AVAILABLE SIZES

Foundation DRS is offered in multiple sizes to accomodate most woulds.

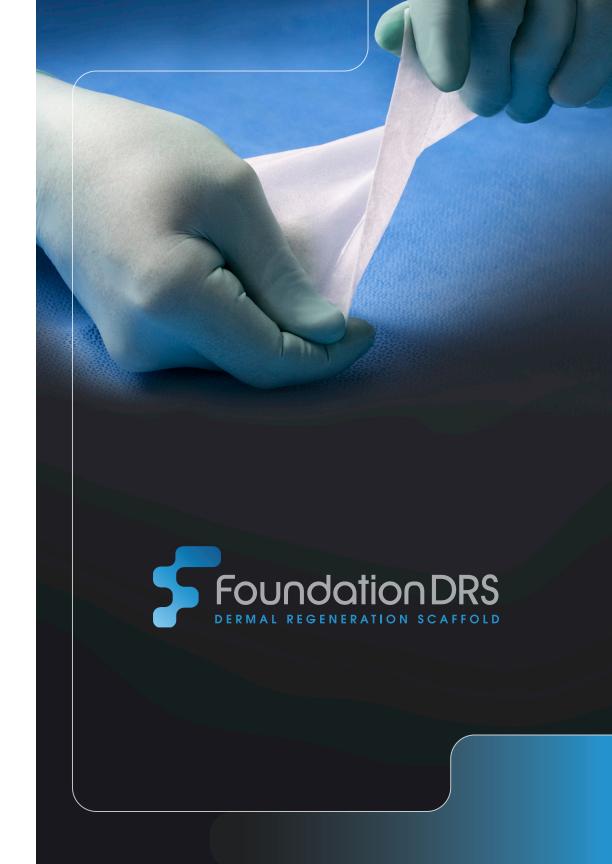
Solo:

5cm x 5cm	(2in x 2in)
10cm x 12.5cm	(4in x 5in)
10cm x 25cm	(4in x 10in)
20cm x 25cm	(8in x 10in)



Bionova Medical, Inc. 3012 Centre Oak Way, Ste. 102 Germantown, Tennessee 38138 P: 901.748.2581 F: 901.748.2583

US Patent# 8,993,540







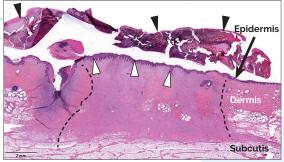


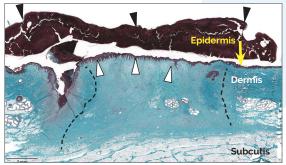
Foundation DRS Solo

Foundation DRS Solo is a novel, biodegradable chitosan-based dermal regeneration scaffold (DRS). Combined with glycosaminoglycan (chondroitin sulfate), Foundation DRS Solo is manufactured using a patented process that yields a scaffold with ideal handling characteristics and porosity to promote cellular invasion and neoangiogenesis. This advanced wound care device is highly conformable and facilitates ordered reconstruction of neodermal tissue.



- Foundation DRS Solo is a collagen-free scaffold made from a chitosan-GAG complex to promote accelerated healing in full and partial thickness wounds
- Can be placed on the wound dry or hydrated (i.e. saline)
- Patented manufacturing method used to produce a biodegradable scaffold with ideal handling characteristics in a dry or wetted state
- Available in multiple sizes to accommodate a wide variety of wound shapes and sizes while minimizing waste





INTENDED USE:

- Full thickness and partial thickness wounds
- Pressure ulcers
- Venous ulcers
- Ulcers caused by mixed etiologies
- Diabetic ulcers
- First degree burns
- Partial thickness burns (superficial second degree burns)
- Donor sites and other bleeding surface wounds
- Abrasions
- Trauma wounds (abrasions, lacerations, skin tears)
- Dehisced wounds
- Surgical wounds (donor sites/grafts, post-Moh's surgery, post-laser surgery, podiatric, wound dehiscence)

See bionovamedical.com for instructions for use.

Representative images at day 14 of a porcine full thickness wound model evaluating Foundation DRS Solo. Note area of reactive granulation tissue filling the surgical wound (within dashed lines). Note serocellular crust with residual dressing covering the area (e.g. black arrowheads). Note near complete epithelialization of the surgical wound (e.g. white arrowheads). There was no evidence of adverse pathology (e.g. necrosis, ineffective granulation, treatment-related exuberant inflammation, hemotoma/seroma formation).