Baxter

Hemopatch

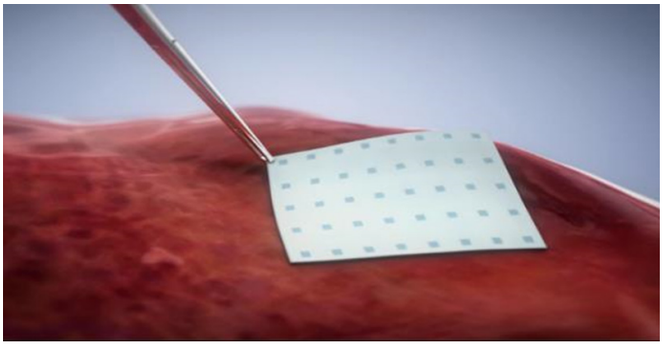
SEALING HAEMOSTAT

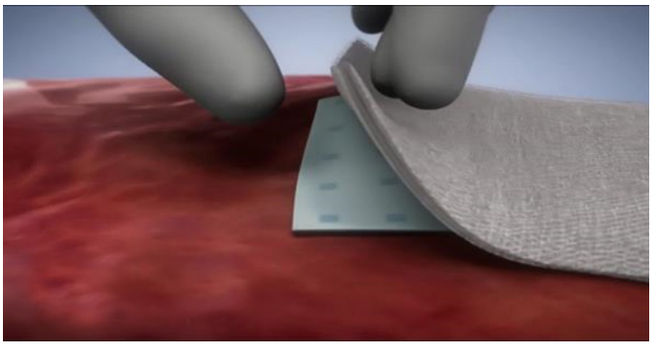
THE SEALING HAEMOSTAT FOR SUSTAINED RESULTS

SECURE, SEAL, SUSTAIN

Please see Indications and Important Risk Information on back

HEMOPATCH *provides secure, sustained sealing with rapid, reliable control of bleeding and fluid leakage.*[1-4*]





SECURE

- **HEMOPATCH** strongly and rapidly adheres to applied tissue due to the electrophilic crosslinked action of NHS-PEG.[1-3*]
- Provides mechanical structure to support friable tissue.[1]
- Flexibility and conformance to a variety of round and uneven surfaces.[1,3]

SEAL

- Once adhered, **HEMOPATCH** sealant action controls fluid leakage for fast, reliable sealing and haemostasis in 2 minutes.[1-3*]
- Crosslinked hydrogel seals the bleeding/leaking tissue surface.[1, 2]

HEMOPATCH PERFORMANCE: EUROPEAN REGISTRY STUDY RESULTS[4]

99.8%

Haemostasis
without rebleeding

1.64

Minutes
mean time to haemostasis

93.6%

Excellent
or good surgeon rating

*Includes evidence from clinical and preclinical models.

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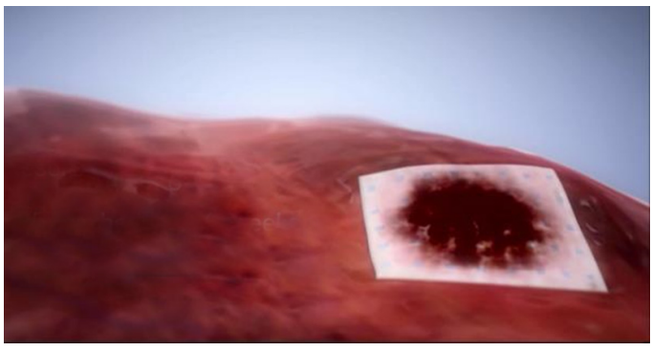
EFFECTIVE SEALING & HAEMOSTASIS



SUSTAIN

- Sustained sealing to reduce complications in the postoperative period with absorption in 6-8 weeks.[1, 4]
- As an active product, sealing and haemostasis are sustained, even in patients on antiplatelet therapy.[1, 4, 5]

CLINICAL EVIDENCE: MULTIPLE SPECIALTIES

HEPATO-PANCREATICO-BILIARY (HPB)[5,6]

NEUROSURGERY[7,8]

CARDIOVASCULAR -THORACIC (CVT)[9]

HEMOPATCH - THE SEALING HAEMOSTAT FOR SUSTAINED RESULTS

HEMOPATCH SECURES, SEALS AND SUSTAINS

Please see Indications and Important Risk Information on back

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Hemopatch

SEALING HAEMOSTAT

Indication for Use

HEMOPATCH is indicated as a hemostatic device and surgical sealant for procedures in which control of bleeding or leakage of other body fluids by conventional surgical techniques is either ineffective or impractical.

Contraindications

Do not compress HEMOPATCH into blood vessels or use intravascularly. The device must not be used in patients with known hypersensitivity to bovine proteins or brilliant blue (FD&C Blue No. 1 [Blue 1]).

Warnings

HEMOPATCH is not intended to be used in pulsatile, severe bleedings. The use of HEMOPATCH is not recommended in the presence of an active infection. When used in, around, or in proximity to foramina in bone, areas of bony confine, the spinal cord, the brain and/or cranial nerves, care should be exercised to avoid overpacking, creating the potential for neural damage. HEMOPATCH is not intended as a substitute for meticulous surgical technique and the proper application of ligatures or other conventional procedures for hemostasis and sealing.

Precautions

Do not apply on a dry tissue surface or lesion. NHS-PEG only forms an adhering hydrogel when in contact with wound fluid such as blood or lymphatic. In the absence of such wound fluids, sodium bicarbonate solution (concentration between 4.2% to 8.4%) can be used to moisten the tissue prior to application of HEMOPATCH.

ORDERING INFORMATION

DESCRIPTION	QUANTITY	ORDER NUMBER
HEMOPATCH Medium 4.5 x 4.5 cm	3 units/box	1506256
HEMOPATCH Large 4.5 x 9.0 cm	3 units/box	1506253

Shelf Life and Storage

After refrigerator removal, HEMOPATCH can be stored at room temperature (maximum 25°C) for up to 6 months within indicated shelf life. Mark the date the product is taken out of the fridge (year/month). Leave pouches in the shelf carton or mark the same date on the pouches.er conventional procedures for hemostasis and sealing.

For questions or ordering information contact your local Baxter representative.

ADVANCING THE ART OF HEALING

1. HEMOPATCH Sealing Hemostat Instructions for Use.
2. Lewis KM, et al. Control of bleeding in surgical procedures: critical appraisal of HEMOPATCH. Med Dev: 2016;9:1-10.
3. Lewis KM, et al. Clinical effectiveness and versatility of a sealing hemostatic patch (HEMOPATCH) in multiple surgical specialties. Exp Rev Med Dev. 2018;15:367-376.
4. Lombardo C, et al. Hemopatch® is effective and safe to use: real-world data from a prospective European registry study. Updates Surg. 2022;74:1521-1531.
5. Fingerhut A, et al. European initial hands-on experience with HEMOPATACH, a novel sealing hemostatic patch: application in general, gastrointestinal, biliopancreatic, cardiac, and urologic surgery. Surg Technol Int. 2014;25:29-35.
6. Serradilla M, et al. Sealing with NHS-PEG patch to prevent postoperative pancreatic fistula pancreatojejunostomy. AHPBA 2017.
7. Nowak S, et al. Hemopatch® as a new dural sealant in posterior fossa neurosurgery: a clinical application observation. Int J Innov Surg. 2021;4(1):1017.
8. Schebesch KM, et al. Real-world data on the usage of Hemopatch® as a hemostat and dural sealant in cranial and spinal neurosurgery. Cureus. 2023;14(1):e34387.
9. Weltert L, et al. Prospective randomized clinical trial of HEMOPATCH topical sealant in cardiac surgery. Surg Tech Intl. 2016;jul 29.

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