

CTI CATH DIAGNOSTIC CATHETER

Multi-Electrode Steerable Catheter for Simultaneous HRA & CS Recording





Unique 6F Option Ideal for smaller anatomies



Stable in Beating Heart

Opens straight and curls to facilitate placement for outstanding stability against the myocardium



60mm Gap Option (901674 & 901684)

Provides higher concentration of electrodes in the cavotricuspid isthmus and the septal wall of the HRA

The Map-iT CTI Cath, also known as the CTI Catheter, is available in a unique 6F option that can deflect down making a smaller loop than other available catheters, ideal for use in small anatomy. A 60mm gap electrode spacing option is offered to facilitate higher density signals in the CTI and HRA. All Map-iT catheters are designed with a braid-reinforced shaft for high pushability, easy placement, and consistent handling, even during long procedures.

Specifications

French Size	6F or 7F
Length	100cm
Electrodes	20
Electrode Spacing (mm)	2-10-2, 2-5-2, 5, 2-8-2, 2-8-2-(60)-2-8-2
Curve Type	MPD-H, MPD-L







CTI Cath

60mm

CTI Cath - 60mm Gap

Curve

MPD-H

6F Duo-Decapolar Steerable Diagnostic Catheter

French	6F
Electrodes	20
Ring Electrode	1mm
Tip Electrode	2mm
Usable Length	100cm

Electrodes	20	901671	2-5-2	MPD-H	
Ring Electrode	1mm	901672	5	MPD-H	
Tip Electrode	ip Electrode 2mm	901673	2-8-2	MPD-H	
<u> </u>		901674	2-8-2-(60)-2-8-2	MPD-H	
Usable Length		901675	2-8-2	MPD-L*	
Connection Cable Reference No. 901957 - 2 Cables Required					

Reference No.

901670

Made in the USA

7F Duo-Decapolar Steerable Diagnostic Catheter

French	7F
Electrodes	20
Ring Electrode	1mm
Tip Electrode	2mm
Usable Length	100cm

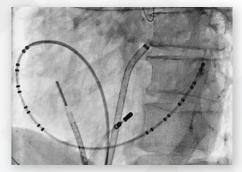
Connection Cable Reference No. 901957 - 2 Cables Required

Reference No.	Electrode Spacing (mm)	Curve
901680	2-10-2	MPD-H
901681	2-5-2	MPD-H
901682	5	MPD-H
901683	2-8-2	MPD-H
901684	2-8-2-(60)-2-8-2	MPD-H
901685	2-8-2	MPD-L*

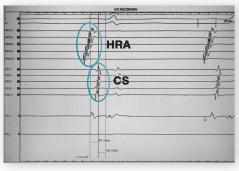
Electrode Spacing (mm)

2-10-2

Made in the USA



CTI Cath - 60mm Gap



CTI Cath - 60mm Gap

To Order

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^{*}Off-set curve for placing the loop on the tricuspid annulus when mapping accessory pathways for WPW syndrome and in the CTI for atrial flutter

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