

# AMBIO2<sup>®</sup>

## Pearls for Success

The following protocol can be used as a “best practices” guideline for practitioners utilizing the Ambio2 and other amniotic membrane products during pterygium surgery.

### Addressing the Pterygium site:

- ✓ Meticulously and completely remove the pterygium – including peripheral inflamed Tenon’s capsule
- ✓ Create a “pocket” underneath peripheral host conjunctiva
- ✓ If necessary, apply cautery to stem any and all bleeding
- ✓ Use a burr to clean and smooth out the episcleral bed
- ✓ Dry the surgical site – in preparation for fixation with glue

### Creating the graft:

- ✓ Remove the Ambio2 graft from the see-through pouch by holding the “tab” located in the left hand corner of the graft with non-toothed forceps, The graft can be fashioned accordingly
- ✓ The graft should be sized 2-3 mm larger than the produced defect
- ✓ Optional: Mark Ambio2 in package using gentian violet ink pen

### Placement and fixation of Ambio2 graft:

- ✓ Place the trimmed graft onto the episcleral bed
- ✓ Tuck the peripheral edges of the graft underneath the free edges of host conjunctiva
- ✓ Using a flat tipped cannula, apply 2-3 micro drops of fibrin (blue vial) underneath the AM graft at limbus
- ✓ Using a flat tipped cannula, apply 2-3 micro drops of the thrombin (black vial) underneath the AM graft at limbus
- ✓ Use desired instrumentation with traction and counter-traction to disperse the fibrin/thrombin evenly
- ✓ Wait 2 minutes to allow the glue to properly set and congeal. Do not manipulate the surgical site during this “set” period
- ✓ Following the “set”, shore up any poorly fixated areas with micro-drops of both fibrin and thrombin

