

Insertion of Heterotopic Bicaval Valves into Right Atrium

ICD-10 COORDINATION AND Maintenance
COMMITTEE MEETING

September 10, 2024

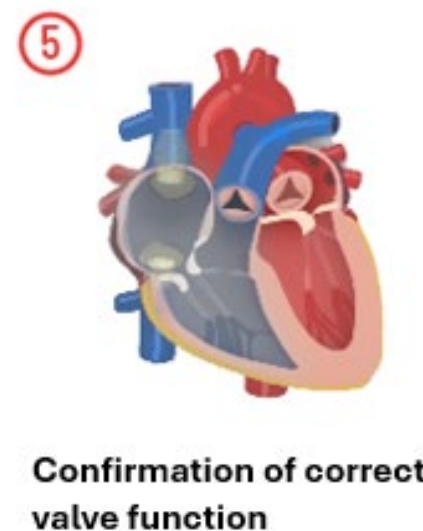
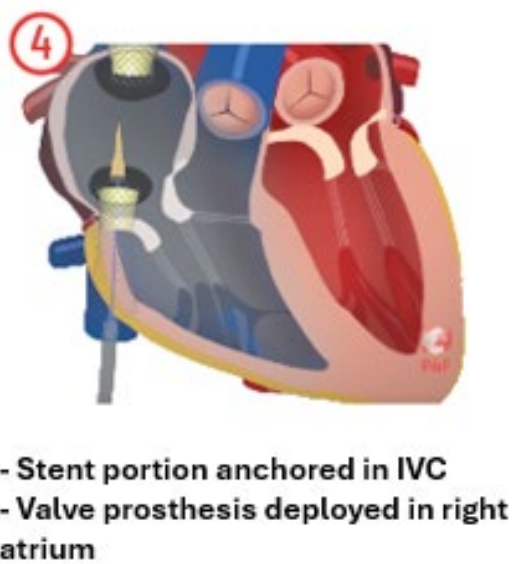
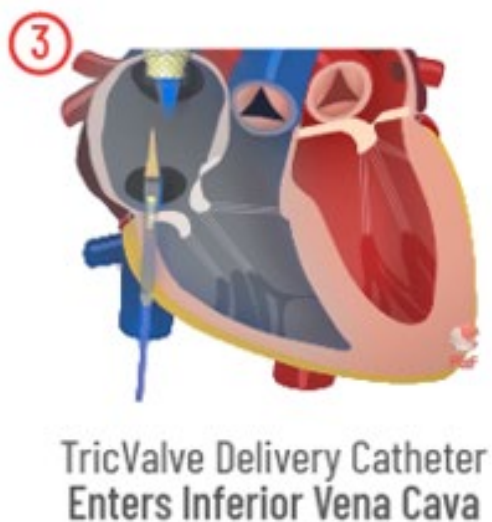
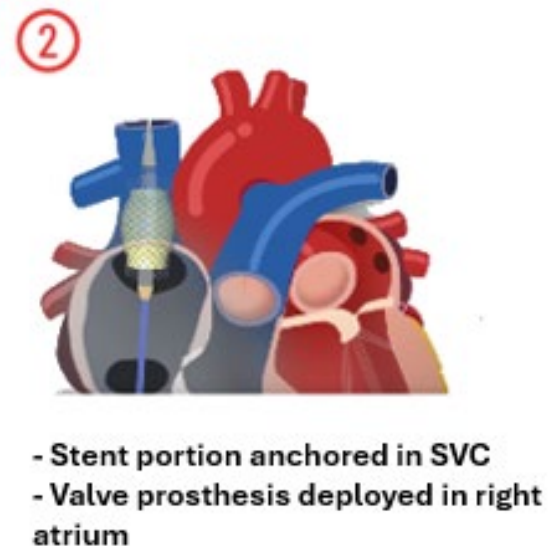
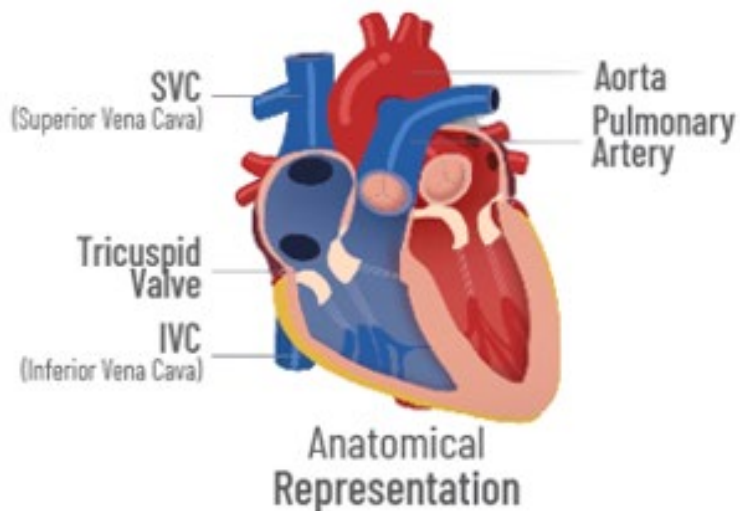


TricValve® Technology – Heterotopic Anatomical Placement Superior Vena Cava (SVC) and Inferior Vena Cava (IVC) Valves

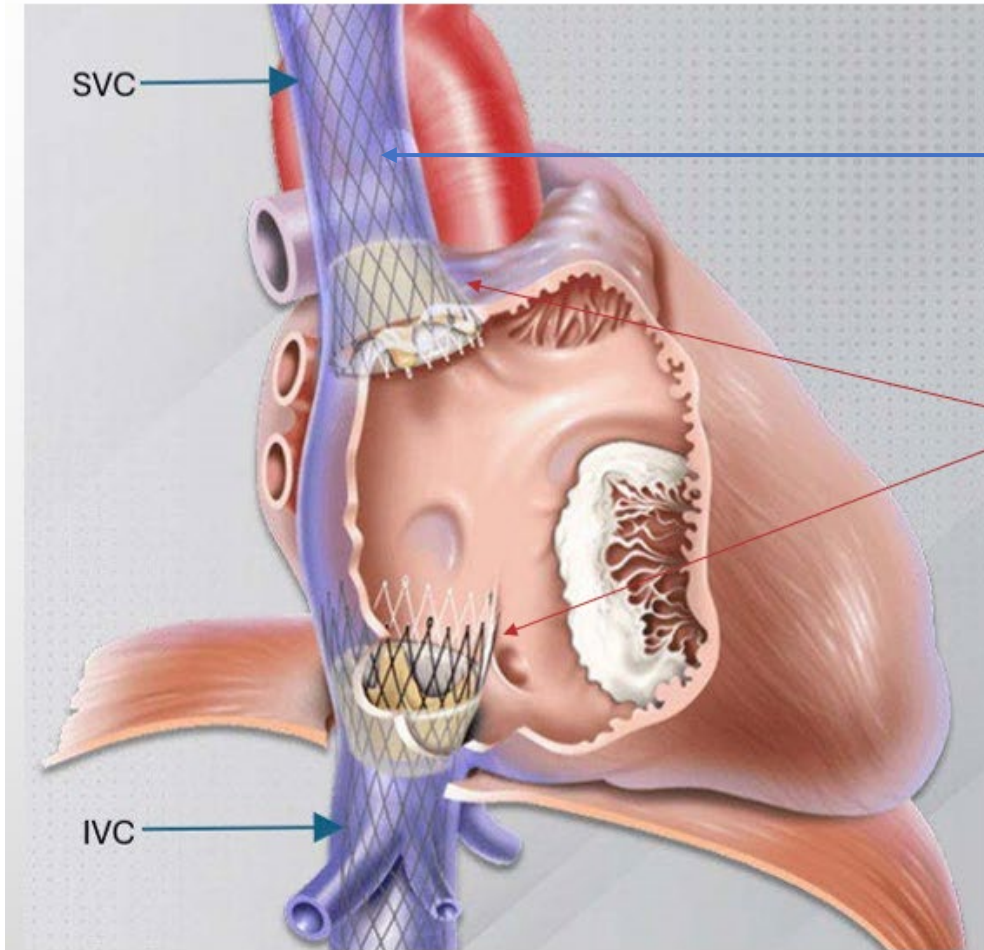
- For the heterotopic treatment involving bicaval implantation to be successful, the backflow to the caval veins must be eliminated. This is achieved by implanting unidirectional valves in the right atrium, which prevent retrograde flow into the caval veins. To ensure that the valves are correctly positioned in this region of the atrium and that there is complete sealing, the TricValve® device includes long stents that anchor in the caval veins to provide support and prevent valve displacement following the atrial remodeling that occurs as a result of the successful procedure.
- Due to the specific design of the TricValve® system, the stents allow for adequate fixation along the superior and inferior caval veins, while the valves contained within the stents, are anchored at the cavo-atrial transition. The valves' functional mechanism operates within the right atrial chamber. This precise placement ensures that the unidirectional flow of blood is maintained, preventing retrograde flow into the caval veins and effectively reducing the symptoms associated with tricuspid regurgitation.



TricValve® Implantation Procedure



Anatomical Location



1) Stent portion is anchored and fixed

2) Valve portion is placed in the right atrium



Documentation and Terminology

- Insertion of the TricValve® system will generally be documented in the operating room (O.R.) report
- Terms associated with use of the TricValve® include:
 - Transcatheter Bicaval Valves System
 - TricValve® Implantation System
 - TricValve® System
 - TricValve® System for the Superior Vena Cava and for the Inferior Vena Cava
 - TricValve® Delivery Systems

