1 **Excellent trackability with smooth navigation**+

2 **Built-in kink resistance**+

3 **Durability for Solitaire™ X device compatibility**+

APRO™* 70 Catheter

+ Based on in-vitro quantitative evaluation

An expansive portfolio of reliable solutions

You have the expertise, we have a portfolio to support

APRO™* 70 Catheter Ordering Information[4,10]

Product Ordering Number	Compatible Sheath[5,10]	Inner Diameter	Outer Diameter (Distal and Proximal)	Hydrophilic Coating Length	Usable Length
APRO-70-132	0.088″ minimum ID	0.070″/ 1.8mm	0.083″/ 2.1mm / 6.3F	97cm	132cm

Compatible Product Description	Product Ordering Number	Working Length	Prox / Dist ID	Prox / Dist OD
Phenom™ 21 Catheter[9]	FG13160-0615-1S	160cm	0.021″	0.034″ / 0.030″
Phenom™ 27 Catheter[9]	FG15160-0615-1S	160cm	0.027″	0.040″ / 0.036″

Accessory Product Description	Product Ordering Number	Prox Length	Distal Length	Prox / Dist ID	Volume
Alembic™* Aspiration Tubing[10]	FG-01001	100″	7″	0.110″	N/A
Riptide™ Canister[1,11]	MAC-1200	N/A	N/A	N/A	1200mL
Riptide™ Aspiration Pump[1,11]	MAP-1000	N/A	N/A	N/A	N/A

Solitaire™ X Revascularization Device Portfolio Information[1,2]

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.

1. D00798101C **2.** Li J, et al. J NeuroIntervent Surg 2022;0:1–7. doi:10.1136/neurintsurg-2022-018889 **3.** Li J and Ribo M Neurointervention 2022;17:70-77 doi: 10.5469/neuroint.2022.00255 **4.** D00827545B **5.** K211654, K211476, AXS Vecta DFU, SOFIA Plus IFU **6.** K173200 **7.** K211654 **8.** K200206 & TR-NV15999B **9.** ML-0001A **10.** D00913771B **11.** D00606933A & PS16-009E **12.** M003592CDOC2

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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 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™* 70 Catheter** with an aspiration pump and the Alembic™* Aspiration Tubing is 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.

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.

The **Riptide™ Aspiration System** is 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 t-PA) or who fail IV t-PA therapy are candidates for treatment.

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

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

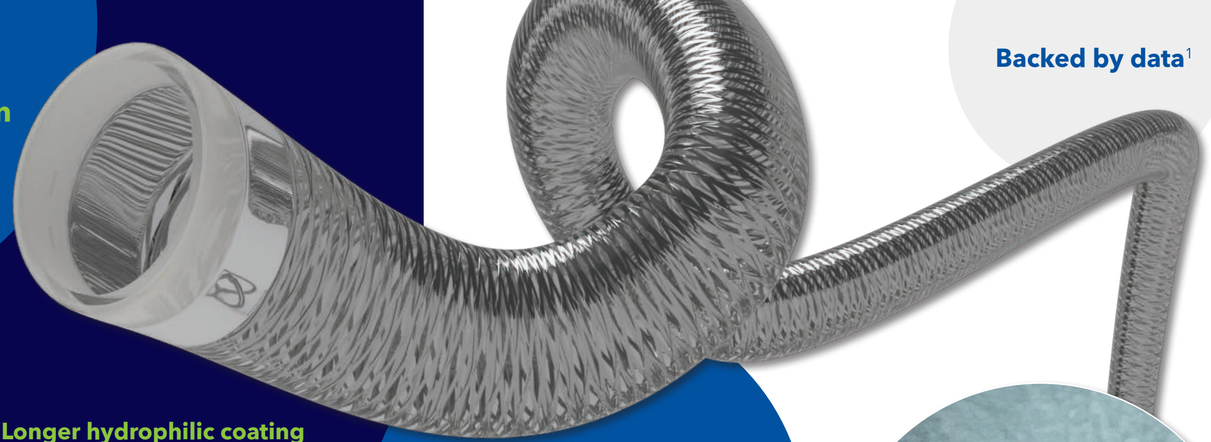
Medtronic Neurovascular

APRO™* 70 Catheter

Effective Aspiration for Every Turn

1 Excellent trackability with smooth navigation

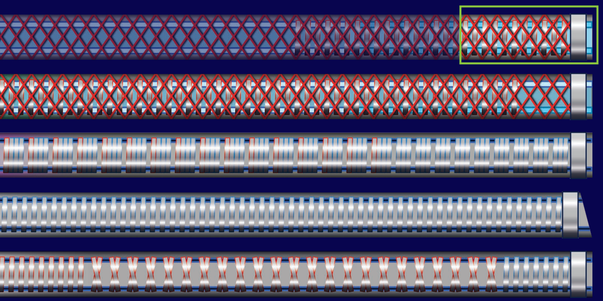
to get to the target location faster[1,!,+]



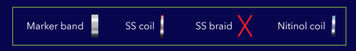
Catheter	Hydrophilic coating length[4,5]
APRO™* 70	**97 cm**
SOFIA™* Flow Plus	60 cm
ZOOM™* 71	35 cm
RED™* 72	30 cm
Vecta™* 71	25 cm

Longer hydrophilic coating provides extra lubricity
that reduces resistance when advancing the APRO™* 70 Catheter

APRO™* catheter's unique Coil + Braid design at the tip optimizes navigability[1,2,!,+]



Catheter tip 40cm construct comparison



2 Built-in kink resistance

so aspiration power stays consistent throughout tortuous anatomy[1,!,+]

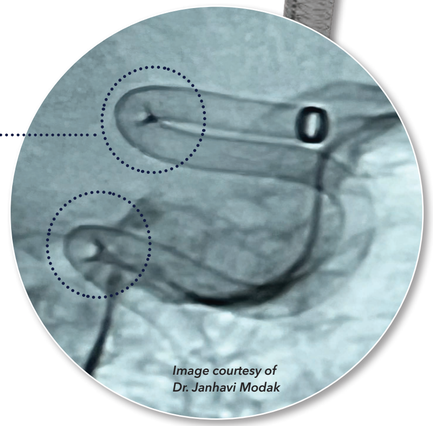


Image courtesy of Dr. Janhavi Modak

Maintains consistent aspiration throughout the procedure
with a stable, contoured design that resists kinks in tortuous anatomy[1,3,+]

Backed by data[1]

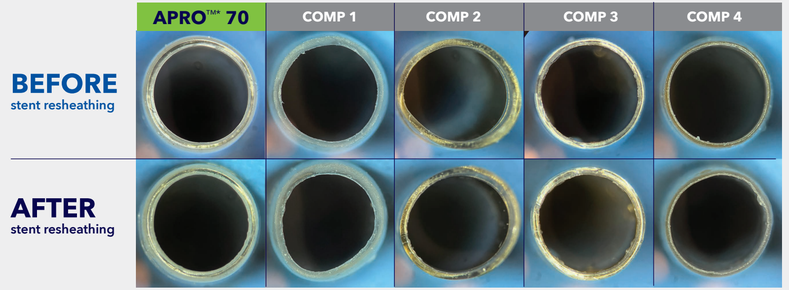
+ Based on in-vitro quantitative evaluation may not be representative of actual clinical performance
! vs. SOFIA™* Flow Plus, ZOOM™* 71, RED™* 72 and Vecta™* 71

APRO™* 70 Catheter

3 Durability for Solitaire™ X device compatibility

to endure multiple passes when you need it[1,+]

Maintain lumen integrity
with a proprietary process and PTFE liner[1,+]



Retrieve with minimal force
Solitaire™ X Revascularization Device requires the least retrieval force in the APRO™* Catheter compared to similar catheters tested[1,+]