

SurgiClot® Hemostatic Dressing



St. Teresa Medical, Inc.
2915 Waters Road, Suite 108
Eagan, Minnesota 55121
USA

Tel: 651-789-6550

www.StTeresaMedical.com

INSTRUCTIONS FOR USE

DEVICE DESCRIPTION

Each SurgiClot® Hemostatic Dressing, utilizing FastClot® technology, consists of the following components:

- Non-woven Nanofiber Dextran
- Human Thrombin and Fibrinogen (Clotting Proteins)

Each 7.0 cm x 7.0 cm dressing contains 140 to 260 mg of human fibrinogen and ≥ 130 International Units of human thrombin.

The clotting proteins are sterile, non-pyrogenic, freeze-dried, solvent/detergent-treated powder preparations made from pooled human source plasma. The pooled human source plasma is obtained from US-licensed plasma collection centers.

SurgiClot Hemostatic Dressing is fully dissolvable, resorbable and biocompatible.

HOW SUPPLIED

SurgiClot Hemostatic Dressing is provided as a 7.0 cm x 7.0 cm dressing in a protective plastic tray, sealed in a foil chevron pouch and sterilized by gamma irradiation.

Table 1 below summarizes the materials used in the device:

Table 1. SurgiClot Hemostatic Dressing Configuration

Active Dressing (7.0 cm by 7.0 cm)	Non-woven Nanofiber Dextran Human Thrombin Human Fibrinogen
Packaging (15.2 cm x 21.6 cm foil chevron pouch)	Heat-sealed foil pouch that contains: <ul style="list-style-type: none"> • Desiccant packet • Polyethylene, blue tinted tray • Tyvek lid for tray Label

ACTIONS

The primary mode of action of the SurgiClot Hemostatic Dressing is a physical effect to promote hemostasis. Upon topical placement of the SurgiClot dressing to cancellous bone bleeding surfaces, the non-woven nanofiber dextran material of the dressing adheres to the surface to form a physical barrier that plugs exposed marrow spaces. This has the effect of stopping blood flow.

Exposure of the dressing to blood at the dressing application site also dissolves the dextran material. As the dextran material dissolves, a further physical barrier is produced at the bleeding site when the thrombin and fibrinogen embedded in the dressing interact to form an autonomous insoluble fibrin clot. The action of the clotting proteins is ancillary to that of the dextran material.

INDICATIONS

SurgiClot Hemostatic Dressing is a medical device indicated for cancellous bone bleeding and is used as an adjunct to promote hemostasis when control of bleeding by standard surgical methods of hemostasis is ineffective or impractical.

CONTRAINDICATIONS

Do not use SurgiClot Hemostatic Dressing in individuals with known hypersensitivity to human blood products and/or dextran.

Do not use SurgiClot Hemostatic Dressing in the presence of active infection or in contaminated areas of the body because infection may occur.

Do not apply SurgiClot Hemostatic Dressing intravascularly. Intravascular application of the SurgiClot dressing may result in life-threatening thromboembolic events.

WARNINGS and PRECAUTIONS

The physician should discuss the risks and benefits of this product with the patient.

No more than four (4) SurgiClot Hemostatic Dressings may be used on one adult patient.

As with other hemostatic agents, circumstances that result in a negative peripheral venous pressure (e.g. patient positioning) may draw material into the vascular system, potentially resulting in life threatening thromboembolic events.

SurgiClot Hemostatic Dressing is supplied sterile for single use only. Do not re-sterilize e.g., autoclave. Do not reuse.

Do not use the SurgiClot Hemostatic Dressing if the packaging has been damaged.

Do not expose the SurgiClot Hemostatic Dressing to liquid prior to use. Exposure of the SurgiClot dressing to liquid prior to use will prematurely dissolve the dextran.

Do not cut the SurgiClot Hemostatic Dressing. Cutting the dressing may result in the lyophilized proteins spilling out of the dressing.

Do not attempt to remove the SurgiClot Hemostatic Dressing once the product is applied at the bleeding site. Attempting to remove the product may disrupt the newly-formed clot.

Excess SurgiClot dressing (material not fully dissolved and/or not incorporated in the hemostatic clot) should be dissolved by gentle irrigation with a small amount of sterile non-heparinized saline at the site of application.

Performance of the SurgiClot Hemostatic Dressing following repeated (more than twice) removal and return of the fully packaged product from controlled temperature 2° - 8°C (36° - 46°F) to ambient room temperature has not been evaluated.

The safety and effectiveness of the SurgiClot Hemostatic Dressing has not been established in children and pregnant women.

The use of SurgiClot Hemostatic Dressing in conjunction with autologous blood salvage circuits has not been evaluated.

SurgiClot Hemostatic Dressing contains thrombin and fibrinogen made from human plasma. When medical devices are made from human plasma, certain measures are put in place to prevent infections being passed on to patients; including careful selection of plasma donors to make sure those at risk of carrying infections are excluded, and testing of each plasma donation for bacteria/viruses. Manufacturers of products derived from plasma also include steps in the processing of the plasma that can inactivate or remove viruses. Despite these measures, when products prepared from human plasma are administered, the possibility of passing on bacteria/viruses cannot be totally excluded. This also applies to the Creutzfeldt-Jakob disease (CJD) agents. The measures taken are considered effective for enveloped viruses such as human immunodeficiency virus (HIV), hepatitis B virus and hepatitis C virus, and for the non-enveloped hepatitis A and parvovirus B19V viruses.

All infections thought to have been transmitted by this product should be reported to St. Teresa Medical, Inc.

Do not use SurgiClot Hemostatic Dressing in place of sutures, ligature, cautery or other primary modes for control of hemostasis.

ADVERSE EVENTS (AEs)

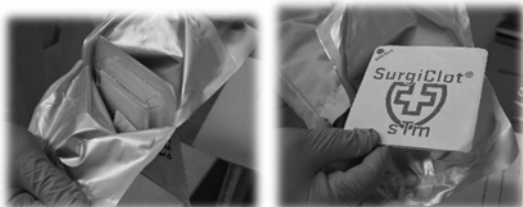
Potential AEs associated with the SurgiClot Hemostatic Dressing include but are not limited to the following:

- Anemia
- Bacterial Infection
- Creutzfeldt-Jakob disease (CJD)
- Foreign Body Reaction/Inflammatory Response
- Pyrogenic Fever
- System Toxicity
- Thromboembolism
- Viral Infection

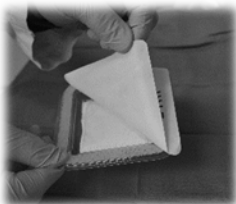
To report SUSPECTED ADVERSE EVENTS, contact St. Teresa Medical, Inc. at 651-789-6550 or support@stteresamedical.com.

SURGILOT® HEMOSTATIC DRESSING – INSTRUCTIONS FOR USE

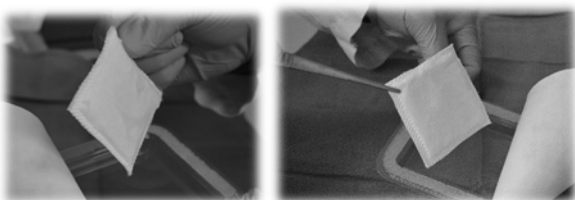
1. Remove the SurgiClot Hemostatic Dressing from the refrigerator approximately 30 minutes prior to application.
2. Before using, inspect the package for signs of damage. If the package is damaged, sterility cannot be assured. Do not use if the packaging has been damaged. **Note:** The application of the SurgiClot Hemostatic Dressing is a sterile procedure requiring the use of sterile gloves, mask and instruments while handling the dressing.
3. Open the foil pouch and remove the tray.



4. Open the protective tray lid.



5. Using dry sterile gloves or sterile forceps, remove the SurgiClot Hemostatic Dressing from the tray.



6. Identify the source of bleeding at the bone surface. This is the target site for application of the SurgiClot Hemostatic Dressing. Remove excess blood or fluid from the site of application, if required, to improve visibility.
7. Fold the SurgiClot Hemostatic Dressing to match the dimensions of the site of application. The dressing can be shaped into any configuration as needed, but ensure that the dressing covers the bleeding site completely. Do not attempt to cut the SurgiClot Hemostatic Dressing.
8. Place the SurgiClot dressing on the bleeding site, and with the use of finger(s) or forceps, hold the dressing in place. A gauze sponge or equivalent sterile pad (e.g., Telfa pad) may

be used as a backing material over the dressing to prevent adherence of the dressing to finger(s) or forceps.



9. After 2-4 minutes, carefully remove the backing material (if used) by gentle irrigation with sterile non-heparinized saline, and observe the bleeding area to determine if bleeding has ceased. Additional SurgiClot dressings may be applied if bleeding continues; do not use more than four dressings on one adult patient.



10. Once bleeding has ceased, dissolve excess SurgiClot material by gentle irrigation with sterile non-heparinized saline. Do not attempt to remove the dressing material.
11. Unused SurgiClot material that has been removed from its packaging and exposed to blood and/or bodily fluids must be disposed of in accordance with local requirements.
12. If a backing material is used, it must be disposed of in accordance with local requirements.
13. Properly dispose of packaging material.

CLINICAL STUDY EXPERIENCE

Because clinical studies are conducted under widely varying conditions, adverse event rates observed in the clinical studies of a device cannot be directly compared to rates in the clinical studies of another device and may not reflect the rates observed in practice.

Two open-label studies assessing the safety and performance of SurgiClot Hemostatic Dressing in the treatment of cancellous bone bleeding have been conducted; a 30-subject multicenter study in patients undergoing iliac crest bone graft, pelvic osteotomy or spinal fusion surgical procedures was conducted in Europe, and a 10-subject single center study in subjects undergoing spinal fusion surgical procedures was conducted in India.

Safety

In the combined SurgiClot Hemostatic Dressing 40-subject clinical study data, the incidence of adverse events was 75% (30 subjects). The most frequently reported adverse events were anemia (14 subjects [35.0%]), abnormal lab values (13 subjects [32.5%]) and immunological reactions (9 subjects [22.5%]), see Table 2.

Table 2. Clinically Relevant Adverse Events Reported in at Least 5% of Subjects Treated with SurgiClot Hemostatic Dressing, Irrespective of Causality

Adverse Event	Occurrence N=40 n (%)
At least 1 adverse event	30 (75%)
Fever	2 (5.0%)
Hematoma	2 (5.0%)
Respiratory complications	2 (5.0%)
Pain/discomfort	3 (7.5%)
Skin irritation/rash	3 (7.5%)
Hypotension	4 (10.0%)
Immunological reactions	19 (22.5%)
Abnormal lab values	13 (32.5%)
Anemia	14 (35.0%)

Other adverse events observed in less than 5% of the clinical study subjects were bleeding (mild to moderate), infection, inflammation, nausea, neurological, urinary tract infection (UTI), reduced body temperature, constipation, and tooth abscess.

Two adverse events were considered “mild” and “Possibly Related” to the use of SurgiClot Hemostatic Dressing: anemia (1 subject, 2.5%), immunological reaction – elevated eosinophil count (1 subject, 2.5%). No other adverse events were deemed to be related to the use of SurgiClot Hemostatic Dressing.

Performance

In the Intention to Treat (ITT) population (40 subjects), the proportion of subjects that achieved controlled hemostasis at 3 minutes following treatment with SurgiClot Hemostatic Dressing was 75.0% (30/40). Thirty-seven (37) out of 40 (92.5%) subjects achieved controlled hemostasis at 6 minutes following treatment with the product, see Table 3.

Table 3. Efficacy Results in Orthopedic or Spinal Surgery, ITT Population (N = 40)

Characteristics	Total number of subjects who achieved controlled hemostasis	Proportion of subjects who achieved controlled hemostasis
Hemostasis at 3 Minutes	30	0.75
Hemostasis at 6 Minutes	37	0.925

In total, 51 surgical sites were treated with the SurgiClot dressing. Of the 51 surgical sites, 41 (80.4%) achieved controlled hemostasis at 3 minutes, while 48 (94.1%) achieved controlled hemostasis at six minutes, see Table 4.

Table 4. Efficacy Results in Orthopedic or Spinal Surgery, Surgical Treatment Sites (N = 51)

Characteristics	Total number of surgical sites treated with SurgiClot® that achieved controlled hemostasis	Proportion of surgical sites treated with SurgiClot® that achieved controlled hemostasis
Hemostasis at 3 Minutes	41	0.804
Hemostasis at 6 Minutes	48	0.941

STORAGE AND HANDLING CONDITIONS

SurgiClot Hemostatic Dressing shall be stored dry at controlled temperature 2°- 8°C (36°- 46°F). SurgiClot Hemostatic Dressing must be used immediately once the package is opened. Discard if packaging is damaged. Do not use after the expiration date on the package label. Do not reuse.

SYMBOL KEY



Manufacturer



Date of Manufacture



Catalog Number



Batch Code



Do Not Re-Use



Do Not Resterilize



Use-By Date



Keep Dry



Caution



Temperature Limits



Consult Instructions For Use



Sterilized Using Irradiation



For Use by A Physician Only



Do Not Use if Package is Damaged

PATENTS

International and U.S. patents US 9,399,082 and 9,555,157, Europe 2276879, other patents pending.

TRADEMARKS

St. Teresa Medical, Inc., the St. Teresa Medical logo, SurgiClot®, FastClot® and SurgiClot“O”® are registered trademarks of St. Teresa Medical, Inc.; all rights reserved.

St. Teresa Medical, Inc.
2915 Waters Road, Suite 108
Eagan, Minnesota 55121
USA
Phone: 651-789-6550
www.StTeresaMedical.com