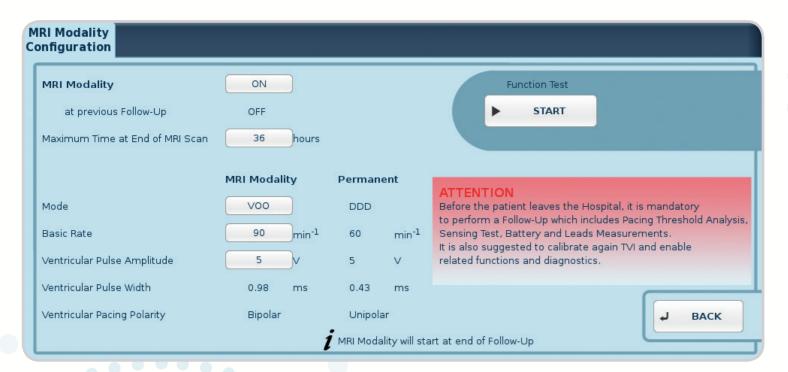
### ENGINEERED FOR MRI: OUR CARE OF YOUR PATIENT NEEDS

- Designed for safe and effective scanning during an MRI procedure at 1.5 T
- Test of the MRI configuration before final programming
- Automatic deactivation of the MRI operating mode by a programmable timer
- Head and extremities scan (thorax excluded)



#### A COMPLETE MR-CONDITIONAL SYSTEM



for conditional MR application if connected with

400J MRI and 400 MRI, atrial and ventricular bipolar leads.

[Compatible with any IS-1 lead for non-MR use]

MEDICO S.p.A. reserves the rights to modify certain technical characteristics of the product illustrated here without prior notice whilst at the same time the main characteristics will remain unchanged.





# EOS D/DR



Advanced tachycardia iECG recording by iECG





Mobile remote control with ERMES



THE NEW MR CONDITIONAL

DUAL CHAMBER PACING SYSTEM by MEDICO

with **400J MRI** and **400 MRI** atrial and ventricular leads

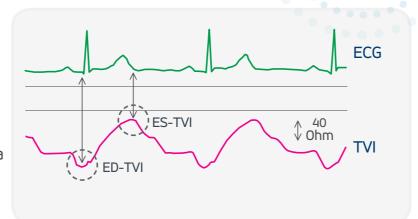


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### FLUCTUATION IN TRANSVALVULAR IMPEDANCE (TVI) DETECTED AT EVERY BEAT



- Reflects structural and volumetric changes during a cardiac cycle
- Is correlated with cardiac haemodynamics
- Confirms the ejection at every beat and assesses the stability of ventricular mechanics in tachycardia
- Is suitable for long-term monitoring of cardiac performance



## EJECTION CHECK AFTER VENTRICULAR PACING

#### **PROTECTION**

NO expected TVI increase after a pacing pulse: Loss of ventricular capture



- pulse energy immediately increased to the maximum value
- pacing **energy scan** started

TVI-based surveillance monitors every paced cycle, increasing the pulse energy if ventricular stimulation fails.

### EJECTION CHECK AFTER VENTRICULAR SENSING

#### **SAFETY**

NO expected TVI increase after a series of 3 ventricular sensing events: Sensing is deemed unreliable



- **Security pacing:** V-triggered and inhibited pacing are alternated at every beat

TVI-based surveillance monitors every sensed cycle, providing safety pacing if ventricular sensing is not reliable.

### VENTRICULAR PACING REDUCTION

#### **AV PROMOTION**



Intrinsic AV conduction

A-V block or slow conduction or insufficient
TVI excursion





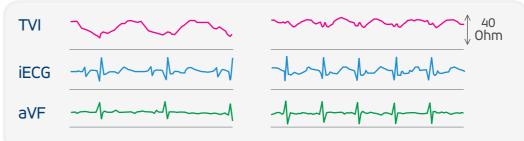
TVI-based surveillance monitors every sensed cycle, ensuring that the appropriate stroke volume is achieved.

### AN EXCLUSIVE ADVANCED APPROACH TO DETECT THE ELECTRIC ACTIVITY OF THE HEART WITH PACING ELECTRODES

The signal provides information comparable to the surface ECG



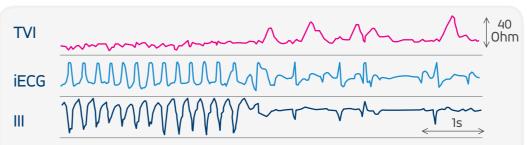
- Displayed during pacing threshold analysis for capture check.
- Acquired automatically during high-rate episodes to discriminate supraventricular and ventricular arrhythmias.



Sinus rhythm (left hand) and AVRT (right).

The morphology of the iECG ventricular complex is unchanged in SVTs.

TVI fluctuation shows reduced amplitude, but is regularly present at every beat.



Non-tolerated, spontaneously terminated VT.

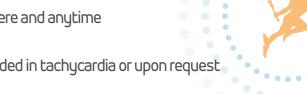
TVI fluctuation is abolished in the absence of ejection and detected again as soon as sinus rhythm is reestablished.

The morphology of the iECG ventricular complex is radically changed in VTs.

#### REMOTE CONTROL WITH ERMES COMMUNICATION TOOL

**ERMES** remote controller keeps patient and physician in touch by:

- Performing fast or complete follow-up checks anywhere and anytime
- Detecting possible technical or clinical alerts
- Creating a report, including iECG and TVI tracings recorded in tachycardia or upon request
- Forwarding the report to the specified address











PACEMAKE







