Setting a new standard in safety.

Engineered for efficiency.

PulseSelect[™] Pulsed Field Ablation (PFA) System

Medtronic

PulseSelect[™] Pulsed Field Ablation System



Setting a new standard in safety

Differentiated system safety features

Developed over 15 years of PFA research

Automatic overcurrent detection for safe energy delivery

R-wave gating for synchronisation of energy delivery

Test pulse for proximity detection to phrenic nerve

Unmatched safety

Engineered with differentiated safety features from 15 years of PFA research, and backed by the results of one of the safest IDE AF ablation trials to date.

Consistent efficiency

Rapid, effective PVI through consistent and predictable energy delivery and catheter maneuverability.

Simplified adaptability

Seamless transition to PFA with freedom to adapt to your preferred workflow.

- Indicated for use for paroxysmal (PAF) and persistent (PsAF) patients.

PULSED AF²

Trial design Paired single arm. Prospective, non-randomized, Global IDE clinical study. 9 countries 41 sites 67 operators 300 PFA subjects

primary safety event rate

One of the lowest safety event rates of any atrial fibrillation technology to-date.

- Esophageal events
- **0** PV stenosis

O Phrenic nerve injury



Total of 13 adverse events measured, resulted in 1 cerebrovascular accident and 1 tamponade.

Engineered for efficiency

PulseSelect[™]

PFA Catheter

9 electrodes built to — sense, ablate, and pace

25 mm diameter loop

9 Fr shaft with bidirectional steering

Fixed electrode spacing

to produce predictable, consistent, and contiguous energy delivery



20-degree forward tilt

to ensure consistent uniform tissue contact



Full catheter visualisation on existing mapping systems and imaging tools¹

Intuitive stepwise approach to PVI⁺

All pulmonary veins isolated in less than 30 seconds of total energy delivery¹



Over-the-wire for enhanced stability and self-centering control



Ostial applications Stepwise catheter rotation for overlapping lesions



Antral applications Stepwise catheter rotation for overlapping lesions

Proven efficacy Freedom from AF/AFL/AT



Consistent efficiency

Left atrial dwell time **50 minutes or under** when excluding the 20-minute trial-mandated wait period.

65 (± 29) minutes PAF 70 (± 29) minutes PsAF **1st** PFA IDE trial completed

Only PFA IDE trial to demonstrate efficacy for both PAF and PsAF patients.

FlexCath Contour[™] Steerable Sheath – 10 Fr Steering therapy with confidence

- Braided bidirectional shaft design provides catheter support and resistance to kinking
- Smooth sheath-dilator transition with transseptal crossing indication

Robust adjustment knob and rounded handle

Two tip lengths enable alignment with RIPV in difficult anatomies

FlexCath Cross[™] Transseptal Solution Experience the full potential of a zero exchange workflow

Zero sheath exchanges

The integrated needle and dilator design removes the need for needle, guidewire, transseptal, and therapeutic sheath exchanges.

Versatility for your procedures

Compatible with the industry-leading introducers and with both mechanical and RF crossing.

Cross with control

13 mm

20 mm

The needle only deploys when activated, designed for ease of control during transseptal puncture.

[†]Operators targeted pulmonary vein isolation using a wide antral approach during PULSED AF procedures. ¹Medtronic data on file. November 2023.

² Verma A, Haines DE, Boersma LV, et al. Pulsed Field Ablation for the Treatment of Atrial Fibrillation: PULSED AF Pivotal Trial. Circulation. May 9, 2023;147(19):1422-1432.

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Brief Statement Product CE mark according to law.

See the device manual for information regarding the instructions for use, indications, contraindications, warnings, precautions, and potential adverse events. For further information, contact your local Medtronic representative and/or consult the Medtronic website at www.medtronic.eu.

For applicable products, consult instructions for use on manuals.medtronic. com. Manuals can be viewed using a current version of any major internet browser. For best results, use Adobe Acrobat** Reader with the browser.

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