocardial workload and increase up to 2L/min additional volume to natural cardiac output
- Bi-directional valve



# Microcatheters



### **Single Lumen Microcatheters**

**ASAHI:** Corsair Pro, Corsair Pro XS, Caravel, Tornus

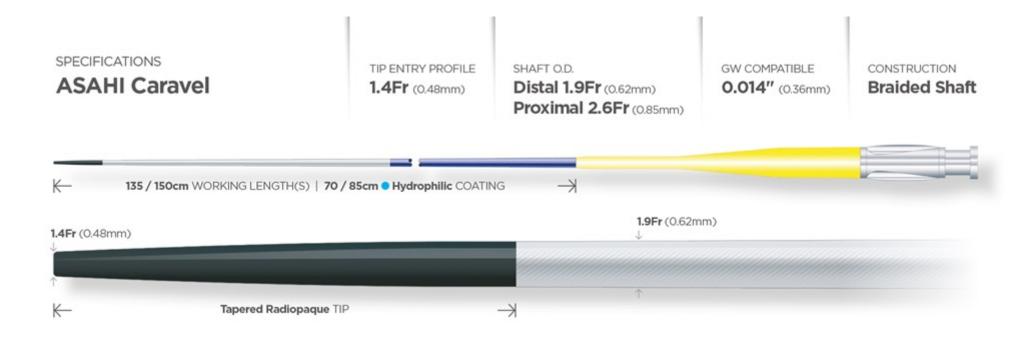
**BOSTON:** Crossboss, Mamba

iVASCULAR: Navitian

**TELEFLEX:** Turnpike, Turnpike LP, Turnpike Spiral, Turnpike Gold

**TERUMO:** Finecross

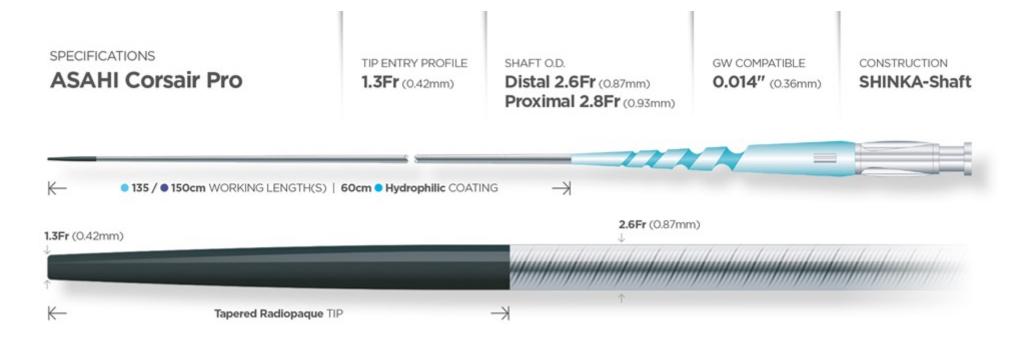
### **ASAHI** Caravel







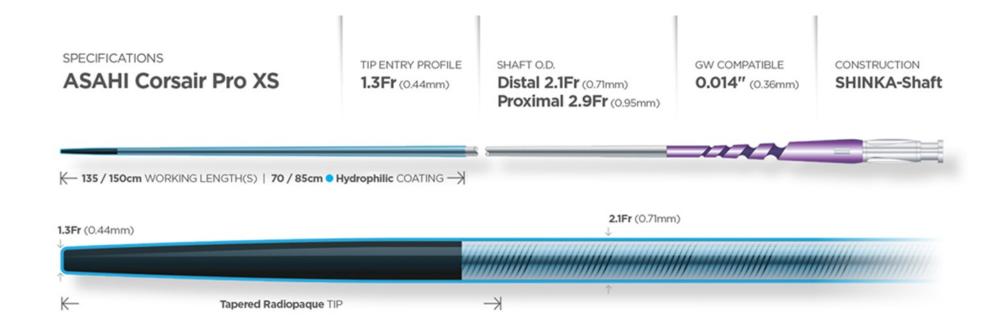
## ASAHI Corsair Pro

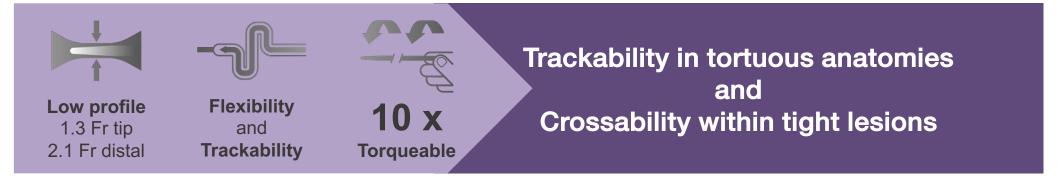






## ASAHI Corsair Pro XS







## **ASAHI Tornus**







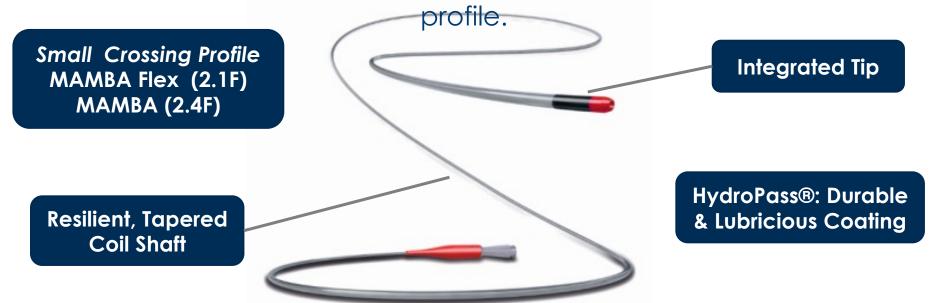








With their proprietary tapered coil and integrated tip, MAMBA<sup>™</sup> torquable microcatheters are engineered to be resilient and optimize support <u>without compromising</u> flexibility and



### MAMBA (135cm)

 ✓ 3 taper zones for exceptional wire penetration support
 IC-1278592-AA © 2023 Baston Scientific Corporation of its affiliates. All rights reserved. Highly pushable and torquable

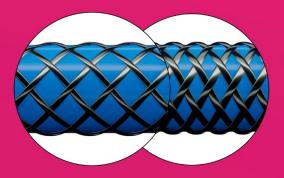
### MAMBA Flex (135 & 150cm)

 ✓ 5 coil taper zones for enhanced flexibility, deliverability, and wire follow

# **Navitian** Coronary microcatheter



High penetration capacity due to an optimized design Tip profile: 1.6F / Crossing profile 1.8F



Optimal pushability due to a proprietary braiding technology

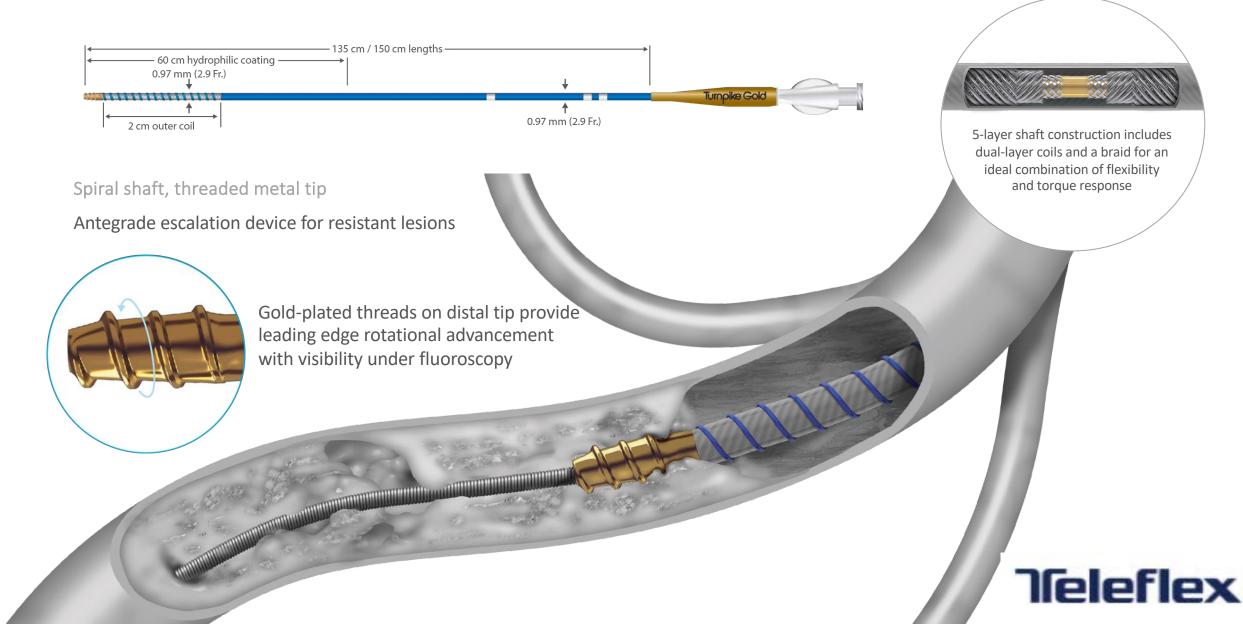


**135** &

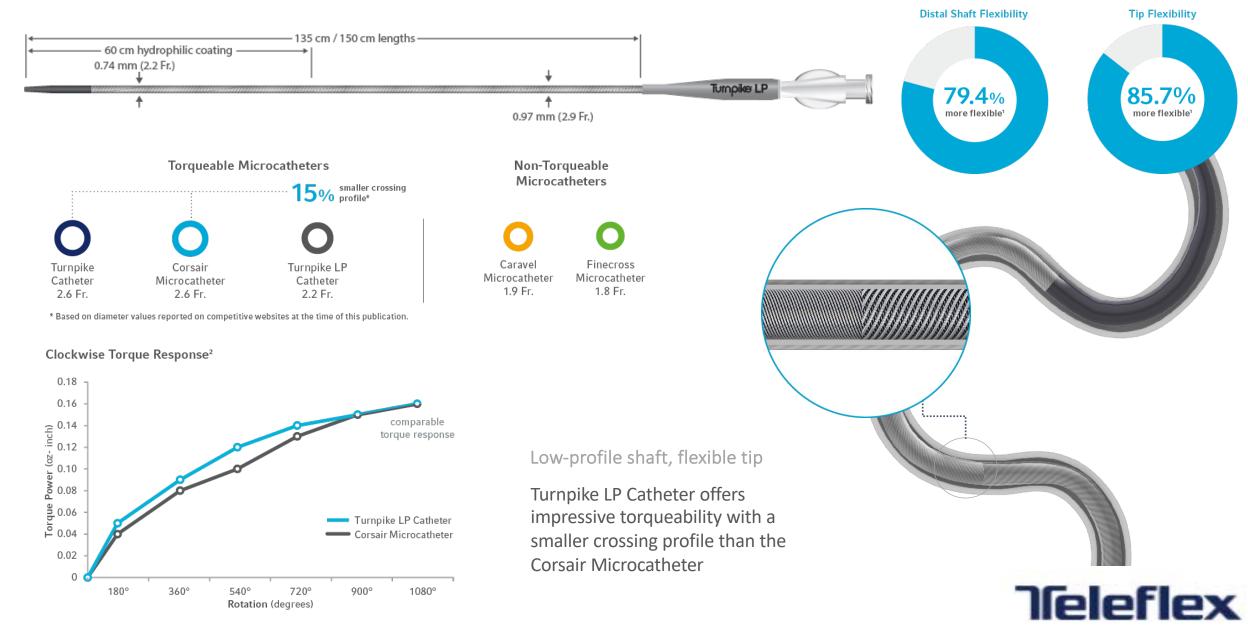
150cm

Simplifying the complex

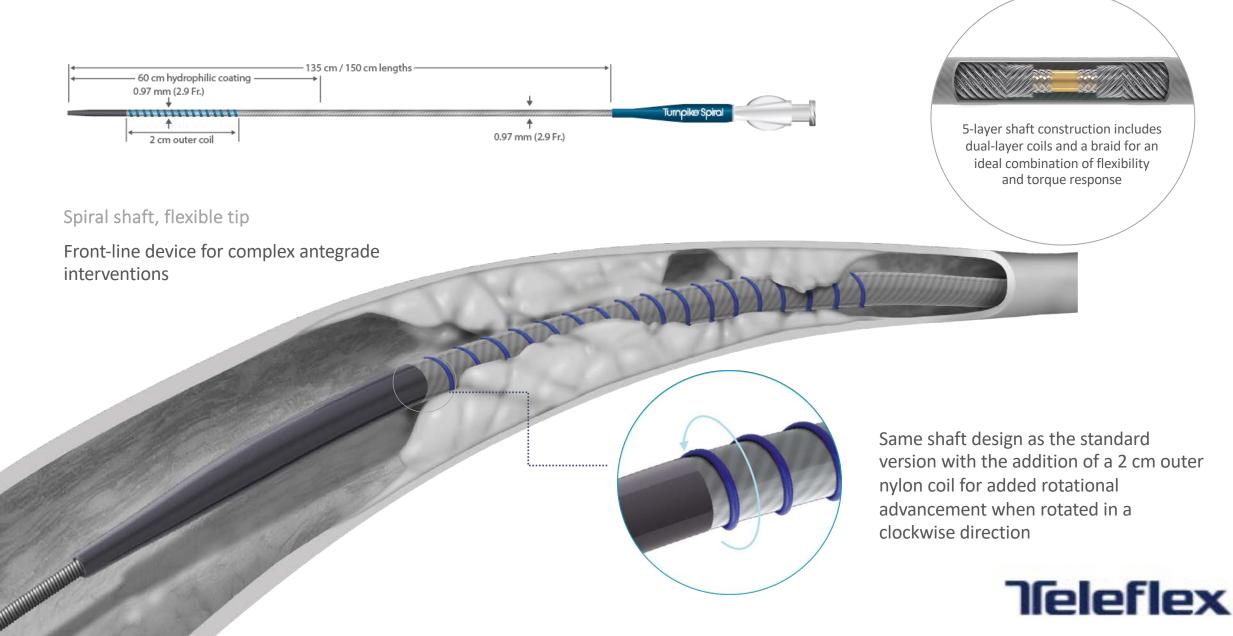
• Turnpike Gold Catheter



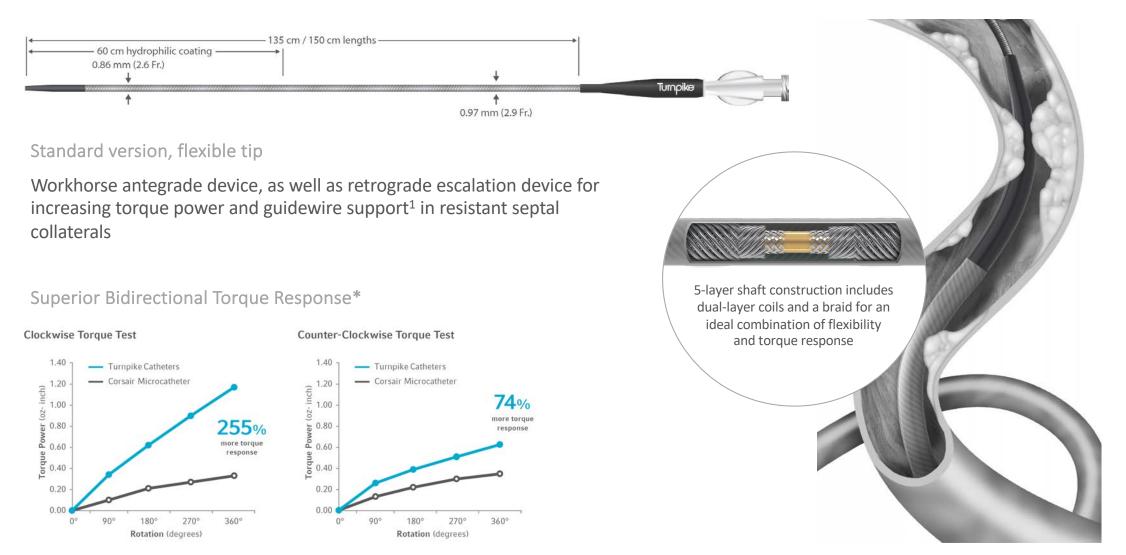
## • Turnpike LP Catheter



• Turnpike Spiral Catheter

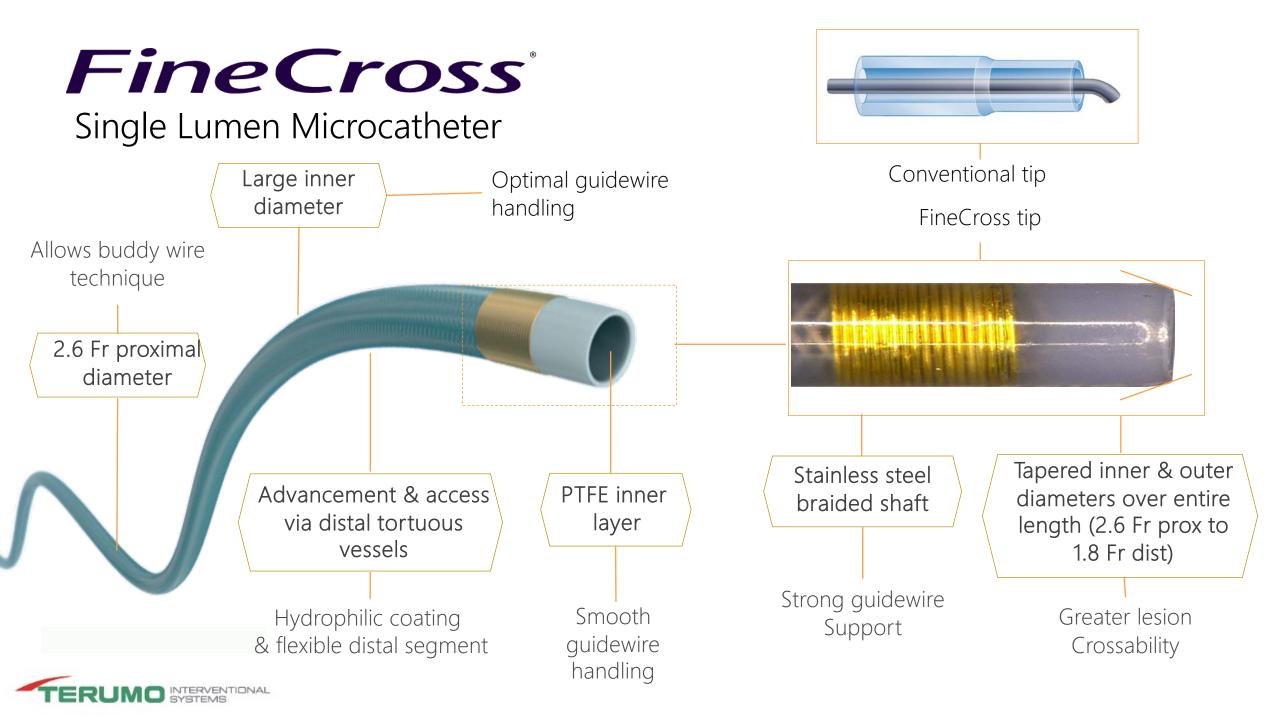


## • Turnpike Catheter



\* All values based on bench test data averages, n=3, performed by Teleflex. Bench test results may not necessarily be indicative of clinical performance. Data on file.







## **Dual Lumen Microcatheters**

## **Rapid Exchange (RX)**

NHancer RX

Sasuke

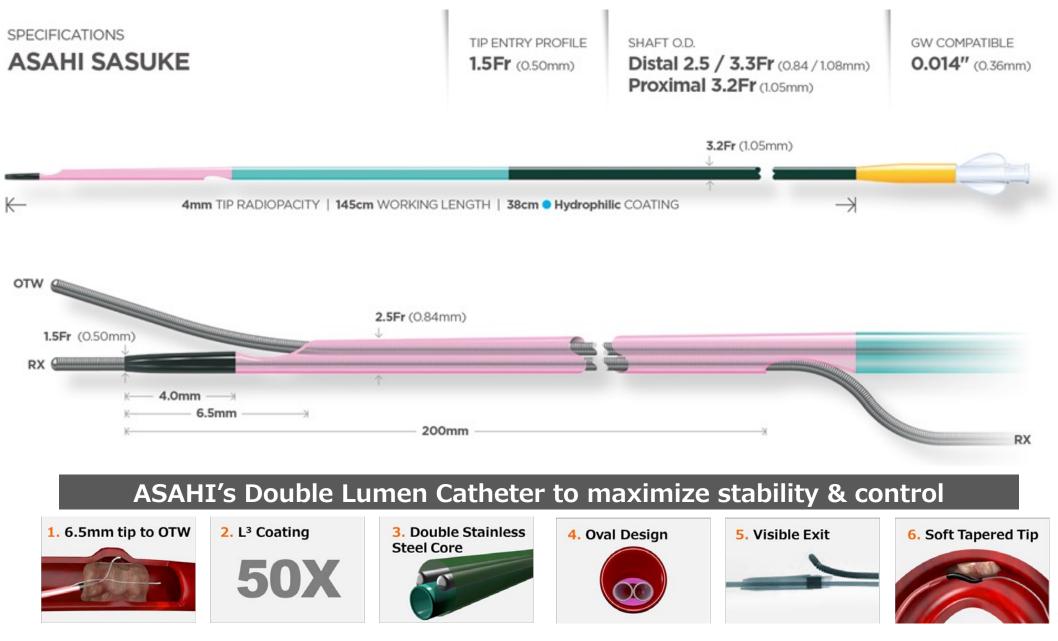
TwinPass

**Over The Wire (OTW)** 

ReCross



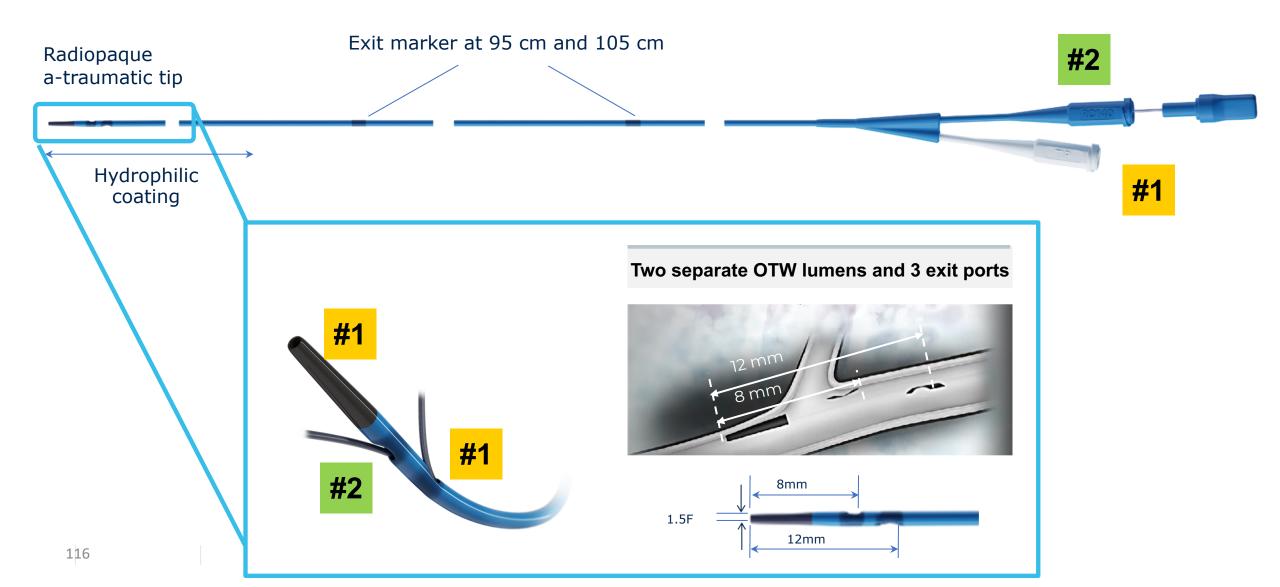






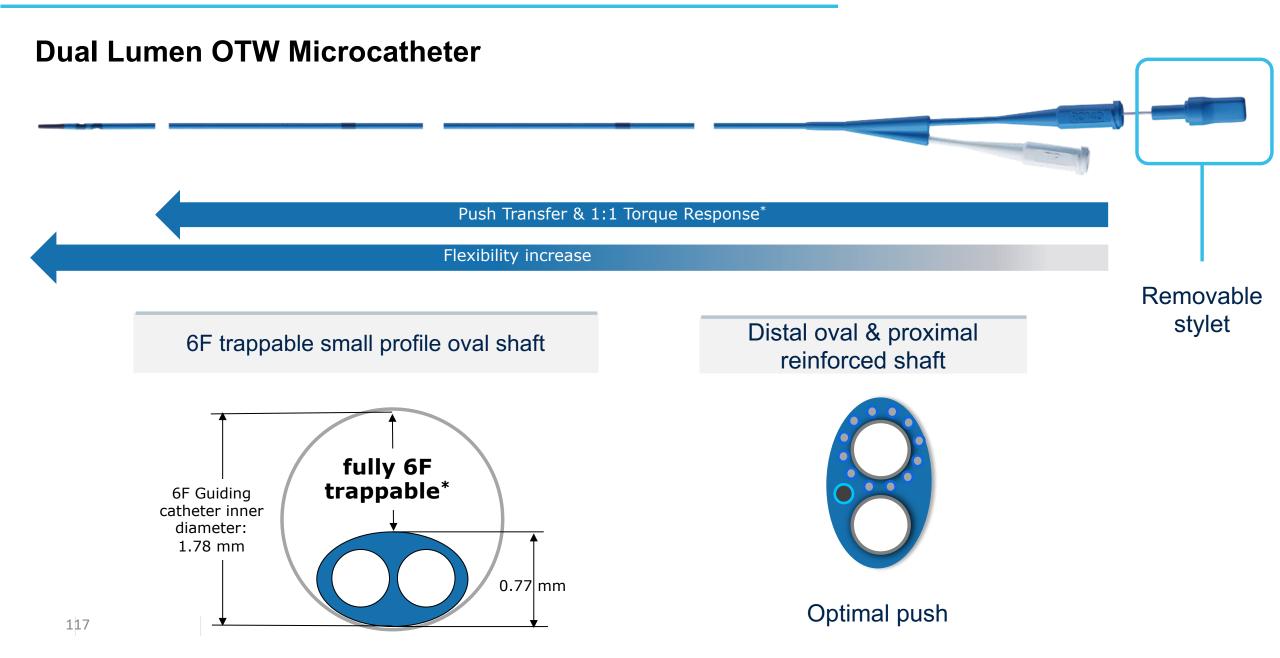


### **Dual Lumen OTW Microcatheter**





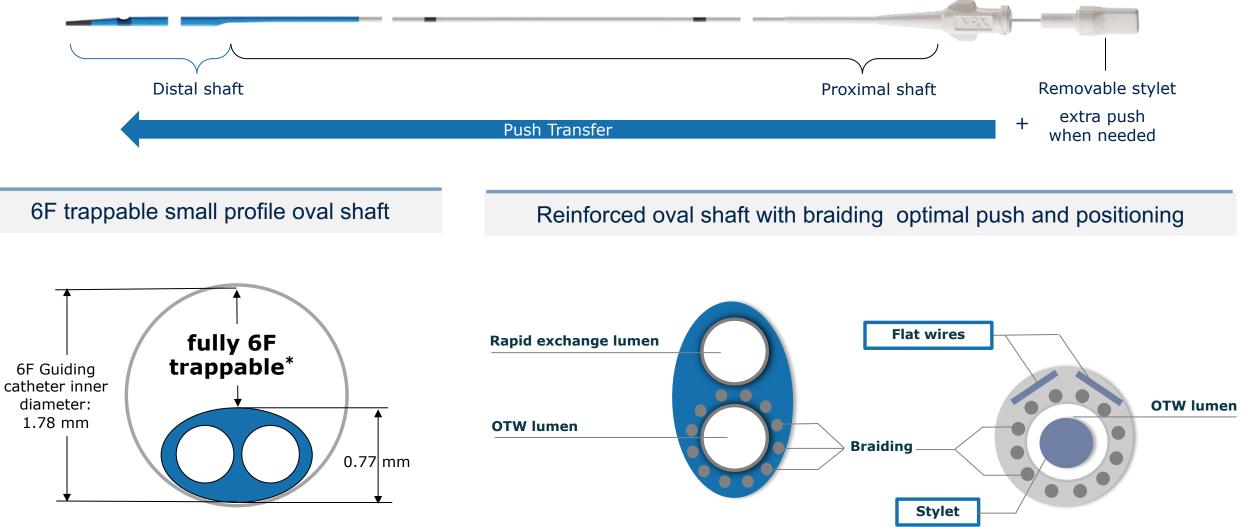








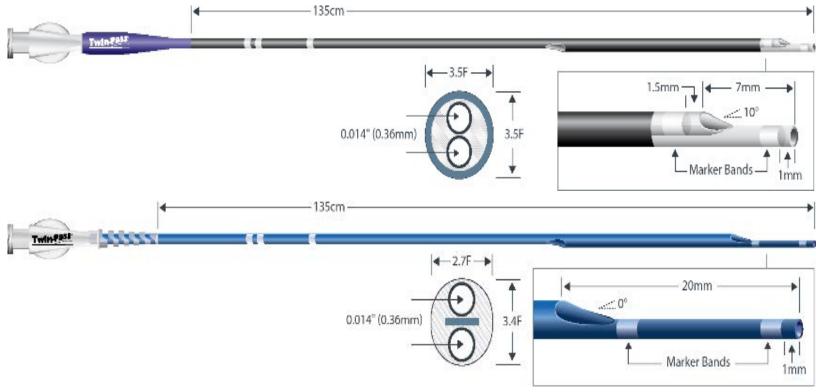
### **Dual Lumen RX Microcatheter**



• 118 width, h= height, d= diameter

• \*Trappable with regular balloon in 6F. 1. IMDS data on file. 2. Adapted from Pyxaras et. al. EuroIntervention 2021;17:e966-e970

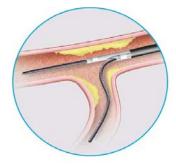
## **TwinPass**



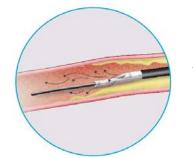
Twin-Pass Torque Catheter: Stainless steel, braided shaft for torque response and kink resistance in tortuosity

Twin-Pass Catheter: Conventional fluid delivery and second guidewire delivery in main vessel

Access or Delivery while maintaining Wire Position



Supportive Access for Bifurcations and Wire Exchanges



Targeted Delivery of Medication or Contrast



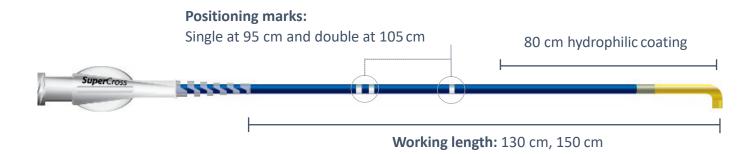


## **Angled Tip Microcatheters**

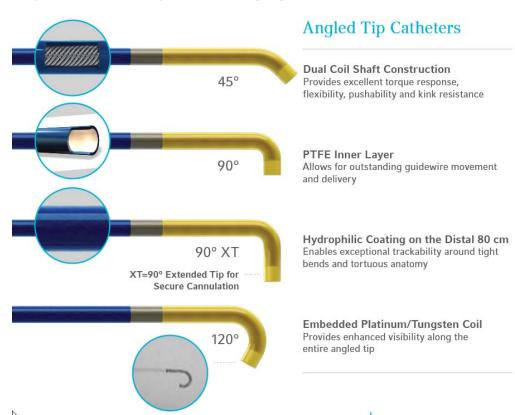
SuperCross

Venture

# SuperCross Angled Tip Microcatheter



#### Superb Crossability on challenging Cases



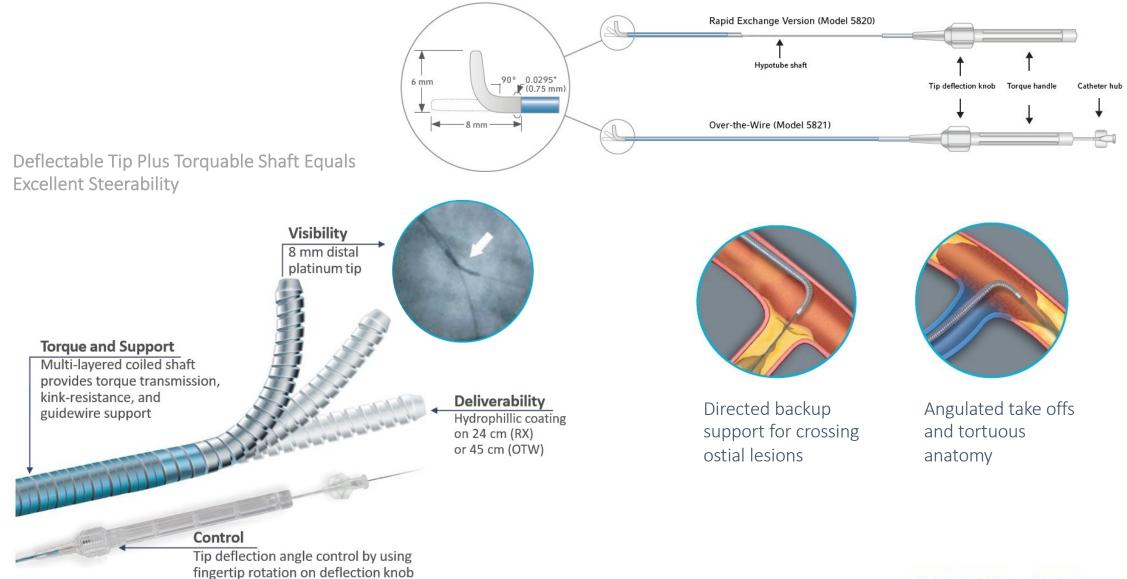
Designed to navigate and provide support for guidewires in tortuous anatomy and bifurcated vessels







## **Venture Catheter**





# Physiology







# Physiologic assessment is essential information in comprehensive stenosis assessment and treatment decisions











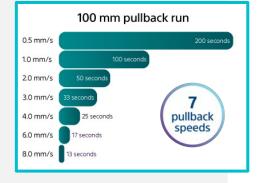
#### Automated Lesion Assessment (ALA™)

#### Precise Vessel Measurements<sup>1</sup>

- Al-enhanced lumen and vessel borders
- Vessel profile
- Key frame markers

#### Fast Pullback §§ High quality images at the pullback speed you want

Automatic pullback now includes faster speeds up to 8 mm/s allowing for quicker vessel imaging





Optimize your treatment decisions by quickly locating regions of pressure change during a pullback

#### Tableside Control § Complete control from the sterile field

Operate IVUS and capture physiological measurements on your integrated system without leaving the sterile field



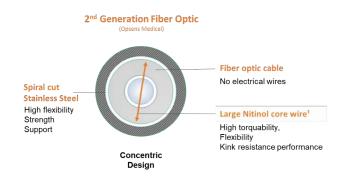
<sup>§§</sup>Fast pullback includes 0.5, 1, 2, 3, 4, 6, or 8 mm/s
\*DFR or Diastolic hyperemia free ratio is a type of hyperemia free physiologic index
§1651278592566 (2023) Boston Scientific Corporation or its affiliates. All rights reserved.

Images for educational purposes only and are not predictive of results in other cases. 2023 © Boston Scientific Corporation or its affiliates. All rights reserved. IC-1717601-AA



### PERFORMANCE

of the guidewire



### FREEDOM

to disconnect and reconnect



#### Key design advantages

- concentric spinning
- higher torque response
- low tip load

# opSens Medical

#### Key connector advantages

- Twist & lock mechanism
- No need to clean the wire
- No need to re-equalize

## ACCURACY

#### of the sensor



#### Key sensor advantages

- lowest pressure drift in the industry
- Reliability
- Accuracy

# **OmniWire**

**Pressure Guide Wire** 

# Solid core. No compromise.

Embedded conductive

ribbons

Large core wire

Polymer layer



PHILIPS



# Sheaths

# Destination

Introduction of interventional and diagnostic devices into human vasculature, including but not limited to renal, carotid and peripheral arteries



- Maintains a high level of kink resistance and backup support
- Avoids ovalisation

**Distal Hydrophilic coating** *For easy insertion and removal* 

## Tapered tip

for atraumatic insertion

## Radiopaque tip, dilator and sheath Excellent visibility for precise positioning



## Inner PTFE liner

minimizes friction and helps smooth passage of devices

Diameters from 5F to 8F, lengths 45, 65, 90 cm

# Unique Cross Cut Valve

Protect against blood reflux and air aspiration

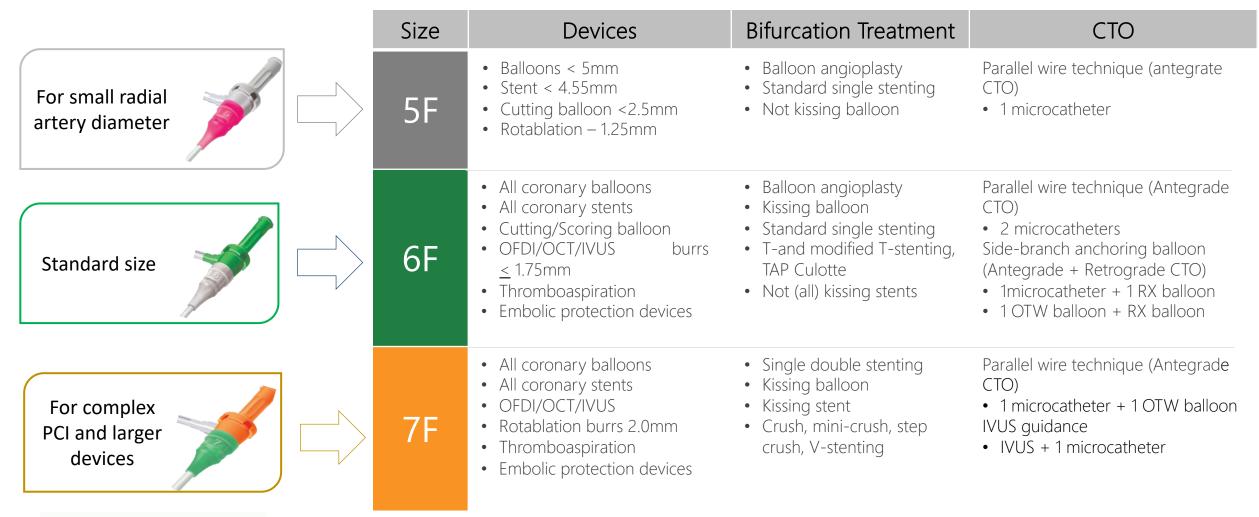
# Glidesheath Slender

- Outer diameter reduced by 1 Fr
- Lumen diameter maintained
- Reduced need to upsize to a larger sheath



ERUMO INTERVENTIONAL SYSTEMS

# Glidesheath Slender



TERUMO INTERVENTIONAL SYSTEMS

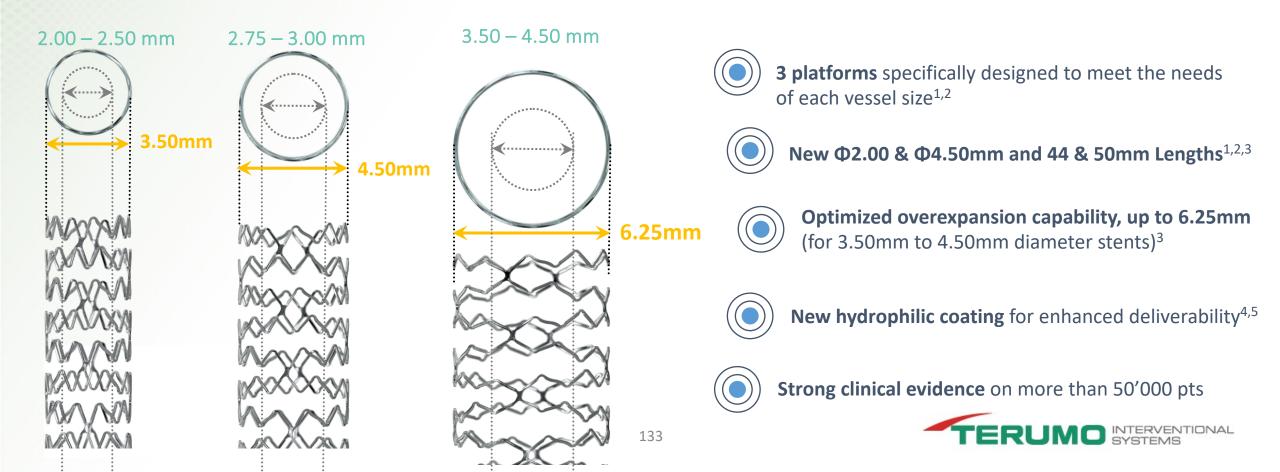
F, French; CTO, Chronic Total Occlusion; OFDI, Optical Frequency Domain Imaging; OCT, Optical Coherence Tomography; IVUS, Intravascular Ultrasound; TAP technique, T And Protrusion Technique; RX, Rapid eXchange; OTW, Over The Wire



# Stents

# Ultimaster Nagomi

**Excellent deliverability,** large size line up and great overexpansion capability up to 6.25 mm



# Medtronic

Engineering the extraordinary

Onyx Frontier™

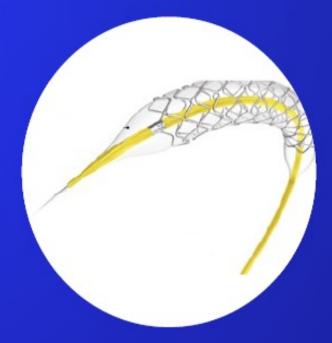
**Drug-Eluting Stent** 

Engineered to deliver

At least 24% more deliverable than competitive DES<sup>†1</sup>

Introducing an enhanced delivery system<sup>†</sup> featuring:

- Dual-flex balloon
- Lower crossing profile<sup>2</sup>
- Increased catheter flexibility<sup>3</sup>



Stent delivery system updates were implemented on the 2.0-4.0 mm Onyx Frontier DES diameter.

3. Based on bench test data on file at Meditronic. [D00339634 - Test Report for DES. Competitive Comparison with Frontier test methods, Rev C, 05-May-2022] May not be indicative of clinical performance. N = 7 of each DES tested.

4. Third-party modeling and analysis. [Montier MDT-ON14-report-curved-v10-20150220\_Onyx\_Synergy] Data may not be indicative of clinical performance. Evaluated the following stent platforms: Resolute Onyx DES, Multi-Link 8 \*\*\* BMS, SYNERGY\*\* DES, XIENCE Alpine\*\*\* DES, and Multi-Link 8 platform.

5. Based on bench test data on file at Meditronic [University of Budapest Visibility Testing, V0.1, 28-Sep-2021] May not be indicative of clinical performance.

6. Roleder T, Kedhi E, Berta B, et al. Short-term stent coverage of second-generation zotarolimus-eluting durable polymer stents: Onyx one-month optical coherence tomography study. Adv Interv Cardiol. 2019;15(2):143-150

134

<sup>1.</sup> Based on bench test data on file at Meditronic. [D00339634 - Test Report for DES Competitive Comparison with Frontier test methods, Rev C, 05-May-2022] May not be indicative of clinical performance. N = 5 DES of each tested: Onyx Frontier DES, Orsiro Mission DES, Resolute Onyx DES, XIENCE Skypoint DES, SYNERGY DES, Ultimaster Tansei DES.

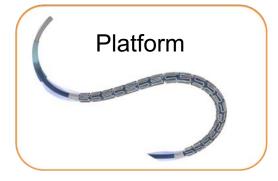
<sup>2.</sup> Based on bench test data on file at Meditronic. [44RD21031-040047 Onyx Frontier Vs Resolute Onyx Balloon Extrusion, Version 1.0, 17-Feb-2022] May not be indicative of clinical performance.

# **angiolite** Drug eluting stent #westentbyyou

therapies for living

# **Exceptional overexpansion capacity** from small to big vessels



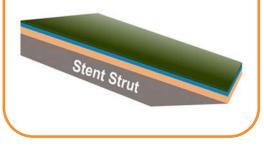


**Stent Material:** Co – Cr L605 with LDZ Connectors (Long Dual Z-Link) and unique design to improve deliverability



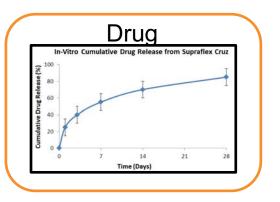
Strut Thickness: 60 µm across all stent diameters (2.00 to 4.50 mm)
 Radial Strength: 1093 mmHg
 Foreshortening: 0 % foreshortening (4mm Supraflex Cruz overexpanded to 5.5mm)<sup>1</sup>
 Long Dual 'Z' Link" : Long connectors enhance the overall radial strength, Improves flexibility , Resists longitudinal compression

### Drug Carrier(Polymers)



**Biodegradable Polymer Matrix:** Poly-L Lactide (PLLA), Poly L-Lactide-co-Caprolactone (PLCL), Polyvinylpyrrolidone (PVP). A top protective layer (Without Drug). Middle layer (Drug + Polymers) Base layer (Drug + Polymers).

**Coating:** Circumferential, Average thickness: 4 to 6 μm



#### Sirolimus: 1.4 µg/mm<sup>2</sup>

#### **Release Profile :**

- About 80% of the drug is released at 4 weeks in biological media while 100% drug is released at a slow rate within 3 months.
- The initial moderate level of Sirolimus drug release from middle layer coating helps to inhibit early phase of neointimal hyperplasia.
- Controlled drug release kinetics from base layer coating is beneficial to maintain the effective amount of drug level in the arterial tissues which are required to prevent smooth muscle cell proliferation.





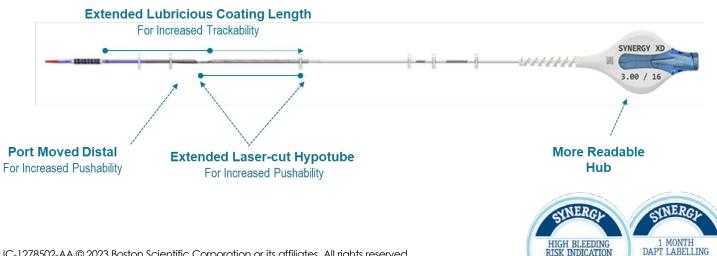


## **PtCr Alloy**

- Radial Strength
- Radiopacity
- Conformability
- Reduced Recoil

## **Innovative Stent Design**

- Low profile
- Balanced strength and flexibility
- Thin, rounded struts
- Abluminal, bioabsorbable polymer



IC-1278502-AA © 2023 Boston Scientific Corporation or its affiliates. All rights reserved.

Intentionally designed for 5.75 mm **Exceptional Overexpansion** 

To enable natural vessel tapering

#### Extra proximal connector

For longitudinal strength and ostial support

#### 2-connector design

For superior conformability to prevent side branch jailing



## SYNERGY MEGATRON Features





## Purpose-built stent architecture to maximize performance for large vessel stenting<sup>1</sup>

#### **12 Peak Design with Shorter Strut** Length

#### **PtCr Alloy**

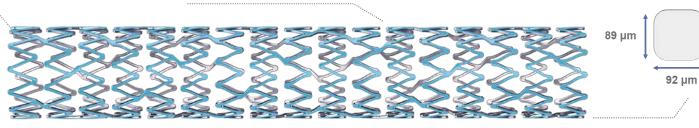
1. Design data on file at Boston Scientific Corporation

Specifically designed for coronary stents For Visibility, Radial Strength, and Low Recoil

## For Radial Strength, Unmatched Expansion and Uniform Vessel Scaffolding



For Maximum Visibility and Radial Strength

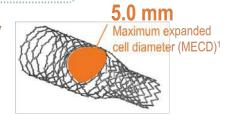


#### 4 Connectors on Proximal Two Segments

For Exceptional Axial Strength

3 Connectors Throughout the Body

For Exceptional Axial Strength



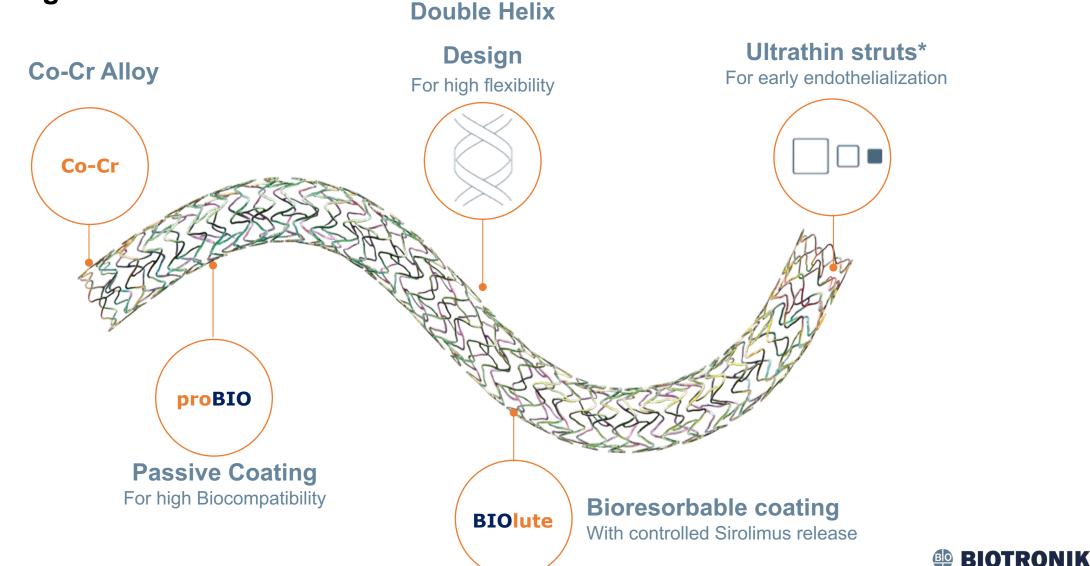
One model (3.5-5.0mm) with overexpansion to 6.0 mm.<sup>3</sup>



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## **Orsiro Mission**

**Drug Eluting Stent** 



excellence for life



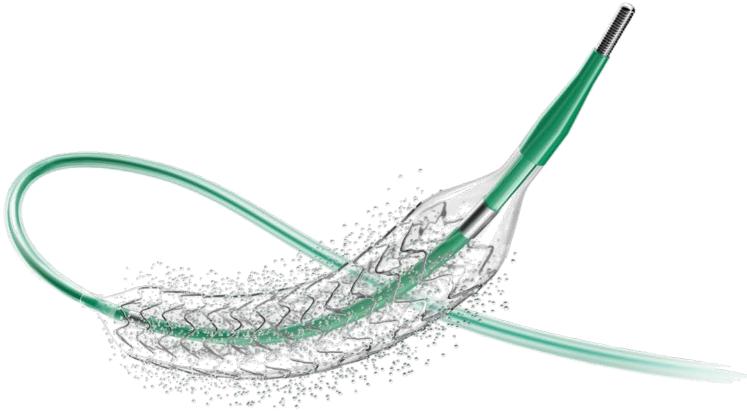
# **Coroflex ISAR NEO**

One of the thinnest and most

flexible drug eluting stents

- Low TLR
- Low MACE
- Low Thrombosis

Coroflex – The stent for standard and complex lesions

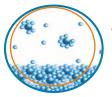


# **Cre8™ EVO: Polymer-free Amphilimus™ eluting stent**



### **Abluminal Reservoir Technology**

The only polymer-free technology able to precisely control abluminal drug elution



#### **Amphilimus™ formulation: Sirolimus + Fatty Acid**

Fatty Acids enhance drug distribution and maximize drug bioavailability increasing device efficacy, particularly in diabetic patients



### **Bio Inducer Surface**

Proven hemo-/bio-compatibility versus vessel wall and blood flow

## EvenArt Stent Architecture

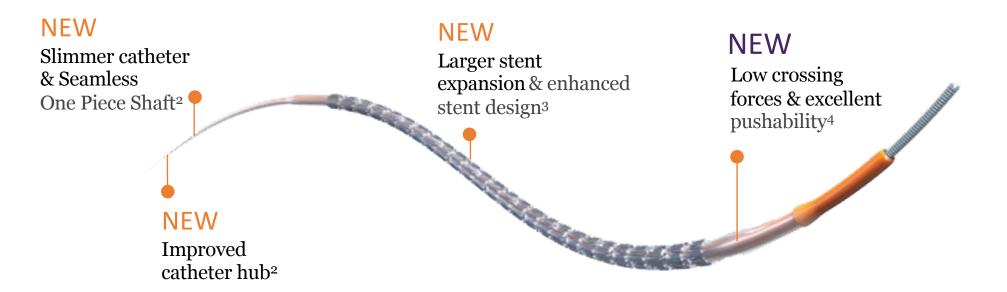
Innovative stent architecture developed to maximize homogeneous drug distribution, DES conformability and deliverability in an ultra-thin stent strut platform (70-80µm)







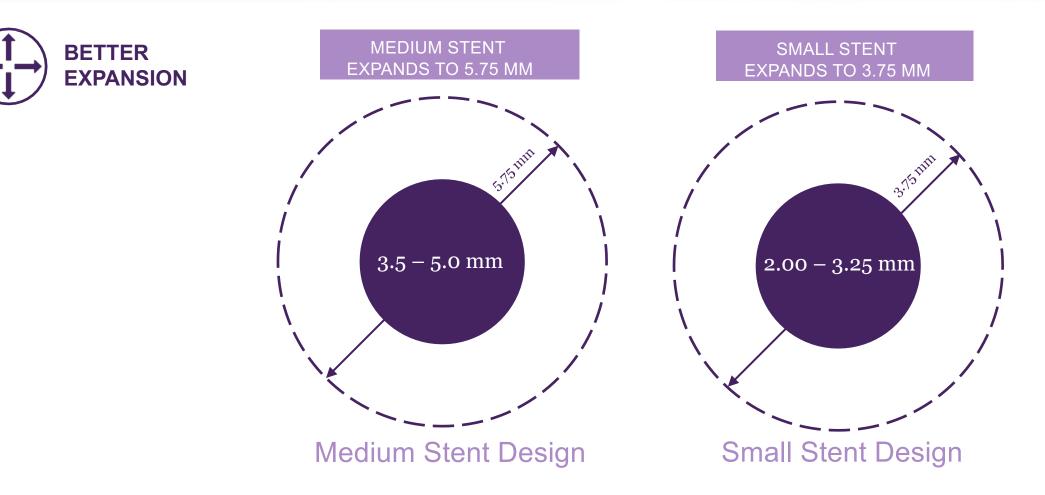
XIENCE Skypoint<sup>™</sup> delivers the broadest expansion range in the latest generation XIENCE<sup>™</sup>, the DES that consistently delivers successful outcomes – not only in the cath lab, but far beyond.<sup>1</sup>



Page 142 of X



## DES XIENCE Skypoint™



Data on file at Abbott.

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# Novel Implant Designed to Adapt to Vessel Physiology





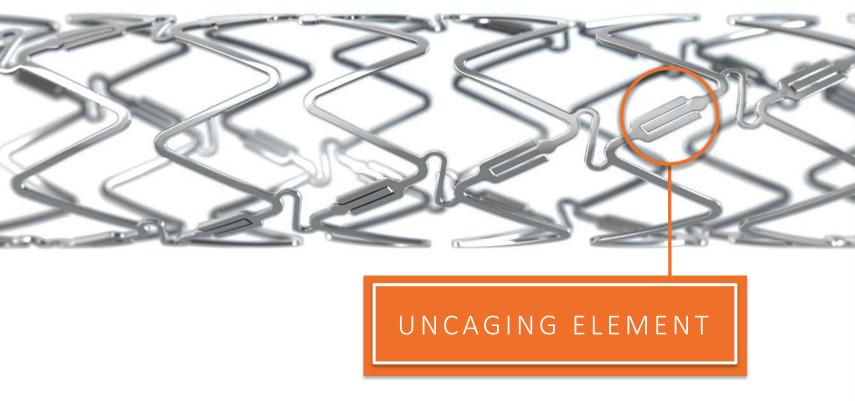
- Maintains ability for positive adaptive remodeling
- Restores vessel function
- Allows for return towards baseline angulation

Potential to reduce adverse events by adapting to vessel physiology



# **DynamX Coronary Bioadaptor System**

## DESIGNED TO DELIVER SUPERIOR OUTCOMES



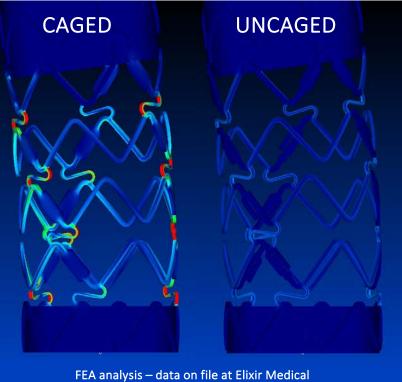
- KEY FEATURES
- » Novel uncaging elements
- Bioresorbable polymer coating
- Elutes low-dose Novolimus over 3 months
- Thin cobalt chromium 71µm strut<sup>1</sup>
- » Excellent deliverability<sup>2</sup>
- Thin and uniform neointimal coverage<sup>3</sup>

DYNAMX

- 1) 2.25mm 3.0mm are 71µm thick, Data on file at Elixir Medical
- Verheye, et al. Twelve-month clinical and imaging outcomes of the uncaging coronary DynamX Bioadaptor System. EuroIntervention 2020;16:e974-e981

## **Restores Vessel Function:** Allows for Normal Vessel Pulsatility and Motion

- >> Coronary arteries experience significant movement with each heart beat<sup>1</sup>
- » Movement (bending, twisting, pulsation) of a stented artery adds additional stress on the stent and on the vessel wall<sup>2</sup>



- » Uncaged DynamX Bioadapter significantly reduces stress on the implant and the vessel during normal movement<sup>1,3</sup>
  - DynamX uncaged: 90% reduction of maximum tensile stress in flexion
  - 70% reduction tensile stress in >> torsional rotation

#### » Lower device stress:

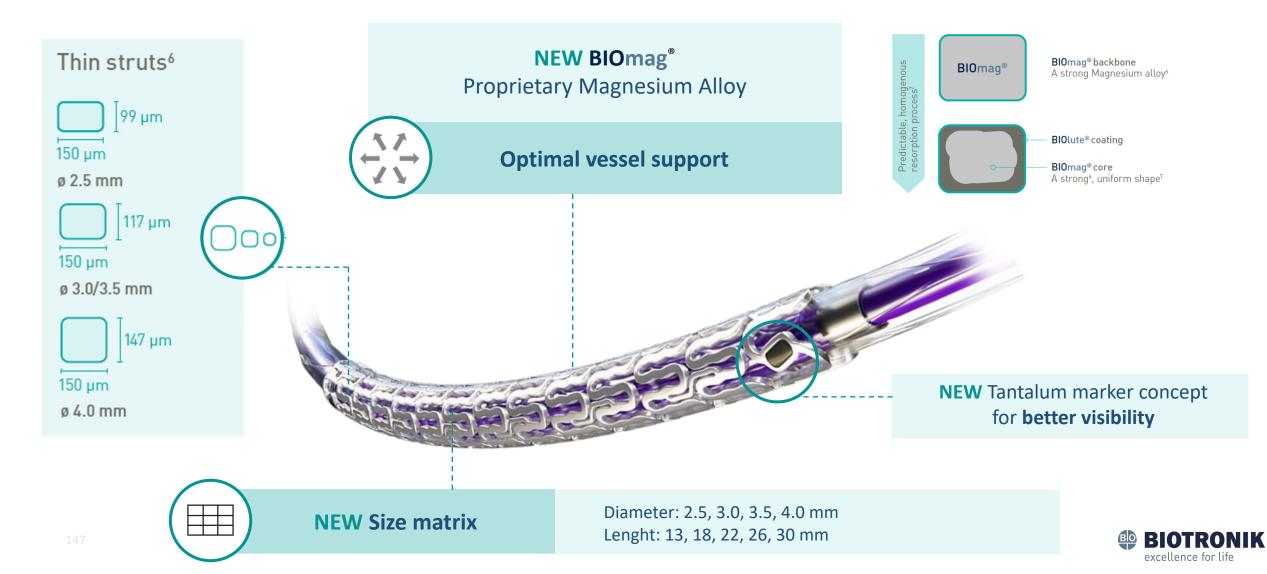
- Reduces probability of fracture<sup>4</sup> **>>**
- Lowers vessel stress<sup>2</sup>
- May improve clinical outcomes<sup>2</sup> >>>

- 1. Scott, A. et al. Radiology 250:2 2009; Lu, B. et al. Investigative Radiology 36:5 2001
- 2. Gu, L. et al. International Journal of Applied Mechanics 4:2 2012; Xu, J. et al. BioMedical Engineering Online 15:21 2016
- Data on file at Elixir Medical. Ormiston et al. Circ Cardiovasc Interv 2014;7:Dec 24 13 [E-pub] 3.
- 4. Kuramitsu et al. Circ Cardiovasc Interv. 2012;5:663-671, Kuramitsu et al. J Am Coll Cardiol Intv 2015;8:1180–1188



## Freesolve

New generation Resorbable Magnesium Scaffold



### New generation Resorbable Magnesium Scaffold

Magnesium fully resorbed after 12 months

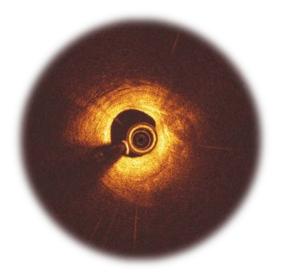
After approximately **12 months** the scaffold is almost completely resorbed (99.6%)<sup>1</sup>

#### **PRE-PROCEDURE**

#### POST-PROCEDURE<sup>2</sup>

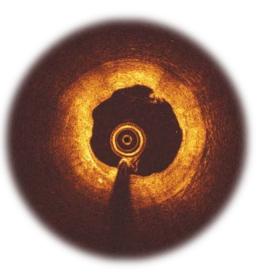
#### 6M-FOLLOW UP

12M-FOLLOW UP<sup>2</sup>





Immediately after implantation, struts are well apposed to the vessel wall.

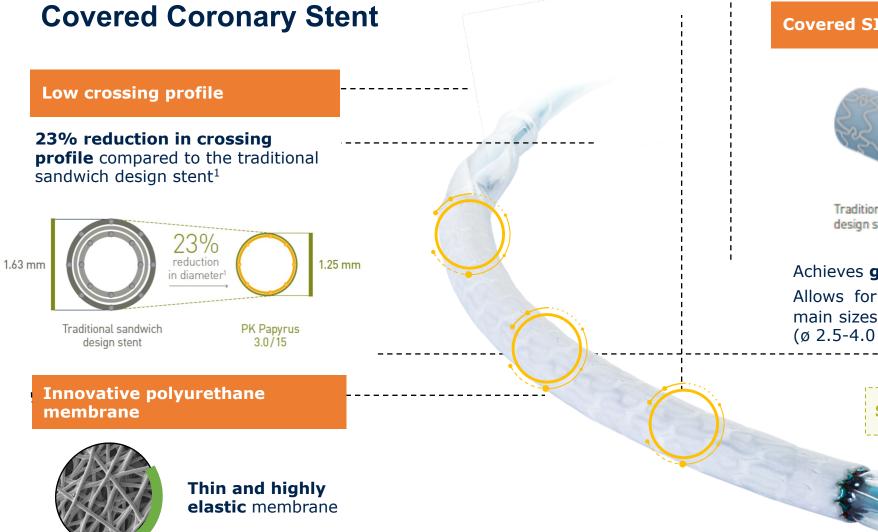




The resorption is completed. No struts appear in OCT.







#### **Covered SINGLE stent design**





Traditional sandwich design stent PK Papyrus Covered single stent design

#### Achieves greater bending flexibility<sup>2</sup>

Allows for a 5F guide catheter compatibility - for main sizes – **no need for guide catheter upgrade** (ø 2.5-4.0 mm).



Seal perforations with confidence

Polytetrafluoroethylene Covered Stent = PTFE-CS; Polyurethane Covered Stents = , PL-CS

1. Cimpared to Graftmaster Coronary Stent Graft System 2.8/16 (BIOTRONIK data on file, based on specifications); 2. Compared to Graftmaster Coronary Stent Graft System 2.8/16 (BIOTRONIK data on file, based on specifications); 2. Compared to Graftmaster Coronary Stent Graft System 2.8/16 (BIOTRONIK data on file, based on specifications); 2. Compared to Graftmaster Coronary Stent Graft System 2.8/16 (BIOTRONIK data on file, based on specifications); 2. Compared to Graftmaster Coronary Stent Graft System 2.8/16 (BIOTRONIK data on file, based on specifications); 2. Compared to Graftmaster Coronary Stent Graft System 2.8/16 (BIOTRONIK data on file, based on specifications); 2. Compared to Graftmaster Coronary Stent Graft System 2.8/16 (BIOTRONIK data on file, based on specifications); 2. Compared to Graftmaster Coronary Stent Graft System 2.8/16 (BIOTRONIK data on file, based on specifications); 2. Compared to Graftmaster Coronary Stent Graft System 2.8/16 (BIOTRONIK data on file, based on specifications); 2. Compared to Graftmaster Coronary Stent Graft System 2.8/16 (BIOTRONIK data on file, based on specifications); 2. Compared to Graftmaster Coronary Stent Graft System 2.8/16 (BIOTRONIK data on file, based on specifications); 2. Compared to Graftmaster Coronary Stent Graft System 2.8/16 (BIOTRONIK Grave System); 2. Compared to Graftmaster Coronary Stent Graft System 2.8/16 (BIOTRONIK Grave System); 2. Compared to Graftmaster Coronary Stent Graft System 2.8/16 (BIOTRONIK Grave System); 2. Compared to Graftmaster Coronary Stent Graft System 2.8/16 (BIOTRONIK Grave System); 2. Compared to Graftmaster Coronary Stent Graft System 2.8/16 (BIOTRONIK Grave System); 2. Compared to Graftmaster System; 2.8/16 (BIOTRONIK Grave System); 2. Compared to Graftmaster Coronary Stent Graft System; 2.8/16 (BIOTRONIK Grave System); 2.8/16 (