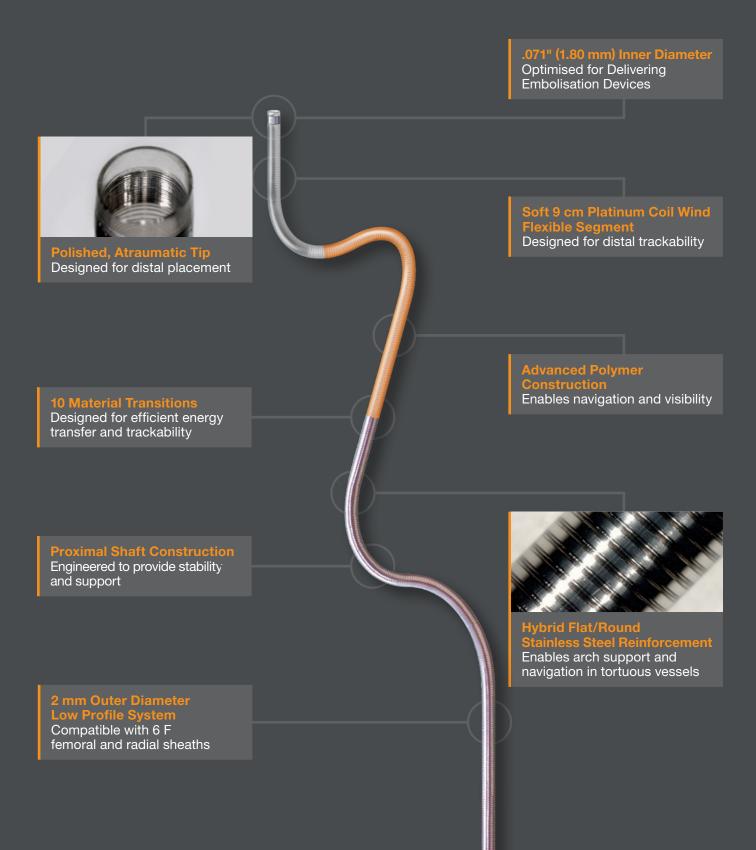






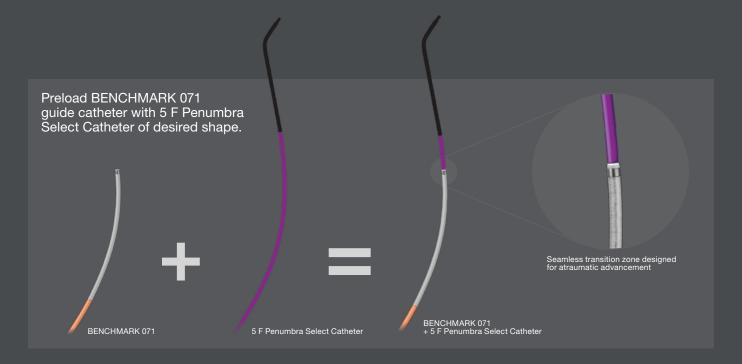
# **BENCHMARK 071**Key Design Features



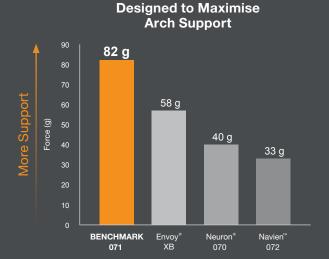
### **BENCHMARK** 071 packaged with 5 F Penumbra Select Catheter

#### **Advantages of Rapid Primary Access**

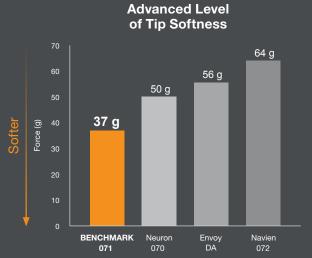
- Faster procedures no need for an exchange
- Allows easy selection off of arch into desired vessel
- Facilitates atraumatic placement into distal vasculature
- Can be used for diagnostic angiogram .040" (1.02 mm) lumen
- Compatible with .035"-.038" (.89 mm-.97 mm) guidewires



#### **Performance Testing**



Buckling Test: Higher values correspond with more proximal support<sup>a</sup>



Deflection Test: Lower values correspond to softer distal tip<sup>b</sup>

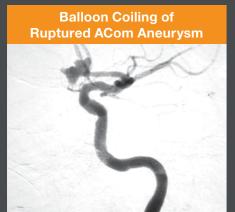
### Femoral Access, Defined

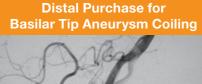
**Designed for stability** and compatibility with atraumatic navigation

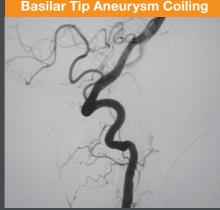
Standalone or compatible with 6 F long sheath

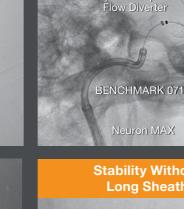


#### **BENCHMARK 071 Intracranial Access via Femoral Approach**





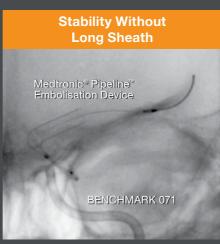






Full distal shaft

Images courtesy Drs. Yasha Kayan and Josser Delgado Abbott Northwestern Hospital, Minnesota, USA

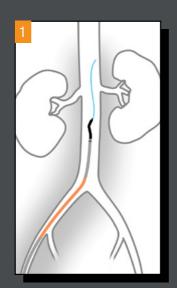


Neuron MAX

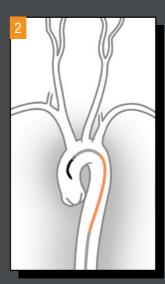
Compatible with Neuron MAX®

for Added Support

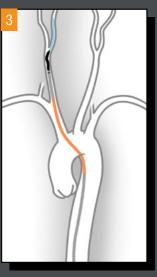
### Rapid Primary Access — Typical Approach via Femoral Artery



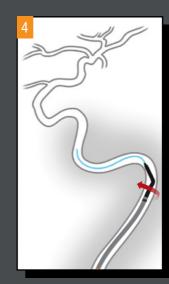
Introduce the preloaded system over a guidewire and advance to a straight section of the abdominal aorta



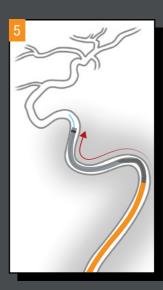
Advance the tip of 5 F Select over the guidewire into the ascending aorta while maintaining the position of BENCHMARK 071



Advance 5 F Select and BENCHMARK 071 over the guidewire into the internal carotid artery



With sufficient wire purchase, torque 5 F Select towards the first major turn



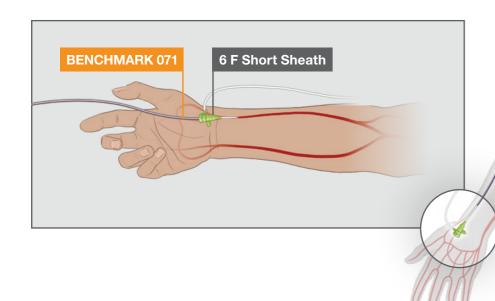
While maintaining position of 5 F Select and guidewire, advance BENCHMARK 071 into desired position



Remove 5 F Select while holding BENCHMARK 071 in position

## Radial Advantage

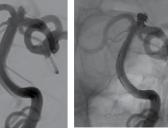
Low profile 2 mm OD compatible with the typical radial artery



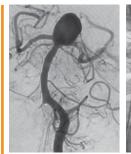
Hybrid stainless steel reinforcement engineered to provide kink resistance in aortic arch



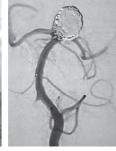




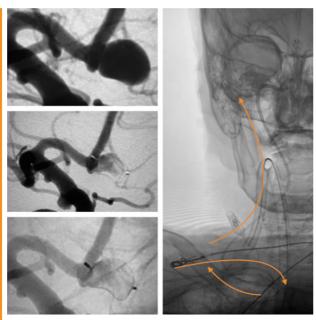
**Stent-Assisted Coiling** Dr. Levansri Makalanda The Royal London Hospital London, UK





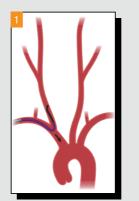


**Primary Coiling** Dr. Jean Delbrune Northside Hospital Florida, USA



MicroVention® WEB® Embolisation Dr. Justin Singer Spectrum Health Michigan, USA

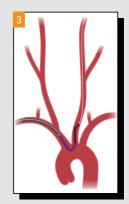
#### Rapid Primary Access — Typical Approach via Radial Artery



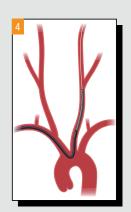
With BENCHMARK 071 and 5 F SIM Select in right subclavian artery, 5 F SIM Select is advanced forward into aortic arch



BENCHMARK 071 is moved forward over 5 F SIM Select in right subclavian artery, 5 F SIM Select is



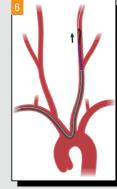
.035" wire is moved through 5 F SIM Select into left ICA



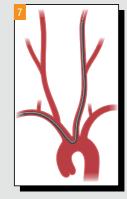
place, BENCHMARK 071 is tracked into CCA



5 F SIM Select is removed, while BENCHMARK 071 and .035" wire stay in CCA/ICA



Switch to 5 F BER Select, which is advanced into ICA while BENCHMARK 071 and .035" wire stay in CCA/ICA



over BER Select catheter into ICA, then 5 F Select is removed

Procedural and operative techniques and considerations are illustrative examples from physician experience. Physicians' treatment and technique decisions will vary based on their medical judgment.

#### Data Presented at SNIS 2018

#### **Radial Access for Cerebrovascular Intervention Using** Penumbra BENCHMARK 071 Guiding Catheter®

36	Patients
10	Primary Coiling
8	Stent-Assisted Coiling
5	Flow-Diverter Embolisation
2	Balloon-Assisted Coiling
2	Wingspan™ Stent-Assisted Coiling
2	AVM or Dural AV Fistula
2	Vessel Sacrifice
1	Subclavian Stent
1	Vasospasm Treatment
3	Other

#### **Key Results**

**No** catheter-related complications

No major radial access site complications

#### BENCHMARK 071 Kits

		BENCHMARK 071		5 F Select™ Catheter	
Catalog Number	Description	Length (cm)	Shape	Length (cm)	Shape
BMK6F95BER120	BENCHMARK 071 KIT	95	Straight	120	BER
BMK6F95MBER120	BENCHMARK 071 KIT	95	MP	120	BER
BMK6F105BER130	BENCHMARK 071 KIT	105	Straight	130	BER
BMK6F105MBER130	BENCHMARK 071 KIT	105	MP	130	BER

#### **BENCHMARK 071**

_	_	BENCHMARK 071		
Catalog Number	Description	Length (cm)	Shape	
BMK6F95	BENCHMARK 071	95	Straight	
BMK6F95M	BENCHMARK 071	95	MP	
BMK6F105	BENCHMARK 071	105	Straight	
BMK6F105M	BENCHMARK 071	105	MP	
BMK6F115	BENCHMARK 071	115	Straight	
BMK6F115M	BENCHMARK 071	115	MP	

#### **Tip Shapes**

BENCHMARK 071	Select Catheter
Straight MP	H1 BER SIM

#### **5 F Select Catheters**

Catalog Number	Description	Working Length (cm)	Inner Diameter (in / mm)	Wire Compatibility (in / mm)	Shape
PNS5F120BER	5F Select Catheter	120	.040 (1.02)	.035038 (.8997)	BER
PNS5F130BER	5F Select Catheter	130	.040 (1.02)	.035038 (.8997)	BER
PNS5F130SIM	5F Select Catheter	130	.040 (1.02)	.035038 (.8997)	SIM
PNS5F120H1	5F Select Catheter	120	.040 (1.02)	.035038 (.8997)	H1
PNS5F130H1	5F Select Catheter	130	.040 (1.02)	.035038 (.8997)	H1

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.

#### BENCHMARK Intracranial Access System -

The BENCHMARK Intracranial Access System is intended for the introduction of interventional devices into the peripheral, coronary, and neuro vasculature.

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 hemorrhage; ischemia; neurological deficits including stroke; vessel spasm, thrombosis, dissection, or perforation.

NEURON MAX System – Intended Use The NEURON MAX System is intended for the introduction of interventional devices into the

peripheral, coronary, and neuro vasculature.

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 hemorrhage; ischemia; neurological deficits including stroke; vessel spasm, thrombosis, dissection, or perforation.

NEURON Intracranial Access System – Intended Use The NEURON Intracranial Access System is intended for the introduction of interventional devices into the peripheral, coronary, and neuro vasculature. 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 hemorrhage; ischemia; neurological deficits including stroke; vessel spasm, thrombosis, dissection, or perforation.



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