

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 utilization 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

*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 \leq 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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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; BV; RV only; LV only (temporary mode)
Ventricular Pacing Chamber	Simultaneous ² ; RV; LV
First Chamber Paced	
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
SenseAbility™ 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 (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
Decay Delay (ms)	0.5–12.5 in steps of 0.5 ^{5,6}
Ventricular Sensitivity (fixed) (mV)	

Rate/Timing

Mode	A00(R); AAI(R); AAT(R); V00(R); VVI(R); VVT(R); D00(R); DVI(R); DD(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.

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Item GMCRM1094EN

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 VVTR(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	Off; Low; High
AT/AF Detection	Off; Low; High
Magnet Response	Off; Low; High
High Atrial Rate	125–300 in steps of 25
Rate (min ⁻¹)	2; 3; 4; 5; 10; 15; 20
No. of Consecutive Cycles	Off; Low; High
High Ventricular Rate	125–300 in steps of 25
Rate (min ⁻¹)	2; 3; 4; 5; 10; 15; 20
No. of Consecutive Cycles	Off; Low; High
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 of the Atrial Tachycardia Detection Rate (min ⁻¹)	1; 2; 3
Post Vent. Atrial Blanking (PVAB) (ms)	110–200 in steps of 10; 225–300 in steps of 25
Ventricular Safety Standby (PVC Response)	60–200 in steps of 10; 225; 250
PMT Options	Off; On
PMT Detection Rate (min ⁻¹)	Off; Atrial Pace ⁸
Lead Type	Off; Passive; Atrial Pace ⁸
NIPS Options	90–180 in steps of 5
Stimulation Chamber	Uncoded; Unipolar; Bipolar
Coupling Interval ⁹ (ms)	
S1 Count	Atrial; Right Ventricular
S1 ¹⁰ ; S2; S3 and S4 Cycle (ms)	200–800 in steps of 10
Right Ventricular Support Rate (min ⁻¹)	2–25 in steps of 1
Sinus Node Recovery Delay (s)	Off; 100–800 in steps of 10 (Fixed or Adaptive)
Diagnostic Trends	Off; 30–95 in steps of 5
CorVue™ Congestion Monitoring	1–5 in steps of 1
CorVue Congestion Trigger	AT/AF Activity; Exercise; Lead Impedance; P and R Wave; A and V threshold; CorVue™ Congestion Monitoring
	Off; On
	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

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.

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	DS06002 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
	DS06003 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.

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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.



ST. JUDE MEDICAL™
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. GMCRCM391

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.

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

Dilator
2 Valve bypass tools

SEPARATELY AVAILABLE

CPS™ Universal Slitter
CPS Direct™ Valve Bypass Tool
Implant Kit

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+1 651 756 3301 Fax

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Lane Cove, NSW 2066
Australia
+61 2 9936 1200
+61 2 9936 1222 Fax

SJMPprofessional.com



Brief Summary: Prior to using these devices, please review the Instructions for Use for a complete listing of indications, contraindications, warnings, precautions, potential adverse events and directions for use. Devices depicted may not be available in all countries. Check with your St. Jude Medical representative for product availability in your country.

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Thermodilution Catheter

Pulmonary Artery Monitoring Catheter and Biotray



Eliminating the risk of Pulmonary Artery Rupture.

Product	Material	Catheter Size	Lumen	Length	Balloon Volume(cc)	Thermistor Resistance (ohms)	Recommended Introducer Size	Radiopacity	
THERMODILUTION CATHETER									
TD1504N	PVC	5F	4	90 cm	0.75	14K	6F	Sufficiently opaque to appear visible under conventional fluoroscope illumination while in vivo	
TD2504N	PU	5F	4	90 cm	0.75	14K	6F		
TD1604N	PVC	6F	4	110 cm	1.00	14K	7F		
TD2604N	PU	6F	4	110 cm	1.00	14K	7F		
TD1704N	PVC	7F	4	110 cm	1.50	14K	8F		
TD2704N	PU	7F	4	110 cm	1.50	14K	8F		
TD1755N	PVC	7.5F	5	110 cm	1.50	14K	8.5F		
TD2755N	PU	7.5F	5	110 cm	1.50	14K	8.5F		
PA MONITORING CATHETER									
TD1502N	PVC	5 Fr	2	90 cm	0.75	N/A	6F		
TD2502N	PU	5 Fr	2	90 cm	0.75	N/A	6F		
TD1602N	PVC	6 Fr	2	110 cm	1.00	N/A	7F		
TD2602N	PU	6 Fr	2	110 cm	1.00	N/A	7F		
TD1702N	PVC	7 Fr	2	110 cm	1.50	N/A	8F		
TD2702N	PU	7 Fr	2	110 cm	1.50	N/A	8F		
TD1603N	PVC	6 Fr	3	110 cm	1.00	N/A	7F		
TD2603N	PU	6 Fr	3	110 cm	1.00	N/A	7F		
TD1703N	PVC	7 Fr	3	110 cm	1.50	N/A	8F		
TD2703N	PU	7 Fr	3	110 cm	1.50	N/A	8F		

SPECIAL FEATURES

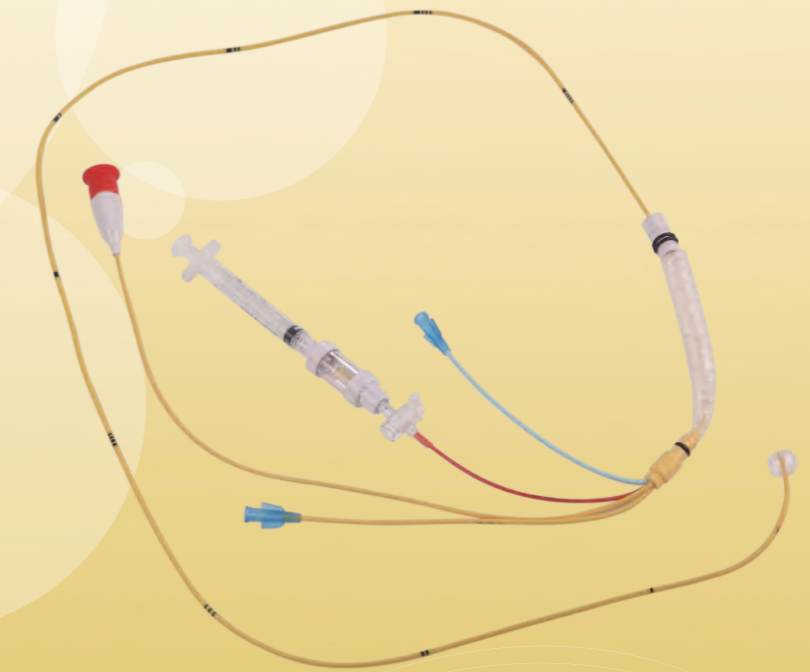
Optional Features	Suffix	Description
SAFETYWEDGE™	D	Catheter with SAFETYWEDGE™
Contamination Sleeve	X	Catheter without contamination sleeve
Non-coated tubing	N	Catheter with no coating on tubing
Stiff Body Tubing	F	Catheter with stiffer tubing

SAFETYWEDGE™ covered by U.S. Patent No. 5,007,919

1. Thomas Santora, MD; William Ganz, MD; Julian Gold, MD; Mark Wittman, MD; Beverley Leyerle, RN; H.J.C. Swan, MD, PhD; M. Michael Shabot, MD, "New method for monitoring pulmonary artery catheter location," "Critical Care Medicine". Vol. 19, No. 3, p. 422, 1991.
 2. Jean-Francois Hardy, MD; Martin Morissette, MD; Jean Taillefer, MD; Rene Vauclair, MD; "Pathophysiology of Rupture of the Pulmonary Artery by Pulmonary Artery Balloon-Tipped Catheters," "Anesthesia & Analgesia". Vol. 62, p. 925, 1983.

Thermodilution Catheter

Pulmonary Artery Monitoring Catheter and Biotray



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www.biopitmalg.com



Biopital™

Thermodilution Catheter

Pulmonary Artery Monitoring Catheter and Biotray

Eliminating the risk
of Pulmonary Artery Rupture.



About SAFETYWEDGE™ Thermodilution Catheter

An unprecedented level of safety for balloon inflation.

Catheter tips often migrate to small arterial branches that are unable to safely accommodate inflated balloons.

SAFETYWEDGE™ thermodilution catheters virtually eliminate the risk of pulmonary artery rupture due to balloon overpressurization - the most serious complication associated with PA catheter monitoring.

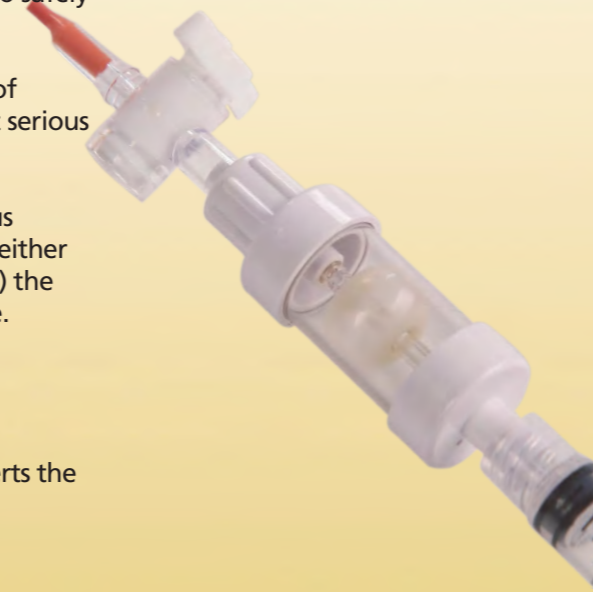
SAFETYWEDGE™ catheters reduce the risk of this potentially dangerous situation by facilitating inflation of the SAFETYWEDGE™ device when either (1) the distal balloon encounters abnormal resistance to inflation, or (2) the pressure inside the distal balloon exceeds the normal inflation pressure.

SAFETYWEDGE™ component acts as a pressure relief valve to prevent overpressurization of the distal balloon.

This not only averts vessel rupture but balloon rupture as well, and alerts the clinician to reposition the catheter.

Features and Benefits

- SAFETYWEDGE™**
 Exclusive Safety balloon acts as pressure relief valve to prevent overpressurization of the balloon.
- Contamination Shield**
 Provides a protective barrier against contamination of the catheter during catheter insertion and manipulation.
- Medication Lumen**
 Permits blood sampling, fluid and drug administration and central venous pressure monitoring (7.5 French catheter only).
- Thermistor Connector**
 Compatible with commonly used cardiac output computers, also used to monitor pulmonary artery blood temperature.
- PA Distal Lumen**
 Allows mixed venous blood sampling, and measurements of pulmonary artery and pulmonary capillary wedge pressure.
- Distal Balloon**
 Provides excellent symmetry and tip coverage for the safe flotation of the catheter and for pulmonary capillary wedge pressure measurements.
- CVP Proximal or Injectate Lumen**
 Carries cardiac output injectate solution to right atrium. Accommodates blood sampling, fluid and drug administration and - when attached to a pressure transducer - monitor of right atrium pressure.



SAFETYWEDGE™ Thermodilution Catheter with the Biotray

Reducing the Serious Risk of Pulmonary Artery Rupture.

The BioTray contains all the necessary supplies used with the SAFETYWEDGE™ thermodilution catheter. Value added benefits:

- Elimination of the sheath-catheter size compatible issue
- Ease of use
- Convenience
- Easier inventory control
- Elimination of nursing cover as the tray can be opened in a sterile area
- All components matched by BIOPTIMAL for optimum compatibility

Contents of the Biotray

Features high quality products at lower costs, saves time and reduces supply inventories.

- One Thermodilution Catheter / PA Monitoring Catheter
- Contamination Shield
- SAFETYWEDGE™ Balloon Device
- Venous Introducer with Dilator
- Guidewire (0.035")
- Needle 18G x 2 1/2"
- Needle 18G x 2 1/2" OTN Catheter
- Paper Towel 17 x 22"
- Gauze Swab
- Syringe Luer Slip 5cc
- Scalpel #11 Short
- Needle 25G
- Needle 22G
- Drape Minor Proc. Fen 22 x 22"
- Syringe
- Suture, Silk

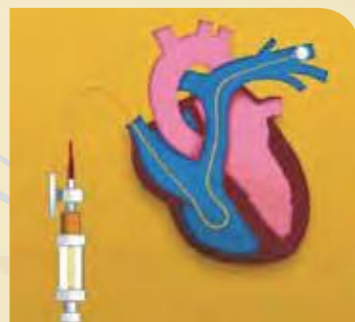
Advantage of PU catheter

- Polyurethane performs better against thrombosis, eliminating the need for Heparin coating.
- Polyurethane is tough, biocompatible, and hemocompatible. Polyurethane also outperforms many other materials in flexibility, tear resistance and abrasion resistance. Polyurethane is stiff when insert the catheter however after it goes into vein and contacts blood it will become soft which can reduce the risk of damage and injury to the vein wall.
- The use of Polyurethane in BiopTimal's thermodilution catheters eliminates the problems associated with other materials such as PVC, where the dangers of leachable plasticizers has become a concern.
- Polyurethane is radiopaque material which can be detected clearly to ensure correct placement of the catheter.



Total Package, Total Solution

Enjoy the benefits of the SAFETYWEDGE™ thermodilution catheter in a convenient, fully accessorised all-in one tray.

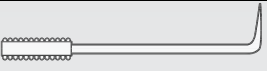

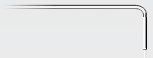





Correct catheter position, with SAFETYWEDGE™ device in READY mode.



Catheter tip migration into small PA branch, SAFETYWEDGE™ device activated upon attempt to inflate distal balloon.



Model Number	Receptacle (for adapting from)	
AC-0160	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)	
AC-0130	Silicone Oil	
424	Medical Adhesive	
FL-1056	Lead Flushing Tool	
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	

FasTac is a trademark of Greatbatch Medical.

Customer Support: 46-8-474-4756

Brief Summary: Prior to using these devices, please review the Instructions for Use for a complete listing of indications, contraindications, warnings, precautions, potential adverse events and directions for use. Devices depicted may not be available in all countries. Check with your St. Jude Medical representative for product availability in your country.

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SJM-CAG-0915-0036 | Item approved for international use only.



EU Technical Documentation Assessment Certificate (MDR)

Pursuant to Regulation (EU) 2017/745 on Medical Devices, Annex IX Chapter II
(Implantable Class IIb Devices and Class III Devices)

No. G70 014607 0258 Rev. 00

Manufacturer:

Abbott Medical

15900 Valley View Court
Sylmar CA 91342
USA

SRN Manufacturer - US-MF-000010383

Authorized Representative:

Abbott Medical
The Corporate Village, Da Vincilaan 11 Box F1, 1935 Zaventem,
BELGIUM

The Certification Body of TÜV SÜD Product Service GmbH certifies that the manufacturer has drawn up and presented a Technical Documentation according to Annex II and III of the Regulation (EU) 2017/745 on medical devices. Details on devices covered by the Technical Documentation are described on the following page(s)

The Report referenced below summarises the result of the assessment and includes reference to relevant CS, harmonized standards and test reports. The technical documentation assessment included an assessment of the clinical evaluation assessment.

The conformity assessment has been carried out according to Annex IX chapter II of this regulation with a positive result.

Changes to the approved device, where such changes could affect the safety and performance of the device or the conditions prescribed for use of the device, shall require approval from the notified body TÜV SÜD Product Service GmbH.

In order to place the devices on the market with CE-marking, an EU Quality Management System Certificate pursuant to Annex IX chapters I and III is necessary in addition to this EU Technical Documentation Assessment Certificate. All applicable requirements of the testing and certification regulation of TÜV SÜD Group have to be complied with. For details and certificate validity see:

www.tuvsud.com/ps-cert?q=cert:G70_014607_0258_Rev.00

Report No.: 713261279

Valid from: 2023-09-18

Valid until: 2028-09-17

Christoph Dicks
Head of Certification/Notified Body

Issue date: 2023-09-18



EU Technical Documentation Assessment Certificate (MDR)

Pursuant to Regulation (EU) 2017/745 on Medical Devices, Annex IX Chapter II
(Implantable Class IIb Devices and Class III Devices)

No. G70 014607 0258 Rev. 00

Classification:	Class III
Device Group:	J01010101 - IMPLANTABLE SINGLE CHAMBER PACEMAKERS (SC)
Basic UDI-DI:	5415067LVD0001JX
Intended Purpose:	The Abbott pacemakers are implantable pulse generators that, when used in combination with compatible pacing leads, are intended to detect and treat chronic symptomatic bradyarrhythmia and various atrioventricular conduction abnormalities by providing sensing and pacing in the right ventricle and/or right atrium.
Device(s):	Endurity™ Core PM1140
Classification:	Class III
Device Group:	J01010102 - IMPLANTABLE SINGLE CHAMBER PACEMAKERS WITH SENSOR (SR)
Basic UDI-DI:	5415067LVD0001JX
Intended Purpose:	The Abbott pacemakers are implantable pulse generators that, when used in combination with compatible pacing leads, are intended to detect and treat chronic symptomatic bradyarrhythmia and various atrioventricular conduction abnormalities by providing sensing and pacing in the right ventricle and/or right atrium.
Device(s):	Endurity™ Core PM1152 Endurity™ PM1162 Endurity MRI™ PM1172 Assurity MRI™ PM1272 Zenex MRI™ PM1282 Zenex MRI™ PM1182
Classification:	Class III
Device Group:	J01010301 - IMPLANTABLE DUAL CHAMBER PACEMAKERS (DC)
Basic UDI-DI:	5415067LVD0001JX
Intended Purpose:	The Abbott pacemakers are implantable pulse generators that, when used in combination with compatible pacing leads, are intended to detect and treat chronic symptomatic bradyarrhythmia and various atrioventricular conduction abnormalities by providing sensing and pacing in the right ventricle and/or right atrium.
Device(s):	Endurity™ Core PM2140



EU Technical Documentation Assessment Certificate (MDR)

Pursuant to Regulation (EU) 2017/745 on Medical Devices, Annex IX Chapter II
(Implantable Class IIb Devices and Class III Devices)

No. G70 014607 0258 Rev. 00

Classification:	Class III
Device Group:	J01010302 - IMPLANTABLE DUAL CHAMBER PACEMAKERS WITH SENSOR (DR)
Basic UDI-DI:	5415067LVD0001JX
Intended Purpose:	The Abbott pacemakers are implantable pulse generators that, when used in combination with compatible pacing leads, are intended to detect and treat chronic symptomatic bradyarrhythmia and various atrioventricular conduction abnormalities by providing sensing and pacing in the right ventricle and/or right atrium.
Device(s):	Endurity™ Core PM2152 Endurity™ PM2162 Endurity MRI™ PM2172 Assurity MRI™ PM2272 Zenex MRI™ PM2282 Zenex MRI™ PM2182
Classification:	Class III
Device Group:	J01010401 - IMPLANTABLE TRIPLE CHAMBER PACEMAKERS FOR CARDIAC RESYNCHRONIZATION (TR)
Basic UDI-DI:	5415067LVD0002JZ
Intended Purpose:	The CRT-P devices when used in combination with compatible pacing leads, are intended to detect and treat chronic symptomatic bradyarrhythmia and various atrioventricular conduction abnormalities by providing sensing and pacing in the ventricle(s) and/or right atrium. The CRT-P devices are intended to resynchronize the right and left ventricles via biventricular pacing.
Device(s):	Allure™ RF PM3222 Quadra Allure™ PM3542 Quadra Allure MP™ PM3562 Quadra Allure MP™ RF PM3262

The validity of this certificate depends on conditions and/or is limited to the following: /.

Revision History:

Rev.	Dated	Report	Description
00	2023-09-18	713261279	Initial issuance



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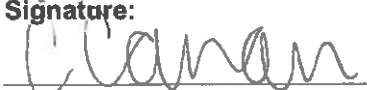
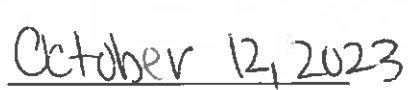
00114571 Rev. A

Declaration of Conformity

Manufacturer:	Abbott Medical
Manufacturer SRN:	US-MF-000010383
Address:	15900 Valley View Court Sylmar, California 91342 United States of America
Manufacturing Site(s):	Abbott Medical 15900 Valley View Court Sylmar, California 91342 United States of America Abbott Medical Lot A Interior - #2 Rd Km. 67.5 Santana Industrial Park, Arecibo PR United States of America Abbott Medical Plot 102, Lebuhraya Kampung Jawa, Bayan Lepas Industrial Zone 11900 Penang Malaysia
European Authorized Representative:	Abbott Medical The Corporate Village Da Vincilaan 11 Box F1 1935 Zaventem, Belgium
European Authorized Representative SRN:	BE-AR-000008744

This declaration of conformity is issued under the sole responsibility of the manufacturer.

Product Trade Name(s):	See attached Product List
Model Number(s):	See attached Product List
Intended Purpose:	The Abbott pacemakers are implantable pulse generators that, when used in combination with compatible pacing leads, are intended to detect and treat

Signature:  Colleen Canan Divisional Vice President Regulatory Affairs	 Issue Date On behalf of Abbott Medical, signed at Sylmar, CA.
--	--

MDR Declaration of Conformity

	<p>chronic symptomatic bradyarrhythmia and various atrioventricular conduction abnormalities by providing sensing and pacing in the right ventricle and/or right atrium.</p> <p>The CRT-P devices when used in combination with compatible pacing leads, are intended to detect and treat chronic symptomatic bradyarrhythmia and various atrioventricular conduction abnormalities by providing sensing and pacing in the ventricles and/or right atrium. The CRT-P devices are intended to resynchronize the right and left ventricles via biventricular pacing.</p> <p>The torque driver is intended to secure lead connectors and port plugs within the device header.</p>
Risk Classification:	Class III as per EU MDR 2017/745 per Annex VIII
Risk Classification Rationale:	Annex VIII, Rule 8, 6th Indent
EMDN Code(s):	See attached Product list.
GMDN Code:	See attached Product list.
Basic UDI-DI:	<p>Implantable Single and Dual Chamber Pacemakers: 5415067LVD0001JX</p> <p>Implantable Triple Chamber Pacemakers (CRT-P): 5415067LVD0002JZ</p>

The products described in this declaration are in conformity with all applicable EU harmonized legislation, including:

- Regulation (EU) 2017/745, and the applicable *General Safety & Performance Requirements* in Annex 1

Common Specifications Applied:	Not Applicable. No common specifications are available for this type of device
Notified Body:	<p>TÜV SÜD Product Service GmbH Ridlerstraße 65 80339 Munich Germany</p> <p>ID Number: 0123</p>
Supporting Certificate(s):	<p>Technical Documentation Assessment Certificate Number: G70 014607 0258 Rev. 00 Expiration Date: 2028-09-17</p>

MDR Declaration of Conformity

	EU Quality Management System Certificate: G12 014607 0255 Rev. 05 Expiration Date: 2027-08-14
Original CE Mark Date:	See attached Product List.
Conformity Assessment:	EU MDR 2017/745, Annex IX

The products in the attached Declaration of Conformity Product List are approved under EC Certificate G70 014607 0258 Rev. 00.

Declaration of Conformity Product List

Model No.	Product Trade Name	Original CE Mark Date	EMDN Code	GMDN Code	Basic UDI-DI
PM1140	Endurity™ Core	2015-07-24	J01010101	47267	5415067LVD0001JX
PM1152	Endurity™ Core		J01010101	47267	5415067LVD0001JX
PM2140	Endurity™ Core		J01010301	47265	5415067LVD0001JX
PM2152	Endurity™ Core		J01010301	47265	5415067LVD0001JX
PM1162	Endurity™	2014-12-18	J01010101	47267	5415067LVD0001JX
PM2162	Endurity™		J01010301	47265	5415067LVD0001JX
PM1172	Endurity MRI™		J01010101	47267	5415067LVD0001JX
PM2172	Endurity MRI™		J01010301	47265	5415067LVD0001JX
PM1272	Assurity MRI™	2018-10-12	J01010101	47267	5415067LVD0001JX
PM2272	Assurity MRI™		J01010301	47265	5415067LVD0001JX
PM2282	Zenex MRI™		J01010301	47265	5415067LVD0001JX
PM1282	Zenex MRI™		J01010101	47267	5415067LVD0001JX
PM2182	Zenus MRI™	2018-10-12	J01010301	47265	5415067LVD0001JX
PM1182	Zenus MRI™		J01010101	47267	5415067LVD0001JX
PM3222	Allure™ RF	2013-03-07	J01010401	47263	5415067LVD0002JZ
PM3542	Quadra Allure™	2016-10-21	J01010401	47263	5415067LVD0002JZ
PM3262	Quadra Allure MP™	2013-03-07	J01010401	47263	5415067LVD0002JZ
PM3562	Quadra Allure MP™	2016-10-21	J01010401	47263	5415067LVD0002JZ



Certificate

No. Q5 014607 0231 Rev. 03

Holder of Certificate: **Abbott Medical**
15900 Valley View Court
Sylmar CA 91342
USA

Certification Mark:



Scope of Certificate: **Design and Development, Production and Distribution of Implantable Pulse Generators and Implantable Cardioverter Defibrillators, Implantable Leads for AIMDs, Programmers for AIMDs, Application Software (external), Cardiac Rhythm Management Device Accessories (adapters, stylets, guidewires, tools, etc.)**

The Certification Body of TÜV SÜD Product Service GmbH certifies that the company mentioned above has established and is maintaining a quality management system, which meets the requirements of the listed standard(s). All applicable requirements of the testing and certification regulation of TÜV SÜD Group have to be complied with. For details and certificate validity see: [www.tuvsud.com/ps-cert?q=cert:Q5 014607 0231 Rev. 03](http://www.tuvsud.com/ps-cert?q=cert:Q5_014607_0231_Rev.03)

Report No.: 713237689

Valid from: 2022-08-12
Valid until: 2025-03-31

Date, 2022-08-12

Christoph Dicks
Head of Certification/Notified Body

Certificate

No. Q5 014607 0231 Rev. 03

Applied Standard(s): EN ISO 13485:2016
Medical devices - Quality management systems -
Requirements for regulatory purposes
(ISO 13485:2016)
DIN EN ISO 13485:2016

Facility(ies): Abbott Medical
15900 Valley View Court, Sylmar CA 91342, USA

Design and Development, Production and Distribution of
Implantable Pulse Generators and Implantable Cardioverter
Defibrillators, Implantable Monitoring and Recording Systems,
Implantable Leads for AIMDs, Programmers for AIMDs,
Application Software (external), Cardiac Rhythm Management
Device, Accessories (adapters, stylets, guidewires, tools, etc)

Abbott Medical
645 Almanor Avenue, Sunnyvale CA 94085, USA

Design and Development of Implantable Pulse Generators and
Implantable Cardioverter Defibrillators, Implantable Monitoring and
Recording Systems, Implantable Leads for AIMDs, Programmers
for AIMDs, Application Software (external), Cardiac Rhythm
Management Device Accessories (adapters, stylets, guidewires,
tools, etc.); and returned product analysis of Implantable
Cardioverter Defibrillators, Implantable Monitoring and Recording
Systems and Cardiac Rhythm Management Device Accessories

CERTIFICATE



This is to certify that



SANTE
INTERNATIONAL S.A.

SANTE INTERNATIONAL S.A.

Str. Mantuleasa nr. 33, Sector 2
023961 Bucuresti
Romania

has implemented and maintains a **Quality Management System**.

Scope:

Import, trade and storage of medical and laboratory equipment, disinfectants, laboratory reagents, cardiovascular surgery devices, service for medical and laboratory equipment. Consulting for state and private medical units.

Through an audit, documented in a report, it was verified that the management system fulfills the requirements of the following standard:

ISO 9001 : 2015

Certificate registration no. 497269 QM15
Valid from 2021-06-16
Valid until 2024-06-15
Date of certification 2021-06-16



DQS GmbH

Markus Bleher
Managing Director



**Annex to certificate
Registration No. 497269 QM15**

SANTE INTERNATIONAL S.A.

Str. Mantuleasa nr. 33, Sector 2
023961 Bucuresti
Romania

Location

Scope

**075906
Sante International SA
Sos. Mihai Bravu nr. 7, bl. P37-P37A,
sector 2
021303 Bucuresti
Romania**

Import, trade and storage of medical and laboratory equipment, disinfectants, laboratory reagents, cardiovascular surgery devices. Consulting for state and private medical units.

**497270
Sante International SA
Str. Pupitrului, nr. 81,
sect. 3
033036 Bucuresti
Romania**

Storage of medical and laboratory equipment, disinfectants, laboratory reagents, cardiovascular surgery devices, service for medical and laboratory equipment. Consulting for state and private medical units.

**31050285
Sante International SA
Calea Ghirodei, nr. 36
300327 Timisoara
Romania**

Trade of medical and laboratory equipment, disinfectants, laboratory reagents, cardiovascular surgery devices, service for medical and laboratory equipment. Consulting for state and private medical units.

**31050284
Sante International SA
Calea Dorobantilor, nr. 111
400609 Cluj-Napoca
Romania**

Trade of medical and laboratory equipment, disinfectants, laboratory reagents, cardiovascular surgery devices, service for medical and laboratory equipment. Consulting for state and private medical units.

**31050283
Sante International SA
Str. Lascar Catargi, nr. 37
700107 Iasi
Romania**

Trade of medical and laboratory equipment, disinfectants, laboratory reagents, cardiovascular surgery devices, service for medical and laboratory equipment. Consulting for state and private medical units.