## Penumbra System<sup>®</sup>



# More Power for Distal Occlusions



**3MAX** Smaller Catheter OD

### Study Background

- Single center, retrospective analysis of prospectively obtained data
- Angiographic results graded by blinded neurointerventionalist
- Consecutive patients with tandem proximal/distal occlusions or in-situ distal occlusions
- Reperfusion Catheters used: 3MAX, 4MAX, 5MAX, and ACE<sup>™</sup>60





Final TICI 2b-3

mRS  $\leq$  2 at 90 days

1.65 mm OD dedicated for distal occlusions

LONG 138 cm LENGTH reaches distal

Penumbra

JETD

LARGE ASPIRATION LUMEN .054" / .064" ID

**OPTIMAL TRACKING PROFILE** for tortuous navigation

PENUMBRA ENGINE

**DELIVER WITH 3MAX**<sup>™</sup> (160 cm) **OR VELOCITY® MICROCATHETER** 

PENUMBRA JET D POWERED BY

a. Tests performed and data on file at Penumbra. Inc. Bench test results may not be indicative of clinical performance. Thrombus Removal Force is calculated using catheter tip area multiplied by vacuum level with Penumbra ENGIN



## 2.4× the TRF of 3MAX<sup>a</sup>





## ORDERING INFORMATION

		Proximal OD	Distal OD	Proximal ID	Distal ID	Working Length
Catalog Number	Description	(F) (in.)	(mm)	(in.)	(in.)	(cm)
Aspiration Kits						
5MAXJET7KIT	Penumbra JET <sup>™</sup> 7 Reperfusion Catheter + Penumbra Hi-Flow Tubing	6.0 (.085)	2.16	.072	.072	132
5MAXJETDKIT	Penumbra JET D Reperfusion Catheter + Penumbra Hi-Flow Tubing	6.0 (.080)	1.65	.064	.054	138
5MAXACE068KIT	ACE <sup>™</sup> 68 Reperfusion Catheter + Penumbra Hi-Flow Tubing	6.0 (.080)	2.03	.068	.068	132
5MAXACE132KIT	ACE60 Reperfusion Catheter + Penumbra Hi-Flow Tubing	6.0 (.080)	1.80	.068	.060	132
BMAXCKIT	3MAX <sup>™</sup> Reperfusion Catheter + Penumbra Hi-Flow Tubing	4.7 (.062)	1.27	.043	.035	160

**Reperfusion Catheters** Penumbra JET D Reperfusion Catheter 5MAXJETD 5MAXACE068 ACE68 Reperfusion Catheter 5MAXACE132 ACE60 Reperfusion Catheter

0111/1/10	
<b>Revascularization Device</b> PSR3D	3D Revascularization Device™
<b>Delivery Microcatheter</b> VEL160STR	Velocity® Microcatheter
Separator <sup>™</sup> Devices	
PSF054	5MAX Separator
3MAXS	3MAX Separator
Aspiration Accessories	
PMXENGN	Penumbra ENGINE <sup>™</sup>
PAPS3	Penumbra ENGINE Canister

		The Slight	working Lengu
Catalog Number	Description		(cm)
(Crosscut Valve,	RHV, and Dilator Included)	-	
PNML6F088904	6 F 088 Neuron MAX Long Sheath, Straight		90
	or ooo neuron wax Long Sheath, Straight		90

		rip Snape	working Lengui
Catalog Number	Description		(cm)
PNS6F105BER	6 F Select Catheter, BER	٦ ٦	105
PNS6F125SIM	6 F Select Catheter, SIM	۳.	125
PNS6F125SIMV	6 F Select Catheter, SIMV	Ś	125
PNS6F125BER	6 F Select Catheter, BER	ĵ	125

Indication for Use Penumbra Reperfusion Catheters and Separators As part of the PENUMBRA SYSTEM, the Reperfusion Catheters and Separators are indicated for use in the revascularization of patients with acute ischemic stroke secondary to intracranial terra useral conjunity director lutility in integral acratic

patients with acute ischemic stroke secondary to intracranial large vessel occlusive disease (within the internal carotid, middle cerebral – M1 and M2 segments, basilar, and vertebral arteries) within 8 hours of symptom onset. Patients who are ineligible for intravenous tissue plasminogen activator (V1-PA) or who fail IV 1-PA therapy are candidates for treatment. **Penumbra 3D REVASCULARIZATION DEVICE** As part of the PENUMBRA SYSTEM, the Penumbra REVASCU-LARIZATION DEVICE is indicated for use in the revascular-ization of patients with acute ischemic stroke secondary to intracranial large vessel occlusive disease (within the internal carotid, middle cerebral – M1 and M2 segments) within 8 hours of symptom onset. Patients who are neligible for intravenous tissue plasminogen activator (V1-PA) or who fail IV1-PA therapy are candidates for treatment. **Penumbra Aspiration Tubing** 

As part of the PENUMBRA SYSTEM, the Penumbra Sterile Aspr-ration Tubing is indicated to connect the Penumbra Reperfusion Catheters to the Penumbra Aspiration Pump. **Penumbra Aspiration Pump** The Penumbra Aspiration Pump is indicated as a vacuum source for Penumbra Aspiration Systems. Contraindications

### There are no known contraindications

The device is intended for single use only. Do not resterilize or reuse. Resterilization and/or Reuse may result in ineffective catheter coating lubrication, which may result in high friction and the inability to access the target neuro vasculature location.

and the maining to access the aliger field vasculature location. • Do not use kinked or damaged devices. Do not use open or damaged packages. Return all damaged devices and packaging to the manufacturer/distributor. • Do not use automated high-pressure contrast injection equipment with the Penumbra Reperfusion Catheter because it may damage the device. • Confirm vessel diameter, and select an appropriate size Penumbra Reperfusion Catheter. Do not use in arteries with diameters smaller or equal to the distal outer diameter of the Penumbra Reperfusion Catheters. Refer to the Reperfusion Catheter labeling for dimensional information. • Do not advance, retract or use any component of the PENUMBRA SYSTEM against resistance without careful assessment of the cause using fluoroscopy. If the cause

cannot be determined, withdraw the device or system as a unit. Unrestrained torquing or forced insertion of the catheter, revascularization device, or separator against resistance may result in damage to the device or vessel. Do not use the PENUMBRA SYSTEM with a pump other than

the Penumbra Aspiration Pump. The Penumbra 3D REVASCULARIZATION DEVICE has not been evaluated in patients with angiographic evidence of pre-existing arterial injury.

Precautions • The PENUMBRA SYSTEM should only be used by physicians who have received appropriate training in interventional neuro-endovascular techniques and treatment of acute Use prior to the "Use By" date.
 Use the PENUMBRA SYSTEM in conjunction with fluoroscop Locara the the Use Market All System in Conjunction with fluoroscop-

ic visualization.

ic visualization. • As in all fluoroscopy procedures, consider all necessary pre-cautions to limit patient radiation exposure by using sufficient shielding, reducing fluoroscopy times and modifying radiation technical factors whenever possible. • Maintain a constant infusion of appropriate flush solution. • When performing aspiration, ensure that the Penumbra Aspiration Tubing valve is open for only the minimum time needed to remove thrombus. Excessive aspiration or failure to close the Penumbra Aspiration Tubing valve when aspiration is complete is not recommended. • The Penumbra SEPARATOR is not intended for use as a neurovascular ouldewire. If repositioning of the Penumbra

Reperfusion Catheter is necessary during the revascular-ization procedure, such repositioning of the performed

Ization proceedines, a clicit repositioning should be period med over an appropriate neurovascular guidewire using standard microcatheter and guidewire techniques. Administration of anticoagulants and antiplatelets should be suspended until 24 hours post-treatment. Medical manage-ment and acute post stroke care should follow the ASA guide-lines.<sup>1</sup> Any neurological deterioration should be evaluated by urgent CT scan and other evaluations as indicated according to investinator/honsital best roactice

to investigator/hospital best practice. A sin all surgical interventions, monitoring of intra-procedural blood loss is recommended so that appropriate management may be instituted.

Pote tial Adverse Events Possible complications include, but are not limited to, the following: allergic reaction and anaphylaxis from contrast media; acute occlusion; air embolism; arteriovenous fistu death; device malfunction; distal embolization; emboli; false aneurysm formation; hematoma or hemorrhage at access si ma or hemorrhade at acc

inability to completely remove thrombus; infection; intracranial hemorrhage; ischemia; kidney damage from contrast media; neurological deficits including stroke; vessel spasm, thrombosi dissection, or perforation; radiation exposure that may lead to cataracts, skin reddening, burns, alopecia, or neoplasia from the redevences of the strong stroke x-rav exposure.

1. Adams, et al., Guidelines for the Early Management of Adults with Ischemic Stroke: A Guideline from the AHA/ASA Stroke Council, Clinical Cardiology Council, Cardiovascular Radiology and Intervention Council, and the Alherosclerotic Peripheral Vascular Disease and Quality of Care Outcomes in Research Interdisciplinary Working Groups: The American Academy of Neurology affirms the value of this guideline as an educational tool for neurologists, Stroke May 2007; 38:1655-1711.

## PENUMBRA ENGINE – Indication For Use The PENUMBRA ENGINE is indicated as a vacuum source for

bra Aspiration Systems. indications

There are no contraindications.

The canister is intended for single use only. Do not reuse. Re-use may result in canister cracking or vacuum filter blockages, which may result in the inability to aspirate.
Do not block bottom air vents. Unit may overheat and shut off or fail to restart if run for extended periods of time without airflow

airflow. • To avoid the risk of electrical shock, this equipment must only

To avoid the risk of electrical shock, this equipment must only be connected to a supply mains with protective earth.
 Do not position the PENUMBRA ENGINE so that it is difficult to remove the power cord. The means of mains disconnect is to remove the power cord.
 Only use replacement fuse with correct rating (see Table 1 for fuse rating).
 Remove and service the PENUMBRA ENGINE if liquids or solids have been drawn into the DENUMBRA ENGINE

Hemove and service the PENUMBRA ENGINE if liquids or solids have been drawn into the PENUMBRA ENGINE.
 Do not use in the presence of a flammable anesthetic mixture with air or nitrous oxide.
 Do not use in an oxygen rich environment.
 To prevent fire or shock hazard, use a replacement power cord of equal rating.
 Do not re-infuse blood or fluid from the canister back into the netimet

the patient. Do not use petroleum based compounds, acids, caustics, or chlorinated solvents to clean or lubricate any parts. It will reduce the service life of the PENUMBRA ENGINE. Use only

Use of this equipment adjacent to or stacked with other equipment should be avoided because it could result in

equipment should be avoided because in count result in improper operation. If such use is necessary, this equipment and the other equipment should be observed to verify that they are operating normally. Portable RF communications equipment (including peripherals such as antenna cables and external antennas) should be used no closer than 30 cm (12 inches) to any part of the PENUMBRA ENGINE. Otherwise, this could result in degradation of the performance of this equipment

Performance of this equipment. Common emitters (such as RFID emitters, security systems, diathermy equipment, and portable transmitters) should not be used in close proximity to the PENUMBRA ENGINE as they can uld not be interfere with and result in degradation of the performance of the equipment. Equipment is not safe for MR use. No modification of this equipment is allowed.

Penumbra Delivery Microcatheters – Indication for Use The Penumbra Delivery Microcatheters are intended to assist in the delivery of diagnostic agents, such as contrast media, and therapeutic agents, such as occlusion coils to the peripheral and neuro vasculature.

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There are no known contraindications.

Warnings The Penumbra Delivery Microcatheters should only be used by physicians who have received appropriate training in interventional techniques.

Precautions
The devices are intended for single use only. Do not resterilize The devices are intended for single use only. Do not resterilize or reuse. Resterilization and/or reuse may result in high friction and the inability to access the target location. Do not use kinked or damaged devices. Do not use open or damaged packages. Return all damaged devices and packaging to the manufacturer/distributor. Use prior to the "Use By" date. Use the Penumbra Delivery Microcatheters in conjunction with fluorosconic visualization

Use the Penumbra Delivery Microcatheters in conjunction with fluoroscopic visualization.
Do not advance or withdraw the Penumbra Delivery Microca-theters against resistance without careful assessment of the cause using fluoroscopy. If the cause cannot be determined, withdraw the device. Moving or torquing the device against resistance may result in damage to the vessel or device.
Maintain a constant infusion of an appropriate flush solution.
If flow through the device becomes restricted, do not attempt to door the human built infusion. Demanwance and regional the solution.

## to clear the lumen by infusion. Remove and replace the device. Potential Adverse Events Possible complications include, but are not limited to, the following: acute occlusion; hematoma or hemorrhage at access site; death; intracranial hemorrhage; hemorrhage; infection (at access site); distal embolization; ischemia (cardiac and/or cerebral); embolus (air, foreign body, thrombus, plaque); aneurysm perforation; false aneurysm formation; neurological deficits including stroke; vessel spasm, thrombosis, dissection, perforation or rupture; air m<sup>.</sup> emboli

NEURON MAX System – Indication for Use The NEURON MAX System is indicated for the introduction of interventional devices into the peripheral, coronary, and neuro vasculature.

Contraindications There are no known contraindications.

Warnings The NEURON MAX System should only be used by

The NEURON MAX System should only be used by physicians who have received appropriate training in interventional techniques. Precautions - The device is intended for single use only. Do not resterilize or reuse. Resterilization and/or reuse may result in inplicit catheter coating lubrication, which may result in inplicit and the inability to access the target vasculature location; and/or may compromise the structural integrity of the device. - Do not use kinked or damaged devices. Do not use open or damaged packages. Return all damaged devices and packaging to the manufacturer/distributor. - Use prior to the "Use By" date. - Use the NEURON MAX System in conjunction with fluoro-scopic visualization. - Do not advance or withdraw the NEURON MAX System against resistance without careful assessment of the cause

against resistance without careful assessment of the cause using fluoroscopy. If the cause cannot be determined, withdraw the device. Unrestrained moving or torquing the device against resistance may result in damage to the vessel

Maintain a constant infusion of an appropriate flush solution. If flow through the device becomes restricted, do not attempt to clear the lumen by infusion. Remove and replace the

to clear the terms by indexentions of the device. Potential Adverse Events Possible complications include, but are not limited to, the following: acute occlusion; air embolism; death; distal embolization; emboli; false aneurysm formation; hematoma or hemorrhage at puncture site; infection; intracranial hem-orhage: ischemia: neurological deficits including stroke; vessel spasm, thrombosis, dissection, or perforation



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Caution: Federal (USA) law restricts these devices to sale by or on the order of a physician. Prior to use, please refer to the Instructions for Use for complete product indications, contraindications, warnings, precautions, potential adverse events, and detailed instructions for use. Please contact your local Penumbra representative for more information.

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