

Reference: Current MTF policies and procedures are in compliance with current FDA, AATB and other regulatory requirements.

Definitions of Label Symbols



See IFU



Do Not Reuse

Processed by:



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Within the United States: 1.800.433.6576
Outside of the United States: 1.732.661.0202

All recovery, processing and distribution costs were paid for by MTF, a non-profit organization.

CAUTION: Restricted to use by a physician, dentist and/or podiatrist. Please note: Human tissue for transplantation shall not be offered, distributed or dispensed for Veterinary Use.

MTF tissue forms and products are protected by one or more issued or licensed United States patents. A list of patents on available tissues and related technologies may be found on the MTF web site www.mtf.org.

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CTO: 100024

READ BEFORE USING

AlloPatch HD® Acellular Dermis

DONATED HUMAN TISSUE

THIS TISSUE WAS RECOVERED FROM A DECEASED DONOR FROM WHOM LEGAL AUTHORIZATION OR CONSENT HAS BEEN OBTAINED. THIS RECOVERY WAS PERFORMED USING ASEPTIC TECHNIQUES. PROCESSING AND PACKAGING WERE PERFORMED UNDER ASEPTIC CONDITIONS. TERMINAL STERILIZATION AGENTS WERE **NOT** USED IN THE PROCESS.

DESCRIPTION

AlloPatch HD® is human allograft skin minimally processed to remove epidermal and dermal cells. The process utilized preserves the extracellular matrix of the dermis. AlloPatch HD is aseptically processed and is not terminally sterilized.

INDICATIONS FOR USE

AlloPatch HD is processed to remove cells while maintaining the integrity of the matrix with the intent to address the issues of the specific and nonspecific inflammatory responses. It is used for the replacement of damaged or inadequate integumental tissue or for the repair, reinforcement or supplemental support of soft tissue defects..

ADVERSE EFFECTS

Possible adverse effects of using human skin include but are not limited to:

- Local or systemic infection
- Dehiscence and/or necrosis due to poor revascularization
- Specific or nonspecific immune response to some component of the graft.

Within the United States: Adverse outcomes attributable to the tissue must be promptly reported to MTF. Outside of the United States: Adverse outcomes attributable to the tissue must be promptly reported to your local representative.

PRECAUTIONS

Conditions that could potentially inhibit integration of AlloPatch HD include, but are not limited to:

- Fever
- Uncontrolled diabetes
- Pregnancy
- Low vascularity of the surrounding tissue
- Local or systemic infection
- Mechanical trauma
- Poor nutrition or poor general medical condition
- Dehiscence and/or necrosis due to poor revascularization
- Inability to cooperate with and/or comprehend post-operative instructions
- Infected or nonvascular surgical sites

CAUTIONS

Do not sterilize. Do not Freeze. ALL ALLOGRAFTS ARE FOR SINGLE PATIENT USE ONLY. Do not use portions of an allograft from one container on multiple patients. No known sensitizing agents are present in this tissue. NOTE: No antibiotics are used during the processing of tissue in AlloPatch HD.

Extensive medical screening procedures have been used in the selection of all tissue donors for MTF (please see Donor Screening and Testing). Transmission of infectious diseases such as HIV or hepatitis, as well as a theoretical risk of the Creutzfeldt-Jakob (CJD) agent, may occur in spite of careful donor selection and serological testing.

ALLOGRAFT INFORMATION

During tissue processing and packaging, this allograft was tested and showed no evidence of microbial growth, complying with the requirements of USP <71> Sterility Tests.

INSTRUCTIONS FOR USE

AlloPatch HD is packaged in a sterilized foil pouch that is designed to be passed directly into the sterile field.

1. Peel back the outer Tyvek Package and pass the inner foil pouch to the sterile field.
2. Remove AlloPatch HD from the inner-foil pouch using sterile gloves/forceps.
3. Place AlloPatch HD in sterile basin for rehydration.

Rehydration

1. Aseptically rehydrate AlloPatch HD[®]. Rehydration may be accomplished by completely submerging the allograft in 100 mL of sterile normal saline or 100 mL sterile lactated Ringer's solution.
2. Complete rehydration results in a soft and pliable allograft.

NOTE: Reconstituted tissue must be implanted or discarded within 24 hours of opening the final tissue container provided the allograft tissue is maintained in an aseptic environment.

Dispose of excess or unused tissue and all packaging that has been in contact with the tissue in accordance with recognized procedures for discarding regulated medical waste materials.

Implantation

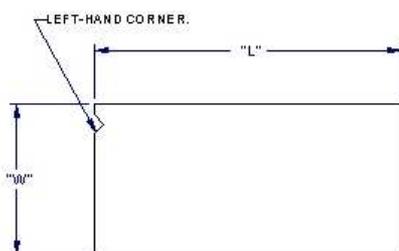
Once the AlloPatch HD has been fully rehydrated it is ready for application in the surgical site. It may be aseptically trimmed, with scissors or scalpel, to fit the dimensions of the application site.

Orientation

In order to discern the dermal side from the epidermal side, note that in most instances the epidermal side may have more pigmentation than the dermal side.

For further verification, add a drop of blood to both sides of the graft and rinse with sterile saline. The dermal side will appear red and the epidermal side will appear pink.

To ensure proper orientation of AlloPatch HD, position it so that the indicating notch is in the upper left-hand side of the tissue, facing left. This will assure that the epidermal side is facing up.



DONOR SCREENING & TESTING

Prior to donation, the donor's medical/social history is screened for medical conditions or disease processes that would contraindicate the donation of tissues in accordance with current policies and procedures approved by the MTF Medical Board of Trustees.

Donor blood samples taken at the time of recovery were tested by a facility that is CLIA certified and registered with the FDA. The donor blood samples were tested for:

- Hepatitis B surface antigen
- Hepatitis B core antibody
- Hepatitis C antibody
- HIV-1/2 antibody
- Syphilis
- HIV -1 (NAT)
- HCV (NAT)
- HBV (NAT)

All infectious disease tests were negative. This allograft tissue has been determined to be suitable for transplantation.

The infectious disease test results, consent, current donor medical history interview, physical assessment, available relevant medical records to include previous medical history, laboratory test results, autopsy and coroner reports, if performed, and information obtained from any source or records which may pertain to donor suitability, have been evaluated by an MTF physician and are sufficient to indicate that donor suitability criteria current at the time of procurement, have been met. This tissue is suitable for transplantation. The donor suitability criteria used to screen this donor are in compliance with the FDA regulations published in 21 CFR Part 1271 Human Cells, Tissues, and Cellular and Tissue Based Products, as applicable. All procedures for donor screening, serologic and microbiologic testing meet or exceed current standards established by the American Association of Tissue Banks.

PACKAGING & LABELING

AlloPatch HD is aseptically packaged in a sterilized hermetically sealed foil pouch. The foil pouch containing AlloPatch HD is inside a sealed sterilized Tyvek pouch. The Tyvek pouch is sealed, labeled and then placed inside an envelope.

This allograft must not be used under any of the following circumstances:

- If the container seal is damaged or not intact or has any physical damage;
- If the container label or identifying bar code is severely damaged, not legible or is missing; or
- If the expiration date shown on the container label has passed.

Once a container seal has been compromised, the tissue shall be either transplanted, if appropriate, or otherwise discarded.

STORAGE

AlloPatch HD[®] should be stored at ambient temperature. No refrigeration or freezing is required. It is the responsibility of the transplant facility or clinician to maintain the tissue intended for transplantation in the appropriate recommended storage conditions prior to transplant.

PATIENT RECORD

Tissue recipient records must be maintained by the consignee and transplant facility for the purpose of tracing tissue post transplantation. A TissueTrace[®] Tracking Form and peel-off stickers have been included with each package of tissue. Please record the patient ID, name and address of the transplant facility, allograft tissue information (using the peel-off stickers), and comments regarding the use of the tissue on the TissueTrace Tracking Form. Alternatively a system for electronic submission may be used and sent to MTFTTC@Sceris.com. **Within the United States:** Once completed, the bottom page of the form should be returned to MTF using the self-addressed mailer. Copies of this information should be retained by the transplant facility for future reference. **Outside of the United States:** Once completed, the bottom page of the form should be returned to the local allograft representative or provider. Copies of this information should be retained by the hospital for future reference.