Angio-Seal™

Vascular Closure Device

THE INSIDE ADVANTAGE™

Earliest ambulation & patient experience

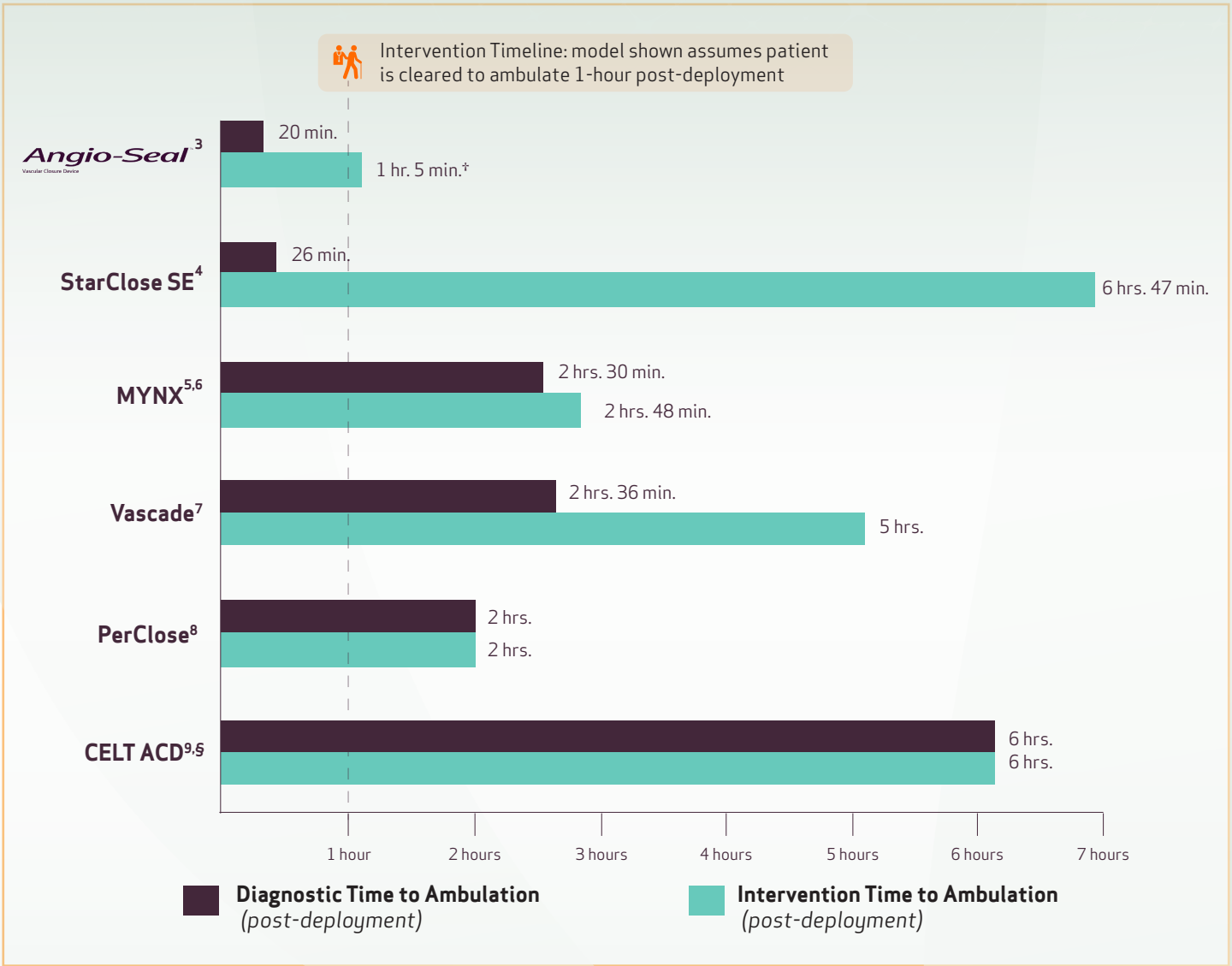
TERUMO
INTERVENTIONAL SYSTEMS

CLOSE WITH CONFIDENCE

EARLIEST AMBULATION* & THE PATIENT EXPERIENCE

Angio-Seal Vascular Closure Device is the **only femoral closure device indicated for early ambulation for both diagnostic and interventional procedures**. Meaning our partners deploying Angio-Seal can enhance their patient experience through decreased time to ambulation and discharge as well as reduce burden on staff and increase operational efficiencies.

Active closure for rapid and reliable hemostasis **proven to accelerate patient mobility and enable same-day discharge.**[1,2]



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The Angio-Seal Vascular Closure Device is indicated for use in closing and reducing time to hemostasis of the femoral arterial puncture site in patients who have undergone diagnostic angiography procedures or interventional procedures using an 8 French or smaller procedural sheath for the 8 F Angio-Seal device and a 6 French or smaller procedural sheath for the 6 F Angio-Seal device. Angio-Seal is also indicated for use to allow patients who have undergone diagnostic angiography to safely ambulate as soon as possible after sheath removal and device placement, as well as to allow patients who have undergone an interventional procedure to safely ambulate after sheath removal and device placement.

Important Safety Information: Possible adverse events for vascular closure devices include, but are not limited to: bleeding or hematoma, AV fistula or pseudoaneurysm, infection, allergic reaction, foreign body reaction, inflammation or edema. This device should only be used by a licensed physician (or other health care professional authorized by or under the direction of such physician) possessing adequate instruction in the use of the device, e.g., participation in an Angio-Seal physician instruction program or equivalent. RX ONLY. This advertisement is directed to physicians only, and not to consumers. Refer to the product labels and package insert for complete warnings, precautions, potential complications, and instructions for use.

1. Kapadia SR, et al. The 6Fr Angio-Seal arterial closure device: Results from a multimember prospective registry. Am J Cardiol. 2001; 87:789-791. 2. Manolis AS, et al. Simplified swift and safe vascular device deployment without a local arteriogram: Single center experience in 2074 consecutive patients. Indian Heart Journal. 2016; 68:529-538.3. Angio-Seal VIP Instructions for Use. ASIN0004. 2018-09-01 4. StarClose SE IFU EL2101551 (10/2/14) 5. MYNX Control Vascular Closure Device IFU 07/21 6. MYNXGRIP Vascular Closure Device IFU 04/20 7. VASCADE Vascular Closure System IFU 2611 Rev T, 11 AUG 2021 8. Perclose ProStyle Suture-Mediated Closure and Repair System IFU EL2127594 (2020-11-03) 9. CELT ACD Vascular Closure Device IFU-TS-004 Rev 4 (SCR 230)

* Earliest Ambulation is based upon the IFU indication statements of each respective closure device listed. In instances where ambulation guidance was not called out in the Indications, the supporting clinical data within the IFU was referenced. † The Angio-Seal VIP IFU Indication for ambulation post-intervention states that "the Angio-Seal device is also indicated for use to allow patients who have undergone an interventional procedure to ambulate safely after sheath removal and device placement", as such the timeline shown is for example purposes only and is intended to demonstrate an illustrative example of how this guidance could be applied. This example is further supported by published data demonstrating immediate ambulation with Angio-Seal post-intervention: Hvelplund A, et al. The Angio-Seal™ femoral closure device allows immediate ambulation after coronary angiography and percutaneous coronary intervention. EuroIntervention. 2011 Jun;7(2):234-41. § CELT ACD IFU does not differentiate between diagnostic and interventional procedures; values shown are from 6F IFU supporting clinical data.

Note: Time to Ambulation is defined as the elapsed time from device deployment to the time the patient ambulates for a select duration of time and/or distance without re-bleed.

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