

Application Guidelines



Checklist of Supplies Needed for Xpansion Procedure

<u></u>	Xpansion® Micro-Autografting Kit
	Sterile gloves
	Wound cleanser
	Razor to shave donor site if needed
	2 Packs - PVP or CHG preps
	Drape, chuck, or sterile towel
	Surgical marker (optional)
	Syringe for lidocaine injection
	Blunt tip needle for withdrawing of lidocaine
	Lidocaine with or without epinephrine
	Small gauge needle for SQ injection of lidocaine
	2 Boxes - 4 x 4's
	1 - 10 ml normal saline (NS) syringes or bottle of NS
	Non-adherent dressing
	Hydrogel
	Occlusive dressing (or other island dressing)
	Pack of Steri-Strips™
	Compression wrap or casting material
	Dressing for donor site

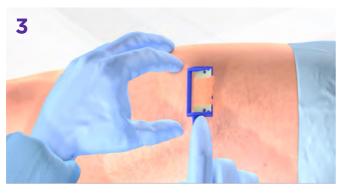
Device Application



1. Prep donor site by shaving, cleaning, and numbing the area.



2. Properly hold the dermatome with the index finger pointing upwards.



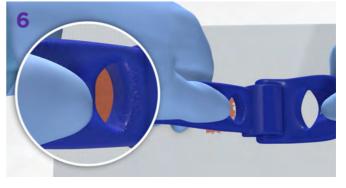
3. Using moderate pressure, harvest the autograft with the dermatome advancing in a sawing motion perpendicular to the direction of the harvest. Do not push the blade forward, let it advance naturally.



4. Using the forceps, transfer the graft to cutting mat. Dermal side down is preferable to maximize friction with cutting surface.



5. Lightly moisten graft with sterile saline using the syringe. Do not flood graft.

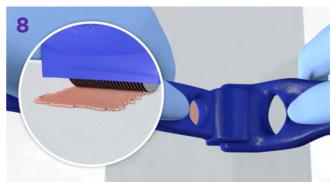


6. Open Xpansion mincer handles. Grasp Xpansion mincer with thumbs in thumb grooves and align graft through viewing window.





7. Applying even thumb pressure on both handles, pass the Xpansion mincer over the graft several times to create a number of thin strips.



8. Turn the cutting mat 90 degrees and repeat passing the mincer until all strips have been cut into small square micrografts.



9. The micrografts can now be transferred from the cutting mat to the wound using the spatula.



10. Using the spatula, spread micrografts evenly throughout the entire well-prepped wound bed, including the wound edges.

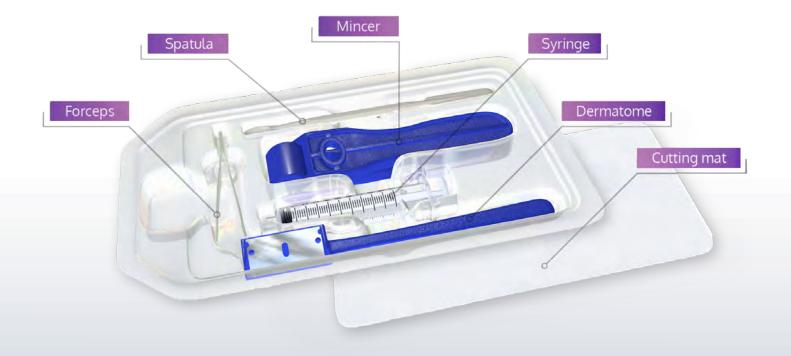
Technique Considerations

The preferred donor site is the lateral side of the thigh. To numb the area, draw two vertical lines one inch apart, then insert the needle connected to a source of numbing agent along each line.

To ease harvesting, use index finger and thumb to stretch skin of prepped donor site area, and then press downwards to raise skin. Then harvest graft.

After the graft has been minced, there will be more residual micrografts on the mincer. Using flat end of the spatula, roll circular blades of the mincer in one direction to collect micrografts left on the blades. Using scoop end of the spatula, transfer these micrografts to the wound.

The Xpansion Micro-Autografting Kit includes the following items (one each)



Wound Bed Preparation

- Necrotic, nonviable tissue, debris, and slough must be removed.
- No active bleeding should be present.
- Tissue bacteria level must be minimized, ideally 10⁵ or fewer bacteria per gram.

Post-Operative Care

- Non-adherent perforated dressing can be used (e.g. bridal veil) as contact layer.
- Secure non-adherent dressing to wound with Steri-Strips.
- Maintain a moist environment (e.g. hydrogel or moisture-holding dressing).
- Splint or immobilize if in mobile area.
- Outer dressing can be changed at 5 7 days leaving contact layer intact.
- Irrigation and/or soak can be used at dressing changes.
- Contact dressing can be gently teased off graft at 10 14 days using saline irrigation to prevent any dressing adherence.



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