MESHED ALLOPATCH HD®

ACELLULAR HUMAN DERMIS

Raising the Standard for Wound Care

Wound Covering Surgical Technique

ConMed™ LINVATEC

WOUND COVERING SURGICAL TECHNIQUE

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Figure 1

Figure 2

Figure 3

Figure 4

Prepare the surgical site by debriding devitalized or necrotic tissue using sharp excisional debridement *(Figure 1)*. Measure the prepared site. Select a properly sized graft and trim if necessary such that the graft extends beyond the wound site by no more than 5mm in all directions *(Figure 2)*. Rinse Meshed ALLOPATCH HD® graft in sterile saline *(Figure 3)*. Orient the graft so that the epidermal side is facing up and dermal side down. The epidermal side is dull in appearance. NOTE: For further verification, add the patient's blood on both sides of the graft. The dermal side will appear red in color *(Figure 4)*.
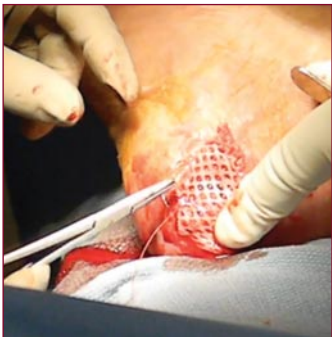

Figure 5

Figure 6

Figure 7

Figure 8

Employing absorbable suture such as 3-0 Vicryl, secure the graft using uninterrupted stitches*(Figure 5)*. Trim excess graft leaving no more than 5mm excess around the entire wound *(Figure 6)*. With the graft placement complete, cover the wound with a moist, non-adherent dressing of choice *(Figure 7)*.

Cover and dress the surgical site with bulky dressing *(Figure 8)*. Post-operatively, change initial dressing in approximately 5 days depending on drainage. If excessive drainage occurs, change outer dressing sooner.