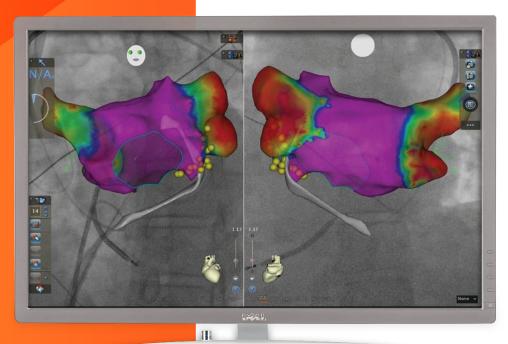
# The CARTO® 3 System



The only 3D mapping system with the integration, scalability and insights to help electrophysiologists optimize treatment decisions.

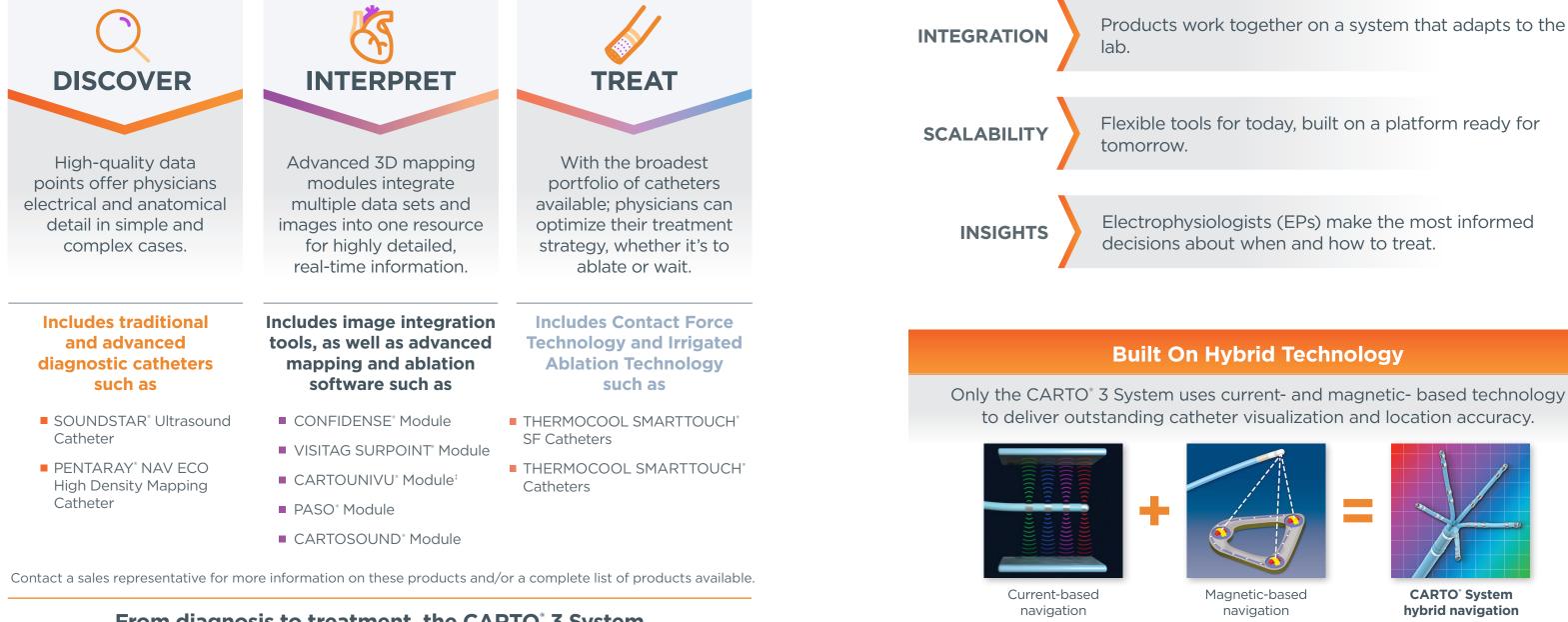


CARTO® 3 System

# **The CARTO<sup>®</sup> Solution**

# Designed with every phase of the procedure in mind

Obtain robust information with an array of versatile diagnostic, mapping and treatment options with CARTO<sup>®</sup> 3 System products.



#### From diagnosis to treatment, the CARTO<sup>®</sup> 3 System and compatible technologies support most types of cases

Always verify catheter tip location using fluoroscopy or IC signals and consult the CARTO" 3 System User Guide regarding recommendations for fluoroscopy use Pellegrino. P.L., Brunetti, N.D., Gravina, D., Sacchetta, D., De Sanctis, V., Panigada, S., Di Biase, L., Di Biase, M., and Mantica, M. (2013). Nonfluoroscopic mapping reduces radiation exposure in ablation of atrial fibrillation. of cardiovascular medicine 14, 528-533, Earley, M.J., Showkathali, R., Alzetani, M., Kistler, P.M., Gupta, D., Abrams, D.J., Horrocks, J.A., Harris, S.J., Sporton, S.C., and Schilling, R.J. (2006). y ablation of arrhythmias guided by non-fluoroscopic catheter location: a prospective randomized trial. Eur Heart J 27, 12231229

DO NOT use PENTARAY® NAV ECO High Density Mapping Catheters in patients with prosthetic valves.

\*The clinical significance of utilizing the PASO\* Module to help pace mapping for catheter ablation of ventricular arrhythmias has not been demonstrated by clinical investigation.

The THERMOCOOL SMARTTOUCH® SF Catheter is indicated for the treatment of drug refractory recurrent symptomatic paroxysmal atrial fibrillation (AF) and for drug refractory recurrent symptomatic persistent AF (continuous AF > 7 days but < 1 year), refractory or intolerant to at least 1 Class I or III AAD, when used with the CARTO® 3 Syster

The CARTO VISITAG<sup>™</sup> Module provides access to data collected during the application of RF energy. The Tag Index values should not be used to replace standard handling precautions or other clinically accepted endpoints for RF applications such as reduction of IC signals, impedance drop, and duration. All safety considerations, cautions, and warnings that apply to the general use of the CARTO\* 3 System also apply while using this module. Users should follow the instructions for use of the compatible ablation catheters (i.e. THERMOCOOL SMARTTOUCH\* Catheter and THERMOCOOL SMARTTOUCH\* SF Catheter) to select ablation settings for an ablation procedure.

2

# Find the paths and patterns that matter most to patients

treat many arrhythmias.

# **The CARTO<sup>®</sup> Solution**



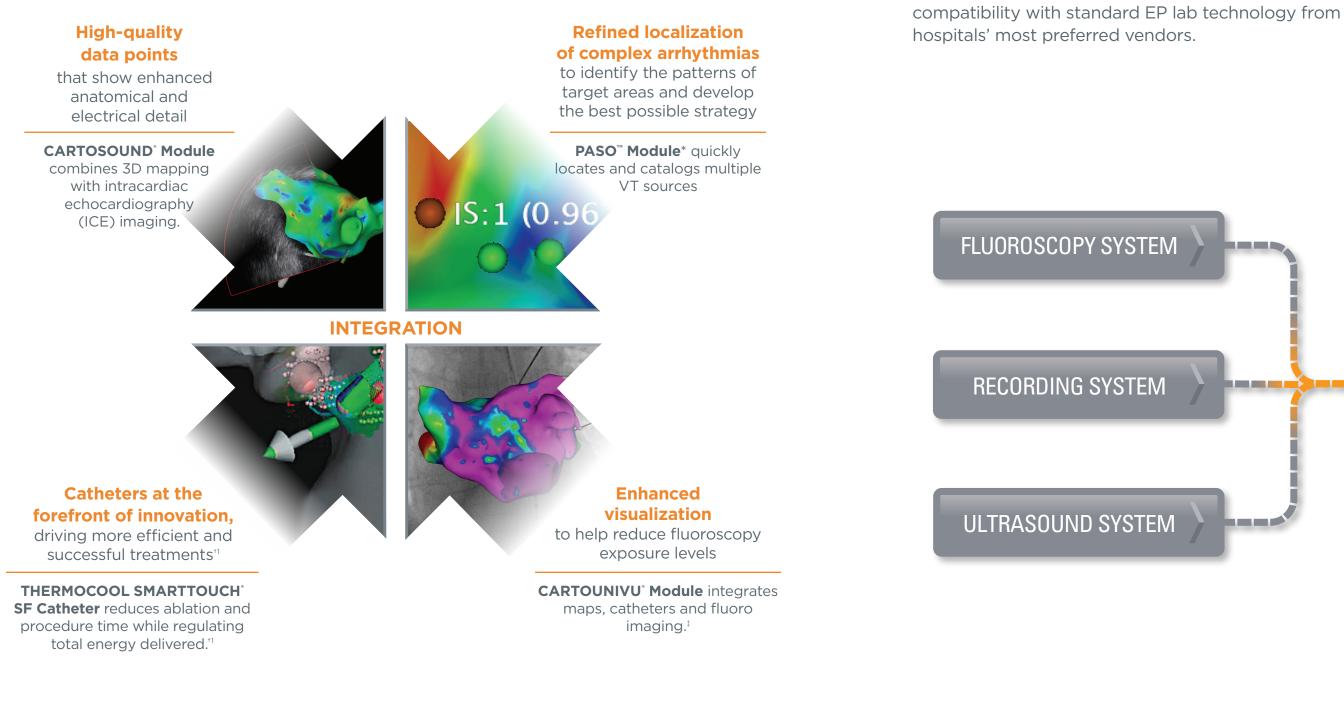
The CARTO<sup>®</sup> 3 System enables EPs to be efficient while empowering them to diagnose and

#### The CARTO<sup>®</sup> 3 System is a 3D mapping system built to take on the complexities of arrhythmias

# **Unparalleled Integration**

# **Combine diagnostic data, mapping, imaging** and treatment into one resource

The CARTO<sup>®</sup> 3 System is designed to streamline information and simplify procedures.



Innovation and integration drive every aspect of CARTO<sup>®</sup> 3 System technology to optimize treatment decisions

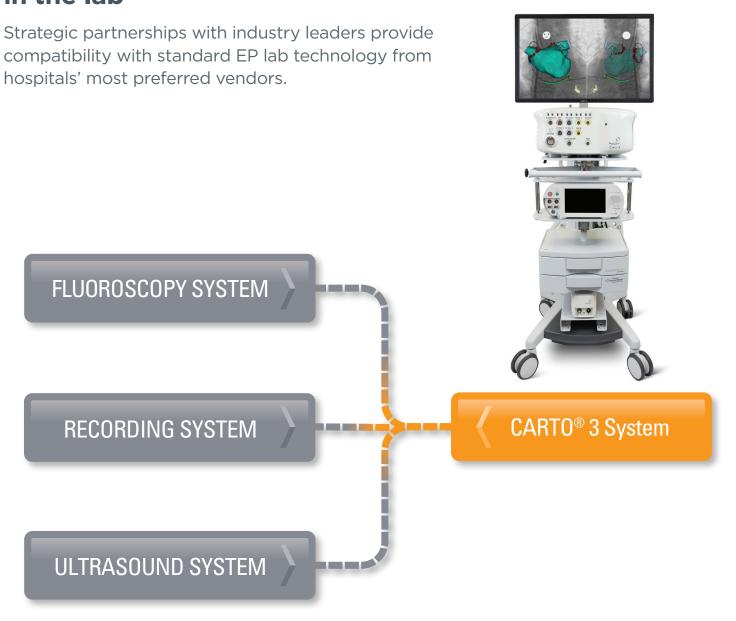
in the lab

The clinical significance of utilizing the PASO" Module to help pace mapping for catheter ablation of ventricular arrhythmias has not been demonstrated by clinical investigations.

# **Unparalleled Integration**



# Seamlessly integrate a complete suite of technologies

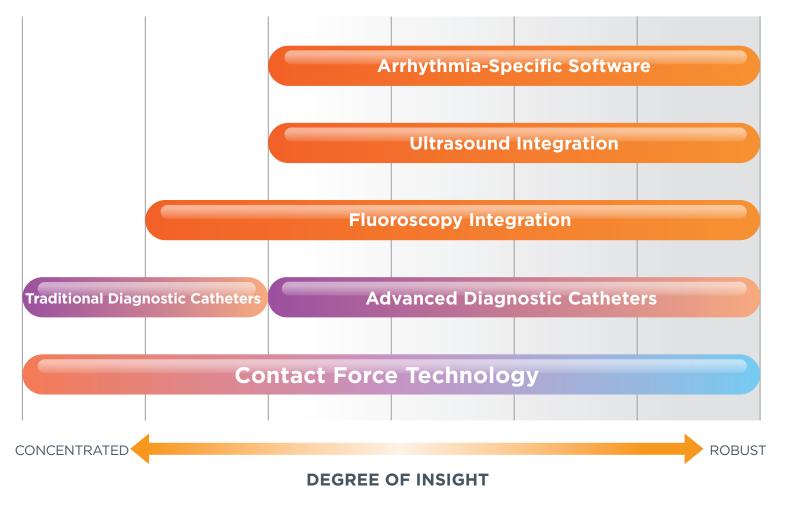


#### The CARTO<sup>®</sup> 3 System has compatibility with most EP equipment

# **Scalability for Procedures**

### Build a unique approach for any case

Flexibility allows physicians to personalize their strategy based on technique preferences and procedure demands.



# Enhance and upgrade without replacing

Stay up to date and acquire the latest technology to meet increasing demands in fast-growing areas, such as AF and VT, without having to reinvest in a new system.



- image integration
- irrigated ablation technology
- 3D integrated contact force therapy

### Setting the standards of today

#### Focused on advancements for tomorrow

The CARTO<sup>®</sup> 3 System lets physicians scale procedures based on technique preferences and case complexity

# **Scalability for Growth**



### A legacy of *first-to-market* innovation

Biosense Webster, Inc. has provided groundbreaking technological advancements to support physicians, such as:

For over 20 years, Biosense Webster, Inc. has been a leader in cardiac electrophysiology, with numerous first-to-market products that have advanced the field and gone on to become today's benchmarks

With over 2000 patents in the electrophysiology space, we continue to partner with customers with the goal of improving lab efficiencies, safety during procedures, and, ultimately, finding a cure for all arrhythmias

#### The CARTO<sup>®</sup> 3 System is an investment in innovation for today and tomorrow

# **Actionable Insights**



# The CARTO<sup>®</sup> 3 System allows physicians to make the most informed treatment decisions



# Get real-time feedback and unique insights about when and how to proceed with treatment.

#### Contact your Biosense Webster, Inc. representative about the CARTO® 3 System today.





**Biosense Webster, Inc.** 31 Technology Drive, Suite 200 Irvine, CA 92618, USA Tel: 909-836-8500 | Tel: 800-729-9010 Fax: 909-468-2905 www.biosensewebster.com

©Biosense Webster, Inc. 2022 All rights reserved. 027669-220124 I. Natale A, Reddy VY, Monir G, Wilber DJ, Lindsay BD et al. Paroxysmal AF catheter ablation with a contact force sensing catheter: results of the prospective, multicenter SMART-AF trial. (2014) J Am Coll Cardiol 64 (7): 647-656. 'Success defined as freedom from any symptomatic atrial arrhythmia (atrial fibrillation, atrial flutter, atrial tachycardia) 12 months postprocedure when operator remained in the preset contact force range. Further sub-analysis showed that when the contact force was within investigator-selected range  $\ge$  85% of time, success rate increased by 21% to 88% ( $\ge$  85%; n = 32; < 85%; n = 73).

<sup>1</sup>Always verify catheter tip location using fluoroscopy or IC signals and consult the CARTO<sup>\*</sup> System User Guide regarding recommendations for fluoroscopy use.

Pellegrino, P.L., Brunetti, N.D., Gravina, D., Sacchetta, D., De Sanctis, V., Panigada, S., Di Biase, L., Di Biase, M., and Mantica, M. (2013). Nonfluoroscopic mapping reduces radiation exposure in ablation of atrial fibrillation. Journal of cardiovascular medicine 14, 528-533. Earley, M.J., Showkathali, R., Alzetani, M., Kistler, P.M., Gupta, D., Abrams, D.J., Horrocks, J.A., Harris, S.J., Sporton, S.C., and Schilling, R.J. (2006). Radiofrequency ablation of arrhythmias guided by non-fluoroscopic catheter location: a prospective randomized trial. Eur Heart J 27, 12231229.

Caution: Federal law restricts this device to sale by or on the order of a physician. Important information: Prior to use, refer to the instruction for use supplied with this device for indications, contraindications, side effects, suggested procedure, warnings and precautions.