



## REFERENCE GUIDE

### PLACEMENT AND INFLATION

- **Radial artery use:** Ensure the CURVED section of the clear plate is on the THUMB side of the wrist.
- **Ulnar artery use:** Ensure the CURVED section of the clear plate is on the LITTLE FINGER (fifth digit) side of the wrist.

**Step 1.** Aspirate the sheath, then withdraw approximately one inch (2–3 cm). Place the center of the “crosshairs” over the arteriotomy (location where the sheath entered the artery, approximately 1–2 mm proximal to the skin puncture site). Fasten the band securely around the wrist without any slack. Do not overtighten.

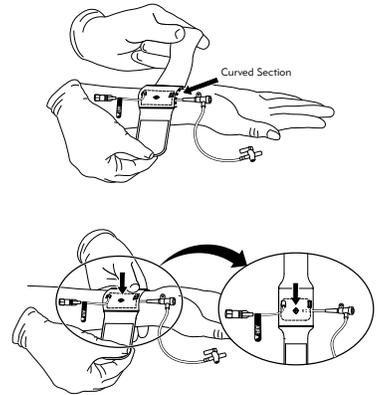
**Step 2.** Fill the EVO syringe with 20 mL of air. Attach and completely engage to the valve/ tubing line labeled “AIR” by inserting the syringe tip into valve and rotating ¼ turn clockwise.

**Step 3.** Slowly inflate the balloon with air while simultaneously removing the sheath. Once the sheath is removed, continue to inject air into the balloon until bleeding has stopped. Maintain pressure on the syringe plunger to avoid any inadvertent release of air while inflating.

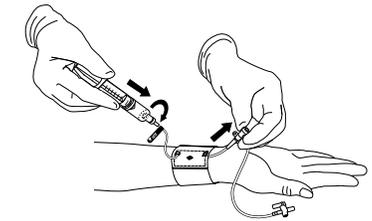
**Step 4.** Slowly withdraw air until there is oozing from the access site. Once oozing is observed, re-inject up to 4 mLs of air into the balloon until hemostasis is achieved. Additional air may be injected as needed to achieve patent hemostasis. Remove syringe.

**NOTE:** If bleeding is observed at any time, inject additional air (do not exceed the max fill volume of 30mL) until bleeding stops and patent hemostasis is achieved.

**NOTE:** Air volume and compression time may differ according to patient’s condition, anticoagulant dosage, and size of puncture site.



Step 1



Step 2

### DEFLATION AND REMOVAL

**Step 1.** At the recommended device removal time, or in accordance with hospital protocol, withdraw approximately 2 mL of air from the balloon and observe the access site for bleeding.

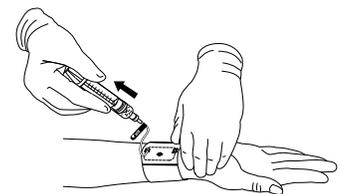
**NOTE:** Maintain pressure on the syringe plunger to avoid any inadvertent release of air when attaching to the device.

**NOTE:** If PreludeSYNC EVO syringe is not available during air removal or re-injection, the cap on tubing line may be removed by twisting and a standard luer syringe can be attached. **CAUTION: DO NOT** remove cap while sheath is still in patient.

**Step 2.** If bleeding is present, inject air until bleeding stops and patent hemostasis is achieved. Wait approximately 30 minutes and repeat step 1 above, or follow normal hospital protocol.

**Step 3.** If no bleeding is present, continue to remove approximately 2 mL of air every 15 minutes x3, or until pressure is fully released.

**Step 4.** Once the air is removed and hemostasis is confirmed, carefully remove the EVO. Place a sterile dressing over site per hospital protocol. Dispose of the EVO according to hospital protocol



Before using refer to Instructions for Use for indications, contraindications, warnings, precautions, and directions for use.