

A detailed 3D rendering of the Indigo System catheter. The main body is a thick, orange, flexible tube that curves from the bottom left towards the top center. At the end of this tube is a dark purple, bulbous component, which is the handle of the catheter. Extending from the handle is a long, thin, braided metal wire that curves upwards and to the right. The entire device is set against a solid blue background with a subtle, diagonal line pattern.

Indigo System

Peripheral Mechanical Thrombectomy

Penumbra 

Indigo System Catheters



CAT
8

Arterial, venous, and pulmonary
clot in larger vessels where cir-
cumferential aspiration is desired



CAT
6

Arterial clot in larger arteries
including SFA, popliteal, and
viscerals



CAT
5 & 3

Smaller, distal reach for upper
and lower arterial extremities



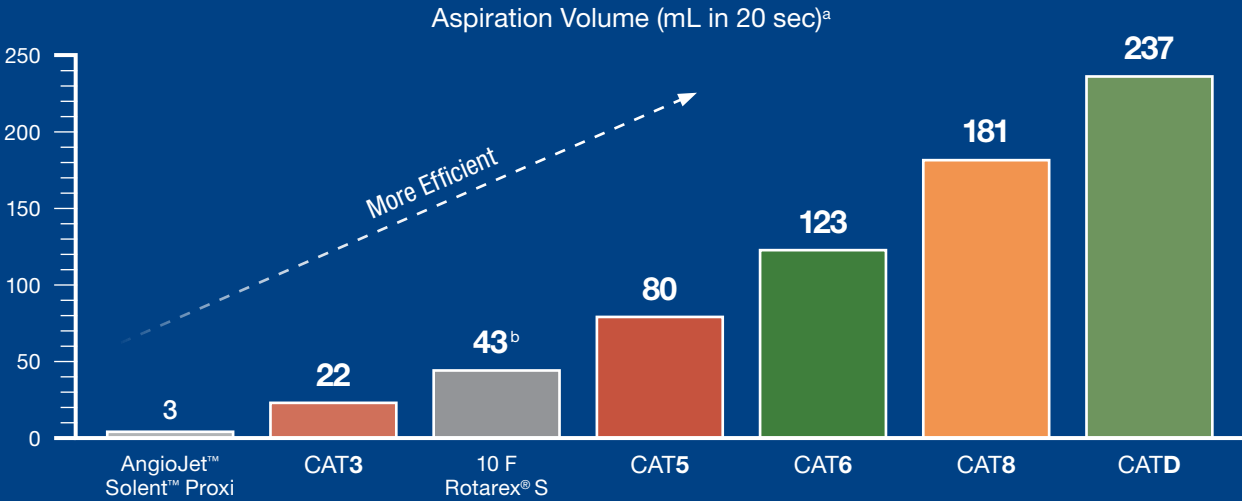
CAT
D

50 cm length for upper and
lower venous and AV fistula/graft
thrombus aspiration

Aspirate, Don't Macerate

Get the Clot Out with Indigo System

Power Aspiration with Indigo System



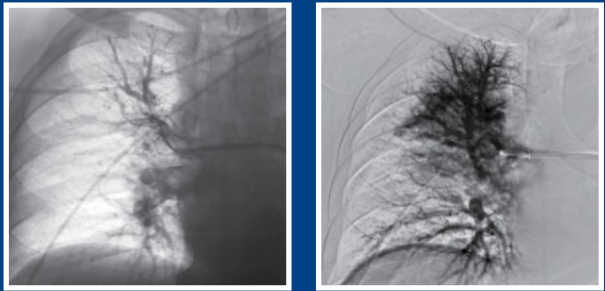
a. AngioJet setup tested with its own accessories and aspiration source per its Instructions for Use. Data for AngioJet Solent Proxi was collected in 2015.
Indigo System setup tested with its own accessories and aspiration source per its Instructions for Use. Tests performed using water.
b. Aspiration volume for Rotarex S Catheter was acquired from Rotarex S Catheter Instructions for Use. On file at Penumbra, Inc.

Benefits of Mechanical Power Aspiration

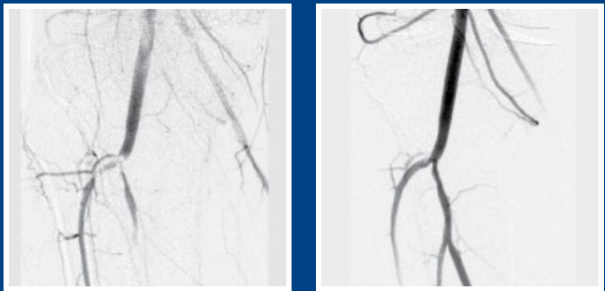
- Atraumatic tracking
- No reported bradycardia or hypotension^c

- No reported haemolysis or renal failure^c
- Can be used to retrieve distal emboli

c. Based on clinical data and complaint information. Data on file at Penumbra, Inc.



Removal of Thrombus from Pulmonary
Dr. Juan José Ciampi-Dopazo, Complejo Hospitalario de Toledo, Toledo, Spain



Removal of Thrombus from Tibioperoneal
Dr. James Benenati, Miami Cardiac and Vascular Institute, FL, USA



Indigo System Features

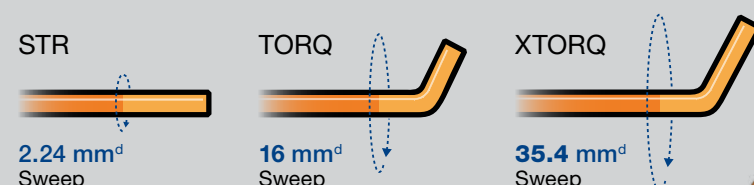
1 Mechanical Clot Engagement
Proprietary Separator Technology

2 Maximised Aspiration Power
Large Lumen Aspiration

3 Advanced Tracking Technology
Multiple Material Transitions

4 Tip Directionality for Circumferential Aspiration

CAT8 Tip Shapes

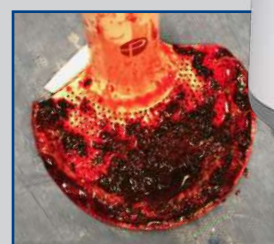


Powered by Penumbra ENGINE

One Touch for Maximum Aspiration
Powerful, Deep Vacuum

-29 inHg^e

Live Feedback During Procedure
Integrated Clot Catcher



Dr. Rajneesh Agrawal,
Desert Radiology, NV, USA



Easy Setup
Sleek, Simple Design

^d. Measurement calculated using tip angle and length.
^e. Tests performed and data on file at Penumbra, Inc.
Bench test results may not be indicative of clinical performance.

PRISM Trial Results^f

79 Patients

5 Centers

Corey Teigen, MD, Department of Interventional Radiology, Sanford Health, Fargo, ND, USA
James F. Benenati, MD, FSIR, Miami Cardiac & Vascular Institute, Miami, FL, USA
Richard R. Saxon, MD, San Diego Cardiac & Vascular Institute, San Diego, CA, USA
George L. Adams, MD, North Carolina Heart & Vascular Research, Raleigh, NC, USA
Luke Sewall, MD, Adventist Health Partners, Downers Grove, IL, USA

Above Knee/Popliteal

77.3%

Below Knee

22.8%

Successful Revascularisation
XTRACT with Indigo

87.2%

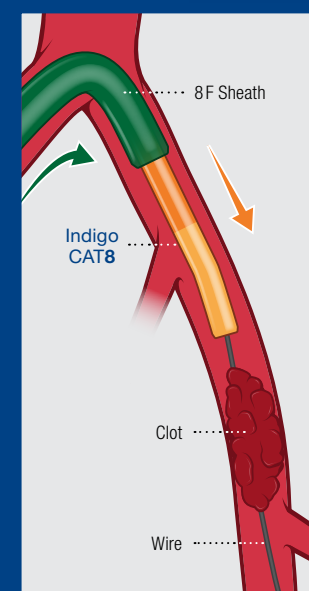
Successful Revascularisation
Post All Interventions

96.2%

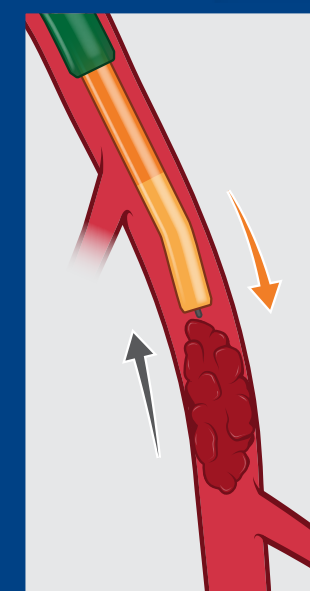
Successful Revascularisation was defined as TIMI 2-3 flow

Conclusion: XTRACT Technique with Indigo System is Safe and Effective

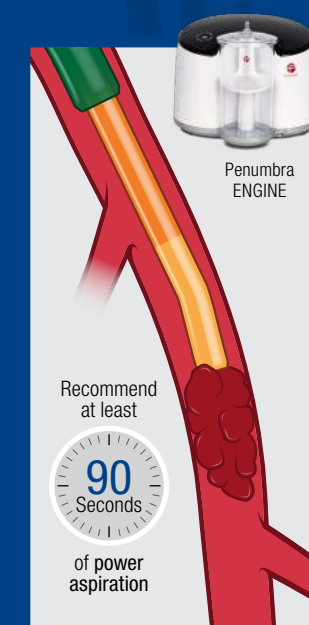
XTRACT Technique Used in PRISM Trial for Arterial Occlusions



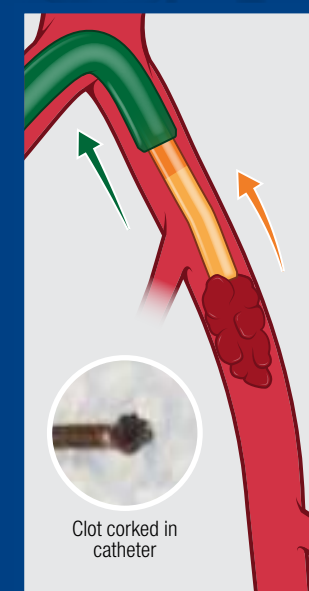
The contralateral sheath with RHV/Tuohy is positioned as close to the lesion as possible and the Indigo CAT8 is advanced through sheath over a wire.



The Indigo CAT8 is placed just proximal to the face of the clot and wire is retracted.



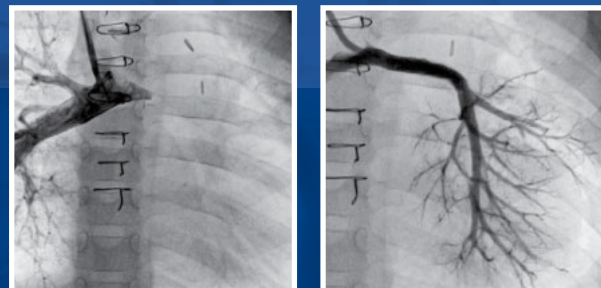
Aspiration is applied to Indigo CAT8 via Penumbra ENGINE until CAT8 becomes occluded (*recommend waiting at least 90 seconds*).



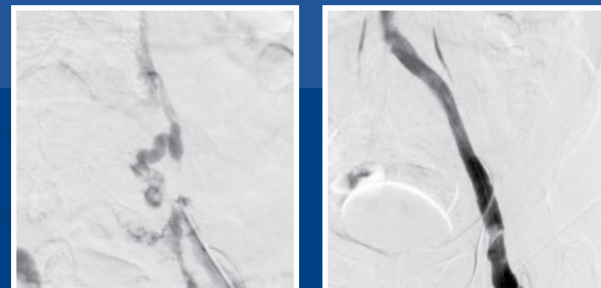
The Indigo CAT8 is removed under aspiration to ensure clot remains engaged in catheter tip and clot is extracted out of the body.

^f. Saxon RR, Benenati JF, Teigen C, Adams GL, Sewall LE; PRISM Trialists. Utility of a Power Aspiration-Based Extraction Technique as an Initial and Secondary Approach in the Treatment of Peripheral Arterial Thromboembolism: Results of the Multicenter PRISM Trial. *J Vasc Interv Radio*. 2018 Jan;29(1):92-100. doi:10.1016/j.jvir.2017.08.019.

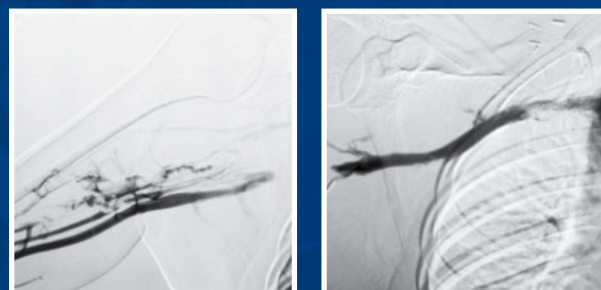
The opinions and clinical experiences presented herein are for informational purposes only. The results may not be predictive for all patients. Individual results may vary depending on a variety of patient-specific attributes. Renderings for illustrative purposes only. Procedural and operative techniques and considerations are illustrative examples from physician experience. Physicians' treatment and technique decisions will vary based on their medical judgment.



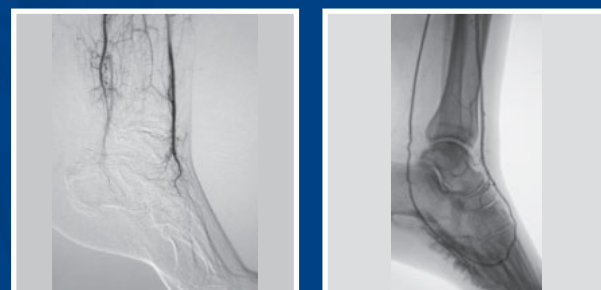
Removal of Thrombus from Pulmonary
Drs. Sergio Berti, Cataldo Palmieri, and Isabella Spadoni,
Fondazione Toscana Gabriele Monasterio, Ospedale del Cuore, Italy



Removal of Thrombus from Iliac & Femoral Vein
Dr. Michael Lichtenberg, Klinikum Arnsberg, Arnsberg, Germany

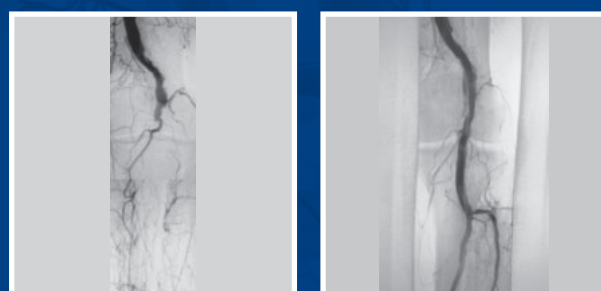


Removal of Thrombus from Subclavian Vein
Dr. Frank Arko, Atrium Health, NC, USA



Removal of Thrombus from BTA
Dr. Gianmarco de Donato, University of Siena, Siena, Italy

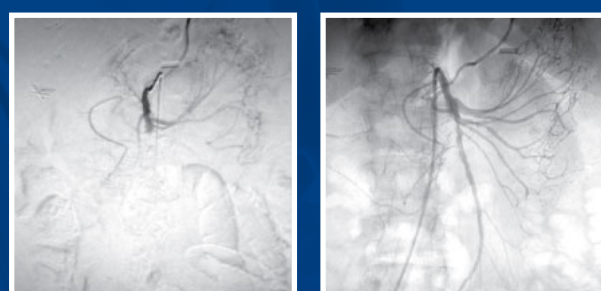
Up to 8F Arterial, Venous, and Pulmonary Indication



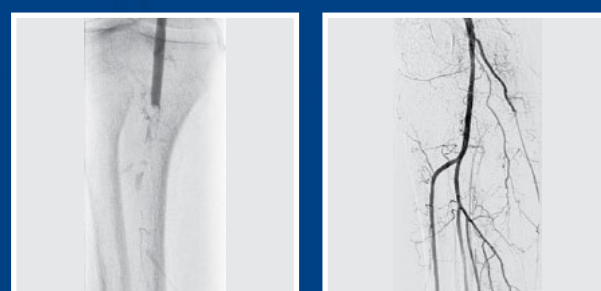
Removal of Thrombus from Popliteal Artery
Dr. Theodosios Bisdas, Athens Medical Center, Athens, Greece



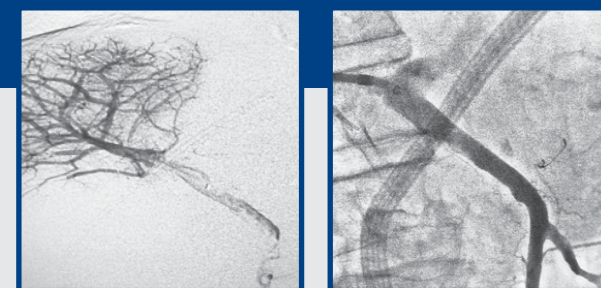
Removal of Thrombus from Occluded SFA Stent
Dr. George Adams, REX/UNC Healthcare, NC, USA



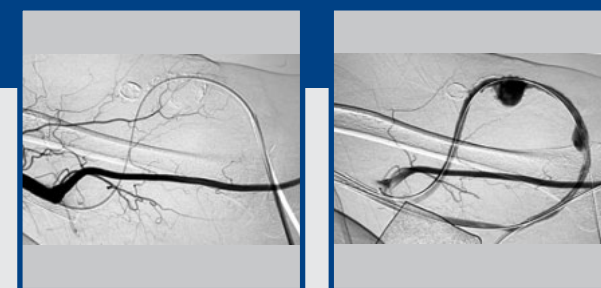
Removal of Thrombus from SMA
Drs. Rahul Patel & Robert Lookstein, Mount Sinai Hospital, NY, USA



Removal of Thrombus from Popliteal Artery
Dr. Maria Antonella Ruffino, Città della Salute e della Scienza di Torino, Torino, Italy



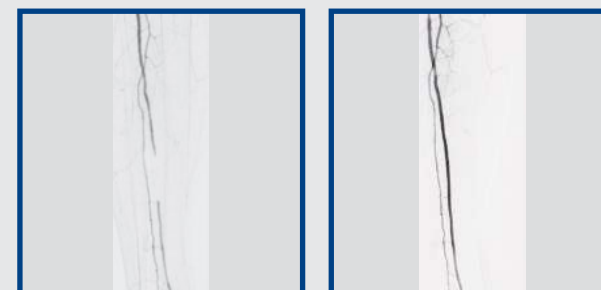
Removal of Thrombus from Portal Vein
Dr. Rafik Lababidi, Largo Medical Center, FL, USA



Removal of Thrombus from AV Fistula
Dr. Venkatpavel Tummala, Lakeland Regional Medical Center, FL, USA



Removal of SFA Chronic Total Occlusion
Dr. Branavan Umakanthan, Nevada Heart and Vascular Center, NV, USA



Removal of Thrombus from Anterior Tibial
Dr. Florian Wolf, Allgemeines Krankenhaus der Stadt Wien, Vienna, Austria

Indigo System Powered by Penumbra ENGINE

Indigo System Setup

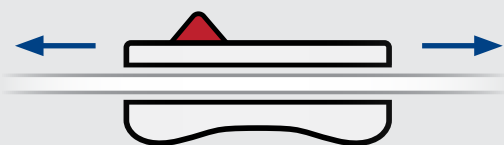
- Press down firmly to secure Penumbra ENGINE Canister
- Set Dynamic Flow Switch to **OFF**
- Attach aspiration tubing to Canister
- Power **ON** Penumbra ENGINE; 4 LEDs illuminate, indicating powerful, deep vacuum
- Attach Indigo System Aspiration Catheter to aspiration tubing



Indigo System

Now Packaged with Dynamic Tubing

Ability to Slide Flow Switch



64% Larger Flow Switch ID^g



Large Lumen
Flow Switch



Dynamic Flow Switch

^g. Compared to previous Flow Switch. Data on file at Penumbra, Inc.
Flow Switch comparison images shown at same scale.

Indigo Catheter Kits

Catalog Number	Description	Proximal OD	Distal OD	Compatibility (Sheath or Guide)	Working Length (cm)	Wire Platform (in.) (mm)	Compatible Penumbra Devices
CAT8XTORQ115KIT – Now!	Indigo 8 XTORQ Tip + Dynamic Aspiration Tubing	8 F (2.67 mm)	8 F (2.67 mm)	8 F (2.67 mm) Sheath	115	.014–.038 (.36–.97)	Separator 8
CAT8TORQ85KIT – Now!	Indigo 8 TORQ Tip + Dynamic Aspiration Tubing	8 F (2.67 mm)	8 F (2.67 mm)	8 F (2.67 mm) Sheath	85	.014–.038 (.36–.97)	Separator 8
CAT8STR85KIT – Now!	Indigo 8 Straight Tip + Dynamic Aspiration Tubing	8 F (2.67 mm)	8 F (2.67 mm)	8 F (2.67 mm) Sheath	85	.014–.038 (.36–.97)	Separator 8
CAT6KIT – Now!	Indigo 6 + Dynamic Aspiration Tubing	6 F (2.00 mm)	6 F (2.00 mm)	6 F (2.00 mm) Sheath	135	.014–.038 (.36–.97)	Separator 6
CAT5KIT – Now!	Indigo 5 + Dynamic Aspiration Tubing	6 F (2.00 mm)	5 F (1.65 mm)	6 F (2.00 mm) Sheath	132	.014–.038 (.36–.97)	Separator 5
CAT3KIT – Now!	Indigo 3 + Dynamic Aspiration Tubing	4.1 F (1.37 mm)	3.4 F (1.14 mm)	5 F (1.65 mm) Sheath	150	.014–.025 (.36–.64)	Separator 3
CATD – Now!	Indigo D + Dynamic Aspiration Tubing	8 F (2.67 mm)	8 F (2.67 mm)	8 F (2.67 mm) Sheath	50	.014–.038 (.36–.97)	Separator D

Indigo Separators

Catalog Number	Description	Distal OD (in.) (mm)	Total Length (cm)	Compatible Penumbra Devices
SEP8	Separator 8	.072 (1.83)	150	CAT8
SEP6	Separator 6	.055 (1.40)	175	CAT6
SEP5	Separator 5	.045 (1.14)	175	CAT5
SEP3	Separator 3	.028 (.71)	190	CAT3
SEPD	Separator D	.072 (1.83)	90	CATD

Accessories

Catalog Number	Description	Compatible Penumbra Devices
PMXENG – Now!	Penumbra ENGINE	Penumbra ENGINE Canister
IAPS3 – Now!	Penumbra ENGINE Canister	Penumbra ENGINE

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.

INDIGO Aspiration System – Intended Use

The INDIGO Aspiration System is intended for the removal of fresh, soft emboli and thrombi from vessels of the peripheral arterial and venous systems and certain central circulatory system conditions such as pulmonary emboli using continuous aspiration.

Potential Adverse Events

Possible complications include, but are not limited to, the following: allergic reaction and anaphylaxis from contrast media; acute occlusion; air embolism; arteriovenous fistula; death; device malfunction; distal embolization; emboli; false aneurysm formation; hematoma or hemorrhage at access site; inability to completely remove thrombus; infection; hemorrhage; ischemia; kidney damage from contrast media; neurological deficits including stroke; vessel spasm, thrombosis, dissection, or perforation; intimal disruption; myocardial infarction; emergent surgery; fibrillation; hypotension; respiratory failure; peripheral thromboembolic events.

PENUMBRA ENGINE – Intended Use

The PENUMBRA ENGINE is intended as a vacuum source for Penumbra Aspiration Systems.



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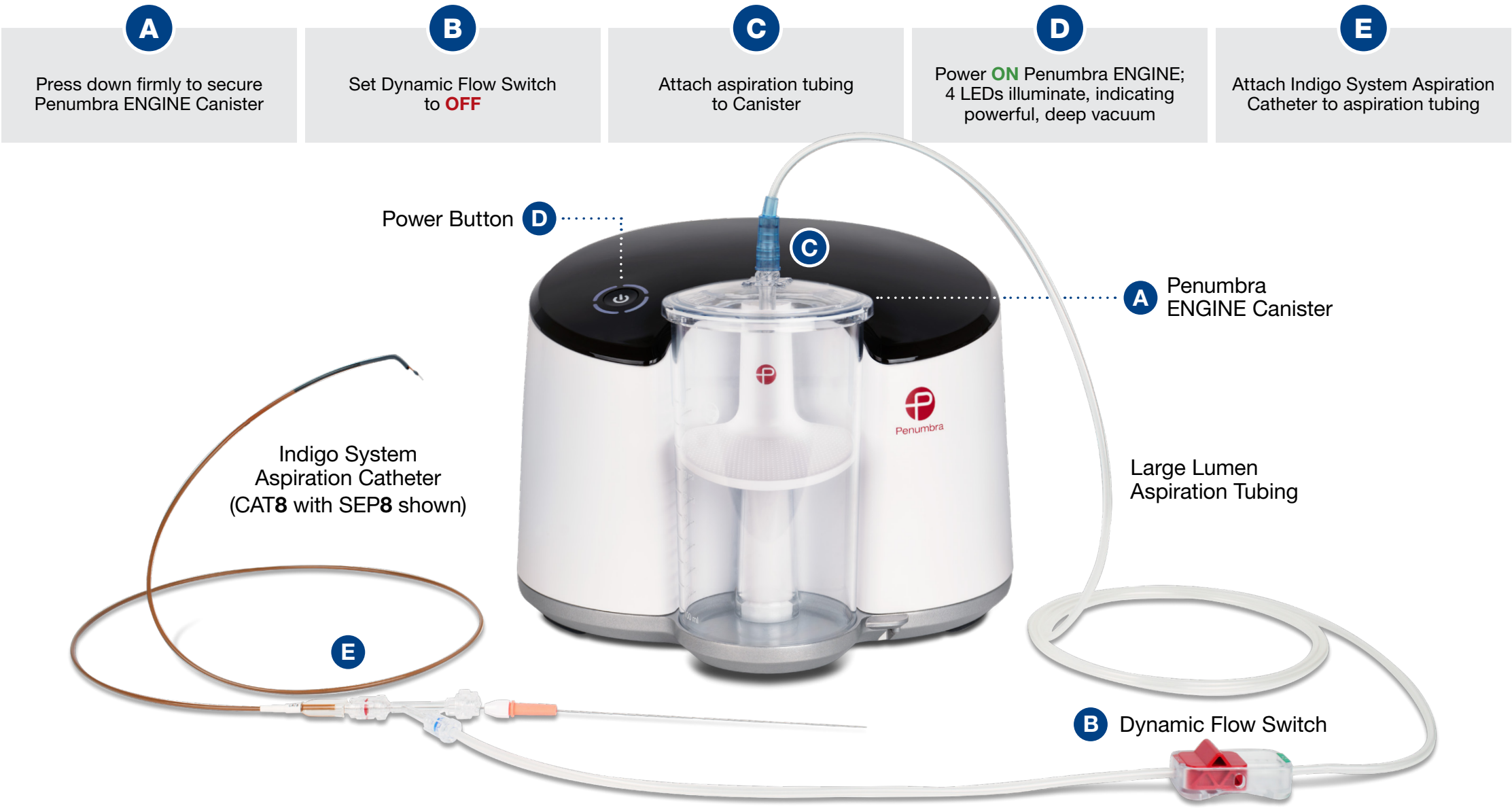
Product availability varies by country. Images used with permission. Consents on file at Penumbra, Inc. Individual results may vary depending on a variety of patient-specific attributes. Tests performed and data on file at Penumbra, Inc. Bench test results may not be indicative of clinical performance. The opinions and clinical experiences presented herein are for informational purposes only. The results may not be predictive for all patients. Renderings for illustrative purposes only. Individual results may vary depending on a variety of patient-specific attributes. Procedural and operative techniques and considerations are illustrative examples from physician experience. Physicians' treatment and technique decisions will vary based on their medical judgment. Photographs taken by and on file at Penumbra, Inc. Please contact your local Penumbra representative for more information.

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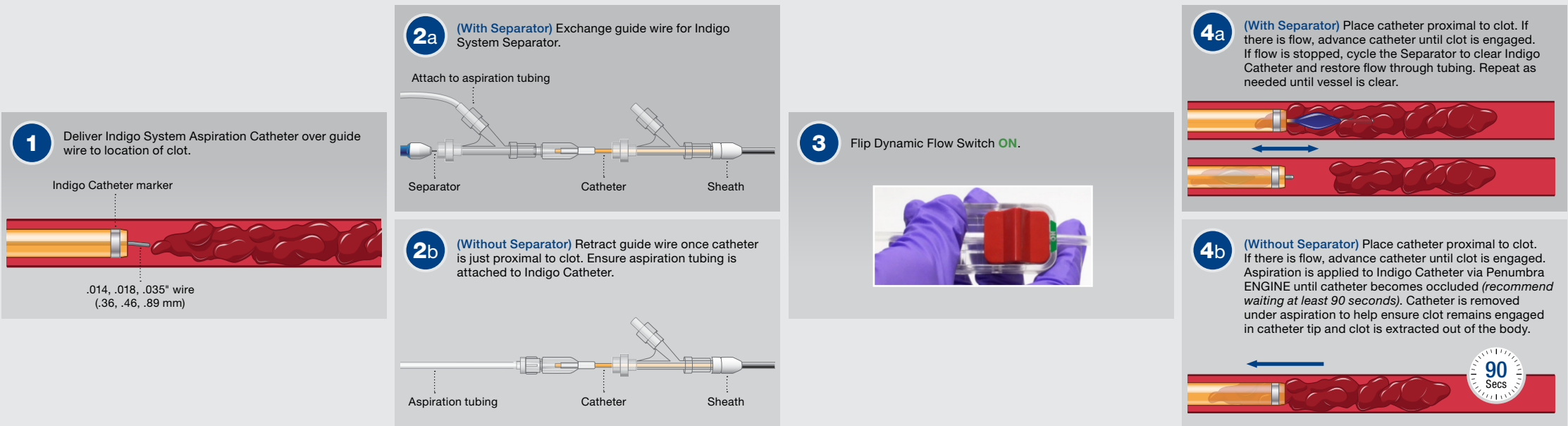
18533, Rev. A 06/20 EU

Indigo System Setup and Procedural Steps

Penumbra ENGINE Setup



Typical Indigo System Procedural Steps



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PENUMBRA ENGINE – Intended Use

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Indigo System | Mechanical Thrombectomy

for Pulmonary Embolism



EXTRACT-PE Trial^a

Prospective, Single-Arm, Multicenter Study of the Indigo Aspiration System in Patients with Acute Pulmonary Embolism

Study Objective: Determine the **safety** and **efficacy** of the Indigo Aspiration System for aspiration mechanical thrombectomy in patients with acute pulmonary embolism (PE).

22 centers | 119 patients

Key Results

27.3%

Mean reduction
RV/LV ratio at
48 hours

1.7%

Major Adverse Events
within 48 hours^b

98.3%

of patients did **not**
receive intraprocedural
thrombolytics

37
Minutes

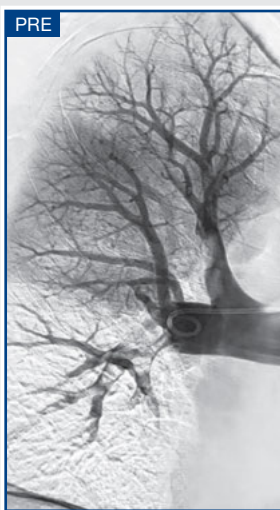
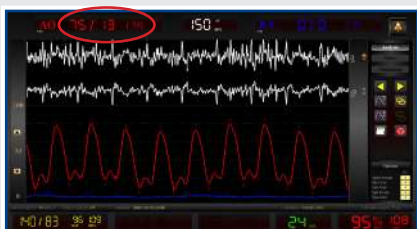
Median **Indigo**
procedure time

1
Day

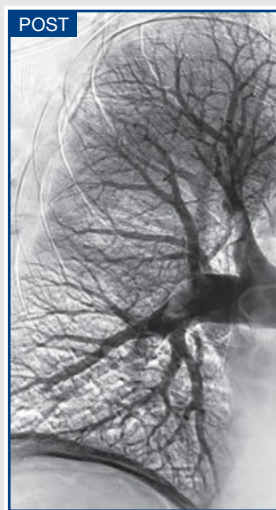
Median
ICU Stay

Get the Clot Out with Indigo System

Pre-Procedure



Post-Procedure



Case courtesy of [Dr. James Benenati](#), Miami Cardiac and Vascular Institute, FL, USA

a. As presented on November 6, 2019 at VIVA 2019 by Dr. Akhilesh Sista, NYU School of Medicine, NY, USA.

b. 2 patients experienced 3 events (groin access site bleeding, hemoptysis, death due to sustained ventricular tachycardia post-procedure).

Results from ITT population. The clinical results presented herein are for informational purposes only, and may not be predictive for all patients. Individual results may vary depending on a variety of patient-specific attributes.

Indigo System Features

1

Mechanical Clot Engagement
Proprietary Separator Technology

2

Maximised Aspiration Power
Large Lumen Aspiration

3

Advanced Tracking Technology
Multiple Material Transitions

4

Tip Directionality for Circumferential Aspiration

CAT8 Tip Shapes

STR



2.24 mm^c
Sweep

TORQ



16 mm^c
Sweep

XTORQ



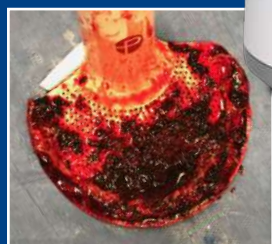
35.4 mm^c
Sweep

Powered by Penumbra ENGINE

One Touch for
Maximum Aspiration
Powerful, Deep Vacuum

-29 inHg^d

Live Feedback
During Procedure
Integrated Clot Catcher

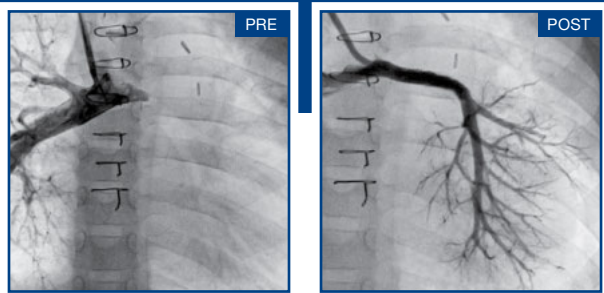


Dr. Rajneesh Agrawal,
Desert Radiology, NV, USA

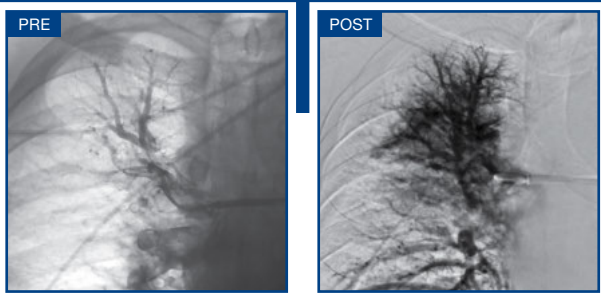
Easy Setup
Sleek, Simple Design

c. Measurement calculated using tip angle and length.
d. Data on file at Penumbra, Inc. Bench test results may not be
indicative of clinical performance.

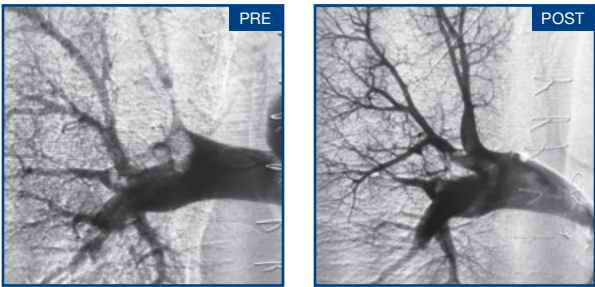
Indigo System for Pulmonary Embolism



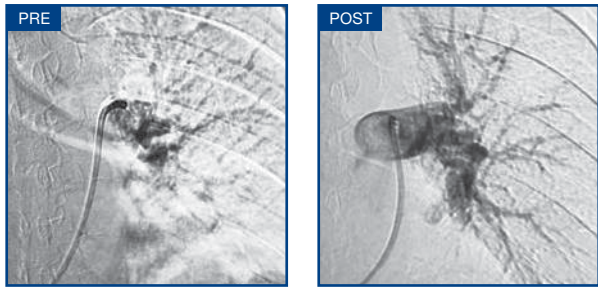
Drs. Sergio Berti, Cataldo Palmieri, and Isabella Spadoni
Fondazione Toscana Gabriele Monasterio, Ospedale del Cuore, Italy



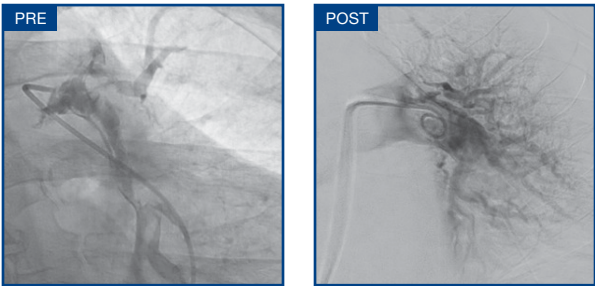
Dr. Juan José Ciampi-Dopazo
Complejo Hospitalario de Toledo, Toledo, Spain



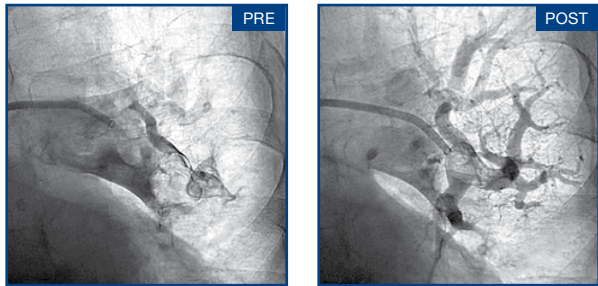
Dr. Paul Perkowski
Baton Rouge General, LA, USA



Dr. Ezell Askew, Jr.
St. Joseph's Medical Center of Stockton, CA, USA

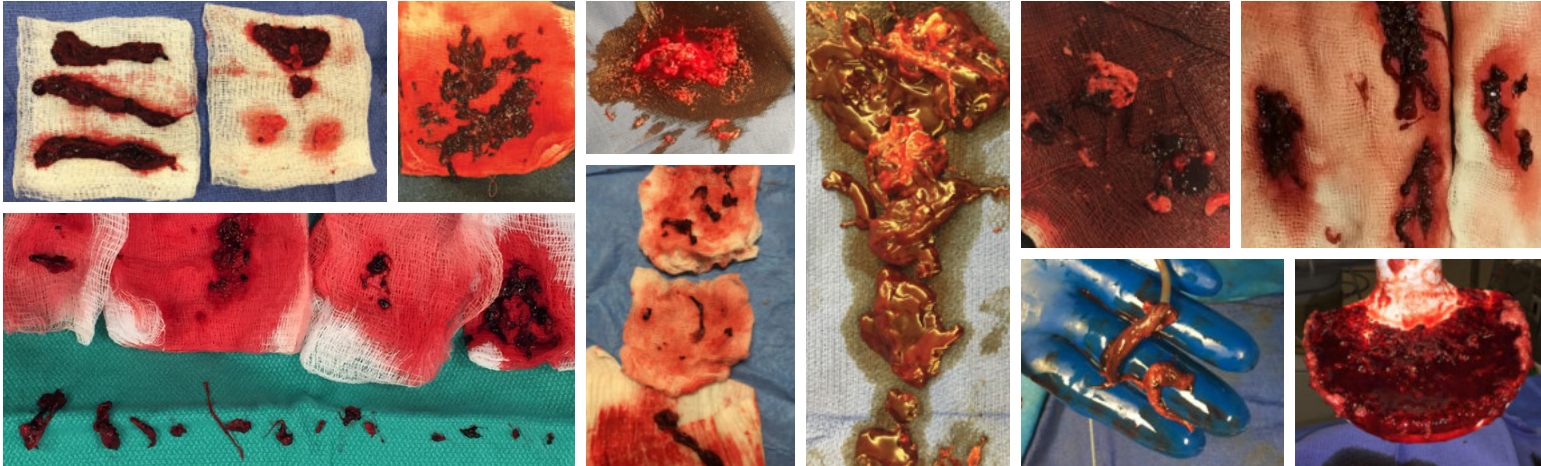


Drs. James Benenati and Alex Powell
Miami Cardiac and Vascular Institute, FL, USA

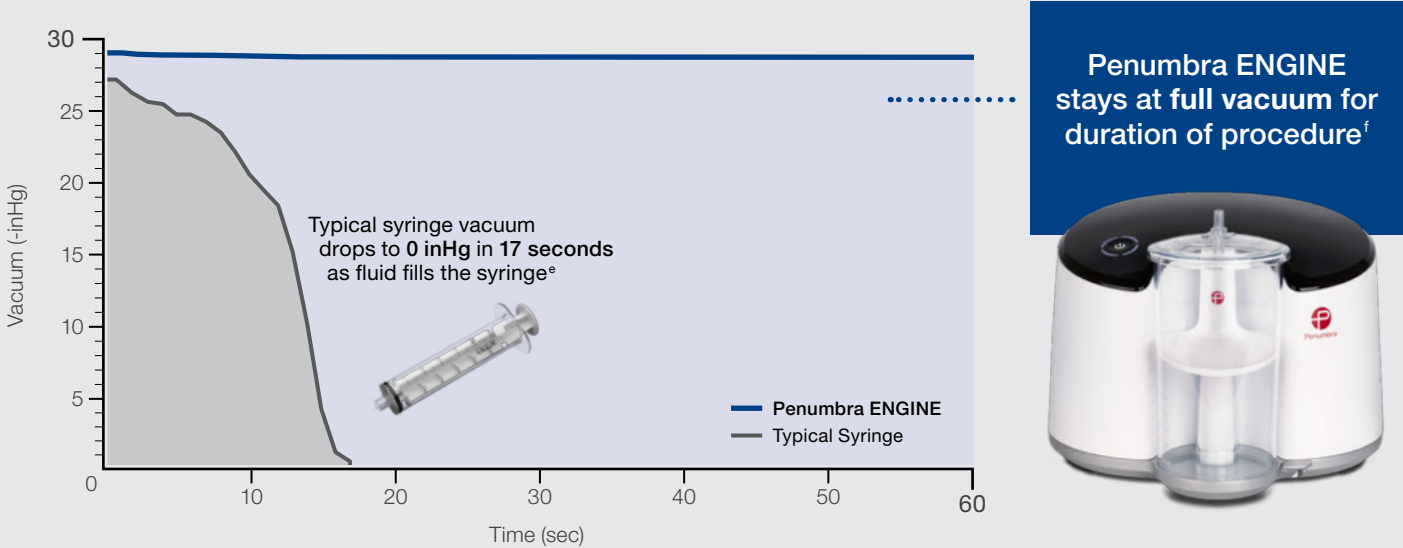


Dr. Corey Teigen
Sanford Health, ND, USA

Not all clot images shown are from pulmonary cases.



Sustained Power Aspiration vs. Diminished Syringe-based Aspiration



Indigo System Setup

- A** Press down firmly to secure Penumbra ENGINE Canister
- B** Set Dynamic Flow Switch to **OFF**
- C** Attach aspiration tubing to Canister
- D** Power **ON** Penumbra ENGINE; 4 LEDs illuminate, indicating powerful, deep vacuum
- E** Attach Indigo System Aspiration Catheter to aspiration tubing



^e. Tests performed and data on file at Penumbra, Inc. Data obtained using a 60 cc syringe connected to Penumbra ACE60 catheter with vacuum gauge attached to proximal barrel of syringe and continuous filling of syringe. Bench test results may not be indicative of clinical performance. Photographs taken by and on file at Penumbra, Inc.

^f. Tests performed and data on file at Penumbra, Inc. Bench test results may not be indicative of clinical performance. Tests performed using water.

Indigo System | Mechanical Thrombectomy

Indigo Catheter Kits							
Catalog Number	Description	Proximal OD	Distal OD	Compatibility (Sheath or Guide)	Working Length (cm)	Wire Platform (in.) (mm)	Compatible Penumbra Devices
CAT8XTORQ115KIT – Now!	Indigo 8 XTORQ Tip + Dynamic Aspiration Tubing	8 F (2.67 mm)	8 F (2.67 mm)	8 F (2.67 mm) Sheath	115	.014–.038 (.36–.97)	Separator 8
CAT8TORQ85KIT – Now!	Indigo 8 TORQ Tip + Dynamic Aspiration Tubing	8 F (2.67 mm)	8 F (2.67 mm)	8 F (2.67 mm) Sheath	85	.014–.038 (.36–.97)	Separator 8
CAT8STR85KIT – Now!	Indigo 8 Straight Tip + Dynamic Aspiration Tubing	8 F (2.67 mm)	8 F (2.67 mm)	8 F (2.67 mm) Sheath	85	.014–.038 (.36–.97)	Separator 8
CAT6KIT – Now!	Indigo 6 + Dynamic Aspiration Tubing	6 F (2.00 mm)	6 F (2.00 mm)	6 F (2.00 mm) Sheath	135	.014–.038 (.36–.97)	Separator 6
CAT5KIT – Now!	Indigo 5 + Dynamic Aspiration Tubing	6 F (2.00 mm)	5 F (1.65 mm)	6 F (2.00 mm) Sheath	132	.014–.038 (.36–.97)	Separator 5
CAT3KIT – Now!	Indigo 3 + Dynamic Aspiration Tubing	4.1 F (1.37 mm)	3.4 F (1.14 mm)	5 F (1.65 mm) Sheath	150	.014–.025 (.36–.64)	Separator 3
CATD – Now!	Indigo D + Dynamic Aspiration Tubing	8 F (2.67 mm)	8 F (2.67 mm)	8 F (2.67 mm) Sheath	50	.014–.038 (.36–.97)	Separator D

Indigo Separators					Accessories		
Catalog Number	Description	Distal OD (in.) (mm)	Total Length (cm)	Compatible Penumbra Devices	Catalog Number	Description	Compatible Penumbra Devices
SEP8	Separator 8	.072 (1.83)	150	CAT8	PMXENG – Now!	Penumbra ENGINE	Penumbra ENGINE Canister
SEP6	Separator 6	.055 (1.40)	175	CAT6	IAPS3 – Now!	Penumbra ENGINE Canister	Penumbra ENGINE
SEP5	Separator 5	.045 (1.14)	175	CAT5			
SEP3	Separator 3	.028 (.71)	190	CAT3			
SEPD	Separator D	.072 (1.83)	90	CATD			

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.

INDIGO Aspiration System – Intended Use

The INDIGO Aspiration System is intended for the removal of fresh, soft emboli and thrombi from vessels of the peripheral arterial and venous systems and certain central circulatory system conditions such as pulmonary emboli using continuous aspiration.

Potential Adverse Events

Possible complications include, but are not limited to, the following: allergic reaction and anaphylaxis from contrast media; acute occlusion; air embolism; arteriovenous fistula; death; device malfunction; distal embolization; emboli; false aneurysm formation; hematoma or hemorrhage at access site; inability to completely remove thrombus; infection; hemorrhage; ischemia; kidney damage from contrast media; neurological deficits including stroke; vessel spasm, thrombosis, dissection, or perforation; intimal disruption; myocardial infarction; emergent surgery; fibrillation; hypotension; respiratory failure; peripheral thromboembolic events.

PENUMBRA ENGINE – Intended Use

The PENUMBRA ENGINE is intended as a vacuum source for Penumbra Aspiration Systems.



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Product availability varies by country. The clinical results presented herein are for informational purposes only, and may not be predictive for all patients. Individual results may vary depending on a variety of patient-specific attributes. Renderings for illustrative purposes only. Images used with permission. Consents on file at Penumbra, Inc. Individual results may vary depending on a variety of patient-specific attributes. Tests performed and data on file at Penumbra, Inc. Bench test results may not be indicative of clinical performance. Please contact your local Penumbra representative for more information.

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Penumbra Indigo System

Sheath	Catheter	Separator	Tubing	Canister	Catheter Length	Wire Platform
Min. 8 F (2.67 mm)	CATD	SEPD	IST3	IAPS2	50 cm	.014–.038" (.356–.965 mm)
Min. 8 F (2.67 mm)	CAT8XTORQ115	SEP8	IST3	IAPS2	115 cm	.014–.038" (.356–.965 mm)
Min. 8 F (2.67 mm)	CAT8TORQ85	SEP8	IST3	IAPS2	85 cm	.014–.038" (.356–.965 mm)
Min. 8 F (2.67 mm)	CAT8STR85	SEP8	IST3	IAPS2	85 cm	.014–.038" (.356–.965 mm)
Min. 6 F (2 mm)	CAT6	SEP6	IST3	IAPS2	135 cm	.014–.038" (.356–.965 mm)
Min. 6 F (2 mm)	CAT5	SEP5	IST3	IAPS2	132 cm	.014–.038" (.356–.965 mm)
Min. 5 F (1.65 mm)	CAT3	SEP3	IST3	IAPS2	150 cm	.014–.025" (.356–.635 mm)



CAT3/5/6

6F Sheath

CAT3/5/6

SEP3/5/6

Into the Tubing

CAT8/D

8F Sheath

CAT8/D

SEP8/D

Into the Tubing



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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.

Indigo Aspiration System – Intended Use

The Indigo Aspiration System is intended for the removal of fresh, soft emboli and thrombi from vessels of the peripheral arterial and venous systems using continuous aspiration.

Potential Adverse Events

Possible complications include, but are not limited to, the following:

allergic reaction and anaphylaxis from contrast media; acute occlusion; air embolism; arteriovenous fistula; death; device malfunction; distal embolization; emboli; false aneurysm formation; hematoma or hemorrhage at access site; inability to completely remove thrombus; infection; hemorrhage; ischemia; kidney damage from contrast media; neurological deficits including stroke; vessel spasm, thrombosis, dissection, or perforation; intimal disruption; myocardial infarction; emergent surgery; fibrillation; hypotension; respiratory failure; peripheral thromboembolic events.

Penumbra Pump MAX – Intended Use

The Penumbra Pump MAX is intended as a vacuum source for the Penumbra Aspiration Systems.

Product availability varies by country. Please contact your local Penumbra representative for more information.

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Indigo System

Technical Specifications

Indigo Catheters

Product Name	Working Length	Hydrophilic Length	Distal OD	Distal ID	Proximal OD	Poximal ID	Distal Flex Length
	(cm)	(cm)	(in)	(in)	(in)	(in)	(cm)
CAT3	150	75	.045	.032	.054	.041	30
CAT5	132	30	.066	.054	.080	.064	20
CAT6	135	11	.083	.070	.083	.070	8
CAT8	85, 100, 115	7	.112	.088	.112	.088	4, 5

Indigo Separators

Product Name	Proximal Wire OD	Support Zone (Proximal Length)	Overall (Total) Length	Bulb (Cone OD)	Body Wire (Wire OD)	Flexible Length
	(in)	(cm)	(cm)	(in)	(in)	(cm)
SEP3	.018	35	190	.028	.010	30
SEP5	.020	40	175	.045	.014	43
SEP6	.020	40	175	.055	.014	43
SEP8	.025	54	150	.068	.021	30



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Indigo System

VENOUS

ARTERIAL

CATD

Subclavian
Brachial
Upper Arm AV Fistula/Graft
HeRO® Graft
Lower Arm AV Fistula/Graft

CAT8

Pulmonary

CAT8

Inferior Vena Cava (IVC)
Iliac

CAT8

Femoral
Popliteal

Pulmonary

CAT8 Pulmonary

Venous

CATD Subclavian, Brachial, Upper Arm AV
Fistula/Graft, HeRO Graft, Lower Arm AV
Fistula/Graft

CAT8 IVC, Iliac, Femoral, Popliteal

Arterial

CATD Subclavian, Axillary, Brachial,
Upper Arm AV Fistula/Graft, HeRO Graft,
Lower Arm AV Fistula/Graft

CAT8 Subclavian, Axillary, Brachial, Visceral,
Aorta, Iliac, SFA, Popliteal

CAT6 Visceral, Lower Arm, Popliteal,
Tibials, Peroneal

CAT5 Tibials, Peroneal

CAT3 Digital, Below the Ankle

CATD | CAT8

Subclavian
Axillary
Brachial

CAT8 | CAT6

Visceral

CATD

Upper Arm AV Fistula/Graft
HeRO Graft
Lower Arm AV Fistula/Graft

CAT6

Lower Arm

CAT3

Digital

CAT8

Aorta
Iliac
Superficial Femoral Artery (SFA)

CAT8 | CAT6

Popliteal

CAT6 | CAT5

Tibials
Peroneal

CAT3

Below the Ankle

Anatomical diagram for illustrative purposes only.
Individual results may vary depending on a variety of patient-specific attributes.

Ordering Information

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