



Vertessa[®] Lite

Polypropylene Mesh for Sacrocolpopexy

Instructions for Use

STERILE **EO** Sterilized using ethylene oxide

⊗ Do not reuse

RX only

Manufactured by:
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Ordering Information
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ENGLISH

CAUTION

Federal Law restricts use of this device to physicians trained in implanting synthetic mesh to treat pelvic organ prolapse.

CAUTION

Read all Information contained in this product label including Indications, Contraindications, Warnings, Precautions, Adverse Reactions, Instructions for Use, etc., prior to using this product.

INDICATIONS

Vertessa[®] Lite may be used for the repair of uterine or vaginal vault prolapse that requires support material. It may be used in open or laparoscopic abdominal procedures.

CONTRAINDICATIONS

- Pregnant patients or patients planning future pregnancies.
- Patients with a urinary tract infection or with an infection in the operative field.
- Implantation into areas with active and latent infection.
- Infants, children, or any patient with future growth potential.

ADVERSE REACTIONS

- Potential adverse reactions are those associated with surgery using implantable mesh materials of this type, including hematoma, urinary incontinence, urinary retention/obstruction, urethral obstruction, voiding dysfunction, pain, infection potentiation, wound dehiscence, nerve damage, recurrent prolapse, adhesion formation, fistula formation, contracture, scarring, and mesh exposure, erosion, or



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extrusion through the vagina or into the bowel or other viscera, seroma, abscess formation, defecatory dysfunction, foreign body response/reaction and inflammation.

- Punctures or laceration of vessels, nerves, bladder, urethra or bowel may occur during mesh placement and may require surgical repair.
- Potential adverse reactions are those associated with pelvic organ prolapse repair procedures, including pelvic pain, pain with intercourse, and narrowing of the vaginal wall.
- Dissection for pelvic floor repair procedures may impair normal voiding for a variable length of time.

WARNINGS AND PRECAUTIONS

- Physicians should have experience in management of the potential complications resulting from abdominal placement of surgical mesh.
- Caution: Federal Law (USA) restricts this device to sale by or on the order of a physician. Physicians should have experience in management of the potential complications resulting from abdominal placement of surgical mesh.
- The reuse of a single-use device can affect its safety, performance, and effectiveness, exposing the patient and staff to unnecessary risk. Additionally, the reuse of a single-use device has legal implications.
- Vertessa[®] Lite Polypropylene Mesh for Sacrocolpopexy implants should only be used by a surgeon familiar with surgical procedures and techniques for sacrocolpopexy and the use of non-absorbable mesh.
- A thorough assessment of each patient should be completed to determine their suitability for a synthetic mesh implant, including patients with a compromised immune system, any condition that would compromise healing, or a history of prior abdominal or pelvic surgeries.
- Vertessa[®] Lite Polypropylene Mesh for Sacrocolpopexy implants may activate an existing or latent infection reaction or sepsis.
- Patients should be counseled to refrain from heavy lifting, intercourse, and exercise for a minimum of six (6) weeks after the procedure. A physician should determine when it is suitable for each patient to return to normal activities.
- In the event that infection presents post procedure, the Vertessa[®] Lite Polypropylene Mesh for Sacrocolpopexy implant may have to be removed or revised.
- If bleeding, dysuria, or other problems occur, the patient should be instructed to contact the physician immediately.
- Avoid tension on the mesh during handling and positioning to prevent damage to the mesh or unfavorable patient outcomes.
- Cystoscopy is recommended to confirm bladder and ureter integrity.
- Suture placement should be at least 1cm from the edge of the mesh and not at the mesh edge. Inadequate suturing of the mesh graft to the pelvic tissues may lead to failure of the repair.
- The safety and effectiveness of Vertessa[®] Lite for pelvic organ prolapse repair by the transvaginal route has not been evaluated.



DESCRIPTION

Vertessa[®] Lite Polypropylene Mesh for Sacrocolpopexy is comprised of macroporous monofilament polypropylene mesh and is designed for the repair of uterine or vaginal vault prolapse via the abdominal route. Vertessa[®] Lite, is designed such that it may be trimmed, without unraveling, to different widths and lengths to fit each patient's anatomical requirements.

PRODUCT TRACEABILITY

Traceability labels are attached to every Vertessa[®] Lite Polypropylene Mesh for Sacrocolpopexy pouch to identify the type and lot number of each device. This label should be affixed to the patient's permanent medical record to clearly identify the device so patients can be notified in the event of a product recall.

STERILIZATION

Vertessa[®] Lite Polypropylene Mesh for Sacrocolpopexy implants are sterilized by ethylene oxide. Do not re-sterilize this product. Do not use if package is opened or damaged. Do not use after the expiration date.

PACKAGING

Vertessa[®] Lite Polypropylene Mesh for Sacrocolpopexy are individually packaged in two sealed pouches. If the pouch is opened or damaged do not use.

STORAGE

Vertessa[®] Lite Polypropylene Mesh for Sacrocolpopexy are recommended to be stored at room temperature in a clean dry place.

Note: Standard operative techniques for a sacrocolpopexy procedure should be followed with using Vertessa[®] Lite Mesh for Sacrocolpopexy implants.

INSTRUCTIONS FOR USE (APPLICATION)

1. Identify the iliac vessels, the vaginal apex, the Douglas pouch and the sacral promontory. An End to End anastomosis (EEA) sizer is placed in the vagina to aid in identifying the vaginal apex.
2. The overlying peritoneum is then incised at the line between bladder and vagina to mobilize the anterior vaginal wall. Using sharp and blunt dissection the bladder is dissected off of the vaginal apex.
3. The posterior vaginal wall is then mobilized and dissected off the rectum by opening the recto-vaginal space.
4. The peritoneum overlay of the promontory is then incised, and care is taken to avoid damage to the vessels or the ureter. The presacral space is dissected until the anterior longitudinal ligament overlying the sacrum is visualized and the peritoneal incision is then extended to the vaginal cuff. Maintain visualization of the right ureter throughout this portion of the procedure to avoid injury.
5. Cut Vertessa[®] Lite mesh into the desired size. Suture to the posterior vaginal wall using surgeon's choice of suture.



6. Cut and introduce a second strap of Vertessa[®] Lite mesh and secure to the anterior vagina using surgeon's choice of suture.
7. The mesh may be fashioned into a Y-shape using permanent monofilament suture either prior to or after being introduced. Suture one flap to the anterior vaginal wall and the other flap to the posterior vaginal wall using surgeon's choice of suture.
8. The remaining sacral flap(s) of mesh is/are then pulled up to the sacrum and after appropriate tensioning, it is secured to the sacrum with the surgeon's choice of suture. If two straps of mesh are used, the suture is passed through both pieces of mesh, through the anterior longitudinal ligament, and then brought back through both pieces of mesh.
9. Any excess mesh is cut and removed.
10. The peritoneum is now closed over the mesh, placing all mesh material in the retroperitoneal space.
11. Close using standard techniques.

Vertessa[®] Lite Instruction For Use (IFU) is available for viewing or download here: <https://www.calderamedical.com/medical-professionals/product-instructions-for-use>. All Caldera Medical IFU documents are available in print form at no additional cost upon request. If you would like to request a copy please contact us at 818.879.6555, fax 818.276.8400 or email info@calderamedical.com.

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