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 ~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.

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).