



MAXIMIZE  
**RADIAL SOLUTIONS**  
**TO PERIPHERAL**  
CHALLENGES



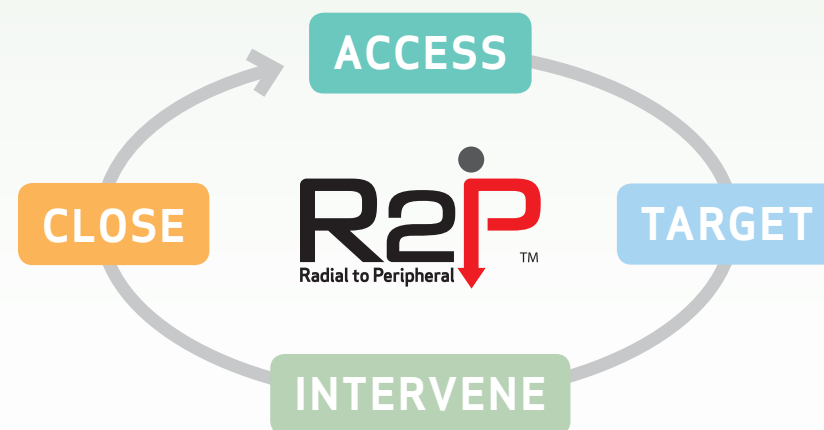
**TERUMO**  
INTERVENTIONAL  
SYSTEMS

# PUSHING BOUNDARIES

Terumo Interventional Systems is **committed to your success** with innovative procedural solutions and ongoing support for your most challenging cases.

We are relentlessly seeking new ways to help you apply effective solutions and achieve **better outcomes for more patients.**

## UTILIZE A COMPREHENSIVE **RADIAL TO PERIPHERAL** APPROACH



### Perform more peripheral procedures for more patients

From the leaders in radial access, R2P™ is the first and only portfolio of longer-length radial devices specifically designed for peripheral procedures, including above-the-knee PAD/CLI vascular interventions.

- Optimize entry site management with Slender Technology™
- Leverage the benefits associated with radial access for:
  - Quicker ambulation, improved patient comfort, and satisfaction<sup>1-3</sup>
  - Increased cath lab efficiencies and decreased overall costs per procedure<sup>4,5</sup>

#### ACCESS

Introducer Sheaths and Catheters

#### TARGET

Guidewires and Catheters

#### INTERVENE

Balloon Catheters and Stent

#### CLOSE

Radial Compression Device



## ACCESS

### Introducer Sheaths and Catheters<sup>6</sup>

Slender Technology™ reduces the device outer diameter while maintaining larger inner diameter equivalent



#### **Glidesheath Slender®** Hydrophilic Coated Introducer Sheath

- 5, 6, 7 Fr Sizes
- 10 cm and 16 cm lengths

**Proprietary thin-wall technology and hydrophilic coating** facilitate ease of insertion and removal during peripheral procedures



#### **R2P Destination Slender®** Guiding Sheath

- 6 Fr Size
- 119 cm and 149 cm lengths

**Fully hydrophilic coating** allows for smooth transition within the radial artery and Slender Technology™ provides optimal performance during peripheral procedures



#### **R2P SlenGuide™** Guiding Catheter

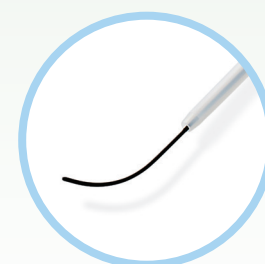
- 7 Fr Size
- 120 cm and 150 cm lengths

**Guiding catheter with distal hydrophilic coating** and Slender Technology™ for optimal performance during peripheral procedures

## TARGET

### Guidewires and Catheters<sup>6</sup>

Provides the longest reach via the radial artery for peripheral procedures



#### **Glidewire®** Hydrophilic Coated Guidewire

- 0.035" Straight, Angled, 1.5 mm and 3 mm J Tip
- 350 cm, 400 cm and 450 cm lengths

**Includes multiple procedural options** in shaft stiffness, tip shapes and wire configurations for easier vessel navigation



#### **Glidecath®** Hydrophilic Coated Catheter

- 4 Fr Size
- 150 cm length

**Offers excellent pushability and torque control** with multiple tip shapes for selectivity and access to the peripheral vasculature



#### **Navicross®** Support Catheters

- 4 Fr Size; Straight, Angled
- 135 cm and 150 cm lengths

**Double tapered tip provides the smallest crossing profile**, giving a near seamless catheter-to-guidewire transition to aid in crossing simple or complex lesions in the peripheral vasculature

## INTERVENE

### Balloon Catheters and Stents<sup>6</sup>

Rapid Exchange technology enables greater efficiency during peripheral procedures via the radial artery



#### **R2P Metacross<sup>®</sup> RX** PTA Balloon Dilatation Catheter

- 6 Fr sheath compatibility
- 3-8 mm diameter x 20-200 mm length
- 200 cm shaft length

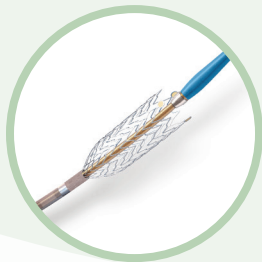
The longest 0.035" radial to peripheral capability and Rapid Exchange (RX) technology are designed to mitigate excessive device management and use of contrast media during a peripheral procedure



#### **R2P Crosstella<sup>®</sup> RX** PTA Balloon Dilatation Catheter

- 5 Fr sheath compatibility
- 2-6 mm diameter x 40-200 mm length
- 200 cm shaft length

The longest 0.018" Rapid Exchange (RX) PTA Balloon designed for use in radial to peripheral procedures



#### **R2P Misago<sup>®</sup>** RX Self-expanding Peripheral Stent

- 6 Fr sheath compatibility
- 6-8 mm diameter x 40-150 mm length
- 200 cm shaft length

The longest stent platform specifically designed for above-the-knee peripheral artery disease interventions via radial access with Rapid Exchange (RX) technology

#### Indications

The R2P™ MISAGO® RX Self-expanding Peripheral Stent is indicated to improve luminal diameter in symptomatic patients with *de novo* or restenotic native lesions or occlusions of the Superficial Femoral Artery (SFA) and/or proximal popliteal artery with reference vessel diameters ranging from 4 mm to 7 mm and lesion length up to 150 mm.

#### Important Safety Information

Do not use this device in patients who exhibit angiographic evidence of severe thrombus in the target vessel or lesion site before/after undergoing Percutaneous Transluminal Angioplasty (PTA) procedure, patients with contraindication to antiplatelet and/or anticoagulation therapy, patients who are judged to have a lesion that prevents proper placement or deployment of the stent, a lesion that is within an aneurysm or an aneurysm with a proximal or distal segment to the lesion, or a lesion through which a guide wire cannot pass. This device should only be used by a physician who is familiar with, and well trained in, Percutaneous Transluminal Angioplasty (PTA) techniques, stent implantation, and transradial access.

**RX ONLY.** Refer to the product labels and package insert for complete warnings, precautions, potential complications, and instructions for use.

## CLOSE

### Radial Compression Device<sup>6</sup>

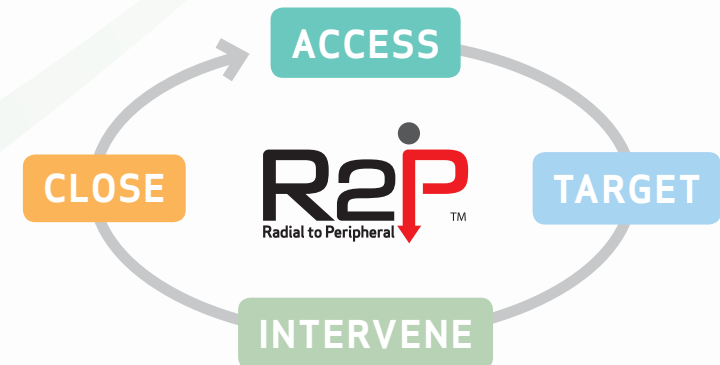
Enables precise pressure to the artery following radial procedures



#### **TR Band<sup>®</sup>** Radial Compression Device

- Regular 24 cm and Long 29 cm




The #1 preferred radial hemostasis device on the market provides a more precise way of applying pressure to the radial artery



We continue to advance our product portfolio to enable radial access for more peripheral procedures.



For complete product ordering codes,  
refer to the Radial to Peripheral Ordering Form.

**FIND OUT MORE**  Phone: 800.862.4143  [terumo.com](http://terumo.com)  Fax: 800.411.5870

**References:**

**1.** Rao SV, Tremmel JA, Gilchrist IC, et al; Society for Cardiovascular Angiography and Intervention's Transradial Working Group. Best practices for transradial angiography and intervention: a consensus statement from the Society for Cardiovascular Angiography and Intervention's Transradial Working Group. *Catheter Cardiovasc Interv.* 2014;83(2):228-236. **2.** Cooper CJ, El-Shiekh RA, Cohen DJ, et al. Effect of transradial access on quality of life and cost of cardiac catheterization: a randomized comparison. *Am Heart J.* 1999;138(3):430-436. **3.** Jolly SS, Yusuf S, Cairns J, et al; RIVAL Trial Group. Radial versus femoral access for coronary angiography and intervention in patients with acute coronary syndromes (RIVAL): a randomised, parallel group, multicentre trial. *Lancet.* 2011;377(9775):1409-1420. **4.** Jolly SS, Amlani S, Hamon M, Yusuf S, Mehta SR. Radial versus femoral access for coronary angiography or intervention and the impact on major bleeding and ischemic events: a systematic review and meta-analysis of randomized trials. *Am Heart J.* 2009;157(1):132-140. **5.** Caputo RP, Tremmel JA, Rao S, et al. Transradial arterial access for coronary and peripheral procedures: executive summary by the Transradial Committee of the SCAI. *Catheter Cardiovasc Interv.* 2011;78(6):823-839. **6.** Data on file.

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