

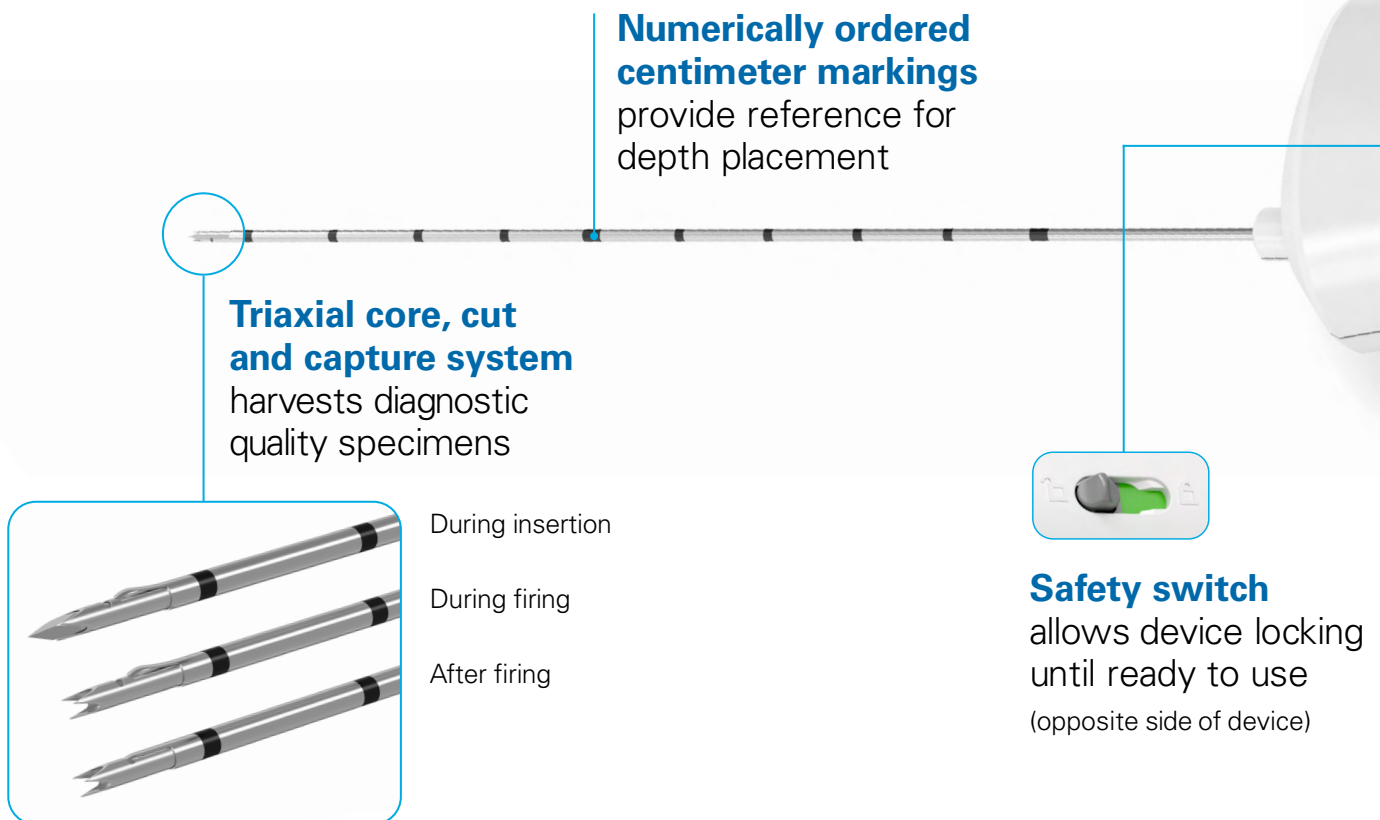
Confidence to the core

BioPince[®]
ULTRA

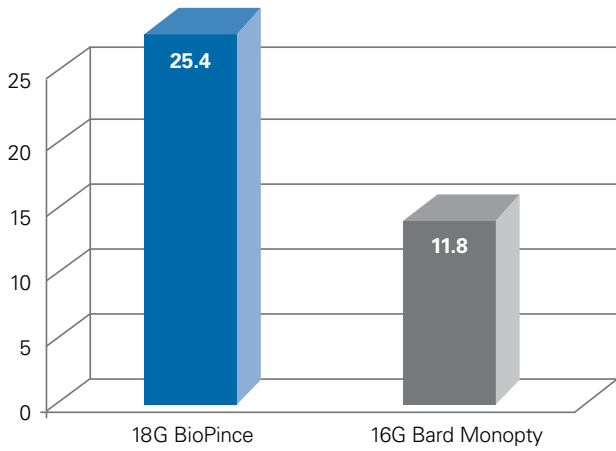



ARGON
MEDICAL DEVICES

Full core confidence. Superior clinical performance.



Percutaneous image-guided biopsy using the described full core, end-cut needle resulted in a specific diagnosis in 99/100 consecutive biopsies in various organs with a low complication rate.¹



Average Complete Portal Tracts (CPTs) per specimen

Better quality

In an independent clinical study of 96 patients comparing 18G BioPince Full Core Biopsy Instrument and 16G Bard® Monopty® Disposable Core Biopsy Instrument, BioPince achieved:³

- 2x more CPTs per specimen on average
- 97.5% diagnostically adequate samples compared to Monopty's 64%

*The purpose of this study was to determine which percutaneous device yielded the best samples for staging of liver disease based on standard criteria for adequate biopsy.

Forward trigger
for flexibility in approach



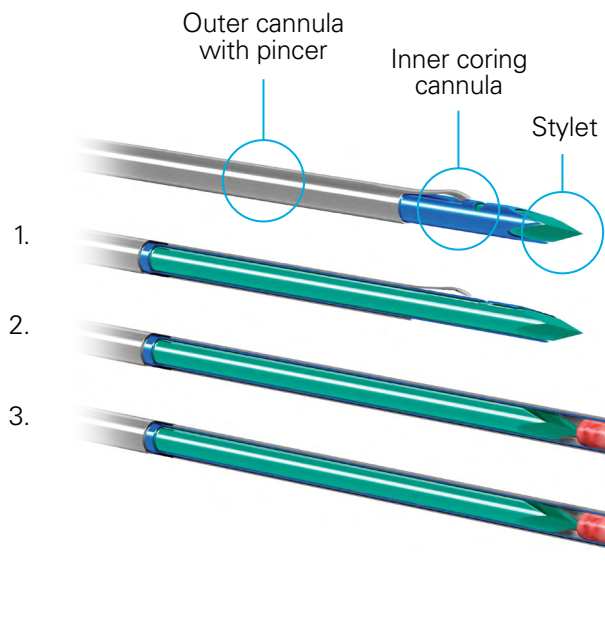
Green 'ready' indicator

Cocking lever

Color-coded rear trigger
for gauge identification

Variable throw lengths
enhance clinical flexibility

Throw Length	Specimen Length
33mm	29mm
23mm	19mm
13mm	9mm



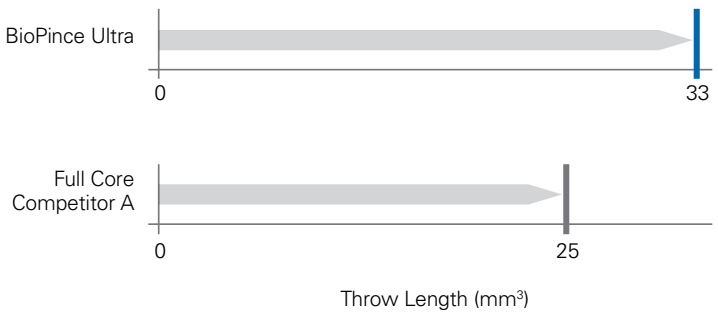
BioPince Ultra needle sequence

1. The stylet is positioned proximal to the lesion and does not move forward.
2. Once instrument is actuated, the inner coring cannula advances forward, surrounding the tissue.
3. The outer cannula with pincer advances to cut the distal specimen portion and captures it within the cannula.

Better glomerular yield with a 16 gauge BioPince instrument compared to a 14 gauge tru-cut needle while taking fewer cores and with fewer major complications.¹

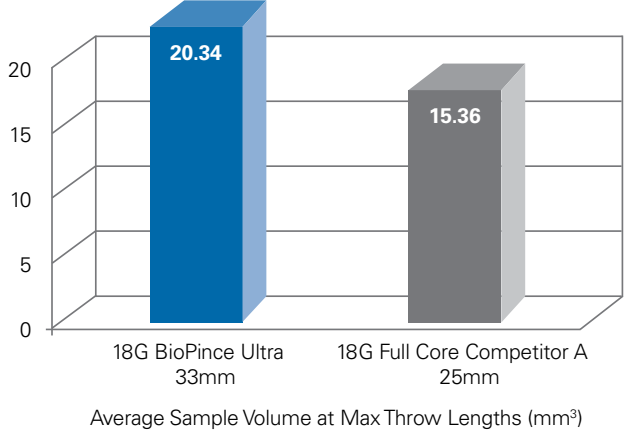
Maximum length

BioPince Ultra offers the longest throw length available, resulting in a greater sample volume.*



Superior volume

In a head-to-head test at maximum throw lengths, BioPince Ultra offers 32% greater volume than Competitor A.*



BioPince® Ultra Full Core Biopsy Instrument is the next generation of full core biopsy technology capturing a full core specimen while reducing the risk of crush artifact and tissue fragmentation. BioPince Ultra leverages the proven performance and clinical excellence associated with the original BioPince delivering outstanding results in a single, refined, ergonomic design.

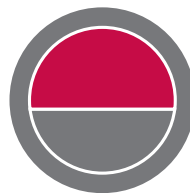


Proven performance

A peer-reviewed study demonstrates a 16G BioPince full core sample offers up to 58% more glomeruli than a 14G conventional side-notch biopsy instrument.²



BioPince Ultra full core biopsy instrument



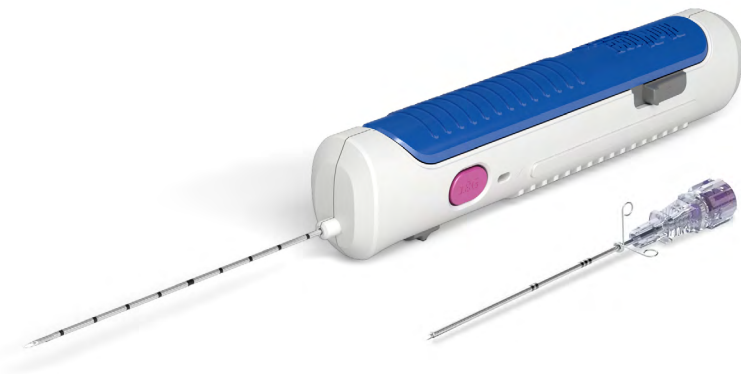
Conventional side-notch biopsy instrument

Ordering Information

BioPince Ultra Full Core Biopsy Device (Box of 5)			
	CATALOG #	GAUGE x LENGTH	CO-AXIAL (Optional)
16G	370-1080-02	16G x 10cm	MCXS1610BP or MCXS1610BPU
	370-1580-02	16G x 15cm	MCXS1615BP or MCXS1615BPU
18G	360-1080-02	18G x 10cm	MCXS1810BP or MCXS1810BPU
	360-1580-02	18G x 15cm	MCXS1815BP or MCXS1815BPU
	360-2080-02	18G x 20cm	MCXS1820BP or MCXS1820BPU

BioPince Ultra Full Core Biopsy Device with Co-axial Introducer Needle (Box of 5)			
	CATALOG #	GAUGE x LENGTH	CO-AXIAL NEEDLE
16G	370-1080-03	16G x 10cm	14G x 6.8cm
	370-1580-03	16G x 15cm	14G x 11.8cm
18G	360-1080-03	18G x 10cm	17G x 6.8cm
	360-1580-03	18G x 15cm	17G x 11.8cm
	360-2080-03	18G x 20cm	17G x 16.8cm

Echogenic Co-axial Introducer Needles (Sold Separately) (Box of 5)			
	CATALOG #	GAUGE x LENGTH	COMPATIBLE DEVICE
14G	MCXS1610BPU	14G x 6.8cm	370-1080-02
	MCXS1615BPU	14G x 11.8cm	370-1580-02
15G	MCXS1610BP	15G x 6.8cm	370-1080-02
	MCXS1615BP	15G x 11.8cm	370-1580-02
16G	MCXS1810BPU	16G x 6.8cm	360-1080-02
	MCXS1815BPU	16G x 11.8cm	360-1580-02
	MCXS1820BPU	16G x 16.8cm	360-2080-02
17G	MCXS1810BP	17G x 6.8cm	360-1080-02
	MCXS1815BP	17G x 11.8cm	360-1580-02
	MCXS1820BP	17G x 16.8cm </td <td>360-2080-02</td>	360-2080-02



*Data on file.

1. Diederich, S., Padge B., Vossas U., Hake R., Eidt S. Application of a single needle type for all image-guided biopsies: results of 100 consecutive core biopsies in various organs using a novel Tri-axial, end-cut needle. *Cancer Imaging*. 2006; 6:43-50.
2. Constantin, A., Brisson, M.L., Kwan, J., and Proulx, F. Percutaneous US-guided Renal Biopsy: A Retrospective Study comparing 16ga end-cut and 14ga side-notch needles. *J Vasc Interv Radiol*. 2010; 21:357-361.
3. Johnson, D., Rye, R., Jensen, A., and Durham, J., University of Colorado Denver. 2019

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