

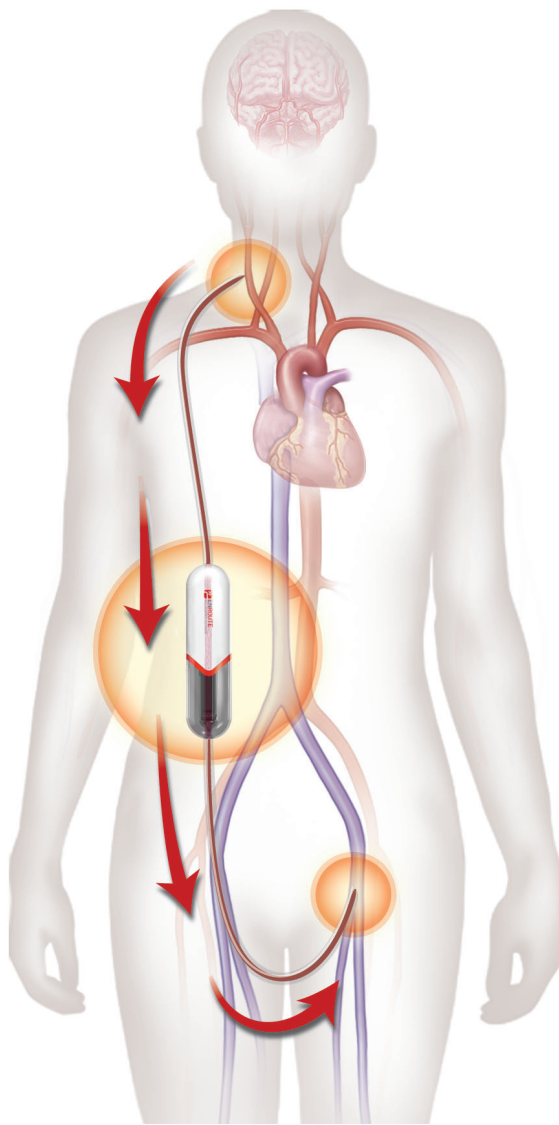


TRANSCAROTID NEUROPROTECTION SYSTEM



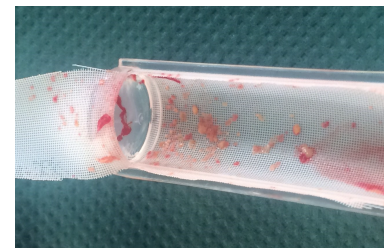
Reverse Flow Neuroprotection

The ENROUTE® Transcarotid Neuroprotection System provides direct carotid access with robust flow reversal prior to crossing the lesion for embolic protection during angioplasty and stenting. The device removes micro and macro emboli throughout the intervention for CEA-like neuroprotection in a less invasive approach.



How does it work?

The ENROUTE® Transcarotid Neuroprotection System prevents embolic debris from flowing to the brain during carotid revascularization by reversing blood flow away from the brain. The flow reversal method does not rely on a distally placed filter to capture emboli before they reach the brain. Instead, a filter in the flow controller collects both small and large debris and filtered blood is returned via a sheath in the femoral vein.



Captured embolic debris



Less risk of stroke
Less risk of MI
Less risk of CNI

A Complete Solution for TCAR

1 Transcarotid Arterial Sheath with Arterial Dilator

- Uber-flex sheath tip with 15° anterior bias
- Depth markers to aid in sheath insertion
- Removable sheath stopper

2 Flow Controller with Filter

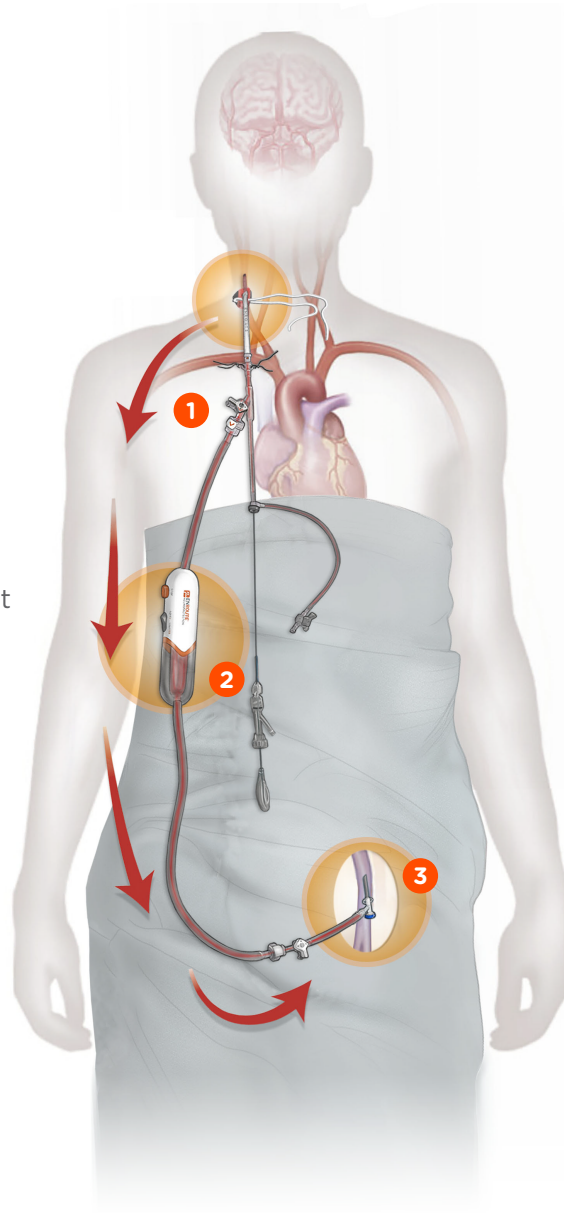
- 200µ filter designed to capture micro and macro emboli during TCAR device delivery and deployment

3 Venous Return Sheath with Venous Dilator

- 4mm radiopaque tip for visibility

4 0.035" Extra Support - J-Tip Guidewire (not shown)

- Short length designed for TCAR: 90cm
- Nitinol core, teflon coated



Ordering Information: ENROUTE® Transcarotid Neuroprotection System

Catalog Number	Components	Shipped
SR-200-NPS	- Transcarotid Arterial Sheath with Arterial Dilator - Venous Return Sheath with Venous Dilator - Flow Controller with Filter - 0.035" Extra Support, J-Tip Guidewire	1 Each

Indications for Use: The ENROUTE® Transcarotid Neuroprotection System is intended to provide transcarotid vascular access, introduction of diagnostic agents and therapeutic devices, and embolic protection during carotid artery angioplasty and stenting procedures for patients diagnosed with carotid artery stenosis and who have the appropriate anatomy described below:

- Adequate femoral venous access
- Carotid bifurcation is a minimum of 5cm above the clavicle as measured by duplex Doppler ultrasound (DUS) or computerized axial tomography (CT) angiography or magnetic resonance (MR) angiography
- Common carotid artery reference diameter of at least 6mm

Please refer to Instructions for Use for indications, contraindications, warnings, and precautions.
Caution: Federal (U.S.) law restricts this device to sale by or on the order of a physician.



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