EPIDURAL INTRODUCER NEEDLES

RX-2™

The patented RX-2™ blunt obturating stylet extends from the tip to push tissue structures away from the cutting edge during needle rotation. Simply place the luer lock obturating stylet into the RX™ Coudé® Needle after epidural placement is confirmed. The RX-2™ is available in 14g, 15g, 16g and 18g at multiple lengths.

RX Coudé®

The patented RX Coudé® Epidural Needle can help needle tip placement and positioning of epidural catheters. The RX Coudé® can be positioned so that the front bevel forms a flat surface parallel to the ligamentum flavum and the dura, limiting the chance of dural puncture. Once epidural placement is confirmed, the needle can be rotated towards your target site. The RX rear heel is rounded to resist catheter shearing during placement. The RX is available in 14g, 15g, 16g and 18g at multiple lengths.

RX Straight

The patented RX Epidural Needle is designed to help needle tip placement and positioning of epidural catheters. The bevel opening at the distal tip is shorter than a standard Tuohy Needle. The RX rear heel is rounded to resist catheter shearing during placement. These needles are radiopaque with visible depth markings and arrows printed on the hub to indicate direction of the bevel.

R.K.™

Developed by Epimed, the R.K.™ Epidural Needle is a modified Tuohy Epidural Needle with an opened and dulled rear heel to allow safer catheter passage. A large triangle is printed on the hub in the direction of the bevel to assist in correct placement.

FIC

The Flexible Introducer Cannula (FIC) is a 3.5" radiopaque low friction (fluoropolymer) sheath over a 17g Tuohy needle. The Introducer cannula is shear resistant providing fault free catheter access and manipulation into the epidural space.

For complete catalog, pricing and information on our custom products and kits, please contact Epimed Customer Service or your local Epimed Pain Representative.

EPIMED

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Site-Specific Catheter Products

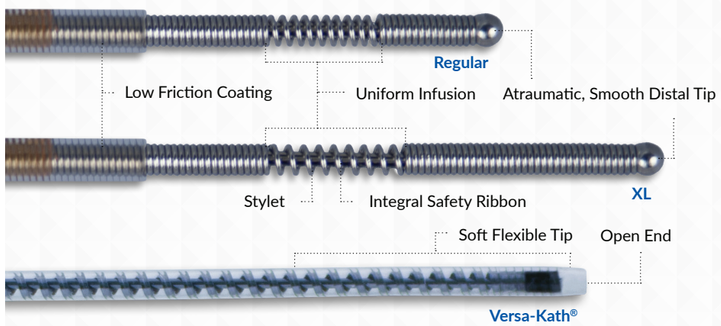
Racz® Catheters, Single Pack Epidural Catheters, Stingray® Connectors, RX Coudé® and Epidural Needles

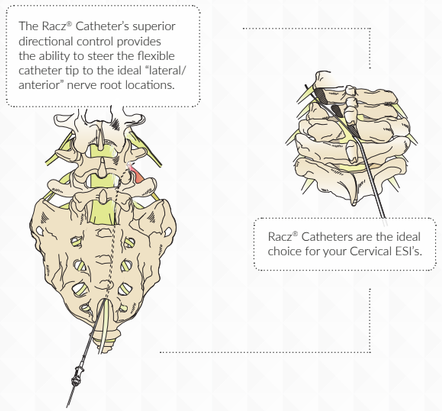
Minimizing Risk. Every Procedure. **Every Time.**

EPIMED

Epimed Racz® Catheters

Our spring guide epidural catheters are constructed of a surgical grade stainless steel continuous spring. The uncoated distal tip is flexible, smooth and rounded with coils slightly spread for maximum flexibility and lateral distribution of injectant. All Epimed catheters have enhanced tensile/break strength and restrict longitudinal catheter stretch, while the spring coils make the catheter resistant to kinking and collapsing. The new features include enhanced calibrated depth markings and Racz® Bend Marks for optimal directablity for cervical and lumbar regions.





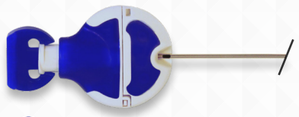
PRODUCT FEATURES

- Surgical grade stainless steel
- Enhanced spring guide catheter tensile and break strength
- Flexible atraumatic tip design
- Kink and collapse resistant
- Radiopaque for distinct images and placement accuracy
- Non-reactive with phenol, alcohol or glycerol
- Improved visibility of depth marks for epidural procedures
- Luminous contrast makes reference more visible
- Patented Racz® Bend Marks
- E-Cap stylet easily reinserts through Stingray® Connector
- E-Cap stylet locks securely to Stingray® Connector and fully engages catheter length

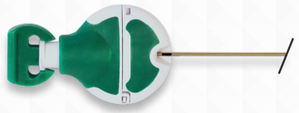
STINGRAY® CONNECTOR

The award winning patented Stingray® Connector is a revolutionary catheter connector designed and manufactured by Epimed.

- Low Profile
- Easy Catheter Insertion
- Simple to Engage
- Audible Locking Click
- Internal Catheter Stop



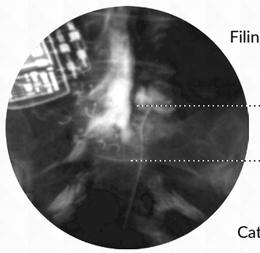
19G Stingray® w/ E-Cap Styet
Catalog# 1911-319



21G Stingray® w/ E-Cap Styet
Catalog# 1911-321

EPIDUROGRAM

During the Lysis of Adhesions procedure, an epidurogram is performed at the desired level to outline the epidural filling defects. This demonstrates fluid dissection of scar formation while outlining decompression of affected nerve roots. The epidurogram will also aid in correct catheter tip placement.



Reference: Racz GB, Heavner JE, Raj PP. Percutaneous Epidural Neuroplasty: Prospective One-Year Follow-up. Pain Digest 1999;9:97-102.

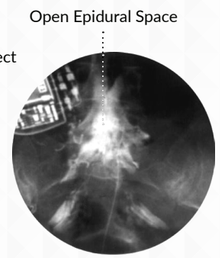


Image of an epidurogram to check for epidural runoff indicating an open neuroforamen.

Site-Specific Racz® Catheters

BREVI-KATH®

19G Catalog# 155-2393
Length - 14" (35.5cm)

Heavy duty catheter body and soft tip in a convenient 14" length. Designed for greater durability and ease in placement. Precise directional control (1:1 torque). Epidural or transforaminal infusion.

BREVI-STF®

19G Catalog# 155-2343:
Length - 14" (35.5cm)

Derived from the BREVI-XL™ with the largest available stylet for added stiffness. This catheter maintains a round, deflective, atraumatic tip. Precise directional control (1:1 torque). Epidural placement for hard to reach situations.

BREVI-XL™

19G Catalog# 155-2340
Length - 14" (35.5cm)

The XL style catheter tip provides maximum control and stability. Selectable XL tip orientation (i.e. firm or soft) allows similar tip softness as the standard BREVI-KATH® when the stylet is retracted. Specifically designed for situations where there is extensive epidural scarring, adhesions, implants or hardware.

BREVI-XL™/2

19G Catalog# 155-2342
Length - 14" (35.5cm)

Similar to the Brevi-XL™ but packaged with an additional stylet to offer more options for success during the procedure. The additional stylet that is matched to each specific catheter length is alternately exchanged to provide curve or straight catheter directability. Designed for greater durability and ease in placement. Precise directional control (1:1 torque).

BREVI-XL™ PRO

19G Catalog# 155-2350
Length - 14" (35.5cm)

The BREVI-XL™ Pro combines the best of our BREVI-XL™ and BREVI-STF™. This double-stylete catheter features the largest gauged stylet of the Racz spring catheters along with the versatility of the BREVI-XL™'s selective distal end stiffness (i.e. firm or soft). As with other Brevi catheters, the BREVI-XL™ Pro is designed to provide greater durability, ease in placement, and precise directional control (1:1 torque).
In addition, these catheters are radiopaque and include the Racz® Bend Marks to better highlight key navigational reference marks.

TUN-L-KATH®

19G Catalog# 155-1520
Length - 33.25" (84.5cm)

Firm, directable catheter body. Round, deflective atraumatic tip. Designed for greater durability and ease in placement. Precise directional control (1:1 torque). Epidural infusion, specifically where scarring or adhesions are in the epidural space, may make placement difficult (i.e. failed back surgery, disc disruption, spinal stenosis, etc.).

TUN-L-XL™

19G Catalog# 155-2540
Length - 33.25" (84.5cm)

The XL style catheter tip provides maximum control and stability. Selectable XL tip orientation allows similar tip softness as the standard TUN-L-KATH® when the stylet is retracted. Designed for greater durability and ease in placement for situations where there is extensive epidural scarring, adhesions or abnormal spinal anatomy.

TUN-L-XL™/24

19G Catalog# 155-2542
Length - 24" (61cm)

Similar to the TUN-L-XL™. but packaged with two stylets that match to each specific catheter length. Dual stylet feature is beneficial when the first stylet becomes bent during difficult placements. Recommended for patients with adhesions at several levels.

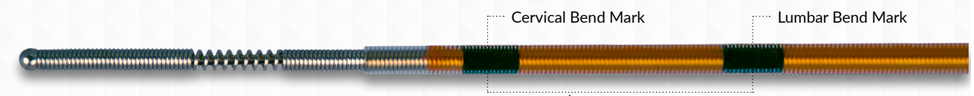
VERSA-KATH®

21G Length - 12" (30.5cm)
Catalog# 156-2112

21G Length - 24" (61cm)
Catalog# 156-2124

The VERSA-KATH® is designed for cervical epidural and transforaminal placement. Reduced size but styleted with the same 1:1 torque and directability. Due to its slim design, the VERSA-KATH® can be introduced through an 18g RX Coudé® needle.

Connector Insertion Mark
Marking determines proper catheter insertion to a Stingray® Connector.



Racz® Bend Marks
Dr. Gabor B. Racz catheter bend marks for optimal directability.

Calibrated Reference Marks
Upgraded professional calibrated depth markings.