HEMODIALYSIS ACCESS MANAGEMENT SOLUTIONS WHATEVER ROUTE YOU TAKE... introducer Sheath Guide Wire **STARTER**TM **ACCESS SUPER** IMAGER™ II **SHEATH**TM **ZIPWIRE**TM Mydrophilic Guide Wire Norkhorse PTA Balloon NO TREAT Successful **MUSTANG™ Stenosis Thrombus** dilatation in Second Dilatation Device Ultra-High-Pressure PAP Balloon NO NO YES **PERIPHERAL CUTTING ANGIOJET**TM **ATHLETIS**TM **BALLOON**[™] Thrombectomy System SUSTAIN **RANGER**TM ...MAKE A LASTING IMPACT





SUPER SHEATH™

Introducer Sheath

SMOOTH TRANSITIONS – TOTAL PERFORMANCE

FOCUSED DESIGN FOR EASE OF ENTRY AND REDUCED TRAUMA*



STARTER[™]

Guide Wire

ZIPWIRE™

Hydrophilic Guide Wire

IMAGER™ II

4F Angiographic Catheter

DEVICE PASSAGE





EFFICIENT OPERATION

SMOOTH TRANSITIONS



ACCESS

* Bench testing performed by Togo Medikit Co., Ltd. Data on file.





ANGIOJETTM

Thrombectomy System



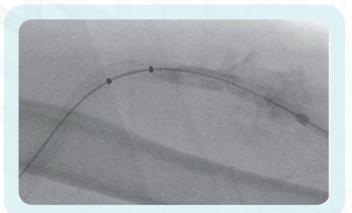
AngioJet combines mechanical thrombectomy with Power Pulse™ for rapid thrombus removal. This highly effective combination can often mean faster restoration of flow, reduced lytic needed, and may shorten treatment time.¹



QUICK THROMBUS RESOLUTION IN AV ACCESS CONDUITS

Thrombus narrowing or restricting flow within AV access fistulas and grafts can prevent a patient from undergoing life supportive dialysis treatment.

AngioJet is designed to offer quick removal of thrombotic materials from the dialysis access conduit, potentially improving long-term patency.



Pre-procedure: AngioJet catheter positioned in thrombosed AV graft.



Post-procedure: Imaging post-AngioJet System activation in both venous and arterial side of AV graft.

TREAT the thrombus

1. The PEARL Registry study



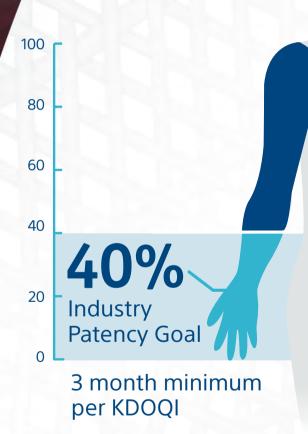
TREAT

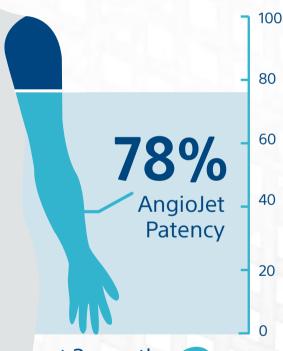
the thrombus

PEARL REGISTRY
DEMONSTRATES NEARLY
DOUBLE THE PATENCY

Results in AV Conduits¹ N = 145 patients







at 3 months, nearly the goal

KDOQI: Kidney Disease Outcomes Quality Initiative

1. Presented by Dr. Eugene Simoni at VEITH 2013; Final PEARL Data Aug 2013 Simoni. PEARL Registry Hemodialysis Access. VEITH 2013



MUSTANGTM

0.035" Balloon Dilation Catheter



EVERY DIMENSION ONLY ONE BALLOON PROVIDES TOTAL PERFORMANCE

With superior cross and track, powerful dilatation, longer lengths, and smaller sheath sizes, Mustang is the 0.035" (0.89mm) workhorse balloon that offers excellence across the board.



DELIVERABLE HIGH PRESSURE





LOW PROFILE

BROADEST SIZE MATRIX



TREAT

the stenosis

ATHLETIS™

Ultra-High-Pressure PTA Balloon

MEW

The braiding matrix was designed using a liquid-crystal polymer material that was used by NASA in the Mars Rover parachute.

TREAT the stenosis

OPTIMISED DELIVERABILITY TO REACH AND TREAT CHALLENGING LESIONS

With an ideal blend of track and a low crossing profile, Athletis is designed to reach highly calcified, long, stenotic, or resistant fibrotic lesions, including those commonly found in AV access procedures.



ULTRA-HIGH PRESSURE

Athletis' proprietary braided balloon design enables optimised deliverability and ultra-high pressures up to 40 ATM. The unique, non-compliant balloon design enables Athletis to open to the stated diameter even in highly resistant lesions.

ULTRA-LOW PROFILE

Athletis features a class-leading low lesion entry profile with an 0.042" flexible, tapered tip over an 0.035" guidewire.

42% LOWER

ATHLETIS 0.042"

TIP PROFILE COMPARED TO COMPETITOR

COMPETITOR 0.072"*

*Average measurements taken by Boston Scientific. Data on file (TR 92200478). Bench test results may not necessarily by indicative of clinical performance.



ATHLETISTM

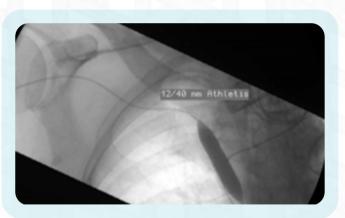
Ultra-High-Pressure PTA Balloon

MIW

ATHLETIS:
REAL-WORLD CASES,
REAL-WORLD IMPACT







Case 1: Lesion location: Brachiocephalic and superior vena cava – Athletis 12x40





Case 2: Lesion location: Subclavian and basilic vein – Athletis 12x40

TREAT the stenosis

Images courtesy of Drs Markus Schmidt and Michael Popp, Klinikum Bad Hersfeld in Germany.



PERIPHERAL CUTTING BALLOONTM

MICROSURGICAL
DILATATION DEVICE
FOR HEMODIALYSIS
ACCESS MANAGEMENT



ATHEROTOMES

Microsurgical blades designed to create precise incisions

NON-COMPLIANT BALLOON MATERIAL

Designed for predictable, controlled dilatation



CUTTING BALLOON™ ANGIOPLASTY

- 6-10 ATM
- Focuses the dilatation force at the tips of the atherotomes
- Designed to score, then gently dilate the lesion, minimising barotrauma
- Propagates controlled plaque disruption through lesion
- Theoretical hoop stress relief and disruption of elastic and fibrotic continuity that causes recoil

TREAT

the stenosis





RANGERTM

Paclitaxel-Coated PTA Balloon Catheter



SUPPORTED BY UNPARALLELED **CLINICAL EVIDENCE**

- Built on market-leading Sterling™ balloon platform
- Designed to:
- minimise downstream particulates while maximising effectiveness and durability
- offer efficient drug-transfer and low drug dose (2µg/mm²)
- Broad diameter matrix (4-7mm) and lengths out to 200mm



COMPARE

HEAD-TO-HEAD CLINICAL TRIAL 12-MONTH DATA¹

RANGER DCB



IN.PACT DCB

SIMILAR PATENCY SIMILAR FREEDOM FROM TARGET LESION **REVASCULARISATION (FTLR)**

μg/mm²

Achieved with SIGNIFICANTLY LESS DRUG

3.5 μg/mm²

SUSTAIN the patency

1. COMPARE Clinical Trial 12-Month Results presented by Sabine Steiner, MD. LINC 2020. 12-Month Primary Endpoints: Binary Primary Patency = 83.0% for Ranger DCB and 81.5% for IN.PACT DCB (Pnon-inferiority <0.01). Freedom from Major Adverse Events = 91.0% for Ranger DCB and 92.6% for IN.PACT DCB (Pnon-inferiority <0.01)



MAKE A LASTING IMPACT

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Scientific

Advancing science for life™

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