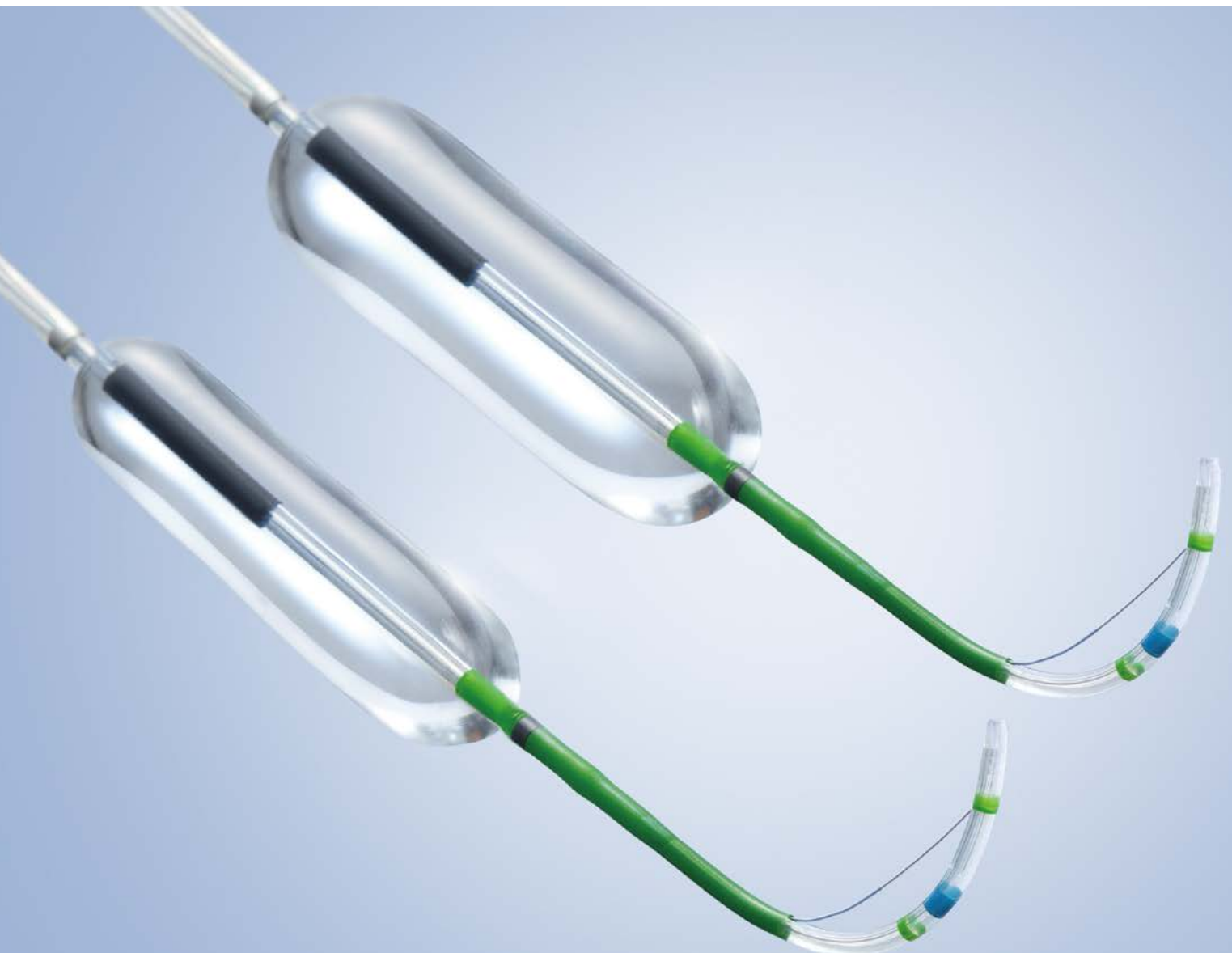


Single-Use Balloon Dilator V (with Knife)

# StoneMaster V

Optimizing Performance in Sphincterotomy and Sphincteroplasty



# Master Difficult Stone Management

Adding Sphincteroplasty to Stone Extraction Procedures is Becoming More Common for the Treatment of Large Stones in the Bile Duct. StoneMasterV Combines the Two Steps of Sphincterotomy and Sphincteroplasty into One Endoscopic Device, Saving Time by Eliminating the Need for Device Exchange and Simplifying Stone Management.

### Stable Knife Orientation

The pre-curved distal end of the StoneMasterV extrudes to a stable 11 o'clock position, reducing efforts in cannulation of the papilla and ensuring optimized cutting.

### CleverCut Coating Enhances Safety

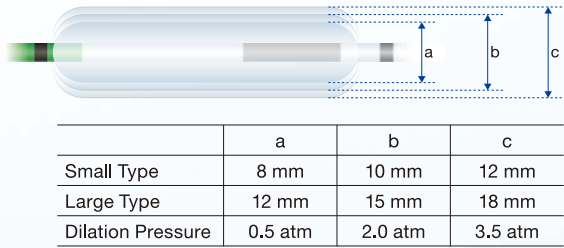
The CleverCut coating on the proximal end of the cutting wire minimizes the damage to the surrounding tissue, virtually eliminating any risk of electrical contact between the wire and endoscope.

### Multi-Sizing balloon for Optimal Dilation of the Papilla

The integrated multi-sizing balloon is continuously adjustable to three controlled dilation diameters. The rounded balloon edges allow to have a clear endoscopic view through the balloon onto the dilated tissue.

### Effortless Device Exchange

C-Channel-optimized StoneMasterV supports device exchange for short-wire or traditional over-the-wire techniques. It is designed for use in combination with the VisiGlide.



### Endoscopic Markers

### CleverCut Coating

### Radiopaque Markers

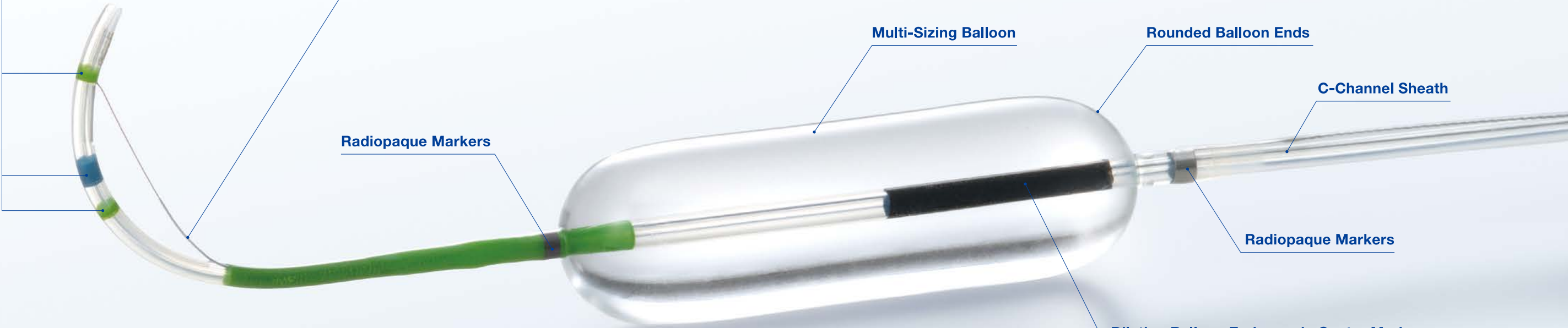
### Multi-Sizing Balloon

### Rounded Balloon Ends

### C-Channel Sheath

### Radiopaque Markers

### Dilation Balloon Endoscopic Center Marker



# StoneMaster V



## Difficult Biliary Stone Extraction

Current ESGE guidelines suggest performing endoscopic sphincterotomy followed by an endoscopic papillary large balloon dilation for the extraction of selected difficult biliary stones. This approach is considered to show similar post-ERCP pancreatitis rates, a lower bleeding and overall complications risk when compared to endoscopic sphincterotomy alone.\*

\*Dumonceau et al., "Prophylaxis of post-ERCP pancreatitis: European Society of Gastrointestinal Endoscopy (ESGE) Guideline - Updated June 2014"; Endoscopy 2014; 46: 799-815.

Specifications						
	Large Type(12-15-18)			Small Type(8-10-12)		
Product Code	BD-VC431Q-1840-20	BD-VC431Q-1840-25	BD-VC431Q-1840-30	BD-VC431Q-1240-20	BD-VC431Q-1240-25	BD-VC431Q-1240-30
Article Code	N5400030	N5400130	N5400230	N6010930	N6011030	N6011130
Cutting Wire Length(mm)	20 mm	25 mm	30 mm	20 mm	25 mm	30 mm
Distal Tip Length(mm)	7 mm					
Distal Tip Size (Fr)	4.4 Fr					
Working Length(mm)	1950 mm					
Balloon Diameter(mm)	12-15-18 mm			8-10-12 mm		
Balloon Diameter(Fr)	36-45-54 Fr			24-30-36 Fr		
Dilation Pressure(atm)	0.5-2.0-3.5 atm			0.5-2.0-3.5 atm		
Balloon Length (mm)	40 mm					



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