Let’s Start with the Basics

The CARTO® 3 System Version 7 experience begins with electrophysiology foundations - improved unipolar signal quality and Advanced Reference Annotation (ARA), intuitive rhythm change detection, LAT histogram and much more ...

Enhanced User Experience and Depth of Information

Better and faster* geometry with enhanced Fast Anatomical Mapping (FAM) more points, more maps.

A Complete Line of Arrhythmia Mapping Solutions

Fully integrated EP mapping system further increasing your CARTO® 3 System versatility.

Advanced Mapping Re-framed

CARTO® 3 System Version 7 and the CARTO PRIME™ Mapping Module offers advancement in 3D mapping technology. From signals to diagnosis, across a wide range of procedures, we are re-framing the future of electrophysiology. Discover the Art of Mapping.

* Based on clinical evaluation where physicians, in 547 procedures, expressed high satisfaction with the FAM improvements compared with previous CARTO® 3 versions.
Advanced and Complete
The Essential Mapping Capabilities

**Powerful Atrial Arrhythmia Solutions**

**Coherent Mapping**
May simplify the diagnosis of scar-related complex atrial arrhythmia by applying physiological constraints on LAT information.¹

**CARTOFINDER™ MODULE**
Expands the CARTO® 3 System mapping capabilities to irregular atrial arrhythmia, identifying repetitive focal and rotational activations patterns.³

**The VT Essentials**

**LAT Hybrid**
Increased Premature Ventricular Contraction (PVC) mapping location accuracy by adapting PVC activation to its corresponding Normal Sinus Rhythm location.²

**Parallel Mapping & Map Replay**
Enhances mapping efficiencies by enabling prospective creation of multiple VT maps simultaneously (Parallel Mapping) or retrospectively (Map Replay) from the same diagnostic catheter locations.
Coherent Mapping may simplify the diagnosis of scar-related complex atrial arrhythmia by applying physiological constraints on LAT information.¹

- May simplify Identification of Conduction Mechanism¹
- Identify Patterns of Propagation with Conduction Velocity Vectors¹
- Increased* Reproducibility¹

* 95% agreement between blinded reviewers on the tachycardia mechanism vs. 80% with standard LAT mapping, (n=60).

Successfully Identified the mechanism of Scar-related Atrial Tachycardias

98.3% of the Cases

In prospective multi-center study (n=20), Coherent Mapping cases.¹

Coherent Mapping
Complex Atrial Tachycardia

Conduction Identification
Identifies the most probable conduction mechanism throughout the entire chamber.

Conduction Velocity Vectors
Assist in identifying slower conduction compared to rest of the chamber.

Conduction Barrier Zones
SNO (slow or no) conduction zones. Clearly displays areas which are physiological barriers.
Expands the CARTO® 3 System mapping capabilities to irregular atrial arrhythmia, identifying repetitive focal and rotational activation patterns.³

- Fully Integrated Solution
- Fully Automated Regions of Interest Detection
- Standard Reproducible Mapping Workflow

AF Cycle Length
Cycle Length Information associated with each location.

Repetitive Rotational Activation Pattern
Region of interest indicating rotational activation location.

Repetitive Focal Activation Pattern
Region of interest indicating focal activation location.
LAT Hybrid provides increased location accuracy compared with standard PVC mapping by associating the PVC map LAT information to its corresponding Normal Sinus Rhythm location.²

- Increased Accuracy
- Fully Integrated PVC Adjustment Algorithm
- Reproducibility by Seamless Automated Workflow
Parallel Mapping

Multiple Ventricular Tachycardia

Parallel Mapping allows for simultaneous mapping of different arrhythmia using the same catheter locations.

Map Replay

Multiple Ventricular Tachycardia

Map Replay enables the creation of multiple maps retrospectively for the purpose of mapping different arrhythmia using the same catheter locations.

- Capture 2nd Arrhythmia Prospectively and Retrospectively
- Data is Always Accessible, never miss a beat
- Versatility Without Compromise
Advanced Reference Annotation (ARA) is a novel multi-channel algorithm that provides consistent accurate and robust reference annotations for the detection of atrial and ventricular arrhythmias.*

**Improved User Experience**

- FAM Improvements
- Increased Number of Points and Maps
- Accelerated Processing
- Better Signal Quality
- Automated LAT Consistency
- Access to Media Files During the Study
- And Much More ...

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* 98% average stability rate consists of 94 test vectors with more than 69,000 annotations, annotated by 8 experienced physicians. 96% average detection rate consists of 94 test vectors with more than 69,000 annotations, annotated by 8 experienced physicians.
CARTO PRIME™ Module Advanced Mapping Re-framed

<table>
<thead>
<tr>
<th>Ordering Number</th>
<th>Description</th>
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<tbody>
<tr>
<td>KT-5400-222</td>
<td>CARTO PRIME™ Module* kit including CARTO PRIME™ Workstation</td>
</tr>
<tr>
<td>KT-5400-221</td>
<td>CARTO® 3 System Version 7 base** kit</td>
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<tr>
<td>C3CONFND</td>
<td>CARTO® 3 System CONFIDENSE® Mapping Module</td>
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<tr>
<td>C3REPLAY</td>
<td>CARTO® 3 System CARTOREPLAY® Mapping Module</td>
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<td>C3CNFDRPLY</td>
<td>CARTO® 3 System CONFIDENSE® and CARTOREPLAY® Bundle</td>
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* CARTO PRIME™ Module kit requires CONFIDENSE® Module and CARTOREPLAY® Module as prerequisite
** CARTO® 3 System Version 7 base requires CONFIDENSE® Module as prerequisite
Important information: Prior to use, refer to the Instructions for Use supplied with this device for indications, contraindications, side effects, warnings and precautions.

Caution: US law restricts this device to sale by or on the order of a physician.

In The US THERMOCOOL® Navigation Catheters are indicated for the treatment of drug refractory recurrent symptomatic paroxysmal atrial tachycardias, when used with CARTO® 3 Systems (excluding NAVISTAR® RMT THERMOCOOL® Catheter).

In The US THERMOCOOL® Navigation Catheters are indicated for the treatment of recurrent drug/device refractory sustained monomorphic ventricular tachycardia (VT) due to prior myocardial infarction (MI) in adults.