Allure™ RF

Cardiac Resynchronisation Therapy Pacemaker

Merlin@home™ Transmitter Compatible

Product Highlights

- Angled header and physiologic tear drop shape provide better lead wrap
- CorVue™ Congestion Monitoring feature monitors the intrathoracic impedance and provides the option for both patient and physician alerts
- The DirectTrend™ Report provides a summary of three month daily, one year weekly or one year daily diagnostic trends
- Better patient unitilization from Day 1 when paired with the Merlin@home™ transmitter at point of care
- AT/AF Alerts can be programmed to notify patients and their clinics when a programmed AT/AF threshold or continuous episode duration has been exceeded, or when a high ventricular rate accompanies the AT/AF episode
- Exclusive AF Suppression™ algorithm is clinically proven to suppress episodes of paroxysmal and persistent AF
- AT/AF burden trend provides a graphical representation of the percentage of time in AT/AF and the number of AT/AF episodes in the previous 52 weeks
- Up to 14 minutes of stored electrograms help identify key intrinsic and pacemaker-related events and simplify the diagnosis of complex ECG rhythms associated with heart failure
- Industry-leading longevity offers 8.2 years of service life supported by a 6 year warranty*

Ordering Information

Contents: Cardiac pulse generator

Model Number	Dimensions (H x W x T, mm)	Weight (g)	Volume (cc)	Connector
PM3222	55 x 59 x 6	24	14	IS-1

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Date: 2022.06.17 13:19:45 EEST
Reason: MoldSign Signature
Location: Moldova

*Longevity calculated based on the following settings: 2.5 V, 500 Ohm, 60 BPM, 100% DDD-BiV Pacing, 0.4ms, Cap Confirm Off, and Stored EGM On

Indications: Implantation of Allure and Allure RF devices is indicated for: maintaining synchrony of the left and right ventricles in patients who have undergone an AV nodal ablation for chronic atrial fibrillation and have NYHA Class II or III heart failure, the reduction of the symptoms of moderate to severe heart failure (NYHA Class III or IV) in those patients who remain symptomatic despite stable, optimal medical therapy, and have a left ventricular ejection fraction ≤ 35% and a prolonged QRS duration, implantation of Assurity, Endurity and Allure family of devices is indicated in one or more of the following permanent conditions: syncope, presyncope, fatigue, disorientation, or any combination of those symptoms. ***Rate-Modulated Pacing*** is indicated for patients with chronotropic incompetence, and for those who would benefit from increased stimulation rates concurrent with physical activity. ***Dual-Chamber Pacing*** is indicated for those patients exhibiting: sick sinus syndrome, chronic, symptomatic second- and third-degree AV block, recurrent Adams-Stokes syndrome, symptomatic bilateral bundle branch block when tachyarrhythmia and other causes have been ruled out. ***Atrial Pacing*** is indicated for patients with sinus node dysfunction and normal AV and intraventricular conduction systems. ***Ventricular Pacing*** is indicated for patients with significant bradycardia and normal sinus rhythm with only rare episodes of A-V block or sinus arrest, chronic atrial fibrillation, severe physical disability. ***AF Suppression*** algorithm is indicated for suppression of paroxysmal or persistent atrial fibrillation episodes in patients with one or more of the above pacing indications.

Contraindications: Implanted Cardioverter-Defibrillator (ICD). Devices are contraindicated in patients with an implanted cardioverter-defibrillator. Rate-Adaptive Pacing may be inappropriate for patients who experience angina or other symptoms of myocardial dysfunction at higher sensor-driven rates. An appropriate Maximum Sensor Rate should be selected based on assessment of the highest stimulation rate tolerated by the patient. AF Suppression stimulation is not recommended in patients who cannot tolerate high atrial-rate stimulation. ***Dual-Chamber Pacing***, though not contraindicated for patients with chronic atrial flutter, chronic atrial fibrillation, or silent atria, may provide no benefit beyond that of single-chamber pacing in such patients. ***Single-Chamber Ventricular Demand Pacing*** is relatively contraindicated in patients who have demonstrated pacemaker syndrome, have retrograde VA conduction, or suffer a drop in arterial blood pressure with the onset of ventricular pacing. ***Single-Chamber Atrial Pacing*** is relatively contraindicated in patients who have demonstrated compromise of AV conduction. ***Atrial Fibrillation***. Anthem devices are contraindicated in patients having chronic atrial fibrillation or intermittent atrial fibrillation that does not terminate. For specific contraindications associated with individual modes, refer to the programmer's on-screen help.

Potential Adverse Events: The following are potential complications associated with the use of any pacing system: air embolism, body rejection phenomena, cardiac tamponade or perforation, hematoma, bleeding hematoma, seroma, formation of fibrotic tissue, local tissue reaction, inability to interrogate or program due to programmer or device malfunction, infection/erosion, interruption of desired pulse generator function due to electrical interference, either electromyogenic or electromagnetic, lead malfunction due to conductor fracture or insulation degradation, loss of capture or sensing due to lead dislodgement or reaction at the electrode/tissue interface, loss of desired pacing and/or sensing due to lead displacement, body reaction at electrode interface, or lead malfunction (fracture or damage to insulation), loss of normal device function due to battery failure or component malfunction, pacemaker migration or pocket erosion, pectoral muscle or diaphragmatic stimulation, phrenic nerve stimulation, pneumothorax/hemothorax, endocarditis, excessive bleeding, induced atrial or ventricular arrhythmias, myocardial irritability, pericardial effusion, pericardial rub, pulmonary edema, rise in threshold and exit block, valve damage, cardiac/coronary sinus dissection, cardiac/coronary sinus perforation, coronary sinus or cardiac vein thrombosis.

Refer to the User's Manual for detailed indications, contraindications, warnings, precautions and potential adverse events.

Customer Support: 46-8-474-4756

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ST. JUDE MEDICAL
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Allure™ RF

Cardiac Resynchronisation Therapy Pacemaker

Product Specifications

PHYSICAL SPECIFICATIONS	
Model	**PM3222**
Telemetry	RF
Dimensions (mm)	55 x 59 x 6
Weight (g)	24
Volume (cc)[1]	14
Connector	IS-1

PARAMETER	SETTINGS
Resynchronisation Therapy	
QuickOpt™ Timing Cycle Optimisation	Sensed/Paced AV Delay; Interventricular Paced Delay
RV and LV Pulse Width (ms)	0,05; 0,1–1,5 in steps of 0,1
RV and LV Pulse Amplitude (V)	0,25–4,0 in steps of 0,25; 4,5–7,5 in steps of 0,5
RV Pulse Configuration	Unipolar; Bipolar
LV Pulse Configuration	Unipolar; Bipolar; LV Tip-RV Ring; LV Ring-RV Ring
Ventricular Sense Configuration	BV Unipolar Tip; BV Bipolar; RV Unipolar Tip; RV Bipolar; LV Unipolar Tip; LV Bipolar; RV Unipolar Ring; LV Tip-RV Tip
Ventricular Pacing Chamber	BV; RV only; LV only (temporary mode)
First Chamber Paced	Simultaneous[2]; RV; LV
Interventricular Pace Delay (ms)	10–80 in steps of 5
Output/Sensing	
Negative AV Hysteresis Search (ms)	Off; -10 to -120 in steps of 10
Shortest AV/PV Delay (ms)	25–50 in steps of 5; 60–120 in steps of 10
Atrial ACap™ Confirm	On; Off; Monitor
Primary Pulse Confirmation	Bipolar
Backup Pulse Confirmation	Bipolar
Backup Pulse Amplitude (V)	5,0
Searchable Intervals (hrs)	8; 24
Atrial Pulse Configuration	Unipolar (tip–case); Bipolar (tip–ring)
Atrial Sense Configuration	Unipolar Tip (tip–case); Bipolar (tip–ring); Unipolar Ring (ring–case)
Atrial Sensitivity[3,4] (Fixed) (mV)	0,1–0,5 in steps of 0,1; 0,75–2,0 in steps of 0,25; 2,5–5,0 in steps of 0,5
Atrial Pulse Amplitude (V)	0,25–4,0 in steps of 0,25; 4,5–7,5 in steps of 0,5
Atrial Pulse Width (ms)	0,05; 0,1–1,5 in steps of 0,1
RVCap™ Confirm	On; Off; Monitor
Searchable Interval (hrs)	8; 24
LVCap™ Confirm	On; Off; Monitor
Searchable Interval (hrs)	8; 24
Sense*Ability*™ Technology	Off; On (Automatic Sensitivity Control adjustment for atrial and ventricular events)
A Max Sensitivity (mV)	0,2-1,0 in steps of 0,1
V Max Sensitivity (mV)	0,2-2,0 in steps of 0,1
Threshold Start	(Atrial and Ventricular Post-Sense) 50; 62,5; 75; 100% (Atrial Post-Pace) 0,2-3,0 in steps of 0,1 mV (Ventricular Post-Pace) Auto; 0,2-3,0 in steps of 0,1 mV
Decay Delay (ms)	(Atrial and Ventricular Post-Sense) 0; 30; 60; 95; 125; 160; 190; 220 (Atrial Post-Pace) 0; 30; 60; 95; 125; 160; 190; 220 (Ventricular Post-Pace) Auto; 0; 30; 60; 95; 125; 160; 190; 220
Ventricular Sensitivity (fixed) (mV)	0,5-12,5 in steps of 0,5[3,4]
Rate/Timing	
Mode	A00(R); AAI(R); AAT(R); VOO(R); VVI(R); VVT(R); DOO(R); DVI(R); DDI(R); DDT(R); DDD(R); VDD(R); Pacing Off
DDT Trigger[5]	R wave
DDT Timing[5]	DDI
Base Rate (min^{-1})	30–130 in steps of 5; 140–170 in steps of 10
Hysteresis Rate (min^{-1})	Off; 30-150 in steps of 5[6]
Search Interval (min)	Off; 1; 5; 10; 15; 30
Cycle Count	1–16
Intervention Rate (min^{-1})	Off; Same Base Rate; 80-120 in steps of 10 (Intrinsic +0; Intrinsic +10; Intrinsic +20; Intrinsic +30)
Intervention Duration (min^{-1})	1–10
Recovery Time	Fast; Medium; Slow; Very Slow
Rest Rate (min^{-1})	Off; 30-150 in steps of 5
Maximum Tracking Rate (min^{-1})	90–130 in steps of 5; 140–180 in steps of 10
Sensed AV Delay (ms)	25; 30–200 in steps of 10; 225–325 in steps of 25
Paced AV Delay (ms)	25; 30–200 in steps of 10; 225–300 in steps of 25; 350
Ventricular Pace/Sense Refractory[7] (Fixed) (ms)	125; 160-400 in steps of 30; 440; 470[8]
Atrial Pace Refractory	190-400 in steps of 30; 440; 470[8]
Atrial Sense Refractory	93; 125; 157; 190-400 in steps of 30; 440; 470[8]
PVARP (ms)	125–500 in steps of 25
Atrial Protection Interval (ms)[5]	125
Far-Field Protection Interval (ms)[5]	16

1 ± 0,5 cc
2 LV first with 10 ms interventricular delay.
3 Sensitivity is with respect to a 20 ms haversine test signal.
4 Values 0,1-0,4 not available in a Unipolar Sense Configuration.
5 This parameter is not programmable.
6 The highest available setting for hysteresis rate is 5 min^{-1} below the programmed base rate.
7 In dual-chamber modes, the maximum Ventricular Refractory Period is 325 ms.
8 Programming options dependent on pacing mode.
9 During atrial NIPS in dual-chamber modes, the shortest Coupling Interval will be limited by the programmed AV/PV Delay.
10 S1 Burst Cycle is applied at the preprogrammed S1 cycle length.

Rate-Modulated	
Rate Responsive AV/PV Delay	Off; Low; Medium; High
Rate Responsive PVARP/VREF	Off; Low; Medium; High
Shortest PVARP/VREF	125–475 in steps of 25
Sensor	On; Off; Passive
Max Sensor Rate (min^{-1})	80–150 in steps of 5; 160-180 in steps of 10
Threshold	Auto (-0,5); Auto (+0,0); Auto (+0,5); Auto (+1,0); Auto (+1,5); Auto +(2,0); 1-7 in steps of 0,5
Slope	Auto (-1); Auto (+0); Auto (+1); Auto (+2); Auto (+3); 1-16
Reaction Time	Very Fast; Fast; Medium; Slow
Recovery Time	Fast; Medium; Slow; Very Slow
AF Management	
AF Suppression™ Algorithm	Off; On
Lower Rate Overdrive (min^{-1})[5]	10
Upper Rate Overdrive (min^{-1})[5]	5
No. of Overdrive Pacing Cycles	15–40 in steps of 5
Rate Recovery (ms)	8; 12
Auto Mode Switch	Off; DDD(R) to DDI(R); DDD(R) to DDT(R); DDD(R) to VVI(R); DDD(R) to VVT(R); VDD(R) to VVI(R); VDD(R) to VVT(R)
AMS Base Rate (min^{-1})	40-170 in steps of 5
Stored Electrograms	
Options	
Priority Options	Off; Low; High
Channel	1; 2; 3
Triggers	
Advanced Hysteresis	Off; Low; High
AMS Entry/AMS Exit/ AMS Entry and Exit	Off; Low; High
AT/AF Detection	Off; Low; High
Magnet Response	Off; Low; High
High Atrial Rate	Off; Low; High
Rate (min^{-1})	125-300 in steps of 25
No. of Consecutive Cycles	2; 3; 4; 5; 10; 15; 20
High Ventricular Rate	Off; Low; High
Rate (min^{-1})	125-300 in steps of 25
No. of Consecutive Cycles	2; 3; 4; 5; 10; 15; 20
PMT Termination	Off; Low; High
Consecutive PVCs	Off; Low; High
No. of Consecutive PVCs	2; 3; 4; 5
Noise Reversion	Off; Low; High
Other	
Magnet Response	Off; Battery Test
Ventricular Intrinsic Preference, VIP™ (ms)	Off; 50–150 in steps of 25; 160-200 in steps of 10
VIP Search Interval	30 sec.; 1; 3; 5; 10; 30 min.
VIP Search Cycles	1; 2; 3
of the Atrial Tachycardia Detection Rate (min^{-1})	110–200 in steps of 10; 225–300 in steps of 25
Post Vent. Atrial Blanking (PVAB) (ms)	60-200 in steps of 10; 225; 250
Ventricular Safety Standby	Off; On
PVC Response	Off; Atrial Pace[8]
PMT Options	Off; Passive; Atrial Pace[8]
PMT Detection Rate (min^{-1})	90–180 in steps of 5
Lead Type	Uncoded; Unipolar; Bipolar
NIPS Options	
Stimulation Chamber	Atrial; Right Ventricular
Coupling Interval[9] (ms)	200-800 in steps of 10
S1 Count	2-25 in steps of 1
S1[10]; S2; S3 and S4 Cycle (ms)	Off; 100–800 in steps of 10 (Fixed or Adaptive)
Right Ventricular Support Rate (min^{-1})	Off; 30-95 in steps of 5
Sinus Node Recovery Delay (s)	1-5 in steps of 1
Diagnostic Trends	AT/AF Activity; Exercise; Lead Impedance; P and R Wave; A and V threshold, CorVue™ Congestion Monitoring
CorVue™ Congestion Monitoring	Off; On
CorVue Congestion Trigger	8-18 days
Patient Notifiers	
Programmable Notifiers (On; Off)	Device at ERI; Atrial Lead Impedance Out of Range; Ventricular Lead Impedance Out of Range; LV Lead Impedance Out of Range; AT/AF Burden; AT/AF Episode Duration; High V Rate During AT/AF; High V Rate; Percent BiV/RV Pacing Alert; CorVue Alert
Device Reset	On
Entry into Backup VVI Mode	On
Audible Duration (sec)	2; 4; 6; 8; 10; 12; 14; 16
Number of Audible Alerts per Notification	2
Number of Notifications	1–16
Time Between Notifications (hours)	10; 22

Customer Support: 46-8-474-4756

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Item GMCRM1094EN

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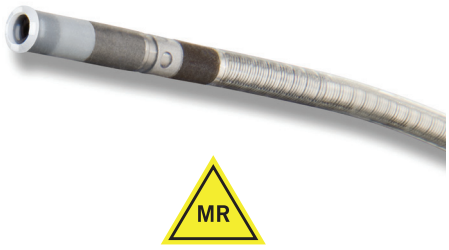
GMCRM1094EN

Tendril™ STS

Pacing Lead



Product Highlights - Pacing Lead

- The Tendril STS lead allows patients to undergo MRI scans when used in conjunction with a MRI Ready pacemaker from St. Jude Medical
  - Allows MRI scans (See Parameter Settings for scan exclusion zone)
  - Permits a maximum whole body averaged specific absorption rate (SAR) of 2 watts per kilogram (W/kg)
- Soft silicone tip offers more compliance and less tip pressure at the lead tip-endocardium interface
- Small diameter lead offers improved ease of venous passage, reduced risk of venous thrombosis or rib-clavicle crush and ability to accommodate additional leads more easily
- Optim™ lead insulation—a chemical co-polymer that blends the best features of polyurethane and silicone for improved handling and increased durability
- Titanium nitride (TiN) fractal coating on the tip and ring electrodes is designed to promote precise sensing and to provide improved contact with the myocardium
- Lubricious Fast-Pass™ coating facilitates lead insertion through the introducer and veins to ease implantation
- Fits through a 6 F introducer

Ordering Information - MRI-Ready Pacing System

Model Number	Description	Insulation	Fixation	Min. Introducer (F)	Connector	Length (cm)
2088TC	Tendril™ STS Pacing Lead	Optim™	Ext/Ret helix	6	IS-1 bipolar	46*; 52*; 58*; 65; 100

* Indicates lead lengths that are MRI conditional with a scan exclusion zone.

Model Number	Description	Dimensions (H x W x T, mm)	Weight (g)	Volume (cc)	Connector
PM1140	Endurity™ Core Pacemaker	41 x 50 x 6	19	9,7 (± 0,5)	IS-1
PM2140	Endurity Core Pacemaker	46 x 50 x 6	19	10,4 (± 0,5)	IS-1
PM1152	Endurity Core Pacemaker	41 x 50 x 6	19	9,7 (± 0,5)	IS-1
PM2152	Endurity Core Pacemaker	46 x 50 x 6	19	10,4 (± 0,5)	IS-1
PM1162	Endurity Pacemaker	41 x 50 x 6	19	9,7 (±0,5)	IS-1
PM2162	Endurity Pacemaker	46 x 50 x 6	19	10,4 (± 0,5)	IS-1
PM1172	Endurity MRI™ Pacemaker	41 x 50 x 6	19	9,7 (± 0,5)	IS-1
PM2172	Endurity MRI Pacemaker	46 x 50 x 6	19	10,4 (± 0,5)	IS-1
PM1272	Assurity MRI™ Pacemaker	47 x 50 x 6	20	10,4 (±0,5)	IS-1
PM2272	Assurity MRI Pacemaker	47 x 50 x 6	20	10,4 (±0,5)	IS-1

Indications: Tendril™ STS lead is designed for permanent sensing and pacing in either the right atrium or the right ventricle, in combination with a compatible device. Active leads such as the Tendril STS lead may be indicated for patients where permanent fixation of passive leads is suspected to be unstable.

In atrial applications, the use of screw-in leads such as Tendril STS lead may be indicated in the presence of an abnormal, surgically altered or excised atrial appendage.

Contraindications: Tendril STS lead is contraindicated: in the presence of tricuspid atresia, for patients with mechanical tricuspid valves, in patients who are expected to be hypersensitive to a single dose of one milligram of dexamethasone sodium phosphate.

Adverse Events: Potential complications associated with the use of Tendril STS lead are the same as with the use of other active fixation leads and include: cardiac tamponade, diaphragmatic stimulation, embolism, excessive bleeding, induced ventricular ectopy, infection, loss of pacing and/or sensing due to dislodgment or mechanical malfunction of the pacing lead, phrenic nerve stimulation, thrombosis. Complications reported with direct subclavian venipuncture include pneumothorax, hemothorax, laceration of the subclavian artery, arteriovenous fistula, neural damage, thoracic duct injury, cannulation of other vessels, massive hemorrhage and, rarely, death.

Refer to the User's Manual for detailed indications, contraindications, warnings, precautions and potential adverse events.

ST. JUDE MEDICAL

Tendril™ STS

Pacing Lead

Product Specifications - Pacing Leads

PHYSICAL SPECIFICATIONS

Model	2088TC
Minimum Introducer Size	6 F
Type of Lead	Active-fixation, bipolar, steroid-eluting, endocardial, pacing lead
Lead Connector	IS-1 bipolar
Lead Lengths	46; 52; 58; 65; 100 cm
Fixation Mechanism	Extendable/Retractable helix
Typical Number of Rotations for Helix Extension	6-11 (straight stylet)
Lead Body Diameter	1,9 mm (max)
Tip-to-Ring Spacing	10 mm
Lead Tip Electrode (Cathode)	Active titanium-nitride-coated Pt/Ir helix (2,0 mm extension)
Tip Electrode Surface Area	6,9 mm^2
Ring Electrode (Anode)	Titanium-nitride-coated Pt/Ir
Ring Electrode Surface Area	16 mm^2
Mapping	Capable with titanium-nitride-coated Pt/Ir helix
Steroid	< 1 mg dexamethasone sodium phosphate
Inner Conductor/Outer Conductor	MP35N™* coil
Inner Insulation	Silicone rubber
Outer Insulation	Optim™ lead insulation
Lead Body Coating	Fast-Pass™ coating

In Pack

Straight stylets	1 x-soft in lead; 1 x-soft; 1 soft
J-curved stylets	2 soft
Helix extension/retraction clip-on tools	2 clip-on tools

Accessory Kits

Available Separately	Model Number	Compatible Lengths	Description
Stylet Kit	DSO6002 with appropriate length designation	46; 52; 58; 65; 100 cm	1 fixation tool; 1 clip-on tool; 1 J-shaped soft; 1 x-soft; 1 soft; 1 firm; 1 x-firm
	DSO6003 with appropriate length designation	46; 52; 58; 65; 100 cm	1 clip-on tool; 1 J-shaped soft; 1 x-soft; 1 soft; 1 firm; 1 x-firm
Locator™ Plus Deflectable Stylet	1281 with appropriate length designation	46; 52; 58; 65 cm	Disposable implant tool to facilitate precise lead positioning and manipulation with one hand
	1292 with appropriate length designation	46; 52; 58; 65 cm	

MRI Conditional Parameters

Magnet strength: 1.5 Tesla
SAR: ≤ 2 W/kg
Scan region: Isocenter must be inferior to L4 or 10 cm superior to C1

*MP35N is a trademark of SPS Technologies, Inc.

Customer Support: 46-8-474-4756

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ST. JUDE MEDICAL™

QuickFlex™ µ

4F Bipolar, Optim™ Insulation-Insulated, Left Ventricular Pacing Lead

MODEL 1258T

SPECIFICATIONS

St. Jude Medical's innovative QuickFlex™µ lead—the latest in lead technology—is designed to provide predictable outcomes through superb access, delivery and fixation.

Based on the QuickFlex™ lead family, this 4 F bipolar lead features a narrow ring electrode for lead tip flexibility, and a steerable tip for control and deliverability. The large S-curve provides superior fixation for this small diameter lead. The 4.3 F lead body diameter allows Direct-to-Target™ placement through a sub 5 F inner catheter to deliver leads to small, acute venous anatomies that may have been unreachable in the past.

The addition of the QuickFlex µ lead to the QuickFlex CRT family of leads provides implanters with even more lead options to enable predictable placement and stability for varied patient needs.

DESIGNED TO DELIVER

- Optim™ Lead Insulation
  - Optim insulation is a hybrid insulation material—the first of its kind developed specifically for cardiac lead use. It blends the biostability and flexibility of high-performance silicone rubber with the strength, tear resistance and abrasion resistance of polyurethane. This insulation allows for an abrasion resistant, thin diameter lead.
- Low Profile
  - Entire lead body: 4,3 F
  - Lead tip: 4,0 F
- Flexible Lead Body
  - Tip-to-ring electrode spacing of 20 mm and reduced lengths of rigid portions (tip and ring) create superb flexibility.
- Steerable Tip
  - Distal tip angle can be controlled to maneuver the lead through venous anatomy.
- Over-the-Wire or Stylet-Approach Compatibility
  - Specially designed leads give the implanting physician the option of using either approach during the same procedure.
- Fast-Pass™ Lubricious Coating
  - Enables multiple leads to easily slide against one another, possibly reducing inadvertent dislodgement.

EXCEPTIONAL STABILITY AND PERFORMANCE

- S-Shaped for Stability
  - The S-curve shape is designed to provide enhanced lead stability in a wide variety of vein sizes.
- Options for Any Anatomy
  - The complete family of QuickFlex leads, including QuickFlex µ, QuickFlex and QuickFlex XL is a comprehensive suite of CRT leads with varying diameters and S-Shape sizes, providing options to enable predictable procedures — regardless of the patient's venous anatomy.
- Suture Sleeve
  - The new suture sleeve has been designed with silicone ridges to secure a thinner lead body.
- Titanium Nitride Coating (TiN)
  - TiN coating on the tip and ring electrodes has been shown to improve stimulation efficiency and lower polarisation.
- Steroid Elution
  - Steroid elution minimizes inflammatory reaction at the electrode-tissue interface and provides lower acute and chronic thresholds than non-steroid-eluting leads.

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MORE CONTROL. LESS RISK.

QuickFlex™ µ 4F Bipolar, Optim™ Insulation-Insulated, Left Ventricular Pacing Lead

MODEL **1258T**

SPECIFICATIONS

Parameter	Description
Connector	IS-1 Bipolar
Lead Length	75 cm, 86 cm, 92 cm
Lead Body Size	4,3 F (1,42 mm/0.056")
Tip Electrode Size	4,0 F (1,33 mm/0.052")
LV Lead Delivery System Introducer Size	Minimum 5 F ID
Minimum S-Curve Height	16 mm
Tip Electrode	Pt/Ir, TiN coated, ring-shaped, two grooves
Steroid	Dexamethasone sodium phosphate
Tip Electrode Surface Area	5,0 mm^2
Ring Electrode Surface Area	7,4 mm^2
Tip-to-Ring Electrode Spacing	20 mm
Lead Body Insulation	Optim™ insulation
Lead Body Coating	Fast-Pass™ coating
Conductors	
Distal (coil)	MP35N™
Proximal (cables)	MP35N™
Suture Sleeve	Attached

Indications and Usage
The QuickFlex lead has application as part of a St. Jude Medical™ biventricular system.

Contraindications
The use of QuickFlex leads is contraindicated in patients who:

- Are expected to be hypersensitive to a single dose of 1,0 mg of dexamethasone sodium phosphate.
- Are unable to undergo an emergency thoracotomy procedure.
- Have coronary venous vasculature that is inadequate for lead placement, as indicated by venogram.

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Item No. GMCRM391

CPS Direct™ Universal

Slittable Outer Guide Catheter

MODELS DS2C018, DS2C019, DS2C020, DS2C021, DS2C022, DS2C023, DS2C025, DS2C026, DS2C027, DS2C028, DS2C029

SPECIFICATIONS

- The CPS Direct Universal family of outer guide catheters is designed to facilitate left heart lead delivery. They are compatible with other products in the St. Jude Medical™ Cardiac Positioning System (CPS™) family – an inter-compatible system of tools designed to give you more control to efficiently and predictably deliver the left-heart lead to your vein of first choice.
- Enables Direct-To-Target™ delivery to the desired vein:
  - Soft, atraumatic tip with multi-durometer PEBAX™ shaft is designed to provide flexibility to allow advancement of the catheter deep into the coronary venous system.
  - CPS Direct™ Universal catheter is compatible with CPS Aim™ Universal inner catheters, designed to assist with branch vein subselection and left ventricular lead delivery , including delivery of the Quartet™ quadripolar LV lead.
- Designed to reduce procedural steps during implant:
  - Slittable hub and integrated shaft provide smooth transition during slitting of catheter.
  - U-channel valve bypass tool simplifies lead delivery.
  - Ergonomic slitter facilitates smooth slitting.
- Designed to provide reliable coronary sinus access:
  - Excellent torque transmission and soft, atraumatic tip due to braid-reinforced, multi-durometer PEBAX™* material design.
  - Unique SiteMark™ 3D markers provide fluoroscopic visibility to determine anterior/posterior location and verify torque transfer.
  - Six curve options to satisfy needs of various anatomies and different implanter techniques.
  - Compatible with CPS Aim™ Universal cannulators and CPS Luminary™ bideflectable catheter with lumen to modify shape and extend reach if necessary.
- Designed for worry-free removal:
  - Catheter design features Smooth-Slit™ braiding technology and ergonomic slitter, designed to allow effortless, best-in-class cutting, minimizing the risk of lead dislodgement upon catheter removal.

PEBAX is a trademark of Arkema Inc.

ST. JUDE MEDICAL™

PHYSICAL SPECIFICATIONS

Slittable Outer Guide Catheter

Models	CURVE SHAPE	AVAILABLE LENGTH	OVERALL LENGTH	INNER DIAMETER	OUTER DIAMETER
DS2C018	Straight	47 cm	50.6 cm	8F (2.67mm)	10F (3.34mm)
DS2C019	115°	47 cm	50.6 cm	8F (2.67mm)	10F (3.34mm)
DS2C020	135°	47 cm	50.6 cm	8F (2.67mm)	10F (3.34mm)
DS2C021	Wide	47 cm	50.6 cm	8F (2.67mm)	10F (3.34mm)
DS2C022	X-Wide	47 cm	50.6 cm	8F (2.67mm)	10F (3.34mm)
DS2C023	Right Side	47 cm	50.6 cm	8F (2.67mm)	10F (3.34mm)
DS2C025	Straight	54 cm	57.6 cm	8F (2.67mm)	10F (3.34mm)
DS2C026	115°	54 cm	57.6 cm	8F (2.67mm)	10F (3.34mm)
DS2C027	135°	54 cm	57.6 cm	8F (2.67mm)	10F (3.34mm)
DS2C028	Wide	54 cm	57.6 cm	8F (2.67mm)	10F (3.34mm)
DS2C029	X-Wide	54 cm	57.6 cm	8F (2.67mm)	10F (3.34mm)

Material	Multi-durometer PEBAX™ material reinforced with stainless steel braid wire for a kink-resistant catheter shaft and soft distal tip. Lubricious coating on inner and outer surface.
Marker	Three gold marker bands and two tungsten stripes on distal tip.

ACCESSORIES

INCLUDED	SEPARATELY AVAILABLE
Dilator	CPS™ Universal Slitter
2 Valve bypass tools	CPS Direct™ Valve Bypass Tool
	Implant Kit

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One St. Jude Medical Drive
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Australia
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+61 2 9936 1222 Fax

SJMprofessional.com

ST. JUDE MEDICAL™

ARROW BALLOON WEDGE-PRESSURE CATHETERS

AT A GLANCE

- trusted catheters in use for over 30 years
- wide variety of catheter options, lengths and sizes
- enlarged distal lumen for clear visualization of waveforms
- most sizes matched to introducer size*
- easy handling:
  - good torque control
  - catheter length markings to confirm insertion depth
  - flotation control for secure positioning
  - easy determination of catheter tip position

SMOOTH FLEXIBLE CATHETER BODY FACILITATES INSERTION

- ARROW catheters are designed to provide a greater degree of torque control
- flotation control allows blood flow to carry the inflated balloon naturally through the ventricle and into the pulmonary artery
- catheter tip position may be determined by continuous pressure monitoring

CATHETER LENGTH MARKINGS

Each catheter has clear, easy to identify increment markings every 10 cm along the catheter body to confirm insertion depth.

WIDE RANGE OF SIZES AND LENGTHS ALLOW FOR MORE ACCURATE MATCHING OF PATIENT NEEDS TO CATHETER SIZES

ARROW balloon wedge-pressure catheters are available in French sizes 4, 5, 6, 7 and 8 for a more complete selection.

CONVENIENT PACKAGING

Each catheter is packaged in a sterile peel-pack tray with a control stroke syringe.

SIMULTANEOUS PRESSURE MONITORING

Double pressure lumen balloon wedge-pressure catheters are available in French sizes 5, 6 and 7, allowing determination of pressure gradients between adjacent parts of the heart as well as identifying a variety of congenital heart defects and obstructions.

Teleflex

WEDGE-PRESSURE CATHETERS

ARROW

SINGLE PRESSURE LUMEN BALLOON WEDGE-PRESSURE CATHETERS

REF.	FRENCH SIZE	INTRODUCER SIZE RECOMMENDED	USEFUL LENGTH	MAX. INFLATION[9] CAPACITY	INFLATED BALLOON DIAMETER	MAX. WIRE RECOMMENDED	
AI-07121	4 Fr.	5 Fr.	60 cm	0.60 cc	6.5 mm	0.021"	
AI-07122	4 Fr.	5 Fr.	110 cm	0.60 cc	6.5 mm	0.021"	
AI-07123	5 Fr.	5 Fr.	60 cm	0.75 cc	8.0 mm	0.025"	
AI-07124	5 Fr.	5 Fr.	110 cm	0.75 cc	8.0 mm	0.025"	
AI-07125	6 Fr.	6 Fr.	60 cm	1.00 cc	10.0 mm	0.035"	
AI-07126	6 Fr.	6 Fr.	110 cm	1.00 cc	10.0 mm	0.035"	
AI-07126-J	6 Fr.	6 Fr.	90 cm	1.00 cc	10.0 mm	0.035"	
AI-07127	7 Fr.	7 Fr.	110 cm	1.25 cc	11.0 mm	0.038"	
AI-07127-STC[10]	7 Fr.	7 Fr.	110 cm	1.25 cc	11.0 mm	0.038"	
AI-07128	8 Fr.	8 Fr.	110 cm	1.25 cc	11.0 mm	0.038"	

DOUBLE PRESSURE LUMEN BALLOON WEDGE-PRESSURE CATHETERS

REF.	FRENCH SIZE	INTRODUCER SIZE RECOMMENDED	USEFUL LENGTH	MAX. INFLATION[9] CAPACITY	INFLATED BALLOON DIAMETER	MAX. WIRE RECOMMENDED	EXIT PORT SPACING
AI-07025	5 Fr.	5 Fr.	80 cm	1.00 cc	8.0 mm	0.018"	proximal port exits 3 cm from tip
AI-07026	6 Fr.	6 Fr.	110 cm	1.00 cc	10.0 mm	0.021"	proximal port exits 3 cm from tip
AI-07141	6 Fr.	6 Fr.	110 cm	1.00 cc	10.0 mm	0.021"	proximal port exits 20 cm from tip
AI-07027	7 Fr.	7 Fr.	110 cm	1.50 cc	12.0 mm	0.025"	proximal port exits 3 cm from tip
AI-07143	7 Fr.	7 Fr.	110 cm	1.50 cc	12.0 mm	0.025"	proximal port exits 30 cm from tip

SPECIAL DOUBLE PRESSURE LUMEN BALLOON WEDGE-PRESSURE CATHETER

REF.	FRENCH SIZE	INTRODUCER SIZE RECOMMENDED	USEFUL LENGTH	MAX. INFLATION[9] CAPACITY	INFLATED BALLOON DIAMETER	MAX. WIRE RECOMMENDED	EXIT PORT SPACING
AI-07142	8 Fr.	8 Fr.	100 cm	1.50 cc	11.0 mm	both to 0.038"	proximal port exits 6 cm from tip

NOTE: 1. Contact Customer Service for available sizes. | 2. Except 4 Fr. where balloon is 4-1/2 Fr. | 3. Cardella, JF, Smith, TP, Darcy, MD, Hunter, DW, Castaneda-Zunigo, W, Amplatz, K. Balloon occlusion femoral angiography prior to in situ saphenous vein bypass. Cardiovascular and Intervential Radiology. (1987) 10: 181 – 187. | 5. Zeevi B, et al. A newly-Designed Double Pressure Balloon Catheter: Clinical Use in Congenital Heart Disease. Journal of Invasive Cardiology. 1989;1:3. | 6. Kelly DT, Krovetz IJ, Rowe RD. Double-Lumen Flotation Catheter for use in Complex Cardiac Anomalies. Circulation. 1971;44:910-913. | 7. Black IFS. Floating a Catheter into the Pulmonary Artery in Transportation of Great Arteries. Am Heart J. 1972;84:761-763. | 8. Radiopaque marker just in front of proximal port provides convenient point for catheter port location. | 9. CO_2 is the recommended inflation media. See instructions for use prior to using air. Do not use any liquid to inflate balloon. | 10. STC = Super Torque Control

FEATURES

- unique tapered construction of the balloon allows the catheter to be matched to the introducer size*

** except 4 Fr.*

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WWW.TELEFLEX.COM
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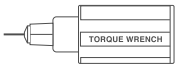
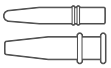
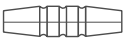
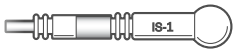
Model Number	Device
AC-0160	Test Magnet 90 gauss at 1"
405	Test Magnet 90 gauss at 1"
60007717-001	Vein Pick 
442-2	Torque Wrench (#2) 
437-246	Set of “L” Hex Wrenches (#2, #4, #6) 
4033A	DF4/IS-1/DF-1 Lead Terminal Cap 
6201	FasTac™ Flex Epicardial Lead Implant Tool
4080	Lead Removal Tool
DS0A001	Suture Sleeve (radiopaque 7.0 F) 
SS-1056	Suture Sleeve (radiopaque) 
AC-0130	Silicone Oil
424	Medical Adhesive
FL-1056	Lead Flushing Tool
AC-TD	Torque Driver (#2 wrench)
4071	Torque Tool and Tip Introducer
AC-IP-2	IS-1 Port Plug 
AC-DP-3	DF-1 Port Plug
AC-IS4PP	IS4/DF4 Port Plug
4078G	Custom Floppy Firm Guidewire, Straight, 5 cm Floppy Tip, 180 cm, 0.014", PTFE Coated
EX3151	IS4/DF4 Connector Sleeve

Customer Support: 46-8-474-4756

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TÜV SÜD Product Service

EC Certificate

EC Design-Examination Certificate
Directive 90/385/EEC on Active Implantable Medical Devices (AIMDD), Annex 2 (4)
(Other devices than custom made or intended for clinical investigation)

No. I7 014607 0234 Rev. 00

Manufacturer:

St. Jude Medical
Cardiac Rhythm Management Division
15900 Valley View Court
Sylmar CA 91342
USA

EC-Representative:

St. Jude Medical Coordination Center BVBA
The Corporate Village, Da Vincilaan 11 Box F1, 1935 Zaventem,
BELGIUM

Product: **Implantable Pacemakers**

The Certification Body of TÜV SÜD Product Service GmbH declares that a design examination has been carried out on the respective devices in accordance with AIMDD Annex 2 (4). This design of the devices conforms to the requirements of this Directive. For marketing of these devices an additional Annex 2 certificate is mandatory. See also notes overleaf.

Report no.: 713149860

Valid from: 2019-06-15
Valid until: 2024-05-26

Date, 2019-06-14

Stefan Preiß

TÜV SÜD Product Service GmbH is Notified Body with identification no. 0123

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EC Design-Examination Certificate
Directive 90/385/EEC on Active Implantable Medical Devices (AIMDD), Annex 2 (4)
(Other devices than custom made or intended for clinical investigation)

No. I7 014607 0234 Rev. 00

Model(s): **see below**

Facility(ies):

St. Jude Medical Cardiac Rhythm Management Division
15900 Valley View Court, Sylmar CA 91342, USA

St. Jude Medical Puerto Rico LLC
Lot A Interior - #2 Rd Km. 67.5, Santana Industrial Park, Arecibo
PR 00612, USA

St. Jude Medical Operations (M) Sdn.Bhd.
Plot 102, Lebuhraya Kampung Jawa, Bayan Lepas Industrial Zone,
11900 Penang, MALAYSIA

Parameters ./.

Design Facility(ies):

St. Jude Medical Cardiac Rhythm Management Division
15900 Valley View Court, Sylmar, CA 91342, USA

Product: **Implantable Pacemakers**

Test Report No.: 70069297

Model:	**Model No.:**	**Variant:**
Microny™ II SR+	2525T	

Test Report No.: 70110810

Model:	**Model No.:**	**Variant:**
Zephyr™ SR	5620	
Zephyr™ DR	5820	
Zephyr™ XL DR	5826	

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No. I7 014607 0234 Rev. 00

Test Report No.: 71321436

Model:	Model No.:	Variant:
Zephyr™ XL SR	5626	

Test Report No.: 713017309_1

Model:	Model No.:	Variant:
Assurity™	PM1240	
Assurity™	PM2240	
Endurity™	PM1160	
Endurity™	PM2160	
Allure™	PM3120	
Allure™ RF	PM3222	
Allure Quadra™ RF	PM3242	

Test Report No.: 713028360

Model:	Model No.:	Variant
Quadra Allure MP™RF	PM3262	

Test Report No.: 713043621

Model:	Model No.:	Variant:
Assurity MRI™	PM1272	MR Conditional
Assurity MRI™	PM2272	MR Conditional
Endurity MRI™	PM1172	MR Conditional
Endurity MRI™	PM2172	MR Conditional
Endurity™	PM1162	MR Conditional
Endurity™	PM2162	MR Conditional

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(Other devices than custom made or intended for clinical investigation)

No. I7 014607 0234 Rev. 00

Test Report No.: 713057320

Model:	Model No.:	Variant:
Endurity™ Core	PM1140	MR Conditional
Endurity™ Core	PM2140	MR Conditional
Endurity™ Core	PM1152	MR Conditional
Endurity™ Core	PM2152	MR Conditional

Test Report No.: 713084189

Model:	Model No.:	Variant:
Quadra Allure™	PM3542	MR Conditional
Quadra Allure MP™	PM3562	MR Conditional

Test Report No.: 713130819

Model:	Model No.:	Variant:
Zenex™	PM1250	
Zenex™	PM2250	
Zenus™	PM1170	
Zenus™	PM2170	
Zenex MRI™	PM1282	MR Conditional
Zenex MRI™	PM2282	MR Conditional
Zenus MRI™	PM1182	MR Conditional
Zenus MRI™	PM2182	MR Conditional

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SJM Declaration of Conformity
Implantable Pacemakers
ATTACHMENT TO DECLARATION OF CONFORMITY

St. Jude Medical (SJM) hereby declares that the following SJM facilities and products conform to the applicable provisions of Annex 2 the European Union's Active Implantable Medical Devices Directive, AIMDD, 90/385/EEC. All supporting documentation is retained under the premises of SJM. We declare no application has been lodged with any other notified body for the same products. This declaration is issued under the sole responsibility of the manufacturer. This declaration supersedes any declaration issued previously for the same product(s).

Manufacturer Address:	*St. Jude Medical Cardiac Rhythm Management Division* *15900 Valley View Court* *Sylmar, CA 91342*
European Representative:	St. Jude Medical Coordination Center BVBA The Corporate Village Da Vincilaan 11 Box F1 1935 Zaventem, Belgium
Product Type:	Implantable Pacemakers
Product Name(s):	See Attachment
Model Number(s):	*See Attachment*
Classification:	AIMD
GMDN Code(s):	*See Attachment*
Original CE Mark Date:	*See Attachment*
(FQA or EC as appropriate) **Certificate No and expiration date:**	EC Certification No: I7 014607 0234 Rev. 00 Expiration Date: 2024-05-26 FQA Certificate No: I1 16 12 14607 211 Expiration Date: 2021-07-25 ISO13485 Certificate No: Q1N 17 09 14607 217 Expiration Date: 2020-10-31

Signature:

Kathy Berg
Manager Regulatory Affairs

14 Jun 2019
Issue Date

SJM Declaration of Conformity
Implantable Pacemakers
ATTACHMENT TO DECLARATION OF CONFORMITY

Applicable Quality System Standards:	Fulfills the requirements of Annex 2 of the European Union's Active Implantable Medical Devices Directive, AIMDD, 90/385/EEC and corresponding national legislation. Fulfills applicable requirements including CE marking and the Essential Requirements of the AIMDD, 90/385/EEC and corresponding national legislation.
Notified Body:	TÜV SÜD Product Service GmbH Zertifizierstelle Ridlerstraße 65, 80339, Münich, Germany
Notified Body Number:	0123
Manufacturing Facilities:	*St. Jude Medical Cardiac Rhythm Management Division 15900 Valley View Court Sylmar, CA 91342 USA* *St. Jude Medical Puerto Rico LLC Lot A Interior - #2 Rd Km. 67.5, Santana Industrial Park, Arecibo PR 00612, USA* *St. Jude Medical Operations (M) Sdn. Bhd Plot 102, Lebuhraya Kampung Jawa, Bayan Lepas Industrial Zone, 11900 Penang, MALAYSIA*

Signature:

Kathy Berg
Manager Regulatory Affairs

14 Jun 2019
Issue Date

SJM Declaration of Conformity
Implantable Pacemakers
ATTACHMENT TO DECLARATION OF CONFORMITY

The following product(s) is/are approved under EC-certificate number **I7 014607 0230 Rev. 00:**

Product Name	Model No.	GMDN Codes	First Date of CE Marking
Microny™ II SR+	2525T	47267	1999-9-17
Zephyr™ XL DR	5826	47265	2006-5-9
Zephyr™ DR	5820	47265	2006-5-9
Zephyr™ SR	5620	47267	2006-5-9
Zephyr™ XL SR	5626	47267	2007-6-13
Assurity™	PM1240	47267	2013-3-7
Assurity™	PM2240	47265	2013-3-7
Endurity™	PM1160	47267	2013-3-7
Endurity™	PM2160	47265	2013-3-7
Allure™	PM3120	47263	2013-3-7
Allure™ RF	PM3222	47263	2013-3-7
Allure Quadra™ RF	PM3242	47263	2013-3-7
Quadra Allure MP ™ RF	PM3262	47263	2014-7-31
Assurity MRI ™	PM1272 (MR Conditional)	47267	2014-12-18
Assurity MRI™	PM2272 (MR Conditional)	47265	2014-12-18
Endurity MRI ™	PM1172 (MR Conditional)	47267	2014-12-18
Endurity MRI ™	PM2172 (MR Conditional)	47265	2014-12-18
Endurity ™	PM1162 (MR Conditional)	47267	2014-12-18
Endurity ™	PM2162 (MR Conditional)	47265	2014-12-18
Endurity ™ Core	PM1140 (MR Conditional)	47267	2015-7-24
Endurity ™ Core	PM2140 (MR Conditional)	47265	2015-7-24
Endurity ™ Core	PM1152 (MR Conditional)	47267	2015-7-24
Endurity ™ Core	PM2152 (MR Conditional)	47265	2015-7-24
Quadra Allure ™	PM3542 (MR Conditional)	47263	2016-10-21
Quadra Allure MP ™	PM3562 (MR Conditional)	47263	2016-10-21
Zenex ™	PM1250	47267	2018-10-12
Zenex ™	PM2250	47265	2018-10-12
Zenus ™	PM1170	47267	2018-10-12
Zenus ™	PM2170	47265	2018-10-12
Zenex MRI ™	PM1282 (MR Conditional)	47267	2018-10-12

Signature:

Kathy Berg
Manager Regulatory Affairs

14 Jun 2019
Issue Date

CONFORM CU ORIGINALUL

SJM Declaration of Conformity
Implantable Pacemakers
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Product Name	Model No.	GMDN Codes	First Date of CE Marking
Zenex MRI ™	PM2282 (MR Conditional)	47265	2018-10-12
Zenus MRI ™	PM1182 (MR Conditional)	47267	2018-10-12
Zenus MRI TM	PM2182 (MR Conditional)	47265	2018-10-12

Signature:

Kathy Berg
Manager Regulatory Affairs

14 Jun 2019
Issue Date