

# Simplified Mechanical Thrombectomy: A Profitable Reality for ASCs and OBLs

## Overview

Ambulatory Surgery Centers (ASCs) and Office-Based Labs (OBLs) are emerging as compelling alternatives to hospital-based care, offering patients better access at substantially lower cost. As site-of-care reimbursement evolves and technology matures, peripheral thrombectomy is becoming economically viable in these settings. iCHOR Vascular's iSWEEP platform is accelerating this shift through intentional simplicity: no capital equipment, minimal setup, predictable costs, and rapid procedures.

## The Opportunity

Peripheral vascular occlusions remain costly to treat. Hospital-based thrombectomy typically involves capital-intensive aspiration systems, specialized staffing, thrombolytic drugs, or surgical intervention, all of which carry significant overhead and often require extended monitoring or inpatient stays.

ASCs and OBLs can disrupt this model. These sites thrive on same-day discharge, lean teams, and high throughput. But traditional thrombectomy approaches, complex consoles, multi-component aspiration setups, lytic infusions, are misaligned with outpatient economics. They demand equipment purchases, preventive maintenance, specialized training, and post-procedure observation that erode the efficiency gains these sites depend on.

**iSWEEP changes the equation.**



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## How iSWEEP Works

The iSWEEP platform converts a proven surgical technique, the Fogarty balloon embolectomy—into a percutaneous, minimally invasive procedure. The core mechanism uses a compliant balloon sweep to engage and remove thrombus from vessel walls, combined with proximal and distal balloon occlusion and a collection funnel that captures debris and prevents distal embolization. [ichorvascular.com](http://ichorvascular.com)

Key design principles:

- **All-in-one disposable system:** No assembly, no capital equipment, no additional accessories.
- **Minimal blood loss:** Flow arrest and controlled sweep reduce estimated blood loss (EBL) commonly associated with surgery and aspiration systems
- **Vessel and valve preservation:** Compliant balloon avoids the endothelial damage associated with rigid mechanical devices
- **Built-in embolic protection:** Dual-balloon configuration with integrated funnel reduces distal embolization issues common with rigid tools and aspiration techniques.

The platform addresses a clinical gap the founders identified during extensive preclinical work: despite innovations in aspiration, maceration, and cage-based devices, the decades-old Fogarty technique consistently delivered superior clot removal and vessel integrity. iSWEEP brings that mechanism into the endovascular lab.

## Simplicity as a Growth Engine

iCHOR Vascular's iSWEEP platform is giving ASC and OBL operators new opportunities to expand their revenues and patient services, without incurring huge upfront investments or having to radically change their established operating models.

Contrast this with aspiration systems, which typically require a capital console, multiple catheter sizes, canisters, connective tubing, separator wires, and compatible sheaths. That multiplies SKUs, complicates inventory, and extends learning curves; all friction points for lean outpatient operations.

## Two SKUs, Full Coverage

iCHOR's focused portfolio is a strategic advantage: iART (7F) for peripheral arterial thrombectomy and iDVT (14F) for venous applications. Two devices cover essentially the entire peripheral vascular tree, with a dialysis system for grafts and fistulae currently in development.

For ASCs and OBLs, this simplifies purchasing, stocking, training, and procedure planning. Fewer SKUs means easier inventory management, fewer expirations, lower working capital, and faster onboarding, which are all critical for smaller, independent sites operating on tight margins.

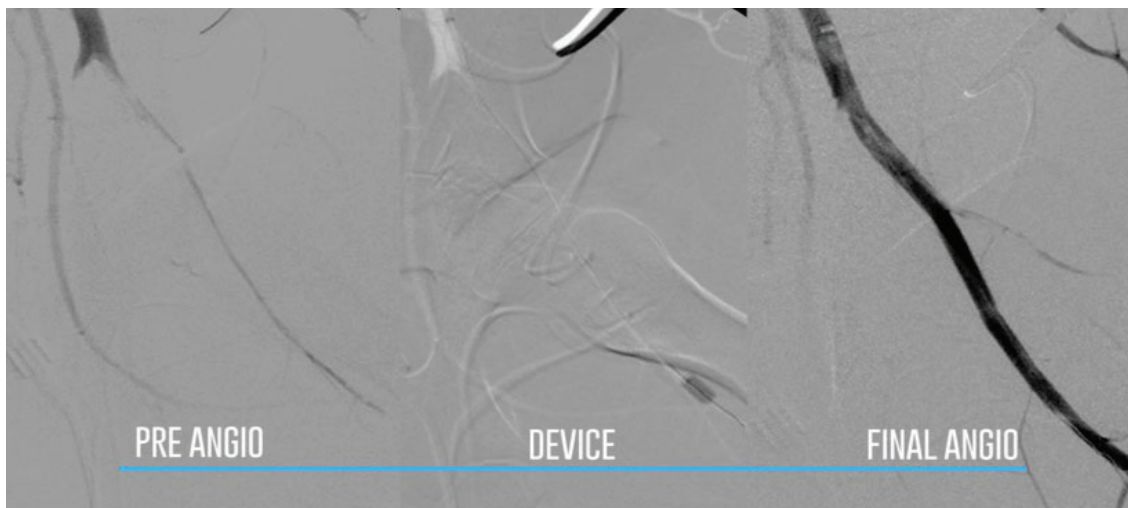
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## Throughput and Profitability

In outpatient settings, procedure time directly determines daily capacity and revenue. iSWEEP has demonstrated quick case times with minimal blood loss and high clot clearance rates, supporting predictable scheduling in same-day environments.

Because the system is mechanical and self-contained, operators avoid the time sinks that plague aspiration workflows: managing flow rates, changing canisters, clearing clogged catheters, and troubleshooting separator wires. That compression in ancillary handling translates to more cases per day without adding capital cost or maintenance overhead.

The platform also functions as a reliable bailout when other approaches fail or when embolic material migrates unexpectedly during routine interventional procedures, preventing emergencies without abandoning the treatment plan or escalating to the OR.



## Lean Staffing, Streamlined Operations

ASC and OBL economics depend on lean teams. Adding device-specific technicians or managing complex capital systems erodes margins.

iSWEEP requires no dedicated techs, no external consoles, and no lytic infusions. Core cath lab or endovascular staff can manage procedures using familiar catheter skills. The system was designed to democratize peripheral thrombectomy, improving patient outcomes while reducing workflow complexity and treatment cost.

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## Clinical Control and Versatility

Physicians in outpatient settings value predictability and control. iSWEEP's balloon sweep mechanism provides both visual and tactile feedback, giving operators a high degree of control without relying on high-power suction that can increase blood loss and reduce tactile sensitivity.

The platform is effective across mixed thrombus morphology, acute, subacute, organized, and adherent clot, reinforcing its role as a versatile tool that complements rather than replaces existing therapies. It provides an important option when aspiration alone is ineffective, fitting naturally before, between, or after aspiration passes.

## Strategic Positioning for Growth

Payers and health systems increasingly incentivize peripheral vascular procedures in lower-cost settings. The global aspiration catheter market reflects this momentum, driven by demand for minimally invasive solutions across cardiovascular, neurovascular, and peripheral applications. [giiresearch.com](http://giiresearch.com)

ASCs and OBLs that can deliver fast, safe, and economically efficient thrombectomy will capture disproportionate share of this growth. iSWEEP's value proposition aligns tightly with their operational and financial priorities:

- No capital equipment or service contracts
- Minimal procedure complexity and setup time
- Two-SKU coverage of the peripheral arterial and venous anatomy and morphology
- Strong physician control with built-in bailout capability
- Predictable costs and rapid case turnover

For organizations planning to expand their outpatient vascular footprint, integrating iSWEEP as a core thrombectomy solution offers a practical pathway to treat more patients, improve throughput, and strengthen margins, without the inventory load, procedural complexity, and service obligations of traditional capital-based systems.

