



TR Band

Radial artery compression device

COMPRESSION

SELECTIVE

to allow venous blood return and preserve patency.

TRANSPARENT COMFORTABLE

for visual control of puncture site.
and kind to patients, to enable early ambulation.



Optimal use of TR Band device

Right position of the device (green marker 1cm above skin puncture)

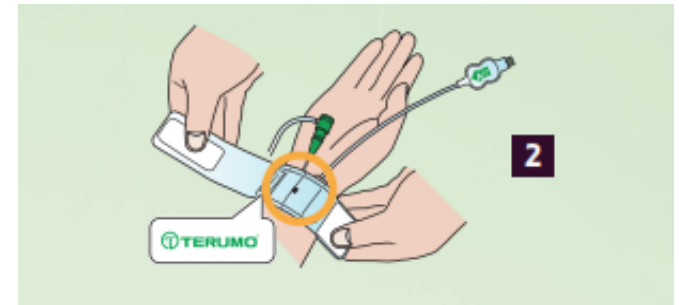
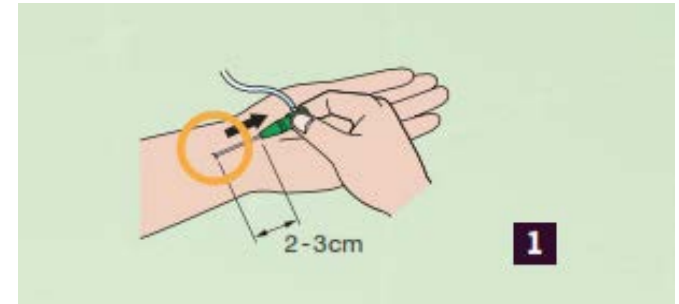
15cc air inflation

Decrease air pressure until bleeding

Inflate again 1cc or 2cc air

HOW TO USE THE TR BAND? (1-2)

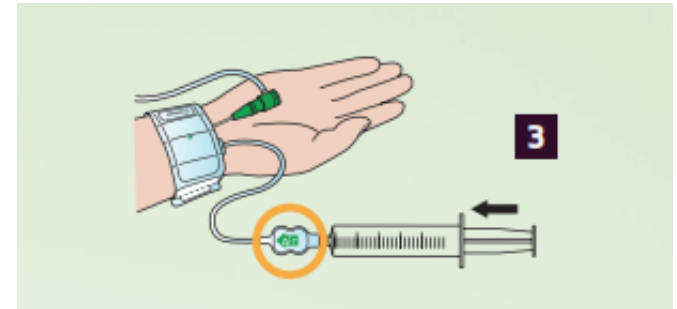
1. After procedure, **WITHDRAW** the sheath by 2-3cm.
2. **ALIGN** the green marker 0.5-1cm up to the skin puncture site and fix the belt on the wrist with the adjustable fastener. Make sure the fastener is stable and note slanted.



HOW TO USE THE TR BAND? (3)

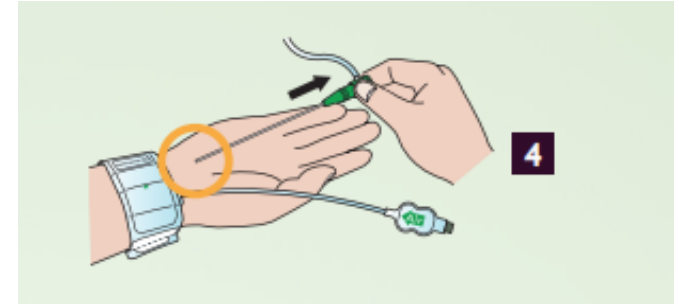
3. To **INFLATE** the compression balloon, inject 15ml of air using the TR Band inflator, which is included in the kit.

After injection, quickly remove the syringe and be sure to control the plunger in order to avoid air being forced back into the syringe.



HOW TO USE THE TR BAND? (4)

4. **REMOVE** the sheath and confirm that there is no bleeding from the puncture site.
5. **DECREASE** air volume ml by ml until bleeding appears and inflate again 1 or 2ml (patent haemostasis technique). If bleeding is observed, inject more air (not exceeding a total of 18ml) until it stops.

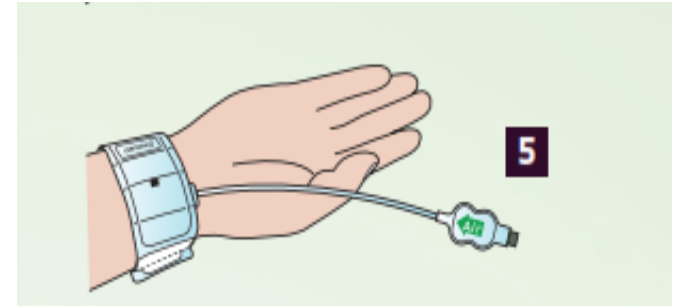


HOW TO USE THE TR BAND? (5)

5. **CHECK** the progress of haemostasis and decrease gradually over the time the air pressure of the balloon with Band inflator until to remove the system (2 hours after coronary angiogram and 3 hours after PCI).

If patient complains of pain: confirm there is no bleeding and remove an appropriate volume of air with the TR Band inflator.

If bleeding occurs: inject more air until it stops (not exceeding a total of 18ml).



1. Rathore S. et al., 2010. A randomized comparison of TR band and radistop haemostatic compression devices after transradial coronary intervention. Catheterization and cardiovascular Interventions, 76(5), pp. 660-667.
2. Wagle & Brindis 2013. From Femoral to radial: An ongoing paradigm shift. Cardiac Interventions Today, July/August 2013.



Haemostasis - summary

Last step but essential to prevent radial artery occlusion

Several devices

Achieve radial patent flow haemostasis without bleeding

As short as possible



Potential factors of radial occlusion

Sheath profile

Ratio artery / sheath

Anticoagulation

Compression:

Duration

Complete occlusive compression