Cardiovascular Catalog - U.S.



Table of Contents



About Us	. 3
CORDIS® Access Portfolio	. 4
CORDIS [®] Sheath Portfolio	.5 .6 .7 .7
CORDIS® Accessories Portfolio	
CORDIS® RADIAL360 Portfolio. RAIN Sheath™ Transradial Thin-Walled Introducer RAILWAY® Sheathless Access System	11 12 13 14 15
CORDIS® Diagnostic Portfolio	18
CORDIS® Diagnostic Guidewires EMERALD® Diagnostic Guidewires EMERALD® Fixed-Core Guidewire EMERALD® Fixed-Core Guidewire EMERALD® Novable-Core Guidewire EMERALD® Movable-Core Guidewire EMERALD® Amplatz Guidewire EMERALD® Amplatz Super Stiff Guidewires. EMERALD® Rosen Heavy Duty Guidewire EMERALD® Standard J-Tip Guidewire.	23 24 25
CORDIS® Diagnostic Catheters	26 34 36 37
CORDIS® Interventional Portfolio	40
CORDIS® Steerable Guidewires	42 43 44

STABILIZER® Marker Steerable Guidewire SHINOBI® Steerable Guidewire SHINOBI® Plus Steerable Guidewire REFLEX® Steerable Guidewire WIZDOM® Steerable Guidewire	45 45 46
CORDIS® Guiding Catheters	49
CORDIS® Guiding Catheters	rs
EcoPac Five Pacs.	
PTCA Balloons EMPIRA® RX Pre-Dilatation Catheter EMPIRA NC® RX Post-Dilatation Catheter MOZEC™ PTCA Balloon Dilatation Catheter MOZEC™ NC PTCA Balloon Dilatation Catheter	72 73 74
Bifurcated Coronary Stent	
CORDIS® Biopsy Forceps	77
CORDIS [®] Closure Portfolio	80 81
ndications ADROIT® Guiding Catheter ATW™ Steerable Guidewire, ATW™ Marker Wire, STABILIZER® Plus Steerable Guidewire, STABILIZER® XS Steerable Guidewire, SHINOBI® Steerable Guidewire, SHINOBI® Plus	83
Steerable Guidewire, REFLEX® Steerable Guidewire, WIZDOM Steerable Guidewire AVANTI®+ Sheath Introducer BI-PAL® Biopsy Forceps EMERALD® Diagnostic Guidewire EMPIRA® Balloon Catheter EXOSEAL® Vascular Closure Device FHIGHFLOW™ Diagnostic Catheter, INFINITI® Diagnostic	83 84 85 85 85
Catheter, TEMPO AQUA® Diagnostic Catheter	88



Cordis is a worldwide leader in the development and manufacture of interventional vascular technology with a more than 60-year history of delivering pioneering products to treat millions of patients.

Our focus is in cardiology and endovascular platforms, with high-quality products such as diagnostic and interventional catheters, balloons, self-expanding stents, guidewires, and vascular closure devices. Working with our customers, we identify solutions that provide the best possible results for both physicians and patients.

We will continue to build on our rich history as part of Cardinal Health, a company with complementary skills and expertise. By leveraging Cordis' deep experience in product innovation and Cardinal Health's business and operational expertise, we are uniquely positioned to continue meeting the evolving needs of our customers and their patients – and remain at the forefront of change in healthcare.

To learn more visit cordis.com

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CORDIS® Access Portfolio

AVANTI®+ Sheath Introducer

The Cordis AVANTI®+ Sheath Introducer is the pioneer of catheter sheath introducer technology. Featuring a patented SLIX™ Valve, the AVANTI®+ introducer provides smooth transitions, monitoring capabilities and exceptional performance for your procedural success, as well as:

- A hexacuspid design that provides a balance between catheter maneuverability and hemostasis.
- A rotating suture collar that facilitates procedural flexibility. It stays in place and allows patient movement.
- A kink-resistant cannula design integrating a soft, flexible inner layer with a stiffer outer layer for excellent bendability and support. It is also cost-effective and reliable.
- Atraumatic tip transitions for both the sheath and the vessel dilator are uniquely tapered and manicured. This results in smooth insertions and helps to minimize damage upon entry.

Obturators

- Flexible shaft helps prevent kinking of the sheath when the sheath is used in a patient for a long period of time without a product in place.
- Easy French size identification provided by a color coding system and the number on the hub*.
- Easy to store, environment friendly boxes with the smallest possible dimensions.
- Ease of insertion through the sheath and minimal vessel damage thanks to the rounded atraumatic distal tip.
- No "backing out" of the obturator by the secure snap fit between obturator and sheath.
- Low profile hub to ease placement and manipulation.

Vessel Dilators

- Secure snap to prevent "backing out" of the dilator.
- Easy insertion due to lubricious SLX[™] coating.
- Minimal tissue trauma due to optimized tapering.

	Standard length	Mid-length
Cannula length (cm)	11	23
Dilator length		
4F - 5F	18	28
6F - 9F	19	28
10F - 11F	20	30
Stopcock	3-way	3-way
Sideport Extension length (cm)	22	22
Obturator length	12	26
Suture collar	Rotating color coded suture collar	



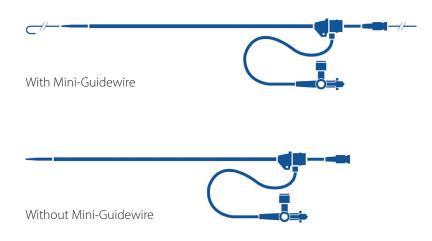
AVANTI®+ Sheath Introducer

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- Atraumatic tip transitions for both the sheath and the vessel dilator are uniquely tapered and manicured. This results in smooth insertions and helps to minimize damage upon entry.

Key Features

- Sheath assembly
- Flexible and kink-resistant cannula
- Sideport extension with 3-way stopcock
- Flexible dilator
- Units per package: 5





AVANTI®+ Sheath

French Size (F)	Color Code	Cannula Usable Length (cm)	Mini-Guidewire Diameter	With Mini-Guidewire	Without Mini-Guidewire
4		11	.035	504604X	504604A
5		11	.038	504605X	504605A
5.5MS		11	.038	504655X	
6		11	.038	504606X	504606A
6.5MS		11	.038	504656X	504656A
7		11	.038	504607X	504607A
7.5MS		11	.038	504657X	504657A
8		11	.038	504608X	504608A
8.5MS		11	.038	504658X	
9		11	.038	504609X	504609A
10		11	.038	504610X	504610A
11		11	.038	504611X	

AVANTI®+ Mid-Length Sheath Introducer

French Size (F)	Color Code	Cannula Usable Length (cm)	Dilator Usable Length (cm)	With Obturator	Without Obturator
4		23	30		504604T
5		23	30		504605T
6		23	30	504606D	504606T
6.5MS		23	30		504656T
7		23	30	504607D	504607T
8		23	30	504608D	504608T
10		23	30		504610T
11		23	30	504608X	504611T

MS = Monitoring sheath. Provides slightly larger ID for pressure monitoring or side port aspiration with a catheter in place, they are one-half French larger. For information on indications, contraindications, warnings, and precautions, see page 84.





AVANTI®+ Valveless Portless Sheath Introducer With Mini-Guidewire

Key Features

- Valveless, portless
- Sheath assembly with female Luer connector hub, 45 cm mini-guidewire and tapered vessel dilator
- 11 cm usable cannula length
- 17 cm usable guidewire length
- Straight
- Units per package: 5



French Size (F)	Color Code	Cannula Usable Length (cm)	Mini-Guidewire Diameter (inch)	Product Code
7		11	.038	504607V
8		11	.038	504608V



AVANTI®+ Brachial Sheath Introducer With Mini-Guidewire

French Size (F)	Color Code	Cannula Usable Length (cm)	Mini-Guidewire Diameter (inch)	Product Code
4		5.5	.035	504604P
5		5.5	.038	504605P
6		5.5	.038	504606P



AVANTI®+ Sheath Introducer With Mini-Guidewire



French Size (F)	Color Code	Cannula Usable Length (cm)	Mini-Guidewire Diameter (inch)	Product Code
4		7.5	.021	504604S
5		7.5	.021	504605S
6		7.5	.021	504606S

AVANTI®+ Transradial Sheath Introducer Kit

With mini-guidewire, vessel dilator and 21G needle

French Size (F)	Color Code	Cannula Usable Length (cm)	Guidewire Acceptance (inch)	Product Code
4		11	.021 70 cm	504614Z
4		23	.021 70 cm	504624Z
5		11	.021 70 cm	504615Z
5		23	.021 70 cm	504625Z
6		11	.021 70 cm	504616Z
6		23	.021 70 cm	504626Z
7		11	.021 70 cm	504617Z
With Mini-Guid	\frown		It Mini-Guidewire	



Obturators

Key Features

- For use with Sheath Introducers
- Flexible shaft helps prevent kinking of the sheath
- Easy French size identification
- Low profile hub to ease placement and manipulation
- Units per package: 10



French Size (F)	Color Code	13 cm Cannula
4		502188
5		502190
6		502191
7		502192
8		502194



Vessel Dilators

Key Features

- Facilitate the percutaneous entry of angiographic catheters
- With Luer hubs
- Units per package: 10



French Size (F)	Color Code	Guidewire Compatibility (inch)	Usable Length (cm)	Product Code
4		.021	14.5	504504S
4		.035	17	504404X
5		.021	14.5	504505S
5		.035	17	504405X
5		.038	17	504505X
6		.035	17	504406X
6		.038	17	504506X
7		.035	19	504407X
7		.038	17	504507X
8		.035	19	504408X
8		.038	17	504508X
9		.038	19	504509X

CORDIS® RADIAL360 Portfolio

Introducing innovation dedicated to the advancement of transradial access. The Cordis RADIAL360 portfolio offers a complete range of products that streamlines the procedure from access to closure. The dedicated access products include the RAIN Sheath[™] Transradial Thin-Walled Introducer for an ultra-low profile design, and the novel RAILWAY[®] Sheathless Access System which may reduce the access profile by up to 2F¹. To complement the diagnostic catheter portfolio, additional radial specific radial shapes are available in the well-known INFINITI[®] and SUPER TORQUE[®] Plus portfolios. The ZEPHYR[®] compression band delivers stable compression without a rigid hard plastic plate, featuring a soft band for patient comfort.

RAIN Sheath[™] Transradial Thin-Walled Introducer

Minimize spasm and trauma to the vessel with the RAIN Sheath[™] Thin-Walled introducer uniquely designed for transradial access. The proprietary Kink Recovery Technology[™] feature allows the RAIN Sheath Introducer to flex, maintaining lumen integrity and atraumatic shape. Leveraging the well-known hexacuspid valve from the AVANTI+ family of Sheaths, RAIN Sheath Introducer reduces the risk of bleedback. Hydrophilic coated and ultra low profile design is available in 4-7F sizes.

Learn more page 12

INFINITI® & SUPER TORQUE® PLUS Diagnostic Catheters

Available in an extensive range of dedicated and universal shapes, now including the RBL-TG[™] and RBL-JK[™]. The RBL-TG and RBL-JK universal shapes allow you to cannulate both the left and right coronary artery with a single catheter and are available in both our nylon INFINITI® and polyurethane SUPER TORQUE® Plus Diagnostic Catheter lines—two different materials, and two distinct options for how the catheter feels in your hand.

Learn more page 15

RAILWAY® Sheathless Access System

The RAILWAY[®] System is a first of its kind device that can convert your preferred guide catheter into a sheathless access system. The versatile system reduces access up to 2F¹, facilitating direct radial access without a sheath. A smaller access profile reduces the risk of spasm and occlusion², allowing treatment of more complex lesions from the radial artery³. The RAILWAY System can also allow upsizing to a larger guide catheter following a diagnostic procedure, or can be used to help track through radial anatomy with or without a sheath.

Learn more page 13

ZEPHYR® Vascular Compression Band

The ZEPHYR[®] device helps clinicians achieve patent hemostasis with firm downward pressure and clear visualization of the puncture site. Available in both a regular and large size, the ZEPHYR device has a compliant elastomeric band for patient comfort and a double bonded balloon.

Learn more page 14



Note: The ZEPHYR® device is manufactured by Advanced Vascular Dynamics and distributed by Cordis Corporation.

1. Compared to conventional radial sheaths. Profile reduction is 1.2F compared to Terumo Glidesheath Slender

2. Vessel injury, spasm and occlusion risk is reduced with lower profile devices. Saurabh Sanon and Rajiv Gulati, "Slender Approach and Sheathless Technique", Interventional Cardiology Clin 4 (2015) 161-166

3. With the puncture size of a SF sheath, the RAILWAY* system enables the use of atherectomy devices and dual (kissing) balloons compatible with 7F guiding catheters.



RAIN Sheath™ Transradial Thin-Walled Introducer

Part of the RADIAL360 portfolio, the RAIN Sheath[™] Introducer features a thin-walled transradial sheath with an ultra-low profile designed to reduce the risk of radial artery trauma and spasm.

Key Features

ULTRA - LOW PROFILE DESIGN

• Same "6F in 5F" concept as newer generation radial sheaths¹

PROPRIETARY KINK RECOVERY TECHNOLOGY™

- Elastomeric properties allow the RAIN Sheath™ Introducer to bend and flex to maintain lumen integrity
- LUBRICIOUS HYDROPHILIC COATING
- Facilitates smoother, easier insertion and removal
 HEXACUSPID HEMOSTASIS VALVE
- Designed to preserve hemostasis and reduce risk of bleedback



SHEATH SIZE	CANNULA LENGTH	MINI-WIRE	MINI-WIRE COMPATIBILITY	NEEDLE	PRODUCT CODE
	10cm	BARE STAINLESS STEEL	0.021" x 45cm	21G BARE NEEDLE	506410S
ΔF	TUCM	HYDROPHILIC NITINOL	0.021" x 45cm	20G IV CATHETER NEEDLE	506410H
46	16cm	BARE STAINLESS STEEL	0.021" x 45cm	21G BARE NEEDLE	506416S
	юсті	HYDROPHILIC NITINOL	0.021" x 45cm	20G IV CATHETER NEEDLE	506416H
	10cm	BARE STAINLESS STEEL	0.021" x 45cm	21G BARE NEEDLE	506510S
5F	IUCM	HYDROPHILIC NITINOL	0.021" x 45cm	20G IV CATHETER NEEDLE	506510H
70	16cm	BARE STAINLESS STEEL	0.021" x 45cm	21G BARE NEEDLE	506516S
	тост	HYDROPHILIC NITINOL	0.021" x 45cm	20G IV CATHETER NEEDLE	506516H
	10cm	BARE STAINLESS STEEL	0.021" x 45cm	21G BARE NEEDLE	506610S
6F	TOCH	HYDROPHILIC NITINOL	0.021" x 45cm	20G IV CATHETER NEEDLE	506610H
OF	16cm	BARE STAINLESS STEEL	0.021" x 45cm	21G BARE NEEDLE	506616S
		HYDROPHILIC NITINOL	0.021" x 45cm	20G IV CATHETER NEEDLE	506616H
	10cm	BARE STAINLESS STEEL	0.021" x 45cm	21G BARE NEEDLE	506710S
7F	IUCIII	HYDROPHILIC NITINOL	0.021" x 45cm	20G IV CATHETER NEEDLE	506710H
/ Г	16cm	BARE STAINLESS STEEL	0.021" x 45cm	21G BARE NEEDLE	506716S
	IOCIII	HYDROPHILIC NITINOL	0.021" x 45cm	20G IV CATHETER NEEDLE	506716H

1. Outer diameter of the thin-walled 6F sheath is the same as the conventional 5F sheath. This concept applies to RAIN Sheath™ in the following sizes: 4F, 5F, 6F, 7F.

For information on indications, contraindications, warnings, and precautions, see page 92.



RAILWAY® Sheathless Access System

The versatile system for reducing access up to 2F¹

Key Features

SMALLER ACCESS PROFILE THAN ANY RADIAL SHEATH:

- Reduce risk of spasm and occlusion²
- Treat more complex lesions via radial access³

COMPATIBILITY:

- Works with hundreds of guiding catheters⁴
- Available in 5F, 6F, and 7F sizes

VERSATILITY:

- Access with purely sheathless approach for planned interventions
- Increase guiding catheter French size following angiography with a sheath
- Track through radial anatomy either with or without a sheath

3 Ways to Use the RAILWAY® SHEATHLESS ACCESS SYSTEM

Smallest Access Profile¹ – completely sheathless intervention for your planned procedures

Upsize When Needed – upsize to a large guiding catheter for intervention without increasing puncture size following angiography

Facilitate Tracking – track through the radial anatomy up to the up to the subclavian

The RAILWAY SHEATHLESS ACCESS SYSTEM INCLUDES:

- .021" guidewire compatible vessel dilator
- .035" guidewire compatible vessel dilator
- .021" mini-guidewire, IV cannula and bare needle

Product Code	MINI ACCESS WIRE	NEEDLE(S) INCLUDED	VESSEL DILATOR	RECOMMENDED GUIDING CATHETER COMPATIBILITY (AND INNER DIAMETER)	GUIDEWIRE COMPATIBILITY (2 DILATORS)	DILATOR OUTER DIAMETER DIMENSIONS
RW5ADTH	HYDROPHILIC NITINOL	IV CANNULA NEEDLE	5F, GRAY	5F CORDIS	0.021" AND 0.035"	0.057″ / 1.45 mm
RW5ADTB	BARE STAINLESS STEEL	IV CANNULA AND BARE NEEDLES		ADROIT® (0.058")	0.021 AND 0.033	0.037 / 1.45 mm
RW5VBTH	HYDROPHILIC NITINOL	IV CANNULA NEEDLE		5F CORDIS VISTA BRITE TIP®	0.021" AND 0.035"	0.056″ / 1.41 mm
RW5VBTB	BARE STAINLESS STEEL	IV CANNULA AND BARE NEEDLES		(0.056″)	0.021 AND 0.033	0.050 / 1.41 mm
RW6ADTH	HYDROPHILIC NITINOL	IV CANNULA NEEDLE		6F CORDIS ADROIT (0.072")	0.021" AND 0.035"	0.071″ / 1.80 mm
RW6ADTB	BARE STAINLESS STEEL	IV CANNULA AND BARE NEEDLES	6F,	OF CORDIS ADROIT (0.072)	0.021 AND 0.055	0.071 / 1.80 mm
RW6VBTH	HYDROPHILIC NITINOL	IV CANNULA NEEDLE	GREEN	6F CORDIS VISTA BRITE TIP®	0.021" AND 0.035"	0.070" / 1.77 mm
RW6VBTB	BARE STAINLESS STEEL	IV CANNULA AND BARE NEEDLES		(0.070")	0.021 AND 0.035	0.070″ / 1.77 mm
RW7VBTH	HYDROPHILIC NITINOL	IV CANNULA NEEDLE	7F,	7F CORDIS VISTA BRITE TIP®	0.021" AND 0.035"	0.078″ / 1.97 mm
RW7VBTB	BARE STAINLESS STEEL	IV CANNULA AND BARE NEEDLES	ORANGE	(0.078″)	0.021 AND 0.035	0.076 / 1.97 mm

1. Compared to conventional radial sheaths. Profile reduction is 1.2F compared to Terumo Glidesheath Slender

- 2. Vessel injury, spasm and occlusion risk is reduced with lower profile devices. Saurabh Sanon and Rajiv Gulati, "Slender Approach and Sheathless Technique", Interventional Cardiology Clin 4 (2015) 161-166
- 3. With the puncture size of a 5F sheath, the RAILWAY* system enables the use of atherectomy devices and dual (kissing) balloons compatible with 7F guiding catheters.
- 4. Optimized for VISTA BRITE TIP* and ADROIT*; compatible with Terumo Heartrail II, Boston Scientific Mach 1, and Medtronic Launcher guiding catheters

For information on indications, contraindications, warnings, and precautions, see page 91



ZEPHYR[®] Vascular Compression Band

Designed to simplify patent hemostasis

Key Features

DOUBLE BONDED RADIAL BALLOON

• The Zephyr[®] band helps clinicians achieve patent hemostasis with firm downward pressure and clear visualization of the puncture site

INTERCHANGEABLE SYRINGE CONNECTION

• Easy to use: universally compatible with standard luer syringes

SOFT FLEXIBLE BAND

Compliant elastomeric band for patient comfort and firm compression balloon
 for patent hemostasis



Product Code	Zephyr Band Type	Length	Units
190101	Regular	25cm	5 EA/BOX
190102	Large	30cm	5 EA/BOX



INFINITI® & SUPER TORQUE® PLUS Diagnostic Catheters

Now available in universal shapes.

Key Features

The RBL-TGT[™] shape and RBL-JK[™] shape allow you to cannulate both the left and right coronary artery with a single catheter and are now available in our nylon INFINITI and polyurethane SUPER TORQUE Plus catheters.

DIRECT RESPONSE

• High density braiding for exceptional responsiveness and one to one torque control **KINK RESISTANCE**

- Braided construction for excellent pushability without compromising kink resistance **TRUE LUMEN DESIGN**
- True Lumen design with thin wall technology for a consistent lumen diameter that facilitates easy injections and higher flow rates²

INFINITI® Diagnostic Catheter Family Radial Specific Shapes

Part Number	Shape Name	Side Holes	Lenth (cm)	French Size
555500T1	RBL-TG	1	100	5 F (1.65 mm)
555525T1	RBL-TG	1	125	5 F (1.65 mm)
555600T1	RBL-TG	1	100	6 F (2.00 mm)
555625T1	RBL-TG	1	125	6 F (2.00 mm)
555500J2	RBL-JK	2	100	5 F (1.65 mm)
555525J2	RBL-JK	2	125	5 F (1.65 mm)
555600J2	RBL-JK	2	100	6 F (2.00 mm)
555625J2	RBL-JK	2	125	6 F (2.00 mm)
555500R501	RBL5.0	1	100	5 F (1.65 mm)
555525R501	RBL5.0	1	125	5 F (1.65 mm)

RBL-TG[™] **RBL-JK**[™] **RBL-TG & RBL-JK** SHAPE NOW AVAILABLE IN **BOTH INFINITI AND** SUPER TORQUE PLUS DIAGNOSTIC CATHETERS 5F 6F 0.047" - 1.19 mm 0.057" – 1.45 mm Inner diameter Inner diameter **INFINITI® DIAGNOSTIC** 6F 5F **CATHETER SPECIFICATIONS** Pressure Limit (PSI) 1200 1200 Guidowiro Accontanco 0 020" 0 0 2 0

Guidewire Acceptance	0.038	0.038
Flow rate (ml/sec) at pressure		
Limit (100 cm catheter)		
Selectives	21.3	35
Pigtails	19.8	32.6

²Only available on the INFINITI® diagnostic catheter product line

For information on indications, contraindications, warnings, and precautions, see page 88

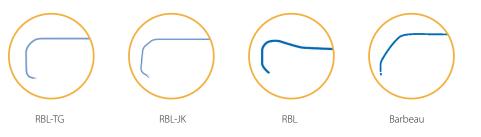


INFINITI[®] & SUPER TORQUE[®] PLUS Diagnostic Catheters (cont.)

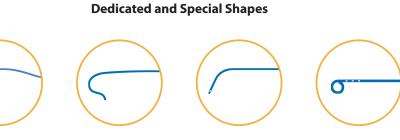
INFINITI® Diagnostic Catheter Family Radial Specific Shapes

Part Number	Shape Name	Side Holes	Lenth (cm)	French Size
555600R501	RBL5.0	1	100	6 F (2.00 mm)
555625R501	RBL5.0	1	125	6 F (2.00 mm)
555500R451	RBL4.5	1	100	5 F (1.65 mm)
555525R451	RBL4.5	1	125	5 F (1.65 mm)
555600R451	RBL4.5	1	100	6 F (2.00 mm)
555625R451	RBL4.5	1	125	6 F (2.00 mm)
555500R401	RBL4.0	1	100	5 F (1.65 mm)
555525R401	RBL4.0	1	125	5 F (1.65 mm)
555600R401	RBL4.0	1	100	6 F (2.00 mm)
555625R401	RBL4.0	1	125	6 F (2.00 mm)
555500R351	RBL3.5	1	100	5 F (1.65 mm)
555525R351	RBL3.5	1	125	5 F (1.65 mm)
555600R351	RBL3.5	1	100	6 F (2.00 mm)
555625R351	RBL3.5	1	125	6 F (2.00 mm)





Judkins Left • Amplatz Right • Sones • Internal Mammary • Coronary Bypass • 3DRC (Williams) SRC (Noto) • NIH • El Gamal • Castillo • Radial/Brachial (Tilon) • Angled Pigtail (Van Tassel)



Amplatz Left

Judkins Right

eft Multipurpose

Straight Pigtail



INFINITI® & SUPER TORQUE® PLUS **Diagnostic Catheters (cont.)**

SUPER TORQUE® Plus Diagnostic Catheter Family RADIAL Specific Shapes

Part Number	Shape Name	Side Holes	Lenth (cm)	French Size
599500T1	RBL-TG	1	100	5.2 F (1.75 mm)
599525T1	RBL-TG	1	125	5.2 F (1.75 mm)
599600T1	RBL-TG	1	100	6 F (2.00 mm)
599625T1	RBL-TG	1	125	6 F (2.00 mm)
599500J2	RBL-JK	2	100	5.2 F (1.75 mm)
599525J2	RBL-JK	2	125	5.2 F (1.75 mm)
599600J2	RBL-JK	2	100	6 F (2.00 mm)
599625J2	RBL-JK	2	125	6 F (2.00 mm)
599600R501	RBL5.0	1	100	6 F (2.00 mm)
599625R501	RBL5.0	1	125	6 F (2.00 mm)
599600R451	RBL4.5	1	100	6 F (2.00 mm)
599625R451	RBL4.5	1	125	6 F (2.00 mm)
599600R401	RBL4.0	1	100	6 F (2.00 mm)
599625R401	RBL4.0	1	125	6 F (2.00 mm)



5.2F 0.047" – 1.19 mm Inner diameter



01
0.057" – 1.45 mm
Inner diameter

5.2F	6F
1200	1200
0.038"	0.038"
21.0	24.3 25.1
	1200 0.038"

CORDIS® Diagnostic Portfolio

EMERALD® Diagnostic Guidewires

PTFE pre-coated guidewire

- Uniform surface finish
- Minimal insertion and withdrawal force

Product Benefits

- Easy navigation
- Versatility of tip shapes and flexibilities
- Excellent maneuverability
- Finger straightenability

Built-in safety

- Solid tensile strength minimizes the likelihood of stretching or fracturing
- Safety ribbon is welded to both ends of the wire to help it remain intact in the event of a fracture or stretching

Learn more page 19

7F HIGHFLOW™ Catheter

HIGHFLOW[™] Catheters, available in 7F, feature polyurethane (DUCOR[®]) construction and a large inner diameter to maximize contrast flow.

Two-stage polyurethane construction:

- Body (Stage 1): Braided polyurethane for maximum flow and handling
- Proximal/Distal tip (Stage 2): Softer non-braided polyurethane for maximum flexibility, shape retention, and atraumatic tip

Learn more page 26

INFINITI® Diagnostic Catheter

The Cordis INFINITI® 4F, 5F and 6F line of diagnostic catheters is ideal for coronary angiography. These catheters incorporate proprietary Vestan Nylon to deliver exceptional responsiveness and flow rates, optimal torque, and shape retention.

- The True Lumen Design: Provides the same inner lumen diameter from hub to tip, which eliminates contrast jetting and allows for smoother flow and excellent catheter stability.
- Large Inner Lumen: Thin-wall technology allows for larger inner lumen diameter, thus facilitating easy injections and higher flow rates.
- Radiopaque tip: Helps reduce the risk of vascular damage upon entering tortuous or fragile vessels.

Learn more page 26

SUPER TORQUE® Plus Diagnostic Catheter

The SUPERTORQUE® Plus line of diagnostic catheters are used in coronary angiography. These catheters are constructed from polyurethane to deliver exceptional responsiveness and flow rates, optimal torque, and shape retention. The SUPER TORQUE® Plus Catheter contains a soft tip which differentiates it from other SUPERTORQUE® Catheters.

- Braiding construction allows 1:1 torque control and excellent pushability without compromising kink resistance.
- Excellent visibility: Radiopaque tip improves visibility to help reduce the risk of vascular damage upon entering tortuous or fragile vessels.
- High flow rate: Thin wall technology allows for a larger inner lumen diameter, facilitating easy injections and higher flow rates.

Learn more page 26



EMERALD® Diagnostic Guidewires

Intended for percutaneous entry and guidance of catheters, the Cordis EMERALD® Diagnostic Guidewire complements our diagnostic catheter and catheter sheath introducer lines. Performance, endurance and safety are built into each EMERALD® Guidewire with solid tensile strength to minimize the likelihood of stretching or fracturing.

Key Features

- Excellent maneuverability, and reduced likelihood of flaking
- Finger straightenability and precise tolerances
- Proprietary PTFE Coating Process
- Available in multiple shapes and sizes

EMERALD® Fixed-Core Guidewire

Key Features

- For percutaneous entry and guidance of angiographic catheters
- Units per package: 5

PTFE-Coated Straight Tip



Diameter (inch)	Length (cm)	Flexible End (cm)	Product Code
.021	150	7	502703
.025	150	7	502549
.032	150	7	502548
.035*	150	7	502542
.035	150	10	502544
.035*	150	20	502560
.035	150	3	502542E
.038	150	7	502541



EMERALD® Fixed-Core Guidewire - PTFE-Coated Double-Ended

• 3 cm straight / 7 cm J-curve

Diameter (inch)	Length (cm)	Flexible End (cm)	Flexible End J-Curve (cm)	J-Radius (mm)	Product Code
.035	150	3	7	2	502563

EMERALD® Fixed-Core Guidewire - PTFE-Coated J-Curved

Diameter (inch)	Remarks	Length (cm)	Flexible End (cm)	J-Radius (mm)	Product Code
.025		150	7	3	502524
.025		150	7	15	502536
.030	Heavy duty, high strength	150	7	3	502522
.032		150	7	3	502526
.035		80	7	3	502701
.035		150	7	1.5	502531
.035	High strength	175	7	1.5	502534
.035		150	7	3	502521
.035		175	7	3	502585
.035		150	7	6	502589
.035		150	7	15	502535
.035		150	10	3	502587
.035		150	10	15	502576
.035	Ex Firm Tip	150	3	3	502521E
.035	Firm Tip	150	5	3	502521F
.035	Firm Tip	175	5	3	502585F
.038	Firm Tip	150	5	3	502520F
.038		150	7	3	502520
.038		175	7	3	502584
.038		150	7	6	502588
.065		150	10	6	502530



EMERALD® Fixed-Core Exchange Guidewire

Key Features

- For use in percutaneous entry, guidance and exchange of angiographic catheters
- Units per package: 5

PTFE-Coated Straight Tip



Diameter (inch)	Length (cm)	Flexible End (cm)	Product Code
.032	260	7	502554
.035	220	7	502558
.035	260	7	502555
.038	260	7	502553



Diameter (inch)	Length (cm)	Flexible End (cm)	J-Radius (mm)	Product Code
.018	260	7	3	502456
.025	260	7	3	502452
.032	260	7	3	502454
.035	260	7	3	502455
.035	260	5	3	502455F
.038	260	7	3	502453



EMERALD® Fixed-Core Exchange Guidewire, continued

HEPARIN Coated, PTFE Coated Wires

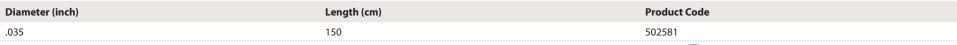
Diameter (inch)	Length (cm)	Flexible End (cm)	J-Radius (mm)	Product Code
.038	150	7	3	502520H
.035	150	7	3	502521H
.035	150	3	3	503521H
.035	150	5	3	503521H

EMERALD® Movable-Core Guidewire

Key Features

- For use in percutaneous entry and guidance of angiographic catheters
- With 4 cm handle
- Amplatz movable core guidewires in the same configurations as below are available on request
- Units per package: 5

PTFE-Coated Straight Tip





PTFE-Coated J-Curve

Diameter (inch)	Length (cm)	J-Radius (mm)	Product Code
.035	150	3	502571
.038	150	3	502570

For information on indications, contraindications, warnings, and precautions, see page 85.



EMERALD® Amplatz Guidewire

Key Features

- Exhibits little resistance through tortuous vascular curves
- For percutaneous entry and guidance of angiographic catheters
- Units per package: 5

PTFE-Coated Straight Tip

Diameter (inch)	Length (cm)	Product Code
.035	150	502581A



Diameter (inch)	Length (cm)	J-Radius (mm)	Product Code
.035	150	3	502571A



EMERALD® Amplatz Super Stiff Guidewires

Key Features

- For percutaneous entry and guidance of angiographic catheters
- Units per package: 5

PTFE-Coated Straight Tip

Diameter (inch)	Length (cm)	Product Code
.035	260	502442E
.035	150	502726
.035	180	502728



Diameter (inch)	Length (cm)	J-Radius (mm)	Product Code
.035	150	3	502731
.035	260	3	502735



EMERALD® Rosen Heavy Duty Guidewire

Key Features

- For percutaneous entry and guidance of angiographic catheters
- Intermediate level of body stiffness
- Highly atraumatic tip
- Maintains purchase in short vessel segments
- Units per package: 5

PTFE-Coated J-Curve

Diameter (inch)	Length (cm)	J-Radius (mm)	Product Code
.035	180	1.5	502717

EMERALD® Standard J-Tip Guidewire

Key Features
For Biopsy Forceps proceduresFixed coreUnits per package: 5

Diameter (inch)	Length (cm)	Flexible End (cm)	J-Radius (mm)	Product Code
.035	80	7	3	502701



INFINITI[®] Diagnostic Catheter, 7F HIGHFLOW[™] Diagnostic Catheter, SUPER TORQUE[®] Plus Diagnostic Catheter, and TEMPO AQUA[®] Diagnostic Catheter

Left Coronary Judkins Technique (100 cm)

• For percutaneous entry and guidance of angiographic catheters

1 1	age: 5	4F	51	Or	5.20		
		INFINITI® Catheter	INFINITI® Catheter	INFINITI® Catheter	SUPER TORQUE® Plus Catheter	SUPER TORQUE® Plus Catheter	7F HIGHFLOW™ Cathete
JL 3.5	Judkins Left 3.5	538418	534518T	534618T	533551	533618	527718
JL 4	Judkins Left 4	538420	534520T	534620T	533553	533620	527720
JL 4.5	Judkins Left 4.5	538417	534517T	534617T	533527	533627	
JL 5	Judkins Left 5	538422	534522T	534622T	533559	533622	527722
JL 6	Judkins Left 6	538424	534524T	534624T	533561	533624	527724
JL 3.5	JL 4	\sim	JL 4.5	JL 5	JL 6		
	y Amplatz Technie	que (100 cm) 4F	JL 4.5	JL 5	JL 6	6F	7F
eft Coronar	y Amplatz Technie	que (100 cm) 4F INFINITI® Cat		JL 5 5F FINITI® Catheter		6F SUPER TORQUE® Plus Catheter	7F 7F HIGHFLOW™ Cathete
eft Coronar Units per packa	y Amplatz Technie	45	theter IN	5F	бБ		7F 7F HIGHFLOW™ Cathete 527740
eft Coronar	y Amplatz Techni age: 5	4F INFINITI® Cat	theter IN	5F FINITI® Catheter	6F INFINITI® Catheter	SUPER TORQUE® Plus Catheter	7F 7F HIGHFLOW™ Cathete 527740 527741

AL 2

AL 1

AL 3



Right Coronary Judkins Technique (100 cm)

		4F	5F	6F	5.2F	6F	7F
		INFINITI® Catheter	INFINITI® Catheter	INFINITI® Catheter	SUPER TORQUE® Plus Catheter	SUPER TORQUE® Plus Catheter	7F HIGHFLOW™ Catheter
JR 3.5	Judkins Right 3.5	538419	534519T	534619T	533550	533619	527719
JR 4	Judkins Right 4	538421	534521T	534621T	533552	533621	527721
JR 4 (125 cm)	Judkins Right 4, 125 cm			534615T	533565		
JR 4 Classic	Judkins Right 4 Classic, 100 cm					533687	
JR 4 RECESSED BRAID	Judkins Right 4 Recessed Braiding	534516T	534516T			533689	
JR 4 MOD	Judkins Right 4 Modified	538428	534528T	534628T	533528	533628	
JR 4 ST	Judkins Right 4 Short Tip	538427	534527T	534627T		533626	
JR 5	Judkins Right 5	538423	534523T	534623T	533558	533623	527723
JR 5 MOD	Judkins Right 5 Modified			534629T			
JR 6	Judkins Right 6, 125 cm	538425	534525T	534625T	533560	533625	
		\frown		\frown			\frown
JR 3.5	JR 4	J	R Classic	JR 4 MOD	JR 5	JR 5 MOD	JR 6

Right Coronary Amplatz Technique Modified (100 cm)

		4F	5F	6F	6F	7 F
		INFINITI® Catheter	INFINITI® Catheter	INFINITI® Catheter	SUPER TORQUE® Plus Catheter	7F HIGHFLOW™ Catheter
AR MOD	Amplatz Right Modified	538448	534548T	534648T	533648	527748
AR 1 MOD	Amplatz Right 1 Modified	538441	534541T	534641T	533641	
AR 2 MOD	Amplatz Right 2 Modified	538443	534543T	534643T	533643	

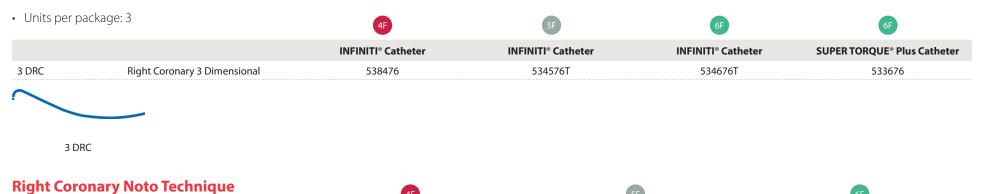
AR MOD

AR 1 MOD

AR 2 MOD



Right Coronary Shapes - Williams Technique



-	•	4	54	6F
		INFINITI® Catheter	INFINITI® Catheter	INFINITI® Catheter
SRC	Right Coronary N.	538474	534574T	534674T
$\overline{}$				

SRC

Multipurpose A Cournand Technique (open end, no sides holes)

		5.2F	6F	7F
		SUPER TORQUE® Plus Catheter	SUPER TORQUE® Plus Catheter	7 F HIGHFLOW™ Catheter
MPA 1 (80 cm)	Multipurpose A, 80 cm	533579	533633	
MPA 1	Multipurpose A Cournand, 100 cm		533640	527784
MPA 1	Multipurpose A, 100 cm	SR1924		
MPA 1 (125 cm)			533667	

MPA 1



Multipurpose A Curve (open end, 2 side holes)

		41	56	5.2F
		INFINITI® Catheter	INFINITI® Catheter	SUPER TORQUE® Plus Catheter
MPA 2 (I) SH (65 cm)	Multipurpose A-2, 65 cm 2 side holes	538440	534540T	
MPA 2 (I) SH (80 cm)	Multipurpose A-2, 80 cm 2 side holes	538449	534549T	
MPA 2 (I) SH (100 cm)	Multipurpose A-2, 100 cm 2 side holes	538442		533556
MPA 2 (I) SH (125 cm)	Multipurpose A-2, 125 cm 2 side holes	538444		

MPA 2 (I)

Multipurpose A Adult Curve (open end, 2 side holes)

	SF	6F	5.2F	6F	7F
	INFINITI® Catheter	INFINITI® Catheter	SUPER TORQUE® Plus Catheter	SUPER TORQUE® Plus Catheter	7F HIGHFLOW™ Catheter
Multipurpose A-2, 65 cm 2 side holes			533562		
Multipurpose A-2, 80 cm 2 side holes				533629	
Multipurpose A-2, 100 cm 2 side holes	534542T	534642T	533582	533642	527742
Multipurpose A-2, 125 cm 2 side holes	534544T				527787
N N	Multipurpose A-2, 80 cm 2 side holes Multipurpose A-2, 100 cm 2 side holes Multipurpose A-2, 125 cm 2 side holes	Multipurpose A-2, 65 cm 2 side holesMultipurpose A-2, 80 cm 2 side holesMultipurpose A-2, 100 cm 2 side holes534542TMultipurpose A-2, 125 cm 2 side holes534544T	Multipurpose A-2, 65 cm 2 side holesMultipurpose A-2, 80 cm 2 side holesMultipurpose A-2, 100 cm 2 side holesS34542TMultipurpose A-2, 125 cm 2 side holesS34544T	Multipurpose A-2, 65 cm 2 side holes533562Multipurpose A-2, 80 cm 2 side holes534542T534642TMultipurpose A-2, 100 cm 2 side holes534542T534642T533582Multipurpose A-2, 125 cm 2 side holes534544T534544T	Multipurpose A-2, 65 cm 2 side holes 533562 Multipurpose A-2, 80 cm 2 side holes 533629 Multipurpose A-2, 100 cm 2 side holes 534542T 534642T 533582 533642

MPA 2

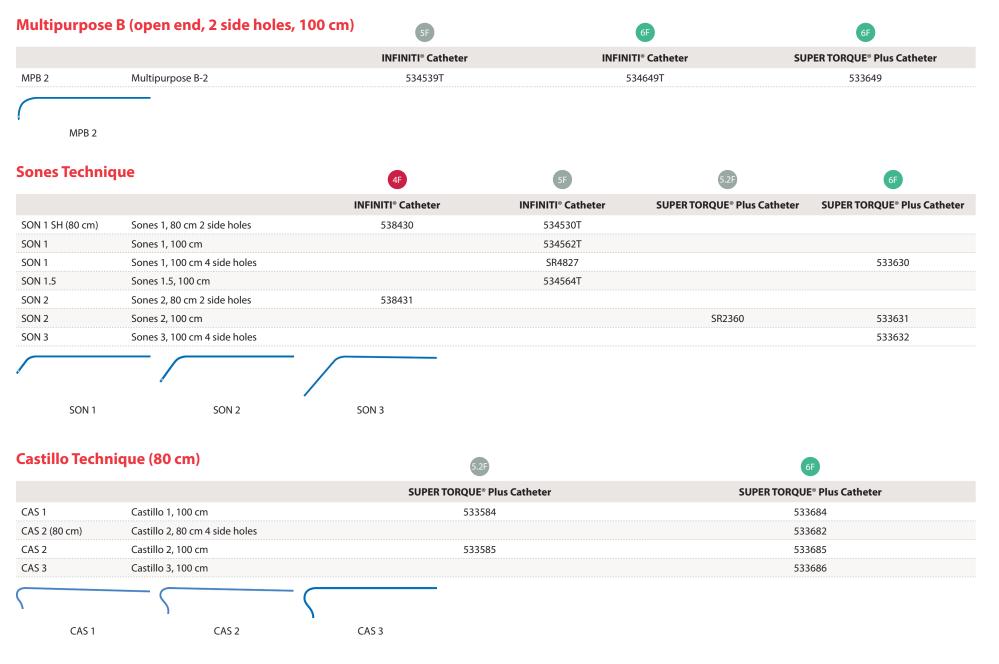
Multipurpose A Adult Curve (open end, no side hole)



Multipurpose B Gensini Technique (open end, 6 side holes, 100 cm)







Cardiovascular Catalog | Page 30 | cordis.com



Barbeau Technique		56		El Gamal Technic		6F	
		INFINITI®	Catheter			SUPER TORQUE® Plus Catheter	
BARBEAU 2 SH	Barbeau, 100 cm, 2 side holes	5345	78T	EGB 1	El Gamal 1	533637	
BARBE	AU			EGB 1			
adial Bilat	eral Technique and Radial/	Brachial (Tilon)			SF		
				TEMPO /	AQUA® Catheter		
RBL 4.0	Barbeau, 100 cm, 2 side holes			5	RD7045		
RBL 4.5	RBL 4.5, 100 cm			5	RD7074		
RBL 5.0	RBL 5.0, 100 cm			S	RD7047		
RBLA	RBL A, 100 cm (pack of 5)			5	RD7075		
			— (
RBL 4.0	RBL 4.5	RBL 5.0	RBMP/TI 5F	LON 6F	6F	75	
	vpass Techniques (100 cm)		RBMP/TI 5F INFINITI° Catheter	LON 6F INFINITI® Catheter	6F SUPER TORQUE® Plus Catheter	7F 7F HIGHFLOW™ Catheter	
Coronary By	vpass Techniques (100 cm)	4F	5F	6F	6F SUPER TORQUE® Plus Catheter 533672	7F 7F HIGHFLOW™ Catheter 527772	
Coronary By	/pass Techniques (100 cm) ព	45 NFINITI® Catheter	5F INFINITI® Catheter	6F INFINITI® Catheter			



ventricular s		4F	5F	6F	5.2F	6F	7F
		INFINITI® Catheter	INFINITI® Catheter	INFINITI® Catheter	SUPER TORQUE® Plus Catheter	SUPER TORQUE® Plus Catheter	7F HIGHFLOW™ Catheter
	Straight Pigtail 4 side holes				SRD5287		
PIG 5SH	Straight Pigtail 5 side holes	538451V					
PIG 6SH	Straight Pigtail 6 side holes	538450S*	534550S	534650S	533533	533650S	527750S
PIG 8SH	Straight Pigtail 8 side holes	538450E*	534550E	534650E		533650E	527750E
PIG 12SH (50cm)	Straight Pigtail 12 side holes						527750

PIG

Ventricular Angled Pigtail: Van Tassel Technique

		4F	5F	6F	5.2F	6F	7F
		INFINITI® Catheter	INFINITI® Catheter	INFINITI® Catheter	SUPER TORQUE® Plus Catheter	SUPER TORQUE® Plus Catheter	7F HIGHFLOW™ Catheter
	Angled Pigtail 145° 5 side holes modified	538457V					
PIG 145° 6SH	Angled Pigtail 145° 6 side holes		534552S	534652S	533534A	533652S	527752S
PIG 145° MOD 6SH	Angled Pigtail 145° 6 side holes modified	538453S*	534553S	534653S			
PIG 155° 6SH	Angled Pigtail 155° 6 side holes		534554S	534654S	533533A	533654S	
PIG 155° MOD 6SH	Angled Pigtail 155° 6 side holes modified	538455S*				533655S	
PIG 155° 12SH	Angled Pigtail 155° 12 side holes						527754
PIG 155° 5 SH	Angled Pigtail 155° 5 side holes	538459V					
PIG 155° ST	Angled Pigtail 155° Short Tip		534555S*				

145°

155° б

PIG 145°

PIG 155°



N.I.H. Paediatric Curve

		Ŭ
		SUPER TORQUE® Plus Catheter
N.I.H. (65 cm)	N.I.H. 65 cm	533525
N.I.H. (80 cm)	N.I.H. 80 cm	533535
N.I.H.	N.I.H. 100 cm	533545

5.2F

Straight		5.2F
		SUPER TORQUE® Plus Catheter
STRAIGHT (80 cm)	Straight 80cm	SR4098

7F

N.I.H

N.I.H. Adult Curve

	SUPER TORQUE® Plus Catheter	7F HIGHFLOW™ Catheter
N.I.H. 80 cm	533635	
N.I.H. 100 cm	533636	527745
	N.I.H. 100 cm	N.I.H. 80 cm 533635

6F

N.I.H.



Diagnostic Catheter MultiPac

Key Features

- 3 catheters JL, JR, PIG (straight or angled 145°)
- All product codes with "CP" are tailor-made packs, lead time for delivery: 6-8 weeks
- Units per package: 5 (unless otherwise noted)

INFINITI® Diagnostic Catheter - MultiPac

Product Code	Judkins Left 4	Judkins Right 4	Angled Pigtail 145° 5 side holes Modified
538493	538420	538421	538457V
Product Code	Judkins Left 4	Judkins Right 4	Angled Pigtail 155° 6 side holes Modified
538494	538420	538421	538455S
Product Code	Judkins Left 4	Judkins Right 4	Straight Pigtail 8 side holes
538498	538420	538421	538450E
Product Code	Judkins Left 4	Judkins Right 4	Straight Pigtail 5 side holes
538499	538420	538421	538451V
Product Code	Judkins Left 4	Right Coronary 3 Dimensional	Angled Pigtail 145° 6 side holes Modified
CP0092*	538420	538476	538453S
Product Code	Judkins Left 4	Right Coronary 3 Dimensional	Straight Pigtail 6 side holes
CP0097	538420	538476	538450S
Product Code	Judkins Left 5	Judkins Right 4	Angled Pigtail 145° 8 side holes
CP0421*	538422	538421	538450E



INFINITI® Diagnostic Catheter - MultiPac

Product Code	Judkins Left 4	Right Coronary 3 Dimensional	Straight Pigtail 6 side holes
CP0207*	534520T	534576T	534550S
Product Code	Judkins Left 4	Right Coronary 3 Dimensional	Angled Pigtail 145° 6 side holes
CP0208*	534520T	534576T	534552S
Product Code	Judkins Left 3.5	Judkins Right 4	Angled Pigtail 145° 6 side holes
CP0388	534518T	534521T	534552S

* Units per package: 10

INFINITI® Diagnostic Catheter - MultiPac

Product Code	Judkins Left 4	Right Coronary 3 Dimensional	Angled Pigtail 145° 6 side holes
CP0257	534620T	534676T	534652S

SUPER TORQUE® Plus Diagnostic Catheter - MultiPac

Product Code	Judkins Left 4	Judkins Right 4	Angled Pigtail 145° 6 side holes		
533593	533553	533552	533534A	533534A	
Product Code	Judkins Left 4	Judkins Right 4	Straight Pigtail 6 side holes		
533598	533553	533552	533533		
Product Code	Judkins Left 5	Judkins Right 5	Angled Pigtail 145° 6 side holes		
CP0313	533559	533552	533534A		
CP0313 Product Code	Judkins Left 4	Judkins Right 4	533534A 5.2F Avanti+ 11 cm .038 "	Emerald™ .035″	
Product Code CP0401	Judkins Left 4 533553	Judkins Right 4 533552	533534A 5.2F Avanti+ 11 cm .038" 504605X*	Emerald™ .035″ 502521	
Product Code CP0401 Product Code	Judkins Left 4 533553 Judkins Left 3.5	Judkins Right 4 533552 Judkins Right 4	533534A 5.2F Avanti+ 11 cm .038 "	Emerald™ .035″ 502521	

* with mini-guidewire

GENERATORQUE® Plus Diagnostic Catheter - MultiPac

Product Code	Judkins Left 4	Judkins Right 4	Angled Pigtail145° 6 side holes
533693	533620	533621	533652S
Product Code	Judkins Left 4	Judkins Right 4	Straight Pigtail 8 side holes
i iouuct couc	Sudding Ecre i	Juaking ngin 4	Straight i gtail o side noies



Diagnostic Catheter PrimoPac

Key Features

- 3 catheters JL4, JR4, PIG (S or A 145°)
- 1 sheath introducer
- All product codes with "CP" are tailor-made packs, lead time for delivery: 6-8
 weeks
- Units per package: 10

INFINITI® Diagnostic Catheter - PrimoPac

Product Code	Judkins Left 4	Judkins Right 4	Straight Pigtail 8 side holes	4F Avanti+ 11 cm .035″
538491P	538420	538421	538450E	
Product Code	Judkins Left 3.5	Judkins Right 4	Angled Pigtail 145° 5 side holes	Modified 4F Avanti+ 11 cm .035"
538493P	538420	538421	538457V	504604X*
Product Code	Judkins Left 4	Judkins Right 4	Angled Pigtail 155° 6 side holes	Modified 4F Avanti+ 11 cm .035″
538494P	538420	538421	538455S	504604X*
Product Code	Judkins Left 4	Judkins Right 4	Straight Pigtail 5 side holes	4F Avanti+ 11 cm .035"
538499P	538420	538421	538451V	504604X*
Product Code	Judkins Left 4	Right Coronary 3 Dimensional	CATH 4F ST PIG	110 cm 4F Avanti+ 11 cm .035″
CP0242	538420	538476	532413T	504604X*

SUPER TORQUE® Plus Diagnostic Catheter - PrimoPac

Product Code	Judkins Right 4	Judkins Left 5	Angled Pigtail 145° 6 side holes	5F Avanti+ 11 cm .038″
CP0415**	533552	533559	533534A	504605X*



Diagnostic Catheter CorPac

Key Features

- 3 catheters JL4, JR4, PIG (S or A 145°)
- 1 sheath introducer
- 1 guidewire: diameter (inch) as indicated
- All product codes with "CP" are tailor-made packs, lead time for delivery: 6-8 weeks
- Units per package: 10

INFINITI® Diagnostic Catheter - CorPac

Product Code	Judkins Left 4	Judkins Right 4	Straight Pigtail 8 side holes	4F Avanti+ 11 cm .035"	Emerald™.035″
538-492C	538420	538421	538450E	504604X*	502521
Product Code	Judkins Left 3.5	Judkins Right 4	Angled Pigtail 145° 5 side holes Modified	4F Avanti+ 11 cm .035"	Emerald™ .035″
538-493C	538420	538421	538457V	504604X*	502521
Product Code	Judkins Left 4	Judkins Right 4	Angled Pigtail 155° 6 side holes Modified	4F Avanti+ 11 cm .035"	Emerald™.035″
538-494C	538420	538421	5384555	504604X*	502521
Product Code	Judkins Left 4	Judkins Right 4	Straight Pigtail 5 side holes	4F Avanti+ 11 cm .035"	Emerald™.035″
538-499C	538420	538421	538451V	504604X*	502521
Product Code	Judkins Left 4	Judkins Right 4	4F Avanti+ 11 cm .035"	Emerald [™] .035″	
CP0296	538420	538421	504604X	502521	
Product Code	Judkins Left 4	Judkins Right 4	Angled Pigtail 145° 6SH MOD	4F Avanti+ 11 cm .021"	Emerald™.035″
CP0391	538420	538421	5384535	504614Z	502521
Product Code	Judkins Left 3.5	Judkins Right 4	Angled Pigtail 145° 6 SH MOD	4F Avanti+ 11 cm .021"	Emerald™ .035″
CP0411	538418	538421	5384535	504614Z*	502521



INFINITI® Diagnostic Catheter - CorPac

Product Code	Judkins Left 4	Judkins Right 4	5F Avanti+ 11 cm .038"	Emerald™.035″	
CP0295	534520T	534521T	504605X*	502521	
Product Code	Judkins Left 3.5	Judkins Right 4	Angled Pigtail 145° 6 side holes	5F Avanti+ 11 cm .021"	Emerald™ .035″
CP0395	534518T	534521T	534552S	504615Z*	502521

INFINITI® Diagnostic Catheter - CorPac

Product Code	Judkins Left 4	Judkins Right 4	6F Avanti+ 11 cm .038″	Emerald™ .035″
CP0406	534620T	534621T	504606X*	502521

5 SUPER TORQUE[®] Plus Diagnostic Catheter - CorPac

Product Code	Judkins Left 4	Judkins Right 4	Angled Pigtail 145° 6 side holes	5F Avanti+ 11 cm .038"	Emerald [™] .038″
533-593C	533553	533552	533534A	504605X*	502520

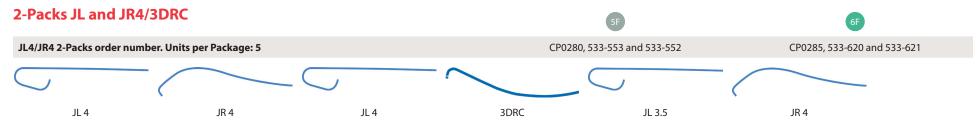
G SUPER TORQUE[®] Plus Diagnostic Catheter - CorPac

Product Code	Judkins Left 4	Judkins Right 4	6F Avanti+ 11 cm .038"	Emerald™.035″	
CP0283	533620	533621	504606X*	502521	
Product Code	Judkins Left 5	Judkins Right 5	Angled Pigtail 145° 6 side holes	6F Avanti+ 11 cm .038″	Emerald™ .038″
CP0306	533622	533623	533652S	504606X*	502520
Product Code	Judkins Left 4	Judkins Right 4	Angled Pigtail 145° 6 side holes	6F Avanti+ 11 cm .021"	Emerald™ .035″
CP0389	533620	533621	533652S	504616Z*	502521
Product Code	Judkins Left 3.5	Judkins Right 4		6F Avanti+ 11 cm .021″	Emerald™ .035″
CP0428	533618	533621	533652S	504616Z*	502585



Diagnostic Catheter 2-Packs

Key Features			
 2 catheters JL, JR/3DRC All product codes with "CP" are tailor-made p weeks 	acks, lead time for delivery: 6-8		
2-Packs JL and JR4/3DRC	4F	5F	6F
JL4/JR4 2-Packs order number. Units per Package: 5	CP0276 538-420 and 538-421	CP0278 534-520T and 534-521T	CP0281 534-620T and 534-621T
JL4/3DRC 2-Packs order number. Units per Package: 3		CP0279 534-520T and 534-576T	CP0282 534-620T and 534-676T
JL4/JR4 + CSI +wire CORPAC® order number. Units per Package: 10		CP0317 534-520T; 534-521T; 502-521; 504-606X and 502-652	



CORDIS[®] Interventional Portfolio

Steerable Guidewires

ATW[™] Guidewire and ATW[™] Marker Wire

Moderate Support / Workhorse Wire

- Broad Transition One-Piece Corewire (.0076") for excellent linear control
- Flex-Joint bond maintains strength and flexibility of the distal corewire transition
- Duraglide proximal coating and distal PTFE sleeve provide excellent lubricity
- Flexibility with support for modern Hi-Tech stents
- Available tip configuration: floppy

Learn more on page 42 and page 43

STABILIZER® Plus Steerable Guidewire, STABILIZER® XS Steerable Guidewire and STABILIZER® Marker Steerable Guidewire

Moderate Support / Workhorse Wire

- Broad Transition One-Piece Corewire (.010") for excellent linear control
- Flex-joint bond maintains strength and flexibility of the distal corewire transition
- Duraglide proximal coating and distal PTFE sleeve provide excellent lubricity
- Balanced support and flexibility
- Available tip configuration: supersoft, soft
- An intermediate support wire for secure lesion measurement with 6 equally distanced marker bands (15 mm)

Learn more page 44

SHINOBI® Guidewire

- Broad Transition One-Piece Corewire (.007") for linear control
- Flex-joint bond maintains strength and flexibility of the distal corewire transition
- Extended PTFE sleeve over tip provides superior lubricity
- Flexibility with support for modern applications
- Available tip configuration: floppy

Learn more page 45

SHINOBI® Plus Guidewire

- Broad Transition One-Piece Corewire (.010") for excellent linear control
- Flex-joint bond maintains strength and flexibility of the distal corewire transition
- Extended PTFE sleeve over tip provides superior lubricity
- Balanced support and flexibility
- Available tip configuration: floppy

Learn more page 45

REFLEX® Guidewire

Light Support Wire

- An ultra-thin .0067" core wire combined with Cordis' silicone based SLX™ coating give the REFLEX® Guidewire its outstanding crossing properties
- 25 cm distal radiopaque coil
- One-piece core construction
- Distal SLX™-lubricant

Learn more page 46

WIZDOM™ Guidewire

Light Support Wire

- Broad Transition One-Piece Corewire (.007") for excellent linear control
- Flex-joint bond maintains strength and flexibility of the distal corewire transition
- Duraglide proximal coating and distal PTFE sleeve provide excellent lubricity
- Available tip configurations: supersoft, soft.

Learn more page 47

Guiding Catheters

ADROIT® Guiding Catheters

Intended for use for intravascular introduction of interventional/diagnostic devices into the coronary or peripheral vascular systems

Learn more page 49

VISTA BRITE TIP® and Long VISTA BRITE TIP® Guiding Catheters

A complete system of large lumen guiding catheters that are optimized to answer clinical needs. The performancebased design of each catheter easily meets strength, control and delivery requirements in the widest range of anatomies.

Learn more page 59

PTCA Balloons

EMPIRA® RX Pre-Dilatation Catheter

A low-profile balloon to help you reach and treat the lesion with excellent crossability and recrossability. Its exceptional crossability and recrossability is achieved through the highly flexible DURALYN® Flex balloon material, the proprietary pleating and folding process, and also the lubricious as well as durable hydrophilic coating.

Learn more page 72

EMPIRA NC® RX Post-Dilatation Catheter

Designed to deliver in challenging interventions and post-dilatation procedures. High-pressure balloon that combines exceptional crossability and recrossability with accuracy during postdilatation.

Learn more page 73.

MOZEC[™] PTCA Balloon Dilatation Catheter

As the longest PTCA balloons on the U.S. market, they are available in a broad range of sizes for greater cath lab efficiency.

Learn more page 74

MOZEC[™] NC PTCA Balloon Dilatation Catheter

A PTCA balloon dilatation catheter that combines controlled balloon growth with the longest lengths on the U.S. market.

Learn more page 75

Bifurcated Coronary Stent

TRYTON Side Branch Stent

A stent specifically designed to actively treat, protect and secure the entire bifurcation lesion, offering ease of implantation and complete main vessel stent integration.

Learn more page 76

Cordis® Biopsy Forceps

Standard Biopsy Forceps

Choice of two forceps diameters for taking samples adapted to a wide range of clinical situations.

Learn more page 77

BI-PAL® Biopsy Forceps

Disposable and torquable (PTFE formable/torquable shaft). Jugular or femoral access possible with two lengths of forceps.

Learn more page 78

Note: TRYTON Side Branch Stent is manufactured by Tryton Medical and distributed by Cordis Corporation. MOZEC is manufactured by Meril and distributed by Cordis Corporation.



ATW[™] Steerable Guidewire

Cordis offers a complete platform of steerable guidewires for choosing the right guidewire given a specific clinical situation.

Key Features

- Intermediate support wire
- Coating: duraglide/PTFE
- Distal tip radiopacity: 3 cm
- Tip flexibility: floppy

Units per package: 1

Diameter (inch)	Length (cm)	Tip Shape	Product Code
.014	195	Straight	595014
.014	195	J-Curve	595J014
.014	300	Straight	595X014
.014	300	J-Curve	595Y014

Units per package: 5

Diameter (inch)	Length (cm)	Tip Shape	Product Code
.014	195	Straight	595E014
.014	195	J-Curve	595EJ014
.014	300	Straight	595EX014
.014	300	J-Curve	595EY014





ATW[™] Marker Wire Guidewire

An intermediate support wire for lesion measurement, with 4 radiopaque markers spaced 10 mm apart.

Key Features

• Tip flexibility: floppy

Units per package: 1

Diameter (inch)	Length (cm)	Tip Shape	Product Code
.014	195	Straight	595M014
.014	195	J-Curve	595MJ014
.014	300	Straight	
.014	300	J-Curve	595MY014

Units per package: 5

Diameter (inch)	Length (cm)	Tip Shape	Product Code
.014	195	Straight	595ME014
.014	195	J-Curve	595MEJ014
.014	300	Straight	595MEX014
.014	300	J-Curve	595MEY014



STABILIZER® Plus Steerable Guidewire

Key Features

- Super soft tip
- Radiolucent extra support steerable guidewires
- Coating: PTFE/duraglide
- Distal tip radiopacity: 3 cm
- Units per package: 5



Diameter (inch)	Length (cm)	Tip Shape	Product Code
.014	180	Straight	507114
.014	180	J-Curve	507114J
.014	300	Straight	507114X
.014	300	J-Curve	507114Y
.014	180	Straight	507714
.014	180	J-Curve	507714J
.014	300	Straight	507714X
.014	300	J-Curve	507714Y
.014	180	Straight	507914
.014	180	J-Curve	507914J
.014	300	Straight	507914X
.014	300	J-Curve	507914Y

STABILIZER® XS Steerable Guidewire

Key Features

- Coating: PTFE/duraglide
- Distal tip radiopacity: 3 cm
- Units per package: 5

Diameter (inch)	Length (cm)	Tip Shape	Product Code
.014	180	Straight	527914
.014	180	J-Curve	527914J
.014	300	Straight	527914X
.014	300	J-Curve	527914Y

STABILIZER® Marker Steerable Guidewire

Key Features

- Super soft tip
- Number of markers: 6
- Marker spacing: 15mm apart
- Marker width: 1.5mm
- Most distal marker: 4.5cm from tip
- Distal tip radiopacity: 3 cm
- Units per package: 5

Diameter (inch)	Length (cm)	Tip Shape	Product Code
.014	180	Straight	518224
.014	180	J-Curve	518224J
.014	300	Straight	518224X
.014	300	J-Curve	518224Y



SHINOBI® Steerable Guidewire

Κον	Features
ney	reatures

- Inner corewire diameter: .007"
- Shapeable
- Radiopaque: 3 cm
- Coating: PTFE
- Units per package: 1



Diameter (inch)	Length (cm)	Tip Shape	Product Code
.014	180	Straight	547114
.014	300	Straight	547114X

SHINOBI® Plus Steerable Guidewire

Key Features	
 Inner corewire diameter: .01" Shapeable Radiopaque: 3 cm Coating: PTFE Units per package: 1 	



Diameter (inch)	Length (cm)	Tip Shape	Product Code
.014	180	Straight	547214
.014	300	Straight	547214X



REFLEX® Steerable Guidewire

An ultra-thin .0067" core wire combined with Cordis' silicone based SLX™ coating give the REFLEX® Guidewire its outstanding crossing properties.

Key Features

- Coating: PTFE & SLX™
- 25 cm distal radiopaque coil
- One-piece core construction
- Distal SLX™ lubricant
- Units per package: 5

Super Soft Tip

• Color code: Orange

Diameter (inch)	Length (cm)	Tip Shape	Product Code
.014	175	J-Curve	502014CJ

Soft Tip

• Color code: Blue

Diameter (inch)	Length (cm)	Tip Shape	Product Code
.014	175	Straight	502014B

Standard Tip

• Color code: Green

Diameter (inch)	Length (cm)	Tip Shape	Product Code
.014	175	J-Curve	502014AJ





WIZDOM® Steerable Guidewire

Key Features

- Moderate support wire
- Coating: PTFE/duraglide
- Distal tip radiopacity: 3 cm
- Units per package: 5

Super Soft Tip

Diameter (inch)	Length (cm)	Tip Shape	Product Code
.014	180	Straight	512143
.014	180	J-curve	512143J
.014	300	Straight	512143X
.014	300	J-curve	512143Y



Soft Tip

Diameter (inch)	Length (cm)	Tip Shape	Product Code
.014	180	Straight	512142
.014	180	J-curve	512142J
.014	300	Straight	512142X

WIZDOM® Steerable Guidewire ST - Short Transition

Key Features
Coating: PTFE/duraglide

Diameter (inch)	Length (cm)	Tip Shape	Product Code
.014	180	Straight	512114
.014	180	J-curve	512114J
.014	300	Straight	512114X





Extension Wire - CINCH® QR

Diameter (inch)	Length (cm)	Tip Shape	Product Code
.014	145	Straight	502144

Catheter Extensions

Key Features
 Flexible, translucent polyurethane Braided Designed for 1000 psi Luer lock hubs Male-female Units per package: 5

Length	Inner Diameter (mm)	Product Code
45	1.8	502100D
65	1.8	502101D
100	1.8	502102D



Key Features

- Improves device compatibility and provides excellent visualization
- Easier to perform kissing balloon technique
- Innovative hybrid braided wire technology enables larger lumen with optimal back-up support
- PTFE lining provides lubricious lumen for smoother delivery
- TRUELUMEN® Technology ensures consistent ID from hub to tip, for added confidence
- 5F to 6F platform, transradial shapes, and extra back-up shapes
- Available with a .058" inner diameter (ID) for 5F
- Available with a .072" inner diameter (ID) for 6F
- Long Brite Tip shapes

Judkins Left

Shape	Shape Description	5F 🌑	6F 🔵	
JL 3	Judkins Left 3	55800000	67200000	
JL 3.5	Judkins Left 3.5	55800200	67200200	
JL 3.5 ST	Judkins Left 3.5 - Short Tip		67201200	
JL 3.5 SH	Judkins Left 3.5 - 2 Side Holes		67200300	
JL 4 (90 cm)	Judkins Left 4		67200490	
JL 4	Judkins Left 4	55800400	67200400	
JL 4 ST	Judkins Left 4 - Short Tip		67201400	
JL 4 SH	Judkins Left 4 - 2 Side Holes		67200500	
JL 4 (125 cm)	Judkins Left 4		67204025	
JL 4 LBT	Judkins Left 4 - Long Brite Tip		6720040L	
JL 4.5	Judkins Left 4.5	55800600	67200600	
JL 4.5 ST	Judkins Left 4.5 - Short Tip		67201600	
JL 5	Judkins Left 5	55800800	67200800	
JL 6	Judkins Left 6		67201000	
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JL 3	JL 3.5 JL 4	JL 4.5	JL 5 JL 6	



Judkins Curved Left

Shape	Shaj	oe Description	5F 🌑	6F 🔵
JCL 3.5		ins Curved Left 3.5	55802600	67202600
JCL 3.5 SH	Judk	ins Curved Left 3.5 - 2 side holes		67202700
JCL 4	Judk	ins Curved Left 4		67202800
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JCL 3.5	JCL 3.5 SH	JCL 4		

Judkins Right

Shape	Shape Description	5F 🔵	6F 🔵	
JR 3.5	Judkins Right 3.5	55808000	67208000	
JR 3.5 SH	Judkins Right 3.5 - 2 Side Holes		67208100	
JR 4 (90cm)	Judkins Right 4		67208290	
JR 4	Judkins Right 4	55808200	67208200	
JR 4 ST	Judkins Right 4 - Short Tip		67209000	
JR 4 SH	Judkins Right 4 - 2 Side Holes		67208300	
JR 4 (125cm)	Judkins Right 4		67208225	
JR 4 LBT	Judkins Right 4 - Long Brite Tip		6720820L	
JR 5	Judkins Right 5	55808400	67208400	

JR 3.5

JR 4

JR 5



XB 3.5

XB 3.25

Judkins Curved Right

Shape	Shape Description	5F	6F 🔵	
JCR 4	Judkins Curved Right 4		67209800	JCR 4

XB 2.75

Extra Back-up

Shape	Shape Description	5F 🌑	6F 🔵
XB 2	Extra Back-up 2		67246400
XB 2.5	Extra Back-up 2.5		67246500
XB 2.75	Extra Back-up 2.75		67273000
XB 3	Extra Back-up 3	55805200	67205200
XB 3 SH	Extra Back-up 3 - 2 side holes		67205300
XB 3.25	Extra Back-up 3.25	55840000	67240000
XB 3.5	Extra Back-up 3.5	55805400	67205400
XB 3.5 (90 cm)	Extra Back-up 3.5 (90 cm)		67205490
XB 3.5 (125 cm)	Extra Back-up 3.5		67205425
XB 3.5 SH	Extra Back-up 3.5 - 2 side holes		67205500
XB 3.5 LBT	Extra Back-up 3.5 - Long Brite Tip		6720540L
XB 4	Extra Back-up 4	55805600	67205600
XB 4 SH	Extra Back-up 4 - 2 side holes		67205700
XB 4.5	Extra Back-up 4.5	55805800	67205800
XB 4.5 SH	Extra Back-up 4.5 - 2 side holes		67205900
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XB 3



Cardiovascular Catalog | Page 51 | cordis.com



Extra Back-up Contralateral

Shape	Shape Description	5F 🜑	6F 🔵
XBC 2.5	Extra Back-up Contralateral 2.5		67273200
XBC 2.75	Extra Back-up Contralateral 2.75		67273400
XBC 3	Extra Back-up Contralateral 3		67207000
XBC 3 SH	Extra Back-up Contralateral 3 - 2 side holes		67207100
XBC 3.25	Extra Back-up Contralateral 3.25		67273600
XBC 3.5	Extra Back-up Contralateral 3.5	55807200	67207200
XBC 3.5 SH	Extra Back-up Contralateral 3.5 - 2 side holes		67207300
XBC 4	Extra Back-up Contralateral 4	55807400	67207400
XBC 4 SH	Extra Back-up 4 Contralateral - 2 side holes		67207500
XBC 4.5	Extra Back-up 4.5 Contralateral		67207600
XBC 4.5 SH	Extra Back-up 4.5 Contralateral - 2 side holes		67207700
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XBC 2.5	XBC 2.75	XBC 3	XBC 3.25	XBC 3.5	XBC 4	XBC 4.5

Extra Back-up Lad

Shape	Shape Description	5F ●	6F 🔵	
XBLAD 3	Extra Back-up LAD 3		67206600	
XBLAD 3 SH	Extra Back-up LAD 3 -2 side	holes	67206700	
XBLAD 3.5	Extra Back-up LAD 3.5	55806000	67206000	
XBLAD 3.5 SH	Extra Back-up LAD 3.5 - 2 sid	le holes	67206100	
XBLAD 4	Extra Back-up LAD 4	55806200	67206200	
XBLAD 4 SH	Extra Back-up LAD 4 - 2 side	holes	67206300	
XBLAD 4.5	Extra Back-up LAD 4.5		67206400	
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XBLAD 3	XBLAD 3.5 XBLAD 4	XBLAD 4.5	SH = Side Holes. ST = S	Short Tip.



Extra Back-up RCA

Shape	Shape Description	5F 🌑	6F 🔵	
(BRCA	Extra Back-up Right CA	55812600	67212600	
XBRCA SH	Extra Back-up Right CA - 2 side h		67212700	

Extra Back-up Right

Shape	Shape Description	5F 🌑	6F 🔵		
XBR 1	Extra Back-up Right 1		67212200		
XBR 1 SH	Extra Back-up Right 1 - 2 side ł	noles	67212300		
XBR 2	Extra Back-up Right 2		67212400	XBR 1	XBR 2

Amplatz Left

Shape	Shape D	Description	5F 🔵		6F 🔵	
AL .75	Amplatz	z Left 0.75	55803400		67203400	
AL .75 SH		z Left 0.75 - 2 side holes			67203500	
AL 1	Amplatz		55803600		67203600	
AL 1 ST		z Left 1 - Short tip			67204400	
AL 1 SH	•	z Left 1 - 2 side holes			67203700	
AL 1.5	Amplatz		55803800		67203800	
AL 2	Amplatz		55804000		67204000	
AL 2 SH	Amplatz	z Left 2 - 2 side holes			67204100	
AL 2 LBT	Amplatz	z Left 2 - Long Brite Tip			6720400L	
AL 3	Amplatz	z Left 3	55804200		67204200	
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AL .75	AL 1	AL 1.5	AL 2	AL 3		



Amplatz Right

Shape	Shape Description	5F 🔵	6F 🔵	~
AR 1	Amplatz Right 1	55811000	67211000	
R 1 SH	Amplatz Right 1 - 2 side holes		67211100	
R 1 LBT	Amplatz Right 1 - Long Brite Tip		6721100L	
R 2	Amplatz Right 2	55811200	67211200	
R 2 SH	Amplatz Right 2 - 2 side holes		67211300	
AR 2 LBT	Amplatz Right 2 - Long Brite Tip		6721120L	

3-Dimensional Right Coronary - Williams Technique

Shape	Shape Description	5F 🌑	6F 🔵	
3DRC	Right Coronary 3 Dimensional	55813000	67213000	
3DRC SH	Right Coronary 3 Dimensional - 2 side holes		67213100	3 DRC

Noto Technique

Shape	Shape Description	5F 🌑	6F 🔵	\sim
NR 4	Noto Technique Right 4		67212000	
				NR 4

Hockey Stick

Shape	Shape Description	5F 🌑	6F 🔵
H -STICK	Hockey Stick	55827800	67227800
H -STICK SH	Hockey Stick - 2 side holes		67227900
l -STICK (90 cm)	Hockey Stick - Short Shaft		67227890
H -STICK LBT	Hockey Stick - Long Brite Tip		6722780L



Multipurpose A 1

Shape	Shape Description	5F 🜑	6F 🔵	
MPA 1	Multipurpose A 1	55827000	67227000	MDA 1
MPA 1 SH	Multipurpose A 1 - 2 side holes		67227100	
MPA 1 (125cm)	Multipurpose A 1		67227025	
MPA 1 LBT	Multipurpose A 1 - Long Brite Tip		6722700L	

Multipurpose B 1

Shape	Shape Description	5F 🌑	6F 🔵	
MPB 1	Multipurpose B 1		67227200	MPB 1

Shapes For Coronary Bypass: Left

Shape	Shape Description	5F 🌑	6F 🔵	
LCB	Left Coronary Bypass	55818000	67218000	LCB
LCB (90cm)	Left Coronary Bypass - Short Sh	aft	67218090	
LCB SH	Left Coronary Bypass - 2 side ho	oles	67218100	

Shapes For Coronary Bypass: Right

Shape	Shape Description	5F 🔴	6F 🔵	\sim
RCB	Right Coronary Bypass		67218200	
RCB (90cm)	Right Coronary Bypass - Short sh	aft	67218290	RCB
RCB SH	Right Coronary Bypass - 2 side he	oles	67218300	



Dedicated Radial Shapes

Shape	Shape Description	5F 🜑	6F 🔵
JFL	Left Transradial	55816200	67216200
JFL -ST	Left Transradial - short tip		67216400
JFR	Right Transradial		67216800
JFR -ST	Right Transradial - short tip		67217000
RB	Radiobrachial		67217200
BARBEAU	Barbeau	55817400	67217400
RBL 4	Radial Bilateral 4.0		67271700
RBL 4.5	Radial Bilateral 4.5		67272900
RBL 5.0	Radial Bilateral 5.0		67271800
RRAD5	Right Radial 5	55832000	
RRAD6	Right Radial 6		67230000
RRAD6 XB	Right Radial 6 Extra Back-up		67230100
JFL JF	R RB E	BARBEAU RBL 4	RBL 4.5
RBL 5.0 RR	AD5 RRAD6	RRAD6 XB	



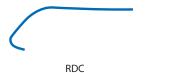
Internal Mammary

Shape	Shape Description	5F •	6F 🔵
IM (90 cm)	Internal Mammary, 90 cm		67219090
IM	Internal Mammary	55819000	67219000
IM SH	Internal Mammary, 2 side holes		67219100

IM

Renal Curve

Shape	Shape Description	5F 🌑	6F 🔵
RDC (55cm)	Renal Double Curve		67221255



SH = Side Holes.



ADROIT® Guiding Catheter - EcoPac Five Pacs

Key Features		
• Units per package: 5		

Judkins Left

Shape	Shape Description	6F 🔵
JL 4	Judkins Left 4 ECOPAC	6720040E

Extra Back-up

Shape	Shape Description	6F 🔵
XB 3.5	Extra Back-up 3.5 ECOPAC	6720540E

Judkins Right

Shape	Shape Description	6F 🔵
JR 4	Judkins Right 4 ECOPAC	6720820E



VISTA BRITE TIP® and Long VISTA BRITE TIP® Guiding Catheters

A complete system of large lumen guiding catheters that are optimized to answer clinical needs. The performance-based design of each catheter easily meets strength, control and delivery requirements in the widest range of anatomies.

Key Features

- The multisegment technology and hybrid braiding provides large inner diameters and excellent deliverability
- TRUELUMEN® Technology facilitates consistent ID from hub to tip, for added confidence
- PTFE lining provides lubricious lumen for smoother delivery
- Complete choice of shapes
- 5F to 9F platform
- Transradial shapes
- Extra back-up shapes
- Long Brite Tip shapes
- All catheters 100 cm except when noted
- Units per package: 1



Judkins Left

Shape	Shape Description	5F 🌑	6F 🔵	7F 🔴	8F 🔵
JL 3	Judkins Left 3		6700000	77800000	588812
JL 3 ST	Judkins Left 3 - short tip		SM7338		
JL 3 SH	Judkins Left 3 - 2 side holes			77800100	
JL 3.5	Judkins Left 3.5	55600200	67000200	77800200	588851
JL 3.5 LBT	Judkins Left 3.5 - Long BRITE TIP®	5560020L			
JL 3.5 ST	Judkins Left 3.5 - short tip		67001200	77801200	
JL 3.5 SH	Judkins Left 3.5 - 2 side holes		67000300	77800300	588832
JL 4 (90 cm)	Judkins Left 4		67000490	77800490	
JL 4	Judkins Left 4	55600400	67000400	77800400	588823
JL 4 LBT	Judkins Left 4 - Long BRITE TIP®	5560040L	6700040L		
JL 4 ST	Judkins Left 4 - short tip		67001400	77801400	
JL 4 SH	Judkins Left 4 - 2 side holes		67000500	77800500	588834
JL 4 ST SH	Judkins Left 4 - short tip - 2 side holes			77801500	
JL 4 (125 cm)	Judkins Left 4 - 125 cm length		SM7435		
JL 4.5	Judkins Left 4.5		67000600	77800600	588852
JL 4.5 LBT	Judkins Left 4.5 - Long BRITE TIP®	SM7329			
JL 4.5 ST	Judkins Left 4.5 - short tip		67001600		
JL 4.5 SH	Judkins Left 4.5 - 2 side holes			77800700	588810
JL 5	Judkins Left 5	55600800	67000800	77800800	588853
JL 5 LBT	Judkins Left 5 - Long BRITE TIP®	5560080L			
JL 5 SH	Judkins Left 5 - 2 side holes			77800900	588800
JL 5 (125 cm)	Judkins Left - 125 cm length		SM7361		
JL 6	Judkins Left 6		67001000	77801000	588854
Ĵ)
JL 3	JL 3.5	JL 4	JL 4.5	JL 5	JL 6



Judkins Curved Left

Shape	Shape Description	5F 🌑	6F 🔵	7F 😑	8F 🔵	G
JCL 3.5	Judkins Curved Left 3.5		67002600			
JCL 3.5 SH	Judkins Curved Left 3.5 - Side Holes		67002700			JCL 3.5
JCL 4	Judkins Curved Left 4		67002800		5888108	

Judkins Right

Shape	Shape Description	5F 🔵	6F 🔵	7F 🔴	8F 🔵
JR 3.5	Judkins Right 3.5	55608000	67008000	77808000	588855
JR 3.5 (125 cm)	Judkins Right 3.5, 125 cm				
JR 3.5 LBT	Judkins Right 3.5 - Long Brite Tip	5560800L			
JR 3.5 SH	Judkins Right 3.5, 2 side holes		67008100	77808100	588828
JR 4 (90 cm)	Judkins Right 4, 90 cm		67008290	77808290	588830T
JR 4 (98 cm)	Judkins Right 4 - 98cm				
JR 4	Judkins Right 4	55608200	67008200	77808200	588830
JR 4 LBT	Judkins Right 4 Long BRITE TIP®	5560280L	6700820L		
JR 4 LBT (110 cm)	Judkins Right 4 Long BRITE TIP®, 110 cm	SM7426			
JR 4 ST	Judkins Right 4 short tip		67009000	77809000	
JR 4 SH	Judkins Right 4, 2 side holes		67008300	77808300	588831
JR 4 SH (90 cm)	Judkins Right 4 - 2 side holes - 90cm			77808390	588831T
JR 4 (125 cm)	Judkins Right 4, 125 cm	SM7739	SM7436		
JR 4.5 ST	Judkins Right 4.5 - Short Tip			77809200	
JR 5	Judkins Right 5		67008400	77808400	588-856
JR 5 LBT	Judkins Right 5 Long BRITE TIP®	SM7330			
JR 5 SH	Judkins Right 5, 2 side holes			77808500	



JR 4

JR 3.5

JR 5



Judkins Curved Right

Shape	Shape Description	5F 🌑	6F 🔵	7F 🛑	8F 🔵	
JCR 4	Judkins Curved Right 4		67009800			JCR 4

Extra Back-up Left

Shape	Shape Description	5F 🌑	6F 🔵	7F 🔴	8F 🔵
XB 2.5	Extra Back-up 2.5		SM7465		
XB 3	Extra Back-up 3	SM7328	67005200	77805200	588829
XB 3 (90 cm)	Extra Back-up 3, 90 cm				
XB 3 (125 cm)	Extra Back-up 3, 125 cm			SM7395	
XB 3 LBT	Extra Back-up 3 Long BRITE TIP®				
XB 3 SH	Extra Back-up 3, 2 side holes		67005300	77805300	588875
XB 3.5 (90 cm)	Extra Back-up 3.5, 90 cm		67005490		SM7721
XB 3.5	Extra Back-up 3.5	55605400	67005400	77805400	588882
XB 3.5 LBT	Extra Back-up 3.5 Long BRITE TIP®	5560540L	6700540L		
XB 3.5 SH	Extra Back-up 3.5, 2 side holes		67005500	77805500	588885
XB 3.5 (98 cm)	Extra Back-up 3.5, 98 cm				
XB 4	Extra Back-up 4	55905600	67005600	77805600	588894
XB 4 (90 cm)	Extra Back-up 4, 90 cm				
XB 4 LBT	Extra Back-up 4 Long BRITE TIP®	5560560L			
XB 4 SH	Extra Back-up 4, 2 side holes		67005700	77805700	588896
XB 4 SH (85cm)					SM7621
XB 4.5	Extra Back-up 4.5		67005800	77805800	588898
XB 4.5 SH	Extra Back-up 4.5, 2 side holes		67005900	77805900	
G	- ((/			
0	C	C			
XB 2.5	XB 3	XB 3.5	XB 4	XB 4.5	



Extra Back-up Contralateral

Shape	Shape Description	5F ●	6F 🔵
XBC 3	Extra Back-up Circumflexa 3		67007000
XBC 3 SH	Extra Back-Up 3.5 - 2 side holes		67007100
XBC 3.5	Extra Back-up Circumflexa 3.5		67007200
XBC 3.5 LBT	Extra Back-Up 3.5 - Long Brite Tip	SM7466	
XBC 3.5 SH	Extra Back-up Circumflexa 3.5, 2 side holes		67007300
XBC 4 SH	Extra Back-Up 4		67007400
XBC 4 SH	Extra Back-up Circumflexa 4, 2 side holes		67007500
XBC 4.5 SH	Extra Back-Up 4.5 - 2 side holes		67007700



Extra Back-up LAD

Shape	Shape Description	5F 🔴	6F 🔵	7F 🔴	8F 🔵
XB LAD 3	Extra Back-Up LAD 3		67006600		
XB LAD 3 SH	Extra Back-Up LAD 3 - 2 side holes		67006700		
XB LAD 3.5	Extra Back-Up LAD 3.5	55606000	67006000	77806000	5888100
XB LAD 3.5 LBT	Extra Back-Up LAD 3.5 - Long Brite Tip	5560600L			
XB LAD 3.5 SH	Extra Back-Up LAD 3.5 - 2 side holes		67006100	77806100	5888103
XB LAD 4	Extra Back-Up LAD 4		67006200	77806200	5888101
XB LAD 4 SH	Extra Back-Up LAD 4 - 2 side holes		67006300	77806300	5888104
XB LAD 4.5	Extra Back-Up LAD 4.5		67006400	77806400	

XB LAD 3.5

XB LAD 4

XB LAD 4.5

SH = Side Holes. ST = Short Tip. LBT = Long BRITE TIP.



Extra Back-up RCA

Shape	Shape Description	5F 🌑	6F 🔵	7F 🛑	8F 🔵
XBR CA 90cm	Extra Back-Up Right CA 90cm				SM7746
XBR CA	Extra Back-Up Right CA		67012600	G778126	
XBR CA SH	Extra Back-up Right CA - 2 side holes		67012700		



XBR CA

Extra Back-up Right

Shape	Shape Description	5F 🌑	6F 🔵	7F 🛑	8F 🔵
XBR 1	Extra Back-up Right 1		67012200		
XBR 1 SH	Extra Back-Up Right 1 - 2 side holes		67012300		
XBR 2	Extra Back-up Right 2		67012400		





Amplatz Left

Shape	Shape Description	5F 🌑	6F 🔵	7F 🛑	8F 🔵
AL .75	Amplatz Left 0.75	SM7722	67003400	77803400	588890
AL .75 (90 cm)	Amplatz Left 0.75, 90 cm		SM7719		
AL .75 SH	Amplatz Left 0.75 - 2 side holes		67003500	G782AL75	SM7649
AL .75 ST	Amplatz Left 0.75 - short tip		SM7664		
AL 1	Amplatz Left 1		67003600	77803600	588843
AL 1 (90 cm)	Amplatz Left 1 - 90 cm catheter length			77803690	588843T
AL 1 LBT	Amplatz Left 1 - Long BRITE TIP®	SM7331			
AL 1 ST	Amplatz Left 1 - short tip	SM7503	67004400	77804400	588870
AL 1 SH	Amplatz Left 1 - 2 side holes		67003700	77803700	588847
AL 1 SH (85cm)	Amplatz Left 1 - 2 side holes - 85cm				
AL 1 ST SH	Amplatz Left 1 - short tip - 2 side holes			77804500	588873
AL 1 (90 Degree Angle)	Amplatz Left 1 - 90 Degree Angle - 100cm			SM7603	
AL 1 (110 cm)	Amplatz Left 1 - 110cm catheter length				
AL 1.5	Amplatz Left 1.5		67003800	77803800	
AL 1.5 SH	Amplatz Left 1.5 - 2 side holes			77803900	588878
AL 2 (80 cm)	Amplatz Left 2 - 80 cm catheter length				
AL 2 (90 cm)	Amplatz Left 2, 90 cm catheter length			77804090	588844T
AL 2	Amplatz Left 2	55604000	67004000	77804000	588844
AL 2 LBT	Amplatz Left 2 - Long BRITE TIP®	5560400L	6700400L		
AL 2 ST	Amplatz Left 2 - short tip			77804800	
AL 2 SH	Amplatz Left 2 - 2 side holes		67004100	77804100	588848
AL 3	Amplatz Left 3		67004200	77804200	588849
AL 3 SH	Amplatz Left 3 - 2 side holes			77804300	588891
7	\int	$-\zeta$			
AL .75	AL 1 AL 1	.5	AL 2	AL 3	



Amplatz Right

Shape	Shape Description	5F 🌑	6F 🔵	7F 🔴	8F 🔵
AR 1	Amplatz Right 1		67011000	77811000	588845
AR 1 LBT	Amplatz Right 1 Long BRITE TIP®	SM7333	6701100L		
AR 1 SH	Amplatz Right 1 - 2 side holes			77811100	588836
AR 2	Amplatz Right 2	55611200	67011200	77811200	588846
AR 2 LBT	Amplatz Right 2 Long BRITE TIP®	5561120L	6701120L		
AR 2 SH	Amplatz Right 2 - 2 side holes		67011300	77811300	588837
AR 3	Amplatz Right 3				
AR-MOD	Amplatz Right Mod, 100 cm		SM7398		
·					
AR 1	AR 2	AR MOD			

3-Dimensional Right Coronary - Williams Technique

Shape	Shape Description	5F 🌑	6F 🔵	7F 🔴	8F 🔵	
3DRC	Right Coronary 3 Dimensional		67013000			
3DRC LBT	Right Coronary 3 Dimensional - Long Brite Tip	SM7599				3 DRC
3DRC SH	Right Coronary 3 Dimensional - 2 side holes		67013100	G7823DRC		

Noto Technique

Shape	Shape Description	5F 🔵	6F 🔵	7F 🔴	8F 🔵	\sim
NR 4	Noto Technique Right 4		67012000			
						NR 4



Hockey Stick

Shape	Shape Description	5F 🌑	6F 🔵	7F 🔴	8F 🔵
H-STICK (90cm)	Hockey Stick - 90cm catheter length		67027890	77827890	
I-STICK	Hockey Stick		67027800	77827800	588841
-STICK LBT	Hockey Stick - Long Brite Tip	5562780L	6702780L		
I -STICK SH	Hockey Stick, 2 side holes		67027900	77827900	588850
H -STICK SH (90cm)	Hockey Stick, 2 side holes - 90cm catheter length			77827990	

Multipurpose A 1

Shape	Shape Description	5F 🌑	6F 🔵	7F 🔴	8F 🔵	9F 🌑
MPA 1 LBT	Multipurpose A 1 - Long BRITE TIP®	5562700L	6702700L			
MPA 1 LBT (110cm)	Multipurpose A 1 - Long BRITE TIP® - 110 cm					
MPA 1	Multipurpose A 1		67027000	77827000	588842	
MPA 1 (115cm)	Multipurpose A 1 - 115 cm catheter length		SM7462			
MPA 1 SH	Multipurpose A 1 - 2 side holes		67027100	77827100	588892	
MPA 1 (125cm)	Multipurpose A 1 - 125 cm catheter length		SM7477	SM7206		
MPA 1 (98cm)	Multipurpose A-1 - 98 cm catheter length					598942
MPA 1 (55cm)	Multipurpose A-1 - 55 cm catheter length			77827055	588840P	
MPA 2 (125cm)	Multipurpose A 2 - 125 cm catheter length		SM7394			



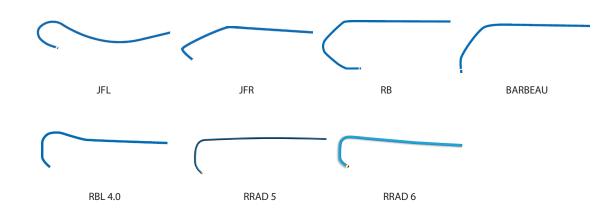
Multipurpose B 1

Shape	Shape Description	5F 🌑	6F 🔵	7F 🔴	8F 🔵
MPB 1	Multipurpose B 1		67027200		
MPB 1 SH	Multipurpose B 1 - 2 side holes			77827300	
[
MPB 1					SH = Side Holes. ST = Short Tip. LBT = Long BRITE T



Dedicated Radial Shapes

Shape	Shape Description	5F 🜑	6F 🔵
JFL	Left Transradial	55616200	67016200
JFL -ST	Left Transradial - short tip		67016400
JFL -LBT	Left Transradial - Long BRITE TIP®	5561620L	67016600
JFR	Right Transradial	55616800	67016800
JFR -ST	Right Transradial - short tip		67017000
JFR - LT	Right Transradial - Long BRITE TIP®	5561680L	
RB	Radiobrachial	55617200	67017200
RB LBT	Radiobrachial - Long BRITE TIP®	5561720L	
BARBEAU	Barbeau	55617400	67017400
BARBEAU LBT	Barbeau - Long BRITE TIP®	556174-0L	SM7542
RBL 4.0	Radial Bilateral 4.0		SM7717





Shapes For Coronary Bypass: Left

Shape	Shape Description	5F 🌑	6F 🔵	7F 🔴	8F 🔵	
LCB	Left Coronary Bypass		67018000	77818000	588815	LCB
LCB (90cm)	Left Coronary Bypass - 90 cm catheter length		67018090	77818090		
LCB LBT	Left Coronary Bypass - Long Brite Tip	SM7327				
LCB SH	Left Coronary Bypass - 2 side holes		67018100	77818100		

Shapes For Coronary Bypass: Right

Shape	Shape Description	5F 🌑	6F 🔵	7F 🔴	8F 🔵	
RCB	Right Coronary Bypass		67018200	77818200	588816	
RCB (90 cm)	Right Coronary Bypass - 90 cm cathet	er length	67018290	G780RCBH		RCB
RCB SH	Right Coronary Bypass - 2 side holes		67018300	77818300		

Coronary Bypass: Left Internal Mammary

Shape	Shape Description	5F 🌑	6F 🔵	7F 🔴	8F 🔵
LIMA (90 cm)	3D LIMA Left Internal Mammary Artery, 90 cm		SM7501		
LIMA (125cm)	3D LIMA Left Internal Mammary Artery, 125 cm	SM7740			

Internal Mammary

Shape	Shape Description	5F 🌑	6F 🔵	7F 🔴	8F 🔵
IM (90 cm)	Internal Mammary - 90 cm shaft length		67019090	77819090	588801
IM	Internal Mammary		67019000	77819000	588817
IM LBT	Internal Mammary - Long BRITE TIP	5561900L			
IM SH	Internal Mammary - 2 side holes		67019100	77819100	588820
IM SH (90cm)	Internal Mammary - 2 side holes - 90cm catheter			77819190	
IM VB-1	Internal Mammary - 100cm		67019200		



Champ - Bypass Backup Support

Shape	Shape Description	5F 🔵	6F 🔵	7F 🔴	8F 🔵
СНАМР	Champ 1.0		SM7467		
Sones					
Shape	Shape Description	5F 🔵	6F 🔵	7F 🔴	8F 🔵
SON 1	Sones 1				588880

Castillo

Shape	Shape Description	5F	6F 🔵	7F 🛑	8F 🔵
CAS 1	Castillo 1				588883
CAS 2	Castillo 2				588884



VISTA BRITE TIP[®] and Long VISTA BRITE TIP[®] Guiding Catheters - EcoPac Five Pacs

Key Features	
• Units per package: 5	

Judkins Left

Shape	Shape Description	6F 🔵
JL 4	Judkins Left 4	6700040E
JL 4 SH	Judkins Left 4 - 2 side holes	SM7427

Extra Back-up

Shape	Shape Description	6F 🔵
XB 3.5	Extra Back-up 3.5	6700540E

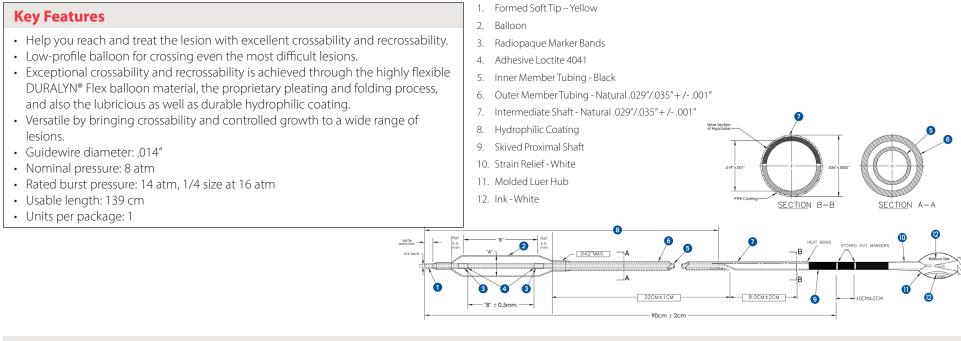
Judkins Right

IR 4 Indkins Right 4 6700820E	Shape	Shape Description	6F 🔵
Juditing Hight 4 070020E	JR 4	Judkins Right 4	6700820E

PTCA Balloons



EMPIRA® RX Pre-Dilatation Catheter



Balloon Diameter	Balloon Length						
	6	10	12	15	20	30	
1.50	85R06150S	85R10150S	85R12150S	85R15150S	85R20150S		
2.00	85R06200S	85R10200S	85R12200S	85R15200S	85R20200S	85R30200S	
2.25		85R10225S	85R12225S	85R15225S	85R20225S		
2.50	85R06250S	85R10250S	85R12250S	85R15250S	85R20250S	85R30250S	
2.75		85R10275S	85R12275S	85R15275S	85R20275S		
3.00		85R10300S	85R12300S	85R15300S	85R20300S		
3.25							
3.50		85R10350S	85R12350S	85R15350S	85R20350S		
4.00				85R15400S			



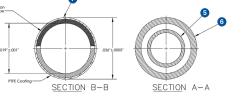
EMPIRA NC® RX Post-Dilatation Catheter

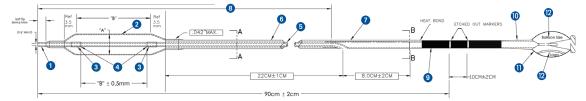
Key Features

- Designed to deliver in challenging interventions and post-dilatation procedures.
- High-pressure balloon that combines exceptional crossability and recrossability with accuracy during postdilatation.
- Exceptional crossability and recrossability is achieved through the highly flexible DURALYN® Flex balloon material, the proprietary pleating and folding process, and also the lubricious as well as durable hydrophilic coating.
- Guidewire diameter: .014"
- Nominal pressure: 14 atm
- Rated burst pressure: 20 atm, 1/4 size at 26 atm
- Usable length: 139 cm
- Units per package: 1

- 1. Formed Soft Tip Yellow
- 2. Balloon
- 3. Radiopaque Marker Bands
- 4. Adhesive Loctite 4041
- 5. Inner Member Tubing Black
- 6. Outer Member Tubing Natural .029"/.035" + /- .001"
- 7. Intermediate Shaft Natural .029"/.035" + /- .001"
- 8. Hydrophilic Coating
- 9. Skived Proximal Shaft
- 10. Strain Relief White
- 11. Molded Luer Hub

12. Ink-White





Skive Sect

Balloon Diameter	Balloon Length						
	6	10	12	15	20	25	30
2.00	75R06200N	75R10200N	75R12200N	75R15200N	75R20200N		
2.25		75R10225N		75R15225N	75R20225N		
2.50	75R06250N	75R10250N	75R12250N	75R15250N	75R20250N	75R25250N	75R30250N
2.75		75R10275N	75R12275N	75R15275N	75R20275N		
3.00	75R06300N	75R10300N	75R12300N	75R15300N	75R20300N	75R25300N	75R30300N
3.25		75R10325N	75R12325N	75R15325N	75R20325N		
3.50	75R06350N	75R10350N	75R12350N	75R15350N	75R20350N	75R25350N	75R30350N
3.75		75R10375N	75R12375N	75R15375N	75R20375N		
4.00		75R10400N	75R12400N	75R15400N	75R20400N		

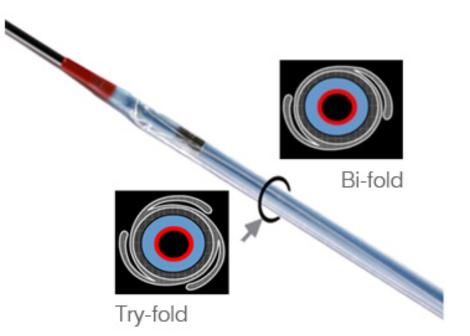


MOZEC[™] PTCA Balloon Dilatation Catheter

With the longest PTCA balloons on the U.S. market, the MOZEC[™] PTCA Balloon Dilatation Catheter is available in a broad range of sizes for greater cath lab efficiency. The durable, flexible FeatherLite[™] catheter construction transfers more push from hub to tip*. The proprietary memory shape balloon refolds to original size following deflation for excellent rewrap** and the elongated tip and seamless transition facilitates access through tight lesions.

Key features

- MeriGlide[™] hydrophilic coating from distal balloon neck up to Rx port for smooth navigation
- Excellent pushability to deliver through complexity
- Tight rewrap after repeat dilatations
- Catheter System: Rapid Exchange (RX)
- Guide Catheter Compatibility: 5 F (min I. D. 0.056" / 1.42 mm)
- Guidewire diameter: .014"
- Nominal pressure: 7 atm for all diameters
- Rated burst pressure: 16 atm for 1.50 to 4.00 mm, 14 atm for 4.50 mm
- Catheter shaft length: 142 cm
- Wrap: 2 folds for 1.50 and 2.00 mm, 3 folds for 2.25 to 4.50 mm
- Units per package: 1



Balloon Diameter	Balloon Length									
	9	12	14	15	17	20	25	30	38	41
1.5	MOZ15009	MOZ15012		MOZ15015						
2	MOZ20009	MOZ20012		MOZ20015						
2.25	MOZ22509		MOZ22514		MOZ22517	MOZ22520	MOZ22525	MOZ22530	MOZ22538	
2.5	MOZ25009		MOZ25014		MOZ25017	MOZ25020	MOZ25025	MOZ25030	MOZ25038	MOZ25041
2.75	MOZ27509		MOZ27514		MOZ27517	MOZ27520	MOZ27525	MOZ27530	MOZ27538	
3	MOZ30009		MOZ30014		MOZ30017	MOZ30020	MOZ30025	MOZ30030	MOZ30038	MOZ30041
3.5	MOZ35009		MOZ35014		MOZ35017	MOZ35020	MOZ35025	MOZ35030	MOZ35038	
4	MOZ40009		MOZ40014		MOZ40017	MOZ40020	MOZ40025	MOZ40030		
4.5	MOZ45009		MOZ45014		MOZ45017	MOZ45020	MOZ45025	MOZ45030		

*FeatherLite™ catherter construction applicable for MOZEC™ PTCA balloon dilatation catheter only. **Nylon balloon material applicable for MOZEC™ PTCA balloon dilatation catheter only.

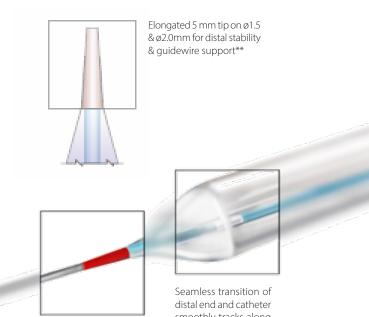


MOZEC[™] NC PTCA Balloon Dilatation Catheter

The MOZEC[™] NC PTCA Balloon Dilatation Catheter combines controlled balloon growth with the longest lengths on on the U.S. market. It offers excellent cross and recross, tight rewrap and exceptionally low tracking forces.*

Key features

- MeriGlide[™] hydrophilic coating from distal balloon neck up to Rx port for smooth navigation
- Excellent pushability to deliver through complexity
- Tight rewrap after repeat dilatations
- Catheter System: Rapid Exchange (RX)
- Balloon Material: Nylon Non-Compliant
- Guide Catheter Compatibility: 5 F (min I. D. 0.056" / 1.42 mm)
- Guidewire diameter: .014"
- Nominal pressure: 12 atm for all diameters
- Rated burst pressure: 20 atm
- Catheter shaft length: 142 cm
- Wrap: 2 folds for 2.00 mm, 3 folds for 2.25 to 4.50 mm
- Units per package: 1



Low 0.019" tip entry profile & crossing profile smoothly tracks along the guidewire

Balloon Diameter	Balloon Length							
	8	10	13	15	18	23	28	35
2.00	MNC20008	MNC20010	MNC20013	MNC20015	MNC20018	MNC20023	MNC20028	MNC20035
2.25	MNC22508	MNC22510	MNC22513	MNC22515	MNC22518	MNC22523	MNC22528	MNC22535
2.50	MNC25008	MNC25010	MNC25013	MNC25015	MNC25018	MNC25023	MNC25028	MNC25035
2.75	MNC27508	MNC27510	MNC27513	MNC27515	MNC27518	MNC27523	MNC27528	MNC27535
3.00	MNC30008	MNC30010	MNC30013	MNC30015	MNC30018	MNC30023	MNC30028	MNC30035
3.50	MNC35008	MNC35010	MNC35013	MNC35015	MNC35018	MNC35023	MNC35028	MNC35035
4.00	MNC40008	MNC40010	MNC40013	MNC40015	MNC40018	MNC40023	MNC40028	MNC40035
4.50	MNC45008	MNC45010	MNC45013	MNC45015	MNC45018	MNC45023	MNC45028	MNC45035



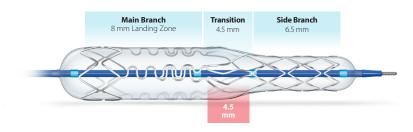
TRYTON Side Branch Stent

The TRYTON Side Branch Stent is indicated for improving the side branch luminal diameter of de novo native coronary artery bifurcation lesions (Medina Classification 1.1.1; 0.1.1; 1.0.1) with a side branch diameter stenosis of \geq 50% and a lesion length \leq 5.0 mm, along with reference vessel diameters \geq 2.5 mm to \leq 3.5 mm in the side branch and \geq 2.5 mm to \leq 4.0 mm in the main branch. The device is intended for use in conjunction with commercially available balloon expandable drug-eluting coronary stents in the main branch.

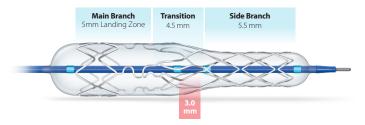
Technical Specifications

- Catheter System: Rapid Exchange (RX)
- Stent Material: Cobalt Chromium
- Strut Thickness: 85 μm
- Balloon Material: Semi-Compliant, Nylon
- Guidewire diameter: .014"
- Tip Profile: 0.020"
- Recommended Guide Catheter : 6 F (min I.D. 0.068" kissing balloon technique)
- Markers on proximal shaft: Brachial and femoral markers 90 cm and 100 cm from distal tip
- Balloon Radiopaque Markers: 4 Platinum/Iridium
- Normal Pressure: 8 to 10 atm
- Radial Burst Pressure: 14 atm

2.5 mm Side Branch (19mm)



3.0 - 3.5 mm Side Branch (15 mm)



Ordering Information							
Product Codes	Diameter SB - MB (mm)	Length (mm)	Main Branch Landing Zone (mm)	Minimum Guiding Catheter Diameter	Maximum Post-expansion Diameter SB - MB (mm)	Nominal Pressure (atm)	RBP (atm)
2.5 mm Side Branch							
T52525191US	2.5 - 2.5	19	8	5 F	3.0 - 4.0	8	14
T52530191US	2.5 - 3.0	19	8	5 F	3.0 - 4.0	10	14
T52535191US	2.5 - 3.5	19	8	5 F	3.0 - 4.0	10	14
3.0 - 3.5 mm Side Branch							
T53035151US	3.0 - 3.5	15	5	6F	4.0 - 4.5	8	14
T53540151US	3.5 - 4.0	15	5	6F	4.0 - 4.5	10	14



Standard Biopsy Forceps

Key Features

- Choice of two forceps diameters (for taking samples adapted to a wide range of clinical situations)
- » 2.46 mm³ of tissue sample using the 5.5F forceps
- » 5.20 mm³ of tissue sample using the 7F forceps
- Jugular or femoral access possible with two lengths of forceps
- Units per package: 1

Shaft OD (French)	Shaft OD (mm)	Length (cm)	Description	Product Code
5.5	1.85	104	For femoral approach	504300
5.5	1.85	50	For internal jugular approach	504302
7	2.3	104	For femoral approach	504300L
7	2.3	50	For internal jugular approach	504302L



BI-PAL® Biopsy Forceps

Key Features

- Disposable and torquable (PTFE sheath for curving the distal section of the forceps into the desired shape and to direct it towards the ventricular wall)
- » 5.03mm³ of tissue sample using the 7F forceps
- Jugular or femoral access possible with two lengths of forceps

Shaft OD (French)	Shaft OD (mm)	Length (cm)	Description	Product Code
7	2.3	104	Straight tip for femoral approach	502400B
7	2.3	50	Radial tip shape for internal jugular approach	502402B
7	2.3	50	Multipurpose tip shape for internal jugular approach	502402M

Biopsy Forceps Catheter Sheath Introducers and Sheath Sets

For Use With Catheter French (F)	Sheath Length (cm)	Description	Product Code
7	45	Sheath only, straight tip	501611
7	98	Sheath only, straight tip	501613
7	45	Sheath only, multipurpose curve	501611A
7	98	Sheath only, multipurpose curve	501613A
7	45	Sheath only, multipurpose curve, 50 cm 7F multipurpose A2 catheter, 8F vessel dilator	501616A
7	98	Sheath only, straight tip, 110 cm 7F pigtail HF catheter, 8F vessel dilator	501617

CORDIS® Closure Portfolio

Our closure portfolio features options for femoral, radial, transpedal and tibiopedal closure, including MYNX CONTROL[™], MYNXGRIP[®], EXOSEAL[®] Vascular Closure Devices and the ZEPHYR[®] Vascular Compression Band. MYNX CONTROL[™] and MYNXGRIP[®] Vascular Closure Devices utilize the proprietary GRIP[™] sealant to seal the arteriotomy. The GRIP[™] sealant, comprised of Polyethylene Glycol (PEG), grips the artery, providing a secure close. The sealant dissolves within 30 days, leaving nothing permanently behind but a healed artery. MYNX[®] Closure Devices treat a wide range of patients and clinical scenarios including punctures at or below the bifurcation and antegrade punctures. The versatile design provides options in challenging anatomies. The soft, flexible strap on the ZEPHYR[®] Vascular Compression Band maintains firm downward compression for patent hemostasis for radial, tibiopedal or transpedal procedures.

MYNX CONTROL[™] Vascular Closure Device

MYNXGRIP® Vascular Closure Device

The innovative design and predictable deployment of MYNX CONTROL[™] Vascular Closure Device (VCD) delivers outstanding performance and control, for consistently secure arterial closures.

Learn more page 80

The MYNXGRIP® Closure Device offers a patient-friendly closure option with no cinching, suturing, or metal implants.

Learn more page 81

EXOSEAL® Vascular Closure Device

Combining safety and ease-of-use, the Cordis EXOSEAL® Vascular Closure Device means a confident close and excellent patient outcomes.

Learn more page 82

ZEPHYR[®] Vascular Compression Band

The ZEPHYR[®] device helps clinicians achieve patent hemostasis with firm downward pressure and clear visualization of the puncture site.

Learn more page 14



MYNX CONTROL[™] Vascular Closure Device (VCD)

The MYNX CONTROL[™] VCD integrates active extravascular sealing and resorbability properties with a next-generation delivery system to maximize predictability, safety, and ease of use in sealing 5-7F femoral arterial access sites. The new deployment system is purpose-designed to enhance safety and deliver reliable performance. The GRIP[™] sealant securely adheres to the arteriotomy and dissolves within 30 days, leaving nothing permanently behind but a healed artery. The MYNX CONTROL[™] Device is indicated to close femoral arterial access sites utilizing a 5F, 6F, or 7F procedural sheath.

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Ordering Information

The MYNX CONTROL[™] VCD includes:

- (1) MYNX CONTROL[™] VCD including balloon catheter and integrated polyethylene glycol sealant
- (1) 10 ml locking syringe
- Units per package: 10

Product	Size	Order Number
MYNX CONTROL [™] Vascular Closure Device (VCD)	5F	MX5060
	6F/7F	MX6760



MYNXGRIP® Vascular Closure Device

The MYNXGRIP® Device provides secure mechanical closure with the safety of an extravascular sealant. The MYNXGRIP® Device contains the proprietary GRIP™ Sealant which actively adheres to and seals the arteriotomy or venotomy while expanding to fill the tissue tract. The MYNXGRIP® Device offers a patient-friendly closure option with no cinching, suturing, or metal implants. The GRIP™ sealant dissolves within 30 days leaving nothing permanently behind but a healed artery. The MYNXGRIP® Device is indicated to close femoral arterial and venous access sites utilizing a 5F, 6F, or 7F procedural sheath.

Ordering Information

The MYNXGRIP® Vascular Closure Device includes:

- Balloon catheter with integrated sealant
- 10 ml locking syringe
- Units per package: 10

Product	Size	Product Code
MYNXGRIP® Vascular Closure Device	5F	MX5021
MYNXGRIP® Vascular Closure Device	6F/7F	MX6721





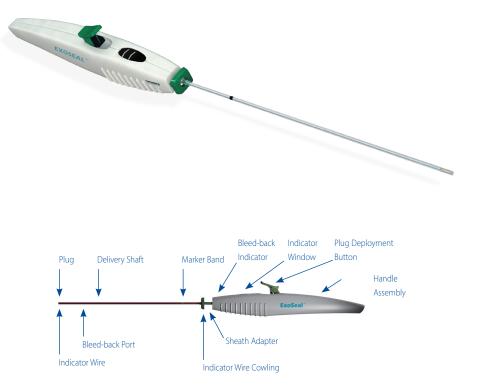
EXOSEAL® Vascular Closure Device

The EXOSEAL® Vascular Closure Device is indicated for femoral artery puncture site closure, reducing times to hemostasis and ambulation in patients who have undergone diagnostic or interventional catheterization procedures using a standard 5F, 6F, or 7F vascular sheath introducer with up to a 12-cm working length. The EXOSEAL® Vascular Closure Device is designed for a safe, simple, and secure close.

Key Features

- No anchor left inside the artery
- Two unique visual indicators enable precise positioning
- Easy-to-learn deployment helps efficiently achieve procedural success
- Simple 3-step procedure
- Available in 3 French sizes

Product	Size	Order Number
EXOSEAL® Vascular Closure Device	5F	EX500
EXOSEAL® Vascular Closure Device	6F	EX600
EXOSEAL® Vascular Closure Device	7F	EX700





ADROIT® Guiding Catheter

Indications

The ADROIT[®] Guiding Catheter is intended for use for intravascular introduction of interventional/diagnostic devices into the coronary or peripheral vascular systems.

Contraindications

None known for guiding catheters.

Warnings

Risk of reuse: This product is designed and intended for single use. It is not designed to undergo reprocessing and re-sterilization after initial use. Reuse of this product, including after reprocessing and/or re-sterilization, may cause a loss of structural integrity which could lead to a failure of the device to perform as intended and may lead to a loss of critical labeling/use information all of which present a potential risk to patient safety.

Do not use with Ethiodol[™] or Lipiodol[™] contrast media, or other such contrast media which incorporates the components of these agents.

Precautions

- Store in a cool, dark, dry place.
- Do not use open or damaged packages.
- Use prior to the "Use By" date.
- Do not re-sterilize.
- Do not expose to organic solvents.
- Inspect the guiding catheter before use to verify that its size, shape and condition are suitable for the specific procedure.
- If strong resistance is met during manipulation, discontinue the procedure and determine the cause of the resistance before proceeding. If the cause of the resistance can not be determined, withdraw the catheter.

- Torquing the guiding catheter excessively while kinked may cause damage which could result in possible separation along the catheter shaft. Should the guiding catheter shaft become severely kinked, withdraw the entire system (guiding catheter, guidewire and catheter sheath introducer).
- Advancement, manipulation and withdrawal of the guiding catheter should always be performed under fluoroscopic guidance.
- Extreme care must be taken to avoid damage to the vasculature through which the guiding catheter passes. The guiding catheter may occlude smaller vessels. Care must be taken to avoid complete blood flow blockage.
- Large internal lumen guiding catheters require less force on the syringe during injection.

Complications

Procedures requiring percutaneous catheter introduction should not be attempted by physicians unfamiliar with the possible complications. Complications may occur at anytime during or after the procedure.

Possible complications include, but are not limited to the following:

- air embolism
- hematoma at the puncture site
- infection
- perforation of the heart
- vessel damage, dissection or perforation
- vasospasm
- ischemia
- hemorrhage
- arrhythmia
- reaction to contrast media
- death

Please refer to the Instructions for Use for complete information, including Adverse Events.

ATW[™] Steerable Guidewire, ATW[™] Marker Wire, STABILIZER[®] Plus Steerable Guidewire, STABILIZER[®] XS Steerable Guidewire, SHINOBI[®] Steerable Guidewire, SHINOBI[®] Plus Steerable Guidewire, REFLEX[®] Steerable Guidewire, WIZDOM[™] Steerable Guidewire

Indications

Cordis Steerable Guidewires are intended for use in angiographic procedures to introduce and position catheters and interventional devices within the vasculature.

Contraindications

Cordis Steerable Guidewires are contraindicated for use in chronic total occlusions.

Contraindications for interventional devices are described in the instructions supplied with the respective device.

Warnings

Do not reuse. Discard after one procedure. Structural integrity and/or function may be impaired through reuse or cleaning. All parts are extremely difficult to clean after exposure to biological materials and may cause adverse patient reactions if reused. Cordis Corporation will not be responsible for any direct, incidental or consequential damages resulting from reuse of the product.

Guidewires are delicate instruments and should be handled carefully. Prior to use and when possible during the procedure, inspect the guidewire carefully for coil separation, bends, or kinks. Do not use a guidewire that shows signs of damage. Damage will prevent the guidewire from performing with accurate torque response and control.



Guidewire manipulation/torquing should always be performed under fluoroscopic guidance.

Never push, auger, withdraw, or torque a guidewire that meets resistance. First, using fluoroscopy, determine the cause of resistance and take any necessary remedial action. Torquing or pushing a guidewire against resistance may cause guidewire damage, and/or guidewire tip separation, or direct damage to the vessel. Resistance may be felt and/or observed (via fluoroscopy) by noting any buckling of the guidewire tip. If guidewire tip prolapse is observed, DO NOT allow the tip to remain in a prolapsed position; otherwise damage to the guidewire may occur.

If any resistance is felt, i.e., due to vessel spasm, bent guidewire, or guidewire entrapment, while manipulating or removing the guidewire in the blood vessel: STOP the procedure. DO NOT move or torque the guidewire. Using fluoroscopy, first determine the cause of the resistance, then take appropriate remedial action. If the guidewire is moved excessively, it may break or become damaged. This may cause blood vessel injury or result in fragments being left inside the vessel.

Should torque control/tip response be compromised during use, confirm tip integrity using fluoroscopy. LOSS OF TORQUE CONTROL MAY BE DUE TO CORE WIRE FRACTURE. Under fluoroscopic guidance, advance the balloon catheter to the distal end of the guidewire and remove the balloon catheter/guidewire system as a unit.

Precautions

- Store in a cool, dark, dry place.
- Do not use open or damaged packages.
- Use prior to the "Use By" date.
- Exposure to temperatures above 54°C (130°F) may damage the guidewire.
- Do not expose to organic solvents.

• Movement of torque device or metal insertion tool on a guidewire's coating may compromise the integrity of the coating.

Complications

Procedures requiring percutaneous guidewire introduction should not be attempted by physicians unfamiliar with the possible complications. Complications may occur at anytime during or after the procedure.

Possible complications include, but are not limited to:

- Air embolism
- Hematoma at the puncture site
- Infection
- Perforation of the heart or vessel wall
- Tip fractures have been reported in procedures involving guidewire entrapment, total occlusions, highly tortuous vasculature, and small side branches. For guidewire tip retrieval, please refer to the referenced publications for recommended techniques

Please refer to the Instructions for Use for complete information, including Adverse Events.

AVANTI®+ Sheath Introducer

Indications

The CSI is indicated for use in arterial and venous procedures requiring percutaneous introduction of intravascular devices.

Contraindications

None known.

Warnings

For one use only. Do not re-sterilize or reuse. Structural integrity and/or function may be impaired through cleaning, re-sterilization or reuse and may cause adverse patient reactions. Accordingly, Cordis will not be

responsible for any direct or consequential damages or expenses resulting from reuse of the CSI.

Do not use with Ethiodol[™] or Lipiodol[™] contrast media, or other such contrast media, which incorporate the components of these agents.

Do not leave a CSI in place for extended periods of time without a catheter or an obturator to support the cannula wall.

Precautions

- Store in a dry, dark, cool place.
- Do not use if package is open or damaged.
- Note "Use Before" or "Use By" date prior to using product.
- Do not re-sterilize. Exposure to temperatures above 54°C (130°F) may damage the catheter sheath and components.
- Do not expose to organic solvents, e.g. alcohol.
- If increased resistance is felt upon insertion of the CSI, investigate the cause before continuing. If the cause of the resistance cannot be determined and corrected, discontinue the procedure and withdraw the CSI.

Complications

Possible complications include, but are not limited to:

- air embolism
- infection
- intimal tear
- hematoma at the puncture site
- perforation of the vessel wall
- thrombus formation

Please refer to the Instructions for Use for complete information, including Adverse Events.



BI-PAL® Biopsy Forceps

Indications

The Cordis biopsy forceps are designed for endomyocardial biopsies.

Contraindications

None known.

Clinical History

These instructions are based on experience gathered to date. The physician may wish to vary the procedure in accordance with clinical judgment.

Warnings

Discard the forceps after completing one procedure. Structural integrity and/or function may be impaired through reuse or cleaning.

Forceps are extremely difficult to clean after exposure to biological material and may cause adverse patient reactions if reused.

Precautions

- The forceps should be thoroughly rinsed with heparinized saline before and after each biopsy during the procedure.
- The heart should be routinely monitored by ECG during the procedure.
- Use prior to the "Use By" date.
- Do not use if the inner package is open or damaged.
- Consider the use of systemic heparinization.
- If strong resistance is met during manipulation, discontinue the procedure and determine the cause of resistance before proceeding. If the cause of resistance cannot be determined, withdraw the forceps.

Complications

Procedures requiring biopsy forceps should not be attempted by physicians unfamiliar with the possible

complications. Complications may occur at any time during or after the procedure.

Possible complications include, but are not limited to:

- hematoma at the puncture site
- infection
- perforation of the vessel wall or the myocardium
- vessel trauma
- embolism
- death

Please refer to the Instructions for Use for complete information, including Adverse Events.

EMERALD® Diagnostic Guidewire

Indications

Cordis Guidewires are intended for use in the percutaneous introduction of catheters.

Contraindications

None known.

Warnings

Do not reuse. Discard after one procedure. Structural integrity and/or function may be impaired through reuse or cleaning. All parts are extremely difficult to clean after exposure to biological materials and may cause adverse patient reactions if reused. Accordingly, Cordis Corporation will not be responsible for any direct, incidental or consequential damages resulting from reuse of the product.

Precautions

- Store in a cool, dark, dry place.
- Do not use if package is open or damaged.
- Use prior to "Use By" date.
- Do not expose to organic solvents.

- Exposure to temperatures above 54°C (130°F) may damage the components.
- Do not withdraw a PTFE coated guidewire through a metal-cannula needle. Withdrawal may damage the guidewire coating.
- If strong resistance is met during manipulation, discontinue the procedure and determine the cause of resistance before proceeding. If the cause of the resistance cannot be determined, withdraw the catheter and guidewire.

Complications

Procedures requiring percutaneous catheter/guidewire introduction should not be attempted by physicians unfamiliar with the possible complications. Complications may occur at any time during or after the procedure.

Possible complications include, but are not limited to:

- air embolism
- hematoma at the puncture site
- infection
- perforation of the vessel wall

Please refer to the Instructions for Use for complete information, including Adverse Events.

EMPIRA® Balloon Catheter

Indications

The Cordis EMPIRA® RX PTCA Dilation Catheter and EMPIRA NC® RX PTCA Dilatation Catheter are indicated for balloon dilatation of the stenotic portion of a coronary artery or bypass graft stenosis for the purpose of improving myocardial perfusion.

The Cordis EMPIRA NC[®] RX PTCA Dilatation Catheter is also indicated for post-delivery expansion of balloon expandable stents.



Note: In vitro testing was performed with the EMPIRA NC $^{\circ}$ RX PTCA

Dilatation Catheter and with commercially available Cordis balloon-expandable stents. Caution should be taken when using this device with stents of other manufacturers, due to stent design differences.

Contraindications

- Unprotected left main coronary artery lesions.
- Coronary artery spasm in the absence of a significant stenosis.

Warnings

- Use extreme caution and careful judgment in patients for whom anticoagulation is contra-indicated.
- The catheter is supplied STERILE. Do not use if the sterile barrier is damaged.
- For single patient use only. Do not reuse, reprocess or re-sterilize. Reuse, reprocessing or re-sterilization may compromise the structural integrity of the device and/ or lead to device failure, which in turn, may result in increased risk of cross contamination, patient injury, illness or death.
- To reduce the potential for vessel damage, the inflated diameter of the balloon should approximate the diameter of the vessel just proximal and distal to the stenosis.
- PTCA in patients who are not acceptable candidates for coronary artery bypass graft surgery requires careful consideration, including possible hemodynamic support during the procedure, as treatment of this patient population carries special risk.
- When the catheter is exposed to the vascular system, it should be manipulated while using high-quality fluoroscopy. Do not advance or retract the catheter unless the balloon is fully deflated by vacuum. If resistance is felt during manipulation, determine the cause of the resistance before proceeding.

- Balloon pressure should not exceed the rated burst pressure. The rated burst pressure is based on the results of in vitro testing. At least 99.9% of the balloons (with a 95% confidence), will not burst at or below their rated burst pressure. Use of a pressure monitoring device is recommended to prevent over pressurization.
- PTCA should only be performed at hospitals where emergency coronary artery bypass graft surgery can be quickly performed in the event of a potentially injurious or life-threatening complication.
- To reduce the potential for air embolus into the vessel, use 50% solution of contrast medium diluted with sterile heparinized-saline.
- During withdrawal of the PTCA catheter, hold a heparinizedsaline soaked gauze around the exposed catheter shaft and pull the catheter through the gauze to remove blood or any other residues.
- Care should be taken when handling the distal part of the catheter (including the balloon) to prevent damages and prematurely removing balloon cover.

Precautions

- Prior to angioplasty, the catheter should be examined to verify functionality and ensure that its size and shape are suitable for the specific procedure for which it is to be used.
- The compatibility of the device has not been evaluated for the delivery of materials (e.g., drugs, alcohol or stem cells) through the guidewire lumen, other than those required for normal use.
- The catheter system should be used only by physicians trained in the performance of PTCA.
- Appropriate anticoagulant/anti-platelet therapy should be used during this procedure.
- Prior to insertion or withdrawal of the PTCA catheter, wipe the guidewire with heparinized-saline soaked gauze to remove blood or residues thus providing better catheter movement over the guidewire.

- Care should be taken to control the position of the guide catheter tip during manipulation of the balloon catheter.
- Use the catheter before the "Use By" date specified on the package.
- The safety and effectiveness of this PTCA balloon catheter for the treatment of in-stent restenosis (ISR) has not been established.

Please refer to the Instructions for Use for complete information, including Adverse Events.

EXOSEAL® Vascular Closure Device

Indication for Use

The EXOSEAL® Vascular Closure Device is indicated for femoral artery puncture site closure, reducing times to hemostasis and ambulation in patients who have undergone diagnostic or interventional catheterization procedures using a standard 5F, 6F, or 7F vascular sheath introducer with up to a 12 cm working length. Additionally, the EXOSEAL® Vascular Closure Device is indicated to reduce times to hemostasis and ambulation in patients who have undergone interventional catheterization procedures, using a standard 6F vascular sheath introducer up to a 12 cm working length, who have received preprocedural and/or intraprocedural glycoprotein (GP) Ilb-Illa inhibitor therapy.

Contraindications

There are no contraindications to the use of this device. Attention is drawn to the Warnings, Precautions, and Special Patient Populations.

Warnings

• Do not use the EXOSEAL[®] Vascular Closure Device if the package is damaged or any portion of the package has been previously opened.



- Do not use the EXOSEAL® Vascular Closure Device if the device appears damaged or defective in any way.
- Do not use the EXOSEAL® Vascular Closure Device if the sterile field has been broken where bacterial contamination of the sheath or surrounding tissues may have occurred; a broken sterile field may result in infection.
- For SINGLE USE ONLY. Do not re-sterilize or reuse. Reuse, reprocessing, or re-sterilization may compromise the structural integrity of the device and/or lead to device failure, which in turn may result in patient injury, illness, or death. Use aseptic technique when handling the product.
- Do not use the EXOSEAL® Vascular Closure Device in patients with known allergy to polyglycolic acid.

Precautions

- Serious adverse events might result with the use of the EXOSEAL® Vascular Closure Device in vessels not suitable for the use of the device. Avoid the use of the EXOSEAL® Vascular Closure Device in patients with arteriotomies created in areas of calcified plaque or in vessels with diameters < 5mm.
- With antegrade puncture (restricted to peripheral vascular catheterization procedures), the ability to accurately assess vessel size or extraluminal device position may be limited.
- The EXOSEAL® Vascular Closure Device procedure should be performed by physicians who have expertise in the techniques of vascular catheterization (or other health care professionals authorized by, or under the direction of, such physicians) and possess adequate training in the use of the device, eg, participation in an EXOSEAL® Vascular Closure Device training program.
- Observe sterile technique at all times when using the EXOSEAL® Vascular Closure Device. Employ proper groin management post-procedure and posthospital discharge to prevent infection.

- The vascular sheath introducer and/or EXOSEAL® Vascular Closure Device should not be advanced or withdrawn when resistance is met without first determining the cause by fluoroscopic examination. Using excessive force to advance or torque the EXOSEAL® Vascular Closure Device may lead to arterial damage and/or breakage of the device, which may necessitate interventional and/or surgical removal of the device and arterial repair.
- If for any reason it is desired to abort the procedure once the EXOSEAL® Vascular Closure Device has been introduced into the bloodstream, remove the EXOSEAL® Vascular Closure Device and vascular sheath introducer as a unit. Do not attempt to withdraw the EXOSEAL® Vascular Closure Device from the vascular sheath introducer, as Plug dislodgement may occur.
- Pulsatile flow is necessary for proper positioning. If pulsatile flow is not observed from the Bleed-Back Indicator, discontinue the procedure.
- Do not remove the EXOSEAL® Vascular Closure Device from the vascular sheath introducer after removal from the patient; discard the EXOSEAL® Vascular Closure Device with the Delivery Shaft still locked inside the vascular sheath introducer.
- In patients undergoing interventional endovascular procedures, ambulation less than 2 hours after EXOSEAL® Vascular Closure Device use increases the risk of oozing or re-bleeding after initial hemostasis and should be done only after all clinical factors have been considered.

Special Patient Population

The safety and effectiveness of the EXOSEAL® Vascular Closure Device has not been established in the following patient populations:

 Patients with acure ST-elevation myocardial infarction ≤ 48 hours prior to the cardiac or peripheral catheterization

- Patients with uncontrolled hypertension at time of closure (BP ≥180/110 mmHg)
- Patients who bruise or bleed easily or with a history of significant bleeding or platelet disorders, such as thrombocytopenia (with < 100,000 platelet count), Von Willebrand's disease, anemis (Hgb < 10 g/dL, Hct < 30%), thrombasthenia, decreased fibrinogen (<200 mg/ dl), and Factory V deficiency
- Patients with prior femoral vascular surgery or vascular graft in region of access site
- Patients with pre-existing systemic or cutaneous infection
- Patients who are known to be pregnant or who are lactating
- Patients on thrombolytic (e.g. streptokinase, urokinase, t-PA) ≤ 24 hours prior to the catheterization procedure
- Patients on Angiomax (bivalirudin) or other thrombinspecific anticoagulants or low molecular weight heparin ≤ 24 hours prior to the cardiac or peripheral catheterization procedure
- Patients with a BMI > 40 Kg/m2
- Patients with symptomatic leg ischemia in the target vessel limb including severe claudication (30.48 meters / < 100 feet) or weak/absent pulse
- Patients with planned arterial access at the same access site ≤ 30 days following the femoral artery closure procedure
- Patients undergoing arterial puncture in the femoral artery or both legs
- Patients with prior target artery closure with any closure device, or closure with manual compression ≤ 30 days prior to the cardia or peripheral catheterization procedure
- Patients with prior or recent use of an intra-aortic balloon pump through the arterial access site
- Patients with evidence of a preexisting hematoma, arteriovenous fistula, or pseudoaneurysm at the access site prior to start of femoral artery closure procedure



- Patients with a tortuous targeted femoral artery
- Patients who within ≤ 1 cm of the puncture site have fluoroscopically visible calcium, atherosclerotic disease, or a stent
- Patients with a targeted femoral artery diameter stenosis ≥ 50%
- Patients with arteriotomies in vessels with diameters < 5mm
- Patients where there is difficulty in obtaining vascular access resulting in multiple arterial punctures and/or posterior arterial puncture
- Patients with antegrade puncture
- Heparinized patients with elevated pre-closure ACT level: 250 seconds with GP IIb/Illa inhibitor, > 300 seconds without GP IIb/Illa inhibitor
- Patients experiencing cardiogenic shock (hemodynamic instability requiring intravenous medications or mechanical support) during or immediately post-catheterization

Please refer to the Instructions for Use for complete information, including Adverse Events.

7F HIGHFLOW[™] Diagnostic Catheter, INFINITI[®] Diagnostic Catheter, TEMPO AQUA[®] Diagnostic Catheter

Indications

Cordis catheters are designed to deliver radiopaque contrast medium to selected sites in the vascular system.

Contraindications

None known.

Warnings

• Discard catheters after one procedure. Structural integrity and/or function may be impaired through reuse or cleaning. All parts are extremely difficult to

clean after exposure to biological materials and may cause adverse patient reactions if reused.

- Do not expose to organic solvents.
- Do not use with Ethiodol[™] or Lipiodol[™] contrast media, or other such contrast media which incorporates the components of these agents.
- Do not exceed maximum pressure rating printed on product label and hub.

Precautions

- Store in a cool, dark, dry place.
- Do not use if package is open or damaged.
- Do not use the catheter if the "Use By" date on the package label has expired.
- Do not re-sterilize.
- Exposure to temperatures above 54°C (130°F) may damage the catheter.
- To prevent damage to the catheter tip during removal from the package, grasp the hub and withdraw the catheter.
- Exercise care when removing guidewires from multiplecurve catheters.
- To prevent kinking of 5F (1.65 mm) and smaller angiographic catheters, and specifically the 4F (1.35 mm) INFINITI® pigtail catheters:
- Straighten the pigtail catheter tip only with a diagnostic guidewire or, if applicable, with a tip straightener. Do not straighten by hand.
- Use a guidewire when introducing the catheter through the catheter sheath introducer (CSI) and into the left ventricle.
- Treat all 4F (1.35 mm) catheters and smaller French sizes with ultimate care. The performance of these products may be impaired if not properly and cautiously handled during unpacking and preparation.
- Before use, flush all devices entering a blood vessel with sterile heparinized saline or a similar isotonic solution.

- Keep the catheter filled with either flushing solution or contrast medium while the catheter is in the vascular system and consider the use of systemic heparinization.
- Forcibly aspirate and flush the catheter with heparinized saline solution at least once every two minutes.

Complications

Procedures requiring percutaneous catheter introduction should not be attempted by physicians unfamiliar with the possible complications. Complications may occur at any time during or after the procedure.

Possible complications include, but are not limited to the following:

- air embolism
- hematoma at the puncture site
- infection
- perforation of the vessel wall

MOZEC[™] RX PTCA Balloon Dilatation Catheter

Indications

The MOZEC[™] Rx PTCA Balloon Dilatation Catheter is indicated for balloon dilatation of the stenotic portion of a coronary artery or bypass graft stenosis for the purpose of improving myocardial perfusion.

The MOZEC[™] Rx PTCA Balloon Dilatation Catheter (balloon models 2.25nun to 4.50nun) is also indicated for post-delivery expansion of balloon expandable stents.

Note: Bench testing was conducted with the MOZEC[™] Rx PTCA Balloon Dilatation Catheter and marketed balloon expandable stents (viz. Medtronic Integrity and Abbott's Multi Link Stents). Consideration should be taken when this device is used with different manufacturer's stents due to differences in stent design. All stents should



be deployed in accordance with the manufacturer's indications and instructions for use.

Contraindications

Unprotected left main coronary artery lesion. Coronary artery spasm in the absence of a significant stenosis. Patients with a contraindication for anti-platelet/ anticoagulant therapy.

Warnings

- For single patient use only. Do not reuse, reprocess or re-sterilize. Reuse, reprocessing or re-sterilization may compromise the structural integrity of the device and/ or lead to device failure which, in tum, may result in patient injury, illness or death.
- Reuse, reprocessing or re-sterilization may also create a risk of contamination of the device and/ or cause patient infection or cross-infection, including, but not limited to the transmission of infectious disease(s) from one patient to another. Contamination of the device may lead to injury, illness or death of the patient.
- PTCA should only be performed at hospitals where emergency coronary artery bypass graft surgery can be quickly performed in the event of a potentially injurious or life-threatening complication.
- Since use of this device carries the associated risk of sub-acute thrombosis, vascular complications and/ or bleeding events, judicious selection of patients is necessary.

Note: Animal testing in canines showed thrombus formation along the catheter length when anticoagulation was not used.

• PTCA in patients who are not acceptable candidates for coronary artery bypass graft surgery requires careful consideration, including potential haemodynamic support during the procedure, as treatment of this patient population carries special risk.

- Guiding catheters used must have lumen sizes that are suitable to accommodate the introduction of MOZEC™ Rx PTCA Balloon Dilatation Catheter.
- Do not use if the inner package is open or damaged. Carefully remove the PTCA catheter from the pouch to prevent damage and premature removal of the balloon cover.
- To reduce the potential for air embolus into the vessel, use only the recommended balloon inflation medium. Never use air or any gaseous medium to inflate the balloon.
- When the catheter is exposed to the vascular system, it should be manipulated while under high-quality fluoroscopic observation. Do not advance or retract the catheter unless the balloon is fully deflated under vacuum. If resistance is felt during manipulation, determine the cause of the resistance before proceeding.
- Balloon pressure should not exceed the rated burst pressure. The rated burst pressure is based on the results of in vitro testing. At least 99.9 percent of the balloons, (with a 95 percent confidence) will not burst at or below their rated burst pressure. Use of a pressure monitoring device is recommended to prevent over pressurization.
- To reduce the potential for vessel damage, the inflated diameter of the balloon should approximate the diameter of the vessel just proximal and distal to the stenosis.

Precautions

- Prior to angioplasty, examine the PTCA catheter to verify functionality. Ensure that its size and shape are suitable for the specific procedure for which it is to be used.
- Only the physicians trained in the performance of PTCA should use the catheter system. Appropriate anticoagulant/anti-platelet and vasodilator therapy should be used during the procedure.

- Prior to reinsertion or withdrawal of the PTCA catheter, wipe the guide wire with saline-soaked gauze to remove blood or other residues.
- After the procedure, anticoagulant therapy should be continued as recommended by the physician. Use the catheter before the "Use by" date specified on the package.

Adverse Events

Potential adverse events, which may be associated with the use of the MOZEC[™] Rx PTCA Balloon Dilatation Catheter, include but are not limited to:

- Acute myocardial infarction Acute vessel closure
- Allergic reactions to anti-coagulant and /or antithrombotic therapy/ contrast medium Arrhythmia, including ventricular fibrillation (VF)
- Arteriovenous fistula Coronary embolism Coronary artery spasm Coronary aneurysm
- Coronary vessel dissection/injury/perforation/rupture
 Death
- Emergency or non-emergent Coronary Artery Bypass Graft Surgery Hematoma or Hemorrhage
- Hypotension I Hypertension
- Infection and / or pain at the access site Restenosis of treated segment
- Total occlusion of coronary artery/bypass graft Unstable angina pectoris
- Stroke, air embolism and embolization or fragmentation of thrombotic or atherosclerotic material

Please refer to the Instructions for Use for complete information.



MOZEC[™] NC RX PTCA Balloon Dilatation Catheter

Indications

The MOZEC[™] NC Rx PTCA Balloon Dilatation Catheter is indicated for balloon dilatation of the stenotic portion of a coronary artery or bypass graft stenosis for the purpose of improving myocardial perfusion. The MOZEC [™] NC Rx PTCA Balloon Dilatation Catheter is also indicated for postdelivery expansion of balloon expandable stents.

Note: Bench testing was conducted with the MOZEC[™] NC Rx PTCA Balloon Dilatation Catheter and marketed balloon expandable stents (viz. Medtronic Integrity, Boston Scientifics Liberte & Abbott's Multi Link Stents). Consideration should be taken when this device is used with different manufacturer's stents due to differences in stent design. All stents should be deployed in accordance with the manufacturer's indications and instructions for use.

Contraindications

- Unprotected left main coronary artery lesion.
- Coronary artery spasm in the absence of a significant stenosis.

Warnings

- For single patient use only. Do not reuse, reprocess or re-sterilize. Reuse, reprocessing or re-sterilization may compromise the structural integrity of the device and/ or lead to device failure which, in turn, may result in patient injury, illness or death.
- Reuse, reprocessing or re-sterilization may also create a risk of contamination of the device and/ or cause patient infection or cross-infection, including, but not limited to the transmission of infectious disease(s) from one patient to another. Contamination of the device may lead to injury, illness or death of the patient.

- PTCA should only be performed at hospitals where emergency coronary artery bypass graft surgery can be quickly performed in the event of a potentially injurious or life-threatening complication.
- PTCA in patients who are not acceptable candidates for coronary artery bypass graft surgery requires careful consideration, including potential haemodynamic support during the procedure, as treatment of this patient population carries special risk.
- Guiding catheters used must have lumen sizes that are suitable to accommodate the introduction of MOZEC[™] NC Rx PTCA Balloon Dilatation Catheter.
- Do not use if the inner package is open or damaged. Carefully remove the PTCA catheter from the pouch to prevent damage and premature removal of the balloon cover.
- To reduce the potential for air embolus into the vessel, use only the recommended balloon inflation medium. Never use air or any gaseous medium to inflate the balloon.
- When the catheter is exposed to the vascular system, it should be manipulated while under high-quality fluoroscopic observation. Do not advance or retract the catheter unless the balloon is fully deflated under vacuum. If resistance is felt during manipulation, determine the cause of the resistance before proceeding.
- Balloon pressure should not exceed the rated burst pressure. The rated burst pressure is based on the results of in vitro testing.
- At least 99.9 percent of the balloons, (with a 95 percent confidence) will not burst at or below their rated burst pressure. Use of a pressure monitoring device is recommended to prevent over pressurization.
- To reduce the potential for vessel damage, the inflated diameter of the balloon should approximate the diameter of the vessel just proximal and distal to the stenosis.

Precautions

- Prior to angioplasty, examine the PTCA catheter to verify functionality. Ensure that its size and shape are suitable for the specific procedure for which it is to be used.
- Only the physicians trained in the performance of PTCA should use the catheter system.
- Appropriate anticoagulant/anti-platelet and vasodilator therapy should be used during the procedure.
- The safety and effectiveness of this PTCA balloon catheter for the treatment of ISR has not been established.
- Prior to reinsertion or withdrawal of the PTCA catheter, wipe the guide wire with saline-soaked gauze to remove blood or other residues.
- After the procedure, anticoagulant therapy should be continued as recommended by the physician.
- Use the catheter before the "Use by" date specified on the package.

Adverse Events

Potential adverse events, which may be associated with the use of the Mozec[™] NC - Rx PTCA Balloon Dilatation Catheter, include but are not limited to:

- Acute myocardial infarction
- Acute vessel closure
- Allergic reactions to anti-coagulant and /or antithrombotic therapy/ contrast medium
- Arrhythmia, including ventricular fibrillation (VF)
- Arteriovenous fistula
- Coronary embolism
- Coronary artery spasm
- Coronary aneurysm
- Coronary vessel dissection/injury/perforation/rupture
- Death
- Emergency or non-emergent Coronary Artery Bypass Graft Surgery
- Hematoma or Hemorrhage
- Hypotension / Hypertension



- Infection and / or pain at the access site
- Restenosis of treated segment
- Total occlusion of coronary artery/bypass graft
- Unstable angina pectoris
- Stroke, air embolism and embolization or fragmentation of thrombotic or atherosclerotic material

Please refer to the Instructions for Use for complete information.

MYNX CONTROL[™] VCD

Indications for Use:

The MYNX CONTROL VCD is indicated for use to seal femoral arterial access sites while reducing times to hemostasis and ambulation in patients who have undergone diagnostic or interventional endovascular procedures utilizing a 5F, 6F or 7F procedural sheath.

Contraindications

There are no known contraindications for the MYNX CONTROL VCD.

Warnings

Do not use if components or packaging appear to be damaged or defective or if any portion of the packaging has been previously opened. DO NOT REUSE OR RE-STERILIZE. The MYNX CONTROL VCD is for single use only. The catheter is loaded with a single Hydrogel sealant. Reuse of the device would result in no delivery of Hydrogel sealant. Do not use the MYNX CONTROL VCD if the puncture site is located above the most inferior border of the inferior epigastric artery (IEA) and/or above the inquinal ligament based upon bony landmarks, since such a puncture site may result in a retro-peritoneal hematoma/bleed. Perform a femoral angiogram to verify the location of the puncture site. Do not use the MYNX CONTROL VCD if the puncture is through the posterior wall or if there are multiple punctures, as such punctures may result in a retro-peritoneal hematoma/bleed.

Precautions

The MYNX CONTROL VCD should only be used by a trained licensed physician or healthcare professional. The MYNX CONTROL VCD should not be used in patients with a known allergy to PEG.

Potential Adverse Events

See IFU for a list of Potential Adverse Events.

MYNXGRIP® Vascular Closure Device

Indications For Use

The MYNXGRIP® Device is indicated for use to seal femoral arterial and femoral venous access sites while reducing times to hemostasis and ambulation in patients who have undergone diagnostic or interventional endovascular procedures utilizing a 5F, 6F or 7F procedural sheath.

Precautions

The MYNXGRIP® Device should only be used by a trained licensed physician or healthcare professional. The MYNXGRIP® Device should not be used in patients with a known allergy to PEG.

Warnings

Do not use if components or packaging appear to be damaged or defective or if any portion of the packaging has been previously opened. DO NOT REUSE OR RE-STERILIZE. The MYNXGRIP® Device is for single use only. The balloon catheter is loaded with a single hydrogel sealant. Reuse of the device would result in no delivery of hydrogel sealant. Do not use the MYNXGRIP® Device if the puncture site is located above the most inferior border of the inferior epigastric artery (IEA) (for arterial application) and/or above the inguinal ligament based upon osseus landmarks, since such a puncture site may result in a retro-peritoneal hematoma/bleed. Perform a femoral angiogram or venogram to verify the location of the puncture is through the posterior wall or if there are multiple punctures, as such punctures may result in a retro-peritoneal hematoma/bleed.

Potential Adverse Events

In addition to the complications noted in the MYNX[®] Device clinical trial, the following potential complications, which may be related to the endovascular procedure or the vascular closure, may occur:

- allergic reaction
- ecchymosis
- superficial vein thrombosis
- foreign body/local reaction
- retro-peritoneal bleed
- vessel occlusion
- pulmonary embolism
- death

Please refer to the Instructions for Use for complete information, including Adverse Events.

RAILWAY® Sheathless Access System

Indications

The RAILWAY[®] Sheathless Access System is indicated for use in radial arterial procedures requiring percutaneous introduction of intravascular devices.

Contraindications

Avoid the use of the RAILWAY® Sheathless Access System in vasculature with extreme tortuosity, calcified plaque or thrombus.

Radial access is contraindicated in patients with:

- Inadequate circulation to the extremity as evidenced by signs of artery occlusion or absence of radial pulse.
- Hemodialysis shunt, graft or arterio-venous fistula involving the upper extremity vasculature.



Warnings

- Prior to radial access procedures, it is recommended to verify adequate collateral flow through the ulnar artery, such as with an Allen test. If collateral blood supply to the hand is considered inadequate, an alternate access site should be considered.
- Do not use Ethiodol or Lipiodol** contrast media, or other such contrast media which incorporates components of these agents, as solvents used in these media may have a deleterious effect on the device.
- For the Introcan SafetyR IV Catheter* needle, do not reinsert the needle into the IV catheter at any time. The needle could damage the IV catheter, resulting in an IV catheter embolus.
- If using a hydrophilic wire, do not use with a bare needle or metal torque device, as this may damage the integrity of the coating.
- Use of alcohol, antiseptic solutions, or other solvents should be avoided, as they may adversely affect the device.
- Manipulate the mini-guidewire slowly and carefully to avoid damage to the vessel wall, while monitoring tip position and movement under fluoroscopy.
- Failure to follow the procedural steps when exchanging a guiding catheter may result in loss of vessel access.
- Do not manually re-shape the distal tip of the dilator or the mini-guidewire by applying external force intended to bend or affect the shape of the dilator or miniguidewire.
- The dilator must only be advanced while over a guidewire. Advancing the dilator without a wire in place may cause vascular complications.
- Persons with allergic reactions to nickel may suffer an allergic response to components of this device.

Precautions

• This product is intended for use by professionals who have been trained to perform coronary diagnostic and interventional procedures.

- This product is intended to be used under fluoroscopic guidance.
- Use the product immediately after opening the package.
- Store in a cool, dark, dry place.
- Prior to use, confirm that the vessel dilator size is appropriate for the access vessel, guiding catheter and with any other accessories to be used.
- The entire procedure, from skin stick to product removal, must be performed aseptically.
- Do not use if package is open or damaged.
- Do not alter this product.
- Use prior to "Use By" date.
- This product is intended for radial arterial access and tracking up to, but not beyond, the subclavian artery only. No data has been collected to demonstrate the safety and effectiveness of this product for use as a diagnostic or interventional device.
- If the device becomes kinked or increased resistance is felt upon insertion or advancement of the vessel dilator, investigate the cause before continuing. If the cause of the resistance cannot be determined and corrected, discontinue the procedure and withdraw the vessel dilator.
- If increased resistance is felt upon withdrawal of the vessel dilator, investigate the cause before continuing, as excessive force during vessel dilator withdrawal can cause product damage or vascular complications.
- During the procedure, provide a proper anticoagulant or anti-platelet therapy to the patient.

RAIN Sheath[™] Transradial Thin-Walled Introducer

Indications

• RAIN Sheath[™] Transradial is indicated to facilitate placing a catheter through the skin into a radial artery.

Contraindications

• None Known

Warnings

- Use of alcohol, antiseptic solutions, or other solvents should be avoided, as they may adversely affect the device.
- For the Introcan Safety® IV Catheter* needle, do not reinsert the needle into the IV catheter at any time. The needle could damage the IV catheter, resulting in an IV catheter embolus.
- Do not leave the CSI in place for extended periods of time without a catheter in place.
- If using a hydrophilic wire, do not use with a bare needle, as this may damage the integrity of the coating.
- Manipulate the mini-guidewire slowly and carefully to avoid damage to the vessel wall, while monitoring the tip position and movement using standard catheterization technique.
- Once the vessel dilator is removed, manipulate the sheath introducer slowly and carefully to minimize the chances of kinking.
- Persons with allergic reactions to nickel may suffer an allergic response to components of this device.
- During the procedure, provide a proper anticoagulant or anti-platelet therapy to the patient.
- Do not use power injector for contrast media injection from the side port.
- Prior to radial access procedures, it is recommended to verify adequate collateral flow through the ulnar artery, such as with an Allen test. If collateral blood supply to



the hand is considered inadequate, an alternate access site should be considered.

• Do not manually re-shape the tip of the mini-guidewire by applying external force intended to bend or affect the shape of mini-guidewire.

Precautions

- For single use only. Do not re-process or re-sterilize. Reuse of this product, including after reprocessing and/ or re-sterilization, may cause a loss of structural integrity which could lead to a failure of the device to perform as intended and may lead to a loss of critical labeling/ use information all of which present a potential risk to patient safety.
- Store in a dry, dark, cool place.
- Do not use if package is open or damaged.
- Use prior to the "use by" date.
- Prior to use, confirm that the sheath size is appropriate for the access vessel to be used.
- The entire procedure, from skin stick to product removal, must be performed aseptically.
- Remove the product from the packaging tray with care to avoid damage to the sheath.
- If resistance is felt upon insertion or withdrawal, investigate the cause before continuing.
- Do not pull the side port with excessive force.
- This product is intended to be used by a trained professional using a standard catheterization technique.
- Use the product immediately after opening the package.
- Do not flush liquid such as contrast media or heparinized saline solution from side tube while a device such as a dilator or a catheter is inside of the sheath.
- Do not inject drugs including oil components such as lipid emulsion, castor oil, interfacial active agent or solubilization agent such as alcohol, through the side tube. It may cause cracks on the stopcock.
- Be careful not to cut the side tube when holding it with forceps, or not to cut with scissors and knives.

- Do not pinch the plastic cannula and/or the side tube with forceps. It may cause scratches on it. Attention should be paid not to damage the plastic cannula with forceps or sharp edged tools.
- Do not scratch the sheath with needle point, cutting tool, or other edged tools.
- Do not incline a guide wire and / or a catheter while inserting them via the valve of the sheath
- Please refer to the Instructions For Use for complete information, including indications, precautions, warnings, and potential adverse events.

Standard Biopsy Forceps

Indications

The Cordis biopsy forceps are designed for endomyocardial biopsies.

Contraindications

None known.

Clinical History

These instructions are based on experience gathered to date.

The physician may wish to vary the procedure in accordance with clinical judgment.

Warnings

Discard forceps after completing one procedure. Structural integrity and/or function may be impaired through reuse or cleaning. Forceps are extremely difficult to clean after exposure to biological material and may cause adverse patient reactions if reused.

Precautions

• The forceps should be thoroughly rinsed with heparinized saline before and after each biopsy during the procedure.

- The heart should be routinely monitored by ECG during the procedure.
- Use prior to the "Use By" date.
- Do not use if the inner package is open or damaged.
- Consider the use of systemic heparinization.
- If strong resistance is met during manipulation, discontinue the procedure and determine the cause of resistance before proceeding. If the cause of resistance cannot be determined, withdraw the forceps.
- Store in a cool, dark, dry place.

Complications

Procedures requiring biopsy forceps should not be attempted by physicians unfamiliar with the possible complications. Complications may occur at any time during or after the procedure.

Possible complications include, but are not limited to:

- hematoma at the puncture site
- infection
- perforation of the vessel wall or the myocardium
- vessel trauma
- embolism
- death

Please refer to the Instructions for Use for complete information, including Adverse Events.



SUPER TORQUE® Diagnostic Catheter

Indications

Cordis Angiographic Catheters with Marker Bands are designed to provide angiographic visualization and linear measurement of the vasculature when combined with the delivery of radiopaque contrast media to selected sites in the vascular system.

Contraindications

None known.

Warnings

- Failure to observe these instructions may result in damage, breakage or separation of the catheter or the markerbands, which may necessitate additional intervention.
- Manipulation of the catheter under excessive friction due to interaction with other devices or while trapped in the vasculature, can lead to stretching or elongation of the catheter.
- Stretching or elongation of the catheter during endovascular procedures could result in the marker bands moving along the catheter. In extreme cases, marker bands may come off the catheter and dislodge into the vascular system.
- This product is designed and intended for single use. It is not designed to undergo reprocessing and re-sterilization after initial use. Reuse of this product, including after reprocessing and/or re-sterilization, may cause a loss of structural integrity which could lead to a failure of the device to perform as intended and may lead to a loss of critical labeling/use information all of which present a potential risk to patient safety.
- Do not expose to organic solvents.
- Do not exceed maximum pressure rating printed on label and hub.

Precautions

- Avoid entrapment of the catheter between other endovascular devices and the vessel wall.
- Avoid excessive friction on the catheter; avoid simultaneous introduction of the catheter and aortic graft devices through the same sheath.
- Store in cool, dark, dry place.
- Do not use if the package is open or damaged.
- Do not use the catheter if the "Use By" date on the package label has expired.
- Do not re-sterilize.
- Exposure to temperatures above 54°C (130°F) may damage the catheter.

Complications

Procedures requiring percutaneous catheter introduction should not be attempted by physicians unfamiliar with the possible complications. Complications may occur at any time during or after the procedure. Possible complications include, but are not limited to, the following: air embolism, hematoma at the puncture site, infection, thrombosis, hemorrhage, dissection, perforation or other damage of the vessel wall. Movement of the marker bands along the catheter can result in inaccurate reference and device sizing. Dislodgement of the marker bands into the vascular system can result in additional intervention, embolism, thrombosis or other vascular complications.

Please refer to the Instructions for Use for complete information, including Adverse Events.

TRYTON Side Branch Stent

Indications

The TRYTON Side Branch Stent is indicated for improving the side branch luminal diameter of de novo native coronary artery bifurcation lesions (Medina Classification 1.1.1; 0.1.1; 1.0.1) with a side branch diameter stenosis of \geq 50% and a lesion length \leq 5.0 mm, along with reference vessel diameters \geq 2.5 mm to \leq 3.5 mm in the side branch and \geq 2.5 mm to \leq 4.0 mm in the main branch.

The device is intended for use in conjunction with commercially available balloon expandable drug-eluting coronary stents in the main branch.

Contraindications

The TRYTON Side Branch Stent is contraindicated in the following conditions or uses:

- Vessels that are totally occluded
- Vessels that have moderate to severe calcification
- Target lesions that have excessive tortuosity unsuitable for stent delivery and deployment
- Angiographic evidence of thrombus in the target vessel
- Lesions in which complete angioplasty balloon inflation cannot be achieved during pre-dilatation
- TRYTON Stent placement without angioplasty predilatation of the main branch and side branch (i.e., direct stenting is contraindicated)
- TRYTON Stent placement alone, without implantation of a main branch stent
- An untreated significant (> 50%) stenosis proximal or distal to the main branch or side branch target lesion
- Impaired runoff in the treatment vessel with diffuse distal disease
- Ejection fraction $\leq 30\%$
- Impaired renal function (creatinine >2.0 mg/dl or 150mmol/l)
- Platelet count <100,000 cells/mm3 or >700,000 cells/ mm3, a WBC of <3,000 cells/mm3, or documented or suspected liver disease (including laboratory evidence of hepatitis)
- Presence of a heart transplant
- Known allergy to cobalt chromium



- Hypersensitivity or contraindication to cobaltchromium or structurally-related compounds, cobalt, chromium, nickel, or tungsten
- Anticipated use of rotational atherectomy
- Patients in whom the use of a drug eluting stent is contraindicated, e.g., who cannot receive the recommended dual anti-platelet (aspirin and an approved P2Y12 Inhibitor) and/or anticoagulation therapy

Warnings

- Use of the TRYTON Side Branch Stent in appropriately sized main vessels and side branches is required for safe and effective performance of the device.
- Do not use the TRYTON Stent in small side branches [<2.50 mm in diameter by visual assessment or <2.25 mm in diameter by quantitative coronary angiography (QCA)], as its use may lead to an increased risk of adverse cardiac events such as myocardial infarction and the need for repeat revascularization. To confirm appropriately-sized side branch diameters, the diameter of the pre-dilation balloon inflated to nominal pressure may be used as a reference. Alternatively, the use of quantitative imaging methods such as on-line quantitative coronary angiography, intravascular ultrasound or optimal coherence tomography should be considered.

Use of the TRYTON Side Branch Stent, as with percutaneous coronary stent implantation procedures in general, is known to be associated with the following risks:

- Vessel thrombosis
- Increased length of hospital stay relative to those of coronary balloon angioplasty alone. Judicious selection of patients to receive this device rather than balloon angioplasty alone is strongly advised.
- Infection secondary to contamination of the stent may lead to thrombosis, pseudoaneurysm or rupture.

- The stent may cause spasm, distal embolization, thrombus, or could migrate from the site of implantation. Excessive dilatation of the artery may cause vessel rupture and life-threatening bleeding.
- Stents may not be fully expanded during deployment, particularly in resistant lesions.
- Stent dislodgment from the balloon surface during deployment and/or dislodgment from the target site post-deployment can occur.
- Major bleeding.

Precautions

- Side branch pre-dilatation is required and should only be performed with an angioplasty balloon appropriate for a vessel ≥2.5 mm in diameter by visual assessment or ≥2.25 mm in diameter by QCA, inflated to nominal pressure.
- Following pre-dilation, angiography should be performed following the administration of intracoronary nitroglycerin to reassess vessel dimensions with attention to the side branch reference vessel diameter (RVD) to ensure that it is of appropriate size. The side branch RVD should be based on the most angiographic normal-appearing segment distal to the lesion.
- Use of this product should be performed only in hospitals with access to emergency coronary artery bypass graft surgery that can be performed quickly in the event of a potentially injurious or life-threatening complication.
- All TRYTON Side Branch Stent/Stent Delivery Systems are intended for single use only. Under no circumstances should this device or any part thereof be re-sterilized or reused. Reuse may result in device malfunction and subsequent patient complications and/or adverse events.
- All equipment required for the implantation of this stent must be carefully examined prior to use to verify proper function.

- Special care should be taken not to disrupt the stent on the delivery catheter, particularly during removal from its packaging, placement over guidewire, and advancement through hemostasis valve and guiding catheter.
- When the delivery catheter is exposed to the vascular system, it should be manipulated while under highquality fluoroscopic observation. If resistance is met during manipulation, determine the cause of the resistance before proceeding. Excessive manipulation may cause dislodgment of the stent from the delivery catheter or vessel damage.
- For deployment of the stent, use a mixture of radiographic contrast media and sterile saline. Do not inflate the delivery system with air or any gaseous media.
- Balloon pressure should not exceed the rated burst pressure of the delivery catheter. Use of a pressure monitoring device is required to prevent over-pressurization.
- Do not attempt to reposition a partially deployed stent. Attempted repositioning may result in severe vessel damage.
- When recrossing a recently implanted stent, care should be taken to assure the guide wire is placed within the lumen and not in between the stent and the vessel wall. Otherwise, inadvertent dislodgment of the stent may occur leading to faulty positioning of the stent.
- Do not attempt to pull an unexpanded stent back into the guiding catheter, as stent damage or stent dislodgement may occur. Movement in and out through the distal end of the guiding catheter should not be performed as the stent may be damaged when retracting the undeployed stent back into the guiding catheter. To withdraw the TRYTON Side Branch Stent system, the entire system with the guiding catheter should be removed as a single unit.



- If a guide catheter extension is utilized to deliver/ position the TRYTON Stent and it becomes necessary to withdraw/remove an unexpanded TRYTON Stent/ Stent Delivery System, do not withdraw the TRYTON Stent/Stent Delivery System into the guide catheter extension. Withdrawal of the TRYTON Stent/Stent Delivery System into a guide catheter extension may cause dislodgement of the TRYTON Stent from the Stent Delivery System. Refer to procedure step #5 under Use of TRYTON Side Branch Stent/Stent Delivery System.
- Main branch artery preparation including predilatation, stent positioning and deployment should be completed following main branch stent instructions for use.
- Stent retrieval methods (use of additional wires, snares, and/or forceps) may result in additional trauma to the coronary vasculature and/or the vascular access site.
 Complications may include bleeding, hematoma or pseudoaneurysm.
- The TRYTON Side Branch Stent has not been evaluated in pediatric cases or cases of in-stent restenosis or previously stented lesions.

Please refer to the Instructions for Use for complete information.

VISTA BRITE TIP® Guiding Catheter

Indications

The guiding catheter is intended for use for intravascular introduction of interventional/diagnostic devices into the coronary or peripheral vascular systems.

Contraindications

None known for guiding catheters.

Warnings

Risk of reuse: This product is designed and intended for single use. It is not designed to undergo reprocessing

and re-sterilization after initial use. Reuse of this product, including after reprocessing and/or re-sterilization, may cause a loss of structural integrity which could lead to a failure of the device to perform as intended and may lead to a loss of critical labeling/use information all of which present a potential risk to patient safety.

Do not use with Ethiodol[™] or Lipiodol[™] contrast media, or other such contrast media which incorporates the components of these agents.

Precautions

- Store in a cool, dark, dry place.
- Do not use open or damaged packages.
- Use prior to the "Use By" date.
- Do not re-sterilize.
- Do not expose to organic solvents.
- Inspect the guiding catheter before use to verify that its size, shape and condition are suitable for the specific procedure.
- If strong resistance is met during manipulation, discontinue the procedure and determine the cause of the resistance before proceeding. If the cause of the resistance can not be determined, withdraw the catheter.
- Torquing the guiding catheter excessively while kinked may cause damage which could result in possible separation along the catheter shaft. Should the guiding catheter shaft become severely kinked, withdraw the entire system (guiding catheter, guidewire and catheter sheath introducer).
- Advancement, manipulation and withdrawal of the guiding catheter should always be performed under fluoroscopic guidance.
- Extreme care must be taken to avoid damage to the vasculature through which the guiding catheter passes. The guiding catheter may occlude smaller vessels. Care must be taken to avoid complete blood flow blockage.
- Large internal lumen guiding catheters require less force on the syringe during injection.

Complications

Procedures requiring percutaneous catheter introduction should not be attempted by physicians unfamiliar with the possible complications. Complications may occur at anytime during or after the procedure.

Possible complications include, but are not limited to the following:

- air embolism
- hematoma at the puncture site
- infection
- perforation of the heart
- vessel damage, dissection or perforation
- vasospasm
- ischemia
- hemorrhage
- arrhythmia
- reaction to contrast media
- death

Please refer to the Instructions for Use for complete information, including Adverse Events.

ZEPHYR® Vascular Compression Band

Indications for Use:

The ZEPHYR® Vascular Compression Band (VCB) is indicated for use by medical professionals to promote hemostasis following a catheterization or other puncture into a blood vessel in a patient's arm or leg, including: radial, brachial, dorsalis pedis, or tibial blood vessels, arterial or venous line or sheath removal, hemodialysis, and in anticoagulation therapy.



Caution

- The ZEPHYR VCB must be applied by a physician, nurse or technician experienced with vascular procedures. The patient must be checked regularly for arterial patency, bleeding, hematoma or thrombosis while the ZEPHYR VCB is in use.
- The ZEPHYR VCB should be used only for hemostasis of a puncture site on a patient's limb. Sterile or aseptic technique should be used.

Precautions

- Sterility of package contents is not guaranteed if the individual packages are previously damaged or opened. Only new, sterile ZEPHYR VCBs taken from factory-sealed pouches, should be used.
- The ZEPHYR VCB is a single-use, sterile device. Attempts to re-use or re-sterilize may result in device breakage or malfunction resulting in patient injury or infection. Do not use if the package has been opened or damaged.
- Do not use alcohol, disinfectants, or any other liquids with the ZEPHYR VCB or on the patient while the ZEPHYR VCB is being applied. The ZEPHYR VCB must be deployed onto a dry site.
- Federal (USA) law restricts this device to sale by or on the order of a physician.
- The ZEPHYR VCB deployment should be performed by physicians or physician-directed allied health care professionals with adequate training in the use of the device.
- Use caution when applying compression with the ZEPHYR VCB, taking care not to over-tighten it.

- Do not over-inflate the balloon. Over-inflation can result in balloon damage that compromises the performance of the ZEPHYR VCB.
- Only insert the nozzle of the syringe into the valve on the ZEPHYR VCB.
- Do not insert the nozzle of the syringe into a Luer connector or valve on a sheath or any other device.
- Do not inject any liquids into the ZEPHYR VCB balloon.
- Use caution if deploying the ZEPHYR VCB onto a patient with uncontrolled hypertension or systolic pressure of more than 180mmHg.
- When operating the syringe, control the plunger by pressing on the end at all times. Ensure correct placement, alignment and securement of the ZEPHYR VCB.
- Patients should not be left unattended while the ZEPHYR VCB is in use.
- Do not leave the ZEPHYR VCB on for inappropriately long periods of time as tissue damage may occur.
- Do not apply if the circumference of the wrist at the puncture site is too large or small, exceeding the size range of the ZEPHYR VCB.
- Instruct the patient not to touch or bump the ZEPHYR VCB or move their hand or wrist during compression.
- Monitor the patient during the compression period for bleeding, hematoma or thrombosis, and to ensure proper deployment and patent distal blood flow through the ulnar and radial arteries.

General Information



U.S. Headquarters

5452 Betsy Ross Drive Santa Clara, CA 95054 408-610-6500

Customer Service Center

Phone: 1.800.327.7714 (toll-free, continental U.S.) Fax: 800.997.1122

Attn: Customer Contact Center 14201 Northwest 60th Ave Miami Lakes, FL 33014

Technical Information

1.800.327.7714 (toll-free, continental US)

All orders should be directed to the Customer Service Center by fax, EDI, or telephone. The Customer Service Center is open weekdays (excluding US national holidays) between the hours of 7:30 AM and 9:00 PM EST/EDT. Emergency order service is also available 24 hours a day.

Terms

Net 30 days. Normal delivery second day A.R.O., F.O.B. shipping point with freight prepaid. Standing order shipments are F.O.B. shipping point with freight prepaid. Prices are subject to change without notice.

Disclaimer of warranty and limitation of remedy

There is no express or implied warranty, including any implied warranty of merchantability of fitness for a particular purpose, including the products described in this publication. Under no circumstances shall Cordis be liable for any direct, incidental or consequential damages other than as expressly provided by specific law. No person has the authority to bind Cordis to any representation or warranty except as specifically set forth herein.

Standing Purchase Orders

Cordis encourages standing purchase orders. Standing purchase orders are agreements to purchase specific quantities of product for delivery on a specific, predetermined schedule. To establish a standing purchase order, telephone the Customer Contact Center at 1.800.327.7714 option 1, or contact your local Cordis Sales Representative.

Intended Product Usage/Storage

- Usage: Most products in this catalog are supplied sterile and nonpyrogenic. Do not use any products if their sterile package is damaged. Discard catheters and single-use accessories after one procedure. All parts are extremely difficult to clean. DO NOT REUSE OR RESHAPE. DO NOT AUTOCLAVE SINGLE-USE PRODUCTS. Structural integrity and/or function may be impaired through reuse, reshaping, and cleaning. ACCORDINGLY, CORDIS CORPORATION WILL NOT BE RESPONSIBLE FOR ANY DIRECT, INCIDENTAL OR CONSEQUENTIAL DAMAGES RESULTING FROM REUSE OF CATHETERS AND ACCESSORIES. Prior to use, refer to the instructions accompanying the product.
- **Storage:** Store products in a cool, dark, dry place. Use sterile products prior to the "Use By" date. Do not expose to organic solvents.
- **Caution:** Federal (USA) law restricts these devices to sale by or on the order of a physician.

Return Policy

Products on consignment are not returnable for credit under this policy. To return any product on consignment, you must contact your local Sales Representative for instructions.

Return Authorization

To return other Cordis products you must contact the Customer Service Center at 1.800.327.7714 option 2 or your local sales representative for a return goods authorization. You must also provide information about the acquisition method (e.g. purchase, consignment, or evaluation) for the product being returned.

Credits

Full Credit of the invoice price will be issued on products returned within 180 days from the date of invoice. Full Credit of the invoice price, less a 10% restocking charge, will be issued on products returned later than 180 days from the date of invoice with the exception of EXOSEAL® Vascular Closure Device.

Partial credit will be issued for product returned in quantities less than the full 10 pack for EXOSEAL® Vascular Closure Device when returned within 365 days. Credit will not be issued for products returned greater than 365 days from the date of invoice. Additionally, credit will not be issued for product meeting the following conditions:

- Discontinued from sale
- Modified products ("Specials")
- Packaging is opened
- Modified product/trays
- Modified instruments
- Damaged
- Used
- Less than full shipping unit
- Stickers, markings, or any changes made to blister package or packaging in general



Return Logistics

All products should be returned with freight prepaid by the customer within five (5) business days of receiving Return Authorization approval. All returned products must be accompanied with the Return Authorization Confirmation in its proper protective packaging along with the Return Authorization Number written on the packaging and sent to:

Cordis Returned Goods 8640 Nail Road, Suite 115 Olive Branch, MS 38654

All returns due to Cordis should use the merchandise pick-up process. Contact Customer Service at 1.800.327.7714 option 1, and they will have our Transportation Department arrange for the carrier to pick up the order error for return.

Product Complaints

All product complaints should be handled by calling Customer Service at 1.800.327.7714.



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- CORDIS
- The Cordis LOGO
- ADROIT[®] Guiding Catheter
- ATW[™] Steerable Guidewire
- ATW[™] Marker Wire
- AVANTI®+ Sheath Introducer
- BI-PAL[®] Biopsy Forceps
- EMERALD[®] Diagnostic Guidewire
- EMPIRA® Balloon Catheter

- EXOSEAL[®] Vascular Closure Device
- 7F HIGHFLOW™ Diagnostic Catheter
- INFINITI® Diagnostic Catheter
- KINK RECOVERY TECHNOLOGY™
- MYNX CONTROL[™] Vascular Closure Device
- MYNXGRIP[®] Vascular Closure Device
- RAIN Sheath[™] Transradial Thin-Walled Introducer
- RAILWAY® SHEATHLESS ACCESS SYSTEM
- RBL-TG™

- RBL-JK™
- REFLEX® Steerable Guidewire
- SHINOBI® Plus Steerable Guidewire
- SHINOBI® Steerable Guidewire
- STABILIZER® Plus Steerable Guidewire
- STABILIZER® XS Steerable Guidewire
- SUPER TORQUE® Diagnostic Catheter
- VISTA BRITE TIP® Guiding Catheter
- WIZDOM[™] Steerable Guidewire

For customer service call 1.800.327.7714. To learn more visit cordis.com. CAUTION: Federal (USA) law restricts this device to sale by or on the order of a physician. Important information: Prior to use, refer to the instructions for use supplied with this device for indications, contraindications, side effects, suggested procedure, warnings and precautions. © 2020 Cardinal Health. All Rights Reserved. 100551563 01/2020