PERFORMANCE by design

Pioneering TEVAR Therapy, Time and Time Again.

CONFORMABLE

GORE TAG®

THORACIC ENDOPROSTHESIS

Time-Tested Success

For more than 15 years, the GORE® TAG® Device has demonstrated impressive success in both clinical studies and real-world commercial use.

More than 71,000 Devices Distributed Worldwide

For more than a decade, we have worked alongside physicians in the evolution of the GORE® TAG® Device. Our collaboration has resulted in the distribution of more than 71,000 devices, for the treatment of more than 41,000 patients worldwide[1].

Proven Clinical Results

The GORE® TAG® Device is supported by more than 15 years of clinical experience.

Most Studied Thoracic Endograft Available

With the first clinical implant occurring in 1998, the GORE® TAG® Device has been studied in ten FDA approved clinical studies, one European clinical trial (ADSORB), and one worldwide registry (GREAT).

Thirty-Five Years of Experience with ePTFE Graft Material

Having pioneered ePTFE graft technology 35 years ago, Gore continues to collaborate with physicians and scientists to create a robust and reliable design platform based on proven clinical performance.

[1]Data on file

2005

FIRST thoracic stent-graft approved in US

2012

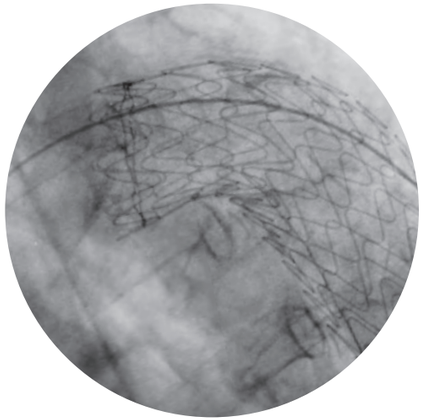
FIRST thoracic stent-graft approved in US for isolated lesions including traumatic transections*

2013

FIRST thoracic stent-graft approved in US for aneurysms, transections, *and* acute and chronic Type B Dissections

* Conformable GORE® TAG® Device was approved in US for DTA aneurysms in 2011.

Conformable GORE® TAG® Device is *Conformability Without Compromise*



Designed to treat compromised aortas

1. No bare springs or barbs
2. Designed with optimal radial force to decrease the risk of intimal damage

Highly conformable to accommodate natural anatomy

3. Optimized graft construct to maximize device durability and conformability
4. Partially uncovered stents maximize circumferential wall apposition to aid in sealing of the primary entry tear and depressurization of the false lumen while not compromising aortic blood flow
5. Fully covered distal end provides a transition between the stent frame and the septum, decreasing the risk of septum perforation

Fluoroscopy photo courtesy of Thomas Larzon, Örebro University Hospital, Sweden

Able to treat more patients

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

Flexible delivery system tracks in challenging anatomy

- Soft leading catheter tip for navigation through tortuous and fragile dissection anatomy
- Easy one-step deployment

Proven compression resistance

- No reports of compression with more than 12,000 devices distributed worldwide*
- Increased wire diameter optimizes radial force to resist compression in high flow aortas
- Nine apex stent pattern further distributes point load and contributes to long-term durability in maximum oversizing conditions
- Unique sutureless design and stent-graft construction facilitates consistent conformability throughout the device for uniform arch support

* *GORE® TAG® Thoracic Endoprosthesis Annual Clinical Update*. Flagstaff, AZ: W. L. Gore & Associates, Inc. AS0089-EN1

With the FDA approved indication for acute and chronic Type B dissections, Conformable GORE® TAG® Device is the *first thoracic stent-graft* approved in the US to treat aneurysms, transections, and Type B dissections.

For more than a decade, we have worked closely with physicians to evolve TEVAR therapies and improve patient outcomes. That's why today, Conformable GORE® TAG® Device is still a leading less-invasive treatment option.

Engineered for flexibility in tortuous anatomy, the Conformable GORE® TAG® Device provides enhanced conformability to treat the challenges associated with dissected aortas.

INDICATIONS FOR USE: 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. $\text{R}_{\text{X Only}}$

Products listed may not be available in all markets.

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