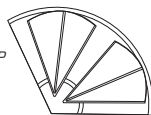


XSTAT[®]

ATTN TREATMENT FACILITY:
A hemostatic dressing for non-compressible hemorrhage was used in the treatment of this casualty. Each device comprises approximately 92 small hemostatic sponges individually marked with an X-shaped radiopaque marker.

WARNING: Triangular segments of the applicator tip (FIG. 1) may break away during treatment and remain in the wound. These segments are visible under X-ray. If any separations occurred, the number of retained applicator tips may be noted on this casualty card.

FIG. 1: TRIANGULAR SEGMENT OF APPLICATOR TIP



PRODUCT REMOVAL INSTRUCTIONS:

WARNING: Sponges must be removed intraoperatively by surgeon with the capability and equipment for achieving proximal and distal vascular control.

- 1) Survey the wound site and assess potential vascular bleeding sites and develop plan to achieve surgical control of injured vessel(s).
- 2) Remove sponges from the wound site manually and/or with surgical forceps to the site(s) of bleeding.
- 3) Thoroughly explore wound and remove all sponges and any triangular segments of the applicator tip.
- 4) Prior to wound closure, obtain plane x-ray, optimally in more than one projection. The presence of retained sponges may be easily missed on radiographic images. Thoroughly examine x-ray for radiopaque x-pattern of sponges and any triangular segments of the applicator tip that may be inadvertently retained in the wound cavity.
- 5) If sponges or applicator tip segments are identified via x-ray, carefully re-examine wound cavity and remove them. Perform and review second x-ray to confirm complete sponge and applicator tip segment removal.
- 6) The XSTAT elicited a mild pyrogenic response in biocompatibility tests. Monitor patient for rise in temperature, chills, hypotension, and septic shock.

! Contains material derived from shellfish.

3-Pack
Part Number: FIN-0001-01
NSN 6510-01-632-9440
1-Pack
Part Number: FIN-0001-03

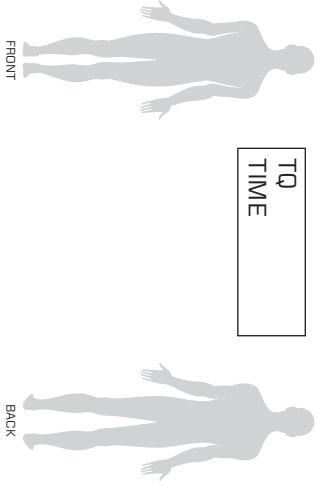
REVMED X[™]

RevMedx, Inc.
25999 SW Canyon Creek Road Suite C
Wilsonville, OR 97070
PH: 503.218.2172 www.RevMedx.com
Label ID: RAW-0019-01
Label Issuance Date: 2015-05-22

Name/ID: _____

DTG: _____ Allergies: _____

Friendly Unknown NBC



GSW BLAST MVA Other: _____

TIME				
AVPU				
PULSE				
RESP				
BP				

A: Intact Adjunct Cric Intubated
 B: ChestSeal Needled ChestTube
 C: TQ Hemostatic Packed
 PressuredX IV IO XSTAT

FLUIDS:	NS / LR	500	1000	1500
	Hexend	500	1000	

Others: _____

DRUGS: (Type / Dose / Route):
 Pain
 Abx

No. of XSTAT applied: 1 2 3

Notes: _____

 Medic's Name: _____