Amniotic membrane tissue grafts
A multilayer graft composed of amniotic membrane and chorion

Ambio5 was developed to yield a substantially thicker, more intact native amniotic membrane allograft. While the proprietary tissue process destroys potential bioburden and virulence, the membrane’s devitalized cellular components—along with its dense adjacent and connective matrices—are present.

**Conventional Uses**
- Fornix reconstruction
- Symblepharon
- Vast pterygium excision

**Pterygium Excision with Ambio5**

**Excision of a vast pterygium including sutureless fixation of Ambio5.**

1. The pterygium is excised with a 2-3mm margin of surrounding normal conjunctiva. Wescot Scissors are used to undermine the surrounding conjunctiva to create a pocket for the amniotic membrane graft.

2. Ambio 5 is trimmed within its silver packaging to a size that will cover the defect and an additional 3–4mm to be buried under the surrounding conjunctiva.

3. The graft is hydrated on the cornea for 30 seconds with BSS.

4. The fashioned Ambio5 is introduced into the conjunctival space by tenting the conjunctiva and sliding the Ambio5 into place.

5. To see the final steps including the sutureless fixation technique, please visit:

   www.iopinc.com/train

**More Biostructurally Intact**
- Contains an intact epithelial, columnar cell matrix on the surface of the basement membrane
- Maintains an intact dense basement membrane
- Provides a loose collagen layer bordered by retained fibroblasts

**Optimized Storage and Surgical Utility**
- Dehydrated, sterilized and sealed for room temp storage
- 5-year shelf life
- Features a unique, proprietary “watermark” impression on the graft surface – for simple visual identification of orientation volutpat
**Conjunctival Chalasis with AmbioDry2**

Excision of loose, redundant conjunctiva with sutureless fixation of amniotic membrane graft (AmbioDry2™)

1. Mark the loose redundant area of conjunctiva and excise, leaving approximately 1mm of limbal conjunctiva intact.

2. Cautery is applied sparingly to bleeding vessels.

3. To facilitate ease of handling, the tissue should remain in the metalized pouch while trimming. The dehydrated membrane is cut to the shape of the conjunctival defect, over-sizing the graft by 1-2mm on each side.

4. The AmbioDry2 is laid on top of the dry, excised area. Edges of the amnion are tucked under the surrounding conjunctiva by lifting the edge and allowing the AmbioDry2 to fall into subconjunctival space.

5. To see the final steps including the sutureless fixation of the graft please visit: www.iopinc.com/train

**35 microns (nominal thickness)**

A single layer of native amniotic membrane

AmbioDry2 is a processed, dehydrated, substrate-free amniotic membrane tissue graft. Each unit is sterilized and packaged with proprietary, device-like methods, designed to optimize storage and utility. AmbioDry2 can be stored on the shelf for 5 years. This unique membrane can be trimmed in its dry state, applied to the surgical site, activated within minutes and then fixated into place.

**Conventional Uses**

- Pterygium excision
- Conjunctival chalasis
- Chemical & thermal burns
- Corneal ulcers
- Bullous keratopathy

**MEET OUR CONSULTANTS**

Our surgical consultants are experts on the latest ophthalmic techniques and related technologies. They can guide you through a series of educational resources and O.R. support. Our consultants are certified and trained to support you on every level.

Contact your local surgical consultant. www.iopinc.com/consult

Our tools. Your skills.
AmbioDry²

<table>
<thead>
<tr>
<th>CODE</th>
<th>DIMENSIONS</th>
<th>THICKNESS</th>
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</thead>
<tbody>
<tr>
<td>AD-5120</td>
<td>AmbioDry² (1.5 x 2 cm)</td>
<td>35 microns</td>
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<tr>
<td>AD-5230</td>
<td>AmbioDry² (2 x 3 cm)</td>
<td>35 microns</td>
</tr>
<tr>
<td>AD-5440</td>
<td>AmbioDry² (4 x 4 cm)</td>
<td>35 microns</td>
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<tr>
<td>AD-5150</td>
<td>AmbioDry² (15 mm disk)</td>
<td>35 microns</td>
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Ambio5

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<tr>
<th>CODE</th>
<th>DIMENSIONS</th>
<th>THICKNESS</th>
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<tbody>
<tr>
<td>AF-1120</td>
<td>Ambio5 (1.5 x 2 cm)</td>
<td>100+ microns</td>
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<tr>
<td>AF-1230</td>
<td>Ambio5 (2 x 3 cm)</td>
<td>100+ microns</td>
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<tr>
<td>AF-1440</td>
<td>Ambio5 (4 x 4 cm)</td>
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</tr>
<tr>
<td>AF-1150</td>
<td>Ambio5 (15 mm disk)</td>
<td>100+ microns</td>
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Amniotic Membrane Reimbursement CPT Codes

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<tr>
<th>CPT</th>
<th>Description</th>
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<tbody>
<tr>
<td>65780</td>
<td>Ocular surface reconstruction; amniotic membrane transplantation, multiple layers</td>
</tr>
<tr>
<td>65778</td>
<td>Placement of amniotic membrane on the ocular surface for wound healing; self retaining</td>
</tr>
<tr>
<td>65779</td>
<td>Placement of amniotic membrane on the ocular surface for wound healing; single layer, sutured</td>
</tr>
</tbody>
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The relevance of the reimbursement codes depends on indications of use and geographic region. Please use this hotline to determine what the guidelines are for your area. IOP Reimbursement Hotline 888.700.9005

Tissue Safety

All tissues recovered meet stringent specifications related to donor screening and testing. Ambio5 and AmbioDry² allografts are procured and processed according to standards established by the American Association of Tissue Banks (AATB) and the United States FDA and are subject to unyielding high standards to ensure tissue safety.