

The exofin® Micro Advantage



THE EXOFIN
ADVANTAGE

**JUST WHAT YOU NEED
RIGHT WHERE YOU NEED IT.**

EXOFIN® MICRO ADVANTAGE

- Ideal for **small trauma induced injuries** and **single port incisions**
- **Innovative silicone tip** perfectly suited for precision application
- **Clear applicator** allows user to see the adhesive prior to expression from tip
- **Same high viscosity formulation** as full size exofin® High Viscosity Tissue Adhesive
- **25% more** adhesive than Dermabond® Mini or Skin Affix®

exofin[®]
MICRO

200 Technology Drive, Alpharetta, GA 30005 | 844.633.4583


CHEMENCE
MEDICAL

THE ULTIMATE SOLUTION FOR WOUND CLOSURE



exofin[®]

TOPICAL SKIN ADHESIVE

High Viscosity, 2-Octyl Cyanoacrylate

exofin® High Viscosity Topical Skin Adhesive



[exo·fin] **exo-** “Outer, outside, exterior, exoskeleton”
-fin “Finished, completed, finality”

The results of two years' observation and feedback from healthcare professionals worldwide, clearly showed that no single topical tissue adhesive contained all the attributes that mattered most to them. From this valuable information, the renowned research and development facility at Chemence Medical created a topical skin adhesive that delivers on all the requirements asked for. We are excited to introduce the next generation of medical adhesives: exofin® Topical Skin Adhesive.

JEFF ROBERSON
President, Chemence Medical, Inc.

The exofin® Advantage

PRODUCT FEATURES



FAST

- Fastest polymerising 2-octyl topical adhesive on the market today*
- Average set time is less than 30 seconds, which is 2 x faster than competitive products*



STRONG

- 2-Octyl formulation is proven to be the strongest and most flexible topical skin adhesive available**
- The unique high viscosity formula and proprietary production process gives exofin® a bonding strength between 19% to 25% greater than competitive 2-Octyl adhesives*



FLEXIBLE

- High purity 2-Octyl technology ensures flexibility on skin and prevents cracking
- Added flexibility allows the adhesive to remain intact for up to 5 -10 days



SAFE

- Provides a microbial barrier against clinically relevant pathogens, including MRSA †
- Glass free packaging – NO risk of glass shards mixed with adhesive or puncturing the gloves to jeopardize the safety of healthcare personnel



INNOVATIVE

- Soft and Flexible Applicator glides across uneven surfaces, reaching difficult to access areas and ensuring that the adhesive creates a perfect seal over the wound or incision
- Transparent Tip allows users to see the adhesive prior to expression, therefore eliminating the “surprise” of too much adhesive being dispensed all at once



GLASS-FREE PACKAGING WITH INNOVATIVE APPLICATOR



ANGLED TIP

- Angled tip moves easily along body contours
- Clear applicator allows user to see adhesive before it is dispensed
- Optimal size of the skin contact area ensures precision of the adhesive application



LONG CONNECTOR PIECE

- Raised grooves allow for easy grip with gloved fingers

ALUMINIUM TUBE

- Glass-free packaging for safety and convenience
- Simple and intuitive dispensing
- 1ml is the highest fill in the industry



EASY TO USE

- Application is very simple, intuitive and technique independent. No special training required.
- Just tighten applicator tip and begin to express adhesive
- Controlled application tip ensures the same reliable result each time for both multiple or single coats



VISCOUS

- Proprietary formulation and production process gives an unprecedented high viscosity
- Reduced risk of adhesive migration (flowing) away from the incision site!



PATIENT FRIENDLY

- Waterproof barrier allows patient to take a shower almost immediately after the medical procedure
- Excellent cosmetic outcome - less trauma to the wound site
- No need for hospital revisit for suture removal nor anaesthesia in emergency or outpatient applications



COST EFFECTIVE

- Saves time and reduces costs of wound closure procedures
- 1ml tube – 43% more adhesive than Dermabond® Advanced and 25% more than largest comparable adhesive unit available
- 0.5ml tube – 39% more adhesive than Dermabond® Mini



Applications



- exofin® has a gel-like viscosity. The increased viscosity of exofin® is intended to reduce the risk of unintended placement of the adhesive during application due to migration of the liquid adhesive from the wound site.
- In vitro studies have shown that exofin® acts as a barrier to microbial penetration as long as the adhesive film remains intact.
- exofin® is intended for topical skin applications only - and to hold closed easily approximated skin edges of wounds - from both surgical incisions, including incisions from minimally invasive surgery, and simple, thoroughly cleansed, trauma-induced lacerations.
- exofin® may be used in conjunction with, but not in place of, deep dermal sutures.



**GENERAL
OPERATIONS**



**OBSTETRICS &
GYNAECOLOGY
PROCEDURES**



**ORTHOPAEDIC
SURGERIES**



**CARDIOVASCULAR
SURGERIES**



**C-SECTIONS &
COSMETIC
SURGERY**

exofin® in action, examples:



LAPAROSCOPY



C-SECTION



ABDOMINOPLASTY



**KNEE CAP
REPLACEMENT**



MASTECTOMY



exofin
TOPICAL SKIN ADHESIVE

Comparative Strength Data

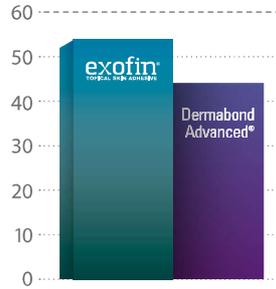
Tensile Strength



ASTM F2258-05*
Measurement = PSI

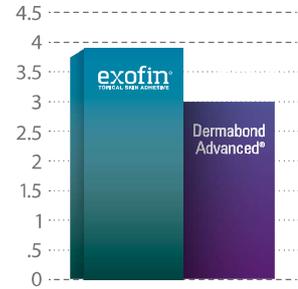
* Data on file

Lap Shear



ASTM F2255-05*
Measurement = PSI

Wound Closure



ASTM F2458-05*
Measurement = Pounds Force

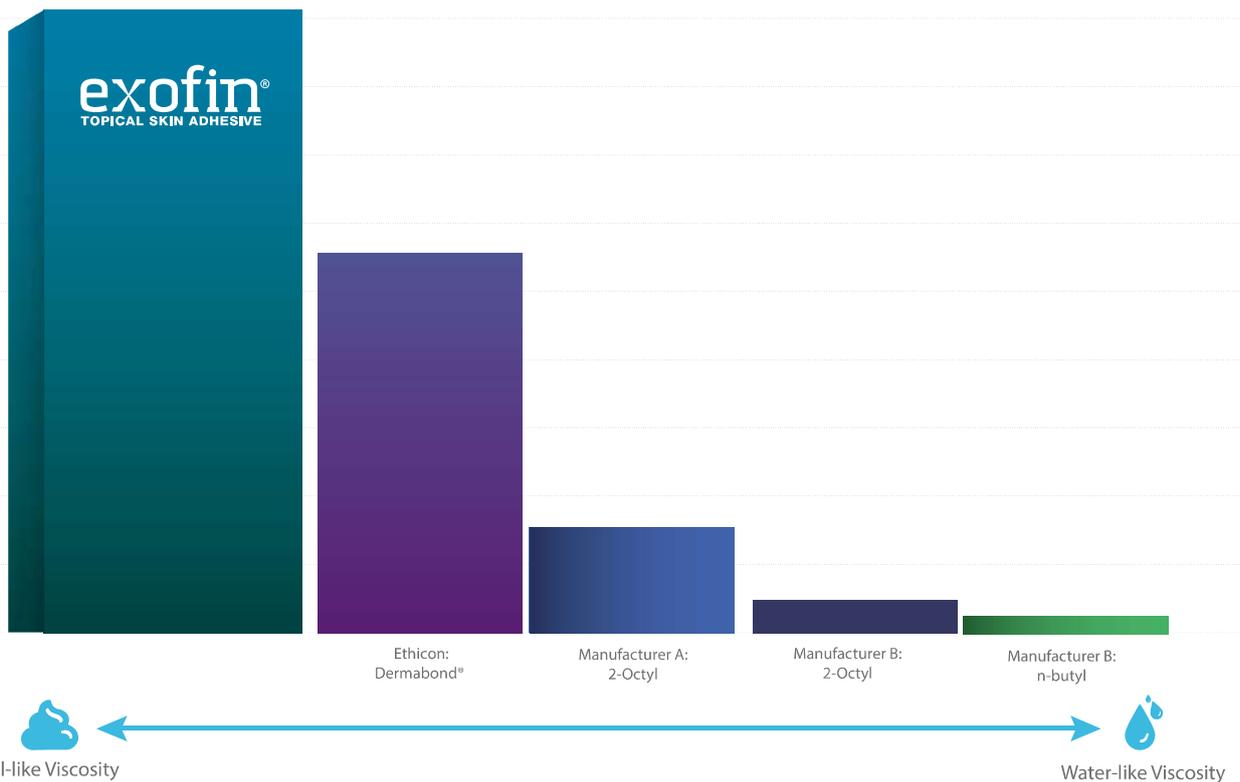
Average Cure Speed¹



¹ Tack Free Time

Comparative Viscosity Data

High Viscosity Formulation Of exofin® Is Intended To Reduce The Risk Of Adhesive Migration Away From The Wound Site.



Directions for Use



- 1 The incision or trauma site must be clean and dry before applying adhesive. Ensure that the wound edges are easily approximated.
- 2 Screw the Applicator Tip onto the threaded tube in a clockwise direction until the applicator is tight and seated on the tube. The applicator will puncture the foil membrane on the tube once seated and adhesive will be allowed to flow.



- 3 Hold the Micro tube tip downwards, and the 1mm version horizontal. Gently squeeze the tube from the bottom until the adhesive becomes visible through the applicator device. Keep the device pointed away from the patient, until ready to apply the adhesive.



- 4 While approximating skin edges, apply by squeezing the tube gently and continuously as you spread the adhesive back and forth over the wound site.

Continue to hold the wound edges in approximation until the adhesive becomes tacky - typically less than 20 seconds. A smooth and even coat of adhesive is desirable.



- 5 Once adhesive has completely polymerised (non-tacky) you may cover the site with a secondary bandage. If a secondary bandage is used, DO NOT apply to the adhesive area until it is completely tack free. Applying whilst tacky may result in adhesive removal when removing the secondary bandage and possibly dehiscence of the wound site.
- 6 Discard adhesive device according to normal protocol after use.



REF EX91510
exofin® Topical Skin Adhesive Micro 0.5 ml
Box of 10 Tubes



REF EX91011
exofin® Topical Skin Adhesive 1.0 ml
Box of 10 Tubes



CHEMENCE®
MEDICAL

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BEFORE USING THIS PRODUCT, READ THE FOLLOWING INFORMATION THOROUGHLY

exofin[®] High Viscosity Topical Skin Adhesive (2-Octyl Cyanoacrylate)

DESCRIPTION

exofin[®] High Viscosity Topical Skin Adhesive (HVTSA) is a sterile, liquid topical skin adhesive containing a monomeric (2-octyl cyanoacrylate) formulation and the colorant D & C Violet #2. It is provided in a single use aluminum collapsible tube and applicator packaged in a rigid PETG blister with uncoated Tyvek lid. The applicator is comprised of a self-puncturing cap and a soft elastomeric brush, which allows the adhesive to spread uniformly. As applied to skin, the liquid is syrup-like in viscosity and polymerizes within minutes.

exofin[®] HVTSA has a syrup-like viscosity. The increased viscosity in exofin[®] HVTSA is intended to reduce the risk of unintended placement of the adhesive during application due to migration of the liquid adhesive from the wound site. In vitro studies have shown that exofin[®] HVTSA acts as a barrier to microbial penetration as long as the adhesive film remains intact. Clinical studies were not conducted to demonstrate microbial barrier properties.

INDICATIONS

exofin[®] HVTSA is intended for topical application only to hold closed easily approximated skin edges of wounds from surgical incisions, including incisions from minimally invasive surgery, and simple, thoroughly cleansed, trauma-induced lacerations. exofin[®] HVTSA may be used in conjunction with, but not in place of, deep dermal sutures.

CONTRAINDICATIONS

- Do not use on any wound with evidence of active infection, gangrene, or wounds of decubitus etiology.
- Do not use on mucosal surfaces or across mucocutaneous junctions (e.g., oral cavity, lips), or on skin which may be regularly exposed to body fluids or with dense natural hair, (e.g., scalp).
- Do not use on patients with a known hypersensitivity to cyanoacrylate or formaldehyde, or benzethonium chloride.

WARNINGS

- exofin[®] HVTSA is a fast setting adhesive capable of adhering to most body tissue and many other materials, such as latex gloves and stainless steel. Inadvertent contact with any body tissue, and any surfaces or equipment that are not disposable or that cannot be readily cleaned with a solvent such as acetone should be avoided.
- Polymerization of exofin[®] HVTSA may be accelerated by water or fluids containing alcohol: exofin[®] HVTSA should not be applied to wet wounds.
- exofin[®] HVTSA should not be applied to the eye. If contact with the eye occurs, flush the eye copiously with saline or water. If residual adhesive remains, apply topical ophthalmic ointment to help loosen the bond and contact an ophthalmologist.
- When closing facial wounds near the eye with exofin[®] HVTSA, position the patient so that any run-off of adhesive is away from the eye. The eye should be closed and protected with gauze. Prophylactic placement of petroleum jelly around the eye, to act as a mechanical barrier or dam, can be effective in preventing inadvertent flow of adhesive into the eye. exofin[®] HVTSA will not adhere to skin pre-coated with petroleum jelly. Therefore, avoid using petroleum jelly on any skin area where exofin[®] HVTSA is intended to adhere.
- exofin[®] HVTSA should not be used below the skin because the polymerized material is not absorbed by tissue and can elicit a foreign body reaction.
- exofin[®] HVTSA should not be used in high skin tension areas or across areas of increased skin tension, such as knuckles, elbows, or knees, unless the joint will be immobilized during the skin healing period or unless skin tension has been removed by application of another wound closure device (e.g., sutures, skin staples, or adhesive wound closure strips) prior to application of exofin[®] HVTSA.
- exofin[®] HVTSA treated wounds should be monitored for signs of infection. Wounds with signs of infection, such as erythema, edema, warmth, pain and pus, should be evaluated and treated according to standard practice for infection.
- exofin[®] HVTSA should not be used on wound sites that will be subjected to repeated or prolonged moisture or friction.
- exofin[®] HVTSA should only be used after wounds have been cleaned, debrided and are otherwise closed in accordance with standard surgical practice. Local anesthetic should be used when necessary to assure adequate cleansing and debridement.
- Excessive pressure of the applicator tip against wound edges or surrounding skin can force the wound edges apart and allow adhesive into the wound. Adhesive within the wound could delay wound healing and/or result in adverse cosmetic outcome. Therefore, exofin[®] HVTSA should be applied with a very light brushing motion of the applicator tip over easily approximated wound edges.
- exofin[®] HVTSA polymerizes through an exothermic reaction in which a small amount of heat is released. With the proper application technique of exofin[®] HVTSA any potential sensation of heat or pain experienced by the patient is minimized.
- exofin[®] HVTSA is packaged for single patient use. Discard remaining opened material after each wound closure procedure.
- Do not resterilize exofin[®] HVTSA.
- Do not place exofin[®] HVTSA in a procedure pack/tray that is to be sterilized prior to use. Exposure of exofin[®] HVTSA, after its final manufacture, to excessive heat (as in autoclaves) or radiation (such as gamma or electron beam), is known to increase its viscosity and may render the product unusable.
- Potential systemic toxicity of this product is unknown.

PRECAUTIONS

- Do not apply liquid or ointment medications or other substances to the wound after closure with **exofin[®]** HVTSA, as these substances can weaken the polymerized film and allow for wound dehiscence. **exofin[®]** HVTSA permeability by topical medications has not been studied.
- **exofin[®]** HVTSA permeability by fluids is not known and has not been studied.
- **exofin[®]** HVTSA, as a liquid, is syrup-like in viscosity. To prevent inadvertent flow of liquid **exofin[®]** HVTSA to unintended areas the patient should be positioned so that inadvertent flow would be away from unwanted areas.
- Hold applicator horizontal and away from yourself and the patient and squeeze the contents of the tube from the bottom of the tube towards the applicator.
- **exofin[®]** HVTSA should be used immediately after applying the applicator and piercing the aluminum tube membrane because the adhesive will polymerize in the applicator, rendering the device unusable.
- If unintended bonding of intact skin occurs, peel, but do not pull the skin apart. Petroleum jelly or acetone may help loosen the bond. Other agents such as water, saline, Betadine[®] Antibiotics, HIBICLENS[†] (chlorhexidine gluconate), or soap, are not expected to immediately loosen the bond.
- Safety and effectiveness of **exofin[®]** HVTSA on wounds of patients with peripheral vascular disease, insulin dependent diabetes mellitus, blood clotting disorders, personal or family history of keloid formation or hypertrophy, or burst stellate lacerations, have not been studied.
- Safety and effectiveness of **exofin[®]** HVTSA on the following wounds has not been studied: animal or human bites; puncture or stab wounds.
- Safety and effectiveness on wounds that have been treated with **exofin[®]** HVTSA and then exposed for prolonged periods to direct sunlight or tanning lamps have not been studied.
- Safety and effectiveness of **exofin[®]** HVTSA on wounds in vermilion surfaces has not been studied.

ADVERSE REACTIONS

- Reactions may occur in patients who are hypersensitive to cyanoacrylate or formaldehyde. See CONTRAINDICATIONS.
- Adverse reactions may be experienced following **exofin[®]** HVTSA contact with the eye.

DIRECTIONS FOR USE

1. The incision or trauma site must be clean and dry before applying adhesive. Ensure that the wound edges are easily approximated.
2. Screw the Applicator Tip onto the threaded tube in a clockwise direction until the applicator is tight and seated on the tube. The applicator will puncture the foil membrane on the tube once seated and adhesive will be allowed to flow.
3. While holding the tube horizontal and away from the patient, gently squeeze the tube from the bottom, moving the adhesive upward until it becomes visible through the applicator device.
4. While approximating skin edges, apply adhesive to the wound site by squeezing the aluminium tube gently and continuously in a back and forth motion while spreading over wound site.
5. Continue to hold the wound edges in approximation until the adhesive becomes tacky, typically less than 30 seconds. A smooth and even coat of adhesive is desirable. Once adhesive has completely polymerized (non-tacky) you may cover the site with a secondary bandage. If a secondary bandage is used, DO NOT apply to the adhesive area until it is completely tack free. Applying while tacky may result in adhesive removal when removing secondary bandage and possibly dehiscence of the wound site.
6. Discard adhesive device according to normal protocol after use.

ADDITIONAL INFORMATION:

NOTE: **exofin[®]** HVTSA polymerizes through an exothermic reaction. If the liquid **exofin[®]** HVTSA is applied so that large droplets are allowed to remain without being evenly spread, the patient may experience a sensation of heat or discomfort. The sensation may be higher on sensitive tissues.

NOTE: Excessive pressure of the applicator tip against the wound edges or surrounding skin can result in forcing the wound edges apart and allowing **exofin[®]** HVTSA into the wound. **exofin[®]** HVTSA within the wound could delay wound healing and/or result in adverse cosmetic outcome.

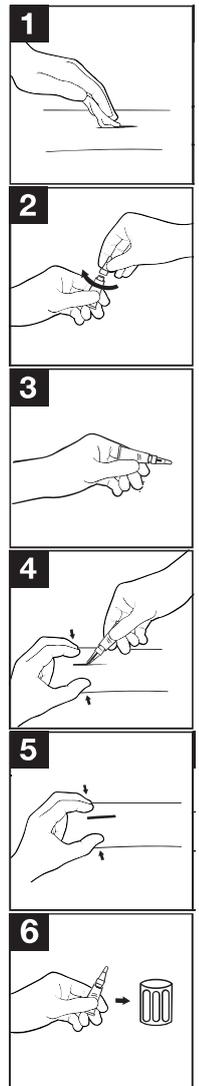
NOTE: Full apposition strength is expected to be achieved within minutes after the adhesive is applied. Full polymerization is expected when the **exofin[®]** HVTSA layer is no longer sticky.

NOTE: Do not apply liquid or ointment medications onto wounds closed with **exofin[®]** HVTSA because these substances can weaken the polymerized film, leading to wound dehiscence.

NOTE: Protective dry dressings such as gauze may be applied only after **exofin[®]** HVTSA film is completely solid/polymerized: not tacky to the touch (approximately five minutes after application). Allow the adhesive to fully polymerize before applying a bandage. If a dressing, bandage, adhesive backing or tape is applied before complete polymerization, the dressing can adhere to the film. The film can be disrupted from the skin when the dressing is removed, and wound dehiscence can occur.

NOTE: Patients should be instructed not to pick at the polymerized film of **exofin[®]** HVTSA. Picking at the film can disrupt its adhesion to the skin and cause dehiscence of the wound. Picking at the film can be discouraged by an overlying dressing.

NOTE: Apply a dry protective dressing for children or other patients who may not be able to follow instructions for proper wound care.



NOTE: Patients should be instructed that until the polymerized film of **exofin[®]** HVTSA has sloughed naturally (usually in 5-10 days), there should be only transient wetting of the treatment site. Patients may shower and bathe the site gently. The site should not be scrubbed, soaked, or exposed to prolonged wetness until after the film has sloughed naturally and the wound has healed closed. Patients should be instructed not to go swimming during this period.

NOTE: If removal of **exofin[®]** HVTSA is necessary for any reason, carefully apply petroleum petroleum jelly or acetone to the **exofin[®]** HVTSA film to help loosen the bond. Peel off the film, do not pull the skin apart.

HOW SUPPLIED

exofin[®] HVTSA is supplied sterile, in a pre-filled, single-use aluminum tube and applicator. The applicator tube contains the liquid adhesive. The applicator tube and tip are packaged in a Rigid PETG blister with uncoated Tyvek lid so the device remains sterile until opened or damaged. **exofin[®]** HVTSA may be available in boxes of 6 or 10 devices.

STORAGE — Recommended storage conditions: below 30°C away from direct heat. Do not use after expiry date.

STERILITY — **exofin[®]** HVTSA is originally sterilized by dry heat and ethylene oxide gas. Do not resterilize. Do not use if package is opened or damaged. Discard any unused material following completion of medical procedure.

STERILE SINGLE USE ONLY

REPORTING — Healthcare Professional should use the following number +1-844-633-4583, when reporting adverse reactions or potentially threatening complications involving **exofin[®]** HVTSA.

CAUTION — This product is meant for external dermal application only and should not contact the eyes. This product should not be ingested, applied internally, or injected intravascularly.

Federal (U.S.A.) Law restricts this device to sale by or on the order of a licensed healthcare practitioner.

Manufactured by CHEMENCE MEDICAL, INC.

Betadine[®] Trademark of Purdue Fredericks †Registered Trademark of Zeneca Pharmaceuticals

Not made with natural rubber latex.

