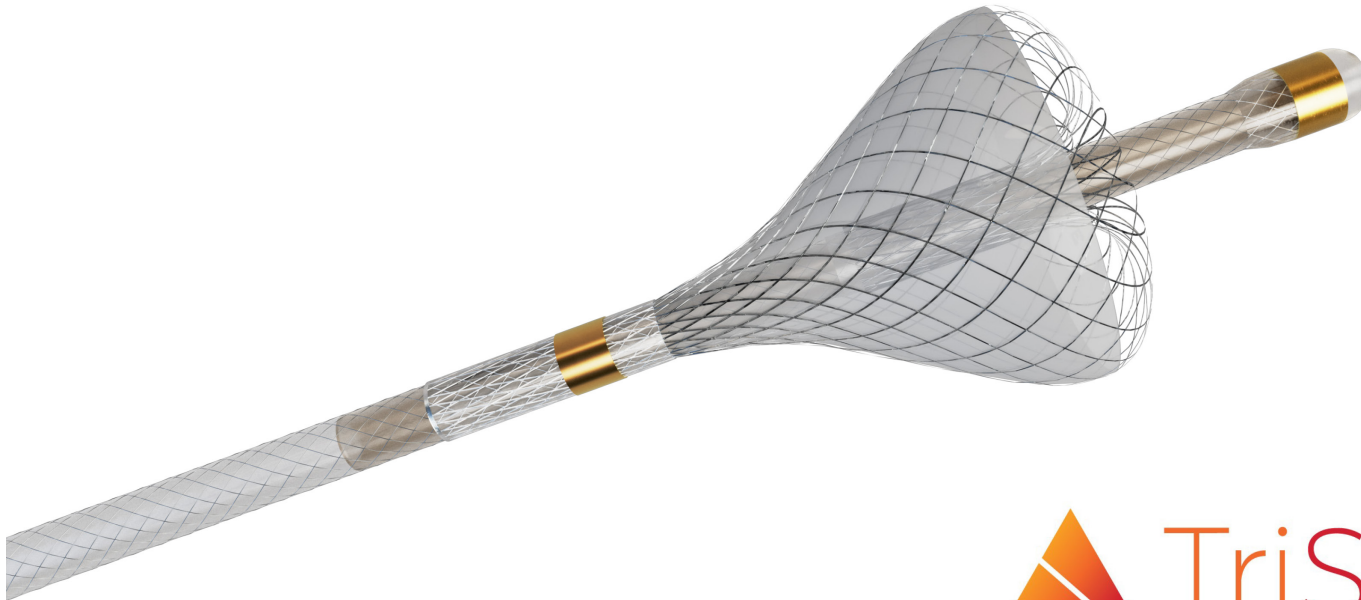




with SmartValve® Technology

Instructions for Use



 Manufactured by:
TriSalus Life Sciences
6272 W. 91st Avenue
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This product may be protected by one or more patents. For patent information, please see www.trisaluslifesci.com/patents

DWG-0815-00 R04

TriSalus™ TriNav® LV Infusion System: Instructions for Use

Sterile. Sterilized with ethylene oxide gas. Single use only. Nonpyrogenic. Do not resterilize.

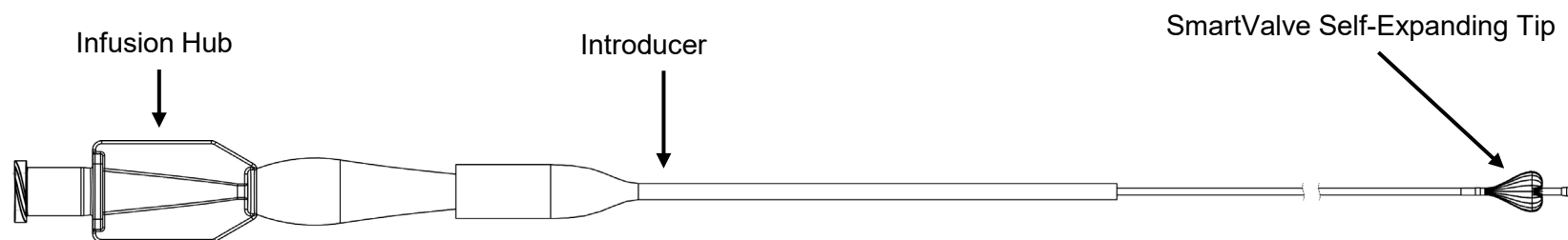
Caution: Federal (USA) law restricts this device to sale by or on the order of a physician.



CAUTION: CAREFULLY READ ALL INSTRUCTIONS PRIOR TO USE. FAILURE TO OBSERVE ALL WARNINGS AND PRECAUTIONS MAY RESULT IN DAMAGE TO THE DEVICE WHICH MAY NECESSITATE INTERVENTION OR RESULT IN SERIOUS ADVERSE EVENTS.

DESCRIPTION: The TriSalus™ TriNav® LV Infusion System is a 0.025" lumen microcatheter with SmartValve® Technology, a self-expanding tip at the distal end. The TriNav LV (Figure 1) serves as the conduit for physician-specified agents such as contrast agents, flush solutions, and embolic beads. It is compatible with standard guidewires with outer diameter ≤ 0.018 " (0.46 mm), guiding catheters with inner diameter ≥ 0.047 " (1.19 mm), embolic hydrogel particles ≤ 700 μm and glass microspheres ≤ 110 μm . The TriNav LV has a PTFE inner liner to provide a lubricious surface for passage of physician-specified agents and other accessory devices. The device is hydrophilically coated. An optional hemostasis valve (HV) is included.

FIGURE 1. TRINAV LV INFUSION SYSTEM DIAGRAM



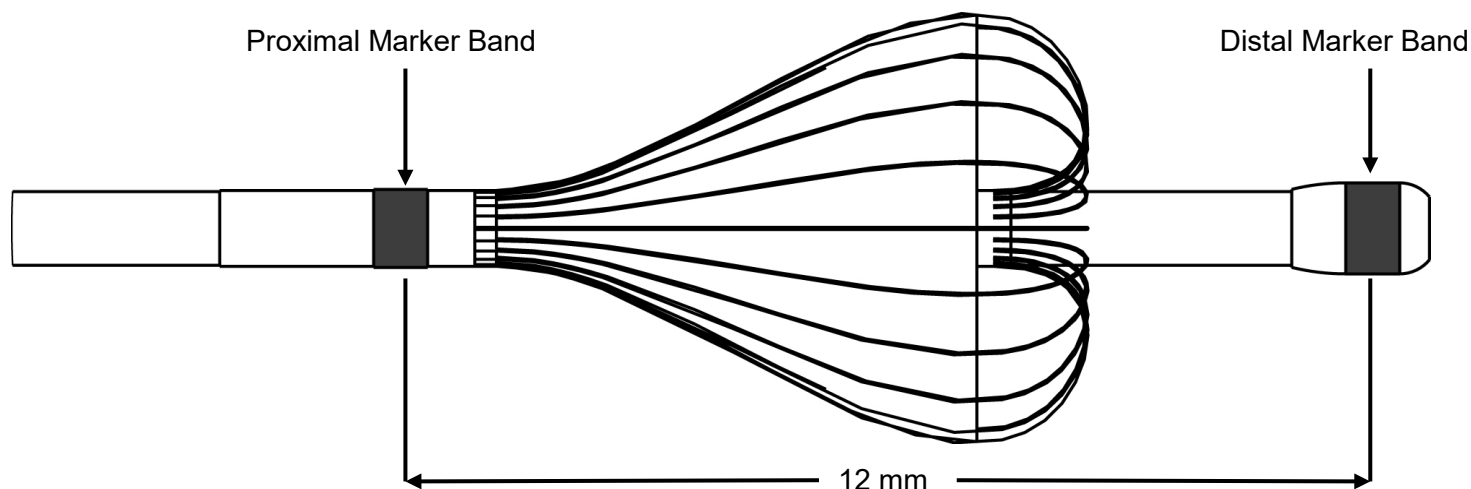
The soft, pliable SmartValve self-expanding tip (Figure 2) is designed to improve infusion efficiency while maintaining antegrade flow during infusion. The SmartValve is self-expanding when positioned correctly in the appropriately sized vessel. The TriNav LV is recommended for use in vessels 3.5 mm to 5.0 mm in diameter.

There are two radiopaque markers located at the distal end of the TriNavLV to aid in positioning of the SmartValve self-expanding tip.

Package Contents:

- (1) TriNav LV Infusion System
- (1) Hemostasis Valve

FIGURE 2. CLOSE-UP OF THE SMARTVALVE SELF-EXPANDING TIP



Device Selection Guide:

The following may help with device selection and is provided for convenience only. Clinical judgement should always be employed by the practitioner.



- TriNav LV: Designed for larger vessels, TriNav LV features a catheter with an expanded inner diameter, suited for cases with treatments in vessels 3.5 mm to 5.0 mm, cases with hydrogel particles up to and including 700 μ m or when enhanced flow rates are desired.

1. **Indications for Use:** The TriSalus TriNav LV Infusion System is intended for use in angiographic procedures. It delivers radiopaque media and therapeutic agents to selected sites in the peripheral vascular system.
2. **Contraindications:** The TriSalus TriNav LV Infusion System is not intended for use in the vasculature of the central nervous system (including the neurovasculature) or central circulatory system (including the coronary vasculature).

3. Warnings

- Do not use the product after the “Use By” date specified on the package.
- Only physicians possessing sufficient training, skill and experience in the principles, clinical applications, complications, and side effects commonly associated with similar or same techniques should perform vascular interventional procedures.
- Do not use a TriNav LV when the integrity of the sterile packaging has been compromised.
- Inspect the TriNav LV prior to use. If the TriNav LV appears damaged, replace with another device.
- Do not heat, bend or attempt to shape the distal end of the TriNav LV. It may result in damage of the hydrophilic coating or damage to the TriNav LV.
- The TriNav LV should only be manipulated under high-quality fluoroscopic observation when within the vascular system.
- Do not use glue or other liquid embolic agents with the TriNav LV as ingress of the solution into the expandable tip may cause damage to the SmartValve.
- Do not deploy embolization coils through the TriNav LV.
- Do not advance the TriNav LV near or through implanted vascular devices.
- Do not advance, retract, or torque the TriNav LV against resistance as this could cause vessel trauma, device damage or breakage.
- Do not torque or excessively rotate the TriNav LV against resistance as separation of the device can occur at greater than 5 rotations with the distal tip restrained.
- Do not use a power injector to infuse agents other than contrast media, as the TriNav LV may become blocked.
- The maximum dynamic injection pressure during power injection should not exceed 8274 KPa / 1200 psi / 82 atm/bar. The static pressure should not exceed 2068 KPa / 300 psi / 20 atm/bar. Static pressure in excess of this maximum may result in device rupture.
- If flow through the TriNav LV becomes restricted, do not attempt to clear the TriNav LV lumen by infusion or over-pressurization. Excessive pressure could dislodge a clot or could cause the TriNav LV to rupture, potentially resulting in patient injury. Identify and resolve the cause of the blockage or replace with a new device before resuming infusion.

4. Precautions

- Do not store at extreme temperatures and humidity. Avoid direct sunlight.
- TriNav LV is intended for single patient use only. Do not re-sterilize and / or reuse.
- Handle the TriNav LV carefully and avoid contact with sharp instruments, plastic fittings, or abrasive surfaces that may damage the device.
- Maintain a continuous heparinized saline flush through the guide catheter to achieve optimal performance and prevent or reduce the risk of thrombus formation on the TriNav LV and SmartValve. The use of systemic heparinization to reduce the risk of thromboembolic complications should be considered for some patients, such as those with known hypercoagulable conditions.
- The surface of the distal portion of the TriNav LV and the SmartValve must be completely hydrated with heparinized saline to remain lubricious. Keep these areas hydrated prior to and during use.
- Minimize handling of the SmartValve to avoid damaging it.
- Always use the provided introducer to insert the TriNav LV into the guide catheter to avoid damaging the SmartValve.

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- Monitor the position of the TriNav LV tip under high quality fluoroscopic guidance using the two radiopaque marker bands located at either end of the SmartValve (see “Proximal Marker Band” and “Distal Marker Band” in Figure 2).
- Do not expose the TriNav LV to organic solvents (e.g. alcohol) as structural integrity and / or function of the device may be impaired.

5. Recommended Accessories

- Appropriate guide catheter with inner diameter ≥ 0.047 " (1.19 mm)
- Introducer sheath
- ≤ 0.018 " straight tip or curved tip guidewire
- Hemostasis Valve
- Heparinized saline or equivalent flushing solution
- Luer lock syringes

6. Adverse Events: Possible complications associated with angiographic procedures (either during or after the procedure) include, but are not limited to, the following:

- Access site complications
- Inability to treat
- Leak of therapeutic agents
- Aneurysms
- Vessel dissection or perforation
- Vascular thrombosis
- Embolism
- Necrosis
- Infection
- Creation of vascular shunts
- Non-target delivery of therapeutic agents
- Allergic reaction or hypersensitivity
- Vasospasm

7. Directions for Use

Anatomic Assessment for Use of SmartValve

- The recommended target vessel diameter for the TriNav LV SmartValve is 3.5 to 5.0 mm. Pre-procedural review of imaging and potential target vessel diameter measurement is recommended.

Preparation

- Remove the sterile pouch from the box and inspect for damage. If there is any damage to the pouch or the TriNav LV, discard and replace with a new sterile device.
- Place the appropriate introducer sheath and guide catheter using standard percutaneous technique.
- Carefully open the sterile pouch and remove the hoop from the pouch. Employ aseptic technique during removal of the TriNav LV from the packaging and during use.

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- If desired, remove the included hemostasis valve and flush with heparinized saline. Attach the hemostasis valve to the guiding catheter to allow for continuous flush of the guide catheter with heparinized saline.
- Prime the TriNav LV by flushing the infusion hub with heparinized saline until droplets of saline appear out of the distal tip.
- Prepare an appropriately sized guidewire according to the manufacturer's instructions for use.
- Carefully insert the guidewire into the infusion hub.
- Carefully remove the infusion hub from the hub clip and remove the TriNav LV and the inserted guidewire from the hoop. Keep the clear, plastic introducer on the TriNav LV when removing the TriNav LV from the hoop.
- Inspect the TriNav LV and SmartValve thoroughly to ensure no kinks or damage. If there is any damage, replace with a new sterile device.
- Immerse the TriNav LV in a basin of heparinized saline to hydrate the outer surface.
- Ensure that the outer surface of the TriNav LV remains hydrated when not in use.

SmartValve (Use/Operation)

- Throughout the procedure, confirm the guide catheter is fully hydrated to reduce potential for clotting or trapped air.
- A flush of heparinized saline through the guide catheter throughout the procedure is recommended.

Positioning

Note: It is important to adequately flush the infusion lumen of the TriNav LV throughout the procedure to prevent backflow.

- Confirm the guide catheter lumen is fully hydrated prior to inserting the TriNav LV.
- Carefully advance the provided introducer over the SmartValve to facilitate insertion into the hemostasis valve and guide catheter hub.
- Insert the introducer through the hemostasis valve and into the hub of the guide catheter. Carefully advance the TriNav LV through the introducer and into the guide catheter.
- Withdraw the introducer out of the hemostasis valve.
- Tighten the hemostasis valve around the TriNav LV to prevent backflow while still allowing for movement of the TriNav LV. Avoid overtightening as it may damage the TriNav LV or prevent proper movement.
- Track the TriNav LV over the guidewire to target location.
- Contrast injections can be used to determine wall apposition and presence of antegrade flow during delivery and repositioning.

Warning: Do not advance, retract, or torque the TriNav LV against resistance as this could cause vessel trauma, device damage or breakage. If resistance is encountered while navigating the TriNav LV, assess for vasospasm and treat accordingly. Then flush the infusion lumen and gently attempt to navigate again. If resistance is still encountered, carefully pull the TriNav LV back into the guide catheter and remove from the patient.

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Diagnostic / Embolic Infusion

- Remove the guidewire. Inject with contrast to confirm infusion location and apposition of the SmartValve to the vessel wall under fluoroscopy. If repositioning is needed, reinsert the guidewire and reposition as needed.
Note: Always inject contrast through the infusion hub to confirm location prior to infusion. Confirm that contrast can be injected freely without excess pressure prior to infusion of embolic agents.
- Confirm antegrade flow. If antegrade flow is less than desired, flush infusion hub of the TriNav LV, reposition as needed and reassess antegrade flow.
- Once positioned in the desired location is confirmed, tighten the hemostasis valve to prevent movement of the TriNav LV. Avoid overtightening.
- Adequately flush the TriNav LV with heparinized saline prior to initial introduction of therapeutic agents.
- If vasospasm is present in target vasculature, treat accordingly prior to infusing therapeutic agents.
- Infuse diagnostic, embolic or therapeutic agents according to the manufacturer's Instructions for Use.

Device Retraction

- Flush the hemostasis valve on the guide catheter.
- Open the hemostasis valve on the guide catheter.
- Under fluoroscopic guidance, withdraw the TriNav LV from the guide catheter.
Warning: Do not retract the SmartValve against resistance as this could cause vessel trauma and / or device damage or breakage. If resistance is encountered, adequately flush the hemostasis valve on the guide catheter and carefully attempt to withdraw again.
- If the TriNav LV will be used again within the same procedure, flush the infusion hub, and keep it soaked in heparinized saline solution. Do not leave the SmartValve collapsed in the introducer for an extended period of time.
- After use, dispose in accordance with hospital, administrative and/or local government policy.
Caution: This device is intended for single patient use only. Do not re-sterilize and / or reuse.

Instructions for Using a Power Injector

A power injector can be used to infuse contrast media through the TriNav LV. The flow rate depends upon factors such as the viscosity of the contrast media, which varies with the type and temperature of the media, the model and setting of the power injector, and how the injector is connected to the device. The observed flow rate values indicated below are for reference only.

Product	Inner Diameter	Usable Length	Dead Space Volume	Flow Rate at 1200 psi / 8274 kPa
TriNav LV	0.025"	120 cm	0.52 mL	3.6 mL/sec
		150 cm	0.61 mL	3.3 mL/sec

Infusion Medium: Omnipaque 300 (Iodine 300 mg/mL), Temperature 37 °C, Viscosity: 6.3 cP.

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Label Symbols



Do not use if
package is
damaged



Maximum
Guidewire



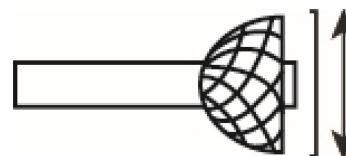
Hemostasis
Valve / Tuohy
Borst Adapter
Included



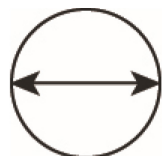
Not made
with natural
rubber latex



Maximum
Dynamic
Injection
Pressure



Recommended
Vessel Size



Inner
Diameter



Minimum Guide
Catheter Inner
Diameter

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