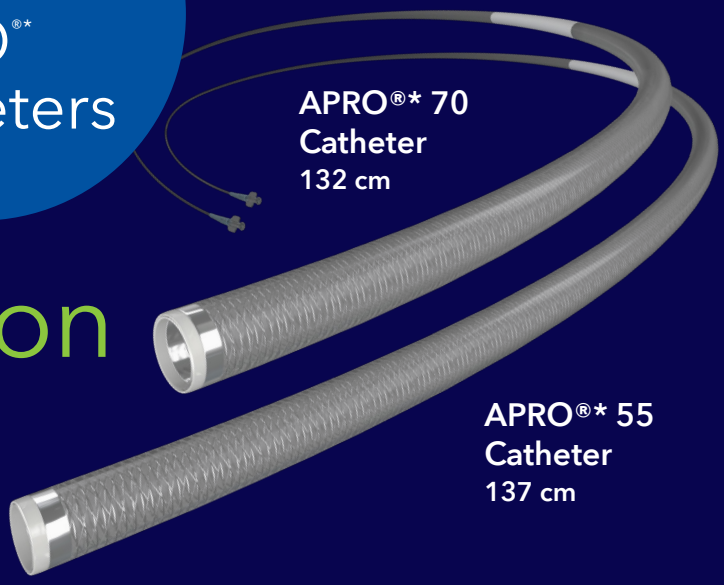
APRO®* Catheters



Effective aspiration for every turn

An expansive portfolio of reliable solutions

You have the expertise, we have a portfolio to support

APRO®* Catheters Ordering Information[2]

Product Description	Product Ordering Number	Compatible Sheath	Inner Diameter	Outer Diameter (Distal and Proximal)	Hydrophilic Coating Length	Usable Length
APRO®* 70 Catheter	APRO-70-132	minimum 0.088" ID	0.070"/1.8mm	0.083"/2.1mm	97cm	132cm
APRO®* 55 Intermediate Catheter	APRO-55IC-125	minimum 0.071" ID	0.055"/1.4mm	0.066"/1.7mm	90cm	125cm
APRO®* 55 Catheter	APRO-55-137	minimum 0.071" ID	0.055"/1.4mm	0.066"/1.7mm	102cm	137cm

Compatible Product Description[1,3,4]	Product Ordering Number	Working Length	Prox / Dist ID	Prox / Dist OD
Phenom™ 21 Catheter	FG13160-0615-1S	160cm	0.021"	0.034" / 0.030"
Phenom™ 27 Catheter	FG15160-0615-1S	160cm	0.027"	0.040" / 0.036"

Accessory Product Description[2]	Product Ordering Number	Prox Length	Distal Length	Prox / Dist ID	Volume
Alembic™* Aspiration Tubing	FG-01001	100"	7"	0.110"	N/A

Solitaire™ X Revascularization Device Portfolio Information[1,3,5]

Product Ordering Number	Recommended Vessel Diameter[A] (mm)		Microcatheter ID Range (in)	Push Wire Length	Stent Diameter	Usable Length[B]	Stent Length	Length from Distal Tip to Flourosafe Marker	Radiopaque Markers		Stent Markers Spacing
	(min)	(max)	(min-max)	(cm)	(mm)	(mm)	(mm)	(cm)	Distal	Prox.	(mm)
SFR4-3-20-10	1.5	3.0	0.017 – 0.027	200	3.0	20.0	30.6	<150	3	1	10
SFR4-3-40-10	1.5	3.0	0.017 – 0.027	200	3.0	40.0	51.6	<150	3	1	10
SFR4-4-20-05	1.5	4.0	0.021 – 0.027	200	4.0	20.0	31.0	<130	3	1	5
SFR4-4-20-10	1.5	4.0	0.021 – 0.027	200	4.0	20.0	31.0	<130	3	1	10
SFR4-4-40-10	1.5	4.0	0.021 – 0.027	200	4.0	40.0	50.0	<130	3	1	10
SFR4-6-20-10	2.0	5.5	0.021 – 0.027	200	6.0	20.0	31.0	<130	4	1	10
SFR4-6-24-06	2.0	5.5	0.021 – 0.027	200	6.0	24.0	37.0	<130	4	1	6
SFR4-6-40-10	2.0	5.5	0.021 – 0.027	200	6.0	40.0	47.0	<130	4	1	10

A. Based on smallest vessel diameter at thrombus site. **B.** Usable length that is at least as long as the length of the thrombus.

Based on internal reports

1. D01111484A; APRO55 Competitive testing report, Mar 2024 **2.** D00913771C; APRO 70 and 55 Catheter & Alembic Tubing IFUs and labels, Mar 2024 **3.** D00798101C; APRO70 Competitive testing report, Feb 2023 **4.** ML-0001B; Phenom Catheter specs, features & benefits, Jan 2019 **5.** M003592CDOC2E; Solitaire X Revascularization Device IFU, Aug 2021

CAUTION: Federal (USA) law restricts these devices to sale distribution and use by or on order of a physician. Indications, contraindications, warnings and instructions for **APRO** 70**, **APRO** 55** Catheter and **APRO** 55** Intermediate Catheter can be found in each device package. Indications, contraindications, warnings and instructions for use for all other products can be viewed at *www.medtronic.com/manuals*.

The **APRO** 55** Catheter and **APRO** 70** Catheter with an aspiration pump and the Alembic Aspiration Tubing are intended for use in the revascularization of patients with acute ischemic stroke secondary to intracranial large vessel occlusive disease (within the internal carotid, middle cerebral – M1 and M2 segments, basilar, and vertebral arteries) within 8 hours of symptom onset. Patients who are ineligible for intravenous tissue plasminogen activator (IV tPA) or who fail IV t-PA therapy are candidates for treatment.

The Alembic Aspiration Tubing is intended to connect the **APRO** 55** Catheter or the **APRO®* 70** Catheter to the aspiration pump.

The **APRO** 55** Intermediate Catheter is indicated for use in facilitating the insertion and guidance of appropriately sized interventional devices into a selected blood vessel in the peripheral and neurovascular systems. The APRO** 55 Intermediate Catheter is also indicated for use as a conduit for retrieval devices.

1. The **Solitaire™ X Revascularization Device** is indicated for use to restore blood flow in the neurovasculature by removing thrombus for the treatment of acute ischemic stroke to reduce disability in patients with a persistent, proximal anterior circulation, large vessel occlusion, and smaller core infarcts who have first received intravenous tissue plasminogen activator (IV t-PA). Endovascular therapy with the device should be started within 6 hours of symptom onset. **2.** The Solitaire™ X Revascularization Device is indicated to restore blood flow by removing thrombus from a large intracranial vessel in patients experiencing ischemic stroke within 8 hours of symptom onset. Patients who are ineligible for IV t-PA or who fail IV t-PA therapy are candidates for treatment. **3.** The Solitaire™ X Revascularization Device is indicated for use to restore blood flow in the neurovasculature by removing thrombus for the treatment of acute ischemic stroke to reduce disability in patients with a persistent, proximal anterior circulation, large vessel occlusion of the internal carotid artery (ICA) or middle cerebral artery (MCA)-M1 segments with smaller core infarcts (<70 cc by CTA or MRA,<25 cc by MR-DWI). Endovascular therapy with the device should start within 6-16 hours of time last seen well in patients who are ineligible for intravenous tissue plasminogen activator (IV t-PA) or who fail IV t-PA therapy.

Phenom™ Catheters are intended for the introduction of interventional devices or diagnostic agents into the neuro, peripheral, and coronary vasculatures.

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