

Economic Value



Indicated for
Aneurysm
Type B Dissection
Transection

The Conformable GORE® TAG® Device is *conformability without compromise*

- Designed to treat etiologies of the descending thoracic aorta including aneurysms, transections, and acute and chronic Type B dissections
- Designed to treat compromised aortas
 - Optimized aortic wall apposition in angulated arch anatomy without excessive radial force, barbs, or flared bare springs
 - Proven compression resistance with no reports of compression with more than 110,000 devices distributed worldwide¹
 - Highly conformable to accommodate natural anatomy
 - Includes off-the-shelf tapered devices for extremely tapered anatomy often observed in young trauma patients

Time tested success with the GORE® TAG® Device family

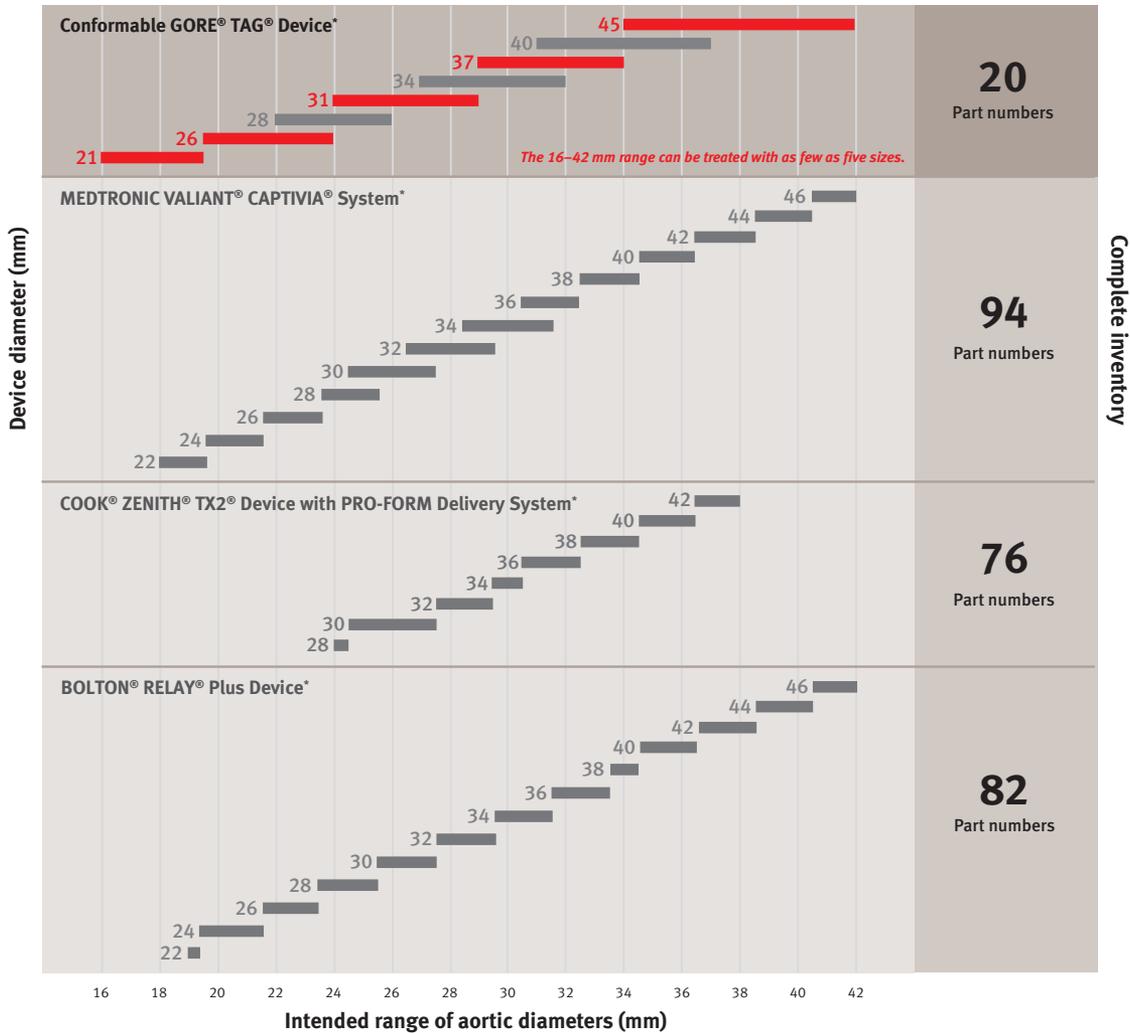
- More than 125,000 devices distributed worldwide
- Supported by more than 20 years of clinical experience
- Studied in ten FDA approved clinical studies, one European clinical trial (ADSORB), and one worldwide registry (GREAT)



1. W. L. Gore & Associates, Inc. *GORE® TAG® Thoracic Endoprosthesis Annual Clinical Update*. Flagstaff, AZ: W. L. Gore & Associates, Inc; 2016. AS0089-EN3.

THORACIC
ENDOPROSTHESIS

The *only* thoracic endograft engineered to perform in 6–33% oversizing conditions.



* Assumes rounding of measured vessel diameter (mm) to nearest whole number within IFU sizing range for aneurysm. Based on United States IFU for each manufacturer.

The 16–42 mm range can be treated with as few as five sizes

- Broad 6–33% oversizing windows allow physicians to choose device with the optimal radial fit for patient anatomy
- Larger device oversizing windows engineered, tested, and proven to accommodate differences in proximal and distal landing zone diameters
- Small diameter and tapered devices offer a large treatment range

Consult Instructions for Use

INDICATIONS FOR USE IN THE U.S.: The GORE® TAG® Thoracic Endoprosthesis is intended for endovascular repair of all lesions of the descending thoracic aorta, including: Isolated lesions in patients who have appropriate anatomy, including: adequate iliac / femoral access, aortic inner diameter in the range of 16–42 mm, ≥ 20 mm non-aneurysmal aorta proximal and distal to the lesion; Type B dissections in patients who have appropriate anatomy, including: adequate iliac / femoral access, ≥ 20 mm landing zone proximal to the primary entry tear; proximal extent of the landing zone must not be dissected, diameter at proximal extent of proximal landing zone in the range of 16–42 mm. **CONTRAINDICATIONS:** Patients with known sensitivities or allergies to the device materials; patients who have a condition that threatens to infect the graft. Refer to *Instructions for Use* at goremedical.com for a complete description of all warnings, precautions, and adverse events. **INDICATIONS FOR USE UNDER CE MARK:** The GORE® TAG® Thoracic Endoprosthesis is indicated for endovascular repair of the descending thoracic aorta. **CONTRAINDICATIONS:** Patients with known sensitivities or allergies to the device materials; patients with a systemic infection who may be at increased risk of endovascular graft infection. Refer to *Instructions for Use* at goremedical.com for a complete description of all warnings, precautions, and adverse events.

Products listed may not be available in all markets.

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