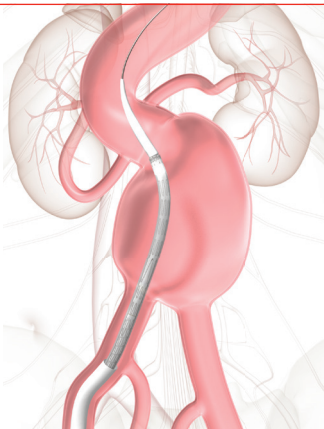


## DEPLOYMENT SEQUENCE

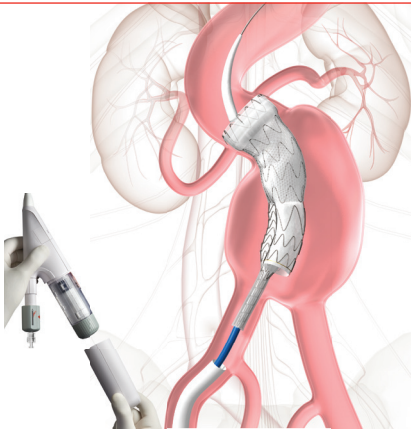
### Constrained Trunk-Ipsilateral Leg endoprosthesis

- 1** Advance constrained Trunk-Ipsilateral Leg to desired location.



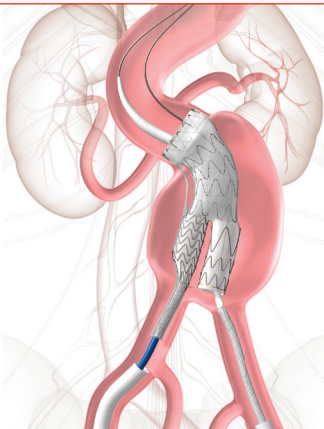
### Partially deployed trunk

- 2** **Deployment stage 1:** Rotate white outer deployment knob counter-clockwise and pull in a continuous motion.
- Result:** Deployment of Trunk-Ipsilateral Leg to level of contralateral gate. Proximal stent row is full diameter. Trunk body is ~70% of full diameter. Ipsilateral Leg is fully constrained.



### Partially deployed trunk: Cannulation and Contralateral Leg deployment

- 3** Cannulate contralateral gate, advance introducer sheath into gate, then advance and deploy Contralateral Leg into gate.



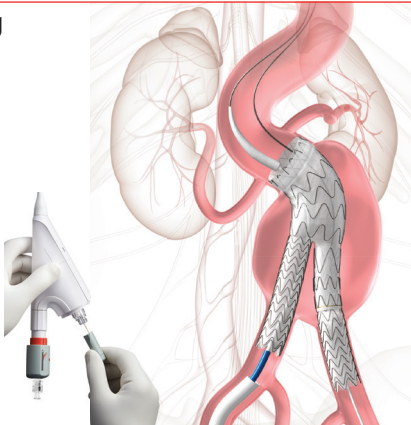
### Partially deployed trunk: Constraining mechanism removal and secondary sleeve deployment

- 4** **Transition stage:** Pull back and hold red safety tab, rotate transparent knob counter-clockwise, and pull in a continuous motion.
- Result:**
- Constraining loop, lock pin, and secondary sleeve deployment line removal
  - Trunk body deploys to full diameter
  - Contralateral gate detaches from Trunk-Ipsilateral Leg



### Fully deployed trunk: Ipsilateral Leg deployment

- 5** **Deployment stage 2:** Rotate gray deployment knob counter-clockwise and pull in a continuous motion.
- Result:** Deployment of Ipsilateral Leg.



Consult Instructions  
for Use  
[eifu.goremedical.com](http://eifu.goremedical.com)

Refer to *Instructions for Use* at [eifu.goremedical.com](http://eifu.goremedical.com) for a complete description of all applicable indications, warnings, precautions and contraindications for the markets where this product is available. ® Only

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## OPTIONAL STEPS TO OPTIMIZE POSITIONING

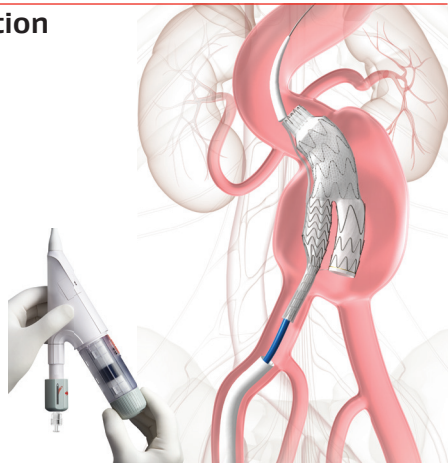
### Angulation control prior to stage 1 Trunk-Ipsilateral Leg deployment

- 1a** Rotate gray angulation control knob clockwise to advance angulation wire.



### Repositioning and use of angulation control for optimizing position

- 2a** **Repositioning only** Rotate gray constraining dial clockwise to constrain proximal end of trunk.
- When device is in the desired position, rotate gray constraining dial counter-clockwise to reopen.



#### Use of angulation control

Rotate gray constraining dial to constrain proximal end of trunk. Rotate gray angulation control knob clockwise to advance angulation wire.

**Warning:** Do not rotate the trunk or Aortic Extender delivery catheter when the angulation wire is advanced. Device and/or catheter damage may occur.

### Optional Aortic Extender: Angulation and deployment

Advance Aortic Extender over a 0.035" super stiff guidewire to desired location. If Aortic Extender needs to be angulated, turn gray angulation control knob clockwise.

To deploy, rotate white outer deployment knob counter-clockwise and pull in a continuous motion.

If angulation wire was used, rotate gray angulation control knob until the red indicator is no longer visible and carefully remove delivery catheter.



## WARNINGS

### Do not:

- Rotate trunk delivery catheter beyond 360° when device is fully constrained on catheter
  - Rotate trunk delivery catheter beyond 90° when partially deployed
  - Withdraw undeployed endoprosthesis through introducer sheath
  - Use constraining/unconstraining mechanism more than two times
  - Advance/retract angulation wire more than five times in a procedure
- (Please refer to *Instructions for Use* for warnings/precautions).

