

Prometra® 20 mL (REF 11827), Prometra® II 20 mL (REF 13827) and Prometra® II 40 mL (REF 16827) Programmable Pumps Magnetic Resonance Imaging (MRI) Safety Information

GENERAL



MR Conditional



WARNING: FAILURE TO EMPTY THE PUMP PRIOR TO EXPOSURE TO MRI ENVIRONMENT COULD RESULT IN DRUG OVERDOSE THAT COULD LEAD TO SERIOUS PATIENT INJURY OR DEATH. THE PUMP MAY NEED TO HAVE AS MUCH AS 20ML OR 40ML OF DRUG REMOVED DEPENDING ON THE PUMP TYPE AND MODEL NUMBER.



Warning: Patients should not be exposed to MRI environments until the surgical site following pump implantation is fully healed.



Warning: EMPTY ALL DRUG SOLUTION FROM ALL PROMETRA 20 ML (REF 11827), PROMETRA II 20 ML (REF 13827) AND PROMETRA II 40 ML (REF 16827) PUMPS PRIOR TO ENTERING THE MRI ENVIRONMENT. If a patient with a Prometra II 20 mL (REF 13827) or Prometra II 40 mL (REF 16827) Pump requires an emergent MRI, please see page 6 of these instructions for more details on the potential risks involved.

Strong magnetic fields, such as those created in MRI scanners, may cause the Inlet and Outlet Valves to open, resulting in the immediate discharge of the contents of the Drug Reservoir and Catheter into the patient. This could result in drug overdose that could lead to serious patient injury or death.

Prior to initiating the MRI procedure, the physician must determine if the patient can safely be deprived of medication for the length of the MRI procedure. If medication is needed, then alternate means of drug delivery (such as I.V. administration) should be employed for the duration of the MRI procedure.



WARNING: IF SUSPENDING INTRATHECAL DRUG THERAPY, ALTERNATIVE DRUG THERAPY ADMINISTRATION ROUTES (E.G., ORAL OR INTRAVENOUS) MAY BE NECESSARY. AN ALTERNATIVE ORAL OR PARENTERAL DOSE "EQUIVALENT" TO THE INTRATHECAL DOSE MAY RESULT IN SIDE EFFECTS THAT WARRANT TEMPORARY MONITORING IN AN EMERGENCY DEPARTMENT OR INPATIENT FACILITY.

Prior to scheduling an MRI scan and upon its completion, pump status should be confirmed by inquiring the pump to verify pump operation and settings.

Note: Pre-MRI, Post-MRI, and Medical Emergency Use instructions are provided in this document.

SCANNING PARAMETERS

Non-clinical testing has demonstrated that the Prometra 20 mL (REF 11827), Prometra II 20 mL (REF 13827), and Prometra II 40 mL (REF 16827) Programmable Pumps are MR Conditional. A patient with this device can be safely scanned in an MR system meeting the following conditions:

1. Static magnetic field of 1.5 T
2. Maximum spatial field gradient of 1,900 gauss/cm (19 T/m)



Warning: Exceeding the 1,900 gauss/cm (19T/m) at 1.5T limit could result in excessive force or torque which could lead to patient injury.

3. Maximum MR System reported, whole body averaged specific absorption rate (SAR) of 2 W/kg (Normal Operating Mode) using body coil transmission.
4. Scan duration should be limited to 10 minutes per pulse sequence.
5. All Pre-MRI Instructions must be completed.



NOTE: The MRI conditions for safe scanning detailed in this document only pertain to the Prometra Pumps implanted in the abdomen. Testing has not been conducted in other implantation locations or in the presence of other implanted active or passive medical devices. Other implanted devices (such as pacemakers, abandoned leads, knee implants, etc.) could have conflicting MR conditions which could lead to patient injury or device malfunction.

Tissue Heating Adjacent to Implant during MR Scans

The local temperature increase produced by the pump is considered to be below level of concern. In the unlikely event that the patient experiences uncomfortable warmth near the pump, the MRI scan should be stopped and the scan parameters adjusted to reduce SAR to comfortable levels.



Warning: Static Magnetic Field

In a 1.5 Tesla MR environment, the pump has a significant magnetically induced deflection force and very strong torque. The static and gradient magnetic fields produced by an MRI scanner could potentially interact with the pump and cause vibration. However, when pumps are implanted with proper techniques, the patient may safely be scanned under the conditions listed above. Not following the specific conditions may result in serious patient injury. The patient may experience a tugging and/or vibration sensation at the implant site when placed within the magnetic field. An elastic garment or wrap will help restrict movement and reduce these sensations while the patient is in the magnetic field.

Image Artifacts

The programmable pump contains ferromagnetic components that will cause image distortion and localized voids in regions of the image around the pump. MR image quality will be compromised if the area of interest is near the pump.

In non-clinical testing, the image artifact caused by Infusyn Therapeutics' Prometra II 20 mL (REF 13827) and Prometra II 40 mL (REF 16827) Pumps extends approximately 18.5 cm from the device when imaged with a spin-echo or gradient-echo pulse sequence in a 1.5 T MRI system. Image artifacts may be reduced when sequences are optimized for imaging (e.g. shorter echo time, decreased water fat shift, etc.). Images of the head and lower extremities away from the location of the Prometra Pump should be largely unaffected.

SPECIFIC PRE-MRI INSTRUCTIONS



WARNING: FAILURE TO EMPTY THE PUMP PRIOR TO EXPOSURE TO MRI ENVIRONMENT COULD RESULT IN DRUG OVERDOSE THAT COULD LEAD TO SERIOUS PATIENT INJURY OR DEATH. THE PUMP MAY NEED TO HAVE AS MUCH AS 20ML OR 40ML OF DRUG REMOVED DEPENDING ON THE PUMP TYPE AND MODEL NUMBER.

Prometra® 20 mL (REF 11827), Prometra® II 20 mL (REF 13827), and Prometra® II 40 mL (REF 16827) Programmable Pumps

Protocol for Prometra® 20 mL (REF 11827), Prometra® II 20 mL (REF 13827), and Prometra® II 40 mL (REF 16827) Programmable Pumps

Pre-MRI Procedure



Warning: EMPTY ALL DRUG SOLUTION FROM ALL PROMETRA 20 ML (REF 11827), PROMETRA II 20 ML (REF 13827), AND PROMETRA II 40 ML (REF 16827) PUMPS PRIOR TO ENTERING THE MRI ENVIRONMENT. If a patient with a Prometra II 20 mL (REF 13827) or Prometra II 40 mL (REF 16827) Pump requires an emergent MRI, please see page 6 of these instructions for more details on the potential risks involved.

Strong magnetic fields, such as those created in MRI scanners, may cause the Inlet and Outlet valves to open, resulting in the immediate discharge of the contents of the Drug Reservoir and Catheter into the patient. This could result in drug overdose that could lead to serious patient injury or death.

The physician must determine if the patient can safely be deprived of medication during the MRI procedure. If medication is needed then alternative means of drug delivery (such as I.V. administration or analgesic patch) should be employed.

IF AN MRI PROCEDURE IS NECESSARY, THE PUMP MUST BE EMPTIED of drug solution, not refilled and the PUMP PROGRAMMED TO 0.0 MG/DAY DRUG FLOW RATE prior to entering the environment of the MRI.

PERFORM THE FOLLOWING STEPS PRIOR TO ENTERING THE MRI ENVIRONMENT.

1. Pump Inquiry

Inquire the pump with the programmer to verify pump model and volume, the pump is operational and without errors. Print inquiry page.



NOTE: If the Clinician Programmer repeatedly displays the message “Pump Communication Failed. Please try again”, the Programmer software version may not be compatible with the pump model. In the event that a Programmer is confirmed to not be compatible with the pump model, Infusyn Technical Support will provide instructions to empty the drug reservoir prior to an MRI without performing additional pump programming. Prior to emptying the drug reservoir, the physician must determine if the patient can safely be deprived of medication until the post-MRI procedure can be completed with a Programmer that is compatible with the pump model. An alternate means of drug delivery (such as IV administration or oral drug therapy) should be employed, if medically necessary, while the pump is not delivering drug therapy. Please contact Infusyn Technical Support for assistance at: 855-356-9665.



WARNING: IF PUMP STATUS CANNOT BE PROPERLY CONFIRMED, DO NOT PROCEED SINCE THE PUMP MAY NOT BE OPERATING PROPERLY OR THE PROGRAMMER SOFTWARE MAY NOT BE COMPATIBLE WITH THE PUMP. PLEASE CONTACT INFUSYN TECHNICAL SUPPORT FOR ASSISTANCE AT: 855-356-9665.

2. Pump Programming

Set the flow mode to a constant flow rate of 0.0 mg/day. Re-inquire the pump and print inquiry page to confirm a constant flow rate of 0.0 mg/day.

3. Empty Drug Reservoir

Follow the procedures for emptying the Drug Reservoir in the Refill Kit Instructions for Use. Be sure to recall the maximum volume of the pump, which may be either 20mL or 40mL, depending on the pump type and model.

SPECIFIC POST-MRI INSTRUCTIONS

Protocol for Prometra® 20 mL (REF 11827), Prometra® II 20 mL (REF 13827), and Prometra® II 40 mL (REF 16827) Programmable Pumps

Post-MRI Procedure

1. Confirm Pump Operational Status –

- a. Inquire the pump with the programmer to verify pump operation and settings.
- b. Confirm that settings are unchanged from the Pre-MRI settings, e.g., flow rate must be 0.0 mg/day.
- c. If the programmer displays any pump errors, proceed to Step 2 “Clear Pump Errors”.
- d. If no pump errors are displayed, proceed to Step 3 “Inlet and Outlet Valve Closure Confirmation”.



WARNING: IF PUMP STATUS CANNOT BE PROPERLY CONFIRMED, DO NOT PROCEED SINCE THE PUMP MAY NOT BE OPERATING PROPERLY OR THE PROGRAMMER SOFTWARE MAY NOT BE COMPATIBLE WITH THE PUMP. PLEASE CONTACT INFUSYN TECHNICAL SUPPORT FOR ASSISTANCE AT: 855-356-9665.

2. Clear Pump Errors

- a. If pump errors are displayed from the Inquiry performed in Step 1, perform an Emergency Pump Stop using the programmer, and contact Infusyn Technical Support for assistance 855-356-9665.
- b. If pump errors are cleared, proceed to Step 3.

3. Confirm Inlet / Outlet Valve Closure

- a. Attempt to aspirate the Drug Reservoir through the Refill Port. To aspirate, attach the 22G non-coring needle (available in Refill Kit) to a sterile syringe.
- b. Advance needle through center Refill Port Septum until needle tip resides completely inside the Drug Reservoir.
- c. Pull a vacuum with the syringe for approximately 10 to 30 seconds to confirm Inlet / Outlet Valve closure.



Warning: If any significant volume (>1ml) is retrieved, it may be indicative that the pump Inlet / Outlet Valves are open, providing direct access to the catheter/cerebral spinal fluid; If so, DO NOT proceed with the refill since the pump may not be operating properly. The pump may need to be explanted and replaced. For questions, Contact Infusyn Technical Support for assistance at: 855-356-9665.

4. Refill The Drug Reservoir

- a. Proceed to refill the Drug Reservoir in accordance with the refill procedure defined in the Refill Kit Instructions for Use. Be sure to recall the maximum volume of the pump, which may be either 20mL or 40mL, depending on the pump type and model.
- b. Confirm the correct prescription is programmed, or program a new prescription.



Warning: A period of observation should follow the Refill Procedure to closely monitor patients for clinical symptoms of underdose or overdose based upon the prescribing information of the drug.

IN THE EVENT OF A MEDICAL EMERGENCY REQUIRING AN MRI SCAN:

Prometra® 20 mL Programmable Pump (REF 11827)

Medication **MUST** be removed from the Prometra® 20 mL Pump (REF 11827). Do not expose patient to MRI magnetic fields with drug in the Prometra Drug Reservoir, even in the event of a medical emergency. Follow instructions above (Pre-MRI) for removing drug from the Prometra Pump.



WARNING: FAILURE TO EMPTY THE PUMP PRIOR TO EXPOSURE TO MRI ENVIRONMENT COULD RESULT IN DRUG OVERDOSE THAT COULD LEAD TO SERIOUS PATIENT INJURY OR DEATH.

Prometra® II 20 mL (REF 13827) and Prometra® II 40 mL (REF 16827) Programmable Pumps

In the event of a medical emergency requiring a STAT MRI, the treating physician must be aware of the following as inputs to decision making regarding proceeding with an Emergency MRI for the Prometra II 20 mL Pump (REF 13827) and Prometra II 40 mL Pump (REF 16827):



WARNING: FAILURE TO EMPTY THE PUMP PRIOR TO EXPOSURE TO MRI ENVIRONMENT COULD RESULT IN DRUG OVERDOSE THAT COULD LEAD TO SERIOUS PATIENT INJURY OR DEATH. THE PUMP MAY NEED TO HAVE AS MUCH AS 20ML OR 40ML OF DRUG REMOVED DEPENDING ON THE PUMP TYPE AND MODEL NUMBER.



WARNING: In the event an MRI scan was performed on a patient with a **Prometra® II 20 mL (REF 13827) or Prometra® II 40 mL (REF 16827) Pump** where the drug was NOT removed due to a medical emergency situation, the **Prometra® II 20 mL (REF 13827) and Prometra® II 40 mL (REF 16827) Pumps** contain a Flow Activated Valve (FAV) intended to reduce, but not eliminate, the risk of drug overdose. A physician must evaluate the patient immediately for signs and symptoms of drug overdose and develop a plan for immediate monitoring in a medically supervised and adequately equipped environment. Resuscitative equipment should be available, as should medications to manage drug overdose.

INFUSYN STRONGLY RECOMMENDS THAT ALL DRUG BE REMOVED FROM THE PROMETRA® II 20 ML (REF 13827) AND PROMETRA® II 40 ML (REF 16827) DRUG RESERVOIRS PRIOR TO ANY MRI SCAN.

The Prometra® II 20 mL (REF 13827) and Prometra® II 40 mL (REF 16827) Pumps include a Flow Activated Valve (FAV) intended to reduce, but not eliminate, the risk of drug over-infusion during an MRI procedure.

If the Drug Reservoir volume is $\leq 1\text{mL}$ or expected to be $\leq 1\text{mL}$ at the time of the Emergency MRI scan, do not proceed with an Emergency MRI scan without first emptying the drug from the Reservoir. If there is $\leq 1\text{mL}$ of drug in **the Reservoir, the drug must be removed prior to the Emergency MRI procedure. When the Reservoir volume is at $< 1\text{ mL}$, the FAV may not close.** Thus, the drug within the Reservoir may be bolused to the patient. This could result in drug overdose that could lead to serious patient injury or death. To determine the volume of drug in the Reservoir, inquire the pump with a Prometra® Programmer. The Reservoir volume is shown on the inquiry screens. **If a Programmer is not available, then all drug must be removed from the Drug Reservoir prior to the Emergency MRI scan.**

The Flow Activated Valve (FAV) of the Prometra® II 20 mL (REF 13827) and Prometra® II 40 mL (REF 16827) Pumps is intended to shut off drug flow when exposed to strong magnetic fields. When this occurs a small amount of drug, $\leq 10 \mu\text{L}$, will be delivered to the patient. **The physician must determine if the patient can safely receive this 10 μL bolus dose during the Emergency MRI procedure^(1,2).** If not, then all drug must be completely emptied from the Drug Reservoir prior to the Emergency MRI procedure.



NOTE:

1. For a pump containing Infumorph® at a concentration of 25 mg/mL, a bolus dose of < 0.25 mg would be delivered to the patient during an Emergency MRI procedure if the drug was not removed from the Drug Reservoir prior to the MRI.
2. For a pump containing baclofen at a concentration of 0.5 mg/mL, 1 mg/mL and 2 mg/mL, a bolus dose of < 5 μg , 10 μg , and 20 μg , respectively, would be delivered to the patient during an Emergency MRI procedure if the drug was not removed from the Drug Reservoir prior to the MRI.

Following an MRI, the FAV will be closed, and will prevent further drug delivery to occur until the pump is manually reset after the completion of the MRI procedure. **The physician must determine if the patient can safely be deprived of medication until the FAV is reset after the MRI procedure.** If medication is needed, then alternate means of drug delivery (such as I.V. administration or analgesic patch) should be employed keeping in mind that the patient will be receiving up to a 10 μL bolus of drug during the Emergency MRI if drug was not removed from the Reservoir prior to the MRI procedure.

In the event that an Emergency MRI scan was performed on a patient with a Prometra® II 20 mL (REF 13827) or Prometra® II 40 mL (REF 16827) pump in which the drug was NOT removed due to a medical emergency situation, the FAV must be reset by performing a reset procedure.

¹Per Deer et al., Polyanalgesic Consensus Conference 2012: Recommendation for the Management of Pain by Intrathecal (Intraspinal) Drug Delivery: Report of an Interdisciplinary Expert Panel, bolus doses of 5%-20% of the daily dose are typical, but cautions that doses are additive to baseline infusion and cumulative side effects could occur.

²Lioresal (Baclofen Injection) Instructions for Use. Medtronic, Inc., Minneapolis, MN; Gablofen (Baclofen Injection) Instruction for Use. Mallinckrodt Pharmaceuticals, Inc., Hazelwood, MO.

Emergency Procedure PRE-MRI Steps for Prometra® II 20 mL (REF 13827) and Prometra® II 40 mL (REF 16827) Pumps

1. Pump Inquiry

- a. Inquire the pump with the programmer to verify pump model and volume, the pump is operational and without errors.
- b. Verify that more than 1mL of drug is present in the Drug Reservoir.
- c. Print inquiry page.



NOTE: If the Clinician Programmer repeatedly displays the message “Pump Communication Failed. Please try again”, the Programmer software version may not be compatible with the pump model. In the event that a Programmer is confirmed to not be compatible with the pump model, Infusyn Technical Support will provide instructions to empty the drug reservoir prior to an MRI without performing additional pump programming. Prior to emptying the drug reservoir, the physician must determine if the patient can safely be deprived of medication until the post-MRI procedure can be completed with a Programmer that is compatible with the pump model. An alternate means of drug delivery (such as IV administration or oral drug therapy) should be employed, if medically necessary, while the pump is not delivering drug therapy. Please contact Infusyn Technical Support for assistance at: 855-356-9665.



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2. Pump Programming

- a. Set the flow mode to a constant flow rate of 0.0 mg/day.
- b. Re-inquire the pump and print inquiry page to confirm a constant flow rate of 0.0 mg/day.

Emergency Procedure POST-MRI Steps for Prometra® II 20 mL (REF 13827) and Prometra® II 40 mL (REF 16827) Pumps

1. Confirm Pump Operational Status –

- a. Inquire the pump with the programmer to verify pump operation and settings.
- b. Confirm that settings are unchanged from the Pre-MRI settings, e.g., flow rate must be 0.0 mg/day.
- c. If the programmer displays any pump errors, proceed to Step 2 “Clear Pump Errors”.
- d. If no pump errors are displayed, proceed to Step 3 “FAV Reset Procedure”.



WARNING: IF PUMP STATUS CANNOT BE PROPERLY CONFIRMED, DO NOT PROCEED SINCE THE PUMP MAY NOT BE OPERATING PROPERLY OR THE PROGRAMMER SOFTWARE MAY NOT BE COMPATIBLE WITH THE PUMP, PLEASE CONTACT INFUSYN TECHNICAL SUPPORT FOR ASSISTANCE AT: 855-356-9665.

2. Clear Pump Errors

- a. If pump errors are displayed from the Inquiry performed in Step 1, perform an Emergency Pump Stop using the programmer, and contact Infusyn Technical Support for assistance 855-356-9665.
- b. If pump errors are cleared, proceed to Step 3.

3. FAV Reset Procedure

- a. Remove drug from Drug Reservoir by aspirating through the Refill Port.
- b. To aspirate, attach the 22G non-coring needle to a syringe barrel (available in Refill Kit).
- c. Advance needle through the center Refill Port Septum until needle tip resides completely inside the Drug Reservoir.
- d. Empty the Drug Reservoir until there is no more fluid returning to the syringe barrel. Be sure to recall the maximum volume of the pump which may be either 20mL or 40mL, depending on the pump type and model. (Refer to Refill Kit Instructions for Use for further details on emptying the pump).
- e. After ensuring the Drug Reservoir is fully empty, program a Demand Bolus to deliver (0.03 mL x concentration) over 2 minutes (this will not dispense drug since the Drug Reservoir is empty).
- f. Wait for the 2-minute Demand Bolus to complete before proceeding.

4. Confirm Inlet / Outlet Valve Closure

- a. Attempt to aspirate the Drug Reservoir through the Refill Port. To aspirate, attach a sterile syringe to the 22G non-coring needle used in Step 3c above.
- b. Pull a vacuum with the syringe for approximately 10 to 30 seconds to confirm Inlet / Outlet Valve closure.



Warning: If any significant volume (>1ml) is retrieved, it may be indicative that the pump Inlet / Outlet Valves are open, providing direct access to the catheter/cerebral spinal fluid; If so, DO NOT proceed with the refill since the pump may not be operating properly. The pump may need to be explanted and replaced.

For questions, Contact Infusyn Technical Support for assistance at: 855-356-9665.

5. Refill The Drug Reservoir

- a. Proceed to refill the Drug Reservoir in accordance with the refill procedure defined in the Refill Kit Instructions for Use. Be sure to recall the maximum volume of the pump which may be either 20mL or 40mL, depending on the pump type and model.
- b. Confirm the correct prescription is programmed, or program a new prescription.



Warning: A period of observation should follow the Refill Procedure to closely monitor patients for clinical symptoms of underdose or overdose based upon the prescribing information of the drug.

Pump Model and Volume Determination

To identify the pump model and volume prior to an Emergency MRI scan use the following methods:

- Inquiry by programmer:** See tables below for information on pump compatibility and pump model information displayed on the Inquiry Screen for Prometra Clinician Programmers (REF 12828 and REF 13828). Contact Infusyn Technical Support at 855-356-9665 if you require access to a Infusyn Clinician Programmer with upgraded software.

Pump Compatibility with Clinician Programmer Software Versions		
	Clinician Programmer software version 2.01.5 and higher	Clinician Programmer software versions 1.02.1, 1.03.2, 1.04.10, 2.00.29, 2.00.30
Prometra 20 mL (REF 11827)	✓	✓
Prometra II 20mL (REF 13827)	✓	✓
Prometra II 40 mL (REF 16827)	✓	Not compatible, programmer displays "Communication Failed. Please try again"

"Pump Model" Information Displayed on Inquiry Screen for Clinician Programmer Software Versions		
	Clinician Programmer software version 2.01.5 and higher	Clinician Programmer software versions 1.02.1, 1.03.2, 1.04.10, 2.00.29, 2.00.30
Prometra 20 mL (REF 11827)	Prometra 20 mL	Prometra
Prometra II 20 mL (REF 13827)	Prometra II 20 mL	Prometra II
Prometra II 40 mL (REF 16827)	Prometra II 40 mL	Programmer displays "Communication Failed. Please try again." The Inquiry Screen is not displayed.

- Patient IDCard:** Identifies the pump model as **Prometra® (Model # 11827, 20 mL Volume)**, **Prometra® II (Model # 13827, 20 mL Volume)** or **Prometra® II (Model # 16827, 40 mL Volume)** as noted in the examples on the following page.



- Note:** Patients with **Prometra® 20 mL (REF 11827)**, **Prometra® II 20 mL (REF 13827)** and **Prometra® II 40 mL (REF 16827) Pumps** also have Medical Alert bracelets that indicate that the pump must be emptied prior to an MRI.

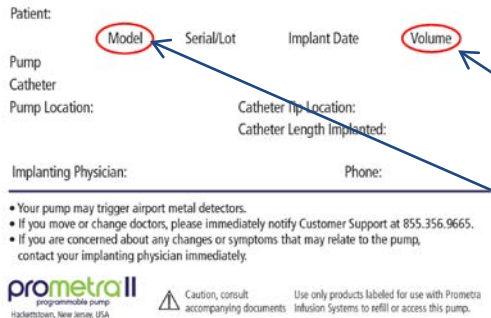
- Contact patient's pump management physician:** The patient's medical records indicate the pump model and serial number implanted. **Infusyn provides medical chart labels to facilitate patient record documentation.**
- Pump serial number:** There is a distinct difference in the serial numbers for the Prometra® 20 mL (REF 11827) Pump versus the Prometra® II 20 mL (REF 13827) and Prometra® II 40 mL (REF 16827) Pumps. The Prometra® II 20 mL (REF 13827) and Prometra® II 40 mL (REF 16827) pumps' serial number ends with an X, while the Prometra® 20 mL (REF 11827) Pump's serial number ends with a number.

- **Contact Infusyn Technical Support at 855-356-9665:** Pump information may be determined from our patient registration system.
- **Perform an X-ray of the pump:** The Prometra® II 20 mL (REF 13827) and the Prometra® II 40 mL (REF 16827) pumps can be differentiated from the Prometra® 20 mL (REF 11827) Pump via X-rays as shown on the following page. The image of the Prometra® II 20 mL (REF 13827) and Prometra® II 40 mL (REF 16827) Pumps shows the addition of the flow-activated valve (FAV) within the Catheter Access Port.

Prometra® II Pump Patient ID Card



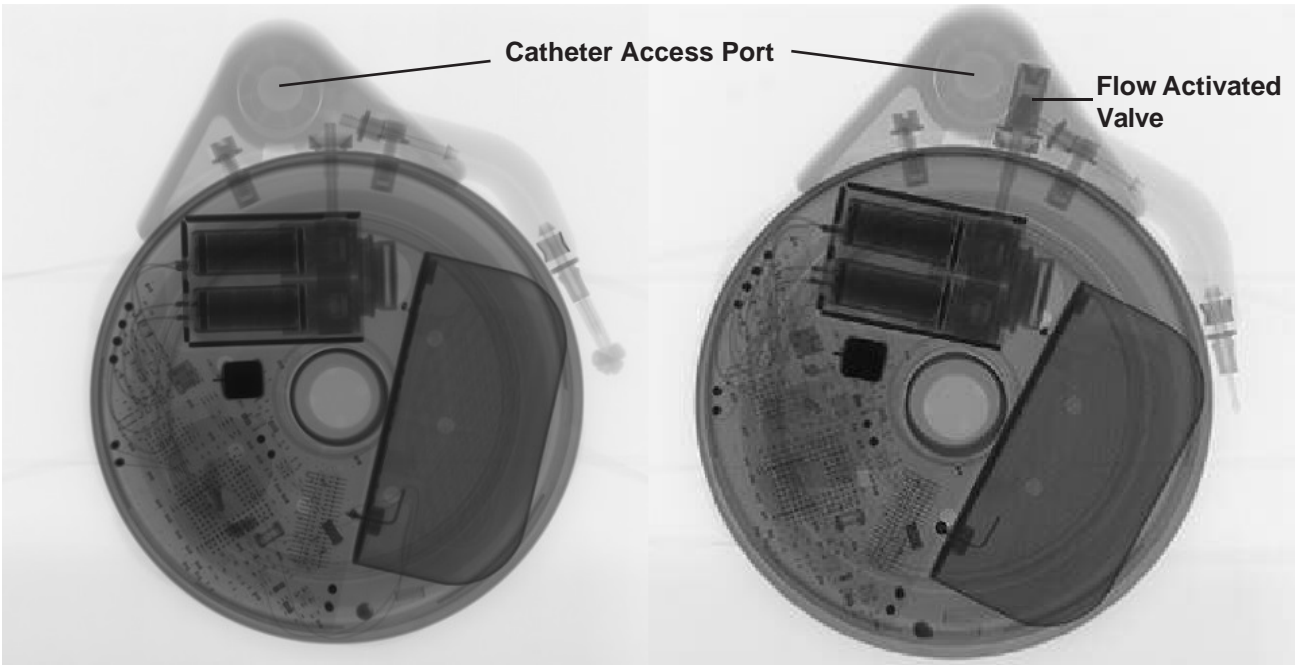
Card Front



Card Back

Pump Model Identification

Pump Model and volume Identification



Prometra® 20 mL (REF 11827) Pump X-ray

Prometra® II 20 mL (REF 13827) Pump X-ray