

WOUNDCLOT SURGICAL CASE REPORT LUMBAR DECOMPRESSION & FUSION T10-S1

Surgeon: Paul M. Keller MD

Medical School: University of Chicago, Pritzker School of Medicine.

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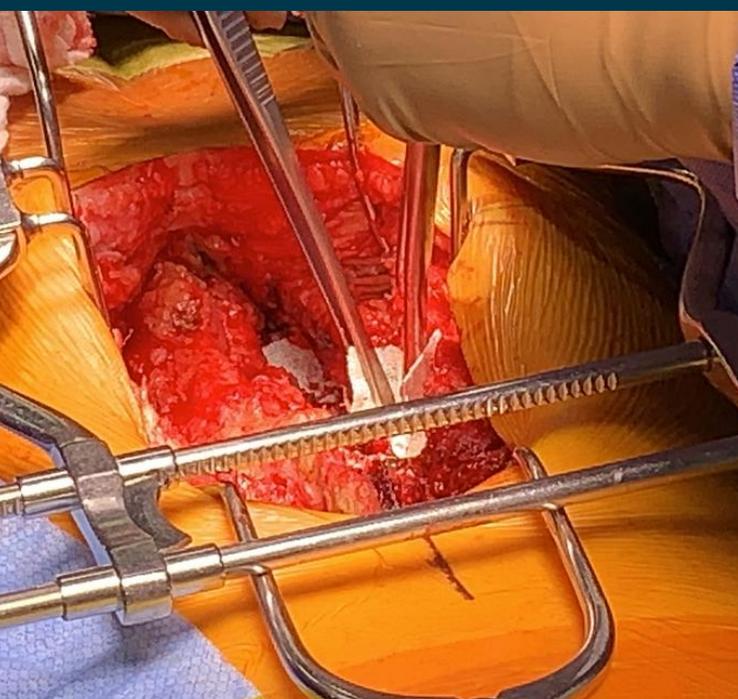
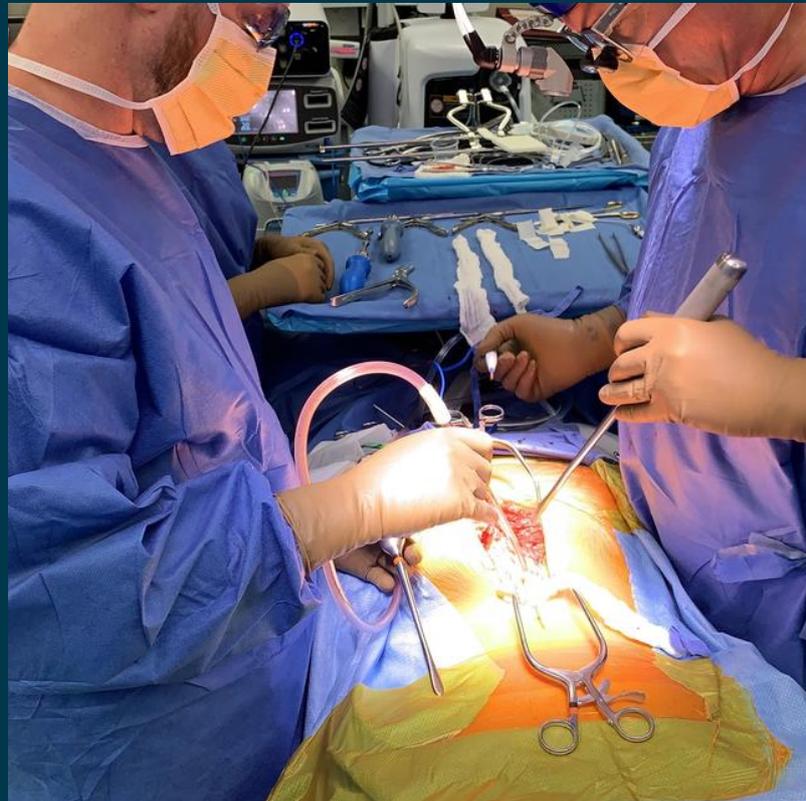
Location: Surgery performed at Holmes Regional Medical Center, Melbourne FL, USA

Patient Details

- 73 year old male.
- Medical History: Kyphosis, Lumbar Stenosis with previous lumbar fusion. Fracture at L1.
- Reasons for Surgery: Patient complained of persistent pain in the Thoracolumbar area, thoracolumbar kyphosis and lower extremity complaints consistent with his spinal stenosis.

Surgery Details

- Location of the surgery presented various bleeding risks as this was a revision surgery including spinal instrumentation removal. These types of operations are often associated with increased blood loss and hemostasis control is imperative.



Product Preparation

Surgical technician prepared WoundClot for this specific procedure by pre-cutting the product into various sizes. These could then be placed at specific points (including the lateral gutters) within the surgical field to control bleeding.

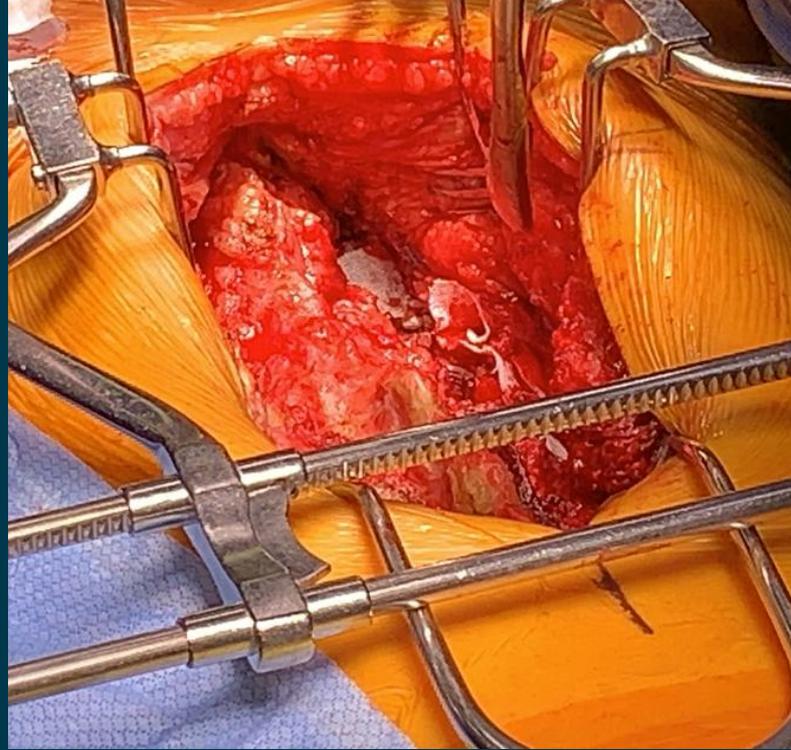
Product Placement

“I use the WoundClot routinely in cases like this in the lateral gutter area to control bleeding during and after exposure. WoundClot is also very effective for control of epidural bleeding if needed.”

Why WoundClot?

“I use WoundClot for these types of procedures because it does not require prolonged pressure to be effective. WoundClot achieves stable hemostasis rapidly and it is easily removed without causing rebleeding.”

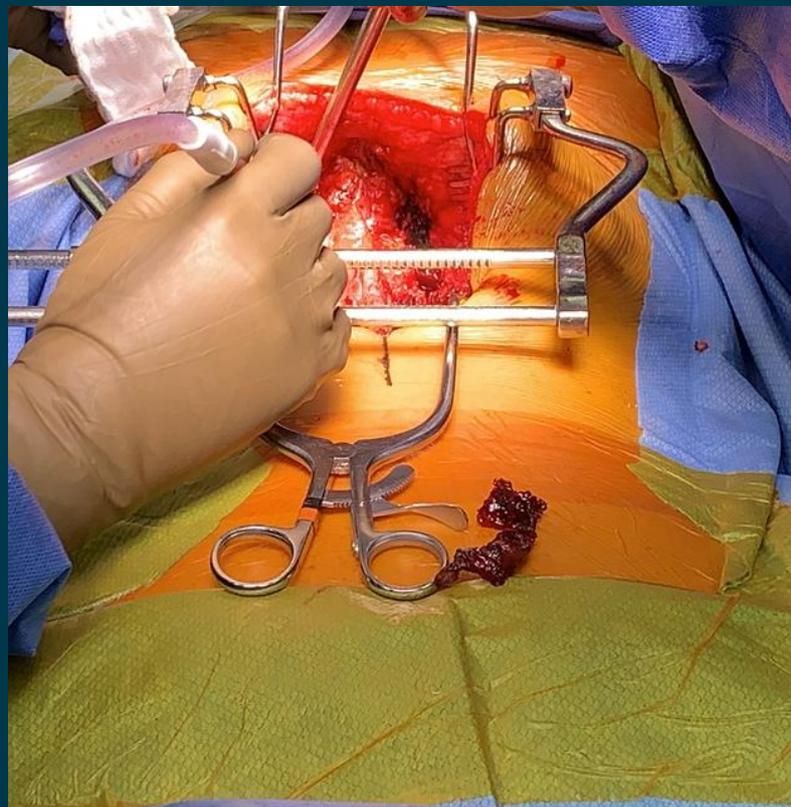
“Previously I have used Floseal and Gelfoam. While relatively effective, both of these products had issues with achieving rapid hemostasis consistently. Also, removal of these products can be problematic and can cause rebleeding. WoundClot is now my preferred hemostatic due to its capacity to achieve rapid stable hemostasis.”



Perspective

The risk of bleeding in any spinal surgery procedure can involve the possibility of epidural hematoma and spinal cord compression which could result in neurological deficit. Rapid control of bleeding in any surgery is critical and decreases the need for introducing blood and/or blood products, which have been proven to increase hospital length of stay and surgical infection rates.

Other products used for this type of procedure tend to rely on adjunctive pressure to be effective, have inconsistent results and can require special storage considerations / preparation time in order to be utilized. Further, usually treatment modalities can be difficult to manipulate or remove without causing rebleeding.



Conclusion

WoundClot is great option for surgeons based on the following reasons:

- Achieves rapid and stable hemostasis without the need for prolonged adjunctive pressure to be effective.
- WoundClot can be removed without causing rebleeding.
- WoundClot utilizes multiple mechanisms of action to achieve rapid stable hemostasis.
- Maintains one of the highest safety profiles.