CrossBoss™ & Stingray™
Coronary Crossing and Re-Entry Devices

Advancing the Treatment of CTOs

CrossBoss™

Stingray™
Boston Scientific brings you a proven system for the treatment of complex lesions via the true lumen or subintimal pathways. The CrossBoss™ & Stingray™ crossing and re-entry devices are an important part of the Hybrid Approach.

The Hybrid Approach is a standardised methodology where anatomy drives strategy to increase the chance for successful CTO treatment.

**CrossBoss Coronary Crossing Catheter**

- Designed to quickly and safely deliver a guidewire via true lumen or subintimal pathways, CrossBoss gives you access to coronary chronic total occlusions.
- Atraumatic, rounded tip reduces risk of perforation
- Hydrophilic coated, multi-wire coiled shaft provides precise turn-for-turn response
- Fast-Spin torque device allows rapid rotation of the catheter to facilitate crossing

**Stingray Coronary Re-Entry System**

- Designed for reliability, safety, and predictability, Stingray allows the operator to accurately target and re-enter the true lumen from a subintimal position.
- Self-orienting, flat balloon hugs the vessel, automatically positioning one exit port toward the true lumen
- 180° opposed and offsetting exit ports enable selective guidewire re-entry
- Two radiopaque marker bands to facilitate accurate placement and positioning
- Hydrophilic coating on the balloon shaft ensures smooth device delivery
- Stingray® Guidewire’s angled tip and distal probe are designed for facilitated re-entry into the true lumen

**The Procedure**

1. **Advance the CrossBoss catheter** while simultaneously rotating the Fast-Spin torque device rapidly in a clockwise or counter clockwise direction. CrossBoss may stay in the true lumen of the artery.
2. **In the event CrossBoss enters the subintimal layer, continue advancing through the subintima and around the target lesion. Once distal to the target lesion, remove CrossBoss, leaving the wire in place.**
3. **Advance the Stingray Catheter** over the existing wire and through the subintimal layer. Replace the initial guidewire with the Stingray Guidewire.
4. **Steer the Stingray Guidewire** through the lumen-facing exit port, distal to the lesion, and re-enter the true lumen.
Please check product availability with your local Boston Scientific Sales representative.