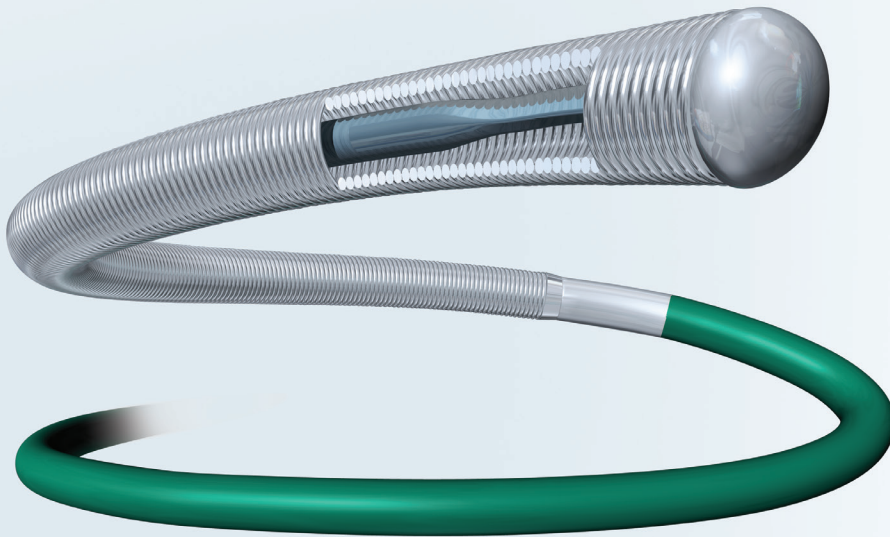


PORTER®

Delivery Guidewire

Excellent Support and Steerability

PORTER® Guidewires feature one-piece core wire providing 1:1 torque transmission to the guidewire tip. PORTER® Guidewires provide excellent support, visibility and steerability.

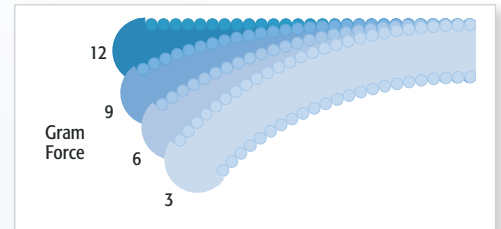


CROSSER® Catheter Delivery

Unique hydrophilic PORTER® Guidewire coating provides exceptional trackability even in tortuous anatomy

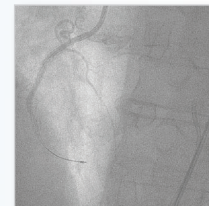
CROSSER® Catheter Steerability

Various levels of tip stiffness of PORTER® Guidewires provide precise steerability

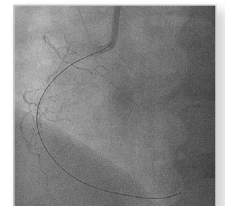


CROSSER® Catheter Visibility

Short radiopaque coiled tip provides exceptional visibility without compromising placement of adjunctive devices



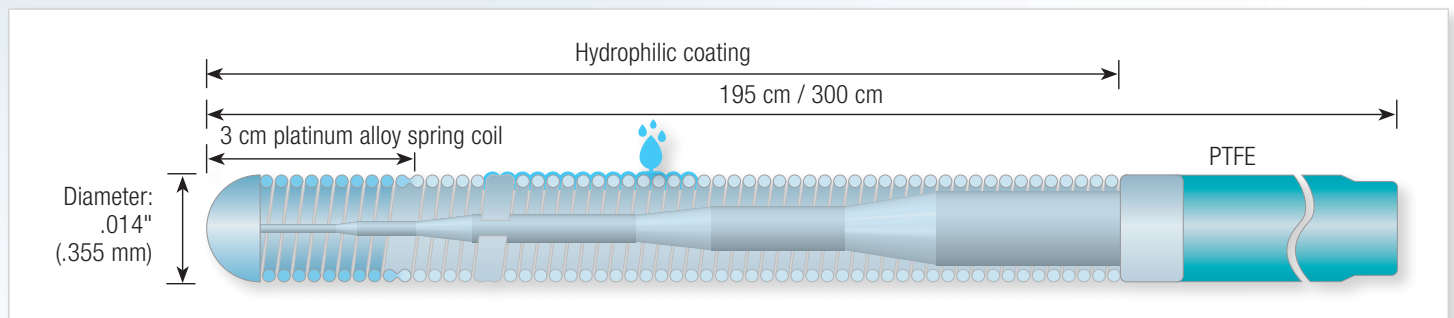
Tip of PORTER® Guidewire



Tip of Competitive Guidewire

CROSSER® Catheter Support

Body of PORTER® Guidewire provides excellent support for delivery of therapeutic devices to the occlusion site



PORTER®

Delivery Guidewire

Product Specifications

Diameter	.014"
Lengths	195 cm and 300 cm
Radiopaque Segments	3 cm platinum alloy spring coil
Tip Shape	Straight
Proximal Extension	195 cm version may be extended
Coil Coating	Hydrophilic

Ordering Information

PORTER® Guidewires		
Description	Quantity	Product Code
3g, .014" x 195 cm	5/box	<input type="checkbox"/> GWP1403
3g, .014" x 300 cm	5/box	<input type="checkbox"/> GWP1403X
6g, .014" x 195 cm	5/box	<input type="checkbox"/> GWP1406
6g, .014" x 300 cm	5/box	<input type="checkbox"/> GWP1406X
9g, .014" x 300 cm	5/box	<input type="checkbox"/> GWP1409X
12g, .014" x 300 cm	5/box	<input type="checkbox"/> GWP1412X

CROSSER® CTO Recanalization Catheters		
Description	RX / OTW	Product Code
S6 - 106 cm	N/A	<input type="checkbox"/> CRUS6106
S6 - 154 cm	N/A	<input type="checkbox"/> CRUS6A
14S - 106 cm	RX	<input type="checkbox"/> CRUS106
	OTW	<input type="checkbox"/> CRUOS106
14S - 146 cm	RX	<input type="checkbox"/> CRU14SA
	OTW	<input type="checkbox"/> CRUO14SA

Recommended Adjunctive Devices

SIDEKICK® Support Catheter For use with CROSSER® Catheter 14S	
Description	Product Code
70 cm Straight	<input type="checkbox"/> SD70G
70 cm Straight Tapered	<input type="checkbox"/> SD70TG
70 cm Angled	<input type="checkbox"/> SD70AG
70 cm Angled Tapered	<input type="checkbox"/> SD70ATG
110 cm Straight	<input type="checkbox"/> SD110G
110 cm Straight Tapered	<input type="checkbox"/> SD110TG
110 cm Angled	<input type="checkbox"/> SD110AG
110 cm Angled Tapered	<input type="checkbox"/> SD110ATG

USHER® Support Catheter For use with CROSSER® Catheter S6	
Description	Product Code
83 cm Tapered	<input type="checkbox"/> USH83TG
83 cm Angled Tapered	<input type="checkbox"/> USH83ATG
130 cm Tapered	<input type="checkbox"/> USH130TG
130 cm Angled Tapered	<input type="checkbox"/> USH130ATG

_____ REPRESENTATIVE NAME
_____ CONTACT PHONE NO.

_____ PHYSICIAN'S SIGNATURE

PORTER® Guidewire

Indications: The PORTER® Guidewires are intended for use in the coronary and peripheral vasculature.

Contraindications: The PORTER® Guidewire is not intended for use in the cerebral vasculature. Patients judged not acceptable for percutaneous intervention (PCI).

Precautions: Failure to follow the instructions may compromise guidewire performance and result in complications. Prior to use, confirm compatibility of guidewire outer diameter with the balloon catheter. The tip section of the guidewire has a proper orientation for shaping. Identify the flexing plane before shaping. Shape in the same plane as that for flexure. Guidewire advancement, withdrawal, and torquing should be monitored by fluoroscopy. These guidewires have stiff distal ends. Therefore the risk of perforation or injury

when using these wires is higher. These wires must be operated carefully. Use the most flexible guidewire that will treat the lesion i.e. the guidewire with the smallest flexibility number and take due care to minimize the risk of perforation or other damage to the blood vessels.

Warning: A guidewire is a delicate instrument and must not be advanced, withdrawn, or torqued if resistance is met. Guidewire manipulations must always be observed under fluoroscopy. If the guidewire is removed and is to be re-inserted, it must be inspected for signs of damage (weakened or kinked segments) prior to re-introduction. Do not re-introduce if guidewire is weakened or kinked.

Please consult product labels and package inserts for indications, contraindications, hazards, warnings, cautions and instructions for use.

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