IV edition TURIN CTO&CHIP LIVE 2025

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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















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_{mm}



NC Balloons



1. Data on File: ISCD-415-11-24, Comparison with Hiryu. Non Compliant PTCA Balloon Catheter manufactured by Terumo Corporation.



Over-the-inner tip design

Can improve overall flexibility, tip





Improved balloon shoulder to marker band alignment • Optimizes uniform stent apposition

0.031" Crossing profile

 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[™] inner shaft • Designed for maximum deliverability

Reduced shaft profile

 Designed for exceptional simultaneous use performance



Master the Complex™



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[™] Drug Coated Balloon Features





Agent combines the exceptional deliverability of the Emerge[™] platform with the efficient drug transfer technology of TransPax[™] coating



BECAUSE TIME MATTERS

essential pro Drug coated balloon



Rapid drug transfer and long term efficacy

Not all DCBs are the same

Transfer **Tech**

Nanotechnology that makes the difference

> iVascular therapies for living

www.ivascular.global

Coronary Drug Coated Balloon





Coronary Drug Coated Balloon

Lux Coating Technology

- For rapid drug absorption into the vessel wall¹
- Improving bioavailability at the target site



Drug Paclitaxel

• Prolonged tissue retention at the target site



• Excipient Butyryl-tri-hexyl citrate (BTHC)

BTHC hydrophobic excipient increases bioavailability of the drug, increasing uptake by the vessel during delivery

- Rapidly metabolized by the body and excreted via urine, biliary excretion and expired air¹
- Degrades to citric acid and alcohol¹
- Keeps Paclitaxel in microcrystalline structure for rapid drug absorption into the vessel wall



Medtronic

Engineering the extraordinary

Paclitaxel-Coated Balloon

Prevail[™]

Performance you want for treating complex patients

Superior deliverability¹

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

Rapid absorption of paclitaxel²

Facilitated by biocompatible urea expcipient³, 65% of drug is protected within the folds

Excellent safety and efficacy⁴

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[®] 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
 - 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
 - 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 aid¹

- 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 force¹

- 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





22OTW = 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. IM DS data on file.



Trapping Balloon

• The small shaft profile frees up space inside the guiding catheter for other devices



Free space inside 6F Guiding Catheter



• 1 Data on file at IMDS, *Pantera Pro 2.5mm diameter







Maximize the efficiency of complex cases by facilitating device exchanges



Re-entry Balloons



IC-1278502-AA © 2023

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



Superb deliverability Reduced push force by 38% compared to previous-gen AngioSculpt with new hydrophilic coating¹

AngioSculpt EVO

RX PTCA Scoring Balloon Catheter

Maximize gain. Minimize risk.

C Koninklike Philips M.S.



GRIP TT

GRIP TT is the unique balloon with 4 lines of knobs



POLIMERIC KNOBS

- 4 lines of 200µm-thick knobs
- Enhanced stability
- Reduced risk of dissection

SPECIAL MATERIAL

- High RBP up to 21 Atm
- ABP over 30 atm
- Reduced risk of balloon burst
- High radial force



LONG TIP

- 4 mm tapared tip
- improved navigability

SMALLER PROFILE

Low entry profile 0.017"

TYPE OF PROCEDURE

Pre-Dilatation

Post-Dilatation

Slippery Lesions Short Lesions

Kissing balloon

Heavily Calcified Lesions

Intra Stent Restenosis

Naviscore

Balloon for calcified lesions

Easy advance

up to the lesion

Unique design combining the benefits of scoring and cutting balloons



Large plaque modification capacity

Excellent recross without modifying its profile

Naviscore. Challenging calcifications limits







BALLOON

SLIPPAGE



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Traditional balloon angioplasty can result in complications like:

VESSEL DISSECTION POOR LUMINAL GAIN LESION RECOIL 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

÷

SHOCKV

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" | |

ROTAPROTM 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





Burrs spins concentrically for predictable results



for better versatility



Trusted for 30 years to treat over 1.5 million patients in over 115 countries¹





Coronary Orbital Atherectomy System components

CORONARY GUIDE WIRE





ELCA

Coronary Laser Atherectomy Catheter

Treatment versatility for vascular interventions

C Kommilia Phillos N.V.



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_{1,2}
- Sustainable, natural tissue proliferation may reduce incidence of recanalization_{3,4}
- Mechanical occlusion
- Up to 20-30 minutes of repositioning time



Anchor – use for control in high flow areas

Soft and flexible



neointima growth with

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



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Guide Catheters

Medtronic

Engineering the extraordinary

Guide Catheter

Launcher™

Balanced performance that's ahed of the curve

The Launcher[™] 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

Guide Extensions



- **BIOTRONIK:** Guidion Hydro, Guidion Short, Flowguide
- BOSTON: Guidezilla
- MEDTRONIC: Telescope
- **TELEFLEX:** Guideliner, Trapliner

Guide Extension Catheter



GUIDION HYDRO

Guide Extension Catheter

APPLICATION VERSATILITY

A guide extension catheter extends the guiding catheter into the coronaries:

- To provide backup support for device delivery
- For local contrast vessel visualization

To capture a retrograde guide wire





Guide Extension Catheter



Facilitating trapping of OTW devices: Distal shaft length 15 cm

> Optimizing trans-radial approach

True visibility of soft tip and

transition zone









Guide Extension Catheter



Usable length: 150cm

FLOWGUIDE



Guide Extension Catheter with perfusion holes





Maintain Perfusion: 9 perfusion holes



Optimizing trans-radial approach: Distal shaft length 15 cm









.



Guide Extension Catheter with perfusion holes



Usable length: 150cm

FLOWGUIDE



Guide Extension Catheter with perfusion holes

Distal flow





Perfusion holes

provide a blood flow of 12.5ml/min at 80 mmHg**, reducing the risk of procedure induced ischemia¹.

Side branches flow











Medtronic

Engineering the extraordinary

Guide Extension Catheter



Extended reach, smooth delivery

Solid, round pushwire

Enhances pushability, which is a critical component of deliverability¹

Hydrophilic coating

Reduces friction with the inner lumen of the guide catheter and contributes to superior deliverability¹

Atraumatic soft polymer tip

Designed to responsively deflect and provide flexibility²



GuideLiner V3 Catheter





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

Anyreach C and P (0.3 g) 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) AnyreachP LanceR (1.5 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) Miracle Neo 3 (3.0 g) Gaia Second (3.5 g)

Hydrophilic coating + Polymer jacket

AnyreachP LanceR (3.0 g) 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 Anyreach LanceR (6.0 g) 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[™] Guide Wire







AnyreachC[™] & AnyreachP[™]

Lightest tip load of 0.3g with superior crossability in tortuous vessels



0.3g



AnyreachP[™]Lance*R* (CTO Indicated)

APTMedical





ASAHI CONFIANZA PRO 9

Wire OD

| • | • | • | • |
|---|---|---|---|
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0.23mm (0.009") / 0.36mm (0.014")

Coating

Uncoated Tip + Hydrophilic



*Coated with SLIP-COAT® coating.

Uncoated TIP / 20cm • Hydrophilic* Coating

Cover

None

20cm • Radiopacity / 20cm • Spring Coil





Tip Load

9.0gf

Core Material

Stainless Steel

ASAHI CONFIANZA PRO 12

Tip Load 12.0gf Core MaterialWStainless Steel0.2

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

0.014") Cover

Coating

Uncoated Tip + Hydrophilic



*Coated with SLIP-COAT® coating.

Uncoated TIP / **20cm** • Hydrophilic* Coating

20cm • Radiopacity / 20cm • Spring Coil





Fielder XT-A













Fielder XT-R













Fielder XT









0.26mm (0.010") / 0.36mm (0.014") 1.7gf Stainless Steel Uncoated Tip + Hydrophilic None Uncoated TIP / 40cm • Hydrophilic* Coating 15cm • Radiopacity / 15cm • Spring Coil Mini Pre-shape Tapered Tip Micro Hydrophilic Coating + lip Load 1.7_{gf} **Uncoated Tip**

Cover

Coating



Core Material

Tip Load

Wire OD



*Coated with SLIP-COAT® coating.

Your dreams. Woven together.

ACT ONE

Cone Tip



ASAHI Gaia Second





ASAHI Gaia Third






ASAHI Gaia Next 2





ASAHI Gaia Next 3



ASAHI Gladius EX





ASAHI Gladius MG

ASAHI Gladius MG

Tip Load 3.0gf Core Material Stainless Steel Wire OD 0.36mm (0.014") **Cover** Polymer Jacket

et Full Hydrophilic

*Coated with SLIP-COAT® coating.



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







Grand Slam

4cm • Radiopacity / 4cm • Spring Coil



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







MIRACLEbros 12





Miracle Neo 3







Tip Load
3.0gfCore Material
Stainless SteelWire OD
0.26mm (0.010")Cover
NoneCoating
Full Hydrophilic

*Coated with SLIP-COAT® coating.



3cm • Radiopacity / 8cm • Spring Coil





ASAHI Silverway





ASAHI SION black

ASAHI SION I SION TE

Tip Load Core Material 0.8gf Stainless Steel

Wire OD 0.36mm (0.014")

Cover

Polymer Jacket

Coating Full Hydrophilic

*Coated with SLIP-COAT® coating.







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

Core Material

Stainless Steel

Tip Load

0.5gf

Wire OD

0.36mm (0.014")



*Coated with SLIP-COAT® coating.



Coating

Hydrophobic + Hydrophilic

Cover

None

ASAHI SION





ASAHI SUOH 03





ULTIMATEbros 3

Core Material

Stainless Steel

Tip Load

3.0gf



*Coated with SLIP-COAT® coating.



Uncoated Tip + Hydrophilic

Coating

Cover

None

Wire OD

0.36mm (0.014")

11cm • Radiopacity / 11cm • Spring Coil



























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

















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

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.

• 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







The Clear Choice for Unclear Paths

The Raider Guidewire is a mid-tip load, non-tapered, polymer-jacketed specialty wire with a unique tip designed to meet the demands of complex lesions and precise wire techniques.







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.



³ Penetration power refers to the tested tip load divided by the cross-sectional area of the distal tip

Microcatheters



Single Lumen Microcatheters

APT: Elong ST, Elong TT

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

BOSTON: Crossboss, Mamba

iVASCULAR: Navitian

TELEFLEX: Turnpike, Turnpike LP, Turnpike Spiral, Turnpike Gold, Supercross FT

TERUMO: Finecross, Finecross M3



Elong[™] Straight Tip



Optimized design for CTO Retrograde Navigating

Designed for both CTO Antegrade and Retrograde Navigating

Slight tapered distal end



1.7F

1.9F



- **Triple-layer structure** (PTFE, braided metal mesh, Pebax);
- **Hydrophilic coating** on the distal part;
- **170 cm length** available for retrograde approach;
- Equipped with support wire, can be used as **extension wire**, compatible with all 0.014" PTCA guidewire.





Elong™ Tapered Tip 2.6F

Optimized design for Calcified Lesion



- Well-balanced tip stiffness maintains superior trackability
- 2 Frames: Better trackability and enables rotating manipulation Tip OD:1.3E
- Hydrophilic coating on the distal part;
- 170 cm length available for retrograde approach;



Easy to pass the "S" angle

4 Layer Structure:

- 2 Frames: 16 braiding mesh, 10 strand coil
- Meshing provides axial support, coil provides radial support and drilling capability
- Coil dense is reduced from proximal to distal





ASAHI Caravel







ASAHI Corsair Pro







ASAHI Corsair Pro XS







ASAHI Tornus













The CrossBoss Catheter is designed to quickly and safely deliver a guidewire via true lumen or subintimal pathways in coronary arteries

- Fast-Spin torque device allows rapid rotation of the catheter to facilitate crossing
- Multi-wire coiled shaft provides precise turn-for-turn torque response
- Atraumatic, rounded tip reduces risk of perforation
- 0.014" (0.36mm) guidewire compatible
- 6F (2.0mm) guide catheter compatible



IC-1278502-AA © 2023 Bosto







With their proprietary tapered coil and integrated tip, MAMBA[™] 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-1278502-AA @ 2023 Batton Scientific Conportine of the officiates All gights reserved. able

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
SuperCross[™] FT Microcatheter



Turnpike™ Microcatheter Family



MCI-2023-0514

• 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.





Finecross[™] m3 – features & benefits

Finely Tapered Tip for high trackability¹

Large Tip Inner Lumen for better selective injections and wiring ability¹ Strong Tip Design for better wire manipulation¹

> Novel Hydrophilic Coating for improved advancement in tight vessels and lesion crossing¹

Enhanced Distal Flexibility for smoother navigation in tortuous anatomy¹

> TERUMO INTERVENTIONAL SYSTEMS

1 Data on File at Terumo Corporation.

FINECROSS[™] M3 - specifications

Shaft Braiding Stainless Steel

Shaft Coating Hydrophilic Coating

> Inner Layer PTFE

Tip Inner Diameter 0.018" / 0.45 mm

GW Compatibility 0.014" / 0.36 mm

Usable Length 130 and 150 cm

Radiopaque Marker 0.7 mm gold marker at 1.3 mm from tip







Dual Lumen Microcatheters

Rapid Exchange (RX)

Elong NHancer RX

Sasuke

TwinPass

Over The Wire (OTW)

ReCross



Elong[™] Dual Lumen Microcatheter



Optimal solution for complicated CTO cases with multiple devices used





Hydrophilic coating on the distal part

Can be used for:

- Parallel Wire (Seesaw wiring)
- Reverse Wiring

Dual Lumen

- RX lumen provides rapid exchange of devices
- OTW lumen provides support







Dual Lumen RX Microcatheter







Dual Lumen RX Microcatheter



• 12M 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





Dual Lumen RX Microcatheter

NHancer Rx is a versatile tool suitable for everyday complexity and select CTO applications:

- Side branch access and protection in challenging situations
- Selective contract injection
- Wire support in select CTO applications
- CTO = Chronic Total Occlusion
- * Applicable also for access through stent struts.

Everyday complexity (non-CTO applications)

Application versatility

Side branch access*



Reverse wire technique

Selective contrast injection





CTO applications

Side branch anchor



Subintimal anchor



Side branch protection





ASAHI's Double Lumen Catheter to maximize stability & control









5. Visible Exit





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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







Dual Lumen OTW Microcatheter



RECROSS









Dual Lumen Microcatheter



• *Applicable in both situations of intended and unintended subintimal wire passage. ** Procedural optimization and complication management where required. # Applicable also for access without stent.



Angled Tip Microcatheters

SuperCross

Venture

SuperCross Angled Tip Microcatheter



working length: 130 cm, 150

Superb Crossability on challenging Cases



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







Venture Catheter



Physiology



COMET II Pressure Wire Features





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











Automated Lesion Assessment (ALA™) Precise Vessel Measurements¹

• 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





PhysioMapTM Enhanced DFR guidance*

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

Cath Lab





^{§§}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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PERFORMANCE

of the guidewire



to disconnect and reconnect

FREEDOM



Key design advantages

- concentric spinning
- higher torque response
- low tip load

PSens 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

olymer layer





Sheaths

Destination[®]

Introduction of interventional and diagnostic devices into human vasculature,

including but not limited to renal, carotid and peripheral arteries

Coil-reinforced tubing

- 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

Unique Cross Cut Valve *Protect against blood reflux and air aspiration*



Diameters from 5F to 8F,

lengths 45, 65, 90 cm





137

Glidesheath Slender

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



TERUMO INTERVENTIONAL

Glidesheath Slender



TERUMO INTERVENTIONAL SYSTEMS

F, French; CTO, Chronic Total Ocdusion; 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

Inherited Ultimaster[™] DES family features to support rapid vascular repair ¹





Flexible 80µm CoCr platform for optimal conformability



Abluminal coating allows for an optimized drug dose of sirolimus 3.9 μg/mm of stent^{2,3}



Bioresorbable drug coating applied in a gradient to reduce the risk of polymer crack and delamination²



Short-term polymer exposure mirrors biological response, promoting rapid vascular repair within 3–4 months^{1,2}

1. Chevalier B et al. Circ Cardiovasc Interv 2017;10:e004801. 2. Saito N et al. Medical Devices: Evidence and Research 2016;9:3:43 | 3. Barbato E et al. EuroIntervention 2015;11:54 8 | 4. Internal test report, LMF-0000041-RAFR-001-1184 | 5. Internal test report, LMF-0000041-RAFR-001-1162



Ultimaster Nagomi

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



Mectronic Engineering the extraordinary

Onyx Frontier[™]

Drug-Eluting Stent

Engineered to deliver

At least 24% more deliverable than competitive DES^{†1}

Introducing an enhanced delivery system[†] featuring:

- Dual-flex balloon
- Lower crossing profile²
- Increased catheter flexibility³



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

. Based on Senich test data on file at Medironic. [D00339634 - Test Report for DES Competitive Comparison with Frontier test methods, Rev C, 05-May-2022] May not be indicative of clinical performance. V = 5 DES of each tested: Ongx Frontier DES, Orsino Mission DES, Resolute Ongx DES, XIENCE Skypoint DES, SYNERGY DES, Ultimaster Tansei - DES.

ased on bench test data on file at Meditonic. [44RD21031-040047 Onyx Frontier Vs Resolute Onyx Balloon Extrusion, Version 1.0, 17-Feb-2022] May not be indicative of clinical performance. ased on bench test data on file at Meditonic. [D00339634 - Test Report for DES. Competitive Comparison with Frontier test methods, Rev C, 05-May 2022] May not be indicative of clinical performance. 7 cli nech DeStatemed

I. Third-party modeling and analysis. [Mortier MD7-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^{nd+} BMS, SYNERGY^{nd+} DES, XIENCE Alpine^{nd+} DES, and Multi-Link 8 platform.

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

6. Roleder T, Kedhi E, Bens 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.

angiolite Drug eluting stent #westentbyyou

iVascular

Exceptional overexpansion capacity from small to big vessels

4.00mm










PtCr Alloy

- Radial Strength
- Radiopacity
- Conformability
- Reduced Recoil

Innovative Stent Design

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



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

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SYNERGY MEGATRON Features





Purpose-built stent architecture to maximize performance for large vessel stenting¹

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

Optimized Strut Thickness and Width For Maximum Visibility and Radial Strength

For Radial Strength, Unmatched Expansion and Uniform Vessel Scaffolding



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.³



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Drug Eluting Stent



Orsiro Mission

Drug Eluting Stent







Ultrathin Struts



Hybrid Coating



Double Helix Design

- Less flow disturbance
- Less metal to be covered
- Early vascular healing
- After polymer degradation the potential cause for long-term inflammation is gone.¹
- Controlled Sirolimus elution
- Surface passivation to improve biocompatibility⁴
- Reducing thrombogenicity³
- Double helical stent design for excellent flexibility during stent delivery



1. Kolandaivelu, Kumaran, et al. "Stent Thrombogenicity Early in High-Risk Interventional Settings Is Driven by Stent Design and Deployment and Protected by Polymer-Drug CoatingsClinical Perspective." *Circulation* 123.13 (2011): 1400-1409. 2. Joner, Michael, et al. "Endothelial cell recovery between comparator polymer-brug CoatingsClinical Perspective." *Circulation* 123.13 (2011): 1400-1409. 2. Joner, Michael, et al. "Endothelial cell recovery between comparator polymer-based drug-eluting stents." Journal of the American College of Cardiology 52.5 (2008): 333-342.

Orsiro Mission



Secco et al. Time-related changes in neointimal tissue coverage of a novel Sirolimus eluting stent. Serial observations with optical coherence tomography. Cardiovascular Revascularization Medicine 17 (2016) 38–43





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





of X

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



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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 strut¹
- **»** Excellent deliverability²
- Thin and uniform neointimal coverage³

DYNAMX

1) 2.25mm – 3.0mm are 71µm thick, Data on file at Elixir Medical

2) 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 beat¹
- » Movement (bending, twisting, pulsation) of a stented artery adds additional stress on the stent and on the vessel wall²



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

» Lower device stress:

- » Reduces probability of fracture⁴
- » Lowers vessel stress²
- » May improve clinical outcomes²

- 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
- 3. Data on file at Elixir Medical . Ormiston et al. Circ Cardiovasc Interv 2014;7:Dec 24 13 [E-pub]
- 4. Kuramitsu et al. Circ Cardiovasc Interv. 2012;5:663-671, Kuramitsu et al. J Am Coll Cardiol Intv 2015;8:1180–1188



25 DynamX Coronary Bioadaptor System is CE Mark approved. PMN 513 Rev E

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%)¹

PRE-PROCEDURE

POST-PROCEDURE²

6M-FOLLOW UP

12M-FOLLOW UP²





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





The resorption is completed. No struts appear in OCT.



Covered Stents

PK Papyrus

Seal perforations with confidence

Covered single stent design



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

ed 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, IIB data 2020); 3. Hemandez-Enriquez M, Lairez O, Campelo-Parada F, et al. Outcomes after use of covered stents to treat coronary forations. Comparis on of old and new-generation covered stents. J Interv Cardiol. 2018; 1–7. doi: 10.1111/joic.12525; 4. Population is representative of real-world interventional practice and was not a randomized prospective clinical trial. PK Papyrus and proBIO are trademarks or registered trademarks of the BIOTRO NIK Group of lies. Jostent and Graftmaster are trademarks or registered trademarks of the Abbott Group of Companies .



Imaging

Ultreon[™] Software

See Simply. Act Decisively.

Make fast, accurate clinical decisions with the help of Al²

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 Measurements¹

• 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





PhysioMapTM Enhanced DFR guidance*

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

Cath Lab





^{§§}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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Opticross[™] 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[®] with SmartAssist[®]

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.[™] 166

ABIOMED



Impella CP[®] with SmartAssist[®]

Overview

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

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





Recovering hearts. Saving lives.

SmartAssist – Intelligently Manage Guidance for Successful Weaning



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 Recovering hearts. Saving lives.



Closure Devices





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

All components are completely bio-absorbable within 60-90 days by hydrolysis¹



Built upon the Perclose[™] Legacy



REDESIGNED.

Perclose[™] ProStyle[™]

Suture-Mediated Closure and Repair System

Perclose[™] ProStyle[™] SMCR System is the next generation Perclose[™] device redesigned with higher tensile-strength needles, enhanced usability, and a more intuitive deployment experience compared to earlier Perclose[™] generations.^{1,2} **REPAIR.**



Perclose[™] devices achieve immediate and durable hemostasis via suture-mediated repair giving confidence of a secure close¹, while preserving access sites for immediate re-access¹, and enabling primary intention healing to begin.³

RECOVER.



The Perclose[™] ProStyle[™] SMCR System can enhance the patient experience by providing earlier patient mobilization, shortened hospital length of stay^{4,5}, and a reduced risk of access site-related complications.^{6,7}

1. Perclose[™] ProStyle[™] 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[™] Versus Surgical Closure Outcomes – Real World Evidence. Schneider, Darren B; Krajcer, Zvonimir; et al. LINC 2018. 7. The Use of the Perclose ProGlide[™] Suture Mediated Closure (SMC) Device for Venous Access-Site Closure up to 24F Sheaths. Kar, Saibal; Hermiller, James; et al. CRT 2018.