Instructions for Use

Integra® BioFix® Flow Placental Tissue Matrix Allograft

DESCRIPTION
Integra® BioFix® Flow (BioFix Flow) is a sterile, human tissue allograft, derived from decellularized particulate human placental connective tissue matrix. It is intended for homologous use as a connective tissue matrix. Biofix Flow is provided in a vial.

CONTRAINDICATIONS
Contraindications for the use of BioFix Flow include patients exhibiting gross infection at the transplantation site.

WARNINGS AND PRECAUTIONS
- Do not re-sterilize.
- Store at ambient temperature. Keep away from excessive heat. Do not freeze.
- BioFix Flow is intended for single patient use. Do not reuse.
- Do not use if: package integrity has been violated, opened or damaged; mishandling has caused possible damage or contamination; seal is broken or compromised.
- Once BioFix Flow has expired, it must be discarded.
- Do not implant in the presence of active infection.
- After use, handle and dispose of all unused portions and packaging in accordance with accepted medical practice and applicable local, state and federal laws and regulations.
- BioFix Flow may contain trace amounts of antibiotic residuals such as amphotericin, penicillin, streptomycin and neomycin used in low doses and rinsed during processing.

ADVERSE REACTIONS
Inherent uncertainty exists in medical and social histories and laboratory testing which may not detect known or unknown pathogens. Therefore, the following complications may occur with tissue transplantation:
- Loss of integrity of transplanted tissue with resorption, disintegration, and associated loss of continuity.
- Immune response to transplanted tissue.
- Transmission of known pathogens including Hepatitis B or C, Human T-cell Leukemia/Lymphotropic Virus, Human Immunodeficiency Virus 1 & 2, syphilis, or bacteria.
- Transmission or causation of diseases of unknown etiology and characteristics.

Note: Integra and Human Regenerative Technologies, LLC (HRT) make no claims concerning the biological properties of allograft issue. All tissues have been collected, processed, stored, and distributed in compliance with FDA regulations governing HCT/P's. Although every effort has been made to ensure the safety of the allograft, current technologies may not preclude the transmission of disease.

Adverse reactions or outcomes that potentially involve the use of F Flow should be reported immediately.

PRODUCT PREPARATION & APPLICATION
1. Open BioFix Flow box and remove the clear product pouch.
2. Using aseptic technique, peel open the outer clear pouch and present the sterile vial onto the sterile field.
3. Open the vial and add desired amount of sterile saline.
4. Close the vial and vigorously shake to mix.
5. Open the vial for the application.
6. Draw into syringe using an 18 gauge needle (or similar).
7. Change to a 23 gauge needle (or similar) to inject.
8. Add additional saline as needed.
9. To apply, feather graft around and into the intended site, injecting approximately every .5cm, moving slowly to allow graft to settle into the tissues. Provide as much coverage as possible, directly into, around, and under the surgical wound, defect, suture line, or desired tissue layers.

Note: The goal is to provide consistent, even coverage, to make the components in the graft accessible to the entire intended area.

HCT/P TRACKING
IMPORTANT NOTICE TO END-USER: Recipient records must be maintained for the purpose of tracking tissue post-transplant per the Joint Commission and FDA requirements. The allograft ID number must be recorded in the operative record. The *Graft Tracking Record* must be completed and returned to Human Regenerative Technologies, LLC. Supplemental labels, which indicate the Tissue ID Number, are contained in this package to aid in the tracking process.

RECOVERY
Tissue recovery is performed using aseptic technique. At the time of recovery, medical records are collected and reviewed as part of donor eligibility.

DONOR SCREENING
The donor has been evaluated in accordance with US FDA, AATB standards and applicable State guidelines and this DONATED HUMAN TISSUE has been determined to be suitable for transplantation by a licensed physician, Medical Director of the Tissue Bank.

Review of donor records includes but is not limited to the following - medical history and risk behavior assessment, medical records, recent physical examination and tissue recovery microbiology studies indicate that the donor is free from risk factors for and clinical evidence of infection due to relevant communicable diseases and other exclusionary disease conditions.

Additionally, testing of a qualified blood sample indicates that the donor is **negative** or **nonreactive** for the following communicable disease markers:

- Human Immunodeficiency Virus (HIV)
  - HIV-1/2 Antibodies
  - Nucleic Acid Test (NAT) for HIV-1 RNA
- Hepatitis B Virus (HBV)
  - HBV Surface Antigen
  - HBV Core Antibody (Total)
  - Nucleic Acid Test (NAT) for HBV RNA
- Hepatitis C Virus (HCV)
  - HCV Antibody
  - Nucleic Acid Test (NAT) for HCV RNA
- Human T Cell Lymphotrophic Virus I/II
  - HTLV-I/II Antibody
- Syphilis
  - Rapid Plasma Reagin Screen (RPR)*, or
  - Treponemal Specific Test

*Tissues from a donor whose blood specimen is unsuitable for the non-treponemal screening assay, such as RPR test, or with a reactive result from the non-treponemal screening assay, are cleared for transplantation use only when the result from the treponemal-specific (confirmatory) assay is nonreactive.
The following non-required screening test for exposure to other viruses listed below may have been performed on the donor. A

negative / nonreactive result is not required for this test; however, all donors are evaluated on a case-by-case basis by the Medical Director.

- Cytomegalovirus – CMV Antibody (Total)

All laboratories performing these tests are registered with FDA and certified to perform testing on human specimens in accordance with the Clinical Laboratory Improvement Amendments of 1988 (CLIA) and 42 CFR part 493, or equivalent requirements. Test kits used are approved and cleared (for screening blood specimens collected from living donors) by the FDA.

A copy of the medical records may be obtained upon request.

PACKAGING & STERILIZATION
Final products are sized and packaged according to approved specifications and procedures, and terminally sterilized by low dose irradiation in accordance with ANSI/AAMI/ISO 11137.

HOW SUPPLIED
This package contains a human tissue allograft [Human Cellular and Tissue Based Product (HCT/P)] for transplantation regulated by US Food and Drug Administration under 21 CFR Part 1271.

In addition to this product insert, the following items should be included in the BioFix Flow package:

One (1) Outer Box
- One (1) Clear Peel-Pouch, containing:
  - One (1) Vial
- One (1) Graft Tracking Record
- One (1) Set of Supplemental Labels

BioFix Flow is supplied in a vial as a flowable in multiple volumes in a single patient use package with a 5 year shelf life.

STORAGE
It is the responsibility of the Tissue Dispensing Service and/or the end user to maintain BioFix Flow in its original packaging and at ambient temperature: +10°C (+50°F) to +30°C (+86°F) until ready for use.

DISPOSAL
Product to be disposed according to institutional procedures.

PRODUCT INFORMATION DISCLOSURE
Human Regenerative Technologies LLC and Integra LifeSciences Corporation have exercised reasonable care in the selection of materials and the manufacture of these products. Integra LifeSciences Corporation warrants that these products shall conform to the product limited warranty as provided in the product labeling or applicable product catalog. This warranty is exclusive and Integra LifeSciences Corporation disclaims all other warranties, whether expressed or implied, including but not limited to, any implied warranties of merchantability or fitness for a particular purpose. Integra LifeSciences Corporation and Human Regenerative Technologies, LLC shall not be liable for any incidental or consequential loss, damage, or expense, directly or indirectly arising from use of these products. Integra LifeSciences Corporation and Human Regenerative Technologies, LLC neither assume nor authorize any person to assume any other or additional liability or responsibility in connection with these products.

SYMBOLS USED ON LABELING

STERILE R	Sterilized using irradiation.		Rx ONLY	Caution: Federal (USA) law restricts this device to sale by or on the order of a physician or practitioner.
Expiration Date	Exp. Date: Use by YYYY/MM/DD		DONATED HUMAN TISSUE	Donated Human Tissue

Please refer to the clinical training materials for complete instructions for use.
For product ordering information, technical questions, or reimbursement issues, please call 877-444-1122 or 609-275-0500.

Distributed by:
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Donor Suitability Determined by:
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Made in U.S.A.