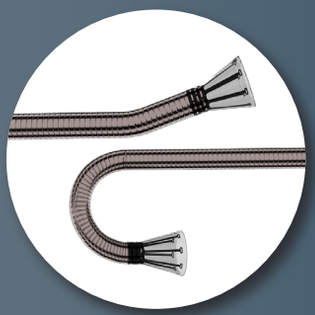
AngioVac

Cannula and Circuit



Proprietary Funnel Tip Design

- Available with either a 20° or a 180° angled tip
- Cannula shape options facilitate potentially easier navigation and placement through the patient's venous system
- Radiopaque nitinol tip allows for visualization under fluoroscopic imaging
- Funnel tip enhances venous drainage flow, and prevents clogging of the cannula with commonly encountered undesirable intravascular material such as soft thrombi, emboli, or vegetation
- Self-expanding funnel shape and actuated tip using slide over sheath
- Proximal locking touhy to maintain desired cannula angle
- Cannula shaft supported by a flat stainless steel coiled wire within the catheter body to support kink resistance, column strength
- Blood that is aspirated with the AngioVac Cannula is simultaneously reinfused back into the patient's body with the AngioVac Circuit to minimize blood loss

Working Side Port and Touhy Insert

- Y-Adapter with touhy insert allows for over-the-wire capability through the working side port and accommodates up to an 17F adjunctive device
- Hydrophilic coating on the obturator allows for easier insertion through the Y-Adapter and AngioVac Cannula

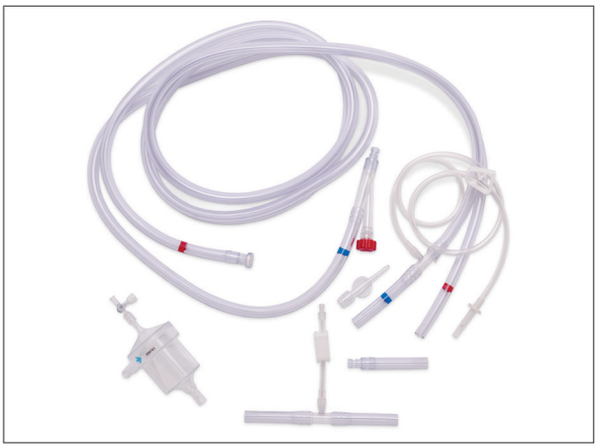
Quick Connect and Waste Collection Bag

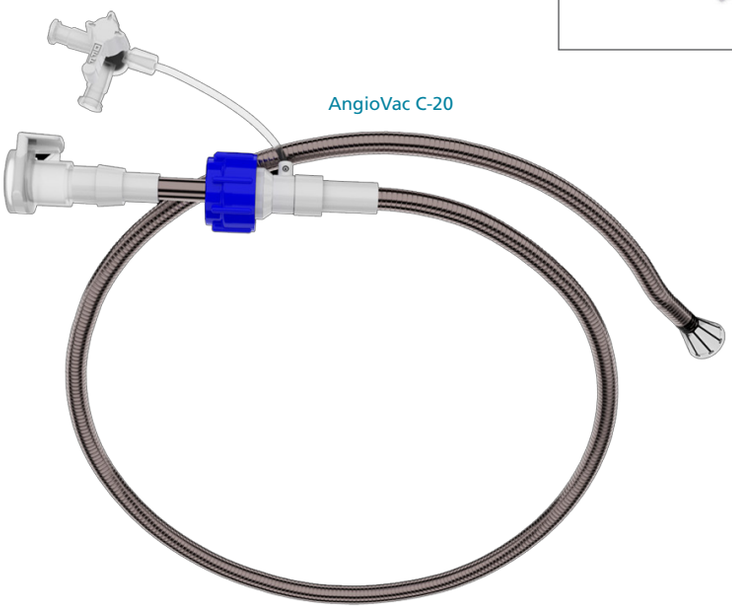
- Quick connectors allow for greater efficiency and ease of use in the surgical field. The rotating adapter allows for rotation of the AngioVac Cannula without twisting or kinking the circuit tubing
- Waste collection bag mitigates the need to administer additional fluid to patients in order to flush the filter and visualize material

Ordering Information

Description	UPN
Cannula with Dilator (20°)	H965251930
Cannula with Dilator (180°)	H965251940
Circuit with Bubble Traps (2)	H965251880
Cannula with Dilator (20°), Circuit and Bubble Traps (2)	H965251950
Cannula with Dilator (180°), Circuit and Bubble Traps (2)	H965251960

AngioVac Circuit





AngioVac C-20

† *These results represent the experience of some institutions and are not indicative of all procedure results. Results were obtained using the AngioVac Generation 2 device.*

IMPORTANT RISK INFORMATION

Indication for Use: The AngioVac Cannula is indicated for use as a venous drainage cannula and for removal of fresh, soft thrombi or emboli during extracorporeal bypass for up to 6 hours.

Contraindications: Contraindicated for patients with severe arterial or venous vascular disease, contraindicated for removal of chronic firmly adherent intravascular material (e.g., atherosclerotic plaque, chronic pulmonary embolism) and for use in the right heart or pulmonary arteries during active cardiopulmonary resuscitation.

Refer to Directions for Use and/or User Manual provided with the product for complete Instructions, Warnings, Precautions, Possible Adverse Effects and Contraindications prior to use of the product.

Indications for Use: The AngioVac Circuit is indicated for use in procedures requiring extracorporeal circulatory support for periods of up to six hours.

Contraindications: Refer to the AngioVac Cannula Directions for Use (DFU) for procedure-specific contraindications.

Refer to Directions for Use and/or User Manual provided with the product for complete Instructions, Warnings, Precautions, Possible Adverse Effects and Contraindications prior to use of the product.

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

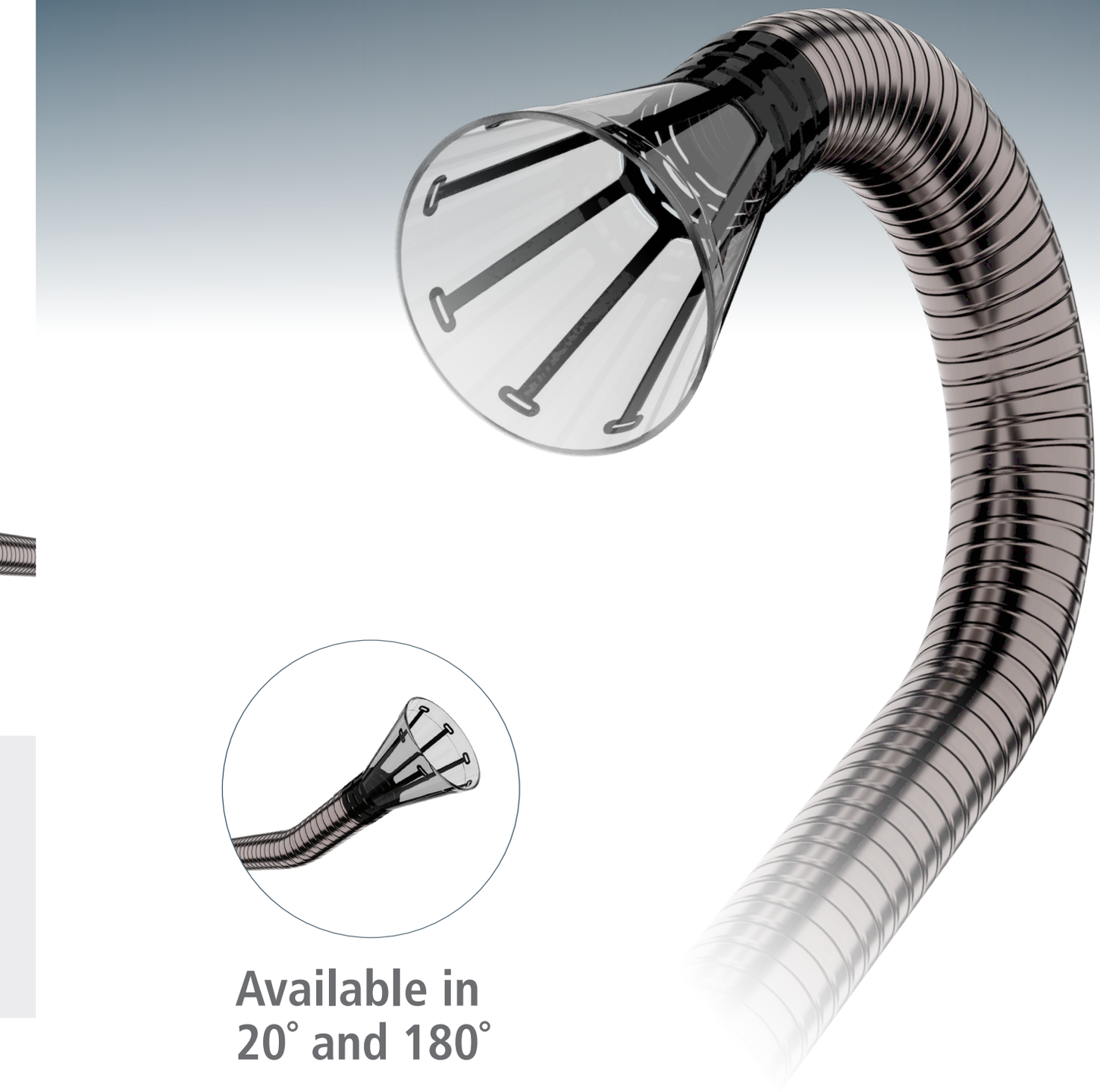
angiodynamics

USA > 14 Plaza Drive, Latham, NY 12110 > tel: 800-772-6446 or 518-798-1215 > fax: 518-798-1360

www.angiodynamics.com

AngioVac

Cannula and Circuit



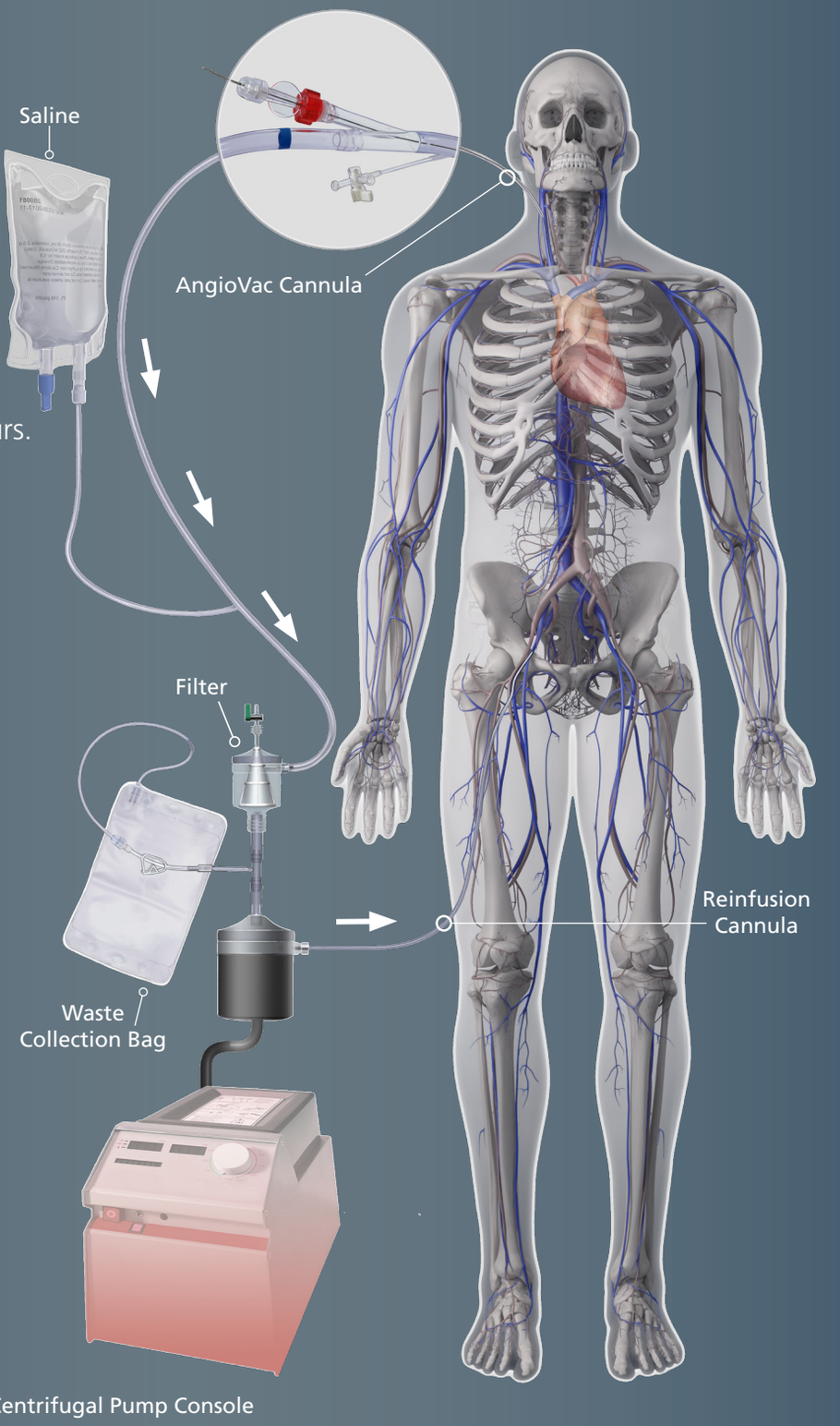
Available in 20° and 180°

angiodynamics

AngioVac

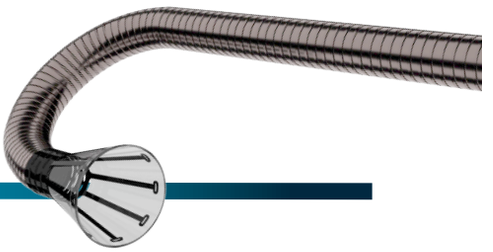
Cannula and Circuit

The AngioVac* System includes the venous drainage cannula and the extracorporeal circuit. AngioVac Cannula is intended for use as a venous drainage cannula and for the removal of fresh, soft thrombi or emboli during extracorporeal bypass for up to six hours.



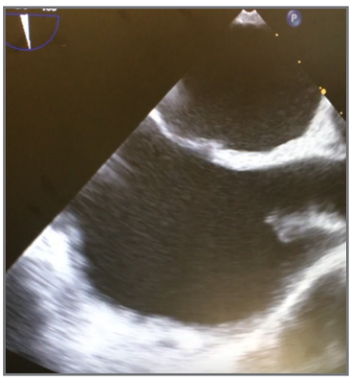
Utilizing off-the-shelf pump, filter, and reinfusion cannula, the AngioVac Cannula facilitates venous drainage as part of an extracorporeal bypass procedure for up to six hours.

Applications - Right heart

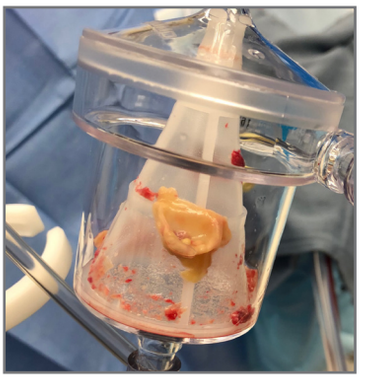


Pacemaker Lead Vegetation

Pre



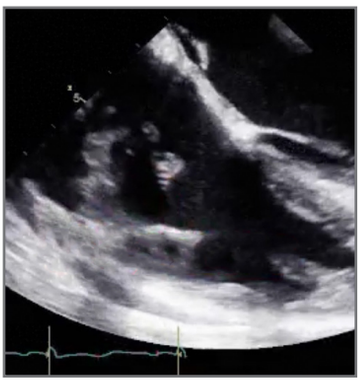
Post



Results

Actual procedure images and results†
Images courtesy of Dr. Raymond Schaerf
Providence St. Joseph Medical Center

RA Thrombus



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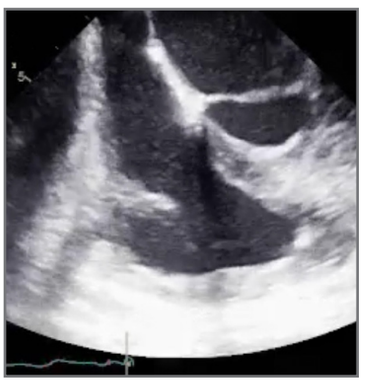

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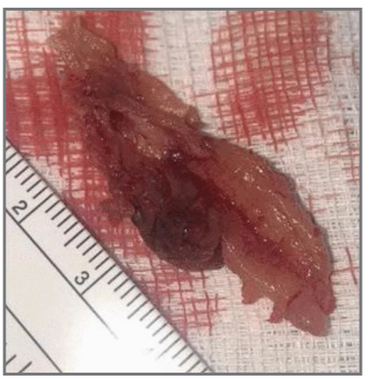
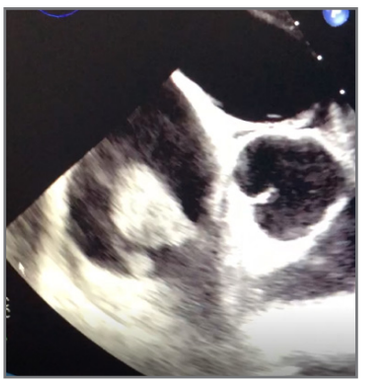


Results

Actual procedure images and results†
Images courtesy of Dr. Elliott Landau
Staten Island University Hospital

Tricuspid Valve Endocarditis



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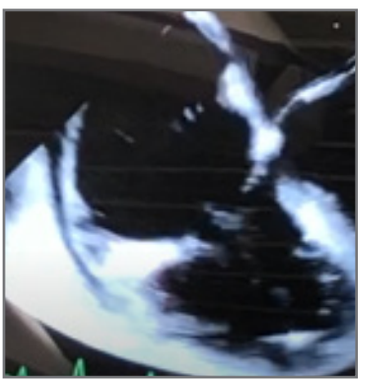

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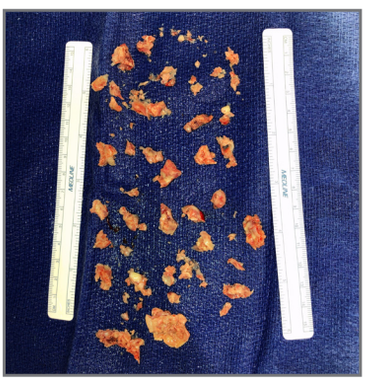
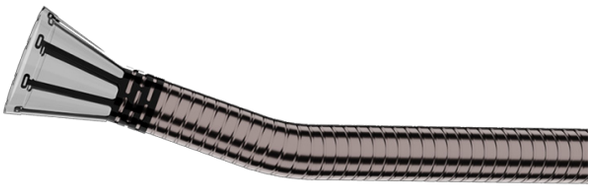


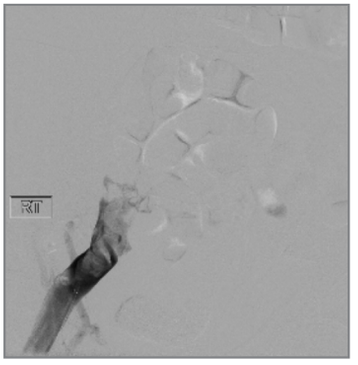
Results

Actual procedure images and results†
Images courtesy of Dr. Vince DeGeare
Norton Hospital

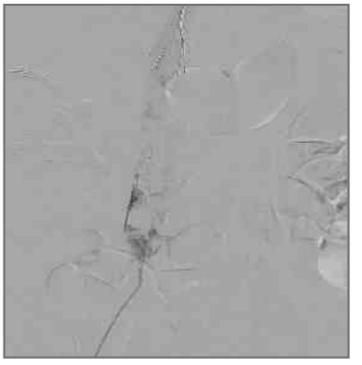
Applications - DVT



Iliofemoral / IVC Thrombus



Pre 1



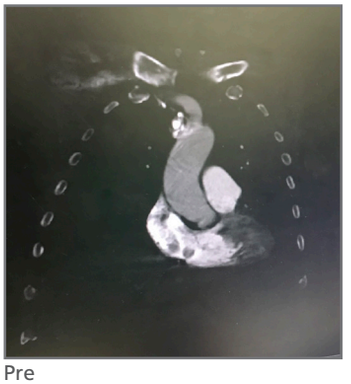
Pre 2

Post

Results

Actual procedure images and results†
Images courtesy of Dr. Shawn Sarin
George Washington University Hospital

DVT Thrombus in Transit



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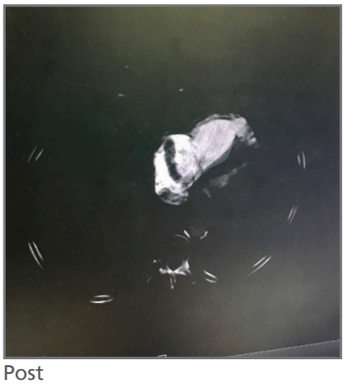

Post

Results

Actual procedure images and results†
Images courtesy of Dr. David Hirschl
Montefiore Medical Center