Implantable Devices

Doppler Carotid Shunts

Implantable Devices
800.783.3352 • Fax: 727.527.8696
ImplantableDevices@gmail.com • www.dopplercarotidshunts.com
Note:
- Images are not to scale
- All shunt models consist of 5 shunts per box
- Each shunt is individually packaged in a sealed, sterilized tray

DOPPLER SHUNT REACTS TO:

- Balloons tightly anchored within the artery do not rotate and when the shunt is moved it will twist the artery closed.
- Over inflation of the balloon with an asymmetrical balloon results in loud background noise with a faint Doppler signal.
- If the tourniquet is too tight and collapsing the shunt, it will result in faint to no Doppler signal.
- A horseshoe shape kinks where it bends past 90 degrees, producing a low volume signal from poor flow.
- If the balloon is covering the tip, there will be no blood flow.
- When the tourniquet slips between the reinforcing wires, it will produce no signal due to no blood flow.
- Insertion into a vessel with no supporting tissue at the distal tip can stop the Doppler signal from vessel kinking.
- Inlying shunt insertion can pick up tissue and/or plaque which blocks blood flow, resulting in loud background noise and faint to no signal.

Illustrated by Dr. John Cooper
DUAL BALLOON SHUNT DESIGNS

with Doppler feature

DBD1009PT
- 9 Fr. tube
- Dual balloons
- "T" port
- Safety balloon

DBD1009P
- 9 Fr. tube
- Dual balloons
- Safety balloon

without Doppler feature

DB1009PT
- 9 Fr. tube; dual balloons; safety balloon; "T" port

DB1009P
- 9 Fr. tube; dual balloons; safety balloon

DB2000I
- 9 Fr. tube
- Dual balloons

DB5000I
- 9 Fr. tube
- Dual balloons; "T" port

DB1009P DISCONTINUED
WIRE REINFORCED SHUNT DESIGNS

with Doppler feature

- DWR1409SB (DISCONTINUED)
  - 14 to 9 Fr. tapered tube
  - Wire reinforced
  - Flexible plastic
  - Distal balloon
  - Safety Balloon
  - Compatible with Javid clamps

- DWR1409NRS:
  - non reinforced segment in middle available

- DWR1409
  - 14 to 9 Fr. tapered tube
  - Wire reinforced
  - Flexible plastic
  - Compatible with Javid clamps

without Doppler feature

- DWR1310B
  - 14 to 10 Fr. tapered tube
  - Wire reinforced
  - Flexible plastic
  - Compatible with Javid clamps

- WR1409SB (DISCONTINUED)
  - 14 to 9 Fr. tapered tube
  - Wire reinforced
  - Flexible plastic
  - Distal balloon
  - Safety Balloon

- WR1409
  - 14 to 9 Fr. tapered tube
  - Wire reinforced
  - Flexible plastic
  - Compatible with Javid clamps

- WR1310B
  - 14 to 10 Fr. tapered tube
  - Wire reinforced
  - Flexible plastic
  - Compatible with Javid clamps

- WR1409NRS:
  - non reinforced segment in middle available
**TAPERED SHUNT DESIGNS**

**with Doppler feature**

- **SDS1014JT**
  - 14 to 8.5 Fr. tapered tube
  - "T" port
  - Bumps
  - Compatible with Javid clamps

- **SDS1209BT**
  - 12 to 9 Fr. tapered tube
  - "T" port
  - Compatible with Javid clamps

- **SDS1014J**
  - 14 to 8.5 Fr. tapered tube
  - Compatible with Javid clamps
  - **DISCONTINUED**

- **SDS1209**
  - 12 to 9 Fr. tapered tube

- **LS1408**
  - 14 to 8 Fr. tapered tube

**without Doppler feature**

- **SCS1014J**
  - 14 to 8.5 Fr. tapered tube
  - Compatible with Javid clamps

- **SCS1209BT**
  - 12 to 9 Fr. tapered tube
  - "T" port
  - Compatible with Javid clamps

- **Twin Pack**
  - **DISCONTINUED**

- **SCS1014JT**
  - 14 to 8.5 Fr. tapered tube
  - "T" port
  - Compatible with Javid clamps

- **SCS1209**
  - 12 to 9 Fr. tapered tube

- **LS1408**
  - 14 to 8 Fr. tapered tube

- **Twin Pack**
  - 2 tapered shunts
  - (1) 1209 - 12 to 9 Fr.
  - (1) 1408 - 14 to 8 Fr.
The dual balloon shunt was originally developed by Toshio Inahara, MD* who endorses the new Doppler feature to monitor continuous blood flow.

*Dr. Inahara's vascular surgery career and some of his many accomplishments.
1. Inventor Carotid Balloon Occlusion Shunt
2. Emeritus Clinical Professor of Surgery OHSU
3. Membership Surgical Societies - 11
4. Journal publications 37, Book Chapters 7
5. Founder Pacific Northwest Vascular Society, President 1983-4-5
7. Director International Vascular Surgery Fellowship, 1971-93

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