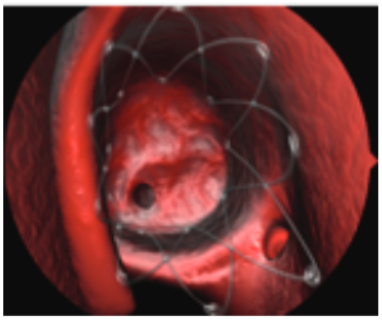
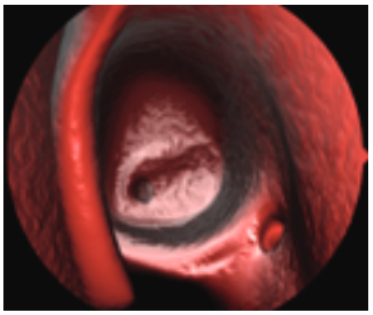
Intra-operative and Post-Operative Best Practices for Sinus Surgery with PROPEL® Mometasone Furoate Implant

Intra-operative Best Practices



- Load the implant less than three minutes before use to maximize PROPEL's strength/radial force.
- The ground/basal lamella supports PROPEL inferiorly.
- Achieving hemostasis minimizes post-operative crusting and facilitates apposition to mucosal tissue, which is the drug delivery target.
  - We recommend removing/suctioning out hemostatic agents before placing PROPEL implant.
  - No hemostatic agents were used in clinical studies.
- Confirm proximal loops of implant align with anterior edge of middle turbinate.
- Confirm the implant is well apposed to the tissue to maximize drug delivery.
  - Implant can be manipulated with standard surgical instrument if needed.
  - If the implant is placed too posteriorly, this may result in middle turbinate lateralization.
  - If the implant is placed too anteriorly and struts are hanging in air, this may result in crusting and suboptimal drug delivery.

Post-operative Best Practices



- **Saline Irrigation:** Frequent sinus irrigations are very important for the healing process. Irrigating (eg. with Neilmed Sinus Rinse™) at least twice a day may keep the PROPEL implant moist.
- **Antibiotics:** In our pilot clinical study, physicians prescribed Amoxicillin with Clavulanic acid at a dose of 875 mg twice a day for 14 days, beginning 1 day pre-operatively.
- **Follow-up:** During debridements, careful suctioning and debris removal around the implant is possible. Remove any obstructive crusts, but leave the implant in place for as long possible.
- **PROPEL is bio-absorbable:** PROPEL will deliver drug for 30 days and absorbs within 30-45 days. Patients may notice thin white fragments migrate from their nose as it dissolves – this is normal.

The PROPEL sinus implant is intended for use in patients ≥ 18 years of age following ethmoid sinus surgery to maintain patency. Contraindications include patients with intolerance to mometasone furoate (MF) or a hypersensitivity to bioabsorbable polymers. Safety and effectiveness of the implant in pregnant or nursing females has not been studied. Risks may include pain/pressure, displacement of implant, and possible side effects of intranasal MF. The most common adverse events in clinical studies were sinusitis, headache, epistaxis and bronchitis. For complete prescribing information see IFU at www.PROPELOPENS.com. Rx only.

MPM 00029 Rev.D

intersect® ENT

PROPEL®
MOMETASONE FUROATE IMPLANT