

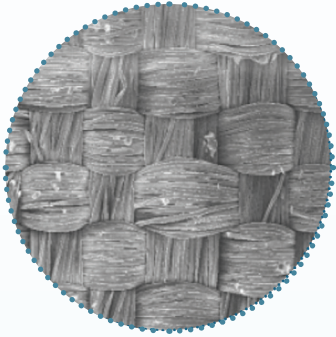
PRODUCT BROCHURE

Relay[®]Pro

Uniquely Inspired for Ideal Placement

Engineered Design with Latest Device Technology

RelayPro is Terumo Aortic's **latest generation thoracic stent-graft system** specifically designed for the thoracic aorta.



Fabric

Woven Polyester with an optimized weave pattern:

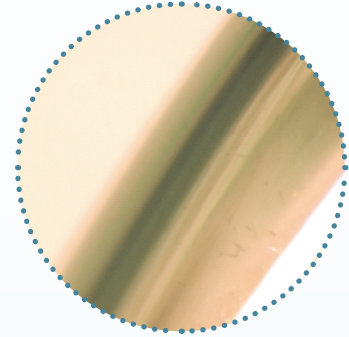
- ▶ Low profile
- ▶ High strength
- ▶ Low permeability



Suture

5-0 braided polyester surgical suture impregnated with PTFE:

- ▶ High wear resistance
- ▶ High tensile strength



Stents

Electropolished Nitinol:

- ▶ Super-elastic properties
- ▶ Proven fatigue endurance

0%

Type III/IV endoleak through 1 year^{1,2}

1: 0/110
2: 0/56

0%

Stent fractures through 1 year^{1,2}

1: 0/110
2: 0/56

0%

Stenosis/thrombosis through 1 year^{1,2}

1: 0/110
2: 0/56

0%

Loss of patency through 1 year^{1,2}

1: 0/110
2: 0/56

1: Thoracic Aortic Aneurysm and Penetrating Atherosclerotic Ulcer Cohort
2: Acute Complicated Type B Aortic Dissection Cohort

Radiopaque marker

Platinum Iridium:

- ▶ Radiopaque material for enhanced visibility

A. **5-8 Proximal Tube Markers**

B. **2 Body Dumbbell Markers**

On the outer curve (only 1 marker on the 100mm graft)

C. **3 Distal Dumbbell Markers**



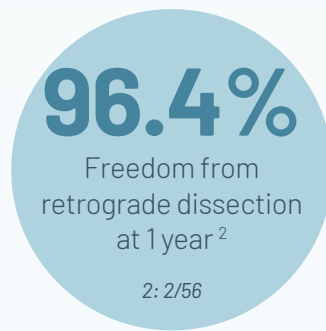
1. Szeto et al. (2022). One-Year Results with a Low-Profile Endograft in Subjects with Thoracic Aortic Aneurysm and Ulcer Pathologies. *The Journal of Thoracic and Cardiovascular Surgery*

2. Rossi et al. (2024). One-Year Results of a Low-Profile Endograft in Acute, Complicated Type B Aortic Dissection. *The Annals of Thoracic Surgery*.

Empowering Confidence with On-Label Treatment of all Pathologies of the Descending Thoracic Aorta

The RelayPro Thoracic Stent-Graft System is indicated for the endovascular repair of **all lesions of the descending thoracic aorta** (including aneurysm, PAU, dissection and transection) in patients having appropriate anatomy.

| Stent-Graft Diameter (mm) | Proximal Length BS Config. (mm) | Proximal Length NBS Configuration (mm) | Stent-Graft Diameter (mm) | Distal Length BS & NBS Config. Aneurysms & PAUs (mm) | Distal Length BS & NBS Config. Dissections & Traumatic Aortic Injuries (mm) |
|---------------------------|---------------------------------|--|---------------------------|--|---|
| 22*-28 | 15 | 25 | 22*-38 | 25 | 20 |
| 30-38 | 20 | 25 | 40-46 | 30 | 20 |
| 40-46 | 25 | 30 | | | |



1: Thoracic Aortic Aneurysm and Penetrating Atherosclerotic Ulcer Cohort
2: Acute Complicated Type B Aortic Dissection Cohort
3: Traumatic Aortic Injury Cohort

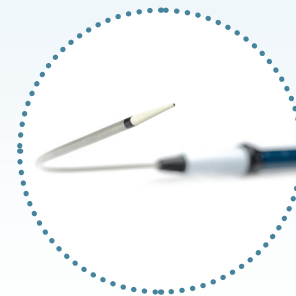
* 22mm diameter stent-grafts are only approved to treat traumatic aortic injuries (transections)
** BTAI stands for Blunt Traumatic Aortic Injury

RelayPro Key Features



Graft features

- ▶ Multiple Size Options
- ▶ Performance Zones
- ▶ Proximal End Configuration
- ▶ S-Bar Technology



Delivery system features

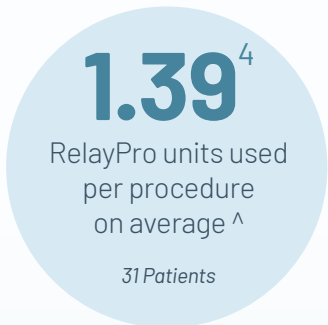
- ▶ Dual Sheath Technology
- ▶ Pre-Curved Inner Catheter
- ▶ Low Profile delivery system
- ▶ NBS: Support Wires & Flared End
- ▶ NBS: Asymmetrical Proximal Claspings

1. Szeto et al. - 2022 - One-Year Results with a Low-Profile Endograft in Subjects with Thoracic Aortic Aneurysm and Ulcer Pathologies, *The Journal of Thoracic and Cardiovascular Surgery*
2. Rossi et al. - 2024 - One-Year Results of a Low-Profile Endograft in Acute, Complicated Type B Aortic Dissection, *The Annals of Thoracic Surgery*
3. Starnes et al. 2024 - Early survival benefit of a low-profile endograft in blunt traumatic aortic injury

Multiple Size Options for a Personalized Approach

The **standard portfolio** has a **wide range of sizes and tapers** allowing each patient access to the right solution, every time.

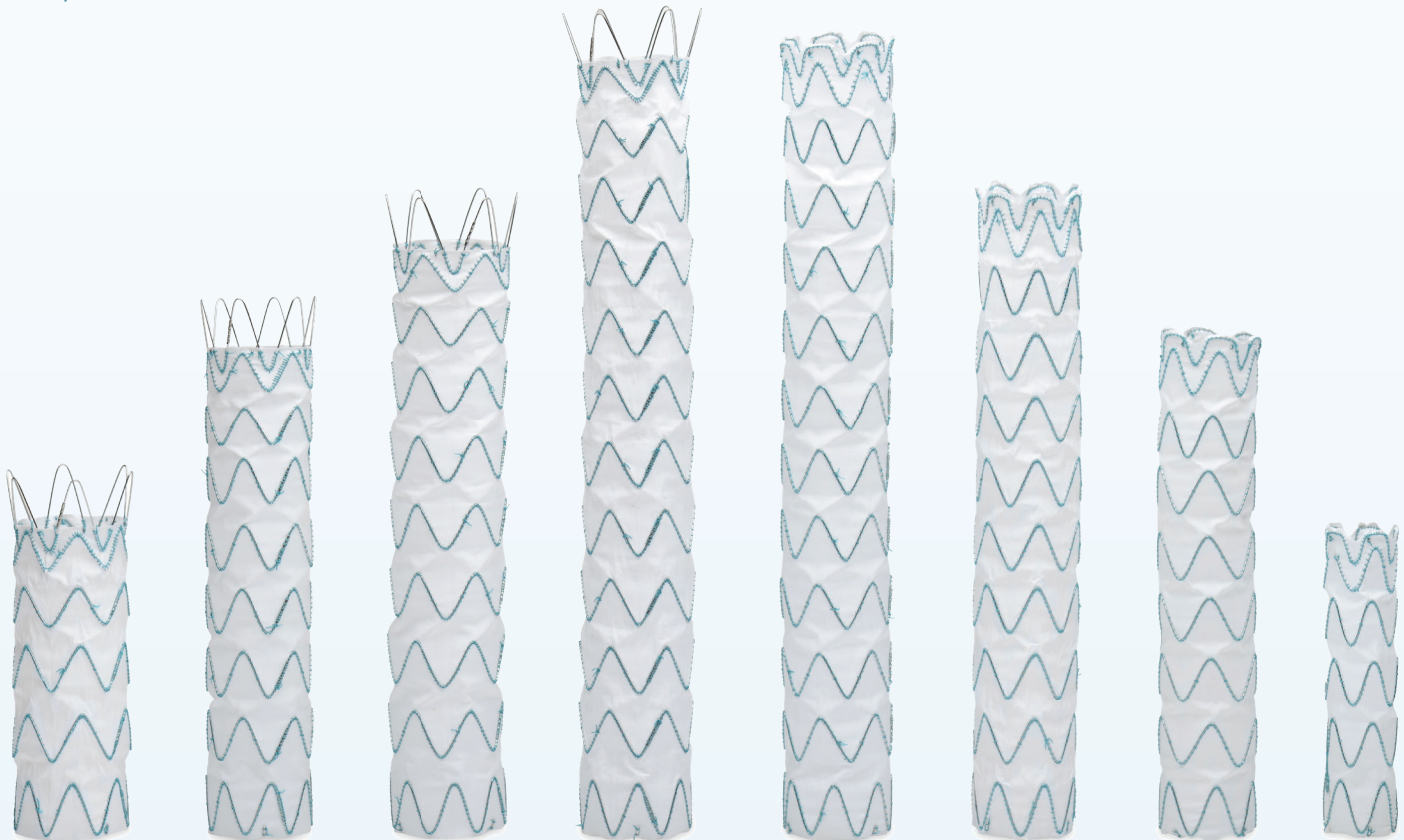
- ▶ Straight
 - Diameter: 22*mm - 46mm (2mm increments)
 - Length: 100mm - 250mm (50 mm increments)**
- ▶ Tapered (4 mm difference between proximal and distal)
 - Diameter: 28mm - 46mm (2mm increments)
 - Length: 150mm - 250mm (50 mm increments)**



* 22mm diameter stent-grafts are only approved to treat traumatic aortic injuries (transections)
 ** Nominal Length
 ^ RelayPro is **ONLY** indicated for the treatment of lesions in the Descending Thoracic Aorta.

4: Aneurysm, pseudoaneurysm, dissection, penetrating atherosclerotic ulcer cohort

“One of the key benefits of RelayPro is being able to choose from a range of proximal configurations allowing me to tailor my device selection to meet the individual needs of each patient.”⁵



4. Riambau *et al.* (2019). Prospective Multicenter Study of the Low-Profile Relay Stent-Graft in Patients with Thoracic Aortic Disease: The Regeneration Study. *Annals of Vascular Surgery*.
 5. Venkatesh Ramaiah, MD, Chief of Complex Vascular Services and Network Director of Vascular Services of the HonorHealth hospital system, Scottsdale, Arizona <https://evtoday.com/news/terumo-aortic-completes-enrollment-of-relaypro-united-states-pivotal-trial>

Expand your Choice: Upon Request Configurations

The available **Upon-Request Portfolio** adds **2224 FDA approved** configurations allowing physicians significantly more solutions to better fit the anatomical needs of each individual patient.

| | Standard | Upon request |
|---------------------------------|----------------------------------|---|
| Configurations | Bare & NBS | Bare & NBS |
| Straight diameters | 22* - 46mm (2mm increments) | 22* - 46mm (2mm increments) |
| Tapered options | 4mm Regular | 2 - 18mm Regular & Reverse (2mm increments) |
| Straight lengths | 100 - 250mm (50mm increments) | 90 - 250mm (~20mm increments) |
| Tapered lengths | 150 - 250mm (50mm increments) | 90 - 250mm (~20mm increments) |
| Available Configurations | 164 | 2224 |

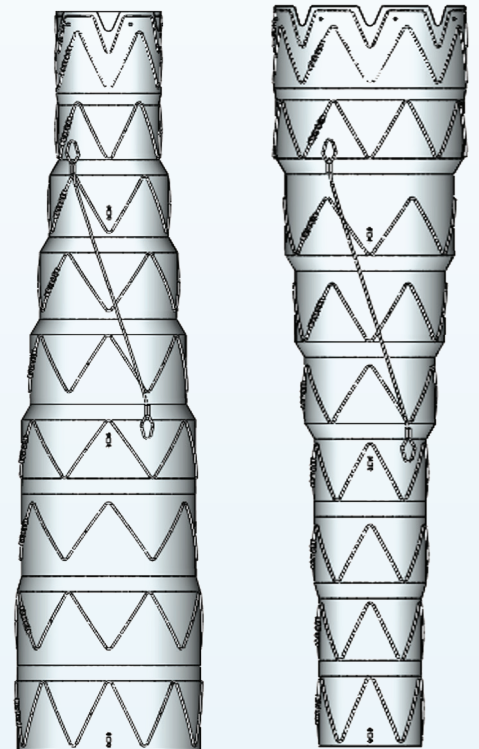
* 22mm diameter stent-grafts are only approved to treat traumatic aortic injuries (transections)

Regular: 4mm diameter difference between the proximal and the distal diameter.

Reverse: Proximal diameter smaller than distal diameter.

“The opportunity to tailor the stent-graft system to precisely match the anatomy of the patient was hugely valuable as it allowed me to accommodate a big gap of the proximal and distal diameters with a single device”⁶

EXAMPLES



Reverse Taper
22/40mm x 190mm

Taper
40/22mm x 190mm

6. Mazin Foteh MD, Vascular Surgeon, Heart Hospital of Austin, Texas
<https://evtoday.com/news/terumo-aortics-relaypro-upon-request-program-commercially-launched>

Designed to Respect the Thoracic Anatomy

The RelayPro stent graft is divided into **performance zones**. Each zone is designed to serve a **specific purpose** and therefore **distributes an appropriate radial load** independent of other zones.

98.9%

Freedom from aneurysm expansion at 1 year¹

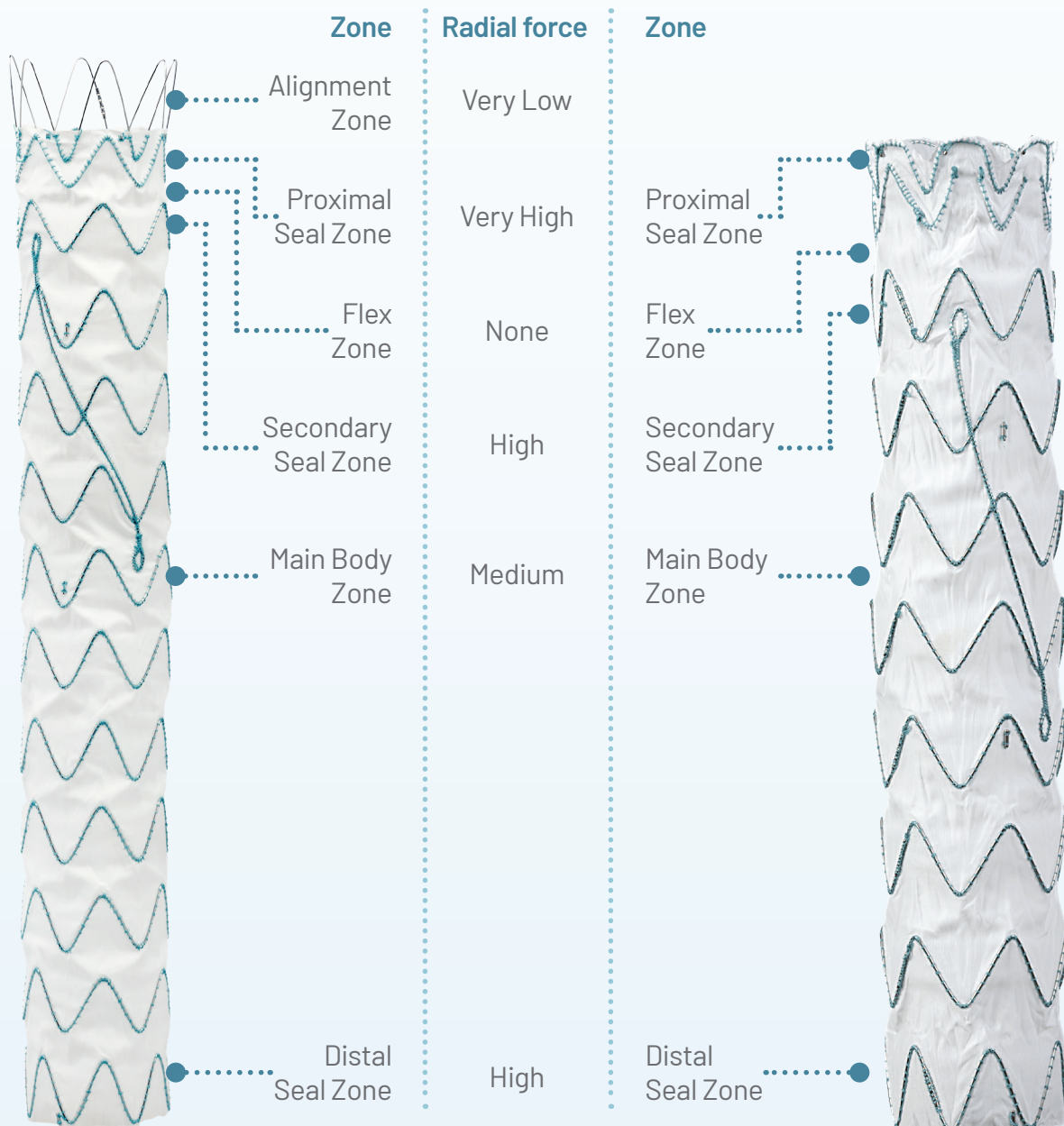
1: 109/110

100%

Absence of false lumen perfusion from 30 days to 1 year²

2: 56/56

1: Thoracic Aortic Aneurysm and Penetrating Atherosclerotic Ulcer Cohort
2: Acute Complicated Type B Aortic Dissection Cohort

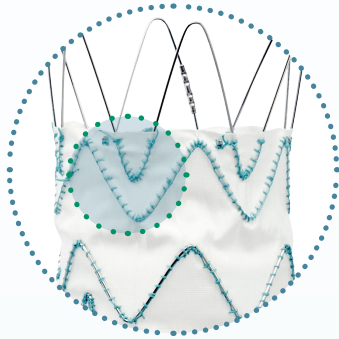


1. Szeto et al. (2022). One-Year Results with a Low-Profile Endograft in Subjects with Thoracic Aortic Aneurysm and Ulcer Pathologies. *The Journal of Thoracic and Cardiovascular Surgery*

2. Rossi et al. (2024). One-Year Results of a Low-Profile Endograft in Acute, Complicated Type B Aortic Dissection. *The Annals of Thoracic Surgery*.

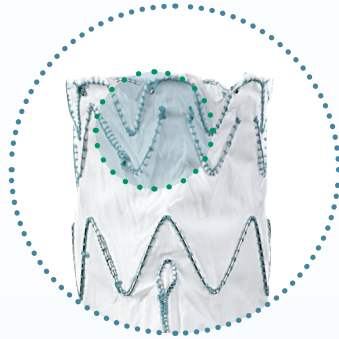
Uniform Sealing and Secure Fixation

MULTIPLE SEALING POINTS



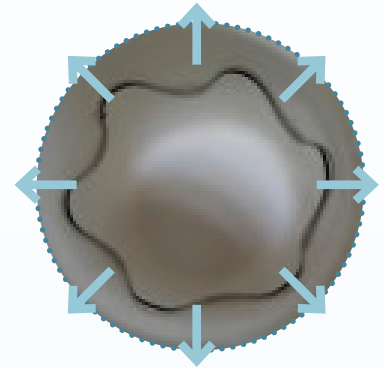
Bare Stent Configuration

Partial overlapping of the bare stent with the first covered stent to **maximize** the number of **sealing points**



Non Bare Stent Configuration

A **crown-shaped** nitinol stent overlapping with the proximal sealing stent, both covered with fabric, designed to maximise conformability and **minimize infolding**



High radial load

Both proximal configurations are designed to deliver **high radial load** for an effective apposition and fixation of the graft against the aortic wall

1.8%

Type Ia endoleak at 12 months^{1,2}

1: 2/110
2: 1/56

100%

Technical Success through 24 hours^{1,2}

1: 110/110
2: 56/56

0%

Migration through 12 months¹

1: 0/110

1: Thoracic Aortic Aneurysm and Penetrating Atherosclerotic Ulcer Cohort
2: Acute Complicated Type B Aortic Dissection Cohort

Ahead of the Curve with the S-Bar Technology

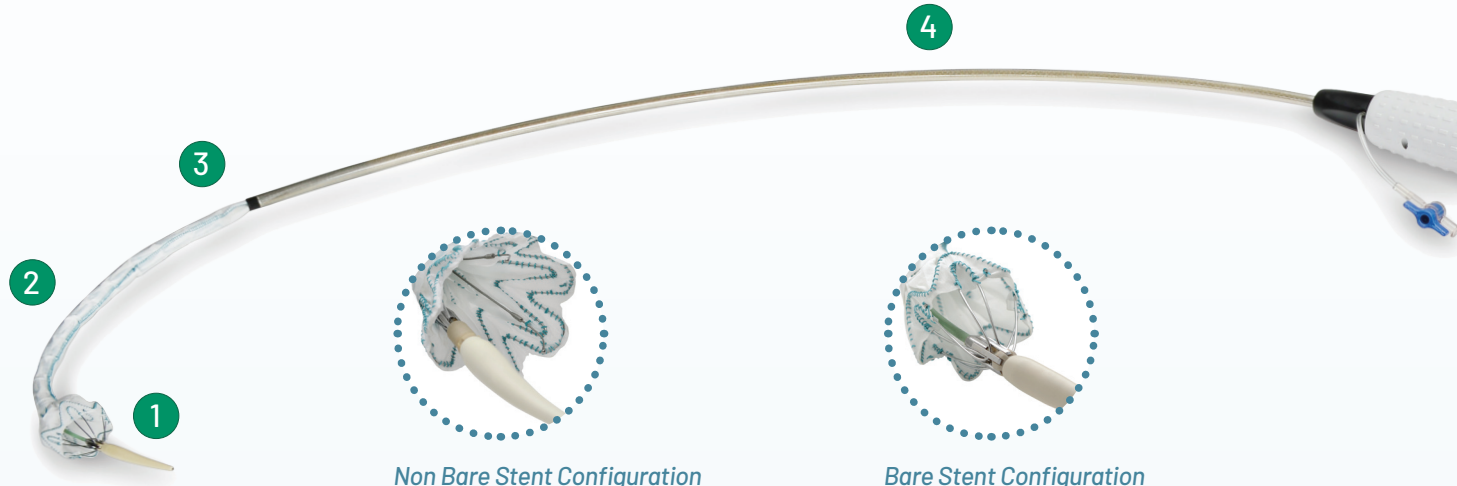
S-Bar, an **s-shaped nitinol wire**, intended to provide **columnar strength** to the endograft and to enhance conformability by adapting to the natural curvature of the aorta.

Shortened length to optimize the treatment in tortuous aortas, enabling the more distal portion of the graft to flex in any direction.



1. Szeto et al. (2022). One-Year Results with a Low-Profile Endograft in Subjects with Thoracic Aortic Aneurysm and Ulcer Pathologies. *The Journal of Thoracic and Cardiovascular Surgery*
2. Rossi et al. (2024). One-Year Results of a Low-Profile Endograft in Acute, Complicated Type B Aortic Dissection. *The Annals of Thoracic Surgery*.

RelayPro: Precise, Accurate, and Controlled to Navigate the Arch with Care



Non Bare Stent Configuration

Two clasped stent apices, both located on the outer curve of the RelayPro NBS

Bare Stent Configuration

Variable bare stent heights depending on proximal diameter

1 PROXIMAL CLASPING

- ▶ Allows for repositioning of the device and facilitates perpendicular deployment

2 PRE-CURVED INNER CATHETER

- ▶ Conforms to the aortic arch designed for alignment of the stent-graft

3 SOFT INNER SHEATH

- ▶ 30cm length
- ▶ Designed to provide navigability and to ensure accurate deployment, minimizing trauma to surrounding anatomy

“RelayPro’s ability to land accurately combined with its low profile will allow me to successfully treat complex anatomy with precision.”⁷

Watch the deployment sequence



WATCH
RelayPro Deployment



WATCH
RelayPro NBS Deployment

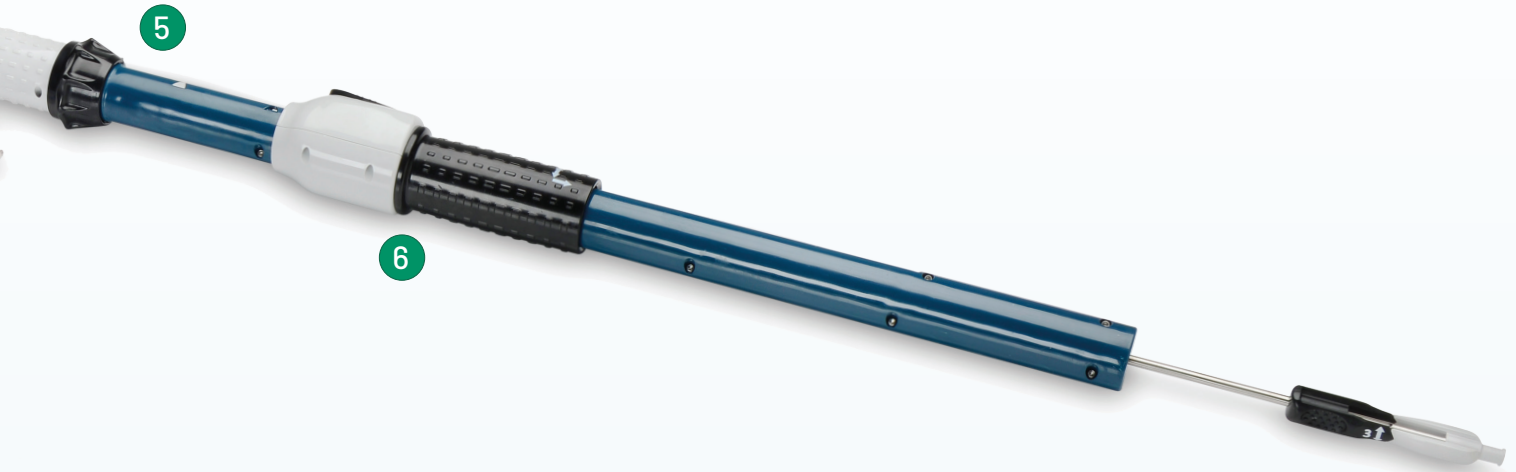
7. Wilson Y. Szeto, MD. Chief, Division of Cardiovascular Surgery. Hospital of the University of Pennsylvania-Penn Presbyterian - <https://evtoday.com/news/terumo-aortic-completes-enrollment-of-relaypro-united-states-pivotal-trial>



Controller



Mechanical Advantage



4 COILED OUTER SHEATH

- ▶ 60cm length
- ▶ Designed to provide pushability, supporting during the advancement and maneuvering through access vessel

5 CONTROLLER

- ▶ Allows for staged deployment enhancing control and accuracy in stent-graft placement

6 MECHANICAL ADVANTAGE

- ▶ Forward and backward gear system allows for small incremental movements of the stent-graft enhancing controlled delivery

1.8%

Disabling stroke rate at 30 days with no stroke during 1-year follow-up²

2: 1/56

1.8%

Operative vascular access complications²

2: 1/56

“RelayPro's ability to navigate smoothly over the arch as a result of the Dual Sheath system enables accurate deployment [...]”⁷

2: Acute, Complicated Type B Aortic Dissection Cohort

2. Rossi et al. (2024). One-Year Results of a Low-Profile Endograft in Acute, Complicated Type B Aortic Dissection. *The Annals of Thoracic Surgery*.
 7. Wilson Y. Szeto, MD. Chief, Division of Cardiovascular Surgery. Hospital of the University of Pennsylvania-Penn Presbyterian - <https://evtoday.com/news/fda-approves-terumo-aortic-relaypro-thoracic-stent-graft>

Low-Profile without Compromise

RelayPro's optimized weave pattern and radiopaque markers contribute to a **reduction in profile** over the earlier generation RelayPlus System.



UP TO
85.5%
 patients treated with a
 percutaneous femoral
 approach^{1,2}

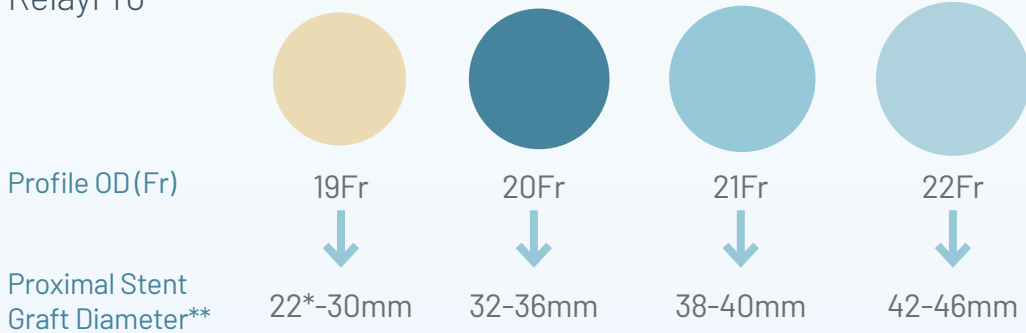
1: 50/68
 2: 47/56

“The 3-4 French profile reduction of the new RelayPro is expected to offer operative advantages in terms of stent-graft introduction and deployment, particularly in patients with narrow or tortuous access vessels.”^{4 ^}

[^] RelayPro is **ONLY** indicated for the treatment of lesions in the Descending Thoracic Aorta.

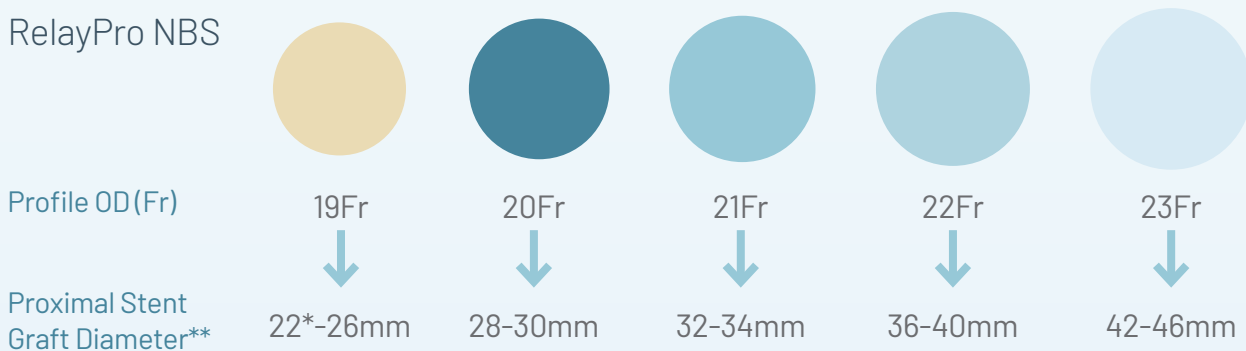
1: Thoracic Aortic Aneurysm and Penetrating Atherosclerotic Ulcer US Cohort
 2: Acute Complicated Type B Aortic Dissection Cohort

RelayPro



* 22mm diameter stent-grafts are only approved to treat traumatic aortic injuries (transections)
 **For tapered devices, Fr size based on largest diameter of the stent-graft.

RelayPro NBS



* 22mm diameter stent-grafts are only approved to treat traumatic aortic injuries (transections)
 **For tapered devices, Fr size based on largest diameter of the stent-graft.

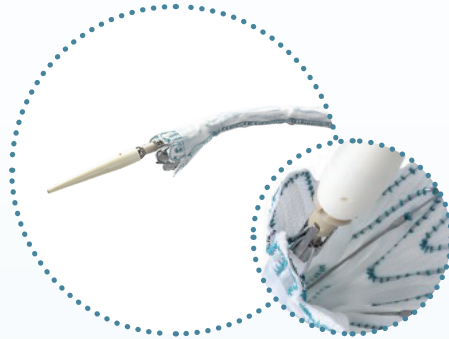
1. Szeto *et al.* (2022). One-Year Results with a Low-Profile Endograft in Subjects with Thoracic Aortic Aneurysm and Ulcer Pathologies. *The Journal of Thoracic and Cardiovascular Surgery*
 2. Rossi *et al.* (2024). One-Year Results of a Low-Profile Endograft in Acute, Complicated Type B Aortic Dissection. *The Annals of Thoracic Surgery*.
 4. Rimbau *et al.* (2019). Prospective Multicenter Study of the Low-Profile Relay Stent-Graft in Patients with Thoracic Aortic Disease: The Regeneration Study. *Annals of Vascular Surgery*.

RelayPro NBS: Designed to minimize Bird-beaking and Retroflex

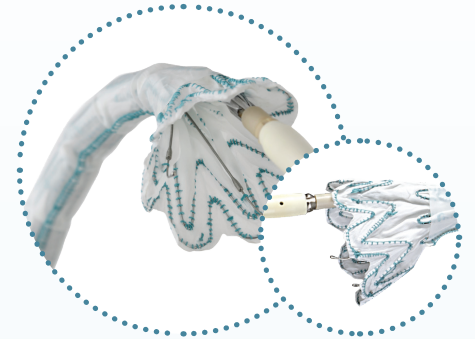
RelayPro NBS, **the only thoracic endograft available on the market with a Non-Bare Stent configuration** that can be used as a standalone proximal component



Minimizes the risk of retroflex
 During deployment, two **support wires** guide the inferior portion toward the inner aortic wall, keeping it aligned with the landing zone, **minimizing the risk of retroflex**



Ability to reposition
Two clasped stent apices, both located on the outer curve of the RelayPro NBS, for a precise and controlled deployment, preserving the **ability to reposition**



Minimizes the risk of bird-beak
 The **Flared End** configuration of the inner sheath enables partial expansion to improve the proximal alignment and precision for a correct apposition on the inner curve, **minimizing bird-beaking**



*“Accurate deployment with **favorable apposition even in hostile aortic arches** contributed to low rates of early and mid-term complications.”⁸*

* These studies include all RelayPro with the NBS configuration being predominant

1: Thoracic Aortic Aneurysm and Penetrating Atherosclerotic Ulcer Cohort
 2: Acute Complicated Type B Aortic Dissection Cohort



Preoperative CTA with 3D reconstruction illustrates the benefit of a low-profile delivery system



Postoperative CTA 3D reconstruction shows RelayPro NBS conformability to an angulated aortic arch

NOTE: The support wires are only present in devices with 32mm or greater proximal stent-graft diameters.

1. Szeto et al. (2022). One-Year Results with a Low-Profile Endograft in Subjects with Thoracic Aortic Aneurysm and Ulcer Pathologies. *The Journal of Thoracic and Cardiovascular Surgery*
 2. Rossi et al. (2024). One-Year Results of a Low-Profile Endograft in Acute, Complicated Type B Aortic Dissection. *The Annals of Thoracic Surgery*.
 8. Case images courtesy of Prof. Wilson Szeto, Cardiovascular Surgery, Penn Presbyterian Medical Center, <https://www.vumedi.com/video/2nd-stage-tevaring-with-thoraflextm-hybrid-staying-on-label-at-all-times/>

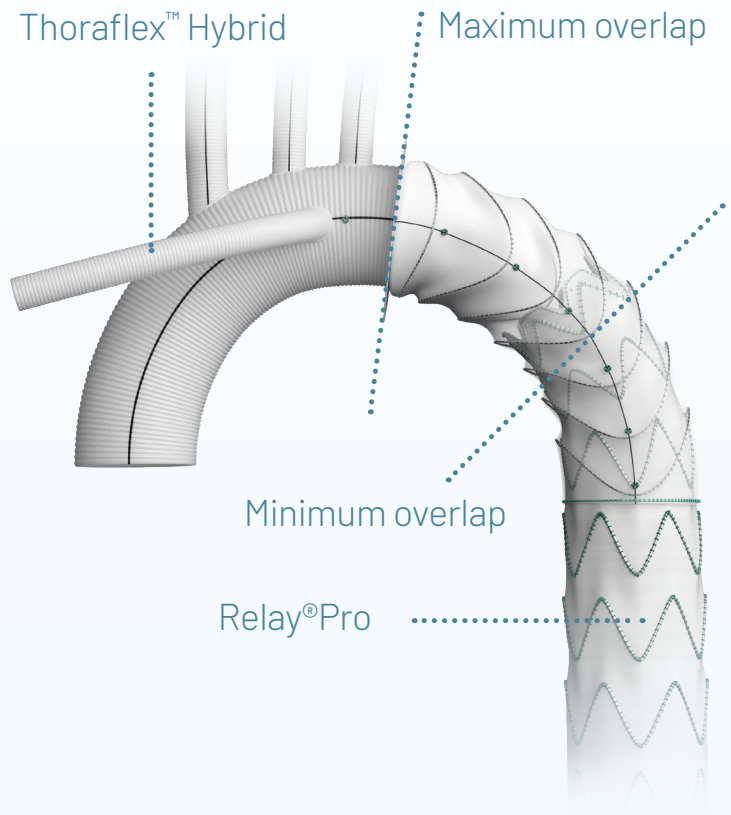
Thinking Ahead with On-Label Endovascular Extension

If the lesion requires use of a distal extension, only a Relay NBS configuration should be used:

- ▶ 44 year old patient
- ▶ Acute type A aortic dissection repaired with Thoraflex Hybrid, extended with RelayPro NBS thoracic stent graft system



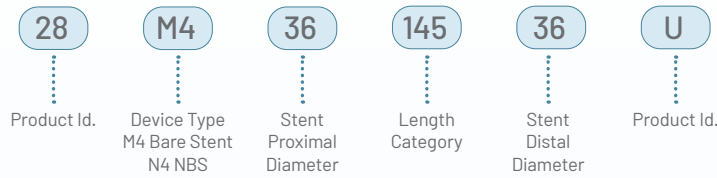
- ▶ Case presentation
- ▶ Second Stage: RelayPro NBS extension



33% of FET repairs need a future downstream intervention^{10*}

* Reinterventions included endovascular, open surgery or hybrid approaches. Note the RelayPro device is ONLY indicated for treatment of the Descending Thoracic Aorta. The Thoraflex Hybrid is ONLY indicated for treatment in cases of aneurysm and/or dissection. Please refer to the device IFUs for complete indications, contraindications, warning and precautions.

RelayPro Product Ordering Information



Bare Stent: Straight

| | Vessel | | Stent-graft | | Delivery System | | Catalog Number |
|-------|-------------------------------|---------------------------|----------------|------------|----------------------------|------------------|------------------|
| | Thoracic Proximal Vessel Size | Proximal/ Distal Diameter | Covered Length | Profile OD | Made to Order [^] | | |
| 100mm | 19 | 22* | 90 | 19Fr | | 28-M4-22-090-22U | |
| | 20-21 | 24 | 90 | 19Fr | | 28-M4-24-090-24U | |
| | 22-23 | 26 | 95 | 19Fr | | 28-M4-26-095-26U | |
| | 24-25 | 28 | 95 | 19Fr | | 28-M4-28-095-28U | |
| | 26-27 | 30 | 95 | 19Fr | | 28-M4-30-095-30U | |
| | 28-29 | 32 | 95 | 20Fr | | 28-M4-32-095-32U | |
| | 30-31 | 34 | 100 | 20Fr | | 28-M4-34-100-34U | |
| | 32-33 | 36 | 100 | 20Fr | | 28-M4-36-100-36U | |
| | 34 | 38 | 100 | 21Fr | | 28-M4-38-100-38U | |
| | 35-36 | 40 | 105 | 21Fr | | 28-M4-40-105-40U | |
| | 37-38 | 42 | 105 | 22Fr | • | 28-M4-42-105-42U | |
| | 39-40 | 44 | 105 | 22Fr | • | 28-M4-44-105-44U | |
| | 41-42 | 46 | 105 | 22Fr | • | 28-M4-46-105-46U | |
| | 150mm | 19 | 22* | 150 | 19Fr | | 28-M4-22-150-22U |
| 20-21 | | 24 | 150 | 19Fr | | 28-M4-24-150-24U | |
| 22-23 | | 26 | 155 | 19Fr | | 28-M4-26-155-26U | |
| 24-25 | | 28 | 155 | 19Fr | | 28-M4-28-155-28U | |
| 26-27 | | 30 | 155 | 19Fr | | 28-M4-30-155-30U | |
| 28-29 | | 32 | 155 | 20Fr | | 28-M4-32-155-32U | |
| 30-31 | | 34 | 145 | 20Fr | | 28-M4-34-145-34U | |
| 32-33 | | 36 | 145 | 20Fr | | 28-M4-36-145-36U | |
| 34 | | 38 | 145 | 21Fr | | 28-M4-38-145-38U | |
| 35-36 | | 40 | 145 | 21Fr | | 28-M4-40-145-40U | |
| 37-38 | | 42 | 150 | 22Fr | | 28-M4-42-150-42U | |
| 39-40 | | 44 | 155 | 22Fr | | 28-M4-44-155-44U | |
| 41-42 | | 46 | 155 | 22Fr | • | 28-M4-46-155-46U | |

Bare Stent: Straight

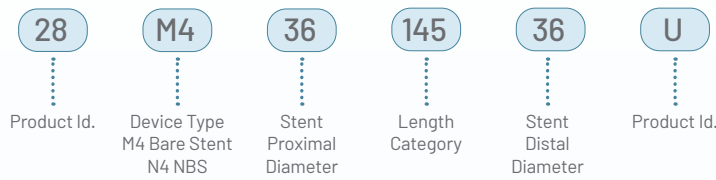
| | Vessel | | Stent-graft | | Delivery System | | Catalog Number |
|-------|-------------------------------|---------------------------|----------------|------------|----------------------------|------------------|------------------|
| | Thoracic Proximal Vessel Size | Proximal/ Distal Diameter | Covered Length | Profile OD | Made to Order [^] | | |
| 200mm | 19 | 22* | 190 | 19Fr | | 28-M4-22-190-22U | |
| | 20-21 | 24 | 190 | 19Fr | | 28-M4-24-190-24U | |
| | 22-23 | 26 | 195 | 19Fr | | 28-M4-26-195-26U | |
| | 24-25 | 28 | 195 | 19Fr | | 28-M4-28-195-28U | |
| | 26-27 | 30 | 200 | 19Fr | | 28-M4-30-200-30U | |
| | 28-29 | 32 | 200 | 20Fr | | 28-M4-32-200-32U | |
| | 30-31 | 34 | 200 | 20Fr | | 28-M4-34-200-34U | |
| | 32-33 | 36 | 190 | 20Fr | | 28-M4-36-190-36U | |
| | 34 | 38 | 190 | 21Fr | | 28-M4-38-190-38U | |
| | 35-36 | 40 | 195 | 21Fr | | 28-M4-40-195-40U | |
| | 37-38 | 42 | 195 | 22Fr | | 28-M4-42-195-42U | |
| | 39-40 | 44 | 200 | 22Fr | | 28-M4-44-200-44U | |
| | 41-42 | 46 | 200 | 22Fr | • | 28-M4-46-200-46U | |
| | 250mm | 19 | 22* | 250 | 19Fr | | 28-M4-22-250-22U |
| 20-21 | | 24 | 250 | 19Fr | | 28-M4-24-250-24U | |
| 22-23 | | 26 | 250 | 19Fr | | 28-M4-26-250-26U | |
| 24-25 | | 28 | 250 | 19Fr | | 28-M4-28-250-28U | |
| 26-27 | | 30 | 250 | 19Fr | | 28-M4-30-250-30U | |
| 28-29 | | 32 | 250 | 20Fr | | 28-M4-32-250-32U | |
| 30-31 | | 34 | 250 | 20Fr | | 28-M4-34-250-34U | |
| 32-33 | | 36 | 250 | 20Fr | | 28-M4-36-250-36U | |
| 34 | | 38 | 250 | 21Fr | | 28-M4-38-250-38U | |
| 35-36 | | 40 | 250 | 21Fr | | 28-M4-40-250-40U | |
| 37-38 | | 42 | 250 | 22Fr | • | 28-M4-42-250-42U | |
| 39-40 | | 44 | 250 | 22Fr | • | 28-M4-44-250-44U | |
| 41-42 | | 46 | 250 | 22Fr | • | 28-M4-46-250-46U | |

* 22mm diameter stent-grafts are only approved to treat traumatic aortic injuries (transections)

[^] Made To Order devices are not kept in stock. They will be built upon receipt of Purchase Order and are subject to extended lead times.

All measurements in mm unless otherwise specified. Select the appropriate device size based on artery outer diameter measurement taken from CT images.

RelayPro Product Ordering Information



Non-Bare Stent: Straight

| | Vessel | | Stent-graft | | Delivery System | | Catalog Number |
|-------|-------------------------------|---------------------------|----------------|------------|-----------------|------------------|----------------|
| | Thoracic Proximal Vessel Size | Proximal/ Distal Diameter | Covered Length | Profile OD | Made to Order ^ | | |
| 100mm | 19 | 22* | 99 | 19Fr | | 28-N4-22-099-22U | |
| | 20-21 | 24 | 99 | 19Fr | | 28-N4-24-099-24U | |
| | 22-23 | 26 | 104 | 19Fr | | 28-N4-26-104-26U | |
| | 24-25 | 28 | 104 | 20Fr | | 28-N4-28-104-28U | |
| | 26-27 | 30 | 104 | 20Fr | | 28-N4-30-104-30U | |
| | 28-29 | 32 | 104 | 21Fr | | 28-N4-32-104-32U | |
| | 30-31 | 34 | 109 | 21Fr | | 28-N4-34-109-34U | |
| | 32-33 | 36 | 109 | 22Fr | | 28-N4-36-109-36U | |
| | 34 | 38 | 109 | 22Fr | | 28-N4-38-109-38U | |
| | 35-36 | 40 | 114 | 22Fr | | 28-N4-40-114-40U | |
| 150mm | 19 | 22* | 159 | 19Fr | | 28-N4-22-159-22U | |
| | 20-21 | 24 | 159 | 19Fr | | 28-N4-24-159-24U | |
| | 22-23 | 26 | 164 | 19Fr | | 28-N4-26-164-26U | |
| | 24-25 | 28 | 164 | 20Fr | | 28-N4-28-164-28U | |
| | 26-27 | 30 | 164 | 20Fr | | 28-N4-30-164-30U | |
| | 28-29 | 32 | 164 | 21Fr | | 28-N4-32-164-32U | |
| | 30-31 | 34 | 154 | 21Fr | | 28-N4-34-154-34U | |
| | 32-33 | 36 | 154 | 22Fr | | 28-N4-36-154-36U | |
| | 34 | 38 | 154 | 22Fr | | 28-N4-38-154-38U | |
| | 35-36 | 40 | 154 | 22Fr | | 28-N4-40-154-40U | |
| 100mm | 37-38 | 42 | 114 | 23Fr | • | 28-N4-42-114-42U | |
| | 39-40 | 44 | 114 | 23Fr | • | 28-N4-44-114-44U | |
| | 41-42 | 46 | 114 | 23Fr | • | 28-N4-46-114-46U | |
| | 37-38 | 42 | 159 | 23Fr | | 28-N4-42-159-42U | |
| | 39-40 | 44 | 164 | 23Fr | | 28-N4-44-164-44U | |
| | 41-42 | 46 | 164 | 23Fr | • | 28-N4-46-164-46U | |

Non-Bare Stent: Straight

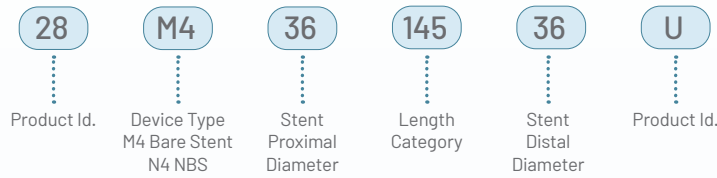
| | Vessel | | Stent-graft | | Delivery System | | Catalog Number |
|-------|-------------------------------|---------------------------|----------------|------------|-----------------|------------------|----------------|
| | Thoracic Proximal Vessel Size | Proximal/ Distal Diameter | Covered Length | Profile OD | Made to Order ^ | | |
| 200mm | 19 | 22* | 199 | 19Fr | | 28-N4-22-199-22U | |
| | 20-21 | 24 | 199 | 19Fr | | 28-N4-24-199-24U | |
| | 22-23 | 26 | 204 | 19Fr | | 28-N4-26-204-26U | |
| | 24-25 | 28 | 204 | 20Fr | | 28-N4-28-204-28U | |
| | 26-27 | 30 | 209 | 20Fr | | 28-N4-30-209-30U | |
| | 28-29 | 32 | 209 | 21Fr | | 28-N4-32-209-32U | |
| | 30-31 | 34 | 209 | 21Fr | | 28-N4-34-209-34U | |
| | 32-33 | 36 | 199 | 22Fr | | 28-N4-36-199-36U | |
| | 34 | 38 | 199 | 22Fr | | 28-N4-38-199-38U | |
| | 35-36 | 40 | 204 | 22Fr | | 28-N4-40-204-40U | |
| 250mm | 19 | 22* | 259 | 19Fr | • | 28-N4-22-259-22U | |
| | 20-21 | 24 | 259 | 19Fr | • | 28-N4-24-259-24U | |
| | 22-23 | 26 | 259 | 19Fr | • | 28-N4-26-259-26U | |
| | 24-25 | 28 | 259 | 20Fr | • | 28-N4-28-259-28U | |
| | 26-27 | 30 | 259 | 20Fr | • | 28-N4-30-259-30U | |
| | 28-29 | 32 | 259 | 21Fr | • | 28-N4-32-259-32U | |
| | 30-31 | 34 | 259 | 21Fr | • | 28-N4-34-259-34U | |
| | 32-33 | 36 | 259 | 22Fr | • | 28-N4-36-259-36U | |
| | 34 | 38 | 259 | 22Fr | • | 28-N4-38-259-38U | |
| | 35-36 | 40 | 259 | 22Fr | • | 28-N4-40-259-40U | |
| 200mm | 37-38 | 42 | 204 | 23Fr | | 28-N4-42-204-42U | |
| | 39-40 | 44 | 209 | 23Fr | | 28-N4-44-209-44U | |
| | 41-42 | 46 | 209 | 23Fr | • | 28-N4-46-209-46U | |
| | 37-38 | 42 | 259 | 23Fr | • | 28-N4-42-259-42U | |
| | 39-40 | 44 | 259 | 23Fr | • | 28-N4-44-259-44U | |
| | 41-42 | 46 | 259 | 23Fr | • | 28-N4-46-259-46U | |

* 22mm diameter stent-grafts are only approved to treat traumatic aortic injuries (transections)

^ Made To Order devices are not kept in stock. They will be built upon receipt of Purchase Order and are subject to extended lead times.

All measurements in mm unless otherwise specified. Select the appropriate device size based on artery outer diameter measurement taken from CT images.

RelayPro Product Ordering Information



Bare Stent: Tapered

| | Vessel | | Stent-graft | | Delivery System | | | Catalog Number |
|-------|-------------------|-----------------|--------------------------|----------------|-----------------|-----------------|------------------|----------------|
| | Proximal Diameter | Distal Diameter | Proximal/Distal Diameter | Covered Length | Profile OD | Made to Order ^ | | |
| 150mm | 24-25 | 20-21 | 28/24 | 155 | 19Fr | | 28-M4-28-155-24U | |
| | 26-27 | 22-23 | 30/26 | 155 | 19Fr | | 28-M4-30-155-26U | |
| | 28-29 | 24-25 | 32/28 | 155 | 20Fr | | 28-M4-32-155-28U | |
| | 30-31 | 26-27 | 34/30 | 145 | 20Fr | | 28-M4-34-145-30U | |
| | 32-33 | 28-29 | 36/32 | 145 | 20Fr | | 28-M4-36-145-32U | |
| | 34 | 30-31 | 38/34 | 145 | 21Fr | | 28-M4-38-145-34U | |
| | 35-36 | 32-33 | 40/36 | 145 | 21Fr | | 28-M4-40-145-36U | |
| | 37-38 | 34 | 42/38 | 150 | 22Fr | | 28-M4-42-150-38U | |
| | 39-40 | 35-36 | 44/40 | 155 | 22Fr | | 28-M4-44-155-40U | |
| | 41-42 | 37-38 | 46/42 | 155 | 22Fr | • | 28-M4-46-155-42U | |
| 200mm | 24-25 | 20-21 | 28/24 | 195 | 19Fr | | 28-M4-28-195-24U | |
| | 26-27 | 22-23 | 30/26 | 200 | 19Fr | | 28-M4-30-200-26U | |
| | 28-29 | 24-25 | 32/28 | 200 | 20Fr | | 28-M4-32-200-28U | |
| | 30-31 | 26-27 | 34/30 | 200 | 20Fr | | 28-M4-34-200-30U | |
| | 32-33 | 28-29 | 36/32 | 190 | 20Fr | | 28-M4-36-190-32U | |
| | 34 | 30-31 | 38/34 | 190 | 21Fr | | 28-M4-38-190-34U | |
| | 35-36 | 32-33 | 40/36 | 195 | 21Fr | | 28-M4-40-195-36U | |
| | 37-38 | 34 | 42/38 | 195 | 22Fr | | 28-M4-42-195-38U | |
| | 39-40 | 35-36 | 44/40 | 200 | 22Fr | | 28-M4-44-200-40U | |
| | 41-42 | 37-38 | 46/42 | 200 | 22Fr | • | 28-M4-46-200-42U | |
| 250mm | 24-25 | 20-21 | 28/24 | 250 | 19Fr | | 28-M4-28-250-24U | |
| | 26-27 | 22-23 | 30/26 | 250 | 19Fr | | 28-M4-30-250-26U | |
| | 28-29 | 24-25 | 32/28 | 250 | 20Fr | | 28-M4-32-250-28U | |
| | 30-31 | 26-27 | 34/30 | 250 | 20Fr | | 28-M4-34-250-30U | |
| | 32-33 | 28-29 | 36/32 | 250 | 20Fr | | 28-M4-36-250-32U | |
| | 34 | 30-31 | 38/34 | 250 | 21Fr | | 28-M4-38-250-34U | |
| | 35-36 | 32-33 | 40/36 | 250 | 21Fr | | 28-M4-40-250-36U | |
| | 37-38 | 34 | 42/38 | 250 | 22Fr | • | 28-M4-42-250-38U | |
| | 39-40 | 35-36 | 44/40 | 250 | 22Fr | • | 28-M4-44-250-40U | |
| | 41-42 | 37-38 | 46/42 | 250 | 22Fr | • | 28-M4-46-250-42U | |

Non-Bare Stent: Tapered

| | Vessel | | Stent-graft | | Delivery System | | | Catalog Number |
|-------|-------------------|-----------------|--------------------------|----------------|-----------------|-----------------|------------------|----------------|
| | Proximal Diameter | Distal Diameter | Proximal/Distal Diameter | Covered Length | Profile OD | Made to Order ^ | | |
| 150mm | 24-25 | 20-21 | 28/24 | 164 | 20Fr | | 28-N4-28-164-24U | |
| | 26-27 | 22-23 | 30/26 | 164 | 20Fr | | 28-N4-30-164-26U | |
| | 28-29 | 24-25 | 32/28 | 164 | 21Fr | | 28-N4-32-164-28U | |
| | 30-31 | 26-27 | 34/30 | 154 | 21Fr | | 28-N4-34-154-30U | |
| | 32-33 | 28-29 | 36/32 | 154 | 22Fr | | 28-N4-36-154-32U | |
| | 34 | 30-31 | 38/34 | 154 | 22Fr | | 28-N4-38-154-34U | |
| | 35-36 | 32-33 | 40/36 | 154 | 22Fr | | 28-N4-40-154-36U | |
| | 37-38 | 34 | 42/38 | 159 | 23Fr | | 28-N4-42-159-38U | |
| | 39-40 | 35-36 | 44/40 | 164 | 23Fr | | 28-N4-44-164-40U | |
| | 41-42 | 37-38 | 46/42 | 164 | 23Fr | • | 28-N4-46-164-42U | |
| 200mm | 24-25 | 20-21 | 28/24 | 204 | 20Fr | | 28-N4-28-204-24U | |
| | 26-27 | 22-23 | 30/26 | 209 | 20Fr | | 28-N4-30-209-26U | |
| | 28-29 | 24-25 | 32/28 | 209 | 21Fr | | 28-N4-32-209-28U | |
| | 30-31 | 26-27 | 34/30 | 209 | 21Fr | | 28-N4-34-209-30U | |
| | 32-33 | 28-29 | 36/32 | 199 | 22Fr | | 28-N4-36-199-32U | |
| | 34 | 30-31 | 38/34 | 199 | 22Fr | | 28-N4-38-199-34U | |
| | 35-36 | 32-33 | 40/36 | 204 | 22Fr | | 28-N4-40-204-36U | |
| | 37-38 | 34 | 42/38 | 204 | 23Fr | | 28-N4-42-204-38U | |
| | 39-40 | 35-36 | 44/40 | 209 | 23Fr | | 28-N4-44-209-40U | |
| | 41-42 | 37-38 | 46/42 | 209 | 23Fr | • | 28-N4-46-209-42U | |
| 250mm | 24-25 | 20-21 | 28/24 | 259 | 20Fr | • | 28-N4-28-259-24U | |
| | 26-27 | 22-23 | 30/26 | 259 | 20Fr | • | 28-N4-30-259-26U | |
| | 28-29 | 24-25 | 32/28 | 259 | 21Fr | • | 28-N4-32-259-28U | |
| | 30-31 | 26-27 | 34/30 | 259 | 21Fr | • | 28-N4-34-259-30U | |
| | 32-33 | 28-29 | 36/32 | 259 | 22Fr | • | 28-N4-36-259-32U | |
| | 34 | 30-31 | 38/34 | 259 | 22Fr | • | 28-N4-38-259-34U | |
| | 35-36 | 32-33 | 40/36 | 259 | 22Fr | • | 28-N4-40-259-36U | |
| | 37-38 | 34 | 42/38 | 259 | 23Fr | • | 28-N4-42-259-38U | |
| | 39-40 | 35-36 | 44/40 | 259 | 23Fr | • | 28-N4-44-259-40U | |
| | 41-42 | 37-38 | 46/42 | 259 | 23Fr | • | 28-N4-46-259-42U | |



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^ Made To Order devices are not kept in stock. They will be built upon receipt of Purchase Order and are subject to extended lead times. All measurements in mm unless otherwise specified. Select the appropriate device size based on artery outer diameter measurement taken from CT images.



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