

# EvenMore

CHRONIC HEMODIALYSIS CATHETER



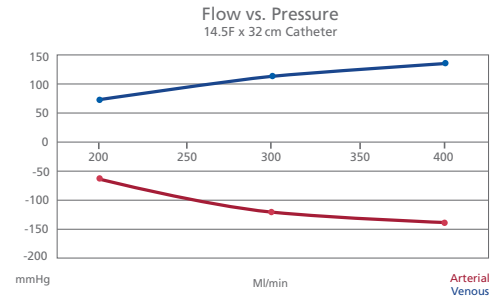
# EvenMore\* Catheter Key Features

- Resistant Durathane\* material
- Suture wing provides secure external anchoring
- Polyester cuff anchors catheter
- Ergonomic fittings
- East to read printed priming volumes



> Less than 5% recirculation, due to strategically placed venous return ports

> Luminal design allows for high flow



## EVENMORE CATHETERS

Description	Catheter Only		Catheter Basic Set	
	Units/Box	UPN	Units/Box	UPN
20 cm Straight Catheter	-	-	1	H787103035115
22 cm Straight Catheter	-	-	1	H787103035125
24 cm Straight Catheter	5	H787103036015	1	H787103035015
28 cm Straight Catheter	5	H787103036025	1	H787103035025
32 cm Straight Catheter	5	H787103036035	1	H787103035035
36 cm Straight Catheter	-	-	1	H787103035045
40 cm Straight Catheter	-	-	1	H787103035055
55 cm Straight Catheter	5	H787103036065	1	H787103035065
20 cm Pre-Curved Catheter	5	H787103036135	1	H787103035135
22 cm Pre-Curved Catheter	5	H787103036145	1	H787103035145
24 cm Pre-Curved Catheter	-	-	1	H787103035075
28 cm Pre-Curved Catheter	-	-	1	H787103035085
32 cm Pre-Curved Catheter	-	-	1	H787103035095
36 cm Pre-Curved Catheter	-	-	1	H787103035105

**BASIC SET INCLUDES:** (1) 14.5F catheter, (1) valved peelable sheath introducer, (2) dilators, (1) tunneling tool, (1) scalpel, (1) J/Flex guidewire, (1) adhesive wound dressing, (1) introducer needle, (2) injection caps

## ACCESSORIES

Description	Catheter Only	
	Units/Box	UPN
EmboSafe* Sheath	5	H787065076025
Marked guidewire 3 mm J fixed core .038" x 70 cm uncoated depth markings every 5 cm	10	H787055009012
Marked guidewire 3 mm J fixed core .035" x 70 cm uncoated depth markings every 5 cm	10	H787055009022
Hemodialysis catheter repair kit	5	H787103018015

PHYSICIAN'S SIGNATURE

### IMPORTANT RISK INFORMATION

**INDICATION FOR USE:** The AngioDynamics EvenMore Hemodialysis Catheter is designed for use in attaining long-term (12 months or less) vascular access for hemodialysis and apheresis. It may be inserted percutaneously and is primarily placed in the internal jugular vein of an adult patient. Alternate insertion sites include subclavian vein as required. The EmboSafe Valved Peelable Introducer is intended for use in the percutaneous insertion of catheters in the venous system. **CAUTION:** Federal (USA) law restricts these devices to sale by or on the order of a physician.

**CONTRAINDICATIONS:** This catheter should not be used for any purpose other than those indicated in the instructions. The EmboSafe introducer is not designed for use in the arterial system or as a hemostatic device.

**WARNINGS AND PRECAUTIONS:** For Single Use Only. Do not reuse, reprocess or resterilize the catheter or any accessories. Contents sterile in unopened, undamaged package. Do not use if opened or any sign of product damage is visible. Use only Luer Lock (threaded) connectors with this catheter. In the rare event that a hub or connector separates from any component during insertion or use, take all necessary steps and precautions to prevent blood loss or air embolism and remove catheter. Immediately after insertion, confirm proper placement of the tip of the catheter with x-ray. Failure to verify catheter placement may result in serious trauma or fatal complications. Please see package insert for complete list of warnings and precautions.

**POTENTIAL COMPLICATIONS:** Procedure-related complications include: air embolus; bacteremia; brachial plexus, mediastinal or pleural injury; cardiac arrhythmia or tamponade; central venous, lumen or vascular thrombosis; endocarditis; exit-site or tunnel infection; exsanguination; hematoma; hemorrhage; hemothorax or pneumothorax; laceration/perforation of the vessel or thoracic duct; punctures (right atrial, subclavian artery, superior vena cava); retroperitoneal bleed and septicemia.

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



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