

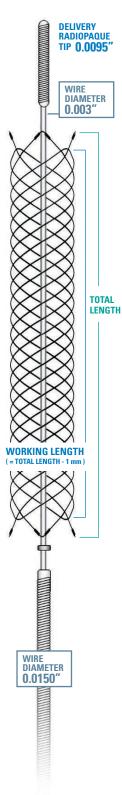


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DELIVERY SYSTEM	Microcatheter compatibility	Headway™ 17 Advanced Microcatheter Scepter™ C & XC Balloon Catheters		
	Material	DFT (Drawn Filled Tube) wire Nitinol wire with platinum core		
	No. of wire paths	16		
IMPLANT	Length of finished ends	0.5 mm		
	Radiopaque markers on finished ends	4 distal, 4 proximal		
	Metal coverage	17 - 28%		
PUSHER	Material	Distal portion: Nitinol; Proximal portion: Stainless steel		
	Material of distal radiopaque tip	Platinum		
	Length of distal radiopaque tip	5 mm		
	Fluorosafe marker	148 ± 1 cm from distal tip		

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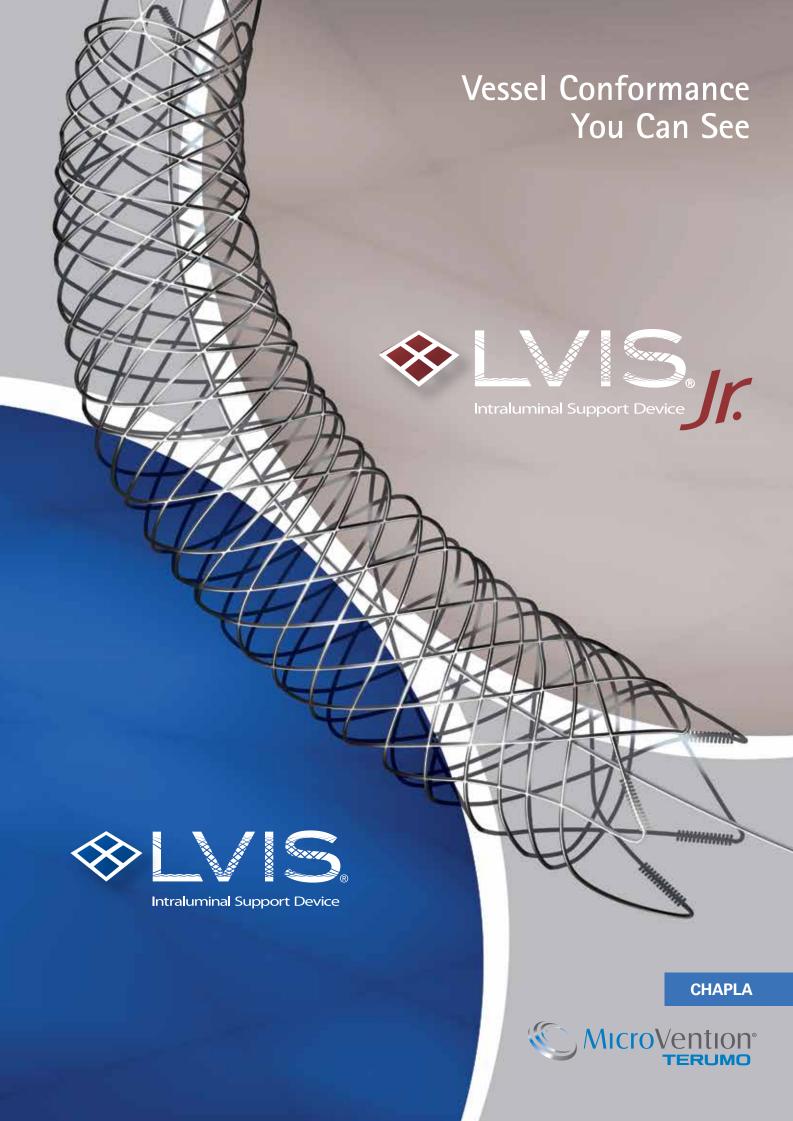
LABELED DIAMETER x TOTAL LENGTH	PRODUCT CODE	UNDEPLOYED TOTAL LENGTH	TOTAL LE	NGTH IN DIF	FERENT VES	SEL DIAMET	ERS (mm)
(mm)		(mm)	2.0 mm	2.5 mm	3.0 mm	3.5 mm	4.0 mm
2.5 x 12	LEV2512	20	16	12			
2.5 x 17	LEV2517	29	23	17			
2.5 x 22	LEV2522	38	30	22			
2.5 x 27	LEV2527	47	36	27			
3.0 x 18	LEV3018	34	28	24	18		
3.0 x 24	LEV3024	44	37	32	24		
3.0 x 28	LEV3028	54	46	39	28		
3.0 x 32	LEV3032	60	50	43	32		
3.5 x 17	LEV3517	32	28	26	22	17	
3.5 x 22	LEV3522	44	39	35	30	22	
3.5 x 28	LEV3528	56	49	44	37	28	
3.5 x 34	LEV3534	67	60	53	45	34	
4.0 x 13	LEV4013	22		20	18	15	13
4.0 x 18	LEV4018	36		31	28	24	18
4.0 x 21	LEV4021	43		36	33	28	21
4.0 x 27	LEV4027	56		48	43	37	27
4.0 x 31	LEV4031	63		53	48	41	31



**INTENDED PURPOSE:** The LVIS EVO Device is intended for use with embolic coils for the treatment of intracranial neurovascular diseases. For Healthcare professional use only.



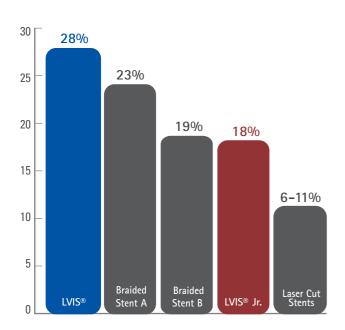
MicroVention Deutschland GmbH Hildebrandtstr. 4 F D-40215 Düsseldorf Germany

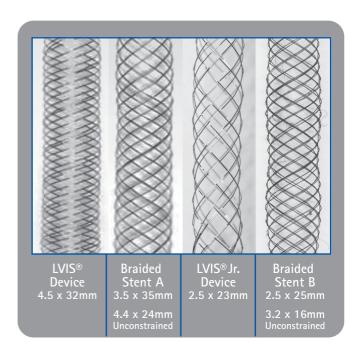


### High Neck Coverage<sup>1</sup>

## The LVIS® and LVIS® Jr. Devices provide a high level of neck coverage.1

- Excellent support for the coil mass¹
- Works well with small finishing coils
- Works well in wide-necked and blister aneurysms

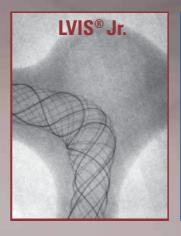


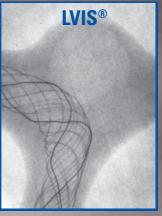


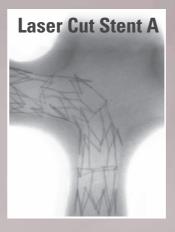
# Vessel Conformance You Can See vs. Laser Cut Stents

The LVIS® and LVIS® Jr. Devices offer greater conformance<sup>2</sup> to the vessel wall than the laser cut stents, minimizing obstruction of the parent vessel.

- Braided design allows LVIS® and LVIS® Jr. Stents to expand to the vessel wall better than laser cut stents
- Ability to visualize the entire stent body helps ensure the stent is apposed to the vessel wall
- Ability to alter mesh density and increase neck coverage in bifurcation aneurysms may allow use of a single stent in many cases









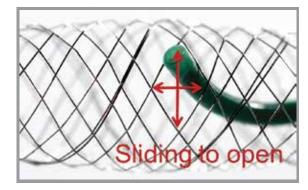
#### Versatility and Easy to Control

Coil Assist Stent Delivery Catheters						
STENT	DELIVERY CATHETER	CATHETER CATHETER DISTAL OD		CATHETER PROXIMAL OD		
LVIS® Jr.	Headway® 17	0.017"	1.7F	2.4F		
LVIS®	Headway® 21	0.021"	2.0F	2.5F		
Neuroform Atlas <sup>™</sup>	SL-10 <sup>™</sup> XT-17 <sup>™</sup>	0.0165" 0.017"	1.7F 1.7F	2.4F 2.4F		
NeuroForm EZ®	XT-27™	0.027"	2.7F	2.9F		
Enterprise™	Prowler® Select Plus	0.021"	2.3F	2.7F		
Solitaire™	Rebar™18	0.021"	2.4F	2.8F		
Leo <sup>™</sup> + 3.5	Vasco+21	0.0236"	2.4F	3.1F		
Leo <sup>™</sup> + 4.5	Vasco+25	0.0283"	3.0F	3.3F		
Leo <sup>™</sup> + 5.5	Vasco+28	0.0323"	3.3F	3.4F		

Retrievability increases confidence to attain the desired landing zones.
At least 3mm of stent must remain in the microcatheter to resheath the LVIS® Device. The user may resheath and redeploy up to 3 times.

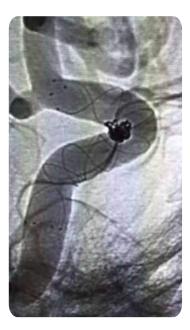
The LVIS® and LVIS® Jr. Devices provide many options during stent assisted coiling procedures. Deliver through low profile catheters, visualize the stent as it is deployed, change the mesh density, and more.

- Easily navigate to smaller vessels by delivering LVIS® and LVIS® Jr. Stents through low profile delivery systems, Headway® 21 & 17 Microcatheters
- Braided design allows wires to slide, enabling expansion of individual stent cells for easier delivery of coils



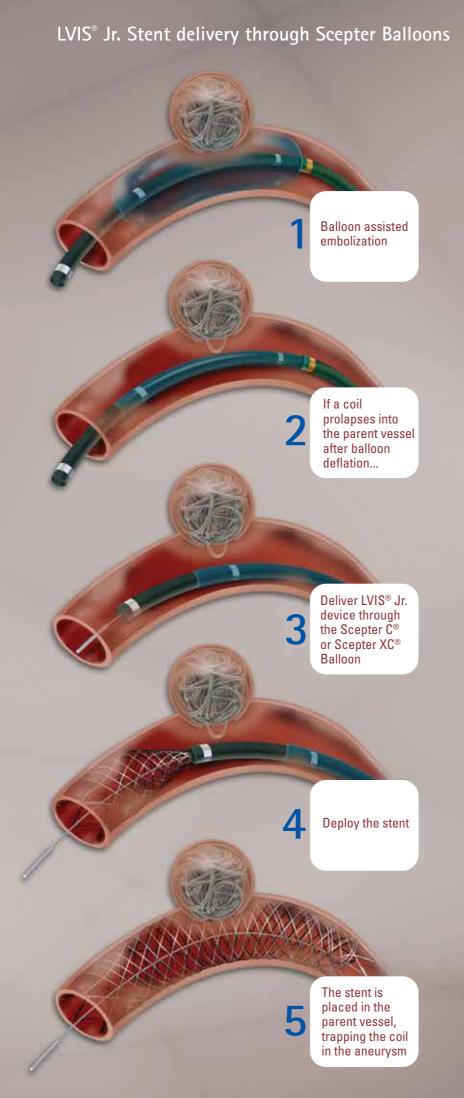


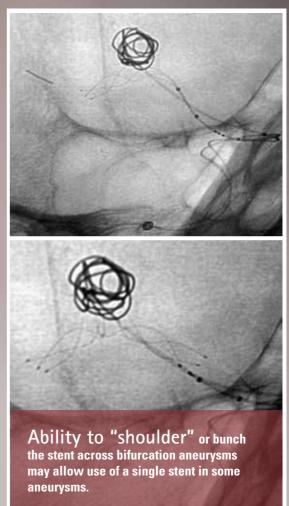






Case images courtesy of Dr. Todd Peebles, ThedaCare Regional Medical Center-Neenah, WI USA.







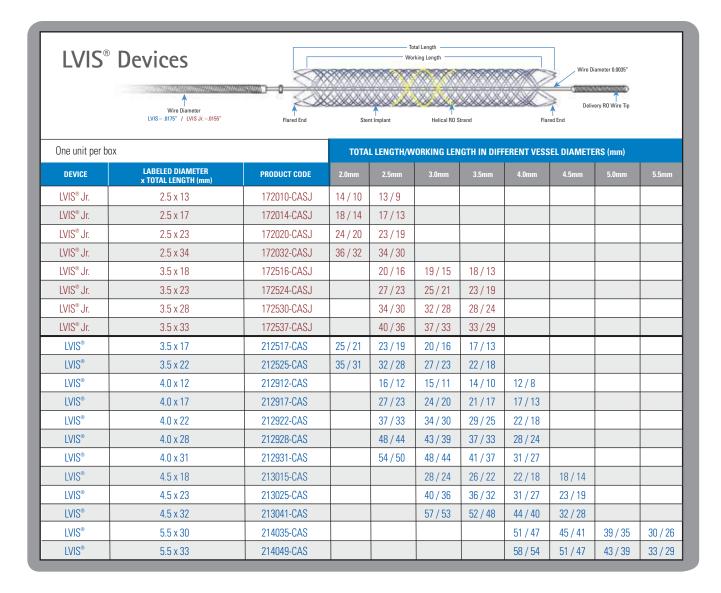
## Next Generation Coil Assist Stent Technology

Visibility and braided design allow physicians to control and adjust placement of the stent.

- Radiopaque proximal and distal markers provide visibility for stent placement and opening
- Flared Ends—provide anchoring to eliminate stent migration
- Nitinol Wire Braid—shape memory alloy provides excellent conformance in tortuous vessels
- Helical radiopaque strands—enable visualization of the entire stent body
- Compliant cell system—allows cells to move, enabling manipulation of mesh density and easy access through the stent cells

#### **Design Features**

ATTRIBUTE	LVIS® Jr.	LVIS®	FEATURE	
Number of Wires	12	16	Flex and fully expand to conform to the vessel	
Microcatheter Compatibility	0.017"	0.021"	Delivery through low profile delivery systems	
Flared Ends	3	4	Help anchor the stent	
Radiopaque Strands	3	2	Enables visualization of the entire stent body	
Implant Wire Diameter	.0024"	.0024"	Allows delivery through low profile catheter system	
Retrievable	Up to 3mm of stent within the catheter	Up to 3mm of stent within the catheter	Provides confidence with deployment	
Cell Size	1.5mm	0.8mm	Ensures small finishing coils stay in the aneurysm	
Metal Coverage	18%	28%	High neck coverage to enhance clinical outcomes	
Radiopaque Markers	3 distal 3 proximal	4 distal 4 proximal	Ensure proper control of proximal and distal ends expansion	
Fluorosafe Marker	148cm from distal tip	148cm from distal tip	Designed to reduce radiation exposure to patient	



DEVICE	NUMBER OF WIRES	NUMBER OF FLARED ENDS	# OF HELICAL RO STRANDS	DELIVERY WIRE CORE MATERIAL	DELIVERY RO WIRE TIP OD (INCH)	DELIVERY RO WIRE TIP LENGTH (MM)
LVIS® Jr.	12	3	3	Stainless Steel	0.006"	5mm
LVIS®	16	4	2	Nitinol	0.006"	10mm

<sup>&</sup>lt;sup>1</sup> Data on file at MicroVention: TR17-117

The LVIS® Jr. Device is compatible with the Headway® 17 Microcatheter, Scepter C® and Scepter XC® Occlusion Balloons. The LVIS® Device is compatible with the Headway® 21 Microcatheter. For Professional Use Only.

INDICATIONS FOR USE (EU): The LVIS® device is intended for use with embolic coils for the treatment of intracranial

Please contact local MicroVention representatives for indications in your region



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<sup>&</sup>lt;sup>2</sup> Krischek Ö et al. A comparison of functional and physical properties of self expanding intracranial stents. Minim Invas Neurosurg 2011; 54; 21-28.