**General Information**

**Name of Product:**
The Sensor PTFE-Nitinol Guidewire with Hydrophilic Tip

**Product Description:**
The Sensor PTFE-Nitinol Guidewire with Hydrophilic Tip is a hybrid guidewire that combines the access of a nitinol hydrophilic wire with the handling of a PTFE wire. The Sensor Guidewire is constructed of a kink-resistant nitinol core with a 5cm hydrophilic coated floppy tip that is designed to facilitate access past obstructions and through tortuous anatomy. Its smooth PTFE coating provides a low coefficient of friction to facilitate advancement and catheter tracking yet is designed to have better handling characteristics than a standard, completely hydrophilic wire.

The Sensor Guidewire is also available in a Dual-Flex configuration that features a 10cm flexible proximal end designed to ease the passage of a flexible ureteroscope.

**Manufacturer:** Boston Scientific

**Manufacturer Federal Tax ID:** 04 269 5240

**Will this product replace or supplement a current in-house product?**
This device may supplement or replace hydrophilic guidewires, like Glidewire™ Guidewire and HiWire™ Wire Guide.

**Clinical Outcomes**

**What studies have been conducted with the product?**

**What clinical improvement does the requested product provide? How might this product improve the level of patient satisfaction?**
The Sensor PTFE-Nitinol Guidewire with Hydrophilic Tip is a hybrid guidewire that combines the access of a nitinol hydrophilic wire with the handling of a PTFE wire. It is designed to reduce the time spent manipulating and exchanging multiple wires during a case. Often, fully hydrophilic guidewires are exchanged after initial access for guidewires, such as PTFE guidewires, that are more secure working wires. The Sensor Guidewire is designed to be used as both an access wire and a working wire, reducing the number of guidewires used during a procedure.
Clinical Outcomes (continued)

Journal Article Citations:

“As these hybrid wires incorporate the various features of individual wires, they decrease the need for multiple wires and maintenance of a large inventory.”

“Sensor Dual-Flex Guidewire had not only the least dangerous tip (P<0.01) on the tip buckling and tip piercing force tests, but also lower friction values on the friction guide test.”

“We believe that to achieve safe access to the urinary system, the Sensor Dual Flex Guidewire might be preferable because of its non-injurious tip and more lubricious shaft.”

Regulatory

Is this product FDA approved for this intended use? Yes. The Sensor PTFE-Nitinol Guidewire with Hydrophilic Tip is intended to facilitate the placement of endourological instruments during diagnostic or interventional procedures.

Does the product/device have an FDA investigational device exemption (IDE)? No

What Class of device under the FDA is this considered? The Sensor Guidewire is marketed in accordance with FDA regulations per 21 CFR 876.5130 and, as such, is exempt from 510(k) clearance by FDA. This means that the FDA does not require a 510(k) in order to market this product within the USA.

Cost/Utilization

Is this item/technology on contract with GPOs and/or IDNs? Please speak to your Boston Scientific sales representative for the contract status of specific GPOs and IDNs.

Ship Unit: Box 5

Mode of transportation: FedEx™ Delivery

Minimum order quantity? No

Lead time in working days? 1-2 days

What are the dimensions of the shipping carton container? The shipping carton for a box of 5 is 8" x 10" x 1 1/4".

Method of purchase: The purchase would be an outright purchase.

Does this item require special storage considerations? Per the DFU, store in a cool, dry, dark place.

Is this a dated product? Yes, with 3-year shelf life.

Will this product require evaluation by any of the following departments?
  - Epidemiology/Infection Control? No
  - Safety and Security? No
  - Bio Engineering Maintenance? No
  - Pathology/Labs? No

What specific departments/clinical areas will use the product/procedure? Urology Operating Room (OR)

What department(s) will use and/or be affected by this product? OR, Cysto Suite, Urology Suite and Purchasing

Is there a requirement for staff training? A brief in-service by a Boston Scientific Representative is recommended for the OR staff prior to use.

Will there be additional implementation costs, such as installation, cost of education, impact on equipment or additional space? No; however, a brief in-service by a Boston Scientific Representative is recommended for the OR staff prior to use.

Does the product/procedure require a company representative to be present to operate equipment or to provide assistance to the physicians? No

Is there any other equipment involved with the use of this product that will need to be leased, purchase consigned or rented? No

Will this equipment interface with any other equipment/supplies currently utilized at this facility? No

What is the average length of procedure time to use this product/perform this procedure (surgery minutes)? 45 minutes for ureteroscopy, 60 minutes for percutaneous nephrolithotomy.
Reimbursement

Is this product reimbursable by insurance?  Yes. The procedures for which it is used are reimbursable. Billing guides with respective coding and Medicare reimbursement for Ureteroscopy with and without Lithotripsy and PCNL are available upon request. For additional coding and reimbursement information, contact your local Territory Manager or the Urology Reimbursement Help Desk at (508) 683-4022.

What is the Medicare Pass-Through Code (aka C-code or HCPCS)?  The applicable Medicare Pass-Through Code for this device is C1769 – guidewire.

See last page for Relevant Reimbursement Codes and important information about the uses and limitations of this document.

Material / Environment

Does this product contain metal substances that may affect tests and/or procedures performed on patients?  Yes. This guidewire contains nitinol, which is a metal alloy of nickel and titanium, and tungsten in the tip. However, the guidewire is removed at the conclusion of the procedure.

If yes, is this product MRI safe?  No

Is this considered an implantable device?  No

Does this item and its packaging contain no detectable latex?  Yes

Is this a pharmaceutical or contain any pharmaceutical product?  No

Does the product require a Material Safety Data Sheet?  No

Is this product reusable?  No, it is single use.

What additional waste or recycle costs are anticipated?  None

Does this product qualify as hazardous waste?  No

Does the product contain:
- Mercury?  No
- PVC?  No
- Halogenated flame retardants/halogenated organic chemicals (HOCs)?  No
- Persistent bio-accumulative toxic compounds (PBTs)?  No

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### Relevant Reimbursement Codes:

Payer policies will vary and should be verified prior to treatment for limitations on diagnosis, coding or site of service requirements. The coding options listed within this guide are commonly used codes and are not intended to be an all-inclusive list. We recommend consulting your relevant manuals for appropriate coding options.

<table>
<thead>
<tr>
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<tbody>
<tr>
<td>Ureteroscopic Stone Removal without Lithotripsy with Ureteral Stent Insertion</td>
<td>0162</td>
<td>52352 – Cystourethroscopy, with ureteroscopy and/or pyeloscopy, with removal or manipulation of calculus (ureteral catheterization is included)</td>
<td>56.0 – Transurethral removal of obstruction from urerter or renal pelvis</td>
<td>592.0 – Calculus of kidney</td>
<td>668 – Transurethral procedures with major complication or comorbidity (MCC)</td>
</tr>
<tr>
<td></td>
<td>0162</td>
<td>52332 – Cystourethroscopy, with insertion of indwelling ureteral stent (e.g., Gibbons or double-J type)</td>
<td>56.0 – Transurethral removal of obstruction from urerter or renal pelvis</td>
<td>592.1 – Calculus of ureter</td>
<td>669 – Transurethral procedures with complication or comorbidity (CC)</td>
</tr>
<tr>
<td>Ureteroscopic Stone Removal with Lithotripsy</td>
<td>0163</td>
<td>52353 – Cystourethroscopy, with ureteroscopy and/or pyeloscopy, with lithotripsy (ureteral catheterization is included)</td>
<td>56.0 – Transurethral removal of obstruction from urerter or renal pelvis</td>
<td>592.0 – Calculus of kidney</td>
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<td>Percutaneous Nephrolithotomy</td>
<td>0429</td>
<td>50080 – Percutaneous nephrostolithotomy or pyelostolithotomy, with or without dilation, endoscopy, lithotripsy, stenting or basket extraction: up to 2cm</td>
<td>55.03 – Percutaneous nephrostomy without fragmentation</td>
<td>592.0 – Calculus of kidney</td>
<td>659 – Kidney &amp; ureter procedures for non-neoplasm with major complication or comorbidity (MCC)</td>
</tr>
<tr>
<td></td>
<td>0429</td>
<td>50081 – Percutaneous nephrostolithotomy or pyelostolithotomy, with or without dilation, endoscopy, lithotripsy, stenting or basket extraction: over 2cm</td>
<td>55.04 – Percutaneous nephrostomy with fragmentation</td>
<td>592.9 – Urinary calculus, unspecified</td>
<td>660 – Kidney &amp; ureter procedures for non-neoplasm with complication or comorbidity (CC)</td>
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<tr>
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<td>0162</td>
<td>50561 – Renal endoscopy through established nephrostomy or pyelostomy, with or without irrigation, instillation or ureteropyelography, exclusive of radiologic service; with removal of foreign body or calculus</td>
<td>668 – Transurethral procedures with major complication or comorbidity (MCC)</td>
<td>669 – Transurethral procedures with complication or comorbidity (CC)</td>
<td>670 – Transurethral procedures without CC/MCC</td>
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<td>0161</td>
<td>50392 – Introduction of intracatheter or catheter into renal pelvis for drainage and/or injection, percutaneous</td>
<td>55.04 – Percutaneous nephrostomy with fragmentation</td>
<td>592.9 – Urinary calculus, unspecified</td>
<td>670 – Transurethral procedures without CC/MCC</td>
</tr>
<tr>
<td></td>
<td>0162</td>
<td>50395 – Introduction of guide into renal pelvis and/or ureter with dilation to establish nephrostomy tract, percutaneous</td>
<td>55.04 – Percutaneous nephrostomy with fragmentation</td>
<td>592.9 – Urinary calculus, unspecified</td>
<td>670 – Transurethral procedures without CC/MCC</td>
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<tr>
<td></td>
<td>0162</td>
<td>52005 – Cystourethroscopy, with ureteral catheterization, with or without irrigation, instillation, or ureteropyelography, exclusive or radiologic service</td>
<td>55.04 – Percutaneous nephrostomy with fragmentation</td>
<td>592.9 – Urinary calculus, unspecified</td>
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<td>0278</td>
<td>74420-26 – Urography, retrograde, with or without KUB</td>
<td>55.04 – Percutaneous nephrostomy with fragmentation</td>
<td>592.9 – Urinary calculus, unspecified</td>
<td>670 – Transurethral procedures without CC/MCC</td>
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<td></td>
<td>0161</td>
<td>74475-6 – Introduction of intracatheter or catheter into renal pelvis for drainage and/or injection, percutaneous, radiological supervision and interpretation</td>
<td>55.04 – Percutaneous nephrostomy with fragmentation</td>
<td>592.9 – Urinary calculus, unspecified</td>
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</tr>
</tbody>
</table>

4 The patient’s medical record must support the existence and treatment of the complication or comorbidity.

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www.bostonscientific.com

Ordering Information
1.888.272.1001

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