Atlas™ II VR
Different people. Different needs. One ICD solution.

MODEL V-168
Implantable Cardioverter Defibrillator

SPECIFICATIONS

Reduce the risk of inappropriate shocks
• The SenseAbility™ feature with Decay Delay and Threshold Start provides the flexibility to fine-tune to individual patient needs and helps eliminate oversensing of T waves, fractionated QRS complexes, and other extraneous signals.
• The exclusive Morphology Discrimination feature helps reduce the risk of inappropriate ICD shocks and promotes fast, accurate diagnosis and delivery of therapy.

Help manage high DFTs without additional surgery
• Many drugs have been shown to raise defibrillation thresholds to potentially unsafe levels.1 Our exclusive DefT Response™ technology tools provide more clinically proven, non-invasive options for managing high DFTs.
• Programmable pulse widths allow the user to tailor the shock to the individual patient, making shocks more efficacious.2
• Four programmable tilt options are available, because no one tilt is optimal for every patient.3
• The SVC shocking electrode can be activated or deactivated quickly and non-invasively with the press of a button.
• 36J delivered energy provides unsurpassed energy for defibrillation.
• Together, these features may help to prevent additional surgical procedures.

Speed up implant time
• Our exclusive DC Fibber™ VF induction has a documented 95.5% success rate for inducing fibrillation on the first induction as compared with a 72.7% success rate for Shock-on-T.4

Follow-up efficiently
• New fast telemetry speeds data from the device to the programmer.
• Redesigned programmer screens and new terminology help users move more quickly through follow-up.
• There is an increase to 45 minutes of continuous, fully annotated stored electrograms, including 0-32 seconds of pre-trigger information per electrogram.

Help patients forget that they have a device—unless they need to be reminded
• Exclusive vibratory Patient Notifier may allow even patients with hearing problems to be alerted to a low battery, lead-related complications and more.

3 N advert Raum et al. Effect of acute anemia following on energy requirements for transvenous ventricular defibrillation. American Journal of Cardiology 1986; 1142-450-460
4 Mclachlan MW, Magid DS, Reeder GS et al. ICD waveform optimization: a randomized prospective, pair sampled multicenter study. PACE 2000; 23 (Part I):1065-1070

Refer to the User’s Manual for detailed indications, contraindications, warnings, precautions and potential adverse events.
### Atlas™ II VR Model V-168

**Implantable Cardioverter Defibrillator**

**Model Number:** V-168

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**Physical Specifications**

<table>
<thead>
<tr>
<th>Parameter</th>
<th>Value</th>
</tr>
</thead>
<tbody>
<tr>
<td>Volume (cc)</td>
<td>38</td>
</tr>
<tr>
<td>Weight (g)</td>
<td>77</td>
</tr>
<tr>
<td>Size (mm)</td>
<td>70 x 50 x 14</td>
</tr>
<tr>
<td>Defibrillation Lead Connections</td>
<td>DF-1</td>
</tr>
<tr>
<td>Sensor/Pace Lead Connections</td>
<td>IS-1</td>
</tr>
<tr>
<td>High Voltage Can</td>
<td>Electrically active titanium can</td>
</tr>
</tbody>
</table>

**Parameter Settings**

- **Sensing/Detection**
  - Auto Sensitivity Control: Automatic sensitivity adjustment for ventricular events
  - Programmable Threshold Start: (Post-Sensed, Ventricular) 50, 62.5, 75, 100%, (Post-Placed, Ventricular) Auto, 0.2-3.0 mV in 0.1 mV increments
  - Programmable Decay Delay: (Post-Sensed, Ventricular) 0, 30, 60, 95, 125, 160, 190, 220 ms; (Post-Placed, Ventricular) Auto, 0, 30, 60, 95, 125, 160, 190, 220 ms
- **Detection Zones:** VT-1, VT-2, VF
- **Sudden Onset:** On, Off, Passive
- **Interval Stability:** On, On with SIH (Sinus Interval History), Off, Passive
- **Morphology Discrimination (MD):** On, Off, Passive
- **Automatic Template Update:** Off, 8 hours, 1 day, 3 days, 7 days, 14 days, 30 days
- **Reconfirmation:** Continuous sensing during charging

**Antitachycardia Pacing Therapy**

- **ATP Configurations:** Ramp, Burst, Scan
- **Burst Cycle Length:** Adaptive, Readaptive or Fixed
- **Min. Burst Cycle Length (ms):** 148-400 in increments of 4
- **Number of Bursts:** 1-15
- **Number of Stimulation:** 2-30
- **Extimatum (ms):** Off, On
- **ATP Pulse Amplitude (V):** 7.5 or 10.0; independently programmable from Bradycardia and Post-Therapy Pacing
- **ATP Pulse Width (ms):** 1.0 or 1.9; independently programmable from Bradycardia and Post-Therapy Pacing

**High Voltage Therapy**

- **Maximum Energy/Voltage:** 42J (Stored), 830 volts /36J (Delivered)
- **High Voltage Output Mode:** Programmable Pulse Width, Programmable Tilt
- **Waveform:** Biphasic, Monophasic
- **Ref Polarity:** Cathode (-), Anode (+)
- **Electrode Configuration:** RV to Can, RV to SVC/Can

**Bradycardia Pacing**

- **Permanent Modes:** VVIR, DDD
- **Temporary Modes:** VVI, VOO
- **Rate-Adaptive Sensor:** On, Off, Passive
- **Base Rate (min-1):** 40-100
- **Rest Rate (min-1):** Off, 35-95
- **Maximum Sensor Rate (min-1):** 80-150
- **Pulse Amplitude Ventricular (V):** 0.25-7.5
- **Pulse Width Ventricular (ms):** 0.05-1.15
- **Hysteresis Rate (min-1):** Off, 35-95
- **Rate Hysteresis with Search:** On, Off
- **Rate Responsive Ventricular Refractory:** Off, Low, Medium, High

**Post-Therapy Pacing (Independently programmable from Bradycardia and ATP)**

- **Post-Shock Pacing Mode:** Off, VVI
- **Post-Shock Base Rate (min-1):** 35-100 in increments of 5
- **Post-Shock Pacing Duration:** Off, 30 sec, 1, 2.5, 5, 7.5, 10 min
- **Post-Shock Ventricular Pacing Amplitude (V):** 0.25 to 7.5, 10.0
- **Post-Shock Pacing Pulse Width (ms):** 0.05, 0.1-1.5

**Device Testing/Induction Methods**

- **DC Fibber™ Pulse Duration (sec):** 0.5-5.0
- **Burst Fibber Cycle Length (ms):** 20-100
- **Shock-on-V Voltage:** 50-830 V [0.1-36J (Delivered)]
- **Noninvasive Programmed Stimulation (NPS):** 2-20 stimuli with up to three extrastimuli

**Electrograms and Diagnostics**

- **Stored Electrograms:** Up to 45 minutes including up to 32 seconds programmable pre-trigger data per electrogram; triggers include diagnosis, therapy, PC shock delivery, noise reversion, magnet reversion, and morphology template verification
- **Therapy Summary:** Episodes
- **Lifetime Diagnostics:** History of bradycardia events and device-initiated charging
- **Event Histogram:** Bar graph of sensed and paced event sequences
- **Heart Rate Histogram:** Bar graph of sensed and paced rates
- **Sensor Histogram:** Information regarding sensor activity
- **Real-Time Measurements (RTM):** Pacing lead impedances, unloaded battery voltage, signal amplitudes and RTM trends

**Patient Notifiers**

- **Device at ERI:** Off, On
- **Charge Time Limit Reached:** Off, On
- **Passable HV Circuit Damage:** Off, On
- **Device Reset:** Off, On
- **Ventricular Lead Impedance (out of range):** Off, On
- **Entry into Backup VVI Mode:** On
- **Vibration Duration:** 2, 4, 6, 8, 10, 12, 14, 16 s
- **Number of Vibrations per Notification:** 1, 2
- **Number of Notifications:** 1-16
- **Time Between Notifications:** 10, 22 hours

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**Ordering No.**

G0XXX 060605

**CAUTION:** FEDERAL LAW (USA) RESTRICTS THIS DEVICE TO SALE, DISTRIBUTION AND USE BY OR ON THE ORDER OF A PHYSICIAN.

Consult the User’s Manual for information on indications, contraindications, warnings and precautions.

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