

# Arthrex ACP<sup>®</sup> Tendo

## Application



Sanitize injection site.

**Optional:** Use 25 G needle to inject 1 ml lidocaine or marcaine at the site.

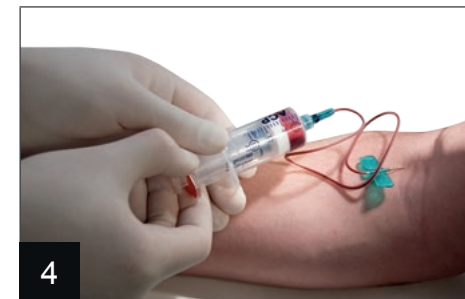


**Accessories:** ACP double syringe, red cap, anticoagulant (optional), centrifuge, bucket, counterweight



**Note:** Take the double syringe out of the packaging, tighten the inner syringe (turn it clockwise) (1) and push both plungers forward until the stop (2).

**Optional:** Withdraw approximately 1.5 ml anticoagulant into the syringe by drawing back only the plunger of the outer syringe that is colored red. If the ACP is injected within 30 minutes after withdrawing, the use of anticoagulant is not required.



Slowly and carefully withdraw the blood by pulling back on the wings that are colored red. Fill the syringe to a maximum of 15 ml of venous blood and seal the syringe with the red cap.

Using an anticoagulant, gently rotate the syringe in order to mix blood and anticoagulant.



Place the syringe into one bucket and an appropriately sized counterbalance into the opposite bucket. Close the buckets with a lid.

**Optional:** The buckets (incl. lids) can be sterilized before usage to maintain sterile conditions.



Run the centrifuge at 1500 rpm for 5 minutes.

**Note:** Remove the syringe, taking care to keep it in an upright position (red cap downwards) to avoid mixing.



In order to transfer the supernatant (ACP) from the larger outer syringe into the small inner syringe, slowly push down on the outer syringe while slowly pulling up the plunger of the small inner syringe.

Transfer 2.7 ml ACP into the inner syringe.



The ACP is ready to be mixed with Vergenix STR.

**Optional:** If required, the remaining ACP can be transferred to any 5 ml syringe or smaller.



9 Open the Vergenix STR kit.

**Note:** Mixing Vergenix STR and ACP should be performed shortly before the injection into the tendon.



10 Connect the Luer lock connector to the syringe containing ACP. Advance the syringe plunger to fill the Luer lock connector with ACP.

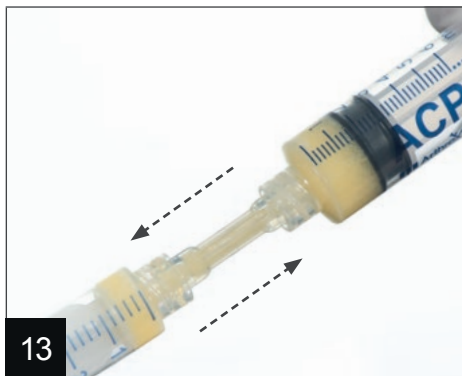


11 **Note:** Make sure that the injection area is ready, including sanitation and anesthesia. The collagen needs to be mixed with ACP shortly before the injection procedure.

Connect the syringe containing the dry collagen to the other side of the Luer lock connector. Transfer the ACP into the syringe containing the dry collagen.



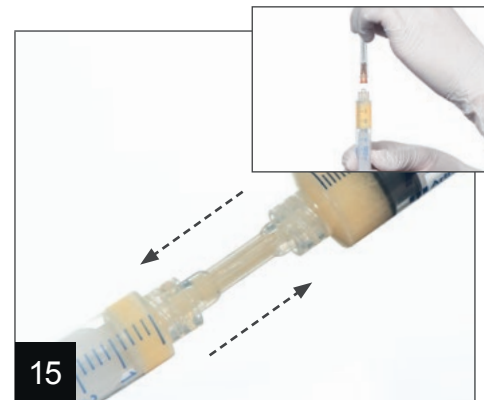
12 Tap the loaded syringe on the palm of the hand ~20 times by holding the empty connected syringe. Disconnect the empty syringe and remove air bubbles by injecting the ACP-collagen solution until the Luer lock connector is filled.



13 Reconnect the empty syringe and mix the solution by transferring it from one syringe to the other ~20 times.



14 Tap the loaded syringe on the palm of the hand ~20 times again by holding the empty connected syringe.



15 Mix the material again between the two syringes. The suspension is ready when it has a uniform pale orange color. Transfer the suspension into one syringe. Disconnect the Luer lock connector and empty syringe. Carefully open the supplied 19 G sterile needle and connect it to the syringe.



16 Inject the suspension into the injured tendon.

