PHILIPS

VOLCANO

Eagle Eye ***Platinum***

RX digital
IVUS catheter

Fast, plug-and-play simplicity

№1
Choice of physicians for intravascular imaging*

*Millenium Research Group, US Marketrack internal sales data on file

Eagle Eye Platinum ST catheter

Eagle Eye Platinum catheter

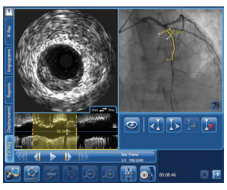
Designed for exceptional deliverability and ease of use

- Soft, tapered tip with lowest available entry profile and choice of two lengths[1]
- GlyDx hydrophilic coating
- Long rapid exchange lumen for pushability
- Radial access appropriate; fits through all 5F guides.[2]

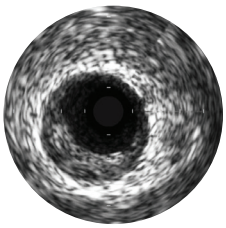
Radiopaque markers for quick, convenient length estimation

- Three markers not offered by other IVUS catheters
- 10 mm spacing facilitates length estimation without a pullback device or marker wire.

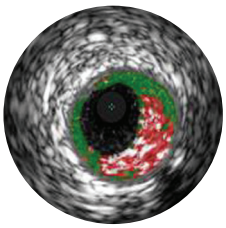
Provides advanced imaging with SyncVision



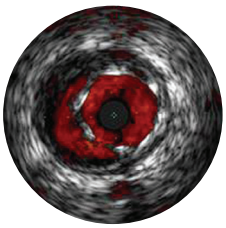
SyncVision precision guidance



Grayscale IVUS imaging



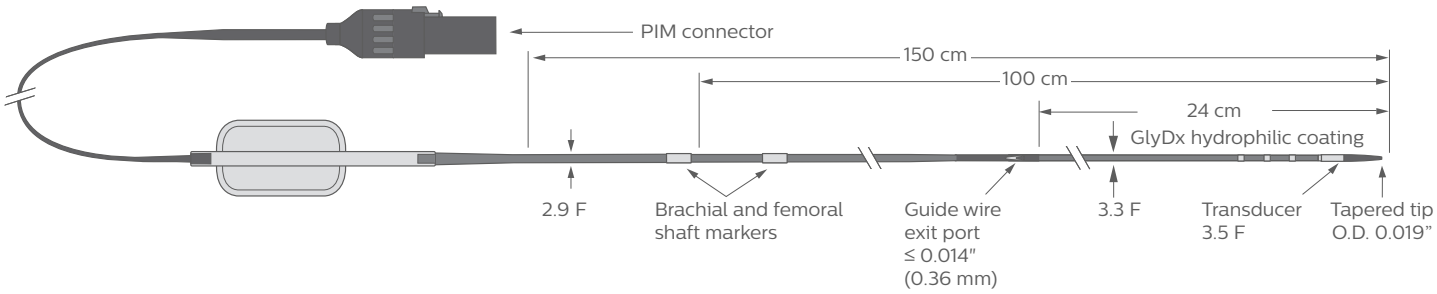
VH IVUS imaging[3]



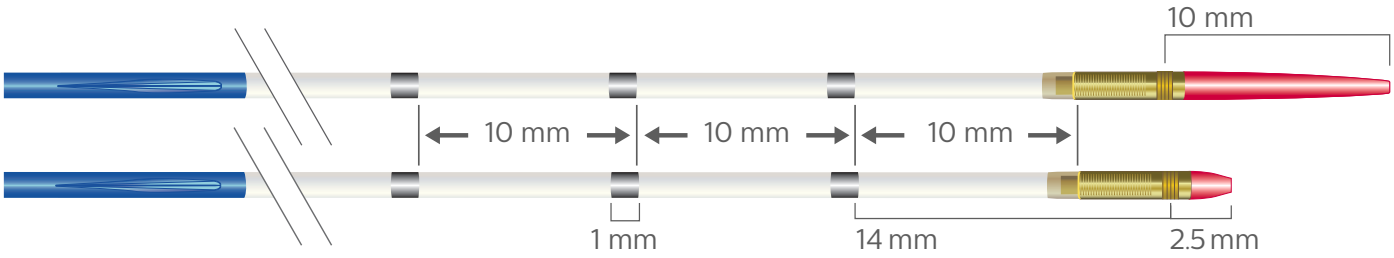
ChromaFlo imaging

IVUS is now supported by large randomized and observational studies.[5,6] It is associated with a 74% change in PCI strategy, improved outcomes and quality metrics.[5,6,7,8]

Eagle Eye Platinum / Platinum ST RX digital IVUS catheter



Distal tip and RO marker detail



Technical specifications

Minimum guide catheter	Maximum guide wire	Maximum field of view	Working length	Frequency	Ordering information
5F (I.D. ≥ .056")	0.014	20 mm	150 cm	20 MHz	85900P Platinum 85900PST Platinum ST

1. Millenium Research Group, US Marketrack internal sales data on file
2. 0.019" entry profile, data on file; tip to transducer lengths offered include 2.5 mm and 10 mm
3. Fits through guide catheters with inner diameters as low as 0.056"; data on file at Philips Volcano
4. Safety and effectiveness of system for use in the characterization of vascular lesions and tissue types has not been established.
5. Elgendy IY et al. Outcomes with intravascular ultrasound-guided stent implantation: a meta-analysis of randomized trials in the era of drug eluting stents. Circ Cardiovasc Interv.2016;9:e003700
6. Ahn JM, Kang SJ, Yoon SH, et al. Meta-analysis of outcomes after intravascular ultrasound-guided versus angiography-guided drug-eluting stent implantation in 26,503 patients enrolled in three randomized trials and 14 observational studies. Am J Cardiol. 2014;113:1338-1347. Hyperlink "http://www.ajconline.org/article/S0002-9149(14)00549-9/abstract"
7. Witzenbichler B, et al. Relationship between intravascular ultrasound guidance and clinical outcomes after drug-eluting stents: The ADAPT-DES study. Circulation. 2014 Jan: 129,4;463-470.
8. Singh V, Badheka AO, Arora S, et al. Comparison of in-hospital mortality, length of hospitalization, costs, and vascular complications of percutaneous coronary interventions guided by ultrasound versus guided by angiography. Am J Cardiol. Online 18 Feb 2015.

600649-001/006

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