PHILIPS

IGT Devices

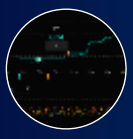
Coronary portfolio

IGT Devices coronary portfolio

Decide, Guide, Treat and Confirm

Decide

Physiology



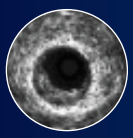
iFR and FFR modalities

OmniWire pressure guide wire

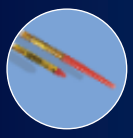
Verrata Plus pressure guide wire

iFR Co-registration

Imaging



Intravascular ultrasound (IVUS)

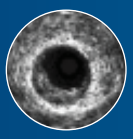


Eagle Eye Platinum digital IVUS catheters

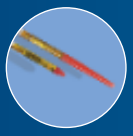
Refinity ST rotational IVUS catheter

IntraSight Interventional application platform (Integrated and Mobile)

Guide

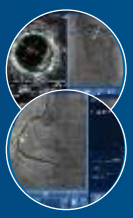


Intravascular ultrasound (IVUS)



Eagle Eye Platinum digital IVUS catheters

Refinity ST rotational IVUS catheter



iFR and IVUS Co-registration

OmniWire pressure guide wire

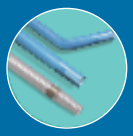
IntraSight Interventional application platform (Integrated and Mobile)

Products subject to country availability. Please contact your local sales representative.

Treat

AngioSculpt RX PTCA scoring balloon

ELCA laser atherectomy catheter



Quick-Cross support catheters*

Confirm

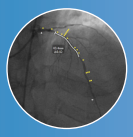
Imaging

Intravascular ultrasound (IVUS)

Eagle Eye Platinum digital IVUS catheters

Refinity ST rotational IVUS catheter

Physiology



iFR Co-registration

OmniWire pressure guide wire

Verrata Plus pressure guide wire

Philips Laser System

CVX-300 Excimer Laser System

IntraSight Interventional application platform (Integrated and Mobile)

* Coronary indication for the device is limited and subject to change.

Products subject to country availability. Please contact your local sales representative.

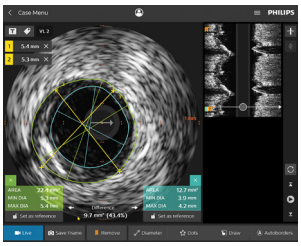
IntraSight

Philips IntraSight offers you a comprehensive suite of clinically proven[1-5] imaging, physiology and Co-registration[6] tools on a modern, secure platform that will help you simplify complex interventions, speed routine procedures and improve lab efficiencies.

See beyond the angiogram to help provide superior care

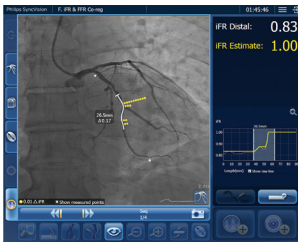
Physiology

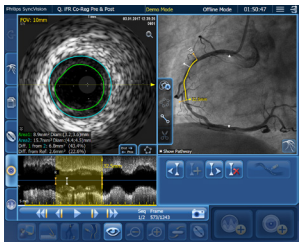
Choice of evidence-based iFR and FFR modalities enable you to quickly assess ischemia, and iFR pullback technology for physiologic guidance.



Imaging

Including high-resolution rotational IVUS and Philips exclusive plug-and-play digital IVUS.





Co-registration

Combine iFR and IVUS data with the angiogram using Philips exclusive iFR and IVUS Co-registration[6] technology.

1. Davies JE, et al., DEFINE-FLAIR: A Multi- Centre, Prospective, International, Randomized, Blinded Comparison of Clinical Outcomes and Cost Efficiencies of iFR and FFR Decision-Making for Physiological Guided Coronary Revascularization. New England Journal of Medicine, epub March 18, 2017. **2.** Gotberg M, et al., Instantaneous Wave-Free Ratio Versus Fractional Flow Reserve Guided Intervention (IFR-SWEDEHEART): A Multicenter, Prospective, Registry-Based Randomized Clinical Trial. New England Journal of Medicine, epub March 18, 2017. **3.** Patel M. "Cost-effectiveness of instantaneous wave-Free Ratio (iFR) compared with Fractional Flow Reserve (FFR) to guide coronary revascularization decision-making." Late-breaking Clinical Trial presentation at ACC on March 10, 2018. **4**. A. Maehara, M. Matsumura, Z.A. Ali, G.S. Mintz, G.W. Stone. IVUS-guided versus OCT-guided coronary stent implantation. J Am Coll Cardiol Img, 10 (2017), pp. 1487- 1503. **5.** Choi K, et al. Impact of Intravascular Ultrasound-Guided Percutaneous Coronary Intervention on Long-Term Clinical Outcomes in Patients Undergoing Complex Procedures. JACC: Cardiovascular Interventions. Mar 2019, 4281; DOI: 10.1016/j.jcin.2019.01.227.
6. Co-registration tools available within IntraSight 7 configuration via SyncVision.

Configurations/Features	Series 3	Series 5	Series 7
IntraSight Integrated - interventional application platform (includes IntraSight CPU with Windows 10 OS, 19" monitor kit, mouse, keyboard and cabling kit)	●	●	●
Imaging (IVUS) license (includes digital, rotational and ChromaFlo IVUS)	●	●	●
Physiology license (includes iFR Spot/Pullback - Hyperemia free lesion assessment modalities and FFR modality)		●	●
Touch Screen Module (TSM)	●	●	●
Philips Remote Services	●	●	●
IVUS and iFR co-registration/tri-registration* (includes SyncVision CPU, monitor, joystick, mouse, keyboard and cabling kit)			●
Device Detection*			●
Quantitative Coronary Analysis*			●
Vessel Enhancement*			●

* Applicable for coronary only. Note: SpinVision and printer are optional extra parts

		IntraSight series 3, 5, 7	SyncVision (with IntraSight 7)
Power requirements	System input	100, 120 v, 220, 240 VAC, 50/60 Hz, 1000 VA	100 V-120 V, 50/60 Hz, 220-240 V, 50/60 Hz, 600 VA
	Workstation	100–240 V, 50/60 Hz, 825 VA	100-240 V, 50/60 Hz, 250 VA
	Monitor	100V–240 V 50/60 Hz, 39 W	100-240 V, 50/60 Hz, 93 VA
Dimensions	Workstation	H=43.18 cm, W=25.4 cm, D=41.91 cm, ~20 kg	H=41.91 cm, W=17.15 cm, D=54 cm, ~15.87kg
	Touch Screen Module (TSM) with articulating tableside mount	H=17.78 cm, W=30.23 cm, D=22.86 cm, ~3.6 kg (articulating arm extends to a max depth of 16.5" and/or 20" above the top of the bedrail)	n/a
	Monitor	H=38.1-48.26 cm (adjustable stand), W=40.13 cm, D=24.64 cm, ~5.9 kg	H=38.1-48.26 cm (adjustable stand), W=40.13 cm, D=24.64 cm, ~5.9 kg
	Joystick	n/a	H=3.81 cm, W=10.67 cm, D=7.62 cm, ~0.9 kg
	Connection box	H=25.1 cm, W=7.5 cm, D=19.68 cm, ~2.7 kg	n/a
Processing and data storage	Processor	1 CPU with 2.3 GHz (maximum turbo frequency of 3.2 GHz). 12 core total. 2400 MHz BUS	1 GPU P5000 1 CPU Intel E5-1600/E5-2600 Series Processor
	Memory	32 GB RAM	16 GB RAM
	Hard drive capacity	128 GB NvME SSD, 1 TB SATA SSD	120 GB SSD SATA + 480 GB SSD SATA
	Digital archiving capabilities	Local, DVD/Blu-ray, DICOM Network (includes Worklist management, DICOM Store)	n/a
	USB export files	.jpg	.jpg/avi

Ordering information

IntraSight 3	IntraSight 5	IntraSight 7
797403 (series 3)	797403 (series 5)	797403/797406 (series 7)

Intrasight Mobile

Providing versatility, IntraSight can now be experienced on an easy to maneuver mobile cart.

Mobile 5 Series

Designed for all lab settings

The Philips IntraSight on mobile is ideally suited for acute and non-acute settings. Customize your platform, select the best-in-class imaging and physiology tools that are right for your coronary or peripheral vascular patients.

Seamless mobile integration with any interventional suite enabling the use of Philips interventional precision tools.

Configurations/Features	Series 3	Series 5
IntraSight Mobile - interventional application platform (includes IntraSight Panel PC with 19" touch screen monitor, mobile cart base with storage bin, DICOM Network Connection and Windows 10 OS)	•	•
Imaging (IVUS) license (includes digital, rotational and ChromaFlo IVUS)	•	•
Physiology licence (includes iFR Spot/Pullback - Hyeremia free lesion assesment modalities and FFR modality)		•
Touch Screen Module (TSM)	Optional	•
Philips Remote Services	•	•

Note: SpinVision and printer are optional extra parts

		Series 3	Series 5
Power requirements	**System input**	100 V-240 VAC, 50/60 Hz, 250 W	100 V-240 VAC, 50/60 Hz, 250 W
Dimensions	**Overall system**	H=160.17 cm, W=55.07 cm, D=66.32 cm, 56.5 kg (includes cart, panel PC, IVUS PIM and all necessary cabling)	H=160.17 cm, W=55.07 cm, D=66.32 cm, 66.32 kg (includes cart, panel PC, IVUS PIM, FM-PIM, TSM and all necessary cabling)
	Display	19" diagonal, 1280 x 1024 resolution	19" diagonal, 1280 x 1024 resolution
Processing and data storage	**Processor**	1 CPU Intel Core i7-7820EQ 3.0 GHz Quad Core (maximum turbo frequency of 3.7 GHz)	1 CPU Intel Core i7-7820EQ 3.0 GHz Quad Core (maximum turbo frequency of 3.7 GHz)
	Memory	16 GB RAM	16 GB RAM
	Hard drive capacity	256 GB NvME SSD, 1 TB SATA SSD	256 GB NvME SSD, 1 TB SATA SSD
	Digital archiving capabilities	Local, DVD/Blu-ray, DICOM Network (includes Worklist management, DICOM Store)	Local, DVD/Blu-ray, DICOM Network (includes Worklist management, DICOM Store)
	USB export files	.jpg	.jpg

Ordering information

IntraSight Mobile 3	IntraSight Mobile 5
797415 (series 3)	797415 (series 5)

IntraSight

Disposables compatibility

	Applications	IVUS compatible catheters	Compatible pressure guide wires
IntraSight 3 Integrated and Mobile	Digital IVUS Rotational IVUS ChromaFlo IVUS Philips Remote Services	Eagle Eye Platinum Eagle Eye Platinum ST Refinity ST	NA
IntraSight 5 Integrated and Mobile	Digital IVUS Rotational IVUS ChromaFlo IVUS iFR FFR Philips Remote Services	Eagle Eye Platinum Eagle Eye Platinum ST Refinity ST	OmniWire Verrata Plus
IntraSight 7* Integrated only	Digital IVUS Rotational IVUS ChromaFlo IVUS iFR FFR IVUS and iFR Co-registration IVUS, iFR and angio Tri-registration Vessel Enhancement Quantitative Coronary Analysis Device Detection Philips Remote Services	Eagle Eye Platinum Eagle Eye Platinum ST Refinity ST	OmniWire Verrata Plus

* Configuration via SyncVision

Core

Integrated and Mobile systems

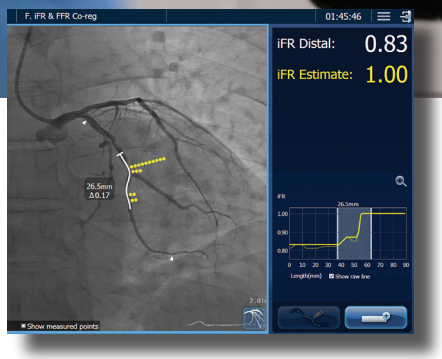
		Core Integrated	Core Mobile
Power requirements	System input	100, 120 V, 220, 240 VAC, 50/60 Hz, 1000 VA	100, 120 V, 220, 240 VAC, 50/60 Hz, 1000 VA
	Workstation	100–240 V, 50/60 Hz, 825 VA	n/a
	Monitor	100V–240 V 50/60 Hz, 39 W	n/a
Dimensions	Core mobile cart	-	H=157.48 cm, W=55.88 cm, D=83.82 cm, ~95.25 kg
	Workstation	H=43.2 cm, W=25.4 cm, D=41.6 cm, ~22.6 kg	-
	Controller	H=12 cm, W=36 cm, D=24 cm, ~3 kg	-
	Monitor	H=42 cm, W=43.2 cm, D=24 cm, ~15 kg	-
Processing and data storage	Processor	1 CPU processor 2.53 GHz, 8 core total, 1366 MHz BUS	1 CPU processor 2.53 GHz, 8 core total, 1366 MHz BUS
	Memory	8 GB RAM	8 GB RAM
	Hard drive capacity	1 TB 7200 RPM SATA	1TB 7200 RPM SATAA
	Digital archiving capabilities	Local, DVD, DICOM Network	Local, DVD, DICOM Network
	Dicom services supported	DICOM worklist management, DICOM store	DICOM worklist management, DICOM store

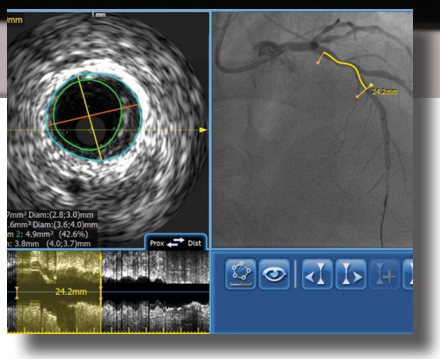
Ordering information

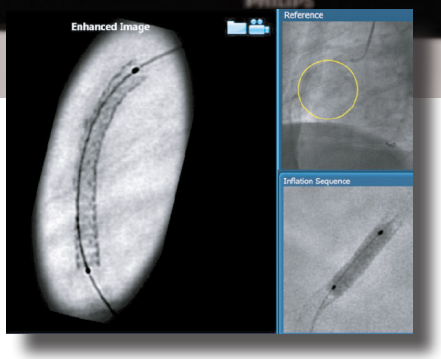
Core Integrated	Core Mobile
797402	797414

SyncVision

Making a difference with Live Image Guidance







iFR Co-registration

Provides localization of physiology measurements on the angiogram during the decide and confirm stages of a PCI procedure.

IVUS Co-registration

Provides localization of the IVUS image on the angiogram during the decide, guide and confirm stages of a PCI procedure. It can additionally be synchronized with physiology measurements, providing a Tri-Registration that together shows the localization of IVUS and physiology on the angiogram image.

Angio+ Enhancement

Enhancement and quantification of angiographic images during the decide, guide and confirm stages of a PCI procedure.

An innovative suite of PCI applications

At Philips, we are committed to delivering technology that makes a difference – to clinical workflows, medical procedures, and to patients' and clinicians' lives. Our portfolio of Live Image Guidance solutions integrates imaging technologies and real-time patient information to help you decide, guide and confirm the right therapy for your patient.

Live Image Guidance includes dedicated solutions that help you increase the efficiency of percutaneous coronary interventions (PCI) – in both the diagnostic and therapeutic phase. Philips solutions offer reliable guidance that helps you make informed decisions and enhance clinical workflow.

A new perspective

One of our innovative PCI suite application is SyncVision, a comprehensive solution designed to address imaging and physiological challenges in the cath lab. SyncVision allows you to plan your PCI strategy providing guidance and mapping of intravascular ultrasound and physiological information into the angiogram. Moreover, it helps to streamline lesion assessment, simplify vessel sizing, and support precise therapy delivery.

Key features and benefits

- Intuitive user interface
- Physiology Co-registration
- IVUS Co-registration
- Physiology-IVUS Tri-registration
- Angio+ enhanced angiography featuring Vessel Enhancement, Quantitative Coronary Analysis and Device Detection
- Seamless integration into your PCI workflow

		SyncVision
Power requirements	**System input**	100 V-120 V, 50/60 Hz. 220-240 V, 50/60 Hz, 600 VA
	Workstation	100-240 V, 50/60 Hz, 250 VA
	Monitor	100-240 V, 50/60 Hz, 93 VA
Dimensions	**Workstation**	H = 41.91 cm, W = 17.15 cm, D = 54 cm, ~15.87kg
	Monitor	H = 38.1-48.26 cm (adjustable stand), W = 40.13 cm, D = 24.64 cm, ~5.9 kg
	Joystick	H = 3.81 cm, W = 10.67 cm, D = 7.62 cm, ~0.9 kg
Processing and data storage	**Processor**	1 GPU P5000 1 CPU Intel E5-1600/E5-2600 Series Processor
	Memory	16 GB SD RAM
	Hard drive capacity	120 GB SSD SATA + 480GB SSD SATA
	Digital archiving capacity	n/a
Compatible disposables	**Catheters**	Eagle Eye Platinum Eagle Eye Platinum ST
	Pressure wires	OmniWire Verrata Plus

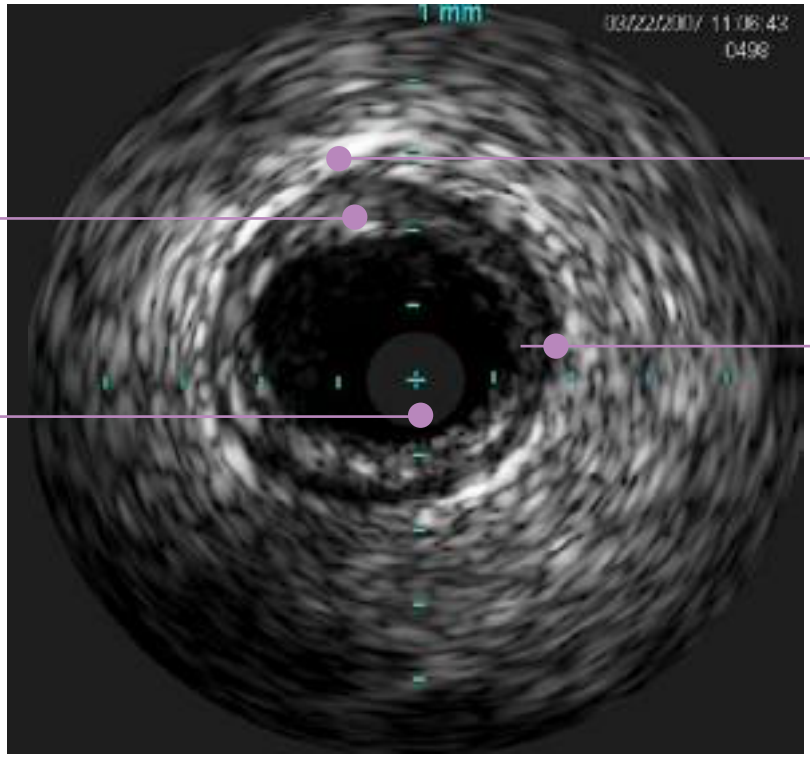
Ordering information

SyncVision
797406

What is **IVUS**

Intravascular ultrasound

- When electricity stimulates a crystal, sound waves are released
- The sound hits tissue and is reflected to a varying degree
- Crystals then receive those reflected signals and code them back into electrical impulses
- Those impulses can construct a sophisticated image using computing power



Adventitia
White ring

Intima

Media
Black ring

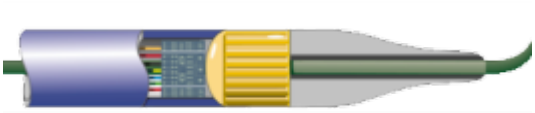
Dead zone
Catheter

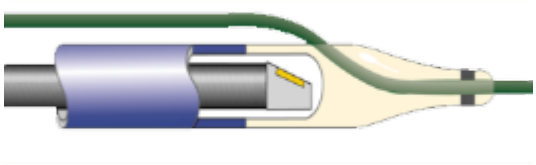
Two ways to acquire IVUS signals

Digital IVUS

Eagle Eye Plainum and Eagle Eye Plainum ST

A series of fixed 64 ultrasound devices that scan sections of the vessel in turn, whilst computers to build the image, 20MHz greyscale.





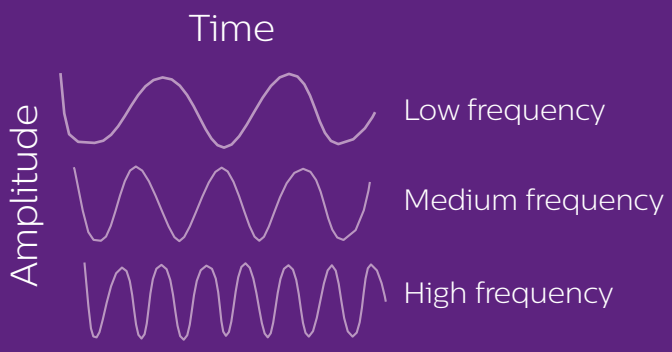
Rotational IVUS

Refinity ST and Revolution

A single IVUS catheter that spins within a sheath and uses computers to build the image in real-time from the sections that come in bit by bit, 45MHz greyscale.

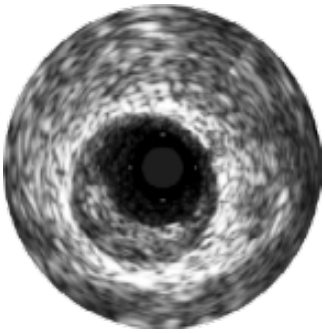
MHz – megahertz

MHz refers to the frequency of the soundwave. A higher frequency will increase the resolution but reduce the depth penetration.



Digital IVUS

Eagle Eye Platium and
Eagle Eye Platinum ST

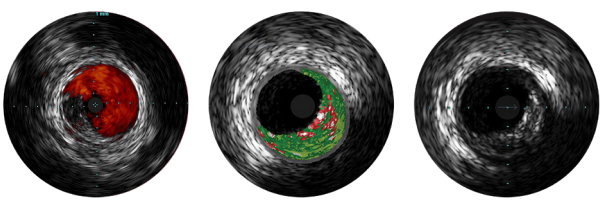


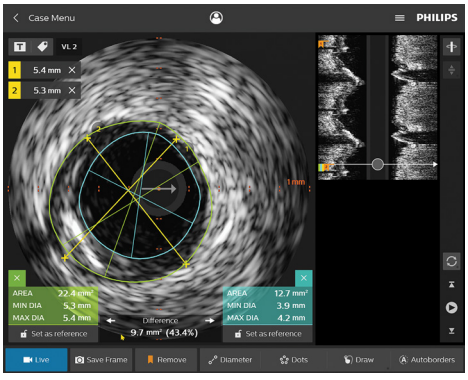
Rotational IVUS

Refinity, Revolution and SpinVision

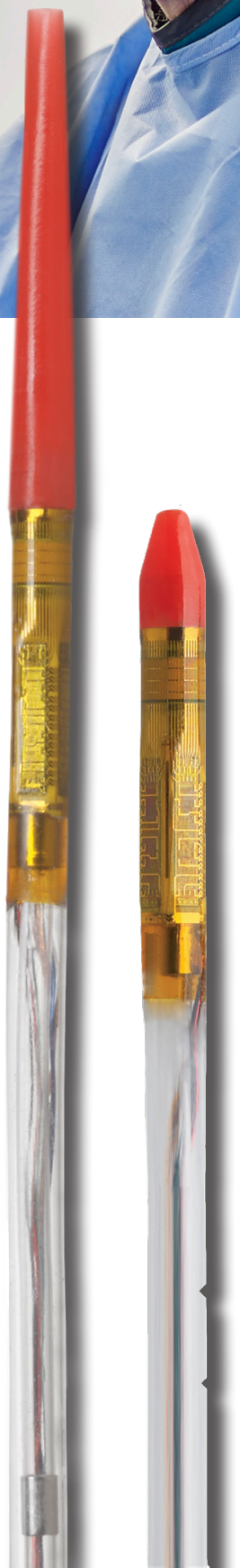
ChromaFlow imaging

Provides clear confirmation of stent apposition and lumen size





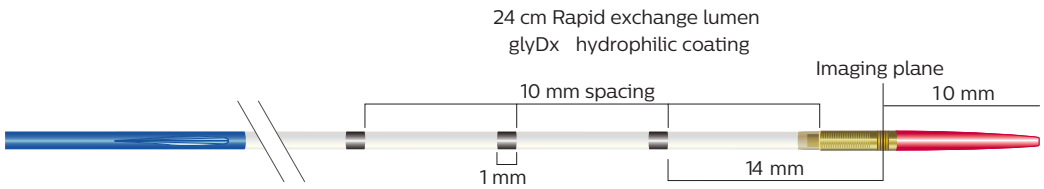
Quick and easy to use measurement, annotation and labelling tools



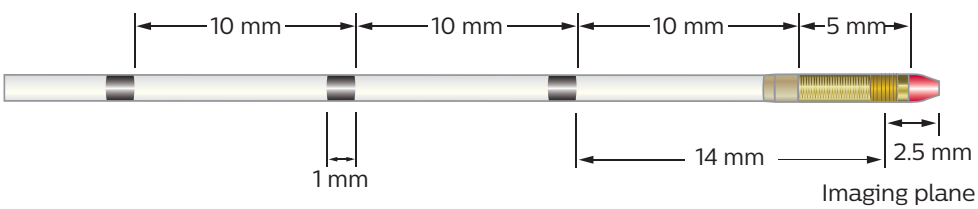
Eagle Eye Platinum
Eagle Eye Platinum ST

Phased-array, digital IVUS catheter

- Fast, plug-and-play simplicity
- Quick, convenient length estimation
- ChromaFlo imaging
- Unique SyncVision IVUS and iFR co-registration compatibility
- Standard and short-tip variations



Eagle Eye Platinum

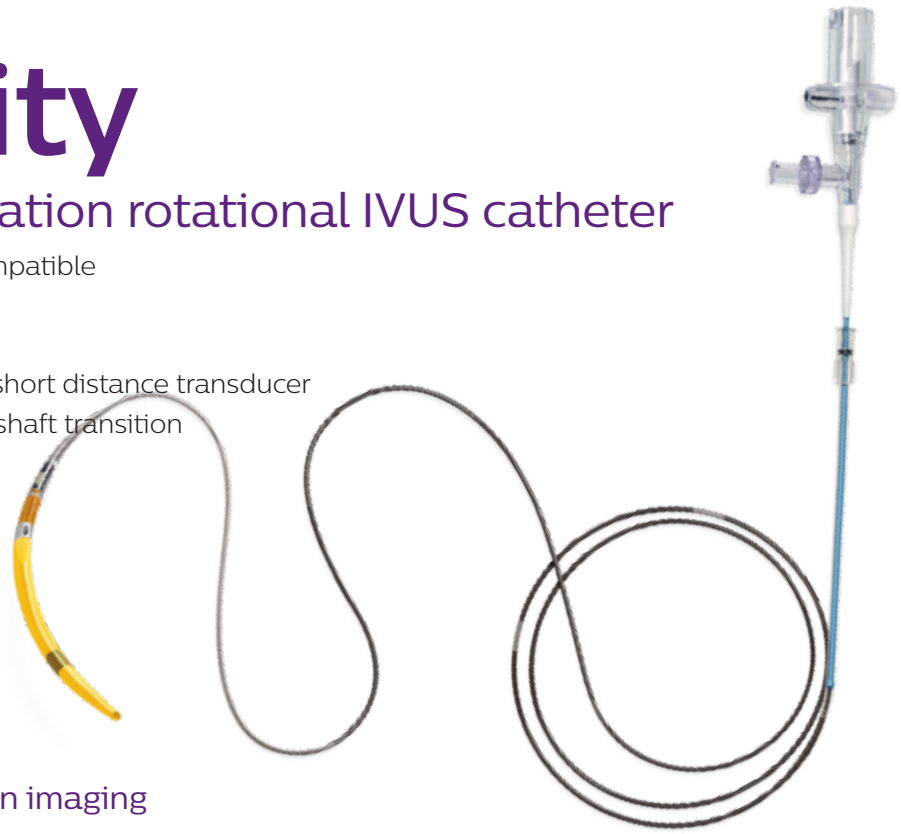


Eagle Eye Platinum ST

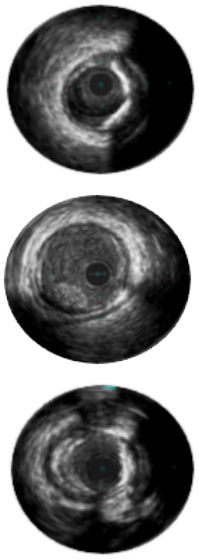
Refinity

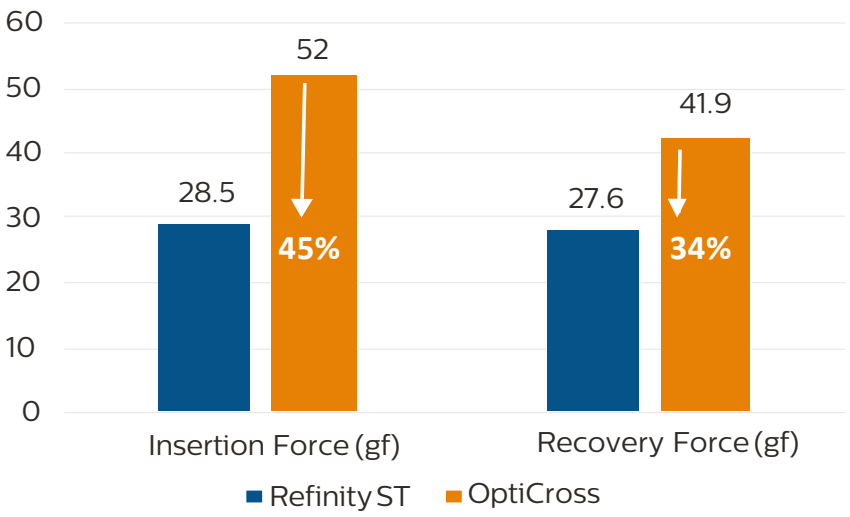
Our next generation rotational IVUS catheter

- Low profile, 5Fr guide compatible
- Suitable for radial access
- GlyDx hydrophilic coating
- Soft and flexible tip with short distance transducer
- Smooth proximal to mid-shaft transition



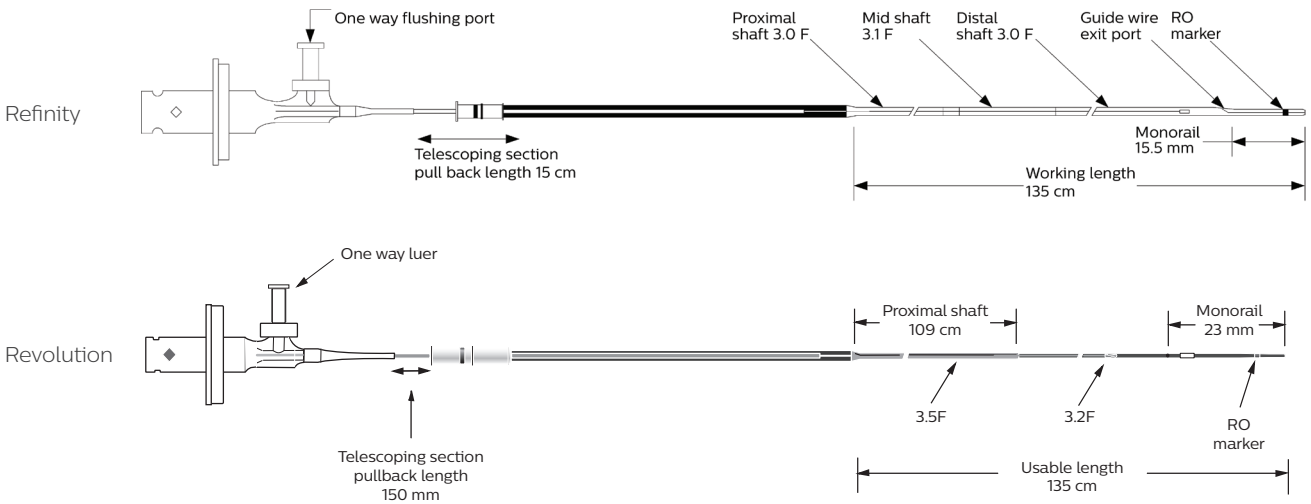
45 MHz, high resolution imaging

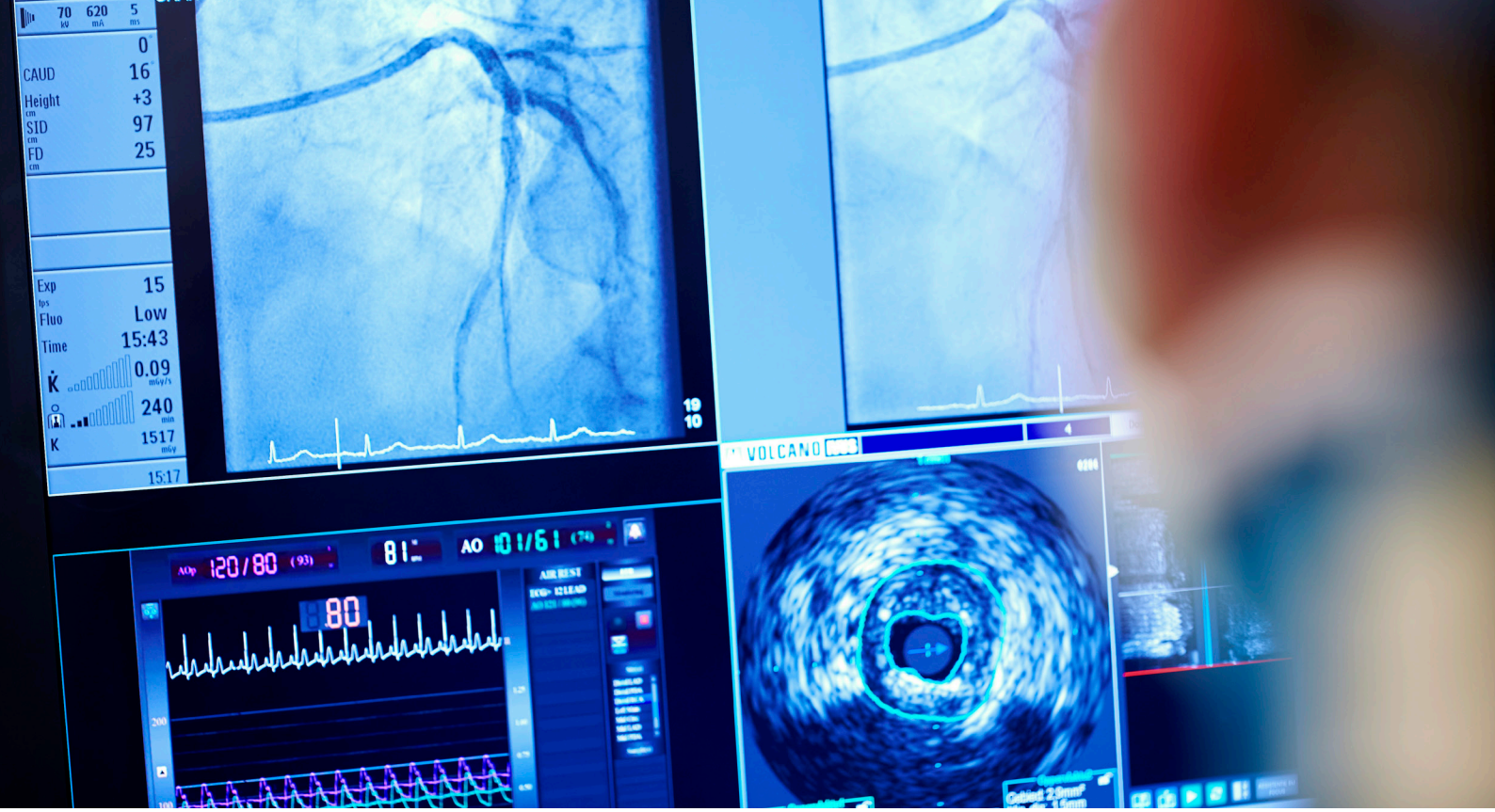




Refinity ST insertion and recovery forces are significantly lower ($p<0.001$) than OptiCross*

*Data on file at Philips. Bench testing was conducted with three rotational IVUS catheters: Refinity ST, Revolution, OptiCross through a tortuous model





SpinVision

Rotational IVUS pullback device

Accurate

- Automate pullback system - facilitate accurate vessel and lesion measurements
- Maximum pullback accuracy - facilitates clinical research and trials

Reliable

- Robust and single board design - provides consistent communication with Core system

Cost effective

- Reusable sled design - for efficient and cost effective use

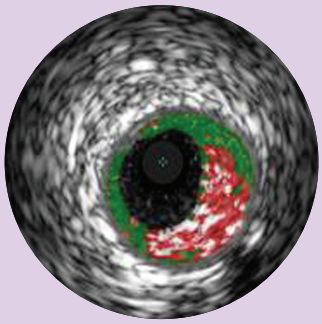
	SpinVision pullback device
Pullback length	15 cm
Completely reusable pullback device	Yes
Pullback speed	0.5 mm/s 1 mm/s
LED position display	Yes

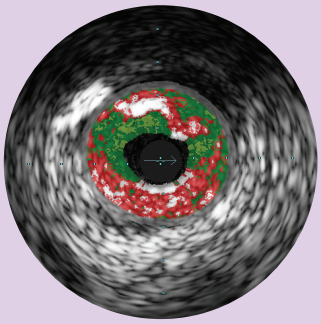
Ordering information

SpinVision

Coronary IVUS catheters

Features and specifications



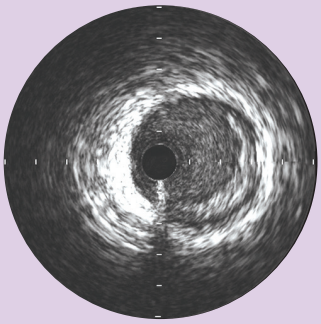


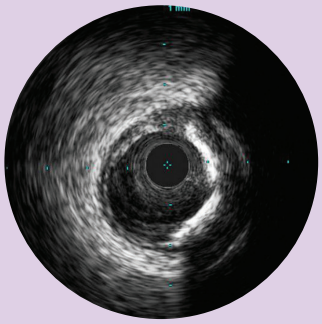
	Eagle Eye Platinum	Eagle Eye Platinum ST
Frequency/type	20 MHz digital 64 element	20 MHz digital 64 element
Vessel	Coronary, peripheral	Coronary, peripheral
Maximum imaging diameter	20 mm	20 mm
Diameter at transducer	3.5F	3.5F
Tip entry profile	0.019”	0.019”
Tip-to-transducer length	10 mm	2.5 mm
Radiopagque markers	Scanner + 3 marks 10 mm apart	Scanner + 3 marks 10 mm apart
Working length	150 cm	150 cm
Wire lumen length	24 cm	24 cm
Maximum guide wire	0.024”	0.014”
Minimum guide catheter	5F (ID ≥ .056”)	5F (ID ≥ .056”)
Minimum sheath size	5F	5F
Delivery platform	Rapid exchange	Rapid exchange
Proprietary imaging	VH IVUS, ChromaFlo	VH IVUS, ChromaFlo
Compatible with SyncVision	Yes	Yes

Eagle Eye Platinum and Eagle Eye Platinum ST are also indicated for peripheral applications. Safety and effectiveness of VH IVUS for use in the characterization of vascular lesions and tissue types has not been established.

Ordering information

Eagle Eye Platinum	Eagle Eye Platinum ST
85900P	85900PST





Revolution	Refinity ST
45 MHz rotational single element	45 MHz rotational single element
Coronary	Coronary
14 mm	14 mm
3.2F	3.0F
0.022”	0.025”
29 mm	20.5 mm
One marker + transducer	One marker + transducer
135 cm	135 cm
2.3 cm	1.55 cm
0.014”	0.014”
6F (ID ≥ .064”)	5F (ID ≥ .056”)
N/A	N/A
Rapid exchange	Rapid exchange
N/A	N/A
No	No

Ordering information

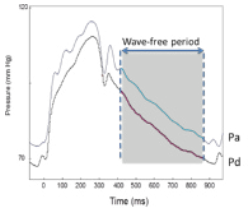
Revolution	Refinity ST
89000	89900

What is **physiology**

Two ways to predict ischemia

1 **iFR** -Instantaneous Free wave Ratio

An instantaneous pressure gradient, across a stenosis during the wave-free period, when resistance is constant and minimised in the cardiac cycle [1]

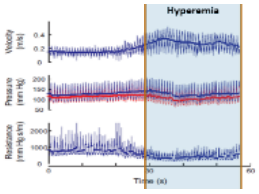


$$\text{iFR} = \frac{P_{D_{wfp}}}{P_{A_{wfp}}}$$

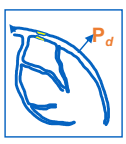
2 **FFR** - Fractional Flow Reserve

The ratio of distal mean coronary pressure to mean aortic pressure in the stenotic vessel during maximum hyperaemia.

Represents the very fraction of blood flow that still has been preserved despite the stenosis.[1]



$$\text{FFR} = \frac{P_{D_{hyp}}}{P_A}$$



iFR-guided strategy significantly reduces:

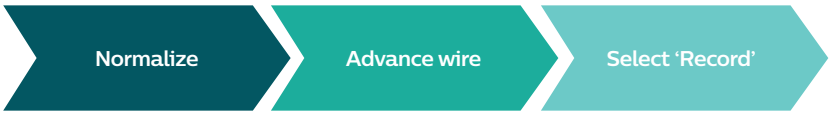
- **Time**
- **Patient discomfort**
- **Procedure cost per patient**

1. Davies JE, et al., Use of the Instantaneous Wave-free Ratio or Fractional Flow Reserve in PCI. N Engl J Med. 2017 May 11;376(19):1824-1834.

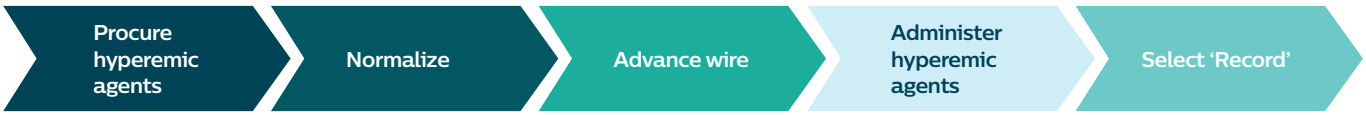
iFR vs. FFR:

same wire, same system, fewer steps

iFR workflow



FFR workflow



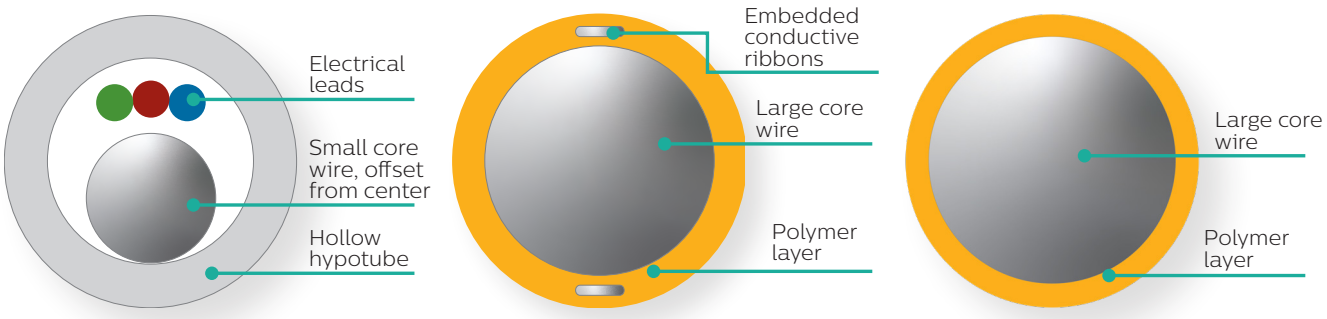
Single dichotomous cut-point back by data[2,3]

Both DEFINE FLAIR and iFR Swedeheart were designed with the dichotomous cut-point wof iFR in the iFR arm. With comparable MACE rates to FFR, these results mean the 0.89 cut-point for iFR is proven and backed by more than 4500 patients of outcome data.[1]

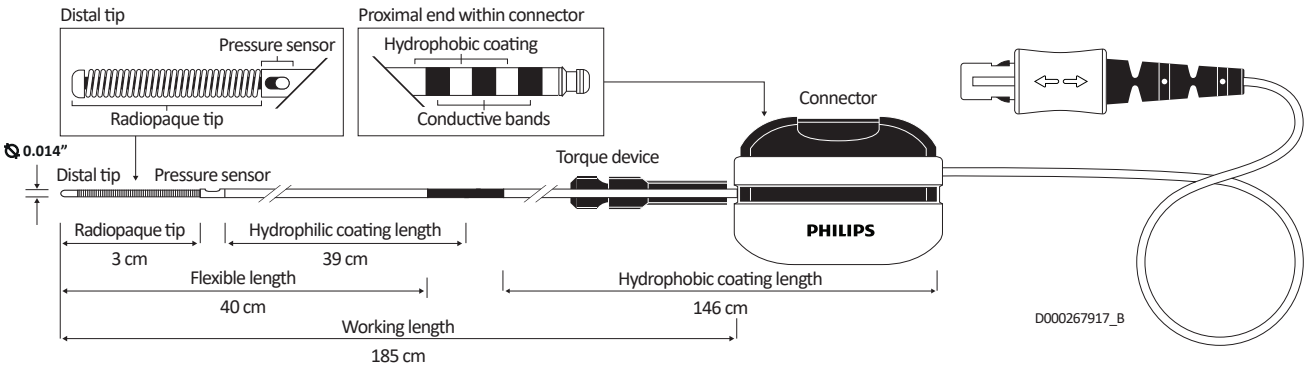
1. Davies JE, et al., Use of the Instantaneous Wave-free Ratio or Fractional Flow Reserve in PCI. N Engl J Med. 2017 May 11;376(19):1824-1834.
2. Gotberg M, et al., iFR-SWEDEHEART Investigators.. Instantaneous Wave-free Ratio versus Fractional Flow Reserve to Guide PCI. N Engl J Med. 2017 May
3. An iFR cut-point of 0.89 m tches best with an FFR ischemic cut-point of 0.80 with a specificity of 87.8% and sensitivity of 73.0% (From ADVISE II, and iFR Operator's Manual 505-0101.23).

OmniWire

World's first solid core pressure guide wire[1].



Traditional pressure wire | OmniWire with solid core | Workhorse guide wire



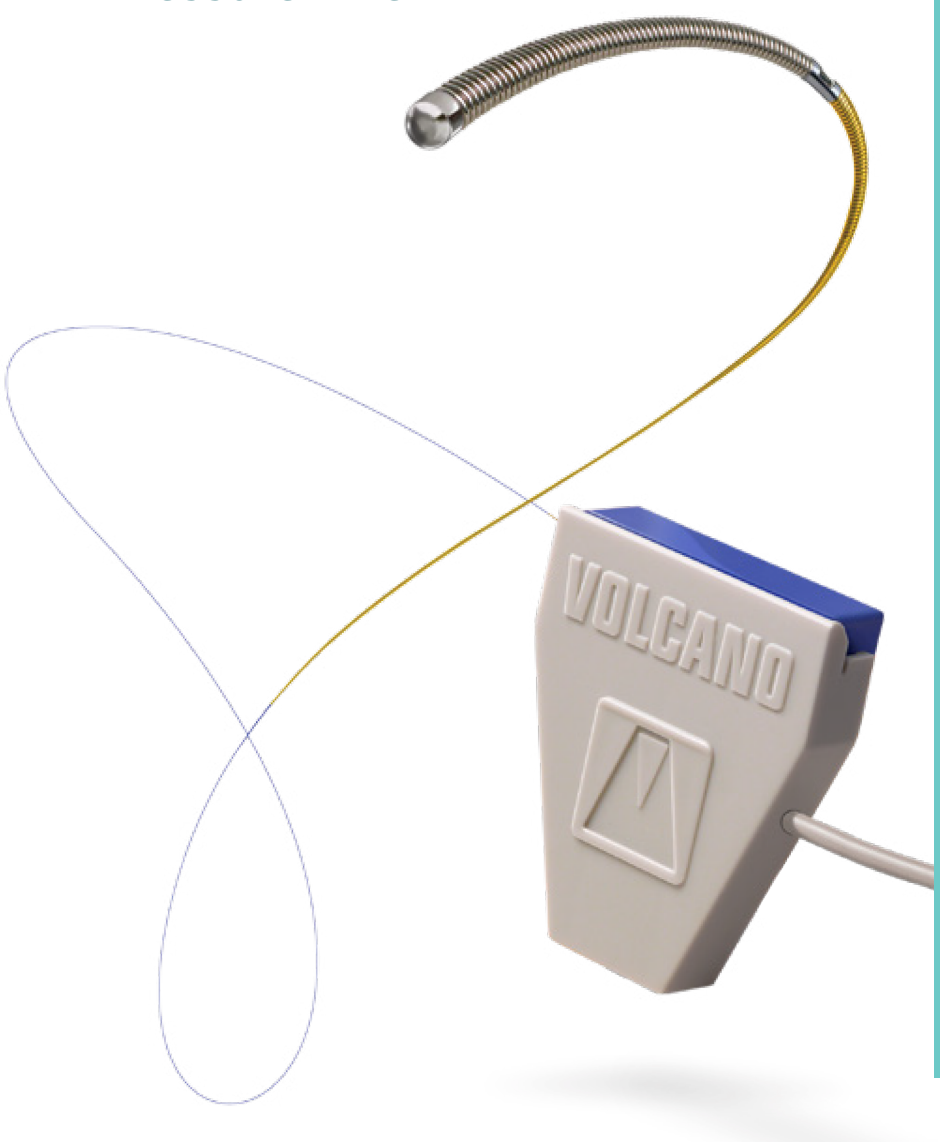
1. Data on file D000410086_A, D000485394_A

Ordering information

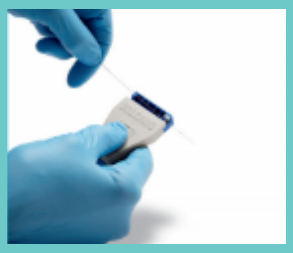
OmniWire 185cm straight	OmniWire 185cm J-tip
89185	89185J

Verrata Plus

Pressure wire



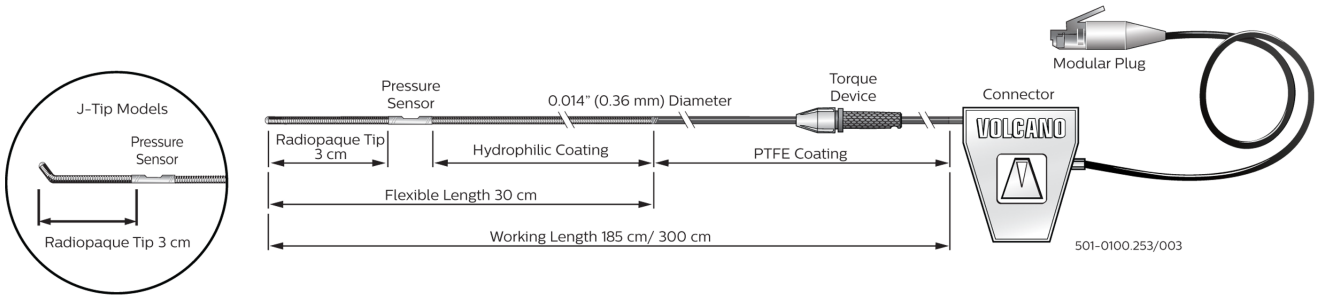
The Quick Connect process



1. Angled Approach

2. Drag

3. Drop



Ordering information

Verrata Plus 185cm straight	Verrata Plus 185cm J-tip
10185 P	10185J P


PHILIPS

AngioSculpt RX PTCA

Your prescription for complex lesions

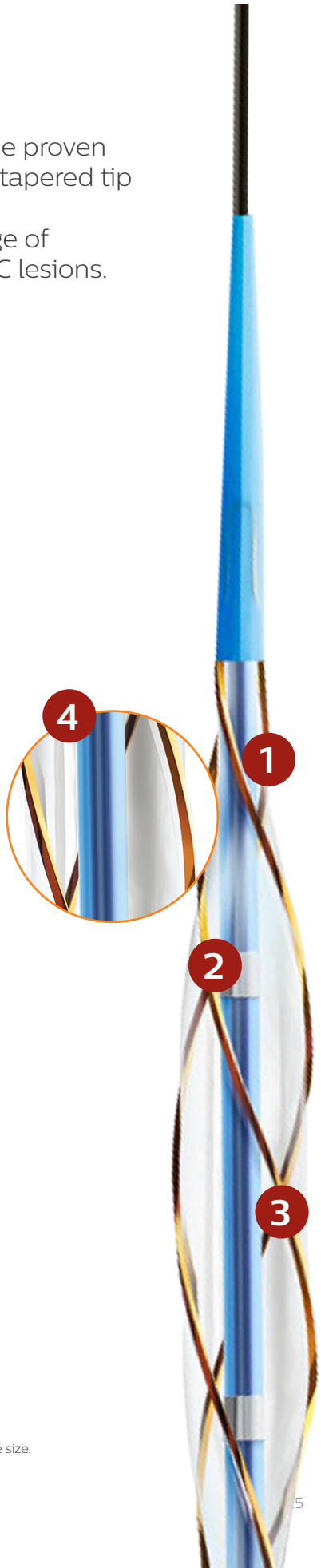
The AngioSculpt RX PTCA scoring balloon catheter delivers the proven advantages of the AngioSculpt system combined with a new, tapered tip design that enhances deliverability.
The result is an essential tool in the treatement of a wide range of coronary lesions, including in-stent restenosis (ISR) and type C lesions.

1. Large working range (2 atm up to 20 atm) allows physicians to tailor device to vessel size.

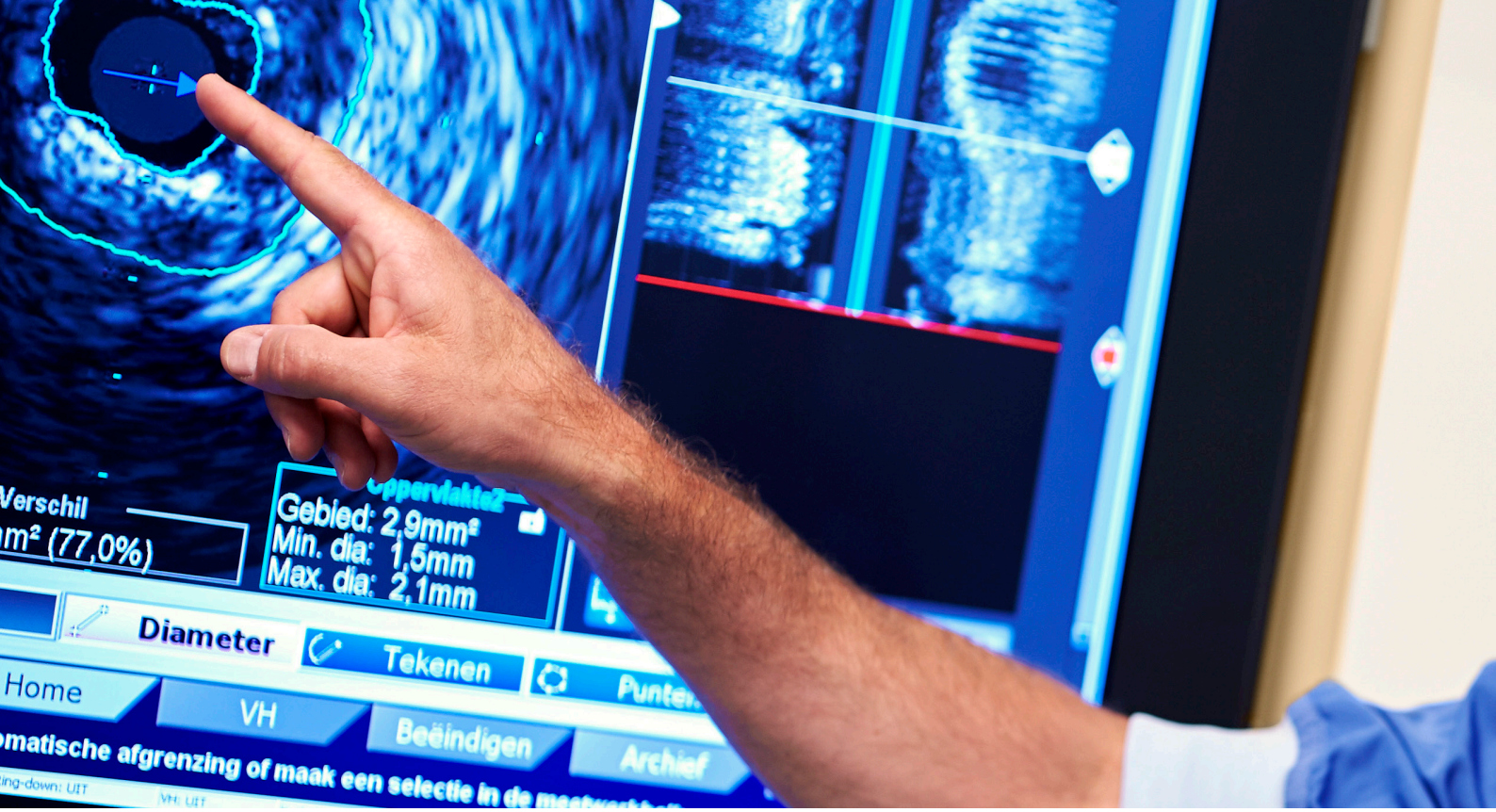
2. Nitinol-enhanced balloon deflation for excellent rewrap and recross capabilities.

3. Electropolished, helical scoring element safely scores lesion circumferentially.

4. Rectangular edges provide a predictable dilation resulting in low dissection rates and minimal device slippage.

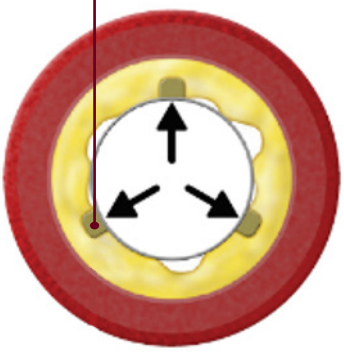


1. Please refer to AngioSculpt RX PTCA product labeling, including the instructions for use, to select the appropriate device size.

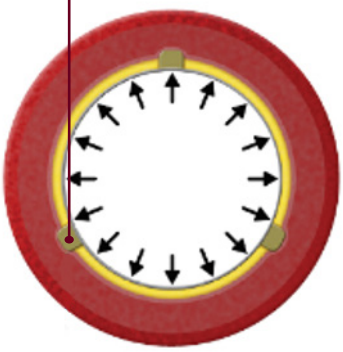


Edges lock in

~15-25x scoring force



~1x force post-scoring



Precision

Proper placement

- Rectangular scoring edges lock the device in place. Minimal device slippage or 'watermelon seeding,' even in ISR.[1]

Power

Enhanced mechanical advantage

- The leading edges are designed to drive outward expansion with up to 15-25 times the force of conventional balloons.[2]
- Helical nitinol scoring element creates a large luminal expansion for stent implantation.[3]

Safety

Predictable results

- Post-scoring, outward forces are designed to equivalent to that of a conventional balloon.
- Low dissection rate of 13.6% (majority were non-flow limiting).[1]

1. Mooney M. Teirstein P, Moses J, et al. Final results from the U.S. multi-center trial of the AngioSculpt Scoring Balloon Catheter for the treatmen of complex coronary artery lesions. Am J Cardio. 2006:98(suppl B):121M
2. AngioSculpt Test Plan ST-1197 (2008), on file at AngioScore inc.
3. Costa JR, Mintz GS, Carlier SG, et al. Nonrandomized comparison of coronary stenting under intravascular ultrasound guidance of direct stenting without predilation versus conventional predilation with a semi-compliant balloon versus predilation with a new scoring balloon. Am J Cadiol, 2007:100:812-817.

Ordering information

Angiosculpt 2.0x6mm	Angiosculpt 2.0x10mm	Angiosculpt 2.0x15mm
2200-2006	2200-2010	2200-2015
Angiosculpt 2.5x6mm	**Angiosculpt 2.5x10mm**	**Angiosculpt 2.5x15mm**
2200-2506	2200-2510	2200-2515

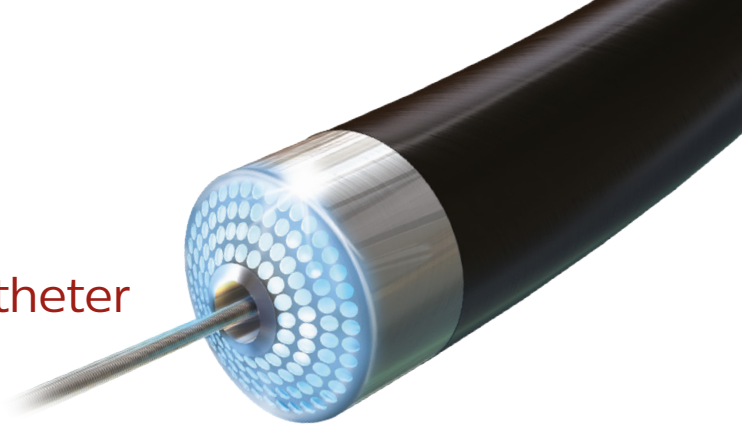
	Balloon diameter (mm)	Balloon length (mm)	Catheter length	Guide wire compatibility	Guide catheter compatibility
Angiosculpt 2.0x6mm	2.0	6	137	0.014”	6F
Angiosculpt 2.0x10mm	2.0	10	137	0.014”	6F
Angiosculpt 2.0x15mm	2.0	15	137	0.014”	6F
Angiosculpt 2.5x6mm	2.5	6	137	0.014”	6F
Angiosculpt 2.5x10mm	2.5	10	137	0.014”	6F
Angiosculpt 2.5x15mm	2.5	15	137	0.014”	6F
Angiosculpt 3.0x6mm	3.0	6	137	0.014”	6F
Angiosculpt 3.0x10mm	3.0	10	137	0.014”	6F
Angiosculpt 3.0x15mm	3.0	15	137	0.014”	6F
Angiosculpt 3.5x6mm	3.5	6	137	0.014”	6F
Angiosculpt 3.5x10mm	3.5	10	137	0.014”	6F
Angiosculpt 3.5x15mm	3.5	15	137	0.014”	6F

Ordering information

Angiosculpt 3.0x6mm	Angiosculpt 3.0x10mm	Angiosculpt 3.0x15mm
2200-3006	2200-3010	2200-3015
Angiosculpt 3.5x6mm	**Angiosculpt 3.5x10mm**	**Angiosculpt 3.5x15mm**
2200-3506	2200-3510	2200-3515

Elca

Coronary laser atherectomy catheter



Proven technology

- Treating patients for more than 20 years
- Optimally spaced fibers for improved performance
- Adjustable laser energy settings to satisfy many clinical needs
- Automatic shut-off feature for advanced patient safety

Advanced performance

- Saline infusion improves safety outcomes[1]
- Slow advancement increases lunimal gain[2]
- Two-thirds vessl sizing rule for predictable outcome

Broad range of indications

- Total occlusiong traversable by a guidewire
- Occluded SVGs
- Ostial lesions
- Moderately calcified stenoses
- Long lesions (>20mm)
- Lesions which previously failed PTCA
- Restenosis in 316L stainless steel stents prior to brachytherapy

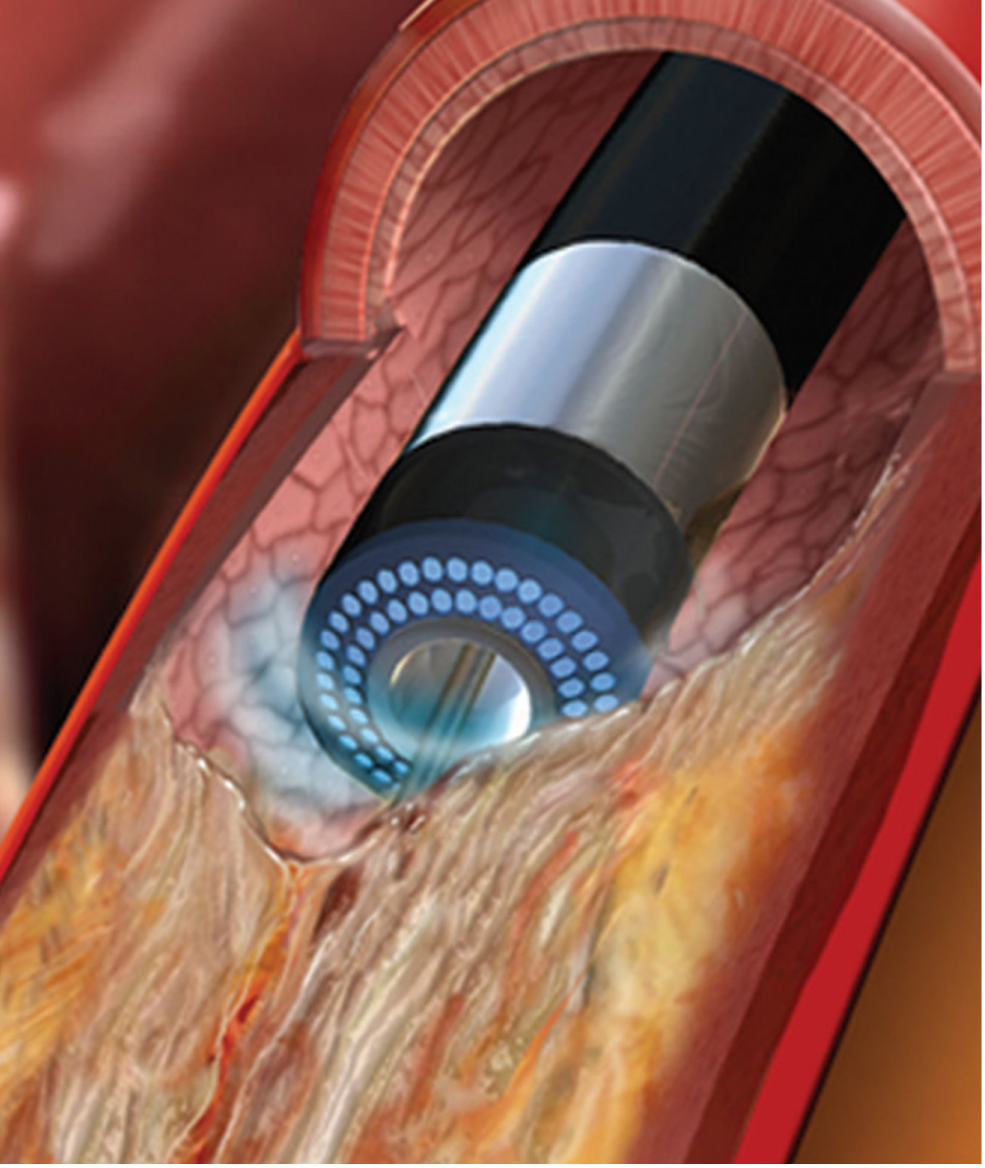
	Elca 0.9 mm X-80	Elca 0.9 mm X-80 OTW*	Elca 1.4 mm	Elca 1.7 mm	Elca 2.0 mm
Guidewire compatibility (in)	0.014	0.014	0.014	0.014	0.014
Guide catheter compatibility (F)	6	6	6/7	7	8
Minimum vessel diameter (mm)	2.0	2.0	2.2	2.5	3.0
Max tip outer diameter (in)	0.038	0.038	0.057	0.069	0.080
Max shaft outer diameter (in)	0.049	0.049	0.062	0.072	0.084
Working length (cm)	130	130	130	130	130
Fluence (mJ/mm²	30-80	30-80	30-60	30-60	30-60
Repetition rate (Hz)	25-80	25-80	25/40	25-40	25-40
Laser on/off time (sec)	10/5	10/5	5/10	5/10	5/10

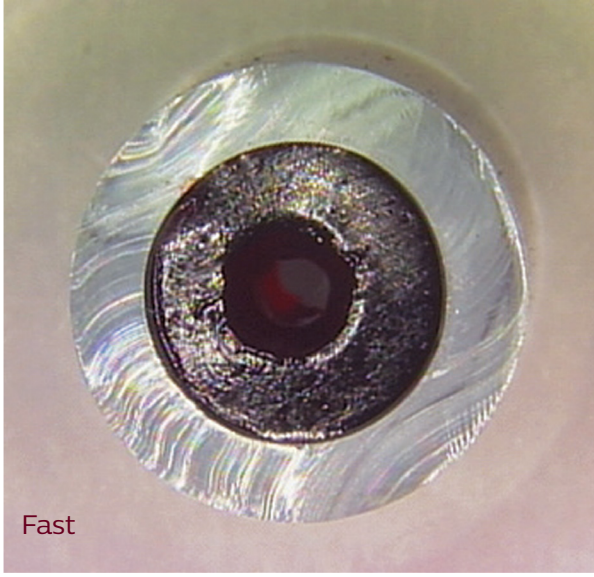
Saline infusion recommendations for coronary interventions

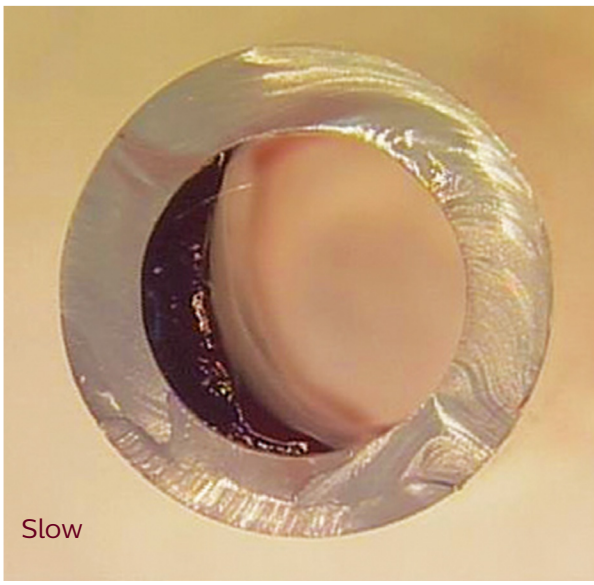
- Always perform 10-20cc bolus infusion of saline through the guide catheter after contrast injections.
- During lasting, infuse saline through the guide catheter at a rate of 2-3cc/second.

Ordering information

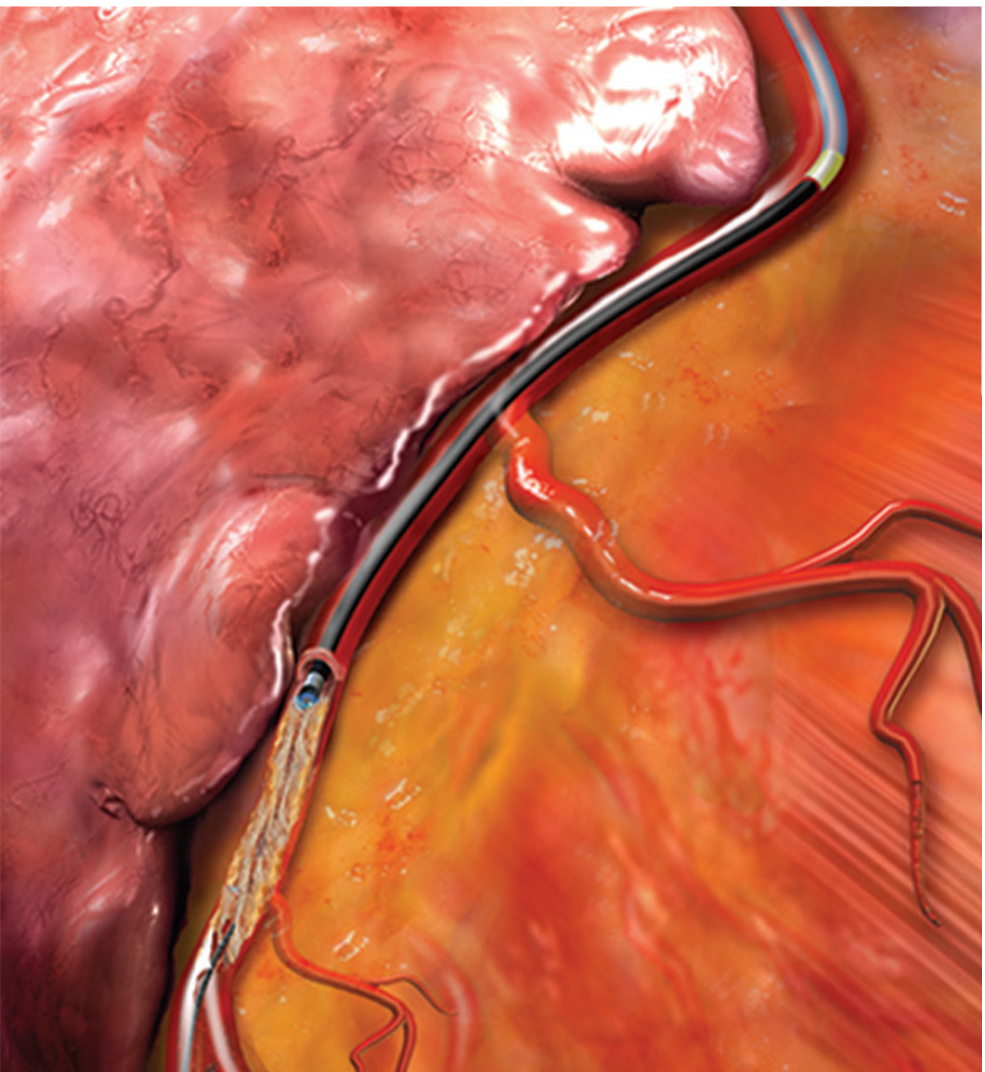
Elca 0.9 mm X-80	Elca 1.4 mm
110-004	110-009
Elca 1.7 mm	**Elca 2.0 mm**
117-016	120-009







Larger luminal glow with slow advancement[2]



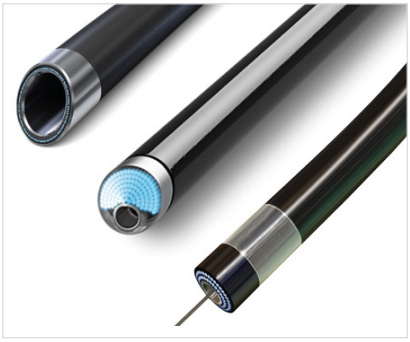
1. Tcheng J.E. et al. (1995). Development of a New Technique for Reducing Pressure Pulse Generation During 308-nm Excimer Laser Coronary Angioplasty. Catherterization and cardiovascular Diagnosis. 34, 15-22.
2. Topaz, On, et al, 2001. Optimal Spaced Excimer Laser Coronary Catheters Performance Analysis, Journal of Clinical Laser Medicine and Surgery, Vol 19, issue 1, 9-14.
3. Data on file at Philips..

Philips Laser System

A broad range of applications to treat more complex conditions

The Philips Laser System is built on over 20 years of proven technology, safely and reliably photoablates a fully spectrum of morphologies.

The Philips laser catheters are indicated in more vessel types than other atherectomy devices and is the only laser system available for electrophysiology.



Simple: turn key ready in any room

- Ready in less than 30 seconds
- Touchscreen guided workflows
- Minimum training required
- 360° maneuverability and small lab footprint
- Easy positioning within any lab

Versatile: more vessles, more indications

- Seven indications for coronary vascular
- Only* device with level 1 evidence for In-Stent Restenosis (ISR)
- First technology proven effective for ISR in peripheral vasculature[1]
- Only laser technology for lead removal
- Variable fluence and rate settings to match patients' needs

Proven: excimer technology

- Cool, ultraviolet laser with over 20 years of clinical experience
- More than 600,000 procedures performed
- Only atherectomy device with level 1 clinical evidence showing superiority in safety and efficacy of ELA + PTA versus PTA alone for treating femoropopliteal ISR[1]

* Data of 2021, subject to change.

1. Dippel et al. Randomized Controlled Study of Excimer Laser Atherectomy for Treatment of Femoropopliteal In-stent Restenosis: Initial ISR Results (2015). JACC 8(1): 92-101.*

	Philips Laser System
Power requirements	100V-240V, 16 amp, single phase power
Wavelength	308 nm
Class	Class IV laser system
Length	52 in/132 cm
Height	42 in/107 cm
Width	19 in/48 cm
Weight	450 lb/204 kg

Ordering information

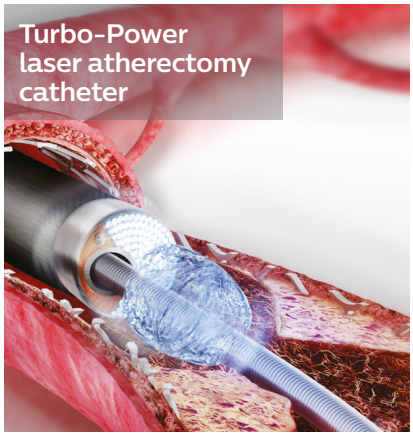
Philips Laser System
LAS-100

CVX-300

Excimer Laser System

A broad range of applications to treat more complex conditions

The CVX-300 Excimer laser system's clinical versatility, high clinical success, low adverse events and well-established reimbursement[1-6] helps you to safely treat more complex conditions in vascular intervention and lead management procedures.



Coronary atherectomy

- In-stent Restenosis (IRS)*
- Moderately calcified lesions
- Ostial lesions
- Lesions that previously failed PTCA
- CTO traversable by a guidewire
- Occluded SVG
- Long lesions (>20mm)

Peripheral atherectomy

- Only** device indicated for fem-pop ISR
- No contraindications

Lead extraction

- Removal of chronically implanted pacing and defibrillator leads
- 30 HRS indications[4-6]
- Has an estimated 5% annual incidence rate[4-6]

* ISR is limited to BMS (316L SS) and prior to administrating brachytherapy.

** Data of 2021, subject to change.

1. Dippel et al. Randomized Controlled Study of Excimer Laser Atherectomy for Treatment of Femoropopliteal. In-stent Restenosis: Initial EXCITE ISR Results (2015). JACC 8(1): 92-101.
2. Doshi et al. Comparison of Excimer Laser Atherectomy versus Orbital plus Rotational Atherectomy for Revascularization. SCAI 2017.
3. Gajanana et al. Global Revascularization & Evaluation of Excimer Laser in the Coronaries. SCAI 2017.
4. Wilkoff, B.L., Love, C.J., Byrd, C.L., Bongiorni, M.G., Carrillo, R.G., Crossley, G.H.,et al. (2009). Transvenous Lead Extraction: Heart Rhythm Society Expert Consensus on Facilities, Training, Indications, and Patient Management.
5. Philips data on file. D014953-10. June 2017.
6. Wazni, O et. al. Lead Extraction in the Contemporary Setting: The LExICon Study: A Multicenter. Observational Retrospective Study of Consecutive Laser ead Extractions, J Am Coll Cardiol, 55:579-586.

	Philips Laser System
Power requirements	208-230 VAC singale phase power
Wavelength	308 nm
Class	Class IV laser system
Length	49 in / 125 cm
Height	35in/89 cm plus 6.9 in/17.5 cm control panel
Width	24 in/61.3 cm
Weight	650 lb/295 kg

Ordering information

CVX-300
CVX-300-P

IGT Devices coronary portfolio

Ordering information

IVUS and physiology systems

IntraSight	**IntraSight 3**	**IntraSight 5**	**IntraSight 7**
	797403 (series 3)	797403 (series 5)	797403/797406 (series 7)
IntraSight Mobile		IntraSight Mobile 3	IntraSight Mobile 5
		797415 (series 3)	797415 (series 5)
Core		Core Integrated	Core Mobile
		797402	797414
SyncVision			SyncVision
			797406

IVUS disposables

Eagle Eye Platinum	**Eagle Eye Platinum**
	85900P
Eagle Eye Platinum ST	**Eagle Eye Platinum ST**
	85900PST
Revolution	**Revolution**
	89000
Refinity	**Refinity ST**
	89900
SpinVision	**SpinVision**

Products subject to country availability. Please contact your local sales representative.

Physiology

OmniWire	**OmniWire 185cm straight**	**OmniWire 185cm J-tip**
	89185	89185J
Verrata Plus	**Verrata Plus 185cm straight**	**Verrata Plus 185cm J-tip**
	10185 P	10185J P

Therapy disposables

AngioSculpt RX PTCA	**Angiosculpt 2.0x6mm**	**Angiosculpt 2.0x10mm**	**Angiosculpt 2.0x15mm**
	2200-2006	2200-2010	2200-2015
	Angiosculpt 2.5x6mm	**Angiosculpt 2.5x10mm**	**Angiosculpt 2.5x15mm**
	2200-2506	2200-2510	2200-2515
	Angiosculpt 3.0x6mm	**Angiosculpt 3.0x10mm**	**Angiosculpt 3.0x15mm**
	2200-3006	2200-3010	2200-3015
	Angiosculpt 3.5x6mm	**Angiosculpt 3.5x10mm**	**Angiosculpt 3.5x15mm**
	2200-3506	2200-3510	2200-3515

Elca	**Elca 0.9 mm X-80**	**Elca 1.4 mm**
	110-004	110-009
	Elca 1.7 mm	**Elca 2.0 mm**
	117-106	120-009

Laser systems

Philips Laser System	Philips Laser System
	LAS-100
CVX-300	CVX-300
	CVX-300-P

Products subject to country availability. Please contact your local sales representative.

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Products subject to country availability. Please check with your local sales representative.

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