Ensuring Superior Surgical Outcomes Through Technological Innovation

As a dedicated physician, providing innovative treatment to your patients with the highest quality outcome is a foremost priority. With this in mind, Bio-Tissue brings you a new generation of ocular surface tissue therapies designed to accelerate the regeneration of damaged tissue, while reducing recipient discomfort associated with ocular surface reconstruction.

Created using our patented cryopreservation method, our products deliver the natural healing properties of amniotic membrane to restore the wound space with minimal scarring and inflammation. Bio-Tissue's amniotic membrane allografts facilitate the short-term success of surgical procedures as well as the long-term stability of the wound space when used as indicated.

Bio-Tissue has contributed over ten years of research and innovation to the ophthalmic community and remains committed to creating ophthalmic products that will advance the treatment of ocular surface diseases.

Tissue Safety and Quality Assurance

Our products are procured and processed according to Good Tissue Practices (GTP) and Good Manufacturing Practices (GMP) regulations established by the United States Food & Drug Administration (FDA). Placental tissues are retrieved by AATB Accredited Recovery Agents from donor mothers after elective cesarean section under full informed consent. The donor mothers are screened at delivery for infectious, malignant, neurological and auto-immune diseases, as well as other exposures or social habits. In addition, they also undergo a physical exam to determine the suitability for human transplantation. Donors are tested by a CLIA certified independent laboratory using FDA licensed test kits around the time of delivery and are found to be serologically negative for, at a minimum, the following tests:

- HIV 1/2 Antibody
- HIV 1 Virus (NAT)
- Hepatitis B Surface Antigen (HBsAg)
- Hepatitis B Core Antibody (HBcAb)
- Hepatitis C Antibody (HCVAb)
- Hepatitis C Virus (NAT)
- HTLV 1/2 Antibody
- Syphilis (RPR)
- West Nile Virus, WNV, (NAT)
- Chagas disease (T. cruzi)

Amniotic membrane is processed using a validated, proprietary method. The final product is released after microbiological testing yields no growth of microorganisms (aerobic, anaerobic, or fungal). It is then preserved in a validated and patented storage medium.



Contact Bio-Tissue today and learn how our ocular surface tissue therapies can optimize your surgical results.

Customer Service

Toll Free: 1-888-296-8858

For Medical Consultation

Scheffer C.G.Tseng, M.D., Ph.D. Phone: 305-274-1299

E-mail: stseng@ocularsurface.com

Website: www.osref.org

Surgical instruction is available through the Ocular Surface Research & Education Foundation. E-mail: osref_info@osref.org
Website: www.osref.org

For More Information



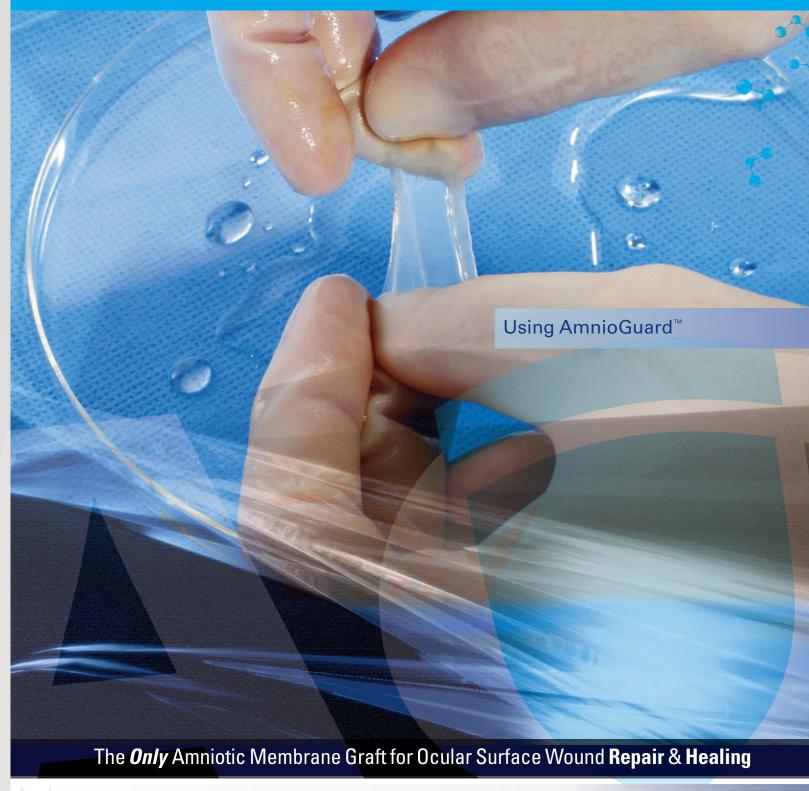
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AmnioGuard™

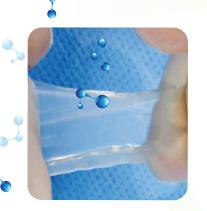
Enhanced Ocular Wound Therapy

Bio-Tissue's AmnioGuard[™] is a cryopreserved amniotic membrane that is specifically prepared for covering a wide variety of glaucoma drainage devices. AmnioGuard™ is minimally manipulated to retain natural cytokines and growth factors in the tissue matrix which suppress inflammation, reduce pain, and promote ocular surface healing.

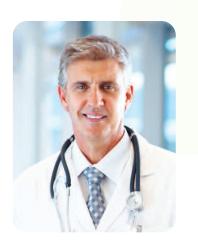
The Benefits of AmnioGuard™

- Provides strong tectonic support while allowing visualization of the glaucoma drainage device
- Exerts anti-inflammatory & anti-scarring actions
- Prevents progressive thinning by encouraging host sub-conjunctival cells to integrate
- Consists of a single layer of tissue

Biologic Actions



- **DURABLE**
- EASY TO HANDLE
- EASY TO SUTURE



Ready to use without any manipulation

New & Improved for Glaucoma:

Based on surgeon feedback from the Glaucoma community, we have designed AmnioGuard™ to feature:

- Stronger & More Resilient Tissue
- Optimal Thickness for Implantation
- Easy Handling and Suturing
- A Cohesive Layer of Tissue

Bio-Tissue's products work synergistically with the patient's own system to enhance and speed tissue repair, resulting in a calm, white eye with minimal discomfort. Since 1997, ophthalmologists worldwide have been using Bio-Tissue's products to treat a wide array of ocular surface diseases, thereby endorsing its capabilities in ocular surface wound healing and repair.



AmnioGuard[®]

Catalog #	Size
AGD-1075	1.0 x .75 cm



Great Cosmetic Outcome for the **Patient**

Storage Time

Covering Glaucoma Drainage Devices with AmnioGuard™

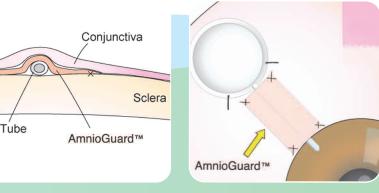


Illustration of AmnioGuard™ placed over the tube

Storage Instructions:

Storage Device Ideal Temperature Range -85°C to -50°C -80°C Freezer Until expiration date on packaging (-121°F to -58°F) Standard home freezer -49°C to 0°C 1 year after receipt or until expiration date on outer product package (whichever comes first) (freezer compartment) (-56°F to 32°F) 3 months after receipt or until expiration date on Standard home refrigerator 1°C to 10°C (33.8°F to 50°F) outer product package (whichever comes first) (refrigerator compartment)

Unopened insulated

container

Ainsworth G, Rotchford A, Dua HS, King AJ. A novel use of amniotic membrane in the Solomon A, Meller D, Prabhasawat P, John T, Espana EM, Steuhl K-P, Tseng SCG. Amniotic management of tube exposure following glaucoma tube shunt surgery. Br J Ophthalmol

Until expiration date written on outer shipping

membrane transplantation for tube exposure after glaucoma drainage device implantation. removal of primary and recurrent pterygia. Ophthalmology. 2001;108:449-460. J Glaucoma 2007;16:171-172.

Sheha H, Liang L, Tseng SCG. Amniotic Membrane Transplantation in Glaucoma filtering surgeries. In The Glaucoma Book, Schacknow PN and Samles JR (eds.), Springer -New York, 2010; 71:861-866. [ISBN: 0387766995]

Rai P, Lauande-Pimentel R, Barton K. Amniotic membrane as an adjunct to donor sclera in Tseng S, Espana E, Kawakita T, Di Pascuale M, Li W, He H, Liu T-S, Cho T-H, Gao Y-Y, Yeh Lthe repair of exposed glaucoma drainage devices. Am J Ophthalmol 2005;140:1148-1152. K, Liu C-Y. How Does Amniotic Membrane Work? The Ocular Surface 2004; 2(3):177-187.

EASY TO STORE!

2°C to 20°C

(35.6°F to 68°F)

membrane grafts for non-traumatic corneal perforations, descemetoceles and deep ulcers.

Papadaki TG, Siganos CS, Zacharopoulos IP, Panteleontidis V, Charissis SK. Human amniotic Solomon A, Pires RTF, Tseng SCG. Amniotic membrane transplantation after extensive

