Fetch®2 Catheter Specifications

Vessel Diameter	≥2.0mm
Working Length	135cm
Coiled Proximal Shaft	105cm
Transitional Mid-Shaft	5cm
Marker Band	2mm from distal tip
Positioning Marker Bands	95cm, 105cm

Platform	Rapid Exchange (Rx)
Hydrophilic Coated Distal Shaft	25cm
Outer Diameter	1.4mm (4.2F)
Guidewire Compatibility	0.014”
Guide Catheter Compatibility	6F (≥ 0.0 70”)

ORDER INFORMATION: Fetch® 2 Aspiration Catheter 109400-001

MEDRAD is part of Bayer HealthCare

Indications, operating specifications and availability may vary by country. Check with local product representation and country-specific Information for Use for your country.

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

The Fetch2 Aspiration catheter is indicated for the removal of fresh, soft emboli and thrombi from vessels in the peripheral and coronary vasculature. See product *Information for Use* for specific and complete prescribing information for the Fetch Aspiration Catheter.

AngioJet® Thrombectomy Systems

Indications/Contraindications
AngioJet and AngioJet Ultra peripheral indications include: breaking up and removing thrombus from infra-inguinal peripheral arteries, upper and lower extremity peripheral arteries, upper extremity peripheral veins, ileofemoral and lower extremity veins, A-V access conduits, and for use with the AngioJet Ultra Power Pulse Kit for the control and selective infusion of physician specified fluids, including thrombolytic agents, into the peripheral vascular system. Coronary indications include: removing thrombus in the treatment of patients with symptomatic coronary artery or saphenous vein graft lesions prior to balloon angioplasty or stent placement. Do not use in patients: who are contraindicated for intracoronary or endovascular procedures, who cannot tolerate contrast media, and in whom the lesion cannot be accessed with the wire guide.

Warnings and Precautions
The system has not been evaluated for treatment of pulmonary embolism or for use in the carotid or cerebral vasculature. Some AngioJet devices have not been evaluated for use in coronary vasculature. Operation of the catheter may cause embolization of some thrombus and/or thrombotic particulate debris. Cardiac arrhythmias may occur and cardiac rhythm should be monitored during catheter use and appropriate management employed, if needed. Systemic heparinization is advisable to avoid pericatheterization thrombus and acute rethrombosis. Operation of the system causes transient hemolysis. Large thrombus burdens may result in significant hemoglobinemia which should be monitored. Consider hydration, as appropriate. Before coronary AngioJet treatment, verify the presence of thrombus because routine use of AngioJet in every STEMI patient, without proper selection for thrombus, has been associated with increased mortality risk. Do not use the system in the coronary vasculature without placing a temporary pacing catheter to support the patient through hemodynamically significant arrhythmias which may occur.

Potential Adverse Events
Potential adverse events (in alphabetical order) which may be associated with use of the system are similar to those associated with other interventional procedures and include but are not limited to the following: abrupt closure of treated vessel, acute myocardial infarction, acute renal failure, arrhythmias (including VF and VT), bleeding from access site, death, dissection, embolization (proximal or distal), emergent CABG, hematoma, hemolysis, hemorrhage requiring transfusion, hypotension/hypertension, infection at access site, myocardial ischemia, pain, pancreatitis, perforation, pseudoaneurysm, reactions to contrast medium, stroke/CVA, thrombosis/occlusion, total occlusion of treated vessel, vascular aneurysm, vascular spasm, vessel wall or valve damage.

Refer to product labeling for device-specific indications, contraindications, warnings/precautions, and adverse events. Rx only. – COM January 2011

1. Svilaas T, et al. Thrombus aspiration during primary percutaneous intervention. *N Engl J Med.* 2008;358:557-567.
2. Sardella G, et al. Thrombus aspiration during primary percutaneous coronary intervention improves myocardial reperfusion and reduces infarct size: the EXPIRA (thrombectomy with export catheter in infarct-related artery during primary percutaneous coronary intervention) prospective, randomized trial. *J Am Coll Cardiol.* 2009;53:309-315.
3. Antoniucci, D, et al. The JETSTENT Trial. *J. Am. Coll. Cardiol.* published online Aug 4, 2010; doi:10.1016/j.jacc.2010.06.011.
4. Grines C, et al. A Bayesian Meta-Analysis Comparing AngioJet® Thrombectomy to Percutaneous Coronary Intervention Alone in Acute Myocardial Infarction. *J Interven Cardiol* 2008;21:459-482.
5. Sianos G, et al. Angiographic Stent Thrombosis After Routine Use of Drug-Eluting Stents in ST-Segment Elevation Myocardial Infarction. *J Am Coll Cardiol* 2007:50;7.

Bayer HealthCare

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CATALOGO 006

Our Next Generation Aspiration Catheter

Fetch®2 ASPIRATION CATHETER

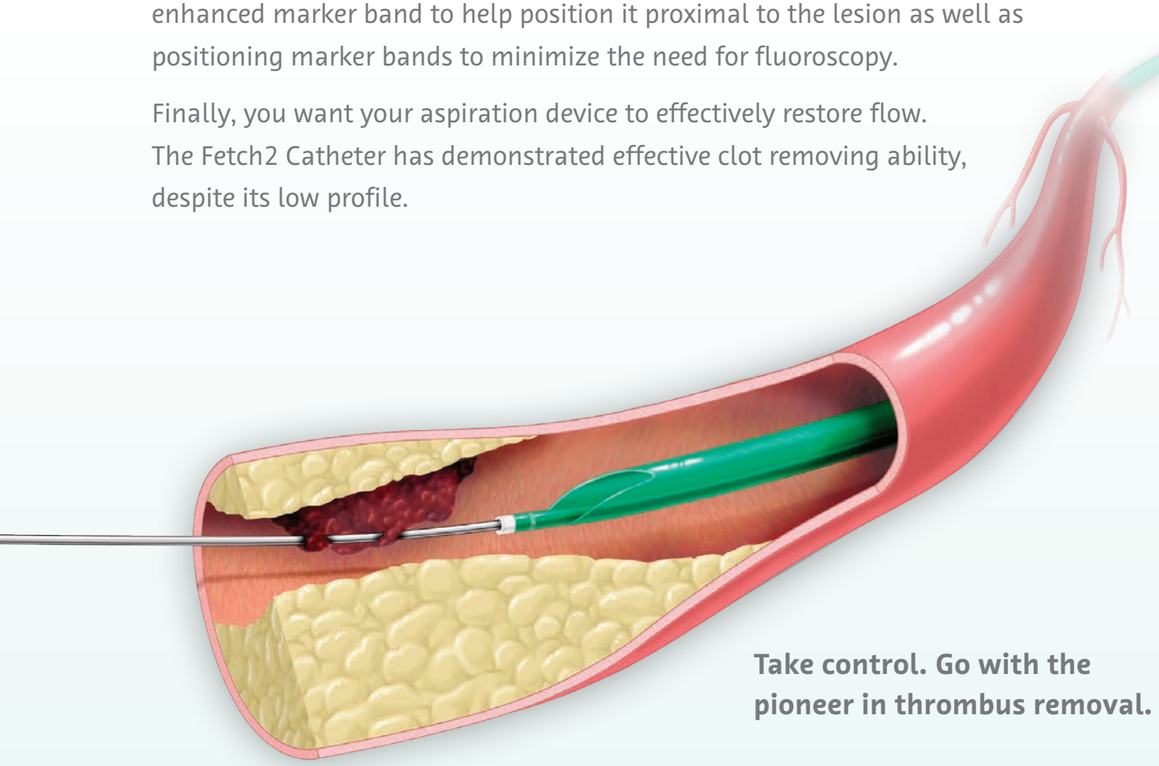
Why Use Fetch®2 Aspiration?

You choose a manual aspiration device for its ease of use and its ability to quickly resolve small, fresh thrombus, in coronary arteries. The Fetch2 Aspiration Catheter offers enhanced handling and kink resistance thanks to a variable pitch coiled proximal shaft.

You want to reach into small vessels and cross tight lesions. The Fetch2 Aspiration Catheter can get you there with a low 4.2 French catheter profile and convex-cut opening to reduce risk of vessel wall damage.

And when you reach the thrombus, you want your aspiration device positioned to properly engage the thrombus. The Fetch2 Catheter has an enhanced marker band to help position it proximal to the lesion as well as positioning marker bands to minimize the need for fluoroscopy.

Finally, you want your aspiration device to effectively restore flow. The Fetch2 Catheter has demonstrated effective clot removing ability, despite its low profile.



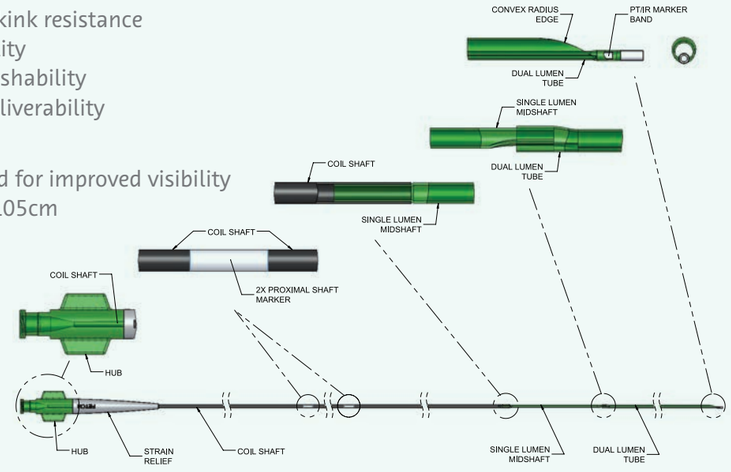
Take control. Go with the pioneer in thrombus removal.

Fetch2 Features

Kink Resistance and Handling
- Variable pitch coiled shaft for improved kink resistance
- Low pitch distal shaft to promote flexibility
- High pitch proximal shaft to enhance pushability
- Distal hydrophilic coating to promote deliverability

Visibility and Easy Positioning
- Enhanced distal radiopaque marker band for improved visibility
- Positioning marker bands at 95cm and 105cm to minimize the need for fluoroscopy
- White tip to facilitate guidewire loading

Packaging and Components
- Convenient tray packing
- Two syringes
- Two filters
- Shorter extension line



Complete Solution for Managing Coronary Thrombus

Evidence proves that in STEMI, thrombus matters: removing thrombus can be a critical factor in enhancing clinical outcomes in primary PCI.[1,2,3,4,5] With the introduction of our Fetch2 Manual Aspiration Catheter, Bayer enhances its range of tools for small and large thrombus removal.