

Cath Lab Digest

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TAVR PROGRAM SPOTLIGHT

Achieving Efficiency in TAVR A Conversation with Samir Germanwala, DO, FACC, FSCAI

Longview Regional Medical Center, Longview, Texas

Can you tell us about your facility and TAVR program?

Longview Regional Medical Center is a regional hospital in East Texas. Longview itself has about 100,000 people, but our catchment area is closer to 400,000. We are roughly two hours east of Dallas, and that distance was the main reason we launched a local TAVR program ten years ago, just a year or so after the technology received commercial approval.

Patients in this area were reluctant to travel for advanced cardiac care. Many told us they simply wouldn't go to Dallas for a procedure, so we decided to bring it here. We already had a strong foundation, with seven cardiologists (six interventionalists and one electrophysiologist) and a large regional referral network.

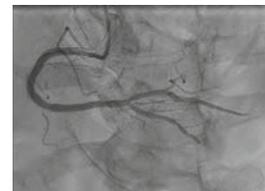
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CASE REPORT

When All Else Fails: Devices to Optimize PCI in Calcified and Tortuous Vessels

Boskey Patel, DO, FACC, FSCAI

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ASK THE EXPERTS

Innovation That Overcomes Radial Access Challenges

Manit Sabharwal with Morton Kern, MD, MSCAI, and
Arnold Seto, MD, MPA, FSCAI, FACC, FAHA

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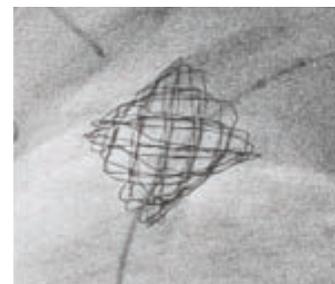
FROM JOURNAL OF INVASIVE CARDIOLOGY

Intravascular Lithotripsy- Assisted Intervention in Patients With Congenital Heart Disease

Zachary L. Steinberg, MD;

Lauren N. Carlozzi, MD; Brian H. Morray, MD

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Innovation That Overcomes Radial Access Challenges

Manit Sabharwal with Morton Kern, MD, MSCAI, and Arnold Seto, MD, MPA, FSCAI, FACC, FAHA

Transradial access (TRA) is widely used for percutaneous coronary intervention (PCI) procedures because of its association with lower bleeding and vascular complications compared to transfemoral artery access. In August, interventional cardiologists and long-term radialists Morton Kern, MD, MSCAI, and Arnold Seto, MD, MPA, FSCAI, FACC, FAHA, both practicing in Long Beach, California*, discussed a novel radial access tool with Merit Medical's Manit Sabharwal. Discussion ranged from TRA clinical tips to the challenges of bringing a new product into the cath lab system. They concluded that innovative products are worth the effort and that patients will benefit from a fresh approach to a familiar procedure.

Innovation Starts With a Critical Look at Challenges

Both physicians have performed hundreds of radial access procedures using many different products. Just as every physician has their go-to tools, Dr. Kern and Dr. Seto both trained on and use the Terumo Glidesheath Slender® in their radial access procedures. "Terumo helped build the radial market in the U.S.," said Dr. Seto. "When someone learns one technique or device, it's hard to change." And yet when something truly different and innovative comes along, that can create a different kind of energy.

Until recently, there had not been many options for TRA. The Glidesheath Slender is an excellent product, but like any product, it has

The new sheath from Merit generated interest as a possible improvement over the current tools. The Prelude Wave™ "went right in and it slipped through the tissue with great ease," said Dr. Kern. He considered that a "big plus" for the product.

*Consultants of Merit Medical®

idiosyncrasies; for instance, occasional kinking and difficulty with sheath insertion. For safety reasons, Dr. Seto no longer nicks the skin for radial sheath insertion. But as a result, the Glidesheath Slender would typically need to be pushed in with "both hands, holding most of it in order to push it through without kinking," according to Dr. Seto. The final challenge was securement in the face of the sheath's slippery hydrophilic coating. More than once, a patient has retracted their arm against the locked Protego® radiation protection system shield, resulting in the sheath pulling out.

The new sheath from Merit® generated interest as a possible improvement over the current tools. The Prelude Wave™ "went right in and it slipped through the tissue with great ease," said Dr. Kern. He considered that a "big plus" for the product. The other concern was that securing a sheath in place can be difficult. Many interventional cardiologists use Tegaderm™, but the Prelude Wave comes with a unique fixation system, the SnapFix™ technology, which Dr. Kern said is very easy to use. Dr. Kern was "sold on the first case."

Clinical Tips for TRA

Sliding in the Sheath

One early accommodation for the Glidesheath Slender was to "nick the skin to get the sheath in," said Dr. Seto. Today, most Glidesheath Slenders are able to penetrate the skin, though some patients still have tough skin and are a "little resistant [to easy



Figure 1. Circular draping setup.

Photo courtesy Merit Medical.

advancement] and the sheath tends to kink" in those situations, said Dr. Seto. In contrast, the Prelude Wave came with a stiff dilator that facilitated sheath movement and was a significant advantage over competitive tools.

Securing the Sheath

Catheter exchanges are constant opportunities for lubricious sheaths to slip out of their placement. This can be a problem for radialists, because they depend on the steady presence of the sheath.

"When we first started these radial access procedures, after sheath insertion, we sutured the sheath to the skin to keep it from moving around," said Dr. Seto. That practice gave way to securing the sheath using 3M™ Tegaderm. But the presence of any leaked blood at the sheath insertion area would render the Tegaderm useless. A thin blood layer under the film prevents the adhesive from gripping properly, resulting in a weak anchoring of the sheath and a poor film seal.

Two Radial Prep Setups for TRA

On the arm without the drape, the SnapFix adhered to the skin without difficulty, and blood did not interfere with its adhesion. The interaction between the SnapFix and radial drapes was discussed as well. Drs. Kern and Seto typically choose between two prep setups for radial access procedures:

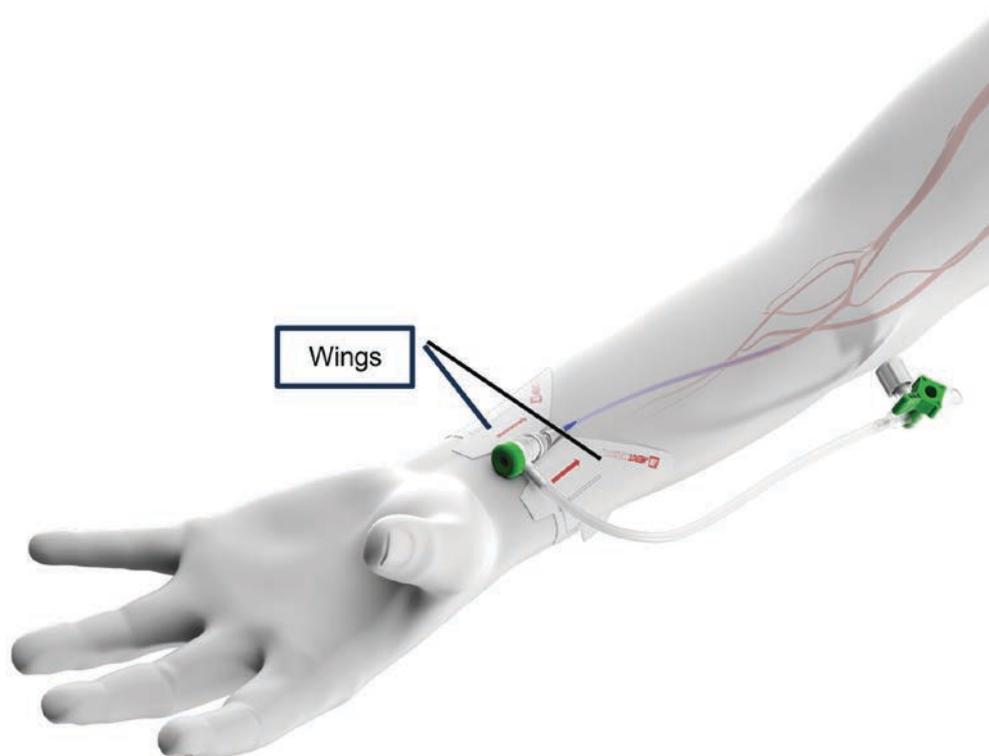


Figure 2. SnapFix™ technology wings lay flat to secure the Prelude Wave™.

Photo courtesy Merit Medical.

Because the Prelude Wave’s hydrophilic coating has the best-in-class ease of insertion, it is both easy to insert and easy to withdraw. That’s why the SnapFix technology is the perfect securement complement to the Prelude Wave. Once in place, the Prelude Wave stays in place.

- **Over the drape:** Use a radial drape with a circular port access to the insertion site (Figure 1).
 - Add the SnapFix device on top of the radial drape with the wings partially over the skin and partially over the drape
- **A gloved hand cover and a drape applied beginning at the mid forearm.**
 - This allows a large section of the forearm to be exposed in case of ulnar artery or brachial vein access (Figure 1).
 - The SnapFix is applied to the sheath, with the wings easily attaching to the exposed skin adjacent to the sheath near the wrist.

Prelude Wave With SnapFix: Two-Fold Solution

The Prelude Wave’s SnapFix technology is a straightforward solution for securing the lubricious sheath, according to Drs. Kern and Seto. Dr. Kern explains: “When the sheath is in the artery, the SnapFix adhesive wings cover the skin next to the sheath [Figure 2]. You pull out the tabs underneath, and it sticks to the arm.”

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Advice for Terumo Users Wanting to Try Something Else

Changing from a product or technology you trained on can be challenging, and it is understandable that clinicians are not eager to do that. Getting the operator and their team on board is helped by keeping the message about the product “pretty simple” and straightforward, said Dr. Kern. “Talking with staff about the new product also facilitates using the new product in the lab.” Look for ways to enhance training for the team, which is part of the solution to team acceptance.

But the combination of the Prelude Wave and the SnapFix technology is a winning combination for a team to try. ■

This article is sponsored by Merit Medical.

REFERENCE

1. Sridevi P, Sharma R, Boudoulas K. Newer emerging strategies to reduce radial artery occlusion: post-transradial catheterization. Quality Improvement Tools: Society for Cardiovascular Angiography and Interventions (SCAI). Published June 19, 2025. Accessed September 2, 2025. <https://scai.org/quality-improvement-tools/qi-tips/newer-emerging-strategies-reduce-radial-artery-occlusion-post>.

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Find the article with Manit Sabharwal, Morton Kern, MD, and Arnold Seto, MD, MPA, online:

