POST-MOHS CASES USING ORGANOGENESIS SOLUTIONS

CASE STUDY 1 Post-Mohs defect with exposed frenulum and gingiva closed at 6 weeks

Adam J. Cohen, MD

PATIENT DETAILS AND HISTORY

- 89-year-old female
- Medical history: hypertension

SURGICAL DETAILS

Patient underwent Mohs micrographic surgery to remove a basal cell carcinoma on the right upper lip

APPLICATION PROTOCOL

- Applications 1-4: Affinity®, fresh amniotic membrane (post-sharp debridement)
- Patient assessed at return visits and product reapplied if no longer present or resorbed

Affinity 1st application

Wound Area: 6.8 cm²

Two days post-Mohs with exposed frenulum and gingiva

Affinity 2nd application

Wound Area: 4.2 cm²

No exposed structures

Affinity 4th application

Wound Area: 0.8 cm²

Complete wound closure

Patient received 4 applications of Affinity to protect and support healing prior to wound closure

CASE STUDY 2 Post-Mohs defect with exposed bone closed at 7 weeks

Adam J. Cohen, MD

PATIENT DETAILS AND HISTORY

- 102-year-old female
- Medical history: hypertension and hyperlipidemia

SURGICAL DETAILS

Patient underwent Mohs micrographic surgery to remove a squamous cell carcinoma on the right forehead

APPLICATION PROTOCOL

- Application 1: PuraPly® AM, native ECM scaffold + broad-spectrum PHMB antimicrobial (post-Mohs)
- Applications 2-4: NuShield®, dehydrated placental allograft (post-sharp debridement)
- Patient assessed at return visits and product reapplied if no longer present or resorbed

PuraPly AM application

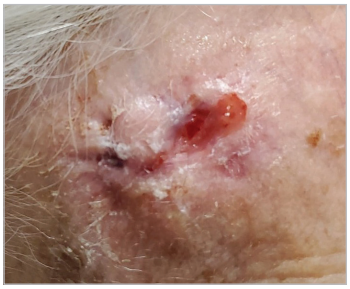
Wound Area: 7.4 cm²

Exposed bone

NuShield 1st application

Wound Area: 5.0 cm²

Exposed bone



NuShield 2nd application

Wound Area: 1.4 cm²

No exposed bone

Complete wound closure

Patient received 1 application of PuraPly AM to control bioburden and support healing
Clinician transitioned to NuShield, as planned, and patient received 3 applications prior to wound closure

ECM=extracellular matrix; PHMB=polyhexamethylene biguanide

POST-MOHS CASES USING ORGANOGENESIS SOLUTIONS

CASE STUDY 3 **Post-Mohs defect with exposed muscle closed at 7 weeks**

Adam J. Cohen, MD

PATIENT DETAILS AND HISTORY

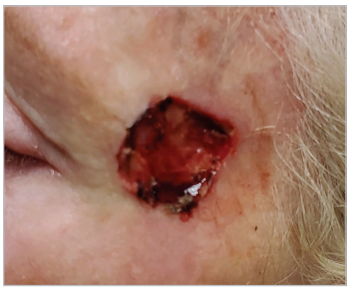
- 77-year-old female
- Patient was healthy with no complicating comorbidities

SURGICAL DETAILS

Patient underwent Mohs micrographic surgery to remove a basal cell carcinoma on the left temporal region

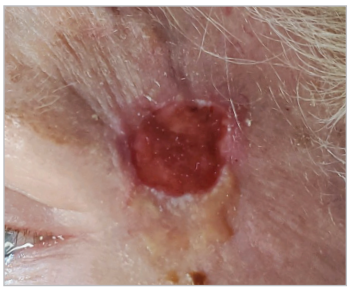
APPLICATION PROTOCOL

- Application 1: PuraPly® AM, native ECM scaffold + broad-spectrum PHMB antimicrobial (post-Mohs)
- Applications 2-4: Affinity®, fresh amniotic membrane (post-sharp debridement)
- Applications 5 & 6: NuShield®, dehydrated placental allograft (post-sharp debridement)
- Patient assessed at return visits and product reapplied if no longer present or resorbed

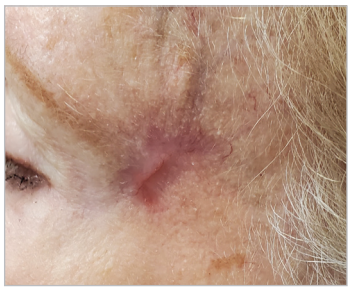


PuraPly AM application
Wound Area: 4.0 cm²
Two days post-Mohs with exposed muscle

Affinity 1st application
Wound Area: 4.0 cm²
No exposed muscle



Affinity 3rd application
Wound Area: 1.6 cm²



Complete wound closure

Patient received 1 application of PuraPly AM to control bioburden and support healing
Clinician transitioned to Affinity, as planned, and patient received 3 applications
Clinician transitioned to NuShield, as it was readily available, and patient received 2 applications prior to wound closure

THE ORGANOGENESIS PORTFOLIO

For second intention healing, our innovative, science-backed solutions are capable of supporting your patients from early in the wound healing process through to closure

PuraPly® AM

A native extracellular matrix scaffold + sustained antimicrobial effectiveness within the product to support wound healing and aid in granulation tissue formation.[1-5]

Affinity®

The only fresh amniotic membrane that retains its extracellular matrix scaffold, proteins, and living cells.[6-9] In a randomized control trial, Affinity was shown to support wound healing.[10]

NuShield®

A complete dehydrated placental allograft that provides a protective barrier and extracellular matrix scaffold to support the body's inherent healing process.[9,11-14]

References: 1. PuraPly Antimicrobial [package insert]. Canton, MA: Organogenesis Inc; 2023. **2.** Davis SC, et al. *Int Wound J.* 2022;19(1):86-99. **3.** Brantley J, et al. *Wounds Int.* 2016;7(3):1-5. **4.** Bain MA, et al. *J Comp Eff Res.* 2020;9(10):691-703. **5.** Data on file. PDR-0008. Organogenesis Inc. **6.** Allograft Tissue Information and Affinity Instructions for Use. Canton, MA: Organogenesis Inc; 2023. **7.** McQuilling JP, et al. *Int Wound J.* 2017;14(6):993-1005. **8.** Data on file. DR-0010. Organogenesis Inc. **9.** Niknejad H, et al. *Eur Cells Mater.* 2008;15:88-99. **10.** Serena TE, et al. *J Comp Eff Res.* 2020;9(1):23-34. **11.** NuShield Allograft Tissue Information and Instructions for Use. Canton, MA: Organogenesis Inc; 2023. **12.** McQuilling JP, et al. *Int Wound J.* 2019;16(3):827-840. **13.** Data on file. Description of BioLoc Process. Organogenesis Inc. **14.** McQuilling JP, et al. *Wound Repair Regen.* 2019;27(6):609-621.