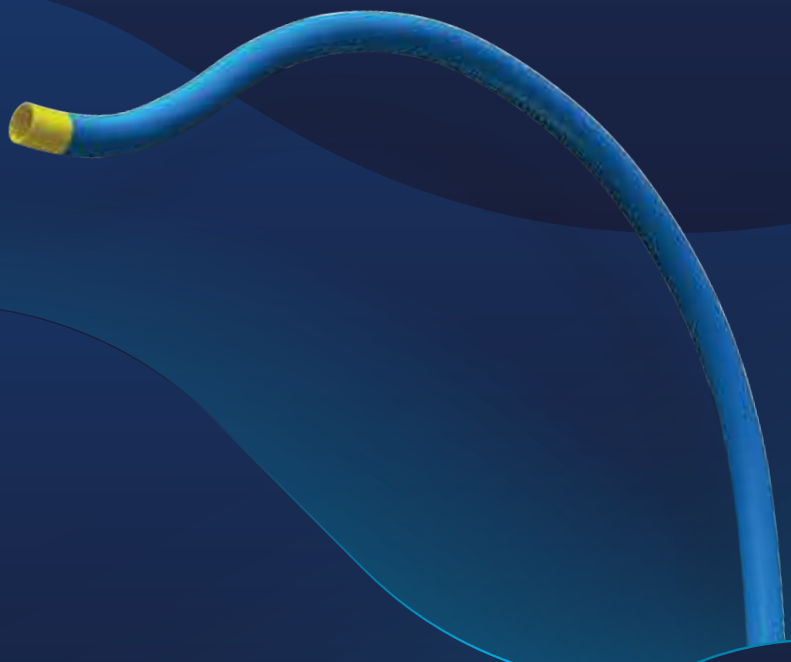
Cordis

VISTA BRITE TIP™ Guiding Catheter

Designed for support and performance.

Back-up support and shape retention to help you through your challenging cases.



CORDIS
CATHETER
PORTFOLIO

Designed for support and performance

Support

Back-up support and torque control

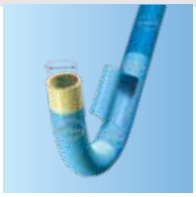
- Hybrid braid construction delivers support, torque control and lumen integrity.
- Multi-segment design balances strength and flexibility promoting coaxial alignment, kink resistance and support.

Shape Retention

- Designed to maintain shape in lengthy cases and challenging procedures.

Performance

Easy delivery of devices



- PTFE lining provides ease of device delivery.
- Consistent diameter from hub to tip.

Enhanced visibility

- Soft, radiopaque tip facilitates atraumatic engagement.

FEATURES

Hybrid braid

Multi-segment design / radiopaque tip

PTFE liner

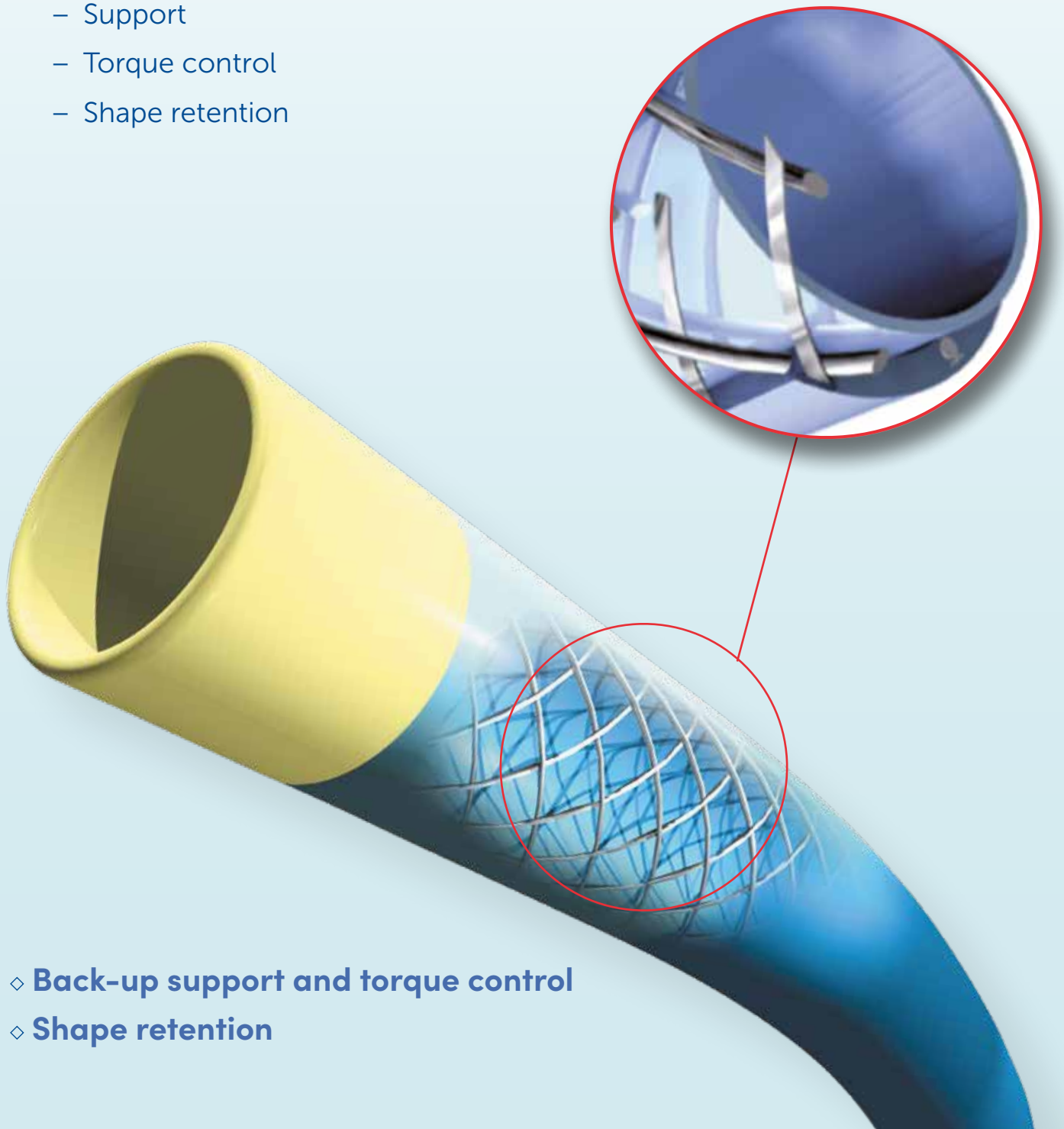
Consistent inner diameter

Guiding Catheters are available in a wide range of shapes and configurations.

5F .056" 6F .070" 7F .078" 8F .088"

Hybrid Braid Construction

- Proprietary hybrid braiding
- Allows for a thin wall without sacrificing support
- Delivers excellent
  - Support
  - Torque control
  - Shape retention



◇ **Back-up support and torque control**

◇ **Shape retention**

Multi-Segment Design

A variation of design and materials to balance strength and flexibility promoting:

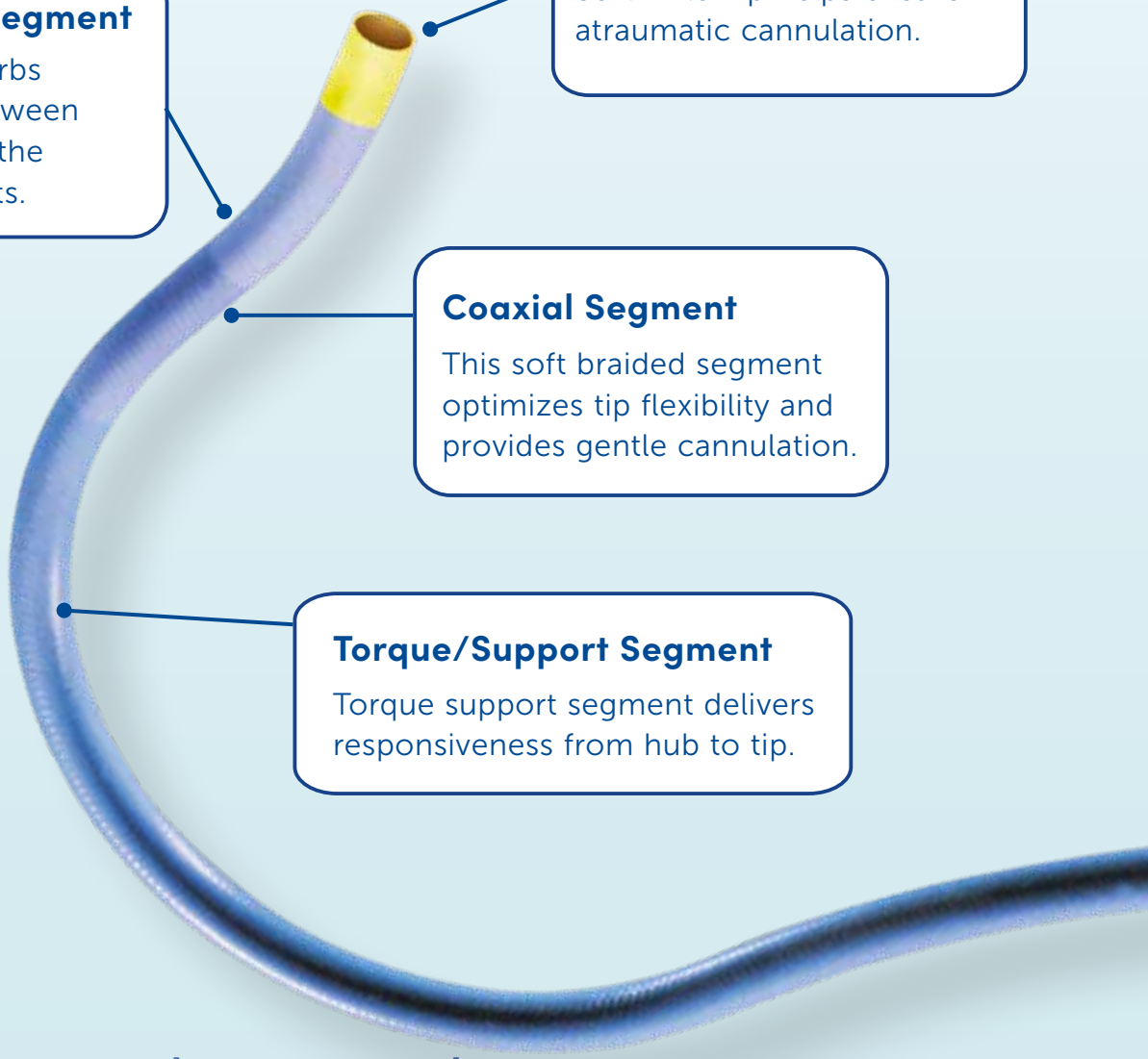
- Coaxial alignment
- Kink resistance
- Support

The Bright Tip

Soft Brite Tip helps ensure atraumatic cannulation.

Kink Resistant Segment

The segment absorbs the kink forces between the firm shaft and the soft distal segments.



Coaxial Segment

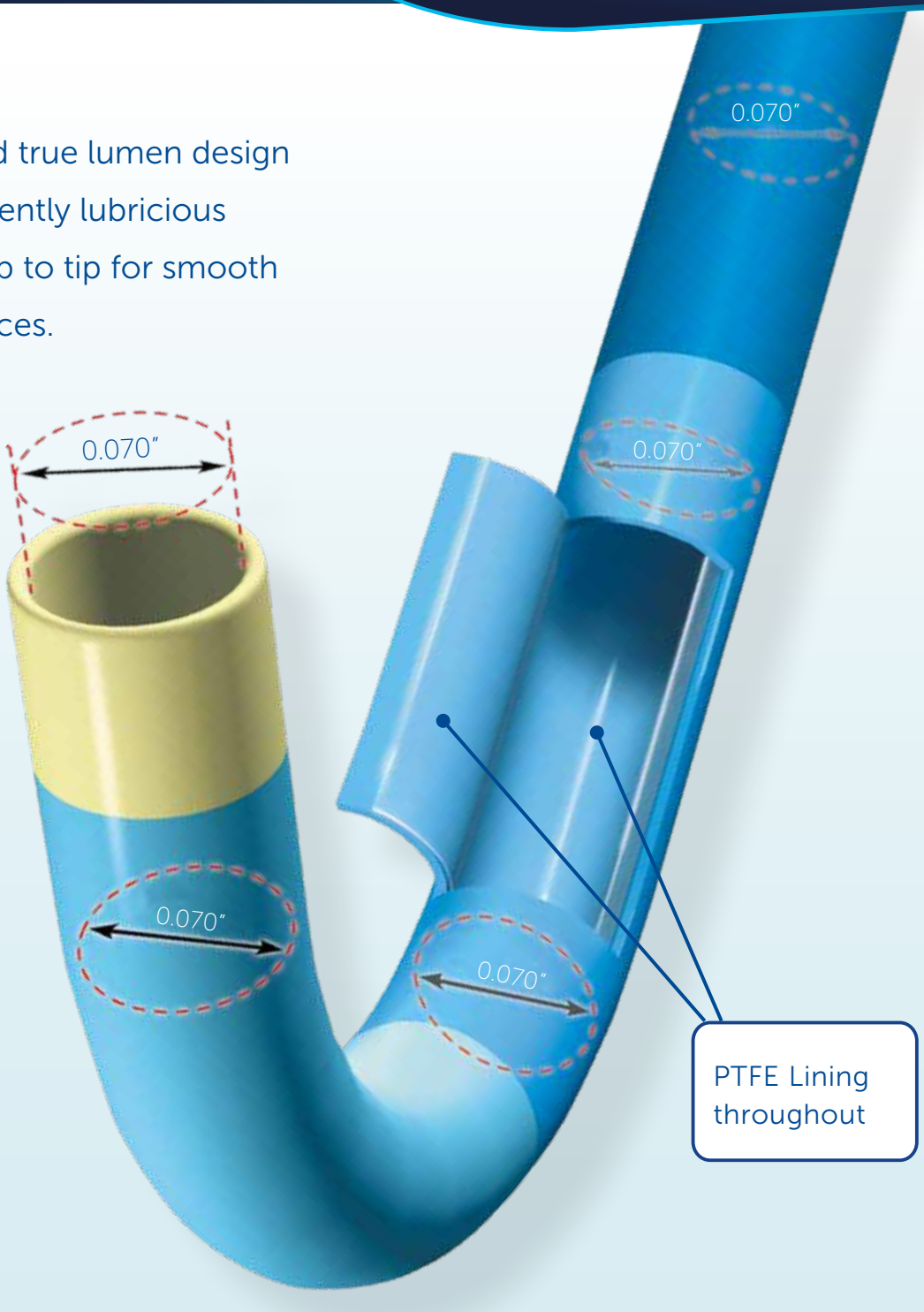
This soft braided segment optimizes tip flexibility and provides gentle cannulation.

Torque/Support Segment

Torque support segment delivers responsiveness from hub to tip.

- ◇ **Back-up support and torque control**
- ◇ **Shape retention**
- ◇ **Excellent visibility**

PTFE Lining and true lumen design provide consistently lubricious lumen from hub to tip for smooth delivery of devices.



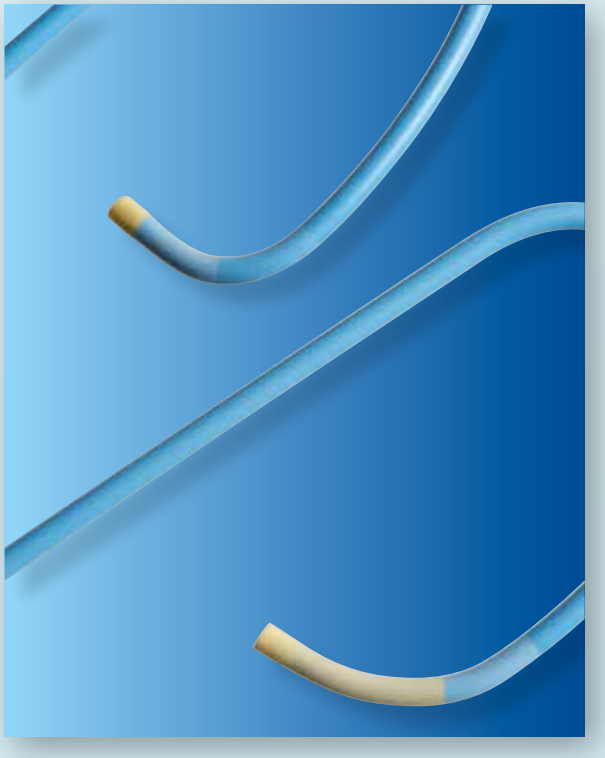
Consistent diameter from hub to tip

◇ **Easy delivery of devices**

Long VISTA BRITE TIP™
Guiding Catheter

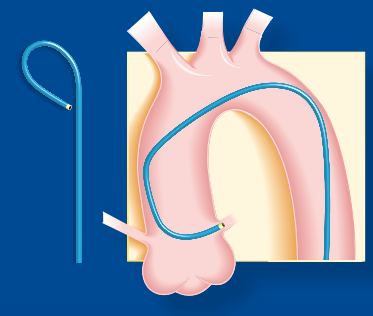
Long VISTA BRITE TIP™ Guiding Catheter provides atraumatic, deep intubation for conformity with the anatomy of vessels.

- 16 mm tip
- Deep atramatic cannulation



Guides For Both the Left and Right Coronary Arteries

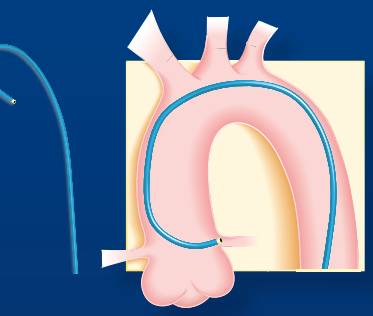
LCA



XB

First choice guiding catheter, adapted to most anatomies which allows very good coronary support and with minimal trauma.

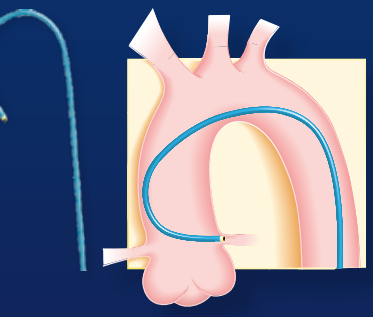
- More backup support than JL
- Allows good coaxial alignment to intubate the circumflex and left anterior descending (LAD) arteries
- Adapted for normal ostium take-off
- 1/2 size down from JL standard (XB 3.5 = JL4)
- Suited for transradial procedures, including XB-2.5



XBC

An extra backup shape for the left coronary and adapted to a short or absent left main and to a very angular CX origin.

- More backup support than JL
- Adapted for normal, superior or inferior aortic take-offs
- 1/2 size down from JL standard (XBC 3.5 = JL4)
- Suited for transradial procedures

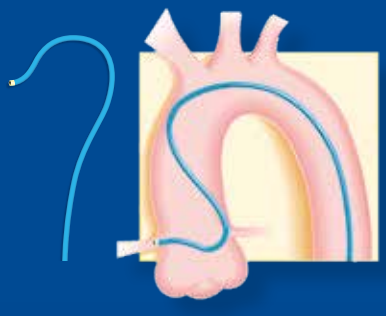


XBLAD

Extra-support for the intubation of the left coronary and more specifically designed for the LAD.

- More support than a JL4 and enables extra support for LAD
- Adapted for superior aortic take-offs
- 1/2 size down from JL standard (XBLAD 3.5 = JL4)
- Suited for transradial procedures

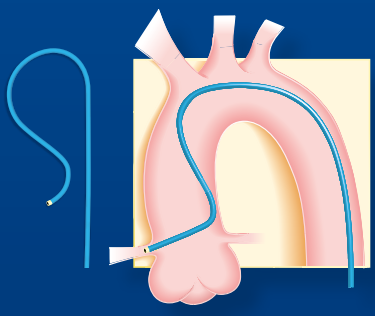
RCA



XBRCA

The Extra Back up shape designed for the Right Coronary.

- More support than an Amplatz or JR shapes
- Adapted for normal or superior aortic take-offs



XBR

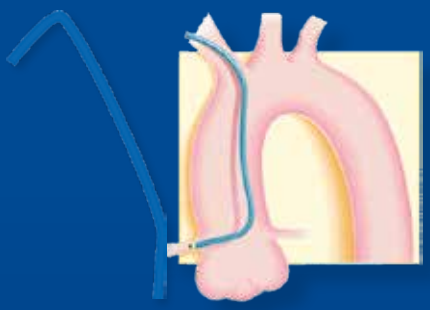
Another Extra Back up shape designed for the Right Coronary.

- More support than an Amplatz or JR shapes
- Adapted for normal and inferior take-offs
- XBR1 for normal aortas and XBR2 for dilated aortas

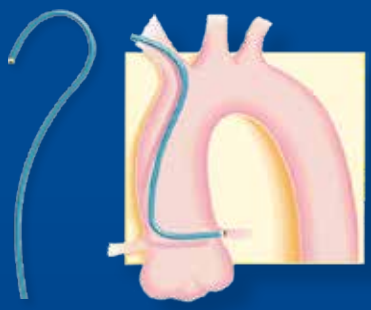
Extra-Back up shapes available

Extra Back-up in Transradial Interventions

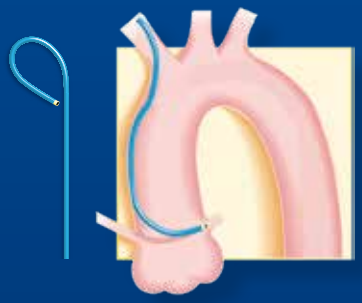
Judkins Fajadet Right (JFR)



Judkins Fajadet Left (JFL)



A modification of the Judkins catheters especially developed for giving extra back up during transradial procedures.



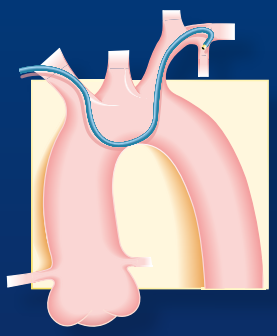
XB 2.5

In general, engagement of the left coronary artery requires smaller catheters (i.e. a JL 3.5 compared with a JL 4) compared with those used for femoral or left radial approaches. XB-2.5 is a smaller curve of the best selling XB family. Suitable for aortas in which JL-3.0 would be needed radially.

IM Options via Radial

Barbeau IM Curve

Coronarography and angioplasty via right radial approach of left and right internal mammary arteries.



3D LIMA 90 Curve

Coronarography and angioplasty via right radial approach of left and right internal mammary arteries.

Angioplasty of the renal artery using right or left radial approach.

LONG Catheters

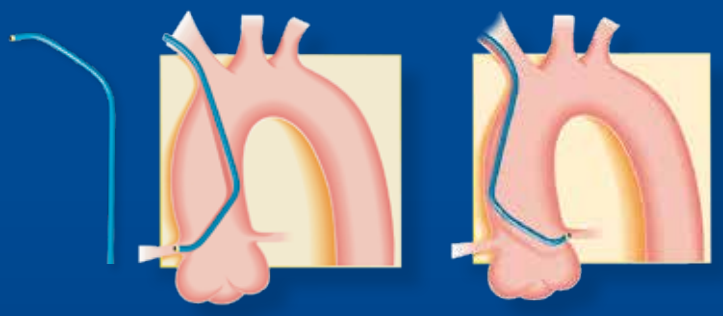
Cordis offers a number of guiding catheters longer than the standard 100 cm for:

- very tall patients
- tortuous anatomy
- angioplasty of the renal artery using right or left radial approach

Radial Solutions: Special Radial Shapes

Radial Bi-Lateral / Multipurpose

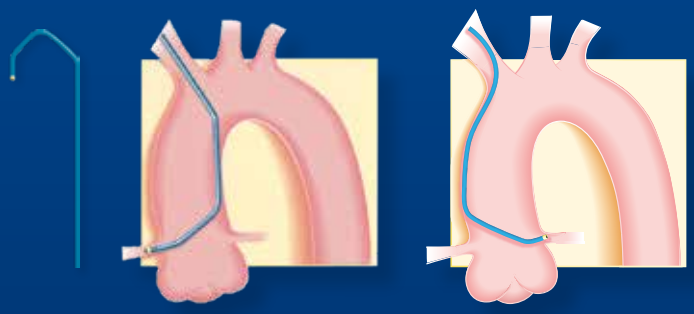
Cordis offer a series of catheter choices to canulate both the LCA and RCA.



Barbeau

Coronary catheterisation via right radial access of the left and right coronary arteries.

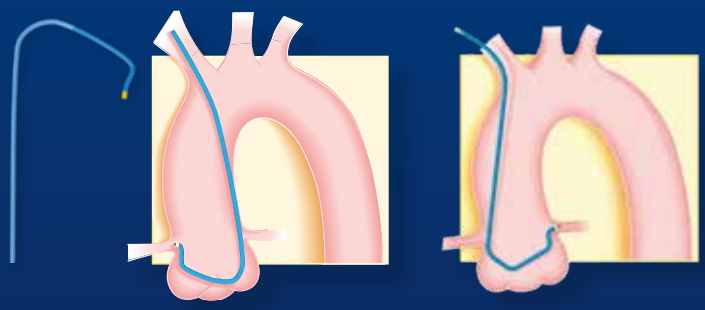
- Primary curve of 135 degrees added to an MPA catheter (Multipurpose A)
- Can be used for the right and left ostium cannulation
- Curvature very suitable for the right coronary artery
- If the left coronary artery is difficult to cannulate use a XB catheter



Radial Brachial (RB)

Designed to perform the right transradial Kimny Technique, can be used to engage both the left and right coronary arteries.

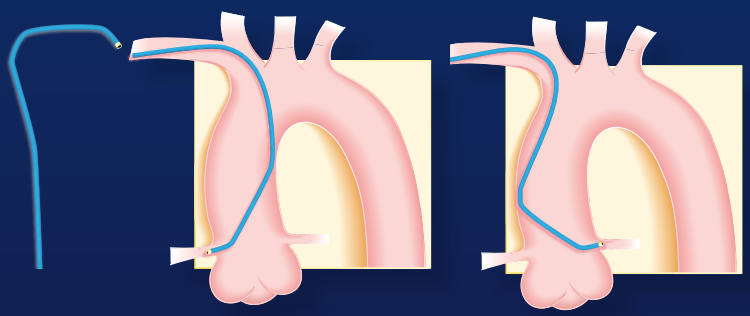
The shape is designed with three angles that allow contralateral wall support and tip engagement.



Brachial left (BL) (Tilon)

Coronary catheterisation via right radial access of the left and right coronary arteries.

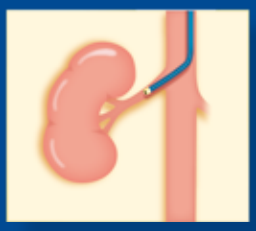
- Allows effective cannulation of the left coronary artery
- Allows easy and effective cannulation of the right coronary artery when the ostium is at the same level as the left ostium



Brachial Bi-Lateral (RBL)

The Guiding catheter version of the popular diagnostic catheter, designed for left and right coronary arteries cannulation.

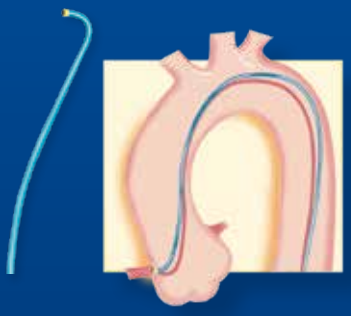
Angioplasty of renal artery using left or right radial access



MPA 115 cm – 125 cm Curve / JR4 125 cm

- Allows cannulation of ostiums of descending arteries
- Alternative for patients with no femoral access

Other shapes

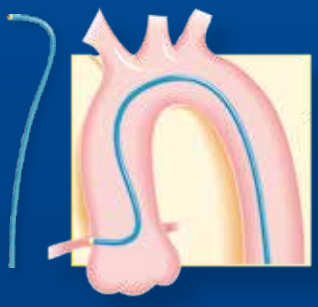


3DRC
(Williams Technique)

A popular choice of guiding catheter, suitable for most anatomies of the right coronary.

Three-dimensional curve allows for limited torque needed for its insertion in the right coronary artery. Suitable for:

- ostial lesions
- right and left internal mammary arteries



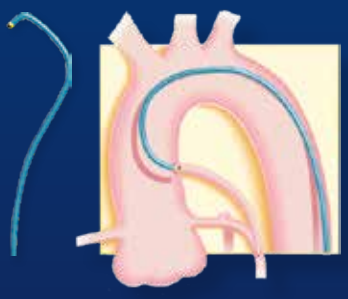
Hockey Stick – HS Curve

Guiding catheter which are able to catheterise the right coronary artery and right saphenous vein bypass grafts.

The HS offers more support that a Judkins right (JR) and can be a first choice catheter.

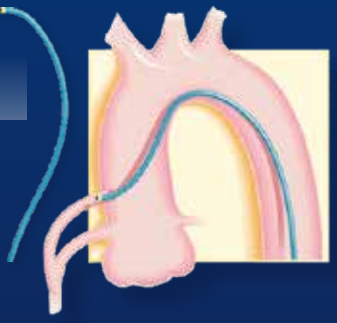
Adapted to radial approach.

Other Options for PCI in Coronary Bypass



LCB

Left Coronary Artery via Femoral.



RCB

Right Coronary Artery via Femoral.

IM

Internal mamary femoral acces.

CORDIS
CATHETER
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Back-up support and shape retention to help you through your challenging cases.

Available in a wide variety of shapes, including transradial-specific,and from 5F to 8F

1. Back-up support and torque control
2. Shape retention
3. Easy delivery of device
4. Enhanced visibility

Cordis™

For Healthcare Professionals Only.
Important information: Prior to use, refer to the instructions for use supplied with this device for indications, contraindications, side effects, suggested procedure, warnings and precautions. As part of its continuous product development policy, Cordis reserves the right to change product specifications without prior notification.
Please contact your Cordis representative for additional product availability information.
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