Human Immunodeficiency Virus (HIV)
- HIV-1/2 Antibodies (HIV-1/2-Ab)
- Nucleic Acid Test for HIV-1 RNA (HIV-1 NAT)

Hepatitis B Virus (HBV)
- HBV Surface Antigen (HBsAg)
- HBV Core Antibody (IgG & IgM) (HBcAb)
- Nucleic Acid Test for HBV DNA (if performed) (HBV NAT)

Hepatitis C Virus (HCV)
- HCV Antibody (HCVAb)
- Nucleic Acid Test for HCV RNA (HCV NAT)

Human T Cell Lymphotrophic Virus I/II*
- HTLV-I/II (Antibody HTLV-I/II-Ab)

Syphilis**
- Rapid Plasma Reagin (RPR) Screen
- T. Pallidum IgG T. pallidum IgG

West Nile Virus (WNV)
- Nucleic Acid Test for WNV RNA (WNV NAT)

* A donor with a reactive result for the HTLV-I/II Antibody test is cleared for transplantation use only when the result from a confirmatory assay is nonreactive.

** A donor whose blood specimen is unsuitable for the non-treponemal screening assay, such as the RPR test, or with a reactive result from the non-treponemal screening assay, is cleared for transplantation use only when the result from the treponemal-specific (confirmatory) assay is nonreactive.

Screening tests for exposure to other viruses or parasites such as those listed below may have been completed. A negative/nonreactive result is not required for these tests, however, all results are evaluated on a case-by-case basis by the Medical Director (or licensed physician designee).

- Cytomegalovirus CMV Ab (IgG & IgM)
- Epstein Barr Virus EBV Ab (IgG & IgM)
- Toxoplasma gondii Toxoplasma Ab (IgG & IgM)
- Trypanosoma cruzi T. cruzi Ab (IgG & IgM)

WARNINGS
The donors of Provena are screened and tested for relevant communicable diseases and disease agents in compliance with the FDA regulations, relating to human cells, tissues, and cellular and tissue-based products (21 CFR part 1271). Provena is processed using aseptic techniques and microbiologically tested. The allograft has been terminally sterilized by electron beam radiation technology in accordance with ANSI/AAMI/ISO 11137. Although all efforts have been made to ensure the safety of the allograft, there is no assurance that this allograft is free from all infectious diseases or microbial contamination.

DO NOT FREEZE the allograft by any method.

FOR USE IN ONE PATIENT, ON A SINGLE OCCASION ONLY

DO NOT RE-STERILIZE the allograft by any method. Exposure of the allograft and packaging to irradiation, steam, ethylene oxide, or other chemical sterilant may render the allograft unfit for use.
PRECAUTIONS
Provenda is processed and packaged using aseptic techniques and sterilized. The allograft must be handled in an aseptic manner to prevent contamination.

ADVERSE EVENTS
Allogeneic cells or tissues can induce an immunologic response in the recipient. The possibility that a patient may develop alloantibodies should be considered for any patient who might be a future recipient of allograft tissue or cells.

Possible adverse events may include: immunologic response, transmission of disease of unknown etiology and transmission of infectious agents including but not limited to: HIV, hepatitis, syphilis, or microbial contaminants.

STORAGE
Provenda must be stored at ambient temperature (2°C to 30°C). It is the responsibility of the Tissue Dispensing Service, Tissue distribution Intermediary, and/or End-User clinician to maintain the allograft in appropriate storage conditions prior to further distribution or use and to track expiration dates accordingly. Appropriate inventory control should be maintained so that the allograft with the earlier expiration date is preferentially used and expiration is avoided.

ALLOGRAFT PREPARATION
USE CAUTION WHEN OPENING. PROVENDA IS A SEMI-TRANSPARENT MEMBRANE.

ONCE THE ALLOGRAFT CONTAINER SEAL HAS BEEN COMPROMISED, the allograft shall be transplanted within 24 hours, if appropriate, or otherwise discarded.

DO NOT USE THE ALLOGRAFT if the pouch integrity has been compromised.

THE OUTERMOST POUCH IS NOT STERILE AND SHOULD NOT BE PLACED ON AN OPERATIVE FIELD.

It is not necessary to rehydrate Provenda prior to use.

Step 1: Remove the pouch containing the allograft from the box packaging.

Step 2: Inspect the pouch packaging.

Step 3: Utilizing aseptic technique, peel open the outer peel pouch from the chevron end and present the inner pouch to the operative field, when required.

Step 4: Wait to open the inner pouch until ready to place the allograft. Locate the tear notch on the pouch and tear open.

Step 5: Grasp the allograft and place it directly on the surgical or wound site.

PROVENDA ORIENTATION
The epithelial layer of the Provenda Amniotic Membrane is facing upwards when one of the following two (2) scenarios are true:

- A triangle notch is located on the upper left-hand corner of the graft as shown in Figure 1.

Figure 1.

2. The orientation indicator sticker located on the tissue pouch is facing upwards.

RECIPIENT INFORMATION
Patient records must be maintained for the purpose of traceability. It is the responsibility of the End-user or the Clinician to provide Vivex Biologics, Inc. with information pertaining to the traceability of the allograft used. For this purpose, the postage paid Tissue Utilization Report (TUR) card is provided with the allograft. Once the allograft is used, peel off the small product labels provided on the product packaging and affix on the TUR card and applicable patient records. Complete the TUR card and mail to Vivex Biologics, Inc., scan and e-mail to turs@vivex.com, or fax to (888) 630-4321.

ADVERSE OUTCOME AND COMPLAINT REPORTING
Adverse outcomes potentially attributable to Provenda must be promptly reported to Vivex Biologics, Inc. at (888) 684-7783. Any other complaints must be promptly reported to Spinal Elements at (760) 607-0121.

RETURNED GOODS POLICY
Due to the delicate biological nature of a processed allograft, it cannot be returned for credit. If for any reason the allograft must be returned, a return authorization is required from Spinal Elements prior to shipping. It is the responsibility of the healthcare institution returning the allograft to adequately package and label it for return shipment.

80-387 Rev. 01