



DermaBind TL

Triple-Layer, Placenta-Based Allograft



THE DERMABIND TL DIFFERENCE

Our **Triple-Layer Allografts**, keep all three layers intact allowing a high abundance of proteins exceeding those found in single or dual layer allografts.

AMNION LAYER

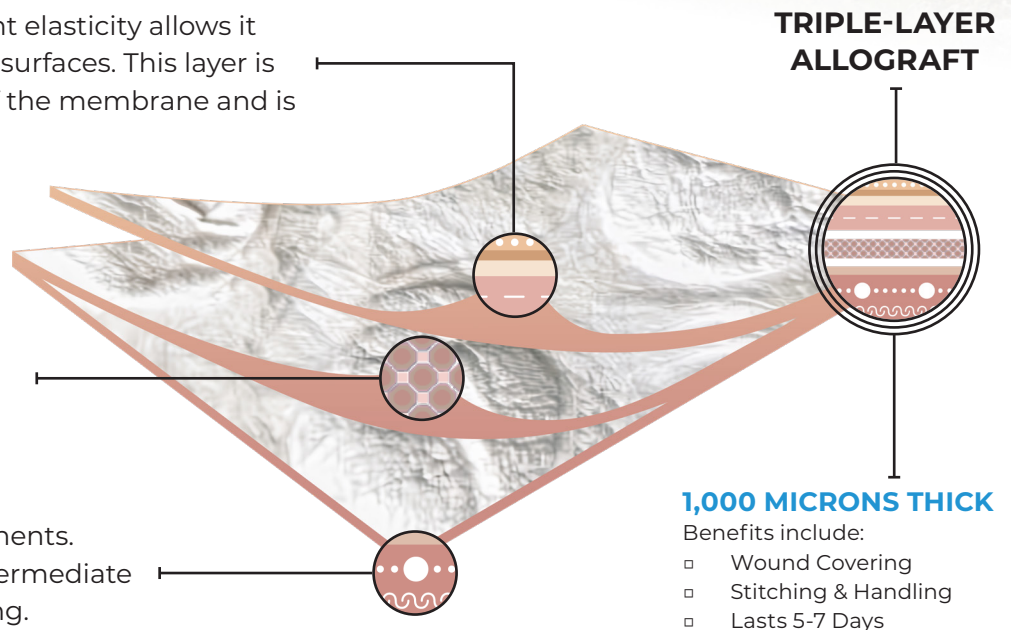
The amniotic membrane's inherent elasticity allows it to conform to complex contoured surfaces. This layer is the main structural component of the membrane and is critical for membrane integrity.

INTERMEDIATE LAYER

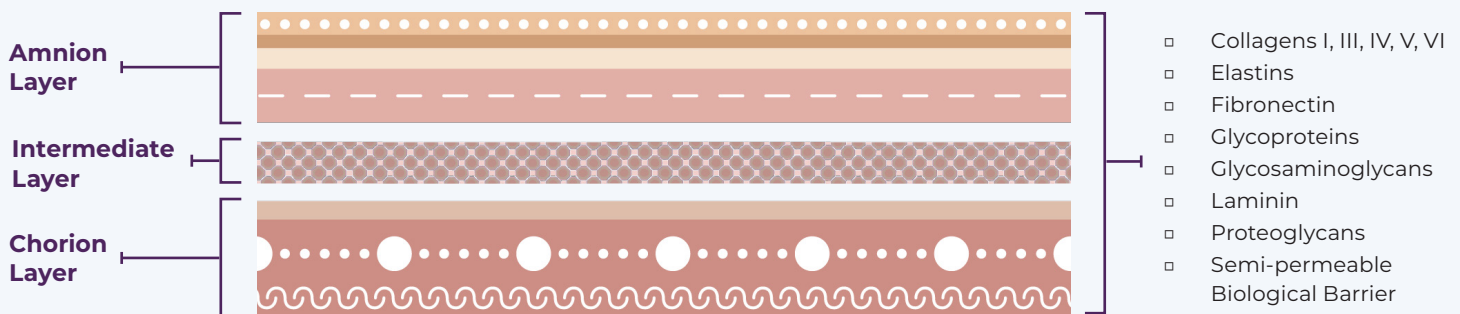
This spongy layer contains acellular barrier between amnion and chorion layers. Nonfibrillar meshwork structure that provides scaffold and cushioning.

CHORION LAYER

Contains structural matrix components. Together with the amnion and intermediate layers prevents wounds from drying.



INTACT PLACENTA CONTAINS 400+ PROTEINS



DTLFSv092424

Manufactured By



For Sales Inquiries



NovaMed Group, LLC

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INTENDED USE

DermaBind TL can be used as a protective wound covering as either a partial and full thickness for chronic wounds.

- Dehisced Wounds
- Diabetic Foot Ulcers (DFUs)
- Pressure Injuries
- Trauma Wounds
- Venous Leg Ulcers (VLUs)

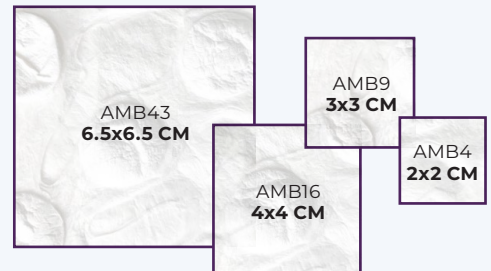
DermaBind TL can be applied 10 times over the course of 12 weeks for the treatment of non-healing wounds.

APPLICATION

- Using aseptic technique, remove DermaBindTL/AmnioBind from the package; the product may be trimmed as necessary.
- Place the DermaBindTL/AmnioBind wound covering onto the wound.
- Assure DermaBindTL/AmnioBind is in intimate contact with the wound bed; the product can be hydrated once placed on the wound bed.
- Adhere DermaBindTL/AmnioBind using preferred fixation method, then cover DermaBindTL/AmnioBind with a primary non-adherent dressing.
- Apply secondary dressings specific to the wound type over the non-adherent layer, which should remain in place for up to one week.

SIZE & STORAGE

- Available in a wide range of sizes.
- Maintain at ambient temperature prior to patient application.
- Do not freeze.
- Up to 4 years shelf life from date of production when kept at room temperature.



REIMBURSEMENT

- Medicare contractors cover DermaBindTL/AmnioBind for VLUs and DFUs[†]
- DermaBindTL/AmnioBind can be applied to, and billed for, other wound types.
- Confirm coverage prior to treatment through our Benefits Program.

[†]Consult with your LCD (local coverage determination) for the specific wound types covered. VLU = venous leg ulcer; DFU = diabetic foot ulcer

DermaBindTL/AmnioBind Billing

Q4225

CPT Codes

Site Preparation CPT[†]
15002-15005

Application CPT codes
15271-15278

[†]Subject to guidelines and approvals, please contact our billing team for further details.

BILLING SUPPORT

REIMBURSEMENT@HEALTHTECHWC.COM

Patent # 11,944,718 B1

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