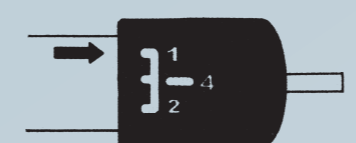


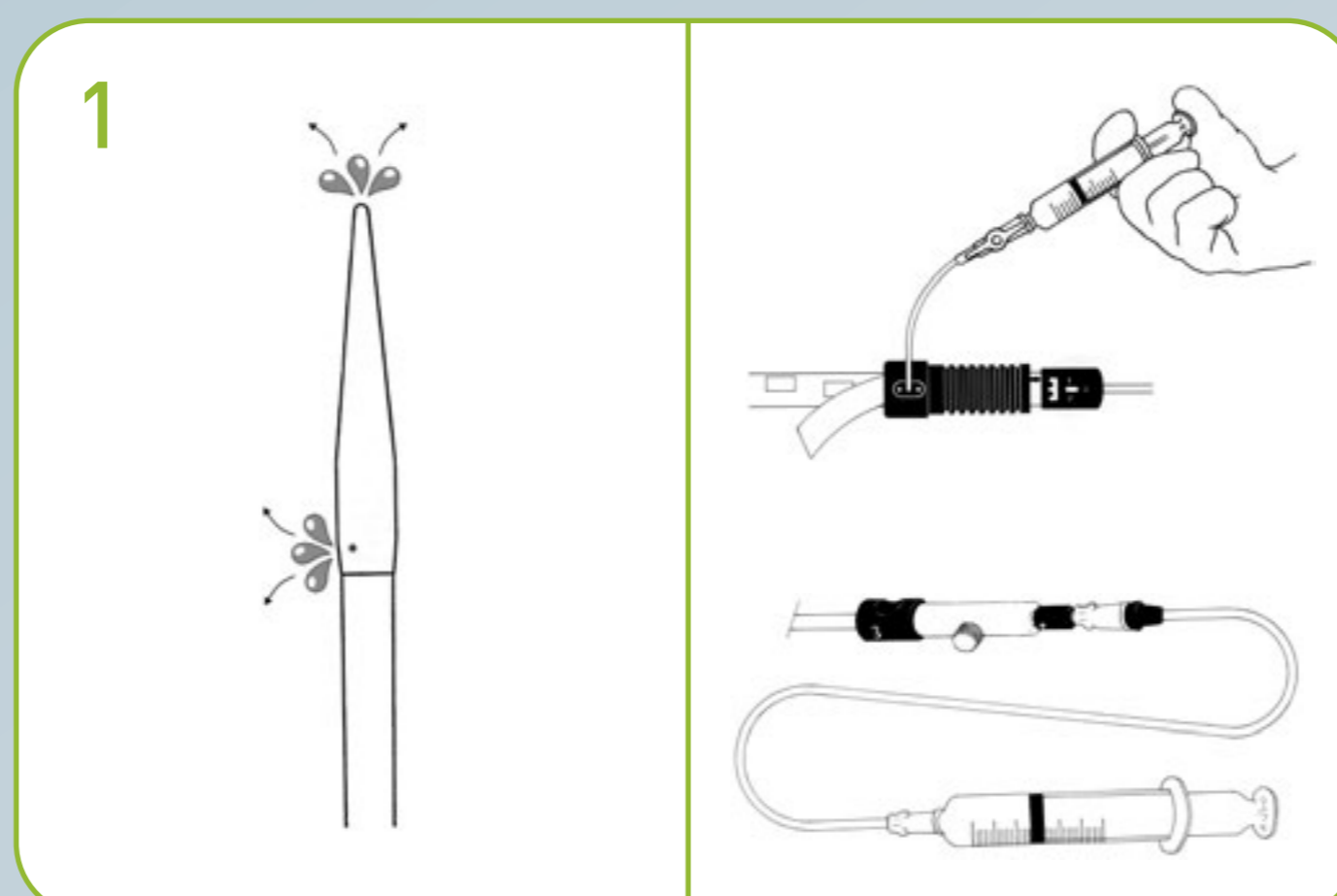
RELAY™ THORACIC STENT-GRAFT

Deployment technique

Preparation

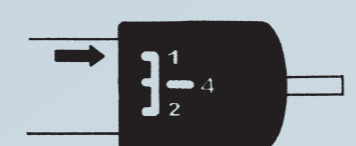


Position 1

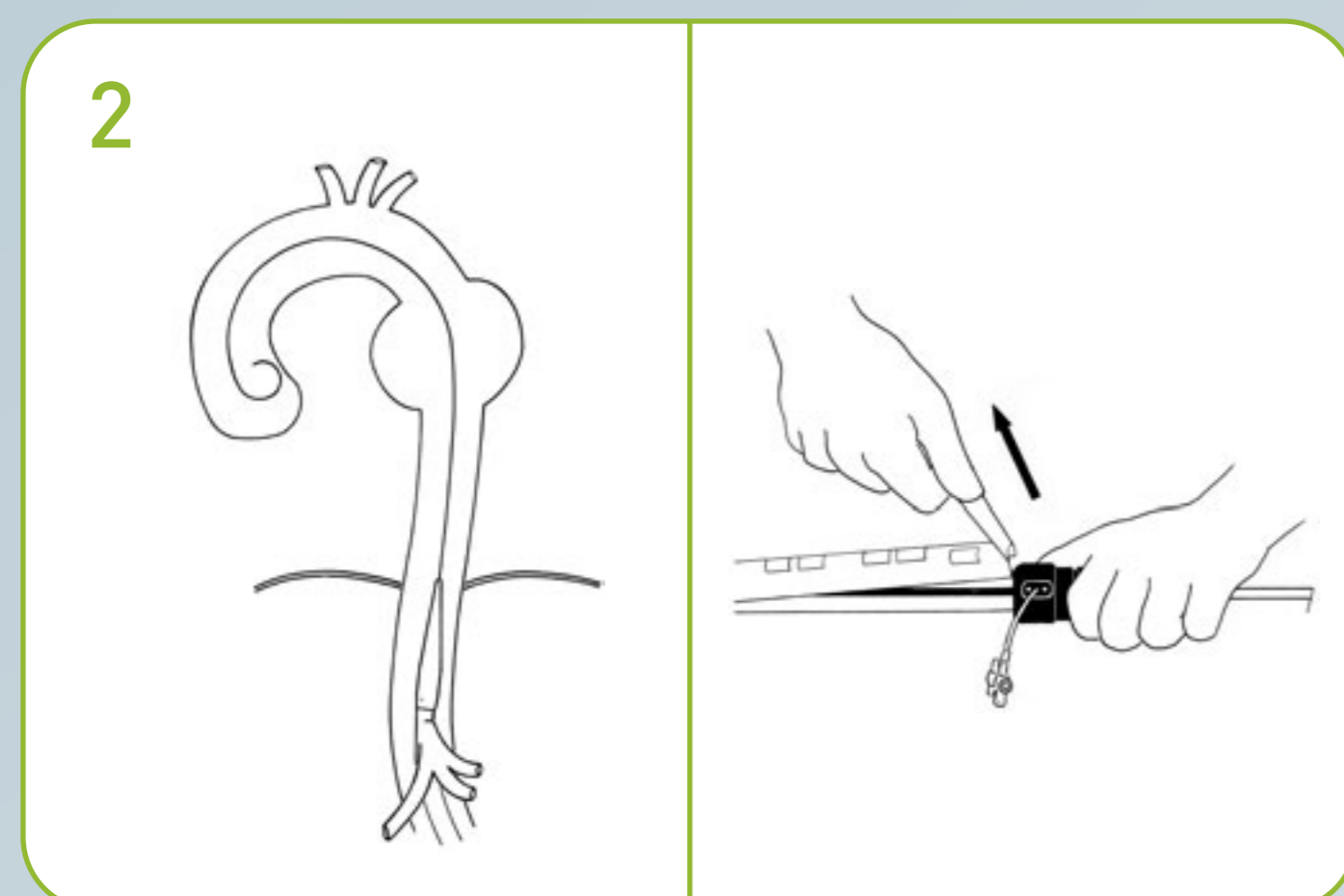


Flush the delivery system with heparinized saline through the Flush Ports. Ensure that saline exits the tip hole and close the flush port valve under pressure. After flushing the Guide wire Lumen remove the extension tubing

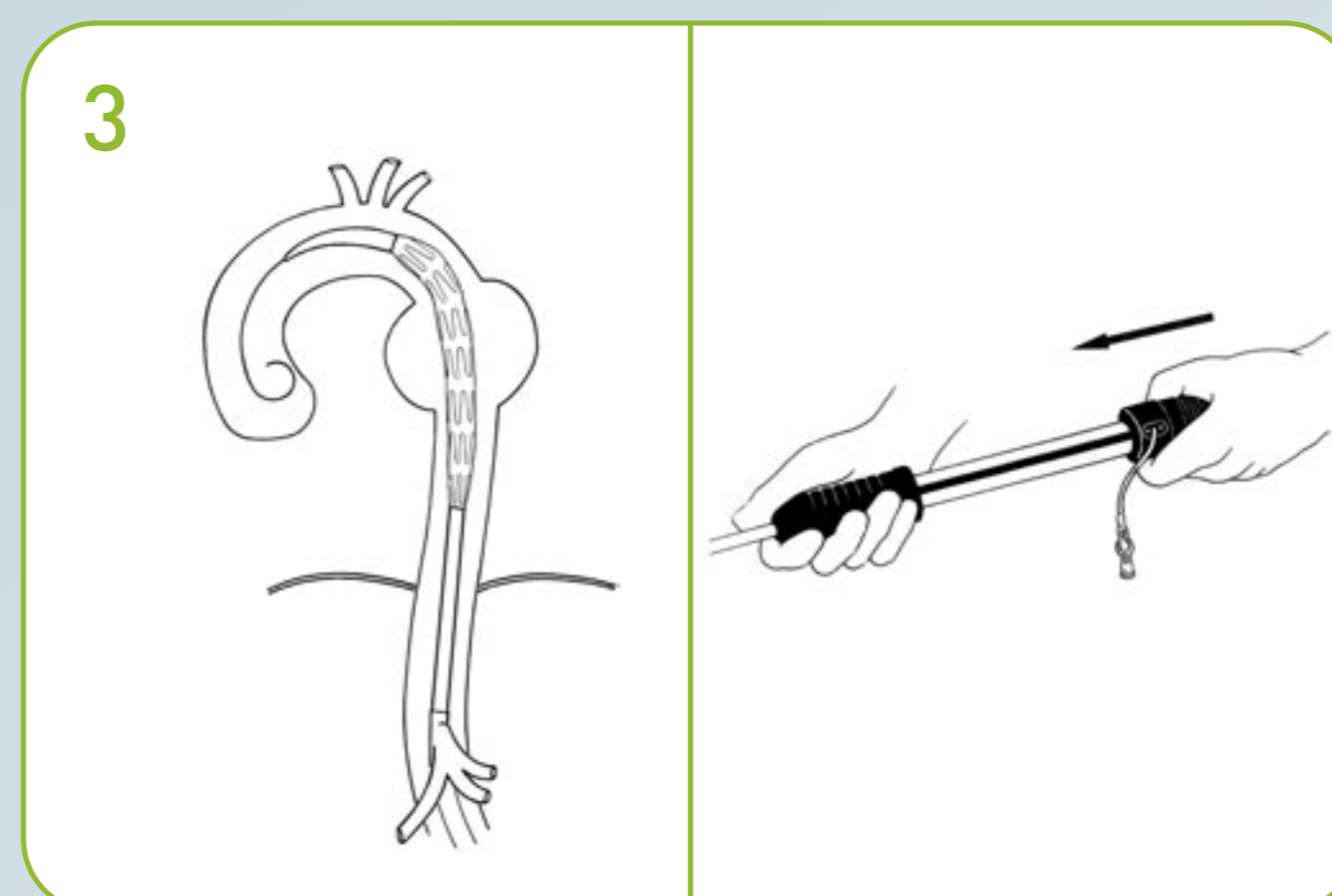
Advancement



Position 1

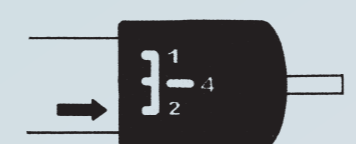


Advance the introducer sheath into the artery over the guide wire, approximately to the level of the celiac axis. Remove the Safety Retainer from the main body.

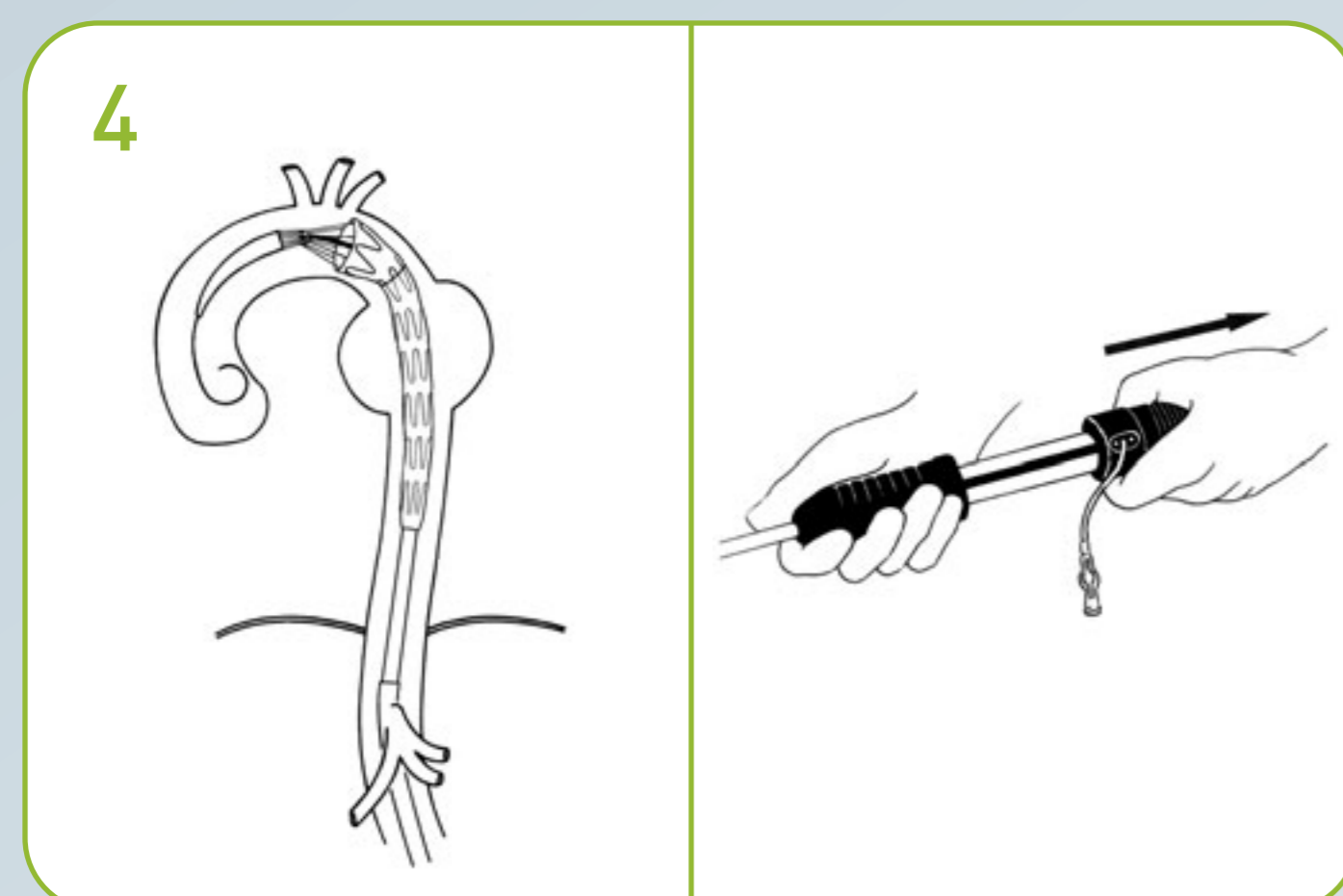


While holding the Stationary Grip, push the Deployment Grip forward until the Inner Secondary Sheath exits the Outer Primary Sheath and distal stent marker bands can be seen approximately 2 cm out of Primary Outer Sheath. **IMPORTANT:** If the device is to be implanted in a curved section of an aorta, verify that the D-Shaped marker and the Spiral Support Strut markers face the greatest curvature.

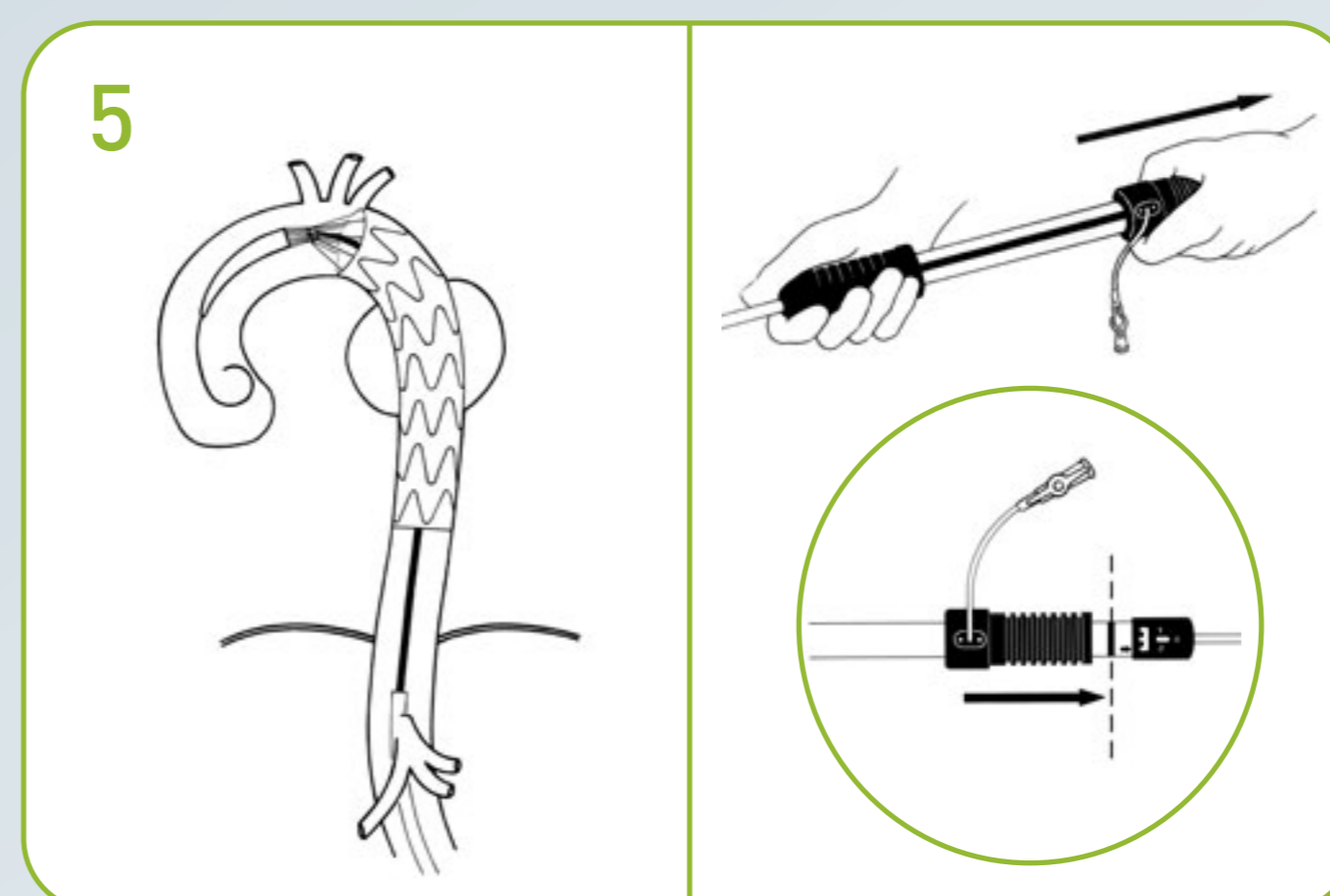
Deployment



Position 2

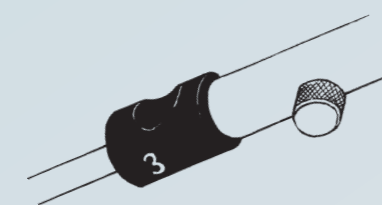


While holding the Stationary Grip stationary, retract the Deployment Grip by pulling down the Inner Secondary Sheath and exposing the bare stent and the first covered stent.

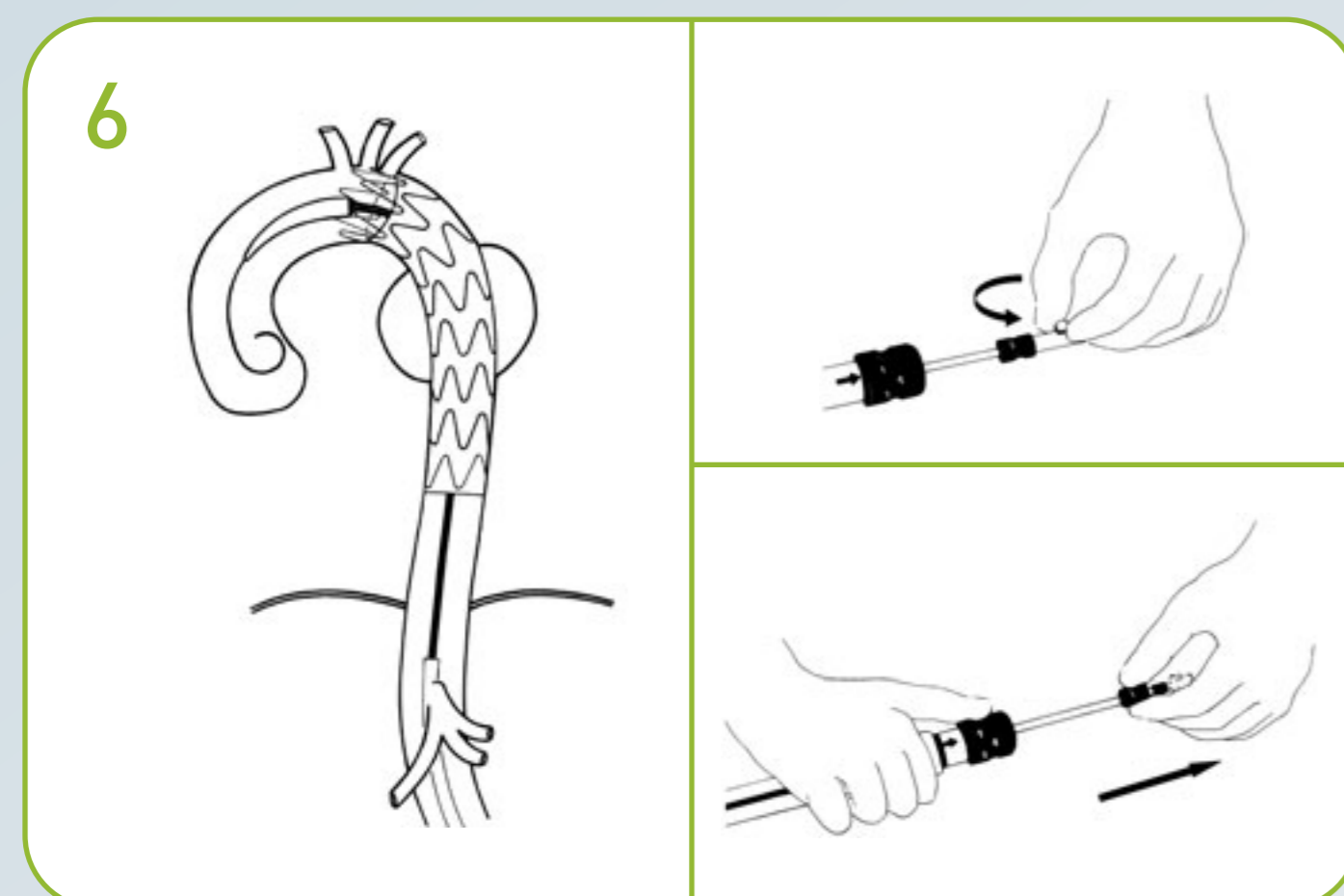


Completely retract the Inner Secondary Sheath by holding the Stationary Grip still and retracting the deployment grip with one continuous motion without stopping until the stent-graft is fully deployed. Continue to retract the Deployment Grip until it meets the black circular ring marker on the proximal end of the Main Body.

Release

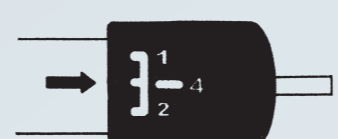


Position 3

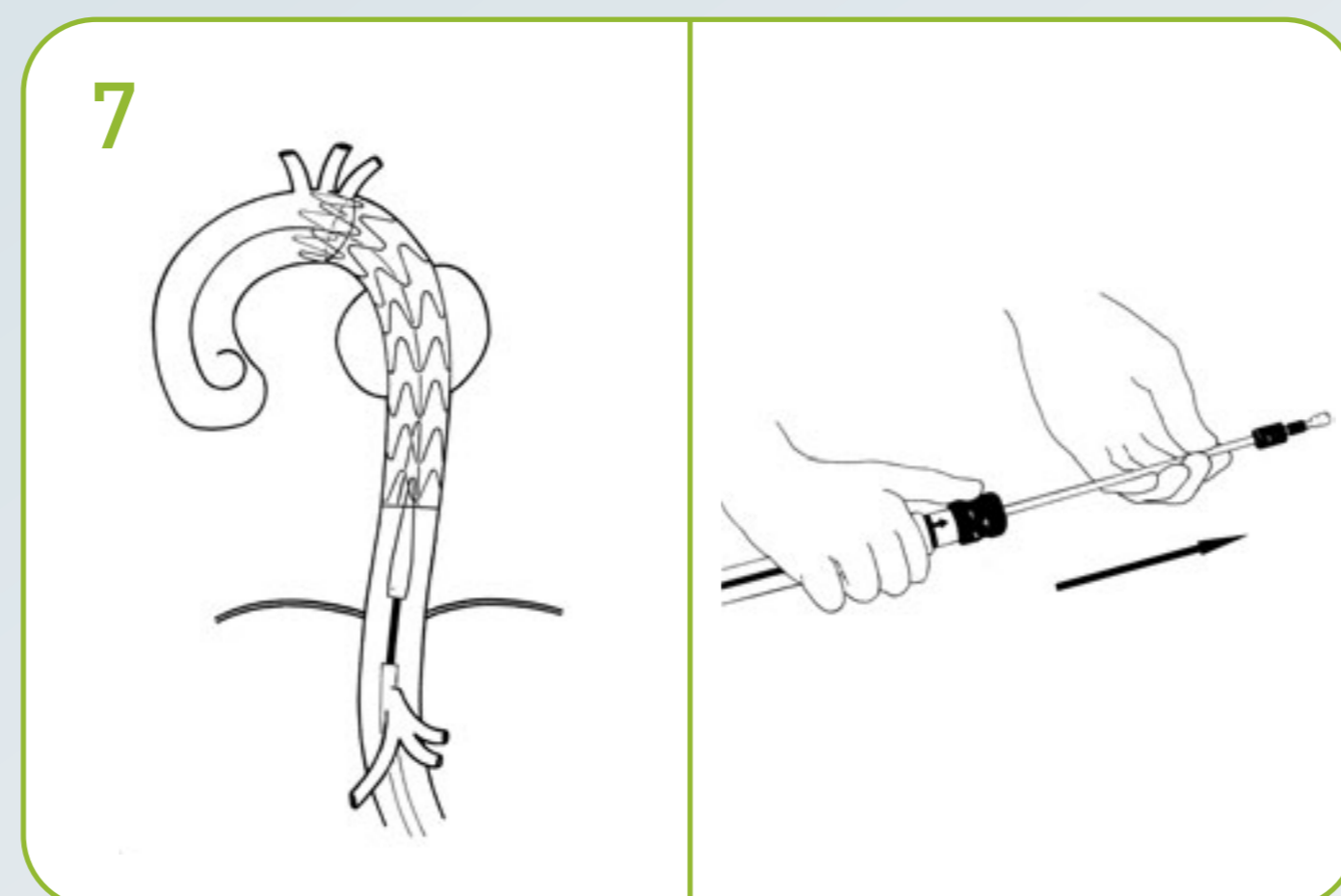


Loosen the thumbscrew by rotating counterclockwise 3-4 turns. Release the bare spring by pulling the Apex Release Grip toward the Guide wire Luer. The stent-graft is now in final position.

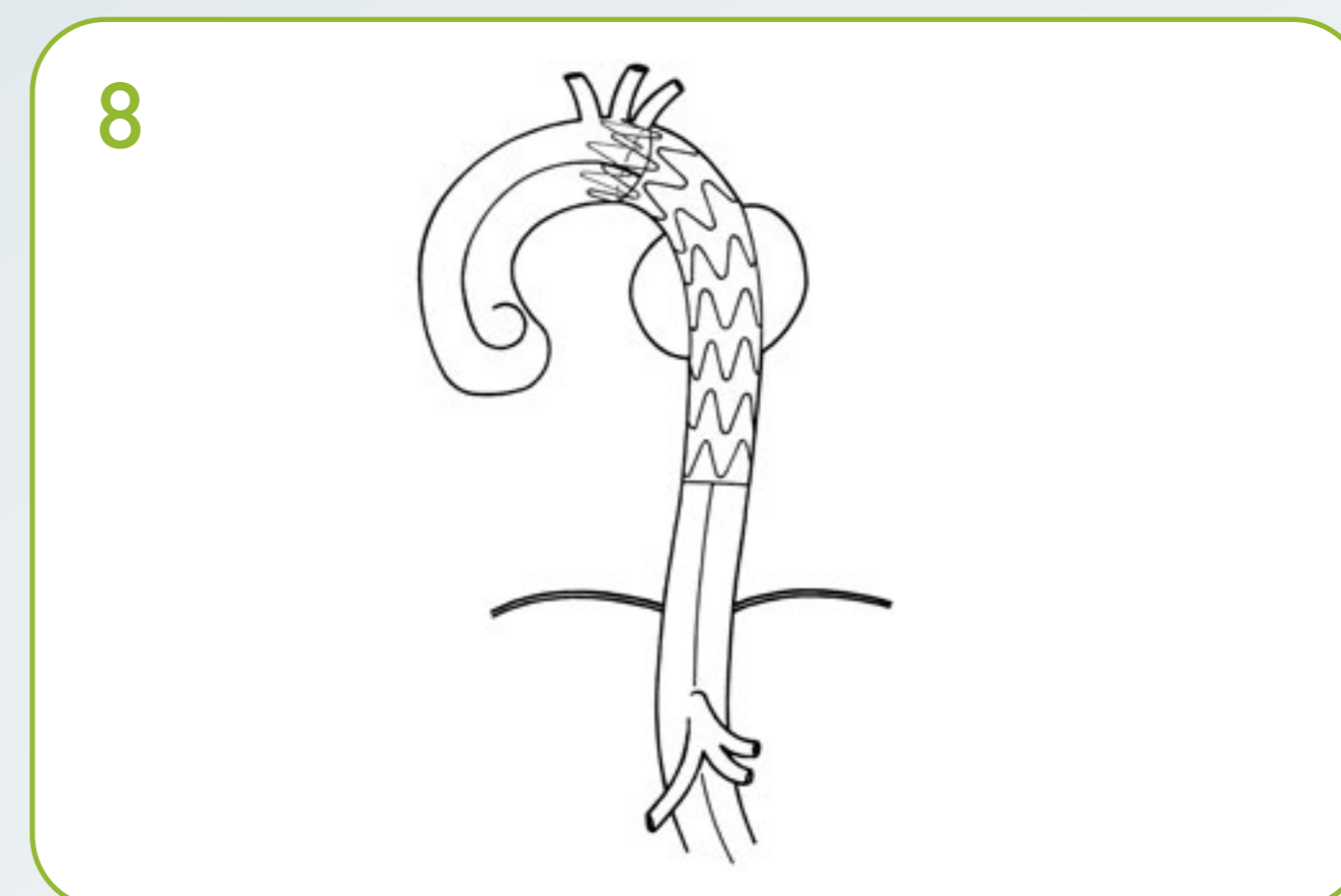
Removal



Position 4



Retract the Stainless Steel Rod by pulling it completely distal, allowing the tip to rejoin the outer sheath.



Perform a final angiogram to confirm successful lesion exclusion.