FINISH STRONG
INSERT MYNXGRIP
Insert MynxGrip into existing procedural sheath up to the white shaft marker.

INFLATE THE BALLOON
Inflate the balloon until the black marker is fully visible on the inflation indicator and close stopcock.

GENTLY PULL BACK TWO STOPS
• Grasp black handle and withdraw catheter until the balloon abuts the distal tip of the procedural sheath (first point of resistance)
• Continue to withdraw until the balloon abuts the arteriotomy site (second point of resistance)
• While holding adequate tension on device handle, open stopcock on procedural sheath

STEP 1: ACHIEVE TEMPORARY HEMOSTASIS

STEP 2: PLACE THE SEALANT
ADVANCE THE SEALANT
• With stopcock open, detach shuttle and advance until resistance is felt

UNSHEATH THE SEALANT
A. Lighten hold on black handle
B. Grasp procedural sheath and withdraw it from tissue tract
C. Continue retracting until shuttle locks onto black handle

ADVANCE PAST SINGLE GREEN MARK
• Ensure adequate tension is employed on the black handle to keep balloon abutted against the arteriotomy
• Immediately grasp advancement tube at skin and gently advance until single marker is fully visible
• Hold for up to 30 seconds
• Lay device down for up to 90 seconds

STEP 3: REMOVE THE DEVICE
LOCK, STABILIZE, DEFLATE
• Lock syringe to maximum negative position

STABILIZE ARTERY
• Stabilize by applying light fingertip compression proximal to the insertion site
• Lightly grasp advancement tube at skin with thumb and forefinger; realign with tissue tract

DEFLATE THE BALLOON
• Open stopcock to deflate balloon
• To ensure complete balloon deflation, wait until air bubbles and fluid have stopped moving through the inflation tubing

REMOVE CATHETER AND ADVANCE TUBE
• Withdraw catheter through the advancement tube lumen
NOTE: If unusual resistance is felt during catheter withdrawal, pull the advancement tube and balloon catheter together through the tissue tract
• Remove advancement tube from the tissue tract
• Finger tip compression can be applied for up to 60 seconds or as needed
• Assess for hemostasis and apply additional finger tip compression until sterile dressing is applied and hemostasis is achieved

RESULT
• Sealant is in place

RESULT
• Confirm position at the arteriotomy

RESULT
• Secure extravascular closure

PREP MYNXGRIP
Hold the MynxGrip Vascular Closure Device by the shuttle while removing from the tray

PREPARE BALLOON
• Fill locking syringe with 2-3ml of sterile saline
• Attach to stopcock and draw vacuum
• Inflate balloon until black marker on inflation indicator is fully visible
• Detach balloon and leave syringe at neutral
• Do not remove sealant sleeve

RESULT
• Lock syringe is in place

RESULT
• Confirm position at the arteriotomy

RESULT
• Secure extravascular closure
**ORDERING INFORMATION**

THE MYNXGRIP VASCULAR CLOSURE DEVICE INCLUDES:

(1) Balloon catheter with integrated sealant
(1) 10ml locking syringe

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<tr>
<th>SIZE</th>
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IN THE UNITED STATES, FAX YOUR MYNXGRIP ORDER TO ACCESSCLOSURE AT (877) 933-0133. OUTSIDE OF THE UNITED STATES, CONTACT YOUR LOCAL MYNX DISTRIBUTOR.

**INDICATIONS FOR USE**

The MynxGrip Vascular Closure Device is indicated for use to seal femoral arterial access sites while reducing times to hemostasis and ambulation in patients who have undergone diagnostic or interventional endovascular procedures utilizing a 5F, 6F or 7F procedural sheath.

**PRECAUTIONS**

The MynxGrip device should only be used by a trained licensed physician or healthcare professional.

The MynxGrip device should not be used in patients with a known allergy to PEG.

**WARNINGS**

Do not use if the sterilization indicator dot on the pouch is yellow/gold.

Do not use if components or packaging appear to be damaged or defective or if any portion of the packaging has been previously opened.

Do not reuse or resterilize. The MynxGrip device is for single use only. The catheter is loaded with a single hydrogel sealant. Reuse of the device would result in no delivery of hydrogel sealant.

Do not use the MynxGrip device if the puncture site is located above the most inferior border of the inferior epigastric artery (IEA) and/or above the inguinal ligament based upon bony landmarks, since such a puncture site may result in a retroperitoneal hematoma/bleed. Perform a femoral angiogram to verify the location of the puncture site.

Do not use the MynxGrip device if the puncture is through the posterior wall or there are multiple punctures, as such punctures may result in a retroperitoneal hematoma/bleed.