### Indications

The Resolute Onyx™ Zotarolimus-Eluting Coronary Stent System is indicated for improving coronary luminal diameter in patients, including those with diabetes mellitus, with symptomatic systems heart disease due to de novo lesions of length ≤ 35 mm in native coronary arteries with reference vessel diameters of 2.0 mm to 5.0 mm.

### Contraindications

- Patients with severe hypersensitivity to zotarolimus or other components of the stent or delivery system
- Patients with severe hypersensitivity to any contrast agent

### Precautions

- Patients who have received adequate training should perform implantation of the stent
- Subsequent stent restenosis or occlusion may require repeat angioplasty or surgical treatment
- Using balloon dilation of the arterial segment containing the stent
- The long-term outcomes of repeat revascularization procedures, including percutaneous coronary intervention and coronary bypass surgery, must be balanced against the risks of repeat revascularization
- The use of this product carries the same risks associated with other interventional cardiology procedures, including percutaneous coronary intervention, angiography, and diagnostic (including angiography and IVUS) and treatment procedures. These risks (in alphabetical order) may include but are not limited to:
- Abrupt vessel closure
- Access site pain, hematoma, or pseudoaneurysm
- Aneurysm, pseudoaneurysm, or arteriovenous fistula (AVF)
- Atherosclerosis
- Arrhythmias, including atrial fibrillation
- Balloon rupture
- Branch vessel injury
- Brachial artery thrombosis
- Bruising
- Cardiac arrest
- Carotid artery thrombosis
- Cerebral infarction
- Chest pain
- Cerebrovascular event
- Coronary artery perforation
- Coronary artery stenosis
- Coronary artery thrombosis
- Drug reaction
- False aneurysm
- Femoral artery occlusion
- Femoral artery pseudoaneurysm
- Femoral artery thrombosis
- Femoral artery ulceration
- Femoral vein occlusion
- Femoral vein pseudoaneurysm
- Femoral vein thrombosis
- Gastrointestinal perforation
- Gastrointestinal ulceration
- Gastrointestinal thrombosis
- Glaucoma
- Granuloma
- Infection
- Injection site reaction
- Injury to the spinal cord
- Intimal arteriosclerosis
- Intimal flaps
- Intimal hyperplasia
- Intimal proliferation
- Intimal shearing
- Intimal thickening
- Ischemia
- Intracranial hemorrhage
- Intracranial infarction
- Iliac artery occlusion
- Iliac artery pseudoaneurysm
- Iliac artery thrombosis
- Infarction
- Inflammation
- Intraocular hemorrhage
- Intraocular inflammation
- Intracranial hemorrhage
- Intracranial infarction
- Intracranial ischemia
- Intracranial thrombosis
- Intimal arteriovenous fistula
- Intimal fibroplasia
- Intimal hyperplasia
- Intimal proliferation
- Intimal shearing
- Intimal thickening
- Intimal ulceration
- Intimal inflammation
- Intimal necrosis
- Intimal proliferation
- Intimal shearing
- Intimal thickening
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- Intimal inflammation
- Intimal necrosis
- Intimal proliferation
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- Intimal thickening
- Intimal ulceration

### Potential Adverse Events

- Myocardial infarction
- Pericarditis
- Peripheral ischemia/peripheral nerve injury
- Renal failure
- Shock/pulmonary edema
- Stable or unstable angina
- Thrombosis
- Venous thromboembolism

### Ordering Information

<table>
<thead>
<tr>
<th>STENT LENGTH (mm)</th>
<th>Added sizes</th>
<th>Postdilatation limit</th>
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<tbody>
<tr>
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### Expanded Treatments Options

- With the broadest DES size matrix: 2.0–5.0 mm

### Expanded Your DES Expectations

With Resolute Onyx™ DES

### Exceptional Deliverability

Enabled by Thinner Struts

### Enlarged STENT DIAMETER

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<td>5.00</td>
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### Enlarged STENT LENGTH

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### Smallest DES.

**BIG POSSIBILITIES.**

Resolute Onyx™ 2.0-mm DES

Zotarolimus-Eluting Coronary Stent System

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**CAUTION: Federal (USA) law restricts this device to sale by or on the order of a physician.**

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SMALLEST DES.
BIG POSSIBILITIES.
Resolute Onyx™ 2.0-mm DES

THE LOWEST CROSSING PROFILE FOR SUPERIOR DELIVERABILITY

ENGINEERED TO EXPAND FROM 2.0 mm TO 3.25 mm

SMALLEST STENT CROSSING PROFILE

<1.0 mm

SMALLEST DES WITH EXPANSION CAPABILITIES FROM

2.0 mm → 3.25 mm

PROVEN CLINICAL PERFORMANCE IN SMALL VESSELS

AT 12 MONTHS, IN THE RESOLUTE ONYX 2.0-mm CLINICAL STUDY, RESULTS SHOWED

5% TLF  2% TLR  0% STENT THROMBOSIS


The Resolute Onyx™ stents should not be expanded to a diameter beyond the maximum labeled diameter listed on the label per the IFU. Do not dilate the 2.0-mm stents to greater than 3.25 mm. Postdilatation required for overexpansion. Data on file at Medtronic.