

Reorder Number	Product Information
934070	COSEAL Surgical Sealant 2mL
934071	COSEAL Surgical Sealant 4 mL
934072	COSEAL Surgical Sealant 8 mL
934033	COSEAL Replacement Applicator (7 cm)
934034	COSEAL Extended Applicator (22 cm for MIS)
0600012	EASYSpray Regulator Unit
0600021	COSEAL SpraySet (for use with EASYSpray Regulator Unit)

COSEAL Surgical Sealant Indication

COSEAL is indicated for use in vascular reconstructions to achieve adjunctive hemostasis by mechanically sealing areas of leakage.

Important Risk Information for COSEAL

COSEAL is not to be used in place of sutures, staples, or mechanical closure.

COSEAL swells up to four times its volume within 24 hours of application and additional swelling occurs as the gel resorbs. Therefore, surgeons should consider the maximum swell volume and its possible effect on surrounding anatomic structures potentially sensitive to compression.

Apply only as a thin layer.

Use caution when applying with pressurized gas.

Do not place devices or other objects on top of tissue where COSEAL has been applied, until the material is fully polymerized (non-tacky).

Do not apply COSEAL over any devices or objects that will need to be removed. COSEAL must not be used as a mechanism of adherence, even temporarily, for any object.

Do not inject COSEAL into vessels.

In vivo testing demonstrated a mild skin sensitization response in an animal model. Similar testing in humans has not been conducted.

RX only: For safe and proper use of this device, please refer to full device Instructions for Use.

To order COSEAL Surgical Sealant call 1-800-423-2090
www.baxterbiosurgery.com

REFERENCES

1 Data on file, Baxter Healthcare. 2 COSEAL Surgical Sealant Instructions for Use, Hayward, CA: Baxter Healthcare Corporation. March 2009. 3 Hill A, Es-tridge TD, Maroney M, et al. Treatment of suture line bleeding with a novel synthetic surgical sealant in a canine iliac PTFE graft model. *J Biomed*. 2001;58: 308-312. 4 Hagberg RC, Safi HJ, Sabik J, et al. Improved intraoperative management of anastomotic bleeding during aortic reconstruction: Results of a randomized controlled trial. *Am Surg*. 2004;70: 307-311. 5 Glickman M, Gheissari A, Money S, et al. A polymeric sealant inhibits anastomotic suture hole bleeding more rapidly than Gel-foam/Thrombin. *Arch Surg*. 2002;137: 326-331. 6 DeAnda A, Jr., Elefteriades JA, Hasaniya NW, et al. Improving outcomes through the use of surgical sealants for anastomotic sealing during cardiovascular surgery. *J Card Surg*. 2009;24:325-333. 7 Wallace DG, Cruise GM, Rhee WM, et al. A tissue sealant based on reactive multifunctional polyethylene glycol. *J Biomed*. 2001;58: 545-555. 8 Azadani AN, Matthews PB, Ge L, et al. Mechanical properties of surgical glues used in aortic root replacement. *Ann Thorac Surg*. 2009;87(4):1154-1160. 9 Haas CE, LeBlanc JM. Acute postoperative hypertension: A review of therapeutic options. *Am J Health-Syst Pharm*; 61:1661-1673. 10 Ferraris VA, Brown JR, Despotis GJ, et al. 2011 Update to The Society of Thoracic Surgeons and the Society of Cardiovascular Anesthesiologists Blood Conservation Clinical Practice Guidelines. *Ann Thorac Surg*. 2011;91:944-982.

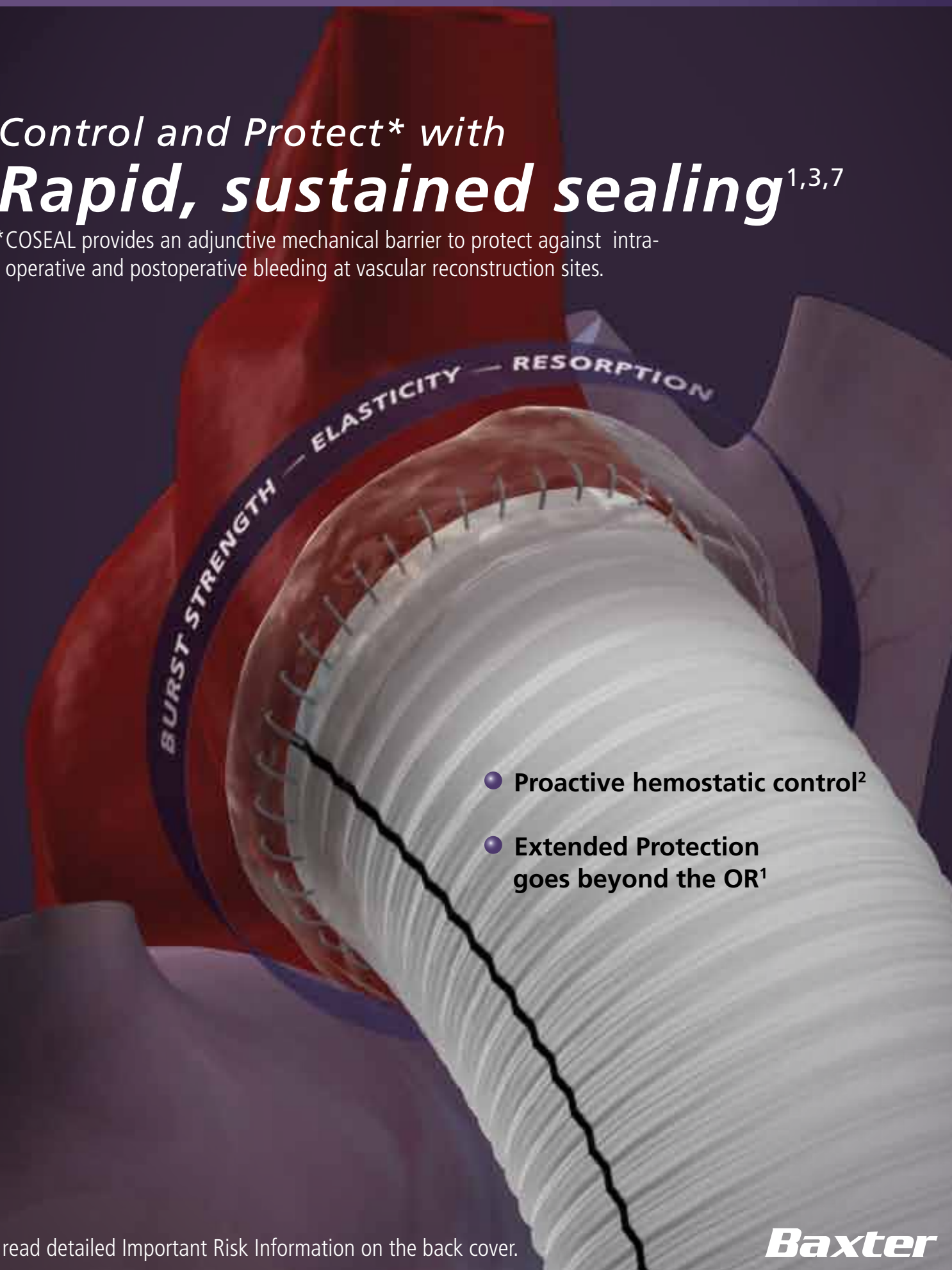
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Control and Protect* with **Rapid, sustained sealing**^{1,3,7}

*COSEAL provides an adjunctive mechanical barrier to protect against intra-operative and postoperative bleeding at vascular reconstruction sites.



- Proactive hemostatic control²
- Extended Protection goes beyond the OR¹

Please read detailed Important Risk Information on the back cover.

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Rapid intraoperative control^{2,3}

for aortic repairs and high pressure suture lines^{4,5}

COSEAL Surgical Sealant is indicated for use in vascular reconstructions to achieve adjunctive hemostasis by mechanically sealing areas of leakage.²

- In the First 5 seconds:**

COSEAL polymerizes to form a hydrogel^{2,3}

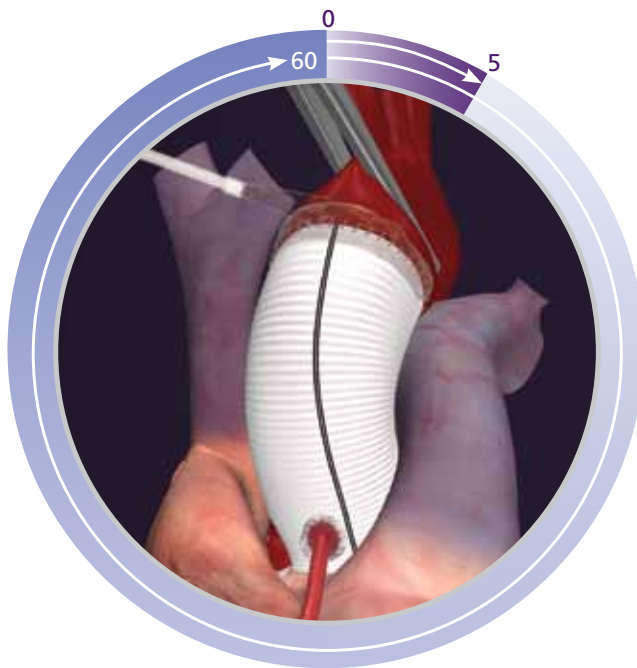
Fast Gel Time

Adheres to tissue and graft material, reducing potential for inadvertent migration²

- At ~60 seconds:**

COSEAL achieves a full mechanical seal to manage suture hole bleeding^{2,3,4,5}

Wait at least 60 seconds post-application before applying irrigation, contacting the sealant, or restoring circulation and resuming procedure. COSEAL swells up to four times its volume within 24 hours of application and additional swelling occurs as the gel resorbs²



Apply only to dry fields in a thin layer²

■ **At 5 seconds— Gels and Adheres^{2,3}**

■ **At ~60 seconds—Full Seal Achieved^{2,3}**

- Works in tandem with your technique**

- Translucent seal helps to keep suture lines visible³
- Can be sutured through⁶
- Works independently of the coagulation cascade^{4,5}
- Multiple application options: Focal, MIS, and Broad²
 - Use caution when applying with pressurized gas²

For focal application



Flex Direct Tips
(7 cm; 22 cm for MIS)

SpraySet with EASYSpray Regulator Unit



For broad application

Elements of postoperative assurance

COSEAL provides a carefully balanced combination of properties to protect against bleeding without hindering the natural healing processes.¹ It is also completely free of glutaraldehyde and bovine components.²

*The mechanical seal provided by COSEAL remains beyond the intraoperative period for as long as 7 days³

ELASTICITY

Thin, motion-responsive seal provides biomechanical compatibility⁸

Supports natural vascular dilation

BURST STRENGTH

Can withstand postoperative spikes over 5x normal systolic pressure⁷

660 [+/- 150] mmHg (in vitro burst test for closure of puncture defects 0.6-0.9 mm diameter, n=4) in porcine carotid artery

RESORPTION

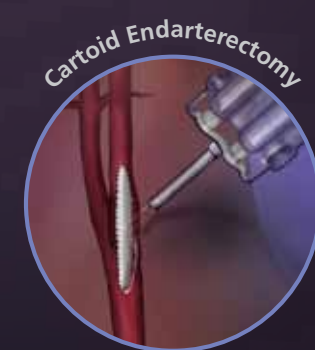
Resorbed within 30 days of application³

Remains at application site for up to 7 days

COSEAL supports the integrity of your work, providing postoperative protection at sites that may be at risk for increased bleeding due to:

- Coagulopathies^{3,5}
- Acute postoperative hypertension⁹
 - Proven sealing of high-pressure sites
- Friable vascular tissue^{4,5}

COSEAL is not to be used in place of sutures, staples, or mechanical closure. Do not inject COSEAL into vessels.



COSEAL is included in the Blood Conservation Clinical Guidelines of the Society of Thoracic Surgeons¹⁰