# Seprafilm **ADHESION BARRIER**

# **Preparation and Application Techniques**



The "Taco" Technique

Expose edge of SEPRAFILM (1-2 cm)



with dry lac

**SEPRAFILM Full Sheet Application** 

2

Allow exposed SEPRAFILM to adhere to desired tissue

## The "Quilting" Technique



Cut SEPRAFILM and holder with scissors



and apply



May be curved to facilitate entry

Withdraw holder

3

**Handling Tips** 

## SEPRAFILM can be:



Cut to any shape or size





## **General Considerations & Directions for Use<sup>1</sup>**

- Keep SEPRAFILM, gloves, instruments and site of application dry.
- Keep a dry sponge on the field to dry off wet gloves and instruments before handling SEPRAFILM.
- Use standard irrigation solution if contact occurs with unintended tissue surface.
- You may choose to place SEPRAFILM with dry instruments, the product covering, dry gloved hand, or any combination of the above.





Curved or rolled



## **Description and intended use**

Seprafilm Adhesion Barrier is a sterile, bioresorbable, translucent membrane composed of two chemically modified anionic polysaccharides, sodium hyaluronate and carboxymethylcellulose. Seprafilm Adhesion Barrier is intended as an adjunct in abdominal or pelvic surgery for reducing the incidence, extent and severity of postoperative adhesions at the site to placement and to reduce adhesive small bowel obstruction when placed in the abdomen.

### **Warnings and Precautions**

- Read instruction for use prior to using Seprafilm.
- For single use only. Do not resterilise.
- Seprafilm should not be wrapped directly around a fresh anastomotic suture or staple line of the intestine. Clinical trial data on Seprafilm indicate that such use may result in an increased risk of anastomotic leak-related events (fistula, abscess, leak, sepsis and peritonitis). The incidence of these events was not affected when Seprafilm was placed elsewhere in the abdomen.
- Seprafilm is not recommended for use in women undergoing surgery for ovarian, fallopian tube or peritoneal malignancies. Some clinical literature has associated this use of Seprafilm with an increased incidence of fluid collection and/or abscess requiring intervention.
- No controlled clinical studies have been conducted in patients with active infections or abdominopelvic malignancy.
- Foreign body reaction may occur as with most surgical adjuncts but have been rarely reported during clinical use.
- No pre-clinical reproductive studies have been conducted. No clinical studies have been conducted in women who become pregnant in the first month after application of Seprafilm. Therefore, avoiding pregnancy during the first complete menstrual cycle after the use of Seprafilm should be considered.
- Adverse events relating to Seprafilm can be reported to Baxter on 1800 BAXTER or 0800 BAXTER.

## **Ordering Information**



For questions or ordering information, please contact your Baxter representative.

## Advancing the art of healing

1. Seprafilm Instructions For Use, EU 10/2018

Refer to Full Instructions for Use before prescribing. Full Instructions for Use available from Baxter One Call Information on 1300 302 409 or email: onecall@baxter.com.

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