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angiodynamics

CDT FOR DVT

Pressure Response Outlets

AngioDynamics' pressure response outlet technology has led the way for treatment of peripheral clot and catheter directed thrombolysis. The unique fluid outlets allow for an even distribution of fluid volume along the entire length of the infusion pattern³, resulting in a 12-fold advantage over conventional sidehole catheters⁶.

Occluding ball wire: prevents kinking and provides the proper force to activate pressure response outlets

Radiopaque markers: for ease of placement

Pressure Response Outlets: Proprietary, Time-Tested Technology

Even Distribution Results in Faster Treatment of Clot

The Uni-Fuse catheter exposes as much of the drug as possible to as much of the surface area of the clot as possible to increase the rate of lysis, hasten enzyme action, and minimize dilution^{2,4}. Sidehole catheters result in the thombolytic agent diverting away from the thrombus into collateral vessels proximal and/or distal to the thrombus, depending on catheter placement.

Sturdier Construction Allows for More Versatility

Less catheter material is removed when making slits versus making holes, allowing for a stronger catheter with more pushability. This is important for tortuous anatomy or positioning the Uni-Fuse catheter in tight clot accumulation.

Flow-Thru Hub with self-adjusting occluding wire



- Supports catheter over bifurcation
- 4F available in 45 cm, 90 cm and 135 cm lengths with infusion slit patterns of 2, 5, 10, 15, 20, 30, 40, and 50 cm.
- 5F available in 45 cm, 90 cm and 135 cm lengths with infusion slit patterns of 2, 5, 10, 15, 20, 30, 40, and 50 cm.
- Compatible with a 0.035" guidewire: more pushability and mechanical advantages

RETHINK YOUR STANDARD OF CARE

The Uni-Fuse catheter is a cost effective and proven method of managing patients presenting with thrombus.



CDT HAS THE FOLLOWING ADVANTAGES OVER SYSTEMIC INFUSION:

- Improved efficiency of drug delivery⁵
- Decreased total quantity of the drug⁵
- Provides venous access for adjunctive techniques such as angioplasty and stent placement⁵
- Safe with less than a .5% chance of intracranial hemorrhage⁴
- Decreased incidence of persistent phlebitic symptoms
- Improved quality of life
- Possibly a decreased incidence of recurrent thrombotic events¹



The Uni-Fuse catheter with Pressure Response Outlets and the occluding ball wire allow for even pressure distribution throughout the catheter resulting in a more even distribution of lytic compared to the standard sidehole catheter design.







LEFT POPLITEAL



RIGHT POPLITEAL



AngioDynamics has led the way as the market leader for CDT catheters with patented slit technology to infuse a consistent, even distribution of lytic agent to an area of clot. The Uni-Fuse catheter uses a proprietary, time-tested technology to provide faster and more effective treatment for clots, and its sturdier construction makes it more versatile.

UNI-FUSE INFUSION CATHETER (Quantity 1 per box)

Description	UPN	Description	UPN
4F x 45 cm x 2 cm Infusion Pattern	H787124018235	5F x 45 cm x 2 cm Infusion Pattern	H787124018385
4F x 45 cm x 5 cm Infusion Pattern	H787124018245	5F x 45 cm x 5 cm Infusion Pattern	H787124018015
4F x 45 cm x 10 cm Infusion Pattern	H787124018255	5F x 45 cm x 10 cm Infusion Pattern	H787124018025
4F x 45 cm x 15 cm Infusion Pattern	H787124018265	5F x 45 cm x 15 cm Infusion Pattern	H787124018035
4F x 45 cm x 20 cm Infusion Pattern	H787124018275	5F x 45 cm x 20 cm Infusion Pattern	H787124018045
4F x 90 cm x 2 cm Infusion Pattern	H787124018285	5F x 90 cm x 2 cm Infusion Pattern	H787124018415
4F x 90 cm x 5 cm Infusion Pattern	H787124018175	5F x 90 cm x 5 cm Infusion Pattern	H787124018055
4F x 90 cm x 10 cm Infusion Pattern	H787124018185	5F x 90 cm x 10 cm Infusion Pattern	H787124018065
4F x 90 cm x 15 cm Infusion Pattern	H787124018295	5F x 90 cm x 15 cm Infusion Pattern	H787124018425
4F x 90 cm x 20 cm Infusion Pattern	H787124018195	5F x 90 cm x 20 cm Infusion Pattern	H787124018075
4F x 90 cm x 30 cm Infusion Pattern	H787124018305	5F x 90 cm x 30 cm Infusion Pattern	H787124018085
4F x 90 cm x 40 cm Infusion Pattern	H787124018315	5F x 90 cm x 40 cm Infusion Pattern	H787124018095
4F x 90 cm x 50 cm Infusion Pattern	H787124018325	5F x 90 cm x 50 cm Infusion Pattern	H787124018105
4F x 135 cm x 2 cm Infusion Pattern	H787124018335	5F x 135 cm x 2 cm Infusion Pattern	H787124018435
4F x 135 cm x 5 cm Infusion Pattern	H787124018205	5F x 135 cm x 5 cm Infusion Pattern	H787124018115
4F x 135 cm x 10 cm Infusion Pattern	H787124018215	5F x 135 cm x 10 cm Infusion Pattern	H787124018125
4F x 135 cm x 15 cm Infusion Pattern	H787124018345	5F x 135 cm x 15 cm Infusion Pattern	H787124018445
4F x 135 cm x 20 cm Infusion Pattern	H787124018225	5F x 135 cm x 20 cm Infusion Pattern	H787124018135
4F x 135 cm x 30 cm Infusion Pattern	H787124018355	5F x 135 cm x 30 cm Infusion Pattern	H787124018145
4F x 135 cm x 40 cm Infusion Pattern	H787124018365	5F x 135 cm x 40 cm Infusion Pattern	H787124018155
4F x 135 cm x 50 cm Infusion Pattern	H787124018375	5F x 135 cm x 50 cm Infusion Pattern	H787124018165

Learn more at uni-fuse.com

1. Baldwin Z, et al. Catheter-Directed Thrombolysis for Deep Venous Thrombosis. Vascular and Endovascular Surgery 2004; 28,1:1-9.

2. Bookstein JJ, Valki K. Pulse-Spray Pharmacomechanical Thrombolysis – How I Do It. Cardiovascular Interventional Radiology 1992; 15:228-233.

3. Cho KJ, Recinella DK. Pattern of Dispersion from a Pulse-Spray Catheter for Delivery of Thrombolytic Agents: Design, Theory and Results. Academic Radiology 1997; 4:210-216.

4. Kandarpa K, Drinker PA, Singer SJ, Caramore D. Forceful Pulsatile Local Infusion of Enzyme Accelerates Thrombolysis: In Vivo Evaluation of a New Delivery System. Radiology 1988; 168:739-7.

5. Mewissen M, et al. Catheter-Directed Thrombolysis for Lower Extremity Deep Venous Thrombosis: Report of a National Multicenter Registry. Radiology 1999; April:39-49.

6. Razavi M, Charles Semba. The Changing Role of Thrombolytic Therapy in the Management of Acute Deep Vein Thrombosis. Therapy 2005; 2,1:57-59.

IMPORTANT RISK INFORMATION

INDICATION FOR USE: AngioDynamics Uni-Fuse Infusion System is intended for the administration of fluids, including thrombolytic agents and contrast media, into the peripheral vasculature.

CAUTION: Federal (USA) law restricts the sale of these devices by or on the order of a physician.

CONTRAINDICATIONS: The Uni-Fuse Infusion System is contraindicated for use in the coronary vasculature and is not for the infusion of blood or blood products. WARNINGS AND PRECAUTIONS: The Uni-Fuse Infusion System is sterile and intended for single patient use and use only by fully trained physicians in angiography and percutaneous interventional procedures. Reuse of single-use devices creates a potential risk of patient or user infections. Contamination of the device may lead to injury, illness or death of the patient. Do not inject contrast medium with a pressure injector if the occluding ball wire is in place. Use an introducer sheath if the puncture is through a synthetic graft. Failure to use an introducer sheath may result in damage to the catheter. POTENTIAL COMPLICATIONS: Adverse reactions may include, but are not limited to: vessel perforation, dissection, hematoma, stroke, hemorrhage, contrast extravasation, embolism/ thrombus, vaso spasm, drug reaction, neurological deficits, and pain and tenderness.

Indications, contraindications, warnings and instructions for use can be found in the instructions for use supplied with each device. Observe all instructions prior to use. Failure to do so may result in patient complications.



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