

Deployment sequence

Zenith[®] Dissection

ENDOVASCULAR GRAFT AND STENT



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Preparation/flush

Zenith[®] TX2[®] Dissection Endovascular Graft with Pro-Form[®] (ZDEG)
and Zenith[®] TX2[®] Dissection Endovascular Stent (ZDES)

- Remove the yellow-hubbed shipping stylet (from the inner cannula).
- Remove the cannula protector tube (at the handle).
- Remove the Peel-Away[®] sheath from the back of the valve assembly.

Preparation/flush

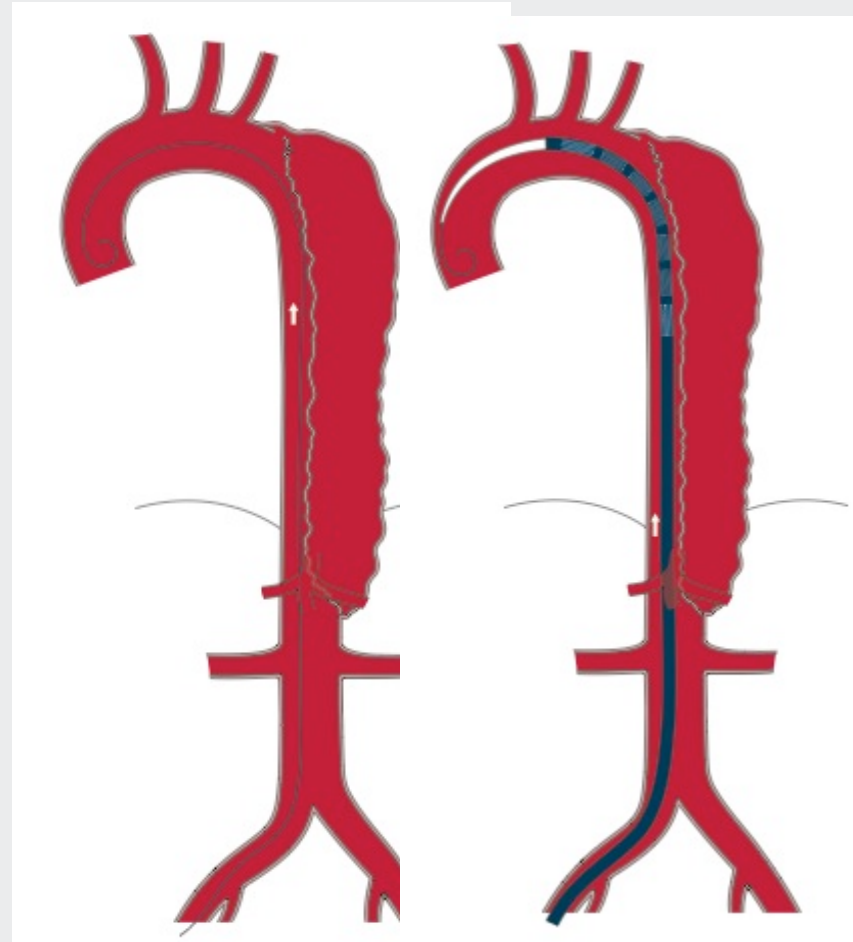
Zenith[®] TX2[®] Dissection Endovascular Graft with Pro-Form[®] (proximal component) and Zenith[®] TX2[®] Dissection Endovascular Stent

- Elevate the distal tip of the system and flush the system with heparinized saline:
 - Flush the hemostatic valve until fluid emerges from the sideport.
 - Attach a syringe with heparinized saline to the hub of the inner cannula and flush until fluid exits the distal tip.
 - Soak gauze pads in saline solution and use them to wipe the Flexor[®] Introducer Sheath on the TX2 proximal component and Flexor[®] Introducer Sheath on the Dissection stent to activate the hydrophilic coating. Hydrate both sheath and dilator liberally.

Placement

Zenith® TX2® Dissection Endovascular Graft with Pro-Form® (proximal component)

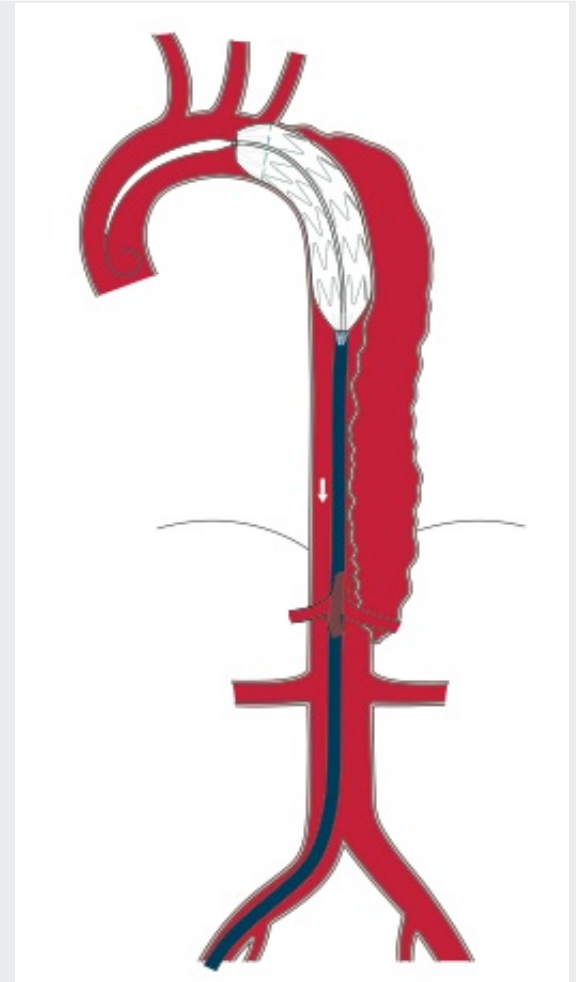
- Introduce the system over the Lunderquist® Double Curved Extra-Stiff Wire Guide and advance it until the desired graft position is reached.
- Ensure that the Captor® Hemostatic Valve on the Flexor® Introducer Sheath is turned to the open position.



Placement

Zenith® TX2® Dissection Endovascular Graft with Pro-Form® (proximal component)

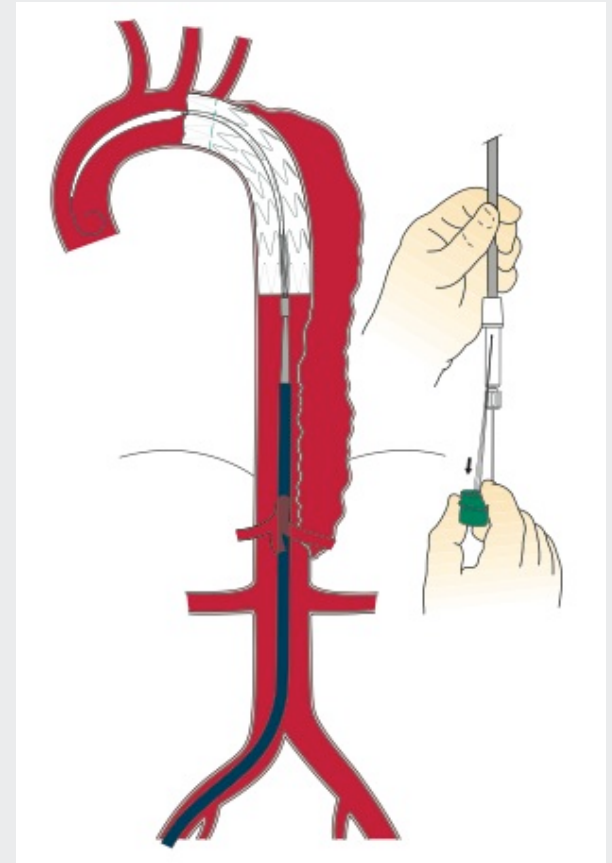
- Stabilize the gray positioner and withdraw the sheath until the graft is fully expanded and the valve assembly docks with the control handle.



Placement

Zenith® TX2® Dissection Endovascular Graft with Pro-Form® (proximal component)

- Loosen the safety lock from the green trigger-wire release mechanism. Withdraw the trigger wire in a continuous movement until the proximal end of the graft opens. Do not rotate the green trigger wire knob. Withdraw the trigger wire completely to release the distal attachment from the introducer.

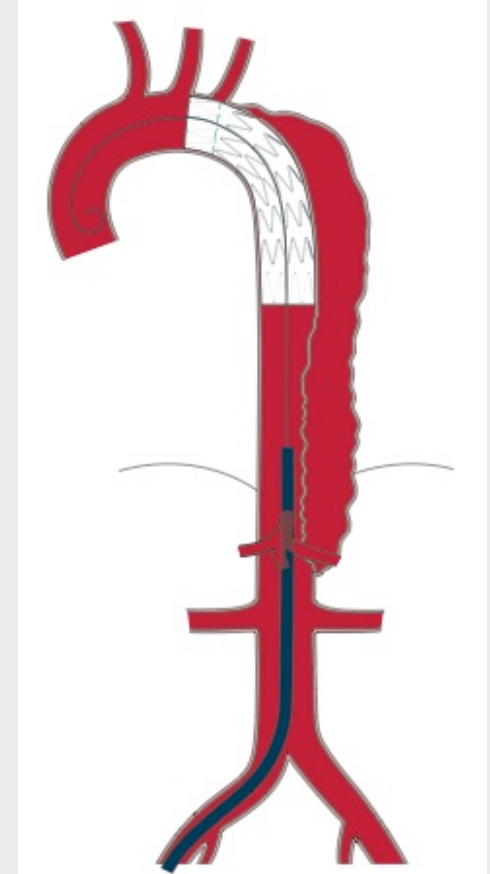


Placement

Zenith® TX2® Dissection Endovascular Graft with Pro-Form® (proximal component)

- Remove the gray positioner, leaving the sheath and wire guide in place.

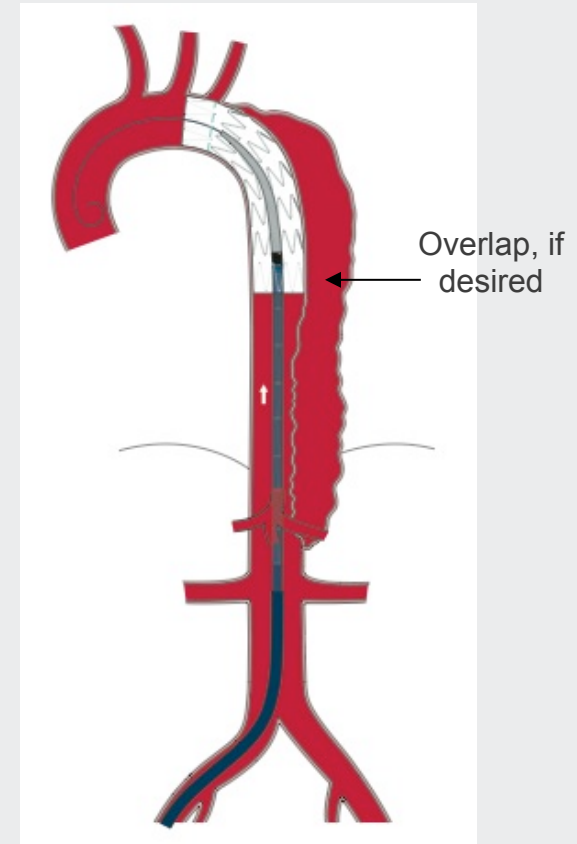
NOTE: Leave only the introduction system sheath in place if intending to use a Dissection stent.



Placement

Zenith[®] Dissection Endovascular Stent

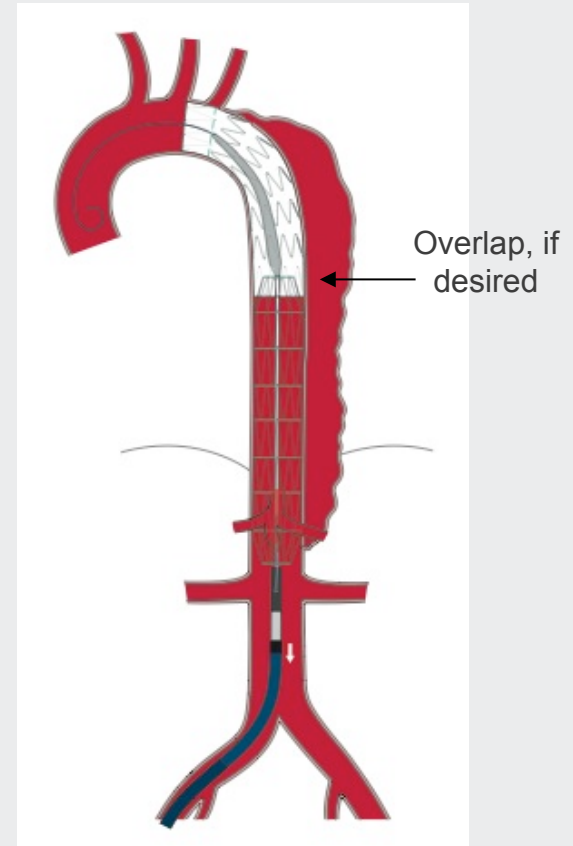
- Introduce the dissection introduction system over the wire guide through the sheath of the TX2 proximal component.
 - During coaxial introduction of the introduction sheath inside the previously placed graft components, take care not to inadvertently advance the outer sheath. Dislodgement of the graft components may occur.
 - Verify wire guide position in the aortic arch. Ensure correct stent position.
 - Ensure that the Captor[®] Hemostatic Valve on the introduction sheath is turned to the open position.
- Just before withdrawing the sheath to deploy the stent, unlock the black cap on the anti-torque device by rotating it counterclockwise. The anti-torque device is now released from the gray dilator and fixed only to the Captor[®] Hemostatic Valve.



Placement

Zenith® Dissection Endovascular Stent

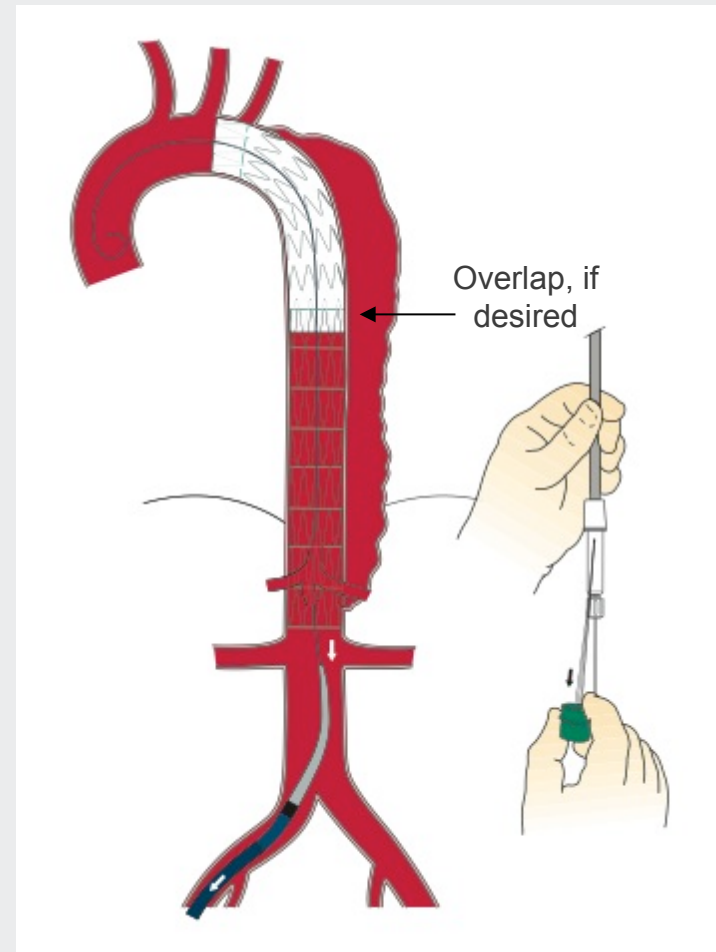
- Stabilize the gray positioner and begin withdrawing the sheath until the stent is fully expanded and the valve assembly docks with the control handle.



Placement

Zenith® Dissection Endovascular Stent

- Loosen the safety lock from the green trigger-wire release mechanism. Withdraw the trigger wire in a continuous movement until the proximal end of the device opens. Continue to withdraw the trigger wire in a continuous movement until the distal end opens. Withdraw the trigger wire completely.
- Stabilize the sheath and remove the inner introduction system entirely, leaving the sheath and wire guide in place.



Perform final flush and angiography

Zenith® Dissection Endovascular Stent

- Position a pigtail or straight catheter just above the level of the deployed endovascular graft and perform angiography to verify that:
 - The graft is in the correct position
 - The arch vessels and the celiac artery are patent

