SpiderFX™
Embolic Protection Device

					Delivery end	Recovery end	Guide catheter/ sheath
Product number (1/box)	**Filter size** (mm)	**Target vessel size** (mm)	**Wire length OTW/RX** (cm)	**Wire diameter** (in/mm)	**Crossing profile** (F)	**Diameter** (F)	**Minimum ID** (in)
SPD2-030-190	3.0	2.0 - 3.0	190	0.014/0.36	3.2	4.2	0.066
SPD2-030-320	3.0	2.0 - 3.0	320/190	0.014/0.36	3.2	4.2	0.066
SPD2-040-190	4.0	3.1 – 4.0	190	0.014/0.36	3.2	4.2	0.066
SPD2-040-320	4.0	3.1 – 4.0	320/190	0.014/0.36	3.2	4.2	0.066
SPD2-050-190	5.0	4.1 – 5.0	190	0.014/0.36	3.2	4.2	0.066
SPD2-050-320	5.0	4.1 – 5.0	320/190	0.014/0.36	3.2	4.2	0.066
SPD2-060-190	6.0	4.5 – 6.0	190	0.014/0.36	3.2	4.2	0.066
SPD2-060-320	6.0	4.5 – 6.0	320/190	0.014/0.36	3.2	4.2	0.066
SPD2-070-190	7.0	5.5 - 7.0	190	0.014/0.36	3.2	4.2	0.066
SPD2-070-320	7.0	5.5 - 7.0	320/190	0.014/0.36	3.2	4.2	0.066

Sold in single units.

[1] Kasirajan K et al. The Use of Mechanical Thrombectomy Devices in the Management of Acute Peripheral Arterial Occlusive Disease. *J Vasc Interv Radiol.* 2001;12:405-411.
[2] Wholey MH et. al. Comparison of Thrombolytic Therapy of Lower Extremity Acute, Subacute, and Chronic Arterial Occlusions. *Cathet Cardiovasc Diagn.* 1998;44:159-169.
[3] Siablis D et. al. Outflow Protection Filters During Percutaneous Recanalization of Lower Extremities' Arterial Occlusions: A Pilot Study. *Eur J Radiol.* 2005; 55:243-249.
[4] Suri R et. al. Distal Embolic Protection During Femoropopliteal Atherectomy. *Catheter Cardiovascular Intervention.* 2006;67:417-422.
[5] Karnabatidis D et. al. Distal Embolism During Percutaneous Revascularizationof Infra-Aorticarterial Occlusive Disease: An Underestimated Phenomenon. *J Endovasc Ther.* 2006;13:269-280.
[6] Shammas NW et. al. Preventing Lower Extremity Distal Embolization Using Embolic Filter Protection: Results of the PROTECT Registry. *J Endovasc Ther.* 2008;15:270-276.

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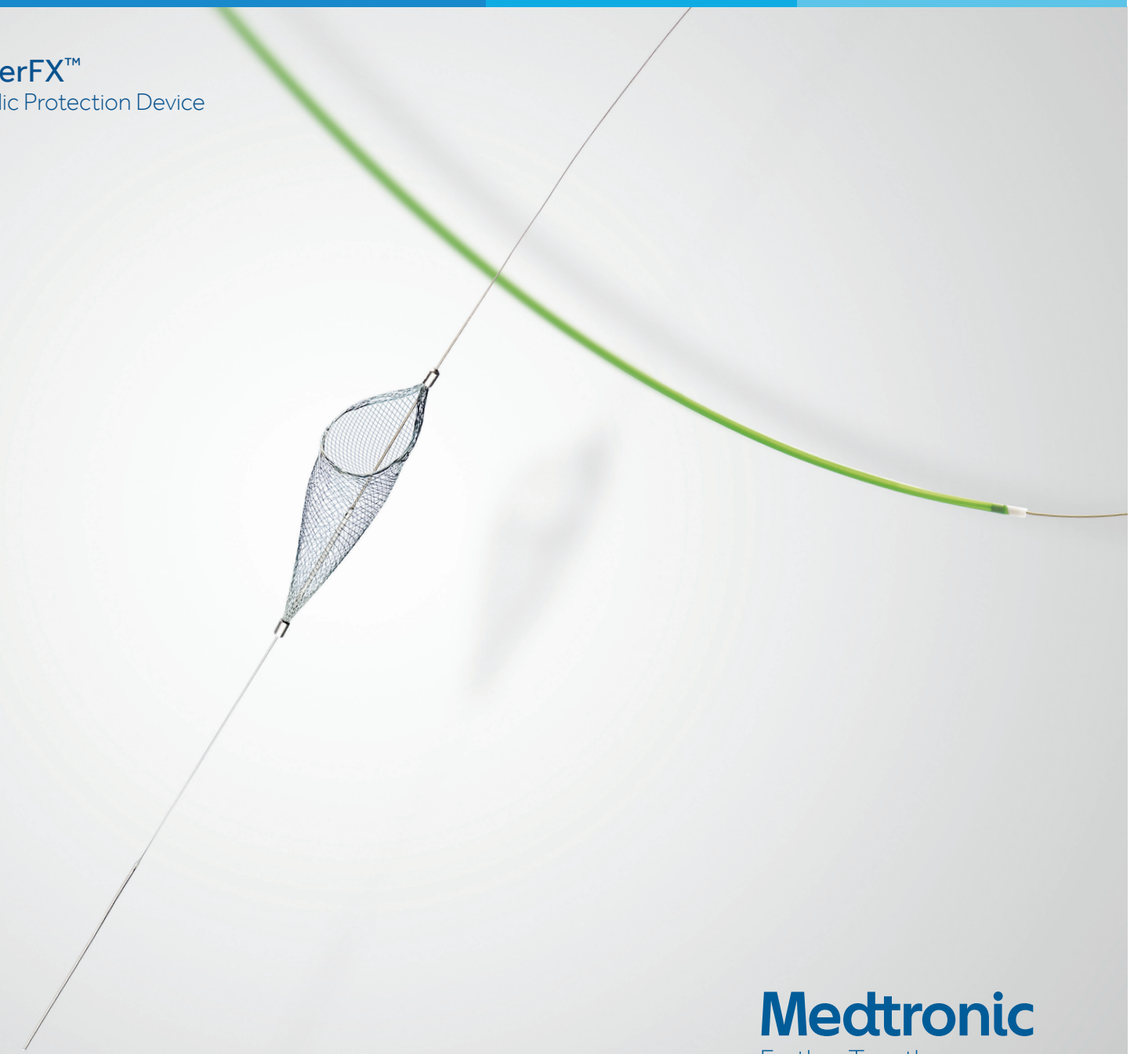
CAPTURE WHAT MATTERS

An embolic protection device for use in **carotid, coronary,** and **peripheral** interventions.

SpiderFX™
Embolic Protection Device



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Further, Together

CAPTURING DEBRIS MATTERS

While the risk of complications associated with embolic devices exists during all types of interventional procedures, patients with critical limb ischemia or single vessel run-off are at a greater risk for an embolic event, as are patients with complex lesion morphology such as severe calcium.

Embolic protection devices are used to capture and remove debris that become dislodged during interventional procedures. Debris may embolize downstream and block smaller vessels, resulting in procedural complications or poor patient outcomes.

Distal embolization is a potential complication of percutaneous atherectomy and other endovascular procedures that can lead to poor outcomes for the patient and escalated costs for hospitals. Embolic protection (EP) devices have been shown in several studies to have a low failure rate and thus reduce the incidence of these events. [1-6]

Figure 1a-1c.
Comparison of outcomes between matched groups–inpatient

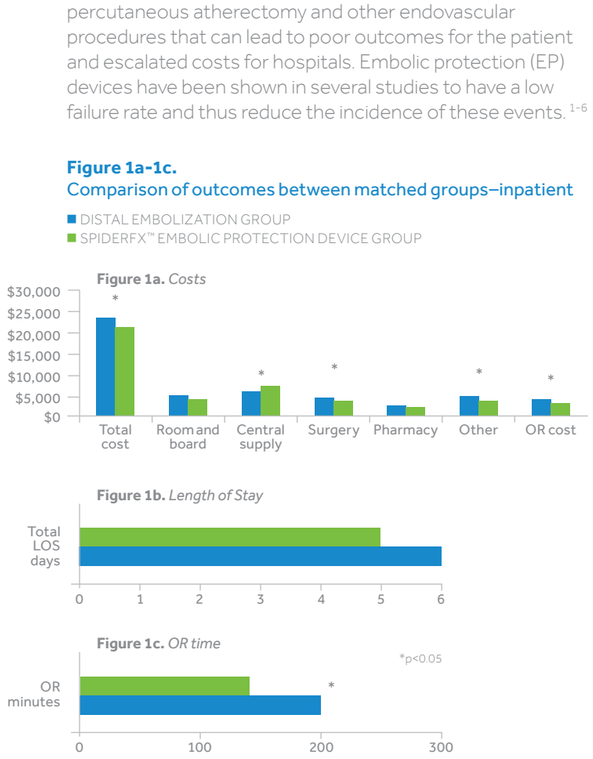
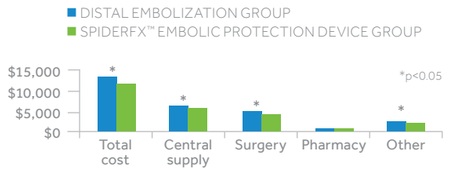


Figure 2.
Comparison of outcomes between matched groups –hospital outpatient



The use of the SpiderFX™ device is strongly associated with:

- Lower costs
- Shorter inpatient hospital stays
- Lower ICU utilization rate
- Shorter OR times

Cumulatively, these findings demonstrate that EP devices, such as the SpiderFX device, may significantly reduce consumption of hospital resources.

CHOICE MATTERS

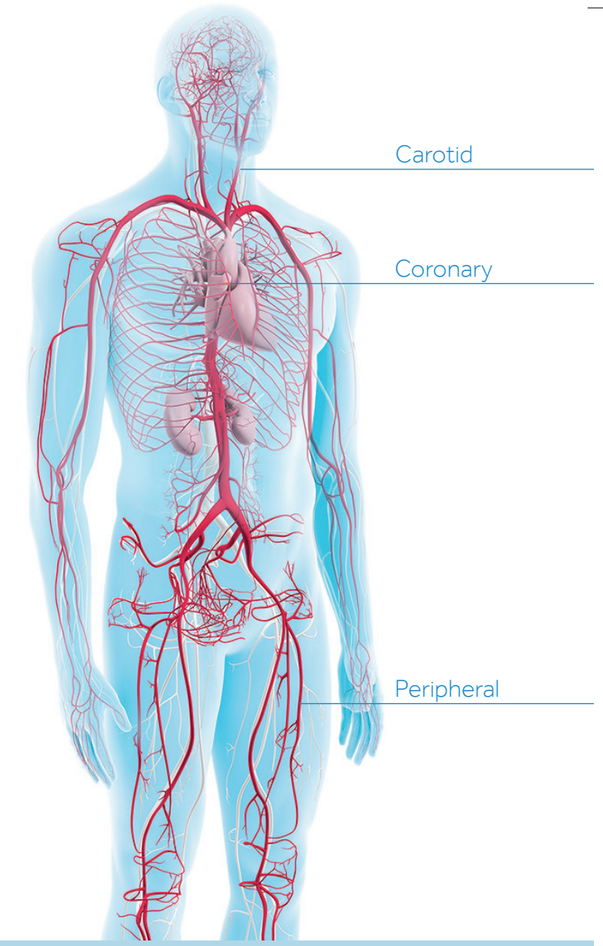
Vessel of choice

- The SpiderFX embolic protection device can be used in **carotid, coronary,** and **peripheral** interventions.

Delivery of choice

- The device can be delivered over any 0.014" or 0.018" guidewire or through any 0.035" catheter*, allowing you to **choose your method of delivery for successful placement.**

* Lower extremity procedures



DESIGN MATTERS

Basket design

The unique braided nitinol filter conforms to the vessel wall and maintains full-wall apposition during the intervention. Flow is directed into the filter's conical design, effectively capturing debris while maintaining blood flow.

Visible markers

A gold tungsten loop around the mouth of the filter, along with radiopaque markers, allows for precise positioning and verification of apposition before proceeding with the intervention.

Wire movement

The capture wire (available in 190 cm and 320 cm lengths) rotates and moves longitudinally, independent of the filter, for enhanced stability during the procedure.

The SpiderFX device is available in a variety of sizes (3 – 7 mm) for optimal fit and apposition in a range of vessels.