Treat PE Differently

Purpose-Driven Innovation. Proven Clinical Performance.

The FlowTriever® System // Single-Session, Lytic-Free Treatment of Pulmonary Embolism



Purpose-built for the treatment of pulmonary embolism (PE)

The **FlowTriever** system delivers rapid symptom improvement in a single session without thrombolytics and consequent ICU stay.



0.27" lumen

Large bore technology for rapid aspiration of large clot burden: best-in-class aspiration rate of

150 cc/s

Triever16. Triever20. and Triever24 catheters are highly trackable to navigate tortuous anatomy.

FlowTriever catheters



Industry-leading clinical evidence



The **FlowTriever** system is the most studied mechanical thrombectomy device for the treatment of PE with unmatched procedural safety and proven outcomes.

Improving the natural course of PE

Clot removal results in potential positive long-term implications.



91% Decrease in severe dyspnea at 6 months¹⁰





FlowTriever® System Percutaneous Pulmonary Embolectomy Clinical Registry Study

Market-leading innovation for the treatment of PE

The **FlowTriever** system is rapidly evolving to offer the latest product innovation for optimal treatment.

Triever20 Curve[®] catheter

260° Directionality for improved navigation

Telescopic steerability for targeted aspiration

FlowTriever2[®] catheter*

- Disrupt and extract clot

Laser cut element with proximal open cell and closed distal cell design for optimal clot clearance

Market-leading innovation for the treatment of PE

FlowStasis[®] suture retention

Providing rapid hemostasis

Patent hemostasis eliminating vessel injury on access up to 27 Fr

FlowSaver[®]blood return system

Enabling bloodless thrombectomy



Reducing blood loss by filtering aspirated thrombi and blood for reinfusion back to the patient

Transforming the lives of patients suffering from PE

The **FlowTriever** system offers patients suffering from acute PE immediate symptom relief and reversal of right heart strain that can lead to mortality and long-term morbidity.

280,000 intermediate and high-risk PE diagnosed each year in US¹¹

30-day all-cause mortality rates as high as **30%** ¹²

PE is the **3rd leading cause** of cardiovascular death¹²

Affects patients of **all ages**¹³

Extracting large clots for immediate symptom improvement

Rapid thrombus extraction with the **FlowTriever** system delivers on-table symptom improvement for patients with acute PE.





To learn more about the **FlowTriever** system visit **InariMedical.com**

References:

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9. Pizano, A. et al. Initial experience and early outcomes of the management of acute pulmonary embolism using the FlowTriever mechanical thrombectomy device. J Cardiovasc Surg (Torino). 2021 Nov.

10. Toma, C. FLASH Interim Results. Presented at TCT 2021.

11. Management estimates based on claims data.

12. Giri, J. et al. Interventional Therapies for Acute Pulmonary Embolism: Current Status and Principles for the Development of Novel Evidence: A Scientific Statement From the American Heart Association. Circulation. 2019 Nov.

13. CDC Venous Thromboembolism. Blood clot risk.

Indications for Use: The FlowTriever® system is indicated for (1) the non-surgical removal of emboli and thrombi from blood vessels; and (2) injection, infusion and/or aspiration of contrast media and other fluids into or from a blood vessel. The FlowTriever system is intended for use in the peripheral vasculature and for the treatment of pulmonary embolism. Triever catheters are intended for use in treating clot in transit in the right atrium, but not in conjunction with FlowTriever catheters. The FlowTriever2® catheter is intended for use in the peripheral vasculature. The FlowSaver® blood return system is used with Triever catheters for autologous blood transfusion. The FlowStasis® device is intended for temporary suture retention following a percutaneous venous procedure.

See Instructions for Use for complete Indications for Use, contraindications, warnings, and precautions.

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

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