The exofin® Micro 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

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

FAST + FLEX TECHNOLOGY

Sources: *Data on file ** Singer AJ, et al. Comparison of wound-bursting strengths and surface characteristics of FDA-approved tissue adhesive for skin closure. J Adhes Sci Technol. 2004; 18:10-27 †Data on file: Exofin® was tested in vitro to demonstrate that it acts as a barrier to clinically relevant organisms including Methicillin Resistant S. aureus (MRSA), E. coli, P. aeruginosa, S. epidermidis and Aspergillus brasliensis.

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

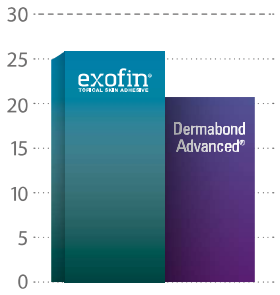
ABDOMINOPLASTY

KNEE CAP REPLACEMENT

MASTECTOMY

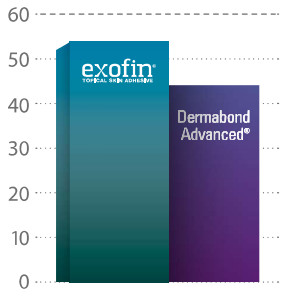
Comparative Strength Data

Tensile Strength



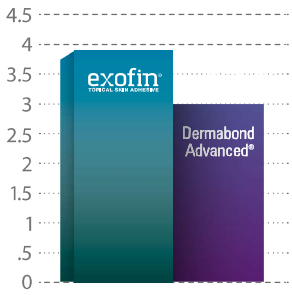
ASTM F2258-05*
Measurement = PSI

Lap Shear



ASTM F2255-05*
Measurement = PSI

Wound Closure



ASTM F2458-05*
Measurement = Pounds Force

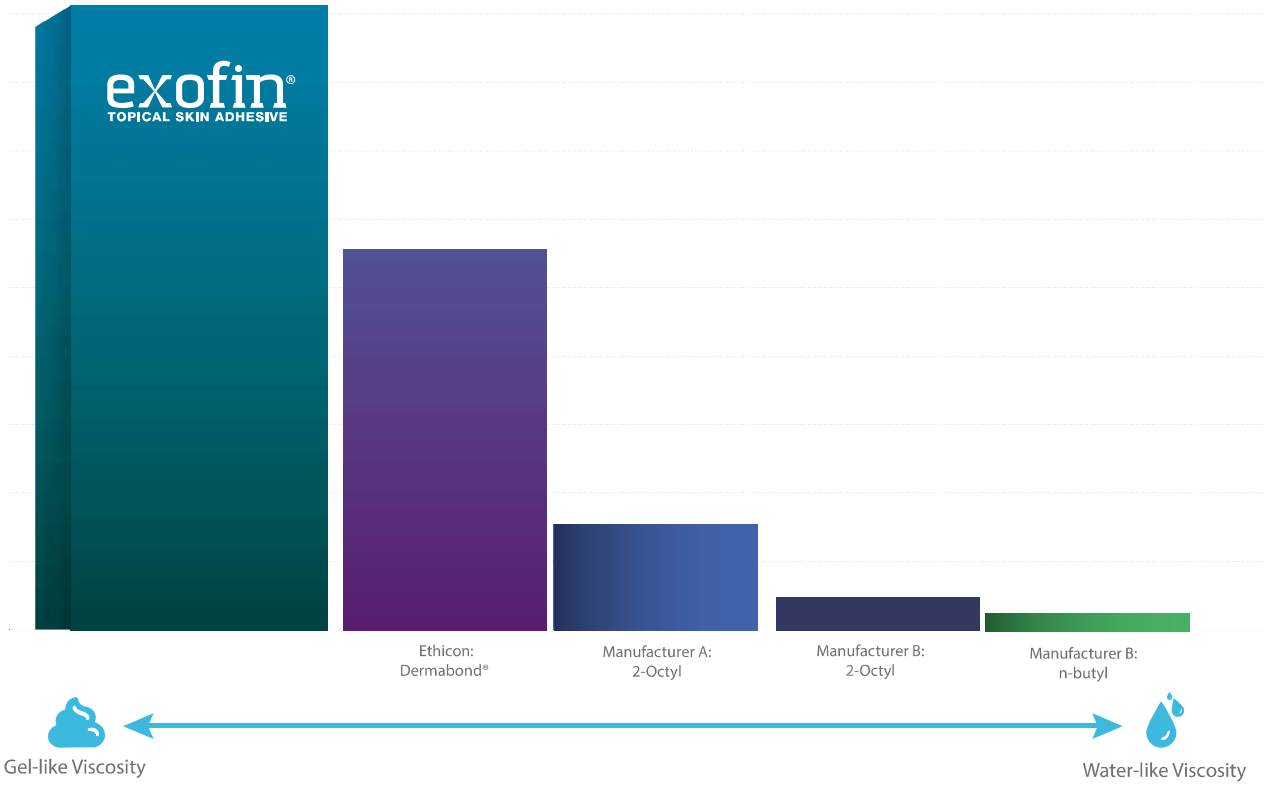
* Data on file

Average Cure Speed[1]

[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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exofin®

HIGH VISCOSITY TOPICAL SKIN ADHESIVE

2-Octyl Cyanoacrylate 1.0 ml (~1.0 g)

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INSTRUCTIONS FOR USE

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.

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PRECAUTIONS

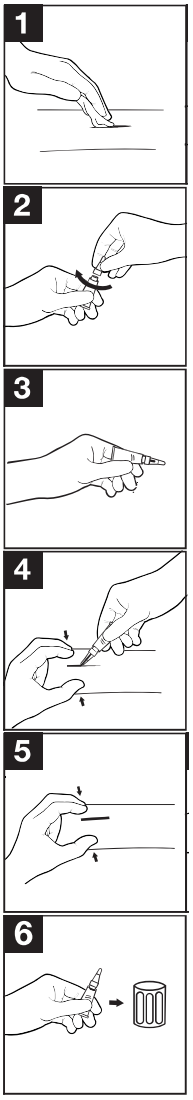
- Do not apply liquid or ointment medications or other substances to the wound after closure with **exofin®** HVTSA, as these substances can weaken the polymerized film and allow for wound dehiscence. **exofin®** HVTSA permeability by topical medications has not been studied.
- **exofin®** HVTSA permeability 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† (chlorhexidene 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.

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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.

Electronic Instructions For Use
www.chemencemedical.com/IFU

Do not re-use

Do not resterilize

Do not use if package is opened or damaged

Keep dry

30°C
Temperature limitations

Keep away from sunlight

STERILE EO
Sterilized using ethylene oxide

STERILE
Sterilized using dry heat

Use by date

Manufacturer

LOT
Batch code

REF
Catalogue number

Rx only
Caution: Federal (U.S.A.) law restricts this device to sale by or on the order of a licensed healthcare practitioner.

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CHEMENCE

Alpharetta, November 15th , 2021

Statement on flexibility of cured eXofin® film compared to flexibility of other commercially available adhesives

We hereby confirm that the eXofin® HVTA product line (eXofin® Micro / eXofin® 1ml) withstands more skin bending and stretching cycles than other popular cyanoacrylates available on the market. Above conclusion is drawn based on the study described below.

In the study, performed on June 28th,2021 by Research and Development Team of Chemence Medical, Inc. the flexibility differences between adhesives was assessed. Several most popular cyanoacrylate tissue adhesives were cured on tattoo practice skin according to each product's directions for use (DFU). Skin bending and stretching were simultaneously replicated on tattoo skin using a fatigue tester, and the cured polymer film was monitored until a break in the adhesive occurred. The results were compared to determine differences between product lines.

1. **Backround .** Flexibility is a key functional characteristic for cured cyanoacrylates. Flexibility influences a cured cyanoacrylate's resistance towards breakage. Occasionally, cyanoacrylates are used to close wounds on areas of the body that are prone to bending and/or stretching. The cured cyanoacrylate must be resilient enough to maintain its integrity under these conditions. Three factors affect the flexibility of a cured cyanoacrylate formulation: the side chain length of the cyanoacrylate used, the additives present in a formulation (*e.g.* plasticizer, viscosity modifier, etc.), and the amount of cyanoacrylate monomer.

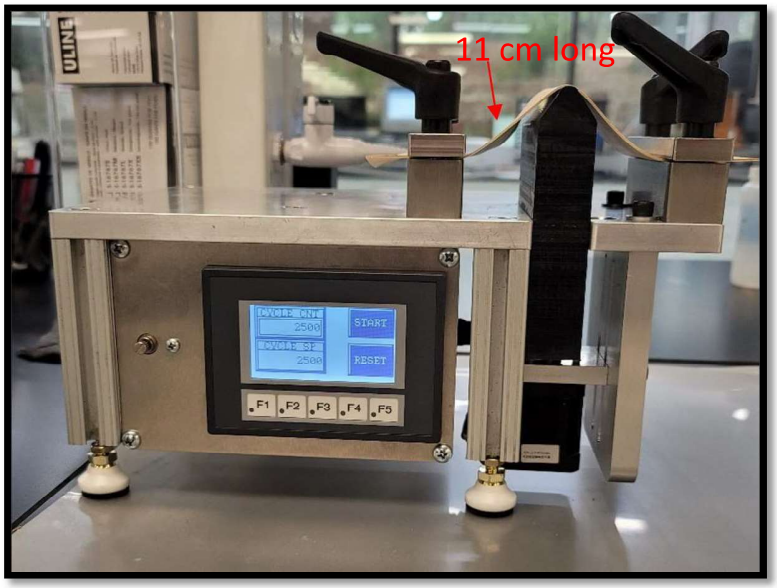
2. **Method**

2.1 Obtain tattoo practice skin (8 by 12 in^2) and cut to a width of 7.5 × 20 cm^2.

2.2 Apply the adhesive to the tattoo practice skin in 1 cm by 5 cm area according to the DFU. Two or three applications can be placed on one strip of tattoo practice skin. Three replicate strips of tattoo practice skin are recommended. Allow the adhesive to fully cure (*i.e.* an adhesive was fully cured if it was cured to the touch).

2.3 Mount the tattoo skin onto the fatigue tester, allowing for sufficient slack. The length of mounted tattoo practice skin is 11 cm, as shown in Figure 1.

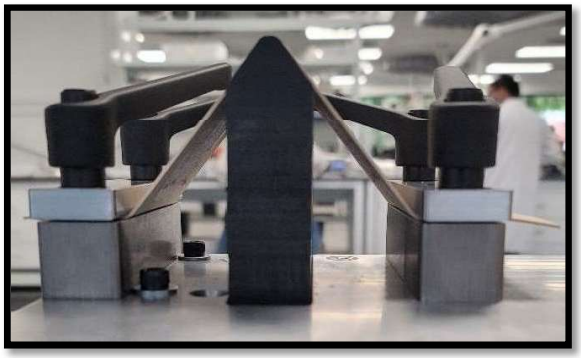
Figure 1. Image of the fatigue tester



2.4 Enter the desired number of cycles for the test and monitor the cured cyanoacrylate until it cracks. Record the number of cycles that the adhesive could withstand prior to failure.

Note: During each cycle, the tattoo practice skin was bent at a 90˚ angle and stretched from 11 cm to 13.5 cm at a speed of 19 mm/sec (Figure 2). The stretching that was simulated in this experiment represents 22.7% stretching on skin. The entire cycle lasts 3.3 seconds, where the bending/stretching residence time is <1 s.

Figure 2. The Stretching and bending of tattoo practice skin on the fatigue tester

Relaxed tattoo practice skin	Stretched tattoo practice skin
	

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3 Results and Discussion

3.1 Flexibility - Summary

Table 1 shows the product lines tested and the average number of cycles to failure. The table shows that n-BCA based formulations and the blend (Liquiband® Optima) required only one cycle to fail. Among the 2-OCA based formulations that were tested, Dermabond® Advanced resisted the least number of cycles until failure, while eXofin® HVTA (eXofin®Micro/eXofin 1ml) withstood the most cycles.

Table 1. The Flexibilities of several product lines

Product line	Average number of cycles tofailure	Relative percentage	
		2-OCA (%)	n-BCA (%)
Liquiband® Standard	1	–	100
GluStitch® Twist	1	–	100
Liquiband® Optima	1	11	89
Histoacryl® Blue	1	–	100
Liquiband® Flow Control	1	–	100
derma+flex® QS™	83	100	–
Indermil® flexifuze™	113	89	11
Dermabond® Advanced	117	100	–
Liquiband® Rapid	145	100	–
Dermabond® Mini	173	100	–
Liquiband® Exceed™	277	100	–
eXofin® HVTA	300	100	–

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4 Materials

4.1 Materials

4.1.1 Tattoo practice skin (8 by 12 in^2), Supplier: Yuelong, Material: synthetic rubber

4.1.2 Cyanoacrylate adhesives

For 2-octylcyanoacrylate (2-OCA) topical skin adhesives:

Manufacturer	Device	Lot Number
Advanced Medical Solutions Ltd.	Liquiband® Exceed™	Lot: P00214477
	Liquiband® Rapid	Lot: P00220763
Ethicon, Inc.	Dermabond® Advanced	Lot: QDBDKP, QEBBEQ
	Dermabond® Mini	Lot: QLBBJS
Chemence Medical, Inc.	*derma+flex® QS™*	Lot: 0099-Q1
	eXofin® HVTA	Lot: 0113-E1

For n-butylcyanoacrylate (n-BCA) topical skin adhesives:

Manufacturer	Device	Lot Number
Advanced Medical Solutions Ltd.	Liquiband® Standard	Lot: Unknown
	Liquiband® Flow Control	Lot: Unknown
TissueSeal, LLC.	Histoacryl® Blue	Lot: 220431N1
GluStitch, Inc.	GluStitch® Twist	Batch: GSTWT060319A-093

For 2-octylcyanoacrylate/n-butylcyanoacrylate topical skin adhesives:

Manufacturer	Device	Lot Number
Vygon, Ltd.	Indermil® flexifuze™	Lot: Unknown
Advanced Medical Solutions Ltd.	Liquiband® Optima	Lot: Unknown

5 Conclusion

A comparison of several tested adhesives shows that that different product lines have different flexibilities when cured. **The eXofin® product line withstood skin bending and stretching better than other tested cyanoacrylates**.

VP Global Business Development

Exofin® High Viscosity Tissue Adhesive

[exo•fin]

exo- "Outer, outside, exterior, exoskeleton"
-fin "Finished, completed, finality"

After spending more than two years observing and talking to healthcare professionals throughout all departments of hospitals across America, it became clear that no single topical adhesive had all of the attributes that mattered most. Chemence Medical has combined your feedback with the very best R&D department in the USA and created a topical skin adhesive that delivers on all of the requirements you asked for. We are excited to introduce the next generation of topical skin adhesive, Exofin® High Viscosity Tissue Adhesive.

JEFF ROBERSON
President, Chemence Medical, Inc.

The Exofin® Advantage

YOU SPOKE, WE LISTENED.

FAST

- Fastest polymerizing 2-octyl topical adhesive on the market today*
- So fast, you can actually see the glue "dry" before your eyes
- Average set times are less than 30 seconds

STRONG

- 2-Octyl formulation is proven to be the strongest and most flexible adhesive available**
- Provides a microbial barrier creating a protective barrier against clinically relevant pathogens, including MRSA[1]
- Added flexibility allows the adhesive to remain intact for 7 - 10 days
- The high viscosity formulation (highest in the industry*) is intended to reduce the risk of adhesive migration away from the wound site

INNOVATIVE

- Soft and Flexible Applicator glides across uneven surfaces while the soft bristles ensure the adhesive creates a solid seal on skin
- Transparent Tip allows user to see the adhesive prior to expression, therefore eliminating the "surprise" of too much glue being dispensed all at once

EASY TO USE

- Simple Concept: Screw on applicator tip and begin to express adhesive
- Apply as much or as little adhesive as needed. Apply a single coat or multiple coats. It's all at the discretion of the Provider. No matter how it is applied, you will get the same great results each and every time!

VALUE

- 1ml tube fill offers users the highest volume per device available on the market today
- 25% more adhesive than the largest tissue adhesive available
- 43% more adhesive than Dermabond Advanced®
- 150% more than Dermabond® Mini or Skin Affix®
- Decreases unit volume, thus adding cost savings per procedure

Sources: *Data on file ** Singer AJ, et al. Comparison of wound-bursting strengths and surface characteristics of FDA-approved tissue adhesives for skin closure. J Adhes Sci Technol. 2014; 18:10-27 †Data on file: Exofin® was tested in vitro to demonstrate that it acts as a barrier to clinically relevant organisms including Methicillin Resistant S. aureus (MRSA), E. coli, P. aeruginosa, S. epidermidis and Aspergillus brasiliensis.

THE ONLY TOPICAL SKIN ADHESIVE THAT CHECKS ALL THE BOXES.

Brand Name	Liquiband®	SwiftSet®	SurgiSeal®	SurgiSeal® Twist	Skin Affix®	Liquiband® Octyl	McKesson Liquiband™ Exceed	Dermabond Advanced®	Dermabond® Mini	Exofin®
FDA 510k Name	Liquiband Flow Control	Liquiband Flow Control	SurgiSeal	SurgiSeal Stylus	Barle Tissue Adhesive 2	Barle Tissue Adhesive 2	Barle Tissue Adhesive 2	Dermabond NX	Dermabond NX	Exofin HV Tissue Adhesive
Premarket Submission #	K122446	K122446	K082993	K130474	K132243	K132243	K132243	K100423	K100423	K152476
Manufacturer	Advanced Medical Solutions	Advanced Medical Solutions	Adherion Biomedical	Adherion Biomedical	Advanced Medical Solutions	Advanced Medical Solutions	Advanced Medical Solutions	Ethicon, Inc.	Ethicon, Inc.	Chemence Medical, Inc.
Distributor	Cardinal Healthcare	Covidien Ltd	Medline Industries	Medline Industries	Medline Industries	Cardinal Healthcare	McKesson	Ethicon, Inc.	Ethicon, Inc.	Chemence Medical, Inc.
Distributed by Manufacturer	—	—	—	—	—	—	—	✓	✓	✓
Composition/Active Monomer	n-butyl	n-butyl	2-Octyl	2-Octyl	2-Octyl	2-Octyl	2-Octyl	2-Octyl	2-Octyl	2-Octyl
Size (Fill)	.7ml	.8ml	.36ml	.5ml	.4ml	.8ml	.8ml	.7ml	.4ml	1.0ml
Viscosity**	~ 5 cPs	~ 5 cPs	~ 13 cPS	~ 13cPs	~ 59 cPs	~ 59 cPs	~ 59 cPs	~ 266 cPs	~ 266 cPs	~ 450 cPs
Polymerization Time < 1 Min**	✓	✓	—	—	—	—	—	—	—	✓
Flexible on Skin	—	—	✓	✓	✓	✓	✓	✓	✓	✓
Waterproof	*	*	✓	✓	✓	✓	✓	✓	✓	✓
Microbial Barrier	*	*	✓	✓	✓	✓	✓	✓	✓	✓
Transparent Applicator	—	—	—	—	—	—	—	✓	✓	✓
Flexible Applicator Tip	—	—	—	—	—	—	—	—	—	✓

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* n-butyl monomer is prone to crack and break on skin thus compromising waterproof and microbial barrier
** Data on file