Document No.: HDW-0404; Revision: B

NAVIGANT™

Integration with EnSite X

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Schiffgraben 41
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EC REP

Patents

Navigant
Manufactured under one or more of the following United States patents:
7,516,416; 7,537,570; 7,540,288; 7,540,866; 7,543,239; 7,627,361; 7,630,752; 7,657,075; 7,708,696; 7,751,867; 7,756,308; 7,761,133; 7,769,428; 7,831,294; 7,853,306; 8,024,024; 8,192,374; 8,369,934; 8,721,655; 9,314,222
Manufactured under the following European patents:
EP 1 682 024 issued in Germany, France, and the United Kingdom; EP 1 769 390, issued in Germany, France, and the United Kingdom

Niobe
Manufactured under one or more of the following United States patents:
6,975,197; 7,019,610; 7,161,453; 7,305,263; 7,313,429; 7,495,537; 7,772,950; 7,966,059
Manufactured under the following European patent:
EP 1 488 431 issued in Germany, France, and the United Kingdom

Genesis RMN
Manufactured under the following United States patent:
7,774,046

Other patents issued and pending.

Stereotaxis Trademarks

1. *Navigant, Niobe,* and *Cardiodrive* are trademarks of Stereotaxis, Inc., registered in the United States, European Community, the United Kingdom, and Japan.
2. *Genesis* and *GenesisX RMN* are trademarks of Stereotaxis, Inc., registered in the United States.
3. *Odyssey* is a trademark of Stereotaxis, Inc., registered in the United States, European Community, and the United Kingdom.

4. *iCONNECT* and *Synchrony* are trademarks of Stereotaxis, Inc.

Other Trademarks

1. LASSO, PENTARAY, THERMOCOOL, CELSIUS RMT, and CELSIUS THERMOCOOL RMT are registered trademarks of Biosense Webster.
2. EnSite X is a registered trademark of Abbott.

All other brand names, product names, and/or trademarks found in this document are the property of their respective owners.

EMC Directive Statement

EMC Directive Compliance	This equipment was tested and found to conform to the Medical Directive 93/42/EEC for electromagnetic compatibility. Compliance with this Directive is based upon compliance with the following harmonized standards:
Emissions:	**Niobe:** IEC 60601-1-2:2007 EN55011, FCC Part 15.109(g), FCC Part 15.107(a) & ICES-003, EN61000-3-2:2006 +A1:2009 +A2:2009, EN61000-3-3:2013 **Genesis:** IEC 60601-1-2 ed 4.0 (2014-02) CISPR11 ed 6.1 (2016-06), Class A (Professional Healthcare Facility Environment)
Immunity:	**Niobe:** EN 60601-1-2:2015, EN61000-4-2:2009, EN61000-4-3:2006 +A1:2008 +A2:2010, EN61000-4-4:2012, EN61000-4-5:2006, EN61000-4-6:2009, EN61000-4-8:2010, EN61000-4-11:2004 **Genesis:** IEC 60601-1-2 ed 4.0 (2014-02), IEC 61000-4-2 ed 4.0 (2008-12), IEC 61000-4-3 ed 3.2 (2010-04), IEC 61000-4-4 ed 3.0 (2012-04), IEC 61000-4-5 ed 3.0 (2014-05) + AMD:2017, IEC 61000-4-6 ed 4.0 (2014 COR2015), IEC 61000-4-8 ed 2.0 (2009-09), IEC 61000-4-11 ed 2.0 (2004-03) + AMD1:2017

When operating this equipment, verify that other devices installed near it conform to the applicable EMC standards for that device. Navigant and the Stereotaxis RMN System are designed to be installed and operated in a Professional Healthcare Facility Environment.

Safety Standard Statement

Safety Standard Compliance	This equipment was tested and found to conform to the following IEC 60601-1 Medical Electrical Equipment General Requirements for basic safety and essential performance test specifications:
Standard:	*Niobe*: ANSI/AAMI ES60601-1:2005+A2 (R2012) +A1 CAN/CSA-C22.2 No. 60601-1:14 *Genesis*: CAN/CSA-C22.2 No. 60601-1:14 ANSI/AAMI ES60601-1:2005+A2 (R2012) +A1 IEC 60601-1: 2005 + CORR. 1:2006 + CORR. 2:2007 + AM1:2012 (or IEC 60601-1: 2012 reprint)

Related documents

HDW-0312 Niobe User Guide
HDW-0358 Genesis RMN User Guide
HDW-0367 iCONNECT User Guide
HDW-0372 Navigant User Guide
HDW-0387 GenesisX User Guide
Respective documentation for compatible devices and /or systems.

Operating conditions

Temperature: 15°C to 30°C
Humidity: 20% to 75%, non-condensing
Atmospheric pressure: 70 kPa to 106 kPa

Storage and transport conditions

Temperature: –10°C to 50°C
Humidity: 20% to 95%
Atmospheric pressure: 70 kPa to 106 kPa

Stereotaxis Companion Systems

System	Part Number
Niobe	Siemens Reference number: 001-006000-1
	Philips Reference number: 001-006100-1
	Model S Reference number: 001-006200-1
Genesis RMN	Siemens Reference number: 001-011000-1
	Model S Reference number: 001-011000-3
GenesisX RMN	001-014000-1
Cardiodrive	001-004115-9
iCONNECT	001-009040-1

WARNING: No modification of this equipment is allowed. No user-serviceable parts are inside *Navigant*. The user should not attempt to dissemble any portion of *Navigant*.

WARNING: To avoid the risk of electric shock, this equipment must only be connected to a supply mains that have a protective earth ground.

Disposal

This product should be recycled and not disposed of as general waste (subject to WEEE annex IV resp. EN 50419).

Waste and Recycling

A contractor is responsible for the disposal and recycling of scrap metals and electronics found in *Navigant*.
Suggested Contractor: Walch Recycling & Eldelmentalle

Notice to the User and/or Patient

Any adverse event or malfunction that occurred in relation to the device should be reported to the manufacturer. Serious adverse events should be reported to the competent authority of the Member State in which the user and/or patient is established.

Cover art

CONTENTS

1. Overview

Introduction

The purpose of this document is to provide Navigant™ users with integration guidance for third-party systems. *Navigant* works in conjunction with a Stereotaxis Robotic Magnetic Navigation (RMN) System to provide enhanced integration of catheterization and electrophysiology (EP) labs and improved automation during robotic magnetic navigation of medical devices.

Navigant communicates with mapping systems such as the Abbot EnSite™ X EP System to allow integrated mapping and navigation. This document includes instructions and troubleshooting for integration with the *EnSite* X System.

The documentation for each companion system is provided by its manufacturer and is not duplicated here.

Indications

The *Navigant* Workstation Software is intended to be used with a Stereotaxis RMN System, *Cardiodrive*, Odyssey Vision™, and/or Synchrony™.

The Stereotaxis RMN System and *Navigant* Workstation Software, when used in combination with *Cardiodrive*, provides the means for the physician to steer, advance, and retract catheters from a control room.

Intended Patient Population

The intended patient population for the MNS is patients undergoing diagnostic and interventional procedures in the following areas: right and left heart, and the coronary, peripheral, and neurovasculature.

Intended Users

Navigant should be used only by qualified medical professionals who have been thoroughly trained in its use.

Contraindications

There are no known contraindications.

Graphics and Symbols

The following graphics and symbols are used in this guidance document:

WARNING		**WARNING** indicates a potentially hazardous situation which, if not avoided, could result in death or serious injury.
CAUTION		**CAUTION** indicates a potentially hazardous situation which, if not avoided, could result in injury to patient or operator or damage to the equipment.
Note		**Note** identifies information that could affect the outcome or results of the procedure.

Warnings and Cautions precede the text and any procedure involving a clear risk to the operator(s), the patient, or the equipment. General warnings are listed in the Warnings and Precautions summary, which can be found in the *Safety* section. Pay close attention to the instructions that accompany the warnings, notes, and symbols.

The following graphical symbols are used in this document and/or on system components:

Symbol	Name	Description
	**AC Power**	Indicates the status of the AC power.
	**Catalog Number**	Catalog/part number.
	**Caution**	Indicates the need for the user to consult the instructions for use for important, cautionary information such as warnings and precautions that cannot be presented on the medical device.
	**CE Marking**	Product conforms to European Medical Directive 93/42/EEC and meets applicable healthy, safety, and environmental requirements. If the mark is accompanied by a number, conformity is valid.
	**Consult Instructions**	See the Operating Instructions for additional information or instruction.

Symbol	Name	Description
	**Date of Manufacture**	The date when the medical device was manufactured.
	**E-stop**	Indicates the E-stop button or the E-stop indicator light.
	**European Representative**	Name and address of the authorized representative in the European Community.
	**Importer**	Name and address of the entity importing the medical device into the locale.
	**Magnet Present**	Indicates a magnet is present in the equipment.
	**Manufacturer**	Name and address of the manufacturer of the product.
	**Medical Device**	Indicates the item is a medical device.
	**Power**	Indicates the power status.
	**Prescription Only**	Caution: Federal law restricts this device to sale by or on the order of a physician.
	**Recycle: Electronic Equipment**	Product that is subject to the European Union's Waste Electrical and Electronic Equipment (WEEE) 2002/96/EC/EU Directive for recycling of electronic equipment.
	**Refer to Instruction Manual/Booklet**	The instruction manual or booklet must be read.

Symbol	Name	Description
SN	**Serial Number**	The manufacturer's serial number so a specific medical device can be identified.
UKRP	**UK Responsible Person**	A person established in the United Kingdom (UK) who acts on the behalf of a non-UK established manufacturer in relation to the manufacturer's obligations under UK regulations.

Glossary

The following terms appear in this document:

Term	Description
3D	Three-Dimensional.
AP	Anterior-Posterior.
C-Arm	An X-ray image intensifier that produces live X-ray images displayed on a monitor and named because of its configuration, with the top part of the C extending over the patient and the bottom extending under.
***Cardiodrive* Catheter Advancement System (CAS)**	The Stereotaxis tool that provides the physician with the ability to advance and retract catheters from a Control Room. Commonly referred to as *Cardiodrive* or CAS.
CARTO™ 3 System	Biosense Webster system that combines 3D mapping and navigation systems with the Stereotaxis RMN System.
Clinical Workflow Manager (CWM)	A component of *Navigant* that executes scripts to guide medical procedures.
EMC	Electromagnetic compatibility.
***EnSite* X Mapping System**	Abbott system that combines 3D mapping and navigation systems with the Stereotaxis RMN System.
EP	Electrophysiology.
Fluoro	Fluoroscopic, or Fluoroscopy.

Term	Description
Fluoroscope	An X-ray image intensifier that produces live X-ray images displayed on a monitor. Also called X-ray or C-Arm.
Robotic Magnetic Navigation (RMN) System	A medical platform that enables physicians to navigate catheters, guidewires and other magnetic interventional devices through the blood vessels and chambers of the heart to treatment sites and then to effect treatment; system consists of computer-controlled magnets that assist physicians in orienting and steering compatible, magnetically-adapted devices and works in conjunction with *Navigant* Workstation.
IC	Interventional, or Intracardiac, Cardiology.
Ideal registration	Instruction to the user for complementary fluoro images that will yield the best registration data.
Isocenter	In X-ray technology, isocenter is the point in space where from any angle (AP, LAO, RAO) the central ray of the radiation beam will pass.
LAO	Left Anterior Oblique.
LiveSync	Abbott's data-sharing technology used to integrate with Navigant.
Navigation volume	Spatial volume defined for RMN System, where the RMN System is capable of generating any magnetic field direction at the target magnetic field strength provided by the RMN System. This volume is aligned in the same location as defined by the x-ray isocenter.
***Odyssey Cinema* System**	The optional recording system for the *Odyssey Vision* System that provides remote viewing of live and recorded procedures.
***Odyssey Vision* System**	A display and user interface package that enables the user to customize consolidation of the point of control for the entire interventional lab.
OpenMapping System	OpenMapping API feature allows communication between *Navigant* and mapping systems that have been tested to be compatible. These compatible mapping systems are referred to as OpenMapping systems.
RAO	Right Anterior Oblique.
RF	Radiofrequency.
RMT	A remote magnetic technology. (RMT is often used to refer to the integrated *EnSite* X / RMN System environment incorporating 3D mapping and navigation and magnetic maneuvering of compatible devices.)
Synchrony	The *Synchrony* system is an optional display and user interface package designed to consolidate the point of control of a medical lab.

Term	Description
Target Navigation	Using field and CAS movements to automatically move the catheter to the user-indicated target.
ViewSync	Synchronizing the direction of cameras in one or more Navigant windows and an EnSite X window.
W·s	Watt-second, the energy equivalent to the power of one watt sustained for one second.

2. Safety

Warnings

WARNING: Federal (USA) law restricts this device to sale by or on the order of a physician.

WARNING: *Navigant* should be used only by qualified medical professionals who have been thoroughly trained in its use.

WARNING: The user should not attempt to upgrade, configure, or run any other software programs on the *Navigant* computers, other than those specifically mentioned in the product documentation.

WARNING: All equipment brought into the Procedure Room (for example, IV poles, patient monitoring equipment, oxygen tanks, etc.) must be safe in a magnetic environment. All equipment that is "MRI compatible" meets these criteria.

WARNING: The operator must not touch the Procedure Room monitor while also touching the patient.

WARNING: Target navigation is most effective in open chamber navigation. Target navigation does not directly account for patient anatomy and is not intended to predict navigation across a valve.

WARNING: When a graphical representation of the catheter tip and shaft display on the *Navigant* screen, the graphical representation is a display of the calculated catheter shape, based on the initial location and orientation of the catheter base and distance of catheter shaft advancement (or retraction) by the *Cardiodrive* System.

WARNING: The graphical representation of the catheter on the *Navigant* display screen represents an approximate location and orientation of the catheter inside the patient's heart after the user acquires a new fluoro image and subsequently transfers it from the X-ray using the "Transfer Fluoro" button.

WARNING: The Target Navigation mode is intended to serve as a tool to assist the physician in guiding the compatible magnetic device to the intended location inside the heart chambers. Because the navigation field is static, results may vary in the beating heart. Stereotaxis neither claims nor quantifies the accuracy of the device tip localization via Target Navigation. Physicians should monitor fluoroscopic visualization and ECG to correlate between the visual representation and final resulting device tip position.

WARNING: The operator should always confirm device location using a live fluoroscopic image.

WARNING: If the device is moved manually instead of using the *Cardiodrive* System, any previously stored position data may become invalid. The physician should remove all previously set markers after moving the device manually.

WARNING: Always verify catheter motion using live fluoroscopy images. Stop immediately if catheter motion can no longer be verified.

WARNING: Ablation system foot pedal should not be connected to the RF generator in the Procedure Room. It is intended for use only in the control room.

WARNING: If unexpected catheter motion occurs during ablation, stop RF energy delivery.

WARNING: If there is a cybersecurity breach during a procedure, press the E-stop button to stop all device activities. Contact the Hospital IT and TeleRobotic Support Team at Stereotaxis to report the suspicious activity prior to resumption of the procedure.

Precautions

CAUTION: The Stereotaxis RMN System uses a magnetic field to orient the tip of the catheter to the desired intracardiac orientation.

CAUTION: The points on the *CARTO* 3 System screen are for reference only. Always confirm orientation of the catheter location with localization methods—fluoroscopy, for example—in addition to the electrograms.

CAUTION: The *CARTO* 3 System points and catheter tip location displayed on the *CARTO* 3 screen can be transferred to the *Navigant* screen. The catheter tip displayed on the *Navigant* screen is used only as a visual reference to aid navigation, not to identify the location of the catheter tip in the heart. Always confirm orientation of the catheter location with localization methods—fluoroscopy, for example—in addition to the electrograms.

CAUTION: If the physician believes the catheter may be in the wrong location, the physician should refresh the fluoroscopy image. If a discrepancy occurs, the physician should reregister the mapping system to *Navigan*t, remark the catheter base, and recalibrate the *Cardiodrive* System.

CAUTION: Automated features are only available after activating the barcode on the QuikCAS™ packaging.

CAUTION: Do not set anything on the keypad or flip the keypad over. This will prevent a key from being held down causing unwanted repetitive motion.

General Notes

- Always verify the fluoroscopy images match the current patient.
- Images that are electronically zoomed and/or panned cannot be transferred to Stereotaxis RMN System.
- Images acquired during C-Arm movement or table movement cannot be transferred to Stereotaxis RMN System.
- Before ablation, verify the field is applied to ensure proper device functionality.
- The following features are only enabled at sites where the RMN is integrated with the fluoroscopy system:
    - Display of fluoroscopic system status in Navigant
    - C-Arm and table position for display and collision detection
    - ViewSync to the C-Arm angle
    - Transfer of fluoro images to Navigant
    - Nav Fluoro A, Nav Fluoro B, or Clockdial Sync C-ARM windows on Navigant desktop, or settings related to those windows
    - All features available with registration (see **Registration** section).
    - Any dialog that displays a Fluoro Window:
        - Catheter Calibration and Mapping System Registration
        - Manual Vessel Registration
        - Point Annotation on Fluoro
        - Surface Registration
        - Vessel Marking
        - Volume Guidance Dialog and all Volume support

3. *EnSite* X Integration

Navigant and *EnSite* X Features

Feature Display	*Navigant*	*EnSite* X
Anatomy	X	X
Diagnostic Maps		X
Catheters Visualization	X	X
Vector Navigation	X	
Catheter Shadows		X
Electrode Numbers		X
Sync. Rotation	X	X
AutoMark		X
Ablation History	X	
Manual Tags	X	X
Tissue Proximity Indicator		X
Marker Tools/Cutouts		X

Procedure Workflow

1. Enter patient info: Name, DOB, Sex, Arrhythmia, Physician.
2. Profile (**Figure 1**)
   a. Optional, but can be used to differentiate layout from *CARTO* 3.
   b. Create one that includes *EnSite* X in layout.
3. Select *EnSite* X for **Use Mapping.**

NOTE: *EnSite* (not to be confused *EnSite* X) is not integrated.

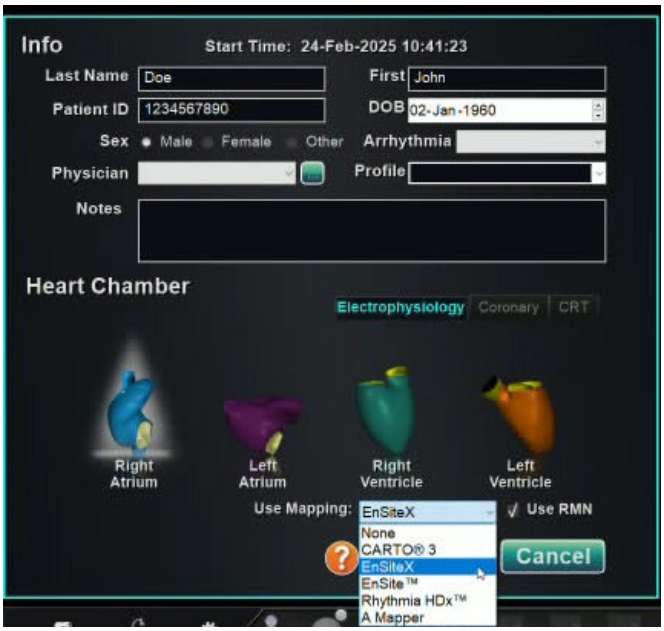

Figure 1. EnSite X Patient Profile

4. Under **Select Device** (**Figure 2**) select the appropriate catheter.

Figure 2. EnSite X Device Selection

5. Scan the CAS Activation Code.

Procedure and Patient Preparation

Stereotaxis Prep	Abbott Prep
Select '*EnSite* X' Mapping and Profile	Catheter connectivity/irrigation validated
Register if desired	Normal patient patching/prep
Prompt discussion to ensure mapping alignment	Add second grounding pad if necessary*
	Ensure LiveSync module communication w/ Navigant
	Start study in *EnSite* X NavX mode
	LiveSync enabled
	ViewSync enabled
	Set metals valued and Field Scale prior to magnets in

NOTE: Two grounding pads on the patient's back gives you lowest baseline impedance which allows higher current delivery.

Wrap the Patient and Introduce Catheter

Supporting patients' arms needs special attention. Arm board supports may prevent the RMN system from reaching the Navigate position. It is advisable to wrap the patient (**Figure 3**) or place arm boards very low to support only hands.

***Figure 3*. Patient Arm Wrapping.**

Why Wrap the Patient?

Use of arm boards may result in the inability to fit the patient between the magnet positions. Wrapping the patient is the desired approach. Wrapping patient maximizes the chance the magnet positioners will come into the Navigate position without issues. Ensure the arms are not wrapped too tightly and periodically check patient status throughout the procedure.

Alternative to Wrapping the Patient

If wrapping the patient is not a desired option because of concerns such as wrapping a patient will block the view or access to the injection line and will not wrap the patient, there are thin and flexible arm rests that are made by Siemens (**Figure 4**) with thin, fatty gel cushioning. The thin cushioning and flexibility make it possible to bring the magnets into 0.1T Navigate position. (This is an alternative if the site chooses not to wrap the patient.)

***Figure 4*. Siemens Flexible Arm Rests.**

Check Communication

LiveSync is *EnSite X*'s data-sharing feature. The communication status (all possible statuses shown in **Figure 5**) of LiveSync is displayed in the bottom-right corner of the model/map display under the Orientation Toolbar (**Figure 6**). Once the *EnSite* X and *Navigant* procedures have started, LiveSync must be enabled (set to yellow/Searching) on *EnSite* X EP System by clicking the LiveSync button in the bottom-right of the EnSite X window to go from Disconnected to Searching before the connection can be made and mapping data can be sent to *Navigant*. Once connected, they can move onto ViewSynch.

Icon	Status
	Connected
	Searching
	Disconnected
	Disabled

Figure 5. Communication Status of LiveSync.

ViewSync

ViewSync syncs the camera in a *Navigant* window and an *EnSite* X window, which can only happen after the LiveSync button is green. After enabling LiveSync on EnSite, the user must

then enable ViewSync on *EnSite X* by clicking the button at the bottom of the orientation icons (**Figure 6**).

Enabling ViewSync does not start ViewSync. To start it, click the **Mapping** button in the bottom-right of a Navigant window (**Figure 7**). Before registration, ViewSync uses an idealized registration to line up the EnSite X and Navigant cameras. After registration, the actual alignment calculated by the registration process is used. This may result in standard directions like AP being different on the two systems, depending on the actual difference between the coordinate systems of EnSite and Navigant, and the accuracy of the registration. If the standard direction is more than 15° different, then registration was probably inaccurate and should be done again.

Figure 6. EnSite X Orientation Toolbar.

Figure 7. Navigant window with MAPPING button.

NOTE: In *EnSite X* dual view, only the left window syncs.

Mapping Best Practices

When mapping, map in NavX mode. Mapping can be done with magnets in or out; RMT ablator or Abbot Grid or another catheter. Abbott must set metal baseline and field scaling prior to magnets in. Field Scaling requires points in the X, Y, and Z axis.

NOTE: If you experience a flat map, you either need to collect points in a different axis or ensure the electrode spacing is set as 1-4-1 for *EnSite* X setup with CELSIUS THERMOCOOL® (*not* 2-5-2).

Ablation Best Practices

For ablation, manually set AutoMark impedance drop target. Enable ViewSync on *EnSite* X, then start ViewSync on *Navigant* (STXS) to map for easier navigation. With every AutoMark created, place a Manual Lesion Marker in addition (AutoMarks are not transferred over to the *Navigant* System, only Manual Lesion Markers).

NOTE: Ablation History is not displayed on *EnSite X*.

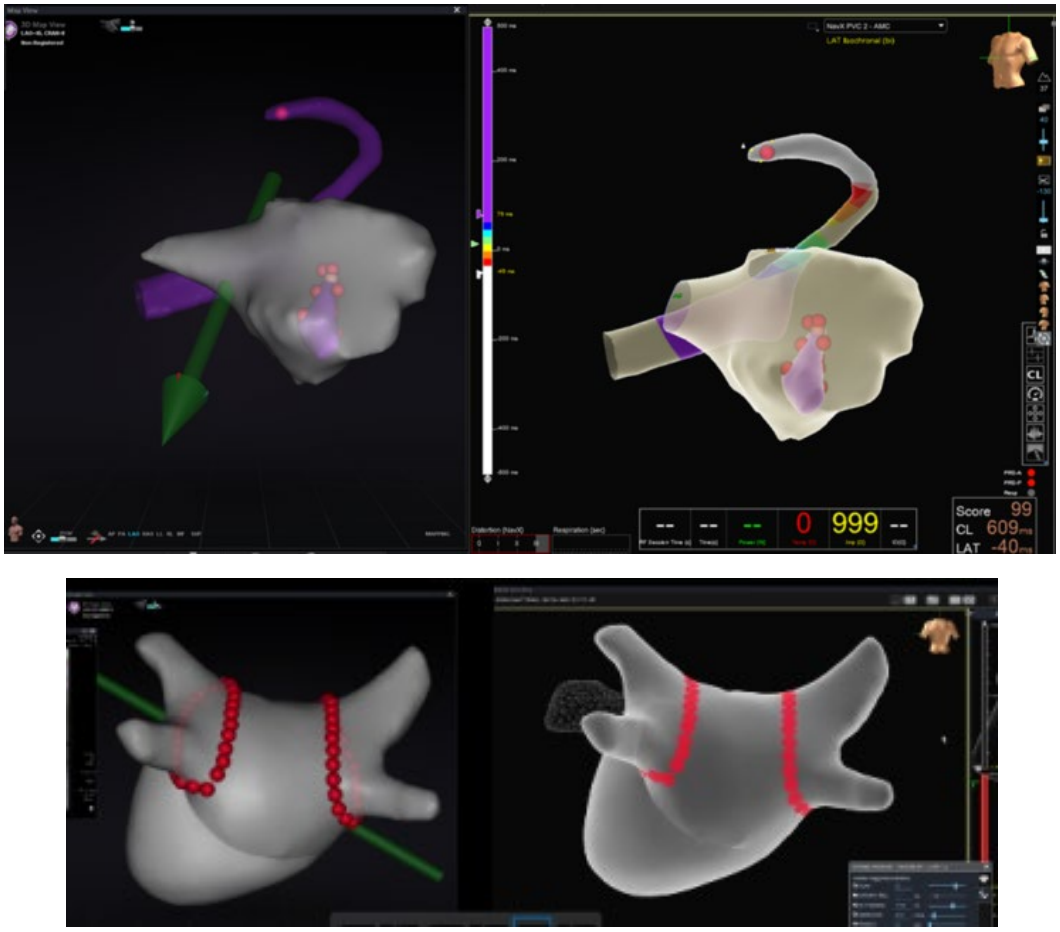

***Figure 8. 2D Lesions on* EnSite *X Show as 3D in* Navigant.**

Fill

Fill is also known as shrink wrap, density of map, or resolution. You're going to need to have the correct Fill selected from Model to have an ideal clarity in the model from mapping (**Figure 9**).

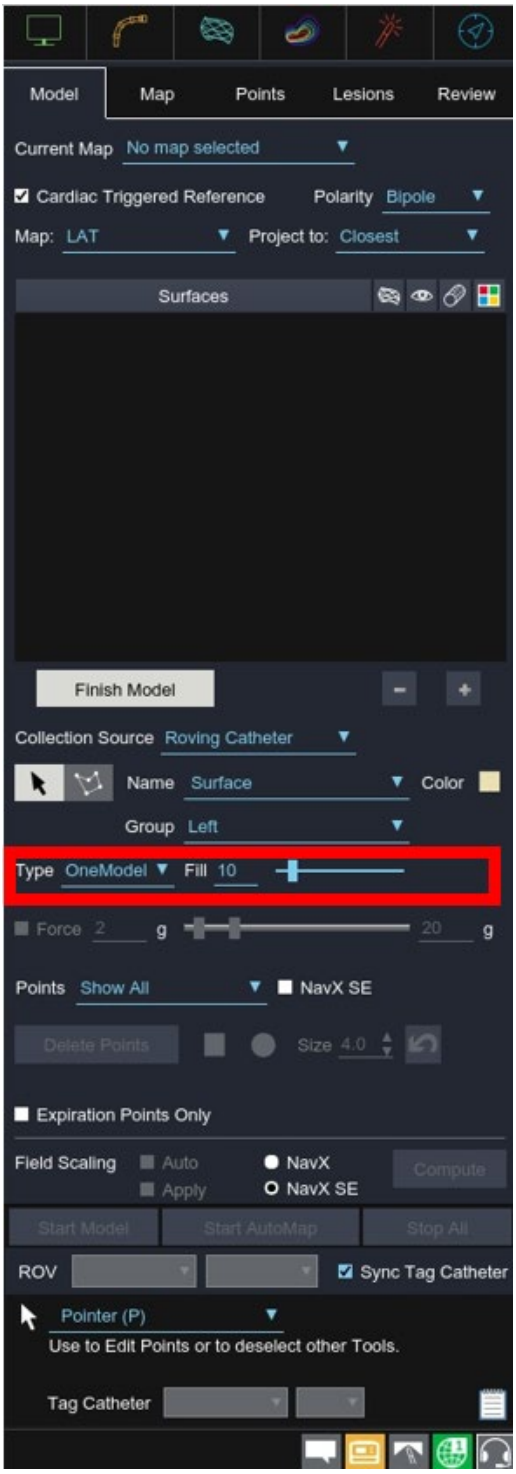

Figure 9. Fill Setting

When selecting your Fill, you have a variety of options to choose from (**Figure 10**). Low Fill is similar to CARTO 1. Fill 10 is similar to CARTO 12-20 High Resolution. Fill 50 is similar to CARTO 6 Lower Resolution. Typically, the best choice for Fill is between 30-60 Fill.

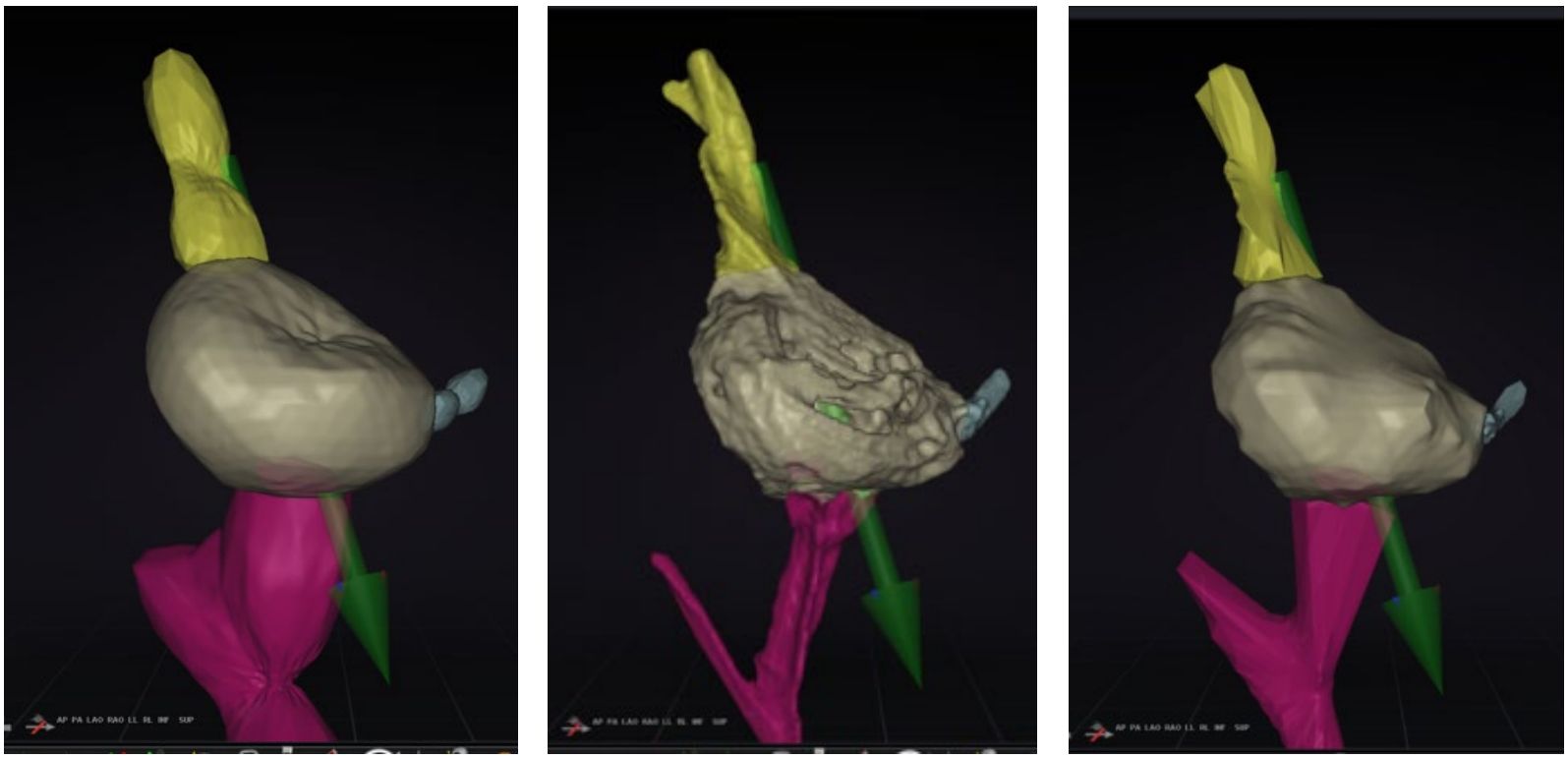

Figure 10. Examples of Figures Set to Low Fill, Fill 10, and Fill 50.

Catheter Responsiveness

NOTE: No action is required, this is just for your information.

Catheter responsiveness when moving through the heart has two main settings. Stable (on the far-left) is when the catheter does not move in the heart (too slow) and Fast (on the far-right) is when the catheter moves in real-time, rapidly (too fast). On the Catheter Responsiveness Sliding Scale (**Figure 11**), the sliding scale should be set nominally in the middle and left as nominal, or it can be slid down a little towards 'Stable,' if necessary.

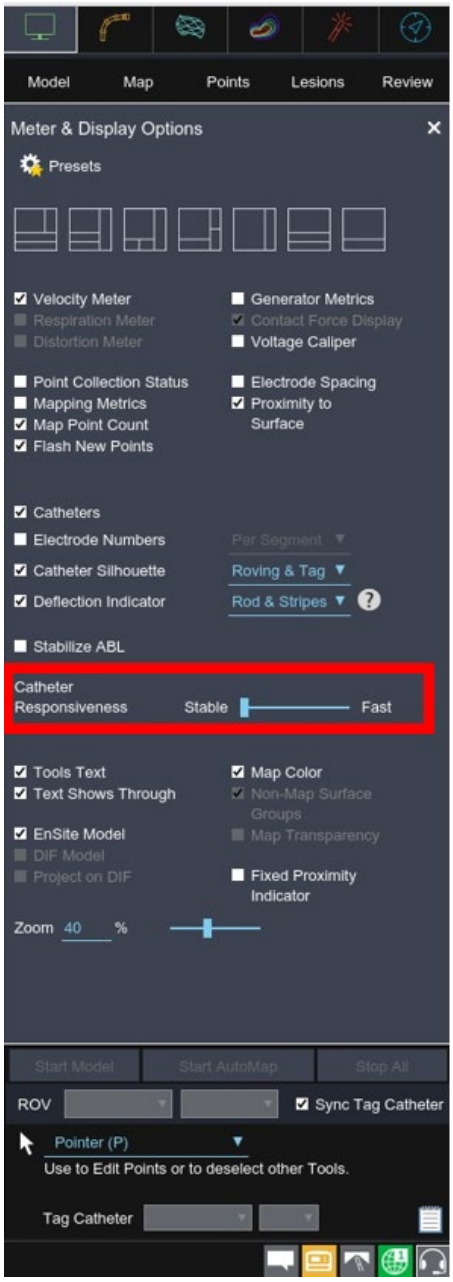

Figure 11. Catheter Responsiveness Sliding Scale.

Registration

When performed properly, registration will allow *Navigant* to accurately localize the catheters relative to the RMN and enable all available integration features between the two systems. *EnSite* X is registered via a matched pair of fluoro images.

Gather and Transfer Images

Place the catheter straight and mid-chamber. Use window guidance and obtain images with 40 degrees of separation; do not move the catheter until registration is complete with both images taken.

Use transfer image button on each screen to import an image (**Figure 12**).

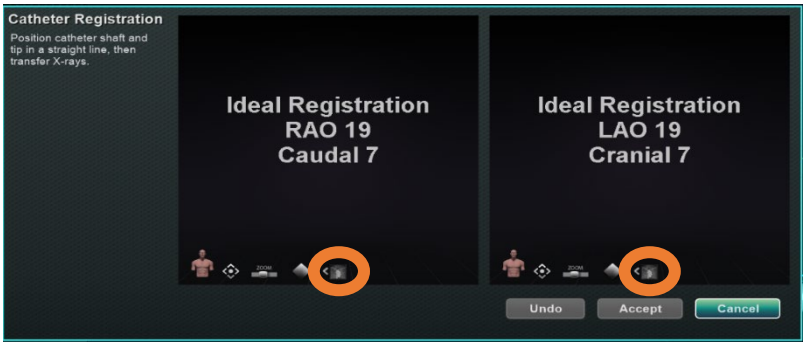

***Figure 12*. Image Transferring.**

If no fluoros have been transferred to *Navigant*, then window guidance recommends the fluoro angles that will give the most accurate registration given the current direction of the catheter. If the window guidance is for cranial/caudal angles and the user prefers RAO/LAO, then point the catheter in a mostly cranial/caudal direction before taking fluoros.

Drawing Catheter Tip

Place the cursor on the digital catheter tip in either fluoro image, then drag back along the catheter tip; you only need to draw the stiff distal portion of the catheter (see RAO image in **Figure 13**). Move to the other view and repeat:

- A green circle will appear when the cursor is properly located at the tip.
- Another green circle will appear once you have reached the end point drawn on the first fluoro.

***Figure 13*. Catheter Tip Drawing.**

Drawing Sheath Tip

Place the cursor at the tip of the sheath in either image and click and drag until you have covered as much sheath as you would like to see (**Figure 14**). Repeat this step in the other image, look for green circles at start and finish of drag to gain optimal accuracy.

***Figure 14*. Sheath Tip Drawing.**

Crossing Plane and Retraction Limit

Once the catheter and sheath are drawn, the yellow transseptal plane will appear (LA workflow only). Move the crossing plane to the septum, which turns blue once moved. Adjust the table as needed indicated by the red circle (when out of range) and the blue (when within range) on the left side of the window (**Figure 15**).

***Figure 15*. Positioning the Crossing Plane to Set the Retraction Limit.**

Adjusting Table Height

Move the C-Arm to Lateral position. Because the magnet positioners are not yet in the Navigate position, moving the C-Arm to Lateral positions is still possible. All chambers of interest and the catheter should be seen.

If not, move only the table height until all target anatomy is seen. (Refer to **Figure 16**.) The dot (indicating catheter location) will be red, and an arrow will point in the direction that the table should be adjusted, and once the table is at the correct height, the dot will display blue. This can be done with whatever table controller is in use: Siemens (**Figure 17**), Philips (**Figure 18**), or Stereotaxis Imaging Model S (**Figure 19**).

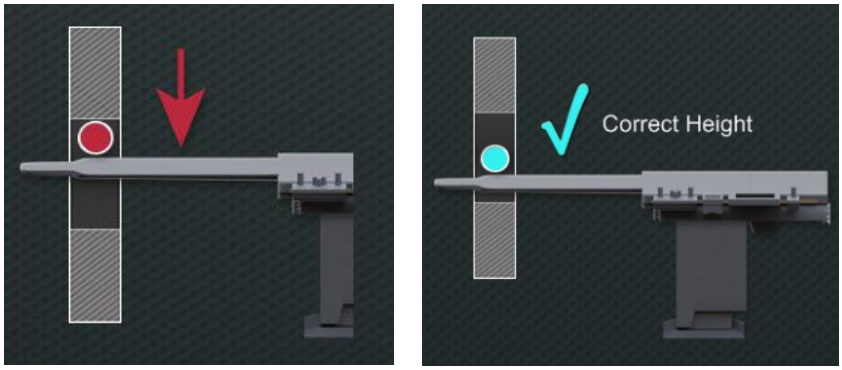

***Figure 16*. Left: Table Height Adjustment Needed; Right: Correct Table Height.**

***Figure 17*. Siemens Controller.**

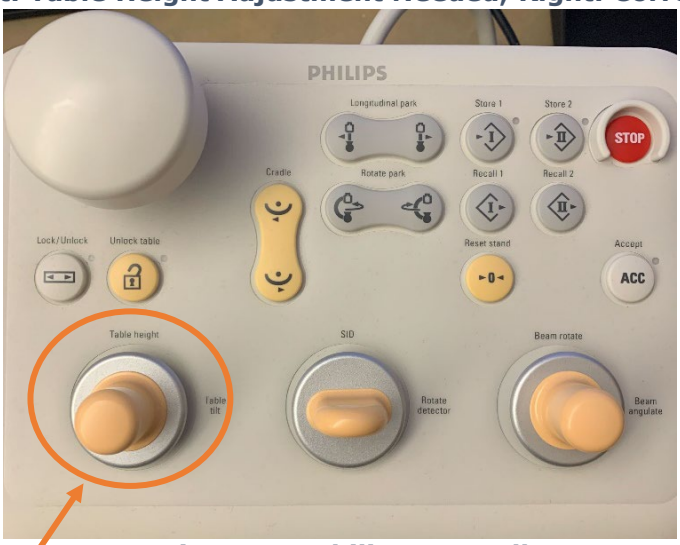

***Figure 18*. Philips Controller.**

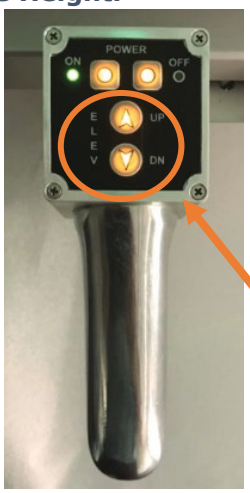

***Figure 19*. Stereotaxis Imaging Model-S Controller.**