

THE MORE
Natural Approach TO OPTIMAL FIT



— *Conformability without Compromise*



THORACIC
ENDOPROSTHESIS

PERFORMANCE
by design

THE STANDARD IN *Conformability* AND *Radial Fit*



Designed for flexibility and conformability in tortuous anatomy.

Optimized aortic wall apposition in angulated arch anatomy without excessive radial force, barbs, or bare springs

- Conforms and achieves better graft contact in curved segment of the aorta
- Minimizes the risk of damaging or perforating aortic tissue

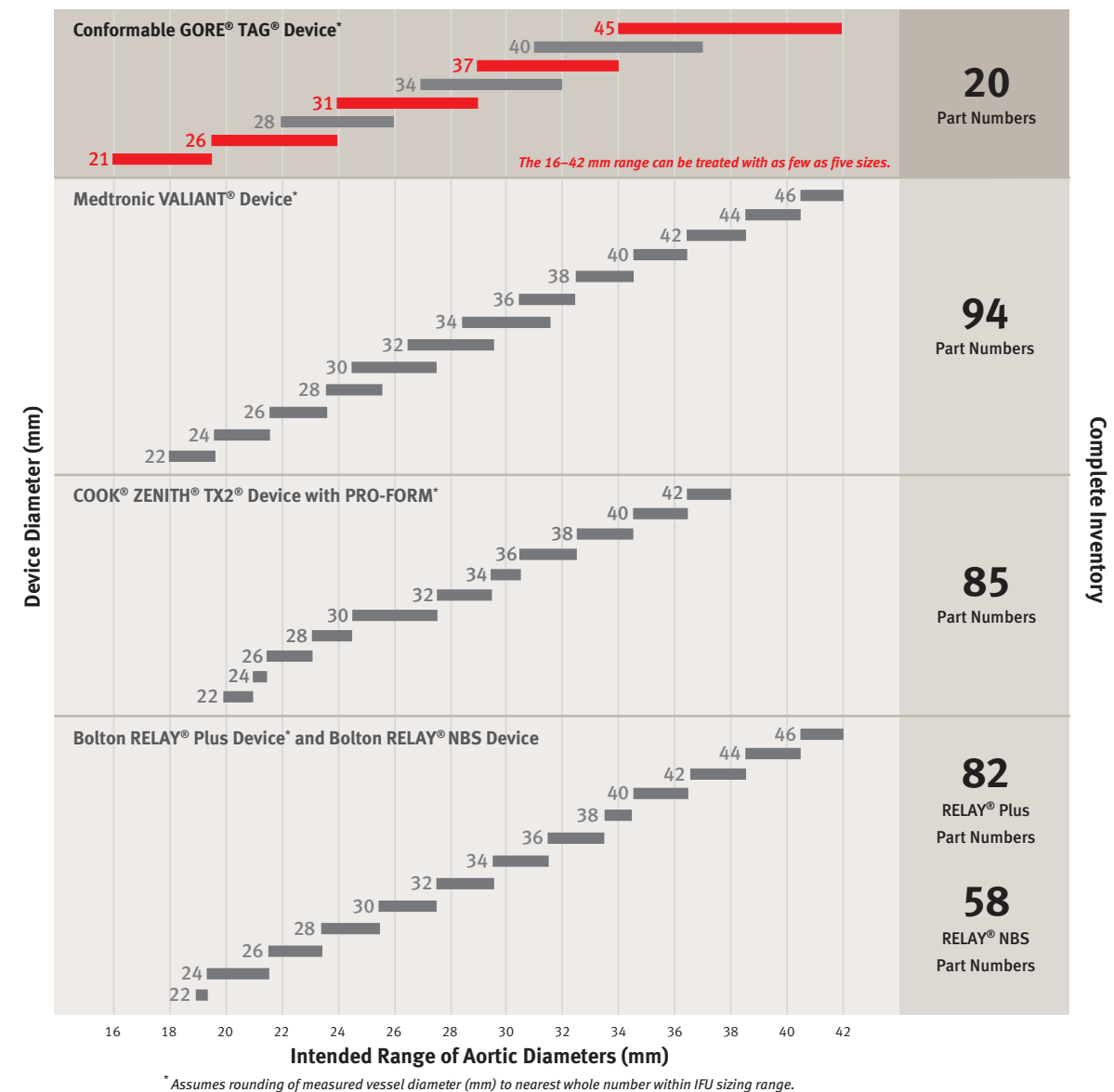
Designed to treat etiologies of the descending thoracic aorta including aneurysms, transections, and dissections

- Unique 6–33% oversizing range enables an optimal radial fit, whether treating a young trauma patient or a fragile dissected aorta
- Off-the-shelf tapered devices allow proximal to distal aortic diameter variance of up to 9.5 mm to be treated with a single device

Compression resistant

- Maintains patency in small diameter thoracic aortas
- Stent design maintains wall apposition in angulated arch anatomy without compromising tissue integrity
- No reports of compression with more than 4,000 devices implanted¹

Physician can select oversizing based on patient anatomy for optimal conformability and customized radial fit.



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

Broad 16–42 mm aortic diameter treatment range with as few as five sizes

- Expanded device diameter range accommodates a wider range of aortic anatomies
- Only commercially available endograft approved to treat patients with 16 mm thoracic aortas
- Tapered aortas may be treated with a single straight device

Off-the-shelf tapered designs

- Provides physicians with more options to match the endograft to the individual patient anatomy

CONFORMABILITY *without* COMPROMISE

► Advances the tradition of performance and durability.



1 Partially Uncovered Stent

- Helps achieve 360° wall apposition in angulated anatomy
- Eliminates potential damaging barbs or flared bare springs

2 Radiopaque Gold Bands

- Gold bands are located on both proximal and distal ends of graft
- Aids in accurate device positioning and visualization at patient follow-up

3 Increased Wire Diameter and Nine Apex Pattern

- Compression-resistant design
- Allows for increased 6–33% oversizing range
- Increased radial force while maintaining adequate fatigue life
- Maintains radial strength and achieves wall apposition in angulated arch anatomy

4 Sutureless Construction

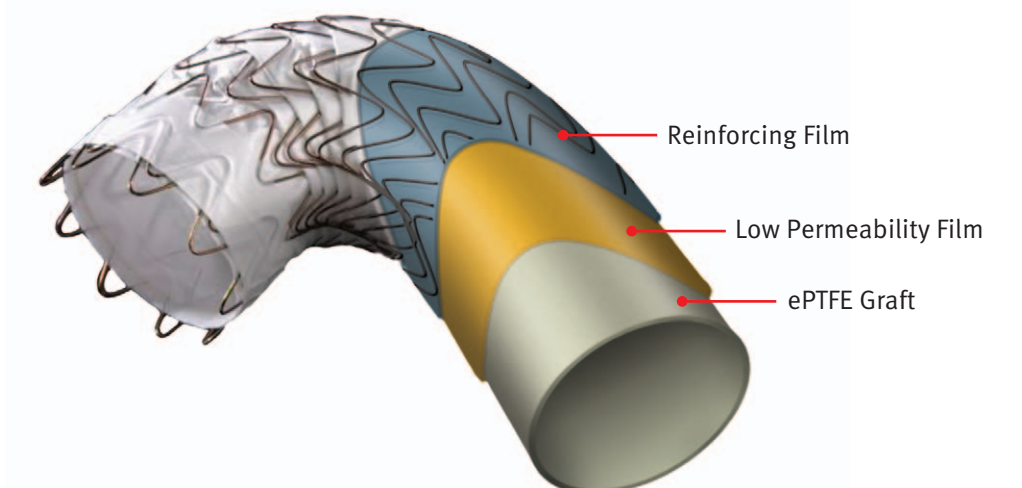
- Eliminates risk of graft failure from sutures
- ePTFE graft technology on luminal and abluminal surfaces

5 Sealing Cuffs

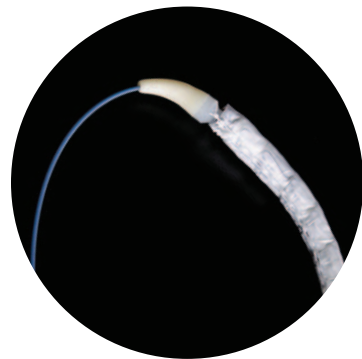
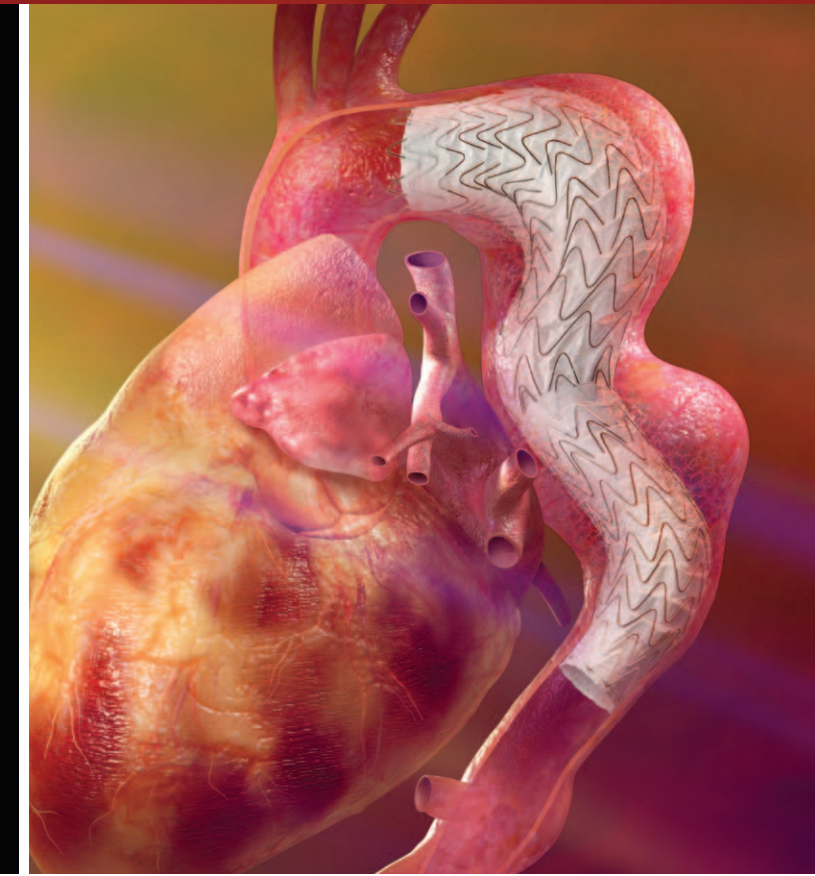
- Engineered to provide increased security against endoleaks

Optimized ePTFE Film Layers

- Leverages 35 years of experience with ePTFE and a reliable platform with proven clinical durability and strength
- Low permeability with abrasion-resistant properties
- Optimizes graft and film layers to maximize durability and conformability



ELEGANTLY *Simple* DESIGN



Flexible Low-Profile Design

- Low-profile delivery catheter provides flexibility while navigating anatomy in the aortic arch

Single-Sheath Insertion

- No re-insertion is necessary if additional devices are required
- Minimizes vessel trauma and the potential for rupture with multiple sheath insertions

Sheathless Delivery Catheter

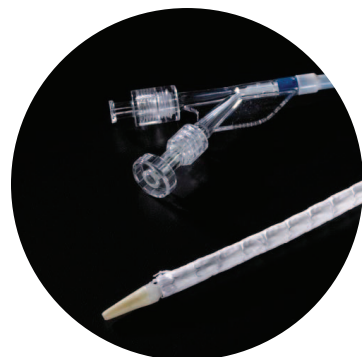
- Facilitates passage and access through tortuous thoracic anatomy
- Reduces deployment force

Single-Step Deployment System

- Easy, single-step, twist and pull deployment

Radiopaque Modified Olive

- Engineered to enhance trackability and deliverability of the device



For more than 14 years, the GORE® TAG® Device has demonstrated impressive success in both clinical studies and real-world commercial use.

More than 59,000 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 59,000 devices for the treatment of more than 34,700 patients worldwide.

Proven Clinical Results

The GORE® TAG® Device is supported by more than 14 years of experience and 10 years of clinical data, with up to five years follow-up.

Most Studied Thoracic Endograft Available

With the first implant occurring in 1997, the GORE® TAG® Device has been studied in ten FDA approved clinical studies, one European clinical trial, and one European registry.

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.

Conformable GORE® TAG® Thoracic Endoprosthesis

CATALOGUE NUMBER	INTENDED AORTIC DIAMETER (MM)	PROXIMAL DIAMETER (MM)	DISTAL DIAMETER (MM)	LENGTH (CM)	RECOMMENDED GORE® DRYSEAL SHEATH SIZE (FR)	GORE® DRYSEAL SHEATH OUTER DIAMETER (MM)
TGE212110	16–19.5	21	21	10	18	6.8
TGE262110	19.5–24 / 16–19.5	26	21	10	20	7.5
TGE262610	19.5–24	26	26	10	20	7.5
TGE282810	22–26	28	28	10	20	7.5
TGE282815	22–26	28	28	15	20	7.5
TGE312610	24–29 / 19.5–24	31	26	10	22	8.3
TGE313110	24–29	31	31	10	22	8.3
TGE313115	24–29	31	31	15	22	8.3
TGE343410	27–32	34	34	10	22	8.3
TGE343415	27–32	34	34	15	22	8.3
TGE343420	27–32	34	34	20	22	8.3
TGE373710	29–34	37	37	10	24	9.1
TGE373715	29–34	37	37	15	24	9.1
TGE373720	29–34	37	37	20	24	9.1
TGE404010	31–37	40	40	10	24	9.1
TGE404015	31–37	40	40	15	24	9.1
TGE404020	31–37	40	40	20	24	9.1
TGE454510	34–42	45	45	10	24	9.1
TGE454515	34–42	45	45	15	24	9.1
TGE 454520	34–42	45	45	20	24	9.1

GORE® DrySeal Sheath

CATALOGUE NUMBER	SHEATH SIZE (FR)
SDV1828	18
SDV2028	20
SDV2228	22
SDV2428	24
SDV2628	26

All sheaths are 28 cm in length.

GORE® Tri-Lobe Balloon Catheter

CATALOGUE NUMBER	AORTIC DIAMETER (MM)
BCM1634	16–34
BCL2645	26–42



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¹ Data on file.

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▶ GORE® 3D Imaging System

▶ GORE® EXCLUDER®
Device featuring C3
Delivery System

▶ Choose radial fit over radial force.
See why at conformabletag.com