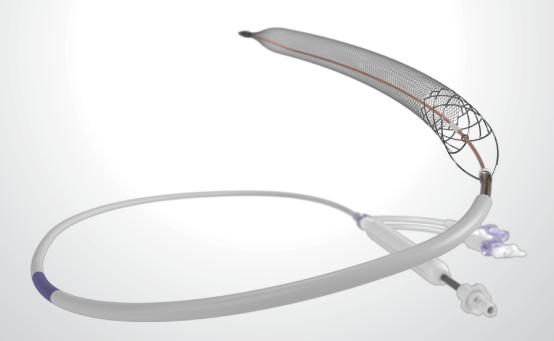
Standout Performance. Unmatched Outcomes.



CLOUT Registry

500 patient

in-hospital and 30-day outcomes for the treatment of deep vein thrombosis with the **ClotTriever®** system





500 patients enrolled at 43 US clinical sites

All-comer patients were enrolled, irrespective of symptom duration, thrombus age, prior failed treatment of current DVT, or bilateral disease.

Baseline Characteristics	Median [IQR] or n (%)
Age (years)	61.9 [48.0 - 70.8]
Bilateral DVT	22 (4.4%)
Contraindicated to thrombolytics	148 (29.7%)
Prior treatment of current DVT	120 (23.2%)
Iliac or iliofemoral thrombus	392 (78.2%)
Thrombus age	Acute: 153 (29.8%)
	Subacute: 177 (34.4%)
	Chronic: 184 (35.8%)

The largest mechanical thrombectomy study in the field of DVT

A lytic-free approach enabling decreased hospital resource utilization









Significant thrombus removal designed to provide patients with sustained benefits at 30 days

>90% Complete or near-complete thrombus removal

> 90% Free of moderate or severe PTS symptoms at 30 days

Restoring flow with an unmatched safety profile

Device-related

Vessel damage Valve damage Acute kidney injury (AKI)



The largest mechanical thrombectomy study in the field of DVT evaluating real world patient outcomes after treatment with the **ClotTriever** System



References

In-hospital and 30-day Outcomes from the Fully-enrolled Multicenter Prospective CLOUT Registry presented by Dr. David Dexter at VEINS 2022

Indications for Use:

The ClotTriever Thrombectomy System is indicated for: (1) The non-surgical removal of thrombi and emboli from blood vessels; (2) Injection, infusion and/or aspiration of contrast media and other fluids into or from a blood vessel.

The ClotTriever Thrombectomy System is intended for use in the peripheral vasculature including deep vein thrombosis (DVT). Refer to IFU for complete Indications for Use, contraindications, warnings, and precautions.

Caution: Federal (USA) law restricts this device to sale by or on the order of a physician

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