

# TIPS & TECHNIQUES

FOR THE IMPLANTATION OF

**VasCure**<sup>®</sup>  
FOR VASCULAR REPAIR

Refer to the Instructions for Use for indications, full implant instructions, warnings and precautions, and contraindications.

## DO:

- HYDRATE PROPERLY:** Hydrate (soak) VasCure in **room-temperature** sterile saline for 1-2 minutes. Excessive hydration may result in delamination.
- SIZE MATERIAL APPROPRIATELY:** To promote effective remodeling, use only what is needed of the material. **Minimize material redundancy and tension.**  
Note: VasCure does not stretch and does not shrink.
- USE NON-ABSORBABLE SUTURES:** A non-absorbable, monofilament polypropylene suture is preferred.
- USE EITHER SIDE:** VasCure is not sided and you may use either side in your procedure.
- IMPLANT PROPERLY:** Suture to healthy, viable tissue – VasCure ECM bioscaffold relies on angiogenesis and cellular infiltration from the sutured edge.
- SUTURE CIRCUMFERENTIALLY:** Make sure all layers of VasCure are penetrated to ensure good tissue approximation and regeneration potential.

## DON'T:

- USE WITHOUT RECOMMENDED HYDRATION:** Without proper hydration, VasCure may tear and not retain sutures.
- USE WITH GLUES, SEALANTS, OR PLATELET GELS:** Avoid using glutaraldehyde-based glue, platelet gels, and hemostatic agents as they may increase crosslinking and negatively impact remodeling.
- SUTURE TO SYNTHETIC OR NON-VIABLE MATERIAL:** Do not sew to synthetic or non-viable material or tissue.
- SAVE OR REUSE:** Discard all open or unused portions of VasCure.

## NOTE:

- A continuous, running suture has been reported to facilitate apposition between VasCure and arterial wall.
- Use in patients with connective tissue disorders (i.e. Marfan Syndrome) has not been evaluated.
- Users have reported outcome issues (such as stenosis) when VasCure (6-ply ECM) has been used for vascular reconstruction in vessels less than 5mm in diameter.

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